Lincoln County
State Of The County Health Report 2012
“He who has health, has hope. And he who has hope, has everything.”
Proverbs
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 • CMC-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 2011, the population was 79,026. We grew 23.9% from 2000-2011.

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".

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 3 campuses across the county serving 1,200 elementary, middle and high school students.

Education

When compared to the State of North Carolina and the United States, Lincoln County’s educational accomplishments are mixed. From 2005-2009 (most recent data), 78% of people in Lincoln County held a high school diploma or equivalent, compared to 83% for the state and 84.6 nationally. In that same timeframe, 17.1% of residents held at least a bachelor’s degree, compared to 25.8% for the state and 27.5% nationwide.

After hitting a high of 4.03 in 2006, the Lincoln County dropout rate increased slightly to 2.32 in 2011 which is still significantly less than the 2006 data.

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

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 2009-2013 Health Priority Areas

Every four 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 2009. 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 four years. Based on need and ability to address an issue, the following priorities were chosen:

1. **Chronic Disease Prevention**: diabetes management, heart disease and stroke prevention, obesity prevention, and adult mental health,

2. **Financial Wellness**: financial preparedness, access to care, and medication affordability and use,

3. **Healthy Teens**: teen sexual health issues, teen pregnancy prevention, teen tobacco use prevention, drinking and driving education, and youth mental health.

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” (👍) or “bad” (👎) on the right side of the page. Especially good changes for 2010 are noted with a spotlight (💡).

**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.
- 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

**Diabetes**

Compared to the State, the Lincoln County Region has a **lower prevalence of diabetes**, as reported in the BRFSS report. However, the rate has increased from 2010 to 2011 from 8.6% to 10.5%. We are below the state of North Carolina, which has the 5th highest diabetes rate in the United States. Lincoln County’s **diabetes mortality rate is also increasing**. From 2009 to 2010, the rate increased from 21.1 to 25.6. One reason for this may be less self management. In 2011, **50.6% of diabetics reported attending a diabetes self management class as compared to almost 60% in 2010**. Our diabetes mortality and morbidity numbers are improving slightly, but the health effects of diabetes are still hurting our population. Our mortality rates for **kidney related illnesses** are lower than the state (19.2 and 19.8 for 2010). Forty four percent of kidney disease is caused by diabetes. Another condition that can result from diabetes is retinopathy. Lincoln County’s rate for **retinopathy** was 22.6 compared to 22.2 for the state.

**Heart Disease**

Lincoln County is showing progress in **mortality from heart disease and stroke**. After peaking in 2007 at 276.2, the rate continues to fall from 229.8 in 2009 to 221.0 in 2010. Our stroke rate has also fallen since 2007, when it was 57.7. The rate was 43.4 in 2010. The rate for both, for the most part, is still above both the state, though the gap is shrinking.

**Smoking** is a major risk factor for both heart attack and stroke. Lincoln County region respondents continue to remain below the state. In 2009, the number of people reporting smoking in the BRFSS fell to its lowest level since 2004. That rate remained the same (18.9%) in 2010. It increased to 20.2 in 2011 but it is still below the state rate. The most dramatic decrease happened from 2007 to 2008, when the rate went from 21.5% to 19.3%. Given this positive, it is important to remember that almost one in five adults in the Lincoln County region reported smoking. It is estimated that over $5.5 million in Medicaid costs can be attributed to smoking.

31.1% of Lincoln County Region 2011 BRFSS respondents reported having current **hypertension**, or high blood pressure. This is an increase from 30.3% in 2009. Hypertension is a major risk factor of heart disease and stroke.
Cancer

Though there was a spike in cancer mortality in 2008 with a rate of 210.6, it has remained at a lower rate of 194.2 for 2010 (which is just somewhat higher than 2009). Lincoln County’s cancer numbers are slightly above the state. The Lincoln County Region also had better than the state numbers in residents receiving treatment for cancer, with a rate of 7.4 compared to the state’s rate of 8.5 in 2009. Also in 2009 9.7% of Lincoln County Region respondents report having had cancer compared to 10.3% of North Carolinians. In Lincoln County, this represents a drop from 12.8% in 2002, the last year that data was collected.

When looking at specific types of cancer, mortality rates vary in Lincoln County. Lung cancer rates are steady over the past four years, but remain decent when compared to the state. The lung cancer rate fell from 73.8 in 2008 to 54.2 in 2009 compared to 57.3 for the state. However, the rates have increased for 2010 to 62.6 which is higher than the state rate but still considerably better than the 2008 rate for Lincoln County. Lincoln County’s prostate cancer rate has fallen steadily since 2006 when it was 22.4 to 10.3 in 2010. This is especially positive when compared to the state (19.7) rates.

Breast Cancer is on the rise. The rate increased from 13.8 in 2007 to 33.0 in 2010. To address this, the Lincoln County Health Department is currently partnering with the Susan G. Komen Organization to help underprivileged residents get help.

