Cleveland Clinic
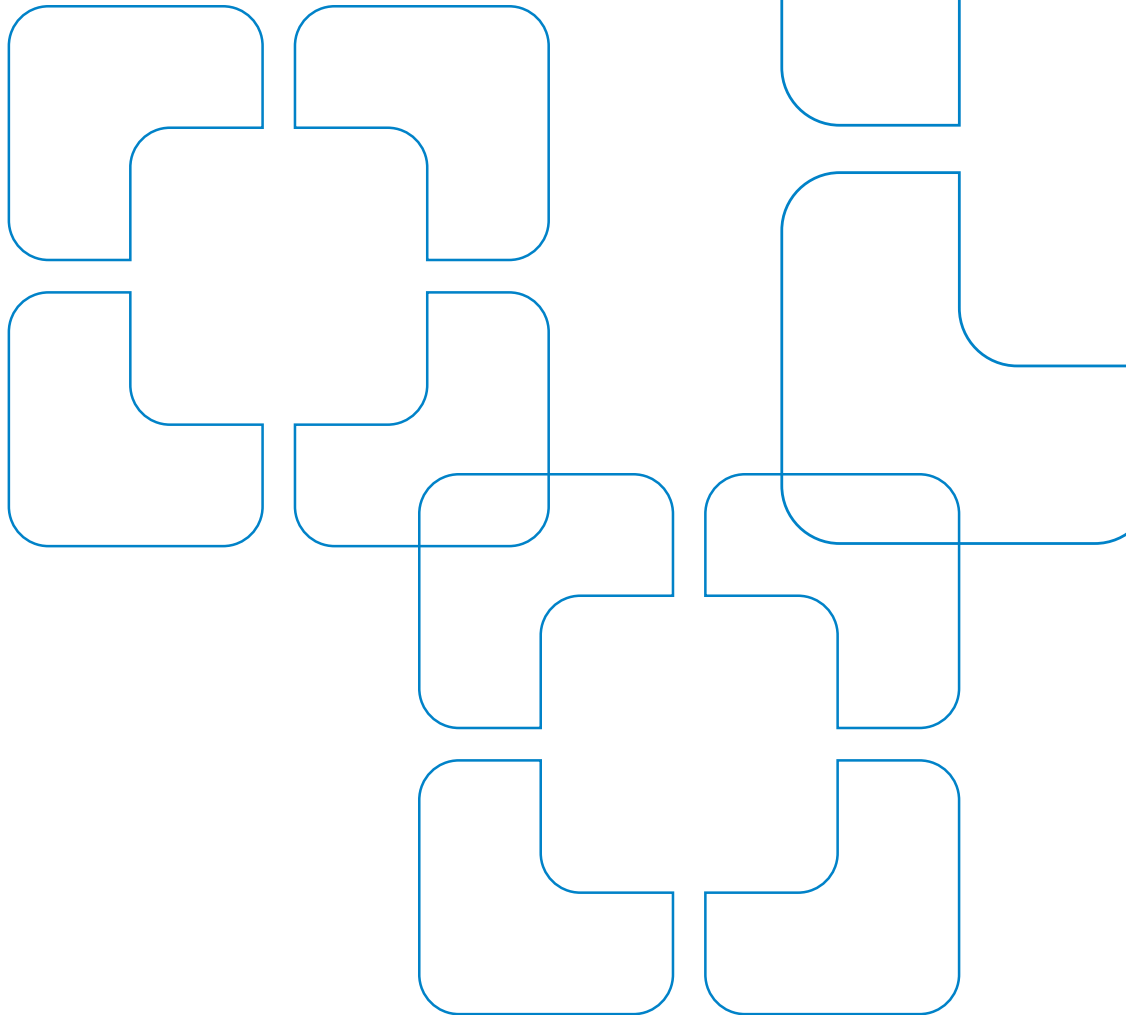**Weston Hospital**

Community Health Needs Assessment
2024

Cleveland Clinic Weston Hospital
2950 Cleveland Clinic Blvd, Weston, FL 33331

2024 Community Health Needs Assessment
As required by Internal Revenue Code § 501(r)(3)

Name and EIN of
Hospital Organizations   Cleveland Clinic Florida Health System
Operating Hospital Facilities: 65-0844880

Date Approved by
Authorized Governing Body: November 15, 2024

Contact: Cleveland Clinic
chna@ccf.org

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2024 Community Health Needs Assessment

I.   INTRODUCTION

Cleveland Clinic Weston Hospital (CCWH), part of the Cleveland Clinic, a nonprofit, multispecialty, academic medical center that integrates clinical and hospital care with research and education. We are a leading provider of comprehensive, high-quality health care. From primary care to advanced, specialized care, Cleveland Clinic's collaborative approach is renowned for improving outcomes and quality of life for patients locally around the world. With locations in Fort Lauderdale, Coral Springs, Parkland, West Palm Beach, Wellington, and Palm Beach Gardens, our physicians have expertise in more than 55 specialties and work as a team to deliver patient-centered, compassionate care. Additional information on the hospital and its services is available at my.clevelandclinic.org/florida.

CCWH is part of the Cleveland Clinic health system, which includes an academic medical center near downtown Cleveland, Ohio, fifteen regional hospitals in northeast Ohio, a children's hospital, a children's rehabilitation hospital, five southeast Florida hospitals, and several other facilities and services across the states of Ohio, Florida, and Nevada. Cleveland Clinic is one of the world's largest and best healthcare systems, with 80,642 caregivers, 23 hospitals, and 276 outpatient facilities in locations around the globe[*].

Each Cleveland Clinic hospital supports a tripartite mission of patient care, research, and education. Research is conducted at and in collaboration with all Cleveland Clinic hospitals. Through research, Cleveland Clinic has advanced knowledge and improved community health for all its communities, from local to national, and across the world. This allows patients to access novel techniques and participate in research trials no matter where they access care. Through education, Cleveland Clinic trains health professionals who provide access to health care across Ohio, Florida, and the United States.

Cleveland Clinic was at the forefront of modern medicine when its founders opened it as a multi-specialty group practice in 1921. In its first century, Cleveland Clinic introduced many medical firsts, opened facilities around the world, and is proud to be ranked among the top hospitals in the country. Now, 100 years later, the vision of the founders remains Cleveland Clinic's mission: caring for life, researching for health, and educating those who we serve. Additional information about Cleveland Clinic is available at my.clevelandclinic.org.

Cleveland Clinic is much more than a healthcare organization. We are part of the social fabric of the community, creating opportunities for those around us and making the communities we serve healthier. We are listening to our neighbors to understand their needs, now and in the future. The health of every individual affects the broader community.

*Please note: The statistics reflect official year-end totals as of Dec. 31, 2023.

According to the National Academy of Medicine, only 20% of a person's health is related to the medical care they receive. Other factors have a lifelong impact, accounting for 80% of a person's overall health. These social determinants of health are conditions in which people grow, work, and live – including employment, education, food security, housing, life expectancy, chronic diseases, infant mortality, substance use disorders, and several others.

To address health disparities, we lead efforts in clinical and non-clinical programming, advocacy, building partnerships, sponsorship, and community investment. We are actively partnering with community leaders to help strengthen community resources and mitigate the impact of these social determinants of health. Cleveland Clinic is optimistic that through implementing these long-term efforts, frequently re-assessing the community's needs, and remaining committed to addressing key social determinants of health, sustainable change can be made. CCWH recognizes that addressing social and economic challenges requires seeing the bigger picture and maintaining steady progress. The challenges to health disparities are historically rooted and thus require multi-faceted, long-term solutions to observe improved health outcomes over time, through many cycles of community health needs assessments and implementation strategies. Improving healthcare challenges today paves the way for better outcomes for future generations in the communities we serve. By engaging with partners who share our commitment, we can create better, healthier communities for everyone.

Each Cleveland Clinic hospital conducts a Community Health Needs Assessment (CHNA) to understand and plan for the current and future health needs of residents and patients in the communities it serves. The CHNAs inform the development of strategies designed to improve community health, including initiatives designed to address social determinants of health.

A. CHNA Process and Methodology

CHNA Background

On December 1, 2023, Cleveland Clinic Weston Hospital engaged Carnahan Group to conduct a Community Health Needs Assessment (CHNA) in 2024 as required by the Patient Protection and Affordable Care Act (PPACA). For more information on Carnahan Group, please refer to Appendix B: Carnahan Group Qualifications.

A CHNA is a report based on epidemiological, qualitative, and comparative methods that assess the healthcare and public health issues in a hospital organization's community and that community's access to services related to those issues. Based on the 2024 CHNA findings, CCWH will develop and adopt an implementation strategy addressing the identified community health needs by May 15, 2025.

Collaborating Organizations

The facilities within Cleveland Clinic's five-hospital regional health system in Florida collaborate to share community health data and resources throughout the CHNA and implementation strategy processes. For this assessment, Weston Hospital collaborated with the following Cleveland Clinic hospitals: Martin North and Martin South, Tradition and Indian River.

501(r)(3) CHNA Regulations

The Patient Protection and Affordable Care Act, enacted on March 23, 2010, requires not-for-profit hospital organizations to conduct a CHNA once every three taxable years that meets the requirements of the Internal Revenue Code 501(r). The PPACA defines a hospital organization as an organization that operates a facility required by a state to be licensed, registered, or similarly recognized as a hospital; or a hospital organization is any other organization that the Treasury's Office of the Assistant Secretary ("Secretary") determines has the provision of hospital care as its principal function or purpose constituting the basis for its exemption under section 501(c)(3).

As required by the Treasury Department ("Treasury") and the Internal Revenue Service (IRS), this CHNA includes the following:

- A description of the community served;
- A description of the process and methods used to conduct the CHNA, including:
  - A description of the sources and dates of the data and the other information used in the assessment; and,
  - The analytical methods applied to identify community health needs.
- The identification of all organizations with which CCWH collaborated, if applicable, including their qualifications;
- A description of how CCWH took into account input from persons who represented the broad interests of the community served by CCWH, including those with special knowledge of or expertise in public health, written comments regarding the hospital's previous CHNA, and any individual providing input who was a leader or representative of the community served by CCWH; and,
- A prioritized description of all the community health needs identified through the CHNA and a description of the process and criteria used in prioritizing those needs.

Primary Data Collection Strategy

This CHNA was conducted following the requirements outlined by the Treasury and the IRS, which included obtaining necessary information from the following sources:

- Input from persons who represented the broad interests of the community served by CCWH, which included those with special knowledge of or expertise in public health;
- Identifying federal, regional, state, or local health or other departments or agencies, with current data or other information relevant to the health needs of the community served

by CCWH, leaders, representatives, or members of medically underserved, low-income, and minority populations with chronic disease needs in the community served by CCWH; and,

- Consultation or input from other persons located in and/or serving CCWH's community, such as:
  - Healthcare community advocates
  - Nonprofit organizations
  - Local government officials
  - Community-based organizations, including organizations focused on one or more health issues
  - Healthcare providers, including community health centers and other providers focusing on medically underserved populations, low-income persons, minority groups, or those with chronic disease needs
- The primary data sources utilized for CCWH's CHNA are provided in Appendix C. Information was gathered by conducting interviews with individuals representing community health and public service organizations, and medical professionals.

Secondary Data Collection Strategy

A variety of data sources were utilized to gather demographic and health indicators for the community served by CCWH. Commonly used data sources include Esri, the U.S. Census Bureau, and the Centers for Disease Control and Prevention (CDC). Broward County defines the community served by CCWH. Demographic and health indicators are presented for these areas. Initial secondary data collection was completed utilizing the most recent periods of data available as of July 31, 2024.

For select indicators, county-level data are compared to state and national benchmarks. Additionally, Healthy People 2030 (HP 2030) Goals are presented where applicable. The HP 2030 Goals are measurable, ten-year public health objectives to help individuals, organizations, and communities across the United States improve health and well-being.

B. Community Definition

For the CHNA report, CCWH defines the community as Broward County, Florida, as displayed on the map below. Demographic data by ZIP Code was analyzed by CCWH to ensure that medically underserved, low-income, or minority populations who live in the geographic areas from which the hospital draws patients were not excluded from the defined community. CCWH acknowledges that additional patients served via telehealth may reside within a broader geographic area.
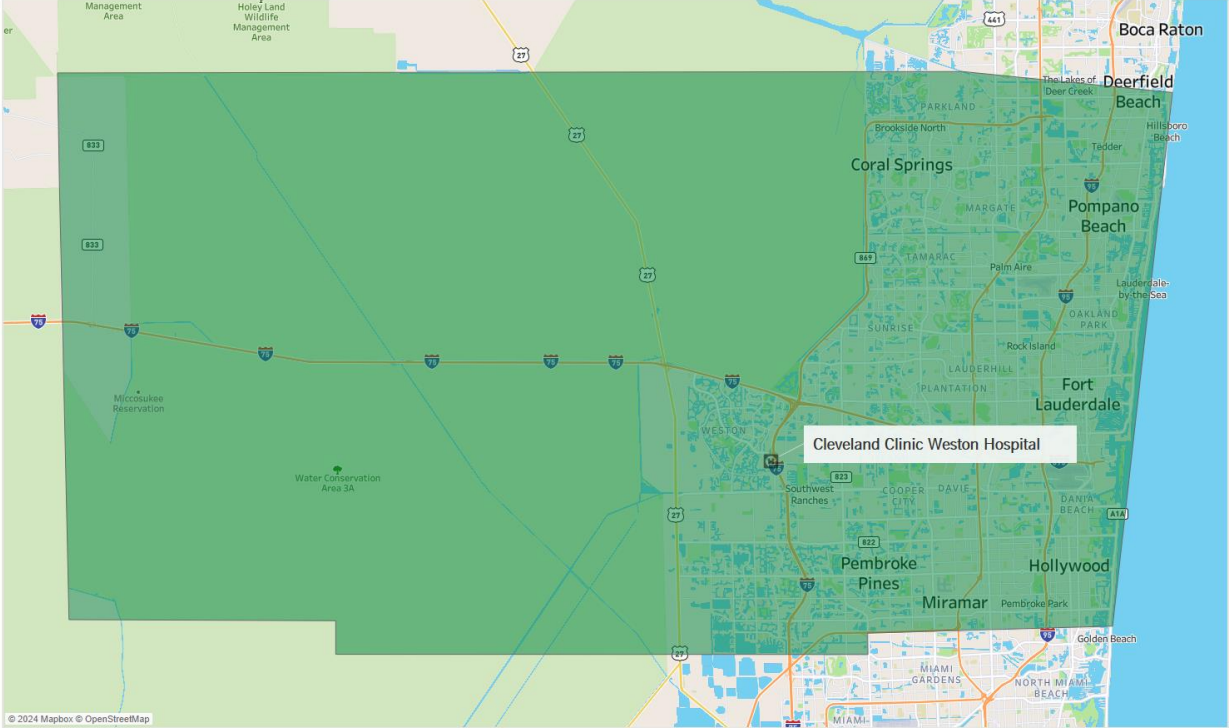
Figure 1 - Defined Community, Source: CCWH

Inpatient Discharges by ZIP Code

CCWH reviewed inpatient, outpatient, and emergency department discharge data for the calendar year 2022. ZIP Codes reflecting the top 75% of inpatient, outpatient, and emergency department discharges within the most recent year of data were prioritized for inclusion within the defined community. The top patient discharges by ZIP Code for the facility are featured in Appendix F.

II. EXECUTIVE SUMMARY

A. Prioritized Community Health Needs

This Community Health Needs Assessment (CHNA) is constructed to serve as a tool for community program planning and act as a guide for allocating community resources and efforts where they are needed most. The overarching goals in conducting this CHNA are to identify significant health needs of the community, prioritize those health needs, and identify potential resources available to address those health needs.

An extensive list of the community's health concerns was established through analysis of both primary and secondary data. This list of needs was entered into a decision matrix to establish which priorities were most pressing for the community. Ranked factors considered during this process include benchmarked secondary data, categorized coded primary data, information related to the burden, scope, severity, or urgency of the health need, the feasibility and effectiveness of intervening, the presence of health disparities, the hospital's and health system's strategic priorities, and local County Health Improvement Plans (CHIP) and the Florida State Health Improvement Plan (SHIP).

The prioritized community health needs (listed in alphabetical order) identified during CCWH's 2024 CHNA are listed below.

- Access to Care
- Behavioral Health
- Chronic Disease Prevention & Management
- Maternal and Child Health
- Socioeconomic Concerns

Figure 1 – Prioritized list of community health needs

Access to Care

Health insurance   Affordability
Provider shortages   Transportation
Awareness of resources   Fear

Access to care ranked as the most consistently mentioned health concern among community leaders, with specific emphasis on financial and cultural barriers. Broward County is the most racially diverse county in Florida, and leaders highlighted the need to ensure that culturally relevant care is being provided across the healthcare system.

When discussing barriers to access to care, affordability surfaced as a major concern for residents of Broward County. Leaders voiced that the state's lack of Medicaid expansion, the high cost of insurance, and the added cost of insurance co-pays and deductibles all contribute to the challenge of affording care.

Key community leaders indicated that while access issues are present for many individuals in Broward County, there is an amplified concern for the large Hispanic and immigrant populations' access to care. Interviewees cited cultural barriers, language barriers, and general mistrust of the healthcare system as major deterrents to accessing care. The need for more culturally diverse staffing and the desire for greater emphasis on culturally competent care arose as a common theme among community representatives. Additionally, leaders stated that many immigrants and non-native English speakers face challenges in navigating the healthcare system, highlighting a need for more health literacy and support services.

Community leaders voiced that provider supply is a major barrier to accessing care, citing prolonged wait times to schedule appointments as a deterrent to seeking treatment. Leaders voiced the need for more primary care physicians, obstetricians, and behavioral health providers to serve the population. Leaders also emphasized shortages of specialists, namely, cardiologists, gastroenterologists, and pediatric therapists/counselors. These deficits in the healthcare workforce have resulted in low appointment availability, which has caused community members to delay care or rely on emergency services rather than outpatient care.

The Healthy People 2030 leading health indicators include the following items related to access to care:

- Children, adolescents, and adults who use the oral healthcare system
- Persons with medical insurance

The Census Bureau indicates that Broward County has a higher percentage of residents without health insurance, including adults and children aged 19 and under, when compared to state and national benchmarks. Certain census tracts within Broward County are designated by the Health Resources and Services Administration as containing Health Professional Shortage Area (HPSA) populations and Medically Underserved Populations. Additionally, over 40 percent of county residents speak a language other than English in the home.

Increasing access to care is a priority area within Broward County's 2021 – 2026 Community Health Improvement Plan (CHIP), with a specific priority of increasing the portion of children ages 0-18 with health insurance coverage.

Behavioral Health

Mental Health
Anxiety & Depression
Suicide

Substance Use Disorders
Toxic Stress

Behavioral health, which includes mental health and substance use, was a major community health concern among community leaders. Mental health and substance use issues do not discriminate based on race, age, or socioeconomic status; however, some populations are disproportionately affected and receive treatment the least. Additionally, it is important to note that behavioral health and physical illness are intrinsically linked, being that depression, anxiety, and substance use disorders can affect a person's desire and ability to make healthy choices.

Community leaders made note of an increase in mental health and substance use concerns for adolescents (ages 10-19), stating that there's been a noticeable increase in depression, anxiety, and co-occurring substance use. Additional areas of concern included social isolation in elderly populations, maternal mental health, and post-partum depression, and increasing access to behavioral health services for underserved populations such as those experiencing homelessness, and the LGBTQ+ population.

The Healthy People 2030 leading health indicators include the following items related to behavioral health:

- Drug overdose deaths
- Suicides
- Adolescents with major depressive episodes (MDEs) who receive treatment
- Adults engaging in binge drinking of alcoholic beverages during the past 30 days

According to FL Health Charts data for 2020-2022, Broward County has higher rates of hospitalizations for mental disorders across all age groups when compared to the state benchmarks. When examining specific categories within mental health, data for Broward County shows that residents have a higher number of poor mental health days and more frequent mental distress than the state average. Examining the behavioral health provider supply reveals that the county has higher rates of mental health counselors, licensed psychologists, licensed social workers, and overall behavioral health specialists.

Behavioral health, stated as mental well-being and substance use prevention, is included as a priority area within the 2022-2026 State Health Improvement Plan for Florida.

Chronic Disease Prevention & Management

Prevention & Early Screening
Heart Disease & Stroke

Behavioral Risk Factors
Healthy Aging

Chronic disease prevention and management was identified as a leading health concern for Broward County. Chronic diseases decrease one's quality of life substantially; however, they may be prevented and managed by controlling individuals' modifiable risk factors, like body mass index, cholesterol, and blood pressure. The primary and secondary data for Broward County both indicate the need to address chronic illness within the community, namely, diabetes, cancer, stroke, and heart disease. Community leaders expressed that racial and economic disparities are evident and are an indicator of residents who will receive adequate care for their chronic illnesses and those who will not.

Stakeholders advocated that, based on the prevalence of chronic disease, there's a clear need to increase the number of primary care providers within the community and institute practices for better management of chronic disease among residents. Additionally, Broward County's elderly population has its own subset of illnesses associated with healthy aging. Dementia and Alzheimer's disease ranked as the number eight cause of death within the county and also had a higher rate of deaths within the county (44.8) when compared to the Florida state rate of 31.0, substantiating a need for elderly support services and increased early dementia screenings.

The Healthy People 2030 leading health indicators include the following items related to Chronic Disease Management and Prevention:

- Consumption of calories from added sugars by persons aged 2 years and over
- Persons who are vaccinated annually against seasonal influenza
- Persons who know their HIV status
- Children and adolescents with obesity
- Adults who meet current minimum guidelines for aerobic physical activity and muscle-strengthening activity
- Adults who receive a colorectal cancer screening based on the most recent guidelines
- Adults with hypertension whose blood pressure is under control
- New cases of diagnosed diabetes in the population
- Current use of any tobacco products among adolescents
- Cigarette smoking in adults

In Broward County, 53% of residents live within half of a mile of a fast-food restaurant and the percentage of adults with obesity is worse than the Florida state benchmark. Residents of Broward County have higher rates of stroke and heart disease, across all races/ethnicities, when compared to the Florida state benchmarks. When taking a closer look into age-adjusted heart disease by race, statistics show that Black non-Hispanic populations have a higher incidence of hypertension as compared to Florida's state average. Also, the county's rate of

emergency room visits due to diabetes and the percentage of adults who have been diagnosed as pre-diabetic are both higher than the state averages.

Chronic disease prevention and management is listed as a priority area within the 2022-2026 State Health Improvement Plan for Florida.

Maternal and Child Health

Prenatal Care   Maternal & Infant Mortality
Pregnancy Risk Factors   Affordable Childcare

Maternal and child health is a major indicator of a community's health—after all, it determines the health of families and the health of the next generation. The health of mothers before, during, and post-pregnancy influences the health and well-being of infants. The differences in health outcomes for mothers and their children based on race, ethnicity, and socioeconomic status presented to be a significant health challenge within Broward County. Several key informants indicated concerns regarding access to prenatal care along with disproportionately poorer health outcomes, for Black, Hispanic, and immigrant populations.

The Healthy People 2030 leading health indicators include the following items related to maternal and child health:

- Infant deaths
- 4th-grade students whose reading skills are at or above the proficient achievement level for their grade
- Maternal deaths

According to FL Health Charts, Broward County's maternal mortality from 2020-2022 was much worse for Black mothers when compared to other races and ethnicities within the county and when compared to the state benchmark. Looking closer into the rates of infant mortality by race reveals Black infants also have much higher mortality rates than any other race or ethnicity within Broward County. Data on birth outcomes and risk factors also show that a lower percentage of mothers receive prenatal care within the first trimester when compared to the state's average, indicating that gaps for early interventions in care may exist.

Maternal and child health is included as a top priority in the 2022-2026 State Health Improvement Plan for Florida and in Broward County's 2020-2026 County Health Improvement Plan.

Socioeconomic Concerns

Affordable & Safe Housing
Food Insecurity
Economic Stability

Safety (gun violence)
Physical Activity Opportunities

Community leaders and public health experts expressed a profound understanding of social, economic, and environmental factors that impact a great percentage of the population's health. These factors include employment, income, the neighborhood and built environment, literacy skills and level of education, systemic factors such as racism, transportation, access to healthy foods, and more. Transportation, economic stability, access to healthy foods, and housing security arose as the greatest socioeconomic concerns for residents in Broward County. Stakeholders voiced that navigating these challenges places undue burdens on individuals and families living within the county, making it difficult to achieve optimum health.

Healthy People 2030 leading health indicators include the following items related to socioeconomic concerns:

- Household food insecurity and hunger
- Exposure to unhealthy air
- Homicides
- Employment among the working-age population

The data on socioeconomic factors included within this assessment such as housing, transportation, food index, racial segregation, educational attainment, and environmental factors, provides a snapshot of the healthcare setting in which Broward County's residents live. The percentage of ALICE households, individuals below poverty, and the percentage of children below poverty in Broward County are all worse than the state of Florida's benchmarks.

According to the U.S. Census Bureau, residents in Broward County have a significantly higher median rental cost when compared to both the state and national median. Additionally, the county has a higher percentage of renter-occupied housing units when compared to the state and national averages. Residents of Broward County experience a much greater burden of severe housing costs of 24 percent when compared to the state and national averages of 19 and 17 percent. Additionally, Broward County has a higher percentage of households with no vehicle available compared to the state's benchmark.

An individual's level of education is strongly associated with one's quality of life, health outcomes, and life expectancy. It is a major determinant in shaping future opportunities, employment, and income. Broward County has a slightly lower percentage of people who have obtained a high school degree or equivalent than the state benchmarks.

Social and Economic Concerns is one of seven priority areas within the 2022-2026 State Health Improvement Plan for Florida.

B. Health Equity

Cleveland Clinic Weston Hospital (CCWH) acknowledges that the true strength and measure of a community's health is only as strong as the health of its most vulnerable populations. Across the nation, health inequities and disparities persist by race, gender, economic status, sexual orientation, and geographical location; Broward County are no exception. The Office of Health Studies estimates that in 2022, clinical care impacted only 20 percent of county-level variation in health outcomes, while socioeconomic concerns affected as much as 50 percent. Many of these factors such as generational poverty, employment opportunities, access to healthy foods, and access to quality education are often beyond the individuals' control yet have the greatest impact on one's trajectory of health. These social disadvantages are reflected in health disparities for chronic diseases, infant and maternal mortality, mental illness, and substance use disorders, and overall life expectancy. CCWH is committed to improving these patterns of inequity and working with the community to alleviate health disparities.

With equity at the forefront of every decision, Cleveland Clinic recognizes that health equity should not merely serve as a strategic priority but exists as an embedded concept within the organization's mission, culture, and daily workflows. Healthy People 2030 asserts that if we are truly striving for health equity, we must "value everyone equally with...ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and health care disparities." As a leader in global healthcare, Cleveland Clinic proactively assesses our system's practices and policies to determine where inequities are produced and where solutions can be implemented on a wide scale. To truly advance health equity and implement systematic change, Cleveland Clinic ingrains principles of health equity within each strategic priority and meaningfully considers root causes of inequities in all levels of decision-making.

CCWH is committed to extending care beyond the four walls of our hospitals and clinics to listen to residents' concerns and collaborate with community organizations, to address the pressing needs of the communities we serve. Our dedication to advancing health equity and institutionalizing organizational change is exemplified by our commitment to stakeholder collaboration, engaged leadership, and ongoing training and quality improvement efforts. By operating through an equity-focused lens, CCWH aims to embed equity as a common standard and approach to health, patient care, and community welfare, to support our communities in reaching their full potential.

III. SECONDARY DATA OVERVIEW

The following sections provide a snapshot of the community's demographics, an overview of the community's healthcare setting, and an environmental scan of county and state-level assessments. Please see Appendix E for detailed secondary data.

A. Population Demographics

Population Growth

The community's population will grow by 2.1% over the next five years. Significant population growth is expected for Fort Lauderdale ZIP Codes 33315, 33301, and 33323. Small levels of population decline are anticipated within certain Fort Lauderdale, Hollywood, and Deerfield Beach ZIP Codes.

