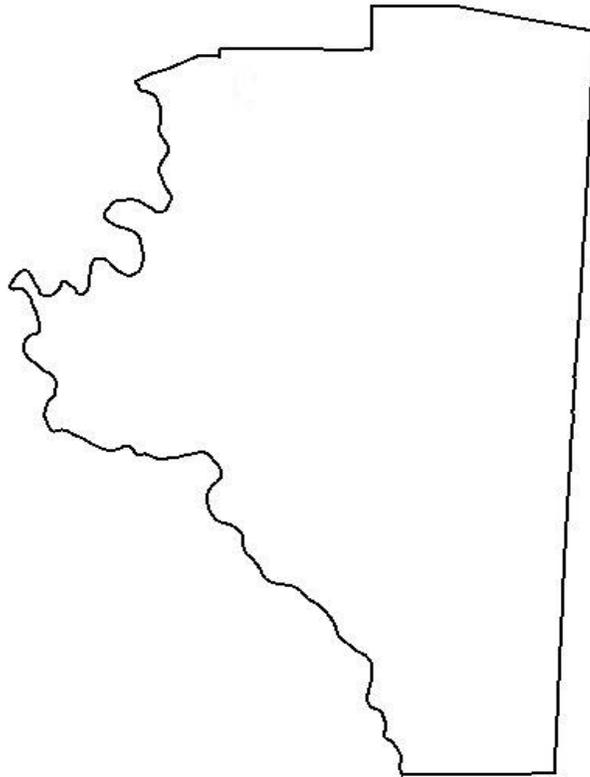


# Davidson County



## 2009 Community Health Assessment

**The Davidson County Health Department wishes to thank the following agencies and staff for their assistance with this document:**

Staff from other health departments in the Northwest Region for assisting with the Community Input surveys.

Davidson County Health Department staff and partners for their assistance with distributing and collecting the Community Input surveys.

Davidson Health Alliance Steering Committee for their assistance with the Stakeholder surveys and the prioritization process.

Candice DuVernois, Northwest Partnership Director, for assisting with research and data collection.

**The Davidson County Health Department wishes to thank the following agencies and staff members for participating in the Stakeholder surveys and/or prioritization process:**

Becky Daley – Lexington Memorial Hospital

Ben Ross – Davidson Vision

Don Truell – Davidson County Commissioner

Dr. Amy Suttle – Thomasville Pediatric Clinic

Dr. Debbie Rice – Family Services of Davidson County

Dr. Fred Mock – Davidson County Schools

Emy Calderone – Lexington City Schools

Keith Johnson – Davidson County Department of Social Services

Kim Frank - Davidson County Health Department

Layton Long - Davidson County Health Department

Linda Leonard – Smart Start of Davidson County

Mary Jane Akerman – Thomasville City Schools

Rick Kriesky – Lexington City Schools

Rose McDaniel - Davidson County Community College

Sandy Motley – Davidson Medical Ministries Clinic

Suzanne Storch – PBH

Thessia Everhart - Davidson County Senior Services

Mary Rittling - Davidson County Community College

David Grice - Davidson County Sheriff's Department  
Rick Tobin – Thomasville City Schools  
Doug Lowe – Davidson County Emergency Management  
Troy Coggins - Davidson County Cooperative Extension Services  
Bruce Davis – Lexington City Parks and Recreation  
Charles Parnell - Davidson County Parks and Recreation  
Billy Freeman – Thomasville City Parks and Recreation  
Scott Bannister – Boys and Girls Club  
Julie Meyer – Positive Wellness Alliance  
Tom Doyle – Thomasville Medical Center  
Tommy Hodges – Thomasville YMCA  
Phillip xxxx – Lexington YMCA  
Burr Sullivan – Lexington Chamber of Commerce  
Mark Davis - Davidson County Board of Health  
Cathy Riggan - Davidson County Board of Health  
Mark Hamrick - Davidson County Board of Health  
Rod Kcuik - Davidson County Board of Health  
Alice Gray - Davidson County Board of Health  
Peter Rogaski – Davidson County Board of Health  
Kim Smith - Davidson County Board of Health  
Lamar Moore - Davidson County Board of Health  
Corey Buggs - Davidson County Board of Health  
Keith Raulston - Davidson County Board of Health

## Section One: Introduction

Local public health agencies in North Carolina are required to conduct a comprehensive Community Health Assessment once every four years. The Community Health Assessment, which describes both a process and a document, is intended to describe the current health status of the community, what has changed since the past assessment, and what still needs to change to improve the health of the community. The process involves the collection and analysis of a large range of data, including demographic, socioeconomic and health statistics, and public and professional opinion. The document is a summary of all the available evidence and serves as a resource until the next assessment. Together they serve as the basis for prioritizing the community's health needs and culminate in planning to meet those needs. In communities where there is an active Healthy Carolinians partnership, the coalition of partners may coordinate the community assessment process with support from the local health department. Healthy Carolinians is "a network of public-private partnerships across North Carolina that shares the common goal of helping all North Carolinians to be healthy." The members of local coalitions are interested members of the public and representatives of the agencies and organizations that serve the health and human service needs of the local community, as well as businesses, churches, schools and civic groups.

In 2009, the Davidson County Health Department conducted a Community Health Assessment in collaboration with Davidson Health Alliance, the local Healthy Carolinians Partnership. This assessment is part of the Healthy Carolinians recertification process and is conducted under the guidance of the Office of Healthy Carolinians/Health Education and the State Center for Health Statistics of the North Carolina Department of Health and Human Services. This document presents the assessment process, results, and Davidson County's leading health priorities.

There are three components to the Community Health Assessment. The first involves a thorough review of health statistics and community health data. The second component is a Quality of Life Survey that was distributed to community residents throughout the county. The third component is a Stakeholder Survey that was completed by 32 key community leaders via SurveyMonkey.

The review of health statistics/community health data was completed via contract with the Northwest Partnership for Public Health. The purpose was to identify, collect and review demographic, socioeconomic, and health data for Davidson County. The primary source of health data was the North Carolina State Center for Health Statistics, including Health Statistics Pocket Guides, County Health Databooks, Behavioral Risk Factor Surveillance System, Vital Statistics, and the Cancer Registry. In total, approximately 35 web sites and links were reviewed.

The Davidson County Health Department Health Education Supervisor/Davidson Health Alliance Coordinator developed and distributed a Quality of Life Survey. The survey was designed to be comprehensive in scope, limited to essential questions, and easy to complete and return. It was sent to a variety of agencies and organizations and then sent out to their various constituents/clients/staff, etc. Over 780 surveys were returned to the health department for analysis. Survey participants were asked to provide demographic information about themselves, including age, gender, race and ethnicity, education level, and household income. This demographic information was collected in order to assess how well the survey participants represented the general population of Davidson County. All responses were kept in confidence and not linked directly to the respondents in any way.

Key community leaders were surveyed using SurveyMonkey.com, which enabled staff to compose and distribute surveys via email; respondents to complete surveys on their personal computers at a convenient time and submit their responses via email; and staff to use SurveyMonkey to tabulate the results online. The health department purchased a yearly membership to SurveyMonkey and sent the survey to approximately 45 community leaders. Interview subjects represented agencies in key sectors of the community such as local health and human services, businesses, government, education, and medical providers. Respondents were asked the same questions as the Quality of Life survey, as well as questions about the services provided by their agency, characteristics of the residents who utilize their services, barriers residents face in accessing services, and what services are needed but not available. 32 surveys were completed for a response rate of 71%.

The survey results were presented to a group of key community leaders, which ranked key health concerns to determine priorities. These priorities were compared to focus areas selected at a Davidson Health Alliance Strategic Planning event held early this year. The Davidson County Health Department will use this information when developing its annual Strategic Plan and Davidson Health Alliance will use this information to develop its Community Health Action Plan for recertification in 2012.

# Section Two: Picture of Davidson County

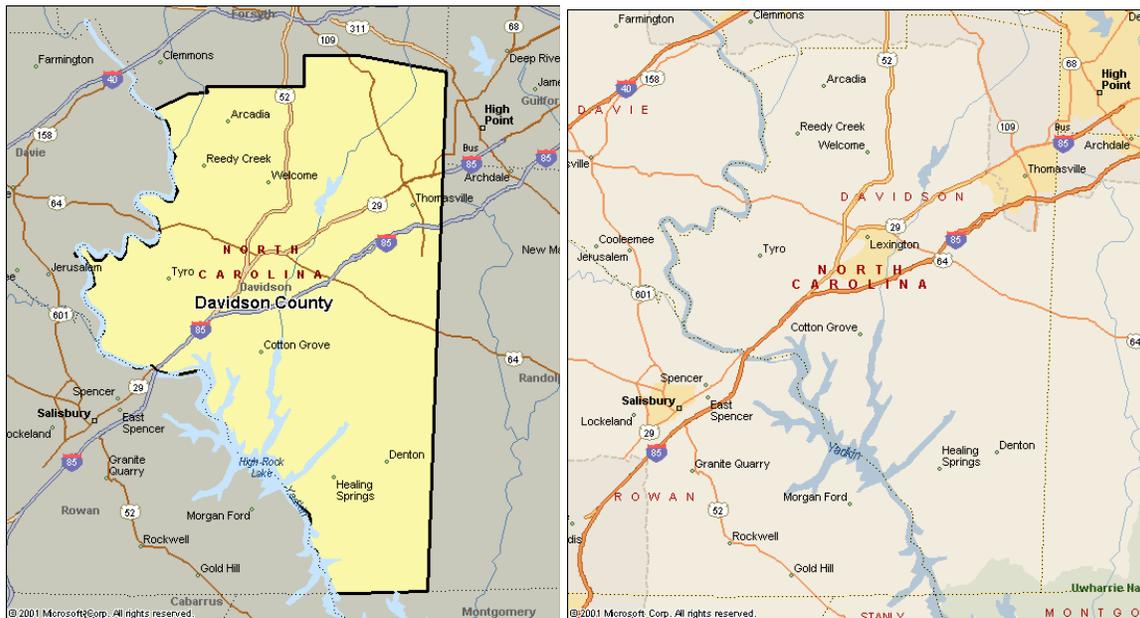
## Location and Geography

Davidson County is located just to the west of central North Carolina, in the Piedmont region of the state (Figure 1). Davidson County's western border is shared with Davie and Rowan Counties. To the north, the county is bordered by Forsyth County, to the east by Randolph County and a small portion of Guilford County, and to the south by Stanly County. There are 18 townships and municipalities in Davidson County. Thomasville is the most populated city in the county and Lexington is the county seat (1).

Davidson County is easily accessible by major highways. Interstate 85 is the main artery connecting the county to Greensboro and Raleigh in the east and to Charlotte in the south. US Highway 52/NC Route 8 runs north-south through the center of the county, connecting Davidson County to Winston-Salem in the north and surrounding counties in the south. The main east-west artery across the county is US Highway 64. The nearest airport offering commercial passenger service is Piedmont Triad International Airport, located 30 miles northeast in Greensboro. The county land area is 552 square miles with 205 miles of paved roads. Approximately 95% of Davidson County residents live within 10 miles of a four-lane highway (2).

With an elevation between 760 and 810 feet above sea level, Davidson County enjoys a moderate year-round climate with an average annual temperature of around 60 degrees. Average annual precipitation is around 45 inches (3).

**Figure 1. Davidson County Maps**



## Population Characteristics

According to the 2008 US Census, the population in Davidson County was 158,166, a 7.5% increase from the 2000 population of 147,246 (1). Table 1 shows estimates of the Davidson County population by age, race and sex (4). Of the minority population in Davidson County, 53% are Black or African American alone, 6% are Asian alone and 5% are two or more races. Approximately 34% (9,466) of the minority population describe themselves as Hispanic or Latino (14). Table 2 shows estimates of the population of the municipalities in Davidson County (1).

