

# **South Miami Health Wellness Community Needs Assessment Executive Summary**



**Office of Academic Affairs  
Division of Research and Information  
Data Coordinating Center**

# South Miami Health Wellness Community Needs Assessment

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<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

<sup>2</sup>Florida Department of Health. (2013, September 3). Florida Population Estimates. Retrieved from [www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx](http://www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx)

## ACKNOWLEDGEMENTS

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<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

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## Executive Summary

From February to June 2013, trained interviewers from the Division of Research and Information Data Coordinating Center from the Herbert Wertheim College of Medicine at Florida International University surveyed randomly selected households within a close proximity to South Miami Hospital.

Out of 753 households the overall response rate was 57%. Estimates provided in this report should be accurate within plus or minus 5 percent.

The survey provides a broad range of information. Questionnaire topics includes demographics, neighborhood/community characteristics, access to health care services, health outcomes and maternal and child health.

The following are key study findings obtained from reports of adult household participants:

- The Community Advisory Board (CAB) for this survey defined an Area of Greatest Need, which is shown in Figure 2 within blue lines.
- Three out of four household respondents reported belonging to a minority race/ethnic group.
- Approximately half of the heads of the households had at least a Bachelor's degree; this is approximately two times higher than the percent within the Area of Greatest Need (27%).
- One out of four households reported that someone in the household was uninsured at some point during the twelve months prior to the survey (one out of three households for the Area of Greatest Need). At the time of the survey, it was reported that in 17% of the households live someone without health insurance.
- A third of the households reported having the hospital emergency room as their regular place of care, as compared to 44% in the Area of Greatest Need.
- Screening rates for cervical (81%) and colorectal cancer (61%) were reported at a lower rate than those stated in the Healthy People 2010's target of 93% and 71%, respectively.
- Approximately seven out of ten households, having children 0-18 years old, reported that children did not receive any type of health care service/routine preventive care in school.
- Hypertension was the more prevalent chronic condition reported in the study area: In approximately half of the households interviewed, at least one member had been diagnosed with the condition.
- Almost twice as many apartments reported a member diagnosed with asthma as compared to single- family homes during the five years previous to answering the survey.

<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

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## I. Methodology

From February to June 2013, trained interviewers from the Division of Research and Data Information Center from the Herbert Wertheim College of Medicine at Florida International University surveyed randomly selected households in the areas of Miami: South of SW 56<sup>th</sup> St.; East of SW 57<sup>th</sup> Ave.; North of SW 72<sup>nd</sup> St.; and West of 67<sup>th</sup> Ave. The area surveyed consisted of four census blocks. The Community Advisory Board (CAB) designated eligible households, which included either single-family homes or units located in apartment buildings. Apartment units were oversampled (probability of selection for apartments were higher than the probability of selection for single-family homes). Survey results were weighted to account for the probability of selection between strata (single-family homes and apartment units). Findings from the four census blocks were compared with the area designated by the CAB and denominated “Area of Greatest Need” (Fig. 2 with blue lines).

The South Miami Health Wellness Community Needs Assessment consisted of 162 standardized questions. The survey was developed with the aim of examining household and individual health/wellness indicators for families residing in the study area. Due to the population diversity, the interviews were conducted in English, Spanish, or Creole based on the participants’ preferences. Trained staff completed face-to-face interviews by reading each question to the participants and recording their responses.

A consenting adult, 18 years or older, answered the survey on behalf of the entire household. As shown in Figure 1, the total sampling frame consisted of 1811 households (1453 single-family homes and 358 apartments). From the eligible households, 573 single-family homes and 180 apartments were randomly selected. In the event that one of the originally sampled households was vacant or no physical house existed, the sampled household was replaced with the next neighboring house. Less than 5% of completed surveys were conducted in replaced households.

An overall response rate of 57% was achieved. Response rate was higher among single-family homes (58%) than apartments (53%). From the randomly selected single-family homes, 152 (27%) refused and 88 (15%) were unreachable, i.e. vacant or did not respond. In the case of apartments, 64 (36%) refused to participate and 21 (12%) were unreachable. At least 7 attempts to contact the households were made, on altering days of the week and times of the day, before they were recorded as unreachable.

<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

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**Fig. 1: Flow Chart for Response Rate by Strata in the Study Area**

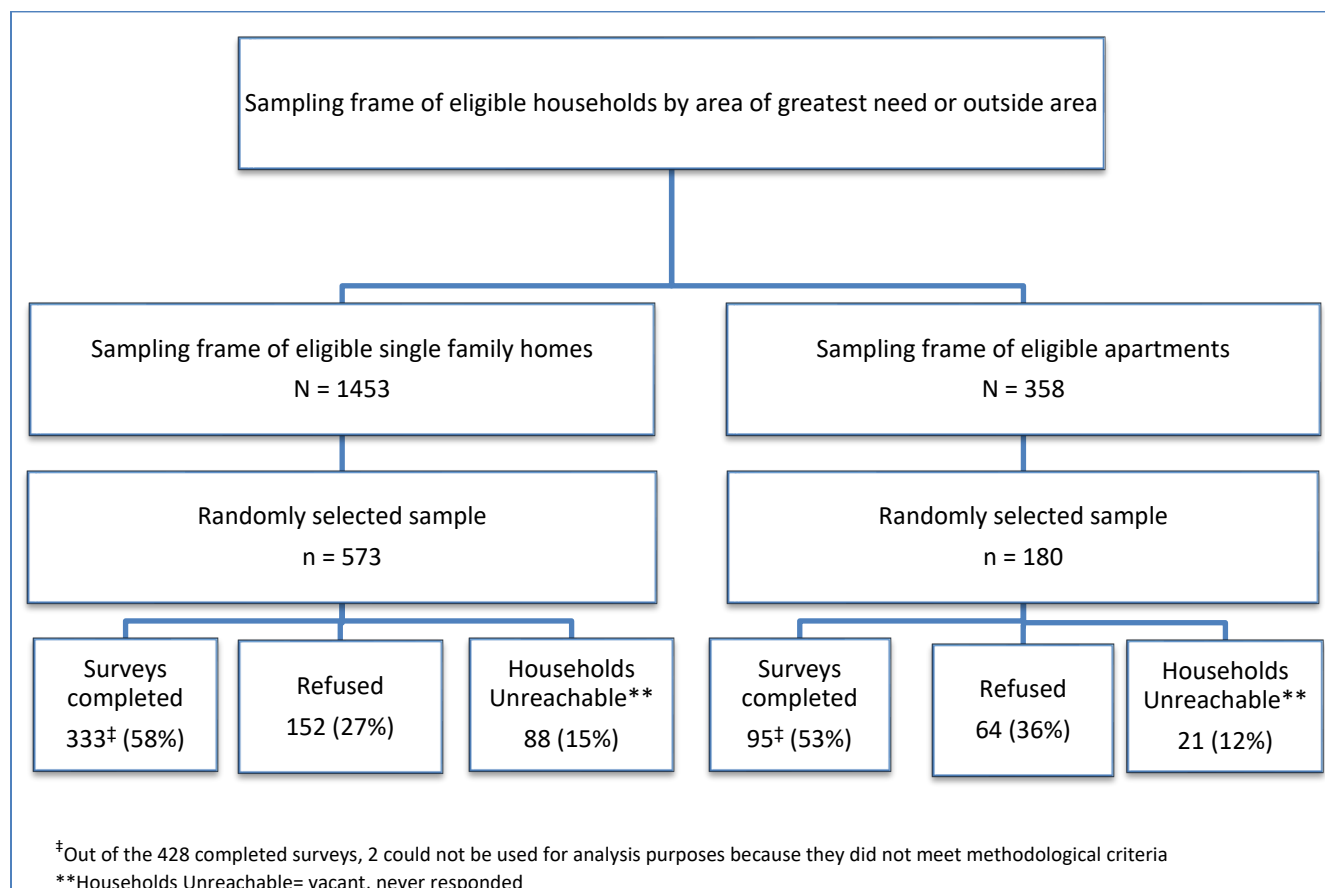
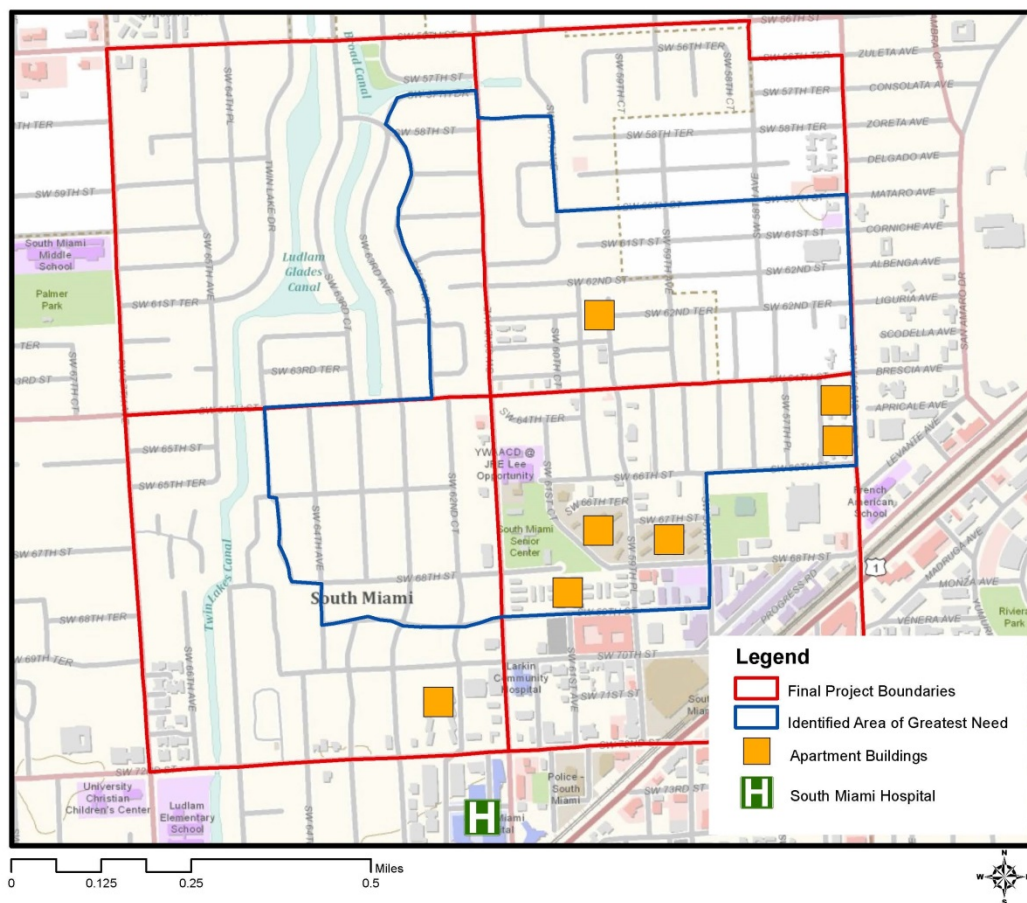


