

2025

Naples Comprehensive Health (NCH) Community Health Needs Assessment



NCH

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Overview of Naples Comprehensive Health (NCH)

Naples Comprehensive Health (NCH) is an independent, nonprofit 501(c) (3) community health care system with multiple facilities throughout Collier County and the surrounding areas. Founded on March 7, 1956, NCH has evolved over the last 69 years, becoming one of the most progressive healthcare systems in the country, embracing new technology and evidence-based medicine. As stated in its name, NCH offers comprehensive care to southwest Florida and our expert physicians and innovative treatments ensure exceptional care tailored to treat every patient. As a nonprofit built for the community, NCH is proud to provide compassionate, high-quality healthcare to fulfill its mission of “Helping Everyone Live a Longer, Happier, and Healthier Life” and its vision to “Be a World-Class Leader of Excellence in Healthcare.”

Key features of NCH include the NCH Baker Hospital (391 beds), the NCH North Naples Hospital (322 beds), the HSS at NCH MSK Center, five emergency departments, five immediate/urgent care locations, the NCH Medical Group (200+ employed physicians), an alliance of over 1,100 community physicians and allied health professionals, multiple GME programs, a state-of-the-art simulation center, and medical facilities located in dozens of sites throughout southwest Florida. NCH is one of the largest employers in Collier County, employing over 4,000 staff members dedicated to improving the quality of life for our patients and their families and friends.

NCH has come a long way since its beginnings in 1956. It has been nationally recognized for its quality and is a key player in a competitive healthcare market. In 2025, NCH was recognized as one of Healthgrades’ America’s 50 Best Hospitals and is one of PRC’s Excellence in Healthcare award winners. NCH has also received ANCC Pathway to Excellence recognition, Joint Commission Gold Seal of Approval for Comprehensive Stroke Center Accreditation, and the AACN Beacon Award for Excellence.

NCH has partnered with leading providers to bring the best comprehensive care to southwest Florida. NCH is proud of the partnerships that help it achieve excellence including Epic, Encompass Health, Ensemble Health Partners, HSS (orthopedics), Nicklaus Children’s Hospital (pediatrics), Northwestern Medicine (oncology), and many others.

Generous philanthropic contributions and volunteer services are the backbone of empowering NCH. NCH’s culture of giving has resulted in millions of contributed dollars and over 50,000 volunteer hours.

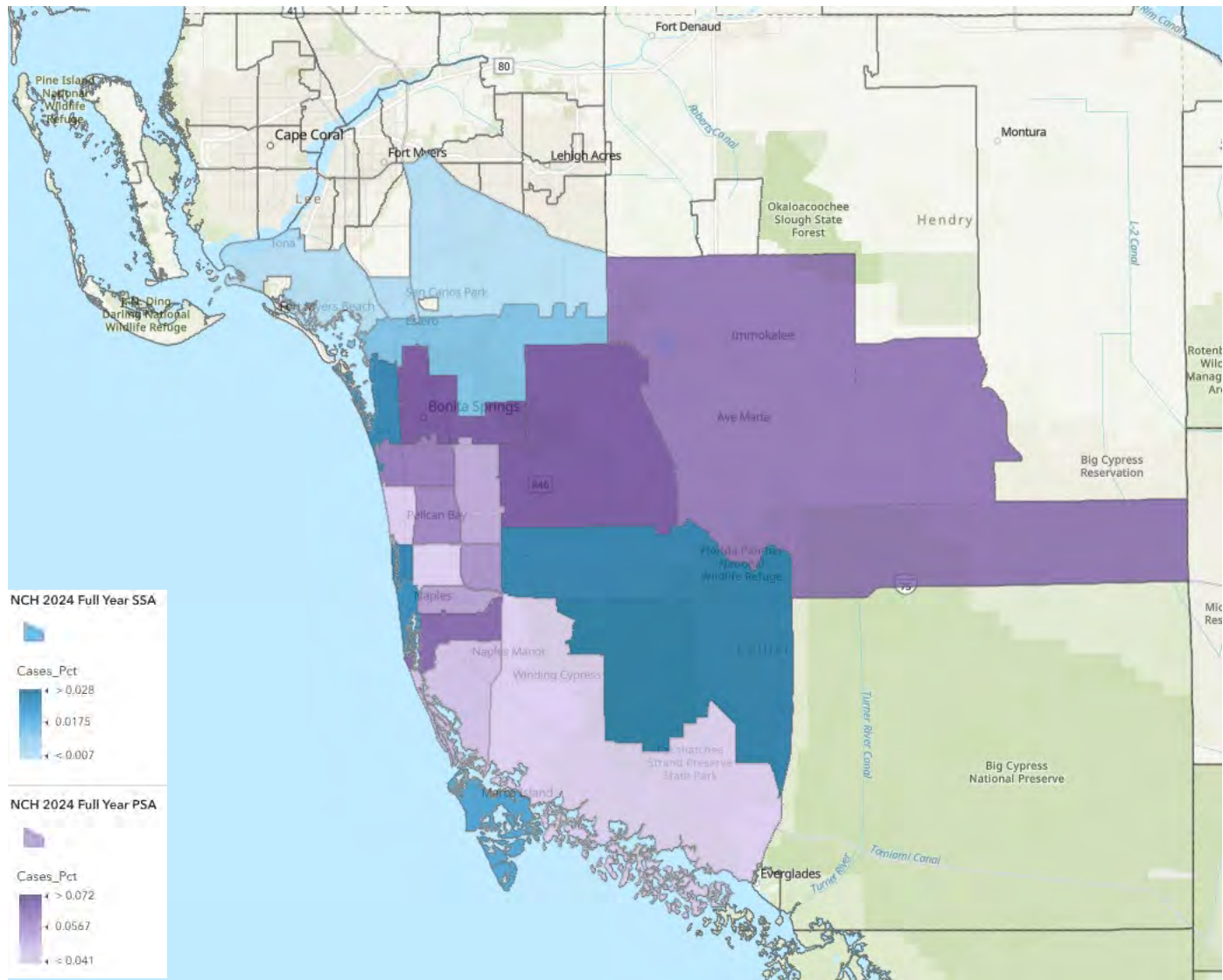
Here is a snapshot of today’s NCH Healthcare System with 2024 statistics:

- Over 44,000 inpatient admissions (including observation) equating to over 151,000 patient days
- 770,000+ outpatient visits
- 120,000+ emergency room visits
- Over 13,900 surgical cases, including 300+ open-heart cases
- Delivered over 3,600 babies

NCH Community and Competitive Market

NCH primarily provides healthcare services for the Collier County community, however, it does attract patients from outside of Collier County. The NCH Primary Service Area, or PSA, (defined as the ZIP Codes supplying 75% of the total case volume for NCH Baker and North Hospitals) is noted in purple on the map below. The NCH Secondary Service Area (SSA) (defined as the ZIP Codes supplying an additional 15% of the total case volume for NCH Baker and North Hospitals to equal 90%) is shown in blue.

2024 (CY) NCH PSA and SSA Map



Source: IntelliMed, 2024 data.

2021-2024 Staffed Beds and Inpatient Discharge Information

The following table displays staffed bed information and the inpatient market share for NCH and other hospital systems with which NCH competes in its primary service area.

		Inpatient Discharge Primary Service Area			
	Staffed Beds	2021	2022	2023	2024
	NCH				
NCH Baker	391	10,974	11,028	11,576	11,944
NCH North Naples	322	12,340	12,622	13,960	14,586
NCH TOTAL	713	23,314	23,650	25,526	26,530
	Physicians Regional (PRMC)				
Physician Regional Medical Center North	50	N/A	120	518	618
Physicians Regional Medical Center - Collier	130	4,538	4,418	4,297	4,753
Physicians Regional Medical Center - Pine Ridge	177	7,012	7,034	6,065	7,757
PRMC TOTAL	357	11,550	11,572	11,780	13,128
	Lee Health				
Cape Coral Hospital	303	67	55	86	75
Gulf Coast Medical Center	699	989	1,434	1,618	1,887
Healthpark Medical Center	326	1,513	1,667	1,671	1,931
Lee Memorial Hospital	336	1,011	811	816	853
LEE HEALTH TOTAL	1,664	3,580	3,967	4,191	4,746
Grand Total		38,444	39,189	41,497	44,404
NCH MARKET SHARE		60.8%	60.3%	61.5%	59.7%

SOURCE: IntelliMed, 2021-2024 data.

The following table displays staffed bed information and the inpatient market share for NCH and other hospital systems with which NCH competes in its secondary service area.

		Inpatient Discharge Secondary Service Area			
	Staffed Beds	2021	2022	2023	2024
	NCH				
NCH Baker	391	3,042	3,020	3,151	3,268
NCH North Naples	322	2,127	2,173	2,391	2,408
NCH TOTAL	713	5,169	5,193	5,542	5,676
	Physicians Regional (PRMC)				
Physician Regional Medical Center North	50	N/A	36	115	164
Physicians Regional Medical Center - Collier	130	913	892	848	998
Physicians Regional Medical Center - Pine Ridge	177	1,313	1,306	1,144	1,300
PRMC TOTAL	357	2,226	2,234	2,107	2,462
	Lee Health				
Cape Coral Hospital	303	190	261	235	283
Gulf Coast Medical Center	699	4,102	4,616	5,121	5,899
Healthpark Medical Center	326	5,179	4,947	5,106	5,856
Lee Memorial Hospital	336	1,705	1,644	1,768	1,872
LEE HEALTH TOTAL	1,664	11,176	11,468	12,230	13,910
Grand Total		18,571	18,895	19,879	22,048
NCH MARKET SHARE		27.8%	27.5%	27.9%	25.7%

SOURCE: IntelliMed, 2021-2024 data.

Detailed population statistics for Collier County are found in Appendices D-F, and for Lee County in Appendices G-I. Information presented includes age, race, ethnicity, place of birth, language, education, workforce, income, and various other statistics.

NCH Community Programs

NCH provides many health-enhancing educational programs and resources to the SWFL community. Our leadership team is actively involved and participates in many community-related organizations and groups that work to fulfill unmet needs within Collier County. The total value of 2024 activities is over **\$2.3 million**.

The current programs and resources provided to the community for 2024 include the following:

- **Health Seminars, Fairs & Testing** [Value: \$206,505]

Free health seminars, community health fairs, and complimentary or reduced-price screening tests were offered to the public at the NCH Telford Education Center, the von Arx Diabetes Center, and various community outreach facilities.

- **Support of the Neighborhood Health Clinic** [Value: \$1,799,036]

The vision of a retiring NCH medical staff member and his wife came to fruition in our community several years ago. Together, they helped rally the community to establish a clinic that provides care to the "working poor" of Collier County. NCH helped the Neighborhood Health Clinic (NHC) get on its feet by first providing clinic space and laboratory services at no charge, and then offering expertise in areas such as information technology, biomedical technology, pharmacy, and many other fields. If a patient's clinical needs exceed the capabilities of NHC, the clinic ensures those services are provided through other means.

- **St. Matthew's House** [NCH Facilities Value: \$2,168,698; Case Manager's Value: \$97,250]

NCH has partnered with physicians in this community initiative to provide inpatient and outpatient services at no cost to patients who reside at St. Matthew's House. In addition, NCH provides an on-site case manager at St. Matthew's House who supports the coordination of care for clients.

- **P.L.A.N. - Physician Led Access Network of Collier County** [Value: \$252,082]

NCH has partnered with local physicians in this community initiative to provide medical services to individuals experiencing poverty, offering both inpatient and outpatient care.

- **Heart Programs** [Value: \$54,317]

A healthy heart is a focus at NCH. The annual Heart Walk is an exciting event in which teams and individuals are sponsored to walk through Old Naples to support the cause of fighting heart disease. NCH has been a long-time supporter of the American Heart Association.

- **Cancer Survival** [Value: \$69,686]

Another important initiative for NCH is assisting patients in their cancer survival. NCH is a proud sponsor of the Garden of Hope & Courage.

- **Support of Patient Families** [Value: \$266,950]

A medical event can affect the entire family. For families of brain injury and stroke patients, our team provides monthly guidance through support groups free of charge. We support infants and children through support for the March of Dimes, and assist patients who can't afford expenses such as transportation, personal items, and home care.

- Dr. John Briggs Wellness Center** *[Value: \$36,120]*
 Several fitness services are provided through the Dr. John Briggs Wellness Center at a discount or free of charge. When a financial need exists, community members are provided with complimentary memberships.
- Sharing Our Space** *[Value: \$13,800]*
 When space is available, NCH provides space at no cost to needy, not-for-profit organizations. The Telford Education Center is available to not-for-profit healthcare-related groups such as "Mended Hearts", "Bosom Buddies", and those that provide support for stroke patients. Residents of Marco benefited from the use of our facility for community education and the hospice support group.
- Clinical Schools** *[Value: \$183,839]*
 The clinical nursing schools of FGCU and Florida SouthWestern State College, along with others, provide clinical education at the NCH campuses. NCH collaborates with universities to provide pharmacy and laboratory preceptorships to students. NCH also provides on-site classroom space for clinical education. Nursing and radiology scholarships are generously funded at both Florida Southwestern State College, FGCU, and other Florida universities.
- Project SEARCH** *[Value: Priceless]*
 Working with our partners at Collier County Public Schools, NCH offers young adults with developmental disabilities the opportunity to learn job skills. The program has been very successful for both the young adults and those who work with them!
- Sharing our expertise** *[Value: \$21,310]*
 Members of NCH management serve on community boards in various capacities. We also provide expertise on other community issues, such as workforce housing and workforce development.
- Judith and Marvin Herb Family Simulation Center** *[Value: \$205,800]*
 The Herb Simulation Center provides standardized and customized scenarios to improve patient safety and outcomes, preparing the next generation of physicians, medical residents, nurses, therapists, EMS personnel, and other clinical staff, which will collectively enhance individual and community health. Supervised instructions are provided in situations so medical professionals can master their skills without putting patients at risk.
- Our Employees Give** *[Value: \$unknown]*
 The spirit of caring goes beyond our doors. Not only do many NCH employees give to our needy coworker program, "Partners in Caring", but NCH employees annually hold a Christmas toy drive in which hundreds of toys are distributed to needy children. In late summer, a school supply drive is conducted to help children start the school year off right. NCH employees are also pacesetters for the United Way in their annual giving campaign.

Approach to Assessing Community Health Needs

In efforts to improve the health of the residents of Collier County, a collaborative partnership was formed between NCH, the Florida Department of Health in Collier County (DOH-Collier), the Healthcare Network (HN), and the Health Planning Council of Southwest Florida, Inc. (HPC), to conduct a needs assessment for use of the mentioned partners and other community partners in Collier County. The collaborative held monthly meetings from January 2025 to August 2025 to facilitate the planning, development, and implementation of this health needs assessment. While the collaborative partnership focused primarily on Collier County, NCH also included data from Lee County in its review since NCH patients also reside in Lee County.

HPC reviewed numerous data sources and received feedback from the collaborative, as well as from community members through surveys, questionnaires, interviews with community leaders, and a focus group. The attached needs assessment for Collier and Lee counties [Refer to Appendices D-J] comprises demographic, socioeconomic, and health status information that will be used to identify areas where targeted interventions and policy changes are most likely to have a significant impact.

After HPC completed the Collier County and Lee County needs assessments, the NCH executive team reviewed the report and agreed to implement the strategies listed in Appendix A: 2025 Implementation Plan. This NCH CHNA report, the 2025 NCH implementation plan, and the HPC Collier County and Lee County reports, were reviewed by the NCH Board of Trustees and approved at the September 24, 2025, board meeting.

Summary of Key NCH Initiatives (2022-2025)

The 2022 NCH Community Health Needs Assessment selected the following four categories as focus areas: (1) Access to Care, (2) Chronic Disease: Heart & Stroke, (3) Health of Older Adults, and (4) Pediatrics' and Women's Health. The table below outlines the initiatives NCH assessed or completed in response to the 2022 CHNA.

Community Benefit Category	2022 Program Name	Assessments & Completed Tactics
Access to Care	Upgrade telephonic services	<ul style="list-style-type: none"> Costa Rica Access Center opened in September 2024. 2025 monthly call volumes are between 35,000-42,000. More practices will be moved to the Access Center including cardiology, infectious disease, palliative care, outpatient rehab, and wound care.
	Access Clinic	<ul style="list-style-type: none"> The Access Clinic opened in November 2022. 2024 completed visits were 3,237; on track to exceed 2024 visit count in 2025.
	Develop virtual care through MyChart	<ul style="list-style-type: none"> MyChart enrollment rates have increased to 55%. Direct scheduling was implemented in June 2022. Open scheduling has been set up for over 20 providers. Orthopedics has developed care companions for some orthopedic procedures and Nina for patient navigation support.
	Expand access to healthcare in NE Naples	<ul style="list-style-type: none"> Both the Executive Park and Ave Maria Immediate Care opened between 2022 and 2025. Ave Immediate Care has averaged around 280 visits per month since opening.
Chronic Disease (Heart & Stroke)	Address patient demand shift from IP to OP	2022 – 2024 NCH cardiology volumes (as reported by AHCA): <ul style="list-style-type: none"> Outpatient – 84.6% increase (1,934 visits to 3,571) Inpatient – 25.7% increase (4,939 cases to 6,207)
	Add cardiology services to Marco Island	Cardiology Services were added 2 days per month at Marco Island.
	Improve patient outcomes through education	Per the Society of Thoracic Surgery, NCH received between 2 and 3 stars for all quality ratings.
	Expand clinical trials programs	In 2024, RHI had over 28 clinical trials and over 280 patients were enrolled in cardiovascular clinical trials.
Health of Older Adults	Provide access to geriatric medicine	NCH added additional internal medicine providers in the group that can accommodate geriatric patients.
	Achieve geriatric emergency department accreditation (GEDA)	Achieved – NCH is maintaining GEDA.
Pediatrics' and Women's Health	Evaluate upgrading NICU Level 2 to NICU Level 3	The evaluation and initial planning for a more integrated partnership with a pediatric partner are underway. Preliminary plans include NICU upgrades.
	Enhance Care Through Obstetric ED – OB Hospitalists	24/7 obstetric hospitalist coverage for Labor & Delivery was implemented to increase patient safety.
	Increase Maternal Fetal Medicine Services	<ul style="list-style-type: none"> MFM clinic days are scheduled Monday through Friday. NCH did not expand to 24/7 MD MFM coverage since it was deemed that on call services for emergencies would meet patient needs.

2025 CHNA Findings

Executive Summary

In general, both Collier and Lee Counties have been growing and aging therefore increasing the need for healthcare services across both counties. Since 2014, Collier County's population increased by 18% and Lee County's population increased by 25%. Since 2013, Collier County's median age increased by 5.5 years and Lee County's median age increased by 3.1 years.

Both counties also have similar health needs. Cancer and heart disease were the top 2 leading causes of death in both counties. Access to specialty care and access to primary care were the top 2 most important health concerns.

Differences in the counties include substantially higher income levels, lower poverty rates, and different payor mixes in Collier County versus Lee County. Collier County's median household income is much higher than Lee County's (\$86,173 versus \$73,099). Collier County has a lower poverty rate than Lee (10.5% versus 12.1%). Medicare was the primary payor source in Collier County while private insurance was the most common payor source in Lee County.

This report also looks at Marco Island, a subset of Collier County. Relative to the rest of Collier County, Marco Island has an older population (average age of 67.7 years), with Medicare as its primary source of healthcare insurance. Marco Island's median household income is significantly higher than Collier County (\$104,105 vs. \$86,173). Marco Island shares the same health concerns as the rest of Collier and Lee counties, noting the need for access to specialty care and access to primary care.

Collier County

Population Highlights

- Collier County has a population of over 399,587 (2023) and is in southwest Florida. Physically, it is the second largest county in Florida after Palm Beach County.
- Between 2014 and 2023, the resident population of Collier County grew significantly increasing by over 18%.
- Collier County's population is projected to increase by another 99,417 by 2050.
- In 2020, the three communities with the highest population were North Naples, Urban Estates, and Rural Estates.
- Collier County draws a relatively large number of seasonal residents, with the peak season population increasing by an estimated 20% over the permanent population.
- The median age in Collier County increased by 5.5 years between 2013 and 2023, reaching 53.1 in 2023.
- Collier County is becoming more diverse. Between 2003 and 2023, the black and other populations grew more quickly than the white population in Collier County.
- The Hispanic population in Collier County grew from 25.5% in 2009 to 29% in 2023.
- In 2023, over 26% of the total Collier County population was foreign-born.

- Collier County has a higher percentage of the population that speaks English less than very well compared to Florida.
- In 2023, of households that spoke languages other than English, 71% spoke Spanish.

Drivers of Health Highlights

- In 2023, 44% of Collier County students were deemed ready when they entered kindergarten, which is lower than the state of Florida (51%).
- Collier County students passed the Florida Standards English Language Arts Assessment (FSA) at higher rates than the state average (60% Collier, 55% Florida) in 2024.
- Between 2013 and 2023, Collier County consistently had a higher high school graduation rate than the state average (91.5% Collier, 88.0% Florida).
- The median household income in Collier County for 2023 is significantly higher when compared to the Florida average (\$86,173 Collier, \$71,711 Florida).
- When compared to Florida and the United States, Collier County has consistently had a lower percentage of people living in poverty.
- In 2023, 10% of Collier County households were considered in poverty, and an additional 33% were considered below the ALICE threshold from the United Way indicating that they were financially burdened.
- In Immokalee, 74% of households were below the ALICE threshold in 2023.
- The median value of housing is significantly higher in Collier County than the state average (\$486,800 vs. \$325,000).
- Collier County has a higher median gross rent when compared to Florida and the United States in 2023.
- In 2023, 28.1% of owner-occupied households in Collier County were housing cost burdened, paying more than 30% of their income for housing.
- Since 2020, the percentage of renter households paying more than 30% of their income in rent in Collier County has been higher than the state average (61.8% Collier vs. 58.7% Florida, 2023).

Settings and Systems Highlights

- Collier County has more licensed providers than the state average in every category except for licensed pediatricians and licensed behavioral/mental health professionals.
- The county has significantly fewer nursing home beds per 100,000 residents when compared to the state of Florida (206 vs. 366.3).
- Medicaid enrollment rates in Collier County are lower than the state rates.
- Collier County consistently has a higher percentage of people under the age of 65 who are uninsured.
- In 2023, 22.9% of the core working population aged 19-64 in Collier County were without health insurance, compared to 15.5% in Florida.
- The Hispanic or Latino population in Collier County had the highest percentage of those who are uninsured, nearly double the state average (30.0% Collier, 15.6% Florida, 2023).
- In 2022, 44,430 people in Collier County were food insecure.

- The average meal cost in Collier County is \$4.78, which is \$0.65 cents higher than the Florida average.
- Collier County has a smaller percentage of the population living near a park or off-street trail system compared to the Florida average.
- Nearly 80% of Collier County's land area is in conservation.
- Collier County workers, on average, have a lower travel time to work than the Florida average.
- Collier County has a lower-than-average rate for all crimes and domestic violence when compared to the State of Florida as a whole.

Health Behaviors Highlights

- In 2019, about 41% of adults in Collier County were considered overweight, which is higher than the Florida average (41% Collier vs. 38% Florida).
- In 2019, about 23% of adults in Collier County were considered obese, which was lower than the Florida average (23% Collier vs. 27% Florida).
- In 2019, about 12% of adults in Collier County were current smokers, lower than the Florida average (12% Collier vs. 15% Florida).
- The percentage of high school students in Collier County who reported consuming alcohol in the past 30 days has decreased significantly over the past 10 years (29.4% in 2016 to 17.5% in 2024).
- The percentage of high school students in Collier County who reported cigarette use in the past 30 days has significantly decreased in the past decade (4.8% in 2016, 1.1% in 2024).
- The percentage of middle and high school students in Collier County who reported vaping nicotine in the past 30 days decreased between 2020 and 2024 (9.7% in 2020, 6.6% in 2024).
- From 2016 to 2024, the percentage of middle and high school students in Collier County who reported using marijuana or hashish decreased significantly (9.7% in 2016, 3.9% in 2024).
- In Collier County, drug poisoning was responsible for fatal injuries at a higher age-adjusted rate than all other causes.
- There was a significant increase in the death rate from unintentional injuries in Collier County over the past 10 years (38.0 in 2014, 70.1 in 2023).
- In 2023, Collier County's unintentional injury death rate was higher than the Florida average (70.1 Collier, 63.9 Florida).
- Deaths from unintentional falls are most common in the population aged 65 or older.
- In Collier County, the rate of death from falls for the population aged 65 or older is significantly higher than the state average (131.2 Collier, 81.9 Florida, 2023).
- The rate of motor vehicle crashes in Collier County has been increasing since a low in 2020 and is nearing the state average.
- Compared to other Florida counties for the years 2021-2023, Collier County has a higher rate for births to mothers ages 15-19 than the state average (16.9 Collier, 13.2 Florida).
- Collier County is in the worst quartile for the state for births with adequate prenatal care (Kotelchuck index [%], with a rate of 58.1% compared to 63.3% for Florida).

- Fewer women in Collier County breastfeed compared to the state average, and that percentage has been falling (71.5% Collier, 85.8% Florida, 2021-2023).
- The maternal death rate for Collier County is significantly lower than the state rate (9.9 Collier, 24.2 Florida, 2021-2023).
- In the past decade, Collier County consistently had fewer people visiting the emergency room for dental conditions than the Florida average.
- The percentage of high school students in Collier County who had not visited a dentist's office in the past 12 months increased between 2010 and 2022 (21.0% 2010, 28.6% 2022).

Health Conditions Highlights

- Collier County consistently exceeds the Florida average for life expectancy, and in 2021-23, had the highest life expectancy out of all 67 counties in Florida.
- However, like the rest of the state, Collier County saw a decline in life expectancy beginning in 2019-21.
- Cancer and heart disease are the two most common causes of death in Collier County.
- Unintentional injury and cancer had the highest years of potential life lost in Collier County, indicating these causes disproportionately affect younger people.
- While Collier County has experienced an increase in new cases of cancer, its cancer death rate is significantly lower than the Florida average.
- Breast cancer incidence has increased significantly, and the rate for Collier County is now higher than the state average.
- The death rate from heart disease in Collier County was the lowest in 2023 in the past ten years and is significantly lower than the Florida average.
- There has been a significant increase in stroke deaths in the county since 2014, although the rate began to fall after 2020.
- Alzheimer's disease was the sixth leading cause of death in the population 65 years and older in Collier County in 2023.
- The percentage of the population over 65 with Alzheimer's Disease is higher in Collier County than the state average, but the death rate is lower.
- Chlamydia is the most common sexually transmitted infection (STI) in Collier County, but overall, Collier County has had a consistently lower rate of bacterial STDs compared to the state.
- The rates of HIV diagnoses in Collier County have increased from 2014 through 2023, with heterosexual contact now the most common mode of exposure.

FQHC Data Highlights

- Healthcare Network (HN) is the Federally Qualified Health Center (FQHC) in Collier County.
- HN has 12 locations within Collier County: three in Immokalee and nine in the Naples area.
- HN serves an estimated total of 50,278 people in Collier County.
- About 61% of patients served by HN are children under 18 years of age, which is significantly higher than regional benchmarks and the state average.

- Approximately 85% of patients served by HN identify as members of racial and/or ethnic minority groups, higher than all regional benchmarks and Florida.
- Over half (53.7%) of HN's patients are best served in a language other than English, which is significantly higher than regional benchmarks and the state.
- Nearly 90% of HN's patients are at or below 200% of the federal poverty guideline.
- About 15% of the patients served by HN are uninsured, which is significantly lower than the state's average.
- About 24% of HN patients identified as having hypertension, slightly less than the Florida average.
- Approximately 44% of women accessing prenatal care from HN did so within the first trimester, lower than the state average.
- HN performs better than the state average in screening for cervical cancer, breast cancer, body mass index, colorectal cancer, and HIV.
- 14% of HN patients receive mental health services, significantly higher than the state average and regional benchmarks.

Lee County

Population Highlights

- Lee County's population increased by 167,063, or more than 25 percent, from 656,466 in 2014 to a total of 823,529 by 2023.
- The median age increased in Lee County by 3.1 years between 2013 and 2023 (46 to 49.1).
- While Hispanics constituted 18 percent of the population in Lee in 2009, by 2023 the proportion increased to more than 34 percent.
- Lee County consistently has a lower percentage of population that speaks English less than very well when compared to Florida (2022, 10.0% Lee, 11.9% Florida).
- In 2023, of households that speak languages other than English, 76.1 percent spoke Spanish.

Drivers of Health Highlights

- In 2023, 49 percent of Lee County students were deemed ready when they entered kindergarten, which is lower than the state of Florida (51%).
- In 2024, Lee County students passed the Florida Standards English Language Arts Assessment (FSA) at lower rates than the state average (48% Lee, 55% Florida).
- Between 2013 and 2023, Lee County consistently had a slightly lower high school graduation rate than the state average (85.1% Lee, 88.0% Florida, 2023).
- Between 2015 and 2023, the percentage of the population in Lee County over the age of 25 who did not have at least a high school diploma declined from 13 percent to 9.1 percent.
- 13.7 percent of members of the public in Lee County have a disability; this is slightly higher than the Florida average of 13.5 percent.
- The median household income in Lee County for 2023 is slightly higher than the Florida average (\$73,099 vs. \$71,711).

- In 2023, 12.1 percent of Lee County residents lived in poverty, compared to 12.4 percent for the state.
- In 2023, Lee County had a slightly higher percentage of children living in poverty than the state average (17.1% Lee, 16.9% Florida). The percentage of children living in poverty in Lee County decreased significantly in the ten years between 2014 and 2023 (27.0% 2014, 17.1% 2023).
- In 2023, 25.9 percent of owner-occupied households in Lee County were paying more than 30 percent of their household income for housing, compared to 26.1 percent for the state of Florida.
- The percentage of households that rent and pay more than 30 percent of their income in rent increased significantly between 2017 and 2023 (52% 2017, 59% 2023).

Settings and Systems Highlights

- Lee County has been designated as a Medically Underserved Area (MUA) for its low income and migrant farm worker populations.
- Between 2014 and 2023, Lee County consistently had fewer hospital beds per 100,000 people than the state average (265.7 Lee, 304.5 Florida, 2023).
- Throughout the past decade, Lee County had significantly fewer nursing home beds per population than the average for the State of Florida (257.7 Lee, 366.3 Florida, 2023).
- It is estimated that in 2022, 17.1 percent of Lee County residents under the age of 65 were without insurance (Florida average was 13.9%).
- In 2023, for the population under 19 years of age in Lee County, 9.2 percent were uninsured compared with 7.5 percent in Florida.
- Lee County Residents made 243,981 visits to hospitals in 2023 that did not result in inpatient admission. Private insurance was the number one payer source, representing 29.1 percent of the visits; Medicaid was second with 28.6 percent.
- Lee County residents consistently have fewer emergency department visits per 100,000 than the state average. The rates follow similar trends to those of the state.
- After several years of falling, the food insecurity rate for Lee County and Florida increased between 2021 and 2022. The rate for Lee County is similar to the state rate (12.7% Lee, 13.2% Florida, 2022).
- Despite having a higher percentage of workers who work from home, Lee County workers have a slightly higher average travel time to work than the state average (29.6 Lee, 28.5 Florida, 2023).
- Lee County has a lower-than-average rate for all crimes and domestic violence when compared to the State of Florida as a whole. The three most common categories of crimes in Lee County are domestic violence, larceny, and burglary.

Health Behaviors Highlights

- The percentage of high school students in Lee County who reported consuming alcohol in the past 30 days has decreased significantly over the past 10 years (23.5% 2016 to 15.5% 2022).
- The percentage of high school students in Lee County who reported cigarette use in the past 30 days has significantly decreased in the past decade (5.0% 2016, 0.4% 2022).

- The percentage of middle and high school students in Lee County who reported vaping nicotine in the past 30 days decreased between 2020 and 2022 (12.0% 2020, 8.6% 2022). It is also below the state average.
- From 2016 to 2022, the percentage of middle and high school students in Lee County who reported using marijuana or hashish decreased (11.8% in 2016, 8.5% 2022).
- More people in Lee County died from unintentional injuries than from any other fatal injuries in 2020. The 85 and older age group had the highest number of unintentional injury fatalities.
- The top three fatal injury mechanisms for Lee County in 2023 were poisonings, falls, and firearms. Poisoning includes drug overdoses.
- The leading cause of fatal injury in Lee County varies by age. For those who are younger, suffocation or motor vehicle traffic is most likely to cause a fatal injury; for those who are 25-64, drug poisoning or an overdose is the most frequent cause of fatal injury. For Lee County residents who are over the age of 65, falls are the leading cause of fatal injuries.
- There was a significant increase in the death rate from unintentional injuries from 2014 to 2022 (40.7 2014, 85.2 2022); however, there was a large decline from 2022 to 2023 (85.2 2022, 66.7 2023).
- Prior to 2018, Lee County had a significantly higher rate of deaths from unintentional falls than the state average. Since 2018, the rate has been similar to the state average (12.1 Lee, 11.8 Florida, 2023).
- Lee County consistently had a lower rate of motor vehicle crashes compared to the Florida average between 2014 and 2020. However, since 2021, the rate for Lee County has risen and has been higher than the state average (1876.3 Lee, 1742 Florida, 2023).
- Compared to other Florida counties for the years 2021-2023, Lee County has a higher rate for births to mothers ages 15-19 than the state average (16.0 Lee, 13.2 Florida); however, that rate has been improving.
- Lee County is in the worst quartile for the state for births with 1st trimester prenatal care (with a rate of 66.0% compared to 71.7% for Florida). The trends for prenatal care in Lee County have been negative, with fewer receiving early or adequate prenatal care.
- The maternal death rate for Lee County is lower than the state rate (17.8 Lee, 24.2 Florida, 2021-2023); however, the trend has been negative.
- The infant mortality rate in Lee County is similar to the state average (6.2 Lee, 6.0 Florida, 2023).
- From 2014 to 2023, there was a decrease in preventable emergency room visits from dental conditions in Lee County (864.4 2019, 512.8 2023).

Health Conditions Highlights

- Between 2017 and 2023, Lee County consistently exceeded the Florida average for life expectancy (80.7 Lee, 78.6 Florida, 2023).
- Cancer, heart disease, and unintentional injury are the top three leading causes of death in 2023 for Lee County.
- From 2012 to 2021, Lee County experienced an increase in the rate of new cases of cancer.
- Since 2014, in Lee County, the overall cancer death rate has decreased.

- The most common types of cancer in Lee County were female breast and prostate cancer. However, lung cancer was the deadliest among those diagnosed with cancer.
- Over the past 10 years the overall death rate from heart disease in Lee County has decreased. Lee County's heart disease death rate is less than the Florida average from (105.2 Lee, 135.6 Florida, 2023).
- Lee County has seen a slight increase in the death rate from strokes between 2014 and 2023; however, there was a decrease from 2022 to 2023. Lee County has a lower death rate from stroke than the state average (26.3 Lee, 44.6 Florida, 2023).
- The death rate from Alzheimer's Disease in Lee County is slightly lower than the state average (13.2 Lee, 15.6 Florida, 2023). It has fallen since 2019 when it hit a high of 18.2 in Lee County.
- Lee County has a lower percentage of seniors with a disability status in every category when compared to the Florida average.
- Over the past decade, Lee County generally had a similar or higher rate of suicide than the average for the state, however, in 2023, the rate for Lee County was lower than the state average (13.2 Lee, 14.1 Florida).
- Bacterial STDs in both Lee County and Florida increased between 2014 and 2023. The rate of bacterial STDs for Lee County is lower than the state average (583.1 Lee, 788.2 Florida, 2023).

Collier County Focus Area: Marco Island

Marco Island is an incorporated city located in southwestern Collier County. The small unincorporated community of Goodland is adjacent to it to the east. Marco Island is somewhat isolated from the rest of Collier County. Access to the island is via two causeways, which have profound implications for disaster management and emergency transportation. A wide section of protected land is on the shoreline opposite Marco Island.

It is part of the NCH Secondary Service Area. NCH operates a facility on Marco Island providing urgent care, outpatient rehabilitation, family medicine, and internal medicine services. The nearest hospital is Physicians Regional, located on Collier Boulevard. NCH Baker Hospital is a 35-minute drive from the Marco Island city center.

It has an estimated population of 15,998, which is 4.1% of Collier County's total. The population is significantly older than Collier County's, with a median age of 67.7 compared to 53.1 for Collier County. This older population results in a higher dependence on Medicare as the primary source of healthcare insurance.

Marco Island experiences a considerable influx of winter season visitors ("snowbirds"). 50.2% of housing units on Marco Island are "for seasonal, recreational, or occasional use" vs 25.6% of Collier County housing units.

Median household income is significantly higher than Collier County (\$104,105 vs. \$86,173), as is the mean household income (\$179,104 vs. \$140,361). Per capita income is 62% higher than in Collier County (\$97,179 vs \$59,973). (The preceding demographic and housing data are from the US Census Bureau, ACS 2019-2023 5-Year Estimates.)

While Marco Island residents have a slightly more positive perception of their community's general health (average rating 2.7) than Collier County overall (2.4), their perception of healthcare quality is slightly lower (average rating 2.1) than the county average (2.3). Regarding specific health concerns, both areas prioritize access to specialty and primary care, as well as addressing a shortage of doctors. However, Marco Island residents are more concerned about senior care, while mental health conditions are a higher concern for the rest of Collier County. Access to appointments is a top barrier to healthcare for both. However, cost-related barriers are a more pronounced issue for Collier County overall, while the number of doctors is a higher concern for Marco Island. Environmental concerns also differ, with Marco Island residents showing higher concern for flooding and water pollution.

When considering ways to improve health, both communities seek more doctors, affordable housing, and mental/behavioral health services, but the exact prioritization varies. For detailed Marco Island healthcare findings, reference Attachment I.

Response to Findings

Upon review of the findings of the (CHNA) and based on the mission, vision, and core values of the NCH Healthcare System, the system will focus on the following three priorities:

- Access to Care
- Chronic Disease
- Health of Older Adults

Unaddressed Identified Needs

Although several community needs were identified, NCH must focus on our existing clinical strengths and infrastructure, where we can maximize our resources to benefit the most significant number of people in the community. NCH will continue to evaluate the unaddressed identified needs and pursue action when and where resources allow.

Also, priorities such as mental health and alcohol and drug use are addressed by other local organizations such as NAMI Collier County, David Lawrence Centers for Behavioral Health, and Healthcare Network.

Community Benefit Plan

NCH is committed to promoting existing and potential new. This report, the 2025 Implementation Strategy (**Appendix A**) and all other attachments will be presented for approval at the September 24, 2025 NCH Board of Trustees Meeting.

Attachment A: 2025 Implementation Plan

Community Health Needs Assessment (CHNA)

Implementation Strategy

NCH Healthcare System

350 Seventh Street North

Naples, Florida 34102

September 24, 2025

Contact Person: Mara Hammond, Chief Impact Officer

Date of Written Plan: September 9, 2025

Date Written Plan Was Adopted by Organization's Authorized Governing Body:

- Board of Trustees of the NCH Healthcare System on September 24, 2025

Date Written Plan Was Required To Be Adopted: September 30, 2025

Authorized Governing Body that Adopted the Written Plan: Board of Trustees of the NCH Healthcare System

Was Written Plan Adopted by Authorizing Governing Body by End of Tax Year in Which CHNA was Made Available to the Public? Yes

Date Facility's Prior Written Plan Was Adopted: September 30, 2022

Name and EIN of Hospital Organization Operating Hospital Facility:

- NCH Healthcare System EIN number is 59-0694358
- Marco Island Hospital, Inc. EIN number is 59-2315435

Address of Hospital Organization: 350 Seventh Street North, Naples, Florida 34102

I. Purpose of Implementation Strategy

This Implementation Strategy has been prepared in order to comply with the federal tax law requirements set forth in Internal Revenue Code section 501[®] requiring hospital facilities owned and operated by an organization described in Code section 501(c)(3) to conduct a community health needs assessment at least once every three years, and adopt an implementation strategy to meet the community health needs identified through the community health needs assessment (Section 501(r)(3). This Implementation Strategy is intended to satisfy each of the applicable requirements set forth in proposed regulations.

II. Joint Implementation Strategy

As part of an integrated healthcare system, the CHNA for Naples Community Hospital and Marco Island Hospital was prepared jointly. As noted previously, NCH also collaborated with the Florida Department of Health in Collier County (DOH-Collier), the Healthcare Network (HN), and the Health Planning Council of Southwest Florida, Inc. (HPC) to complete the CHNA.

III. List of Community Health Needs Identified in Written Report

The list of community health needs identified in the report (for both Collier County and Lee County) are primarily access related and include access to affordable healthcare services (including the need for more doctors and scheduling barriers), access to transportation to health facilities, and limited access to healthcare services due to financial constraints. Both counties also cite the topics of chronic disease, and the health of older adults as needed focus areas.

IV. Health Needs Planned to be Addressed by the Facility

Select members of the NCH Executive Team and staff attended monthly meetings with the Florida Department of Health in Collier County (DOH-Collier), the Healthcare Network (HN), and the Health Planning Council of Southwest Florida, Inc. (HPC), during the development of the CHNA and the results of these meetings were reviewed with the NCH Executive Team. Upon completion of the (CHNA), the Executive Team met to prioritize community healthcare needs that are (1) consistent with NCH's mission, (2) align with NCH's Vision 2030 strategy, and (3) that NCH is in a favorable position to address and make a significant impact on the health of Collier County and Lee County.

The three key areas of focus include access to care, chronic disease, and health of older adults. The implementation plan was developed by the NCH Executive Team and reviewed and approved by the NCH Board of Trustees. Many parts of the implementation plan are also incorporated into the NCH Vision 2030 strategic plan. The Implementation Plan is outlined on the following page.

Attachment A: 2025 Implementation Plan

Community Benefit Category	Name of Program	Description of Program	Method of Evaluation
Access to Care	Expand Access Center	Expand access center to include more clinics, hospital discharge follow up calls, and centralized authorization and referrals hub to drive quicker access.	Call Volumes and Response Times
	Expand access to healthcare in Collier County	<ul style="list-style-type: none"> Continue to expand services in Ave Maria including clinic offerings and planning for a free-standing ED. Complete assessment for the development of a Randall curve service location. Open new urgent care and expand outpatient care on Marco Island. 	Service Volumes
	Work with providers and leverage Epic tools to increase access	<ul style="list-style-type: none"> Work with providers to create additional availability by optimizing their schedules. Continue to use the full Epic suite to increase access, including both direct and open scheduling capabilities in MyChart. 	Service Volumes
	Payor Relationships	Work with payors to assess the expansion of healthcare services at NCH locations to increase access.	Service Volumes
Chronic Disease	Open new cardiovascular and stroke center	Expand cardiology services via the new Schulze Center in downtown Naples and add EP/cath labs in North Naples.	Service Volumes
	Explore standardization of nurse navigation program	Assess standardization of nurse navigator programs to improve chronic disease outcomes including readmission rates.	Quality Metrics
	Start comprehensive oncology program	Expand existing oncology services to include gynecological, medical, and radiation oncology clinics.	Service Volumes
Health of Older Adults	Maintain geriatric emergency department accreditation (GEDA)	Elevate ED geriatric certification from bronze to silver.	Maintain or improve accreditation
	CMS – Age Friendly Care	Align interventions with CMS: Age Friendly Care requirements.	Program Revisions
	Expand Orthopedics across the region	Expand existing orthopedic services, including OrthoNow capabilities across the Collier and Lee County region.	Service Volumes

Attachment B: 2022 Implementation Plan

Community Benefit Category	Name of Program	Description of Program	Method of Evaluation
Access to Care	Upgrade telephonic Services	Improve customer service for our patients through upgrading and outsourcing our telephonic services.	Service Volumes
	Access clinic	Create an Access Clinic for quick access to low acuity medical care.	Service Volumes
	Further develop virtual care through EPIC's MyChart	Enable patients to communicate with doctors, schedule appointments, see medications, test results, upcoming appointments, medical bills, price estimates, and more all in one place.	MyChart Enrollment Rate
	Expand access to healthcare in the rapidly growing northeast Naples	Strategically focus service offerings per location and distribution of services with focus on Northeast growth and create access for Medicaid dominant communities.	Service Volumes for targeted zip codes
Chronic Disease (Heart & Stroke)	Address the patient demand shift from inpatient to outpatient care	Concentrate core service offerings to backfill inpatient volume that has shifted to outpatient and prioritize areas of focus to keep patients local.	Service Volumes Distribution Inpatient vs Outpatient
	Add cardiology services on Marco Island	Expand cardiology services to serve the needs of the Marco Island community.	Service Volumes
	Improve patient outcomes through education	Utilize a cardio thoracic navigator for pre-surgery education, post-surgery education and community education.	Service Volumes
	Clinical Trials program to offer state-of-the-art care for chronic disease patients	Expand clinical trials and promote medical education as part of advanced capabilities.	Number of Clinical Trials & Patients Enrolled
Health of Older Adults	Provide access to geriatric Medicine	Expand geriatric medicine to multiple NCH Physician practices.	Service Volumes
	Achieve geriatric emergency department accreditation (GEDA)	Geriatric emergency department accreditation (GEDA) was developed by leaders in emergency medicine to ensure that our older patients receive well-coordinated, quality care at the appropriate level at every ED encounter.	Become Accredited
Pediatrics' and Women's Health	Evaluate upgrading from NICU Level II to NICU Level III	Optimize policies, nursing/staff ratios, education, ancillary services including dedicated respiratory therapists.	Service Volumes
	Enhance Care Through Obstetric Emergency Department (OBED)	Implement Obstetric Hospitalists 24/7 coverage for Labor & Delivery to increase patient safety by reducing nurse only deliveries.	Service Volumes
	Increase Maternal Fetal Medicine services	As the only birthing hospital in Collier County, ensure optimal care for high-risk pregnancies by adding services such as antepartum, expanding clinic days and pursuing 24/7 MD MFM coverage.	Service Volumes

Attachment C: 2019 Implementation Plan

Community Benefit Category	Name of Program	Description of Program	Method of Evaluation
Mental Health	Research collaborative relationships with other community mental health providers	To more effectively treat the increasing mental health needs in our community, select partners to align to NCH values that are committed to improve the mental health of our community	Service volumes
	Implement a Moods Disorders Program which will include clinical assessments and treatment to treat severe depression	Treatment modalities include cognitive behavioral therapy, Medication management, Trans Magnetic Simulation Program (TMS) and Electro Convulsive Therapy Program (ECT)	Service volumes
	Develop Behavioral Health Navigation Model	Program to specialize in improving the access to the appropriate resources for behavioral health and addictions care for within our community	Service volumes
Access to Care	Expand primary care physicians in growth areas within our service area	Recruit and establish primary care practices in the southeast and northern sections of Collier County and south Lee County	Service volumes
	Expand oncology services to better serve patients in our community	Research partnership opportunities with other providers in our service area that provide oncology services	Service volumes
	Further develop virtual care strategy to include telemedicine services	In addition to telemedicine develop virtual care network for engagement of high-risk patients and other underserved needs of the population	Service volumes
Chronic Disease	Further develop NCH Heart institute programs and services to combat cardiovascular disease	Continue to bring to the community best practice therapies and emerging technologies to ensure patients are able to receive cardiovascular care close to home	Implement Program
	Expand existing Blue Zone Project into a Comprehensive Population health and management program throughout	Continue partner efforts of community awareness of health lifestyle with NCH population health efforts leading to prevention and disease awareness and management health choice the easy choice	Implement Program
	Further develop neuroscience programs and services within our service area	Develop and implement Nero Spine Center as well as obtaining thrombectomy ready capable center	Implement Program
Health of Older Adults	Further develop access to Fellowship Trained Geriatric Physicians within the community.	Partner with other organizations that could benefit from working with NCH Geriatric physicians improve quality of life and aging in place of individuals in our community	Service volumes

Collier County Community Health Assessment 2025



Prepared by



In Partnership With



Introduction

In efforts to improve the health of the residents of Collier County, a collaborative partnership was formed between NCH, the Florida Department of Health in Collier County (DOH-Collier), the Healthcare Network (HN), and the Health Planning Council of Southwest Florida, Inc. (HPC), also known as the CHA Steering Committee, for the purpose of conducting a needs assessment for use of the mentioned partners and other community partners in Collier County. The Steering Committee held monthly meetings for the duration of the project to aid in the planning, creation, and implementation of this health needs assessment.

HPC reviewed numerous data sources and received feedback from the Steering Committee, as well as from members of the community through surveys, questionnaires, interviews with community leaders, and a focus group. This needs assessment consists of demographic, socioeconomic, and health status information that will be used to identify areas where targeted interventions and policy changes may have the most significant impact. Once community needs are identified through quantitative data analysis of demographic, socioeconomic, and health status information, community survey, focus groups, and interviews, the strategic process and community health improvement planning can begin.



Source: Health Planning Council of Southwest Florida

Community Survey 441 Residents Completed

Ranking of Priorities

1. Access to care
2. Chronic disease
3. Alcohol & drug use
4. Health of older adults
5. Dental health
6. Mental health
7. Communicable diseases
8. Disabilities
9. Obesity
10. Unintentional Injury

Top Health Concerns

1. Access to specialty care
2. Access to primary care
3. Aging problems
4. Not enough doctors
5. Mental health conditions
6. Dental problems
7. Women's health issues
8. Senior care

Top Health Needs

1. Affordable housing
2. More doctors
3. Financial assistance for healthcare
4. Additional health services
5. Mental/behavioral health services
6. Wellness programs
7. Job opportunities
8. Health education

Community Outreach Questionnaire

Need

1. Access to healthcare
2. Dental care
3. Transportation

Barriers

1. Scheduling and availability
2. Financial constraints
3. Transportation problems

Focus Group

Improvements needed

1. EMR record coordination
2. Mental health services
3. Lack of affordable dental services
4. Lack of affordable vision services

Community Leader Interviews

Critical challenges

1. Access to affordable care
2. Behavioral health services
3. Access to transportation
4. Affordability of living
5. Lack of primary care

Population

- Collier County has a population of over 390,944 (2023) and is located in southwest Florida. It is the second-largest county in Florida after Palm Beach County.
- Between 2014 and 2023, the resident population of Collier County grew significantly, increasing by over 18%.
- Collier County's population is projected to increase by another 99,417 by 2050.
- In 2020, the three communities with the highest population were North Naples, Urban Estates, and Rural Estates.
- Collier County draws a relatively large number of seasonal residents, with the peak season population increasing by an estimated 20% over the permanent population.
- The median age in Collier County increased by 5.5 years between 2013 and 2023, reaching 53.1 in 2023.
- Collier County is becoming more diverse. Between 2003 and 2023, the black and other populations grew more quickly than the white population in Collier County.
- The Hispanic population in Collier County grew from 25.5% in 2009 to 29% in 2023.
- In 2023, over 26% of the total Collier County population was foreign-born.
- Collier County has a higher percentage of the population that speaks English less than very well compared to Florida.
- In 2023, of households that spoke languages other than English, 71% spoke Spanish.

Additional details and data sources can be found in the Collier County Health Needs Assessment

Drivers of Health

- In 2023, 44% of Collier County students were deemed ready when they entered kindergarten, which is lower than the state of Florida (51%).
- Collier County students passed the Florida Standards English Language Arts Assessment (FSA) at higher rates than the state average (60% Collier, 55% Florida) in 2024.
- Between 2013 and 2023, Collier County consistently had a higher high school graduation rate than the state average (91.5% Collier, 88.0% Florida).
- The median household income in Collier County for 2023 is significantly higher when compared to the Florida average (\$86,173 Collier, \$71,711 Florida).
- When compared to Florida and the United States, Collier County has consistently had a lower percentage of people living in poverty.
- In 2023, 10% of Collier County households were considered in poverty, and an additional 33% were considered below the ALICE threshold from the United Way indicating that they were financially burdened.
- In Immokalee, 74% of households were below the ALICE threshold in 2023.
- The median value of housing is significantly higher in Collier County than the state average (\$486,800 vs. \$325,000).
- Collier County has a higher median gross rent when compared to Florida and the United States in 2023.
- In 2023, 28.1% of owner-occupied households in Collier County were housing cost burdened, paying more than 30% of their income for housing.
- Since 2020, the percentage of renter households paying more than 30% of their income in rent in Collier County has been higher than the state average (61.8% Collier vs. 58.7% Florida, 2023).

Additional details and data sources can be found in the Collier County Health Needs Assessment

Settings and Systems

- Collier County has more licensed providers than the state average in every category except for licensed pediatricians and licensed behavioral/mental health professionals.
- The county has significantly fewer nursing home beds per 100,000 residents when compared to the state of Florida (206 vs. 366.3).
- Medicaid enrollment rates in Collier County are lower than the state rates.
- Collier County consistently has a higher percentage of people under the age of 65 who are uninsured.
- In 2023, 22.9% of the core working population aged 19-64 in Collier County were without health insurance, compared to 15.5% in Florida.
- The Hispanic or Latino population in Collier County had the highest percentage of those who are uninsured, nearly double the state average (30.0% Collier, 15.6% Florida, 2023).
- In 2022, 44,430 people in Collier County were food insecure.
- The average meal cost in Collier County is \$4.78, which is \$0.65 higher than the Florida average.
- Collier County has a smaller percentage of the population living near a park or off-street trail system compared to the Florida average.
- Nearly 80% of Collier County's land area is in conservation.
- Collier County workers, on average, have a lower travel time to work than the Florida average.
- Collier County has a lower-than-average rate for all crimes and domestic violence when compared to the State of Florida as a whole.

Additional details and data sources can be found in the Collier County Health Needs Assessment

Health Behaviors

- In 2019, about 41% of adults in Collier County were considered overweight, which is higher than the Florida average (41% Collier vs. 38% Florida).
- In 2019, about 23% of adults in Collier County were considered obese, which was lower than the Florida average (23% Collier vs. 27% Florida).
- In 2019, about 12% of adults in Collier County were current smokers, lower than the Florida average (12% Collier vs. 15% Florida).
- The percentage of high school students in Collier County who reported consuming alcohol in the past 30 days has decreased significantly over the past 10 years (29.4% in 2016 to 17.5% in 2024).
- The percentage of high school students in Collier County who reported cigarette use in the past 30 days has significantly decreased in the past decade (4.8% in 2016, 1.1% in 2024).
- The percentage of middle and high school students in Collier County who reported vaping nicotine in the past 30 days decreased between 2020 and 2024 (9.7% in 2020, 6.6% in 2024).
- From 2016 to 2024, the percentage of middle and high school students in Collier County who reported using marijuana or hashish decreased significantly (9.7% in 2016, 3.9% in 2024).
- In Collier County, drug poisoning was responsible for fatal injuries at a higher age-adjusted rate than all other causes.
- There was a significant increase in the death rate from unintentional injuries in Collier County over the past 10 years (38.0 in 2014, 70.1 in 2023).
- In 2023, Collier County's unintentional injury death rate was higher than the Florida average (70.1 Collier, 63.9 Florida).

Additional details and data sources can be found in the Collier County Health Needs Assessment

Health Behaviors

- Deaths from unintentional falls are most common in the population aged 65 or older.
- In Collier County, the rate of death from falls for the population aged 65 or older is significantly higher than the state average (131.2 Collier, 81.9 Florida, 2023).
- The rate of motor vehicle crashes in Collier County has been increasing since a low in 2020 and is nearing the state average.
- Compared to other Florida counties for the years 2021-2023, Collier County has a higher rate for births to mothers ages 15-19 than the state average (16.9 Collier, 13.2 Florida).
- Collier County is in the worst quartile for the state for births with adequate prenatal care (Kotelchuck index [%]), with a rate of 58.1% compared to 63.3% for Florida.
- Fewer women in Collier County breastfeed compared to the state average, and that percentage has been falling (71.5% Collier, 85.8% Florida, 2021-2023).
- The maternal death rate for Collier County is significantly lower than the state rate (9.9 Collier, 24.2 Florida, 2021-2023).
- In the past decade, Collier County consistently had fewer people visit the emergency room for dental conditions than the Florida average.
- The percentage of high school students in Collier County who had not visited a dentist's office in the past 12 months increased between 2010 and 2022 (21.0% 2010, 28.6% 2022).

Additional details and data sources can be found in the Collier County Health Needs Assessment

Health Conditions

- Collier County consistently exceeds the Florida average for life expectancy, and in 2021-23, had the highest life expectancy out of all 67 counties in Florida.
- However, like the rest of the state, Collier County saw a decline in life expectancy beginning in 2019-21.
- Cancer and heart disease are the two most common causes of death in Collier County.
- Unintentional injury and cancer had the highest years of potential life lost in Collier County, indicating these causes disproportionately affect younger people.
- While Collier County has experienced an increase in new cases of cancer, its cancer death rate is significantly lower than the Florida average.
- Breast cancer incidence has increased significantly, and the rate for Collier County is now higher than the state average.
- The death rate from heart disease in Collier County was the lowest in 2023 in the past ten years and is significantly lower than the Florida average.
- There has been a significant increase in stroke deaths in the county since 2014, although the rate began to fall after 2020.
- Alzheimer's disease was the sixth leading cause of death in the population 65 years and older in Collier County in 2023.
- The percentage of the population over 65 with Alzheimer's Disease is higher in Collier County than the state average, but the death rate is lower.
- Chlamydia is the most common sexually transmitted infection (STI) in Collier County, but overall, Collier County has had a consistently lower rate of bacterial STDs compared to the state.
- The rates of HIV diagnoses in Collier County have increased from 2014 through 2023, with heterosexual contact now the most common mode of exposure.

Additional details and data sources can be found in the Collier County Health Needs Assessment

FQHC Data

- Healthcare Network (HN) is the Federally Qualified Health Center (FQHC) in Collier County.
- HN has 12 locations within Collier County: three in Immokalee and nine in the Naples area.
- HN serves an estimated total of 50,278 people in Collier County.
- About 61% of patients served by HN are children under 18 years of age, which is significantly higher than regional benchmarks and the state average.
- Approximately 85% of patients served by HN identify as members of racial and/or ethnic minority groups, higher than all regional benchmarks and Florida.
- Over half (53.7%) of HN's patients are best served in a language other than English, which is significantly higher than regional benchmarks and the state.
- Nearly 90% of HN's patients are at or below 200% of the federal poverty guideline.
- About 15% of the patients served by HN are uninsured, which is significantly lower than the state's average.
- About 24% of HN patients were identified as having hypertension, slightly less than the Florida average.
- Approximately 44% of women accessing prenatal care from HN did so within the first trimester, lower than the state average.
- HN performs better than the state average in screening for cervical cancer, breast cancer, body mass index, colorectal cancer, and HIV.
- 14% of HN patients receive mental health services, significantly higher than the state average and regional benchmarks.

Additional details and data sources can be found in the Collier County Health Needs Assessment



2025 Collier County Community Health Assessment

Prepared by the Health Planning Council of Southwest Florida, Inc.

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Collier County Community Input 2025



Prepared by



In Partnership With



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Introduction and Overview



Partner Agencies: NCH, the Florida Department of Health in Collier County, and Healthcare Network. Survey created and analyzed by the Health Planning Council of Southwest Florida



Why: To assess Collier County residents' perceptions of healthcare and health issues in the county



How: Surveys and promotional materials were available in English, Spanish, and Haitian Creole. Survey collection was done via SurveyMonkey and paper surveys.



When: January - April 2025



Outcome: 441 residents shared their thoughts on health and healthcare in Collier County

NCH **healthcare network** **IPC** **HEALTH PLANNING COUNCIL OF SOUTHWEST FL** **Florida HEALTH Collier County**

**Your voice matters!
Take the survey today!**

Please join us by completing a survey about health and healthcare in Collier and Lee Counties. Your feedback will help shape the services offered in your community.

Scan Me  or 

**Your Health. Your Voice.
Your Future**

NCH **healthcare network** **IPC** **HEALTH PLANNING COUNCIL OF SOUTHWEST FL** **Florida HEALTH Collier County**

**¡Tu voz importa!
¡Responde la encuesta hoy mismo!**

Únete a nosotros completando una encuesta sobre la salud y la atención médica en los condados de Collier y Lee. Tus comentarios nos ayudarán a mejorar los servicios que se ofrecen en tu comunidad.

Escanea para realizar la encuesta. 

Tu salud. Tu voz. Tu futuro.

NCH **healthcare network** **IPC** **HEALTH PLANNING COUNCIL OF SOUTHWEST FL** **Florida HEALTH Collier County**

**Vwa ou enpòtan!
Pran sondaj la jodia!**

Tanpri ranpli yon sondaj sou sante ak swen sante nan zòn Collier ak Lee. Fidbak ou ap ede fòme sevis yo ofri nan kominote w la.

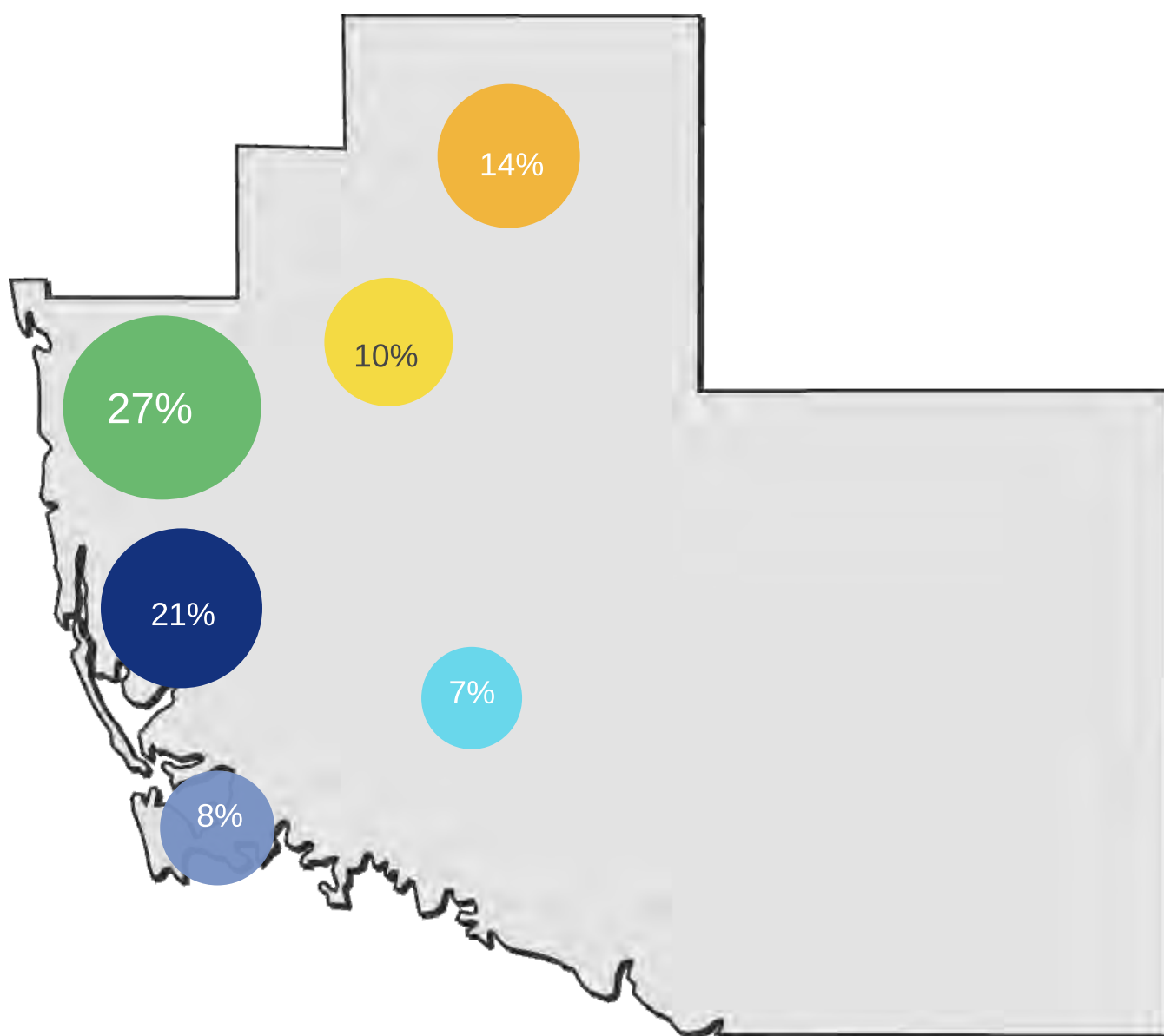
Eskane sa 

Sante w, Vwa w, Avni w.

Source: Health Planning Council of Southwest Florida

Survey Takers by Community

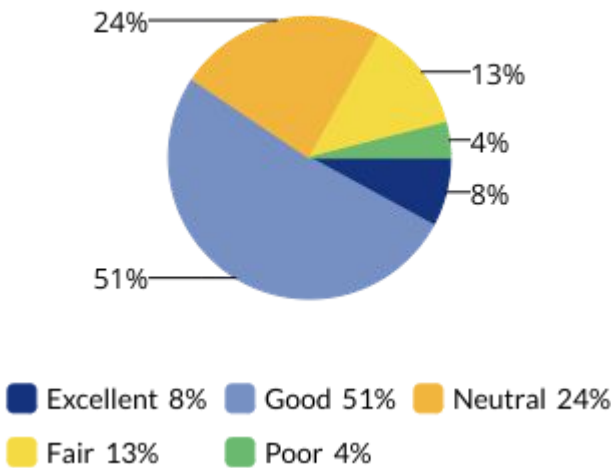
We asked survey participants to provide their zip codes. We grouped the zip codes into six different communities: **City of Naples (n=120)**, **Golden Gate (n=33)**, **Immokalee (n=60)**, **Marco Island (n=34)**, **North Naples (n=87)**, and **Orangetree (n=42)**, representing where most survey participants (86%) reported living.



Source: Health Planning Council of Southwest Florida

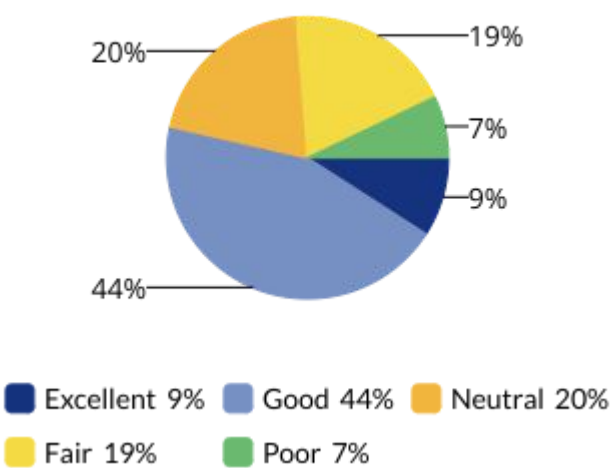
Community Health Perceptions and Access

How would you rate the general health of your community?



Source: Health Planning Council of Southwest Florida

How would you rate the quality of healthcare in your community?



Source: Health Planning Council of Southwest Florida

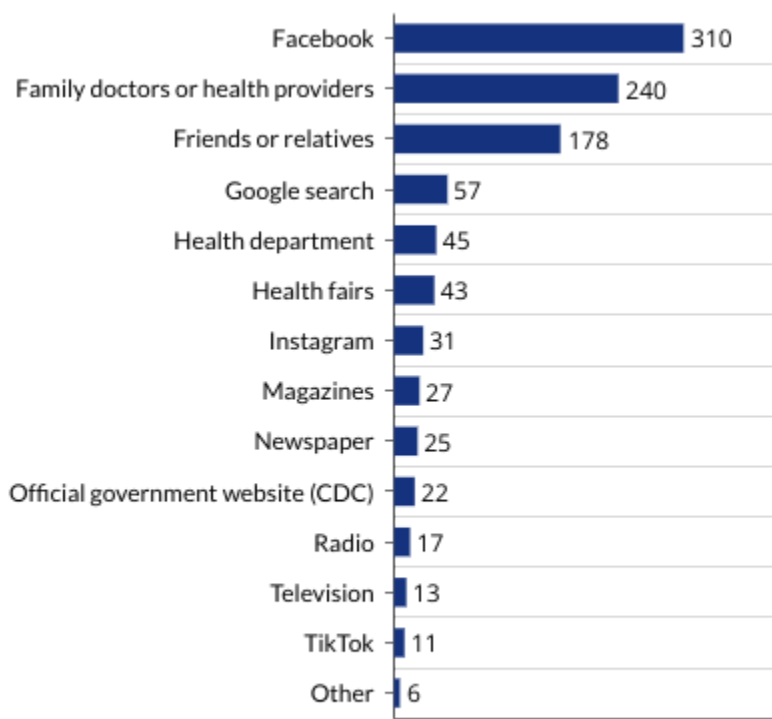
When asked, the majority of the residents believed the general health of the community and the quality of healthcare in the community are **good** (**general health [51%]**, **quality healthcare [44%]**). Looking further into the identified communities, Immokalee had the lowest average rating by residents when compared to the other communities. The best average for this breakdown is a 4.

	General Health of Community	Quality of Healthcare in Community
Golden Gate	2.6	2.5
Immokalee	1.6	1.5
Marco Island	2.7	2.1
Naples	2.7	2.6
North Naples	2.8	2.5
Orangetree	2.7	2.5
Collier Overall	2.4	2.3

Source: Health Planning Council of Southwest Florida

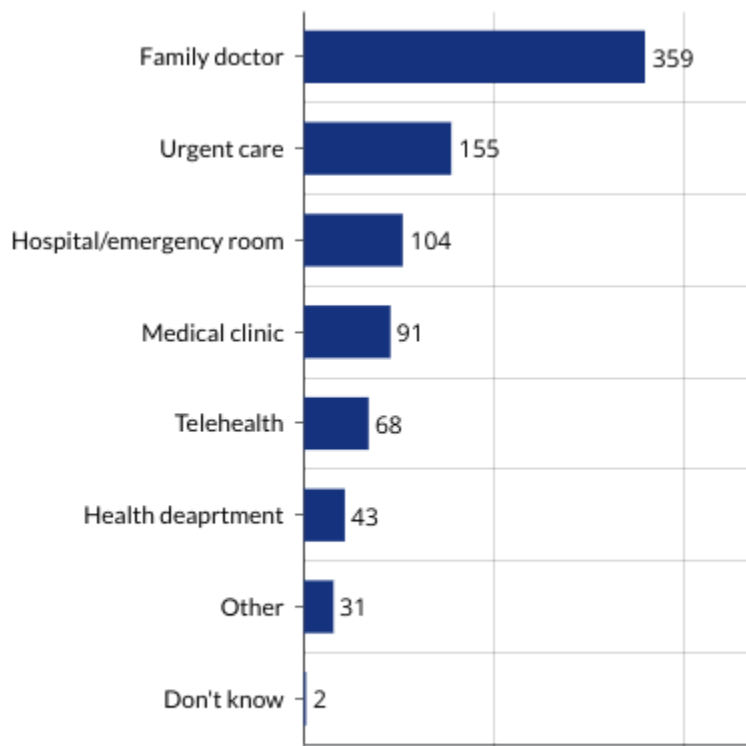
Community Health Perceptions and Access

Where do residents go to get health information?



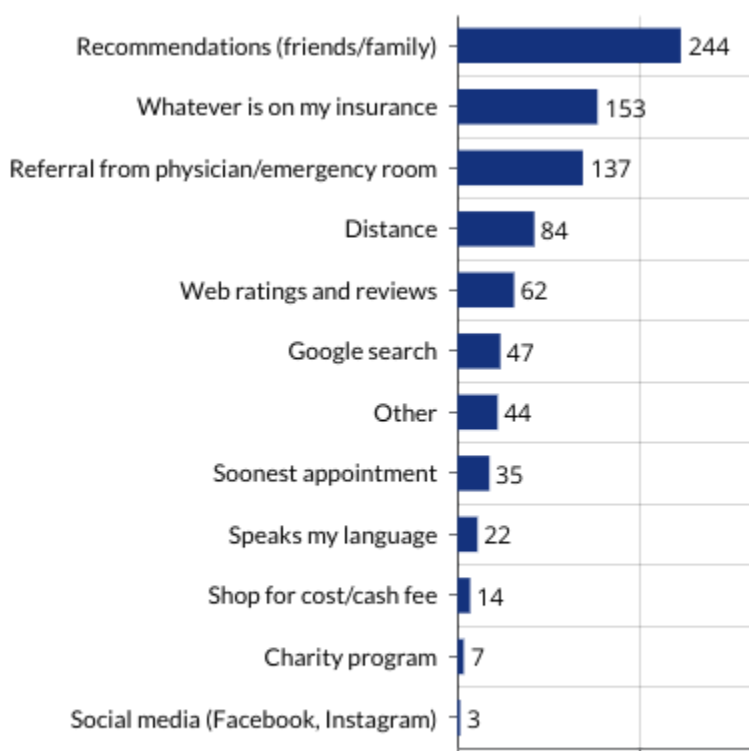
Source: Health Planning Council of Southwest Florida

Where do residents go to get healthcare?



Source: Health Planning Council of Southwest Florida

How do you choose your healthcare provider?



Source: Health Planning Council of Southwest Florida

In Collier County, the most popular sources of health information among residents were Facebook (310 responses), health providers (240 responses), and friends or relatives (178 responses). Notably, in 2022, social media ranked as the fourth most common source, indicating a significant increase in its use for disseminating health information.

Additionally, 85% of residents in Collier County reported having a primary care provider.

When choosing a healthcare provider, the top reasons cited by residents were recommendations from friends and family (244 responses), coverage by insurance (153 responses), and referrals from physicians or emergency rooms (137 responses), whatever is on their insurance (153 responses), and referral from physician/emergency room (137 responses) were the top selected responses.

Key Health Concerns and Risky Behaviors

What are the three most important health concerns?

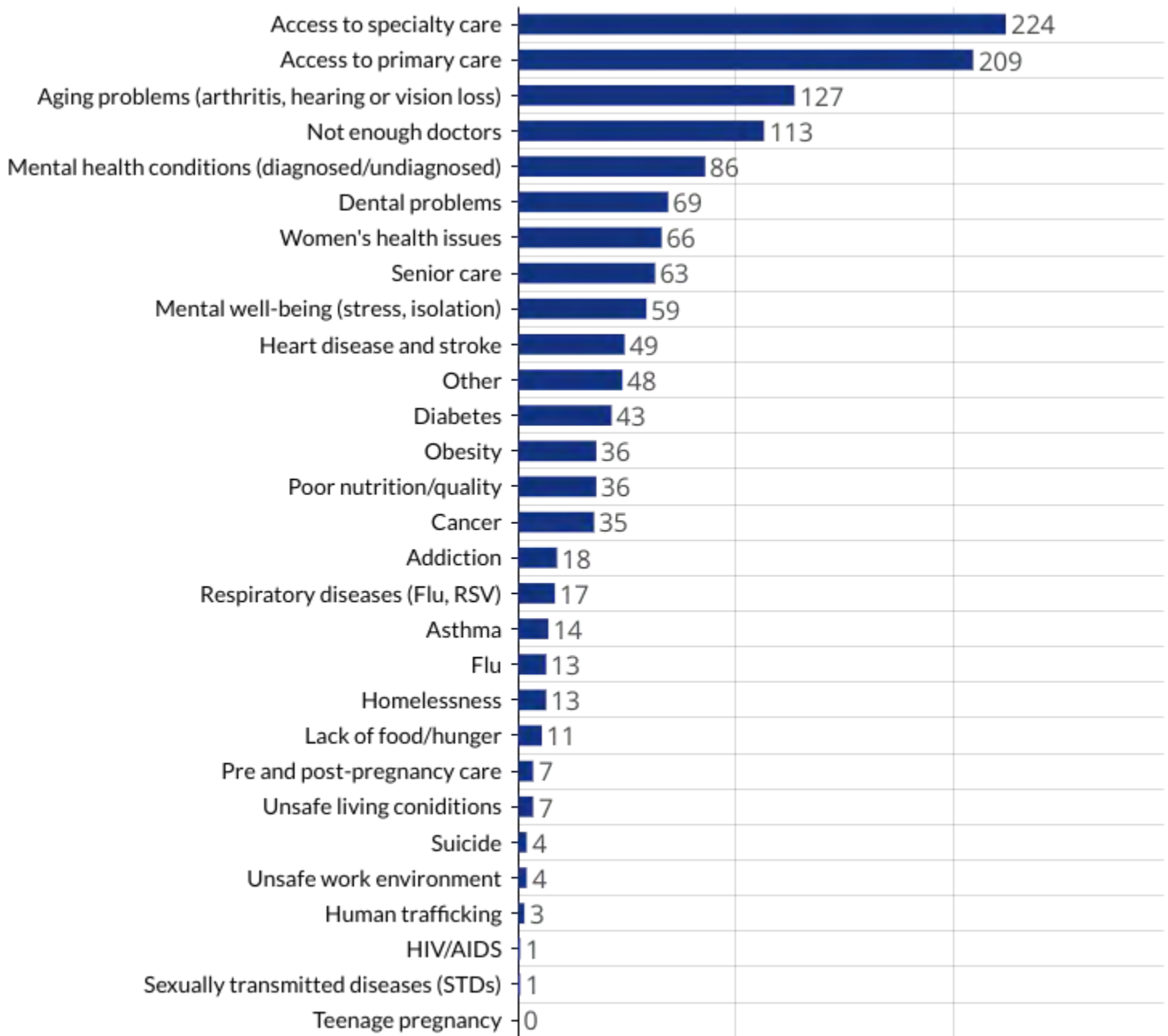
2025 Top 5 responses

1. Access to specialty care
2. Access to primary care
3. Aging problems
4. Not enough doctors
5. Mental health conditions



2022 Top 5 responses

1. Access to primary care
2. Diabetes
3. Access to specialty care
4. Mental health problems
5. Obesity

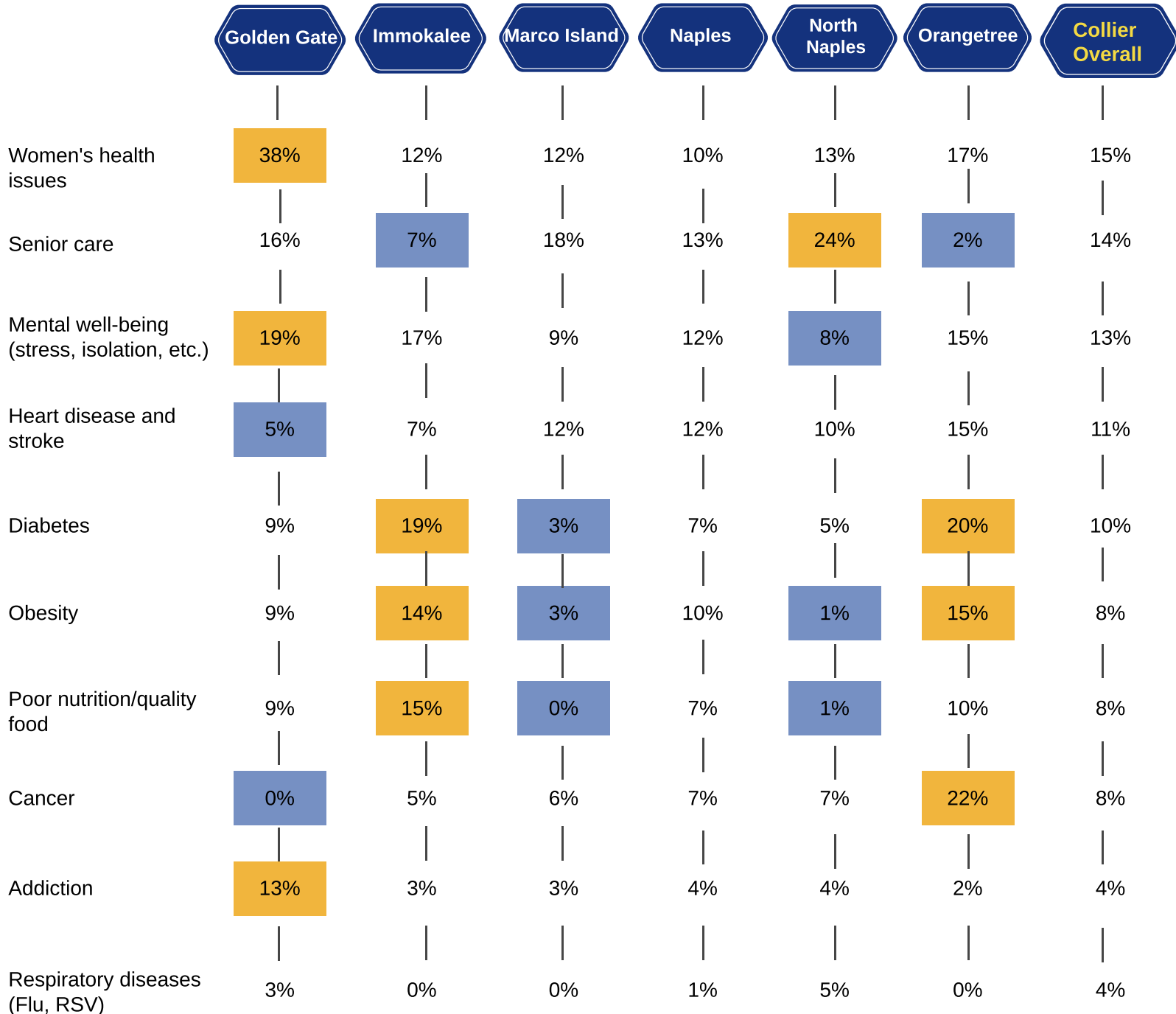


Source: Health Planning Council of Southwest Florida

Key Health Concerns and Risky Behaviors

What are the three most important health concerns?

The following chart highlights the percentage of respondents from the six highlighted communities that selected the following health concerns as the most important for them, their family, and their community. The percentages highlighted in **orange** indicate a higher concern than the Collier County average. The percentages highlighted in **light blue** show a lower concern than the Collier County average. Shading shows at least a 5% difference.



Source: Health Planning Council of Southwest Florida

Key Health Concerns and Risky Behaviors

Which of the following are the three most important risky behaviors in your community?

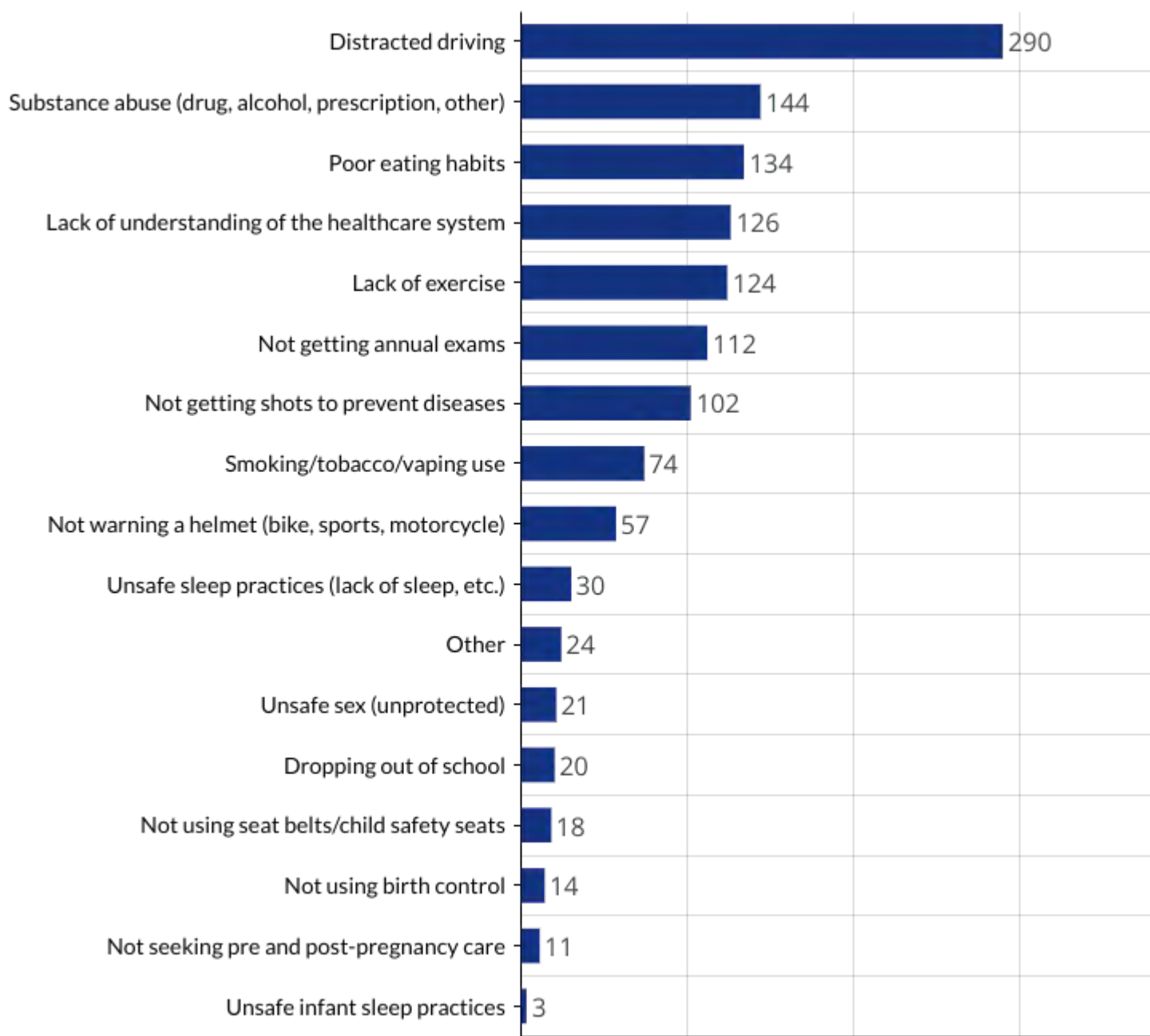
2025 Top 5 Responses

1. Distracted driving
2. Substance abuse
3. Poor eating habits
4. Lack of understanding of the healthcare system
5. Lack of exercise



2022 Top 5 Responses

1. Being overweight
2. Poor eating habits
3. Lack of exercise
4. Substance abuse
5. Smoking/tobacco/vaping use



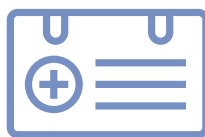
Source: Health Planning Council of Southwest Florida

Barriers to Healthcare and Environmental Factors

What do you think is the main reason that keeps people in your community seeking medical treatment?

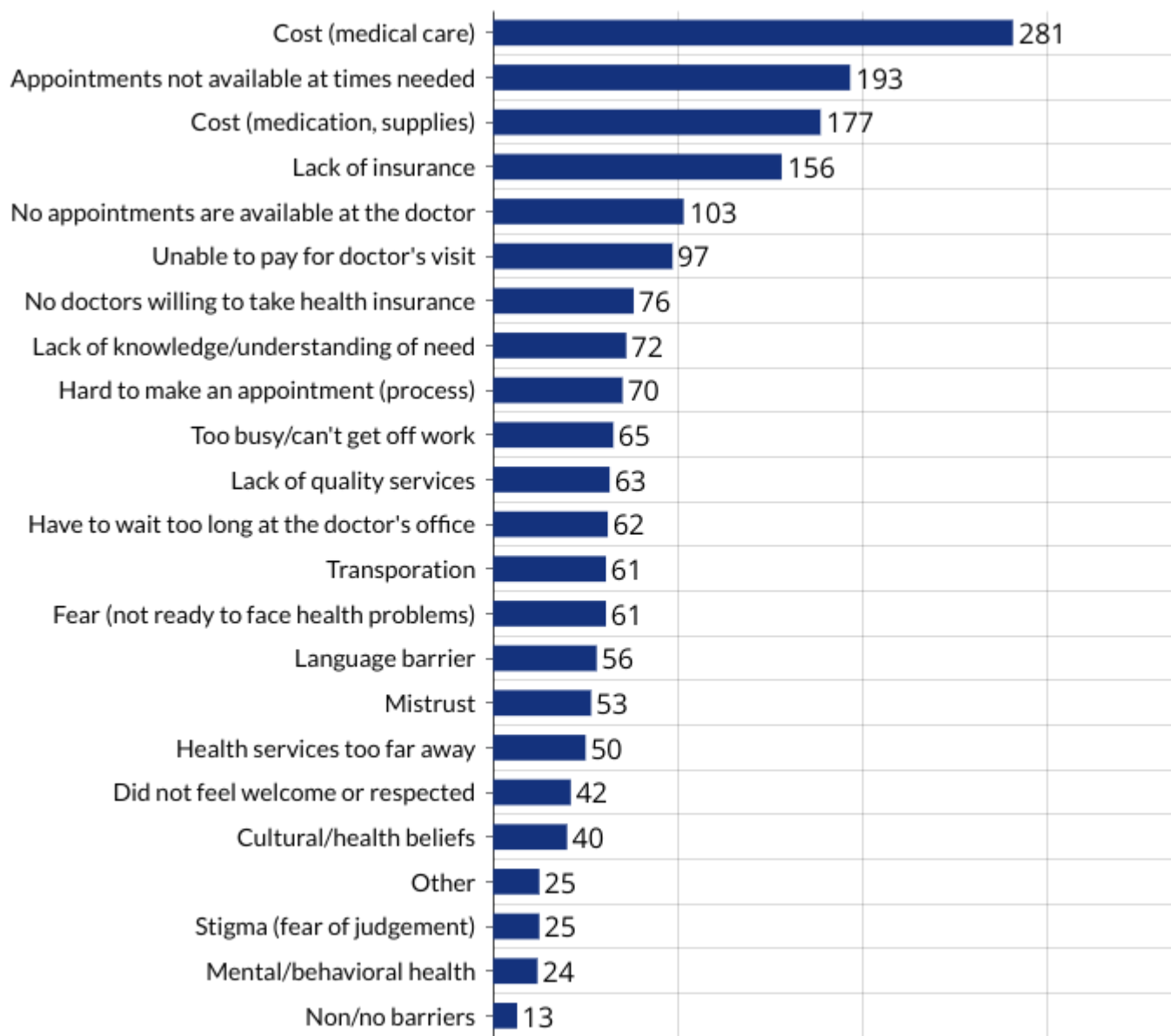
2025 Top 5 Responses

1. Cost (medical care)
2. Appointments not available at times needed
3. Cost (medication, supplies)
4. Lack of insurance
5. No appointments are available at the doctor



2022 Top 5 Responses

1. Lack of insurance
2. Fear
3. Unable to pay for doctor's visit
4. Hard to make an appointment
5. Cultural/health beliefs



Source: Health Planning Council of Southwest Florida

Barriers to Healthcare and Environmental Factors

What do you think is the main reason that keeps people in your community seeking medical treatment?

The following chart highlights the percentage of respondents from the six highlighted communities that selected the following health concerns as the most important for them, their family, and their community. The percentages highlighted in **orange** indicate a higher concern than the Collier County average. The percentages highlighted in **light blue** show a lower concern than the Collier County average. Shading shows at least a 5% difference.

	Golden Gate	Immokalee	Marco Island	Naples	North Naples	Orangetree	Collier Overall
Cost (medical care)	84%	73%	39%	62%	57%	51%	63%
Appointments not available when needed	38%	61%	52%	35%	38%	61%	44%
Cost (medication, supplies)	63%	51%	24%	32%	34%	34%	40%
Lack of insurance	50%	56%	18%	32%	28%	24%	35%
No appointments are available at doctor	13%	22%	42%	22%	30%	22%	23%
Unable to pay for doctor's visit	28%	34%	6%	20%	16%	29%	22%
No doctors willing to take health insurance	19%	15%	15%	20%	13%	17%	17%
Lack of knowledge/ understanding of need	19%	29%	12%	11%	19%	10%	16%
Hard to make an appointment (process)	13%	21%	25%	15%	12%	18%	16%
Too busy/can't get off work	22%	27%	6%	8%	14%	22%	15%
Lack of quality services	13%	25%	18%	11%	12%	20%	14%
Transportation	19%	44%	0%	10%	9%	12%	14%
Have to wait too long at doctor's office	9%	36%	9%	8%	10%	19%	14%
Fear (not ready to face health problems)	16%	22%	9%	11%	12%	15%	14%
Language barrier	19%	39%	12%	6%	6%	7%	13%
Mistrust	13%	17%	6%	12%	14%	7%	12%
Health services too far away	9%	36%	22%	4%	3%	17%	11%

Source: Health Planning Council of Southwest Florida

Barriers to Healthcare and Environmental Factors

Which environmental factors affect your health, your friends, and/or your family's health?

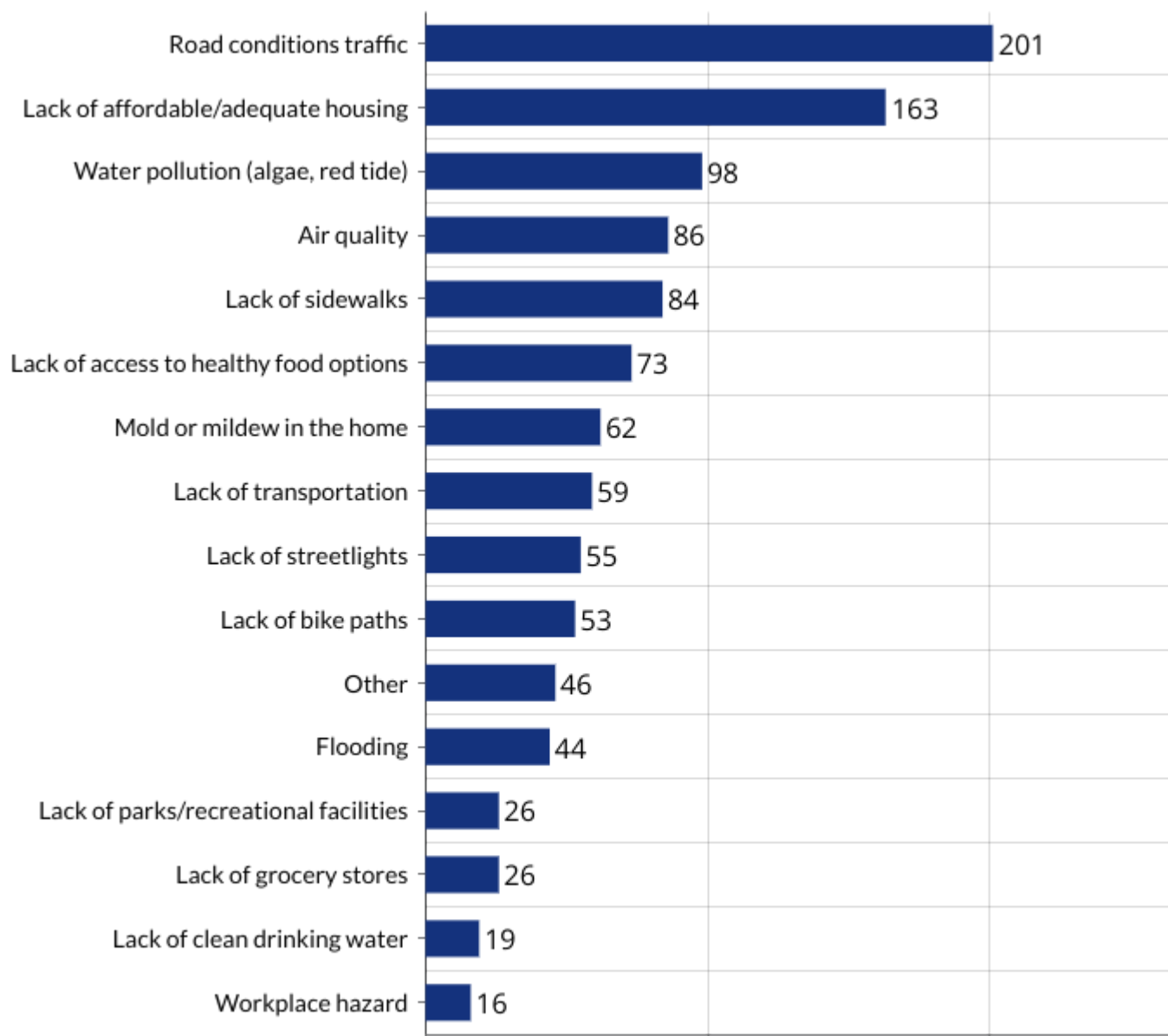
2025 Top 5 Responses

1. Road conditions traffic
2. Lack of affordable/adequate housing
3. Water pollution (algae, red tide)
4. Air quality
5. Lack of sidewalks



2022 Top 5 Responses

1. Lack of affordable/adequate housing
2. Air quality
3. Lack of transportation
4. Lack of sidewalks
5. Lack of access to healthy food options

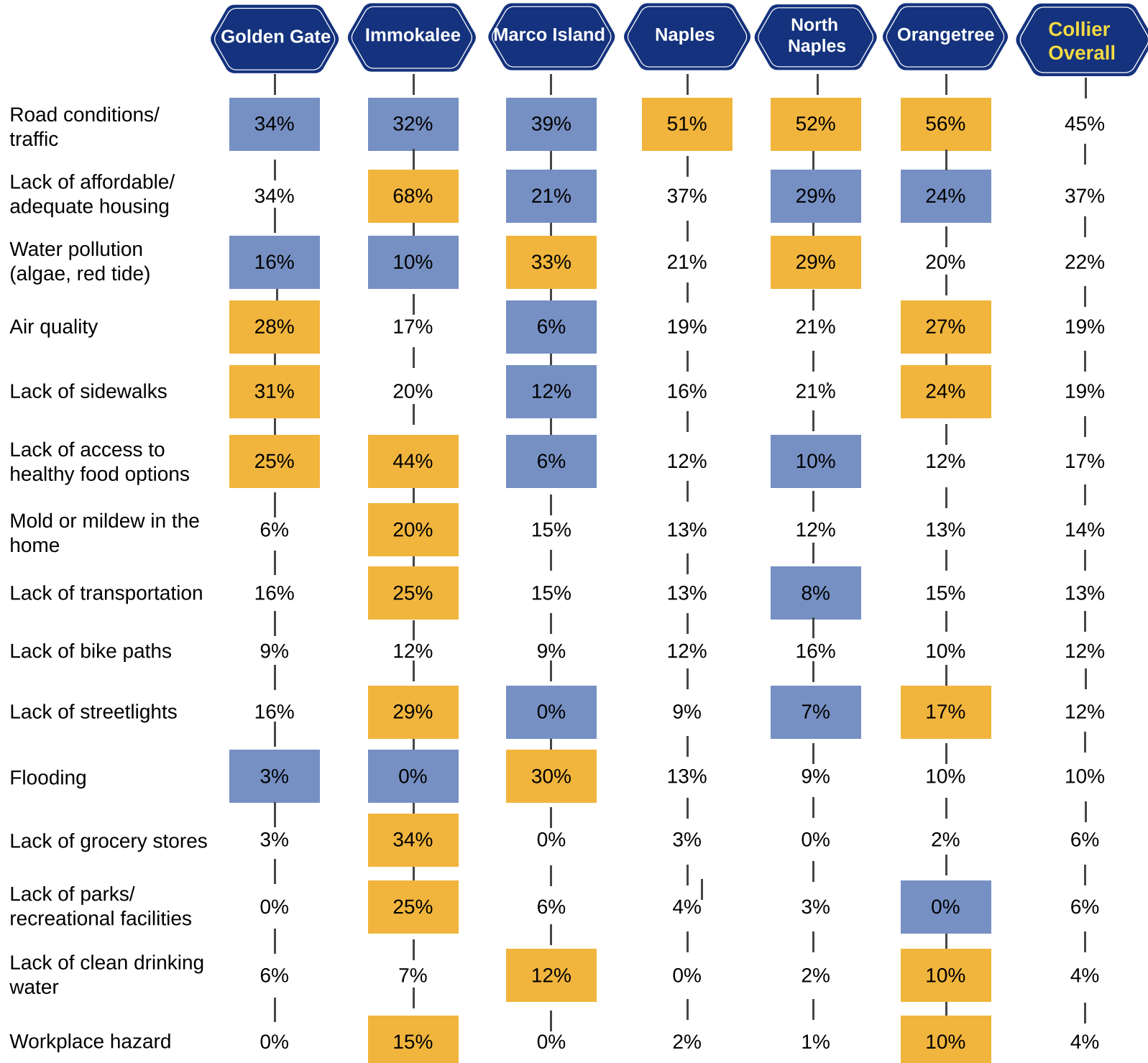


Source: Health Planning Council of Southwest Florida

Barriers to Healthcare and Environmental Factors

Which environmental factors affect your health, your friends, and/or your family's health?

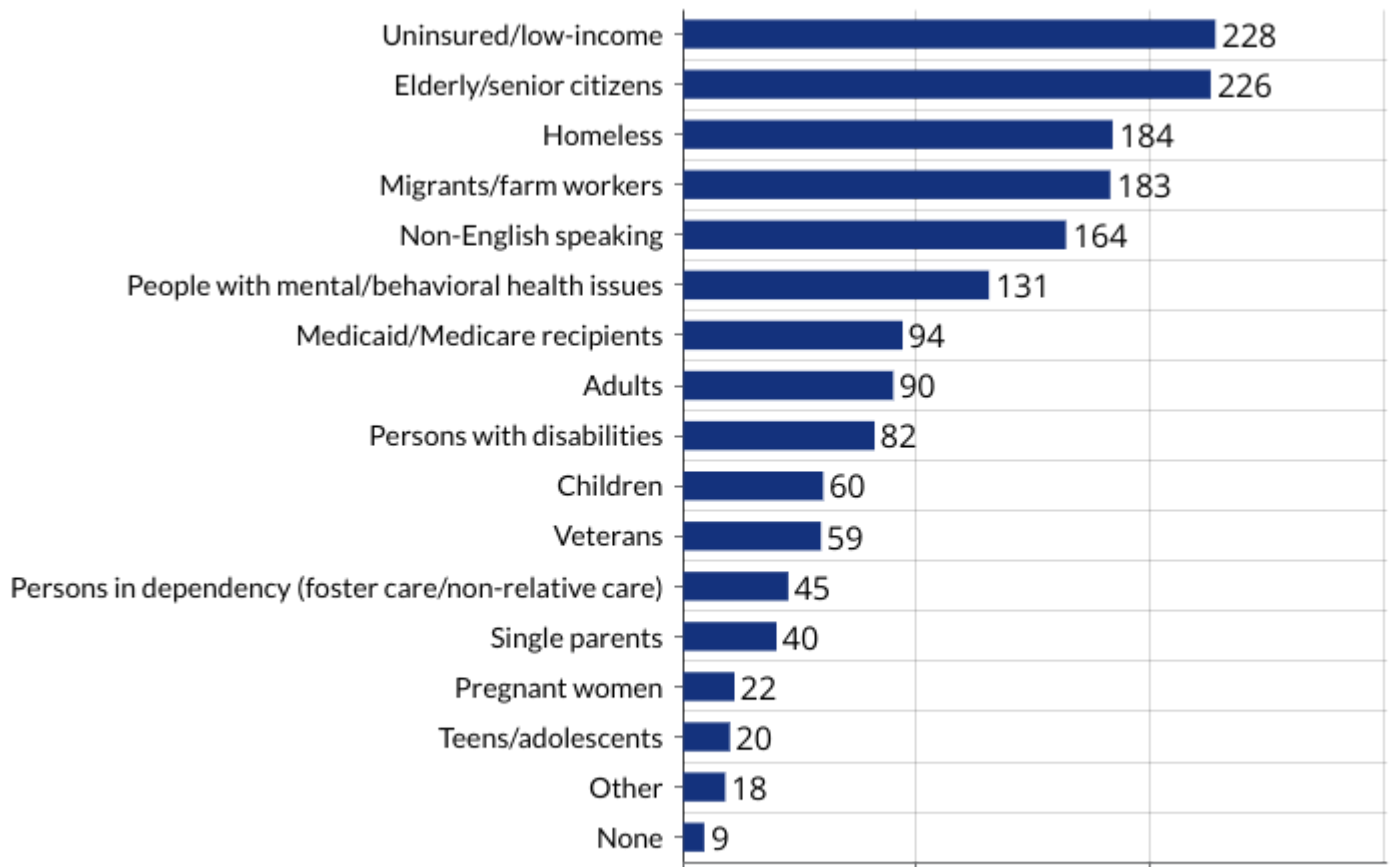
The following chart highlights the percentage of respondents from the six highlighted communities that selected the following health concerns as the most important for them, their family, and their community. The percentages highlighted in **orange** indicate a higher concern than the Collier County average. The percentages highlighted in **light blue** show a lower concern than the Collier County average. Shading shows at least a 5% difference.



Source: Health Planning Council of Southwest Florida

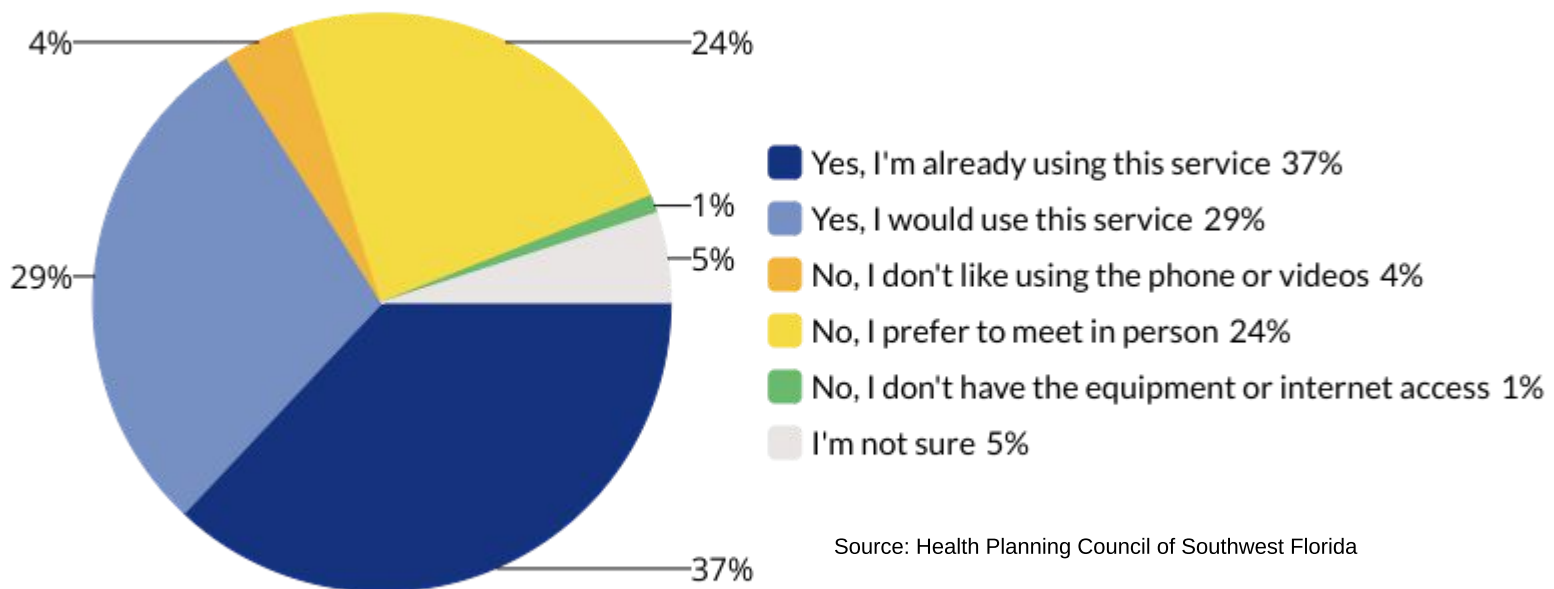
Healthcare Access Challenges and Service Needs

What types of residents have more difficulty accessing healthcare than others in your community?



Source: Health Planning Council of Southwest Florida

If telemedicine (medical visits via phone or computer with video) were available, would you or your family/friends use those services?



Source: Health Planning Council of Southwest Florida

Healthcare Access Challenges and Service Needs

Are there services that you, your friends, and your family in your community have difficulty accessing?

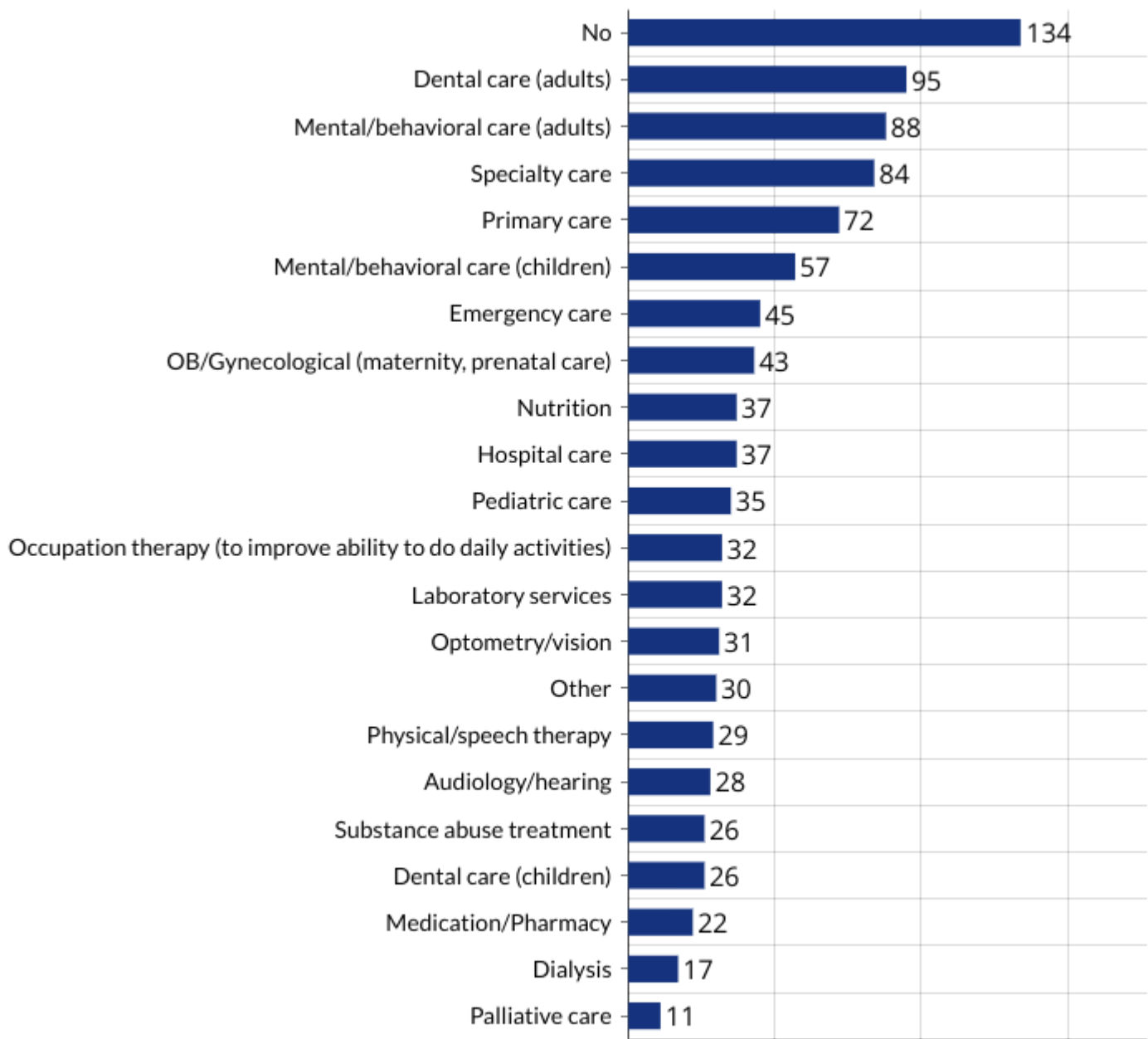
2025 Top 5 Responses

1. No difficulty accessing services
2. Dental care (adults)
3. Mental/behavioral care (adults)
4. Specialty care
5. Primary care



2022 Top 5 Responses

1. Dental care (adults)
2. Specialty care
3. Mental/behavioral health care (adults)
4. Emergency care
5. Hospital care

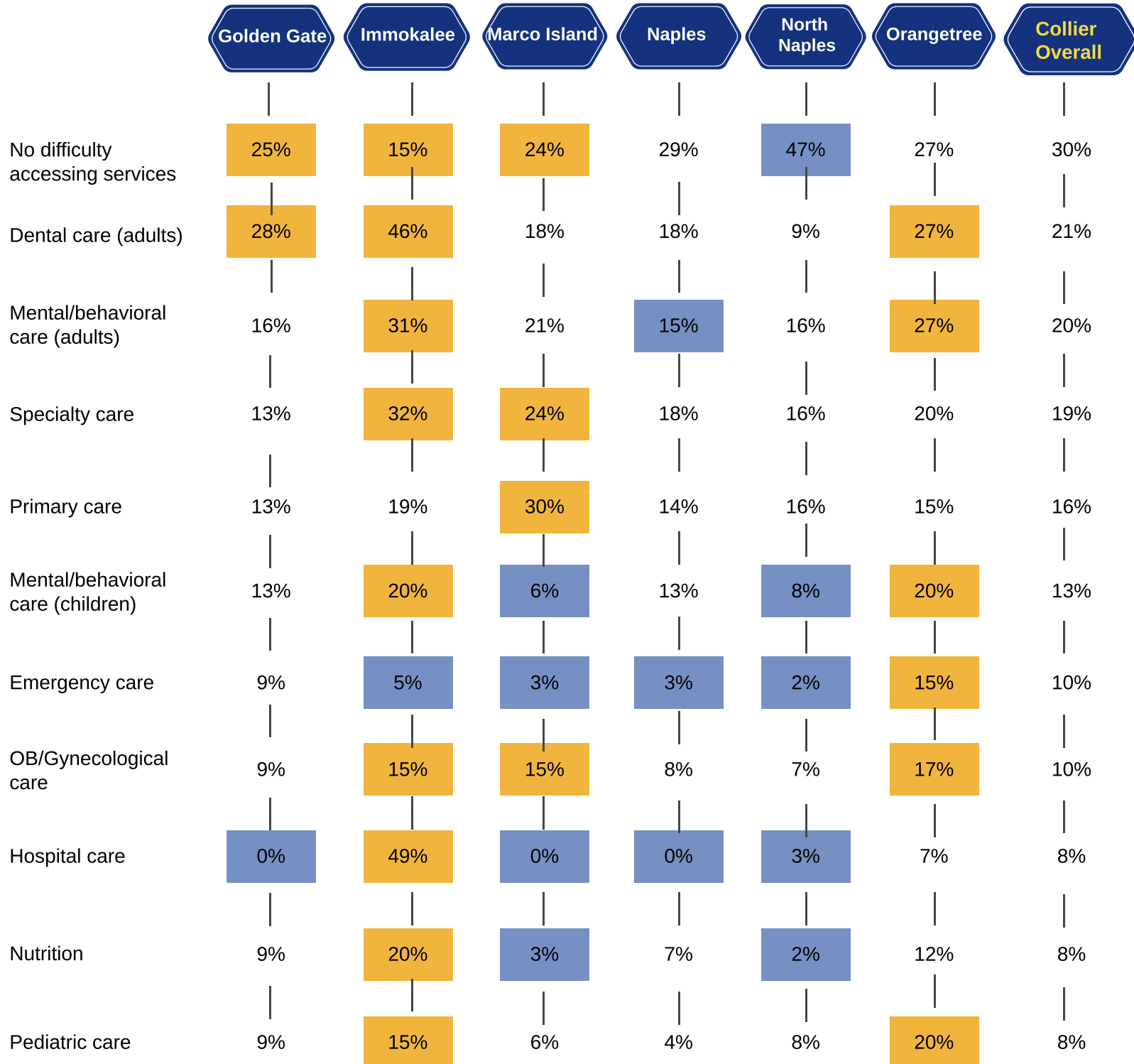


Source: Health Planning Council of Southwest Florida

Healthcare Access Challenges and Service Needs

Are there services that you, your friends, and your family in your community have difficulty accessing?

The following chart highlights the percentage of respondents from the six highlighted communities that selected the following health concerns as the most important for them, their family, and their community. The percentages highlighted in **orange** indicate a higher concern than the Collier County average. The percentages highlighted in **light blue** show a lower concern than the Collier County average. Shading shows at least a 5% difference.



Source: Health Planning Council of Southwest Florida

Healthcare Access Challenges and Service Needs

What does your community need to improve the health of your family, friends, and neighbors?

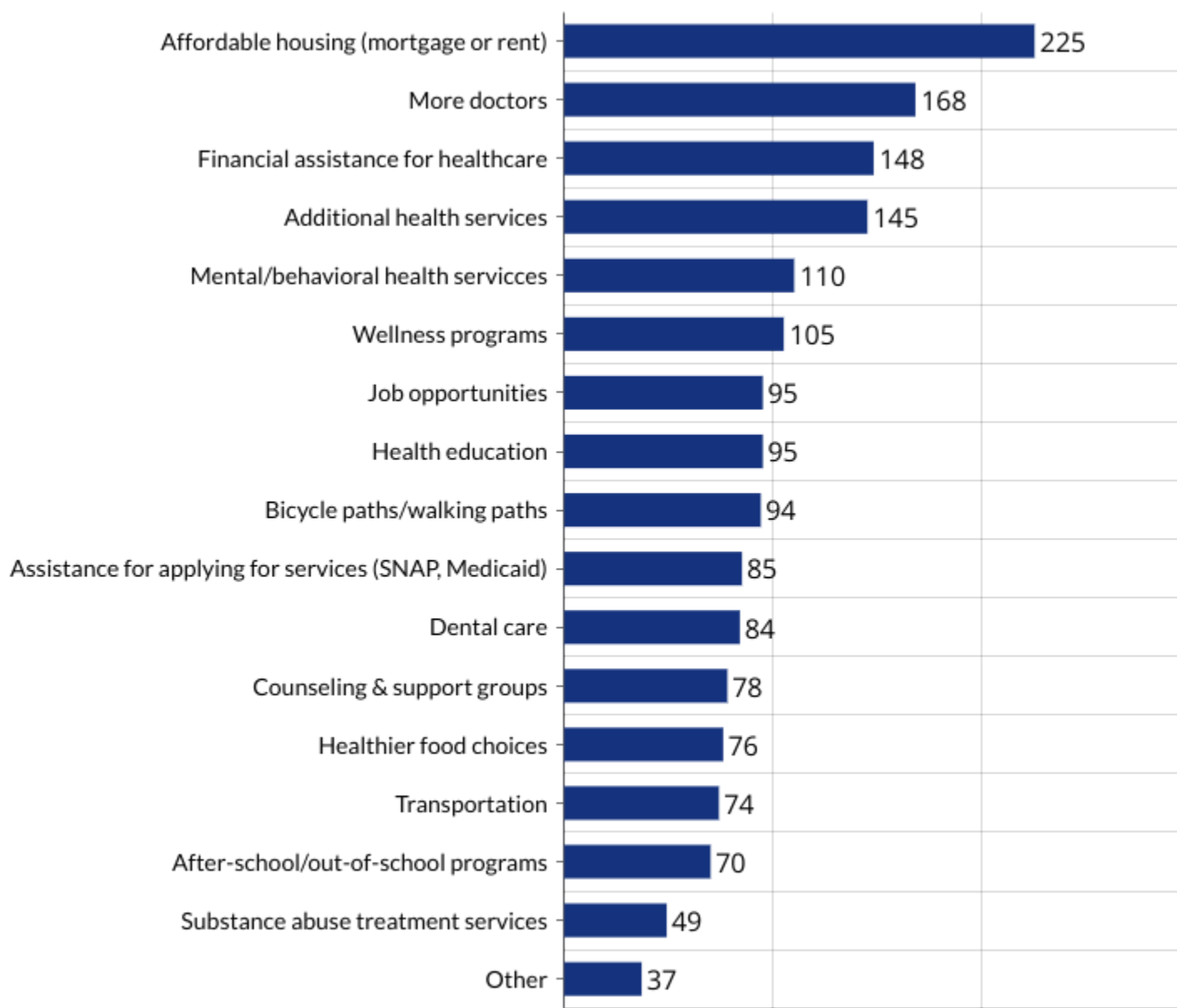
2025 Top 5 Responses

1. Affordable housing (mortgage or rent)
2. More doctors
3. Financial assistance for healthcare
4. Additional health services
5. Mental/behavioral health services



2022 Top 5 Responses

1. Affordable housing (mortgage or rent)
2. More doctors
3. Additional health services
4. Mental/behavioral health services
5. Financial assistance for healthcare



Source: Health Planning Council of Southwest Florida

Healthcare Access Challenges and Service Needs

What does your community need to improve the health of your family, friends, and neighbors?

The following chart highlights the percentage of respondents from the six highlighted communities that selected the following health concerns as the most important for them, their family, and their community. The percentages highlighted in **orange** indicate a higher concern than the Collier County average. The percentages highlighted in **light blue** show a lower concern than the Collier County average. Shading shows at least a 5% difference.

	Golden Gate	Immokalee	Marco Island	Naples	North Naples	Orangetree	Collier Overall
Affordable housing	66%	66%	30%	53%	47%	41%	51%
More doctors	22%	49%	45%	34%	49%	41%	38%
Financial assistance for healthcare	38%	47%	27%	33%	28%	29%	33%
Additional health services	25%	59%	30%	26%	29%	41%	33%
Mental/behavioral health services	28%	31%	21%	23%	23%	32%	25%
Wellness programs	16%	37%	9%	28%	21%	32%	24%
Health education	22%	39%	9%	18%	19%	24%	21%
Bicycle paths/ walking paths	34%	22%	15%	18%	23%	22%	21%
Job opportunities	9%	40%	3%	20%	17%	29%	21%
Assistance for applying for services	22%	36%	6%	14%	22%	15%	19%
Dental care	28%	37%	6%	18%	14%	22%	19%
Counseling & support groups	28%	20%	3%	21%	14%	20%	18%
Healthier food choices	22%	37%	0%	19%	10%	15%	17%
Transportation	28%	25%	9%	18%	17%	12%	17%
After-school/out-of-school programs	25%	25%	6%	13%	12%	12%	16%
Substance abuse treatment services	19%	19%	3%	9%	9%	17%	11%

Source: Health Planning Council of Southwest Florida

Ranking of Community Priorities

As part of the community health survey, participants were asked to prioritize 10 healthcare-related areas. The 10 public health categories were ranked by their order of importance as perceived by Collier County residents. The 2022 and 2019 results are displayed to compare the shift in the county's priorities over the last seven years. The top five priorities are the primary focus of the local public health system's efforts.

2025



2022



2019



Source: Health Planning Council of Southwest Florida

Healthcare Access Challenges and Service Needs

Ranking of Community Priorities by Community

Golden Gate

1. Access to care
2. Chronic disease
3. Alcohol and drug use
4. Communicable disease
5. Dental health
6. Mental health
7. Health of older adults
8. Disabilities
9. Obesity
10. Unintentional injuries

Immokalee

1. Access to care
2. Chronic disease
3. Alcohol and drug use
4. Dental health
5. Mental health
6. Health of older adults
7. Disabilities
8. Communicable disease
9. Obesity
10. Unintentional injuries

Marco Island

1. Access to care
2. Chronic disease
3. Health of older adults
4. Alcohol and drug use
5. Dental health
6. Disabilities
7. Communicable disease
8. Mental health
9. Obesity
10. Unintentional injuries

Naples

1. Access to care
2. Chronic disease
3. Alcohol and drug use
4. Health of older adults
5. Mental health
6. Disabilities
7. Dental health
8. Communicable disease
9. Obesity
10. Unintentional injuries

North Naples

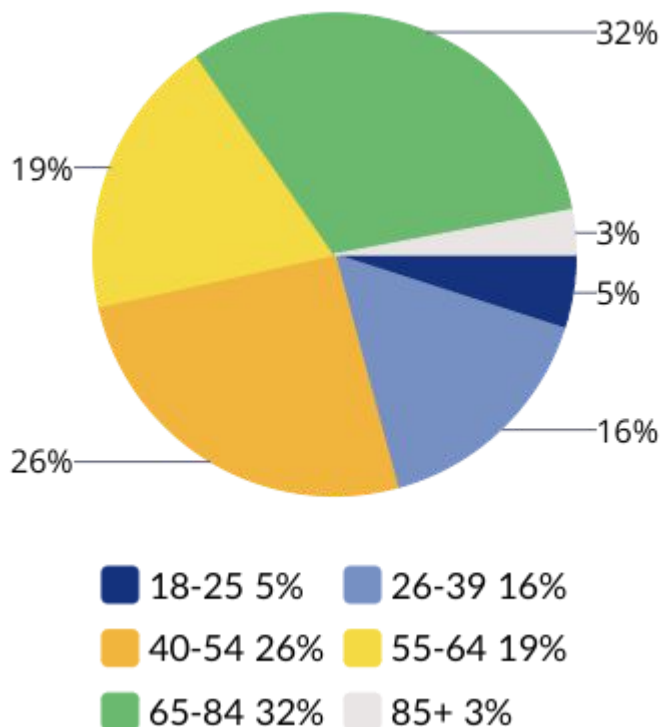
1. Access to care
2. Chronic disease
3. Alcohol and drug use
4. Health of older adults
5. Mental health
6. Communicable disease
7. Dental health
8. Disabilities
9. Obesity
10. Unintentional injuries

Orangetree

1. Access to care
2. Chronic disease
3. Alcohol and drug use
4. Health of older adults
5. Dental health
6. Disabilities
7. Communicable disease
8. Mental health
9. Obesity
10. Unintentional injuries

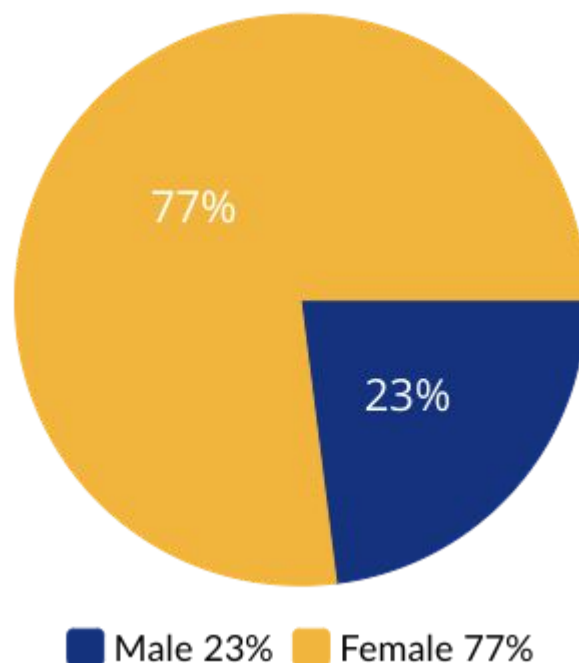
Demographics

Age



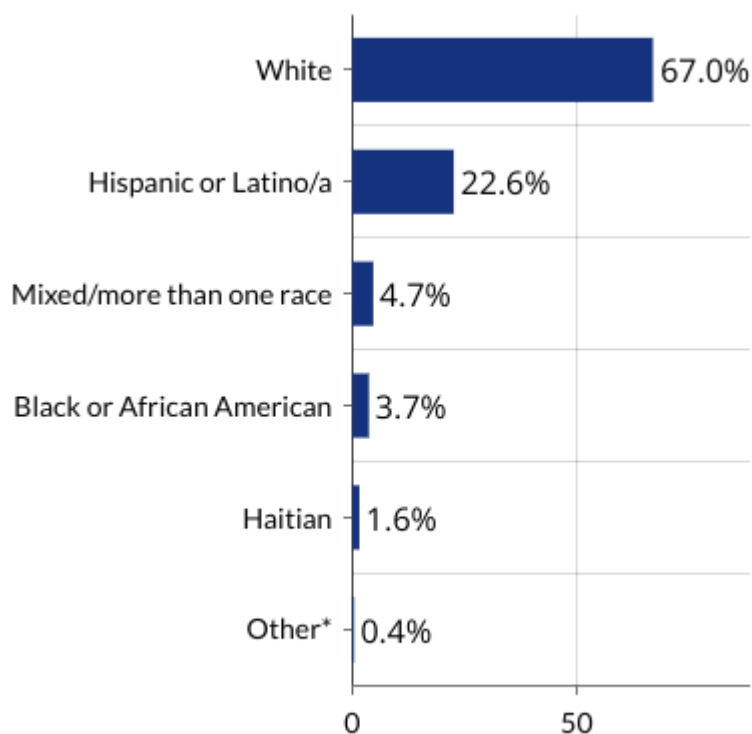
Source: Health Planning Council of Southwest Florida

Sex



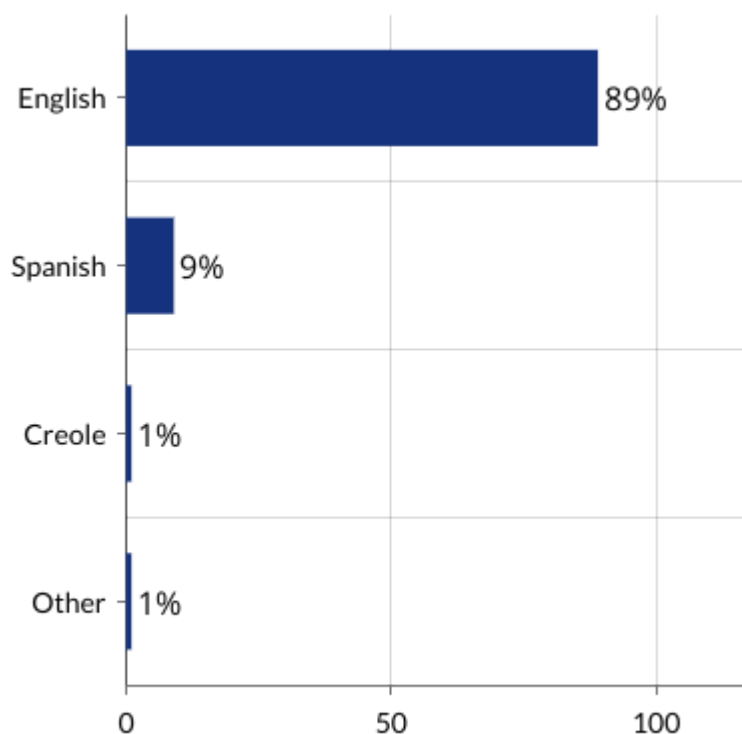
Source: Health Planning Council of Southwest Florida

Race



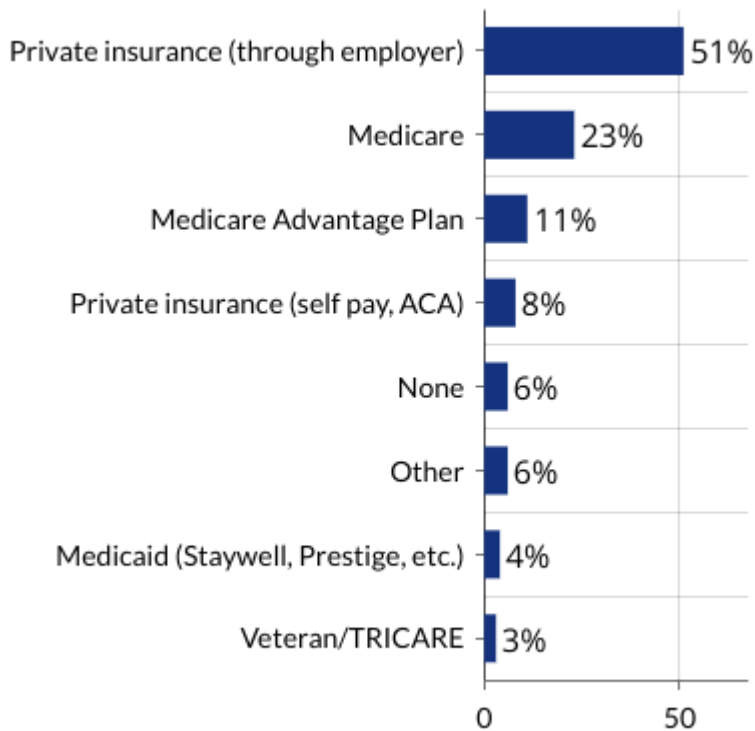
*Other - American Indian or Alaska Native, Asian

Primary Language



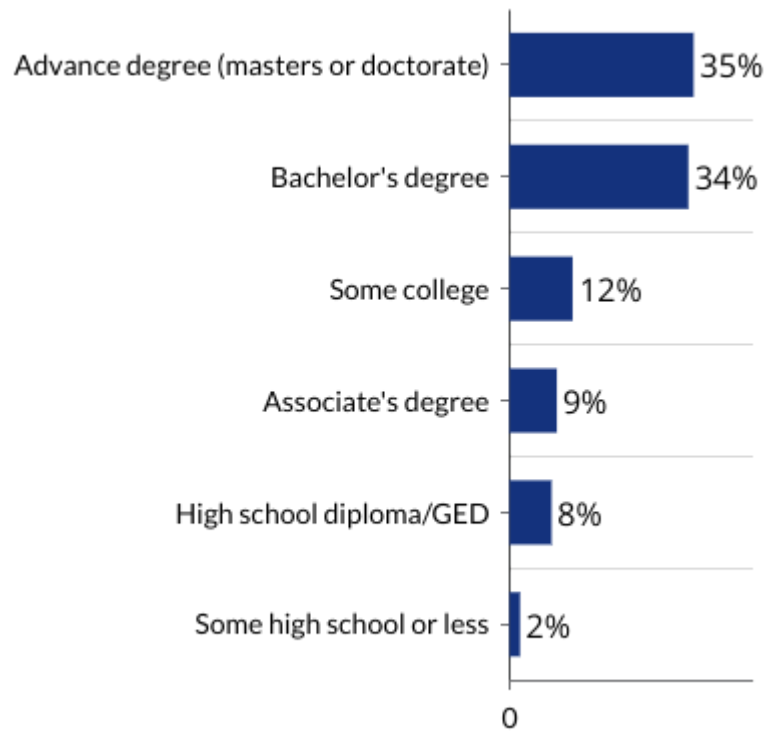
Source: Health Planning Council of Southwest Florida

Insurance Type



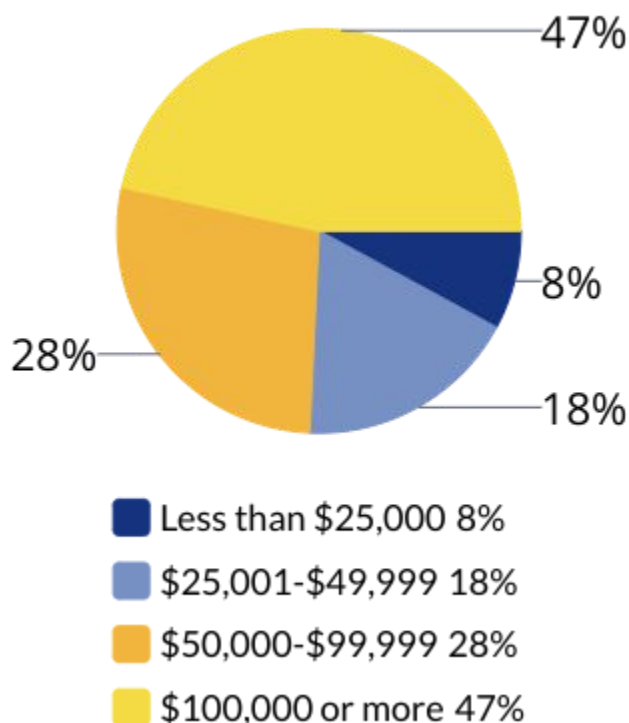
Source: Health Planning Council of Southwest Florida

Highest Level of Education



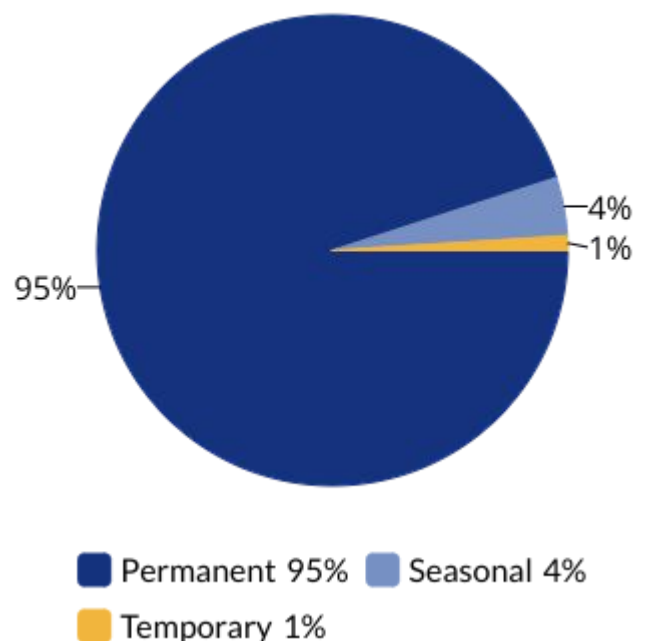
Source: Health Planning Council of Southwest Florida

Annual Household Income



Source: Health Planning Council of Southwest Florida

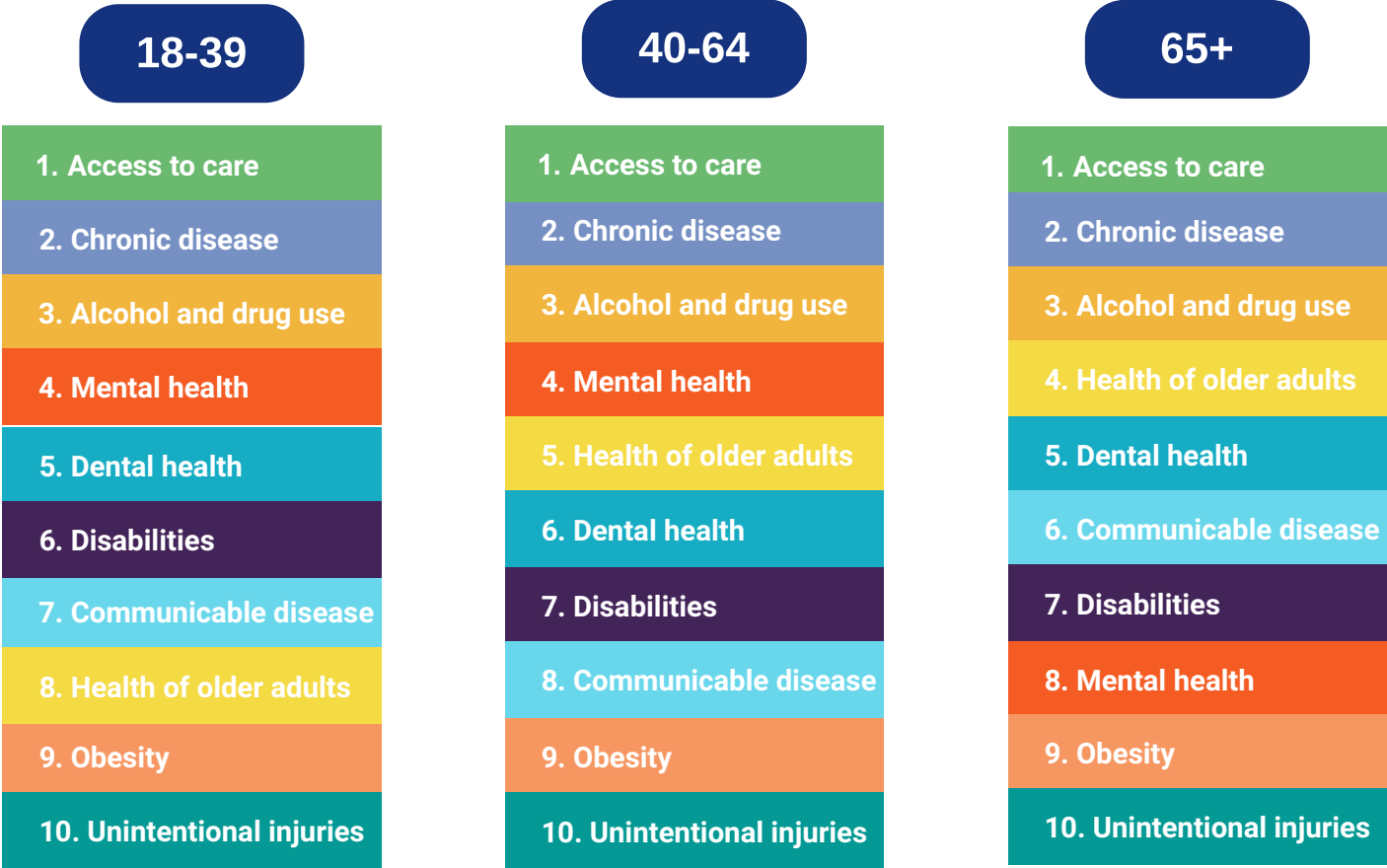
Residency Status



Source: Health Planning Council of Southwest Florida

Survey Responses by Age

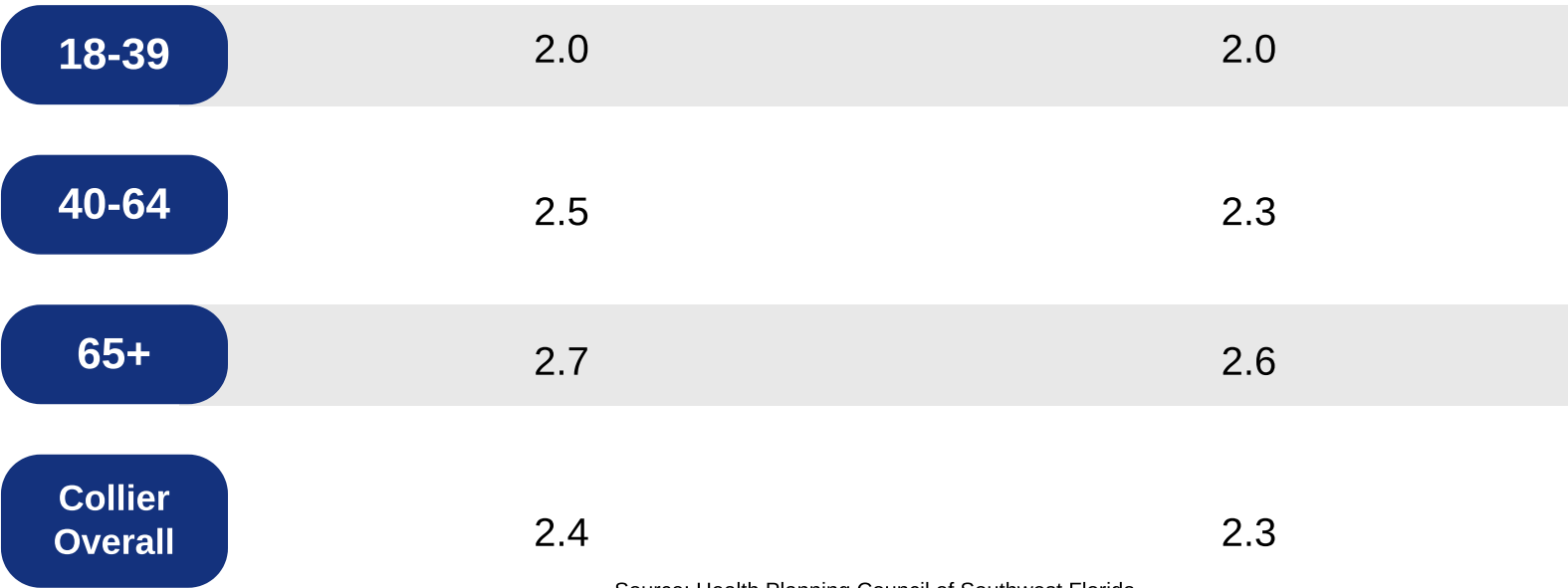
Ranking of Community Priorities



Source: Health Planning Council of Southwest Florida

Community Health Perceptions and Access

General Health of Community Quality of Healthcare in Community



Source: Health Planning Council of Southwest Florida

Survey Responses by Age

Health Concerns

	18-39 (n=81)	40-64 (n=186)	65+ (n=154)	Collier Overall
Access to specialty care	41%	48%	59%	51%
Access to primary care	51%	45%	49%	47%
Aging problems	11%	24%	45%	29%
Not enough doctors	17%	28%	27%	26%
Mental health conditions	36%	25%	3%	19%

Source: Health Planning Council of Southwest Florida

Healthcare Needs

	18-39 (n=81)	40-64 (n=186)	65+ (n=154)	Collier Overall
Affordable housing	70%	56%	34%	51%
More doctors	36%	34%	45%	38%
Financial assistance for healthcare	45%	37%	23%	33%
Additional health services	45%	30%	29%	33%
Mental/behavioral health services	27%	29%	19%	25%

Source: Health Planning Council of Southwest Florida

Survey Responses by Education Level

Ranking of Community Priorities

Less than a Bachelors Degree	Bachelor's Degree	Advanced Degree
1. Access to care	1. Access to care	1. Access to care
2. Chronic disease	2. Chronic disease	2. Chronic disease
3. Alcohol and drug use	3. Alcohol and drug use	3. Alcohol and drug use
4. Dental health	4. Health of older adults	4. Health of older adults
5. Communicable disease	5. Dental health	5. Mental health
6. Health of older adults	6. Mental health	6. Dental health
7. Disabilities	7. Disabilities	7. Disabilities
8. Mental health	8. Communicable disease	8. Communicable disease
9. Obesity	9. Obesity	9. Obesity
10. Unintentional injuries	10. Unintentional injuries	10. Unintentional injuries

Source: Health Planning Council of Southwest Florida

Community Health Perceptions and Access

General Health of Community Quality of Healthcare in Community

Less than a Bachelors Degree	2.2	2.2
Bachelor's Degree	2.5	2.3
Advanced Degree	2.6	2.4
Collier Overall	2.4	2.3

Source: Health Planning Council of Southwest Florida

Survey Responses by Education Level

Health Concerns

	Less than Bachelor's Degree (n=134)	Bachelor's Degree (n=148)	Advance Degree (n=154)	Collier Overall
Access to specialty care	40%	51%	59%	51%
Access to primary care	47%	44%	52%	47%
Aging problems	24%	31%	29%	29%
Not enough doctors	17%	24%	34%	26%
Mental health conditions	24%	14%	21%	19%

Source: Health Planning Council of Southwest Florida

Healthcare Needs

	Less than Bachelor's Degree (n=134)	Bachelor's Degree (n=148)	Advance Degree (n=154)	Collier Overall
Affordable housing	58%	53%	44%	51%
More doctors	33%	39%	42%	38%
Financial assistance for healthcare	42%	30%	30%	33%
Additional health services	35%	32%	32%	33%
Mental/behavioral health services	23%	22%	30%	25%

Source: Health Planning Council of Southwest Florida

Survey Responses by Income Level

Ranking of Community Priorities

Less than 50K	50 - 99K	100K +
1. Access to care	1. Access to care	1. Access to care
2. Chronic disease	2. Chronic disease	2. Chronic disease
3. Alcohol and drug use	3. Alcohol and drug use	3. Alcohol and drug use
4. Dental health	4. Health of older adults	4. Health of older adults
5. Health of older adults	5. Dental health	5. Mental health
6. Communicable disease	6. Disabilities	6. Dental health
7. Disabilities	7. Communicable disease	7. Disabilities
8. Mental health	8. Mental health	8. Communicable disease
9. Obesity	9. Obesity	9. Obesity
10. Unintentional injuries	10. Unintentional injuries	10. Unintentional injuries

Source: Health Planning Council of Southwest Florida

Community Health Perceptions and Access

General Health of Community Quality of Healthcare in Community

Less than 50K	2.2	2.2
50 - 99K	2.4	2.2
100K +	2.6	2.4
Collier Overall	2.4	2.3

Source: Health Planning Council of Southwest Florida

Survey Responses by Income Level

Health Concerns

	Less than 50K (n=101)	50 - 99K (n=114)	100K + (n=187)	Collier Overall
Access to specialty care	41%	48%	57%	51%
Access to primary care	38%	39%	58%	47%
Aging problems	22%	27%	31%	29%
Not enough doctors	18%	23%	33%	26%
Mental health conditions	21%	25%	20%	19%

Source: Health Planning Council of Southwest Florida

Healthcare Needs

	Less than 50K (n=101)	50 - 99K (n=114)	100K + (n=187)	Collier Overall
Affordable housing	56%	61%	47%	51%
More doctors	36%	36%	42%	38%
Financial assistance for healthcare	42%	39%	30%	33%
Additional health services	39%	28%	35%	33%
Mental/behavioral health services	21%	29%	29%	25%

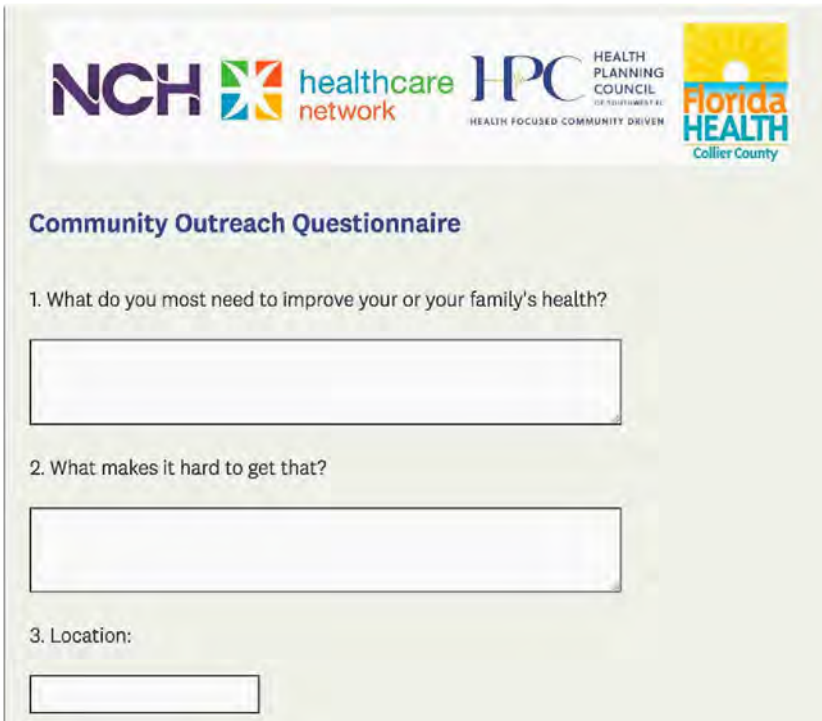
Source: Health Planning Council of Southwest Florida

Community Outreach Questionnaire

In partnership with NCH, the Florida Department of Health in Collier County (DOH-Collier), and Healthcare Network (HN), the Health Planning Council of Southwest Florida (HPC) created a two-question questionnaire to accompany the community survey. The questionnaire was created to provide another opportunity to collect community feedback on health and healthcare in Collier County while conducting community outreach. Outreach workers from the partner agencies asked community members questions and recorded their responses in SurveyMonkey.

