

# Alexander County Public Health

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## COMMUNITY HEALTH ASSESSMENT

— 2018 —



TABLE OF CONTENTS

Executive Summary.....3-6

Background and Introduction.....7

Community Profile.....8-11

    County Overview.....8

    Population Trends.....9

    Education.....10

    Unemployment.....10

    Poverty.....11

    Access to Health Care.....11

    Environmental Issues.....11

Areas of Success.....12-13

    Cardiovascular and Heart Disease.....12

    Colorectal Cancer.....12

    Teen Pregnancy.....13

    Preterm and Low Birthweight.....13

Areas of Concern.....14

    Intentional Self-Harm (Suicide).....14

    Diabetes.....14

    Infant Deaths.....14

At-Risk Populations.....15

Mortality and Morbidity Information.....16-20

    Overview.....17

    Cancer.....18-19

    Diseases of the Heart.....19

    Overweight/Obesity.....20

    Physical Activity.....20

Health Data Collection Process.....21-22

    Respondent Demographic Data.....21-22

Priority Selection.....23

Community Priorities.....24-26

    Mental Health .....24

    Substance Abuse.....25

    Healthy Lifestyles.....26

Acknowledgments.....27

Appendix A- CHA Community Survey Results.....28-68

## EXECUTIVE SUMMARY

### VISION STATEMENT

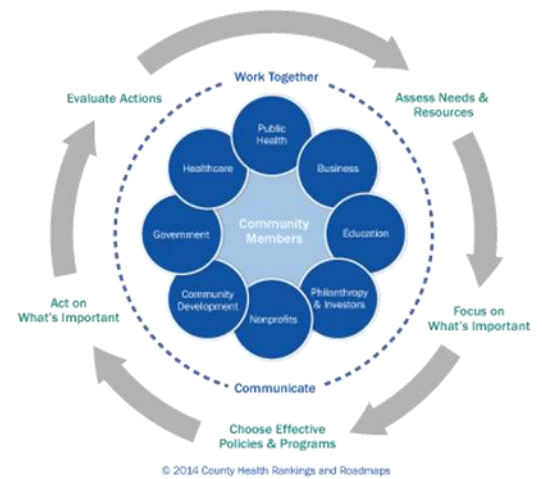
The mission for the Alexander County Health Department is to prevent, promote, and protect the health of all communities within Alexander County. In the practice of public health, the health of the population is monitored and evaluated by examining key indicators such as leading causes of death, access to health care, and health trends such as physical activity. Every four years, the Alexander County Health Department conducts a state-developed process known as the community health assessment (CHA). Findings from the CHA are used by the Health Department to lead strategic planning and to guide collaborative community action addressing identified priority issues. The CHA is also used to meet the requirements for state accreditation of local health departments.

The 2018 Community Health Assessment is designed to:

- Show the systematic collection, assembly, analysis, and dissemination of information about health in Alexander County.
- Evaluate the quality of life in Alexander County with an emphasis on health care.
- Identify trends in chronic diseases, causes of death, and high-risk behaviors.
- Define Alexander County’s health assets, needs, and priorities.

### LEADERSHIP AND PARTNERSHIP

The Alexander County Health Department guided this process using the Population Health Model. Alexander County Public Health is not the only responsible party for improved health outcomes in this community. Improving health is a collaborative process. With no hospital within Alexander County, the CHA is conducted by the Alexander County Health Department. However, the Health Department works in tangent with a variety of community agencies in providing care and services to residents of Alexander County. The Alexander County Health Department did not receive support from a regional community health initiative or privately contracted vendor to conduct the 2018 CHA.



Partnerships	Number of Partners
Public Health Agency	1
Hospital/ Health Care System	0
Healthcare Provider(s)- other than behavioral health	7
Behavioral Healthcare Provider(s)	2
Dental Health Provider(s)	6
EMS Provider	1
Pharmacies	7

Community Organizations- advocacy, charitable, NGO	10
Business(s)- employers, not organizations	430
Educational Institution(s)- colleges, universities	1
Public School System	1
Media/ Communication Outlet(s)	3
Public Member(s)	25
Other- specify	4- Chiropractors 6- Veterinarians

To prepare this Community Health Assessment, the Alexander County Health Department collaborated with representatives from Alexander County DSS, Alexander County School System, Alexander County Cooperative Extension, Alexander County Emergency Management, and citizens from the community. Once the Healthy Alexandrians Committee Members chose the focus areas, the Board of Health approved them.

*Healthy Alexandrians Committee Members*

Alexander County DSS

Patricia Baker

Alexander County Schools

Jennifer Hefner

Nikki McClain

Alexander County Cooperative Extension

Der Holcomb

Alexander County Emergency Management

Russell Greene

Citizens

Dale Clary

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Billie Walker

*Board of Health Members*

Dr. Jennifer Hull- Chair

Dr. Jeff Peal- Vice Chair

Janet Bowles

Macy Jones

Betty Long

Dr. Thomas Rider

Phillip Sprinkle

Scott Westmoreland, P.E.

Dr. Richard Williams

Larry Yoder

## DATA COLLECTION

To build a comprehensive assessment, the Health Department utilized both primary (collected directly) and secondary (data provided by other identified organizations) sources to compile data.

- Primary data collection tool- the 2017-2018 Alexander County Community Health Assessment Survey distributed to the public in both paper and web-based formats from September 2017 until January 2018.
- Electronic and paper versions in both English and Spanish were used to facilitate broad participation.
- A link to the 2017-2018 Alexander County Community Health Assessment Survey posted on the Alexander County Health Department website, Facebook page, and sent via email to all County employees and community partners. Paper versions were distributed at the Health Department, and local community events and health fairs. Five hundred seven responses collected through these formats, with a 95% completion rate.
- Secondary data gathered from local, state, and national sources were also collected from outside organizations and were used in assessing the severity of health issues in the county.

## KEY FINDINGS

In February 2018, members of the Healthy Alexandrian Task Force reviewed indicators specific to the following seven areas:

1. Chronic Diseases
2. Substance Abuse
3. Mental Health
4. Access to Health Care
5. Healthy Lifestyle Choices
6. Leading causes of death
7. Responsible Sexual Behavior

Members next reviewed the data obtained from the 2017-2018 Alexander County Community Health Assessment Survey and ranked them using the following criteria: severity, magnitude, urgency, and intervention effectiveness. Survey respondents made recommendations for the top ten health issues: cancer, obesity/overweight, heart disease, diabetes, depression/mental health, dental health, lack of physical activity, access to care, availability to healthy food, and Alzheimer's disease.

## HEALTH PRIORITIES

Participants of the final Priority Setting meeting in February 2018 made recommendations for the top three health issues to address in the next four years: Mental Health, Substance Abuse, and Healthy Lifestyles. The 2018 CHA Priorities were similar to the ones in 2014. The Healthy Alexandrians Task Force decided that these were still the most important and needed continued efforts. The next steps for each focus area are as follows:

### *Mental Health*

- Use the grant to build a behavioral health program at the Alexander County Health Department.
- Increase education programs for suicide prevention.
- Increase public awareness of existing counseling resources for mental health.
- Lobby for and seek additional funds for mental health care in the county.

### *Substance Abuse*

- Increase/maintain substance abuse prevention programs in Alexander County schools.
- Create a public awareness/educational campaign to stress that substance abuse is an equal-opportunity disease and is a gateway to many risk-taking behaviors and chronic health problems.
- Educate the public on proper disposal sites of unused and/or expired medication.
- Use available grant funds to build harm reduction in response to the opioid crisis in the county.
- Lobby for and seek additional funds for residents affected by substance abuse in the county.

### *Healthy Lifestyles*

- Create public awareness/prevention campaigns to combat high obesity, cancer, and heart disease rates.
- Maintaining partnerships with other local agencies with significant community outreach to encourage healthier lifestyles.
- Synchronize CHA efforts with other strategic efforts in the city and county to establish and promote parks and recreational activities.

This report is available for download on the Alexander County Health Department website at [www.AlexanderHealth.org](http://www.AlexanderHealth.org), or by visiting the Health Department located at 338 1st Avenue SW in Taylorsville, NC.

Respectfully Submitted,

*Leeanne Whisnant, RN, BSN, MS*

Alexander County Health Director



## BACKGROUND AND INTRODUCTION

Every four years the Alexander County Health Department completes a comprehensive Community Health Assessment as required by the North Carolina Department of Health and Human Services. This assessment allows us to gather information used to better understand the community's health concerns, document health status trends, as well as to catalyze developing strategies to assess the community health problems.

Community Health Assessments are the foundation for improving and promoting the health of community members. The role of community assessment is to identify factors that affect the health of a population and to determine the availability of resources within the community to adequately address these factors. In 2018, the process consisted of three primary steps: survey the community, analyze the data collected, and select health priorities. While the county Health Department is the lead agency in conducting the assessment, existing community partnerships are utilized throughout the process to ensure the evaluation truly reflects the community's needs. The Healthy Alexandrians Task Force is commissioned with analyzing and determining health priorities for Alexander County. The task force is comprised of a mixture of government agencies, private industry leaders, the non-profit community, and interested community members who are concerned with the ongoing health needs of our community. These individuals, along with the Alexander County Board of Health, examined the survey results and health data to make a final determination of health priorities for the next four years.

Statistical data presented in the report represents the most recent information available at the time the assessment was completed. Health survey results vary and represent the opinion of the person completing the survey.



Alexander County Health Department

### From the cover

Top Left: A golfer enjoying the green on the Brushy Mountain Golf Course. (Photo courtesy of The Taylorsville Times.)

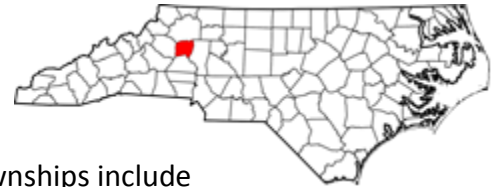
Top Right: Apples from one of the local orchards. (Photo courtesy of The Taylorsville Times)

Bottom: After the completion of the Oxford Dam in 1927, Lake Hickory covers 4,223 acres and provides Alexander County residents with opportunities for fishing, boating, and other watersport recreation activities.

COMMUNITY PROFILE

COUNTY OVERVIEW

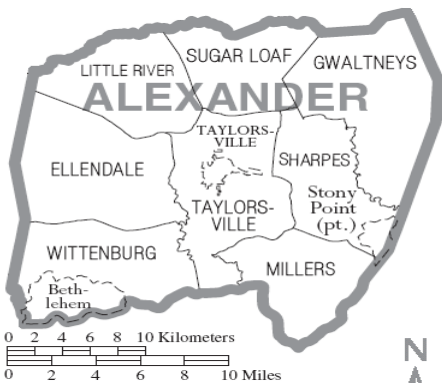
Alexander County, North Carolina is located in the scenic foothills of North Carolina’s Appalachian Mountains. Bordered on the south by the Catawba River, the county offers numerous recreational activities, upscale and moderate housing, and opportunities for industrial and commercial operations. Taylorsville, incorporated in 1851, is the county seat. Other townships include Bethlehem, Ellendale, Wittenburg, Stony Point, Hiddenite, Sugar Loaf, and Vashti.



The county is comprised of 263 square miles, two-thirds of which is covered in farmland, with an average farm size of 90 acres producing commodities such as poultry, dairy, tobacco, apples, forestry products, grain crops, and beef cattle. Other primary industries include furniture, textiles, education, health services, professional, business services, trade, transportation, and utilities.

Alexander County offers a variety of outdoor attractions for citizens and visitors to enjoy. Whether it is hiking or rock climbing at Rocky Face Mountain Recreational Area, gem mining at the Emerald Hollow Mine in Hiddenite where the largest Emerald in North America was found (the stone is now housed in the North Carolina Museum of Natural Sciences), swimming at East Park Pool, running in one of the county’s numerous road race events, boating or fishing on Lake Hickory, or golfing at Brushy Mountain Golf Course, Alexander County has a lot to offer. The community strives to offer its citizens and visitors with numerous opportunities to remain active and fit.

Alexander County... the “Gem” of North Carolina.



Rocky Face Mountain, Alexander County



POPULATION TRENDS

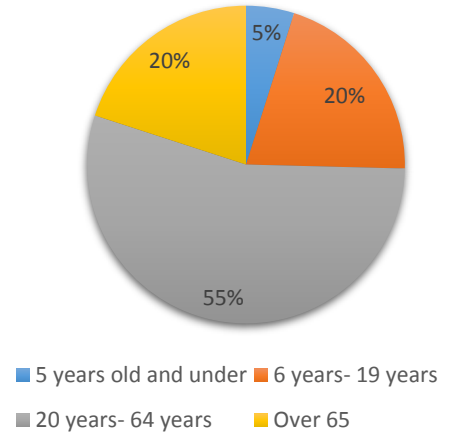
The total estimated population for Alexander County for 2018 is 37,192, which is a slight increase from the recorded 36,930 in 2014 Census data. The NC State Office of Budget and Management projects the county population to be 38,405 in 2020 and 38,999 in 2030.

POPULATION DEMOGRAPHICS

*Distribution of Age*

	Alexander County	North Carolina
5 years old and under	4.9%	6%
6 years- 19 years	20.5%	22.7%
20 years- 64 years	54.6%	55.8%
Over 65	20%	15.5%

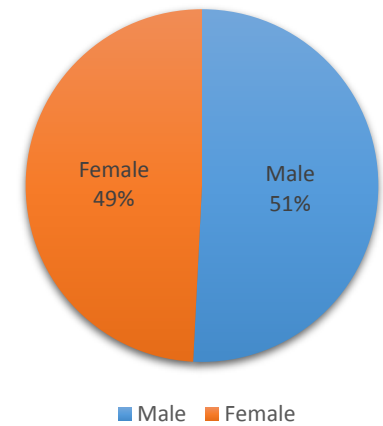
**Distribution of Age (Alexander County, 2018)**



*Gender Distribution*

	Alexander County	North Carolina
Male	50.8%	48.6%
Female	49.2%	51.4%

**Gender Distribution (Alexander County, 2018)**

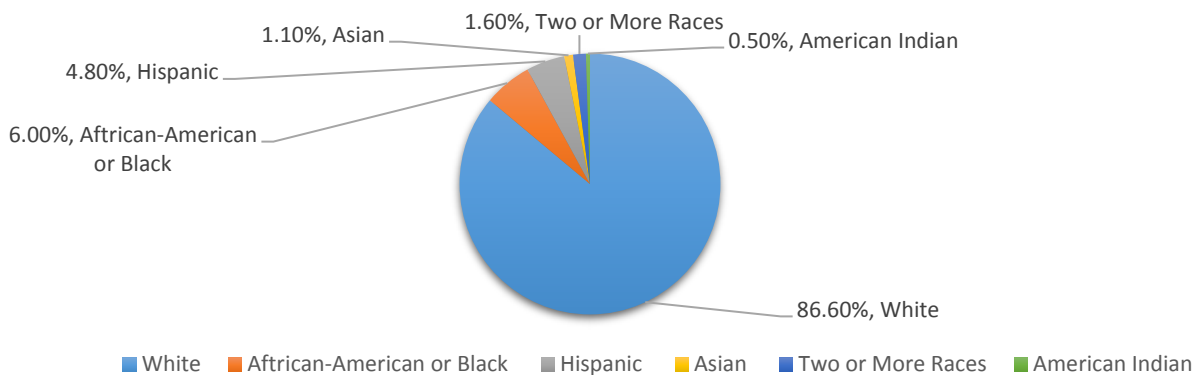


*Distribution of Race*

	Alexander County	North Carolina
White	86.6%	63.1%
African-American or Black	6.0%	22.2%
Latino	4.8%	9.5%
Asian	1.1%	3.1%
Two or More Races	1.6%	2.2%
Native American	0.5%	1.6%
Pacific Islander	0	0.1%

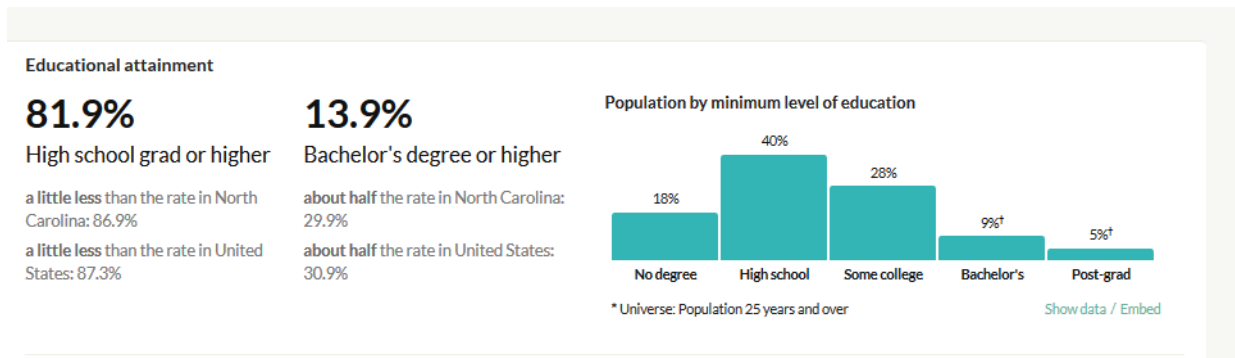
Source: US Census Bureau

**Distribution of Race (Alexander County, 2017)**



Education

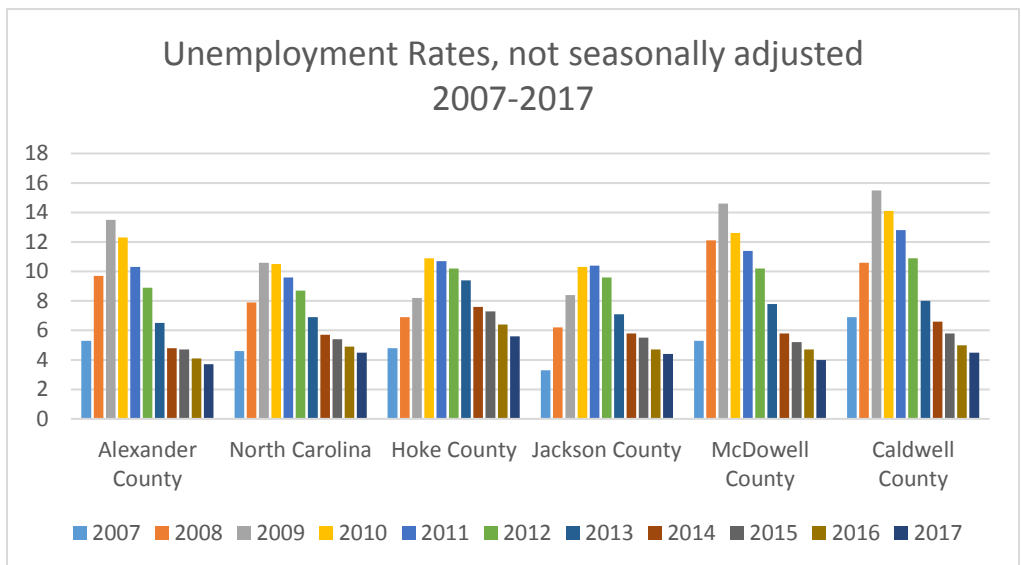
- There are eleven public schools throughout the county. The federally funded, income-based Head Start program serves 100 children throughout Alexander County. Wittenburg Elementary and Stony Point Elementary both house three Head Start classrooms. Alexander County also received the state-funded, NC Pre-k program serving 45 children at three sites Taylorsville, Bethlehem, and Hiddenite. In collaboration with Alexander Central High School and CVCC, there is the new Alexander Early College program for high school students at the CVCC satellite campus in Alexander County. Alexander Central High School also has an alternative learning program, Student Success. CVCC satellite campus also provides classes for adult learners. Alexander Christian Academy, a private institution, has two locations in the Hiddenite and Bethlehem areas. Millersville Christian Academy opened in fall 2018 and is located in Taylorsville.
- The Alexander County high school graduation rate for the population 25 years and older is 80.7%, compared to 85.8% for the state. (Source: US Census)
- The average SAT score in 2016 was 1459 compared to the state average of 1485; both are on a 2400 scale. (Source NC Department of Public Instruction)