Fig. 2: South Miami Health Wellness Community Needs Assessment Study Area



<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)  
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## II. Results

The first column in each table shows the list of the variables of interest; the second column describes the results for all the households interviewed in the four census blocks (whole area); the third column considers results for only those household located within the designated Area of Greatest Need; and the last two columns show the results of single-family homes and apartments.

### A. Demographic Profile of Interviewed Households

Table 1 summarizes the demographic profile of the households interviewed. Based on the self-reported race/ethnicity classification provided by the respondents, four out of ten households in the whole study area identified themselves as African Americans, followed by Hispanics, non-Hispanic Whites, and other. More than half of the households interviewed within the Area of Greatest Need identified themselves as African Americans. The racial/ethnic distribution reported in single-family homes was similar to that of the whole study area; however, close to 80% of apartment residents reported being either African Americans or Hispanics.

Across strata, English was the most commonly reported language spoken in the households interviewed followed by Spanish. As compared to apartments, twice as many families living in single-family homes spoke Spanish as their primary language.

Overall, 45% of the heads of the households have at least a Bachelor's degree; this is approximately two times the proportion of heads of households having at least a Bachelor's degree within the Area of Greatest Need (27%). Twice as many heads of households living in single-family homes have at least a Bachelor's degree as compared to those heads of household who live in apartments. About three times as many heads of households living in apartments have less than a high school degree as compared to those who live in single-family homes.

Half of the respondents in the whole study area reported that, at the time of the survey, their household heads were employed full time, and 13% were unemployed. Among households within the identified Area of Greatest Need, a slightly lower percentage of heads of households were employed full time (46%). The proportion of unemployed heads of households was larger in apartments than in single-family homes. Among those heads of households with at least a high school degree, unemployment decreased. As educational attainment of the heads of households increased, full time employment also increased, and retirement decreased (Fig. 3).

<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

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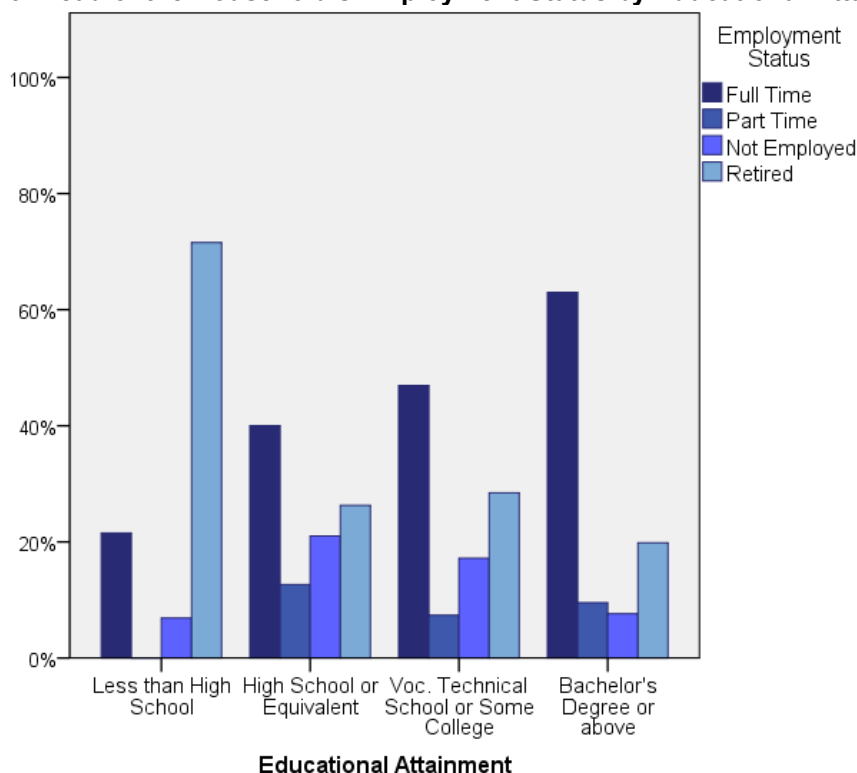
**Table 1. Demographic Characteristics of Households in the Study Area**

	All Census Blocks % N = 426	Area of Greatest Need % N = 228	Single-Family Homes % N = 331	Apartments % N = 95
<b>Race/Ethnicity</b>				
African American	36	55	34	43
Hispanic	29	22	28	34
Non-Hispanic White	25	16	28	7
Other	11	7	10	16
<b>Language</b>				
English	78	79	63	82
Spanish	17	16	30	14
Other	5	5	7	4
<b>Educational attainment</b>				
Less than High School	8	13	6	19
High School or Equivalent	22	31	21	30
Voc./tech school/some college	25	30	24	26
Bachelor's or above	45	27	49	25
<b>Employment Status</b>				
Full Time	51	46	50	52
Part Time	9	10	9	7
Not Employed	13	14	12	17
Retired	28	30	29	23
<b>Household Income<sup>‡</sup></b>				
Under \$10,000	15	19	13	26
\$10,000 - \$19,999	13	21	11	21
\$20,000 - \$29,999	11	13	10	16
\$30,000 - \$39,999	12	13	11	16
\$40,000 - \$49,999	11	9	12	7
\$50,000 - \$74,999	14	12	16	9
\$75,000 - \$99,999	9	7	11	1
Over \$100,000	14	6	16	4
<b>Income Per Capita<sup>‡</sup></b>				
Under \$10,000	35	48	29	57
\$10,000 - \$19,999	20	18	21	17
\$20,000 - \$29,999	14	11	17	3
\$30,000 - \$39,999	9	8	9	7
\$40,000 - \$49,999	4	4	5	1
Over \$50,000	18	10	19	14
<b>Primary Caregiver for Children<sup>‡</sup></b>				
Both parents	32	24	35	21
Mother	17	25	11	36
Other	3	0	3	2

<sup>‡</sup>The results obtained should be interpreted with caution due to the large percentage of non-response for this item.

<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

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**Fig. 3: Head of the Household's Employment Status by Educational Attainment**

The distribution of self-reported household income shows that the whole area surveyed is poorer than Florida and Miami-Dade (based on the most recently available estimates from the American Community Survey (2007-2011 5-year estimates)).<sup>1</sup> Approximately 7%, and 10% of the households in Florida and Miami-Dade, respectively, have household income of \$10,000 or less compared to 15% of the households in the study area. The self-reported figures of household income presented in this report should be interpreted with caution due to the high percentage of missing values (28%) observed for this variable. Across strata, approximately one quarter of respondents living in apartments reported their household income to be under \$10,000; this is two times that of households in single-family homes.

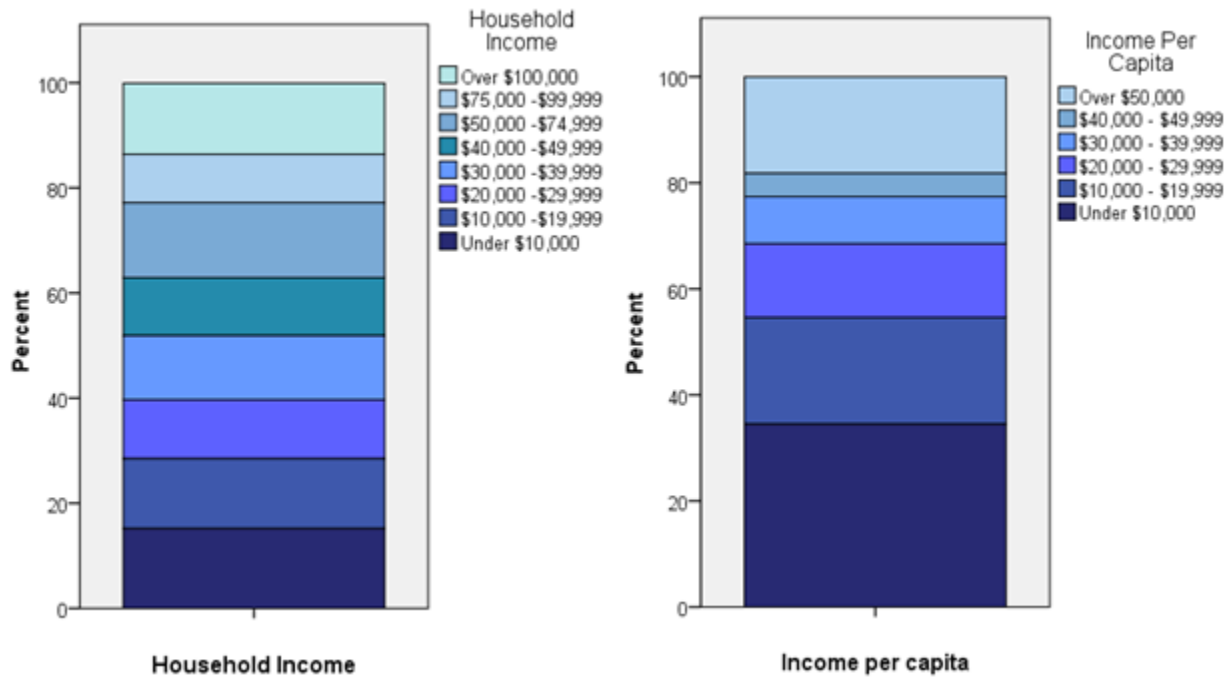
Poverty in this area is more evident when income per capita, instead of household income, is taken into consideration (Fig. 4). Half of the households residing in the Area of Greatest Need have an income per capita of less than \$10,000 per year, compared to only one-third of all households. Nearly one in two apartments reported less than \$10,000 per year per person: this is almost twice that of single-family homes (Table 1). Income per-capita of less than \$10,000 was most prevalent among African American households, with almost half falling in this income bracket (47%). Hispanic households followed with approximately one-third (33%) earning less than \$10,000 per capita (Fig. 5).

