



2018 Haywood County Community Health Assessment

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November 27, 2018 and January 10, 2019



Overview

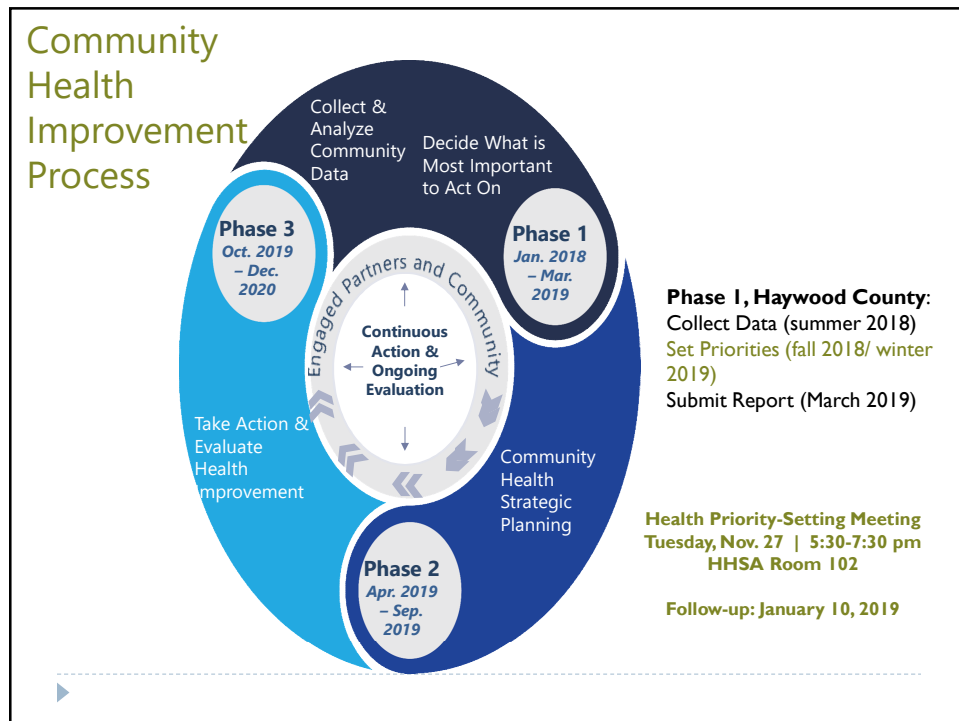
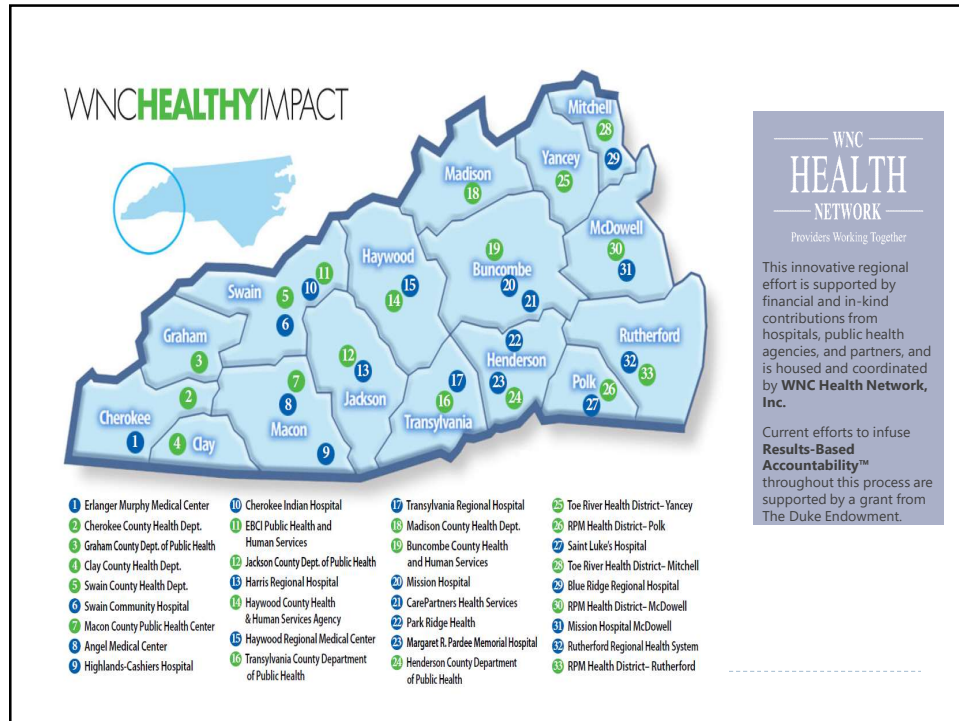
Priority-Setting Meeting 1 11/27/18