Source: US Census Data

Unemployment

Alexander County was dramatically affected by the economic recession of the late 2000s. Fortunately, diligent work by community leaders has helped to lower the unemployment rate since the 2014 CHA. The unemployment rate that was reported in the 2014 Alexander County CHA was 7.6%; this has declined to 3.7%. The counties included in the graph below are the state required peer counties- Hoke, Jackson, and McDowell. Our committee has also chosen to look at Caldwell County



data as one of our contingent counties. Even though Alexander County struggled like the rest of the nation, it fared a lot better than some of our peer counties. (Source NC Commerce and US Census)

*Poverty*

Poverty and health are interrelated. Poverty is considered a key determinant of health because families and individuals who struggle financially often struggle with poor environmental conditions, low education attainment, financial barriers in accessing health services, and a lack of resources necessary to maintain good health status.

- In 2017, 14.7% of people in Alexander County reported incomes below the United States poverty level. North Carolina’s poverty level is nearly the same at 16.2%. (Source: Census Reporter)
- In 2010 the Patient Protection and Affordable Care Act was passed and since the number of uninsured has decreased. The same is true in Alexander County with a decrease of 8% from 2010. However, 12.9% of Alexander County still lacks health insurance coverage. (Source: US Census Bureau- SAHIE)
- Education is also an indicator of poverty because studies have shown that those with college degrees often have higher paying jobs and are more educated on healthy lifestyles. As of 2017, 60% of people in Alexander County only have a high school diploma or less. (Source: Town Charts)

*Access to Health Care*

Alexander County is a medically underserved community. There exists a severe shortage of medical care providers in all medical areas. The ratio of health care providers to citizens in Alexander County compared to the state average is listed. There is no hospital within the county, and only one urgent care serves after hour health needs. (Source: UNC Sheps Center for Healthcare Provider Statistics)

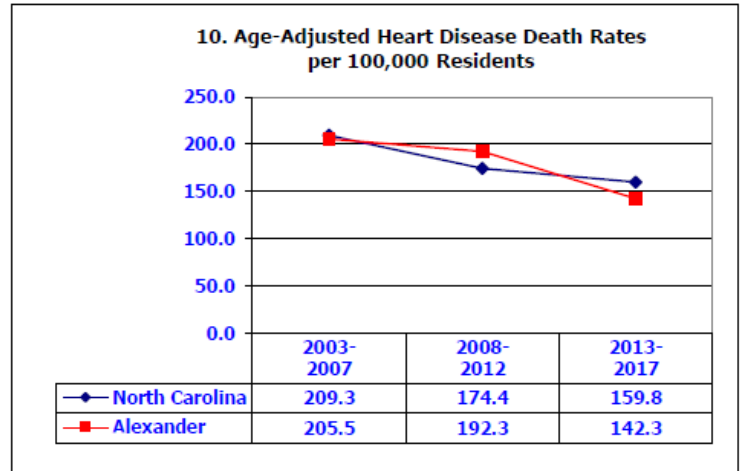
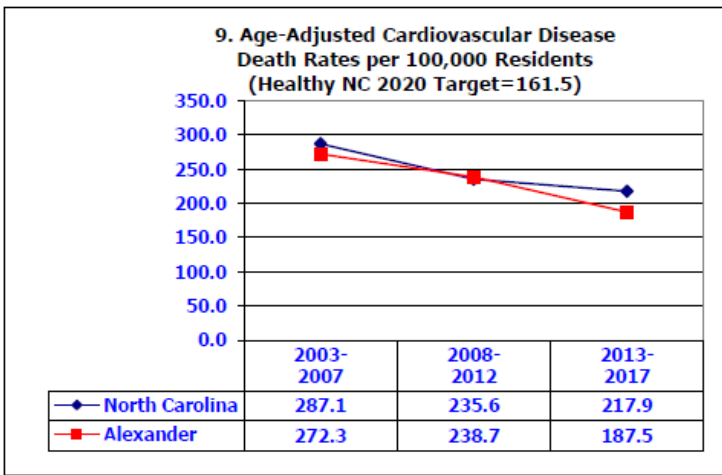
2017 Health Professionals	(per 10,000 population)	
	Alexander County	North Carolina
Primary Care Physicians	3.12	6.97
Physician Assistants	1.56	5.87
Nurse Practitioners	1.82	6.47
Dentists	2.08	4.98
Pharmacists	4.96	11.4
Registered Nurses	34.9	101
Psychologists	0	2.2
Optometrists	.26	1.14
Physical Therapy	1.56	6.64
Podiatrists	0	0.30
Occupational Therapists	1.3	3.36

*Environmental Issues*

Radon is a gas that is formed when uranium decays in the ground. When homes or other buildings are built on top of these deposits, radon can be pulled into the home and concentrate within the home at dangerous levels. Radon is the leading cause of lung cancer in the United States, among non-smokers. EPA estimates that 21,000 lung cancer deaths each year are attributed to radon exposure. There have been 93 radon tests conducted throughout Alexander County since 1996. The highest level found in all houses tested was 12.3 pCi/L. It is recommended that a home be mitigated if it has an average radon level of 4 pCi/L or more. Alexander County has many deaths attributed to lung cancer and although the area does have a high rate of smoking some of those lung cancer deaths among non-smokers may be related to radon exposure. (Source: NC Radon)

AREAS OF SUCCESS

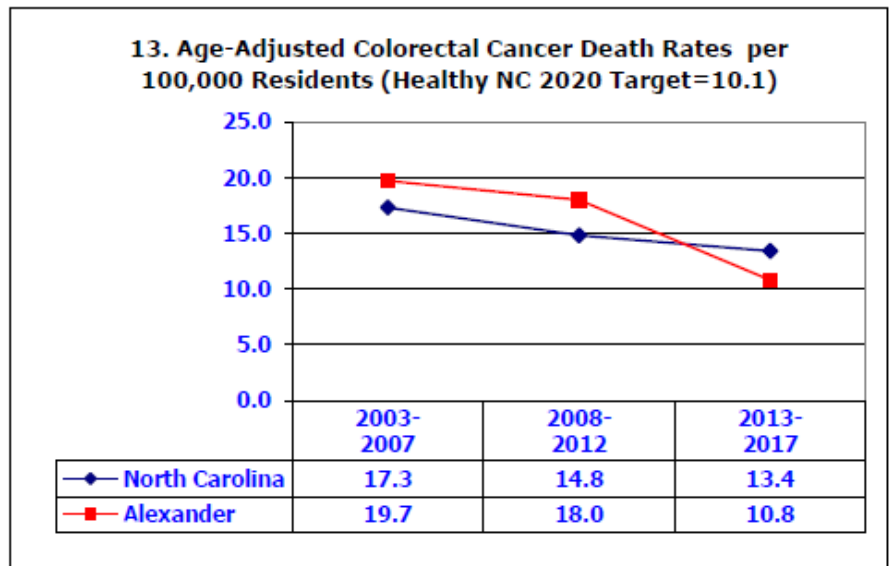
CARDIOVASCULAR AND HEART DISEASE



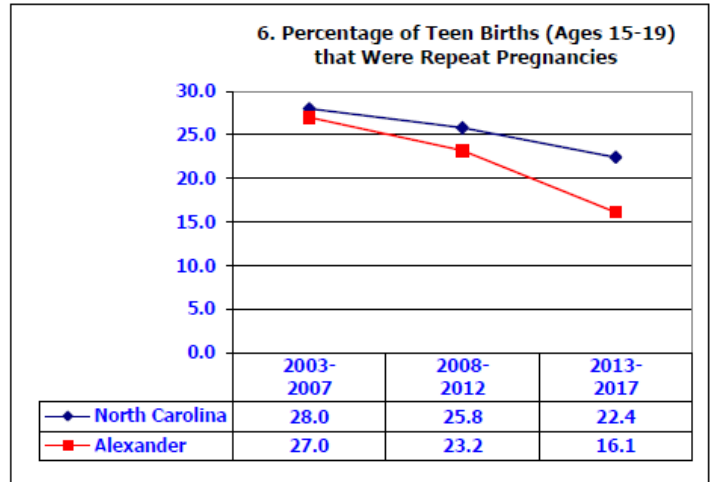
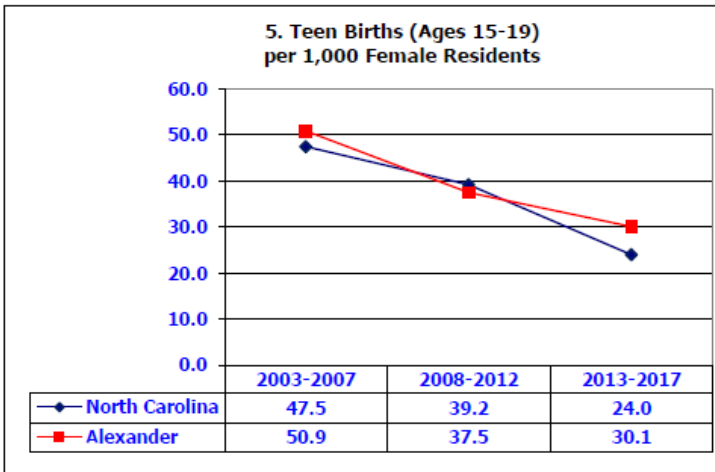
Diseases of the heart have been one of the top three leading causes of death in Alexander County for over a decade. Even though cardiovascular-related deaths remains a top three leading cause of death, the overall rates are decreasing in Alexander County. Physical inactivity, poor diet, and smoking are all contributors to developing heart disease, and the Health Department will continue to focus on healthy lifestyles moving forward. (Source: NC Center for Health Statistics)

COLORECTAL CANCER

Alexander County has seen a decrease in colorectal cancer death rates. Getting a colonoscopy as recommended will decrease colorectal cancer deaths. According to the American Cancer Society, “colorectal cancer death rates declined 53% from 1970 to 2016 among men and women because of increased screening and improvements in treatment. However, in adults younger than age 55, new cases of colorectal cancer have increased by almost 2% per year since the mid-1990s.” (Source: NC Center for Health Statistics)



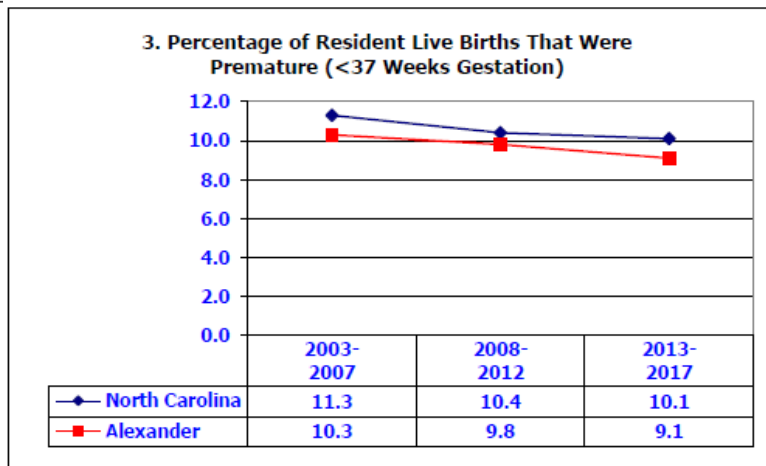
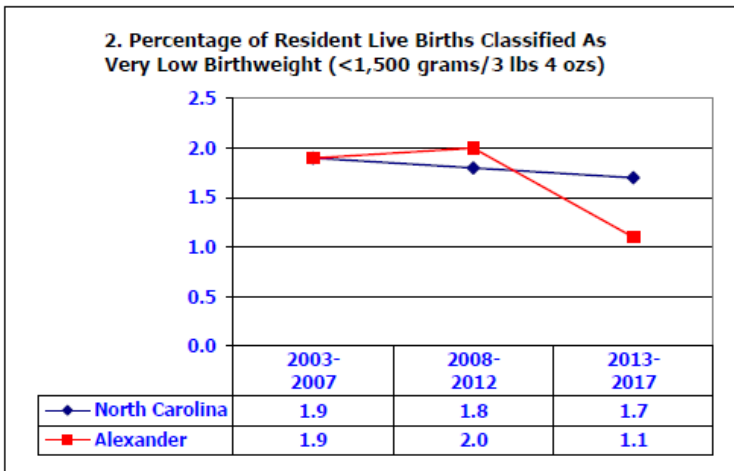
TEEN PREGNANCY



According to the CDC, teen pregnancy rates have decreased nationally in the past few years. Even though there has been a decline, the U.S. teen pregnancy rate is substantially higher than in other western industrialized nations. The drop in teen pregnancy rates in both Alexander County and across the nation could be the result of an increased focused on sexual education that covers all forms of contraception. The decline may also be related to more teens who are sexually active using birth control. (Source: CDC; NC Center for Health Statistics)

In collaboration with Alexander Central High School, the Health Department has worked to educate and promote the freshman health class on Family Planning Services offered here.

PRETERM AND LOW BIRTHWEIGHT



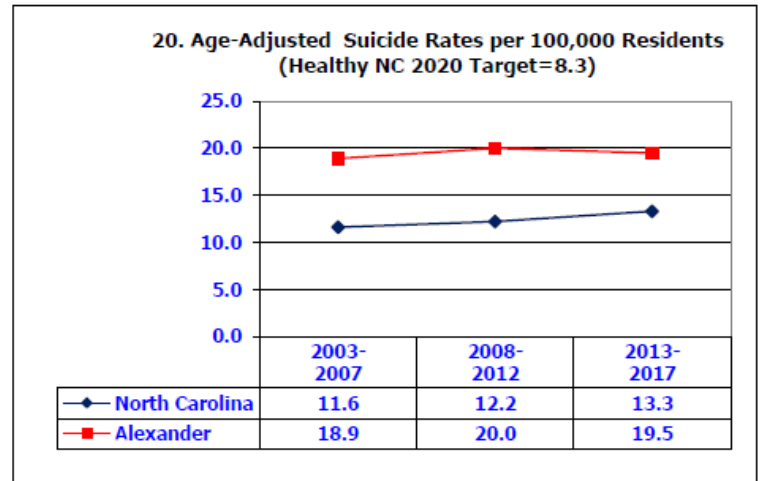
Alexander County has seen improvements in pregnancy-related outcomes. The community has seen a decrease in both very low birth weight and premature births. First-trimester care is vital to maintaining a healthy pregnancy for mom and baby. Seventy-eight percent of Alexander County women who gave birth in 2017 reported receiving care in the first trimester. (Source: NC Center for Health Statistics)

The Health Department offers maternity care to all expectant mothers regardless of income status.

## AREAS OF CONCERN

### INTENTIONAL SELF-HARM (SUICIDE)

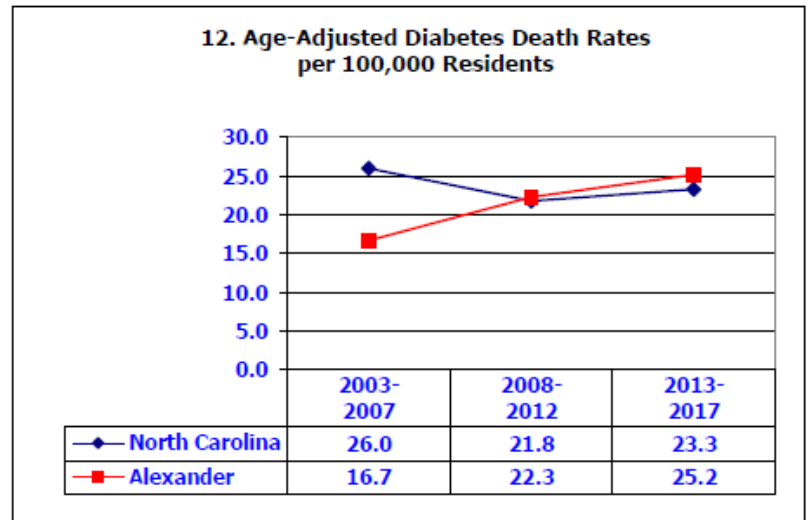
The suicide rate in Alexander County during the years 2013-2017 was 19.5 deaths per 100,000 residents, making it one of the top 10 causes of death locally. Even though this is a slight decrease from the previous years, it is still a concern because it is still significantly higher than the state average. Untreated mental illness (including depression, bipolar disorder, schizophrenia, and others) is a leading cause for the majority of suicides. An overall lack of mental health resources exists in the county to address the needs of our citizens. (Source: NC Center for Health Statistics)



The suicide rate, along with other mental health issues is addressed in the mental health action plan.