The median size of the households in the whole area was 2 people (IQR=3). In 146 (34.3%) of the households interviewed lived at least with one minor/child (under the age of 18). In a third of these households, the reported primary care givers for the children were both parents. In the same whole area, approximately one out five respondents reported that the primary care giver was the mother. These figures are similar to those reported by households located in the Area of Greatest Need. In single-family homes, however, mothers were reported as the primary care givers three time less than in apartments.

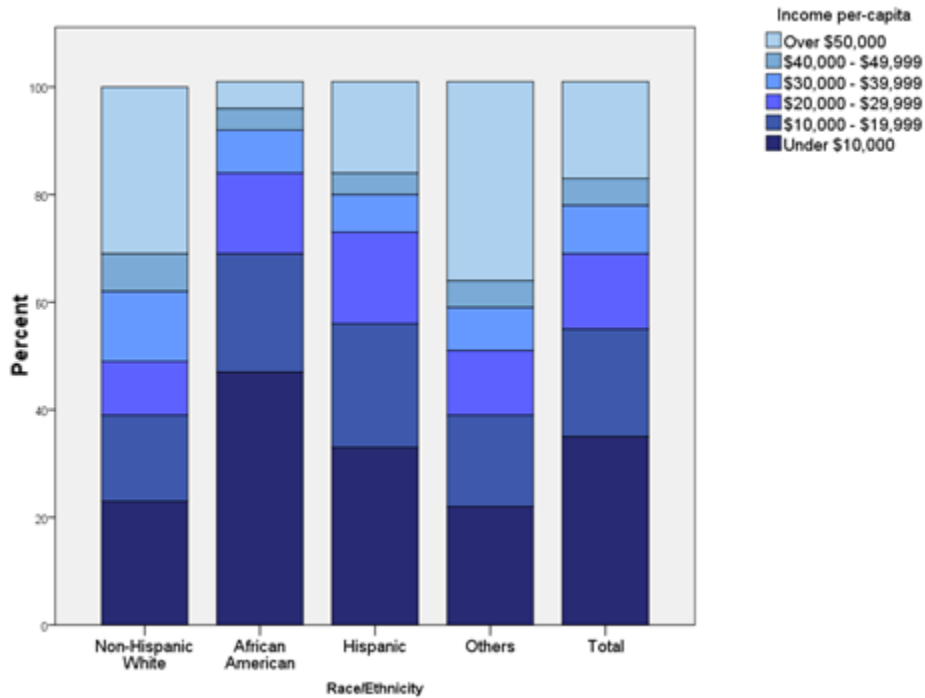
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**Fig. 4: Household Income versus Calculated Income per Capita in the Study Area**



**Fig. 5: Calculated Income per Capita by Race/Ethnicity for the Households in the Study Area**



<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)  
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## B. Community Assets and Social Capital

Community assets and social capital determinants are shown in Table 2. Overall, approximately four out of ten (44%) respondents reported owning their homes with mortgages, 26% having completely paid for their homes, and 30% been renting. Thirty-one percent of respondents living in single-family homes reported having completely paid for their homes. Eighty percent of respondents living in apartments reported that they were renting their units as compared to 19% of families living in single-family homes.

In 15% of the households interviewed respondents reported that in their households at least one person has had problems with a creditor in the past 12 months. Within the Area of Greatest Need, the percentage of households where at least one member has had problems with creditors in the past 12 months was higher (19%).

Approximately 3 out of 4 of all respondents interviewed reported they did not know which were the groups, organizations, or associations that functioned in their communities. There also seems to be a lack of awareness among respondents in the Area of Greatest Need whether they live in a single-family home or apartments. Regarding the presence of community organizations, the most commonly cited were sports groups, followed by youth groups, churches, and community development committees (Table 2a). Respondents living in single-family homes consistently reported less presence of community organizations than those living in apartments. On the other hand, if the analysis were restricted to households within the Area of Greatest Need, these consistently reported knowing more about the presence of community organizations than the study area as a whole. Similarly, there was general unawareness about the source of support for these community-based organizations; roughly 3 out of 4 of the households interviewed claimed they did not know where the support derived from. The most common support for community-based organizations was reported to come from the local government. In general, the two most reported areas of community involvement were voting in an election and making a monetary donation. The percentage of respondents living in single-family homes involved in community activities surpassed respondents living in apartments. Nineteen percent of the respondents considered the spirit of participation in the community to be low or very low (Table 2b). Families living in single-family homes had a higher percentage of spirit of participation either “high” or “very high” (29%) compared to households living in apartments (22%). In the whole surveyed area, 70% of the respondents reported they did not know who the leader of their community was.

The overwhelming majority of respondents in the whole study area perceived their neighborhoods as peaceful. Approximately 3% of respondents living in single-family reported their neighborhood to be conflictive, as opposed to one out of ten of the respondents living in apartments. Six out of ten respondents rated the current environmental conditions to be “good” or “very good” of the time, and “poor” or “very poor” 4% of the time. Among respondents living in single-family homes 3% reported “poor” or “very poor” environmental conditions in the neighborhood compared to rates three times higher among respondents living in apartments. In regards to how the environmental conditions of the community had changed in the last three years, a third of respondents stated they had improved, 5% stated they had worsened, and six out of ten stated they had remained the same.

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**Table 2. Community Assets and Social Capital reported by Households in the Study Area**

	All Census Blocks % N = 426	Area of Greatest Need % N = 228	Single-Family Homes % N = 331	Apartments % N = 95
<b>Home Ownership</b>				
Owned and completely paid for	26	25	31	5
Owned with a mortgage	44	42	51	18
Rented	30	33	19	77
<b>Financial Stability</b>				
Problem with a creditor	15	19	14	16
<b>Security</b>				
Peaceful	95	94	97	87
Conflictive	5	6	3	13
<b>Environmental Conditions</b>				
Poor/Very poor	4	4	3	9
Average	34	39	31	46
Good/Very good	62	57	66	46

**Table 2a. Awareness of community-based organizations that function in the area, and its supporters**

	All Census % N = 426	Area of Greatest % N = 228	Single Family % N = 331	Apartments % N = 95
<b>Community-based organizations<sup>§</sup></b>				
Community development Committee	15	19	14	20
Cooperative(fishing, agriculture, crafts)	7	7	5	13
Parent-teacher association	13	14	12	14
Health committee	9	11	8	15
Youth group	17	21	14	27
Sport group	18	22	16	27
Cultural group	11	14	10	15
Civic group	12	14	11	19
Church group	16	21	15	21
Other	7	6	8	0
<b>Supporters for Community-based organizations<sup>§</sup></b>				
Local government	16	19	17	18
National government	5	7	5	6
Politician	10	14	10	9
Religious organizations	12	16	13	12
School teachers	8	11	8	10
Nongovernmental organizations	7	9	7	6
Business groups	9	10	10	4
Service club	8	7	9	3
Prosperous citizen	10	12	10	7
The community as a whole	13	14	14	10
Other	6	5	5	4

<sup>§</sup>: Included all households who answer: Yes, No or Don't know

<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

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**Table 2b. Social-political involvement and spirit of participation in this community.**

	All Census Blocks % N = 426	Area of Greatest Need % N = 228	Single-Family Homes % N = 331	Apartments % N = 95
<b>Social and political involvement during the past three years</b>				
Voted in elections	83	84	86	71
Actively participated in association	20	13	20	21
Made a personal contact with an influential person	28	26	31	14
Made the media interested in a problem	7	6	7	5
Actively participated in an information campaign	16	16	18	7
Actively participated in an election campaign	19	20	21	13
Taken part in a protest march or demonstration	8	6	9	2
Contacted your elected representative	16	14	19	5
Taken part in a sit-in or disruption of government meetings/offices	8	9	9	1
Talked with other people in your area about a problem	43	37	43	41
Notified the court or police about a problem	32	28	32	31
Made a monetary or in-kind donation	71	66	72	66
Volunteered for charitable organization	40	35	41	34
<b>Spirit of participation</b>				
Very low/low	19	20	17	26
Average	54	52	54	52
High/Very high	28	27	29	22

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## C. Health Access

**Table 3. Self-report Access to Health Care in the Study Area**

	All Census Blocks % N = 426	Area of Greatest Need % N = 228	Single- Family % N = 331	Apartments % N = 95
<b>Health Insurance Coverage<sup>‡</sup></b>				
No Health Insurance	25	30	24	32
Health Insurance	75	70	76	68
<b>Main Sources of Health Insurance <sup>†</sup></b>				
Employer	52	46	54	41
Self-insured	13	10	14	5
Medicare	31	32	33	25
Medicaid	22	32	18	41
Other government/state medical plans	5	6	5	3
Currently uninsured	17	19	16	23
<b>Regular Place of Care</b>				
Doctor's office or private clinic	81	77	84	70
Community Health Center/Public clinic	13	16	12	18
Hospital outpatient department	18	21	20	7
Hospital emergency room	33	44	34	25
Some other places	6	7	6	3
No regular place of care	4	5	3	8
<b>Postponement of Care</b>				
Yes	18	13	19	10
No	83	87	81	90
<b>Reasons to Postpone Medical Problem</b>				
Cost	31	31	30	33
Long wait	3	8	2	11
Lack of insurance	20	19	20	22
Clinic does not accept insurance	1	3	0	11
Transportation problems	5	8	4	11
No convenience hours	6	11	5	11
Could not get appointment	5	8	4	11
Dissatisfaction with provider	3	8	2	11
Language barrier	1	3	0	11
<b>Frequency of dental visits</b>				
Within the past year	66	61	68	59
One to two years ago	14	13	13	17
More than two years ago	20	27	19	25
<b>Reasons for not visiting the dentist</b>				
Cost	29	27	28	32
No dental insurance	15	15	16	11
Neglected appointments	4	4	3	5
Scare of procedure	4	3	4	5
Other	52	54	52	50

<sup>‡</sup>Health Insurance is defined as a continuous coverage during the last 12 months. No health insurance reflect households where at least one member have been without health insurance at any point during the last twelve months

<sup>†</sup>Percentages may not add up to 100% because choices in the question are not mutually exclusive.