The findings of the questionnaire were compiled by HPC and are as follows: The views expressed in these responses are those of members of the community who answered the questionnaire. They do not represent the views or opinions of HPC, nor do they represent the views or opinions of NCH, DOH-Collier, or HN.

Below is a copy of the questionnaire that the outreach workers filled out.



The screenshot shows the top of a questionnaire form. At the top, there are logos for NCH, healthcare network, HPC (Health Planning Council), and Florida Health Collier County. Below the logos, the title "Community Outreach Questionnaire" is displayed. The form contains three numbered questions with text input fields:

1. What do you most need to improve your or your family's health?
2. What makes it hard to get that?
3. Location:



Source: Health Planning Council of Southwest Florida

With the help of the community outreach workers at the partner agencies, we had a total of 123 community members complete the questionnaire. About 60 percent of people who answered the questions were from Immokalee, 29 percent from Naples, and 12 percent from Golden Gate. The Questionnaire revealed several key areas of concern and barriers to healthcare in Collier County.

The most frequently mentioned needs were:

- Access to healthcare
- Dental care
- Transportation
- Financial assistance

The most common barriers were:

- Scheduling and availability issues
- Financial constraints
- Transportation problems

Community Outreach Questionnaire

Access to Healthcare

Members of the community emphasized the need for improved access to medical attention, access to a hospital, and general healthcare services. Some of the specific concerns included difficulty obtaining appointments, long wait times, and limited availability of services. When talking about difficulties with accessing healthcare in Collier County, some respondents pointed out the need for a doctor who is caring and responsive, as well as wanting more time with the doctor. The need for having access to information on services available and information about the medication they have been prescribed was also mentioned.

Dental Care

A significant number of community members highlighted the need for better dental care services, specifically for adults. The primary barrier to accessing this service was the difficulty of getting appointments and finding a provider that accepts their dental insurance.

Transportation

Transportation issues were a recurring theme with many respondents when identifying a significant barrier to accessing healthcare in Collier County. Some of the identified transportation-related problems included the inconvenience of specialist locations, a lack of knowledge on how to get to places using the bus system, and bus schedules not matching their needs. A community member acknowledged that there is a small demand for taxi service, which could hinder a taxi service from serving the area. Transportation is a true hindrance to accessing healthcare when it is outside of the county. There isn't a bus access to get community members between Collier and Lee Counties.

Financial Barriers

Financial constraints were frequently mentioned, including the high cost of care, lack of health insurance, and the unaffordability of healthy foods. A high frequency of respondents stated that having access to healthy food would improve their and their families' health. Currently, there is a lack of grocery options, which hinders access to affordable, healthy foods in the community. Some community members currently only have access to small local shops that don't offer an array of healthy foods. Other community members expressed concerns about the availability of affordable housing, the availability of work that pays enough to live in the area, and the unaffordable cost of child care.

Availability and Scheduling

Scheduling difficulties and long wait times were stated as obstacles to accessing needed healthcare services. Some respondents said they had to take time off work to access healthcare services because they are only offered during the workday. A barrier that was mentioned consistently when talking about accessing healthcare services is the limited availability of appointments. Some also mentioned that it can be difficult to make the appointments as well.



Source: Health Planning Council of Southwest Florida and Build LLC (Baker Senior Center Naples)

NCH, the Florida Department of Health in Collier County (DOH-Collier), and the Healthcare Network (HN) decided that a focus group should be conducted to gather additional community feedback regarding health and healthcare in Collier County, as part of the community feedback section of the Community Health Needs Assessment (CHNA). The Health Planning Council of Southwest Florida (HPC) designed the focus group questions, which were reviewed and improved by NCH, DOH-Collier, and HN.

A community champion was identified through NCH, DOH-Collier, and HN. The community champion was used to help with promoting and inviting individuals from the community to gather for the focus group. A flyer was created to help promote the focus group; it contained a call for participation, location, time, and date.

In April 2025, a focus group was conducted with a group of seniors at a local senior center in Naples. Before the focus group began, HPC had the participants fill out a demographic form. In the focus group, there were nine individuals who identified as permanent residents and two seasonal residents of Collier County. Fifty-five percent of the participants were female, while 45 percent were male. The majority (82%) of the participants identified as white, and 18 percent identified as Indian. The demographic questionnaire included a question about annual household income. Ten percent of participants reported making less than \$25,000 a year, 40 percent stated they make between \$25,001 and \$49,999, and 50 percent reported making \$100,000 or more a year. All participants were college-educated, ranging from some college experience to holding either a bachelor's or advanced degree.

Focus Group

The focus group session had a facilitator and a recorder. Prior to the start of the focus group, a script was read aloud describing the purpose of the focus group, ground rules, and instructions on the process. The focus group started with an icebreaker. The facilitator asked if each participant could state their name and how long they've lived in Collier County. The questions that were asked during the focus group consisted of the following:

- General thoughts on health and well-being
- What are some things in the area that have positively impacted their health or the health of their family
- The problems or barriers to maintaining good health and well-being
- Groups of people who need additional services or assistance in improving their health and well-being
- What is needed to improve the health of the community

Overall Perceptions of the Healthcare System

Participants in the focus group expressed their overall frustration with accessing primary care physicians in Collier County. Over the past couple of years, they have observed many physicians transitioning to the concierge model. There was also a desire for more personal interactions with doctors. When they finally have the chance to see a doctor, they feel rushed. During visits to either a doctor's office or a hospital, they can sense that the staff is overwhelmed. Another frustration mentioned by the participants was the lengthy wait times for specialist referrals. They typically have to wait a few months to see the specialist they were referred to.

A significant concern was the lack of coordination and communication between different healthcare systems/offices. This leads to difficulty in continuity of care and requires patients to manage their own information transfer. Focus group participants expressed frustration with the challenges of using patient portals and technology to access healthcare and their health information. They felt that the healthcare system wasn't considerate enough of those who are uncomfortable with digital access.

Community Strengths Supporting Health and Healthcare

Unanimously, the focus group attendees stated that the availability of senior centers (like the Naples Senior Center) and other local organizations was a highly valued asset to the community. They provide exercise classes, social engagement, and various programs that help combat isolation and encourage seniors to stay active. Services provided by local organizations like the Lions Club, which provided free eye exams, were recognized as a positive resource. Additionally, having access to outdoor activities and walking paths was noted as a community strength. Some participants discussed the positive past experiences at NCH.

Barriers to Health and Well-being

We asked participants what some problems or barriers are for you or your friends/families in maintaining good health and well-being. Some barriers that were identified were transportation, cost and access, communication and language, technology, system navigation, and gaps in services.

The lack of reliable and accessible public transportation was a commonly stated barrier among the group. It was noted that accessing public transportation was even more difficult for those with disabilities. Challenges in obtaining affordable medication, dental care, and vision care were highlighted. Many were aware that financial assistance programs exist through medication manufacturers, but they noted that navigating these programs was very difficult. Trying to navigate a language barrier was mentioned as another barrier to accessing care.

Many seniors found technology, like patient portals, challenging. They expressed a desire for intergenerational tech support programs to help them become more comfortable with using technology on their own. The amount of cumbersome paperwork and lack of electronic medical record (EMR) coordination among the healthcare entities in Collier County was a consistent frustration for many seniors in the focus group.

It was noted that there are insufficient mental health services in Collier County, particularly for those with severe conditions. They expressed the need for more senior centers distributed throughout the county. In addition to the senior center, for which we were conducting the focus group, there was one more senior center serving the county. It was stated that this location cannot adequately serve the volume of seniors residing in Collier County. A lack of affordable activities, especially for veterans, was identified. Options for nursing home care, Alzheimer's, and dementia support in the area are limited. Some participants mentioned that there is a need for affordable fresh food and nutrition classes.

Identified Priorities Needs

We asked participants to list what was needed to improve the health of the community. Below was what was listed:

- **EMR record coordination between entities**
- Affordable activities
- Affordable fresh foods
- Transportation, especially for those with disabilities
- **Mental health services**
- Availability of primary care
- **Lack of affordable dental services**
- **Lack of affordable vision services**
- Nutrition and food classes
- Additional senior services
- Class to navigate Medicaid and health insurance
- Trusted help
- Access to gas cards
- Additional nursing homes
- Alzheimer's and dementia care

Participants were then asked if they were put in charge of Collier County, which issues from the list would they address first. After going around the group, the top item identified as most important was the coordination of EMR records between identified healthcare entities, followed by increasing mental health services and increasing access to affordable dental and vision services. They said they would pursue legislative or regulatory action to mandate EMR interoperability, potentially offering financial assistance to systems that would comply. Next, they would increase county-level leadership and funding, improve provider reimbursement, and explore successful service models from other areas. Participants wanted to address the need for respite care for caregivers (noting the Baker Senior Center as a positive example). Then they would explore solutions to mitigate high costs due to the lack of Medicare coverage. They also acknowledge that many seniors seek care outside the United States due to expense, and address concerns about potential upselling of unnecessary dental and vision services.

Community Leader Interviews

The Health Planning Council of Southwest Florida (HPC) conducted fourteen key informant interviews in 2025 with the cooperation of NCH, the Florida Department of Health in Collier County (DOH-Collier), and the Healthcare Network (HN). The purpose of conducting the interviews was to better understand the perspectives of key community leaders on the health and healthcare needs of Collier County residents. These conversations were intended to ascertain opinions among key individuals likely to be knowledgeable about the community and who are influential over the opinions of others about health concerns in the area. The findings provide qualitative information and reveal factors affecting the views and sentiments regarding healthcare services in Collier County. A summary of community leaders' opinions is reported without judging the veracity of their thoughts and opinions.

Methodology

The steering committee, consisting of NCH, DOH-Collier, HN, and HPC, compiled a list of possible interview subjects. The list included healthcare providers, healthcare consumers, county government officials, and representatives of local businesses and community organizations. HPC staff conducted the interviews over Zoom. The average interview lasted between twenty-five and forty-five minutes. These interviews were conducted between February and April of 2025. The interviewees were told that none of their comments would be directly attributed to them but that a list of all participants would be included in this report. All reports were conducted using a standard questionnaire.

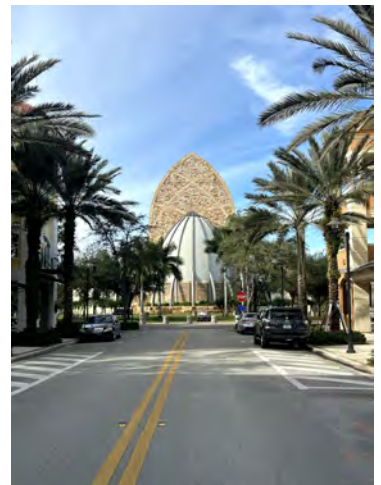
Overall Impression of Health in Collier County

HPC staff asked the interviewees to share their overall impression of health in Collier County, including the services available to meet healthcare needs and the general health of community residents. Listed are the key themes from the responses to this question:

- Access to care is a major challenge
- Gaps in specific healthcare services: behavioral healthcare, specialty care, pediatric care, OB/Gynecological care, dental, optometry, and audiology
- Lack of affordable healthcare services
- Strong network of nonprofit organizations
- Lack of affordable housing for low-income population
- Lack of affordable workforce housing
- Increase in need for community awareness of resources and providing education on the resources
- Challenges of accessing transportation



Source: Health Planning Council of Southwest Florida



Community Leader Interviews

Most Pressing Health Needs

HPC staff asked the interviewees what they think are the most pressing health needs in Collier County. Many of the identified pressing health needs in Collier County are deeply intertwined, with the core issue being the affordability and accessibility of comprehensive healthcare services, compounded by specific shortages in behavioral health, specialty, pediatric, and maternity care, and significant logistical challenges related to transportation and affordable housing. Listed are some of the responses from community leaders to this question:

- Need access specialists
- Diagnostic services
- Fall prevention/education
- Need healthcare professionals (difficulty recruiting)
- Healthcare navigators
- Access to primary care
- Behavioral healthcare
- Maternity and prenatal care
- Access to pediatric care
- Affordable dental care

To follow up, we asked the community leaders if they had any thoughts on local actions that can help address any of the needs they mentioned. Several responses highlighted the importance of community-wide efforts, including multi-agency involvement and public-private partnerships, to tackle health challenges more effectively. Actions also include educating families and the community on available services and how to access them, and enhancing awareness of existing insurance coverage and market providers. Efforts to recruit and retain medical professionals by addressing factors like the cost of housing and providing competitive compensation were also mentioned.

Important Health Issues by Population

Community leaders were asked to provide their thoughts on the most important health issues affecting different populations in Collier County. The highlighted populations were children, teens/adolescents, adults, and the elderly.

Children:



- Basic pediatric care
- Obesity
- Behavioral health

Adults:



- Access to specialty care
- Behavioral healthcare
- Access to primary care

Teens/adolescents:



- Behavioral health
- Smoking/vaping issues

Elderly:



- Access to senior centers
- Isolation
- Alzheimer's
- Fall prevention

Source: Health Planning Council of Southwest Florida

Community Leader Interviews

Critical Challenge Facing Residents and Next Steps

Of all the needs and services discussed throughout the interviews, we asked key informants what they believed was the most critical challenge facing Collier County residents.

- Access to affordable care
- Behavioral health services
- Access to transportation
- Affordability of living
- Lack of primary care
- Specific service shortages (pediatric, specialty care, and maternity care)

After identifying the most critical challenges facing residents, community leaders were asked whether any actions were needed to address these challenges and who they believed should be responsible for implementing them. Key actions include leveraging improved data for decision-making, enhancing community education on available services, and actively recruiting and retaining medical professionals. Additionally, efforts should focus on strengthening the roles of non-profits and improving transportation infrastructure. Responsibility is viewed as shared, necessitating a collective impact model with public-private partnerships to foster a healthier community.

Interviewed Community Leaders

Mary Beth Geier
Florida Director
Richard M. Schulze Family Foundation

Dr. Tom Felke
Professor/Associate Dean
Florida Gulf Coast University

Noemi Perez
President & CEO
The Immokalee Foundation

Dan Summers
Director
Collier County Bureau of Emergency Services

Dianna Dohm
Executive Director
Marco Island Area Chamber

Barbara Bacigalupo
Director of Operations Support
Avow Hospice

Kimberly Kossler
Administrator & Health Officer
Florida Department of Health in Collier County

Jamie Ulmer
President and CEO
Healthcare Network

Dr. Jaclyn Faffer
President/CEO
Baker Senior Center Naples

Jorge Aguilera
Deputy Chief
North Collier Fire Control & Rescue District

Tiffani Mensch
President and CEO
United Way Collier and the Keys

Maria Ellis
Coordinator, Mental Health Services
Collier County Public Schools

Lindsey Touchette
Vice President of Community Engagement
Collier Community Foundation



2025 Collier County Community Input

Prepared by the Health Planning Council of Southwest Florida, Inc.

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Collier County Health Needs Assessment 2025



Prepared by



In Partnership With



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Population



Source: Photo courtesy of the Health Planning Council of Southwest Florida

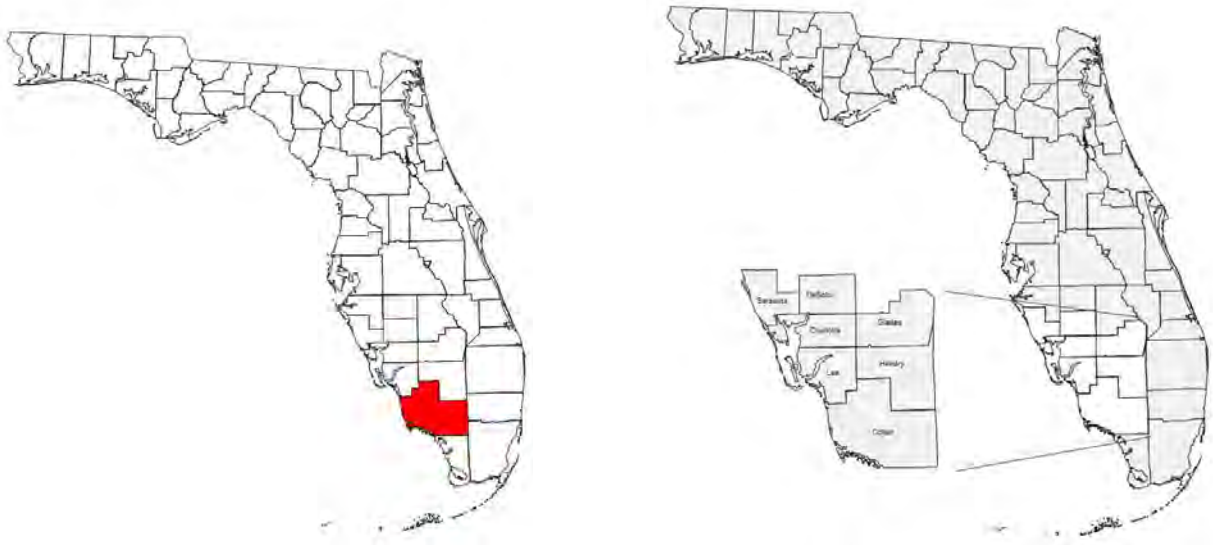
This section of the Community Health Assessment (CHA) for Collier County provides a detailed overview of the demographic characteristics of our community. It analyzes population growth, age distribution, and gender, as well as race and ethnicity. Recognizing the unique dynamics of Collier County, this section also examines the seasonal population and the population of people with disabilities. Understanding these population characteristics is essential for interpreting health data, identifying areas for improvement, and tailoring services to meet the diverse needs of Collier County residents.

Population Growth, Age Distribution, and Gender

The number of people in a community is the leading determinant of healthcare services. Collier County has a population of over 390,944 (2023) in southwest Florida. The county also shares borders with the following counties: Hendry to the north, Broward to the east, Miami-Dade to the southeast, Monroe to the south, and Lee to the northwest. Collier is one of seven counties in southwest Florida that comprise the Local Health Planning District 8 as designated by the Florida Agency for Health Care Administration (AHCA). Naples is the county seat and largest city. Collier

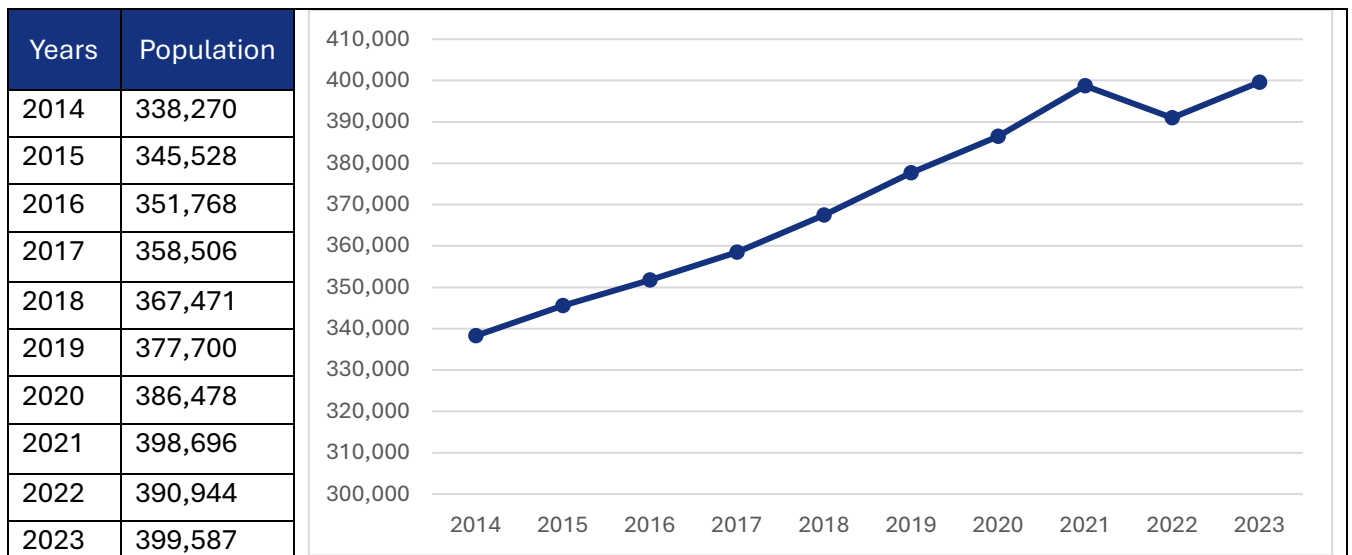
2025 Collier County Community Health Assessment: Population

County is 2,304.93 square miles; about 12 percent of the area is covered by water. It is the second-largest county in Florida after Palm Beach County. According to the Florida Office of Economic and Demographic Research (EDR), in 2024, the county had a population density of about 204.5 persons per square mile compared to the state average of 429 persons per square mile. Collier County is Florida's 19th most populous county, according to EDR.



Between 2014 and 2023, the resident population of Collier County grew at a swift pace, except for a dip in 2022 when major hurricane Ian hit the county. In terms of actual numbers, Collier County's population increased by 61,317, or slightly more than 18 percent, from 338,270 in 2014 to a total of 399,587 by 2023.

Exhibit P1: Resident Population in Collier County, 2014-2023

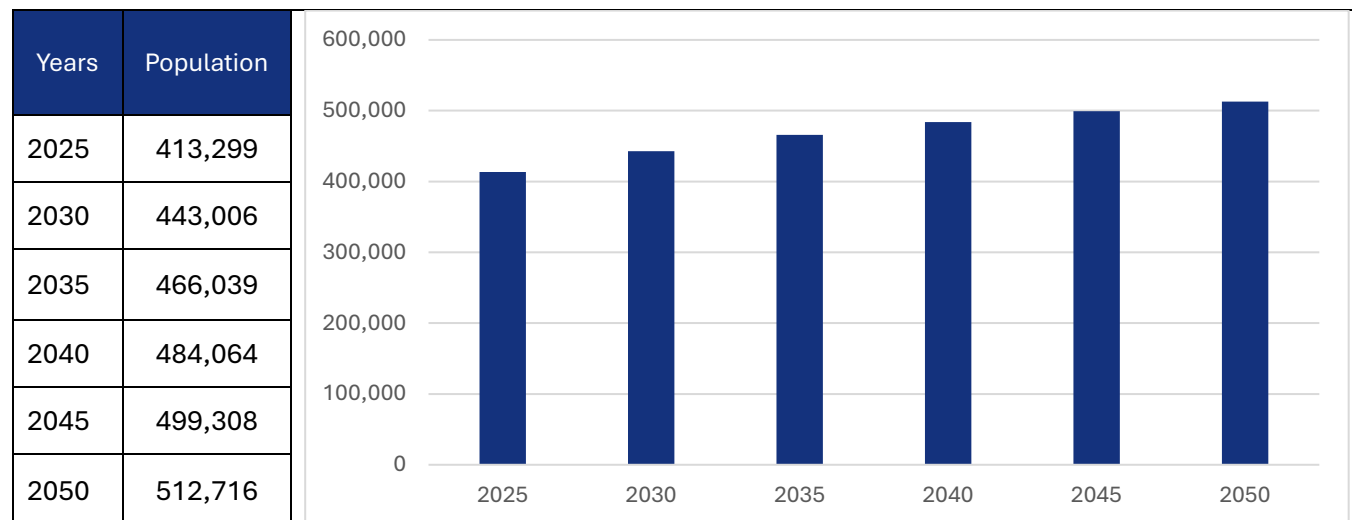


Source: Florida Legislature's Office of Economic and Demographic Research (EDR)

2025 Collier County Community Health Assessment: Population

In addition to growing by 13,712 between 2023 and 2025, the resident population of Collier County is projected to increase by another 99,417 by 2050, a growth of about 24 percent over the next 25 years.

Exhibit P2: Estimated Population in Collier County, 2025-2050



Source: Florida Legislature's Office of Economic and Demographic Research (EDR)

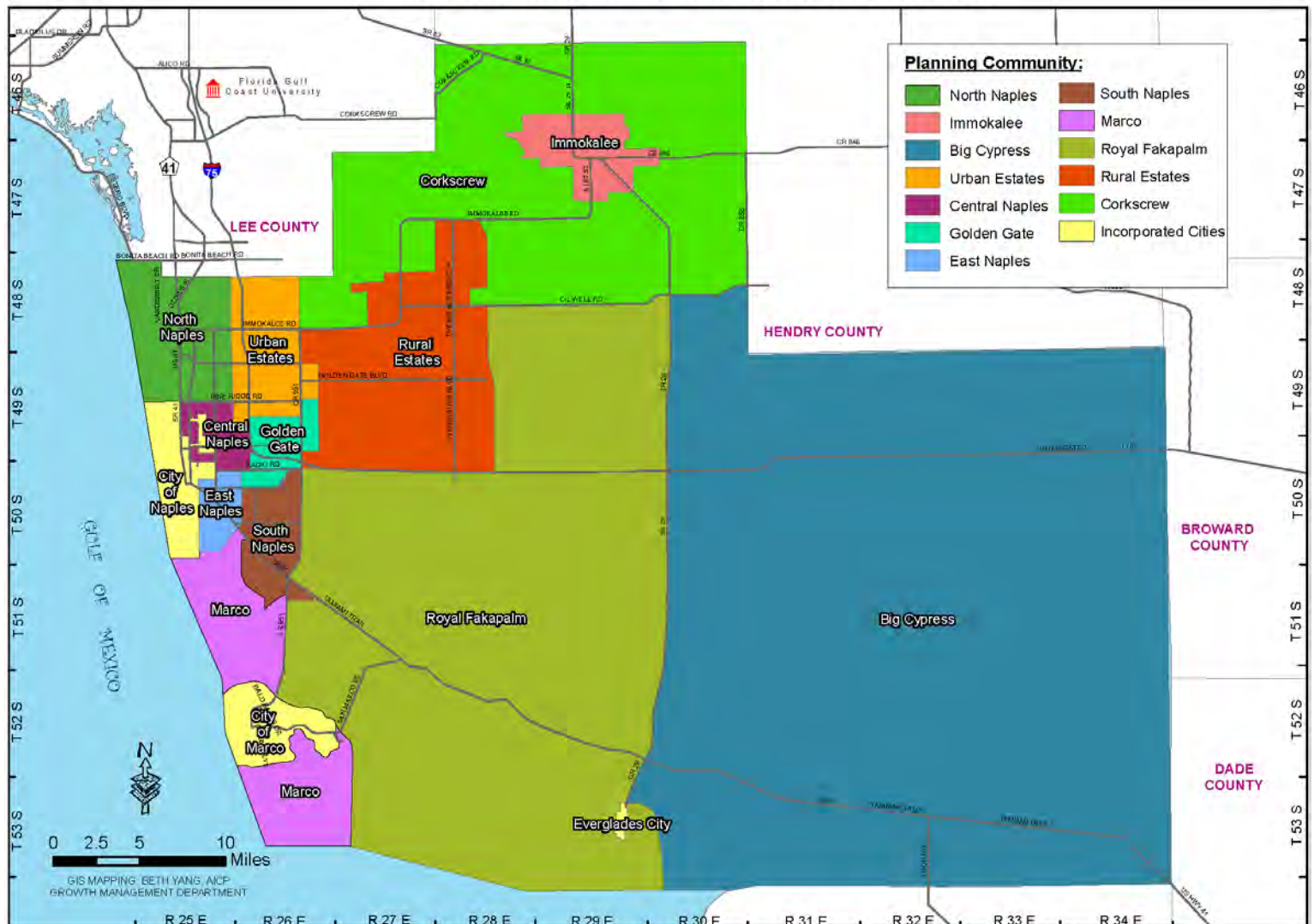
In 2020, the three communities with the highest population were North Naples, Urban Estates, and Rural Estates, in that order. It is projected that those will remain the three most prominent communities by population; however, Corkscrew, Marco, and Royal Fakapalm are expected to have the fastest rate of growth. A map of the communities is below the table.

Exhibit P3: Permanent Population Estimates and Projections by Collier County Communities, 2020, 2030, 2039

Collier Community	2020	2030	2039	% Population Change 2020-2039
North Naples	58,757	61,745	63,489	7.5%
South Naples	32,558	34,348	35,195	7.5%
Central Naples	20,129	20,578	20,641	2.5%
East Naples	23,168	25,953	27,476	15.7%
Golden Gate	48,793	49,675	49,853	2.1%
Urban Estates	51,439	57,683	61,261	16.0%
Rural Estates	50,886	68,034	77,558	34.4%
Marco	2,052	2,871	3,412	39.9%
Royal Fakapalm	20,068	28,371	32,963	39.1%
Corkscrew	11,205	22,494	29,044	61.4%
Immokalee	24,616	25,845	26,507	7.1%
Big Cypress	115	121	124	7.2%

Source: Collier County Comprehensive Planning Section, data prepared May 16, 2023

COLLIER COUNTY PLANNING COMMUNITY MAP



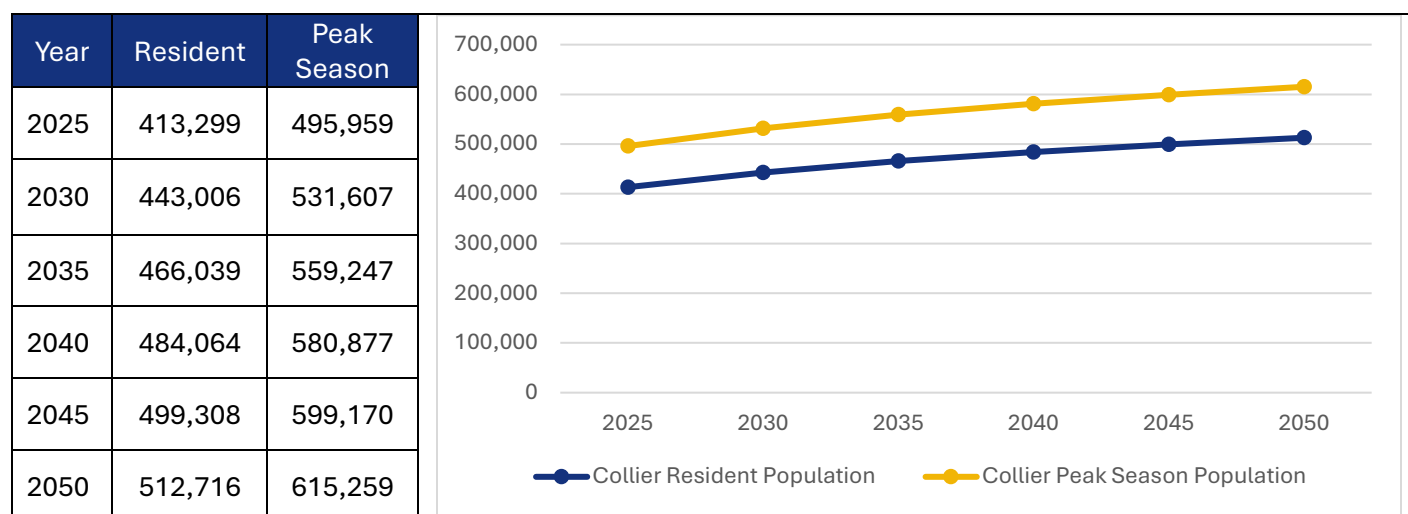
Source: Collier County Comprehensive Planning Section, data prepared May 16, 2023

Like many Florida counties, Collier County draws a relatively large number of seasonal residents and visitors during peak season and year-round. The most significant proportion of seasonal residents is those 65 years of age and older.

Collier County government estimates that the population during peak season increases by 20 percent over the permanent population. This has a significant impact on the use of resources and the ability to serve the population. Using this methodology, by 2050, the population during peak season could be 615,259.

2025 Collier County Community Health Assessment: Population

Exhibit P4: Collier County Resident and Peak Season Population Projections, 2025-2045



Source: Florida Legislature Office of Economic and Demographic Research

In Collier County, as in all counties in the United States, mortality rates are higher for males than for females of all ages. This variance in death rates results in life expectancy at birth being, on average, 5 years greater for females than males. This ultimately results in a more significant female population beginning around 45-49 years of age and increasing over males for every age group thereafter.

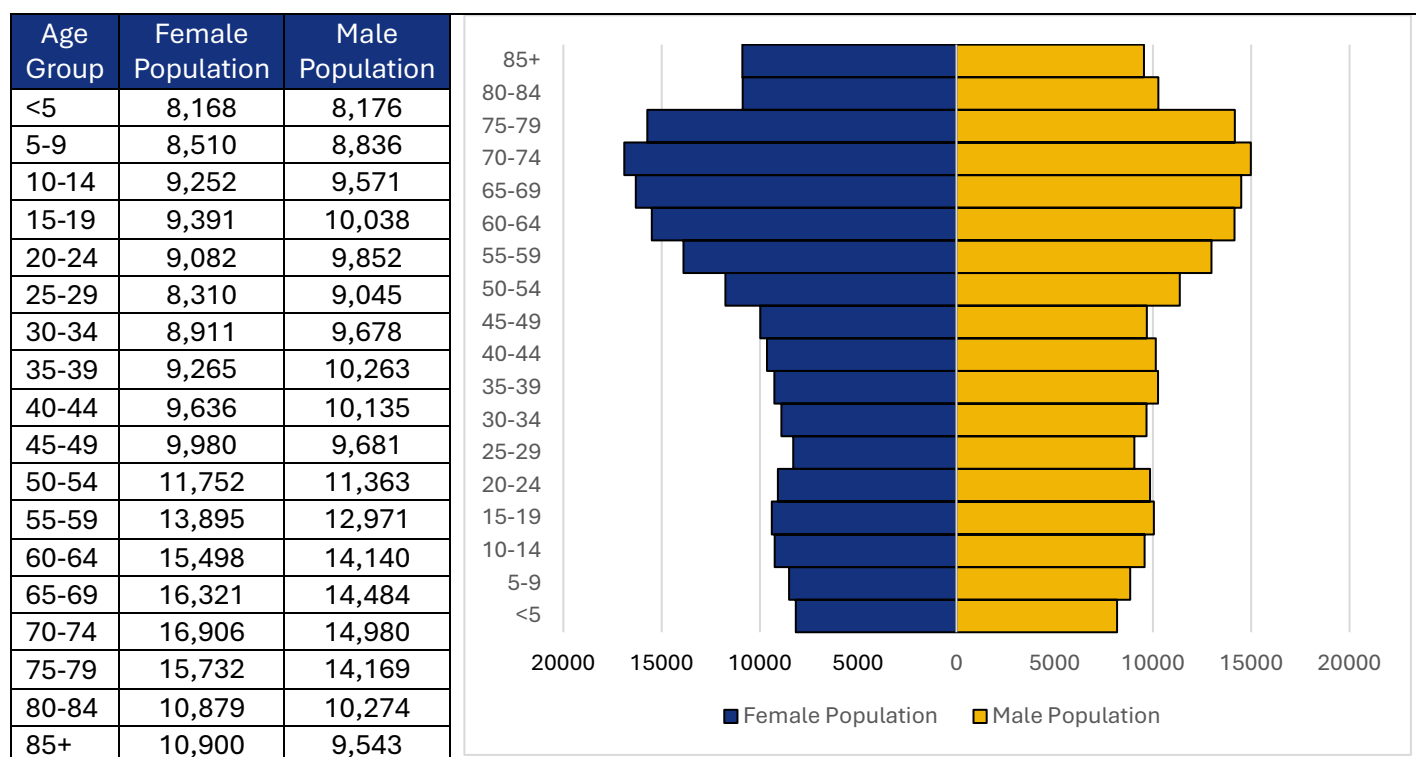
This demographic change was produced by the “baby boomer” cohort, which results from this generation entering and spanning middle age to their retirement years. This evident demographic shift will significantly impact healthcare access and provision and socio-economic dynamics for Collier County and Florida during the 21st century.



Source: Photo courtesy of the Health Planning Council of Southwest Florida, Inc.

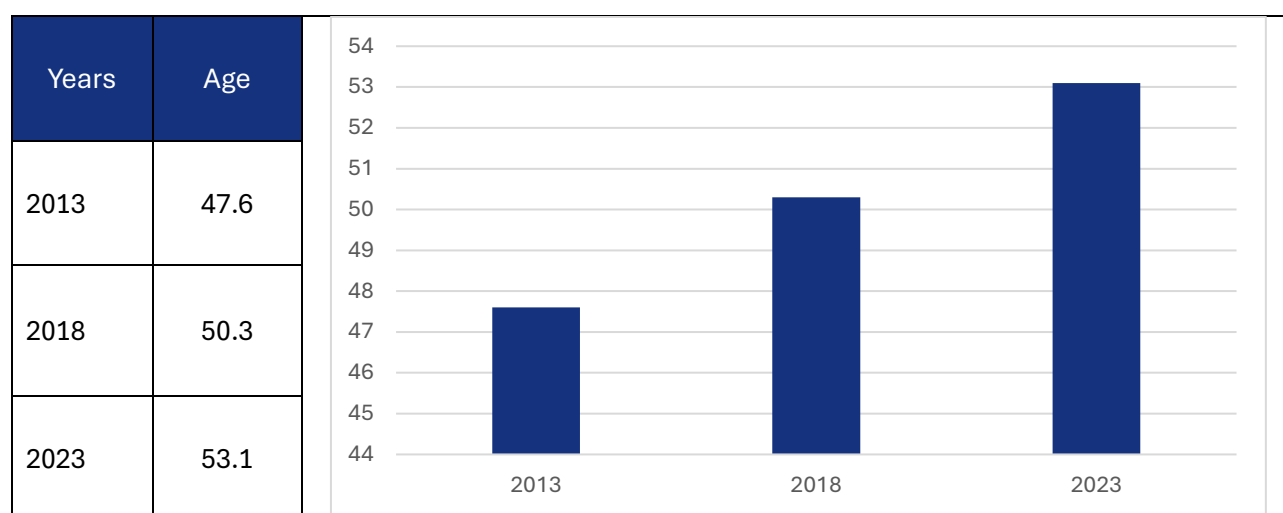
2025 Collier County Community Health Assessment: Population

Exhibit P5: Population by Age Distribution and Gender, Collier County, 2023



The median age increased in Collier County by 5.5 years between 2013 and 2023 (47.6 to 53.1).

Exhibit P6: Collier County Median Age, 2013, 2018, 2023



2025 Collier County Community Health Assessment: Population

Race and Ethnicity

The population of Collier County is becoming more diverse. Between 2003 and 2023, the black and other populations grew more quickly than the white population.

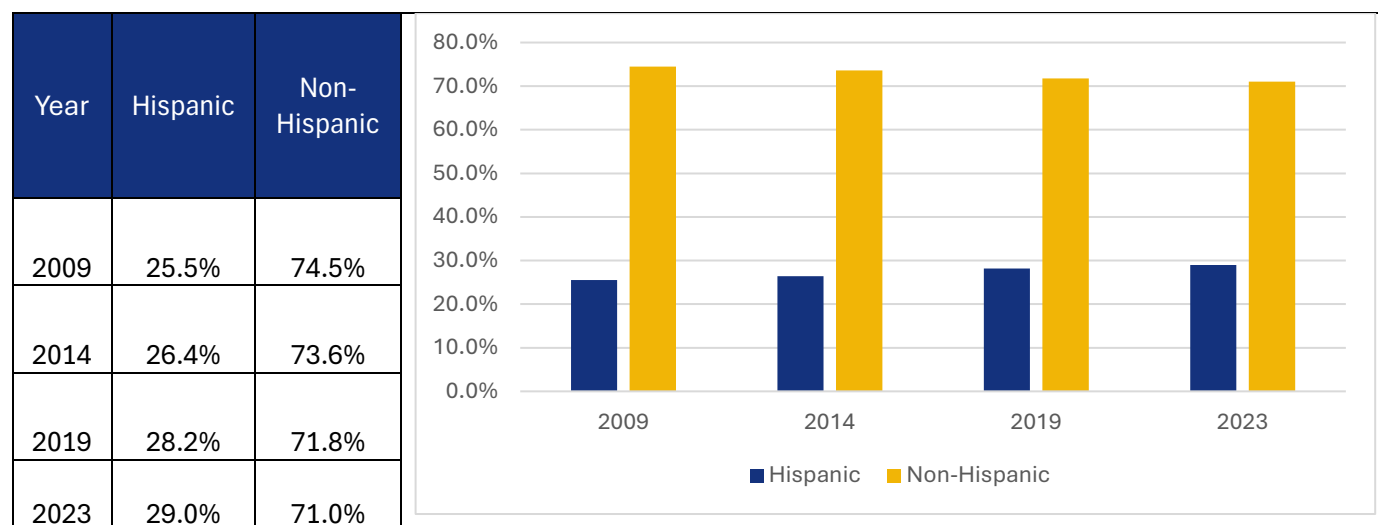
Exhibit P7: Collier County Population by Race, 2003, 2013, 2023

	2003		2013		2023	
	Total	Percent	Total	Percent	Total	Percent
White	262,325	91.9%	300,655	89.9%	356,415	89.2%
Black	17,023	6.0%	23,871	7.1%	28,798	7.2%
Other	6,064	2.1%	9,729	2.9%	14,374	3.6%

Source: Florida Legislature Office of Economic Demographic Research

It should be noted that race and ethnicity are tracked separately in the State of Florida. The Hispanic population in Collier County grew from 25.5 percent in 2009 to 29 percent in 2023.

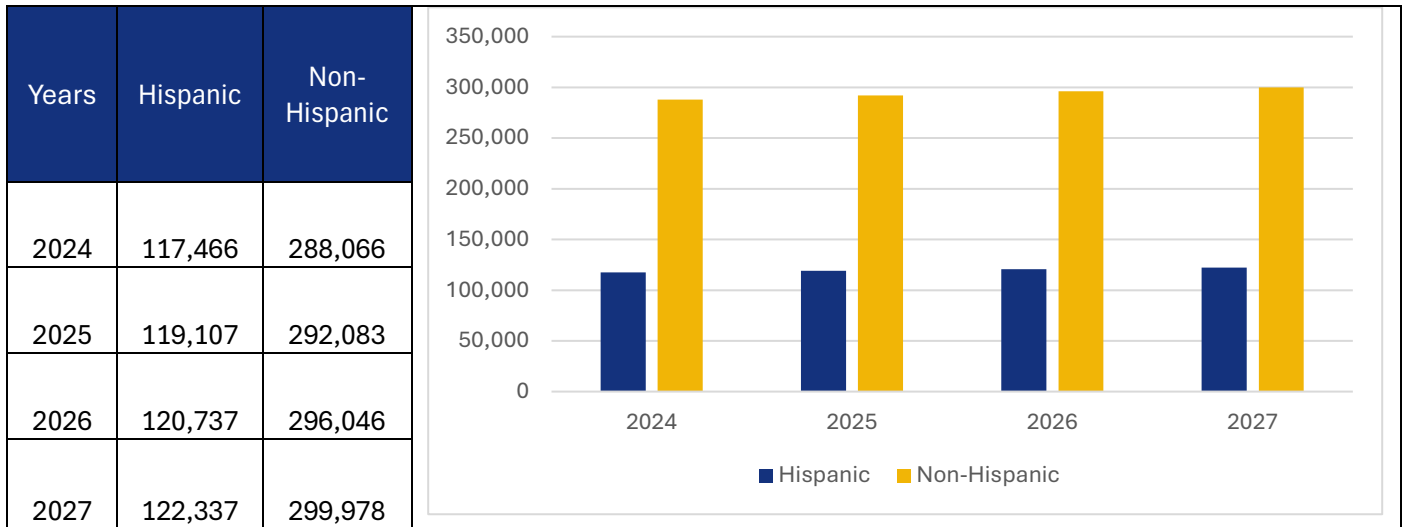
Exhibit P8: Collier County Population by Ethnicity



Source: Florida Legislature Office of Economic Demographic Research

The upward trend of the Hispanic population growth is expected to increase annually by approximately 15.2 percent between 2020 and 2025. In 2025, the Hispanic population in Collier County is projected to surpass 120,000.

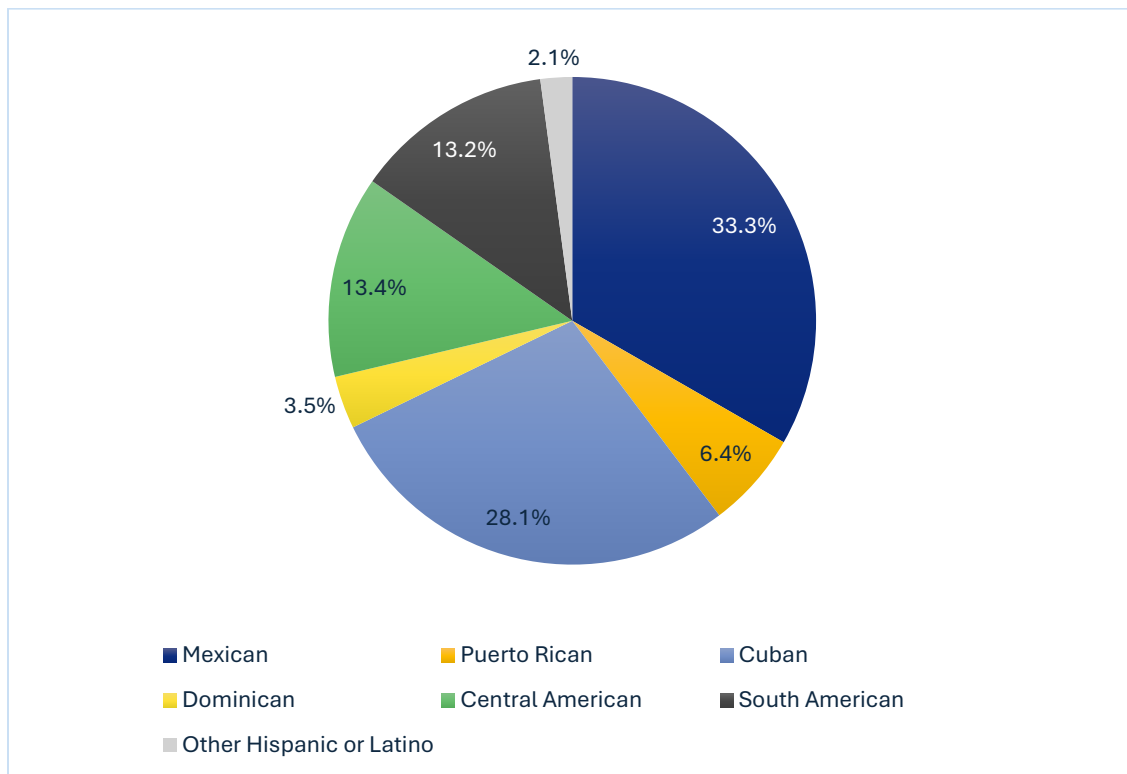
Exhibit P9: Population Projection by Ethnicity in Collier County, 2024-2027



Source: Florida Legislature Office of Economic Demographic Research

Among people in Collier County who identify as Hispanic or Latino, those of Mexican origin (33.3 percent) are the largest group. The following are the most common origins: Cuban (28.1 percent), Central American (13.4 percent), and South American (13.2 percent).

Exhibit P10: Hispanic or Latino Origin, Collier County, 2023



Source: United States Bureau of the Census, American Community Survey, Table B03001

2025 Collier County Community Health Assessment: Population

Between 2019 and 2023, the number of foreign-born residents increased to account for a little over 26 percent of the total Collier County population in 2019. Most foreign-born residents were from Latin America (74%), followed by European residents (15%).

Exhibit P11: Collier County Population by Place of Birth, 2019, 2023

	2019		2023	
	Total	Percent	Total	Percent
Born in Florida	91,267	22.6%	87,604	22.8%
Born in another state in the US	202,752	50.1%	188,647	49.0%
Born outside of the US*	82,60	2.0%	7,157	1.9%
Foreign-born+	102,031	25.2%	101,494	26.4%

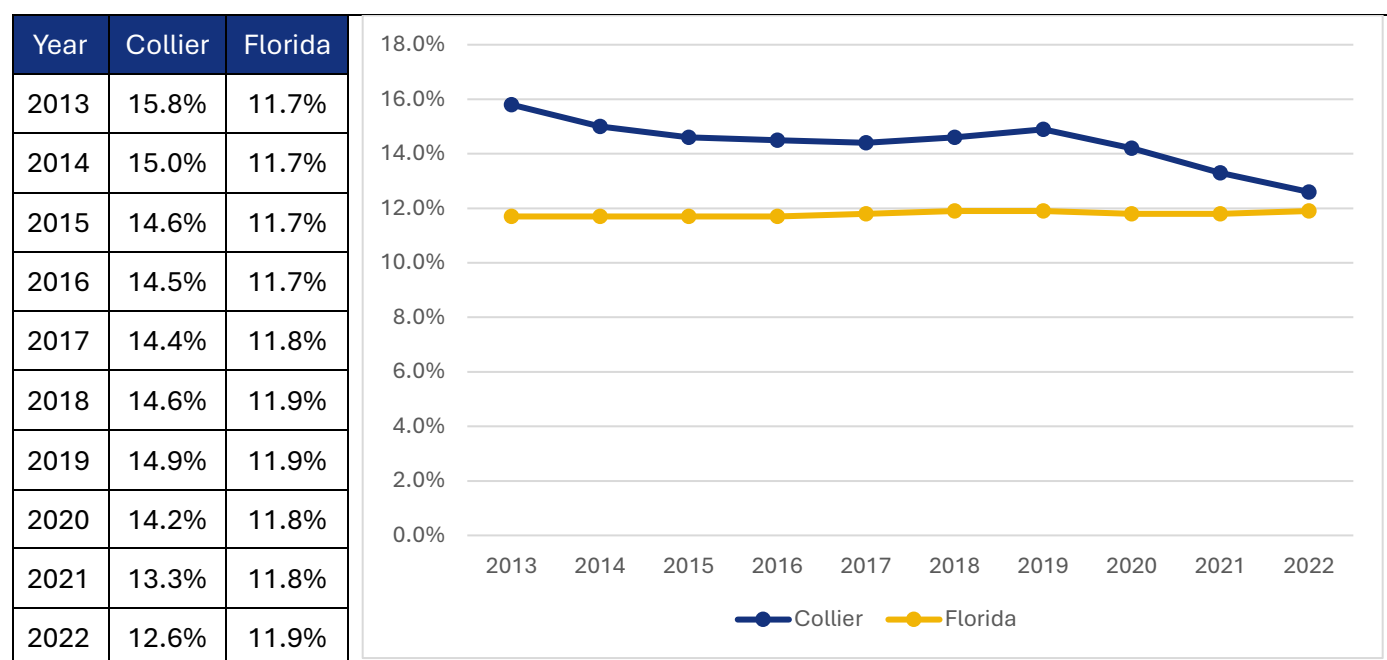
Source: United States Bureau of the Census, American Community Survey, Table B05002

*Persons born outside the United States are residents or citizens born abroad.

+ Foreign-born refers to persons who were not US citizens or residents when born outside of the country

The demographic transitions impact socio-cultural influences throughout the county, within households, and in the educational system. Compared to Florida, Collier County consistently has a higher percentage of the population that speaks English less than very well. However, the percentage in Collier County is declining while Florida remains steady.

Exhibit P12: Population 5+ that Speak English Less Than Very Well, Collier County and Florida, 2013-2022

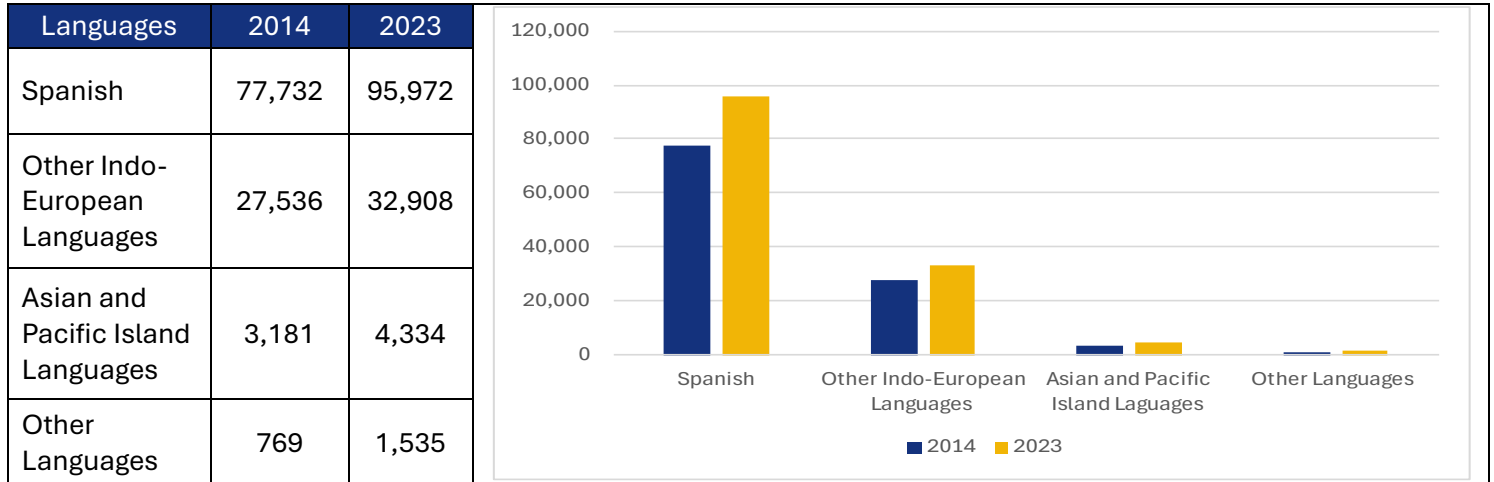


Source: United States Bureau of the Census, American Community Survey, Table B06007

2025 Collier County Community Health Assessment: Population

In 2023, of households that spoke languages other than English, 71 percent spoke Spanish. However, there are also significant populations who speak a variety of languages.

Exhibit P13: Collier County Population Estimated Languages Spoken at Home (Other than English), 2014, 2023



Source: United States Census of the Bureau, American Community Survey, Table S1601



Source: Photo courtesy of the Health Planning Council of Southwest Florida, Inc.

Drivers of Health



Source: Photo courtesy of the Health Planning Council of Southwest Florida, Inc.

This section of the Community Health Assessment (CHA) for Collier County explores the critical role of drivers of health in shaping the well-being of our residents. Recognizing that factors beyond individual behaviors and healthcare access significantly influence health outcomes, this section examines the impact of drivers such as socioeconomic factors, education, housing, homelessness, and the workforce within Collier County. Understanding the distribution and influence of these drivers is vital for identifying the root causes of health challenges and developing comprehensive strategies that address the broader context in which people live, learn, work, and play, ultimately improving health across Collier County.

Education Access and Quality

In past years, the Florida Kindergarten Readiness Screener (FLKRS) was the screening tool utilized for this purpose. However, in 2022-2023, Florida adopted a statewide Coordinated Screening and Progress Monitoring System known as the Florida Assessment of Student Thinking (FAST) Star Early Literacy. FAST Star Early Literacy now serves as the kindergarten screener. To be deemed ready for kindergarten, students needed to score 690 or higher on the FAST Star Early Literacy Assessment. This assessment is administered to all kindergarten students within the first 30 days of kindergarten.

2025 Collier County Community Health Assessment: Settings and Systems

In 2023, 44 percent of Collier County students were deemed ready when they entered kindergarten, which is lower than the state of Florida (51%). For those who attended VPK, the rates were significantly higher than those among the total population. However, Collier is still below the state average (57% Collier, 64% Florida).

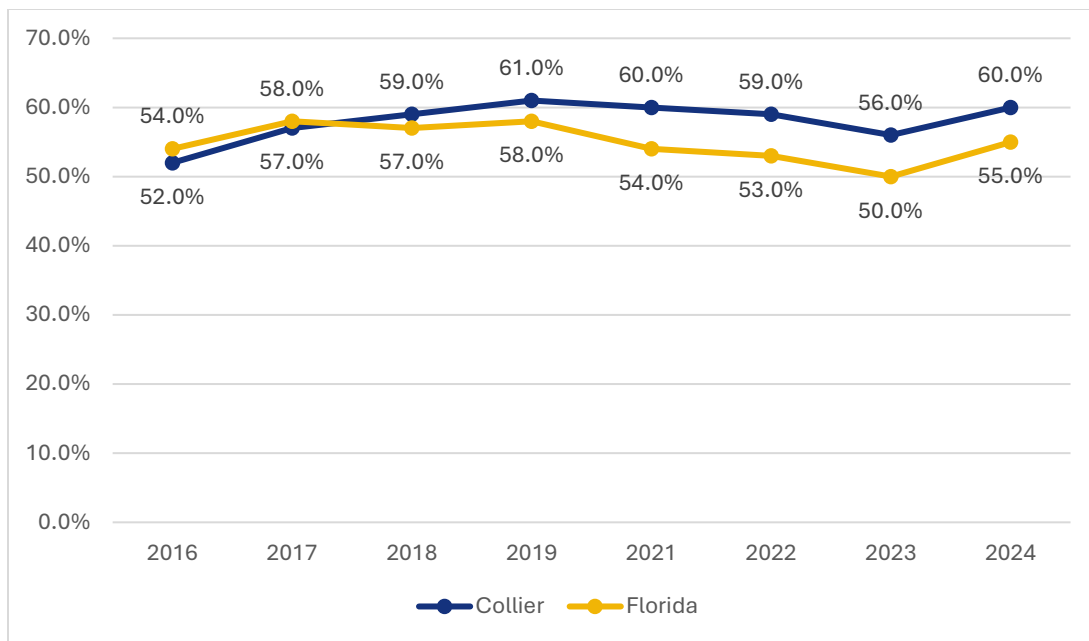
Exhibit D1: Florida Assessment of Student Thinking (FAST) Star Early Literacy, Collier County and Florida, Fall 2023

	Fall 2023 FAST Kindergarten Results		VPK Completers (Attended 70% or more VPK hours)		Kindergarten Students That Did Not Attend VPK/Unmatched to a VPK Record	
	Number of Test Takers	Percentage "Ready for Kindergarten"	Number of Test Takers	Percentage "Ready for Kindergarten"	Number of Test Takers	Percentage "Ready for Kindergarten"
Florida	186,417	51%	101,348	64%	65,520	36%
Collier County	3,074	44%	1,505	57%	1,358	30%

Source: Florida Department of Education (DOE)

In 2024, Collier County students passed the Florida Standards English Language Arts Assessment (FSA) at higher rates than the state average (60% Collier, 55% Florida). To pass, students must achieve a passing level of 3 or above on the FSA. In 2020, the FSA was not given due to the COVID-19 pandemic.

Exhibit D2: Students in 3rd Grade with a Passing Grade on Florida Standards Assessment (FSA) English Language Arts, Percent of Grade 3 Students, Collier County and Florida, 2016-2024

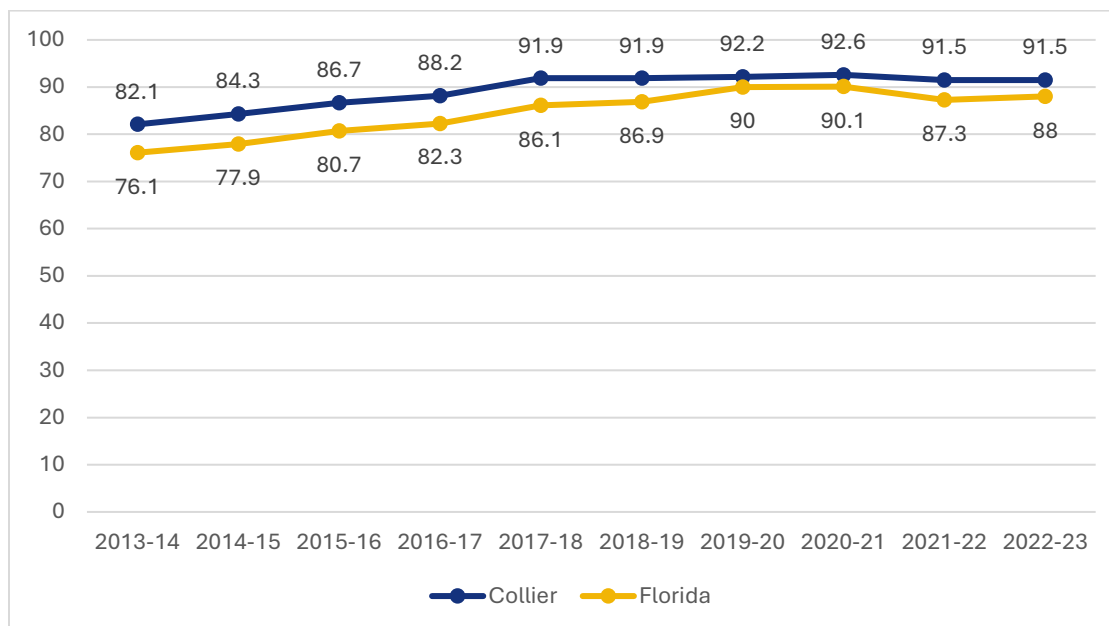


Source: Florida Department of Education (DOE)

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Between 2013 and 2023, Collier County consistently had a higher high school graduation rate than the state average (91.5% Collier, 88.0% Florida).

Exhibit D3: High School Graduation Rate, Percentage of Student Cohort Since 9th Grade, Collier County and Florida, 2013-2023



Source: Florida Department of Education (DOE)

Exhibit S5 shows the educational attainment in the population 25 years of age and over for Collier County and Florida for 2015, 2019, and 2023. Between 2015 and 2023, the percentage of the population in Collier County over the age of 25 who did not have at least a high school diploma declined from 13.2 percent to 10.9 percent; in Florida, the percentage decreased from 12.4 percent to 9.7 percent. During the same period, the percentage of individuals with graduate degrees increased by almost three percentage points in Collier County and by slightly over three percentage points in Florida.

Exhibit D4: Educational Attainment of the Population 25 Years and Over, Percent of Population 25+, Collier County and Florida, 2015, 2019, and 2023

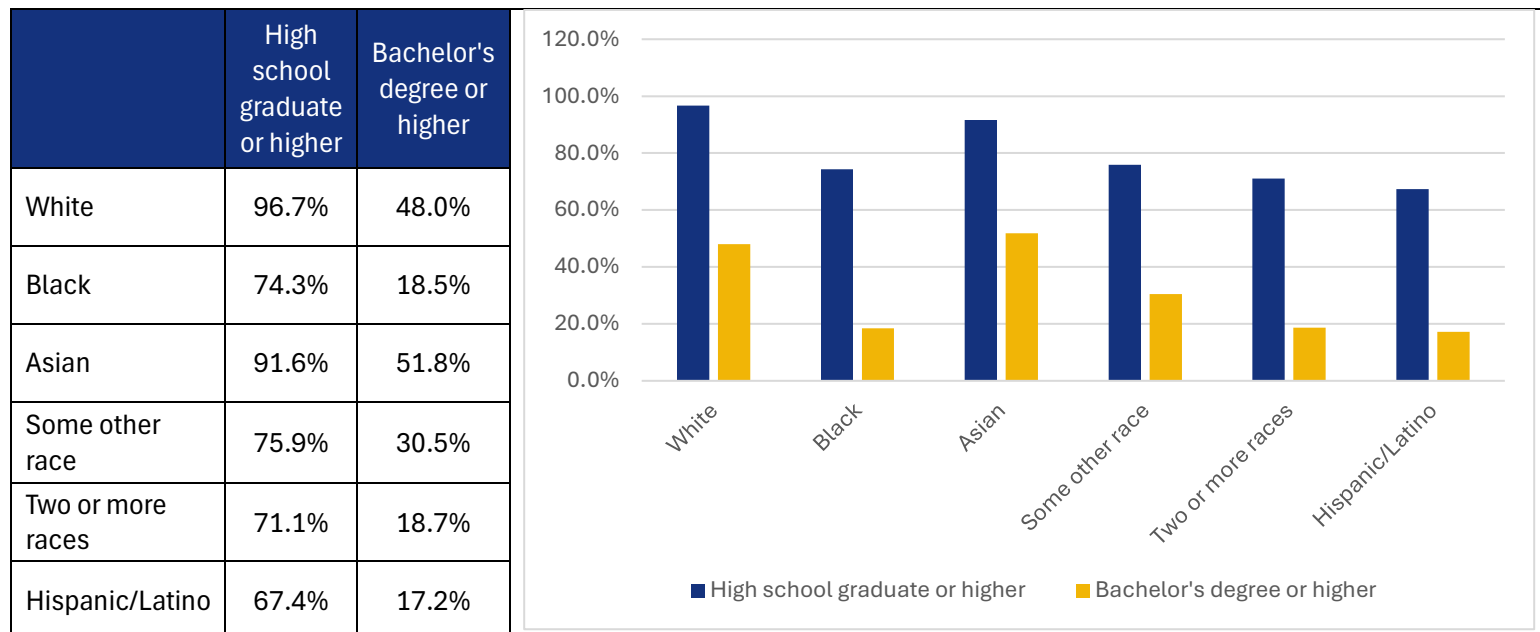
	Collier County			Florida		
	2015	2019	2023	2015	2019	2023
Less than 9th grade	6.3%	5.7%	6.2%	5.2%	4.6%	4.1%
9th to 12th, no diploma	6.9%	5.3%	4.7%	7.2%	7.0%	5.6%
High school graduate/GED	26.1%	27.1%	23.1%	29.2%	28.4%	26.8%
Some college, no degree	17.9%	17.3%	15.3%	20.4%	19.4%	18.4%
Associate degree	7.7%	8.7%	10.6%	9.6%	9.9%	10.1%
Bachelor's degree	21.4%	20.8%	23.5%	18.2%	19.3%	21.6%
Graduate or professional degree	13.8%	14.9%	16.6%	10.2%	11.4%	13.3%

Source: US Bureau of the Census, American Community Survey, Table S1501

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Those who identified as Asian have a higher percentage of those with a bachelor's degree or higher when compared to other races/ethnicities. Individuals that identified as white had a higher percentage of those with a high school graduate or higher.

Exhibit D5: Educational Attainment by Race and Ethnicity, Collier County and Florida, 2023



Source: US Bureau of the Census, American Community Survey, Table S1501

Disabilities

11.5 percent of members of the general public in Collier County have a disability; this is lower than the Florida average of 13.5 percent. The percentage of Collier County adults 65 years and over with a disability is also lower than the Florida average (22.1% vs 31.4%).

Exhibit D6: Disability Status, Collier County and Florida, 2019-2023

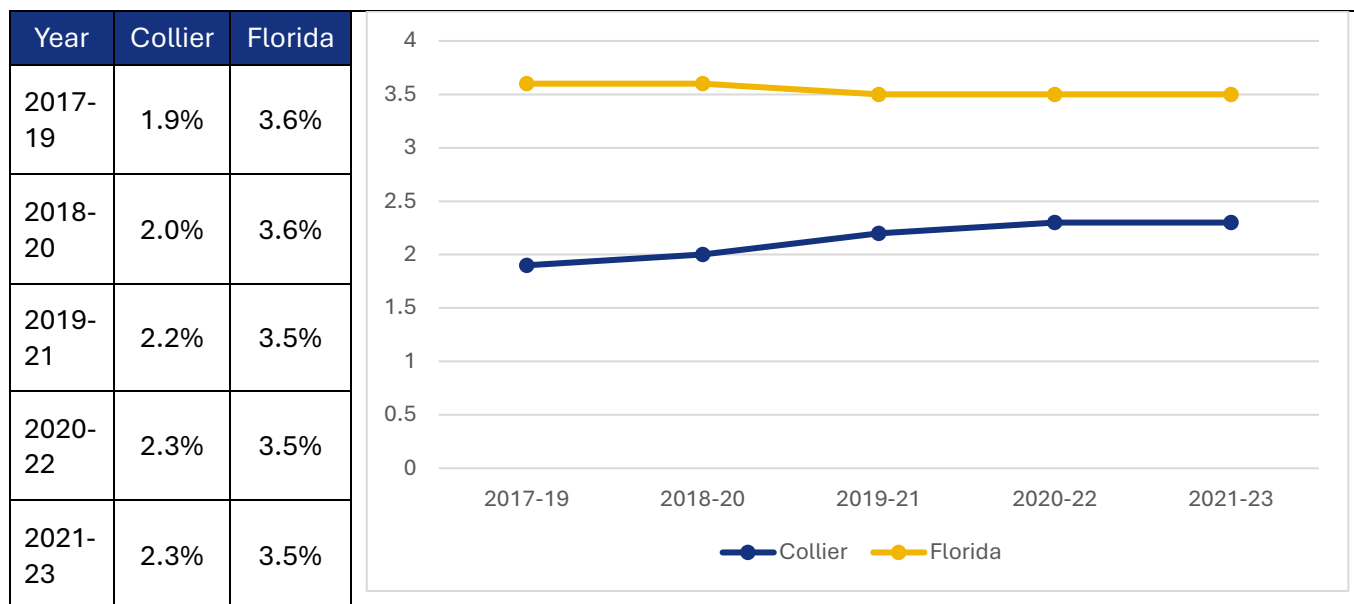
	Collier	Florida
% Civilian noninstitutionalized population with a disability	11.5%	13.5%
Under 18 years with a disability	3.2%	5.0%
18 to 64 years with a disability	7.1%	10.1%
65 years and over with a disability	22.1%	31.4%

Source: US Census Bureau, American Community Survey 5-Year Estimates, Table DP02

According to the University of Kansas Research & Training Center of Independent Living, someone with an independent living disability is someone with a disability that can make decisions that affect their own lives. The percentage of adults in Collier County with an independent living disability is lower than the state average (2.3% vs. 3.5%) but increased slightly from 1.9% to 2.3% between 2017-2019 and 2021-2023.

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Exhibit D7: Population With an Independent Living Disability (Aged 18-64 Years) (Census ACS), Percentage of Population (Aged 18-64 Years), 3-Year Rolling, Collier County and Florida, 2017-2023



Source: US Census Bureau, American Community Survey 5-Year Estimates, Table B18107



Source: Photo courtesy of the Health Planning Council of Southwest Florida

Workforce

In 2023, the unemployment rate for Collier County was lower than the average rate for Florida. A lower percentage of Collier County residents work outside the county when compared to the Florida average. Collier has a significantly higher per capita personal income when compared to the state of Florida (\$134,527 vs \$68,703).

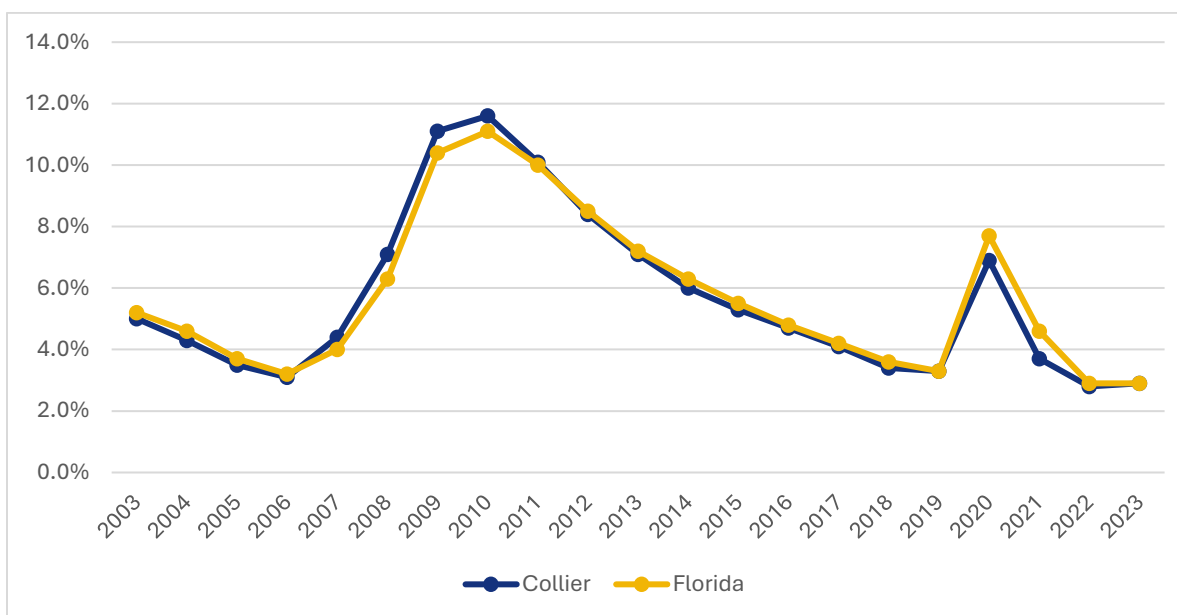
Exhibit D8: Workforce Data, Collier County and Florida, 2023

	Collier	Florida
Labor force as a % of population 18+	58.1%	60.4%
Unemployment rate (%)	2.9%	2.9%
Average annual wage, all industries	\$65,203	\$66,446
Per capita personal income	\$134,527	\$68,703
Workers 16+ working outside county of residence	8.6%	17.2%

Source: The Florida Legislature, Office of Economic and Demographic Research

Exhibit S9 shows the unemployment rates for Collier County and the State of Florida for the period 2003 to 2023. In Collier County, the unemployment rate ranges from a low of 2.2 percent in 2006 to a high of 11.6 percent in 2010. During this same period, the state rate ranged from a low of 3.7 percent in 2006 to a high of 11.4 percent in 2010. As can be seen in the graph, the unemployment rates for Collier County have been highly correlated with those of the State of Florida over the two decades. Both Collier County and Florida had a rate of 2.9 percent in 2023.

Exhibit D9: Unemployment Rate, Percentage of Labor Force, Collier County and Florida, 2003-2023

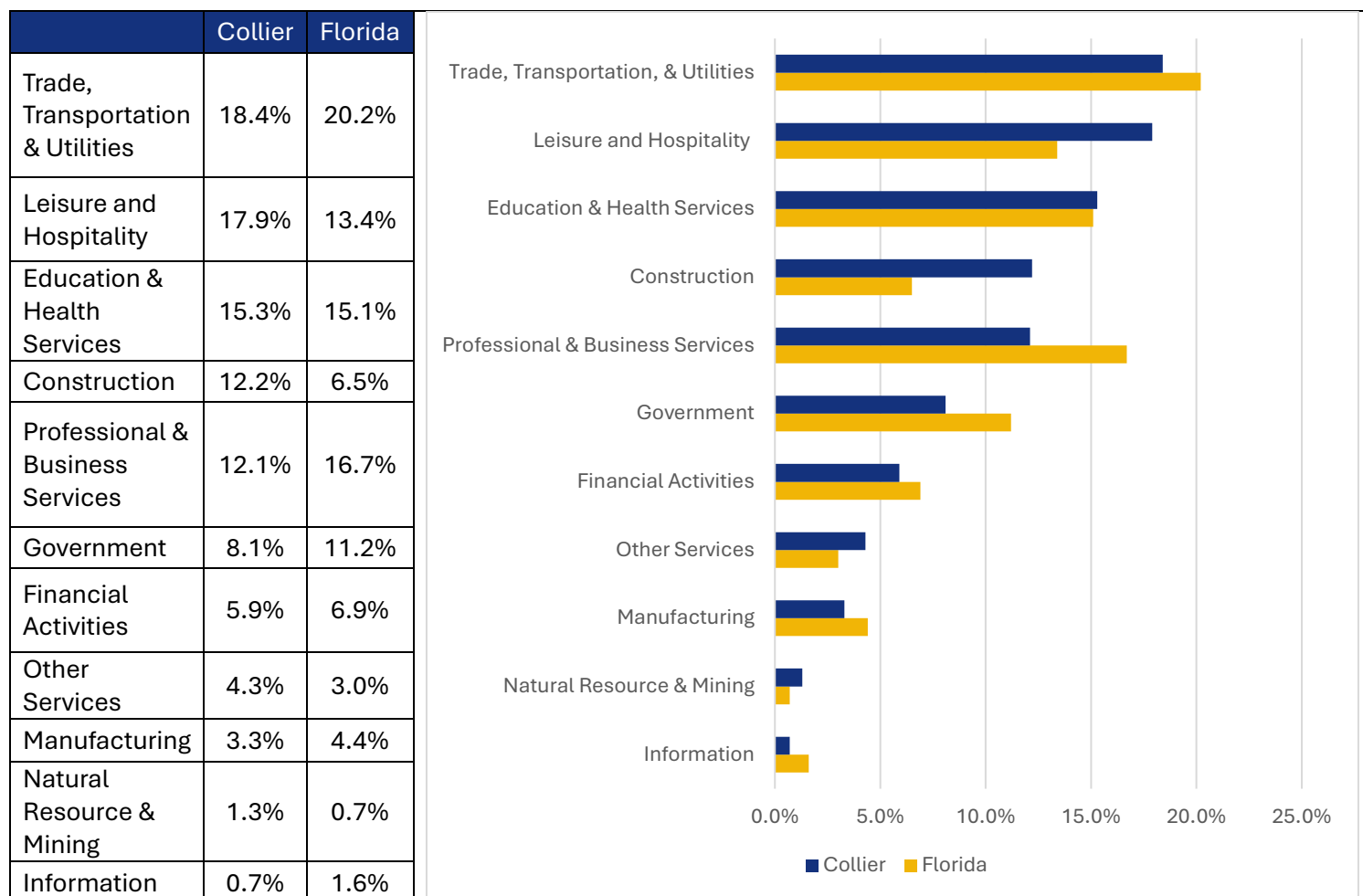


Source: US Department of Labor, Bureau of Labor Statistics (BLS)

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The top three employment categories in Collier County for 2023 are trade, transportation & utilities, leisure and hospitality, and education & health services. Trade, transportation & utilities, and education & health services are in the top three for both Collier County and Florida. The average annual wages for the top employment categories are trade - \$60,309, leisure - \$40,542, and education - \$67,127.

Exhibit D10: Average Annual Employment by Category, Collier County and Florida, 2023

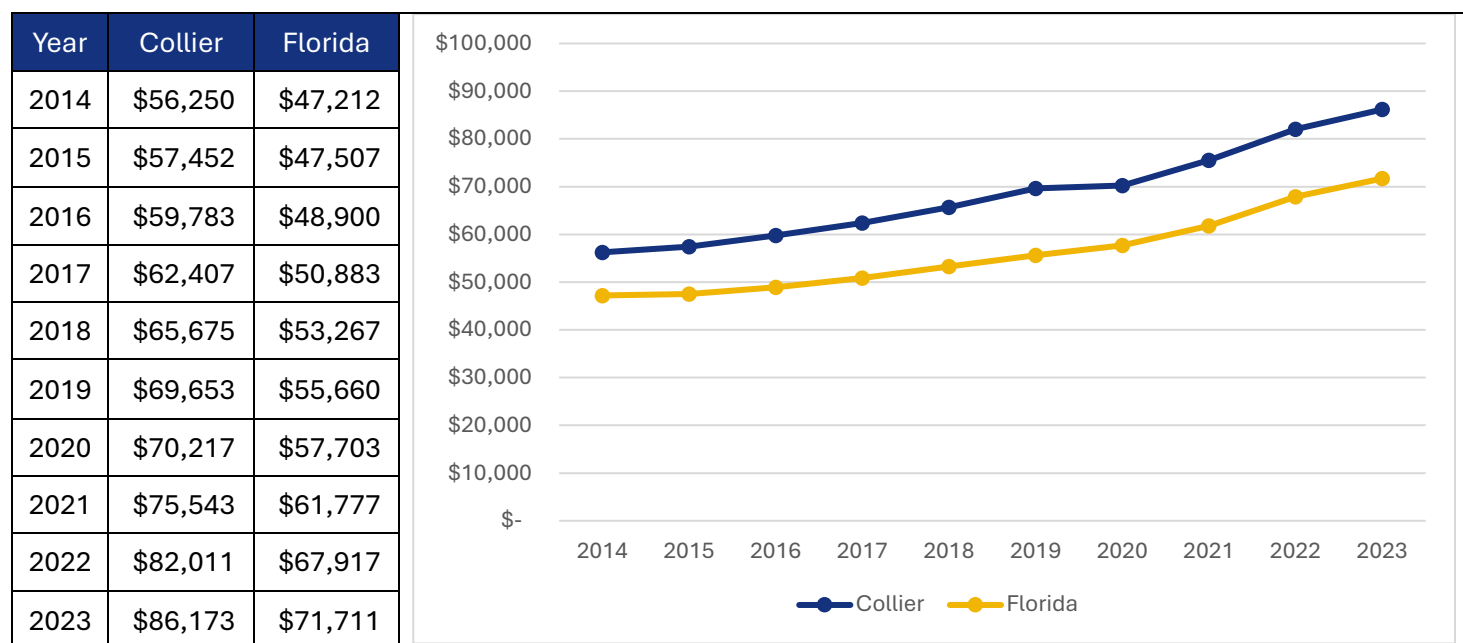


Source: The Florida Legislature, Office of Economic and Demographic Research

Income

Both Collier County and Florida have seen a continuous increase in median household incomes since 2014. The median household income in Collier County for 2023 is significantly higher than the Florida average (\$86,173 vs. \$71,711).

Exhibit D11: Median Household Income, Collier County and Florida, 2014-2023



Source: United States Census Bureau, American Community Survey 5-Year Estimates, Table B19013

In 2023, 2.3 percent of Collier County households had a combined income of less than \$14,999; this compares to 3.5 percent across Florida and 3.2 percent in the United States. 9.9 percent of Collier County households had an income of \$100,000 or greater during 2023; this is a higher proportion than the State of Florida average of 18.7 percent, but slightly less than the United States average of 23.0%. Most Collier County residents earned between \$25,000 and \$49,999, which is on par with the state of Florida and the United States.

Exhibit D12: Earnings in the Past 12 Months, Collier County, Florida, and United States, 2015, 2019, 2023

	2015			2019			2023		
	Collier	Florida	US	Collier	Florida	US	Collier	Florida	US
\$1 to \$9,999 or loss	2.9%	1.8%	1.8%	1.4%	1.7%	1.7%	1.3%	1.6%	1.5%
\$10,000 to \$14,999	5.7%	4.5%	3.7%	2.7%	3.6%	2.7%	1.0%	1.9%	1.7%
\$15,000 to \$24,999	18.1%	18.2%	14.2%	14.5%	15.1%	10.8%	8.0%	7.1%	5.9%
\$25,000 to \$34,999	17.5%	19.3%	16.1%	20.4%	19.0%	15.2%	15.7%	14.1%	11.0%
\$35,000 to \$49,999	18.4%	21.1%	20.0%	23.9%	20.8%	19.7%	20.4%	21.3%	18.9%
\$50,000 to \$64,999	12.7%	13.2%	14.9%	11.8%	13.8%	15.5%	14.1%	16.9%	16.6%
\$65,000 to \$74,999	4.5%	5.0%	6.3%	5.5%	5.7%	6.9%	7.6%	7.1%	8.0%
\$75,000 to \$99,999	7.7%	7.2%	9.8%	6.5%	8.4%	11.0%	9.9%	11.3%	13.4%
\$100,000 or more	12.5%	9.8%	13.3%	13.4%	11.9%	16.5%	22.1%	18.7%	23.0%

Source: US Census Bureau, American Community Survey, Table S2001

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Median or average incomes only tell part of the story of disparate income levels within a county. A quintile equates to one-fifth of the households in Collier County; thus, in this chart, 20 percent of the population has a household income of \$39,443 or less, while 20 percent of the population has a household income above \$180,150. The top 5 percent of households in Collier County have an income of more than \$250,000 (the highest threshold broken out by the US Bureau of the Census).

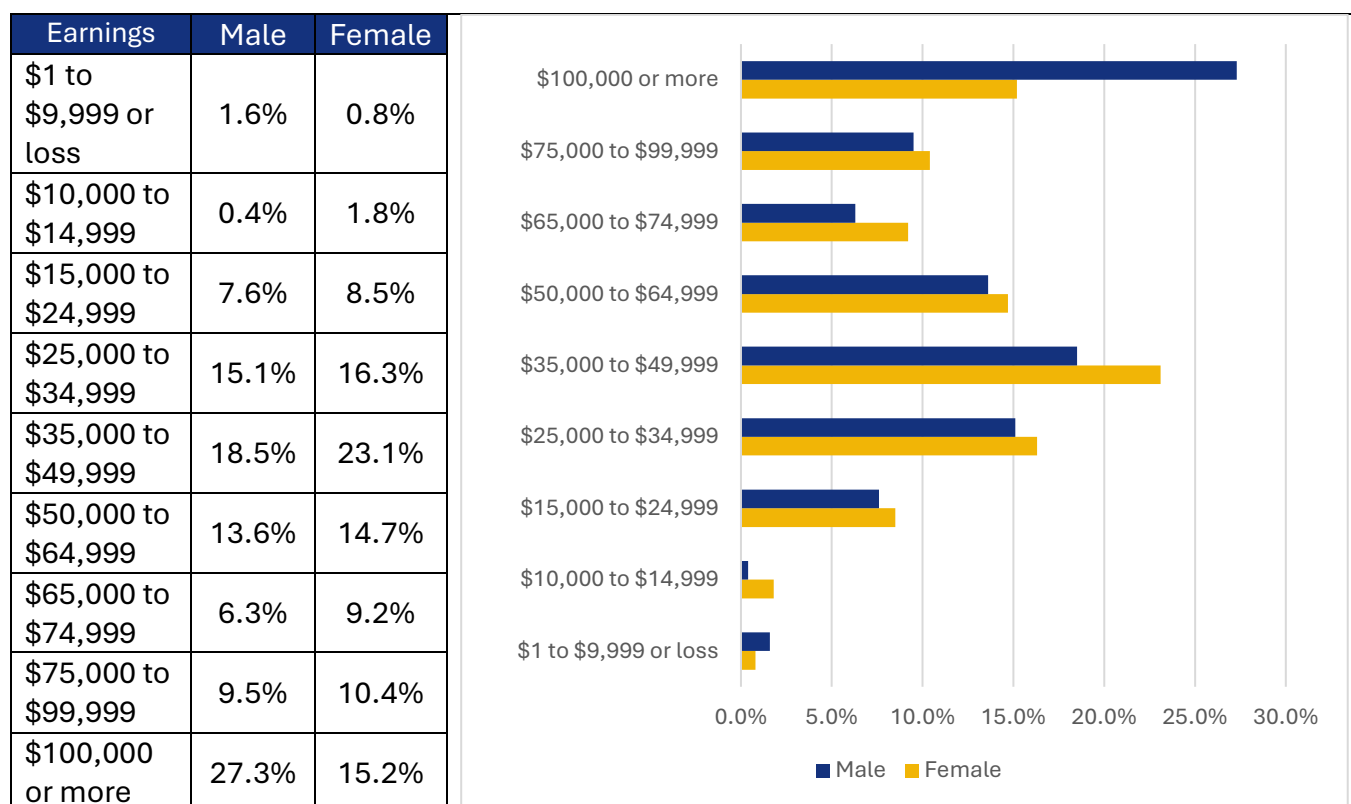
Exhibit D13: Household Income Quintile Upper Limits, Collier County and Florida, 2023

	Collier	Florida
Lowest quintile	\$39,443	\$31,559
Second quintile	\$69,969	\$58,563
Third quintile	\$109,266	\$91,114
Fourth quintile	\$180,150	\$144,290
Lower limit of top 5 percent	\$250,000+	\$250,000+

Source: US Census Bureau, American Community Survey, Table B19080

In Collier County in 2023, significantly more men than women earned more than \$100,000 in a year (27.3% men, 15.2% women).

Exhibit D14: Earnings in the Past 12 Months by Sex, Collier County 2023

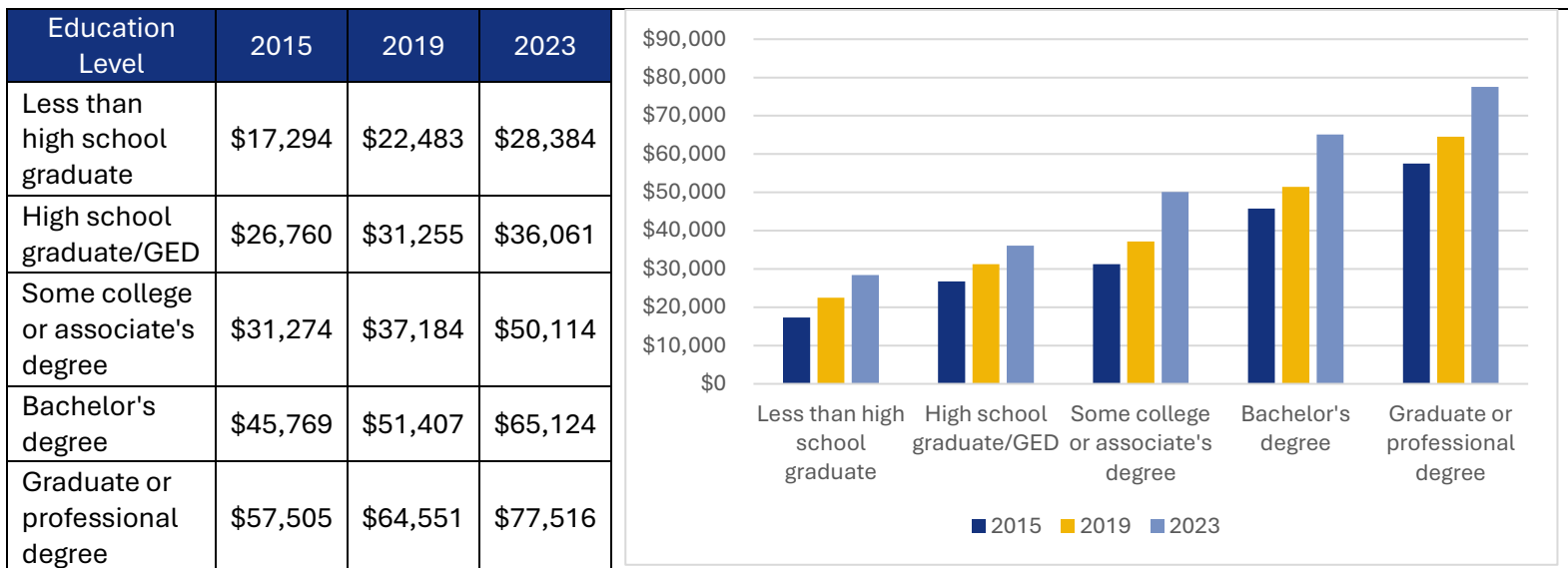


Source: US Census Bureau, American Community Survey, Table S2001

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On average, individuals in Collier County who have a graduate or professional degree earn \$49,132 more annually than individuals with less than a high school education. The median income has continued to rise between 2015 and 2023, regardless of educational attainment.

Exhibit D15: Median Earnings by Educational Attainment, Collier County, 2015, 2019, 2023



Source: US Census Bureau, American Community Survey, Table S2001



Source: Photo courtesy of the Health Planning Council of Southwest Florida

Poverty and Food Assistance

According to County Health Rankings, the definition of a living wage is “the hourly wage needed to cover basic household expenses plus all relevant taxes for a household”. The Living Wage Calculator was first created by Dr. Amy K. Glasmeier in 2004. Using twelve different familial compositions, the calculator estimates the living wage needed to support families. The tables below show the hourly rate an individual in a household must earn to support themselves and/or their family. At the time this data was compiled, the minimum wage in Florida was \$13.00, which is greater than the federal minimum wage of \$7.25.

Exhibit D16: Living Wage Calculator for Collier County, 2023*

	Living Wage	Poverty Wage
1 Adult		
0 children	\$23.66	\$7.52
1 child	\$40.55	\$10.17
2 children	\$50.56	\$12.81
3 children	\$63.15	\$15.46
2 Adults (1 Working)		
0 children	\$33.58	\$10.17
1 child	\$39.64	\$12.81
2 children	\$43.39	\$15.46
3 children	\$50.61	\$18.10
2 Adults (Both Working)		
0 children	\$16.79	\$5.08
1 child	\$22.89	\$6.41
2 children	\$27.68	\$7.73
3 children	\$33.19	\$9.05

Source: Glasmeier, Amy K. Living Wage Calculator. 2020. Massachusetts Institute of Technology.

*Data was last updated on February 10, 2025

+In the case of household with two working adults, all values are per working adult, single, or in a family unless otherwise noted

Compared to Florida and the United States, Collier County has consistently had a lower percentage of people living in poverty. In 2023, 10.5 percent of Collier County residents were living in poverty.

Exhibit D17: Percent of All Ages in Poverty, Collier County, Florida, and United States, 2015, 2019, 2023

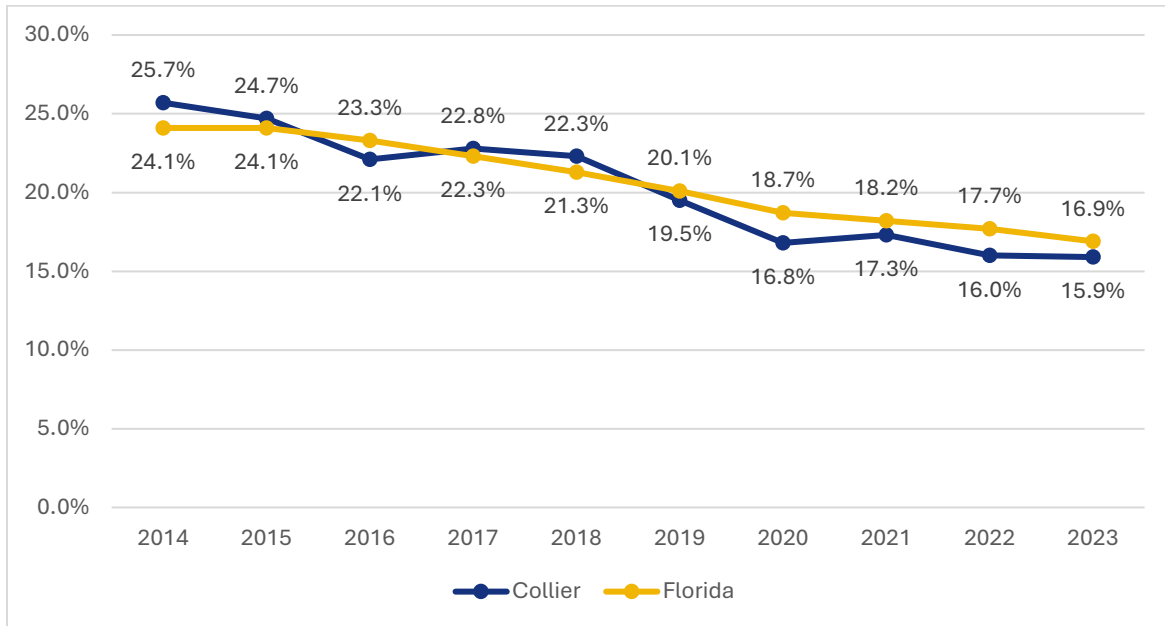
	Collier	Florida	US
2015	13.6%	15.8%	14.7%
2019	9.4%	12.7%	12.3%
2023	10.5%	12.4%	12.5%

Source: U.S. Census, Small Area Income and Poverty Estimates

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In 2023, Collier County had a lower percentage of children living in poverty than the state average (15.9% Collier, 16.9% Florida). The percentage of children living in poverty in Collier County decreased significantly in the ten years between 2014-2023 (25.7% 2014, 15.9% 2023).

Exhibit D18: Individuals Below Poverty Level (Aged 0-17 Years), Percentage of Population (Aged 0-17 Years), Collier County and Florida, 2014-2023

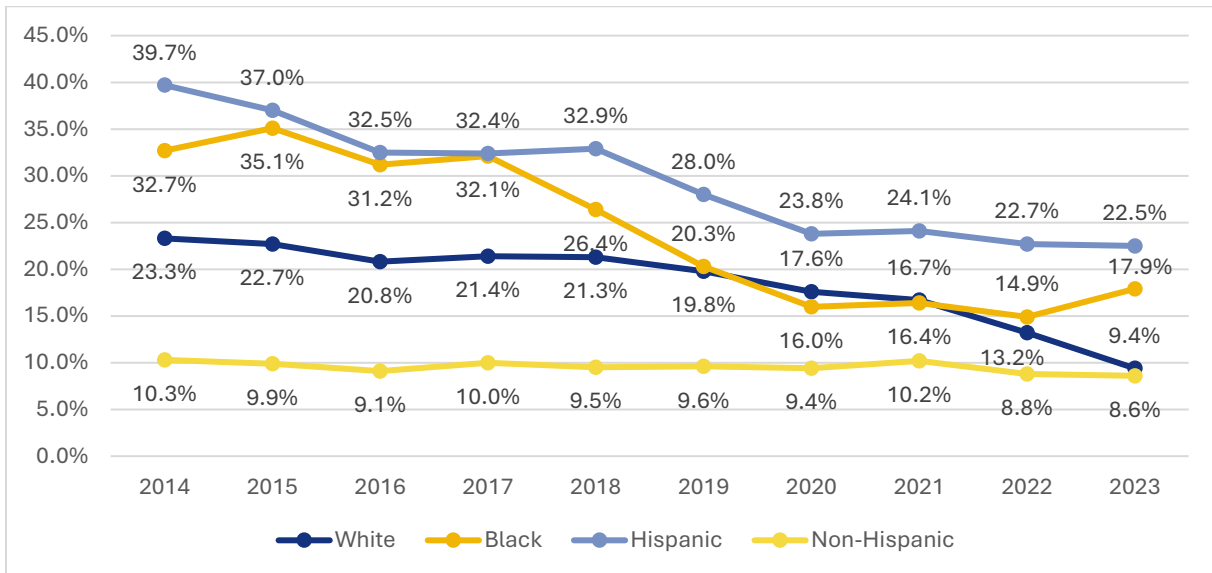


Source: United States Census Bureau, American Community Survey 5-Year Estimates, Table DP03

There are significant disparities seen in the percentage of children living in poverty between various racial/ethnic groups. Race and ethnicity are tracked separately in Florida. While all races and ethnicities saw declines in the percentage of children living in poverty between 2014 and 2023, the percentages for children who identify as Hispanic were significantly higher in 2023 than those who identify as non-Hispanic (22.5% Hispanic, 8.6% non-Hispanic).

Children who identify as black were the only group that saw an increase in poverty between 2022 and 2023; the rate for 2023 was 17.9 percent.

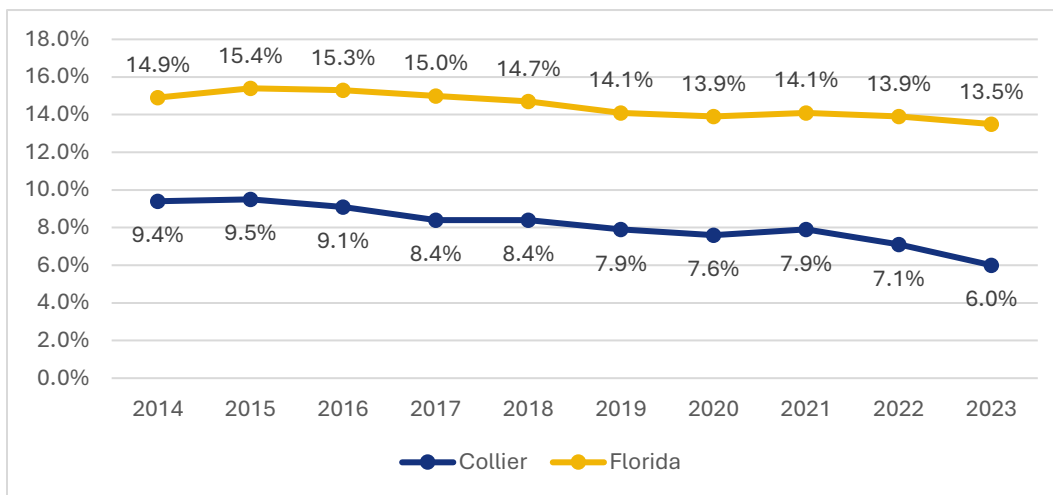
Exhibit D19: Individuals Below Poverty Level (Aged 0-17 Years) by Race and Ethnicity, Percentage of Population (Aged 0-17 Years), Collier County and Florida, 2014-2023



Source: United States Census Bureau, American Community Survey 5-Year Estimates, Table DP03

The Supplemental Nutrition Assistance Program (SNAP) of the U.S. Department of Agriculture provides benefits that are used to purchase food at grocery stores, convenience stores, and some farmers' markets and co-op food programs. Current requirements for eligibility are a household monthly net income of less than 100 percent of the federal poverty guideline. Collier County has consistently had a lower percentage of households receiving assistance compared to Florida. In 2023, Collier had 6 percent of families receiving SNAP benefits compared to 13.5 percent for Florida.

Exhibit D20: Households Receiving Cash Public Assistance or Food Stamps, Percentage of Households, Collier County and Florida, 2014-2023

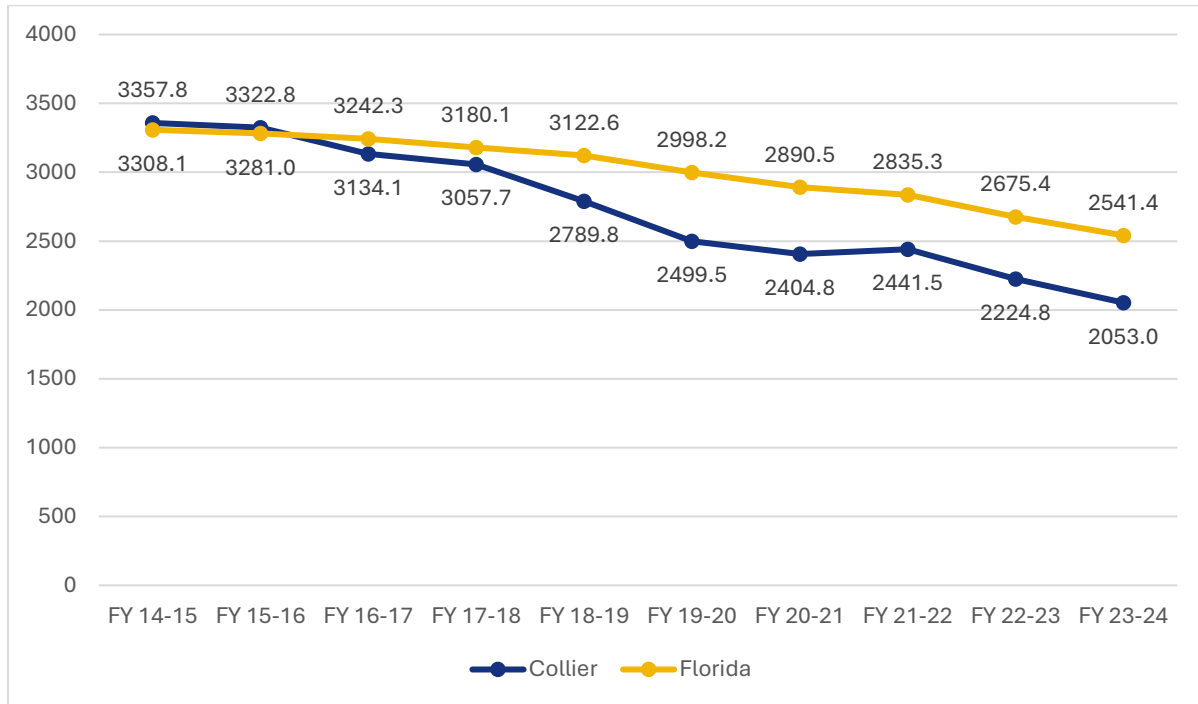


Source: United States Census Bureau, American Community Survey 5-Year Estimates, Table B19058

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The Women, Infants, and Children Nutrition Program (WIC) of the U.S. Department of Agriculture provides food and nutritional assistance to pregnant and new mothers and children less than 5 years of age. Between 2015 and 2024, the number of WIC eligibles in Collier County decreased from 3,357.8 to 2053.0.

Exhibit D21: Women, Infants, and Children (WIC) Eligibles, Rate per 100,000 Population, Collier County and Florida, Fiscal Year 14-15 to Fiscal Year 23-24

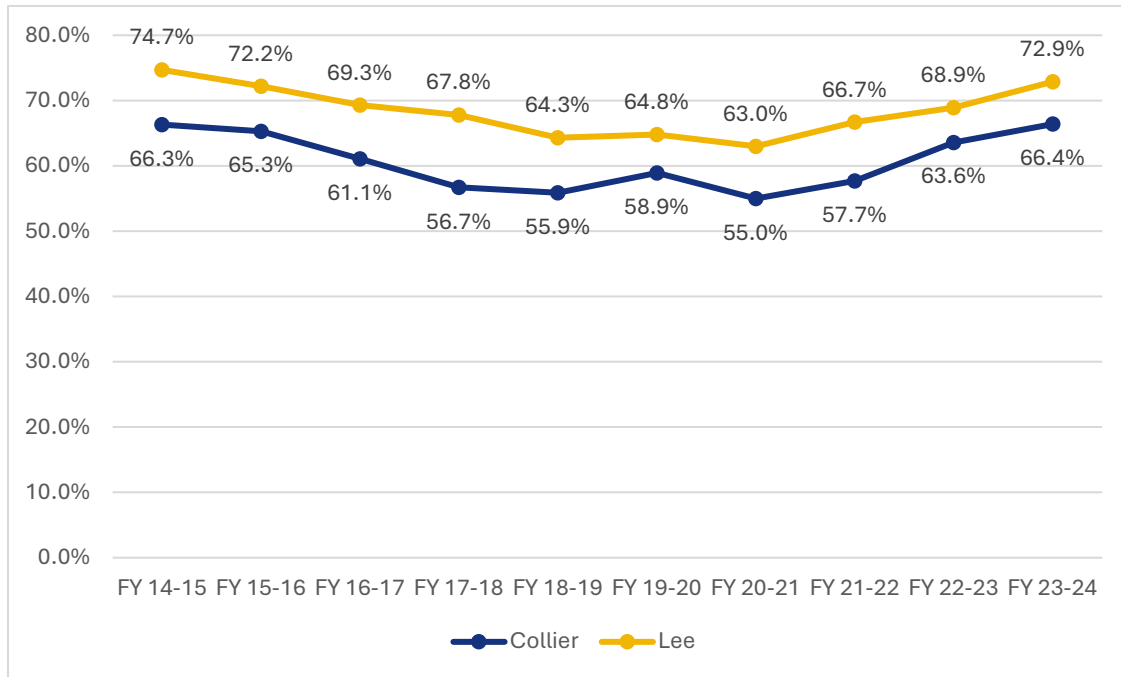


Source: Florida Department of Health, WIC and Nutrition Services, FLWiSE

Compared to Florida, Collier County has consistently served a lower percentage of those eligible for WIC since 2015. WIC eligibles include pregnant and post-partum women and children ages 0-4. Knowing the proportion of those in need who are served supports promoting healthful diets and a healthy weight to optimize health status and quality of life.

The percent of WIC eligibles served is the number served divided by the estimated number in need, expressed as a percentage. Collier County and the State of Florida experienced an increase in service between 2021 and 2024.

Exhibit D22: WIC Eligibles Served, Percentage of WIC Eligibles, Collier County and Florida, Fiscal Year 14-15 to Fiscal Year 23-24



Source: Florida Department of Health, WIC and Nutrition Services, FLWiSE

ALICE

The United Way has developed a methodology called ALICE (Asset Limited, Income Constrained, Employed) to better approximate the number of people living in poverty in the United States. They believe that despite the Federal Poverty Level's benefit of providing a nationally recognized income threshold for determining who is poor, its shortcomings are well-documented. The measure is not based on the current cost of basic household necessities. Except for Alaska and Hawaii, it is not adjusted to reflect cost-of-living differences across the U.S. Thus, the ALICE research team of the United Way developed new measures to identify and assess financial hardship locally and enhance existing local, state, and national poverty measures. Between ALICE households and those living in poverty, an estimated 47% of households in Florida were below the ALICE Threshold in 2023.

The first method is the Household Survival Budget. This is an estimate of the total cost of household essentials: housing, childcare, food, transportation, technology, and health care, plus taxes and a 10 percent miscellaneous contingency fund. It does not include any savings, leaving households without a cushion for unexpected expenses and unable to invest in the future.

For the average family of four, two adults and two children, the annual household survival budget in Collier County in 2023 was \$90,360. For an adult to make this much a year, the hourly wage would need to be \$445.18. A single adult's household survival budget is \$41,724 with an hourly wage of

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\$20.86. Currently, Florida's minimum wage is set at \$14.00, which is \$6.86 less than what is needed for a single adult to survive.

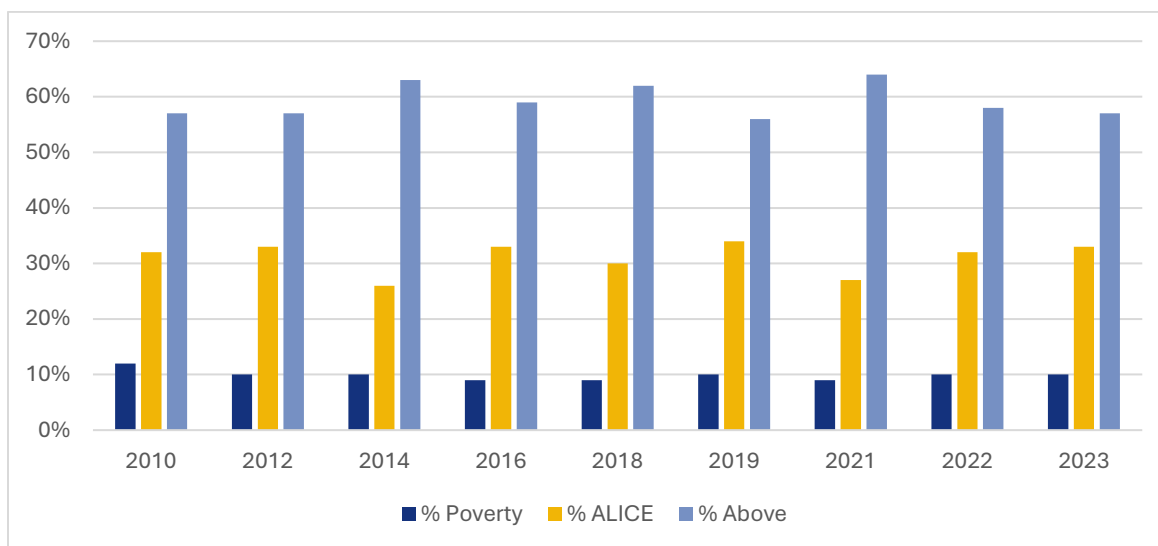
Exhibit D23: ALICE Household Survival Budget, Collier County, 2023

Monthly Costs	Single Adult	One Adult, One Child	One Adult, One in Childcare	Two Adults	Two Adults, Two Children	Two Adults, Two in Childcare	Single Senior (65+)	Two Seniors (65+)
Housing	\$1,485	\$1,700	\$1,700	\$1,700	\$2,074	\$2,074	\$1,485	\$1,700
Child Care	\$0	\$312	\$833	\$0	\$625	\$1,796	\$0	\$0
Food	\$559	\$945	\$848	\$1,024	\$1,718	\$1,516	\$514	\$942
Transportation	\$469	\$604	\$604	\$709	\$996	\$996	\$399	\$568
Health Care	\$162	\$488	\$488	\$488	\$759	\$759	\$540	\$1,080
Technology	\$86	\$86	\$86	\$116	\$116	\$116	\$86	\$116
Miscellaneous	\$276	\$414	\$456	\$404	\$629	\$726	\$302	\$441
Taxes	\$440	\$443	\$534	\$559	\$613	\$822	\$497	\$796
Monthly Total	\$3,477	\$4,992	\$5,549	\$5,000	\$7,530	\$8,805	\$3,823	\$5,643
Annual Total	\$41,724	\$59,904	\$66,588	\$60,000	\$90,360	\$105,660	\$45,876	\$67,716
Hourly Wage	\$20.86	\$29.95	\$33.29	\$30.00	\$45.18	\$52.83	\$22.94	\$33.86

Source: United Way ALICE, 2023

Families who are living below the ALICE (Asset Limited, Income Constrained, Employed) threshold are considered to be facing financial hardship using the United Way methodology. In 2023, ten percent of Collier County households were considered in poverty, and an additional 33 percent were considered below the ALICE threshold, and 57 percent were above the threshold.

Exhibit D24: Financial Hardship, Percentage of Households in Collier County, 2010-2023



Source: United Way ALICE, 2023

The percentage of households facing financial hardship in Collier County in 2023 varied significantly by location. In Immokalee, 74 percent of households were below the ALICE threshold, while in Heritage Bay, only 17 percent of households were below the threshold.

Exhibit D25: Financial Hardships by Census Places in Collier County, 2023

Census Places	Total Households	% Below ALICE Threshold
Immokalee CDP, Florida	6,418	74%
Naples Manor CDP, Florida	1,247	64%
Golden Gate CDP, Florida	8,100	60%
Lely CDP, Florida	1,789	58%
Everglades City, Florida	109	56%
Verona Walk CDP, Florida	1,553	55%
Berkshire Lakes CDP, Florida	1,170	50%
Naples Park CDP, Florida	2,152	50%
Island Walk CDP, Florida	1,373	45%
Marco Shores-Hammock Bay CDP, Florida	421	45%
Chokoloskee CDP, Florida	309	44%
Orangetree CDP, Florida	1,720	41%
Ave Maria CDP, Florida	2,082	40%
Lely Resort CDP, Florida	3,807	39%
Marco Island City, Florida	8,433	36%
Vineyards CDP, Florida	1,747	36%
Naples City, Florida	9,790	31%
Pine Ridge CDP, Florida	772	30%
Winding Cypress CDP, Florida	516	26%
Pelican Bay CDP, Florida	3,755	23%
Pelican Marsh CDP, Florida	1,263	23%
Heritage Bay CDP, Florida	379	17%

Source: United Way ALICE, 2023

Housing

Collier County has a higher percentage of homeowners compared to the state (76.0% vs. 67.3%). Thirty-one percent of homes in Collier County are vacant. According to the US Census Bureau, a vacant housing unit is a dwelling not occupied at the time of the census, unless the occupants are only temporarily absent. This includes units that are for rent, for sale, or held for seasonal, recreational, or occasional use. The median value of housing is significantly higher in Collier County than the state average (\$486,800 vs. \$325,000).

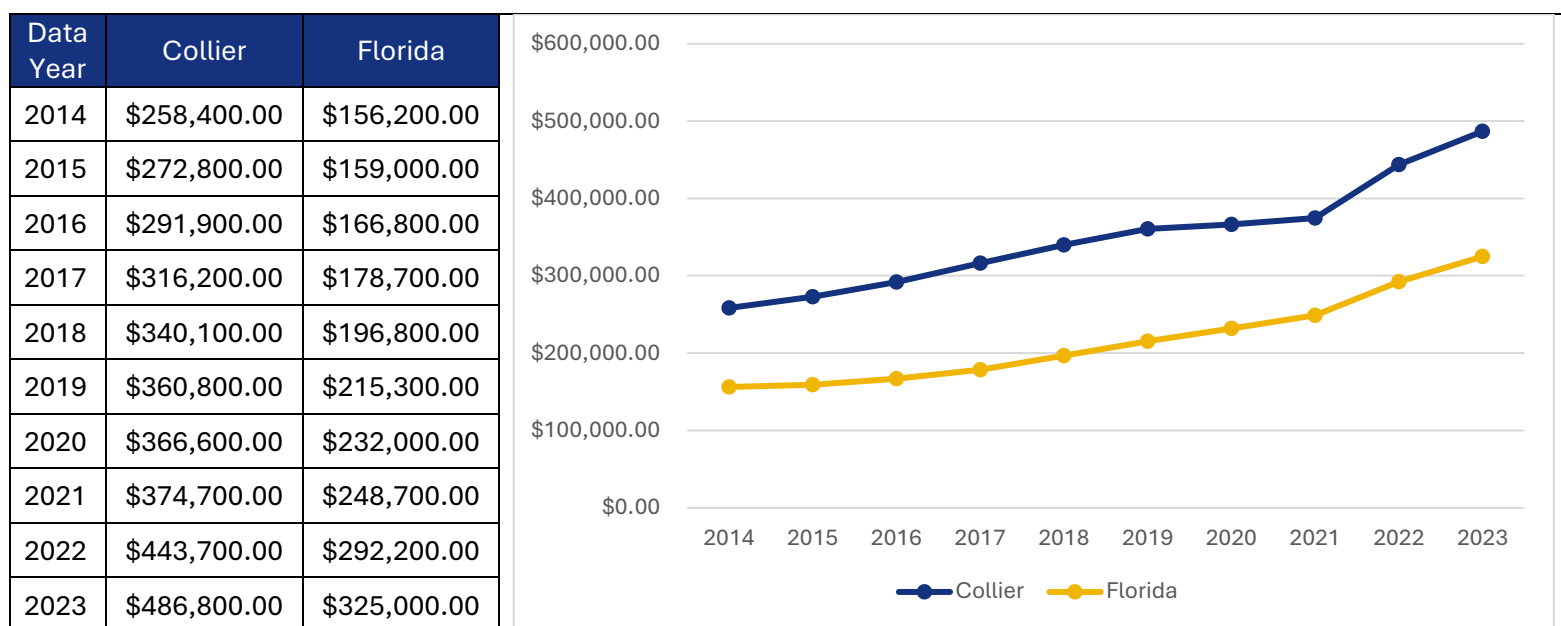
Exhibit D26: Housing Occupancy, Collier County and Florida, 2019-2023

	Collier	Florida
Occupied housing units (%)	68.5%	84.8%
Owner-occupied (%)	76.0%	67.3%
Household size owner-occupied unit (people)	2.3	2.53
Renter-occupied (%)	24.0%	32.7%
Household size renter-occupied unit (people)	2.62	2.46
Occupying mobile home (%)	4.6%	8.2%
Occupying boat, RV, Van, etc. (%)	0.1%	0.2%
Median Value of owner-occupied units	\$486,800	\$325,000
Vacant housing (%)	31.5%	15.2%
Homeowner vacancy (%)	1.8%	1.5%
Rental vacancy (%)	9.4%	7.6%

Source: United States Census Bureau, Table DP04 Selected Housing Characteristics

Since 2014, the median housing values have increased from \$258,400 to \$486,400 in Collier County. The houses in Collier County have consistently had a higher median housing value than the Florida average.

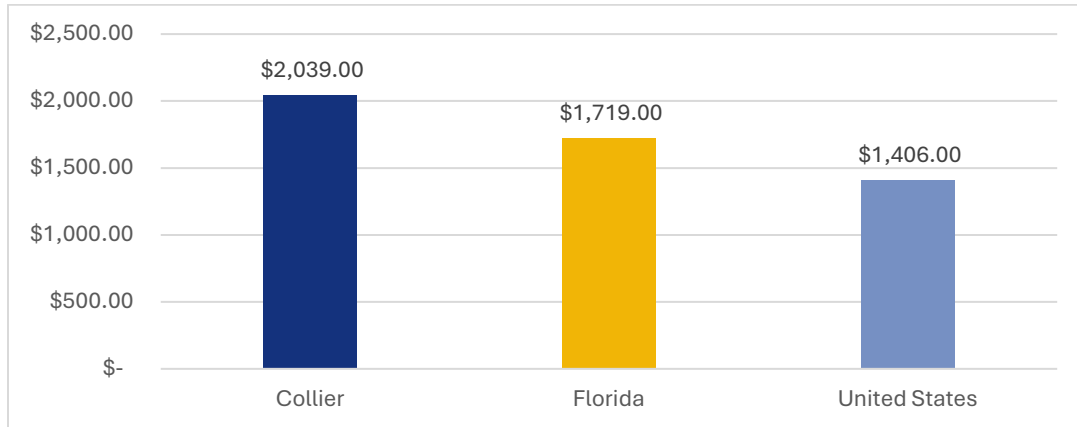
Exhibit D27: Median Owner-Occupied Housing Unit Value, Collier County and Florida, 2014-2023



Source: United States Census Bureau, American Community Survey 5-Year Estimates, Table DP04

Rental costs can be a barrier for people who want to live in a particular area. Collier County has a higher median gross rent when compared to Florida and the United States in 2023.

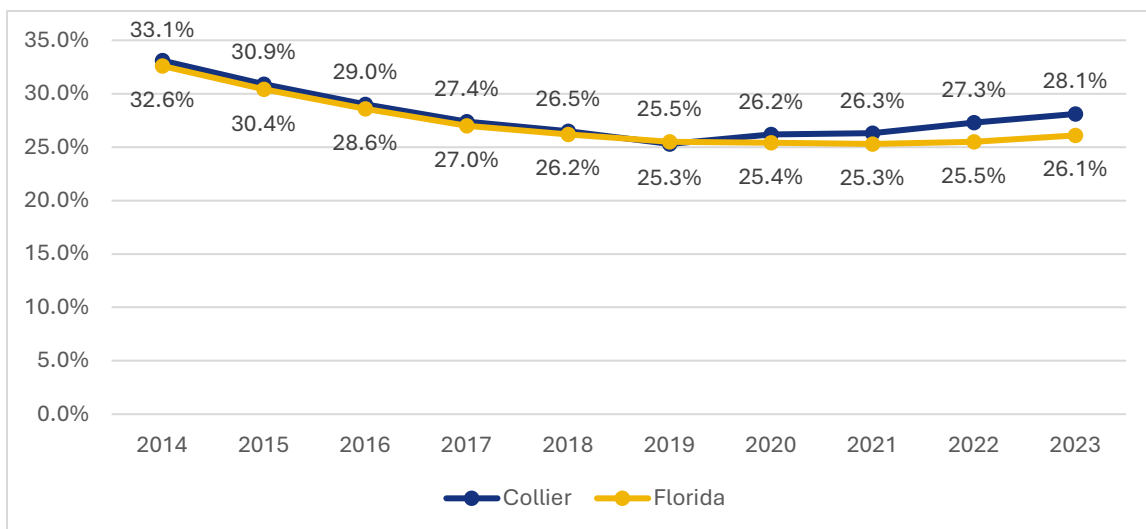
Exhibit D28: Median Cost Gross Rent, Collier County, Florida, United States, 2023



Source: US Census, American Community Survey, B25064

Housing cost-burdened households, as defined by the U.S. Department of Housing and Urban Development, are those that pay more than 30 percent of their income for housing. Housing includes a mortgage/rent, utilities, and basic necessities to live. Between 2014 and the percentage of own-occupied households who were considered housing burdened declined; however, they increased between 2019 and 2023. In 2023, 28.1 percent of owner-occupied households in Collier County were paying more than 30 percent of their household income for housing, compared to 26.1 percent for Florida.

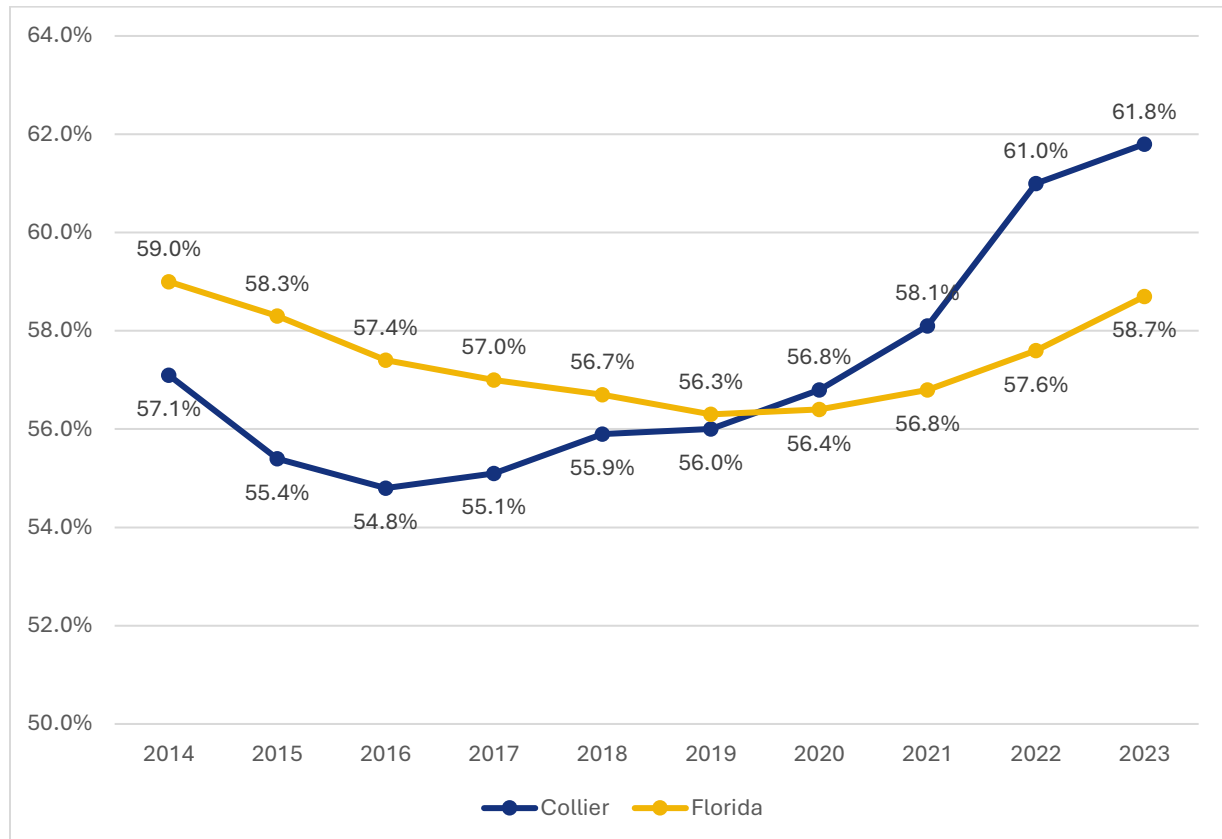
Exhibit D29: Owner-Occupied Households with Monthly Housing Costs of 30% or More of Household Income, Percentage of Owner-Occupied Households, Collier County and Florida. 2014-2023



Source: United States Census Bureau, American Community Survey 5-Year Estimates, Table S2703

Exhibit D30 shows the percentage of households who rent and are considered to have a housing cost burden in Collier County and Florida. The percentage of households that rent and pay more than 30 percent of their income in rent increased significantly between 2016 and 2023 (54.8% 2016, 61.8% 2023). Since 2020, the percentage in Collier County has been higher than the state average (61.8% Collier, 58.7% Florida, 2023). When comparing housing cost burden between those who own a house versus those renting in Collier County, renters have a considerably higher percentage of being considered housing cost burdened (in 2023, 61.8% vs 28.1%).

Exhibit D30: Renter-Occupied Housing Units with Gross Rent Costing 30% or More of Household Income, Percentage of Renter-Occupied Households, Collier County and Florida, 2014-2023



Source: United States Census Bureau, American Community Survey 5-Year Estimates, Table DP04

Settings and Systems



Source: Photo courtesy of the Health Planning Council of Southwest Florida; Photo courtesy of NCH

This section of the Community Health Assessment (CHA) for Collier County provides an overview of the various settings and systems that influence the health of our community. This includes an examination of the healthcare infrastructure, food insecurity, transportation, built environment, and other settings where individuals live, learn, work, and receive care. Understanding the capacity, accessibility, quality, and interconnectedness of these settings and systems is crucial for identifying strengths, gaps, and opportunities for collaboration to improve health service delivery. This will promote health within different environments and build a more integrated and responsive health ecosystem for all residents of Collier County.

Access to Health Care

Collier County has been designated as a Medically Underserved Area (MUA) for the low-income and migrant farm worker populations. Any area with a score of 62 or lower on the Index of Medical Underservice is considered medically underserved. The areas with the lowest numbers are those that are determined to have the most need. Collier County scored 57.1.

Areas in Collier County have been designated as Health Professional Shortage Areas (HPSAs) for primary care, dental health, and behavioral health. The HPSA designation scores counties from one to twenty-six, with higher scores indicating greater levels of need. In primary care, the low-income population in East Naples scored 15 out of 26, the low-income population in Golden Gate scored 11 out of 26, and the low-income population in Immokalee/Everglades scored 14 out of 26. For dental health, the low-income/agricultural worker population in Immokalee/Everglades scored 17 out of 26, while the low-income population in East Naples scored 13 out of 26. The Circuit 20 catchment area, which includes several counties (Charlotte, Glades, Hendry, and Lee) along with Collier County, received a score of 16 out of 26 for mental health among the low-income population.

2025 Collier County Community Health Assessment: Settings and Systems

Access to healthcare is a key factor in achieving a healthy community and is a primary goal of health policy in Florida. Collier County has more licensed providers than the state average in every category except for licensed pediatricians and licensed behavioral/mental health professionals. The county has significantly fewer nursing home beds per 100,000 residents when compared to the state of Florida (206 vs. 366.3). Collier County has a smaller number of full-time employees working at the county health department per 100,000 residents compared to the state average.

Exhibit SS1: Health Resource Availability, Collier County and Florida

	Collier County			Florida
	Number	Rate per 100,000	Quartile**	Rate per 100,000
Providers, Fiscal Year 2022-2023*				
Licensed dentists	318	79.6	4	61.5
Medical doctors (MD, physicians)	1,161	290.5	4	261.2
Pediatricians	48	12.0	n/a	16.5
Family practice physicians	56	14.0	2	13.3
Obstetrician Gynecologist (OB/Gyn)	45	11.3	n/a	8.6
Behavioral/mental health professionals	352	88.1	3	133.2
Facilities, 2023				
Hospital beds	1,207	302.1	3	304.5
Acute beds	944	236.2	3	244.7
Specialty beds	263	65.8	n/a	59.7
Nursing home beds	823	206.0	1	366.3
Adult psychiatric beds (inpatient beds)	105	26.3	n/a	18.3
Child and adolescent psychiatric beds (inpatient beds)	0	0.0	n/a	3.2
County Health Department				
County health department full-time employees, fiscal year 2022-2023	149	37.4	1	40.0
County health department expenditures, fiscal year 2021-2022	\$12,995,520	\$33.20	2	\$39.30

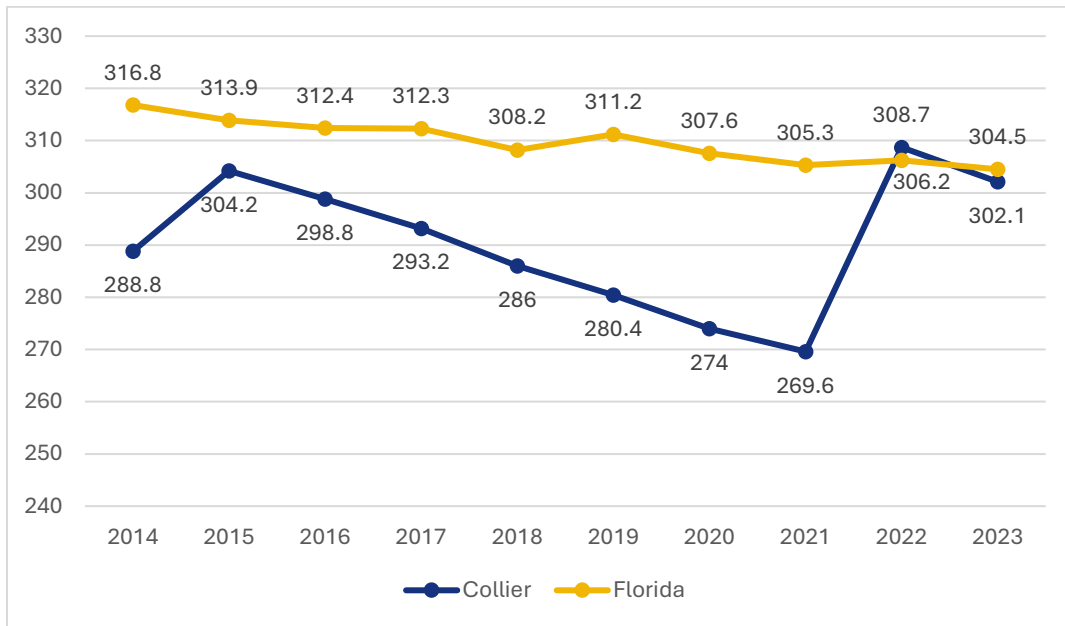
Sources: Florida Department of Health, Division of Medical Quality Assurance; Florida Agency for Health Care Administration (AHCA); Florida Department of Health

*Number of licensed providers does not necessarily equal the number of practicing providers. These numbers may include providers who work in another county, only work part-time, or retired.

**County Compared to other Florida counties. The lowest quartile equals the lowest number. For resource availability, the lowest number is generally considered the worst ranking. Quartile information is provided when at least 51 counties rates greater than zero.

After an increase in the rate of beds per 100,000 population in Collier County in 2021, the county has a similar rate to the state average (302.1 Collier, 304.5 Florida, 2023).

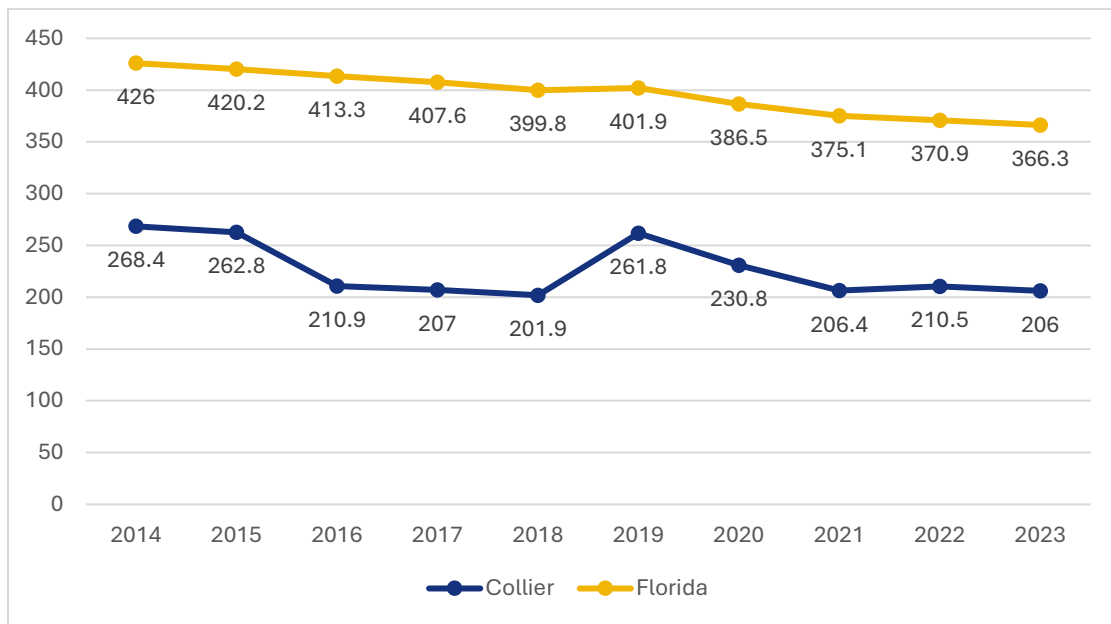
Exhibit SS2: Hospital Beds, Rate per 100,000 Population, Collier County and Florida, 2014-2023



Source: Florida Agency for Health Care Administration

Throughout the past decade, Collier County had significantly fewer nursing home beds per population than the average for the State of Florida.

Exhibit SS3: Nursing Home Beds, Rate per 100,000 Population, Collier County and Florida, 2014-2023



Source: Florida Agency for Health Care Administration



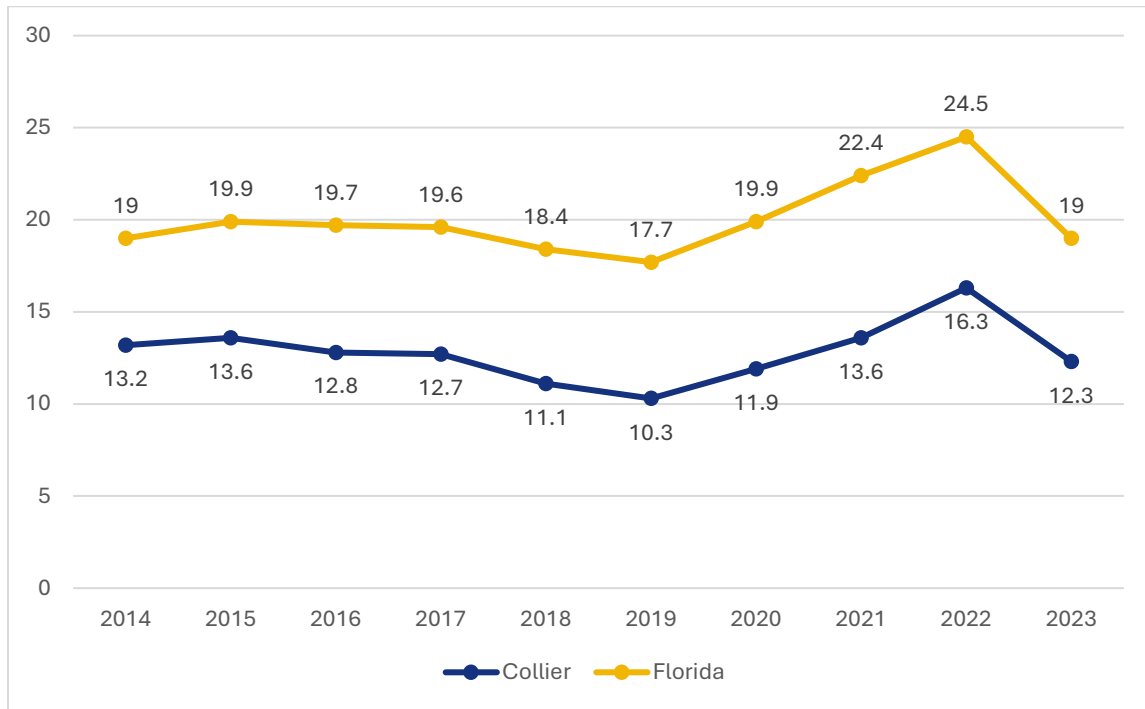
Source: Photo courtesy of NCH

Health Insurance Coverage

Medicaid provides medical coverage to low-income individuals and families. The state and federal governments share the costs of the Medicaid program. Medicaid services in Florida are administered by the Agency for Health Care Administration (AHCA). About half of the recipients are children or adolescents under the age of 21. While children are the largest category of beneficiaries, most of the costs arise from providing services to seniors, especially nursing home care, as well as to people with disabilities who have significant medical costs.

There are four categories of Medicaid eligibility for adults in Florida, which include low-income families, pregnant women, emergency medical assistance for non-citizens, and Medicaid for the elderly and disabled. Eligibility for each of those programs is based on specific income criteria. Medicaid enrollment rates in Collier County are lower than the state rates.

