



2021

**DAVIDSON COUNTY
COMMUNITY
HEALTH NEEDS
ASSESSMENT**

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This report is a result of a collaborative effort of community partners in Davidson County. Many individuals and organizations contributed to the 2021 Community Health Needs Assessment process, particularly:

Atrium Wake Forest Baptist Health - Lexington Medical Center
Novant Health - Thomasville Medical Center
Davidson County Health Department

A special thanks to Jane Murphy and Diane Horton, for EVERYTHING. A huge thank you to Lillian Koontz for believing in me and for your unwavering support.

To Davidson County Community Partners and Stakeholders:

Thank you for your patience, grace, and flexibility as I have worked to develop this report. I am humbled by how much I have learned about our county and the tremendous work being done to improve the overall health of Davidson County.

To all who live, work, play, and learn in Davidson County:

Thank you for choosing Davidson County. Without community members living their day-to-day lives, we would be unable to observe the success of our county and unable to assess the gaps in our community. I appreciate everyone who took the time to respond to the 2021 Community Health Needs Assessment; your contribution is essential.

I look forward to the future as we work together for the benefit of this great community.

With gratitude,

Janna Walker

Janna Walker, MS, IBCLC
Public Health Strategist
Davidson County
Health Department



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INTRODUCTION

The 2021 Davidson County Community Health Needs Assessment was conducted by the Davidson County Health Department in partnership with Novant Health Thomasville Medical Center and Atrium Wake Forest Baptist Health Lexington Medical Center. The Community Health Needs Assessment (CHNA) is a collaborative effort completed every three years with the objective of identifying barriers and needs of the citizens as they relate to the health of individuals and the population as a whole.

EXECUTIVE SUMMARY

INTRODUCTION AND VISION

The role of public health to the average Davidson County citizen may not be clear or may be misunderstood. The role of public health is to promote and protect the health and overall well-being of Davidson County as a whole and the individuals and families that live, work, and play here. Through the CHNA, it is the collective goal to receive insight into the population and then utilize that information to drive the work of community stakeholders for the benefit of improving the health of the population.

LEADERSHIP

The leadership for the 2021 Davidson County CHNA was unique due to the restrictions that the COVID-19 pandemic placed upon us. Each organization was represented by two individuals, totaling six individuals that comprised the leadership team.

REGIONAL/CONTRACTED SERVICES

In an effort to conserve funds and to conduct a more organic CHNA, no services were contracted out for the production of this project. The CHNA questionnaire was drafted and finalized by the leadership team for the CHNA. The Public Health Strategist at the Davidson County Health Department completed the primary data analysis and provided the written report.

THEORETICAL FRAMEWORK

1. Establish CHNA Leadership Team – The Davidson County CHNA Leadership team included representation from Administration, Community Engagement, and Chaplain services from local healthcare and public health. The team was purposefully kept small but efficient due to COVID-19 restrictions.
2. Collect Primary Data – Community Health Needs Survey
3. Collect Secondary Data – Gathered data from state and national-level sources, along with data surrounding social determinants of health
4. Analyze and interpret county-level data – in-depth data review session with CHNA Leadership Team
5. Determine health priorities – Review priorities identified from Community Health Needs Survey responses and review secondary data related to top priorities identified
6. Create CHNA report
7. Disseminate the CHNA findings – Distribute CHNA report and present CHNA findings to community stakeholders, civic groups, and local media
8. Develop Community Health Improvement Plans – Strategic plans that address health priorities identified in the CHNA and explain how progress will be measured in the short and long term.

COLLABORATIVE PROCESS SUMMARY

The CHNA is a community collaborative with the common goal of bringing to light the gaps and areas of need as they relate to the overall health of Davidson County residents. Initiated in June 2021, the CHNA process began swiftly, and the Community Health Needs Survey was distributed widely beginning on September 10, 2021. A CHNA toolkit was provided to organizations and community groups across the county, with many opting to promote the survey on various social media platforms and organizational websites. The survey was open for only 24 days, in which 791 responses were received. Due to heightened COVID-19 restrictions, small group listening sessions were not held in order to protect the safety of individuals and concerns regarding the productivity of virtual sessions. On October 28, 2021, the results of the Community Health Needs Survey were presented to the CHNA Leadership Team, who then unanimously voted to identify the health priorities. In the weeks and months following, the CHNA report was developed as well as an accompanying presentation that was introduced to key community stakeholders in February 2022.

NEXT STEPS

The CHNA serves as a call to action for our community leaders and stakeholders to walk side-by-side and work together to assemble work groups, develop action plans, implement change, and track progress in hopes of a healthier Davidson County. A collaborative Community Health Improvement Plan (CHIP) will be developed and submitted in September 2022.

ACRONYMS

- ACEs – Adverse childhood experiences
- ACS - American Community Survey
- BRFSS – Behavioral Risk Factor Surveillance System
- DCHD – Davidson County Health Department
- DDCC - Davidson Davie Community College
- CDC – Centers for Disease Control and Prevention
- CHNA – Community Health Needs Assessment
- CHIP – Community Health Improvement Plan
- FPL – Federal Poverty Level
- HNC 2030 – Healthy North Carolina 2030
- LMC – Atrium Wake Forest Baptist Health - Lexington Medical Center
- NC DHHS – North Carolina Department of Health and Human Services
- NC DPH – North Carolina Division of Public Health
- OSUAP - Opioid & Substance Use Action Plan
- SNAP - Supplemental Nutrition Assistance Program
- TMC – Novant Health - Thomasville Medical Center
- YPLL - Years of Potential Life Lost

COMMUNITY HEALTH NEEDS ASSESSMENT PROCESS

Local health departments in North Carolina are responsible for conducting a Community Health Assessment (CHA) every four years as part of the Consolidated Agreement with the North Carolina Division of Public Health (NC DPH). Similarly, not-for-profit hospitals are required to conduct a Community Health Needs Assessment (CHNA) every three years. In order to avoid duplicative efforts and to utilize community resources efficiently, the Davidson County Health Department (DCHD), Atrium Wake Forest Baptist Health – Lexington Medical Center (LMC) and Novant Health – Thomasville Medical Center (TMC) work as a collaborative to conduct the CHNA every three years. The purpose of the CHNA is to gather information from those who live, work, and play in Davidson County and to identify gaps or barriers that exist in the community as they relate to the overall health of the population.

ESTABLISH CHNA LEADERSHIP TEAM

Historically the CHNA Process in Davidson County involved the DCHD, LMC, TMC, and community stakeholders, who, as a whole, formed a group known as Davidson County Healthy Community Coalition. This group was the leadership committee and key community stakeholders that initiated the CHNA process. Since the 2018 CHNA was completed, the Davidson County Healthy Community Coalition has dissolved as a result of members retiring, career changes, and a new CHNA coordinator at the Davidson County Health Department. The 2021 CHNA process started at square one with the impact of the COVID-19 pandemic making direct community engagement not related to the pandemic nearly impossible. The leadership team for the 2021 Davidson County CHNA consisted of the Public Health Strategist and Health Director representing the health department, the manager of Special and Community Events and hospital President representing TMC, and the Manager of Chaplaincy and Clinical Ministries and hospital President representing LMC. This team assembled in June 2021 and successfully developed a survey tool that would solicit

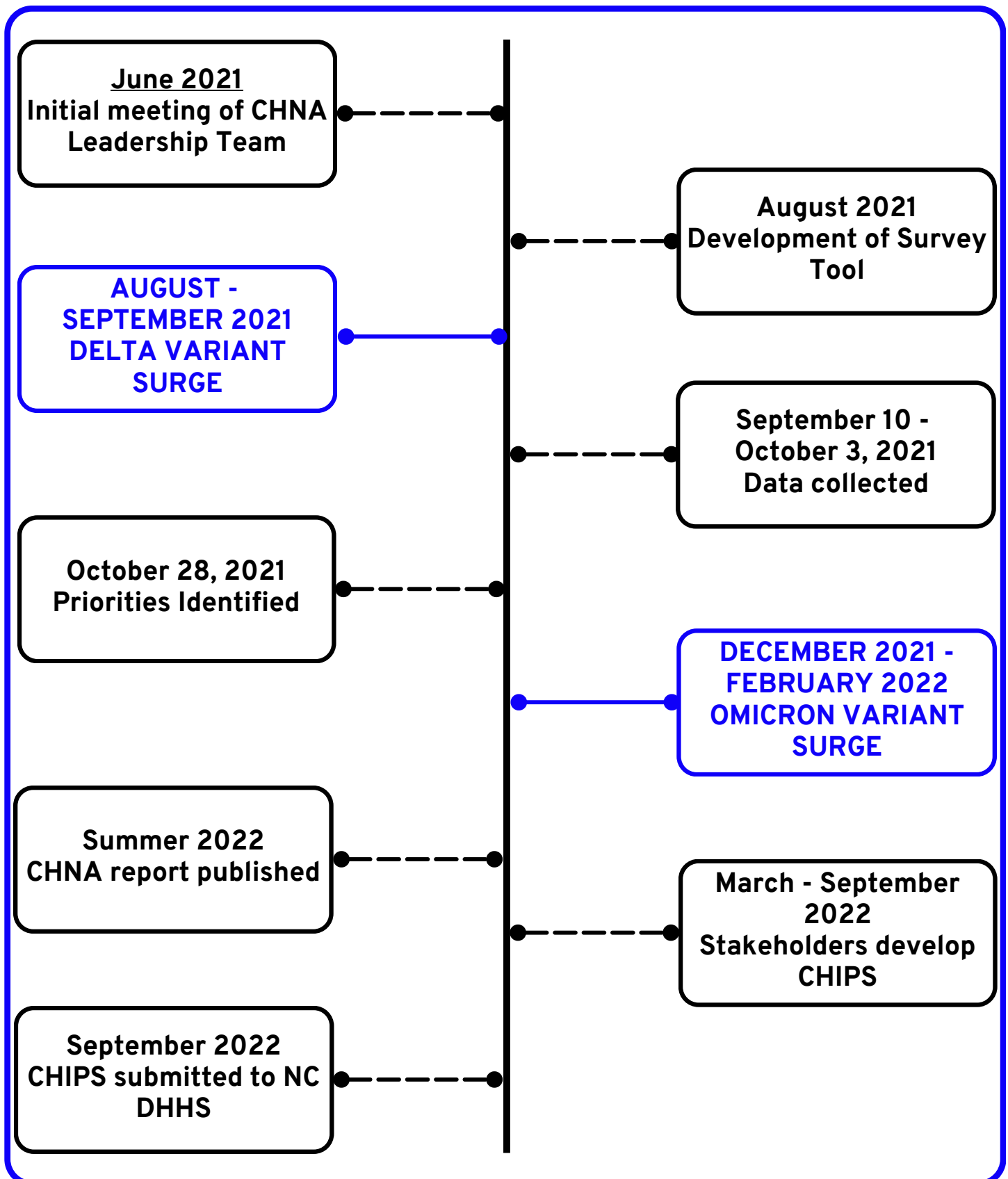


Figure 1: Community Health Needs Assessment Timeline

feedback from individuals who live, work, play and learn in Davidson County.

DATA COLLECTION

The CHNA Leadership team worked to carefully craft a questionnaire that would capture a broad range of information without being a burden to the survey respondent. The questionnaire consisted of 32 required questions and concluded with a comment box for respondents to provide additional thoughts. The questionnaire sought feedback on topics including but not limited to:

- Nutrition
- Physical Activity
- Healthcare
- Environment
- Housing
- Health Behaviors

In less than 30 days, approximately 791 responses were received. These results were analyzed and presented to the CHNA leadership team. In addition to the primary data collected through the survey tool, secondary data was collected from state and national sources, including the American Community Survey from the United Census Bureau, the Behavioral Risk Factors Surveillance System (BRFSS), from the Centers for Disease Control and Prevention (CDC), the North Carolina Center for Health Statistics, and County Health Rankings from the Robert Wood Johnson Foundation.

HEALTH ISSUES IN DAVIDSON COUNTY PRIORITIZED BY SURVEY RESPONDENTS

<u>ANSWER CHOICES</u>	<u>RESPONSES</u>
SUBSTANCE ABUSE	55.75
OBESITY	52.21%
MENTAL HEALTH	49.43%
DIABETES	40.71%
CANCER	24.27%
ALCOHOLISM	21.11%
TOBACCO	17.95%
INFECTIOUS DISEASES	16.69%
OTHER CHRONIC DISEASES	9.48%
SEXUALLY TRANSMITTED DISEASES	4.55%
LUNG DISEASE	3.92%
PEDIATRIC HEALTH	3.92%

Table 1: Health Issues in Davidson County prioritized by survey respondents

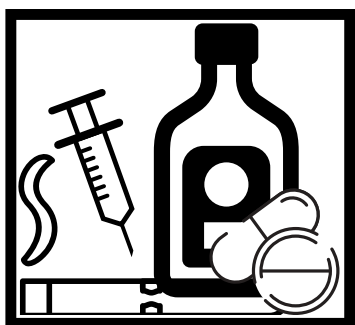
HEALTH BEHAVIORS PRIORITIZED BY SURVEY RESPONDENTS AS TOPICS NEEDING MORE EDUCATION IN THE COMMUNITY

<u>ANSWER CHOICES</u>	<u>RESPONSES</u>
DRUG USE	52.47%
PREVENTATIVE HEALTH CARE	47.28%
STRESS MANAGEMENT	36.54%
NUTRITION	32.74%
IMMUNIZATIONS	29.84%
TOBACCO/ALCOHOL USE	26.80%
SUICIDE PREVENTION	21.74%
EXERCISE	21.49%
SAFE DRIVING	13.91%
EMERGENCY PREPAREDNESS	11.25%
ORAL HEALTH	5.94%

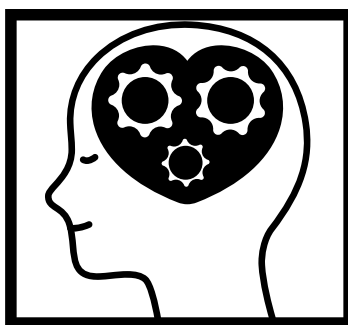
Table 2: Health Behaviors prioritized by survey respondents as topics needing more education in the community

DETERMINING HEALTH PRIORITIES

In October 2021, the CHNA Leadership Team reviewed the primary and secondary data, and compared the information to the 2018 CHNA priorities and supporting data. The team also looked at the findings with consideration of the impact that the COVID-19 pandemic has had on the community in all facets. It was unanimously decided that the priorities should remain substance misuse, mental health, and chronic disease.



SUBSTANCE MISUSE



MENTAL HEALTH



CHRONIC DISEASE

COVID-19 LENS



Due to the mitigation strategies in place and the strain on healthcare and public health in response to the COVID-19 pandemic, adjustments to the CHNA data collection process were agreed upon by the leadership team. Focus groups and a community stakeholder survey were eliminated for this CHNA cycle due to time constraints imposed on the leadership team by direct involvement in the response efforts to COVID-19.

NEXT STEPS

Change in our community is not possible if we are not working together. After the priorities had been determined by the CHNA Leadership Team, Davidson County stakeholders were invited to a presentation in February 2022 of the 2021 CHNA results.

Stakeholders were also introduced to the concept of S.H.A.P.E. Davidson County, a network committed to Davidson County, the CHNA, and Community Health Improvement Plans (CHIPs).

In the months following, utilizing the primary and secondary data, the CHNA report was drafted by the Public Health Strategist at the Davidson County Health Department. The vision of the Public Health Strategist was that the CHNA report is a useful tool that would illustrate metrics that impact the health and wellbeing of Davidson County. The finalized report will be published on the Davidson County Health Department website and shared with community stakeholders and partner agencies across Davidson County.

COMMUNITY HEALTH IMPROVEMENT PLANS

Community Health Improvement Plans (CHIPs) are developed collaboratively and detail plans for how we will address the priority areas identified in the CHNA. The CHIPs will be completed using Clear Impact Scorecard, allowing for the work being done to be transparent to the community and progress easily determined. The CHIPs will be completed by September 2022.

DAVIDSON COUNTY COMMUNITY PROFILE

Davidson County is a large, primarily rural county created in 1822 out of what was Rowan County[1] by the North Carolina Legislature. Davidson County comprises approximately 522 square miles and is bordered by Davie, Rowan, Forsyth, Randolph, Guilford, and Montgomery Counties. Five municipalities, Denton, Lexington, Midway, Thomasville, and Wallburg, represent the various communities and townships found within Davidson County, with Lexington and Thomasville being the most populous.

Uniquely, Davidson County has three distinct public school systems, K-12. Davidson County Schools, Lexington City Schools, and Thomasville City Schools. Davidson County also has one higher educational institution, Davidson-Davie Community College, which originated in 1963 as the Davidson County Industrial Education Center and became the Davidson County Community College (DCCC) in 1965. The college has grown significantly over the years, including a campus in Davie County. The community college serves over 11,000 students a year and offers over 40 different programs of study. In January 2021, the college adopted its current name, Davidson-Davie Community College (DDCC), reflecting the communities directly served by the school.[2]

[1] (County History)

[2] (Davidson-Davie History, 2021)

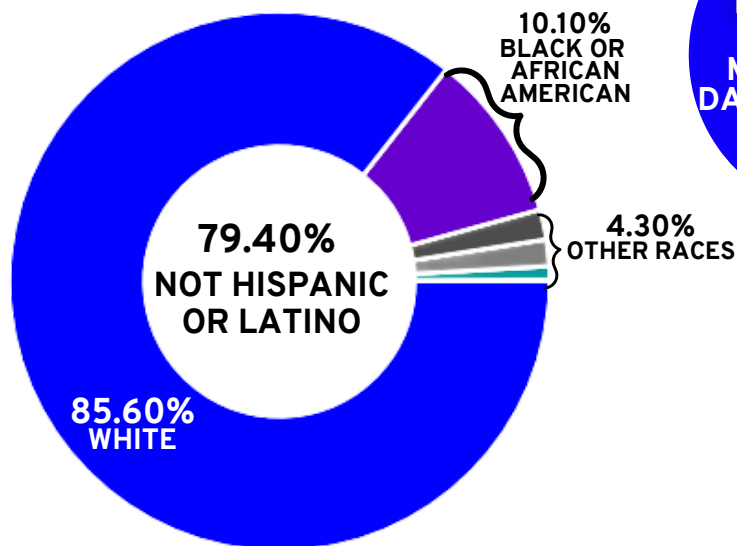
DAVIDSON COUNTY FAST FACTS

DAVIDSON COUNTY POPULATION

168,930

APRIL 1, 2020 - DECENNIAL CENSUS

DAVIDSON COUNTY POPULATION - BY RACE AND ETHNICITY



42.5
MEDIAN AGE OF
DAVIDSON COUNTY
POPULATION

\$49,546
MEDIAN HOUSEHOLD
INCOME
2015-2019



DAVIDSON COUNTY POPULATION - BY AGE GROUP

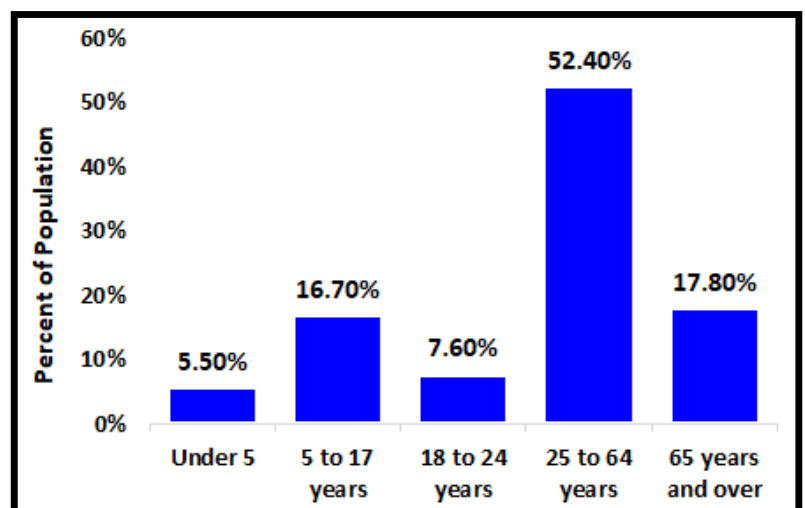
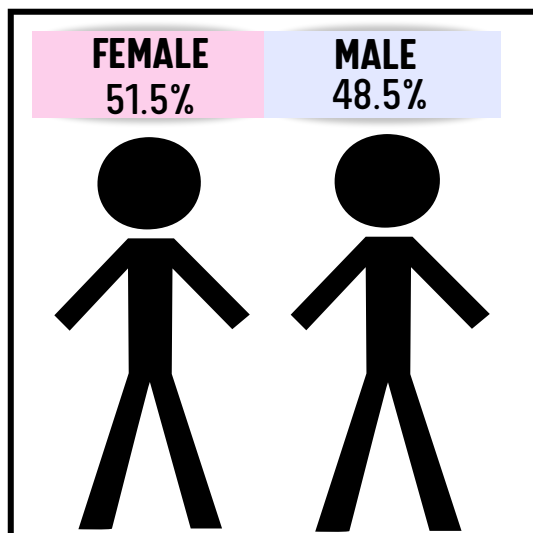


Figure 2: Davidson County Fast Facts - Source: US Census - Fast Facts

DRIVERS OF HEALTH

When we think about our own personal health, what condition our health is in may be attributed to many different factors. We simply are not just the way we are; our health is ultimately influenced by more than our individual actions. Health is influenced by the communities in which we live, work, learn, and play, and not all communities are created the same. Drivers of health (social determinants of health) are the various different factors in our communities that influence health outcomes.[3]

Using the Population Health Model developed by the Robert Wood Johnson Foundation, the North Carolina Institute of Medicine and the North Carolina Department of Health and Human Services published Healthy North Carolina 2030, providing 21 health indicators that represent a diverse range of population health issues occurring across North Carolina. Each health indicator is accompanied by performance measures, allowing for routine data collection and transparency of progress made towards the desired result.