<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

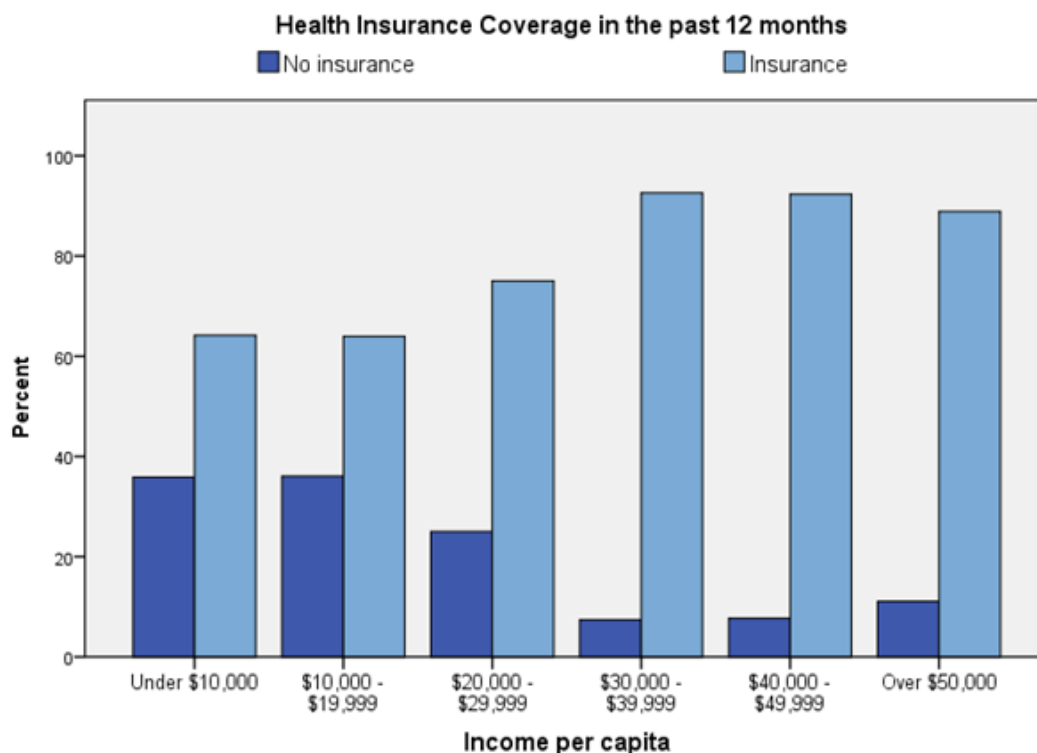
<sup>2</sup>Florida Department of Health. (2013, September 3). Florida Population Estimates. Retrieved from [www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx](http://www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx)

One out of four households interviewed, reported that at least one of its members was uninsured at some point during the twelve months prior to answering the survey. Among households within the Area of Greatest Need, one out of three respondents reported at least one uninsured member in the past twelve months. For every three single-family homes reporting, there was at least one uninsured member within the prior 12 months, one out of every four respondents living in apartments reported similar figures.

Lack of continuous insurance among all household members over the 12 months prior to the survey was concentrated among households with income per capita under \$20,000 (Fig. 6). As the income per capita increased, the percentage of households reporting at least one member without health insurance in the last 12 months decreased. Also, one out of three Hispanic households lacked continuous health insurance coverage during the prior 12 months; this is three times that of non-Hispanic white households (Fig. 7).

Among households that had at least one uninsured member in the 12 months prior to the survey, cost (52%) and unemployment (9%) were reported as the main reasons for lack of health insurance coverage. Half of the households obtained their health insurance through their employer; 31% and 22% received insurance through Medicare and Medicaid, respectively. The main source of health insurance among households located in the Area of Greatest Need was similar for Medicaid and Medicare (32%). Two out of five respondents living in apartments reported Medicaid as their main source of health insurance; this was more than twice that of respondents living in single-family homes. At the time of the survey, 17% of all households were currently uninsured compared to 23% of the households living in apartments.

**Fig. 6: Health Insurance Coverage by Per Capita Income during the Past Twelve Months**

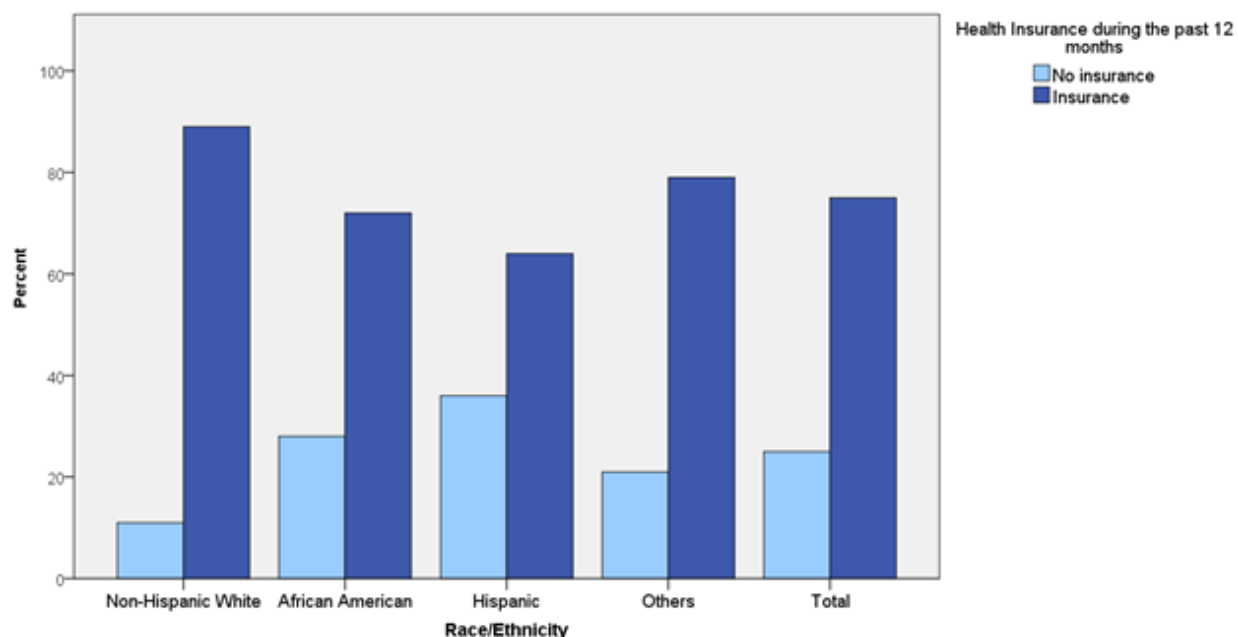


<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

<sup>2</sup>Florida Department of Health. (2013, September 3). Florida Population Estimates. Retrieved from [www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx](http://www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx)



**Fig. 7. Percent of Household with Continuous Health Insurance Coverage during the Past Twelve Months by Race/Ethnicity**

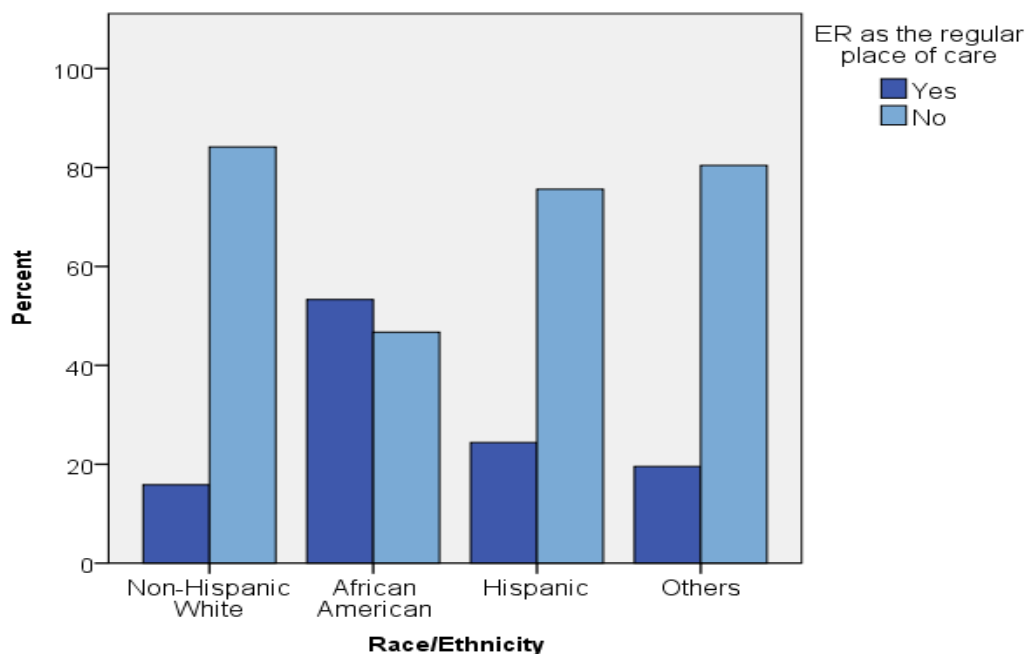


Four out of five households reported doctor's offices or private clinics as their regular place of care; fewer households in the Area of Greatest Need reported these as their place of regular care. The use of doctor's offices or private clinics for regular care was 20% lower among single-family homes than in apartments. Although visits to ER for conditions that could be treated by a regular doctor or health care provider should be avoided because they represent an additional weight on the cost of the health services, and improved access to primary care could reduce preventable use of ERs as regular places of care, the second most commonly reported place of care was hospital's emergency rooms; this was 33% higher in the Area of Greatest Need compared to all households. Use of emergency rooms for regular care was approximately 40% higher among single-family homes than apartments. More than half of African American households use the emergency room (ER) as regular place of care (Fig 8).

