

PENDER COUNTY

2010

COMMUNITY HEALTH ASSESSMENT

REVISED SUPPLEMENT



...Building a healthier tomorrow....

2010 Community Health Assessment Supplement

The Pender County Health Department completes a Community Health Assessment every four years to review the health status of the county and to identify community health priorities for the coming years. Through a collaborative effort, community input and current health status indicators served as the basis for the assessment. These were detailed in the 2010 Community Health Assessment. This *Supplement* has been written to clarify, expand and offer a broader picture of the Pender community.

Executive Summary II

- ✚ According to the 2010 U.S. Census, the population for Pender County has grown 27.1% in the last 10 years. This growth is much greater than the population growth for the state as well as counties of similar size to Pender County.
- ✚ According to the N.C. Division of Aging, the fastest growing population in the next 20 years will be those 65 years of age and older. In 2030, there will be more people in Pender County over the age of 65 years than those under the age of 17 years.
- ✚ In 2006, the three leading causes of death in Pender County were: Cancer, Cerebrovascular Disease, and Diseases of the Heart. For 2005-2009, these remain the leading causes of death with the exception that Heart Disease is ranked second and Cerebrovascular Disease is ranked third.
- ✚ Cancer remains the leading cause of death for Pender County residents. From 2005-2009, lung cancer is ranked number one and has a higher rate than the state rate. Breast cancer and prostate cancer also have higher rates than the state rates.
- ✚ Diabetes is the fifth leading cause of death in the county. The death rate from diabetes for African Americans in the county is over three times the death rate for whites.
- ✚ Since 1994, youth death rates (ages 0-17 years) have steadily increased and are higher than the state rates. Thirty-three percent of all child deaths were related to motor vehicle accidents from 2004-2008.
- ✚ Obesity was identified as the number one community health issue/concern during the 2006 Community Health Assessment and remains the same concern for 2010. In 2009, 47.6% of Pender County children were overweight or obese. The state rate was 34.2%.
- ✚ Access to care remains a problem in Pender County. In 2008, there were 2.9 primary care physicians per 10,000 population compared to the state ratio of 9.0 per 10,000 population.
- ✚ Teen birth rates and teen pregnancy rates are lower than the state rates. In addition, the birth rate for minorities is lower than the white rate.
- ✚ From 2005-2009, the infant mortality rate is 5.7 for Pender County. The white death rate was 5.6 and the minority death rate was 6.0. All rates are lower than the state rates.

Executive Summary II (cont)

- ✚ In the 2009-2010 school year, the dropout rate in Pender County was 3.57, lower than the state rate.
- ✚ The crime rate in 2010 was lower compared to the state rate and other rural counties' rates. However, from 2008 to 2009, the violent crime rate doubled while the property crime rate decreased.
- ✚ Poverty is a serious concern as it contributes to many barriers to health care and can negatively impact overall health status. In 2009, child poverty and elder poverty rates were higher than the state rates.

2010 Community Health Concerns/Priorities

The following community health concerns/priorities were identified in the 2010 Community Health Assessment. The priorities are ranked in the following order:

1. Access to Care Concerns
2. Chronic Disease
3. Overweight/Obesity Concerns
4. Mental Health
5. Health Behavior Concerns
6. Changing Demographics

The first three priorities will serve as primary focus areas. Health action plans have been developed to track these priorities. Health department staff in collaboration with community partners will identify evidence based interventions and potential resources to help address these priorities.

***Please note that all "peer county" comparison data presented within this document may be found in CATCH-NC Portal. Comparison counties identified in the portal include:*

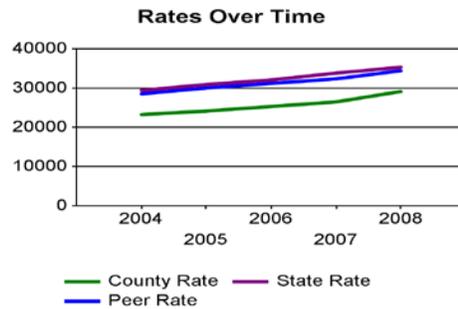
- Chatham County
- Cleveland County
- Rockingham County.

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Socioeconomic, Educational, and Environmental Factors Affecting Health

Socioeconomic status is strongly linked to an individual's overall health status. Individuals of low socioeconomic status have higher death rates and more health problems. In 2008, the per capita income was \$29,253 which continues to remain lower than the state and peer county incomes.

Pender County Per Capita Income **



CATCH NC- Portal, US Bureau of Economic Analysis

In addition, individuals without health insurance coverage experience greater difficulty accessing primary and specialized health care. When the uninsured seek care, it is generally late in the illness and more costly to treat. The percentage of uninsured ages 0-64 years has steadily increased in Pender County as well as in peer counties and in the state.

