

2014
Lincoln County

2014
State Of The County Health

Report

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02.27.15

Lincoln County Partnership for Health

Who are we?

Lincoln County Partnership for Health is a community-based partnership that brings together community members, leaders, and organizations to address local health issues.

Special Thanks to Partnership organizations:

Lincoln County Health Department • Lincoln County Department of Social Services • Lincoln County Schools • Carolinas Healthcare System Lincoln • Communities in Schools of Lincoln County • North Carolina Cooperative Extension • United Way of Lincoln County • Lincoln County Family YMCA • Gaston College • Multicultural Center of Hope • Partnership for Children of Lincoln and Gaston Counties • And More!

Want to see your name here?

Call to join: 704-736-2023

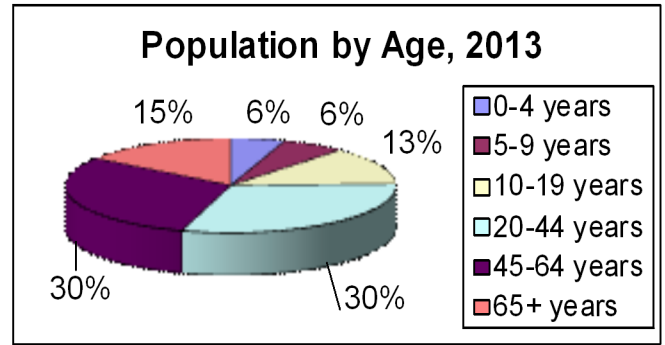
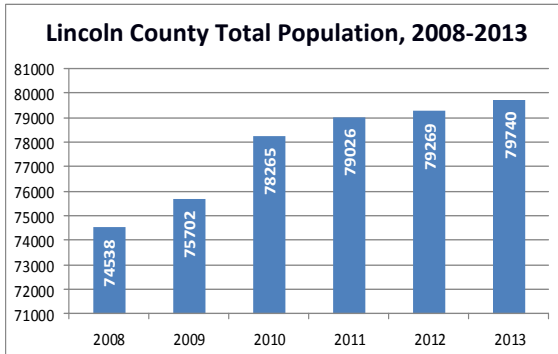


Population

The population of Lincoln County continues to grow. In 2013, the population was 79,026. We grew 6.9% from 2008-2013.

Males and females each hold an even 50% of the total population

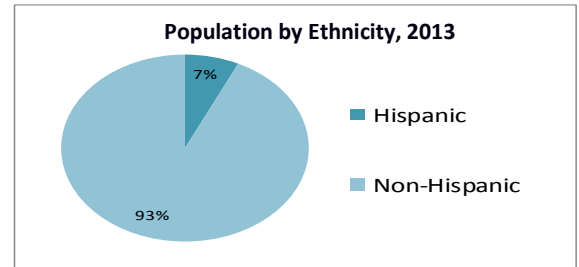
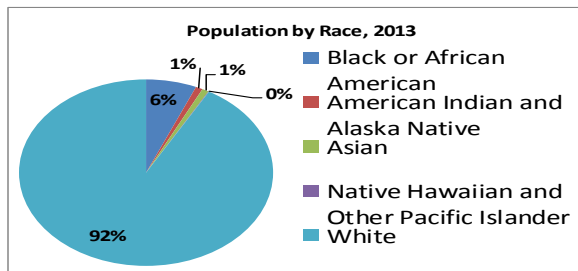
-US Census Bureau



Race and Ethnicity

Race and ethnicity are considered separate and distinct identities, with Hispanic origin asked as a separate question. Thus, in addition to their race or races, all residents are categorized by membership in one of two ethnicities, which are "Hispanic" and "Not Hispanic".

-NC SCHS



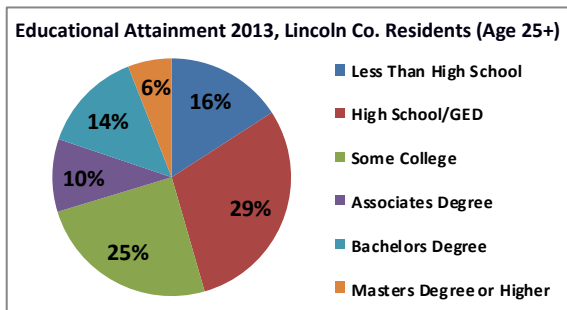
Education

When compared to the State of North Carolina and the United States, Lincoln County's educational accomplishments are mixed. From 2009-2013 (most recent data), 84% of people in Lincoln County held a high school diploma or equivalent, compared to 84.9% for the state and 86% nationally. In that same timeframe, 20% of residents held at least a bachelor's degree, compared to 27.3% for the state and 28.8% nationwide.