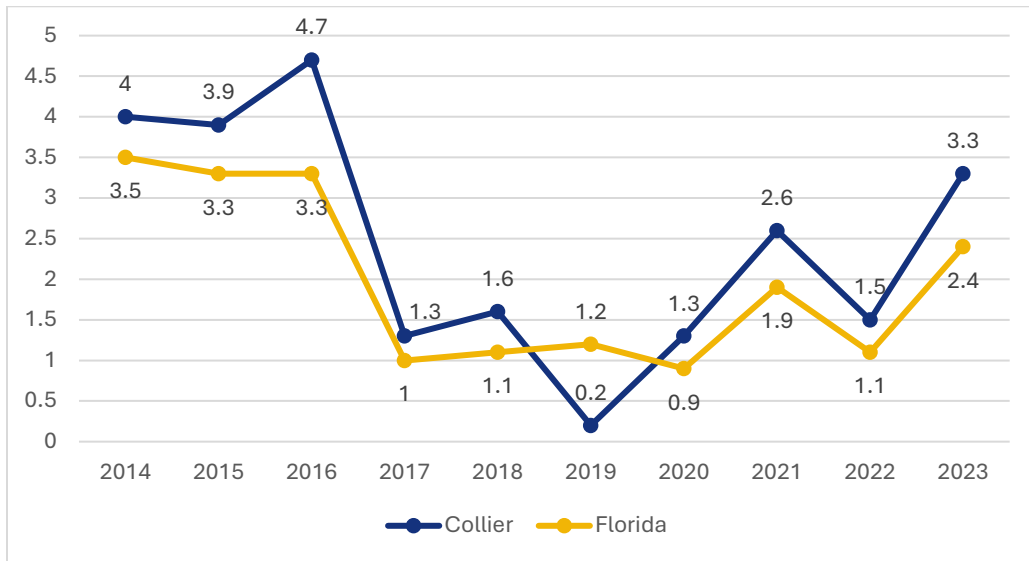
Exhibit SS4: Monthly Medicaid Enrollment, Percent of Population, Collier County and Florida, 2014-2023



Source: Florida Agency for Health Care Administration

Florida KidCare is the state-funded children's health insurance program for those who are uninsured from birth to age 19 and meet income and eligibility requirements. Three state agencies and the Florida Health Kids Corporation work together to form KidCare. The four components of Florida KidCare are: Medicaid, Florida Health Kids, Medikids, and Children's Medical Services (CMS) Network. Medicaid is for children from birth to 19. Florida Health Kids is for children ages 5 to 18 who are ineligible for Medicaid or CMS Network (families pay a monthly premium, based on their income). Medikids for children ages 1 to 4 (families pay a monthly premium, based on their income). The CMS Network is for children with special healthcare needs up to 200% of the Federal Poverty Level. Collier County has a slightly higher percentage of children aged 1-4 enrolled in MediKids than the state as a whole (3.3% Collier, 2.4% Florida, 2023).

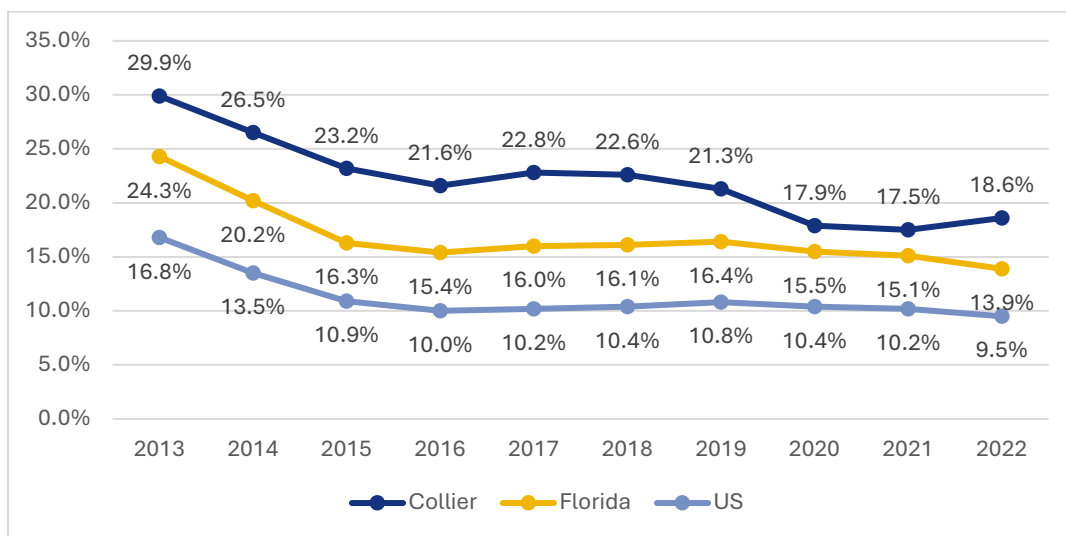
Exhibit SS5: Children Covered by MediKids (Aged 1-4), Percentage of Population Aged 1-4, Collier County and Florida, 2014-2023



Source: Florida Agency for Health Care Administration

Between 2013 and 2016, Collier County, Florida, and the United States started to see a decline in the percentage of the population who were uninsured. Collier County consistently has a higher percentage of people under the age of 65 who are uninsured. It is estimated that in 2022, 18.6 percent of Collier County residents under the age of 65 were without insurance. The following exhibits break out the population who are uninsured by age, sex, race and ethnicity, educational attainment, and income.

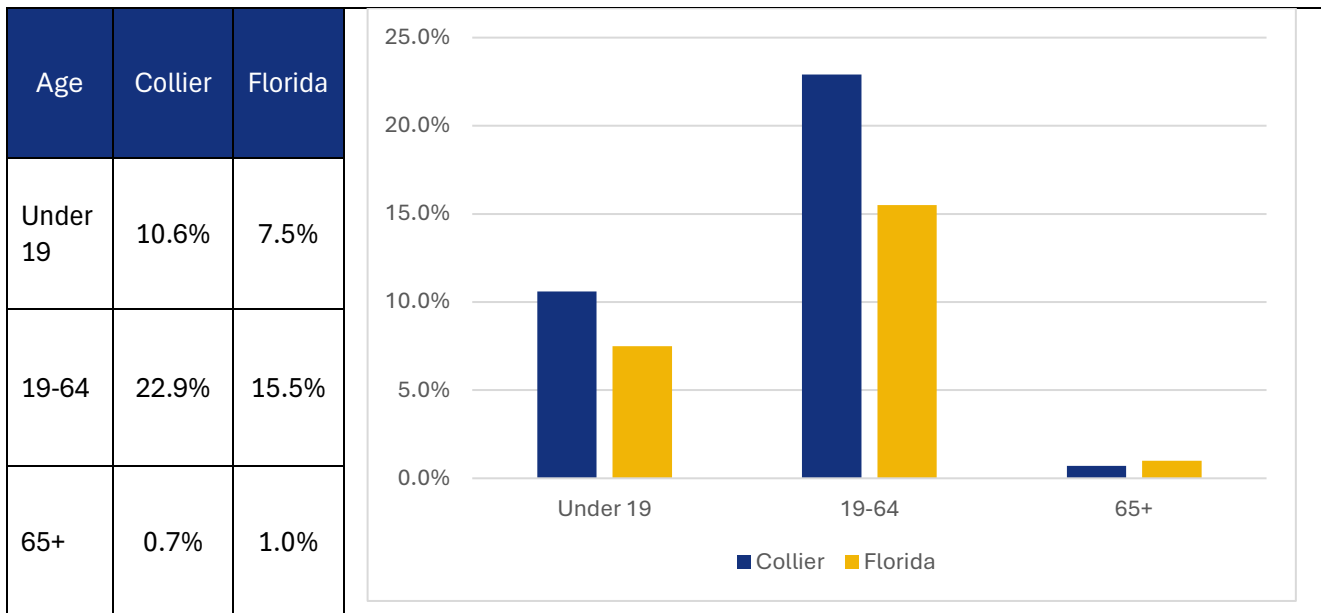
Exhibit SS6: Percentage of the Population Under 65 Years of Age who are Uninsured, Collier County, Florida, United States, 2013-2022



Source: U.S. Census Bureau, Small Area Health Insurance Estimates

In 2023, for the population under 19 years of age in Collier County, 10.6 percent were uninsured compared with 7.5 percent in Florida. Of the core working population 19-64 years of age, in Collier County, 22.9 percent were without health insurance compared with 15.5 percent in the state of Florida, a difference of 7.4 percent. For the population 65 years of age and older in Collier County, only 0.7 percent were without health insurance, while in Florida, only 1.0 percent lacked insurance. This very low proportion of the uninsured is due to the “Medicare effect”; currently, those 65 years of age and above are eligible for Medicare.

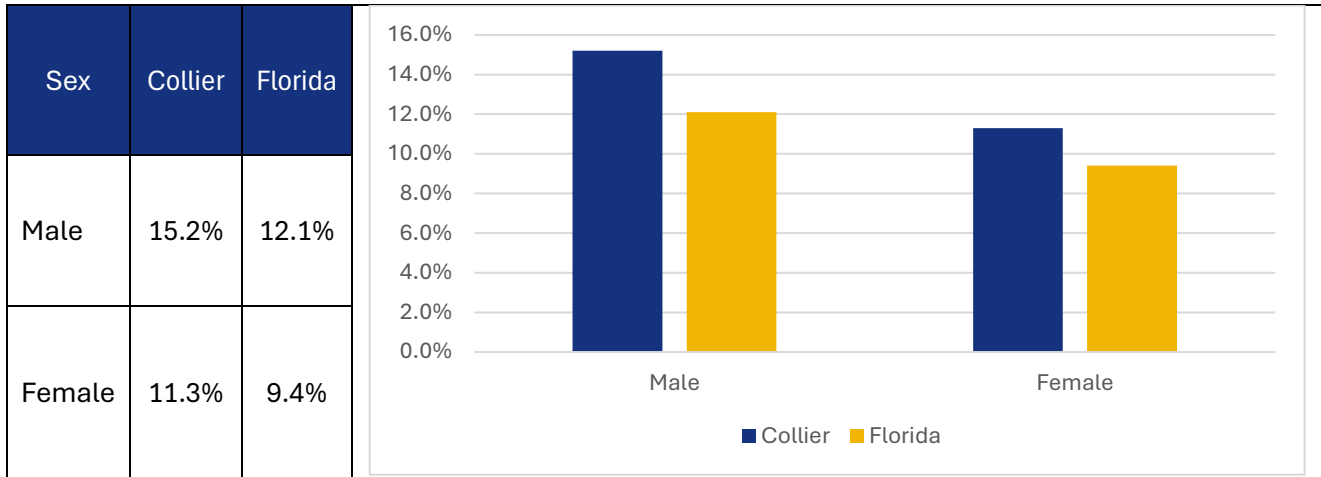
Exhibit SS7: Percentage of Uninsured by Age, Percentage of Civilian Noninstitutionalized Population, Collier County and Florida, 2023



Source: U.S. Census Bureau, 2023 American Community Survey 1-Year Estimates, Table S2701

Compared to females, males in Collier County and in Florida have a slightly higher percentage of those who are uninsured (15.2% male, 11.3% female, Collier 2023). For both males and females, the percentage of uninsured is a little higher in Collier County than the state average. Please note that this data includes both those who are over and under the age of 65.

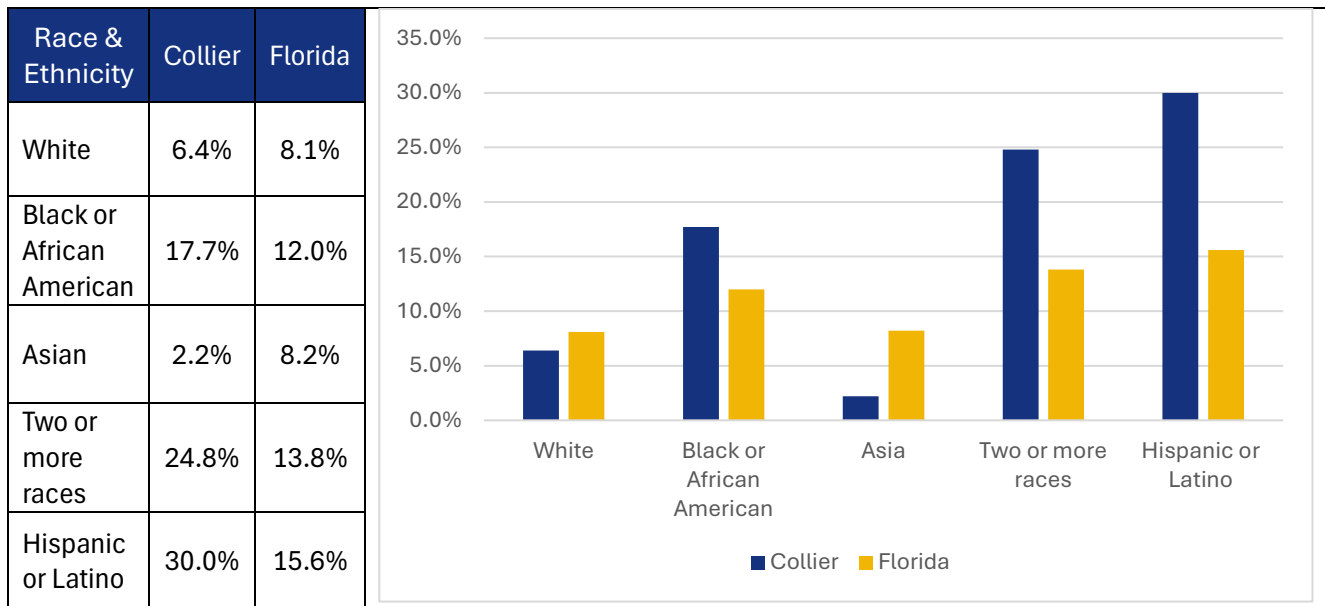
Exhibit SS8: Percentage of Uninsured by Sex, Percentage of Civilian Noninstitutionalized Population, Collier County and Florida, 2023



Source: U.S. Census Bureau, 2023 American Community Survey 1-Year Estimates, Table S2701

For the black, Hispanic, and multiracial population in Collier County, the percentage of uninsured is greater than the average for the state of Florida. The Hispanic or Latino population had the highest percentage of those who are uninsured when compared to other races and ethnicities; that percentage is nearly double the state average (30.0% Collier, 15.6% Florida, 2023).

Exhibit SS9: Percentage of Uninsured by Race and Ethnicity, Percentage of Civilian Noninstitutionalized Population, Collier County and Florida, 2023

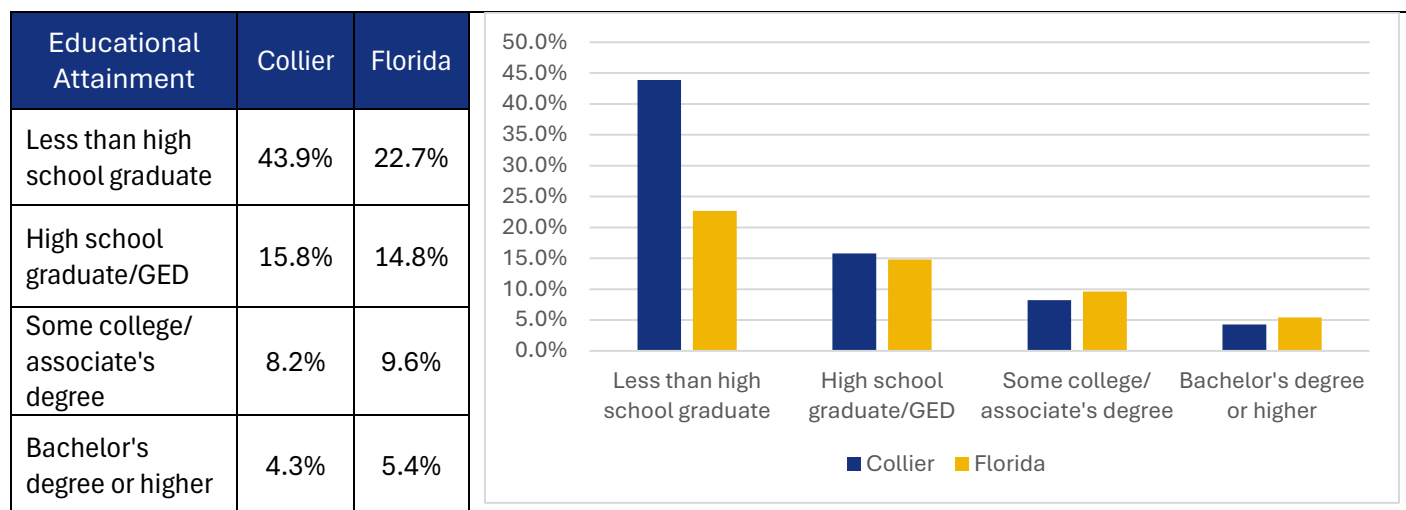


Source: U.S. Census Bureau, 2023 American Community Survey 1-Year Estimates, Table S2701

2025 Collier County Community Health Assessment: Settings and Systems

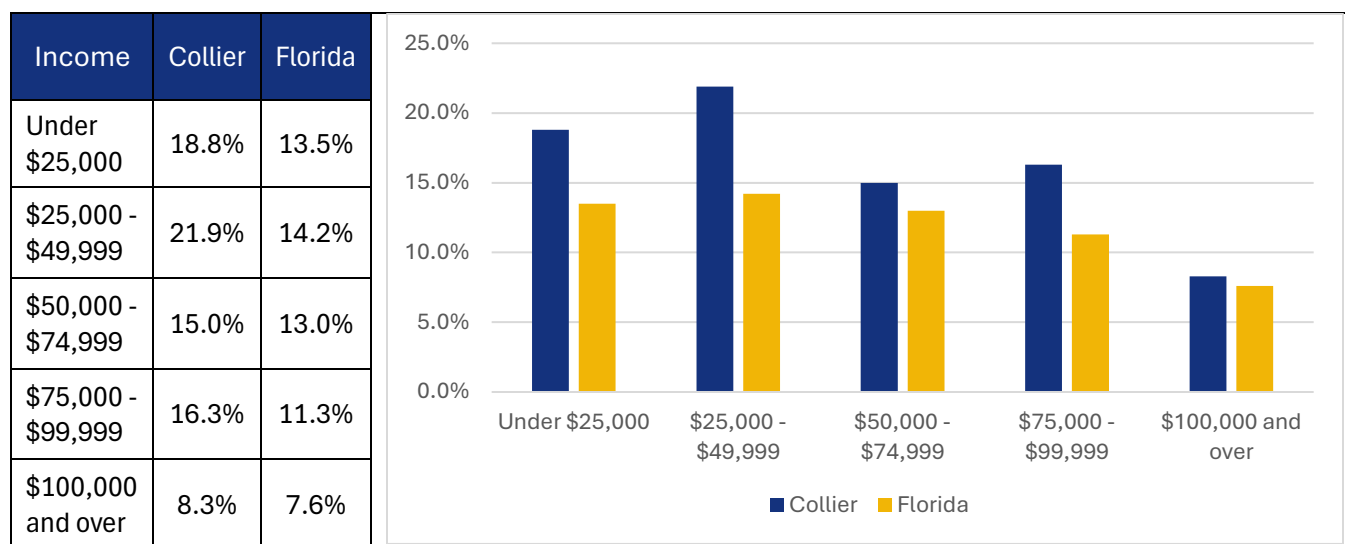
For both Collier County and Florida, as the educational level increases, the percentage of individuals in that group who are uninsured decreases. In Collier County, 43.9 percent of those with less than a high school diploma were uninsured compared to only 4.3 percent of those who have a bachelor's degree or higher.

Exhibit SS10: Percentage of Population 26 Years and Older Uninsured by Educational Attainment, Percentage of Civilian Noninstitutionalized Population, Collier County and Florida, 2023



In both Collier County and Florida as a whole, those with a household income between \$25,000 and \$49,999 are the most likely to be uninsured (21.9% Collier, 14.2% Florida, 2023). Those with household incomes over \$100,000 are the least likely to be uninsured (8.3% Collier, 7.6% Florida, 2023).

Exhibit SS11: Percentage of Uninsured by Household Income (in 2023 Inflation-Adjusted Dollars), Percentage of Civilian Noninstitutionalized Population, Collier County and Florida, 2023



Accessing the Emergency Room

Collier County Residents made 117,289 visits to hospitals in 2023 that did not result in an inpatient admission. Medicare was the number one payer source, representing 35.2 percent of the visits; Medicaid was second with 27.1 percent. The largest number of visits was made to the two NCH hospitals (a total of 62.8% of the visits), followed by the two Physicians Regional Medical Center hospitals (a total of 29.2% of visits). Lee County hospitals were the most frequently visited outside of Collier County.

Exhibit SS12: Emergency Room Visits by Collier County Residents, Payer Source, 2023

Hospitals	Medicaid	Medicare	No charge /Charity	Other	Private, incl. HMO	Self-Pay	Total
NCH Baker Hospital	7,874	16,986		2,150	6,850	4,780	38,640
NCH North Hospital	15,127	9,519		1,263	5,508	3,616	35,033
Physicians Regional Medical Center - Collier Blvd	3,068	7,081		858	4,560	1,935	17,502
Physicians Regional Medical Center - Pine Ridge	2,484	6,480		727	4,953	2,097	16,741
Healthpark Medical Center	1,936	47	71	62	658	154	2,928
Lee Memorial Hospital	187	243	49	113	396	140	1,128
Gulf Coast Hospital	258	184	42	113	254	121	972
Lehigh Regional Medical Center	331	102		7	206	227	873
Anne Bates Leach Eye Hospital	24	64		5	87	27	207
Cape Coral Hospital	24	23	7	13	22	18	107
Cleveland Clinic Hospital	3	39			45	12	99
Hendry Regional Medical Center	13	8	24	5	12	32	94
Jackson Memorial Hospital	17	10		4	34	16	81
Sarasota Memorial Hospital	13	13		3	25	27	81
All Other Hospitals	466	482	43	227	1,196	389	2,803
Grand Total	31,825	41,281	236	5,550	24,806	13,591	117,289

Source: AHCA via Broward Regional Health Planning Council Hospital Inpatient and Emergency Department Analytical System. The AHCA ED data contains records for all ED visits for which the severity of the visits did not result in an inpatient admission. Includes visits by Collier County residents to the ED of any hospital in Florida.

Blank spots represent where no data was collected

*Visits are indicative of Collier County residents only, not all visits for each facility

Ambulatory Care Sensitive conditions, such as asthma, diabetes, or dehydration, are hospitalization conditions where timely and effective ambulatory care can decrease hospitalizations by preventing the onset of an illness or condition, controlling an acute episode of an illness, or managing a chronic disease or condition. High rates of Ambulatory Care Sensitive hospitalizations in a community may be an indicator of a lack of or failure of prevention efforts, a primary care resource shortage, poor performance of primary health care delivery systems, or other

factors that create barriers to obtaining timely and effective care. The Florida Department of Health released an Ambulatory Sensitive Conditions Profile for Preventable Hospitalizations for persons under 65 years of age for each county using 2023 data. Collier County has a lower rate of preventable hospitalizations than the state average (659.8 Collier, 838.2 Florida). Hospitalizations from Ambulatory Care Sensitive Conditions (ACSCs) are hospital admissions that might have been avoided through access to high-quality outpatient care and are a key tool for community health needs assessments (CHNA). All data in the table are for those under the age of 65 unless indicated.

Exhibit SS13: Ambulatory Sensitive Conditions for Preventable Hospitalizations Under 65, Collier County and Florida, 2023

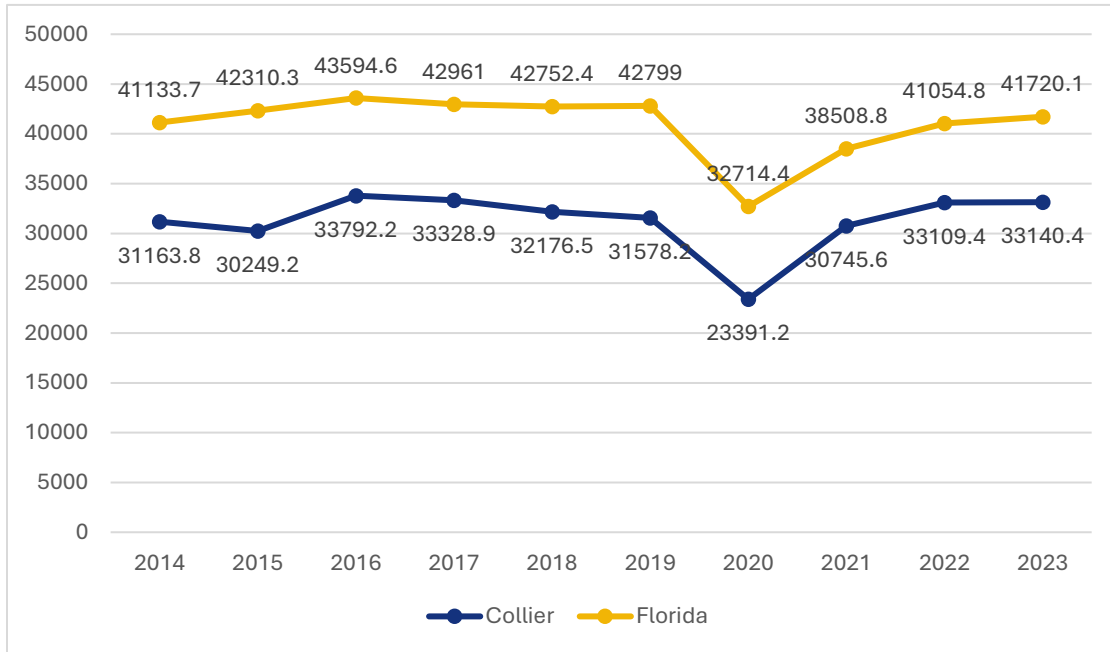
	County Count	County Rate	County Quartile	State Rate
All Conditions	1,751	659.8	1	838.2
Angina	18	6.8	3	6.0
Asthma	117	44.1	3	47.3
Cellulitis	181	68.2	2	66.9
Chronic Obstructive Pulmonary Disease	101	38.1	1	59.0
Congestive Heart Failure	129	48.6	1	85.8
Convulsions (Aged 0-5 Years)	8	3.0	2	4.0
Convulsions (Aged 6 Years and Older)	67	17.6	1	24.7
Grand Mal and Other Epileptic Conditions	171	64.4	2	81.4
Dehydration – Volume Depletion	142	53.5	3	40.9
Dental Conditions	15	5.7	1	9.9
Diabetes	269	101.4	1	138.5
Severe Ear, Nose, and Throat Infections	52	19.6	4	11.0
Hypertension	9	3.4	n/a	3.4
Gastroenteritis	102	38.4	3	34.6
Hypoglycemia	5	1.9	n/a	1.7
Kidney/Urinary Infection	53	20.0	2	20.3
Nutritional Deficiencies	193	72.7	1	138.7
Bacterial Pneumonia	145	54.6	1	70.4
Skin Grafts with Cellulitis	10	3.8	2	5.9
Pelvic Inflammatory Disease	16	12.2	3	10.8

Source: Florida Agency for Health Care Administration (AHCA)

Quartile is a comparison of the county to the other 67 counties in Florida. 1 indicates the best to 4 which is the worst.

Collier County residents consistently have fewer emergency department visits per 100,000 than the state average. The rates follow similar trends to the state rates.

Exhibit SS14: Age-Adjusted Emergency Department Visits, Rate per 100,000 Population, Collier County and Florida, 2014-2023



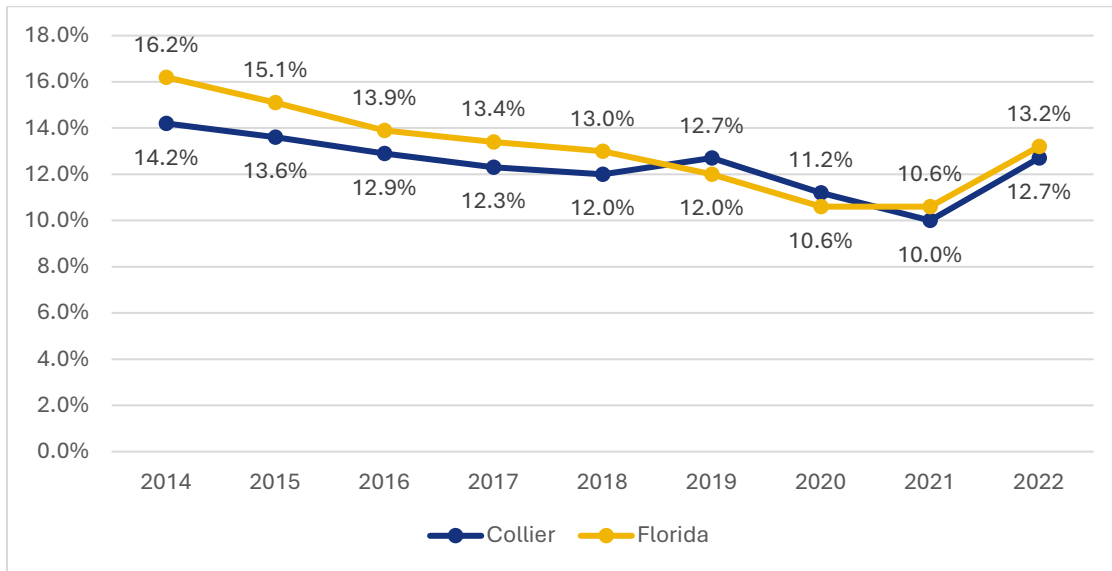
Source: Florida Agency for Health Care Administration (AHCA)

Food Insecurity

In 2022, 44,430 people in Collier County were food insecure. It was estimated that 40 percent of food-insecure individuals were above the SNAP and other nutrition programs threshold, while 60 percent were below the SNAP threshold of 200 percent of the poverty level. The average meal cost in Collier County is \$4.78, which is .65 cents higher than the Florida average, \$4.13. The annual food budget shortfall for the county was \$39,964,000; this is the total annualized additional dollar amount that food-insecure individuals report needing, on average, to purchase just enough food to meet their food needs.

After many years of falling, the food insecurity rate for Collier County and Florida increased between 2021 and 2022. The rate for Collier County is similar to the state rate (12.7% Collier, 13.2% Florida, 2022).

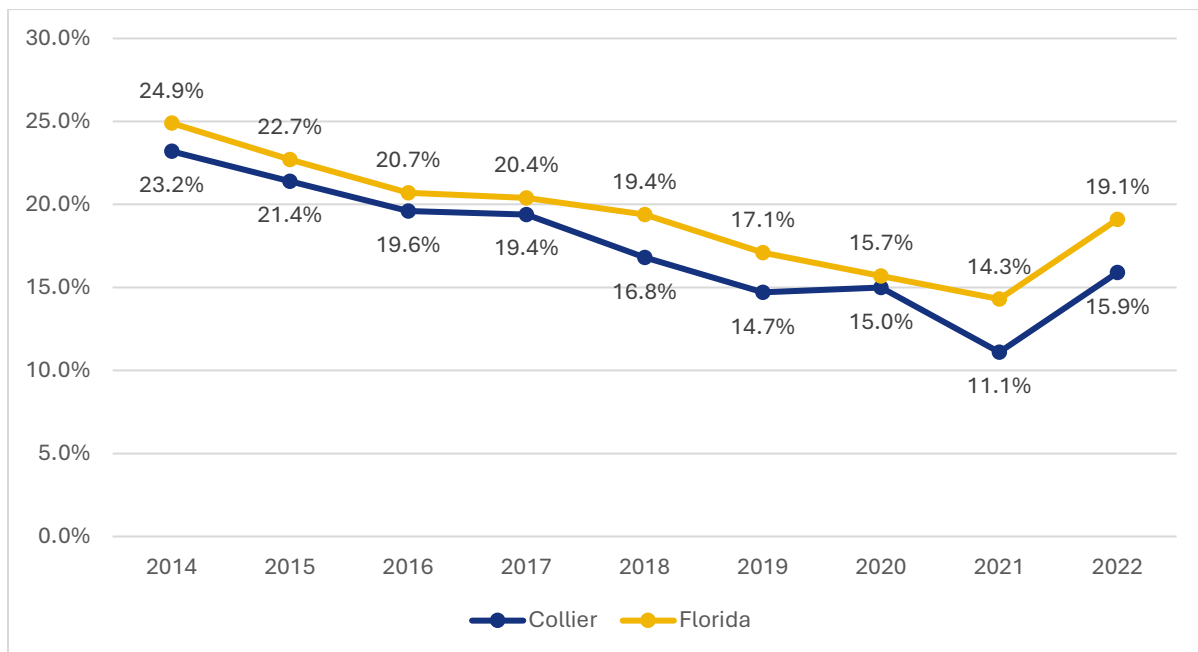
Exhibit SS15: Food Insecurity Rate, Percentage of Population, Collier County and Florida, 2014-2022



Source: Feeding America, Map the Meal Gap

The number of children who are food insecure has been decreasing since 2014; however, that percentage increased between 2021 and 2022. When compared to the state, Collier County has consistently had a slightly lower child food insecurity rate (15.9% Collier, 19.1% Florida, 2022).

Exhibit SS16: Child Food Insecurity Rate, Percentage of Population Under 18, Collier County and Florida, 2014-2022



Source: Feeding America, Map the Meal Gap

Parks and Trails

Collier County offers a wide array of parks, beaches, and trails. There are 45 different types of parks available to Collier County residents and visitors; these include regional parks, community parks, neighborhood parks, aquatic parks, boat parks, and skate & BMX parks. Eight beaches are also available, attracting visitors from around the globe. Despite these resources, Collier County has a smaller percentage of the population living near a park or off-street trail system compared to the Florida average.

Exhibit SS17: Proximity to Park and Trails, Collier County and Florida, 2022

	Collier	Florida
Percent of the population living within a ten-minute walk (1/2 Mile) of a park	22.4%	43.0%
Percent of the population living within a ten-minute walk (1/2 Mile) of an off-street trail system	11.9%	18.8%

Source: Florida Environmental Public Health Tracking



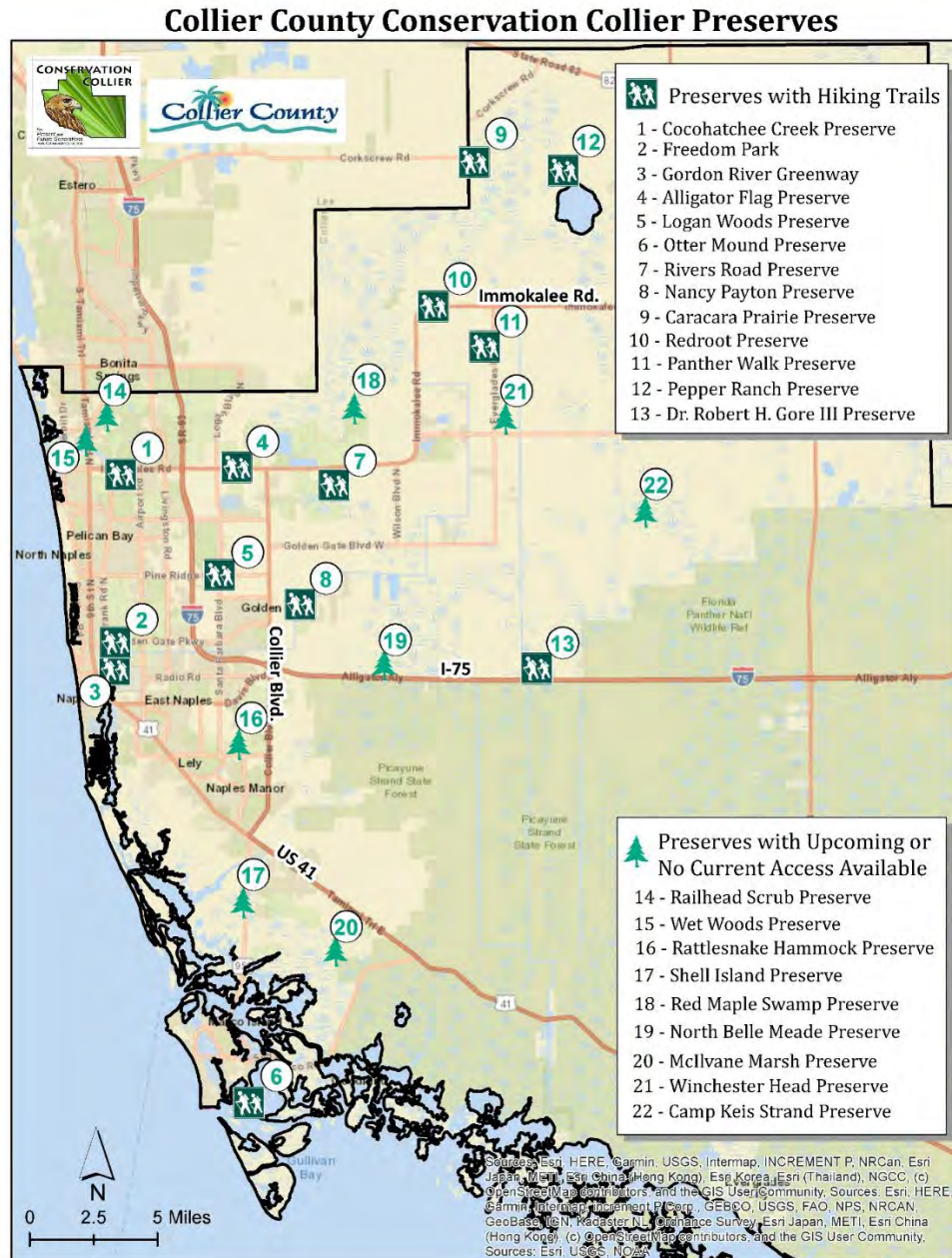
Source: Photo courtesy of Health Planning Council of Southwest Florida

Conservation Lands

Collier County is rather unique in that the majority of its land area, nearly 80 percent, is in conservation. By having a larger land area that is in conservation, this affects health outcomes by improving water and air quality and providing access to recreation and environmental education opportunities for residents. It also limits urban/sub-urban development to specific areas of the county.

According to Conservation Collier, funding obtained from property taxes was used to acquire and manage 5,059 acres of preserve land in 23 different locations throughout Collier County. Below is a map of all Conservation Collier Preserves.

Exhibit SS18: Conservation Collier Preserves Location Map, Collier County, 2025



Source: Conservation Collier, pulled April 14, 2025

Transportation

According to the Centers for Disease Control and Prevention (CDC), high commute times can be linked to negative health outcomes such as obesity, high blood pressure, heart disease, and poor

mental health. A higher percentage of Collier County workers carpool to work and work at home when compared to the Florida average. Collier County workers, on average, have a lower travel time than the Florida average.

Exhibit SS19: Commuting to Work, Workers 16 Years and Over, Percent of Workers (Aged 16+), Collier County and Florida, 2023

	Collier	Florida
Car, truck, or can - drove alone	64.8%	69.1%
Car, truck, or can - carpooled	10.6%	9.7%
Public transportation (excluding taxicabs)	1.0%	1.4%
Walked	1.7%	1.5%
Other means	2.9%	2.5%
Worked from home	18.9%	15.8%
Mean travel time to work (minutes)	25.3	28.5

Source: U.S. Census Bureau, 2023 American Community Survey 1-Year Estimates, Table DP03

About 95 percent of households in Collier County have at least one vehicle available. About 14 percent of households have three or more vehicles.

Exhibit SS20: Cars per Household, Collier County and Florida, 2023

	Collier	Florida
No vehicles available	5.1%	5.8%
1 vehicle available	41.8%	39.1%
2 vehicles available	39.3%	38.3%
3 or more vehicles available	13.8%	16.9%

Source: U.S. Census Bureau, 2023 American Community Survey 1-Year Estimates, Table DP04

Crime

Collier County has a lower-than-average rate for all crimes and domestic violence when compared to the State of Florida as a whole. The three most common categories of crimes in Collier County are domestic violence, larceny, and burglary.

Exhibit SS21: Crime, Rate per 100,000 Population, 3-Year Rate, Collier County & Florida, 2021-2023

	Collier	Florida	Quartile*
Aggravated Assault	35.5	103.4	1
Burglary	40.2	94.3	1
Domestic Violence Offenses	179.3	309.1	2
Forcible Sex Offenses	5.7	10.2	1
Larceny	123.7	191.20	1
Motor Vehicle Theft	14.5	46.9	1
Murder	1.8	10.4	1
Robbery	8.4	27.3	1

Source: Florida Department of Law Enforcement (FDLE)

*County compared to other Florida Counties. The lowest quarter equals the lowest number

Health Behaviors



Source: Photo courtesy of the Health Planning Council of Southwest Florida, Inc.


















This section of the Community Health Assessment (CHA) for Collier County examines key health behaviors that significantly impact the well-being of our residents. It includes an analysis of nutrition, physical activity, substance use, and preventive care. The section further explores injury mortality, including unintentional injury, unintentional poisoning, and motor vehicle crashes. Additionally, it addresses maternal and infant health, oral health, mental health, and mental disorders. Examining these behaviors is crucial for identifying areas where interventions and prevention efforts can effectively improve our community's health and quality of life.

Overweight and Obese

Data note: The latest data available for this section is from 2019. The latest county-level data has yet to be released.

The table below shows adults in Collier County who reported being overweight in 2013, 2016, and 2019. Overall, during this period, there has been a significant increase in the percentage of adults who reported being overweight. In 2019, about 41 percent of adults were considered overweight, which is higher than the Florida average (41% Collier vs. 38% Florida). In addition to the overall snapshot, the data is presented using various demographic cuts: race and ethnicity, sex, age group, marital status, educational level, and annual income. In 2019, all races/ethnicities in Collier County had a higher percentage of adults who were overweight when compared to Florida. When compared to other races/ethnicities in Collier County, non-Hispanic blacks had a higher percentage of adults who were overweight. When compared to women, men consistently had a higher percentage of overweight adults in Collier County. In 2019, the 45 to 64 and 65 and older age groups in Collier County had a higher percentage of adults who were overweight than the Florida average. The 45 to 64 age group in Collier County consistently had the highest percentage of overweight adults compared to the other age groups in 2019. Slightly over 50 percent of adults in Collier County with a high school/GED level of education were overweight, which is significantly higher than those with less/more than a high school education in 2019. In both Collier County and Florida in 2019, individuals making less than \$25,000 a year had the smallest percentage of adults who were overweight.

Exhibit HB1: Adults Who are Overweight, Collier County and Florida, 2013, 2016, and 2019


















	Collier				Florida
	2013	2016	2019	Trend	2019
Overall	33.0%	37.2%	40.8%		37.6%
Race and Ethnicity					
Non-Hispanic White	36.3%	36.2%	39.0%		37.8%
Non-Hispanic Black*		43.4%	51.5%		35.1%
Hispanic	23.8%	38.3%	41.2%		39.1%
Sex					
Men	44.8%	44.1%	48.8%		42.6%
Women	20.7%	29.2%	32.5%		32.5%
Age Group					
Ages 18-44	32.1%	31.8%	33.6%		35.5%
Ages 45-64	28.4%	41.1%	45.6%		39.2%
Ages 65 and Older	38.1%	39.4%	41.7%		39.2%
Marital Status					
Married/Couple	37.5%	34.9%	41.9%		40.2%
Not Married/Couple	26.0%	39.8%	39.3%		34.7%
Education Level					
Less Than High School*		34.7%	37.7%		36.7%
High School/GED	29.7%	35.7%	52.2%		37.1%
More Than High School	35.1%	38.4%	36.0%		38.25
Annual Income					
<\$25,000	33.1%	34.3%	34.7%		34.75
\$25,000 - \$49,999	24.2%	40.9%	41.7%		35.3%
\$50,000 or More	36.6%	41.1%	40.9%		42.4%

Source: Florida Behavioral Risk Factor Surveillance System telephone survey conducted by the Centers for Disease Control and Prevention (CDC) and Florida Department of Health Division of Community Health Promotion.

*For 2013 no data was available, the blank box is intentional

The table below shows adults in Collier County who reported being obese in 2013, 2016, and 2019. Overall, during this period, there has been an increase in the percentage of adults who reported that they were obese. In 2019, about 23 percent of adults were considered obese, which was lower than the Florida average (23% Collier vs. 27% Florida). In addition to the overall snapshot, the data is presented using various demographic cuts: race and ethnicity, sex, age group, marital status, educational level, and annual income. The non-Hispanic white population of adults in Collier County consistently had a smaller percentage of adults who were obese; this population also saw an increase in the percentage of obese adults. Women in Collier County consistently had a smaller percentage of obesity than the Florida average for women in 2019. In 2019, the age group that had the largest percentage of adults who were obese in Collier County was those 18 to 44, and in Florida, it was those 45 to 64. From 2013 to 2019, the percentage of adults who were obese in Collier County increased amongst those who were married/couple. When compared to not married/coupled adults in Collier County, married/coupled adults had a higher percentage of being obese. In both Collier County and Florida from 2013 to 2019, adults making \$50,000 or more annually had a smaller percentage of being obese when compared to adults making less than \$25,000 and \$25,000 to \$49,999 a year.

Exhibit HB2: Adults Who are Obese, Collier County and Florida, 2013, 2016, and 2019

	Collier				Florida
	2013	2016	2019	Trend	2019
Overall	20.8%	21.3%	23.1%		27.0%
Race and Ethnicity					
Non-Hispanic White	16.0%	18.2%	20.0%		25.4%
Non-Hispanic Black		26.8%	33.1%		35.0%
Hispanic	34.8%	26.9%	32.0%		28.2%
Sex					
Men	23.2%	22.4%	26.2%		26.9%
Women	18.4%	19.9%	19.9%		27.2%
Age Group					
Ages 18-44	19.5%	23.2%	33.1%		22.1%
Ages 45-64	21.7%	24.5%	20.4%		32.6%
Ages 65 and Older	21.4%	14.3%	18.6%		27.6%
Marital Status					
Married/Couple	21.7%	22.9%	24.6%		26.6%
Not Married/Couple	19.8%	19.5%	20.9%		27.5%
Education Level					
Less Than High School		35.2%	30.1%		28.9%
High School/GED	27.6%	25.1%	19.6%		30.3%
More Than High School	15.3%	16.0%	23.7%		25.1%
Annual Income					
<\$25,000	27.8%	29.0%	26.5%		30.3%
\$25,000 - \$49,999	28.1%	22.6%	26.5%		29.8%
\$50,000 or More	17.5%	16.6%	21.0%		25.0%













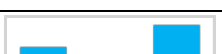




Source: Florida Behavioral Risk Factor Surveillance System telephone survey conducted by the Centers for Disease Control and Prevention (CDC) and Florida Department of Health Division of Community Health Promotion.

Tobacco Use

Data note: The latest data available for this section is from 2019. The latest county-level data has yet to be released.

The table below shows adults in Collier County who reported that they currently smoke in 2013, 2016, and 2019. In 2019, about 12 percent of adults who are current smokers was lower than the Florida average (12% Collier vs. 15% Florida). In addition to the overall snapshot, the data is presented using various demographic cuts: race and ethnicity, sex, age group, marital status, educational level, and annual income. When compared to other races/ethnicities, non-Hispanic blacks had the smallest percentage of adults who were current smokers in Collier County. From 2013 to 2016, there was a drastic decrease in the percentage of Hispanic adult smokers, going from 21.7 percent to 8.2 percent. In 2019, the non-Hispanic white population had the largest percentage of adults who were current smokers in Collier County. In both Collier County and Florida, men had a higher percentage of adults who were current smokers when compared to women. In both Collier County and Florida, individuals between the ages of 45 and 64 are most likely to be current smokers. In Collier County, individuals over 65 are the least likely to report that they are current smokers. Adults in Collier County between the ages of 45 and 65 have the highest percentage of current smokers. Between 2013 and 2019 in Collier County, adults in not married/in a couple have consistently had a higher percentage of current smokers. In 2019, adults with less than a high school education or a high school education in Collier County were twice as likely to be current smokers as adults who had more than a high school education. In both Collier County and Florida, adults who have higher incomes consistently report lower percentages of being current smokers than adults with lower incomes. In 2019, more than four times as many adults in Collier County with incomes below \$25,000 reported being current smokers than those with incomes of \$50,000 or more.


















Exhibit HB3: Adults Who are Current Smokers, Collier County and Florida, 2013, 2016, and 2019

	Collier				Florida
	2013	2016	2019	Trend	2019
Overall	13.9%	9.2%	11.7%		14.8%
Race and Ethnicity					
Non-Hispanic White	11.4%	10.1%	12.9%		16.4%
Non-Hispanic Black		8.0%	6.3%		12.4%
Hispanic	21.7%	8.2%	8.5%		12.6%
Sex					
Men	19.4%	12.2%	12.2%		15.7%
Women	8.7%	6.1%	11.2%		13.9%
Age Group					
Ages 18-44	17.9%	10.1%	13.1%		15.0%
Ages 45-64	22.4%	11.5%	13.5%		19.6%
Ages 65 and Older	2.4%	4.8%	8.8%		9.3%
Marital Status					
Married/Couple	7.2%	8.0%	8.3%		11.3%
Not Married/Couple	23.9%	10.6%	16.4%		18.9%
Education Level					
Less Than High School	32.9%	6.8%	15.0%		23.6%
High School/GED	15.3%	13.9%	18.8%		20.0%
More Than High School	7.6%	7.6%	7.8%		10.2%
Annual Income					
<\$25,000	26.4%	13.5%	20.3%		23.4%
\$25,000 - \$49,999	18.1%	9.5%	14.0%		17.9%
\$50,000 or More	7.5%	7.7%	4.9%		9.9%

Source: Florida Behavioral Risk Factor Surveillance System telephone survey conducted by the Centers for Disease Control and Prevention (CDC) and Florida Department of Health Division of Community Health Promotion.

The table below shows adults in Collier County who reported being former smokers in 2013, 2016, and 2019. In 2019, about 30 percent of adults who are former smokers is significantly higher than the Florida average (30% Collier vs. 26% Florida). In addition to the overall snapshot, the data is presented using various demographic cuts: race and ethnicity, sex, age group, marital status, educational level, and annual income. In both Collier County and Florida, non-Hispanic white adults have the highest percentage of former smokers, and non-Hispanic black adults have the lowest percentage of former smokers. In both Collier County and Florida, a higher percentage of men than women are former smokers. In 2019, the percentage of former smokers among men was similar in Collier County and Florida; the percentage of former smokers among women was higher in Collier County than in Florida (29.6% Collier vs. 23.3% Florida). Across time in Collier County, the lowest percentages of former smokers are found among those 18-44, and the highest percentages of former smokers are in those aged 65 and older. In both Collier County and Florida, a higher percentage of adults who are married/in a couple than those who are not married/in a couple are former smokers. In Collier County, a higher percentage of adults who were married in a couple or not married/in a couple stated that they were former smokers in 2013 than in 2016 or 2019. In 2013-2019, the highest percentages of former smokers in Collier County were among adults with more than a high school education, and the lowest percentages of former smokers were among those with less than a high school education. In Collier County, adults with higher levels of annual income reported being former smokers at higher percentages than those with lower levels of annual income in 2013-2019. In Florida, the percentages were more similar among the various income levels and did not show as clear a pattern.


















Exhibit HB4: Adults Who are Former Smokers, Collier County and Florida, 2013, 2016, and 2019

	Collier				Florida
	2013	2016	2019	Trend	2019
Overall	36.3%	25.6%	29.7%		26.3%
Race and Ethnicity					
Non-Hispanic White	43.8%	35.5%	39.7%		33.9%
Non-Hispanic Black		7.2%	8.4%		14.2%
Hispanic	20.5%	14.3%	9.0%		17.0%
Sex					
Men	44.8%	28.9%	29.8%		29.5%
Women	28.2%	22.1%	29.6%		23.3%
Age Group					
Ages 18-44	19.1%	12.0%	10.4%		14.4%
Ages 45-64	35.7%	26.0%	24.1%		27.7%
Ages 65 and Older	52.6%	45.5%	48.7%		42.8%
Marital Status					
Married/Couple	43.0%	28.2%	35.5%		29.6%
Not Married/Couple	27.4%	22.2%	21.8%		22.4%
Education Level					
Less Than High School	14.1%	11.9%	13.0%		24.2%
High School/GED	38.3%	27.9%	25.6%		27.8%
More Than High School	42.2%	28.9%	35.4%		26.1%
Annual Income					
<\$25,000	22.9%	18.6%	20.4%		24.1%
\$25,000 - \$49,999	30.7%	23.6%	24.1%		29.0%
\$50,000 or More	45.0%	36.3%	35.7%		27.8%

Source: Florida Behavioral Risk Factor Surveillance System telephone survey conducted by the Centers for Disease Control and Prevention (CDC) and Florida Department of Health Division of Community Health Promotion.

The table below shows adults in Collier County who reported using e-cigarettes in 2013, 2016, and 2019. In 2019, about three percent of adults who use e-cigarettes was significantly lower than the Florida average (3% Collier vs. 8% Florida). In addition to the overall snapshot, the data is presented using various demographic cuts: race and ethnicity, sex, age group, marital status, educational level, and annual income. The usage of e-cigarettes was not tracked as a part of the BRFSS in 2013, so data is only available for 2016 and 2019. In Collier County in 2019, a higher percentage of non-Hispanic black adults used e-cigarettes than the other race/ethnicity groups; however, the percentage for each group was under five percent. In Florida, non-Hispanic white adults report using e-cigarettes at a higher percentage than the other race/ethnicity groups. The largest increase in e-cigarette usage between 2016 and 2019 in Collier County was among non-Hispanic black individuals; the percentage increased from 0.0 percent in 2016 to 4.4 percent in 2019. In both Collier County and Florida, a higher percentage of men than women reported that they currently use e-cigarettes. Both men and women in Collier County currently use e-cigarettes at a lower percentage than the Florida average. Women in Collier County showed a higher percentage increase between 2016 and 2019. In both Collier County and Florida, adults between the ages of 18 and 44 use e-cigarettes at higher rates than older adults. Only 0.1 percent of adults over 65 in Collier County reported using e-cigarettes in 2019. In both Collier County and Florida, a higher percentage of adults who are not married or in a couple use e-cigarettes than those who are married or in a couple. In Collier County, there was an increase in the percentage of adults who use e-cigarettes between 2016 and 2019 among both those who are married/in a couple or not married/in a couple. In 2019, adults in Collier County who had less than a high school education were slightly more likely to use e-cigarettes than those with a high school education and those with more than a high school education. However, the difference was less than one percent. In Collier County, a higher percentage of adults with an annual income of less than \$25,000 currently use e-cigarettes than those with higher incomes. In Florida for 2019, the trend was the opposite; the highest percentage of current users of e-cigarettes are among those with incomes of \$50,000 or more.

Exhibit HB5: Adults Who Currently Use E-Cigarettes, Collier County and Florida 2016, and 2019

	Collier			Florida
	2016	2019	Trend	2019
Overall	2.4%	3.4%		7.5%
Race and Ethnicity				
Non-Hispanic White	3.4%	3.3%		8.6%
Non-Hispanic Black	0.0%	4.4%		4.0%
Hispanic	1.5%	2.4%		6.3%
Sex				
Men	3.3%	3.8%		8.4%
Women	1.5%	3.0%		6.7%
Age Group				
Ages 18-44	3.4%	7.0%		13.2%
Ages 45-64	3.0%	4.0%		5.9%
Ages 65 and Older	0.3%	0.1%		1.7%
Marital Status				
Married/Couple	1.6%	2.5%		6.1%
Not Married/Couple	3.7%	4.4%		9.1%
Education Level				
Less Than High School	0.9%	3.9%		7.0%
High School/GED	2.6%	3.3%		7.5%
More Than High School	2.9%	3.2%		7.6%
Annual Income				
<\$25,000	4.3%	4.1%		5.9%
\$25,000 - \$49,999	1.8%	3.1%		5.9%
\$50,000 or More	2.7%	2.9%		8.6%


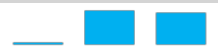















Source: Florida Behavioral Risk Factor Surveillance System telephone survey conducted by the Centers for Disease Control and Prevention (CDC) and Florida Department of Health Division of Community Health Promotion.

Alcohol Use

Data note: The latest data available for this section is from 2019. The latest county-level data has yet to be released.

The table below shows adults in Collier County who reported that they engaged in heavy or binge drinking in 2013, 2016, and 2019. In 2019, about 18 percent of adults who engage in heavy or binge drinking is the same as the Florida average (18% Collier vs. 18% Florida). In addition to the overall snapshot, the data is presented using various demographic cuts: race and ethnicity, sex, age group, marital status, educational level, and annual income. In both Collier County and Florida, the race/ethnic group with the lowest percentage of adults who engage in heavy, or binge drinking is the non-Hispanic black population, and the race/ethnic group with the highest percentage of adults who engage in heavy or binge drinking is the non-Hispanic white population. However, between 2016 and 2019, the percentage of non-Hispanic black and Hispanic adults who engage in heavy or binge drinking increased while the percentage among non-Hispanic white adults decreased slightly. In both Collier County and Florida, a higher percentage of men than women engage in heavy or binge drinking. In the 18-to-44-year age group, Collier County had a smaller percentage of adults who engaged in heavy or binge drinking when compared to the Florida average, but those who were 65 and older in Collier County had a higher percentage than Florida. From 2013 to 2019, there was an increase in the percentage of married/coupled adults who engaged in heavy or binge drinking in Collier County. 2019 was the highest year for adults who were married/coupled that engaged in heavy or binge drinking. In 2019, adults in Collier County with a High School education engaged in heavy or binge drinking more than the Florida average, while a lower percentage of those with less than a high school education engaged in heavy or binge drinking than the Florida average. Overall, those with less than a high school education have the lowest percentage who engage in heavy or binge drinking. In 2016 and 2019, Collier County had a lower percentage of adults who made \$25,000 to \$49,999 annually who engaged in heavy or binge drinking than the Florida average. For those at higher and lower annual incomes in 2019, the percentage in Collier County was higher than the Florida average.

Exhibit HB6: Adults Who Engage in Heavy or Binge Drinking, Collier County and Florida, 2013, 2016, and 2019

	Collier				Florida
	2013	2016	2019	Trend	2019
Overall	18.1%	16.4%	18.4%		18.0%
Race and Ethnicity					
Non-Hispanic White	15.4%	20.6%	20.2%		19.8%
Non-Hispanic Black*		3.8%	8.3%		14.3%
Hispanic	27.2%	19.6%	16.1%		17.1%
Sex					
Men	22.0%	18.9%	22.1%		21.2%
Women	14.5%	14.0%	15.0%		15.1%
Age Group					
Ages 18-44	24.1%	16.2%	24.2%		24.5%
Ages 45-64	22.0%	17.9%	15.3%		17.9%
Ages 65 and Older	9.8%	14.7%	16.0%		9.1%
Marital Status					
Married/Couple	14.6%	16.8%	17.7%		16.3%
Not Married/Couple	23.6%	15.4%	19.3%		20.2%
Education Level					
Less Than High School*		11.2%	8.8%		12.4%
High School/GED	20.0%	16.7%	19.9%		17.3%
More Than High School	15.5%	18.2%	19.9%		19.6%
Annual Income					
<\$25,000	24.0%	11.8%	18.2%		15.7%
\$25,000 - \$49,999	14.4%	17.7%	11.6%		18.1%
\$50,000 or More	17.2%	22.0%	21.6%		22.4%

Source: Florida Behavioral Risk Factor Surveillance System telephone survey conducted by the Centers for Disease Control and Prevention (CDC) and Florida Department of Health Division of Community Health Promotion.

*For 2013 no data was available, the blank box is intentional



Source: Photo Courtesy of the Health Planning Council of Southwest Florida

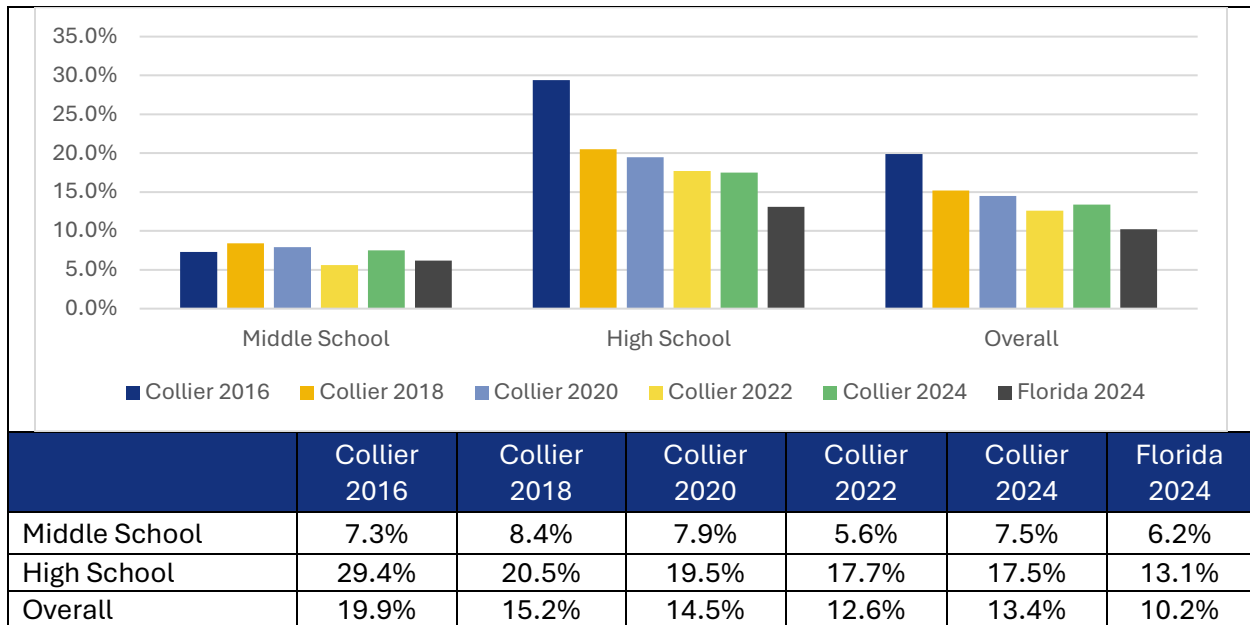
Florida Youth Substance Abuse Survey (FYSAS)

The Florida Youth Substance Abuse Survey (FYSAS) is a collaborative effort between the Florida Departments of Health, Department of Education, Department of Children and Families, Juvenile Justice, and the Governor’s Office of Drug Control. It is based on the “Communities That Care” survey, which measures the prevalence and frequency of drug use, the prevalence and frequency of other antisocial behaviors, and the degree to which risk and protective factors exist that can predict alcohol, tobacco, and other drug use, delinquency, gang involvement, and other problem behaviors in adolescents.

Schools and classrooms are randomly selected, and the survey responses are anonymous. The FYSAS is administered to students in grades 6 through 12 from January through March every year. In 2024, Collier County had 1,119 students complete the survey (567 middle school students, 552 high school students).

The percentage of high school students in Collier County who reported consuming alcohol in the past 30 days has decreased significantly over the past 10 years (29.4% 2016 to 17.5% 2024). However, the percentage of middle school students who reported drinking alcohol in the past 30 days has remained fairly steady; it was 7.3 percent in 2016 and 7.5 percent in 2024.

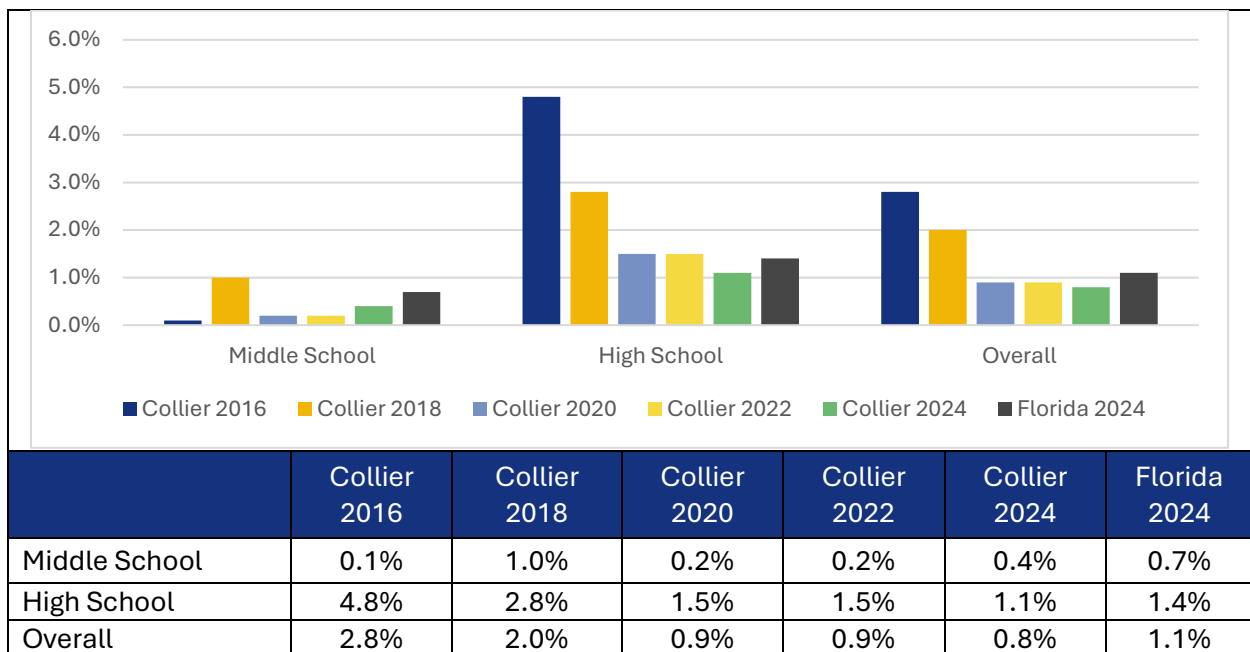
Exhibit HB7: Students who have drank alcohol in the past 30 days, Collier County 2016-2024, Florida 2024



Source: Florida Department of Health, Division of Community Health Promotion, FYSAS

The percentage of high school students in Collier County who reported cigarette use in the past 30 days has significantly decreased in the past decade (4.8% 2016, 1.1% 2024). The number of middle school students who reported smoking cigarettes in the past 30 days increased slightly to 0.4% in 2024; however, it remains below the state average.

Exhibit HB8: Students who smoked cigarettes in the past 30 days, Collier County 2016-2024, Florida 2024

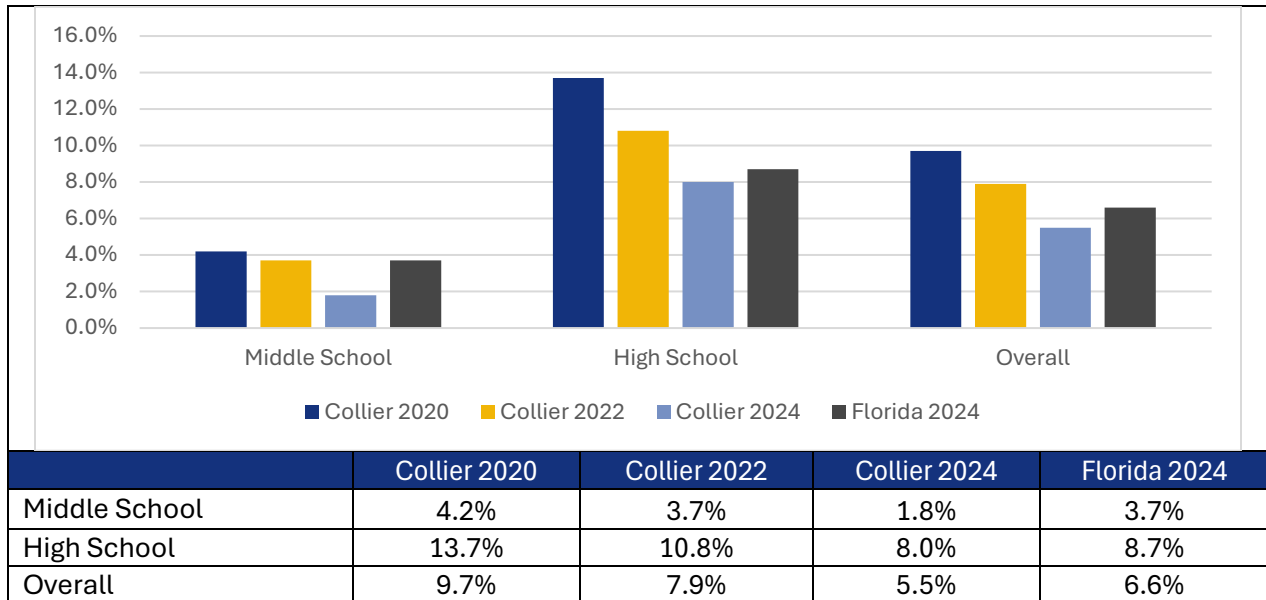


Source: Florida Department of Health, Division of Community Health Promotion, FYSAS

2025 Collier County Community Health Assessment: Health Behaviors

The percentage of middle and high school students in Collier County who reported vaping nicotine in the past 30 days decreased between 2020 and 2024 (9.7% 2020, 6.6% 2024). It is also below the state average.

Exhibit HB9: Students who have vaped nicotine in the past 30 days, Collier County 2020-2024, Florida 2024



Source: Florida Department of Health, Division of Community Health Promotion, Florida Youth Substance Abuse Survey (FYSAS)

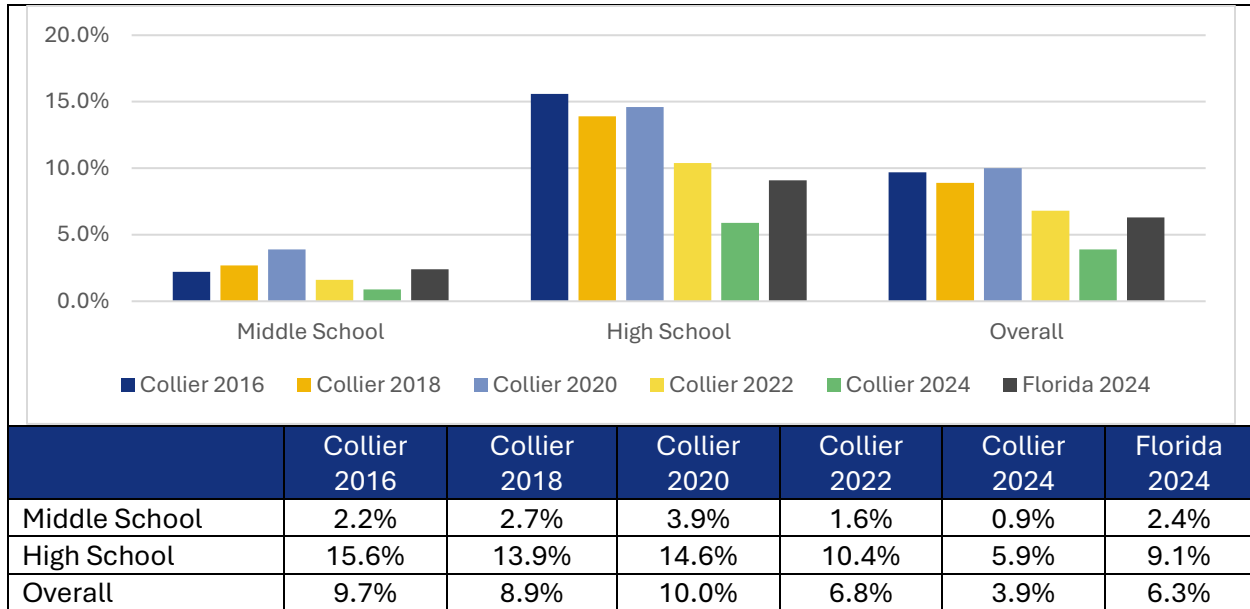


Source: Photo courtesy of the Health Planning Council of Southwest Florida, Inc.

2025 Collier County Community Health Assessment: Health Behaviors

From 2016 to 2024, the percentage of middle and high school students in Collier County who reported using marijuana or hashish decreased significantly (9.7% in 2016, 3.9% 2024).

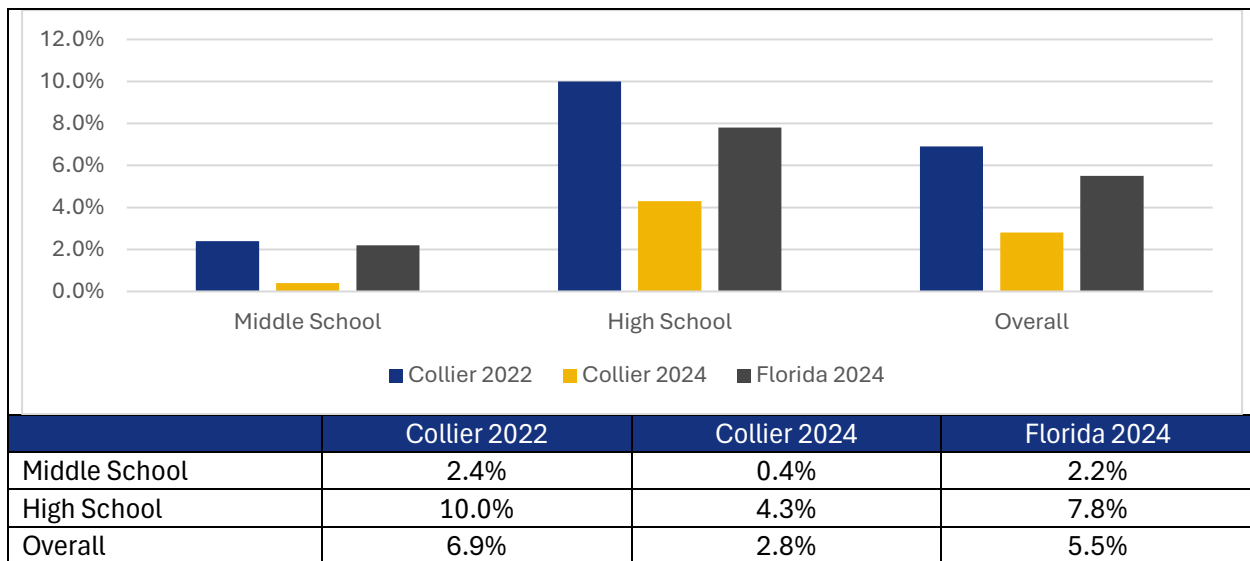
Exhibit HB10: Students who have used marijuana or hashish in the past 30 days, Collier County 2016-2024, Florida 2024



Source: Florida Department of Health, Division of Community Health Promotion, FYSAS

In 2022, 10 percent of high school students in Collier County reported vaping marijuana in the past 30 days, but significantly decreased to 4.3 percent in 2024. When compared to the Florida average in 2024, Collier County had a lower percentage of students who reported vaping marijuana.

Exhibit HB11: Students who have vaped marijuana in the past 30 days, Collier County 2022-2024, Florida 2024



Source: Florida Department of Health, Division of Community Health Promotion, FYSAS

Injury Mortality

Injuries affect the entire population regardless of gender, ethnicity, race, or socioeconomic status. Injuries remain a leading cause of death for residents of all ages in Collier County as well as Florida.

The risk of mortality due to an injury will vary by age, gender, and the external cause of the injury. Males have significantly higher death rates from injuries than females at any age group, while the elderly have the highest injury fatality rates.

All these causes of injuries are theoretically preventable, thereby providing an opportunity and challenge to reduce Years of Potential Life Lost and increase life expectancy at various ages.

More people in Collier County died from unintentional injuries than from any other fatal injuries in 2020. The 85 and older age group had the highest number of unintentional injury fatalities, followed by the 75-84 and 65-74 age groups.

Exhibit HB12: Total Fatal Injuries, By Intent and Age Group, Collier County and Florida 2023

Intent	<4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	County Age Adj Rate	Florida Age Adj Rate
Homicide	0	0	0	1	1	0	1	1	0	1	1	0	1.64	6.36
Suicide	0	0	1	2	2	5	4	8	17	11	10	5	12.95	14.08
Undetermined	0	0	0	0	0	1	0	2	0	0	0	0	1.01	0.8
Unintentional	2	2	1	2	14	39	33	33	27	44	67	116	70.08	63.88

Source: Florida Department of Health, Bureau of Vital Statistics
Rates are per 100,000

The top three fatal injury mechanisms for Collier County in 2023 were falls, poisonings, and firearms. Poisoning includes drug overdoses. Poisoning has a significantly higher age-adjusted rate of fatal injuries than falls because it impacts more young people than falls.

Exhibit HB13: Total Fatal Injuries by Mechanism, Collier County and Florida, 2023

Mechanism	All Ages	County Age Adj Rate	Florida Age Adj Rate
Fall	182	15.99	12.29
Poisoning	113	34.1	31.99
Firearm	44	8.7	13.39
Drowning, Submersion (includes water transport)	22	5.44	2.37
MV Traffic - Occupant	22	6.3	5.72
Suffocation	17	3.06	5.16
MV Traffic - Motorcyclist	10	3.44	3.08
MV Traffic - Other, Unspecified	10	2.11	1.88
Other Specified & NEC	8	1.26	0.84
MV Traffic - Pedalcyclist	7	1.77	0.82
Unspecified	7	1.09	1.04
Cut, Pierce	3	0.62	0.8
Other Specified & Classifiable	3	0.53	0.92
Struck By, Against	2	0.26	0.19
MV Traffic - Pedestrian	1	0.41	3
Pedalcyclist, Other	1	0.08	0.13
Pedestrian, Other	1	0.41	0.24
Transport, Other	1	0.11	0.53

Source: Florida Department of Health, Bureau of Vital Statistics

Rates are per 100,000

NEC – not elsewhere classifiable

Unspecified refers to injuries for which the underlying or precipitating cause is not adequately documented (i.e. on the death certificate)

The leading cause of fatal injury in Collier County varies by age. For those who are younger, motor vehicle traffic accidents or drowning are most likely to cause a fatal injury; for those who are 25-64, drug poisoning or an overdose is the most frequent cause of fatal injury. For Collier County residents who are over the age of 65, falls are the leading cause of fatal injuries. In some age categories, more than one leading cause of fatal injury is listed; this is due to a tie.

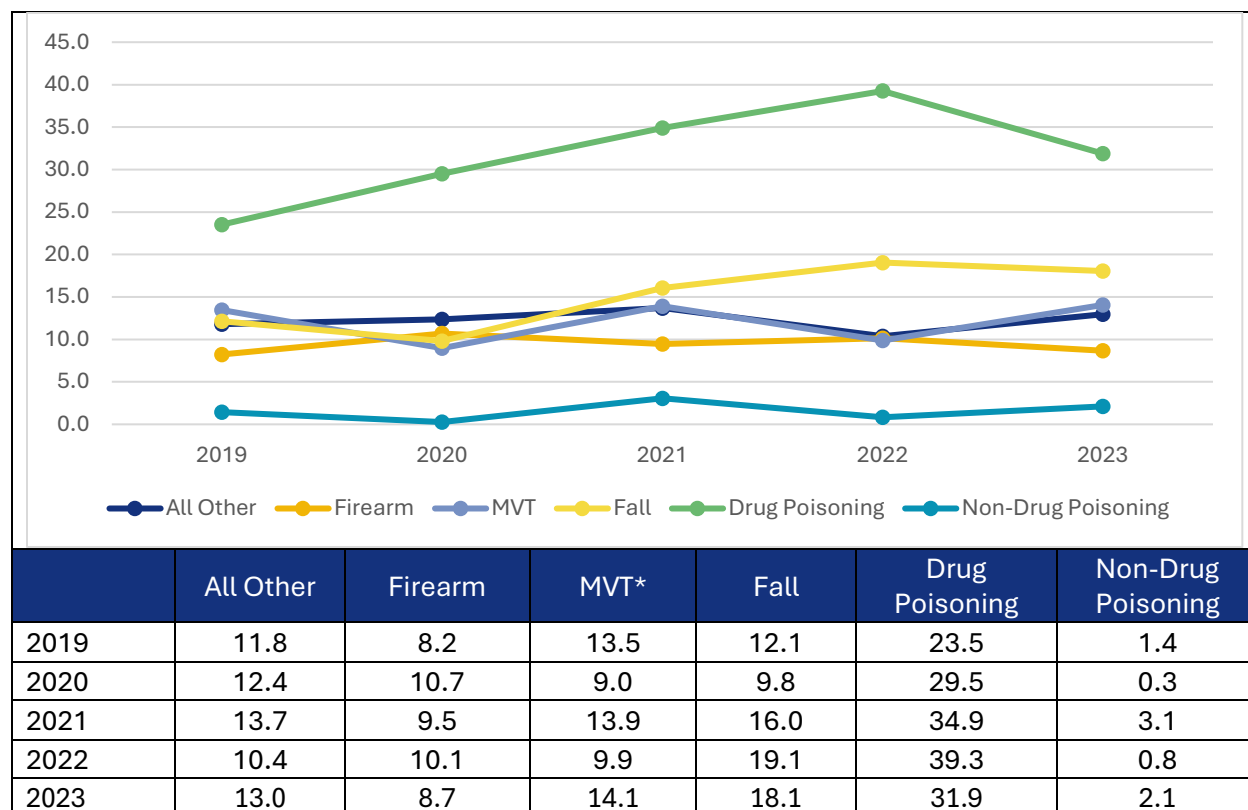
Exhibit HB14: Leading Cause of Fatal Injury by Age, Collier County, 2023

Age	Leading Cause of Fatal Injury
0 – 14	Drowning (submersion), Motor Vehicle Traffic
15 – 24	Motor vehicle traffic
25 – 64	Drug Poisoning
65+	Falls

Source: Florida Department of Health, Bureau of Vital Statistics

In Collier County, drug poisoning was responsible for fatal injuries at a higher age-adjusted rate than all the other causes. From 2019 to 2022, there was a drastic increase in drug poisoning deaths in Collier County (23.5 2019, 29.3 2022); however, there was a decline to 31.9 in 2023. There was an increase in the death rate from falls (12.1 2019, 18.1 2023).

Exhibit HB15: Leading Cause of Fatal Injury by Mechanism, Age-Adjusted Death Rate, Rate per 100,000 Population, Collier County, 2019-2023

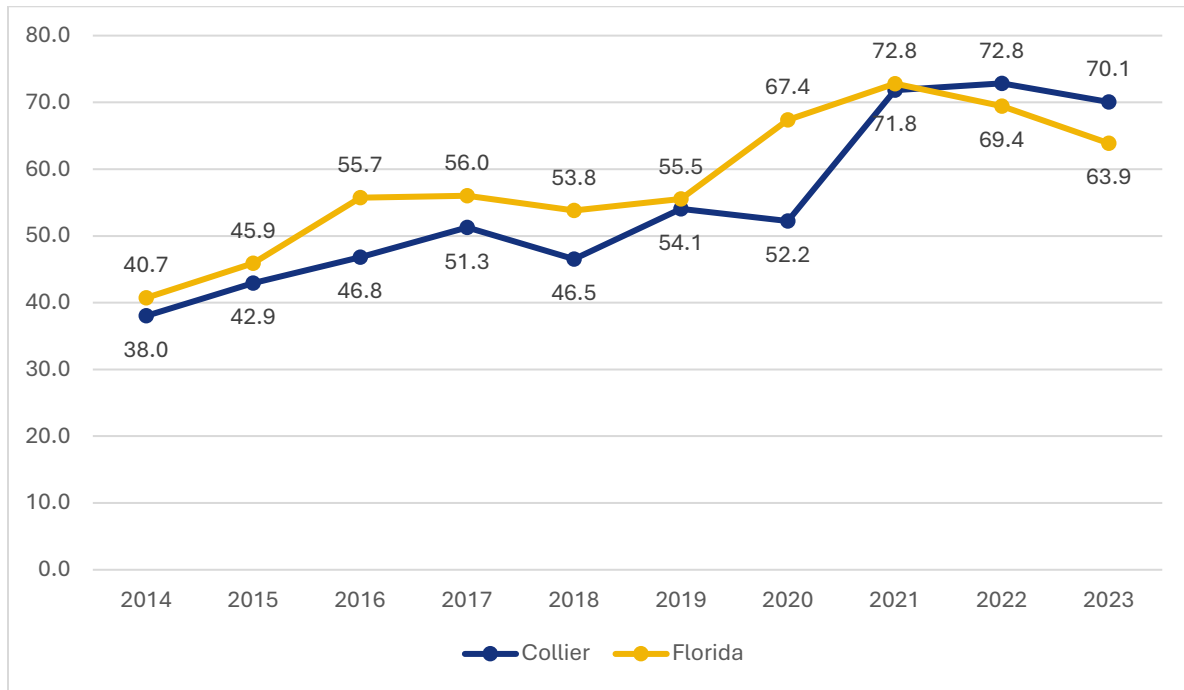


Source: Florida Department of Health, Bureau of Vital Statistics, * Motor Vehicle Traffic

Unintentional Injury

Unintentional injuries are injuries that were not intended to harm oneself or intentionally cause harm to another person. There was a significant increase in the death rate from unintentional injuries over the past 10 years (38.0 2014, 70.1 2023). In 2023, Collier County's unintentional injury death rate was higher than the Florida average (70.1 Collier, 63.9 Florida).

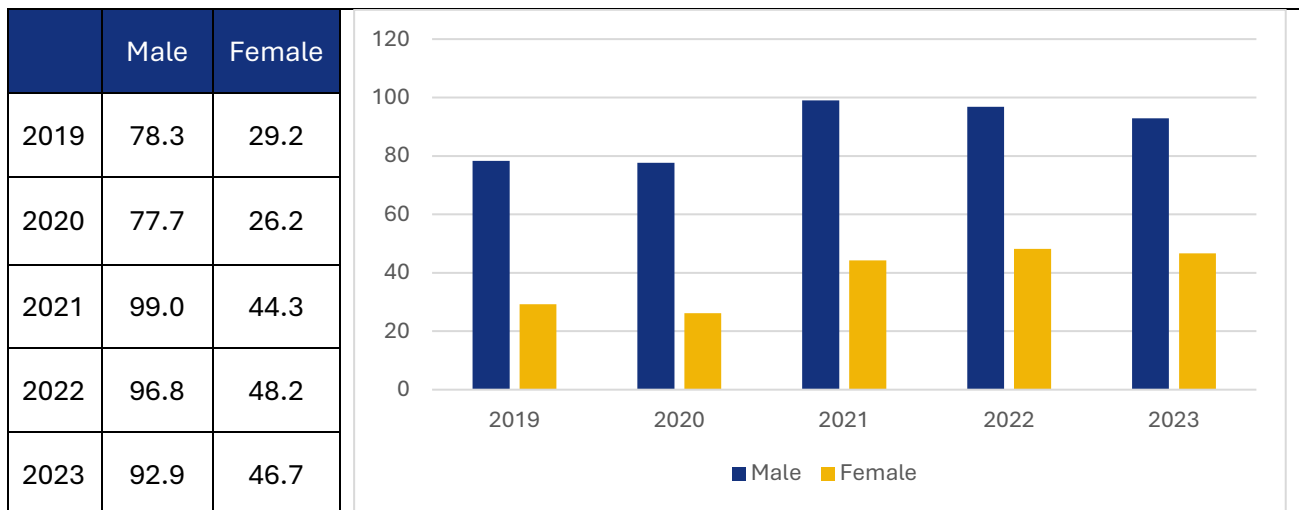
Exhibit HB16: Age-Adjusted Deaths from Unintentional Injury, Rate per 100,000 Population, Collier County and Florida, 201-2023



Source: Florida Department of Health, Bureau of Vital Statistics

From 2013 to 2023, males had a higher death rate than females from unintentional injuries; however, both groups have seen increases.

Exhibit HB17: Age-Adjusted Deaths from Unintentional Injury by Sex, Rate per 100,000 Population, Collier County, 2019-2023

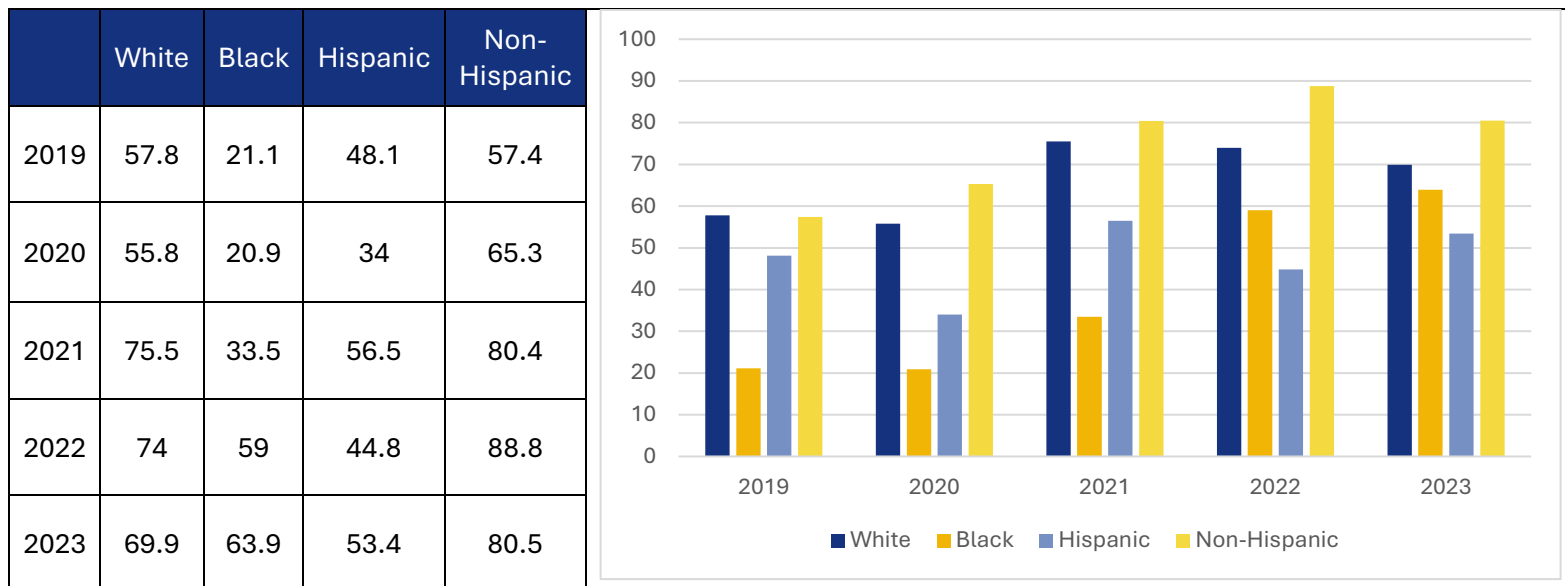


Source: Florida Department of Health, Bureau of Vital Statistics

2025 Collier County Community Health Assessment: Health Behaviors

Whites and non-Hispanics had the highest unintentional injury death rate in every year in the table below. However, the rates for every population group increased from 2019 to 2023.

Exhibit HB18: Age-Adjusted Deaths from Unintentional Injury by Race and Ethnicity, Rate per 100,000 Population, Collier County, 2019-2023



Source: Florida Department of Health, Bureau of Vital Statistics

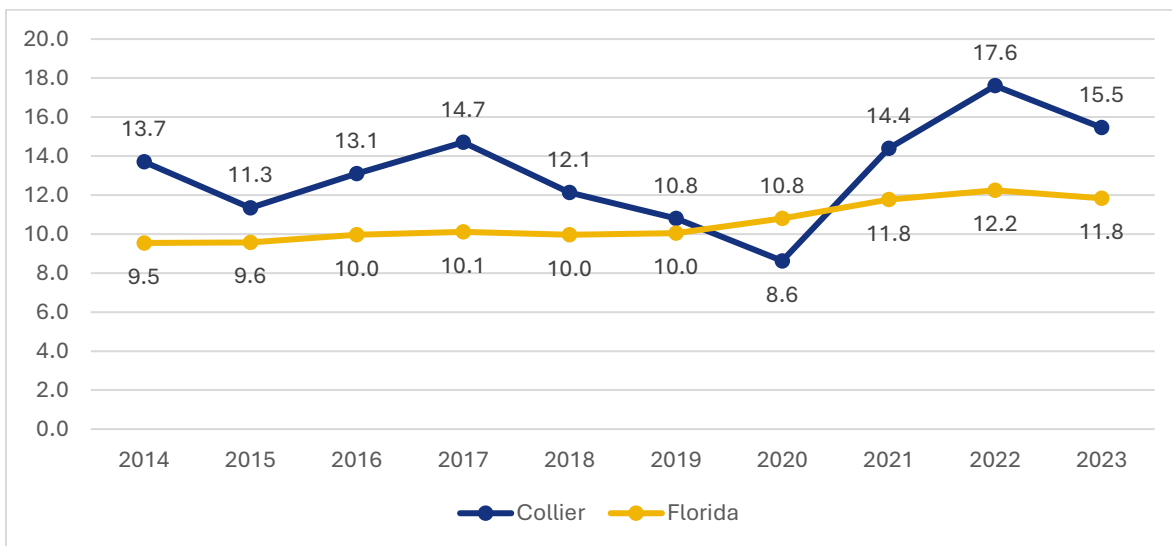


Source: Photo Courtesy of the Health Planning Council of Southwest Florida

Falls

In Collier County, for most years between 2014 and 2023, the age-adjusted rate of deaths from falls is higher than the state average; 2020 was an exception. The rates in Collier County were higher in 2022 and 2023 than in any other years in the ten-year period.

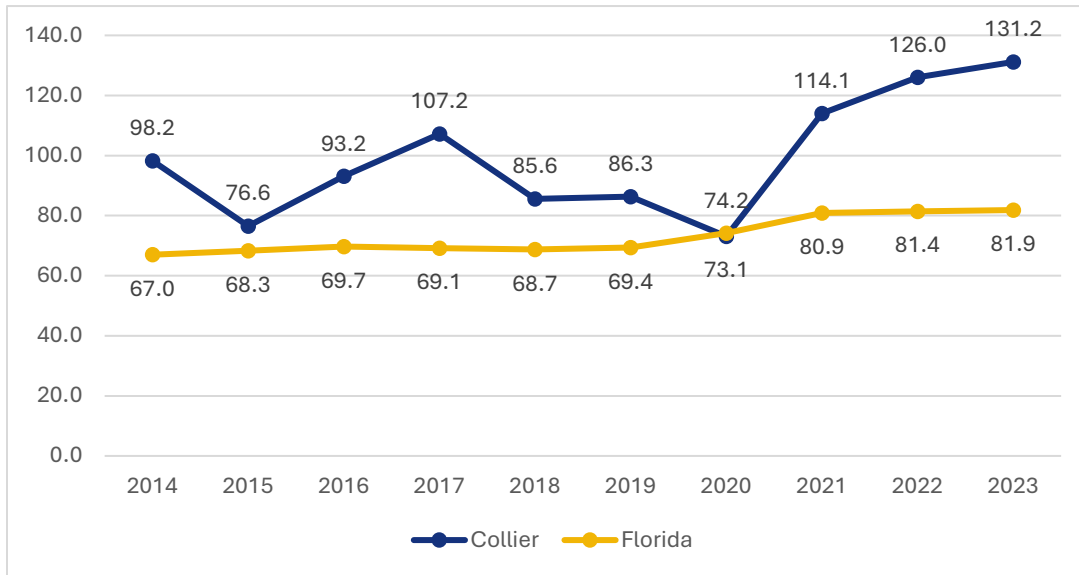
Exhibit HB19: Age-Adjusted Deaths from Unintentional Falls, Rate per 100,000 Population, Collier County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

Deaths from unintentional falls are most common in the population aged 65 or older. In Collier County, the rate of death from falls for this population has been rising since 2020 and is significantly higher than the state average (131.2 Collier, 81.9 Florida, 2023).

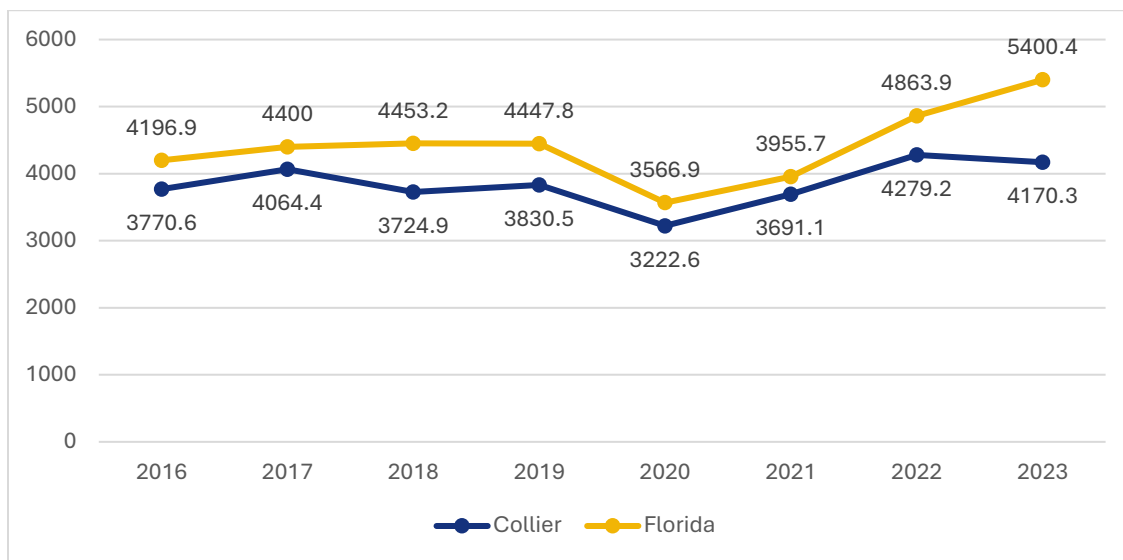
Exhibit HB20: Deaths from Unintentional Falls, Aged 65 and older, Rate per 100,000, Collier County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

The same trend can be seen for emergency department visits from non-fatal unintentional falls in the population aged 65 and older.

Exhibit HB21: Emergency Department Visits from Non-Fatal Unintentional Falls, Aged 65 and Older, Rate per 100,000, Collier County and Florida, 2016-2023

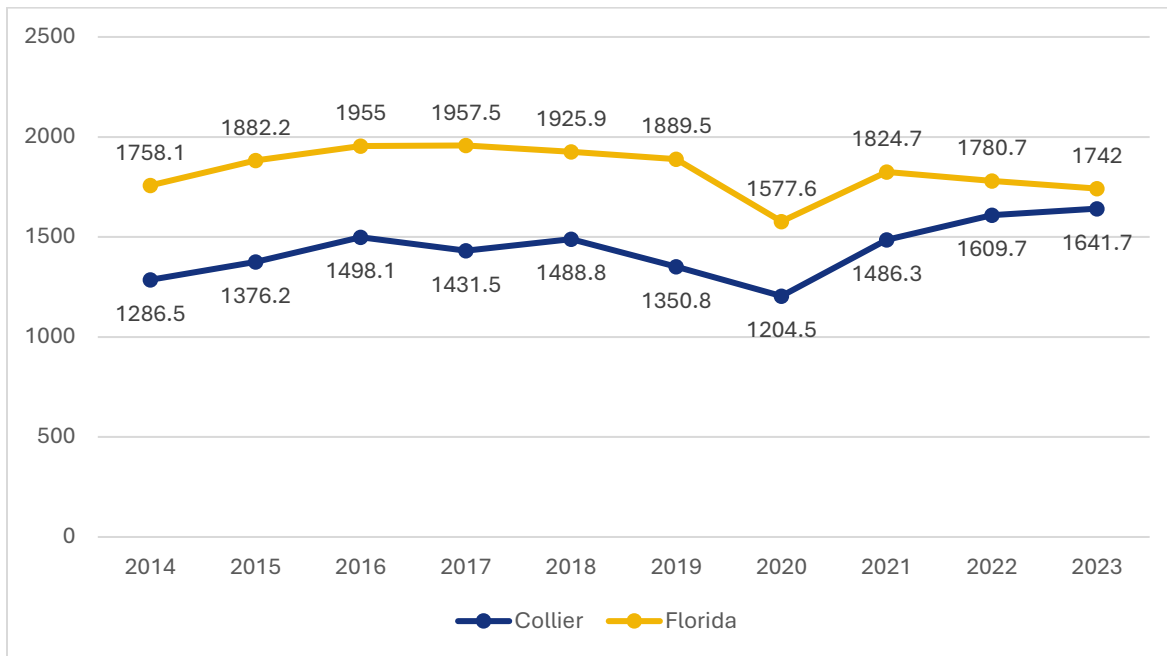


Source: Florida Agency for Health Care Administration (AHCA)

Motor Vehicle Crashes

Collier County consistently has a lower rate of motor vehicle crashes compared to the Florida average. However, that rate has been increasing since a low in 2020, and the rate for Collier County is nearing the state average (Collier 1641.7, Florida 1742 for 2023).

Exhibit HB22: Motor Vehicle Traffic Crashes, Rate per 100,000 Population, Collier County and Florida, 2014-2023



Source: Florida Department of Highway Safety and Motor Vehicles (HSMV)

When compared to Florida, Collier County has a similar rate of alcohol confirmed motor vehicle traffic crashes, a slightly higher rate of injuries from those crashes, and a similar rate of fatalities.

Exhibit HB23: Alcohol Confirmed Motor Vehicle Traffic, 3-year Rate per 100,000, Collier County and Florida, 2021-2023

	Collier	Florida	Quartile
Motor Vehicle Traffic Crashes	23.4	23.1	2
Motor Vehicle Traffic Injuries	16.2	13.7	2
Motor Vehicle Traffic Crash Fatalities	1.7	1.8	2

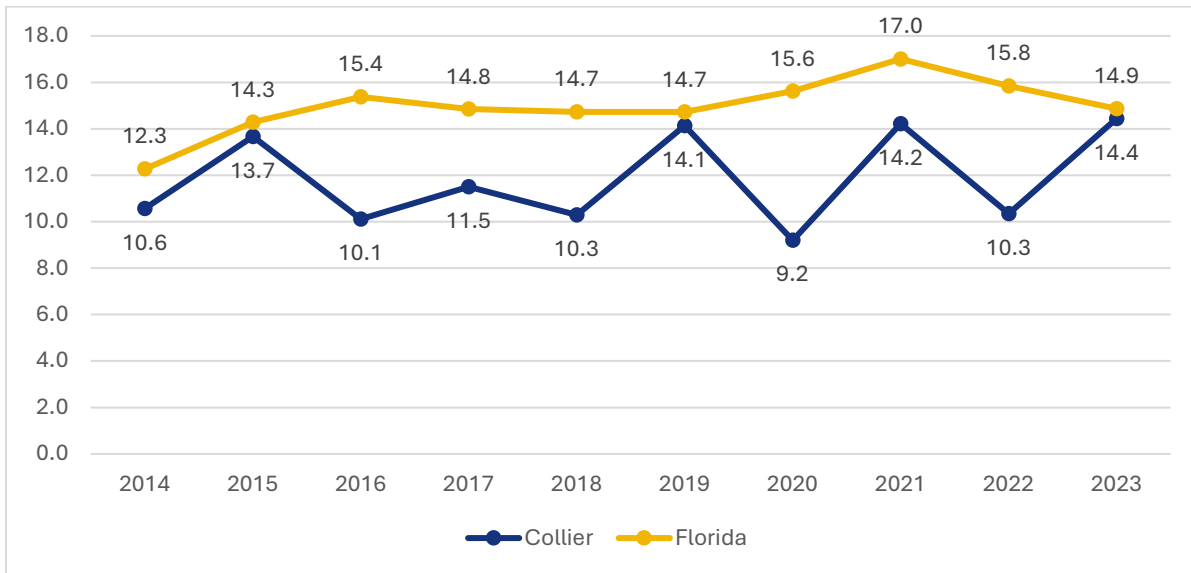
Source: Florida Department of Highway Safety and Motor Vehicles (HSMV)

Quartiles – County is compared to other Florida counties. The lowest quarter equals the lowest number, or best outcome.

2025 Collier County Community Health Assessment: Health Behaviors

The age-adjusted death rate for Collier County in 2023 is very similar to the average for the state (14.4 Collier, 14.9 Florida).

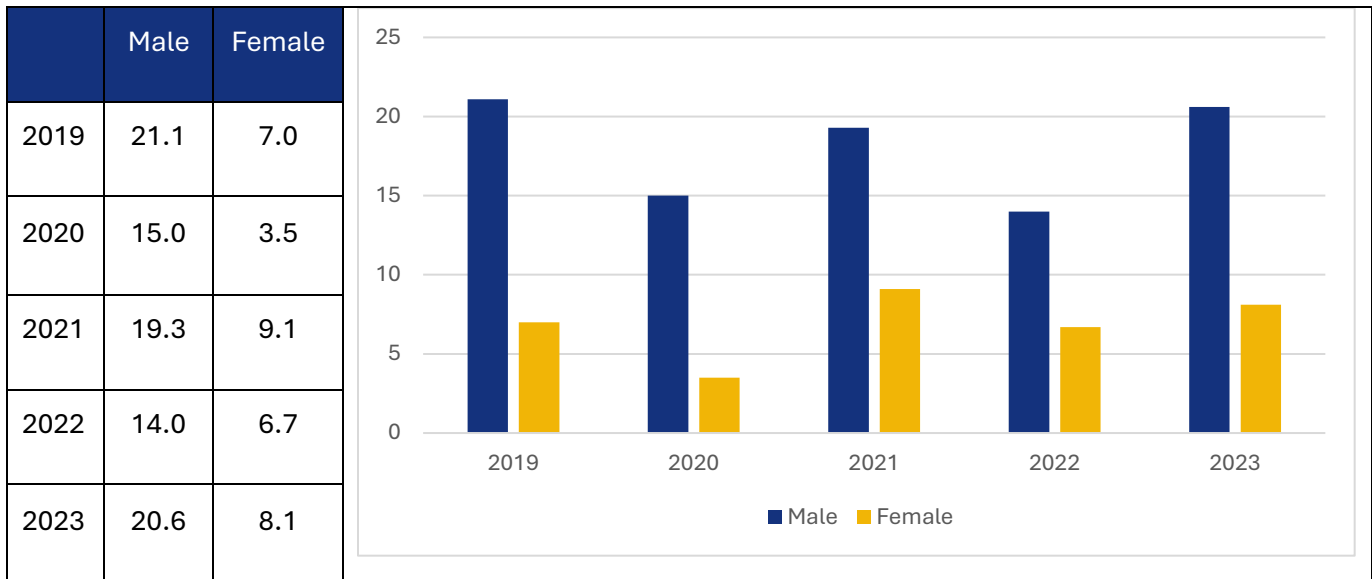
Exhibit HB24: Age-Adjusted Deaths from Motor Vehicle Crashes, Rate per 100,000 Population, Collier County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

In Collier County, men have a higher rate of age-adjusted deaths from motor vehicle crashes than women.

Exhibit HB25: Age-Adjusted Deaths from Motor Vehicle Crashes by Sex, Rate per 100,000 Population, Collier County, 2019-2023

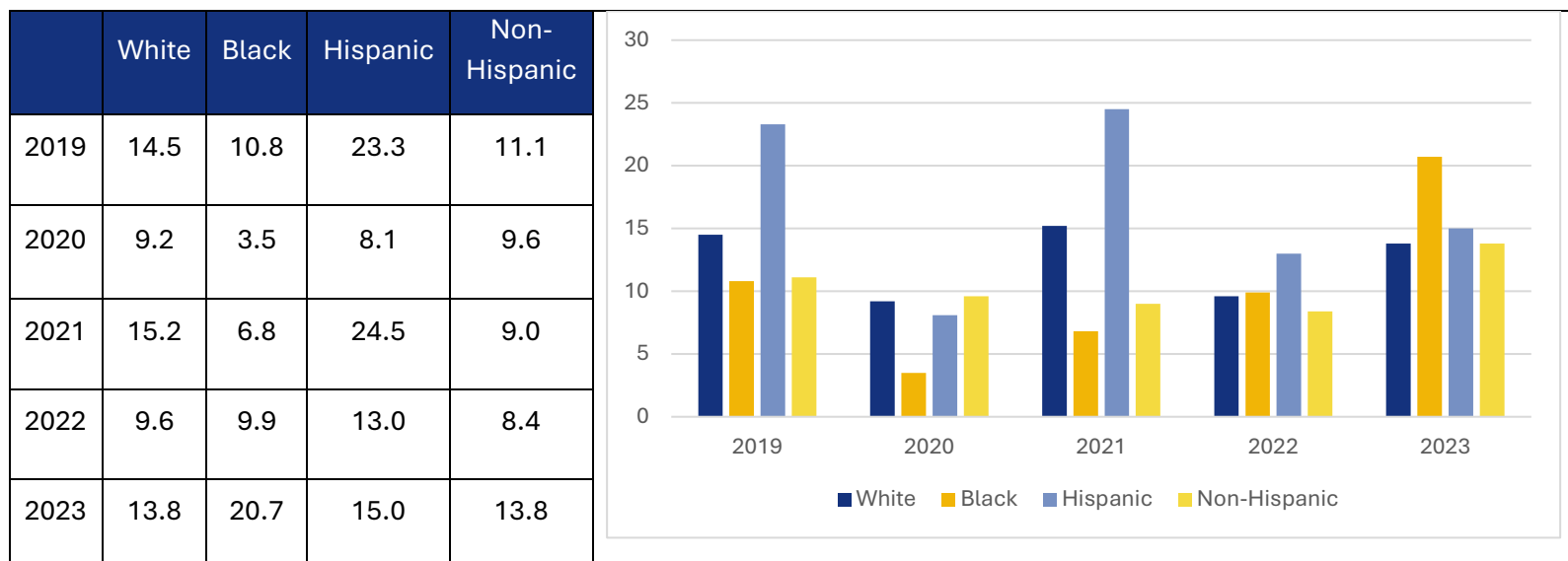


Source: Florida Department of Health, Bureau of Vital Statistics

2025 Collier County Community Health Assessment: Health Behaviors

In Collier County, for most years between 2019 and 2023, the age-adjusted rate of deaths from motor vehicle crashes is higher for the Hispanic population than the non-Hispanic population; 2020 was an exception.

Exhibit HB26: Age-Adjusted Deaths from Motor Vehicle Crashes by Race and Ethnicity, Rate per 100,000 Population, 2019-2023



Source: Florida Department of Health, Bureau of Vital Statistics

Maternal and Infant Health

Compared to other Florida counties for the years 2021-2023, Collier County has a higher rate for births to mothers ages 15-19 than the state average (16.9 Collier, 13.2 Florida); the trend is inconsistent. Collier County is in the worst quartile for the state for births with adequate prenatal care (Kotelchuck index) [%], with a rate of 58.1% compared to 63.3% for Florida. There have been negative trends for infant and neonatal deaths in Collier County. However, the county rates remain better than the state average.

Exhibit HB27: Maternal and Infant Health Indicators, 3-year Figures, Collier County and Florida, 2021-2023

	County	State	Trend	Quartile
Birth family characteristics				
Total Births (Count, 3-year annual avg.)	3,383	220,668.3		2
Births to Mothers ages 15-44, per 1,000	62.6	54.5		3
Births to Unwed Mothers ages 15-44 (%)	44.1	46.1		2
Births to Mothers ages 15-19, per 1,000	16.9	13.2	Inconsistent	2

	County	State	Trend	Quartile
Births to Mothers 19 and Over without High School Education (%)	12.6	9.2	Positive	3
Infant deaths				
Infant Deaths (0-364 days) per 1,000 Live Births	4.7	6.0	Negative	1
Neonatal Deaths (0-27 days) per 1,000 Live Births	3.3	3.9	Negative	2
Post-Neonatal Deaths (28-364 days) per 1,000 Live Births	1.5	2.0	Negative	1
Low Birth Weight				
Births <1500 Grams (Very Low Birth Weight) %	1.3%	1.6%	Negative	2
Births < 2500 Grams (Low Birth Weight) %	7.4%	9.1%	Steady	1
Prenatal Care				
Births with 1st Trimester Prenatal Care (%)	68.2%	71.7%	Negative	3
Births to Mothers with No Prenatal Care (%)	3.3%	3.3%	Negative	3
Births with adequate prenatal care (Kotelchuck index) [%]	58.1%	63.3%	Negative	4

Source: Florida Department of Health, Bureau of Vital Statistics

*County compared to other Florida counties. 1 is the best to 4 as the lowest

Fewer women in Collier County breastfeed compared to the state average, and that percentage has been falling (71.5% Collier, 85.8% Florida, 2021-2023). Compared to the state average, fewer women in Collier County who give birth are either underweight or overweight. The maternal death rate for Collier County is significantly lower than the state rate (9.9 Collier, 24.2 Florida, 2021-2023).

Exhibit HB28: Reported Pre-Conception, Pregnancy, and Mother's Health and Behaviors, 3-year Figures, Collier County and Florida, 2021-2023

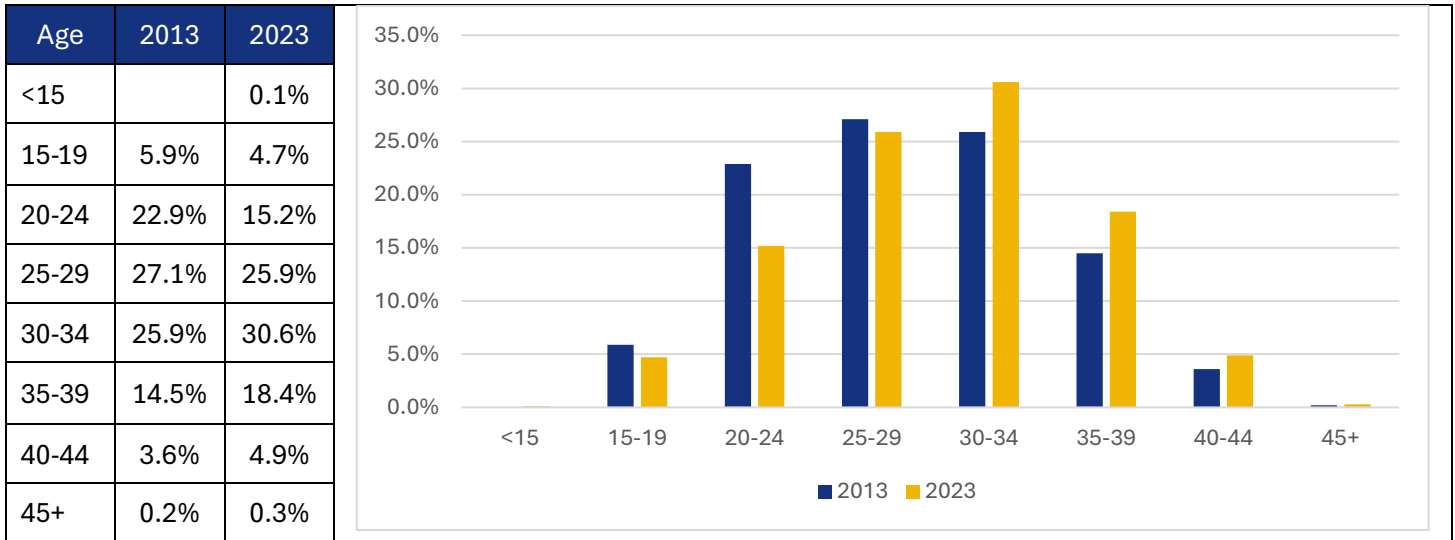
	County	State	Trend	Quartile*
Births to underweight mothers at the time pregnancy occurred, percent of births	1.8%	3.1%	Positive	1
Births to obese mothers at the time of pregnancy occurred, percent of births	26.0%	29.5%	Inconsistent	1
Births with inter-pregnancy interval <18 months, percent of births with known pregnancy interval	32.3%	36.3%	Inconsistent	1
Repeat births to mothers aged 15-19 years, percent of births 15-19 years	11.4%	12.9%	Steady	2
Births with self-pay for delivery payment source, percent of total births	13.2%	5.6%	Inconsistent	4
Births covered by Medicaid, percent of births with a payment source	40.2%	43.9%	Positive	1
C-section births, percent of births	34.5%	35.9%	Steady	3
Mothers who initiate breastfeeding, percent of total births	71.5%	85.8%	Negative	4
Maternal deaths, rate per 100,000 live births	9.9	24.2	Positive	n/a

Source: Florida Department of Health, Bureau of Vital Statistics; Florida Department of Health, Bureau of Communicable Diseases *County compared to other Florida counties. 1 is the best to 4 as the lowest

2025 Collier County Community Health Assessment: Health Behaviors

Between 2013 and 2023, the average age of mothers giving birth in Collier County increased. In 2013, 44.2% of mothers in Collier County were over the age of 30 at the time of birth; in 2023, 54.2% were over the age of 30.

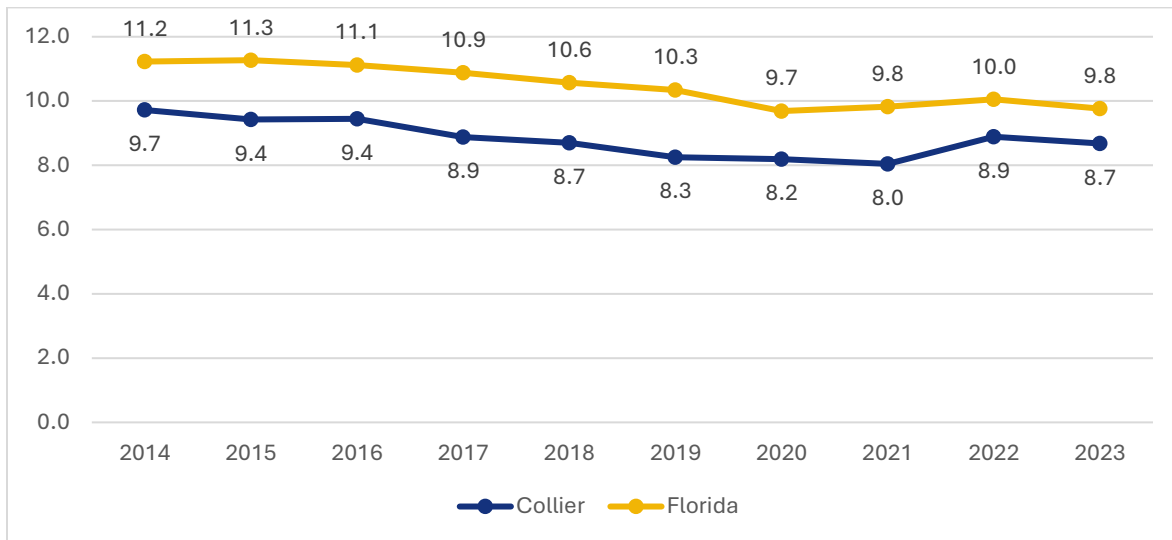
Exhibit HB29: Births by Mother's Age, Percent of Births, Collier County, 2021, 2023



Source: Florida Department of Health, Bureau of Vital Statistics

The birth rate in Collier County has been lower than the Florida average every year from 2014 through 2023. Both the rate in Collier County and the rate in Florida have been declining overall across this period, although there was an increase in the rate in Collier County after 2021.

Exhibit HB30: Total Resident Live Births, Rate per 1,000 Population, Collier County and Florida, 2014-2023

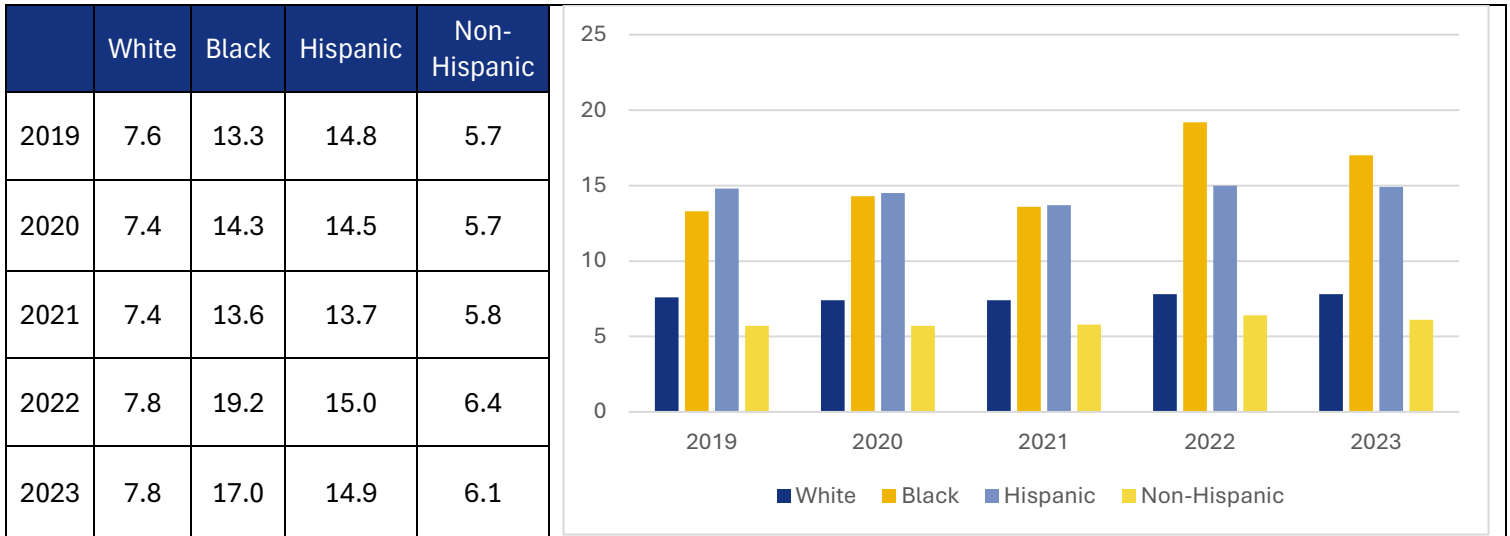


Source: Florida Department of Health, Bureau of Vital Statistics

2025 Collier County Community Health Assessment: Health Behaviors

Between 2019 and 2023, the birth rate in Collier County has been higher among the black population and Hispanic population than among the white population and non-Hispanic population.

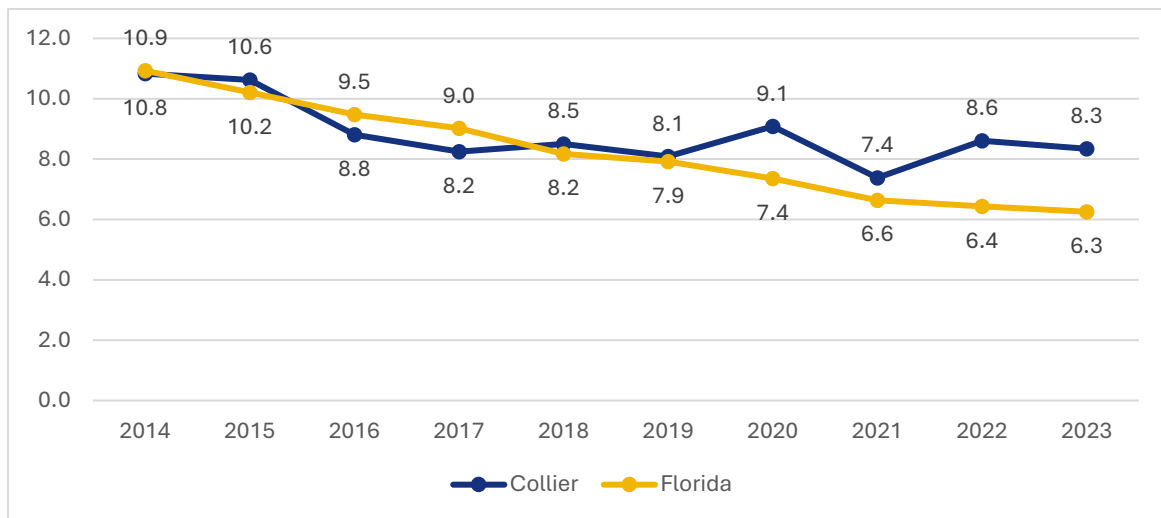
Exhibit HB31: Total Resident Live Births by Race and Ethnicity, Rate per 1,000, Collier County, 2021-2023



Source: Florida Department of Health, Bureau of Vital Statistics

The rate of births to mothers aged 15-19 significantly declined in Florida between 2014 and 2023. Collier County initially saw a decline as well. However, that rate for 2019-2023 has not followed the trend for Florida and is now higher than the state average (8.3 Collier, 6.3 Florida for 2023).

Exhibit HB32: Resident Live Births, Age 15-19, Rate per 1,000, Collier County and Florida, 2014-2023

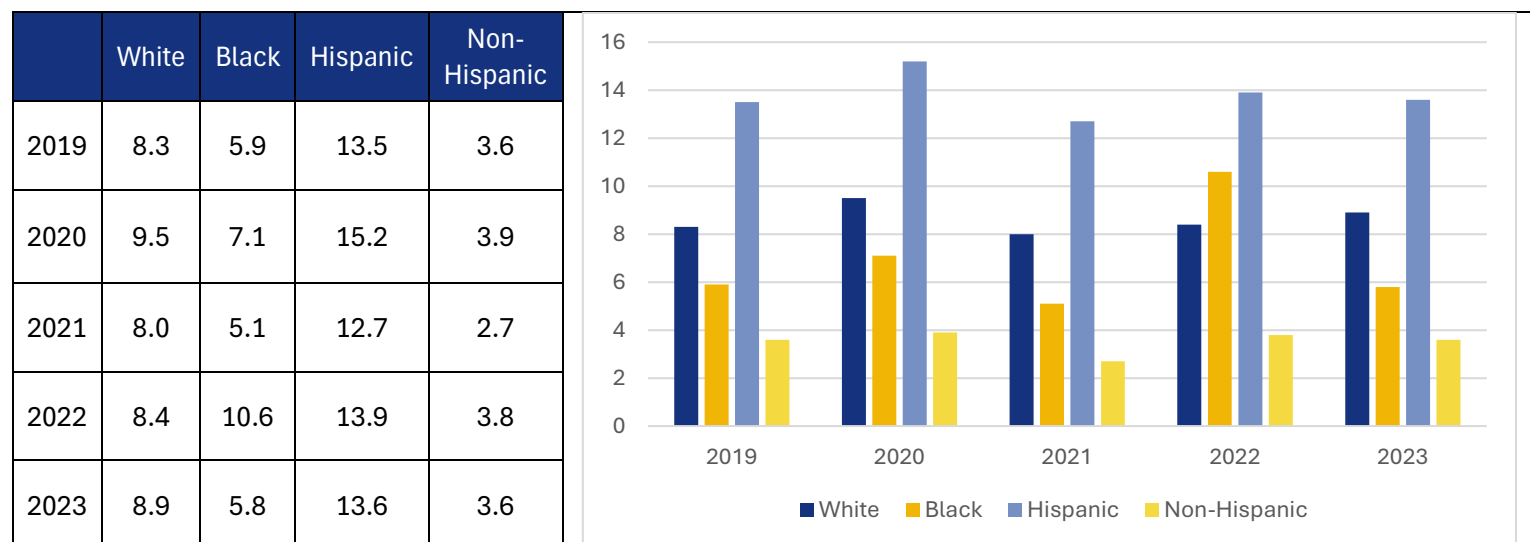


Source: Florida Department of Health, Bureau of Vital Statistics

2025 Collier County Community Health Assessment: Health Behaviors

In Collier County, between 2019 and 2023, the rate of births to mothers between the ages of 15 and 19 has been higher among the white population than the black population every year except for 2022. The rate has been significantly higher among the Hispanic population than the non-Hispanic population for each of these years.

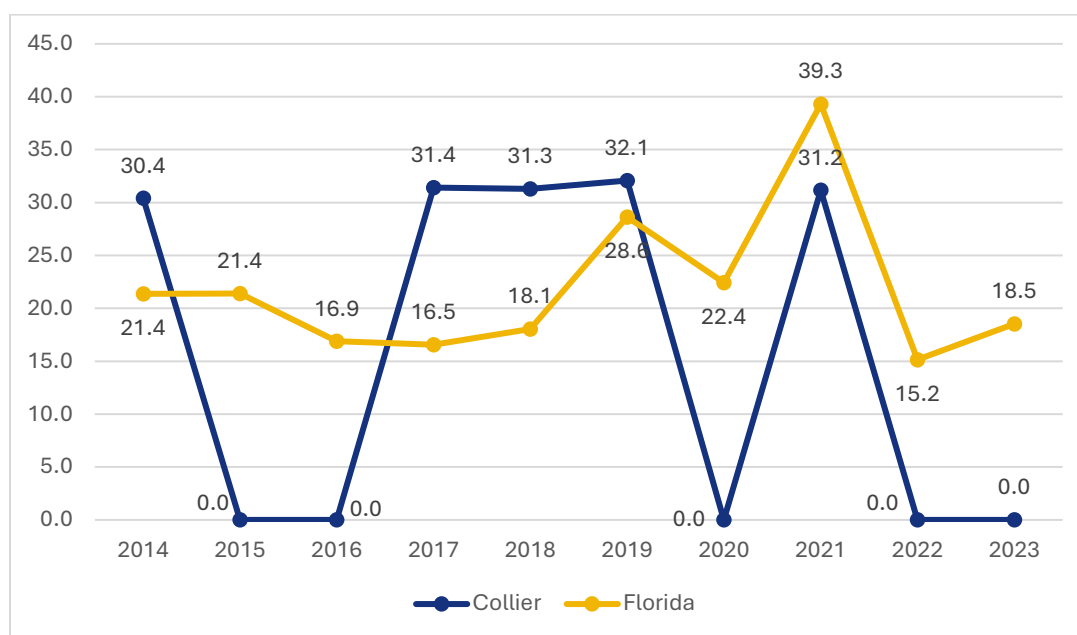
Exhibit HB33: Resident Live Births Mothers' Aged 15-19 by Race and Ethnicity, Rate per 1,000, Collier County, 2019-2023



Source: Florida Department of Health, Bureau

Collier County did not have any maternal deaths for five of the ten years between 2014 and 2023, including 2020, 2022, and 2023.

Exhibit HB34: Maternal Deaths, Rate per 100,000 Live Births, Collier County and Florida, 2014-2023

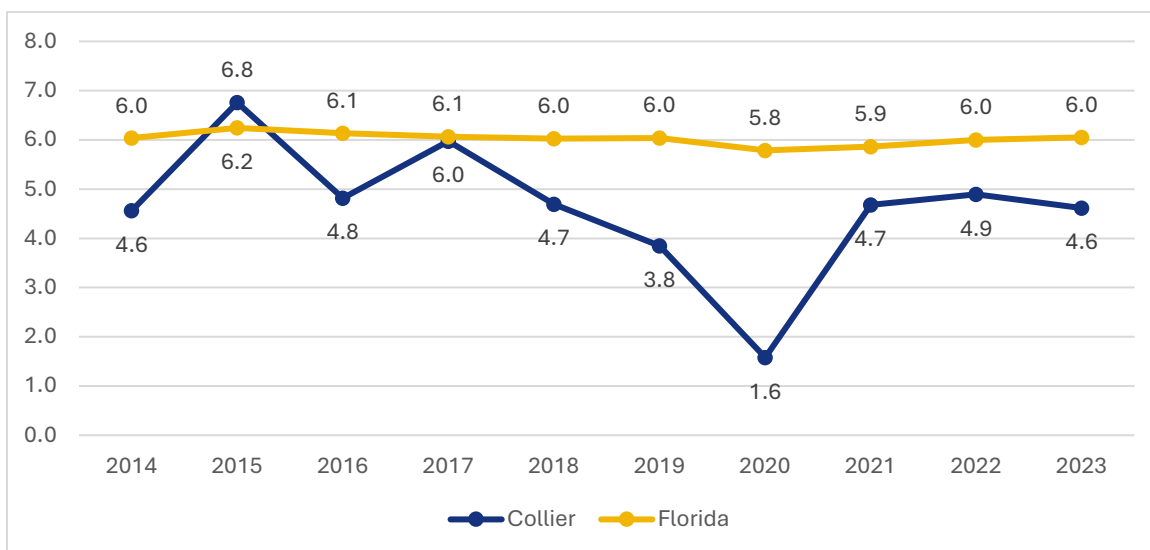


Source: Florida Department of Health, Bureau of Vital Statistics

2025 Collier County Community Health Assessment: Health Behaviors

The infant mortality rate in Collier County fell significantly between 2017 and 2020; after a low in 2020, the rate increased and has remained relatively steady. The rate for Collier County has been lower than the state rate since 2015.

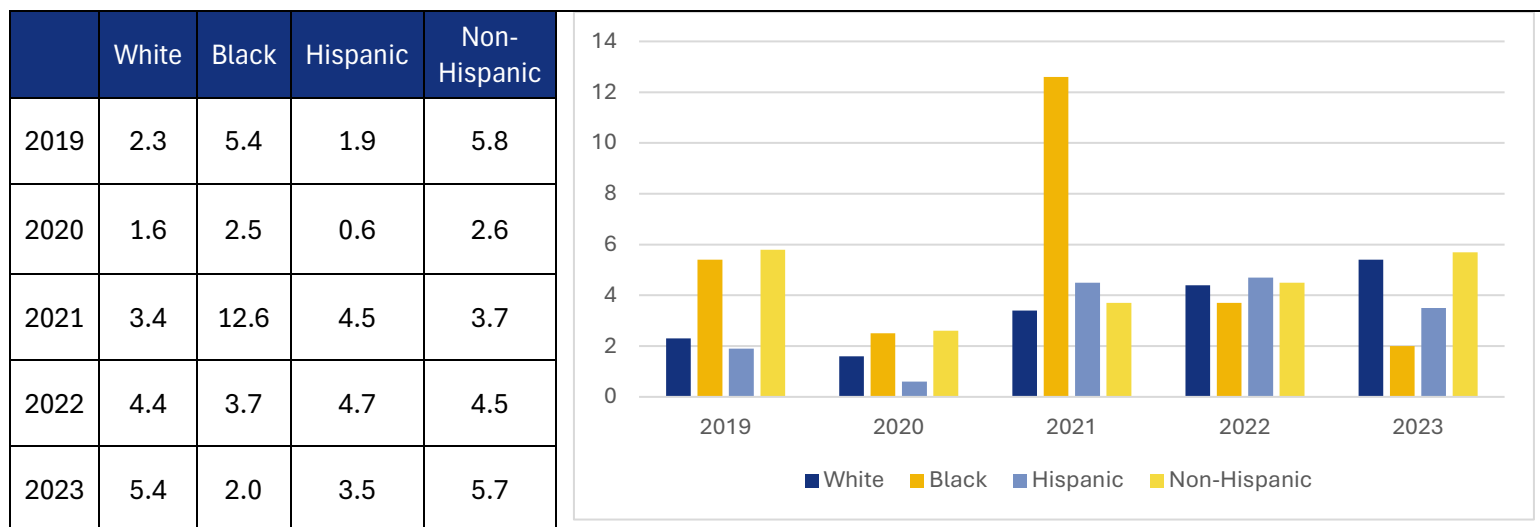
Exhibit HB35: Infant Mortality (Aged 0-364 Days from Birth), Rate per 1,000 Live Births, Collier County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

For the years 2019-2023, there were no clear trends to be seen in infant mortality rates based on race or ethnicity.

Exhibit HB36: Infant Mortality (0-364 Days from Birth) by Race and Ethnicity, Rate per 1,000 Live Births, Collier County, 2019-2023

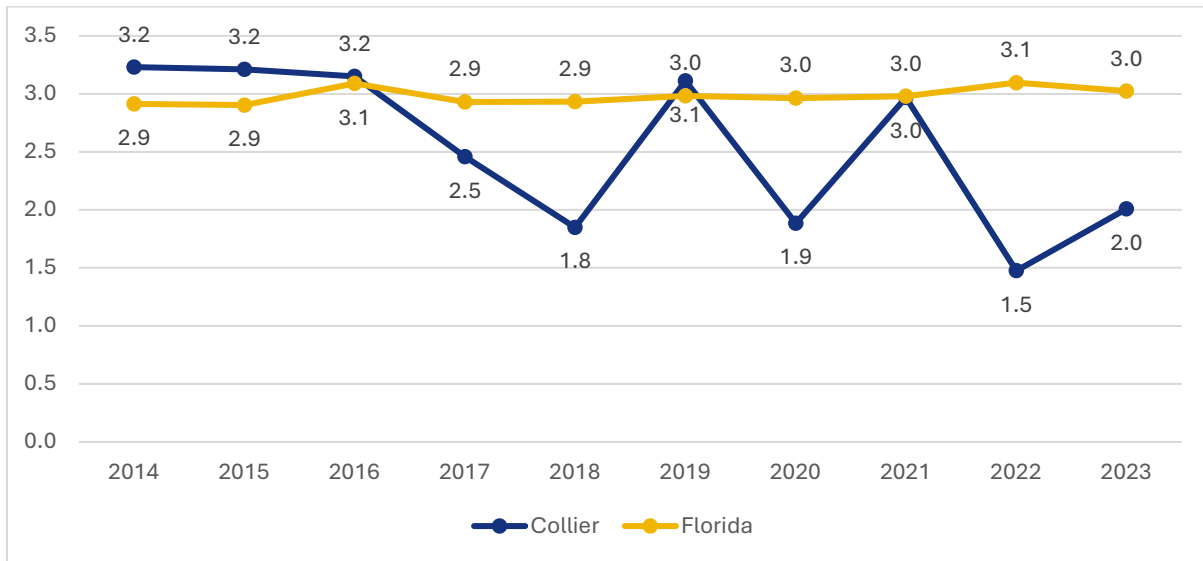


Source: Florida Department of Health

2025 Collier County Community Health Assessment: Health Behaviors

The rate of death from Congenital Malformations and Chromosomal Abnormalities has trended slightly lower in Collier County in the past decade.

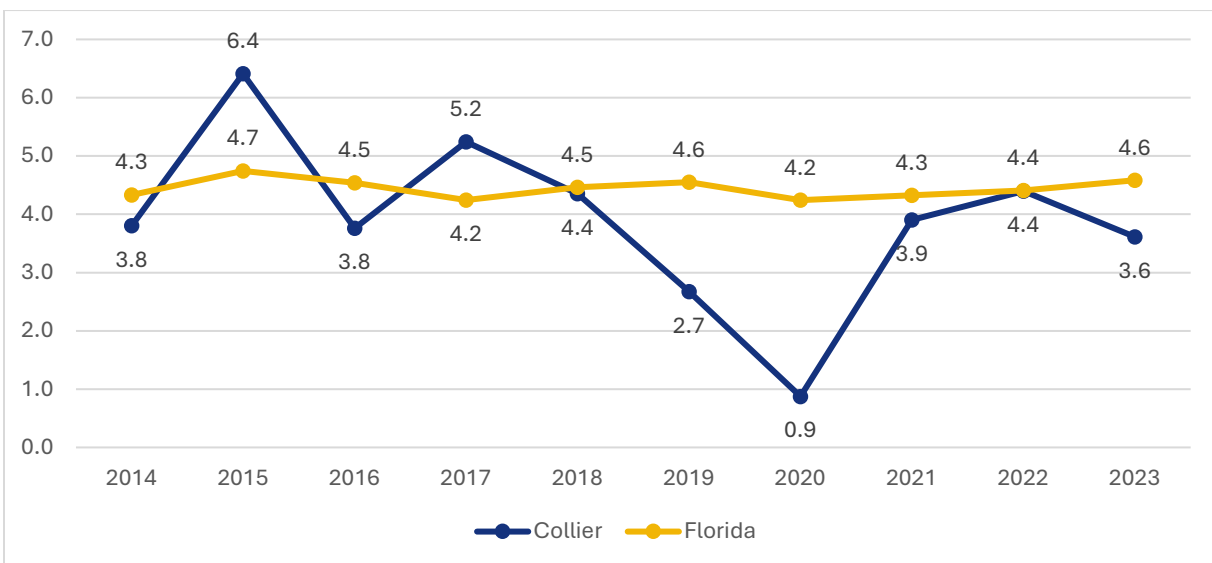
Exhibit HB37: Age-Adjusted Deaths from Congenital Malformations and Chromosomal Abnormalities, Rate 100,000 Population, Collier County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

In Collier County, the rate of death from Perinatal Period Conditions has been variable. It tends to be similar to or lower than the state rate (3.6 Collier, 4.6 Florida, 2023).

Exhibit HB38: Age-Adjusted Deaths from Perinatal Period Conditions, Rate per 100,000 Population, Collier County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

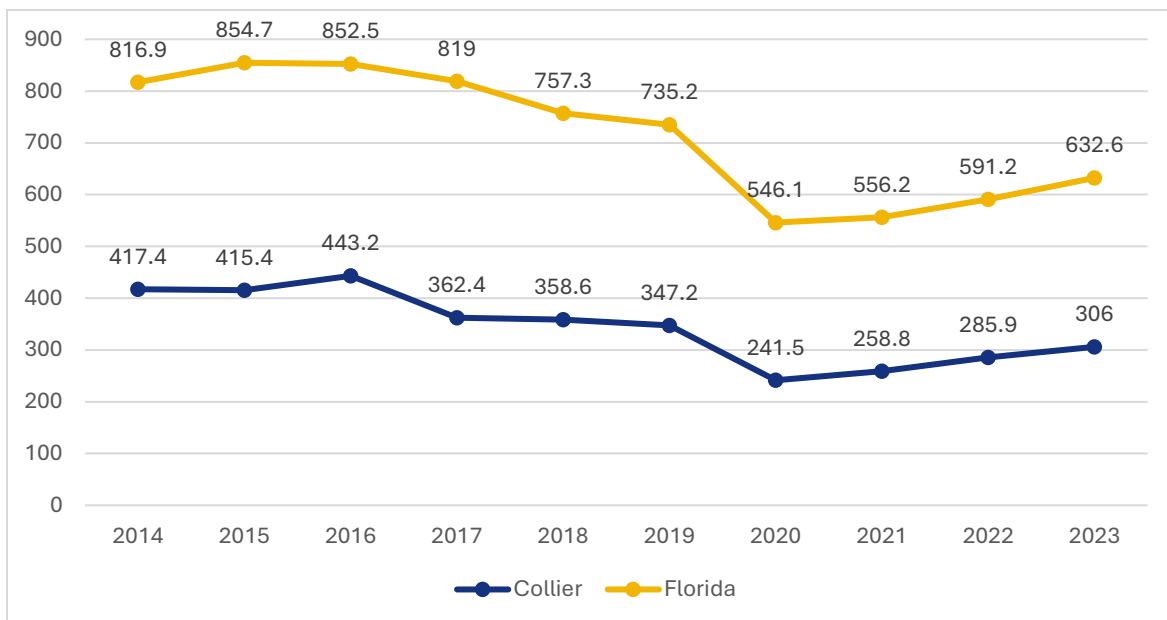


Source: Photo courtesy of Healthcare Network

Oral Health

Dental conditions include tooth malformations, gingivitis, and caries. From 2014 to 2023, there was a decrease in preventable emergency room visits from dental conditions in Collier County (417 2019, 306 2023). In the past decade, Collier County consistently had fewer people visit the emergency room for dental conditions than the Florida average.

Exhibit HB39: Ambulatory Case Sensitive Emergency Department Visits from Dental Conditions (Aged 0-64 Years), Rate per 100,000 Population Under 65, Collier County and Florida, 2014-2023

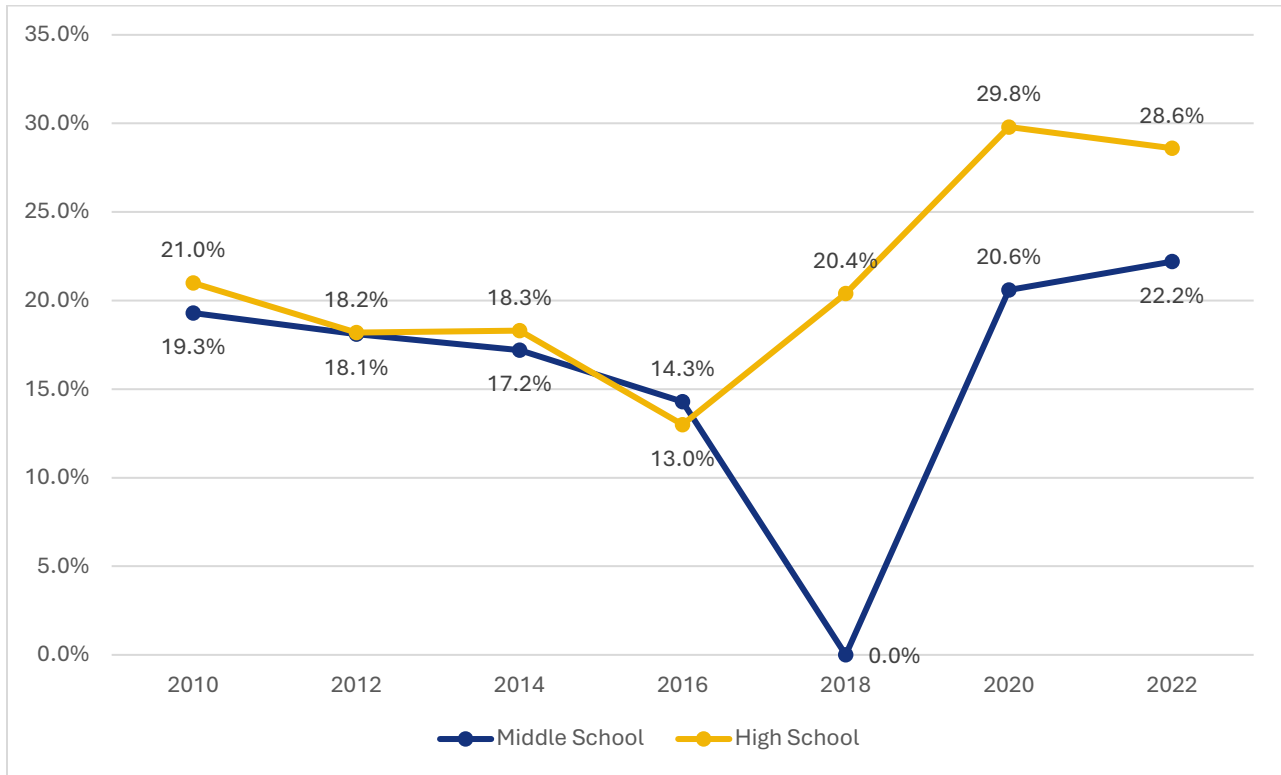


Source: Florida Agency for Health Care Administration (AHCA)

2025 Collier County Community Health Assessment: Health Behaviors

The percentage of high school students in Collier County who had not visited a dentist's office in the past 12 months increased between 2010 and 2022 (21.0% 2010, 28.6% 2022). The percentage for middle school students also increased slightly (19.3% 2010, 22.2% 2022). Note, in 2018, data for middle school was not collected, so zero percent was used to indicate no data was provided.

