

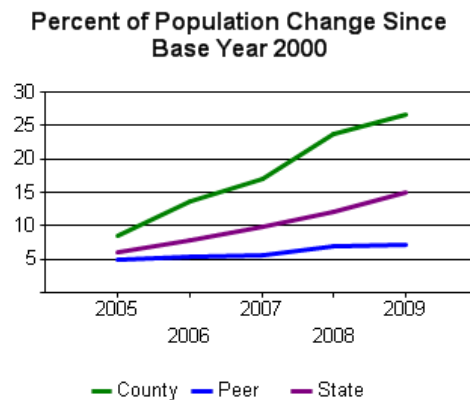


# State of the County Health Report Pender County, North Carolina December 2011

*The length and quality of life for all residents in Pender County must be linked to the health of the communities in which we live, work and play. This report will identify actions taken to address the community health concerns/priorities from the 2010 Community Health Assessment; current health status data for Pender County residents; and examine new initiatives and emerging issues that may impact the county's health.*

## Review of Health Status Data

Pender County had a population of 52,217 persons according to the 2010 U.S. Census. This reflects a 27.1% increase since the 2000 Census. Compared to the population growth of North Carolina and other counties of similar size, Pender County's growth exceeded the average rates.



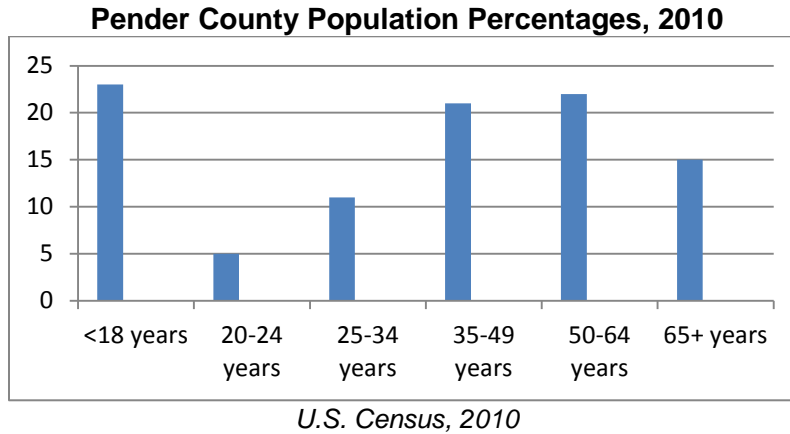
*CATCH-NC Portal: Pender County Health Profile*

There are 20,333 households with 28% of occupants under the age of 18 years. Pender County is predominantly Caucasian, 76.1%; 17.8% are Black or African American; 6.1% Hispanic; and smaller percentages of Native American, Asian, or Pacific Islander.

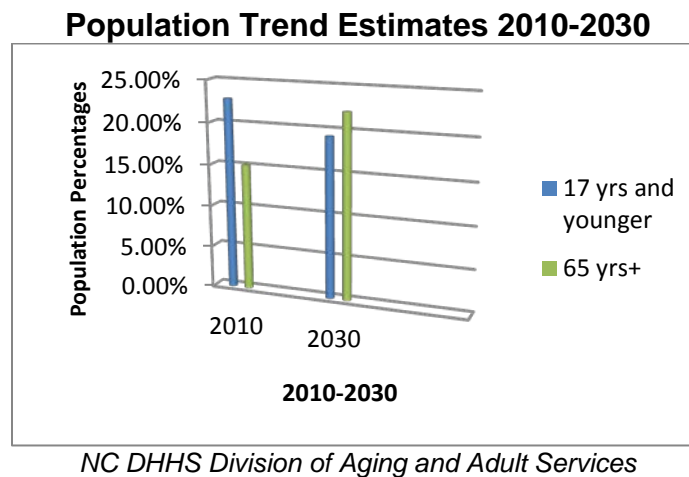


### Review of Health Status Data (cont)

According to the 2010 Census, 23% of the population was under the age of 18. Individuals ages 50-64 comprised 22% of the population and 21% were ages 35-49 years of age. Those adults, 65 years of age and older, made up 15% of the population. The median age for Pender County residents is 38.8 years.



According to the North Carolina Division of Aging and Adult Services the fastest growing population over the next 20 years will be those 65 years of age and older. In 2030, this age group will double. Of North Carolina's 100 counties, 71 will have more people over age 60 than under 17 years of age. Pender County will be one of those counties. See the graph below. Of note, aging problems were the second leading issue of concern identified in the community assessment survey.