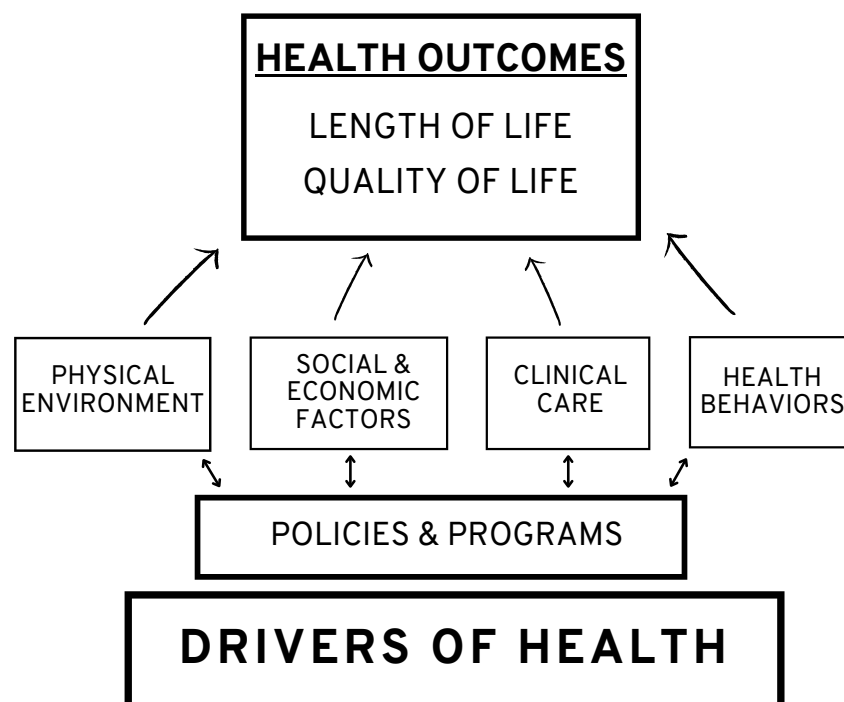


Figure 3: Drivers of Health - adapted from the Population Health Model - Robert Wood Johnson Foundation

[3] (North Carolina Institute of Medicine. Healthy North Carolina 2030: A Path Toward Health, 2020)

SOCIAL & ECONOMIC

INCOME

As stated in HNC 2030, “income is central to accessing resources needed to be healthy such as safe housing, nutritious food, education and transportation, as well as health services and treatment. Income is one of the greatest predictors of disease and mortality rates.”[4] The median household income in Davidson County is \$49,546 compared to the state average of \$54,602.[5] Nearly 35% of households in Davidson County have an annual income of less than \$35,000.[6]

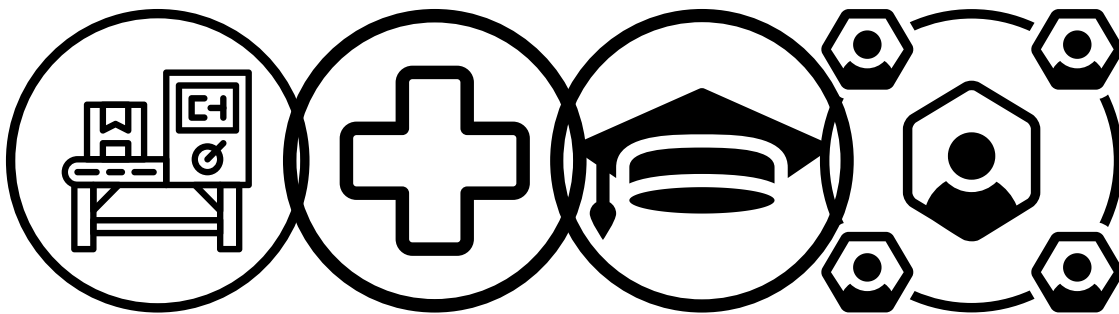
	MEDIAN INCOME	MEAN INCOME (AVERAGE)
DAVIDSON COUNTY	\$49,546	\$63,983
DAVIE COUNTY	\$60,434	\$78,412
FORSYTH COUNTY	\$51,569	\$76,256
GUILFORD COUNTY	\$53,261	\$76,720
MONTGOMERY COUNTY	\$44,146	\$62,773
RANDOLPH COUNTY	\$47,288	\$60,701
ROWAN COUNTY	\$48,842	\$65,110

Table 3: Median and Mean Income of Davidson County and surrounding counties; Source: U.S. Census Bureau, 2015-2019 American Community Survey 5-Year Estimates

[4] (North Carolina Institute of Medicine. Healthy North Carolina 2030: A Path Toward Health, 2020), p.36
[5] (2015-2019 American Community Survey 5-Year Estimates; Households and Families)
[6] (2015-2019 American Community Survey 5-Year Estimates; Income and Poverty; Income (Households, Families, Individuals))

SOCIAL & ECONOMIC **WORKFORCE**

Respondents of the 2021 CHNA were asked about their current employment status. Approximately 68% of the surveyed population indicated that they were currently employed. Data from the American Community Survey (ACS) shows a bigger picture of the workforce in Davidson County, indicating that approximately 60% of the Davidson County population, that is age 16 or older, are currently employed. According to the ACS, manufacturing is the top industry Davidson County residents are employed in, closely followed by education, health care, and other social assistance occupations.[7]



POVERTY

Individuals living in poverty are often defined as having an income at or below 200% of the Federal Poverty Level (FPL). Across Davidson County, 15.4% of the population fall below the poverty level.[8]

[4] (North Carolina Institute of Medicine. Healthy North Carolina 2030: A Path Toward Health, 2020), p.36

[5] (2015-2019 American Community Survey 5-Year Estimates; Households and Families)

[6] (2015-2019 American Community Survey 5-Year Estimates; Income and Poverty; Income (Households, Families, Individuals))

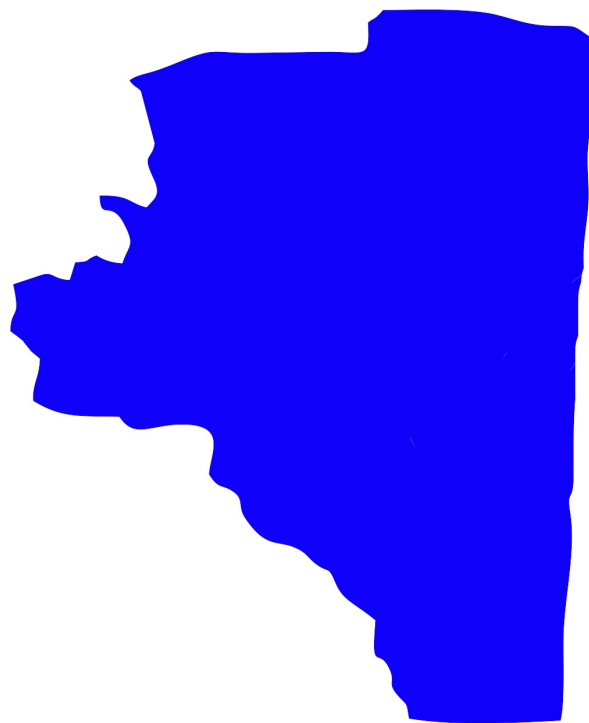
[7] (2015 - 2019 American Community Survey 5-Year Estimates; Selected Economic Characteristics, 2019)

[8] (2015-2019 American Community Survey 5-Year Estimates; Poverty Status in the Past 12 Months, 2019)

% OF DAVIDSON COUNTY RESIDENTS LIVING IN POVERTY BY RACE

WHITE	14.3%
BLACK OR AFRICAN AMERICAN	25.9%
AMERICAN INDIAN OR ALASKA NATIVE	20.5%
ASIAN	2.2%
SOME OTHER RACE	12.9%
TWO OR MORE RACES	30.1%
HISPANIC OR LATINO	28.6%
NON-HISPANIC OR LATINO	13.0%

Table 4: Percent of Population Living in Poverty by Race; Source: U.S. Census Bureau, 2015-2019 American Community Survey 5-Year Estimates



% OF DAVIDSON COUNTY RESIDENTS LIVING IN POVERTY BY AGE

UNDER 5	27.6%
5 TO 17	22.3%
18 TO 34	17.3%
35 TO 64	12.7%
65 AND OVER	9.5%

Table 5: Percent of Population Living in Poverty by Age; Source: U.S. Census Bureau, 2015-2019 American Community Survey 5-Year Estimates

SOCIAL & ECONOMIC

EDUCATION

Davidson County is unique in that it has three distinct public school systems. Davidson County Schools is the largest of the three, with 36 total schools, spanning elementary, middle, and high school grade levels.[9]



Figure 4: Davidson County Schools Feeder Map



DAVIDSON COUNTY K -12

**Some schools do include Pre K programs*

- **3** - Public School Systems
 - Davidson County Schools
 - 17,596 students
 - Lexington City Schools
 - 2,945 students
 - Thomasville City Schools
 - 2,090 students
- **9** - Private Schools
- **1** - Charter school
- **2,359** - Home Schools

PERCENTAGE OF DAVIDSON COUNTY POPULATION AGE 25 AND OVER:

- 32.8%** >> • High school diploma or equivalent
- 10.3%** >> • Associate's Degree
- 13.3%** >> • Bachelor's Degree
- 5.2%** >> • Graduate or higher

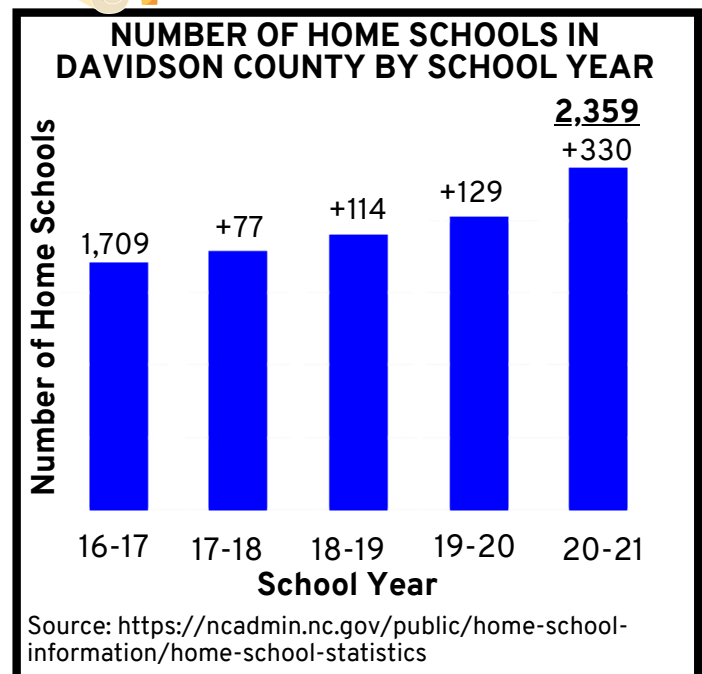


Figure 5: Davidson County Schools Home Schools

The Davidson-Davie Community College serves a vital role in education and training in Davidson County. The community college offers over 40 programs of study, has a successful Early College high school program, a General Educational Development (GED) program and has an increasing amount of University Transfer Agreements. In 2021, DDCC had over 1,000 graduates, with close to 600 receiving Associate's Degrees.[10]

[9] (2020-21 District Profile: Davidson County Schools, 2020)

[10] (2020-2021 Annual Report; A More Perfect Union, 2021)

PHYSICAL ENVIRONMENT

HOUSING AND TRANSPORTATION

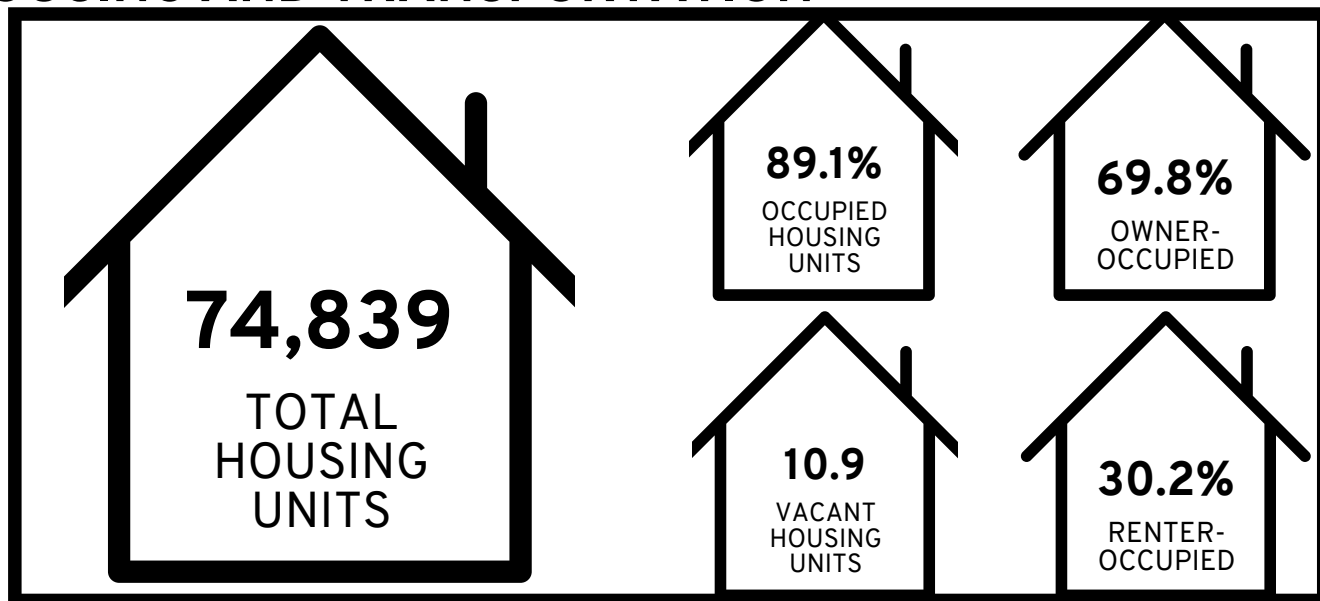
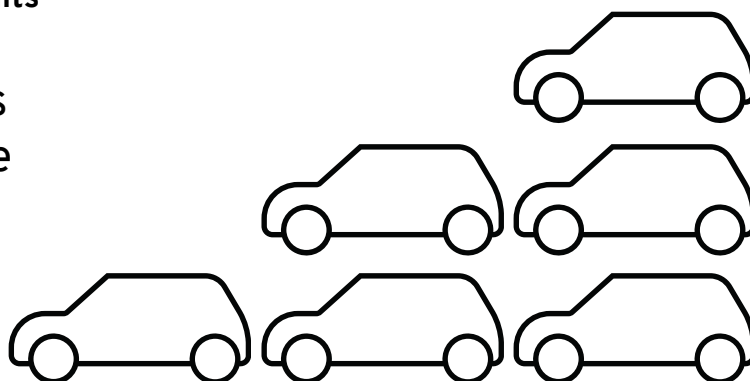


Figure 6: Davidson County Housing Units

According to the ACS, of the 89.1% of occupied housing units in Davidson County, 28.3% have one vehicle available, 35.1% have two vehicles available, and 31.1% have three or more vehicles available.[11]



Davidson County has a public transportation system that currently operates four bus routes, Monday - Friday, 6:00am - 6:00pm, and one route, on Saturday, from 6:00am - 6:00 pm.

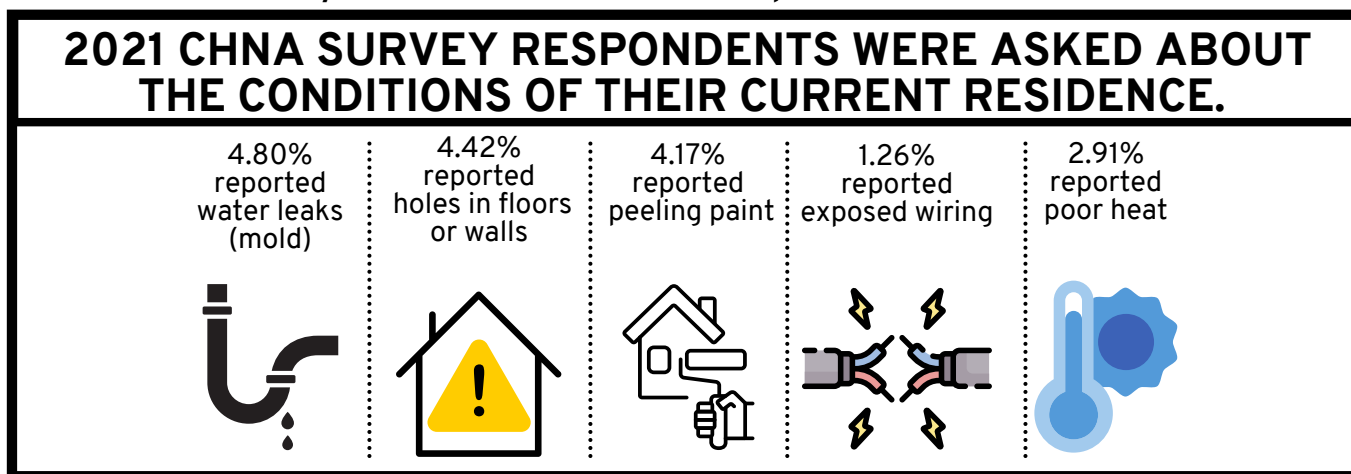


Figure 7: CHNA Survey Responses - Housing conditions

[11] (U.S. Census Bureau, 2015-2019 American Community Survey 5-Year Estimates; Comparative Housing Characteristics, 2019)

HEALTH BEHAVIORS

PHYSICAL ACTIVITY

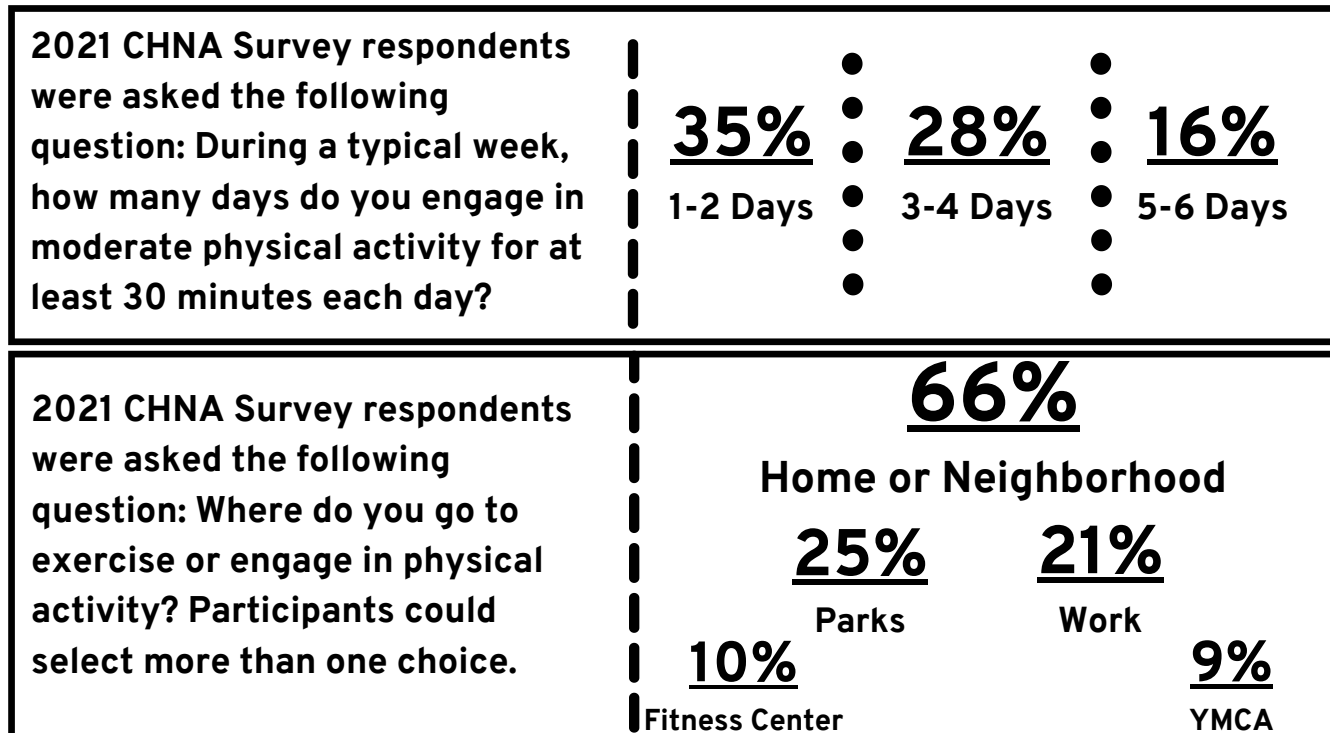


Figure 8: CHNA Survey Responses - Physical Activity

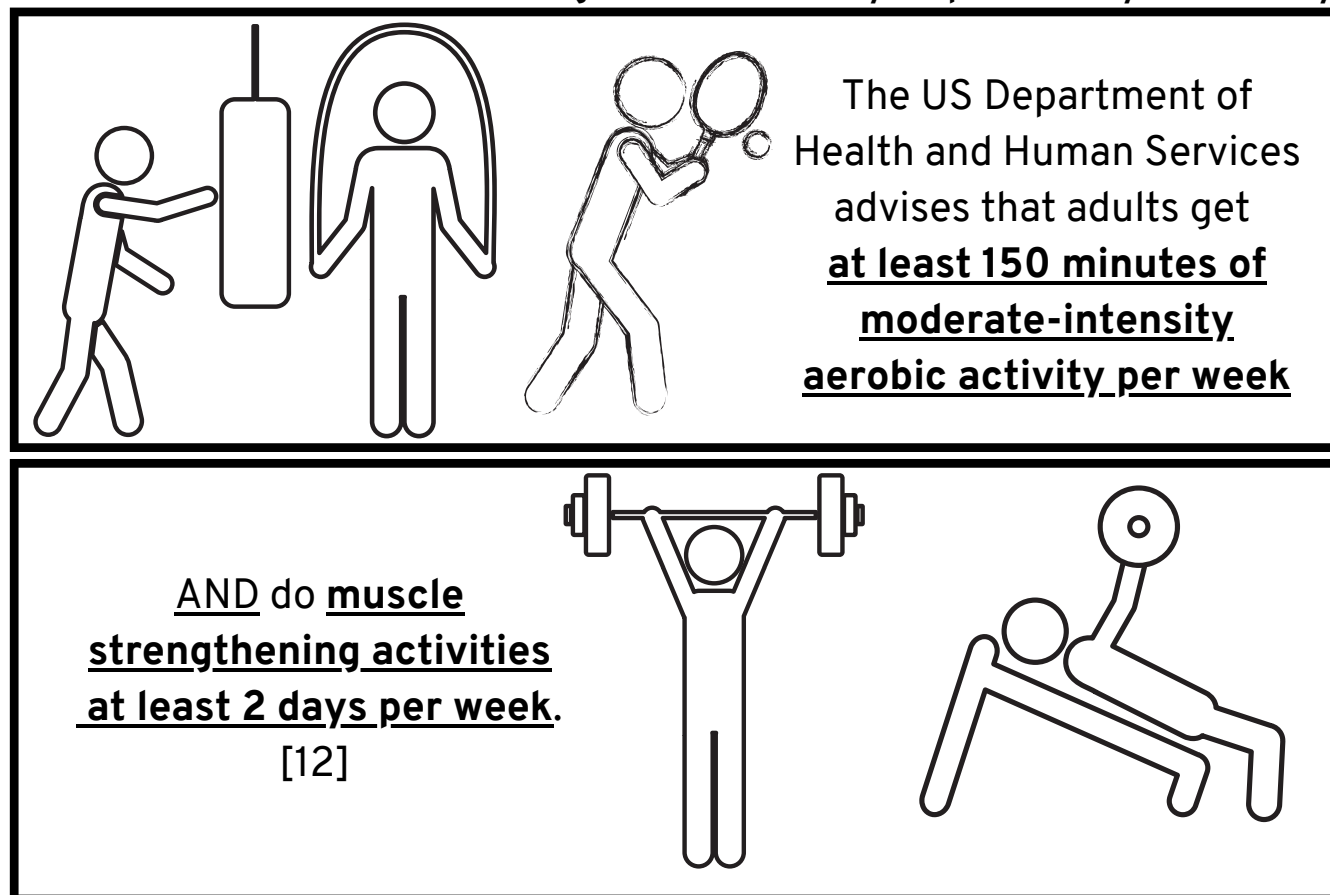


Figure 9: Physical Activity Recommendations for Adults

[12] U.S. Department of Health and Human Services. Physical Activity Guidelines for Americans, 2nd edition. Washington, DC: U.S. Department of Health and Human Services; 2018.