	Race		Sex		
	Total	White	Minority	Male	Female
<b>Total</b>	158,866	141,014	17,852	77,627	81,239
<b>0-4</b>	9,577	8,503	1,074	5,005	4,572
<b>5-9</b>	9,978	8,799	1,179	5,062	4,916
<b>10-14</b>	10,191	8,756	1,435	5,130	5,061
<b>15-19</b>	11,092	9,449	1,643	5,598	5,494
<b>20-24</b>	10,402	8,976	1,426	5,273	5,129
<b>25-29</b>	9,147	7,953	1,194	4,669	4,478
<b>30-34</b>	8,825	7,787	1,038	4,380	4,445
<b>35-39</b>	11,463	10,185	1,278	5,706	5,757
<b>40-44</b>	12,199	10,807	1,392	5,997	6,202
<b>45-49</b>	12,873	11,451	1,422	6,387	6,486
<b>50-54</b>	11,580	10,321	1,259	5,692	5,888
<b>55-59</b>	10,273	9,190	1,083	4,946	5,327
<b>60-64</b>	9,223	8,468	755	4,392	4,831
<b>65-69</b>	7,046	6,500	546	3,376	3,670
<b>70-74</b>	5,430	4,993	437	2,438	2,992
<b>75-79</b>	4,085	3,794	291	1,709	2,376
<b>80-84</b>	2,946	2,730	216	1,129	1,817
<b>85&amp;UP</b>	2,536	2,352	184	738	1,798

Geographic Area	Census 2000	Census 2008	Approximate Percent Growth
North Carolina	8,049,313	9,222,414	14.5%
Davidson County	147,246	158,166	7.4%
Denton	1450	1,486	2.5%
High Point*	85,839	101,835	N/A
Lexington	19,953	20,407	2.3%
Midway	11,602	-----	N/A
Thomasville	19,788	26,526	34%

\* High Point is divided between Guilford, Davidson, Forsyth and Randolph Counties.

## Economy

Manufacturing is the largest industry in Davidson County. Health care and social assistance, retail trade and educational services are second, third and fourth respectively (5). Table 3 shows Davidson County's top employers (6).

Rank	Company	Industry	Employment Range
1	Davidson County Board Of Education	Education & Health Services	1,000+
2	County Of Davidson	Public Administration	500-999
3	Atrium Companies Inc	Manufacturing	500-999
4	Wal-Mart Associates Inc	Trade, Transportation, & Utilities	500-999
5	Bradley Personnel Inc	Professional & Business Services	500-999
6	Davidson County Community College	Education & Health Services	500-999
7	Lexington Memorial Hospital	Education & Health Services	500-999
8	Lexington City Schools	Education & Health Services	500-999
9	Thomasville Medical Center	Education & Health Services	500-999
10	PPG Industries Inc	Manufacturing	500-999
11	Thomasville City Schools	Education & Health Services	250-499
12	Food Lion Llc	Trade, Transportation, & Utilities	250-499
13	Thomasville Furniture Ind Inc	Manufacturing	250-499
14	Jeld-Wen	Manufacturing	250-499
15	Leggett & Platt Incorporated	Manufacturing	250-499
16	City Of Lexington	Public Administration	250-499
17	Stanley Furniture Co Inc.	Manufacturing	250-499
18	Lowes Home Centers Inc	Trade, Transportation, & Utilities	250-499
19	Pgt Industries Inc	Manufacturing	250-499
20	RCR Administrative Services Company	Leisure & Hospitality	250-499
21	City Of Thomasville	Public Administration	250-499
22	Lexington State Bank	Financial Activities	250-499
23	Diebold Southeast Mfg Inc	Manufacturing	250-499

Unemployment rates in Davidson County have increased significantly over the last two years as shown in Table 4 (7).

	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009*
Davidson	3.3%	6.3%	6.6%	7.2%	6.5%	6.0%	5.8%	5.6%	7.3%	13.0%
N.C.	3.7%	5.6%	6.6%	6.5%	5.5%	5.3%	4.8%	4.7%	6.3%	10.9% <sup>†</sup>

\* January – June, 2009 average

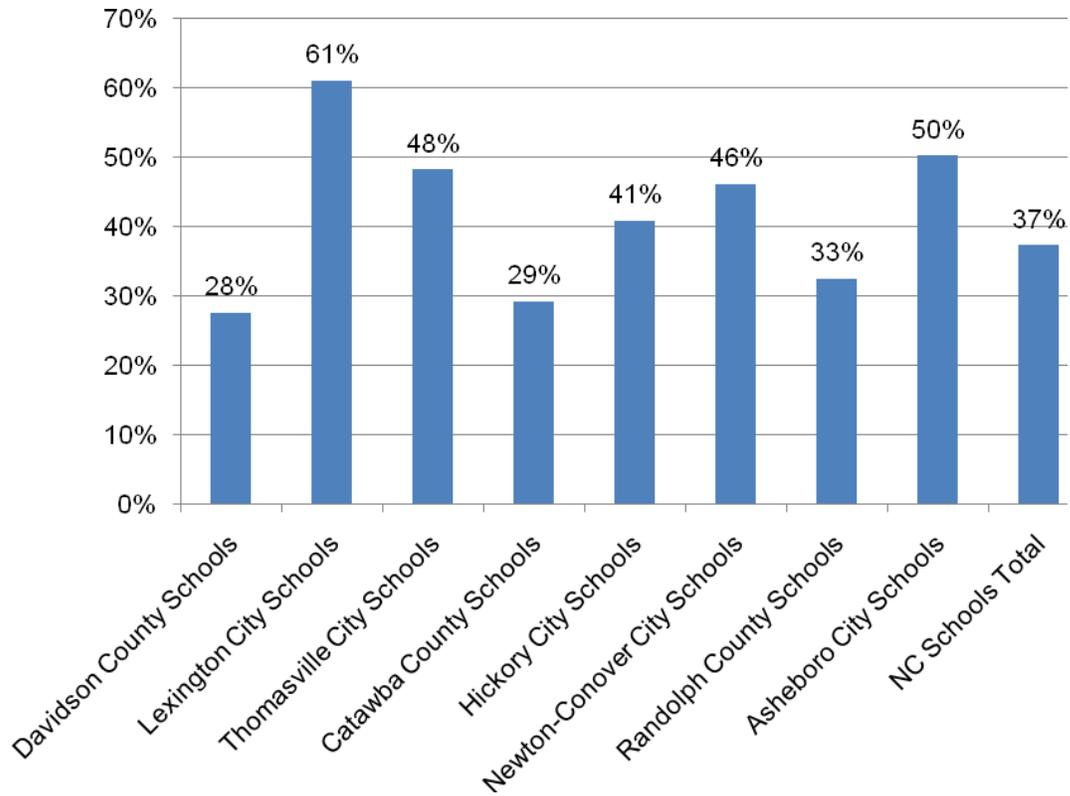
† January – June, 2009 not seasonally adjusted

Household income is shown in Table 5 with the average or mean income as \$52,674 (8). According to the US Census Bureau, about 15.1% of Davidson County residents were considered below poverty level in 2007 compared to 14.3% statewide (9).

<b>Table 5. Davidson County Household Income</b>	
<b>Subject</b>	<b>Households</b>
<b>Total</b>	<b>61,027</b>
Less than \$10,000	7.1%
\$10,000 to \$14,999	6.8%
\$15,000 to \$24,999	13.9%
\$25,000 to \$34,999	13.8%
\$35,000 to \$49,999	15.8%
\$50,000 to \$74,999	21.0%
\$75,000 to \$99,999	11.1%
\$100,000 to \$149,999	7.6%
\$150,000 to \$199,999	1.7%
\$200,000 or more	1.1%
Median income	\$42,666
Mean income	\$52,674

Figure 2 shows the percentage of free and reduced lunches with the comparison counties of Catawba and Randolph along with the State (13).

**Figure 2. Percentage of Free and Reduced Lunches**



## Education

There are three school systems in the county which include Davidson County Schools (18 elementary, 6 middle, 6 high, 1 alternative and 1 early college), Lexington City Schools (4 elementary, 1 middle and 1 high) and Thomasville City Schools (3 elementary, 1 middle and 1 high) for a total of 43 schools in the county. As indicated by Table 6, almost a quarter of Davidson County's population over 25 years of age had not finished high school according to the 2006 – 2008 estimates (10) which is similar to the information presented in the 2005 Community Health Assessment.

<b>Subject</b>	<b>Total</b>
<b>Population 18 to 24 years</b>	<b>11,499</b>
Less than high school graduate	17.3%
High school graduate (includes equivalency)	41.7%
Some college or associate's degree	36.5%
Bachelor's degree or higher	4.5%
<b>Population 25 years and over</b>	<b>107,810</b>
Less than 9th grade	7.5%
9th to 12th grade, no diploma	14.9%
High school graduate (includes equivalency)	35.6%
Some college, no degree	17.7%
Associate's degree	9.0%
Bachelor's degree	11.1%
Graduate or professional degree	4.1%
Percent high school graduate or higher	77.6%
Percent bachelor's degree or higher	15.2%

Furthermore, the high school dropout rates for the schools have steadily increased for Davidson County and Thomasville City Schools but have decreased for Lexington City Schools as evidenced by Table 7 (11).

<b>School</b>	<b>2003-04</b>		<b>2004-05</b>		<b>2005-06</b>		<b>2006-07</b>		<b>2007-08</b>	
	<b>#</b>	<b>Rate</b>								
Davidson County Schools	266	4.52	299	4.86	376	5.79	389	5.85	394	5.96
Lexington City Schools	60	7.05	55	6.49	47	5.63	47	5.52	49	5.59
Thomasville City Schools	27	3.92	29	4.01	29	3.76	57	6.98	52	6.62
<b>NORTH CAROLINA</b>	20,035	4.86	20,175	4.74	22,180	5.04	23,550	5.24	22,434	4.97

## Health Care Resources

Davidson County is served by Lexington Memorial Hospital, a 94-bed facility located in Lexington. The hospital's parent company also owns a variety of physicians' practices in the county. Thomasville Medical Center, an affiliate of Forsyth Medical Center, operates a 149-bed community hospital that provides a variety of diagnostic, treatment and support services.

Davidson Medical Ministries Clinic (DMMC), located in Lexington, provides primary health care and prescription drugs to qualified, medically indigent citizens of Davidson County. DMMC services include basic medical and dental care, a pharmacy and medication management counseling. A specialty clinic serves patients with diabetes and hypertension; another specialty clinic serves Spanish-speaking clients.

The Davidson County Health Department offers a wide array of services for infants, children, teenagers and adults. Well-child care is available for children and teenagers up to the age of 21. There are nine nursing homes in Davidson County. The number of nursing home beds has not changed appreciably in the past several years, despite the growing elderly population in the community.

According to 2006 data (12), the number of health professionals per 10,000 in Davidson County fell below state averages as well as below the averages for peer county of Catawba. Averages for Davidson were above or equal to the peer county of Randolph in Nurse Practitioners, Pharmacists, Physical Therapists, Physician Assistants, Podiatrists, Primary Care Physicians, Psychologists, Registered Nurses and Respiratory Therapists (Table 8).