Exhibit HB40: Percent of Students Who Have Not Visited a Dentist's Office in the Past 12 Months, Middle and High School, Collier County, 2010-2022



Source: Florida Department of Health, Division of Community Health Promotion, Florida Youth Tobacco Survey (FYTS)

Health Conditions



Source: Photo courtesy of the Healthcare Network

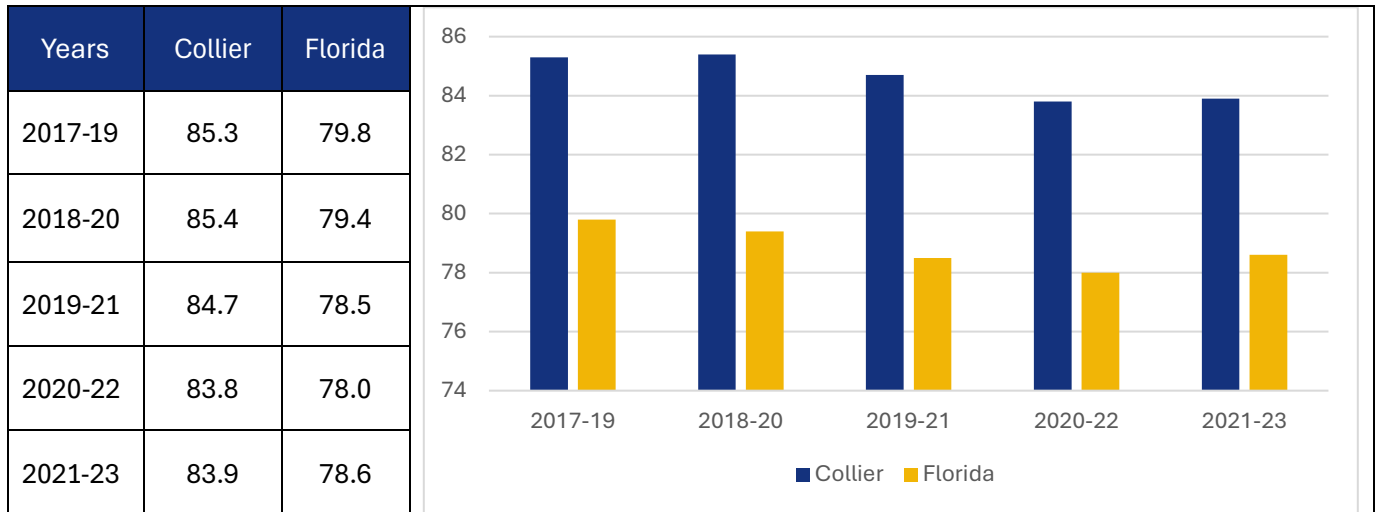
This section of the Community Health Assessment (CHA) for Collier County examines the status of significant health conditions in our community. It includes an analysis of life expectancy, years of potential life lost, and the leading cause of death. The section further explores chronic and infectious diseases as well as older population health. Understanding the prevalence, trends, and impact of these health conditions is crucial for prioritizing public health efforts and developing effective interventions to improve the health and well-being of Collier County residents.

Life Expectancy

Collier County continuously exceeds the Florida average for life expectancy. In 2021-23, there was a 5.3-year difference between Collier County and Florida. Collier County also had the highest life expectancy out of all 67 counties in Florida. However, like the rest of the state, Collier County saw a decline in life expectancy beginning in 2019-21; the rate did increase in 2021-23.

2025 Collier County Community Health Assessment: Health Conditions

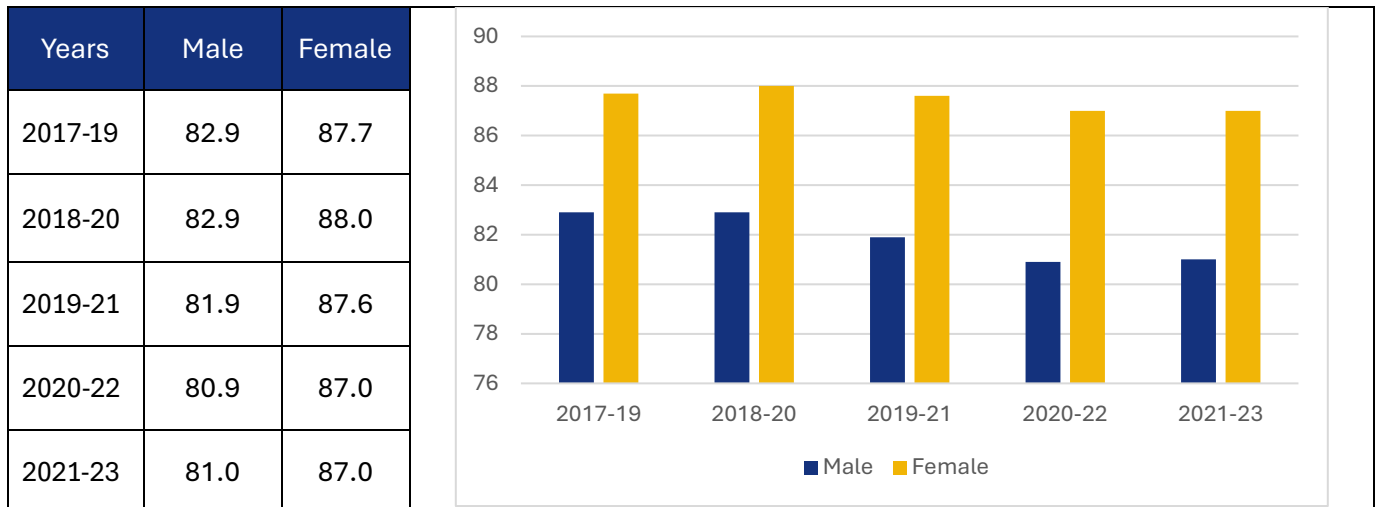
Exhibit HC1: Life Expectancy Over Time, Collier County and Florida, 3-Year Estimates, 2017-2023



Source: Death data are from the Florida Bureau of Vital Statistics. Population data are from the Florida Legislature Office of Economic and Demographic Research

Females in Collier County have consistently had a higher life expectancy compared to males. In 2021-23, there was a 6-year life expectancy difference between males and females.

Exhibit HC2: Life Expectancy by Sex, Collier County, 3-Year Estimates, 2017-2023

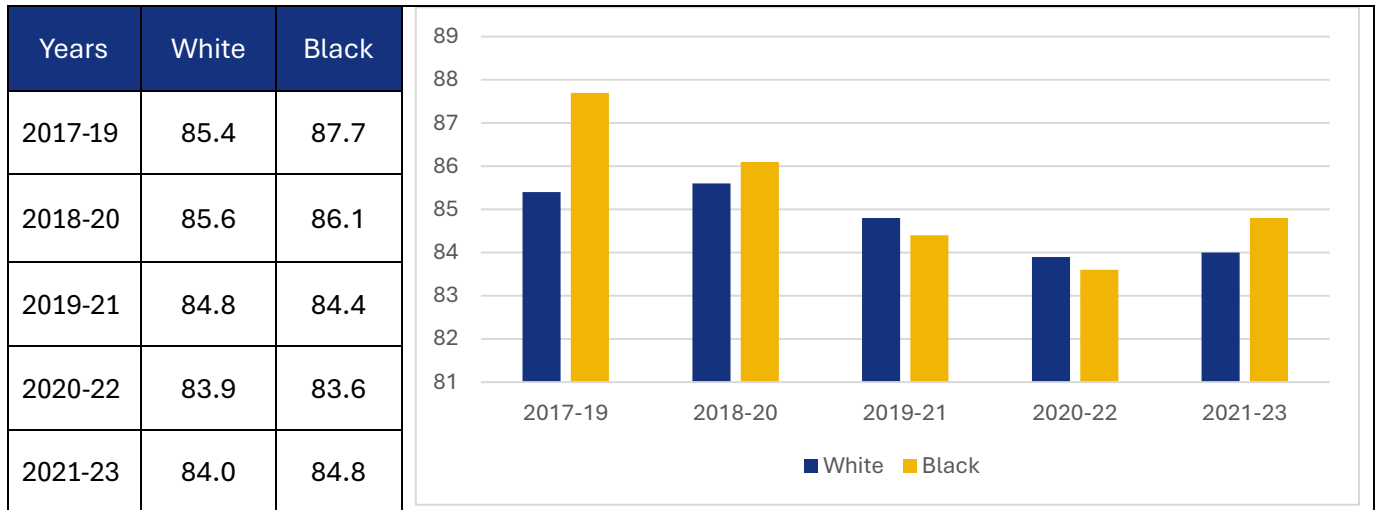


Source: Death data are from the Florida Bureau of Vital Statistics. Population data are from the Florida Legislature Office of Economic and Demographic Research

Those who identify as black in Collier County had a higher life expectancy in 2021-23 compared to the white population. That was also true in 2017-19 and 2018-20; however, the life expectancy for the black population dipped below that of the white population for 2019-21 and 2020-22. The difference in 2021-23 was 0.8 years.

2025 Collier County Community Health Assessment: Health Conditions

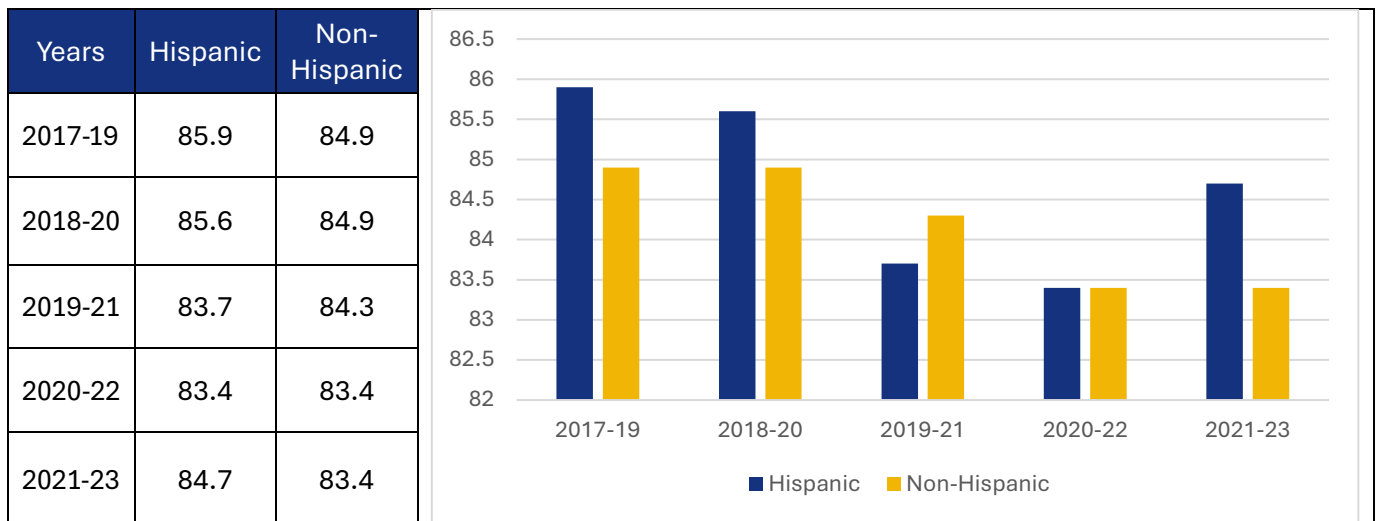
Exhibit HC3: Life Expectancy by Race, Collier County, 3-Year Estimates, 2017-2023



Source: Death data are from the Florida Bureau of Vital Statistics. Population data are from the Florida Legislature Office of Economic and Demographic Research

In Florida, race and ethnicity are tracked separately. Those who identify as Hispanic in Collier County had a higher life expectancy in 2021-23 compared to the non-Hispanic population. That was also true in 2017-19 and 2018-20; however, the life expectancy for the Hispanic population dipped below that of the white population for 2019-21 and was even for 2020-22. The difference in 2021-23 was 1.3 years.

Exhibit HC4: Life Expectancy by Ethnicity, Collier County, 3-Year Estimates, 2017-2023



Source: Death data are from the Florida Bureau of Vital Statistics. Population data are from the Florida Legislature Office of Economic and Demographic Research

Leading Cause of Death

The following table gives detailed information on the leading causes of death for residents of Collier County. The Deaths column is a simple count of the number of people who died by the listed cause during 2023. The Percent of Total Deaths indicates the percentage of people who died from that cause. Cancer and heart disease are the two most common causes of death in Collier County. Combined, they are responsible for 40.5 percent of all deaths.

Crude Rate per 100,000 gives a sense of how likely a person is to die of that cause in any given year. For example, out of every 100,000 people in Collier County, 109.1 of them died of a stroke in 2023. Using the rate per 100,000 allows for comparing areas with different populations, such as comparing a small county to a large county or a county to the state.

The next column lists the Age-Adjusted Death Rate per 100,000. Age-adjusting a rate is a way to make fairer comparisons between groups with different age distributions. For example, a county having a higher percentage of elderly people may have a higher rate of death or hospitalization than a county with a younger population, merely because the elderly are more likely to die or be hospitalized. The same distortion can happen when we compare races, genders, or time periods. Age adjustment can make the different groups more comparable.

The last column is Years of Potential Life Lost. This estimates the number of years a person would have lived had they not died prematurely. In this case, that number is given for all people who died under the age of 75 if they had lived to the age of 75. When the numbers are particularly low, such as they are for Alzheimer's disease, it is generally because the cause of death primarily impacts the elderly. Conversely, an exceptionally high number, such as for unintentional injuries, suggests that the average age of the victims was young.

Cancer, heart disease, and stroke are the top three leading causes of death in 2023 for Collier County. Since 2007, cancer and heart disease have been the top two causes of death in Collier County. Unintentional injury, which includes accidental drug overdoses, and cancer, had the highest years of potential life lost in Collier County, which means these two causes of death have many young people dying from these causes in 2023. Unintentional injuries and suicides are discussed in further detail in the health behaviors section.

Exhibit HC5: Leading Causes of Death, Collier County, 2023

Cause of Death	Deaths	Percent of Total Deaths	Crude Rate per 100,000	Age-Adjusted Death Rate per 100,000	YPLL <75 per 100,000 Under 75
Cancer	880	20.9	220.2	95.0	1,093.6
Heart Disease	827	19.6	207.0	77.9	573.3
Stroke	436	10.3	109.1	38.5	166.1
Unintentional Injury	380	9.0	95.1	70.1	1,733.8
Chronic Lower Respiratory Disease	144	3.4	36.0	14.0	110.6
Diabetes	98	2.3	24.5	11.7	164.6
Parkinson's Disease	94	2.2	23.5	8.2	19.5

2025 Collier County Community Health Assessment: Health Conditions

Cause of Death	Deaths	Percent of Total Deaths	Crude Rate per 100,000	Age-Adjusted Death Rate per 100,000	YPLL <75 per 100,000 Under 75
Alzheimer's Disease	91	2.2	22.8	7.6	14.9
Covid-19	69	1.6	17.3	5.9	17.1
Chronic Liver Disease and Cirrhosis	68	1.6	17.0	12.3	301.7
Suicide	65	1.5	16.3	13.0	364.2
Nephritis, Nephrotic Syndrome, and Nephrosis	39	0.9	9.8	4.2	47.2
Hypertension	39	0.9	9.8	3.9	24.4
Septicemia	36	0.9	9.0	3.8	30.8
Influenza And Pneumonia	34	0.8	8.5	3.2	18.9
Pneumonitis	32	0.8	8.0	3.1	31.1
Benign Neoplasm	26	0.6	6.5	2.6	22.9
Aortic Aneurysm and Dissection	18	0.4	4.5	1.6	12.2
Nutritional Deficiencies	11	0.3	2.8	1.1	8.2
Cholelithiasis and Other Gallbladder Disorders	11	0.3	2.8	1.0	7.0
Congenital Malformations	9	0.2	2.3	2.0	77.4
Perinatal Period Conditions	9	0.2	2.3	3.6	204.4
Anemias	7	0.2	1.8	0.6	4.6
Peptic Ulcer	6	0.1	1.5	0.6	8.5
Homicide	6	0.1	1.5	1.6	56.1
HIV/AIDS	5	0.1	1.3	1.3	28.7
Atherosclerosis	5	0.1	1.3	0.5	6.4
Hernia	4	0.1	1.0	0.3	0.0
Medical and Surgical Care Complications	3	0.1	0.8	0.3	5.5
Viral Hepatitis	2	0.1	0.5	0.3	8.8
Pregnancy, Childbirth, and The Puerperium	0	0.0	0.0	0.0	0.0

Source: Florida Department of Health, Bureau of Vital Statistics



Source: Photo courtesy of the Health Planning Council of Southwest Florida, Inc.

Years of Potential Life Lost

The top three causes of death that had the highest year of potential life lost (YPLL) among people in Collier County are unintentional injury, cancer, and heart disease. These causes were all in the top three for the years selected. There was a significant increase in the YPLL from unintentional injuries, suicide, and diabetes between 2013 and 2023 (although diabetes fell slightly from 2018-2023). The Maternal and Infant Health section discusses perinatal period conditions and congenital malformations.

Exhibit HC6: Population Top Ten Cause of Death Per Years of Potential Life Lost Under 75 Years of Age per 100,000, Collier County, 2013, 2018, 2023

Cause of Death	2013	2018	2023
Unintentional Injury	939.9	1,059.7	1,733.8
Cancer	1,155.6	1,228.8	1,093.6
Heart Disease	539.4	614.7	573.3
Suicide	289.9	335.2	364.2
Chronic Liver Disease and Cirrhosis	130.3	292.7	301.7
Perinatal Period Conditions	256.8	240.2	204.4
Stroke	121.5	209.5	166.1
Diabetes	101.3	165.0	164.6
Chronic Lower Respiratory Disease	130.3	69.6	110.6
Congenital Malformations	8.6	77.4	77.4

Source: Florida Department of Health, Bureau of Vital Statistics

2025 Collier County Community Health Assessment: Health Conditions

The top three causes of death that had the highest YPLL among non-Hispanic white people in Collier County are unintentional injury, cancer, and heart disease. These causes were all in the top three for the years selected. There was a significant increase in the YPLL from unintentional injuries, diabetes, and stroke between 2013 and 2023. There was a decrease in the YPLL for chronic liver disease and cirrhosis. The Maternal and Infant Health section discusses perinatal period conditions and congenital malformations.

Exhibit HC7: Years of Potential Life Lost Under 75 Years of Age per 100,000 Population, Top Ten Cause of Death, Non-Hispanic White, Collier County, 2013, 2018, 2023

Cause of Death	2013	2018	2023
Unintentional Injury	916.7	1,125.5	1,793.5
Cancer	1,469.3	1,561.1	1,420.9
Heart Disease	695.5	731.2	689.9
Chronic Liver Disease and Cirrhosis	445.9	372.6	352.6
Suicide	327.9	374.8	348.2
Perinatal Period Conditions	169.1	41.6	204.0
Diabetes	94.2	119.9	155.5
Stroke	82.3	196.3	152.2
Chronic Lower Respiratory Disease	192.9	120.5	149.5
Congenital Malformations	12.5	8.4	69.8

Source: Florida Department of Health, Bureau of Vital Statistics

The top three causes of death with the highest YPLL among non-Hispanic black people in Collier County are unintentional injury, cancer, and heart disease. These causes were all in the top three for the years selected. The YPLL for unintentional injury, heart disease, and suicide has increased during the selected years.

Exhibit HC8: Years of Potential Life Lost Under 75 Years of Age per 100,000 Population, Top Ten Cause of Death, Non-Hispanic Black, Collier County, 2013, 2018, 2023

Cause of Death	2013	2018	2023
Unintentional Injury	938.5	2,027.3	2,199.6
Heart Disease	586.6	711.0	1,116.2
Cancer	727.4	918.4	825.9
Diabetes	229.9	325.9	278.0
Suicide	126.7	220.1	233.0
HIV/AIDS	389.5	4.2	216.7
Chronic Lower Respiratory Disease	0.0	0.0	204.4
Stroke	668.7	431.7	130.8
Aortic Aneurysm and Dissection	112.6	88.9	89.9
Medical And Surgical Care Complications	187.7	42.3	61.3

Source: Florida Department of Health, Bureau of Vital Statistics

2025 Collier County Community Health Assessment: Health Conditions

The top three causes of death with the highest YPLL among Hispanic people in Collier County were inconsistent in the selected years in the table below. In 2023, the top three causes of death with the highest YPLL were unintentional injury, cancer, and suicide. Like with the non-Hispanic population, there has been a significant increase in the YPLL for unintentional injuries.

Exhibit HC9: Years of Potential Life Lost Under 75 Years of Age per 100,000 Population, Top Ten Cause of Death, Hispanic, Collier County, 2013, 2018, 2023

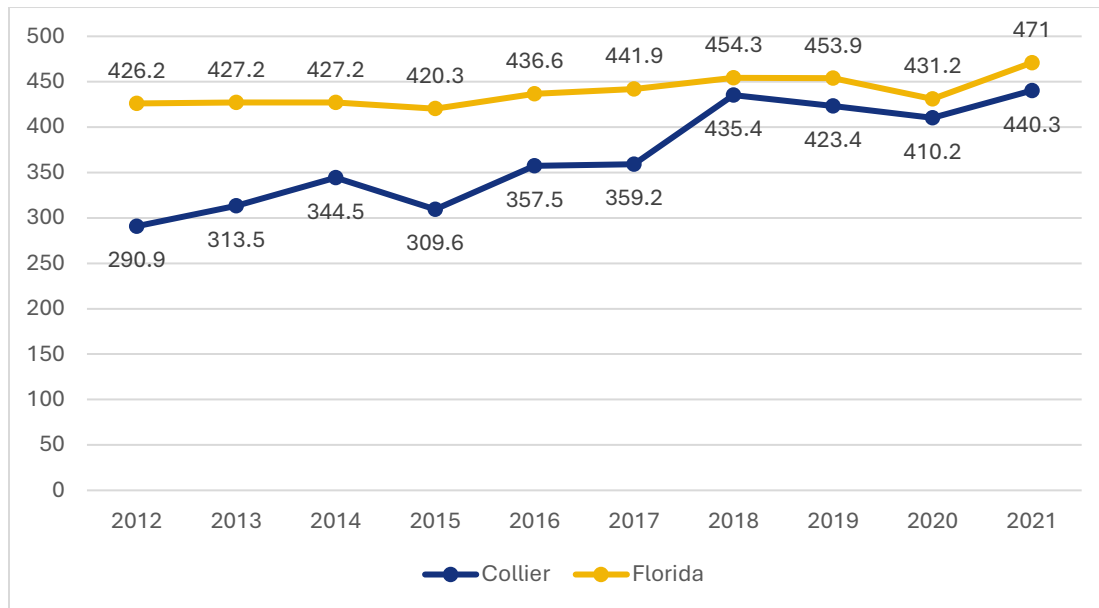
Cause of Death	2013	2018	2023
Unintentional Injury	879.9	615.9	1,431.0
Cancer	582.3	752.9	673.6
Suicide	275.9	283.1	322.8
Heart Disease	228	345	289.4
Chronic Liver Disease and Cirrhosis	114.6	243.5	286.7
Perinatal Period Conditions	348.4	378.0	268.7
Stroke	65.5	192.8	206.5
Diabetes	59.6	221.2	138.9
Congenital Malformations	3.5	103.0	114.1
Homicide	368.3	218.2	100.1

Source: Florida Department of Health, Bureau of Vital Statistics

Cancer

From 2012 to 2021, Collier County experienced an increase in new cases of cancer. When compared to the Florida average, Collier County has continuously experienced lower incidences of cancer, although the rates are getting closer.

Exhibit HC10: Cancer Incidence, Age-Adjusted Rate per 100,000, Collier County and Florida, 2012-2021

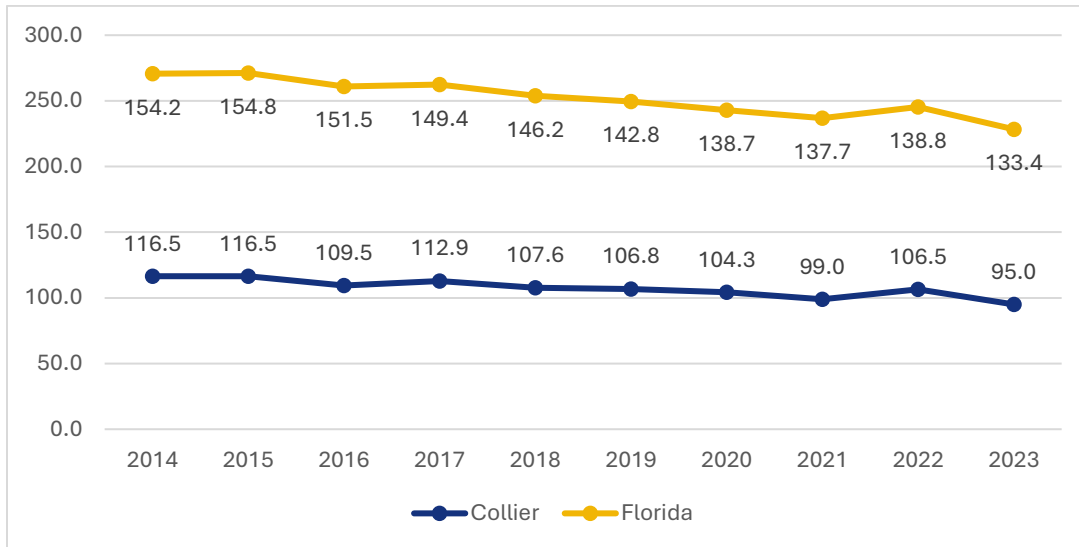


Source: University of Miami (FL) Medical School, Florida Cancer Data System

2025 Collier County Community Health Assessment: Health Conditions

Since 2014, in Collier County, the overall cancer death rate has decreased. Even though more people have been diagnosed with cancer, fewer people are dying from cancer. Collier County's cancer death rate is significantly lower than the Florida average.

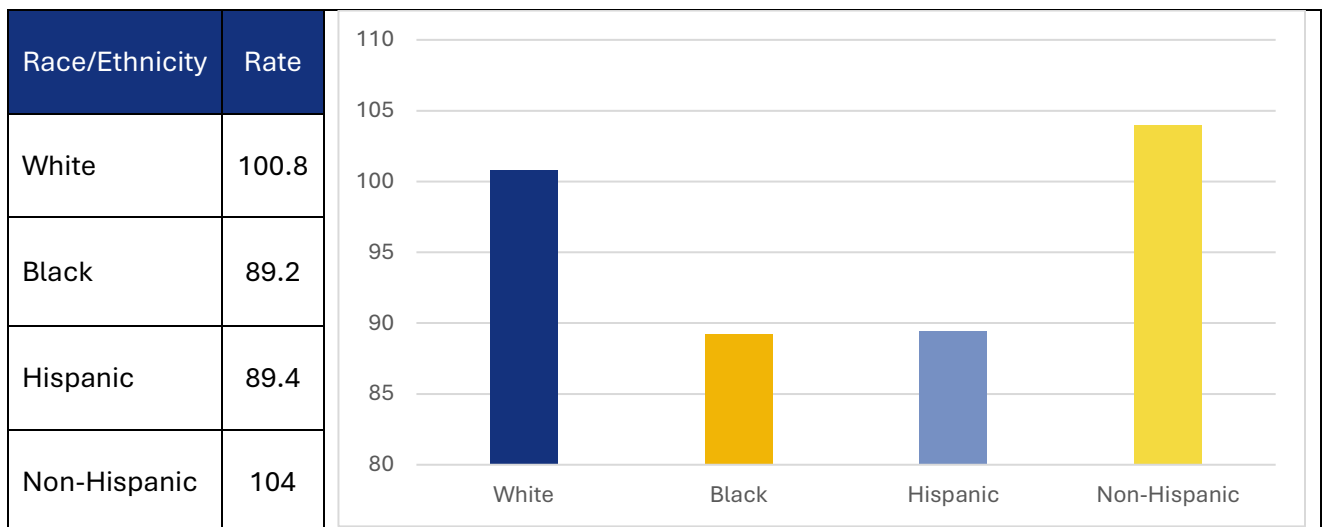
Exhibit HC11: Cancer Deaths, Age-Adjusted Rate per 100,000, Collier County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

The age-adjusted death rate from cancer is the lowest among the black population in Collier County. The non-Hispanic population had the highest cancer death rate when compared to other races and ethnicities.

Exhibit HC12: Cancer Deaths by Race and Ethnicity, 3-Year Age-Adjusted Rate per 100,000, Collier County, 2021-2023

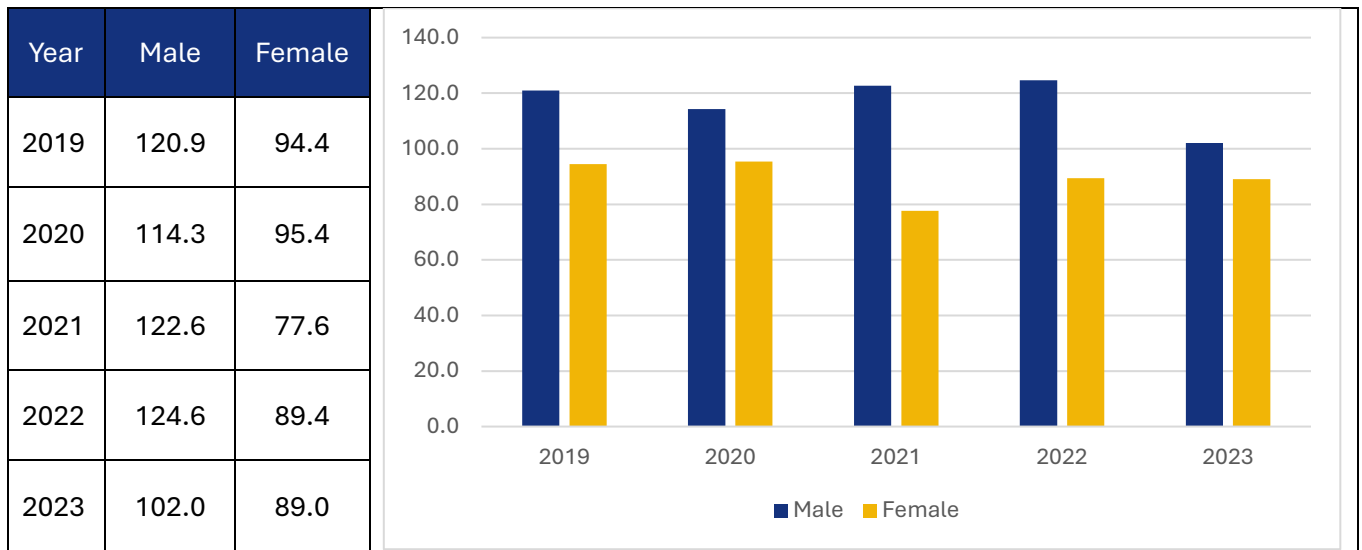


Source: Florida Department of Health, Bureau of Vital Statistics

2025 Collier County Community Health Assessment: Health Conditions

Males in Collier County consistently had a higher cancer death rate when compared to females.

Exhibit HC13: Cancer Deaths by Sex, Age-Adjusted Rate per 100,000, Collier County, 2019-2023



Source: Florida Department of Health, Bureau of Vital Statistics

The most common types of cancer in Collier County were breast and prostate cancer. However, lung cancer was the deadliest among those diagnosed with cancer.

Exhibit HC14: Common Types of Cancer, 3-Year Incidence Rate and Age-Adjusted Death Rate, Collier County, 2019-2021, 2021-2023

	Incidence Rate, 2019-2021	Age-Adjusted Death Rate, 2021-2023
Female Breast Cancer	132.5	13.5
Prostate Cancer	106.7	10.9
Melanoma/ Skin Cancer	35.2	2.2
Lung Cancer	34.4	18.6
Colorectal Cancer	26.7	7.0
Oral Cancer	12.0	2.7
Cervical Cancer	8.1	1.0

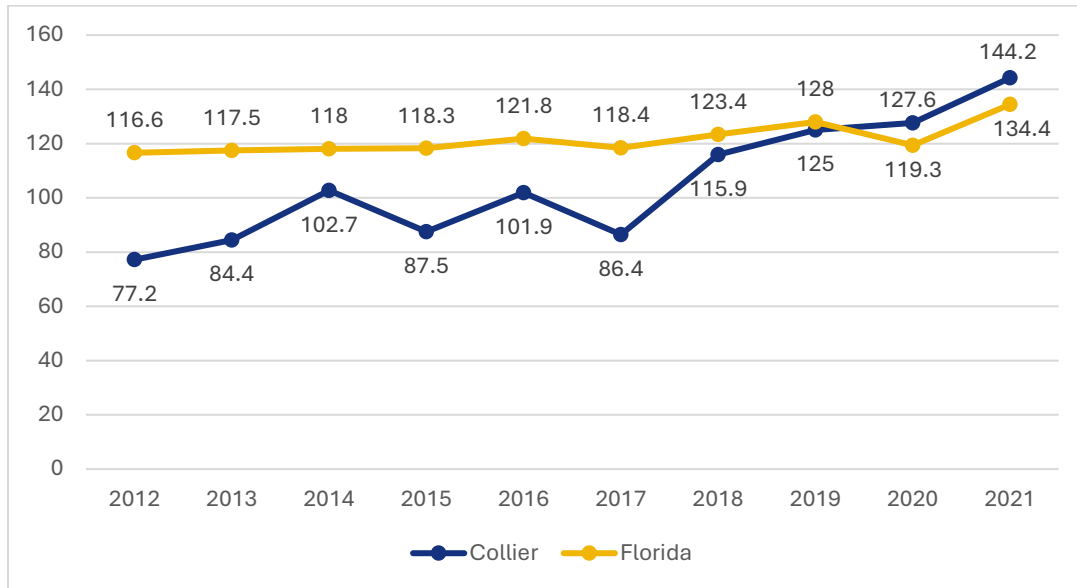
Source: University of Miami (FL) Medical School, Florida Cancer Data System; Florida Department of Health, Bureau of Vital Statistics

2025 Collier County Community Health Assessment: Health Conditions

Breast Cancer

The incidence rate for breast cancer has increased significantly in the past ten years. The rate for Collier County is now higher than the state average.

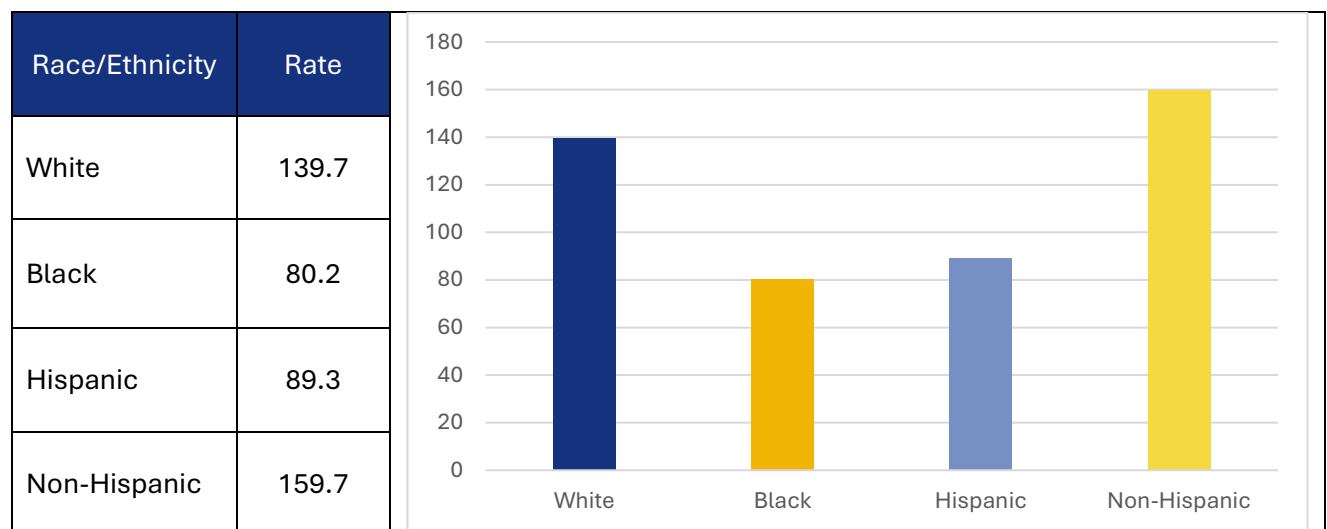
Exhibit HC15: Age-Adjusted Female Breast Cancer Incidence, Rate per 100,000 Female Population, Collier County and Florida, 2012-2021



Source: University of Miami (FL) Medical School, Florida Cancer Data System

The non-Hispanic population in Collier County had the highest incidence, while the black population had the lowest incidence of being diagnosed with breast cancer in 2021.

Exhibit HC16: Age-Adjusted Female Breast Cancer Incidence by Race and Ethnicity, Rate per 100,000 Female Population, Collier County, 2021

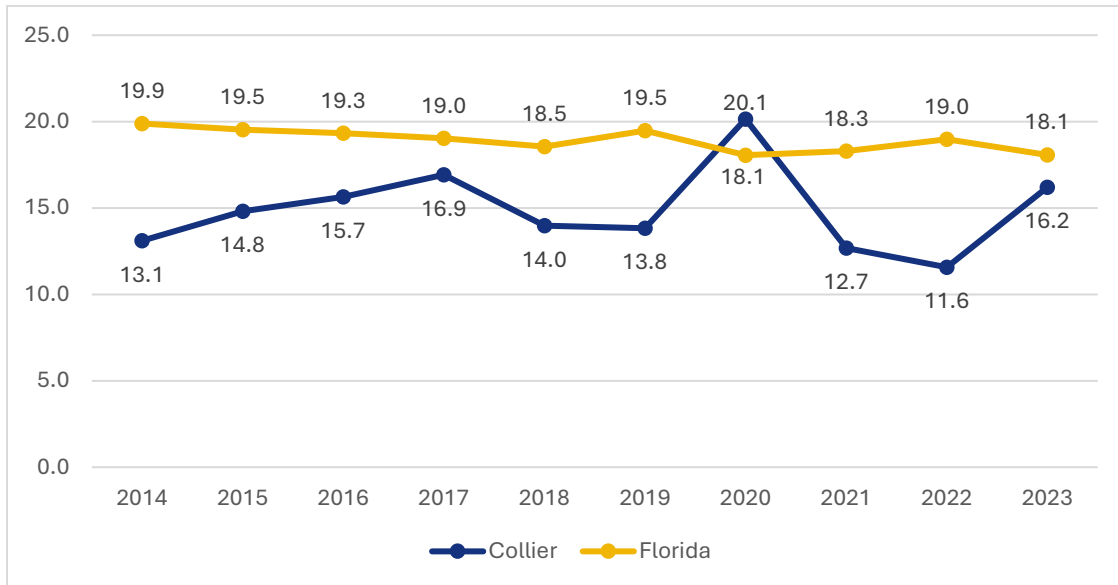


Source: University of Miami (FL) Medical School, Florida Cancer Data System

2025 Collier County Community Health Assessment: Health Conditions

2020 was Collier County's deadliest year for breast cancer; the death rate was 20.1 per 100,000. In 2020, Collier County's breast cancer death rate was higher than the Florida average for the first time (20.1 per 100,000 vs. 18.1 per 100,000).

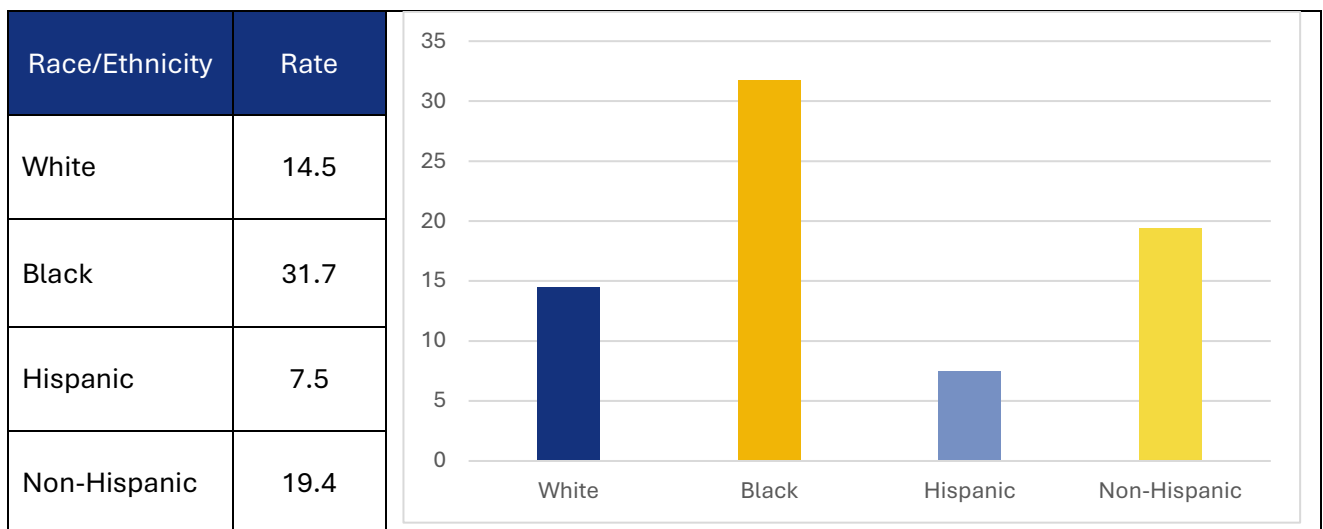
Exhibit HC17: Age-Adjusted Deaths from Female Breast Cancer, Rate per 100,00 Female Population, Collier County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

Those who identify as black had the highest death rate from female breast cancer. In 2020, those who identify as Hispanic had the lowest rate of death from breast cancer compared to the other races and ethnicities.

Exhibit HC18: Age-Adjusted Deaths from Female Breast Cancer by Race and Ethnicity, Rate per 100,000 Female Population, Collier County, 2023

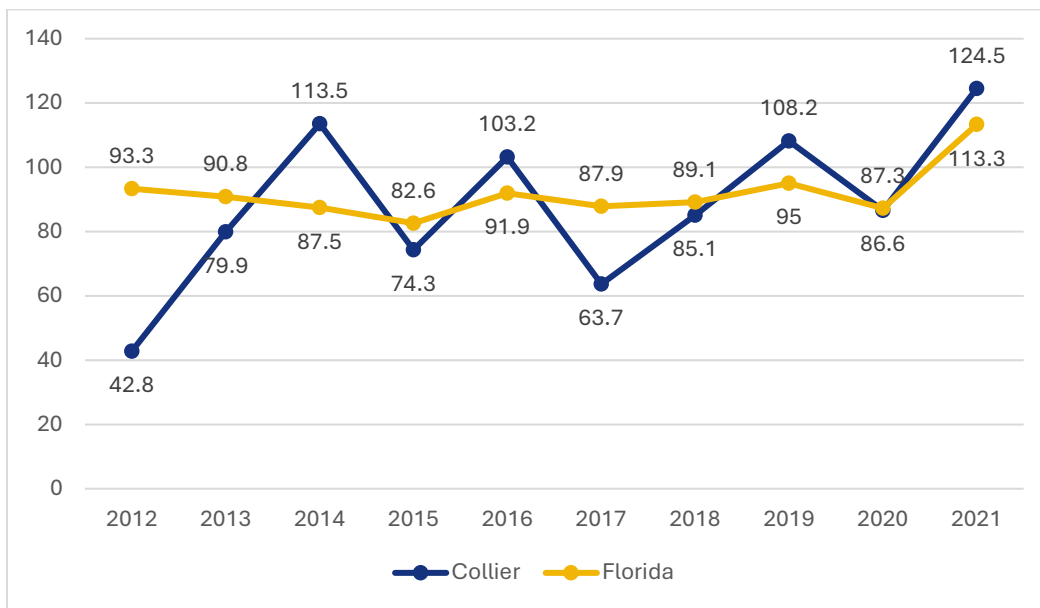


Source: Florida Department of Health, Bureau of Vital Statistics

Prostate Cancer

Prostate cancer is the second most common type of cancer in Collier County. Since 2012, the rate of new prostate cancer diagnoses has increased overall. Collier County experienced higher rates of prostate cancer diagnoses than the state of Florida in 2021.

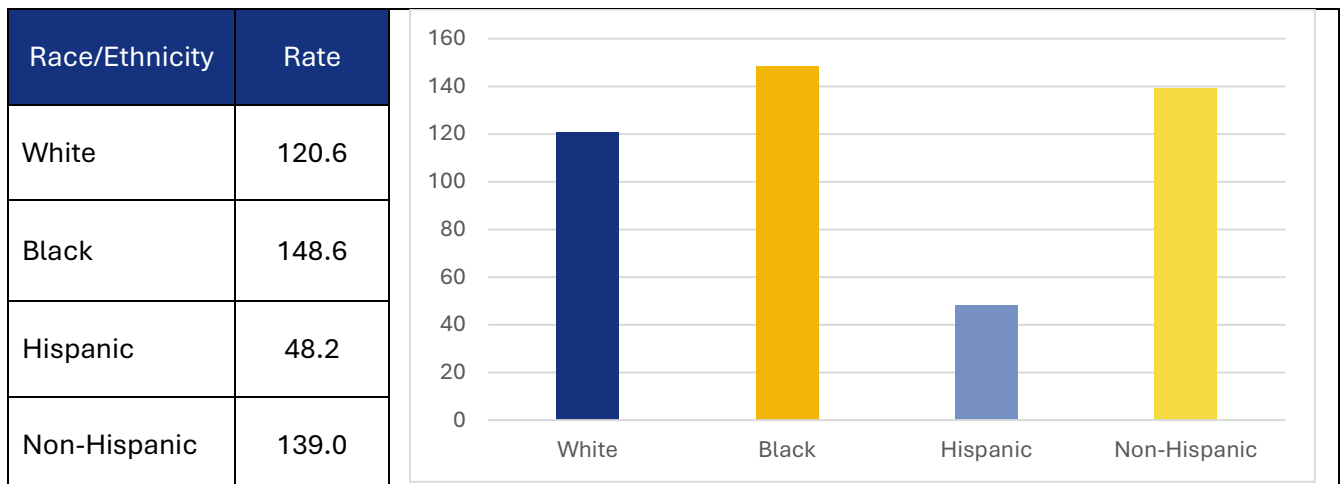
Exhibit HC19: Age-Adjusted Prostate Cancer Incidence, Rate per 100,000 Male Population, Collier County and Florida, 2012-2021



Source: University of Miami (FL) Medical School, Florida Cancer Data System

The black population had the highest rate of new prostate cancer diagnoses, and Hispanics had the lowest rate in Collier County.

Exhibit HC20: Age-Adjusted Prostate Cancer Incidence by Race and Ethnicity, Rate per 100,000 Male Population, Collier County 2021

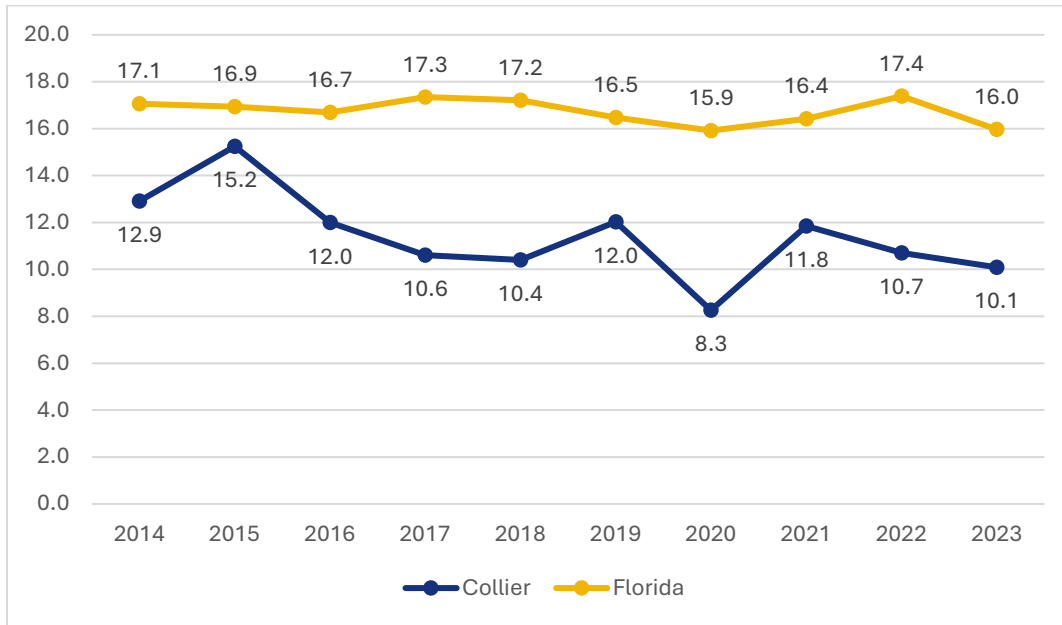


Source: University of Miami (FL) Medical School, Florida Cancer Data System

2025 Collier County Community Health Assessment: Health Conditions

2015 was the deadliest year in the past decade for those with prostate cancer in Collier County. From 2015 until 2018, there was a steady decline in deaths, with a small uptick in prostate cancer deaths in 2019. And 2021. The rate has declined in 2022 and 2023. Collier County's prostate cancer death rate has remained significantly lower than the average for the state.

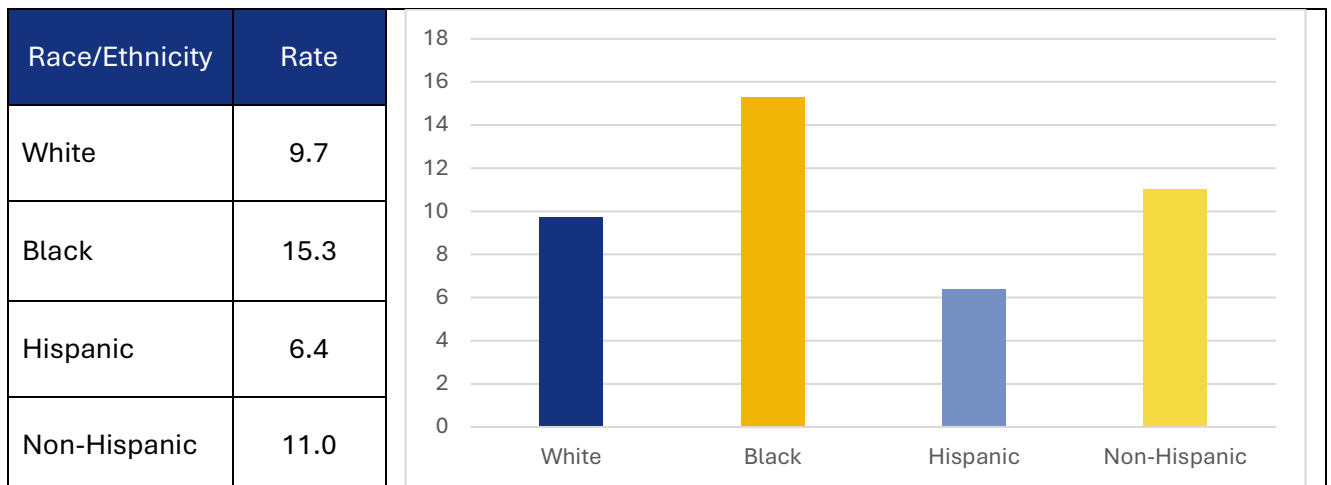
Exhibit HC21: Age-Adjusted Prostate Cancer Death, Rate per 100,000 Male Population, Collier County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

In 2023, black people had the highest rate of death from prostate cancer, followed by non-Hispanics. The Hispanic population had the lowest death rate.

Exhibit HC22: Age-Adjusted Prostate Cancer Death by Race and Ethnicity, Rate per 100,000 Male Population, Collier County, 2023



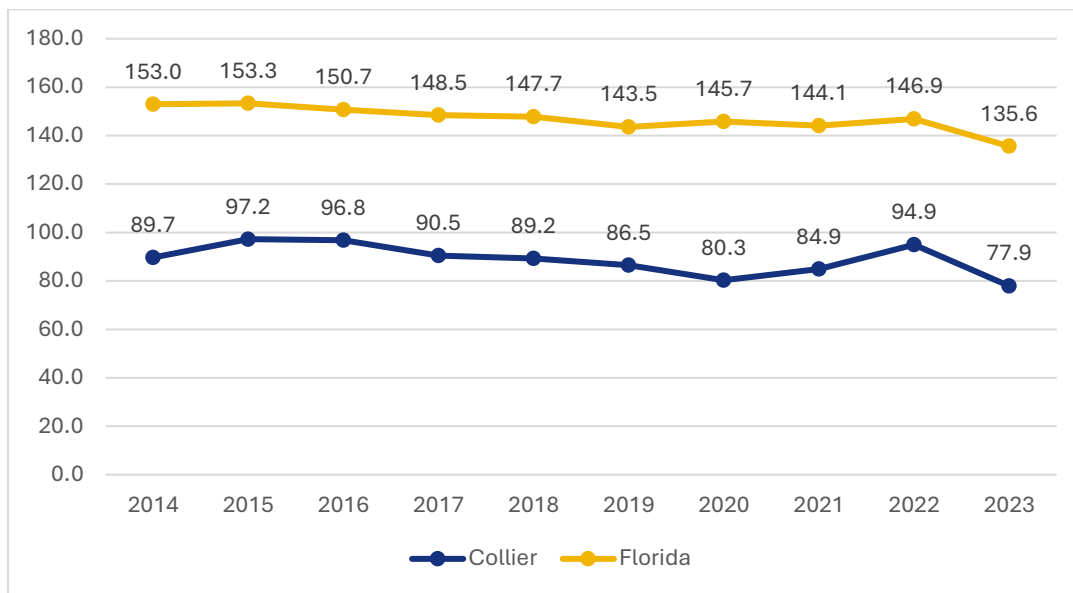
Source: Florida Department of Health, Bureau of Vital Statistics

2025 Collier County Community Health Assessment: Health Conditions

Heart Disease

The death rate from heart disease in Collier County was the lowest in 2023 that it has been for at least the past ten years. Collier County's heart disease death rate was significantly less than the Florida average for that entire period.

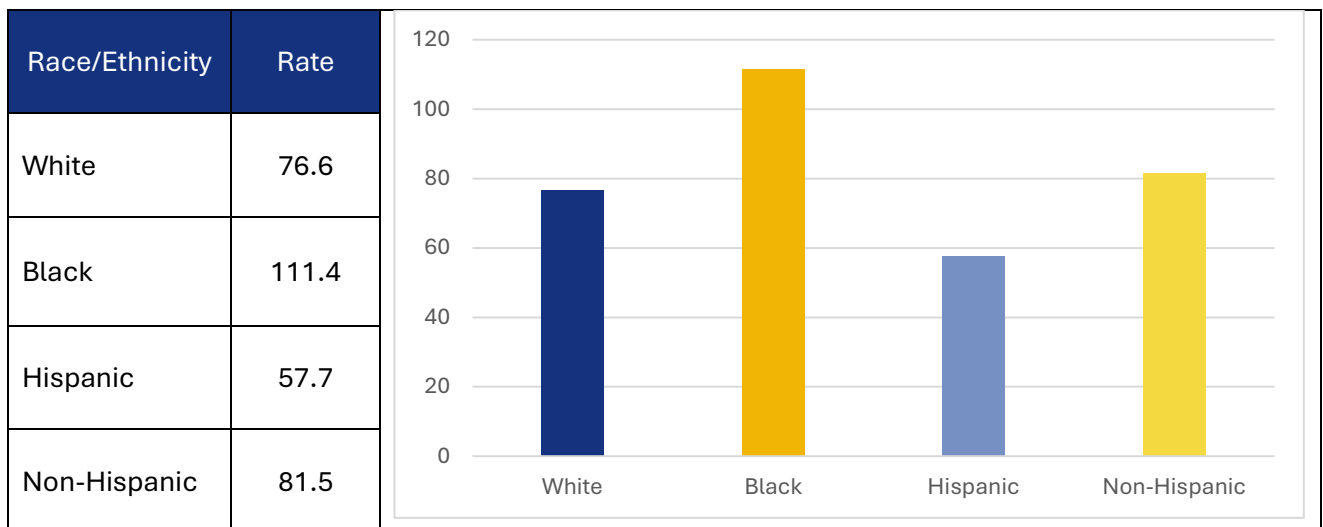
Exhibit HC23: Age-Adjusted Deaths from Heart Diseases, Rate per 100,000 Population, Collier County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

In 2023, black people had the highest rate of death from heart disease, followed by non-Hispanics. The Hispanic population had the lowest death rate from heart disease.

Exhibit HC24: Age-Adjusted Death from Heart Diseases by Race and Ethnicity, Rate per 100,000 Population, Collier County, 2023

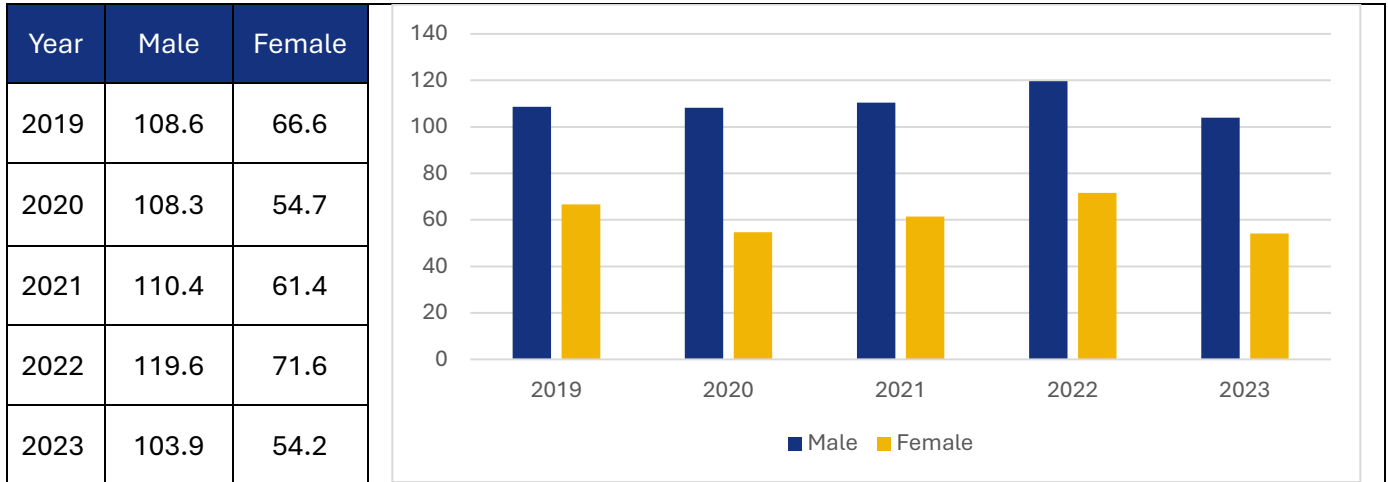


Source: Florida Department of Health, Bureau of Vital Statistics

2025 Collier County Community Health Assessment: Health Conditions

Males die at a higher rate from heart disease compared to females. The rates have not shown a clear trend across the past five years. However, 2023 did have the lowest rates during that period.

Exhibit HC25: Age-Adjusted Death from Heart Diseases by Sex, Rate per 100,000 Population, Collier County, 2023

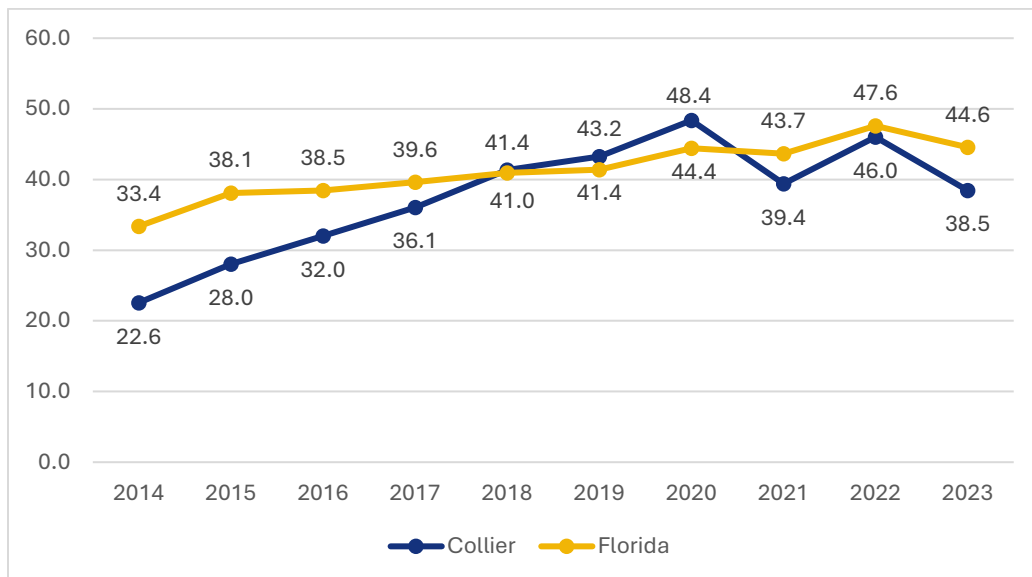


Source: Florida Department of Health, Bureau of Vital Statistics

Stroke

2020 was the deadliest year for stroke deaths in Collier County; this was the highest it's ever been (48.4 per 100,000). Since 2014, there has been a significant increase in stroke deaths in the county. However, that rate began to fall after 2020. In 2023, it was once again lower than the state average and was lower than it had been since 2017.

Exhibit HC26: Age-Adjusted Deaths from Stroke, Rate per 100,000 Population, Collier County and Florida, 2014-2023

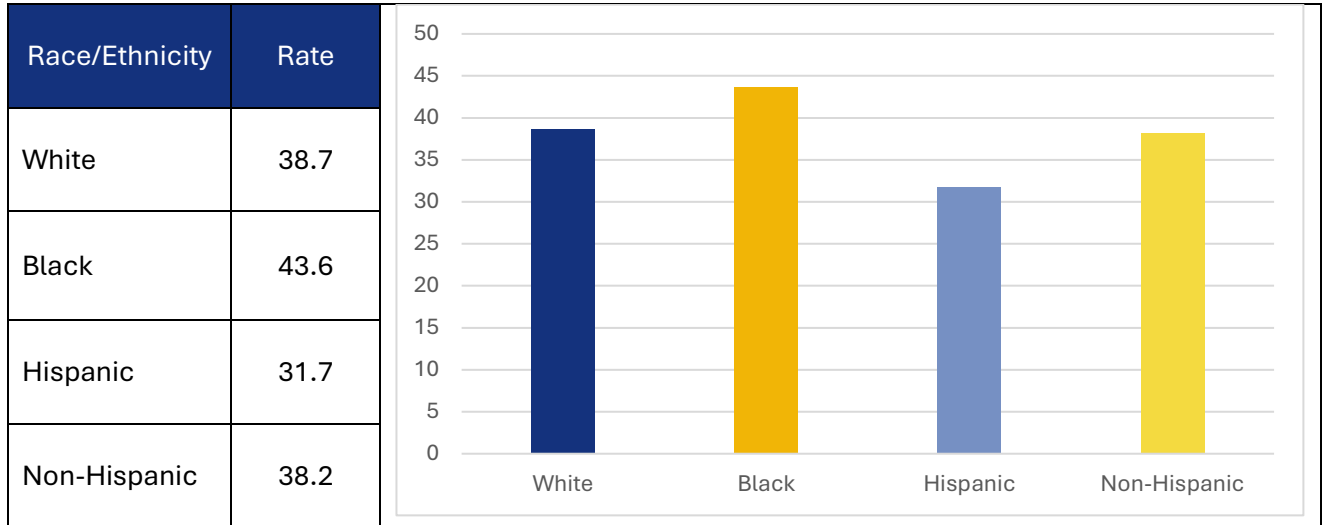


Source: Florida Department of Health, Bureau of Vital Statistics

2025 Collier County Community Health Assessment: Health Conditions

In 2023, the black population had the highest rate of death from stroke, and the Hispanic population had the lowest.

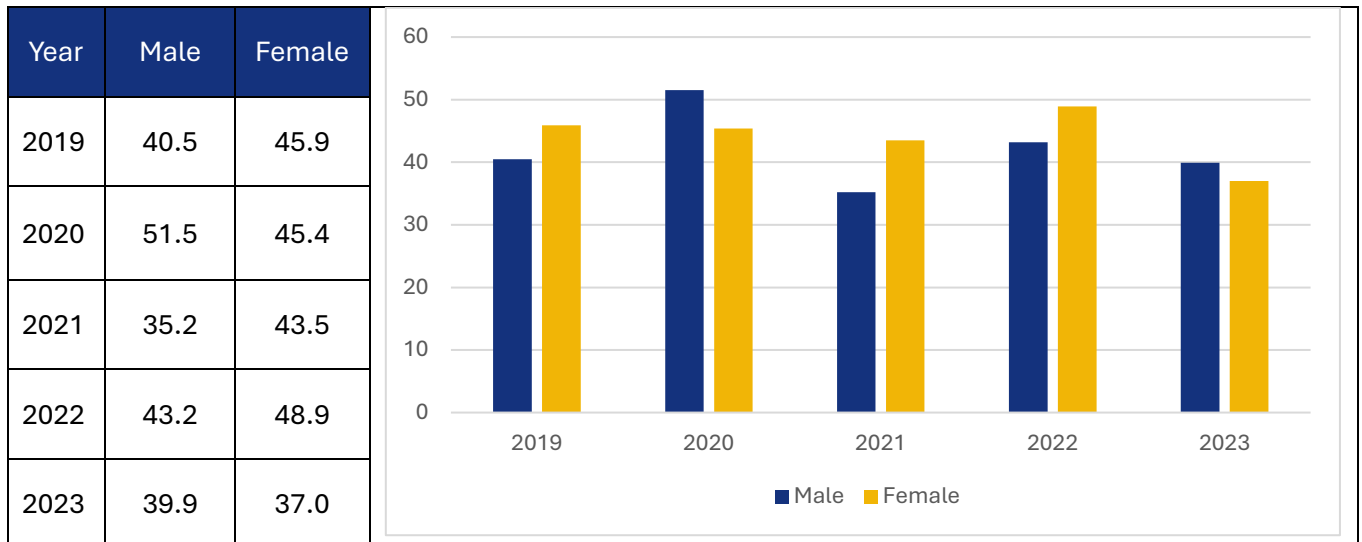
Exhibit HC27: Age-Adjusted Deaths from Stroke by Race and Ethnicity, Rate per 100,000, Collier County, 2023



Source: Florida Department of Health, Bureau of Vital Statistics

There are no consistent trends in the rate of deaths from stroke in males versus females.

Exhibit HC28: Age-Adjusted Deaths from Stroke by Sex, Rate per 100,000 Population, Collier County, 2019-2023



Source: Florida Department of Health, Bureau of Vital Statistics



Source: Photo courtesy of the Health Planning Council of Southwest Florida, Inc.

Aging Population Health

For 2016 and 2023, the top three leading causes of death for seniors aged 65 were the same. The percentage of deaths from stroke did increase significantly during that period. The percentage of deaths attributed to Alzheimer's Disease decreased significantly.

Exhibit HC29: The 10 Leading Causes of Death, 65 Years and Over, Collier County, 2016 and 2023

2016		
Leading Cause of Death	Number of Deaths	Percentage Distribution
Heart Disease	693	30.6%
Cancer	671	29.6%
Stroke	248	10.9%
Alzheimer's Disease	199	8.8%
Chronic Lower Respiratory Disease	173	7.6%
Unintentional Injury	125	5.5%
Parkinson's Disease	57	2.5%
Diabetes	47	2.1%
Nephritis, Nephrotic Syndrome & Nephrosis	32	1.4%
Dementia	23	1.0%

2023		
Leading Cause of Death	Number of Deaths	Percentage Distribution
Heart Disease	762	31.2%
Cancer	733	30.1%
Stroke	416	17.1%
Chronic Lower Respiratory Disease	132	5.4%
Parkinson's Disease	93	3.8%
Alzheimer's Disease	90	3.7%
Diabetes	71	2.9%
COVID-19	68	2.8%
Dementia	41	1.7%
Nephritis, Nephrotic Syndrome & Nephrosis	33	1.4%

Source: Florida Department of Health, Bureau of Vital Statistics

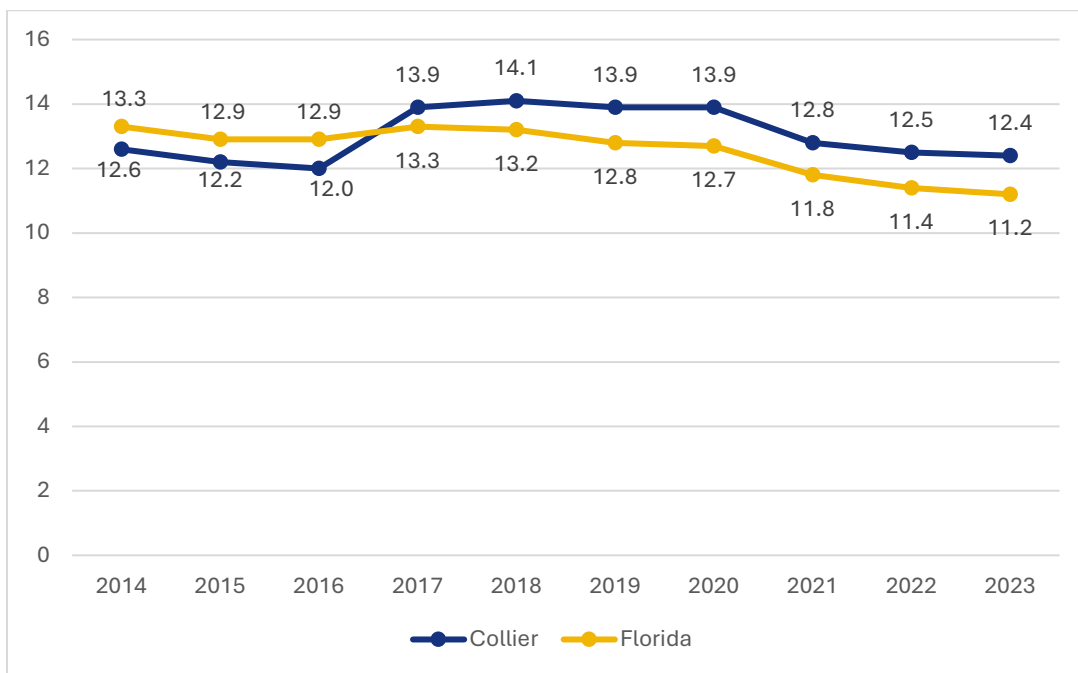
2025 Collier County Community Health Assessment: Health Conditions

Alzheimer's disease is the most common cause of dementia and can account for up to 80 percent of all cases of the condition. First identified over 100 years ago, research on its symptoms, causes, risk factors, and treatment did not gain significant momentum until the last 30 years. Alzheimer's disease is usually diagnosed by a primary care physician utilizing the patient's medical and family history and any psychiatric, cognitive, and behavioral history. Neurological, physical, and cognitive examinations and tests are also conducted as part of the diagnosis process. The definitive cause of Alzheimer's remains unknown at this time. However, it is widely accepted that, as with other chronic diseases, multiple factors are involved in developing the disease.

Advanced age is the predominant risk factor and correlates with the development of Alzheimer's; however, the disease is not a normal part of the aging process. Most people with Alzheimer's disease are diagnosed at age 65 and above. In Collier County, Alzheimer's disease was the sixth leading cause of death in the population 65 years of age and older in 2023.

It is hard to know the actual number of people living with Alzheimer's disease, but below is an estimate of the number of people in Collier County with Alzheimer's. The percentage of the population over the age of 65 with Alzheimer's Disease is higher than the rate in the state overall.

Exhibit HC30: Probable Alzheimer's Cases (65+), Percentage of Population Age 65+, Collier County and Florida, 2014-2023

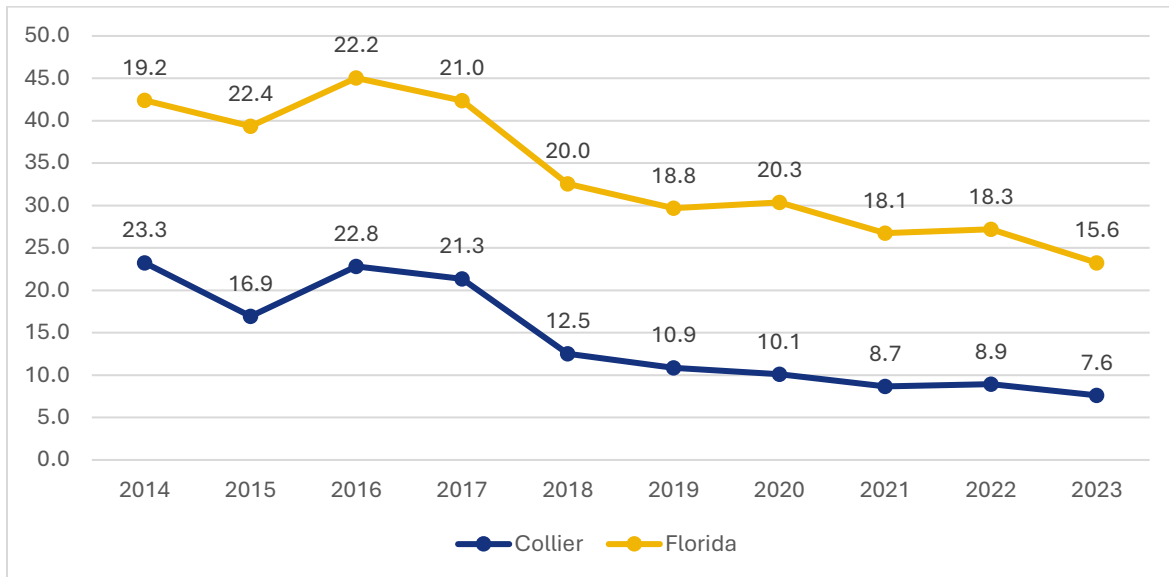


Source: Alzheimer's Association, Alzheimer's Disease Facts and Figures

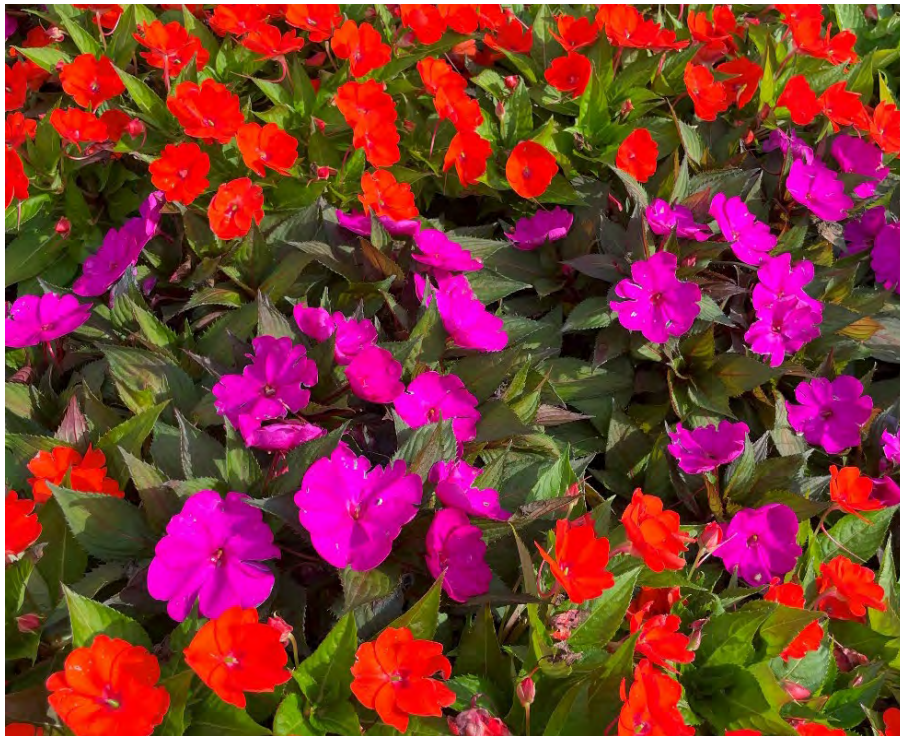
Despite having a higher percentage of persons over 65 with Alzheimer's Disease in Collier County than the state average, the death rate in Collier County is lower than the state average. It has also been decreasing since 2016.

2025 Collier County Community Health Assessment: Health Conditions

Exhibit HC31: Age-Adjusted Deaths from Alzheimer's Disease, Rate per 100,000 Population, Collier County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

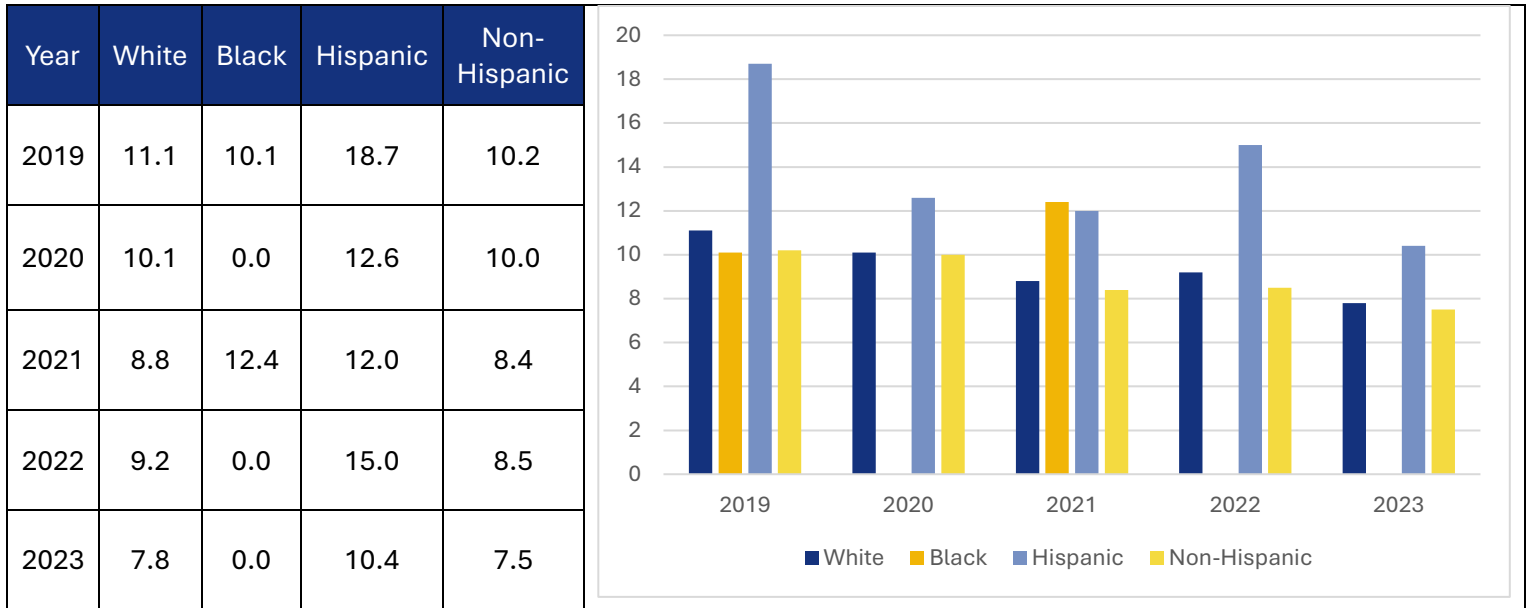


Source: Photo courtesy of the Health Planning Council of Southwest Florida, Inc.

In Collier County, Hispanics had a higher Alzheimer's death rate when compared to other races and ethnicities in the past five years, except for 2021. In 2021, the black population had the highest death rate. However, that is based on a small sample; that group had no deaths in 2020, 2022, or 2023.

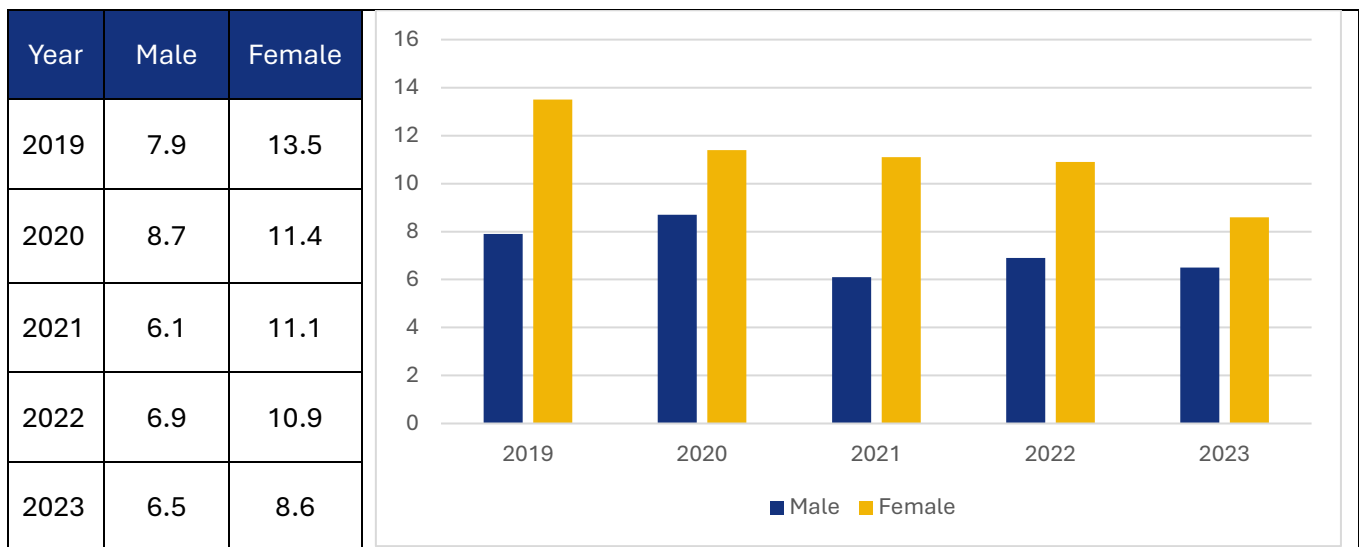
2025 Collier County Community Health Assessment: Health Conditions

Exhibit HC32: Age-Adjusted Deaths from Alzheimer's Disease by Race and Ethnicity, Rate per 100,000 Population, Collier County, 2019-2023



Females in Collier County consistently had a higher Alzheimer's death rate when compared to males from 2019 to 2023.

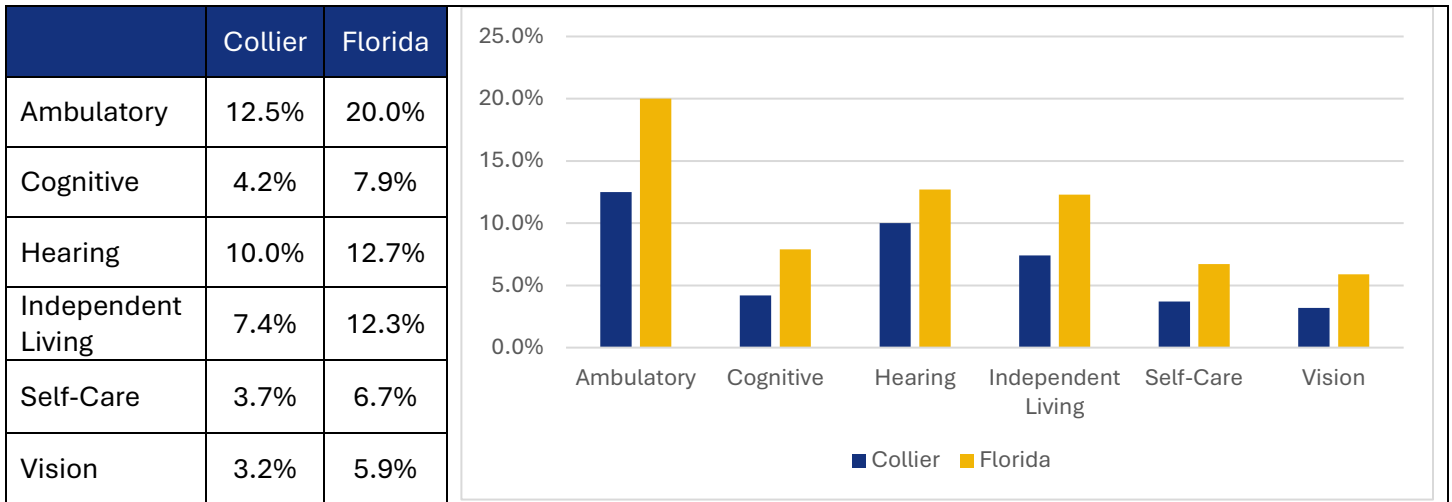
Exhibit HC33: Age-Adjusted Deaths from Alzheimer's Disease by Sex, Rate per 100,000 Population, Collier County, 2019-2023



2025 Collier County Community Health Assessment: Health Conditions

22.3 percent of the residents of Collier County who are over the age of 65 have a disability; this compares to a state average of 31.8 percent. A higher percentage of females aged 65 or older in Collier County have a disability when compared to males. The most common disabilities among those over 65 in Collier County are ambulatory and hearing.

Exhibit HC34: Disability Status, Percent of Population Aged 65 and Over, Collier County and Florida, 2022



Source: United States Bureau of the Census, American Community Survey, 5-year estimates



Source: Photo courtesy of the Health Planning Council of Southwest Florida, Inc. David Lawrence Center location in Immokalee, FL

Behavioral Health

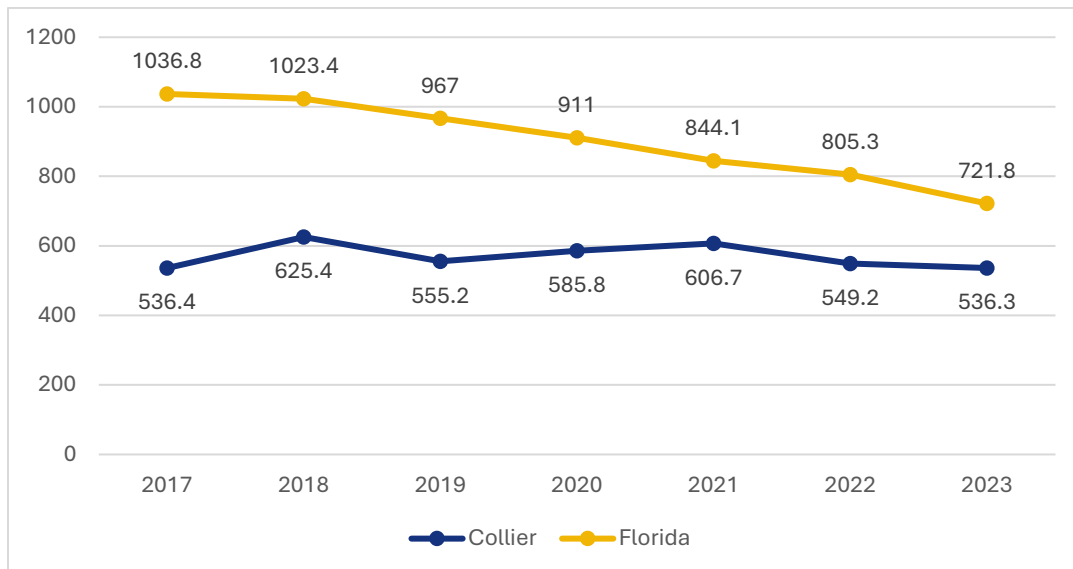
The Florida Mental Health Act of 1971 (commonly known as the “Baker Act”) is a statute allowing for the involuntary examination of an individual. It was initially enacted, at least in part, because of widespread instances of elder abuse in which one or more family members would have another family member committed to gain control over their estate before their death. Once committed, it was difficult for many other patients to obtain representation, and they became warehoused until their death. The Baker Act allows for involuntary examination (what some call emergency or involuntary commitment). It can be initiated by judges, law enforcement officials, physicians, or mental health professionals. There must be evidence that the person has a mental illness (as defined in the Baker Act) and is a harm to self, harm to others, or self-neglectful (as defined in the Baker Act). Examinations may last up to 72 hours and occur in over 100 facilities statewide.

There are many possible outcomes following the examination of the patient. This includes the release of the individual to the community (or other community placement), a petition for involuntary inpatient placement (what some call civil commitment), involuntary outpatient placement (what some call outpatient commitment or assisted treatment orders), or voluntary treatment (if the person is competent to consent to voluntary treatment and consents to voluntary treatment).

According to the Florida Baker Act Annual Report Fiscal Year 2023/2024, Collier County residents who received an involuntary examination were either seen at the David Lawrence Mental Health Center (75.21%) and/or Park Royal Hospital (15.59%).

From 2017 to 2023, fewer residents of Collier County were given involuntary examination based on the Baker Act than the state average.

Exhibit HC35: Baker Act Involuntary Examinations, Rate per 100,000 Population, Collier County and Florida, 2017-2023



Source: Florida Department of Children and Families

2025 Collier County Community Health Assessment: Health Conditions

The largest percentage of involuntary examinations under the Baker Act involves residents aged 25 to 64. For fiscal year 2023-24, there was a decrease in the percentage of examinations that involved those under 18.

Exhibit HC36: Involuntary Examinations: Residents of Collier County for 5 Years, 2019-2024

Fiscal year	All ages	Percent of Total			
		<18	18-24	25-64	65+
2019-2020	1,987	24.9%	12.0%	55.4%	7.2%
2020-2021	2,248	31.8%	12.8%	47.6%	6.2%
2021-2022	2,331	34.4%	11.4%	48.4%	5.2%
2022-2023	2,093	30.5%	11.6%	49.2%	7.9%
2023-2024	2,130	22.2%	13.1%	54.4%	8.3%

Source: Baker Act Reporting Center FY 2023/2024 Annual Report

During the 2023-24 fiscal year, 65.9 percent of involuntary examinations were initiated by law enforcement, 32.6 percent were initiated by a health professional, and 1.6 percent were initiated through an ex parte order. According to the Baker Annual Report, Physicians (who are not Psychiatrists) (38.47%) were the most common health professionals to initiate involuntary examinations, followed by Mental Health Counselors (22.91%), Clinical Social Workers (14.70%), Psychiatric Nurses (6.77%), Physician Assistants (6.20%), Marriage and Family Therapists (6.05%), Psychiatrists (4.47%), and Clinical Psychologists (<1%).

Exhibit HC37: Involuntary Examinations for Collier County Residents Percent of Total by Initiator Type, 2019-2024

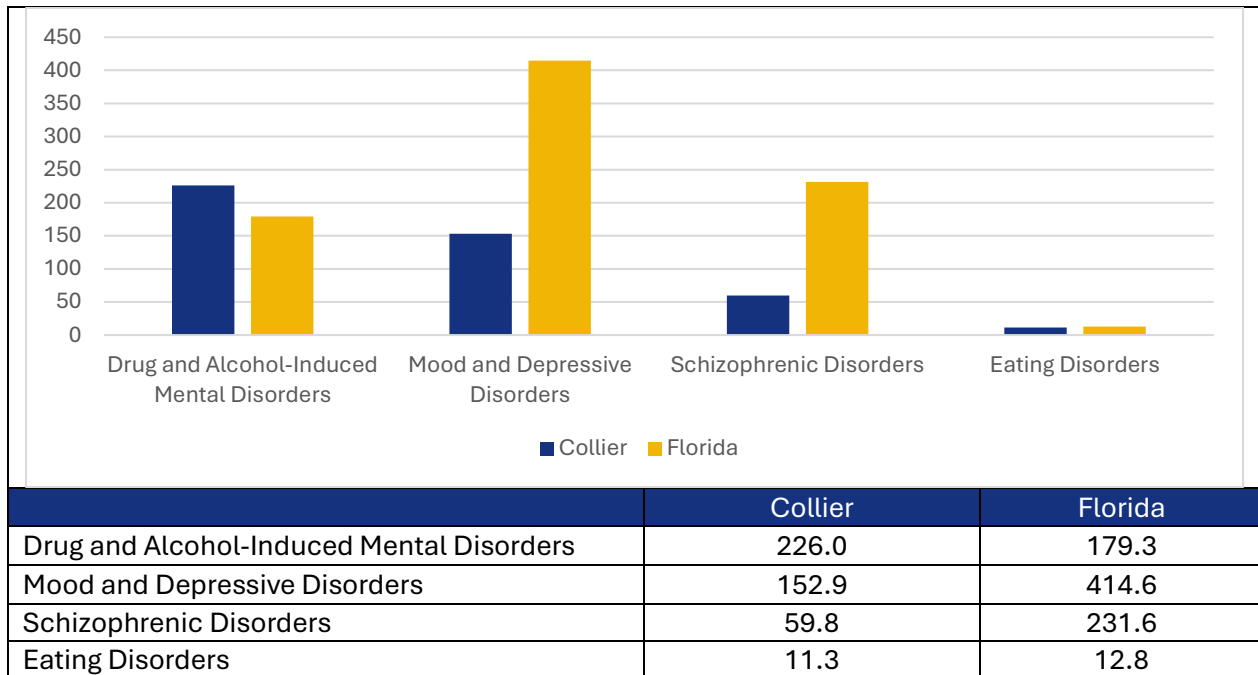
Fiscal year	Law Enforcement	Health Professional	Ex-Parte
2019-2020	64.1%	34.8%	1.1%
2020-2021	63.5%	35.4%	1.1%
2021-2022	60.9%	38.1%	1.0%
2022-2023	63.0%	35.9%	1.1%
2023-2024	65.9%	32.6%	1.6%

Source: Baker Act Reporting Center FY 2023/2024 Annual Report

In Collier County in 2023, the most common hospitalizations for mental and behavioral health disorders were for drug and alcohol-induced mental disorders, while eating disorders had the smallest percentage. When compared to the Florida average, Collier County experienced a higher rate of hospitalizations for drug and alcohol-induced mental disorders in 2023 (226 Collier vs. 179.3 Florida) and a significantly lower rate for mood and depressive disorders (152.9 Collier vs. 414.6 Florida) and for schizophrenic disorders (59.8 Collier vs. 231.6 Florida). It should be noted that the availability of services can greatly impact the number of hospitalizations.

2025 Collier County Community Health Assessment: Health Conditions

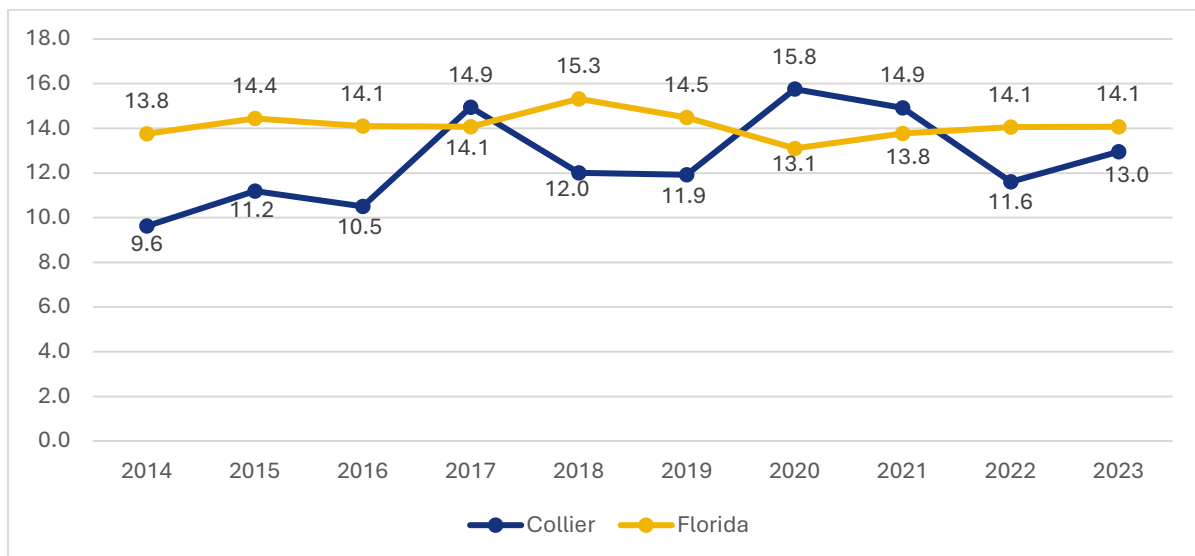
Exhibit HC38: Hospitalizations for Mental and Behavioral Health Disorders, All Ages, Rate per 100,000 Population, Collier County and Florida, 2023



Source: Florida Agency for Health Care Administration (AHCA)

Suicide is a significant preventable public health problem in the United States. Several risk factors, including a history of depression or other mental illnesses, a family history of suicide, and previous suicide attempts, can increase the likelihood of someone attempting or dying from suicide. Over the past decade, the suicide rates in Collier County have not been consistent, but they have risen overall.

Exhibit HC39: Age-Adjusted Suicide Deaths, Rate per 100,000 Population, Collier County and Florida, 2014-2023

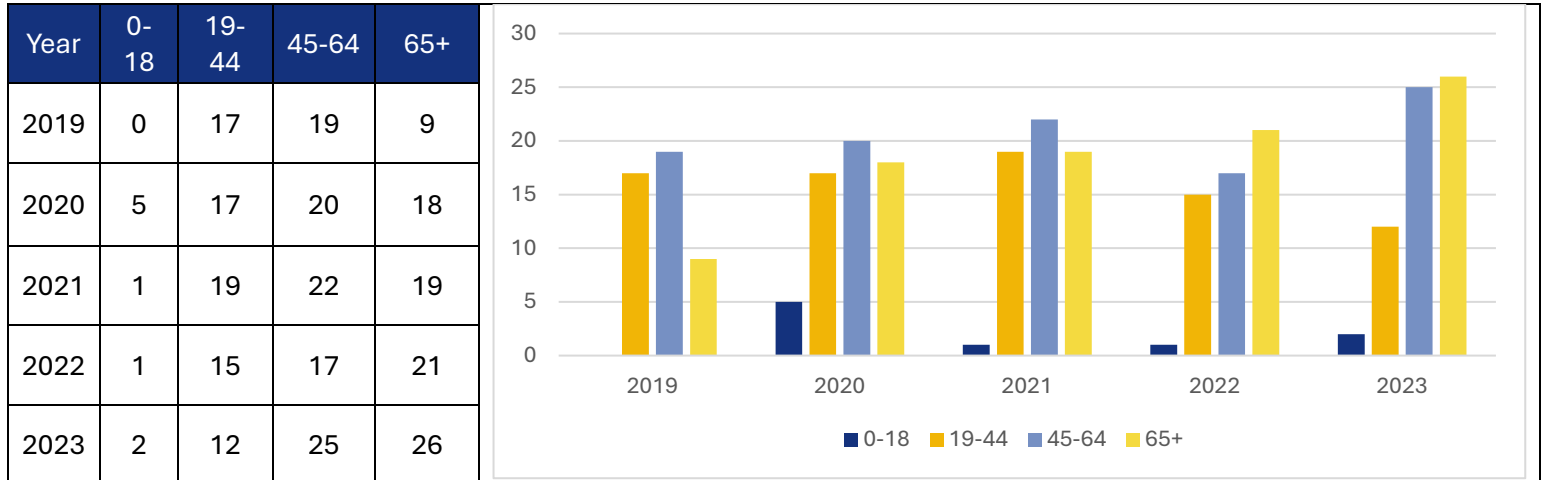


Source: Florida Department of Health, Bureau of Vital Statistics

2025 Collier County Community Health Assessment: Health Conditions

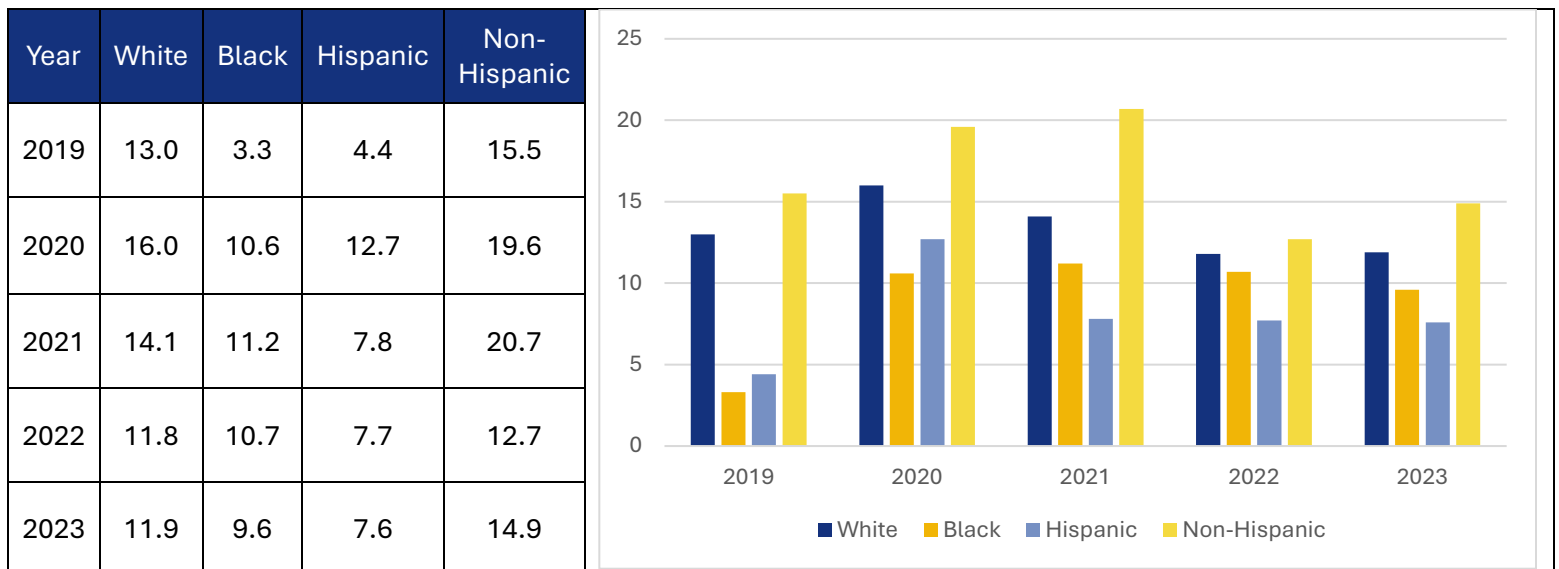
In 2022 and 2023, the largest number of suicides was among those over the age of 65. The second most common age range for that period was 45-64.

Exhibit HC40: Number of Suicide Deaths by Age, Collier County, 2019-2023



Between 2019 and 2023, in Collier County, non-Hispanic and white people had a higher suicide death rate when compared to other races/ethnicities.

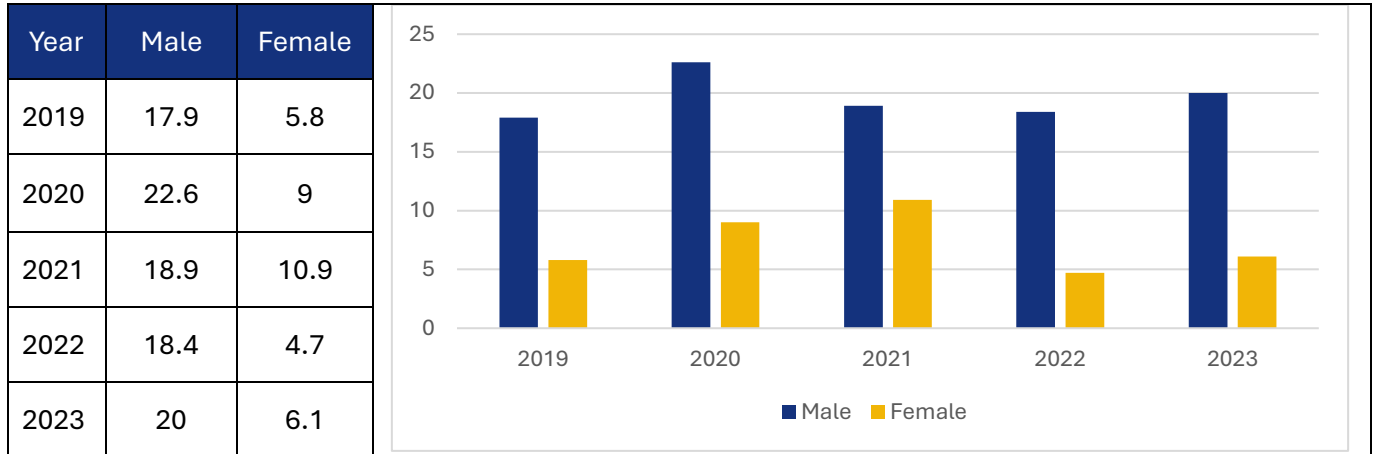
Exhibit HC41: Age-Adjusted Suicide Deaths by Race and Ethnicity, Rate per 100,000 Population, Collier County, 2019-2023



2025 Collier County Community Health Assessment: Health Conditions

When compared to females, males have had a significantly higher rate of suicide deaths in Collier County.

Exhibit HC42: Age-Adjusted Suicide Deaths by Sex, Rate per 100,000 Population, Collier County, 2019-2023



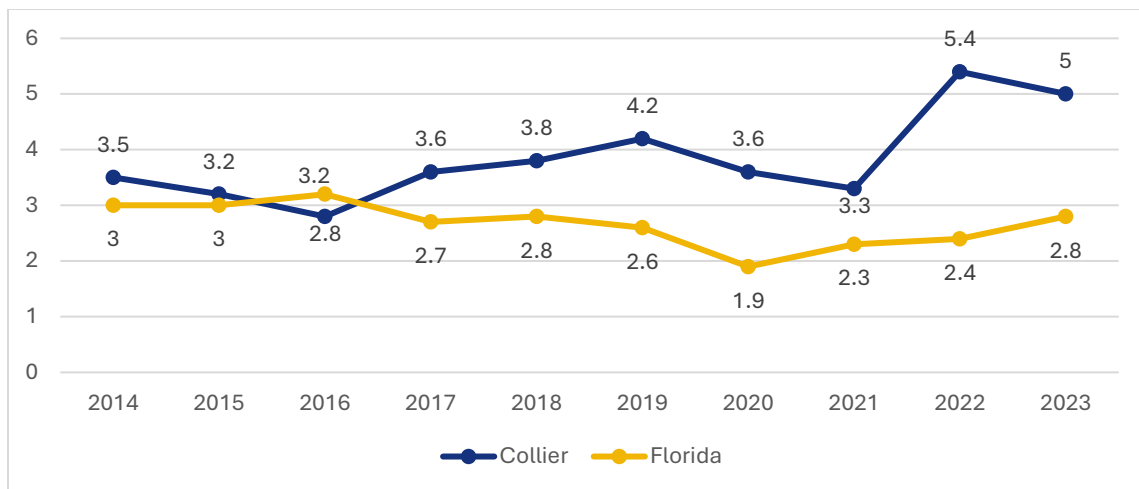
Source: Florida Department of Health, Bureau of Vital Statistics

Tuberculosis

According to the Centers for Disease Control and Prevention, Tuberculosis (TB) is caused by a bacterium called *Mycobacterium tuberculosis*. TB is an infectious disease that attacks the lungs but can also attack any part of the body. TB is an airborne infectious disease, which means the disease spreads in the air when a person infected with TB coughs, speaks, or sings.

In the past 10 years, 2022 had the highest rate of Tuberculosis cases in Collier County, and 2023 had the second highest rate. Compared to Florida, Collier County has a higher rate of TB cases except in 2016.

Exhibit HC43: Tuberculosis Cases, Rate per 100,000 Population, Collier County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Epidemiology

Sexually Transmitted Diseases (STDs)

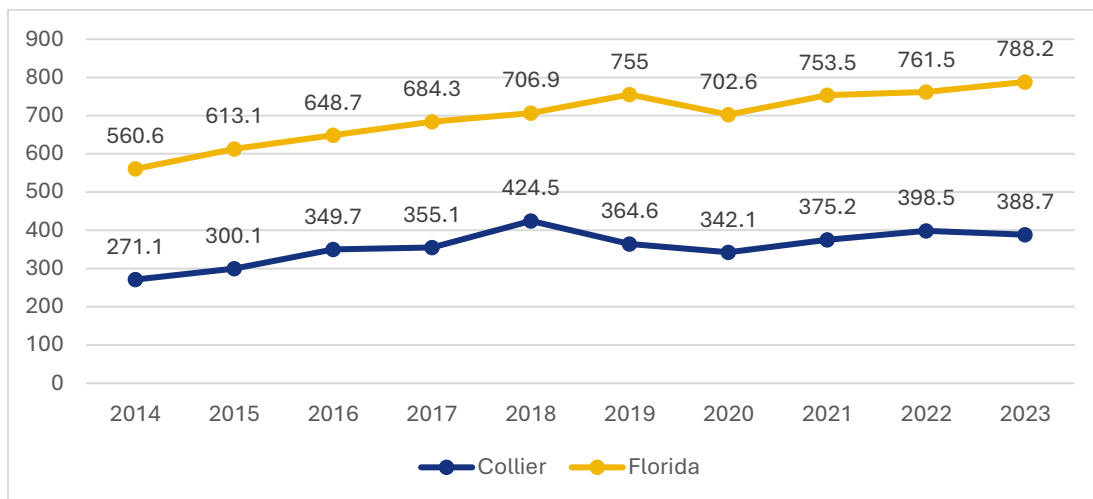
Chlamydia infections in women are usually asymptomatic and can result in pelvic inflammatory disease (PID), which is a significant cause of infertility, ectopic pregnancy, and chronic pelvic pain. As is the case with other inflammatory STIs, chlamydia infections can facilitate the transmission of human immunodeficiency virus (HIV). Pregnant women infected with chlamydia can also pass the infection to their infants during delivery, potentially resulting in neonatal ophthalmia and pneumonia. Due to the burden of disease and the risks associated with infections, the CDC recommends that all sexually active women younger than 25 years of age receive an annual chlamydia screening.

Gonorrhea is caused by *Neisseria gonorrhea*, a bacterium that can grow and multiply quickly in warm, moist areas of the reproductive tract, including the cervix, uterus, and fallopian tubes in women, and in the urethra in women and men. Gonorrhea can also grow in the mouth, throat, eyes, and anus.

Syphilis is a genital ulcerative disease that causes significant complications if left untreated and facilitates the transmission of HIV infection. Syphilis is divided into four stages: primary, secondary, latent, and tertiary. Each stage has its own signs and symptoms. Untreated early syphilis in pregnant women results in perinatal mortality in as much as 40 percent of cases, and pregnancy may lead to infection of the fetus in 80 percent of cases. Syphilis is passed from person to person through direct contact with a syphilis sore. Sores occur on the external genitalia, vagina, and anus or in the rectum. These sores can also occur on the lips and in the mouth. Even after completing syphilis treatment, reinfection is possible.

Bacterial STDs are comprised of three reportable STDs: chlamydia, gonorrhea, and syphilis. Collier County has had a consistently lower rate of bacterial STDs when compared to the state between 2014 and 2023. However, there has been an increase in the rate in Collier County during that period.

Exhibit HC44: Bacterial Sexually Transmitted Diseases (STDs), Rate per 100,000 Population, Collier County and Florida, 2014-2023

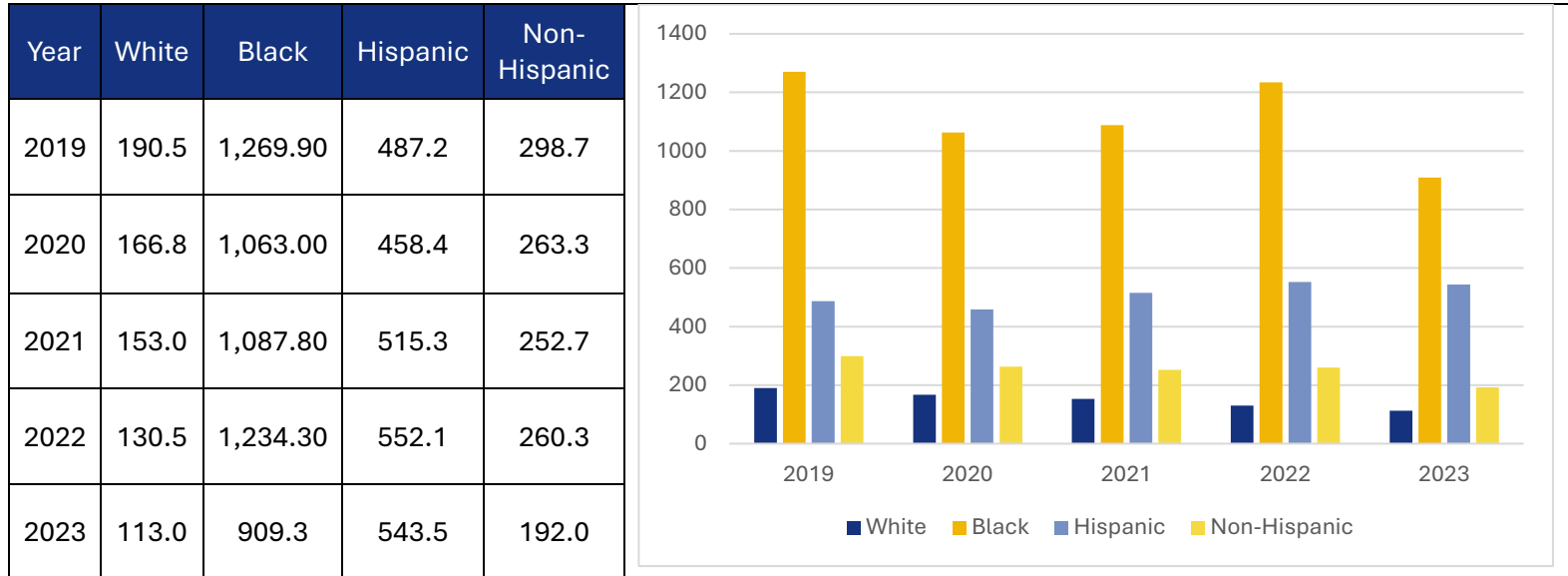


Source: Florida Department of Health, Bureau of Communicable Diseases

2025 Collier County Community Health Assessment: Health Conditions

Between 2019 and 2023, the black population had a significantly higher rate of bacterial STDs compared to the other racial and ethnic groups.

Exhibit HC45: Bacterial STDs by Race and Ethnicity, Rate per 100,000 Population, Collier County, 2019-2023



Source: Florida Department of Health, Bureau of Communicable Diseases

Chlamydia is the most common sexually transmitted infection (STI) in Collier County. When compared to the Florida average, Collier County's STI rates are considerably lower for chlamydia, gonorrhea, and syphilis.

Exhibit HC46: Sexually Transmitted Infections (STIs), 3-Year Rate per 100,000 Population, Collier County and Florida, 2021-2023

	# cases annual average	Collier 3-Year Rate per 100,000	Florida 3-Year Rate per 100,000
Chlamydia	1154.7	291.3	484.3
Gonorrhea	255.3	64.4	202.9
Syphilis, all stages	125.7	31.7	80.7

Source: Florida Department of Health, Bureau of Communicable Diseases

For Chlamydia and Gonorrhea, the largest proportion of the cases in Collier County were among those under the age of 30. For Syphilis, the percentages are more distributed among different age groups.

Exhibit HC47: STI Cases by Age and Sex, 3-Year Rolling, Collier County, 2021-2023

Age Group	Chlamydia			Gonorrhea			Syphilis		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
15-19	25.4%	18.5%	28.8%	18.7%	13.4%	27.9%	4.0%	3.6%	5.3%
20-24	35.1%	33.4%	35.9%	33.2%	29.9%	38.9%	12.9%	10.4%	20.0%
25-29	18.9%	21.5%	17.6%	19.2%	21.1%	16.1%	17.7%	15.8%	23.2%
30-34	9.8%	12.0%	8.7%	9.9%	11.5%	7.1%	17.4%	17.6%	16.8%
35-39	4.7%	5.2%	4.5%	6.6%	7.9%	4.3%	11.5%	12.6%	8.4%
40-44	2.5%	3.6%	2.0%	5.0%	6.9%	1.8%	8.0%	9.7%	3.2%
45-54	2.2%	3.7%	1.5%	4.1%	4.8%	2.9%	16.1%	16.5%	14.7%
55-64	1.0%	1.5%	0.8%	2.5%	3.5%	0.7%	8.6%	9.4%	6.3%
65+	0.3%	0.6%	0.2%	0.8%	1.0%	0.4%	3.8%	4.3%	2.1%
Total	3,435	1,137	2,297	759	479	280	373	278	95

Source: Florida Department of Health, Bureau of Communicable Diseases

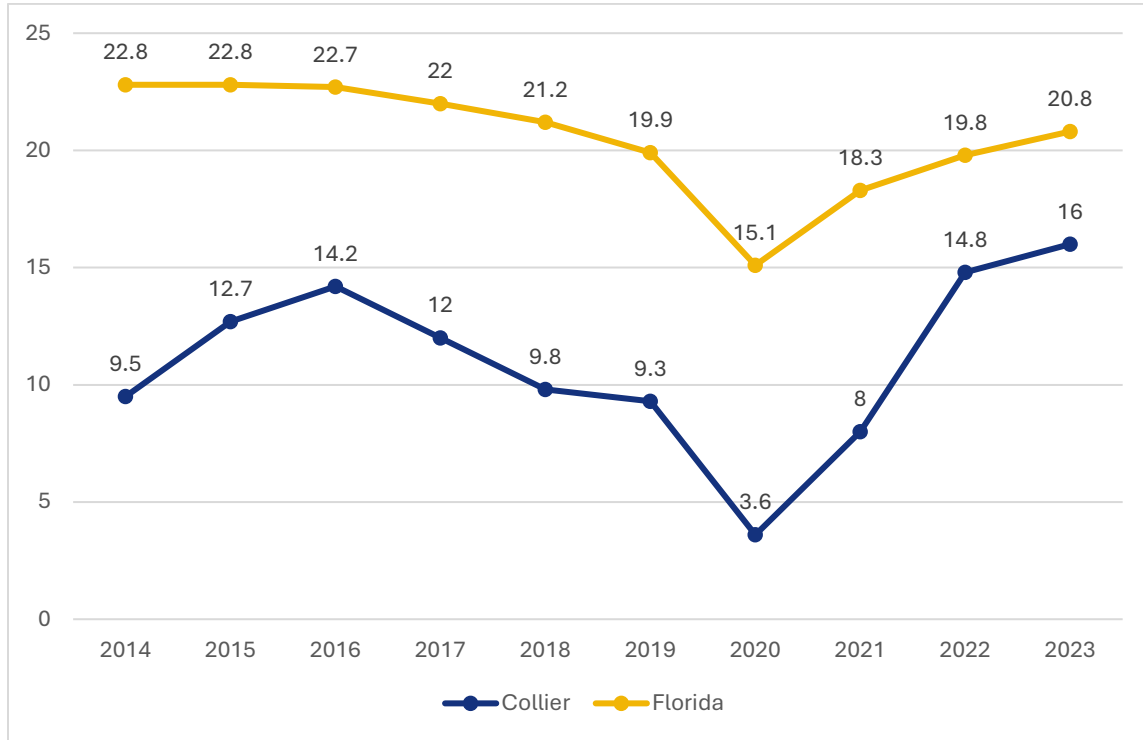
HIV Infection

Over thirty years have passed since June 5, 1981, when the Centers for Disease Control (CDC) published its first report of cases of *Pneumocystis carinii* pneumonia (PCP) being diagnosed among previously healthy, young, gay men in Los Angeles. This is the syndrome that would later become known as AIDS. The CDC published its first surveillance case definition for AIDS in September 1982. Soon after this disease was recognized as a distinct syndrome, Florida began to collect voluntary AIDS surveillance reports. In 1983, the State of Florida Health Officer designated AIDS as a reportable disease, and a formal AIDS surveillance program was instituted in the state. Mandatory reporting of AIDS was incorporated into the Florida Statutes (s.384, F.S.) in 1986, and the Florida Administrative Code (64D, F.A.C.) directed that all AIDS cases, as defined by the CDC, be reported to the local county health department by physicians who diagnose or treat AIDS. In 1993, the Centers for Disease Control published its first significant revision of the AIDS case definition. This change added three new AIDS-indicator diseases and allowed for HIV positive individuals with severely depressed immune systems (those with an absolute CD4 count <200, or <14 percent) to meet the AIDS case definition. This case definition revision went into effect retroactively and resulted in a substantial increase in the number of reported AIDS cases in Florida. The State of Florida passed legislation that became effective July 1, 1997, which authorized the reporting of newly diagnosed cases of HIV infection by name (i.e., individuals who tested HIV+, but did not meet the AIDS case definition). This legislation, however, did not allow for the retroactive reporting of previously diagnosed HIV+ individuals. The first case of AIDS in Collier County was reported in 1982.

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The rates of HIV diagnoses in Collier County have increased from 2014 to 2023. There was a sharp decrease in 2020, likely due to a reduction in testing during that period. The state rates showed the same dip in 2020 but have only returned to the previous rates, while Collier has increased. The rate for Collier County has remained lower than the state rate during the entire period.

Exhibit HC48: HIV Diagnoses, Rate per 100,000 Population, Collier County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Communicable Diseases

Heterosexual contact is the most common mode of exposure for HIV diagnosis in Collier County for 2021-23, this is a change from previous years when Male-to-Male Sexual Contact was the most common.

Exhibit HC49: Modes of Exposure for HIV Diagnoses, Collier County, 2021-2023

Mode of Exposure	Number	Percent of Total
Heterosexual Contact	83	54.2%
Male-to-Male Sexual Contact (MMSC)	60	39.2%
Injection Drug Use (IDU)	9	5.9%
MMSC/IDU	1	0.7%

Source: Florida Department of Health, Bureau of Communicable Diseases

2025 Collier County Community Health Assessment: Health Conditions

In Collier County, the 30–39 age group had the highest number of reported HIV cases, accounting for almost 29 percent of the total reported cases, when compared to the other age groups. There were only three reported cases of HIV in children under the age of 19 in Collier County.

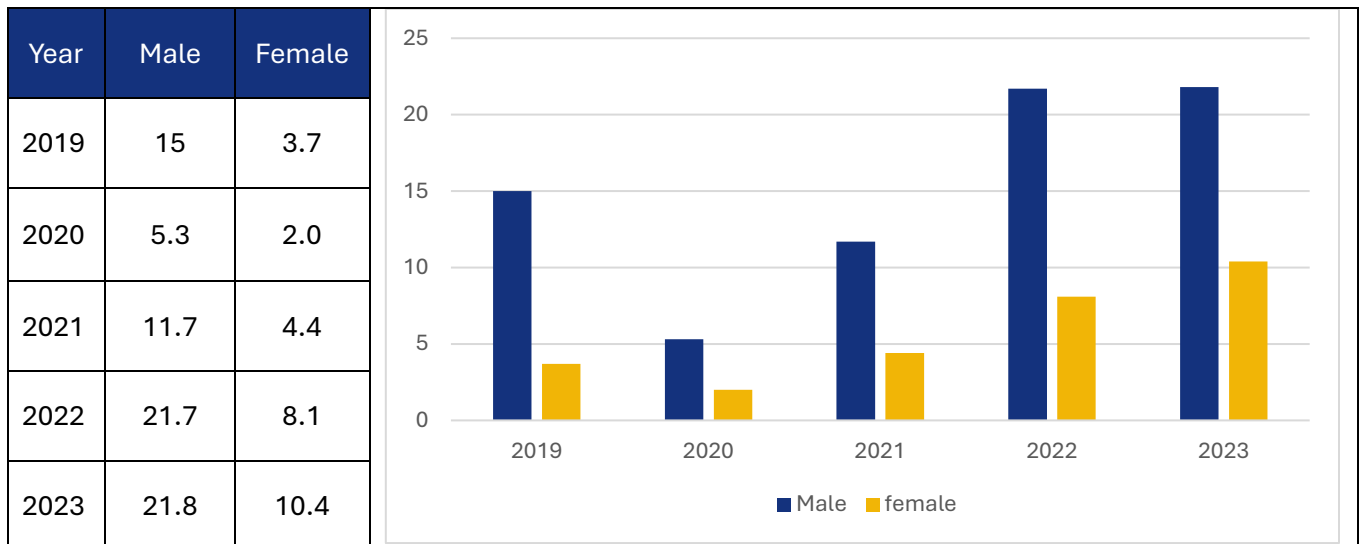
Exhibit HC50: HIV Diagnoses by Age, 3-Year Rolling, Collier County, 2021-2023

Age (in years) at Initial Florida Report	Number of Reported Cases	Percent of Total
0-12		
13-19	3	1.9%
20-24	15	9.7%
25-29	25	16.2%
30-39	44	28.6%
40-49	38	24.7%
50-59	16	10.4%
60+	13	8.4%

Source: Florida Department of Health, Bureau of Communicable Diseases

When compared to females, more males were being diagnosed with HIV. From 2019 to 2023 in Collier County, the rate among females has been increasing; the rate for males has also increased.

Exhibit HC51: HIV Diagnoses by Sex, 3-Year Rolling Rate per 100,000 Population, Collier County, 2019-2023

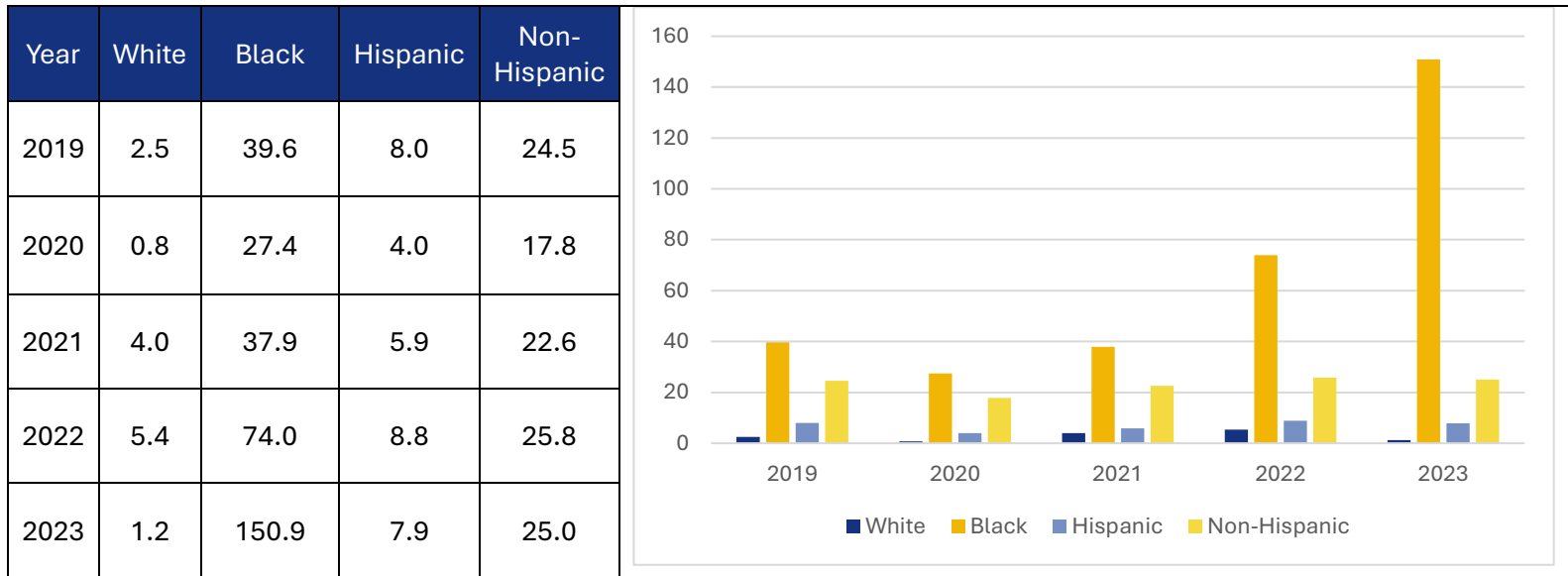


Source: Florida Department of Health, Bureau of Communicable Diseases

2025 Collier County Community Health Assessment: Health Conditions

In Collier County between 2019 and 2023, the black population had the highest rate of HIV diagnoses compared to the other racial and ethnic groups. The rate increased significantly for 2022-2023.

Exhibit HC52: HIV Diagnoses by Race and Ethnicity, 3-Year Rolling Rate per 100,000 Population, Collier County, 2021-2023



Source: Florida Department of Health, Bureau of Communicable Diseases



Source: Photo courtesy of the Health Planning Council of Southwest Florida

Federally Qualified Health Center (FQHC) Data



Source: Photos courtesy of Healthcare Network

A Federally Qualified Health Center (FQHC) is a community-based healthcare organization that receives funding from the Health Resources and Services Administration (HRSA) to provide comprehensive primary care services, including preventive care, to underserved populations, regardless of their ability to pay or insurance status. In Collier County, the only FQHC is Healthcare Network (HN). This section provides a snapshot of how HN clinics are meeting the Health Resources & Services Administration (HRSA) benchmarks for FQHCs, how HN clinics compare to regional benchmarks and State of Florida averages, and how data is changing over time. This section depicts local success and identifies benchmarks for implementing practice changes that could benefit the health of HN patients and the community it serves.

Clinic Locations and Unmet Needs

The map below shows the 14 HN locations within Collier County: four in Immokalee and ten in the Naples area. Administrative offices are located in Immokalee and Naples. HN offers behavioral health, children's care, dental care, family care, infusion care, optometry, pharmacy, primary care, addiction treatment, senior care, x-ray, blood draw, and women's care. HN operates multiple mobile units throughout the community to serve the ever-growing need for flexible, responsive care.

Exhibit 1: Map of FQHC locations in Collier County, Florida

LOCATIONS



NAPLES

- 1 12655 Collier Blvd., Naples, FL 34116 at Nichols Community Health Center
- 2 5450 YMCA Rd., #102, Naples, FL 34109 at YMCA of Collier County
- 3 6350 Davis Blvd., #1001, Naples FL, 34104
- 4 1845 Veterans Park Dr., Naples, FL 34109 at Veterans Park Health Center
- 5 2355 Stanford Ct., #701, Naples, FL 34112 at Friendship Health
- 6 1749 Heritage Trl., #801, Naples, FL 34112
- 7 1090 6th Ave N., Naples, FL 34102 at Cordero Pediatrics
- 8 9160 Galleria Ct, Naples, FL 34109

IMMOKALEE

- 9 1441 Heritage Blvd., Immokalee, FL 34142 at Florida State University College of Medicine
- 10 1454 Madison Ave. W., Immokalee, FL 34142 at Marion E. Fether Medical Center
- 11 508 North 9th St., #142, Immokalee, FL 34142 at iTech
- 12 125 Boston Ave., Immokalee, FL 34142

CORPORATE HEADQUARTERS
1454 Madison Ave. W., Immokalee, FL 34142

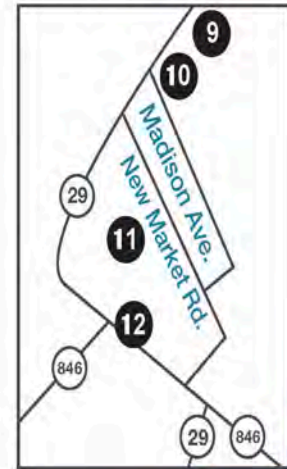


239.658.3000
HealthcareSWFL.org



- CHILDREN'S CARE
- CHILDREN'S DENTAL CARE
- CONVENIENT CARE
- FAMILY CARE
- FAMILY DENTAL CARE
- WOMEN'S CARE
- PHARMACY
- SPECIALTY CARE
- X-RAY & LAB
- CENTER FOR PSYCHOLOGY AND WELLNESS
- INFUSION CARE
- PRIMARY CARE ADDICTION TREATMENT
- OPTOMETRY

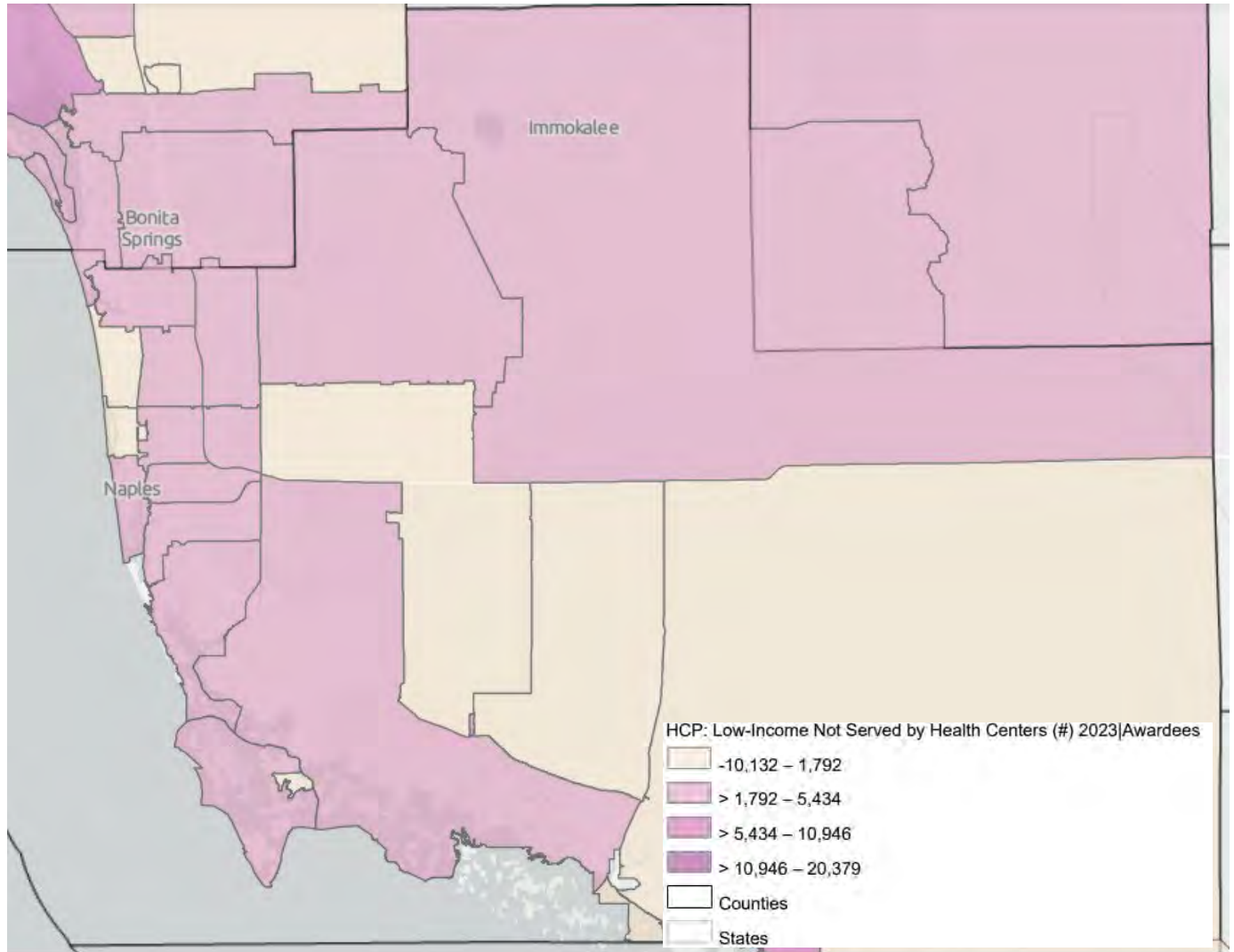
IMMOKALEE



Source: Healthcare Network

As a FQHC, Healthcare Network is committed to providing healthcare services to everyone regardless of their ability to pay or health insurance status. The map below displays the estimated number of low-income residents (those who are at or below 200% of the Federal Poverty Level) in the given Zip Code Tabulation Area (ZCTA) who any existing health center does not serve. There are an estimated 36,390 people whom a health center does not serve. HN is working strategically to expand its services and locations in response to the community's growing needs.

Exhibit 2: Map of low-income residents not served by a health center in Collier County, Florida



Source: Health Center Program GeoCare. Available <https://geocarenavigator.hrsa.gov/>. Accessed January 16, 2025

The most significant number of HN patients live in the 34142 zip code (Immokalee). HN serves over 14,000 people in Immokalee. HN Their second largest patient population is located in the 34116 zip code, covering the Golden Gate area, with 8,628 patients served. HN provided care to a total of 54,117 unique people during calendar year 2024 in Collier County.

Exhibit 3: Patient Origin by Zip Code, 2024

ZCTA	Location Name	HN Site	HN Total Patients (#)
34142	Immokalee	Community Medical Care Center, Marion E. Fether, FSU College of Medicine, iTech	14,266
34116	Golden Gate	Nicholos Community Health Center	8,628
34120	Naples		5,784
34104	Naples	Children's Care East, Dental Care East	3,362
34113	Naples		3,262
34117	Naples		2,912
34112	Naples	Friendship Health Center	3,020
34119	Naples		1,681
34109	North Naples	Veterans Park, North Naples Pediatric Center, Nicholos Pediatric	1,621
34114	Naples	School-based care	2,022
34105	Naples		941
34110	North Naples		630
34108	Naples	Family Care North,	471
34103	Naples		559
34102	Naples	Cordero Pediatrics	399
34145	Marco Island		355
34139	Everglades City		69
34138	Chokoloskee		29
34137	Copeland		36
34101	Naples		32
34140	Goodland		12

Source: Health Center Program GeoCare. Available <https://geocarenavigator.hrsa.gov/>. Accessed June 6, 2025

In the rest of this section, the data from HN is compared to six regional benchmarks. The benchmark data is from five FQHCs serving nearby geographic regions in Florida and one FQHC look-alike serving Lee County, Florida. The centers used in compiling the regional averages are abbreviated throughout the document as follows:

- Centerplace Health – SAR
- Collier Health Services (Healthcare Network) – HN
- Family Health Centers of Southwest Florida, Inc. – FHC
- Florida Community Health Center – Palm Beach
- Manatee County Rural Health Services - MCR
- Lee Memorial Health System, Look-alike – Lee

Age and Race/Ethnicity

Patients by Age

About 61 percent of patients served by HN are children under 18 years of age. This is significantly higher than the regional benchmarks and Florida's percentage of children, which has increased over the past five years.

Exhibit 4a: % Children (<18 years), 2023

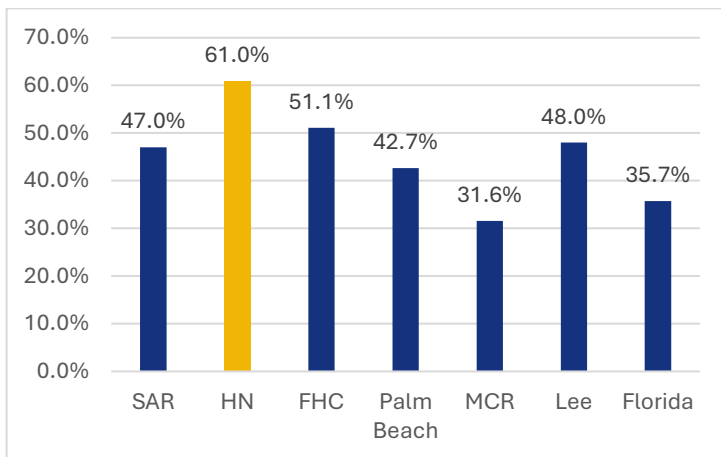
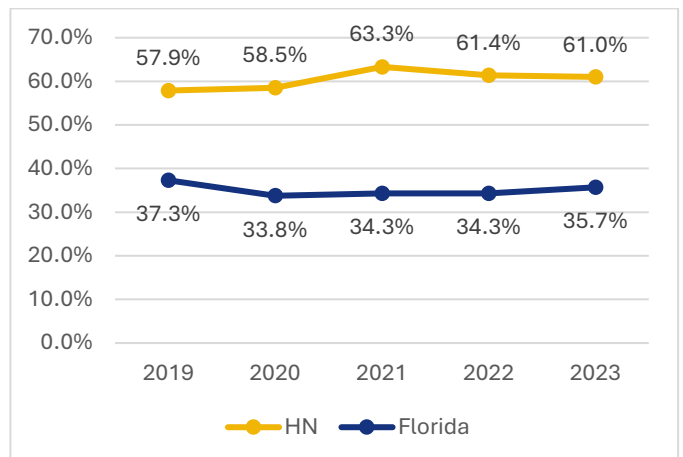


Exhibit 4b: % Children (<18 years), 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Approximately 34 percent of HN's clients are adults aged 18-64. Since 2021, there's been a slight increase in the percentage of adult patients.

Exhibit 5a: % Adults (18-64 years), 2023

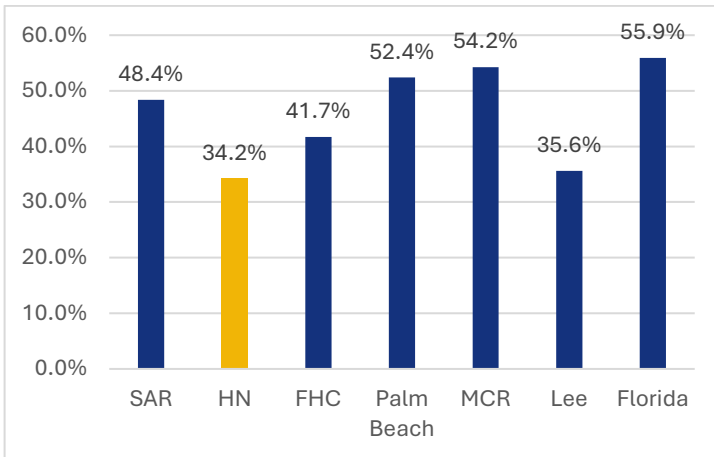
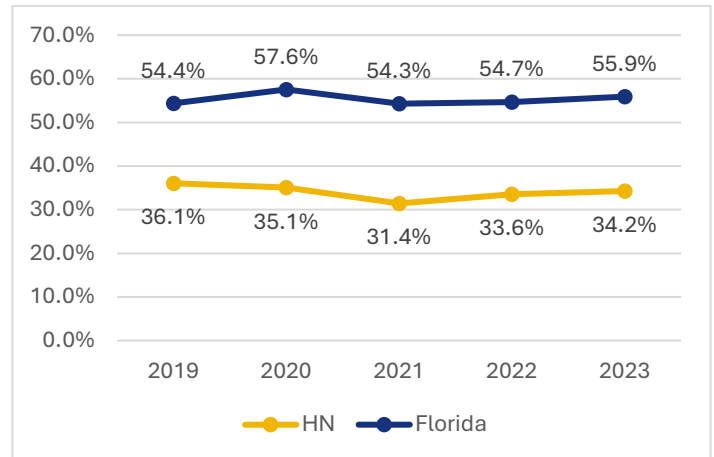


Exhibit 5b: % Adults (18-64 years), 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Approximately five percent of HN's patients are 65 or older. Since 2020, the percentage of older adult clients has decreased; it remains significantly lower than the state average.