HEALTH BEHAVIORS

NUTRITION

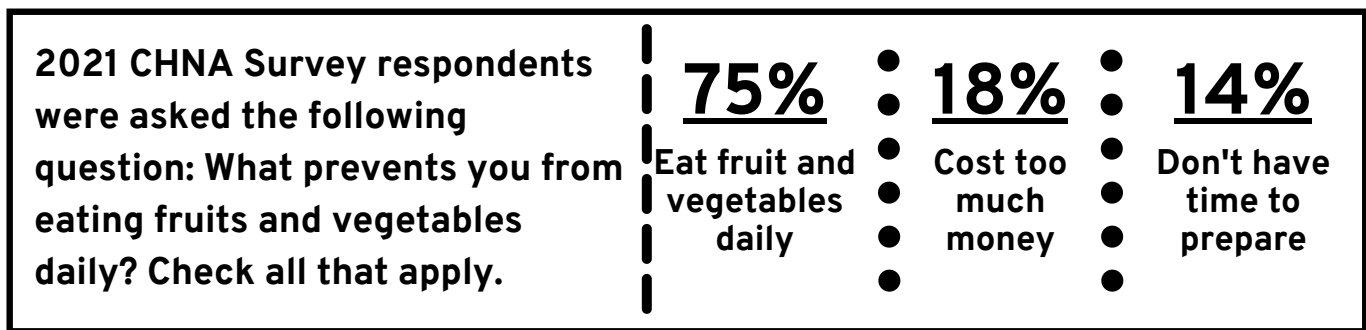
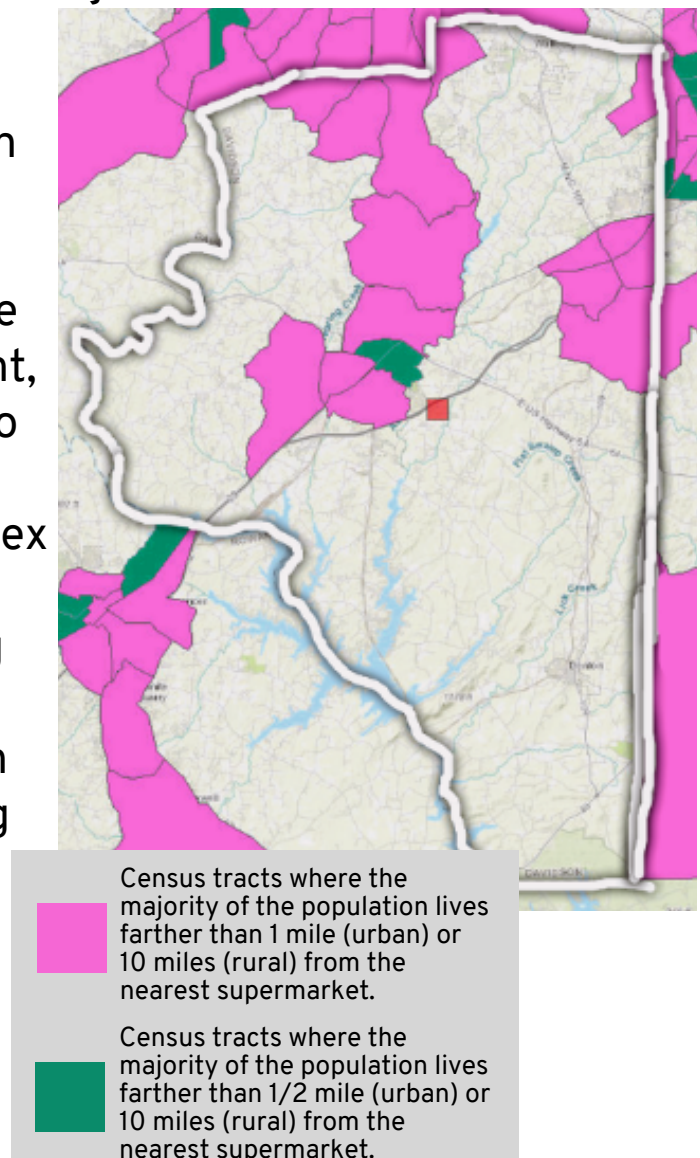


Figure 10: CHNA Survey Responses - Fruit and Vegetable Consumption

The County Health Rankings & Roadmaps program from the University of Wisconsin Population Health Institute annually releases reports focused on population health at the National, State, and County-level. The County Health Rankings examines two factors that contribute to having a healthy food environment, access to healthy foods (proximity to a grocery store) and food insecurity (income). The Food environment index ranges on a scale of 0 (worst) to 10 (best) and reflects both contributing factors. The 2021 County Health Rankings Report identified Davidson County at a value of 7.4, neighboring Randolph County - 7.3, and North Carolina overall - 6.8.[13]

Figure 11: USDA - Food Access Atlas



[13] (North Carolina, 2021)

HEALTH BEHAVIORS

NUTRITION

The Supplemental Nutrition Assistance Program (SNAP) is a federal program that provides income-eligible individuals and families with benefits to purchase food. Approximately 15.2% of households in Davidson County receive SNAP benefits. Of those households, 49.2% are below the FPL, and 51.1% have at least one individual with a disability.[14]

[14] (2015-2019 American Community Survey 5-Year Estimates; Food Stamps/SNAP, 2019)

HEALTH BEHAVIORS

SUBSTANCE USE

The initial decision to take drugs is normally a voluntary decision. But with continued use, a person's ability to practice self-control can become seriously impaired. This impairment in self-control is the hallmark of addiction.[15]

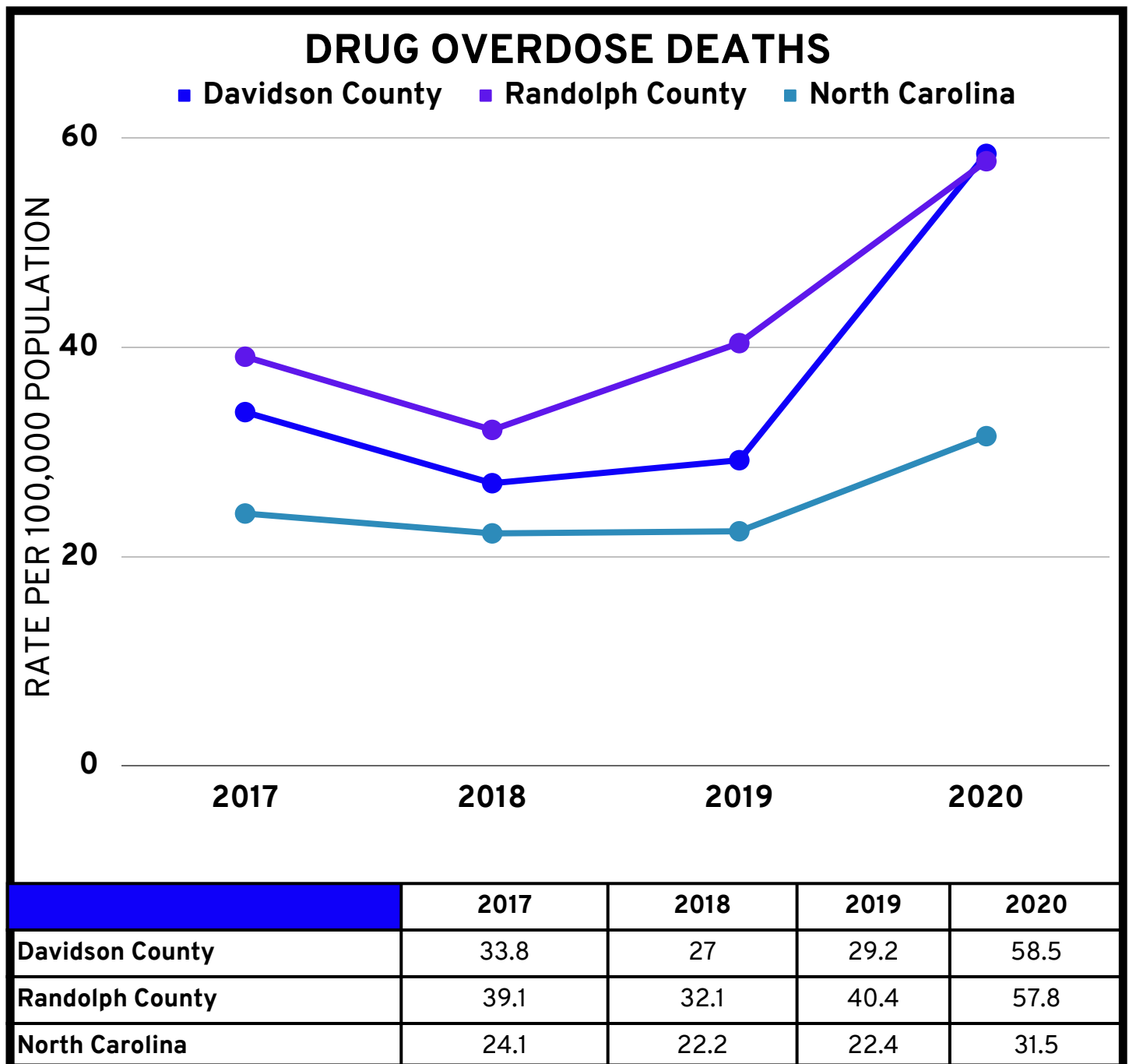


Figure 12: Drug Overdose Deaths - includes all drugs and intents
<https://www.ncdhhs.gov/opioid-and-substance-use-action-plan-data-dashboard>

[15] ("Drug Misuse and Addiction." National Institute on Drug Abuse, 13 Jul. 2020, <https://nida.nih.gov/publications/drugs-brains-behavior-science-addiction/drug-misuse-addiction>)

HEALTH BEHAVIORS

SUBSTANCE USE

In 2017, NC DHHS released the North Carolina Opioid Action Plan (OAP), which was a detailed plan to combat the opioid crisis. Since 2017, the OAP has been updated two times and now, the 2021 Opioid and Substance Use Action Plan (OSUAP) captures polysubstance use and encompasses a greater focus on equity and lived experiences.[16]

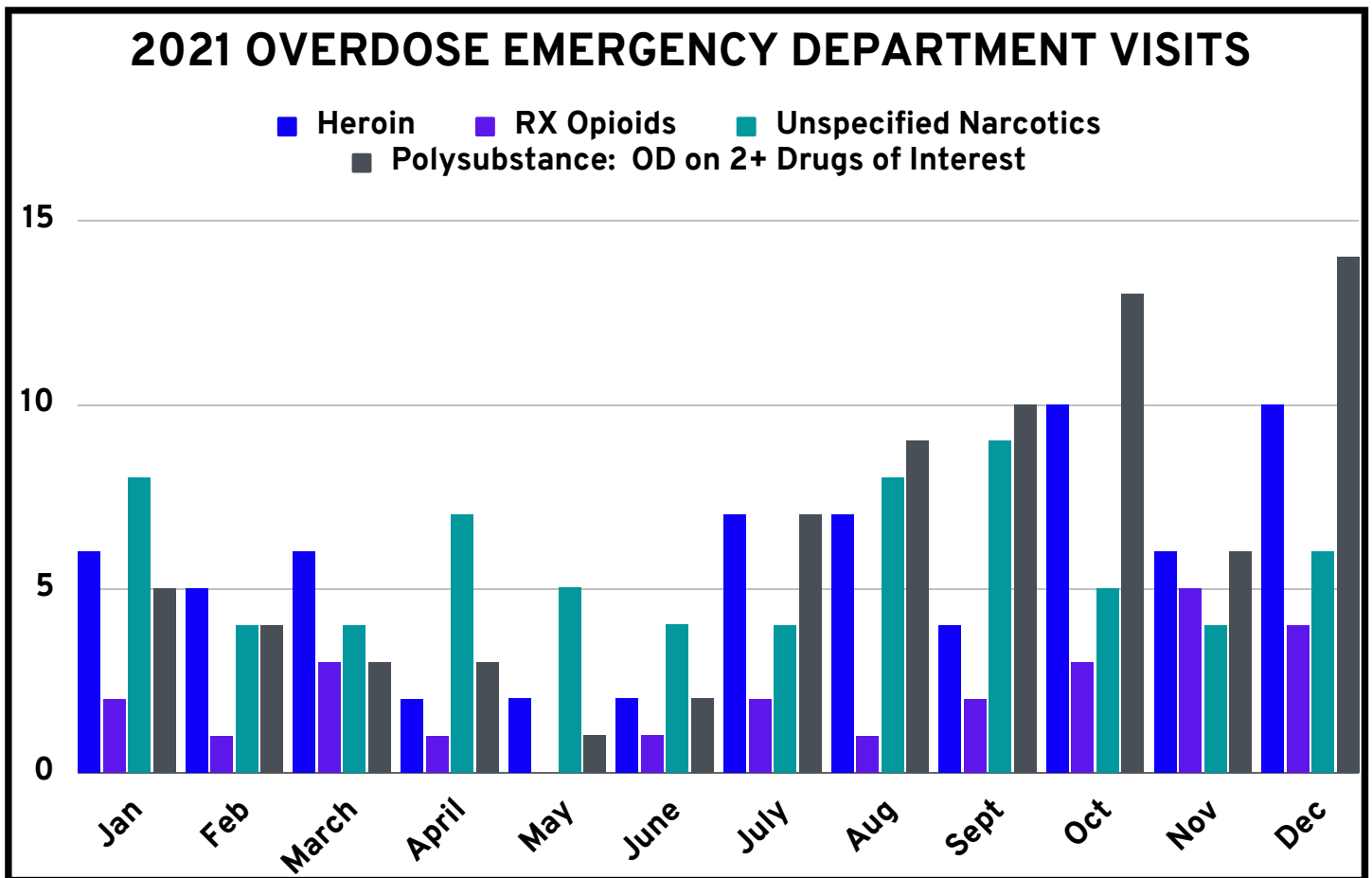


Figure 13: 2021 Davidson County Overdose Emergency Department Visits

The OSUAP outlines strategies that are proven to be effective and focus on equity, prevention, harm reduction, and connection. The action plan also identifies metrics that allow for tracking progress and transparency of data. Routine updates from local health departments and other agencies across North Carolina allowed for progress to be measured at the county level and reflected in a dashboard on the NC DHHS website.

[16] (North Carolina's Opioid and Substance Use Action Plan)

HEALTH BEHAVIORS

SUBSTANCE USE

-  LOCAL ACTION AVAILABLE
-  LOCAL ACTION WORK IN PROGRESS
-  LOCAL ACTION NOT AVAILABLE

	DAVIDSON COUNTY	NORTH CAROLINA
<u>TRACK PROGRESS</u>		
• Point Person		
• Uses DHHS Resources		
<u>REDUCE SUPPLY</u>		
• Prescription Dropboxes		
• Test Strip Distribution		
<u>FAMILIES</u>		
• Community Response Program		
• START Program		
<u>HARM REDUCTION</u>		
• Affordable Sterile Syringe Access		
• Naloxone Access		
<u>NON-MEDICAL HEALTH DRIVERS</u>		
• Fair Chance Hiring		
• Housing First		
<u>JUSTICE-INVOLVED POPULATIONS</u>		
• MAT in Jails		
• Pre-Arrest Diversion		
<u>TREATMENT & RECOVERY</u>		
• MAT Providers		
• Peer Support Specialists		

Figure 14: OSUAP Progress of Local Actions; <https://www.ncdhhs.gov/opioid-and-substance-use-action-plan-data-dashboard>

HEALTH BEHAVIORS

TOBACCO AND ALCOHOL



Figure 15: National Youth Tobacco Survey, 2020

According to research done by the Truth Initiative in 2019, 1 JUUL pod has the same amount of nicotine as 20 cigarettes. Flavored e-cigarette products also contain higher nicotine levels, which leads to greater nicotine dependence.[17]

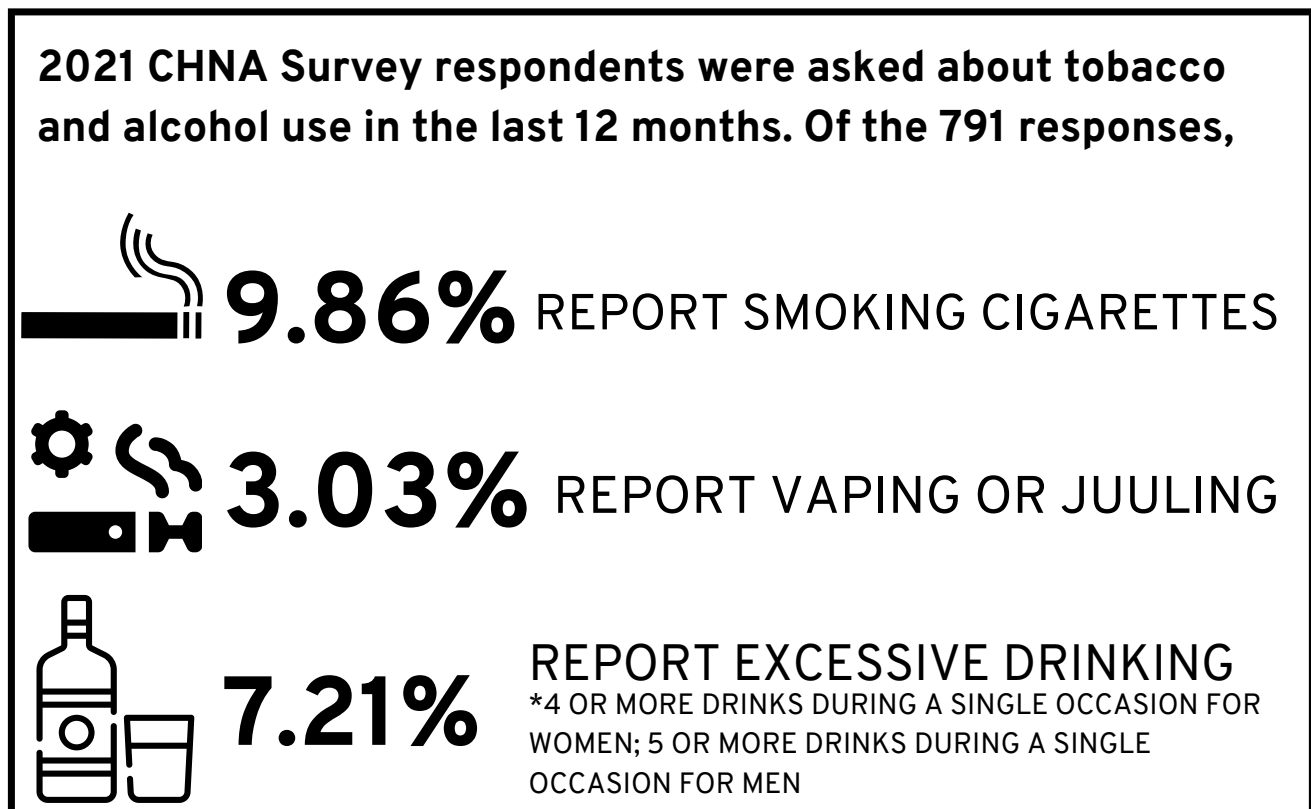


Figure 16: 2021 CHNA Survey Results - Tobacco and Alcohol Use

HEALTH BEHAVIORS

LIVE BIRTHS

Age of Mother at Delivery	2016	2017	2018	2019	2020
12	1	0	0	0	0
13	1	0	0	0	0
14	1	1	0	0	0
15	2	3	2	2	0
16	11	9	5	5	6
17	25	21	19	18	12

Table 6: Davidson County Teen Births by Age of Mother at Delivery; Source: NC State Center for Health Statistics - Basic Automated Birth Yearbook (BABYBOOK) 2016-2020

The number of teen births among Davidson County female residents has decreased since 2016, while the overall number of births has not shown any significant change over time.

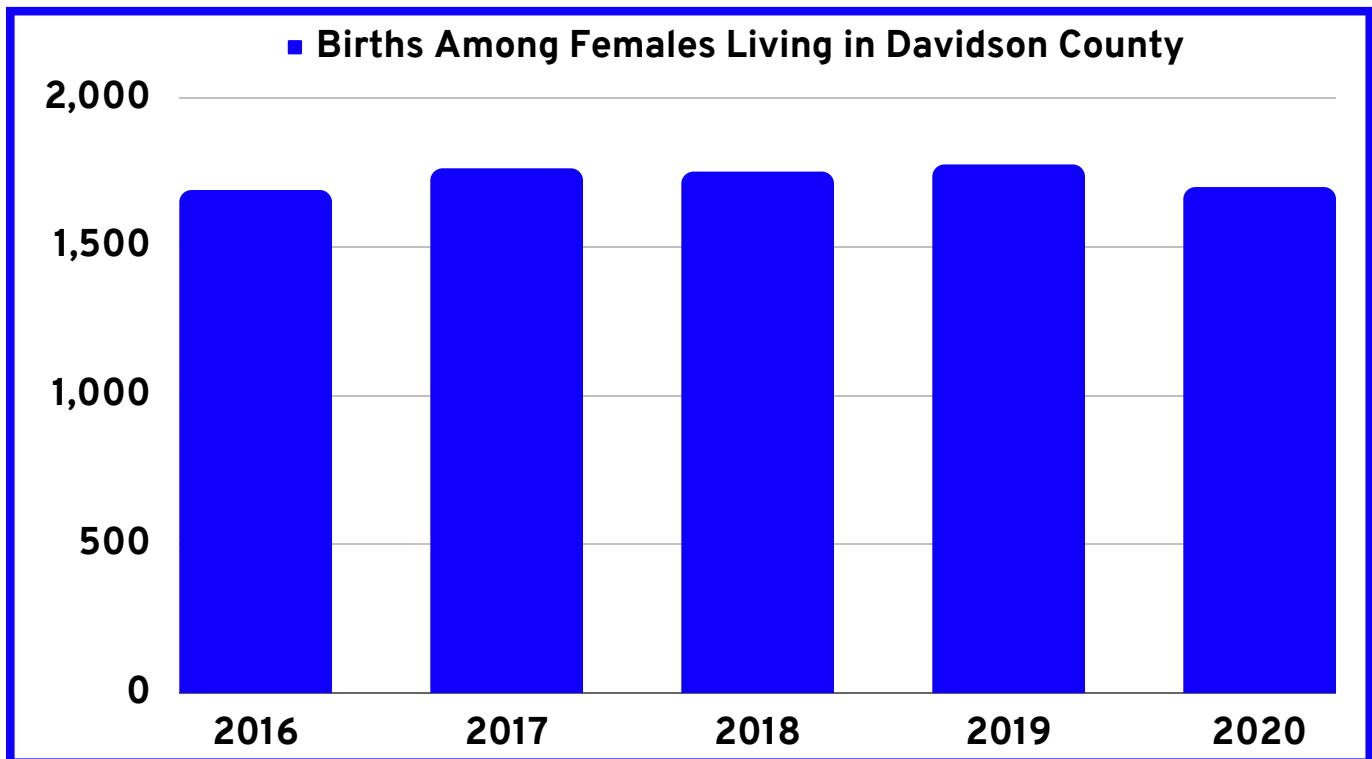


Figure 17: Davidson County Births; Source: NC State Center for Health Statistics - Basic Automated Birth Yearbook (BABYBOOK) 2016-2020

HEALTH BEHAVIORS

LIVE BIRTHS

The racial and ethnic disparities that exist in Davidson County are very apparent in pregnancy and birth outcomes. According to data from NC State Center for Health Statistics, among births from 2015-2019, the birth rate was highest for Hispanic women at 17.3. African-American, Non-Hispanic women had the highest rate of Low Birthweight (LBW) babies at 14.4. White, Non-Hispanic women had the highest rate of smoking during pregnancy at 18.0 [18]

	ALL	WHITE, NON-HISPANIC	AFRICAN AMERICAN, NON-HISPANIC	HISPANIC
Total Birth Rate	10.7	9.8	12.7	17.3
LBW	9.8	9.3	14.4	8.4
Mother Smoked	15.3	18	13	1.9
C-section	32.9	33.5	32.6	28.8

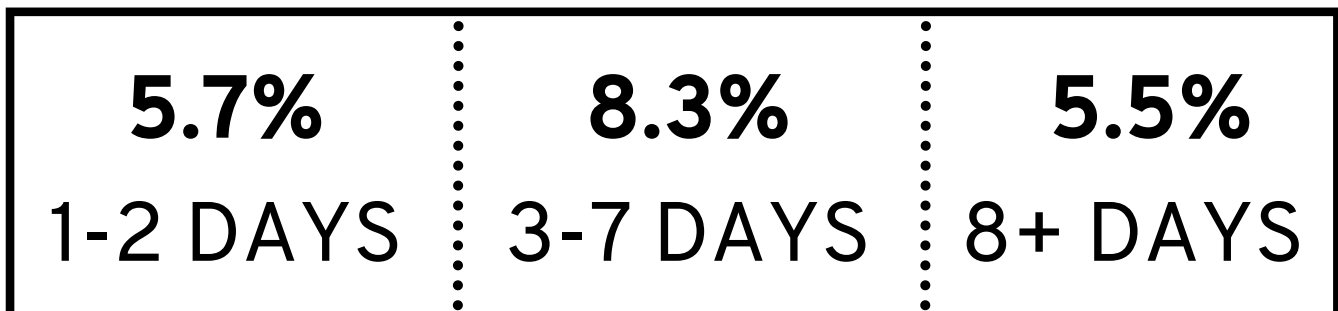
Table 7: Live Births in Davidson County; Source: NC State Center for Health Statistics - Selected Vital Statistics 2015-2019

CLINICAL CARE

MENTAL HEALTH

Mental health has been identified as a top priority in the Davidson County CHNA since approximately 2008. Mental health encompasses our emotional, psychological, and social well-being.[19] It directly impacts how we feel, think, and act when we are with others and when we are alone. Awareness of our mental health and wellbeing has been an increasingly prevalent topic over time, but along with awareness has come increased stigma.

The Behavioral Risk Factor Surveillance System (BRFSS) survey asks individuals to think back over the last 30 days and to report how many days, out of the last 30 days, they experienced poor mental health. [20] Data is representative of North Carolina counties in Local Health Director Region 3



***Data reflects Local Health Director Region 3 Survey Respondents, which includes Alleghany, Ashe, Davidson, Davie, Forsyth, Stokes, Surry, Watauga, Wilkes, and Yadkin counties.**

In 2021, Mental Health America’s “Ranking the States” ranked North Carolina overall, 41 out of 51, when looking at 15 different measures directly related to mental health.[21] A ranking of 41 indicates that North Carolina has a high prevalence of mental illness and a low rate of access to care when compared to other states.

[19] (What is Mental Health, 2022)

[20] (Healthy Days, 2021)

[21] (Ranking the States)

CLINICAL CARE

MENTAL HEALTH

The 2021 CHNA asked participants, "If you or someone you know was experiencing substance misuse issues or needed mental health treatment, where would you go or whom would you ask for help?"

