Promoting Safe Recreation

2013-2014 Seminole County Health Report

Florida Department of Health in Seminole County
www.seminolecohealth.com
This health report summarizes the health of Seminole County and activities and accomplishments of the Florida Department of Health in Seminole County for the years 2013 and 2014.
CONTENTS

Letter from your Health Officer .......... Page 4
Executive Leadership Team .......... Page 5
Overview of 2013-2014 .......... Page 6
Financial Highlights .......... Page 7
About the Organization .......... Page 8
Accountability & Transparency .......... Page 9
The Health of Seminole County .......... Page 10
Demographic & Socioeconomic Profile .......... Page 12
Maternal & Child Health .......... Page 15
Chronic Disease .......... Page 19
Injury & Violence .......... Page 25
Communicable Disease .......... Page 27
Core Public Health .......... Page 29
Family Health Services .......... Page 32
Environmental Health .......... Page 36
Other Public Health Services .......... Page 37
LETTER FROM YOUR HEALTH OFFICER

We are in the midst of amazing times in public health and I am delighted to present 2nd Health Report. We celebrated 125 years of public health in Florida this year. This past year we have changed remarkably fast to the needs of the community by outreach, research and sustainability. We have an amazing story to tell—a story of extending the impact of public health, stabilizing our organization and providing more community programs through outreach. We are excited to see the change in the health of the community.

We believe citizens and agencies understand we are here to help with diseases and health services. What is less understood is how important it is to have health considered in all facets of the community—in our economy, housing, transportation and local business. For example, changes in transportation routes may affect the safety of citizens as they travel, walk around railroad tracks or cross major roads to reach bus stop locations. We will continue to build working relationships and maintain a pulse on the changes which affect the quality of life for our citizens.

The Florida Department of Health in Seminole County has changed over the past two years. To be good stewards of taxpayer monies, our services have been streamlined to ensure we reach the population in need. We are working toward becoming Public Health Accredited which will ensure we are constantly providing quality services and assessing the health needs of the community. Our focus is population health, about understanding the many factors that influence health—such as housing, income, education, race, and transportation.

To assist our organization in this endeavor, we have created a Public Health Planning & Policy Research Department to conduct policy analysis and strategic planning. We have implemented a Grants Administration Office to bring in various types of funds to use toward sustainable projects. We have also created a Community Health Planning Office to ensure we meet accreditation standards, coordinate clinical trials and implement the department as an academic institution.

It is my sincere hope that through this report you will understand the breadth of contributions made by our organization to the community. It is also my hope that such reporting inspires future collaborations. I am proud and grateful for the contributions from our staff, community and County Commissioners, for our success is indebted.

If you have any suggestions or are interested in joining our Healthy Seminole Collaboration, please contact our Administration Office at (407) 665-3200. Thank you for allowing us to serve.

Sincerely,

Dr. Swannie Jett, DrPH, MSC
Health Officer
EXECUTIVE LEADERSHIP TEAM

DR. SWANNIE JETT, DrPH, MSc, age 46, joined the Florida Department of Health in Seminole County organization as Administrator and Health Officer of Seminole County in April 2013. Prior to joining the organization, Dr. Jett served as Health Officer of the Bullitt County Health Department in Louisville for 17 years. He holds a Doctor of Public Health degree from the University of Kentucky, specializing in preventative medicine, Master of Science degree from the University of Tennessee with a background in Environmental Health and Epidemiology. Dr. Jett is a Captain in the Air Force National Guard and recently was on active assignment in Senegal, Africa assisting with the Ebola outbreak.

DR. MEENA JOSEPH, MD, age 57, is the Medical Director for the Florida Department of Health in Seminole County. Prior to her current position, Dr. Joseph was Staff Pediatrician at the Central Florida Community Clinic in Sanford, Resident Medical Officer at Brother Nursing Home in Kerala, India and Staff Physician at Visitation Maternity Hospital in Nigeria. Dr. Joseph received her MD from Calicut University Teaching Hospital in Calicut, India and completed her Pediatrics residency from St. Louis University Teaching Hospital, St. Louis, Missouri.

JOHN MEYERS, BS, age 60, is a retired US Army First Sergeant. He came to the Florida Department of Health in Seminole County as the Administrative Services Director and Business Manager in 2009. Mr. Meyers has been instrumental in the reduction of expenditures by 18% while increasing revenue 15%. Previously, Mr. Meyers was Director of Administrative Operations for Community Coordinated Care for Children 4C, Regional Vice President of Operations for ABS USA, and Field Operations Manager for the Florida Department of Transportation.

DONNA WALSH, RN, BSN, MPA, age 51, started her career in public health in 1988 and is the current Assistant Health Officer. Prior to her current position, Mrs. Walsh was the Director of Community and Population Health and Acting Administrator. Mrs. Walsh received her Master of Public Administration and Bachelor of Science in Nursing degrees from the University of Central Florida.

SARAH WRIGHT, MPH, BSN, age 57, is the Executive Nursing Director for the Florida Department of Health in Seminole County. Mrs. Wright joined the organization in 2013 from California where she was Director of Education for Adventist Health. Mrs. Wright worked for 12 years in Epidemiology at St. Agnes Medical Center, and nursing for over 12 years at Mount Sanai Medical Center in Harlem, New York. She received her Masters of Public Health from California State University, Fresno, with a focus on Administration, and Bachelors of Nursing from Pace University in New York, New York.
OVERVIEW OF 2013-2014

2013 and 2014 has been a remarkable time of growth for the Florida Department of Health in Seminole County.

COMMUNITY HEALTH IMPROVEMENT PROJECT
The Healthy.Seminole Collaboration expanded greatly in 2013-2014 with the Health Officer as chair. The collaboration is a community-partner driven committee which reviews, plans and acts on the health of the county. A small grant program was allocated to the Florida Department of Health in Seminole County to better the health of specific neighborhoods and populations. A total of $36,000 was provided under the “community health improvement” project, and was successful at implementing the “Pick of the Pantry” Cookbook, Pre-Diabetes Screenings, and Health Summit.

2014-2016 HEALTH SUMMIT
In April 2014, community leaders from all industries came together to discuss and set the health priorities for Seminole County and Central Florida as a region. Strategies evolved from the summit included 1) Health Literacy, 2) Chronic Disease and 3) Obesity.

HEALTHIEST WEIGHT FLORIDA
Healthiest Weight Florida is a public-private collaboration bringing together state agencies, not for profit organizations, businesses, and entire communities to help Florida’s children and adults make consistent, informed choices about healthy eating and active living. Here in Seminole County we are spearheading the effort to combat obesity. The overall goal in Seminole County is to decrease the obesity by 4% by 2015.