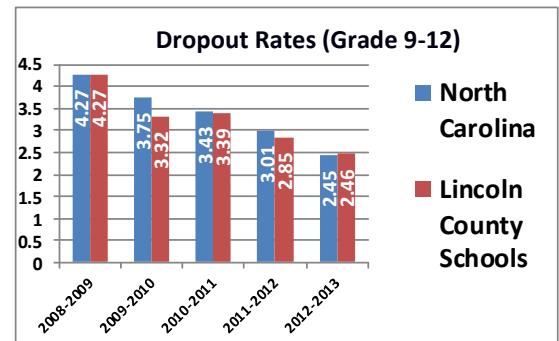
After hitting a high of 4.27 in the 2008-2009 school year, the Lincoln County **dropout rate has decreased to 2.46** in the 2012-2013 school year.

Lincoln County Schools exceeded the State average scores for math, science, reading and writing tests, and a higher graduation rate.

- NC DPI, LCS 2010-11 Annual Report, 2014 American Community Survey



- 2014 American Community Survey



Lincoln Charter School

The Lincoln Charter School is a tuition free public school serving Lincoln and surrounding counties where enrollment is decided by a lottery. The school currently has 2 campuses across the county serving 1,388 elementary, middle and high school students in 2013. The school has a student to teacher ratio of 16.6 to 1.

Education and Health

Education effects lifestyle choices, knowledge and understanding of health issues, and the health related decisions that people make.

-Alliance for Excellent Education

The 2013-2016 Health Priority Areas

Every three years, health departments and Healthy Carolinians partnerships are required to complete a Community Health Assessment (CHA). The purpose of this assessment is to identify the community's top health priorities. Lincoln County's most recent CHA was completed in 2013. The full CHA can be found online at www.lincolncounty.org/health → Documents. The Lincoln County Partnership for Health chose the priorities that the county should focus on for the next three years. Based on need and ability to address an issue, the following priorities were chosen:

1. Chronic Disease Prevention: Increase access to recreational facilities, educate on the importance of physical activity for all ages, increase nutrition education, and improve access to healthy food.
2. Access to Healthcare: Improve and market transportation options, provide mobile clinic options to the community, and decrease infant mortality.
3. Healthy Behaviors: Reduce unintended pregnancies and reduce STD prevalence.

The SOTCH report is an update of the CHA and a snapshot of how we're doing in tackling the above priorities. Trends are identified as either "good" (👍), "bad" (👎), or "in the middle" (👉) on the right side of the page .

DATA FYI:

- For some health statistics in this report, Lincoln County is compared to the State of North Carolina.
- For other statistics in our report, we are compared with the rest of our region, the Piedmont of North Carolina, or our peer or bordering counties
- A lot of the data is from the **Behavioral Risk Factor Surveillance System (BRFSS)**. This is a tool from the CDC to determine health behaviors and conditions across the country.
- **Morbidity** is the rate or number of people that are sick with a certain disease/illness.
- **Mortality** is the rate or number of people who die of a certain disease.

Priority 1: Chronic Disease Prevention

Leading Causes of Death

2009-2013 Ten Leading Causes of Death for Lincoln County and North Carolina for all Age Groups. Unadjusted Death Rates per 100,000 Population					
Lincoln County			North Carolina		
Rank	Cause of Death:	Death Rate	Rank	Cause of Death:	Death Rate
1	Diseases of the Heart	211.6	1	Cancer-All Sites	188.1
2	Cancer-All Sites	186.7	2	Diseases of the Heart	178.9
3	Chronic Lower Respiratory Diseases	64.3	3	Chronic Lower Respiratory Diseases	48.4
4	Cerebrovascular Disease	48.5	4	Cerebrovascular Disease	45.2
5	Other Unintentional Injuries	33.5	5	Other Unintentional Injuries	29.9
6	Alzheimer's Disease	26.7	6	Alzheimer's Disease	29.0
7	Diabetes Mellitus	23.4	7	Diabetes Mellitus	23.3
8	Nephritis, Nephrotic Syndrome, and Nephrosis	21.6	8	Pneumonia and Influenza	18.4
9	Pneumonia and Influenza	18.5	9	Nephritis, Nephrotic Syndrome, and Nephrosis	18.3
10	Motor Vehicle Injuries	15.5	10	Septicemia	14.0

TRENDS



Heart Disease and Stroke mortality

Heart Disease:

Lincoln County's mortality rates for heart disease were higher in 2013 than North Carolina's (NC) at 208.2 and 180.9, respectively. Compared to the state, the Lincoln County Region (LCR) was less likely to have a history of any cardiovascular disease (9.6 for NC and 9.0 for the LCR).