<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

<sup>2</sup>Florida Department of Health. (2013, September 3). Florida Population Estimates. Retrieved from [www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx](http://www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx)

**Fig. 8. Percent of Households Reporting the Emergency Room (ER) as Regular Place of Care by Race/Ethnicity**



Almost all of the households reported that they had a regular doctor or health care provider. Single-family homes reported having a regular doctor or health care provider in most of the cases, as compared to only 88% among respondents living in apartments. Nine out of ten households reported that at least one member was able to visit a doctor within the 12 months prior to the survey. Among those households where members did not visit a doctor, one out of three (34%) had at least one uninsured member within the 12 months prior to the survey; this was 36% higher than those that did visit a doctor (25%) (Fig. 9). The difference was more striking across strata. Among single-family homes with members that did not visit a doctor, only three out of ten (30%) reported an uninsured member within the 12 months prior to the survey, as compared to respondents living in apartments that did not visit a doctor, the majority (57%) reported having an uninsured member of the household within the 12 months prior to the survey.

Among those households with members that visited a doctor within the twelve months prior to the survey, approximately one out of five (18%) reported that at least one member had to postpone medical care when it was needed (Table 3). Only half as many members living in apartments (10%) as compared to those members living in single-family homes (19%) had to postpone medical care. In general, the primary reasons for postponing care were cost (31%) and lack of insurance (20%). Four out of five respondents reported that household members were in compliance with annual physical exams (78%) and annual blood pressure checks (79%); and almost all were compliant with cholesterol checks every five years (97%).

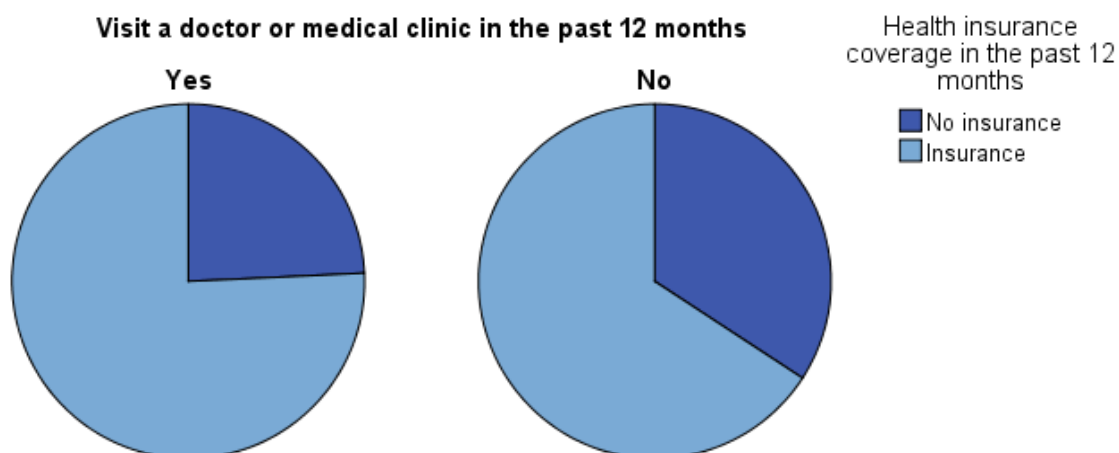
Among those households with at least one female age 21-65 years, four out of five reported a Pap smear test within the past two years (81%); whereas only 3% reported never having had the test. Of the households with at least one female age 40 years or older, four out of five reported a mammogram within the past two years (80%); whereas only 6% reported never having the test. Annual dental exams were reported by two-thirds of all households (66%).

<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

<sup>2</sup>Florida Department of Health. (2013, September 3). Florida Population Estimates. Retrieved from [www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx](http://www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx)

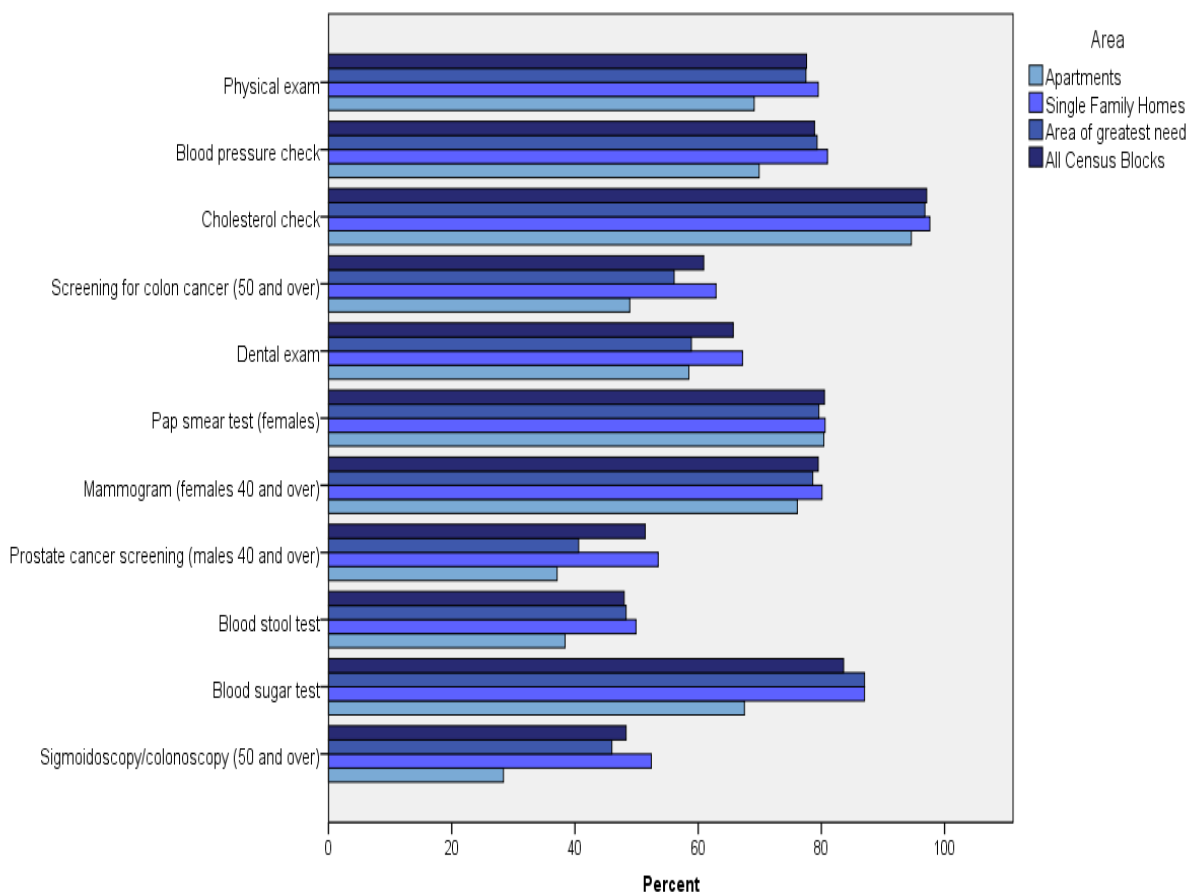
Within the Area of Greatest Need, compliance with prostate cancer screenings, annual dental exams, and colon cancer screenings was lower than that of the whole study area (Fig. 10). Among households within the Area of Greatest Need having at least one male age 40 years or older, two out of five (41%) reported having had a prostate exam within the prior year (46.8%); this was 20% less than that of all households (51%). Fifty-nine percent of the households within the Area of Greatest Need complied with annual dental exams; approximately 10% less than that of all households (66%). Among households within the Area of Greatest Need with at least one member age 50 years or older, more than half (56.1%) reported having been screened for colon cancer in the past 3 years; this is slightly less than that of all households (60.9%). Apartments were less compliant with all preventive-screening tests compared to single-family homes, except with Pap smear screening (Fig. 10).

**Fig. 9. Ability to Visit a Doctor or Medical Clinic by Health Insurance Coverage during the Past Twelve Months in the Study Area**



<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

<sup>2</sup>Florida Department of Health. (2013, September 3). Florida Population Estimates. Retrieved from [www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx](http://www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx)

**Fig. 10: Compliance with Preventive Tests by Surveyed Households**

Two out of three (66%) visited to a dentist or dental clinic within the twelve months prior to the survey. The number of dental visits was lower among households in the Area of Greatest Need (61%) and apartments (59%). The main reasons for not visiting the dentist during the prior year were “other reasons” (52%) and cost (29%).