Exhibit 6a: % Older Adults (age 65+), 2023

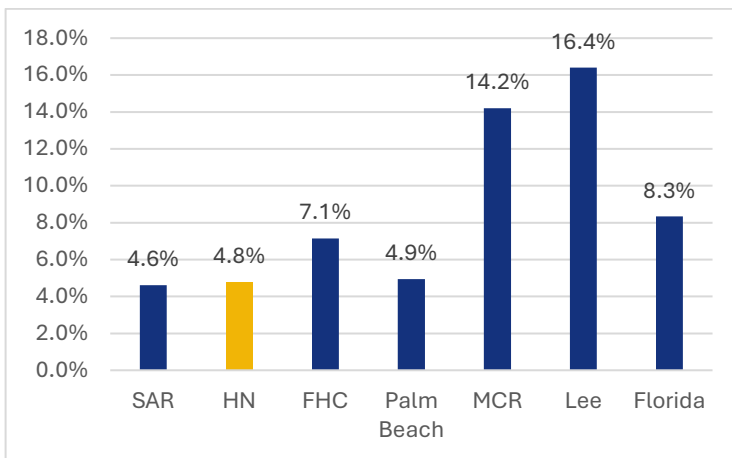
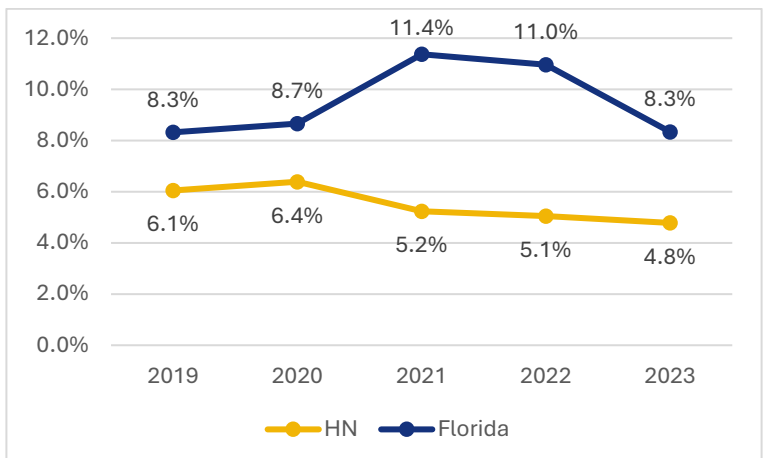


Exhibit 6b: % Older Adults (age 65+), 2019-2023

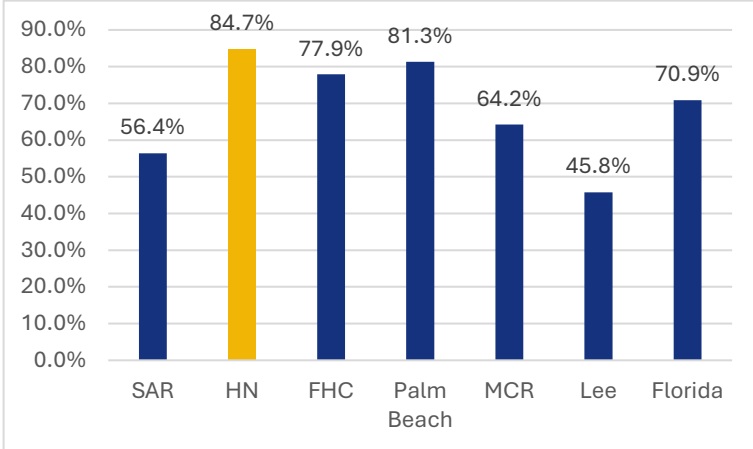


Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Patients by Race & Ethnicity

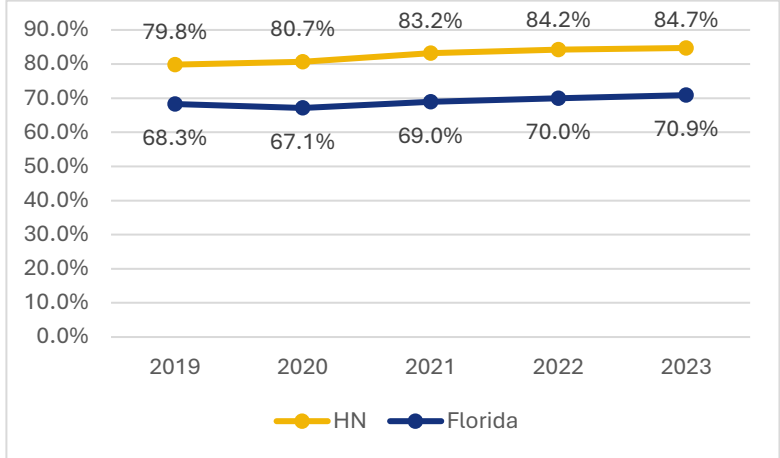
About 85 percent of patients served by HN identify as members of racial and/or ethnic minority groups, which is higher than all the regional benchmarks and Florida. Since 2019, the percentage of racial and/or ethnic minorities HN serves has increased.

Exhibit 7a: % Racial and/or Ethnic Minority Patients, 2023



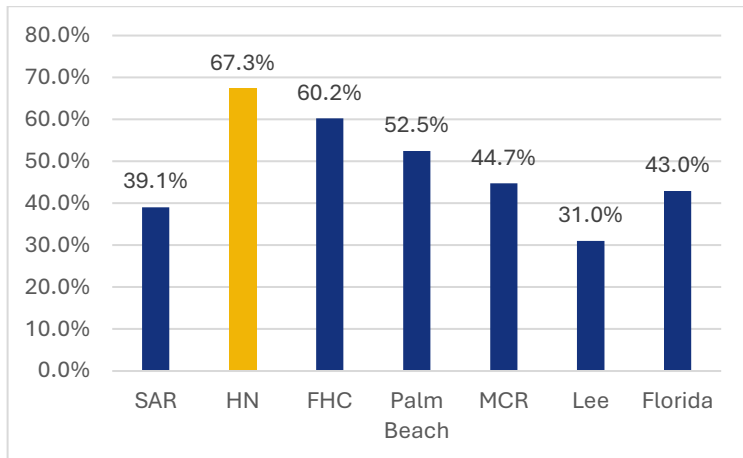
Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Exhibit 7b: % Racial and/or Ethnic Minority Patients, 2019-2023



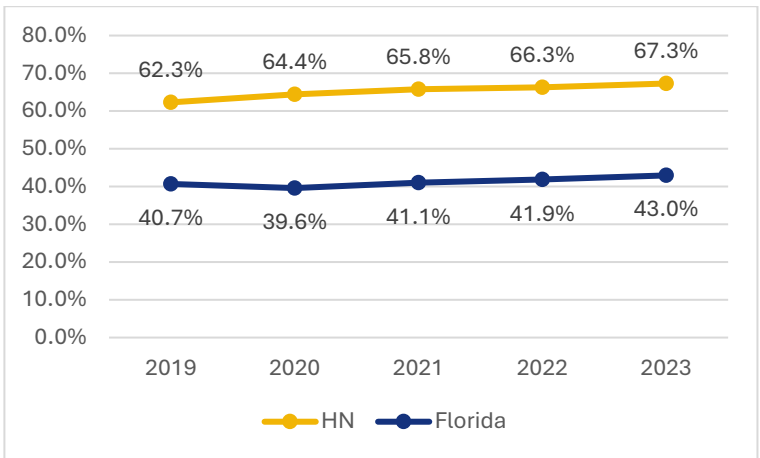
Sixty-seven percent of HN's patients identify as Hispanic/Latino(a), which is higher than all the regional benchmarks and Florida. The percentage of Hispanic/Latino(a) patients has increased since 2019.

Exhibit 8a: % Hispanic/Latino(a)s, 2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Exhibit 8b: % Hispanic/Latino(a)s, 2019-2023



Of the patients served by HN, 16 percent are white non-Hispanic. This is the lowest percentage among the regional benchmarks and Florida. The rate of white non-Hispanic patients has continued to decrease over the past five years.

Exhibit 9a: % White Non-Hispanic, 2023

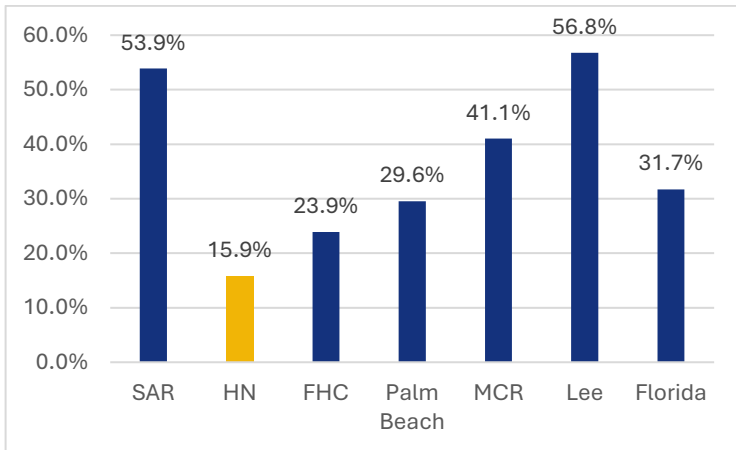
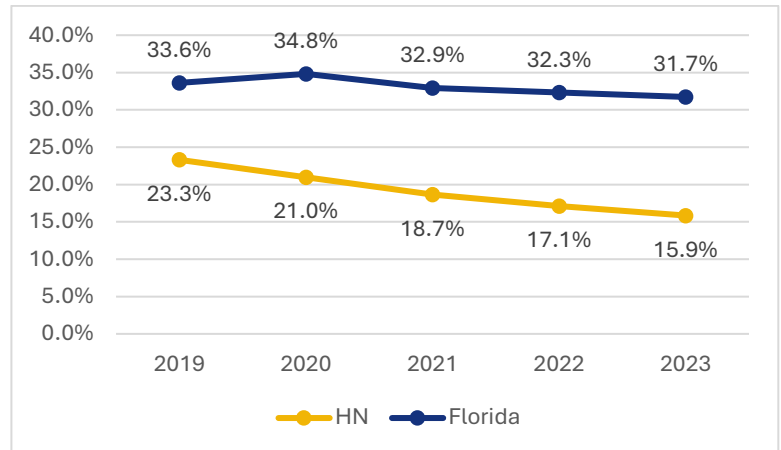


Exhibit 9b: % White Non-Hispanic, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Of the patients served by HN, approximately 17 percent are black/African American. This is lower than the state average, but the percentage has remained consistent.

Exhibit 10a: % Black/African American, 2023

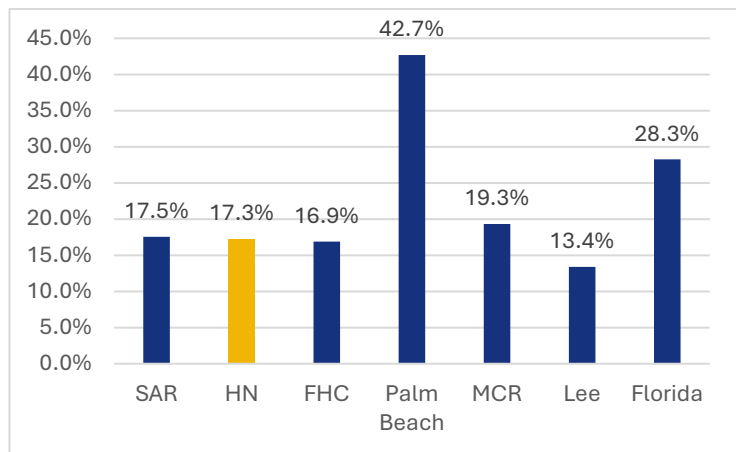
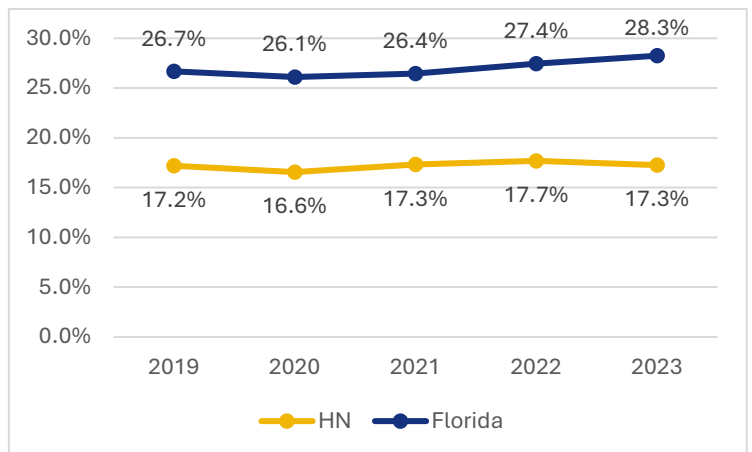


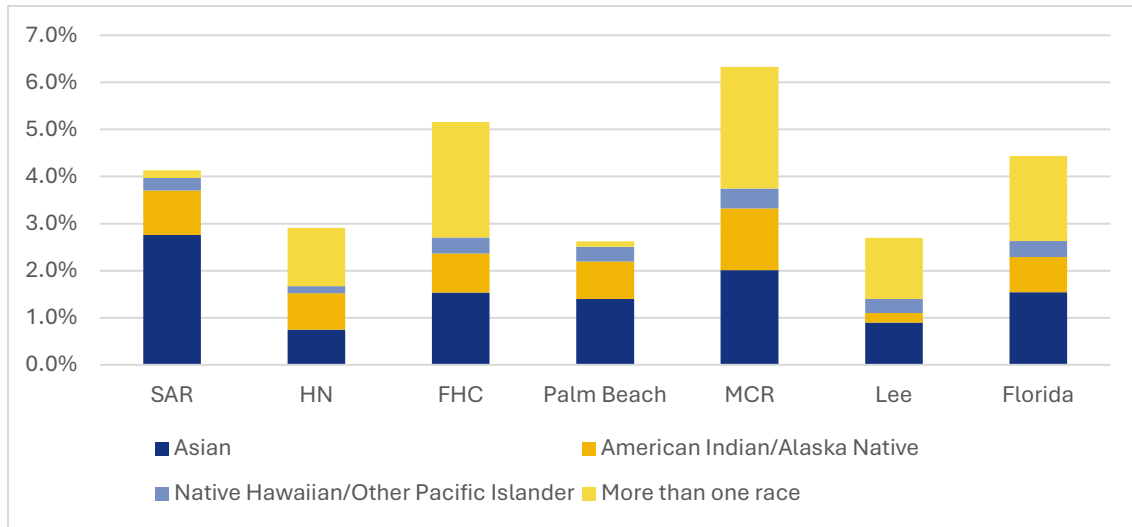
Exhibit 10b: % Black/African American, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

In addition to the races discussed, HN serves clients who identify as having more than one race, Asian, Native Hawaiian/other Pacific Islander, or American Indian/Alaska Native. Together, they make up 2.9 percent of HN's patient profile. More than one race is the largest group (1.2%).

Exhibit 11: Percentage of Patients' Race, 2023



Race	SAR	HN	FHC	Palm Beach	MCR	Lee	Florida
Asian	2.8%	0.7%	1.5%	1.4%	2.0%	0.9%	1.5%
American Indian/Alaska Native	0.9%	0.8%	0.8%	0.8%	1.3%	0.2%	0.8%
Native Hawaiian/Other Pacific Islander	0.3%	0.1%	0.3%	0.3%	0.4%	0.3%	0.3%
More than one race	0.2%	1.2%	2.5%	0.1%	2.6%	1.3%	1.8%

Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Language

Over half (53.7%) of HN's patients are best served in a language other than English. This is a significantly higher percentage than all of the regional benchmarks and Florida, and it has been increasing since 2019.

Exhibit 12a: % Best Served in a Language Other Than English, 2023

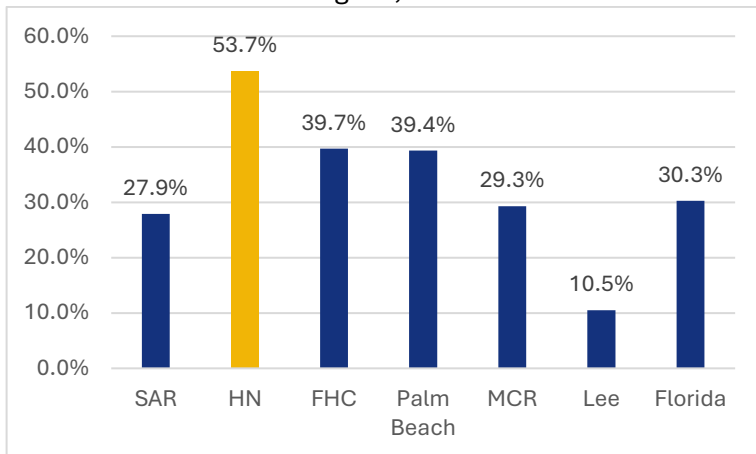
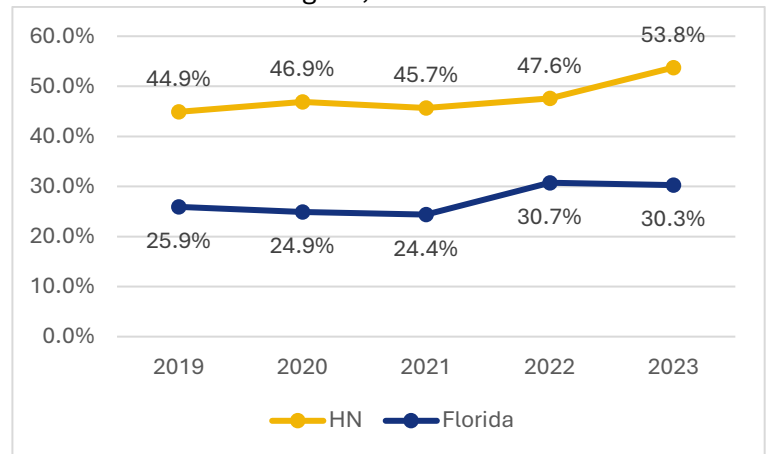


Exhibit 12b: % Best Served in a Language Other Than English, 2019-2023



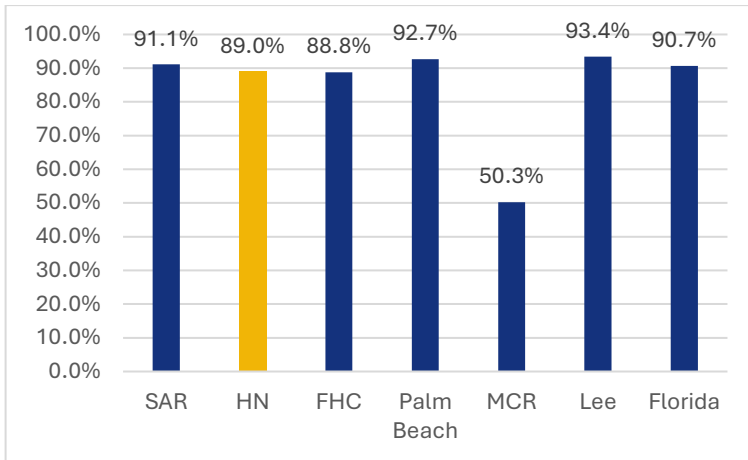
Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Patient Characteristics

Income Status

Nearly 90 percent of HN's patients are at or below 200 percent of the federal poverty guideline. This is slightly below the state average. The percentage of HN patients who are below 200% of the FPG increased a bit between 2022 and 2023 after a significant decrease between 2019 and 2022.

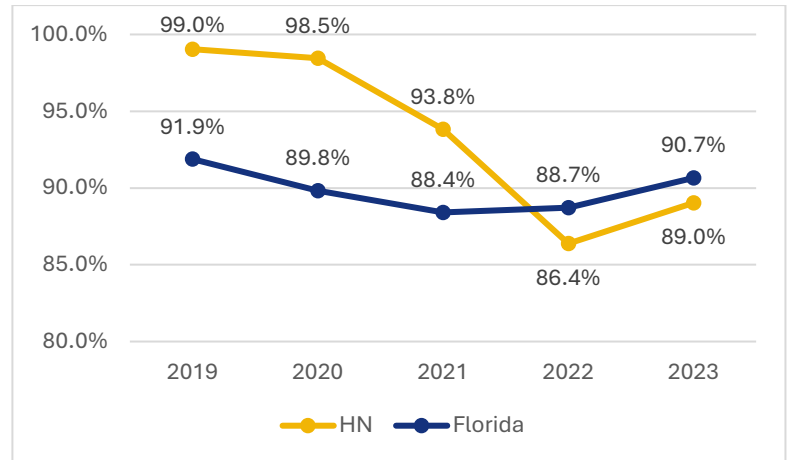
Exhibit 13a: % Patients at or Below 200% of FPG*, 2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

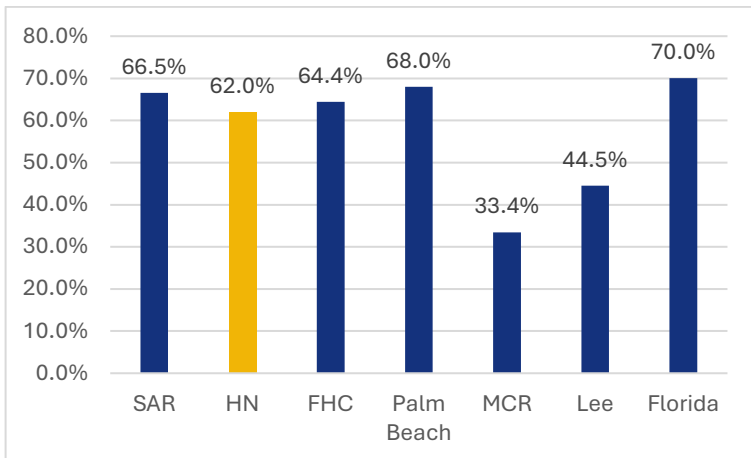
*FPG – Federal Poverty Guideline

Exhibit 13b: % Patients at or 200% Below FPG*, 2019-2023



Of the patients served by HN, 62 percent are at or below 100 percent of the federal poverty guideline. Over the past five years, the percentage of patients below this guideline has declined.

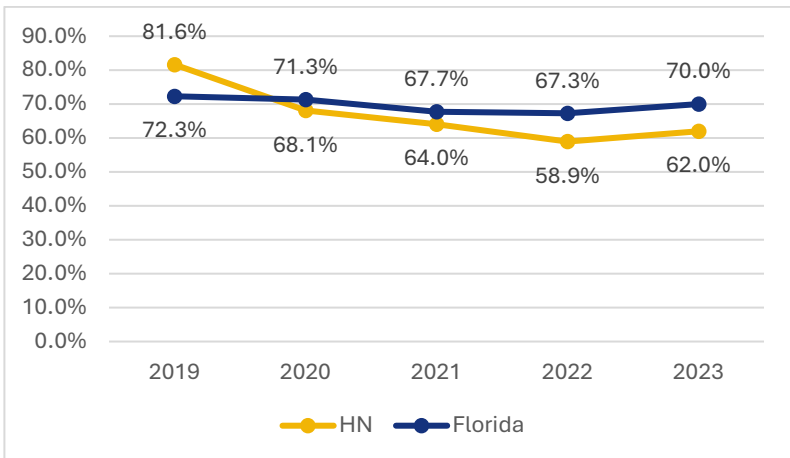
Exhibit 14a: % Patients at or Below 100% of FPG*, 2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

*FPG – Federal Poverty Guideline

Exhibit 14b: % Patients at or 100% Below FPG*, 2019-2023



Insurance Status

About 15 percent of the patients served by HN are uninsured. This is significantly lower than the state's average.

Exhibit 15a: % Non/Uninsured Patients, 2023

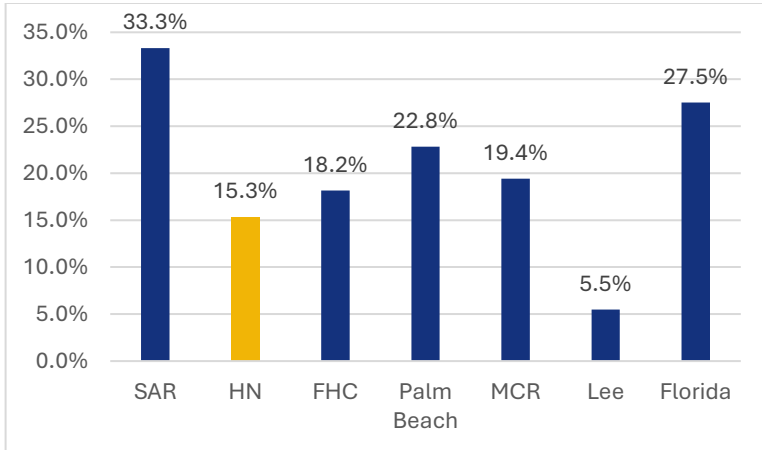
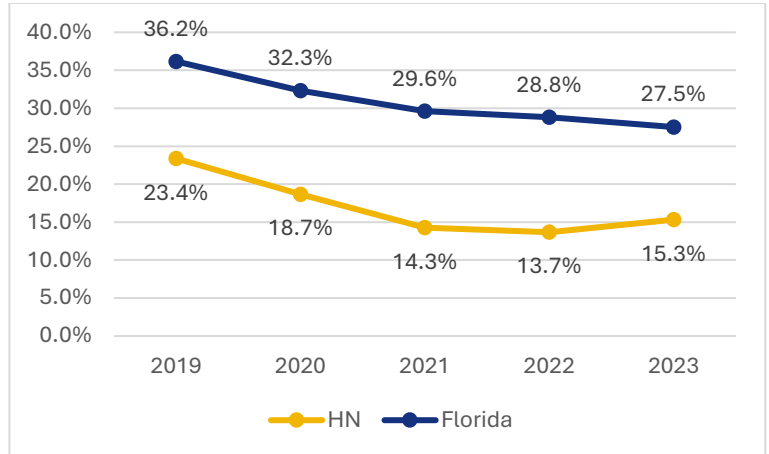


Exhibit 15b: % None/Uninsured Patients, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Nine percent of children served by HN are uninsured, which is significantly less than the state average. The percentage of uninsured children served by HN decreased overall from 2019 to 2023.

Exhibit 16a: % Non/Uninsured Children (<18 years), 2023

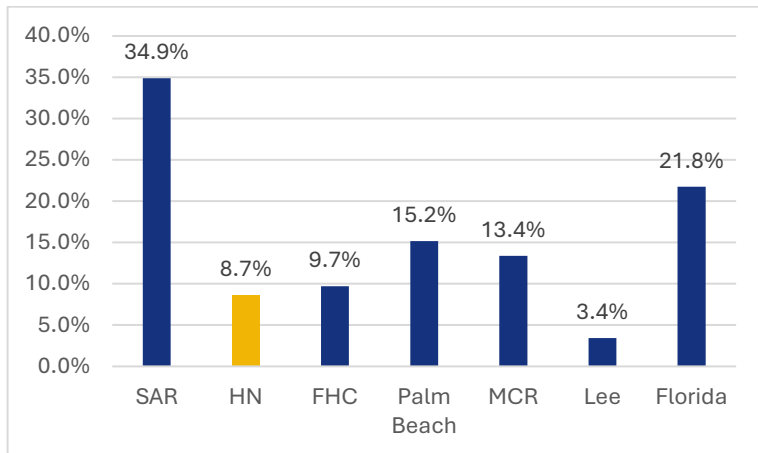
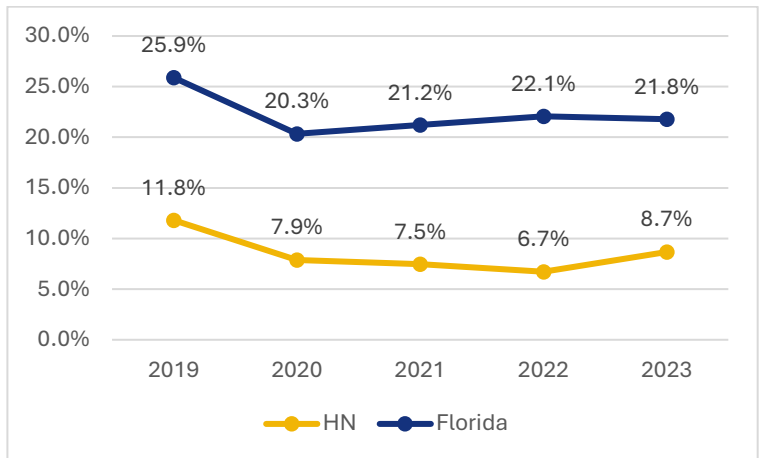


Exhibit 16b: % None/Uninsured Children (<18 years), 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Approximately 61 percent of patients served by HN received Medicaid or CHIP, higher than the regional benchmarks and Florida. The percentage of patients receiving Medicaid or CHIP increased from 2019 to 2022.

Exhibit 17a: % Medicaid/CHIP, 2023

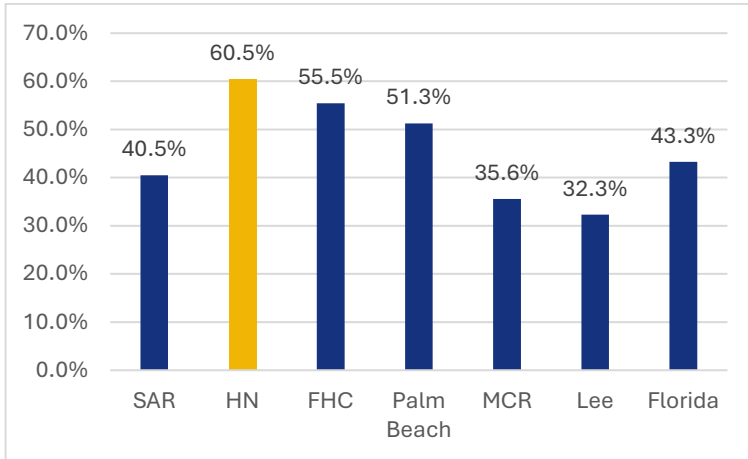
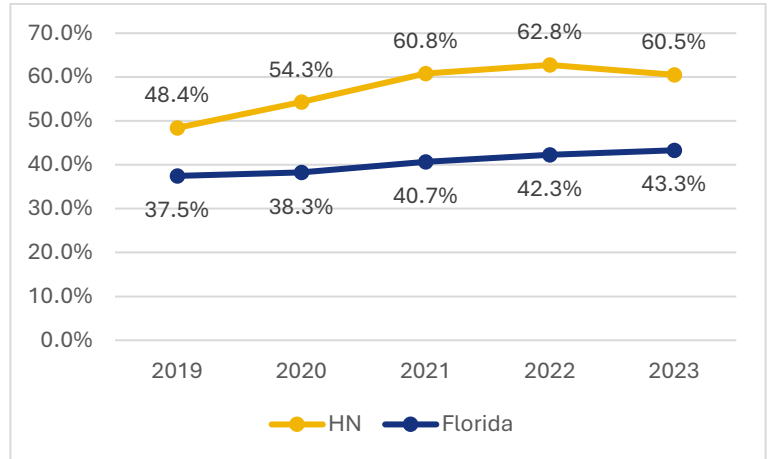


Exhibit 17b: % Medicaid/CHIP, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Almost four percent of patients served by HN have Medicare, but the number of Medicare patients has decreased since 2020.

Exhibit 18a: % Medicare, 2023

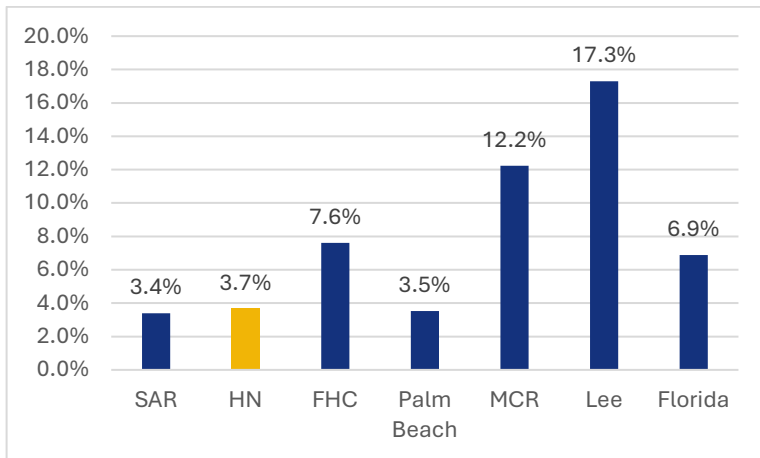
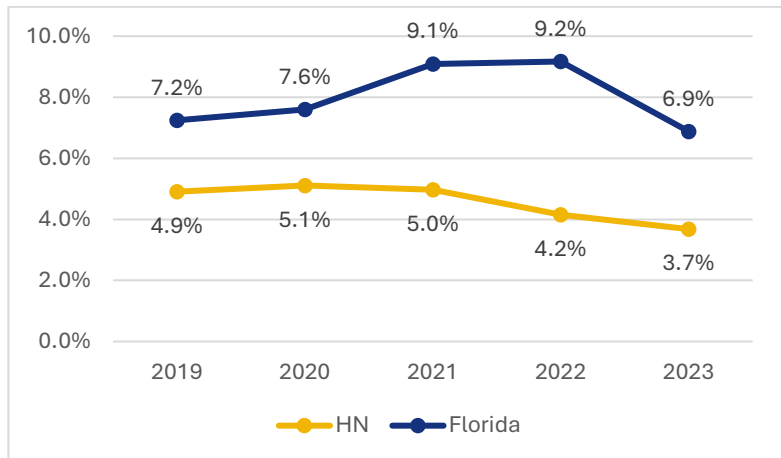


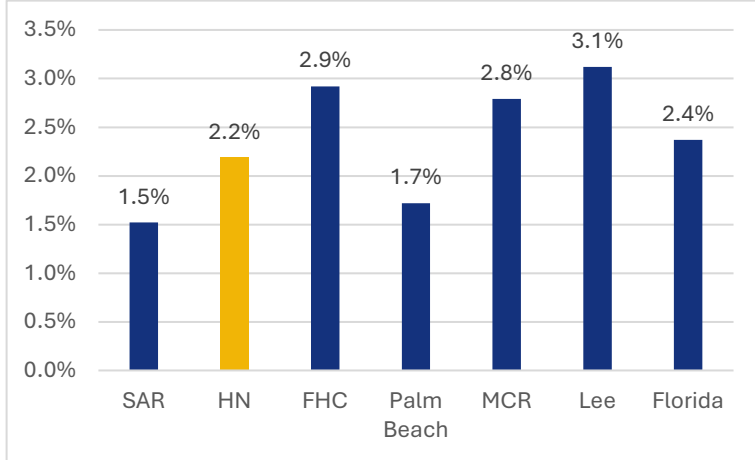
Exhibit 18b: % Medicare, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

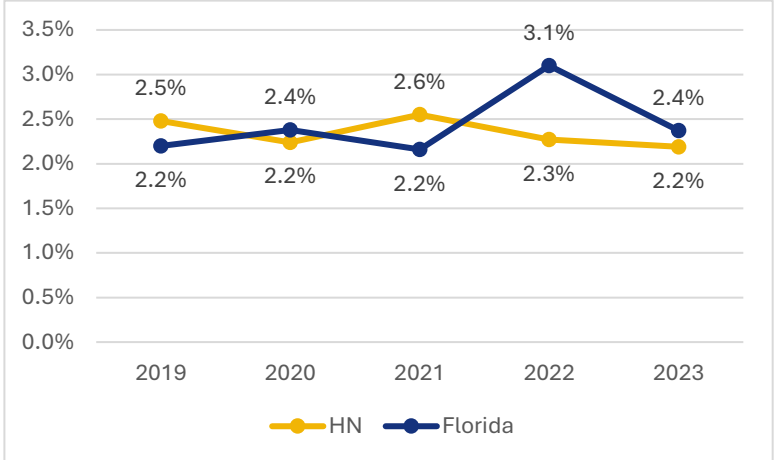
Two percent of the patients served by HN are dually eligible for Medicare and Medicaid. This percentage has been relatively steady over the past five years.

Exhibit 19a: % Dually Eligible (Medicare and Medicaid), 2023



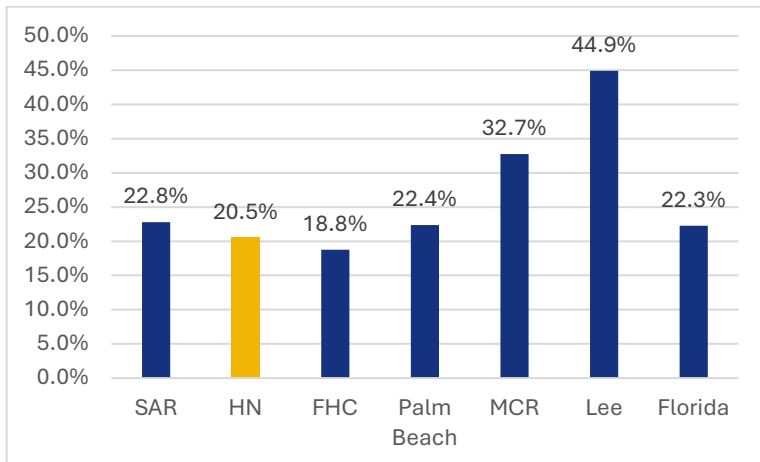
Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Exhibit 19b: % Dually Eligible (Medicare and Medicaid), 2019-2023



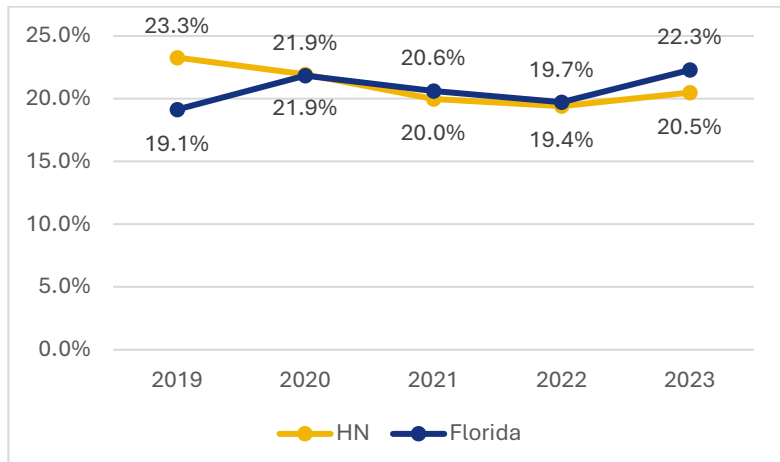
Other third-party sources include private insurance. Nearly 21 percent of patients used other third-party payer sources.

Exhibit 20a: % Other Third-Party, 2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Exhibit 20b: % Other Third-Party, 2019-2023



Special Populations

About one percent of patients served by HN were identified as homeless, a significantly lower percentage than the state average. The percentage of homeless patients has remained steady over the past five years.

Exhibit 21a: % Homeless Patients, 2023

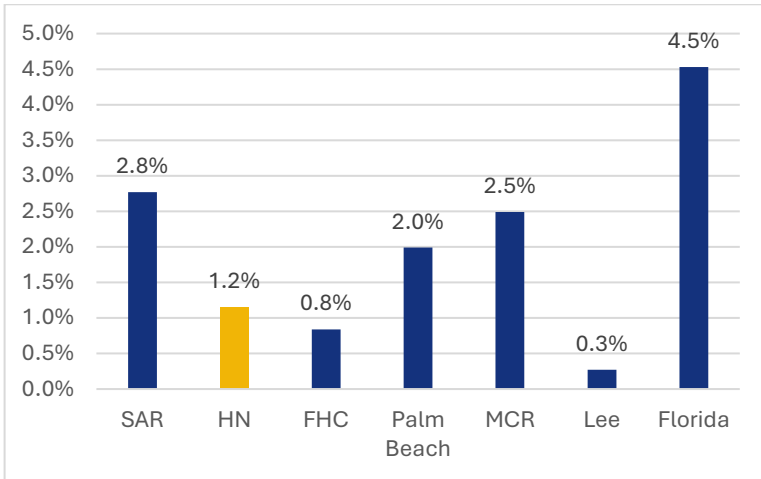
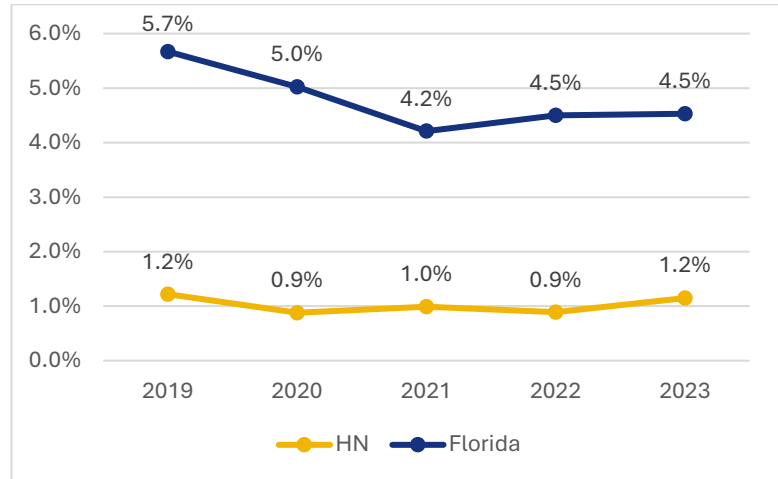


Exhibit 21b: % Homeless Patients, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Of the patients served by HN, 16 percent identified as agricultural workers or their family members. Compared to all the other regional benchmarks, HN has the second-highest percentage of patients identifying as agricultural workers or dependents, and this is significantly higher than the state average.

Exhibit 22a: % Agricultural Workers or Dependents, 2023

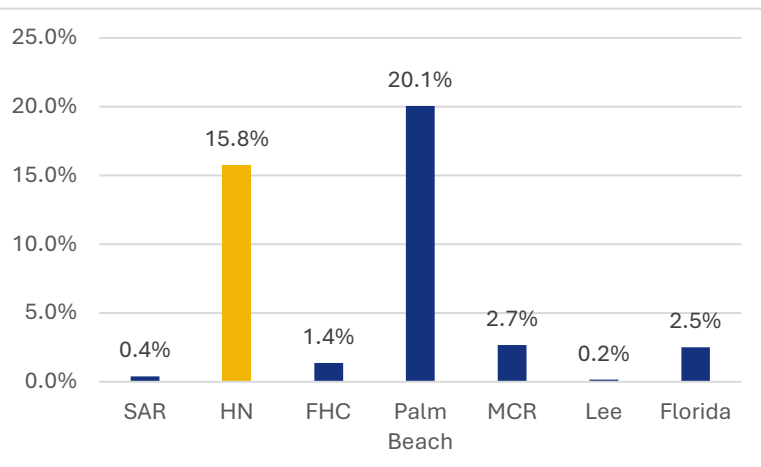
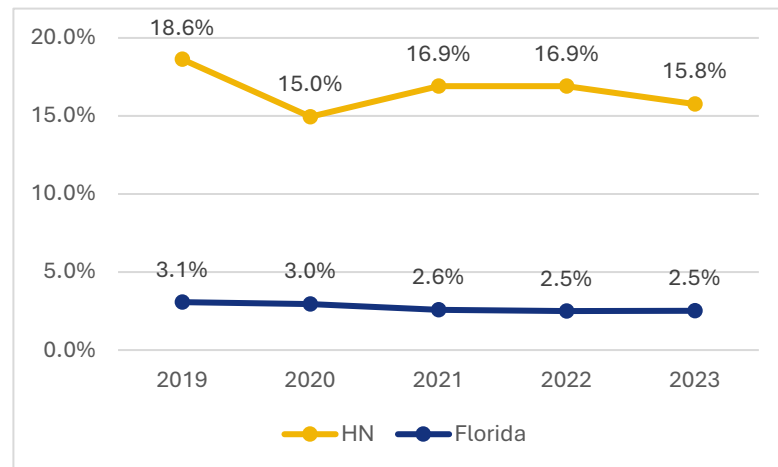


Exhibit 22b: % Agricultural Workers or Dependents, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

In 2023, 79 percent of HN's patients live in or are immediately accessible to a public housing site. It is to be noted that it is up to the organization to determine the appropriate definition of close-to-public housing. In the past, HN defined this as having access to public transportation, but it redefined this in 2020 for patients within 5 miles of walking distance per the UDS manual.

Exhibit 23a: % Public Housing Patients, 2023

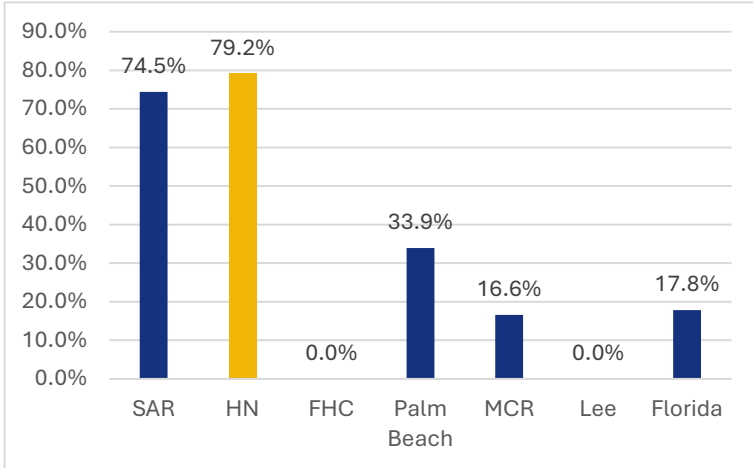
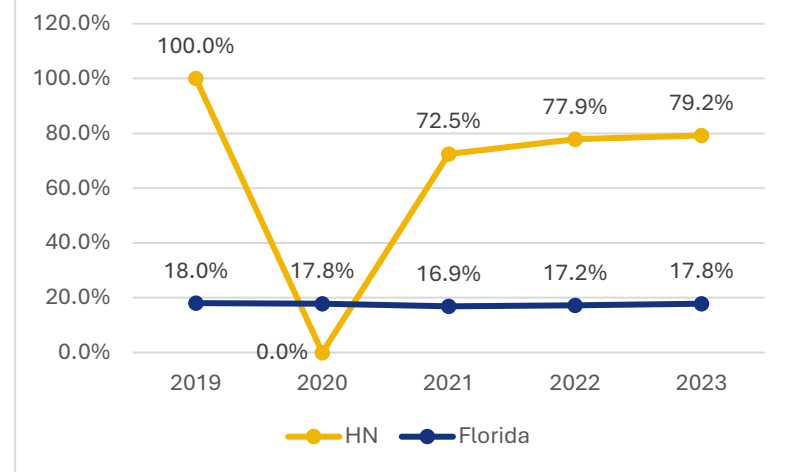


Exhibit 23b: % Public Housing Patients, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Less than one percent of patients served by HN were identified as veterans, consistent with most regional benchmarks.

Exhibit 24a: % Veteran Patients, 2023

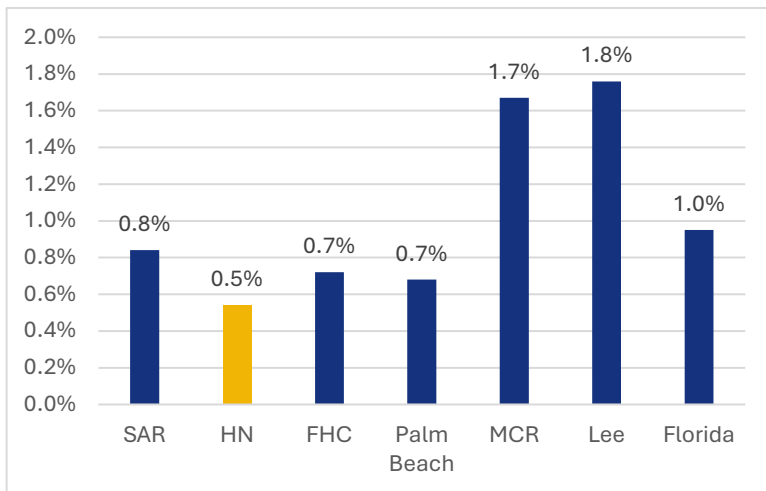
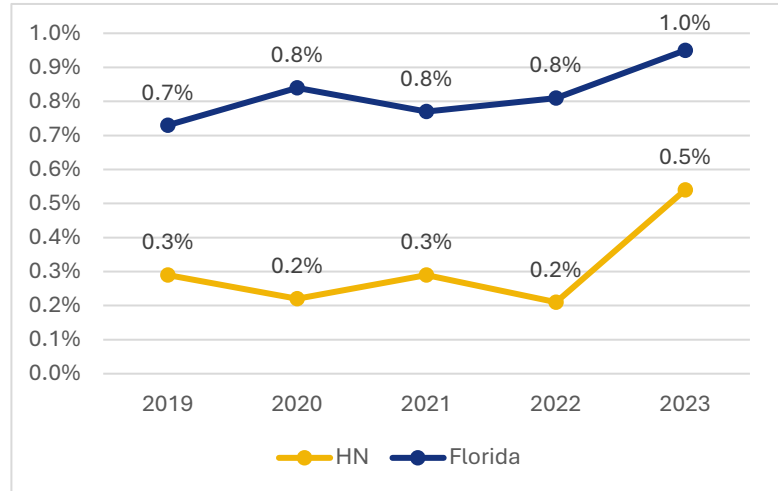


Exhibit 24b: % Veteran Patients, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Services

Services (% of patients)

HN consistently had a higher percentage of medical patients than the Florida average. From 2019 to 2022, the percentage of patients accessing medical services declined, but it increased in 2023.

Exhibit 25a: % Medical Patients, 2023

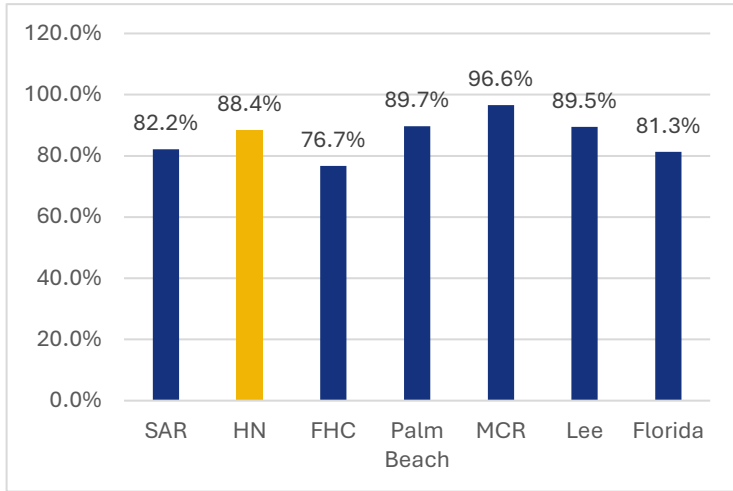
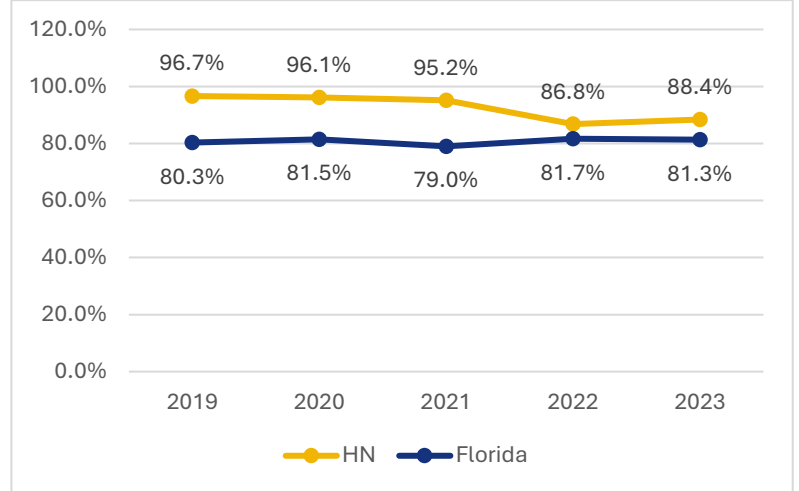


Exhibit 25b: % Medical Patients, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Twenty-four percent of HN patients receive dental services at the FQHC or by the mobile dental unit. The percentage of HN patients who receive dental services has increased since 2020.

Exhibit 26a: % Dental Patients, 2023

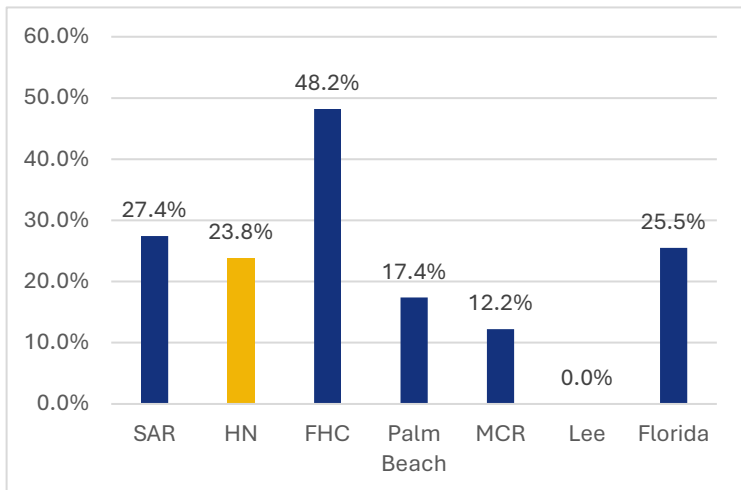
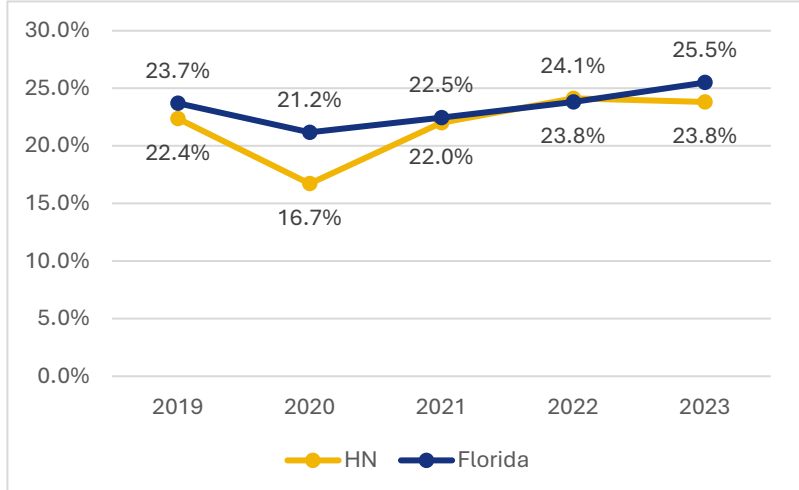


Exhibit 26b: % Dental Patients, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Fourteen percent of HN patients receive mental health services through HN, which is significantly higher than the state average and the regional benchmarks. Over the past four years, the percentage of patients accessing mental health services has increased.

Exhibit 27a: % Mental Health Patients, 2023

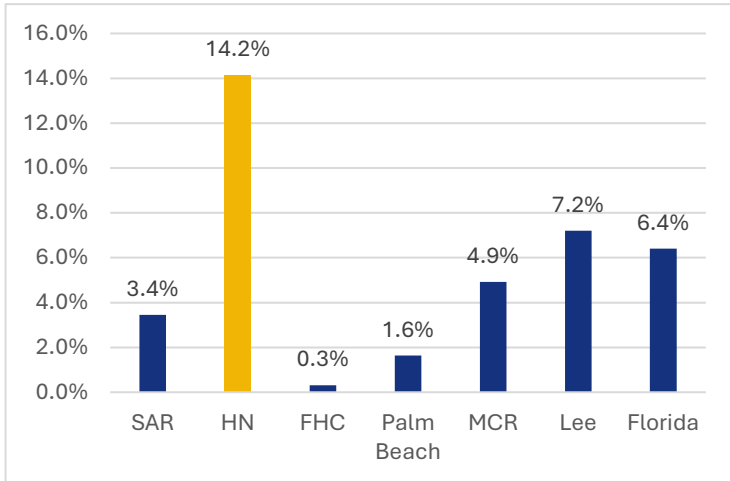
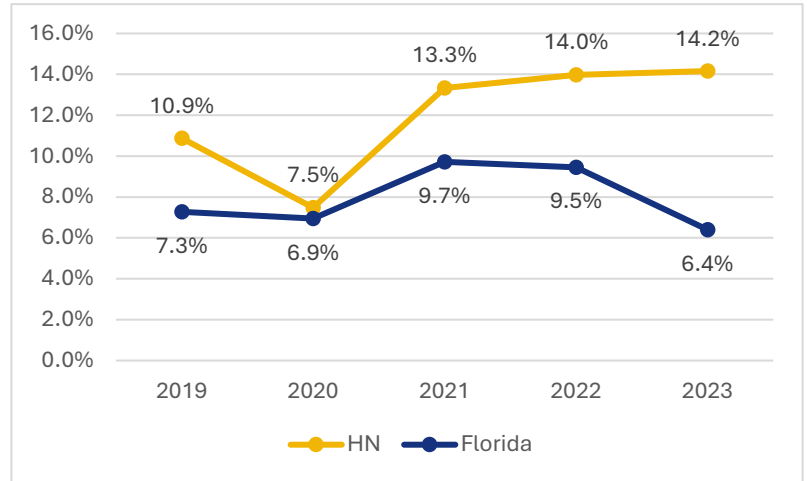


Exhibit 27b: % Mental Health Patients, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Enabling services at FQHCs are defined as “non-clinical services that aim to increase access to healthcare and improve health outcomes.” Community health workers (CHWs) are not included in this definition. A little over one percent of HN patients received enabling services. Over the past five years, the number of patients accessing this service has decreased.

Exhibit 28a: % Enabling Services Patients, 2023

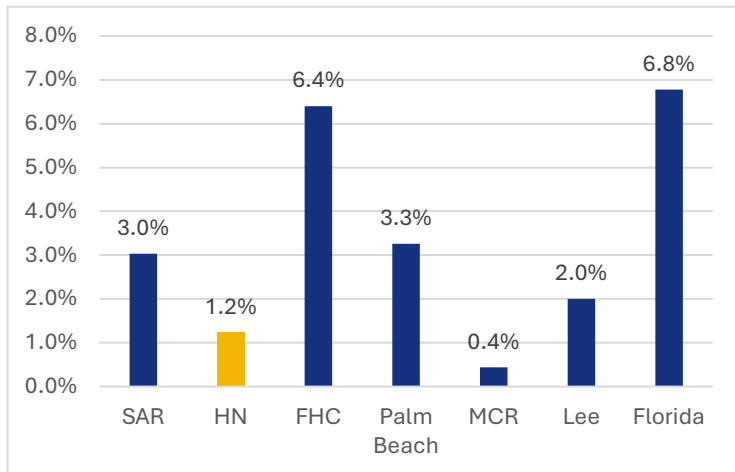
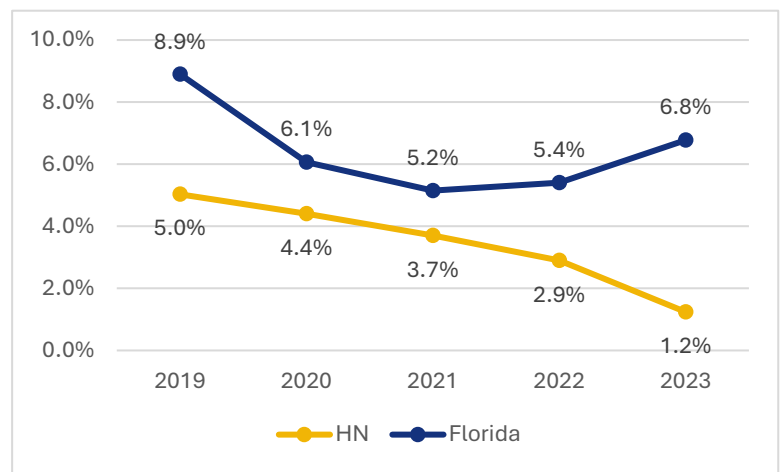


Exhibit 28b: % Enabling Services Patients, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Cost Data

For 2023, HN spent \$9,600,353 of funding from HRSA, which was 3.8 percent of the total spending in Florida.

Exhibit 29: Total Health Center Cluster, 2023

Name of Health Center	Costs
Centerplace Health, Inc.	\$ 2,332,057.00
Collier Health Services (Healthcare Network)	\$ 9,600,353.00
Family Health Centers of Southwest Florida, Inc.	\$ 9,833,638.00
Florida Community Health Center, Inc.	\$ 8,186,031.00
MCR Health, Inc.	\$ 9,737,629.00
Lee Memorial Health System, Look-Alike	
Florida	\$250,193,909 .00

Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

HN's total cost accrued in 2023 was \$55,158,768. This was 2.9 percent of the total accrued costs for Florida.

Exhibit 30: Total Cost by Health Center, 2023

Name of Health Center	Costs
Centerplace Health, Inc.	\$20,406,458
Collier Health Services (Healthcare Network)	\$55,158,768
Family Health Centers of Southwest Florida, Inc.	\$95,557,291
Florida Community Health Center, Inc.	\$47,545,128
MCR Health, Inc.	\$157,751,931
Lee Memorial Health System, Look-Alike	\$53,475,836
Florida	\$1,903,208,363

Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

HN's total accrued cost per patient in 2023 was \$1,125. This is higher than all the regional benchmarks except MCR Health. The total cost per patient for HN has increased over the past five years. It is worth noting that HN offers a broad range of uncompensated services necessary to care for its unique patient population.

Exhibit 31a: % Total Accrued Cost per Patient, 2023

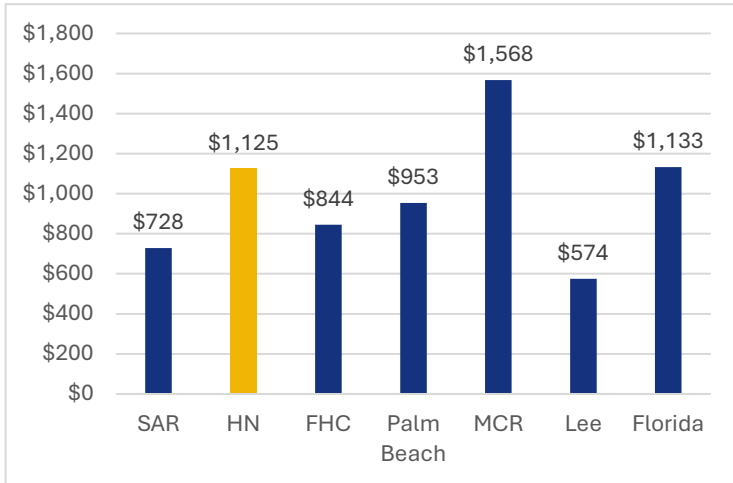
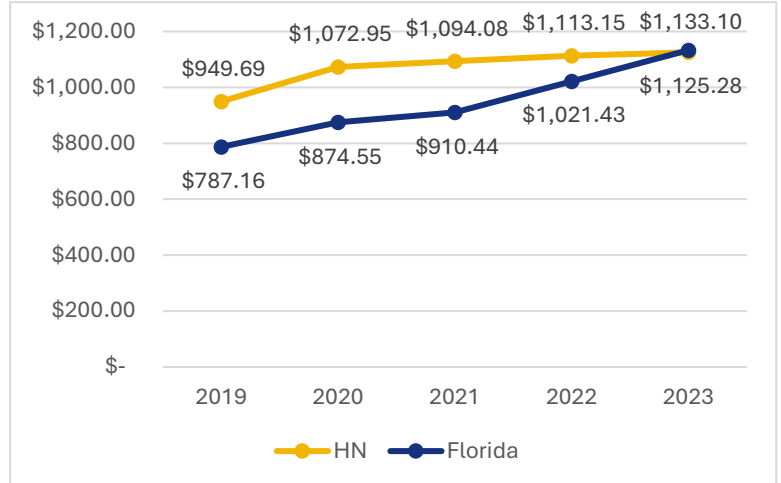


Exhibit 31b: % Total Accrued Cost per Patient, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Clinical Data

Medical Conditions (Percentage of Patients with Medical Conditions)

Of the patients served by HN, about 24 percent of patients identified as having hypertension. This is slightly less than the Florida average. This percentage has decreased over the past three years.

Exhibit 32a: % Patients with Hypertension, 2023

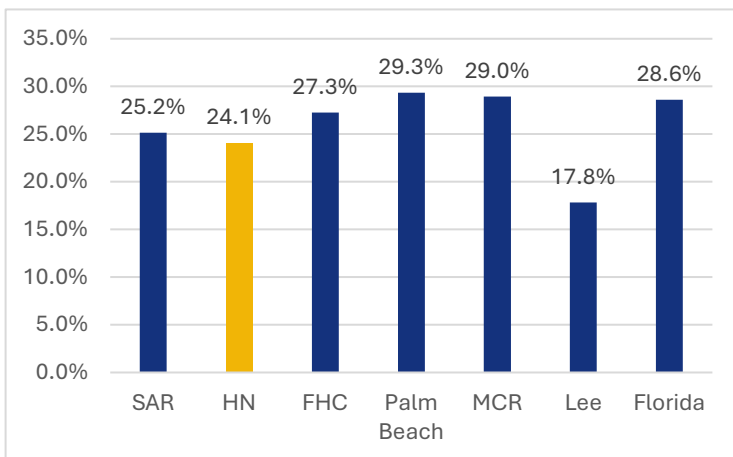
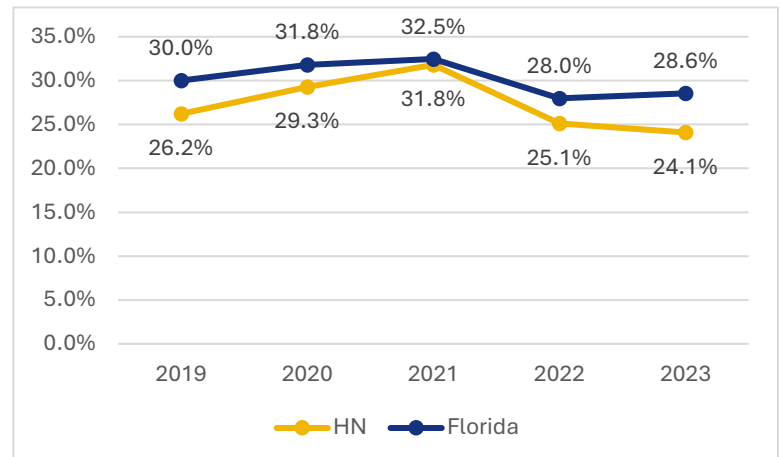


Exhibit 32b: % Patients with Hypertension, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

2025 Collier County Community Health Assessment: FQHC Data

About 17 percent of HN patients are identified as having diabetes. This percentage has increased overall since 2019. This is slightly higher than the Florida average.

Exhibit 33a: % Patients with Diabetes, 2023

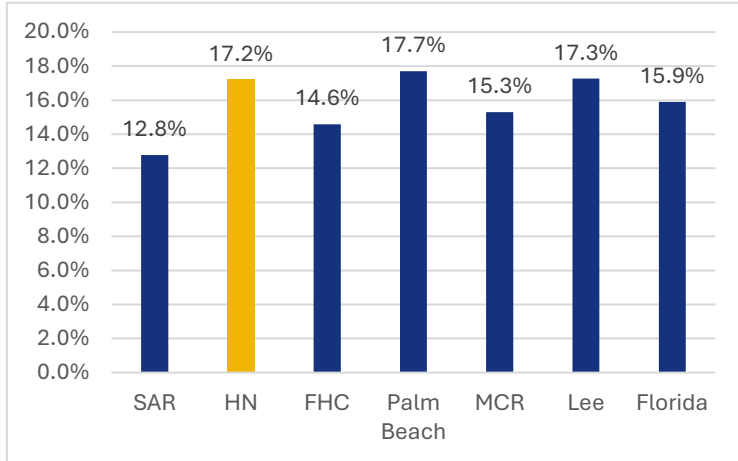
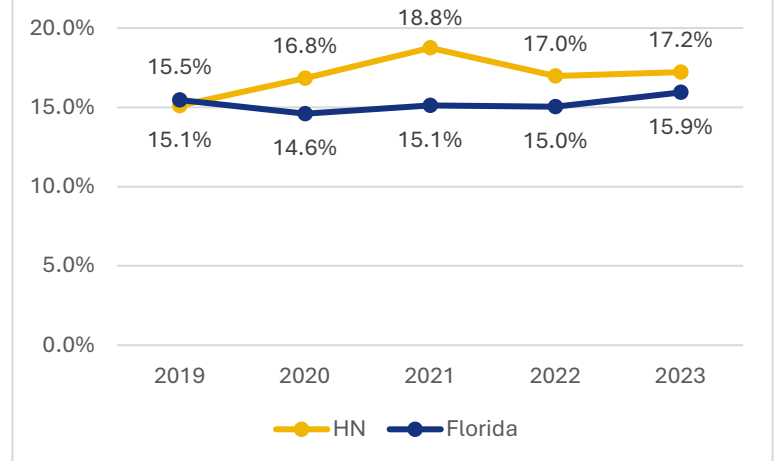


Exhibit 33b: % Patients with Diabetes, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Of the patients receiving medical care at HN, five percent were identified as having asthma. This is similar to the state average.

Exhibit 34a: % Patients with Asthma, 2023

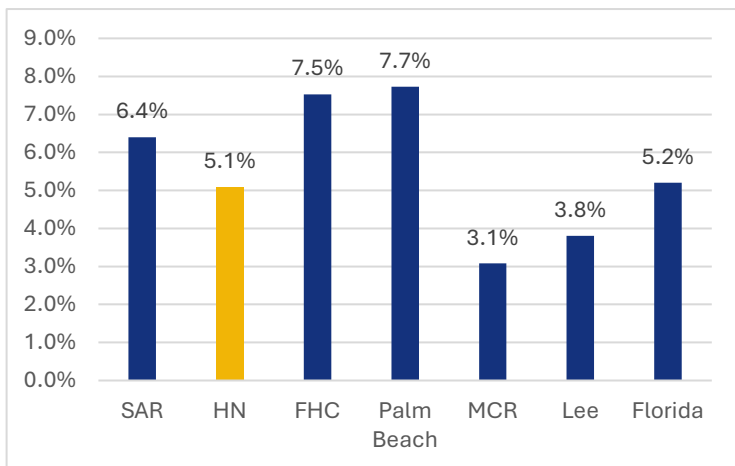
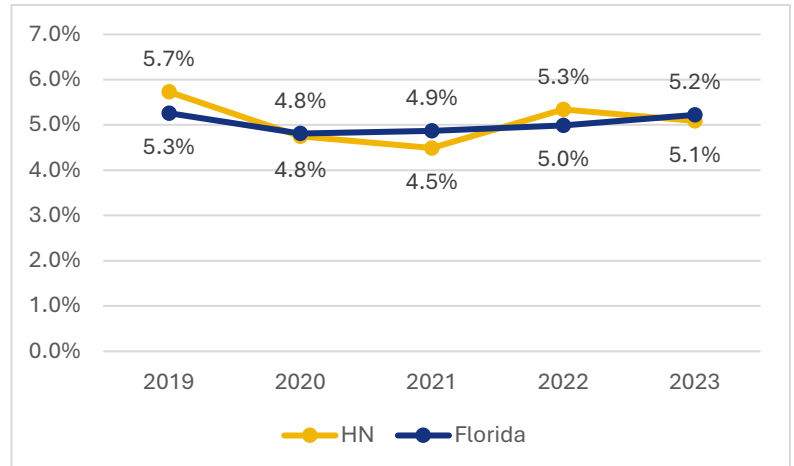


Exhibit 34b: % Patients with Asthma, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Less than one percent of patients receiving their healthcare at HN are living with HIV. This percentage has remained consistent over the past five years.

Exhibit 35a: % Patients with HIV, 2023

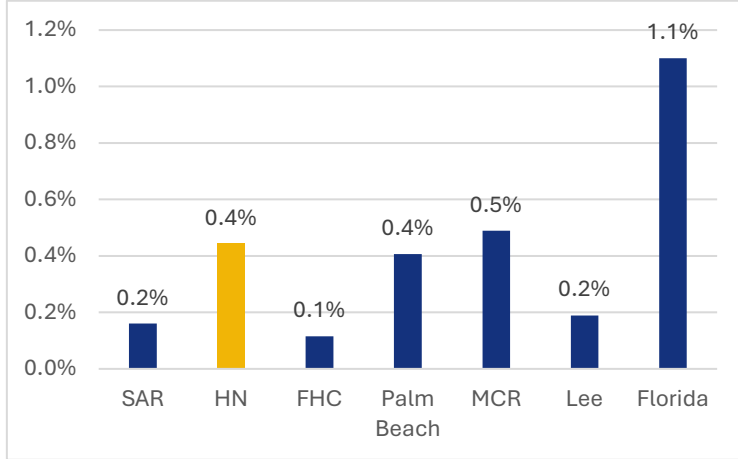
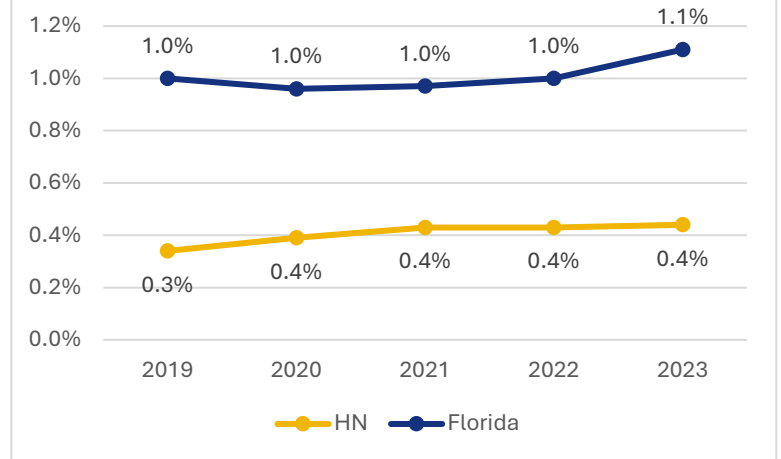


Exhibit 35b: % Patients with HIV, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Perinatal Health

Approximately 44 percent of the women accessing prenatal care from HN did so within the first trimester. This percentage is lower than the state average and has decreased over the past five years.

Exhibit 36a: % Early Entry into Prenatal Care, 2023

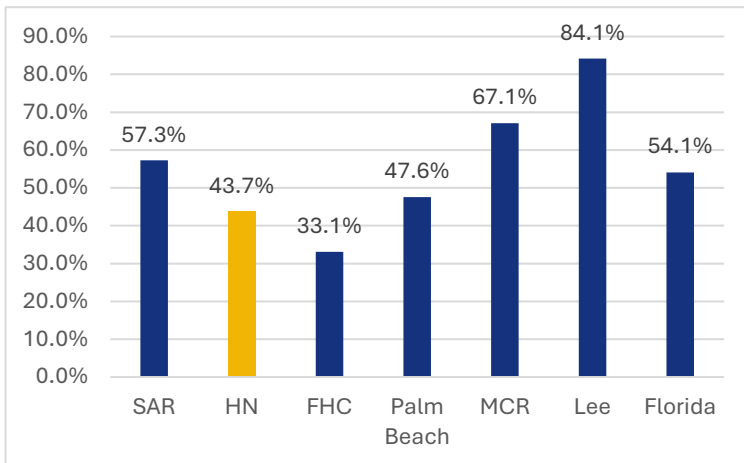
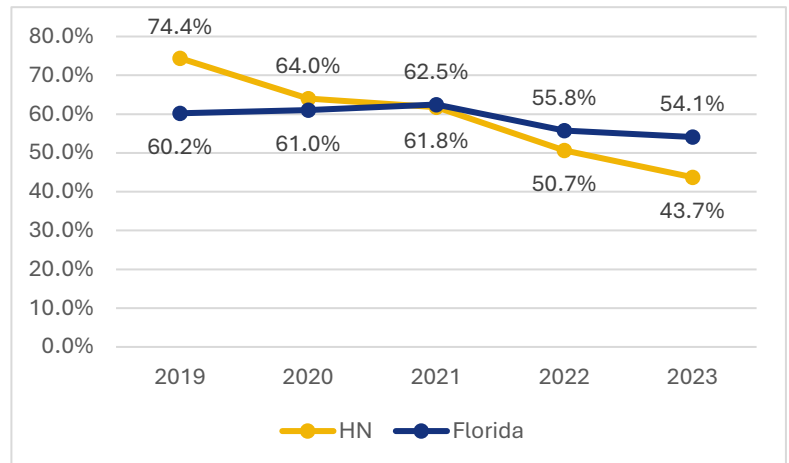


Exhibit 36b: % Early Entry into Prenatal Care, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

2025 Collier County Community Health Assessment: FQHC Data

At HN, five percent of newborns were born with a low and very low birth weight; this is the lowest percentage compared to the regional benchmarks. The percentage is significantly lower than the state average and has decreased from 2021 to 2023.

Exhibit 37a: % Low and Very Low Birth Weight, 2023

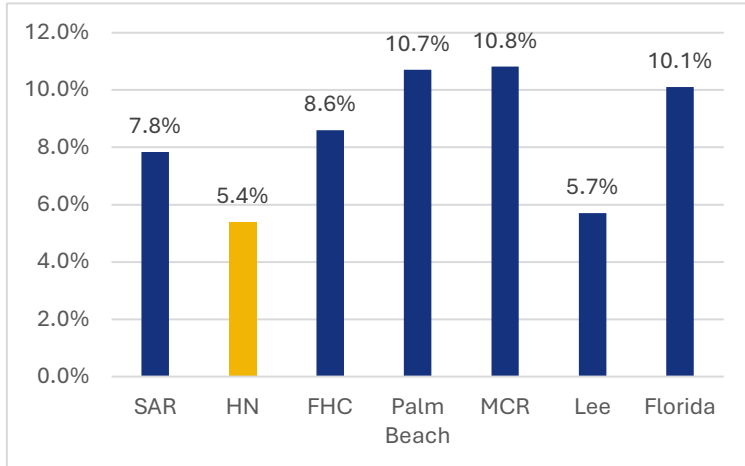
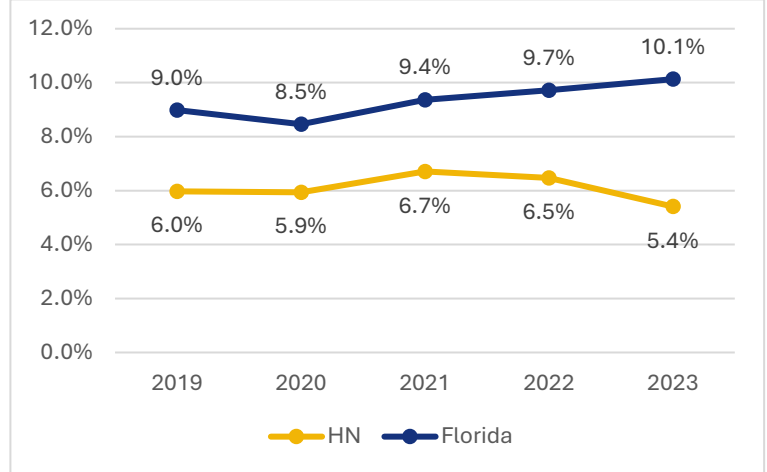


Exhibit 37b: % Low and Very Low Birth Weight, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

















Source: Photo courtesy of the Healthcare Network

Healthcare Network's Performance vs State Average on HRSA Benchmarks

Exhibit 38: Clinical Data Trends, 2023

The shade of the arrow designates performance vs average, the direction of the arrow indicates the 3 year trend .

Indicator	HN 2023	FL 2023	Performance/Trend for HN Data
Cervical Cancer Screening	71.9%	56.2%	
Breast Cancer Screening	71.2%	47.4%	
Weight Assessment for Children and Adolescents	84.1%	86.0%	
Body Mass Index (BMI) Screening and Follow-Up Plan	81.3%	78.1%	
Adults Screened for Tobacco Use and Receiving Cessation Intervention	90.0%	89.1%	
Colorectal Cancer Screening	55.8%	34.8%	
Childhood Immunization Status	38.0%	29.0%	
Screening for Depression and Follow-Up Plan	73.8%	76.5%	
Dental Sealants for Children between 6-9 Years	80.6%	57.7%	
HIV Screening	67.6%	53.3%	
Statin Therapy for Prevention and Treatment of Cardiovascular Disease	85.1%	77.8%	
Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet	76.8%	72.0%	
Controlling High Blood Pressure	59.9%	64.3%	
Diabetes: Hemoglobin A1c Poor Control	28.2%	32.8%	

Preventive Health Screening and Services

HN has the second-highest percentage of patients screened for cervical cancer compared to the regional benchmarks. For the past five years, the percentage has been higher than the Florida average. The percentage of HN patients who received a cervical cancer screening has remained fairly consistent.

Exhibit 39a: % Cervical Cancer Screening, 2023

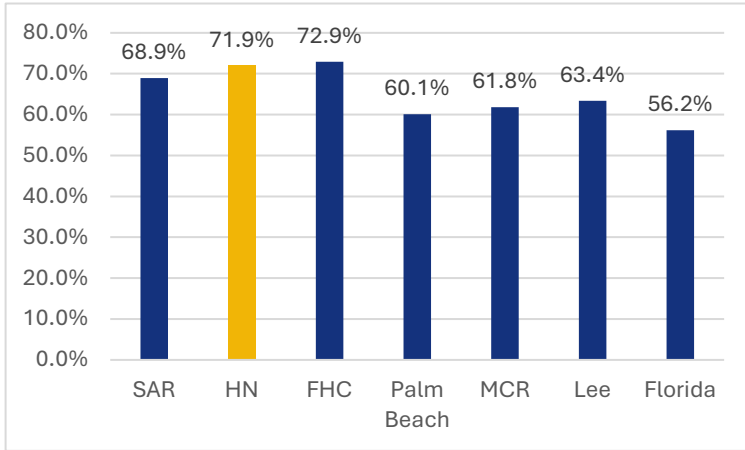
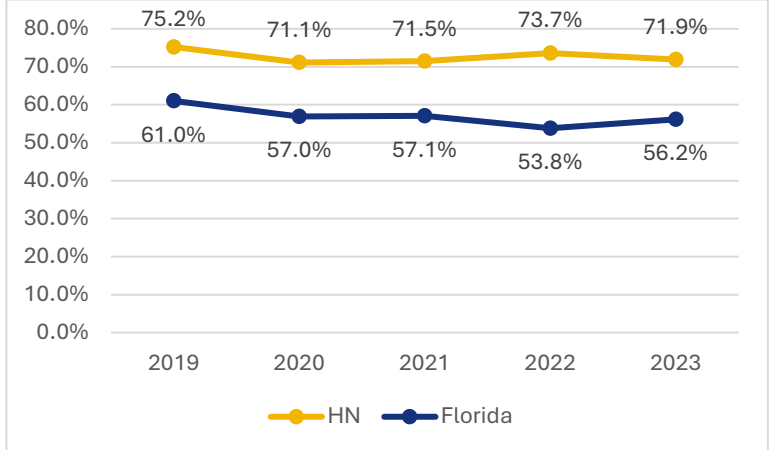


Exhibit 39b: % Cervical Cancer Screening, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

HN has the second-highest percentage of female patients aged 51 through 73 who received a mammogram to screen for breast cancer compared to regional benchmarks. The percentage is significantly higher than the state average. The percentage of breast cancer screenings increased significantly among HN patients from 2020 to 2023.

Exhibit 40a: % Breast Cancer Screening, 2023

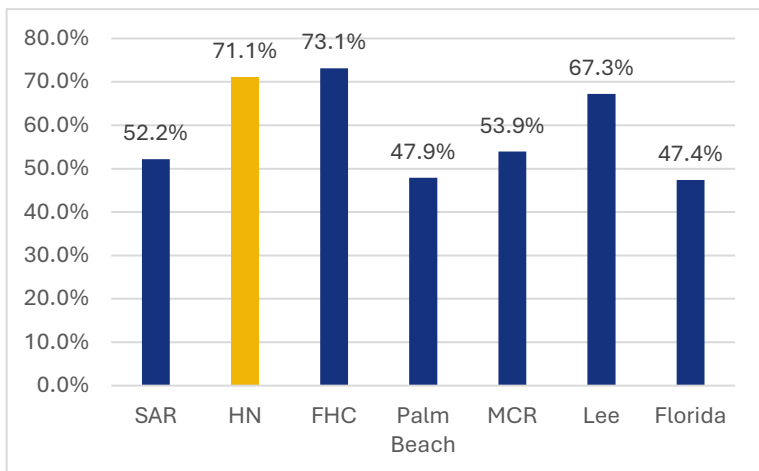
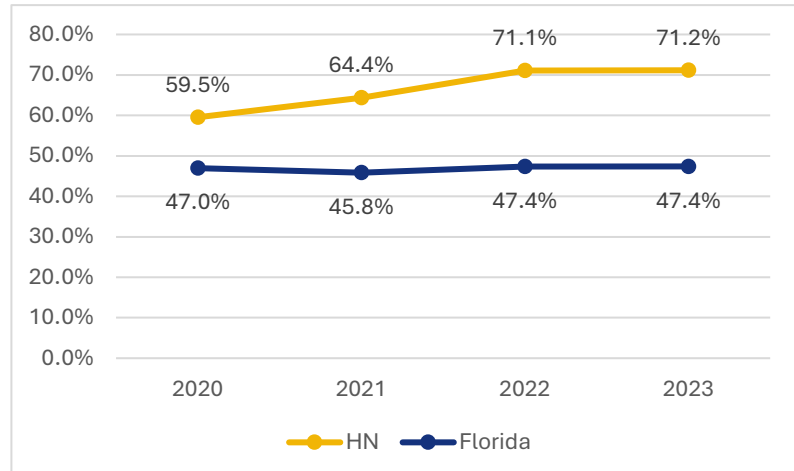


Exhibit 40b: % Breast Cancer Screening, 2020-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Eighty-four percent of children served by HN received weight assessment and counseling for nutrition and physical activity. HN has a slightly lower percentage than the state average. There was a significant increase in children receiving weight screening from 2019 to 2023.

Exhibit 41a: % Adolescent Weight Screening and Follow-Up, 2023

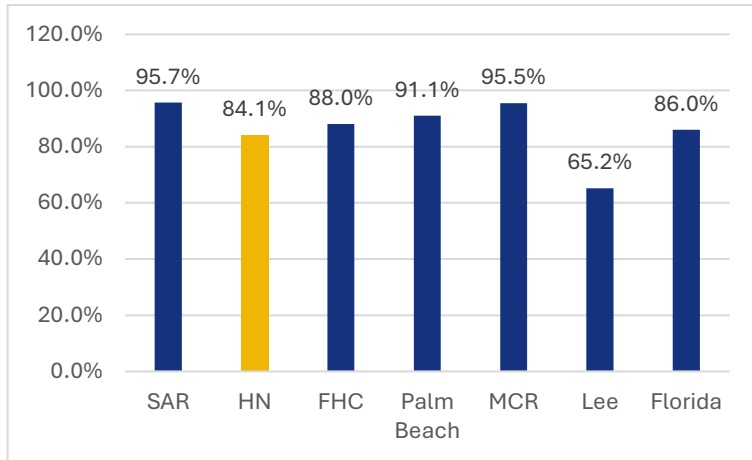
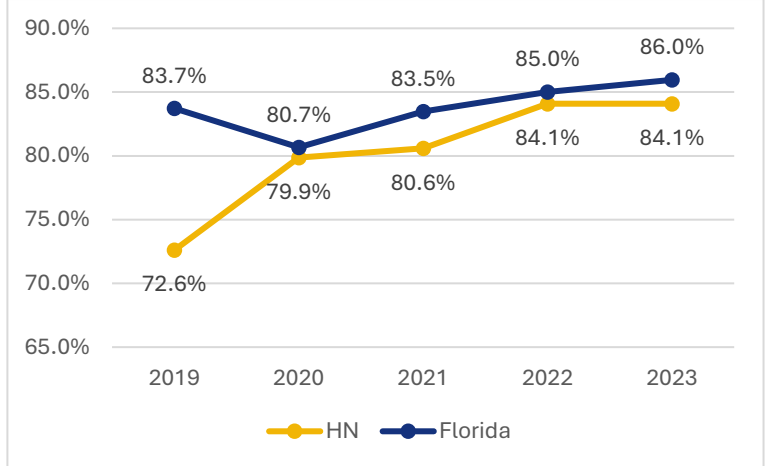


Exhibit 41b: % Adolescent Weight Screening and Follow-up, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Eighty-one percent of adult medical patients aged 18 and older at HN received a body mass index (BMI) screening and follow-up. HN had a slightly higher percentage of adult weight screenings than the Florida average.

Exhibit 42a: % Adult Weight Screening, 2023

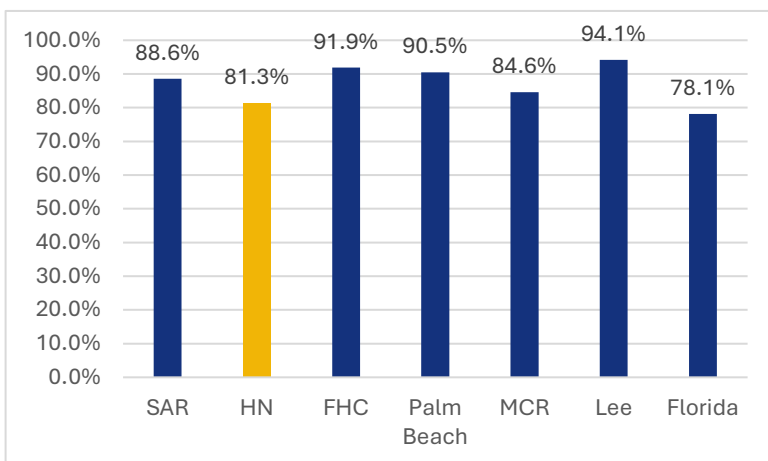
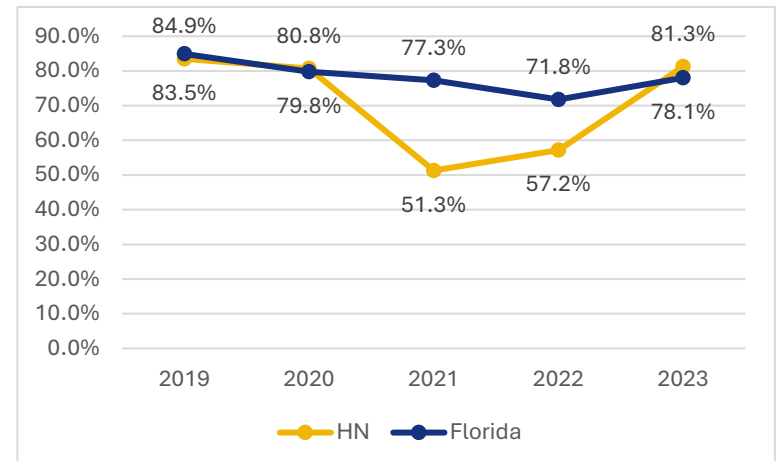


Exhibit 42b: % Adult Weight Screening, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Of the patients served by HN, 90 percent of adult medical patients were screened for tobacco use and received cessation intervention. The percentage is slightly higher than the state average.

Exhibit 43a: % Screened for Tobacco Use, 2023

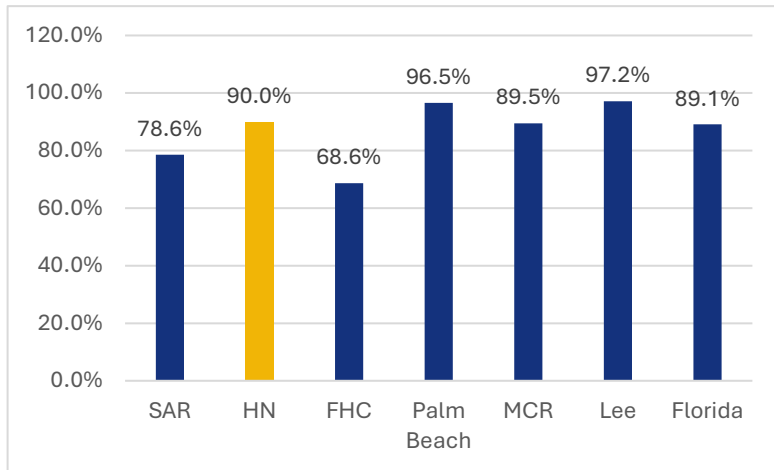
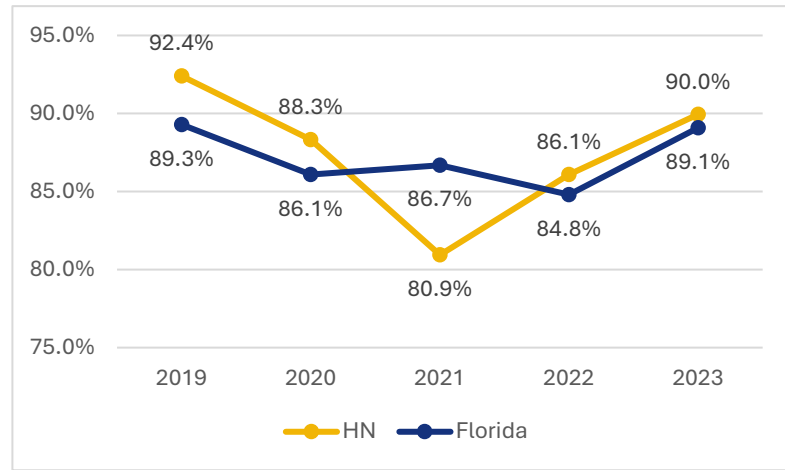


Exhibit 44a: % Screened for Tobacco Use, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

HN had the second-highest percentage of patients receiving colorectal cancer screenings compared to all regional benchmarks and the Florida average. The percentage of colorectal cancer screenings among HN patients increased significantly from 2020 to 2023.

Exhibit 45a: % Colorectal Cancer Screening, 2023

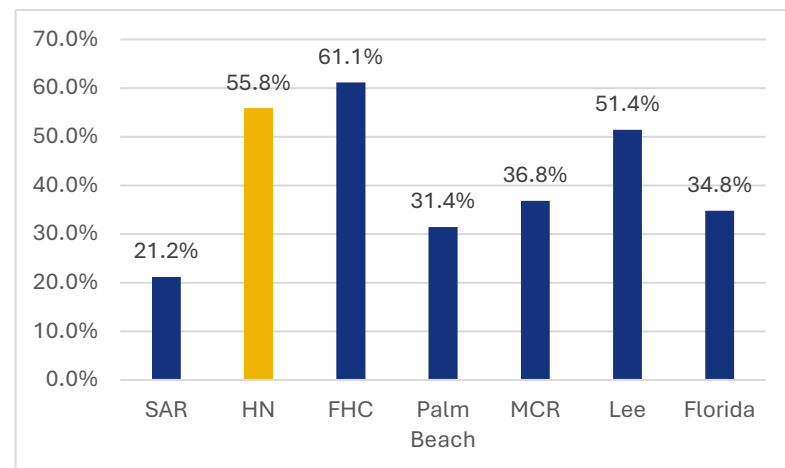
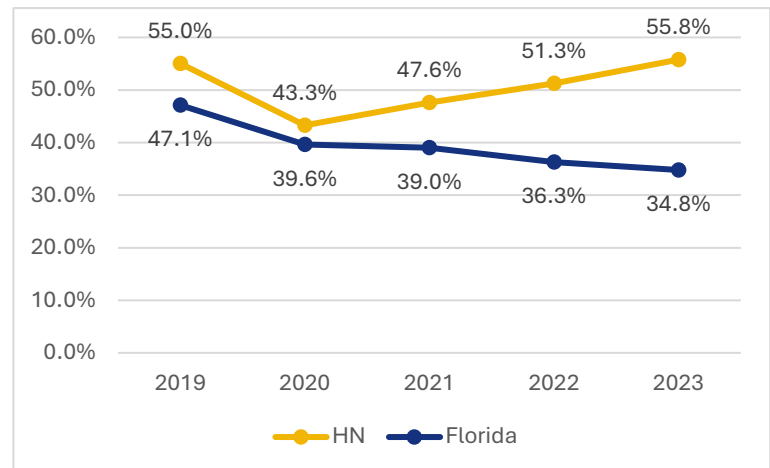


Exhibit 45b: % Colorectal Cancer Screening, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

About 38 percent of children under three received appropriate childhood immunizations. The percentage is higher than the state average; however, it has declined since 2020.

Exhibit 46a: % Childhood Immunization Status, 2023

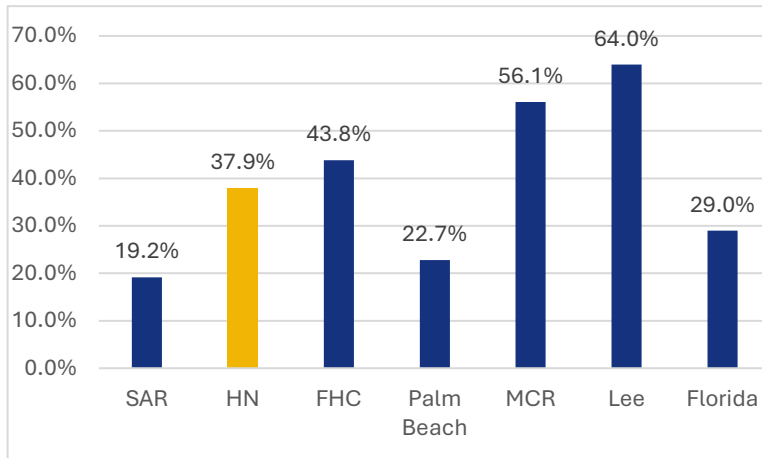
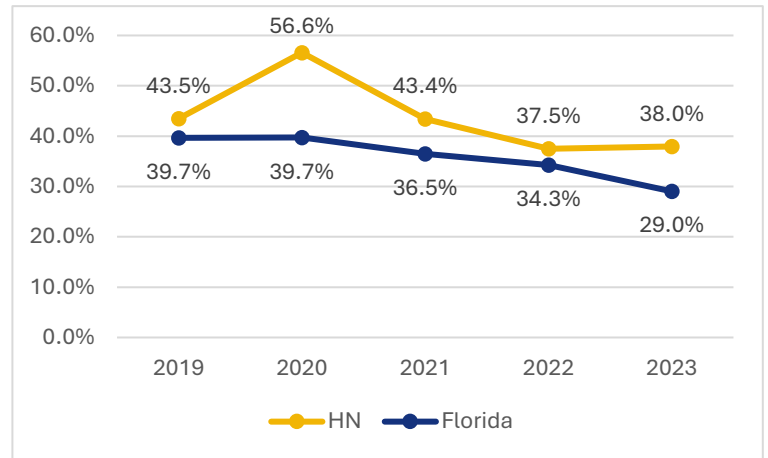


Exhibit 46b: % Childhood Immunization Status, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

HN has the second-lowest average percentage of patients screened for clinical depression compared to regional benchmarks. The percentage is slightly lower than the state average. Patients have a follow-up plan created during the screening if there is a positive result.

Exhibit 47a: % Depression Screening, 2023

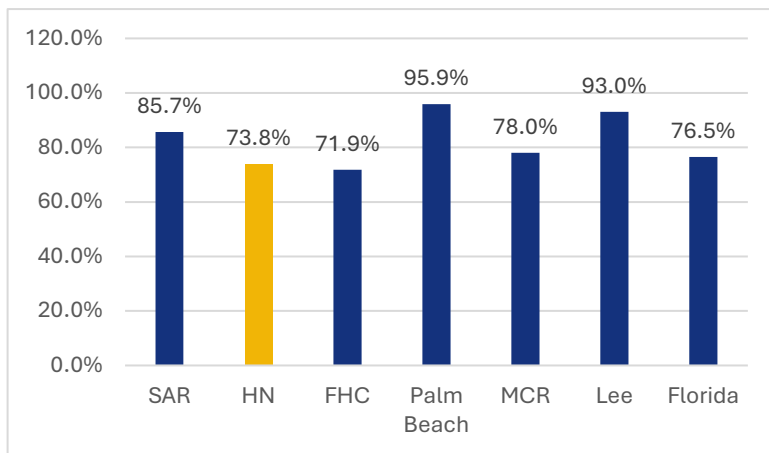
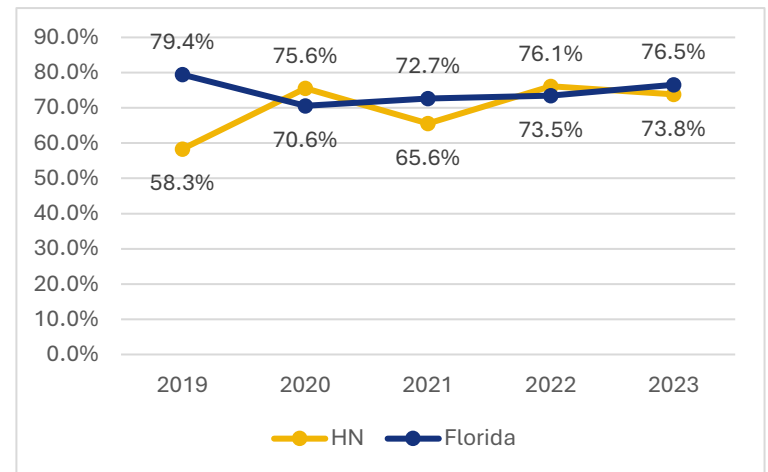


Exhibit 47b: % Depression Screening, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

HN has the second-highest average percentage of children aged 6-9 who received dental sealants compared to regional benchmarks. The percentage is higher than the state average, and it has increased significantly since 2019.

Exhibit 48a: % Dental Sealants for Children, 2023

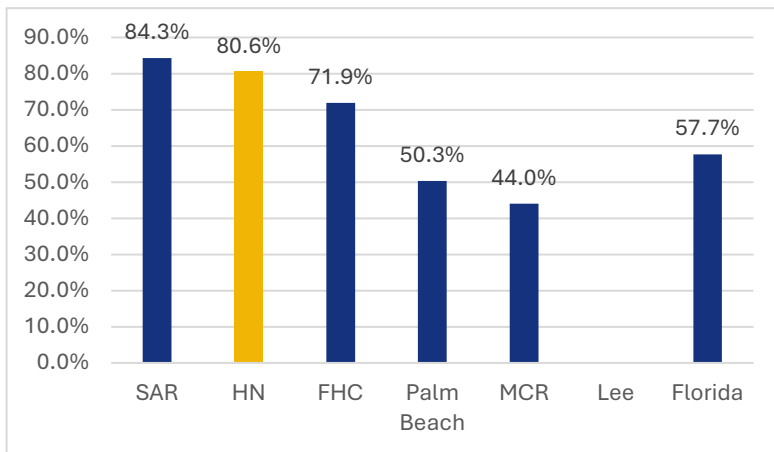
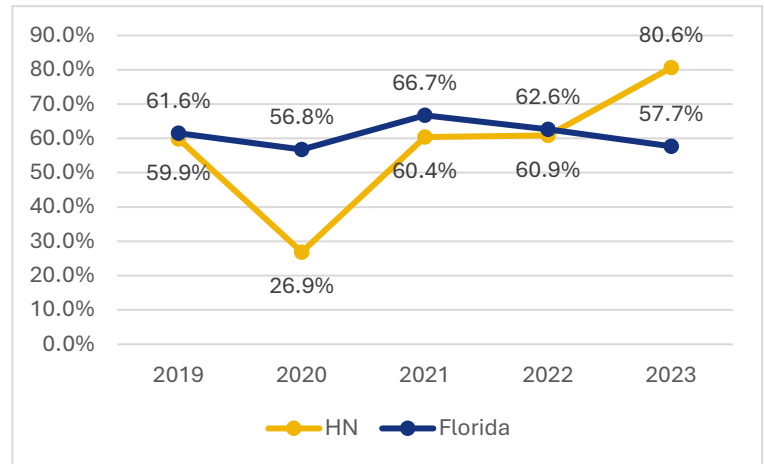


Exhibit 48b: % Dental Sealants for Children, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

HN has a higher-than-average percentage of patients ages 15 through 65 tested for HIV. The percentage is significantly higher than the Florida average. The percentage of patients receiving an HIV test increased significantly among HN patients over the past four years.

Exhibit 49a: % HIV Screening, 2023

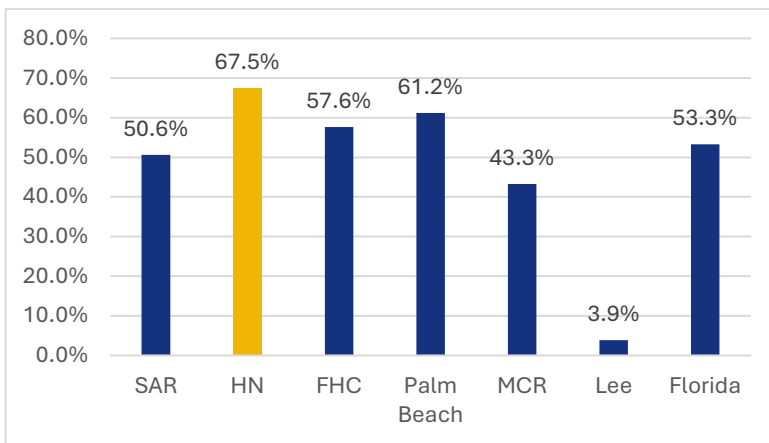
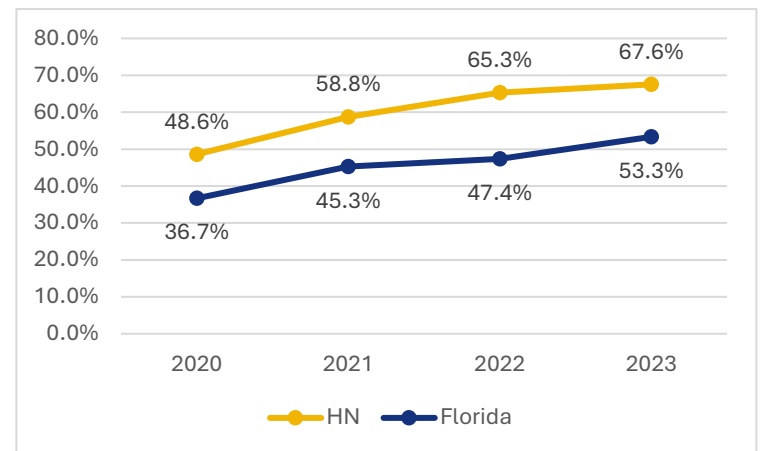


Exhibit 49b: % HIV Screening, 2020-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Chronic Disease Management

HN has the second highest percentage of adult patients aged 21 and older at high risk of cardiovascular events who were prescribed or were on statin therapy for the prevention and treatment of cardiovascular disease.

Exhibit 50a: % Statin Therapy for Prevention and Treatment of Cardiovascular Disease, 2023

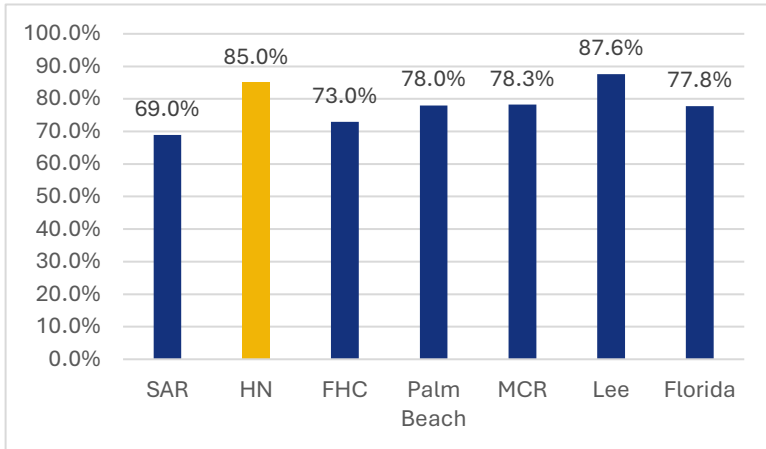
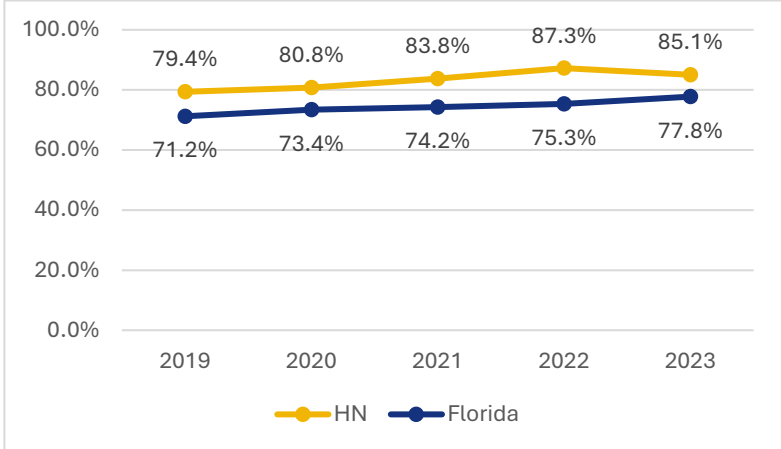


Exhibit 50b: % Statin Therapy for Prevention and Treatment of Cardiovascular Disease, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

About 78 percent of patients aged 18 and older who are diagnosed with Ischemic Vascular Disease (IVD) use aspirin or another antithrombotic. This is higher than the state average.

Exhibit 51a: % IVD: Use of Aspirin or Another Antiplatelet, 2023

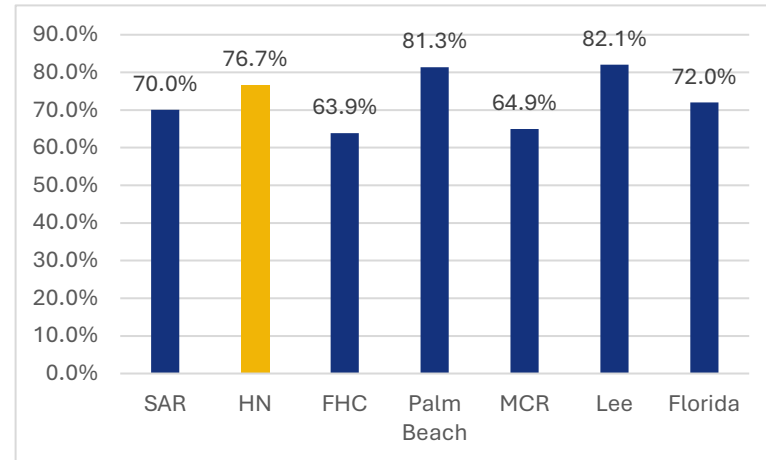
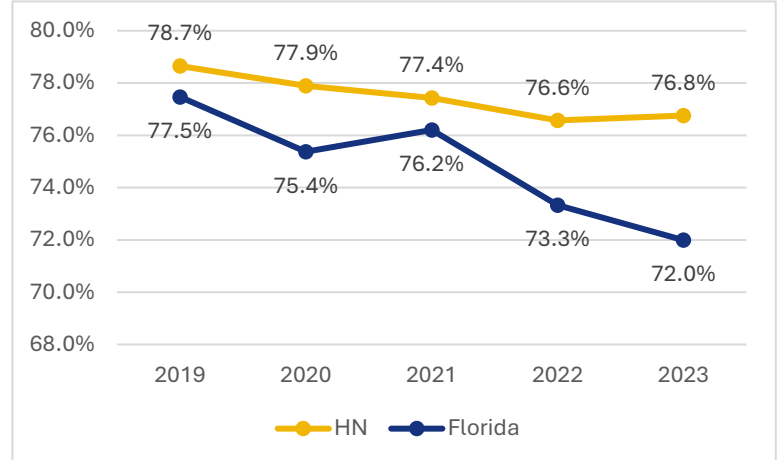


Exhibit 51b: % IVD: Use of Aspirin or Another Antiplatelet, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

2025 Collier County Community Health Assessment: FQHC Data

Of the patients served by HN, 70 percent of medical patients have their blood pressure controlled (<140-90 mmHg). Since 2020, the percentage of patients with controlled blood pressure has increased. This is slightly higher than the state average.

Exhibit 52a: % Controlling High Blood Pressure, 2023

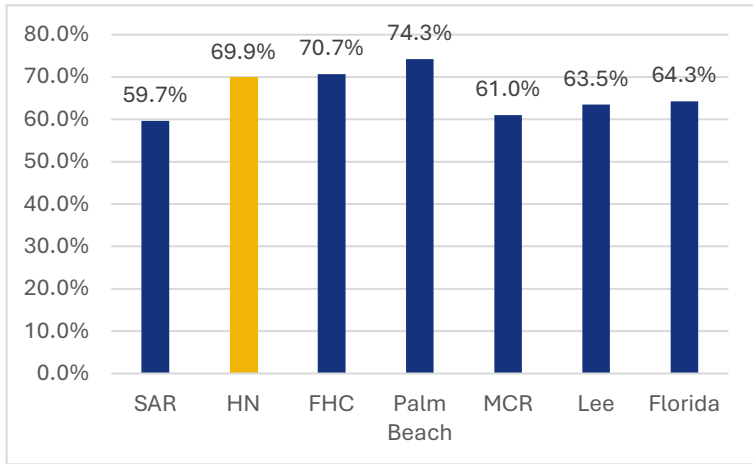
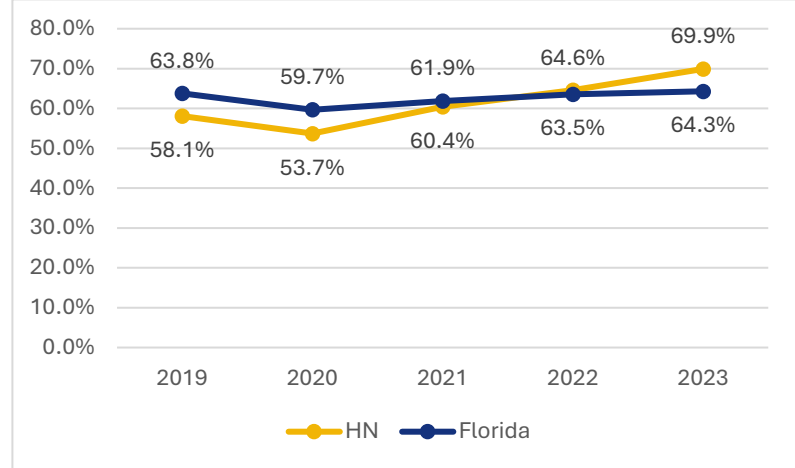


Exhibit 52b: % Controlling High Blood Pressure, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023

Of the diabetic patients receiving care at HN, 28 percent of patients have poorly controlled hemoglobin A1c (HbA1c>9%) or were not tested during the year. This is lower than the state average.

Exhibit 53a: % Uncontrolled Diabetes, 2023

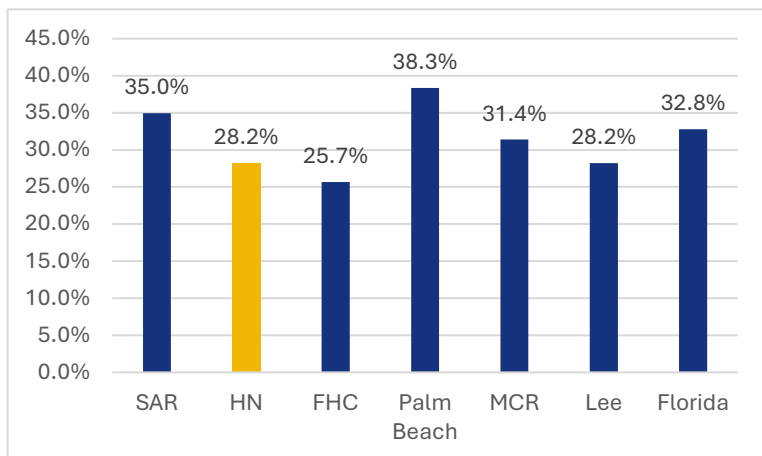
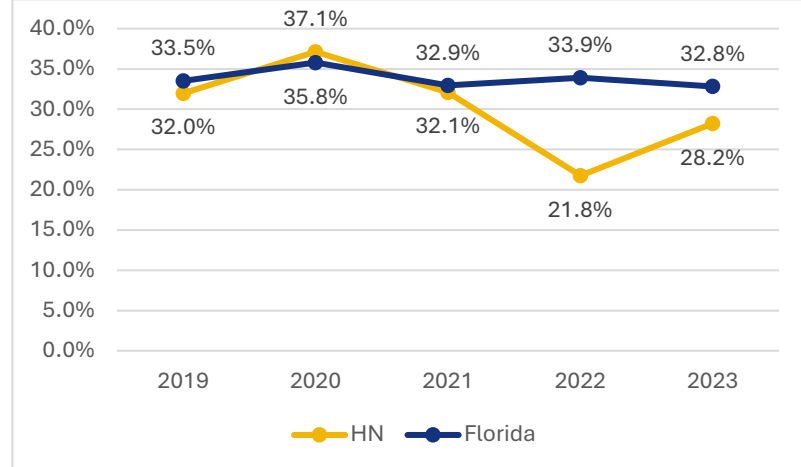


Exhibit 53b: % Uncontrolled Diabetes, 2019-2023



Source: HRSA Health Center Program Uniform Data System (UDS) Data, 2023



2025 Collier County Health Needs Assessment

Prepared by the Health Planning Council of Southwest Florida, Inc.

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Lee County Community Health Assessment 2025



Prepared by



In Partnership With



Introduction

In an effort to improve the health of the residents of Lee County, a collaborative partnership was formed between NCH, the Health Planning Council of Southwest Florida, Inc. (HPC), also known as the CHA Steering Committee, for the purpose of conducting a needs assessment for use by the listed partners and other community stakeholders in Lee County. The Steering Committee held monthly meetings throughout the project to facilitate the planning, development, and implementation of this health needs assessment.

HPC reviewed numerous data sources and received feedback from the Steering Committee, as well as from members of the community through surveys, questionnaires, interviews with community leaders, and a focus group. This needs assessment comprises demographic, socioeconomic, and health status information that will be used to identify areas where targeted interventions and policy changes are likely to have the most significant impact. Once community needs are identified through quantitative data analysis of demographic, socioeconomic, and health status information, as well as community surveys, focus groups, and interviews, the strategic process and community health improvement planning can begin.



Source: Health Planning Council of Southwest Florida

Community Survey 133 Residents Completed

Ranking of Priorities

1. Access to care
2. Chronic disease
3. Mental health
4. Alcohol and drug use
5. Health of older adults
6. Disabilities
7. Dental health
8. Obesity
9. Communicable disease
10. Unintentional injuries

Top Health Concerns

1. Access to specialty care
2. Access to primary care
3. Mental health conditions
4. Not enough doctors
5. Aging problems
6. Women's health issues
7. Mental well-being
8. Dental problems
9. Poor nutrition/quality food
10. Obesity

Top Health Needs

1. Affordable housing
2. Financial assistance for healthcare
3. Mental/behavioral health services
4. More doctors
5. Wellness programs
6. Healthier food choices
7. Health education
8. Additional health services
9. Transportation
10. After-school/out-of-school programs

Focus Group

Improvements needed

1. More healthcare providers/doctors
2. More hospitals
3. Increase access to specific services
4. More services in the home/community

Community Leader Interviews

Critical challenges

1. Increase in negative health behaviors
2. Access to primary care
3. Cost of healthcare
4. More choices for healthcare
5. Access to specialty adult and pediatric care

Population

- Lee County's population increased by 167,063, or more than 25 percent, from 656,466 in 2014 to a total of 823,529 by 2023.
- The median age increased in Lee County by 3.1 years between 2013 and 2023 (46 to 49.1).
- While Hispanics constituted 18 percent of the population in Lee in 2009, by 2023 the proportion increased to more than 34 percent.
- Lee County consistently has a lower percentage of population that speaks English less than very well when compared to Florida (2022, 10.0% Lee, 11.9% Florida).
- In 2023, of households that speak languages other than English, 76.1 percent spoke Spanish.



Source: Health Planning Council of Southwest Florida

Additional details and data sources can be found in the Lee County Health Need Assessment

Drivers of Health

- In 2023, 49 percent of Lee County students were deemed ready when they entered kindergarten, which is lower than the state of Florida (51%).
- In 2024, Lee County students passed the Florida Standards English Language Arts Assessment (FSA) at lower rates than the state average (48% Lee, 55% Florida).
- Between 2013 and 2023, Lee County consistently had a slightly lower high school graduation rate than the state average (85.1% Lee, 88.0% Florida, 2023).
- Between 2015 and 2023, the percentage of the population in Lee County over the age of 25 who did not have at least a high school diploma declined from 13 percent to 9.1 percent.
- 13.7 percent of members of the general public in Lee County have a disability; this is slightly higher than the Florida average of 13.5 percent.
- The median household income in Lee County for 2023 is slightly higher than the Florida average (\$73,099 vs. \$71,711).
- In 2023, 12.1 percent of Lee County residents lived in poverty, compared to 12.4 percent for the state.
- In 2023, Lee County had a slightly higher percentage of children living in poverty than the state average (17.1% Lee, 16.9% Florida). The percentage of children living in poverty in Lee County decreased significantly in the ten years between 2014 and 2023 (27.0% 2014, 17.1% 2023).
- In 2023, 25.9 percent of owner-occupied households in Lee County were paying more than 30 percent of their household income for housing, compared to 26.1 percent for the state of Florida.
- The percentage of households that rent and pay more than 30 percent of their income in rent increased significantly between 2017 and 2023 (52% 2017, 59% 2023).

Additional details and data sources can be found in the Lee County Health Need Assessment

Settings and Systems

- Lee County has been designated as a Medically Underserved Area (MUA) for its low-income and migrant farmworker populations.
- Between 2014 and 2023, Lee County consistently had fewer hospital beds per 100,000 people than the state average (265.7 Lee, 304.5 Florida, 2023).
- Throughout the past decade, Lee County had significantly fewer nursing home beds per population than the average for the State of Florida (257.7 Lee, 366.3 Florida, 2023).
- It is estimated that in 2022, 17.1 percent of Lee County residents under the age of 65 were without insurance (Florida average was 13.9%).
- In 2023, for the population under 19 years of age in Lee County, 9.2 percent were uninsured compared with 7.5 percent in Florida.
- Lee County Residents made 243,981 visits to hospitals in 2023 that did not result in an inpatient admission. Private insurance was the number one payer source, representing 29.1 percent of the visits; Medicaid was second with 28.6 percent.
- Lee County residents consistently have fewer emergency department visits per 100,000 than the state average. The rates follow similar trends to those of the state.
- After several years of falling, the food insecurity rate for Lee County and Florida increased between 2021 and 2022. The rate for Lee County is similar to the state rate (12.7% Lee, 13.2% Florida, 2022).
- Despite having a higher percentage of workers who work from home, Lee County workers have a slightly higher average travel time to work than the state average (29.6 Lee, 28.5 Florida, 2023).
- Lee County has a lower-than-average rate for all crimes and domestic violence when compared to the State of Florida as a whole. The three most common categories of crimes in Lee County are domestic violence, larceny, and burglary.

Additional details and data sources can be found in the Lee County Health Need Assessment

Health Behaviors

- The percentage of high school students in Lee County who reported consuming alcohol in the past 30 days has decreased significantly over the past 10 years (23.5% 2016 to 15.5% 2022).
- The percentage of high school students in Lee County who reported cigarette use in the past 30 days has significantly decreased in the past decade (5.0% 2016, 0.4% 2022).
- The percentage of middle and high school students in Lee County who reported vaping nicotine in the past 30 days decreased between 2020 and 2022 (12.0% 2020, 8.6% 2022). It is also below the state average.
- From 2016 to 2022, the percentage of middle and high school students in Collier County who reported using marijuana or hashish decreased (11.8% in 2016, 8.5% 2022).
- More people in Lee County died from unintentional injuries than from any other fatal injuries in 2020. The 85 and older age group had the highest number of unintentional injury fatalities.
- The top three fatal injury mechanisms for Lee County in 2023 were poisonings, falls, and firearms. Poisoning includes drug overdoses.
- The leading cause of fatal injury in Lee County varies by age. For those who are younger, suffocation or motor vehicle traffic is most likely to cause a fatal injury; for those who are 25-64, drug poisoning or an overdose is the most frequent cause of fatal injury. For Lee County residents who are over the age of 65, falls are the leading cause of fatal injuries.

Additional details and data sources can be found in the Lee County Health Need Assessment

Health Behaviors

- There was a significant increase in the death rate from unintentional injuries from 2014 to 2022 (40.7 2014, 85.2 2022); however, there was a large decline from 2022 to 2023 (85.2 2022, 66.7 2023).
- Prior to 2018, Lee County had a significantly higher rate of deaths from unintentional falls than the state average. Since 2018, the rate has been similar to the state average (12.1 Lee, 11.8 Florida, 2023).
- Lee County consistently had a lower rate of motor vehicle crashes compared to the Florida average between 2014 and 2020. However, since 2021, the rate for Lee County has risen and has been higher than the state average (1876.3 Lee, 1742 Florida, 2023).
- Compared to other Florida counties for the years 2021-2023, Lee County has a higher rate for births to mothers ages 15-19 than the state average (16.0 Lee, 13.2 Florida); however, that rate has been improving.
- Lee County is in the worst quartile for the state for births with 1st trimester prenatal care (with a rate of 66.0% compared to 71.7% for Florida). The trends for prenatal care in Lee County have been negative, with fewer receiving early or adequate prenatal care.
- The maternal death rate for Lee County is lower than the state rate (17.8 Lee, 24.2 Florida, 2021-2023); however, the trend has been negative.
- The infant mortality rate in Lee County is similar to the state average (6.2 Lee, 6.0 Florida, 2023).
- From 2014 to 2023, there was a decrease in preventable emergency room visits from dental conditions in Lee County (864.4 2019, 512.8 2023).

Additional details and data sources can be found in the Lee County Health Need Assessment

Health Conditions

- Between 2017 and 2023, Lee County consistently exceeded the Florida average for life expectancy (80.7 Lee, 78.6 Florida, 2023).
- Cancer, heart disease, and unintentional injury are the top three leading causes of death in 2023 for Lee County.
- From 2012 to 2021, Lee County experienced an increase in the rate of new cases of cancer.
- Since 2014, in Lee County, the overall cancer death rate has decreased.
- The most common types of cancer in Lee County were female breast and prostate cancer. However, lung cancer was the deadliest among those diagnosed with cancer.
- Over the past 10 years the overall death rate from heart disease in Lee County has decreased. Lee County's heart disease death rate is less than the Florida average from (105.2 Lee, 135.6 Florida, 2023).
- Lee County has seen a slight increase in the death rate from strokes between 2014 and 2023; however, there was a decrease from 2022 to 2023. Lee County has a lower death rate from stroke than the state average (26.3 Lee, 44.6 Florida, 2023).
- The death rate from Alzheimer's Disease in Lee County is slightly lower than the state average (13.2 Lee, 15.6 Florida, 2023). It has fallen since 2019 when it hit a high of 18.2 in Lee County.
- Lee County has a lower percentage of seniors with a disability status in every category when compared to the Florida average.
- Over the past decade, Lee County generally had a similar or higher rate of suicide than the average for the state, however, in 2023, the rate for Lee County was lower than the state average (13.2 Lee, 14.1 Florida).
- Bacterial STDs in both Lee County and Florida increased between 2014 and 2023. The rate of bacterial STDs for Lee County is lower than the state average (583.1 Lee, 788.2 Florida, 2023).

Additional details and data sources can be found in the Lee County Health Need Assessment



2025 Lee County Community Health Assessment

Prepared by the Health Planning Council of Southwest Florida, Inc.

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Lee County Community Input 2025



Prepared by



In Partnership With



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Introduction and Overview



Partner Agencies: NCH, the Florida Department of Health in Collier County, and Healthcare Network. Survey created and analyzed by the Health Planning Council of Southwest Florida.



Why: To assess Lee County residents' perceptions of healthcare and health issues in the county.



How: Surveys and promotional materials were available in English, Spanish, and Haitian Creole. Survey collection was done via SurveyMonkey and paper surveys.



When: January - April 2025



Outcome: 133 residents shared their thoughts on health and healthcare in Lee County

NCH **healthcare network** **IPC** **HEALTH PLANNING COUNCIL OF SOUTHWEST FL** **Florida HEALTH Collier County**

Your voice matters!
Take the survey today!

Please join us by completing a survey about health and healthcare in Collier and Lee Counties. Your feedback will help shape the services offered in your community.

Scan Me  or 

Your Health. Your Voice. Your Future

¡Tu voz importa!
¡Responde la encuesta hoy mismo!

Únete a nosotros completando una encuesta sobre la salud y la atención médica en los condados de Collier y Lee. Tus comentarios nos ayudarán a mejorar los servicios que se ofrecen en tu comunidad.

Escanea para realizar la encuesta. 

Tu salud. Tu voz. Tu futuro.

Vwa ou enpòtan!
Pran sondaj la jodia!

Tanpri ranpli yon sondaj sou sante ak swen sante nan zòn Collier ak Lee. Fidbak ou ap ede fome sèvis yo ofri nan kominote'w la.

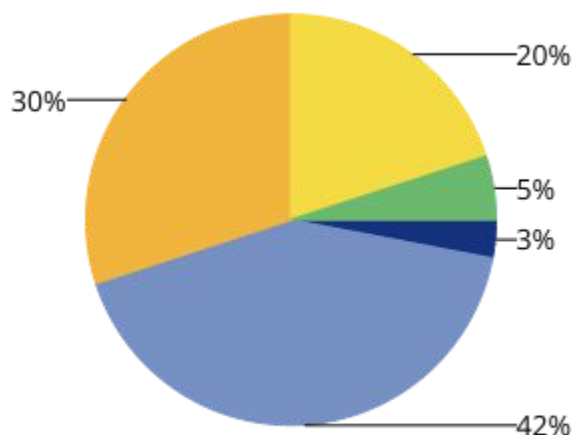
Eskane sa 

Sante'w, Vwa'w, Avni'w.

Community Health Perceptions and Access

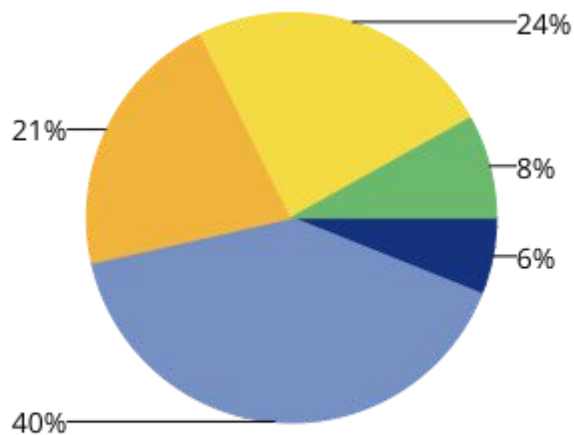
When asked, many of the residents believed the general health of the community and the quality of healthcare in the community are **good** (**general health [42%]**, **quality healthcare [40%]**).

How would you rate the general health of your community?



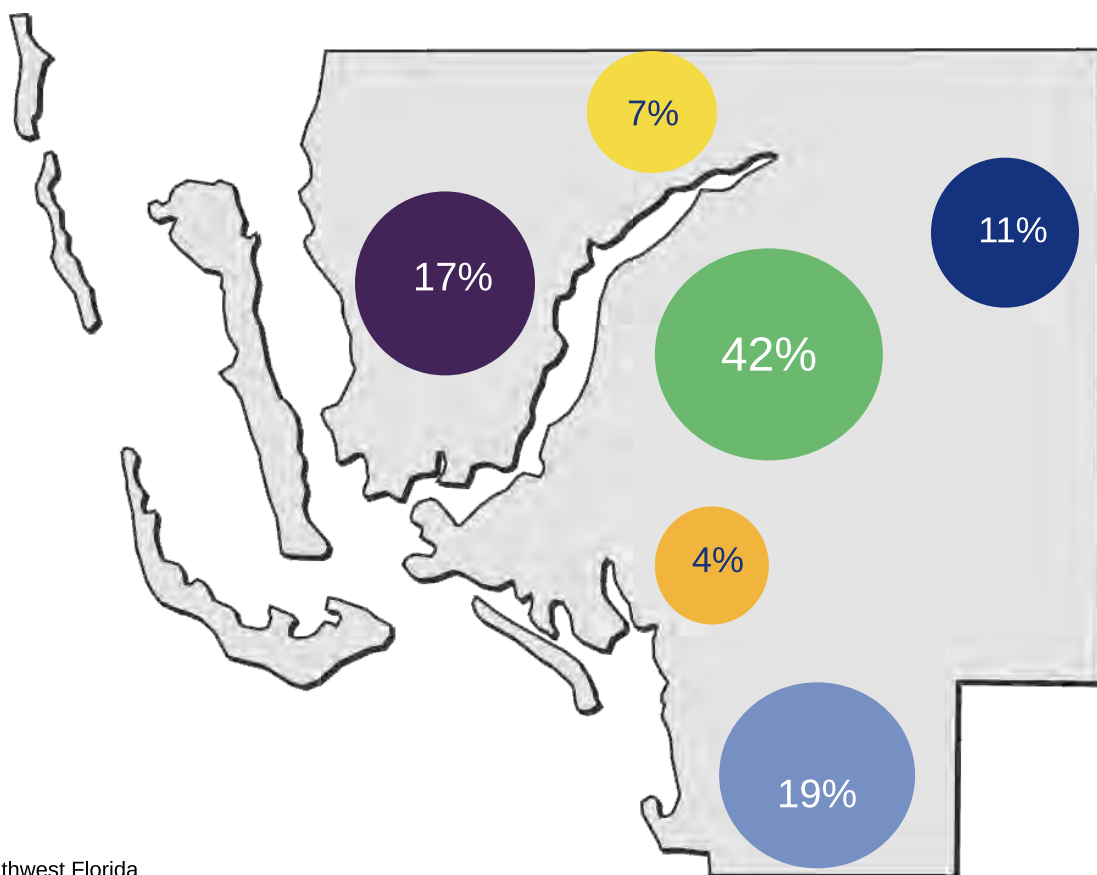
Excellent 3% Good 42% Neutral 30%
Fair 20% Poor 5%

How would you rate the quality of healthcare in your community?



Excellent 6% Good 40% Neutral 21%
Fair 24% Poor 8%

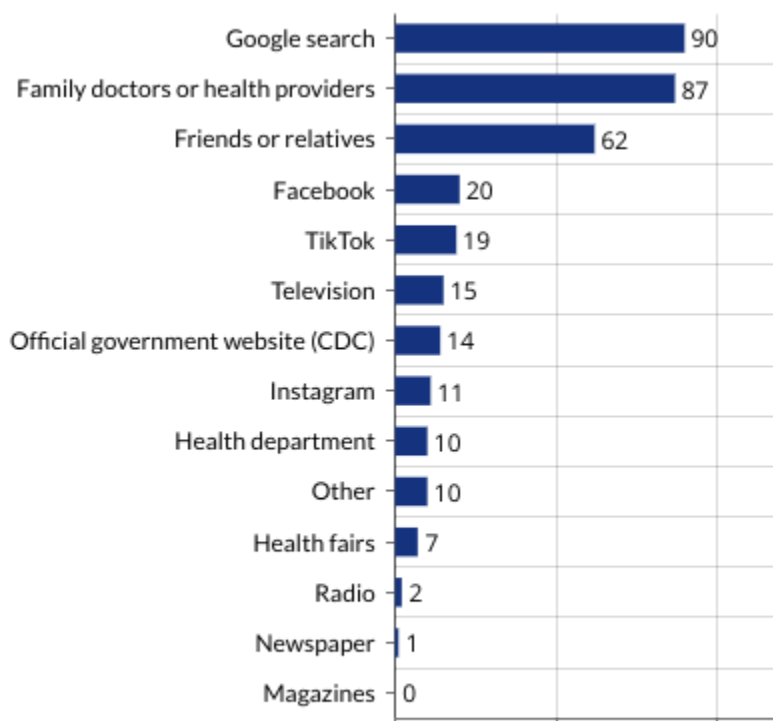
Survey Takers by Community



Source: Health Planning Council of Southwest Florida

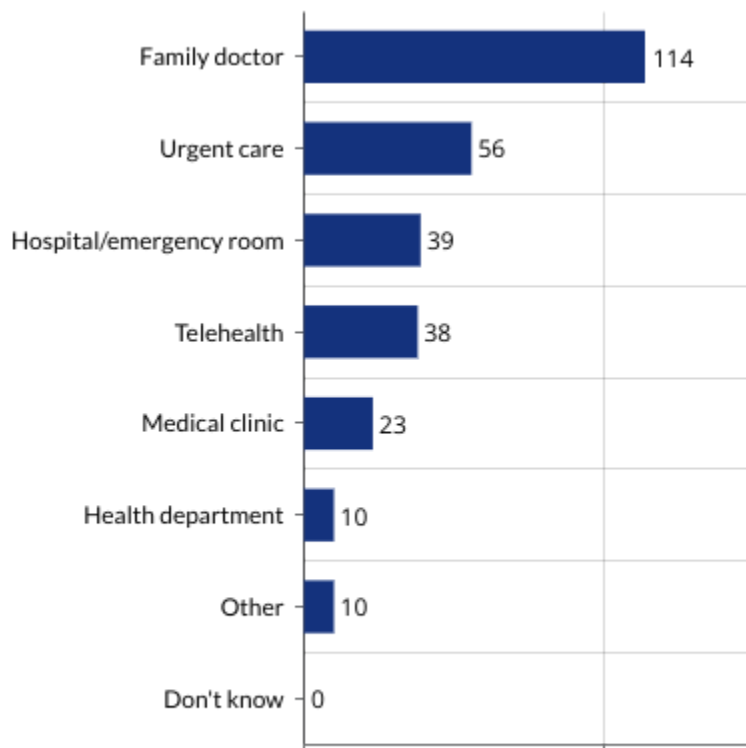
Community Health Perceptions and Access

Where do residents go to get health information?



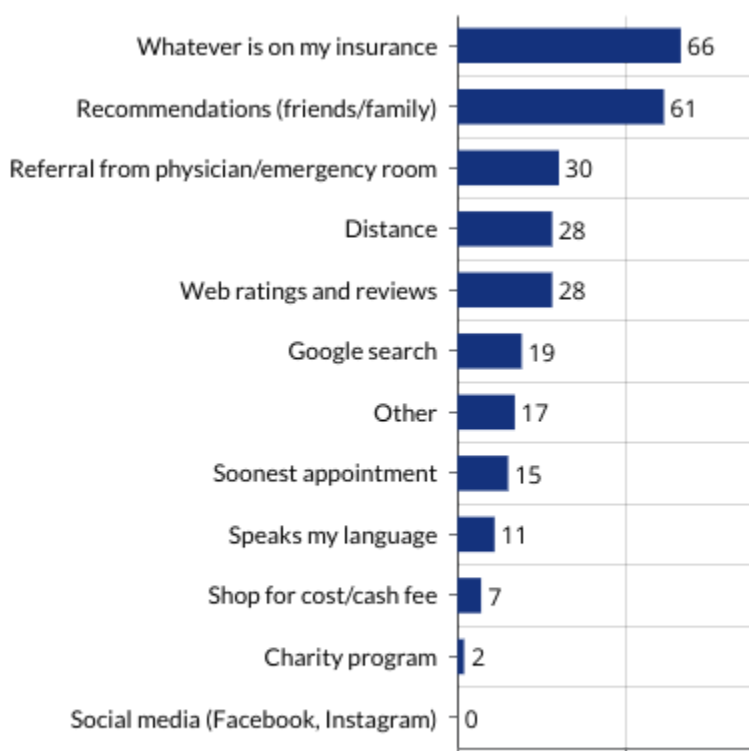
Source: Health Planning Council of Southwest Florida

Where do residents go to get healthcare?



Source: Health Planning Council of Southwest Florida

How do you choose your healthcare provider?



Source: Health Planning Council of Southwest Florida

In Lee County, the most popular sources of health information among residents were Google search (90 responses), health providers (87 responses), and friends or relatives (62 responses).

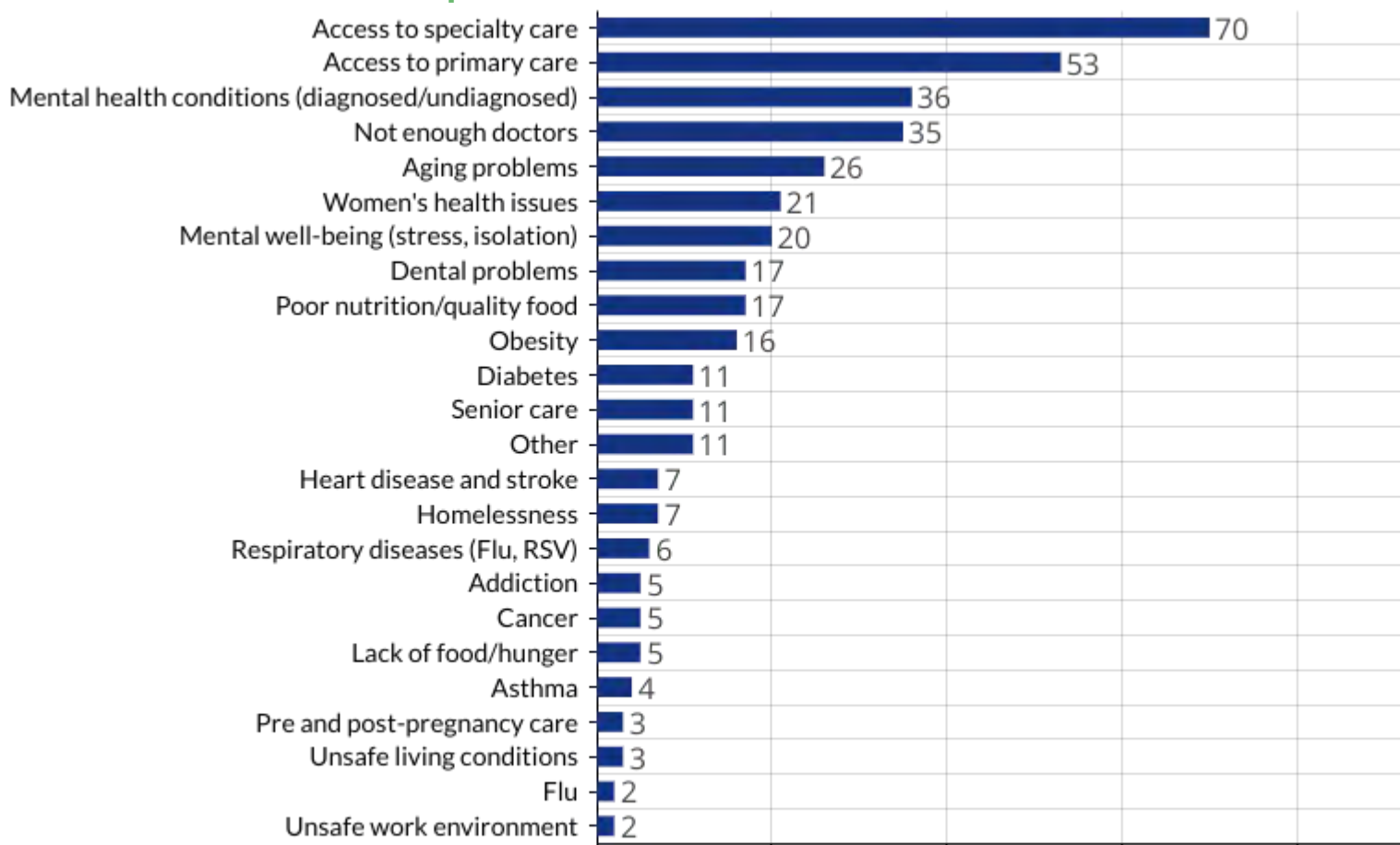
Majority of residents in Lee County go to a family doctor (114 responses) to receive their healthcare, followed by urgent care (56 responses)

Additionally, 88% of residents in Lee County reported having a primary care provider.