<b>Table 8. Health Professionals per 10,000 population for Davidson and Comparison Counties</b>				
	<b>Davidson</b>	<b>Catawba</b>	<b>Randolph</b>	<b>State</b>
Certified Nurse Midwives	0.1	0.7	N/A	0.2
Chiropractors	0.8	1.4	0.9	1.4
Dental Hygienists	4.9	5.4	5.1	5.4
Dentists	1.7	4.4	2.5	4.4
Licensed Practical Nurses	10.7	18.5	12.4	19.8
Nurse Practitioners	<b>1.3</b>	4.3	1.1	3.0
Optometrists	0.8	0.9	0.9	1.1
Pharmacists	<b>4.5</b>	9.2	4.5	9.0
Physical Therapist Assistants	1.9	4.3	2.0	2.2
Physical Therapists	<b>2.2</b>	4.7	1.9	4.6
Physician Assistants	<b>1.2</b>	4.4	0.7	3.2
Physicians	8.0	23.5	8.6	20.8
Podiatrists	<b>0.1</b>	0.6	0.1	0.3
Primary Care Physicians	<b>4.8</b>	9.1	4.8	9.0
Psychological Associates	0.3	1.5	0.7	1.0
Psychologists	<b>0.2</b>	0.7	0.1	2.0
Registered Nurses	<b>45.8</b>	111.5	39.1	94.4
Respiratory Therapists	<b>1.6</b>	4.4	1.2	4.1

## Health Insurance

The rate for Davidson County's uninsured remains below that of the state as a whole. Just over 18% of the Davidson County population from ages 18 – 64 was without insurance according to 2005 data (Table 9). Approximately 11% of the population under the age of 18 was uninsured (12). When compared to the peer counties, the percentages of uninsured are very similar.

<b>Table 9. Estimate of Uninsured in Davidson and Comparison Counties (2005)</b>				
	<b>Davidson</b>	<b>Catawba</b>	<b>Randolph</b>	<b>State</b>
% Estimate of uninsured Age 0-17	11.3	11.2	12.5	12.4
% Estimate of uninsured Age 18-64	18.2	17.8	19.1	21.1
% Estimate of uninsured Age 0-64	16.3	16.0	17.2	18.6

## Section Three: Health Data

### Leading Causes of Death/Health Disparities

Of the 18 infant deaths (under 1 year of age) in Davidson County in 2007, the top 4 causes were Sudden Infant Death Syndrome (5 deaths), congenital malformations, deformations and chromosomal abnormalities (4 deaths), bacterial sepsis of newborn (3 deaths) and necrotizing enterocolitis of newborn (2 deaths). Twelve of the infants were classified as white and 6 were classified as African American (15).

Otherwise, for all populations in Davidson County, the leading causes of death for persons aged 1-99 years were very similar to those across the state as a whole. The main exception is that the ninth and tenth causes of death for Davidson County are reversed for the state (Table 10).

<b>Davidson Rank</b>	<b>Cause</b>	<b>Davidson Number</b>	<b>%</b>	<b>State Number</b>	<b>%</b>	<b>State Rank</b>
1	Diseases of heart	356	24.5	17,479	23.4	1
2	Cancer	340	23.4	17,424	23.3	2
3	Cerebrovascular diseases	104	7.2	4,332	5.8	3
4	Chronic lower respiratory diseases	91	6.3	4,228	5.7	4
5	All other unintentional injuries	47	3.2	2,503	3.4	5
6	Alzheimer's disease	45	3.1	2,449	3.3	6
7	Diabetes mellitus	43	3.0	2,150	2.9	7
8	Motor vehicle injuries	41	2.8	1,784	2.4	8
9	Influenza and pneumonia	38	2.6	1,642	2.2	10
10	Nephritis, nephrotic syndrome/nephrosis	32	2.2	1,713	2.3	9
	All other causes (Residual)	316	21.7	18,992	25.3	
<b>Total Deaths -- All Causes</b>		<b>1,453</b>	<b>100</b>	<b>74,696</b>	<b>100</b>	

Upon further analysis, overall, men and women fared similarly with the leading causes of death with two notable exceptions. Men in Davidson County were more likely to commit suicide as the eighth leading cause of death at 2.8%. Women were more likely to suffer from Alzheimer's disease as the fifth leading cause of death at 4.7% (15).

Of the 1,453 deaths in 2007, 90.5% were classified as white, 9% as African American and 0.5% as American Indian. Furthermore, 99.7% were non-Hispanic and 0.3% was classified as being of Mexican descent specifically (16).

Of the 131 African American deaths, the top ten causes of death were very similar percentage-wise to those classified as white. A slightly higher percentage (less than

2%) of African Americans died via intentional self-harm (suicide) as compared to whites (15).

## Cardiovascular and Circulatory Disease, Diabetes and Other Risk Factors

There are many factors that contribute to heart disease. Physical inactivity, smoking, diet, weight, high blood pressure and family history are just a few. The Behavioral Risk Factor Surveillance System (BRFSS) is a random telephone survey of state residents aged 18 and older in households with telephones. While this survey does not yield statistically significant results in all North Carolina counties separately, Davidson, Catawba and Randolph are surveyed each year individually.

Table 11 shows the responses to selected questions that can contribute to heart disease (12). These results are self reported. A list of the BRFSS questions can be found at <http://www.schs.state.nc.us/SCHS/brfss/pdf/BRFSSQ07.pdf>. As evidenced by Table 11, Davidson County showed a slightly less percentage of respondents reporting binge drinking and being classified as overweight (based on reported height and weight) as compared to the other counties and the state; Davidson County showed a slightly higher percentage for responding as obese, currently having diabetes and being borderline for diabetes.

<b>Behavioral Risk Factor</b>	<b>Davidson</b>	<b>Catawba</b>	<b>Randolph</b>	<b>State</b>
% Activity Recommendation Status - Physically Inactive	13.7	14.9	13.2	14.3
% of Adults Who Currently Smoke	25.2	22.3	29.1	22.9
% of Adults who Reported Binge Drinking	10.9	11.6	11.9	12.3
% of Adults Who Reported Eating Five or More Servings of Fruits or Vegetables per Day	20.7	19.9	16.3	21.6
% of Adults with a History of Any Cardiovascular Disease	10.2	8.7	10.5	9.1
% Body Mass Index Grouping - Obese	32.2	26.3	27.6	28.7
% Body Mass Index Grouping - Overweight	30.9	33.9	36.6	35.9
% Current Diabetes	13.2	8.8	10.6	9.1
% Current Diabetes - Borderline	3.3	1.3	0.8	1.4
% High Blood Pressure	29.5	31.9	29.0	28.8
% High Blood Pressure - Borderline High or Pre-Hypertensive	2.6	1.8	2.5	2.4

Table 12 shows the inpatient hospital utilization rates for Davidson County for diabetes, heart disease and cerebrovascular disease diagnoses (17). While these numbers reflect a very small percentage of Davidson County citizens, the costs of these hospital visits are significant.

<b>DIAGNOSTIC CATEGORY</b>	<b>TOTAL CASES</b>	<b>DISCHARGE RATE (PER 1,000 POP)</b>	<b>AVERAGE DAYS STAY</b>	<b>TOTAL CHARGES</b>	<b>AVERAGE CHARGE PER DAY</b>	<b>AVERAGE CHARGE PER CASE</b>
<b>ENDOCRINE, METABOLIC &amp; NUTRITION DISEASES</b>	616	3.9	4.2	\$8,434,384	\$3,237	\$13,692
-- Diabetes	277	1.8	4.9	\$4,313,251	\$3,197	\$15,571
<b>CARDIOVASCULAR &amp; CIRCULATORY DISEASES</b>	2,697	17.2	4.5	\$63,276,420	\$5,203	\$23,462
-- Heart Disease	1,794	11.5	4.4	\$44,432,516	\$5,585	\$24,767
-- Cerebrovascular Disease	503	3.2	4.3	\$9,302,464	\$4,333	\$18,494

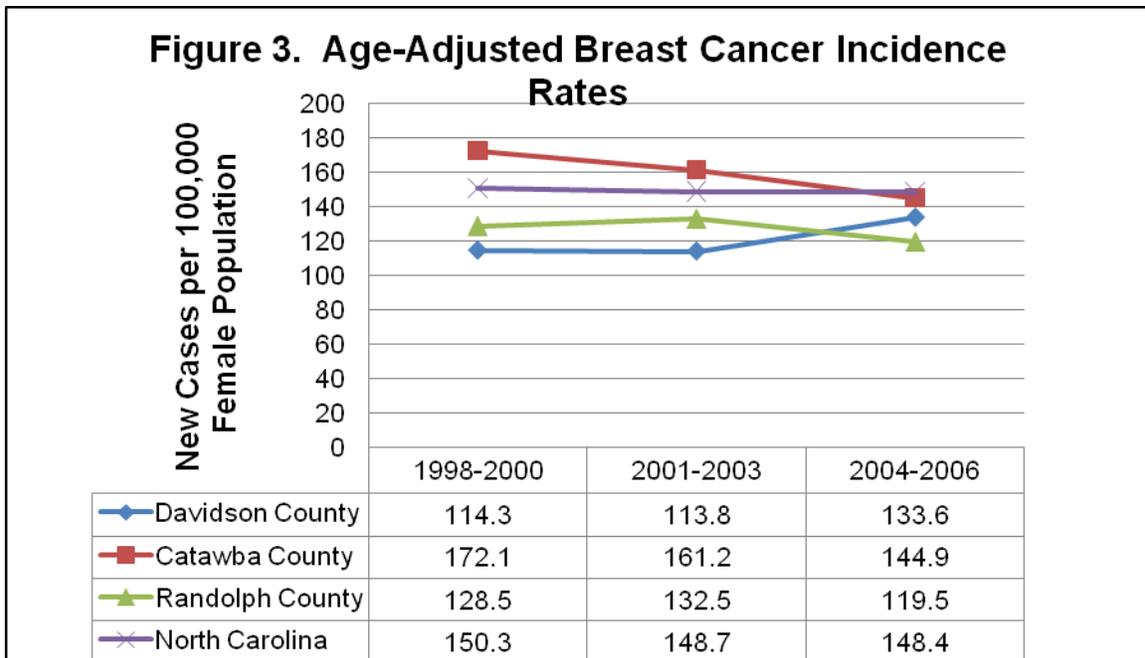
## Cancer

Cancer is the second leading cause of death in North Carolina as well as Davidson County. Table 13 shows the inpatient hospital utilization rates for Davidson County for overall cancer cases as well as four specific types of cancers (17).

DIAGNOSTIC CATEGORY	TOTAL CASES	DISCHARGE RATE (PER 1,000 POP)	AVERAGE DAYS STAY	TOTAL CHARGES	AVERAGE CHARGE PER DAY	AVERAGE CHARGE PER CASE
<b>MALIGNANT NEOPLASMS</b>	526	3.4	7.0	\$14,701,710	\$3,969	\$27,950
-- Female Breast	30	0.2	1.8	\$300,546	\$5,671	\$10,018
-- Prostate	36	0.2	3.3	\$696,544	\$5,853	\$19,348
-- Colon, Rectum, Anus	85	0.5	7.5	\$2,435,524	\$3,829	\$28,653
-- Trachea, Bronchus, Lung	76	0.5	6.7	\$1,987,921	\$3,929	\$26,157
<b>BENIGN, UNCERTAIN &amp; OTHER NEOPLASMS</b>	128	0.8	3.8	\$2,193,379	\$4,467	\$17,136

## Women's Health

In Davidson County, death rates from cancer overall and from colon, rectum and anus cancers and trachea, bronchus and lung cancers individually have been decreasing slightly or remaining about the same since 1994. However, the incidence rates of breast cancer and prostate cancer have been increasing slightly since 1998 in Davidson County. Figure 3 shows the trends over the last 10 years with regards to the incidence (new cases) of female breast cancer (18). In the comparison counties and North Carolina overall, the incidence has been decreasing slightly while the incidence in Davidson County increased in the 2004-2006 period.