Population Growth

ZIP Code	Community	2023 Population	2028 Population	5 Year Percentage Change
33332	Fort Lauderdale	10,913	10,671	-2.2%
33028	Pembroke Pines	26,245	25,783	-1.8%
33330	Fort Lauderdale	14,660	14,405	-1.7%
33327	Fort Lauderdale	21,979	21,620	-1.6%
33019	Hollywood	15,780	15,525	-1.6%
33063	Pompano Beach	57,170	56,288	-1.5%
33023	Hollywood	67,012	66,002	-1.5%
33026	Hollywood	30,244	29,820	-1.4%
33441	Deerfield Beach	28,492	28,144	-1.2%
33024	Hollywood	74,363	73,494	-1.2%
33325	Fort Lauderdale	31,055	30,697	-1.2%
33442	Deerfield Beach	31,847	31,504	-1.1%
33326	Fort Lauderdale	34,894	34,535	-1.0%
33305	Fort Lauderdale	13,058	12,950	-0.8%
33308	Fort Lauderdale	30,485	30,302	-0.6%
33029	Hollywood	47,295	47,141	-0.3%
33064	Pompano Beach	64,218	64,068	-0.2%
33313	Fort Lauderdale	61,097	60,969	-0.2%
33071	Coral Springs	39,627	39,602	-0.1%
33311	Fort Lauderdale	69,858	69,823	-0.1%
33319	Fort Lauderdale	54,186	54,166	0.0%
33068	Pompano Beach	53,677	53,672	0.0%
33328	Fort Lauderdale	29,644	29,670	0.1%
33067	Pompano Beach	28,317	28,358	0.1%
33322	Fort Lauderdale	40,855	40,925	0.2%
33317	Fort Lauderdale	38,729	38,870	0.4%
33331	Fort Lauderdale	23,330	23,436	0.5%
33312	Fort Lauderdale	51,890	52,130	0.5%
33021	Hollywood	50,309	50,572	0.5%
33027	Hollywood	66,020	66,664	1.0%
33076	Pompano Beach	44,045	44,670	1.4%
33321	Fort Lauderdale	52,077	52,824	1.4%
33306	Fort Lauderdale	3,299	3,358	1.8%
33066	Pompano Beach	16,570	16,947	2.3%
33069	Pompano Beach	29,887	30,585	2.3%
33073	Pompano Beach	33,942	34,763	2.4%
33009	Hallandale	44,093	45,324	2.8%
33309	Fort Lauderdale	39,412	40,535	2.8%
33316	Fort Lauderdale	13,300	13,702	3.0%
33065	Coral Springs	60,292	62,262	3.3%
33304	Fort Lauderdale	20,317	21,077	3.7%
33314	Fort Lauderdale	30,680	32,036	4.4%
33324	Fort Lauderdale	49,683	52,125	4.9%
33060	Pompano Beach	38,703	40,765	5.3%
33334	Fort Lauderdale	28,699	30,365	5.8%
33025	Hollywood	78,945	83,620	5.9%
33062	Pompano Beach	25,086	26,589	6.0%
33351	Fort Lauderdale	37,694	40,694	8.0%
33020	Hollywood	46,973	51,751	10.2%
33315	Fort Lauderdale	13,638	15,343	12.5%
33301	Fort Lauderdale	24,996	29,174	16.7%
33323	Fort Lauderdale	22,712	28,906	27.3%
33004	Dania	16,833	21,501	27.7%
Grand Total		**1,979,125**	**2,020,722**	**2.1%**

Figure 2 - Population change by ZIP Code, Source: Esri 2023.

Population by Age Group

The populations of residents aged 5-29 (children and young adults) and 50-64 are expected to decrease slightly over the next five years. Significant population growth is expected for adults aged 35-39, and adults over the age of 65. The median age within Broward County was 41.0 years which was younger than the Florida median (42.4 years) according to the U.S. Census Bureau American Community Survey 2018-2022 Five-Year Estimates.

Age Group	Female			Male		
	2023 Population	2028 Population	5 Year Percentage Change	2023 Population	2028 Population	5 Year Percentage Change
Age 0-4	49,587	51,611	4.1%	51,016	53,469	4.8%
Age 5-9	52,713	51,720	-1.9%	54,806	53,453	-2.5%
Age 10-14	55,592	54,620	-1.7%	58,149	57,005	-2.0%
Age 15-19	52,936	52,008	-1.8%	55,072	54,180	-1.6%
Age 20-24	55,724	54,672	-1.9%	55,784	53,649	-3.8%
Age 25-29	67,229	65,037	-3.3%	67,761	63,998	-5.6%
Age 30-34	70,003	70,819	1.2%	70,041	71,357	1.9%
Age 35-39	65,689	73,639	12.1%	64,066	73,506	14.7%
Age 40-44	64,879	66,309	2.2%	60,699	64,012	5.5%
Age 45-49	61,406	63,937	4.1%	58,392	59,884	2.6%
Age 50-54	66,722	59,932	-10.2%	63,041	56,004	-11.2%
Age 55-59	68,808	64,496	-6.3%	64,601	59,162	-8.4%
Age 60-64	69,963	65,582	-6.3%	64,216	60,169	-6.3%
Age 65-69	64,156	67,167	4.7%	56,320	59,615	5.9%
Age 70-74	54,101	60,390	11.6%	45,765	50,039	9.3%
Age 75-79	40,085	49,762	24.1%	31,872	38,845	21.9%
Age 80-84	27,526	35,986	30.7%	20,123	26,164	30.0%
Age 85+	31,123	35,913	15.4%	19,159	22,611	18.0%
Grand Total	1,018,242	1,043,600	2.5%	960,883	977,122	1.7%

5 Year Percentage Change
-11.2%   30.7%

Figure 3 - Population change by age group, Source: Esri 2023

Population Race/Ethnicity

Broward County has a more diverse racial/ethnic breakdown than the state of Florida. Roughly one-third of the defined community is white (32.3%), one-third is Hispanic (32.1%), and over one-quarter is Black/African American (26.5%). Individuals of two or more races make up 3.9% of the population, Asian individuals an additional 4.0%, American Indian and Alaska Native individuals represent 0.2%, and others comprise the remaining 1.1%. Substantial population growth is expected for the Hispanic population (5.5%), Asian/Pacific Islander population (10.4%), and individuals of two or more races (12.8%). The white population within the defined community is expected to decline (-3.6%).

Race and Ethnicity	2023 Population	2028 Population	5 Year Percentage Change
Multiple Races	77,291	87,211	12.8%
Asian	78,991	87,173	10.4%
Hispanic	634,753	669,353	5.5%
Other Race	21,952	22,626	3.1%
Black/African American	523,994	534,912	2.1%
American Indian Alaska Native	2,979	2,986	0.2%
Pacific Islander	700	699	-0.1%
White	638,465	615,762	-3.6%
Grand Total	1,979,125	2,020,722	2.1%

Figure 4 - Population change by race/ethnicity, Source: Esri 2023

Language and Foreign-Born Population

A larger portion of foreign-born individuals resided in Broward County than in Florida and the United States from 2018 to 2022. Similarly, a greater percentage of residents spoke a language other than English within the home during the same time frame.

	Broward County	Florida	United States
Foreign born population	28.1%	20.7%	13.6%
Language other than English spoken at home	42.5%	29.9%	21.7%

Figure 5 – Language and foreign-born population, Source: U.S. Census Bureau ACS 2018-2022, shading indicates the county measure was greater than or worse than the state benchmark value

Computer and Internet Access

Households within Broward County had more computer and broadband internet access than the state and national averages.

	Broward County	Florida	United States
Households with a computer	95.8%	95.2%	94.0%
Households with broadband internet subscription	89.8%	88.8%	88.3%

Figure 6 - Computer and internet access, Source: U.S. Census Bureau ACS 2018-2022

Veteran Population

According to the U.S. Census Bureau's 2018-2022 American Community Survey estimates, 4.3% of Broward County residents were veterans, compared to 7.9% of Florida residents and 6.6% of the U.S. population. The poverty rate for veterans was greater within Broward County than across the state and nation.

	Broward County	Florida	United States
Veteran status	4.3%	7.9%	6.6%
Verteran unemployment rate	3.8%	4.1%	4.2%
Veteran poverty rate	7.8%	7.1%	7.0%
Veteran disability status	27.3%	30.1%	29.8%

Figure 7 - Veteran population, unemployment, poverty, and disability rates, Source: U.S. Census Bureau ACS 2018-2022, shading indicates the county measure was greater than the state benchmark value.

Rural Population

According to County Health Rankings, Broward County's population is classified as non-rural.

LGBT Population

According to the UCLA School of Law Williams Institute, 4.6% of Florida's population identified as lesbian, gay, bisexual, or transgender in 2019. The Florida LGBT population was 48% male and 52% female with an average age of 39.4 in 2017. Approximately 24% of Florida's LGBT population represented families with children. Race and ethnicity data for the LGBT population in 2017 shows that 51% of the population was white, 30% Latino/a, 12% Black/African American, 1% Asian, 4% more than one race, and 2% all other races.

The Florida LGBT population had an uninsured rate of 21% in 2017, which was greater than the non-LGBT population (15%). The community also experienced higher rates of food insecurity (27% compared to 16%) and were more likely to have incomes less than $24,000 (27% compared to 21%).

According to the U.S. Census Bureau American Community Survey 2022 data, 62.6% of same-sex couples across the nation were homeowners, 54.8% of same-sex householders had at least a bachelor's degree, and 78.7% of same-sex householders were employed.

It is important to note that many national demographic and community health surveys do not collect complete information related to sexual orientation and gender identity (SOGI). This leads to significant data limitations for measuring the prevalence of LGBTQ+ individuals and identifying specific health problems impacting the community.

B. Community Health Indexes

Area Deprivation Index

The Area Deprivation Index (ADI) ranks neighborhoods by socioeconomic disadvantage and compares them to the state level. It includes factors related to income, education, employment, and housing quality. Each block group receives a state-level decile ranking, with group 1 having the lowest ADI (least disadvantaged) and 10 having the highest ADI (most disadvantaged). High ADI (disadvantaged) neighborhoods were located within areas across the county. ZIP Codes with high ADI block groups include 33313, 33314, 33319, 33321, 33322, and 33442 within Fort Lauderdale, which reflect parts of the following communities: Davie, Deerfield Beach, Hollywood, Lauderdale Lakes, Lauderhill, North Lauderdale, Sunrise, Plantation, and Tamarac.
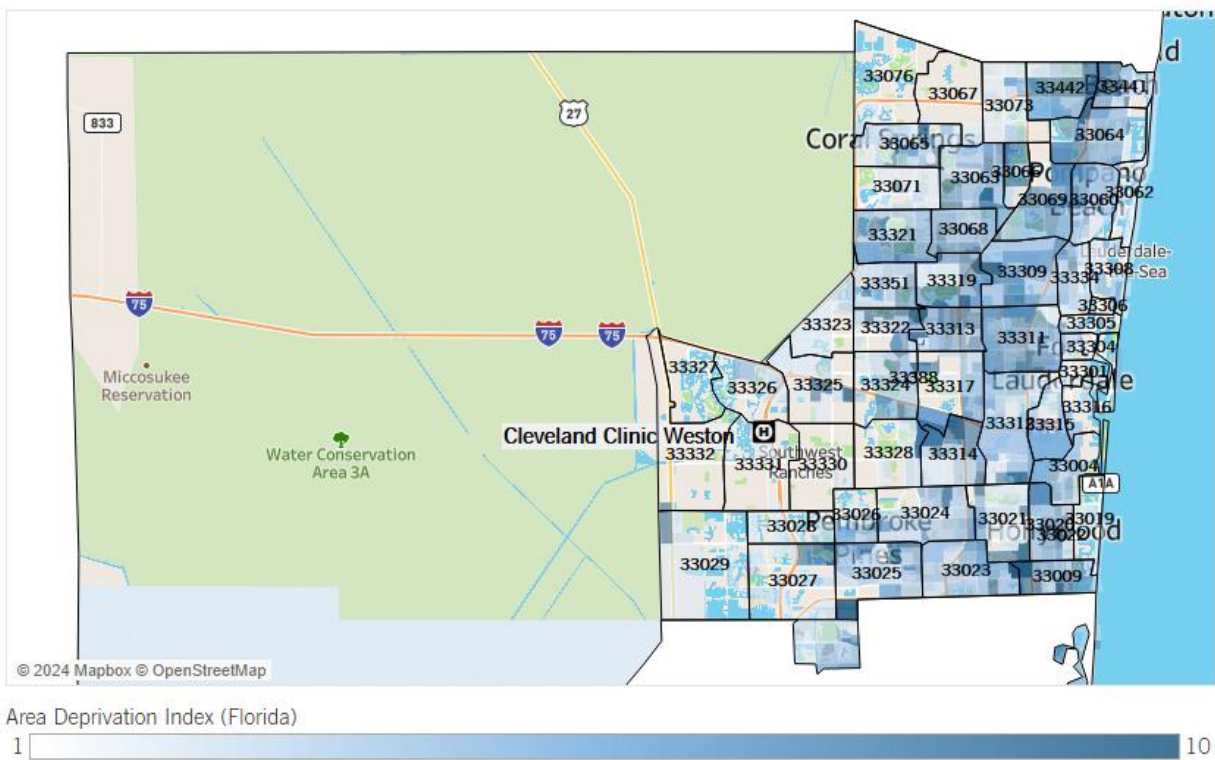

Figure 8 - Map of Area Deprivation Index (ADI) by census block group, Source: University of Wisconsin School of Medicine and Public Health 2021

Social Vulnerability Index (SVI)

The Centers for Disease Control and Prevention and Agency for Toxic Substances and Disease Registry Social Vulnerability Index (SVI) is a place-based index that quantifies experiencing social vulnerability, defined as the demographic and socioeconomic factors that adversely affect communities that encounter hazards and other community-level stressors like disasters or disease outbreaks. The SVI scores range from 0 (lowest vulnerability) to 1 (highest vulnerability). Overall, Broward County had a score of 0.8636 when compared to counties across the state of Florida.
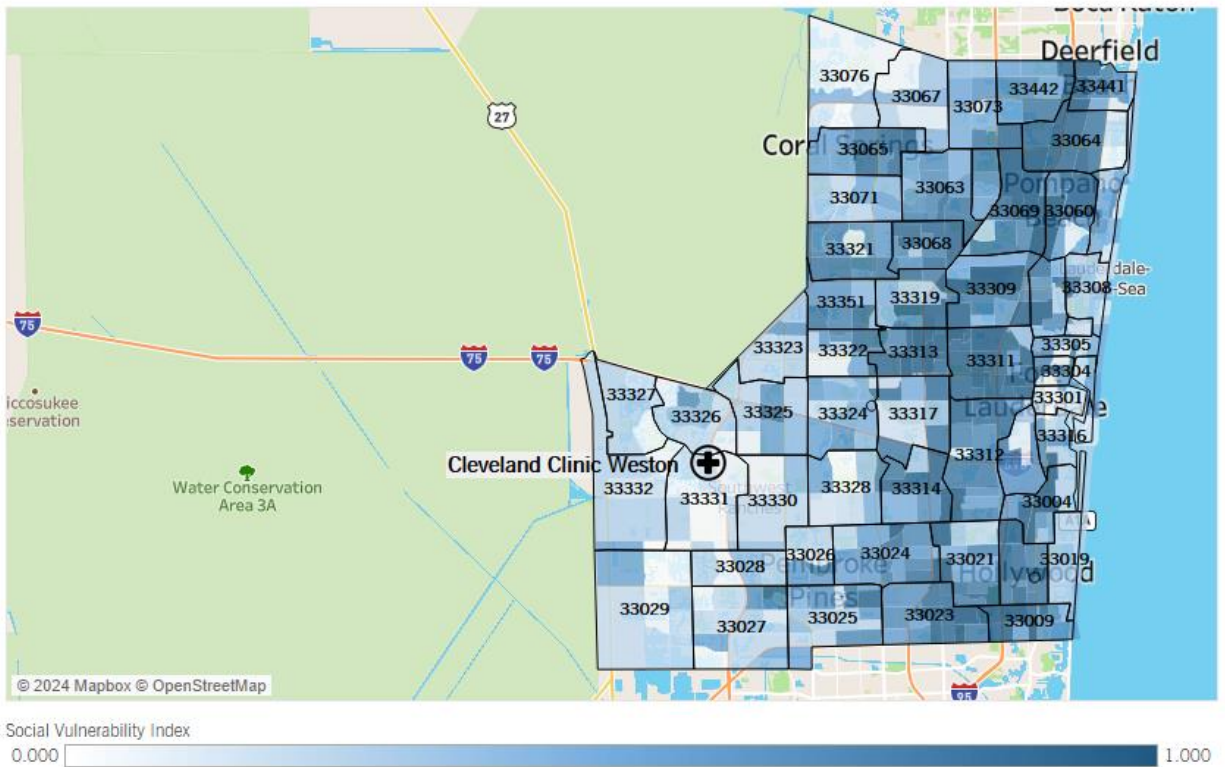

Figure 9 – Florida Social Vulnerability Index score by census tract, Source: CDC/ATSDR 2022

Child Opportunity Index

The Child Opportunity Index (COI) is a composite index of 44 measures that demonstrates how the neighborhood environment impacts children and families. The COI 3.0 captures differences in opportunity across U.S. neighborhoods and can be used to design and implement programs promoting equity. The 2021 child opportunity scores range from 1 to 100, with higher scores indicating that children in those neighborhoods experience all the conditions they need to thrive. Scores are grouped in the map below according to the following categories: very low, low, moderate, high, or very high.
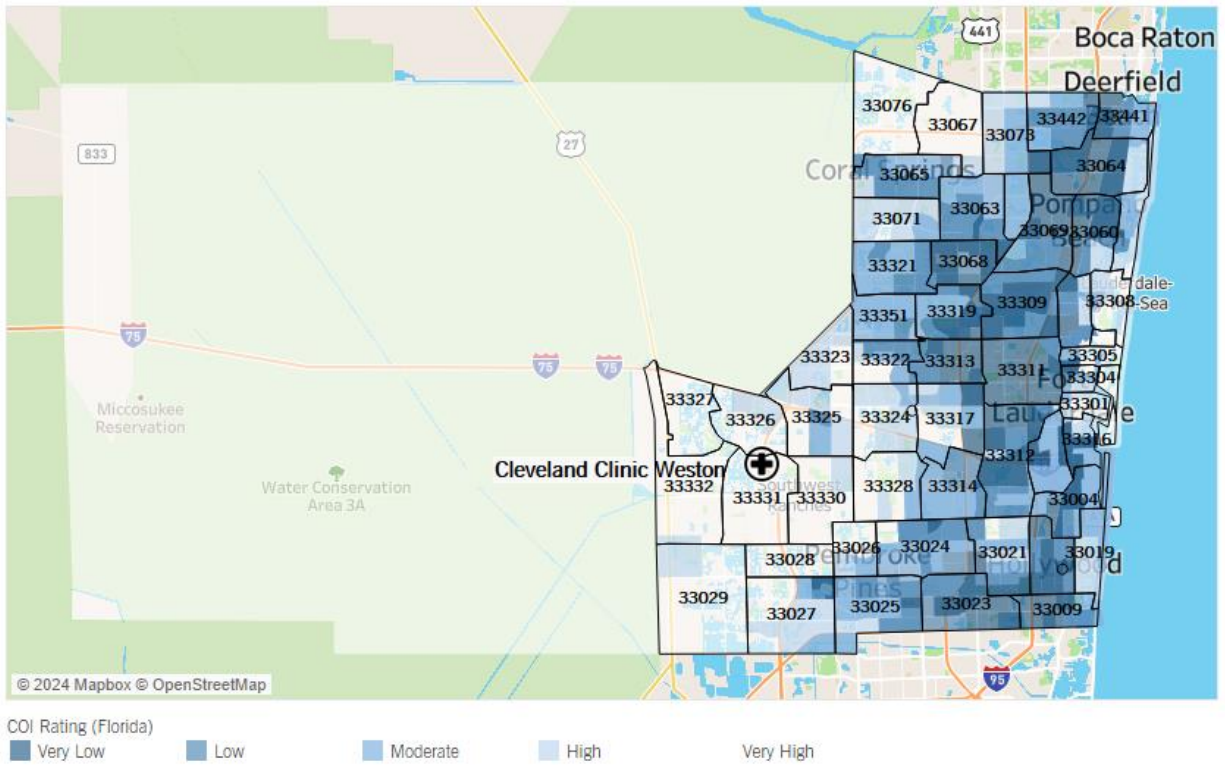

Figure 10 – Child Opportunity Index 3.0 (COI) ratings by census tract for Florida, Source: diversitydatakids.org.

Environmental Justice Index

The Environmental Justice Index (EJI) is a tool for identifying and prioritizing areas that may require special attention or additional action to improve health and health equity. The index characterizes cumulative impacts and patterns of environmental injustice by ranking each census tract according to 36 environmental, social, and health factors. The EJI ranking ranges from 0 (lowest relative burden/vulnerability) to 1 (highest relative burden/vulnerability).
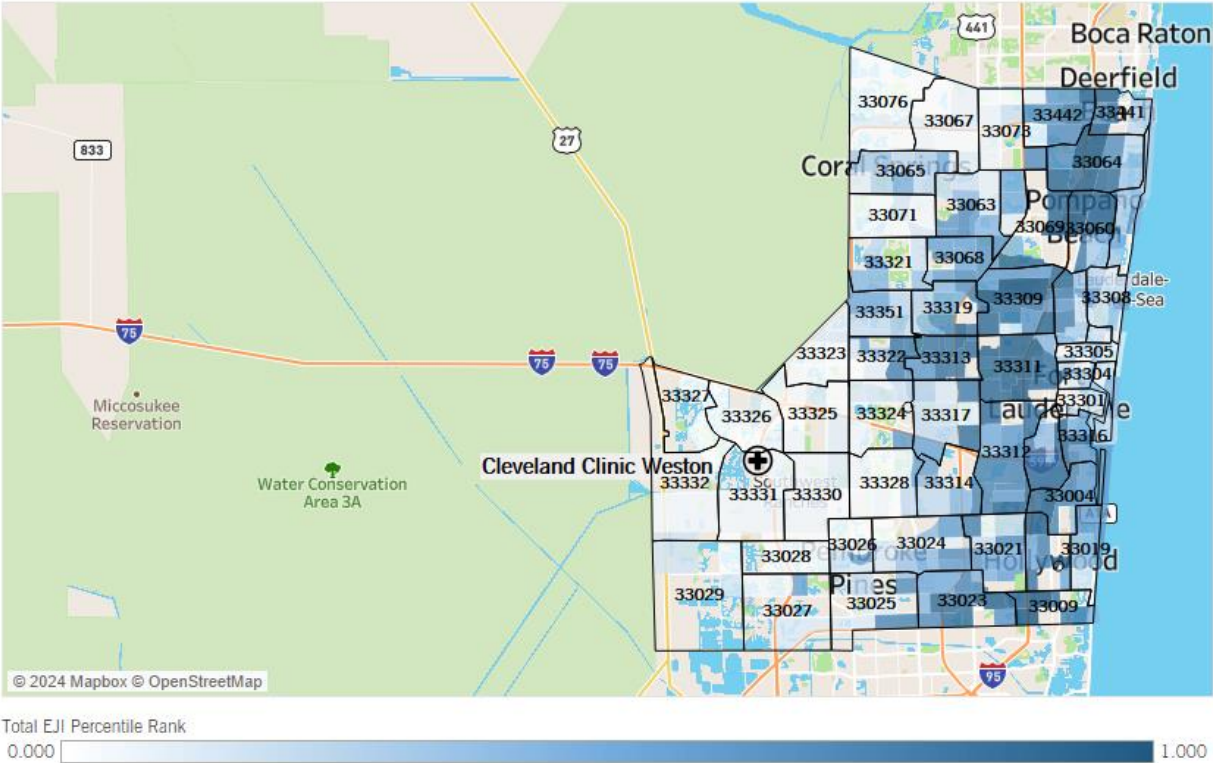

Figure 11 – Environmental Justice Index ranking by census tract 2022, Source: CDC and Agency for Toxic Substances Disease Registry

Healthcare Equality Index

The Human Rights Campaign's Healthcare Equality Index is a national benchmarking tool that evaluates healthcare facilities for their dedication to the equitable treatment and inclusion of LGBTQ (Lesbian, Gay, Bisexual, Transgender, Queer or Questioning) patients, visitors, and employees. In 2024 CCWH received an index score of 100 and was designated as an LGBTQ+ Healthcare Equality Leader.

C. Other Assessments and Health Improvement Plans

Broward County Health Improvement Plan 2021-2026

- Increase access to care
  - Health insurance for children ages 0-18
- Reduce the incidence of communicable and infectious diseases
  - HIV testing and treatment
- Improve maternal, infant, and child health
  - Perinatal transmission of HIV
  - Syphilis cases/incidence
  - Cervical cancer
  - Infant mortality (Black infants)
- Enhance preventive care activities
  - Immunizations for children (2-year-olds, kindergarten, 7th graders)
  - Unintentional injury and drug use
  - Obesity, Black adults

Florida State Health Improvement Plan 2022-2026

- Alzheimer's disease and related dementias
- Chronic diseases & conditions
- Injury, safety, & violence
- Maternal & child health
- Behavioral health (includes mental illness and substance use)
- Social and economic conditions impacting health
- Transmissible and emerging diseases

ALICE Report for the State of Florida 2024 Update

- Cost of childcare
- Growing population of adults over 65
- Alleviating racial disparities in financial hardship
- Health policies related to public assistance
- Food insecurity
- Housing affordability
- Insufficient retirement savings
- Savings to cover unexpected expenses or crises
- Impact of financial hardship on mental health

IV. PRIMARY DATA

A. Community Leader Interviews

The community leader interview data is qualitative and should be interpreted as reflecting the values and perceptions of those interviewed. This portion of the CHNA process is designed to gather input from persons who represent the broad interest of the community serviced by CCWH, as well as individuals providing input who have special knowledge or expertise in public health. It is intended to provide depth and richness to the quantitative data collected.

Interview Methodology

Fifteen interviews were conducted from January 31st through March 6, 2024. Interviews required approximately 30 minutes to complete. Interviewers followed the same process for each interview. The complete list of interview questions and responses can be found in Appendix D. The following key themes emerged during interviews with community leaders:

Community Leader Interview Key Themes

Chronic disease Behavioral health Cancer Diabetes
Social isolation
Lack of trust in healthcare providers Fragmented system of care / linkages
Provider supply Lack of awareness of resources Health disparities & health equity
Immigration status / lack of documentation Safety Mental health (general)
Affordability (cost of care) Poverty, financial barriers, and economic opportunity
Navigation Access to healthy foods and nutrition Cultural competency
Housing and homelessness Environmental health
Access to care Health literacy
Housing Substance abuse Social determinants of health
Maternal and child health Sexually transmitted infections
Heart disease & stroke Walkability Language barriers
Transportation Cultural barriers Healthy aging Education
Systemic racism Obesity

Figure 12 - Word cloud of key community leader interview themes. Topics with two or more mentions were included.

Community Leader Interview Summary

When asked to discuss significant, overarching health concerns within the community, interviewees most frequently mentioned access to care, behavioral health, housing, obesity, nutrition, and chronic disease.

When prompted to discuss barriers preventing individuals from obtaining optimal health, leaders frequently mentioned the cultural landscape that has created a gap between community residents and the healthcare system. Leaders cited language barriers, cultural

competency, complexity in navigating the healthcare system, and lack of trust in healthcare systems as barriers to accessing care, especially for large immigrant population .

A high cost of living continues to be a great barrier for residents of Broward County. One community leader stated that many residents in impoverished communities are in "survival mode" daily and, therefore, are not able to seek regular check-ups with primary care physicians. Socioeconomic barriers, such as affordable housing, transportation, and being able to afford fresh healthy foods place such a massive burden on residents that oftentimes seeking medical attention is an afterthought. This has led to delayed care and the misuse of emergency room services, where individuals rely on the hospital for primary care.

Broward County's community leaders emphasized behavioral health, including mental health and substance use, as a major community concern. Leaders expressed concerns regarding the growing demand to address behavioral health needs, including substance use, social isolation, depression, anxiety, stress, and suicide.

> "Underrepresented communities and racial minorities are lacking resources for mental health, which is especially disheartening because Broward County is the most diverse county in Florida."
>
> - Community Leader, 2024

When discussing health disparities, maternal and child health was frequently referenced. Leaders voiced a need for increased access to prenatal care—particularly for low-income and immigrant mothers. One leader stated that many underserved areas of Broward County should be labeled "OB/GYN deserts," to draw attention to the resources needed to help those communities.

Stakeholders indicated that food deserts are found throughout the county and are often located in low-income and underserved areas. Within the community, the food environment lays the foundation for many of the challenges voiced by leaders including access to healthy foods, the distribution of food deserts, and food insecurity. Community leaders raised concerns about the prevalence of chronic diseases in the community like diabetes, stroke, and heart disease. Several interviewees stated that the social-ecological context such as access to fresh produce and grocery stores, nutrition education, and access to green spaces within underserved communities is directly reflected in the observed disparities in health outcomes.

Given that the healthcare landscape is drastically different from three years ago when the world was coping with the COVID-19 pandemic, interviewees were asked to compare the current health of their community to three years ago. 76.9% stated that the health of the community has declined, 15.4% asserted that the health of the community has improved, and 7.7% shared that the health of the community has remained the same over the past three years. Stakeholders voiced that the Covid-19 pandemic highlighted many health inequities that we now "have no choice but to address". Leaders expressed that some of the most vulnerable communities are still in "recovery mode" from the effects of the pandemic

Finally, leaders were asked for feedback and suggestions on how the health and health equity of their community could be improved. Community leaders voiced a need for more programs directly targeted at helping to improve the health of the most vulnerable populations. Examples included establishing transitional care for veterans and homeless populations, where they can be discharged after undergoing hospital procedures; establishing an adult daycare to provide respite care for caregivers and spouses; partnering with more doula and midwifery services to fill the gap in maternal health services and creating programs to address substance use in middle school as an early intervention initiative. As a consensus, interviewees expressed that they look forward to more collaborative efforts, as there is a wealth of non-profits within the community working towards similar public health goals. Community leaders expressed their desire for more collaboration between healthcare and community support services for more effective and coordinated efforts.

V.   COMMUNITY RESOURCES

A. Community Resources Related to CHNA Priorities

Access to Care Resources

- 2-1-1 Broward is a live, 24-hour comprehensive helpline, providing all people with crisis, health, and human services support and connecting them to resources. Dialing 2-1-1 is an easy way for people to get help with housing, food, financial assistance, relief from abuse, family issues, depression, childcare, suicide prevention, and more.
- Florida Department of Health in Broward County provides HIV/AIDS testing and referral for treatment, perinatal disease prevention, hepatitis prevention and referral, STD prevention and referral, breast and cervical cancer screening and referral, dental care, pharmacy services, child and adult immunization, school health services, tobacco prevention, KidCare health coverage outreach, family planning, WIC and nutrition, tuberculosis prevention and care, refugee screening, and community outreach.
- Broward Regional Health Planning Council provides information about health insurance coverage options, and financial assistance to obtain or maintain medical benefits to persons living with HIV/AIDS. In addition to direct services, the council participates in planning, evaluation, and organizational capacity building.