### DIABETES

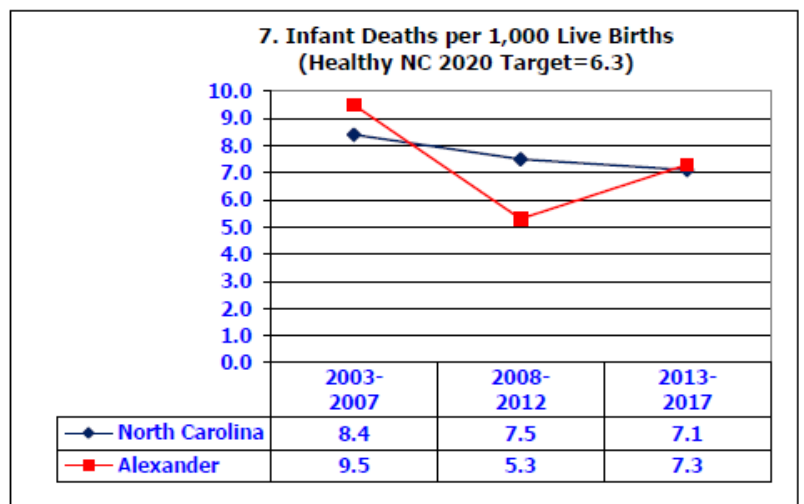
For over a decade diabetes has been in the top ten causes of death in Alexander County. However, the diabetes death rate has now soared past the state average. The risk factors for developing diabetes is a combination of lifestyle choices and genetics. Family history, age, or ethnicity cannot be changed but diet, physical activity, and weight can. (Source: NC Center for Health Statistics)



The increase in diabetes death rates will be addressed in the health action plan.

### INFANT DEATHS

According to this data trend, there has been a sharp increase in infant deaths in Alexander County. After reviewing this data, the health department cannot determine any single true known cause for this increase in rates. However, the health department has continued our outreach and work with pregnant mothers on prenatal care and child care. The health department also works together with the Partnership for Children- Alexander County to hold an annual Safe Sleep Campaign. The focus of this campaign encourages parents to lay infants in a supine position to reduce the risk of Sudden Infant Death Syndrome. The Health Department also collaborates to educate the childcare community. (Source: NC Center for Health Statistics)



## AT-RISK POPULATIONS

Numerous documents and agencies define at-risk populations using different criteria. For the Community Health Assessment, the planning group followed the definition outlined by the US Department of Health and Human Services. Their definition states that at-risk populations include those that may have additional needs in one or more of the following functional areas: communication, medical care, maintaining independence, supervision, and transportation. This group also includes children, senior citizens, and pregnant women, as well as individuals who may need additional response assistance to include those who have disabilities, live in institutionalized settings, are from diverse cultures, have limited English proficiency or are non-English speaking, are transportation disadvantaged, have chronic medical disorders, and have a pharmacological dependency.

After collecting primary and secondary data, the planning group identified the following sectors of our population that may be at risk of poor health outcomes in Alexander County:

- Adults and children in need of mental health services-** Limited mental health services are available in Alexander County. Those individuals who struggle with mental health have inadequate resources to effectively manage their mental health needs without traveling out of the county.
- Adults and children in need of substance abuse treatment-** Only one addiction treatment center operates in Alexander County. Dr. Bobby Kearney opened Addiction Recovery Medical Services (pictured), outpatient maintenance therapy and medication-assisted treatment for those with drug and/or alcohol dependence; they also provide individual, group, and family counseling services. Individuals who need in-patient substance abuse treatment will have to go out of the county.
- Individuals with limited transportation resources-** With no hospital located within the county, and limited access to specialized medical services, those requiring specialized medical care must often travel out-of-county to receive services. With limited for-hire transportation options available, these individuals must rely on friends or family or services provided by Greenway Public Transportation. A new transportation service The Bridge Community has recently begun operating. In 2014, Urgent Care of Mountain View opened the first true after-hours urgent care facility in Taylorsville. This facility provides our citizens with the opportunity to receive care for acute illnesses and injuries after hours and on weekends without having to leave the county.
- Low-income/Uninsured-** There are currently no “free medical clinics” located in Alexander County. The Health Department can see those individuals without health insurance needing primary care services through the Rural Health Grant. However, if those individuals require more in-depth medical care for chronic diseases, they will be referred to a Federally Qualified Rural Health Care Center in an adjacent county, and transportation issues persist and hinder people from seeking care.
- Non-English speaking-** Accessing health care can be a challenge for native-English speaking citizens. Being unable to speak or fully comprehend English can further complicate accessing medical care. The health department currently has three staff members that can offer interpreting services plus dial-in services. However, if the Health Department has to make a referral, it cannot guarantee that the other providers will offer interpreting services, which may prevent non-English speaking patients from continuing care.



## MORTALITY AND MORBIDITY INFORMATION

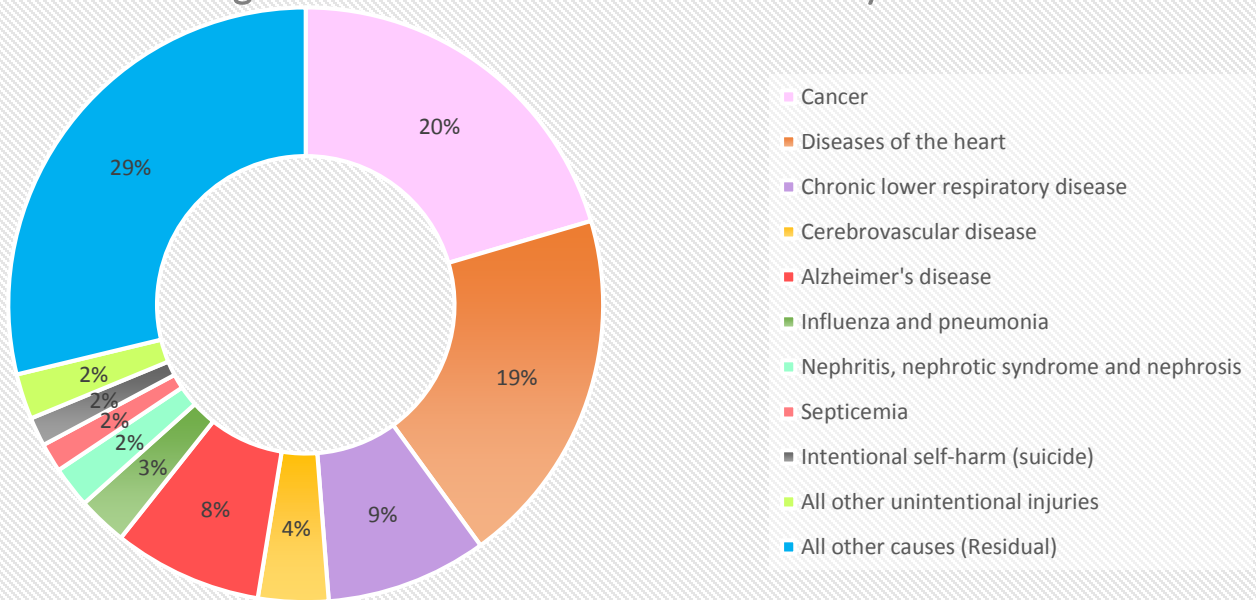
The NC Center for Health Statistics reports the top ten causes of death for each county annually. Alexander County's top ten causes of death (Figure 1) shows that cancer and diseases of the heart are once again ranked highest. This has been consistent for a number of years.

### Trends in Mortality- Alexander County (Figure 1)

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Cancer	78	72	72	70	77	102	72	80	74	88	91
Diseases of the heart	69	85	77	70	89	70	66	76	55	66	87
Chronic lower respiratory disease	24	22	25	22	34	27	30	34	45	32	39
Cerebrovascular disease	15	17	14	19	9	11	9	13	22	18	17
Alzheimer's disease	NA	8	7	15	18	26	16	15	33	21	36
All other unintentional injuries	17	12	14	14	18	9	14	15	18	11	11
Influenza and pneumonia	8	14	8	11	9	7	5	12	NA	9	12
Nephritis, nephrotic syndrome and nephrosis	7	3	14	10	7	NA	NA	NA	10	8	10
Septicemia	NA	NA	NA	10	NA	NA	NA	10	10	NA	7
Diabetes mellitus	7	8	6	NA	10	15	13	16	13	16	NA
Intentional self-harm (suicide)	4	8	11	NA	7	9	7	NA	NA	11	7
Motor vehicle injuries	8	7	6	9	NA	9	9	6	9	NA	NA
Chronic liver disease and cirrhosis	NA	NA	6	NA	NA	NA	NA	6	NA	NA	NA
All other causes (Residual)	88	84	84	87	84	68	100	92	115	98	128
Total Deaths—All Causes	320	333	333	337	362	351	341	375	404	378	445



### Leading Causes of Death in Alexander County- 2017



## OVERVIEW

The three leading causes of death has not changed over time they may vary in which spot they hold, but cancer, diseases of the heart, and chronic lower respiratory diseases are always the top three. In 2017, the data was no different. The leading cause of death in Alexander County was cancer, followed by diseases of the heart then chronic lower respiratory diseases. Noted in the 2014 CHA the deaths associated with Alzheimer's disease has shown an upward trend since 2010. However, Alzheimer's disease saw a significant spike in 2017. Cancer and diseases of the heart have been the leading causes of death in Alexander County for many years as indicated from the data in Figure 1 dating back to 2010. Cancer, diseases of the heart, and chronic lower respiratory diseases are also the 2017 top three leading causes of death in North Carolina.

### Positive Trends

- Motor vehicle-related deaths did not make the top ten leading causes of death for Alexander County in 2016 and 2017.

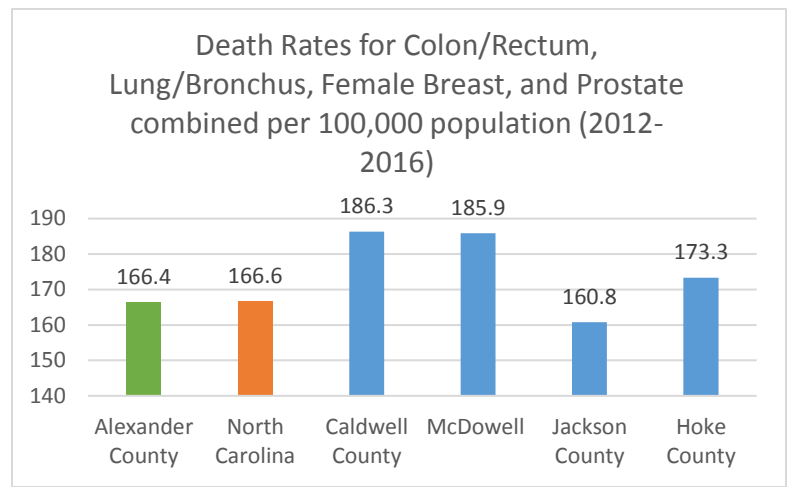
### Areas of Improvement

- Cancer and heart disease remain the leading causes of death.
- We see a drop in cerebrovascular disease-related deaths from 2011 to 2013. However, in the past couple of years, those numbers have again risen dramatically to levels comparable to what they were before 2011.
- As previously noted Alzheimer's disease has increased dramatically over the past decade. Alexander County has an aging population, and that may be a contributing factor. We feel it is also important to point out that diabetes-related deaths have also slowly started to increase (before 2017).
- Suicide continues to be a significant issue in the county.

## CANCER

Cancer is the leading cause of death in Alexander County, as it is in North Carolina. Nationally and locally, cancer mortality rates have gradually been declining since the mid-1990s and continue to do so. (Source: National Cancer Institute)

- Four cancers are responsible for almost 50% of cancer deaths: colon/rectum, lung/bronchus, female breast, and prostate. Between 2012-2016, these cancers accounted for around 46% of cancer deaths in Alexander County. (NC Center for Vital Statistics)
- Risk factors for some cancers are well established such as sun exposure and skin cancer, smoking and lung cancer, human papillomavirus (HPV) and cervical cancer. While other cancer causes remain unknown. All cancers require early screenings to detect.



Source: NC Center for Health Statistics

- The prevalence rate of smoking is high in Alexander County. In 2017, the smoking rate among adults was 19%. North Carolina's average was also 19%. Whereas, the national rate was significantly less at 15.1%. (Robert Wood Johnson Foundation and CDC)
- In 2016, the Surgeon General reported on the increase in e-cigarette use among youth and young adults across the nation. This new trend is worrisome because researchers have not been able to determine the long-term health effects.

### *Risk Factors and Intervention*

- Tobacco Use: Smoking and smokeless tobacco are responsible for the majority of all cancers of the lung, trachea, bronchus, larynx, pharynx, oral cavity, and esophagus. Despite the ban on smoking in public places, smoking continues to be a significant problem in the county. Tobacco use is still the leading cause of preventable death in the United States.
- In the Community Health Assessment Survey, we asked if survey takers used e-cigarettes/ vaping devices. Of the 473 people that answered the question, 21 admitted to using e-cigarettes/vaping devices, which is almost 5%. Twenty-three percent responded yes to using tobacco products.

### *Nutrition and Physical Activity*

- Thirty-two percent of adults in Alexander County are considered obese. Twenty-nine percent of adults age 20 or over are not physically active. (Source: County Health Rankings and Roadmaps)
- Some forms of cancer have stronger links to overweight/obesity than others. Thirteen different forms of cancer have been associated with higher amounts of body fat those include: endometrial cancer, esophageal adenocarcinoma, gastric cardia cancer, thyroid cancer, breast cancer, gallbladder cancer, kidney cancer, liver cancer, ovarian cancer, pancreatic cancer, multiple myeloma, colorectal cancer, and meningioma. (Source: County Health Rankings and Roadmaps; National Cancer Institute)

*Vaccines*

- Certain types of cervical cancer are preventable through the use of a vaccine that is available for HPV. The Health Department is working to actively promote HPV vaccination in the county, especially among the teen/young adult population.

*Screening*

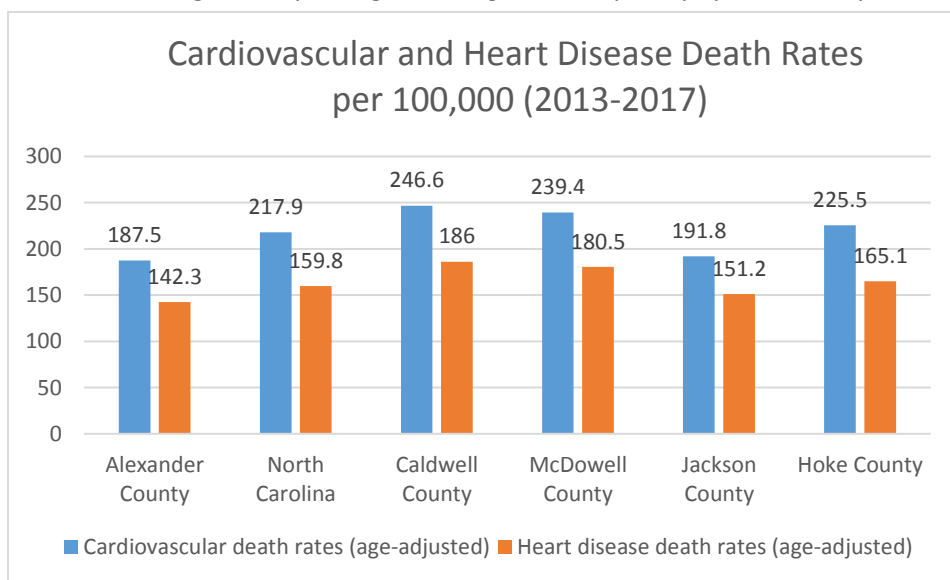
- The survivability of many cancers depends on early detection. Breast cancer is a good example of this. The stage at diagnosis is the most important factor in determining the chance of survival. Therefore, we continue to promote screenings for early detection.

**DISEASES OF THE HEART**

Heart Disease is an umbrella term for the many diseases that affect the heart. In 2017, it was the second leading cause of death in Alexander County, over the past decade we have seen a fluctuating sequence of deaths due to diseases of the heart.