Of the 426 households surveyed, one out three household (34%) reported having children; most of which were school age (28%)(Table 4). Approximately one out of three households having children reported that the children received health services or routine preventive care in school (35%). Non-response for this variable was large (19%). There were obvious differences in utilization of preventive care in households with children by race/ethnicity (Fig. 11).

Two out of three households with children reported a doctor’s office as their regular place of care; and 3% reported no regular place of care. Among households with children in the Area of Greatest Need, one out of ten (11%) use the emergency room as their regular place of care.

<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

<sup>2</sup>Florida Department of Health. (2013, September 3). Florida Population Estimates. Retrieved from [www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx](http://www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx)

School absenteeism could contribute to disparities in the regular learning process. Achievement in school depends in large portion to attendance. Among households with children who have missed at least one day of school due to sickness in the prior 3 months, 93% missed 1-5 days.

Approximately three out of four respondents expressed interest in the possibility of extended services and weekend availabilities (73% and 74%, respectively). Nearly six out of ten of these respondents cited “greater flexibility during the day” (57%) as the main reason for their interest in prospective services. Half of all respondents (52%) reported they had never heard of the Rosie Lee Wesley Health Center; lack of awareness of the center was lower in the Area of Greatest Need (39%).

**Table 4. Households with Children and Access to Health Care in the Study Area**

	All Census Blocks % N = 426	Area of Greatest Need % N = 228	Single-Family Homes % N = 331	Apartments % N = 95
<b>Household with children</b>				
Children (0-18)	34	32	31	44
Children school age (5-18)	28	32	25	40
<b>Received health care services/ routine preventive care in school</b>				
Yes	35	40	32	43
No	65	61	68	57
<b>Regular place of care</b>				
South Miami Children’s Clinic	11	14	8	19
Doctor’s office or private clinic	69	60	70	67
Community Health Center/Public clinic	9	12	10	6
Hospital outpatient department	2	3	0	8
Hospital emergency room	8	11	8	8
Some other places	11	8	12	6
No regular place of care	3	4	2	6
<b>Number of school days missed due to sickness during the past three months<sup>‡</sup></b>				
1-5 days	93	91	96	87
6-10 days	5	5	4	7
11-30 days	3	4	0	7

<sup>‡</sup>Included only household with children age 5 through 18 years that report missed school days in the previous 3 months

<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

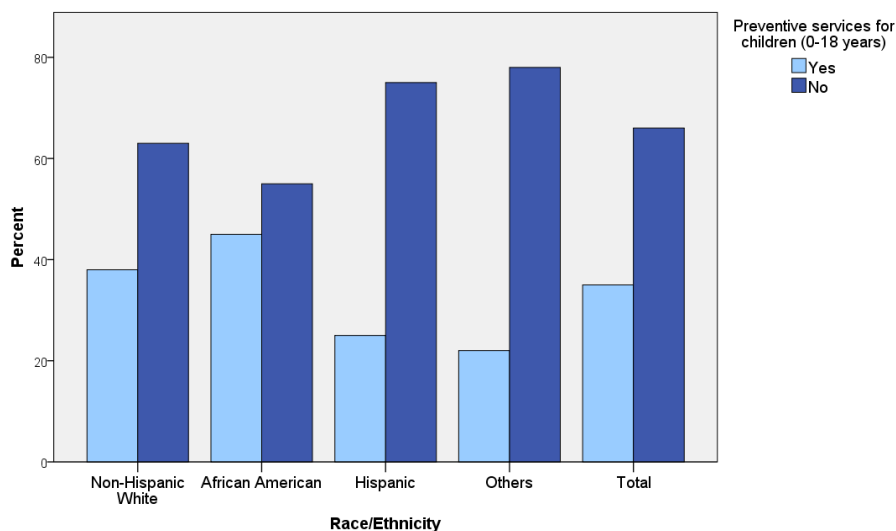
<sup>2</sup>Florida Department of Health. (2013, September 3). Florida Population Estimates. Retrieved from [www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx](http://www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx)

**Table 5. Prospective Extended Services and Utilization of Rosie Lee Wesley Health Center**

	All Census Blocks % N = 426	Area of Greatest Need % N = 228	Single-Family Homes % N = 331	Apartments % N = 95
<b>Prospective services</b>				
Prospective extended service hours <sup>‡</sup>	73	77	74	69
Prospective weekend availability <sup>†</sup>	74	79	74	72
<b>Reasons for prospective services</b>				
Work schedule	14	14	15	9
Family commitments during the day	4	3	4	3
Availability of ride in the evening	3	1	3	6
Easier to get somebody to accompany the patient	5	3	5	4
Greater flexibility during the day	57	42	35	23
Other reasons	33	42	35	23
<b>Utilization of Rosie Lee Wesley Health Center</b>				
Yes	21	29	20	26
No	27	32	27	27
Never heard about the clinic	52	39	53	48
<b>Reasons for not utilizing Rosie Lee Wesley Health Center</b>				
Did not need it	53	59	56	32
Did not know it still existed	14	10	10	36
Language barrier	8	12	8	4
Have private doctor/insurance	8	8	11	4
Other	11	11	7	20

<sup>‡</sup>Prospective extended service hours refer to the possibility of an "after hour" clinic (a clinic after 5:00 PM on Mondays-Fridays).

<sup>†</sup>Prospective weekend availability refers to the possibility of a clinic on weekends.

**Fig. 11 Household with Children (0-18 years) that Received Preventive Care by Race/Ethnicity**

<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

<sup>2</sup>Florida Department of Health. (2013, September 3). Florida Population Estimates. Retrieved from [www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx](http://www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx)

## D. Health Behavior and Lifestyle

In half of all the households interviewed, respondents reported that at least one of its members has smoked a whole cigarette at least once (Table 6), and that in two out of five (40%) of the cases, the member was younger than 17 years old when they first smoked. In addition, respondents also reported that one out of five (17%) at least one member currently smokes cigarettes. Current smoking was slightly higher among households within the Area of Greatest Need. Twenty-nine percent of current smokers smoke 11-20 cigarettes per day; 27% smoke 6-10 cigarettes per day, and 26% smoke 2-5 cigarettes per day.

In one out of four households (26%), respondents reported having had their first drink of alcohol when they were 16 years old or younger; the same percentage reported never having had a drink of alcohol. Half as many individuals residing in apartments than single-family households reported having their first drink when they were 16 or younger (38% vs. 25%, respectively). Among households that reported alcohol consumption, 10% reported that at least one member drank every day in the month prior to the survey. Nearly one out of five male respondents drank alcohol on all 30 days prior to the survey (16%); this is approximately 1.5 times that of females (Fig. 12). Within the identified Area of Greatest Need, male respondents are 4 times as likely to drink within 30 days prior to the survey as female respondents (17% vs. 4%).

One out of twenty respondents reported not consuming fruit and nearly one out of ten reported not consuming green salad within the 7 days prior to answering the survey. Within the Area of Greatest Need, these proportions were slightly higher. Consumption of fruits and green salad at least once a day in the 7 days prior to answering the survey among households residing in single-family homes was almost 1.4 times than that of respondents living in apartments. Nearly one out of five households (16%) reported that at least one member drank soda at least once every day within the 7 days prior to answering the survey; this was slightly higher among households within the Area of Greatest Need. Daily consumption of soda among households residing in apartments was about 1.5 times that of single-family homes.

Close to half of all households (45%) used the farmers market, compared to only one out of three (36%) households within the Area of Greatest Need and one out of three apartments. Three out of five households engaged in at least 20 minutes of physical activity at least three times a week (Table 6). One out of four households reported not engaging in weekly physical activity. One out of four households reported the use of alternative medicine; use was about twice as prevalent among single-family homes than apartments. Five percent of all households reported using acupuncture as a form of alternative medicine; nearly twice as many reported the use of chiropractors and nearly 4 times as many reported the use of herbal vitamins or nutrients.

<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

<sup>2</sup>Florida Department of Health. (2013, September 3). Florida Population Estimates. Retrieved from [www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx](http://www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx)