Behavioral Health Resources

- Broward Behavioral Health Coalition is the county's local managing entity for state and federally funded behavioral health services. The coalition is responsible for contracting, monitoring, clinical oversight, and performance improvement for these behavioral health services.
- United Way of Broward County's Commission on Behavioral Health & Drug Prevention is a substance misuse prevention and mental health promotion coalition that brokers partnerships between federal, state, and local agencies to foster, develop, and enhance integrated behavioral health efforts throughout the county.
- Henderson Behavioral Health provides crisis intervention, inpatient crisis stabilization, forensic services, medication management, adult and youth outpatient care, and co-occurring treatment. Services are available on a sliding fee scale.
- Mental Health America of Southeast Florida provides information and referrals, health promotion education, and advocacy for individuals with behavioral illness.
- NAMI Broward offers support, advocacy, and educational resources for individuals with mental illness and their families.

Chronic Disease Prevention & Management Resources

- Tobacco-Free Partnership of Broward County supports evidence-based tobacco prevention and cessation programs, with an emphasis on youth and other vulnerable populations. The partnership is dedicated to creating policy changes to prevent or reduce the health risks associated with the use of all tobacco products.

- The Living Well Program provided by the Urban League of Broward County includes evidence-based chronic disease self-management education.
- Area Agency on Aging of Broward County provides information and resources; plans, develops, coordinates, and evaluates programs; funds services; and advocates for residents aged 60 and older.

Maternal and Child Health Resources

- Broward Healthy Start provides care coordination, education, and outreach services to pregnant women and infants up to 3 years of age.
- Early Learning Coalition champions and supports children, families, and teachers. The coalition provides financial assistance for early learning programs, a voluntary pre-kindergarten program, customized childcare listings, and provider technical assistance.
- Children's Services Council of Broward County funds programs that serve children and families, advocates for policies, and provides leadership to the child-serving community. Specific areas of programming include maternal and child health, family strengthening, after-school and out-of-school, youth leadership, employment, support for youth and families with special needs, and supports for those aging out of the foster care system.
- Help Me Grow promotes early identification of developmental, behavioral, or educational concerns and links children and families to community-based services and supports at no cost to parents and caregivers.
- Infant Mortality Workgroup of St. Lucie County is hosted by the Florida Department of Health in St. Lucie County and focuses on the goal of improving birth outcomes and decreasing the number of babies who die before their first birthday.
- Healthy Mothers, Healthy Babies Coalition of Broward provides prenatal care, parenting support, home-visiting, education, and temporary assistance with basic needs to low-income families who meet eligibility requirements.

Socioeconomic Concerns Resources

- United Way of Broward County fights for the health, education, and financial prosperity of every person in the community. Specific programs focus on improving access to healthy foods, serving veterans, solving chronic homelessness, child mentoring, and behavioral health.
- Feeding South Florida serves 25% of Florida's food insecure population within Palm Beach, Broward, Miami-Dade, and Monroe counties. Provides immediate access to nutritious food, leads hunger and poverty advocacy efforts, and facilitates a variety of education and health promotion programs.
- Meals on Wheels South Florida delivers nutritious meals and safety checks to seniors and promotes and advocates for senior services.
- Urban League of Broward County provides services related to education, entrepreneurship, jobs, community justice, housing, and health. The Urban League offers chronic disease self-management, financial education and workshops, youth development programs, career-building, job placement, and many other programs.

- <u>Broward County Housing Authority</u> provides affordable housing opportunities, administers rental subsidy programs, and provides professional counseling services to homeowners and prospective owners.
- <u>Salvation Army</u> provides social services including food, shelter, and clothing. Also offers disaster relief services, childcare centers, AIDS education and residential services, medical facilities, shelters for women and children, family counseling, vocational training, and substance use rehabilitation.
- <u>Aging and Disability Resource Center of Broward</u> provides information and referral for counseling, assessments, and emergency assistance with utility payments. Assists with application and eligibility for publicly funded services for seniors over age 60, persons with mental illness, and families and caregivers.
- <u>American Red Cross</u> provides emergency response services, case management, and support services to survivors of a disaster.

VI.   IMPACT EVALUATION

The CHNA process should be viewed as a three-year cycle to evaluate the impact of actions taken to address priority areas. This step affirms the organization's focus and target efforts during the next CHNA cycle. The top health priorities for Cleveland Clinic Weston Hospital from the 2021 CHNA were:

- COVID-19
- Health Equity & Social Determinants of Health
- Access to Care
- Behavioral Health
- Chronic Disease Prevention and Management
- Maternal & Child Health
- Medical Research and Health Professions Education

Implementation strategies for these health topics shifted in response to the COVID-19 pandemic. Innovative strategies were adopted to continue building capacity for addressing the community health needs.

A. Actions Taken Since Previous CHNA

Weston Hospital's previous Implementation Strategy Report (ISR) outlined a plan for addressing the following priorities identified in the 2021 CHNA: COVID-19, Health Equity & Social Determinants of Health, Access to Care, Behavioral Health, Chronic Disease Prevention and Management, Maternal & Child Health, Medical Research and Health Professions Education.

Caring for our community is essential, and part of that is sharing accurate, up-to-date information on health-related topics with our community. Many of our hospital services were paused or deferred as we navigated the COVID-19 landscape. As we continue to serve our communities, we are committed to addressing the needs identified in our ISR.

Cleveland Clinic Weston Hospital uses evidence-based approaches in the delivery of healthcare services and educational outreach to achieve healthy outcomes for the community it serves. It undertakes periodic monitoring of its programs to measure and determine their effectiveness and ensure that best practices continue to be applied. Given that the process for evaluating the impact of various services and programs on population health is longitudinal by nature, significant changes in health outcomes may not manifest for several community health needs assessment cycles. We continue to evaluate the cumulative impact.

The narrative below describes the strategies, modifications made to the action plans, and highlighted impacts for each health priority area.

COVID-19

a. Continued to collaborate with local public health entities, long-term care facilities, and local community-based organizations to establish COVID-19 testing stations, distribute testing kits, and process COVID-19 tests.

b. Weston Hospital provided multiple COVID-19 testing stations and kits to community members to address early detection of COVID-19 infection.

c. Continued to provide clinical expertise and community health education related to COVID-19 prevention, testing, infection control, vaccination, and treatment through collaboration with local media outlets, long-term care facilities, and community-based organizations.

d. Multiple health education opportunities were hosted virtually and in person for COVID-19 prevention, testing, infection control, vaccination, and treatment through a variety of media and community organizations.

Access to Care

a. Patient Financial Advocates assisted patients in evaluating eligibility for financial assistance or public health insurance programs.

b. In 2022 Cleveland Clinic health system provided over $212.2 million in financial assistance to its communities in Ohio, Florida, and Nevada.

c. Utilized medically secure online and mobile platforms to connect patients with Cleveland Clinic providers for telehealth and virtual visits.

d. In 2023, Cleveland Clinic provided 917,534 virtual visits.

e. Cleveland Clinic Florida Weston continued to provide bi-lingual signage, interpretive services, and bilingual providers and staff to assist the Spanish-speaking population in the community in accessing care.

Health Equity & Social Determinants of Health

a. Provided diversity, equity, and inclusion training for Cleveland Clinic caregivers including training related to allyship, unconscious bias, and structural racism.

b. Partnered with community-based organizations to improve equitable access to healthy foods.

c. Continued to explore a common community referral data platform to coordinate services and ensure optimal communication.

Chronic Disease Prevention and Management

a. Implemented health promotion, health education, support groups, and outreach events related to heart disease and stroke, breast cancer, Parkinson's disease, cooking demonstrations, nutrition workshops, and mental wellness.

b. Provided management of chronic conditions through Chronic Care Clinics employing a specialized model of care and offering patient education, medication review, and nutrition counseling.

c. In partnership with the City of Weston and community first responders, provided community-based CPR training.

Behavioral Health

a. Through community partnerships, continued to build a continuum of care and implement health promotion, health education, and outreach events.

b. Conducted mental wellness workshops for community members.

c. Cleveland Clinic Weston provided education related to substance use disorders for caregivers and their family members through the Cleveland Clinic Opioid Awareness Center.

d. Cleveland Clinic utilized suicide or self-injury assessment for patients at all hospitals and locations.

Maternal & Child Health

a. Collaborated with the Urban League of Broward County to host local infant/maternal workgroups and align care to improve birth outcomes.

Medical Research and Health Professions Education

a. Through the Florida Research and Innovation Center, advanced innovative translational research focused on the areas of cancer, immunobiology, and infectious diseases, including COVID-19. In 2022, Cleveland Clinic provided $128.9 million in medical research.

b. Cleveland Clinic provided a wide range of high-quality medical education that included accredited training programs for residents, physicians, nurses, and allied health professionals. By educating medical professionals, we ensure that the public receives the highest level of medical care and will have access to highly trained health professionals in the future. For 2022, Cleveland Clinic's community benefit in support of education was $338.2 million.

B. Comments Received on Previous CHNA

Community Health Needs Assessment reports from 2021 were published on the Weston Hospital website. No community feedback has been received as of the drafting of this report. For more information regarding Cleveland Clinic Community Health Needs Assessments and Implementation Strategy reports, please visit www.clevelandclinic.org/CHNAreports or contact CHNA@ccf.org.

C. Request for Public Comment

Comments and feedback about this report are welcomed. Please contact:
chna@clevelandclinic.org

VII.   APPENDICES

A. APPENDIX - References

Centers for Disease Control and Prevention and Agency for Toxic Substances Disease
       Registry (2024). 2022 Environmental Justice Index. Retrieved from
       https://www.atsdr.cdc.gov/placeandhealth/eji/index.html

Centers for Disease Control and Prevention and Agency for Toxic Substances and Disease
       Registry Geospatial Research, Analysis, and Services Program (2024). CDC/ATSDR
       Social Vulnerability Index 2022. Retrieved from
       https://www.atsdr.cdc.gov/placeandhealth/svi/data_documentation_download.html

Centers for Disease Control and Prevention, Division for Heart Disease and Stroke Prevention
       (2024). Interactive Atlas of Heart Disease and Stroke. Retrieved from
       https://www.cdc.gov/dhdsp/maps/atlas/index.htm

Centers for Disease Control and Prevention, Division of Population Health (2024). Behavioral
       Risk Factor Surveillance System. Retrieved from
       https://www.cdc.gov/brfss/brfssprevalence/index.html

Centers for Disease Control and Prevention, National Center for Health Statistics. National
       Vital Statistics System, Provisional Mortality on CDC WONDER Online Database. Data
       are from the final Multiple Cause of Death Files, 2018-2022 as compiled from data
       provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative
       Program. Retrieved at http://wonder.cdc.gov/mcd-icd10-provisional.html

Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis,
       STD, and TB Prevention (2024). NCHHSTP AtlasPlus. Retrieved from
       https://www.cdc.gov/nchhstp/about/atlasplus.html

Centers for Disease Control and Prevention, National Center for Injury Prevention and Control
       (2024 United States Opioid Dispensing Rate Maps. Retrieved from
       https://www.cdc.gov/overdose-prevention/data-research/facts-stats/opioiddispensing-
       rate-maps.html

Department of Health and Human Services, Health Resources and Services Administration
       (2024). Find Shortage Areas Tools. Retrieved from
       https://data.hrsa.gov/tools/shortage-area

Department of Health and Human Services, Office of Disease Prevention and Health
       Promotion (2024). Healthy People 2030. Retrieved from
       https://health.gov/healthypeople

Department of Health and Human Services, Office of Health Policy (2022). Addressing Social Determinants of Health: Examples of Successful Evidence-Based Strategies and Current Federal Efforts. Retrieved from https://aspe.hhs.gov/sites/default/files/documents/e2b650cd64cf84aae8ff0fae7474af82/SDOH-Evidence-Review.pdf

Diversitydatakids.org. 2024. "Child Opportunity Index 3.0 database, 2010 census tracts", retrieved from https://data.diversitydatakids.org/dataset/coi30-2010-tracts-child-opportunity-index-3-0-database--2010-census-tracts?external=True

Esri (2024). 2023/2028 Esri Updated Demographics Data. Retrieved from Intellimed IntelliClient Software.

Federal Bureau of Investigation, FBI Uniform Crime Reporting Program (2024). Crime Data Explorer. Retrieved from https://cde.ucr.cjis.gov/

Feeding America (2024). Map the Meal Gap 2022. Retrieved from https://map.feedingamerica.org/county/2022/

Florida Department of Health, Community Health Improvement Planning Unit (2024). Community Health Improvement Plan for Martin and St. Lucie Counties. Retrieved from https://www.floridahealth.gov/provider-and-partner-resources/community-partnerships/floridamapp/state-and-community-reports/index.html

Florida Department of Health, Division of Community Health Promotion (2024). 2020 Pregnancy Risk Assessment Monitoring System (PRAMS). Retrieved from https://www.flhealthcharts.gov/Charts/

Florida Department of Health, Division of Community Health Promotion (2024). Florida Youth Substance Abuse Survey 2022. Retrieved from https://www.flhealthcharts.gov/ChartsDashboards/rdPage.aspx?rdReport=SurveyData.FYSAS.Dataviewer

Florida Department of Health, Division of Public Health Statistics & Performance Management (2024). Florida Health Charts. Retrieved from http://www.flhealthcharts.com/charts/default.aspx

Florida Department of Health, Health Improvement Planning Team (2014). 2022-2026 State Health Improvement Plan. Retrieved from https://floridaship.org/

Florida Department of Law Enforcement (2024). Uniform Crime Report Offense Data 2021. Retrieved from https://www.fdle.state.fl.us/CJAB/UCR/Annual-Reports/UCR-Offense-Data

Florida Hospital Association (2023). Policy Document Issue Brief: Workplace Violence January 2023. Retrieved from https://www.fha.org/FHA/FHA/Health-Care/Workforce-Issue-Briefs-and-Infographics.aspx

March of Dimes (2024). Maternity Care Deserts Report for Florida, 2023. Retrieved from https://www.marchofdimes.org/peristats/reports/florida/maternity-care-deserts

National Institutes of Health, National Cancer Institute (2024). State Cancer Profile for Florida (2016-2020). Retrieved from https://statecancerprofiles.cancer.gov/

The Trevor Project. (2024). 2023 U.S. National Survey on the Mental Health of LGBTQ Young People. Retrieved from https://www.thetrevorproject.org/survey-2023/

The Williams Institute, UCLA School of Law (2024). LGBT Demographic Data Interactive 2019. Retrieved from https://williamsinstitute.law.ucla.edu/visualization/lgbt-stats/

United For ALICE (2023). "ALICE in the Crosscurrents: COVID and Financial Hardship in Florida." Retrieved from https://www.unitedforalice.org/Florida

University of Wisconsin Population Health Institute (2024). County Health Rankings and Roadmaps 2024. Retrieved from https://www.countyhealthrankings.org/

University of Wisconsin School of Medicine and Public Health (2024). Area Deprivation Index 2021. Retrieved from https://www.neighborhoodatlas.medicine.wisc.edu/

U.S. Census Bureau (2022). Health insurance coverage in the United States: 2022. Census.gov. Retrieved from https://www.census.gov/content/dam/Census/library/publications/2021/demo/p60-274.pdf

U.S. Census Bureau, Department of Commerce, Social, Economic, and Housing Statistics Division (2024). 2022 Community Resilience Estimates. Retrieved from https://www.census.gov/programs-surveys/community-resilience-estimates.html

U.S. Census Bureau, Explore Census Data (2024). 2018-2022 American Community Survey, 5-Year Estimates. Retrieved from https://data.census.gov/cedsci/

U.S. Department of Labor, Bureau of Labor Statistics (2024). Unemployment Rates for States, 2023 Annual Averages. Retrieved from https://www.bls.gov/lau/tables.htm

B. APPENDIX - Carnahan Group Qualifications

Carnahan Group is an innovative, leading healthcare services firm that delivers tailored solutions to address our clients' ever-evolving strategic, valuation, and compliance challenges. With over two decades of experience, Carnahan has established partnerships with a diverse range of organizations, including large healthcare systems, academic medical centers, and community hospitals.

Carnahan Group's Strategic Services utilizes the latest technologies – in parallel with extensive expertise in public health, geographic information systems (GIS), and data visualization – to

deliver best-in-class consulting services, including Community Health Needs Assessments (CHNAs), implementation strategies, and community benefit consulting.

As experts in community benefit reporting, Carnahan Group's consultants take great care in documenting the adherence to the Treasury and IRS requirements in addition to state-specific requirements for the CHNA and Implementation Strategy. Moreover, the community benefit team continuously refines its methodology to stay ahead of the curve and adapt to emerging community health needs. As experts in community benefit reporting, our Strategic consultants take great care in documenting compliance with Treasury and IRS requirements and state-specific requirements for the CHNA and Implementation Strategy.

For more information about Carnahan Group or to schedule a discovery call, please visit http://carnahangroup.com or call 813.289.2588.

C. APPENDIX - Organizations Providing Input

The following individuals and organizations provided feedback during community leader interviews:

Type of Organization	Organization
Clinical provider	BCOM Health (Broward Community & Family Health Centers)
Non-profit/community-based organization	Boys and Girls Club of Broward Broward Healthy Start Coalition Broward Regional Health Planning Council Community Foundation of Broward? Gildas Club South Florida The Non-Profit Executive Alliance
Public Health Expert	FL Dept. of Health in Broward County
Represents underserved, low-income, minority, or chronic disease population	Area Agency on Aging Broward County Covenant House Hispanic Unity of Florida NAMI Broward County The Pride Center at Equality Park United Way in Broward County Urban League of Broward County

Figure 13 - Organizations providing input via community leader interviews

D. APPENDIX - Interview Question Guide and Detailed Primary Data

Community Leader Interview Question Guide

The following questions were used as the basis for discussion during key stakeholder interviews with community leaders:

1. What are the most significant overarching health concerns in your community?

2. What community health problems are having the most significant impacts on the need for hospital healthcare services?

3. What barriers inhibit optimal health for individuals in your community?

4. What physical or environmental risk factors exist in the community that prevent optimal health?

5. Which health disparities appear most prevalent in your community?

6. What behavioral health (mental health and substance use) issues are concerns in the community?

7. What could be done to improve the health and health equity of your community?

8. If you could create any type(s) of programs to improve the health and health equity of community members, what would it/they be?

9. Do you see any emerging health needs or are there additional health concerns we have not covered?

10. Compared to three years ago, has the health of your community improved, declined, or stayed the same?

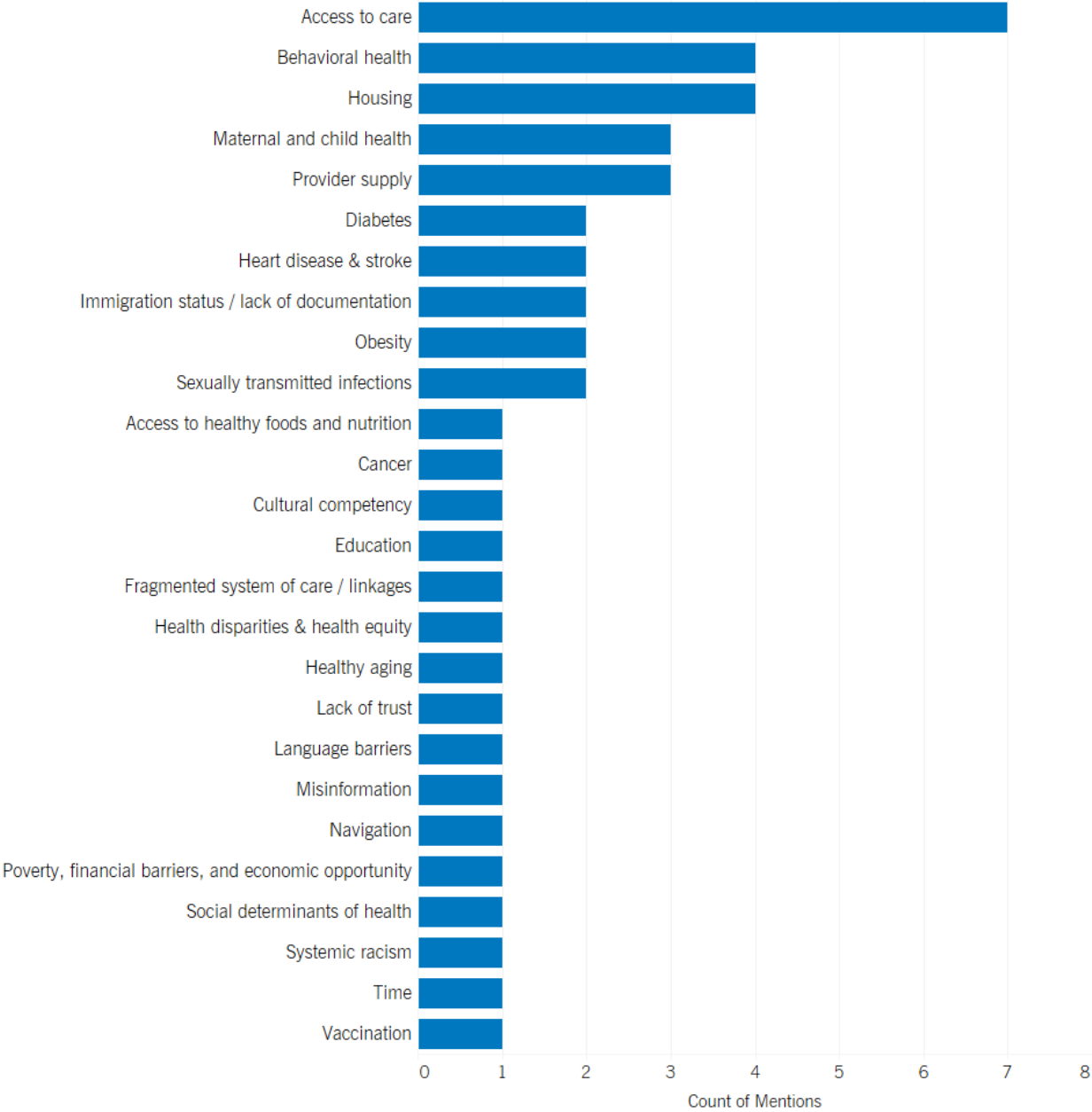# Interview Responses - Significant Overarching Health Concerns

Figure 14 - Overarching Health Concerns Mentioned by Community Leaders
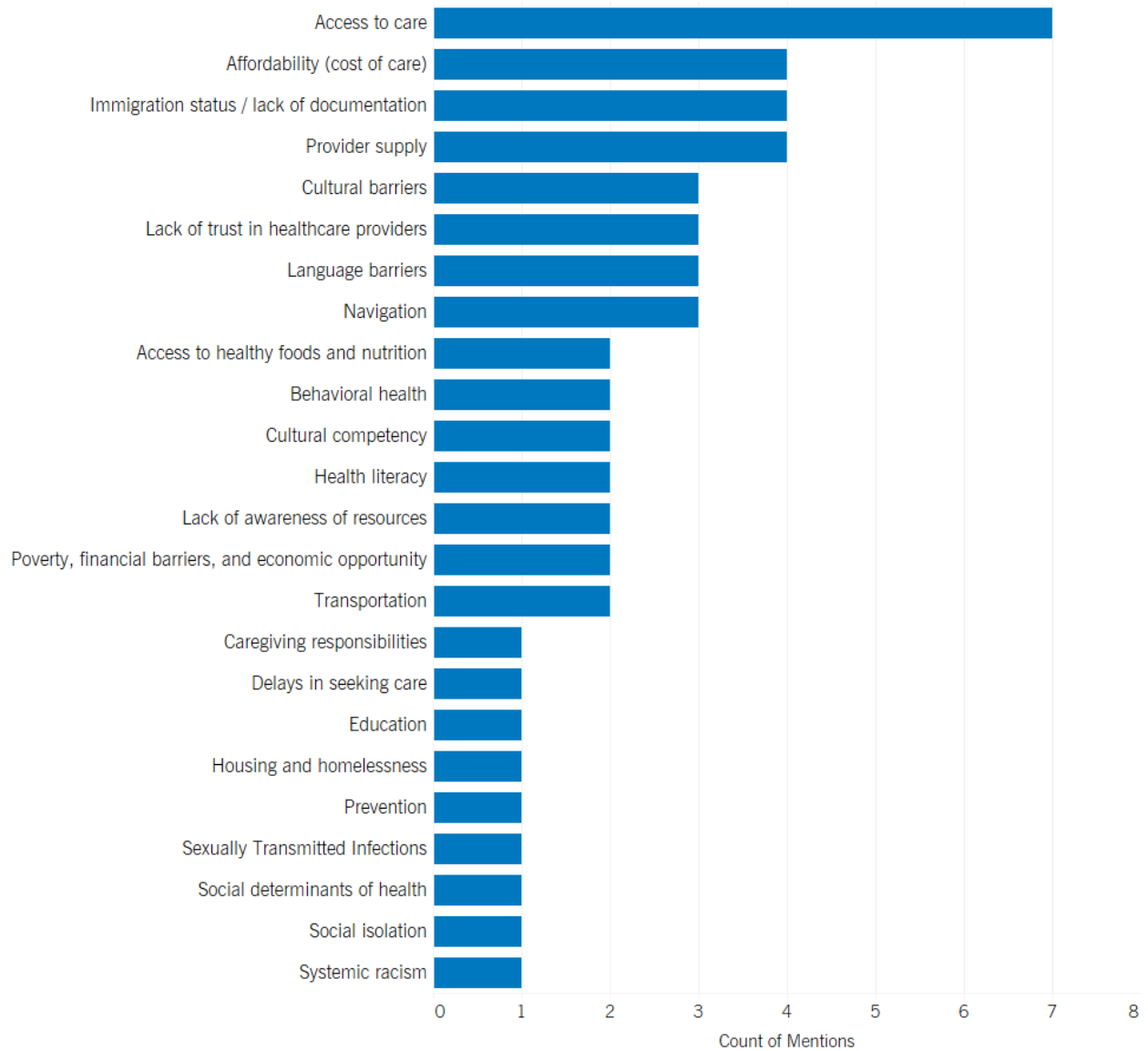
Interview Responses - Barriers

Figure 15 - Barriers Mentioned by Community Leaders

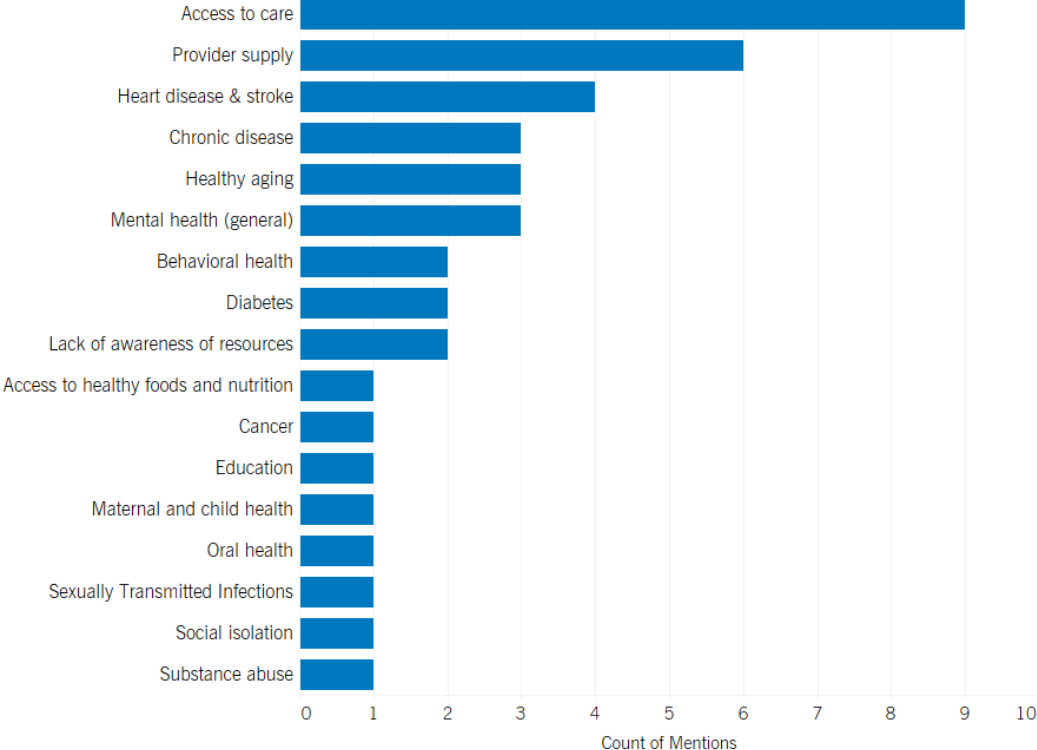# Interview Responses - Issues Impacting Need for Hospital Services

Figure 16 – Issues Impacting the Need for Hospital-Based Services Mentioned by Community Leaders