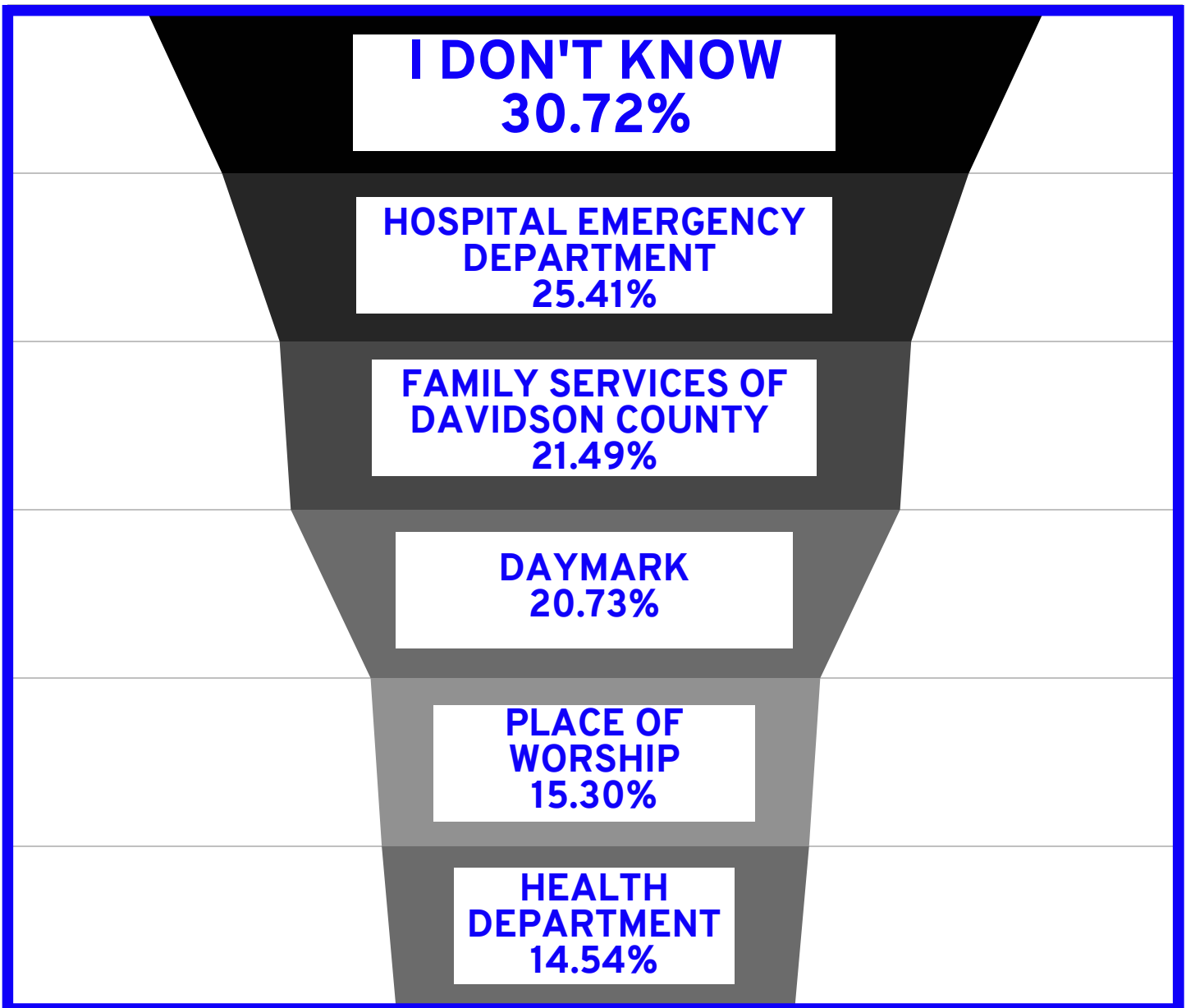


Figure 18: 2021 CHNA Responses for accessing help for substance misuse or mental health treatment

CLINICAL CARE

ACCESS TO HEALTH CARE

Routine health care is the foundation of prevention. Often, individuals do not seek any medical care until they have a problem and are unable to manage or live with the issue any longer. It is then that the health care provider may start to diagnose and treat the problem and address any additional problems that may have developed. Individuals who seek preventative health care receive routine exams and screenings that assist in early detection of health concerns or disease and may be able to receive early interventions, which hopefully leads to a better health outcome.



Participants in the 2021 CHNA were asked if they sought routine or preventative health care, including physical exams, dental care, and eye examination. Approximately 88% of all respondents said they receive an annual physical exam, 76% said they receive routine dental care, and 74% receive routine eye exams.

CLINICAL CARE

ACCESS TO HEALTH CARE

Davidson County has two local hospitals, Novant Health Thomasville Medical Center and Atrium Wake Forest Baptist Health Lexington Medical Center. Affiliated with the two respective organizations are approximately 40 provider offices that include family medicine and specialized medicine. Other medical providers located in Davidson County include but are not limited to private practices, one Federally Qualified Health Center (FQHC), and the Davidson County Health Department.

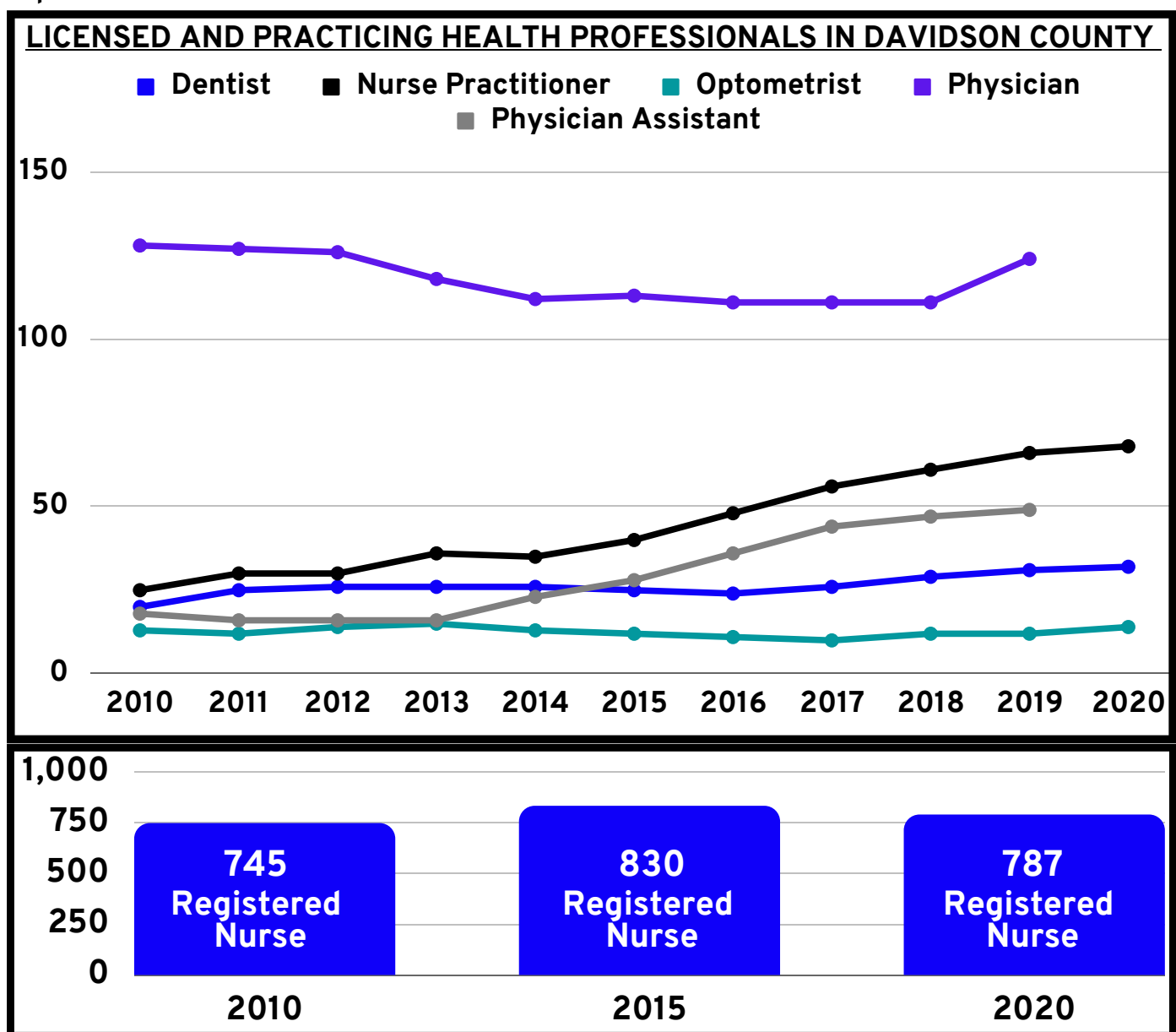


Figure 19: Davidson County Selected Health Professionals over time
Source: North Carolina Health Professions Data System, Program on Health Workforce Research and Policy, Cecil G. Sheps Center for Health Services Research, University of North Carolina at Chapel Hill. <https://nchealthworkforce.unc.edu/interactive/supply/>.

CLINICAL CARE

ACCESS TO HEALTH CARE

Individuals who participated in the 2021 CHNA were asked about current health care coverage.

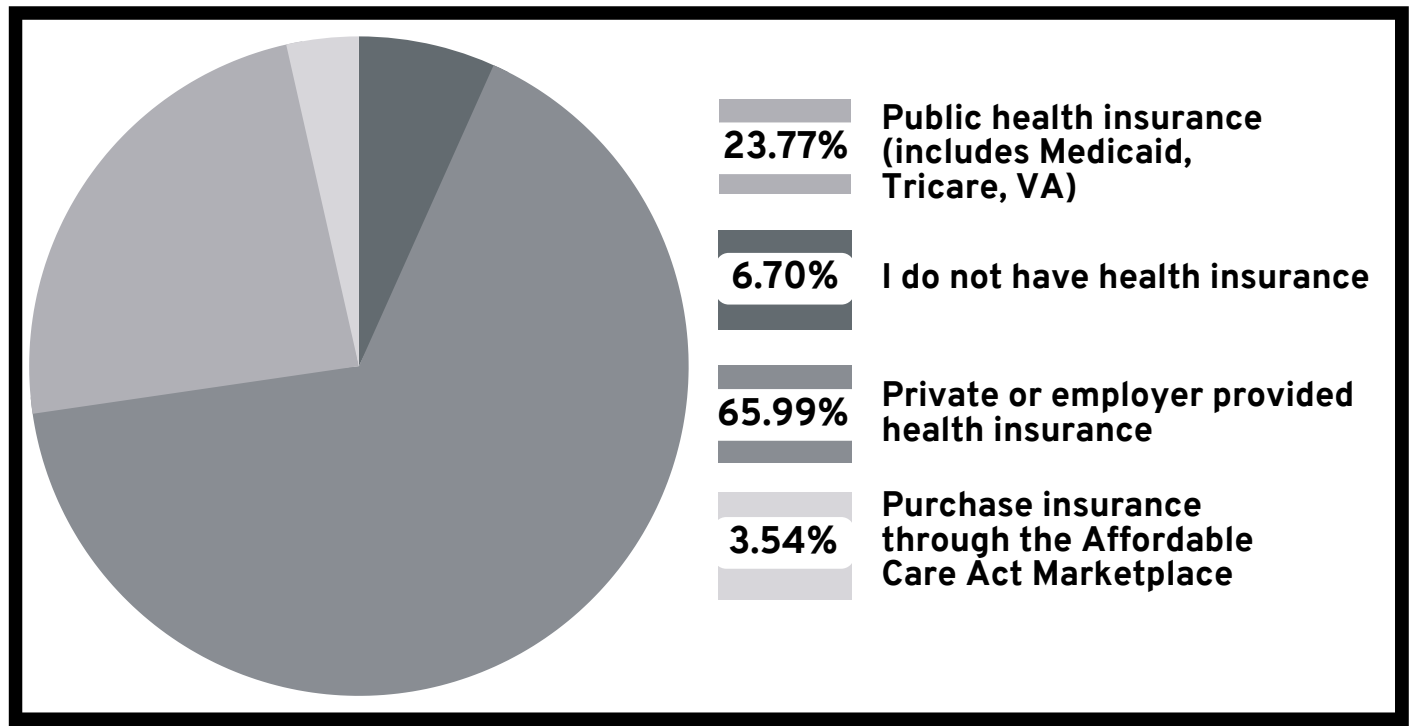


Figure 20: 2021 CHNA Responses - Health insurance

The BRFSS asks participants if they have ANY kind of health care coverage. Of those who responded in North Carolina Local Health Director Region 3, approximately 15% said no; they did not have any kind of health care coverage. Individuals that responded to the survey that they did have health care coverage were asked to further specify the source of their coverage.[22]

EMPLOYER PLAN	48.6%
PURCHASED PLAN	10.9%
MEDICARE	28.6%
MEDICAID	5.8%
TRICARE/VA/MILITARY	4.9%
OTHER PLAN	1.1%

Table 8: BRFSS - Health Insurance - NC LHD Region 3

[22] (BRFSS Survey Results, Health Care Access, 2020)

CLINICAL CARE

CHRONIC DISEASE

Davidson County CHNA participants were asked the following question about chronic conditions: Have you ever been told by a doctor or other licensed health care professional that you have any of the following conditions? Check all that apply.

High blood pressure	37.42%
High Cholesterol	30.72%
Depression or Anxiety	28.70
Obesity	28.57
Diabetes (not during pregnancy)	12.90
Cancer	8.09%
Heart Disease	7.59%
Lung Disease (COPD/emphysema)	4.17%
None of the above	29.46%

Table 9: 2021 CHNA Responses -Chronic Conditions

Of the individuals who responded that they had a chronic condition, 51.9% indicated that they had two or more chronic conditions.

Age Range	% of CHNA respondents with at least ONE chronic disease by age
under 18	17.40%
18-24	55.81%
25-34	78.89%
35-44	91.44%
45-54	92.34%
55-64	94.21%
65-74	93.43%
75+	88.13%

Table 10: 2021 CHNA Responses -Chronic Conditions by age

CLINICAL CARE

CHRONIC DISEASE

2020 BRFSS Survey asked participants several questions inquiring about diagnosis of chronic health conditions. These results are shown by Local Health Director regions, which are identified in the figure below.[23]

	Diabetes	(COPD) Chronic Obstructive Pulmonary Disease, Emphysema or Chronic Bronchitis	Depressive Disorder, including depression, major depression, dysthymia, or minor depression	History of Any Cardiovascular Diseases (heart attack or coronary heart disease or stroke)
Region 1 & 2	13.30%	9.60%	23.70%	12.90%
Region 3	10.90%	8.60%	22.70%	8.80%
Region 4	12.10%	5.50%	20.30%	8.90%
Region 5	11.40%	5.20%	22.50%	8.60%
Region 6	12%	8.60%	25.20%	11%
Region 7	12.70%	5.50%	19.10%	7.80%
Region 8	12%	7.10%	18.90%	8.90%
Region 9 & 10	14.90%	4.60%	17%	11.30%

Table 11: 2020 BRFSS -Chronic Conditions

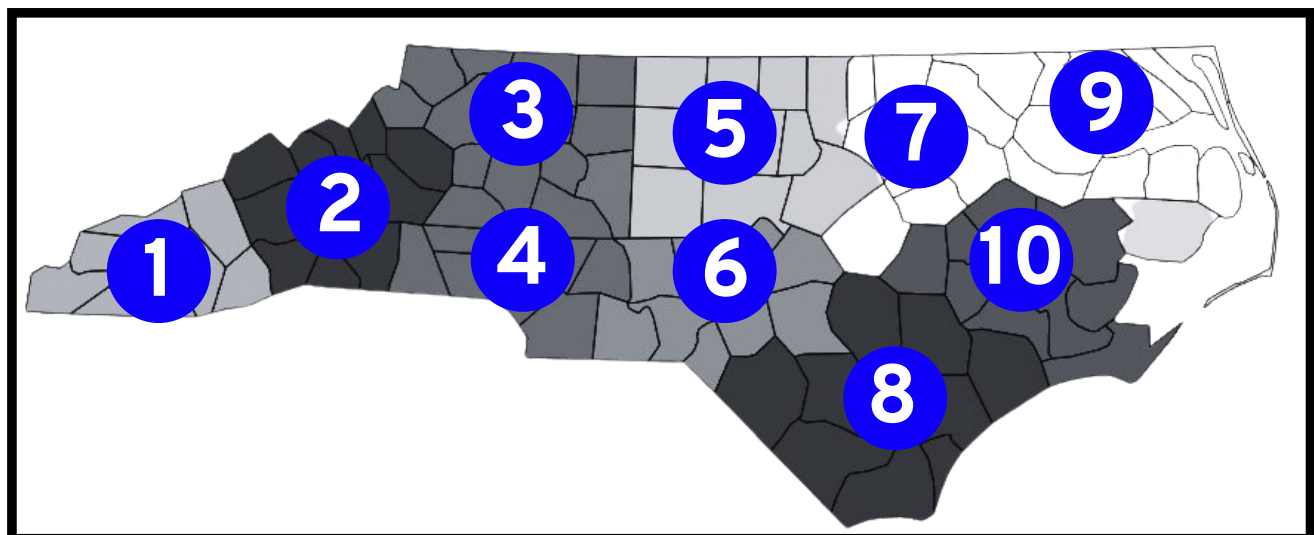


Figure 21: North Carolina Map of Regions by Local Health Directors

[23] (BRFSS Survey Results, Chronic Health Conditions, 2020)

CLINICAL CARE

CHRONIC DISEASE

Data from the US Diabetes Surveillance System shows that incidence of Diabetes is higher in Davidson County than in neighboring Randolph County. This surveillance data also indicates that there is a higher prevalence of Diabetes among men in Davidson County than among women.[24]

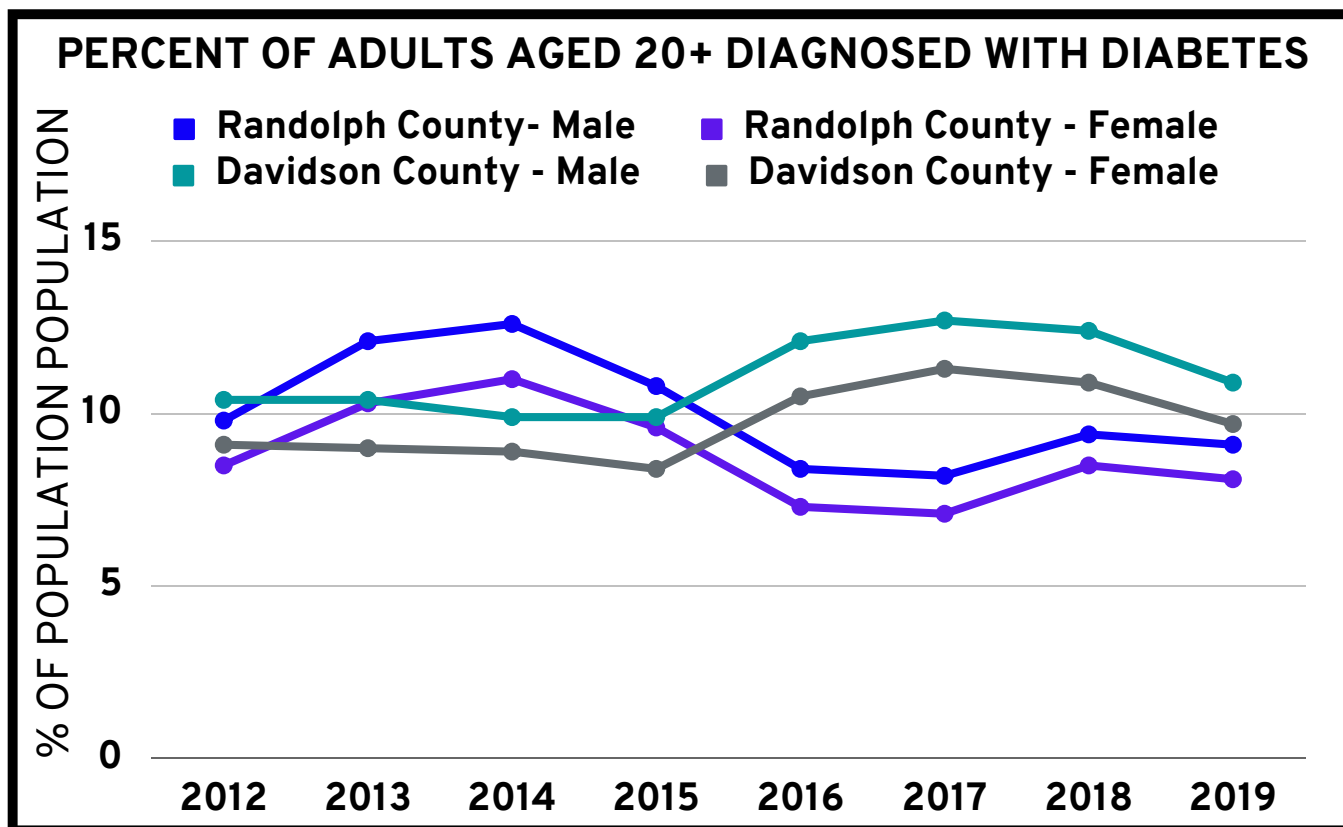


Figure 22: Diabetes prevalence by gender in Davidson and Randolph county

Diabetes is one of the leading causes of death in Davidson County. Rates of Diabetes related deaths have consistently increased over time, not only in Davidson County but across North Carolina.[25]

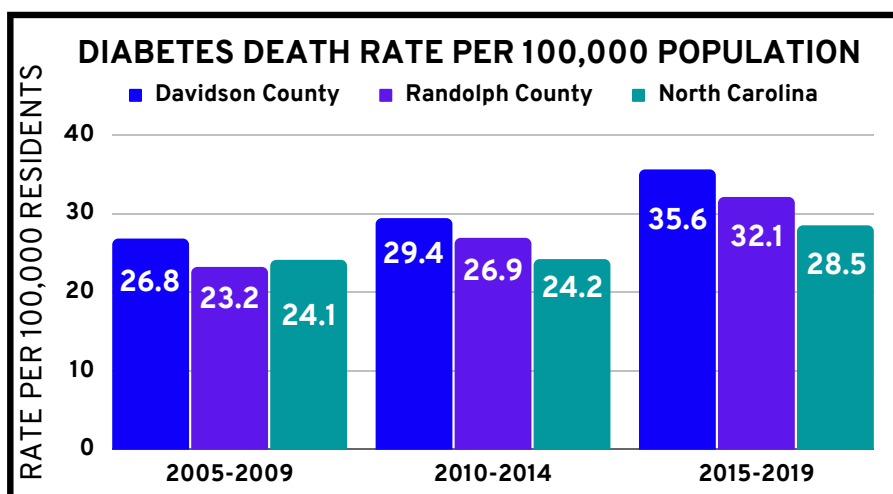


Figure 23: Diabetes Death rate per 100,000 population

[24] (US Diabetes Surveillance System)

[25] (Vital Statistics, 2019)

CLINICAL CARE

COMMUNICABLE DISEASE

Across the nation, all states and territories have laws, statutes, or other regulations that mandate the reporting of communicable diseases. N.C. Administrative Code details over 80 reportable infectious diseases, including sexually transmitted infections, and the time frame in which they must be reported to public health. There are also other communicable diseases that could have a significant impact on the health of the community that falls to local public health for surveillance and intervention if appropriate.[26]

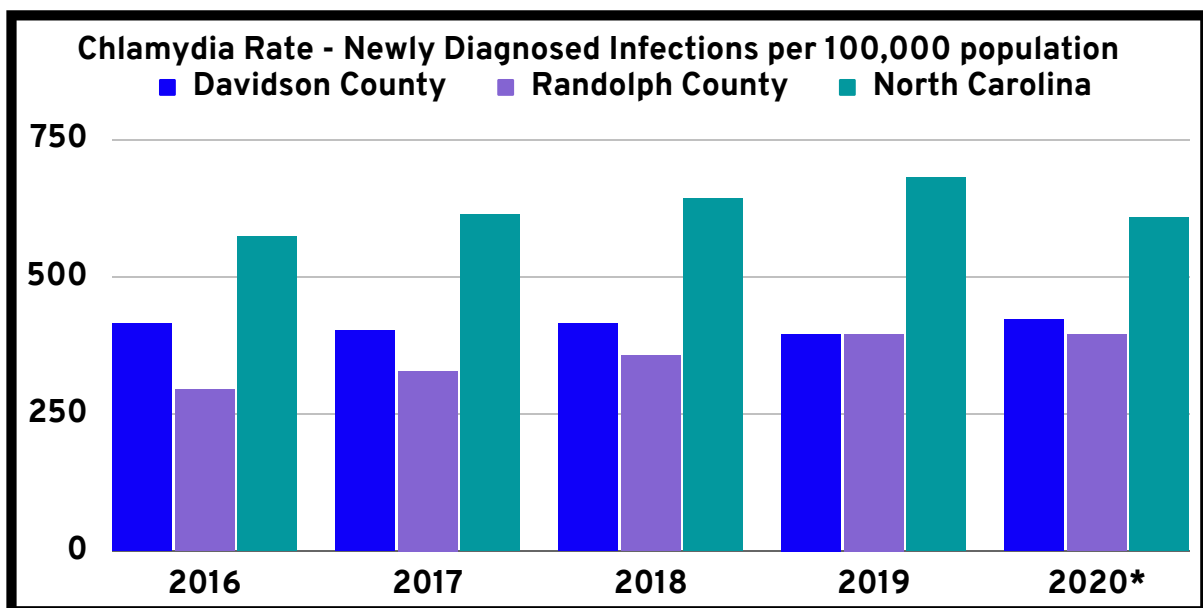


Figure 24: Newly Diagnosed Chlamydia; [27] *Preliminary data

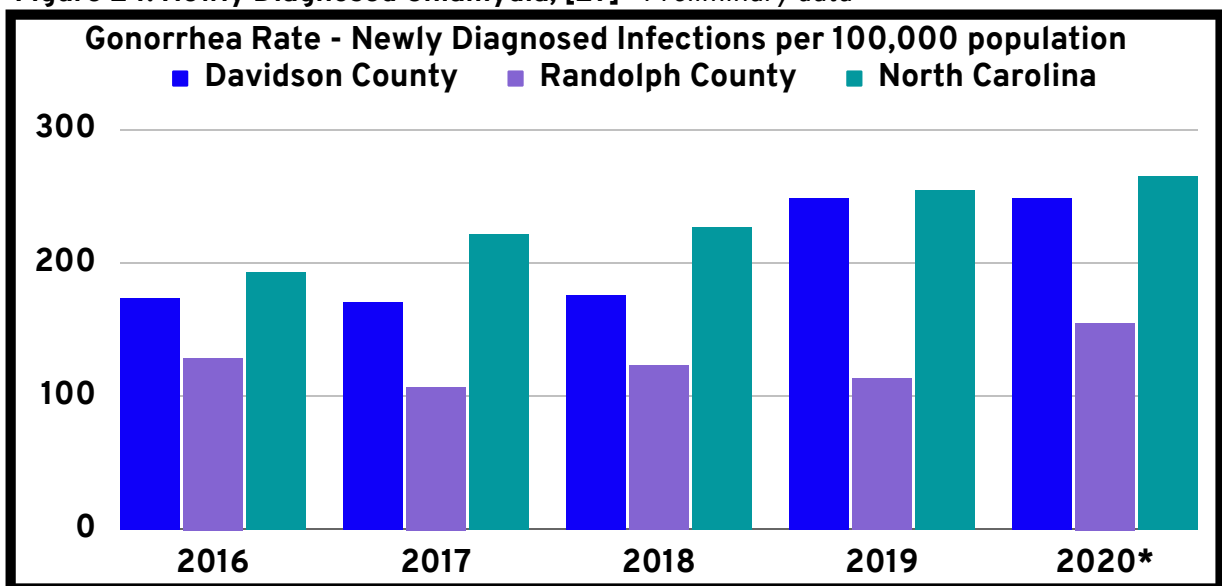


Figure 25: Newly Diagnosed Gonorrhea; [27] *Preliminary data

[26] (Communicable Disease)