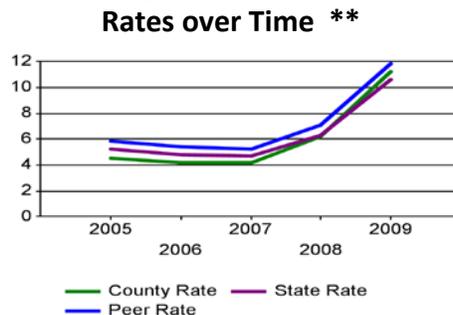
% Estimate of Uninsured Age 0-64 Years **

Year	Pender County	Peer Counties	North Carolina
2007	19.4	17.9	18.9
2009	21.0	18.9	19.7

CATCH-NC Portal, Sheps Center for Health Services Research, UNC-CH

Since 2005, the unemployment rate for Pender County has increased, with a dramatic spike noted between 2007 and 2009. This is not unique to the county. Other counties in the state as well as North Carolina itself have experienced the same trend. This concern has only magnified problems of low per capita income and increased numbers of uninsured residents.

% Unemployment for Pender County



N.C. Department of Commerce

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Socioeconomic, Educational, and Environmental Factors Affecting Health

The ground water deposits in Pender County are mostly in unconsolidated surficial sediments. Ground water from these sediments is of good quality but can have a high content of iron. The county contains a portion of four watersheds. The main pollutant of the county's rivers and streams is sedimentation that exceeds the natural levels. For estuaries, bays and the coastal waters, the major pollutant is waterborne bacteria, viruses and protozoa that can cause human illness ranging from typhoid and dysentery to minor skin diseases. State and regional recreational water quality program consultants routinely monitor these waters and issue swimming alerts and advisories when high bacterial levels are found. These reports are provided to health department staff as they occur. Through collaborative efforts, community education related to swimming advisories and disease prevention is provided to the public as needed. Fortunately, there were no alerts or advisories in 2010.

The average air quality index for Pender County has fallen within the "green" or "good" range for several years. Total suspended particulates including lead are less than the North Carolina mean. In addition, average ozone measurements are lower than the state levels. As data indicates, Pender County has good air and water quality. Adverse health effects for residents are minimal as they relate to these environmental conditions.

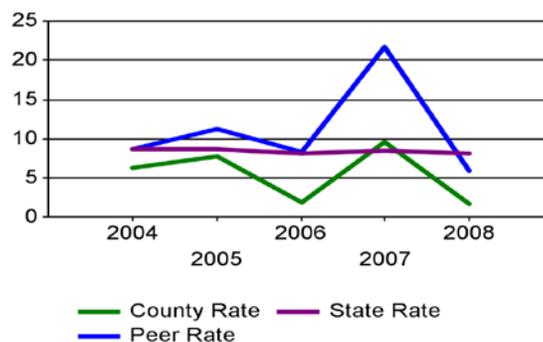
For FY 09-10, Pender County Environmental Health staff inspected 100% of restaurants in the county. In addition, there were nearly 100 new on-site septic permits written, nearly 200 new improvement permits written, and only 18 septic violations issued.

Health Information

As noted in the 2010 Community Health Assessment, there is a higher rate for Pender County women, especially teens, who receive late or no prenatal care prior to delivery. Fortunately, this problem has not translated into high infant mortality rates for the county.

Infant Deaths Per 1,000 Live Births **

Rates Over Time

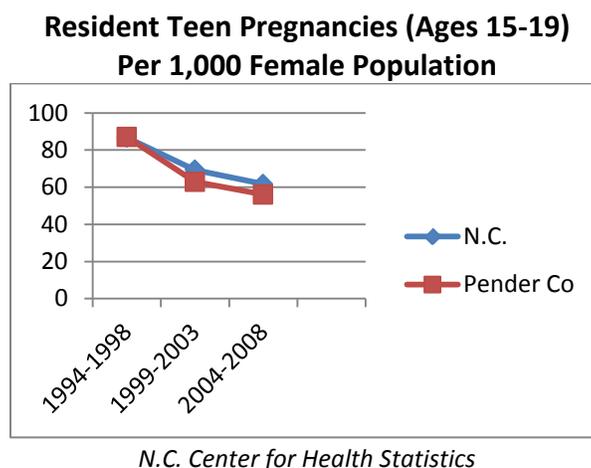


CATCH-NC Portal: Pender County Health Profile

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Health Information (cont)

North Carolina's teen pregnancy rates have declined greatly since 1990. This trend is also reflected in Pender County as well.



North Carolina has the 5th highest rate in the United States for childhood obesity. Unfortunately, Pender County continues to see gradual increases in overweight and obese prevalence among its children. Childhood obesity may be contributing to the decrease in child life expectancy. Nationally, more than one-third of children and youth are overweight and more than 17% are obese. Overweight and sedentary children are more likely to become overweight adults. Since habits are developed early in life that can persist into adulthood, interventions must target children and adults early on.