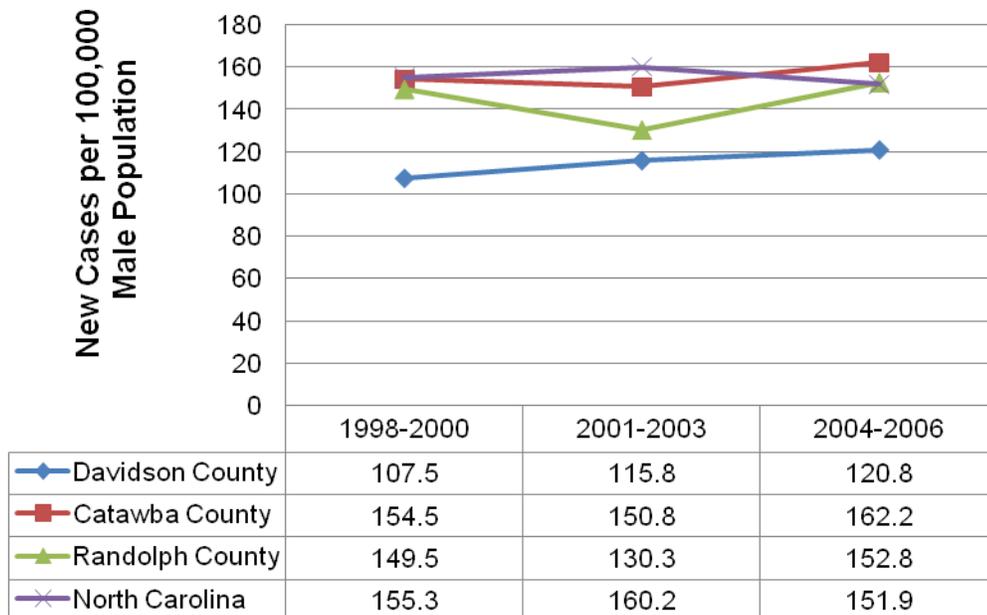
In the 2008 BRFSS Survey, almost 60% of women surveyed had had a mammogram, which was about 6% less than the state overall. Whites were significantly *more likely* to have had one (64%) than non-whites (39%). Over 90% of women over 45 years of age had had a mammogram. Those women having a high school education or less were *more likely* to have had a mammogram and those women with a household income of \$50,000 or greater were *more likely* to have had one (22).

Additionally, the 2008 BRFSS asked women if they had had a Pap smear in the last 3 years. Over 88% of the women surveyed in Davidson County had had a Pap smear, compared to 87% for the state overall. Non-white women were *more likely* to have had a Pap smear than whites. Women age 18-44 were *more likely* to have had a Pap smear than those 45 or more years of age. Both education and household income seemed to be related to whether or not a woman had had a Pap smear with the percentage proportionally increasing as both education and household income increased (23).

### Men’s Health

The incidence of prostate cancer has remained relatively low when compared to Catawba County, Randolph County and North Carolina as a whole (Figure 4) (18). However, the incidence rate in Davidson County has risen steadily over the last 10 years, from 107.5 new cases per 100,000 in 1998-2000 to 120.8 new cases per 100,000 in 2004-2006. As with female breast cancer, this number may or may not reflect an increase in the number of patients getting cancer screenings and not necessarily a natural occurrence of more cases than usual.

**Figure 4. Age-Adjusted Prostate Cancer Incidence Rates**

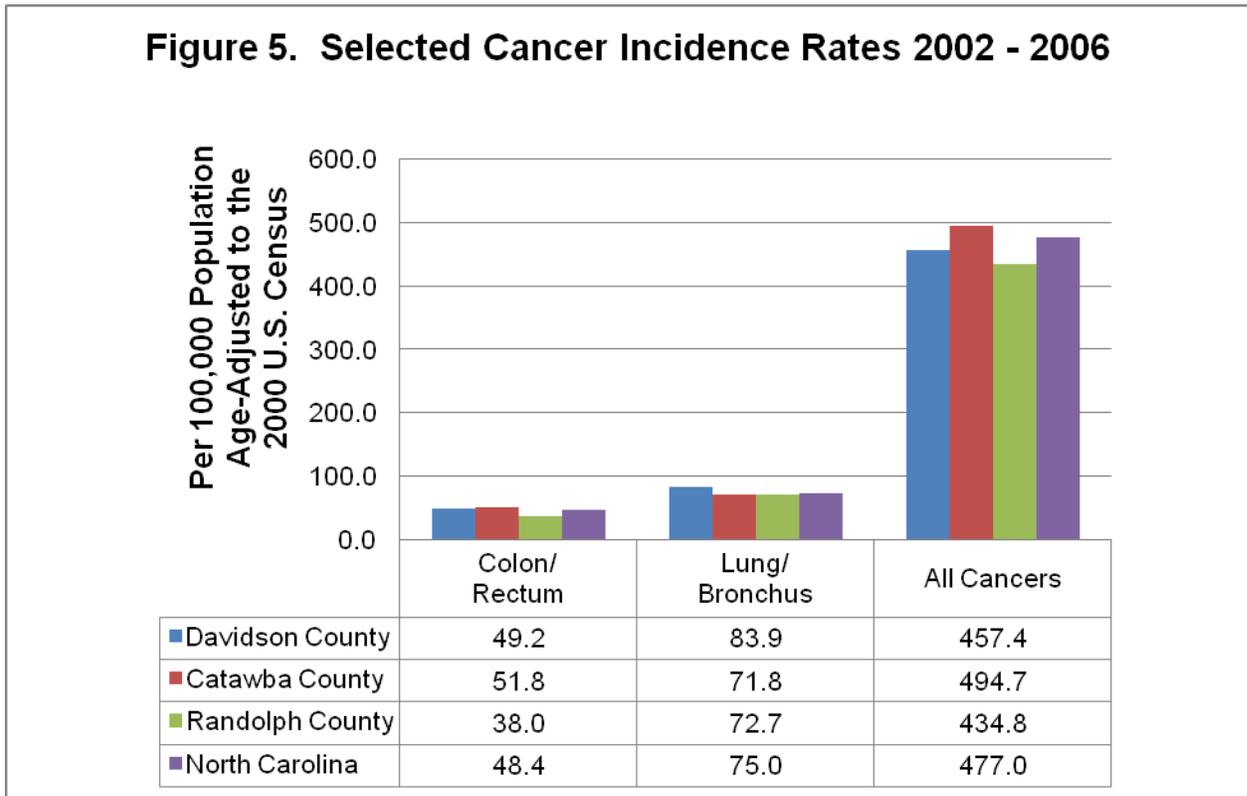


In the 2008 BRFSS Survey (20), 126 Davidson males aged 40 and over were questioned about prostate cancer screening. Of these, the overwhelming majority were white (93%) and 45 years of age or over (92%). Overall, approximately 65% of the respondents stated that they had had a PSA test, a percentage similar to Randolph County and the state overall.

In 2008, those with some college education were slightly *more likely* to have had a PSA than those with a high school diploma or less. Similarly, those respondents with a household income greater than \$50,000 were about 10% *more likely* to have had a PSA. This indicated a change over time from the 2006 survey in which those with some college education were slightly *less likely* to have a PSA than those with a high school diploma or less. Also, those respondents with a household income greater than \$50,000 were slightly *less likely* to have a PSA than those making less (21).

### Other Cancers

The incidence rates for selected other cancers are calculated in terms of five-year rates by the North Carolina State Center for Health Statistics and can be found in Figure 5 (19). For colon/rectum, lung/bronchus and total cancer, Davidson County has similar rates to the comparison counties and the state overall. For Davidson County, the rate for lung/bronchus cancer is slightly higher but the rate for all cancers is slightly lower than Catawba County and the state overall.



## **Colon/Rectum Cancer**

Of those 2008 BRFSS respondents in Davidson County 50 years of age or over, 54% had had a blood stool test and nearly 68% had had a sigmoidoscopy or colonoscopy, both higher than the state overall. Whites were significantly *more likely* to have had a blood stool test or an invasive exam than non-whites. Household income was a factor for both tests with proportionally more respondents having an exam in the higher income brackets (24, 25).

## **Lung/Bronchus Cancer**

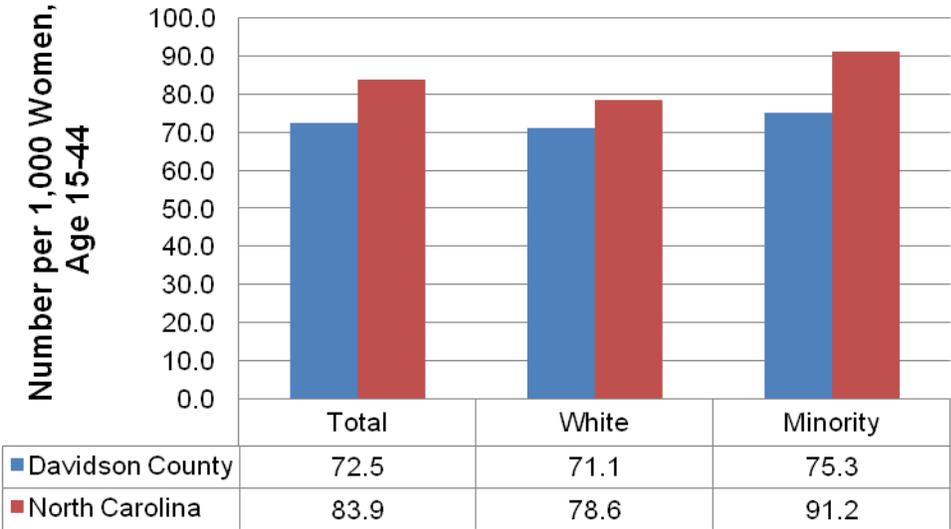
Of those 2008 BRFSS respondents in Davidson County, 22% identified themselves as current smokers, a number very *slightly less* than in 2006. Females were more likely than males to be smokers. Whites were *more likely* than non-whites to be current smokers. Additionally, in 2008 education and smoking were proportionally related with those with more education being slightly *more likely* to smoke. However, those with more household income were *less likely* to smoke. This was true for both 2006 and 2008 (26, 27).

## **Maternal and Child Health**

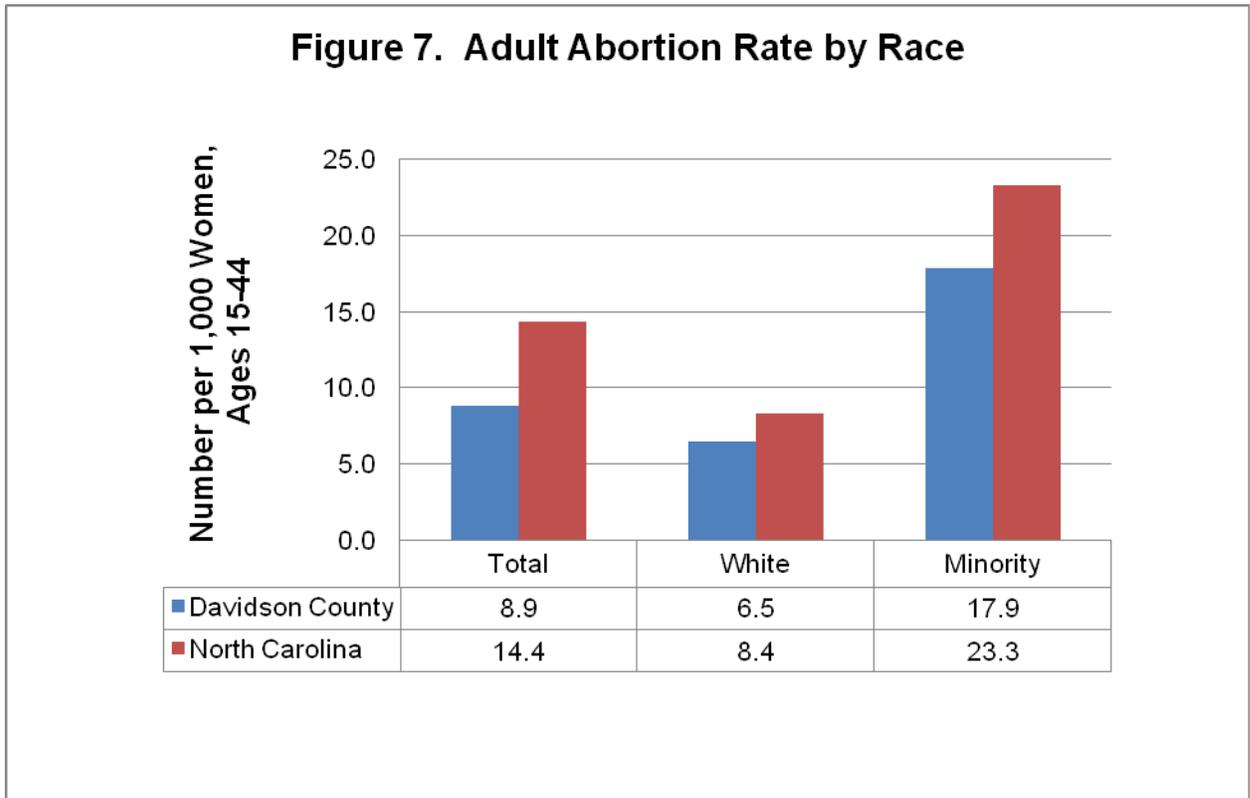
### **Adult Pregnancy Rates**

In 2008, women in Davidson County ages 15 – 44, had a total of 2,285 pregnancies, 1,997 live births and 279 abortions. Minorities had a slightly higher pregnancy rate than whites (Figure 6) (28).