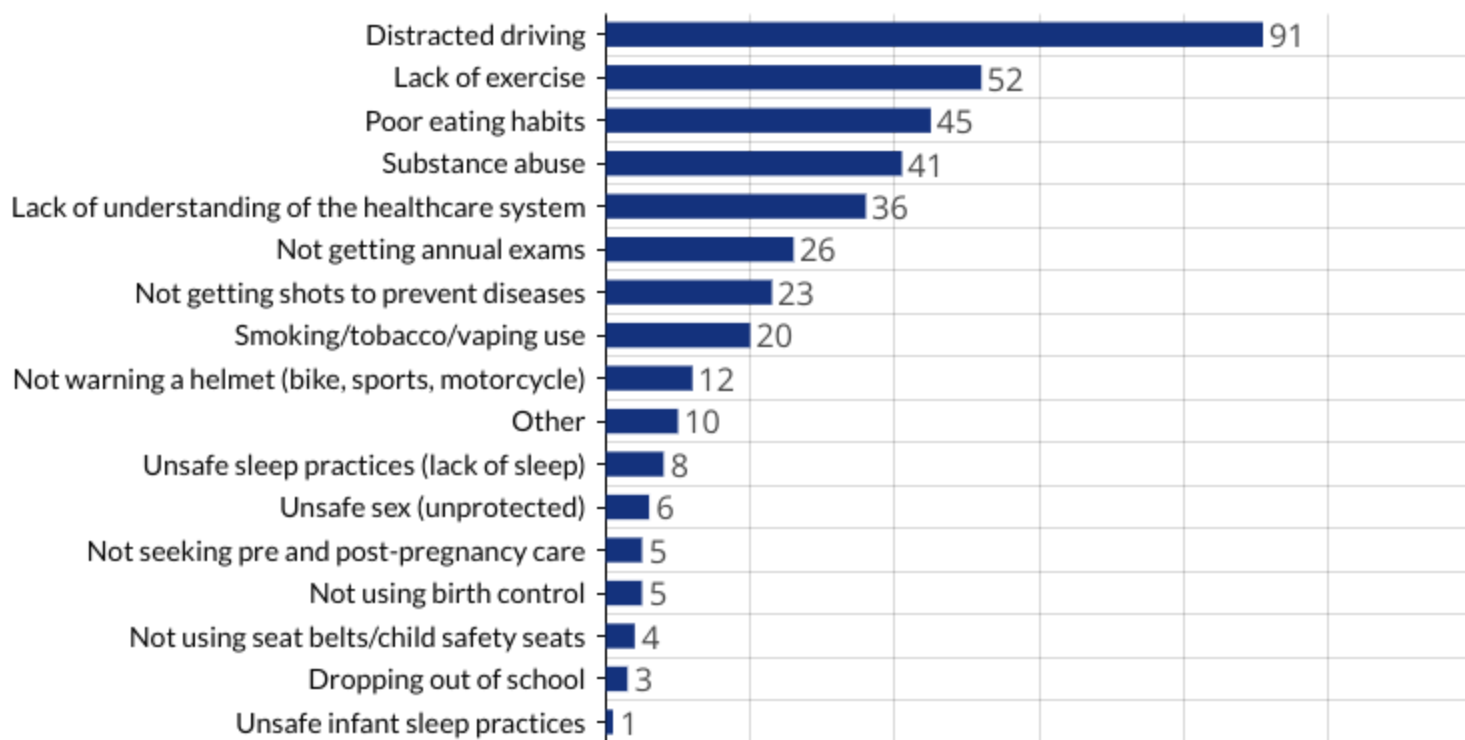
When choosing a healthcare provider, the top reasons cited by residents were whatever is on their insurance (66 responses), recommendations from friends/family (61 responses), and referrals from physicians or emergency rooms (30 responses).

Key Health Concerns and Risky Behaviors

What are the three most important health concerns?



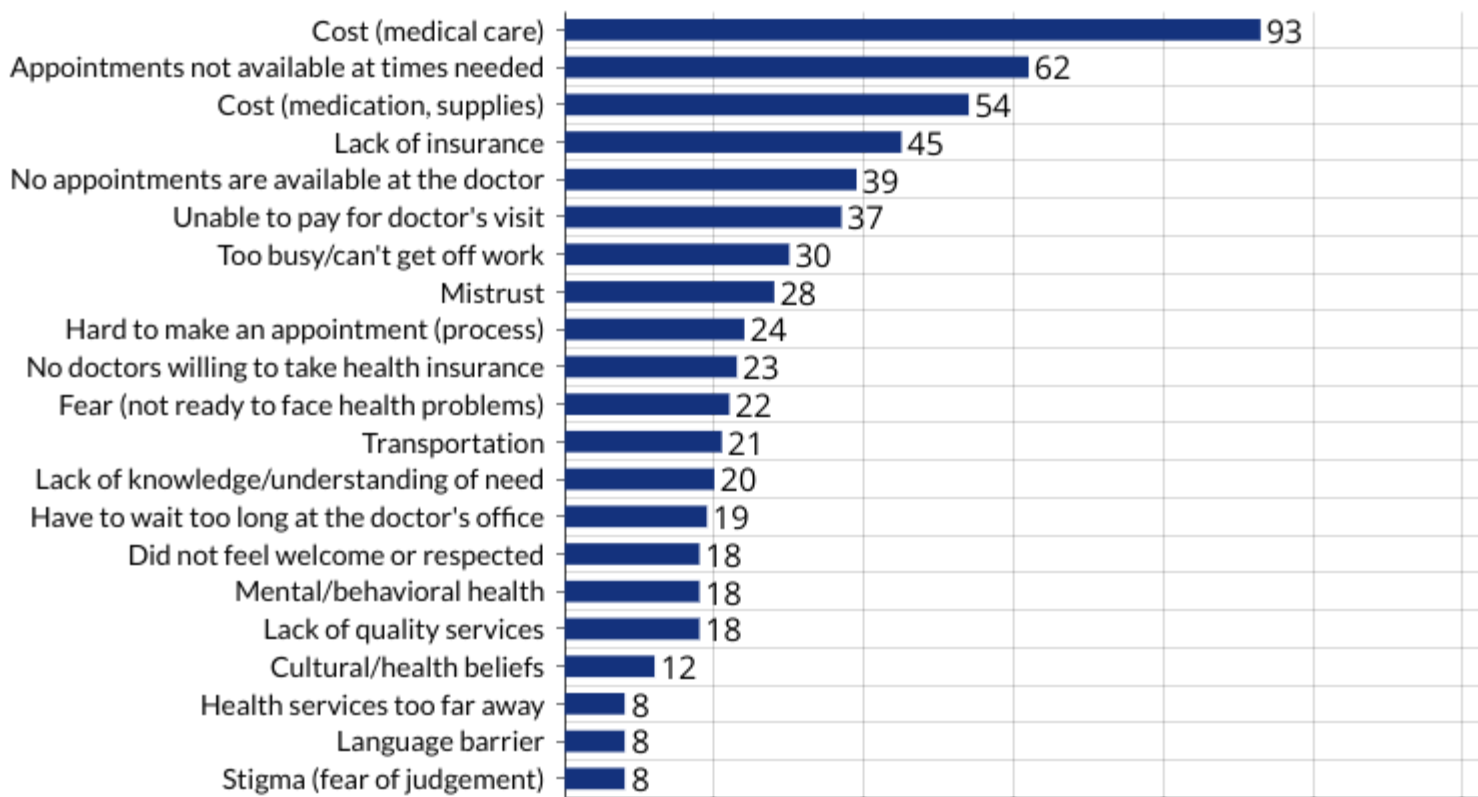
Which of the following are the three most important risky behaviors in your community?



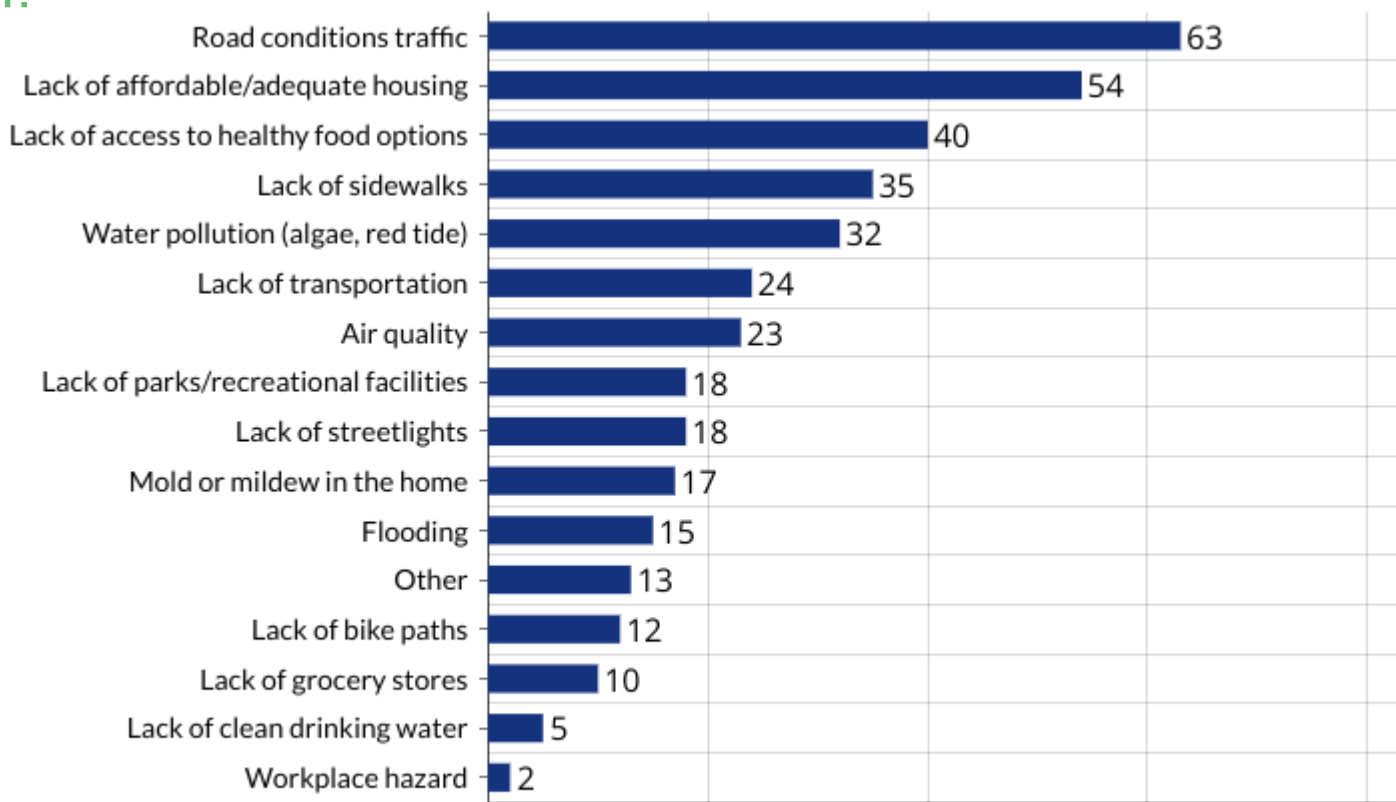
Source: Health Planning Council of Southwest Florida

Barriers to Healthcare and Environmental Factors

What do you think is the main reason that keeps people in your community seeking medical treatment?



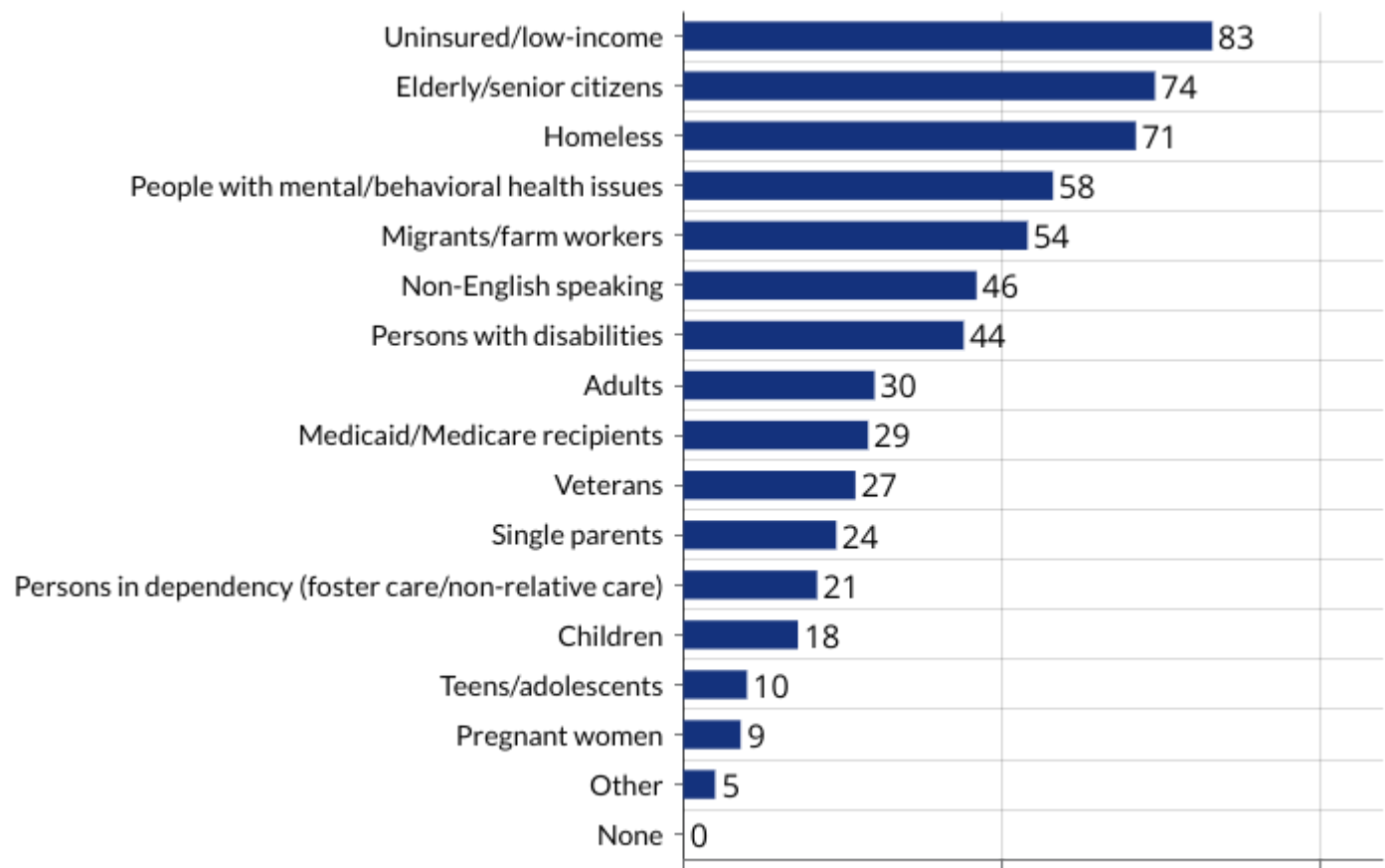
Which environmental factors affect your health, your friends, and/or your family's health?



Source: Health Planning Council of Southwest Florida

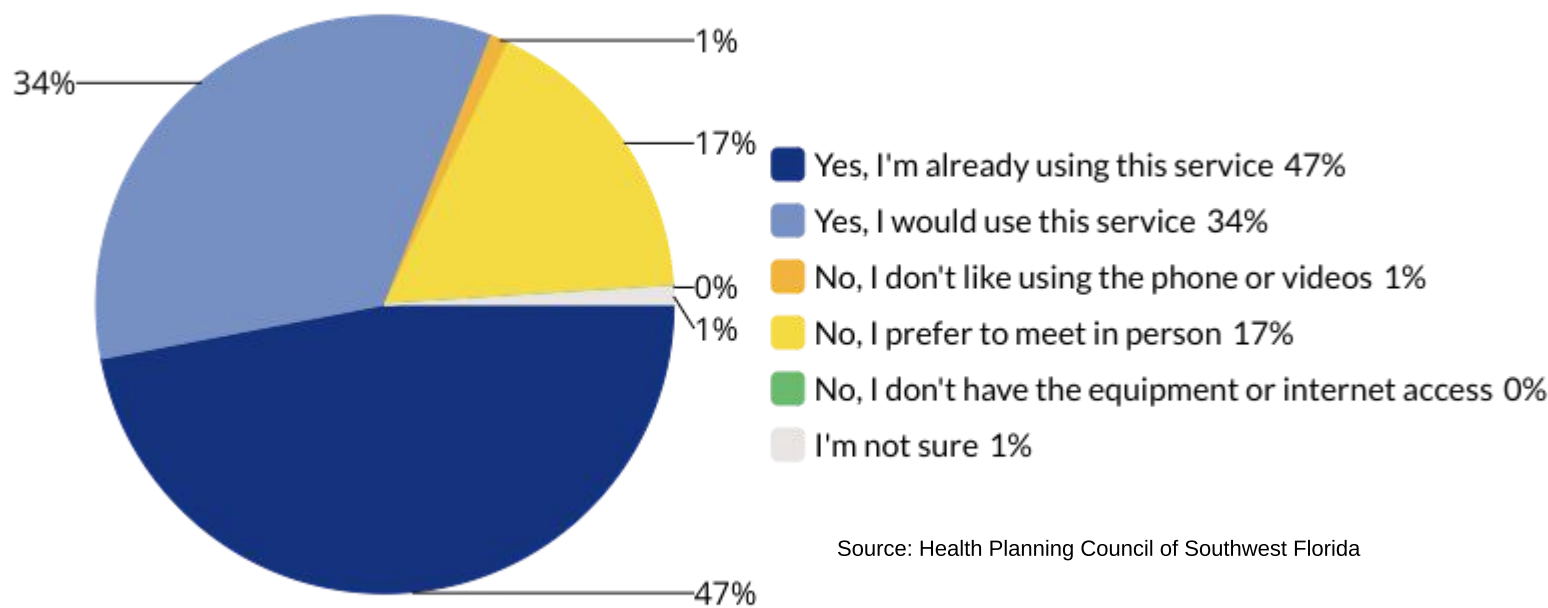
Healthcare Access Challenges and Service Needs

What types of residents have more difficulty accessing healthcare than others in your community?



Source: Health Planning Council of Southwest Florida

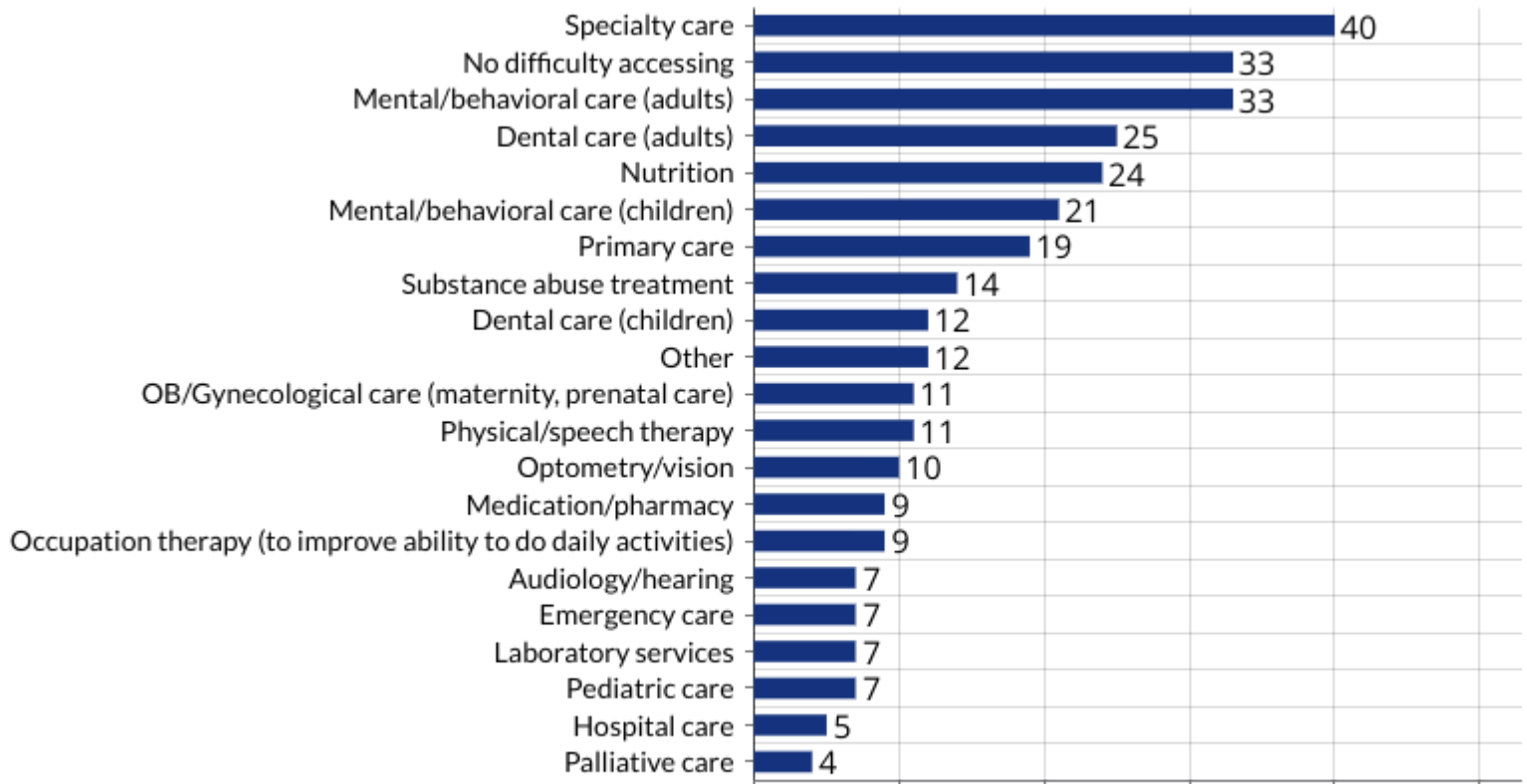
If telemedicine (medical visits via phone or computer with video) were available, would you or your family/friends use those services?



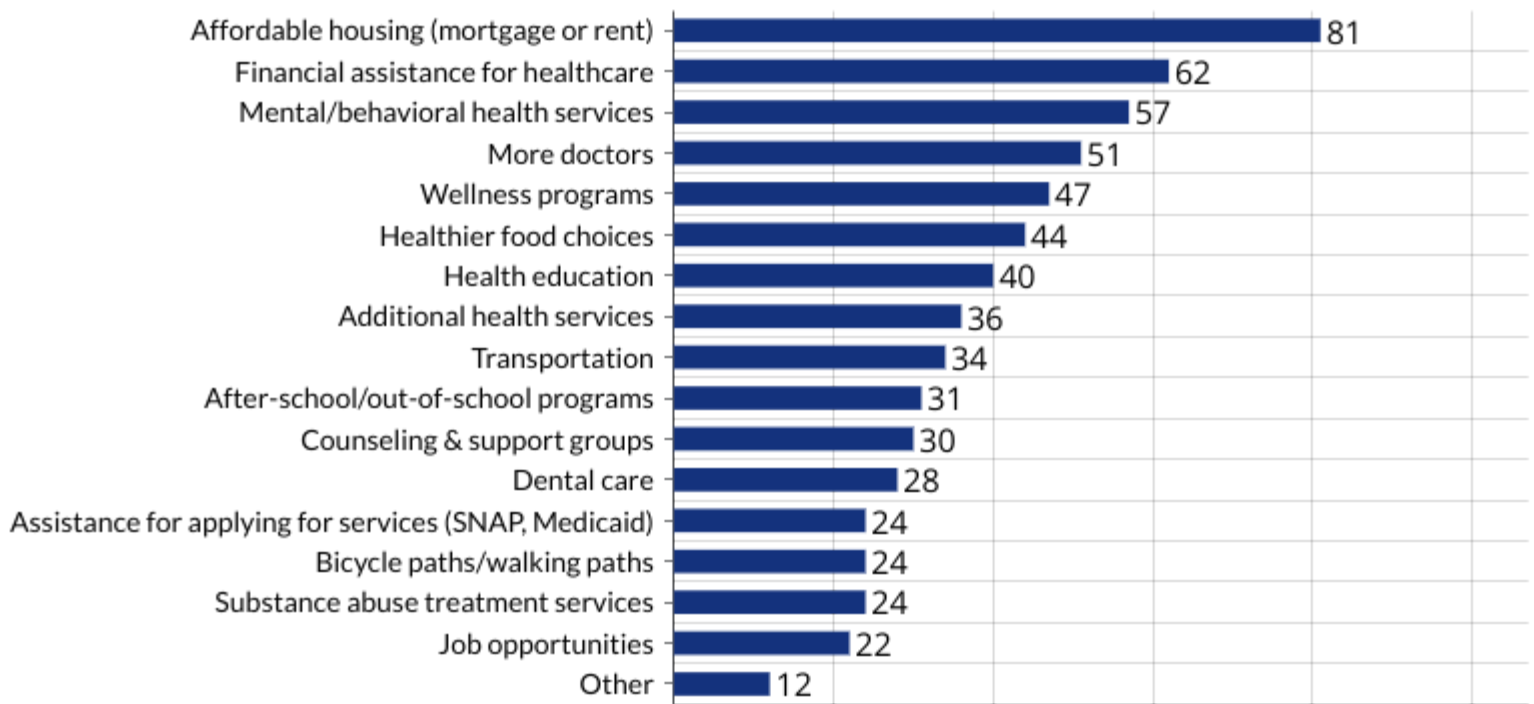
Source: Health Planning Council of Southwest Florida

Healthcare Access Challenges and Service Needs

Are there services that you, your friends, and your family in your community have difficulty accessing?



What does your community need to improve the health of your family, friends, and neighbors?



Source: Health Planning Council of Southwest Florida

Ranking of Community Priorities

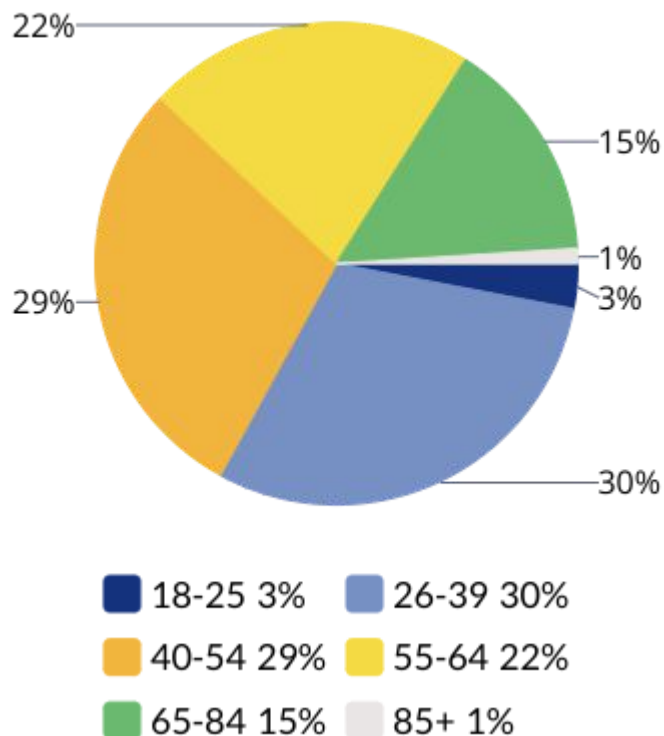
As part of the community health survey, participants were asked to prioritize 10 healthcare-related areas. The 10 public health categories were ranked by their order of importance as perceived by Lee County residents. The top five priorities are the primary focus of the local public health system's efforts.

2025



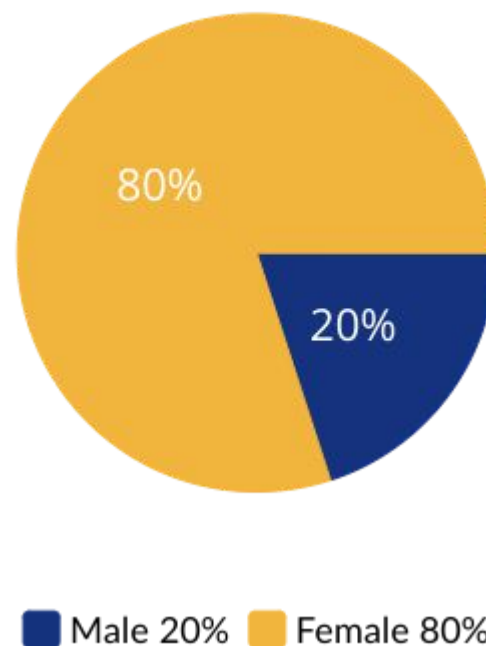
Source: Health Planning Council of Southwest Florida

Age



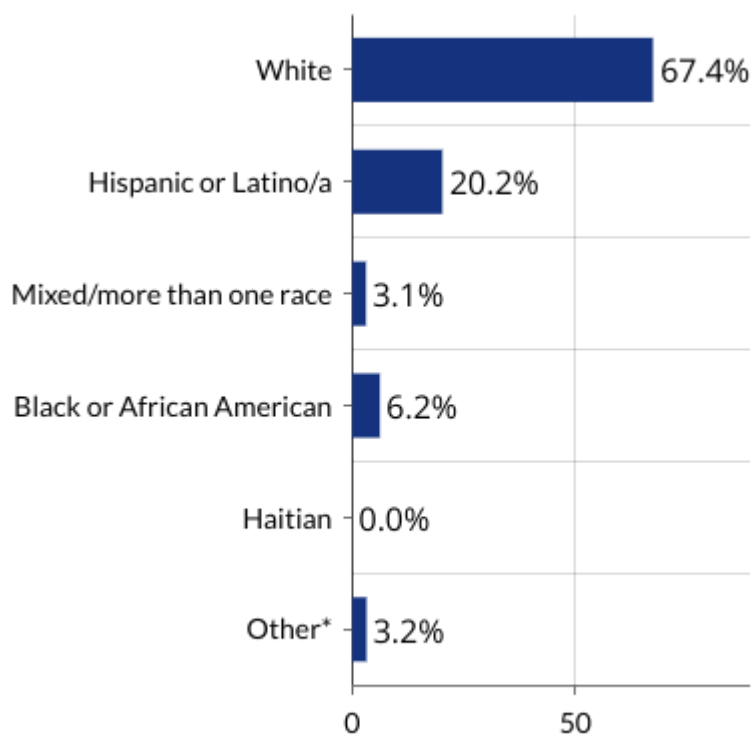
Source: Health Planning Council of Southwest Florida

Sex



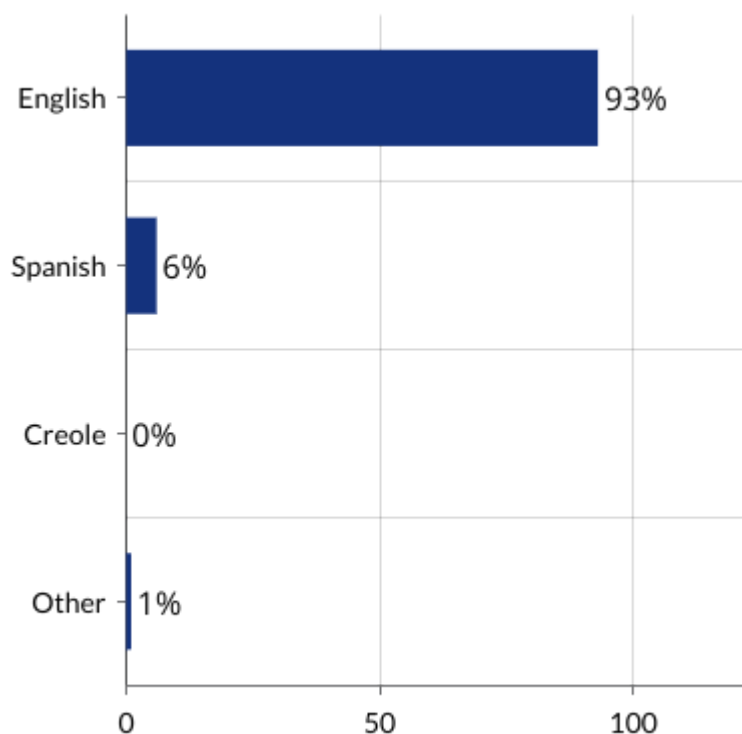
Source: Health Planning Council of Southwest Florida

Race



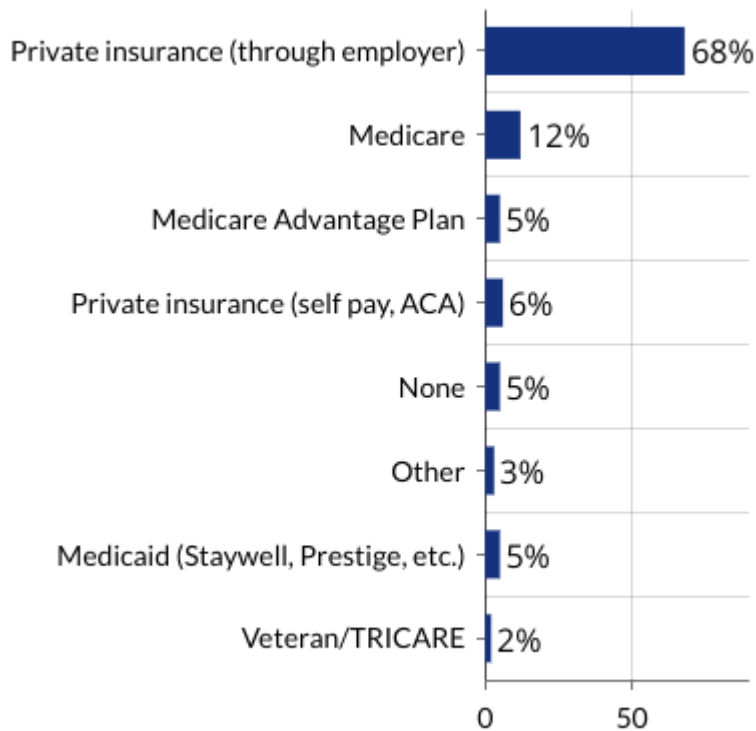
*Other - American Indian or Alaska Native, Asian

Primary Language



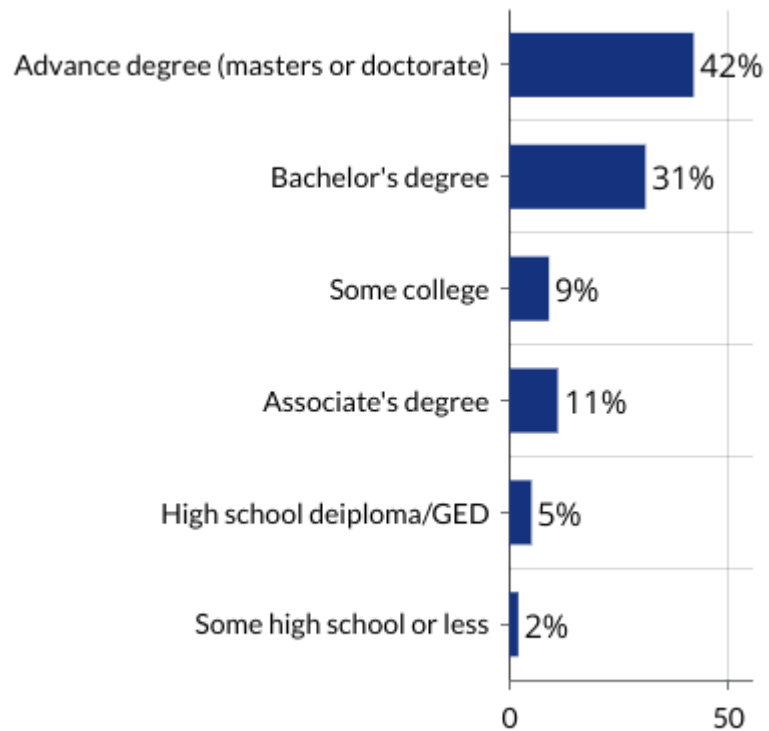
Source: Health Planning Council of Southwest Florida

Insurance Type



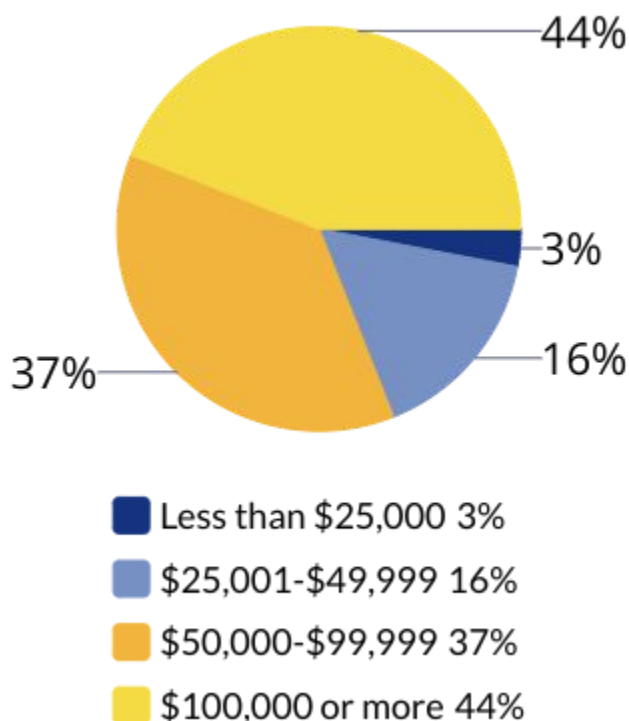
Source: Health Planning Council of Southwest Florida

Highest Level of Education



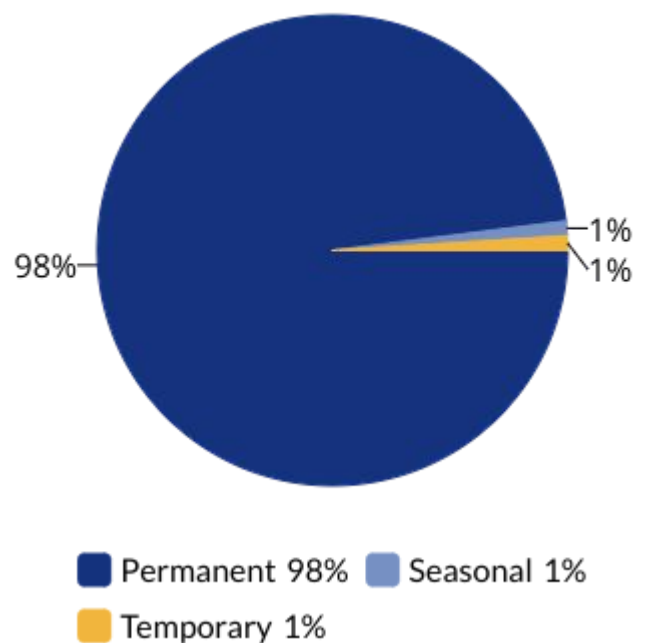
Source: Health Planning Council of Southwest Florida

Annual Household Income



Source: Health Planning Council of Southwest Florida

Residency Status



Source: Health Planning Council of Southwest Florida



Stock photo

A focus group should be conducted to gather additional community feedback regarding health and healthcare in Lee County, as part of the community feedback section of the Community Health Needs Assessment (CHNA). The Health Planning Council of Southwest Florida (HPC) designed the focus group questions, which were reviewed and improved by NCH.

In June 2025, a focus group was conducted with a group of Lee County residents via Zoom. Before the focus group began, HPC had the participants fill out a demographic form. A focus group consisting of five individuals participated. The participants' ages ranged from 33 to 69, with four females and one male. All five focus group participants were permanent residents of Lee County residing in different communities in the county (Cape Coral, Fort Myers, Lehigh Acres, and North Fort Myers). The majority (80%) of participants identified as white, and 20 percent identified as Hispanic. The demographic questionnaire included a question about annual health insurance status. All participants reported having private insurance, with one participant also having Medicaid. All participants were college-educated, ranging from those with some college experience to those holding either a bachelor's or advanced degree.

The focus group session had a facilitator and a recorder. Before the start of the focus group, a script was read aloud that described the purpose of the focus group, outlined the ground rules, and provided instructions on the process. The focus group started with an icebreaker. The facilitator asked each participant to state their name and how long they had lived in Lee County. The questions that were asked during the focus group consisted of the following:

- General thoughts on health and well-being.
- What are some things in the area that have positively impacted their health or the health of their family?
- The problems or barriers to maintaining good health and well-being.
- Groups of people who need additional services or assistance in improving their health and well-being.
- What is needed to improve the health of the community?

Overall Perceptions of the Healthcare System

The focus group discussion centered on healthcare access challenges in Lee County, with participants expressing concerns about long wait times for appointments, particularly with specialists, as well as the difficulty in accessing timely medical services. It was highlighted how ERs are overwhelmed by patients who cannot access timely care elsewhere. In contrast, others noted the lack of urgent care facilities and the inconvenience of having to travel to Golisano for specialty services. The group also discussed how recent improvements in healthcare access have been offset by increased demand, making it difficult for residents to receive timely medical care.

Community Strengths Supporting Health and Healthcare

The group discussed the positive health impacts in the community, with several residents highlighting Lee Health as a key provider offering wellness programs and support for conditions such as diabetes. A participant shared positive experiences with WIC services during pregnancy, while others noted improved access to fresh produce through farmers' markets and enhanced green spaces in parks. The discussion also touched on the benefits of local recreational facilities, such as recreation centers and libraries, with plans for further park improvements being mentioned.



Source: Health Planning Council of Southwest Florida

Barriers to Health and Well-being

The group discussed challenges in maintaining health and accessing healthcare, with cost and insurance being significant barriers. The conversation highlighted the importance of finding reliable healthcare providers and the financial burden of healthcare costs, particularly for individuals without adequate insurance coverage.

Focus group participants discussed specific community health challenges, identifying vulnerable groups including older people, low-income individuals, LGBTQ+ community, homeless people, and non-native English speakers who may struggle to navigate healthcare systems. They emphasized the need for improved access to healthcare providers, including doctors and other medical professionals, and highlighted the importance of enhancing communication about available healthcare resources. The discussion concluded with a focus on increasing awareness of existing programs and improving navigation of healthcare systems.

It was identified that there is a need for more hospital beds and additional healthcare facilities, especially in North Fort Myers and Lehigh. The participants highlighted issues with hospital specialization, long distances between facilities, and the high cost of inter-facility transfers, which burden patients with additional expenses. They also emphasized the importance of improving transportation, increasing social services, and expanding the number of social workers, as well as expanding mobile integrated health services to provide care in the community.

Identified Priorities Needs

We asked participants to list what was needed to improve the community's health. Below are the responses, with the top needs bolded.

- **More healthcare providers/doctors**
- Awareness of available programs/resources
- Increase ways to navigate resources
- **More hospitals in Cape Coral, Lehigh Acres, and North Fort Myers**
- Better access to pediatric urgent care
- Better access to public transportation
- Better interfacility transfers, not being charged because the original facility couldn't help you
- **Increased access to specific services**
- Navigators, to help navigate the system
- Increase in social workers in the hospital
- **More services in the home/community (paramedicine and outreach teams, not concierge)**
- Better care within nursing home facilities
- Increase access to mental health services
- Increase access to affordable dental and vision services

The group discussed and prioritized healthcare needs in Lee County, with more healthcare providers and doctors emerging as the top choice, followed by increased access to specific services, additional hospitals in certain areas, and expanded services within the home community. Participants explained their reasoning, with some focusing on the need for inpatient beds and others emphasizing the importance of outreach and home-based care.

Focus group participants strategized how to attract more doctors and providers to the community, with a participant suggesting programs that offer incentives for long-term commitment. One participant highlighted that physicians are overworked due to heavy patient loads and extensive charting, leading to a lack of work-life balance. This is not primarily about pay, but rather about better incentives and a better quality of life. It was emphasized that there was a need for perks to make the area more appealing. It was noted that doctors are often drawn to higher-paying locations with lower workloads, suggesting that competitive compensation and effective workload management are key factors in attracting and retaining doctors.

It was noted that there is a need for more hospitals and healthcare facilities, particularly in underserved areas. They suggested increasing pressure on zoning boards, spreading facilities across the county rather than concentrating them in Fort Myers, and improving competition among healthcare providers. The conversation also touched on the potential for mobile clinics and community buses to provide healthcare services to those unable to access traditional facilities. Participants expressed concerns about the current state of the healthcare system, including issues with emergency care and patient transportation, and emphasized the importance of restoring public trust in healthcare services.

Participants were asked if they had any additional comments they would like to share about health and well-being in Lee County. A participant stated that there is little faith in receiving good healthcare in the area.

Community Leader Interviews

The Health Planning Council of Southwest Florida (HPC) conducted four key informant interviews in 2025 with the cooperation of NCH. The purpose of conducting the interviews was to gain a deeper understanding of the perspectives of key community leaders on the health and healthcare needs of Lee County residents. These conversations were intended to gather opinions from key individuals who are likely to be knowledgeable about the community and who are influential in shaping the views of others regarding health concerns in the area. The findings provide qualitative insights and reveal factors influencing views and sentiments regarding healthcare services in Lee County. A summary of community leaders' opinions is reported without judging the veracity of their thoughts and opinions.

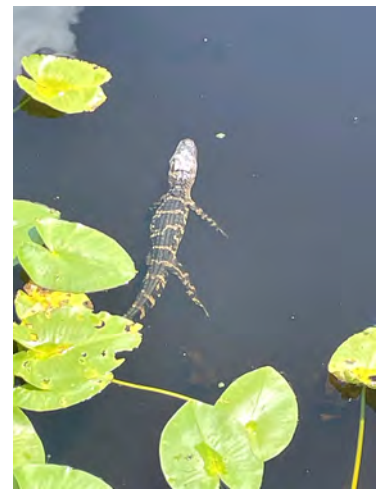
Methodology

The steering committee, consisting of NCH and HPC, compiled a list of possible interview subjects. The list included healthcare providers, healthcare consumers, county government officials, and representatives of local businesses and community organizations. HPC staff conducted the interviews over Zoom. The typical interview lasted between twenty-five and forty-five minutes. These interviews were conducted in April of 2025. The interviewees were told that none of their comments would be directly attributed to them but that a list of all participants would be included in this report. All reports were conducted using a standard questionnaire.

Overall Impression of Health in Lee County

HPC staff asked the interviewees to share their overall impression of health in Lee County, including the services available to meet healthcare needs and the general health of community residents. Listed are the key themes from the responses to this question:

- Overall healthy community
- Needs improvement in mental health
- More healthcare options, not just one large entity
- More physicians
- Long wait times to see specialists
- Underserved are still being underserved
- Women and children need more services
- Increase in physicians moving to concierge
- Have access to healthcare, regardless of insurance status



Source: Health Planning Council of Southwest Florida

Community Leader Interviews

Most Pressing Health Needs

HPC staff asked the interviewees what they think are the most pressing health needs in Lee County. Many of the identified pressing health needs in Lee County are deeply intertwined, with the core issue being the affordability and accessibility of comprehensive healthcare services, compounded by specific shortages in specialties, pediatric care, and significant logistical challenges related to transportation and affordable housing. Listed are some of the responses from community leaders to this question:

- Increase in negative health behaviors
- Cancer and heart disease
- Access to primary care
- Cost of healthcare
- Access to affordable health insurance
- Access to specialty care
- Large number of uninsured people
- More choices for healthcare
- Access to specialty pediatric care

To follow up, the community leaders were asked for their thoughts on local actions that could help address the health needs they mentioned. Several responses emphasized the importance of community-wide efforts, including multi-agency involvement and collaboration, in effectively addressing health challenges. Specific suggestions included having more places like Family Health Centers where it is a one-stop shop, ensuring people are aware of current systems that are in place to help with the financial burdens of healthcare, establishing safe walking spaces and promoting access to healthy foods, and increasing the availability of Naloxone to combat overdose deaths.

Important Health Issues by Population

Community leaders were asked to share their thoughts on the most pressing health issues affecting various populations in Lee County. The highlighted populations were children, teens/adolescents, adults, and the elderly.

Children:



- Falling in and out of care
- Obesity
- Not getting vaccinated

Teens/adolescents:



- Behavioral health
- Smoking/vaping issues

Adults:



- Overweight/obesity
- Cost of insurance
- Socioeconomic issues
- Lack of affordable after hours care

Elderly:



- Alzheimer's and dementia
- Lack of care options in and out of home
- Isolation

Source: Health Planning Council of Southwest Florida

Critical Challenge Facing Residents and Next Steps

Of all the needs and services discussed throughout the interviews, we asked key informants what they believed was the most critical challenge facing Collier County residents.

- Access to affordable care
- Behavioral health services
- Access to transportation
- Affordability of living
- Lack of primary care
- Specific service shortages (pediatric, specialty care, and maternity care)

After identifying the most critical challenges facing residents, community leaders were asked whether any actions were needed to address these challenges and who they believed should be responsible for implementing them. Key actions include leveraging improved data for decision-making, enhancing community education on available services, and actively recruiting and retaining medical professionals. Additionally, efforts should focus on strengthening the roles of non-profits and improving transportation infrastructure. Responsibility is viewed as shared, necessitating a collective impact model with public-private partnerships to foster a healthier community.

Interviewed Community Leaders

David Mulicka
County Commissioner
Lee County Commissioner

Tina Cordell
Program Manager, Early Steps
Health Planning Council of Southwest Florida

Jorge Quinonez, MD
Executive Vice President & Chief Medical Officer
Family Health Center of Southwest Florida

Kevin Murphy
Director of Planning and Performance Management
Florida Department of Health in Lee County



Source: Health Planning Council of Southwest Florida



2025 Lee County Community Input

Prepared by the Health Planning Council of Southwest Florida, Inc.

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Lee County Health Needs Assessment 2025



Prepared by

In Partnership With



HEALTH
PLANNING
COUNCIL
OF SOUTHWEST FL

HEALTH FOCUSED COMMUNITY DRIVEN



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Source: Photo courtesy of the Health Planning Council of Southwest Florida, Inc.

Population

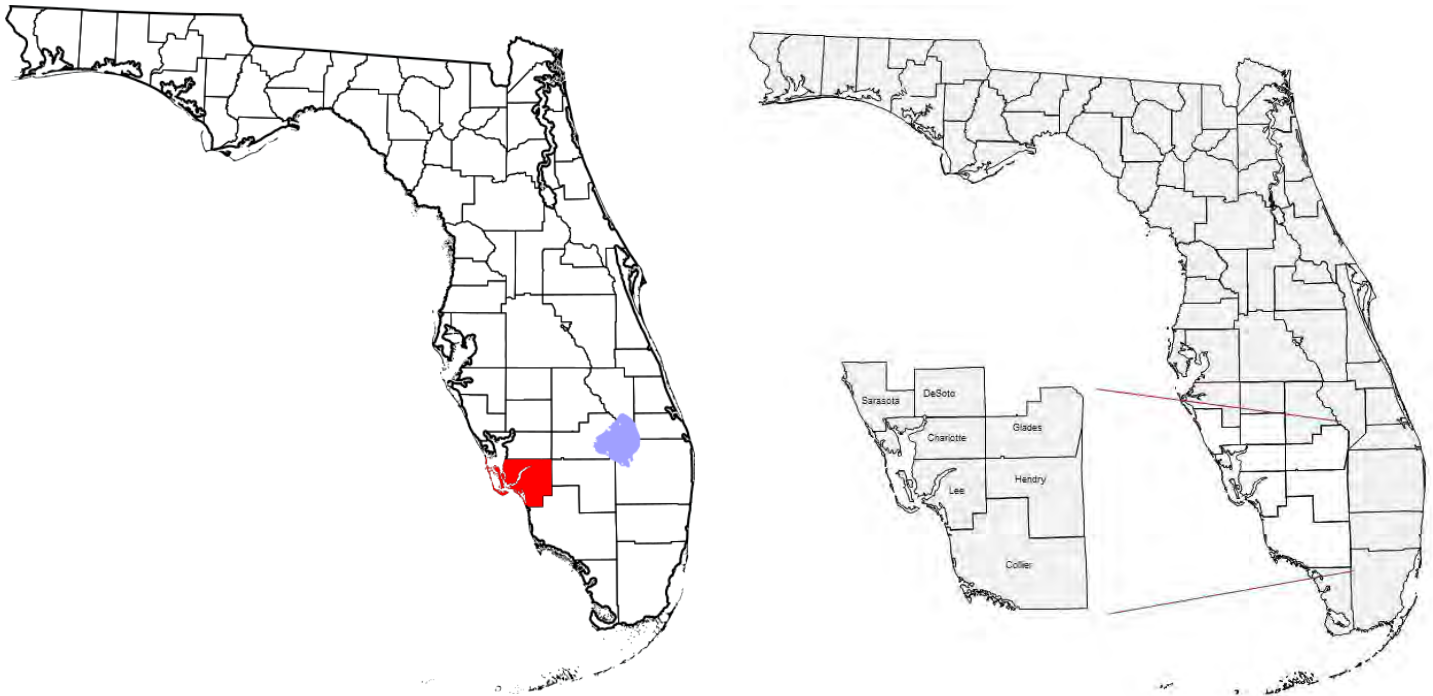


Source: Photo courtesy of the Health Planning Council of Southwest Florida

This section of the Community Health Assessment (CHA) for Lee County provides a detailed overview of the demographic characteristics of our community. It analyzes population growth, age distribution, and gender, as well as race and ethnicity. Recognizing the unique dynamics of Lee County, this section also examines the seasonal population and the population of people with disabilities. Understanding these population characteristics is essential for interpreting health data, identifying areas for improvement, and tailoring services to meet the diverse needs of Lee County residents.

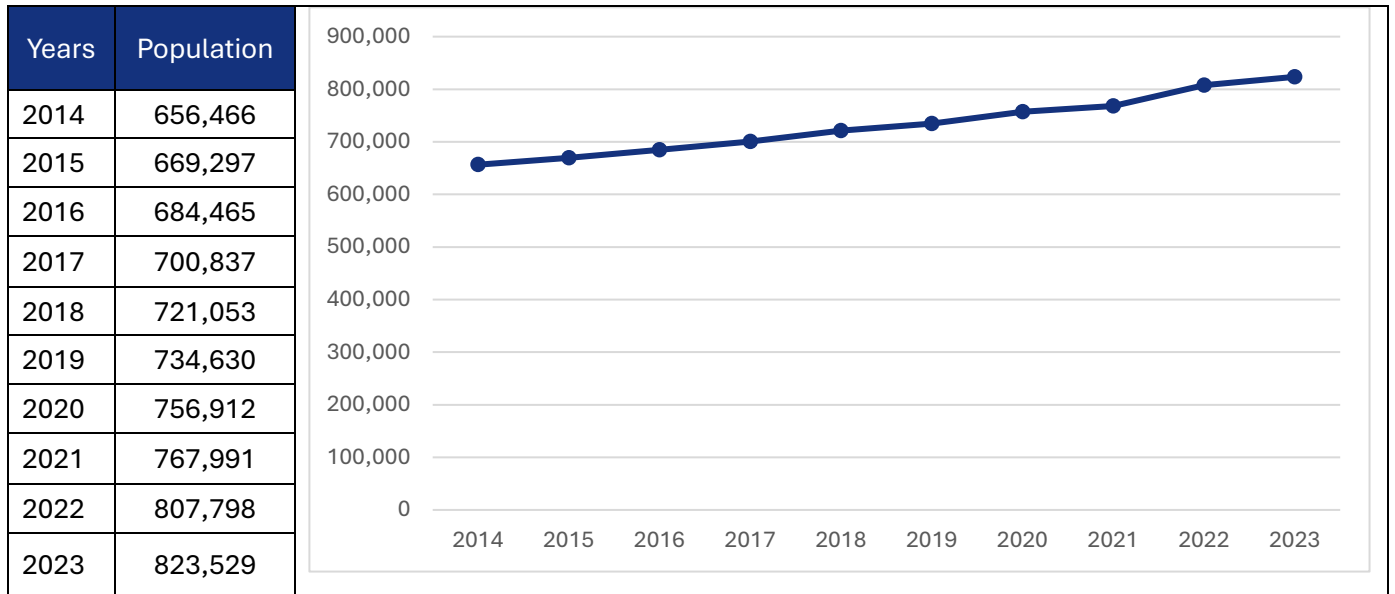
Population Growth, Age Distribution, and Gender

The sheer number of people in a community is the leading determinant of healthcare services. Lee County, which has a population of over 823,529 (2023), is in southwest Florida. The county also shares borders with the following counties: Charlotte to the north, Hendry to the east, Glades to the northeast, and Collier to the south. Lee is one of seven counties in southwest Florida that comprise the Local Health Planning District 8 as designated by the Florida Agency for Health Care Administration (AHCA). Fort Myers is the county seat, with Cape Coral being the largest city in the county. Lee County is 1,212 square miles in area; about 35 percent of the area is covered by water. It is the 26th largest county in Florida. According to the Florida Office of Economic and Demographic Research (EDR), in 2024, the county had a population density of about 1,058.9 persons per square mile compared to the state average of 429 persons per square mile. Lee County is Florida's 8th most populous county, according to EDR.



Between 2014 and 2023, the resident population of Lee County grew at a swift pace. Lee County's population increased by 167,063 or more than 25 percent, from 656,466 in 2014 to a total of 823,529 by 2023.

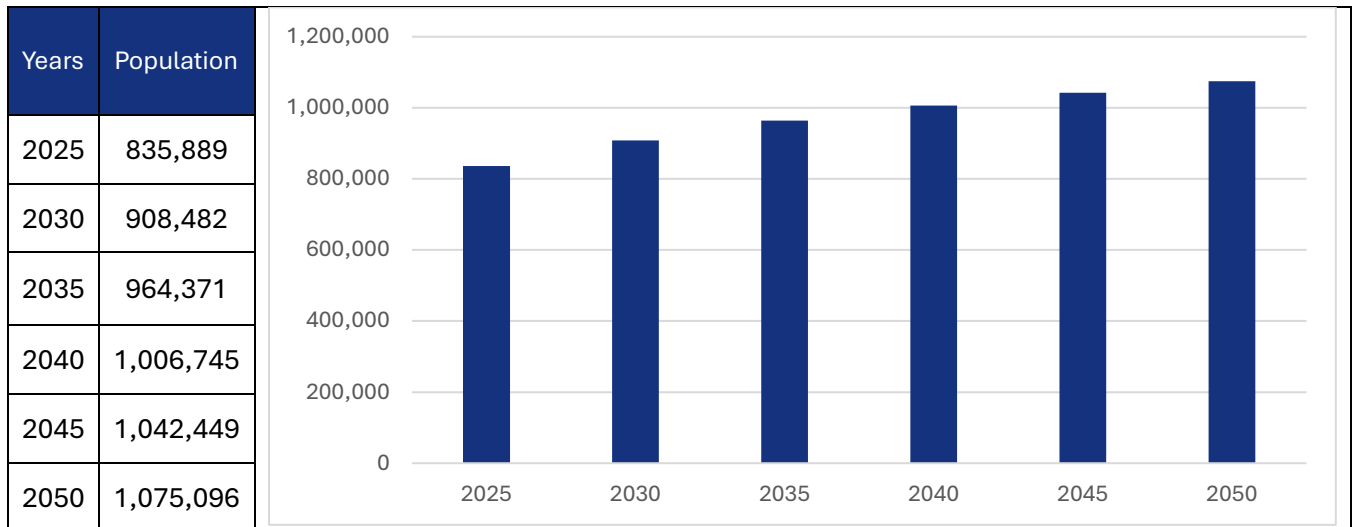
Exhibit P1: Resident Population in Lee County, 2014-2023



Source: Florida Legislature's Office of Economic and Demographic Research (EDR)

The resident population of Lee County is projected to increase by 239,207 between 2025 and 2050, a 28.6 percent increase.

Exhibit P2: Estimated Population in Lee County, 2025-2050

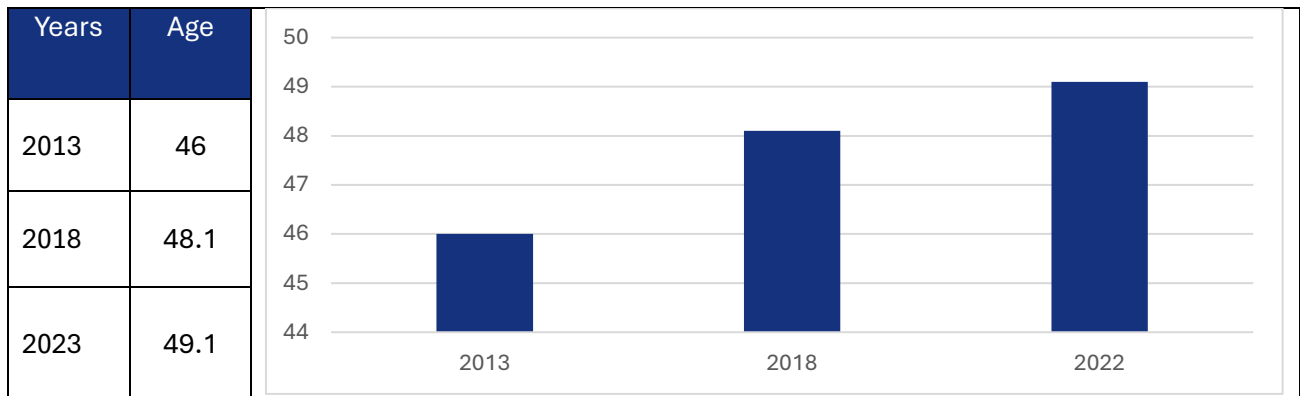


Source: Florida Legislature's Office of Economic and Demographic Research (EDR)

2025 Lee County Community Health Assessment: Population

The median age increased in Lee County by 3.1 years between 2013 and 2023 (46 to 49.1).

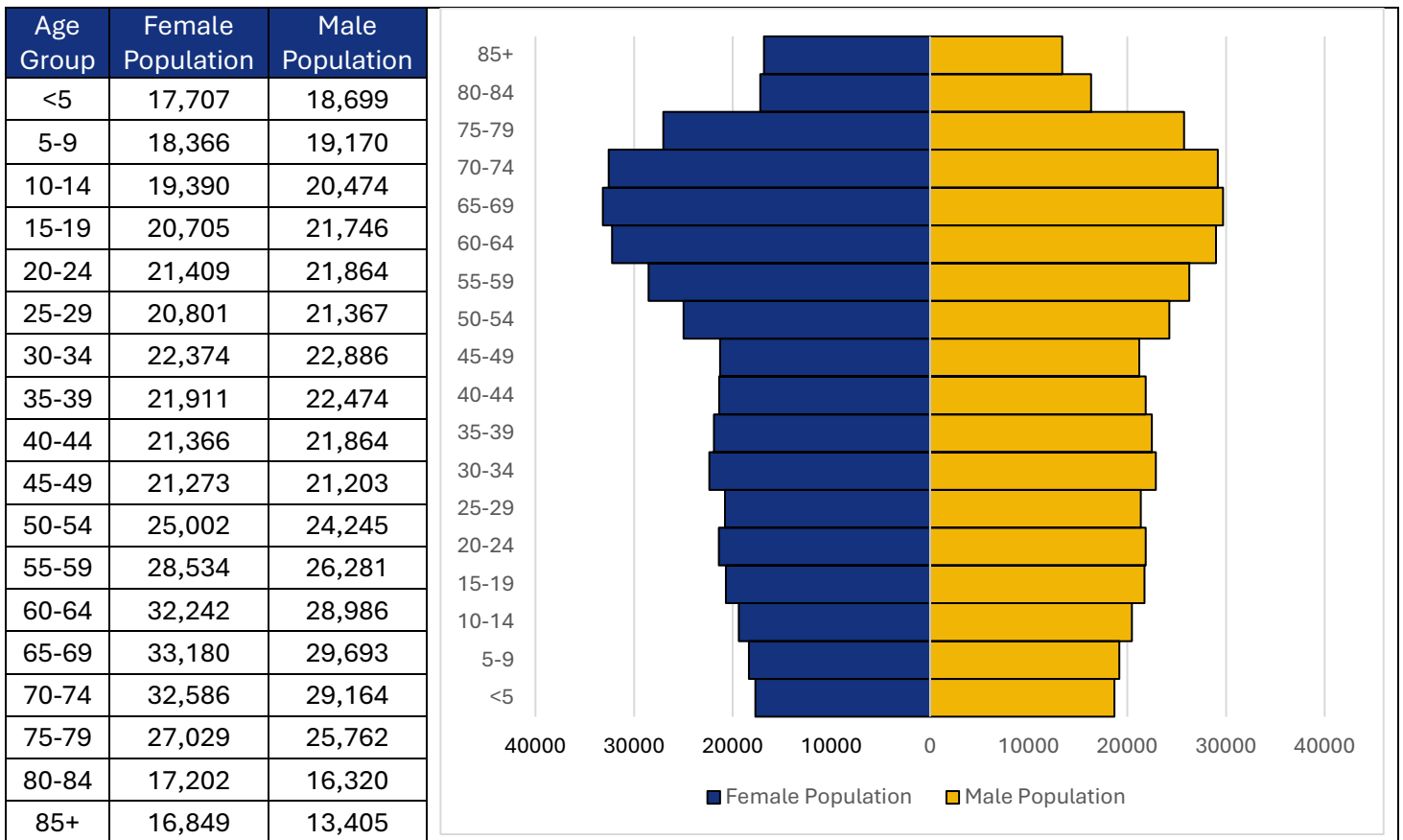
Exhibit P3: Lee County Median Age, 2013, 2018, 2023



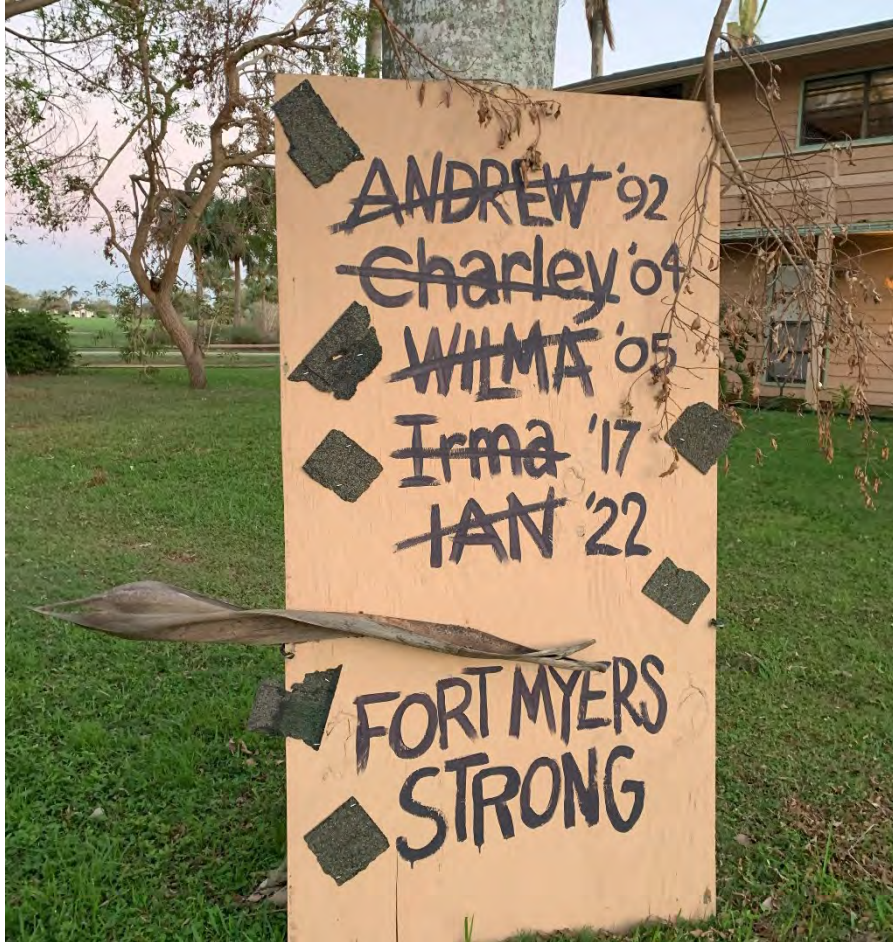
Source: United States Bureau of the Census, American Community Survey, Table B01002

In Lee County, as in all counties in the United States, mortality rates are higher for males than for females. This variance in death rates results in life expectancy at birth being, on average, 5 years greater for females than males. This ultimately results in a more significant female population beginning around 45-49 years of age and increasing over males for every age group thereafter.

Exhibit P4: Population by Age Distribution and Gender, Lee County, 2023



Source: Florida Legislature Office of Economic Demographic Research



Source: Photo courtesy of the Health Planning Council of Southwest Florida

Race and Ethnicity

Between 2003 and 2023, the black population in Lee County more than doubled, from 36,686 to 75,969, respectively. However, since the populations of the other groups also increased, the overall share of the population increased by only 1.8 percent, from 7.4 to 9.2 percent.

Exhibit P5: Lee County Population by Race, 2003, 2013, 2023

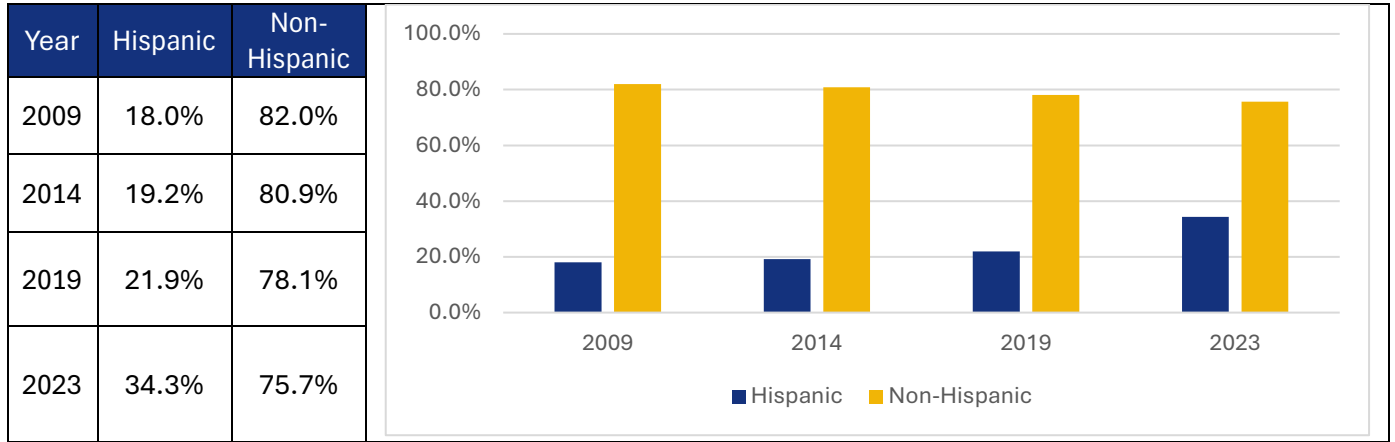
	2003		2013		2023	
	Total	Percent	Total	Percent	Total	Percent
White	449,316	90.2%	565,965	87.4%	711,692	86.4%
Black	36,686	7.4%	57,789	8.9%	75,969	9.2%
Other	12,351	2.5%	23,517	3.6%	35,868	4.4%

Source: Florida Legislature Office of Economic Demographic Research

2025 Lee County Community Health Assessment: Population

It is worth noting that in the State of Florida, race and ethnicity are tracked separately. While Hispanics constituted 18 percent of the population in Lee in 2009, by 2023 the proportion increased to more than 34 percent.

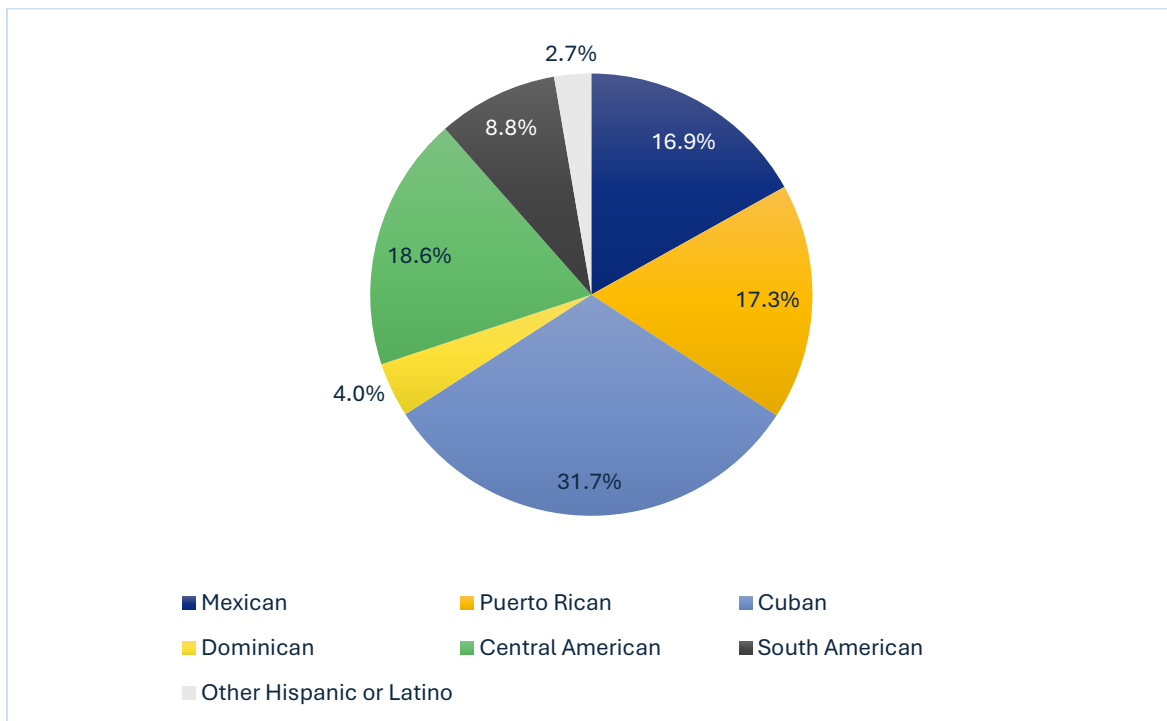
Exhibit P6: Lee County Population by Ethnicity, 2009-2023



Source: Florida Legislature Office of Economic Demographic Research

The largest group of people in Lee County who identify as Hispanic or Latino are of Cuban origin (31.7 percent). The next most common origins are Central American (18.6 percent), Puerto Rican (17.3 percent), and Mexican (16.9 percent).

Exhibit P7: Hispanic or Latino Origin, Lee County, 2023



Source: United States Bureau of the Census, American Community Survey, Table B03001

2025 Lee County Community Health Assessment: Population

In 2023, the largest share of Lee County residents (51.3%) were born in another U.S. state outside of Florida. The percentage of residents of Lee County who were foreign-born increased from 16.7 percent to 18.8 percent between 2019 and 2023. Most foreign-born residents were from Latin America (77%), followed by those from Europe (9%).

Exhibit P8: Lee County Population by Place of Birth, 2019, 2023

	2019		2023	
	Total	Percent	Total	Percent
Born in Florida	202,130	26.2%	227,135	27.2%
Born in another state in the US	413,243	53.6%	428,208	51.3%
Born outside of the US*	26,711	3.5%	22,719	2.7%
Foreign-born+	128,493	16.7%	156,511	18.8%

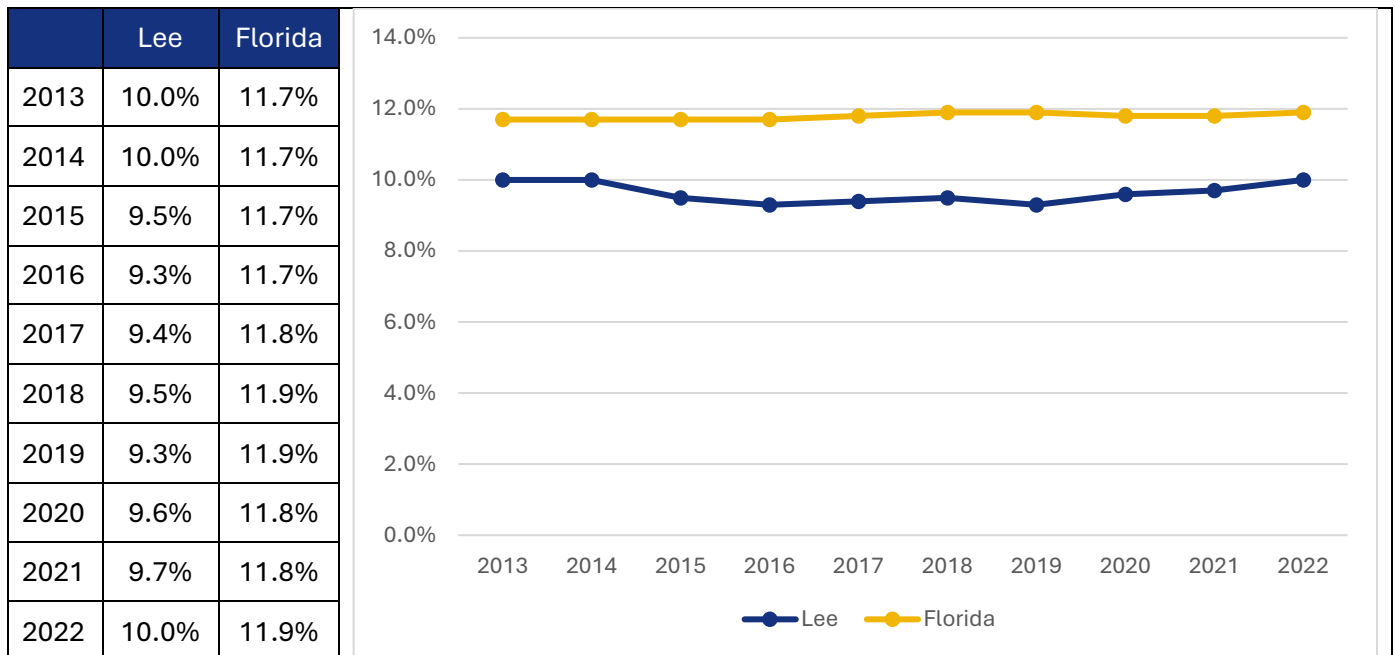
Source: United States Bureau of the Census, American Community Survey, Table B05002

*Persons born outside of the United States are residents or citizens born abroad.

+ Foreign-born refers to persons who were not US citizens or residents when born outside of the country

Lee County consistently has a lower percentage of population that speaks English less than very well when compared to Florida (2022, 10.0% Lee, 11.9% Florida).

Exhibit P9: Population 5+ that Speak English Less Than Very Well, Lee County and Florida, 2013-2022

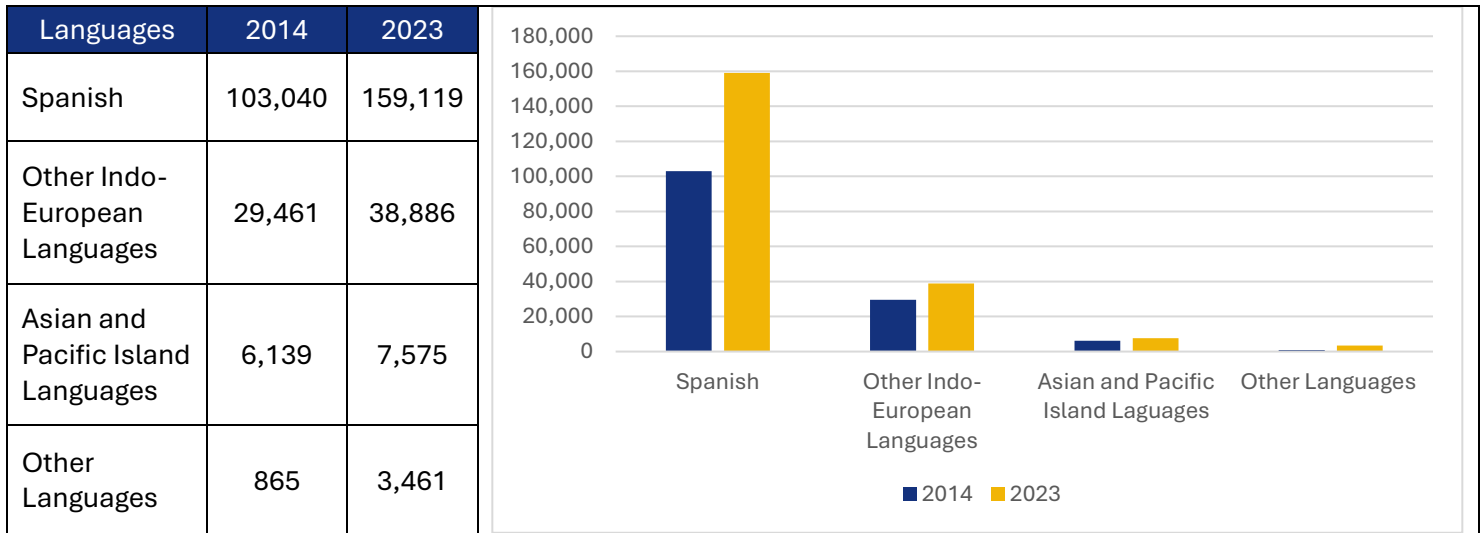


Source: United States Bureau of the Census, American Community Survey, Table B06007

2025 Lee County Community Health Assessment: Population

In 2023, of households that speak languages other than English 76.1 percent spoke Spanish.

Exhibit P10: Lee County Population Estimated Languages Spoken at Home (Other than English), 2014, 2023



Source: Photo courtesy of the Health Planning Council of Southwest Florida, Inc.

Drivers of Health



Source: Photo courtesy of the Health Planning Council of Southwest Florida

This section of the Community Health Assessment (CHA) for Lee County explores the critical role of drivers of health in shaping the well-being of our residents. Recognizing that factors beyond individual behaviors and healthcare access significantly influence health outcomes, this section examines the impact of drivers such as socioeconomic factors, education, housing, homelessness, and the workforce within Lee County. Understanding the distribution and influence of these drivers is vital for identifying the root causes of health challenges and developing comprehensive strategies that address the broader context in which people live, learn, work, and play, ultimately improving health across Lee County.

Education Access and Quality

In past years, the Florida Kindergarten Readiness Screener (FLKRS) was the screening tool utilized for this purpose. However, in 2022-2023, Florida adopted a statewide Coordinated Screening and Progress Monitoring System known as the Florida Assessment of Student Thinking (FAST) Star Early Literacy. FAST Star Early Literacy now serves as the kindergarten screener. To be deemed ready for kindergarten, students needed to score 690 or higher on the FAST Star Early Literacy Assessment.

2025 Lee County Community Health Assessment: Drivers of Health

This assessment is administered to all kindergarten students within the first 30 days of kindergarten.

In 2023, 49 percent of Lee County students were deemed ready when they entered kindergarten, which is lower than the state of Florida (51%). For those who attended VPK, the rates were significantly higher than those among the total population. However, Lee is still below the state average (63% Lee, 64% Florida).

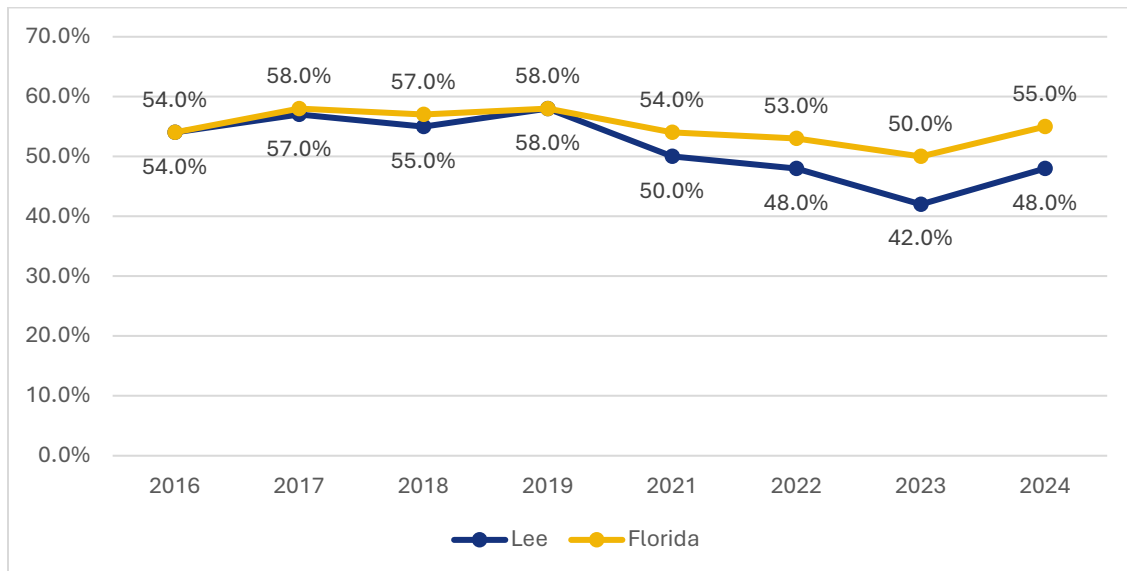
Exhibit D1: Florida Assessment of Student Thinking (FAST) Star Early Literacy, Lee County and Florida, Fall 2023

	Fall 2023 FAST Kindergarten Results		VPK Completers (Attended 70% or more VPK hours)		Kindergarten Students That Did Not Attend VPK/Unmatched to a VPK Record	
	Number of Test Takers	Percentage "Ready for Kindergarten"	Number of Test Takers	Percentage "Ready for Kindergarten"	Number of Test Takers	Percentage "Ready for Kindergarten"
Florida	186,417	51%	101,348	64%	65,520	36%
Lee County	6,333	49%	3,188	63%	2,500	33%

Source: Florida Department of Education (DOE)

In 2024, Lee County students passed the Florida Standards English Language Arts Assessment (FSA) at lower rates than the state average (48% Lee, 55% Florida). To pass, students must achieve a passing level of 3 or above on the FSA. In 2020, the FSA was not given due to the COVID-19 pandemic.

Exhibit D2: Students in 3rd Grade with a Passing Grade on Florida Standards Assessment (FSA) English Language Arts, Percent of Grade 3 Students, Lee County and Florida, 2016-2024

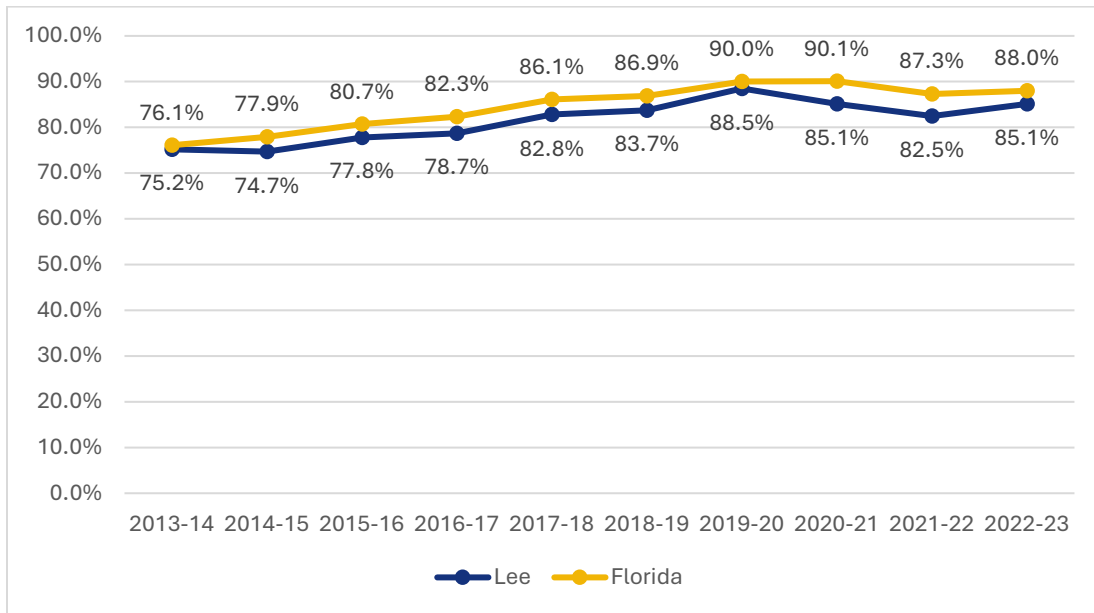


Source: Florida Department of Education (DOE)

2025 Lee County Community Health Assessment: Drivers of Health

Between 2013 and 2023, Lee County consistently had a slightly lower high school graduation rate than the state average (85.1% Lee, 88.0% Florida, 2023).

Exhibit D3: High School Graduation Rate, Percentage of Student Cohort Since 9th Grade, Lee County and Florida, 2013-2023



Source: Florida Department of Education (DOE)

Exhibit D4 displays the educational attainment in the population aged 25 and over for Lee County and Florida in 2013, 2015, and 2019. Between 2015 and 2023, the percentage of the population in Lee County over the age of 25 who did not have at least a high school diploma declined from 13 percent to 9.1 percent; in Florida, the percentage decreased from 12.4 percent to 9.7 percent. During the same period, the percentage of individuals with graduate degrees increased by more than two percentage points in Lee County and by slightly over three percentage points in Florida.

Exhibit D4: Educational Attainment of the Population 25 Years and Over, Percent of Population 25+, Lee County and Florida, 2015, 2019, and 2023

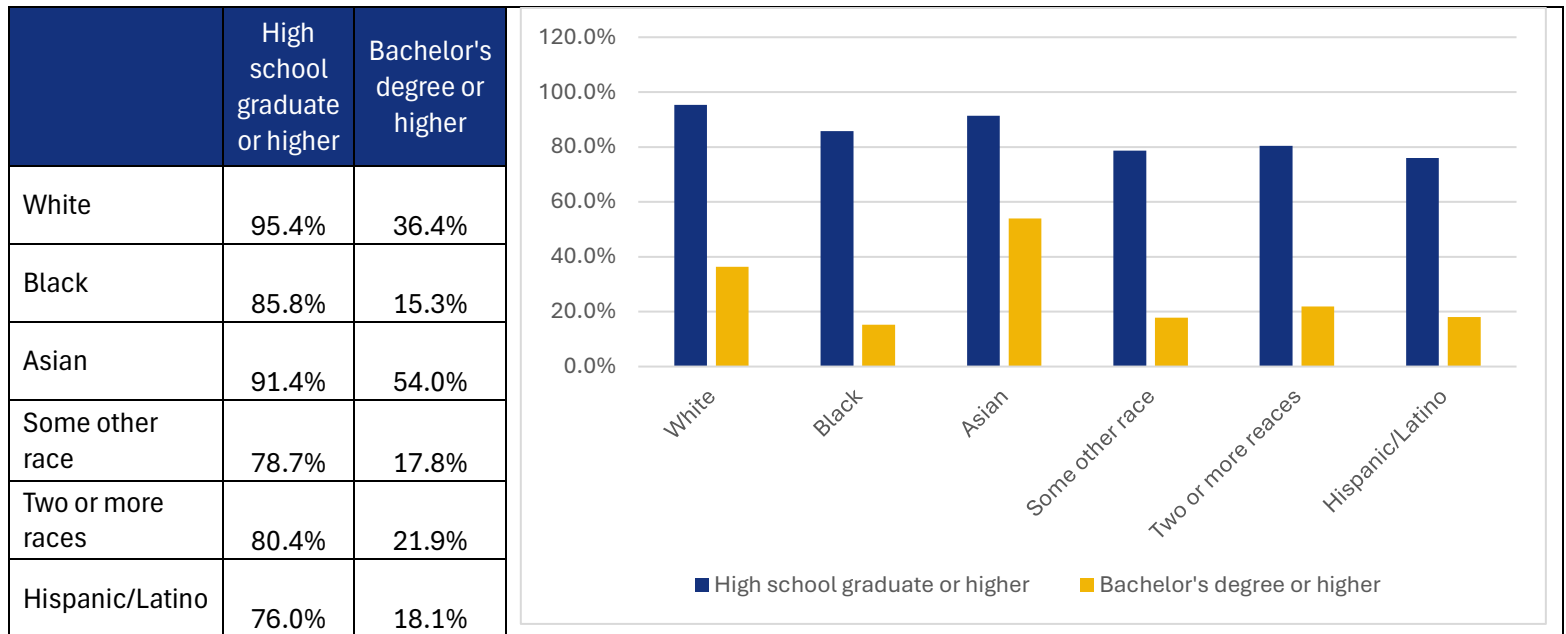
	Lee County			Florida		
	2015	2019	2023	2015	2019	2023
Less than 9th grade	6.0%	4.7%	4.3%	5.2%	4.6%	4.1%
9th to 12th, no diploma	7.0%	6.2%	4.8%	7.2%	7.0%	5.6%
High school graduate/GED	31.2%	31.0%	29.2%	29.2%	28.4%	26.8%
Some college, no degree	21.5%	19.6%	18.9%	20.4%	19.4%	18.4%
Associate degree	8.1%	9.4%	10.8%	9.6%	9.9%	10.1%
Bachelor's degree	15.9%	18.1%	19.3%	18.2%	19.3%	21.6%
Graduate or professional degree	10.3%	10.9%	12.6%	10.2%	11.4%	13.3%

Source: US Bureau of the Census, American Community Survey, Table S1501

2025 Lee County Community Health Assessment: Drivers of Health

Those who identified as Asian have a higher percentage of those with a bachelor's degree or higher when compared to other races/ethnicities. Individuals that identified as white had a higher percentage of those with a high school graduate or higher.

Exhibit D5: Educational Attainment by Race and Ethnicity, Lee County and Florida, 2023



Source: US Bureau of the Census, American Community Survey, Table S1501

Disabilities

13.7 percent of members of the general public in Lee County have a disability; this is slightly higher than the Florida average of 13.5 percent. The percentage of Lee County adults 65 years and over with a disability is lower than the Florida average (27.1% vs 31.4%).

Exhibit D6: Disability Status, Lee County and Florida, 2019-2023

	Lee	Florida
% Civilian noninstitutionalized population with a disability	13.7%	13.5%
Under 18 years with a disability	4.0%	5.0%
18 to 64 years with a disability	9.6%	10.1%
65 years and over with a disability	27.1%	31.4%

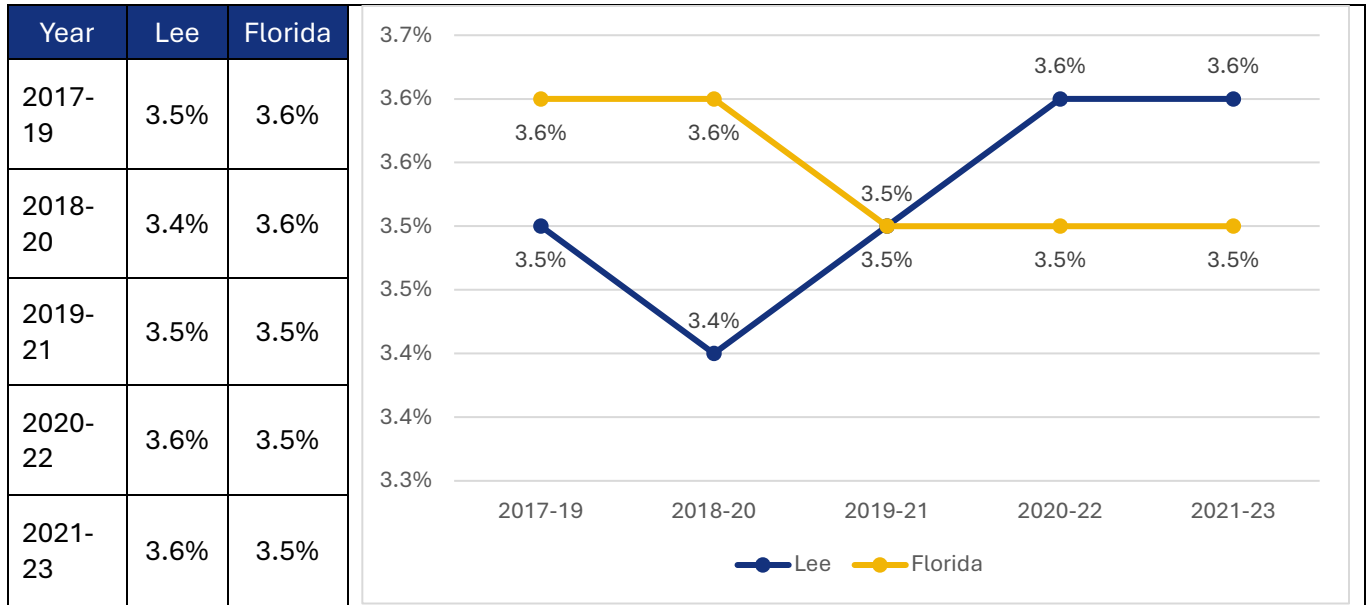
Source: US Census Bureau, American Community Survey 5-Year Estimates, Table DP02

According to the University of Kansas Research & Training Center of Independent Living, someone with an independent living disability is someone with a disability that can make decisions that affect their own lives. The percentage of adults in Lee County with an independent living disability is

2025 Lee County Community Health Assessment: Drivers of Health

slightly higher than the state average (3.6% vs. 3.5%) and increased slightly from 3.5% to 3.6% between 2017-2019 and 2021-2023.

Exhibit D7: Population With an Independent Living Disability (Aged 18-64 Years) (Census ACS), Percentage of Population (Aged 18-64 Years), 3-Year Rolling, Lee County and Florida, 2017-2023



Source: US Census Bureau, American Community Survey 5-Year Estimates, Table B18107



Source: Photo courtesy of the Health Planning Council of Southwest Florida

Workforce

In 2023, the unemployment rate in Lee County was lower than the average rate for Florida. A lower percentage of Lee County residents work outside the county when compared to the Florida average. Lee has a lower per capita personal income when compared to the state of Florida (\$65,878 vs \$68,703).

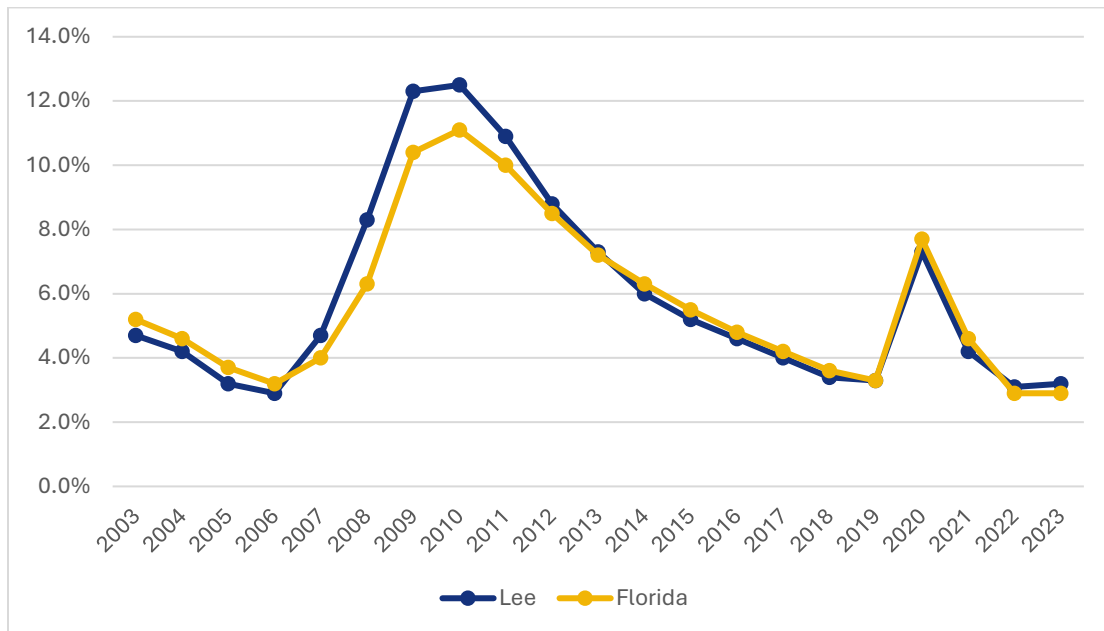
Exhibit D8: Workforce Data, Lee County and Florida, 2023

	Lee	Florida
Labor force as a % of population 18+	57.4%	60.4%
Unemployment rate (%)	3.2%	2.9%
Average annual wage, all industries	\$59,832	\$66,446
Per capita personal income	\$65,878	\$68,703
Workers 16+ working outside county of residence	10.2%	17.2%

Source: The Florida Legislature, Office of Economic and Demographic Research

Exhibit D9 displays the unemployment rates for Lee County and the State of Florida from 2003 to 2023. In Lee County, the unemployment rate ranges from a low of 2.9 percent in 2006 to a high of 11.6 percent in 2010. During this same period, the state rate ranged from a low of 3.7 percent in 2006 to a high of 12.5 percent in 2010. As can be seen in the graph, the unemployment rates for Lee County have been highly correlated with those of the State of Florida over the two decades. In 2023, Lee County had a rate of 3.2 percent compared to 2.9 percent for the state.

Exhibit D9: Unemployment Rate, Percentage of Labor Force, Lee County and Florida, 2003-2023

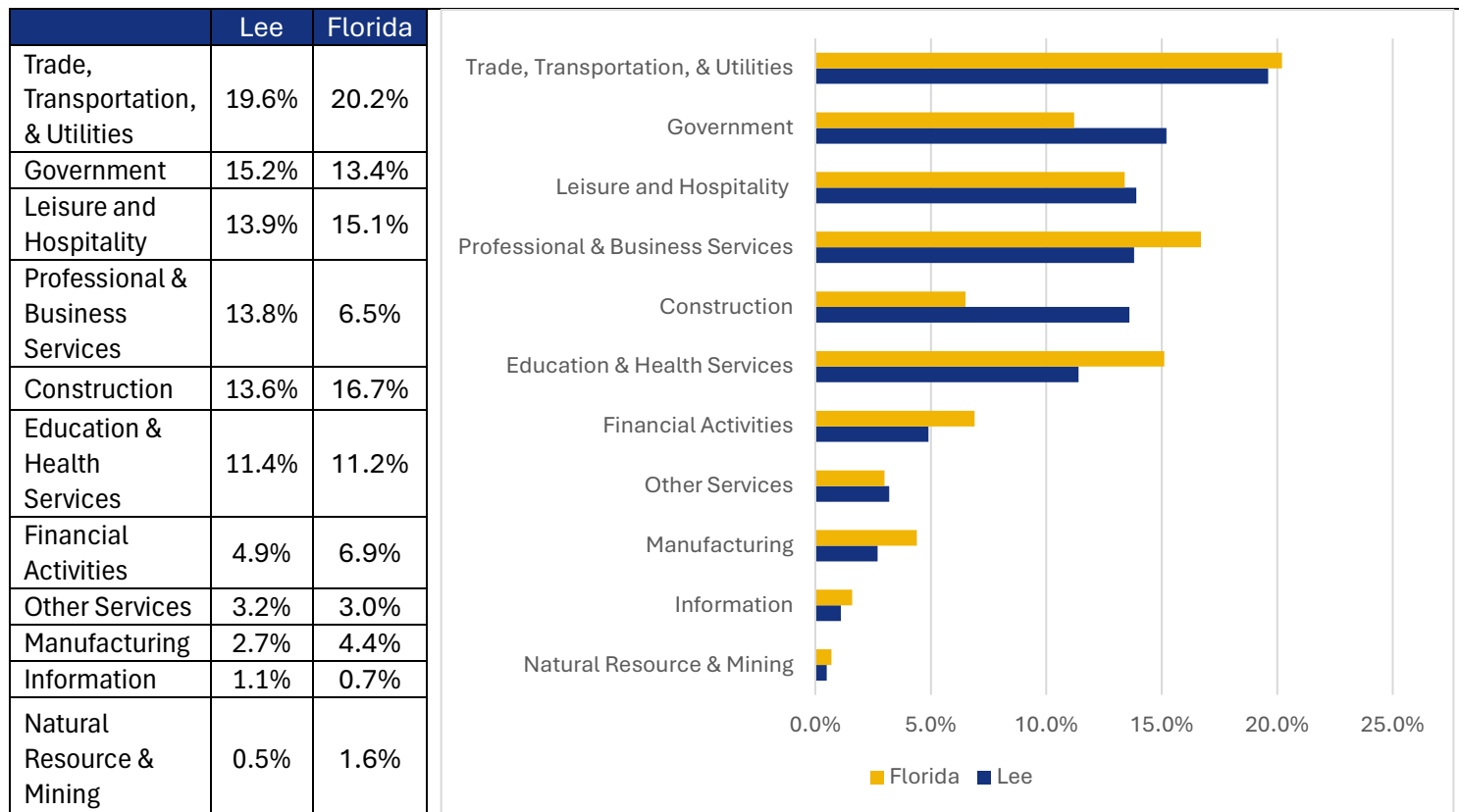


Source: US Department of Labor, Bureau of Labor Statistics (BLS)

2025 Lee County Community Health Assessment: Drivers of Health

The top three employment categories in Lee County for 2023 are trade, transportation & utilities, government, and leisure and hospitality. Trade, transportation & utilities is also the top employment category for Florida.

Exhibit D10: Average Annual Employment by Category, Lee County and Florida, 2023

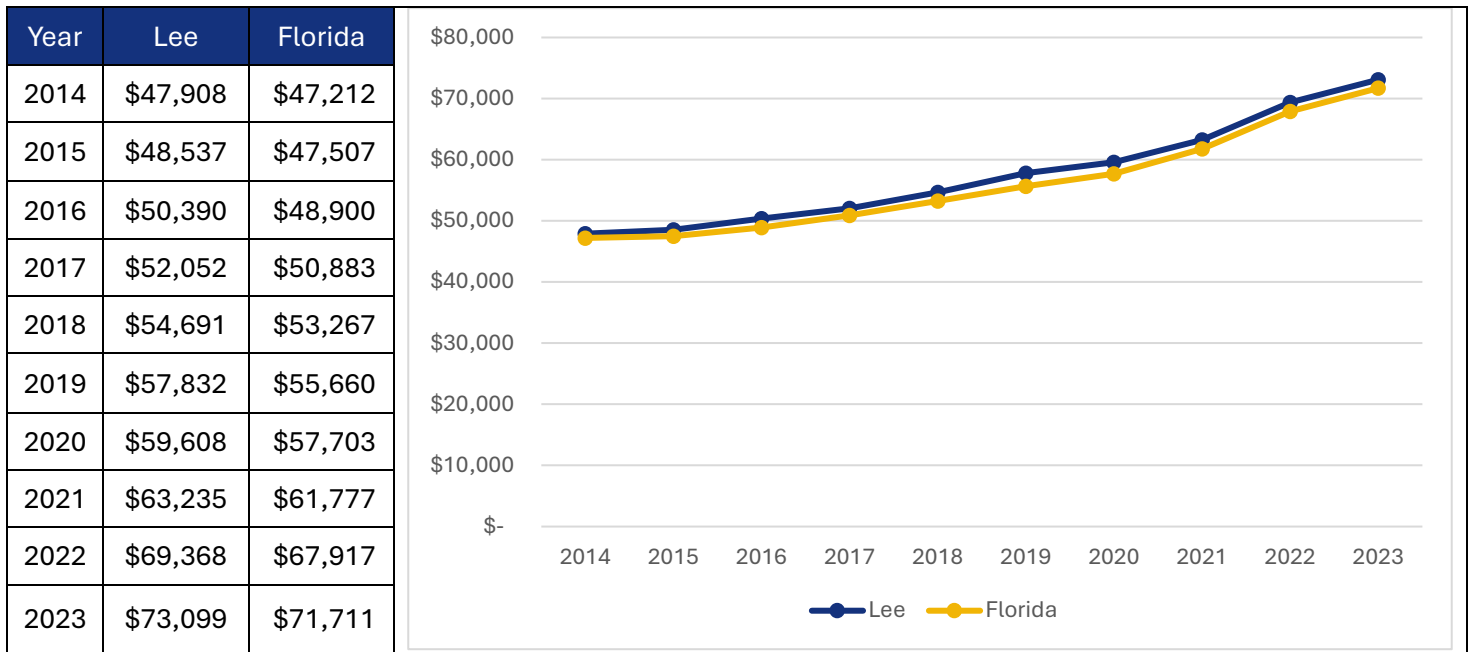


Source: The Florida Legislature, Office of Economic and Demographic Research

Income

Both Lee County and Florida have seen a continuous increase in median household incomes since 2014. The median household income in Lee County for 2023 is slightly higher than the Florida average (\$73,099 vs. \$71,711).

Exhibit D11: Median Household Income, Lee County and Florida, 2014-2023



Source: United States Census Bureau, American Community Survey 5-Year Estimates, Table B19013

In 2023, 3.6 percent of Lee County households had a combined income of less than \$14,999; this compares to 3.5 percent across Florida and 3.2 percent in the United States. 17.3 percent of Lee County households had an income of \$100,000 or more during 2023; this is a lower proportion than the State of Florida's average of 18.7 percent and the United States' average of 23.0%. Most Lee County residents earned between \$25,000 and \$49,999, which is on par with the state of Florida and the United States.

Exhibit D12: Earnings in the Past 12 Months, Lee County, Florida, and United States, 2015, 2019, 2023

	2015			2019			2023		
	Lee	Florida	US	Lee	Florida	US	Lee	Florida	US
Less than \$9,999	2.2%	1.8%	1.8%	2.0%	1.7%	1.7%	2.2%	1.6%	1.5%
\$10,000 to \$14,999	1.4%	4.5%	3.7%	2.5%	3.6%	2.7%	1.4%	1.9%	1.7%
\$15,000 to \$24,999	6.7%	18.2%	14.2%	13.1%	15.1%	10.8%	6.7%	7.1%	5.9%
\$25,000 to \$34,999	14.3%	19.3%	16.1%	20.9%	19.0%	15.2%	14.3%	14.1%	11.0%
\$35,000 to \$49,999	23.2%	21.1%	20.0%	24.0%	20.8%	19.7%	23.2%	21.3%	18.9%
\$50,000 to \$64,999	16.8%	13.2%	14.9%	14.7%	13.8%	15.5%	16.8%	16.9%	16.6%
\$65,000 to \$74,999	7.1%	5.0%	6.3%	5.6%	5.7%	6.9%	7.1%	7.1%	8.0%
\$75,000 to \$99,999	11.0%	7.2%	9.8%	6.7%	8.4%	11.0%	11.0%	11.3%	13.4%
\$100,000 or more	17.3%	9.8%	13.3%	10.5%	11.9%	16.5%	17.3%	18.7%	23.0%

Source: US Census Bureau, American Community Survey, Table S2001

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Median or average incomes only tell part of the story of disparate income levels within a county. A quintile equates to one-fifth of the households in Lee County; thus, in this chart, 20 percent of the population has a household income of \$32,480 or less, while 20 percent of the population has a household income above \$141,798. The top 5 percent of households in Lee County have an income of more than \$250,000 (the highest threshold broken out by the US Bureau of the Census).

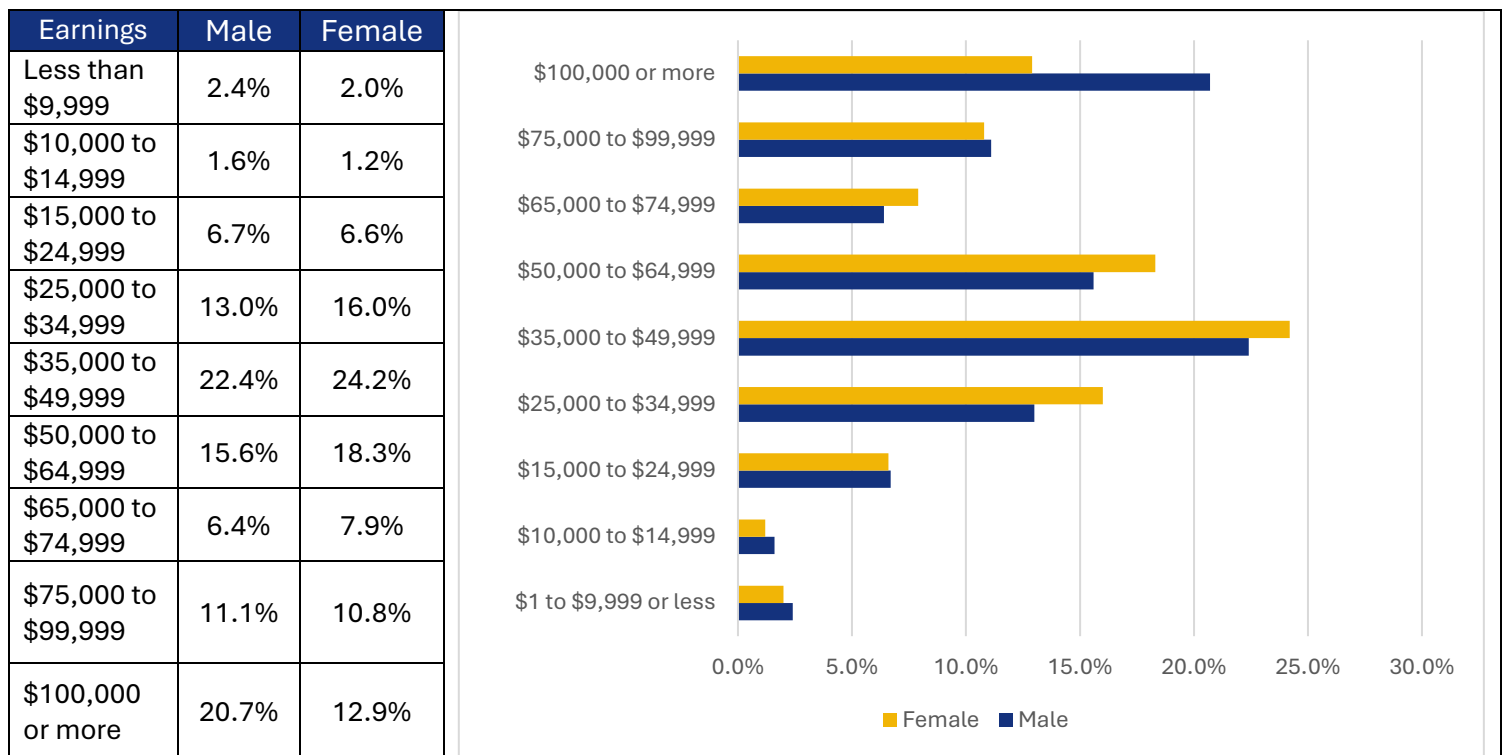
Exhibit D13: Household Income Quintile Upper Limits, Lee County and Florida, 2023

	Lee	Florida
Lowest quintile	\$32,480	\$31,559
Second quintile	\$58,158	\$58,563
Third quintile	\$89,107	\$91,114
Fourth quintile	\$141,798	\$144,290
Lower limit of top 5 percent	\$250,000+	\$250,000+

Source: US Census Bureau, American Community Survey, Table B19080

In Lee County in 2023, significantly more men than women earned more than \$100,000 in a year (20.7% men, 12.9% women).

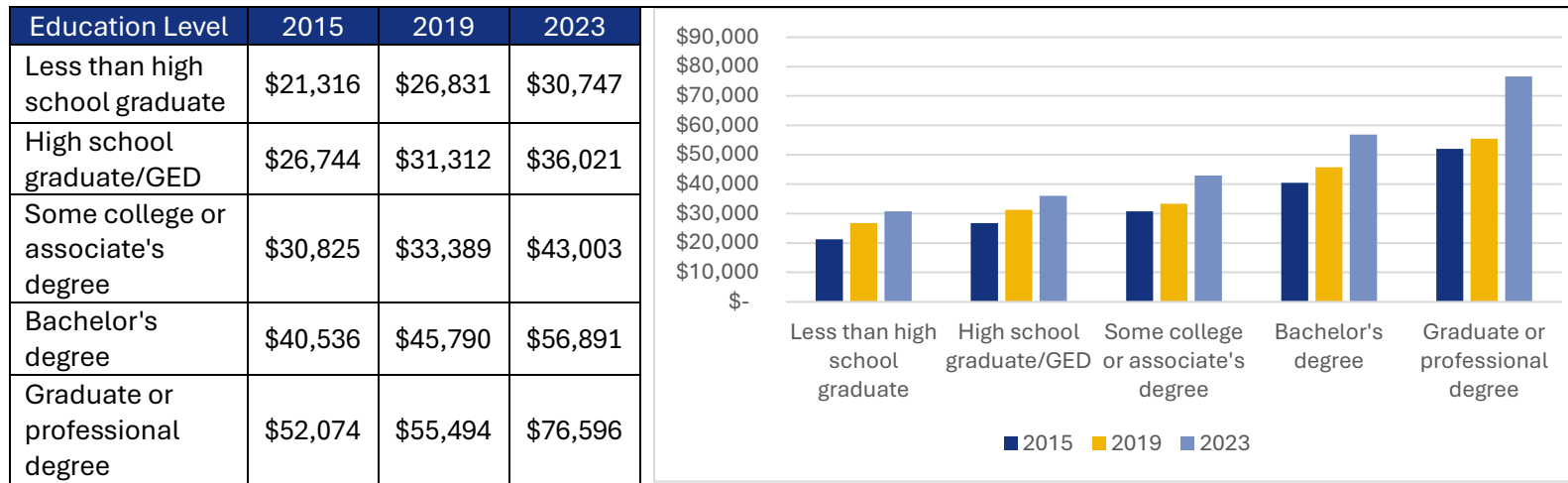
Exhibit D14: Earnings in the Past 12 Months by Sex, Lee County 2023



Source: US Census Bureau, American Community Survey, Table S2001

On average, individuals in Lee County who have a graduate or professional degree earn \$45,849 more annually than individuals with less than a high school education. The median income has continued to rise between 2015 and 2023, regardless of educational attainment.

Exhibit D15: Median Earnings by Educational Attainment, Lee County, 2015, 2019, 2023



Source: US Census Bureau, American Community Survey, Table S2001

Poverty and Food Assistance

According to County Health Rankings, the definition of a living wage is “the hourly wage needed to cover basic household expenses plus all relevant taxes for a household”. The Living Wage Calculator was first created by Dr. Amy K. Glasmeier in 2004. Using twelve different familial compositions, the calculator estimates the living wage needed to support families. The tables below show the hourly rate an individual in a household must earn to support themselves and/or their family. At the time this data was compiled, the minimum wage in Florida was \$13.00, which is greater than the federal minimum wage of \$7.25.

Exhibit D16: Living Wage Calculator for Lee County, 2023*

	Living Wage	Poverty Wage
1 Adult		
0 children	\$23.76	\$7.52
1 child	\$38.26	\$10.17
2 children	\$46.49	\$12.81
3 children	\$58.27	\$15.46
2 Adults (1 Working)		
0 children	\$31.80	\$10.17
1 child	\$38.22	\$12.81
2 children	\$41.77	\$15.46
3 children	\$48.69	\$18.10
2 Adults (Both Working)		
0 children	\$15.90	\$5.08
1 child	\$21.60	\$6.41
2 children	\$25.70	\$7.73
3 children	\$30.67	\$9.05

Source: Glasmeier, Amy K. Living Wage Calculator. 2020. Massachusetts Institute of Technology.

*Data was last updated on February 10, 2025

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Compared to Florida and the United States, Lee County has a slightly lower percentage of people living in poverty. In 2023, 12.1 percent of Lee County residents lived in poverty, compared to 12.4 percent for the state.

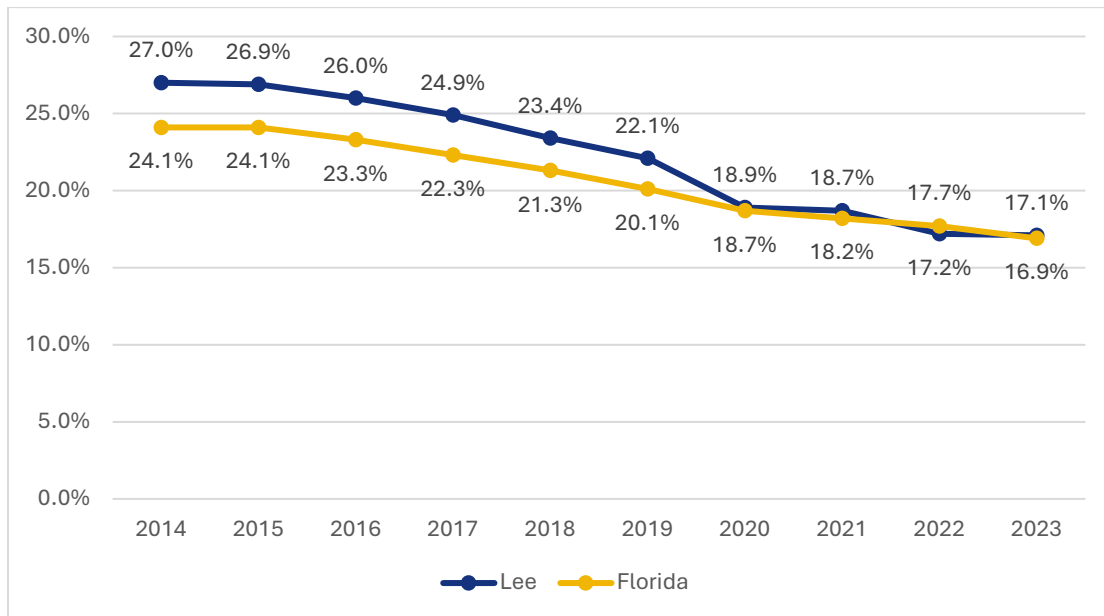
Exhibit D17: Percent of All Ages in Poverty, Lee County, Florida, and United States, 2015, 2019, 2023

	Lee	Florida	US
2023	12.1%	12.4%	12.5%
2019	11.2%	12.7%	12.3%
2015	15.9%	15.8%	14.7%

Source: U.S. Census, Small Area Income and Poverty Estimates

In 2023, Lee County had a slightly higher percentage of children living in poverty than the state average (17.1% Lee, 16.9% Florida). The percentage of children living in poverty in Lee County decreased significantly in the ten years between 2014 and 2023 (27.0% 2014, 17.1% 2023).

Exhibit D18: Individuals Below Poverty Level (Aged 0-17 Years), Percentage of Population (Aged 0-17 Years), Lee County and Florida, 2014-2023

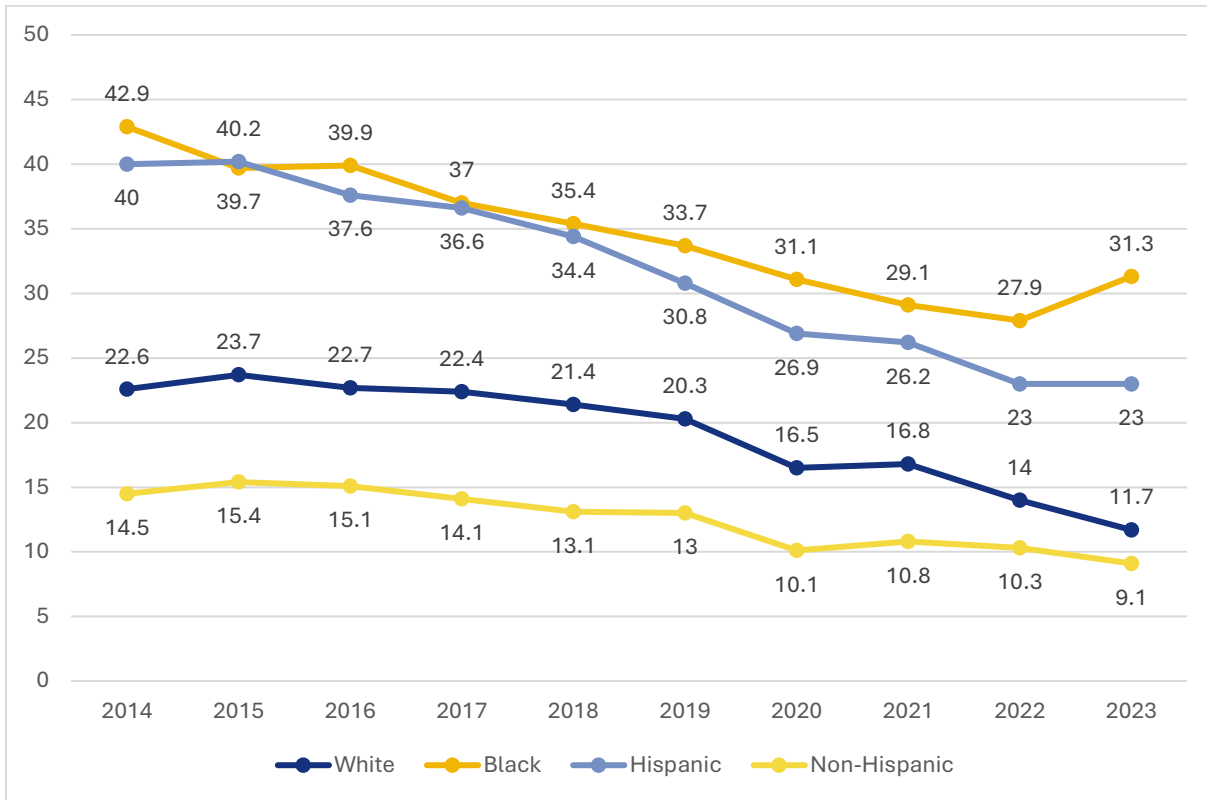


Source: United States Census Bureau, American Community Survey 5-Year Estimates, Table DP03

There are significant disparities seen in the percentage of children living in poverty between various racial/ethnic groups. Race and ethnicity are tracked separately in Florida. While all races and ethnicities saw declines in the percentage of children living in poverty between 2014 and 2023, the percentages for children who identify as Hispanic were significantly higher in 2023 than those who

identify as non-Hispanic (23.0% Hispanic, 9.1% non-Hispanic). Children who identify as black had the highest percentage living in poverty in 2023, with 31.3 percent, and were the only group that saw an increase in poverty between 2022 and 2023.

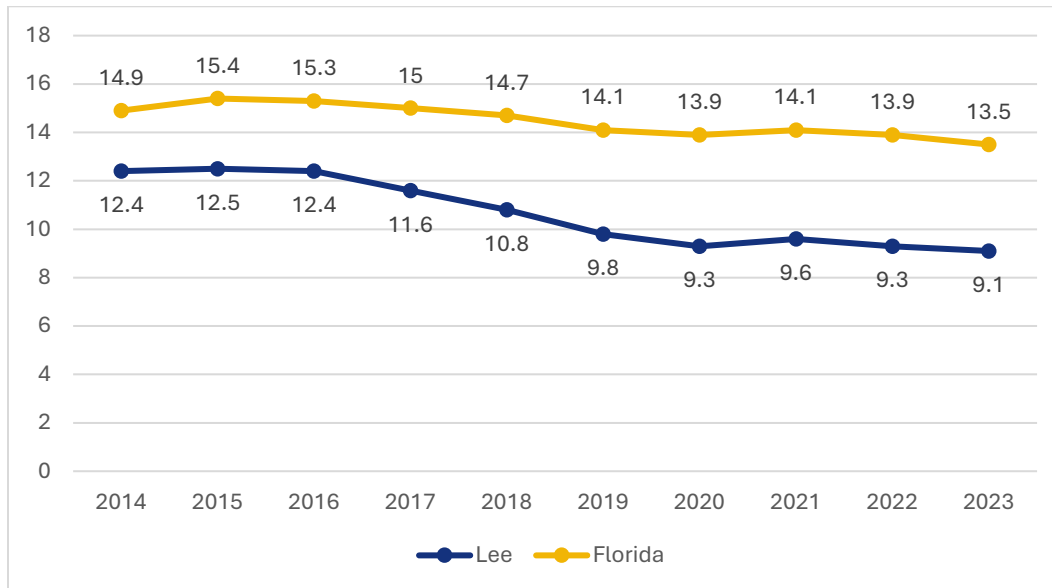
Exhibit D19: Individuals Below Poverty Level (Aged 0-17 Years) by Race and Ethnicity, Percentage of Population (Aged 0-17 Years), Lee County and Florida, 2014-2023



Source: United States Census Bureau, American Community Survey 5-Year Estimates, Table DP03

The Supplemental Nutrition Assistance Program (SNAP), administered by the U.S. Department of Agriculture, provides benefits that can be used to purchase food at grocery stores, convenience stores, and select farmers' markets and co-op food programs. Current requirements for eligibility are a household monthly net income of less than 100 percent of the federal poverty guideline. Lee County has consistently had a lower percentage of households receiving assistance compared to Florida. In 2023, Lee had 9.1 percent of families receiving SNAP benefits compared to 13.5 percent for Florida.

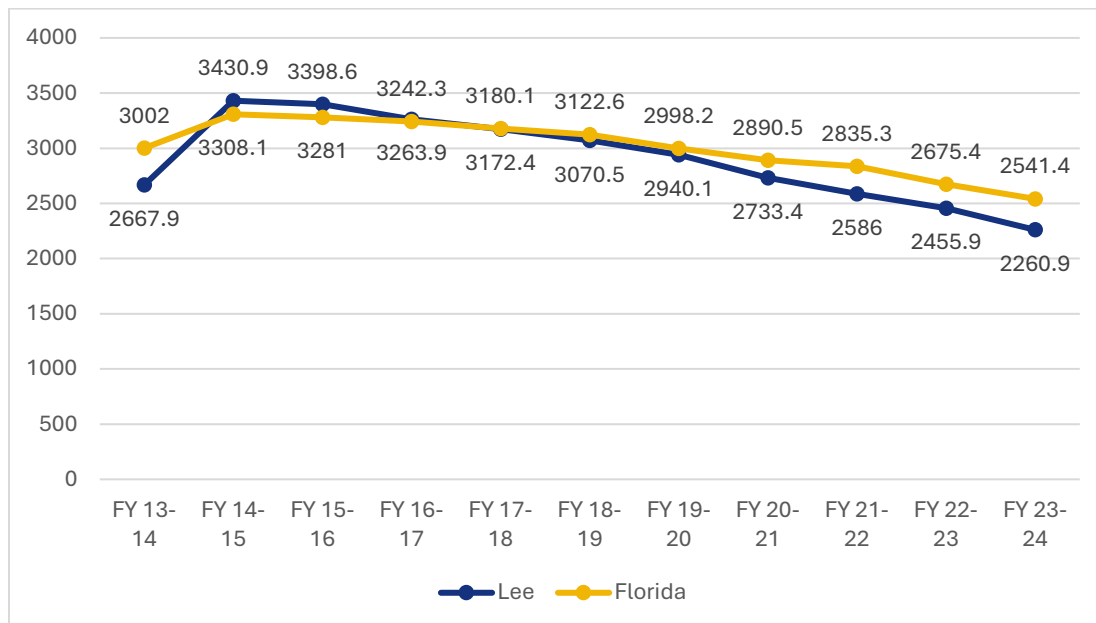
Exhibit D20: Households Receiving Cash Public Assistance or Food Stamps, Percentage of Households, Lee County and Florida, 2014-2023



Source: United States Census Bureau, American Community Survey 5-Year Estimates, Table B19058

The Women, Infants, and Children Nutrition Program (WIC) of the U.S. Department of Agriculture provides food and nutritional assistance to pregnant and new mothers and children less than 5 years of age. Between 2015 and 2024, the number of WIC eligibles in Lee County decreased from 3,430.9 to 2541.4.

Exhibit D21: Women, Infants, and Children (WIC) Eligibles, Rate per 100,000 Population, Lee County and Florida, Fiscal Year 14-15 to Fiscal Year 23-24



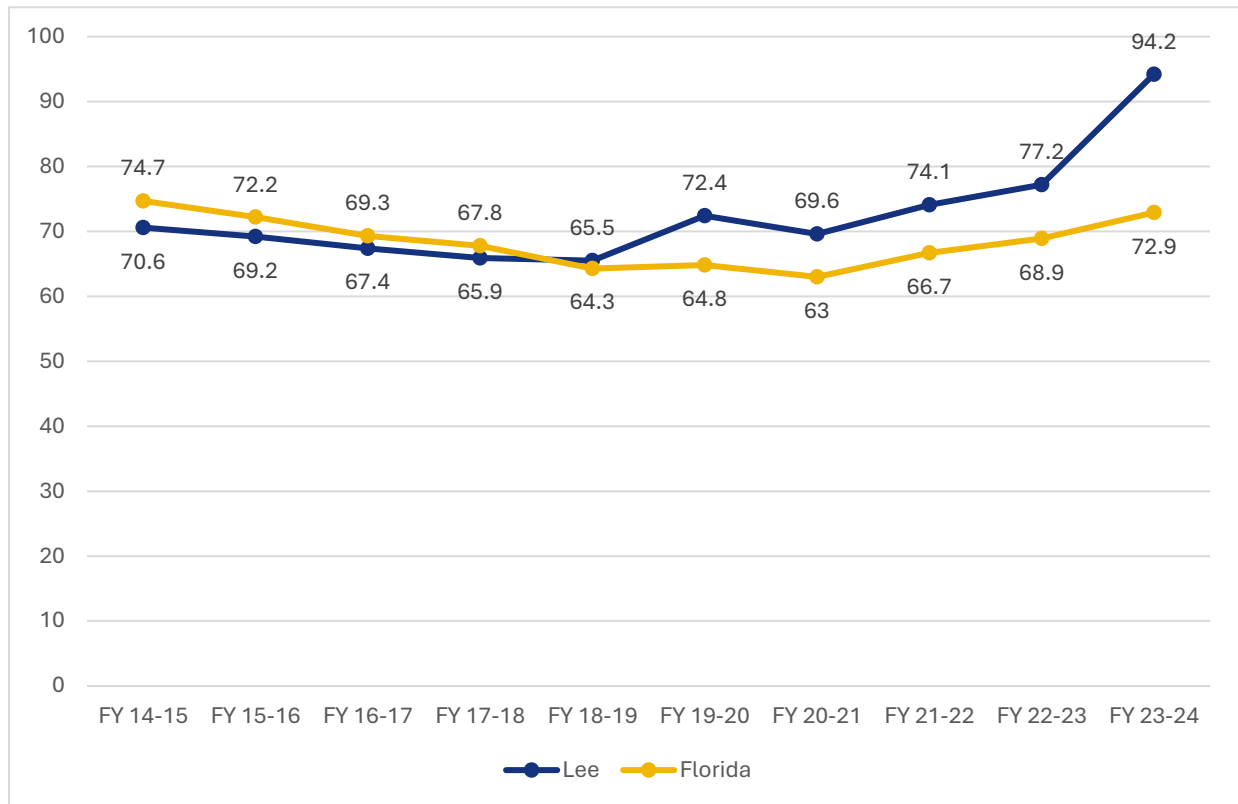
Source: Florida Department of Health, WIC and Nutrition Services, FLWiSE

2025 Lee County Community Health Assessment: Drivers of Health

Compared to Florida, Lee County has consistently served a higher percentage of those eligible for WIC since 2018. WIC eligibles include pregnant and postpartum women, as well as children aged 0-4. Knowing the proportion of those in need who are served supports promoting healthful diets and a healthy weight to optimize health status and quality of life.

The percent of WIC eligibles served is the number served divided by the estimated number in need, expressed as a percentage. Lee County and the State of Florida experienced an increase in service between 2018 and 2024.

Exhibit D22: WIC Eligibles Served, Percentage of WIC Eligibles, Lee County and Florida, Fiscal Year 14-15 to Fiscal Year 23-24



Source: Florida Department of Health, WIC and Nutrition Services, FLWiSE



Source: Photo courtesy of the Health Planning Council of Southwest Florida

ALICE

The United Way has developed a methodology called ALICE (Asset Limited, Income Constrained, Employed) to better approximate the number of people living in poverty in the United States. They believe that despite the Federal Poverty Level's benefit of providing a nationally recognized income threshold for determining who is poor, its shortcomings are well-documented. The measure is not based on the current cost of basic household necessities. Except for Alaska and Hawaii, the data is not adjusted to reflect cost-of-living differences across the U.S. Therefore, the ALICE research team at the United Way developed new measures to identify and assess financial hardship locally,

enhancing existing local, state, and national poverty measures. Between ALICE households and those living in poverty, an estimated 47% of households in Florida were below the ALICE Threshold in 2023.

The first method is the Household Survival Budget. This is an estimate of the total cost of household essentials, including housing, childcare, food, transportation, technology, healthcare, plus taxes and a 10 percent miscellaneous contingency fund. It does not include any savings, leaving households without a cushion for unexpected expenses and unable to invest in the future.

For the average family of four, two adults and two children, the annual household survival budget in Lee County in 2023 was \$79,380. For an adult to make this much a year, the hourly wage would need to be \$39.69. A single adult's household survival budget is \$38,208 with an hourly wage of \$19.10. Currently, Florida's minimum wage is set at \$14.00, which is \$5.10 less than what is needed for a single adult to survive.

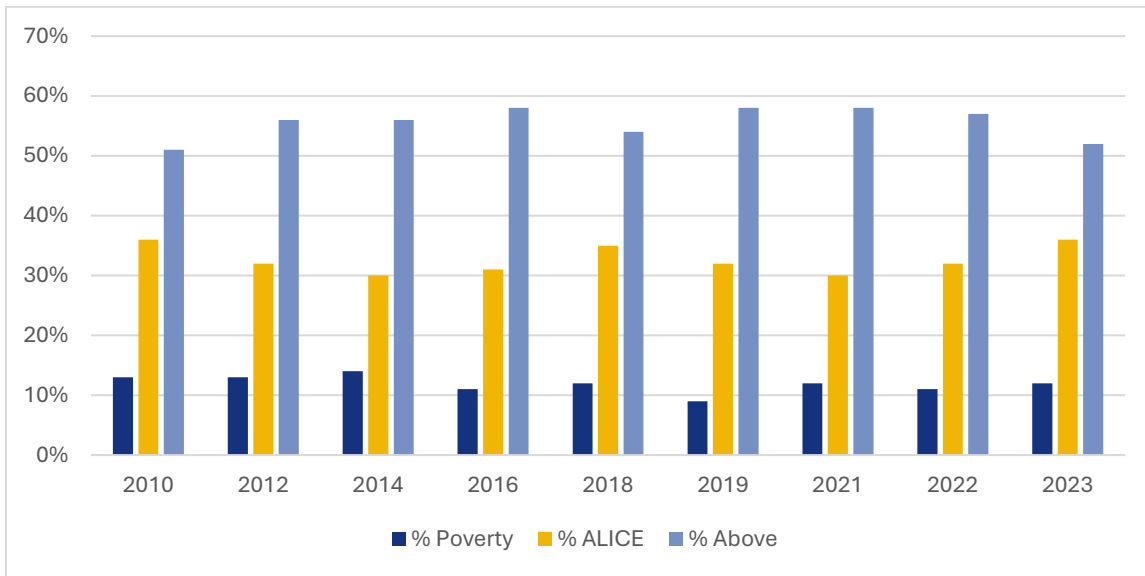
Exhibit D23: ALICE Household Survival Budget, Lee County, 2023

Monthly Costs	Single Adult	One Adult, One Child	One Adult, One in Childcare	Two Adults	Two Adults, Two Children	Two Adults, Two in Childcare	Single Senior (65+)	Two Seniors (65+)
Housing	\$1,298	\$1,298	\$1,298	\$1,298	\$1,639	\$1,639	\$1,298	\$1,298
Child Care	\$0	\$234	\$625	\$0	\$469	\$1,417	\$0	\$0
Food	\$523	\$885	\$795	\$960	\$1,610	\$1,421	\$482	\$883
Transportation	\$469	\$604	\$604	\$709	\$996	\$996	\$399	\$568
Health Care	\$162	\$488	\$488	\$488	\$759	\$759	\$535	\$1,071
Technology	\$86	\$86	\$86	\$116	\$116	\$116	\$86	\$116
Miscellaneous	\$254	\$360	\$390	\$357	\$559	\$635	\$280	\$394
Taxes	\$392	\$329	\$391	\$462	\$467	\$625	\$448	\$694
Monthly Total	\$3,184	\$4,284	\$4,677	\$4,390	\$6,615	\$7,608	\$3,528	\$5,024
Annual Total	\$38,208	\$51,408	\$56,124	\$52,680	\$79,380	\$91,296	\$42,336	\$60,288
Hourly Wage	\$19.10	\$25.70	\$28.06	\$26.34	\$39.69	\$45.65	\$21.17	\$30.14

Source: United Way ALICE, 2023

Families who are living below the ALICE (Asset Limited, Income Constrained, Employed) threshold are considered to be facing financial hardship using the United Way methodology. In 2023, 12 percent of Lee County households were considered to be in poverty, and an additional 36 percent were considered below the ALICE threshold, while 52 percent were above the threshold.

Exhibit D24: Financial Hardship, Percentage of Households in Lee County, 2010-2023



Source: United Way ALICE, 2023

The percentage of households facing financial hardship in Lee County in 2023 varied significantly by location. In Paloma Park, 100 percent of households were below the ALICE threshold, while in Gateway and Verandah, only 26 percent of households were below the threshold.

Exhibit D25: Financial Hardships by Census Places in Lee County, 2023

Census Places	Total Households	% Below ALICE Threshold
Alva CDP, Florida	1,233	42%
Bokeelia CDP, Florida	872	49%
Bonita Springs city, Florida	24,586	37%
Buckingham CDP, Florida	1,893	34%
Burnt Store Marina CDP, Florida	1,206	28%
Cape Coral city, Florida	83,021	46%
Cypress Lake CDP, Florida	6,936	53%
Estero Village, Florida	18,287	31%
Fort Myers Beach, Florida	2,872	36%
Fort Myers city, Florida	39,447	55%
Fort Myers Shores CDP, Florida	2,209	53%
Gateway CDP, Florida	3,773	26%
Harlem Heights CDP, Florida	505	60%
Iona CDP, Florida	7,653	49%
Lehigh Acres CDP, Florida	40,585	59%
Lochmoor Waterway Estates CDP, Florida	2,551	37%
Matlacha CDP, Florida	433	48%
McGregor CDP, Florida	3,964	37%
North Fort Myers CDP, Florida	21,903	58%
Olga CDP, Florida	988	40%

Census Places	Total Households	% Below ALICE Threshold
Page Park CDP, Florida	316	89%
Palmona Park CDP, Florida	258	100%
Pine Island Center CDP, Florida	694	56%
Pine Manor CDP, Florida	1,155	90%
Pineland CDP, Florida	183	38%
Punta Rassa CDP, Florida	796	33%
San Carlos Park CDP, Florida	6,452	42%
Sanibel city, Florida	3,309	31%
St. James City CDP, Florida	1,852	51%
Suncoast Estates CDP, Florida	1,856	82%
Three Oaks CDP, Florida	2,061	27%
Tice CDP, Florida	1,670	71%
Verandah CDP, Florida	926	26%
Villas CDP, Florida	6,917	67%
Whiskey Creek CDP, Florida	2,335	36%

Source: United Way ALICE, 2023

Housing

Lee County has a higher percentage of homeowners compared to the state (74.0% vs. 67.3%). 25.7 percent of homes in Lee County are vacant. According to the U.S. Census Bureau, a vacant housing unit is a dwelling that is not occupied at the time of the census, unless the occupants are only temporarily absent. This includes units that are for rent, for sale, or held for seasonal, recreational, or occasional use. The median value of housing is slightly higher in Lee County than the state average (\$326,300 vs. \$325,000).

