

Randolph County Community Health Needs Assessment

2013
Final Report

Prepared by:

**The Randolph County Health Department and Randolph Hospital.
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Kiwanis Club (Golden K's)	Randolph County Senior Adults Association
Latino Coalition of Randolph County	Randolph Family Health Care at MERCE Health Center
Liberty Early Childhood Center	Randolph Hospital
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Introduction

The 2013 Randolph County Community Health Needs Assessment process is coordinated by the Randolph County Health Department, with support from Randolph Hospital. Additional assistance is provided by community institutions, businesses, agencies and individuals with an interest in improving the health status of Randolph County residents. The purpose of the Community Health Needs Assessment is to:

- Evaluate the health status of each county in relation to the State's health objectives as well as peer counties;
- Identify and prioritize health issues that may pose a threat to the health of the community;
- Develop strategies to address priority community health concerns.

The 2013 Randolph County Community Health Needs Assessment represents a partnership between Randolph County Health Department, Randolph Hospital, community institutions, businesses, agencies and individuals with an interest in improving the health status of Randolph County residents.

Methodology, Data Collection & Analysis

In the fall of 2012, the Randolph County Health Department joined with Randolph Hospital, to establish the assessment framework and a timeline for data collection and analysis, prioritization of health concerns and development of action plans. Data collection and analysis took place from January - July 2013.

Primary data was collected from the community in three ways: distribution of paper surveys mailed randomly to residents across the county, an internet survey and a community leader questionnaire.

Primary Data

2013 Randolph County Health Opinion Survey

Telephone surveys have been conducted in years past, however, because many people now replace landline phone service with cell phones or use unlisted phone numbers, it was felt that a phone survey would not be representative of the county. With technology continuing to advance, more of an emphasis was placed on on-line surveys although, paper surveys were still an important tool.

Surveys were mailed to residents across the county using a random sample method. Through utilization of Randolph County's address database, every fiftieth (50th) address was randomly selected. Over five hundred (525) surveys, including a self-addressed, stamped envelope were mailed to selected addresses.

In addition to the mailed surveys, they were also distributed to agencies and organizations within the county using the convenience sample method. Such agencies included: Randolph Community College,

Randolph County Senior Adults Association, Liberty Early Childhood Center, Randolph County Partnership for Children, the Latino Coalition of Randolph County and several churches. All surveys distributed were in both English and Spanish. Of the 3,500 total distributed surveys, 1,570 were returned for a response rate of 45%.

Survey responses were analyzed for frequency of response using Survey Monkey. (It should be noted that not every respondent answered every question.) The surveys were not fully completed by all individuals, resulting in missing data on various questions.

Internet Survey

In collaboration with the Randolph County Government IT, an internet survey was developed using Survey Monkey. The internet survey was accessible through the Randolph County Government website. In an effort to promote the internet survey, laminated information cards were displayed in both English and Spanish at various businesses, which included church bulletins.

Community Leader/Service Provider Questionnaires

To ensure a solid representation from key sectors, the stakeholder questionnaire was sent to department heads and directors from various agencies or representatives within the county. Survey results are included in the appendix section of this document.

Secondary Data

The major source for secondary data in the 2013 Randolph County Community Health Assessment included:

- North Carolina State Center for Health Statistics
- North Carolina Department of Health & Human Services
- LINC: Log into North Carolina
- Cecil G. Sheps Center for Health Services Research
- US Census Department
- United States Census Bureau
- United States Department of Commerce

As applicable, Randolph County statistics have been compared with state statistics as well as four peer counties. These peer counties were identified based upon age, race and poverty characteristics, and are selected from a group of counties within the same population range as the subject county.

For Randolph County, the following four peer counties were identified: Craven, Davidson, Harnett and Johnston. Therefore, in addition to North Carolina statistics, these four counties were used for comparison throughout the assessment process.

Selection of Identified Health Priorities

In August 2013, Advisory Team members met to identify leading community health problems in Randolph County. During the meeting, members reviewed health concerns identified through surveys as well as the information gathered through secondary research. After much discussion, the priority health concerns identified for Randolph County were:

1. Community Health Behaviors

Focus area: Physical Activity

Action Plan: Addressing Overweight/Obesity through the expansion of joint-use-agreements throughout Randolph County for the use of physical activity resources.

2. Community Health Behaviors

Focus area: Nutrition

Action Plan: Addressing Overweight/Obesity by partnering with at least one food retail store and Randolph County Communities in Schools to provide and promote healthier food and beverage options.

3. Reducing Substance Abuse

Focus area: Tobacco Use

Action Plan: Reducing tobacco use and creating more tobacco-free areas.

4. Community Issues

Focus area: Access to Care

Action Plan: Decreasing the number of uninsured individuals and providing education regarding the variety of insurances available.

It is important to note that based on primary data results, employment opportunities, affordable housing, crime and availability of positive teen activities were major concerns of the public. However, the Advisory Team decided these were not areas in which Randolph Hospital or the Randolph County Health Department could impact. The top five responses to each category are presented in the analysis below.

Community Health Behaviors	Unhealthy Behaviors	Community Issues	Human Services Issues
Overweight/Obesity	Drug Abuse	Employment Opportunities	Health Insurance Coverage
Diabetes	Alcohol Abuse	Drug Use	Mental Health
Heart Disease/Heart Attack	Lack of Exercise	Affordable Housing	Dental Care
Stroke	Poor Eating Habits	Availability of Positive Teen Activities	Medicaid/Medicare
Teen pregnancy	Smoking/Tobacco Use	Crime	Routine Healthcare

Assessment Dissemination Plan

Both Randolph County and Randolph Hospital websites will post the Community Health Needs Assessment and Executive Summary. The assessment will also be in all seven Randolph County libraries. Thirty data books and 500 executive summaries will be ordered and printed for distribution throughout the community.

Section One

Demographic Data
Socioeconomic Data
Leading Causes of Death Data

County Profile

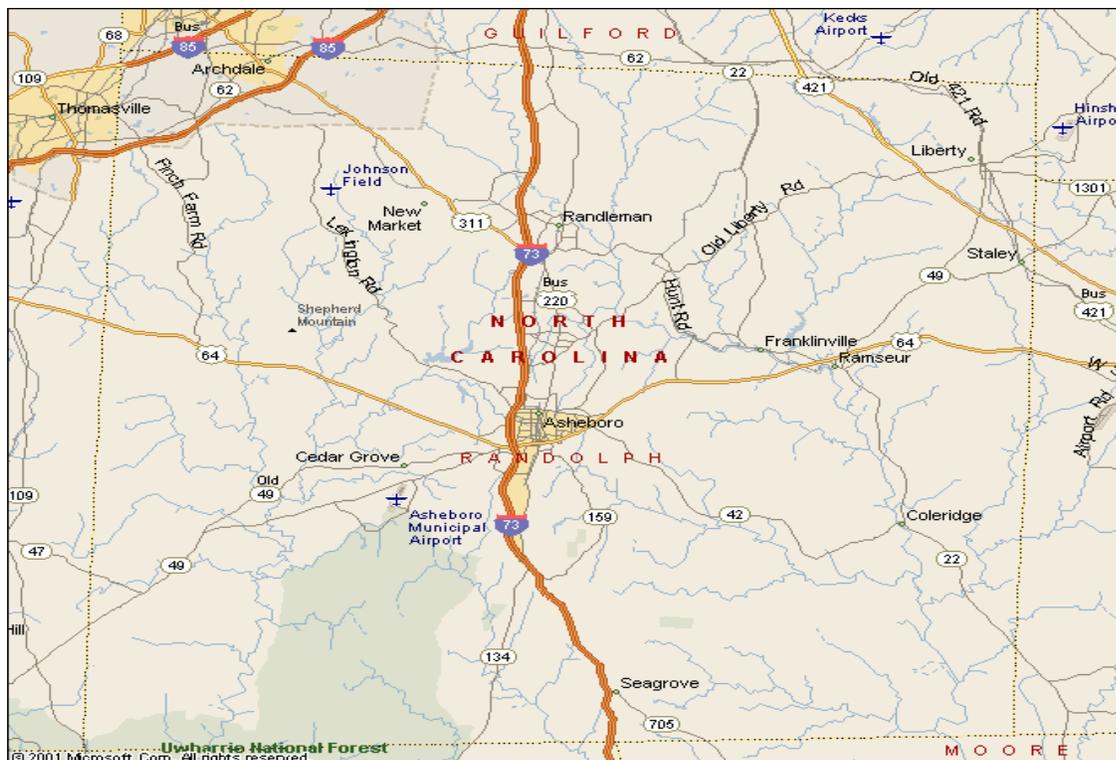
Location and Geography

Randolph County, located in the heart of North Carolina offers rich farmland, historic rivers and is home to the Uwharrie Mountains, one of the world's oldest mountain ranges. It is the 11th largest county in North Carolina and has the 19th highest population in the state. The towns of [Archdale](#), [Asheboro](#), Franklinville, [Liberty](#), [Ramseur](#), [Randleman](#), Seagrove, Staley and [Trinity](#) are located within Randolph County with Asheboro being the county seat. Asheboro is approximately 70 miles from Raleigh and Charlotte.

Randolph County is bordered by Alamance, Chatham, Davidson, Guilford, Montgomery and Moore Counties and is easily accessible by major highways. US Highway 220/Interstate 73 and 74 divide the county almost equally into eastern and western portions, while US Highway 64 divides the county into northern and southern portions. In addition, Randolph County is conveniently accessible from Interstates 85 and 40.

The physical area of Randolph County is 790 square miles. County residents enjoy a moderate year-round climate. The average annual rainfall is 44.8 inches and the average annual temperature is just over 60 degrees.

County Map



Leisure

Although Randolph County is a part of the largest metropolitan area located entirely within North Carolina, it is still small-town living at its best. Randolph County has an array of leisure activities for individuals and families to enjoy. Among the many are the NC Zoo, Seagrove Pottery, the Richard Petty Museum and Caraway Speedway. In addition, for those interested in outdoor adventure, Randolph County offers a variety of perfect settings to choose from.

The NC Zoo

The nation's largest walk-through natural-habitat zoo features more than 1,100 animals from Africa and North America. Popular exhibits include the R.J. Reynolds Forest Aviary and the Endangered Species Carousel located in Junction Plaza. Interpretive galleries and interactive signage provide for an informative self-guided tour. In 2008, the Watani Grasslands Reserve opened, featuring up-close views of the largest land animals on the planet; elephants and rhinos. In June, the Acacia Station Giraffe Feeding Deck opened. It has beautiful treetop views and is a great place for seeing and feeding the large herd of giraffes. In 2012 construction began on the renovation and expansion of a larger Polar Bear Exhibit and is expected to be completed and opened in 2014.

Seagrove Pottery

Seagrove is considered the pottery capital of the world by many. Artisans create handcrafted pottery in the same tradition that began more than 200 years ago. With nearly 100 shops and galleries scattered throughout the area, you'll find everything from traditional tableware to collectible art pieces.

Richard Petty Museum

This museum showcases the career of the King of NASCAR from the early "dirt" days to the present. Cars, trophies and awards honoring the 7-Time Winston Cup Series Champion are showcased throughout.

Caraway Speedway

This is a .455 mile paved oval NASCAR-sanctioned track that features weekly racing events. Regarded as one of the most competitive and best-maintained short tracks in NASCAR's Atlantic Region, it hosts a number of regular divisions of weekly racing, including late model and limited stocks, as well as a super truck division.

Outdoor Activities

Leave the stress of the city behind at [Goat Lady Dairy](#) and the [Pisgah Covered Bridge](#), [Rising Meadow](#) and [Sunny Slopes Farms](#), [Routh Horse Ranch](#), the [Birkhead Mountains Wilderness Area](#) and an assortment of local farms and orchards. There's also [Zimmerman Vineyards](#), located on 102 acres at the foot of Mt. Shepherd, offering fabulous weekend tours and wine tastings, and the thrill and excitement of a lifetime on [Richland Creek Zip Line](#).

Annual Events

Each year in Randolph County, annual festivals and events are held. Among those are: Archdale's Bush Hill Heritage Festival, Asheboro's Fall Festival and Street Carnival, Liberty's Antique Festival, Ramseur's Fall Festival, Randleman's NASCAR Day Festival and Seagrove's Pottery Festival.

Education

There are two school districts within Randolph County: Asheboro City and Randolph County. The Asheboro City School (ACS) System is comprised of nine schools; five elementary, two middle, one high school and one Early Child Development Center. Included in the ACS System is the Asheboro High School (AHS) Zoo School, which opened in August 2008. The AHS Zoo School is a science focus program for tenth, eleventh and twelfth grade students. Learning takes place in a real-life setting on the grounds of the North Carolina Zoo. Students have access to a 1,500 acre world-class facility ideal for environmental and biological exploration. Beyond science, the zoo offers relevant experiences in marketing, retail, hospitality, art and much more.

The Randolph County School (RCS) System contains 31 schools; 17 elementary, seven middle and eight high schools. Included in the eight high schools is the Randolph County Early College High School (RCECHS), which opened in August 2006 and is located on the campus of Randolph Community College. The RCECHS is one of 33 Early College High Schools within North Carolina.

ACS 2012 District Enrollment = 4,716

White	40.3%
Black	15.2%
Hispanic	38.7%
Asian	1.5%
American Indian	0.3%
Multi-Racial	3.8%
Male	49.7%
Female	50.2%

RCS 2012 District Enrollment = 18,516

White	78.09%
Black	3.92%
Hispanic	13.71%
Asian	1.16%
American Indian	0.65%
Multi-Racial	2.45%
Male	51.9%
Female	48.0%

Randolph Community College (RCC) is a public, two-year, comprehensive, community college established to serve the citizens of Randolph County. The College began operation in 1962 as a joint city-county industrial education center under the direction of the Trades and Industrial Division, Department of Vocational Education. The North Carolina legislature in 1963 established a separate system of community colleges and the College became part of that system.

Since opening its doors in 1962 as Randolph Industrial Education Center, the College has seen many changes including:

- Three name changes—Randolph Technical Institute, Randolph Technical College and Randolph Community College
- Facilities expansion—from 33,000 square feet to more than 384,000 square feet in three locations (Asheboro Campus, Archdale Campus and the Emergency Services Raining Center)
- Enrollment growth—from 75 students in 1962 to more than 3,700 credit and more than 9,000 noncredit students in the 2010-2011 academic year.

RCC offers Associate in Applied Science and Associate in Arts degrees, vocational diplomas, and certificates by the North Carolina Community College System and the State Board of Community Colleges. Continuing Education curricula include a state-approved Adult High School Diploma program, General

Educational Development program and a variety of preparatory level programs. Degree, diploma, and preparatory programs (including high school) are approved for veterans.

As a member of the North Carolina Community College System, Randolph Community College offers occupational and adult education to meet the educational needs of the youth and adults served by the College. The College accepts men and women for enrollment in a wide variety of subjects designed to meet the changing technology and complex social development of its community.

The University Center of Randolph County was established in 2008 and is a collaborative effort between Randolph Community College, Pfeiffer University, Greensboro College and Salem College. Courses are offered in particular disciplines at significantly reduced tuition rates, creating an opportunity for students to complete a baccalaureate degree without leaving the county. In 2012 Winston-Salem State University, Carolina Graduate School of Divinity and NC A&T State University joined the University Center of Randolph County.

Transportation

Randolph County does not have a public means of transportation, however, there are two forms of alternative transportation available, Regional Coordinated Area Transportation System (RCATS) and the Piedmont Authority for Regional Transportation (PART).

RCATS is a program provided by the Randolph County Senior Adult Association (RCSAA). Initially started in 1979, the RCSAA became lead agency for community transportation in 1994. RCATS began providing Coordinated Community Transportation Program (CTP) services for Randolph County in 1995 and then became a Regional CTP transportation provider program in 2004. It proudly serves all citizens of Randolph County with public transportation needs on an advance reservation basis. As needed, transportation out of the county is also provided.

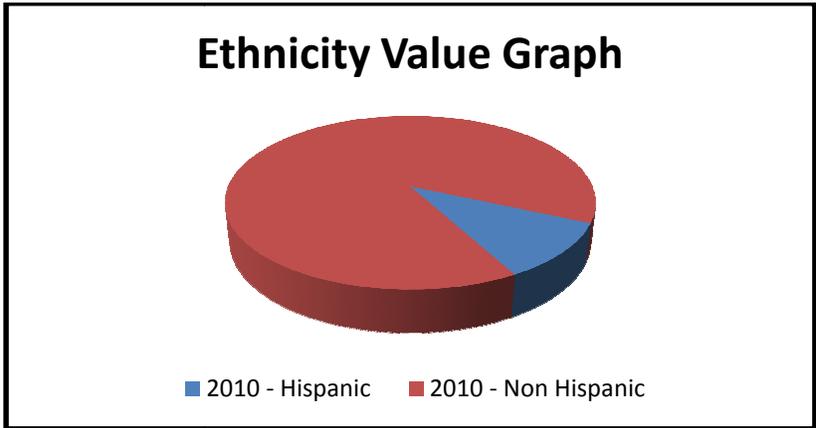
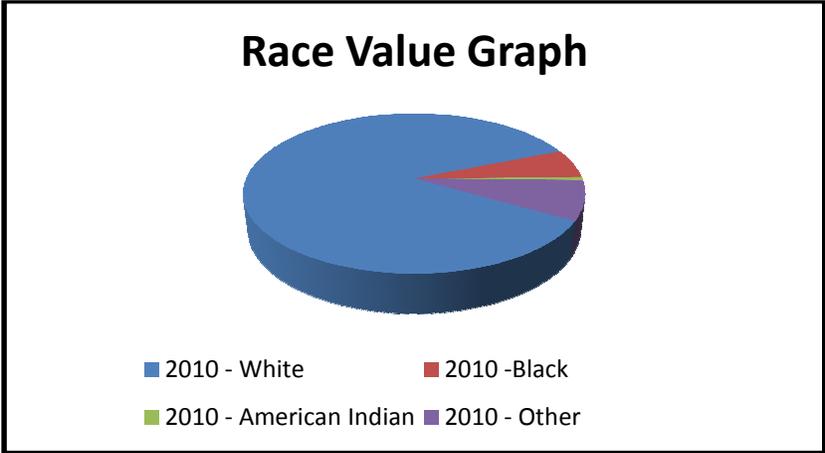
On June 30, 2008, the Piedmont Authority for Regional Transportation (PART) expanded the PART Express services to Randolph County. The Randolph County route serves the US 220 corridor from Greensboro to Asheboro with stops at Randolph Community College, Randolph Hospital, the Randleman area and continues into Greensboro. With gas prices hovering between \$3.50 and \$4.00 a gallon, this has proven to be an important asset to Randolph County, allowing residents who commute to and from work and/or school an alternative transportation venue.

Population Demographics

The US Census Bureau reports a population of approximately 141,860 in Randolph County for the year 2010. This is an increase of .4% from the year 2008 when the population was reported to be approximately 141,186. The population for North Carolina in 2010 was 9,535,483 which is an increase of 3.3% from 2008.

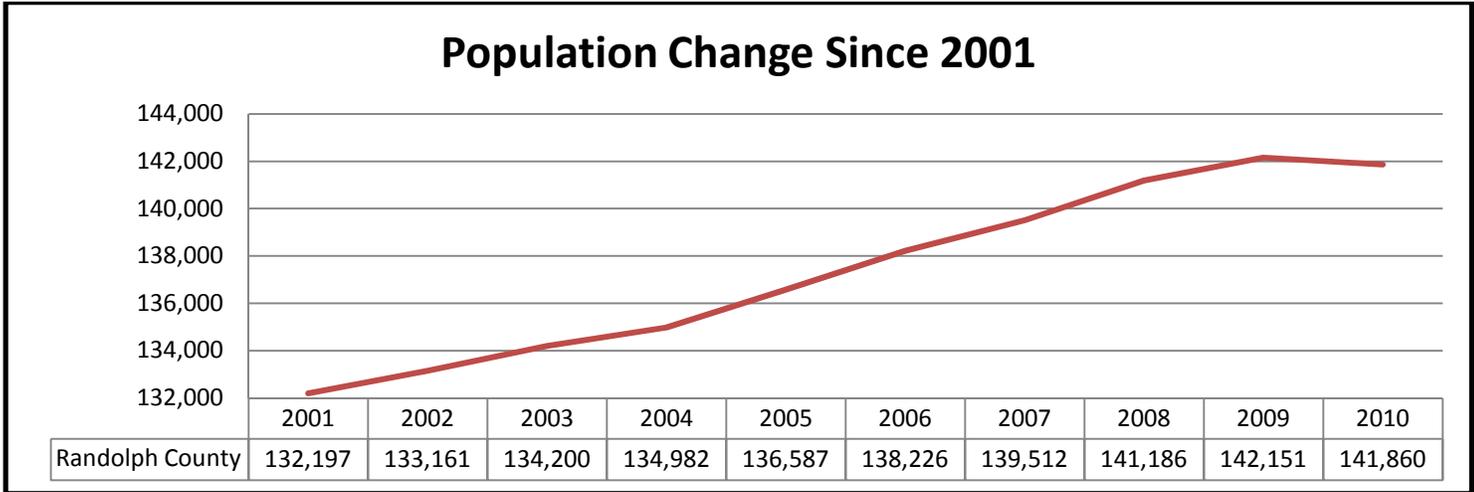
Similar to North Carolina as a whole, the population of Randolph County is divided almost equally between males (49.3%-RC, 48.7%-NC) and females (50.7%-RC, 51.3%-NC). Residents of Randolph County are predominately White (81.3%), followed by Hispanic (10.4%) and Black (5.6%). The Hispanic population in Randolph County (10.4%) is higher when compared to North Carolina (8.4%) as a whole.

The following graphs depict the race value and ethnicity value of residents in Randolph County. In 2010, Randolph County had 121,169 White residents, 14,698 Hispanics, and 8,176 Black residents. The Hispanic population in 2010 was 14,698 which was approximately 10% of the total population in Randolph County. North Carolina, as a whole in 2010, had a Hispanic population of only 8.4%.



Source: United States Census Bureau. Randolph County. 2010

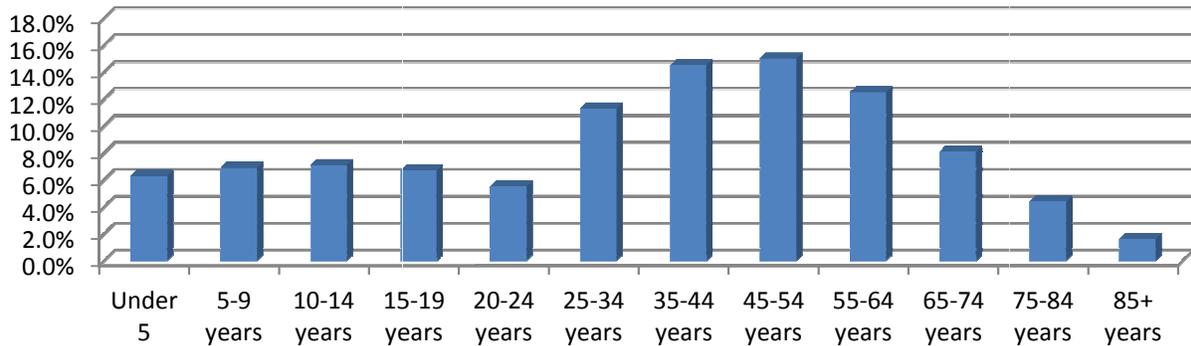
http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=DEC_10_DP_DPDP1



Source: United States Census Bureau. <http://www.census.gov/popest/data/counties/totals/2011/CO-EST2011-01.html>

- Since 2001, Randolph County’s population has been on a steady incline except for a slight dip in 2010 and 2011.

Randolph County Population Distribution by Age (2010)

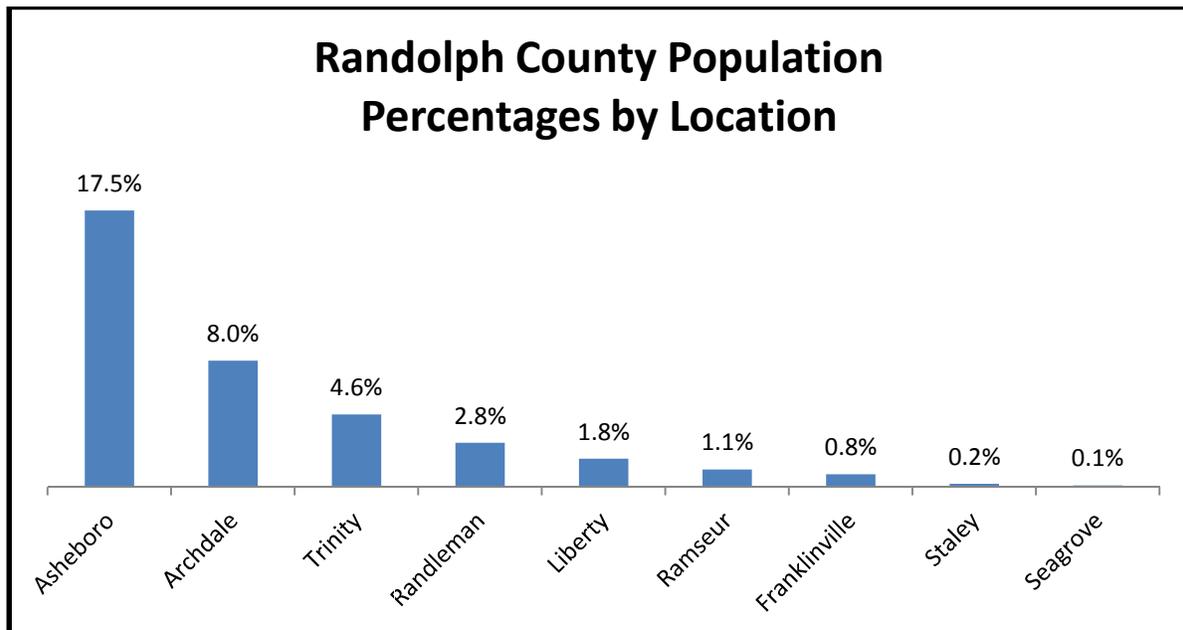


Source: United States Census Bureau. Randolph County. 2010.

http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=DEC_10_DP_DPDP1

- The highest percentage of residents in Randolph County are between the ages of 45-54, where as the lowest percentage of residents are in the 85+ years.

Randolph County Population Percentages by Location



Source: United States Census Bureau. 2010

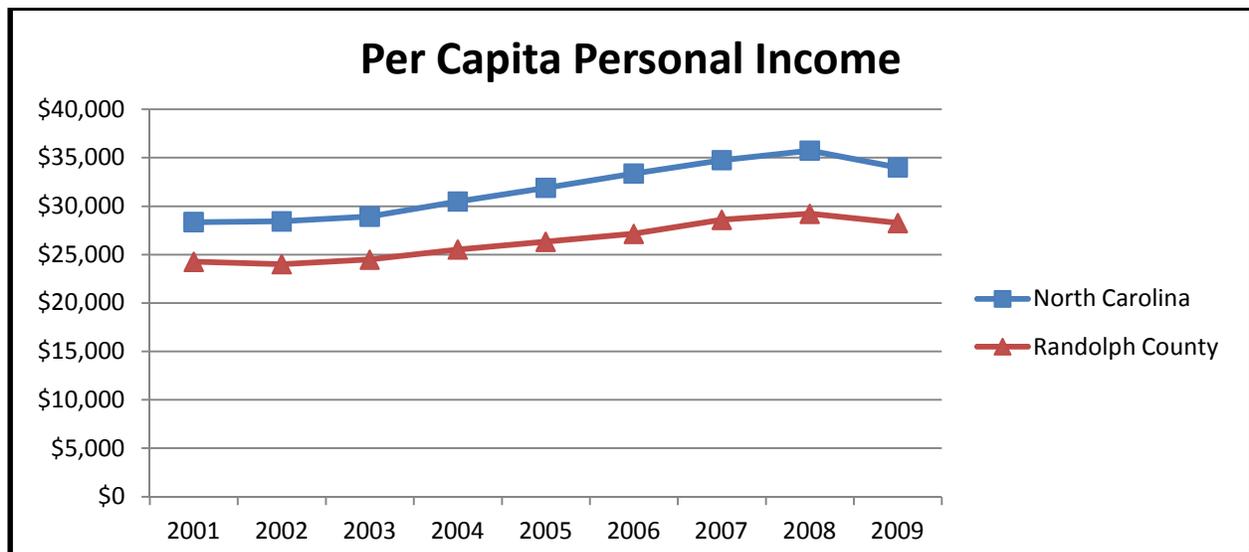
http://factfinder2.census.gov/faces/nav/jsf/pages/community_facts.xhtml

- Among each of the nine municipalities, Asheboro and Archdale have the highest percentage of residents.

Socioeconomic Profiles

Overview

The US Department of Commerce, Bureau of Economic Analysis reports that the Per Capita Personal Income for Randolph County rose from \$24,255 in 2001 to \$28,262 in 2009. Three of Randolph's peer counties are below North Carolina's level for Per Capita Personal Income; Davidson, Harnett and Johnston. Craven County is slightly above the North Carolina's level.



Source: US Department of Commerce, Bureau of Economic Analysis. 2011. Per Capita Personal Income.
<http://www.bea.gov/iTable/iTable.cfm?reqid=70&step=1#reqid=70&step=26&isuri=1&7023=7&7024=Non-Industry&7001=720&7090=70&7029=20&7031=37000&7025=4&7022=20>

Ability/Disability

Figures from the US Census Bureau indicate that 13.1% of the people in Randolph County aged five and older have a disability of some kind, as compared to North Carolina's rate at 13.2%.

Medicaid/NC Health Choice Eligibility

Percent Medicaid Eligible as % of Population			
Residence	2008	2009	2010
North Carolina	15%	16%	17%
Randolph	17%	18%	19%
Craven	15%	15%	15%
Davidson	16%	17%	17%
Harnett	16%	16%	17%
Johnston	16%	16%	17%

Source: North Carolina Department of Health and Human Services. North Carolina Division of Medical Assistance.

Percent Medicaid Eligible as % of population.

<http://www.ncdhhs.gov/dma/countyreports/index.htm>

- As evidenced in the chart above, a similar trend of those eligible for Medicaid can be seen in all five counties and in North Carolina.
- Randolph County, as well as the four peer counties has increased in the percentages of those eligible for Medicaid since 2008. Increases are also occurring at the state level.
- The majority of Medicaid Assistance in Randolph County is given to qualifying infants and children, followed by TANF (Temporary Assistance for Needy Families, and the disabled population.

NC Health Choice Eligibilities by County				
Residence	Dec. 2009	Dec. 2010	Dec. 2011	Dec. 2012
North Carolina	132,273	137,800	146,070	151,745
Randolph	2,444	2,511	2,666	2,853
Craven	1,166	1,300	1,302	1,403
Davidson	2,710	2,907	2,953	3,046
Harnett	1,603	1,712	1,828	1,921
Johnston	3,078	3,272	3,645	3,741

Source: North Carolina Department of Health and Human Services. North Carolina Division of Medical Assistance.

NC Health Choice Eligibilities by County.

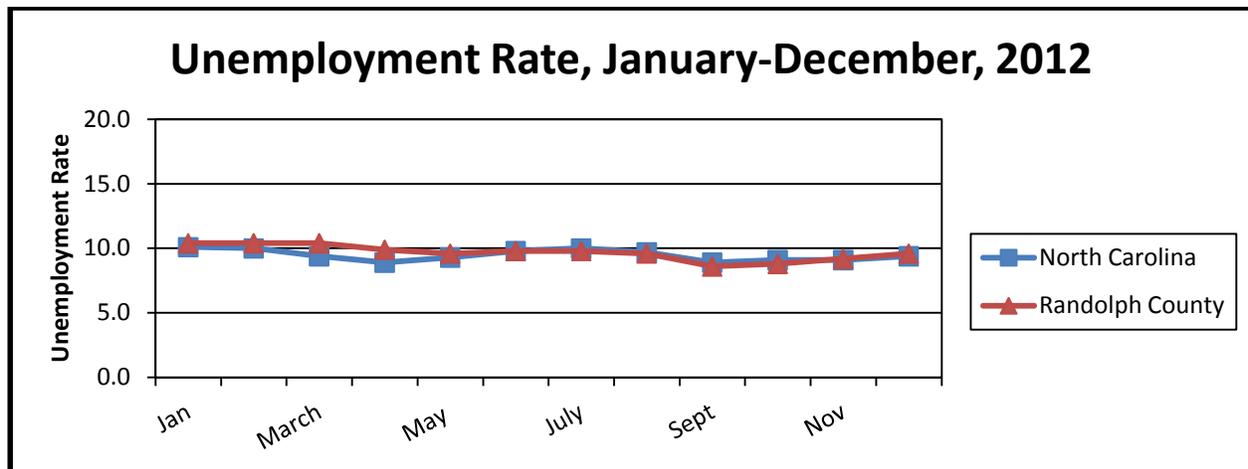
<http://search.usa.gov/search?utf8=%E2%9C%93&sc=0&query=NC+active+health+choice+clients+by+county+reported&m=false&affiliate=ncdhhs&commit=Search>

- According to the chart above, out of the four per county comparisons, Craven County has the lowest number of NC Health Choice Eligibilities; whereas Johnston County had the highest.

Annual Unemployment Rates for Randolph, Peer Counties and North Carolina				
Residence	2009	2010	2011	2012
Randolph	11.0	11.1	10.4	9.6
Craven	10.2	10.8	10.7	9.7
Davidson	12.6	12.7	11.3	10.2
Harnett	11.2	11.4	11.4	10.8
Johnston	9.7	10.0	9.5	8.4
North Carolina	10.4	10.8	10.2	9.5

Source: US Department of Labor, Bureau of Labor Statistics. 2009-2012. Annual Unemployment Rates.
<http://data.bls.gov/cgi-bin/dsrv>

- The annual unemployment rate has remained relatively constant except for 2012 which saw a decrease in all counties and North Carolina.



Source: US Department of Labor, Bureau of Labor Statistics. 2012. Annual Unemployment Rates.
<http://data.bls.gov/cgi-bin/dsrv>

Percent Estimate of Uninsured, Age 0-64 by County of Residence, 2008 – 2009

Residence	% Estimate
North Carolina	19.7%
Randolph	19.5%
Craven	19.6%
Davidson	18.4%
Harnett	20.3%
Johnston	20.0%

Source: North Carolina Department of Health and Human Services. North Carolina Division of Medical Assistance.

Percent Estimate of Uninsured Age 0-64 (2005).

<http://www.ncdhhs.gov/dma/countyreports/>

- When compared to each of the four peer counties, Randolph is on the lower end along with Davidson and Craven on percent estimate of uninsured people age 0-64.

Educational Attainment

- According to the 2007-2011 US Census Bureau reports, only 13.8% of Randolph County residents have a Bachelor’s degree or higher, as compared to the state rate of 26.5%. Just over 76.8% of Randolph County residents are high school graduates compared to the 82.2% of total North Carolina residents.
- According to the State Board of Education Department of Public Instruction, high schools in North Carolina reported a dropout rate of 3.01%, a 12.2% decrease from the 3.43% rate reported from the previous year.
- Lead Educational Agencies (LEAs) reporting the highest dropout rates were Person, Vance, Halifax, Roanoke, Rapids City, Bladen, **Thomasville City (in Davidson County)**, Hickory City, Edgecombe, Newton, Conover City, and Nash-Rocky Mount.
- The largest 3-year decreases in high school dropout rates were seen in Clinton City, **Randolph County**, Madison, Wilkes and Alleghany.

School Systems	2010-2011 Dropout Rates	2011-2012 Dropout Rates
Randolph County	1.98	1.85
Asheboro City	2.88	4.11

State Board of Education Department of Public Instruction, Consolidated Data Report 2011-2012:

<http://www.ncpublicschools.org>

Leading Causes of Death

Total death rates and cause-specific death rates are expressed as resident deaths per 100,000. Deaths are assigned to cause-of-death categories based on underlying (primary) cause of death from the death certificate.

Randolph County's unadjusted death rate is 921.1, which is 11.2% higher than the state's rate of 827.8. The peer county rates are: Craven=930.7, Davidson=953.9, Harnett=711.2 and Johnston=694.0. Compared to Randolph, Craven County is 1.0% higher and Davidson County is 3.4% higher. Harnett County is 30% lower, while Johnston is 33% lower than Randolph County.

The North Carolina State Center for Health Statistics lists the following as the 10 leading causes of death in North Carolina, Randolph County and the four peer counties. These rates are for all age groups for the 2007-2011 timeframe.