- The number of deaths due to diseases of the heart in 2017 was 87, an increase from 66 in 2016, and an increase from 2014 when the number was 76. (NC Center for Health Statistics)
- Heart disease accounted for 19.6% of deaths in 2017, which was below the state average of 20.2%.
- In the CHA Survey, we asked residents of Alexander County to select the top three health concerns that are important to them, and heart disease ranked number 3. Cancer and obesity ranked higher. This was an improvement from the 2014 CHA Survey results. The 2018 survey also asked, “Does Alexander County need improvements in regards to the following issues?” We gave them various options and the top three improvements were eating well, exercise/fitness, and managing weight.
- Risk factors for heart disease include diabetes, smoking, obesity/being overweight, inadequate physical activity, not eating a healthy, well-balanced diet, elevated cholesterol, and high blood pressure. In the 2018 CHA Survey, Alexander residents reported:

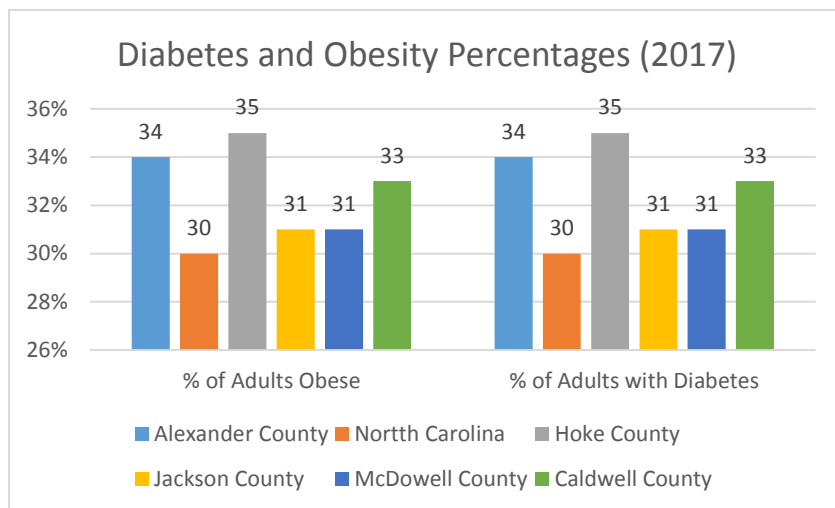
- High Blood Pressure- 30.49%
- High Cholesterol-22.94%
- Overweight/Obese- 46.55%
- Diabetes-10.87%
- No physical exercise- 66%
- Use tobacco products- 23%



Source: NC Center for Health Statistics

## OVERWEIGHT/OBESITY

According to the Center for Disease Control and Prevention, 29.6% of US adults (18 years or older) are obese. 35.2% of adults (18 years or older) in the nation are considered overweight. North Carolina has a higher prevalence rate with 31.8% of adults being obese and an additional 35% being overweight. Obesity has been linked to heart disease, stroke, type 2 diabetes, and thirteen different types of cancer, which are many of the leading causes of death. In 2016, an estimated 34% of the population in Alexander County was considered obese (BMI 30 or greater). This is well above the state average and the national average. It is also significantly higher than the 2014 CHA reported 27%.



### Risk of Overweight/Obesity in Youth

Being overweight or being/becoming obese in adolescence is also a concern in Alexander County and across the nation.

Complications due to being overweight/obese are well documented.

This could lead to developing type 2 diabetes, heart disease, cancer, stroke at a much earlier age. Possibly reducing life expectancy. In the 2018 Community Health Assessment, we asked parents about their children's health. Only thirteen percent of parents admitted that their child has five or more servings of fruits and vegetables per week. This low number may have been due to the question in the survey. Thirty percent of North Carolina's youth are considered overweight/obese. There was minimal data found for Alexander County adolescence overweight/obese. However, it was noted by the National Initiative for Children's Healthcare Quality that 19% of low-income preschoolers are considered obese.

## PHYSICAL ACTIVITY

The State of Obesity Report by Trust for America's Health and the Robert Wood Johnson Foundation stated, "Eighty percent of American adults do not meet the government's national physical activity recommendations for aerobic activity and muscle strengthening." It went on to mention that around 45% are not sufficiently active enough to achieve health benefits, despite the proven benefits of physical activity. Physical activity is crucial in maintaining a healthy lifestyle because it helps with weight control and reduces the risk for a number of chronic diseases. Inactive adults have a higher risk for health issues including heart disease, stroke, type 2 diabetes, depression, and some cancers. Physical inactivity is a problem in Alexander County as well. Twenty-six adults age 20 and over reported no leisure-time physical activity. (County Health Rankings and Roadmaps). In the 2018 CHA Survey, over 50% of respondents reported not to have engaged in regular weekly exercise for that lasted at least half an hour.

### Physical Activity in Youth

In the 2018 CHA survey, 62% of parents admitted that their child was physically active for at least an hour each day. That is a relatively high rate of children being physically active. National guidelines call for being physically active at least 60 minutes on five or more days a week.

## HEALTH DATA COLLECTION PROCESS

Residents of Alexander County were encouraged to complete a Community Health Assessment Survey from September 2017 through January 2018. The survey was available to residents in electronic and hard copy formats, was prepared in both English and Spanish, and was distributed throughout the community. The survey was distributed to Alexander County staff (for completion and distribution to their contacts), a random sample of Health Department clients, the public at various community meetings, and citizens at several health fairs throughout the county. A link to the survey was available to the public on the Health Department’s webpage as well as the Health Department social media outlets.

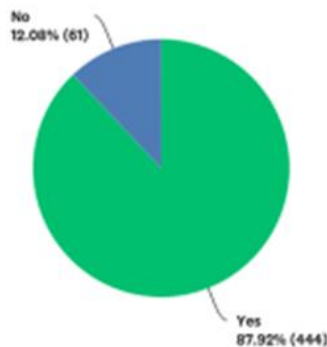
507 completed surveys were collected, analyzed, and presented to the Healthy Alexandrians Task Force and Board of Health for their consideration. All survey results were provided freely and without coercion. Survey answers were maintained anonymously, and no individually identifying information was collected or used in the assessment process.

Demographic information of respondents is included on the following page. The Alexander County Health Department works diligently each CHA cycle to survey a diverse set of individuals that accurately represents our community. A breakdown of all survey responses is available in Appendix A found later in this document.

## SURVEY RESPONDENT DEMOGRAPHIC DATA

### Q1: Do you live in Alexander County?

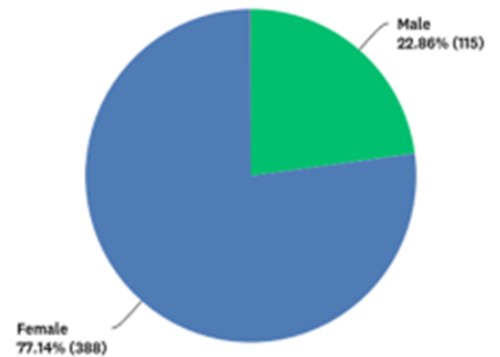
Answered: 505 Skipped: 2



Surveys were distributed to many companies within the county that may have employees from surrounding counties. This question was asked to ensure that the majority of survey respondents were residents of this county.

### Q4: What is your sex?

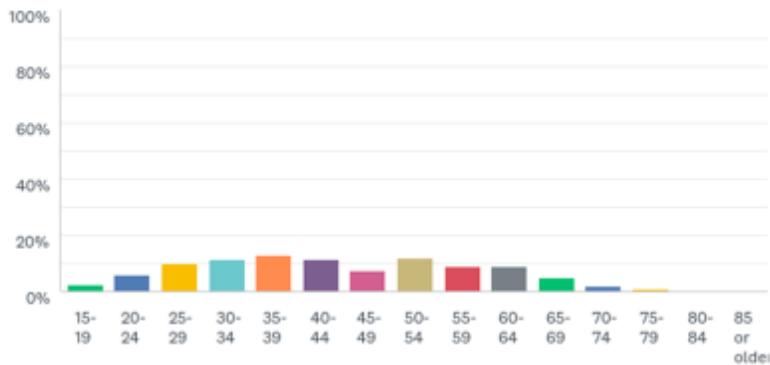
Answered: 503 Skipped: 4



In the future, the Health Department will continue to strive to obtain male input on the Community Health Assessment Survey.

**Q3: How old are you? (Mark age category)**

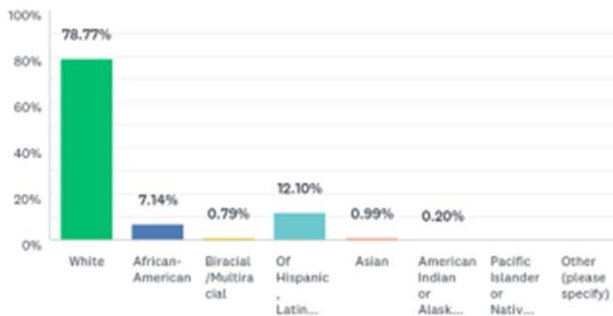
Answered: 505 Skipped: 2



There was even age distribution among survey takers for the 2017-2018 Alexander County Community Health Assessment Survey.

**Q5: Which of the following would you say is your race? (Check only one)**

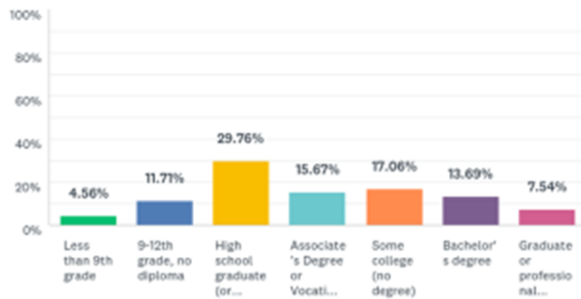
Answered: 504 Skipped: 3



The survey was offered in Spanish as well as English. This may be a contributing cause to the increased percentage of Latino/Hispanic responses.

**Q6: What is the highest level of school, college or vocational training that you have finished? (Check only one)**

Answered: 504 Skipped: 3



**Q7: What was your TOTAL household income last year, before taxes?**

Answered: 484 Skipped: 23



Health outcomes can be related to education and household income. The Health Department surveyed community members from all socioeconomic backgrounds to gauge how this affected health outcomes.

## PRIORITY SELECTION

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The priority selection process was completed through a partnership between Health Department staff, Healthy Alexandrian Task Force members, and the Alexander County Board of Health. Community opinion (primary data) information obtained from the Community Health Assessment (CHA) survey results were first collated and analyzed internally. Staff next compiled and analyzed secondary data to determine changes and trends in mortality and morbidity since the last CHA process in 2014. This information was shared with the Healthy Alexandrians membership who reviewed and voted on priority areas. The top three areas for focus identified during the February 2017 meeting were:

Mental Health

Substance Abuse

Healthy Lifestyles

The Healthy Alexandrians Task Force next worked to identify resources that were currently available in the community to address the top identified priorities. Resources and agencies to assist in the action phase for each priority area included:

**MENTAL HEALTH:** Vaya Health, RHA Mental Health, school counselors, urgent care, churches, school resource officers, probation/parole, YMCA, Health Department, Counseling and Support Associates, Barium Springs Home for Children, media outlets

**DRUG ABUSE:** Addiction Recovery Medical Services: Taylorsville, Pre-trial Release, EMS, Alexander County Substance Abuse Prevention Coalition, Health Department, local medical providers, Naloxone Program, Social Services, media outlets, Law Enforcement, RHA Mental Health, Vaya Health, school counselor, YMCA, churches, Barium Springs

**HEALTHY LIFESTYLES:** Community gardens program, walking trails, nutrition sites, Partnership for Children (Smart Start), Rocky Face Mountain Recreation Area, media outlets, YMCA, Health Department, school counselors, Social Services, school system, Cooperative Extension, Eat Smart Move More, farmers market, Shape NC Grant, media outlets Heart Disease: Eat Smart Move More, local medical providers, Health Department, school counselors, EMS, churches, media outlets, Cooperative Extension, local parks, YMCA, child care providers, Alexander County Parks and Recreation

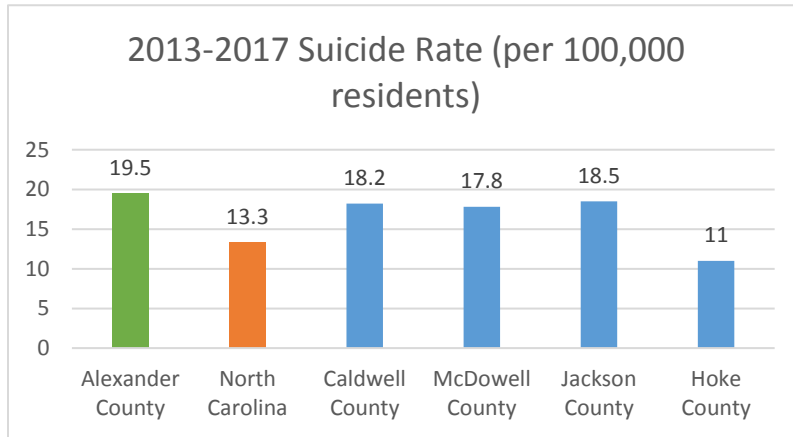
In April 2018, the Alexander County Board of Health reviewed CHA survey data, secondary data, and Healthy Alexandrians Task Force recommendations and determined the final section of CHA focus areas.

1. Mental Health
2. Substance Abuse
3. Healthy Lifestyles

## COMMUNITY PRIORITIES

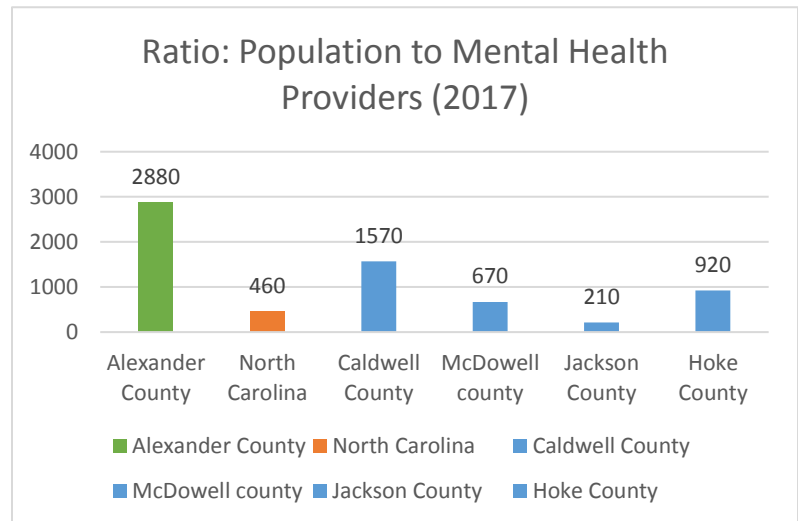
For the 2014 Community Health Assessment, the focus group chose Mental Health, Substance Abuse, and Healthy Families, which includes diabetes, obesity, heart disease, etc. as the health priorities for the next four years. Very similar Community Priorities were chosen for the 2018 Community Health Assessment. Below is the work the Health Department has done in collaboration with other community agencies to address these needs.

### MENTAL HEALTH



The first focus area selected for the 2018 Community Health Assessment was mental health. Mental health was chosen as a priority in the 2014 Community Health Assessment as well. The intentional self-harm (suicide) rate in Alexander County is currently reported at 19.5 deaths per 100,000 residents; a rate nearly double the state average and higher than any of our assigned peer counties. The Alexander County Health Department in collaboration with Vaya Health is working to combat the issues with mental health. Vaya Health

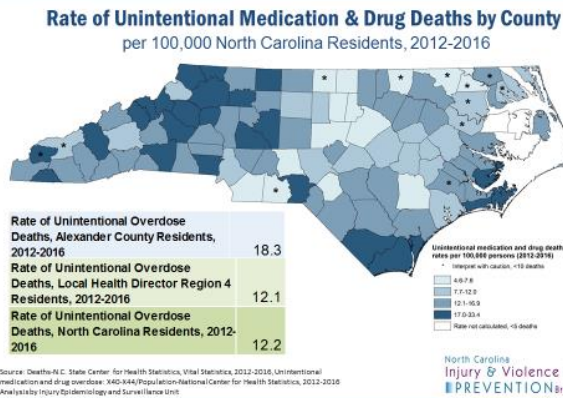
Source: NC Center for Health Statistics is the managed care organization for Alexander County, and also serves 22 other counties. The Health Department houses a kiosk located in the lobby provided by Vaya Health that patients can use freely. The kiosk allows users to take an anonymous patient health questionnaire and it will let them know if they have symptoms relating to a number of mental illnesses. If the user does present with symptoms of mental illness, then the kiosk also has a phone attached allowing the patient to call and set up a counseling appointment if needed. The kiosk sends monthly reports of the number of times it was used and the outcomes. In December 2017, the Health Department again collaborated with Vaya Health to offer Mental Health First Aid Training. This course teaches participants the skills needed to respond and assist anyone who is exhibiting signs of mental illness and substance use. The class only allows 30 participants and 27 people from various backgrounds including law enforcement and DSS participated in the training. Another Mental Health First Aid Training was hosted in May of 2018, and this focused on how to respond to Youth with behavior and mental health issues appropriately. Connecting residents to mental health services has been a focus of the Health Department. In



January of 2018, the Health Department received a grant to create an in-house behavioral health program. The Health Department is adding this program to increase services provided in the area and to decrease the ratio of residents per mental health providers. Source: County Health Rankings and Roadmaps



SUBSTANCE ABUSE



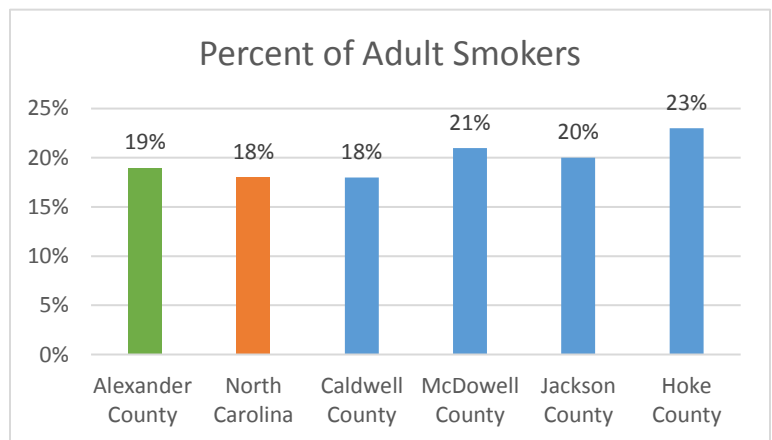
*Prescription drug, illegal substance, tobacco and alcohol abuse*

In 2017, President Donald Trump declared the opioid crisis a public health emergency. Alexander County is no exception to the national trend of opioid-related overdoses. In 2017, North Carolina Injury and Violence Prevention Branch released individualized county-based overdose data. The rate of unintentional overdose deaths was higher in Alexander County compared to the state and region.