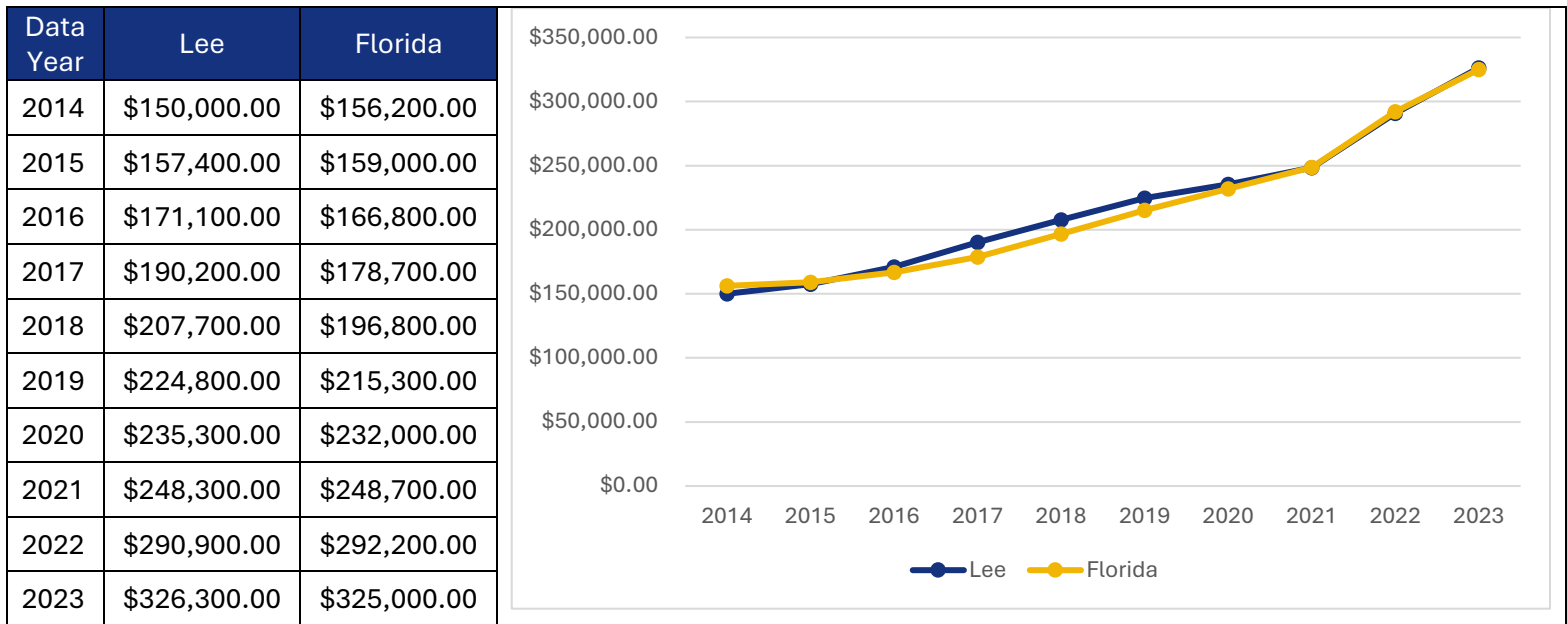
Exhibit D26: Housing Occupancy, Lee County and Florida, 2019-2023

	Lee	Florida
Occupied housing units (%)	74.3%	84.8%
Owner-occupied (%)	74.0%	67.3%
Household size owner-occupied unit (people)	2.4	2.53
Renter-occupied (%)	26.0%	32.7%
Household size renter-occupied unit (people)	2.56	2.46
Occupying mobile home (%)	9.2%	8.2%
Occupying boat, RV, Van, etc. (%)	0.2%	0.2%
Median Value of owner-occupied units	\$326,300	\$325,000
Vacant housing (%)	25.7%	15.2%
Homeowner vacancy (%)	1.8%	1.5%
Rental vacancy (%)	10.0%	7.6%

Source: United States Census Bureau, Table DP04 Selected Housing Characteristics

Since 2014, the median housing values have increased from \$150,000 to \$326,300 in Lee County. The houses in Lee County have closely mirrored the median housing value for the state of Florida.

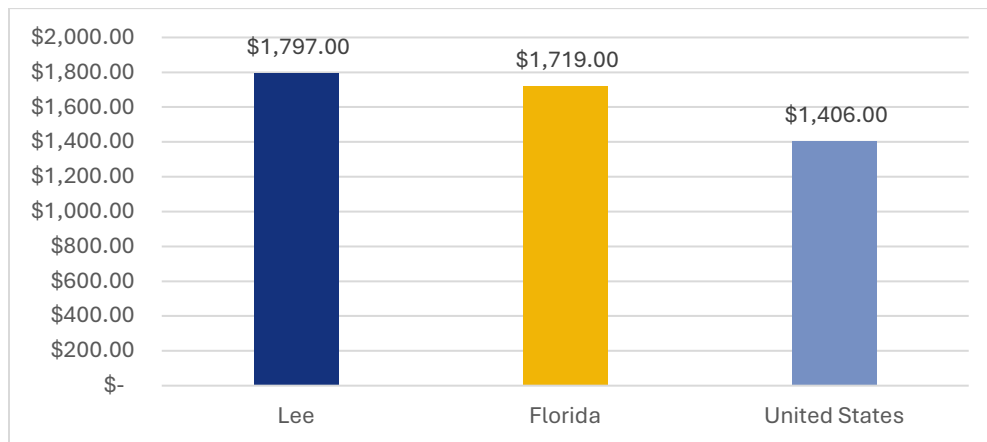
Exhibit D27: Median Owner-Occupied Housing Unit Value, Lee County and Florida, 2014-2023



Source: United States Census Bureau, American Community Survey 5-Year Estimates, Table DP04

Rental costs can be a barrier for people who want to live in a particular area. Lee County has a higher median gross rent when compared to Florida and the United States in 2023.

Exhibit D28: Median Cost Gross Rent, Lee County, Florida, United States, 2023

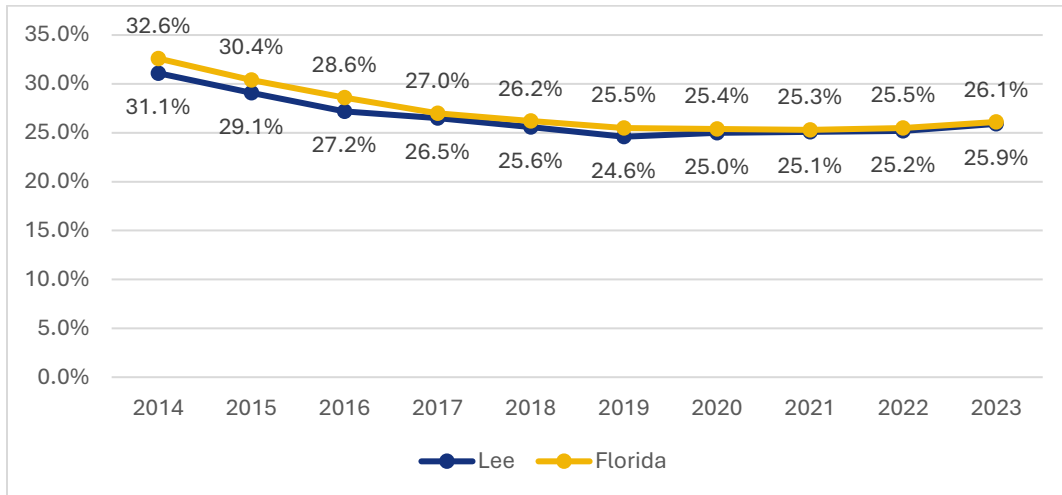


Source: US Census, American Community Survey, B25064

Housing cost-burdened households, as defined by the U.S. Department of Housing and Urban Development, are those that pay more than 30 percent of their income for housing. Housing includes a mortgage or rent, utilities, and basic necessities for living. Between 2014 and 2019, the percentage of owner-occupied households who were considered housing burdened declined; however, they increased between 2021 and 2023. In 2023, 25.9 percent of owner-occupied

households in Lee County were paying more than 30 percent of their household income for housing, compared to 26.1 percent for the state of Florida.

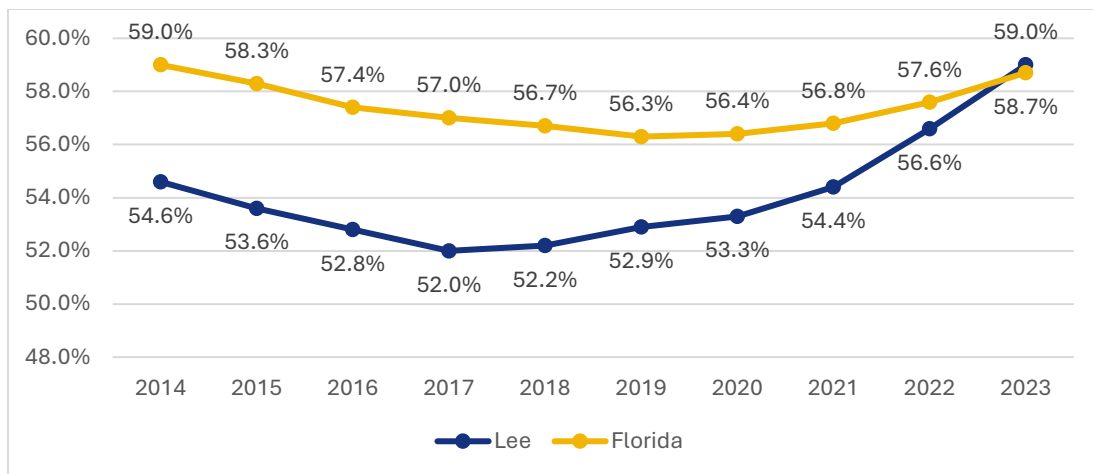
Exhibit D29: Owner-Occupied Households with Monthly Housing Costs of 30% or More of Household Income, Percentage of Owner-Occupied Households, Lee County and Florida. 2014-2023



Source: United States Census Bureau, American Community Survey 5-Year Estimates, Table S2703

Exhibit D30 shows the percentage of households who rent and are considered to have a housing cost burden in Lee County and Florida. The percentage of households that rent and pay more than 30 percent of their income in rent increased significantly between 2017 and 2023 (52% 2017, 59% 2023). When comparing housing cost burden between those who own a house versus those renting in Lee County, renters have a considerably higher percentage of being considered housing cost burdened (in 2023, 59% vs 25.9%).

Exhibit D30: Renter-Occupied Housing Units with Gross Rent Costing 30% or More of Household Income, Percentage of Renter-Occupied Households, Lee County and Florida, 2014-2023



Source: United States Census Bureau, American Community Survey 5-Year Estimates, Table DP04

Settings and Systems



Source: Photo courtesy of NCH

This section of the Community Health Assessment (CHA) for Lee County provides an overview of the various settings and systems that influence the health of our community. This includes an examination of the healthcare infrastructure, food insecurity, transportation, built environment, and other settings where individuals live, learn, work, and receive care. Understanding the capacity, accessibility, quality, and interconnectedness of these settings and systems is crucial for identifying strengths, gaps, and opportunities for collaboration to improve health service delivery. This will promote health in various environments and foster a more integrated and responsive health ecosystem for all residents of Lee County.

Access to Health Care

Lee County has been designated as a Medically Underserved Area (MUA) for its low-income and migrant farmworker populations. Any area with a score of 62 or lower on the Index of Medical Underservice is considered medically underserved. The areas with the lowest numbers are those that are identified as having the greatest need. Lee County scored 53.5.

Areas in Lee County have been designated as Health Professional Shortage Areas (HPSAs) for primary care, dental health, and behavioral health—the HPSA designation scores counties from

one to twenty-six, with higher scores indicating greater levels of need. In primary care, the low-income population in Lee County scored 14 out of 26. For dental health, the low-income population in Lee County scored 15 out of 26. The Circuit 20 catchment area, which includes several counties (Charlotte, Collier, Glades, and Hendry) along with Lee County, received a score of 16 out of 26 for mental health among the low-income population.

Access to healthcare is a key factor in achieving a healthy community and is a primary goal of health policy in Florida. Lee County has fewer licensed dentists, pediatricians, obstetrician-gynecologists, and behavioral and mental health professionals than the state average. Lee County has more medical doctors and family practice physicians than the state average. For every type of hospital, nursing home, and other facility beds reviewed, Lee County has fewer than the state average. Lee County has lower-than-average spending per person on the County Health Department compared to the state average.

Exhibit SS1: Health Resource Availability, Lee County and Florida

	Lee County			Florida
	Number	Rate per 100,000	Quartile**	Rate per 100,000
Providers, Fiscal Year 2022-2023*				
Licensed dentists	407	49.4	3	61.5
Medical doctors (MD, physicians)	2,272	275.9	4	261.2
Pediatricians	99	12.0	n/a	16.5
Family practice physicians	127	15.4	3	13.3
Obstetrician Gynecologist (OB/Gyn)	68	8.3	n/a	8.6
Behavioral/mental health professionals	768	93.3	2	133.2
Facilities, 2023				
Hospital beds	2,188	265.7	2	304.5
Acute beds	1,707	207.3	2	244.7
Specialty beds	481	58.4	n/a	59.7
Nursing home beds	2,122	257.7	1	366.3
Adult psychiatric beds (inpatient beds)	95	11.5	n/a	18.3
Child and adolescent psychiatric beds (inpatient beds)	0	0.0	n/a	3.2
County Health Department				
County health department full-time employees, fiscal year 2022-2023	246	29.9	1	40.0
County health department expenditures, fiscal year 2021-2022	18,985,483	\$23.50	1	\$39.30

Sources: Florida Department of Health, Division of Medical Quality Assurance; Florida Agency for Health Care Administration (AHCA); Florida Department of Health

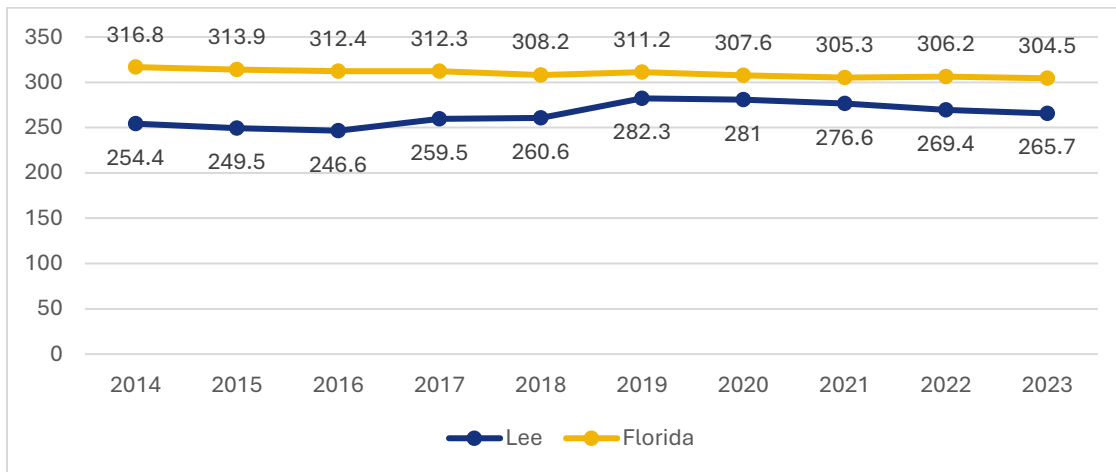
*Number of licensed providers does not necessarily equal the number of practicing providers. These numbers may include providers who work in another county, only work part-time, or retired.

2025 Lee County Community Health Assessment: Settings and Systems

**County Compared to other Florida counties. The lowest quartile equals the lowest number. For resource availability, the lowest number is generally considered the worst ranking. Quartile information is provided when at least 51 counties rates greater than zero.

Between 2014 and 2023, Lee County consistently had fewer hospital beds per 100,000 people than the state average (265.7 Lee, 304.5 Florida, 2023).

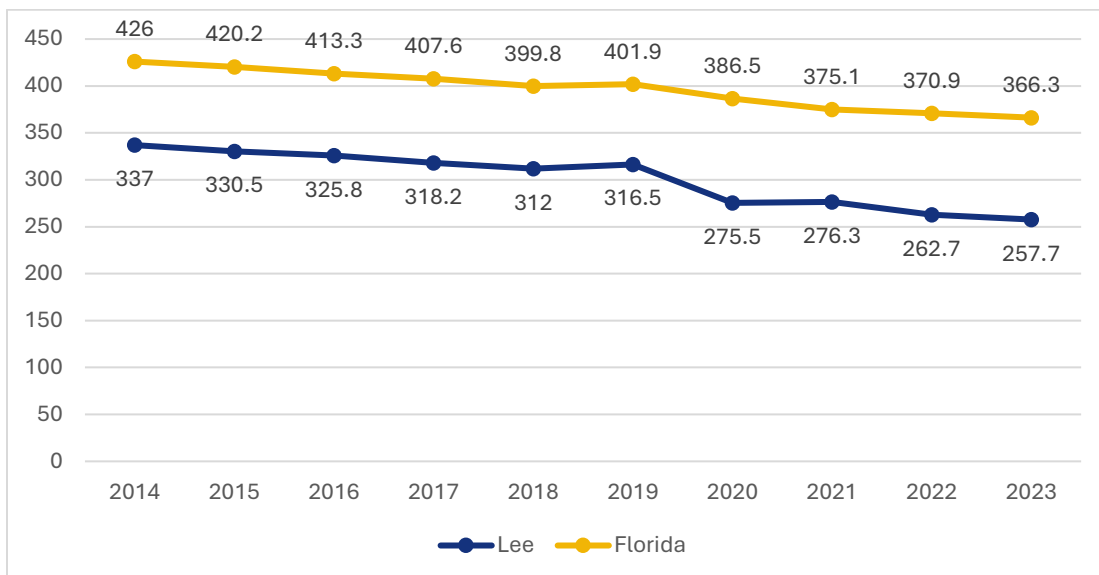
Exhibit SS2: Hospital Beds, Rate per 100,000 Population, Lee County and Florida, 2014-2023



Source: Florida Agency for Health Care Administration

Throughout the past decade, Lee County had significantly fewer nursing home beds per population than the average for the State of Florida (257.7 Lee, 366.3 Florida, 2023).

Exhibit SS3: Nursing Home Beds, Rate per 100,000 Population, Lee County and Florida, 2014-2023



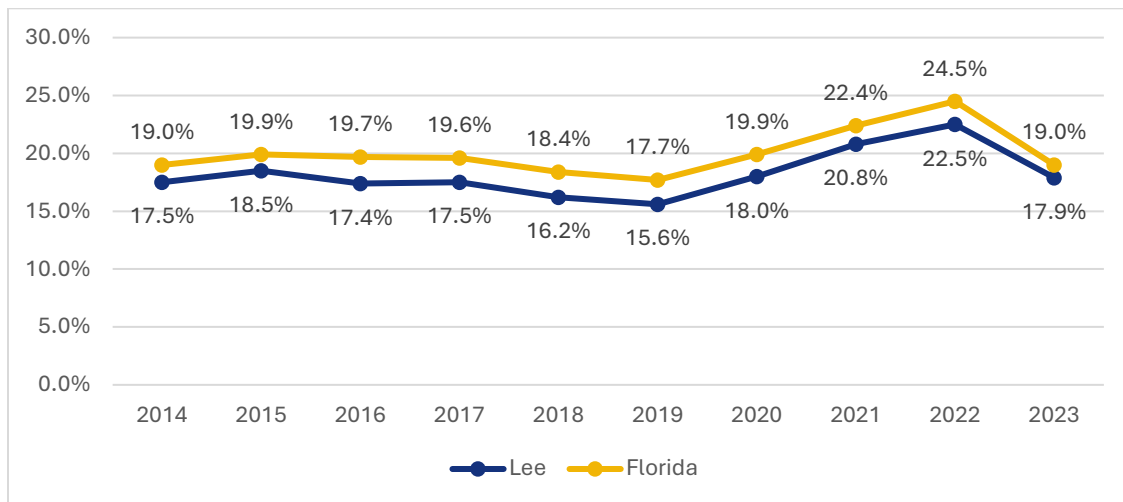
Source: Florida Agency for Health Care Administration

Health Insurance Coverage

Medicaid provides medical coverage to low-income individuals and families. The state and federal governments share the costs of the Medicaid program. Medicaid services in Florida are administered by the Agency for Health Care Administration (AHCA). About half of the recipients are children or adolescents under the age of 21. While children are the largest category of beneficiaries, most of the costs arise from providing services to seniors, especially nursing home care, as well as to people with disabilities who have significant medical expenses.

There are four categories of Medicaid eligibility for adults in Florida, which include low-income families, pregnant women, emergency medical assistance for non-citizens, and Medicaid for the elderly and disabled. Eligibility for each of those programs is based on specific income criteria. Medicaid enrollment rates in Lee County are lower than the state rates.

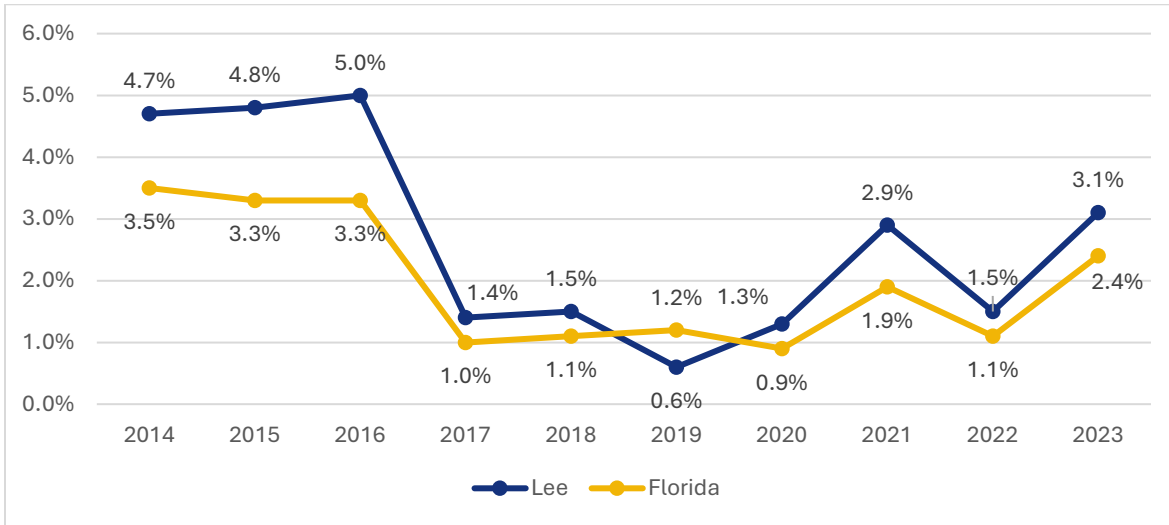
Exhibit SS4: Monthly Medicaid Enrollment, Percent of Population, Lee County and Florida, 2014-2023



Source: Florida Agency for Health Care Administration

Florida KidCare is the state-funded children's health insurance program for those who are uninsured from birth to age 19 and meet income and eligibility requirements. Three state agencies and the Florida Health Kids Corporation work together to form KidCare. The four components of Florida KidCare are: Medicaid, Florida Health Kids, Medikids, and Children's Medical Services (CMS) Network. Medicaid is for children from birth to 19. Florida Health Kids is for children ages 5 to 18 who are ineligible for Medicaid or CMS Network (families pay a monthly premium, based on their income). Medikids for children ages 1 to 4 (families pay a monthly premium, based on their income). The CMS Network is for children with special healthcare needs up to 200% of the Federal Poverty Level. Lee County has a slightly higher percentage of children aged 1-4 enrolled in MediKids than the state as a whole (3.1% Lee, 2.4% Florida, 2023).

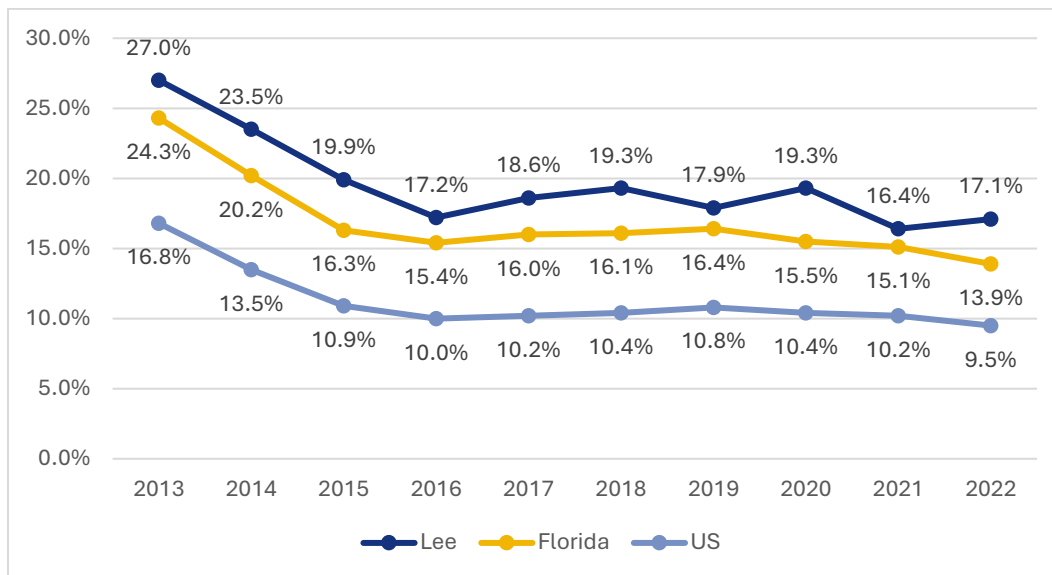
Exhibit SS5: Children Covered by MediKids (Aged 1-4), Percentage of Population Aged 1-4, Lee County and Florida, 2014-2023



Source: Florida Agency for Health Care Administration

Between 2013 and 2016, Lee County, Florida, and the United States started to see a decline in the percentage of the population who were uninsured. Lee County consistently has a higher percentage of people under the age of 65 who are uninsured. It is estimated that in 2022, 17.1 percent of Lee County residents under the age of 65 were without insurance. The following exhibits break out the population who are uninsured by age, sex, race and ethnicity, educational attainment, and income.

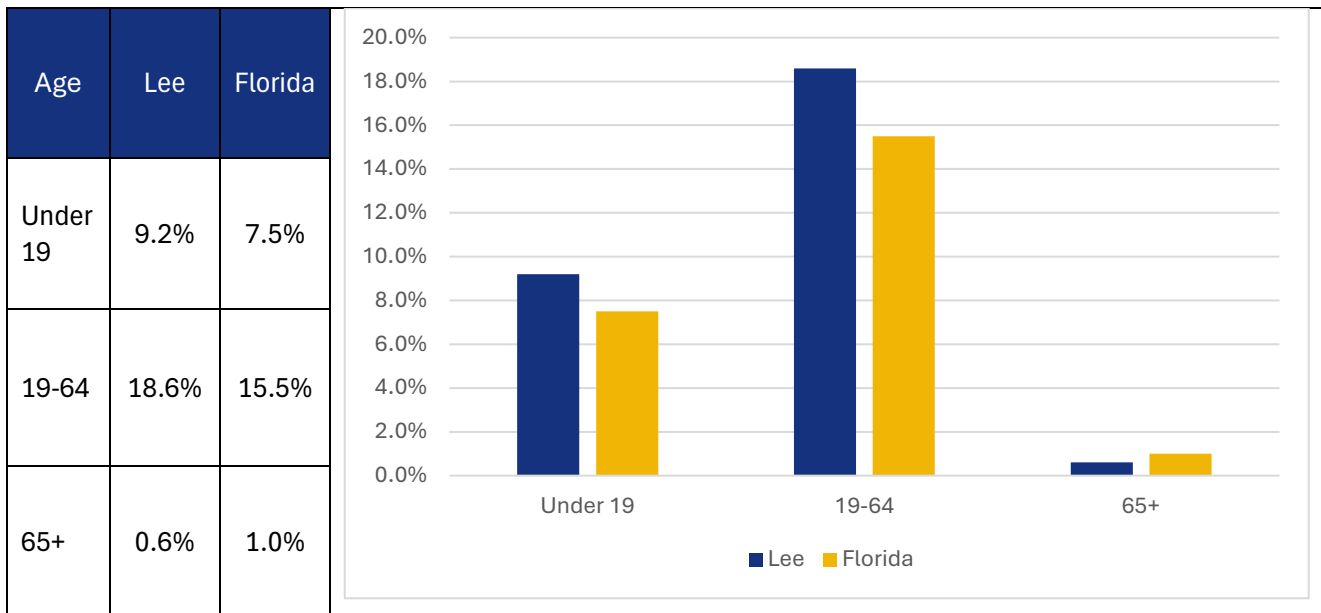
Exhibit SS6: Percentage of the Population Under 65 Years of Age who are Uninsured, Lee County, Florida, United States, 2013-2022



Source: U.S. Census Bureau, Small Area Health Insurance Estimates

In 2023, for the population under 19 years of age in Lee County, 9.2 percent were uninsured compared with 7.5 percent in Florida. Of the core working population 19-64 years of age, in Lee County, 18.6 percent were without health insurance compared with 15.5 percent in the state of Florida, a difference of 3.1 percent. For the population 65 years of age and older in Lee County, only 0.6 percent were without health insurance, while in Florida, only 1.0 percent lacked insurance. This very low proportion of the uninsured is due to the “Medicare effect”; currently, those 65 years of age and above are eligible for Medicare.

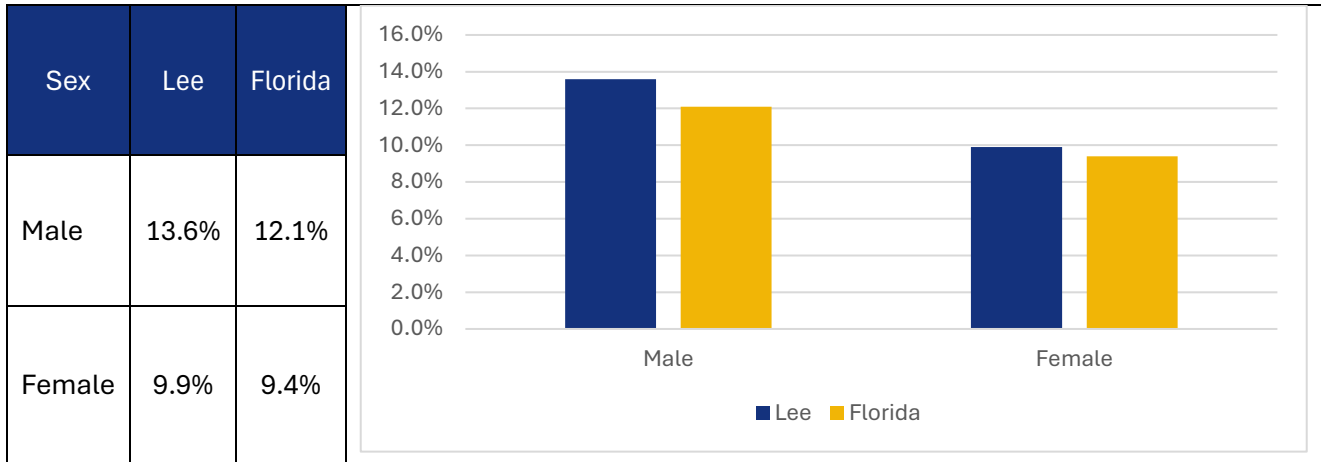
Exhibit SS7: Percentage of Uninsured by Age, Percentage of Civilian Noninstitutionalized Population, Lee County and Florida, 2023



Source: U.S. Census Bureau, 2023 American Community Survey 1-Year Estimates, Table S2701

Compared to females, males in Lee County and in Florida have a higher percentage of those who are uninsured (13.6% male, 9.9% female, Lee 2023). For both males and females, the percentage of uninsured is a little higher in Lee County than the state average. Please note that this data includes both those who are over and under the age of 65.

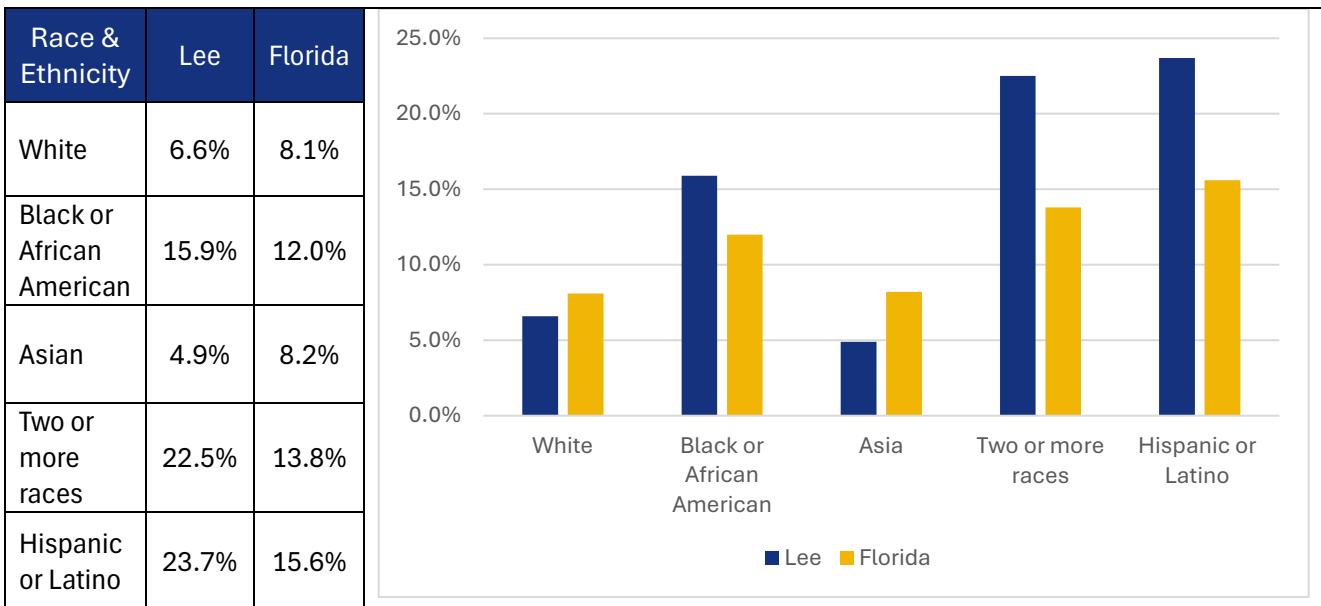
Exhibit SS8: Percentage of Uninsured by Sex, Percentage of Civilian Noninstitutionalized Population, Lee County and Florida, 2023



Source: U.S. Census Bureau, 2023 American Community Survey 1-Year Estimates, Table S2701

For the black, Hispanic, and multiracial population in Lee County, the percentage of uninsured is greater than the average for the state of Florida. The Hispanic or Latino population had the highest percentage of those who are uninsured when compared to other races and ethnicities; that percentage is significantly higher than the state average (23.7% Lee, 15.6% Florida, 2023).

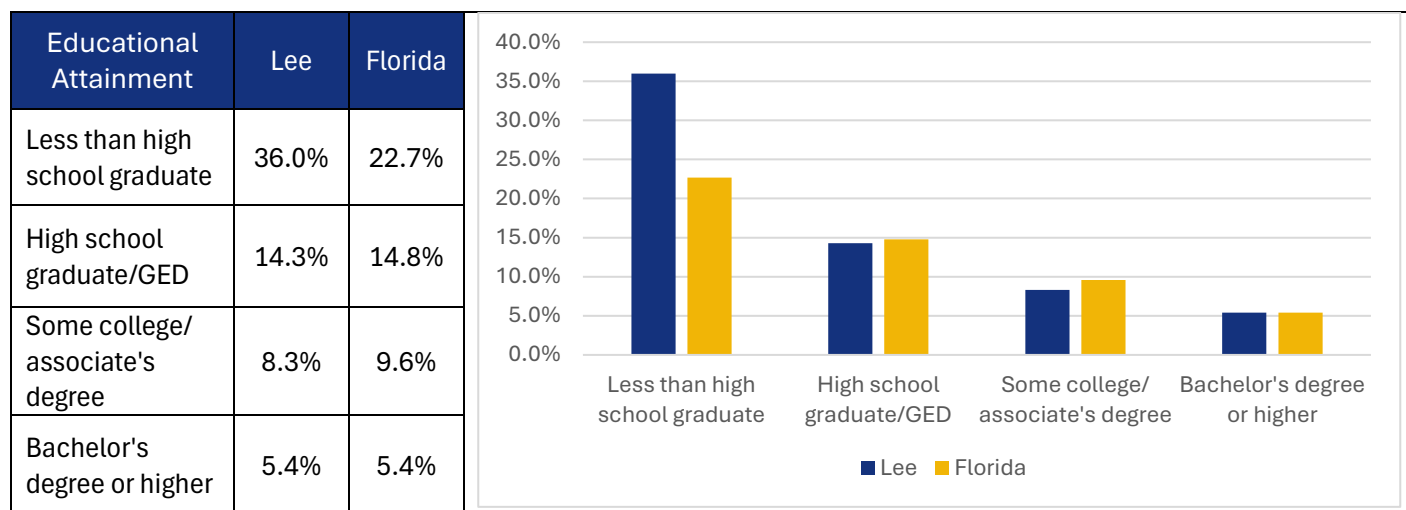
Exhibit SS9: Percentage of Uninsured by Race and Ethnicity, Percentage of Civilian Noninstitutionalized Population, Lee County and Florida, 2023



Source: U.S. Census Bureau, 2023 American Community Survey 1-Year Estimates, Table S2701

For both Lee County and Florida, as the educational level increases, the percentage of individuals in that group who are uninsured decreases. In Lee County, 36 percent of those with less than a high school diploma were uninsured compared to only 5.4 percent of those who have a bachelor's degree or higher.

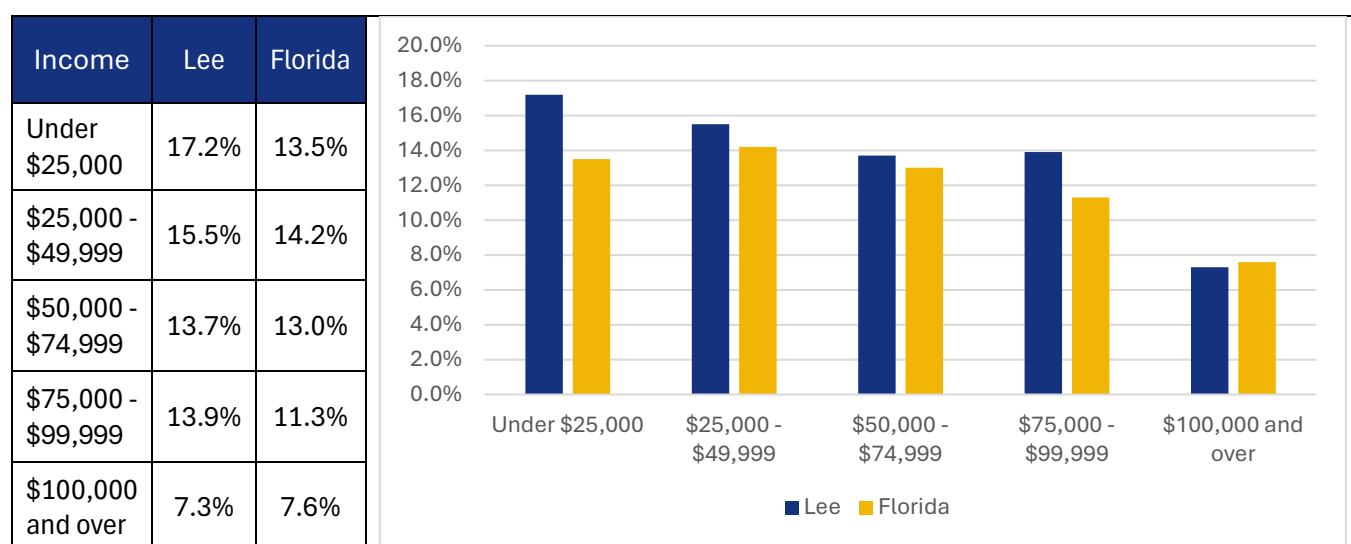
Exhibit SS10: Percentage of Population 26 Years and Older Uninsured by Educational Attainment, Percentage of Civilian Noninstitutionalized Population, Lee County and Florida, 2023



Source: U.S. Census Bureau, 2023 American Community Survey 1-Year Estimates, Table S2701

In Lee County, those with an income under \$25,000 are the most likely to be uninsured (17.2% Lee, 13.5% Florida, 2023). Those with household incomes over \$100,000 are the least likely to be uninsured (7.3% Lee, 7.6% Florida, 2023).

Exhibit SS11: Percentage of Uninsured by Household Income (in 2023 Inflation-Adjusted Dollars), Percentage of Civilian Noninstitutionalized Population, Lee County and Florida, 2023



Source: U.S. Census Bureau, 2023 American Community Survey 1-Year Estimates, Table S2701



Source: Photo courtesy of NCH

Accessing the Emergency Room

Lee County Residents made 243,981 visits to hospitals in 2023 that did not result in an inpatient admission. Private insurance was the number one payer source, representing 29.1 percent of the visits; Medicaid was second with 28.6 percent. The largest number of visits was made to the four Lee Health hospitals (a total of 74.7% of the visits). Lehigh Regional Medical Center, the other hospital in the county, represented 7.9 percent of the visits. Charlotte and Collier County hospitals were the most frequently visited outside of Lee County.

Exhibit SS12: Emergency Room Visits by Lee County Residents, Payer Source, 2023

Hospitals	Medicaid	Medicare	No charge /Charity	Other	Private, incl. HMO	Self-Pay	Total
Healthpark Medical Center	3,3108	7,640	1,131	1,766	17,166	3,730	64,541
Lee Memorial Hospital	8,665	13,066	2,237	2,694	12,654	5,090	44,406
Gulf Coast Hospital	6,885	13,165	1,511	2,709	12,976	3,040	40,286
Cape Coral Hospital	4,973	12,335	828	2,445	10,037	2,363	32,981
Lehigh Regional Medical Center	7,444	2,489		254	5,690	3,504	19,381
HCA Fawcett	3,325	3,407	358	673	4,769	1,109	13,641
NCH Baker Hospital	884	4,288		507	1,055	824	7,558
Advent Health Port Charlotte	1,392	1,821	1	336	2,575	661	6,786
NCH North Hospital	1,372	2,134		317	837	800	5,460
Physicians Regional Medical Center - Pine Ridge	93	543		73	385	137	1,231
Charlotte Regional Medical Center	77	93		62	155	98	485
Physicians Regional Medical Center - Collier Blvd	66	57		49	138	62	372
Sarasota Memorial Hospital	52	53	9	27	94	51	286
Anne Bates Leach Eye Hospital	25	84		6	102	35	252
All Other Hospitals	1,458	1,078	77	386	2,385	931	6,315
Grand Total	69,819	62,253	6,152	12,304	71,018	22,435	243,981

Source: AHCA via Broward Regional Health Planning Council Hospital Inpatient and Emergency Department Analytical System. The AHCA ED data contains records for all ED visits for which the severity of the visits did not result in an inpatient admission. Includes visits by Lee County residents to the ED of any hospital in Florida.

Blank spots represent where no data was collected

*Visits are indicative of Lee County residents only, not all visits for each facility

Exhibit SS13 shows the number of emergency room visits to the most visited hospitals by Lee County residents by city for 2023. The cities were determined based on zip codes. The hospitals that residents were most likely to visit varied greatly based on the city.

Exhibit SS13: Emergency Room Visits by Lee County Residents by City, 2023

City	Healthpark Medical Center	Lee Memorial Hospital	Gulf Coast Hospital	Cape Coral Hospital	Lehigh Regional Medical Center	HCA Fawcett	NCH-Baker	Advent Health Port Charlotte	NCH - North Naples	Physicians Regional-Pine Ridge	All Other Hospitals	Total
Alva	447	351	656	39	293	17	14	17	8	7	103	1952
Boca Grande	0	0	3	0	0	0	2	5	1	0	119	130
Bokeelia	143	38	40	355	3	443	1	28	2	0	59	1112
Bonita Springs	1268	5449	606	32	23	10	4440	6	3722	650	364	16570
Cape Coral	12507	2575	3064	24573	172	11454	170	3986	136	61	2024	60722
Captiva	10	3	2	3	2	0	1	0	0	0	4	25
Estero	658	3968	730	20	16	5	971	3	322	100	200	6993
Fort Myers	29545	23502	21324	1413	1248	546	1396	322	739	221	2484	82740
Fort Myers Beach	481	94	67	9	3	9	61	2	37	9	60	832
Lehigh Acres	16619	3622	12269	445	17498	147	433	96	452	155	1628	53364
North Fort Myers	2472	4726	1403	5783	122	729	58	2308	35	27	583	18246
Pine Island	3	0	2	7	0	7	0	2	0	0	2	23
Saint James City	56	21	42	286	0	255	2	11	1	1	36	711
Sanibel	320	30	56	8	0	9	9	0	5	0	41	478
Tice	12	27	22	8	1	10	0	0	0	0	3	83
Grand Total	64541	44406	40286	32981	19381	13641	7558	6786	5460	1231	7710	243981

Source: AHCA via Broward Regional Health Planning Council Hospital Inpatient and Emergency Department Analytical System

Ambulatory Care-Sensitive conditions, such as asthma, diabetes, or dehydration, are conditions that can lead to hospitalization if timely and effective ambulatory care is not provided. Timely and effective ambulatory care can decrease hospitalizations by preventing the onset of an illness or condition, controlling an acute episode of an illness, or managing a chronic disease or condition.

High rates of Ambulatory Care-Sensitive hospitalizations in a community may be an indicator of a lack of or failure of prevention efforts, a primary care resource shortage, poor performance of primary healthcare delivery systems, or other factors that create barriers to obtaining timely and effective care. The Florida Department of Health has released an Ambulatory Sensitive Conditions Profile for Preventable Hospitalizations for individuals under 65 years of age, based on 2023 data, for each county. Lee County has a lower rate of preventable hospitalizations than the state average (803.3 Lee, 838.2 Florida). Hospitalizations from Ambulatory Care Sensitive Conditions (ACSCs) are hospital admissions that could have been avoided through access to high-quality outpatient care and serve as a key tool for community health needs assessments (CHNA). All data in the table are for those under the age of 65 unless indicated.

Exhibit SS14: Ambulatory Sensitive Conditions for Preventable Hospitalizations Under 65, Lee County and Florida, 2023

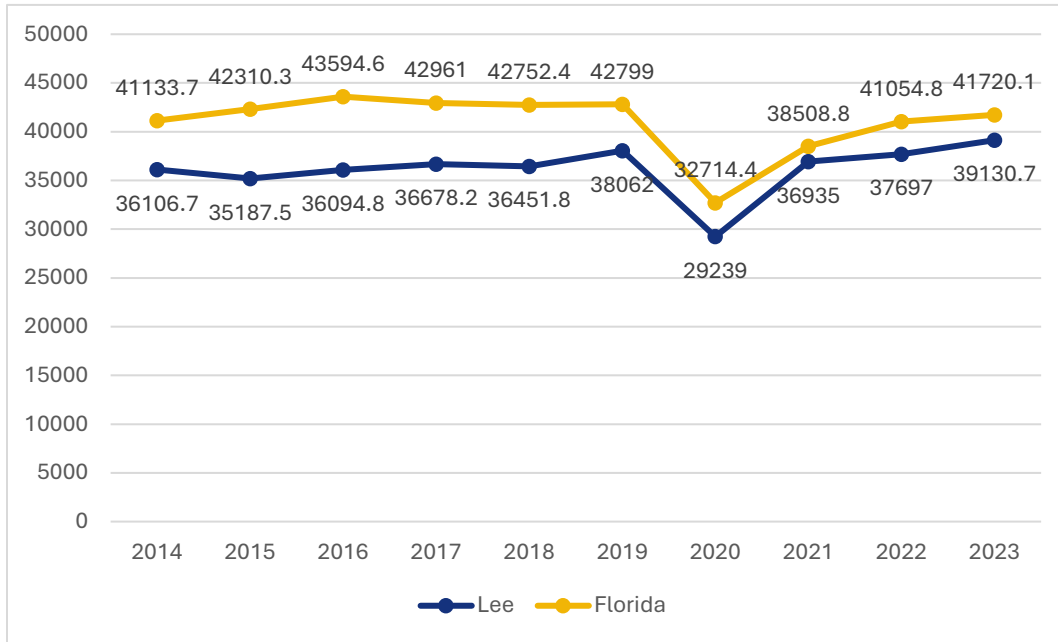
	County Count	County Rate	County Quartile	State Rate
All Conditions	4,678	803.3	2	838.2
Angina	30	5.2	2	6.0
Asthma	292	50.1	3	47.3
Cellulitis	402	69.0	2	66.9
Chronic Obstructive Pulmonary Disease	339	58.2	2	59.0
Congestive Heart Failure	392	67.3	1	85.8
Convulsions (Aged 0-5 Years)	19	3.3	2	4.0
Convulsions (Aged 6 Years and Older)	130	16.7	1	24.7
Grand Mal and Other Epileptic Conditions	325	55.8	1	81.4
Dehydration – Volume Depletion	402	69.0	4	40.9
Dental Conditions	58	10.0	2	9.9
Diabetes	741	127.2	2	138.5
Severe Ear, Nose, and Throat Infections	43	7.4	2	11.0
Hypertension	6	1.0	n/a	3.4
Gastroenteritis	226	38.8	3	34.6
Hypoglycemia	6	1.0	n/a	1.7
Kidney/Urinary Infection	188	32.3	4	20.3
Nutritional Deficiencies	681	116.9	2	138.7
Bacterial Pneumonia	454	78.0	3	70.4
Skin Grafts with Cellulitis	53	9.1	4	5.9
Pelvic Inflammatory Disease	37	12.7	3	10.8

Source: Florida Agency for Health Care Administration (AHCA)

Quartile is a comparison of the county to the other 67 counties in Florida. 1 indicates the best to 4 which is the worst.

Lee County residents consistently have fewer emergency department visits per 100,000 than the state average. The rates follow similar trends to those of the state.

Exhibit SS15: Age-Adjusted Emergency Department Visits, Rate per 100,000 Population, Lee County and Florida, 2014-2023



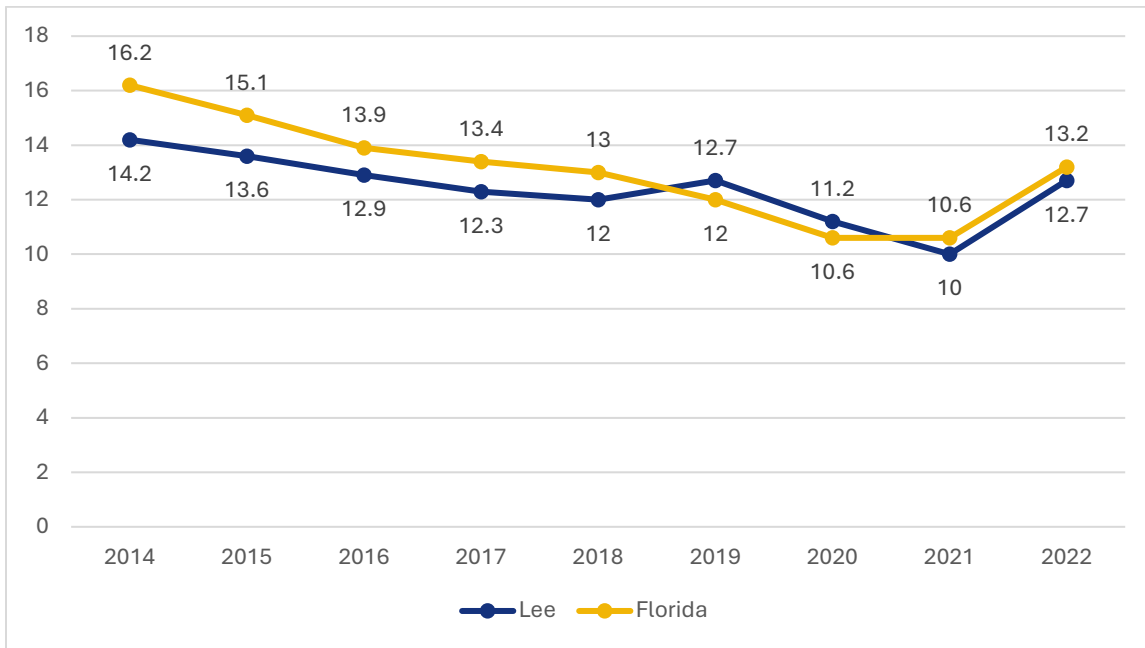
Source: Florida Agency for Health Care Administration (AHCA)

Food Insecurity

In 2023, 107,680 people in Lee County were food insecure. It was estimated that 38 percent of food-insecure individuals were above the SNAP and other nutrition programs threshold, while 62 percent were below the SNAP threshold, which is 200 percent of the poverty level. The average meal cost in Lee County is \$3.94, which is 19 cents higher than the Florida average, \$4.13. The annual food budget shortfall for the county was \$80,349,000; this is the total annualized additional dollar amount that food-insecure individuals report needing, on average, to purchase just enough food to meet their food needs.

After several years of falling, the food insecurity rate for Lee County and Florida increased between 2021 and 2022. The rate for Lee County is similar to the state rate (12.7% Lee, 13.2% Florida, 2022).

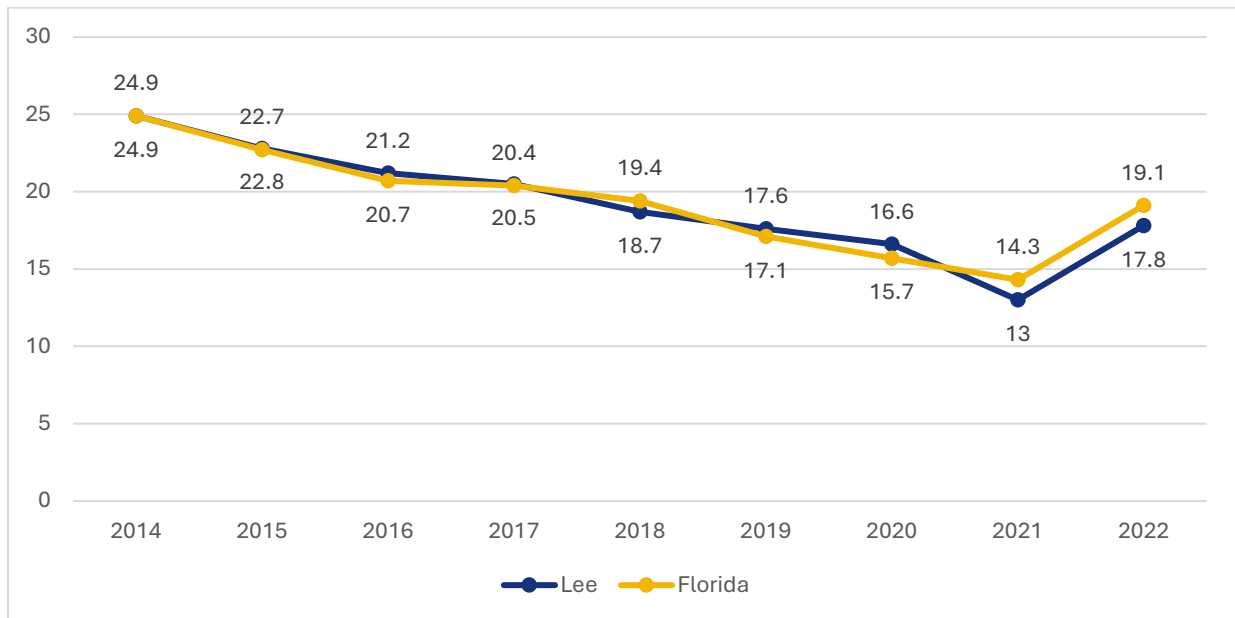
Exhibit SS16: Food Insecurity Rate, Percentage of Population, Lee County and Florida, 2014-2022



Source: Feeding America, Map the Meal Gap

The number of children experiencing food insecurity has been decreasing since 2014; however, the percentage increased between 2021 and 2022. When compared to the state, Lee County has had a similar child food insecurity rate (17.8% Lee, 19.1% Florida, 2022).

Exhibit SS17: Child Food Insecurity Rate, Percentage of Population Under 18, Lee County and Florida, 2014-2022



Source: Feeding America, Map the Meal Gap

Parks and Trails

Lee County offers a wide array of parks, beaches, and trails. There are 46 different types of parks available to Lee County residents and visitors, including regional parks, community parks, neighborhood parks, aquatic parks, and boat parks. Fifteen beaches are also available, attracting visitors from around the globe. Despite these resources, Lee County has a smaller percentage of the population living near a park compared to the Florida average.

Exhibit SS18: Proximity to Park and Trails, Lee County and Florida, 2022

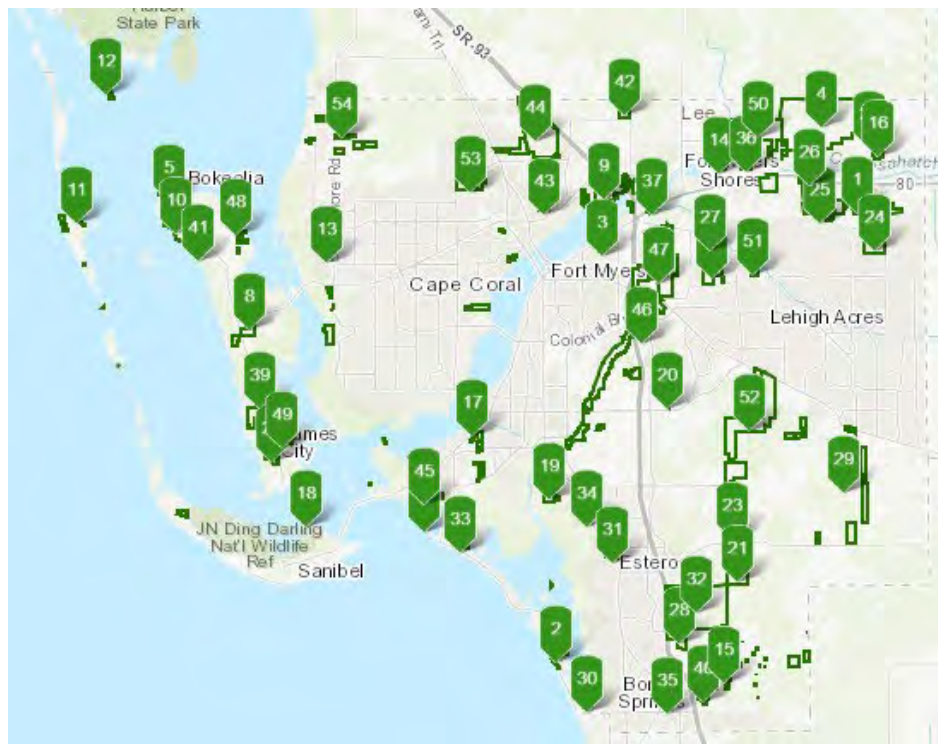
	Lee	Florida
Percent of the population living within a ten-minute walk (1/2 Mile) of a park	26.0%	43.0%
Percent of the population living within a ten-minute walk (1/2 Mile) of an off-street trail system	25.3%	18.8%

Source: Florida Environmental Public Health Tracking

Conservation Lands

Having a larger land area in conservation has a positive impact on health outcomes by improving water and air quality, and providing residents with access to recreation and environmental education opportunities. It also limits urban/sub-urban development to specific areas of the county. According to Conservation 20/20 Lee County, funding obtained from property taxes was used to acquire and manage 31,714.47 acres of preserve land in 52 different locations throughout Lee County. Below is a map of all Conservation 20/20 Lee County Preserves.

Exhibit SS19: Conservation 20/20 Preserve Location Map, Lee County, 2025



Source: Conservation 20/20 Lee County, pulled June 17, 2025

Transportation

According to the Centers for Disease Control and Prevention (CDC), high commute times can be linked to adverse health outcomes such as obesity, high blood pressure, heart disease, and poor mental health. Despite having a higher percentage of workers who work from home, Lee County workers have a slightly higher average travel time to work than the state average (29.6 Lee, 28.5 Florida, 2023).

Exhibit SS20: Commuting to Work, Workers 16 Years and Over, Percent of Workers (Aged 16+), Lee County and Florida, 2023

	Lee	Florida
Car, truck, or can - drove alone	69.9%	69.1%
Car, truck, or can - carpooled	8.7%	9.7%
Public transportation (excluding taxicab)	0.6%	1.4%
Walked	1.1%	1.5%
Other means	2.5%	2.5%
Worked from home	17.1%	15.8%
Mean travel time to work (minutes)	29.6	28.5

Source: U.S. Census Bureau, 2023 American Community Survey 1-Year Estimates, Table DP03

About 95 percent of households in Lee County have at least one vehicle available. A little over 14 percent of households have three or more vehicles.

Exhibit SS21: Cars per Household, Lee County and Florida, 2023

	Lee	Florida
No vehicles available	4.7%	5.8%
1 vehicle available	42.2%	39.1%
2 vehicles available	38.6%	38.3%
3 or more vehicles available	14.5%	16.9%

Source: U.S. Census Bureau, 2023 American Community Survey 1-Year Estimates, Table DP04

Crime

Lee County has a lower-than-average rate for all crimes and domestic violence when compared to the State of Florida as a whole. The three most common categories of crimes in Lee County are domestic violence, larceny, and burglary.

Exhibit SS22: Crime, Rate per 100,000 Population, 3-Year Rate, Lee County & Florida, 2021-2023

	Lee	Florida	Quartile*
Aggravated Assault	70	103.4	1
Burglary	61.6	94.3	1
Domestic Violence Offenses	300.5	309.1	3
Forcible Sex Offenses	7.7	10.2	1
Larceny	103.7	191.20	1
Motor Vehicle Theft	21.1	46.9	1
Murder	2.5	10.4	1
Robbery	15.3	27.3	2

Source: Florida Department of Law Enforcement (FDLE)

*County compared to other Florida Counties. The lowest quarter equals the lowest number

Health Behaviors



Source: Photo courtesy of the Health Planning Council of Southwest Florida, Inc.

This section of the Community Health Assessment (CHA) for Lee County examines key health behaviors that significantly impact the well-being of our residents. It includes an analysis of nutrition, physical activity, substance use, and preventive care. The section further explores injury mortality, including unintentional injury, unintentional poisoning, and motor vehicle crashes. Additionally, it addresses maternal and infant health, oral health, and mental health and mental disorders. Examining these behaviors is crucial for identifying areas where interventions and prevention efforts can effectively improve our community's health and quality of life.

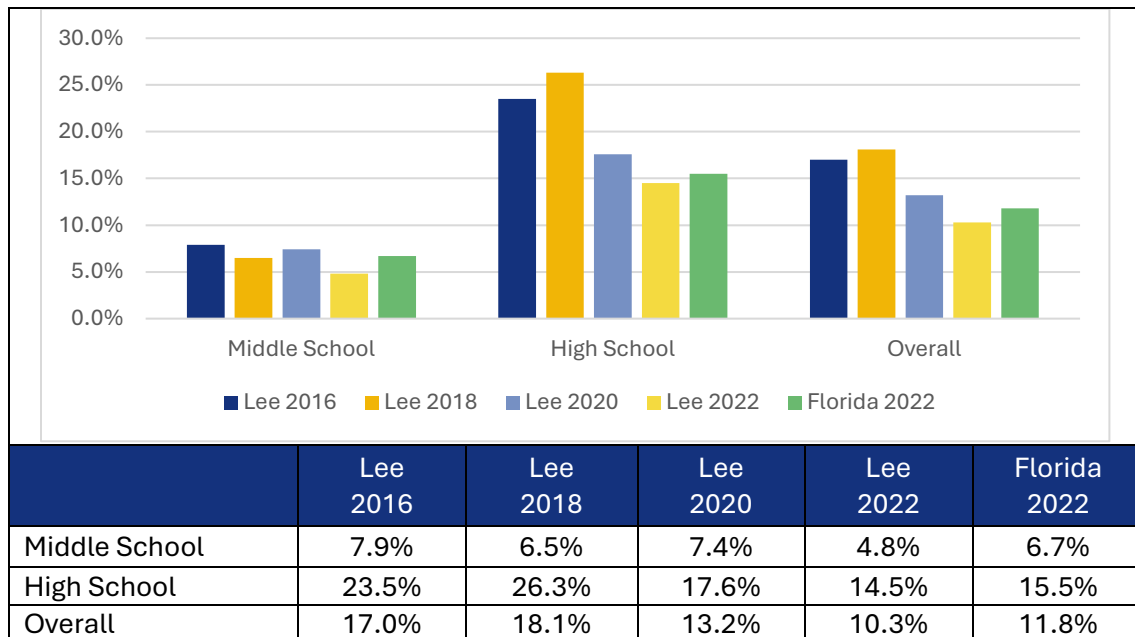
Florida Youth Substance Abuse Survey (FYSAS)

The Florida Youth Substance Abuse Survey (FYSAS) is a collaborative effort between the Florida Departments of Health, Department of Education, Department of Children and Families, Juvenile Justice, and the Governor’s Office of Drug Control. It is based on the “Communities That Care” survey, which measures the prevalence and frequency of drug use, the prevalence and frequency of other antisocial behaviors, and the degree to which risk and protective factors exist that can predict alcohol, tobacco, and other drug use, delinquency, gang involvement, and other problem behaviors in adolescents.

Schools and classrooms are randomly selected, and the survey responses are anonymous. The FYSAS is administered to students in grades 6 through 12 from January through March every year. Lee County did not participate in the 2024 survey; the latest data we have for this county is from 2022. In 2022, Lee County had 1,000 students complete the survey (527 middle school students, 473 high school students).

The percentage of high school students in Lee County who reported consuming alcohol in the past 30 days has decreased significantly over the past 10 years (23.5% 2016 to 15.5% 2022). However, the percentage of middle school students who reported drinking alcohol in the past 30 days while remaining low has not decreased at the same rate; it was 7.9% in 2016 and 6.7% in 2022.

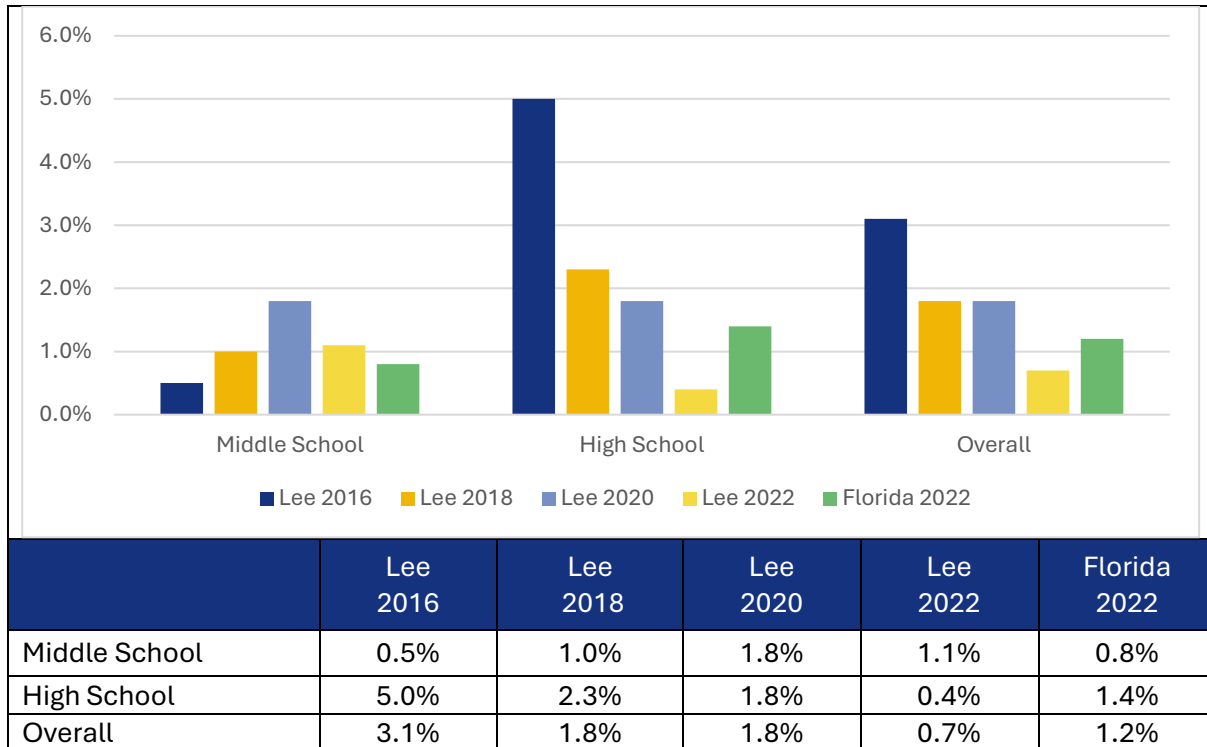
Exhibit HB1: Students who have drank alcohol in the past 30 days, Lee County 2016-2022, Florida 2022



Source: Florida Department of Health, Division of Community Health Promotion, FYSAS

The percentage of high school students in Lee County who reported cigarette use in the past 30 days has significantly decreased in the past decade (5.0% 2016, 0.4% 2022). The number of middle school students who reported smoking cigarettes in the past 30 days increased slightly to 1.1% in 2022.

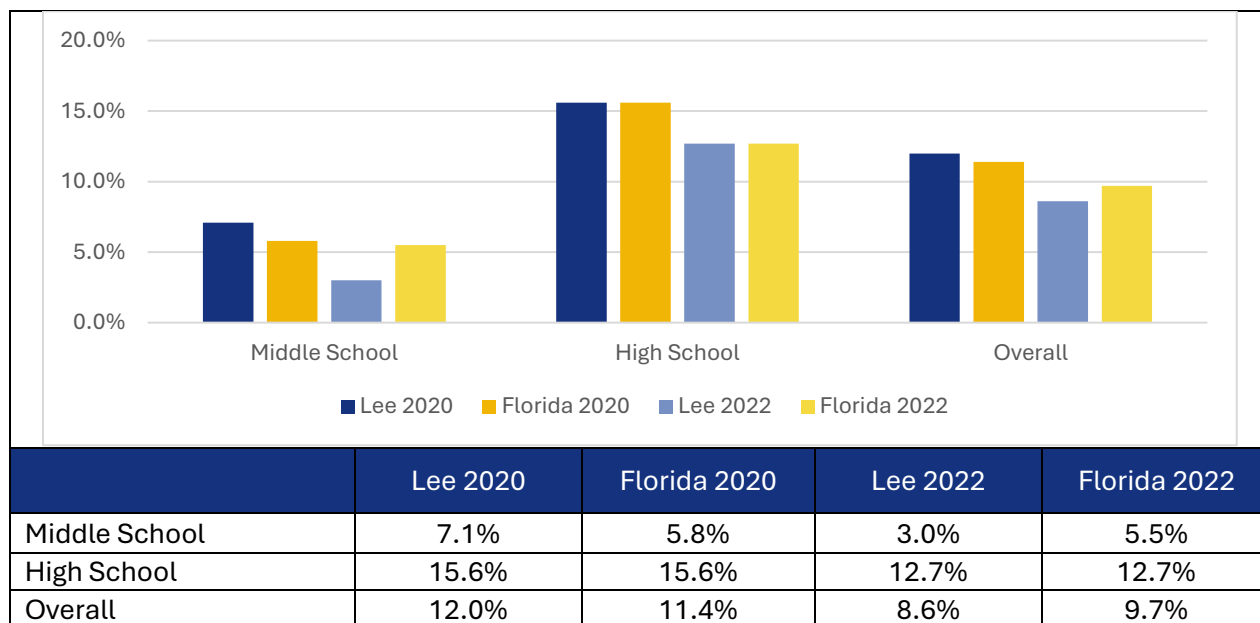
Exhibit HB2: Students who smoked cigarettes in the past 30 days, Lee County, 2016-2022, Florida 2022



Source: Florida Department of Health, Division of Community Health Promotion, FYSAS

The percentage of middle and high school students in Lee County who reported vaping nicotine in the past 30 days decreased between 2020 and 2022 (12.0% 2020, 8.6% 2022). It is also below the state average.

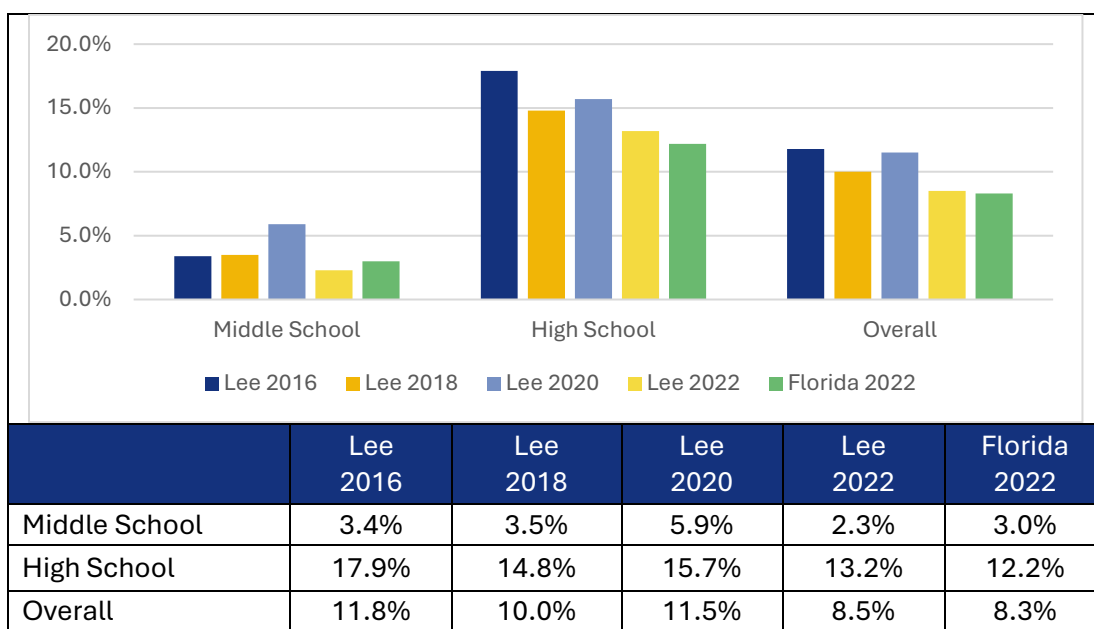
Exhibit HB3: Students who have vaped nicotine in the past 30 days, Lee County 2020-2022, Florida 2022



Source: Florida Department of Health, Division of Community Health Promotion, Florida Youth Substance Abuse Survey (FYSAS)

From 2016 to 2022, the percentage of middle and high school students in Lee County who reported using marijuana or hashish decreased (11.8% in 2016, 8.5% 2022).

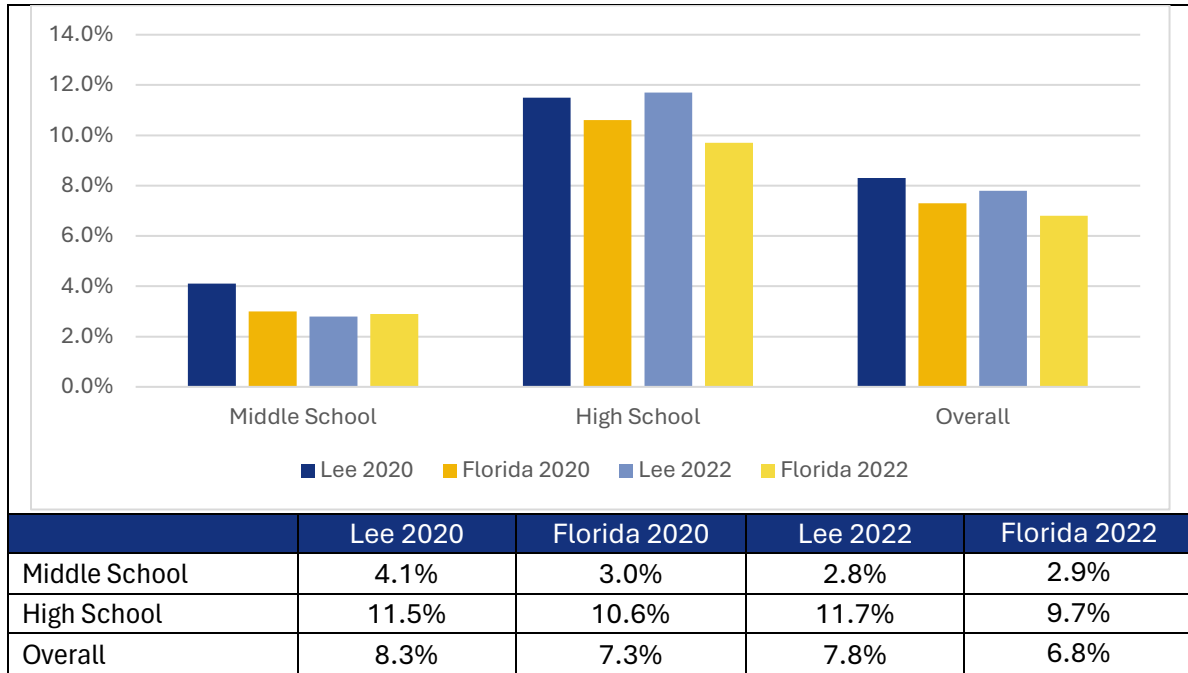
Exhibit HB4: Students who have used marijuana or hashish in the past 30 days, Lee County 2016-2022, Florida 2022



Source: Florida Department of Health, Division of Community Health Promotion, FYSAS

In 2022, 7.8 percent of high school students in Lee County reported vaping marijuana in the past 30 days. When compared to the Florida average in 2020 and 2022, Lee County had a higher percentage of students who reported vaping marijuana.

Exhibit HB5: Students who have vaped marijuana in the past 30 days, Lee County 2020-2022, Florida 2020-2022



Source: Florida Department of Health, Division of Community Health Promotion, FYSAS

Injury Mortality

Injuries affect the entire population regardless of gender, ethnicity, race, or socioeconomic status. Injuries remain a leading cause of death for residents of all ages in Lee County, as well as in Florida.

The risk of mortality due to an injury will vary by age, gender, and the external cause of the injury. Males have significantly higher death rates from injuries than females at any age group, while the elderly have the highest injury fatality rates.

All these causes of injuries are theoretically preventable, therefore granting the opportunity and challenge to reduce Years of Potential Life Lost and increase life expectancy at various ages.

More people in Lee County died from unintentional injuries than from any other fatal injuries in 2020. The 85 and older age group had the highest number of unintentional injury fatalities.

Exhibit HB6: Total Fatal Injuries, By Intent and Age Group, Lee County and Florida 2023

Intent	<1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	County Age Adj Rate	Florida Age Adj Rate
Homicide	0	0	0	0	3	3	5	6	1	8	1	1	0	3.71	6.36
Suicide	0	0	0	0	3	4	14	15	19	30	14	22	3	13.17	14.08
Undetermined	0	0	0	0	0	0	1	1	1	2	0	2	1	0.79	0.8
Unintentional	7	4	2	2	19	19	64	87	72	86	65	92	125	66.68	63.88

Source: Florida Department of Health, Bureau of Vital Statistics

Rates are per 100,000

The top three fatal injury mechanisms for Lee County in 2023 were poisonings, falls, and firearms. Poisoning includes drug overdoses. Poisoning has a significantly higher age-adjusted rate of fatal injuries than falls because it impacts more young people than falls.

Exhibit HB7: Total Fatal Injuries by Mechanism, Lee County and Florida, 2023

Mechanism	All Ages	County Age Adj Rate	Florida Age Adj Rate
Poisoning	246	33.09	31.99
Fall	222	12.15	12.29
Firearm	88	9.73	13.39
Suffocation	52	6.07	5.16
MV Traffic - Occupant	48	6.02	5.72
Drowning, Submersion (includes water transport)	27	3.17	2.37
MV Traffic - Motorcyclist	25	3.6	3.08
MV Traffic - Other, Unspecified	21	2.08	1.88
MV Traffic - Pedestrian	17	1.82	3
Other Specified & Classifiable	9	1.18	0.92
MV Traffic - Pedalcyclist	8	0.78	0.82
Fire, Flame	6	0.46	0.6
Other Specified & NEC	6	0.5	0.84
Unspecified	6	0.6	1.04
Cut, Pierce	5	0.73	0.8
Natural, Environmental	5	0.49	0.32
Pedestrian, Other	4	0.67	0.24
Struck By, Against	4	0.46	0.19
Transport, Other	4	0.44	0.53
Hot Object, Substance	1	0.15	0.02
Machinery	1	0.15	0.07

Source: Florida Department of Health, Bureau of Vital Statistics

Rates are per 100,000

NEC – not elsewhere classifiable

Unspecified refers to injuries for which the underlying or precipitating cause is not adequately documented (i.e., on the death certificate)

The leading cause of fatal injury in Lee County varies by age. For those who are younger, suffocation or motor vehicle traffic is most likely to cause a fatal injury; for those who are 25-64, drug poisoning or an overdose is the most frequent cause of fatal injury. For Lee County residents who are over the age of 65, falls are the leading cause of fatal injuries.

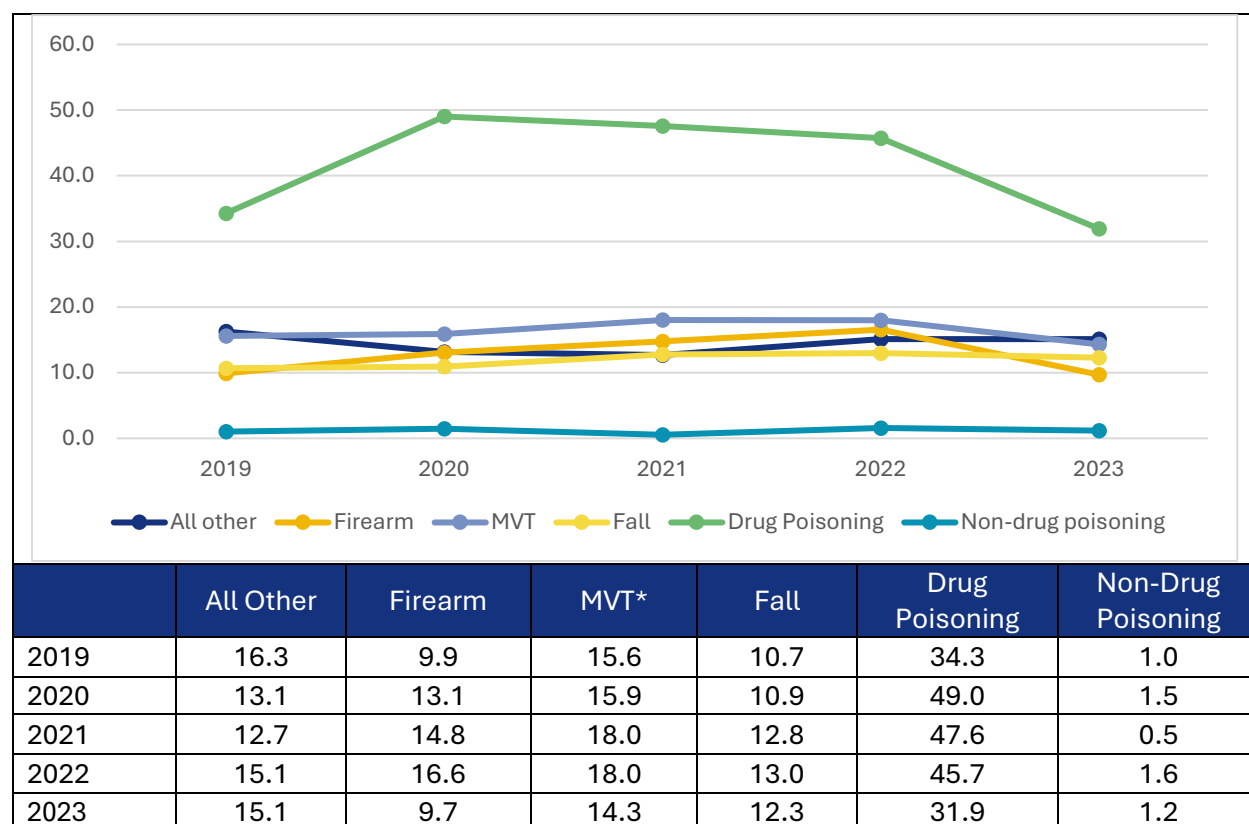
Exhibit HB8: Leading Cause of Fatal Injury by Age, Lee County, 2023

Age	Leading Cause of Fatal Injury
0 – 14	Suffocation
15 – 24	Motor vehicle traffic
25 – 64	Drug Poisoning
65+	Falls

Source: Florida Department of Health, Bureau of Vital Statistics

In Lee County, drug poisoning was responsible for fatal injuries at a higher age-adjusted rate than all the other causes. From 2019 to 2020, there was a drastic increase in drug poisoning deaths in Lee County (34.3 2019, 49.0, 2020); however, the rate has been declining to 31.9 in 2023. There was an increase in the death rate from falls (10.7 2019, 12.3 2023).

Exhibit HB9: Leading Cause of Fatal Injury by Mechanism, Age-Adjusted Death Rate, Rate per 100,000 Population, Lee County, 2019-2023

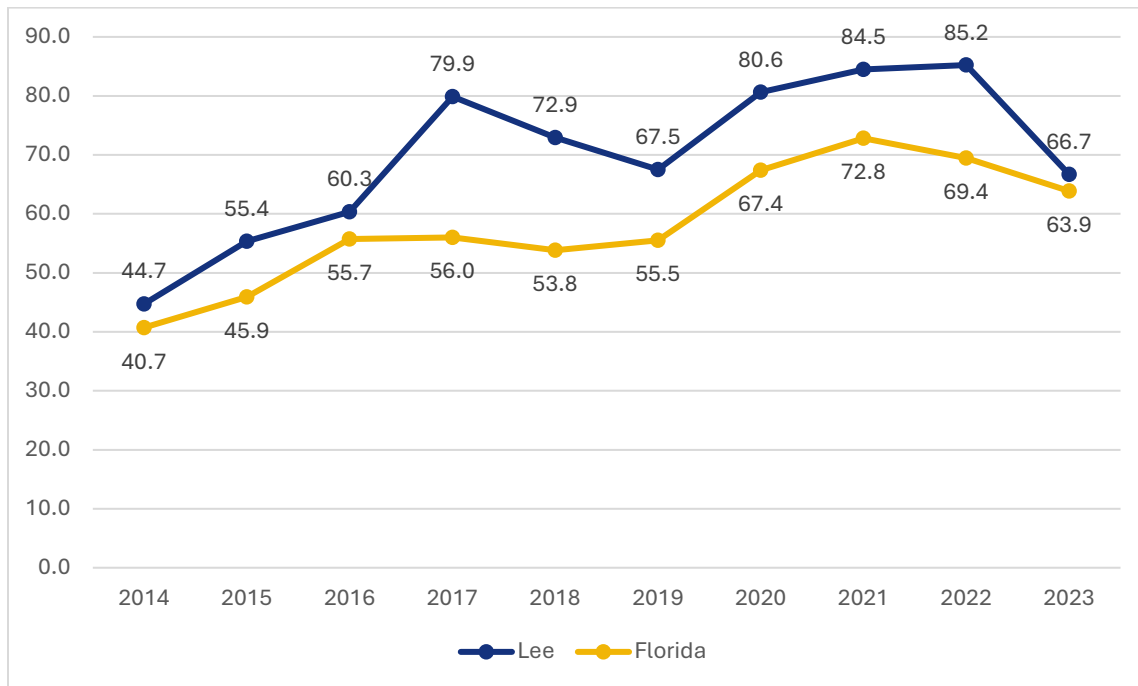


Source: Florida Department of Health, Bureau of Vital Statistics, * Motor Vehicle Traffic

Unintentional Injury

Unintentional injuries are injuries that were not intended to harm oneself or intentionally cause harm to another person. There was a significant increase in the death rate from unintentional injuries from 2014 to 2022 (40.7 2014, 85.2 2022); however, there was a considerable decline from 2022 to 2023 (85.2 2022, 66.7 2023). In 2023, Lee County's unintentional injury death rate was slightly higher than the Florida average (66.7 Lee, 63.9 Florida).

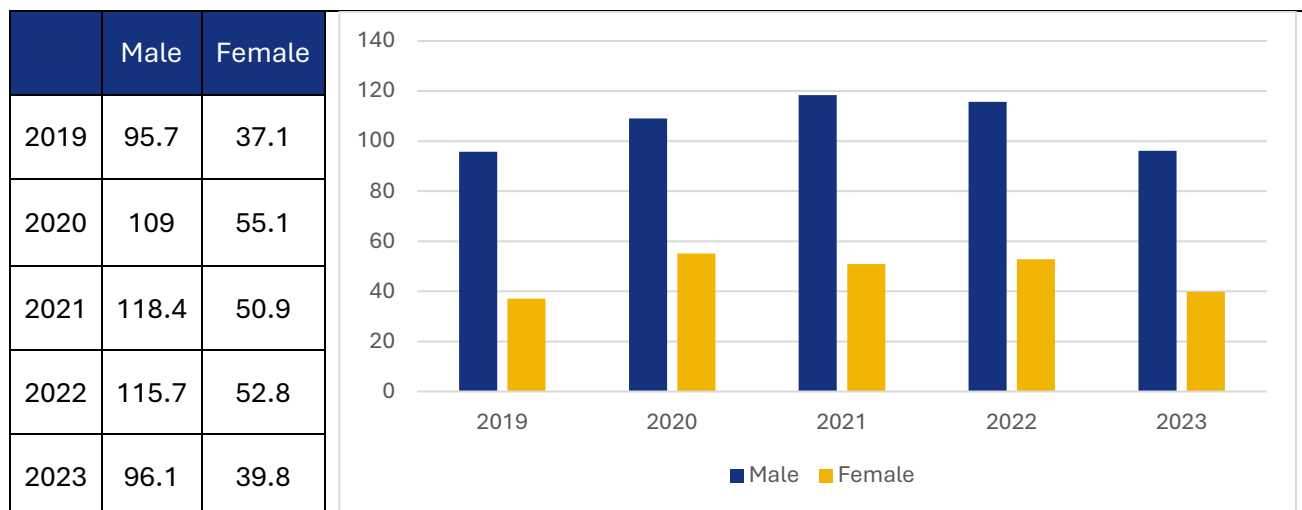
Exhibit HB10: Age-Adjusted Deaths from Unintentional Injury, Rate per 100,000 Population, Lee County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

From 2019 to 2023, males consistently had a higher death rate than females from unintentional injuries.

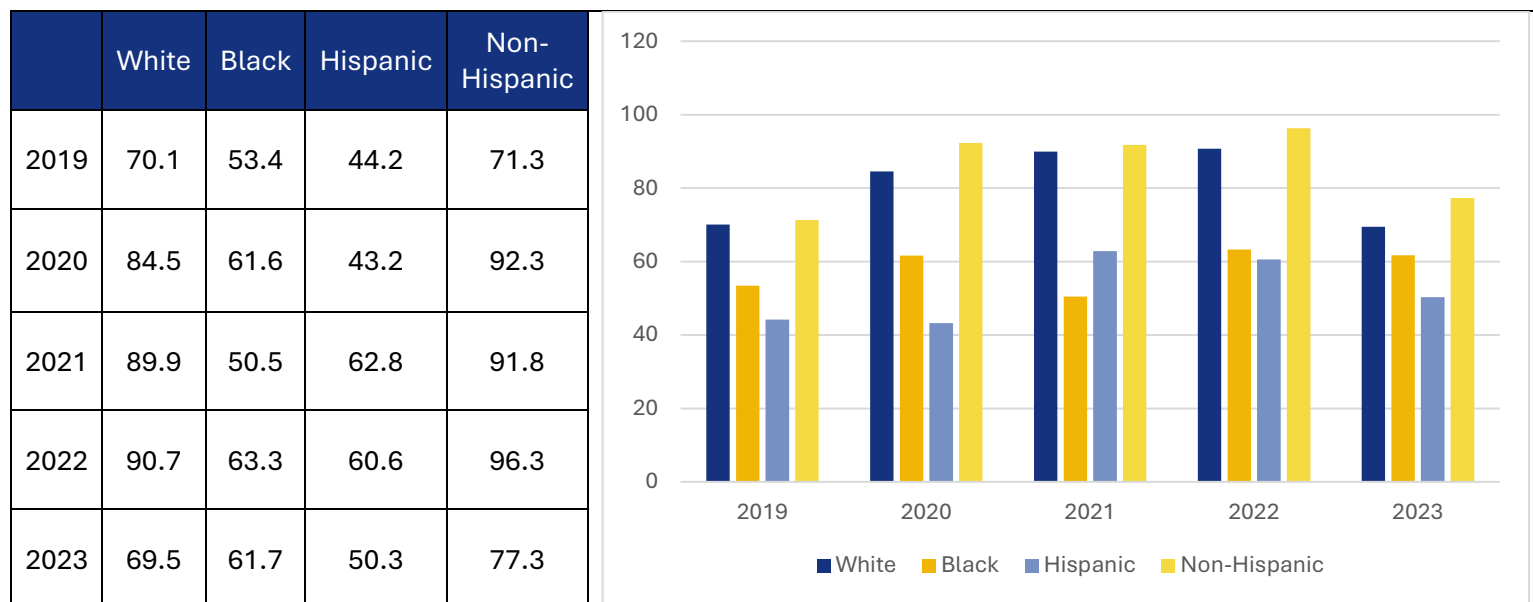
Exhibit HB11: Age-Adjusted Deaths from Unintentional Injury by Sex, Rate per 100,000 Population, Lee County, 2019-2023



Source: Florida Department of Health, Bureau of Vital Statistics

Whites and non-Hispanics had the highest unintentional injury death rate in every year in the table below.

Exhibit HB12: Age-Adjusted Deaths from Unintentional Injury by Race and Ethnicity, Rate per 100,000 Population, Lee County, 2019-2023



Source: Florida Department of Health, Bureau of Vital Statistics

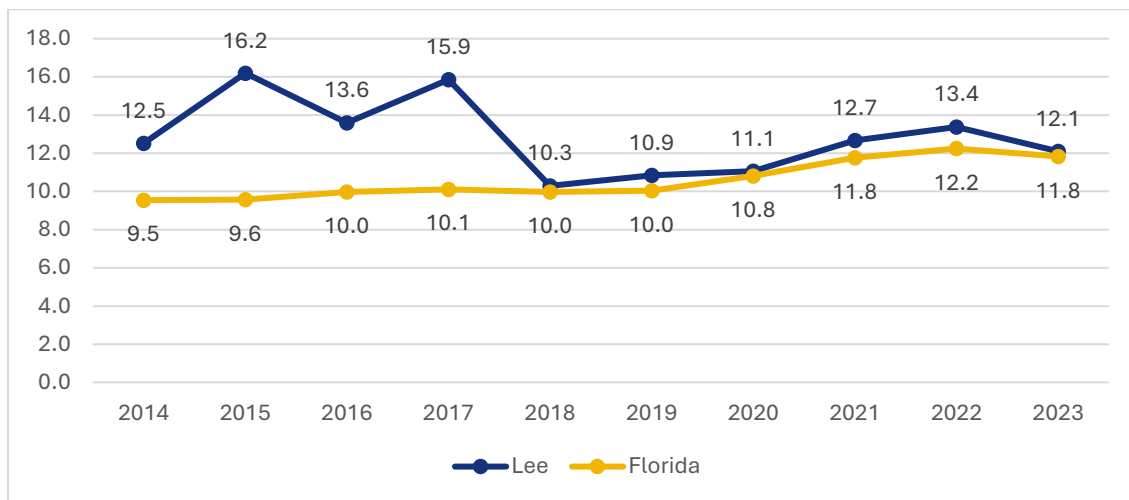


Source: Photo courtesy of the Health Planning Council of Southwest Florida, Inc.

Falls

Prior to 2018, Lee County had a significantly higher rate of deaths from unintentional falls than the state average. Since 2018, the rate has been similar to the state average (12.1 Lee, 11.8 Florida, 2023).

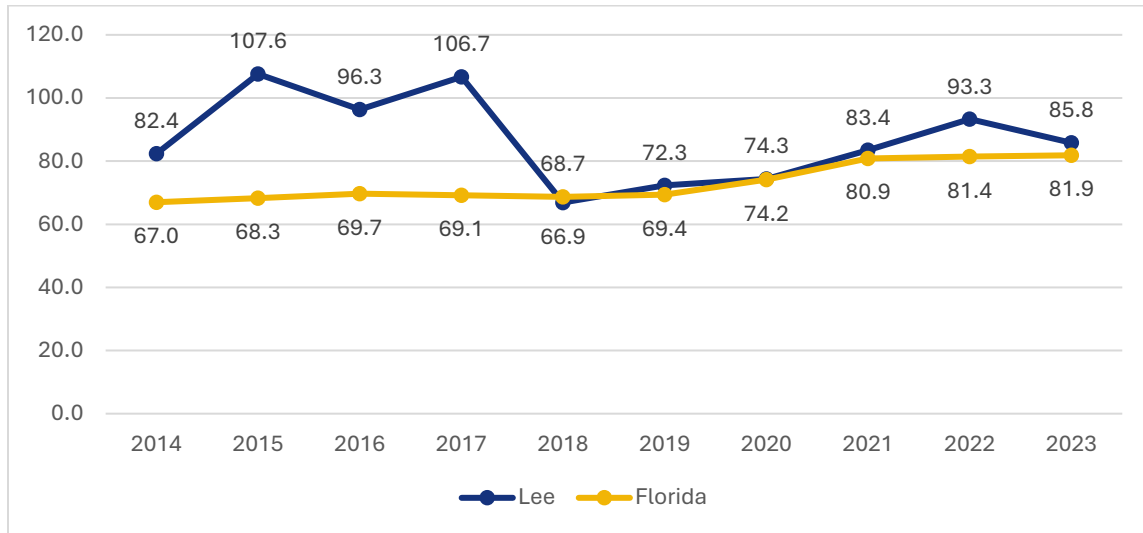
Exhibit HB13: Age-Adjusted Deaths from Unintentional Falls, Rate per 100,000 Population, Lee County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

Deaths from unintentional falls are most common in the population aged 65 or older. Prior to 2018, Lee County adults aged 65 and older had a significantly higher rate of deaths from unintentional falls than the state average. Since 2018, the rate has been relatively similar to the state average (85.8 Lee, 81.9 Florida, 2023).

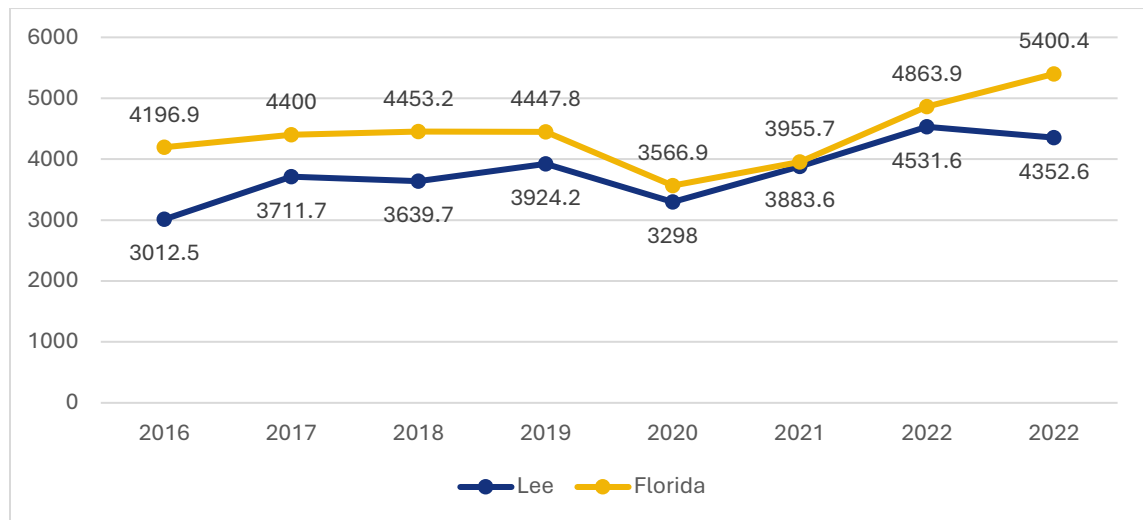
Exhibit HB14: Deaths from Unintentional Falls, Aged 65 and older, Rate per 100,000, Lee County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

Emergency department visits for non-fatal unintentional falls in the population aged 65 and older in Lee County have been rising, although there was a slight decline from 2022 to 2023. The rate for Lee County is lower than the state average (4352.6 Lee, 5400.4 Florida, 2023).

Exhibit HB15: Emergency Department Visits from Non-Fatal Unintentional Falls, Aged 65 and Older, Rate per 100,000, Lee County and Florida, 2016-2023

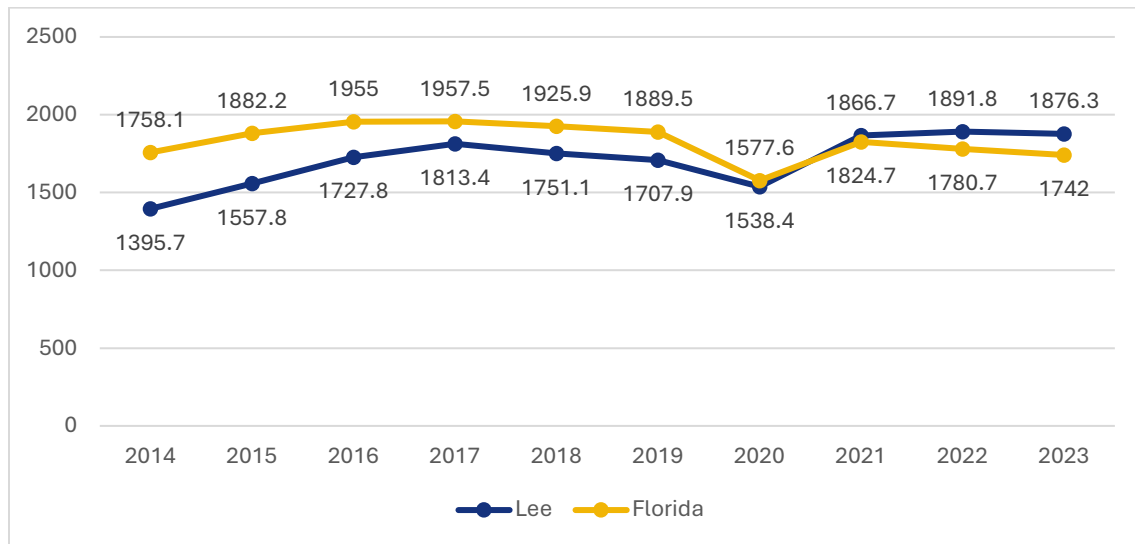


Source: Florida Agency for Health Care Administration (AHCA)

Motor Vehicle Crashes

Lee County consistently had a lower rate of motor vehicle crashes compared to the Florida average between 2014 and 2020. However, since 2021, the rate for Lee County has risen and has been higher than the state average (1876.3 Lee, 1742 Florida, 2023).

Exhibit HB16: Motor Vehicle Traffic Crashes, Rate per 100,000 Population, Lee County and Florida, 2014-2023



Source: Florida Department of Highway Safety and Motor Vehicles (HSMV)

When compared to Florida, Lee County has more alcohol confirmed motor vehicle traffic crashes, injuries, and fatalities.

Exhibit HB17: Alcohol Confirmed Motor Vehicle Traffic, 3-year Rate per 100,000, Lee County and Florida, 2021-2023

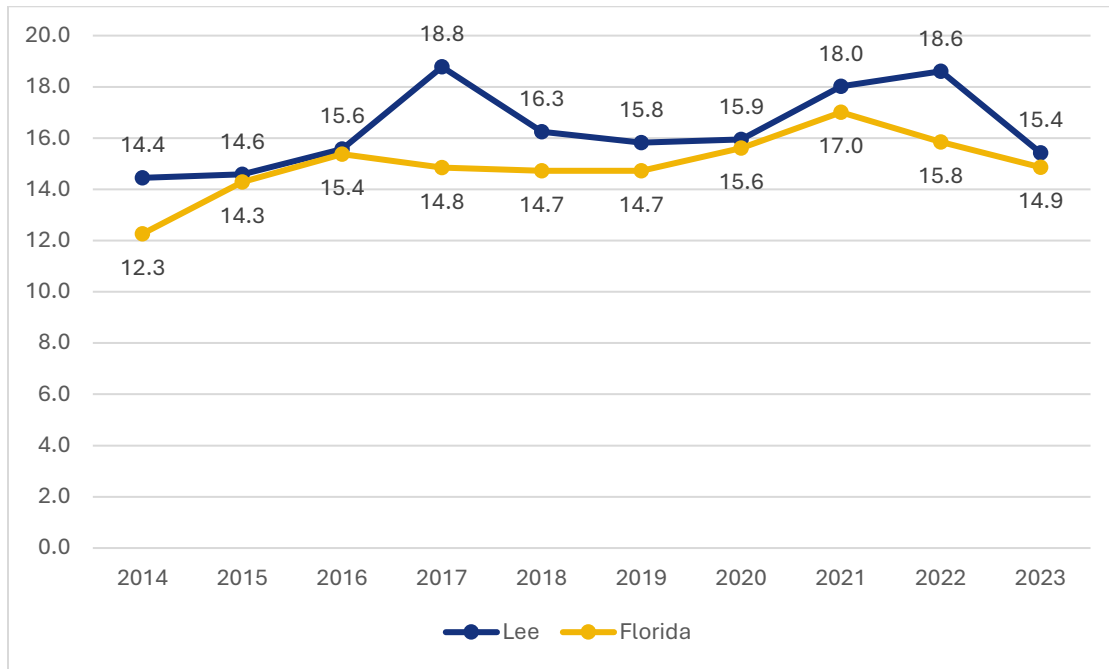
	Lee	Florida	Quartile
Motor Vehicle Traffic Crashes	33.7	23.1	3
Motor Vehicle Traffic Injuries	22.5	13.7	3
Motor Vehicle Traffic Crash Fatalities	2.3	1.8	2

Source: Florida Department of Highway Safety and Motor Vehicles (HSMV)

Quartiles – County is compared to other Florida counties. The lowest quarter equals the lowest number, or best outcome.

The age-adjusted death rate from motor vehicle crashes for Lee County in 2023 is slightly higher than the average for the state (15.4 Lee, 14.9 Florida).

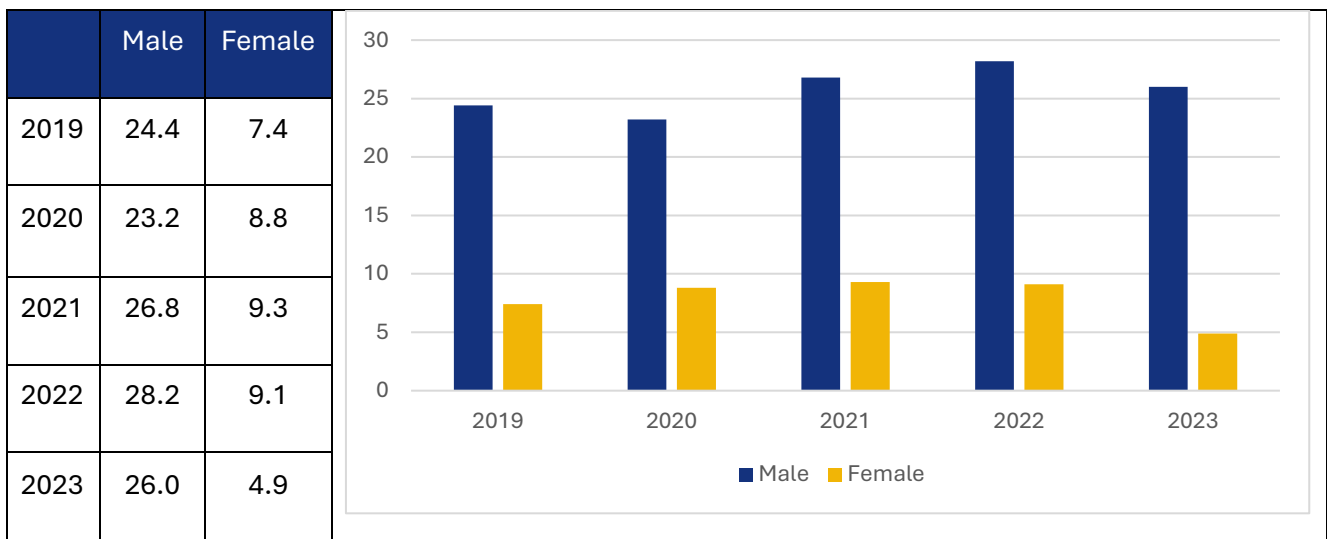
Exhibit HB18: Age-Adjusted Deaths from Motor Vehicle Crashes, Rate per 100,000 Population, Lee County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

In Lee County, men have a significantly higher rate of age-adjusted deaths from motor vehicle crashes than women.

Exhibit HB19: Age-Adjusted Deaths from Motor Vehicle Crashes by Sex, Rate per 100,000 Population, Lee County, 2019-2023

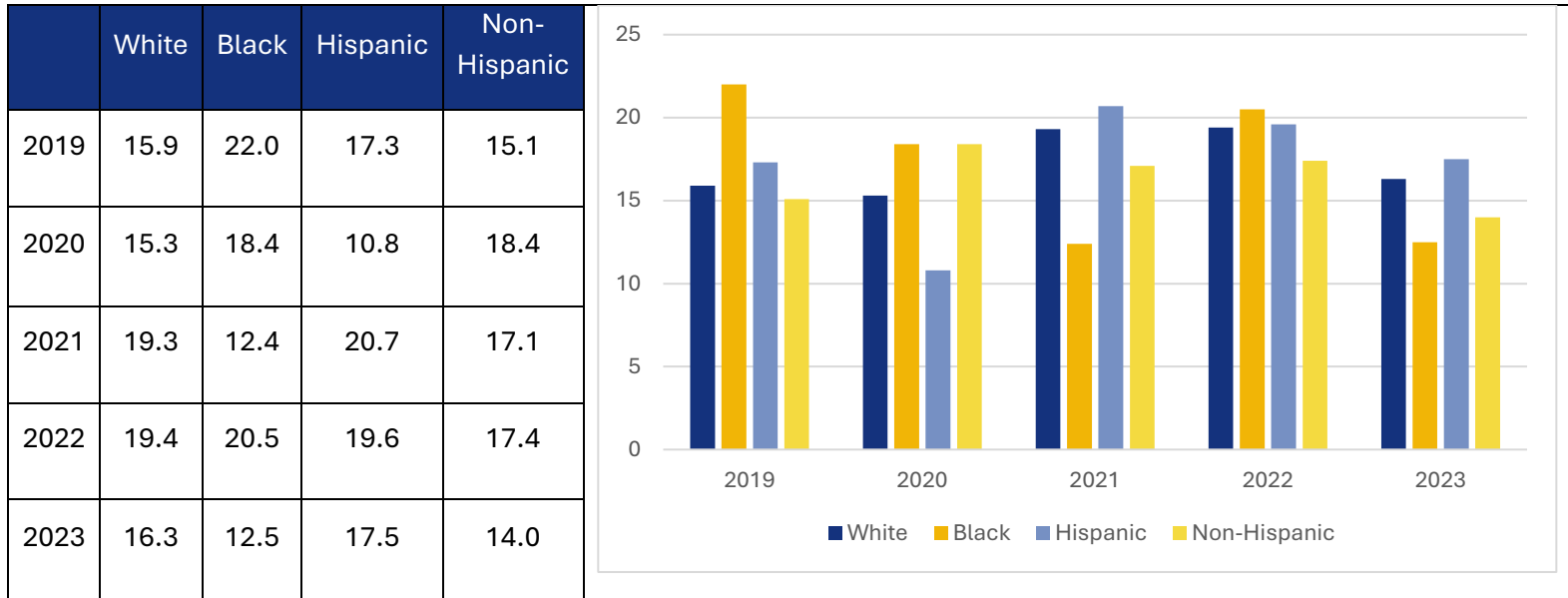


Source: Florida Department of Health, Bureau of Vital Statistics

2025 Lee County Community Health Assessment: Health Behaviors

In Lee County, for most years between 2019 and 2023, the age-adjusted rate of deaths from motor vehicle crashes is higher for the Black population than for the other races and ethnicities; however, in 2023, the Black population had the lowest rate of deaths from motor vehicle crashes.

Exhibit HB20: Age-Adjusted Deaths from Motor Vehicle Crashes by Race and Ethnicity, Rate per 100,000 Population, Lee County, 2019-2023



Source: Florida Department of Health, Bureau of Vital Statistics



Source: Photo courtesy of the Health Planning Council of Southwest Florida, Inc.

Maternal and Infant Health

Compared to other Florida counties for the years 2021-2023, Lee County has a higher rate for births to mothers aged 15-19 than the state average (16.0 Lee, 13.2 Florida); however, that rate has been improving.

Lee County is in the worst quartile for the state for births with 1st trimester prenatal care (with a rate of 66.0% compared to 71.7% for Florida). The trends for prenatal care in Lee County have been negative, with fewer receiving early or adequate prenatal care.

Exhibit HB21: Maternal and Infant Health Indicators, 3-year Figures, Lee County and Florida, 2021-2023

	County	State	Trend	Quartile
Birth family characteristics				
Total Births (Count, 3-year annual avg.)	7,491	220,668.3		2
Births to Mothers ages 15-44, per 1,000	60.4	54.5		3
Births to Unwed Mothers ages 15-44 (%)	49.1	46.1		3
Births to Mothers ages 15-19, per 1,000	16.0	13.2	Positive	2
Births to Mothers 19 and Over without High School Education (%)	11.1	9.2	Positive	3
Infant deaths				
Infant Deaths (0-364 days) per 1,000 Live Births	5.7	6.0	Inconsistent	2
Neonatal Deaths (0-27 days) per 1,000 Live Births	3.5	3.9	Inconsistent	2
Post-Neonatal Deaths (28-364 days) per 1,000 Live Births	2.2	2.0	Inconsistent	2
Low Birth Weight				
Births <1500 Grams (Very Low Birth Weight) %	1.6%	1.6%	Steady	3
Births < 2500 Grams (Low Birth Weight) %	8.7%	9.1%	Steady	2
Prenatal Care				
Births with 1st Trimester Prenatal Care (%)	66.0%	71.7%	Negative	4
Births to Mothers with No Prenatal Care (%)	1.7%	3.3%	Steady	1
Births with adequate prenatal care (Kotelchuck index) [%]	66.9%	63.3%	Negative	3

Source: Florida Department of Health, Bureau of Vital Statistics

*County compared to other Florida counties. 1 is the best to 4 as the lowest

Fewer women in Lee County breastfeed compared to the state average; however, that percentage has been increasing (77.7% Lee, 85.8% Florida, 2021-2023). The maternal death rate for Lee County is lower than the state rate (17.8 Lee, 24.2 Florida, 2021-2023); however, the trend has been negative.

Exhibit HB22: Reported Pre-Conception, Pregnancy, and Mother's Health and Behaviors, 3-year Figures, Lee County and Florida, 2021-2023

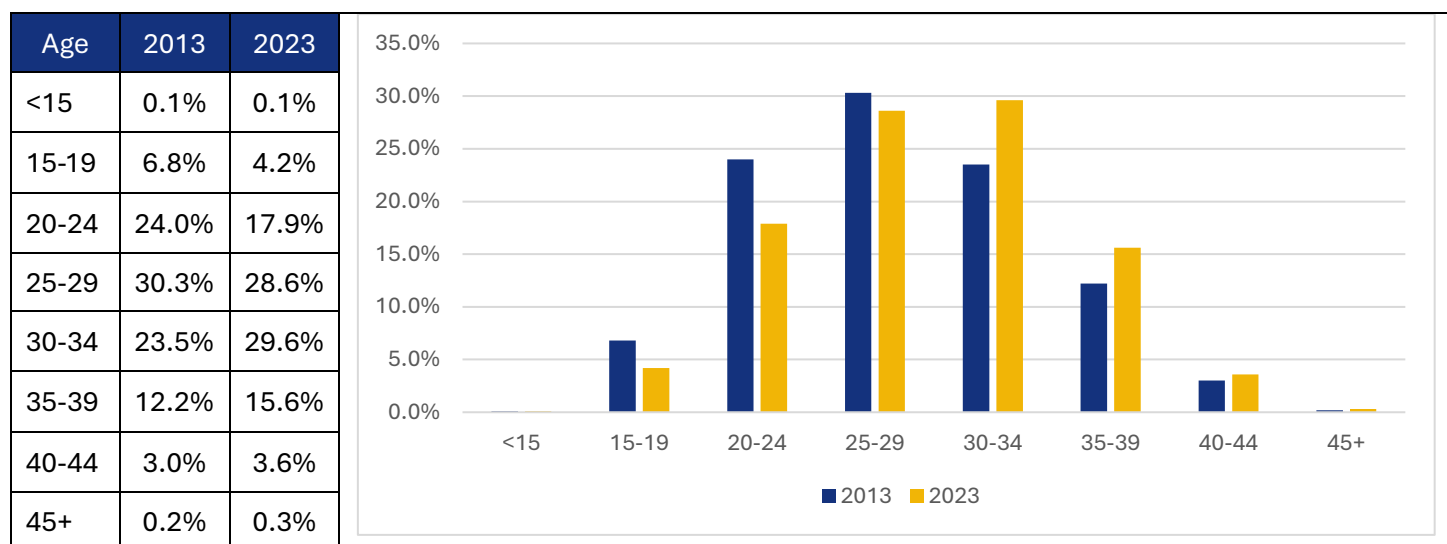
	County	State	Trend	Quartile*
Births to underweight mothers at the time pregnancy occurred, percent of births	2.9%	3.1%	Steady	1
Births to obese mothers at the time of pregnancy occurred, percent of births	31.0%	29.5%	Inconsistent	2
Births with inter-pregnancy interval <18 months, percent of births with known pregnancy interval	37.2%	36.3%	Negative	2
Repeat births to mothers aged 15-19 years, percent of births 15-19 years	12.4%	12.9%	Inconsistent	3
Births with self-pay for delivery payment source, percent of total births	1.5%	5.6%	Negative	2
Births covered by Medicaid, percent of births with a payment source	51.0%	43.9%	Steady	3
C-section births, percent of births	36.6%	35.9%	Positive	3
Mothers who initiate breastfeeding, percent of total births	77.7%	85.8%	Positive	4
Maternal deaths, rate per 100,000 live births	17.8	24.2	Negative	n/a

Source: Florida Department of Health, Bureau of Vital Statistics; Florida Department of Health, Bureau of Communicable Diseases

*County compared to other Florida counties. 1 is the best to 4 as the lowest

Between 2013 and 2023, the average age of mothers giving birth in Lee County increased. In 2013, 38.9% of mothers in Lee County were over the age of 30 at the time of birth; in 2023, 49.1% were over the age of 30.

Exhibit HB23: Births by Mother's Age, Percent of Births, Lee County, 2013, 2023

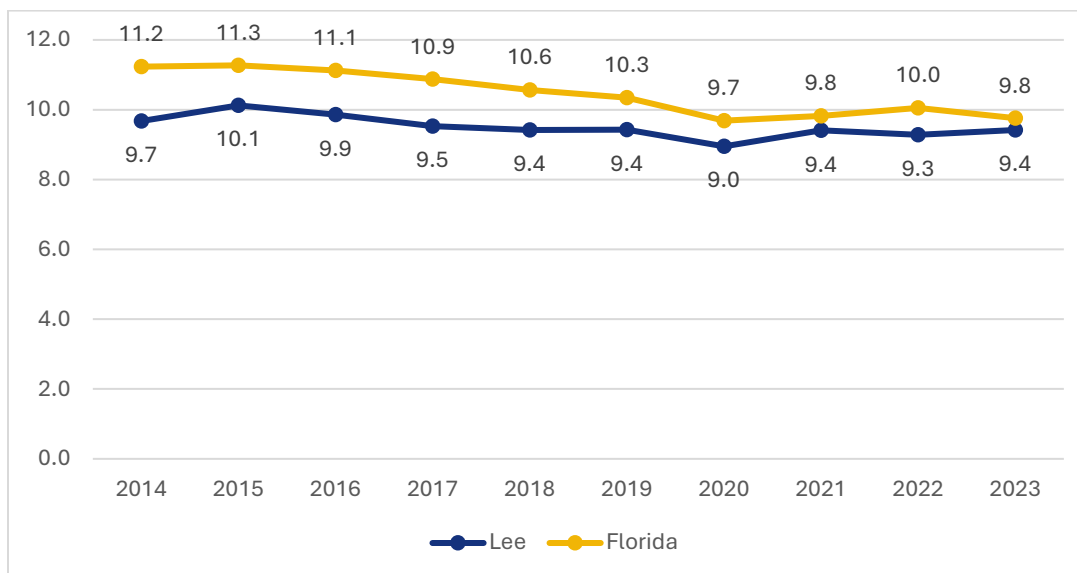


Source: Florida Department of Health, Bureau of Vital Statistics

2025 Lee County Community Health Assessment: Health Behaviors

The birth rate in Lee County has been lower than the Florida average every year from 2014 through 2023. The birth rate in Lee County has remained relatively steady for the past three years.

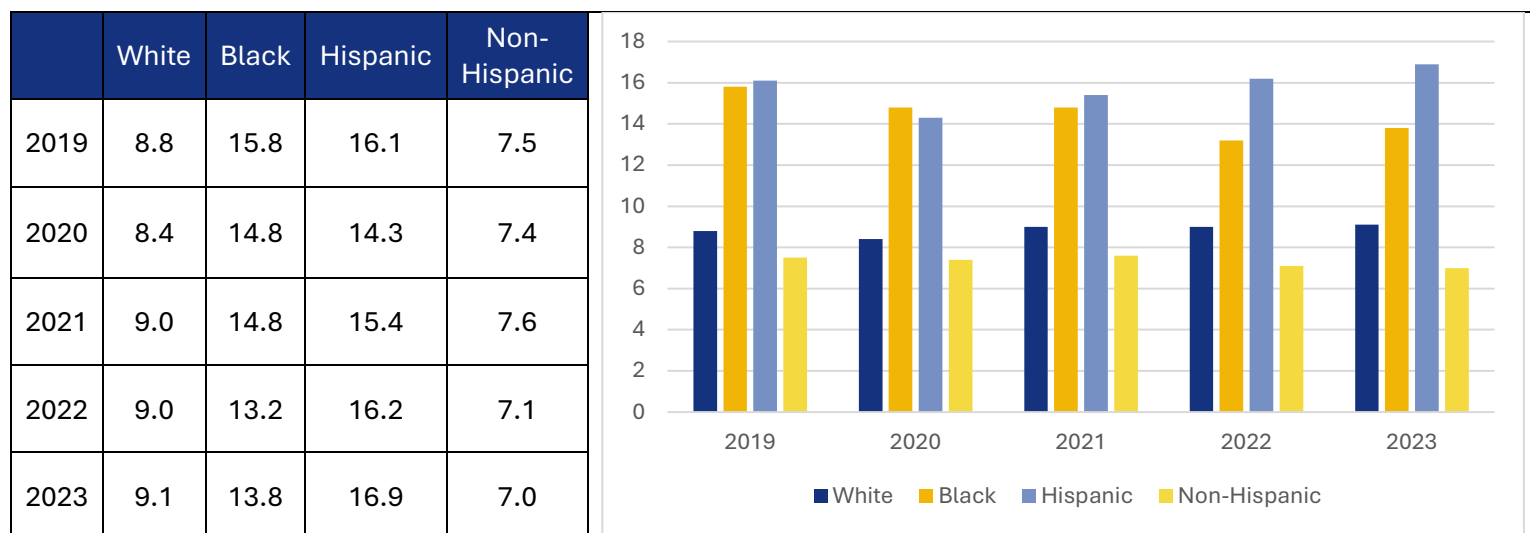
Exhibit HB24: Total Resident Live Births, Rate per 1,000 Population, Lee County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

Between 2019 and 2023, the birth rate in Lee County has been higher among the black population and Hispanic population than among the white population and non-Hispanic population. However, the birth rate among the white population has been increasing while the birth rate in the black population has been decreasing.

Exhibit HB25: Total Resident Live Births by Race and Ethnicity, Rate per 1,000, Lee County, 2021-2023

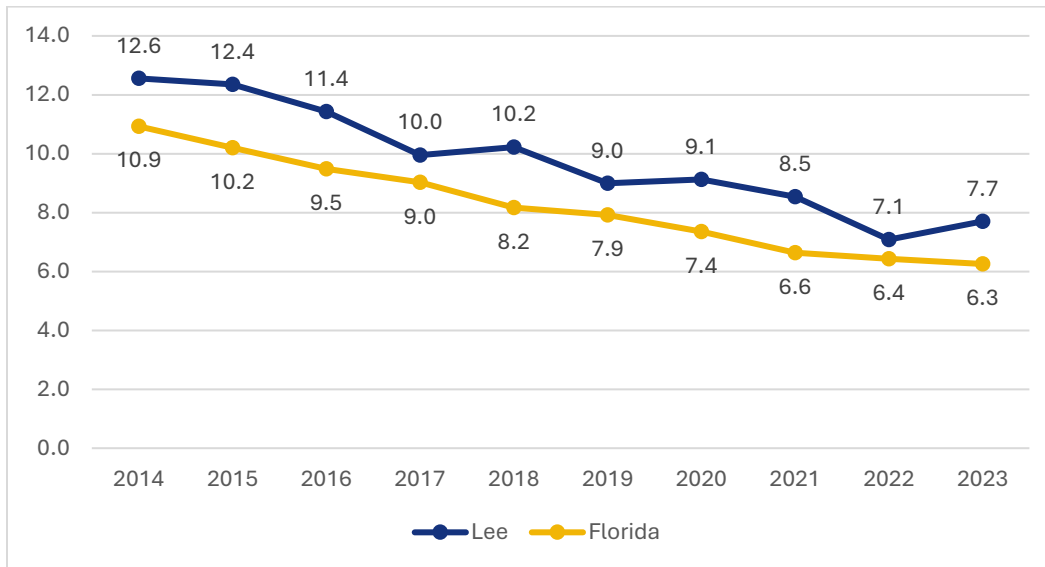


Source: Florida Department of Health, Bureau of Vital Statistics

2025 Lee County Community Health Assessment: Health Behaviors

The rate of births to mothers aged 15-19 significantly declined in Lee County and Florida between 2014 and 2023. Lee County has a higher birth rate for mothers aged 15-19 than the state average (7.7 Lee, 6.3 Florida, 2023).

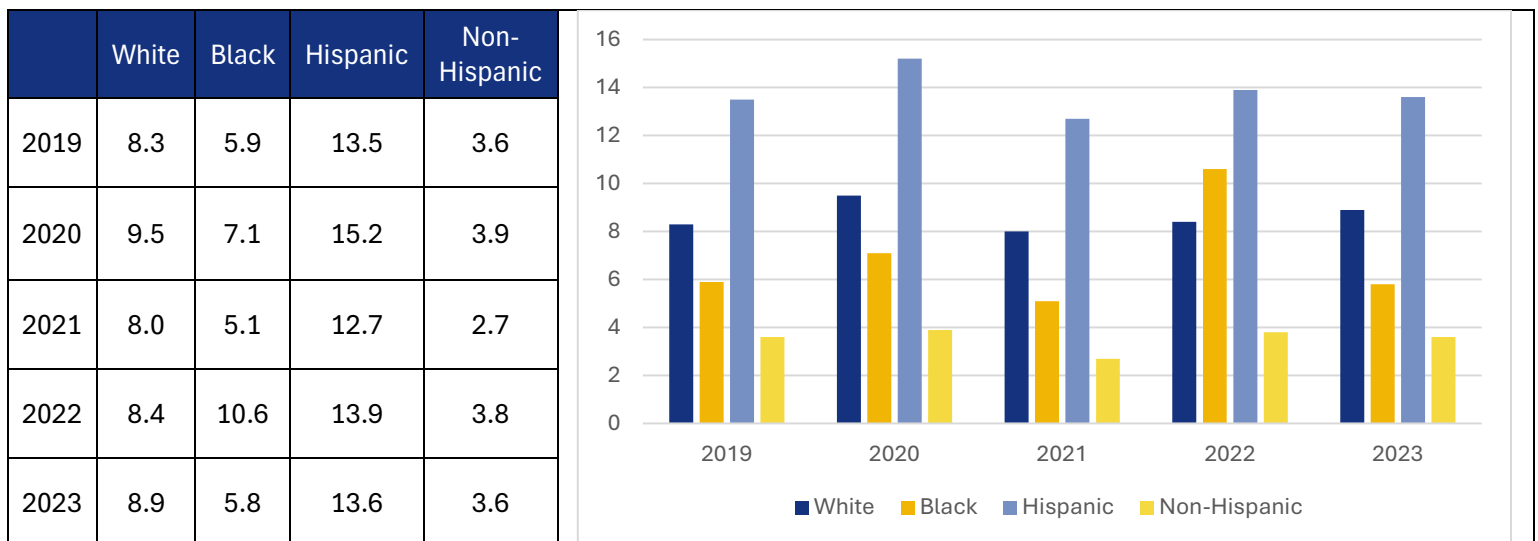
Exhibit HB26: Resident Live Births, Age 15-19, Rate per 1,000, Lee County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

In Lee County, between 2019 and 2023, the rate of births to mothers between the ages of 15 and 19 has been higher among the white population than the black population. The rate has been significantly higher among the Hispanic population than the non-Hispanic population for each of these years.

Exhibit HB27: Resident Live Births Mothers' Aged 15-19 by Race and Ethnicity, Rate per 1,000, Lee County, 2019-2023

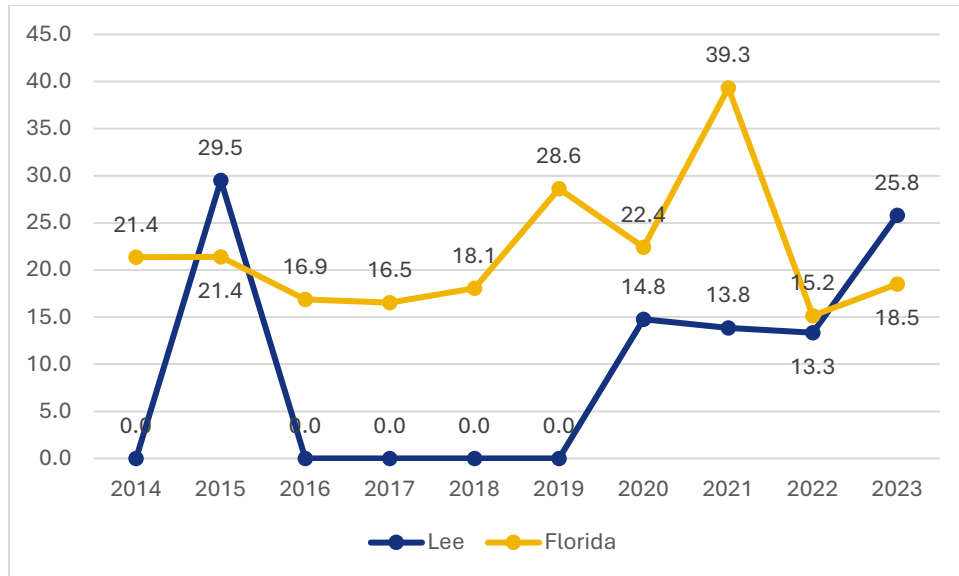


Source: Florida Department of Health, Bureau

2025 Lee County Community Health Assessment: Health Behaviors

Lee County has a higher rate of maternal deaths than the state average (25.8 Lee, 18.5 Florida, 2023). The rate in Lee County has increased since 2019.

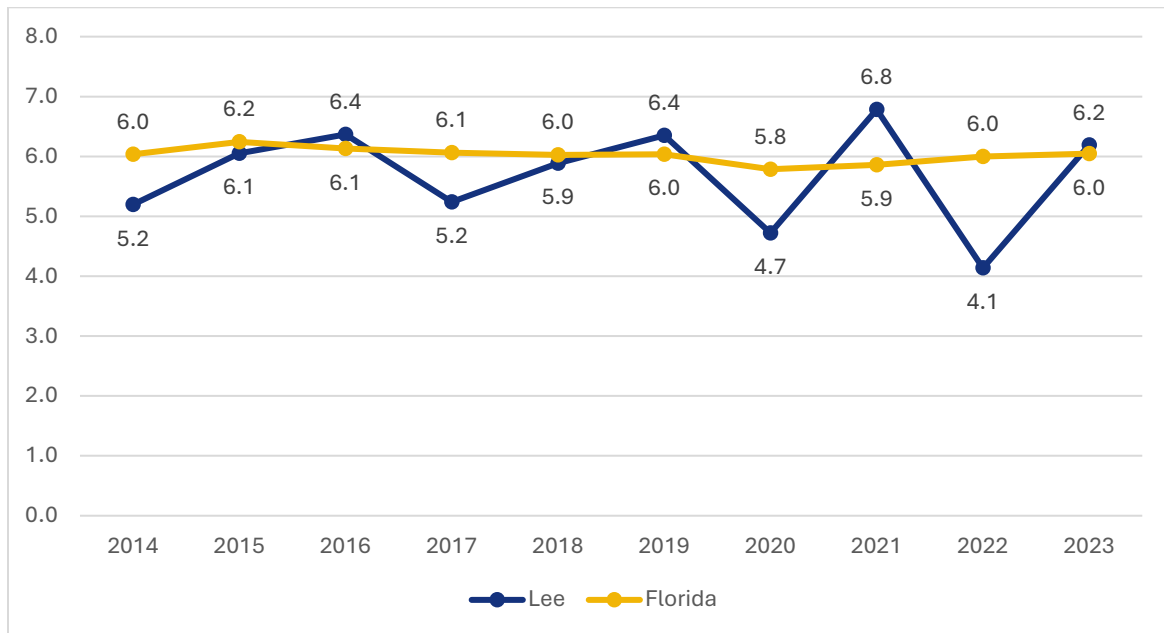
Exhibit HB28: Maternal Deaths, Rate per 100,000 Live Births, Lee County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

The infant mortality rate in Lee County is similar to the state average (6.2 Lee, 6.0 Florida, 2023).

Exhibit HB29: Infant Mortality (Aged 0-364 Days from Birth), Rate per 1,000 Live Births, Lee County and Florida, 2014-2023

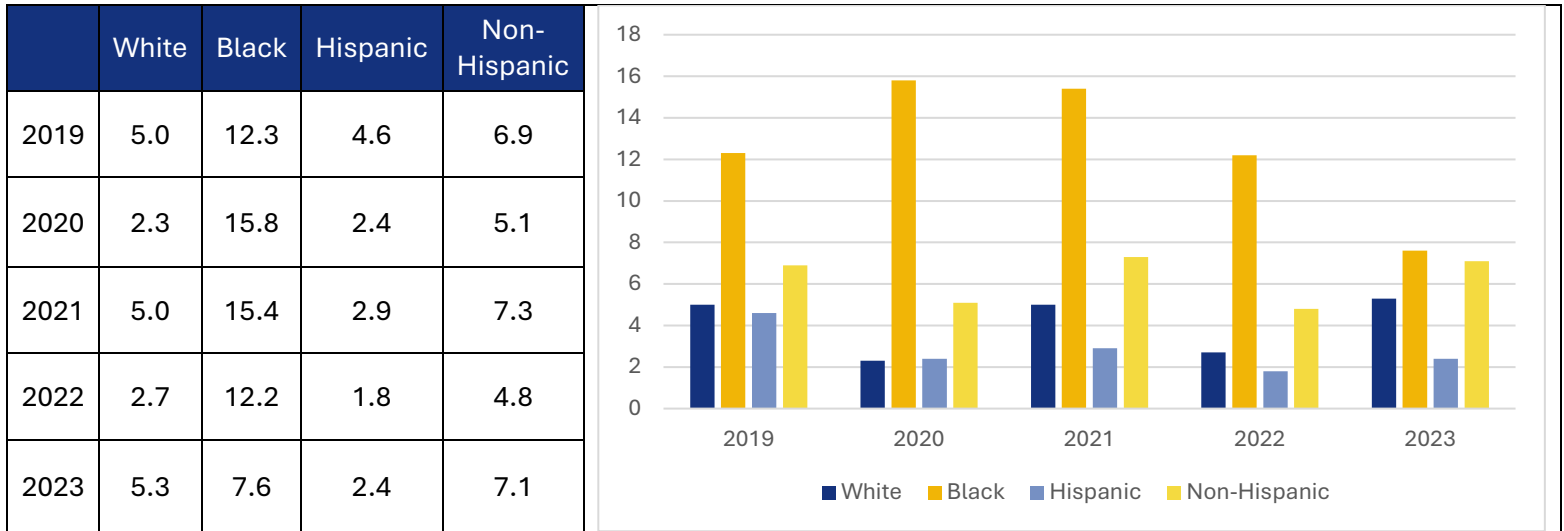


Source: Florida Department of Health, Bureau of Vital Statistics

2025 Lee County Community Health Assessment: Health Behaviors

For the years 2019-2023 in Lee County, the infant mortality rate is higher in the black population than in the white or Hispanic populations. However, the rate in the black population has been improving.

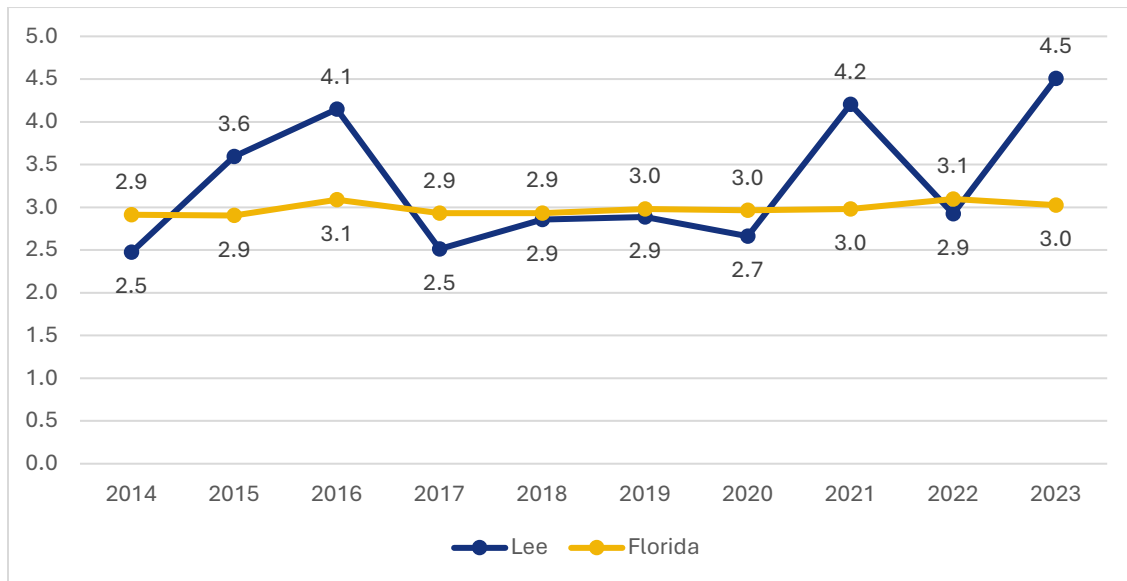
Exhibit HB30: Infant Mortality (0-364 Days from Birth) by Race and Ethnicity, Rate per 1,000 Live Births, Lee County, 2019-2023



Source: Florida Department of Health

The rate of death from Congenital Malformations and Chromosomal Abnormalities is not consistent in Lee County, but in 2023, it was higher than the state average (4.5 Lee, 3.0 Florida, 2023).

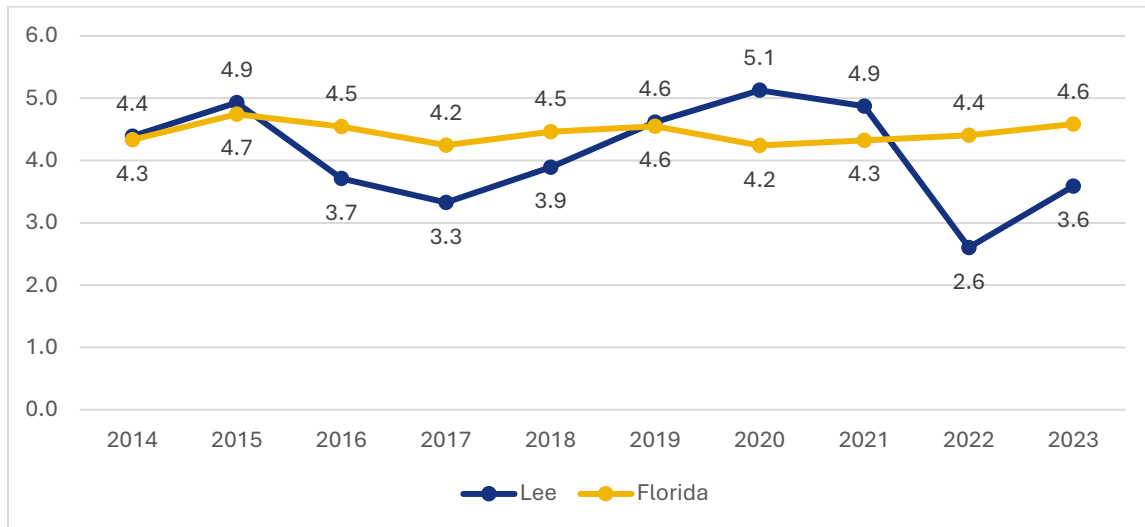
Exhibit HB31: Age-Adjusted Deaths from Congenital Malformations and Chromosomal Abnormalities, Rate 100,000 Population, Lee County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

In Lee County, the rate of death from Perinatal Period Conditions has been variable. In 2023, it was lower than the state average (3.6 Lee, 4.6 Florida, 2023).

Exhibit HB32: Age-Adjusted Deaths from Perinatal Period Conditions, Rate per 100,000 Population, Lee County and Florida, 2014-2023

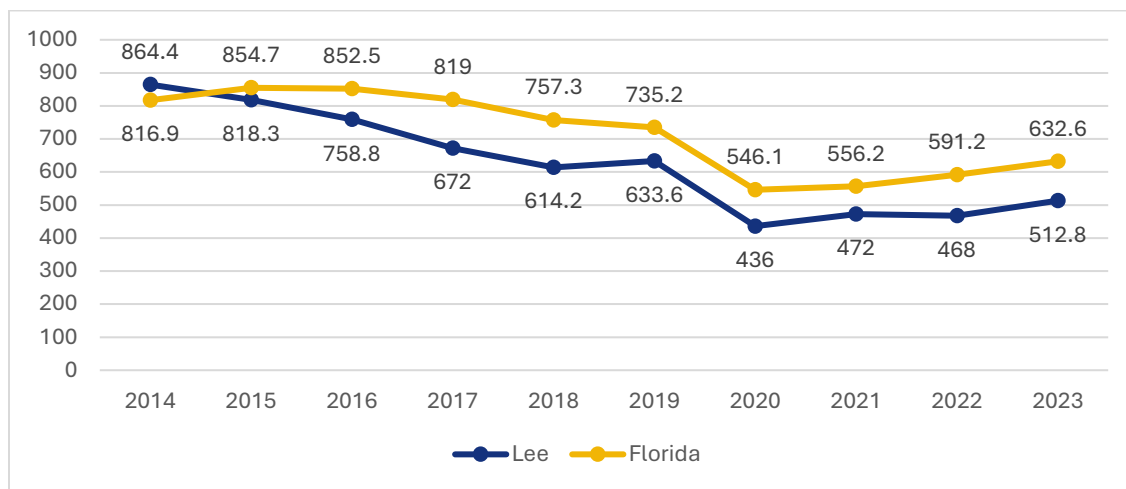


Source: Florida Department of Health, Bureau of Vital Statistics

Oral Health

Dental conditions include tooth malformations, gingivitis, and caries. From 2014 to 2023, there was a decrease in preventable emergency room visits from dental conditions in Lee County (864.4 2019, 512.8 2023). In the past decade, Lee County consistently had fewer people visit the emergency room for dental conditions than the Florida average.

Exhibit HB33: Ambulatory Case Sensitive Emergency Department Visits from Dental Conditions (Aged 0-64 Years), Rate per 100,000 Population Under 65, Lee County and Florida, 2014-2023



Source: Florida Agency for Health Care Administration (AHCA)

Health Conditions



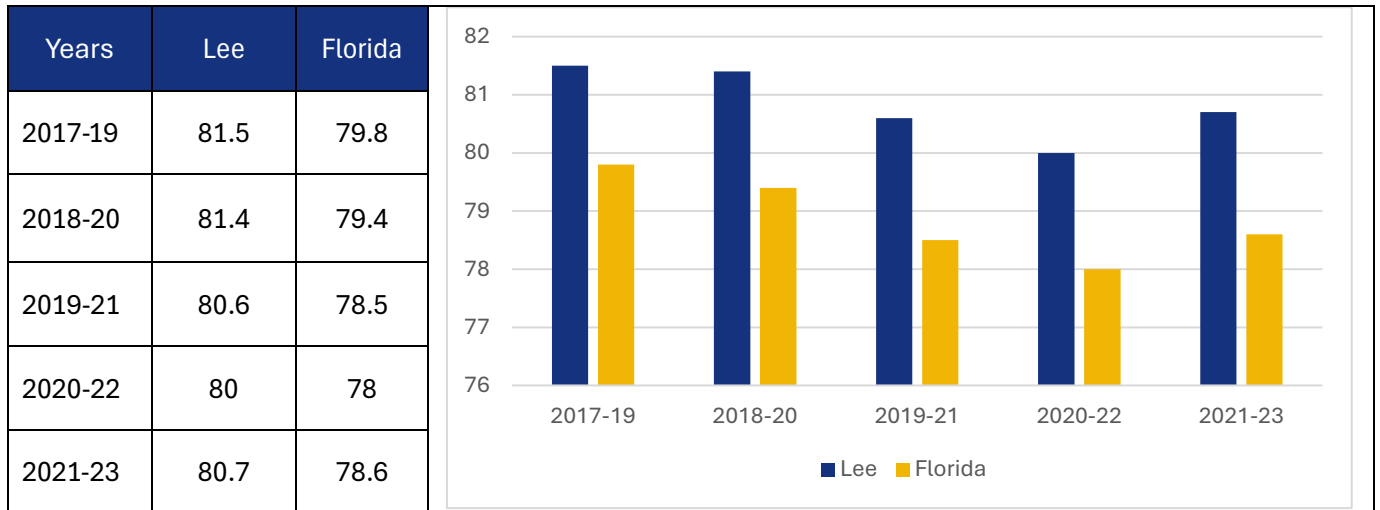
Source: Photo courtesy of NCH

This section of the Community Health Assessment (CHA) for Lee County examines the status of significant health conditions in our community. It includes an analysis of life expectancy, years of potential life lost, and the leading cause of death. The section further explores chronic and infectious diseases, as well as the health of older populations. Understanding the prevalence, trends, and impact of these health conditions is crucial for prioritizing public health efforts and developing effective interventions to improve the health and well-being of Lee County residents.