Leading Causes of Death for all ages, 2007-2011

North Carolina	Cause of Death	Rate
1	Cancer	179.7
2	Diseases of the Heart	179.3
3	Chronic Lower Respiratory Diseases	46.6
4	Cerebrovascular Diseases (stroke)	46.0
5	All other Unintentional Injuries	29.2
6	Alzheimer's Disease	29.0
7	Diabetes Mellitus	22.0
8	Nephritis, Nephrotic Syndrome and Nephrosis	18.6
9	Influenza and Pneumonia	17.9
10	Unintentional Motor Vehicle Injuries	15.5
	Total deaths - - all causes	808.4

Randolph County	Cause of Death	Rate
1	Cancer	182.2
2	Diseases of the Heart	179.7
3	Chronic Lower Respiratory Diseases	61.7
4	Cerebrovascular Diseases	43.4
5	All other Unintentional Injuries	33.3
6	Alzheimer's Disease	31.1
7	Diabetes Mellitus	22.4
8	Influenza and Pneumonia	22.0
9	Unintentional Motor Vehicle Injuries	19.5
10	Septicemia	18.8
	Total deaths - - all causes	851.5

Craven County	Cause of Death	Rate
1	Cancer	189.2
2	Diseases of the Heart	175.6
3	Cerebrovascular Diseases	47.0
4	Chronic Lower Respiratory Diseases	43.2
5	All other Unintentional Injuries	30.0
6	Alzheimer's Disease	26.6
7	Nephritis, Nephrotic Syndrome and Nephrosis	22.2
8	Diabetes Mellitus	22.0
9	Influenza and Pneumonia	16.8
10	Septicemia	14.0
	Total deaths - - all causes	809.7

Davidson County	Cause of Death	Rate
1	Diseases of the Heart	209.3
2	Cancer	182.2
3	Chronic Lower Respiratory Diseases	61.3
4	Cerebrovascular Diseases	51.9
5	Alzheimer's Disease	35.1
6	All other Unintentional Injuries	30.7
7	Diabetes Mellitus	22.4
8	Influenza and Pneumonia	23.6
9	Unintentional Motor Vehicle Injuries	19.1
10	Nephritis, Nephrotic Syndrome and Nephrosis	19.0
	Total deaths - - all causes	879.0

Harnett County	Cause of Death	Rate
1	Diseases of the Heart	208.3
2	Cancer	185.9
3	Chronic Lower Respiratory Diseases	54.5
4	Cerebrovascular Diseases	49.3
5	All other Unintentional Injuries	28.1
6	Alzheimer's Disease	27.3
7	Diabetes Mellitus	24.2
8	Nephritis, Nephrotic Syndrome and Nephrosis	22.2
9	Septicemia	17.1
10	Intentional Self-Harm (Suicide)	10.0
	Total deaths - - all causes	879.0

- When compared to the other peer counties and the state, Harnett is the only county that lists intentional self-harm (suicide) as one of the then top causes of death.

Johnston County	Cause of Death	Rate
1	Diseases of the Heart	244.9
2	Cancer	186.6
3	Chronic Lower Respiratory Diseases	43.5
4	Cerebrovascular Disease	43.1
5	All other Unintentional Injuries	31.1
6	Alzheimer's Disease	22.9
7	Nephritis, Nephrotic Syndrome and Nephrosis	22.6
8	Unintentional Motor Vehicle Injuries	22.1
9	Diabetes Mellitus	21.5
10	Influenza and Pneumonia	17.9
Total deaths - - all causes		868.6

Source: NC State Center for Health Statistics. Leading Causes of Death in North Carolina. 2007-2011.
<http://www.schs.state.nc.us/SCHS/data>

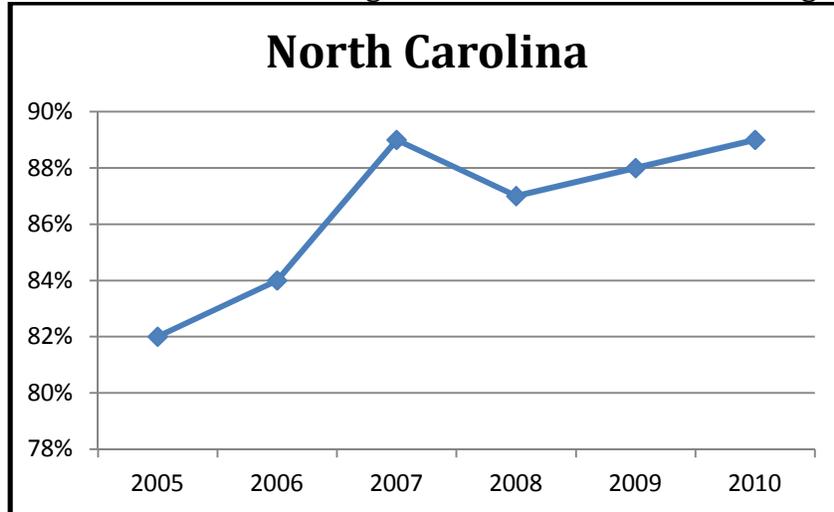
- Cancer and diseases of the heart were the number one and two causes of death in all five counties and the state.
- Chronic lower respiratory disease and cerebrovascular disease ranked either number three or four in each of the counties and the state.

Motor Vehicle Fatalities

Residence	2010	2011
North Carolina	1,320	1,227
Randolph County	21	20
Craven County	6	25
Davidson County	29	24
Harnett County	23	33
Johnston County	26	33

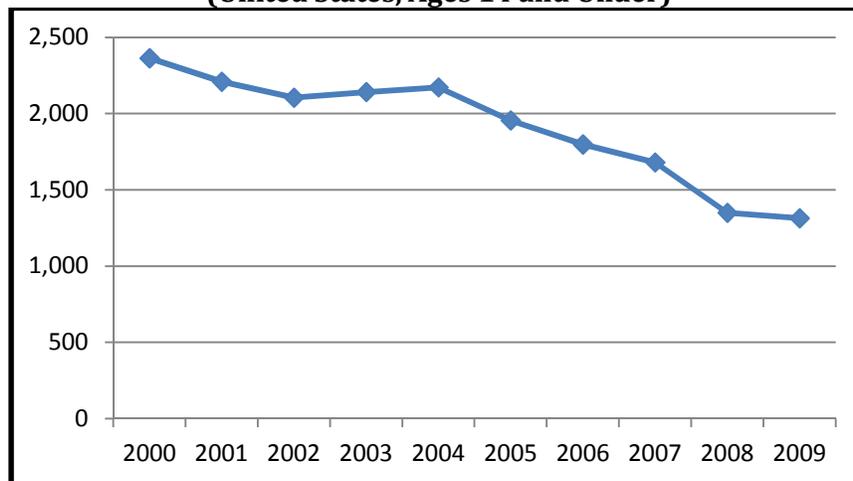
Source: <http://www.nhtsa.gov/FARS>

Child Restraint Use Among All Children Under 8 Years of Age



Source: <http://www.nhtsa.gov/FARS>

2000-2009 Unintentional Motor-Vehicle-Related Deaths Among Children (United States, Ages 14 and Under)



Source: <http://extranet.safekids.org>

Key Facts from Safe Kids USA

- Since 2000, an average of approximately 1,900 children ages 14 and under have died in a motor vehicle-related incident each year.
- In 2009, 1,314 children ages 14 and under died in a motor vehicle-related incident as occupants, pedestrians and cyclists.
- Among child passenger deaths in 2009, 3% of children under age 4 and 42% of children ages 4-7 were unrestrained.
- In 2009, 309 children under age 5 were saved due to proper child safety seat restraint use.
- When installed and used correctly, child safety seats and safety belts can prevent injuries and save lives. Child safety seats can reduce fatal injury by up to 71% for infants and 54% for toddlers (ages 1-4).

Safe Kids Randolph County

Randolph County currently has a Safe Kids Coalition that works to prevent unintentional childhood injury. Safe Kids Randolph County (SKRC) is a member of Safe Kids Worldwide, a global network of organizations dedicated to preventing unintentional injury. The SKRC coalition is comprised of various members from the Randolph County community. Established in 2009 SKRC is led by the Randolph County Health Department.

Safe Kids programs and initiatives deliver hands on education to families in Randolph County. Each Safe Kids program focuses on protecting children and families from a specific injury risk. The three priority areas of SKRC are child passenger safety, fire prevention, and bicycle safety. Randolph County has twelve certified child passenger technicians who are available to assist families with proper car seat installation.

Safe Kids Randolph County has participated in bike rodeos with the City of Archdale and annually partner with NC Cooperative Extension 4H in Randolph County to offer bicycle safety education to all fourth graders in Asheboro City Schools. In addition, Safe Kids Randolph County participates in other events such as Operation Medicine Drop, National Safe Kids Week, International Walk to School Day, and Halloween Safety.

Presently, Safe Kids Randolph County has a discounted priced car seat safety program. Low or no cost child safety seats are offered to families in need. There is a co-pay of \$30.00 for the two types of child safety seats available. Safe Kids Randolph County partners with the North Carolina Buckle Up Program to submit grants for the child safety seats, among other program materials. The following chart shows the number of families reached through this car seat safety program.

Fiscal Year	Number of families reached
2009-2010	101
2010-2011	50
2011-2012	42
2012-2013	45

Changes since 2009 Community Health Assessment

The last Community Health Assessment for Randolph County was conducted in 2009. Leading Causes of Death Data was based on statistics from years 2003-2007. The Leading Causes of Death during the 2003-07 timeframe for Randolph County were, from highest to lowest: diseases of the heart, cancer, chronic lower respiratory diseases, cerebrovascular diseases, all other unintentional injuries, Alzheimer's disease, motor vehicle injuries, diabetes, intentional self-harm (suicide) and septicemia. When compared to the 2007-2011 data, the first and second cause of death were cancer and diseases of the heart, whereas, in the years 2003-2007, heart diseases was the number one leading cause and cancer was second. The third through sixth and tenth causes for Randolph have stayed the same for both timeframes.

Leading Causes of Death in Randolph County by Individual Age Groups, 2007-2011

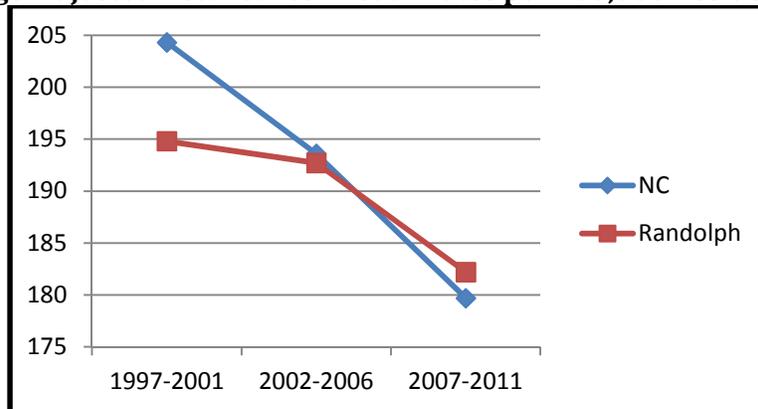
Rank	00-19 Years	20-39 Years	40-64 Years	65-84 Years	85+ Years
1	Conditions originating in the perinatal period	Other Unintentional Injuries	Cancer	Cancer	Diseases of the Heart
2	Congenital Anomalies	Motor Vehicle Injuries	Diseases of the Heart	Diseases of the Heart	Cancer
3	Motor Vehicle Injuries	Suicide	Chronic Lower Respiratory Diseases	Chronic Lower Respiratory Diseases	Alzheimer's Disease
4	Other Unintentional Injuries	Diseases of the Heart	Other Unintentional Injuries	Cerebrovascular Disease	Cerebrovascular Disease
5	SIDS	Homicide	Suicide	Alzheimer's Disease	Chronic Lower Respiratory Disease

Source: NC State Center for Health Statistics. Leading Causes of Death in NC 2007-2011. <http://www.schs.state.nc.us/SCHS/data/lcd/>

- Cancer and diseases of the heart remain the number one and two causes of death for 40-85+ age groups for the 2007-2011 timeframe when compared to the years 2003-2007.
- SIDS is listed as the number five cause of death for 00-19 year olds for the years 2007-2011. It was not listed as one of the top five causes of death during 2003-2007.
- In 20-39 year olds, homicide is one of the top five causes of death for years 2007-2011. It was not listed as one of the top five causes of death during 2003-2007.

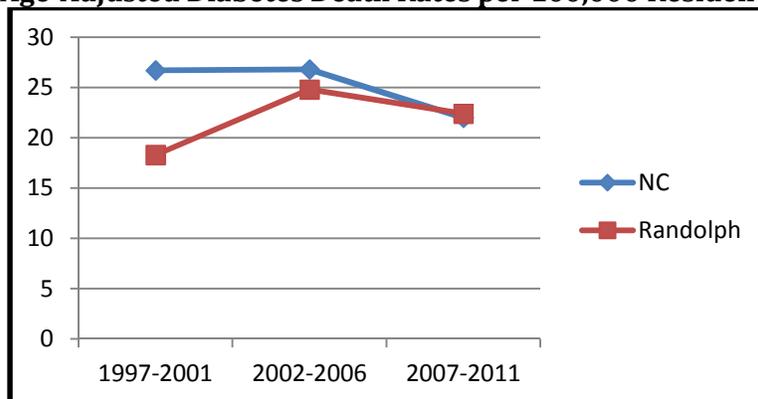
North Carolina and Randolph County Trends in Key Health Indicators

Age-Adjusted Total Cancer Death Rates per 100,000 Residents



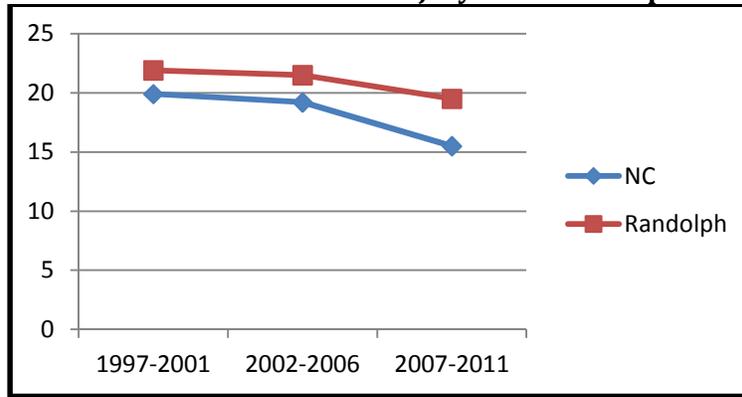
- When comparing Randolph County to the state rates for cancer deaths, Randolph ranks lower for all three timeframes.
- Overall cancer has decreased in Randolph County, the four peer counties and within North Carolina as a whole.
- During 1997-2001, Randolph County's rate was 4.7% lower than the state rate, 0.5% lower during 2002-2006 and 1.4% lower during 2007-2011.
- Harnett County had the highest cancer rate during the years of 1997-2001 and 2002-2006 when compared to the state and four peer counties.

Age-Adjusted Diabetes Death Rates per 100,000 Residents



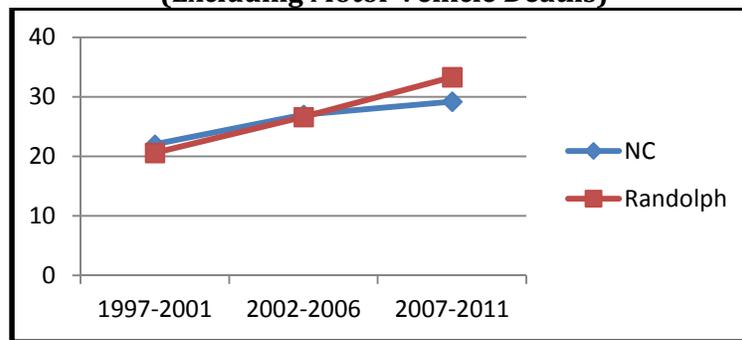
- During 1997-2001 Randolph County's diabetes death rate was 31.4% lower than the state, 7.5% lower during 2002-2006 and 1.8% higher in 2007-2011.
- Randolph County's diabetes death rate was lower than all four peer counties during the 1997-2001 and 2002-2006 timespans.
- Harnett County had the highest diabetes death rate for all three timeframes when compared to Randolph and the other peer counties.

Age-Adjusted Unintentional Motor Vehicle Injury Death Rates per 100,000 Residents



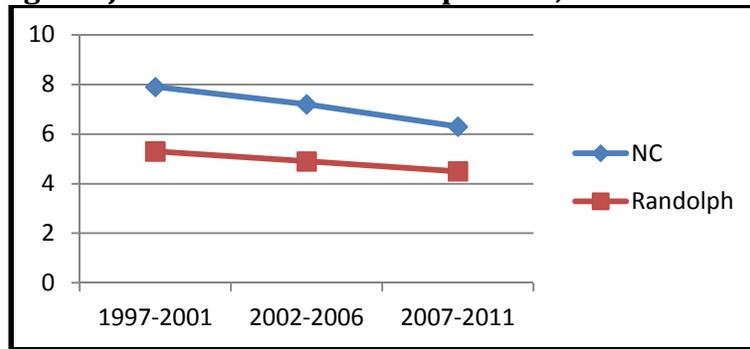
- North Carolina’s unintentional motor vehicle injury death rates were lower than Randolph County’s for all three timespans. (10% in 1997-2001, 12% in 2002-2006 and 26% during 2007-2011)
- Harnett County had the highest death rate (28.4) from unintentional motor vehicle injuries during the years 1997-2001 than the state and the other peer counties. The death rate was 23% higher than Randolph and 43% higher than the states rate.
- Johnston County had the highest death rate (27.3) in 2002-2006 than the state or other peer counties. The death rate was 21% higher than Randolph and 42% higher than the state rate.
- Johnston County also had the highest rate (22.1) during 2007-2011. The death rate was 12% higher than Randolph and 43% higher than the states.
- Craven County had the lowest rates for all three timeframes.

Age-Adjusted Unintentional Injury Deaths Rates per 100,000 Residents (Excluding Motor Vehicle Deaths)



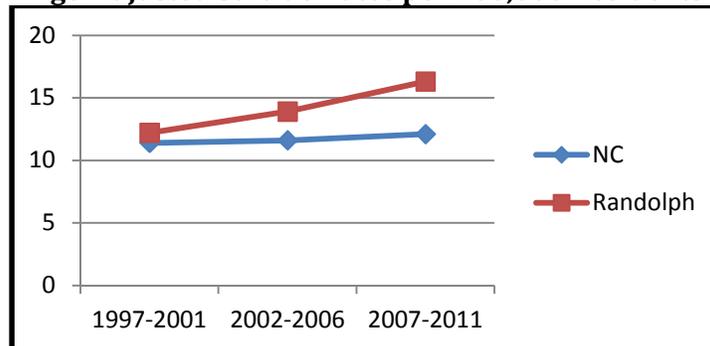
- Randolph County’s death rates for unintentional injuries were lower than the states rate during the years 1997-2001 (6.3% lower) and 2002-2006 (1.5% lower). During 2007-2011, Randolph County’s rate was higher than the states by 14% and higher than all peers.
- Craven County had the highest death rate during 1997-2001. The rate was 15% higher than Randolph and 10% higher than the states.
- Davidson County had the highest death rate during 2002-2006. The rate was 18% higher than Randolph and 20% higher than the states.

Age-Adjusted Homicide Rates per 100,000 Residents



- North Carolina homicide rates were higher than Randolph County's for all three timeframes. (33% higher during 1997-2001, 32% higher during 2002-2006 and 29% higher in 2007-2011)
- Harnett County had the highest homicide rate (10.1) during 1997-2001 when compared to the state and the other peer counties. Harnett's rate was 48% higher than Randolph's and 28% higher than the state.
- The state as a whole had a higher rate of homicide during 2002-2006 than any of the peer counties.
- Harnett County's homicide rate for 2007-2011 was higher than the other peer counties and the state. The rate was 40% higher than Randolph County's and 19% higher than the state.

Age-Adjusted Suicide Rates per 100,000 Residents



- Randolph County's suicide rates were higher than the states for all three timespans. (7% higher in 1997-2001, 20% in 2002-2006 and 35% in 2007-2011)
- Davidson County had the highest rate of suicide (12.3) during 1997-2001. The rate was only slightly higher than Randolph's at 0.8% and 8% higher than the state.
- Both Davidson and Randolph's rates were the highest during 2002-2006, at 13.9.
- Randolph had the highest rate of suicide during the 2007-2011 timeframe.

Section Two

Health Professional Ratios

Health Professional Ratios

The Cecil G. Sheps Center for Health Services Research houses the North Carolina Health Professionals Data System which lists the following rates for Health Professionals in Randolph County, the state, as well as our peer counties: Craven, Davidson, Harnett and Johnson for 2011. All figures listed are per 10,000 population.

The rate for Randolph County Health Professionals is less when compared to the state and most of its peer counties. The exceptions to this are in the fields of Dental Hygienists and Physical Therapist Assistants where we are comparable to the state and two of our peer counties.

Significant areas for Randolph County that are less than the state rate are listed below. The State Center for Health Statistics (SCHS) criteria is defined as more than 15% difference between rates:

- Chiropractors over 31% less
- Dentists over 39% less
- Licensed Practical Nurse over 27% less
- Nurse Practitioners over 51% less
- Optometrists over 18 % less
- Pharmacists over 50% less ** and Lowest Among All Peer Counties
- Physical Therapist Assistants over 28% less
- Physical Therapists over 48 % less **
- Physician Assistants over 52% less **
- Physicians over 57% less
- Podiatrists over 66% less **
- Primary Care Physicians over 41% less
- Psychologists over 95% less **
- Registered Nurses over 57% less
- Respiratory Therapists over 65% less ** and Lowest Among All Peer Counties
- Psychological Associates over 55% less **
- Occupational Therapists over 67% less ** and Lowest Among All Peer Counties

**** Indicates Randolph's rate is >15% less than 2 or more of its peer counties**

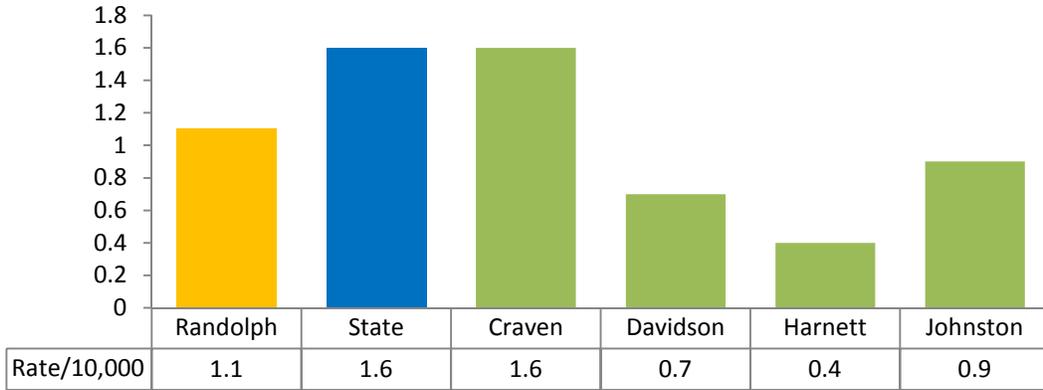
Source: Cecil G. Sheps Center for Health Services Research

Why is this information important?

Access and utilization of health care is affected by many variables including the availability of health professionals. In Randolph County the number of health professionals has not kept pace with the state rates. This is not an exception, but more a part of the common situation that exists in many communities. Randolph did have comparable rates in the area of Dental Hygienists.

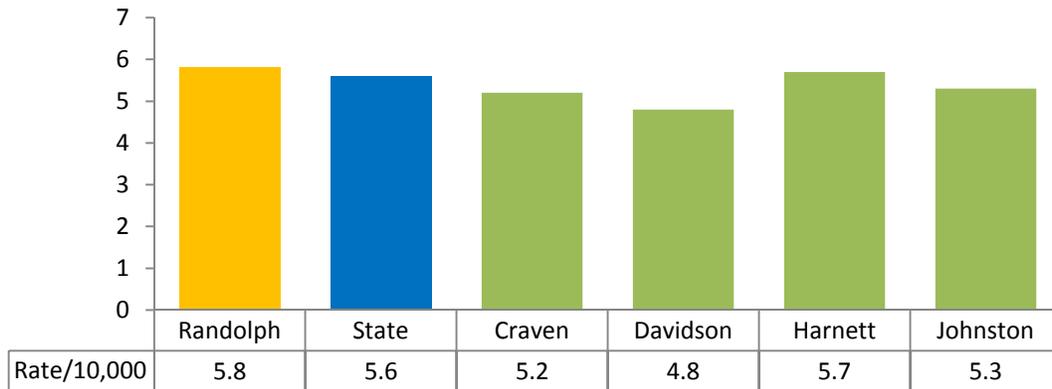
Randolph County has one hospital although the county has seen an increase in emergency service facilities, with several new urgent care offices opening in the past few years. The concept of using the emergency room for primary care has far reaching implications, translating into cost to patients, the hospital and the community. By increasing the number of health professionals and improving access, we will be able to offer timely, quality health care for the citizens of Randolph County that improves the quality of life.

Chiropractors

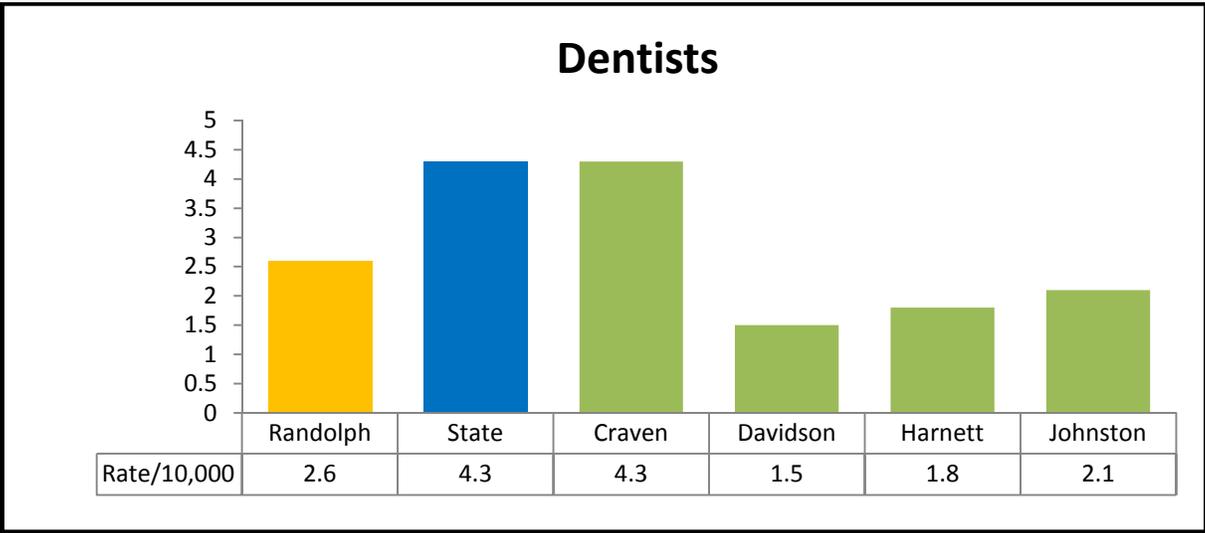


Source: 2011 North Carolina Health Professionals Data System

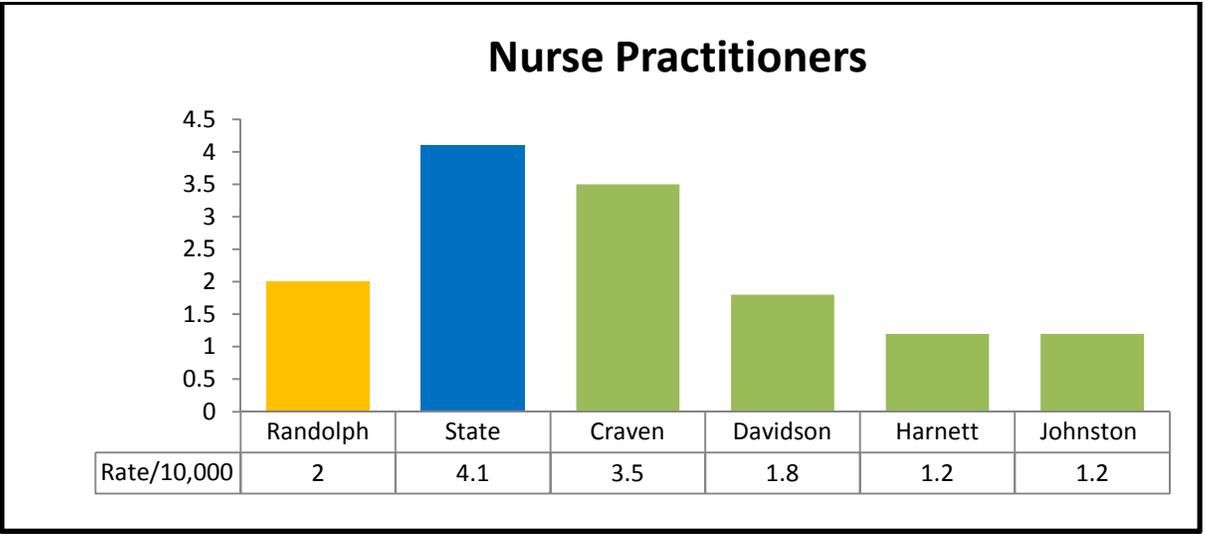
Dental Hygienists



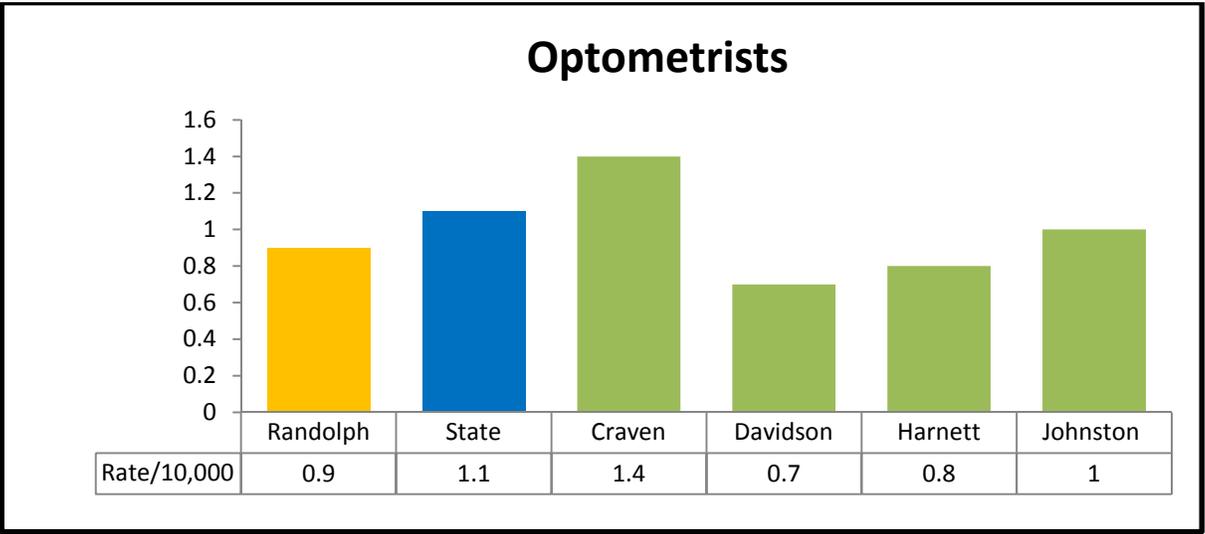
Source: 2011 North Carolina Health Professionals Data System



Source: 2011 North Carolina Health Professionals Data System

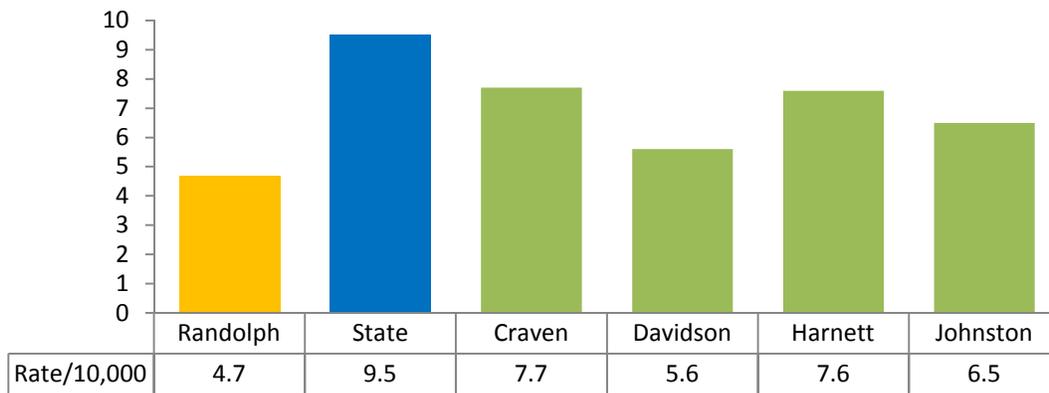


Source: 2011 North Carolina Health Professionals Data System



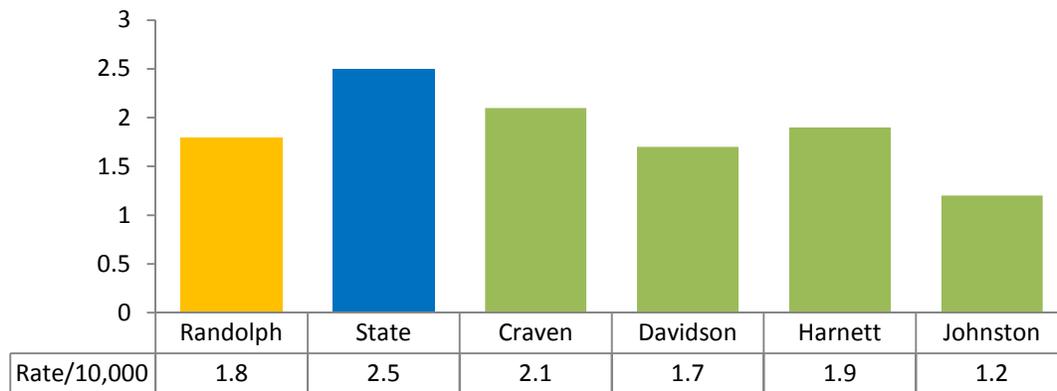
Source: 2011 North Carolina Health Professionals Data System

Pharmacists



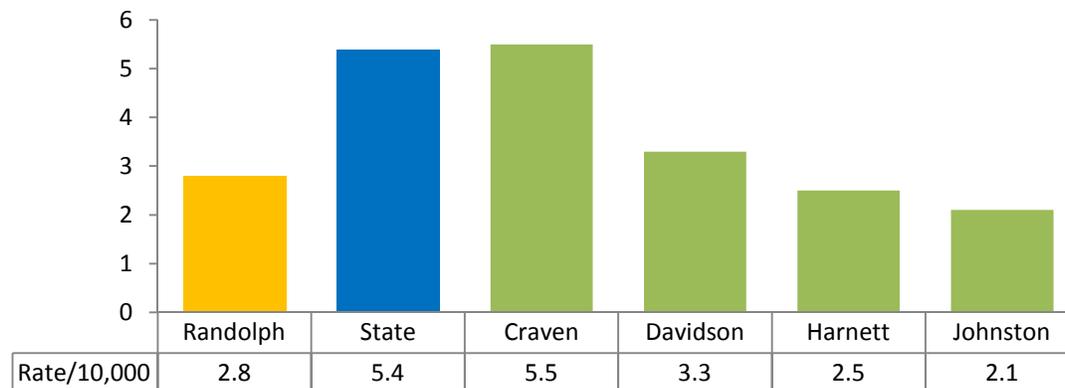
Source: 2011 North Carolina Health Professionals Data System

Physical Therapy Assistants



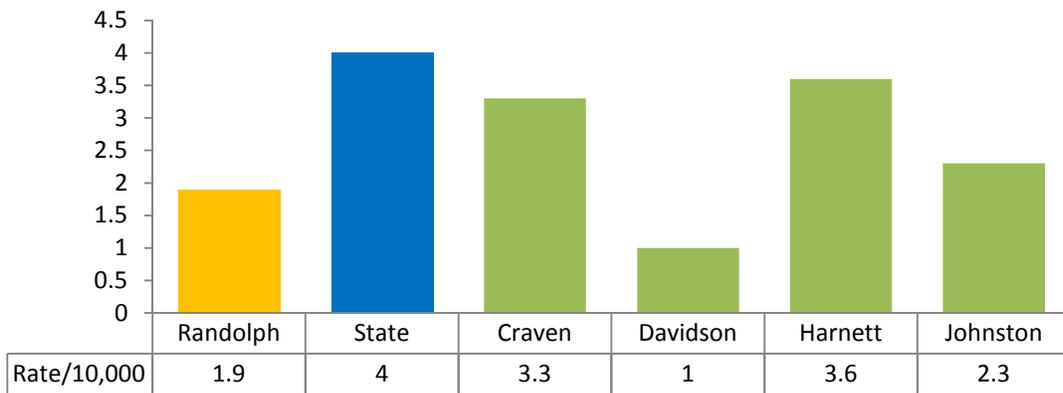
Source: 2011 North Carolina Health Professionals Data System

Physical Therapists



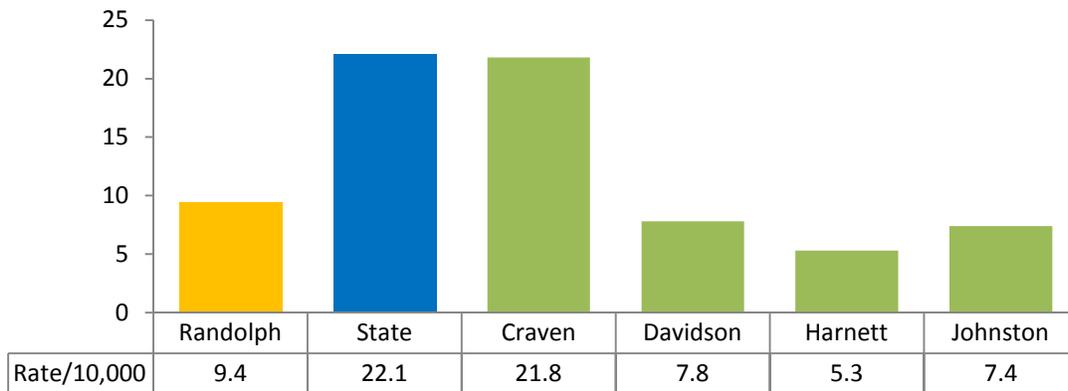
Source: 2011 North Carolina Health Professionals Data System