Source: NC Injury and Violence Prevention Branch

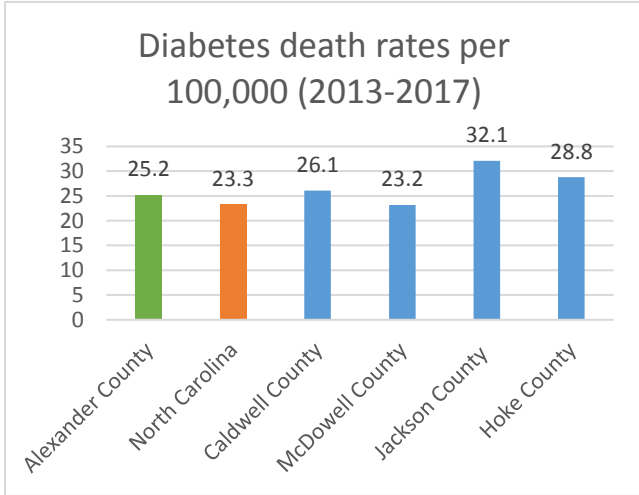
The Alexander County Substance Abuse Task Force, consisting of public health, law enforcement, medical providers, school official, mental health professionals, substance abuse treatment providers, and other professionals, has been an active group working to mitigate the opioid crisis in Alexander County. Alexander County also has a new Addiction Recovery Medical Services center. Dr. Bobby Kearney recently opened a new office in Taylorsville to help resident’s combat addiction through medical and mental health services. Dr. Kearney’s office offers in-house counseling to patients and their families. The Alexander County Sheriff’s Office houses a take back box for residents to dispose of old and unused medication properly. The Sheriff’s Office, in collaboration with the Health Department, has hosted several take-back events throughout the past four years. EMS, local law enforcement, and all fire stations have access and have been trained on naloxone use in the event of an overdose. Lock Your Meds Campaign began in 2018, and the Health Department has helped distribute over 40 medication lockboxes free to residents. In January 2018, Alexander County EMS received a grant to start a Post-Overdose Response Team, and the group will be working to build that team in the coming months.

The Health Department also continues to address tobacco use within our community. Health Department staff to help reduce the number of persons using tobacco products locally conduct policy development and education efforts. Alexander County has seen a reduction in the percentage of adult smokers since the 2014 Community Health Assessment from 26% in 2014 to 19% in 2018. However, there have been recent concerns both locally and nationally about the use of e-cigarettes or vaping devices, such as JUUL, among teens and young adults. Alexander County Alexander Central High School has been in talks with the Region 4 Tobacco Cessation Consultant on implementing the Catch My Breath curriculum to reduce the e-cigarette rates.



Source: County Health Rankings and Roadmaps

HEALTHY LIFESTYLES



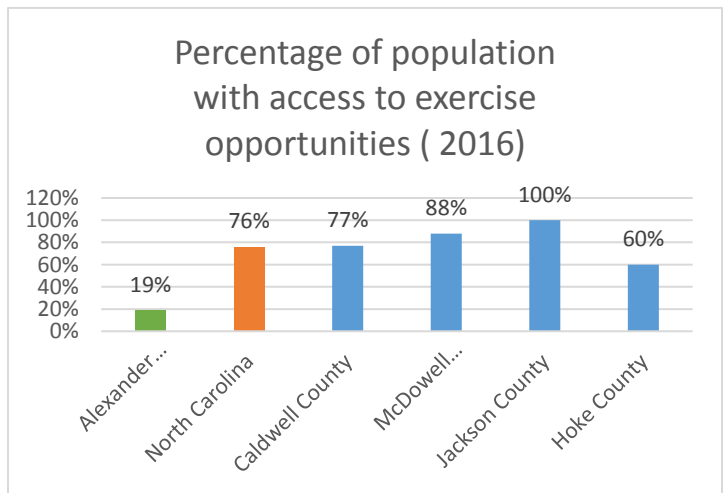
Source: NC Center for Health Statistics

The Healthy Alexandrians Task Force had selected improving overall health of the population as the final health priority we entitled this “Healthy Lifestyles”. Recently the Health Department has been able through new funding to hire a Health Educator. The health educator will be promoting health and wellness through classes in our school system, employment health fairs, and collaborating with local agencies. Alexander County has established a new, certified Safe Kids Coalition. Representatives of the Health Department are active members of the coalition. Safe Kids focuses on reducing child mortalities and injuries by educating families and the community on safety tips such as fire safety or poisoning prevention. The local

daycares have received a Farm to Table Grant and are promoting healthy eating habits to children. Alexander County Agricultural

Extension Office recently hosted a Speedway to Healthy program through North Carolina A&T State University. Alexander County is also continuing its Farmers Market efforts. The county has also merged community resources at a vacant church. The church houses Shelter Home of Caldwell County-Alexander Branch, Communities in Schools, United Way-Alexander County, and a new soup kitchen that offers healthy meals. Maintaining moderate physical activity can reduce the development of obesity, diabetes, heart disease, certain cancers, and other chronic diseases. Rocky Face Park opened in 2012, and since then the park has offered new courses and activities, including hiking, rock climbing, primitive backpacking, and geocaching. The Vertical Mile Challenge is very popular among residents of Alexander County. The course is approximately a 2-mile loop and, half a mile into the path there is a 500-foot climb up the face of the mountain. Over a thousand people have completed the 1 Vertical Mile Challenge where participants must complete eight loops of the 2.2-mile trail, a total 17.6 or 1 vertical mile. However, in 2016 Alexander County still has the lowest percentage in the state for a population with adequate access to locations for physical activity.

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Source: County Health Rankings and Roadmaps

## ACKNOWLEDGMENTS

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The Alexander County Health Department would like to thank the following individuals and agencies for their contributions during the Community Health Assessment process. These individuals bring extensive knowledge and show unyielding support of the health and well-being of Alexander County citizens. Without their efforts, this assessment would not have been possible.

### *Community Assessment Planning Team:*

Leeanne Whisnant, RN, MS  
Health Director

Bria Marlowe  
Health Educator

### *Healthy Alexandrians Committee Members*

#### Alexander County DSS

Patricia Baker

#### Alexander County Emergency Management

Russell Greene

#### Alexander County Schools

Jennifer Hefner

#### Citizens

Dale Clary

Nikki McClain

Melinda Sherrill

#### Alexander County Cooperative Extension

Der Holcomb

#### Alexander County Health Department

Billie Walker

### *Board of Health Members*

Dr. Jennifer Hull- Chair

Dr. Thomas Rider

Dr. Jeff Peal- Vice Chair

Phillip Sprinkle

Janet Bowles

Scott Westmoreland, P.E.

Macy Jones

Dr. Richard Williams

Betty Long

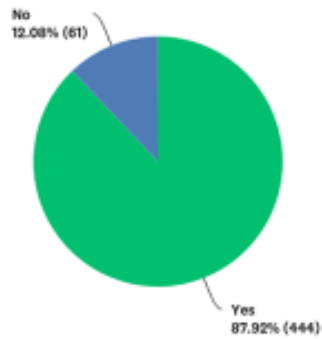
Larry Yoder


APPENDIX A

COMMUNITY HEALTH ASSESSMENT SURVEY RESPONSE DATA

**Q1: Do you live in Alexander County?**

Answered: 505 Skipped: 2

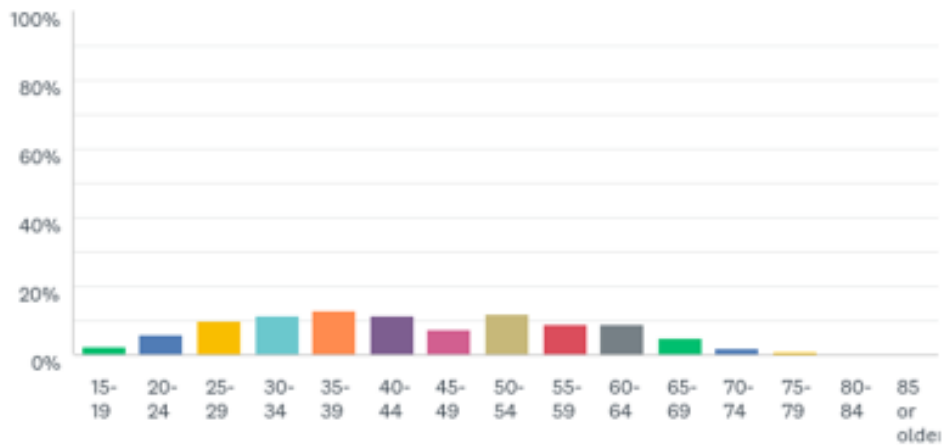


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ANSWER CHOICES	RESPONSES	
Yes	87.92%	444
No	12.08%	61
<b>TOTAL</b>		<b>505</b>

**Q3: How old are you? (Mark age category)**

Answered: 505 Skipped: 2

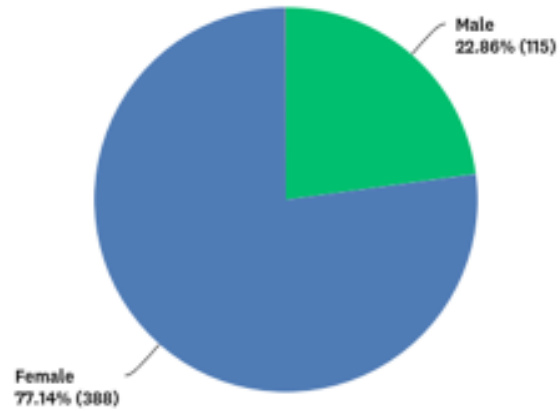


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ANSWER CHOICES	RESPONSES	
15-19	2.38%	12
20-24	6.14%	31
25-29	9.90%	50
30-34	11.68%	59
35-39	12.87%	65
40-44	11.68%	59
45-49	7.33%	37
50-54	11.88%	60
55-59	9.11%	46
60-64	8.91%	45
65-69	4.75%	24
70-74	2.18%	11
75-79	1.19%	6
80-84	0.00%	0
85 or older	0.00%	0
<b>TOTAL</b>		<b>505</b>

**Q4: What is your sex?**

Answered: 503 Skipped: 4

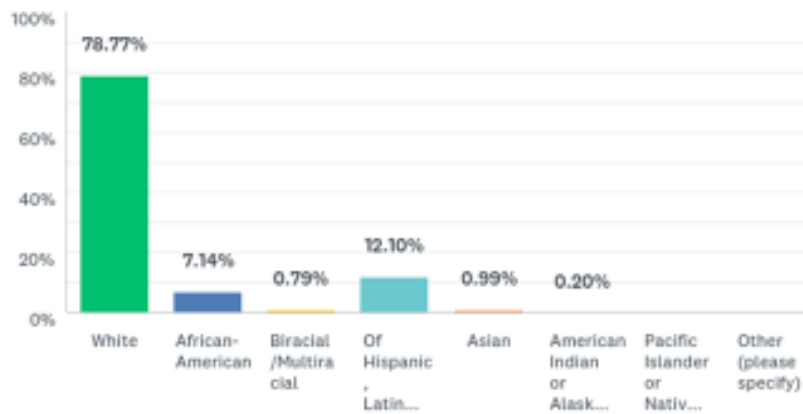


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ANSWER CHOICES	RESPONSES	
Male	22.86%	115
Female	77.14%	388
Other (please specify)	0.00%	0
<b>TOTAL</b>		<b>503</b>

**Q5: Which of the following would you say is your race? (Check only one)**

Answered: 504 Skipped: 3

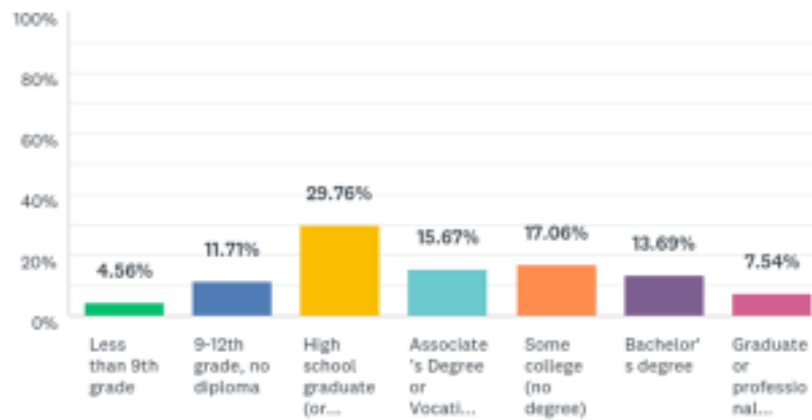


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ANSWER CHOICES	RESPONSES	
White	78.77%	397
African-American	7.14%	36
Biracial/Multiracial	0.79%	4
Of Hispanic, Latino, or Spanish origin	12.10%	61
Asian	0.99%	5
American Indian or Alaska Native	0.20%	1
Pacific Islander or Native Hawaiian	0.00%	0
Other (please specify)	0.00%	0
<b>TOTAL</b>		<b>504</b>

**Q6: What is the highest level of school, college or vocational training that you have finished? (Check only one)**

Answered: 504 Skipped: 3



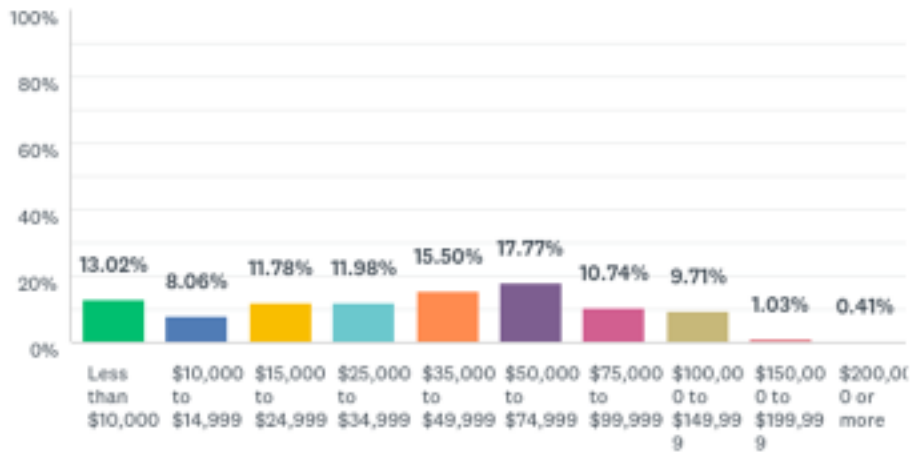
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ANSWER CHOICES	RESPONSES
Less than 9th grade	4.56% 23
9-12th grade, no diploma	11.71% 59
High school graduate (or GED/equivalent)	29.76% 150
Associate's Degree or Vocational Training	15.67% 79
Some college (no degree)	17.06% 86
Bachelor's degree	13.69% 69
Graduate or professional degree	7.54% 38
<b>TOTAL</b>	<b>504</b>



**Q7: What was your TOTAL household income last year, before taxes?**

Answered: 484 Skipped: 23

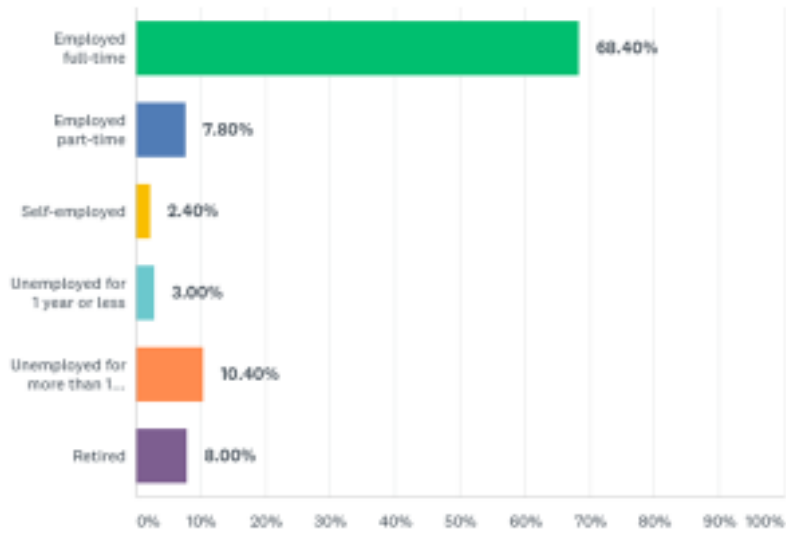


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ANSWER CHOICES	RESPONSES	
Less than \$10,000	13.02%	63
\$10,000 to \$14,999	8.06%	39
\$15,000 to \$24,999	11.78%	57
\$25,000 to \$34,999	11.98%	58
\$35,000 to \$49,999	15.50%	75
\$50,000 to \$74,999	17.77%	86
\$75,000 to \$99,999	10.74%	52
\$100,000 to \$149,999	9.71%	47
\$150,000 to \$199,999	1.03%	5
\$200,000 or more	0.41%	2
<b>TOTAL</b>		<b>484</b>

### Q9: What is your employment status?

Answered: 500 Skipped: 7

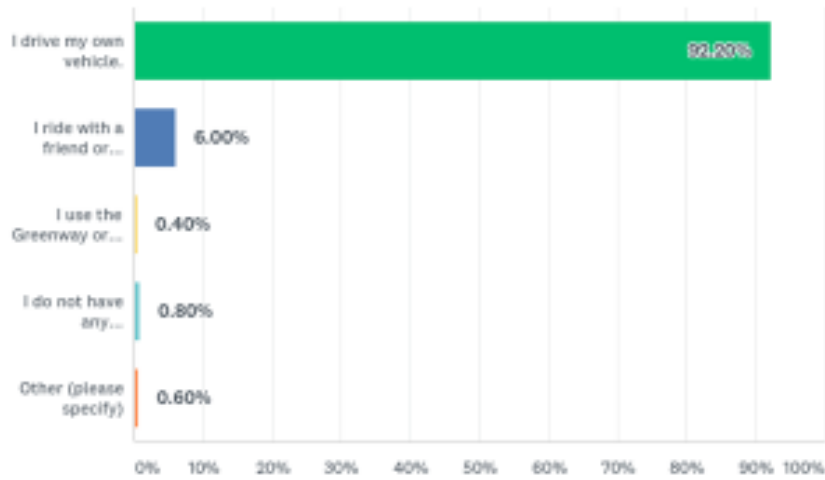


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ANSWER CHOICES	RESPONSES	
Employed full-time	68.40%	342
Employed part-time	7.80%	39
Self-employed	2.40%	12
Unemployed for 1 year or less	3.00%	15
Unemployed for more than 1 year	10.40%	52
Retired	8.00%	40
<b>TOTAL</b>		<b>500</b>