**Figure 6. Adult Pregnancy Rates by Race**



However, Davidson County abortion rates, while lower than the state average, showed a marked discrepancy between abortions by race with an abortion rate for minorities nearly 3 times that for whites (Figure 7) (28).



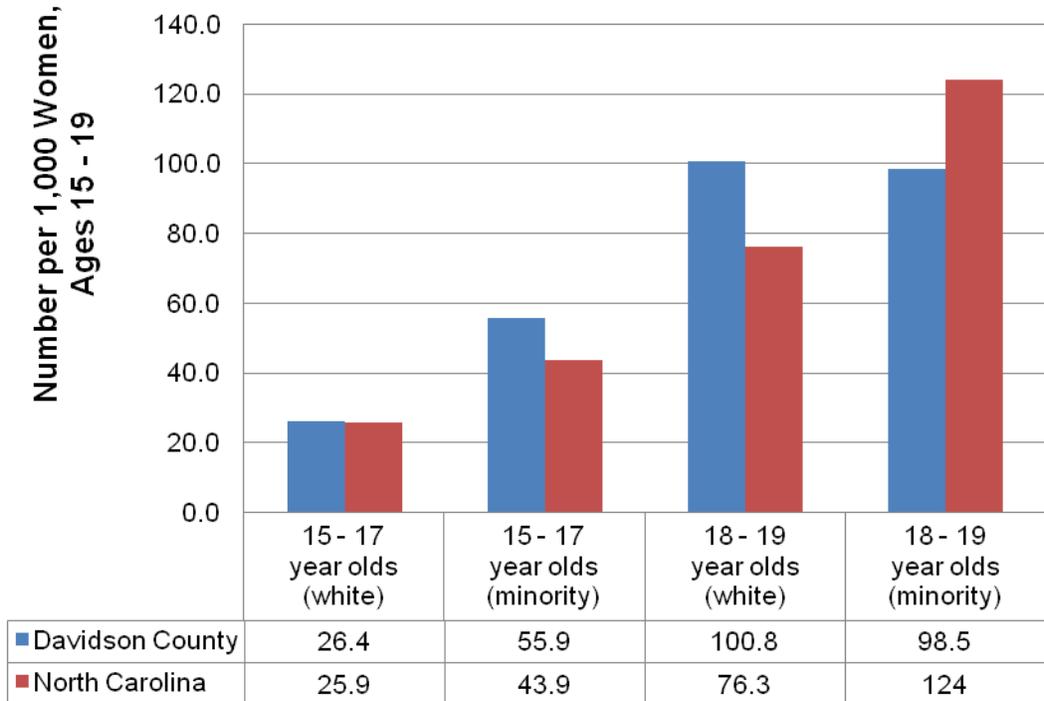
In terms of low birth weight, Davidson’s overall rate of 8.9% was similar to the state rate of 9.1%. However, in Davidson County, the rate of low birth weight among minorities was almost double (15.9%) as compared to that of whites (8.0%), a phenomenon not seen in either Catawba or Randolph Counties, where the minority rate was only about 1.5% higher than whites (30).

For mothers who smoked during pregnancy, the rate for whites in Davidson County was 17.2% as compared to the state’s rate of 10.9%. However, it should be noted that this Davidson County rate was the lowest it had been in at least 11 years with the high during that time being 25.8% in 1999. In contrast, the percentage of minority women who smoked during pregnancy in Davidson County in 2008 was 7.1%, below the comparison counties and the state average (30).

## Teenage Pregnancy Rates

Overall, the 2008 teen pregnancy rates for Davidson County are similar to the state rates. However, as compared to the state, 15 – 17 year old minorities in Davidson County experienced a higher pregnancy rate while 18 – 19 year old minorities experienced a significantly lower pregnancy rate. Also, 18 – 19 year old whites experienced more than 24 pregnancies per 1,000 in 2008 than the state average (Figure 8) (29). At 9.1 per 1,000, Davidson County has a slightly lower teenage abortion rate that the state average of 12.5 for women 15 – 19 years of age (29).

**Figure 8. Teenage Pregnancy Rates, 2008**



## Communicable Diseases

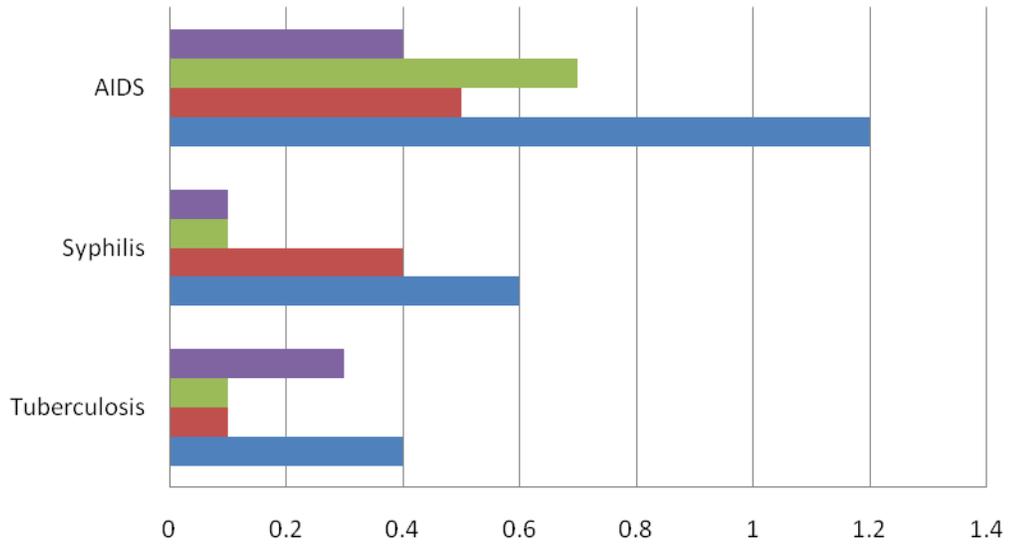
The communicable disease rates were analyzed for 2004-2008. For the following diseases, Davidson County had a lower rate than North Carolina overall: Campylobacter, Cryptosporidiosis, *E. coli* Shiga Toxin-Producing, Haemophilus Influenzae, Hepatitis A, Hepatitis B, Hepatitis C, Lyme Disease, Rocky Mountain Spotted Fever, Salmonellosis, Shigellosis, Strep A (invasive disease) and Whooping Cough.

From 2004 – 2007, Davidson County had 1 case of Legionellosis per year at a rate of 0.51 cases per 100,000 per year while the state rate was 0.45 cases per 100,000 per year. In 2007, Davidson County had 1 case of Leptospirosis with the entire state reporting only 3 cases total during the time period of 2004 – 2008. Leptospirosis is “a spirochetal disease transmitted to man directly or indirectly via contact with urine from any of a variety of infected domestic and wild animals [and] characterized by fever, headache, chills, myalgia and conjunctival suffusion” (31).

Similarly, Davidson County reported one of only 12 cases of both Brucellosis and Hepatitis B, (perinatal) in the state from 2004 – 2008.

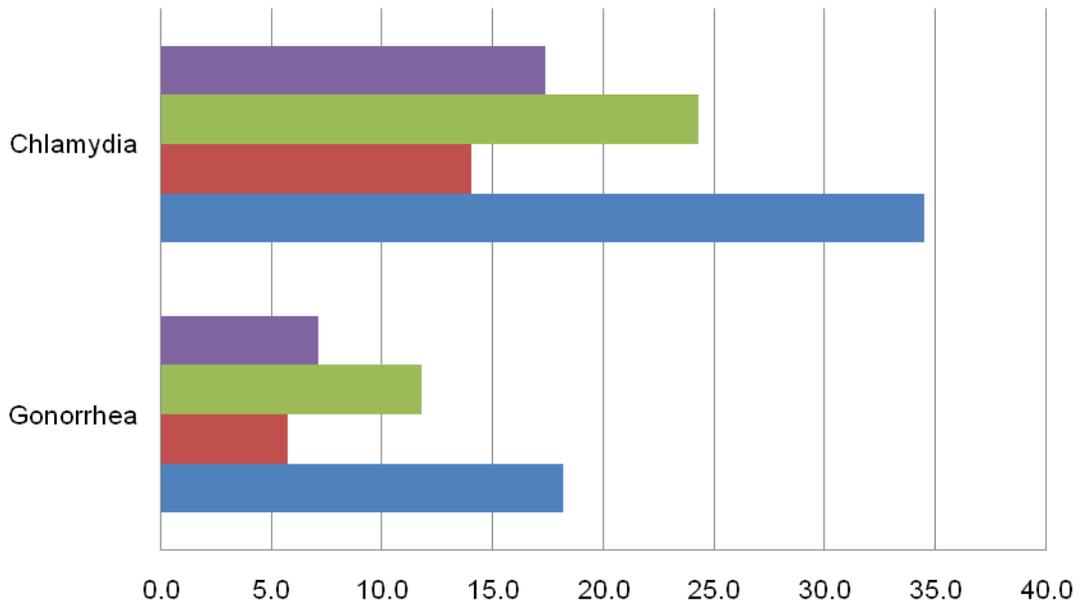
Rates for AIDS, Syphilis, Tuberculosis, Chlamydia and Gonorrhea, shown in Figures 9 and 10, show that Davidson rates are below the state for 2003 – 2007 (32).