**Table 6. Health Behaviors and Lifestyle Characteristics of Households Members from the Whole Study Area**

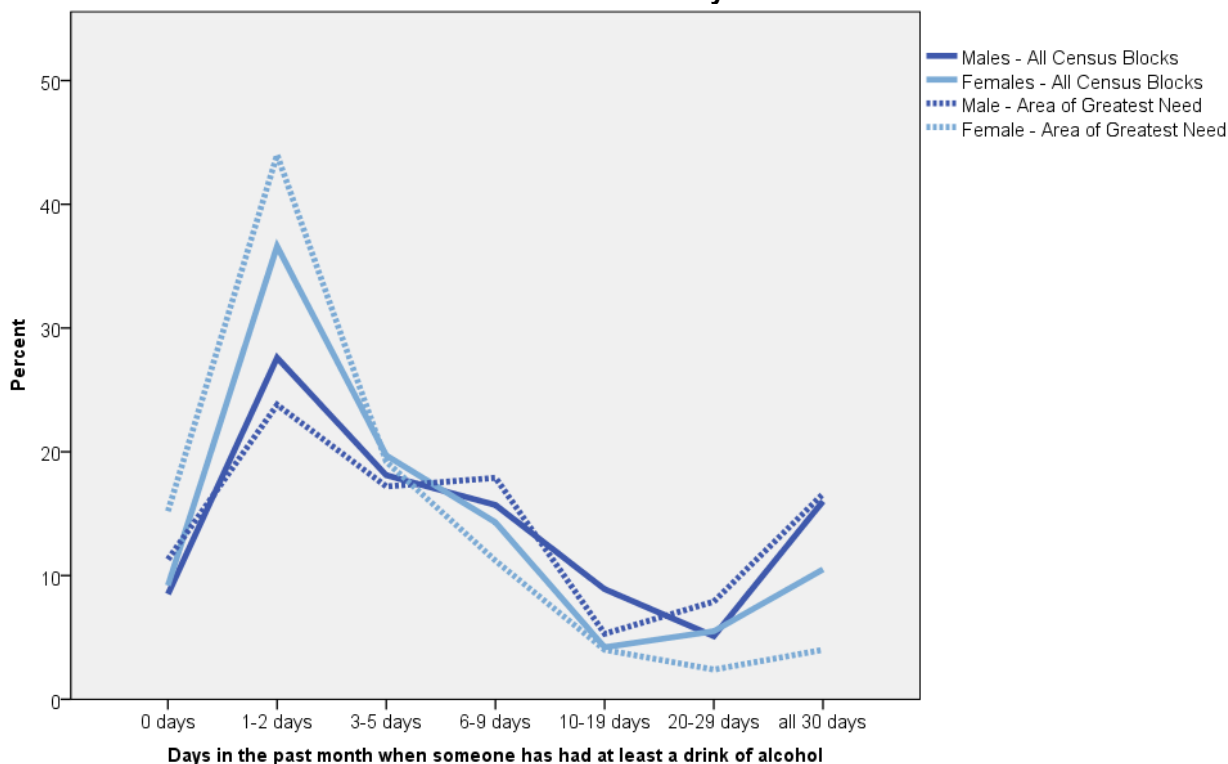
	All Census Blocks % N = 426	Area of Greatest Need % N = 228	Single-Family Homes % N = 331	Apartments % N = 95
<b>Cigarette smoking</b>				
Never has smoked	52	52	51	59
Ever smoked	48	49	50	41
Former smoker	31	28	33	21
Current smoker	17	20	17	20
<b>Alcohol consumption</b>				
All 30 days	10	8	11	7
<b>Fruit consumption in the past 7 days</b>				
Did not eat fruit	5	6	5	8
Ate fruits less than once a day	30	33	27	42
Ate fruits at least once a day	65	61	69	50
<b>Salad consumption in the past 7 days</b>				
Did not eat salad	8	10	8	11
Ate salad less than once a day	36	37	33	48
Ate salad at least once a day	56	53	59	41
<b>Soda consumption in the past 7 days</b>				
Did not drink soda	59	56	61	52
Drank soda less than once a day	25	25	24	27
Drank soda at least once a day	16	19	15	21
<b>Utilization of farmer's market</b>				
Yes	45	36	48	32
No	55	64	52	48
<b>Reasons for not utilizing the farmer market</b>				
Too expensive	17	18	23	22
No transportation	8	8	10	10
No need	41	45	50	59
Do not cook	0	0	0	2
No convenient location	11	12	15	7
Hours not convenient	2	1	3	2
No variety of food	0	1	0	0
No parking facility	2	1	3	0
Other	26	23	0	0
<b>Physical activity</b>				
Less than once a week	24	27	24	25
1 to 2 times a week	15	15	15	17
3 times a week or more	61	58	61	58
<b>Use of alternative medicine</b>				
Herbal medicine/nutrients	18	13	20	10
Chiropractors	9	8	10	3
Acupuncture	5	4	6	1
Traditional healer	1	1	1	0

<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

<sup>2</sup>Florida Department of Health. (2013, September 3). Florida Population Estimates. Retrieved from [www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx](http://www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx)



**Fig. 12: Days in the Past Month when Someone had at Least one Drink of Alcohol, by Gender and Area of Residency**



## E. Health Outcomes

Hypertension was the most prevalent chronic condition. Overall, nearly one out of two respondents (45%) reported having had a diagnosis of high blood pressure among at least one member of their households within the five years prior to the survey. Following hypertension, the most commonly reported conditions among at least one member of the household were asthma (15%), diabetes (14%), heart attack/heart disease (12%), anxiety/depression (12%), obesity (10%), and cancer (8%). Few respondents reported having had a diagnosis of heart failure or a chronic respiratory condition other than asthma among at least one member of their households within the past five years (<5%). Almost half as many respondents living in single-family homes reported a diagnosis of asthma and other chronic respiratory problems than respondents living in apartments (Fig. 13). Obesity and heart attack were also more common among respondents living in apartments compared to those living in single-family home. On the other hand, twice as many single-family homes reported a diagnosis of cancer within the past 5 years than apartments.

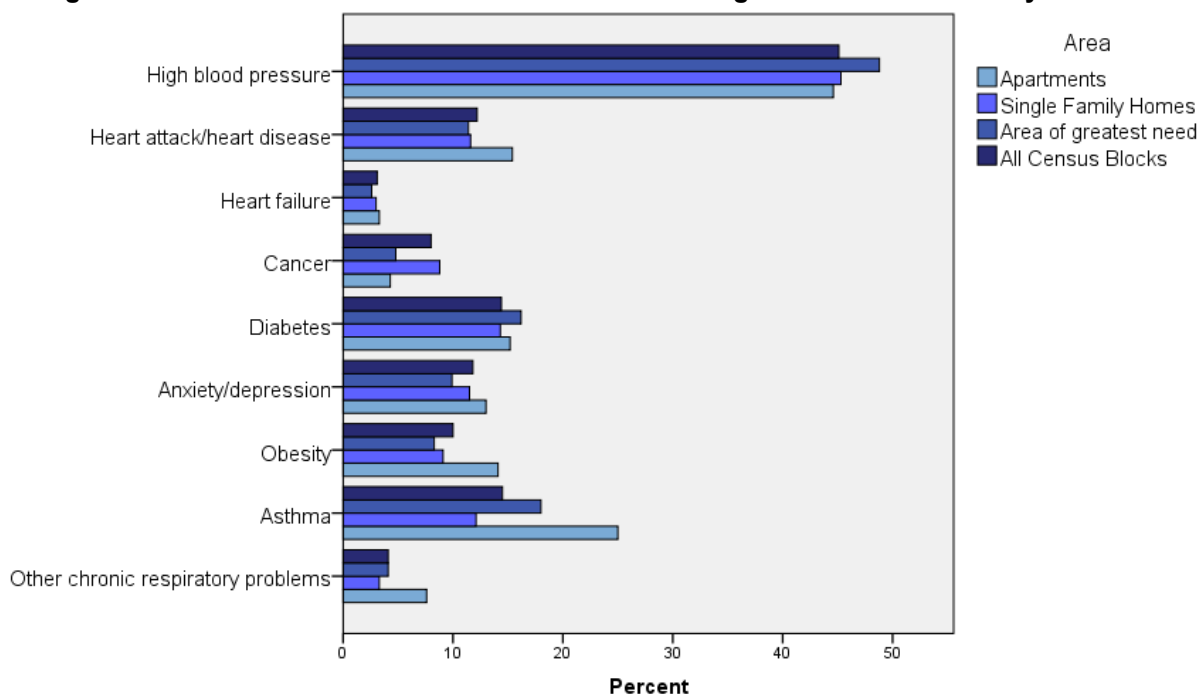
Throughout the whole study area, 5% of the respondents reported that they never or rarely received the social and emotional support they needed. About 6% of the respondents reported to be “dissatisfied” or “very dissatisfied” with their lives. One out of four respondents (26%) reported the loss of at least one permanent tooth due to gum disease or tooth decay among at

<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

<sup>2</sup>Florida Department of Health. (2013, September 3). Florida Population Estimates. Retrieved from [www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx](http://www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx)

least one member; this condition was more prevalent in the Area of Greatest Need, where one out of three respondents (32%) reported tooth loss. Out of the 1106 individuals living in the sampled households, 116 (11%) have lost at least one permanent tooth. The median age of these individuals was 62 years (IQR=20); individuals reporting tooth loss in single-family homes were older (Median=63 yrs., IQR=22) than those in apartments (Median=60 yrs., IQR=13). The median number of teeth lost among those who have lost permanent teeth was 4 (IQR=8). For both apartments and single-family homes, at least half of the individuals reported tooth loss between 1 and 5 teeth (median=5). However, the other half of individuals living in apartments reported a greater number of teeth loss per person (IQR=13) than those from single-family homes (IQR=7) (Fig. 14). Among the individuals that reported tooth loss, 17 (15%) had lost all their teeth.

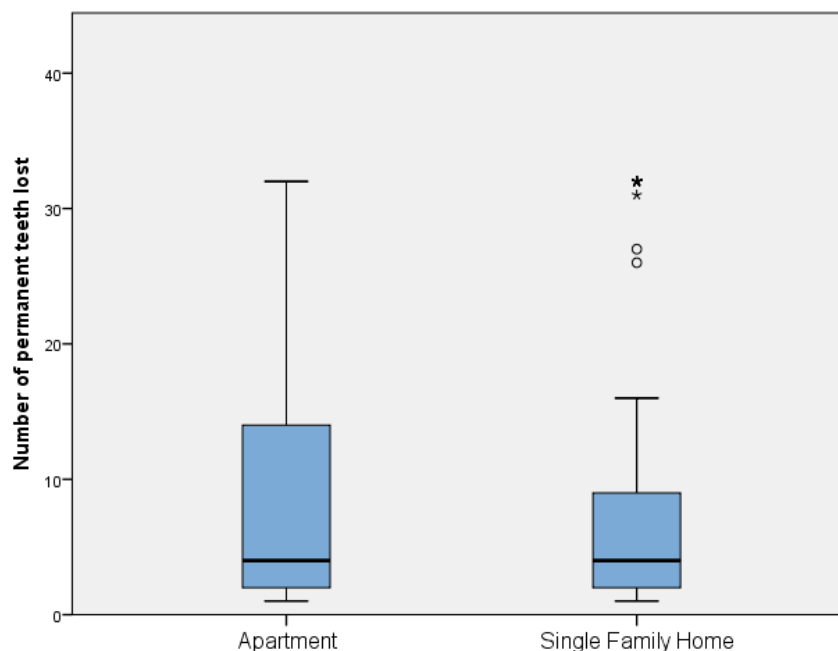
**Fig. 13: Prevalence of Chronic Health Conditions during the Past Five Years by Strata**



**Fig. 14: Distribution for the Number of Permanent Teeth Lost Among Individuals Who Have Lost At Least One Permanent Tooth by Strata**

<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

<sup>2</sup>Florida Department of Health. (2013, September 3). Florida Population Estimates. Retrieved from [www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx](http://www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx)



## F. Maternal and Child Health

The maternal and child population for the study area comprises 41% of all the members living in the households interviewed. This population is comparable to that of Miami-Dade County in 2012 (42%)<sup>2</sup> but larger than that of the State of Florida for the same year (36%)<sup>2</sup>. Approximately one out of five individuals in the study area are women of reproductive age; there are just as many children age 14 years or younger in the study area (Table 7). The maternal population is 20% larger and the child population is 50% larger in apartments than single-family houses.