### Q10: What is your main source of transportation?

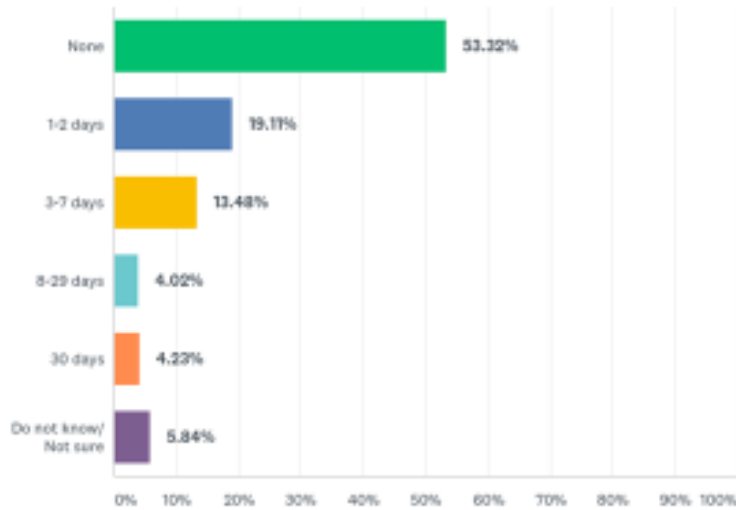
Answered: 500 Skipped: 7



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ANSWER CHOICES	RESPONSES	
I drive my own vehicle.	92.20%	461
I ride with a friend or family member.	6.00%	30
I use the Greenway or other service.	0.40%	2
I do not have any transportation.	0.80%	4
Other (please specify)	0.60%	3
<b>TOTAL</b>		<b>500</b>

**Q11: Thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health NOT good?** Answered: 497 Skipped: 10

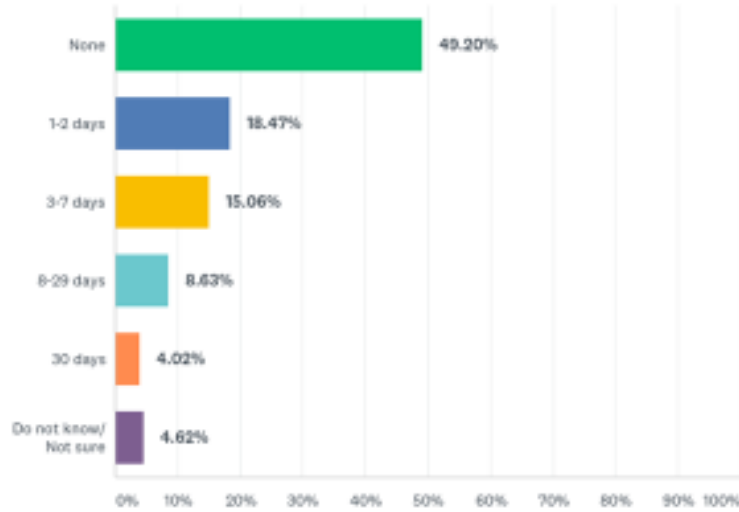


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ANSWER CHOICES	RESPONSES	
None	53.32%	265
1-2 days	19.11%	95
3-7 days	13.48%	67
8-29 days	4.02%	20
30 days	4.23%	21
Do not know/ Not sure	5.84%	29
<b>TOTAL</b>		<b>497</b>

**Q12: Thinking about your mental health, which includes stress, depression/feelings of sadness, and problems with emotions, for how many days during the past 30 days was your mental health NOT good?**

Answered: 498 Skipped: 9

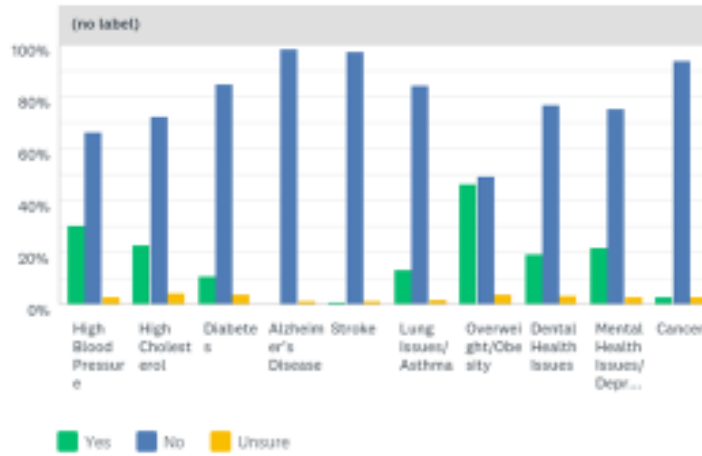


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ANSWER CHOICES	RESPONSES	
None	49.20%	245
1-2 days	18.47%	92
3-7 days	15.06%	75
8-29 days	8.63%	43
30 days	4.02%	20
Do not know/ Not sure	4.62%	23
<b>TOTAL</b>		<b>498</b>

**Q13: Do you currently have any of the following health conditions?**

Answered: 481 Skipped: 26

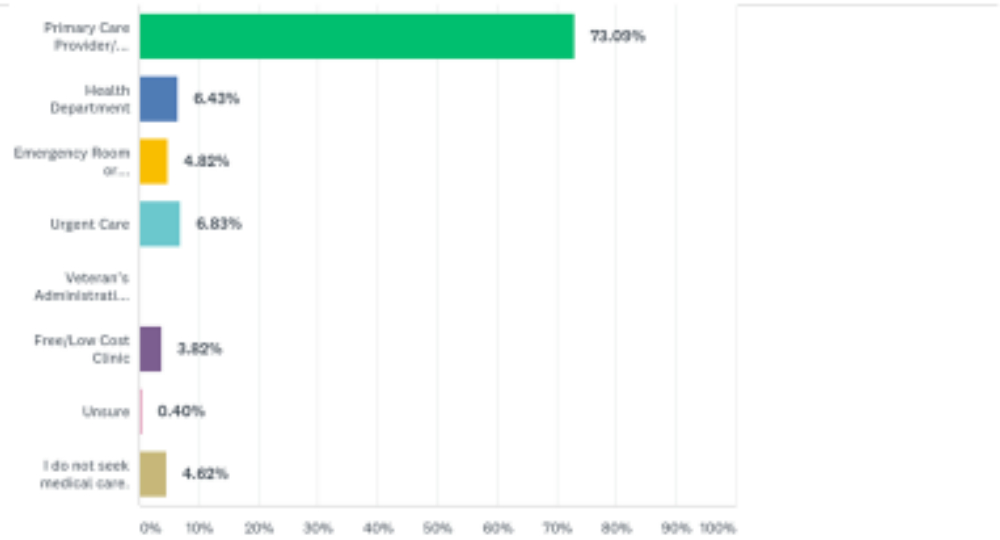


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(no label)				
	YES	NO	UNSURE	TOTAL
High Blood Pressure	30.49% 136	66.37% 296	3.14% 14	446
High Cholesterol	22.94% 100	72.48% 316	4.59% 20	436
Diabetes	10.87% 46	85.11% 360	4.02% 17	423
Alzheimer's Disease	0.24% 1	98.31% 407	1.45% 6	414
Stroke	0.97% 4	97.58% 404	1.45% 6	414
Lung Issues/Asthma	13.54% 57	84.56% 356	1.90% 8	421
Overweight/Obesity	46.55% 209	49.67% 223	3.79% 17	449
Dental Health Issues	19.58% 83	76.89% 326	3.54% 15	424
Mental Health Issues/Depression	21.91% 94	75.29% 323	2.80% 12	429
Cancer	3.13% 13	93.99% 391	2.88% 12	416

**Q14: Where do you most often seek medical care?**

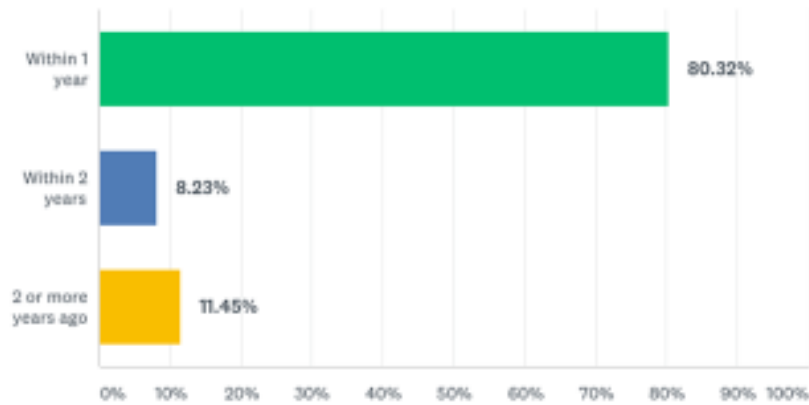
Answered: 498 Skipped: 9



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ANSWER CHOICES	RESPONSES	
Primary Care Provider/ Doctor's Offices/ Family Physical	73.09%	364
Health Department	6.43%	32
Emergency Room or Hospital	4.82%	24
Urgent Care	6.83%	34
Veteran's Administration (VA)	0.00%	0
Free/Low Cost Clinic	3.82%	19
Unsure	0.40%	2
I do not seek medical care.	4.62%	23
<b>TOTAL</b>		<b>498</b>

**Q15: About how long has it been since you last visited a doctor for a routine checkup? A routine checkup is a general physical exam, not an exam for a specific injury, illness or condition.** Answered: 498 Skipped: 9



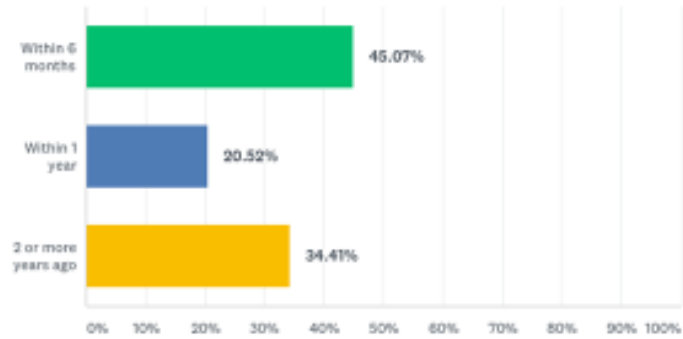
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ANSWER CHOICES	RESPONSES	
Within 1 year	80.32%	400
Within 2 years	8.23%	41
2 or more years ago	11.45%	57
TOTAL		498



**Q16: When was the last time you went to the dentist?**

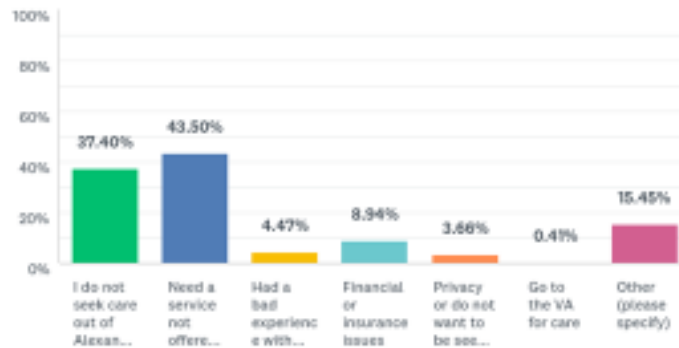
Answered: 497 Skipped: 10



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ANSWER CHOICES	RESPONSES	
Within 6 months	45.07%	224
Within 1 year	20.52%	102
2 or more years ago	34.41%	171
<b>TOTAL</b>		<b>497</b>

**Q17: What are your reasons for seeking medical care outside of Alexander County? (Select all that apply)** Answered: 492 Skipped: 15

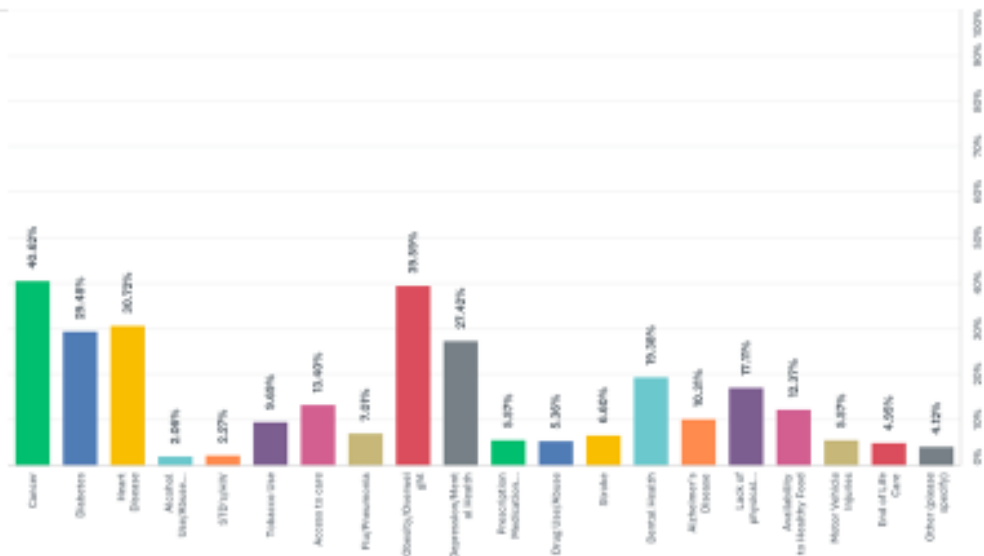


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ANSWER CHOICES	RESPONSES
I do not seek care out of Alexander County.	37.40% 184
Need a service not offered in Alexander County	43.50% 214
Had a bad experience with Physicians/Healthcare Providers in Alexander County	4.47% 22
Financial or insurance issues	8.94% 44
Privacy or do not want to be seen at local healthcare providers (including health department)	3.66% 18
Go to the VA for care	0.41% 2
Other (please specify)	15.45% 76
Total Respondents: 492	

**Q18: Please select the top 3 health concerns that are important to you.**

Answered: 485 Skipped: 22

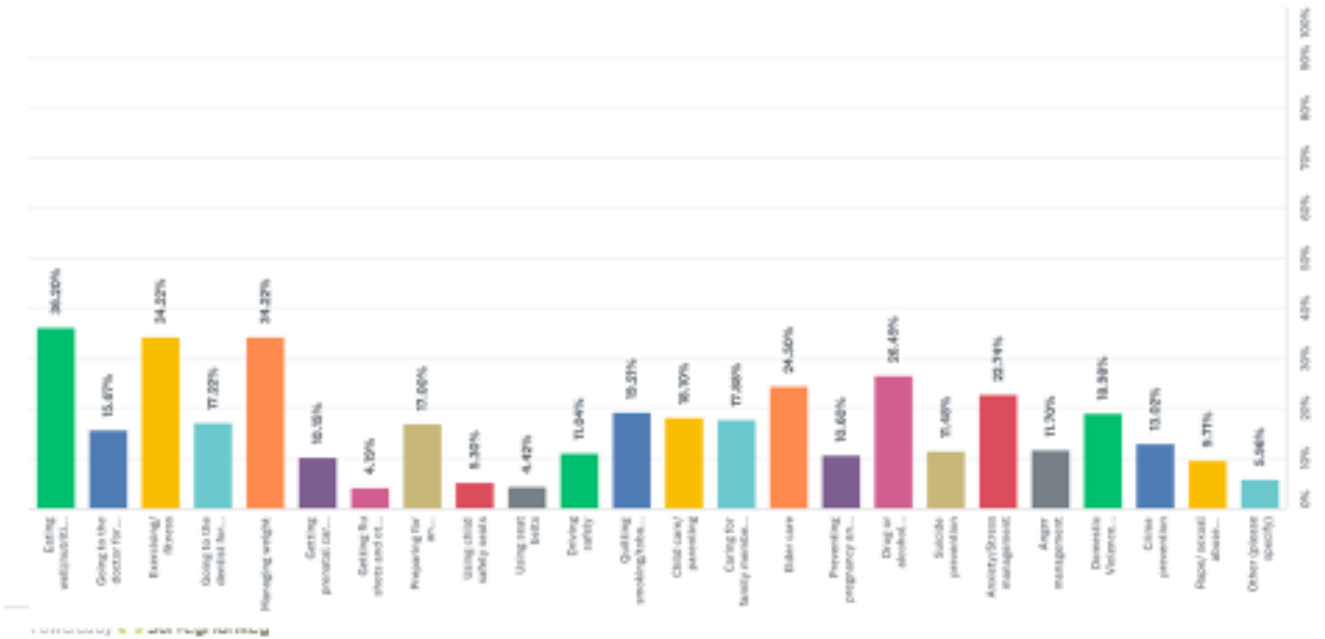


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## 2018 ALEXANDER COUNTY COMMUNITY HEALTH ASSESSMENT

ANSWER CHOICES	RESPONSES	
Cancer	40.62%	197
Diabetes	29.48%	143
Heart Disease	30.72%	149
Alcohol Use/Abuse	2.06%	10
STD's/HIV	2.27%	11
Tobacco Use	9.69%	47
Access to care	13.40%	65
Flu/Pneumonia	7.01%	34
Obesity/Overweight	39.59%	192
Depression/Mental Health	27.42%	133
Prescription Medication Misuse/Abuse	5.57%	27
Drug Use/Abuse	5.36%	26
Stroke	6.60%	32
Dental Health	19.38%	94
Alzheimer's Disease	10.31%	50
Lack of physical activity	17.11%	83
Availability to Healthy Food	12.37%	60
Motor Vehicle Injuries	5.57%	27
End of Life Care	4.95%	24
Other (please specify)	4.12%	20
<b>Total Respondents: 485</b>		