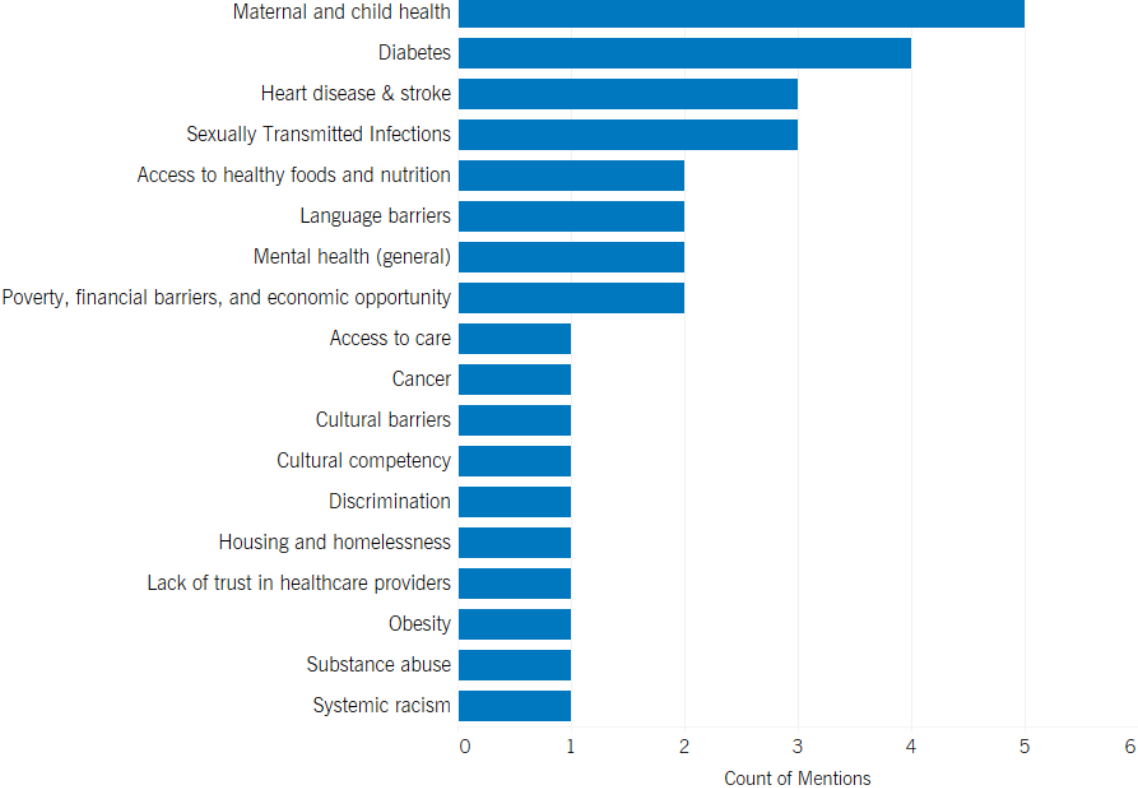# Interview Responses - Health Disparities

Figure 17 – Health Disparities Mentioned by Community Leaders

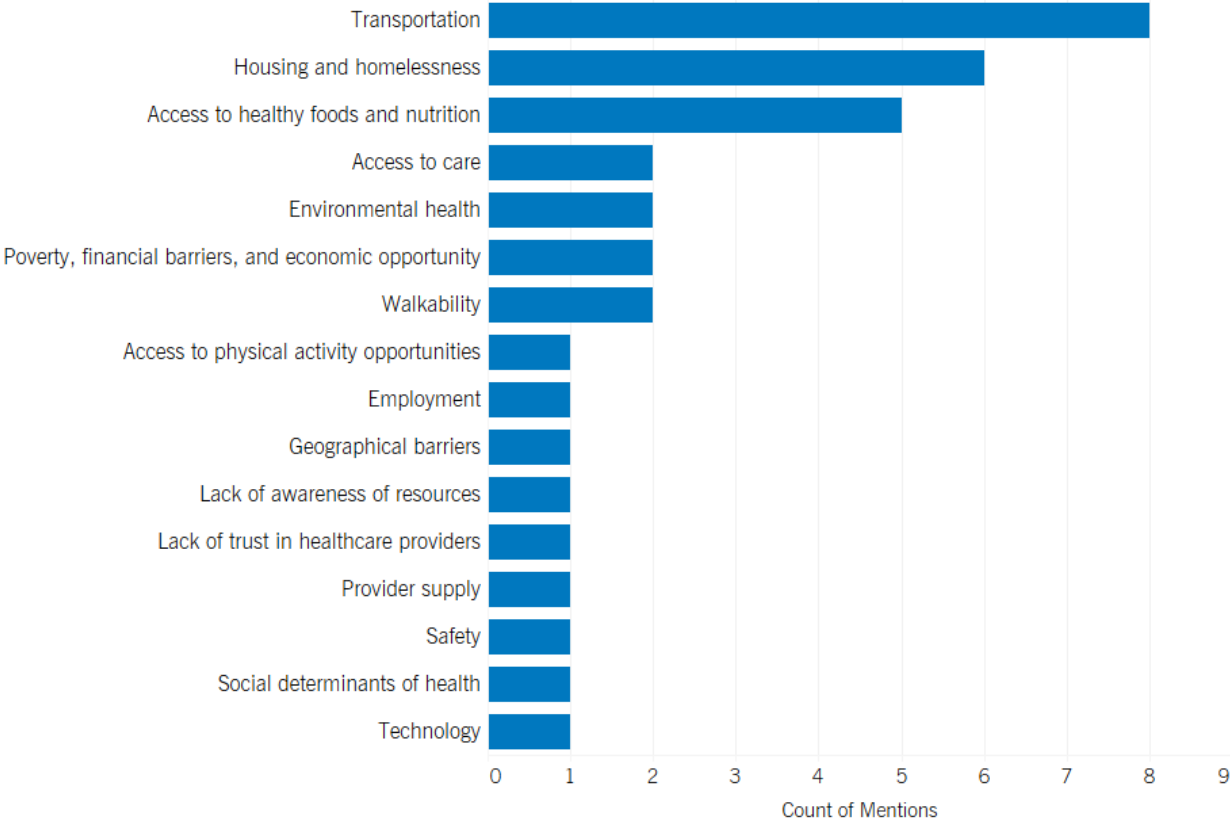# Interview Responses - Environmental Risk Factors

Figure 18 – Environmental/Physical Environment Risk Factors Mentioned by Community Leaders

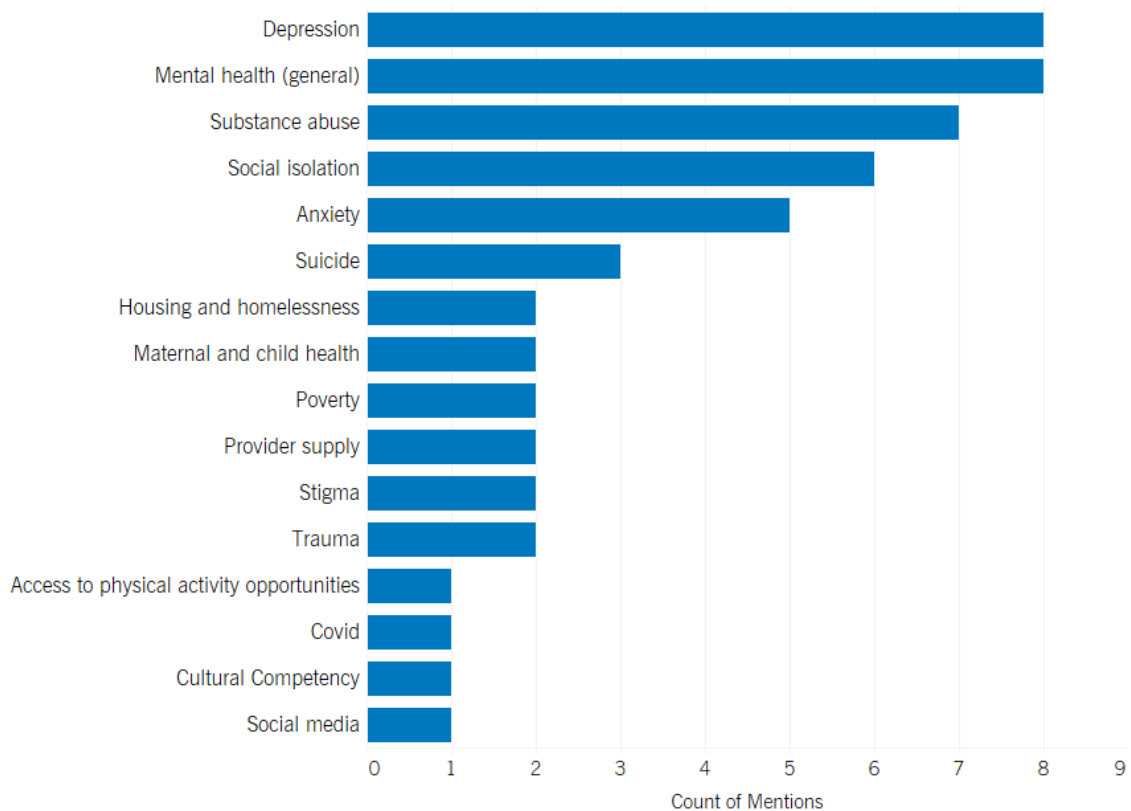## Interview Responses - Behavioral Health Issues

Figure 19 – Behavioral Health Issues Mentioned by Community Leaders

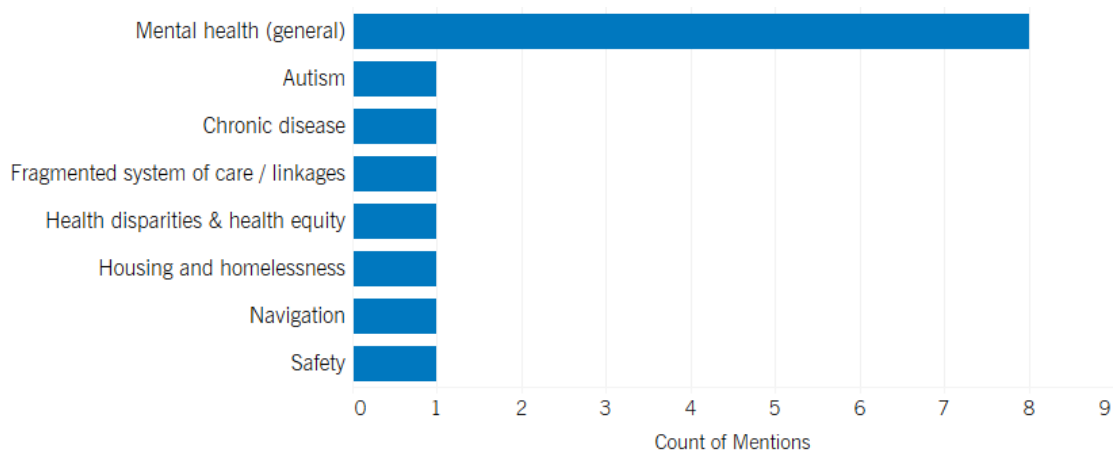## Interview Responses - Emerging Issues

Figure 20 – Emerging Issues Mentioned by Community Leaders

E. APPENDIX - Detailed Secondary Data

Access to Care

Health Professional Shortage Areas

Health Professional Shortage Areas (HPSAs) are designations that indicate health care provider shortages in primary care, dental health, or mental health. Shortages may be geographic-, population-, or facility-based:

- Geographic Area - a shortage of providers for the entire population within a defined geographic area.
- Population Groups - a shortage of providers for a specific population group(s) within a defined geographic area (e.g., low-income, migrant farmworkers, and other groups)

The following areas are characterized as Health Professional Shortage Areas (HPSAs) within the community:
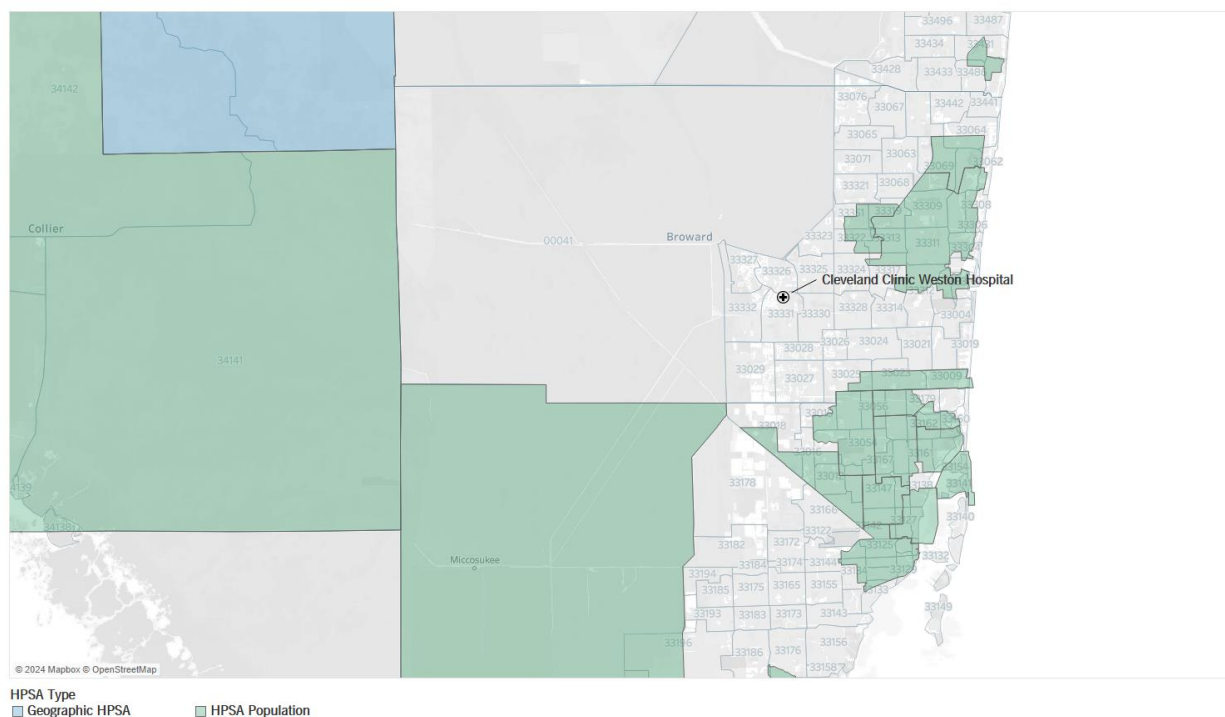

Figure 21 – Health Professional Shortage Area, Source: Health Resources and Services Administration

Medically Underserved Areas

Medically Underserved Areas (MUAs) and Medically Underserved Populations (MUPs) identify geographic areas and populations with a lack of access to primary care services. MUAs have a shortage of primary care health services for residents within a geographic area, while MUPs are specific sub-groups of people living in a defined geographic area with a shortage of primary care health services. Designations are based on the Index of Medical Underservice (IMU).

The IMU is calculated based on four criteria:
- the population to provider ratio
- the percent of the population below the federal poverty level
- the percent of the population over age 65
- the infant mortality rate

IMU can range from 0 to 100, where zero represents the completely underserved. Areas or populations with IMUs of 62.0 or less qualify for designation as an MUA/P. The following map describes the MUA within the community:
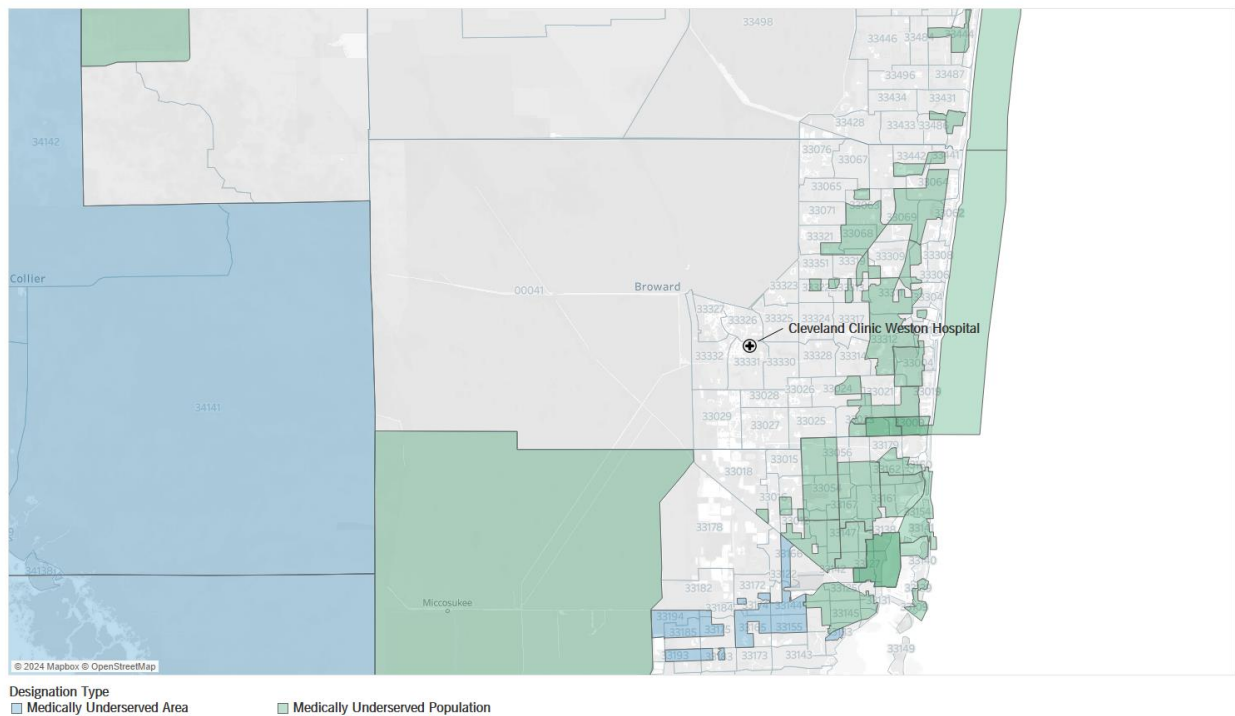

Figure 22 - Medically Underserved Areas, Source: Health Resources and Services Administration

Provider Supply

Residents of Broward County had slightly better access to primary care providers and mental health providers than the Florida averages, according to the ratios of providers to population.

	Broward County	Florida	United States
Ratio of primary care physicians to population	1320:1	1370:1	1330:1
Ratio of mental health providers to population	410:1	490:1	320:1

Figure 23 - Provider to population ratios, Source: County Health Rankings 2024

Dental Provider Supply

Florida Health Charts publishes information related to dental care and providers. The dentist and dental hygienist supply per 100,000 population was higher (more supply) in Broward County than in the state in 2022.

	Broward County	Florida
Total licensed Florida dental hygienists, 2022	64.9	62.2
Total licensed Florida dentists, 2022	78.3	59.0

Figure 24 - Dental providers per 100,000 population, Source: Florida Health Charts Oral Health Profile. Provider supply is shown per 100,000 population, shading indicates the county measure was greater than or worse than the state benchmark value.

Access to Behavioral Health Care

Florida Health Charts provides an estimate of access to mental and behavioral health providers and psychiatric beds. Broward County had more counselors, psychologists, clinical social workers, and total behavioral health professionals per population compared to the state benchmark values in 2021. The supply of adult and child/adolescent psychiatric beds per population was also greater within Broward County than in Florida.

	Broward County	Florida
Licensed mental health counselors	65.1	60.3
Licensed psychologists	37.8	23.4
Licensed clinical social workers	64.3	52.6
Total behavioral/mental health professionals	150.2	123.5
Adult psychiatric beds	20.6	20.1
Child and adolescent psychiatric beds	3.3	3.2

Figure 25 – Access to behavioral health services, Source: Florida Health Charts, 2021, rates per 100,000 population, shading indicates the county measure was greater than or worse than the state benchmark value.

Well Visits

Broward County adults were more likely to have a medical check-up during the prior year when compared to the state average for 2019.

	Broward County	Florida
Adults with medical check up past year, 2019	80.8%	78.8%

Figure 26 - Adults with a medical check-up, Source: Florida Health Charts

Health Insurance Coverage

According to the U.S. Census Bureau's 2018-2022 American Community Survey estimates, Broward County residents (children and adults) were more likely uninsured (13.9%) than all Florida residents.

	Broward County	Florida	United States
Private insurance coverage	62.8%	63.3%	67.6%
Public insurance coverage	30.9%	36.8%	35.9%
No health insurance coverage	13.9%	12.3%	8.9%
No health insurance coverage (children < 19 years)	9.0%	7.5%	5.3%

Figure 27 - Health insurance coverage, Source: U.S. Census Bureau ACS 2018-2022, shading indicates the county measure was greater than or worse than the state benchmark value.
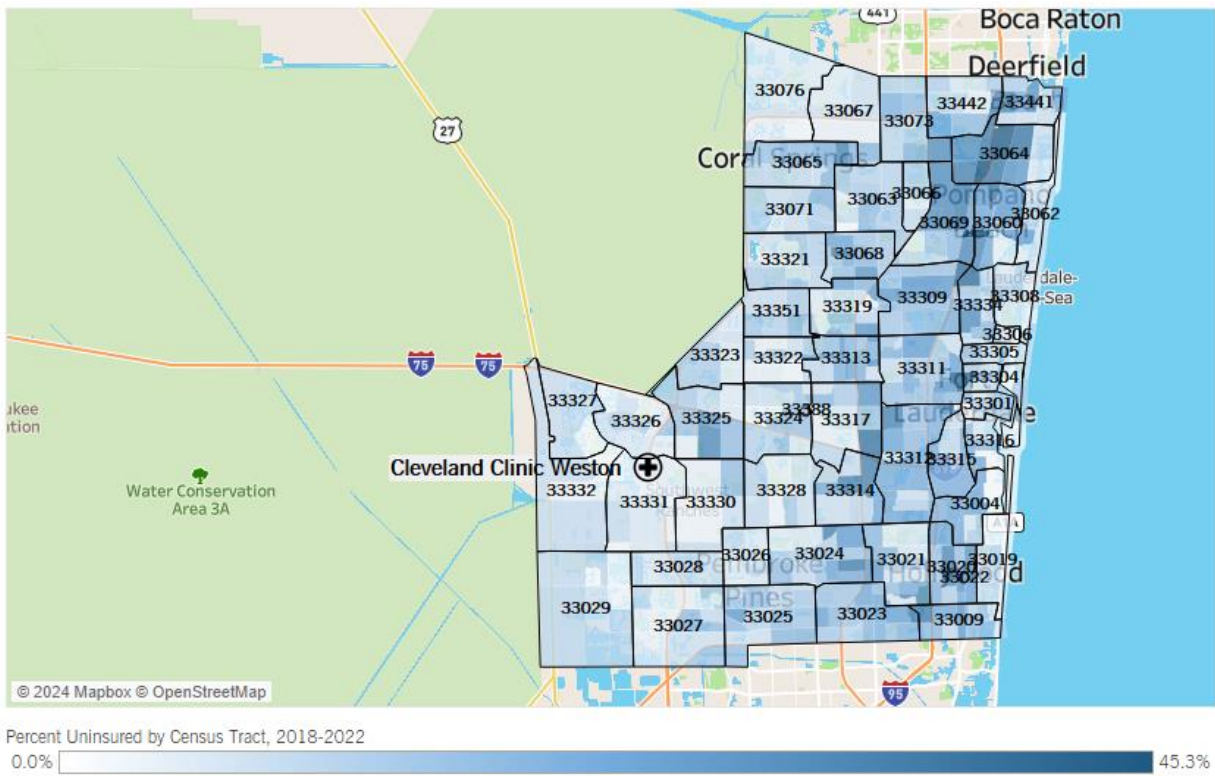
Uninsured Population

Figure 28 - Uninsured population by census tract, Source: U.S. Census Bureau ACS 2018-2022
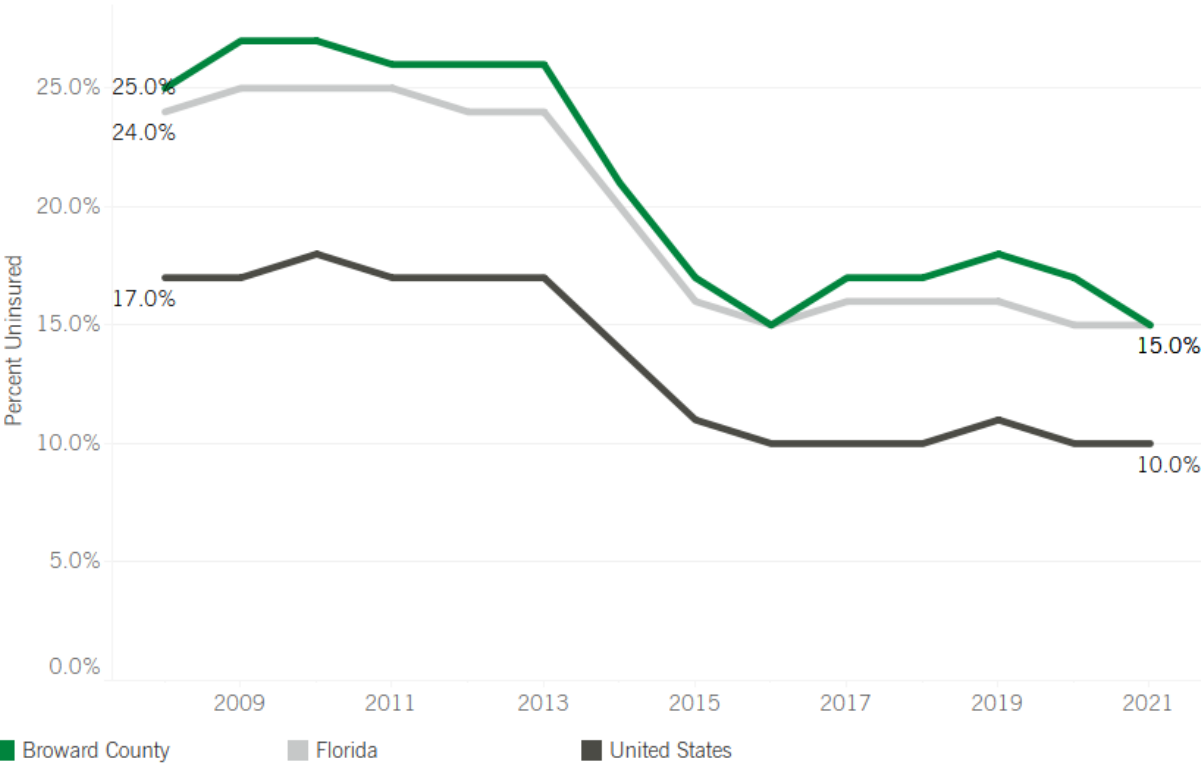
Uninsured Population

Figure 29 - Uninsured population over time, Source: County Health Rankings 2024

Economic Stability

Employment, Income, and Poverty

The 2023 annual unemployment rate for Broward County was equal to Florida's rate (2.9%). According to the 2018-2022 U.S. Census Bureau American Community Survey estimates, the median household income in Broward County was higher than the Florida benchmark. Black and Hispanic individuals in the defined community had lower median household incomes than the Florida median household income for all races/ethnicities. Poverty thresholds are determined by family size, the number of children, and the age of the head of the household. A family's income before taxes is compared to the annual poverty threshold. As of January 27, 2024, the federal poverty threshold for a family of four was $31,200. The Census Bureau estimates indicate that Broward County residents were more likely to live in poverty compared to Florida residents. Within Broward County, income inequality, or the gap between the highest- and lowest-earning households, was greater than the state ratio.

💡 Health Equity Highlight

According to Healthy People 2030, nearly one in ten individuals live in poverty in the United States. Those with steady employment are less likely to live in poverty and are more likely to be healthy. Economic stability represents a key domain within the HP2030 SDOH framework.

ALICE (asset-limited, income-constrained, employed) households are those earning above the federal poverty level but still facing difficulties affording basic expenses. The portion of households that fall within this category was greater within Broward County than in the state of Florida. County Health Rankings provides data related to living wage, which represents the minimum income necessary to meet basic needs for an adequate standard of living without requiring public assistance. The measure reflects the wage for a household of three with one adult working full-time and two children. The living wage in Broward County was higher than the state average.