Life Expectancy

Between 2017 and 2023, Lee County consistently exceeded the Florida average for life expectancy (80.7 Lee, 78.6 Florida, 2023). However, the life expectancy for both Lee County and the State declined between 2017-19 and 2020-22 (81.5 2017-19, 80.0 2020-22, Lee). The expected age increased again for 2021-23 (80.7 Lee).

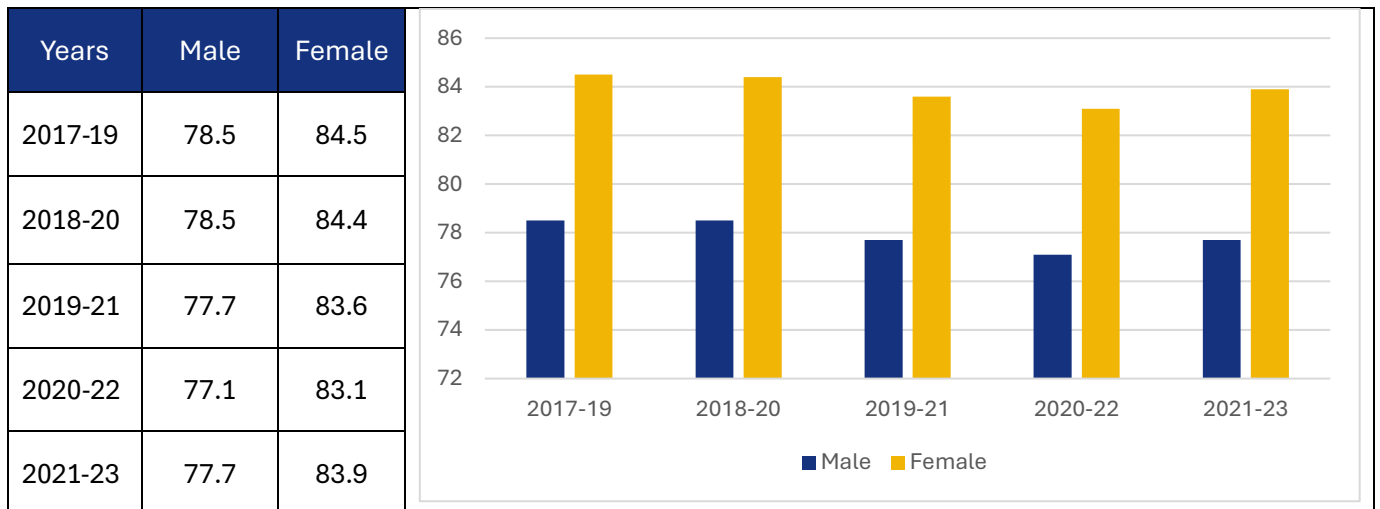
Exhibit HC1: Life Expectancy Over Time, Lee County and Florida, 3-Year Estimates, 2017-2023



Source: Death data are from the Florida Bureau of Vital Statistics. Population data are from the Florida Legislature Office of Economic and Demographic Research

Females in Lee County have consistently had a higher life expectancy compared to males. Between 2021 and 2023, there was a 6.2-year life expectancy difference between males and females.

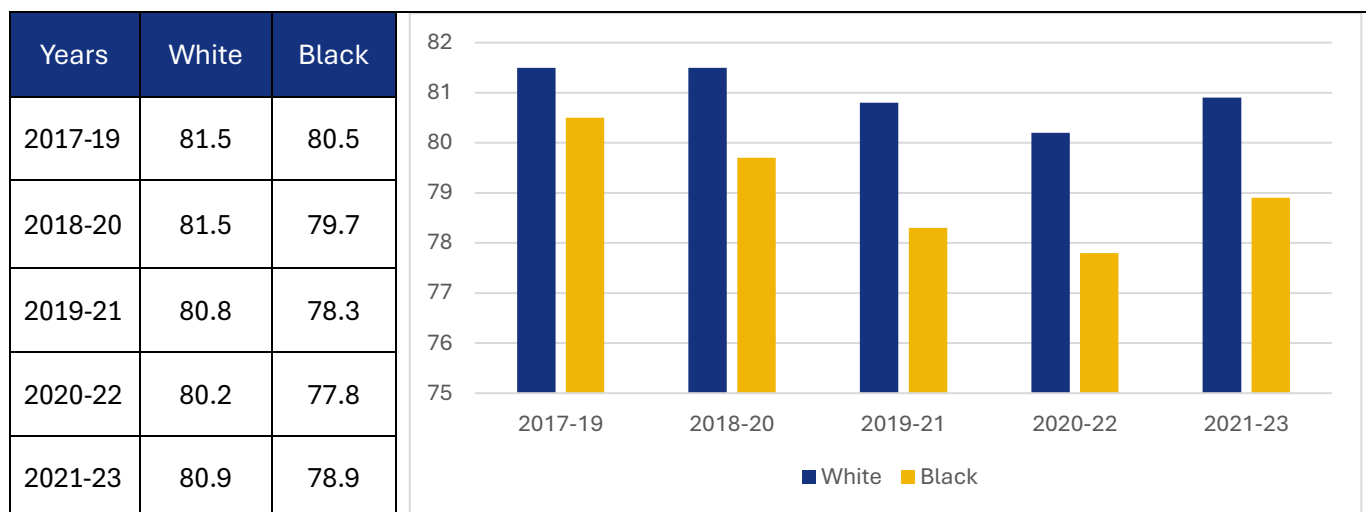
Exhibit HC2: Life Expectancy by Sex, Lee County, 3-Year Estimates, 2018-2023



Source: Death data are from the Florida Bureau of Vital Statistics. Population data are from the Florida Legislature Office of Economic and Demographic Research

Those who identify as black in Lee County had a lower life expectancy between 2017 and 2023 when compared to other races. In 2021-2023, the difference in life expectancy between the black and white populations was two years (78.9 black, 80.9 white).

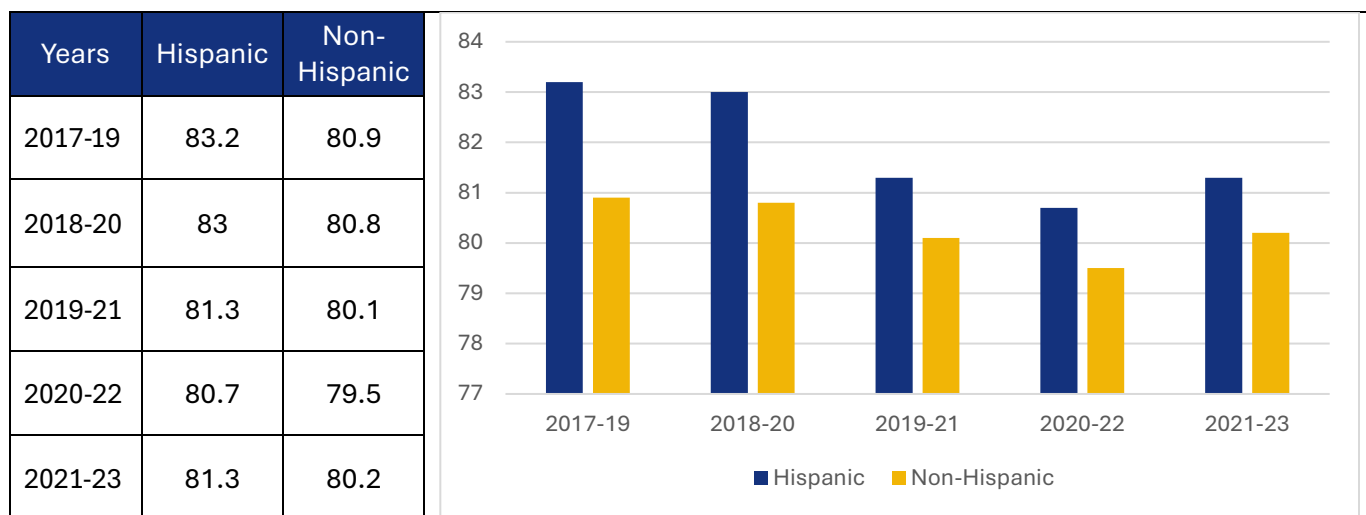
Exhibit HC3: Life Expectancy by Race, Lee County, 3-Year Estimates, 2017-2023



Source: Death data are from the Florida Bureau of Vital Statistics. Population data are from the Florida Legislature Office of Economic and Demographic Research

In Florida, race and ethnicity are tracked separately. Those who identify as Hispanic in Lee County consistently had a higher life expectancy between 2017 and 2023 compared to the non-Hispanic population. The difference in 2021-23 was 1.1 years (81.3 Hispanic, 80.2 non-Hispanic).

Exhibit HC4: Life Expectancy by Ethnicity, Lee County, 3-Year Estimates, 2017-2023



Source: Death data are from the Florida Bureau of Vital Statistics. Population data are from the Florida Legislature Office of Economic and Demographic Research

Leading Cause of Death

The following table gives detailed information on the leading causes of death for residents of Lee County. The deaths column represents a simple count of the number of people who died due to the

listed cause in 2023. The Percent of Total Deaths lets you know the percentage of people who died from that cause. Cancer and heart disease are the two most common causes of death in Lee County. Combined, they are responsible for 43.3 percent of all deaths.

Crude Rate per 100,000 gives a sense of how likely a person is to die of that cause in any given year. For example, out of every 100,000 people in Lee County, 469 of them died of a stroke in 2023. Using the rate per 100,000 allows comparison between areas with different populations, such as comparing a small county to a large county or a county to the state.

The next column lists the age-adjusted death rate per 100,000. Age-adjusting a rate is a method for making fairer comparisons between groups with different age distributions. For example, a county having a higher percentage of elderly people may have a higher rate of death or hospitalization than a county with a younger population, merely because the elderly are more likely to die or be hospitalized. The same distortion can occur when comparing races, genders, or time periods. Age adjustment can make the different groups more comparable.

The last column is Years of Potential Life Lost. This is an estimate of the number of years a person would have lived had they not died prematurely. In this case, the number is given for all people who died under the age of 75, provided they had lived to the age of 75. When the numbers are particularly low, such as they are for Alzheimer's disease, it is generally because that cause of death primarily impacts the elderly. Conversely, an exceptionally high number, such as for unintentional injuries, suggests that the average age of the victims was young.

Cancer, heart disease, and unintentional injury are the top three leading causes of death in 2023 for Lee County. Since 2007, cancer and heart disease were the top two causes of death in Lee County. Unintentional injury, which includes accidental drug overdoses, and cancer had the highest years of potential life lost in Lee County, which means these two causes of death have many young dying from these causes in 2023. Unintentional injuries and suicides are discussed in further detail in the health behaviors section.

Exhibit HC5: Leading Causes of Death, Lee County, 2023

Cause of Death	Deaths	Percent of Total Deaths	Crude Rate per 100,000	Age-Adjusted Death Rate per 100,000	YPLL <75 per 100,000 Under 75
Cancer	1,908	22.4	231.7	117.4	1,408.4
Heart Disease	1,780	20.9	216.1	105.2	936.9
Unintentional Injury	645	7.6	78.3	66.7	1,787.3
Stroke	469	5.5	57.0	26.3	170.7
Chronic Lower Respiratory Disease	384	4.5	46.6	21.3	151.5
Alzheimer's Disease	254	3.0	30.8	13.2	12.9
Diabetes	216	2.5	26.2	14.7	201.4
Chronic Liver Disease and Cirrhosis	161	1.9	19.6	13.9	300.9
COVID-19	155	1.8	18.8	9.4	77.7
Parkinson's Disease	151	1.8	18.3	7.9	11.0
Hypertension	128	1.5	15.5	7.7	72.1

Cause of Death	Deaths	Percent of Total Deaths	Crude Rate per 100,000	Age-Adjusted Death Rate per 100,000	YPLL <75 per 100,000 Under 75
Suicide	124	1.5	15.1	13.2	361.7
Nephritis, Nephrotic Syndrome, and Nephrosis	107	1.3	13.0	6.7	79.8
Influenza and Pneumonia	71	0.8	8.6	4.6	54.5
Septicemia	52	0.6	6.3	3.7	65.4
Benign Neoplasm	46	0.5	5.6	2.7	22.5
Pneumonitis	45	0.5	5.5	2.7	20.7
Atherosclerosis	44	0.5	5.3	2.3	8.9
Congenital Malformations	33	0.4	4.0	4.5	205.4
Nutritional Deficiencies	31	0.4	3.8	1.9	21.5
Homicide	28	0.3	3.4	3.7	132.7
Aortic Aneurysm and Dissection	27	0.3	3.3	1.8	23.3
Perinatal Period Conditions	20	0.2	2.4	3.6	210.8
HIV/AIDS	20	0.2	2.4	2.2	50.8
Anemias	15	0.2	1.8	1.1	16.3
Cholelithiasis and Other Gallbladder Disorders	11	0.1	1.3	0.6	0.6
Medical And Surgical Care Complications	10	0.1	1.2	0.8	9.8
Peptic Ulcer	7	0.1	0.9	0.4	2.5
Hernia	4	0.1	0.5	0.3	5.8
Pregnancy, Childbirth, and The Puerperium	2	0.0	0.2	0.3	10.5
Viral Hepatitis	1	0.0	0.1	0.1	2.3

Source: Florida Department of Health, Bureau of Vital Statistics

Years of Potential Life Lost

The top three causes of death that had the highest YPLL among people in Lee County are unintentional injury, cancer, and heart disease. These top three were consistent for the selected years in the table below.

Exhibit HC6: Population Top Ten Cause of Death Per Years of Potential Life Lost Under 75 Years of Age per 100,000, Lee County, 2013, 2018, 2023

Cause of Death	2013	2018	2023
Unintentional Injury	923.0	2,046.4	1,787.3
Cancer	1,781.6	1,661.5	1,408.4
Heart Disease	1121.1	1018.0	936.9
Suicide	378.3	481.6	361.7
Chronic Liver Disease and Cirrhosis	250.0	287.8	300.9
Perinatal Period Conditions	233.3	224.2	210.8
Congenital Malformations	112.8	119.1	205.4
Diabetes	223.1	245.2	201.4
Stroke	164.3	209.8	170.7
Chronic Lower Respiratory Disease	294.2	206.9	151.5

Source: Florida Department of Health, Bureau of Vital Statistics

The top three causes of death that had the highest YPLL among non-Hispanic white people in Lee County are unintentional injury, cancer, and heart disease. These top three were consistent for the selected years in the table below.

Exhibit HC7: Years of Potential Life Lost Under 75 Years of Age per 100,000 Population, Top Ten Cause of Death, Non-Hispanic White, Lee County, 2013, 2018, 2023

Cause of Death	2013	2018	2023
Unintentional Injury	921.7	1,808.2	1,808.2
Cancer	2,182.1	1,731.0	1,731.0
Heart Disease	1377.5	1045.7	1,045.7
Suicide	454.3	464.2	464.2
Chronic Liver Disease and Cirrhosis	333.7	381.8	381.8
Chronic Lower Respiratory Disease	388.2	218.0	218.0
Diabetes	230.5	198.9	198.9
Perinatal Period Conditions	57.7	175.4	175.4
Stroke	166.6	170.8	170.8
Congenital Malformations	90.9	136.3	136.3

Source: Florida Department of Health, Bureau of Vital Statistics

The top three causes of death with the highest YPLL among Non-Hispanic Black people in Lee County were inconsistent in the selected years in the table below. In 2013, homicide, perinatal period conditions, and heart disease were the top three causes of death with the highest YPLL. In 2023, those had changed to heart disease, unintentional injuries, and cancer. The homicide rate among Non-Hispanic Black people in Lee County decreased significantly from 2013 to 2023 (1512.2 2013, 769.0 2023).

Exhibit HC8: Years of Potential Life Lost Under 75 Years of Age per 100,000 Population, Top Ten Cause of Death, Non-Hispanic Black, Lee County, 2013, 2018, 2023

Cause of Death	2013	2018	2023
Heart Disease	1026.2	181.9	1,965.2
Unintentional Injury	817.8	1,871.6	1,785.2
Cancer	1449.0	1250.2	1,046.4
Homicide	1512.2	1332.8	769.0
Congenital Malformations	147.9	44.9	514.5
Diabetes	307.7	549.6	453.4
HIV/AIDS	269.9	443.7	269.5
Suicide	349.3	305.4	266.4
Perinatal Period Conditions	1330.9	668.2	236.2
Chronic Liver Disease and Cirrhosis	105.2	44.9	201.4

Source: Florida Department of Health, Bureau of Vital Statistics

The top three causes of death that had the highest YPLL among Hispanic people in Lee County are unintentional injury, cancer, and heart disease. These top three were consistent for the selected years in the table below.

Exhibit HC9: Years of Potential Life Lost Under 75 Years of Age per 100,000 Population, Top Ten Cause of Death, Hispanic, Lee County, 2013, 2018, 2023

Cause of Death	2013	2018	2023
Unintentional Injury	977.3	1,592.5	1,729.1
Cancer	795.2	953.0	855.3
Heart Disease	421.5	406.5	369.8
Congenital Malformations	186.2	76.8	231.9
Perinatal Period Conditions	375	251.9	231.9
Suicide	199.6	356.4	190.9
Chronic Liver Disease and Cirrhosis	31.0	136.0	187.3
Diabetes	166.1	106.9	136.4
Septicemia	0.0	0.0	125.5
Homicide	182.9	141.0	111.5

Source: Florida Department of Health, Bureau of Vital Statistics

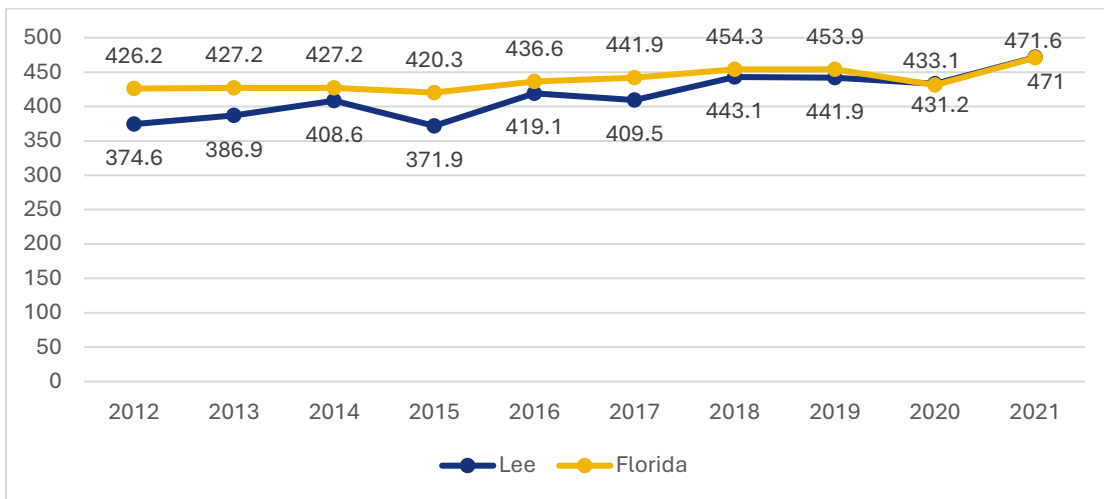


Source: Photo courtesy of NCH

Cancer

From 2012 to 2021, Lee County experienced an increase in new cases of cancer. Lee County experienced its highest rate of new cases in 2021 (471.6 per 100,000). When compared to the Florida average, Lee County has a very similar rate of cancer incidence (471.6 Lee, 471.0 Florida, 2023).

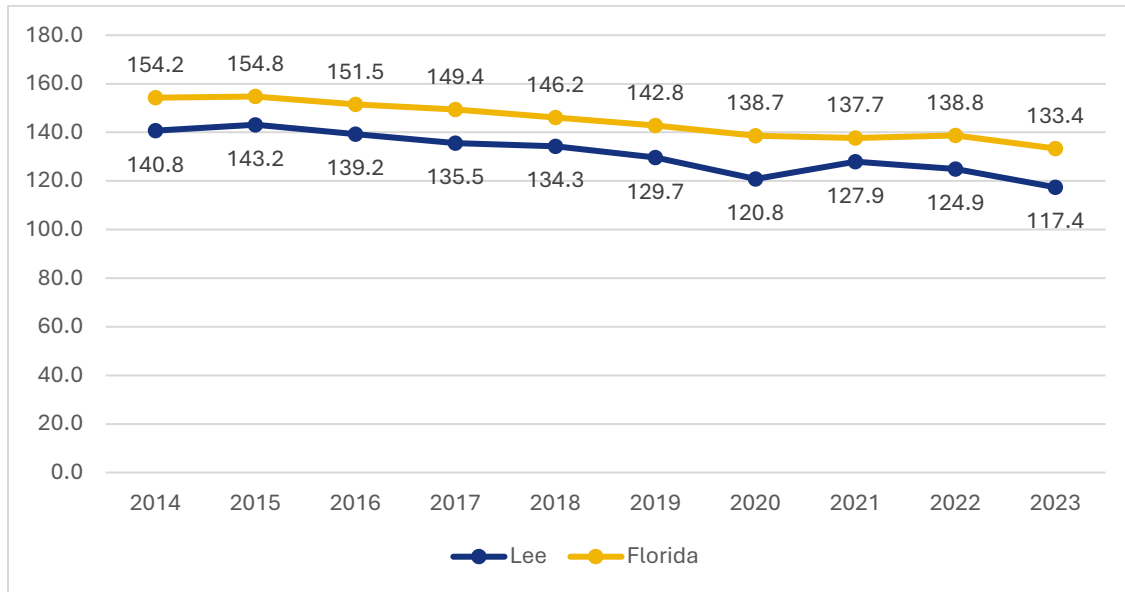
Exhibit HC10: Age-Adjusted Cancer Incidence, Rate per 100,000 Population, Lee County and Florida, 2012-2021



Source: University of Miami (FL) Medical School, Florida Cancer Data System

Since 2014, in Lee County, the overall cancer death rate has decreased. Even though more people have been diagnosed with cancer, fewer people are dying from cancer. Lee County's cancer death rate is lower than the Florida average (117.4 Lee, 133.4 Florida, 2023).

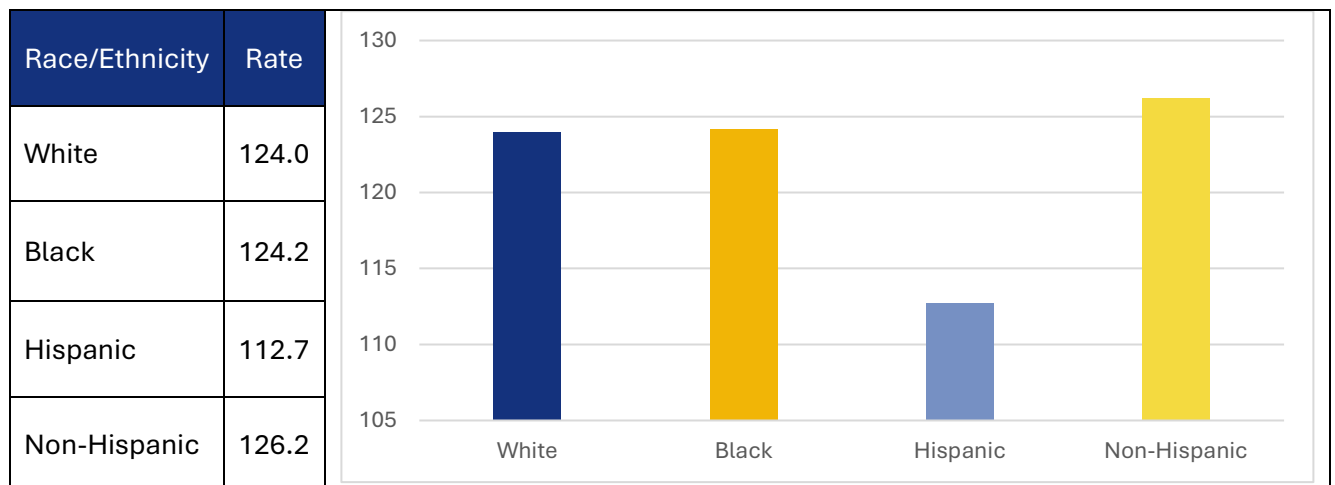
Exhibit HC11: Age-Adjusted Deaths from Cancer, Rate per 100,000 Population, Lee County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

The age-adjusted death rate from cancer is the lowest among the Hispanic population in Lee County. The non-Hispanic population had the highest cancer death rate when compared to other races and ethnicities.

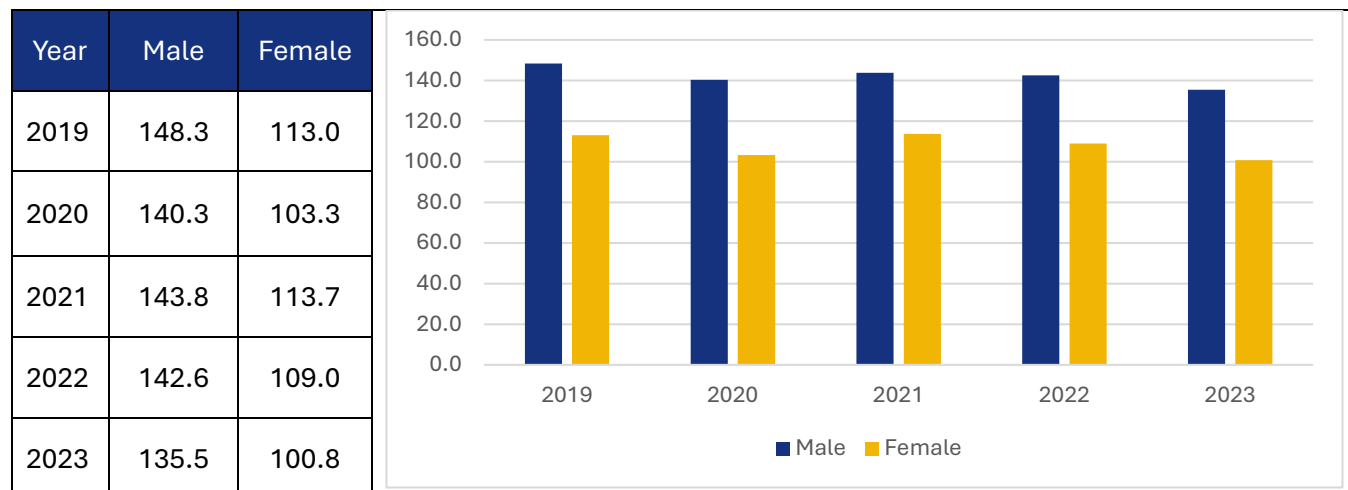
Exhibit HC12: Cancer Deaths by Race and Ethnicity, 3-Year Age-Adjusted Rate per 100,000 Population, Lee County 2021-2023



Source: Florida Department of Health, Bureau of Vital Statistics

Males in Lee County consistently had a higher cancer death rate when compared to females. Since 2019, the overall rate of cancer deaths among both females and males has decreased.

Exhibit HC13: Cancer Deaths by Sex, Age-Adjusted Rate per 100,000 Population, Lee County, 2019-2023



Source: Florida Department of Health, Bureau of Vital Statistics

The most common types of cancer in Lee County were female breast and prostate cancer. However, lung cancer was the deadliest among those diagnosed with cancer.

Exhibit HC14: Common Types of Cancer, 3-Year Incidence Rate and Age-Adjusted Death Rate, Lee County, 2020-2022, 2021-2023

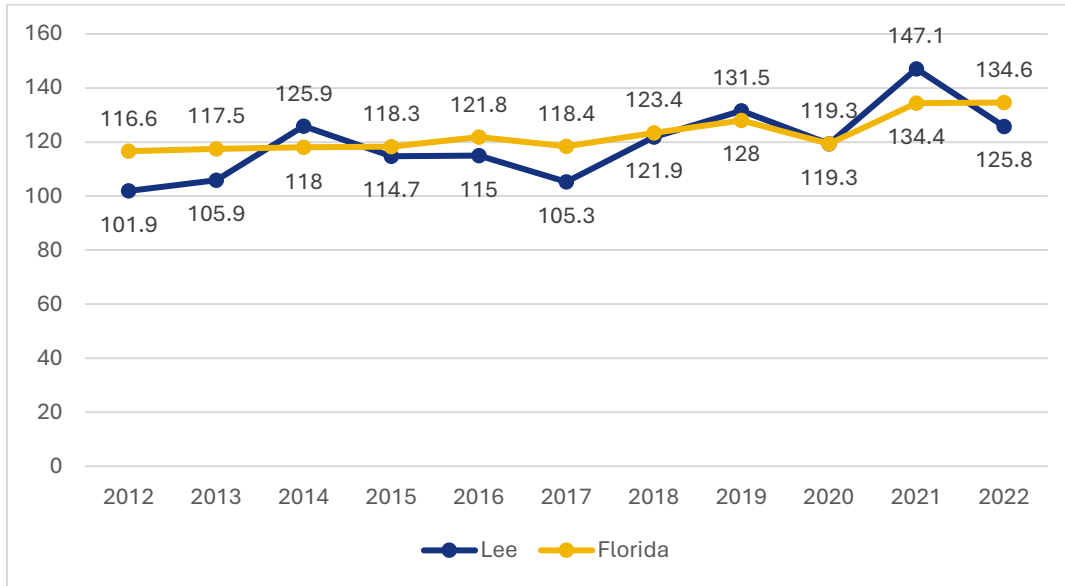
	Incidence Rate, 2020-2022	Age-Adjusted Death Rate, 2021-2023
Female Breast Cancer	130.6	16.8
Prostate Cancer	78.0	11.3
Lung Cancer	51.0	27.3
Melanoma, Skin Cancer	37.7	2.0
Colorectal Cancer	32.2	9.7
Oral Cancer	14.5	3.1
Cervical Cancer	8.9	2.4

Source: University of Miami (FL) Medical School, Florida Cancer Data System; Florida Department of Health, Bureau of Vital Statistics

Breast Cancer

In 2021, Lee County saw its highest breast cancer rate of new breast cancer diagnoses, 147.1 per 100,000. Lee County's rate of breast cancer incidence is higher than the state average (147.1 Lee, 134.4 Florida, 2021). The rate of new breast cancer diagnoses decreased and is lower than the state average in 2022.

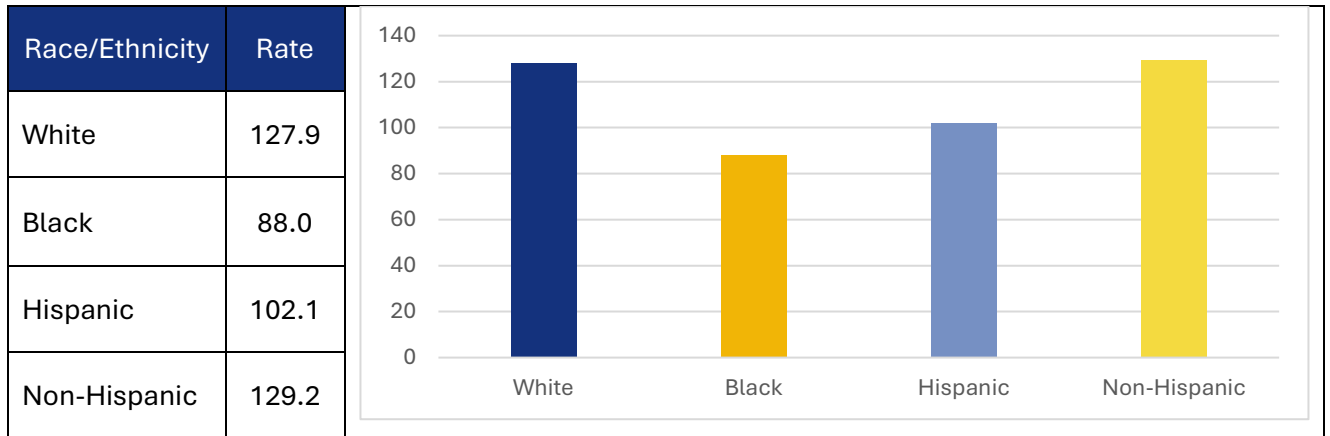
Exhibit HC15: Age-Adjusted Female Breast Cancer Incidence, Rate per 100,000 Female Population, Lee County and Florida, 2012-2022



Source: University of Miami (FL) Medical School, Florida Cancer Data System

The non-Hispanic population in Lee County had the highest incidence, while the black population had the lowest incidence of being diagnosed with breast cancer in 2022.

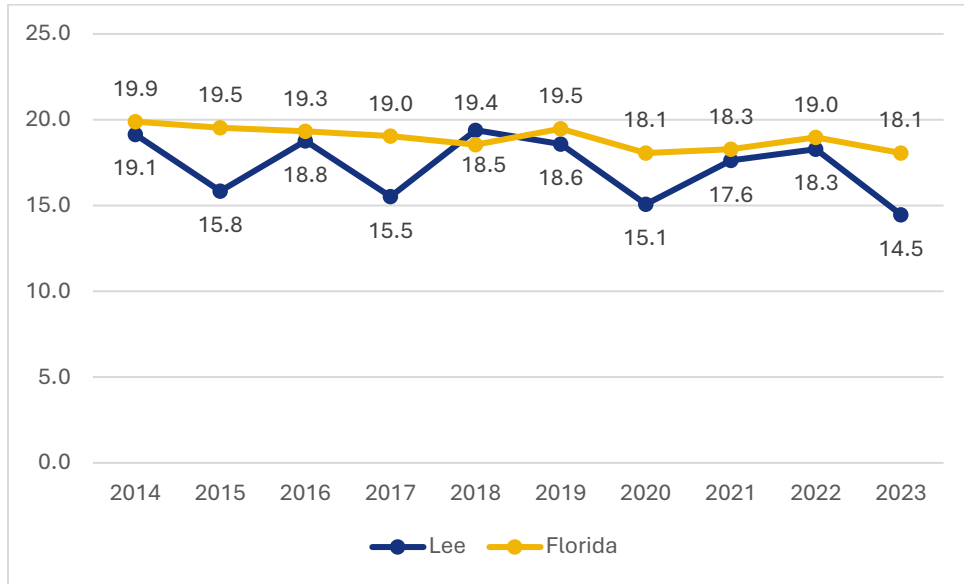
Exhibit HC16: Age-Adjusted Female Breast Cancer Incidence by Race and Ethnicity, Rate per 100,000 Female Population, Lee County, 2022



Source: University of Miami (FL) Medical School, Florida Cancer Data System

In 2023, there was a decline in the death rate from breast cancer in Lee County; the death rate was 14.5 per 100,000. Lee County's breast cancer death rate was lower than the Florida average (14.5 Lee, 18.1 Florida, 2023).

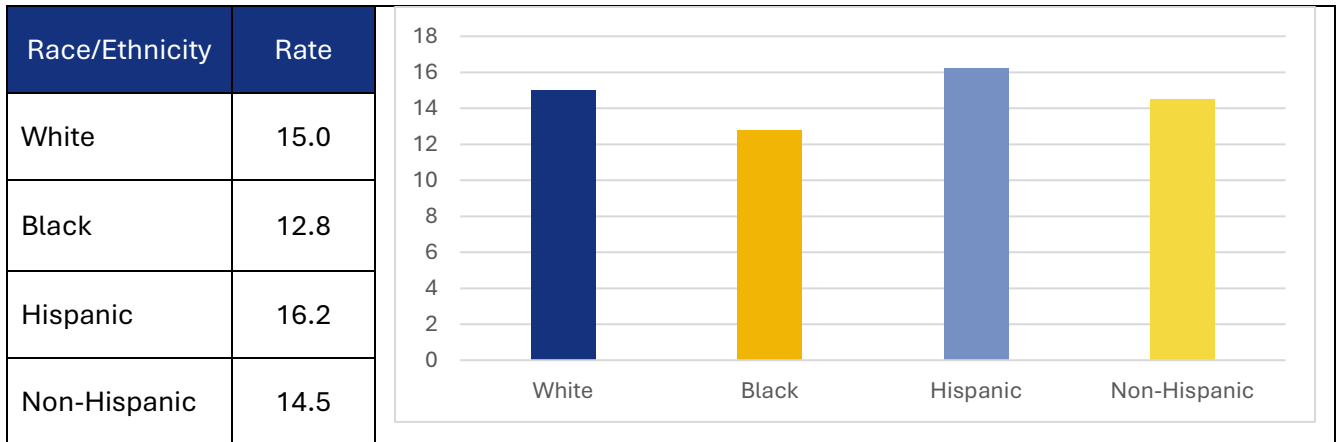
Exhibit HC17: Age-Adjusted Deaths from Female Breast Cancer, Rate per 100,000 Female Population, Lee County, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

In Lee County in 2023, the Hispanic population had the highest death rate from female breast cancer, while the Black population had the lowest rate.

Exhibit HC18: Age-Adjusted Deaths from Female Breast Cancer by Race and Ethnicity, Rate per 100,000 Female Population, Lee County, 2023

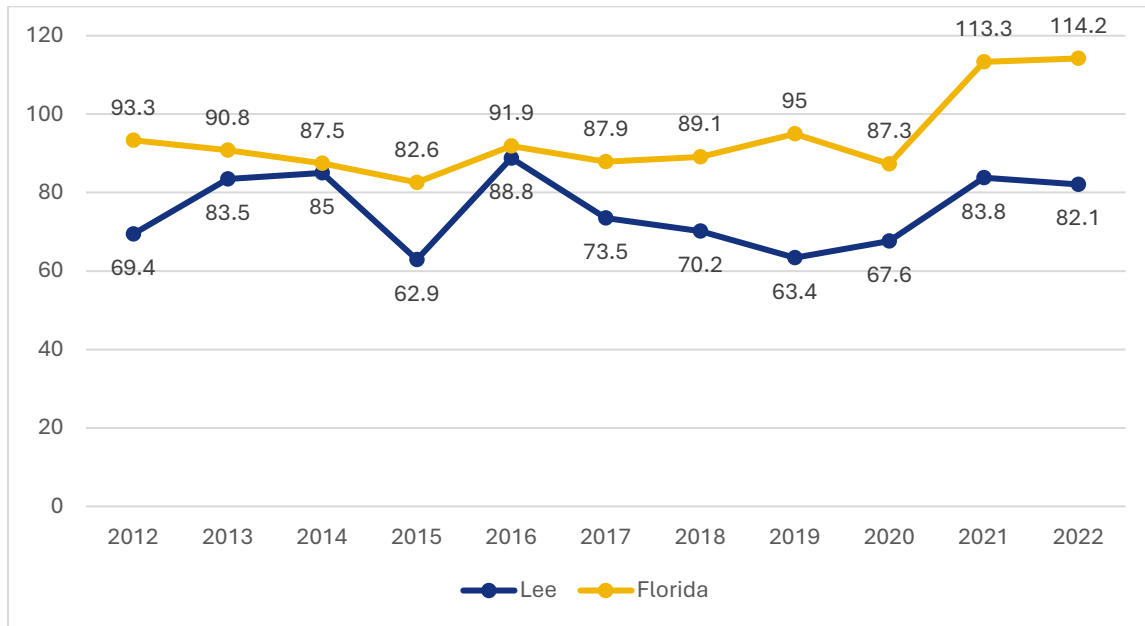


Source: Florida Department of Health, Bureau of Vital Statistics

Prostate Cancer

Prostate cancer is the second most common type of cancer in Lee County. In 2016, Lee County saw its highest rate of new prostate cancer diagnoses, 88.8 per 100,000. That rate has fluctuated since then. In 2022, the rate was 82.1 per 100,000 compared with a state average of 114.2 per 100,000.

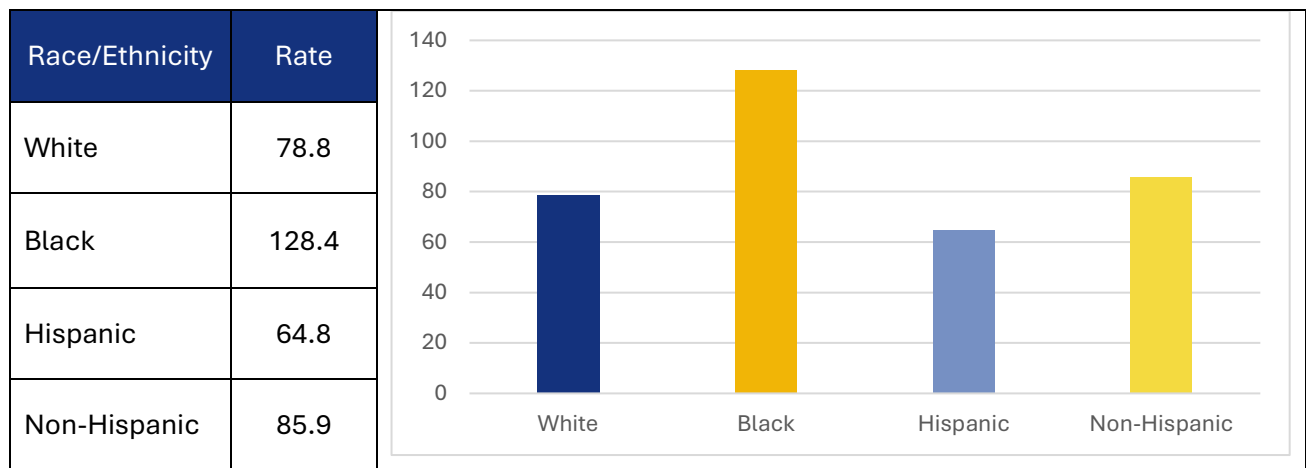
Exhibit HC19: Age-Adjusted Prostate Cancer Incidence, Rate per 100,000 Male Population, Lee County and Florida, 2012-2022



Source: University of Miami (FL) Medical School, Florida Cancer Data System

The black population had the highest rate of new prostate cancer diagnoses, and Hispanics had the lowest rate in Lee County.

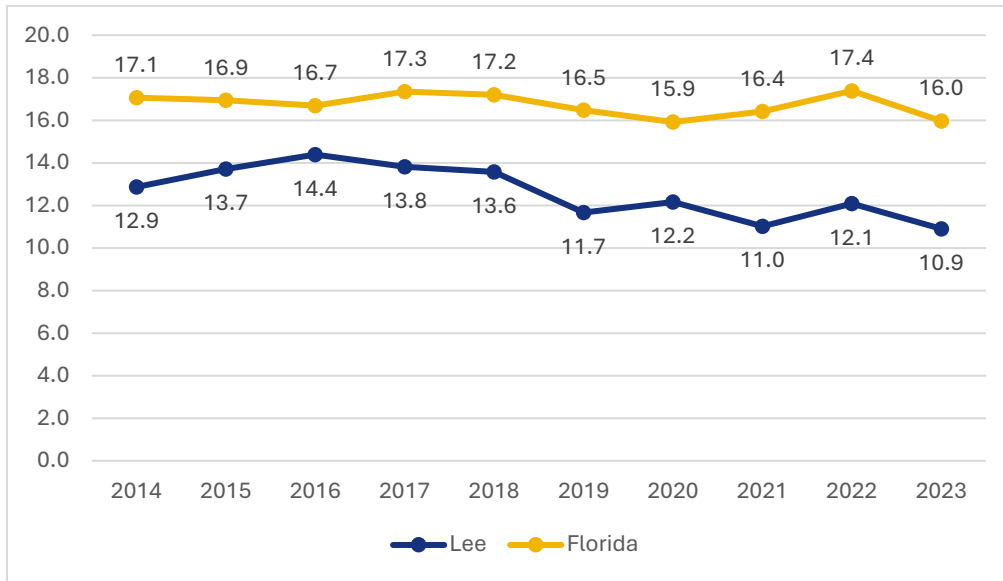
Exhibit HC20: Age-Adjusted Prostate Cancer Incidence by Race and Ethnicity, Rate per 100,000 Male Population, Lee County, 2022



Source: University of Miami (FL) Medical School, Florida Cancer Data System

2016 was the deadliest year for those with prostate cancer in Lee County. From 2016- 2023 the rate declined to 10.9 per 100,000 males. When compared to the Florida average, Lee County's prostate cancer death rate was significantly lower (10.9 Lee, 16.0 Florida, 2023).

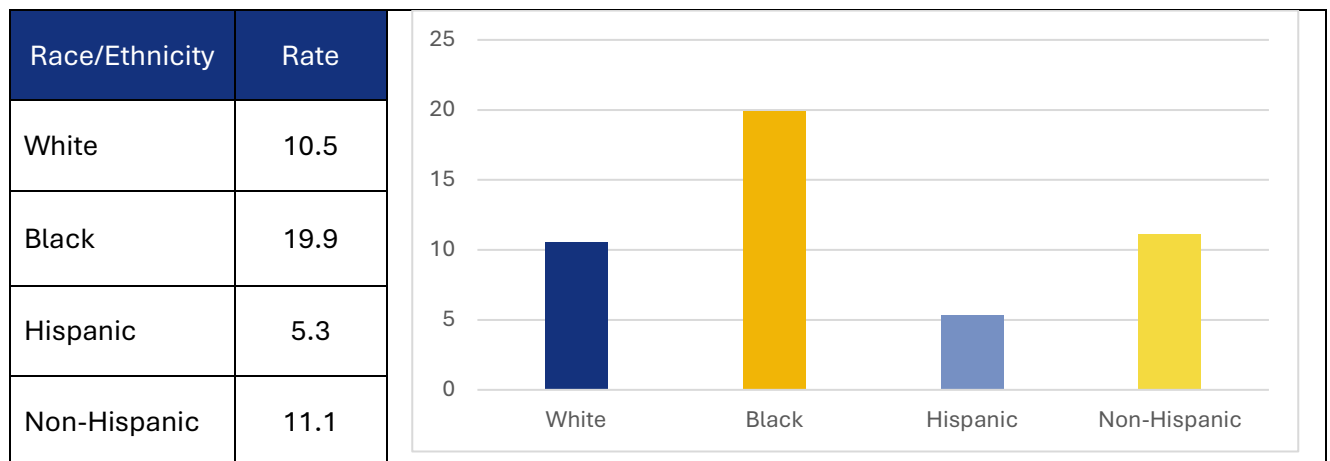
Exhibit HC21: Age-Adjusted Prostate Cancer Death, Rate per 100,000 Male Population, Lee County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

In 2023, the Black population had the highest rate of death from prostate cancer. The Hispanic population had the lowest death rate from prostate cancer.

Exhibit HC22: Age-Adjusted Prostate Cancer Death by Race and Ethnicity, Rate per 100,000 Male Population, Lee County, 2023

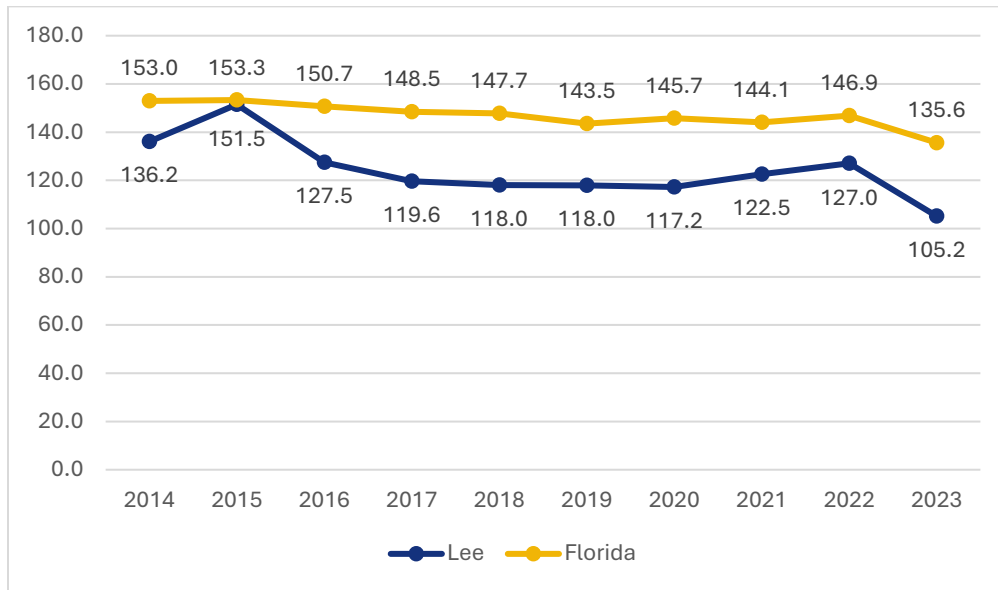


Source: Florida Department of Health, Bureau of Vital Statistics

Heart Disease

Over the past 10 years the overall death rate from heart disease in Lee County has decreased. Lee County's heart disease death rate is less than the Florida average from (105.2 Lee, 135.6 Florida, 2023).

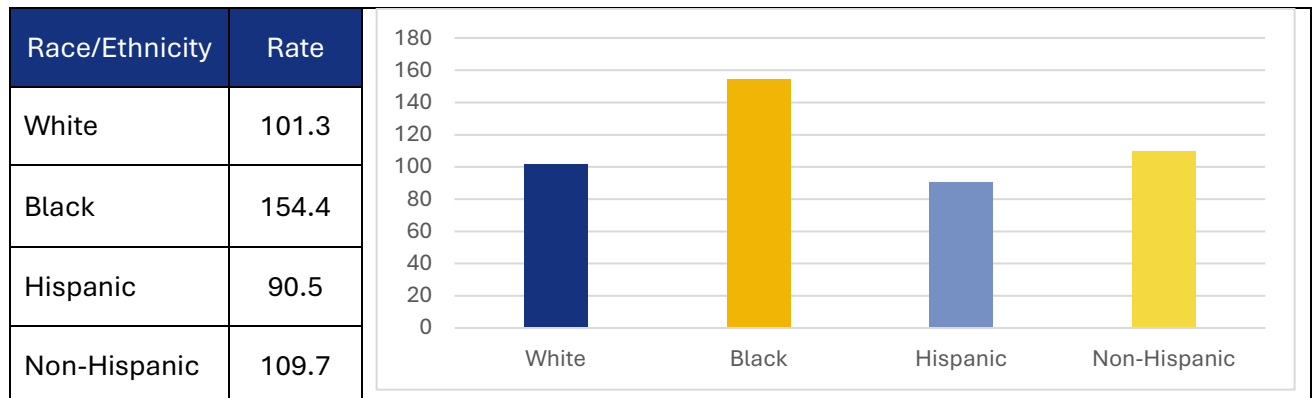
Exhibit HC23: Age-Adjusted Deaths from Heart Diseases, Rate per 100,000 Population, Lee County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Vital Statistics

In 2023, the Black population in Lee County had the highest rate of death from heart disease. The Hispanic population had the lowest death rate from heart disease.

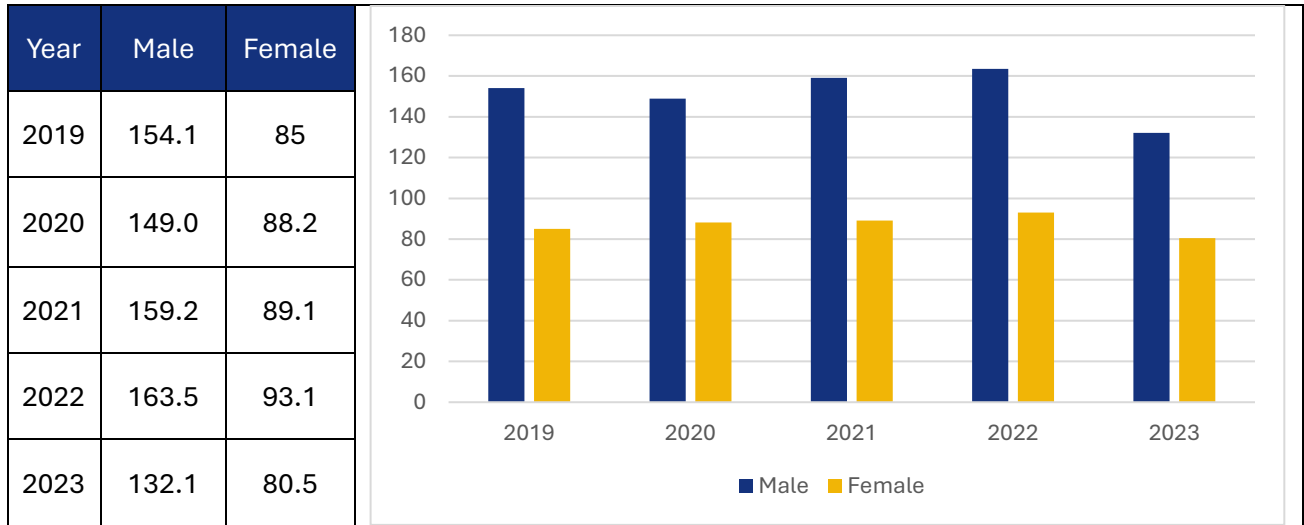
Exhibit HC24: Age-Adjusted Death from Heart Diseases by Race and Ethnicity, Rate per 100,000 Population, Lee County, 2023



Source: Florida Department of Health, Bureau of Vital Statistics

Males die at a higher rate from heart disease compared to females. Both males and females in Lee County saw a decline in deaths from heart disease between 2019 and 2023.

Exhibit HC25: Age-Adjusted Death from Heart Diseases by Sex, Rate per 100,000 Population, Lee County, 2023

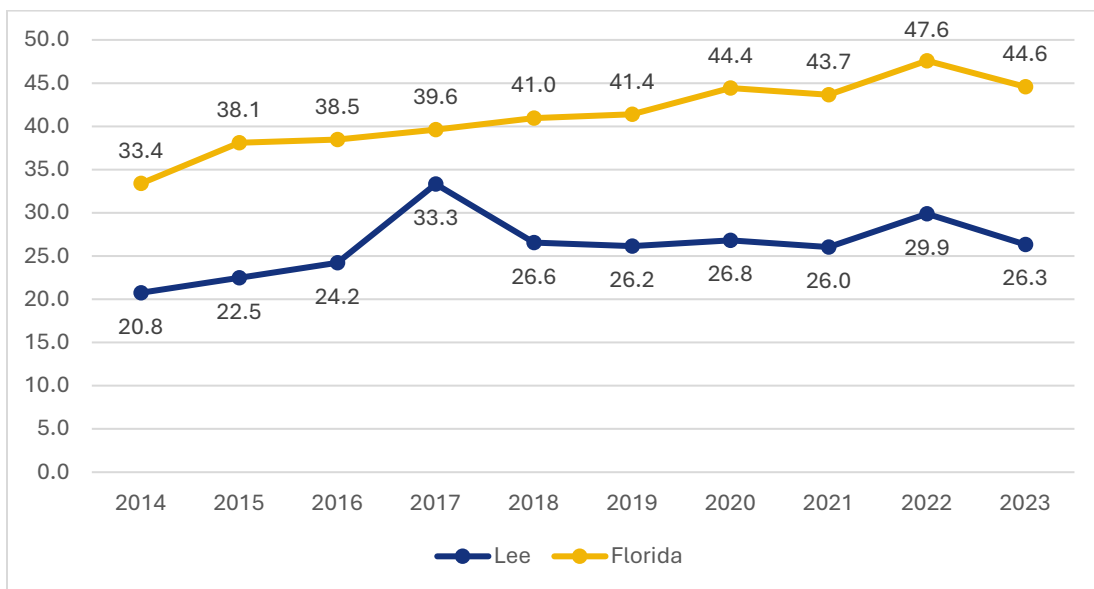


Source: Florida Department of Health, Bureau of Vital Statistics

Stroke

Lee County has seen a slight increase in the death rate from strokes between 2014 and 2023; however, there was a decrease from 2022 to 2023. Lee County has a lower death rate from stroke than the state average (26.3 Lee, 44.6 Florida, 2023).

Exhibit HC26: Age-Adjusted Deaths from Stroke, Rate per 100,000 Population, Lee County and Florida, 2014-2023

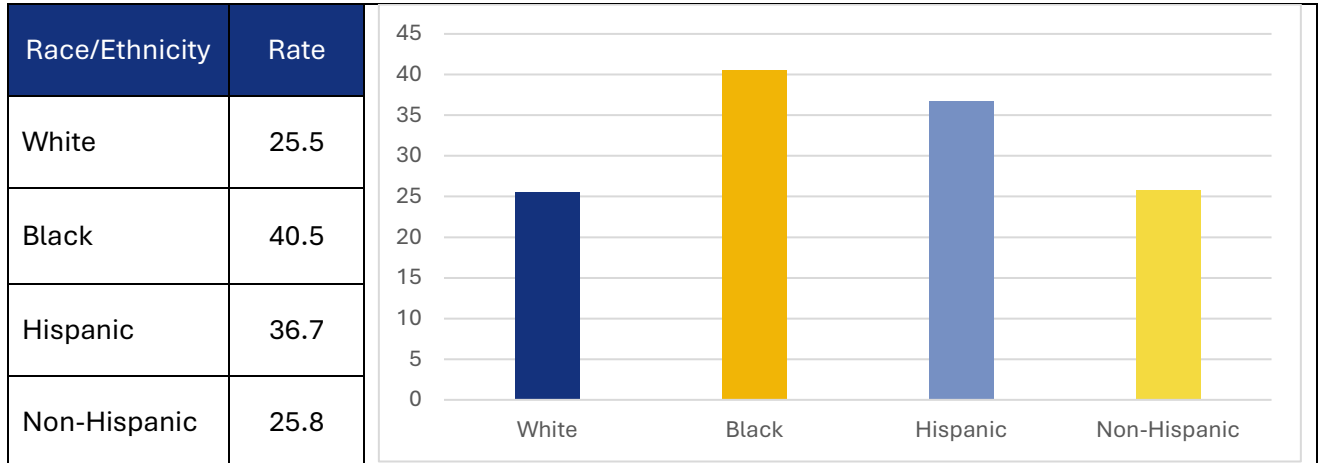


Source: Florida Department of Health, Bureau of Vital Statistics

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Both Blacks and Hispanics have a higher death rate from strokes when compared to other races and ethnicities in Lee County.

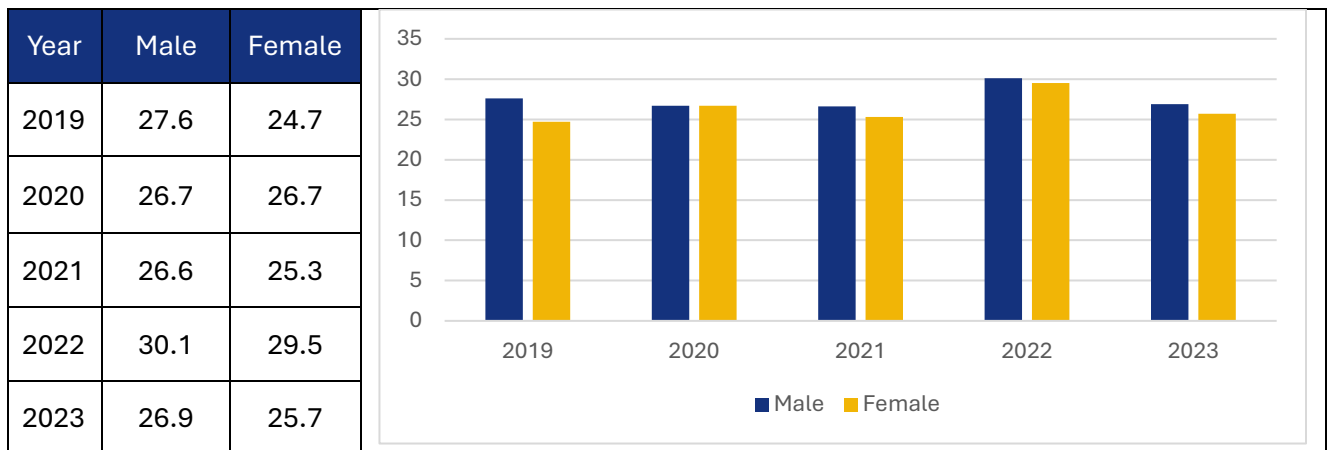
Exhibit HC27: Age-Adjusted Deaths from Stroke by Race and Ethnicity, Rate per 100,000, Lee County, 2023



Source: Florida Department of Health, Bureau of Vital Statistics

The death rate for strokes in Lee County tends to be slightly higher for males than for females. The two sexes tend to follow the same trends.

Exhibit HC28: Age-Adjusted Deaths from Stroke by Sex, Rate per 100,000 Population, Lee County, 2019-2023



Source: Florida Department of Health, Bureau of Vital Statistics

Aging Population Health

Among those 65 and over in Lee County, cancer and heart disease are the two leading causes of death, responsible for more than sixty percent of all deaths. In 2016, heart disease was the leading cause; in 2023, it switched to cancer.

Exhibit HC29: The 10 Leading Causes of Death, 65 Years and Over, Lee County, 2016 and 2023

2023		
Leading Cause of Death	Number of Deaths	Percentage Distribution
Cancer	1529	30.8%
Heart Disease	1525	30.7%
Stroke	430	8.7%
Chronic Lower Respiratory Disease	346	7.0%
Unintentional Injury	283	5.7%
Alzheimer's Disease	252	5.1%
Diabetes	161	3.2%
Parkinson's Disease	149	3.0%
COVID-19	135	2.7%
Nephritis, Nephrotic Syndrome &Nephrosis	88	1.8%

2016		
Leading Cause of Death	Number of Deaths	Percentage Distribution
Heart Disease	1354	32.3%
Cancer	1331	31.8%
Chronic Lower Respiratory Disease	408	9.7%
Stroke	292	7.0%
Alzheimer's Disease	222	5.3%
Unintentional Injury	221	5.3%
Diabetes	206	4.9%
Parkinson's Disease	82	2.0%
Nephritis, Nephrotic Syndrome &Nephrosis	40	1.0%
Dementia	36	0.9%

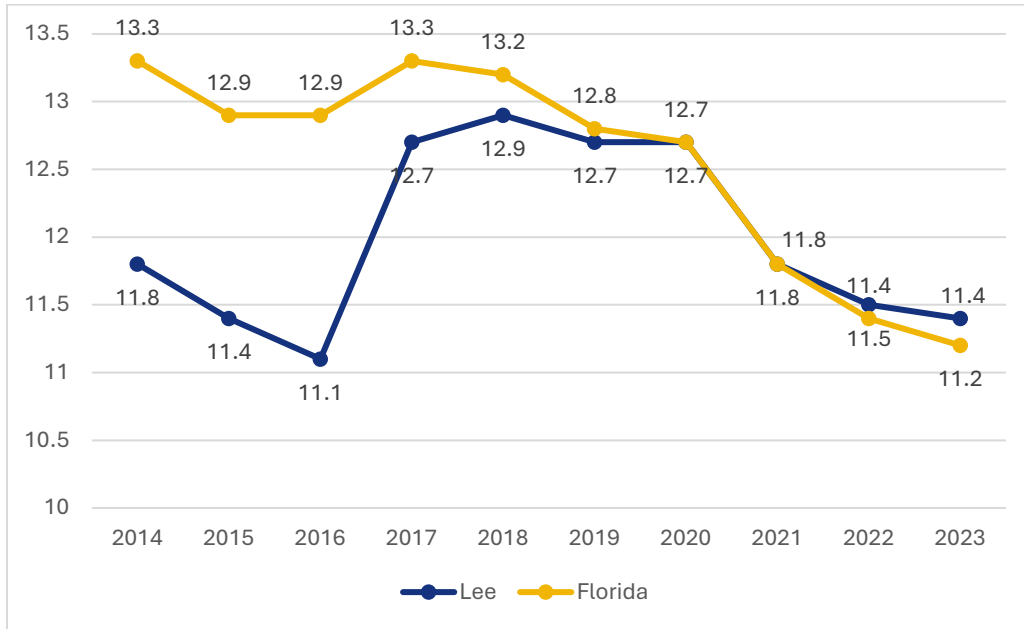
Source: Florida Department of Health, Bureau of Vital Statistics

Alzheimer's disease is the most common cause of dementia and can account for up to 80 percent of all cases of the condition. First identified over 100 years ago, research on its symptoms, causes, risk factors, and treatment did not gain significant momentum until the last 30 years. Alzheimer's disease is usually diagnosed by a primary care physician utilizing the patient's medical and family history, as well as any psychiatric, cognitive, and behavioral history. Neurological, physical, and cognitive examinations and tests are also conducted as part of the diagnosis process. The definitive cause of Alzheimer's remains unknown at this time, although it is widely accepted that, as in other chronic diseases, multiple factors are involved in the development of the disease.

In Lee County, Alzheimer's disease was the sixth leading cause of death in the population 65 years of age and older in 2023.

It is hard to know the actual number of people living with Alzheimer's disease, but below is an estimate of the number of people in Lee County with Alzheimer's. It is estimated that 11.4 percent of the people aged 65 or higher in Lee County in 2023 had Alzheimer's disease.

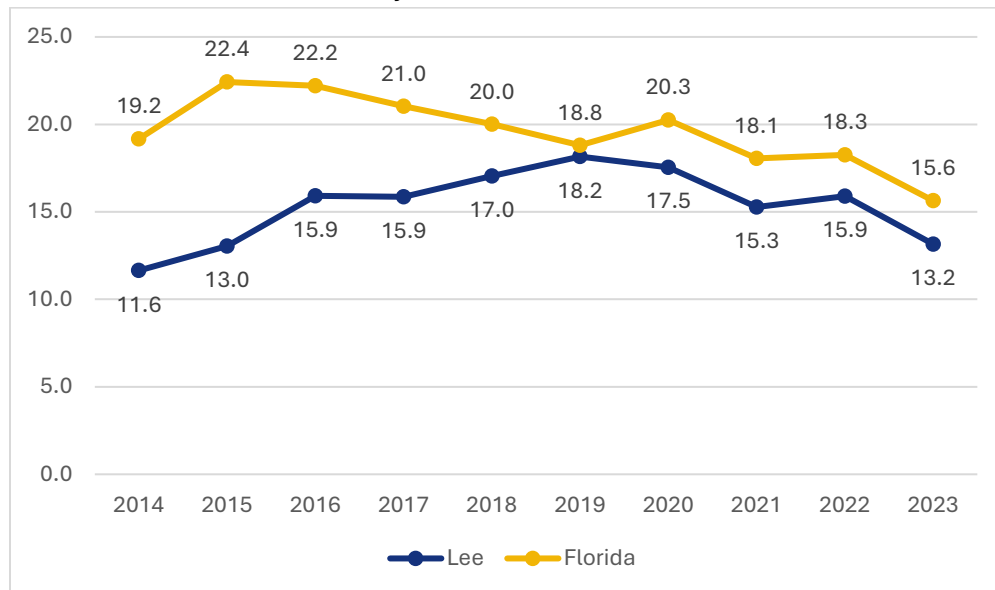
Exhibit HC30: Probable Alzheimer's Cases (65+), Percentage of Population 65+, Lee County and Florida, 2014-2023



Source: Alzheimer's Association, Alzheimer's Disease Facts and Figures

The death rate from Alzheimer's Disease in Lee County is slightly lower than the state average (13.2 Lee, 15.6 Florida, 2023). It has declined since 2019, when it reached a high of 18.2 in Lee County.

Exhibit HC31: Age-Adjusted Deaths from Alzheimer's Disease, Rate per 100,000 Population, Lee County and Florida, 2014-2023

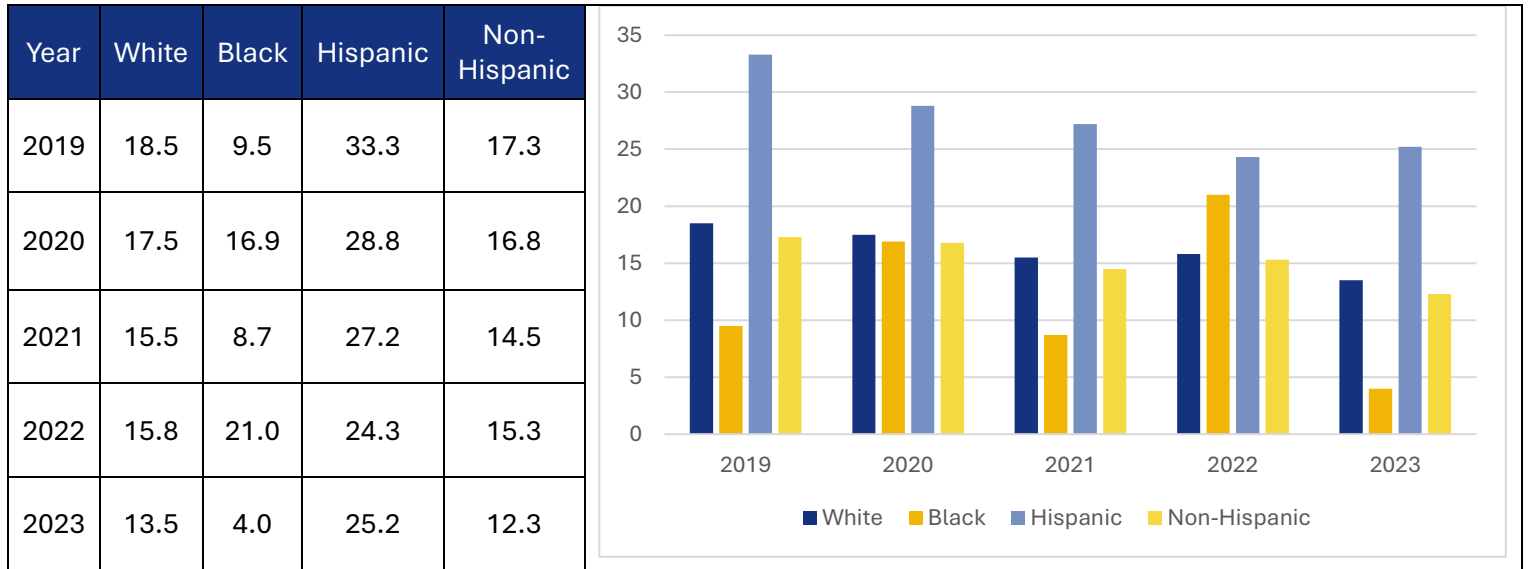


Source: Florida Department of Health, Bureau of Vital Statistics

2025 Lee County Community Health Assessment: Health Conditions

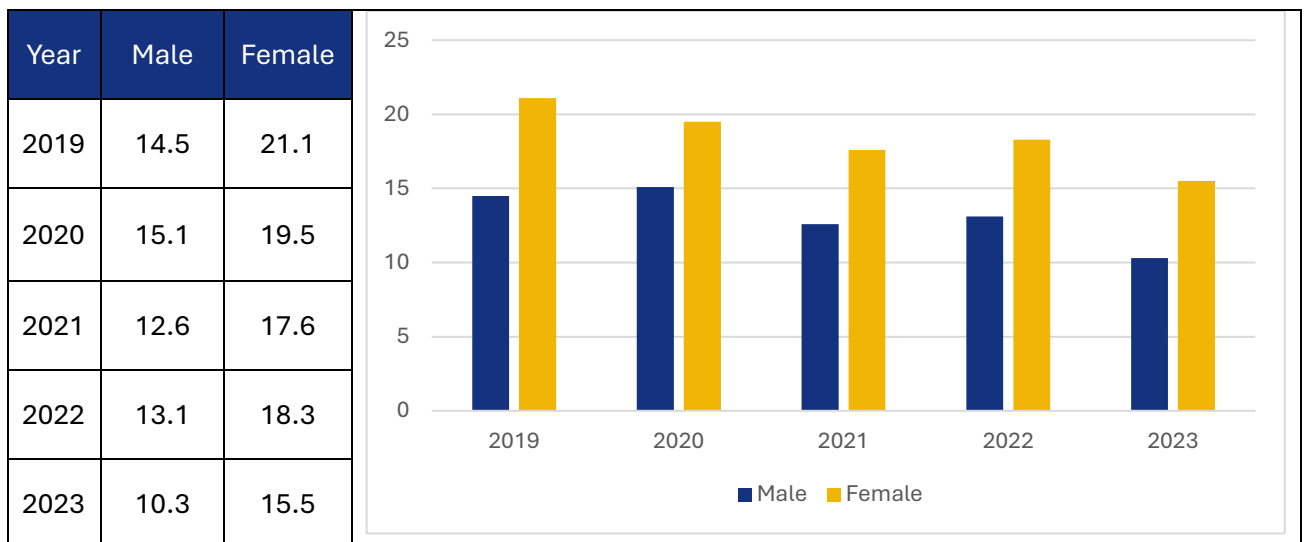
In Lee County, Hispanics have a significantly higher Alzheimer's death rate when compared to other races and ethnicities. Black people in Lee County generally have one of the lowest death rates from Alzheimer's Disease.

Exhibit HC32: Age-Adjusted Deaths from Alzheimer's Disease by Race and Ethnicity, Rate per 100,000 Population, Lee County, 2019-2023



Females in Lee County consistently had a higher Alzheimer's death rate when compared to males from 2019 to 2023.

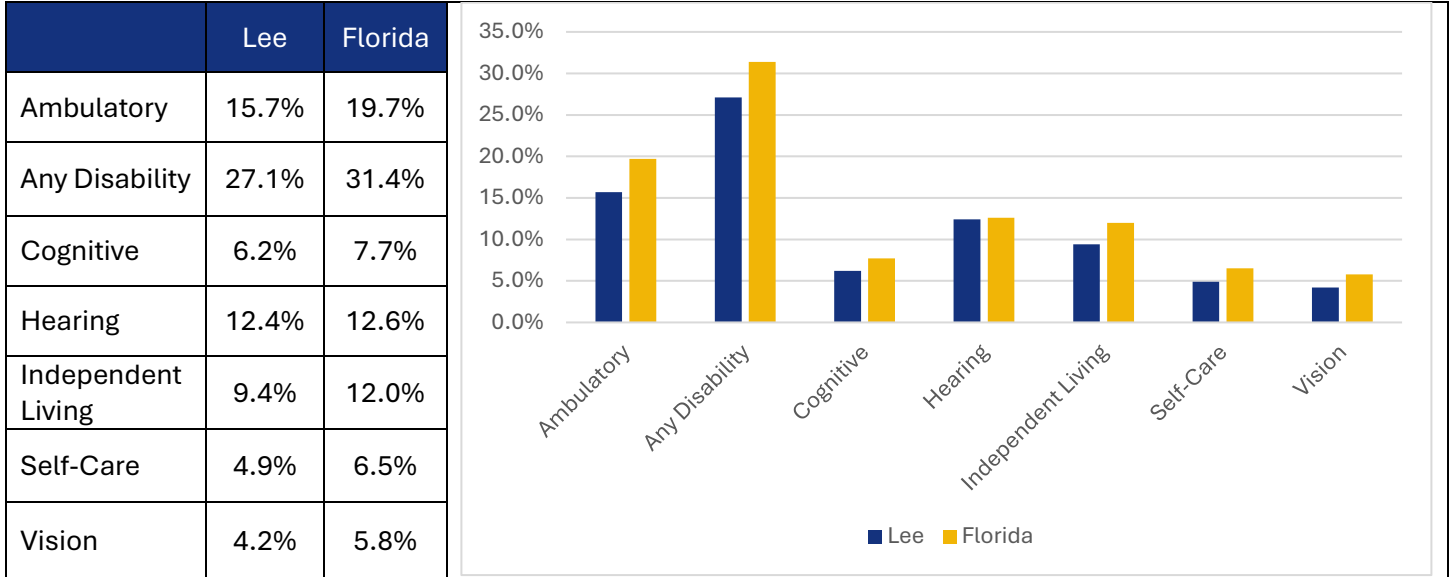
Exhibit HC33: Age-Adjusted Deaths from Alzheimer's Disease by Sex, Rate per 100,000 Population, Lee County, 2019-2023



2025 Lee County Community Health Assessment: Health Conditions

Lee County has a lower percentage of seniors with a disability status in every category when compared to the Florida average.

Exhibit HC34: Disability Status, Percent of Population Aged 65 and Over, Lee County and Florida, 2023



Source: United States Bureau of the Census, American Community Survey, 5-year estimates



Source: Photo courtesy of NCH

Behavioral Health

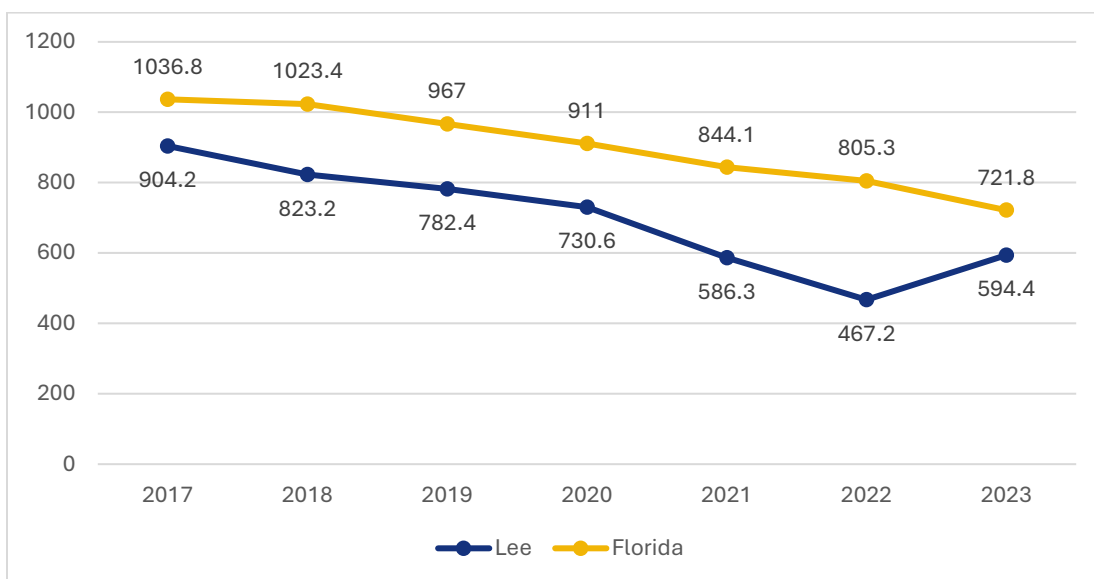
The Florida Mental Health Act of 1971 (commonly known as the “Baker Act”) is a statute allowing for the involuntary examination of an individual. It was originally enacted, at least in part, because of widespread instances of elder abuse in which one or more family members would have another family member committed to gain control over their estate prior to their death. Once committed, it was difficult for many other patients to obtain representation, and they became warehoused until their death. The Baker Act allows for involuntary examination (what some call emergency or involuntary commitment). It can be initiated by judges, law enforcement officials, physicians, or mental health professionals. There must be evidence that the person has a mental illness (as defined in the Baker Act) and is a harm to self, harm to others, or self-neglectful (as defined in the Baker Act). Examinations may last up to 72 hours and occur in over 100 facilities statewide.

There are many possible outcomes following the examination of the patient. This includes the release of the individual to the community (or other community placement), a petition for involuntary inpatient placement (what some call civil commitment), involuntary outpatient placement (what some call outpatient commitment or assisted treatment orders), or voluntary treatment (if the person is competent to consent to voluntary treatment and consents to voluntary treatment).

According to the Florida Baker Act Annual Report Fiscal Year 2023/2024, Lee County residents who received an involuntary examination were seen at SalusCare (59.98%) and Park Royal Hospital (27.38%).

From 2007 to 2022, there was a significant decrease in involuntary examinations in Lee County; however, there was an increase from 2022 to 2023. The rate of involuntary examinations in Lee County is lower than the state average (594.4 Lee, 721.8 Florida, 2023).

Exhibit HC35: Baker Act Involuntary Examinations, Rate per 100,000 Population, Lee County and Florida, 2017-2023



Source: Florida Department of Children and Families

The proportion of people in Lee County who receive involuntary examinations from each age group has remained fairly steady in the past five years. However, there has been a slight decrease in the percentage of those 65 and older receiving the exams.

Exhibit HC36: Involuntary Examinations: Residents of Lee County for 5 Years, 2019-2024

Fiscal year	All ages	Percent of Total			
		<18	18-24	25-64	65+
2023-2024	4,883	23.4%	13.7%	54.3%	7.9%
2022-2023	3,727	25.0%	14.5%	52.4%	8.1%
2021-2022	4,402	28.6%	13.7%	52.0%	5.7%
2020-2021	5,510	25.0%	13.0%	55.3%	6.7%
2019-2020	5,393	22.2%	12.7%	56.3%	8.7%

Source: Baker Act Reporting Center FY 2023/2024 Annual Report

During the 2023-24 fiscal year, 65.0 percent of involuntary examinations were initiated by law enforcement, 33.2 percent were initiated by those with a professional certificate, and 1.9 percent were initiated through an ex parte order. According to the Baker Annual Report, Physicians (who are not Psychiatrists) (58.49%) were the most common health professionals to initiate involuntary examinations, followed by Mental Health Counselors (12.11%), Clinical Social Workers (10.07%), Psychiatric Nurses (6.11%), Psychiatrists (5.99%), Physician Assistants (5.56%), Clinical Psychologists (1.11%), and Marriage and Family Therapists (<1%).

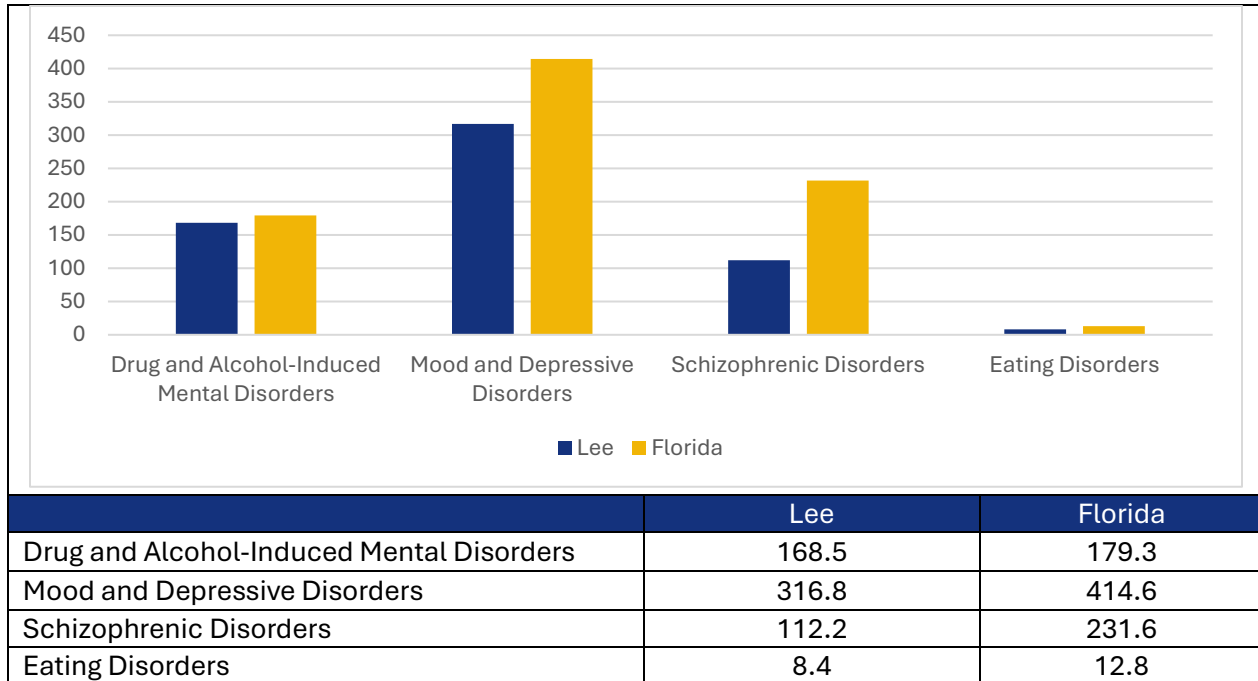
Exhibit HC37: Involuntary Examinations for Lee County Residents Percent of Total by Initiator Type, 2019-2024

Fiscal year	Law Enforcement	Health Professional	Ex-Parte
2023-2024	65.0%	33.2%	1.9%
2022-2023	65.4%	32.4%	2.2%
2021-2022	66.4%	32.4%	1.2%
2020-2021	66.7%	32.3%	1.0%
2019-2020	61.9%	37.5%	0.6%

Source: Baker Act Reporting Center FY 2023/2024 Annual Report

In Lee County in 2023, the most common hospitalizations for mental and behavioral health disorders were for mood and depressive disorders, while eating disorders had the smallest percentage. When compared to the Florida average, Lee County experienced a lower rate of hospitalizations for all types of mental and behavioral health disorders. It is worth noting that the availability of services can significantly impact the number of hospitalizations.

Exhibit HC38: Hospitalizations for Mental and Behavioral Health Disorders, All Ages, Rate per 100,000 Population, Lee County and Florida, 2023

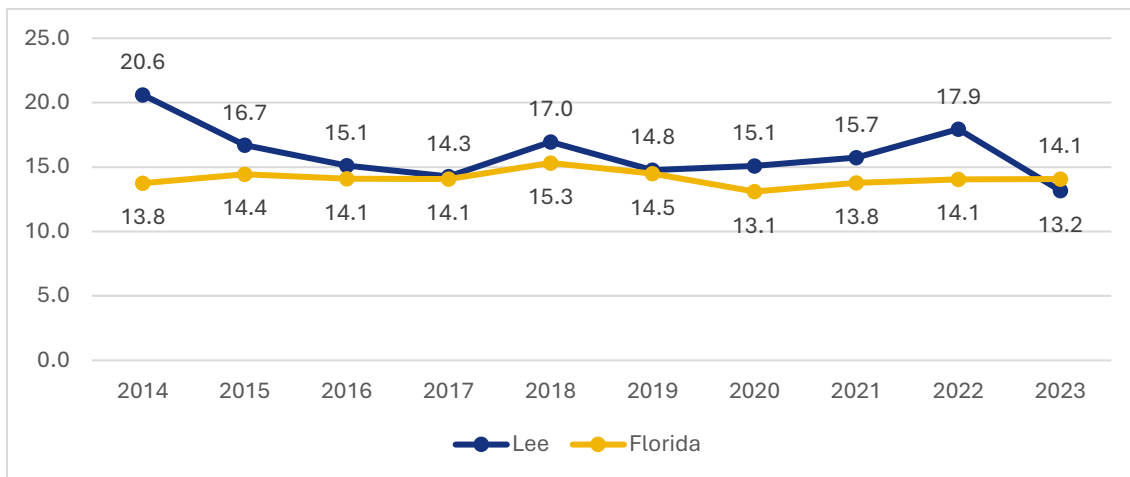


Source: Florida Agency for Health Care Administration (AHCA)

Suicide is a significant preventable public health problem in the United States. Several risk factors, including a history of depression or other mental illnesses, a family history of suicide, and previous suicide attempts, can increase the likelihood of someone attempting or dying from suicide.

Over the past decade, Lee County generally had a similar or higher rate of suicide than the average for the state; however, in 2023, the rate for Lee County was lower than the state average (13.2 Lee, 14.1 Florida).

Exhibit HC39: Age-Adjusted Suicide Deaths, Rate per 100,000 Population, Lee County and Florida, 2014-2023

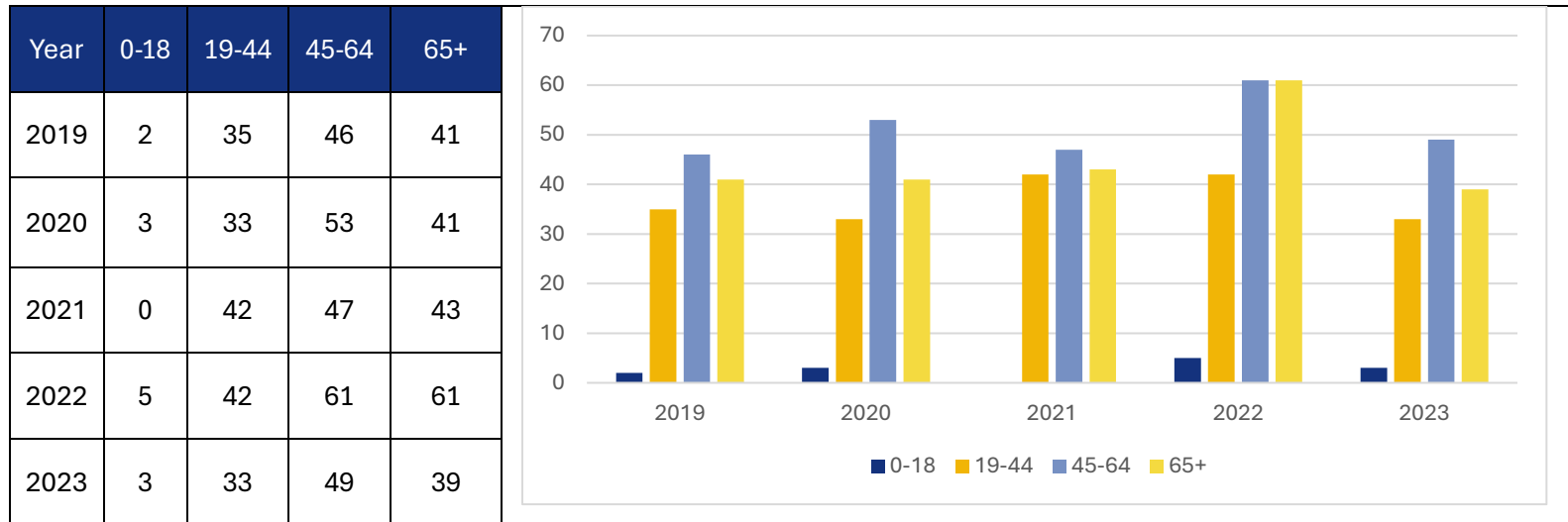


Source: Florida Department of Health, Bureau of Vital Statistics

2025 Lee County Community Health Assessment: Health Conditions

Since 2019, the largest number of suicide deaths in Lee County has been among those aged 45-64, except in 2022 when those aged 45-64 and 65+ had the highest number of suicide deaths.

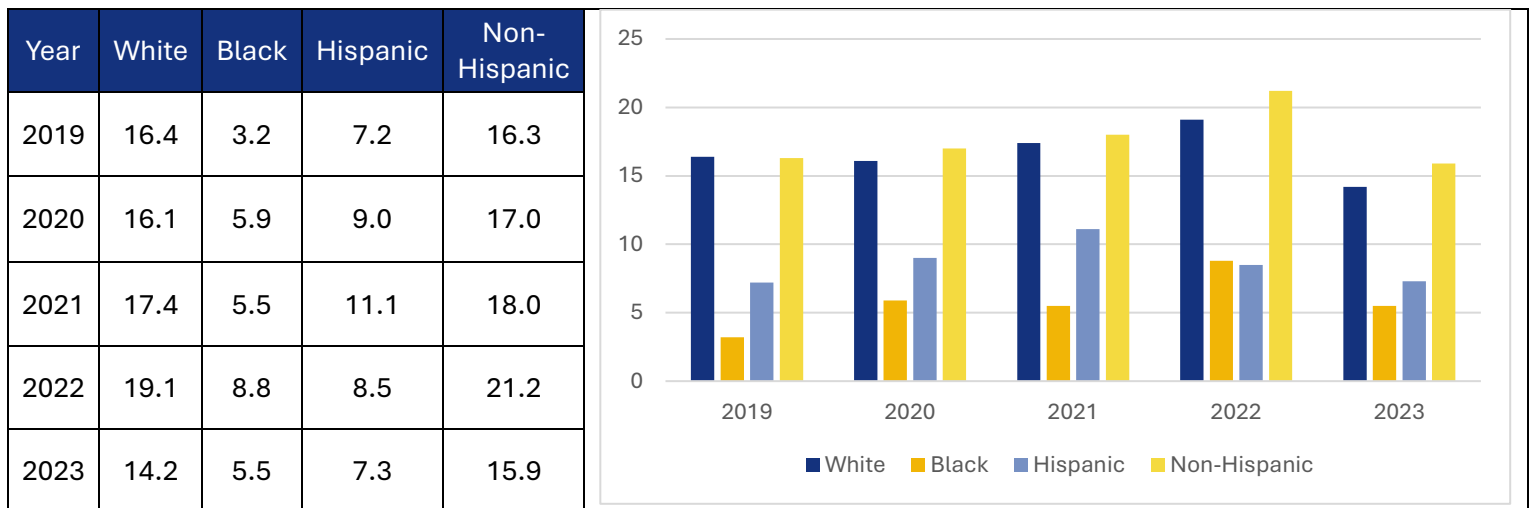
Exhibit HC40: Number of Suicide Deaths by Age, Lee County, 2019-2023



Source: Florida Department of Health, Bureau of Vital Statistics

In Lee County, the White and non-Hispanic population has a higher rate of suicide deaths than the black and Hispanic populations. The rate among all groups rose between 2019 and 2022, but then fell in 2023.

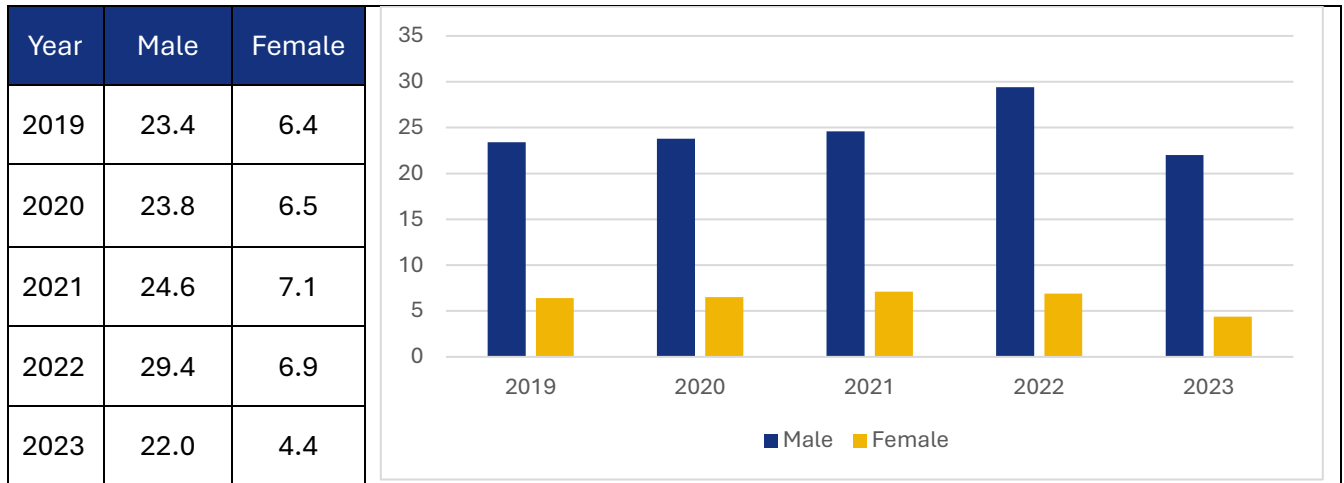
Exhibit HC41: Age-Adjusted Suicide Deaths by Race and Ethnicity, Rate per 100,000 Population, Lee County, 2019-2023



Source: Florida Department of Health, Bureau of Vital Statistics

When compared to females, males have had a significantly higher rate of suicide deaths in Lee County.

Exhibit HC42: Age-Adjusted Suicide Deaths by Sex, Rate per 100,000 Population, Lee County, 2019-2023



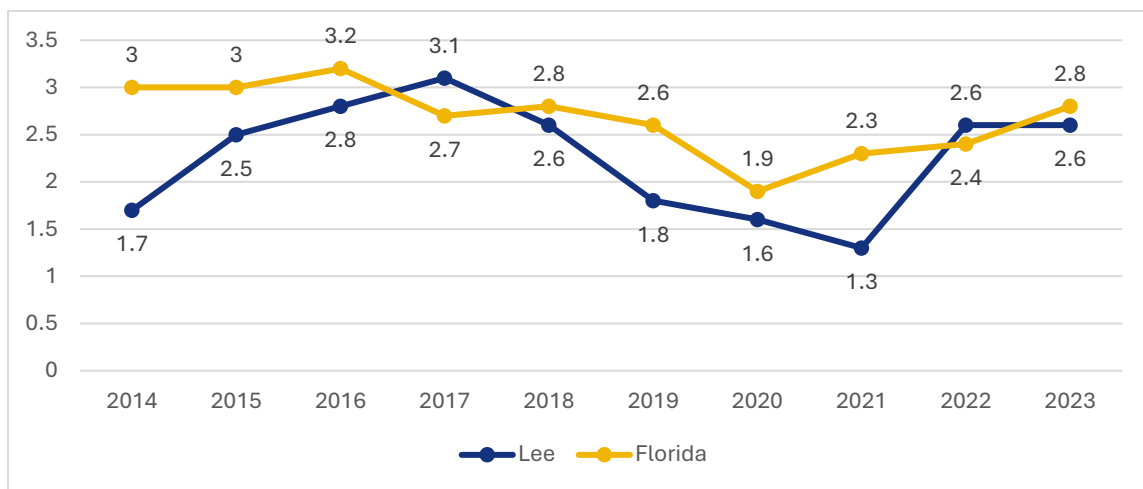
Source: Florida Department of Health, Bureau of Vital Statistics

Tuberculosis

According to the Centers for Disease Control and Prevention, Tuberculosis (TB) is caused by a bacterium called *Mycobacterium Tuberculosis*. TB is an infectious disease that attacks the lungs, but it can attack any part of the body. TB is an airborne infectious disease, which means the disease spreads in the air when a person infected with TB coughs, speaks, or sings.

In the past 10 years, 2017 had the highest rate of Tuberculosis cases in Lee County. When compared to the state of Florida, Lee County typically has a lower rate of TB cases (Lee 2.6, Florida, 2.8, 2023).

Exhibit HC43: Tuberculosis (TB), Rate per 100,000 Population, Lee County and Florida, 201-2023



Source: Florida Department of Health, Bureau of Epidemiology

Sexually Transmitted Diseases (STDs)

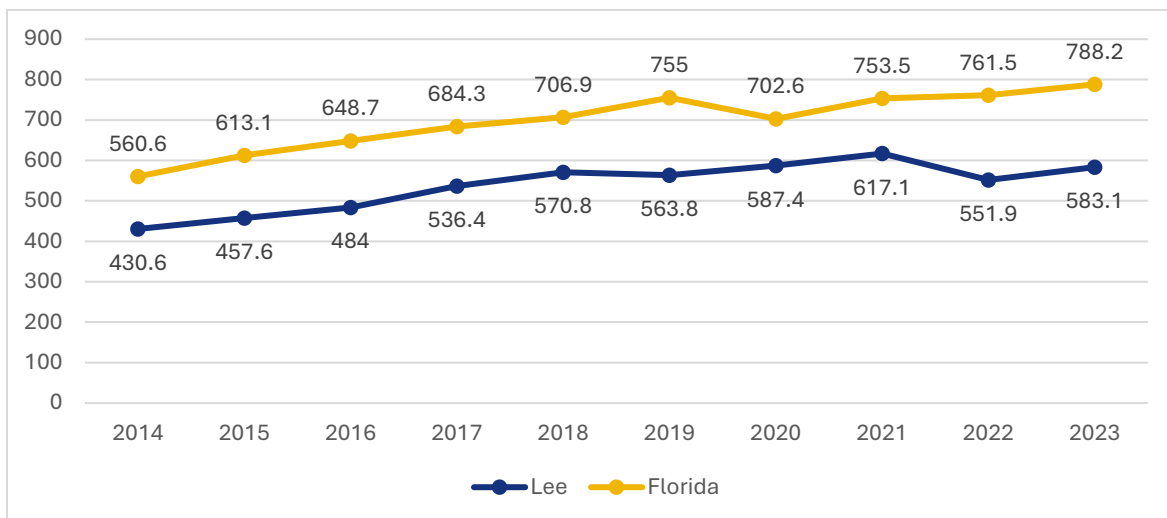
Chlamydia infections in women are usually asymptomatic and can result in pelvic inflammatory disease (PID), which is a major cause of infertility, ectopic pregnancy, and chronic pelvic pain. As is the case with other inflammatory STIs, chlamydia infections can facilitate the transmission of human immunodeficiency virus (HIV). Pregnant women infected with chlamydia can also pass the infection to their infants during delivery, potentially resulting in neonatal ophthalmia and pneumonia. Due to the burden of disease and the risks associated with infections, the CDC recommends that all sexually active women younger than 25 years of age receive an annual chlamydia screening.

Gonorrhea is caused by *Neisseria gonorrhea*, a bacterium that can grow and multiply easily in warm, moist areas of the reproductive tract, including the cervix, uterus, and fallopian tubes in women, and in the urethra in women and men. Gonorrhea can also grow in the mouth, throat, eyes, and anus.

Syphilis is a genital ulcerative disease that causes significant complications if left untreated and facilitates the transmission of HIV infection. Syphilis is divided into four stages: primary, secondary, latent, and tertiary. Each stage has its own signs and symptoms. Untreated early syphilis in pregnant women results in perinatal mortality in as much as 40 percent of cases, and pregnancy may lead to infection of the fetus in 80 percent of cases. Syphilis is passed from person to person through direct contact with a syphilis sore. Sores occur on the external genitalia, vagina, and anus or in the rectum. These sores can also occur on the lips and in the mouth. Even after completing syphilis treatment, reinfection is possible.

Bacterial sexually transmitted diseases (STDs) are comprised of three reportable sexually transmitted infections (STIs): chlamydia, gonorrhea, and syphilis. Bacterial STDs in both Lee County and Florida increased between 2014 and 2023. The rate of bacterial STDs for Lee County is lower than the state average (583.1 Lee, 788.2 Florida, 2023).

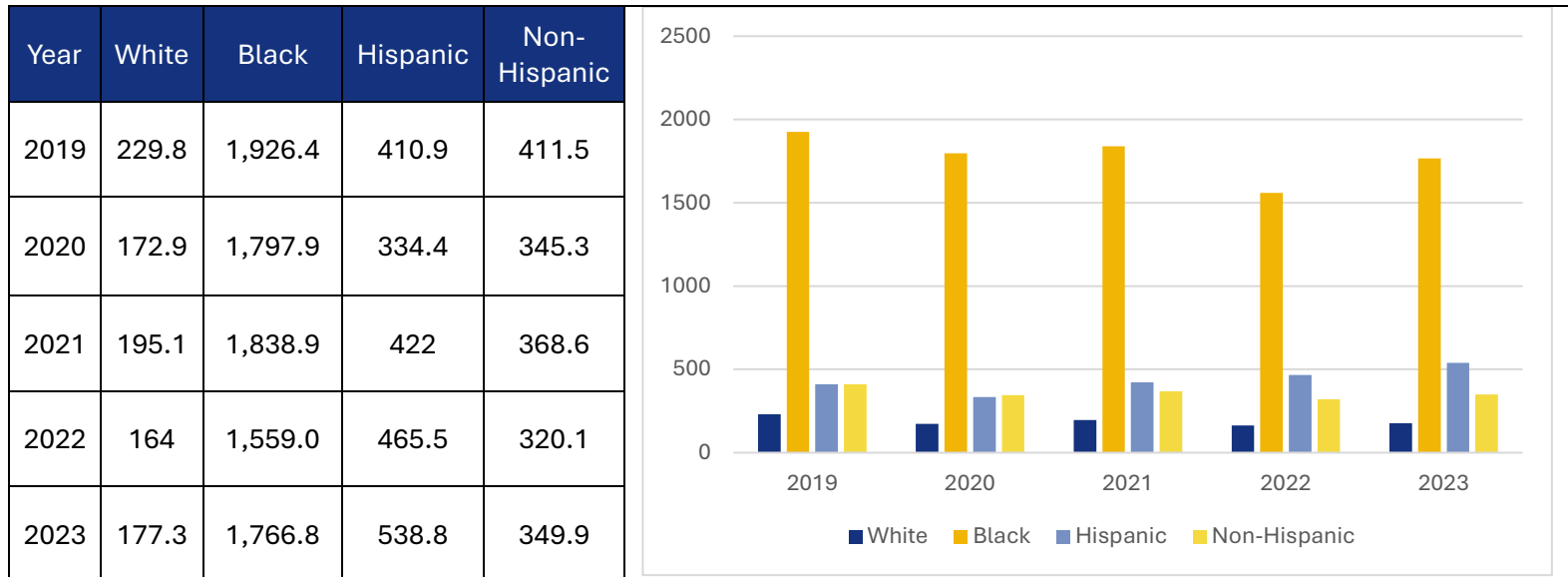
Exhibit HC44: Bacterial Sexually Transmitted Diseases (STDs), Rate per 100,000 Population, Lee County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Communicable Diseases

In Lee County, bacterial STDs are most prevalent in the Black population.

Exhibit HC45: Bacterial STDs by Race and Ethnicity, Rate per 100,000 Population, Lee County, 2019-2023



Source: Florida Department of Health, Bureau of Communicable Diseases

Chlamydia is the most common sexually transmitted infection (STI) in Lee County. When compared to the Florida average, Lee County's STI rates are lower for chlamydia, gonorrhea, and syphilis.

Exhibit HC46: Sexually Transmitted Infections (STI), 3-year rolling rate, Lee County and Florida, 2021-2023

	# cases annual average	Lee 3-Year Rate per 100,000	Florida 3-Year Rate per 100,000
Chlamydia	3,214	401.9	484.3
Gonorrhea	1,081.3	135.2	202.9
Syphilis, all stages	371.0	46.4	80.7

Source: Florida Department of Health, Bureau of Communicable Diseases

Chlamydia is seen at higher rates among those who are under 25 years of age. All the STIs are seen more in people under 35 than in other age groups. However, the age range for syphilis tends to be older than that of the other STIs.

Exhibit HC47: STI Cases by Age and Sex, 3-Year Rolling, Lee County, 2021-2023

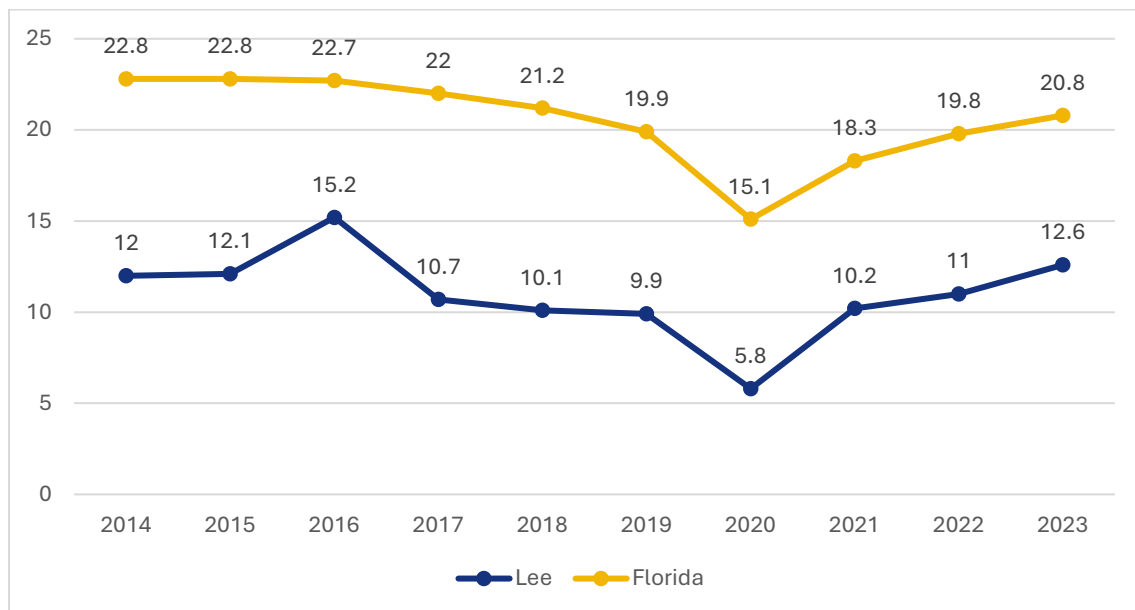
Age Group	Chlamydia			Gonorrhea			Syphilis		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
15-19	24.8%	17.3%	28.6%	17.5%	12.5%	24.5%	3.3%	3.7%	1.7%
20-24	37.7%	34.9%	39.1%	30.4%	27.5%	34.4%	12.8%	11.2%	18.8%
25-29	17.6%	19.1%	16.8%	19.0%	18.8%	19.4%	16.7%	15.8%	20.1%
30-34	9.3%	11.7%	8.0%	12.9%	15.6%	9.1%	17.3%	16.5%	20.1%
35-39	4.7%	6.5%	3.8%	6.8%	7.8%	5.3%	11.7%	11.3%	13.1%
40-44	2.5%	3.7%	1.8%	4.6%	5.5%	3.3%	9.1%	9.7%	7.0%
45-54	2.1%	3.8%	1.3%	5.7%	7.9%	2.7%	14.5%	15.4%	11.4%
55-64	1.0%	2.0%	0.5%	2.2%	3.0%	1.0%	11.3%	12.9%	5.2%
65+	0.4%	1.1%	0.1%	1.0%	1.5%	0.4%	3.2%	3.4%	2.6%
Total	9,581	3,219	6,353	3,236	1,882	1,353	1,094	865	229

Source: Florida Department of Health, Bureau of Communicable Diseases

HIV Infection

Lee County consistently has lower rates of HIV than the state average (12.6 Lee, 20.8 Florida, 2023). The drop in cases in 2020 was likely caused by a decrease in testing.

Exhibit HC48: Human Immunodeficiency Virus (HIV) Diagnoses, Rate per 100,000 Population, Lee County and Florida, 2014-2023



Source: Florida Department of Health, Bureau of Communicable Diseases

Male-to-male sexual contact was the mode of exposure with the highest number of reported cases of HIV in Lee County, with 52.5 percent. Heterosexual contact was the second most common mode of exposure, with 32.2 percent. Male-to-male sexual contact/injection drug use had the lowest number of reported HIV cases.

Exhibit HC49: Modes of Exposure for HIV Diagnoses, Lee County, 2021-2023

Mode of Exposure	Number	Percent of Total
Male-to-Male Sexual Contact (MMSC)	165	52.5%
Heterosexual Contact	85	32.2%
Injection Drug Use (IDU)	9	3.4%
MMSC/IDU	5	1.9%

Source: Florida Department of Health, Bureau of Communicable Diseases

In Lee County the 30–39 age-group had the highest number of reported HIV cases, accounting for almost 30 percent of the total reported cases, when compared to the other age-groups. There were only no reported cases of HIV for children under the age of 12 in Lee County for 2021-23.

Exhibit HC50: HIV Diagnoses by Age, 3-Year Rolling, Lee County, 2021-2023

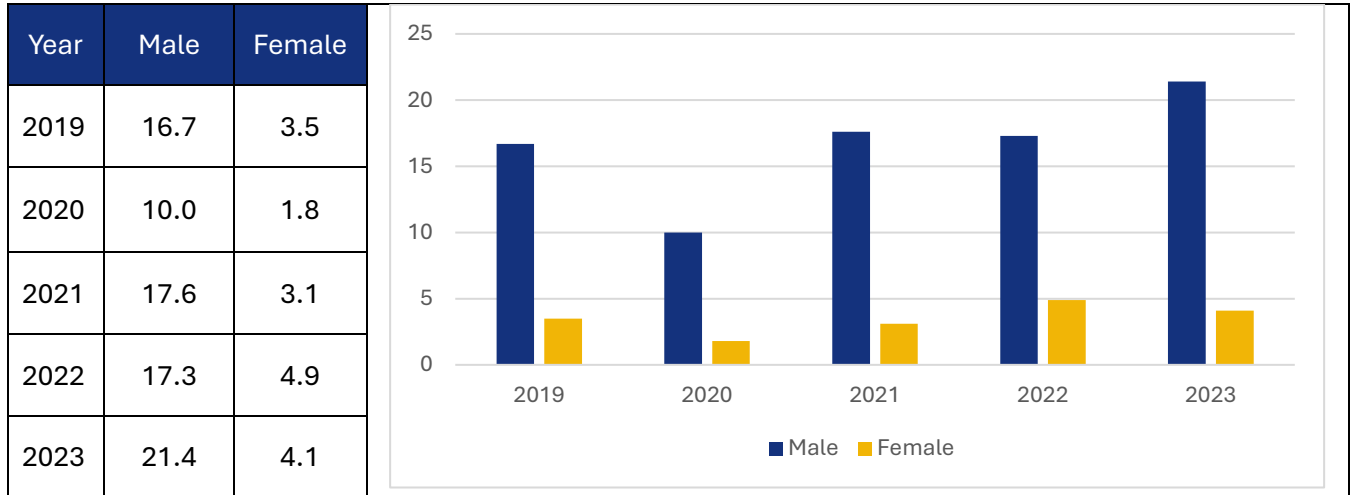
Age (in years) at Initial Florida Report	Number of Reported Cases	Percent of Total
0-12		
13-19	8	3.0%
20-24	29	10.7%
25-29	53	19.6%
30-39	81	29.9%
40-49	47	17.3%
50-59	28	10.3%
60+	25	9.2%

Source: Florida Department of Health, Bureau of Communicable Diseases

2025 Lee County Community Health Assessment: Health Conditions

In Lee County and across the state, males are far more likely to be diagnosed with HIV than females.

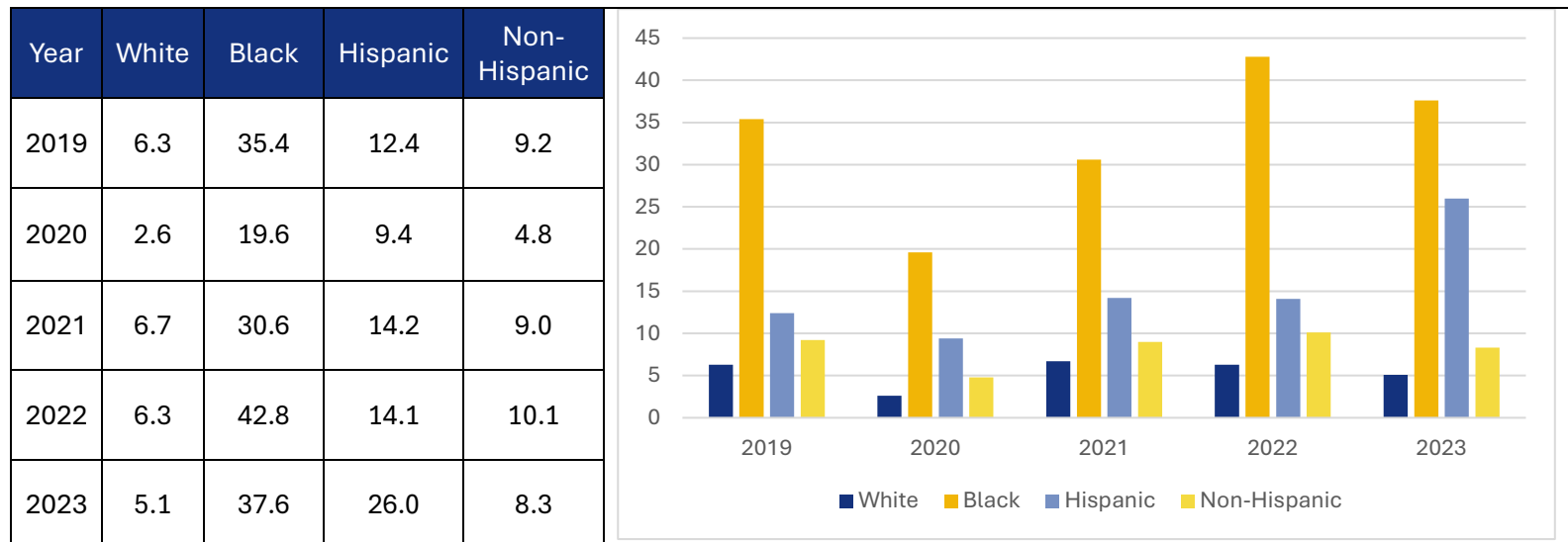
Exhibit HC51: HIV Diagnoses by Sex, 3-Year Rolling Rate per 100,000 Population, Lee County, 2019-2023



Source: Florida Department of Health, Bureau of Communicable Diseases

In Lee County, the Black population has the highest rate of HIV diagnoses, followed by the Hispanic population. The Hispanic population had a significantly higher rate of diagnoses for 2023 than any of the previous four years (26.0 2023, 14.1 2022).

Exhibit HC52: HIV Diagnoses by Race and Ethnicity, 3-Year Rolling Rate per 100,000 Population, Lee County, 2021-2023



Source: Florida Department of Health, Bureau of Communicable Diseases



2025 Lee County Health Needs Assessment

Prepared by the Health Planning Council of Southwest Florida, Inc.

Contact:

Phone: 239-433-6700

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Website: Hpcswf.com

Community Survey, Marco Island 2025



Prepared by



In Partnership With



Introduction and Overview



Partner Agencies: NCH, the Florida Department of Health in Collier County, and Healthcare Network. Survey created and analyzed by the Health Planning Council of Southwest Florida



Why: To assess Collier County residents' perceptions of healthcare and health issues in the county



How: Surveys and promotional materials were available in English, Spanish, and Haitian Creole. Survey collection was done via SurveyMonkey and paper surveys.



When: January - April 2025



Outcome: 441 residents shared their thoughts on health and healthcare in Collier County, with 33 residents identifying they reside in Marco Island

NCH **healthcare network** **IPC** **HEALTH PLANNING COUNCIL OF SOUTHWEST FL** **Florida HEALTH Collier County**

Your voice matters!
Take the survey today!

Please join us by completing a survey about health and healthcare in Collier and Lee Counties. Your feedback will help shape the services offered in your community.

Scan Me  or 

Your Health. Your Voice. Your Future

NCH **healthcare network** **IPC** **HEALTH PLANNING COUNCIL OF SOUTHWEST FL** **Florida HEALTH Collier County**

¡Tu voz importa!
¡Responde la encuesta hoy mismo!

Únete a nosotros completando una encuesta sobre la salud y la atención médica en los condados de Collier y Lee. Tus comentarios nos ayudarán a mejorar los servicios que se ofrecen en tu comunidad.

Escanea para realizar la encuesta. 

Tu salud. Tu voz. Tu futuro.

NCH **healthcare network** **IPC** **HEALTH PLANNING COUNCIL OF SOUTHWEST FL** **Florida HEALTH Collier County**

Vwa ou enpòtan!
Pran sondaj la jodia!

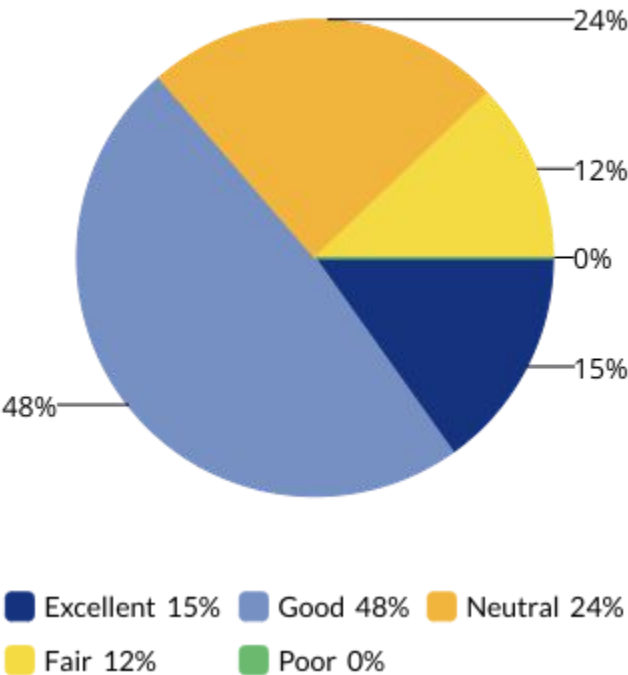
Tanpri ranpli yon sondaj sou sante ak swen sante nan zòn Collier ak Lee. Fidbak ou ap ede fome sèvis yo ofri nan kominote'w la.

Eskane sa 

Sante'w, Vwa'w, Avni'w.

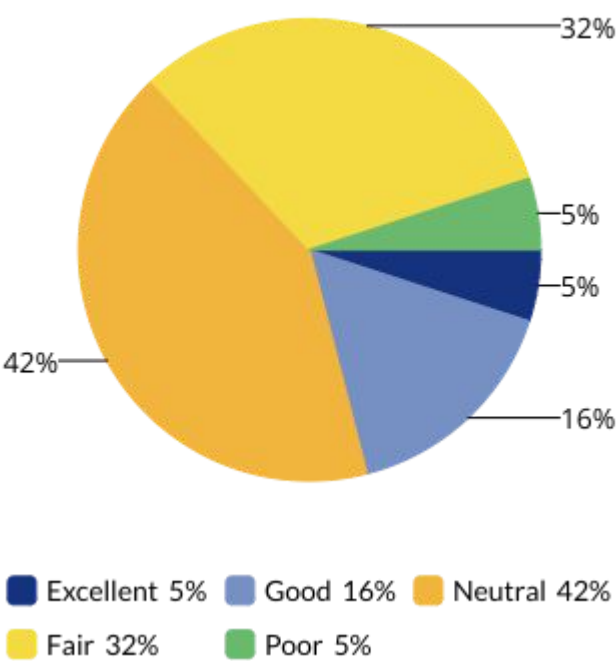
Community Health Perceptions and Access

How would you rate the general health of your community?



Source: Health Planning Council of Southwest Florida

How would you rate the quality of healthcare in your community?



Source: Health Planning Council of Southwest Florida

When asked, the majority of Collier County residents believed the general health of the community and the quality of healthcare in the community were **good** (**general health [51%]**, **quality healthcare [44%]**). Compared to Marco Island residents, the majority believe the general health of the community was **good (48%)**, but they were **neutral (42%)** on their thoughts of the quality of healthcare on Marco Island.

General Health of Community

Quality of Healthcare in Community

Marco Island

2.7

2.1

Collier Overall

2.4

2.3

Source: Health Planning Council of Southwest Florida

Key Health Concerns and Risky Behaviors

What are the three most important health concerns?

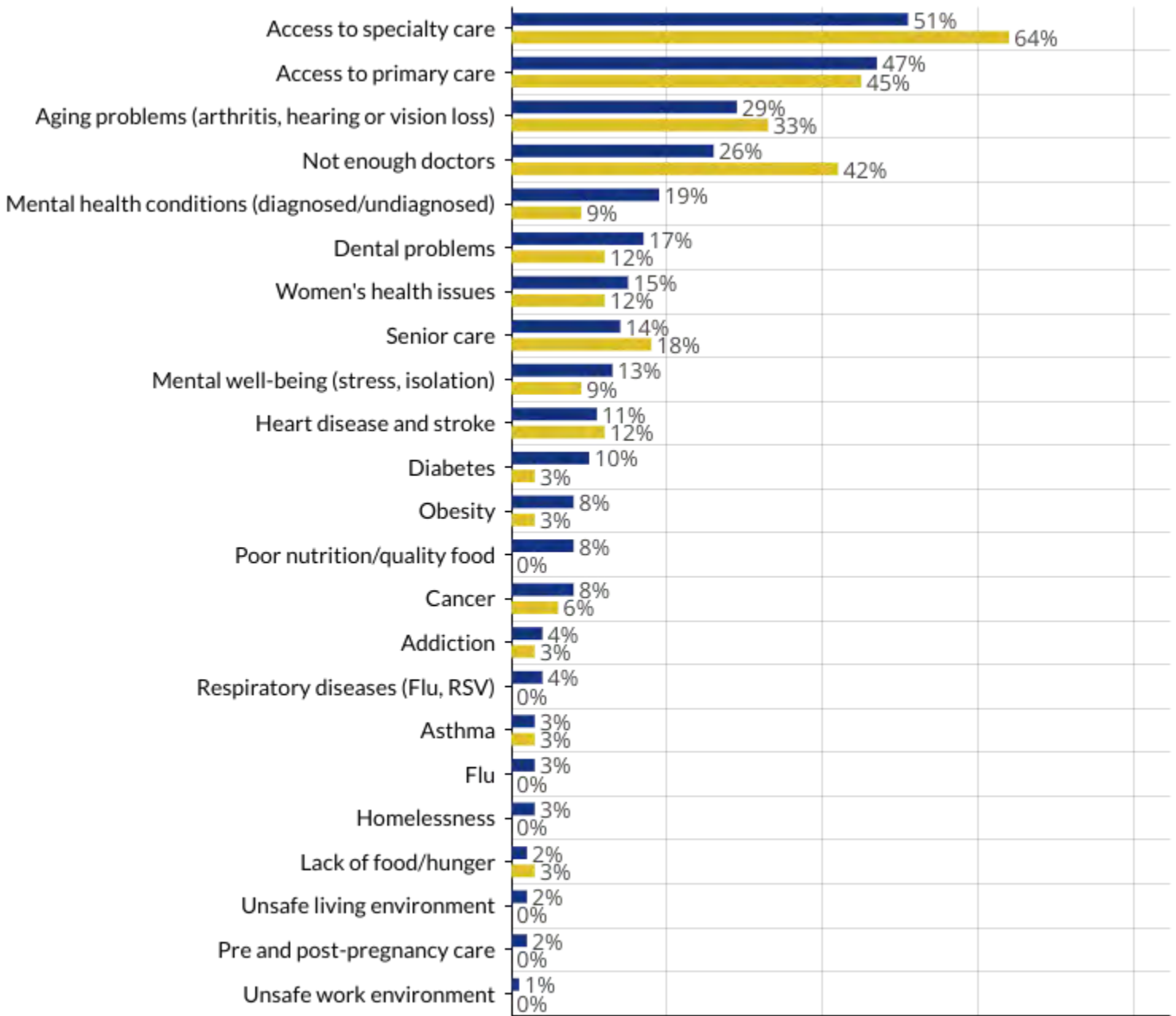
Marco Island Top 5 Responses

1. Access to specialty care
2. Access to primary care
3. Not enough doctors
4. Aging problems
5. Senior care



Collier County Top 5 Responses

1. Access to specialty care
2. Access to primary care
3. Aging problems
4. Not enough doctors
5. Mental health conditions



Source: Health Planning Council of Southwest Florida

Collier County Marco Island

Barriers to Healthcare and Environmental Factors

What do you think is the main reason that keeps people in your community seeking medical treatment?

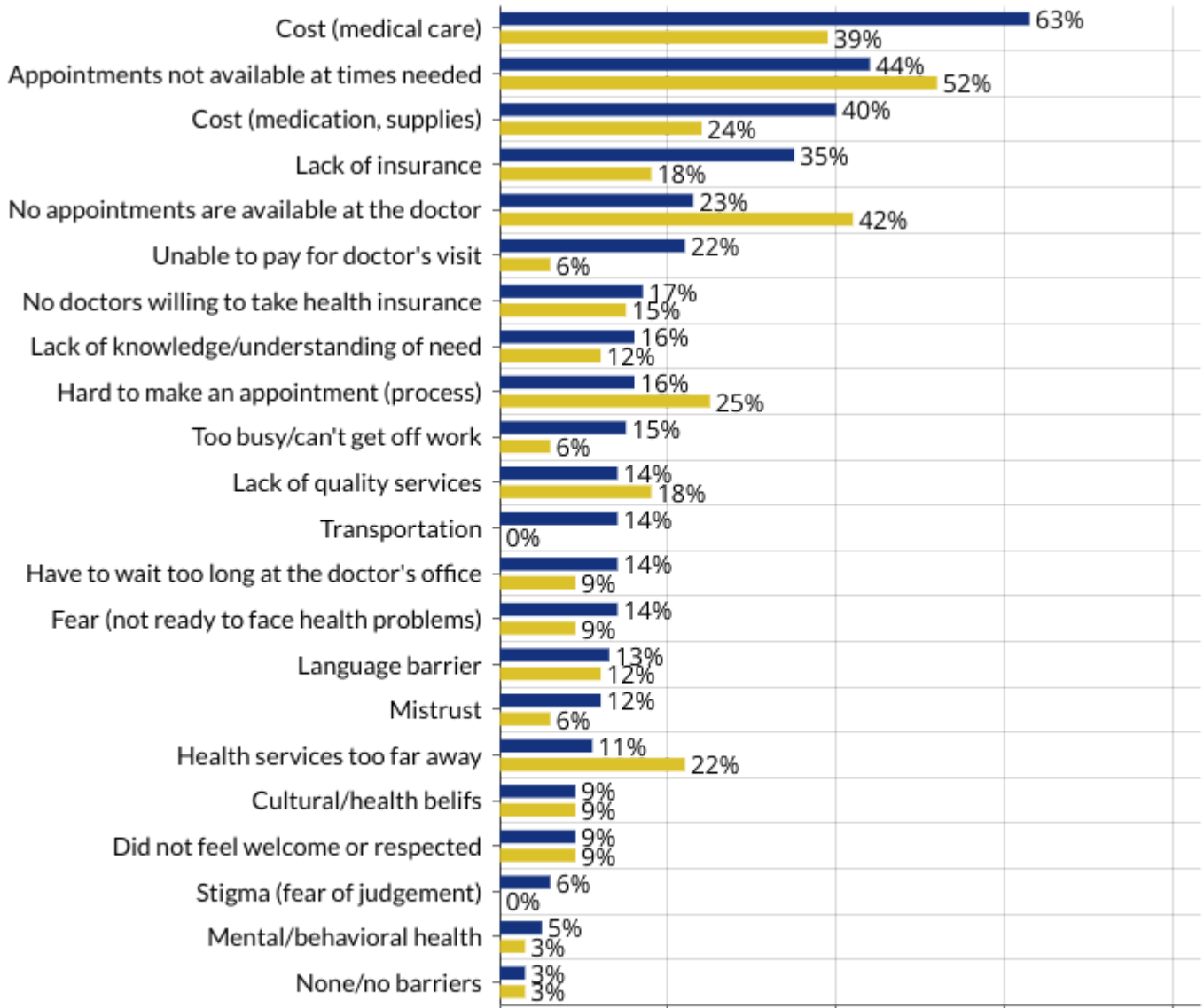
Marco Island Top 5 Responses

1. Appointments not available at times needed
2. No appointments are available at the doctor
3. Cost (medical care)
4. Hard to make an appointment (process)
5. Cost (medication, supplies)



Collier County Top 5 Responses

1. Cost (medical care)
2. Appointments not available at times needed
3. Cost (medication, supplies)
4. Lack of insurance
5. No appointments are available at the doctor



Source: Health Planning Council of Southwest Florida

Collier County Marco Island

Barriers to Healthcare and Environmental Factors

Which environmental factors affect your health, your friends, and/or your family's health?

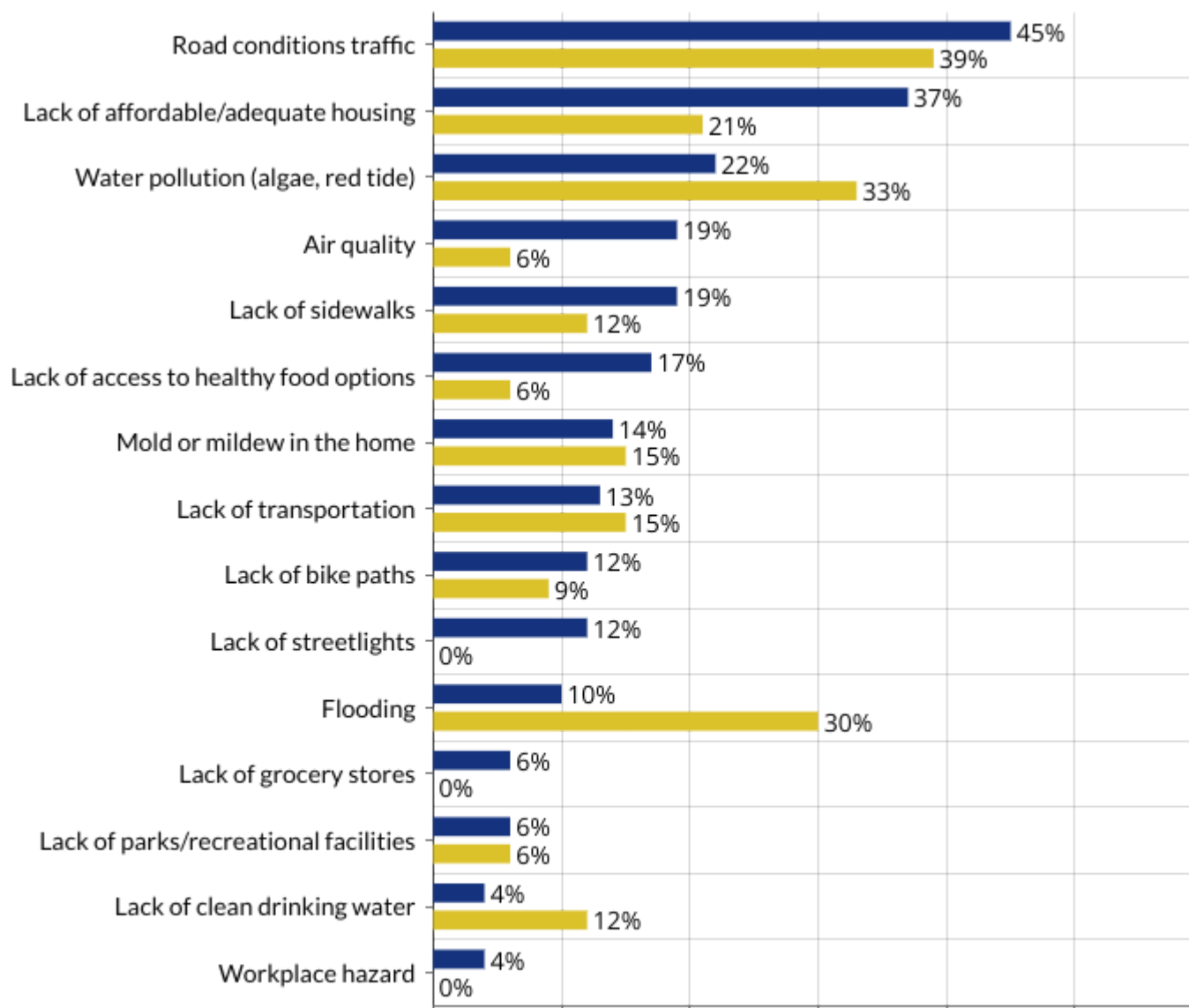
Marco Island Top 5 Responses

1. Road conditions/traffic
2. Water pollution (algae, red tide)
3. Flooding
4. Lack of affordable/adequate housing
5. Mold or mildew in the home



Collier County Top 5 Responses

1. Road conditions traffic
2. Lack of affordable/adequate housing
3. Water pollution (algae, red tide)
4. Air quality
5. Lack of sidewalks



Source: Health Planning Council of Southwest Florida

Collier County Marco Island

Healthcare Access Challenges and Service Needs

Are there services that you, your friends, and your family in your community have difficulty accessing?

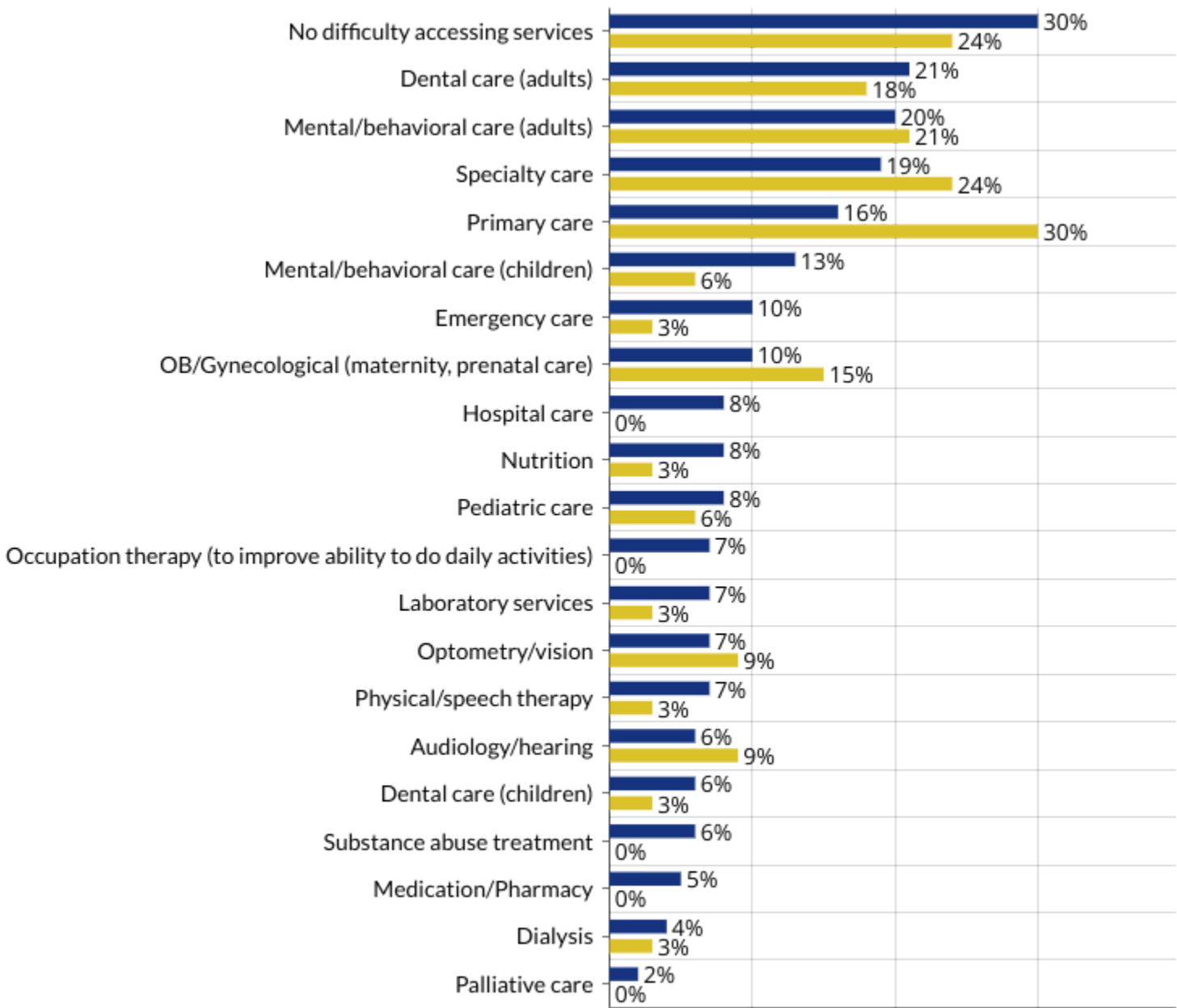
Marco Island Top 5 Responses



Collier County Top 5 Responses

1. Primary care
2. No difficulty accessing services
3. Specialty care
4. Mental/behavioral care (adults)
5. Dental care (adults)

1. No difficulty accessing services
2. Dental care (adults)
3. Mental/behavioral care (adults)
4. Specialty care
5. Primary care



Source: Health Planning Council of Southwest Florida

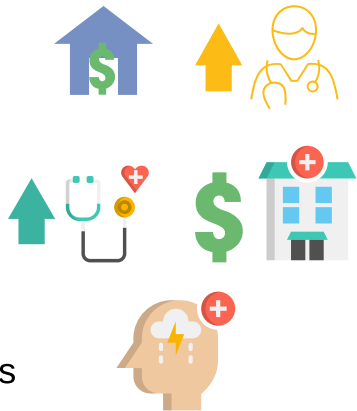
Collier County Marco Island

Healthcare Access Challenges and Service Needs

What does your community need to improve the health of your family, friends, and neighbors?

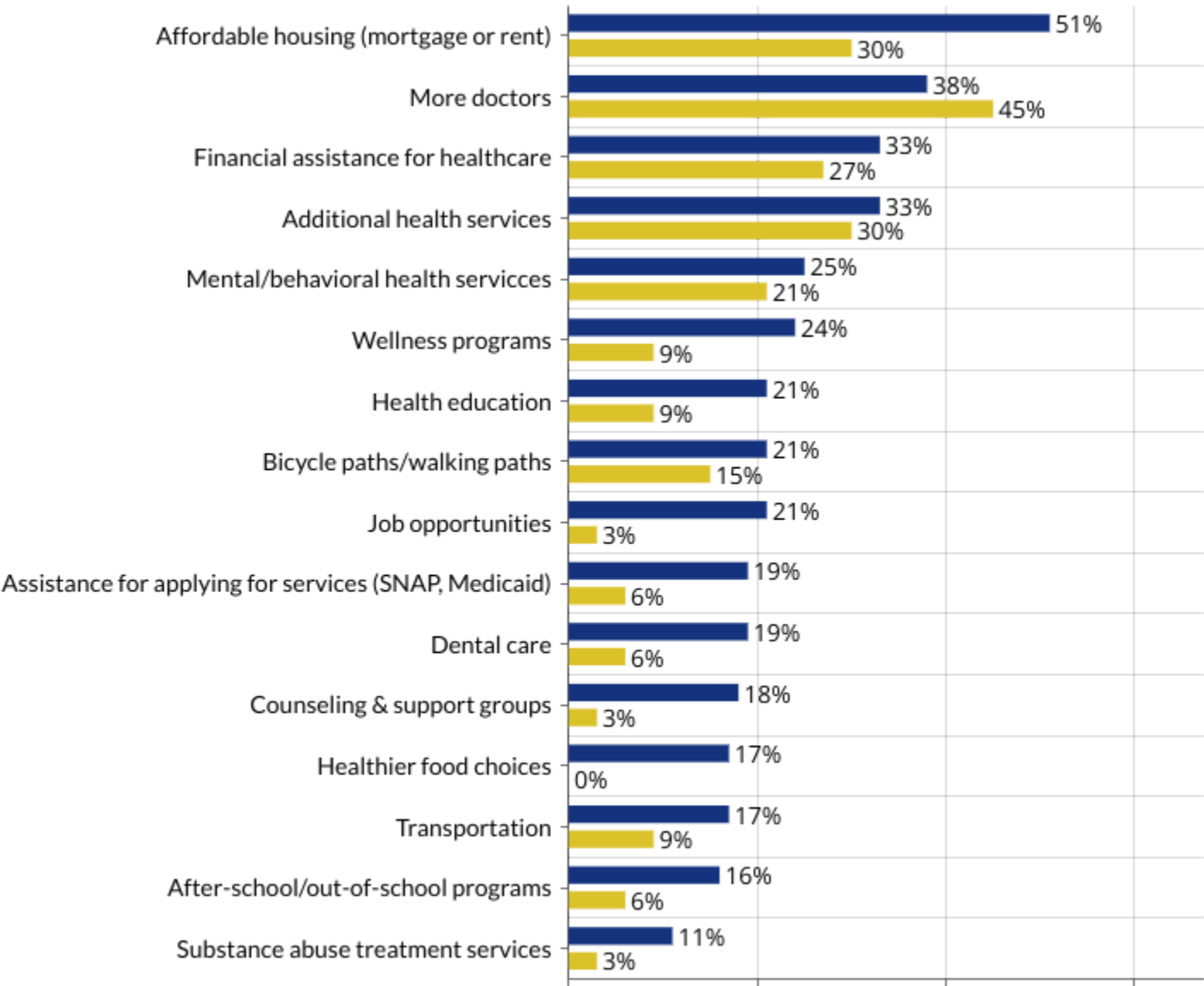
Marco Island Top 5 Responses

- 1. More doctors
- 2. Affordable housing (mortgage or rent)
- 3. Additional health services
- 4. Financial assistance for healthcare
- 5. Mental/behavioral health services



Collier County Top 5 Responses

- 1. Affordable housing (mortgage or rent)
- 2. More doctors
- 3. Financial assistance for healthcare
- 4. Additional health services
- 5. Mental/behavioral health services



Source: Health Planning Council of Southwest Florida

Ranking of Community Priorities

As part of the community health survey, participants were asked to prioritize 10 healthcare-related areas. The 10 public health categories were ranked by their order of importance as perceived by Marco Island and Collier County residents. The top five priorities are the primary focus of the local public health system's efforts.

Marco Island



Collier County



Source: Health Planning Council of Southwest Florida



2025 Community Survey, Marco Island

Prepared by the Health Planning Council of Southwest Florida, Inc.

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Website: Hpcswf.com