Obesity

According to the 2011 BRFSS, 63.7% of respondents in the Lincoln County region were overweight or obese. BMI stands for Body Mass Index and is a relationship between weight and height that is associated with body fat and health risk. Obesity, which is defined as having a BMI of 30 or greater, is a leading risk factor for many chronic diseases, including diabetes, heart disease, and cancer. The rate increased to 28.5% in 2011. People self reporting as ‘obese’ increased, going from 26.7% to 28.5%. People reporting they had a healthy weight went from 35.3% to 34.5%, the lowest since 2009. The Lincoln County Region also has more healthy weight people and less obese people than the State of NC, which is an improvement from 2009.

What’s the big deal with obesity?

Obesity has become the leading health concern of our nation, our state, and our county. In North Carolina, it is estimated in 2011 that $75.64 billion dollars will be spent in direct and indirect costs in adults as a result of obesity.
In 2011, 74.9% of Lincoln County Region respondents reporting exercising more than 30 minutes per day, down from 75.8% in 2010. 20.6% of Lincoln County Region respondents reported consuming 5 or more servings of fruits and vegetables (last reported data was 2009).

Poor nutrition and lack of physical activity contribute to the risk of many chronic diseases, including cancer, diabetes, and obesity. **-NC SCHS, NC CATCH**

Lincoln County has a much higher number of persons with emotional disturbances than our peers (This is the most recent data as NC CATCH no longer exists). In 2008, Lincoln County had an estimated 1,821 people under the age of 18 and 3060 people over the age of 18 living in the county with severe emotional disturbances. Our peer averages were 1,642 under 18 and 1,906 over 18. We are in great need of more mental health providers in the county. When compared to the state’s rate of two psychologists and 1 psychological associate per 10,000 population, Lincoln County fairs poorly **-NC SCHS, NC CATCH**

Lincoln County is above it’s peer counties average for all age groups when considering substance abuse (most recent data since NC CATCH no longer exists). In 2008, there were an estimated 480 residents of Lincoln County age 12-17 who abused a substance. This is actually a decrease from 490 in 2007. A similar decrease occurred in the 26 and above age range, where the number went from 3438 in 2007 to 3371 in 2008. These are especially positive numbers given that our population is growing and we still experienced a decrease. The number for the 18-25 age group did increase, but only slightly, from 1323 to 1393. **-NC SCHS, NC CATCH**

After hitting a peak of 20.6 in 2007, the Lincoln County suicide rate dropped to 7.9 in 2009 with a small increase of 8.9 in 2010. The 2009 rate represents the **-NC SCHS.**
From a high of $26,785 in 2005, Lincoln County’s per capita income fell 15.8% to $22,558 in 2009. We had a slight increase to $22,734 in 2010. This is a lower income than 2002. We continue to lag behind the State, which had a per capita income of $26,823 in 2008, when Lincoln County’s was $23,044. This means that the residents of Lincoln County earned 31.8% less than their peers in North Carolina. We also earned about 7% less than the bordering counties of Catawba and Gaston, who had incomes of $24,961 and $29,854 respectively. This is important because the majority of Lincoln County residents earned 31.8% less than their peers in North Carolina.

Lincoln County foreclosures increased from 170 in 2000 to 553 in 2010. This represents a 225% jump. From January 1-March 31 the rate was already at 141. Foreclosures increase the amount of mental stress on those affected, therefore affecting their physical health, including blood pressure and increasing risk for heart disease and stroke.

Access to Care: (Most recent data)
Lincoln County has fewer healthcare professionals per person than the State in every major discipline. Though we are still lacking severely, the disparity is improving. After the rate for physicians had years of steady decrease from 9.1 to 6.4, the rate rose to 9.5 in 2010. The disparities is especially wide when considering registered nurses (RNs). In 2010, the rate of RNs nurses for the state was 97, compared to 43.3 for Lincoln County.

Another indicator of poor access to care is that in most age categories, the percentage of Medicaid eligible children are not seeing a dentist. This could indicate that the children are unable to find a Medicaid dentist in the county.

Uninsured
According to the 2011 BRFSS report*, Lincoln County region residents self-reported an uninsured rate of 20.6, up from 18.2% in 2010. The state had a rate of 20.7% in 2011.

Unemployed
The unemployed rates have come down slightly for 2012 when compared to those of 2011. The rate was 10.1% in May of 2012, and the rate increased to 10.5% the following month.
Lincoln County experienced a decrease in the rate of teen pregnancies from 2008 to 2010. North Carolina has the 9th highest teen pregnancy rate in the United States. We are currently lower than the State rate. The average annual cost associated with a mother age 17 and under in North Carolina is $3,868. In 2010, there were 35 pregnancies associated with this age group. That means that in 2010, teen pregnancies cost Lincoln County over $135,000 which is less than the $181,000 spent in 2008. Lincoln County’s minority rate for teen pregnancies was 63.5 (down from 102.8 in 2008) compared to the State’s rate of 74.3.

The age of teenage mothers in Lincoln County is getting slightly older. Since 2006, the rate of teen-age mothers who were 15-17 years old has gone from 34% to 31%. There has not been a teen-age mother under the age of 15 in Lincoln County since 2006.