## Review of Health Status Data (cont)

The ten leading causes of death for Pender County residents from 2005-2009 are:

1	Cancer- All Sites
2	Diseases of the Heart
3	Cerebrovascular Disease
4	Chronic Lower Respiratory Diseases
5	Diabetes Mellitus
6	Motor Vehicle Injuries
7	Other Unintentional Injuries
8	Nephritis, Nephrotic Syndrome, and Nephrosis
9	Suicide
10	Alzheimer's Disease

*Databook, N.C. State Center for Health Statistics*

The five major sites for all cancer deaths from 2005-2009 were:

Rank	Cancer Site	Pender County Rate	N.C. Rate
1	Lung/Bronchus	60.7	57.0
2	Female Breast	13.6	13.4
3	Colon/Rectum	12.2	16.5
4	Prostate	11.6	9.6
5	Pancreas	10.3	10.8

*N.C. State Center for Health Statistics*

The cancer sites listed above indicate the importance of early detection through preventive health screenings. Some deaths may have been prevented with early screening and lifestyle changes such as smoking cessation. The health department has a great opportunity through their health promotion program to conduct community education and awareness campaigns related to these findings. Unfortunately, access to care for preventative health care visits can be difficult with limited health care providers in the county. The number of primary care physicians per 10,000 population is of serious concern.

### Primary Care Physicians per 10,000 Population

	Pender County	North Carolina
2000	3.2	8.3
2004	2.5	8.6
2008	2.9	9.0

*State Center for Health Statistics*



## Health Disparities

While Americans as a group are healthier and living longer, segments of the population continue to suffer poor health status. Differences in the incidence and prevalence of health conditions and health status between groups are referred to as health disparities. Pender County has such health disparate groups 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:

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

Interventions must include activities that will address health behaviors and access to health care for such disparate groups and will be considered in health action plans that are tracked annually.



### Leading Causes of Death for Pender County 2005-2009 Age-Adjusted Rates

Leading Causes	Pender County Rate	N.C. Rate
Diseases of Heart	170.3	191.7
Cancer	190.5	185.6
---Colon, Rectum, and Anus	12.2	16.5
---Pancreas	10.3	10.8
---Trachea, Bronchus, and Lung	60.7	57.0
---Breast	13.6	13.4
---Prostate	11.6	9.6
Diabetes Mellitus	29.7	23.6
Chronic Liver Disease and Cirrhosis	9.4	9.1
Nephritis, Nephrotic Syndrome, and Nephrosis	20.1	18.7
Unintentional Motor Vehicle Injuries	28.2	17.6
Suicide	14.8	12.0
Alzheimer's Disease	14.5	28.3
All Causes	786.4	832.7

*N.C. State Center for Health Statistics*



### Review of Health Status Data (cont)

The Pender County Health Department and one private physician provide prenatal care in the county. Otherwise, residents must travel out of county for care. Pender Memorial Hospital does not offer labor and delivery services, thus the vast majority of deliveries are performed at New Hanover Regional Medical Center. While most of the 2007-2009 pregnancy outcomes for Pender County women are better than the state statistics, one category of concern is the percentage of all women who receive late or no prenatal care. Without early entry into prenatal care, women and their infants are at risk for unhealthy outcomes such as low birth-weight, developmental disabilities and fetal/infant death.

Health Indicator	North Carolina All Women	Pender County All Women	North Carolina Teens 15-19 yrs	Pender County Teens 15-19 yrs
Percent of Live Births with Late or No Prenatal Care	16.8	22.8	28.4	40.1

*N.C. State Center for Health Statistics*

In 2006, 57%-61% of Pender County adults were overweight or obese. According to the community assessment survey 43% of respondents said they did not exercise. Over 50% of respondents spent 2-3 hours a day of screen time (watching television, playing video games or using the computer, with another 20% reported they spent 4-5 hours per day in screen time activities. This epidemic presents a challenge to all communities as we attempt to identify and implement successful evidence based practices and to collaborate with various community agencies to address this problem.

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*



## Tracking Progress of Health Priorities

Three of the six community health concerns/priorities identified in the 2010 Community Health Assessment for Pender County were selected for tracking purposes. They are:

- Access to Care
- Chronic Disease
- Overweight/Obesity

Priority-Access to Care	Progress
Identify and promote medical and dental services for Pender County residents.	<ul style="list-style-type: none"> <li>✓ Enhance collaborative efforts between the health department, Pender Memorial Hospital, and other community health agencies to identify available medical and dental resources in the community for referral purposes.</li> <li>✓ Continue active dental program at the health department and on the mobile dental unit.</li> <li>✓ Increase community education and outreach regarding all health department services with a special emphasis on maternal and child health care.</li> <li>✓ Collaborate with Cape Fear Health Net to identify resources for individuals without health insurance or Medicaid.</li> <li>✓ Collaborate with Pender Adult Services regarding transportation options for medical and dental patients needing medical and dental care.</li> <li>✓ Health educator/RN hired at the Pender County Health Department to promote outreach for health education and health promotion activities.</li> <li>✓ Eligibility specialist hired at the Pender County Health Department to work closely with medical and dental clients to complete Medicaid applications and identify programs available to uninsured clients.</li> </ul>