Diabetes:

Compared to the State, the LCR has a lower prevalence of diabetes, as reported in the 2013 BRFSS report at 10.8% for the LCR compared to 11.4% for NC. Lincoln County's diabetes mortality rate is also lower when compared to North Carolina. In 2013, the rate for Lincoln County was 15.0 compared to 24.4 for NC. One reason for this may be more self management.

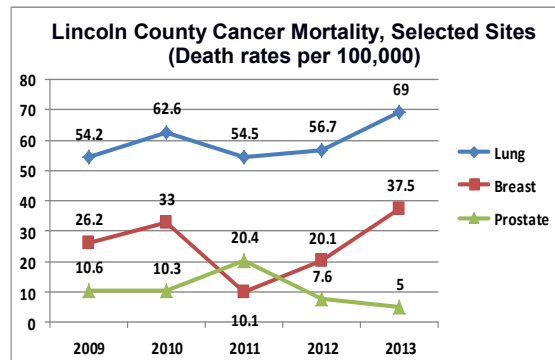
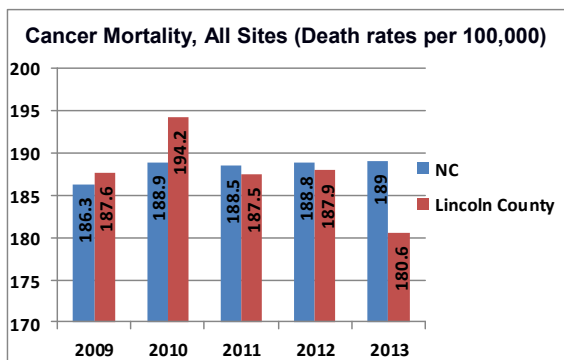


55.5% of people have attended a diabetes self management class in the Lincoln County Region in 2013.

Respiratory Disease:

Mortality rates for Lincoln County, when compared to NC, are higher. For 2013, mortality rates for Chronic Lower Respiratory Diseases was 55.2 for Lincoln County and 50.7 for NC. The combined death rate for Chronic Lower Respiratory Disease for the years of 2009-2013 was much higher for Lincoln County when compared to NC at 61.8 and 46.1, respectively. According to the BRFSS survey, LCR residents were similarly likely to answer that they had been diagnosed with asthma currently or in the past, when compared to the state, at 13.0% of the time for LCR residents and 13.1% of the time for NC residents as a whole.

Cancer



-NC SCHS

Though there was a spike in cancer mortality in 2010 with a rate of 194.2 for Lincoln County, it has remained at a lower rate than previous years, prior to 2009. Prior to 2009 Lincoln County's cancer numbers were slightly above NC's. With the exception of 2010, Lincoln County's cancer numbers have been lower than NC's every year, beginning in 2009. The biggest difference between cancer mortality for NC and Lincoln County can be seen when looking at 2013, when rates were 189 for NC and 180.6 for Lincoln County.

Lung cancer rates have shown a steady rise over the last 5 years with the exception of a spike in 2010. Lung cancer rates were at their highest in 2013, in Lincoln County, with a rate of 69 when compared to previous years and were higher than the 2013 NC rate's for 2013 which were 56.

Lincoln County's prostate cancer rate has fallen steadily since 2006 when it dropped from 22.4 to 10.3 in 2010. With the exception of a spike in 2011 of 20.4, prostate cancer rates still continue to decrease in recent years at 7.6 to 5, in 2012 and 2013 respectively. This is especially positive when compared to the NC rate's of 17.8 and 17.2 for 2012 and 2013.

Breast Cancer is on the rise. After a drop in 2011, rates continue to rise reaching it's highest peak in 2013 at 37.5. To address this, the Lincoln County Health Department has partnered with Susan G. Komen to provide uninsured and underinsured women with mammograms at low or no cost.



When combined, cancer mortality rates are continuing to drop and are trending lower than NC in recent years.



Lung and Breast Cancer Mortality are increasing.