**Figure 9. Selected Communicable Disease Rates per 100,000, 2003-2007**



	Tuberculosis	Syphilis	AIDS
■ Davidson County	0.3	0.1	0.4
■ Catawba County	0.1	0.1	0.7
■ Randolph County	0.1	0.4	0.5
■ North Carolina	0.4	0.6	1.2

**Figure 10. Chlamydia and Gonorrhea Disease Rates per 100,000, 2003-2007**

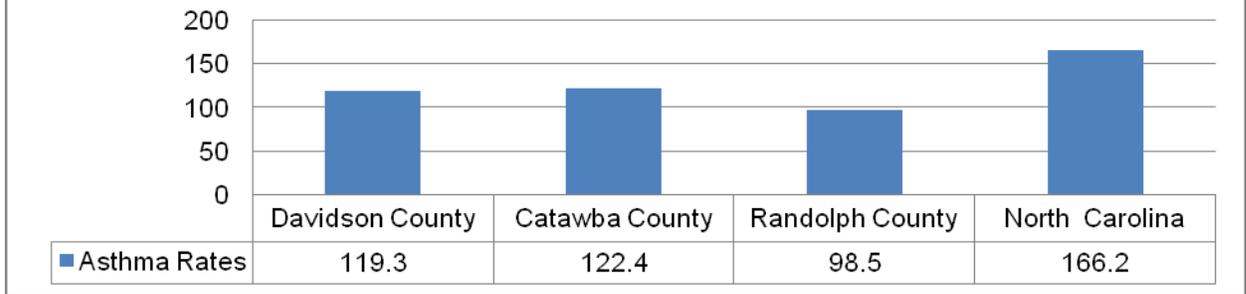


	Gonorrhea	Chlamydia
Davidson County	7.1	17.4
Catawba County	11.8	24.3
Randolph County	5.7	14.0
North Carolina	18.2	34.5

## Asthma

Asthma continues to be a problem for much of North Carolina and can be especially concerning when children are affected. Figure 11 shows that while Davidson County is below the rates for hospital discharges for asthma when compared to Catawba County and the state overall, this is still a concern for one of our most vulnerable populations (35).

**Figure 11. 2007 NC Hospital Discharges with a Primary Diagnosis of Asthma, Rates per 100,000 for Ages 0 - 14**

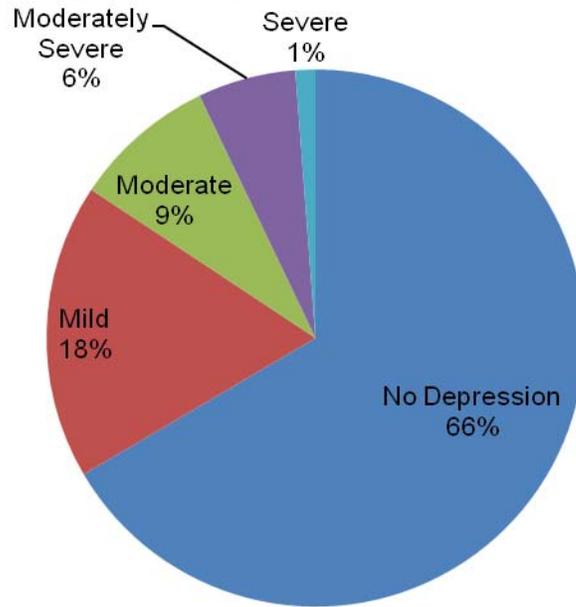


## Mental Health Issues

Depression is a key measure of mental and emotional health. The 2007 BRFSS data shows that of the 160 Davidson County residents surveyed, approximately 16% reported that they were “currently depressed” at the time of the survey as compared to 9.3% across North Carolina. Almost an equal percentage of males and females reported current depression. Education level did not seem to be a factor although whites were more likely than non-whites to report depression (33).

Figure 12 shows the severity of depression for those Davidson County residents surveyed. Most had no depression or mild depression. These figures were similar to the North Carolina percentages overall (34).

**Figure 12. Davidson County: 2007 BRFSS Survey Results, Severity of Depression**



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## Section Four: Environmental Health Assessment

Environmental Health describes quality of life factors that are determined by physical, chemical, biological, social, and psychological factors in the natural environment. Key dimensions of Davidson County's environmental health are air quality, water quality, well and septic systems, food and lodging, rabies, and lead hazards.

### Air Quality

Air quality is affected by vehicle traffic, industry, and geography – both inside and outside the county. We determine the quality of our outdoor air with the Air Quality Index (AQI), which measures concentrations of ozone, particulates, carbon monoxide, nitrogen dioxide, and sulfur dioxide.

Ozone – There are beneficial and harmful types of ozone. Good ozone occurs naturally in the earth's upper atmosphere – six to 30 miles above the earth's surface – where it forms a protective layer that shields us from the sun's harmful ultraviolet rays. Manmade chemicals can destroy this ozone, which lead the United States to phase out the production and use of ozone-depleting substances. Bad ozone is a harmful air pollutant and a major component of smog. It is found near the ground and is formed when chemicals – emitted from automobiles, refineries, power plants, industrial boilers, chemical plants, dry cleaners, and facilities that use solvents and paints – react in the presence of sunlight. Typically, it is formed in the atmosphere when ultraviolet radiation and high temperatures cause chemical reactions among volatile organic compounds and nitrogen oxides. These ozone levels are typically highest during warmer times of the day and year. This form of ozone contributes to asthma, lung infections, cell inflammation, and shortness of breath. Our growing population and the increasing number of vehicle miles traveled on our roads are key contributors to these ozone levels in Davidson County and our region. Because ozone levels have consistently been above federal compliance levels, the U.S. Environmental Protection Agency (EPA) designated Davidson County as an ozone “non-attainment area” almost ten years ago. Davidson County exceeds the maximum of 75 parts per billion. The county has started programs aimed at reducing vehicle emission, thereby reducing smog and ozone. Last year, the county was awarded federal grants to purchase hybrid vehicles. Lexington also received similar grants to install new traffic lights downtown to lower vehicle idle time.

Particle pollution – Is a mixture of liquid droplets and such solids as dust, dirt, soot, and smoke. Some solids are emitted directly into the air by factories, power plants, construction activity, fires, and vehicles while others are formed when pollutants react in the atmosphere. Particulate matter is categorized based on size: particles with diameters less than 10 micrometers – smaller than the width of a human hair – can enter the lungs and cause serious health problems.

The Air Quality Index (AQI) is a daily report of air quality that describes how clean or polluted our air is, and describes health problems we may experience a few hours or days after breathing polluted air. The AQI employs a scale that runs from 0-300: the higher the AQI value, the greater the concentration of air pollution and the greater the threat to health. An AQI value of 100 generally corresponds to the national air quality standard for a pollutant; typically, AQI values below 100 are satisfactory, but when

above 100, air quality is unhealthy – initially for sensitive people, then for everyone as AQI values get higher.

<b>Definition of Air Quality Index (AQI) Categories</b>		
<b>AQI</b>	<b>Numerical Value</b>	<b>Description</b>
Green	0-50	Good air quality. No health risks are expected. Enjoy outdoor activities.
Yellow	51-100	Moderate air quality. Air quality is okay, but unusually sensitive people may be affected, especially when the AQI nears 100.
Orange	101-150	Air quality is unhealthy for sensitive groups; children, active adults, and those with heart or respiratory disease, including asthma, should limit outdoor activity.
Red	151-200	Unhealthy air quality. Everyone should avoid prolonged outdoor activity.
Purple	201-300	Very Unhealthy air quality. Everyone should avoid outdoor activity.

Source: [www.airnow.gov](http://www.airnow.gov)

AQI for ozone is tracked from April through September, as ozone forms most easily on warm days. The table below indicates those measures for the past five years in the Charlotte area.

<b>AQI Measures for Ozone in Charlotte Region</b>					
<b>AQI</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
Green	180	182	193	NA	156
Yellow	180	171	163	NA	49
Orange	5	11	9	NA	10
Red	1	1	0	NA	0
Purple	0	0	0	NA	0

Source: North Carolina Department of Environment and Natural Resources, Division of Air Quality

Note: The statistics for total days in 2007 were unavailable.

## Water Quality

Surface water describes fresh flowing water (rivers, streams, and creeks) and fresh standing waters (lakes, ponds, and reservoirs). Flowing waters in Davidson County contain a portion of two watersheds: Lower Yadkin and Upper Yadkin Watersheds. These waters are consumed by humans, used in industry, a source of food, used for recreation and transportation, and are sites for disposed byproducts of manufacturing and sewage treatment.

According to data from the EPA and state of North Carolina (1998), only 3% of the county's surface water are impaired or threatened, making it among the "cleanest/best counties" in the U.S. Of affected rivers, streams, and creeks, the leading pollutants and stressors are sediments (32%) and pathogens (16%). There are 25 waterbodies with reported problems: 24 are low and 1 is medium. (Source: [www.scorecard.org/env-releases/water/cwa-county.tcl?fips\\_county\\_code=37057](http://www.scorecard.org/env-releases/water/cwa-county.tcl?fips_county_code=37057)).

Pathogens, such as bacteria, viruses, and protozoa, can enter water through inadequately treated sewage, storm water drains, septic systems, runoff from livestock pens, and sewage from boats. Regulatory agencies usually measure indicator bacteria, because it is impossible to test waters for all disease-causing organisms.

Sedimentation occurs when soil particles enter water from eroding land or agricultural production. Because of the high clay content of North Carolina soil, most rivers naturally have a high sediment load after a rainfall. Sedimentation is considered a pollutant when it exceeds this natural level, as it can clog and abrade fish gills, suffocate fish eggs and aquatic insect larvae, or reduce water clarity and interfere with recreational activities. Nutrients and chemicals can detach and become soluble. (Source: [www.scorecard.org/envreleases/def/cwa\\_cause\\_class\\_def.html](http://www.scorecard.org/envreleases/def/cwa_cause_class_def.html).)

## Well and Septic Systems

Wells and septic systems are widely found in Davidson County. The Davidson County Health Department (DCHD) is responsible for approving the location of wells and issuing required well permits, per state standards.

During fiscal year 2008-09, Environmental Health Specialists from the DCHD sampled water from 123 wells and issued 50 well construction permits.

In July 2006, the North Carolina General Assembly enacted legislation requiring North Carolina have a State Well Program by July 1, 2008. Funding was offered to any county that instituted a local well program by June 30, 2007. The Rules Governing the Construction, Repair, and Abandonment of Wells in Davidson County, North Carolina were adopted by the Davidson County Board of Health on March 8, 2007 with an effective date of September 1, 2007. These rules were in effect until June 30, 2008 when the North Carolina private well regulations took effect. Incentive funds received for this project were utilized for training staff and developing a computer system that employs GPS to manage data.

DCHD Environmental Health Specialists also ensure septic systems are built and working properly. Staff examine soil, topography, landscape position, soil wetness, soil depth, and barriers to assure septic systems are properly located. They also issue

permits to developers to install, construct, and operate new septic systems. Staff also investigate complaints about sewage odor and on-site septic system problems and, as necessary, issue notices of violation.

During fiscal year 2008–09, Environmental Health Specialists issued 828 permits for septic systems.

### Food and Lodging

DCHD Food and Lodging staff issue permits to and monitor area eating establishments, including restaurants, school cafeterias, mobile food units, pushcarts, and businesses that sell food that must be stored, cooked, served, or held at special temperatures. The program also permits and inspects hotels and other temporary lodging facilities, child care centers, nursing homes, tattoo artists, meat markets, and public swimming pools. Staff also work with contractors and owners of restaurants that are under construction to ensure floor plans, equipment, construction materials, lighting, and plumbing meet public health regulations.

During fiscal year 2008–09, these staff conducted 1,983 inspections, made 1,573 visits, and issued 233 new restaurant, transitional, or temporary food service permits.

### Lead Testing

DCHD administers the Childhood Lead Poisoning Prevention Program, which provides blood lead testing and medical case management to children under age six who have elevated blood lead levels. The target population is children who reside in homes built before 1978, which was the last year the use of lead-based paints was allowed in the U.S.

During fiscal year 2008–09, 8 children were screened, 1 investigation with Environmental Health was conducted, and 56 follow up counseling contacts were made.

### Rabies

During fiscal year 2008–09, there were 459 animal bite investigations conducted by Environmental Health staff. 54 specimens were submitted to the state lab for testing and 13 animals tested positive for rabies. DCHD sponsored 4 rabies clinics in communities throughout the county and vaccinated approximately 2200 animals at these clinics.