POPULATION HEALTH EFFORTS
As public health shifts to preventative care, it has been crucial for the Florida Department of Health in Seminole County to better the health of Seminole County through active partnerships, engaging in outreach to target populations, and encouraging our leaders to consider and promote health in all policies and daily activities. We expanded its outreach efforts actively participating in over 100 events and increase partnerships.
As stewards of taxpayer’s money, it is essential we operate the Florida Department of Health in Seminole County according to ethical and sound standards set by the state and county. As a government organization, we receive funding from the State of Florida, federal government, Seminole County and the community. The expenses incurred are required to support the functioning of the organization.

### STATEMENT OF ACTIVITIES
**FISCAL YEAR ENDING JUNE 30, 2014**

<table>
<thead>
<tr>
<th>REVENUE AND SUPPORT</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seminole County Government</td>
<td>$807,972</td>
</tr>
<tr>
<td>State of Florida</td>
<td>$3,604,224</td>
</tr>
<tr>
<td>Federal Government</td>
<td>$2,675,964</td>
</tr>
<tr>
<td>Operating</td>
<td>$1,189,013</td>
</tr>
<tr>
<td>Medicaid/Medicare</td>
<td>$1,310,468</td>
</tr>
<tr>
<td>Other</td>
<td>$307,576</td>
</tr>
<tr>
<td><strong>TOTAL REVENUE AND SUPPORT</strong></td>
<td><strong>$9,895,217</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OPERATING EXPENSES</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Workforce</td>
<td>$8,102,378</td>
</tr>
<tr>
<td>Operating</td>
<td>$1,662,160</td>
</tr>
<tr>
<td><strong>TOTAL EXPENSES</strong></td>
<td><strong>$9,764,538</strong></td>
</tr>
</tbody>
</table>

![Financial Trend Graph](image-url)
ABOUT THE ORGANIZATION

The Florida Department of Health in Seminole County was founded in 1941; then known as the Seminole County Health Department. The current location on Airport Boulevard was founded in 1985. Today, the organization has two satellite offices—WIC in Casselberry and Environmental Health Office in downtown Sanford.

We are working to have a presence in the community with increased efforts on outreach at health fairs, community celebrations and events. We continue to encourage healthy behavior by hosting educational forums, annual community health fairs during National Public Health Week and Take a Loved One to the Doctor month, partnering with Seminole County Government with hosting the annual Veteran’s Stand Down and being prepared in the event of an emergency.

We achieve our mission by developing living documents—a Strategic Plan, Business Plan, Community Health Assessment and Community Health Improvement Plan. These four documents drive the daily responsibilities we have as public health employees to be held accountable from the use of taxpayers’ funds to the healthcare we provide. We refer in this report to Healthy People 2020, which sets the national objectives focused on interventions designed to reduce or eliminate illness, disability, and premature death among individuals and communities.
ACCOUNTABILITY & TRANSPARENCY

2013-2015 STRATEGIC PLAN
The organization has a three-year plan for the implementation of specific, measurable and achievable objectives to meet our strategic goals. The Executive Leadership, department managers and frontline staff have been involved in all phases of the process for national accreditation. As the Florida Department of Health in Seminole County moves toward achieving national public health accreditation, the work of our strategic planning becomes very important because these goals and objectives must align not only with national measures (Healthy People 2020) and standards, but also with the needs of our state and local community: Goal 1: Protect the Population from Health Threats; Goal 2: Reduce Chronic Disease Morbidity and Mortality; Goal 3: Improve Maternal and Child Health; Goal 4: Develop and Implement an Integrated Public Health System; Goal 5: Access to Care. The detailed strategic plan can be found on our website www.seminolecohealth.com.

2014-2015 BUSINESS PLAN
We receive revenue from federal, state and county entities, also grants, fees for services provided and insurance reimbursements. From 2012 to 2013, our revenue fluctuated slightly and will predict a drastic cut in earnings for 2014. We saw a reduction in Medicaid earnings over the past year and are predicting a substantial cut in Medicaid earnings for the coming year which will play a role in how we do business. Reduced revenue simply means that we have to be innovative in how we continue to meet the healthcare needs of our community.

We have implemented process improvements and organizational restructuring to reduce expenses and will continue to monitor and assess these areas through the coming year. Additionally, we are seeking other revenue opportunities such as Federal and State grants. We are held accountable to our taxpayers for the use of our funds according to Florida Statutes. The federal and state appropriated revenue is for specific programs and services we need to offer, which include WIC, Healthy Start, and Family Planning Programs, and Public Health Preparedness.

PUBLIC HEALTH ACCREDITATION
The Florida Department of Health has been working toward becoming nationally accredited by the Public Health Accreditation Board (PHAB). We are an integrated government organization, and accreditation will hold the Department of Health and in each county at high standards to ensure taxpayer’s return on investment and carry out the mission as governed by the State of Florida. Unlike many public health departments across the nation, the State of Florida Department of Health is moving forward as one organization but specializing in the needs of each county. Visit the Public Health Accreditation website (www.phaboard.org) for more information.

COMMUNITY HEALTH ASSESSMENT & COMMUNITY HEALTH IMPROVEMENT PLAN
According to the National Association of County & City Health Officials (NACCHO), “the fundamental purpose of public health is defined by three core functions: assessment, policy development and assurance.” The Florida Department of Health in Seminole County assesses the community’s health using data, partnerships, and education.

In 2013-2014, the Florida Department of Health in Seminole County along with the Healthy Seminole Collaboration ramped up efforts to improve and prevent obesity in Seminole County. The 2012-2014 Community Health Improvement Plan identified obesity as a leading indicator of chronic diseases in Seminole County including heart disease, diabetes, and cancer. Further, the Community Health Improvement Plan identified strategic goals to achieve as a community to increase access to healthy nutrition, increase activity of our citizens and receive access to behavioral health. The Healthy Seminole Collaboration has begun efforts to develop the 2015-2017 Community Health Assessment and Community Health Improvement Plan.
This report focuses on the health statistics of Seminole County and what the Florida Department of Health in Seminole County is doing to better the health of our community. As a government organization, it is crucial we are transparent and accountable for what we do in achieving our mission, working with the community, and continuously assessing the health of Seminole County.

HEALTH ASSESSMENT OF SEMINOLE COUNTY

Why are people of specific economic status and race or ethnicity dying at a younger age than others? Why do people in lower class neighborhoods of Seminole County have more chronic health conditions than those of wealthier neighborhoods? Why do some neighborhoods have access to more liquor stores than fresh foods? These are only a few questions we need to answer in order to assess the overall health of Seminole County, which is our mission.