	Broward County	Florida	United States
2023 unemployment rate [1]	2.9%	2.9%	3.6%
Median household income [2]	$ 70,331	$ 67,917	$ 75,149
Living wage [3]	$ 47.98	$ 45.36	N/A
ALICE households [4]	35.0%	33.0%	29.0%
Individuals below poverty level [2]	13.3.%	12.7%	11.5%
Children below poverty level [3]	19.0%	17.0%	16.0%
Income inequality ratio [3]	4.8	4.6	4.9

Figure 30 - Socioeconomic indicators, Source: 1) Bureau of Labor Statistics, 2) U.S. Census Bureau ACS 2018-2022, 3) County Health Rankings, income inequality represented as a ratio of household income at the 80th percentile to that of the 20th percentile, 4) United Way ALICE Report, shading indicates the county measure was greater than or worse than the state benchmark value

Median Household Income by Census Tract
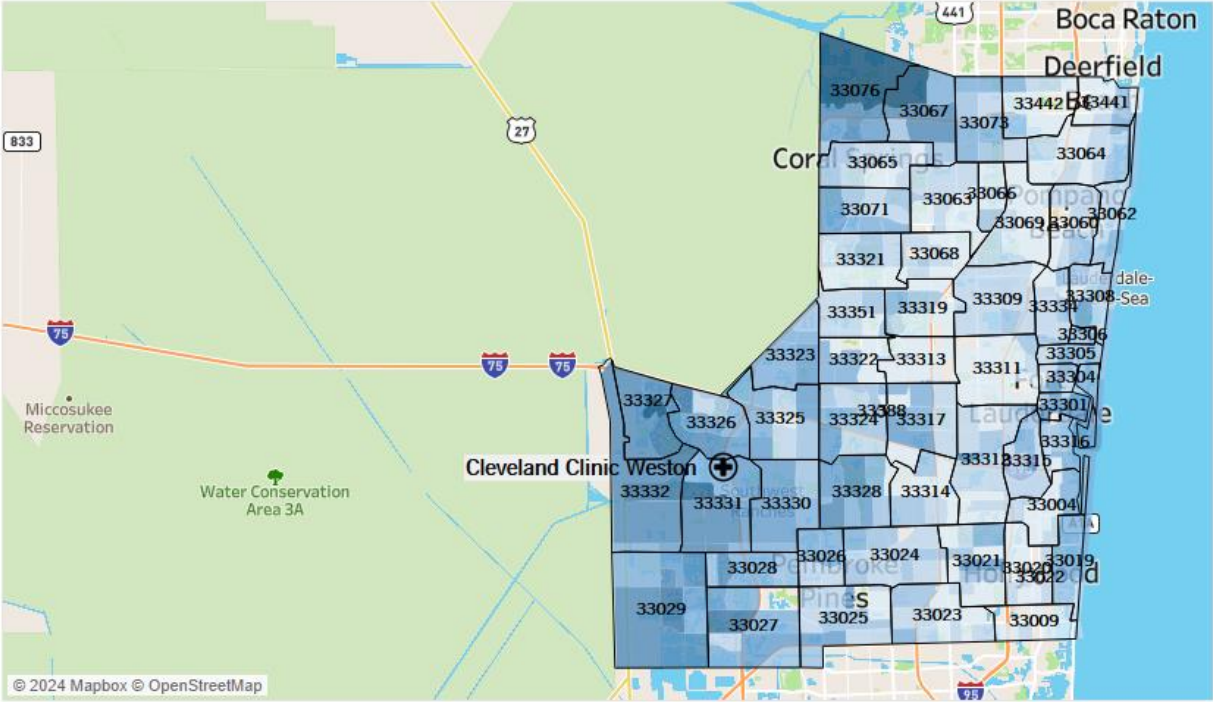
Median Household Income by Census Tract, 2018-2022
$17,672 — $221,222

Figure 31 - Map of median household income by census tract, Source: U.S. Census Bureau ACS 2018-2022

Median Household Income by Race/Ethnicity

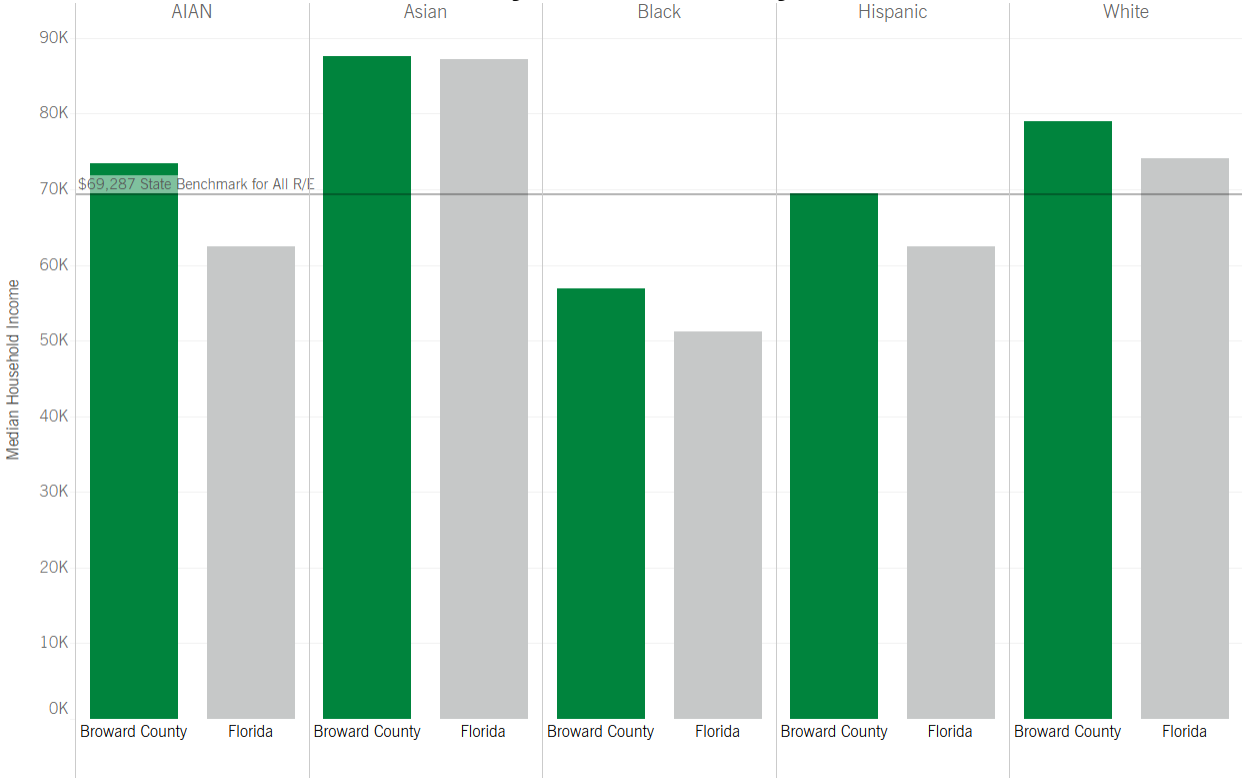Figure 32 - Median household income by race/ethnicity 2018-2022, Source: County Health Rankings 2024
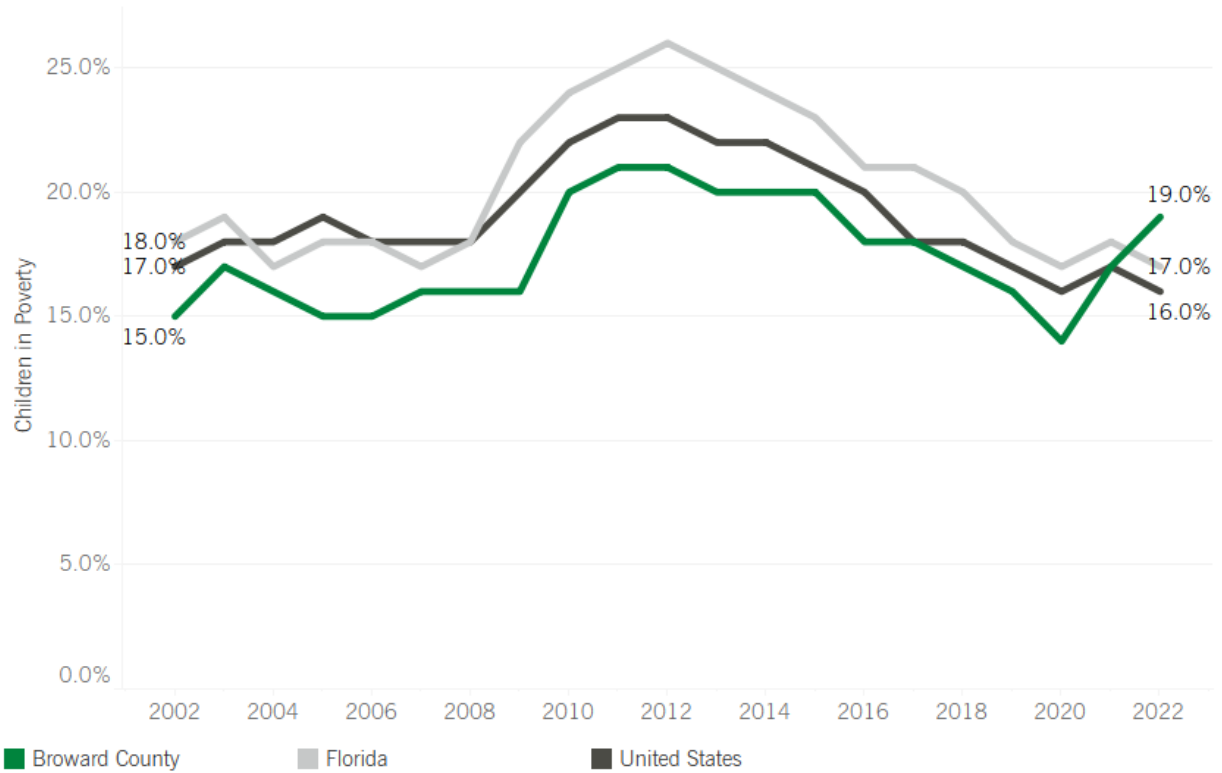
Children Below Federal Poverty Level Over Time

Figure 33 – Children below federal poverty level over time, Source: County Health Rankins 2024

Population Below Federal Poverty Level
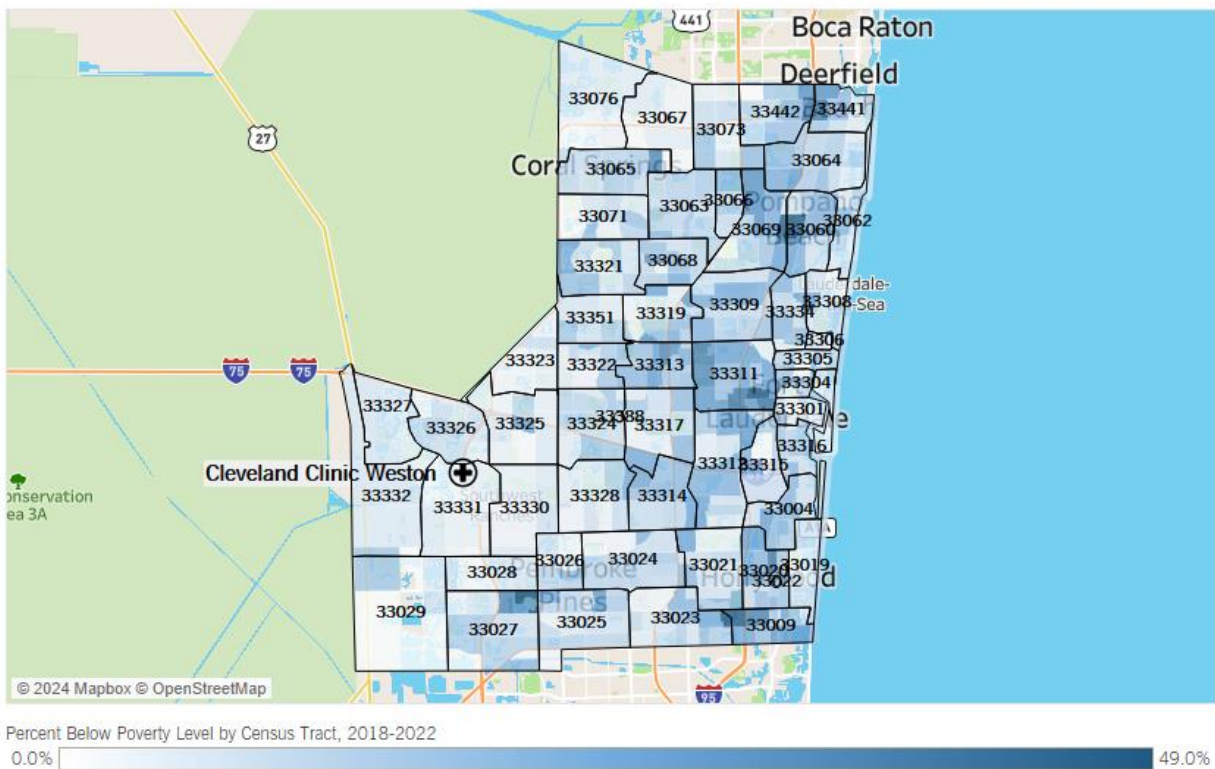
Figure 34 – Population below the federal poverty level by census tract, Source: U.S. Census Bureau ACS 2018-2022

Unemployment Over Time
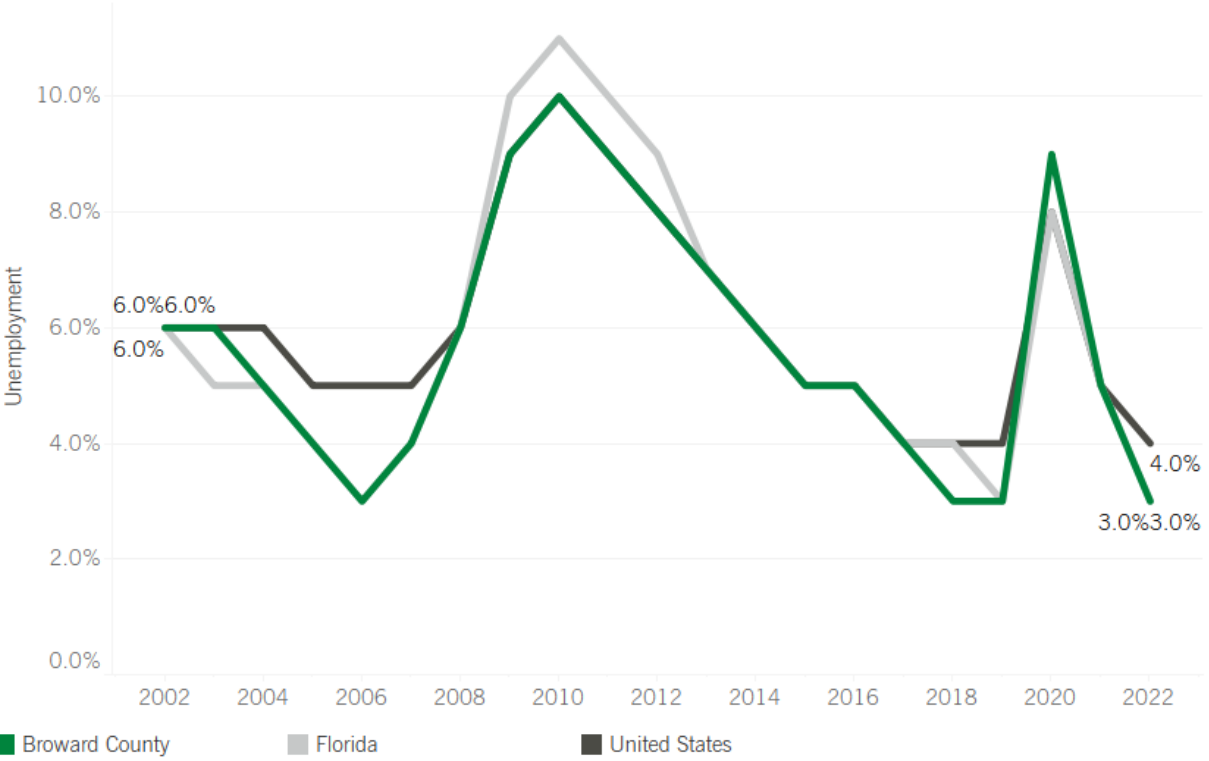
Figure 35 – Unemployment over time, Source: County Health Rankings 2024

Housing

The U.S. Census Bureau's 2018-2022 American Community Survey (ACS) estimates indicated that Broward County had a lower rate of homeownership than the state and national benchmarks. Of Broward County residents, 86.8% occupied the same residences as one year ago, slightly greater than the state average. The county had a larger portion of adults over age 65 living alone than Florida.

County Health Rankings publishes estimates of severe housing cost burden and segregation utilizing ACS data. Overall, Broward County had a greater proportion of individuals with a severe housing cost burden when compared to Florida. From 2018-2022, the racial segregation index for Black/White households in Broward County was lower than the Florida and United States indicators. School segregation was also lower than the state and national averages.

Home Ownership and Housing Characteristics

	Broward County	Florida	United States
Homeownership	62.8%	66.9%	64.8%
Same residence as 1 year ago	86.8%	85.6%	86.9%
Percent of adults over age 65 who live alone	26.7%	24.3%	26.6%
Severe housing cost burden	24.0%	19.0%	17.0%
Residential segregation - Black/white	54.0	57.0	61.0
School segregation	0.16	0.22	0.24

Figure 36 - Homeownership and housing characteristics, Source: U.S. Census Bureau ACS 2018-2022, County Health Rankings 2024, shading indicates the county measure was greater than or worse than the state benchmark value.

Rent

According to 2022 estimates by the U.S. Census Bureau, the median monthly rental cost within Broward County exceeded the state average by over $240 and exceeded the national average by $466. Broward County's median rent rose nearly 30% from 2018 to 2022. A greater portion of residents in Broward County rented compared to Florida and the United States.

	Broward County	Florida	United States
Median rent - 2022	$ 1,766	$ 1,525	$ 1,300
Renter occupied housing units	37.2%	35.2%	33.1%

Figure 37 – Renters and rent costs, Source: U.S. Census Bureau ACS 2018-2022, median rent reflects one-year estimates, shading indicates the county measure was greater than or worse than the state benchmark value.
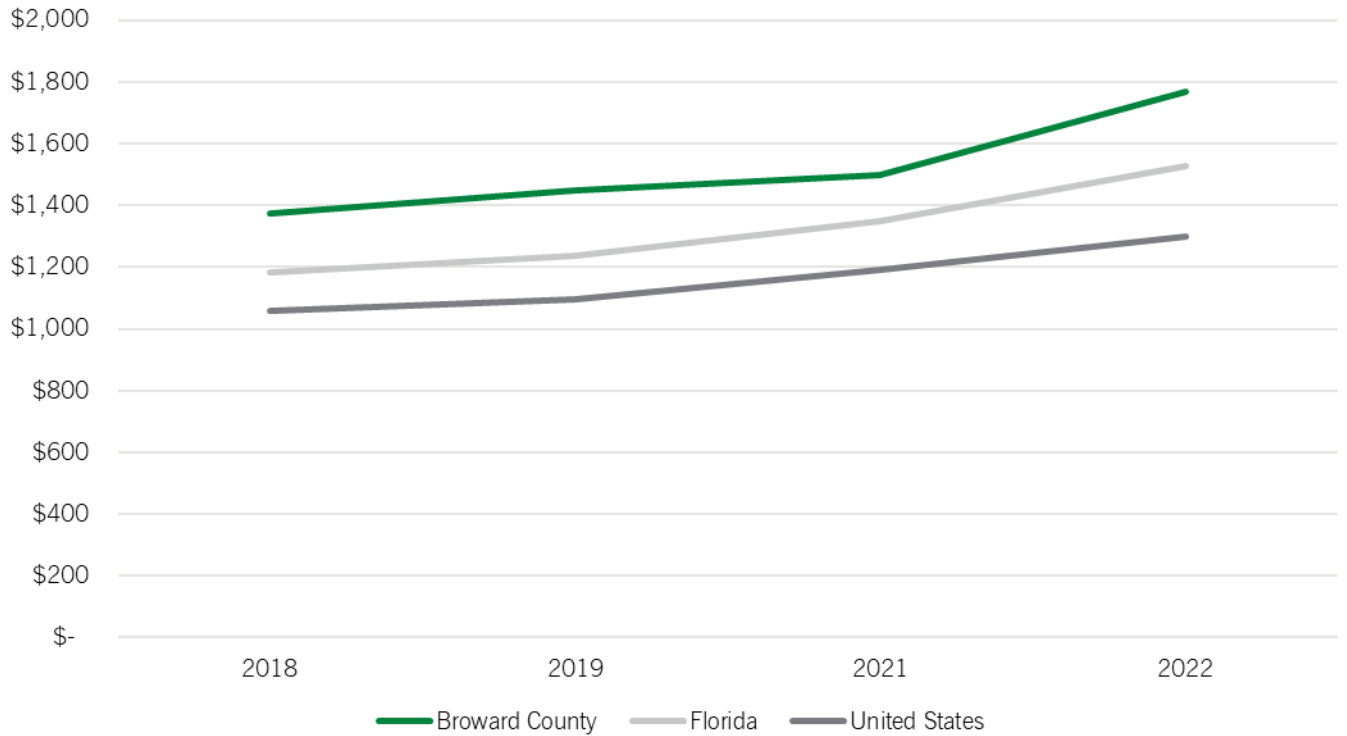
Rental Costs Over Time

Figure 38 - Median rent over time, Source: U.S. Census Bureau ACS

Housing Cost Burden

Percent of Rental Units with Gross Rent Costing Over 35% of Household Income
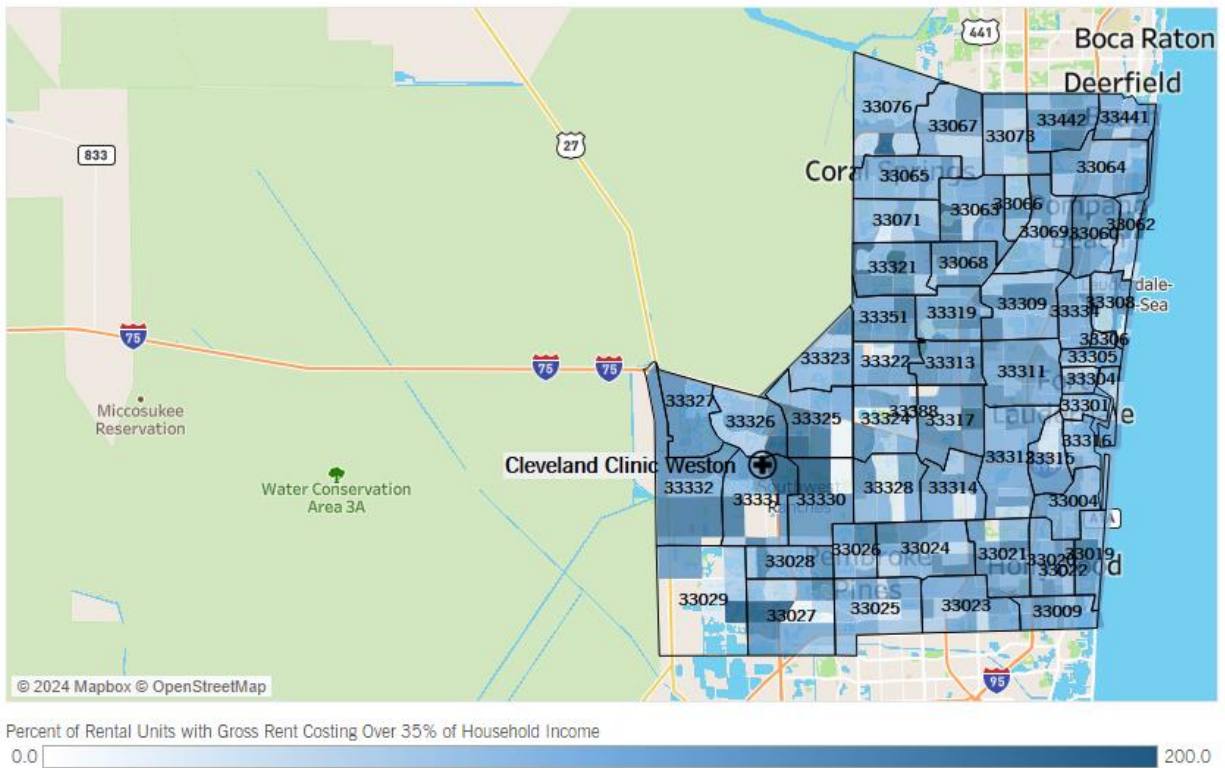
0.0 _____ 200.0

Figure 39 - Percent of rental units with gross rent greater than 35% of household income by census tract, Source: U.S. Census Bureau ACS

Homelessness

The Florida Department of Children and Families provides a Point-in-Time (PIT) count of sheltered and unsheltered homeless persons on a single night. The 2023 count for Broward County included 2,487 individuals.

	Broward County
Total homeless individuals January, 2023	2,487

Figure 40 - Point-in-time homelessness count, Source: Florida Health Charts, Florida Department of Children and Families

Food Insecurity

Food Insecurity and Access to Healthy Foods

The food environment index reported by County Health Rankings is scored from 1 (worst) to 10 (best). In 2021, Broward County's index was higher than the state value, reflecting a better food environment. A lower percentage of Broward County residents experienced limited access to healthy foods than those in Florida and the United States in 2019. According to County Health Rankings, the 2021 food insecurity rate in Broward County was also lower than the state and national averages.

Feeding America reported that when safety net programs expanded during the economic downturn caused by the COVID-19 pandemic, food insecurity levels were stable or declined. However, as the program expansions ended and food prices simultaneously rose, food insecurity levels increased significantly.

	Broward County	Florida	United States
Food environment index	8.8	7.2	7.7
Limited access to healthy foods	2.4%	7.6%	6.1%
Food insecurity	8.6%	10.6%	10.4%

Figure 41 - Food environment and food insecurity, Source: County Health Rankings 2024, shading indicates the county measure was greater than or worse than the state benchmark value.

💡 Health Equity Highlight

Lack of access to affordable healthy foods has been linked to an increased risk of being diagnosed with diet-related chronic illness, including certain cancers, diabetes, and cardiovascular disease. Racial minorities and people of lower socioeconomic status are more likely to live in environments with lower food indices and bear the burden of diet-related illnesses at greater proportions.

SNAP Benefits and Average Meal Costs

According to Map the Meal Gap, one in eight people, and one in five children in Florida face hunger. The Supplemental Nutrition Assistance Program (SNAP) provides temporary help for individuals to buy food. It is estimated that 38.3% of Florida households receiving SNAP benefits have children. Over a third of individuals who were food insecure did not meet the criteria for receiving SNAP benefits in 2022. The average meal cost in Broward County was greater than the average meal cost in the state in 2022. Across all food-insecure individuals within the county, the annual food budget shortfall is estimated at over $189 million.

	Broward County	Florida	United States
Percent of food insecure above (outside) SNAP threshold	38%	46%	*
Percent of food insecure below (inside) SNAP threshold	62%	54%	*
Average meal cost	$ 4.57	$ 4.13	$ 3.99

Figure 42 - Food insecure SNAP benefits and average meal cost, Source: Feeding America Map the Meal Gap 2022, shading indicates the county measure was greater than or worse than the state benchmark value.

Education

The U.S. Census Bureau 2018-2022 estimates indicate that Broward County had a greater portion of individuals over age 25 with a bachelor's or graduate/professional degree compared to the Florida benchmarks.

Highest Level of Education Completed

	Broward County	Florida	United States
Less than 9th grade	4.3%	4.4%	4.7%
9th to 12th grade, no diploma	5.7%	6.4%	6.1%
High school degree or equivalent	26.8%	27.7%	26.4%
Some college, no degree	18.4%	19.2%	19.7%
Associate's degree	9.9%	10.1%	8.7%
Bachelor's degree	21.6%	20.2%	20.9%
Graduate or professional degree	13.3%	12.1%	13.4%

Figure 43 - Highest Level of Education Completed by Persons 25 Years and Older, Source: U.S. Census Bureau ACS 2018-2022, shading indicates the county measure was greater than or worse than the state benchmark value.
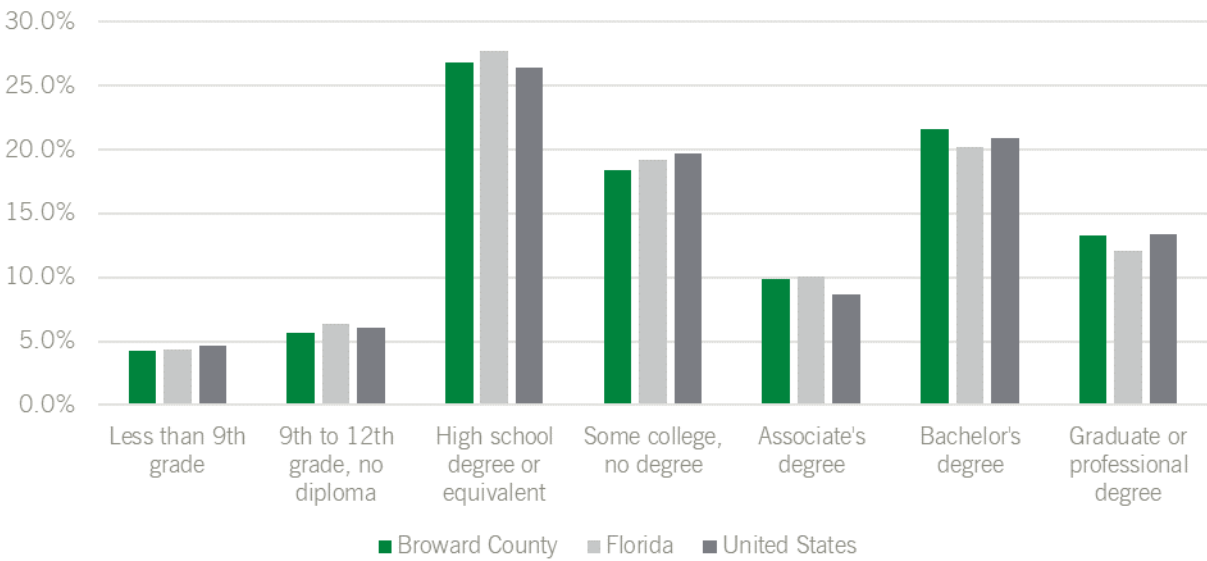
Figure 44 - Highest level of education completed by persons 25 years and older, Source: U.S. Census Bureau ACS 2018-2022

High School Graduation Rates by Race/Ethnicity

According to the Florida Department of Education, the high school graduation rates for Black, American Indian, and Pacific Islander students within Broward County were lower than the Florida benchmark rate for all students.

	Broward County	Florida
All Race/Ethnicities	88.7%	88.0%
American Indian	87.0%	84.7%
Asian	97.0%	96.9%
Black	85.3%	83.2%
Hispanic	88.8%	86.8%
Pacific Islander	84.6%	87.1%
Two or More Races	91.7%	88.4%
White	93.3%	91.0%

Figure 45 - High school graduation rates by race/ethnicity, Source: Florida Dept. of Education, 2022-2023 * indicates suppressed data or no data, shading indicates the measure was worse than the benchmark value for all races/ethnicities.

Health Equity Highlight

Unequal educational opportunities and lower educational attainment are intrinsically linked to disparities in health outcomes. Understanding the health benefits of educational attainment and the broader social context of its impact is integral to reducing health disparities.

Literacy and Numeracy

The National Center for Education Statistics publishes adult numeracy and literacy estimates by county. Scores below level 1 indicate adults are at risk of having difficulties using or comprehending written or numeric materials, while level 2 indicates adults are near proficient but may still struggle to perform tasks using written or numeric information. Broward County had a greater portion of individuals below level 1 literacy and below level 1 numeracy than the state.