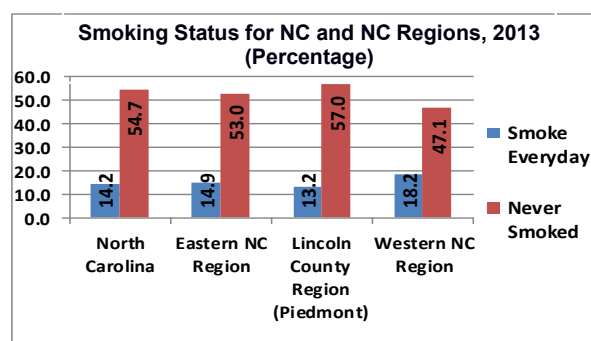
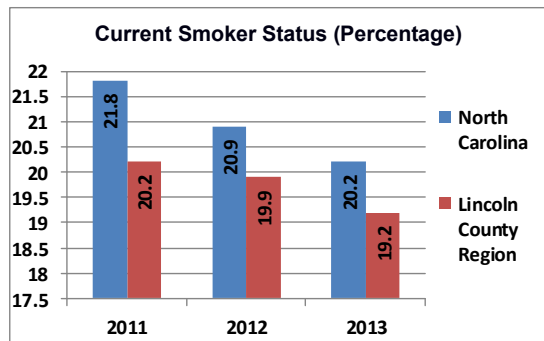
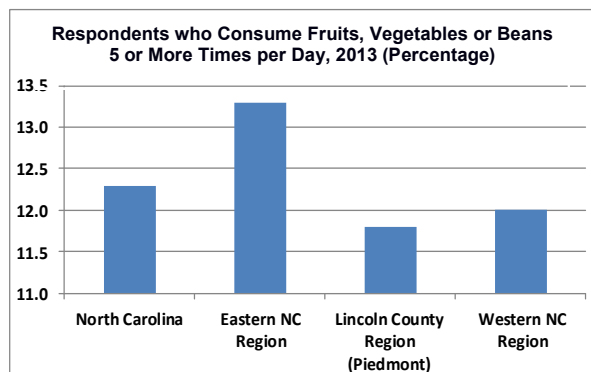
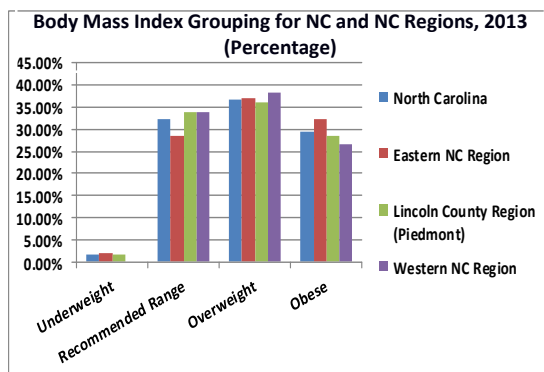
Obesity

According to the 2013 BRFSS, 64.5% of respondents in the LCR were overweight or obese compared to 61.6% of respondents in NC. The 2013 **overweight and obesity numbers are down slightly from 2012** at 65% in the LCR and 65.8% for NC.

BMI stands for Body Mass Index and is a relationship between weight and height that is associated with body fat and health risk. Obesity (having a BMI of 30 or greater) is a leading risk factor for many chronic diseases including diabetes, heart disease, and cancer. In the LCR, individuals self reporting they had a healthy weight went from 33.1% to 33.8% from 2012 to 2013. **The LCR had more self reported healthy weight individuals than NC in 2013.**

Educational Attainment level creates a Health Disparity regarding obesity in NC. For the population holding less than a high school diploma, NC obesity is reported at 36.8%, compared to 33.4% for high school graduates, 32.9% for the population attending college but not completing it, and 23.4% for college graduates.

-NC SCHS, 2014 American Health Rankings



-NC SCHS, BRFSS

Behaviors

In 2013, 41.6% of LCR respondents reported using available trails, greenways, bike paths, or sidewalks for biking, walking or other physical activity, down from 42.4% in 2012. NC residents reported using available trails, greenways, bike paths, or sidewalks for biking, walking or other physical activity at 39.4% in 2013, down from 42.3% in 2012.

As per the 2013 BRFSS survey, LCR residents were **more likely to respond that they participated in physical activity or exercises (outside of their regular jobs) such as running, calisthenics, golf, gardening, or walking for exercise** than other regions in NC and NC as a whole. Percentages of responses were as follows: 74.5% for LCR, 73.4% for NC, 71.8% for Eastern NC, and 71.7% for Western NC. This is good news because research shows that proper physical activity decreases your risk for many chronic health conditions including heart disease, type 2 diabetes, high blood pressure, high cholesterol and stroke. LCR residents reported lower outdoor physical activity but more physical activity overall when compared to other regions and NC.

In 2013, LCR respondents were **less likely to consume fruits, vegetables or beans five or more times per day than all other regions in NC.** This is concerning because eating vegetables and fruits as part of a healthy diet may reduce the risk for heart disease, obesity, type 2 diabetes, high blood pressure and protect against some cancers.