- Review data and handouts
- Discuss and rank health issues in groups in terms of:
 - 1) relevance,
 - 2) potential impact
 - 3) feasibility
- Collectively prioritize health issues in real-time

Priority-Setting Meeting 2 1/10/19

- Recap 11/27/18 Meeting
- Discuss proposed top 3 priorities
- Review handouts and discuss in groups for each of top 3 priorities
- Report out as a group

▶ All Haywood County landscape photos taken by and used with permission from Kara Sither

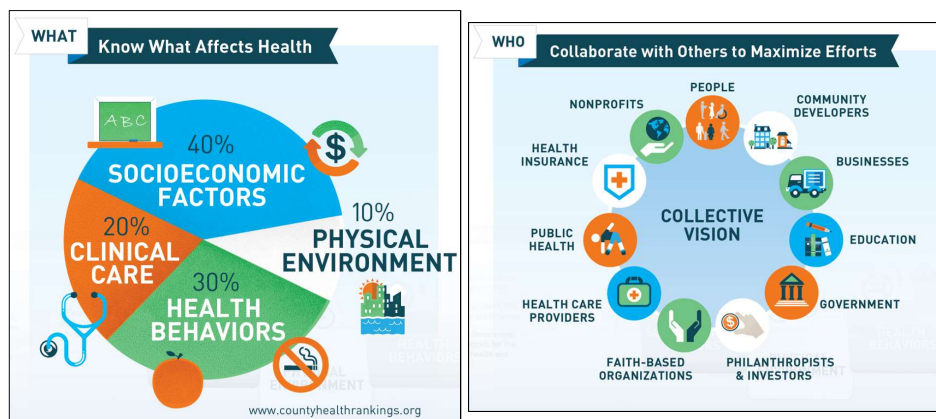


Methodology

Product	Source	Description
Community Health Survey (Adults)	Professional Research Consultants (PRC)	Phone-based and online survey 78 questions including: demographic, morbidity, behavior, ACEs, etc.
Data Workbook (Survey & Secondary Data)	Publicly available data (U.S. Census, NC State Center for Health Statistics, other state and federal data)	175+ Indicators including: demographic, morbidity, mortality, social determinants, environmental, etc.
Online Key Informant Survey	Professional Research Consultants (PRC)	Survey input from selected individuals to identify major health issues, gaps in services, and other factors.
Maps	Community Commons and NC State Center for Health Statistics	23 maps including: selection of population, and morbidity and mortality indicators.
Supplemental Local Data	Focus group Online survey	



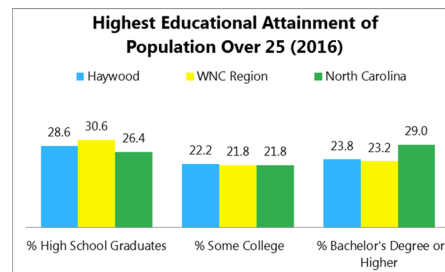
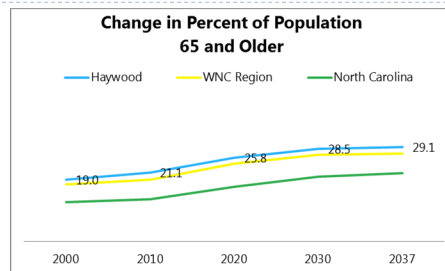
Improving Community Health