This report is a part of the Florida Department of Health in Seminole County’s (DOH-Seminole) assessment of the Seminole County community and includes indicators of demographic and socioeconomic profile, maternal and child health, leading causes of death, chronic diseases, behavioral risk factors, mental health, injury and violence, and communicable diseases. This report will review all indicators in more depth.

For purposes of this report, specific terms of reference were selected. For race and ethnic categories, the terms “White,” “Black,” and “Hispanic” are used. White and Black refer to race categories. However, Hispanic refers to an ethnic category and not one race. Other race categories, such as Asian/Pacific Islander and American Indian, are included in the analysis where appropriate.
LASTING PARTNERSHIPS STRENGTHEN THE HEALTH OF OUR POPULATION BY ENSURING ACCESS TO HEALTHCARE.

PHOTO LOCATION: LAKE MARY SUNRAIL STATION
DEMOGRAPHIC & SOCIOECONOMIC PROFILE

POPULATION GROWTH
Overall, Seminole County has experienced a slow but steady population growth over the past decade. By 2010, the population for Seminole County increased to 422,979, and according to populations estimates from 2013, the population grew to 432,577 (1.02%). While the white population has increased by 4%, between the 1990 and 2000 censuses, other racial and ethnic groups have also shown significant increase over the same time period.

RACE & ETHNICITY
Following national trends, the proportion of non-White residents in Seminole County continues to increase since 1990. According to the 2010 U.S. Census, Seminole County has a non-White population of 31%, with the smallest portion being non-Hispanic Blacks (12%), and 19% of Seminole County residents are of Hispanic or Latino origin.

LANGUAGES SPOKEN
The percent of residents of Seminole County who do not speak English well or at all was estimated to be 5.8% in 2011. However, 36.6% of all residents speak a language other than English at home with the most common language being Spanish. The number of Seminole County residents that speak Indo-European languages combined is 13,918 and Asian/Pacific Islander languages combined is 6,537.

AGE
In 2013, the largest group of residents in Seminole County by age is the 45 to 54 age group followed by the 15 to 24 age group. Since 2000, the age group of 35 to 44 decreased by 13% (56,482), while those in the age group 55 to 64 increased by 69% (54,433). The median age for Seminole County population is 38.3 years.

ECONOMIC STATUS
According to the 2008-2012 American Community Survey, the median household income estimates in Seminole County was $58,577. This is 17% higher than the median income for the nation, which is $50,046. Approximately 19% of Seminole County households have annual incomes under $25,000. According to the 2012 American Community Survey estimates, Seminole County has lower percentages of household incomes under $50,000 compared to the nation. Federal poverty thresholds are defined by the U.S. Department of Health and Human Services and vary by size and composition of the household. In 2012, a family of four was considered living below poverty level if their household income was less than $23,050. A higher percentage of Black (33.6%) and Hispanic (21.8%) households have incomes below $25,000 than White (10%) households in Seminole County.

EDUCATION

Source: U.S. Census Bureau 2012 American Community Survey

Source: U.S. Census Bureau 2012 American Community Survey
Educational attainment of Seminole County residents has little resemblance to that of the nation and the state. According to 2012 estimates, 24.6% of Seminole County residents have at least a high school diploma compared to the U.S. estimate of 28.4%. Approximately 7.7% of Seminole County residents, 25 years and older, did not earn a high school diploma, compared to 14% of the state. Seminole County had higher percentages of residents with some college education or degrees compared to the state and the nation. However, a higher percentage of Whites (23.2%) attained bachelor degrees compared to Blacks (14.2%) and Hispanics (18.2%).

**UNEMPLOYMENT RATES**

Historically, the unemployment rate in Seminole County has been lower than the national rates. As the nation’s unemployment rate nearly doubled over the past ten years, so has the rate of Seminole County; the unemployment rate for Seminole County almost doubled from 2008 to 2010 (5.1 to 10.7) and remain higher than the national rate in 2011. In 2012, the unemployment dropped slightly to below the national rate (7.8 compared to 8.1).

**HEALTH INSURANCE COVERAGE**

According to the 2012 Behavioral Risk Surveillance System (BRFSS) survey, the percentage of adults having health care coverage in Seminole County was lower than the nation and higher than the state. The percentage of adults with health care coverage declined from 84.6% in 2005 to 82.7% in 2012.
GOAL 3 OF OUR STRATEGIC PLAN IS TO IMPROVE MATERNAL AND CHILD HEALTH.

PHOTO BY SKY JOHNSON STUDIOS
BIRTH RATE
There were 4,416 live births in Seminole County in 2013. Most of these births (75%) occurred to White women, followed by Black women (15.9%). Nineteen percent of these births were of Hispanic ethnicity.

Birth rate is calculated as the number of births per 1,000 people. The birth rate was 10.2 live births per 1,000 people in 2013, with the highest birth rate occurring among Black women (13.7) followed by White women (9.4). Approximately two-thirds of the live births (60%) were born to women 25 to 34 years of age, followed by 19% to age group 20-24 years. Teenage females (age 15 to 19) accounted for 5% of the live births. Teen births have seen a steady decrease from 399 births in 2000 to 210 in 2013. Approximately 92% of mothers that gave birth in 2013 were high school graduates.

LOW BIRTH WEIGHT
In 2013, 349 of the 4,416 live births in Seminole County were classified as low birth weight (LBW) and of these, 62 (or 1.4%) were very low birth weight (VLBW). The rate of low birth weight infants in Seminole County (7.9) was lower than the state (8.5) or national rate of 8.15. The overall county rate was slightly above the Healthy People 2020 goal of 7.8 per 1,000 births; however, in Black populations, the rate of 13.3 was more than twice the rate it was in White populations (6.6).
INFANT MORTALITY
Infant mortality is an important indicator of the health of a community and its reproductive female population. The Infant Mortality Rate (IMR) for Seminole County in 2013 was 5.4 deaths per 1,000 live births. This rate was lower than the reported rate for the state (6.1) and the nation (6.12). It also exceeded the Healthy People 2020 goal of no more than 6.0 deaths per 1,000 live births. IMR among Whites was lower than the rate for Blacks (3.9 per 1,000 live births compared to 14). The IMR is reported as the number of live newborns dying under a year of age per 1,000 live births.

SMOKING DURING PREGNANCY & LOW BIRTH WEIGHT
Approximately, eight percent of the women who gave birth to a low birth weight infant in Seminole County in 2013 reported smoking during pregnancy. This exceeded the Healthy People 2020 goal of 99% of females abstaining from cigarette smoking while pregnant.