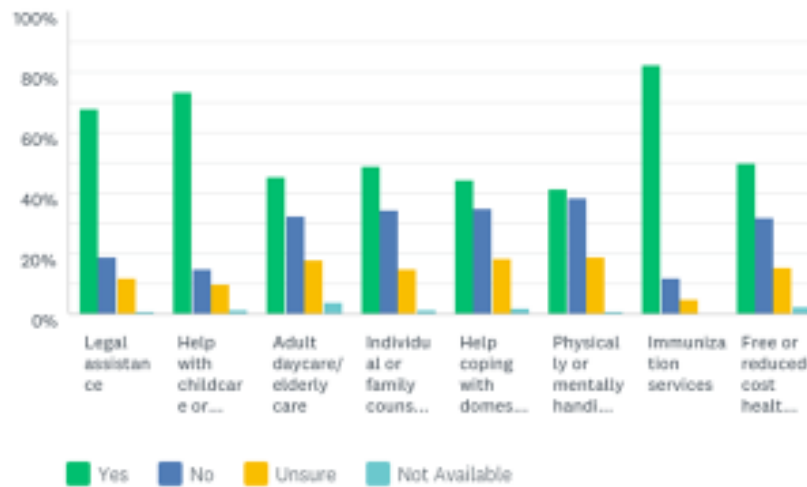
**Q19: Does Alexander County need improvement in regards to the following issues? (Choose 4 answers)** Answered: 453 Skipped: 54



## 2018 ALEXANDER COUNTY COMMUNITY HEALTH ASSESSMENT

ANSWER CHOICES	RESPONSES	
Eating well/nutrition	36.20%	164
Going to the doctor for yearly check-ups/screenings	15.67%	71
Exercising/ fitness	34.22%	155
Going to the dentist for check-ups/preventative care	17.22%	78
Managing weight	34.22%	155
Getting prenatal care during pregnancy	10.15%	46
Getting flu shots and other vaccines	4.19%	19
Preparing for an emergency/disasters	17.00%	77
Using child safety seats	5.30%	24
Using seat belts	4.42%	20
Driving safely	11.04%	50
Quitting smoking/tobacco use prevention	19.21%	87
Child care/ parenting	18.10%	82
Caring for family members with special needs/disabilities	17.88%	81
Elder care	24.50%	111
Preventing pregnancy and STI	10.60%	48
Drug or alcohol abuse/prevention	26.49%	120
Suicide prevention	11.48%	52
Anxiety/Stress management	22.74%	103
Anger management	11.70%	53
Domestic Violence prevention	18.98%	86
Crime prevention	13.02%	59
Rape/ sexual abuse prevention	9.71%	44
Other (please specify)	5.96%	27
Total Respondents: 453		

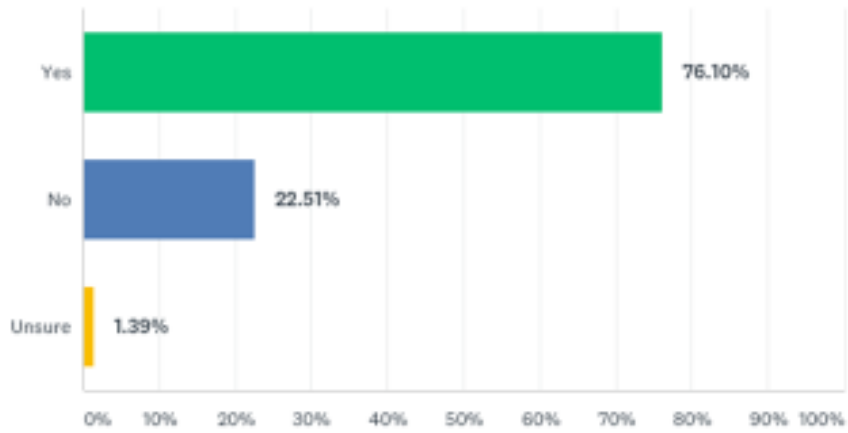
**Q20: In your community do you know where the following resources are located?** Answered: 494 Skipped: 13



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	YES	NO	UNSURE	NOT AVAILABLE	TOTAL
Legal assistance	67.77% 328	19.01% 92	11.98% 58	1.24% 6	484
Help with childcare or after-school care	73.28% 351	15.03% 72	10.02% 48	1.67% 8	479
Adult daycare/elderly care	45.70% 218	32.29% 154	18.24% 87	3.77% 18	477
Individual or family counseling	49.05% 232	34.67% 164	14.80% 70	1.48% 7	473
Help coping with domestic violence	44.61% 211	34.88% 165	18.60% 88	1.90% 9	473
Physically or mentally handicapped services	41.74% 197	38.35% 181	19.07% 90	0.85% 4	472
Immunization services	82.53% 392	11.79% 56	5.05% 24	0.63% 3	475
Free or reduced-cost health care	49.79% 239	31.87% 153	15.63% 75	2.71% 13	480

**Q21: Do you have any health care coverage, such as health insurance or government plans, such as Medicaid or Medicare?** Answered: 502 Skipped: 5



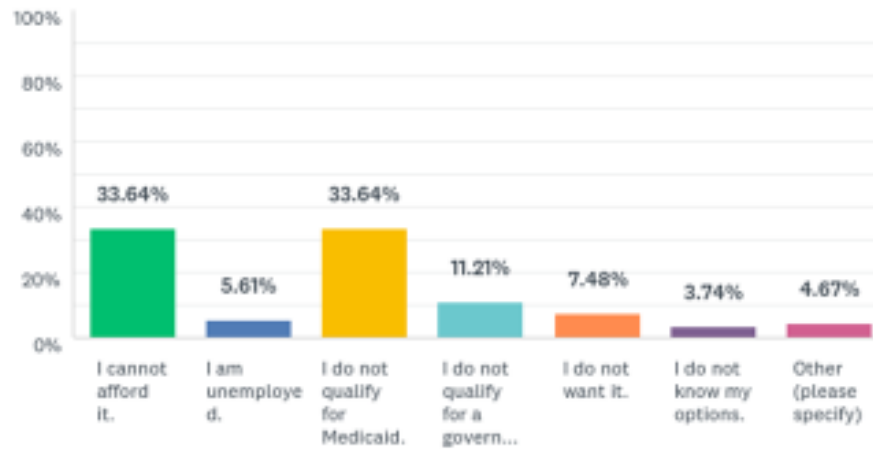
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ANSWER CHOICES	RESPONSES	
Yes	76.10%	382
No	22.51%	113
Unsure	1.39%	7
<b>TOTAL</b>		<b>502</b>



### Q22: If you answered no, why not?

Answered: 107 Skipped: 400

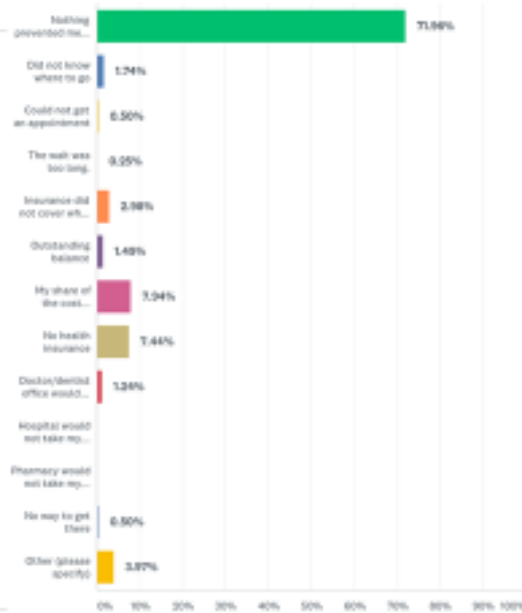


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ANSWER CHOICES	RESPONSES	
I cannot afford it.	33.64%	36
I am unemployed.	5.61%	6
I do not qualify for Medicaid.	33.64%	36
I do not qualify for a government subsidy to help pay for insurance.	11.21%	12
I do not want it.	7.48%	8
I do not know my options.	3.74%	4
Other (please specify)	4.67%	5
<b>TOTAL</b>		<b>107</b>

### Q23: What has prevented you from getting health care?

Answered: 403 Skipped: 104

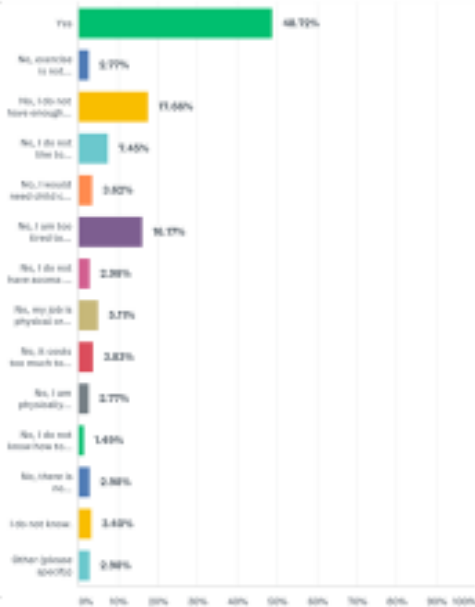


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ANSWER CHOICES	RESPONSES	
Nothing prevented me from getting health care.	71.96%	290
Did not know where to go	1.74%	7
Could not get an appointment	0.50%	2
The wait was too long.	0.25%	1
Insurance did not cover what I needed.	2.98%	12
Outstanding balance	1.49%	6
My share of the cost (deductible/co-pay) was too high.	7.94%	32
No health insurance	7.44%	30
Doctor/dentist office would not take my insurance or Medicaid.	1.24%	5
Hospital would not take my insurance or Medicaid.	0.00%	0
Pharmacy would not take my insurance or Medicaid.	0.00%	0
No way to get there	0.50%	2
Other (please specify)	3.97%	16
<b>TOTAL</b>		<b>403</b>

**Q24: During a normal week, other than in your regular job, do you engage in any exercise that lasts at least a half an hour? (Check all that apply.)**

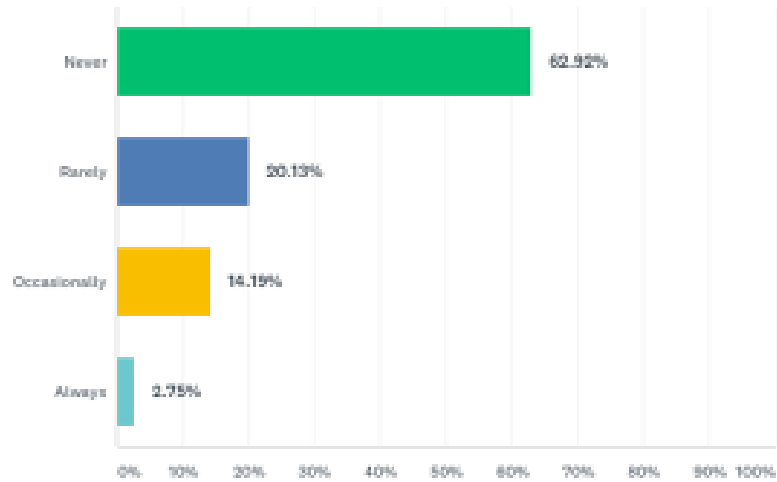
Answered: 470 Skipped: 37



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ANSWER CHOICES	RESPONSES	
Yes	48.72%	229
No, exercise is not important to me.	2.77%	13
No, I do not have enough time to exercise.	17.66%	83
No, I do not like to exercise.	7.45%	35
No, I would need child care and I do not have it.	3.62%	17
No, I am too tired to exercise.	16.17%	76
No, I do not have access to the things I need (pool, track, etc.).	2.98%	14
No, my job is physical or hard labor.	5.11%	24
No, it costs too much to exercise.	3.83%	18
No, I am physically disabled.	2.77%	13
No, I do not know how to find exercise partners.	1.49%	7
No, there is no convenient/safe place to exercise.	2.98%	14
I do not know.	3.40%	16
Other (please specify)	2.98%	14
Total Respondents: 470		

**Q25: How often does your household run out of food before you have money to buy more?** Answered: 472 Skipped: 35

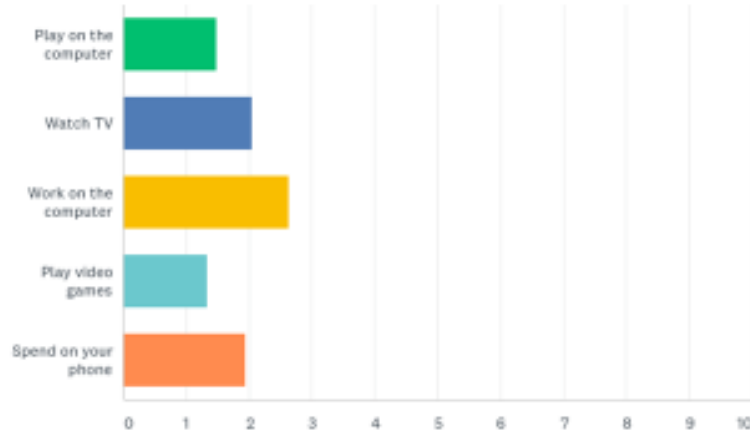


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ANSWER CHOICES	RESPONSES	
Never	62.92%	297
Rarely	20.13%	95
Occasionally	14.19%	67
Always	2.75%	13
<b>TOTAL</b>		<b>472</b>

**Q26: How many hours each day do you do the following?**

Answered: 469 Skipped: 38

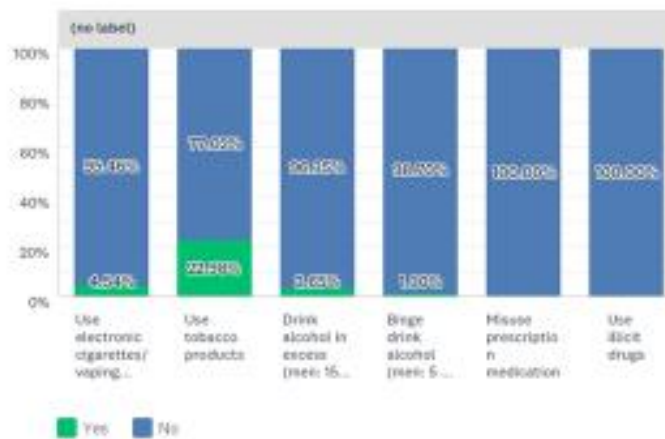


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	LESS THAN 1 HOUR EACH DAY	1-2 HOURS EACH DAY	3-4 HOURS EACH DAY	MORE THAN 4 HOURS EACH DAY	N/A	TOTAL	WEIGHTED AVERAGE
Play on the computer	40.18% 176	16.44% 72	3.20% 14	2.28% 10	37.90% 166	438	1.48
Watch TV	26.51% 123	45.04% 209	18.97% 88	5.60% 26	3.88% 18	464	2.04
Work on the computer	18.08% 79	12.13% 53	8.92% 39	24.94% 109	35.93% 157	437	2.64
Play video games	17.85% 78	5.49% 24	1.14% 5	0.23% 1	75.29% 329	437	1.34
Spend on your phone	37.36% 170	31.43% 143	14.07% 64	8.79% 40	8.35% 38	455	1.94

### Q27: Do you do the following?

Answered: 473 Skipped: 34

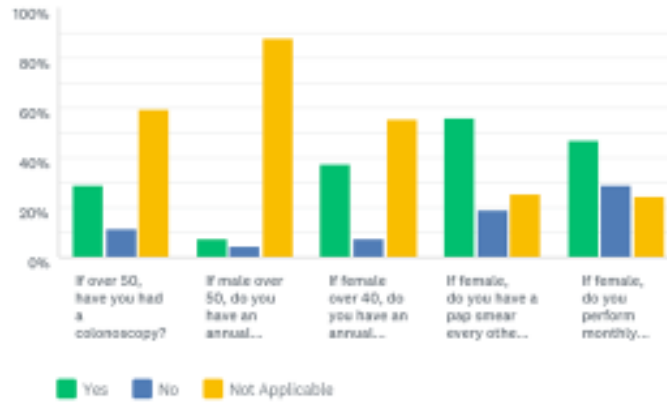


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(no label)			
	YES	NO	TOTAL
Use electronic cigarettes/vaping devices	4.54% 21	95.46% 442	463
Use tobacco products	22.98% 108	77.02% 362	470
Drink alcohol in excess (men: 15 or more drinks per week, women: 8 or more drinks per week)	3.65% 17	96.35% 449	466
Binge drink alcohol (men: 5 or more drinks in a 2 hour period, women: 4 or more drinks in a 2 hour period)	1.30% 6	98.70% 456	462
Misuse prescription medication	0.00% 0	100.00% 463	463
Use illicit drugs	0.00% 0	100.00% 458	458

### Q28: Do you follow these health practices?

Answered: 476 Skipped: 31

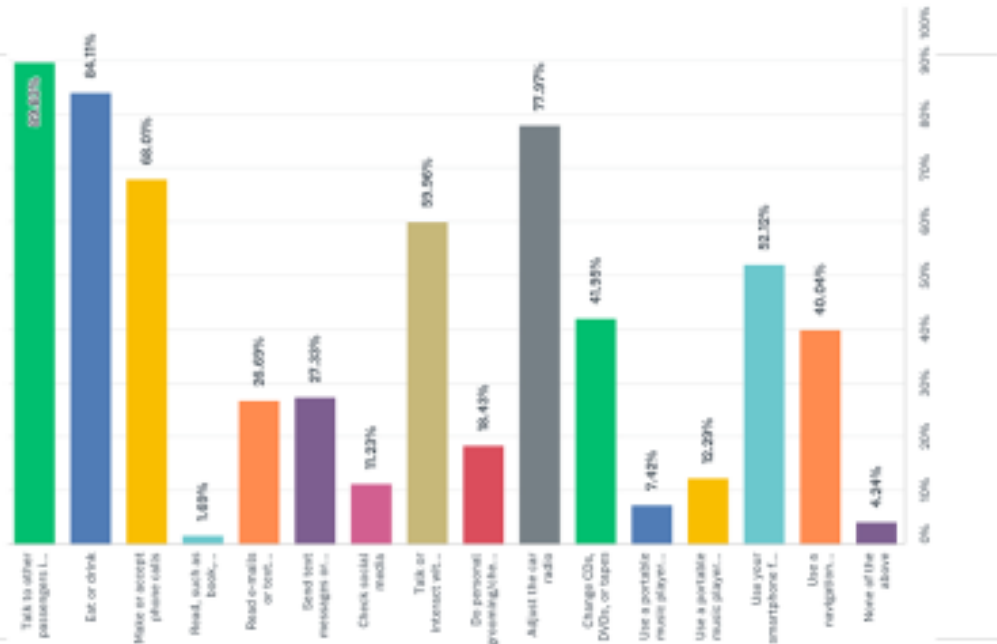


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	YES	NO	NOT APPLICABLE	TOTAL
If over 50, have you had a colonoscopy?	29.24% 138	11.44% 54	59.32% 280	472
If male over 50, do you have an annual prostate exam?	7.42% 34	4.37% 20	88.21% 404	458
If female over 40, do you have an annual mammogram?	37.31% 172	7.38% 34	55.31% 255	461
If female, do you have a pap smear every other year?	55.80% 255	18.82% 86	25.38% 116	457
If female, do you perform monthly breast self-exams?	46.78% 211	28.82% 130	24.39% 110	451