Child Overweight and Obesity Prevalence, 2008 and 2009

	Pender County Overweight Children	N.C. Overweight Children	Pender County Obese Children	N.C. Obese Children
2008	19.3%	16.4%	26.3%	17.5%
2009	19.2%	16.2%	28.4%	18.0%

NC Nutrition and Physical Activity Surveillance System

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Health Information (cont)

Cancer, heart disease, stroke, chronic lung disease, and diabetes are the leading causes of death in Pender County. By changing health behaviors, many of these could be prevented. Interventions must include activities that will address health behaviors and access to health care, especially disparate groups such as the unemployed, the uninsured/underinsured, the graying population and those without a high school education. Transportation services are limited providing further disadvantage to lower income and fixed income families who are less likely to have access to transportation. Racial disparities are uncommon in relation to infant mortality rates in Pender County. However, death rates for African Americans are much higher than rates for Whites in such areas as listed below:

Cause of Death	White Rate	African American Rate
Heart Disease	162.6	214.2
Cerebrovascular Disease	34.2	75.4
Cancer	189.6	200.5
Diabetes	20.4	65.0

N.C. Center for Health Statistics, 2005-2009

Male rates for most of the leading causes of death in Pender County are higher than female rates with the exception of cerebrovascular disease. A greater emphasis on men's health programs must be considered in health promotion planning.

Cause of Death	Male Rate	Female Rate	Overall Rate
Heart Disease	211.2	135.1	170.3
Cerebrovascular Disease	39.1	44.8	42.9
Cancer	234.4	158.4	190.5
Diabetes	34.0	24.8	29.7
Chronic Lung Disease	50.2	33.9	40.5

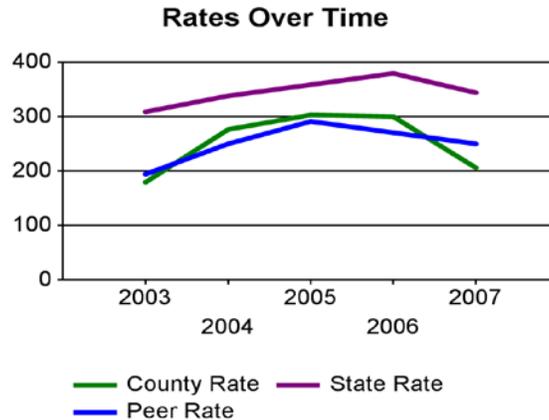
N.C. Center for Health Statistics, 2005-2009

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Health Information (cont)

In general, sexually transmitted diseases in Pender County are lower than the state rates. Gonorrhea and syphilis rates are declining while the North Carolina rate for gonorrhea is higher than the national rate. Chlamydia is the most prevalent STD in the state and that is also true in Pender County.

Chlamydia Rate per 100,000 Population **

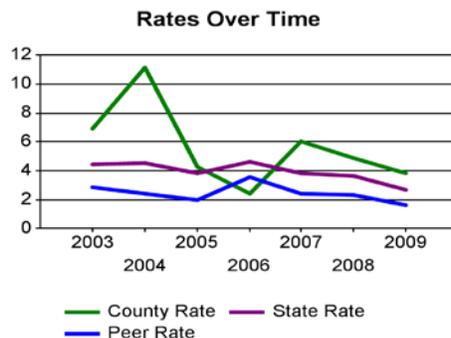


NC-CATCH Portal: Pender County Health Profile

Other communicable disease in Pender County has included Rocky Mountain Spotted Fever, Lyme Disease, Salmonellosis, and Shigella. There have been few diagnosed cases for the diseases listed, however the health department's communicable disease staff routinely monitor all reportable diseases.

Tuberculosis cases and rates have been decreasing in North Carolina and also in Pender County. However, the county rate is higher than the state rate and higher than other peer county rates. Health department staff work closely with state consultants to assure medical management and treatment protocols are according to the most current TB Guidelines.

Tuberculosis Rate per 100,000 Population **



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Health Resources

There are a limited number of medical and dental providers in Pender County. As discussed in the 2010 Community Health Assessment, health resources are limited and many residents must travel out of county for services. In addition, there are limited health promotion and wellness programs available within the county. There are two private gyms that require membership fees. The nearest YMCA is in adjoining New Hanover County. There are two parks managed by the county Parks and Recreation Department. These include ball fields and walking trails. Organized youth league activities are available for team sports. County schools have tracks and tennis courts but there is limited opportunity for the public to use them.

Pender County Government offers a wellness program for all county employees, with incentives for participation. As a result, participation has increased dramatically. Employees are encouraged to get routine annual screenings, participate in physical activity, and/or participate in wellness classes offered at regular intervals.

The county's Parks and Recreation Department has developed a strategic plan that includes additional walking trails, biking trails and outdoor playgrounds. Funding for such projects is an issue.

Pender County is fortunate to have numerous natural resources that can help promote physical activity. They include the coastline, National Forest land, and waterways. Health care providers are faced with the challenge of motivating patients and improving health behaviors to encourage residents to explore simple, inexpensive ways to "move more."

The Future

While there are many issues that impact one's health such as poverty, poor health care access, and unhealthy lifestyle behaviors, Pender County has seen improvement in several health outcome measures. A nurse health educator has been added to the health department staff and will be leading community health outreach and health education opportunities in the county. Health department staff is working hard to increase opportunities for collaboration among community, regional and state partners. Through a concerted effort, strategies and resources can be identified that will help address some of the main health priorities in the coming years. Healthy NC 2020 goals will serve as a means for gauging progress toward meeting identified Pender County health objectives that will help improve the health of our residents.