	Broward County	Florida
Literacy below level 1	25.0%	24.0%
Literacy at level 2	34.0%	34.0%
Literacy at or above level 3	42.0%	42.0%
Numeracy below level 1	37.0%	35.0%
Numeracy at level 2	34.0%	35.0%
Numeracy at or above level 3	30.0%	30.0%

Figure 46 - Literacy and numeracy scores for adults, Source: National Center for Education Statistics PIAAC Skills Map 2013-2017

Transportation

Transportation Indicators

According to the U.S. Census Bureau's 2018-2022 American Community Survey estimates, individuals in Broward County had less access to vehicles and experienced more traffic volume compared to all Florida residents. Broward County residents had a greater average commute time than the Florida benchmark, and a greater portion of residents driving alone to work than the state average.

	Broward County	Florida	United States
Housing units with no vehicles available	6.9%	6.0%	8.3%
Traffic volume	248	145	108
Driving alone to work	74%	74%	72%
Driving alone to work, long commute	45%	43%	36%
Mean travel time to work (minutes)	29.4	28.0	26.4

Figure 47 - Transportation indicators, Source: U.S. Census Bureau ACS 2018-2022

Walkability

The Environmental Protection Agency's 2021 National Walkability Index dataset ranks each block group relative to all other block groups in the United States. Across the county, areas with the most walkable scores (index score of 15.26 to 20) were located in Fort Lauderdale, Oakland Park, Pompano Beach, and Dania Beach. Weston was primarily rated as below-average walkable (index score of 5.76 to 10.50).

Crime and Violence

According to the Florida Department of Law Enforcement, rates of crime in 2020-2021 were generally higher within Broward County than the Florida and U.S. benchmark rates. However, rates of rape and aggravated assault were lower within Broward County than the benchmark rates. The homicide rates for Black individuals in Broward County exceeded the state average for all races/ethnicities.

Violent & Property Crime Rates

	Broward County	Florida	United States
Total Crime Rate	2,434.8	1,952.3	*
Homicide	5.7	5.1	6.8
Rape	35.6	39.7	42.4
Robbery	110.4	50.9	65.5
Aggravated Assault	227.6	273.3	272.2
Burglary	283.6	201.9	270.9
Larceny/Theft	2,038.8	1,218.3	1,305.5
Motor Vehicle Theft	266.2	163.0	255.9

Figure 48 - Crime rates per 100,000 population, Source: Florida Dept. of Law Enforcement, Crime in Florida 2020-2021, and FBI Crime in the United States 2021, *comparable total unavailable.

Homicides by Race/Ethnicity
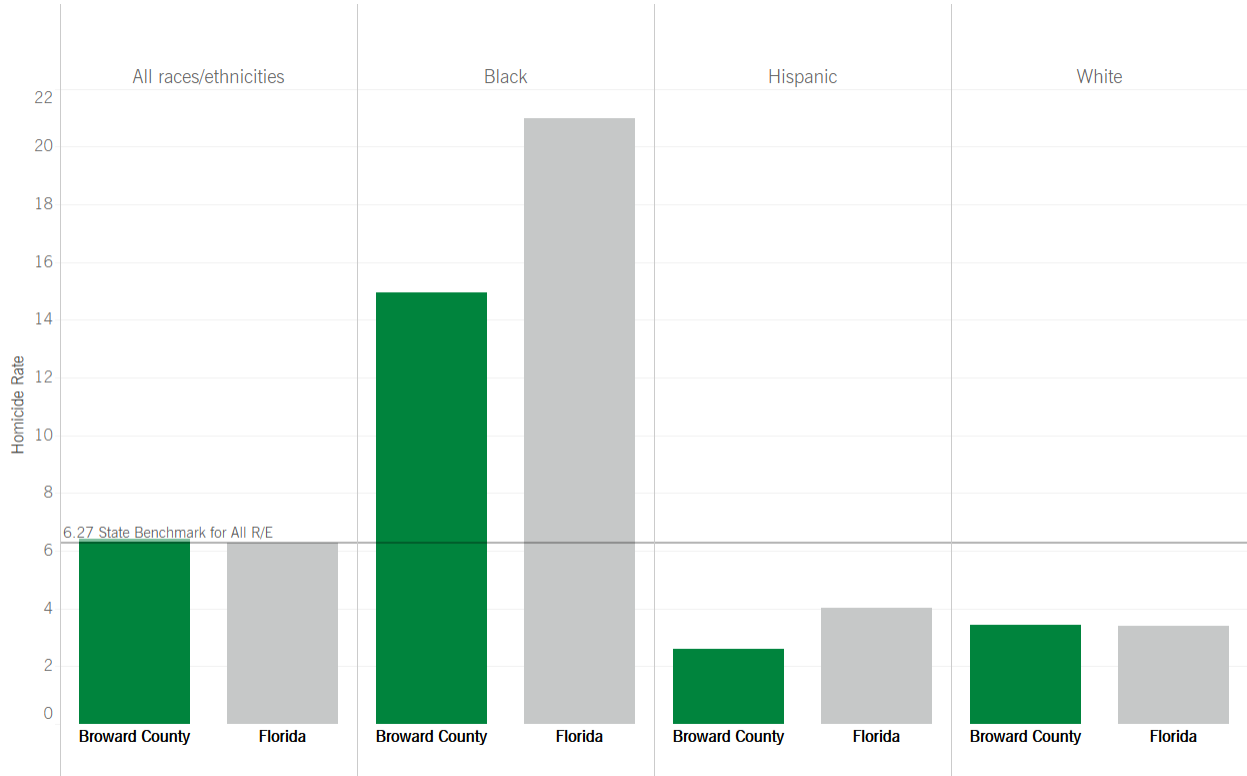
Figure 49 - Homicides by race/ethnicity, Source: County Health Rankings 2024

Rates of Child Abuse and Domestic Violence

Reported rates of child abuse and sexual violence against children ages 5-11 were less frequent in Broward County than the state rate from 2021 to 2023. The rate of domestic violence offenses was over 60% lower in Broward County than in Florida from 2020 to 2022.

	Broward County	Florida
Child abuse (age 5-11)*	288.9	483.8
Sexual violence (age 5-11)*	13.0	42.0
Domestic violence offenses**	111.9	300.9

Figure 50 - Child abuse and domestic violence rates *per 100,000 children 2021-2023 or ** per 100,000 population 2020-2022, Source: Florida Health Charts, shading indicates the county measure is worse than the state benchmark value.

Human Trafficking

According to Florida Health Charts and the National Human Trafficking Hotline, the state of Florida had 1,253 human trafficking victims, 141 human trafficking-related hospitalizations, and 71 related emergency department visits in 2021.

Violence in Healthcare Settings

According to the Florida Hospital Association and U.S. Bureau of Labor Statistics, hospital workers are six times more likely to experience violence in the workplace than other private sector workers. Violence in healthcare settings can hinder the provision of high-quality healthcare and may tie up resources resulting in delayed care. Approximately 44% of nurses reported experiencing physical violence and 68% reported experiencing verbal abuse in the workplace during the pandemic.

Environmental Risk Factors

Toxic Exposures and Green Spaces

Florida Health Charts publishes data on toxic exposures and poisonings, water quality, school environmental safety, access to green spaces, and other environmental health measures. The rates of lead and carbon monoxide poisoning within Broward County were lower than the state rates from 2020 to 2022. During the same time frame, 100% of county residents received fluoridated water. School environmental safety incidents were less prevalent within the community when compared to the Florida rate from 2021 to 2023. Individuals had greater access to green spaces compared to the state average, with nearly three-quarters of Broward County residents living within a half mile of a park (considered walking distance) in 2022.

	Broward County	Florida
Lead poisoning	6.0	7.4
Carbon monoxide poisoning	0.4	0.7
Population receiving fluoridated water	100.0%	78.2%
School environmental safety incidents *	25.4	33.6
Population living within 0.5 miles of a park	74.3%	43.0%

Figure 51 - Environmental exposures and incidents, Source: Florida Health Charts, 2020-2022, rates per 100,000 population, * rate per 1,000 K-12 students 2021-2023, shading indicates the county measure was greater than or worse than the state benchmark value.

Biomedical Waste

Florida Health Charts and the Florida Bureau of Environmental Health report data on improper disposal of biomedical waste from facilities such as hospitals, clinics, laboratories, nursing homes, dental offices, and funeral homes. Unsatisfactory inspections of biomedical and group facilities indicate an enhanced risk of contracting diseases through environmental exposure to pathogens. Broward County had a higher percentage of unsatisfactory inspections of group care facilities when compared to the Florida state benchmark.

	Broward County	Florida
Unsatisfactory inspections of biomedical waste facilities	12.0%	13.3%
Unsatisfactory inspections of group care facilities	19.3%	9.0%

Figure 52 – Biomedical waste exposures, Source: Florida Health Charts, 2023, shading indicates the county measure is greater than the state benchmark value for unsatisfactory inspections.

Pollution and Environmental Risk Factors

According to County Health Rankings, Broward County had a higher level of air pollution (particulate matter) than the Florida and U.S. averages in 2019. There were no drinking water violations in 2022. Approximately one-quarter of residents in Broward County experienced severe housing problems from 2016-2020. The severe housing problems indicator measures households with at least one in four of the following issues: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities.

	Broward County	Florida	United States
Air pollution - particulate matter	8.9	7.8	7.4
Drinking water violations	No	N/A	N/A
Severe housing problems	24%	19%	17%

Figure 53 - Environmental risk factors, Source: County Health Rankings 2024, air pollution displayed as the average daily density of fine particulate matter in micrograms per cubic meter, shading indicates the county measure was greater than or worse than the state benchmark value.

Community Resilience Estimates

The Census Bureau provides community resilience estimates (CRE) by census tract and county, which reflect the capacity of individuals and households to prepare, absorb, respond, and recover from a disaster. The percentage of community residents with three or more components of social vulnerability is featured in the map below.
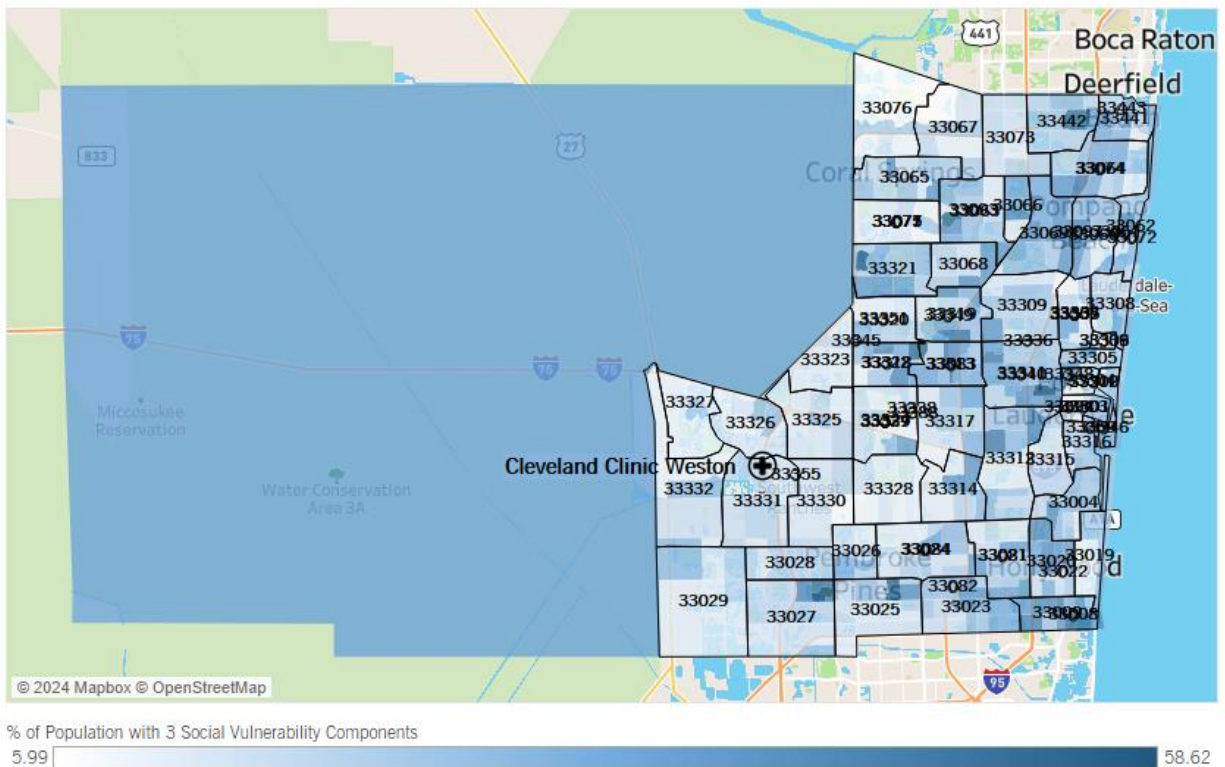
Figure 54 – Percent of population with 3 or more social vulnerability components by census tract, Source: U.S. Census Bureau 2022 Community Resilience Estimates

Health Behaviors & Obesity

Physical Activity, Food Environment

In 2022, Broward County had a greater percentage of individuals living within a half mile of a fast-food restaurant compared to the state average. Compared to the Florida benchmark, adults in Broward County were less likely to be sedentary in 2019.

	Broward County	Florida
Living within 1/2 mile of a fast food restaurant, 2022	53.7%	33.6%
Adults who are sedentary, 2019	24.1%	26.5%

Figure 55 - Food environment and sedentary behavior, Source: Florida Health Charts, Behavioral Risk Factor Surveillance System, shading indicates the county measure was greater than or worse than the state benchmark value.

Obesity

According to County Health Rankings, the adult obesity rate within Broward County exceeded the state benchmark rate in 2021.

	Broward County	Florida	United States
Adult obesity	30.6%	28.3%	34.0%

Figure 56 – Adult obesity, Source: County Health Rankings 2024, shading indicates the county measure was greater than or worse than the state benchmark value.

Sleep

Lack of sleep is linked to chronic conditions, mental health conditions, and risky behaviors. County Health Rankings reports on the portion of adults who report less than 7 hours of sleep per night on average. Individuals in Broward County were more likely to report insufficient sleep than the state average in 2020.

	Broward County	Florida	United States
Insufficient sleep <7 hours	38.0%	34.0%	33.0%

Figure 57 – Insufficient sleep, Source: County Health Rankings 2024, shading indicates the county measure was greater than or worse than the state benchmark value

Life Expectancy & Mortality

The premature death rate and indicator for Broward County were better than the Florida benchmarks from 2019 to 2021. Overall life expectancy was greater in Broward County than in Florida and the United States. However, Black residents' life expectancy was 1.3 years lower than the Florida average for all races/ethnicities.

	Broward County	Florida	United States
Premature age-adjusted mortality	340.2	386.9	390.1
Premature death indicator (YPLL rate)	7,279.0	8,299.1	7,971.5
Life expectancy	79.7	78.5	77.6
AIAN life expectancy	87.0	93.6	72.8
Asian/Pacific Islander life expectancy	88.2	88.3	86.5
Black life expectancy	77.2	74.5	72.7
Hispanic life expectancy	84.5	81.9	80.3
White life expectancy	78.3	77.7	77.6

Figure 58 - Mortality indicators and life expectancy, Source: County Health Rankings 2024, mortality rate per 100,000 population, YPLL in years of potential life lost before age 75 per 100,000 population, shading indicates the county measure was greater than or worse than the state benchmark value
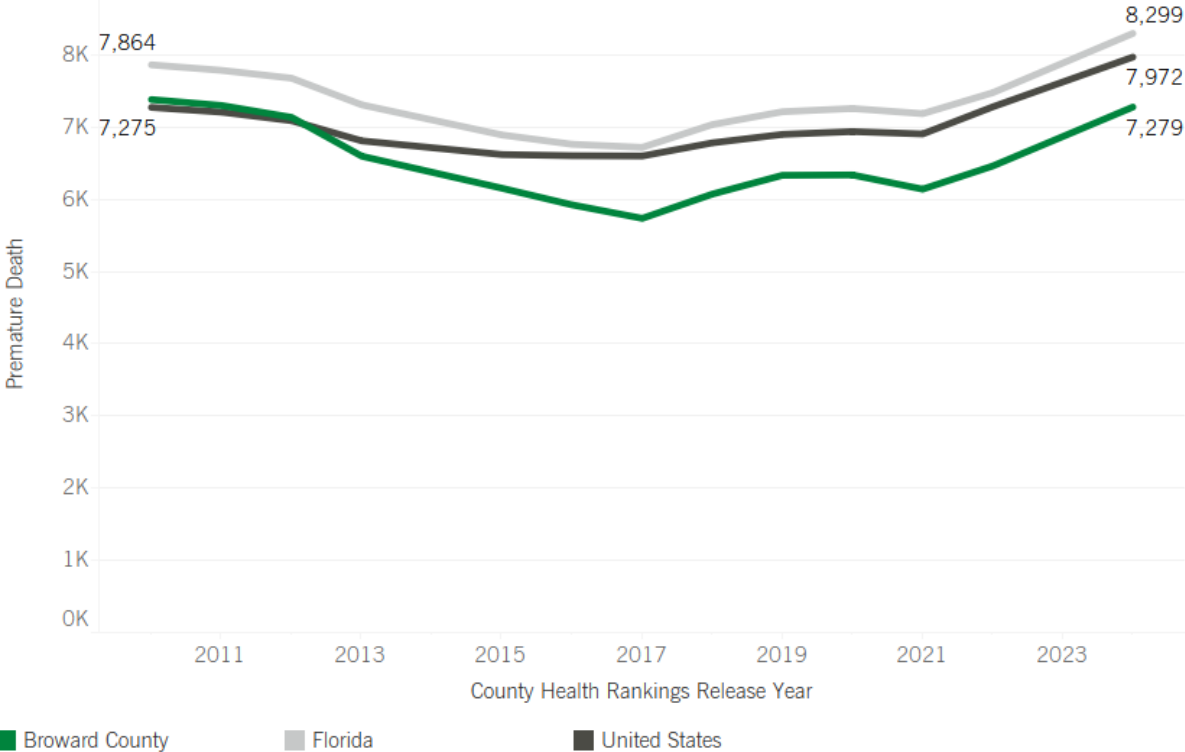
Premature Death Over Time

Figure 59 - Premature death in years of potential life lost (YPLL), Source: County Health Rankings
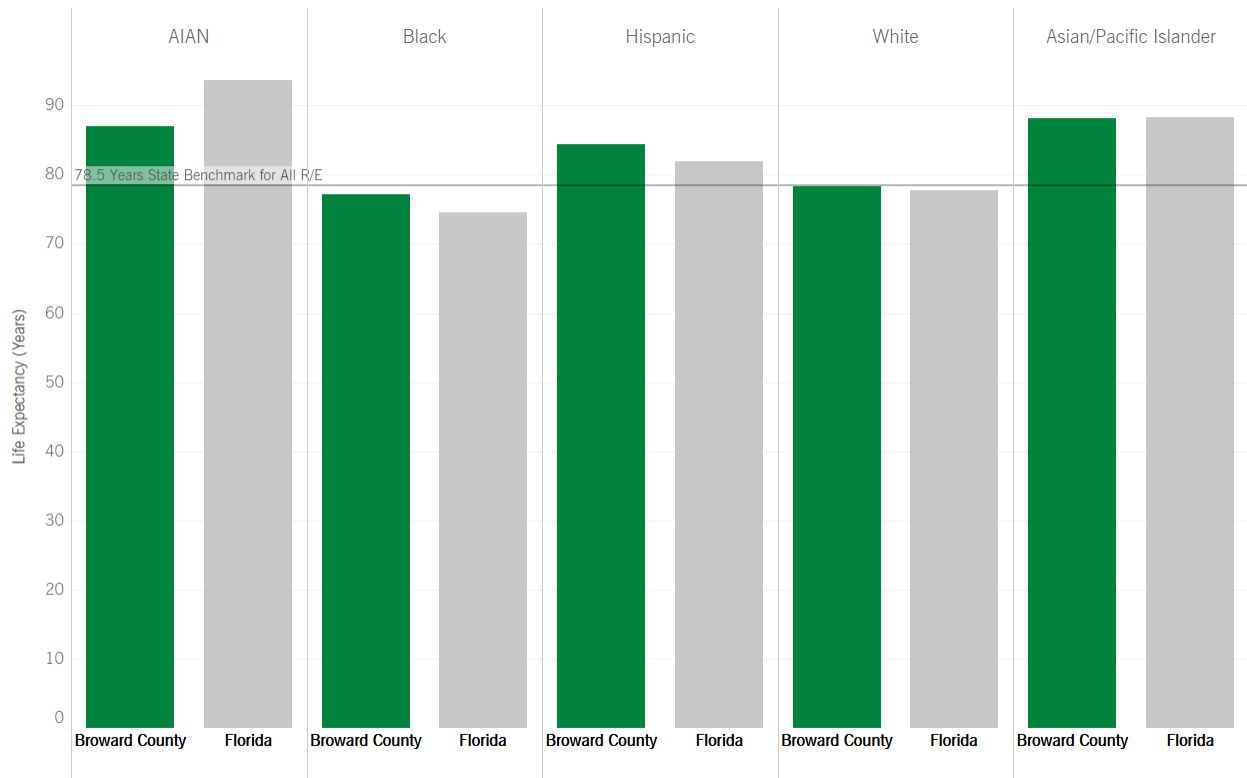
Life Expectancy by Race/Ethnicity

Figure 60 - Life Expectancy by race/ethnicity, Source: County Health Rankings 2024
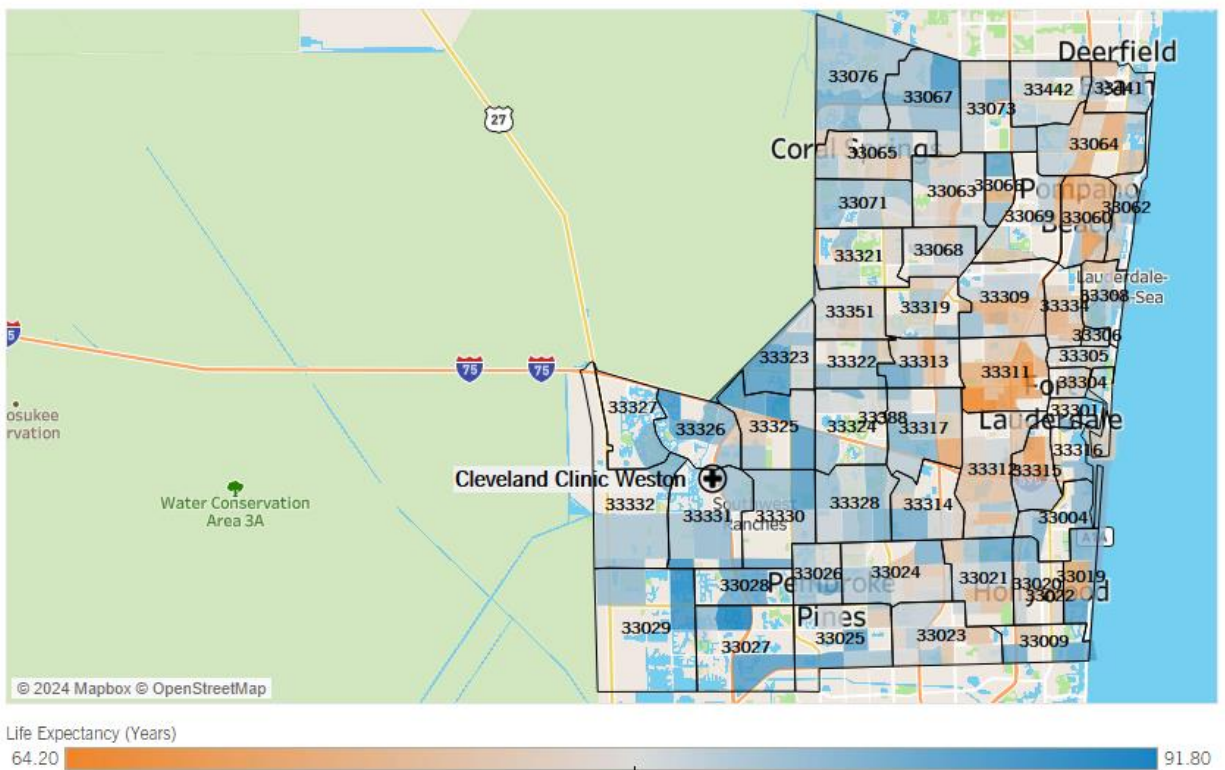
Life Expectancy by Census Tract

Figure 61 - Life expectancy by census tract, Source: Florida Health Charts 2016-2020

Leading Causes of Death

According to the Centers for Disease Control and Prevention, cancer, heart disease, and unintentional injury were the top three causes of death within the community. Within Broward County, death rates for top causes of death were generally lower than the state benchmarks, except for unintentional injuries. From 2018 to 2022 COVID-19 represented the fifth leading cause of death in Broward County.

	Broward County	Florida	United States
Heart disease	189.1	224.3	206.6
Cancer	174.9	212.5	182.7
(Unintentional injury) accident	79.9	68.6	47.7
Stroke	60.5	71.0	60.2
COVID-19	54.6	60.8	57.8
Chronic lower respiratory disease	37.5	53.7	46.0
Diabetes	26.6	32.7	29.0
Alzheimer's disease	16.9	31.0	37.4
Chronic liver disease and cirrhosis	12.2	15.6	14.5
Suicide	14.3	15.5	16.2
Kidney disease	12.2	16.6	15.2
Hypertension	11.3	13.7	11.4
Parkinson's disease	12.6	14.2	12.1
Influenza and pneumonia	10.3	13.6	15.2
Septicemia	7.8	12.3	12.3

Figure 62 - Age-adjusted death rates per 100,000 population, Source: CDC Wonder, Multiple Cause of Death 2018-2022, shading indicates the county measure was greater than or worse than the state benchmark value.

Morbidity & Preventable Hospitalizations

Morbidity

In 2021, more individuals reported poor or fair health in the community compared to the state and national benchmarks. The average number of poor physical health days reported was also greater within Broward County than in Florida. In 2021, Broward County had a higher rate of preventable hospitalizations for Medicare enrollees compared to the state rate.

	Broward County	Florida	United States
Poor or fair health	16.2%	13.3%	14.2%
Poor physical health days	3.3	3.0	3.3
Preventable hospitalization rate	3,413	3,035	2,681

Figure 63 – Indicators of morbidity and preventable hospitalization rate, Source: County Health Rankings 2024, shading indicates the county measure was greater than or worse than the state benchmark value.

Preventable Hospitalizations

Florida Health Charts reports on hospitalizations associated with ambulatory care-sensitive conditions. Compared to the state benchmarks, Broward County generally had lower hospitalization rates for adults under age 65 compared to the state benchmark rates in 2022. However, there was a higher rate of asthma hospitalization in the county than the state average. Black, Hispanic, and American Indian and Alaska Native individuals in the defined community experienced worse rates of preventable hospitalizations compared to the Florida rate for all races/ethnicities.

	Broward County	Florida
All conditions	659.1	757.6
Asthma	52.1	44.1
Bacterial pneumonia	61.4	65.2
Chronic obstructive pulmonary disease	38.0	57.0
Congestive heart failure	65.9	79.8
Dental conditions	6.5	9.3
Diabetes	119.1	133.9
Hypertension	3.1	3.4
Kidney/urinary infection	16.7	18.2
Nutritional deficiencies	80.4	102.8

Figure 64 - Preventable hospitalizations under age 65 for ambulatory care sensitive conditions, Source: Florida Health Charts 2022, rates are shown per 100,000 population under age 65, shading indicates the county measure was greater than or worse than the state benchmark value.

