

State of the County Health Report 2017

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Purpose

The 2017 State of the County Health report provides community partners, stakeholders, and the general public with an update on the priority health issues identified in the 2016 Community Health Assessment and actions taken to address these issues. The Montgomery County Health Department, FirstHealth of the Carolinas, and members of the Montgomery County 2020 Vision Task Force collaborated to complete the 2016 assessment. The top three community health priority issues identified are:

1. Substance Abuse Prevention and Reduction (including Opioids, Alcohol, and Tobacco)
2. Diabetes/Obesity Prevention and Control
3. Teen Pregnancy Prevention

To view the 2016 Community Health Assessment, please visit the Montgomery County Health Department's website at

www.montgomerycountync.com/departments/health-department.

The report includes demographic, morbidity, and mortality data for Montgomery County and the state of North Carolina. The last section in the report discusses three emerging issues in the field of public health including racial and health equity, dangers of e-cigarettes, and gun violence.

Mission

The mission of the Montgomery County Health Department is to provide high-quality public health services to individuals and families in Montgomery County.

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Montgomery County At-A-Glance



2012-2016 High School Graduation Rate

Montgomery County: 76.4%
North Carolina: 86.3%

College Graduation, age 25+ with a Bachelor's Degree or higher

Montgomery County: 14.5%
North Carolina: 29.0%

Source: US Census Bureau

	Indicator	Montgomery County	North Carolina
Demographics*, 2016 Estimates	Population	27,418	10,146,788
	Youth under 18 years	22.8%	22.7%
	Persons 65 years and over	19.4%	15.5%
	Median Age**	41	38.3

*Source: *US Census Bureau **AccessNC



2012-2016 Median Household Income

Montgomery County: \$34,819
North Carolina: \$48,256

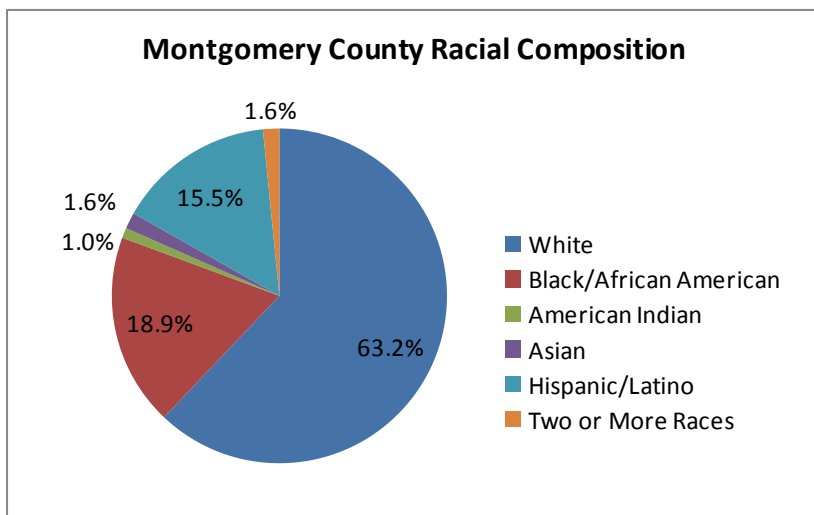
Per Capita Income

Montgomery County: \$20,007
North Carolina: \$26,779

Persons in Poverty

Montgomery County: 21.4%
North Carolina: 15.4%

Source: US Census Bureau



Source: US Census Bureau



Unemployment Rate October 2017

Montgomery County: 4.3%
North Carolina: 4.1%

Unemployment Rate October 2016

Montgomery County: 5.3%
North Carolina: 5.1%

Source: US Bureau of Labor Statistics



Uninsured Adults (18-64 years) without Health Insurance

21.5%

Uninsured Children (under 19 years) without Health Insurance

6.1%

Medicaid & CHIP Enrollees

31.4%

Source: North Carolina Institute of Medicine

Priority Issue: Substance Abuse

Objective Identified in 2016 Community Health Assessment: Reduce the number of youth and adult individuals abusing opioids and illicit drugs.