At the Florida Department of Health in Seminole County, our Tobacco Prevention Program is working closely with the Healthy Start and prenatal programs to ensure every pregnant mother is educated on the effects of smoking during pregnancy.
MATERNAL & CHILD HEALTH

PRENATAL CARE
Approximately 14.2% of Seminole County and 20.1% of Florida women who gave birth did not receive prenatal care during the first trimester in 2013. Both the Seminole County and state rates did not meet the Healthy People 2020 goal of not more than 10% of pregnant women failing to receive prenatal care in the first trimester. Women of color were less likely to receive prenatal care in their first trimester. In 2013, Blacks had the highest number of mothers (25.3%) that did not receive prenatal care in the first trimester compared to Whites (11.8%).

Women 15-19 years of age were the least likely to receive prenatal care during the first trimester, with almost 30% not receiving such care. Women, 35 years of age and older, were most likely to receive prenatal care, with only 8% not receiving care during the first trimester.

TEEN BIRTHS
The teen birth rate is defined as the number of live births per 1,000 women 15 to 19 years of age. It is important to note that teen pregnancy rates differ from teen birth rates. Teen pregnancy rates represent the number of live births, induced abortions, and fetal deaths combined. High teen birth rates are an important concern for a community because teen mothers and their babies face increased health risks and diminished opportunities to build a healthy future. Teenage mothers face a higher risk for premature birth, low birth weight, developmental problems and death. Teen births can have adverse long-term social and economic impacts on teen parents, their children and the community.

The teen birth rate in Seminole County in the past decade has shown a decline. In 2013, the overall teen birth rate was 14.1, which was lower than the state (23.8) and the national rate (31.3 in 2012).
THE FLORIDA
DEPARTMENT OF
HEALTH IN
SEMINOLE COUNTY
WORKS CLOSELY
WITH PARTNERS
TO MAXIMIZE
RESOURCES FOR OUR
COMMUNITIES TO REACH
THEIR HEALTHIEST WEIGHT*

PHOTO LOCATION: LAKE MARY BIKE TRAIL

*Healthiest Weight Florida is a public-private collaboration bringing together state agencies, not for profit organizations, businesses, and entire communities to help Florida’s children and adults make consistent, informed choices about healthy eating and active living.
CHRONIC DISEASE

The total number of deaths from all causes in Seminole County in 2013 was 2,976. The age-adjusted death rate from all causes was 644.0 per 100,000. This was lower than the rate for Florida (679.3).

Seminole County death rates in 2013 for both genders were lower than the national and state statistics; the rate for male residents was 40% higher than the rate for females (765.4 compared to 548.2 per 100,000) in all races.

Malignant neoplasm, commonly known as cancer, was the number one cause of death in Seminole County during 2013, accounting for 31% of all deaths. In addition to cancer, the other top causes of death are heart disease, chronic lower respiratory disease (including COPD), stroke/cerebrovascular disease and unintentional injuries.

Seminole County males had higher death rates than females for each of the top ten causes of death during 2013. Malignant cancers were the leading cause of deaths across all races. Blacks had a higher death rate from heart disease, stroke, diabetes, hypertension and kidney diseases than Whites, while the age adjusted death rates for chronic lower respiratory diseases (CLRD), suicide, unintentional injuries and Alzheimer’s disease were higher in Whites.
CANCER
In 2013, the age-adjusted rate of death from all cancer deaths combined in Seminole County (156.6 per 100,000) was lower than Florida’s rate of 158.7. This rate is also slightly lower than the Healthy People 2020 goal of 161.4 deaths per 100,000. However, when distributed by gender, the age adjusted death rates for males in Seminole County and Florida were higher than Healthy People 2020 target. Although, there are more than 100 different types of known cancers, cancer of the lung/bronchus, prostate and breast are the most prevalent.

FEMALE BREAST CANCER
Breast cancer is the second leading cause of cancer death for women. In Seminole County, the age-adjusted death rate for female breast cancer in 2013 was 24.7 per 100,000 female, higher than the rate for Florida (19.8). The age-adjusted death rate for female breast cancer in Seminole County did not meet the Healthy People 2020 target of 20.7 per 100,000. White females in Seminole County had a higher rate (23.2) than White females in Florida (19.1).

Did you know?
One out of eight women will be diagnosed with breast cancer during her lifetime. Breast cancer can result from changes in genes called “hereditary mutations.” These gene changes can be passed down from the mother or the father to daughters or sons and cause cancer to run in some families.
CHRONIC DISEASE

LUNG CANCER
The age-adjusted death rate for lung cancer in Seminole County decreased from 47.8 per 100,000 in 2004 to 35.2 per 100,000 in 2013.

[Graph showing Age-Adjusted Death Rates from Lung Cancer: 2004-2013]

OBESITY AND OVERWEIGHT
The BRFSS survey asked participants for their height and weight to compute a Body Mass Index (BMI). The BMI is a calculated index that attempts to normalize weight for height as an indirect measurement of body fat. A BMI of 25 to 29 is classified as overweight and a BMI of 30 or more indicates obesity.

In 2007, 61.5% percent of Seminole County adults indicated they were overweight or obese. This increased to 64.8% in 2010. Twenty-six percent of Seminole County adults are obese. Although this was below the goal (30.5%) of Healthy People 2020, it was a high enough percentage for county health officials and the Healthy Seminole Collaboration to choose obesity as one of their top five target areas for intervention.

[Graph showing Percentage of Overweight or Obese Adults in Seminole County]

PROSTATE CANCER
In 2013, the age-adjusted death rate for prostate cancer in Seminole County was 17.7 per 100,000 males. The overall Seminole County rate was slightly lower than the rate for the state, nation (for 2010), as well as below Healthy People 2020 goal. However, consistent with state rates, the rate for Black males in Seminole County was more than twice higher than that of White males (37.4 compared to 14.6) and above the Healthy People 2020 target rate of 21.8.

[Graph showing Age Adjusted Death Rate from Prostate Cancer: 2013]

HEART DISEASE
In 2013, the age-adjusted rate of death for heart disease in Seminole County (131.7 per 100,000) was lower than Florida’s rate of 153.4, but higher than the Healthy People 2020 goal (100.8 deaths per 100,000). The age-adjusted death rate for heart disease among Seminole County Blacks (117 per 100,000) continues to be lower than the rate for Seminole County Whites (186.6 per 100,000), since 2012.