Individuals reporting as "Current Smokers" has decreased steadily from 2011 to 2013 in the LCR. The LCR rates for individuals reporting as "Current Smokers" was less than NC every year from 2011 to 2013. This is good news because half of all long-term smokers die early from smoking related diseases including heart disease, lung cancer and respiratory diseases. Additionally, secondhand smoke doubles the risk of children getting pneumonia, bronchitis and asthma.

-NC SCHS, BRFSS

TRENDS



Overweight and Obesity numbers are down slightly from 2012 to 2013 but still too high!



Lincoln County Region respondents were more likely to say they have never smoked and less likely to say they are a current smoker.



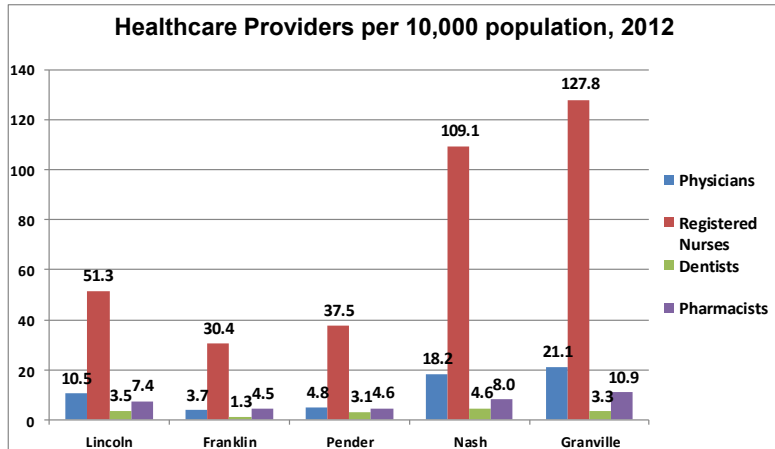
LCR reported more physical activity overall, in 2013, when compared to other regions and NC.



Lincoln County Region residents responded that they are less likely to eat 5 or more servings of fruits, vegetables or beans per day.

Access to Healthcare

(Most recent data) When compared to our North Carolina peer counties, Lincoln County falls in the middle for number of physicians, registered nurses and pharmacists per 10,000 population. Lincoln County reports more physicians, registered nurses and pharmacists than Franklin and Pender Counties but less than Nash and Granville Counties. For dentists, Lincoln County ranks above all peer counties except for Nash County with a rate of 3.5 for Lincoln and 4.6 per 10,000 population for Nash.



-Access NC (January 2015 Report)

According to the 2013 BRFSS, LCR residents (under age 65) were **slightly more likely than the state to report that they had health insurance coverage at 76.9% and 75.8%**, respectively. LCR residents (under age 65) were also slightly more likely to respond that they had health insurance coverage than the Eastern NC Region (74.2%) and the Western NC Region (76.7%). Additionally, **when asked "Was there a time in the past 12 months when you did not take your medication as prescribed because of costs", LCR residents were less likely to answer "Yes" when compared to NC, Eastern NC region and Western NC region at 10.4%, 11.3%, 12.5%, and 12.9%, respectively.** Also, **when asked "Was there a time during the last 12 months when you needed to see a doctor, but could not because of the cost", LCR residents were less likely to answer "Yes" when compared to NC, Eastern NC region and Western NC region at 18.1%, 18.5%, 19.1% and 19.4%, respectively.**

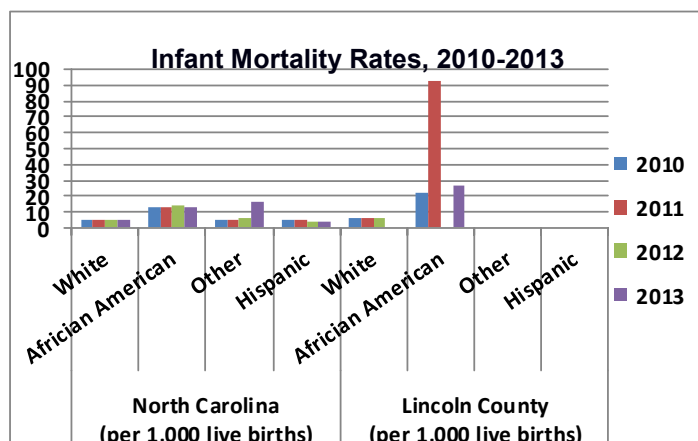
Income

From a high of \$26,785, in 2005, Lincoln County's **per capita income** fell 15.8% to \$22,558 in 2009 but has begun to increase in recent years to \$25,550 in 2013. For 2013, Lincoln County is **slightly ahead of NC**, which had a per capita income of \$25,284. This means that the residents of Lincoln County earned 1.1% more than their peers in North Carolina. **We also earned about 11.4% more than the bordering counties of Catawba and Gaston (in 2013)**, who had per capita incomes of \$23,232 and \$22,658, respectively. This is important because a higher rate of income is positively correlated to the purchase of necessary medical services (paying for doctors or prescription drugs).