Current Status of Objective: As reported in the 2016 CHA, there were 38 reported unintentional medication/drug overdoses, 11 reported underage alcohol uses, 3 heroin overdoses, 4 heroin related ED visits, 80 medication/drug overdoses, and 7 opioid overdoses in Montgomery County in 2016 according to NC Detect. These numbers have slightly decreased in 2017.



Naloxone kits distributed at the summit

The NC Detect data on substance abuse shows a decrease in every category from 2016 to 2017. While this is a positive sign, it should be taken with caution. These numbers only include the individuals seen in an emergency department, not anyone who was treated with Naloxone without visiting the ED or those who did not make it to the emergency department. Due to drug usage being illegal, many are hesitant to seek help. These barriers make it challenging to know the true severity of the issue and can likely lead to underreporting.

	Unintentional Medication/Drug Overdose	Underage Alcohol Use	Heroin Overdose	Heroin Related ED Visits	Medication/Drug Overdose	Opioid Overdose
2017	34	4	1	1	67	3
2016	38	11	3	4	80	7

Montgomery County saw an opioid prescribing rate of 65.3 per 100 residents in 2016 and a total of 2,504,453 opioid pills were prescribed in 2016 (NC DHHS Injury and Violence Prevention Branch). The nation, the state of North Carolina, and local counties are seeing an increasing problem with opioids. Many of the counties neighboring Montgomery County are experiencing increases in drug usage and overdoses. In October 2017, the opioid epidemic was declared a public health emergency by the federal government. Currently, there is not a clear solution on how to fix the issue but there is a lot of work being done to address the prevention and reduction of opioid abuse.

Progress Made



Montgomery County Summit on Drug Abuse & Overdose: In May 2017, the Health Department and Sheriff's Office hosted the Montgomery County Substance Abuse and Opioid Overdose Prevention Summit. The purpose of this summit was to educate law enforcement personnel and first responders about opioid uses and overdoses. Robert Childs, the executive director of NC Harm Reduction Coalition, gave a presentation about the severity of the opioid crisis. It provided a training demonstration on how to effectively use Naloxone, the drug used to reverse the effects of an opioid overdose. There were 31 law enforcement personnel and first responders who participated in the event. At the event, a total of 50 Naloxone kits were supplied to town police chiefs in Montgomery County to be placed in all police vehicles.

Montgomery County Drug Overdose Prevention Task Force: The first Task Force meeting was held in December 2016 and has generally been meeting on a quarterly basis. This group is facilitated by the health department and involves community partners from areas of law enforcement, social services, pharmacists, school nurses, county commissioners, mental health professionals, and staff from the FirstHealth Montgomery Hospital. The Task Force shares county specific overdose data generated from NC Detect and they develop ways to increase community education and awareness of the issue. Currently, a Mental Health and Substance Abuse Resource booklet is being developed. For more information or to get involved in the task force, contact Kimberly Burger at Kimberly.burger@montgomerycountync.com.

Medication Drop Box: The Montgomery County Sheriff's Office has had a drug drop box on-site since 2015. Every year, approximately 70 pounds of assorted medications are dropped off to the sheriff's office to be discarded through the US Drug Enforcement Agency and the NC State Bureau of Investigation.

New Initiatives

Strengthening Families Program: For Parents and Youth 10-14: NC Cooperative Extension is facilitating this program in partnership with the Montgomery County Health Department and FirstHealth of the Carolinas. The program is designed to strengthen families by improving parent-child communications and helping youth identify life goals and develop skills to prevent substance abuse and other behavior issues. The program begins January 2018. For more information, please contact Chrissy Haynes at (910) 576-6011.

Priority Issue: Obesity/Diabetes Prevention & Control

Objective Identified in the 2016 Community Health Assessment: Reduce the adult overweight and obesity rate by 3% and the childhood overweight and obesity rate by 5%. Decrease the percentage of adults with diabetes by 2%.