[Graph showing Age-Adjusted Death Rate from Heart Disease by Race and Gender: 2013]
STROKE/CEREBROVASCULAR DISEASE

The age-adjusted death rate for stroke, or cerebrovascular disease in 2013, was 33.5 deaths per 100,000. This rate is slightly below the Healthy People 2020 goal, but above the state rate of 31.2 deaths per 100,000. Seminole County African-Americans had a higher age-adjusted death rate from stroke (43.2 per 100,000) than Whites (31.8 per 100,000).

The age-adjusted death rate from stroke in Seminole County has varied from 2004 to 2013, with an overall steady decrease, except in the last two years when there has been an upward trend.
CHRONIC DISEASE

CHRONIC LOWER RESPIRATORY DISEASE (CLRD)
The age adjusted death rate in Seminole County for chronic lower respiratory disease (CLRD) was 41.0 deaths per 100,000, consistent with the rate in Florida. Whites had a higher rate (42.7) than African Americans (32.2). Seminole County males had higher death rates when compared to females (42.1 compared to 40.1); however, the rate for females in Seminole County was higher than Florida females (40.1 vs. 38.1). Similarly, the rate was escalated for African-Americans in Seminole County compared to Florida (32.2 vs. 24.4).

ASTHMA
In 2013, 8.4% of Seminole County adults participating in the BRFSS survey reported currently having asthma. This was slightly higher than the state percentage. The percentage of adults reporting having asthma currently shows an upward trend over the years.

DIABETES
The age-adjusted diabetes mortality rate was 23.6 deaths per 100,000 for Seminole County in 2013. This rate was higher than the state rate of 19.6. Males in Seminole County had a higher rate than females. Seminole County African Americans had the highest age-adjusted death rate from diabetes (47.5 per 100,000), which was approximately two times the overall rate for Seminole County.
THE FLORIDA DEPARTMENT OF HEALTH IN SEMINOLE COUNTY PARTNERS WITH SAFE KIDS, SEMINOLE COUNTY CHILD ABUSE PREVENTION TASK FORCE AND CHILD ABUSE DEATH REVIEW TEAM TO DEVELOP STRATEGIES TO PREVENT CHILD DEATHS.

PHOTO LOCATION: ST. JOHNS PARKWAY, SANFORD, FL.
INJURY & VIOLENCE

MOTOR VEHICLE CRASHES IN SEMINOLE COUNTY
In 2013, the Seminole County age-adjusted mortality rate from motor vehicle crashes was lower than the national rate and the Healthy People 2010 goal of 12.4. In 2013, Seminole County Blacks (21.8) exhibited a higher age-adjusted death rate from motor vehicle crashes than Whites (9.7). As in previous years, males (14.9) exhibited a greater age-adjusted mortality rate from motor vehicle crashes than females (6.4). Seminole County’s death rates for motor vehicle crashes remain below the state average.

SUICIDE
The number and rate of suicide deaths in Seminole County has fluctuated since 2000 with no consistent trend. 61 suicide deaths occurred in Seminole County in 2013. The age adjusted mortality rate of 13.5 per 100,000 was near the state rate of 13.8 and the national rate (12). Suicide deaths increased from the previous year (54 per 100,000). Whites have higher rates for suicide than Blacks. During 2013, the Seminole County age-adjusted suicide mortality rate for males was approximately four times higher than females.

INTENTIONAL INJURIES HOMICIDE
In 2013, the age-adjusted mortality rate from homicide in Seminole County was 2.5 deaths per 100,000. This rate was under the state (6.4) for 2013 and national rate (5.3) for 2010. It also exceeds the Healthy People 2020 goal of 5.5 deaths per 100,000. Age-adjusted death rates for Blacks (9.0) remained higher than for whites (1.4) in Seminole County and consistently lower for females (1.2) versus males (3.8).
OUTREACH EFFORTS ARE ONE WAY TO EDUCATE THE COMMUNITY ON METHODS TO STOP THE SPREAD OF DISEASE.

PHOTO: (LEFT) IRIS QUINN, DISEASE INTERVENTION SPECIALIST, AND (RIGHT) CLADYS FERNANDEZ, RN, FLORIDA DEPARTMENT OF HEALTH IN SEMINOLE COUNTY.
COMMUNICABLE DISEASE

PRIMARY AND SECONDARY SYphilis
The number of primary and secondary syphilis cases is an important community health indicator because it represents individuals recently infected with syphilis who are capable of transmitting the disease to uninfected people.

Seminole County and the state of Florida have seen a general increasing trend in the incidence of syphilis cases. In 2013 the rate of syphilis cases for Seminole County was 6.2 compared to 4.7 in 2012.

CHLAMYDIA
Chlamydia infections are the most common reportable disease in the United States. Approximately 50% of infections in men and 75% in women did not involve obvious symptoms in the early stages. Individuals in the 15 to 24 year age group show the highest rates of infection.

Since 2009, chlamydia rates in Seminole County have increased substantially, increasing to 321.0 per 100,000 in 2009 compared with 166.4 per 100,000 in 2008. A similar trend is being seen throughout Florida.

GONORRHEA
Overall, the number of new gonorrhea cases in Seminole County and the state of Florida has plateaued. Seminole County’s gonorrhea rate in 2013 was 71.2 per 100,000.

HIV/AIDS
From 2007 to 2012, HIV incidence rates in Seminole County were trending downward, however, 2013 saw a small uptick with a rate of 14.6 compared to 9.1 in 2012 which was the lowest rate in the last decade. Non-white Seminole County residents had a substantially higher rate of an AIDS diagnosis than white residents.

The Florida Department of Health in Seminole County offers treatment for herpes and genital warts (HPV) for a fraction of the cost compared to private medical offices at our Sanford location. We also offer HIV rapid testing and HIV 500 and HIV 501 classes for health professionals.
DENTAL CARE IS OFFERED FOR CHILDREN AND ADULTS AT THE FLORIDA DEPARTMENT OF HEALTH IN SEMINOLE COUNTY.

PHOTO: DENTAL CARE OFFICE, LOCATED AT 400 WEST AIRPORT BOULEVARD. CALL (407) 665-3346 FOR QUESTIONS OR TO MAKE AN APPOINTMENT.
The Florida Department of Health is mandated by Florida Statute to offer core public health services as a safety net for persons who have difficulty accessing care from the private sector. Our organization offers not only mandated services, but also other services according to the needs of the community and how many physicians offer the same service.