Physician Assistants



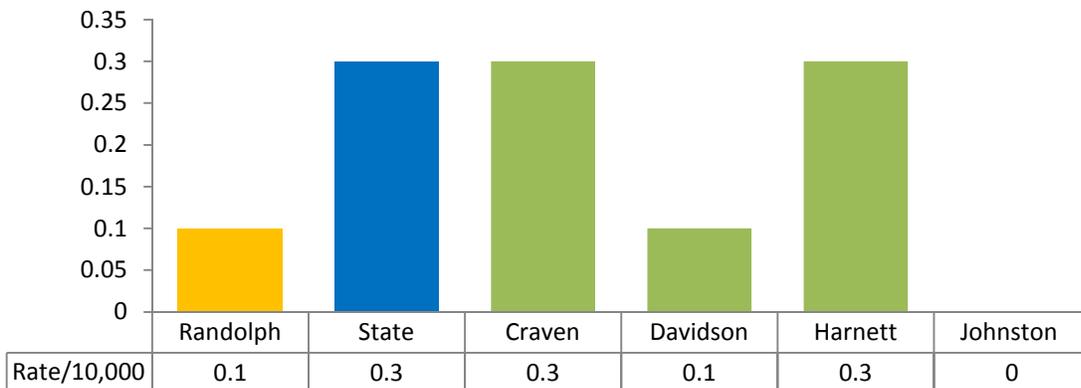
Source: 2011 North Carolina Health Professionals Data System

Physicians



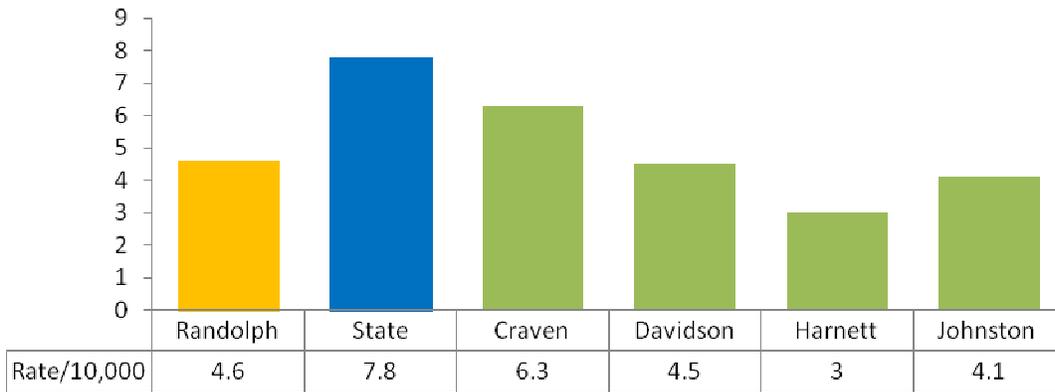
Source: 2011 North Carolina Health Professionals Data System

Podiatrists



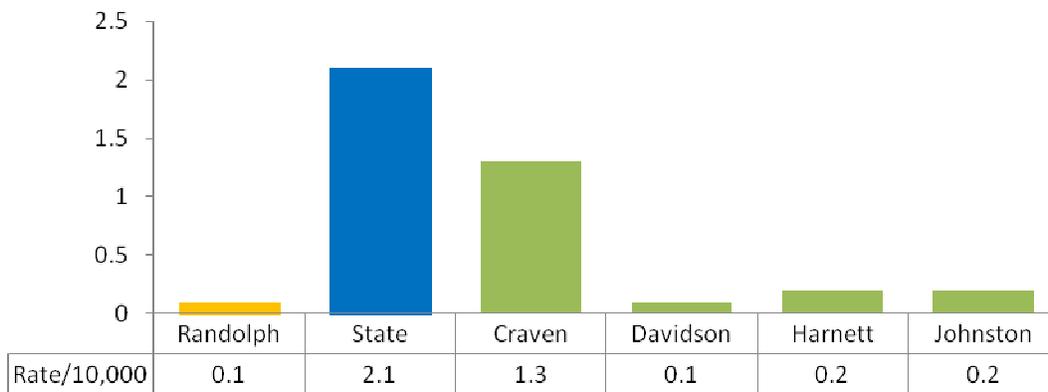
Source: 2011 North Carolina Health Professionals Data System

Primary Care Physicians



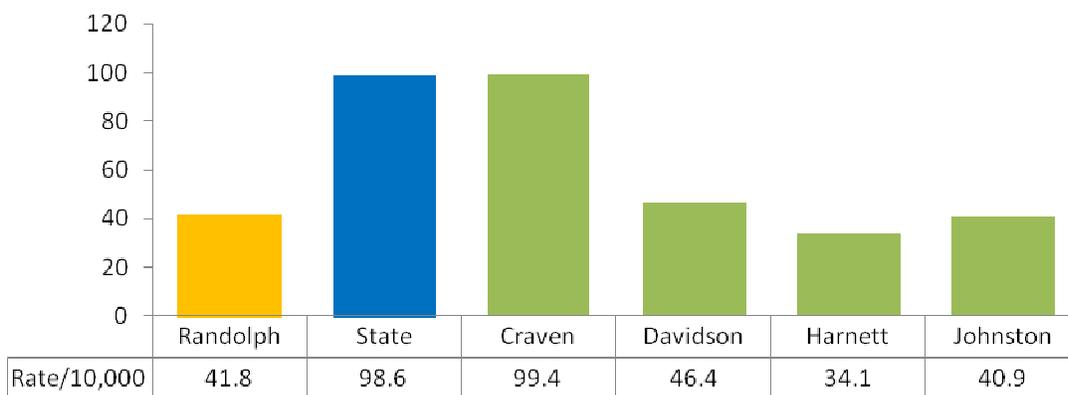
Source: 2011 North Carolina Health Professionals Data System

Psychologists



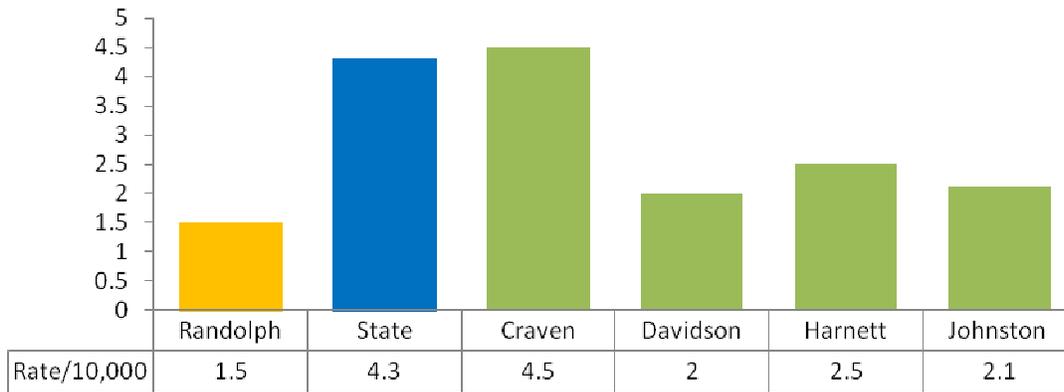
Source: 2011 North Carolina Health Professionals Data System

Registered Nurses



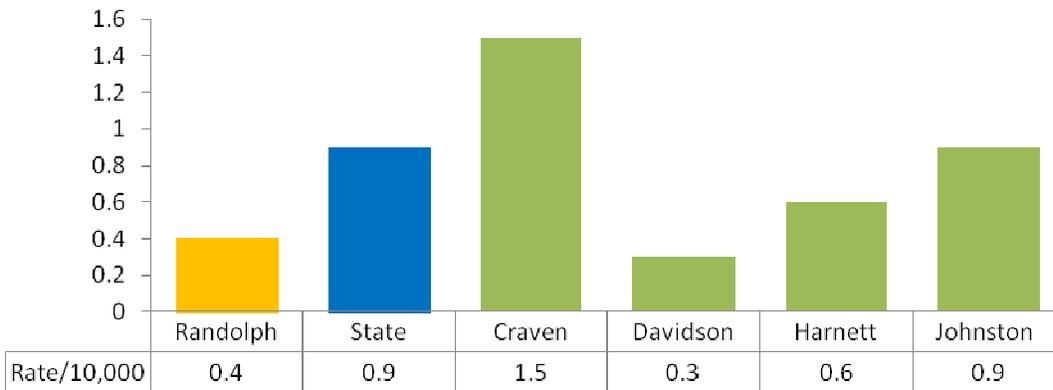
Source: 2011 North Carolina Health Professionals Data System

Respiratory Therapists



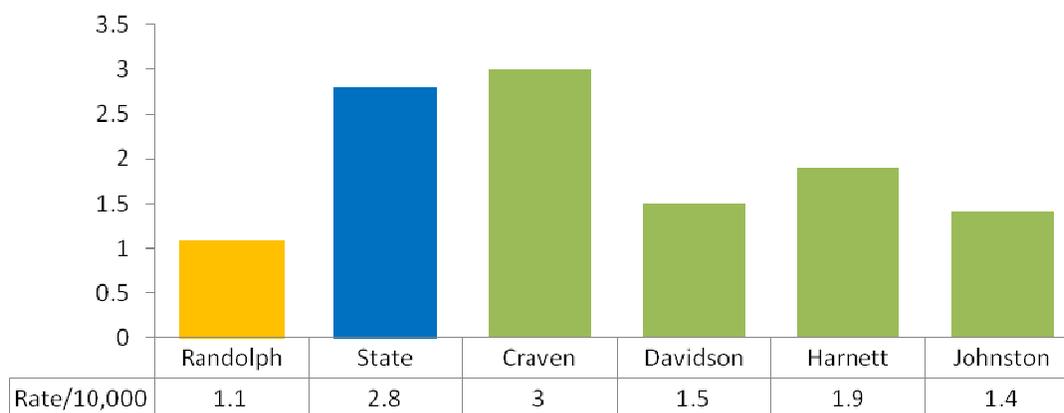
Source: 2011 North Carolina Health Professionals Data System

Psychological Associates



Source: 2011 North Carolina Health Professionals Data System

Occupational Therapists



Source: 2011 North Carolina Health Professionals Data System

Section Three

Health Statistics

Cancer

Communicable Disease

Heart Disease and Stroke

Maternal and Child Health

Overweight and Obesity

Tobacco

Cancer

Overview

Cancer is the leading cause of death in North Carolina and the second leading cause of death in the United States. In 2011, 18,201 persons in North Carolina died from cancer, 267 of those were from Randolph County. In both the U.S. and the state, the most frequently diagnosed cancers are prostate cancer for males, breast cancer for females, followed by lung and colorectal cancer for both sexes. The causes of cancer vary, with certain types having more known risk factors than others.

Approximately 65-80% of all cancers are preventable because they are related to personal lifestyle choices or environmental factors. For example, cancers caused by smoking and alcohol use can be prevented by avoiding those behaviors. Likewise, cancers related to obesity and overweight, lack of exercise and nutrition are also preventable as are skin cancers caused by exposure to the sun. Certain cancers that are caused by infectious organisms can be prevented through a combination of behavior change and medical interventions. Regular screenings and early detection may also be preventive, and can detect cancers at an early stage when they are most treatable.

Randolph County Data

The North Carolina Central Cancer Registry projected that in 2013 there would be 880 new cancer cases in Randolph County and 316 deaths.

Randolph County Cancer Projections

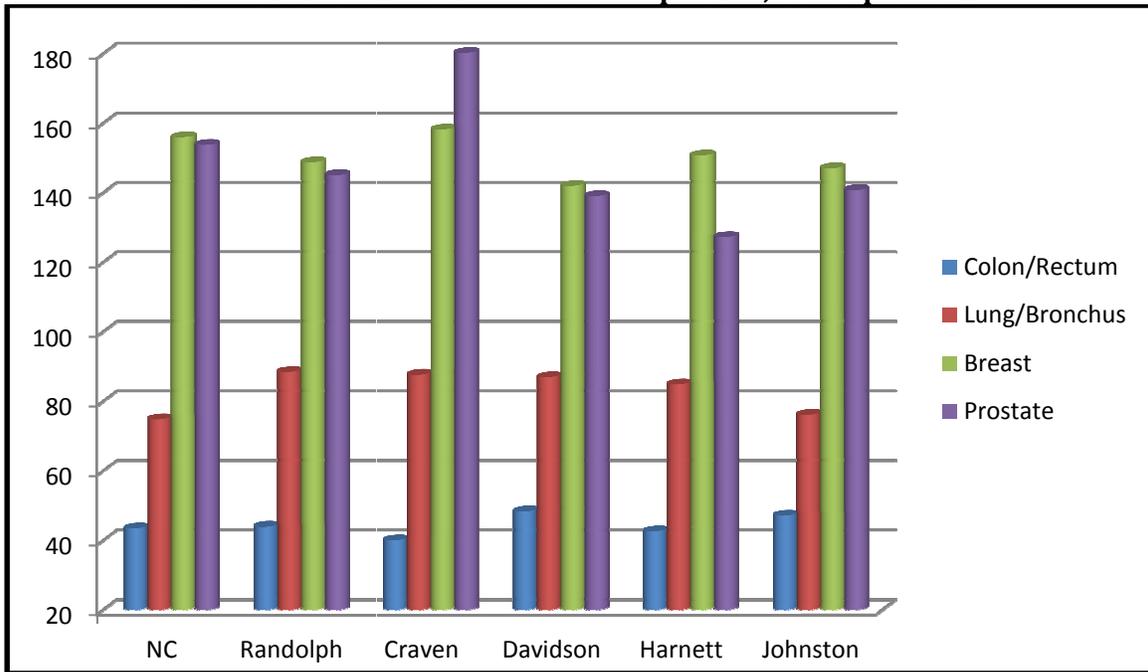
2013	New Cases	Deaths
Lung	136	98
Breast	143	22
Prostate	134	16
Colon/Rectum	76	27

Source: NC State Center for Health Statistics. Cancer Projections 2013. <http://www.schs.state.nc.us/SCHS/CCR/projections.html>

- According to the table above, residents in Randolph County are more likely to develop breast cancer when compared to the other types.
- Residents in Randolph County are more likely to die from lung cancer rather than breast, prostate, or colon/rectum.

Cancer Incidence

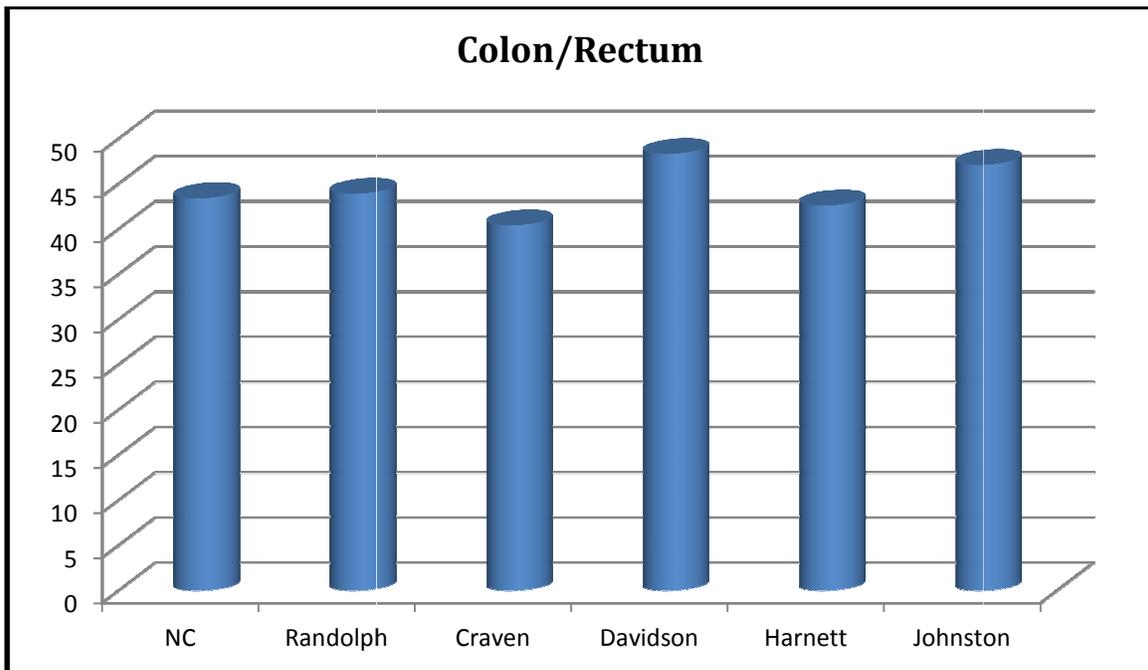
2006-2010 Cancer Incidence Rates per 100,000 Population



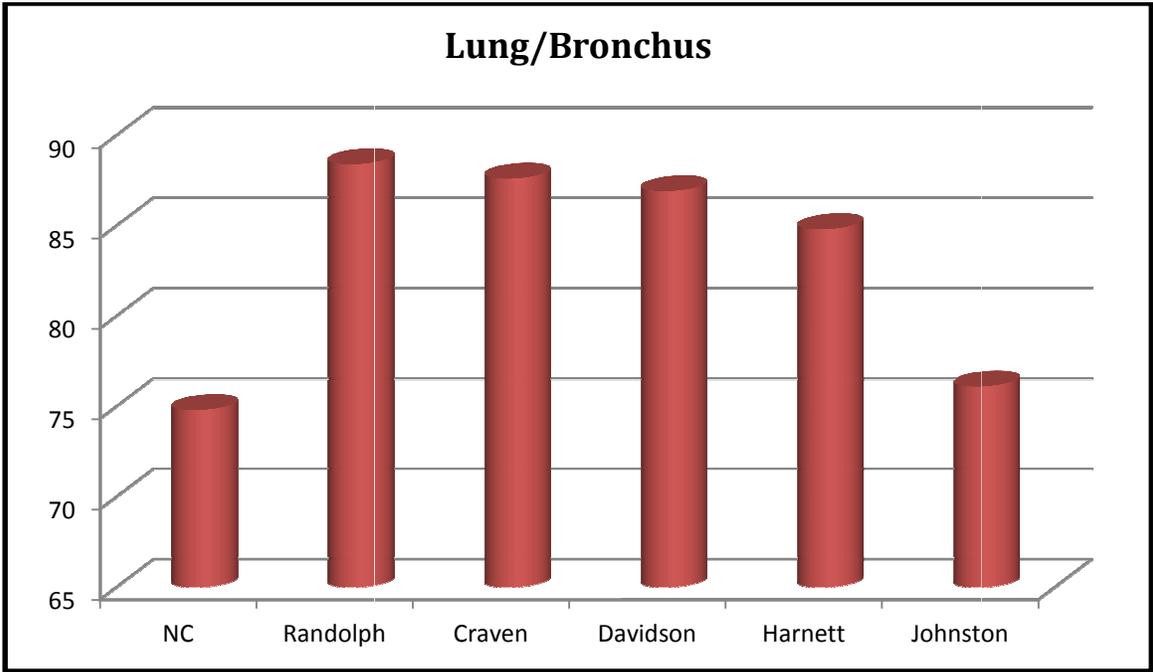
Source: NC State Center for Health Statistics. (2010). 2006-2010 Cancer Incidence Rates per 100,000 population <http://www.schs.state.nc.us/schs/ccr/incidence/2010/5yearrates.pdf>

- Randolph County had the highest rate in lung cancer compared to the state and the four peer counties.

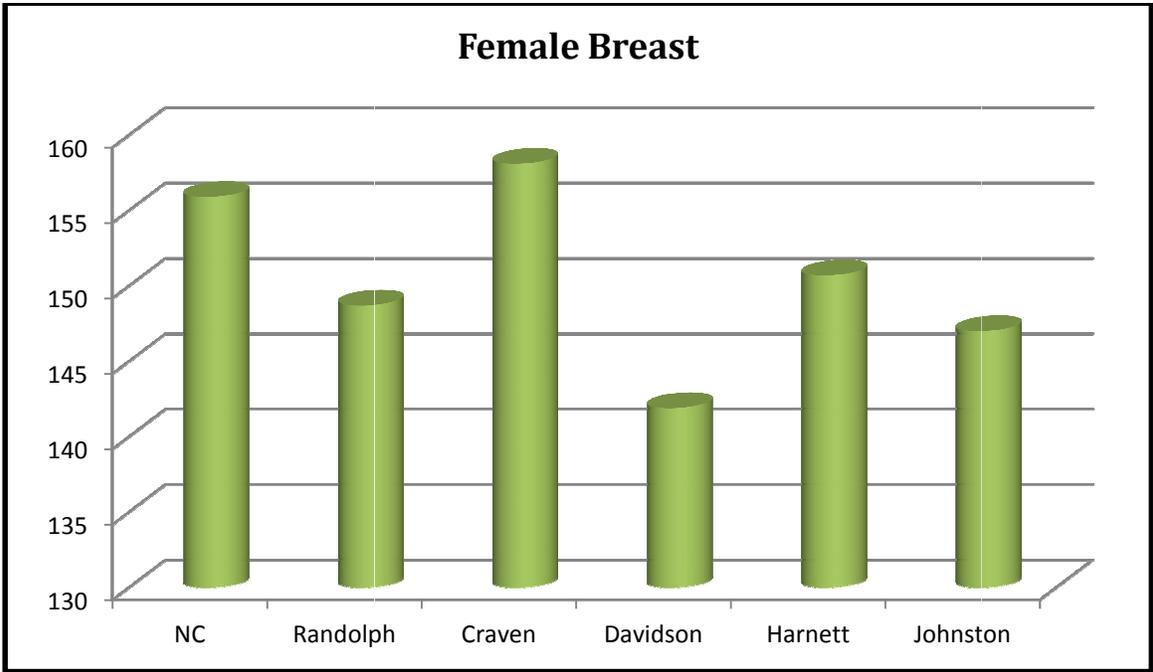
Colon/Rectum



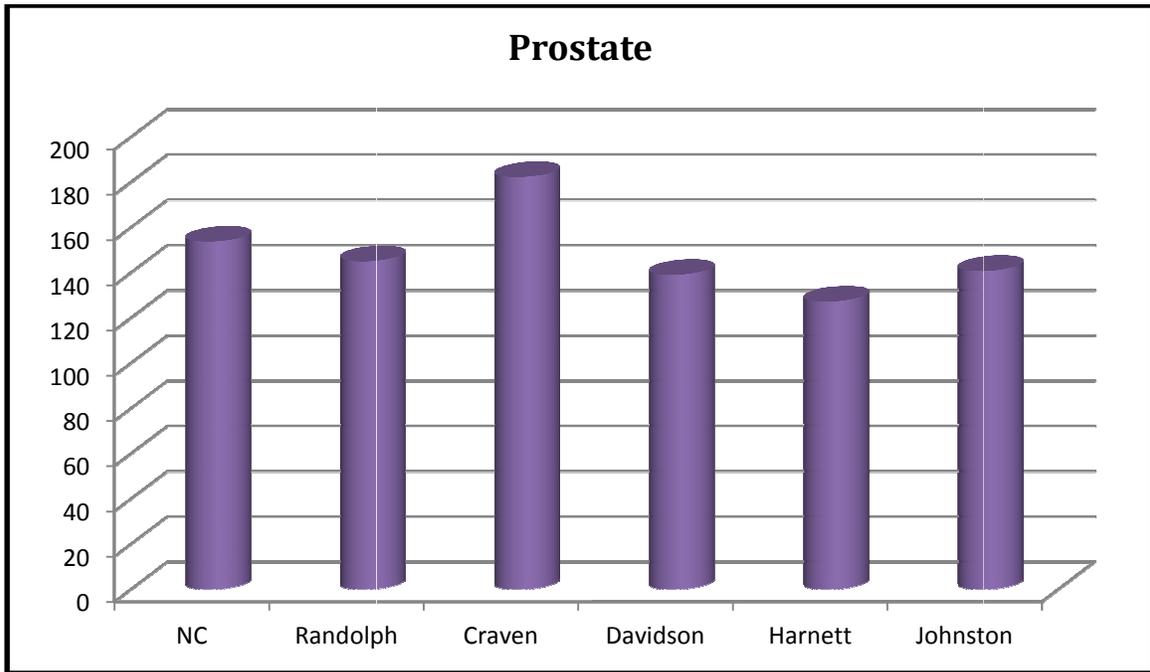
Source: NC State Center for Health Statistics. (2010). 2006-2010 Cancer Incidence Rates per 100,000 population <http://www.schs.state.nc.us/schs/ccr/incidence/2010/5yearrates.pdf>



Source: NC State Center for Health Statistics. (2010). 2006-2010 Cancer Incidence Rates per 100,000 population <http://www.schs.state.nc.us/schs/ccr/incidence/2010/5yearrates.pdf>

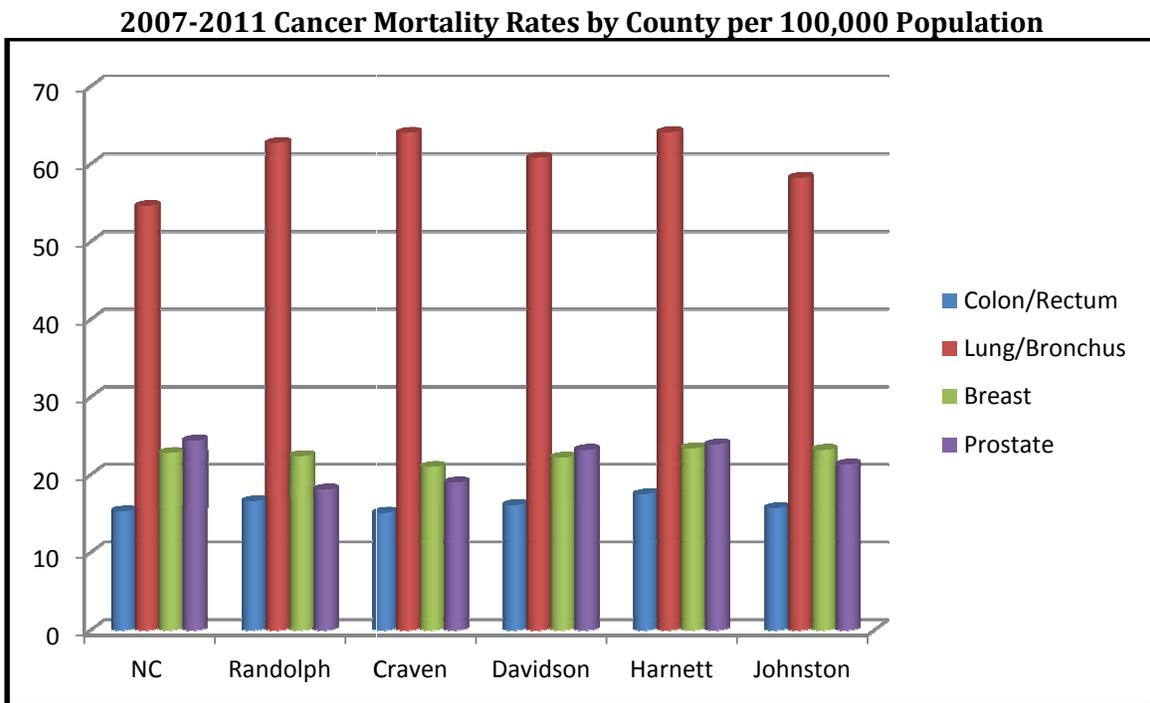


Source: NC State Center for Health Statistics. (2010). 2006-2010 Cancer Incidence Rates per 100,000 population <http://www.schs.state.nc.us/schs/ccr/incidence/2010/5yearrates.pdf>



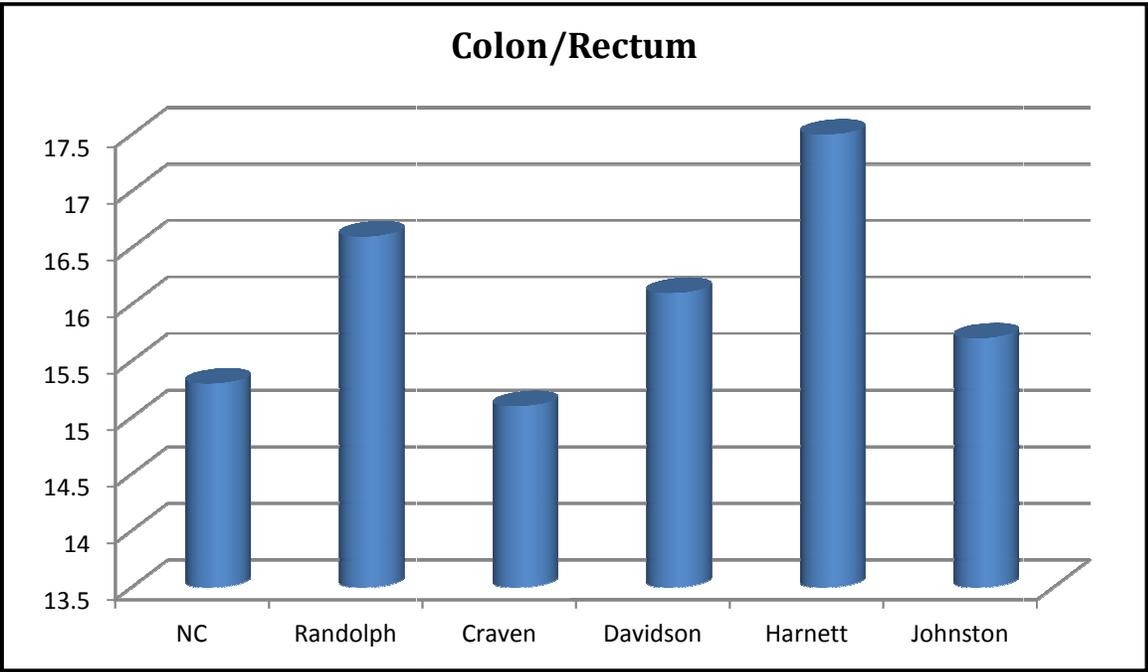
Source: NC State Center for Health Statistics. (2010). 2006-2010 Cancer Incidence Rates per 100,000 population <http://www.schs.state.nc.us/schs/ccr/incidence/2010/5yerrates.pdf>

Cancer Mortality

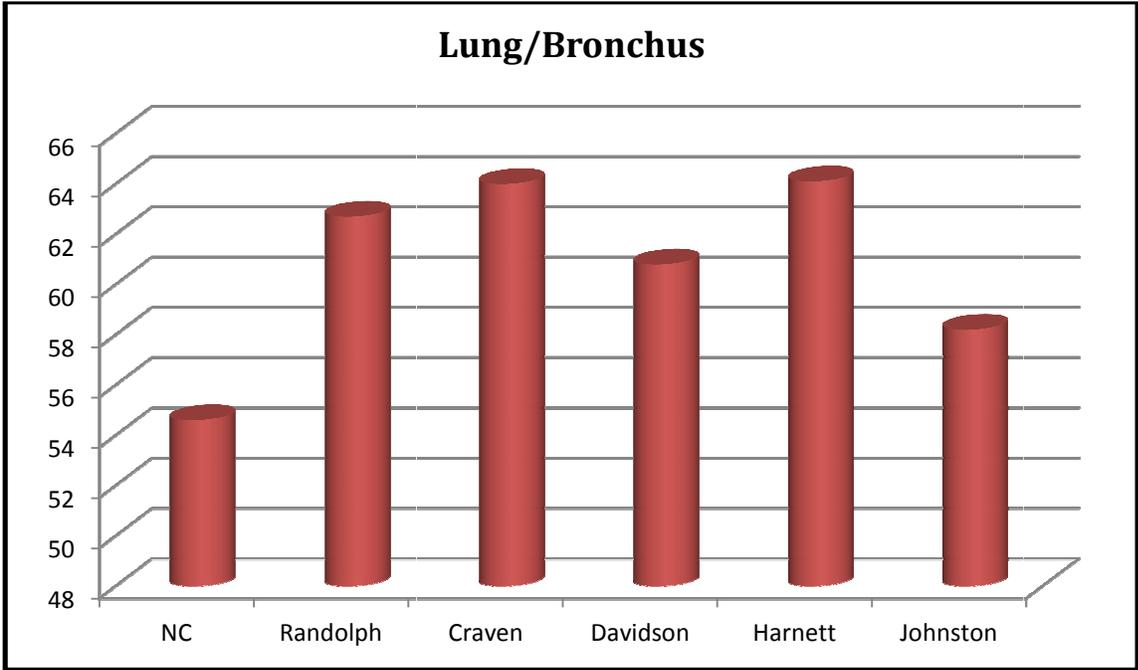


Source: NC State Center for Health Statistics (2011). 2007-2011 Cancer Mortality Rates by County per 100,000 <http://www.schs.state.nc.us/schs/ccr/mort0711cnty.pdf>

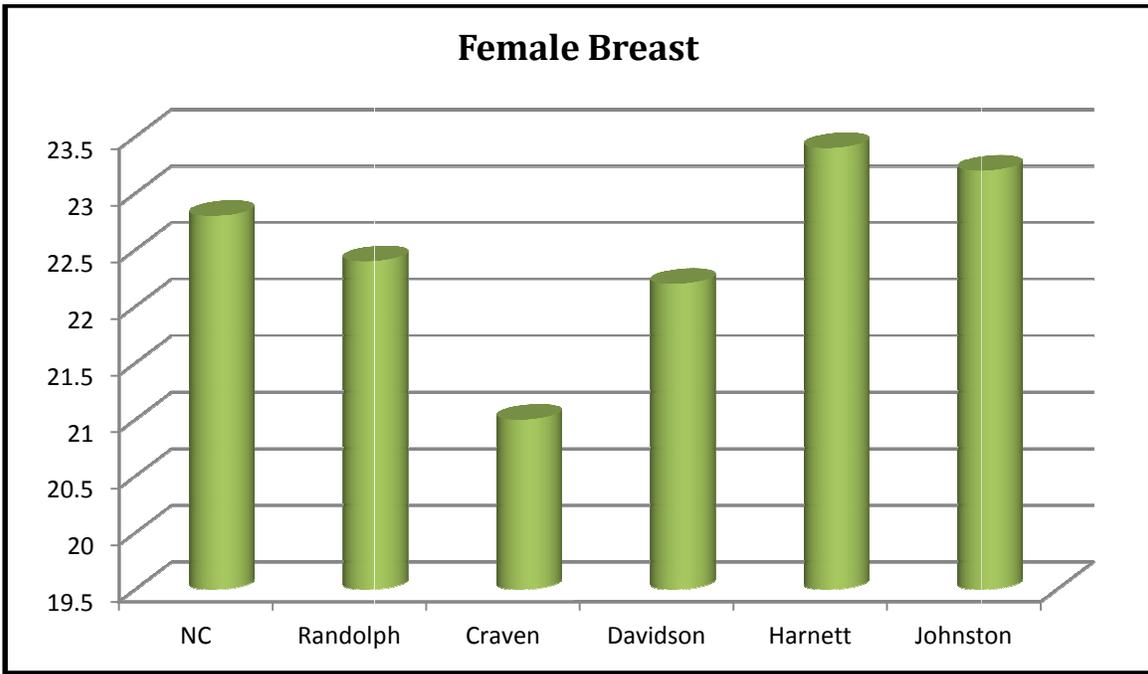
- According to the chart above, cancer mortality rates were drastically higher among those who had lung/bronchus cancer.



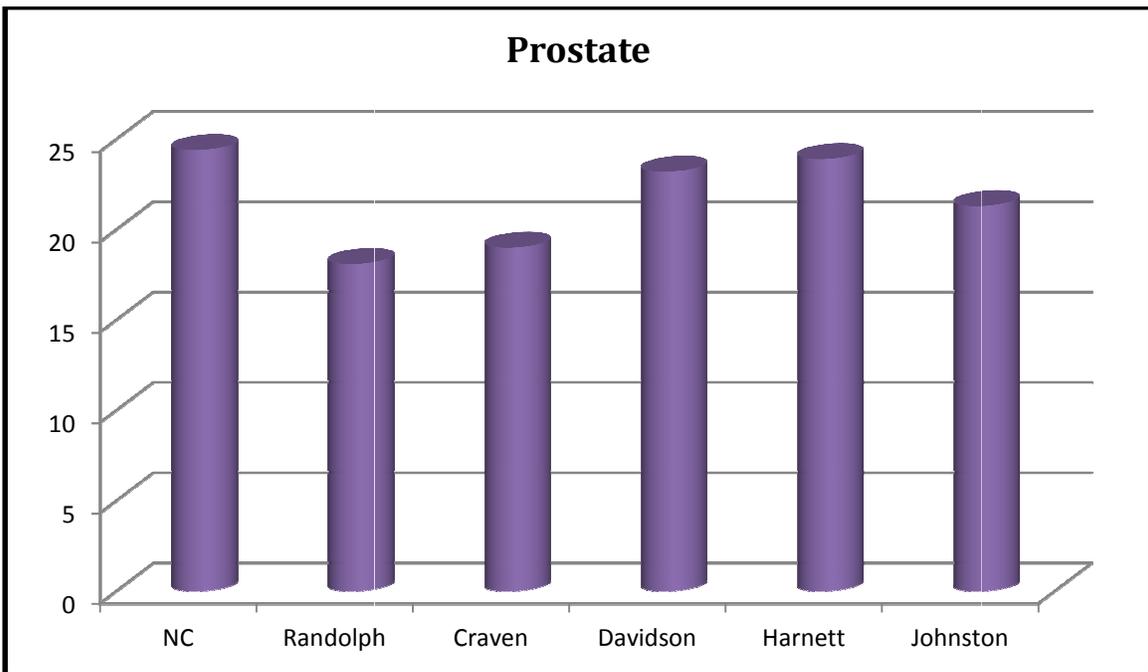
Source: NC State Center for Health Statistics (2011). 2007-2011 Cancer Mortality Rates by County per 100,000
<http://www.schs.state.nc.us/schs/ccr/mort0711cnty.pdf>



Source: NC State Center for Health Statistics (2011). 2007-2011 Cancer Mortality Rates by County per 100,000
<http://www.schs.state.nc.us/schs/ccr/mort0711cnty.pdf>



Source: NC State Center for Health Statistics (2011). 2007-2011 Cancer Mortality Rates by County per 100,000
<http://www.schs.state.nc.us/schs/ccr/mort0711cnty.pdf>

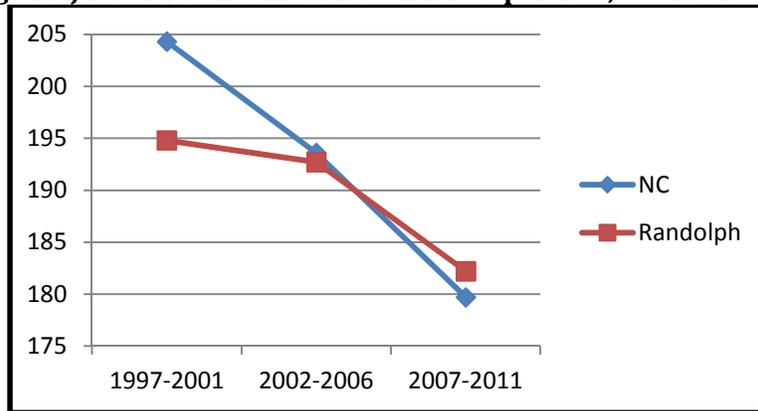


Source: NC State Center for Health Statistics (2011). 2007-2011 Cancer Mortality Rates by County per 100,000
<http://www.schs.state.nc.us/schs/ccr/mort0711cnty.pdf>

- Randolph County has the lowest rate of prostate cancer compared to the state and to the peer counties.

