Caldwell County
2018
State of the County Health Report

**Photo by: Mark Jackson, Caldwell Journal

Caldwell County North Carolina
HEALTH DEPARTMENT
The Caldwell County Health Department is pleased to present the 2018 State of the County Health Report. This document provides updated information on key indicators for Caldwell County for the purpose of comparing local and state health data about our community’s health and well-being.

This report includes information on the progress made over the past three years as well as information on the identified priority areas for the 2017 Community Health Assessment: Preventative Care, Mental Health and Substance Abuse.

This information is designed to educate and update community members, community leaders, agencies, organizations and others on progress in addressing certain health issues. This update is also intended to influence the development of new policies that affect the health of the community, guide the planning of health programs, and recruit interested community members to participate in future activities.

The Caldwell County Health Department seeks to “promote, protect and improve the health of our community” by focusing on long-term health priorities identified in the 2018 Community Health Assessment.

If you would like more information on the services and programs offered by the Caldwell County Health Department or would like to be involved in community health programming, please contact the Health Education and Health Promotion Department at 828-426-8506. For additional information on Caldwell County, please visit the county’s website at www.caldwellcountync.org.

Sincerely,

Anna Martin, MPH

Anna Martin, MPH
Interim Health Director

Caldwell County Health Department
The 2017 Community Health Assessment (CHA) process, started in 2016, engaged key partners to be a part of the process as we identified priorities for the upcoming three years. The committee looked over primary and secondary data, as a community, deciding the top three priorities for the CHA. The top three priorities chosen were Preventative Care, Substance Abuse, and Mental Health.

In each column in this chart, the colors represent how many people in each focus group thought this issue had the greatest impact on the health of the county. For example, more teens ranked substance abuse as a major impact, whereas fewer teens ranked preventative care.

The chart to the left shows the top unhealthy behaviors in Caldwell County, based on the 2017 CHA Opinion Survey. Among the top ranked unhealthy behaviors were Drug Abuse, Alcohol Abuse, Smoking/Tobacco Use, Poor Eating Habits, and Lack of Exercise.
Intervention: Flu-FIT and Flu-FOBT

Flu-FIT and Flu-FOBT Program allows health care providers to increase access to colorectal cancer screening by offering home tests to patients, ages 50-75, at the time of their annual flu vaccination. In the past, Caldwell County Health Department (CCHD) has partnered with the West Caldwell Health Council (WCHC) on this initiative to offer colorectal screening kits at the same time flu shots are administered. Currently, this is the goal for the 2019/2020 flu season. The action plan in place includes offering colorectal screening kits to patients during any flu clinics that are held. In the interim, CCHD has partnered with WCHC to offer kits to any patient upon request during their appointment at the Health Department.

Intervention: Active Routes to School (ARTS)

Caldwell County received an Active Routes to School Grant for funding from October 2018-May 2019 and with this was able to hire an Active Routes to School Coordinator, who oversees 12 counties in the western region of the state, one of those being Caldwell. Charlotte Eidson was hired as the ARTS coordinator, and since October, has built partnerships with area schools, ordered helmets for distribution to students, and provided assistance to the Caldwell County Safe Kids Coalition. She is in the process of planning and organizing a bike rodeo event for Spring 2019 and also organizing several bike safety educational classes for students and their parents to gain awareness of injury prevention.

Intervention: Diabetes Prevention Program (DPP)

Part of the Preventative Care action plan includes holding at least one Diabetes Prevention Program during the three year CHA cycle. DPP provides a framework for diabetes prevention efforts. It brings together partners from the public and private sectors to prevent or delay type 2 diabetes in the United States. Participating in a CDC-recognized lifestyle change program can cut your risk of type 2 diabetes in half. A key part of the DPP is the lifestyle change program to prevent or delay type 2 diabetes. Hundreds of lifestyle change programs nationwide teach participants to make lasting lifestyle changes, like eating healthier, adding physical
Substance Abuse
Progress to Date