Current Status of Objective:

2016 Adult Overweight/Obesity: 73.0% (BRFSS Survey– Region 6)

2017 Childhood Overweight/Obesity: 50% (FirstHealth Montgomery School Based Health Centers)

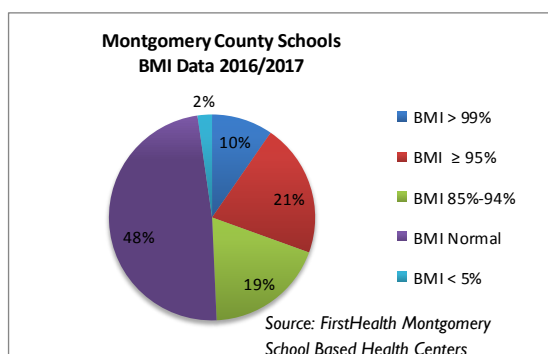
2013 Diagnosed Diabetes Percentage: 12.5% (Centers for Disease Control and Prevention)

2016 BRFSS Survey Results	
Adults who have a Body Mass Index Greater than 25.0 (Overweight or Obese)	Region 6*
Total	73.0%
Gender	
Male	78.1%
Female	67.7%
Race	
Non-Hispanic White	75.1%
Non-Hispanic Black	76.3%
Other	**
Age	
18-44	68.6%
45-64	80.7%
65+	71.5%

*Region 6 includes Anson, Cumberland, Harnett, Hoke, Lee, Montgomery, Moore, Richmond, Scotland Counties.

**Data was too small to be statistically reliable

The 2016 BRFSS Survey shows that 73.0% of respondents in Region 6 were overweight or obese. This was a slight increase from 72.4% in the 2015 BRFSS survey. Previous SOTCH & CHA reports used the “Piedmont” region for the BRFSS Survey, but BRFSS recently added the NC Local Health Director Regions which included less counties. Using Region 6 data will hopefully create a more accurate representation of the issue in Montgomery County. The CDC has not released an updated diagnosed diabetes percentage since the 12.5% reported in the 2016 CHA.



Progress Made

The Daily Mile

Walking trails were constructed at 5 elementary schools. Approximately 1,513 elementary school students participated in The Daily Mile, for a total of 138,098 miles in 2017.

FirstReach Pre-Diabetes Program

FirstHealth in Montgomery County conducted 353 blood sugar screenings in 2017. Ten participants were enrolled in the program, which focuses on calorie and fat reduction and increasing physical activity.

Go Glow Grow

This program by NC Cooperative Extension was offered at Family Worship Ministries during the summer and pre-k classes in the fall. It includes a lesson on physical activity or nutrition. 161 individuals participated in 2017.

In addition to these three initiatives, FirstHealth of the Carolinas, NC Cooperative Extension, the Health Department, and other agencies on the FirstHealth 2020 Vision Task Force have continued to implement and promote additional programs that work towards reducing and preventing obesity and diabetes in both children and adults. These other programs and initiatives include:

- The Happy Kitchen and PLAY
- Try Healthy
- Speedway to Healthy Nutrition Program
- FirstHealth Diabetes and Nutrition Education Program
- Dirty Hands, Healthy Hearts
- Troy Farmers Market

New Initiatives

MARCHES is a free family-wellness program starting in Montgomery County in February 2018. FirstHealth of the Carolinas is leading the program in collaboration with multiple partners from the FirstHealth 2020 Vision Task Force. This program involves fun physical activity and nutrition education sessions to improve the health of youth and their families. For more information, contact Isa Granados at 910-715-1509 .

Healthy Vending is an initiative that FirstHealth and the Health Department will be working on in Spring 2018. The goal is to get 50% healthy vending options in county government buildings.