## Section Five: Quality of Life Survey

The Davidson County Health Department employed several methods to distribute the Quality of Life surveys and to assure its responses adequately represented the demographics of county residents.

### AGE DISTRIBUTION

	20-24	25-34	35-44	45-54	55-64	65-74	75>
Survey	5%	17%	26%	21%	19%	4.5%	2.3%
Population	5%	13%	15%	15%	12%	7.6%	6%

Respondents approximated the distribution of county residents in the categories of very young adults and older adults; the survey over-represented in the categories of ages 25-64 years of age.

### GENDER DISTRIBUTION

	Male	Female
Survey	26%	72%
Population	49%	51%

When assessed by gender, the survey under-represented males and over-represented females.

### RACE DISTRIBUTION

	White	African-American	Hispanic	Asian	American Indian
Survey	73%	13%	10.5%	1%	1.3%
Population	83%	9%	6%	1%	0.3%

When assessed by race, the survey under-represented the white population and over-represented all other racial populations.

### EDUCATION DISTRIBUTION

	Some high school	High School/GED	Assoc. Degree	Some College	BS	Graduate Degree	Other
Survey	14%	24%	15%	24%	12%	7%	1%
Population	22%	36%	9%	18%	11%	4%	

The survey under-represented those with a high school diploma or less and over-represented those with some type of college experience.

### COMMUNITY DISTRIBUTION

	Number	Percentage
Lexington	218	33%
Thomasville	124	18.5%
South Lexington	33	5%
Denton	28	4%
Southmont	25	3.7%
Welcome	17	2.5%
Tyro	16	2%
Reeds	14	2%
Linwood	13	2%
Central	11	1.6%
Churchland	3	.4%
Unknown	168	25%

### SURVEY FINDINGS:

Question #1 – What is the biggest health issue(s) of concern in your community?

#### Ranking of Health Issues

	Number of Respondents	Percentage
1. Flu – Regular and H1N1	131	17%
2. Overweight/Obesity	114	15%
3. Lack of health insurance	58	7%
4. Diabetes	38	5%
5. Cancer	36	5%
6. HIV/STDs	34	4%
7. Unaffordable health care	33	4%
8. Heart disease	32	4%
9. Unaffordable health insurance	20	3%
10. High blood pressure	14	2%
10. Smoking/Secondhand smoke	14	2%
12. Unemployment	12	2%
13. Teen pregnancy	11	1%
14. Senior citizen issues	8	1%
14. Access to health care	8	1%
14. Alcohol use	8	1%
15. Communicable diseases	7	1%
16. Mental health issues	6	1%
16. Overweight/obese Children	6	1%

Question #2 – The recommendations for physical activity is 30 minutes a day 5 days a week.

- Almost 38% reported engaging in physical activity for at least 30 minutes a day 5 days a week.

Question #3 – One recommendation for healthy eating is at least 5 servings of fruits and vegetables a day.

- 33% reported eating 5 or more servings of fruits and vegetables every day.

Question #4 – What are the top 3 biggest substance abuse problems in this county?

1. Abusing Prescription Drugs
2. Alcohol Abuse
3. Marijuana
4. Other hard drugs
5. Drinking and driving
5. Methamphetamine
7. Using someone else's prescription drugs
8. Huffing

Question #5 – To prevent teen pregnancy and sexually transmitted diseases, which of the following should be taught in school?

- 27% believe Abstinence Until Marriage should be taught
- 70% believe comprehensive sex education should be taught

Question #6 – If a friend or family member needed counseling for a mental health problem, who would you tell them to call or talk to?

1. Physician	N = 164
2. Minister/Church	N = 119
3. Mental health professional	N = 107
4. Daymark	N = 95
5. County mental health	N = 75
6. Davidson County Health Department	N = 54
7. Family Services	N = 35
8. Hospital	N = 28
9. Family/friend	N = 24
10. DSS	N = 23
11. PBH	N = 14

This is of concern as #5 does not exist and #6 and #10 do not provide mental health services.

Question #7 – If a friend or family member were thinking about suicide, who would you tell them to call or talk to?

1. Minister/Church	N = 228
2. Mental health professional	N = 107
3. Physician	N = 90
4. Hotline	N = 84
5. 911	N = 70
6. Daymark	N = 69
7. Family/friend	N = 67
8. Hospital	N = 55
9. County mental health	N = 39
10. Family Services	N = 20

This is of concern as #9 does not exist.

Question #8 – What is the main reason that you or your family would not be up-to-date on vaccines?

- Almost 72% of respondents keep vaccines up-to-date
- 8% believe they are too expensive
- 2.5% are concerned about side effects
- 0.6% believe the vaccine causes the disease
- 9% do not know when vaccines are due

Question #9 – Did you know before now that your child can receive free school-required vaccines at the health department?

- 62% of respondents know their child can receive free vaccines at the health department
- 30% did not know their child can receive free vaccines at the health department

Question #10 – Do you support tobacco-free environments such as restaurants, workplaces, community colleges, and public areas?

- 80% of respondents support tobacco –free environments

Question #11 – Do you and your family recycle?

- 66% of respondents recycle
- Of those who do not, the most popular reason is because the pick up company in the county does not offer recycling

Question #12 – Which of the following Environmental Health concerns do you believe most affects your health?

1. Secondhand smoke	16%
2. Air quality	13%
3. Food safety	11%
4. Drinking water	9%
5. Mold	9%
6. Ozone	3%
7. Lead exposure	1.5%
8. Meth labs	1%
9. Fluoride water	1%
10. Drought	1%

- 30% of respondents selected multiple answers which voided their response

Question #13 – If you are over age 50, have you had a colonoscopy?

- 57% of respondents over age 50 reported ever having a colonoscopy
- Of the 30% who reported no, 35.5% were due to high cost/lack of insurance.

Question #14 – If you are a male over age 40, do you have an annual prostate exam?

- 53% of male respondents over age 40 indicated they get annual prostate exams.

Question #15 – If you are a female over age 40, do you have an annual mammogram?

- 65% of women over age 40 reported getting yearly mammograms
- Of the 23% who reported no, 50% indicated it was due to the high cost/lack of insurance

Question #16 – If you are a female, do you have a pap smear at least every other year?

- 74% of women respondents indicated they have a pap smear at least every other year
- Of the 18% who reported not getting pap smears, 47% indicated it was due to the high cost/lack of insurance

Question #17 – Where do you go most often for health care when you are sick?

Private physician – 62%  
 Hospital – 6%  
 Pharmacy – 0.4%  
 Health department – 4%  
 Urgent Care Center – 3%  
 Free Clinic – 10%  
 Walk-in Clinic – 3.5%  
 Don't go anywhere – 6%

Question #18 – Where do you go when you need your yearly check-up physical?

Private physician – 47%  
Hospital – 2%  
OB/Gyn – 19%  
Health Department – 9%  
Urgent Care Center – 1%  
Free Clinic – 10%  
Walk-in Clinic – 2%  
Don't go anywhere – 10%

Question #19 – Where do you find out about local news or events?

Billboards – 2%  
Emails – 5%  
Magazines – 2.5%  
School – 3%  
Social networks – 2.5%  
Blogs – 0.5%  
Workplace – 7%  
Friends/Family – 11%  
Newspapers – 16%  
TV – 22%  
Church – 7%  
Internet – 10%  
Radio – 10%

Question #20 – How concerned are you about H1N1 flu?

Not concerned – 7%  
Somewhat concerned – 18%  
Very concerned – 39%

Question #21 – If available, would you take the H1N1 flu vaccine?

- 55% reported being willing to take the H1N1 vaccine
- 11% reported not being willing
- 23% reported not being sure

## Section Six: Stakeholder Survey

Question #1 – What is the biggest health issue(s) of concern in your community?

Ranking of Health Issues	
	Number of Respondents
Obesity	N = 13
Access to Care	N = 9
Lack of health insurance	N = 6
Childhood obesity	N = 3
Diabetes	N = 1
Immunizations/Vaccines	N = 1
Care of elderly	N = 1
Care of children	N = 1
Lack of nutritional cooking practices	N = 1
Mental health issues	N = 1
Inadequate health education for school age children	N = 1
High cost of health care	N = 1
Economy	N = 1
H1N1	N = 1
Restaurants catering to unhealthy lifestyles	N = 1
Smoking	N = 1
Management of chronic diseases	N = 1

Question #2 – The recommendations for physical activity is 30 minutes a day 5 days a week.

- 46% reported engaging in physical activity for at least 30 minutes a day 5 days a week

Question #3 – One recommendation for healthy eating is at least 5 servings of fruits and vegetables a day.

- 44% reported eating 5 or more servings of fruits and vegetables every day

Question #4 – What are the top 3 biggest substance abuse problems in this county?

1. Abusing prescription drugs
2. Alcohol use
3. Using someone else's prescription drugs
4. Other hard drugs
5. Drinking and driving
6. Marijuana
7. Methamphetamine

Question #5 – To prevent teen pregnancy and sexually transmitted diseases, which of the following should be taught in school?

- 19% believe abstinence until marriage should be taught
- 80% believe a comprehensive sex ed curriculum should be taught

Question #6 – If a friend or family member needed counseling for a mental health problem, who would you tell them to call or talk to?

1. Minister/Church
2. PBH
3. Daymark
4. Counselor
5. Personal physician
6. Family Services
7. DSS
8. Davidson County Health Department
9. EAP
10. Moses Cone Behavioral Health

Question #7 – If a friend or family member were thinking about suicide, who would you tell them to call or talk to?

1. Minister/Church
2. Mental health professional
3. Daymark
4. Suicide hotline
5. PBH
6. Hospital
7. Physician
8. DSS
9. 911
10. Moses Cone Behavioral Health

Question #8 – What is the main reason that you or your family would not be up-to-date on vaccines?

- Almost 90% of respondents keep up-to-date on vaccines
- 3.4% believe the vaccine causes the disease
- 7% do not know when vaccines are due

Question #9 – Did you know before now that your child can receive free school-required vaccines at the health department?

- 84% know their child can receive free vaccines at the health department
- 16% did not know their child can receive free vaccines at the health department

Question #10 – Do you support tobacco-free environments such as restaurants, workplaces, community colleges, and public areas?

- 100% of respondents are in support of tobacco-free environments

Question #11 – Do you and your family recycle?

- 80% of respondents recycle

Question #12 – Which of the following Environmental Health concerns do you believe most affects your health?

1. Air quality	30%
2. Food safety	20%
3. Drinking and driving	17%
4. Mold	13%
5. Secondhand smoke	13%
6. None of the above	7%

Question #13 – If you are over age 50, have you had a colonoscopy?

- 65% of respondents over age 50 reported ever having a colonoscopy

Question #14 – If you are a male over age 40, do you have an annual prostate exam?

- 73% of male respondents over age 40 indicated they get annual prostate exams

Question #15 – If you are a female over age 40, do you have an annual mammogram?

- 92% of women over age 40 reported getting yearly mammograms

Question #16 – If you are a female, do you have a pap smear at least every other year?

- 100% of female respondents indicated they have a pap smear at least every other year

Question #17 – Where do you go most often for health care when you are sick?

Private physician – 90%  
Urgent Care Center – 3%  
Don't go anywhere – 6%

Question #18 – Where do you go when you need your yearly check-up physical?

Private physician – 93.5%  
OB/Gyn – 10%  
Urgent Care Center – 3%

Question #19 – Where do you find out about local news or events?

Billboards – 13%  
Emails - 26%  
Magazines – 16%  
School – 6.5%  
Social networks – 6.5%  
Blogs – 0  
Workplace – 39%  
Friends/Family – 23%  
Newspapers – 81%  
TV – 71%  
Church – 13%  
Internet – 39%  
Radio – 42%

Question #20 – How concerned are you about H1N1 flu?