Intervention: Project Lazarus/Drug-Free Caldwell

Project Lazarus, a public health non-profit organization, started in response to extremely high drug overdose death rates. Caldwell County conducts monthly meetings to discuss ways to bring substance misuse awareness to the community. During 2018, Caldwell County Project Lazarus changed their name to Drug Free Caldwell in order to draw more awareness to its mission. Throughout 2018, the coalition completed multiple events. One event was a collaboration with Caldwell County Safe Kids at the Hickory Crawdads Stadium, in conjunction with an area wide poster contest related to substance abuse that was held for students. The event topic was substance misuse within the community and ways to prevent overdose. Safe Kids had a booth educating youth on over-the-counter medication, which reached over 200 people from the community. The Project Lazarus/Drug-Free Caldwell Coalition also attended several health fairs and festivals throughout the year, including the Child Health and Safety Fair, the Sawmills Fall Festival, and Downtown Lenoir’s National Night Out Event.

Intervention: RHA-Matrix Model

This intensive outpatient program for substance use treatment consists of a 12-week program requiring 3 three-hour sessions per week for ten participants. RHA (a substance abuse treatment provider), partnering with ARP (Addiction, Recovery, and Prevention), has been providing this ongoing program for our community. During these sessions, participants work through an evidence-based treatment protocol known as the Matrix Model. The goal of intensive treatment and of the Matrix Model is to decrease the number of individuals whose use of substances is causing significant problems in their lives. In 2017, RHA served 116 individuals in the intensive outpatient program.
**Intervention: Lock Your Meds Campaign**

Lock Your Meds is a national multi-media campaign designed to reduce prescription drug abuse by making adults aware that they are the “unwitting suppliers” of prescription medications being used in unintended ways, especially by young people. The campaign includes a wide array of high-quality advertisements, posters, educational materials, publicity opportunities. CCHD has implemented the Lock Your Meds Campaign as a part of the Drug Free Caldwell/Project Lazarus Coalition and also partnered with RHA to distribute medication lock boxes and to do community educational sessions. Over 100 lockboxes have been distributed to families in need of one. In addition, medication safety education has been given at the Caldwell Senior Center, Lenoir Housing Authority, and Caldwell Opportunities.

**Mental Health Progress to Date**

**Intervention: Mental Health First Aid**

Mental Health First Aid is an 8-hour course that teaches how to help someone who is developing a mental health problem or experiencing a mental health crisis. The training helps those who attend to identify, understand, and respond to signs of mental illnesses and substance use disorders. Mental Health First Aid (MHFA) Training is provided by Vaya Health. They have provided several Mental Health First Aid Trainings in the past, and also offered youth mental health first aid at area high schools. They held a training in June 2018 with representation from over 20 area agencies. Mental Health First Aid is intended for all people and organizations that make up the fabric of a community. The course is presented to chambers of commerce, professional associations, hospitals, nursing homes, rotary clubs, parent organizations, social clubs, and other groups. Professionals who regularly interact with a lot of people (such as police officers, human resource directors, and primary care workers), school and college leadership, faith communities, friends and family of individuals with mental illness or addiction, or anyone interested in learning more about mental illness and addiction are ideal candidates for this training.
**Intervention: Community-based Behavioral Healthcare Collaboration**

CCHD has partnered with area agencies such as UNC Caldwell in efforts to aid mental health efforts. Members of CCHD and UNC Healthcare both serve on the Community Healthcare Action Research Team (CHART). CHART was formed to create new collaborations that engage patients, community members, healthcare professionals and researchers focused on our Carolina foothills community health priorities. The goal of this team is to address the healthcare challenges in our community with educational programs, by conducting research which offers improvement to our health, and acting to bring about better healthcare outcomes.

CHART’s mission is to identify and prioritize health issues of critical importance to the Caldwell community. This includes working to identify solutions, research and educational programs to resolve or improve conditions concerning the health of our community. CHART will be holding Mental Health Summit on Friday, February 22nd at the J.E. Broyhill Civic Center. This summit includes a luncheon keynote session given by Kody Kinsley, Deputy Secretary for Behavioral Health. Education sessions included topics geared towards clinicians, in addition to a community round table discussion.