**Table 7. Maternal and Child Population in the Study Area**

	All Census blocks % N = 1120	Area of Greatest Need % N = 623	Single-Family Homes % N = 852	Apartments % N = 268
Infants <1	1	1	1	1
Children 1-4	6	6	5	7
Children 5-9	8	9	7	10
Children 10-14	7	8	6	10
Women 15-44	21	21	20	24
Others	59	56	62	48

In 11 households, a delivery occurred in the 12 months prior to answering the survey. Among the women who gave birth during the prior year, 5 (44%) were not trying to get pregnant. Among the women that gave birth during the year prior to the survey, all sought prenatal care. Four out of five (82%) pregnant women completed their first prenatal care visit during their first

<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

<sup>2</sup>Florida Department of Health. (2013, September 3). Florida Population Estimates. Retrieved from [www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx](http://www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx)

trimester; however slightly fewer women (77%) reported initiating the first visit as early as they wanted. Medicaid was the main source of payment for prenatal care (45%), followed by personal income (37%).

The median weight of babies born in the whole study area in the year prior to answering the survey was 3,175 grams (IQR=460). Only one low birth weight (LBW) (<2500 grams) baby and one high birth weight (HBW) (>4000 grams) baby was reported. No preterm deliveries were reported. Three out of four (77%) women who gave birth during the year prior to the survey breastfed their babies. It was reported that all babies born in the households interviewed in the year prior to answering the survey had a well-baby checkup.

<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

<sup>2</sup>Florida Department of Health. (2013, September 3). Florida Population Estimates. Retrieved from [www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx](http://www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx)

The interviewers' team assignment locations in the study area are shown in Figure 15.

Personal ascertainties by field interviewers:

**Interviewer:** Naomie Jean (Floater)

- Most of the houses randomly selected were of affluent communities or of upper middle class.
- Some of the houses selected were in gated communities where contact was impossible.
- A high percentage of houses refused to participate.
- Several streets mentioned a speeding issue.
- Several community members surveyed mentioned racial tension specifically the residents that resides in the apartments.
- One main issue that was echoed from the residents is that the community resources or services that were allotted to help the families most in need was taken away from them and were given to the families that can afford the services.
- Another concern that was stated from the residents was that residential firms were buying up the lower income apartment complexes converting them to condos and raising the prices to a point where the lower income residents cannot afford it. As consequently they were forced out of the neighborhood.
- A municipal pool was promise to the South Miami residents over 5 years ago and yet the construction of the pool still has not started.

**Interviewer Team:** Margie/Nerlande

- A 61-year old white man without medical insurance was not concerned about being uninsured because he knows how to take care of himself.
- A 71-year old white woman received out letters but was not comfortable contacting us due to a bad experience with the South Miami hospital. She feels that her mother, who recently passed away, was not provided with appropriate needed care and services. However, after talking with the interviewers the women showed interest in the project and was willing to participate.
- A women rudely refused to participate (and slammed the door in the interviewers' faces) because she worked for UM and UM is in direct competition with FIU.
- A 50-year old white man was recently diagnosed with cancer, but was able to receive treatment due to good healthcare services and insurance.

<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

<sup>2</sup>Florida Department of Health. (2013, September 3). Florida Population Estimates. Retrieved from [www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx](http://www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx)

**Interviewer Team:** Shebahham/Nathalie

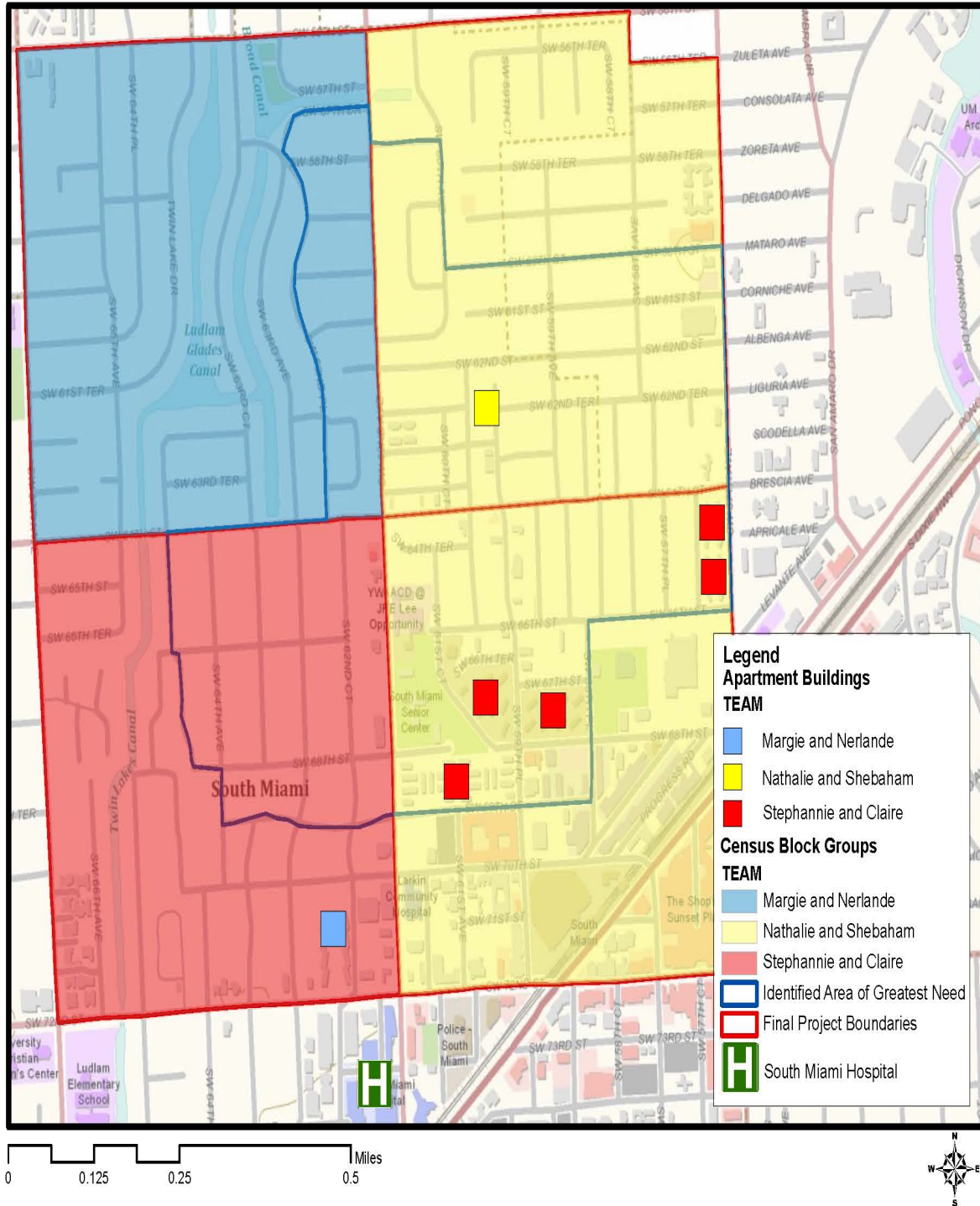
- Some neighborhoods were closely knit. Residents knew their neighbors and their neighbors' schedules and comings and goings.
- There were many retired, elderly residents who were very alert and friendly and who were both physically active and active in the community. A few elderly individuals even reported caring for young children.
- Elderly households were receptive and eager to participate in the survey. Many just wanted someone to talk to. However, the interviewers were approached by the police one day because a resident reported their presence in the area.
- Many people said that they did not receive our letter.
- Many African Americans in this area were disheartened and discouraged about the municipal pool that was promised by city officials, but was never built. They have received no recent mention of the pool. There are neighborhoods in this area with no children and few/no elderly. Language barriers prevent these residents from going to the Rosie Lee Wesley Health Center; employees of the center speak Spanish and barely any English.
- Many households praised Dr. Scott and her clinic. They said that Dr. Scott is helpful and that they are glad that she is in the area. They also said that the clinic is in a great location.
- Some recreational/educational facilities seem to be utilized by certain races/ethnicities. Children in this area do not attend the Miami Dade charter school located across the street from the Gibson-Bethel Community Center (which is on the same lot as Dr. Scott's clinic); the school appears to be only Hispanic. African Americans in this area participate in little league baseball and football teams. Residents of this community go to the community center for their PE. A mixture of blacks and Hispanics attend the after-school program at the community center and the fitness center.
- One household of two females (50 year old and her 83 year old mother) said that they were afraid to leave their house.

<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)

<sup>2</sup>Florida Department of Health. (2013, September 3). Florida Population Estimates. Retrieved from [www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx](http://www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx)

Figure 15. Team Assigned Locations

### South Miami Health Wellness Community Needs Assessment Team Locations



<sup>1</sup>American Community Survey. (2013, September 3). American Fact Finder. Retrieved from [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_11\\_5YR\\_DP02](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02)  
<sup>2</sup>Florida Department of Health. (2013, September 3). Florida Population Estimates. Retrieved from [www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx](http://www.floridacharts.com/FLQUERY/Population/PopulationRpt.aspx)