**Infectious Disease Prevention and Control**

- HIV/AIDS Testing, Surveillance and Treatment
- STD Testing, Surveillance and Treatment
- Hepatitis Testing, Surveillance and Treatment
- Immunizations
- Tuberculosis (TB)
- Disease Surveillance

**Basic Family Health Services**

- Breast and Cervical Cancer Early Detection
- Dental Care
- Family Planning
- Healthy Start
- Pregnancy Care
- Refugee Health
- School Health
- Travel Vaccinations
- WIC

**Environmental Health Services**

**Other Public Health Services**

- Birth and Death Certificates
- Public Health Preparedness
- Tobacco Prevention Program
- Volunteer and Internship Program

Visit www.seminolecohealth.com for specific details and how to schedule appointments.

**SEXUALLY TRANSMITTED DISEASE (STD AND HIV/AIDS PROGRAMS)**

Our Sexually Transmitted Disease (STD) Program provides testing, treatment and prevention services which is a core public health function. This includes testing, treatment and prevention for HIV/AIDS. Our patients may have been examined here at DOH-Seminole, family planning, prenatal or refugee health programs or through a visit to outside providers as well as hospital emergency rooms and private physicians offices. Through community outreach projects we provide HIV/STD education, counseling and testing for individuals within our community at a variety of locations such as churches, schools, residential treatment facilities, community-based organizations (CBOs), local parks, and jails.

We have Disease Intervention Specialists who investigate with patients in order to identify sexual partners who may have been exposed. These partners are then contacted and scheduled for STD exams and treatment. This is a primary method of stopping the spread of diseases.

During 2013, we tested 2,065 clients for HIV. Of those tested, 63 were positive for HIV. Currently, we have 233 patients with HIV and of those, 94 have an additional diagnosis of AIDS.

- National recognition for “Strengthening the Community of Practice for Public Health Improvement (COPPHI): Quality Improvement Award Program,” for the implementation of a texting protocol for STD lab results.
- The HIV/AIDS Program was awarded $182,307.00 from the Ryan White Program.
HEPATITIS PROGRAM

Hepatitis is the inflammation of the liver. In Florida, 305,000 residents are infected with Hepatitis C and nationwide, over 4 million people are infected with the Hepatitis C virus. People are at risk of contracting hepatitis A, B or C from various risk factors such as eating contaminated food prepared by an infected person who did not wash their hands properly (Hepatitis A), to having unprotected sexual contact with an infected person (Hepatitis B) to sharing injection drug equipment (Hepatitis C). As a core function of public health, our Hepatitis Program offers a variety of preventative services including counseling, testing, access to support groups and more.

<table>
<thead>
<tr>
<th>Hepatitis Prevention Program</th>
<th>Number of Services, 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chronic Hepatitis Panels</td>
<td>2545</td>
</tr>
<tr>
<td>Hepatitis B Vaccines Given</td>
<td>125</td>
</tr>
<tr>
<td>Hepatitis A Vaccines Given</td>
<td>49</td>
</tr>
<tr>
<td>Outreach Events</td>
<td>21</td>
</tr>
</tbody>
</table>

IMMUNIZATIONS AND TRAVEL VACCINES

The Immunizations Program clinic provides childhood immunization services through the Vaccines For Children (VFC) program. We also provide routine adult vaccines and travel services. In 2013, the immunization coverage rate was 99% for two-year-old patients! This rate is above the overall state rate of 93% and the state goal of 95%. The one-year-old child coverage rate for 2013 was 100%. This rate is above the overall state rate of 85% and above the state goal of 90%. The immunization program also conducted outreach activities in four middle schools, participated in two school flu vaccine campaigns, and conducted a highly successful employee flu vaccination campaign.

REFUGEE HEALTH PROGRAM

Our Refugee Health Program assists clients that are referred by our community partners at Catholic Charities and Lutheran Services. These community partners work in foreign countries to assist Refugees, Political Asylees, and Parolees to immigrate to the United States. We provide an initial health history and assessment, conduct a comprehensive laboratory screening for communicable diseases, provide routine immunizations and provide Immigration form validation for those clients seeking to adjust their immigration status.

In 2013 alone, the Refugee Health Program provided 285 health assessments and 842 immunizations and completed 124, I-693 forms for County residents.

The Refugee Health Program received the Prudential Productivity Award and certificate of Commendation by Florida Tax watch for innovation, dedication and commitment to excellence for enhancing productivity within the state government and improving the lives of Florida’s citizens.
Our Tuberculosis (TB) Program provides TB skin tests, chest X-rays, medications, investigation of active cases, Directly Observed Therapy (DOT), nurse case management and expert medical management for cases/suspects of active TB disease and latent TB infection. Seminole County had six active TB cases in 2013 and all cases of active tuberculosis were treated to completion.

Our TB program continues to perform TB testing on high risk populations. These populations include the homeless, substance abusers, HIV infected and previously incarcerated individuals. The use of the new Interferon Gamma Release Assay (IGRA) in our foreign born population has led to greater specificity and compliance in these patients as well. The IGRA test is more definitive and recommended for this opulation. This test has led to greater compliance with medication and completing treatment. The TB program is working with area providers and Civil Surgeons to educate utilizing CDC guidelines. In 2013, the TB Program staff tested 590 clients for TB infection with 50 clients testing positive for infection and receiving treatment for the infection. Seminole County’s most recent aggregate report shows a 98% completion rate for clients taking medication for latent Tb infection.

<table>
<thead>
<tr>
<th>TB Services</th>
<th>Number Patients in 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>TB screening</td>
<td>590</td>
</tr>
<tr>
<td>TB treatment</td>
<td>56</td>
</tr>
<tr>
<td>RH assessments</td>
<td>285</td>
</tr>
<tr>
<td>RH immunizations</td>
<td>842</td>
</tr>
<tr>
<td>I-693 forms</td>
<td>124</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>1897</strong></td>
</tr>
</tbody>
</table>

Our Epidemiology Program monitors reportable diseases other than tuberculosis, sexually transmitted diseases, and HIV/AIDS. Program staff members also investigate disease outbreaks in order to identify their source, intervene to protect others who may be at risk, and identify ways to prevent additional cases. Epidemiology staff also provides disease control education and consultation for the public, physicians, veterinarians, hospitals, schools, daycares, nursing homes, animal services, and other institutions in the community. Other services:

- Conduct active and passive surveillance to detect diseases and adverse health conditions.
- Investigate reports of acute diseases and outbreaks.
- Recommend appropriate prevention measures, treatment, and control.
- Monitor and investigate reports of unusual health conditions.
- Conduct data analyses and disseminate information from surveillance systems.
- Respond to disease-related inquiries from residents, healthcare providers, and others.
- Rabies prevention, surveillance and control, and pre and post exposure vaccines.
- Public health planning and policy research.