[27](North Carolina HIV/STD/Hepatitis Surveillance Report, 2020)

CLINICAL CARE

COMMUNICABLE DISEASE

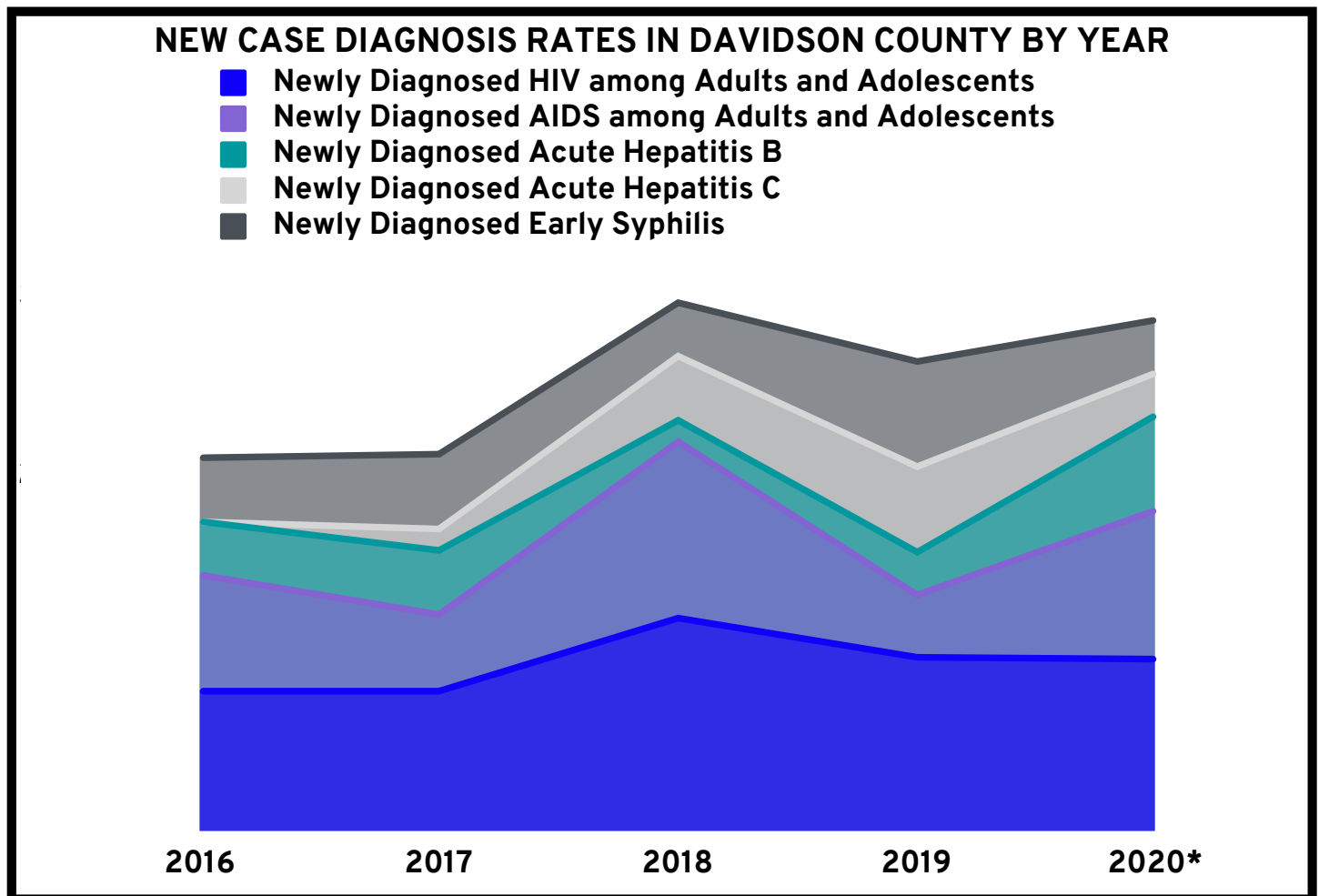


Figure 26: Annual Rates of Newly Diagnosed cases per 100,000 population

*Preliminary data

	2016	2017	2018	2019	2020*
Newly Diagnosed HIV among Adults and Adolescents	7.9	7.9	12	9.8	9.7
Newly Diagnosed AIDS among Adults and Adolescents	6.5	4.3	9.9	3.5	8.3
Newly Diagnosed Acute Hepatitis B	3	3.6	1.2	2.4	5.3
Newly Diagnosed Acute Hepatitis C	0	1.2	3.6	4.8	2.4
Newly Diagnosed Early Syphilis	3.6	4.2	3	5.9	3

Table 12 - Data of Annual Rates of Newly diagnosed cases per 100,000 population[27]

*Preliminary data

CLINICAL CARE

CANCER

Cancer is the number one leading cause of death in Davidson County. [28] According to data from the NC Central Cancer Registry, female breast cancer is the most frequently diagnosed form of cancer in Davidson County, where as lung cancer has the highest mortality rate of cancer among residents of Davidson County.[29]

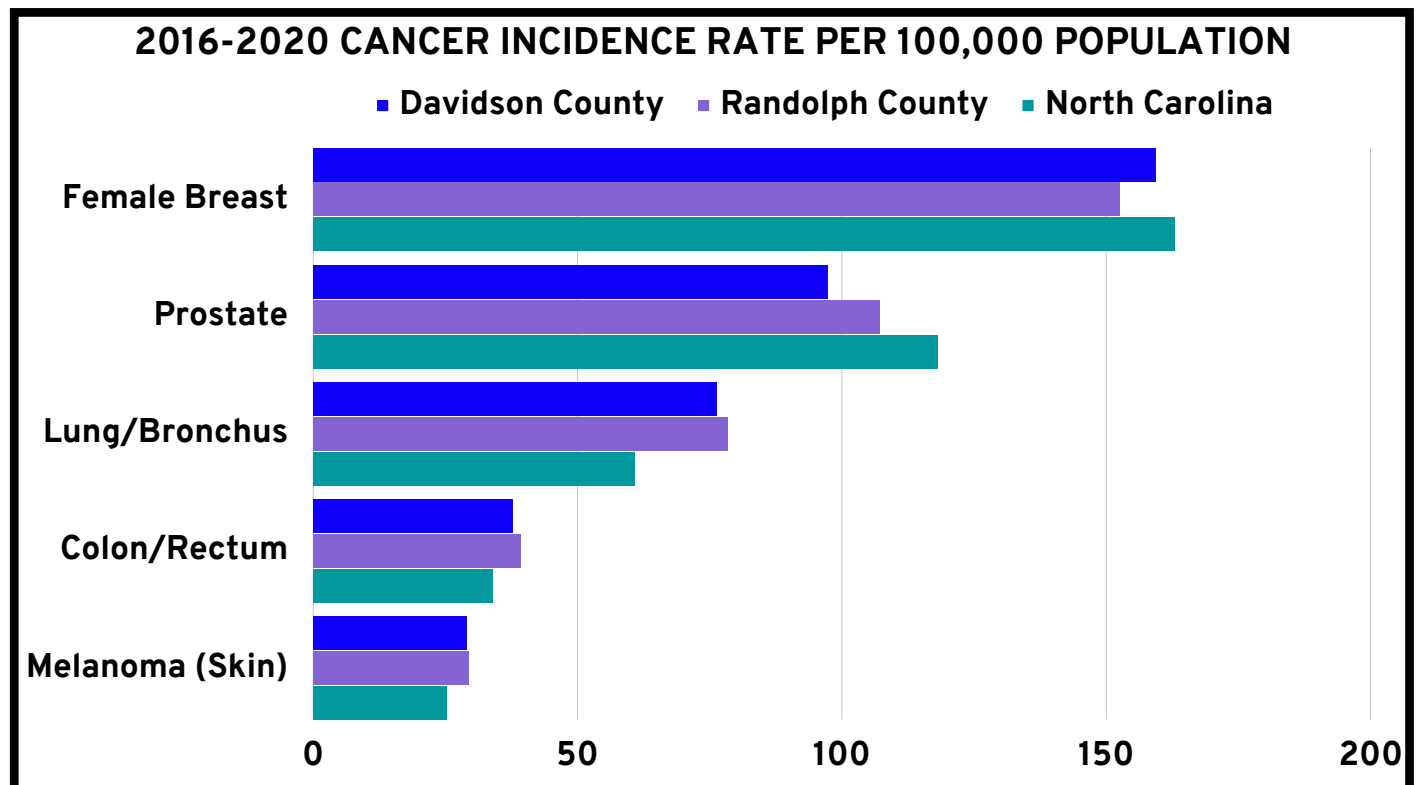


Figure 27: 2016-2020 Cancer Incidence Rate per 100,000 Population

2016-2020 Cancer Incidence Rate per 100,000 Population						
	Female Breast	Prostate	Lung/Bronchus	Colon/Rectum	Melanoma (Skin)	Cervical
Davidson County	159.3	97.3	76.3	37.7	28.9	8.5

Table 13 – Davidson County Cancer incidence rates

[28] (NC State Center for Health Statistics)

[29] (NC State Center for Health Statistics)

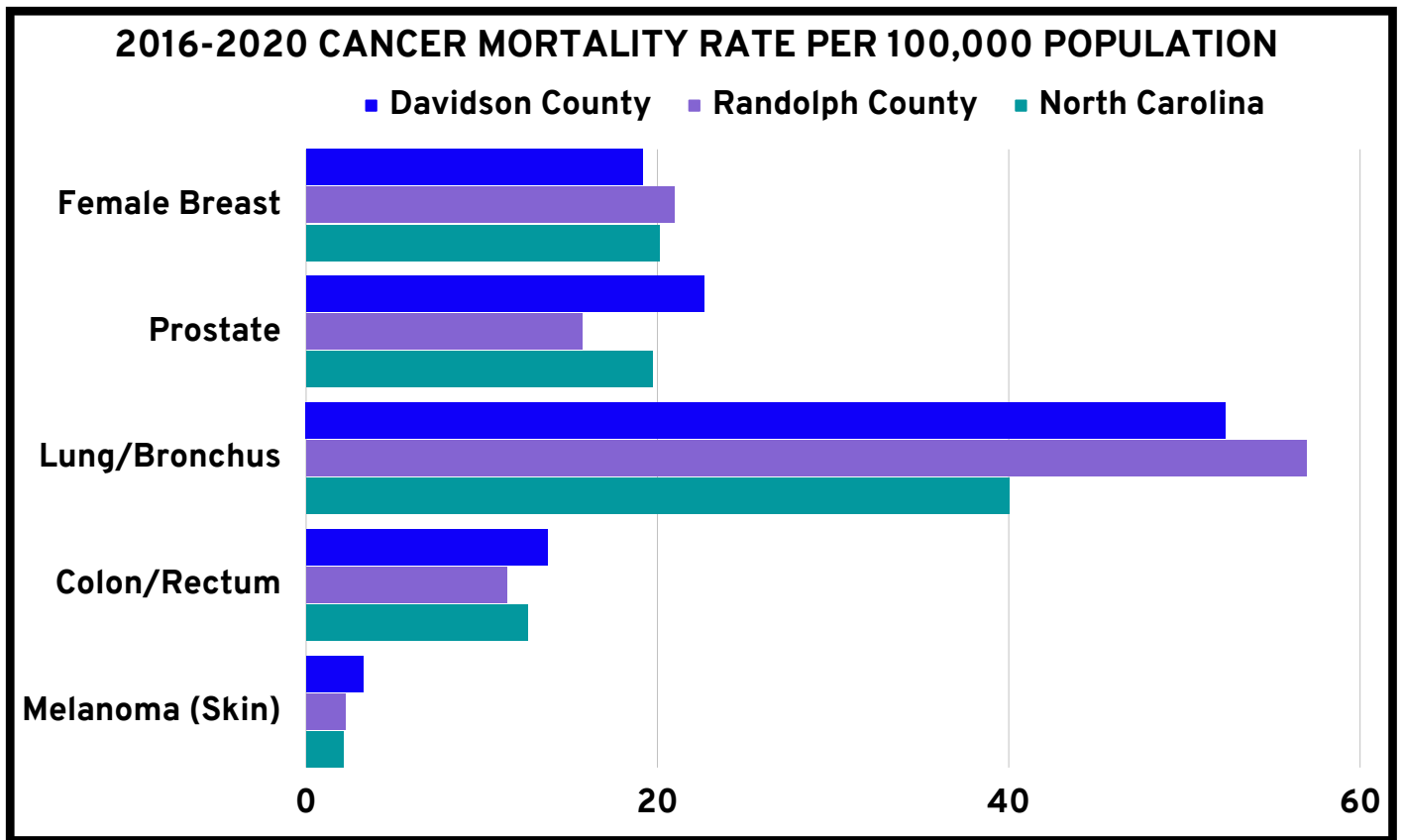


Figure 28: 2016-2020 Cancer Mortality Rate per 100,000 Population

2016 - 2020 Cancer Mortality Rate per 100,000 Population						
	Female Breast	Prostate	Lung/Bronchus	Colon/Rectum	Melanoma (Skin)	Cervical
Davidson County	19.1	22.6	52.3	13.7	3.2	****

Table 14 – Davidson County Cancer mortality rates

LENGTH OF LIFE

LEADING CAUSES OF DEATH

Cancer and diseases of the heart are the two leading causes of death among all individuals in Davidson County. African Americans living in Davidson County have a higher incidence of chronic disease-related deaths, specifically heart disease, diabetes, cerebrovascular, and kidney disease when compared to other races. [30]

ALL AGES RANK	TOTAL DEATHS --- ALL CAUSES	# OF DEATHS	DEATH RATE
1	Cancer - All Sites	2,006	240.5
2	Diseases of the heart	1,867	223.8
3	Chronic lower respiratory diseases	683	81.9
4	Alzheimer's disease	592	71.0
5	Cerebrovascular disease	499	59.8
6	Other Unintentional injuries	466	55.9
7	Diabetes mellitus	297	35.6
8	Pneumonia & influenza	215	25.8
9	Nephritis, nephrotic syndrome, & nephrosis	198	23.7
10	Motor vehicle injuries	159	19.1

Table 15: 2016-2020 Leading Causes of Death in Davidson County; All Ages, Number of Deaths, Death Rates per 100,000 population

LENGTH OF LIFE

LIFE EXPECTANCY

Life Expectancy, for the purpose of this report, is defined by the NC State Center for Health Statistics as the average number of additional years that someone at a given age would be expected to live if current mortality conditions remained constant throughout their lifetime.[31] The 2018-2020 Life Expectancies report indicates that for infants under a year of age at the time of this report, their life expectancy, without gender or racial considerations, is **75.7 years**.

PREMATURE DEATHS

Premature death refers to individuals who die earlier than expected due to a specific cause of death. Years of Potential Life Lost (YPLL) is the difference between the life expectancy for an individual at the age of death and the individuals' actual age at death. The YPLL for individual deaths is summed to provide the total years of potential life lost. [32]

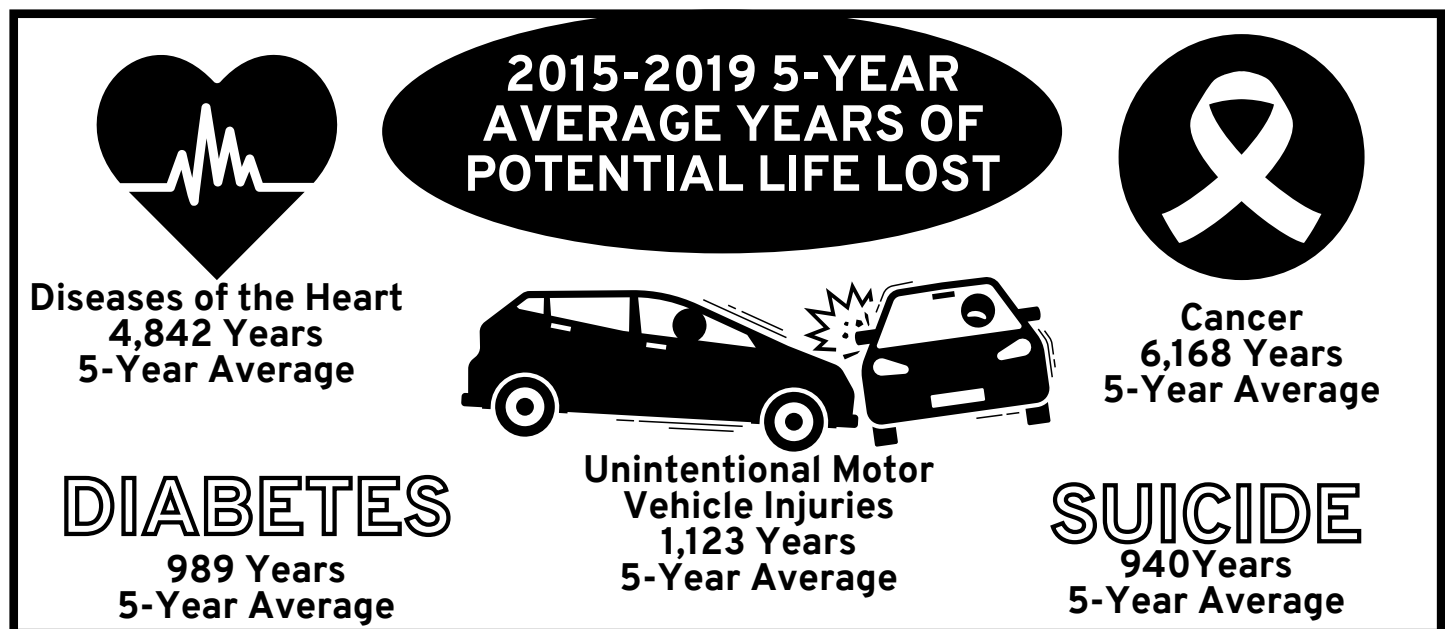


Figure 29: 2015-2019 Average Years of Potential Life Lost in Davidson County

[31] (NC State Center for Health Statistics)

[32] (NC State Center for Health Statistics)

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APPENDIX A: SECONDARY DATA

DEMOGRAPHIC - TOTAL POPULATION - DECENNIAL CENSUS

	Davidson County, North Carolina
Total Population:	168,930

Source: Decennial Census - 2020 - Total Population

Table ID: P1

<https://data.census.gov/cedsci/table?q=population%20davidson%20county%20nc&tid=DECENNIALPL2020.P1>

DEMOGRAPHIC - AGE DISTRIBUTION

	Davidson County (%)	North Carolina (%)
Persons under 5 years	5.50%	5.80%
Persons under 18 years	21.70%	21.90%
Persons 65 years and over	18.50%	16.70%

Source: U.S. Census Bureau Populations Estimate Program (PEP) & U.S. Census Bureau, American Community Survey (ACS) 1-Year Estimate

<https://www.census.gov/quickfacts/fact/table/davidsoncountynorthcarolina/PST045219>

DEMOGRAPHIC - TOTAL POPULATION AND AGE

	Davidson County, North Carolina		North Carolina	
	Number	Percent	Number	Percent
Total population	165,381	100%	10,264,876	100%
Under 5 years	9,046	6%	605,125	6%
5 to 9 years	10,190	6%	630,547	6%
10 to 14 years	10,636	6%	663,079	7%
15 to 19 years	10,161	6%	684,678	7%
20 to 24 years	9,149	6%	697,588	7%
25 to 34 years	18,924	11%	1,362,577	13%
35 to 44 years	19,692	12%	1,298,033	13%
45 to 54 years	24,604	15%	1,376,281	13%
55 to 59 years	12,638	8%	683,840	7%
60 to 64 years	10,858	7%	635,115	6%
65 to 74 years	17,256	10%	976,794	10%
75 to 84 years	9,467	6%	476,222	5%
85 years and over	2,760	2%	174,997	2%
Median age (years)	42.5	N/A	38.7	N/A

Source: American Community Survey (ACS) 5-Year Estimates and Data Profiles.

<https://data.census.gov/cedsci/table?q=davidson%20county%20north%20carolina%20housing%20and%20demographics&g=0400000US37&tid=ACSDP5Y2019.DP05&hidePreview=false>

DEMOGRAPHIC - RACE/ETHNICITY

	Davidson County (%)	North Carolina (%)
White	86%	69%
Black or African American	9%	21%
American Indian and Alaska Native	0%	1%
Asian	2%	3%
Native Hawaiian and Other Pacific Islander	0%	0%
Hispanic or Latino (of any race)	7%	9%
Some other race	1%	3%
Two or more races	2%	3%

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimate

[https://data.census.gov/cedsci/table?](https://data.census.gov/cedsci/table?q=davidson%20county%20north%20carolina%20demographics%20and%20housing&tid=ACSDP5Y2019.DP05&hidePreview=false)

[q=davidson%20county%20north%20carolina%20demographics%20and%20housing&tid=ACSDP5Y2019.DP05&hidePreview=false](https://data.census.gov/cedsci/table?q=davidson%20county%20north%20carolina%20demographics%20and%20housing&tid=ACSDP5Y2019.DP05&hidePreview=false)

EDUCATIONAL ATTAINMENT POPULATION 25 YEARS+ (2015-2019)

	Davidson County	North Carolina
High School Graduate or Higher	84%	88%
Less than 9th Grade	5%	5%
High School, No Diploma	11%	8%
High School Graduate or Equivalency	33%	26%
Some College, No Degree	22%	21%
Associate Degree	10%	10%
Bachelor's Degree	19%	20%
Graduate or Professional Degree	5%	11%

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimate
<https://data.census.gov/cedsci/table?q=dauidson%20county%20north%20carolina%20educational%20attainment&g=0400000US37&tid=ACST5Y2019.S1501&hidePreview=false>

MEANS OF TRANSPORTATION BY AGE AND SEX, DAVIDSON COUNTY (2015-2019)

Age group	Means of Transportation		
	Drove alone	Carpooled	Public Transportation (excluding taxicab)
16-19 years	3.20%	4.90%	2.30%
20-24 years	8.20%	10.00%	14.00%
25-44 years	38.30%	48.60%	45.60%
45-54 years	25.30%	20.40%	23.50%
55-59 years	11.70%	8.30%	0.30%
60 years and over	13.30%	7.80%	14.30%
Median age (years)	45.1	38.9	33.7
Male	53.50%	57.20%	53.40%
Female	46.50%	42.80%	46.60%

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimate

[https://data.census.gov/cedsci/table?](https://data.census.gov/cedsci/table?q=davidson%20county%20north%20carolina%20means%20of%20transportation&tid=ACSST5Y2019.S0802&hidePreview=false)

[q=davidson%20county%20north%20carolina%20means%20of%20transportation&tid=ACSST5Y2019.S0802&hidePreview=false](https://data.census.gov/cedsci/table?q=davidson%20county%20north%20carolina%20means%20of%20transportation&tid=ACSST5Y2019.S0802&hidePreview=false)

POVERTY STATUS IN THE PAST 12 MONTHS DISAGGREGATED BY AGE, DAVIDSON COUNTY AND NORTH CAROLINA (2015-2019)

County/State	Under 5 years	5-17 years	18-34 years	35-64 years	60 years and over	65 years and over
Davidson	27.60%	22.30%	17.30%	12.70%	10.20%	9.50%
North Carolina	23.80%	20.20%	18.30%	11.30%	9.80%	9.10%

Source: ACS 5-Year Estimates Subject Tables

[https://data.census.gov/cedsci/table?](https://data.census.gov/cedsci/table?q=dauidson%20county%20north%20carolina%20poverty%20status&g=0400000US37&tid=ACSST5Y2019.S1701&hidePreview=false)

[q=dauidson%20county%20north%20carolina%20poverty%20status&g=0400000US37&tid=ACSST5Y2019.S1701&hidePreview=false](https://data.census.gov/cedsci/table?q=dauidson%20county%20north%20carolina%20poverty%20status&g=0400000US37&tid=ACSST5Y2019.S1701&hidePreview=false)

