



***Davie County  
Community Health  
& Needs Assessment***

**Preliminary Data as of  
November 2, 2007**



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# ***Purpose of the Community Health & Needs Assessment***

- Describe the health status of the community.
- Create a report that will serve as a resource for the Davie County Health Department, Healthy Carolinians of Davie County, Davie County United Way and other community organizations.
- Provide direction for the planning of disease prevention and health promotion services and activities.



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# ***Three Contributing Viewpoints***

<b>Secondary Data</b>	<b>Citizen Opinion and Data</b>	<b>Leader Opinion</b>
<ul style="list-style-type: none"><li>-Demographic</li><li>-Socioeconomic</li><li>-Health</li><li>-Environmental</li></ul>	<ul style="list-style-type: none"><li>-Community survey (n=210)</li><li>-Focus Groups</li></ul>	<p>Interviews by invitation (n=24)</p>



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## ***We Take Special Notice When...***

- Davie County statistics deviate from North Carolina statistics.
- Trend data show significant changes over time.
- There are significant age, gender, or racial disparities.



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# ***Definitions and Symbols***

- **Arrows**

- Arrow up (▲) indicates an increase; two arrows indicates a doubling; three arrows a tripling, etc.
- Arrow down (▼) indicates a decrease; two arrows indicates a halving; three arrows a reduction to one-third, etc.

- **Color**

- **Red** indicates a “worse than” or negative difference
- **Green** indicates a “better than” or positive difference
- **Blue** indicates a likely unstable rate or difference based on a small number of events; figures in blue should be used with great caution.



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# ***Demographic and Socioeconomic Data***



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# ***Population Characteristics***

- Davie County population is growing
- Population will become more urban
- Population will become more dense

<b>1980</b>	<b>1990</b>	<b>2000</b>	<b>2007 (Est.)</b>	<b>2010 (Proj.)</b>
<b>24,599</b>	<b>27,859</b>	<b>34,835</b>	<b>40,597</b>	<b>42,744</b>



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# ***Population Growth***

- Rate of county growth will slow but continue to exceed the overall state growth rate

<b>Percent Population Growth</b>		
<b>Decade</b>	<b>Davie</b>	<b>NC</b>
<b>1970 - 1980</b>	<b>30.5</b>	<b>15.6</b>
<b>1980 - 1990</b>	<b>13.3</b>	<b>12.8</b>
<b>1990 - 2000</b>	<b>25.2</b>	<b>21.3</b>
<b>2000 - 2010</b>	<b>22.7</b>	<b>16.2</b>
<b>2010 - 2020</b>	<b>17.5</b>	<b>13.1</b>
<b>2020 - 2030</b>	<b>15.2</b>	<b>12.9</b>



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# ***"Older" Population***

- 2000 Median age = 38.4 (NC=35.3)

<b>Percent of Total Population (2000)</b>		
<b>Age Group</b>	<b>Davie</b>	<b>NC</b>
<b>0-4 Years</b>	<b>6.5</b>	<b>6.7</b>
<b>5-19</b>	<b>19.9</b>	<b>21.5</b>
<b>20-24</b>	<b>5.1</b>	<b>7.2</b>
<b>25-34</b>	<b>13.2</b>	<b>15.1</b>
<b>35-44</b>	<b>16.2</b>	<b>16.0</b>
<b>45-54</b>	<b>14.9</b>	<b>13.5</b>
<b>55-64</b>	<b>10.5</b>	<b>9.0</b>
<b>65 and over</b>	<b>13.8</b>	<b>12.0</b>



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# ***Minority Populations***

- 2000 Minority Population = 9.6%
  - African American = 6.8%
  - Hispanic Origin (any race) = 3.5%
  - Native American = 0.2%
  - Asian = 0.3 %
  - Other = 1.3%
- 2000 NC Minority total = 27.9%



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# ***Economy***

- 2004 Median Per Capita Personal Income
  - \$30,371
  - \$182 **below** NC average
- 2004 Median Household Income
  - \$44,581
  - \$3,718 **above** NC average