Priority Issue: Teen Pregnancy Prevention

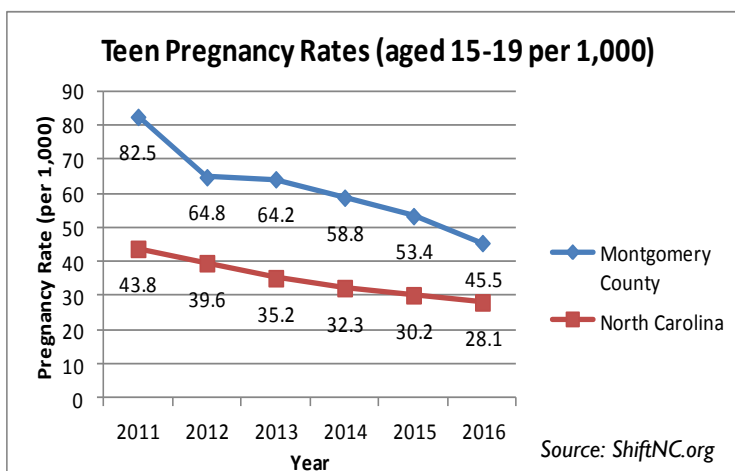
Objective Identified in the 2016 Community Health Assessment: The Montgomery County teen pregnancy rate will be reduced by 10% by the year 2020.

Current Status of Objective: The Montgomery County teen pregnancy rate for 2016 is 45.5 and the county is now ranked as the 10th highest county in the state for teen pregnancies.

For the ninth consecutive year, North Carolina's teen pregnancy rate hit a record low in 2016. The state's teen pregnancy rate fell 7%, for a rate of 28.1 per 1,000 15-19 year old girls in 2016. Following the downward trend of the state, Montgomery County also saw a decline in the teen pregnancy rate. The 2016 rate is 45.5, which dropped 14.8% since 2015. Montgomery County is now ranked 10th highest in the state for teen pregnancies, which dropped from the 5th highest in 2015 and 2nd highest in 2011.

There were 39 teen pregnancies in 2016, 23.1% of these were repeat pregnancies. Of the 39 pregnancies, 9 were among 15-17 year olds and 30 were among 18-19 year olds. Teen pregnancy rates by race/ethnicity could not be determined due to statistically unreliable small numbers. Through the teen pregnancy prevention education in schools and increased access to long acting reversible contraceptives, Montgomery County will hopefully continue seeing a decline in teen pregnancy rates.

Source: ShiftNC.org



Progress Made

The Montgomery County Teen Pregnancy Prevention Task Force, led by the Montgomery County Schools, continues to meet regularly and involves a number of community partners working together to address teen pregnancy prevention and reduction strategies. For those teens that do become pregnant, support is provided through school social workers, nurses, and guidance counselors. There are currently teen pregnancy prevention initiatives being implemented in elementary, middle, and high schools to reach the full spectrum of youth.

Title V Abstinence Program is being taught to 5th graders in the county. This program teaches abstinence not only from sexual relations, but also bullying, drugs, and alcohol. During the 2016/2017 school year, 250 students participated in the A+ program and 20 parents participated in an online lesson related to these topics. In fall 2017, 100 students from Star and Candor Elementary Schools were served through this program and 26 parents were served in the online lesson. There are 210 students currently enrolled in the program for spring 2018 at Mt. Gilead, Green Ridge, and Page Street Elementary Schools.

Draw the Line/Respect the Line is on the fourth year of implementation. Previously, this class had been taught as an optional after-school program. The 2017/2018 school year is the first year implementing the program into the school day during class time. Currently, 147 students in 6th-8th grade have participated in the program and 72 students in 8th grade participated in the afterschool program. In spring 2018, health and PE teachers will be trained on the program to incorporate it into the curriculum in future years.

Making Proud Choices is still being implemented in both high schools. In the 2016/2017 school year, there were a combined 330 students at East and West High Schools participating in this program. The beginning of the 2017/2018 school year had 316 students enrolled.

Family Planning/STD Outreaches are completed annually in both high schools by staff at the Montgomery County Health Department to educate students about preventing STDs and teen pregnancies.