INCOME PER HOUSEHOLD IN THE PAST 12 MONTHS (IN 2019 INFLATION-ADJUSTED DOLLARS)

Income per Household in the Past 12 Months (in 2019 Inflation-Adjusted Dollars)		
Income Level	Davidson County	North Carolina
Below \$10,000	6.20%	6.40%
\$10,000-\$14,999	5.30%	5.00%
\$15,000-24,999	12.30%	10.30%
\$25,000-34,999	11.20%	10.30%
\$35,000-\$49,999	15.40%	13.90%
\$50,000-74,999	19.50%	18.00%
\$75,000-99,999	12.50%	12.40%
\$100,000-149,999	11.60%	13.10%
\$150,000-199,999	3.40%	5.10%
\$200,000 or more	2.50%	5.40%
Median household income	\$49,546	\$54,602

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimate
<https://data.census.gov/cedsci/table?q=dauidson%20county%20north%20carolina%20income%20&tid=ACSSST5Y2019.S1901&hidePreview=false>

COMPARATIVE HOUSING CHARACTERISTICS, DAVIDSON COUNTY (2015-2019)

HOUSING OCCUPANCY	
Total housing units	74,839
Occupied housing units	89.1%
Vacant housing units	10.9%
Homeowner vacancy rate	2.4
Rental vacancy rate	5.8

HOUSING TENURE	
Occupied housing units	66,653
Owner-occupied	69.8%
Renter-occupied	30.2%
Average household size of owner-occupied unit	2.45
Average household size of renter-occupied unit	2.47

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimate
<https://data.census.gov/cedsci/table?q=Davidson%20County,%20NC%20Housing%20units&tid=ACSCP5Y2019.CP04>

LIVE BIRTHS IN DAVIDSON COUNTY (2015-2019)

	Total		White, Non-Hispanic		African American, Non-Hispanic		Hispanic	
	Number (2019)	Rate (2015-2019)	Number (2019)	Rate (2015-2019)	Number (2019)	Rate (2015-2019)	Number (2019)	Rate (2015-2019)
Total Births	1775	10.7	1319	9.8	222	12.7	196	17.3
Male	882	5.4	675	5	99	6.5	93	8.3
Female	893	5.2	644	4.8	123	6.2	103	9
Low Birth Weight	185	9.8	123	9.3	34	14.4	24	8.4

Source: N.C. State Center for Health Statistics
<https://schs.dph.ncdhhs.gov/data/vital/volume1/2019/>

2015-2019 DAVIDSON COUNTY PREGNANCY RATES PER 1,000 POPULATION, AGES 15-19 BY RACE/ETHNICITY

Total		White, Non-Hispanic		African American, Non-Hispanic		Other, Non-Hispanic		Hispanic	
Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
710	28	477	24.7	122	46.1	8	*	101	36.4

Source: N.C. State Center for Health Statistics
<https://schs.dph.ncdhhs.gov/data/databook2021/>

INFANT (<1 YEAR) DEATHS PER 1,000 LIVE BIRTHS BY RACE/ETHNICITY, DAVIDSON COUNTY 2015-2019

Total		White, Non-Hispanic		African American, Non-Hispanic		Other, Non-Hispanic		Hispanic	
Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
67	7.6	39	5.9	14	*	3	*	11	*

Source: N.C. State Center for Health Statistics
<https://schs.dph.ncdhhs.gov/data/vital/volume1/2019/>

FETAL DEATHS PER 1,000 DELIVERIES RACE/ETHNICITY, DAVIDSON COUNTY 2015-2019

Total		White, Non-Hispanic		African American, Non-Hispanic		Other, Non-Hispanic		Hispanic	
Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
50	5.6	31	4.7	10	*	3	*	6	*

Source: N.C. State Center for Health Statistics
<https://schs.dph.ncdhhs.gov/data/databook2021/>

DAVIDSON COUNTY LEADING CAUSE OF DEATH (2015-2019)

Cause of Death:	Overall	
	Deaths	Rate
All Causes	9,176	874
Diseases of Heart	1,813	168.6
Cerebrovascular Disease	519	49
Cancer	1,989	178.7
Diabetes Mellitus	294	26.9
Pneumonia and Influenza	222	21.2
Chronic Lower Respiratory Diseases	699	62.3
Chronic Liver Disease and Cirrhosis	128	11.6
Septicemia	157	14.5
Nephritis, Nephrotic Syndrome, and Nephrosis	182	16.9
Unintentional Motor Vehicle Injuries	150	18.6
All Other Unintentional Injuries	366	43.2
Suicide	146	17.4
Homicide	27	3.5
Alzheimer's disease	569	55.4
Acquired Immune Deficiency Syndrome	13	N/A

Source: N.C. State Center for Health Statistics
<https://schs.dph.ncdhhs.gov/data/databook2021/>

2016-2020 CANCER INCIDENCE RATE PER 100,000 POPULATION

	Female Breast	Prostate	Lung/Bronchus	Colon/Rectum	Melanoma (Skin)	Cervical	All Cancers
Davidson County	159.3	97.3	76.3	37.7	28.9	8.5	489.5
North Carolina	162.8	118	60.8	33.9	25.1	6.7	464.3

Source: N.C. State Center for Health Statistics
https://schs.dph.ncdhhs.gov/data/cancer/incidence_rates.htm

2016-2020 CANCER MORTALITY RATE PER 100,000 POPULATION

	Female Breast	Prostate	Lung/Bronchus	Colon/Rectum	Melanoma (Skin)	Cervical	All
Davidson County	19.1	22.6	52.3	13.7	3.2		175.6
North Carolina	20.1	19.7	40	12.6	2.1	1.9	154.6

Source: N.C. State Center for Health Statistics
https://schs.dph.ncdhhs.gov/data/cancer/incidence_rates.htm

AGE-ADJUSTED OTHER UNINTENTIONAL INJURIES DEATH RATES PER 100,000 RESIDENTS, DAVIDSON COUNTY AND NORTH CAROLINA, 2019 AND (2015-2019)

County/State	Number of Deaths 2019	Death Rate 2019	Number of Deaths 2015-2019	Death Rate 2015-2019	Age-Adjusted Death Rate 2015-2019
Davidson	86	51.3	366	44.3	43.2
North Carolina	4,683	44.7	21,107	41.1	39.3

Source: N.C. State Center for Health Statistics
Personal communication Zachary P. Schafer December 14, 2020

AGE-ADJUSTED UNINTENTIONAL MOTOR VEHICLE INJURY DEATH RATES PER 100,000 RESIDENTS, DAVIDSON COUNTY AND NORTH CAROLINA 2019 AND (2015-2019)

County/State	Number of Deaths 2019	Death Rate 2019	Number of Deaths 2015-2019	Death Rate 2015-2019	Age-Adjusted Death Rate 2015-2019
Davidson	19	11.3	150	18.1	18.6
North Carolina	1,608	15.3	7,775	15.1	14.7

Source: N.C. State Center for Health Statistics
Personal communication Zachary P. Schafer December 14, 2020

N.C. RESIDENT MORTALITY STATISTICS: SUICIDE RATES, DAVIDSON COUNTY AND NORTH CAROLINA (2019)

County/State	Number of Deaths 2019	Death Rate 2019	Number of Deaths 2015-2019	Unadjusted Death Rate 2015-2019	Age-Adjusted Death Rate 2015-2019
Davidson	26	15.5	146	17.7	17.4
North Carolina	1,368	13	7,173	14	13.4

Source: N.C. State Center for Health Statistics
Personal communication Zachary P. Schafer December 14, 2020

POISONING DEATHS BY INTENT

	Unintentional		Self-Inflicted		Assault/Undetermined		All	
	Count	Rate	Count	Rate	Count	Rate	Count	Rate
Davidson County (2016-2020)	271	33	21	2.5	4	*	296	35.5
North Carolina (2020)	3,231	31	171	1.6	52	0.5	3,454	32.6

Source: NC DHHS; DPH - Injury Epidemiology, Surveillance, and Informatics Unit
<https://injuryfreenc.dph.ncdhhs.gov/DataSurveillance/index.htm#genData>

NORTH CAROLINA NEWLY DIAGNOSED CHLAMYDIA, GONORRHEA, AND EARLY SYPHILIS RATES PER 100,000 POPULATION BY YEAR

	CHLAMYDIA					GONORRHEA					EARLY SYPHILIS				
	2016	2017	2018	2019	2020*	2016	2017	2018	2019	2020*	2016	2017	2018	2019	2020*
Davidson County	414	401.8	414.5	395.3	421.9	173.3	170.4	175.7	247.9	248.2	3.6	4.2	3	5.9	3
Randolph County	293.6	328	355.5	395.1	394.3	128.6	107	122.9	113.6	155	2.8	1.4	2.8	0.7	4.8
North Carolina	572.4	612.8	642	679.8	607	192.8	221.2	226.5	254.3	264.3	7.7	7.4	7.8	9.4	10.2

Source: NC DHHS; DPH - HIV/STD/Hepatitis Surveillance Unit - 2020 North Carolina STD Surveillance Report
<https://epi.dph.ncdhhs.gov/cd/stds/figures/2020-STD-AnnualReport-Final-v2.pdf>

NEWLY DIAGNOSED HEPATITIS B CASES AND RATES PER 100,000 POPULATION BY YEAR

	Acute Hepatitis B										Chronic Hepatitis B									
	2016		2017		2018		2019		2020*		2016		2017		2018		2019		2020*	
	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate
Davidson County	5	3	6	3.6	2	1.2	4	2.4	9	5.3	9	5.5	26	15.7	17	10.2	30	17.8	25	14.8
Randolph County	3	2.1	7	4.9	22	15.4	17	11.8	9	6.2	13	9.1	10	7	21	14.7	15	10.5	12	8.3
North Carolina	169	1.7	187	1.8	227	2.2	187	1.8	131	1.2	1,384	13.6	1,179	11.5	1,129	10.9	1,150	11	768	7.2

Source: NC DHHS; DPH - HIV/STD/Hepatitis Surveillance Unit - 2020 North Carolina Hepatitis B/C Surveillance Report
<https://epi.dph.ncdhhs.gov/cd/stds/figures/2020-HepBC-AnnualReport-Final.pdf>

NEWLY DIAGNOSED HEPATITIS C CASES AND RATES PER 100,000 POPULATION BY YEAR

	Acute Hepatitis C										Chronic Hepatitis C									
	2016		2017		2018		2019		2020*		2016		2017		2018		2019		2020*	
	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate
Davidson County	0	0	2	1.2	6	3.6	8	4.8	4	2.4	91	55.3	348	210.3	340	203.9	371	220.5	308	182
Randolph County	13	9.1	13	9.1	16	11.2	8	5.6	3	2.1	89	62.2	291	203.5	285	199.1	232	161.7	169	116.9
North Carolina	203	2	190	1.8	198	1.9	185	1.8	100	0.9	5,079	50	19,238	187.2	18,288	176	19,747	188	12,313	116.2

Source: NC DHHS; DPH - HIV/STD/Hepatitis Surveillance Unit - 2020 North Carolina Hepatitis B/C Surveillance Report
<https://epi.dph.ncdhhs.gov/cd/stds/figures/2020-HepBC-AnnualReport-Final.pdf>

HEALTHY NC 2030 REPORT CARD

SOCIAL AND ECONOMIC FACTORS

HEALTH INDICATOR	DESIRED RESULT	DEFINITION	DAVIDSON COUNTY	NORTH CAROLINA	HEALTHY NC 2030 TARGET
INDIVIDUALS BELOW 200% OF FEDERAL POVERTY LEVEL	DECREASE THE NUMBER OF PEOPLE LIVING IN POVERTY	PERCENT OF INDIVIDUALS WITH INCOMES AT OR BELOW 200% OF THE FEDERAL POVERTY LEVEL	15.4% (2015-2019)	34.4% (2015-2019)	27%
UNEMPLOYMENT	INCREASE ECONOMIC SECURITY	PERCENT OF POPULATION AGED 16 AND OLDER WHO ARE UNEMPLOYED BUT SEEKING WORK	5.9% (2015-2019)	5.5% (2015-2019)	REDUCE UNEMPLOYMENT DISPARITY RATIO BETWEEN WHITE AND OTHER POPULATIONS TO 1.7 OR LOWER
SHORT-TERM SUSPENSIONS (PER 10 STUDENTS)	DISMANTLE STRUCTURAL RACISM	NUMBER OF OUT-OF-SCHOOL SHORT-TERM SUSPENSIONS IN EDUCATIONAL FACILITIES FOR ALL GRADES PER 10 STUDENTS	0.58 (2020-2021)	1.50 (2018-2019)	0.8 PER 10 STUDENTS
INCARCERATION RATE (PER 100,000)	DISMANTLE STRUCTURAL RACISM	INCARCERATION IN NORTH CAROLINA PRISONS PER 100,000 POPULATION	472 (2018-2019)	231 (2018-2019)	150 PER 100,000
ADVERSE CHILDHOOD EXPERIENCES	IMPROVE CHILD WELL-BEING	PERCENT OF CHILDREN WHO HAVE EXPERIENCED TWO OR MORE ADVERSE CHILDHOOD EXPERIENCES (ACES)	NOT AVAILABLE AT COUNTY LEVEL	15.3% (2018-2019)	18%
THIRD GRADE READING PROFICIENCY	IMPROVE THIRD GRADE READING PROFICIENCY	PERCENT OF CHILDREN READING AT A PROFICIENT LEVEL OR ABOVE BASED ON THIRD GRADE END OF GRADE EXAMS; PROFICIENCY DEFINED AS LEVEL 3 OR HIGHER	DAVIDSON CO: 47.5% LCS: 35.6 TCS: 24.7%	56.8 (2018-2019)	80%

HEALTHY NC 2030 REPORT CARD

PHYSICAL ENVIRONMENT

HEALTH INDICATOR	DESIRED RESULT	DEFINITION	DAVIDSON COUNTY	NORTH CAROLINA	HEALTHY NC 2030 TARGET
ACCESS TO EXERCISE OPPORTUNITIES	INCREASE PHYSICAL ACTIVITY	PERCENT OF THE POPULATION LIVING HALF A MILE FROM A PARK IN ANY AREA, ONE MILE FROM A RECREATIONAL CENTER IN A METROPOLITAN AREA, OR THREE MILES FROM A RECREATIONAL CENTER IN A RURAL AREA	69%	74%	92%
LIMITED ACCESS TO HEALTHY FOOD	IMPROVE ACCESS TO HEALTHY FOOD	PERCENT OF PEOPLE WHO ARE LOW-INCOME THAT ARE NOT IN CLOSE PROXIMITY TO A GROCERY STORE	7%	7%	5%
SEVERE HOUSING PROBLEMS	IMPROVE HOUSING QUALITY	PERCENT OF HOUSEHOLDS WITH AT LEAST 1 OF 4 SEVERE HOUSING PROBLEMS	14%	15%	14%

HEALTHY NC 2030 REPORT CARD

HEALTH BEHAVIORS

HEALTH INDICATOR	DESIRED RESULT	DEFINITION	DAVIDSON COUNTY	NORTH CAROLINA	HEALTHY NC 2030 TARGET
DRUG OVERDOSE DEATHS (PER 100,000)	DECREASED DRUG OVERDOSE DEATHS	NUMBER OF PERSONS WHO DIE AS A RESULT OF DRUG POISONING PER 100,000 (UNINTENTIONAL POISONING DEATHS/OVERDOSE DEATHS)	27.1	21.2	18
TOBACCO USE	DECREASE TOBACCO USE - YOUTH	PERCENTAGE OF HIGH SCHOOL STUDENTS REPORTING CURRENT USE OF ANY TOBACCO PRODUCT	NOT AVAILABLE	18.85%	9.0%
TOBACCO USE	DECREASE TOBACCO USE - ADULT	PERCENTAGE OF ADULTS REPORTING CURRENT USE OF ANY TOBACCO PRODUCT	20.7%	22.9%	15.0%
EXCESSIVE DRINKING	DECREASE EXCESSIVE DRINKING	PERCENT OF ADULTS REPORTING BINGE OR HEAVY DRINKING	11.0%	15.6%	12.0%
SUGAR-SWEETENED BEVERAGE CONSUMPTION	REDUCE OVER-WEIGHT AND OBESITY YOUTH	PERCENT OF YOUTH REPORTING CONSUMPTION OF ONE OR MORE SUGAR-SWEETENED BEVERAGES PER DAY	NOT AVAILABLE	30.1%	17.0%
SUGAR-SWEETENED BEVERAGE CONSUMPTION	REDUCE OVER-WEIGHT AND OBESITY - ADULT	PERCENT OF ADULTS REPORTING CONSUMPTION OF ONE OR MORE SUGAR-SWEETENED BEVERAGES PER DAY	34.0%	34.2%	20.0%
HIV DIAGNOSIS (PER 100,000 POPULATION)	IMPROVE SEXUAL HEALTH	NUMBER OF NEW HIV DIAGNOSES PER 100,000 POPULATION	9.7	15.6	6.0
TEEN BIRTH RATE	IMPROVE SEXUAL HEALTH	NUMBER OF BIRTHS TO GIRLS AGED 15-19 PER 1,000 POPULATION	22.3	17.8	10.0

HEALTHY NC 2030 REPORT CARD

CLINICAL CARE

HEALTH INDICATOR	DESIRED RESULT	DEFINITION	DAVIDSON COUNTY	NORTH CAROLINA	HEALTHY NC 2030 TARGET
UNINSURED	DECREASE THE UNINSURED POPULATION	POPULATION UNDER AGE 65 WITHOUT INSURANCE	14.2%	11.3%	2019
PRIMARY CARE CLINICIANS (COUNTIES AT OR BELOW 1:1,500 PROVIDERS TO POPULATION)	INCREASE THE PRIMARY CARE WORKFORCE	PRIMARY CARE WORKFORCE AS A RATIO OF THE NUMBER OF FULL-TIME EQUIVALENT PRIMARY CARE CLINICIANS TO COUNTY POPULATION (PRIMARY CARE PROVIDER TO POPULATION RATIO)			
EARLY PRENATAL CARE	IMPROVE BIRTH OUTCOMES	PERCENTAGE OF WOMEN WHO RECEIVE PREGNANCY-RELATED HEALTH CARE SERVICES DURING THE FIRST TRIMESTER OF PREGNANCY	65.9%	67.5%	80.0%
SUICIDE RATE (PER 100,000 POPULATION)	IMPROVE ACCESS AND TREATMENT FOR MENTAL HEALTH NEEDS	AGE-ADJUSTED NUMBER OF DEATHS ATTRIBUTABLE TO SELF-HARM PER 100,000 POPULATION (SUICIDE RATE)	15.1	12.6	11.1

HEALTHY NC 2030 REPORT CARD

HEALTH OUTCOMES

HEALTH INDICATOR	DESIRED RESULT	DEFINITION	DAVIDSON COUNTY	NORTH CAROLINA	HEALTHY NC 2030 TARGET
INFANT MORTALITY (PER 1,000 BIRTHS)	DECREASE INFANT MORTALITY	RATE OF INFANT DEATHS PER 1,000 LIVE BIRTHS	4.5	6.80	6.0
INFANT MORTALITY (PER 1,000 BIRTHS)	DECREASE INFANT MORTALITY BLACK/WHITE DISPARITY RATIO	DISPARITY RATIO BETWEEN WHITE NON-HISPANIC AND AFRICAN-AMERICAN, NON-HISPANIC INFANT DEATHS	2.32	2.47	1.5
LIFE EXPECTANCY (YEARS)	INCREASE LIFE EXPECTANCY	AVERAGE NUMBER OF YEARS OF LIFE REMAINING FOR PERSONS WHO HAVE ATTAINED A GIVEN AGE	76.4	78.1	82.0

TOP 5 LEADING CAUSES OF INJURY DEATH, HOSPITALIZATION, AND EMERGENCY DEPARTMENT VISITS BY COUNTY; ALL AGES

LEADING CAUSES OF INJURY DEATH 2016 TO 2019

RANK	CAUSE	#
1	POISONING - UNINTENTIONAL	178
2	MVT - UNINTENTIONAL	105
3	FALL - UNINTENTIONAL	87
4	FIREARM - SELF-INFLICTED	64
5	SUFFOCATION - SELF-INFLICTED	30

LEADING CAUSES OF INJURY HOSPITALIZATION 2016 TO 2019

RANK	CAUSE	#
1	FALL - UNINTENTIONAL	1,662
2	MVT - UNINTENTIONAL	512
3	POISONING - UNINTENTIONAL	360
4	POISONING - SELF-INFLICTED	176
5	UNSPECIFIED - UNINTENTIONAL	164

LEADING CAUSES OF INJURY ED VISITS 2016 TO 2019

RANK	CAUSE	#
1	FALL - UNINTENTIONAL	15,103
2	MVT - UNINTENTIONAL	8,317
3	POISONING - UNINTENTIONAL	5,737
4	NATURAL/ENVIRONMENTAL - UNINTENTIONAL	3,319
5	STRUCK BY/AGAINST - UNINTENTIONAL	3,246

TOP 5 LEADING CAUSES OF INJURY DEATH, HOSPITALIZATION, AND EMERGENCY DEPARTMENT VISITS BY COUNTY; AGES 0-14

LEADING CAUSES OF INJURY DEATH 2016 TO 2019

RANK	CAUSE	#
1	MVT - UNINTENTIONAL	2
2	SUFFOCATION - SELF-INFLICTED	1
	POISONING - UNINTENTIONAL	1
	OTHER SPECIFIED/CLASSIFIABLE-ASSAULT	1
	DROWNING/SUBMERSION - UNDETERMINED	1

LEADING CAUSES OF INJURY HOSPITALIZATION 2016 TO 2019

RANK	CAUSE	#
1	OTHER SPECIFIED/CLASSIFIABLE-ASSAULT	35
2	MVT - UNINTENTIONAL	28
3	UNSPECIFIED - UNINTENTIONAL	23
4	FALL - UNINTENTIONAL	22
5	POISONING - UNINTENTIONAL	11

LEADING CAUSES OF INJURY ED VISITS 2016 TO 2019

RANK	CAUSE	#
1	FALL - UNINTENTIONAL	2,369
2	UNSPECIFIED - UNINTENTIONAL	956
3	STRUCK BY/AGAINST - UNINTENTIONAL	865
4	MVT - UNINTENTIONAL	862
5	NATURAL/ENVIRONMENTAL - UNINTENTIONAL	799

Source: NC DHHS; DPH - Injury and Violence Prevention Branch
<https://injuryfreenc.dph.ncdhhs.gov/DataSurveillance/index.htm#genData>

TOP 5 LEADING CAUSES OF INJURY DEATH, HOSPITALIZATION, AND EMERGENCY DEPARTMENT VISITS BY COUNTY; AGES 15-34

LEADING CAUSES OF INJURY DEATH 2016 TO 2019

RANK	CAUSE	#
1	POISONING - UNINTENTIONAL	178
2	MVT - UNINTENTIONAL	105
3	SUFFOCATION - SELF-INFLICTED	14
4	FIREARM - SELF-INFLICTED	12
5	FIREARM - ASSAULT	9

LEADING CAUSES OF INJURY HOSPITALIZATION 2016 TO 2019

RANK	CAUSE	#
1	MVT - UNINTENTIONAL	168
2	POISONING - UNINTENTIONAL	87
3	POISONING - SELF-INFLICTED	70
4	FALL - UNINTENTIONAL	29
5	MOTOR VEHICLE -NONTRAFFIC - UNINTENTIONAL	25

LEADING CAUSES OF INJURY ED VISITS 2016 TO 2019

RANK	CAUSE	#
1	MVT - UNINTENTIONAL	3,521
2	FALL - UNINTENTIONAL	2,061
3	UNSPECIFIED - UNINTENTIONAL	1,906
4	STRUCK BY/AGAINST - UNINTENTIONAL	1,159
5	NATURAL/ENVIRONMENTAL - UNINTENTIONAL	992

TOP 5 LEADING CAUSES OF INJURY DEATH, HOSPITALIZATION, AND EMERGENCY DEPARTMENT VISITS BY COUNTY; AGES 35-64

LEADING CAUSES OF INJURY DEATH 2016 TO 2019

RANK	CAUSE	#
1	POISONING - UNINTENTIONAL	118
2	MVT - UNINTENTIONAL; FIREARM - SELF-INFLICTED	37
3	SUFFOCATION - SELF-INFLICTED	13
4	POISONING - SELF-INFLICTED	10
5	SUFFOCATION - UNINTENTIONAL; FIREARM - ASSAULT; FIRE/BURN - UNINTENTIONAL	6

LEADING CAUSES OF INJURY HOSPITALIZATION 2016 TO 2019

RANK	CAUSE	#
1	FALL - UNINTENTIONAL	382
2	MVT - UNINTENTIONAL	217
3	POISONING - UNINTENTIONAL	200
4	POISONING - SELF-INFLICTED	78
5	UNSPECIFIED - UNINTENTIONAL	63