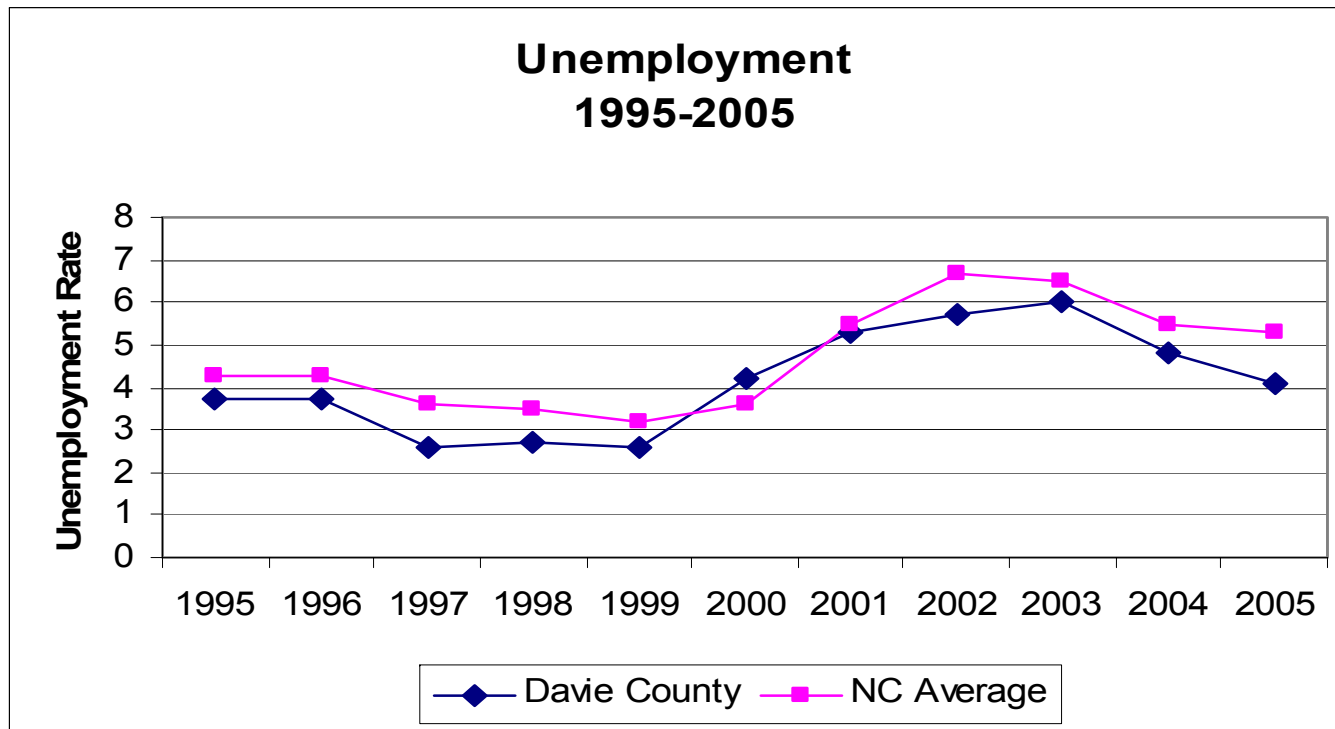
# ***Employment***

- Employment in the county has grown in the recent past
  - Davie Net Change 2002-2006 = **+8.1**
  - NC Net Change 2002-2006 = +7.2
- Local Employment (August 2006)
  - Manufacturing = 23.8%
  - Retail Trade = 12.8%
  - Health Care/Social Assistance = 8.6%



# Unemployment

- **Business Closings and Layoffs 2002-2007**
  - 4 closings affecting 394 people
  - 2 layoffs affecting 82 people



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# ***Poverty***

- 1980 Annual Poverty Rate
  - Davie Overall = **10.9** (NC = 14.5)
- 1990 Annual Poverty Rate
  - Davie Overall = **8.4** (NC = 13.0)
- 2000 Annual Poverty Rate
  - Davie Overall = **8.6** (NC=12.3)
- 2004 Annual Poverty Rate
  - Davie Overall = **9.3** (NC =13.6)



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# ***Poverty and Age***

- In Davie County in 2003:
  - **9.0%** of persons of all ages were in poverty (NC=13.4%)
  - **13.2%** of all persons under age 18 were in poverty (NC=19.1%)



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# ***Poverty and Race***

- As of the 2000 Census in Davie County:
  - **8.6%** of the **total** population was in poverty (NC=12.3%)
  - **7.6%** of the **white** population was in poverty (NC=8.5%)
  - **15.1%** of the **black** population was in poverty (NC=22.9%)



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# ***Children and Families***

In Davie County in 2000:

- 6.5% of population was < 18 years of age
- 2,231 family homes (21.7%) were headed by a single parent (NC = 32.3%)
- In Davie County between 1990 and 2000:
  - Percent households with a single parent head of household ▲ 51% (NC ▲ 21%)
  - Percent households with single male parent head of household ▲ 38% (NC ▲ 65%)



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# ***Child Care***

- Number of Davie County children in regulated child care ▲ 17% between 2001 and 2005 (NC ▲ 23%)
- Percentage of Davie County children in regulated child care receiving a subsidy ▲ 36% during the same interval (NC ▼ 14%).
- In 2005, there were no Davie County children eligible for and requesting a child care subsidy who did not receive one.