**EPIDEMIOLOGY DISEASE REPORTING AND SURVEILLANCE**

Epidemiology is a core public health function. Physicians and certain other healthcare professionals are required by Florida Statute to report any disease of public health significance to the Florida Department of Health (FDOH). Typically this is done through a county health department’s (CHD) epidemiology program.

BE IN THE KNOW!

The Florida Department of Health in Seminole County has a Health Information Network.

If you are a healthcare provider or work in the public health field, the Epidemiology Program would like to invite you to become a part of our “information network” to keep you up to date with what is happening in our community and keep you informed to better serve your patients!

Sign up for the electronic EPI Gazette by emailing Tania.slade@flhealth.gov.
FAMILY HEALTH SERVICES

BREAST AND CERVICAL CANCER EARLY DETECTION PROGRAM
The Breast and Cervical Cancer Early Detection Program (BCCEDP) started in Seminole County in 2003 serving approximately 250 women. The program serves women 50 to 64 years of age who are uninsured Florida residents in Seminole, Orange, Lake and Osceola counties. These women are at 200% of the poverty level.

Services provided by the BCCEDP are clinical breast exams, screening and diagnostic mammograms, sonograms, biopsies, surgical consults and pap smears. The Breast and Cervical Cancer Early Detection Program screened 548 women during calendar year 2013, meeting the annual goal set by the state. 26 women were diagnosed with breast or cervical cancer or related pre-cancerous conditions. The BCCEDP staff attended many community events including the Susan G. Komen Race for the Cure, the Sisters Network Block Walk and the Ribbon Riders Pink Day.

DENTAL CARE
Our Dental Care Program provides services to children and adults with Medicaid. Adults over the age of 20 with Medicaid may be eligible for emergency dental care. Services offered by the dental clinic include exams, X-rays, cleanings, sealants, fillings, extractions and more.

FAMILY PLANNING
The Title X Federal Program supports our Family Planning (FP) Services. It is the only Federal program solely dedicated to family planning and reproductive health with a mandate to provide a broad range of acceptable and effective family planning methods and services.

The program is designed to provide access to contraceptive supplies and information to all who want and need them with priority given to low income persons. In addition to contraceptive services and related counseling, the Title X program also provides a number of preventative health services that contribute to an improved quality of life.

<table>
<thead>
<tr>
<th>Family Planning (FP) Services 2013</th>
<th># Services Provided</th>
</tr>
</thead>
<tbody>
<tr>
<td>FP Annual Exams</td>
<td>1776</td>
</tr>
<tr>
<td>FP Supply/FP Consultation</td>
<td>906</td>
</tr>
<tr>
<td>Nurse Education</td>
<td>3267</td>
</tr>
<tr>
<td>PAP smear Only/IUD Re-Check</td>
<td>386</td>
</tr>
<tr>
<td>IUD Insertion/Removal Visits</td>
<td>133</td>
</tr>
<tr>
<td>TOTAL</td>
<td>4692</td>
</tr>
</tbody>
</table>

Did you know?
Our Vital Statistics office issued 6,291 copies of Florida birth certificates and 5,252 copies of Florida death certificates for the years 2013 and 2014!
HEALTHY START PROGRAM
The Healthy Start program is available to all pregnant women and mothers with infants in Seminole County. This program is voluntary and eligibility is not based on financial factors. The Healthy Start service is offered at the Florida Department of Health in Seminole County to all prenatal women in order to reduce infant deaths, the number of low birth weight babies and improve health and developmental outcomes. This is done by having a presence in the community, educating moms on childbirth, breastfeeding, parenting and nutrition. The Healthy Start Program staff also makes home visits, provides psychosocial counseling and other services necessary to ensure moms and babies have a healthy start to life.

For 2013, the Healthy Start Program served 4,183 prenatal women and 1,627 infants who were registered in the program. 115,042 services were provided which was an increase of 87% since 2008-09.

PREGNANCY CARE
The prenatal program at the Florida Department of Health in Seminole County works to reduce Seminole County’s infant mortality rate and ensuring a healthy pregnancy and delivery. Our doctors follow strict guidelines from the American Congress of Obstetricians and Gynecologists (ACOG). We work to educate soon-to-be mothers on the importance of prenatal care during the first trimester of pregnancy. We follow our prenatal patients throughout the pregnancy ensuring we provide uninterrupted care. Our prenatal team meets twice a month to utilize an interdisciplinary team approach for our patient care. Staff members from WIC, Healthy Start and the health clinic work together to review our patients and make certain everyone has access to the services they needed for support throughout the pregnancy and postpartum.

Our staff works directly with the Healthy Start Program to ensure our patients’ needs are being met. Healthy Start provides an in depth look into the infant mortality rate in Seminole County which it monitors closely.

With area obstetricians accepting more Medicaid patients, we have seen a drop in the number of prenatal patients who received care at the Florida Department of Health in Seminole County. In 2013, our prenatal program provided care to 1,417 patients.
FAMILY HEALTH SERVICES

SCHOOL HEALTH SERVICES
Our School Health Program at the Florida Department of Health in Seminole County partners with Seminole County Public Schools to provide health services to students in 64 public schools. The program includes a combined staff of 22 registered nurses, 48 school health aids, 10 licensed practical nurses and five administrative staff including a program coordinator. Seminole County Public School’s vision and hearing screening teams collaborate with DOH-Seminole to ensure the delivery of required services.

The School Health Program provides the following services:

- Health screenings (vision, hearing, scoliosis and Body Mass Index (BMI) scoring) for required grades.
- Nutrition assessments and follow up referrals.
- Mental health and behavioral counseling.
- Immunization and health record reviews
- Student health appraisals and nurse assessments assistance with medication and health care procedures
- Communicable disease prevention and emergency preparedness
- Health education

TEEN OUTREACH PROGRAM
The Teen Outreach Program (TOP) is an engaging positive youth development program to encourage healthy behavior, life skills and a sense of purpose for youth. The program has been proven to lower the risk of: school suspension by 52%, course failure by 60%, risk of pregnancy by 53%, and the risk of school dropout by 60%. Students learned about coping (15%), health (7%), pregnancy prevention, STDs, HIV/AIDS (12%), influences from media (1%), how to set priorities (5%), decision making and social skills (32%), community service (2%) and communication and teamwork (18%).

WOMEN, INFANTS & CHILDREN (WIC)
WIC is a federally-funded supplemental nutrition program for low-moderate income women, infants, and children. WIC provides nutritious foods as well as nutrition education and health care referrals for women who are pregnant, breastfeeding or who have recently been pregnant, and for infants and children under age five. Participants can use their WIC EBT card to shop at any of the 45 authorized WIC vendors throughout Seminole County.