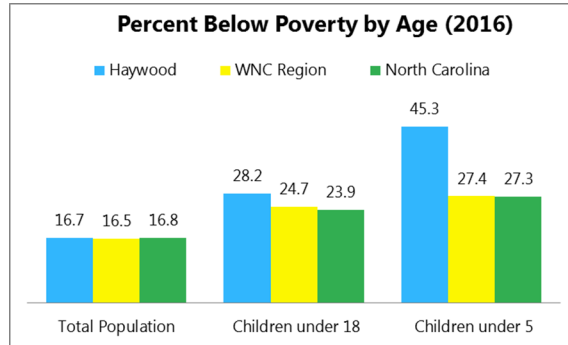
Haywood County: A Look at the Key Data



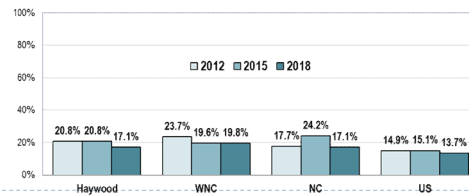
Social Determinants



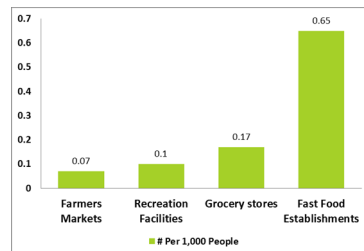
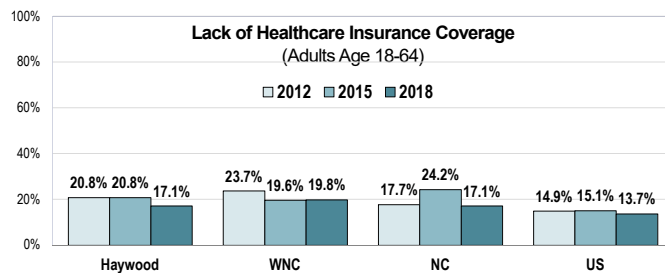
Social Determinants



Median Income
 Haywood: \$43,097
 WNC: \$40,004
 NC: \$48,256



Health Resources/Environment



WHAT IT MEANS:

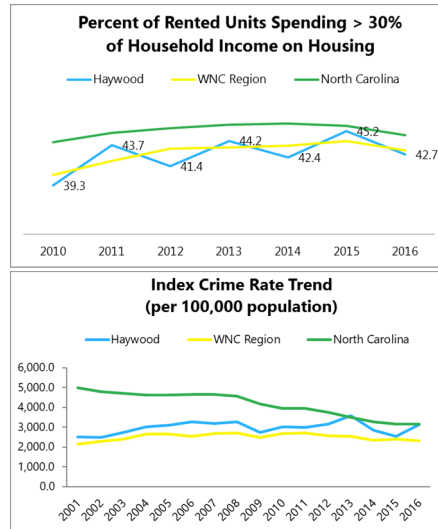
- 17% of adults still don't have health insurance
- There are far more fast food establishments per capita than other health-promoting establishments.

WHY IT MATTERS:

- Lack of insurance is a health risk and costly to system.
- The built environment is a big factor on health!



Housing & Crime Rate



Haywood County Causes of Death

Rank	Cause of Death	Haywood	
		# Deaths	Death Rate
1	Diseases of Heart	943	191.1
2	Cancer	758	151.3
3	Chronic Lower Respiratory Diseases	261	50.0
4	All Other Unintentional Injuries	164	46.7
5	Cerebrovascular Disease	205	39.4
6	Pneumonia and Influenza	99	20.2
7	Alzheimer's disease	103	19.7
8	Suicide	54	16.5
9	Chronic Liver Disease and Cirrhosis	59	15.3
10	Nephritis, Nephrotic Syndrome, & Nephrosis	74	14.4
11	Diabetes Mellitus	61	13.8
12	Unintentional Motor Vehicle Injuries	46	13.3
13	Septicemia	41	8.3
14	Homicide	11	4.1
All Causes (some not listed)		3,705	779.9

Substance Use

Survey Data	Prevalence
Drinker	35.4%
Excessive drinker (Women: >1/day, Men: >2/day)	9.5%
Binge drinker (Women: >4/episode, Men: >5/episode)	6.0%
Used opiates in last month (with or without Rx)	15.3%
Life negatively affected by substance use (by self or other)	38%
Reportable crimes in Haywood County Schools due to substance use (possession of controlled substance or alcohol)	71%

WHY IT MATTERS:

- Alcohol use, though legal, is a risk factor for many chronic diseases conditions and receives much less attention than opioid use.
- Similar prevention strategies can be used to target addiction across substances
- Prevention must target youth, but we need more youth data.