In 2010, there were 46 newly confirmed cases of Chlamydia in Lincoln County in residents aged 19 and under. This trend fits with the county’s Chlamydia rate, which has gone from 120.3 to 276.2 since 2005.

There is evidence that there is an increase in sexually transmitted infections among Lincoln County teens. The Lincoln County Health Department has seen an increase in gonorrhea cases, HPV (human pappillomavirus, the virus that causes genital warts and cervical cancer) cases, as well as 2 confirmed cases of HIV in 19 year olds in 2010.

Alcohol, Tobacco, and Other Drugs

Youth Tobacco Use Down! In 2011, 94.3% of high school students reported that they had tried tobacco (cigarettes, cigars, spit tobacco, or other tobacco product). This is down 1.7% from 96% in 2009. 99% of high school students across the state reported the same in 2011. 46.8% of middle school students reported trying tobacco in 2011, compared to 59.1% in 2009. 50% of middle schoolers across the state reported the same thing. The Lincoln County Health Department no longer runs the program in the schools targeting youth tobacco use. However, numerous non-stopping materials are kept in house for distribution.

There are an estimated 480 youth age 12-17 in Lincoln County with substance abuse issues. In 2008, the total population of 12-17 year olds was 6445, meaning that 7.4% of youth age 12-17 had an issue with substance abuse. While this is better than the state rate of 7.9%, Lincoln County’s peers had a rate of 5.3%.

Anecdotal evidence reveals that marijuana use is high among Lincoln County teens. Marijuana use can lead to problems with memory and learning, distorted perception (driving ability), trouble with thinking and problem solving and loss of motor coordination.
Emerging Issues

Obesity and Food Insecurity

Obesity has been an issue in the making in Lincoln County for many years. According to BRFSS data, the rate has increased from 25.7 in 2006 to 28.2 in 2007. This rate held steady until 2010 where the rate dropped back to 26.7 (the best rate since 2006). In 2011, the rate jumped back up to 28.5. Community strategies to reduce obesity is to reduce children’s screen time by 30 minutes, show employers that wellness programs can save them money. Lincoln County has put a Wellness Committee in place as of 2012 and they are taking steps to change the health of employees. And lastly to provide nutritional counseling to those obese or at risk. A county mandated wellness screening took place in which if any risks were identified the employee was referred to Carolinas Medical Center for nutritional counseling.

Food Insecurity: Lincoln County’s food insecurity rate has drastically dropped from 19.0 in 2009 to 16.8 in 2010. As of 2010, 12,710 people were considered food insecure compared to 13,830 in 2009. Though the rates are trending positively food insecurity is still a major problem in this area. Lincoln County is ranked 43rd on the rank of most secure to least secure. Community strategies to decrease food insecurity include opening more farmers markets, increasing access to public transit, and reducing barriers to new retail food outlets. Lincoln County is working to put these strategies into action by utilizing the grant funds provided by the CDC for the Community Transformation Project. Lincoln County has someone on staff who is working to influence the local food market and improve the food environment in a 10 county region.

-NC State Institute for Emerging Issues/NC SCHS

-NC State Institute for Emerging Issues/Feeding America
Here’s What We’re Doing About It

Chronic Disease Prevention:
- Color Me Healthy training—taught through our local Cooperative Extension agency
- Collaborations with Pathways LME
- Health fairs—At least six health fairs were done in churches, schools, festivals, etc by 10-15 different staff persons in 2012

Healthy Teens:
- Bullying prevention classes—two all day classes were done at local middle schools by 2-3 different members of the Partnership for Health
- Sexual health education at DSS—taught 1-2 times per year by a Health Educator from the Health Department.
- Teen tobacco prevention—taught at least monthly, sometimes twice monthly as outside events or in schools.

Financial wellness: classes have been taught approximately 8-10 times in 2012 at Lincoln County Cooperative Extension.
- Financial literacy classes
- Foreclosure prevention education
- Financial wellness fairs

New Initiatives—Community Transformation Project
The Region 4 (Alexander, Cabarrus (lead agency), Catawba, Cleveland, Gaston, Iredell, Lincoln, Rowan, Stanly, and Union counties) Community Transformation Project (CTG) is a state-funded initiative designed to promote tobacco-free living, active living, and health eating among 1.3 million North Carolinians in ten counties. The five year grant works through policy, systems and environmental change to target root causes of chronic disease within the region. Intended as a collaborative, community-driven effort, the CTG Project calls on counties to implement prevention strategies proven to have a positive impact on health and health disparities.
NC SCHS - North Carolina State Center for Health Statistics, http://www.schs.state.nc.us/SCHS/


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


Lincoln County Health Department - Lincoln County Health Department North Carolina Local Government Debt Setoff Program


Statemaster—www.statemaster.com

America’s Health Rankings—www.americashealthrankings.com


NC State University Institute for Emerging Issues—http://www.ncsu.edu/iei/documents/healthtool/HealthTool.swf