In 2013, WIC provided a total of 149,555 services to 13,440 Seminole County women, infants and children. Participants redeemed $6,016,687 in WIC food instruments, representing an average monthly contribution to the local economy of $501,391. Average participation in 2013 was 7,608; percent eligible served was 89.7% compared to the state level average of 77%. The WIC program in Seminole County is provided at two locations—Sanford and Casselberry. Each location serves 50% of the participants.
**WIC BREASTFEEDING PROGRAM**

The WIC Program also has a Breastfeeding Program, which is to provide participants with information to assist in making the decision on how to nourish their babies. Research indicates that mother’s milk is the best choice for the overall health and well-being of babies. We provide education throughout key stages of the gestational and postpartum periods. We emphasize early intervention in order to increase participants’ breastfeeding success. Education and breastfeeding management is provided by the breastfeeding staff which includes four International Board Certified Lactation Consultants (IBCLC’s) and one Certified Lactation Counselor. The Program also provides support via the electric pump loan program for moms who have to be separated from their babies due to hospitalizations, employment or school.

**CHILD HEALTH**

Seminole County has numerous pediatric doctors, which was a major factor in our discontinuation of child health services at the end of our 2013 fiscal year. We saw children ages newborn to 19. Parents who bring their newborns in for an exam two days after birth received full assistance with breast feeding problems, a complete physical exam on the infant to be sure the baby is not jaundiced and is receiving enough nourishment. A hearing test can be done if the infant was not hearing tested in the hospital. Our doctors referred to any pediatric patient to a specialist if needed, and work very closely with Nemours.

In 2013 we saw 2,279 children, had 3,379 child visits and delivered 7,362 services to the children in Seminole County.
Our Environmental Health Program works to prevent disease of environmental origin. Environmental health activities focus on prevention, preparedness, and education and are implemented through routine inspections, monitoring, education, and surveillance of conditions that may contribute to the occurrence or transmission of disease.

**Inspection Services:**
- Onsite Sewage Disposal (septic systems)
- Tattoo facilities and artists
- Body Piercing
- Food Hygiene (schools, group care facilities, institutional kitchens)
- Group Care Facilities
- Foster Care Facilities
- Mobile Home and Recreational Vehicle parks
- Limited Use Wells
- Super Act sites
- Public Swimming Pools
- Biomedical Waste
- Tanning Facilities

<table>
<thead>
<tr>
<th>Service</th>
<th># of inspections in 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sanitary nuisance complaints</td>
<td>118</td>
</tr>
<tr>
<td>Biomedical waste</td>
<td>555</td>
</tr>
<tr>
<td>Body piercing</td>
<td>9</td>
</tr>
<tr>
<td>Food hygiene</td>
<td>608</td>
</tr>
<tr>
<td>Group care</td>
<td>327</td>
</tr>
<tr>
<td>Limited use wells</td>
<td>76</td>
</tr>
<tr>
<td>Mobile home parks</td>
<td>36</td>
</tr>
<tr>
<td>Onsite sewage and disposal</td>
<td>1388</td>
</tr>
<tr>
<td>Swimming pools</td>
<td>1113</td>
</tr>
<tr>
<td>Tanning</td>
<td>58</td>
</tr>
<tr>
<td>Tattoo</td>
<td>44</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>4288</strong></td>
</tr>
</tbody>
</table>
OTHER PUBLIC HEALTH SERVICES

PUBLIC HEALTH PREPAREDNESS

Our Public Health Preparedness Office has dual responsibilities of preparedness and response. Our primary mission is to protect the employees, facilities, records, and assets, development of local emergency operations plans, and to prevent or reduce employee loss through pre-incident planning, training, and exercising.

In addition, our main objective is to provide support to core public health services through the coordination of public health and medical system preparedness, response, and recovery activities. We ensure public health services continue to serve the community during natural or man-made emergencies through an efficient and effective coordinated response and allocation of DOH-Seminole resources and through the coordination with other community agencies and stakeholders.

In Florida, preparedness is operationalized through three overlapping structures: public health and medical, emergency management, and domestic security.

Our Public Health Preparedness Department has been recognized as a “Project Public Health Ready” health department in 2005, 2009 and 2013! The Public Health Preparedness Department received a score of 92% in the Cities Readiness Initiative Review.

TOBACCO PREVENTION PROGRAM

Tobacco use is the most preventable cause of death and disease in our society. Tobacco is recognized as a cause of multiple cancers, heart disease, stroke, complications of pregnancy and chronic obstructive pulmonary disease (COPD), and is responsible for over 438,000 deaths in the U.S. each year. The Florida Department of Health in Seminole County is an active member of the Tobacco Free Seminole Partnership (TFSP), a group of local individuals and community agencies who are committed to a tobacco-free Seminole County. The TFSP mission is to form partnerships with individuals and organizations to educate and serve the citizens of Seminole regarding prevention of tobacco use, intervention, and cessation. Tobacco prevention program initiatives for 2013 included:

• Restriction of the sale of flavored tobacco.
• Increase the number of employers who offer access to cessation services to their employees.
• Collaborate with schools to create model Tobacco-Free policies.
• Establish relationships with housing managers to promote tobacco free housing.
• Offer programs to organizations in need of tobacco free services and education.
• Recruit new youth members into the partnership.
• Maintain a successful Students Working Against Tobacco (SWAT) chapter.
• Continue to recruit community partners for Tobacco Free Florida in Seminole County.

Since 2007, youth smoking prevalence has decreased from 10.5 percent in 2006 to 6.1 percent in 2013. Tobacco Free Florida’s free and easy 3 Ways to Quit are evidence-based resources that help tobacco users set personalized plans and can double tobacco user’s chances of quitting for good.

VOLUNTEER PROGRAM

DOH-Seminole provides a rewarding experience by hosting volunteers and providing educational experiences for interns, nursing and medical students.
ACKNOWLEDGMENTS

Compiled and Edited by:

Connor Bridge, BS
CDC Public Health Program Associate (2013-15)

Dr. Swannie Jett, DrPH, MSc
Health Officer
Florida Department of Health in Seminole County

Ana Machado, BS
Master of Public Health Intern
University of Kentucky, Louisville

Zeenat Rahman, MBBS, MPH
Epidemiologist
Public Health Planning and Policy Research Department
Florida Department of Health in Seminole County

Tania Slade, MPH
Epidemiology Program Manager
Florida Department of Health in Seminole County
Promoting Safe Sidewalks and Walkways