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# ***Education***

- Compared to the average NC county, Davie County has:
  - The same percentage of high school graduates (78.1%) (2000)
  - **22%** fewer college graduates (2000)
  - **23%** lower HS drop-out rate (SY2005)
  - **0.7%** lower average SAT score (2005)
  - **higher** proficiency among 3<sup>rd</sup> and 8<sup>th</sup> graders on EOG math and reading tests (SY2005)



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# ***Crime and Safety***

- Compared to the average NC county, Davie County had **lower** rates for **index** (-44%) **violent** (-54%) and **property** (-43%) crime in 2005.
- The most common **property crime** in Davie County in 2005 was *larceny* (theft of property without the use of force)
- The most common **violent crime** in 2005 was *aggravated assault* (purposeful use of force, often involving a weapon, to inflict bodily harm)



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# ***Crime and Safety***

- Of 11,910 **registered sex offenders** in NC in 2007, 40 live in Davie County.
- **No clandestine drug lab** busts have taken place in the county since 2002.
- As of 2004 there were **no reports of gangs** in the county
- There was **1 domestic violence-related homicide** reported between 2003 and 2006
- In 2006, **96 ex parte orders** and **37 restraining orders** were issued in connection with domestic violence complaints (▼ from 96/43 in 2005)



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# *Juvenile Crime*

- Between 2005 and 2006 the *number* of complaints of **undisciplined** youth (ages 6-17) in Davie County ▲ 33%, but the *rate* ▼ 15%.

**Undisciplined** refers to disobedience beyond disciplinary control of parent/guardian (e.g., truancy, vagrancy, running away from home for more than 24 hours).

- Over the same period the *number* of complaints of **delinquent** youth in the county ▼ 34%, but the *rate* ▲ 11%.

**Delinquency** refers to acts committed by youths that would be crimes if committed by an adult.



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# ***Abuse and Neglect***

- Child Abuse and Neglect:**

## **Davie County Complaints Substantiated**

	<b>FY 2002</b>	<b>FY 2003</b>	<b>FY 2004</b>	<b>FY 2005</b>	<b>FY 2006</b>
<b>Number</b>	75	52	101	99	109
<b>Rate per 1,000</b>	16% (2001)				9%



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# *Health Care Practitioners*

- Ratios of persons to provider are *higher* in Davie County than NC average (2005):
  - **2,595 persons: 1 primary care MD** (NC = 1,056:1)
  - **1,920 persons: 1 physician extender** (NC = 749:1)
  - **348 persons: 1 registered nurse** (NC = 109)
  - **3,244 persons: 1 dentist** (NC = 2,302:1)



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# ***Health Insurance***

- Davie County population without health insurance (2004):
  - Overall **18.0%** (NC = 17.5%)
  - Under 18 = 11.6%
  - 18-64 = 20.4%
- Overall percent uninsured in Davie County ▲ 13% between 2002 and 2003 and ▼ 3% between 2003 and 2004



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# ***Health Statistics***



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# ***Maternal and Child Health***

- **Pregnancy and Birth Rates per 1,000 females (2003-2005)**

- Davie Overall (ages 15-44) Pregnancy Rate = **65.6** (NC = 81.5)
- Davie Overall Birth Rate = **58.3** (NC = 65.8)
- Davie Teen (ages 15-19) Pregnancy Rate = **49.9** (NC = 61.7)
  - Overall Teen Pregnancy Rate (2005) = **56.8** (NC = 61.7)
  - Minority Teen Pregnancy Rate (2005) = **101.1** (NC = 82.3)
- Davie Teen Birth Rate = **38.0** (NC = 46.6)



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# ***Pregnancy Risk Factors***

- **High Parity Births (2001-2005)**
  - Davie mothers <30 = **16.9%** (NC = 18.3%)
  - Davie mothers ≥30 = **19.2%** (NC = 18.7%)
- **Short Interval Births (2001-2005)**
  - Davie mothers = **12.3%** (NC = 12.2%)
- **Late/No Prenatal Care (2003-2005)**
  - Davie Overall = **8.9%** (NC = 15.9%)
  - Davie Teens = **21.8%** (NC = 28.9%)
- **Smoking During Pregnancy (2003-2005)**
  - Davie Overall = **16.6%** (NC = 12.4%)
  - Davie Teens = **27.4%** (NC = 16.4%)



# ***Birth Outcomes***

**2001-2005**

- **Low Birth Weight** (<5.5 pounds)
  - Davie Whites = **8.5%** (NC = 7.4%)
  - Davie Minorities = **15.4%** (NC = 13.4%)
- **Very Low Birth Weight** (<3.3 pounds)
  - Davie Total = **1.8%** (NC = 1.9%)
  - Davie Minorities = **4.4%** (NC = 3.6%)
- **Infant Mortality** (per 1,000 live births)
  - Davie Whites = **9.8** (NC = 6.1)
  - Davie Minorities = **15.4** (NC = 14.7)