-NC SCHS

Infant Mortality

NC and Lincoln County infant mortality rates fluctuated between 2010 and 2013. **Lincoln County showed the greatest spike in infant mortality, for African Americans, in 2011 (93.0)** but rates dropped down in 2012 (0.0) and leveled back out near the 2010 rate (22.2) in 2013 (26.3). Other races and those reporting as Hispanic had no reported infant mortalities between 2010 and 2013, in Lincoln County. However, our infant mortality rates for whites and African Americans **remains higher than the state for most reported years.**



-NC SCHS

TRENDS



Lincoln County falls in the middle when compared to our peer counties for number of healthcare providers per 10,000 population.



More likely to have health insurance coverage than NC, Eastern NC region and Western NC region.

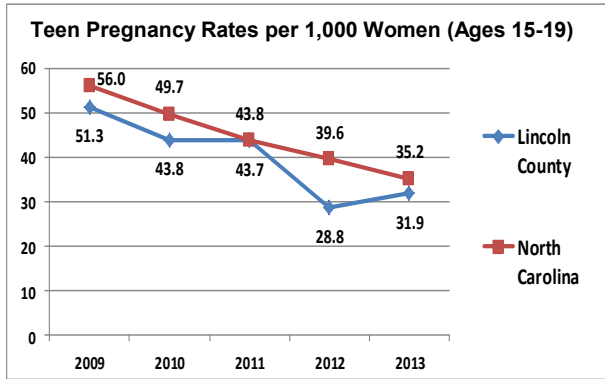


Higher per capita income than NC, Catawba and Gaston Counties.



Infant Mortality

Unintended Pregnancy



Lincoln County experienced a decrease in the rate of teen pregnancies from 2009 to 2012, with a slight increase in 2013. However, Lincoln County has fallen below NC's teen pregnancy rates for 2009-2013 and rates continue to drop. Lincoln County had the **60th highest teen pregnancy rate** in NC, in 2013, which is higher than the 2012 rank of 79.

In 2013, the rate of teen pregnancies for 15-17 year old women was too small to compute because there were only 19 reported cases (reported cases includes birth

rates, abortion rates and fetal death rates). This was also the case for 2012 with only 17 reported cases for 15-17 year old women. Teen Pregnancy rates were used in place of unintended pregnancy rates because this data is not available for all ages.

Lincoln County Schools provides comprehensive health education to students. Students are provided with accurate information that encourages them to be responsible for their own health and behavior. The school health education program meets all requirements by state and federal law and all objectives in the state curriculum for Healthful Living.

-NC SCHS (APPCNC)

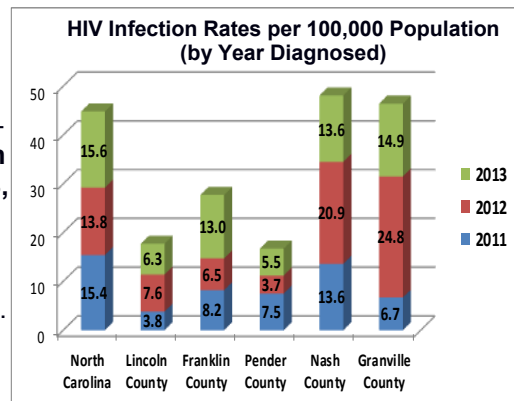
TRENDS



Teen Pregnancy is decreasing overall.

Other Sexual Health Issues

In 2013, Lincoln County's HIV infection rate (6.3) was lower than all peer counties and NC except for Pender County (5.5). This is an improvement from 2012 when Lincoln County's rate spiked to 7.6 from 3.8 in 2011. For years 2011-2013 Lincoln County HIV infection rates remained lower than NC. **When compared to our peer counties for years 2011-2013, Lincoln County ranks better than all counties except Pender on newly reported HIV infections** at 60th out of 100 counties for Lincoln, 61st for Pender, 44th for Franklin, 19th for Granville and 18th for Nash. Ranks are based on a three year average rate for years 2011-2013. HIV reports are important because teens and young adults aged 13-24 account for more than 25% of new infections in the US.