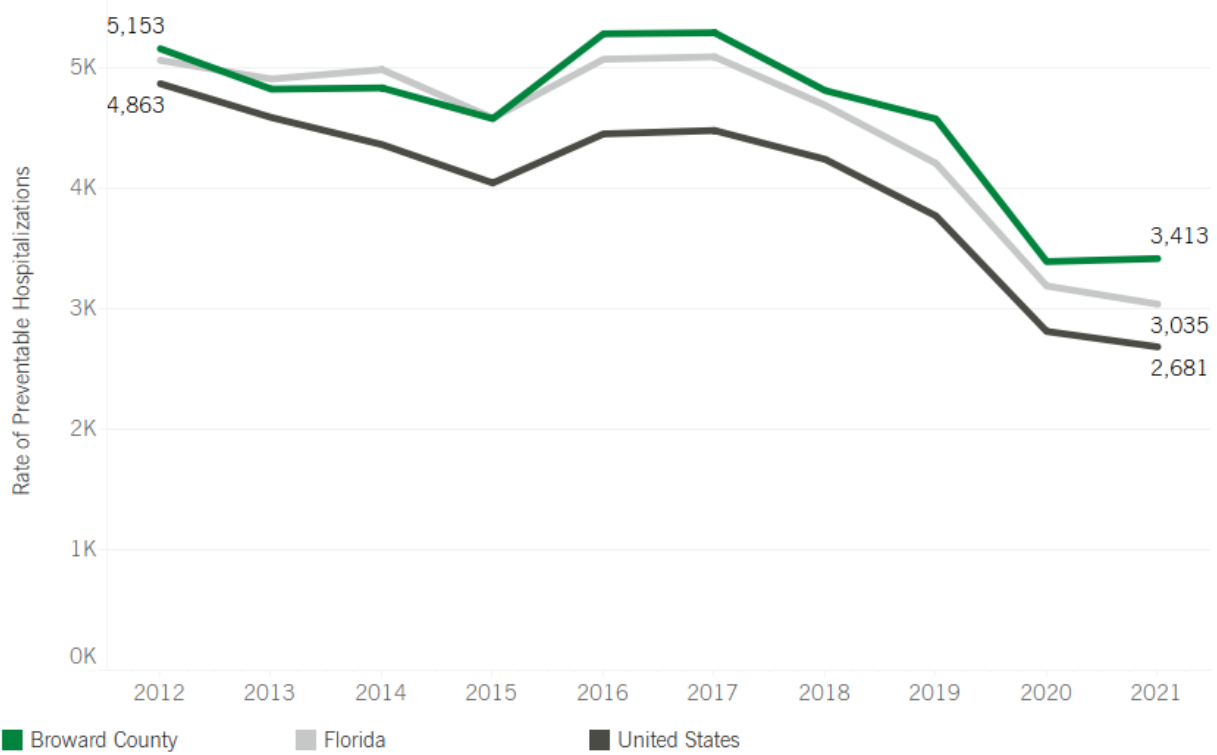# Preventable Hospitalizations Over Time

Figure 65 - Preventable hospitalizations over time, Source: County Health Rankings 2024
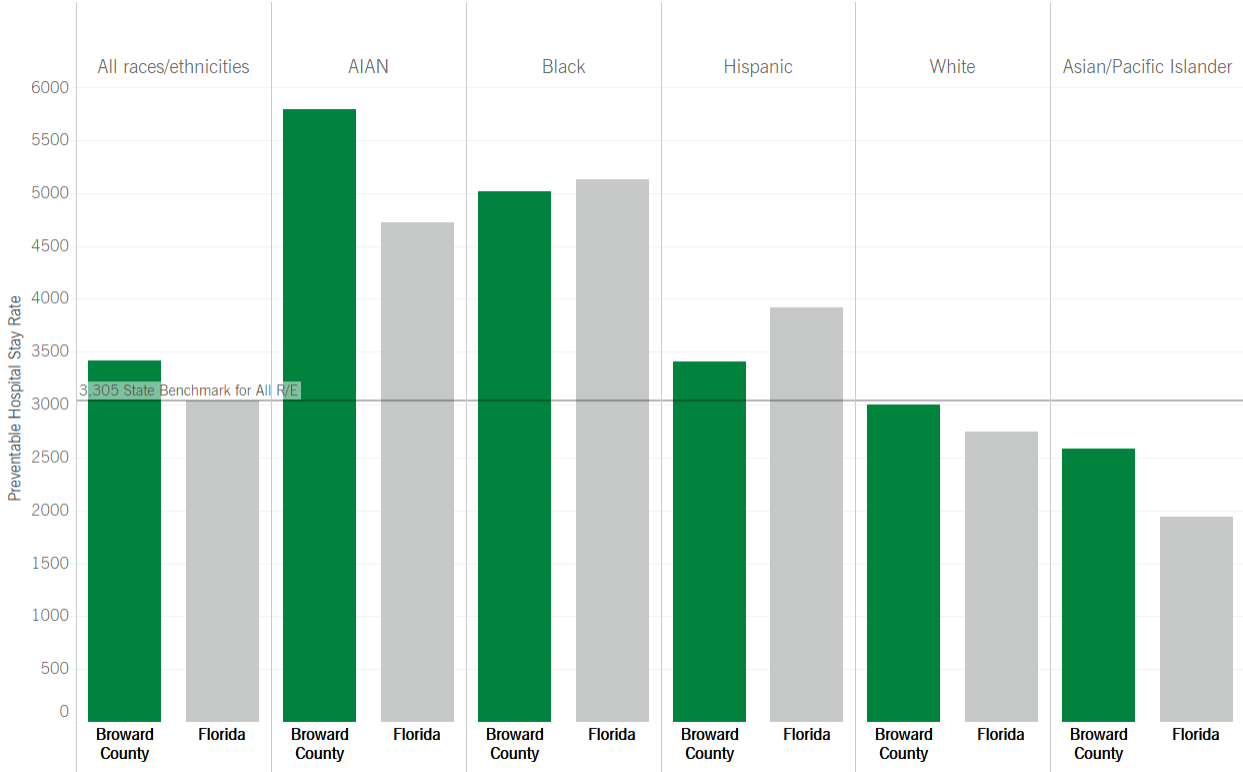
Preventable Hospitalizations by Race/Ethnicity

Figure 66 - Preventable hospital stays by race/ethnicity, Source: County Health Rankings 2024

Cancer

Cancer Risk Factors and Screening Rates

The National Cancer Institute reports on various cancer screenings, incidence of cancer, and cancer death rates. Within Broward County, the pap test (cervical cancer) screening rate for women aged 21 to 65 was lower than the state benchmark rate.

	Broward County	Florida	United States
Mammogram Past 2 Years (women over 40)	77.9%	71.1%	70.2%
Pap test (women ages 21-65, past 3 years)	73.6%	76.7%	77.7%
Sufficient colorectal screening (ages 50 to 75)	72.0%	-	-

Figure 67 - Cancer screening rates, Source: National Cancer Institute 2017-2019, shading indicates the county measure was worse than the state benchmark value, comparable colorectal screening data unavailable for the state and nation.

Cancer Incidence Rates

Broward County had lower rates of cancer overall (all cancer sites, all races/ethnicities) in addition to lower rates of breast, prostate, lung, colorectal, skin (melanoma), pancreatic, ovarian, cervical, and brain cancers than the statewide incidence rates from 2016 to 2020. Residents had an elevated incidence of stomach cancers during this time. For all cancer sites, the Broward County incidence rates for white and American Indian/Alaska Native populations were higher than the respective statewide rates.

	Broward County	Florida	United States
Breast[3]	114.3	121.3	127.0
Prostate[2]	89.0	97.0	110.5
Lung and bronchus[1]	46.9	61.2	61.1
Colon and rectum[1]	39.0	40.1	41.7
Melanoma[1]	19.2	22.5	25.4
Pancreas[1]	12.9	12.9	13.2
Ovarian[3]	10.1	10.9	10.1
Cervical[3]	8.3	9.1	7.5
Brain[1]	5.2	5.5	5.3
Stomach[1]	8.7	7.5	8.3

Figure 68 - Age-adjusted cancer incidence rates, Source: National Cancer Institute 2016-2020, Rates per 100,000 1) Population, 2) Males, 3) Females, shading indicates the county measure was greater than or worse than the state benchmark value.

Cancer Incidence by Race and Ethnicity for All Cancer Sites

	Broward County	Florida	United States
All Races (includes Hispanic)	412.0	434.4	442.3
White (includes Hispanic)	466.0	484.7	461.9
Black (includes Hispanic)	373.5	411.8	445.9
American Indian / Alaska Native (includes Hispanic)	364.6	275.9	392.6
Asian / Pacific Islander (includes Hispanic)	198.9	243.6	290.3
Hispanic (any race)	351.6	376.7	339.6

Figure 69 - Age-adjusted all cancer site incidence rates by race and ethnicity, Source: National Cancer Institute 2014-18, rates per 100,000 population, shading indicates the county measure was greater than or worse than the state benchmark value.

Cancer Mortality Rates

Broward County had higher death rates for breast, prostate, ovarian, stomach, and cervical cancers than the state benchmark rates. For all cancer sites, mortality rates for white and Asian/Pacific Islander populations in Broward County were higher than the statewide mortality rate for all races/ethnicities.

	Broward County	Florida	United States
Lung and bronchus[1]	27.5	33.9	35.0
Breast[3]	18.7	18.5	19.6
Prostate[2]	17.4	16.1	18.8
Ovarian[3]	6.1	6.0	6.3
Brain[1]	4.1	4.2	4.4
Stomach[1]	3.4	2.6	3.8
Melanoma[1]	1.6	2.1	2.1
Cervical[3]	2.9	2.7	2.2

Figure 70 - Age-adjusted cancer death rates, Source: National Cancer Institute 2016-2020, Rates per 100,000 1) Population, 2) Males, 3) Females, * indicates rate is unstable, shading indicates the county measure was greater than or worse than the state benchmark value

Cancer Mortality by Race and Ethnicity for All Cancer Sites

	Broward County	Florida	United States
All Races (includes Hispanic)	135.2	149.4	141.4
White (includes Hispanic)	150.8	150.2	154.4
Black (includes Hispanic)	134.7	154.8	174.7
American Indian / Alaska Native (includes Hispanic)	*	59.7	128.2
Asian / Pacific Islander (includes Hispanic)	85.0	83.9	94.5
Hispanic (any race)	103.5	108.7	108.2

Figure 71 - Age-adjusted all cancer site mortality rates by race and ethnicity, Source: National Cancer Institute 2016-2020, rates per 100,000 population, shading indicates the county measure was greater than or worse than the state benchmark value.

Heart Disease

Heart Disease Mortality

According to the Centers for Disease Control and Prevention, the age-adjusted mortality rate for all heart disease per 100,000 population was higher in Broward County than in Florida from 2019 to 2021. This trend was also present in the male and female death rates. The heart disease death rates for Black and white (non-Hispanic) residents were higher than the state benchmark rate for all races/ethnicities.

	Broward County	Florida	United States
All heart disease, all races/ethnicities	210.5	203.0	223.0
All heart disease, Black (non-Hispanic)	240.8	275.8	308.0
All heart disease, white (non-Hispanic)	231.0	206.0	225.6
All heart disease, Hispanic	143.4	170.2	166.4
All heart disease, American Indian and Alaska Native	100.9	87.3	198.0
All heart disease, Asian	130.5	113.9	128.6
All heart disease, Native Hawaiian or Other Pacific Islander	*	118.5	245.0
All heart disease, more than one race	97.1	98.5	101.0
All heart disease, male	245.6	243.4	270.8
All heart disease, female	179.3	167.4	182.8

Figure 72 - Age-adjusted all heart disease death rate per 100,000 population, Source: CDC, 2019-2021 * indicates insufficient data, shading indicates the county measure was greater than or worse than the state benchmark value.

Health Equity Highlight

While heart disease has ranked as the number one cause of death nationally for several years, it is noteworthy to state that health disparities exist even among the most common chronic illness.

Heart Attack Mortality

From 2019 to 2021, the age-adjusted death rate for heart attack per 100,000 population was lower within Broward County than in Florida and the United States.

	Broward County	Florida	United States
Heart attack, all races/ethnicities	17.6	21.8	26.2
Heart attack, Black (non-Hispanic)	19.7	26.4	31.7
Heart attack, white (non-Hispanic)	19.0	21.7	27.2
Heart attack, Hispanic	13.7	22.6	21.0
Heart attack, American Indian & Alaska Native	20.5	12.1	24.6
Heart attack, Asian	14.4	13.3	15.5
Heart attack, Native Hawaiian or Other Pacific Islander	*	*	28.2
Heart attack, more than one race	11.4	12.4	11.0
Heart attack, male	23.1	28.5	35.3
Heart attack, female	13.1	15.9	18.6

Figure 73 - Age-adjusted heart attack mortality per 100,000 population, Source: CDC, 2019-2021 *indicates insufficient data, shading indicates the county measure was greater than or worse than the state benchmark value.

Hypertension Mortality

Age-adjusted death rates for hypertension (high blood pressure) per 100,000 population were lower in Broward County than the state and national benchmarks from 2019 to 2021. The hypertension death rate for the Black non-Hispanic population in Broward County was greater than the state benchmark for all races/ethnicities.

	Broward County	Florida	United States
Hypertension, all races/ethnicities	98.7	135.1	153.9
Hypertension, Black (non-Hispanic)	160.3	217.9	242.4
Hypertension, white (non-Hispanic)	91.1	131.5	147.3
Hypertension, Hispanic	72.0	116.9	142.2
Hypertension, American Indian & Alaska Native	84.5	63.5	183.6
Hypertension, Asian	56.8	75.5	97.5
Hypertension, Native Hawaiian or Other Pacific Islander	*	82.1	176.2
Hypertension, more than one race	51.4	68.8	74.9
Hypertension, male	118.6	161.2	180.7
Hypertension, female	81.3	111.7	130.0

Figure 74 - Age-adjusted hypertension mortality per 100,000 population, Source: CDC, 2019-2021 * indicates insufficient data, shading indicates the county measure was greater than or worse than the state benchmark value.

Stroke Mortality

Within the defined community, the age-adjusted death rate for stroke per 100,000 population exceeded the state and national benchmarks. Black (non-Hispanic), white (non-Hispanic), and Hispanic populations in the community had higher stroke death rates than the Florida benchmark for all races/ethnicities. In Broward County, both the male and female stroke death rates exceeded the benchmark rates for Florida and the United States.

	Broward County	Florida	United States
All stroke, all races/ethnicities	56.4	43.4	39.0
All stroke, Black (non-Hispanic)	69.4	65.4	57.0
All stroke, white (non-Hispanic)	57.4	41.1	37.6
All stroke, Hispanic	44.7	43.8	34.8
All stroke, American Indian & Alaska Native	22.7	13.7	33.6
All stroke, Asian & Pacific Islander	39.4	30.4	31.5
All stroke, Native Hawaiian or Other Pacific Islander	*	*	48.5
All stroke, more than one race	30.9	23.8	19.1
All stroke, male	52.2	42.0	39.7
All stroke, female	58.0	43.9	37.8

Figure 75 - Age-adjusted stroke mortality per 100,000 population, Source: CDC, 2019-2021, * indicates insufficient data, shading indicates the county measure was greater than or worse than the state benchmark value.

Other Chronic Diseases & Risk Factors

Diabetes

According to Florida Health Charts, Broward County had a greater prevalence of pre-diabetes than the Florida rate in 2019, but a slightly lower rate of diabetes. The county also had higher rates of diabetes-related emergency room visits from 2020 to 2022. The average age at which diabetes was diagnosed was slightly younger within Broward County than in Florida.

	Broward County	Florida
Hospitalization rate from or with diabetes[1]	199.7	208.3
Rate of emergency room visits due to diabetes[1]	222.6	205.7
Adults who have been told they had pre-diabetes[2]	10.4%	9.1%
Adults who have been told they had diabetes[2]	11.5%	11.7%
Average age at which diabetes was diagnosed[2]	49.0	50.0

Figure 76 - Diabetes indicators, Source: 1) Florida Health Charts, 2020-2022 rolling rates per 100,000 population 2) Florida Health Charts, Behavioral Risk Factor Surveillance System 2019, shading indicates the county measure was greater than or worse than the state benchmark value.

Respiratory Disease

The hospitalization rate for chronic lower respiratory disease (CLRD) was lower within Broward County than in the state of Florida from 2019 to 2021 according to Florida Health Charts. Broward County had a greater asthma prevalence rate than the state average in 2019.

	Broward County	Florida
Age-adjusted hospitalization rate from CLRD, 2019-2021	167.5	183.7
Age-adjusted hospitalization rate from or with asthma, 2019-2021	501.5	630.1
Adults who currently have asthma, 2019	8.5%	7.4%

Figure 77 - Select Chronic Lower Respiratory Disease indicators, Source: Florida Health Charts, rates are per 100,000 population, shading indicates the county measure was greater than or worse than the state benchmark value.

Behavioral Health (Mental Health and Substance Use)

Adult Mental Health

According to County Health Rankings, adults in Broward County reported more poor mental health days on average than those in Florida in 2021. Adults in the community were also more likely to report frequent mental distress compared to the state benchmark.

	Broward County	Florida	United States
Average number of poor mental health days	4.5	4.2	4.8
Frequent mental distress	15.0%	12.9%	15.2%

Figure 78 - Poor mental health indicators, Source: County Health Rankings 2024, shading indicates the county measure was greater than or worse than the state benchmark value.

In 2021, the rate of those reporting poor mental health on 14 or more of the past 30 days was lower in Broward County than in the state according to Florida Health Charts. A lower portion of adults had been diagnosed with a depressive disorder than the Florida benchmark.

	Broward County	Florida
Adults with poor mental health on 14 or more of the past 30 days	11.4%	13.8%
Adults ever told they have a depressive disorder	13.0%	17.7%

Figure 79 – Poor mental health days and depressive disorders, Source: Florida Health Charts, 2021, shading indicates the county measure was greater than or worse than the state benchmark value.

Health Equity Highlight

Racial/ethnic and geographically underserved populations disproportionately suffer from poor mental health outcomes due to many interconnected factors such as access to behavioral health services, lack of awareness of treatment options, discrimination, and cultural stigma surrounding mental health treatment.

Child and Youth Mental Health

Florida Health Charts reported that a greater portion of middle and high school students reported missing school because they felt unsafe compared to the state average in 2022. Over 43% of students in the community ages 11-17 felt sad or depressed most days, and just under one-quarter of students experienced cyberbullying. Within the community, lower portions of high school students reported adverse childhood experiences (ACE) compared to the state averages.

	Broward County	Florida
Children in K-12 with emotional/behavioral disability	0.4%	0.4%
Students felt sad or depressed most days *	43.4%	47.3%
Students missed school because felt unsafe (past 30 days) *	11.1%	10.0%
Students who have been cyber-bullyed *	24.3%	30.1%
High School Students with at least one ACE	56.9%	67.2%
High School Students with 4+ ACEs	14.4%	21.4%

Figure 80 – Child and youth mental health and risk factors, Source: Florida Health Charts and Florida Youth Substance Abuse Survey, 2022, *refers to middle and high school students, shading indicates the county measure was greater than or worse than the state benchmark value

Mental Health for LGBTQ Young People

The Trevor Project publishes data from the U.S. National Survey on the Mental Health of LGBTQ Young People. According to findings from the 2023 survey, 56% of LGBTQ young people across the nation wanted mental health care in the prior year but were unable to access it. Within the population, 67% reported symptoms of anxiety and 54% reported experiencing depression. Roughly 41% of LGBTQ young people seriously considered attempting suicide in the past year and 14% attempted suicide in the past year.

Health Equity Highlight

County-level data regarding mental health for the LGBTQ+ population is limited, attesting to the need for greater investment in mental health treatment, documentation, and inclusive policies that address the true extent of the behavioral health issues faced by this population.

Mental Disorder Emergency Visits and Hospitalizations

According to Florida Health Charts, there was a greater rate of emergency visits and hospitalizations for mental disorders across all age groups in Broward County than in the state of Florida from 2020 to 2022.

	Broward County	Florida
Mental disorder hospitalization rate, all ages	1,081.1	962.4
Mental disorder hospitalization rate, under age 18	717.3	672.9
Mental disorder emergency department visits, all ages	1,052.4	962.7
Mental disorder emergency department visits, under age 18	371.0	349.2

Figure 81 - Mental disorder emergency visits and hospitalizations, Source: Florida Health Charts, 2020-2022, shading indicates the county measure was greater than or worse than the state benchmark value.

Intentional Self-Harm

Hospitalizations for intentional self-harm injuries were lower within Broward County than in Florida in 2022.

	Broward County	Florida
Intentional self-harm hospitalizations, all ages	27.8	34.8
Intentional self-harm hospitalizations, under age 18	9.5	25.6

Figure 82 - Hospitalizations for non-fatal intentional self-harm injuries, Source: Florida Health Charts, 2022, rates per 100,000 population, * indicates rate is suppressed, shading indicates county measure is worse than the state benchmark value.

Suicide

There were lower suicide death rates for all ages within Broward County than the Florida benchmark in 2022 according to Florida Health Charts. The suicide rates for white individuals in the community exceeded the Florida benchmark for all races/ethnicities.

	Broward County	Florida
Suicide death rate - all ages	12.9	17.2
Suicide death rate ages 10-14	0.8	1.6
Suicide death rate ages 15-19	8.0	9.3
Suicide death rate ages 20-24	13.9	15.0
Suicide death rate ages 25-34	11.7	17.3
Suicide death rate ages 35-44	14.5	17.6
Suicide death rate ages 45-54	12.7	19.4
Suicide death rate ages 55-64	13.8	20.6
Suicide death rate ages 65-74	17.1	17.3
Suicide death rate ages 75 or older	17.7	24.6

Figure 83 - Suicide death rates by age group, Source: Florida Health Charts, 2022, rates per 100,000 population, shading indicates county measure is worse than the state benchmark value.
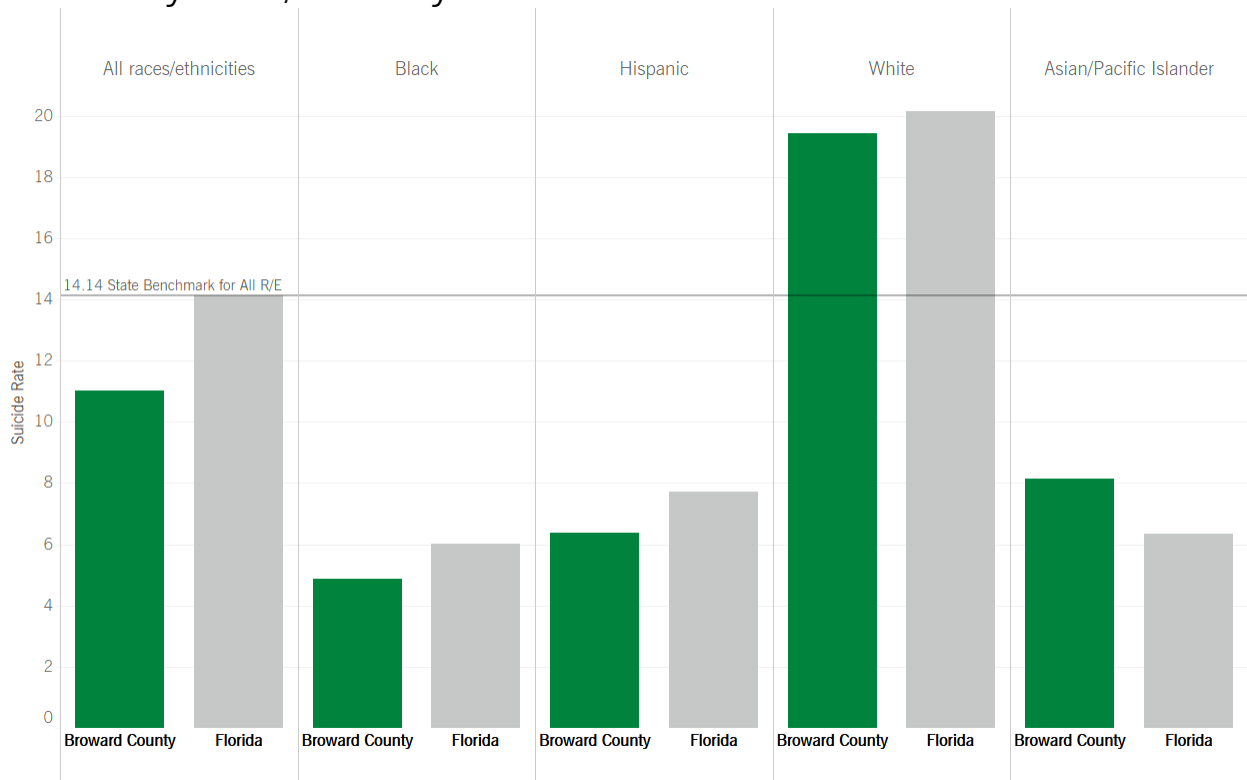
Suicide by Race/Ethnicity

Figure 84 - Suicide rate by race/ethnicity, Source: County Health Rankings 2024

Alcohol

Florida Health Charts provides self-reported measures of alcohol use. Within Broward County, deaths from alcoholic liver disease were less common than in Florida from 2020 to 2022. Middle and high school students in Broward County were less likely to indicate they drank alcohol or engaged in binge drinking in 2022 compared to the state average.

	Broward County	Florida
Age-adjusted deaths from alcoholic liver disease	5.8	7.6
Students engaged in binge drinking	3.2%	5.6%
Students who drank alcohol past 30 days	8.6%	11.8%

Figure 85 – Teen alcohol use and alcoholic liver disease, Source: Florida Health Charts, 2020-2022, shading indicates county measure is worse than the state benchmark value.

Excessive drinking and alcohol-impaired driving deaths were also less prevalent in Broward County than in Florida and the United States in 2021.

	Broward County	Florida	United States
Excessive drinking	16.5%	17.2%	18.1%
Alcohol-impaired driving deaths	12.7%	21.6%	26.3%

Figure 86 – Alcohol use and related deaths, Source: Source: County Health Rankings 2024, shading indicates county measure is worse than the state benchmark value.

Tobacco and Vaping

In 2021, a greater percentage of adults in Broward County smoked cigarettes than in Florida and the United States according to County Health Rankings.

	Broward County	Florida	United States
Adult smoking	15.8%	15.5%	15.0%

Figure 87 - Adult smoking, Source: County Health Rankings 2024, shading indicates the county measure was greater than or worse than the state benchmark value.

A greater portion of adult smokers in the community tried to quit within the prior year compared to the state average in 2019. There were fewer e-cigarette/vape users and fewer students who had ever smoked cigarettes, vaped nicotine, or vaped marijuana in Broward County than in Florida in 2022 according to Florida Health Charts.

	Broward County	Florida
Adult smokers who tried to quit once or more in past year*	71.1%	59.0%
Adults who are current e-cigarette users*	4.3%	7.5%
Students who have ever smoked cigarettes	3.3%	7.1%
Students who have ever vaped nicotine	11.3%	20.2%
Students who have ever vaped marijuana	7.3%	13.2%

Figure 88 - Tobacco use and vaping, Source: Florida Health Charts, 2022, *indicates 2019 data, shading indicates the county measure was greater than or worse than the state benchmark value.

Opioid Use

The Centers for Disease Control and Prevention's National Center for Injury Prevention and Control provides estimates of the number of opioid prescriptions dispensed per person, per year. Within Broward County, the 2022 dispensing rate was lower than both the state and national rates.

	Broward County	Florida	United States
Opioid dispensing rate	29.6	40.0	39.5

Figure 89 - Opioid prescribing rate per 100 population, Source: CDC 2022, shading indicates the county measure was greater than or worse than the state benchmark value.

Drug Overdose Deaths by Race/Ethnicity

According to County Health Rankings, the overall drug overdose mortality rate within Broward County was slightly higher than the Florida mortality rate from 2019 to 2021. The drug overdose death rate for white residents was greater than the average death rate for all races/ethnicities.
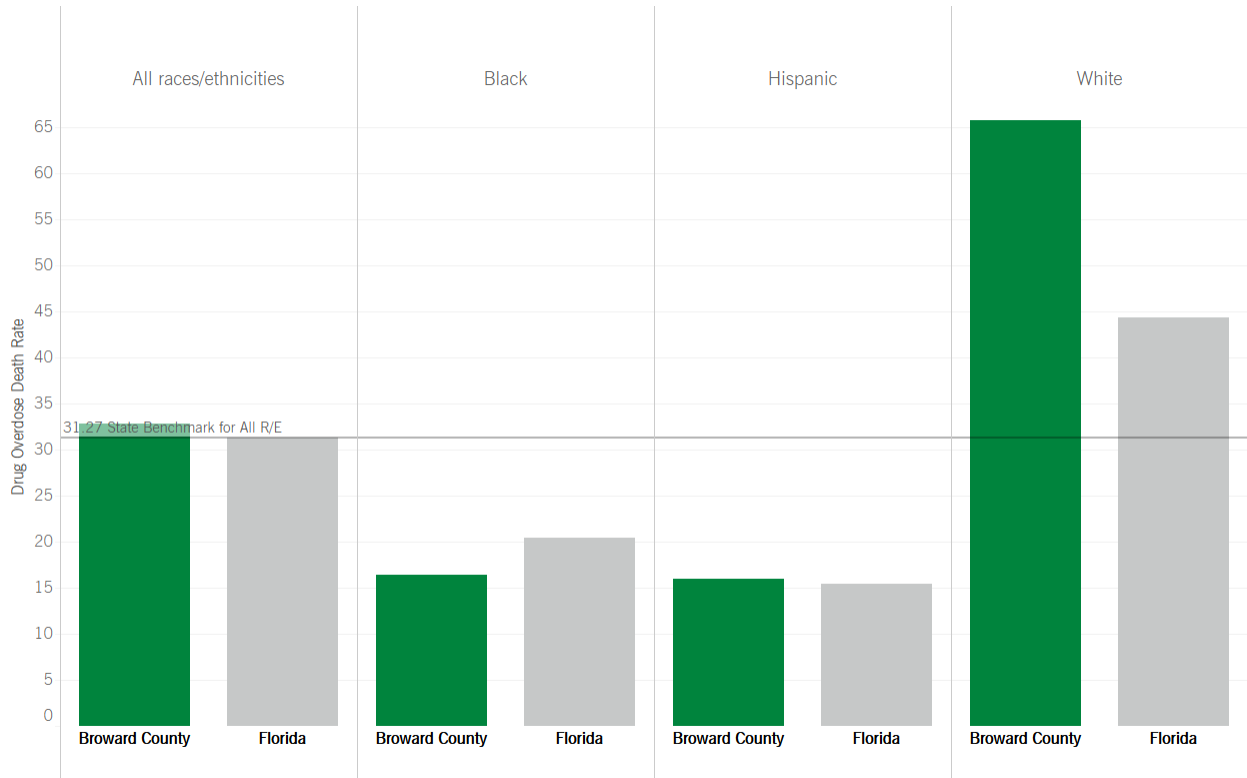
Figure 90 - Drug overdose rate by race/ethnicity, Source: County Health Rankings 2024

Maternal and Child Health

Birth Rate

Florida Health Charts publishes birth data and several maternal and child health indicators. In 2022 the total birth rate per 1,000 population in Broward County exceeded the Florida birth rate. The birth rates for Black, other non-white, and Hispanic individuals were also greater than the state average birth rate for all races/ethnicities.

	Broward County	Florida
Total birth rate	10.8	10.0
White birth rate	9.5	9.3
Black birth rate	13.2	12.6
Other non-white birth rate	11.2	11.4
Hispanic birth rate	11.2	12.4
Non-Hispanic birth rate	10.5	9.1

Figure 91 - Birth rates by race/ethnicity per 1,000 population, Source: Florida Health Charts, 2022, shading indicates the county measure is greater than the state benchmark value for the total birth rate.