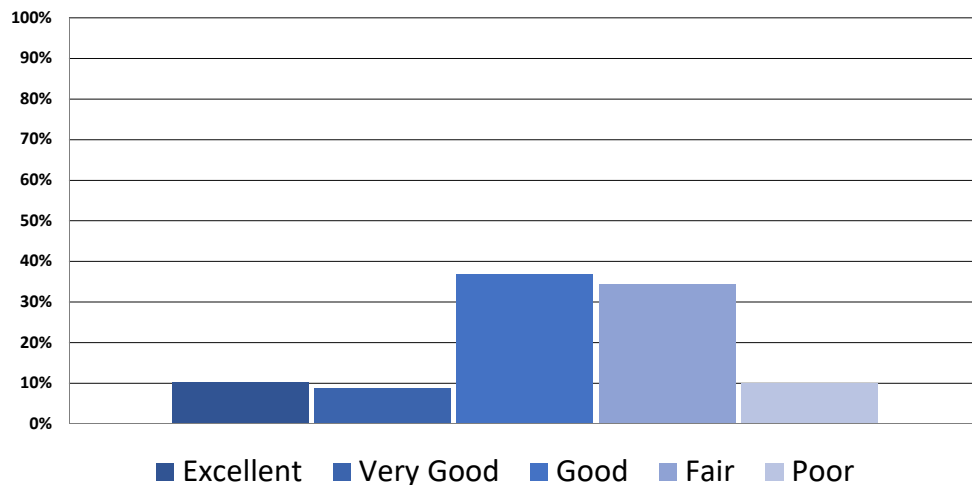
LEADING CAUSES OF INJURY ED VISITS 2016 TO 2019

RANK	CAUSE	#
1	FALL - UNINTENTIONAL	4,829
2	MVT - UNINTENTIONAL	3,222
3	UNSPECIFIED - UNINTENTIONAL	2,144
4	NATURAL/ENVIRONMENTAL - UNINTENTIONAL	1,194
5	STRUCK BY/AGAINST - UNINTENTIONAL	935

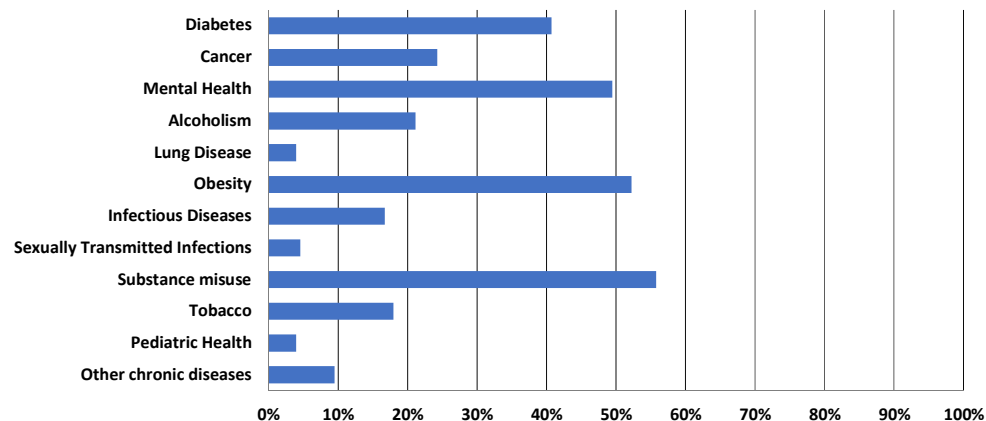


APPENDIX B: SURVEY RESULTS

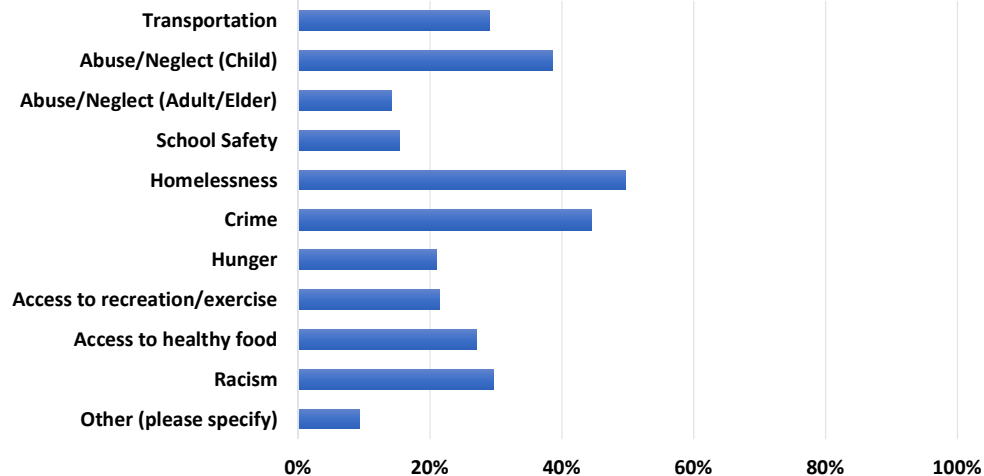
Q1: How would you describe the overall health of Davidson County?



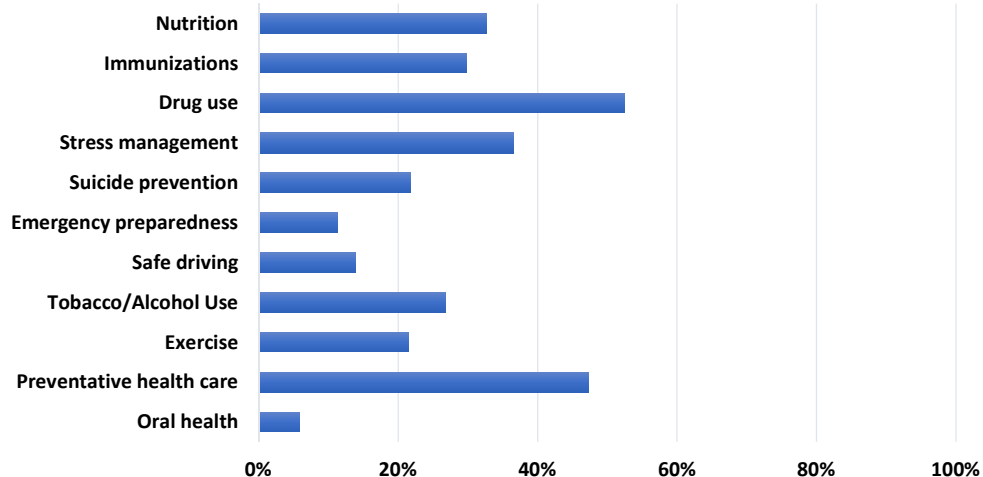
Q2: Of the following health issues, select 3 that you feel are the biggest issues in Davidson County.



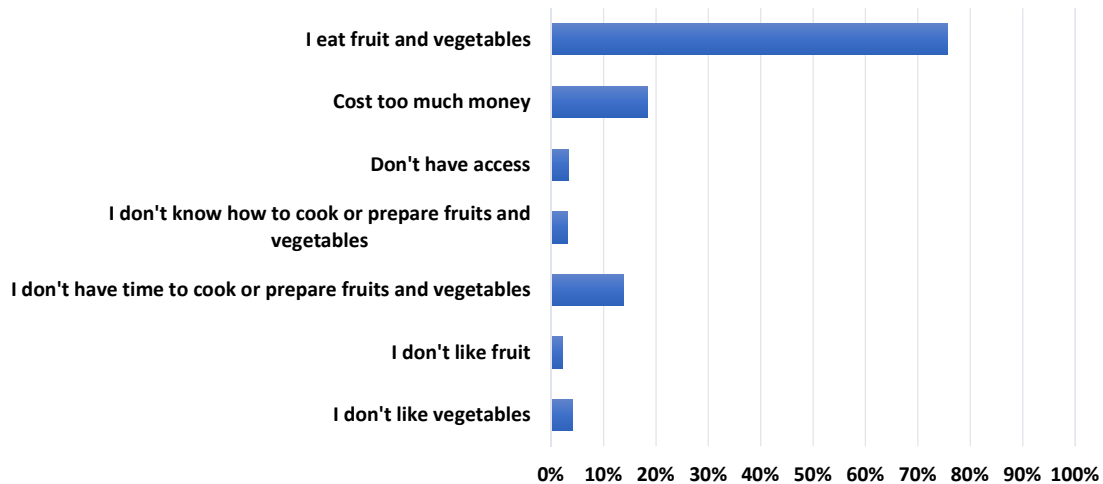
Q3: Of the following community issues, select 3 that you feel are the biggest issues in Davidson County.



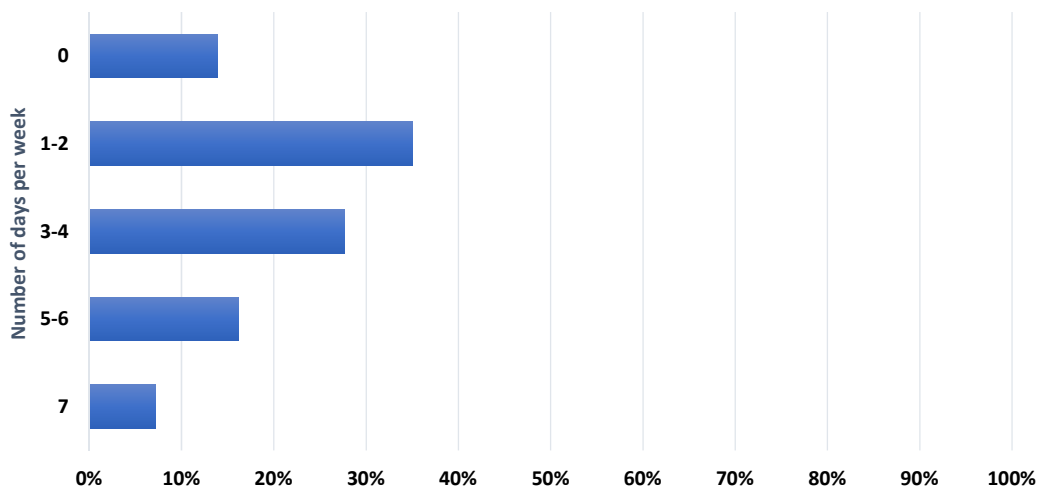
Q4: In your opinion, which of the following health behaviors do people in your community need more information about? Select the top 3.



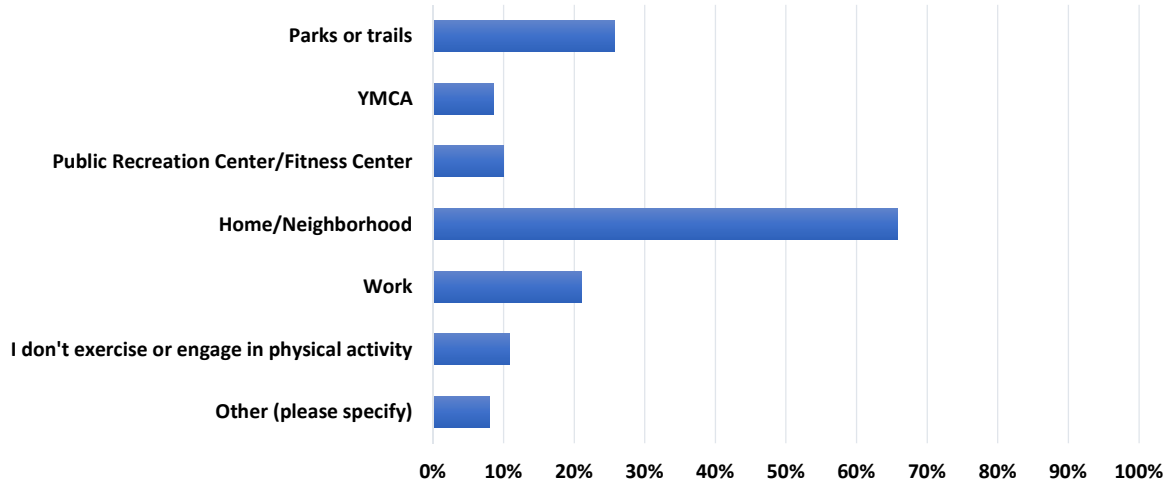
Q5: What prevents you from eating fruits and vegetables daily? Check all that apply.



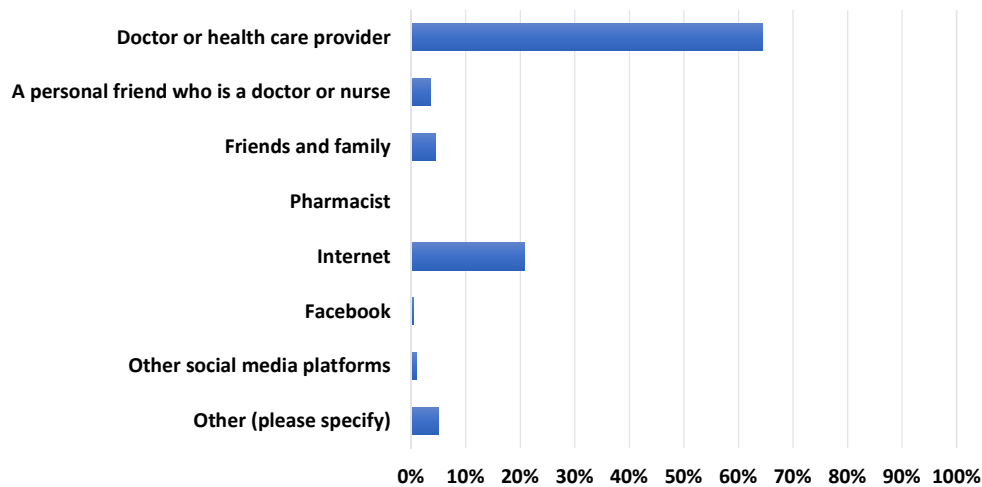
Q6: During a typical week, how many days do you engage in moderate physical activity for at least 30 minutes each day? Select one.



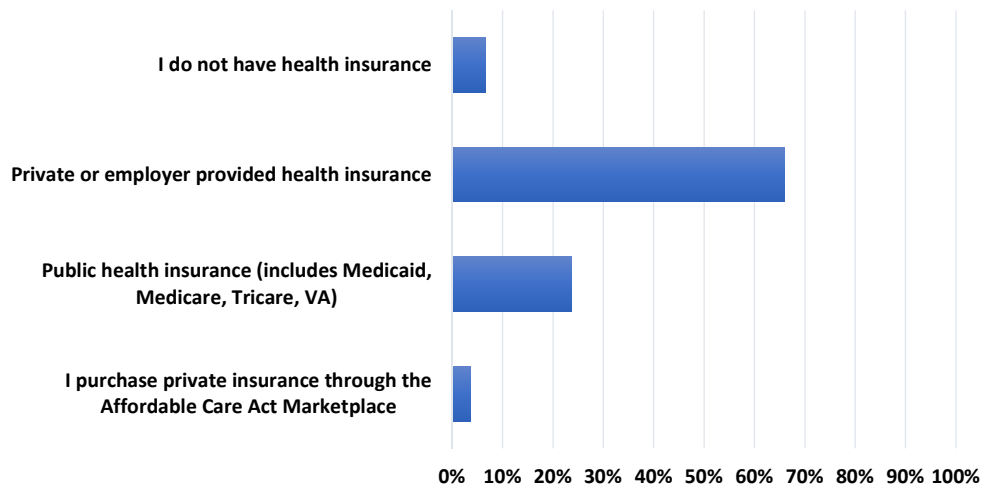
Q7: Where do you go to exercise or engage in physical activity? Check all that apply.



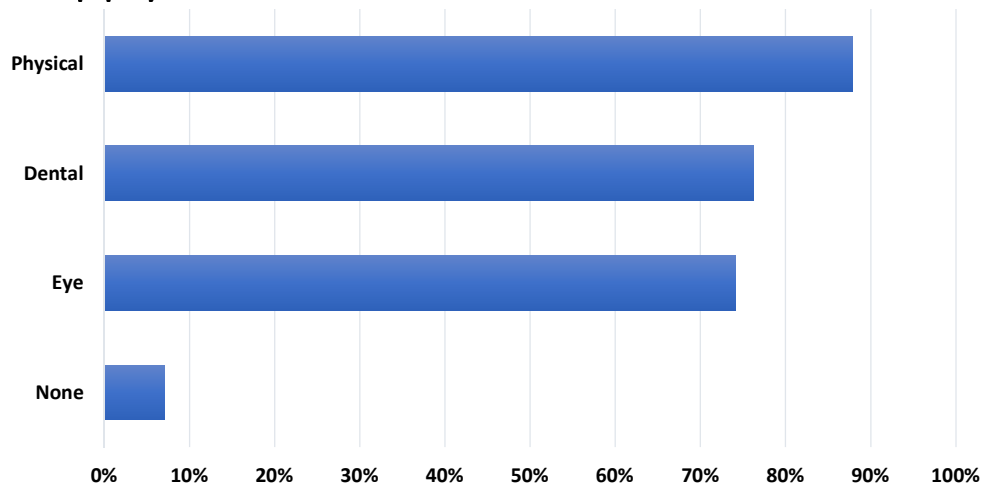
Q8: Where do you get most of your health-related information or health advice?



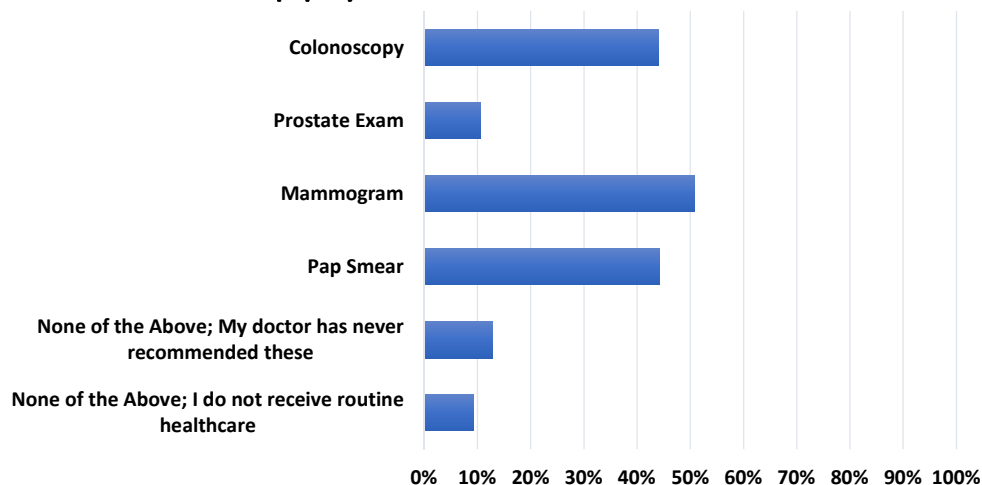
Q9: What type of health insurance do you currently have? Select one answer.



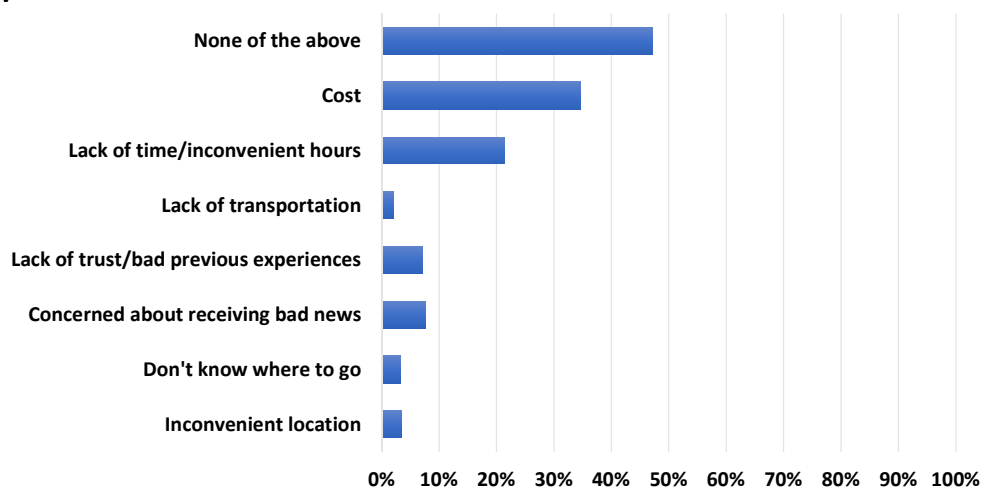
Q10: Do you seek routine or preventative health care? (Dental, eye, and physical exams) Check all that apply.



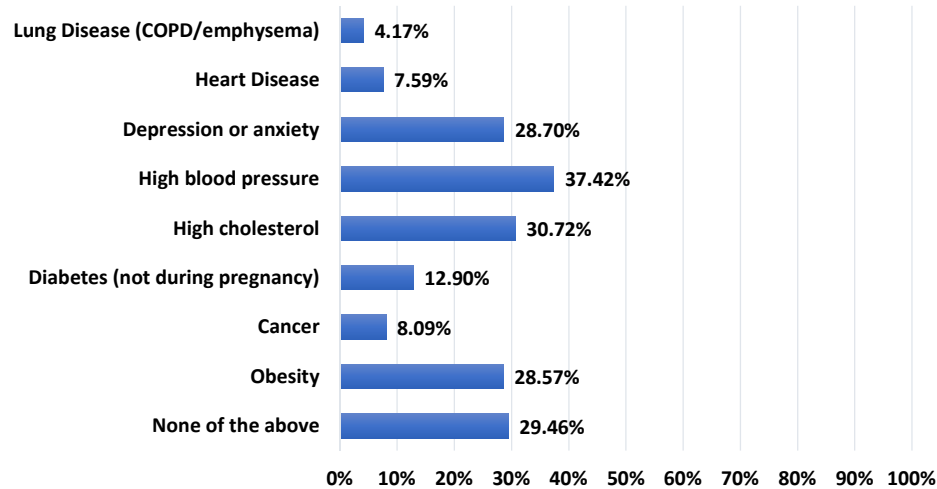
Q11: Do you receive any of the routine screenings?
Check all that apply.



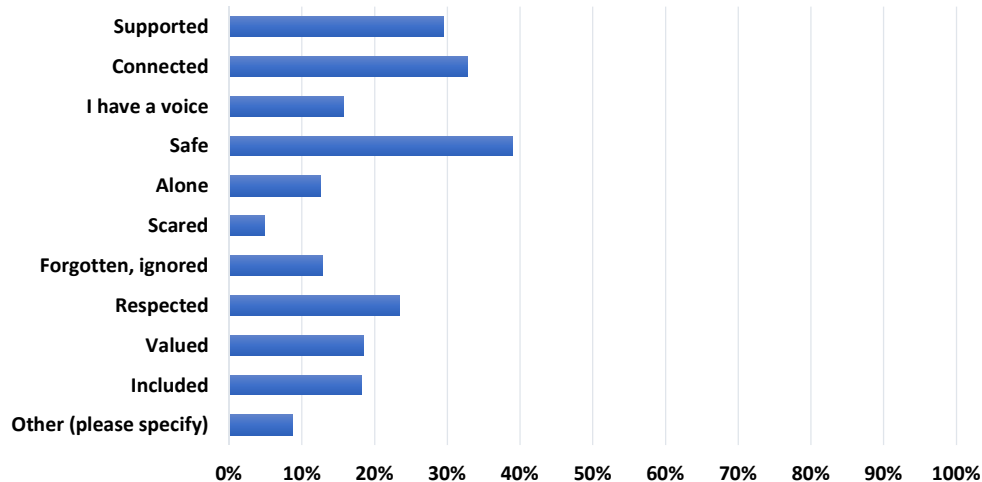
Q12: What barriers currently exist to you or members of your household accessing health care? Check all that apply.



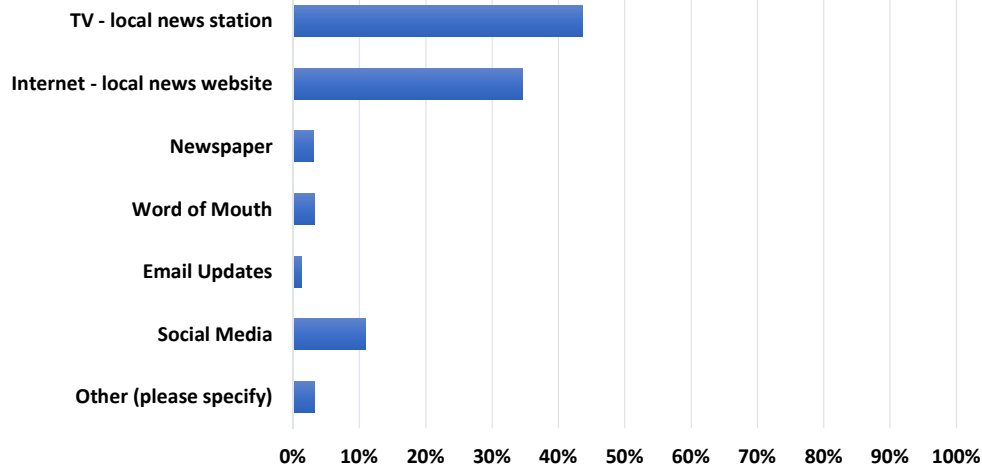
Q13: Have you ever been told by a doctor or other licensed health care professional that you have any of the following conditions? Check all that apply.