Morbidity

2010-2014 Cancer Incidence Rates Per 100,000 Population	North Carolina	Montgomery County
Colon/Rectum	37.7	47.3
Lungs/Bronchus	70.0	74.5
Female Breast	158.4	138.5
Prostate	125.0	156.6
All Cancers	480.4	489.7

Montgomery County Cancer Projections, 2017	Projected New Cases	Projected Deaths
Total	186	68
Lung/Bronchus	29	20
Female Breast	32	5
Prostate	24	5
Colon/Rectum	15	5

The data released by the North Carolina Central Cancer Registry shows the cancer incidence rates are higher in Montgomery County than the state of North Carolina for three out of the four cancers listed. Female breast cancer is the only cancer that has a lower incidence rate in Montgomery County than the state. Montgomery County also has a higher cancer incidence rate for all cancers than the state.

Source: North Carolina Central Cancer Registry

Mortality

Leading Causes of Death for All Ages, 2012-2016

	Cause of Death in Montgomery County	Number of Deaths	Death Rate Per
1	Cancer-All Sites	298	216.9
2	Diseases of the heart	287	208.9
3	Chronic lower respiratory diseases	103	75.0
4	Alzheimer's Disease	79	57.5
5	Cerebrovascular Disease	72	52.4
6	Diabetes Mellitus	55	40.0
7	Other Unintentional Injuries	40	29.1
8	Pneumonia & Influenza	38	27.7
9	Kidney Disease	27	19.7
10	Septicemia	23	16.7
	Chronic liver disease & cirrhosis	23	16.7
	Total Deaths- All Causes	1,414	1,029.3

In 2012-2016 there were 15 infant deaths in Montgomery County, which was 3 less than in 2011-2015. Hispanics and "Other" races saw no infant deaths in 2012-2016. There was one less infant death in 2012-2016 than in 2011-2015 in African Americans but there were two more deaths in Whites.

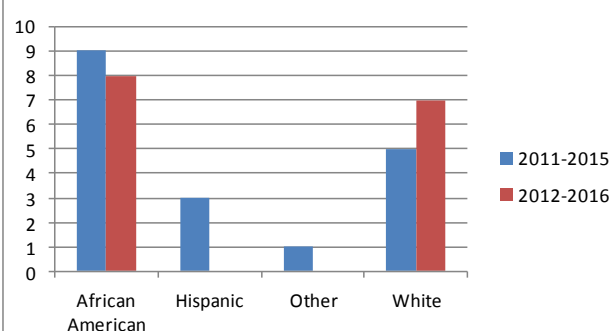
Montgomery County Health Department is part of a regional collaborative working to address infant mortality after receiving funding through a Maternal and Child Health grant. The Improving Community Outcomes for Maternal and Child Health grant focuses on improving birth outcomes, reducing infant mortality, and improving the health of children ages birth to five. The evidence-based strategies currently being implemented include long acting reversible contraceptives (LARCs), Ten Steps for Successful Breastfeeding, and Clinical Efforts to Address Secondhand Smoke Exposure (CEASE). This grant will provide funding for these programs through May 2020. The health department also provides Baby's Easy Safe Sleep trainings to help parents reduce the risk of SIDS and promote safe sleep practices.

The 2016 unadjusted death rate per 100,000 in Montgomery County was 1,068.6 which is up from 1,003.8 in 2015. The unadjusted child death rate per 100,000 in Montgomery County was 56.4 between 2012-2016. This is slightly lower than the state rate of 58.1.

There was a change in the leading causes of death between the 2011-2015 data (shown in the 2016 CHA) and this 2012-2016 data. Previously, motor vehicle injuries were the ninth leading cause of death in the county and the most recent data shows this is no longer in the top 10 list. Kidney disease moved up from the 10th spot to the 9th spot. Septicemia and chronic liver disease & cirrhosis are both in the 10th spot, with 23 deaths for each and a rate of 16.7 per 100,000. The first five leading causes of death had numbers and rates slightly increase between the two data sets, diabetes mellitus data stayed the same, and other unintentional injuries and pneumonia & influenza slightly decreased in numbers and rates.