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# Leading Causes of Death

Age-Adjusted Rates (2001-2005)	No. of Deaths	Davie Co. Mortality Rate	Rate Difference from NC
1. Heart disease	430	210.9	-7%
2. Cancer (all kinds)	360	173.6	-12%
3. Stroke	111	54.6	-16%
4. Chronic lower respiratory disease	96	46.9	---
5. Alzheimer's disease	86	43.1	+59%
6. Unintentional non-motor vehicle injury	48	24.8	-5%
7. Diabetes	50	24.5	-11%
8. Pneumonia and influenza	48	24.1	+3%
9. Unintentional motor vehicle injury	40	22.7	+18%
10. Kidney disease	31	15.3	-15%
11. Suicide	25	13.2	+14%
12. Septicemia	25	12.4	-14%
13. Chronic liver disease and cirrhosis	14	6.7	-24%
14. Homicide	4	2.1	-71%
15. HIV/AIDS	3	1.7	-67%



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# Gender Disparities in Mortality

Leading Causes of Death Age-Adjusted Rates, 2001-2005	No.	Davie Rate for Males	Rate Diff. from Females
1. Lung cancer	66	71.1	+2.2X
2. Unintentional motor vehicle injury	26	29.8	+91%
3. Colon cancer	19	22.9	+79%
4. Heart disease	230	281.1	+76%
5. Total cancer	200	228.5	+67%
6. Septicemia	13	15.9	+66%
7. Unintentional non-motor vehicle injury	27	31.2	+63%
8. Stroke	52	65.9	+38%
9. Diabetes	24	29.1	+37%
10. Chronic lower respiratory disease	40	49.9	+9%
11. Pneumonia and influenza	16	24.9	+4%
12. Kidney disease	11	13.5	-14%
13. Alzheimer's disease	24	37.4	-22%



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# ***Racial Disparities in Mortality***

- Because the minority population in Davie County is small, annual minority mortality figures for certain conditions are too low for comparison.
- For all causes of death, the 2001-2005 age-adjusted mortality rate for minorities was **13% higher** than the comparable rate for whites.
- In addition, mortality rates were **higher among minorities** than among whites for:
  - Stroke (by 91%)
  - Heart disease (by 32%)
  - Total cancer (by 16%)



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# Mortality Trends 1979-2005

Leading Causes of Death in Davie County	Overall Trend Direction
1. Heart disease	▼
2. Cancer (all kinds)	▲
3. Stroke	▼
4. Chronic lower respiratory disease	▲
5. Alzheimer's disease	n/a
6. Unintentional non-motor vehicle injury	▲
7. Diabetes	▲
8. Pneumonia and influenza	---
9. Unintentional motor vehicle injury	▲
10. Kidney disease	▲
11. Suicide	▼
12. Septicemia	▲▲
13. Chronic liver disease and cirrhosis	▼
14. Homicide	▼▼
15. HIV/AIDS	▲



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# ***Sexually Transmitted Disease***

- **In 2001-2005 Davie County incidence rates were *lower* than NC rates for:**
  - Gonorrhea
  - Syphilis
  - Chlamydia
  - HIV/AIDS



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# ***Mental Health***

- Persons served in **alcohol/drug treatment centers** (total in FY2006 and change since FY2005):
  - Davie = 6 (no change)
  - NC county avg. = 40 (▲8%)
- Persons in **state psychiatric hospitals**:
  - Davie = 26 (▼ 32%)
  - NC county avg. = 183 (no change)
- Persons **served by MH/DD/SAS area program**:
  - Davie = 1,265 (▼ 19%)
  - NC avg. = 3,324 (▼ 4%)



# ***Obesity in Adults***

- According to *calculation* based on the 2006 Davie County Region (Davie, Rockingham, Stokes, Surry and Yadkin) Behavioral Risk Factor Surveillance System (BRFSS) survey:
  - **32%** of adults were obese (NC = 27%)
  - **34%** of adults were overweight (NC = 36%)
- Nationally, 65% of adults are overweight or obese



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# ***Obesity in Children***

- According to 2006 NC Nutrition and Physical Activity Surveillance System (NC-NPASS) data, the proportion of ***overweight*** children in Davie County:
  - 2-4 year olds = **13.5%** (NC = 15.2%)
  - 5-11 year olds = **26.7%** (NC = 25.2%)
  - 12-18 year olds = **32.6%** (NC = 29.5%)
- Proportion of children in Davie County ***at risk of being overweight***:
  - 2-4 year olds = **15.6%** (NC = 15.7%)
  - 5-11 year olds = **16.4%** (NC = 16.8%)
  - 12-18 year olds = **15.2%** (NC = 17.3%)



# ***Community Health Survey***



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# ***Survey Participants***

***210 Respondents***

- **Over-represented groups**
  - Females
  - Persons  $\geq$  65 years of age
  - Retirees
  - Persons with income  $\geq$  \$75,000
  - College graduates
- **Under-represented groups**
  - Males
  - Persons lacking health insurance



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# ***Survey Participants***

***210 Respondents***

- **Demographics of survey respondents**

- 73% worked or attended school elsewhere
- 18% < age 40; 35% ≥ age 65
- 67% female
- 6% Black, 4% Hispanic, 1% Native American
- 10% did not graduate from high school
- 31% had a college or graduate degree
- 40% worked full- or part-time
- 6% were unemployed
- 10% were homemakers
- 40% were retired