ED Data – Key Substance Use Indicators

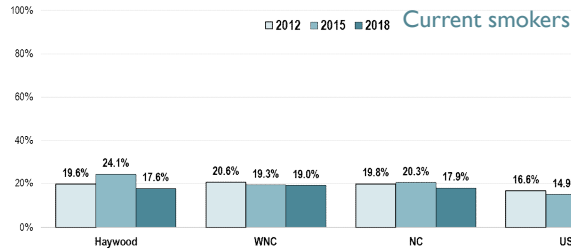
Haywood NC Residents seen at area hospital Emergency Departments 2009 – 2018
Source: NC Detect*

Year	Opioid Overdose	Heroin Overdose	Meth Use	Acute Alcohol Intoxication	Alcohol Abuse & Dependence	Alcohol-Underage
2018	78	33	10	286	627	11
2017	85	46	4	321	665	12
2016	43	15	7	270	597	20
2015	24	5	9	101	303	19
2014	24	3	0	113	209	14
2013	14	1	8	104	240	25
2012	21	1	7	158	396	16
2011	38	0	5	119	306	24
2010	32	0	8	92	277	18
2009	24	0	9	56	234	20

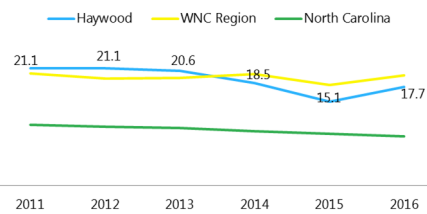
*NC DETECT is a statewide public health syndromic surveillance system, funded by the NC Division of Public Health (NC DPH) Federal Public Health Emergency Preparedness Grant and managed through collaboration between NC DPH and the UNC-CH Department of Emergency Medicine's Carolina Center for Health Informatics. The NC DETECT Data Oversight Committee is not responsible for the scientific validity or accuracy of methodology, results, statistical analyses, or conclusions presented.



Smoking



Percent of Births to Mothers who Smoked Prenatally



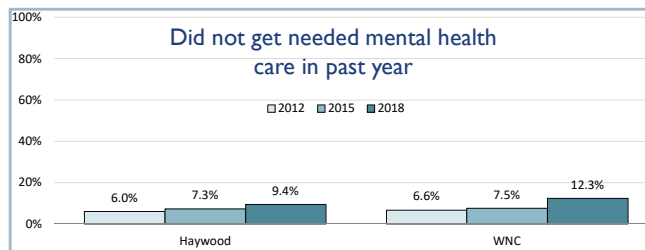
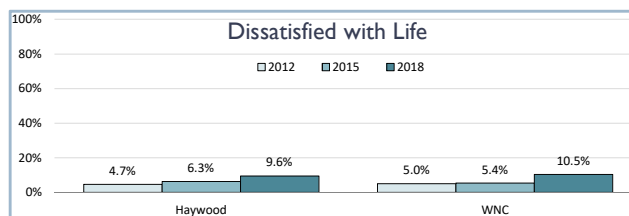
WHAT IT MEANS:

- Almost 18% of adults (including pregnant women) smoke
- (5.6% vape and 7.6% use smokeless tobacco)

WHY IT MATTERS:

- Smoking is the primary cause of lung cancer, respiratory diseases like COPD and a host of other conditions.
- During pregnancy it contributes to low birth weight or pre-term birth
- Costs: Lung Cancer: \$13.4 billion; COPD: \$32.1 billion.