Overall, the total number of deaths in the county in 2011-2015 was 1,406 with a rate of 1,018.8 and the total number of deaths in 2012-2016 was 1,414 with a rate of 1,029.3.

Infant Deaths in Montgomery County by Race



All data on page came from NC State Center for Health Statistics

Emerging Issues

Racial & Health Equity: Public health organizations are increasingly putting an emphasis on working towards achieving health equity. According to the Robert Wood Johnson Foundation, “health equity means that everyone has a fair and just opportunity to be healthier”. People experience different barriers to accessing healthy opportunities, such as unsafe housing and living environments, lack of quality education and fair paying jobs, and limited access to health care. Health equity work revolves around removing these barriers and increasing opportunities for individuals to become healthier, especially those who face the most challenges. Health disparities first have to be identified and then changes in laws, policies, and systems can be implemented to reduce the inequities. Tied in with health equity is the topic of racial equity. Currently in our society, many racial and ethnic minority groups experience worse health outcomes due to limited access to resources and opportunities and experiencing system– level discrimination that has been around for generations. To learn more about these topics, the Racial Equity Institute provides racial equity workshops and online resources. Learn more about REI at www.racialequityinstitute.org.

Dangers of E-cigarettes: In 2016, more than 2 million middle and high school students in the United States used e-cigarettes in the last 30 days, including 4.3% of middle schoolers and 11.3% of high schoolers (Centers for Disease Control and Prevention). This is alarming because e-cigarettes are not safe for youth, as well as young adults, pregnant women, and adults who are not currently using tobacco products. E-cigarettes are continuing to gain popularity throughout the nation and the products are constantly evolving. There are many mixed messages in the media regarding the safety and usage of e-cigarettes due to limited studies and data on these products. A common misconception is that e-cigarettes can be used to help someone quit smoking cigarettes. Currently, e-cigarettes are **not** recommended by the Food and Drug Administration (FDA) as an aid to quit smoking. Another misconception is that they are harmless because they are nicotine-free. This is also inaccurate because most e-cigarettes actually do contain nicotine (even if it says it is nicotine-free) and many other cancer-causing chemicals and particles. However, e-cigarettes generally do contain less harmful chemicals than cigarettes (CDC). Nicotine is an addictive substance which is why it is important to prevent youth from beginning to smoke e-cigarettes and educate them on the harmful effects of nicotine. The long term effects of e-cigarettes are still being researched.

Gun Violence: Gun violence has been receiving a lot of attention over the past years due to numerous deadly mass shootings that have occurred around the country. Approximately 30,000 people are killed by guns each year, with another 60,000 people being injured by guns (American Public Health Association). Generally, young adults, males, and racial/ethnic minorities are disproportionately affected by gun violence. According to the recently published North Carolina Violent Death Reporting System 2015 Annual Report there were 1,247 firearm related deaths in 2015 in NC (NC DHHS). These deaths account for 60.5% of all violent deaths in North Carolina in 2015. In 2014, there were 1,146 firearm-related deaths, accounting for 59.3% of all violent deaths. In 2013, there were 1,202 firearm-related deaths in NC, accounting for 62.8% of all violent deaths in NC. While suicide was the highest cause of firearm death, homicide was second. The American Public Health Association indicates that gun violence is a major public health issue and can be preventable through better surveillance, more research, better gun policies including background checks, increased access to mental health services, better resources for schools and communities, and gun safety technology.

Dissemination Plan

Copies of this report will be disseminated to community partners, including the FirstHealth 2020 Vision Task Force, the Montgomery County Board of County Commissioners, and other key stakeholders. The report will be available to the general public through the Montgomery County public libraries and on the Montgomery County Health Department website www.montgomerycountync.com/departments/health-department. The local newspapers will receive a press release regarding this report. Lastly, free copies will be available upon request by contacting Rhiannon Bardel at the Montgomery County Health Department by emailing rhiannon.bardel@montgomerycountync.com.

If you have any questions regarding the information in this report, please see the contact information throughout the document or call the Health Education staff at the Montgomery County Health Department 910-572-1393.