**Q29: Which of the following have you ever done while driving? (Check all that apply.)**

Answered: 472 Skipped: 35



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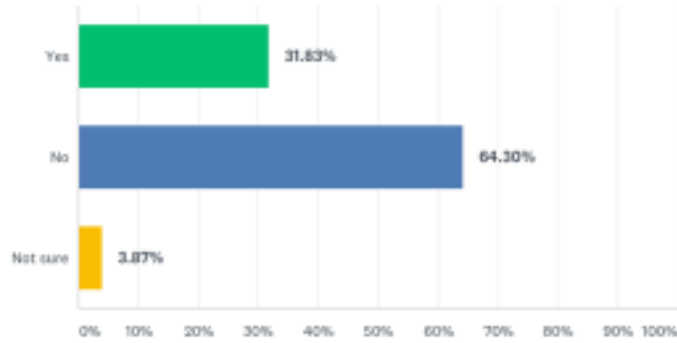


2018 ALEXANDER COUNTY COMMUNITY HEALTH ASSESSMENT

ANSWER CHOICES	RESPONSES
Talk to other passengers in the vehicle	89.83% 424
Eat or drink	84.11% 397
Make or accept phone calls	68.01% 321
Read, such as book, newspaper, iPad or Kindle	1.69% 8
Read e-mails or text messages	26.69% 126
Send text messages or e-mails	27.33% 129
Check social media	11.23% 53
Talk or interact with children in the back seat	59.96% 283
Do personal grooming/check appearance in mirror	18.43% 87
Adjust the car radio	77.97% 368
Change CDs, DVDs, or tapes	41.95% 198
Use a portable music player, including a smartphone, with headphones on	7.42% 35
Use a portable music player, including a smartphone, with external speakers or with the car's speakers	12.29% 58
Use your smartphone for driving directions	52.12% 246
Use a navigation system for driving directions	40.04% 189
None of the above	4.24% 20
Total Respondents: 472	

**Q30: Do you have an emergency preparedness kit? (These kits include water, non-perishable food, any necessary prescriptions, first aid supplies, flashlight and batteries, non-electric can opener, blanket, etc.)**

Answered: 465 Skipped: 42

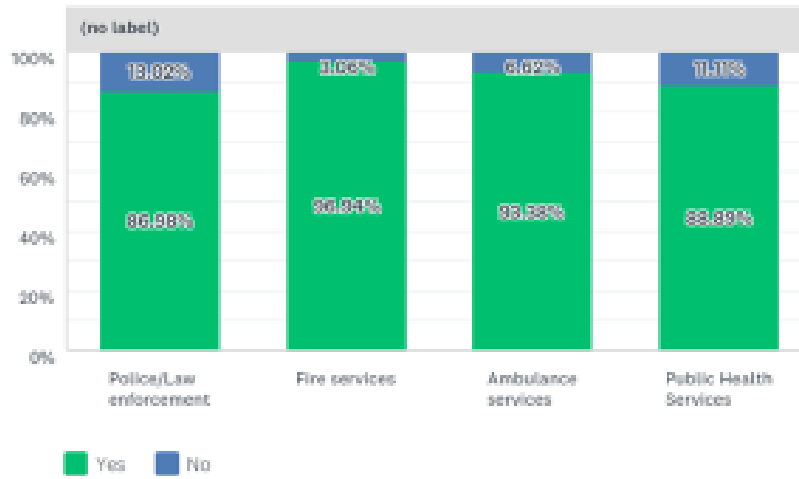


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ANSWER CHOICES	RESPONSES	
Yes	31.83%	148
No	64.30%	299
Not sure	3.87%	18
<b>TOTAL</b>		<b>465</b>

**Q31: Do you feel your safety is well protected by the following?**

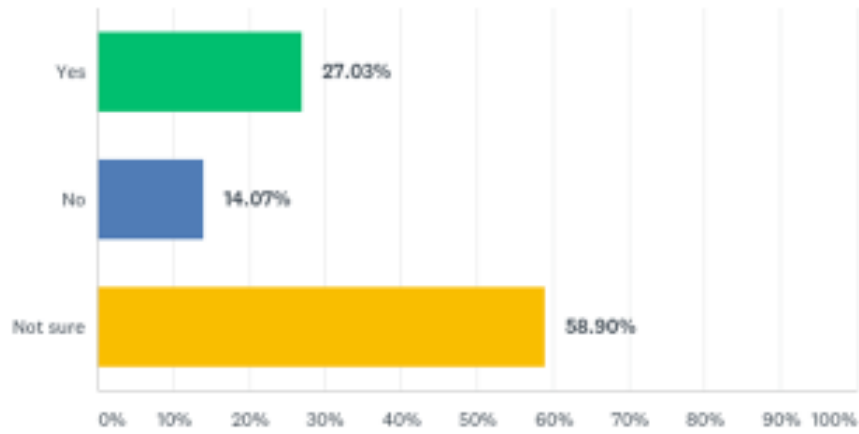
Answered: 462 Skipped: 45



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(no label)			
	YES	NO	TOTAL
Police/Law enforcement	86.98% 401	13.02% 60	461
Fire services	96.94% 444	3.06% 14	458
Ambulance services	93.38% 423	6.62% 30	453
Public Health Services	88.89% 400	11.11% 50	450

**Q33: Do you feel that Alexander County would benefit from a needle exchange program?** Answered: 455 Skipped: 52

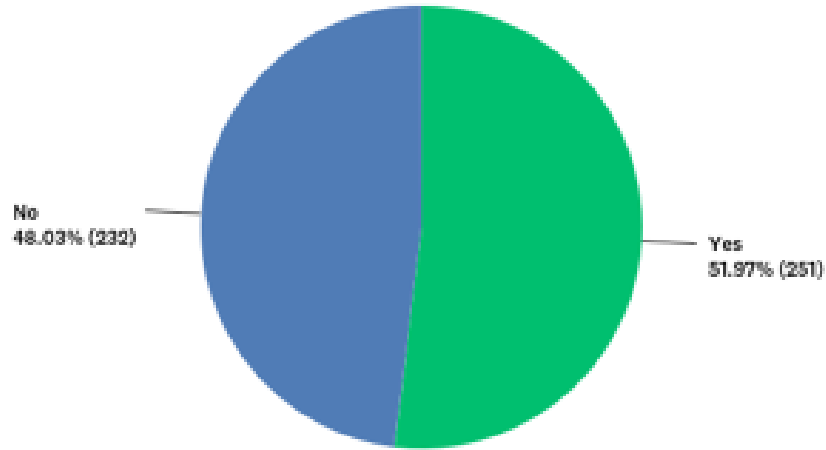


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ANSWER CHOICES	RESPONSES	
Yes	27.03%	123
No	14.07%	64
Not sure	58.90%	268
<b>TOTAL</b>		<b>455</b>

**Q34: Do you have any children under 18?**

Answered: 483 Skipped: 24

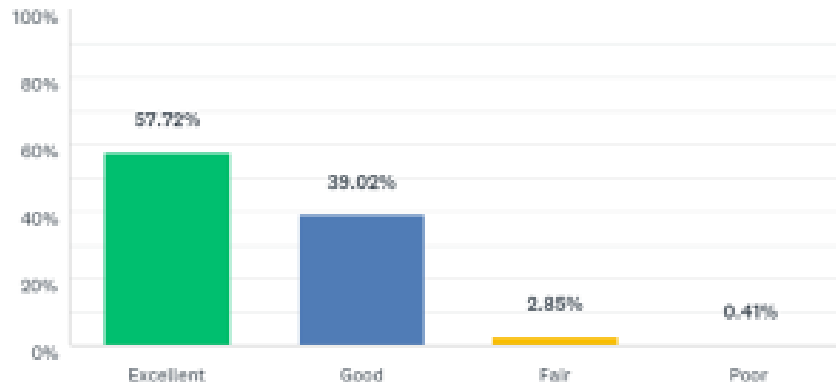


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ANSWER CHOICES	RESPONSES	
Yes	51.97%	251
No	48.03%	232
<b>TOTAL</b>		<b>483</b>

**Q35: In general, would you say your child's (children) health is**

Answered: 246 Skipped: 261

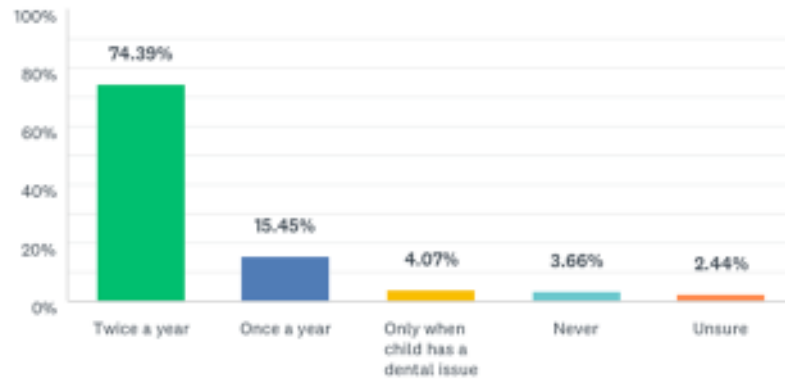


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ANSWER CHOICES	RESPONSES	
Excellent	57.72%	142
Good	39.02%	96
Fair	2.85%	7
Poor	0.41%	1
<b>TOTAL</b>		<b>246</b>

**Q36: How often does your child (children) visit the dentist?**

Answered: 246 Skipped: 251

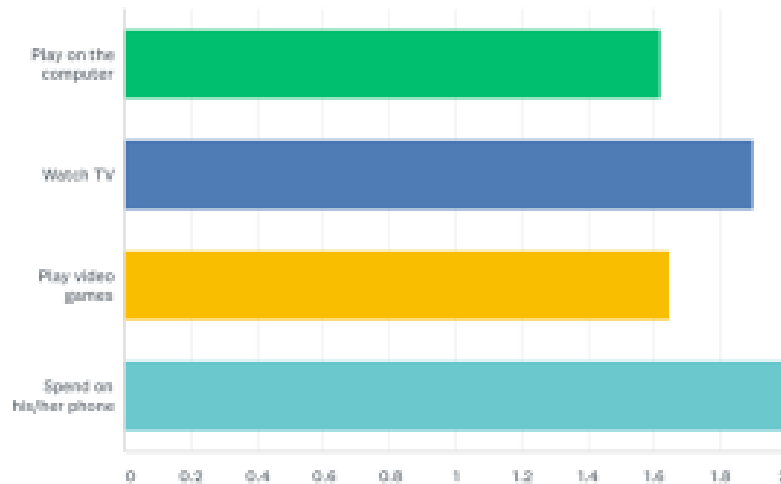


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ANSWER CHOICES	RESPONSES	
Twice a year	74.39%	183
Once a year	15.45%	38
Only when child has a dental issue	4.07%	10
Never	3.66%	9
Unsure	2.44%	6
<b>TOTAL</b>		<b>246</b>

### Q37: How many hours each day does your child (children) do the following?

Answered: 244 Skipped: 263

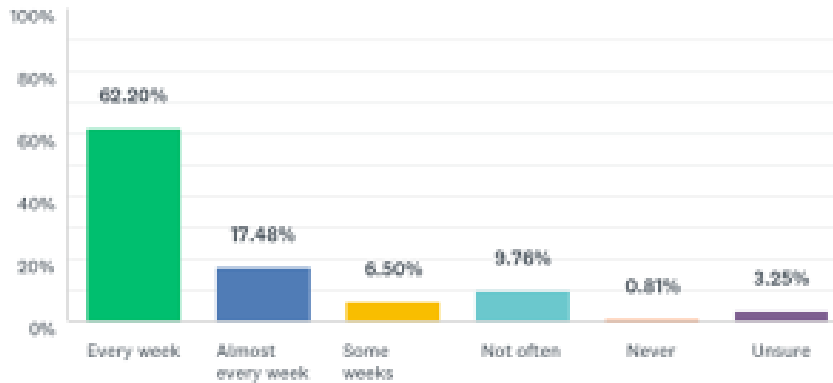


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	LESS THAN 1 HOUR PER DAY	1-2 HOURS PER DAY	3-4 HOURS PER DAY	MORE THAN 4 HOURS PER DAY	N/A	TOTAL	WEIGHTED AVERAGE
Play on the computer	30.67% 73	21.01% 50	4.20% 10	2.10% 5	42.02% 100	238	1.62
Watch TV	27.62% 66	53.56% 128	11.72% 28	2.93% 7	4.18% 10	239	1.90
Play video games	33.33% 79	21.52% 51	5.91% 14	2.53% 6	36.71% 87	237	1.65
Spend on his/her phone	21.28% 50	22.13% 52	11.06% 26	5.11% 12	40.43% 95	235	2.00



**Q38: How often is your child (children) physically active for at least 60 minutes each day?** Answered: 246 Skipped: 251

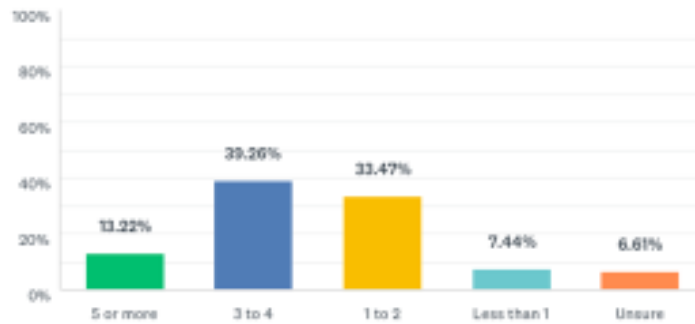


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ANSWER CHOICES	RESPONSES	
Every week	62.20%	153
Almost every week	17.48%	43
Some weeks	6.50%	16
Not often	9.76%	24
Never	0.81%	2
Unsure	3.25%	8
<b>TOTAL</b>		<b>246</b>

**Q39: How many servings of fruits and vegetables does your child (children) normally consume? (for example, one medium apple or ½ a cup of carrots equal 1 serving)**

Answered: 242 Skipped: 265

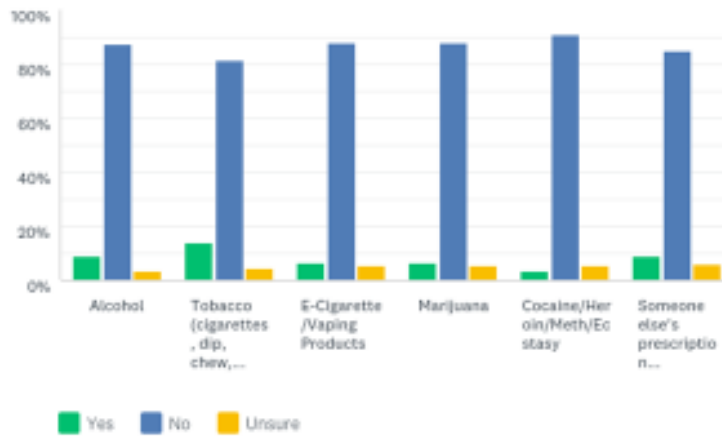


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ANSWER CHOICES	RESPONSES	
5 or more	13.22%	32
3 to 4	39.26%	95
1 to 2	33.47%	81
Less than 1	7.44%	18
Unsure	6.61%	16
<b>TOTAL</b>		<b>242</b>

**Q40: Do you feel your child has access to the following, anywhere?**

Answered: 246 Skipped: 261



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	YES	NO	UNSURE	TOTAL
Alcohol	8.94% 22	87.40% 215	3.66% 9	246
Tobacco (cigarettes, dip, chew, snuff)	13.88% 34	81.63% 200	4.49% 11	245
E-Cigarette/Vaping Products	6.50% 16	88.21% 217	5.28% 13	246
Marijuana	6.53% 16	88.16% 216	5.31% 13	245
Cocaine/Heroin/Meth/Ecstasy	3.27% 8	91.02% 223	5.71% 14	245
Someone else's prescription medication	9.09% 22	85.12% 206	5.79% 14	242

### Q41: How likely is it that your child has used any of the following?

Answered: 246 Skipped: 261



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	HIGHLY LIKELY	LIKELY	UNLIKELY	HIGHLY UNLIKELY	TOTAL
Alcohol	0.81% 2	3.25% 8	19.11% 47	76.83% 189	246
Tobacco (cigarettes, dip, chew, sniff)	0.81% 2	3.25% 8	17.89% 44	78.05% 192	246
E-Cigarette/Vaping products	0.82% 2	2.04% 5	18.37% 45	78.78% 193	245
Marijuana	1.22% 3	2.45% 6	16.73% 41	79.59% 195	245
Cocaine/Heroin/Meth/Ecstasy	0.82% 2	0.82% 2	17.14% 42	81.22% 199	245
Someone else's prescription medication	0.82% 2	1.23% 3	18.44% 45	79.51% 194	244