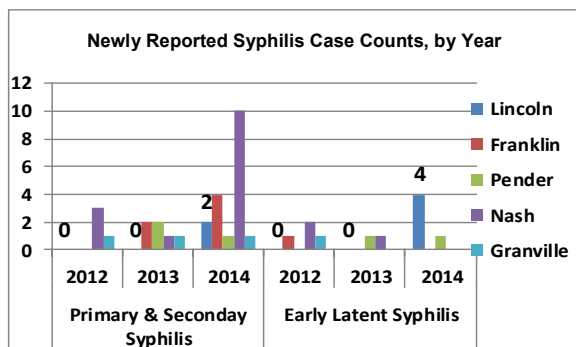
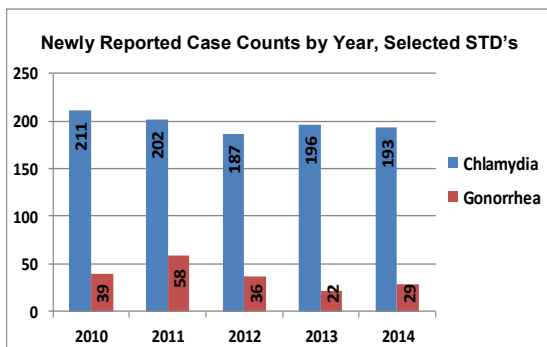


-2013 HIV/STD Surveillance Report, NC DHHS Communicable Disease (APPCNC)



HIV infection rates increased for Lincoln County from 2011 rates.

Emerging Issues: In 2013 and 2014, there was a rise of newly confirmed cases of Chlamydia for residents of all ages in Lincoln County when compared to 2012 numbers. Gonorrhea cases were trending down in recent years, with the exception of 2011, until a slight upturn in 2014. The total numbers of Chlamydia and Gonorrhea are important indicators of adolescent sexual health because they are most common among this age group.



Case counts for chlamydia showed a steady decrease between years 2010-2012, until a rise in 2013. 2013 and 2014 case counts for chlamydia have remained relatively constant at 196 and 193, respectively. **Gonorrhea case counts continue to fluctuate in recent years**, with our highest case count numbers being reported in 2011 at 58.

Emerging Issues: Lincoln County syphilis numbers for primary (P), secondary (S) and early latent (E.L.) have increased from zero cases in 2012 and 2013 to 2 cases of P and S and 4 cases of E.L. in 2014. This is concerning because it was previously eradicated in Lincoln County.

-NCEDSS, NCDHHS



Chlamydia, Gonorrhea and Syphilis infections.

Progress within Last Year & New Initiatives

Chronic Disease Prevention:

- Wellness screenings, walking programs, partnerships with The Rock Fitness gym, and tobacco cessation programs offered to county employees. (Estimated reach 750 county employees)
- **New Initiative:** Partnered with UNCG for a health coach certificate training to provide one-on-one or group coaching sessions. Certification to be received before May 2015. (Reach: Health Department clients)
- Nutrition and Physical Activity programs provided in schools and to the community. This is an ongoing initiative. (Reach: 210 6th, 7th and 8th grade students & 25 Denver United Methodist Church female members)
- Partnered with The Learning Express Daycare to provide physical education opportunities and information to day-care aged children and parents (Reach: 55 students & 20 parents)
- 2 Health Fairs at the Lincoln County Senior Center reaching seniors and college aged students (Estimated reach: 120 people)
- Partnered with National Night Out and Tabernacle of Blessing Church (High risk community) in August 2014 to provide tobacco cessation and educational information to participants (Reach: 45 High-risk African American community members)
- Partnership with Susan G. Komen Foundation to provide mammography screenings and educational information to uninsured and underinsured women at low or no cost targeting African American and Hispanic women. (Reach: 24 African American churches received educational materials, 100 women participated in the Pink Saturday event at Tucker's Grove United Methodist Church, 23 Hispanic women received no or low cost mammograms at St. Dorothy's Catholic Church in 2014.)
- New Farmer's Market established at Department of Social Services (2013) to reach low income individuals.
- CDC Tips from former smokers ad campaign ran for 9 months at the local cinema, in 2014. Ads were shown before every movie.
- **New Initiative:** Partnering with childcare centers to provide indoor exercise equipment and on-going technical assistance as part of the NapSACC initiative in 2015. Pilot locations are being assessed currently. The need for indoor exercise opportunities is apparent when weather issues arise. (Estimated Reach: Children aged 0-5)

Access to Healthcare:

- Partnered with Susan G. Komen and Charlotte Radiology to provide underinsured/uninsured women with mammograms at low or no cost to them. On-site mammograms were provided to Lincoln County employees.
 - On-Site Mammograms provided to:
 - * St. Dorothy's Catholic Church—March 2014
(Reach: 23 Hispanic women)
 - * Department of Social Services—January 2015
(Reach: 34 Lincoln County Government employees)
 - * James W. Warren Citizens Center—April 2015
(Estimated reach: 150 women to receive educational materials, 34 African American women to receive on-site mammograms)
- Partnered with the Eyes of Ian Project and CMC-Lincoln to provide CPR/AED and basic first-aid training to all Lincoln County Schools. The project was created in response to a tragedy involving a 3rd grader at a Lincoln County Elementary School in 2011. In 2013 and 2014, our Lincoln County School nurses, Public Health Educator and Child Care Health Consultant were trained and certified to provide this vital training.
- **New Initiative:** In 2014, in collaboration with the *Partnership for Children in Lincoln and Gaston Counties* an infant mortality task force was created to address this important issue and raise awareness for the cause. Currently the task force is still in the planning stages and preparing for tangible change.
- Over 1,000 preventative potassium iodide (KI) tablets were distributed to residents living in the 10-mile Emergency Planning Zone near McGuire Nuclear Plant at the East Lincoln Community Center. Tablets are available year-round at area libraries, daycares, schools and institutionalized centers. Making this product available at multiple locations improves our reach and distribution rate for this important medication.

Healthy Behaviors:

- A position was filled in our Family Planning Clinic with a doctor who specializes in gynecology and fertility in May 2014. Since this doctor's arrival, Lincoln County Health department (LCHD) has offered increased education to clients and to the community. Community presentations have been done to educate on unintended pregnancies and complications of unprotected sex. Condoms were distributed at these events. (Reach: 50)
- **New Initiative:** LCHD provides medical interventions (Birth control pills, Depo-Provera injections, and IUD's) and condoms to individuals for low or no cost (based on insurance status and income). LCHD began providing IUD's to clients in August 2014. (Reach: 20 clients) Uninsured individuals that meet eligibility requirements can receive a free IUD through the ARCH Foundation. This patient assistance program provides Skyla and Mirena to women in the United States.
- Partnered with ALFA (AIDS Leadership Foothills-Area Alliance) to provide HIV screenings to high-risk and low-income communities in July and August 2014. Condoms were distributed at these events. (Reach: 10)
- In May 2014, LCHD started testing males for Chlamydia. This initiative is not state funded.
- **New Initiative:** Communicable Disease clinic hours were expanded in the last quarter of 2014, to 5 days per week from 3 days per week to reach more clients.
- Family Planning Clinic (Estimated Monthly Reach in 2014: 111 Unduplicated Patients)
- Communicable Disease Clinic (Estimated Monthly Reach in 2014: 46 Unduplicated Patients)

References

- NC SCHS**—North Carolina State Center for Health Statistics, <http://www.schs.state.nc.us/SCHS/>
- BRFSS**—Behavioral Risk Factor Surveillance System, <http://www.schs.state.nc.us/SCHS/data/brfss.cfm>
- US Census**—<http://quickfacts.census.gov/qfd/states/37/37109.html>
- Lincoln County Schools 2013 Annual Report**—<http://www.lincoln.k12.nc.us/www/lincolncountync/site/hosting/Budget%20and%20Finance/2013%20CAFR-FINAL.pdf>
- Lincoln Economic Development Association**—<http://www.lincolneda.org>
- NC Justice**—<http://www.ncjustice.org/>
- North Carolina Employment Security Commission**
- NC Tobacco Prevention and Control Branch**—www.tobaccopreventionandcontrol.ncdhhs.gov/data/Documents/CountyProfiles/LINCOLN.pdf
- American Diabetes Association**—www.diabetes.org/diabetes-statistics/cost-of-diabetes-in-us.jsp
- The National Campaign to Prevent Teen Pregnancy**—<http://www.thenationalcampaign.org/costs/pdf/states/northcarolina/onepager.pdf>
- Lincoln County Health Department**—Lincoln County Health Department
- NC Public Health HIV/STD Prevention and Care Branch** - <http://www.epi.state.nc.us/epi/hiv/stats.html>
- Statemaster**—www.statemaster.com
- America's Health Rankings**—www.americashealthrankings.com
- NC Department of Health and Human Services**—<http://www.ncdhhs.gov/dma/countyreports/2013/Cnty55.pdf>
- NC Department of Health and Human Services**— Communicable Disease Branch
- NC Electronic Disease Surveillance System**—<https://ncedss.ncpublichealth.com>
- NC State University Institute for Emerging Issues**—<http://www.ncsu.edu/iei/documents/healthtool/HealthTool.swf>
- Feeding America**—<http://feedingamerica.org/hunger-in-america/hunger-studies/map-the-meal-gap.aspx>