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# ***Survey Participants***

***210 Respondents***

- **Socio-economic characteristics**

- **Income**

- 19% had household income < \$20,000
    - 41% had household income between \$20,000 and \$50,000
    - 40% had household income \$50,000 or greater

- **Family**

- 21% supported only themselves on their income
    - 51% supported 2 people
    - 21% supported 3-4 people
    - 7% supported  $\geq$  5 people
    - 14% were primary caregiver for a senior adult, grandchild, disabled person or foster child



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# ***Survey Participants***

## ***210 Respondents***

- **Health care coverage**

- 32% had insurance paid by their employer
- 27% had insurance paid by spouse's employer
- 21% had insurance paid by self
- 10% had Medicaid
- 32% had Medicare
- 5% had VA benefits
  
- 19% lacked health insurance coverage at some point during the past 12 months



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# ***Social Service Access***

- **Problems accessing social services**
  - When asked about their problems in accessing an array of social services, 89-99% of survey respondents reported they did not need the referenced services.
  - Another 2-10% reported accessing the services they needed with no problems.
  - Only 1-4% of the respondents reported having difficulty accessing the referenced services when they needed them.



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# ***Health Service Access***

- **Where respondents go when they are sick or need health advice**
  - 88% to a doctor's office
  - 3% to hospital emergency department
  - 3% to health department
  - 2% to Urgent Care Center
  - 1% to Storehouse for Jesus
  - 2% to "Other"



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# ***Health Service Access***

- **Where respondents get most of their health-related information:**
  - 57% from doctor, nurse or pharmacist
  - 14% from friends or family
  - 13% from the Internet
  - 7% from newspapers, magazines or TV
  - 1% from church
  - 1% from school
  - <1% from help lines
  - <1% from the hospital
  - 6% from “Other” (library, work, insurer)



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# ***Medical Service Access***

- **Problems accessing health services**
  - When asked about their problems in accessing an array of social services, 79-98% of survey respondents reported they did not need the referenced services.
  - Another 2-20% reported accessing the services they needed with no problems.
  - Only 1-2% of the respondents reported having difficulty accessing the referenced services when they needed them.



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# ***Medical Care Access***

- **Problem accessing medical care**
  - **96% had *not* had a problem recently**
  - **4% *did* have a problem (n=8)**
    - Lack of health insurance: 75% (n=6)
    - Personal share of cost too high: 13% (n=1)
    - Provider would not take insurance or Medicaid: 13% (n=1)



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# ***Medical Care Access***

- **Last routine medical checkup**
  - Within the past year: 75%
  - 1-2 years ago: 13%
  - 3-5 years ago: 4%
  - Five or more years ago: 5%
  - Have never had a checkup: 2%



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# ***Dental Care Access***

- **Problem accessing dental care**
  - **92% had *not* had a problem recently**
  - **7% *did* have a problem (n=15)**
    - Lack of health insurance: 53% (n=8)
    - Personal share of cost too high: 47% (n=7)
    - Insurance didn't cover needed service: 13% (n=2)
    - Didn't know where to go: 6% (n=1)



# ***Dental Care Access***

- **Last routine dental checkup**
  - Within the past year: 63%
  - 1-2 years ago: 15%
  - 3-5 years ago: 7%
  - Five or more years ago: 13%
  - Have never had a checkup: 2%



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# ***Prescription Drug Access***

- **Problem getting R<sub>x</sub> filled**
  - **96% had *not* had a problem recently**
  - **4% did have a problem (n=9)**
    - Did not have insurance: 44% (n=4)
    - Personal share of cost was too high: 33% (n=3)
    - Insurance didn't cover needed Rx: 33% (n=1)
    - Pharmacy would not take insurance or Medicaid: 11% (n=1)



# ***Personal Health Behaviors***

- **Self-Rated Personal Health**

- Very healthy: 18%
- Healthy: 45%
- Somewhat healthy: 28%
- Unhealthy: 8%
- Very unhealthy : 2%



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# ***Personal Health Behaviors***

- **Exercise**

- Did exercise in past 4 weeks: 69%
- Did not exercise in past 4 weeks: 31%
  - Physically disabled: 22%
  - Not enough time to exercise: 19%
  - Exercise not personally important: 11%
  - Physical or hard labor job substitutes for exercise: 8%
  - Too tired to exercise: 5%
  - Don't like to exercise: 5%
- Exercise frequency in past 4 weeks
  - 7 or fewer times: 17%
  - 8-21 times: 30%
  - More than 21 times: 20%



# ***Personal Health Behaviors***

- **Nutrition – Servings per week**

- **Vegetables**

- None: 1%
    - 1-7: 54%
    - 8-14: 32%
    - 15 or more: 13%

- **Fruit**

- None: 3%
    - 1-7: 74%
    - 8-14: 19%
    - 15 or more: 5%



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# ***Personal Health Behaviors***