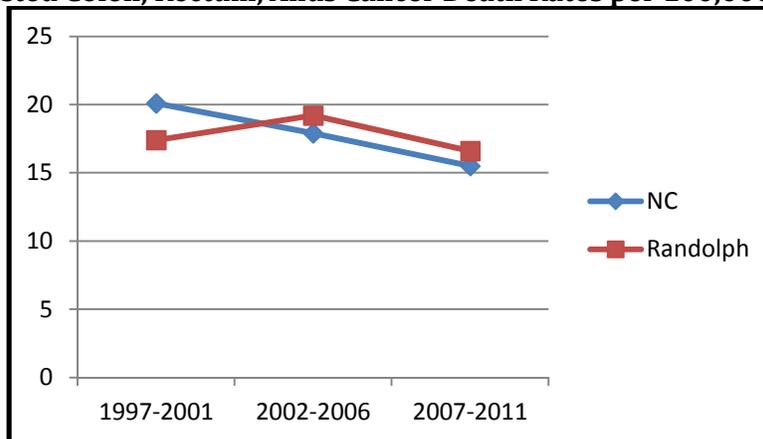
North Carolina and Randolph County Cancer Trends

Age-Adjusted Total Cancer Death Rates per 100,000 Residents



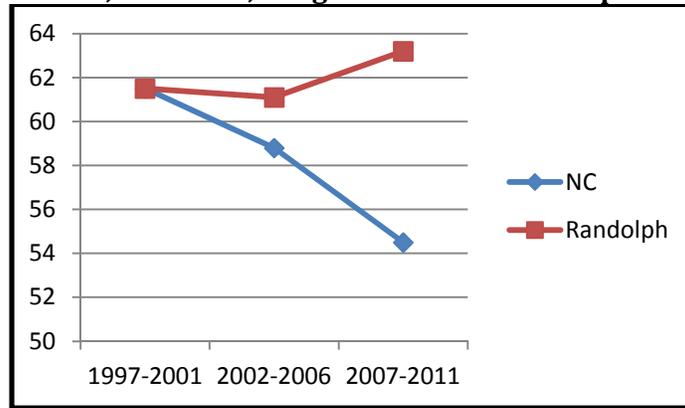
- When comparing Randolph County to the state rates for cancer deaths, Randolph ranks lower for all three timeframes.
- Overall cancer has decreased in Randolph County, the four peer counties and within North Carolina as a whole.
- During 1997-2001, Randolph County's rate was 4.7% lower than the state rate, 0.5% lower during 2002-2006 and 1.4% lower during 2007-2011.
- Harnett County had the highest cancer rate during the years of 1997-2001 and 2002-2006 when compared to the state and four peer counties.

Age-Adjusted Colon, Rectum, Anus Cancer Death Rates per 100,000 Residents



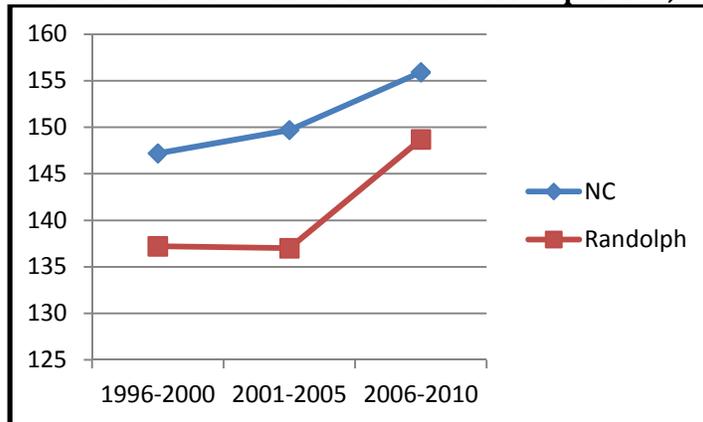
- During the 1997-2001 timeframe, Randolph County's death rate from colon, rectum, anus cancer was 13% lower than the state rate. However, during the years 2002-2006 and 2007-2011 Randolph's rate was higher than the state by 7%.
- Harnett County had a higher death rate during both 1997-2001 and 2007-2011 timespans when compared to the state and peer counties. The rates were 25.7 and 20.4.
- Craven County had the highest rate during 2002-2006. The rate was 21.9.

Age-Adjusted Trachea, Bronchus, Lung Cancer Death Rates per 100,000 Residents



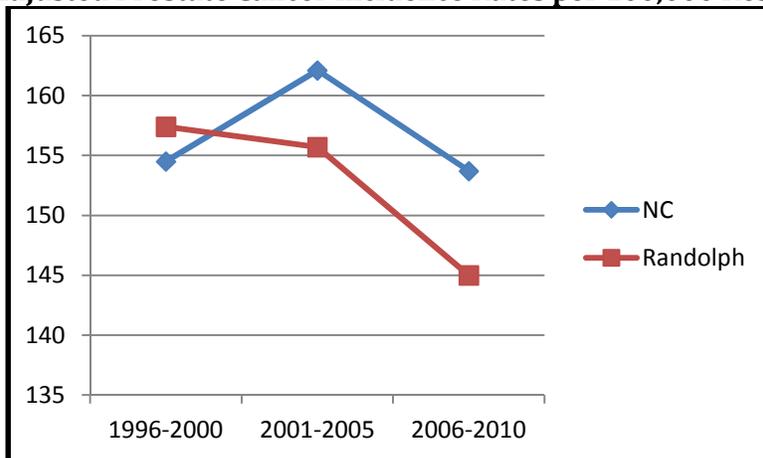
- Randolph County’s death rate from trachea, bronchus and lung cancer was higher than the states rate during both the 2002-2006 and 2007-2011 timeframes. During 2002-2006, Randolph’s rate was 4% higher than the states and 16% higher in 2007-2011. During 1997-2001 Randolph’s rate was the same as the states, at 61.5.
- Harnett County had a higher death rate during the timespans of 1997-2001 and 2007-2011. The rates were 69.8 and 63.7.
- Davidson County had the highest death rate during 2002-2006. The rate was 67.6.

Age-Adjusted Female Breast Cancer Incidence Rates per 100,000 Residents



- The states incidence rate for breast cancer was higher than Randolph County’s rate during all three timeframes. Randolph’s incidence rates were lower by 7% in 1996-2000, 8% in 2001-2005 and 5% during 2006-2010.
- Craven County had a higher incidence rate during all three timeframes than the state and all four other counties. The rates were 160.8 (1996-2000), 158.4 (2001-2005) and 158.1 (2006-2010).

Age-Adjusted Prostate Cancer Incidence Rates per 100,000 Residents



Source: North Carolina State Center for Health Statistics: Trends in Key Health Indicators
<http://www.schs.state.nc.us/schs/data/trends/pdf>

- The states incidence rate for prostate cancer was higher than Randolph County’s during all three timespans. Randolph’s incidence rates were lower by 2% in 1996-2000, 4% in 2001-2005 and 6% during 2006-2010.
- Craven County had a drastically higher incidence rate during all three timeframes than the state and all four other counties. The rates were 227.8 (1996-2000), 204.0 (2001-2005) and 182.2 (2006-2010).

Disparities

- Across North Carolina and our four peer counties, males are more likely than females to have lung/bronchus cancer.
- Males are more likely to die from colon/rectum cancer than females.
- White females are more likely to develop breast cancer than black females, however, black females are more likely to die from breast cancer.

Implications

- Increase promotion efforts of the NC Quitline within the county, with special emphasis on school-aged children and the African American population.
- Offer a tobacco cessation program within Randolph County. Currently, we do not have anyone providing this service.
- Make prevention methods of colon/rectum cancer more available to Randolph County residents with special emphasis on the male population.
- Increase education efforts in regards to breast cancer awareness and prevention, with special emphasis on the African American population.

Assets

- Randolph Cancer Center is a collaborative effort of Randolph Hospital and Cone Health and provides comprehensive cancer care through radiation and chemotherapy services to the outlying community. Benefits of this collaboration include expert cancer care and participation in National Cancer Institute-approved research trials close to home. Randolph Cancer Center was recently recognized by the Quality Oncology Practice Initiative (QOPI®) Certification Program, an affiliate of the American Society of Clinical Oncology (ASCO). The QOPI® Certification Program provides a three-year certification for outpatient hematology-oncology practices that meet the highest standards for quality cancer care. Randolph Cancer Center has also recently received the Commission on Cancer (CoC) of the American College of Surgeons (ACoS) accreditation. This accreditation is given only to those facilities that have voluntarily committed to providing the best in diagnosis and treatment of cancer to a rigorous evaluation process and a review of its performance.

Communicable Disease

Overview

A communicable disease is an infectious or contagious disease that can be transmitted from one individual to another either directly by contact or indirectly by germs or parasites. Health Professionals are required to report cases of certain communicable diseases to the NC Division of Public Health through their local health department. Randolph County works in collaboration with the NC Communicable Disease Branch on the following four objectives:

- To promptly investigate disease outbreaks and unusual situations and to implement control measures to minimize further transmission of disease
- To monitor disease-reporting by physicians and laboratories in order to detect trends and to assess the public health impact of diseases
- To provide a channel of communication between public health agencies, private physicians, and hospital and occupational infection control personnel, as an essential part of disease control efforts
- To explain public health interventions and disseminate health education messages to the community and the media in order to enhance disease control efforts

County and State Data

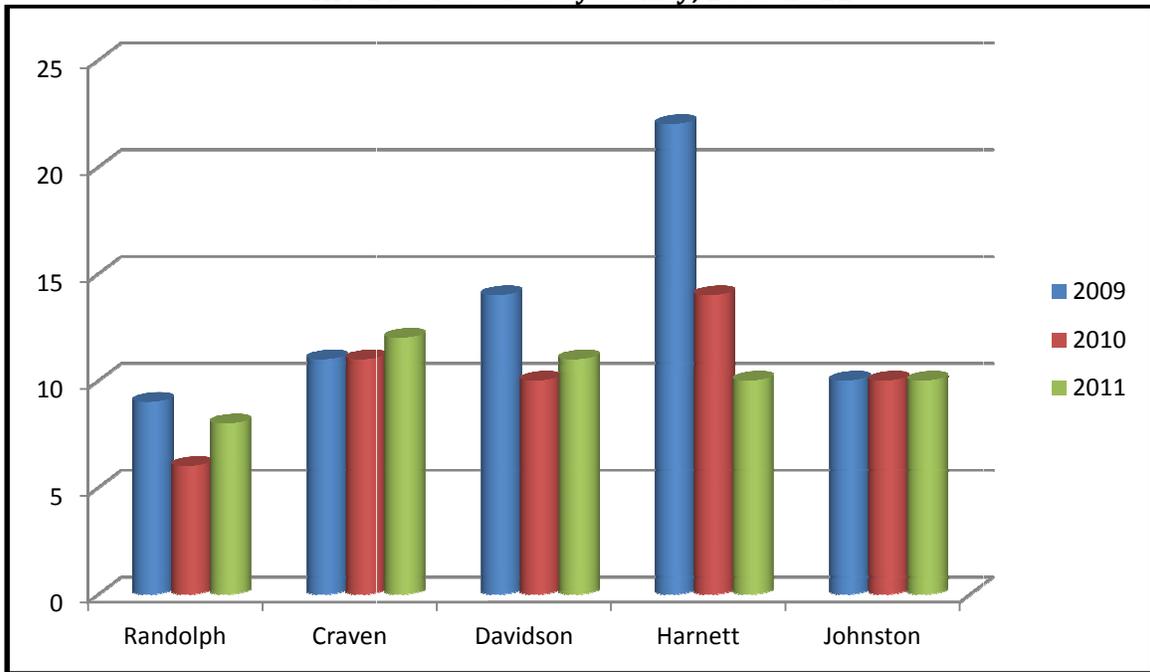
HIV

According to the North Carolina HIV/STD Prevention and Care Branch, Randolph County in 2011, ranked 69th in the state for HIV Disease with an average rate for the time period 2007-2011, of 5.6. There were 26,168 total living cases of HIV in North Carolina since December 31, 2011. Out of those, Randolph County had 124 living cases. North Carolina had 1,563 new cases of HIV in 2011 and Randolph County had eight.

AIDS

According to the North Carolina HIV/STD Prevention and Care Branch, Randolph County in 2011 ranked 60th in the state for AIDS cases, with an average rate for the time period 2007-2011, of 3.8. In 2011, there were six new cases of AIDS in Randolph County and 830 total new cases in North Carolina.

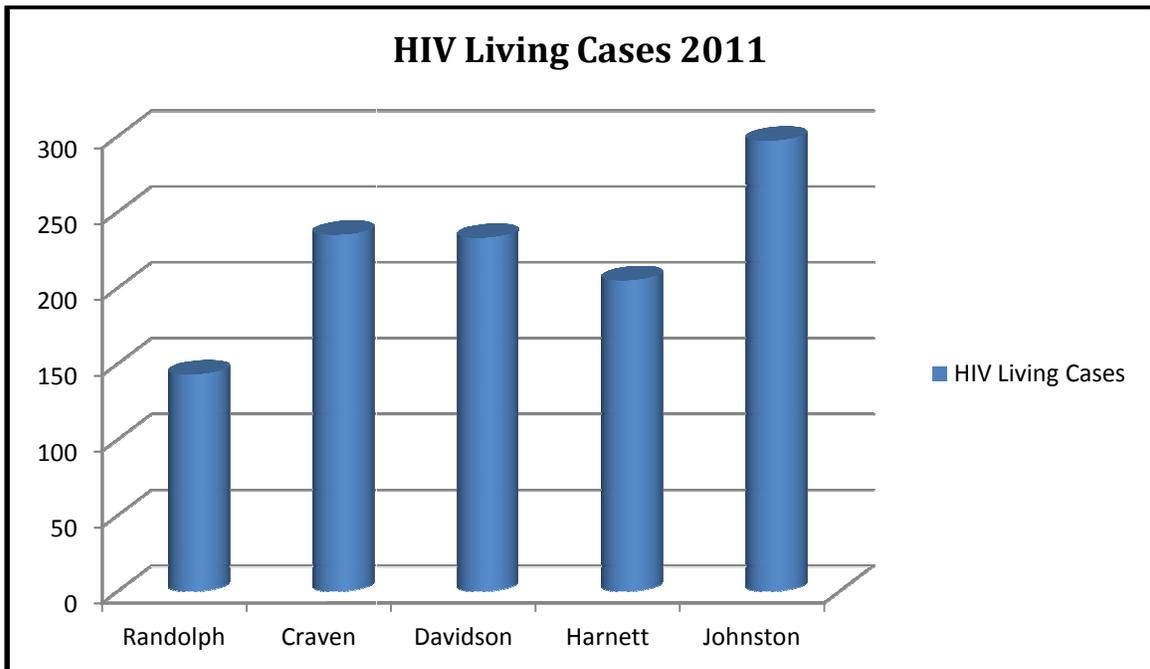
HIV Disease Cases by County, 2009-2011



Source: NC HIV/STD Prevention and Care Branch
<http://epi.publichealth.nc.gov/cd/stds/figures/std11rpt.pdf>

- Randolph County has the lowest cases of HIV compared to the peer counties for all three years.

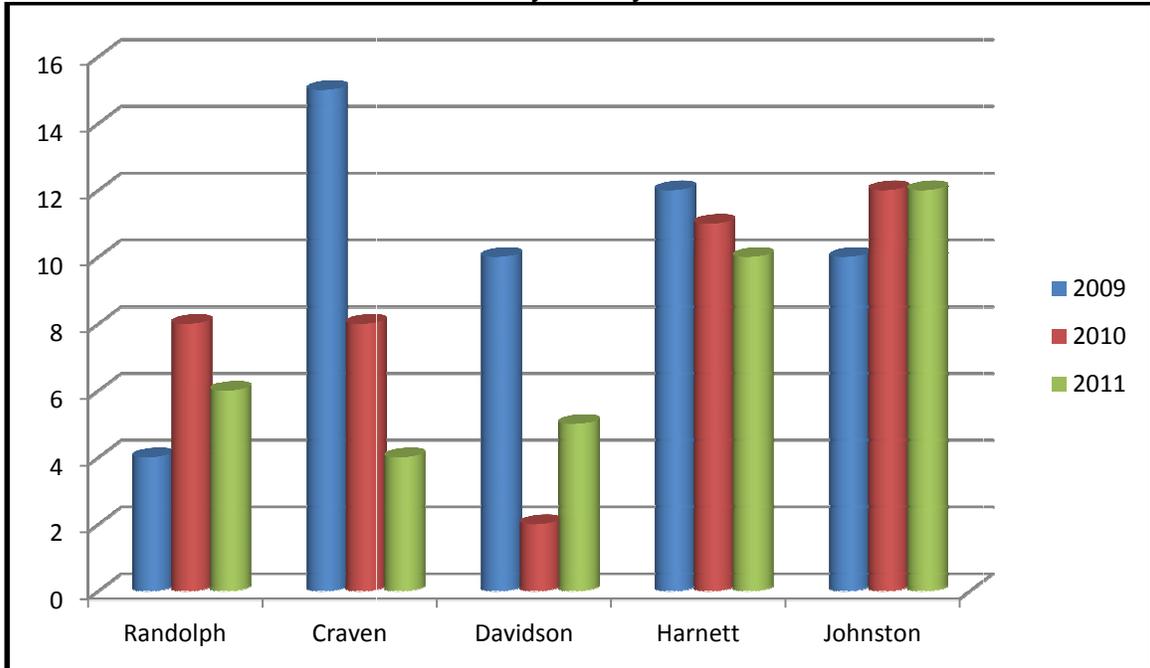
HIV Living Cases 2011



Source: NC HIV/STD Prevention and Care Branch
<http://epi.publichealth.nc.gov/cd/stds/figures/std11rpt.pdf>

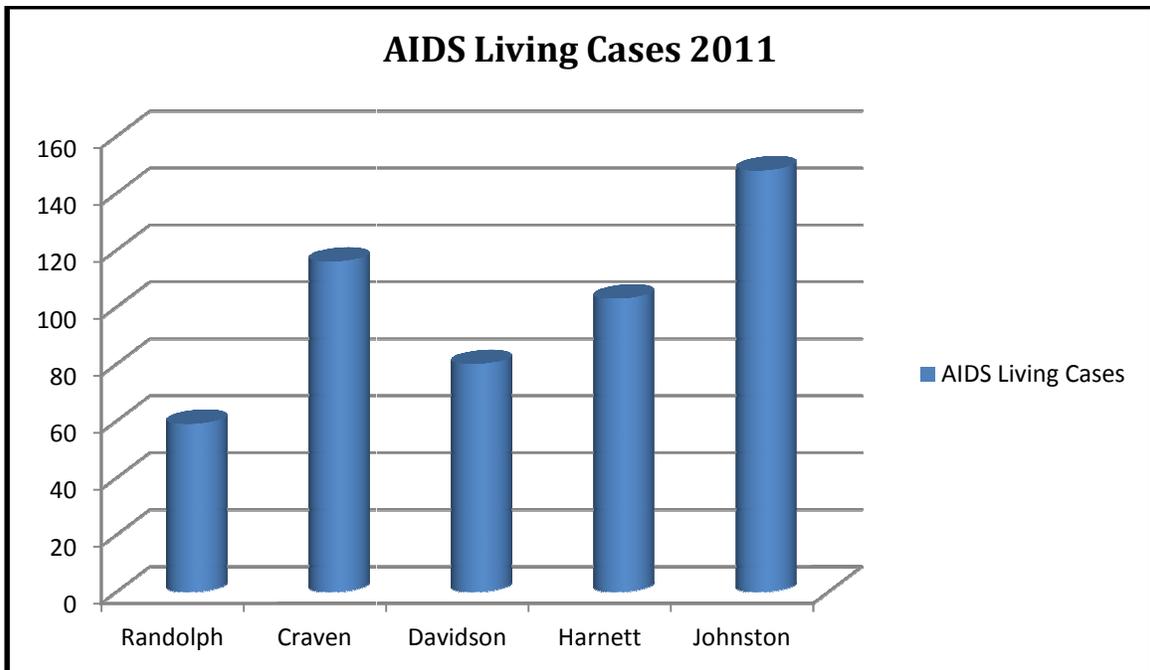
- Randolph County also has the lowest number of people living with HIV.

AIDS Cases by County 2009-2011



Source: NC HIV/STD Prevention and Care Branch
<http://epi.publichealth.nc.gov/cd/stds/figures/std11rpt.pdf>

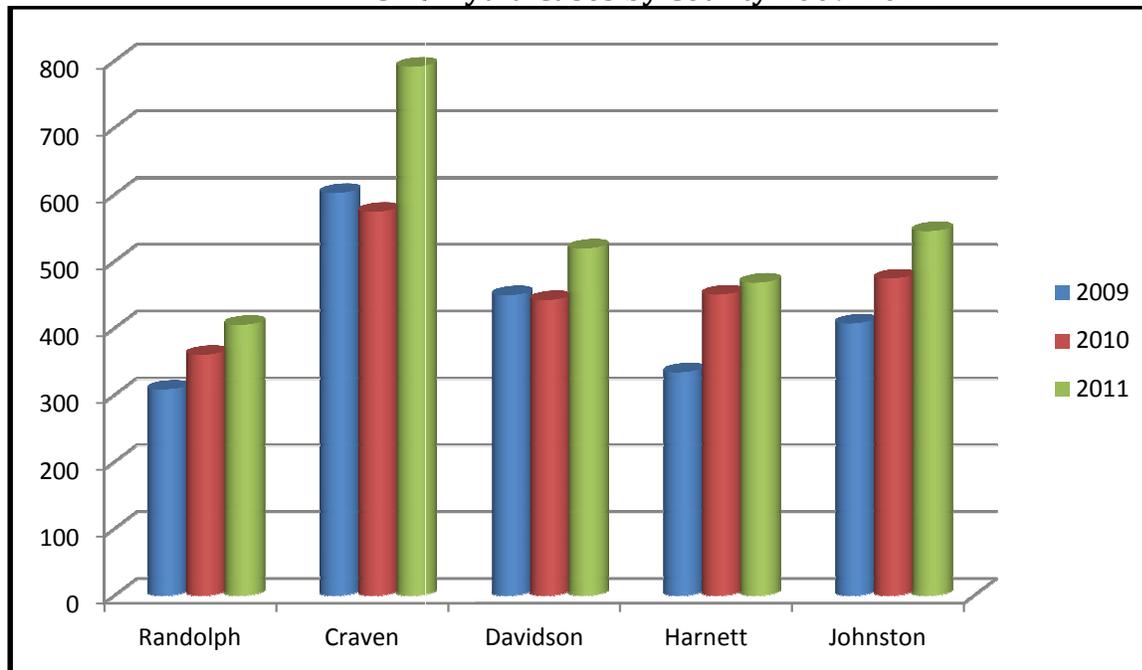
AIDS Living Cases 2011



Source: NC HIV/STD Prevention and Care Branch
<http://epi.publichealth.nc.gov/cd/stds/figures/std11rpt.pdf>

- Randolph County has the lowest number of people living with AIDS compared to the four peer counties.

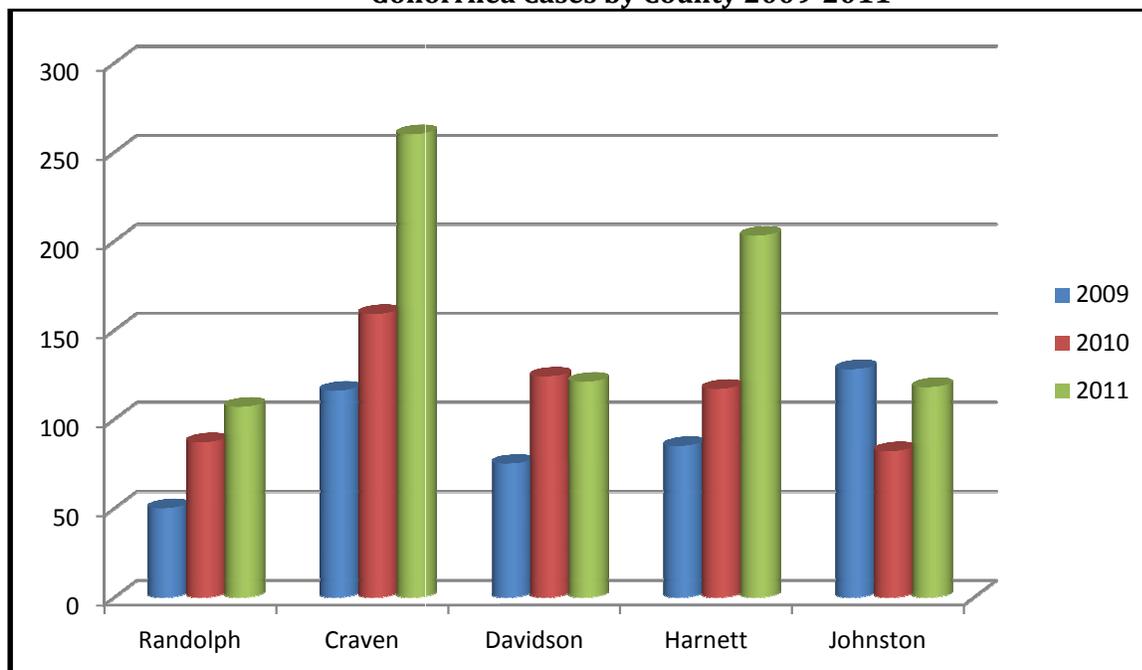
Chlamydia Cases by County 2009-2011



Source: NC HIV/STD Prevention and Care Branch
<http://epi.publichealth.nc.gov/cd/stds/figures/std11rpt.pdf>

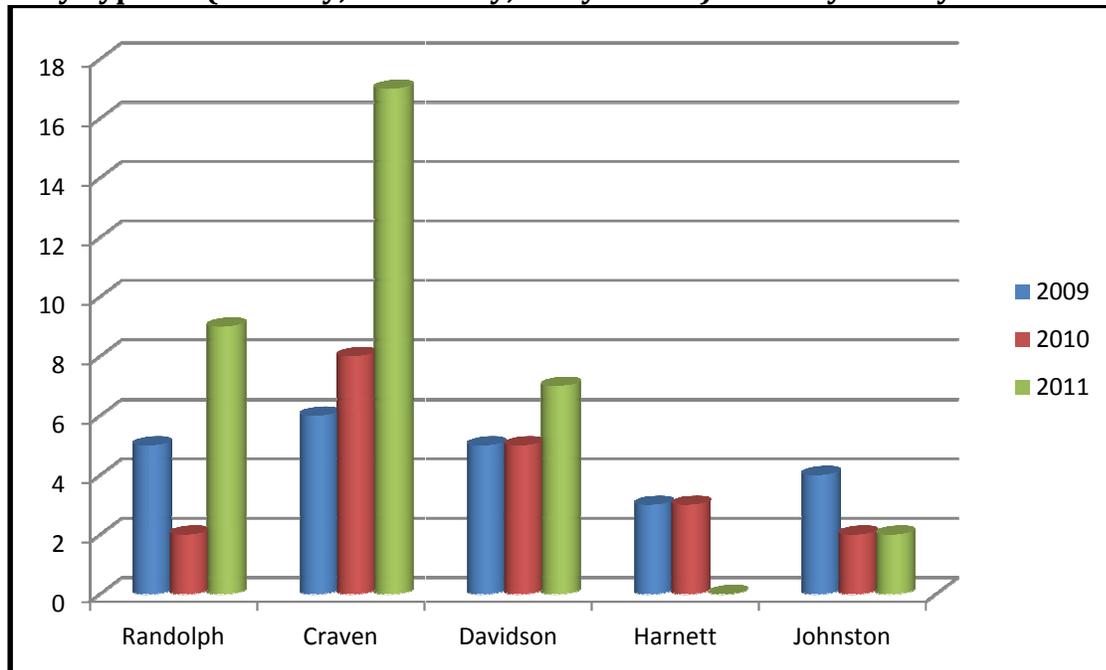
- Compared to the four peer counties, Randolph has the lowest cases of Chlamydia.

Gonorrhea Cases by County 2009-2011



Source: NC HIV/STD Prevention and Care Branch
<http://epi.publichealth.nc.gov/cd/stds/figures/std11rpt.pdf>

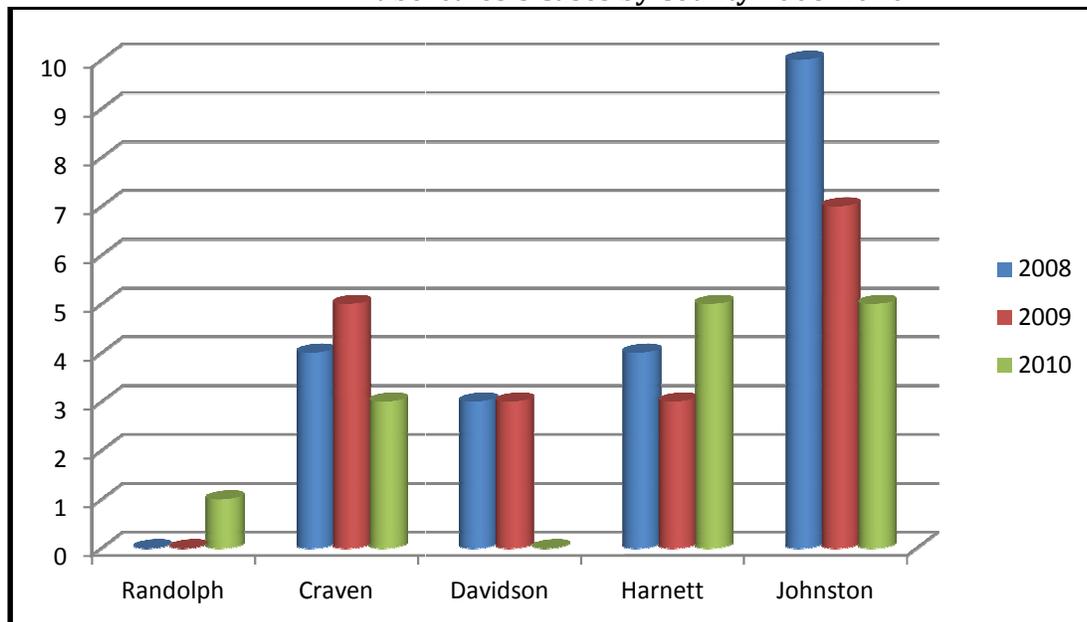
Early Syphilis (Primary, Secondary, Early Latent) Cases by County 2009-2011



Source: NC HIV/STD Prevention and Care Branch:
<http://epi.publichealth.nc.gov/cd/stds/figures/std11rpt.pdf>

- Craven County has the highest cases of Syphilis compared to the four peer counties.

Tuberculosis Cases by County 2008-2010



Source: Tuberculosis Control Program. TB Cases by County, 2008-2010:
<http://www.epi.state.nc.us/epi.gcdc/tb/ratesbycounty.htm>.

- Randolph County has the lowest number of cases of TB, whereas Johnston has the highest.

Disparities

- In North Carolina, African American's have a higher rate of HIV/AIDS, Chlamydia, Gonorrhea and Syphilis compared to other races.
- African American males are more likely than African American females to have HIV/AIDS, Chlamydia, Gonorrhea and Syphilis.
- People aged 15-19 have a higher rate of Gonorrhea, with females having higher rates than males.
- Males aged 20-24 have a higher rate of Chlamydia than any other age group and of females the same age.
- One in four teenagers will contract an STD each year.

Implications

- Many Randolph County residents need more knowledge about STD risk factors, signs, symptoms and the importance of protection.
- Increase sexual education within the county, with special emphasis on school-aged children, their parents and the African American population.

Assets

- Randolph County Health Department offers free testing for STD/HIV.
- North Carolina enacted The Healthy Youth Act of 2009, which requires public schools to provide comprehensive sexual health information to students beginning in the seventh grade.

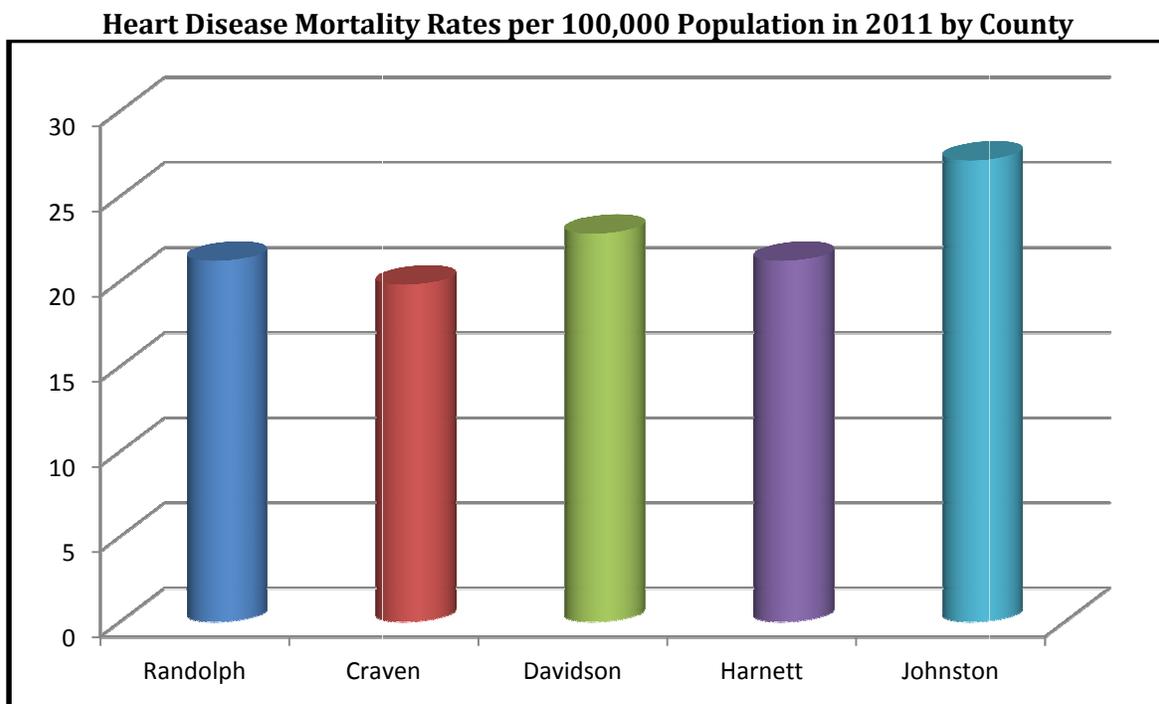
Heart Disease and Stroke

Overview

Heart disease and stroke fall under the umbrella of cardiovascular disease (CVD). Heart disease is a term that includes several heart conditions, the most common being coronary heart disease, which can lead to a heart attack. Heart Disease is the first leading cause of death in the United States and the second leading cause of death in North Carolina. Cerebrovascular Disease (Stroke) is the fourth leading cause of death in North Carolina and the United States.

Heart disease is the second leading cause of death, while stroke is the fourth leading cause of death among Randolph County residents. In 2011, 271 Randolph County residents died of heart disease and 68 died from a stroke.

Risk factors for cardiovascular disease include tobacco use, physical inactivity, poor nutrition, obesity, diabetes, high cholesterol, and high blood pressure. Prevention, control and changes in lifestyle and medication are frequently recommended for those at risk.



Source: NC State Center for Health Statistics. Leading Causes of Death in North Carolina. 2011.
<http://www.schs.state.nc.us/SCHS/data/lcd/lcd.cfm>

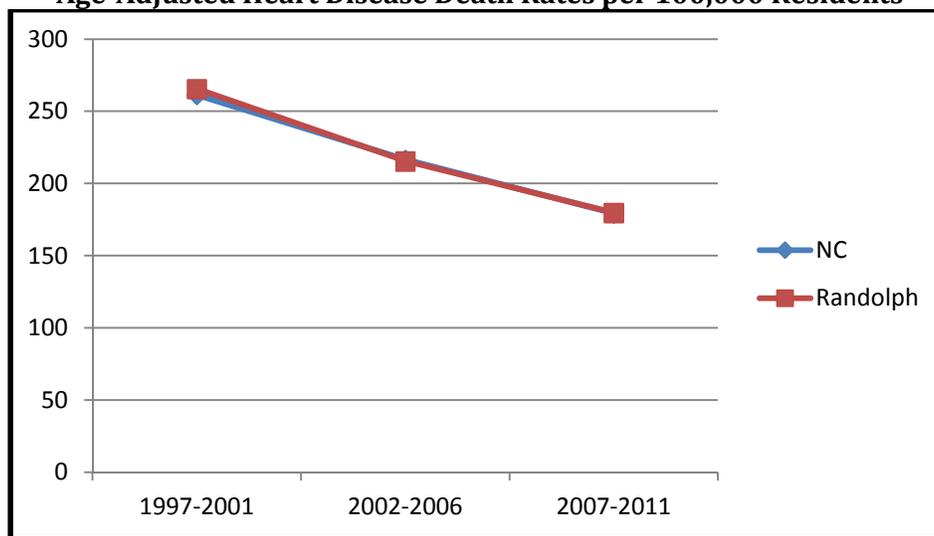
- Johnston County has the highest rates of heart disease mortality when compared to the peer counties.