Mental Health



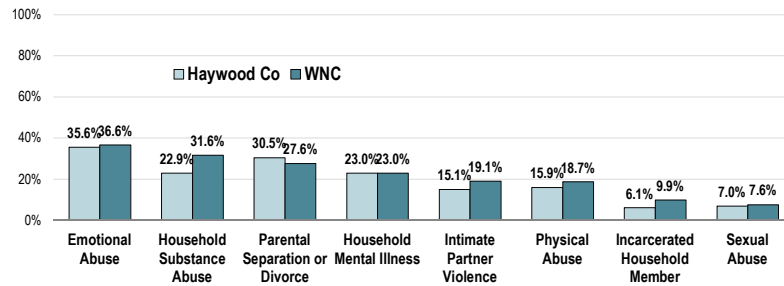
What it Means:

- Almost 10% of adults were "dissatisfied" or "very dissatisfied" with life.
- >9% didn't get the mental health care they needed

WHY IT MATTERS:

- Mental and physical health are almost inseparable.
- Insurance coverage needed to treat illnesses.

Adverse Childhood Experiences (ACEs)



WHAT IT MEANS:

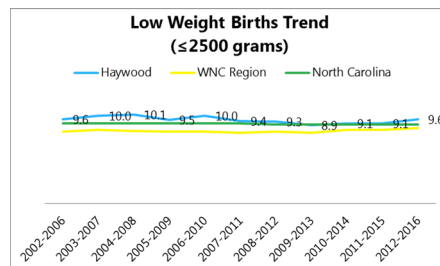
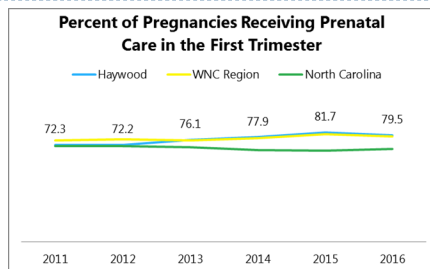
- Surveyed adults reported experiencing the ACEs above prior to age 18.
- >10% experienced 4 or more of the ACEs above.

WHY IT MATTERS:

- ACEs increase the risks of substance use, negative behavioral/mental health conditions and chronic disease.
- Building resilient skills can mitigate these risks and improve health.



Perinatal/Early Child Health



WHAT IT MEANS:

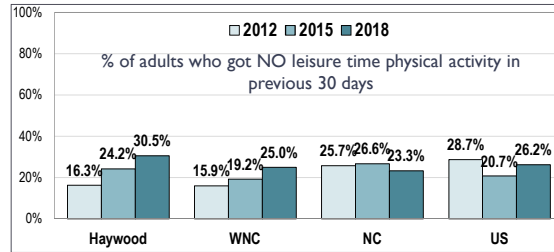
- 20.5 % of pregnant women did not get prenatal care in 1st trimester
- 10% of babies born low birth weight, 11% pre-term
- (Prenatal smoking rate: >17%)

WHY IT MATTERS:

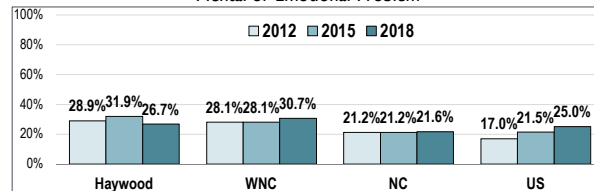
- ▶ Health behaviors and conditions in pregnancy affect mother **and** baby across the lifespan.
- ▶ Smoking increases the risk for low birth weight and pre-term birth, increasing risk for death, related morbidities, cost.
- **Cost:** Preterm birth and LBW cost ~\$26 Billion.



Physical Activity



% of adults who were Limited in Activities in Some Way Due to a Physical, Mental or Emotional Problem



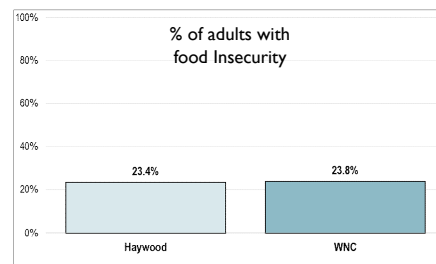
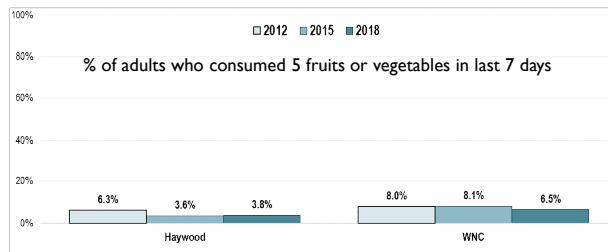
WHAT IT MEANS:

- 81.1% of Haywood County residents are NOT meeting physical activity guidelines (150 min/week)
- ~27% were limited in activities due to a physical, mental and/or emotional problem

WHY IT MATTERS:

- Physical inactivity a major contributor to obesity and variety of chronic diseases
- Knowing why people are inactive will help target interventions

Nutrition & Food Security



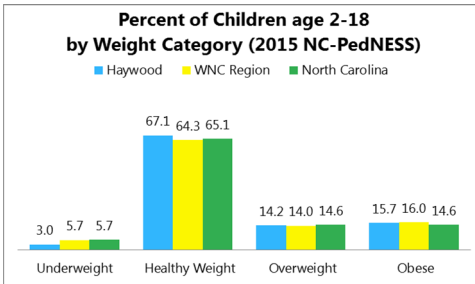
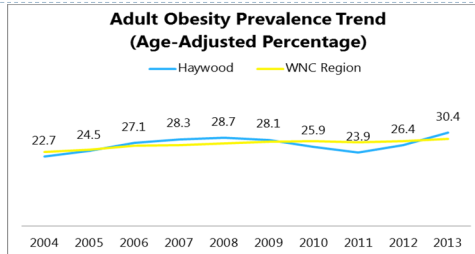
WHAT IT MEANS:

- **96.2%** of Haywood county residents did **not** eat the # of fruits and vegetables recommended for a healthy diet.
- **>23%** of Haywood County residents worried they would – or did - run out food and money to buy it.

WHY IT MATTERS:

- A healthy diet is a factor in preventing obesity and most chronic diseases.
- Beyond education or behavior choices, access to healthy foods is key.

Obesity



WHAT IT MEANS:

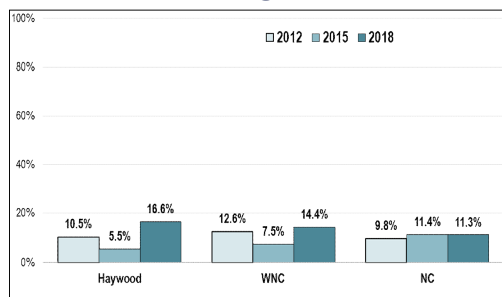
- Almost 1/3 of adults and 16% of children in Haywood County are obese.

WHY IT MATTERS:

- Obesity is a primary factor in numerous chronic diseases, health conditions and quality of life concerns.
- Cost: \$150-200 billion per year (\$14 billion for childhood obesity)

Diabetes

% Adults with Diagnosed Diabetes



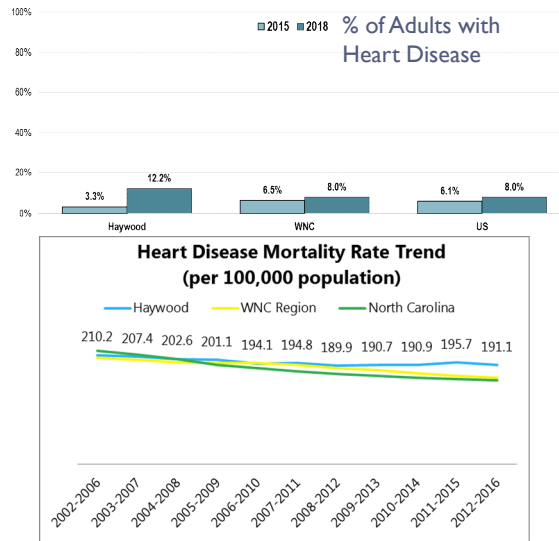
WHAT IT MEANS:

- >16% of adults have diabetes; another 13% are borderline/pre-diabetic.