- **Alcohol consumption (in past 30 days)**
  - None: 70%
  - Potential binge drinkers: 1%
- **Tobacco use**
  - Never smoked: 49%
  - Used to smoke but have quit: 25%
  - Smoke occasionally: 2%
  - Smoke 1 pack or less/day: 19%
  - Smoke more than 1 pack/day: 5%



# ***Personal Health Behaviors***

- **Exposure to second-hand smoke**
  - **Exposed: 70%**
    - In restaurants: 34%
    - At home: 25%
    - At work: 10%
    - Other: 5%
  - **Support tobacco-free environments**
    - Yes: 71%
    - No: 26%
    - Don't know: 3%



# ***Personal Health Behaviors***

- **Prostate Exams (Age > 40)**
  - Get an annual prostate exam: 54%
- **Mammograms (Age > 40)**
  - Get an annual mammogram: 73%
- **Pap Tests (Age > 21)**
  - Get a Pap test at least every other year: 72%
- **Colon Cancer Screenings (Age > 50)**
  - Ever had a colon cancer screening: 66%



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# ***Personal Health***

- **Personal Health Diagnoses**

Asthma: 9%

Depression: 20%

Diabetes: 11%

High blood pressure: 40%

High cholesterol: 42%

Obesity/overweight: 22%

Osteoporosis: 14%



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# ***Quality of Life in Davie County***

- **A good health care system**
  - Agree or strongly agree: 68%
- **A good place to raise children**
  - Agree or strongly agree: 88.5%
- **A good place to grow old**
  - Agree or strongly agree: 88.1%
- **Plenty of economic opportunity**
  - Disagree or strongly disagree: 45.4%



# ***Quality of Life in Davie County***

- **A safe place to live**
  - Agree or strongly agree: 91%
- **Plenty of support for people in times of stress or need**
  - Agree or strongly agree: 74.6%
  - Don't know: 17%



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# ***"Most Important" Health Problems***

<b>1. Cancer (63%)</b>	<b>12. STDs</b>
<b>2. Heart disease (55%)</b>	<b>13. Dental health</b>
<b>3. Aging (51%)</b>	<b>14. Communicable disease</b>
<b>4. Diabetes (47%)</b>	<b>15. Kidney disease</b>
<b>5. Obesity/overweight (43%)</b>	<b>16. Autism</b>
<b>6. Stroke (27%)</b>	<b>17. Gun-related injuries</b>
<b>7. Mental health (23%)</b>	<b>18. Birth defects</b>
<b>8. Teen pregnancy</b>	<b>19. Motor vehicle accidents</b>
<b>9. Lung disease</b>	<b>20. Other</b>
<b>10. Asthma</b>	<b>Neurological disorders</b>
<b>11. HIV/AIDS</b>	<b>Infant mortality</b>



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# ***"Most Important" Unhealthy Behaviors***

<b>1. Drug abuse (68%)</b>	<b>9. Having unsafe sex</b>
<b>2. Alcohol abuse (67%)</b>	<b>10. Suicide</b>
<b>3. Poor eating habits (39%)</b>	<b>11. Violent behavior</b>
<b>4. Smoking/tobacco use (39%)</b>	<b>12. Not using seatbelts</b>
<b>5. Reckless/drunk driving (37%)</b>	<b>13. Not getting preventive DDS care</b>
<b>6. Lack of exercise (36%)</b>	<b>14. Not using child safety seats</b>
<b>7. Domestic violence (34%)</b>	<b>15. Rape</b>
<b>8. Not getting preventive MD care</b>	<b>16. Not getting immunizations</b>



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# Comparing Data and Opinion

Health Problems (via Mortality Data)	Health Problems (via Community Survey Opinion)
1. Heart disease	1. Cancer
2. Cancer	2. Heart disease
3. Stroke	3. Aging
4. Chronic lower respiratory disease	4. Diabetes
5. Alzheimer's	5. Obesity/overweight
6. Unintentional non-motor vehicle injury	6. Stroke
7. Diabetes	7. Mental health
8. Pneumonia and influenza	8. Teen pregnancy
9. Unintentional motor vehicle injury	9. Lung disease
10. Kidney disease	10. Asthma
11. Suicide	11. HIV/AIDS
12. Septicemia	12. STDs



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# ***Linking Behavior to Health***

<b>Health Problems (via Community Survey Opinion)</b>	<b>Unhealthy Behavior (via Community Survey Opinion)</b>
<b>1. Cancer</b>	<b>1. Drug abuse</b>
<b>2. Heart disease</b>	<b>2. Alcohol abuse</b>
<b>3. Aging</b>	<b>3. Poor eating habits</b>
<b>4. Diabetes</b>	<b>4. Smoking/tobacco use</b>
<b>5. Obesity/overweight</b>	<b>5. Reckless/drunk driving</b>
<b>6. Stroke</b>	<b>6. Lack of exercise</b>
<b>7. Mental health</b>	<b>7. Domestic violence</b>
<b>8. Teen pregnancy</b>	<b>8. Not getting preventive MD care</b>
<b>9. Lung disease</b>	<b>9. Having unsafe sex</b>
<b>10. Asthma</b>	<b>10. Suicide</b>
<b>11. HIV/AIDS</b>	<b>11. Violent behavior</b>
<b>12. STDs</b>	<b>12. Not using seatbelts</b>