**Age-Adjusted Mortality Rates due to Heart Disease
from 2005-2011 per 100,000 Population**

County	2005-2009	2006-2010	2007-2011
Randolph	207.2	189.1	179.7
Craven	195.2	185.0	175.6
Davidson	224.5	215.0	209.3
Harnett	214.0	220.9	208.3
Johnston	259.8	249.3	244.9

Source: NC State Center for Health Statistics. Leading Causes of Death in North Carolina. 2009-2011.
<http://www.schs.state.nc.us/SCHS/data/lcd/lcd.cfm>

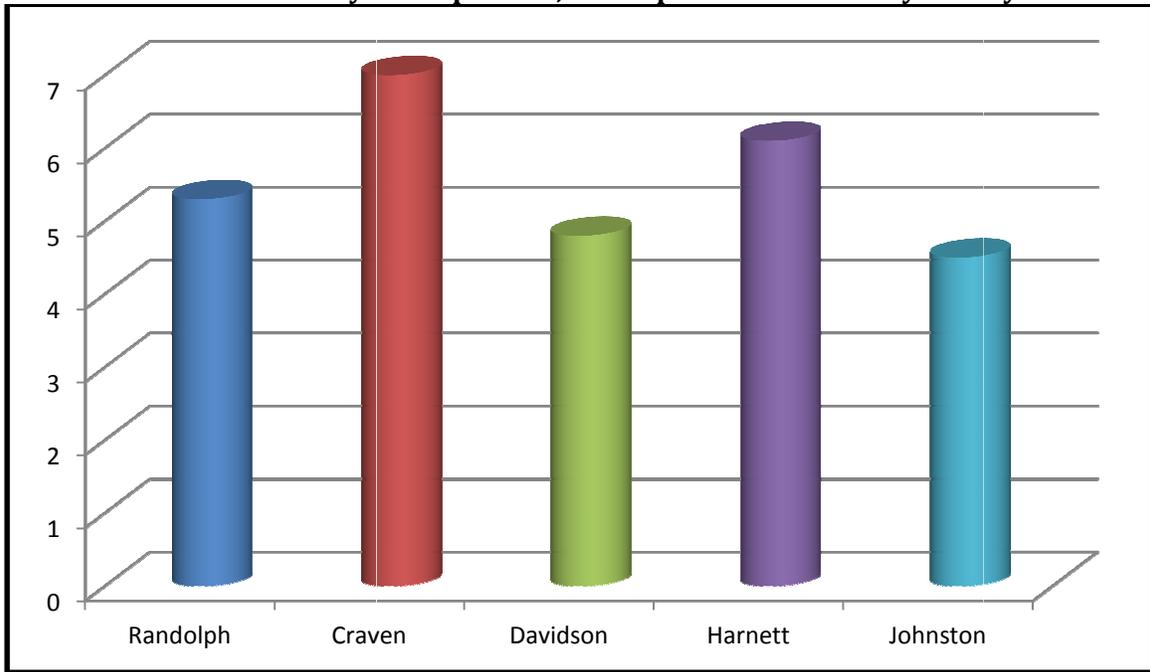
Age-Adjusted Heart Disease Death Rates per 100,000 Residents



Source: <http://www.schs.state.nc.us/schs/data/trends/pdf>

- During the timeframe of 1997-2001, Randolph County’s death rate from heart disease was 1.6% higher than the states. Randolph’s rate was slightly lower during 2002-2006 at 0.5% and only 0.2% higher in 2007-2011.
- Johnston County had a higher rate when compared to the state and other counties. The rates were: 314.4 (1997-2001), 283.0 (2002-2006) and 244.9 (2007-2011).
- When compared to Randolph, Johnston County’s rates were higher by: 18% (1997-2001), 31% (2002-2006) and 36% (2007-2011).
- When compared to the states rate, Johnston County’s were higher by: 20% (1997-2001), 31% (2002-2006) and 37% (2007-2011).

Stroke Mortality Rates per 100,000 Population in 2011 by County



Source: NC State Center for Health Statistics. Leading Causes of Death in North Carolina. 2011.
<http://www.schs.state.nc.us/SCHS/data/lcd/lcd.cfm>

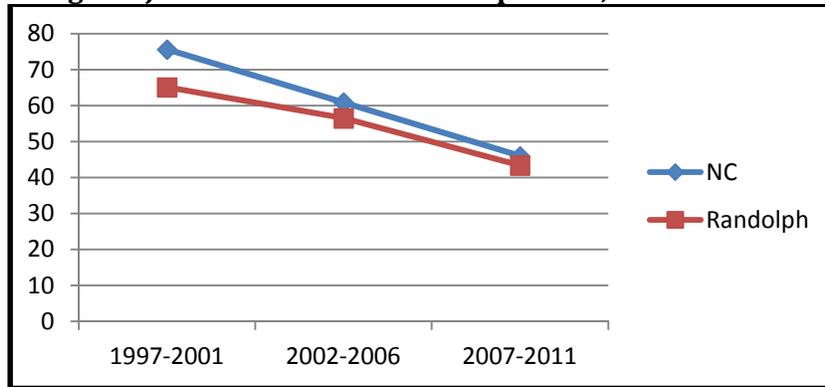
- Craven County has the highest rate of stroke mortality than the other counties.

Age-Adjusted Mortality Rates due to Stroke from 2005-2011 per 100,000 Population

County	2005-2009	2006-2010	2007-2011
Randolph	48.8	43.6	43.4
Craven	45.8	44.3	47.0
Davidson	55.3	55.2	51.9
Harnett	49.7	47.5	49.3
Johnston	46.1	42.7	43.1

Source: NC State Center for Health Statistics. Leading Causes of Death in North Carolina. 2011.
<http://www.schs.state.nc.us/SCHS/data/lcd/lcd.cfm>

Age-Adjusted Stroke Death Rates per 100,000 Residents



- North Carolina's stroke death rate was higher across the board from Randolph County's. During 1997-2001 it was 16% higher, 7.8% during 2002-2006 and 6% in 2007-2011.
- In years 1997-2001 and 2002-2006, Davidson County's death rate from stroke was higher than the states and other peer counties. The rates were 80.7 and 51.9.
- Harnett County had the highest death rate from stroke during the 2002-2006 timespan. The rate was 69.3.

Disparities

- Males are more likely to die from heart disease than females.
- Minority males are more likely to die from stroke than are minority females.

Implications

- Many Randolph County residents need more knowledge about heart disease and stroke risk factors, signs, symptoms and the importance of rapid treatment.
- Promote the importance of regular screenings and prevention measures to Randolph County residents, with special emphasis on male and minority populations.

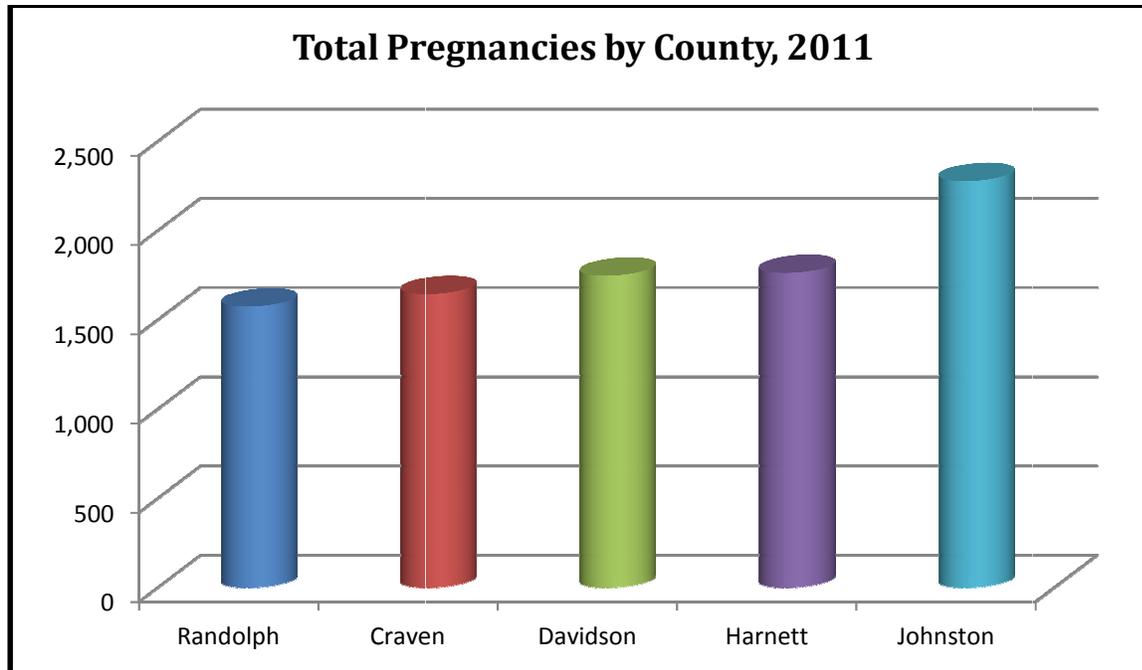
Assets

- Randolph Hospital offers many services to address cardiovascular disease and associated risk factors of the disease. Among these services are comprehensive cardiac rehabilitation programs and weight management programs, etc.
- Many churches, local businesses, including City and County Government, coordinate health fairs for members and employees where free screenings are offered and education materials are available. Screenings include blood pressure, cholesterol, BMI, etc.
- Many businesses and organizations have adopted and implemented a smoke-free or tobacco-free campus. Examples of those include: the Randolph County Health Department, Randolph Hospital and Randolph Community College.

Maternal and Child Health

Overview

The pregnancy rate is based on the number of reported pregnancies that end in abortion, fetal death or live birth and is calculated per 1,000 females between the ages of 15 and 44 in the population. The birth rate is a reflection of the number of live births per 1,000 persons in the population overall.

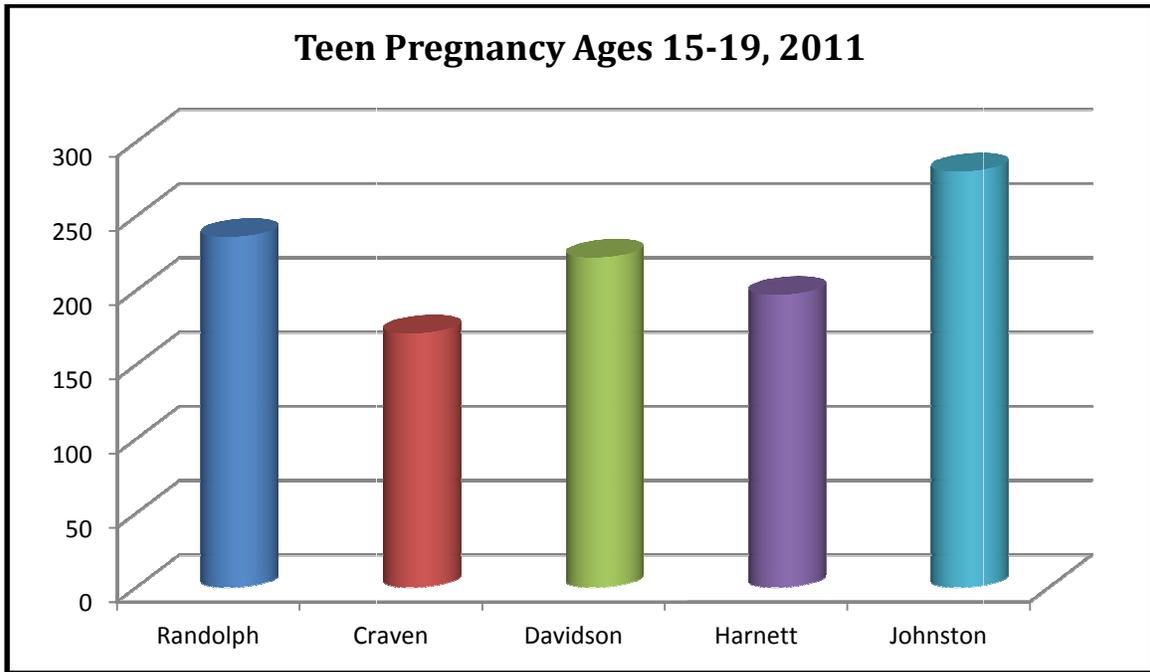


- The total number of pregnancies in Randolph County was 1,574.
- Among the comparison counties, Randolph had the lowest total pregnancies, while Johnston had the highest (2,277).
- White Non-Hispanic women had the highest number of pregnancies for all age groups in all five counties.

Total Pregnancies by Age, 2011

County	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45 +
Randolph	1	216	464	425	303	132	32	1
Craven	0	145	612	463	304	93	23	3
Davidson	4	200	514	487	345	166	30	1
Harnett	4	153	490	564	370	157	22	2
Johnston	2	236	519	671	554	232	60	3

Source: NC State Center for Health Statistics. Total Pregnancies by County: 2011
<http://www.schs.state.nc.us/schs/data/databook>



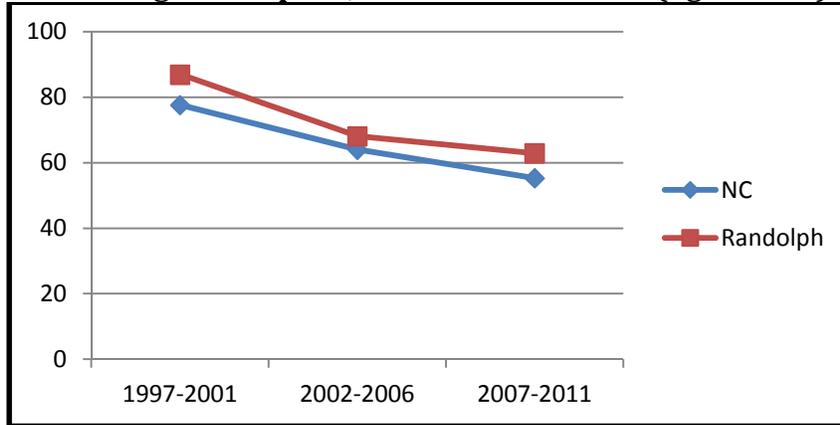
Source: Adolescent Pregnancy Prevention Campaign of NC.
<http://www.appcnc.org/data>

County	County Rank	Rate per 1,000
Craven	24	58.3
Randolph	32	54.7
Johnston	42	49.2
Harnett	47	46.6
Davidson	52	44.5

Source: Adolescent Pregnancy Prevention Campaign of NC.
<http://www.appcnc.org/data>

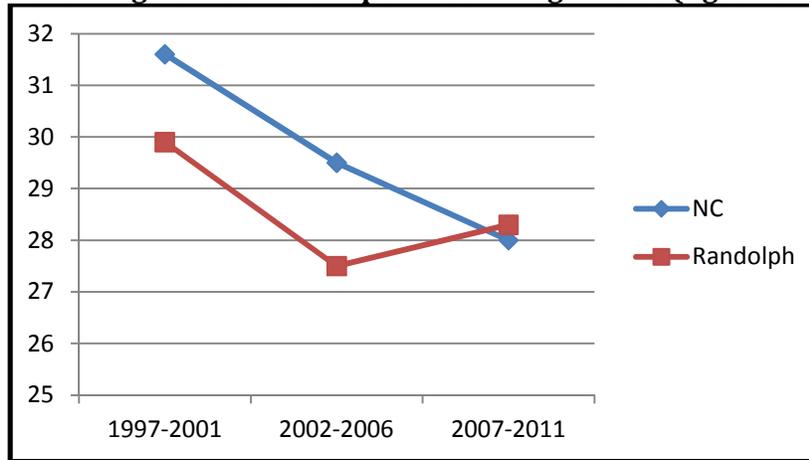
- North Carolina’s teen pregnancy rate is at an all-time low. Key highlights from the most recent data available show:
 - Teen pregnancy has declined more than 58% since it peaked in 1990;
 - Between 2010 and 2011, teen pregnancy declined 12%;
 - Fewer teen parents are having repeat pregnancies;
 - Most of the decline in teen pregnancy is due to the increase of contraceptive use.
- In 2011, Randolph County had 64 (27.1%) repeat pregnancies to 15-19 year olds.
- Randolph County has a higher number of teen pregnancies among the White Non-Hispanic population, with the lowest number among the Black Non-Hispanic population.

Teen Pregnancies per 1,000 Female Residents (Ages 15-19)



- Randolph County's teen pregnancy rates were consistently higher each year when compared to the state. During 1997-2001 Randolph's rate was 12% higher, 6% during 2002-2006 and 14% higher in 2007-2011.
- Craven County has a higher rate for all three time periods than the state or any of the peer counties. During 1997-2001 Craven's rate was 101.5 (17% higher than Randolph), 84.7 in 2002-2006 (17% higher than Randolph) and 75.2 during 2007-2011 (20% higher than Randolph).

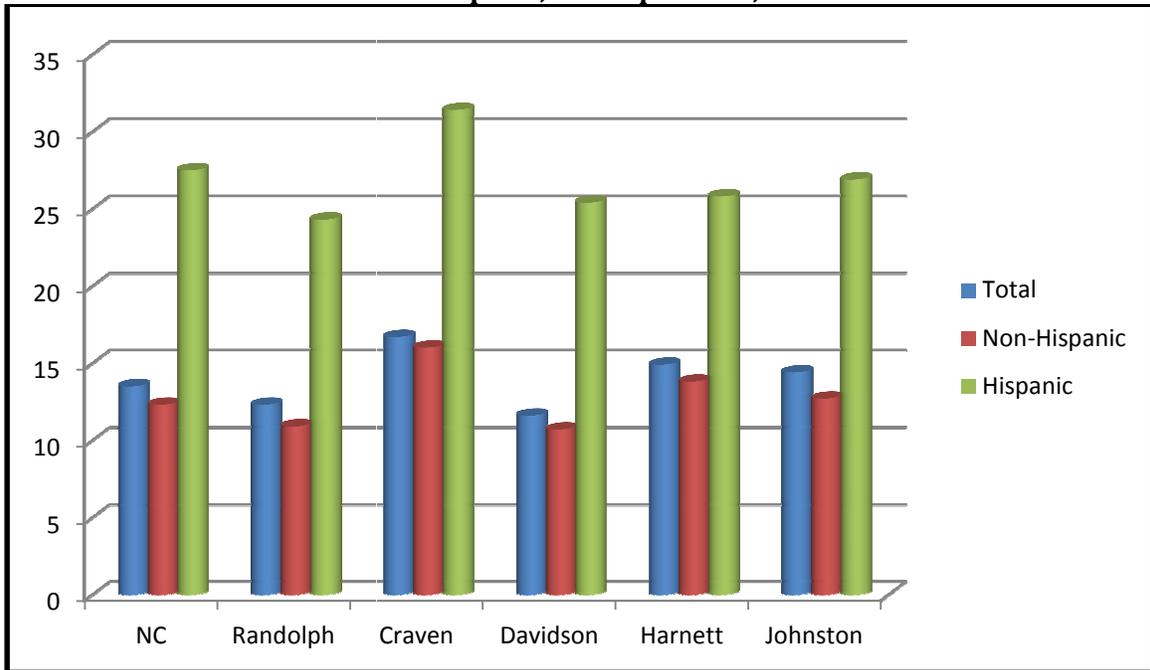
Percentage of Resident Repeat Teen Pregnancies (Ages 15-19)



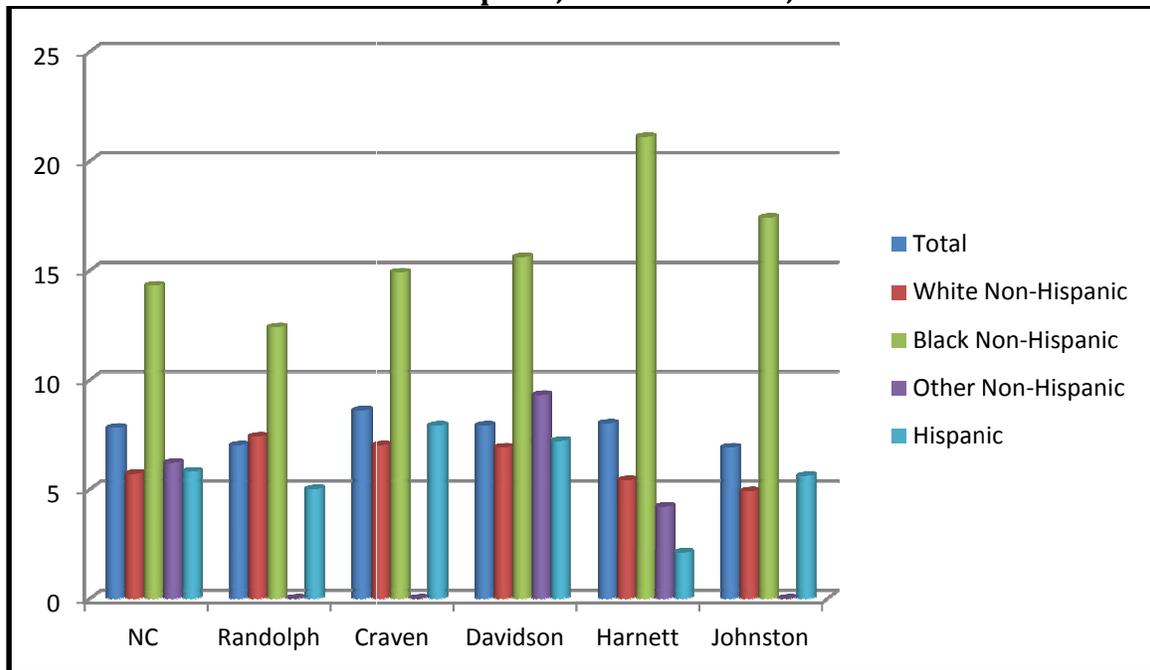
<http://www.schs.state.nc.us/schs/data/trends/pdf>

- Randolph County's rate was lower than the state rate during the time periods 1997-2001 (5%) and 2002-2006 (7%). In 2007-2011 Randolph's rate was 1% higher than the state.
- Craven County's rate was higher than the state and the peer counties for all three timespans. The rates were 34.1 (1997-2001), 34.2 (2002-2006) and 33.8 (2007-2011).

Live Birth Rates per 1,000 Population, 2007-2011

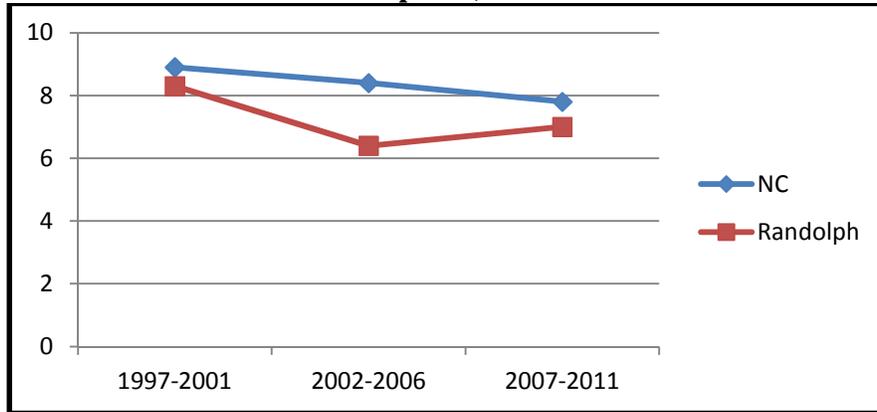


Infant Death Rates per 1,000 Live Births, 2007-2011



Source: NC State Center for Health Statistics. <http://www.schs.state.nc.us/schs/data/databook>

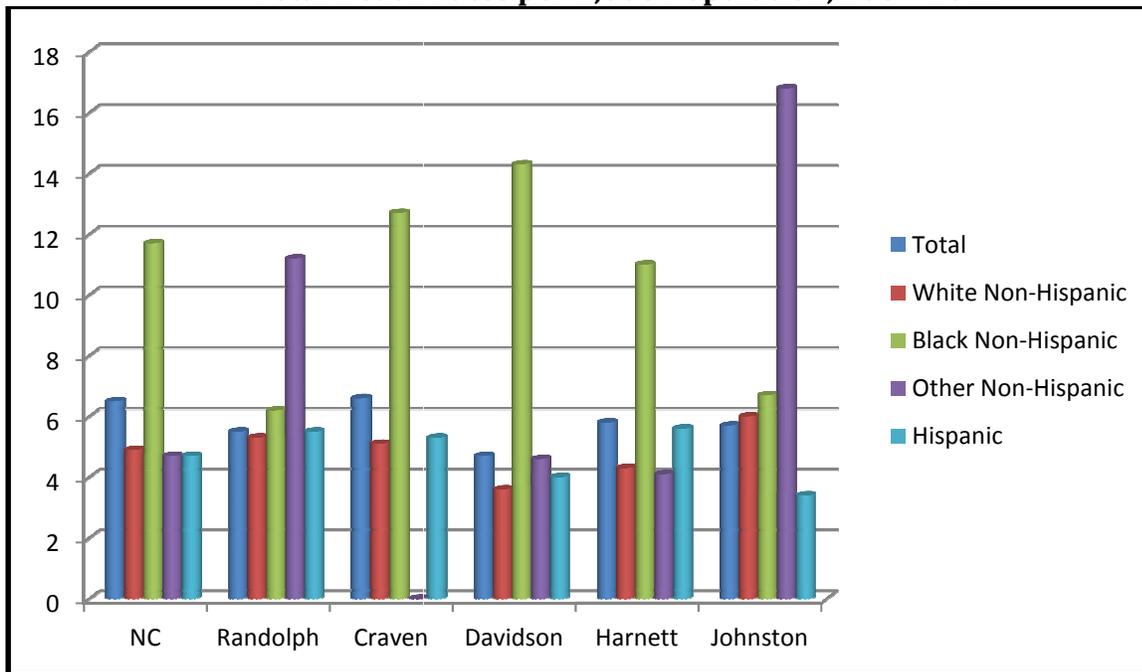
Infant Deaths per 1,000 Live Births



<http://www.schs.state.nc.us/schs/data/trends/pdf>

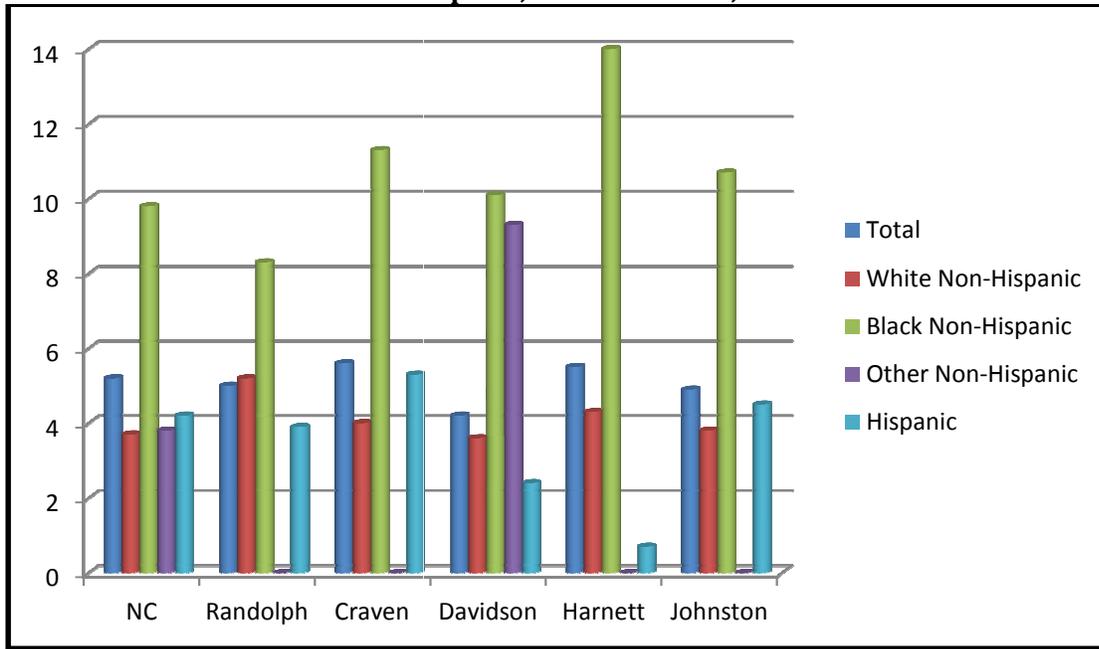
- Randolph County's rate for infant deaths was lower in all three timespans than the states. During 1997-2001 it was 7% lower, 2002-2006, 24% lower and in 2007-2011, 10% lower.
- North Carolina had the highest infant death rate (8.9) during 1997-2001, Harnett County (9.7) during 2002-2006 and Craven County (8.6) in 2007-2011.

Fetal Death Rates per 1,000 Population, 2007-2011



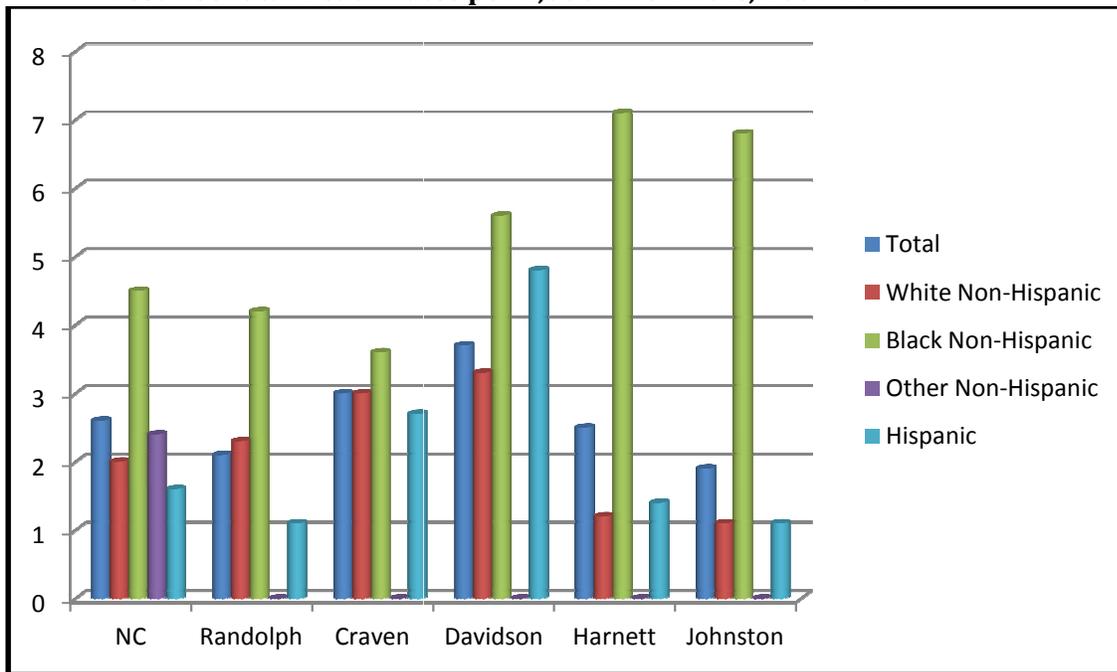
Source: NC State Center for Health Statistics. <http://www.schs.state.nc.us/schs/data/databook>

Neonatal Death Rates per 1,000 Live Births, 2007-2011



- There were no neonatal deaths in the Other Non-Hispanic populations between the years 2007-2011 in either Harnett, Johnston or Randolph Counties.

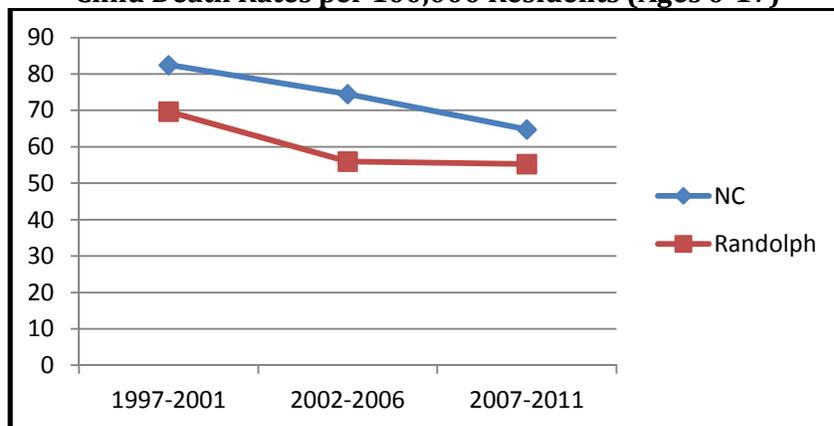
Post Neonatal Death Rates per 1,000 Live Births, 2007-2011



Source: NC State Center for Health Statistics. <http://www.schs.state.nc.us/schs/data/databook>

- There were no post neonatal deaths in any of the five counties listed above.
- Black Non-Hispanic had the highest rate of post neonatal deaths in each county.

Child Death Rates per 100,000 Residents (Ages 0-17)



<http://www.schs.state.nc.us/schs/data/trends/pdf>

- Randolph County’s child death rate is lower during each timespan than the state. It was lower in 1997-2001 by 16%, 26% during 2002-2006 and 15% in 2007-2011.
- Craven County had the highest child death rate during the years 1997-2001 (98.5) and 2007-2011 (82.5), while Harnett County had the highest during 2002-2006 (89.0).

Low Birth Weights by Race (2007-2011)

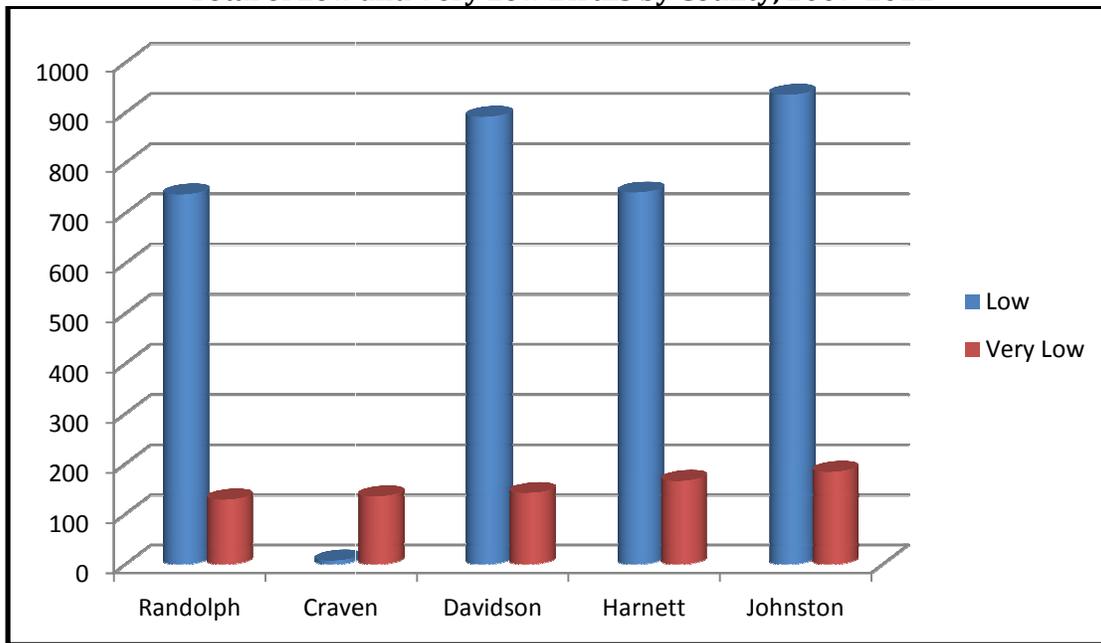
Residence	White Non-Hispanic	Black Non-Hispanic	Other Non-Hispanic	Hispanic
North Carolina	7.6%	14.3%	9.4%	6.5%
Randolph County	8.7%	12.8%	11.4%	6.2%
Craven County	6.4%	14.3%	8.7%	6.9%
Davidson County	9.4%	15.4%	9.3%	6.8%
Harnett County	7.8%	14.9%	5.4%	5.1%
Johnston County	6.8%	14.8%	12.5%	5.5%

Very Low Birth Weights by Race (2007-2011)

Residence	White Non-Hispanic	Black Non-Hispanic	Other Non-Hispanic	Hispanic
North Carolina	1.3%	3.3%	1.5%	1.2%
Randolph County	1.4%	2.7%	1.7%	1.3%
Craven County	1.1%	3.0%	1.6%	1.3%
Davidson County	1.4%	3.2%	0.9%	1.0%
Harnett County	1.6%	3.7%	0.4%	1.2%
Johnston County	1.4%	2.9%	1.7%	1.0%

Source: NC State Center for Health Statistics. <http://www.schs.state.nc.us/schs/data/databook>

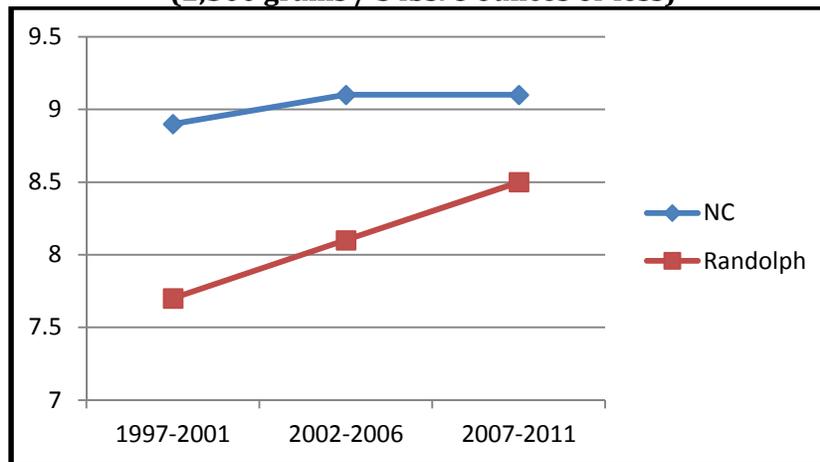
Total of Low and Very Low Births by County, 2007-2011



Source: NC State Center for Health Statistics. <http://www.schs.state.nc.us/schs/data/databook>

- Black Non-Hispanic women have the highest numbers of low and very low birth weights in all five counties and in the state.
- Randolph County has the lowest number of low and very low birth weights among Black Non-Hispanic women.