Not concerned – 14.3%  
Somewhat concerned – 46.4%  
Very concerned – 7%

Question #21 – If available, would you take the H1N1 flu vaccine?

- 71% reported yes
- 16% reported no
- 13% reported not sure

Question #22 – What is your position in your agency?

Director – 13  
Administrator – 9  
Owner – 3  
Provider – 2  
Elected official – 1

Question #23 – What services does your agency provide for county residents?

Health care - 9  
Pediatric Health care  
Acute care treatment  
Mental health, Substance Abuse, Developmental Disability  
Veterinary services  
Recreation - 2  
Education - 4  
Child care, Fitness, Aquatics, Summer Camp, etc.  
Preventive services  
Low cost after school and summer day camp programs  
Government related - 2  
Early childhood services  
Partnerships and collaborations  
Services for the elderly

Question #24 – What are some aspects of your organization that attracts county residents to your programs/services?

Accessibility, free or low cost services, mandated services  
Safe, effective, and economic treatment of everyone  
Indigent and medical care  
To have a healthy life, all your mental health, substance abuse and developmental disabilities needs must be met  
Parks and programs  
The law requires school attendance  
Location and hours  
Quality, accessibility, reliability, reputation  
Reduced cost of services, good customer service  
Medical testing and screening; hospitalization  
Illness and accidents  
Quality of care  
Our low fees and programs  
Quality education  
Quality; Healthcare need; Customer satisfaction  
Fun and healthy  
Taxes, land use, health, social services, public safety, transportation, recreation, libraries  
Free services; child care subsidy; free checkout of toys and other educational items  
Improving service  
Variety of educational offerings  
Providing services to taxpayers  
Free care  
Availability of services; location; only agency who provides CAP/DA; meals outside the city limits; low to no cost activities, screenings, seminars, educational programs; friendly helpful staff

Question #25 – Describe county residents who are most likely to use your services?

- Everyone – 10
- Children – 7
- Uninsured/Underinsured – 2
- Ages 30-60 – 1
- Families with children – 1
- Ages 5 and above – 1
- Women and children – 1
- Everyone needing hospitalization – 1
- Ages 9 years and up – 1
- Older adults – 1

Question #26 – In the past 5 years, have there been any changes in the composition of the people who use your services?

- More non-English speaking – 4
- Unemployed and without insurance – 3
- Decrease in number seeking services – 1
- More with college education – 1

Question #27 – What barriers do residents face in accessing your services:

- Transportation – 13
- Cost - 4
- Income – 3
- Enough appointments – 2
- Medical IQ – 1
- Stigma – 1
- Lack of connectivity – 1
- Language – 1
- Knowledge of available services – 1
- Waiting list – 1

Question #28 – What does your agency do to meet the special needs of people who use your services?

- Interpreters – 10
- Handicap accessible – 7
- Cultural competency training – 4
- ADA regulations – 3
- No cost for programs – 1
- Special Olympics – 1
- Transportation – 1
- Parking – 1
- ESL – 1

Question #29 – There is a good health care system in Davidson County.

- Agree – 81%
- Disagree – 19%

Question #30 - Davidson County is a good place to raise children.

Agree – 97%  
Disagree – 3%

Question #31 - Davidson County is a good place to grow old.

Agree – 100%  
Disagree – 0%

Question #32 – There is plenty of support for individuals and families during times of stress and need in Davidson County.

Agree – 61%  
Disagree – 39%

Question #33 - Davidson County is a safe place to live.

Agree – 100%  
Disagree – 0%

Question #34 - Davidson County has clean water.

Agree – 100%  
Disagree – 0%

Question #35 – What services or programs currently available in Davidson County are most beneficial to residents?

Davidson County Health Department – 6  
DSS - 6  
Schools – 5  
Davidson Medical Ministries Clinic – 4  
Crisis Ministries – 2  
Health services – 2  
Senior Services – 2  
Hospice – 1  
YMCA – 1  
Free health services – 1  
Recreation – 1  
Support services – 1  
Public safety – 1  
ESC – 1  
Homeless Shelter – 1  
CIS – 1  
Small Business Center – 1  
Mental health – 1

Question #36 – What services or programs that aren't currently available are needed?

- Mental Health – 4
- Public transportation – 3
- Recreational opportunities – 3
- Better access to health care – 3
- Primary care providers – 1
- Out of school activities – 1
- Teen programs/facility – 1
- Sewer – 1
- Adult day care in Thomasville – 1
- More access to free/low cost medical care – 1
- Better awareness of available services – 1
- Dental care – 1

Question #37 – What would you consider to be Davidson County's greatest strengths?

- Its people – 10
- Location – 4
- Education – 3
- Community – 2
- Level of collaboration - 2
- Good workforce – 2
- Excellent health care – 2
- Caring professionals – 1
- Rural areas – 1
- Undeveloped land – 1
- Strong government programs – 1

Question #38 – What are some of the challenges Davidson County faces?

- Unemployment/Economy – 16
- Lack of training/education – 5
- Lack of determination – 3
- Lack of funding for programs – 2
- Poverty – 2
- Geographic isolation – 1
- Limited transportation – 1
- Poor perception of city schools – 1
- Weak tax base – 1
- Lack of diversity in leadership – 1
- Culture does not value education – 1
- 3 school systems – 1

Question #39 – What are the most important health behaviors that affect residents of Davidson County?

- Lack of exercise – 12
- Smoking – 10
- Poor diet – 8
- Risky behaviors – 4
- Apathy about health – 3
- Obesity – 3
- Drinking – 2
- Mental health – 2
- Failure to get vaccinations – 1
- High cost of health care – 1
- Proclivity to go to ER for primary care – 1

Question #40 – Is there anything else you would like to share?

Parish nurse outreach too big a challenge for local churches and our hospital  
Glad you conducted survey

## Section Seven: Health Priorities

The Steering Committee of Davidson Health Alliance, along with several other community partners, was invited to participate in the prioritization process. The group reviewed the preceding demographic, public health, Quality of Life survey, and Stakeholder survey data and ranked the following health concerns:

1. Overweight/obesity
2. Cancer
3. Access to health care
4. Heart disease
5. Lack of health insurance
6. Overweight/obesity in children
7. Diabetes
8. Unaffordable health care
9. High blood pressure
10. Smoking/Secondhand smoke
11. Unaffordable health insurance
12. Sedentary lifestyles
13. Mental health issues
14. Flu – Seasonal and H1N1
15. Teen pregnancy
16. Poor diets
17. HIV/AIDS
18. Unemployment
19. STDs
20. Communicable diseases
21. Stress
22. New government insurance
23. Air quality
24. Alcohol use
25. Senior citizen issues
26. Pregnancy
27. MRSA

In early 2009, the Davidson Health Alliance Steering Committee met several times to develop a Strategic Plan for the Partnership. At that time, the priority areas were Access to Care, Asthma, Health Promotion, and Mental Health. Based on discussions from the Strategic Planning sessions, Davidson Health Alliance selected the following focus areas:

- Access to Care for the Uninsured
- Mental Health
- Chronic Diseases – asthma, diabetes, heart disease, cancer
- Obesity – including unhealthy eating and sedentary lifestyles
- Tobacco Use

Two of these priorities remained the same (Access to Care and Mental Health) and two are refinements of previous priorities (Chronic Diseases and Obesity). Based on availability of resources and current implementation practices and the potential passing of House Bill 2, the group decided at that time not to focus on Tobacco Use.

The following presents supporting data for each of the four priority groups:

1. Access to Care for the Uninsured – Access to health care was ranked as a significant health concern by both the Community and Stakeholders. According to 2005 data, 16.3% of Davidson County residents age 0-64 are uninsured. According to the Executive Director of Davidson Medical Ministries Clinic, 23% of those age 18-64 are uninsured. According to Lexington Memorial Hospital, approximately 25% of patients presenting at their Emergency Department do not have health insurance.
2. Mental Health – The Community ranked Mental Health as the 16<sup>th</sup> biggest health concern. According to the 2007 BRFSS, 16% of Davidson County residents surveyed reported that they were “currently depressed” at the time of the survey as compared to 9.3% across North Carolina. The Stakeholders ranked Mental Health issues as one of the 5<sup>th</sup> biggest health concerns.
3. Chronic Diseases – asthma, diabetes, heart disease, cancer – Prior to the Strategic Planning sessions, Davidson Health Alliance focused on Asthma as a priority area. This health concern has been expanded to include other chronic diseases. The Community Input survey ranked diabetes as the 4<sup>th</sup> leading health issue, cancer as the 5<sup>th</sup> leading health issue, heart disease as the 8<sup>th</sup> leading health issue, and high blood pressure as the 10<sup>th</sup> leading health issue. The Stakeholder Survey ranked diabetes as one of the 5<sup>th</sup> leading health concerns. The prioritization process ranked cancer as the 2<sup>nd</sup> leading concern, heart disease as the 4<sup>th</sup>, diabetes as the 7<sup>th</sup>, and high blood pressure as the 9<sup>th</sup>. According to the 2007 BRFSS, 13.2% of Davidson County participants indicated they currently have diabetes and 3.3 indicated they are borderline. 29.5% indicated they have high blood pressure and 2.6% indicated they are pre-hypertensive. Heart disease is the leading cause of death in Davidson County; cancer is the second leading cause of death; and diabetes is the seventh. Both breast cancer and prostate cancer have been increasing since 1998. According to Lexington Memorial Hospital Emergency Department data, there were 549 hospital visits due to asthma in 2008; 54 were to children age 18 and younger.
4. Obesity – including unhealthy eating and sedentary lifestyles – According to the Community Input survey, overweight/obesity was ranked as the second biggest health concern. According to the Stakeholder survey, obesity was ranked as the leading health concern. The prioritization process ranked overweight/obesity as the leading concern. Approximately 62% of Community Input survey respondents reported they did not engage in physical activity for at least 30 minutes a day 5 days a week; 67% reported not eating 5 or more servings of fruits and vegetables every day. Even the Stakeholders did not fare much better – 54% reported they did not engage in physical activity for at least 30 minutes a day 5 days a week and 56% reported not eating 5 or more servings of fruits and vegetables every day.

## Section Eight: Next Steps

With the completion of the 2009 Community Health Assessment, Davidson County will use the information collected to conduct programs that will improve community health.

### Davidson Health Alliance

Davidson Health Alliance will develop interventions and strategies to address the four priority health issues. Each of the Davidson Health Alliance work groups will develop work plans for each of these priorities and will, over the next four years, implement these plans in collaboration with community organizations and groups.

### Davidson County Health Department

The Davidson County Health Department will revise its Strategic Plan in August 2010. The information gathered and gleaned through the Community Health Assessment will be reviewed and integrated into the objectives and strategies of the Strategic Plan.

The health department will continue to analyze data from the Quality of Life survey to provide the community, agencies, and local governments with information for strategic planning, program planning, and grant applications. The survey design will enable health department staff to analyze data by a number of variables, including the gender, age, education level, and residential location of survey respondents.

### Community Health Assessment Dissemination Plan

The results of the Community Health Assessment will be distributed to the community through several vehicles.

- The health department will post the assessment on its web site.
- The health department will contact local media to do a news article on the assessment: why it was done; how it was done; what we will be doing with the information; etc.
- Presentations will be given to the Davidson County Commissioners, Davidson County Board of Health, and Davidson Health Alliance Steering Committee.
- All community leaders that participated in the Stakeholder survey and/or the prioritization process will receive a copy of the assessment to put on display at their agency.
- A copy of the assessment will be sent to each branch of the Public Library to be displayed for the public to read.