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# ***"Most Important Community Issues"***

<b>1. Lack of/inadequate health insurance (41%)</b>	<b>13. Transportation options</b>
<b>2. Dropping out of school</b>	<b>14. Inadequate/unaffordable housing</b>
<b>3. Affordability of health services</b>	<b>15. Homelessness</b>
<b>4. Positive teen activities</b>	<b>16. Healthy family activities</b>
<b>5. Domestic violence</b>	<b>17. Lack of healthcare providers</b>
<b>6. Unemployment</b>	<b>18. Violent crime</b>
<b>7. Neglect and abuse in general</b>	<b>19. Lack of culturally appropriate services</b>
<b>8. Animal control</b>	<b>20. Racism</b>
<b>9. Availability of child care</b>	<b>21. Unsafe, un-maintained roads</b>
<b>10. Pollution (air, water, land)</b>	<b>22. Availability of healthy food choices</b>
<b>11. Lack of recreational facilities</b>	<b>23. Rape/sexual assault</b>
<b>12. Low income/poverty</b>	<b>24. Bioterrorism</b>



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# ***Stakeholder Interviews***



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# *Quality of Life*

- **Good healthcare system in Davie County**
  - Most agreed (citing the Hospital, health department, EMS and the Storehouse for Jesus)
  - Concerns: lack of specialty care at the hospital; others about quality of care at the hospital
- **Good place to raise children**
  - All agreed (citing good schools, tight-knit community, relatively safe environment, lack of gangs, low drug use)
  - Concerns: high school overcrowding and few recreational options for pre-teens and teens



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# *Quality of Life*

- **Good place to grow old**

- Vast majority agreed (citing new Senior Services Center, rural environment, close-knit community, proximity to full-service metropolitan area.)
- Concerns: lack of public transportation, lack of affordable housing for seniors and elder abuse

- **Plenty of ways to earn a living**

- Split opinions (“Anyone willing to work should find some way to earn a living.”)
- Concerns: Too many low skill, low paying without benefits; residents leaving county to find work; business disruptions and outsourcing.



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# *Quality of Life*

- **Safe place to live**

- All agreed (citing effective Sheriff's department, low crime rate, law enforcement dealing with influx of guns & drugs).
- Concerns: recent murder-suicides, pockets of crime

- **Support in times of need**

- Most agreed (citing church and general community outreach, especially Storehouse for Jesus, the United Way and government agencies).
- Concerns: based on personal experience, or experiences of clients.



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# *Quality of Life*

- **Clean air and water**

- Most agreed (but answer tended to depend on where the respondent lived)
- Air: Local air superior to neighboring counties; pollutants come from elsewhere, especially Charlotte
- Water: Water okay in Mocksville but not elsewhere in the county, especially well water; well contamination and presence of kidney stones; good practices to prevent soil erosion and runoff pollution



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# ***Community Strengths***

- **The people**

- Particularly strong community and inter-agency collaboration
- Able to accomplish a lot together with limited resources
- Giving, civic-minded nature of residents

- **Government leadership**

- Proactive leaders doing what is best, not necessarily what is popular
- Leaders with good relationships with General Assembly
- Inter-municipal cooperation within the county



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# ***Community Strengths***

- **Education**

- Quality education for children despite need for more space

- **Other strengths**

- Small size
- Proximity to urban areas
- Low taxes
- Rural community values
- Safety
- Economic development



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# ***Community Challenges***

- **School overcrowding**

- Failure of school bond (seen as too political)
- Perceived territoriality of solutions
- Disproportionate growth in parts of county

- **Growth**

- Managing and planning for growth and the infrastructure to support new development
- Growing demand on community services (e.g., highways, water, sewer).
- Over-reaching developers (e.g., empty shopping areas).
- Balancing growth and quality of life



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# ***Community Challenges***

- **Tax base**

- Increased taxes likely inevitable with growth
- People want services but are unwilling to pay for them
- Recruitment of business to improve the tax base difficult because of lack of incentives compared to neighboring counties

- **Other challenges**

- Housing for seniors
- Geographic economic disparity in county
- Recreation for teens
- Emergency services



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# ***Unmet Community Needs***

- **Mental health services**
  - Too few services
  - Too difficult to get an appointment
  - Lack of treatment for substance-abusing children
  - People going out of county for services
- **School overcrowding**
  - Inability to fund a new high school
- **Child daycare**
  - Inadequate high-quality child daycare facilities
  - Lack of childcare for parents working second shift



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# ***Unmet Community Needs***