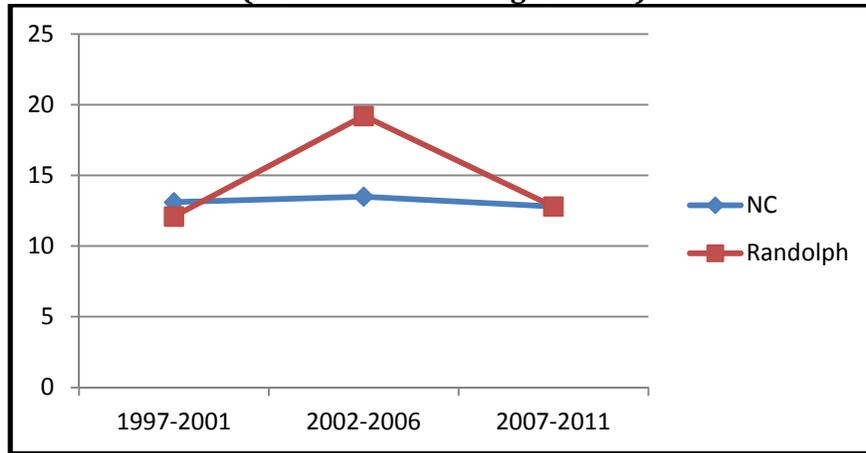
Percentage of Resident Live Births Classified as Low Birth Weight (2,500 grams / 5 lbs. 8 ounces or less)



<http://www.schs.state.nc.us/schs/data/trends/pdf>

- Randolph County's percentage of low birth weight live births was lower for each year. It was lower by 13% (1997-2001), 11% (2002-2006) and by 7% (2007-2011).
- The states percentage was highest during 1997-2001 (8.9), while Davidson's was highest during 2002-2006 (9.5) and 2007.2011 (9.6).

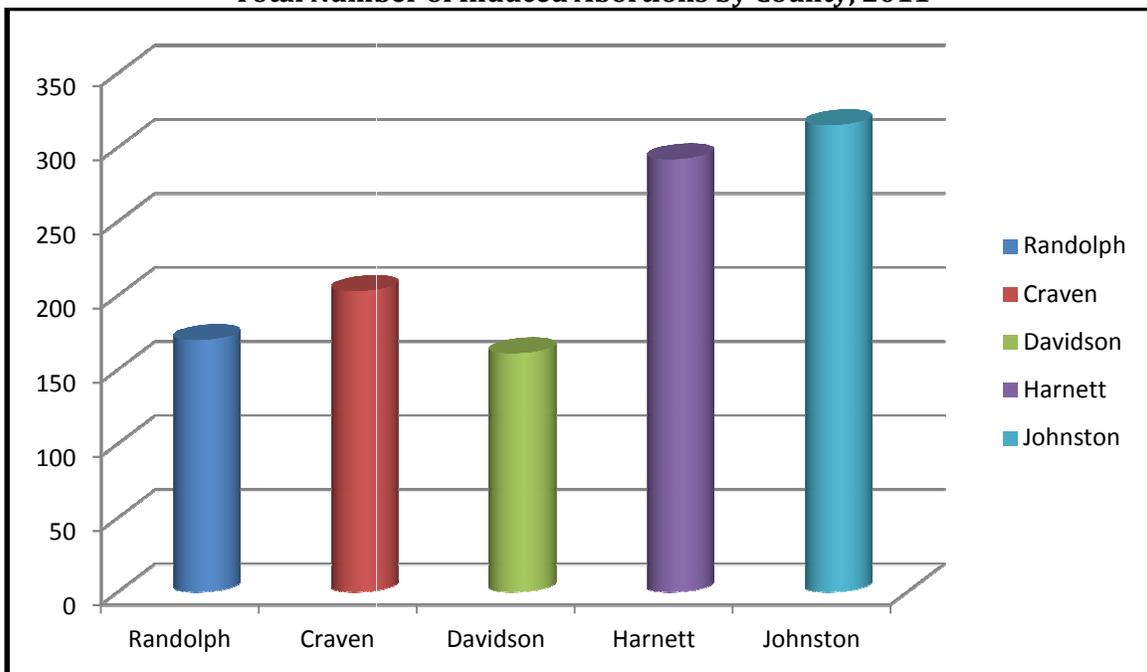
**Percentage of Resident Live Births Classified as Premature
(less than 37 weeks gestation)**



<http://www.schs.state.nc.us/schs/data/trends/pdf>

- Randolph County's percentage of premature births was lower than the state rate during the first two timespans (8% and 4% lower). The percentage was the same for both in 2007-2011.
- Davidson County had the highest percentage of percentage during the first two timeframes (13.5 and 14.0), while Harnett had the highest in 2007-2011 (13.4).

Total Number of Induced Abortions by County, 2011



Source: NC State Center for Health Statistics. <http://www.schs.state.nc.us/schs/data/databook>

- In Randolph County, the highest number of induced abortions occurred in the 25-29 age group, whereas in all the comparison counties, the highest number of abortions was in the 20-24 age group.
- Randolph, Davidson and Johnston Counties had the highest number of abortions in the White Non-Hispanic population, while Craven and Harnett Counties had the most abortions in the Black Non-Hispanic population.

Disparities

- Black Non-Hispanic women are less likely to receive prenatal care within the first trimester of their pregnancy, compared to White and Other Non-Hispanic and Hispanic women.
- Black Non-Hispanic women are more likely to have a low birth weight baby when compared to the other races.
- Overall, Hispanic women have a lower percentage of having a low or very low birth weight baby.

Implications

- Increase education efforts on the importance of prenatal care with special emphasis on the Black Non-Hispanic population.
- Encourage medical providers to educate pregnant women on the dangers of not receiving prenatal care.

Assets

- Pregnancy Care Management staff work to ensure that health department clients receive proper prenatal care. Staff work with Medicaid eligible pregnant women with an increased risk for poor birth outcomes.
- Care Coordination for Children nurses follow high risk children from birth to age five that have Medicaid, no insurance or private insurance. The target population includes children with special health care needs, infants who have been in a neonatal intensive care unit or children living in a “toxic stress” environment (abuse, substance abuse, etc).
- Randolph Hospital offers child birth education classes to residents of Randolph County.

Overweight and Obesity

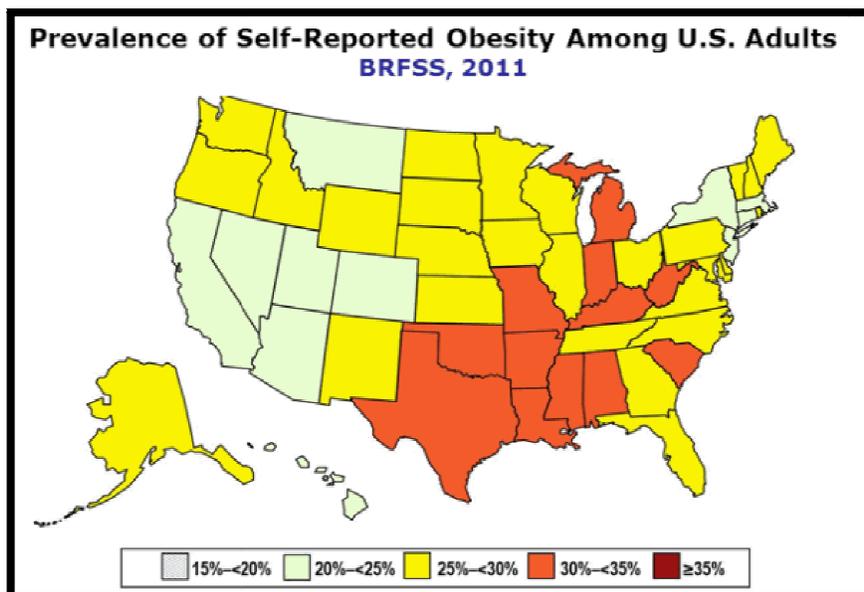
Overview

Overweight and obesity are growing concerns in the United States and in North Carolina. The percentage of people who are overweight or obese has more than doubled over the last 20 years. Overweight is defined as having a body mass index (BMI) of 25 or greater. Obesity is defined as having a BMI greater or equal to 30.

According to the Center for Disease Control and Prevention, more than one-third of U.S. adults (35.7%) are obese. Overweight and obesity have been attributed to lack of physical activity and poor nutrition habits. Four of the ten leading causes of death in the United States are related to obesity, including coronary heart disease, type II diabetes, stroke and several forms of cancer. In 2008, financial costs for obesity were estimated at \$147 billion annually in medical care and lost productivity in North Carolina.

The CDC suggests that there are a variety of factors that play a role in obesity, making it a complex health issue to address. Such factors include: behavior, environment and genetics.

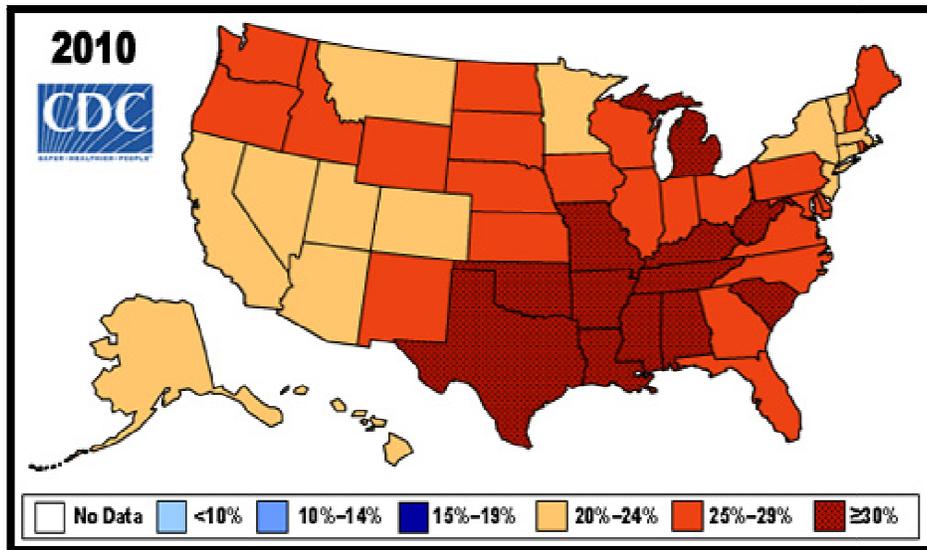
- Overweight and obesity result from an energy imbalance, involving eating too many calories and not getting enough physical activity.
- Body weight is the result of genes, metabolism, behavior, environment, culture and socioeconomic status.
- Behavior and environment play a large role causing people to be overweight and obese. These are the greatest areas for prevention and treatment actions.



- North Carolina's obesity rate was 29.1.
- The Black Non-Hispanic population have the highest age-adjusted rates of obesity (49.5%) compared with Mexican Americans (40.4%), all Hispanics (39.1%) and White Non-Hispanic (34.3%).

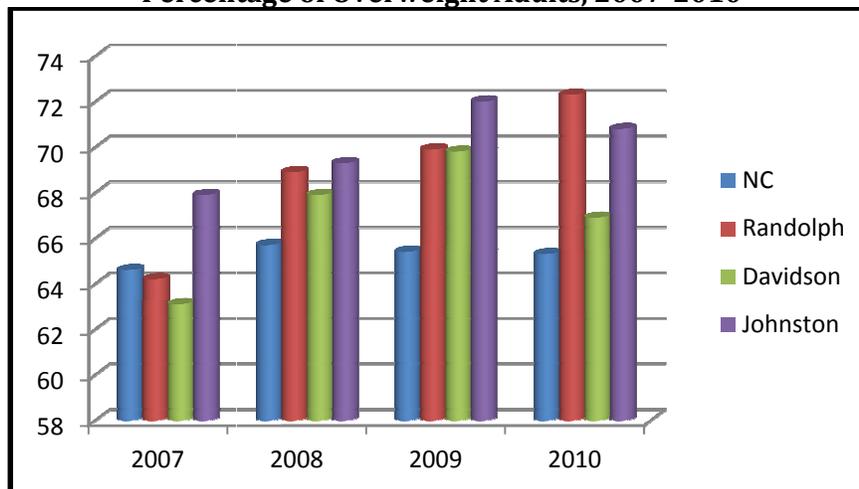
- Among Black Non-Hispanic and Mexican-American men, those with higher incomes are more likely to be obese than those with low income. However, higher income women are less likely to be obese than low income women.

Percent of Obese U.S. Adults (BMI ≥ 30)



- There was a dramatic increase in obesity in the U.S. from 1990-2010.
- No state met the nation's *Healthy People 2010* goal to lower obesity prevalence to 15%. Rather, in 2010, there were 12 states with an obesity prevalence of 30%. In 2000, no state had a prevalence of more than 30%.
- North Carolina's obesity rate in 2010 was 27.8. There were 25 states with a higher rate of obesity compared to NC.

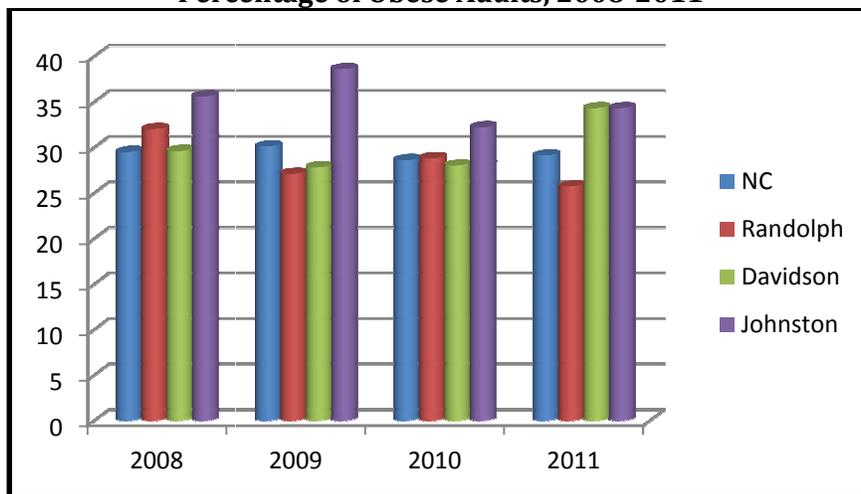
Percentage of Overweight Adults, 2007-2010



Source: BRFSS Results, State Center for Health Statistics: <http://www.schs.state.nc.us>

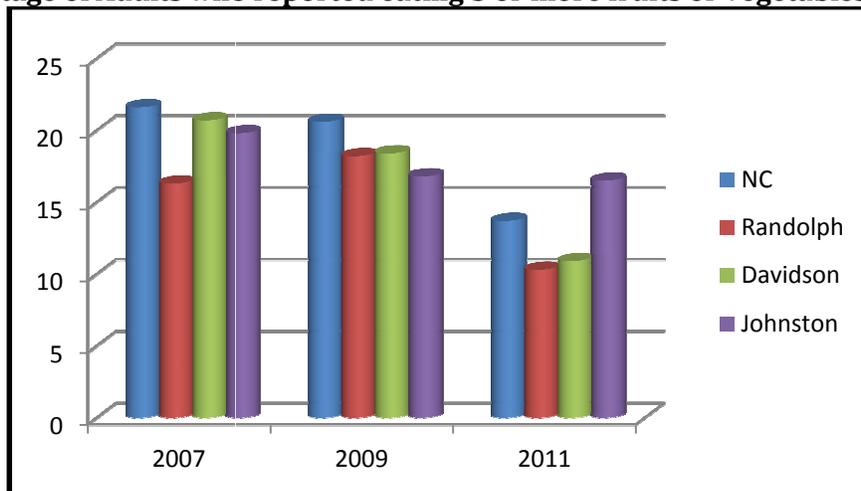
- In 2010, Randolph County's percentage for overweight adults was higher than the state and peer counties.
- For the remaining three years (2007-2009) Johnston County's percentage was higher than the state and peer counties.

Percentage of Obese Adults, 2008-2011



- In 2009 and 2011, Randolph County had the lowest percentage of obese adults than the state and the peer counties listed.
- Johnston County had the highest percentage during 2008-2009. Their percentage was tied with Davidson County's in 2010 for the highest.

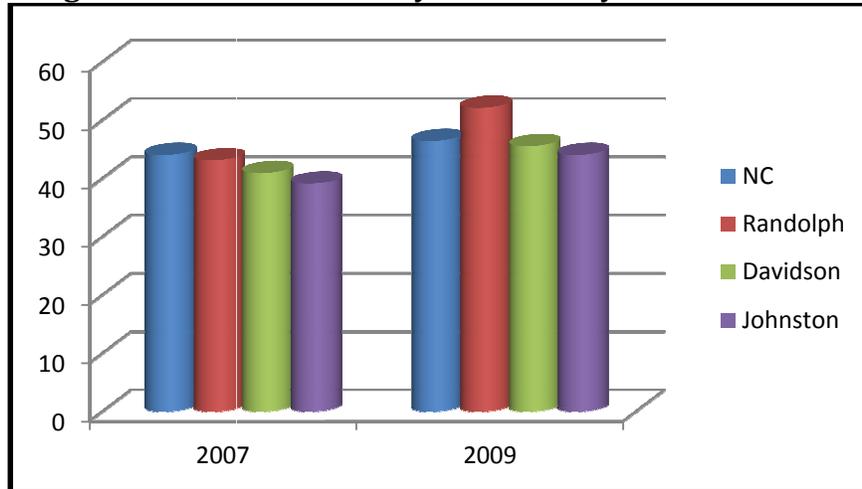
Percentage of Adults who reported eating 5 or more fruits or vegetables per day



Source: BRFSS Results, State Center for Health Statistics: <http://www.schs.state.nc.us>

- Randolph County had the lowest percentage in 2011 and 2007 of adults reporting eating five or more fruits or vegetables per day.

Percentage of Adults who met Physical Activity Recommendations



- Randolph County had the highest rate of adults meeting the recommendations for physical activity in 2009, than the state or peer counties.
- Randolph County’s percentage was 52.1% in 2009, compared to only 43.1% in 2007.
- Information for Craven and Harnett Counties was not available for the information provided above.

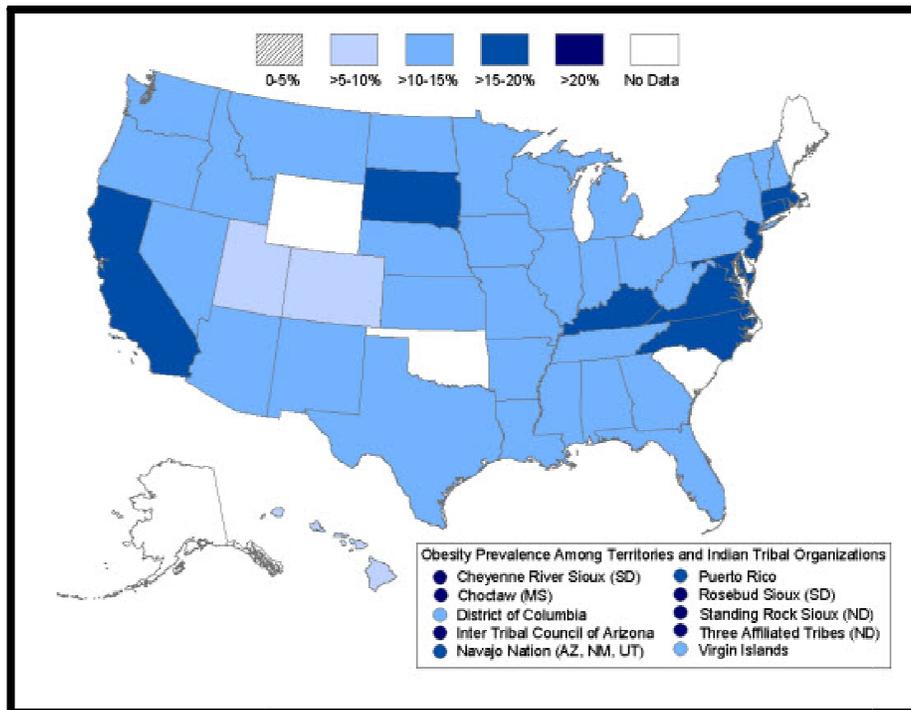
Randolph County: Eating Smart and Moving More		
Report Card*		COST
Overweight or Obese	B+	In 2007, \$5,826,240 (approximately 8%) of total dollars spent on Randolph County Medicaid were attributed to overweight and obesity.
Meets physical activity recommendation	F	
Meets fruit and vegetable recommendation	C-	
*Using 2006 BRFSS data, NC counties were ranked and then graded according to their position within that ranking. Ranks above the 60th percentile mark received grades A+ through D-; scores below received an F		
In Randolph County, residents are most likely to...**		
...drink 8+ glasses of regular cola per week (calories equal to an 18 pound weight gain in 1 year) ...perceive a lack of time to prepare or eat healthy meals ...families own video games ...exercise one or fewer times per week **Claritas iMARK™ Online, PRIZM 2006		
2007 County Highlights: One local worksite increased the number of healthy options in its vending machines A county-wide physical activity program was established for local residents		
<i>Where and how changes can be made in all counties:</i>		
Community Increase access to places for physical activity, create farmers' markets and/or farm stands Schools Ensure children receive quality physical education, implement nutrition standards Worksite Offer physical activity classes, provide nutrition counseling		

Childhood Obesity

Approximately 17% (or 12.5 million) of children and adolescents aged 2-19 are obese. Since 1980, obesity prevalence among children and adolescents has almost tripled. Significant racial and ethnic disparities in obesity prevalence exist among U.S. children and adolescents. In 2007-2008, Hispanic boys aged 2-19 were highly more likely to be obese than White Non-Hispanic boys. However, Black Non-Hispanic girls were more likely to be obese than White Non-Hispanic girls.

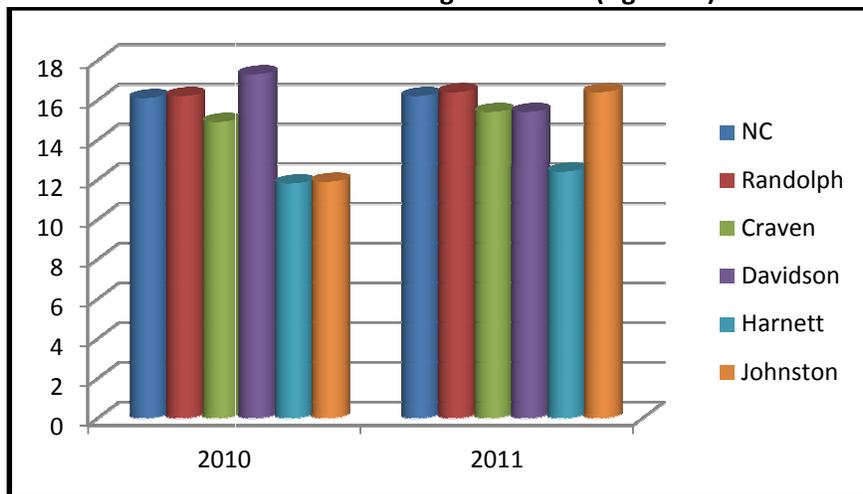
Obesity and extreme obesity among U.S. low income, preschool aged children went down for the first time in recent years, according to CDC's first national study (conducted from 1998-2010). From 2003 through 2010, the prevalence of obesity decreased slightly from 15.21% to 14.94%. The prevalence of extreme obesity also decreased slightly from 2.22% to 2.07%. The greatest decrease in extreme obesity was among two year old Asian/Pacific Islander children. Extreme obesity significantly decreased among all racial groups except American Indians/Alaska Natives.

2011 State Prevalence among Low-Income Children (2-4 Years of Age)



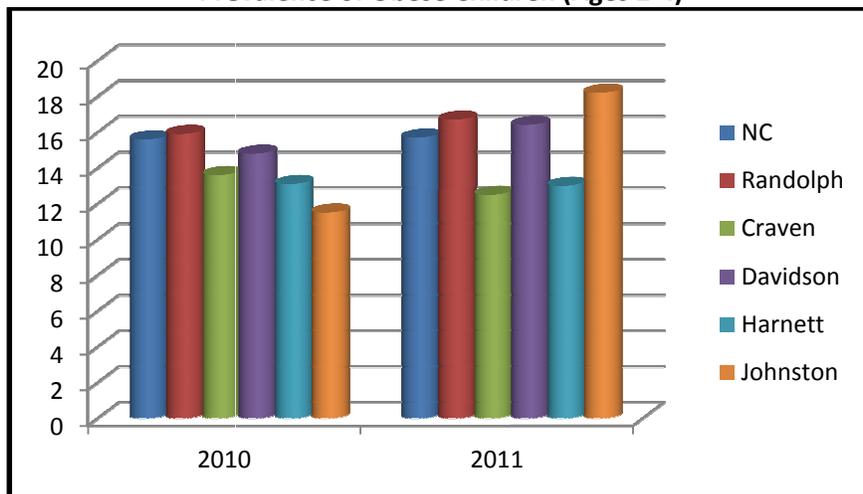
Source: www.cdc.gov

Prevalence of Overweight Children (Ages 2-4)



- Randolph and Johnston County’s had the highest percentage (16.4%) of overweight children in 2011.
- In 2010, Randolph County’s prevalence of overweight children was 16.2%, the highest when compared to the state and peer counties.
- Harnett County had the lowest percentages for both years (12.4% and 11.8%).

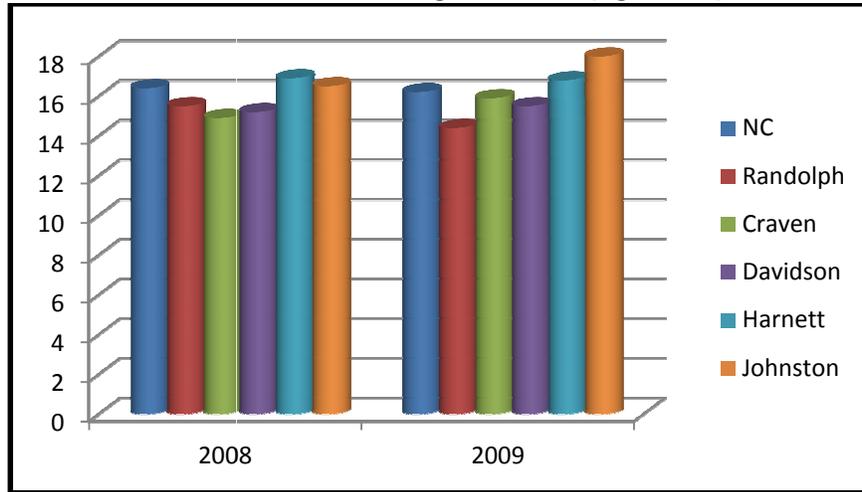
Prevalence of Obese Children (Ages 2-4)



Source: Eat Smart Move More NC (NC-NPASS)

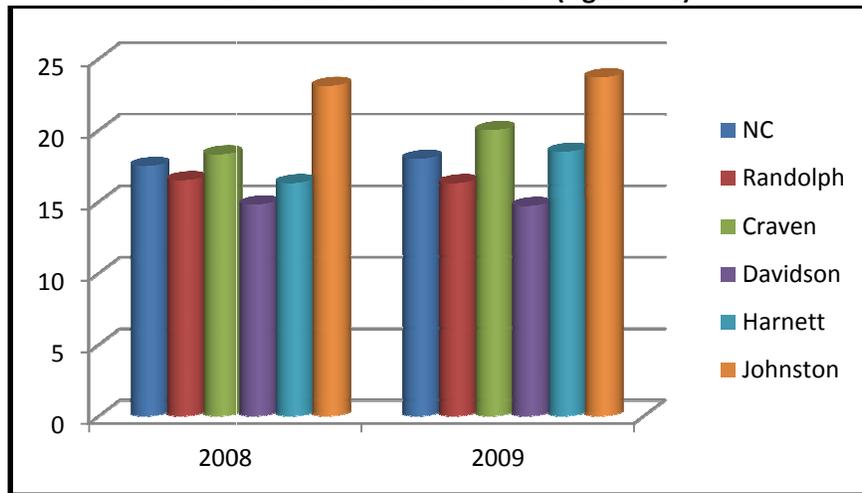
- Randolph County had the highest percentage of obese children during 2010 (15.9%), while Johnston had the highest in 2011 (18.2%).
- Harnett County had the lowest percentage in 2010 (13.1%), while Craven County had the lowest percentage in 2011 (12.5).

Prevalence of Overweight Children (Ages 2-18)



- Craven County had the lowest prevalence (14.9%) in 2008 of overweight children aged 2-18, while Harnett County had the highest (16.9%).
- Randolph County had the lowest prevalence (14.4%) in 2009 than the state and peer counties, while Johnston County had the highest prevalence (18.0%).

Prevalence of Obese Children (Ages 2-18)



Source: Eat Smart Move More NC (NC-NPASS)

- Johnston County's percentage was higher during both years than the state or peer counties (23.1% in 2008 and 23.7% in 2009).
- Davidson County had the lowest prevalence of obese children ages 2-18 in both 2008 (14.7%) and in 2009 (14.8%).

Disparities

- In North Carolina, 2 out of 3 adults are overweight or obese.
- More than one-third of youth are overweight and 17% are obese.
- African Americans are more likely than Whites to be obese, be physically inactive and have inadequate fruit and vegetable consumption.
- The Black Non-Hispanic population have the highest age-adjusted rates of obesity compared with Mexican Americans, all Hispanics and White Non-Hispanic.

Implications

- Promote such programs as Eat Smart, Move More, North Carolina throughout the county.
- Work with local businesses and organizations to offer staff wellness programs that focus on healthy eating and the importance of regular physical activity.
- Children in Randolph County need more access to after school programs that could increase their levels of physical activity.
- Promote such programs as the NC Eat Smart, Move More, Weigh Less or the Dining with Diabetes within the county with special emphasis on the African American and minority populations.

Assets

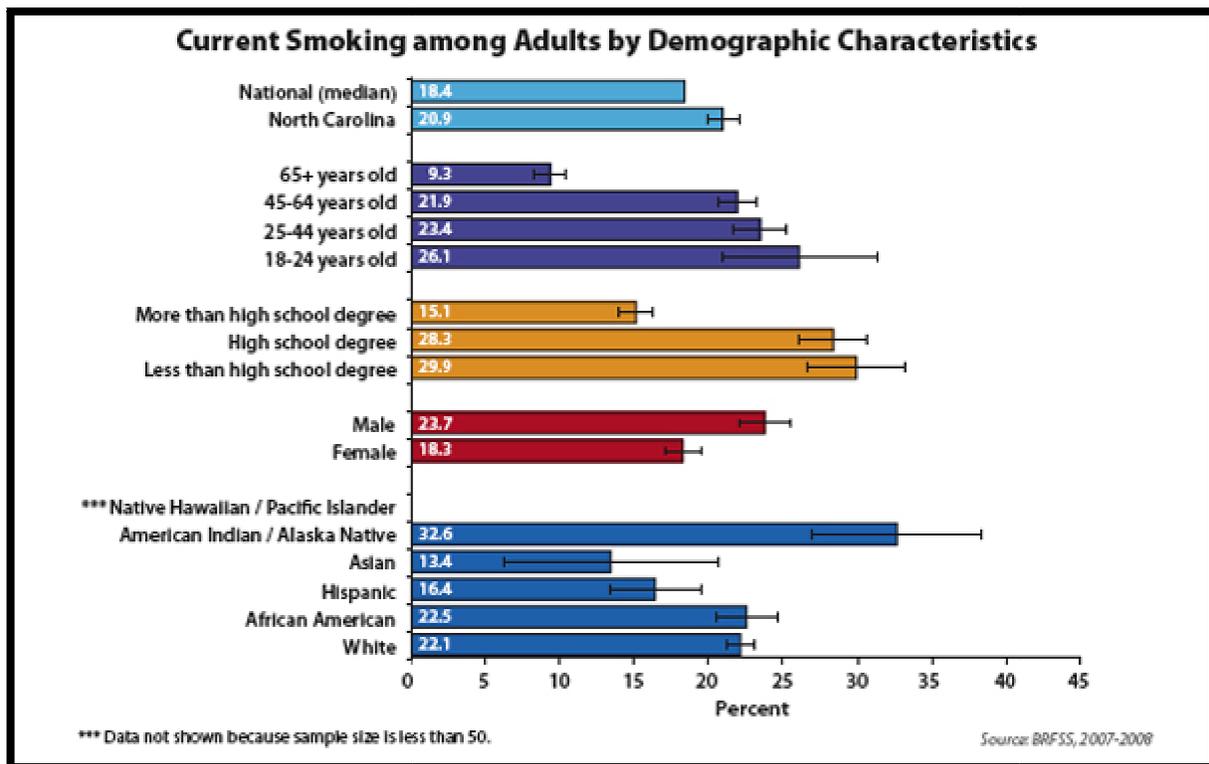
- The health department collaborates with the NC Cooperative Extension Office to offer the NC Eat Smart, Move More, Weigh Less Program throughout the county in various businesses and faith communities.
- The Health Education Section with the Randolph County Health Department is available to work with local businesses to implement a healthy vending machine policy. In addition, Health Educators have worked with business owners/managers to map out walking trails for employees.
- Elementary schools in both the Randolph County and the Asheboro City school districts have been awarded the USDA Fruit and Vegetable Grant.
- The NC Division of Public Health was awarded \$7.4 million as part of the U.S. Department of Health and Human Services' (HHS) Community Transformation Grants (CTG). The grant supports public health efforts in local communities to reduce chronic diseases, promote healthier lifestyles, reduce health disparities, and control health care spending across NC. The CTG Project focuses on three priority areas across the nation: tobacco-free living; active living and healthy eating; and evidence-based quality clinical and other preventive services. Randolph County is one of 10 counties that make up Region 6. The other counties are: Anson, Cumberland, Harnett, Hoke, Lee, Montgomery, Moore, Richmond and Scotland. The main objectives of Region 6 include attaining joint-use agreements, enhancing local farmer's markets and decreasing the number of governmental buildings/grounds that allow tobacco use.
- Since the 2009 assessment, several farmers markets have been established throughout the county. There is now a weekly market held at the health department, the department of social services and Randolph Hospital. In addition, Asheboro City and Archdale Parks and Recreation both offer a farmers market three times per week.

Tobacco

Overview

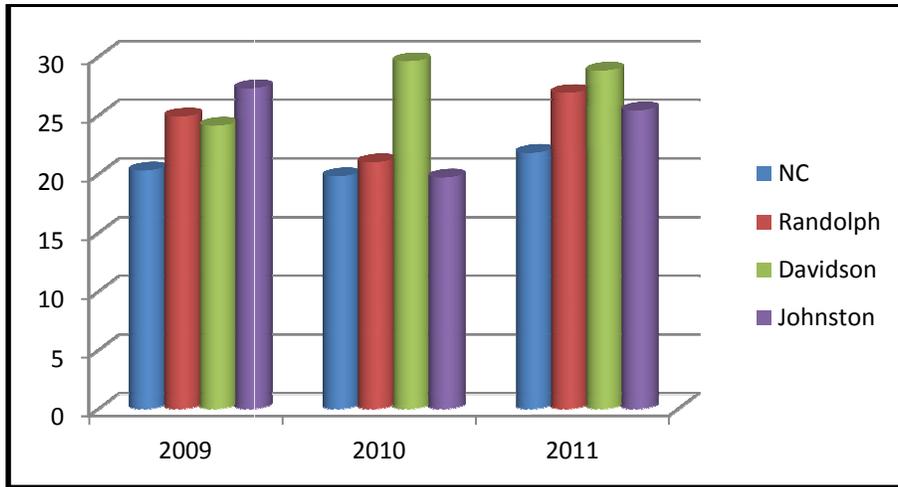
Tobacco use is the single most preventable cause of death in the United States. Each year in the United States, cigarette smoking and exposure to secondhand smoke causes 443,000 (1 in 5 deaths). Economic losses are also staggering. Smoking-caused diseases result in \$96 billion in health care costs annually.

According to the Center for Disease Control and Prevention (CDC), in North Carolina, 20.9% of the adult population (aged 18+ years), over 1,458,000 individuals, are current cigarette smokers. Across all states, the prevalence of cigarette smoking among adults ranges from 9.3% to 26.5%. North Carolina ranks 38th among the states.



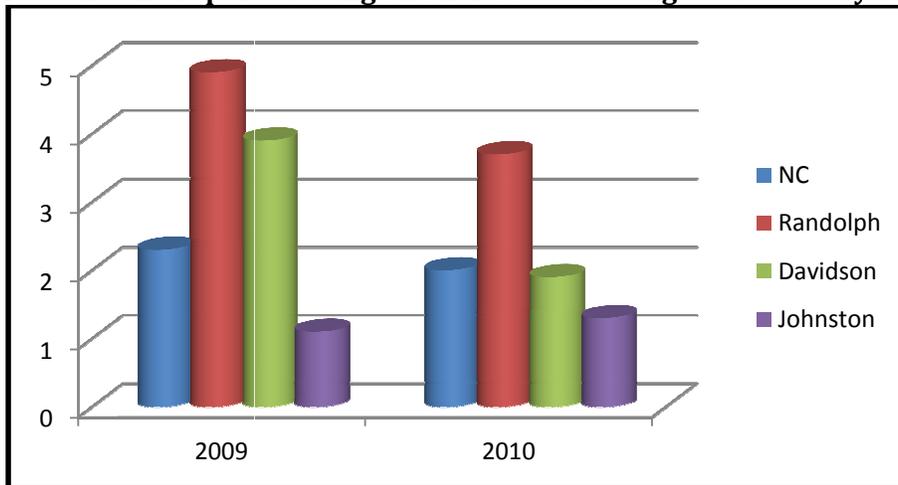
- Among youth aged 12–17 years, 10.8% smoke in North Carolina. The range across all states is 6.5% to 15.9%. North Carolina ranks 25th among the states.
- Among adults aged 35+ years, over 12,300 died as a result of tobacco use per year, on average, during 2000–2004. This represents a smoking-attributable mortality rate of 298.4/100,000. North Carolina's smoking-attributable mortality rate ranks 38th among the states.

