



UPDATE

In conjunction with the State Health Director’s Conference, an annual data report with the status of the Healthy North Carolina 2020 objectives is produced. As this second annual report was compiled, we encountered challenges related to three areas—data collection, methodology and reporting. The three most substantial challenges are summarized below:

- ▶ Beginning in 2011, two major changes were made to the Behavioral Risk Factor Surveillance System (BRFSS) survey methodology—the inclusion of cell phone interviews and a new statistical method for weighting the data. The Centers for Disease Control and Prevention (CDC) implemented these methodological changes to improve the accuracy of BRFSS estimates; however, the results using these new methods are not comparable to BRFSS estimates from previous years. As a result, updated data for these eight Healthy NC 2020 indicators are not comparable to the baseline and target values.
- ▶ CDC guidelines for assessing recommended levels of physical activity and fruit and vegetable consumption were modified. As a result of this change, as well as the BRFSS methodological changes outlined above, updated data for these two Healthy NC 2020 indicators are not reported.
- ▶ 2011 marked the first full year that North Carolina used the revised U.S. Standard birth certificate. Substantial modifications were made to many of the medical and health information fields collected on the birth certificate, including maternal smoking information. As a result, 2011 data for the Healthy NC 2020 maternal smoking objective is not comparable to prior years. [More details regarding the impact of the birth certificate revision](#) are available from the State Center for Health Statistics.

The Healthy NC 2020 Implementation Team is in the process of developing a standardized plan for addressing objectives that need to be modified as a result of changes in data collection, methodology and reporting. This plan will be used to address the issues outlined above, as well as future modifications, to ensure that we can continue to track progress towards meeting our objectives based on comparable data over time.

The [HealthStats website](#) provides trend data for each objective.

Healthy North Carolina 2020 Objectives

	Baseline	Current	Target
Tobacco Use			
Decrease the percentage of adults who are current smokers ¹	20.3% (2009)	20.9% (2012)	13.0%
Decrease the percentage of high school students reporting current use of any tobacco product	25.8% (2009)	22.5% (2011)	15.0%
Decrease the percentage of people exposed to secondhand smoke in the workplace in the past seven days ¹	14.6% (2008)	8.6% (2012)	0%
Physical Activity and Nutrition			
Increase the percentage of high school students who are neither overweight nor obese	72.0% (2009)	71.2% (2011)	79.2%
Increase the percentage of adults getting the recommended amount of physical activity ²	46.4% (2009)	No update	60.6%
Increase the percentage of adults who consume five or more servings of fruits and vegetables per day ²	20.6% (2009)	No update	29.3%

	Baseline	Current	Target
Injury and Violence			
Reduce the unintentional poisoning mortality rate (per 100,000 population)	11.0 (2008)	11.7 (2012)	9.9
Reduce the unintentional falls mortality rate (per 100,000 population)	8.1 (2008)	9.6 (2012)	5.3
Reduce the homicide rate (per 100,000 population)	7.5 (2008)	6.0 (2012)	6.7
Maternal and Infant Health			
Reduce the infant mortality racial disparity between whites and African Americans	2.45 (2008)	2.50 (2012)	1.92
Reduce the infant mortality rate (per 1,000 live births)	8.2 (2008)	7.4 (2012)	6.3
Reduce the percentage of women who smoke during pregnancy ³	10.4% (2008)	10.6% (2012)	6.8%
Sexually Transmitted Disease and Unintended Pregnancy			
Decrease the percentage of pregnancies that are unintended	39.8% (2007)	42.7% (2011)	30.9%
Reduce the percentage of positive results among individuals aged 15 to 24 tested for chlamydia	9.7% (2009)	10.8% (2012)	8.7%
Reduce the rate of new HIV infection diagnoses (per 100,000 population)	24.7 (2008)	17.3 (2011)	22.2
Substance Abuse			
Reduce the percentage of high school students who had alcohol on one or more of the past 30 days	35.0% (2009)	34.3% (2011)	26.4%
Reduce the percentage of traffic crashes that are alcohol-related	5.7% (2008)	5.3% (2012)	4.7%
Reduce the percentage of individuals aged 12 years and older reporting any illicit drug use in the past 30 days	7.8% (2007–08)	7.9% (2011–12)	6.6%
Mental Health			
Reduce the suicide rate (per 100,000 population)	12.4 (2008)	12.9 (2012)	8.3
Decrease the average number of poor mental health days among adults in the past 30 days ¹	3.4 (2008)	3.9 (2012)	2.8
Reduce the rate of mental health-related visits to emergency departments (per 10,000 population)	92.0 (2008)	104.5 (2012)	82.8
Oral Health			
Increase the percentage of children aged 1–5 years enrolled in Medicaid who received any dental service during the previous 12 months	46.9% (2008)	57.3% (2012)	56.4%
Decrease the average number of decayed, missing, or filled teeth among kindergartners	1.5 (2008–09)	1.5 (2009–10)	1.1
Decrease the percentage of adults who have had permanent teeth removed due to tooth decay or gum disease	47.8% (2008)	48.3% (2012)	38.4%

	Baseline	Current	Target
Environmental Health			
Increase the percentage of air monitor sites meeting the current ozone standard of 0.075 ppm	62.5% (2007–09)	80.5% (2010–12)	100.0%
Increase the percentage of the population being served by community water systems (CWS) with no maximum contaminant level violations (among persons on CWS)	92.2% (2009)	97.4% (2012)	95.0%
Reduce the mortality rate from work-related injuries (per 100,000 equivalent full-time workers)	3.9 (2008)	3.7 (2011)	3.5
Infectious Disease and Foodborne Illness			
Increase the percentage of children aged 19–35 months who receive the recommended vaccines	77.3% (2007)	76.2% (2012)	91.3%
Reduce the pneumonia and influenza mortality rate (per 100,000 population)	19.5 (2008)	19.6 (2012)	13.5
Decrease the average number of critical violations per restaurant/food stand	6.1 (2009)	6.5 (2011)	5.5
Social Determinants of Health			
Decrease the percentage of individuals living in poverty	16.9% (2009)	17.2% (2012)	12.5%
Increase the four-year high school graduation rate	71.8% (2008–09)	82.5% (2012–13)	94.6%
Decrease the percentage of people spending more than 30 percent of their income on rental housing	41.8% (2008)	44.8% (2012)	36.1%
Chronic Disease			
Reduce the cardiovascular disease mortality rate (per 100,000 population)	256.6 (2008)	237.2 (2012)	161.5
Decrease the percentage of adults with diabetes ¹	9.6% (2009)	10.4% (2012)	8.6%
Reduce the colorectal cancer mortality rate (per 100,000 population)	15.7 (2008)	15.1 (2012)	10.1
Cross-cutting			
Increase average life expectancy (years)	77.5 (2008)	78.2 (2012)	79.5
Increase the percentage of adults reporting good, very good, or excellent health ¹	81.9% (2009)	80.7% (2012)	90.1%
Reduce the percentage of non-elderly uninsured individuals (aged less than 65 years)	20.4% (2009)	18.7% (2012)	8.0%
Increase the percentage of adults who are neither overweight nor obese ¹	34.6% (2009)	34.2% (2012)	38.1%
¹ In 2011, the BRFSS methodology changed, so results are not directly comparable to previous years' results.			
² In 2011, the definition for recommended amount of physical activity and fruit and vegetable consumption changed. Therefore, comparable data for these measures are not available at this time.			
³ North Carolina implemented the revised U.S. Standard birth certificate in 2011. The methodology for collecting smoking data was modified, therefore values presented for 2011 are not comparable to prior years.			