- **Social opportunities for youth**
  - Too few (e.g., no theaters and only fast-food options for eating out).
  - Skateboard facility desired
- **Hospital**
  - More modern hospital in a better location
  - More specialty services (esp. OB/GYN)
- **Adult (senior) care**
  - More adult daycare facility
  - More nursing home beds



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# ***Unmet Community Needs***

- **Transportation**

- Too little public transportation
- Existing public transportation expensive and inconvenient

- **Water/sewer infrastructure**

- More capacity needed to accommodate growth, particularly in the eastern part of the county

- **Other needs**

- Homeless shelter
- Services for special needs children
- Rehabilitation for ex-convicts
- County park



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# ***Health Problems and Concerns***

- **Obesity**

- Prevalent, but not unique to Davie County
- Obesity in children of particular concern
- Lack of exercise
- Poor diets; lack of healthy food choices in restaurants
- Health not a priority subject in schools
- Lack of parental modeling of good choices
- **HOWEVER:**
  - More opportunities for healthy choices than in the past
  - School lunch menus have changed for the better
  - Local incentives for adults to exercise



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# ***Health Problems and Concerns***

- **Mental health/substance abuse**
  - Too few providers, especially for substance abuse counseling
  - Perceived growing suicide rate
  - Perceived high rates of alcoholism
  - Perceived high numbers of “habitual” smokers
  - Perceived high rates of depression
  - Frustration over closing of state mental health facilities (e.g., Dorothea Dix Hospital)
  - Frustration over how to solve troubles in mental health system



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# ***Health Problems and Concerns***

- **Davie County Hospital**

- Outdated; unable to provide modern services
- People leave county for needed services
- Some dissatisfaction with adequacy and professionalism of hospital services
- Community not supportive of hospital
- Hospital lacks necessary specialists
- Local economics and small size keep hospital from being profitable and improving
- Existence of hospital a point of “local pride”; solutions to problems politically difficult



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# ***Health Problems and Concerns***

- **Cardiovascular disease and stroke**
  - Seen as the end result of the obesity problem
  - Churches seen as the best venue for heart disease and stroke education and programming
- **Affordability of healthcare**
  - Seen as a local reflection of a national problem
  - Hospital serves too few insured (leaving county) to make up the shortfall due to indigent care
  - Local employers offer inadequate health benefits
  - Pervading pessimism regarding ability of county to address the problem due to its tax cost



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# ***Health Problems and Concerns***

- **Other**

- Diabetes
- Alcoholism (and DWI)
- Autism
- Asthma
- Health services for seniors
- Post-emergency treatment
- Better knowledge of prescription drug benefit
- Alzheimer's disease
- Dental care services for Medicaid recipients



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# ***Focus Groups***

**Every attempt was made to reach out to under represented groups. Three specific communities were targeted:**

- 1.Churches – Attendance 1**
- 2.Cooleemee – Attendance 1**
- 3.Hispanic – Attendance 7**



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# Hispanic Focus Group

<b>Health Problems (via Community Survey Opinion)</b>	<b>Unhealthy Behaviors (via Community Survey Opinion)</b>
<b>1. Teenage Pregnancy</b>	<b>1. Alcohol &amp; Drug Abuse</b>
<b>2. Diabetes</b>	<b>2. Having Unsafe Sex Reckless/Drunk Driving</b>
<b>3. Obesity/Overweight</b>	<b>3. Rape Not Getting Immunizations</b>
<b>4. Asthma/Heart Disease/HIV-AIDS Infectious-Contagious Diseases</b>	<b>4. Domestic Violence Not using Child Safety Seats</b>
<b>5. Mental Health &amp; Motor Vehicle Accidents</b>	<b>5. Not Going to Doctor or Dentist Not Using Seat Belts Poor Eating Habits Suicide</b>

**Community Issues:**

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li><b>1. Racism</b></li> <li><b>2. Domestic Violence</b></li> <li><b>3. Pollution &amp; Violent Crime</b></li> </ul> | <ul style="list-style-type: none"> <li><b>4. Low Income-Poverty/Dropping Out of School/Child Abuse</b></li> <li><b>5. Unemployment &amp; Lack of recreational facilities</b></li> <li><b>6. Transportation Options</b></li> </ul> |
|--|---|



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# ***Overall Concerns:***

- **Child Care is very expensive – this causes problems with work attendance and participation in any type of classes that could be helpful such as parenting classes or ESL.**
- **More Health Information and promotion is needed in Spanish because information is being lost in translation.**
- **Domestic Violence Shelters do not provide additional assistance needed with education, finding a job, and other necessities. This causes many Hispanic women to go back to the unhealthy living arrangement because they cannot make it on their own.**
- **Motivation for Hispanics to better their situation is problematic because they incur many barriers such as language and cost of child care.**
- **Catawba College has a GED program in Spanish but it is expensive. This type of program in Davie would be beneficial for Hispanic residents.**
- **Driving and Safety workshops are provided in Spanish in other states by the police department. This would also be beneficial so that the Hispanic culture can begin to see police as their friend, not enemy.**



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