Teen Birth Rate and Interpregnancy Interval

From 2020 to 2022, Broward County had a lower teen birth rate than the state benchmark and a lower percentage of repeat births for mothers aged 15 to 19. Black youth in Broward County experienced greater rates of teen pregnancy than the state average rate for all races/ethnicities. The portion of births with an interpregnancy interval of fewer than 18 months was lower in Broward County than in Florida during the same time frame.

	Broward County	Florida
Teen birth rate (per 1,000 women aged 15–19 years)	8.8	13.9
Repeat births to mothers aged 15-19	11.2%	13.1%
Births with interpregnancy interval < 18 months	30.5%	35.9%

Figure 92 - Teen birth rate and interpregnancy interval, Source: Florida Health Charts, 2020-2022, shading indicates the county measure was greater than or worse than the state benchmark value.
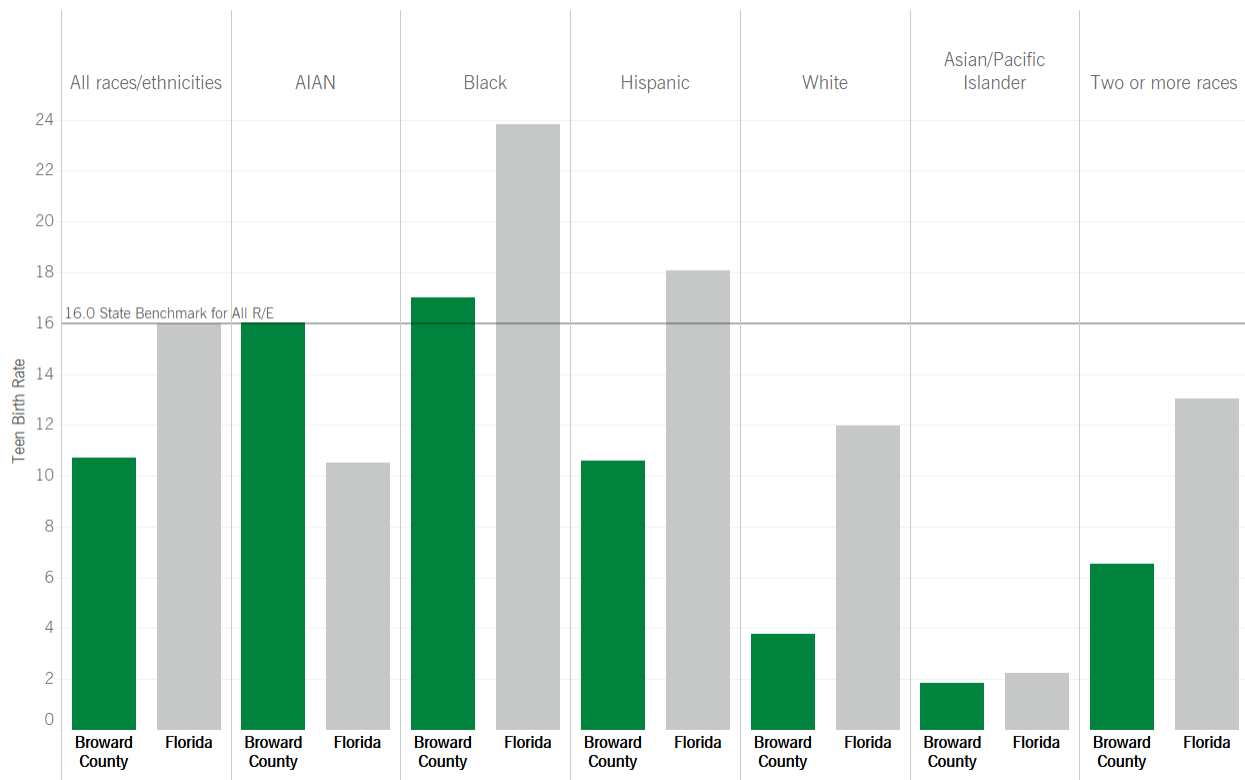
Teen Birth Rate by Race/Ethnicity

Figure 93 - Teen birth rate by race/ethnicity, Source: County Health Rankings 2024

Birth Outcomes and Risk Factors

According to Florida Health Charts, mothers in Broward County were more likely to have a healthy weight and less likely to smoke during pregnancy compared to mothers across Florida from 2020 to 2022. Broward County also had a greater rate of mothers who initiated breastfeeding compared to the state benchmark. Mothers in Broward County were less likely to receive first-trimester prenatal care than the Florida average. Low- and very low-birthweight births and preterm births were more likely in Broward County than in Florida.

	Broward County	Florida
Births to mothers with 1st trimester prenatal care	72.9%	73.8%
Births to mothers with healthy weight	42.0%	39.6%
Mothers who initiate breastfeeding	88.9%	85.7%
Births to mothers who smoked during pregnancy	0.4%	3.0%
Live births under 2,500 grams (per 1,000 live births)	9.6%	8.9%
Live births under 1,500 grams (per 1,000 live births)	1.8%	1.6%
Preterm births < 37 weeks	14.8%	14.2%

Figure 94 - Birth outcomes and related risk factors, Source: Florida Health Charts 2017-2019, shading indicates the county measure was greater than or worse than the state benchmark value.

Postpartum Depression

According to Florida's Pregnancy Risk Assessment Monitoring System (PRAMS), roughly 15.7% of women across the state experienced depressive symptoms after giving birth in 2020. Younger women, those with lower household incomes, non-Hispanic Black, and Hispanic women, and those with lower education levels were more likely to experience depressive symptoms when compared to the overall rate. Approximately 10.3% of Florida women had a healthcare provider tell them they had depression after giving birth.

Access to Maternal Care

The March of Dimes ranks U.S. counties as maternity care deserts, or those with low access, moderate, access, or full access to maternity care. Broward County was designated as a "full access" county, although neighboring Hendry County was described as a low-access county. On average, women in Broward County travel 4.9 miles for obstetric care, compared to 10.0 miles for women across Florida.

Maternal Mortality

Maternal mortality in Broward County exceeded the Florida rate from 2020 to 2022. Black mothers in Broward County died at a rate 22 times greater than white mothers during this time frame.

	Broward County	Florida
Maternal mortality (per 100,000 live births)	26.0	25.5
Maternal mortality - white	2.9	15.8
Maternal mortality - Black	65.2	57.1
Maternal mortality - other	0.0	15.9
Maternal mortality - Hispanic	9.8	20.1
Maternal morality - non-Hispanic	34.4	28.5

Figure 95 - Maternal mortality by race/ethnicity per 100,000 live births, Source: Florida Health Charts 2020-2022, shading indicates the county measure was greater than or worse than the state benchmark value.

⛭ Health Equity Highlight

Differences in maternal health outcomes persist at disturbing rates, with Black, Hispanic, and Native American women experiencing significantly higher rates of maternal mortality than non-Hispanic White women. According to the CDC, these racial disparities persist regardless of educational and income levels.

Infant Mortality

According to Florida Health Charts, the infant mortality rate in Broward County was lower than the state benchmark from 2020 to 2022. However, infant mortality rates varied greatly by race/ethnicity. Within Broward County, the Black infant mortality rate exceeded the state benchmark for all races/ethnicities and Black babies were almost three times as likely to die than white babies.

	Broward County	Florida
Infant mortality (per 1,000 live births)	5.2	5.9
Infant mortality - white	2.9	4.2
Infant mortality - Black	8.5	11.1
Infant mortality - Hispanic	3.8	4.8
Infant morality - non-Hispanic	5.6	6.2

Figure 96 - Infant mortality by race/ethnicity per 1,000 live births, Source: Florida Health Charts 2020-2022, shading indicates the county measure was greater than or worse than the state benchmark value.
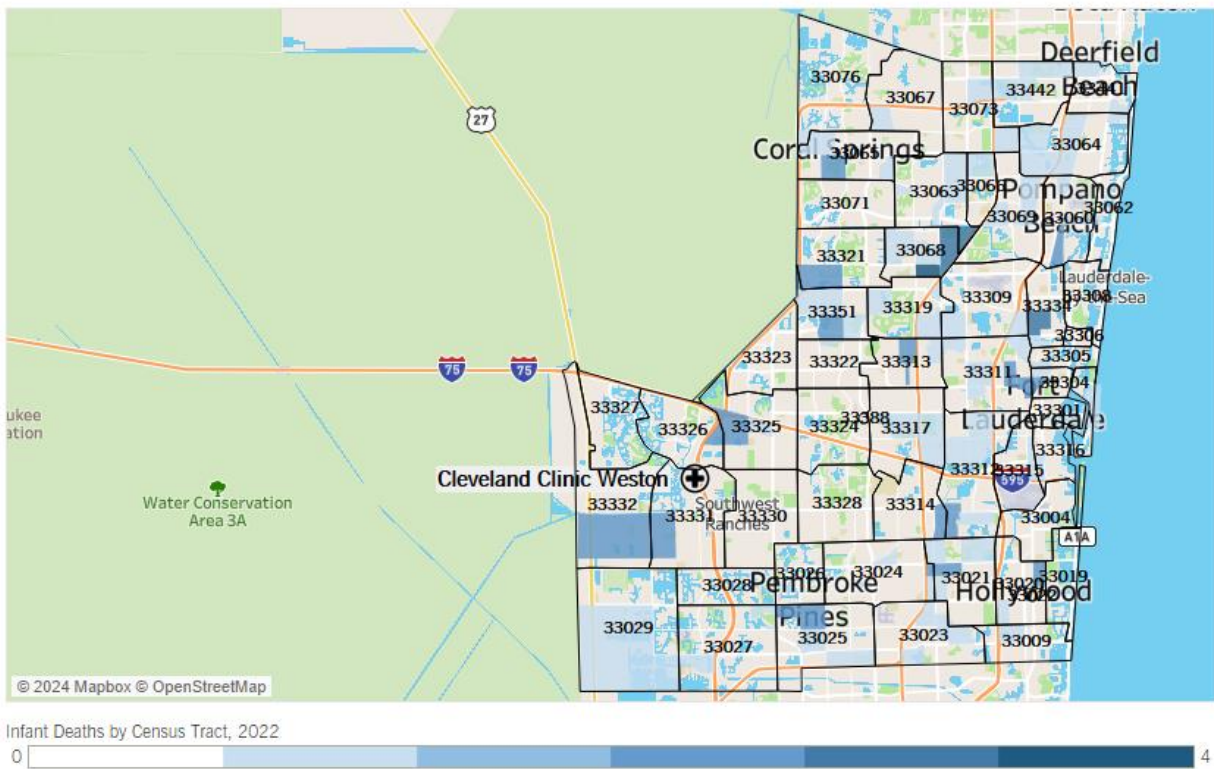
Figure 97 - Map of infant deaths by census tract, Source: Florida Health Charts 2022

Child Health Outcomes and Risk Factors

Florida Health Charts reports on a variety of risk factors and health outcomes for children under the age of five. Broward County had a greater portion of pre-k students eligible for free or reduced lunch when compared to the state average. The percentage of kindergarten students who were fully immunized within the County was equal to the Florida immunization rate in 2022. Infants and young children under five within Broward County had a lower emergency room visit rate (per 100,000 population under age five) than the state rate from 2020 to 2022. However, the community had a greater child death rate from 2020 to 2022 than the state average. Black children in Broward County died at a greater rate than all races/ethnicities combined.

	Broward County	Florida
Children in pre-k eligible for free or reduced lunch	70.1%	62.9%
Children in kindergarten eligible for free or reduced lunch	53.9%	55.0%
Kindergarten children fully immunized	91.7%	91.7%
Emergency room visits age 0-5*	49,178.2	54,718.1
Deaths all causes ages 1-5**	27.0	25.8

Figure 98 - Health outcomes and risk factors for young children, Source: Florida Health Charts, 2020-2022, * per 100,000 population under 5, ** per 100,000 population aged 1-5, *** per 100,000 population, shading indicates the county measure was greater than or worse than the state benchmark value
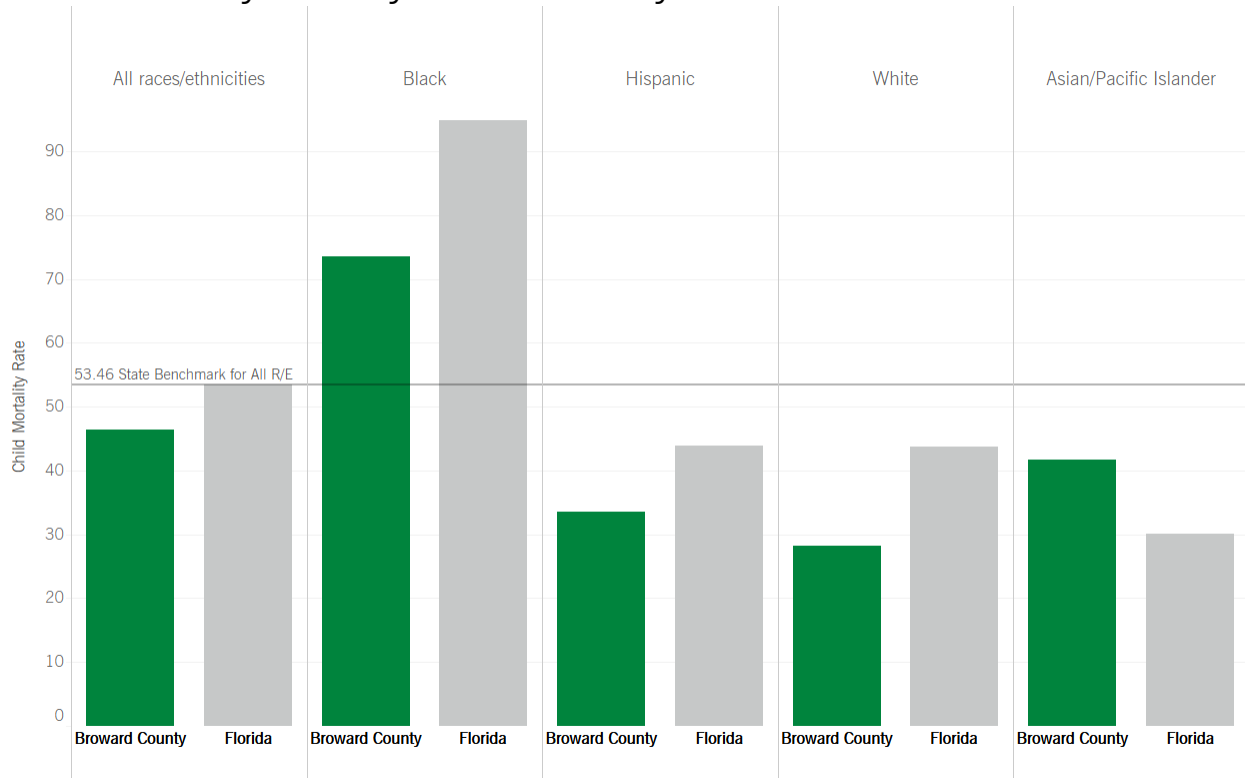
Child Mortality Rate by Race/Ethnicity

Figure 99 - Child mortality rate by race/ethnicity, Source: County Health Rankings 2024

Communicable Diseases & Sexually Transmitted Infections

Tuberculosis and Hepatitis A

According to FL Health CHARTS and the Centers for Disease Control and Prevention, the 2019 case rates for tuberculosis and Hepatitis A within Broward County were lower than the comparable state and national case rates.

	Broward County	Florida	United States
Tuberculosis case rate	2.3	2.4	2.5
Hepatitis A case rate	0.4	1.4	0.7

Figure 100 - Tuberculosis and hepatitis a rates per 100,000 population, Source: Florida Health Charts, CDC, 2022

Sexually Transmitted Infections

According to the Centers for Disease Control and Prevention, Broward County had greater rates of sexually transmitted infections chlamydia, gonorrhea, and syphilis than Florida and the United States in 2022.

	Broward County	Florida	United States
Chlamydia	591.9	480.4	495.0
Gonorrhea	268.5	199.3	194.4
Primary and secondary syphilis	25.9	20.8	17.7

Figure 101 - Reported case rate for sexually transmitted infections per 100,000 population, Source: CDC National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2022, shading indicates the county measure was greater than or worse than the state benchmark value.

HIV Prevalence and Diagnosis Rates

The diagnosis, prevalence, and age-adjusted death rates for HIV within Broward County were greater than the state and national benchmark rates. The prevalence of HIV in Broward County was nearly double the state rate and over three times the national rate in 2022.

	Broward County	Florida	United States
HIV diagnosis rate	34.8	22.3	13.3
HIV prevalence rate	1,244.6	626.0	368.6
Age-adjusted HIV death rate	4.3	2.5	-

Figure 102 - Reported prevalence and infection rates for HIV per 100,000 population, Source: CDC National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2022, shading indicates the county measure was greater than or worse than the state benchmark value.

Injuries

Unintentional Injuries

The age-adjusted death rate for unintentional injuries was lower in Broward County than in Florida in 2022 according to Florida Health Charts. From 2017 to 2021, American Indian / Alaska Native and white individuals across the defined community had a greater injury death rate compared to the Florida rate for all races/ethnicities. There were more hospitalizations for non-fatal unintentional firearm injuries in Broward County than in Florida during the same time frame. Black and white individuals in the defined community had greater rates of firearm fatalities than the state benchmark for all races/ethnicities from 2017 to 2021.

	Broward County	Florida
Age-adjusted deaths from unintentional injuries	60.8	69.4
Hospitalizations for non-fatal unintentional falls	222.1	247.7
Hospitalizations for non-fatal unintentional firearm injuries	6.5	6.3

Figure 103 – Injury hospitalizations and deaths, Source: Florida Health Charts, 2022, rates per 100,000 population, shading indicates the county measure was greater than or worse than the state benchmark value.
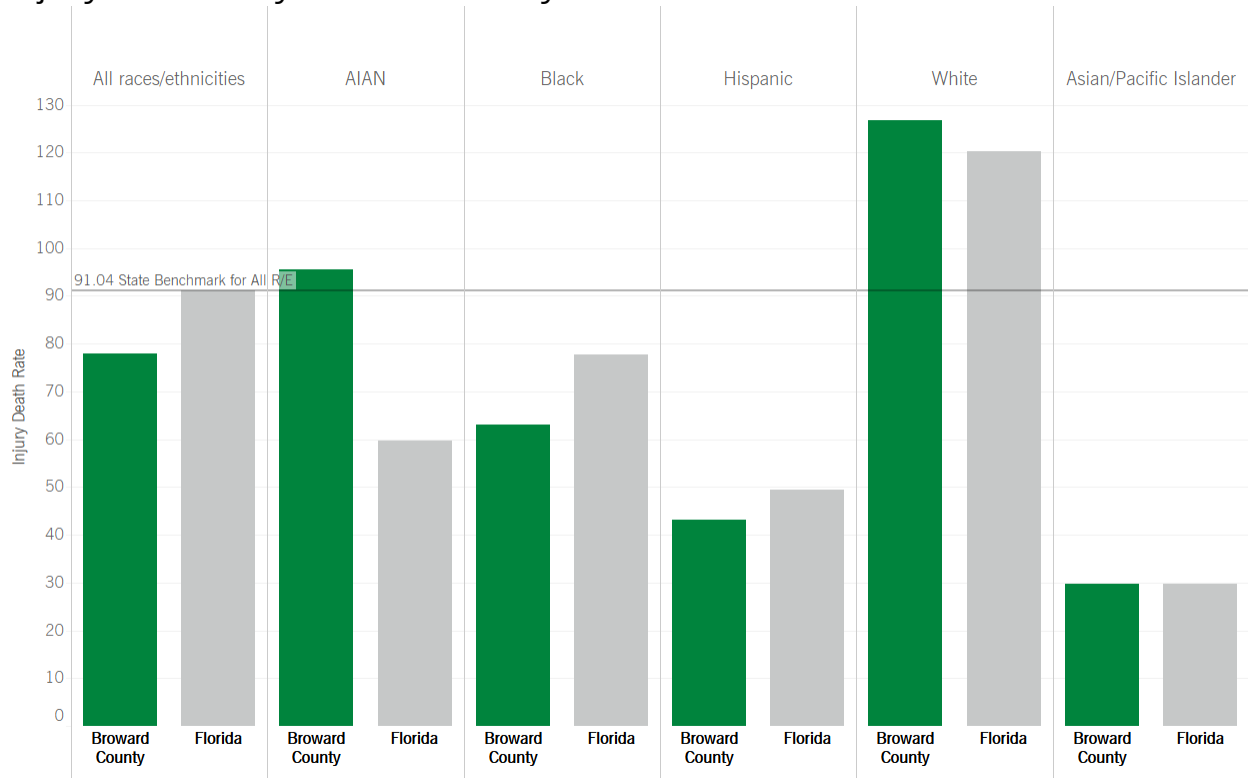
Injury Deaths by Race/Ethnicity

Figure 104 - Injury death rate over time, Source: County Health Rankings 2024
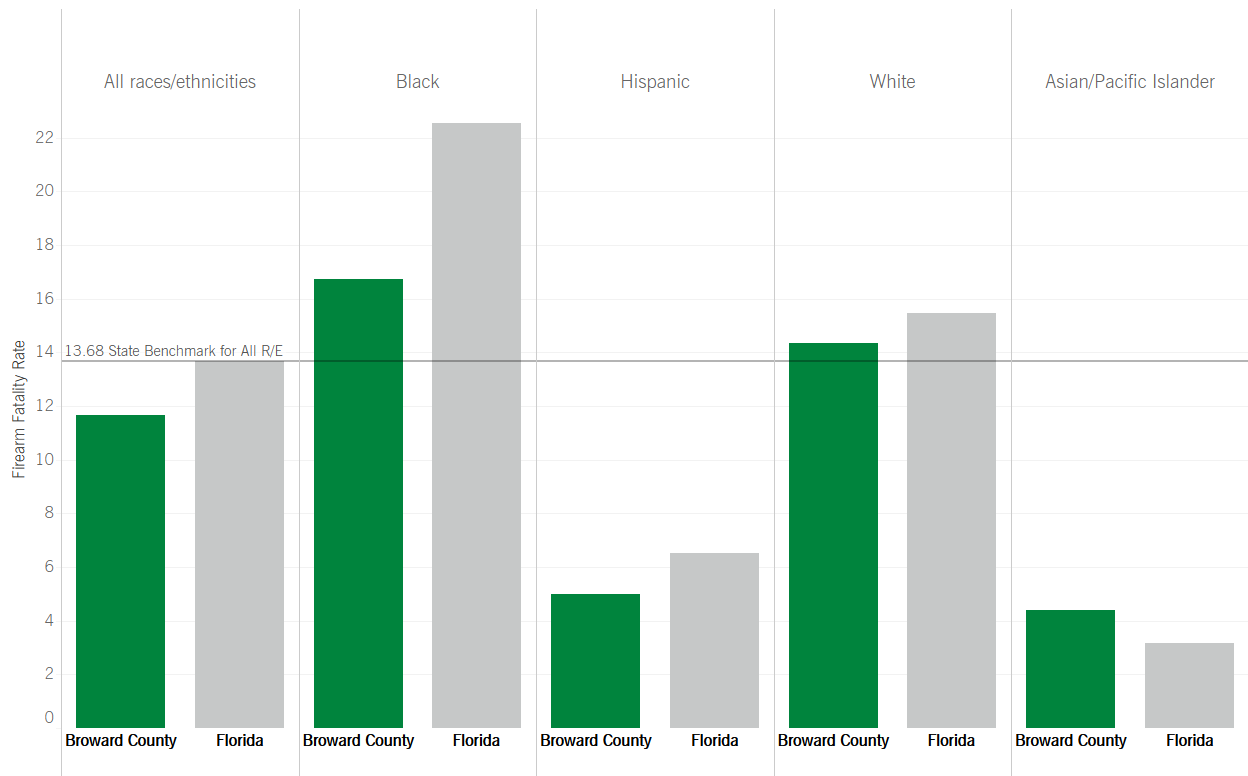
Firearm Fatalities by Race/Ethnicity

Figure 105 – Firearm fatalities by race/ethnicity, Source: County Health Rankings 2024

Disability & Caregiving

Disability

According to the U.S. Census Bureau's 2018-2022 American Community Survey estimates, a smaller portion of Broward County's population had a disability than the Florida or United States averages.

	Broward County	Florida	United States
Population with a disability	11.1%	13.5%	12.9%
Population with a hearing difficulty	2.8%	3.8%	3.6%
Population with a vision difficulty	2.3%	2.5%	2.4%
Population with a cognitive difficulty	4.4%	5.3%	5.3%
Population with an ambulatory difficulty	6.1%	7.3%	6.7%
Population with a self-care difficulty	2.4%	2.7%	2.6%
Population with an independent living difficulty	5.0%	5.8%	5.8%

Figure 106- Disability prevalence rates, Source: U.S. Census Bureau ACS 2018-2022

Caregiving

The Centers for Disease Control and Prevention Alzheimer's Disease and Healthy Aging Program provides data on caregiving at the state level. Within Florida, one in five adults are caregivers providing regular care or assistance to a friend or family member with a health problem or disability. Approximately 58% of Florida caregivers are women, and 25% of caregivers are age 65 or older. Care has lasted at least two years for over half of caregivers, while over a third provide care for at least 20 hours per week.
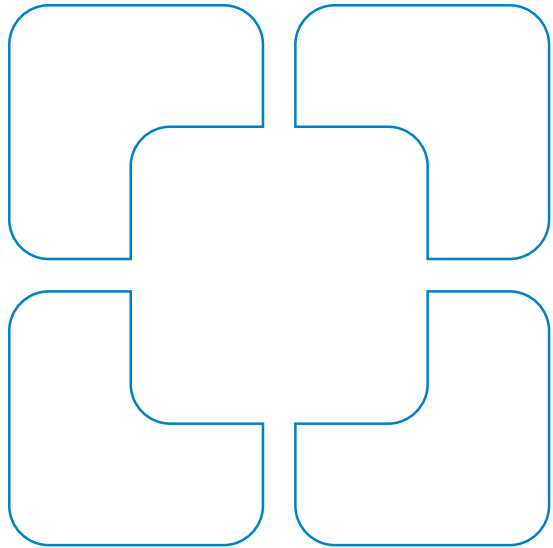
Caregiving leads to an increased risk of multiple chronic diseases. Across the U.S. roughly 40.7% of caregivers report having two or more chronic diseases. Additionally, 33.0% of caregivers report having a disability.

F. APPENDIX – Facility Discharge Data

The top discharges by ZIP Code for CCWH are featured in the table below. Data reflects 2022 inpatient, outpatient, and emergency department visits combined.

ZIP	City	Visits/Cases	% of Total	Running Sum
33326	Fort Lauderdale	6,294	9.0%	9.0%
33331	Fort Lauderdale	3,921	5.6%	14.6%
33325	Fort Lauderdale	3,379	4.8%	19.5%
33327	Fort Lauderdale	3,301	4.7%	24.2%
33324	Fort Lauderdale	2,056	2.9%	27.2%
33322	Fort Lauderdale	2,047	2.9%	30.1%
33323	Fort Lauderdale	1,988	2.8%	33.0%
33027	Hollywood	1,865	2.7%	35.6%
33321	Fort Lauderdale	1,580	2.3%	37.9%
33029	Hollywood	1,479	2.1%	40.0%
33332	Fort Lauderdale	1,468	2.1%	42.1%
FLAL9	FL State Wide	1,287	1.8%	44.0%
33351	Fort Lauderdale	1,170	1.7%	45.6%
33328	Fort Lauderdale	1,152	1.7%	47.3%
33330	Fort Lauderdale	1,070	1.5%	48.8%
33076	Pompano Beach	1,064	1.5%	50.3%
33028	Pembroke Pines	1,038	1.5%	51.8%
33024	Hollywood	949	1.4%	53.2%
33025	Hollywood	907	1.3%	54.5%
33071	Coral Springs	855	1.2%	55.7%
33317	Fort Lauderdale	854	1.2%	56.9%
33319	Fort Lauderdale	802	1.1%	58.1%
33026	Hollywood	802	1.1%	59.2%
33065	Coral Springs	728	1.0%	60.3%
33312	Fort Lauderdale	629	0.9%	61.2%
33015	Hialeah	617	0.9%	62.1%
33313	Fort Lauderdale	601	0.9%	62.9%
33311	Fort Lauderdale	513	0.7%	63.7%
33063	Pompano Beach	513	0.7%	64.4%
33067	Pompano Beach	485	0.7%	65.1%
33023	Hollywood	472	0.7%	65.8%
33314	Fort Lauderdale	445	0.6%	66.4%
33068	Pompano Beach	436	0.6%	67.0%
33021	Hollywood	398	0.6%	67.6%
33018	Hialeah	349	0.5%	68.1%
33301	Fort Lauderdale	334	0.5%	68.6%
33308	Fort Lauderdale	327	0.5%	69.1%
33411	West Palm Beach	311	0.4%	69.5%
33066	Pompano Beach	307	0.4%	69.9%
33014	Hialeah	294	0.4%	70.4%
33414	Wellington	293	0.4%	70.8%
33467	Lake Worth	290	0.4%	71.2%
33073	Pompano Beach	286	0.4%	71.6%
33062	Pompano Beach	274	0.4%	72.0%
33055	Opa Locka	272	0.4%	72.4%
33009	Hallandale	265	0.4%	72.8%
33433	Boca Raton	260	0.4%	73.2%
33016	Hialeah	247	0.4%	73.5%
33304	Fort Lauderdale	246	0.4%	73.9%
33440	Clewiston	243	0.3%	74.2%
33056	Miami Gardens	243	0.3%	74.6%
33428	Boca Raton	242	0.3%	74.9%
33064	Pompano Beach	240	0.3%	75.2%

Figure 107 - Top discharges by ZIP Code. Source: CCWH 2022