Percent of Current Smokers



- Johnston County had the highest percentage of smokers in 2009 (27.3%).
- Davidson County had a higher percentage of smokers in 2010 (29.6%) and in 2011 (28.8%).

Percent who reported using smokeless or chewing tobacco everyday



Source: State Center for Health Statistics: <http://www.schs.state.nc.us>

- Randolph County has a staggering higher percent of smokeless or chewing tobacco users than the state or peer counties. In 2009, Randolph's percentage was 4.9 and 3.7 in 2010.
- Johnston County has the lowest percentages for both years (1.1% in 2009 and 1.3% in 2010).

Disparities

- African Americans are more likely to be current smokers than whites.
- Males are more likely to use tobacco products than females.
- Persons with a high school diploma or less use tobacco products more frequently when compared to persons with a Bachelor's degree and higher.
- Persons whose household income is less than \$50,000 use tobacco products more when compared to someone whose household income is above \$50,000 a year.

Implications

- Increase promotion efforts of the NC Quitline within the county, with special emphasis on males, school-aged children and the African American population.
- Promote the implementation of the 100% Tobacco-Free Policy and encourage community agencies to adopt policy.

Assets

- Many businesses and organizations have adopted and implemented a smoke-free or tobacco-free campus. Examples of those include: the Randolph County Health Department, Randolph Hospital and Randolph Community College.
- The Health Educator of the health department is part of the Community Transformation Grant Project (CTG). One of the three main objectives during the five-year grant period is to increase the number of tobacco-free, smoke-free public places. Such places include local parks and governmental buildings.

Section Four

Environmental Health

Environmental Health

Overview

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 Randolph County's environmental health are food and lodging, water quality, air quality, lead hazards and the built environment.

Food and Lodging

The Randolph County Health Department Food and Lodging staff issue permits 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. Food and Lodging 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.

The Food and Lodging staff adapted to a significant change in the North Carolina Food Service Rules that went into effect the first quarter of fiscal year 2012-13. Previously Food and Lodging staff utilized a twenty eight (28) page document, "Rules Governing the Sanitation of Food Service Establishments". The "North Carolina Food Code", a two hundred and five (205) page document, has taken its place. The staff attended educational classes, completed online FDA courses and are currently being trained in applying the new code and using the new inspection form. Printed materials have been distributed to food service operators outlining implementation changes.

In fiscal year 2012-13, Food and Lodging staff conducted quarterly inspections of 736 establishments, made 102 pre-opening and construction visits; issued 235 new restaurant, transitional, or temporary food service permits, investigated 122 complaints, made 899 consulting visits and, conducted 24 special event visits and inspections.

Water Quality: Surface Water

Surface water is defined as any water collecting on the ground or in a stream, river, lake, sea or ocean, as opposed to groundwater. Randolph County has three watersheds which include the Deep River, the Lower Yadkin River and the Upper Pee Dee River. According to data from the Environmental Protection Agency (EPA) and the state of North Carolina (1998), 8% of Randolph County's surface water is considered to be either impaired or threatened, which means it does not attain water quality standards due to pollutants and stressors. Such pollutants and stressors affecting water quality in Randolph County are: sediments (34%), pathogens (18%) and metals (5%). (Source: www.scorecard.org)

Sedimentation refers to soil particles that enter the water column from eroding land. Depending on climate, geology and vegetation, watersheds experience a natural sediment load. Sedimentation is considered a pollutant when it exceeds this natural level and has a detrimental effect on water quality. Rain washes silt and other soil particles off of plowed fields, construction sites, logging sites, urban areas

and strip-mined lands into water bodies. Sedimentation and siltation can severely alter aquatic communities. Sediment may clog and abrade fish gills or suffocate eggs and aquatic insect larvae on the bottom. Suspended silt may interfere with recreational activities and aesthetic enjoyment of water bodies by reducing water clarity. Nutrients and toxic chemicals may attach to sediment particles on land and ride the particles into surface waters where the pollutants may settle with the sediment or detach and become soluble in the water column. (Source: www.scorecard.org)

Pathogens such as waterborne bacteria, viruses and protozoa can cause human illnesses, ranging from typhoid and dysentery to minor skin diseases. These pathogens may enter waters through a number of routes, including inadequately treated sewage, storm water drains, septic systems, runoff from livestock pens, and sewage dumped overboard from recreational boats. Because it is impossible to test waters for every possible disease causing organism, regulatory agencies usually measure E. coli indicator bacteria (which are found in great numbers in the stomachs of warm blooded animals). The presence of indicator bacteria suggests that the water body may be contaminated with untreated sewage and that other, more dangerous organisms may also be present. Bacterial criteria are frequently used to determine if waters are safe for contact recreation or shellfish harvesting. (Source: www.scorecard.org)

Pollution in surface water is usually caused by what is considered Non-point sources (NPS). NPS pollution is caused by rainfall or snowmelt moving over and through the ground. As the runoff moves, it picks up and carries away natural and human-made pollutants, finally depositing them into lakes, rivers, wetlands, coastal waters, and underground sources of drinking water. These pollutants include: excess fertilizers, herbicides, and insecticides from agricultural lands and residential areas; oil, grease, and toxic chemicals from urban runoff and energy production; sediment from improperly managed construction sites, crop and forest lands, and eroding stream banks; salt from irrigation practices and acid drainage from abandoned mines; and bacteria and nutrients from livestock, pet wastes, and faulty septic systems. (Source: www.scorecard.org)

Ground Water

The Randolph County Health Department On-Site Wastewater Program staff is responsible for approving the location of wells and issuing required well permits, per state standards. This service area permits private well construction, regulates well repair and abandonment, inspects newly constructed wells and wells located on lands that are known to change ownership. Staff monitors groundwater through well water sampling and educates individuals and the community of the importance of proper treatment and disposal of wastewater. They assist Emergency Services in evaluating the impact of spills on well water supplies and the local environment, conduct soil evaluations to determine suitability of property for subsurface wastewater treatment and disposal, and design and permit subsurface wastewater treatment.

During fiscal year 2012-13 On-Site Wastewater Program staff conducted 292 site evaluations and issued 191 permits for septic systems, for either a new system or system expansion. In addition, there were 117 visits made to verify sewage complaints within the same year.

Air Quality

The Air Quality Index (AQI) is an index for reporting daily air quality. It tells you how clean or polluted our air is, and what associated health effects might be a concern for us. The AQI focuses on health effects people may experience within a few hours or days after breathing polluted air. EPA calculates the AQI for five major air pollutants regulated by the Clean Air Act: ground-level ozone, particle pollution (also known as particulate matter), carbon monoxide, sulfur dioxide and nitrogen dioxide. For each of these pollutants, EPA has established national air quality standards to protect public health. Ground-level ozone and airborne particles are the two pollutants that pose the greatest threat to human health in this country.

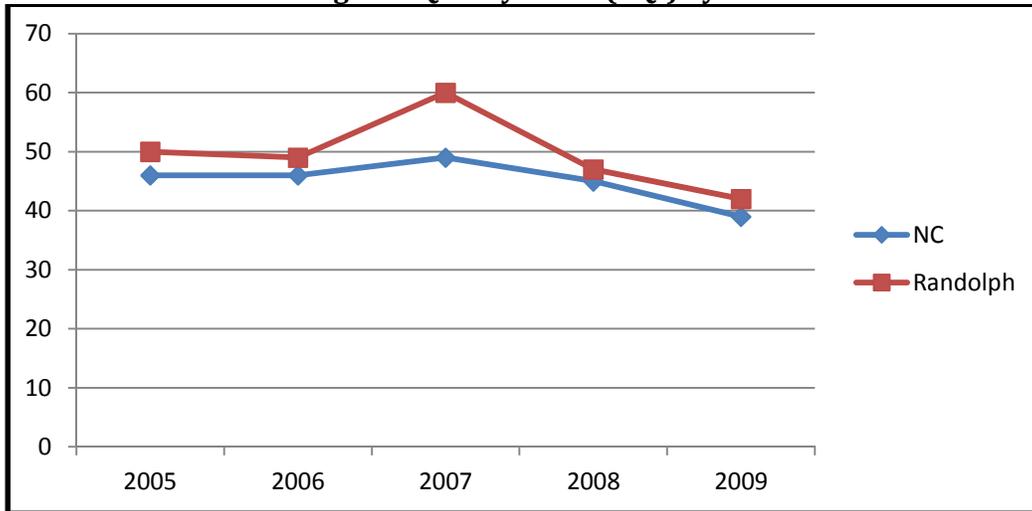
The AQI runs from 0 to 500. The higher the AQI value, the greater the level of air pollution and the greater the health concern. For example, an AQI value of 50 represents good air quality with little potential to affect public health, while an AQI value over 300 represents hazardous air quality. An AQI value of 100 generally corresponds to the national air quality standard for pollutants, which is the level EPA has set to protect public health. AQI values below 100 are generally thought of as satisfactory. When AQI values are above 100, air quality is considered to be unhealthy; at first for certain sensitive groups of people, then for everyone as AQI values get higher.

The following table describes the numerical values and corresponding “colors” used to convey AQI.

Definition of Air Quality Index (AQI) Categories		
AQI	Numerical Value	Description
Good (Green)	0-50	Air quality is considered satisfactory, and air pollution poses little or no risk.
Moderate (Yellow)	51-100	Air quality is acceptable, however, for some pollutants there may be a moderate health concern for a very small number of people who are unusually sensitive to air pollution.
Unhealthy for Sensitive Groups (Orange)	101-150	Members of sensitive groups may experience health effects. The general public is not likely to be affected.
Unhealthy (Red)	151-200	Everyone may begin to experience health effects; members of sensitive groups may experience more serious health effects.
Very Unhealthy (Purple)	201-300	Health alert: everyone may experience more serious health effects.
Hazardous (Maroon)	301-500	Health warnings of emergency conditions. The entire population is more likely to be affected.

Source: www.airnow.gov

Average Air Quality Index (AQI) by Years

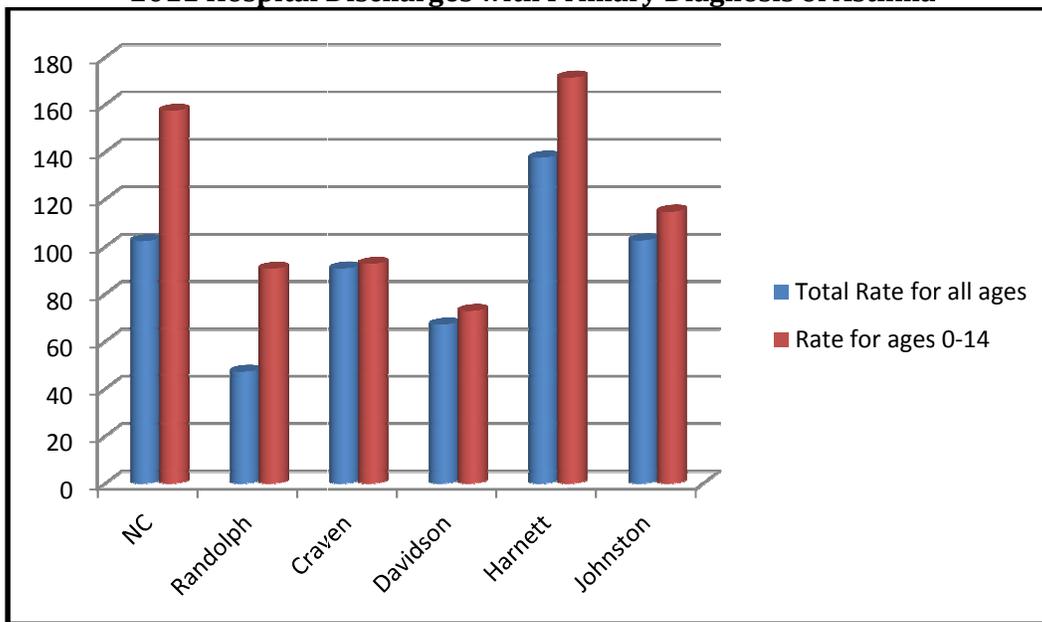


Source: www.usa.com/randolph-county-nc-air-quality.html

- Craven County had the lowest average air quality index for all five years represented when compared to the state and peer counties.

Asthma

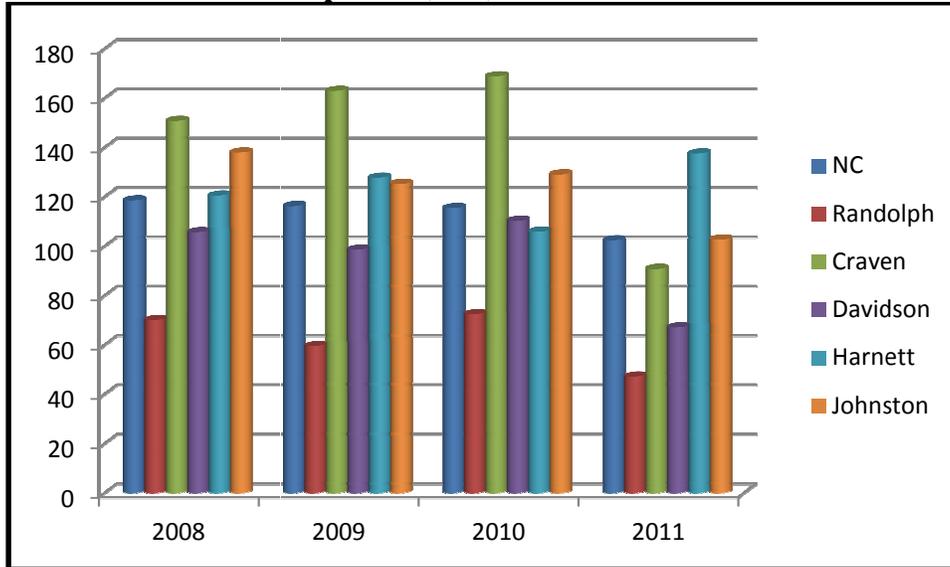
2011 Hospital Discharges with Primary Diagnosis of Asthma



Source: <http://www.schs.state.nc.us/databook>

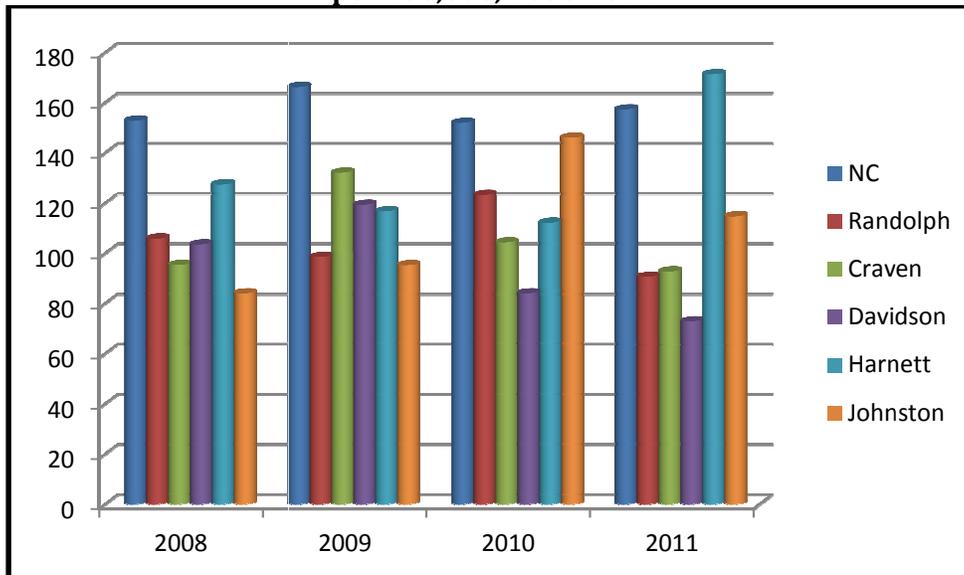
- Randolph County had the lowest hospital discharges with an asthma diagnosis than the state and the peer counties for both age groups.

Total Rate of Hospital Discharges with a Primary Diagnosis of Asthma per 100,000, 2008-2011



- Randolph County had the lowest rate of hospital discharges related to asthma than the state and all peer counties for the four years listed.

Rate of Hospital Discharges with a Primary Diagnosis of Asthma for ages 0-14 per 100,000, 2008-2011



Source: <http://www.schs.state.nc.us/databook>

Childhood Blood Lead Screenings

Randolph County Health Department serves families with children who have been identified with elevated blood lead levels. Through Child Health Services, children in Randolph County between the ages of 1-6 years are tested free of charge based on state guidelines. Elevated blood lead levels currently range from 5-19 micrograms/deciliter. A child is considered to have lead poisoning when their levels ranged from 20-29 micrograms/deciliter and anything above 29 mcg. are grounds for immediate referral for medical attention.

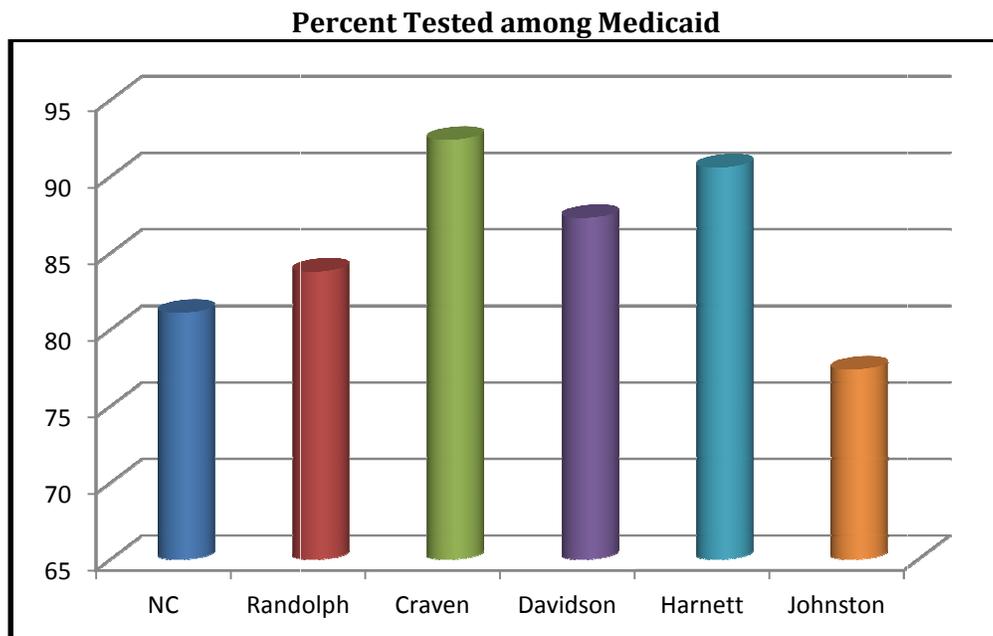
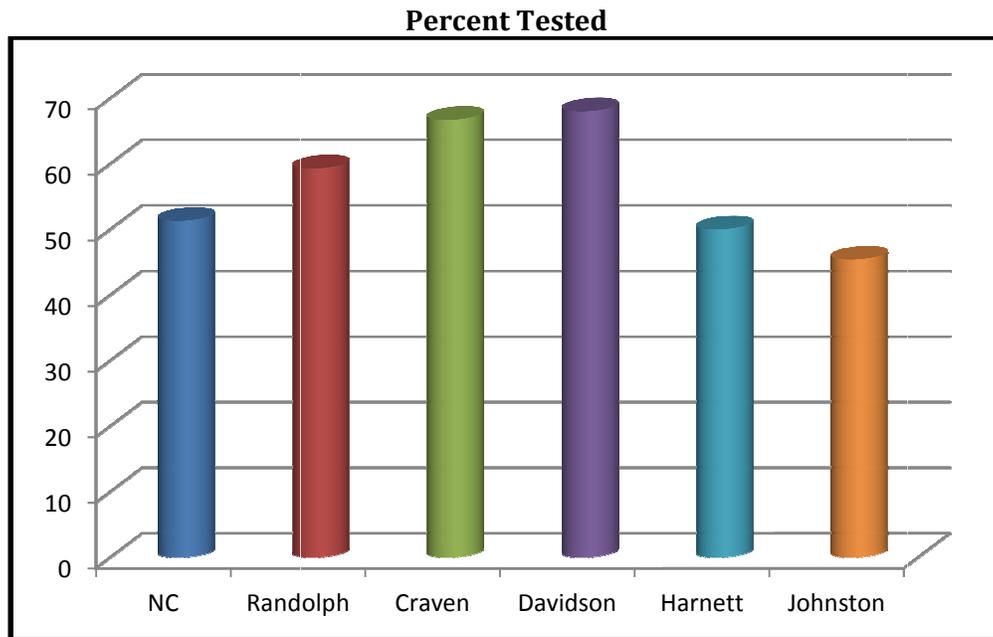
Children tested in the office of private physicians who have high lead levels are referred to the health department's Child Health Services (CHS). The Child Health Services Coordinator serves as the Lead Tracker for Randolph County. In addition to referral, the CHS Coordinator receives a list quarterly from the State Office for Lead Tracking of all children living in Randolph County who have current elevated lead levels. The quarterly list allows the Coordinator to be aware of any children who needed services but were not referred to the program.

Lead Tracking is extensive and involves: (1) making an appointment for counseling and educating the family about lead effects, possible sources, cleanliness, job-related dangers and the importance of a proper diet that may help purge the lead from the body; (2) helping the family identify the possible source(s) of lead exposure which involves referring the case to Environmental Health so that an investigation of the home can be conducted; (3) continued follow-up of the child's progress every two to three months through laboratory testing and reinforcement of ways to prevent re-exposure and continued elevated levels. Occasionally, Child Protection Services may be involved if the parents are non-compliant with further testing; however, CPS involvement is rare.

During fiscal year 2012-13, ten children were newly identified as having elevated blood lead levels. Out of those, seven had levels ranging from 5-9. The remaining three had blood lead levels ranging from 10-19. Various sources of lead resulted in exposure, such as peeling paint, toys, tools, etc. At the 10-19 lead level, environmental investigations are optional, however, it is recommended that all children receive blood lead level checks every two to three months. In addition, families are educated as to the sources and given suggestions on how to decrease lead levels.

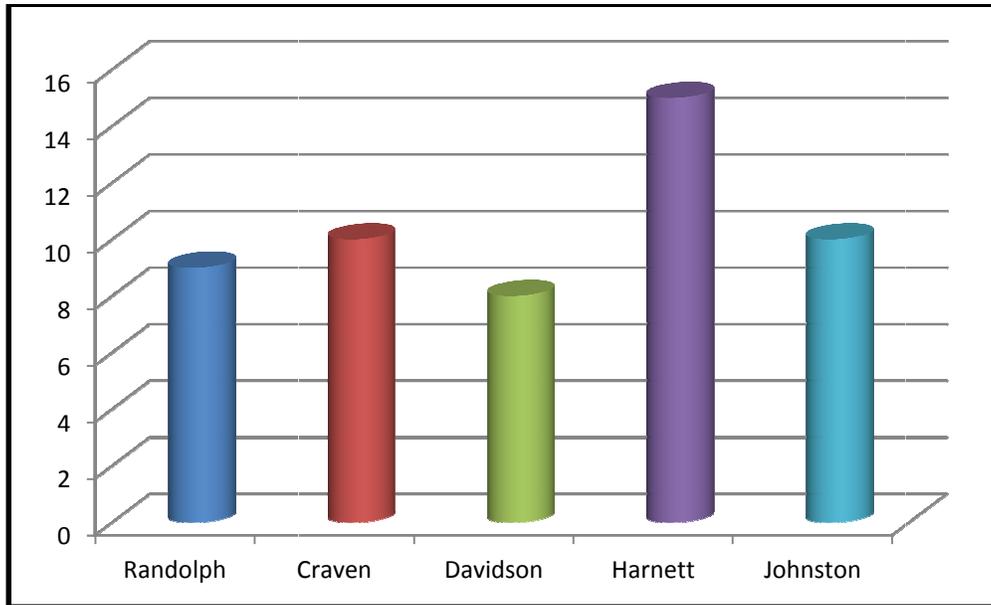
Approximately 20 children a year receive services and follow-up. Most are usually tested four times and the blood levels fall significantly after the initial counseling and education session. About eight children a year are followed for >6 months, and within a year, most of the children are discharged with normal blood lead levels.

**2010 North Carolina Blood Lead Surveillance Data by County
Ages 1 and 2 Years Tested for Lead Poisoning**

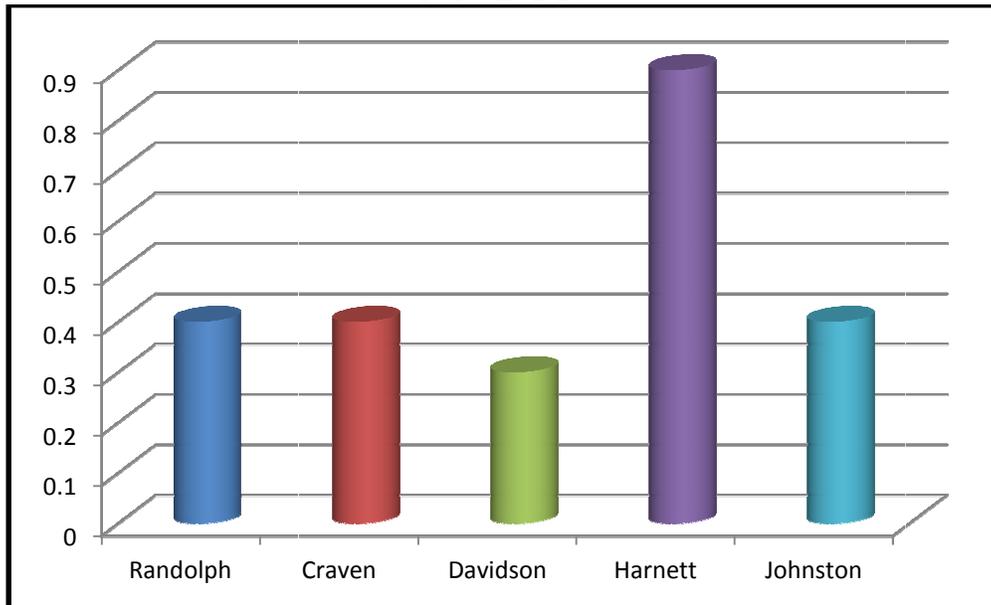


Source: http://www.deh.enr.state.nc.us/ehs/children_health/docs/lead/2010AnnualLeadTable.pdf

Lead \geq 10



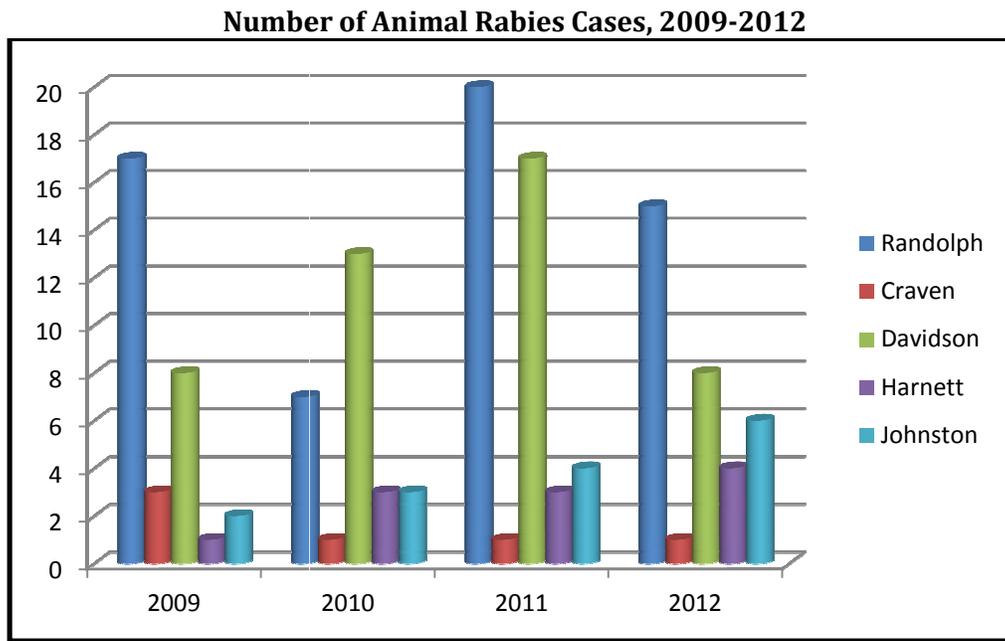
Percent \geq 10



Source: http://www.deh.enr.state.nc.us/ehs/children_health/docs/lead/2010AnnualLeadTable.pdf

- In 2010, Davidson County had the lowest amount of children with lead poisoning, while Harnett County had the highest.

Rabies



- Randolph County had the highest number of rabies cases each year, with the exception of 2010, when Davidson's numbers were highest.

Number of Animal Rabies Cases, 2012

	Bat	Cat	Dog	Fox	Raccoon	Skunk	Total
Randolph	0	3	0	2	10	0	15
Craven	0	0	0	0	1	0	1
Davidson	1	0	0	2	4	1	8
Harnett	1	1	0	0	2	0	4
Johnston	1	0	0	2	3	0	6

Source: <http://epi.publichealth.nc.gov/cd/rabies/figures>

Section Five

Community Survey Results

Primary Data Methodology

In the fall of 2012, the Randolph County Health Department and Randolph Hospital formed the Community Health Assessment Advisory Committee. This Committee was comprised of representatives from the health department, Randolph Hospital, NC Cooperative Extension, Randolph County Schools, Asheboro City Schools, Asheboro City Cultural and Recreation Services, Randolph Community College, First Baptist Church of Asheboro, Mt. Nebo Holiness Church of Ramseur, Liberty Early Childhood Center, Partnership for Children, Randolph Family Healthcare at MERCE, Timken and the Randolph County Senior Adult Association. The Community Health Assessment Advisory Committee met to establish the assessment framework and a timeline for data collection and analysis, prioritization of health concerns and development of action plans. Data collection and analysis took place from September 2012-May 2013.

It was determined by the Randolph County Health Department and Randolph Hospital, that a random sample survey method would be used, as well as a convenience sample method. The goal was to distribute the surveys to as many county residents as possible. Surveys were collected to assure its responses adequately represented the demographics of county residents. Primary data was collected through the following ways: paper surveys were mailed to residents across the county, an internet survey and a community leader questionnaire.

On August 22, 2013 the Advisory Committee members met to identify leading community health problems. During the meeting, health concerns identified through the surveys and stakeholder interviews were presented. The Randolph County Health Department and Randolph Hospital will use this information to develop the Community Health Action Plan for 2014.

Survey responses were analyzed for frequency of response using Survey Monkey. (It should be noted that not every respondent answered every question.) The surveys were not fully completed by all individuals, resulting in missing data on various questions.

Survey Participants

Survey participants were asked to provide demographic information by selecting appropriate responses from lists describing categories of age, gender, race and ethnicity, marital status, education level, and how they pay for health care. This demographic information was collected in order to assess how well the survey participants represented the general population of Randolph County. All responses were kept in confidence and information provided by survey participants was in no way linked to their names or identities.

Category	Survey	
	Number	Percent
Gender		
Men	327	22.2
Women	1,149	77.8
Unanswered	94	6.4
Race		
African American	230	15.6
Hispanic/Latino	209	14.2
White	1,025	69.5
Asian/Pacific Islander	5	0.3
American Indian or Alaskan		
Native	18	1.2
Other	26	1.8
Unanswered	95	6.4
Age		
Age 15-19	54	3.6
Age 20-24	91	6.1
Age 25-34	271	18.2
Age 35-44	329	22.1
Age 45-54	341	22.9
Age 55-64	240	16.1
Age 65-74	104	7.0
Age 75 and older	59	4.0
Unanswered	81	5.4
Other		
Uninsured	288	18.9
Unemployed	105	7.2
High School Graduates	243	16.6
College Graduates	317	21.7
Unanswered	106	7.2

Survey Results

Note: The order of some of the questions in the analysis may differ from their order in the actual survey, having been rearranged for clarity.

Demographic Questions

1. What is your zip code?

	Number	Percent
27205 (Asheboro)	502	34.8
27203 (Asheboro)	259	18.0
27317 (Randleman)	169	12.0
27316 (Ramseur)	93	6.5
27370 (Trinity)	67	4.7
27263 (Archdale)	51	3.5
27298 (Liberty)	46	3.2
27350 (Sophia)	45	3.1
27248 (Franklinville)	33	2.3
27341 (Seagrove)	28	1.9
27355 (Staley)	21	1.5
27239 (Denton)	18	1.3
27233 (Climax)	10	0.7
27204 (Asheboro)	8	0.6

- Other zip codes included Thomasville, High Point, Greensboro, Troy, Bennett, Pleasant Garden and Siler City.

2. How old are you?

	Number	Percent
15-19	54	3.6
20-24	91	6.1
25-34	271	18.2
35-44	329	22.1
45-54	341	22.9
55-64	240	16.1
65-74	104	7.0
75 and older	59	4.0
Unanswered	81	5.4

3. What is your gender?

	Number	Percent
Male	327	22.2
Female	1,149	77.8
Unanswered	94	6.4

4. What is your race or ethnicity?

	Number	Percent
American Indian or Alaskan Native	18	1.2
Asian/Pacific Islander	5	0.3
Black or African American	230	15.6
Latin American	209	14.2
White	1,025	69.5
Other	26	1.8
Unanswered	95	6.4

5. What is your marital status?

	Number	Percent
Married	907	61.4
Never married or single	294	19.9
Divorced	126	8.5
Widowed	74	5.0
Separated	62	4.2
Other	15	1.0
Unanswered	92	6.2

6. What is your highest level of education?

	Number	Percent
Some high school, no diploma	117	8.0
High school diploma / GED	243	16.6
Associate's degree / Vocational training	224	15.3
Some college; no degree	266	18.2
Bachelor's degree	317	21.7
Graduate or professional degree	234	16.0
Other	63	4.3
Unanswered	106	7.2

7. Do you have children under the age of 19 living in your household?

	Number	Percent
Yes	484	38.6
No	770	61.4
Unanswered	316	25.0

8. Are you the primary caregiver for any of the following?

	Number	Percent
Disabled child (under 18)	21	12.4
Disabled adult (18 and older)	44	26.0
Senior adult (65 and older)	79	46.7
Foster child (under 18)	8	4.7
Grandchild (under 18)	26	15.4

9. What is your employment status?

	Number	Percent ¹
Employed full-time	991	67.6
Employed part-time	161	11.0
Retired	130	8.9
Unemployed	105	7.2
Military	3	0.2
Disabled	40	2.7
Student	125	8.5
Homemaker	61	4.2
Self-Employed	24	1.6
Unanswered	103	7.0

Quality of Life Questions

Community members were asked to respond to four questions focused on local quality of life, choosing their response to each question as one of four Likert Scale choices: strongly agree, agree, disagree and strongly disagree.

- 1. There is a good health care system in Randolph County.** (Consider the cost and quality, number of options and availability of healthcare in Randolph County)

	Number	Percent
Strongly Agree	185	12.2
Agree	886	58.3
Strongly Disagree	90	5.9
Disagree	360	23.7
Unanswered	49	3.2

- 2. Randolph County is a good place to raise children.** (Consider the quality and safety of schools and child care programs, after school programs and places to play.)

	Number	Percent
Strongly Agree	497	32.5
Agree	862	56.3
Strongly Disagree	34	2.2
Disagree	138	9.0
Unanswered	39	2.5

- 3. Randolph County is a safe place to live.** (Consider how safe you feel at home, in the workplace, in schools, at playgrounds, parks and shopping centers.)

	Number	Percent
Strongly Agree	414	27.0
Agree	958	62.6
Strongly Disagree	33	2.2
Disagree	126	8.2
Unanswered	39	2.5

- 4. There is plenty of help for individuals and families during times of need.** (Consider social support: neighbors, support groups, faith community, community organizations and emergency monetary assistance)

	Number	Percent
Strongly Agree	267	17.6
Agree	765	50.4
Strongly Disagree	95	6.3
Disagree	391	25.8
Unanswered	52	3.4

Community Problems and Issues

Community Health Behaviors

Survey participants were presented an alphabetized list of 20 **health behaviors** and asked to select the five they thought had the greatest overall impact on health in Randolph County. They also had the option of writing-in a topic of their choice as one of the five. The list of responses below is arranged in descending order of the frequency with which a named problem was chosen. Some respondents selected more than six, some fewer. Some respondents skipped the section entirely.

Health Problem	Number	Percent
Obesity/overweight	1,144	74.2
Diabetes	877	56.9
Heart disease/heart attacks	801	52.0
Stroke	713	46.3
Teenage pregnancy	713	46.3
Cancer	667	43.3
Mental health	621	40.3
Aging problems	553	35.9
Dental health	442	28.7
Motor vehicle accidents	319	20.7
Asthma	253	16.4
Sexually transmitted diseases	222	14.4
Infectious/contagious diseases	173	11.2
Lung disease	138	9.0
Unintentional injuries	120	7.8
HIV/AIDS	113	7.3
Other	66	4.3

- Other write-ins responses included: lack of programs for disabled children, stress, alcohol/substance abuse, lack of access for exercise and health eating, water quality, intestinal diseases/issues, multiple sclerosis.
- Respondents were asked to write-in types of cancer they thought were problems. Those types included: all types, breast, prostate, lung, liver, ovarian, bone, skin, colorectal, pancreatic.