WHY IT MATTERS:

- **Costs:** \$327 billion in 2017
- **Quality of Life:** People with type 2 diabetes may have a life expectancy that is up 10 years shorter than people without diabetes.
- It's **preventable!**

Heart Disease



WHAT IT MEANS:

- ▶ 12% of adults have diagnosed heart disease.
- ▶ Mortality rates are decreasing, but it's the biggest cause of death here.

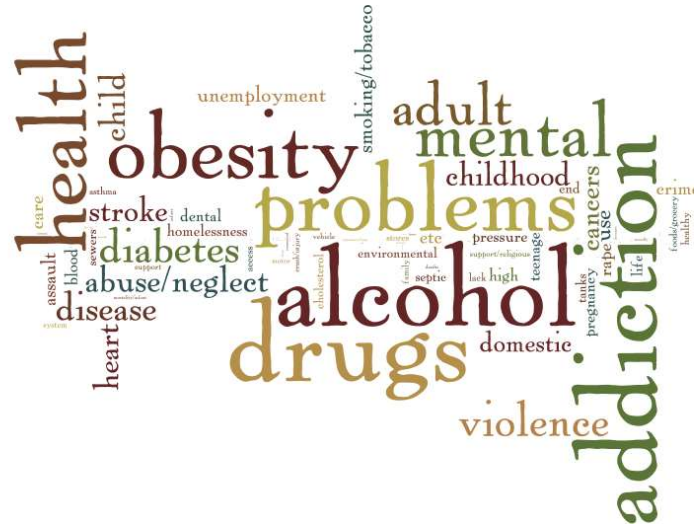
WHY IT MATTERS:

- ▶ **Costs:** Heart disease: \$555 billion, Stroke: \$34 billion
- ▶ **Quality of life:** Quality-adjusted life expectancy (QALE) for those with heart disease reduced by 10.3 years and stroke by 12.4 years
- ▶ **Other risk factors:** High Blood Pressure (43.8%) and High Blood Cholesterol (34.5%)

What Enables Health (in our own words)



Barriers to Health (in our own words)



Getting to Priorities

Data that stood out...

Diabetes, heart disease, causes of death

Demographics, falls, Alzheimer's

ACES/trauma, lack of care, suicide

Diet, food security, physical activity, obesity

Prenatal care, smoking, substance use; birth outcomes

Resources, access, income, education, housing.

Alcohol, tobacco, and drug use

Named



Priority Options

Chronic Disease Prevention

Elder Health

Mental Health

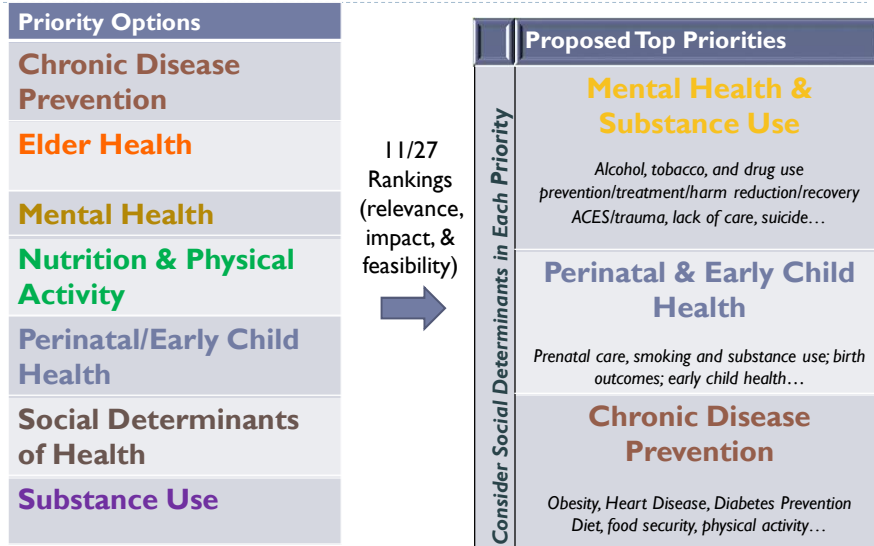
Nutrition & Physical Activity

Perinatal/Early Child Health

Social Determinants of Health

Substance Use

Getting to Top Priorities



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