## Tracking Progress of Health Priorities (cont)

Priority-Chronic Disease	Progress
<p>Decrease the number of hospitalizations related to chronic conditions such as diabetes, heart disease, and cerebrovascular disease.</p> <p><i>The Healthy North Carolina 2020 Objectives include: to reduce cardiovascular disease mortality rate to 161.5; to decrease the percentage of adults with diabetes to 8.6%; and to reduce colorectal cancer mortality rate to 10.1.</i></p>	<ul style="list-style-type: none"> <li>✓ Monthly meetings are held between the health department director, director of nursing and the Pender Memorial Hospital administrator to identify ways to partner to address community health issues and concerns.</li> <li>✓ <i>Diabetes Self Management Program</i> is offered through the Pender County Health Department. The program became certified by the American Diabetes Association in 2010. Referrals have been received from a variety of sources and the majority of patients completing the program have shown a decrease in their A1C results.</li> <li>✓ Collaboration with local providers and the community hospital to identify all diabetes programs and resources in the community to avoid duplication of service provision.</li> <li>✓ Collaborate with Americorp employee to provide health screenings for chronic diseases to migrant and seasonal farmworkers.</li> <li>✓ Collaborate with Pender Partners for Health to pursue grant funding for farmworker health care services.</li> <li>✓ Coordinate with area communities, towns, schools and other agencies to provide flu shots in their communities as well as promoting flu immunizations for county employees and residents.</li> </ul>





## Tracking Progress of Health Priorities (cont)

Priority- Overweight/Obesity	Progress
<p>Increase evidence-based programs to address physical fitness and nutrition.</p> <p><i>The Healthy North Carolina 2020 Objectives include: to increase the percentage of high school students who are neither overweight or obese to 79.2%; to increase the percentage of adults getting the recommended amount of physical activity to 60.6%; and to increase the percentage of adults who report they consume fruits and vegetables five or more times per day to 29.3%</i></p>	<ul style="list-style-type: none"> <li>✓ Collaborate with Pender County Schools, school nurses, and the School Health Advisory Council to identify programs and policies that address child obesity/overweight.</li> <li>✓ Health Educator/RN to identify all available resources in the community that address fitness and nutrition.</li> <li>✓ Collaborate with Parks and Recreation and Pender County Planning Department to identify available resources and to develop future plans for increased fitness opportunities such as parks, rails to trails, etc.</li> <li>✓ Collaborate with Pender County Schools to assure on-going community access to local school tracks, tennis courts, etc.</li> <li>✓ Health educator/RN hired at the Pender County Health Department to promote outreach for health education and health promotion activities.</li> </ul>



## **New Initiatives**

### **Breastfeeding**

The health department WIC Office continues to be a huge advocate of promoting healthy habits for pregnant women, infants and children. The program has received funding through the state WIC Program to hire a part-time Breastfeeding Peer Counselor. The counselor inquires about interest in breastfeeding during the prenatal period for WIC participants and provides a safe atmosphere for them to discuss their questions and concerns about breastfeeding. Mothers are contacted regularly after the birth of their infant to provide support and to be a first line of defense in addressing breastfeeding problems.

### **County Health Rankings: 2011 North Carolina**

The health of a community depends on factors such as quality of health care, education and jobs, environment, and individual behaviors. The Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute selected a number of population health measures based on availability of county data. Counties in every state of the country were ranked on health outcomes and health factors. Health outcomes included length and quality of life. Health factors included health behaviors, clinical care, social and economic factors, and the physical environment. A summary of Pender County's rankings placed health outcomes at **#31** out of the state's 100 counties and health rankings at **#54**. Clinical care and health behaviors ranked **#77** and **#81**, respectively. It is only through community collaborative efforts with an emphasis on health promotion and health education that factors such as these can be best addressed.

**Organizational Changes** The Pender County Health Department has participated in a variety of program assessments and organizational reviews. These findings have led to many changes in an attempt to increase efficiency while providing quality services. A greater emphasis has been placed on community outreach and health education as well as preventive health care provision.



## Emerging Issues

### Graying Population

Fifteen percent of the Pender County population is over the age of 65 years. According to the North Carolina Division of Aging and Adult Services, the fastest growing population over the next 20 years will be those 65 years of age and older. In 2030, this age group will double and 71 of North Carolina's 100 counties will have more people over the age of 60 years than under the age of 17 years. Pender County is one of those counties. Special consideration will need to be given to enhancing health promotion/disease prevention programs for this graying population.

**Obesity/Overweight** Overweight and obesity can lead to serious health issues for children and adults. Poor eating habits and lack of physical activity are major contributors to this epidemic. Heart disease, high blood pressure, stroke, diabetes, and certain forms of cancer can be attributed to overweight/obese conditions. In 2006, 57-61% of Pender County adults were overweight or obese. In 2009, 19.2% of children were overweight and 28.4% were obese. Community solutions are needed for this community problem and this data will be helpful in future program development and possible intervention strategies.

**Public Health Funding** State and federal budget shortfalls directly impact the delivery of local public health services. With an uncertain economy, funding for public health programs and services may decrease at the same time community needs for services increase.

**Electronic Medical Records** "Going paperless" will soon be the push for local health departments as information technology expands and the need for participation in health information systems that will connect with other health care providers and hospitals becomes a requirement. Statewide efforts are in progress and the health department must be ready to embrace and respond to new technology and the changes associated with it.