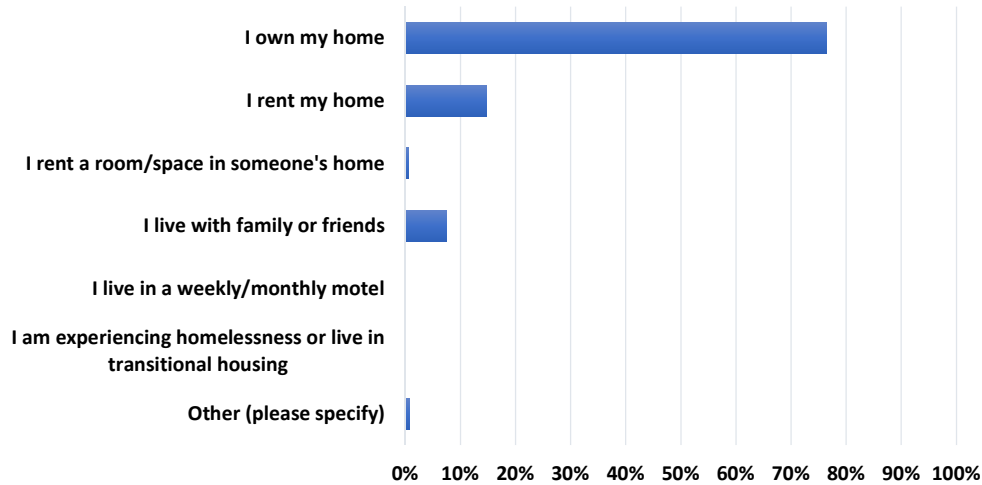
Q14: How do you feel in your community? Check all that apply.



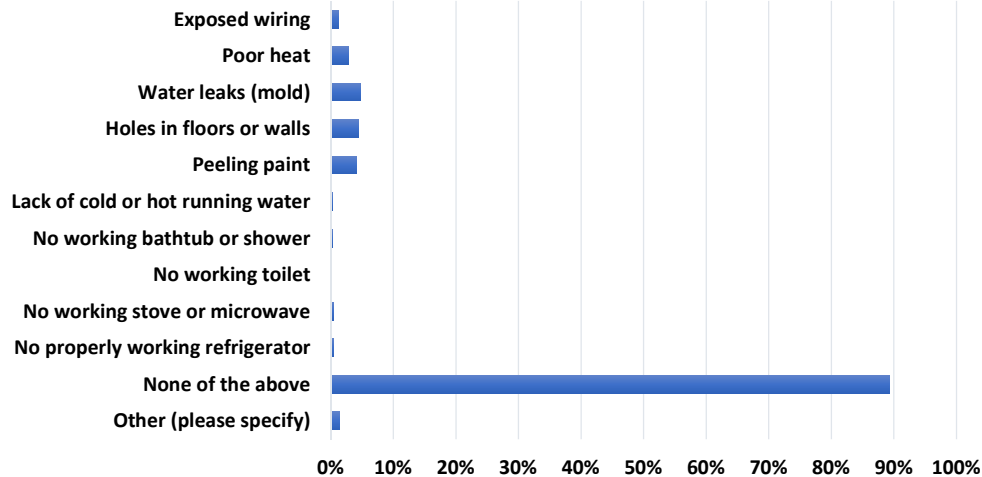
Q15: Where do you go first to find out about local news or current events? Select one.



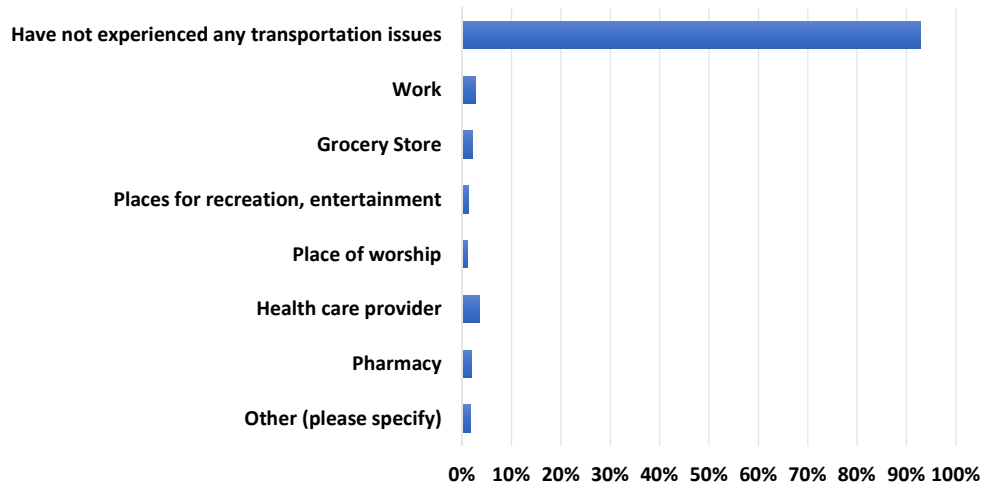
Q16: Which of the following best describes your current living situation?



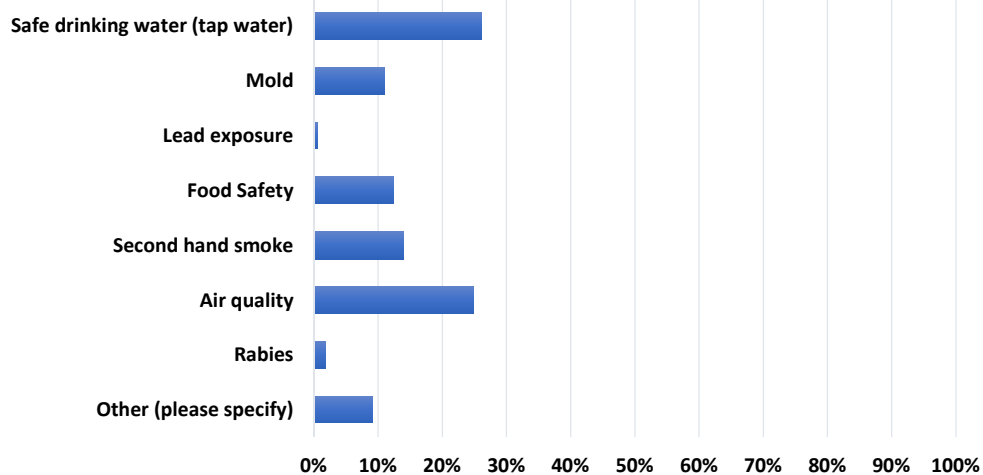
Q17: Does the place you are currently living have any of the following issues? Check all that apply.



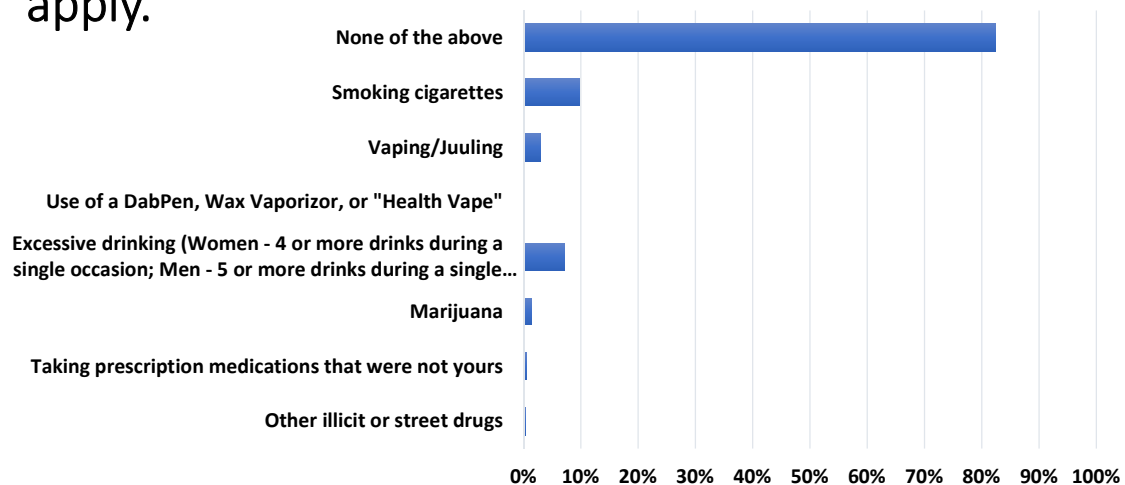
Q18: Which of the following places have you or someone in your household had a difficult time getting to because transportation was not available? Check all that apply.



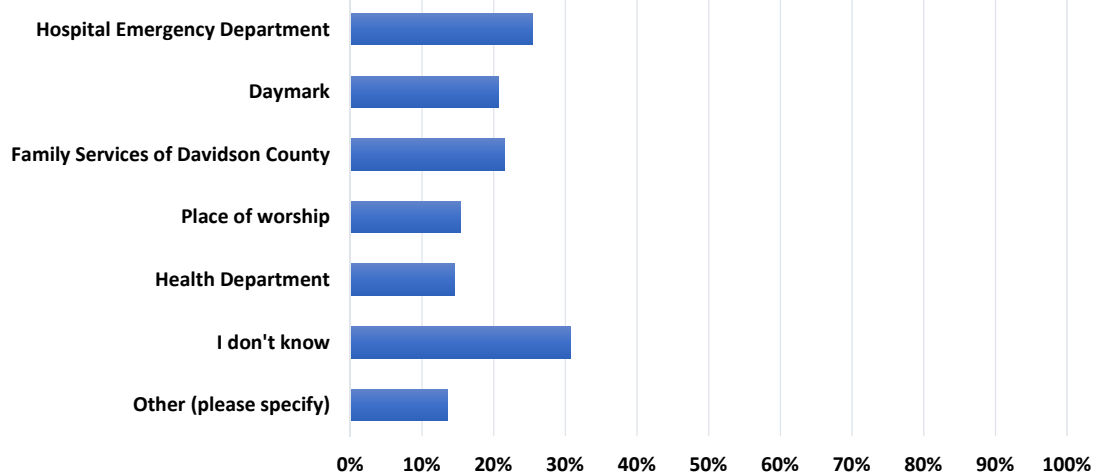
Q19: Which of the following Environmental Health concerns do you believe impacts you the most? Select one.



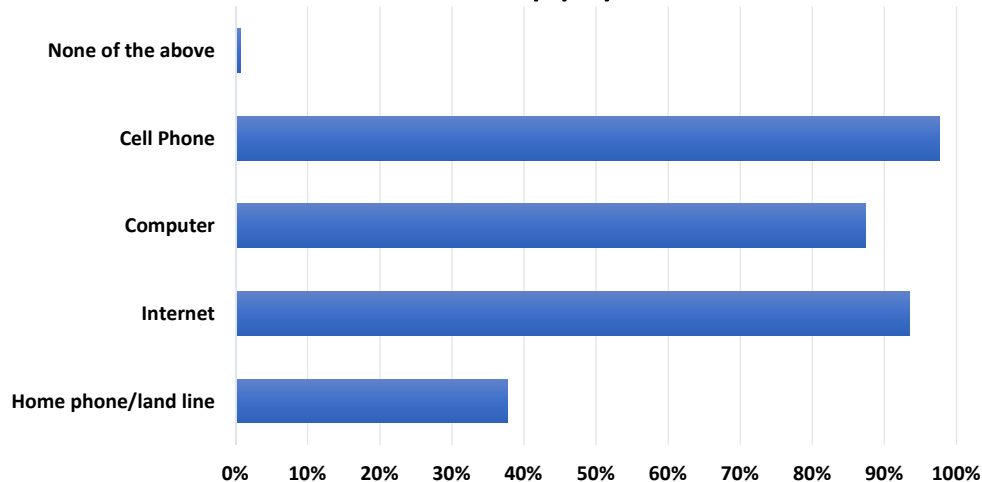
Q20: In the last 12 months, have you engaged in any of the following behaviors? Check all that apply.



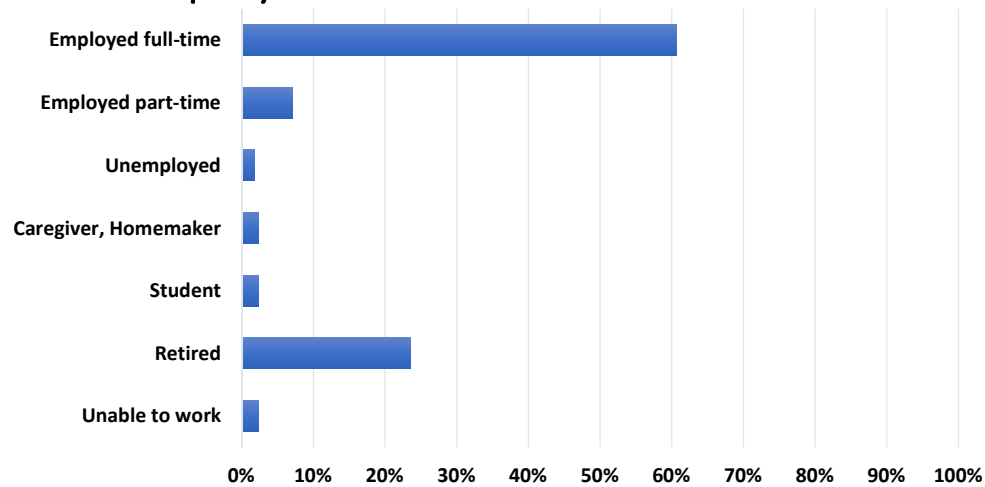
Q21: If you or someone you know was experiencing substance misuse issues or needed mental health treatment, where would you go or who would you ask for help? Check all that apply.



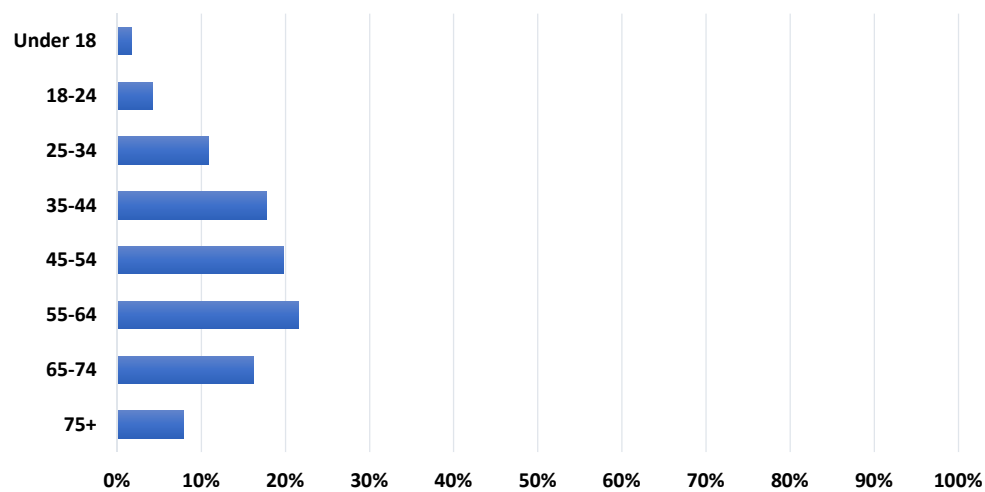
Q22: Do you have reliable access to the following resources? Check all that apply.



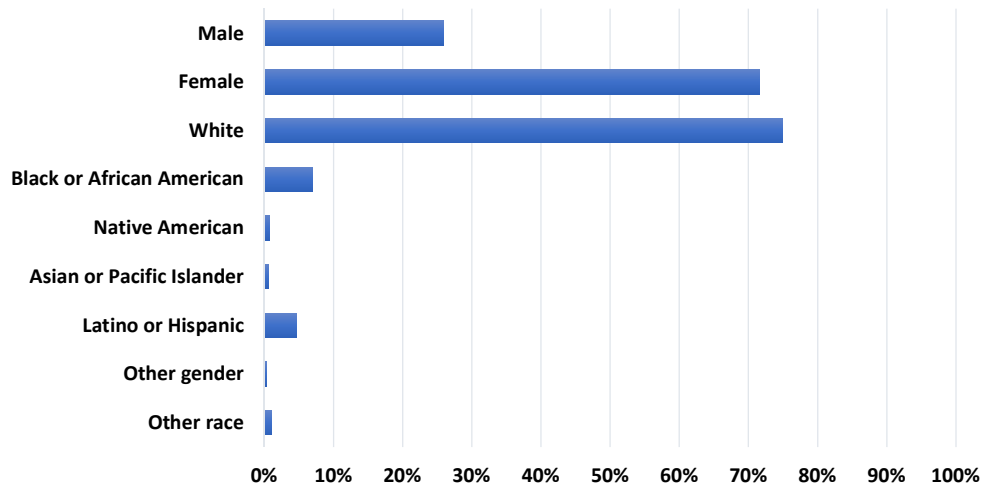
Q23: Which of the following best describes your current employment status?



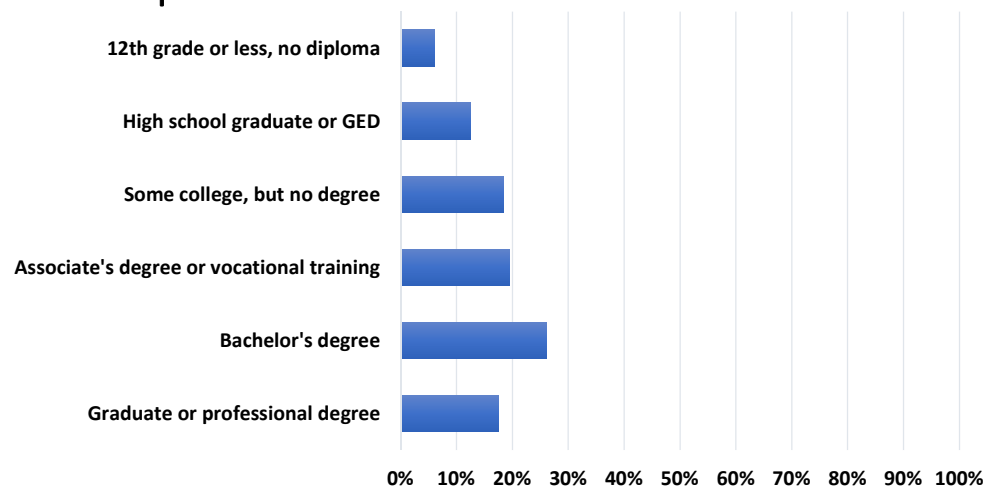
Q24: What is your age?



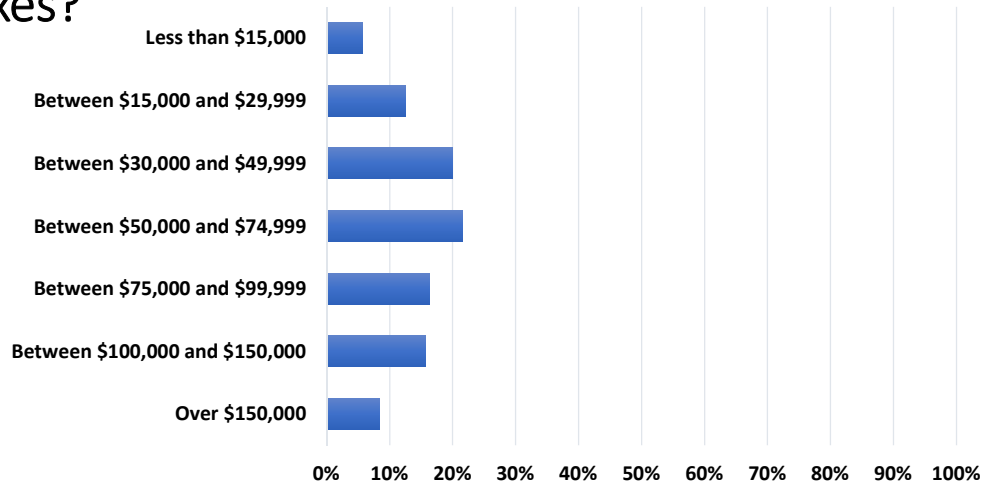
Q25: Please check all that apply. We encourage you to utilize the comment box if you do not see a choice that describes you.



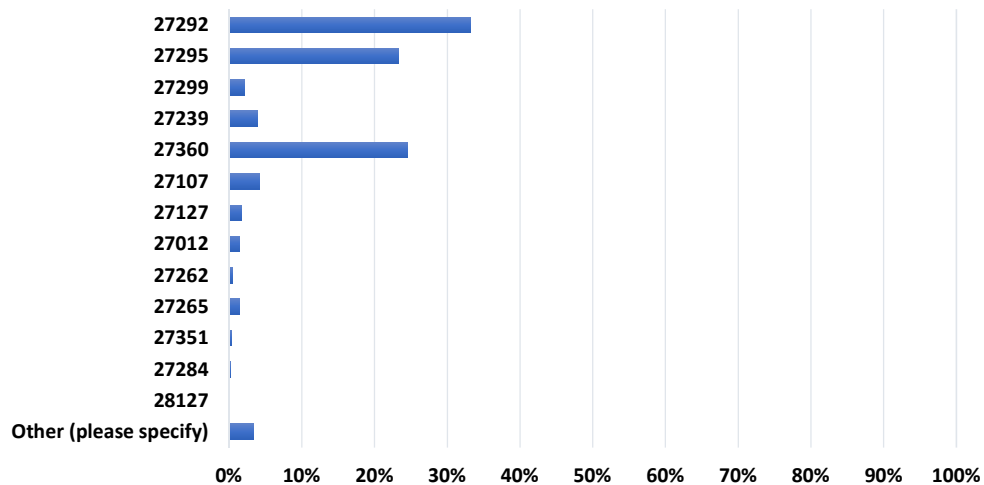
Q26: What is the highest level of education you have completed?



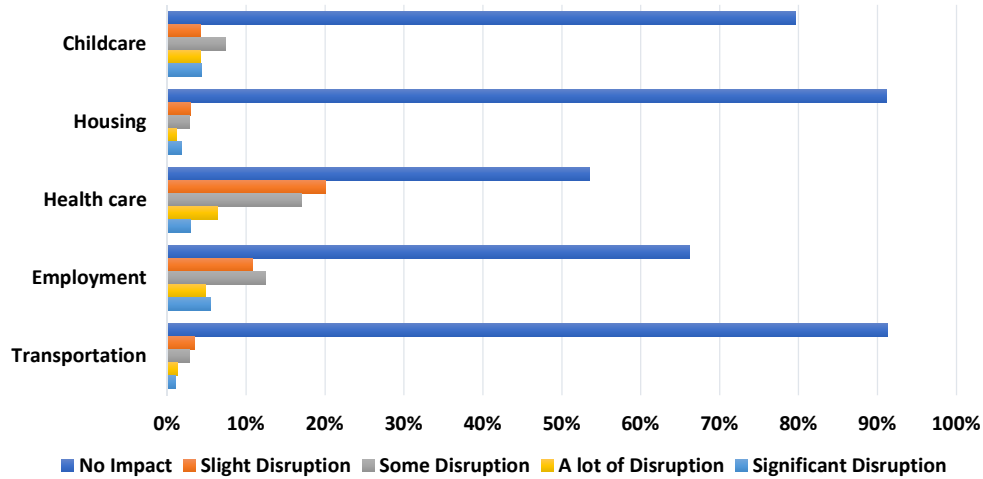
Q27: Which of the following categories best describes your household income last year before taxes?



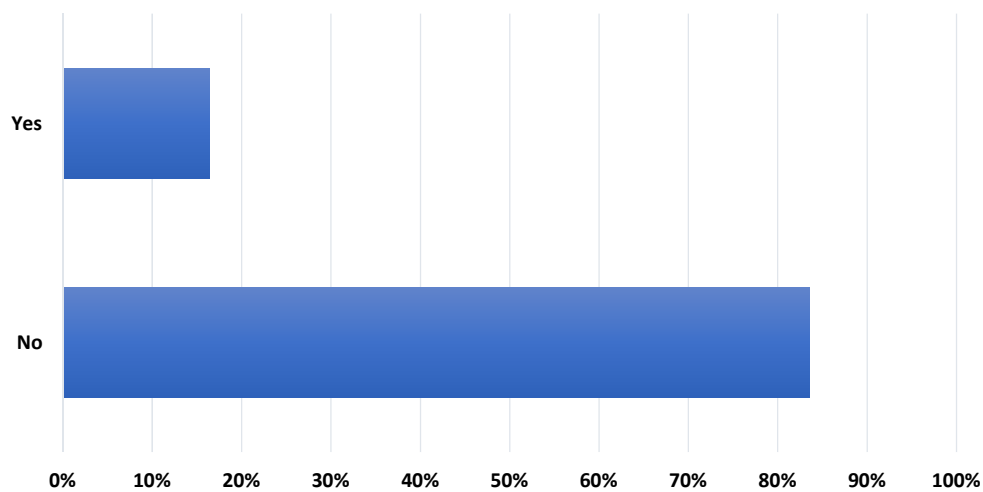
Q29: What is the zip code of your home in Davidson County?



Q30: How much has the COVID-19 pandemic impacted your access to the following things?



Q31: Have you tested positive for COVID-19 since March 2020?



Q32: Have you chosen to receive the COVID-19 vaccine?