Unhealthy Behaviors

Survey participants were presented an alphabetized list of 16 **unhealthy behaviors** and asked to select the five they thought had the greatest overall impact on health in Randolph County. They also had the option of writing-in a topic of their choice as one of the five. The list of responses below is arranged in descending order of the frequency with which a named problem was chosen. Some respondents selected more than five; some fewer and some skipped the section entirely.

Unhealthy Behavior	Number	Percent
Drug abuse	1,096	70.8
Alcohol abuse	1,028	66.4
Lack of exercise	889	57.4
Poor eating habits	823	53.1
Smoking / tobacco use	748	48.3
Not going to a dentist or doctor for regular checkups	649	41.9
Having unsafe sex	545	35.2
Reckless / drunk driving	440	28.4
Gangs	359	23.2
Secondhand smoke	287	18.5
Violent behavior	238	15.4
Not getting immunizations to prevent disease	144	9.3
Not using seatbelts	142	9.2
Not using child safety seats	138	8.9
Not getting prenatal care	89	5.7
Suicide	62	4.0
Other	23	1.5

- Other write-ins responses included: domestic violence, bullying in school, texting while driving, mental health.

Community Issues

Survey participants were presented an alphabetized list of 18 **community issues** (i.e., social issues) and asked to select the five they thought had the greatest overall impact on quality of life in Randolph County. They also had the option of writing-in a topic of their choice as one of the five. The list of responses below is arranged in descending order of the frequency with which a named problem was chosen. Some respondents selected more than five, some fewer; some skipped the section entirely.

Community Concern	Number	Percent
Employment opportunities	1,139	74.6
Drug use	802	52.5
Affordable housing	797	52.2
Availability of positive teen activities	614	40.2
Crime	601	39.4
Quality education (K-12)	531	34.8
Lack of recreational facilities	513	33.6
Domestic violence	485	31.8
Gang activity	316	20.7
Home safety	290	19.0
Violent crime	266	17.4
Unsafe, un-maintained roads and sidewalks	252	16.5
Water supply and quality	223	14.6
Pollution	162	10.6
Food safety	130	8.5
Rape / sexual assault	116	7.6
Solid waste disposal	78	5.1
Air quality services	68	4.5
Other	46	3.0

- Other write-in responses included: lack of public transportation, affordable insurance, adequate mental health resources, bullying, poverty, positive/connected communities outside of church and family.

Personal Health and Self-Reported Behaviors

A portion of the Randolph County Community Survey collected information on respondents' personal health behaviors. The results of this portion of the survey offer some insight into lifestyle factors that affect the health of individuals in Randolph County.

1. Are you covered by a health insurance plan?

	Number	Percent
Yes	1,239	81.1
No	288	18.9
Unanswered	43	2.8

If yes, what type of coverage do you have?

Type of Insurance Coverage	Number	Percent
Medicare	190	17.0
Medicaid	76	6.8
Private insurance	919	82.4
Other	104	9.3
Unanswered	455	41.0

- Because participants were allowed to select more than one response, the percent is a reflection of how often each option was chosen and does not indicate how often each response was chosen in combination with any other response. The total of the percent column is greater than 100.

2. Where do you go for routine healthcare when you are sick?

	Number	Percent
Doctor	1,180	77.8
Urgent Care Center	118	7.8
Emergency Room	46	3.0
Randolph Family Health Care at MERCE	56	3.7
I don't seek routine healthcare	116	7.7
Unanswered	54	3.6

3. How often do you see a dentist?

	Number	Percent
Once a year	205	13.5
Twice a year	780	51.5
Only when needed	357	23.6
I don't seek routine dental care	173	11.4
Unanswered	55	3.6

4. How often do you get your eyes checked?

	Number	Percent
Once a year	674	44.5
Twice a year	73	4.8
Only when needed	388	25.6
I don't seek routine dental care	381	25.1
Unanswered	54	3.6

5. Where do you get most of your health related information about your health?

	Number	Percent
Friends/Family	149	9.8
News/TV/Magazines	105	6.9
Health Department	76	5.0
School	11	0.7
Hospital	27	1.8
Doctor's Office	828	54.4
Help Lines	1	0.1
MERCE Clinic	23	1.5
Internet	297	19.5
Church	5	0.3
Unanswered	48	3.2

6. In the past year, have there been any health-related services you or members of your family have needed but have not been able to find in your community?

	Number	Percent
Yes	264	17.7
No	1,227	82.3
Unanswered	79	5.3

- Other write-in responses include: emergency care, emergency dental care, Sickle Cell, veteran services, healthcare for children, Endocrinology, nerve pain care, prenatal care, weight loss surgery, neurosurgery, etc.

7. In the past year, did you have problems filling prescriptions?

	Number	Percent
Yes	209	14.0
No	1,281	86.0
Unanswered	80	5.4

- Reasons listed for having problems included: too expensive, cost, no insurance, medicines not being in stock or unavailable, etc.

8. Do you receive any of the following services:

	Number	Percent
Food Stamps	154	10.9
Medicaid	119	8.4
WIC	68	4.8
Work First	10	0.7
Public Housing	18	1.6
None	1,192	84.1
Unanswered	153	11.0

9. Do you get a flu shot every year?

	Number	Percent
Yes	871	57.4
No	646	42.6
Unanswered	53	3.5

10. Do you currently smoke?

	Number	Percent
Yes	146	9.6
No	1,369	90.4
Unanswered	55	3.6

If yes, where would you go for help if you wanted to quit smoking?

	Number	Percent
Quit Now NC	19	10.0
Doctor	64	33.7
Private counselor / therapist	8	4.2
I don't know	68	35.8
Other	15	7.9
N/A, I don't want to quit	32	16.8

11. How many times a day do you use tobacco products?

	Number	Percent
0-5	706	86.5
6-10	50	6.1
11-15	28	3.4
15-20	22	2.7
20 or more	10	1.2
Unanswered	754	92.4

12. Does secondhand smoke bother you or your family?

	Number	Percent
Yes	1,130	76.2
No	352	23.8
Unanswered	88	6.0

13. Would you like for all parks and county buildings to be tobacco-free?

	Number	Percent
Yes	1,265	84.6
No	230	15.4
Unanswered	75	5.0

14. Are illegal drugs (marijuana, cocaine, heroin, etc.) easy to get in your community?

	Number	Percent
Yes	684	46.1
No	89	6.0
Not sure	710	47.9
Unanswered	87	5.9

15. How often do you drink alcohol?

	Number	Percent
Never	1,069	72.1
1-3 times per week	373	25.2
4-6 times per week	35	2.4
More often	6	0.4
Unanswered	87	5.9

16. Not counting juice, how many cups of fruits do you eat per day?

	Number	Percent
Never eat fruit	175	11.9
0-2 cups per day	629	50.0
2-4 cups per day	547	43.4
4-6 cups per day	64	5.1
6 or more cups per day	19	1.5
Unanswered	98	6.7

17. Not counting potatoes, how many cups of vegetables do you eat per day?

	Number	Percent
Never eat vegetables	84	5.7
0-2 cups per day	539	36.4
2-4 cups per day	720	48.6
4-6 cups per day	113	7.6
6 or more cups per day	14	0.9
Unanswered	90	6.0

18. How many days a week do you engage in at least 30 minutes of physical activity?

	Number	Percent
0-2 days a week	749	50.4
3-4 days a week	459	30.9
5-7 days a week	278	18.7
Unanswered	84	5.7

19. How many hours per day do you watch TV, play video games or use the computer for recreation?

	Number	Percent
0-2 hours per day	784	52.4
3-5 hours per day	522	34.9
5-7 hours per day	106	7.1
7 or more hours per day	84	5.6
Unanswered	74	5.0

20. Have you ever been diagnosed with any of the following health conditions?

	Number	Percent
	Yes	
Asthma	224	17.8
Cancer	102	8.3
Depression or anxiety disorder	379	29.8
Diabetes (not during pregnancy)	172	13.7
High blood pressure	477	35.2
High cholesterol	402	30.8
Osteoporosis	81	6.7
Overweight/obesity	488	37.6
Unanswered	85	5.8

Men and Women were asked the following questions regarding prevention:

21. Women: If you are over age 40, do you have an annual mammogram?

	Number	Percent
Yes	561	47.0
No	210	17.6
N/A (I am under 40)	422	35.4

22. Both men and women: If you are over age 50, have you even had a colon cancer screening?

	Number	Percent
Yes	388	28.6
No	238	17.5
N/A (I am under 50)	731	53.9

Availability of Services

Survey participants were asked to respond to a question focused on the availability of specific health and human services within Randolph County, choosing their response to each service listed as one of four Likert Scale choices: no problem, minor problem, major problem or I don't know. It must be noted that the selection for Group Rehab Homes was left off the Spanish version of the survey.

	No Problem (# / %)	Minor Problem	Major Problem	Don't Know
Routine healthcare	561/39.0	399/27.8	243/16.9	234/16.3
Hospital services	775/54.0	324/22.6	155/10.8	181/12.6
Dental care	551/38.5	348/24.3	325/22.7	207/14.5
Mental health	318/22.5	310/22.0	381/27.0	402/28.5
Pharmacy/drug stores	1,015/71.6	173/12.2	61/4.3	169/11.9
Health insurance coverage	330/23.2	291/20.4	541/38.0	261/18.3
Enrolling in				
Medicaid/Medicare	427/30.2	336/23.8	241/17.0	410/29.0
Food assistance	475/33.5	385/27.2	197/13.9	360/25.4
Long term care facilities	316/22.6	334/23.9	219/15.7	529/37.8
Care for pregnant women	615/43.9	308/22.0	69/4.9	409/29.2
Childhood immunizations	857/61.0	202/14.4	35/2.5	311/22.1
After school care	448/31.9	399/28.4	183/13.0	376/26.7
Home health care	387/27.6	367/26.2	163/11.6	484/34.5
Car seats for children	630/44.7	278/19.7	66/4.7	436/30.9
Adult day care	266/18.8	316/22.3	223/15.7	613/43.2
Group rehab homes	228/18.3	282/22.7	178/14.3	555/44.7

Emergency Preparedness

Survey participants were asked a few questions regarding their level of emergency preparedness. The results of this portion of the survey offer some insight into how prepared Randolph County residents would be if an emergency or disaster were to occur.

1. Does your household have working smoke and carbon monoxide detectors?

	Number	Percent
Yes, smoke detectors only	799	55.2
Yes, carbon monoxide detectors only	27	1.9
Yes, both	494	34.1
No	128	8.8
Unanswered	122	8.4

2. Does your household have a family emergency plan?

	Number	Percent
Yes	793	55.1
No	647	44.9
Unanswered	130	9.2

3. Does your family have a basic emergency supply kit? If yes, how many days do you have supplies for?

	Number	Percent
No	1,028	71.5
3 days	210	14.6
1 week	114	7.9
2 weeks	36	2.5
More than 2 weeks	49	3.4
Unanswered	133	9.3

Questions for parents

One section of the survey was directed only to parents of children between the ages of 0-19. Because there were no other questions asked about parental or family status it is not possible to double-check any of the response numbers, or to determine how many children and to what ages the responses apply.

1. Do you have children between the ages of 0-19?

	Number	Percent
Yes	484	38.6
No	770	61.4
Unanswered	316	2.5

2. Has your pediatrician / healthcare provider talked with you about your child's weight and body mass index (BMI)?

	Number	Percent
Yes	277	54.4
No	232	45.6

3. Not counting juice, how many cups of fruits does your child eat per day?

	Number	Percent
Never eat fruit	45	9.1
0-2 cups per day	185	37.3
2-4 cups per day	227	46.0
4-6 cups per day	36	7.2
6 or more cups per day	1	0.2

4. Not counting potatoes or salad, how many cups of vegetables does your child eat per day?

	Number	Percent
Never eat vegetables	50	10.0
0-2 cups per day	166	33.4
2-4 cups per day	218	44.0
4-6 cups per day	46	9.3
6 or more cups per day	6	1.2

5. What are your most challenging parenting issues? (Check all that apply)

	Number	Percent
Child's behavior	257	67.5
Child's weight/eating disorder	135	35.4
Dating/sexuality/teenage pregnancy	109	28.6
Drug/alcohol abuse	78	20.5
Depression/suicide	57	15.0

6. Do you think your child is engaging in any of the following high-risk behaviors? (Check all that apply)

	Number	Percent
Alcohol use	21	4.5
Eating disorders	34	7.3
Drug abuse	14	3.0
Tobacco use	27	5.8
Sexual intercourse	32	6.9
Reckless driving (speeding, texting, etc.)	22	4.7
Gang activity	2	0.4
Sexual activity	31	6.7
I don't think my child is engaging in any high-risk behaviors	377	80.9

Appendix

English Language Version
Spanish Language Version



**Randolph County
2012-2013 Community Health Opinion Survey**

*Randolph County Health Department in collaboration with Randolph Hospital is interested in your opinions about the health and quality of life in Randolph County. The results from this survey and other information will be used to identify and address Randolph County's most pressing health problems.
All responses are voluntary and anonymous.*

***Please complete only one survey.
For your convenience an on-line version of the survey may be found at:
www.co.randolph.nc.us***

Thank you for taking the time to complete this survey!

Randolph County Community Health Survey

Section 1: Quality of Life Statements

The first questions are about how you see certain parts of Randolph County life.
Please choose ONE answer for the next 4 statements.

Statements	Choose a number for each statement below.			
	Strongly Disagree	Disagree	Strongly Agree	Agree
1. How do you feel about this statement, “There is a good healthcare system in Randolph County”? Consider the cost and quality, number of options, and availability of healthcare in Randolph County.	1	2	3	4
2. How do you feel about this statement, “Randolph County is a good place to raise children”? Consider the quality and safety of schools and child care programs, after school programs, and places to play in this county.	1	2	3	4
3. How do you feel about this statement, “Randolph County is a safe place to live”? Consider how safe you feel at home, in the workplace, in schools, at playgrounds, parks, and shopping centers in Randolph County.	1	2	3	4
4. How do you feel about this statement, “There is plenty of help for individuals and families during times of need in Randolph County”? Consider social support in Randolph County: neighbors, support groups, faith community outreach, community organizations, and emergency monetary assistance.	1	2	3	4

Section 2: Community Problems and Issues

Community Health Behaviors

5. Please choose the FIVE most important health problems you believe are in Randolph County.

- | | | |
|---|---|--|
| <input type="checkbox"/> Aging problems | <input type="checkbox"/> Heart disease/heart attacks | <input type="checkbox"/> Obesity/Overweight |
| <input type="checkbox"/> Asthma | <input type="checkbox"/> HIV/AIDS | <input type="checkbox"/> Sexually transmitted diseases |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Infectious/Contagious diseases | <input type="checkbox"/> Stroke |
| What kind? _____ | <input type="checkbox"/> Lung disease | <input type="checkbox"/> Teenage pregnancy |
| <input type="checkbox"/> Dental health | <input type="checkbox"/> Mental health | <input type="checkbox"/> Unintentional injuries |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Motor vehicle accidents | <input type="checkbox"/> Other _____ |

Unhealthy Behaviors

6. Please choose the top **FIVE** unhealthy behaviors you believe are in Randolph County.

- | | | |
|--|---|---|
| <input type="checkbox"/> Alcohol abuse | <input type="checkbox"/> Not using child safety seats | <input type="checkbox"/> Reckless/drunk driving |
| <input type="checkbox"/> Drug abuse | <input type="checkbox"/> Not using seat belts | <input type="checkbox"/> Secondhand smoke |
| <input type="checkbox"/> Having unsafe sex | <input type="checkbox"/> Not going to a dentist or
doctor for regular checkups | <input type="checkbox"/> Smoking/tobacco use |
| <input type="checkbox"/> Lack of exercise | <input type="checkbox"/> Not getting prenatal
(pregnancy) care | <input type="checkbox"/> Suicide |
| <input type="checkbox"/> Gangs | <input type="checkbox"/> Poor eating habits | <input type="checkbox"/> Violent behavior |
| <input type="checkbox"/> Not getting immunizations
("shots") to prevent disease | | <input type="checkbox"/> Other:
_____ |

Community Issues

7. Please pick the top **FIVE** community issues that you believe have the greatest effect on quality of life.

- | | |
|---|--|
| <input type="checkbox"/> Affordable housing | <input type="checkbox"/> Lack of recreational facilities (parks,
trails, community centers, etc.) |
| <input type="checkbox"/> Air quality services | <input type="checkbox"/> Pollution (air, water, land) |
| <input type="checkbox"/> Availability of positive teen activities | <input type="checkbox"/> Quality education (K-12) |
| <input type="checkbox"/> Crime | <input type="checkbox"/> Rape/sexual assault |
| <input type="checkbox"/> Domestic violence | <input type="checkbox"/> Solid waste disposal |
| <input type="checkbox"/> Drug use | <input type="checkbox"/> Unsafe, un-maintained roads and
sidewalks |
| <input type="checkbox"/> Employment opportunities | <input type="checkbox"/> Violent crime (murder, assault, etc.) |
| <input type="checkbox"/> Food safety | <input type="checkbox"/> Water supply and quality |
| <input type="checkbox"/> Gang activity | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Home safety | |

Section 3: Personal Health

8. Are you covered by a health insurance plan? Yes No
If yes, what type? (*Check all that apply*)

- | | |
|---|--------------------------------------|
| <input type="checkbox"/> Medicare (includes supplementary policy) | <input type="checkbox"/> Medicaid |
| <input type="checkbox"/> Private Insurance | <input type="checkbox"/> Other _____ |

9. Where do you go for routine healthcare when you are sick? (*Please choose one*)

- | | |
|---|--|
| <input type="checkbox"/> Doctor | <input type="checkbox"/> Emergency Room |
| <input type="checkbox"/> Urgent Care | <input type="checkbox"/> I don't seek routine healthcare |
| <input type="checkbox"/> Randolph Family Health Care at MERCE Health Center | |

10. How often do you see a dentist? (Please choose one)

- Once a year Only when needed
 Twice a year I don't seek routine dental care

11. How often do you get your eyes checked? (Please choose one)

- Once a year Only when needed
 Twice a year I don't get routine eye exams

12. Where do you get most of your health related information about your health? (Please choose one)

- Friends/Family Doctor's office
 News/ TV/Magazines Help Lines
 Health Department MERCE Clinic
 School Internet
 Hospital Church

13. Do you receive any of the following services? (Check all that apply)

- Food Stamps Work First
 Medicaid Public Housing
 WIC None
 Other, please list _____

14. In the past year, have there been any health-related services you or members of your family have needed but were unable to find in the community?

- Yes No
If yes, what service: _____

15. In the past year, did you have problems filling prescriptions? Yes No
If yes, why did you have problems? _____

16. Do you get a flu shot every year? Yes No
If yes, where do you get your flu shot: _____

17. Do you currently smoke? Yes No
If yes, where would you go for help if you wanted to quit?

- Quit Now NC Doctor Private counselor / therapist
 Pharmacy health department I don't know
 Other _____ I don't want to quit

18. How many times a day do you use tobacco products?

- 0-5 6-10 11-15 15-20 20 or more

19. Does secondhand smoke bother you or your family? Yes No

20. Would you like for all parks and county buildings to be tobacco-free? Yes No

21. Are illegal drugs (marijuana, cocaine, heroin, etc.) easy to get in your community?

Yes No Not sure

22. How often do you drink alcohol?

Never 1-3 times per week 4-6 times per week more often

23. Not counting juice, how many cups of fruits do you eat per day? (One small apple equals one cup.)

Number of cups of fruit Never eat fruit

24. Not counting potatoes and salad, how many cups of vegetables do you eat per day?
(12 baby carrots equal one cup.)

Number of cups of vegetables Never eat vegetables

25. How many days a week do you engage in at least 30 minutes of physical activity?

0-2 3-4 5-7 7 or more

26. How many hours per day do you watch TV, play video games, or use the computer for recreation?

0-2 3-5 5-7 7 or more

27. Have you ever been diagnosed with any of the following health conditions?

Asthma	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Cancer	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Depression or anxiety disorder	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Diabetes (not during pregnancy)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
High blood pressure	<input type="checkbox"/> Yes	<input type="checkbox"/> No
High cholesterol	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Osteoporosis	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Overweight/Obesity	<input type="checkbox"/> Yes	<input type="checkbox"/> No

28. **Women:** If you are **OVER** age 40, do you have an annual mammogram?

Yes No Not applicable (I am under age 40)

Everyone: If you are **OVER** age 50, have you ever had a colon cancer screening?

Yes No Not applicable (I am under age 50)

29. In your opinion, do you think people in Randolph County have a problem finding and using the following services? (Please choose one answer per service)

Health and Human Services	No Problem	Minor Problem	Major Problem	I Don't Know
Routine Healthcare				
Hospital Services				
Dental Care				
Mental Health Care				
Pharmacy/drug stores				
Health Insurance Coverage				
Enrolling in Medicaid/Medicare				
Food Assistance				
Long Term Care Facilities				
Care for Pregnant Women				
Childhood Immunizations				
After School Care				
Home Health Care				
Car Seats for Infants and Children				
Adult Day Care				
Group Rehab Homes				

Section 4: Child Health

This section is for parents with children ages 1-19 ONLY. If you are not the parent or caregiver of a child, please skip to Section 5.

30. Do you have children between the ages of 9 and 19?

____ Yes ____ No (*skip to Section 5, question #38*)

31. Has your pediatrician / doctor talked with you about your child's weight and Body Mass Index (BMI)?

____ Yes ____ No

**32. Not counting juice, how many cups of fruits does your child eat per day?
(One small apple equals one cup.)**

Number of cups of fruit _____ Never eat fruit _____

**33. Not counting potatoes or salad, how many cups of vegetables does your child eat per day?
(12 baby carrots equal one cup.)**

Number of cups of vegetables _____ Never eat vegetables _____

34. What are your most challenging parenting issues? (Check all that apply)

- Child's Behavior
- Child's Weight/Eating Disorder
- Dating/Sexuality/Teenage Pregnancy
- Drug/Alcohol Abuse
- Depression/Suicide

**35. Do you think your child is engaging in any of the following high-risk behaviors?
(Check all that apply)**

- Alcohol use Eating disorders Drug abuse
- Tobacco use Sexual intercourse Reckless driving (speeding, texting, etc.)
- Gang activity Sexual activity
- I don't think my child is engaging in any high risk behaviors

Section 5: Emergency Preparedness

36. Does your household have working smoke and carbon monoxide detectors?

- Yes, smoke detectors only Yes, carbon monoxide detectors only
- Yes, both No

37. Does your household have a Family Emergency Plan?

- Yes No

38. Does your family have a basic emergency supply kit? If yes, how many days do you have supplies for?

- No 3 days 1 week 2 weeks More than 2 weeks

Section 6: Demographic Questions

39. How old are you? (Mark age category)

15 - 19 25 - 34 45 - 54 65 - 74
 20 - 24 35 - 44 55 - 64 75 or older

40. Are you Male or Female?

Male Female

41. What is your race? (Check all that apply)

American Indian or Alaskan Native Latin American
 Asian or Pacific Islander White
 Black or African American Other: _____

42. Do you speak a language other than English at home?

Yes No If yes, please list _____

If yes, what language do you speak at home? _____

43. What is your marital status?

Never Married/Single Divorced Separated
 Married Widowed Other

44. What is the highest level of school, college or degree that you have finished? (Mark only one)

Some high school, no diploma
 High school diploma or GED
 Associate's Degree or Vocational Training
 Some college (no degree)
 Bachelor's degree
 Graduate or professional degree
 Other: _____

45. How many people does your income support? _____

46. Are you the primary caregiver for any of the following? (Check all that apply)

Disabled child (under age 18)
 Disabled adult (age 18 and older)
 Senior adult (age 65 and older)
 Foster child (under age 18)
 Grandchild (under age 18)

47. What is your employment status? (Check all that apply)

- Employed full-time
- Employed part-time
- Retired
- Military
- Unemployed

- Disabled
- Student
- Homemaker
- Self-employed

48. What is your zip code? (Write only the first 5 digits) _____

Thank you for taking the time to complete this survey!



**Encuesta de Opinión Acerca de la Salud Comunitaria 2012-2013 del
Condado de Randolph**

El Departamento de Salud del Condado de Randolph en colaboración con Randolph Hospital está interesado en sus opiniones acerca de la salud y la calidad de vida en el Condado de Randolph. Los resultados de esta encuesta y otra información serán usados para identificar y tratar con los problemas de salud más urgentes en el Condado de Randolph.

Todas las respuestas son voluntarias y anónimas.

Por favor llene solo una encuesta.

Gracias por tomar el tiempo de llenar esta encuesta.

Encuesta de Salud Comunitaria del Condado de Randolph

PARTE 1: Declaraciones de Calidad de Vida

Las primeras preguntas son acerca de cómo usted percibe ciertas partes de la vida del Condado de Randolph. Por favor escoja UNA respuesta para las siguientes 4 declaraciones.

Declaraciones	Escoja un número para cada declaración.			
	Totalmente En Desacuerdo	En Desacuerdo	Totalmente de Acuerdo	De Acuerdo
<p>1. Que opina acerca de esta declaración, “¿Hay un buen sistema de cuidado de salud en el Condado de Randolph?” Considere el costo y calidad, las opciones y la disponibilidad de cuidado de salud en el Condado de Randolph.</p>	1	2	3	4
<p>2. Que opina acerca de esta declaración, “¿El Condado de Randolph es un buen lugar para criar hijos?” Considere la calidad y seguridad escolar, los programas de guarderías, programas después de escuela y los lugares para jugar en este condado.</p>	1	2	3	4
<p>3. Que opina acerca de esta declaración, “¿El Condado de Randolph es un lugar seguro para vivir?” Considere que tan seguro se siente en casa, en el trabajo, en la escuela, en las áreas de juegos, en los parques y en los centros comerciales en el Condado de Randolph.</p>	1	2	3	4
<p>4. Que opina acerca de esta declaración, “¿Hay suficiente ayuda para individuos y familias durante tiempos de necesidad en el condado de Randolph?” Considere el apoyo social en el Condado de Randolph: vecinos, grupos de apoyo, comunidad de fe, organizaciones comunitarias y asistencia monetaria en emergencias.</p>	1	2	3	4

PARTE 2: Problemas Comunitarios y Otros Asuntos

Comportamientos de Salud Comunitaria

5. Por favor escoja los **CINCO** problemas más importantes de salud que usted cree que existen en el condado de Randolph.

- | | | |
|--|---|--|
| <input type="checkbox"/> Problemas por el envejecimiento | <input type="checkbox"/> Problemas del corazón/infartos | <input type="checkbox"/> Obesidad/sobre peso |
| <input type="checkbox"/> Asma | <input type="checkbox"/> VIH/SIDA | <input type="checkbox"/> Enfermedades transmitidas sexualmente |
| <input type="checkbox"/> Cáncer | <input type="checkbox"/> Enfermedades infecciosas/contagiosas | <input type="checkbox"/> Derrame cerebral |
| ¿De qué tipo? _____ | <input type="checkbox"/> Enfermedad pulmonar | <input type="checkbox"/> Embarazo juvenil |
| <input type="checkbox"/> Salud Dental | <input type="checkbox"/> Salud Mental | <input type="checkbox"/> Heridas no intencionales |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Accidentes Automovilísticos | <input type="checkbox"/> Otro _____ |

Comportamientos Malsanos

6. Por favor escoja los **CINCO** comportamientos malsanos que usted cree que existen en el Condado de Randolph.

- | | | |
|--|--|---|
| <input type="checkbox"/> Abuso de bebidas alcohólicas | <input type="checkbox"/> No usar asientos de seguridad para niños | <input type="checkbox"/> Conducir imprudentemente/ebrio |
| <input type="checkbox"/> Abuso de drogas | <input type="checkbox"/> No usar cinturones de seguridad | <input type="checkbox"/> Tener que respirar humo de cigarro de segunda mano |
| <input type="checkbox"/> Tener sexo sin protección | <input type="checkbox"/> No ir al dentista o al doctor para chequeos regulares | <input type="checkbox"/> Uso de tabaco/fumar |
| <input type="checkbox"/> Falta de ejercicio | <input type="checkbox"/> No obtener cuidado prenatal (embarazo) | <input type="checkbox"/> Suicidio |
| <input type="checkbox"/> Pandillas | <input type="checkbox"/> Hábitos alimenticios inadecuados | <input type="checkbox"/> Comportamiento violento |
| <input type="checkbox"/> No vacunarse para prevenir enfermedades | | <input type="checkbox"/> Otro: _____ |

Asuntos de la Comunidad

7. Por favor escoja **CINCO** asuntos de la comunidad que usted cree que afectan en gran parte la calidad de vida.

- | | |
|---|---|
| <input type="checkbox"/> Viviendas al alcance de su bolsillo | <input type="checkbox"/> Falta de centros de recreación (parques, senderos, centros comunitarios, etc.) |
| <input type="checkbox"/> Servicios de la calidad del aire | <input type="checkbox"/> Contaminación (aire, agua, tierra) |
| <input type="checkbox"/> Actividades positivas disponibles para jóvenes | <input type="checkbox"/> Calidad educacional (grados kinder-12) |
| <input type="checkbox"/> Crimen/delito | <input type="checkbox"/> Violación/agresión sexual |
| <input type="checkbox"/> Violencia domestica | <input type="checkbox"/> Eliminación de basura/desechos |
| <input type="checkbox"/> Uso de drogas | <input type="checkbox"/> Carreteras y banquetas peligrosas y sin mantenimiento |
| <input type="checkbox"/> Oportunidades de empleo | <input type="checkbox"/> Crimen violento (asesinato, asalto, etc.) |
| <input type="checkbox"/> Seguridad de los alimentos | <input type="checkbox"/> Suministro y calidad de agua |
| <input type="checkbox"/> Actividad pandillera | Otro: _____ |
| <input type="checkbox"/> Seguridad en el hogar | |

PARTE 3: Salud Personal

8. ¿Está usted cubierto por algún seguro médico? Sí No
Si su respuesta es sí, ¿qué tipo de seguro médico tiene? *(Marque todo lo que le concierne)*

- | | |
|---|-----------------------------------|
| <input type="checkbox"/> Medicare (incluye la póliza suplementaria) | <input type="checkbox"/> Medicaid |
| <input type="checkbox"/> Seguro Privado | <input type="checkbox"/> Otro |

9. Cuando usted está enfermo/a, ¿adónde acude para recibir un cuidado de salud rutinario?
(Por favor escoja uno)

- | | |
|--|---|
| <input type="checkbox"/> Doctor | <input type="checkbox"/> Sala de Emergencias/Hospital |
| <input type="checkbox"/> Urgent Care/Urgencias | <input type="checkbox"/> No busco cuidado de salud |
| <input type="checkbox"/> Cuidado de Salud Familiar de la Clínica MERCE | |

10. ¿Cada cuándo va al dentista? *(Por favor escoja uno)*

- | | |
|---|---|
| <input type="checkbox"/> Una vez al año | <input type="checkbox"/> Solo cuando lo necesito |
| <input type="checkbox"/> Dos veces al año | <input type="checkbox"/> No busco cuidado de salud dental rutinaria |

11. ¿Cada cuándo tiene una revisión de la vista? *(Por favor escoja uno)*

- | | |
|---|---|
| <input type="checkbox"/> Una vez al año | <input type="checkbox"/> Dos veces al año |
| <input type="checkbox"/> Dos veces al año | <input type="checkbox"/> No recibo exámen de rutina de la vista |

12. ¿De dónde obtiene la mayor información de salud relacionada con su salud?
(Por favor escoja uno)

- | | |
|--|--|
| <input type="checkbox"/> Amigos/Familia | <input type="checkbox"/> Oficina del Doctor |
| <input type="checkbox"/> Periódico/Televisión/Revistas | <input type="checkbox"/> Líneas Telefónicas de Ayuda |
| <input type="checkbox"/> Departamento de Salud | <input type="checkbox"/> Clínica MERCE |
| <input type="checkbox"/> Escuela | <input type="checkbox"/> Internet |
| <input type="checkbox"/> Hospital | <input type="checkbox"/> Parroquia |

13. ¿Recibe usted alguno de los siguientes servicios? (Marque todo lo que le concierne))

- | | |
|--|---|
| <input type="checkbox"/> Estampillas de Comida | <input type="checkbox"/> Work First |
| <input type="checkbox"/> Medicaid | <input type="checkbox"/> Vivienda Pública |
| <input type="checkbox"/> WIC | <input type="checkbox"/> Ninguno |
| | <input type="checkbox"/> Otro, por favor escriba cual |
| | _____ |

14. En el último año, ¿usted o algún miembro de su familia ha necesitado algún servicio relacionado con la salud que no pudo encontrar en su comunidad?

- Sí No
Si su respuesta es sí, escriba esos servicios: _____

15. En el último año, ¿tuvo usted dificultad en surtir sus recetas? Sí No
Si así lo fue, ¿Por qué tuvo dificultad? _____

16. ¿Recibe usted una vacuna contra la influenza cada año? Sí No
Si así lo es, ¿Dónde recibe la vacuna contra la gripe? _____

17. ¿Actualmente fuma? Sí No
Si así lo es, ¿A dónde acudiría si quisiera ayuda para dejar de fumar?

- | | | |
|---|---|--|
| <input type="checkbox"/> Programa Quit Now NC | <input type="checkbox"/> Doctor | <input type="checkbox"/> Consejero/terapeuta privado |
| <input type="checkbox"/> Farmacia | <input type="checkbox"/> Departamento de Salud | <input type="checkbox"/> No lo sé |
| <input type="checkbox"/> Otro: _____ | <input type="checkbox"/> No quiero dejar de fumar | |

18. ¿Cuántas veces al día usa productos de tabaco?
 0-5 6-10 11-15 15-20 20 ó más

19. ¿Le molesta a usted ó a su familia el humo de cigarro de segunda mano?
 Sí No

20. ¿A usted le gustaría que todos los parques y edificios del condado sean libres del uso de tabaco?
 Sí No

21. ¿Son las drogas ilegales (mariguana, cocaína, heroína, etc.) fáciles de conseguir en su comunidad?
 Sí No

22. **¿Con qué frecuencia bebe alcohol?**
 Nunca 1-3 veces por semana 4-6 veces por semana Más a menudo

23. **Sin contar el jugo, ¿cuántas tazas de fruta come al día? (Una manzana pequeña equivale a una taza.)**

Número de tazas de fruta Nunca como fruta

24. **Sin contar las papas y la lechuga, ¿cuántas tazas de verduras come al día? (12 mini zanahorias equivalen a una taza.)**

Número de tazas de verduras Nunca como verduras

25. **¿Cuántos días a la semana usted practica una actividad física por lo menos 30 minutos cada vez?**

0-2 3-4 5-7 7 o más

26. **¿Cuántas horas al día usted ve televisión, juega video juegos o usa la computadora como entretenimiento?**

0-2 horas 3-5 horas 5-7 horas 7 ó más horas

27. **¿En algún momento ha sido usted diagnosticado/a con alguna de las siguientes condiciones de salud?**

Asma	<input type="checkbox"/> Sí	<input type="checkbox"/> No
Cáncer	<input type="checkbox"/> Sí	<input type="checkbox"/> No
Depresión o problemas de ansiedad	<input type="checkbox"/> Sí	<input type="checkbox"/> No
Diabetes (no durante el embarazo)	<input type="checkbox"/> Sí	<input type="checkbox"/> No
Presión arterial alta	<input type="checkbox"/> Sí	<input type="checkbox"/> No
Colesterol alto	<input type="checkbox"/> Sí	<input type="checkbox"/> No
Osteoporosis	<input type="checkbox"/> Sí	<input type="checkbox"/> No
Sobre peso/Obesidad	<input type="checkbox"/> Sí	<input type="checkbox"/> No

28. **Mujeres: Si usted es MAYOR de 40 años, ¿tiene una mamografía anual?**

Sí No No me concierne (Soy menor de 40 años)

Todos: Si usted es MAYOR de 50 años, ¿ha tenido una prueba de colon rectal?

Sí No No me concierne (Soy menor de 50 años)

Parte 6: Preguntas Demográficas

39. ¿Cuál es su edad? (Marque una categoría)

15 - 19 25 - 34 45 - 54 65 - 74
 20 - 24 35 - 44 55 - 64 75 o mayor

40. ¿Su género es masculino o femenino?

Masculino Femenino

41. ¿Cuál es su raza? (Marque todo lo que le concierne)

Indio americano/nativo de Alaska Latinoamericano
 Asiático o isleño del Pacífico Blanco
 Negra o afroamericana Otra: _____

42. ¿Habla usted algún otro idioma en casa aparte del español?

Sí No

Si su respuesta es sí, ¿qué otro idioma habla en casa? _____

43. ¿Cuál es su estado civil?

Nunca casado(a)/Soltero(a) Divorciado(a) Separado(a)
 Casado(a) Viudo(a) Otro

44. ¿Hasta qué grado escolar cursó usted? (marque solo uno)

Preparatoria sin graduación
 Graduado de preparatoria/Diploma equivalente a la graduación de preparatoria
 Formación profesional
 Universidad (sin obtener título)
 Licenciatura
 Título universitario o profesional
 Otro: _____

45. ¿A cuántas personas mantiene este ingreso? _____

**46. ¿Tiene a su cuidado alguno de los siguientes?
(Marque todo lo que le concierne)**

Niño/a discapacitado/a (menor de 18 años)
 Adulto discapacitado (18 años y mayor)
 Anciano/a (65 años y mayor)
 Niño/a adoptivo/a (menor de 18 años)
 Nieto/a (menor de 18 años)

47. ¿Cuál es su estado de empleo? (Marque todo lo que le concierne)

Empleo de tiempo completo Discapacitado/a

Empleado de tiempo parcial
 Jubilado/a
 Militar
 Desempleado/a

Estudiante
 Ama de casa
 Soy mi propio jefe

48. ¿Cuál es su código postal? *(Escriba solo los primeros 5 dígitos)* _____

¡Gracias por tomar el tiempo de llenar esta encuesta!