**Emerging Issues**

**Chronic Disease**

One area of concern for Caldwell County is Chronic Disease. Chronic Diseases account for over half of the top ten leading causes of death in Caldwell County including heart disease, cancer, respiratory disease, diabetes, etc. Over the past three years, this committee has worked to establish resources in the county to combat these issues. Chronic disease management programs have been successful in the community. However, in this CHA cycle the advisory committee will include Chronic Disease prevention in the preventative care action plan instead of choosing to focus solely on chronic disease management. This group believes that prevention of these diseases is the best way to decrease death rates in the future. Focusing on prevention at an early age or before the onset of a disease, will in turn, decrease the impact the disease has on quality of life.
Suicide

Another area of concern is the suicide rate in Caldwell County. The suicide rate in Caldwell County has been gradually increasing. Suicide can be caused by many factors such as lack of community mental health resources, substance abuse/misuse, economy, etc. As shown in the graph below, the rate from 2001-2005 was 12.9, from 2006-2010 it was 15.8, then increased to 19.8 from 2011-2015. In Graph 18, trend data shows the dramatic increase since 2002. Between 2012-2016, there have been 87 suicide deaths in Caldwell County. Suicide was one of the top 10 causes of death in 2011. In the 2014 CHA process, suicide was part of the mental health action plan. Training in mental health first aid and suicide prevention was conducted during the 2014 CHA Action Planning period and will continue during the action planning process for the 2017 CHA process.

![Suicide Graph]

Source State Center for Health Statistics

New Initiatives- Infant Mortality Reduction

An Infant Mortality Reduction (IMR) grant was awarded to local health departments in North Carolina to implement evidence-based strategies to decrease infant mortality in the communities they serve. With these grant funds, we were able to purchase and promote long-acting reversible contraceptive (LARC) within the health department. We were also able to promote safe sleep and, within this fiscal year, tobacco cessation. The IMR grant included funds through Maternal Child Health (MCH) to start a Community Action Team (MCH-CAT). The MCH-CAT is comprised of community representatives, stationed to obtain the common goal of preventing infant mortality. The grant not only sustained the formation of this group of individuals, but also provided various items to promote infant safety for those in need. Items were distributed based on a referral process. In addition, during 2017, in partnership with the Family Resource Center, CCHD held a Child Health and Safety Fair. There was a great turnout, with over 200 individuals in attendance. Many community vendors came and education was given to families with young children ages birth-5. The IMR grant began in 2016 and is expected to continue in 2018/2019. Also, as part of this grant, one staff member was able to attend training to become a Certified Tobacco Specialist.
Morbidity and Mortality

Morbidity and Mortality are ongoing concerns for all counties and states. When looking at morbidity and mortality or the incidence of disease, it is important to look at modifiable and non-modifiable behaviors. During the CHA action planning sessions, Caldwell County Health Department and partners will be referring to those behaviors to ensure that Caldwell County citizens are aware of and have access to needed services and education in order to decrease morbidity and mortality. The State Center for Health Statistics compiles the top 10 causes of death each year. Caldwell County’s top ten causes of death (below) show that cancer and heart disease consistently fall at the top of the list. This has been consistent for a number of years. In 2015, there were 18,474 deaths related to heart disease and 19,322 deaths from cancer. Heart Disease and Cancer alone contributed to an average over 559,137 years of potential life lost in the State of North Carolina in 2016. Caldwell County had an average of over 5,587 potential life lost in 2016.

<table>
<thead>
<tr>
<th>Rank</th>
<th>2015</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Diseases of heart</td>
<td>Diseases of heart</td>
</tr>
<tr>
<td>2</td>
<td>Cancer</td>
<td>Cancer</td>
</tr>
<tr>
<td>3</td>
<td>Alzheimer's disease</td>
<td>Chronic lower respiratory diseases</td>
</tr>
<tr>
<td>4</td>
<td>Chronic lower respiratory diseases</td>
<td>Alzheimer's disease</td>
</tr>
<tr>
<td>5</td>
<td>All other unintentional injuries</td>
<td>Cerebrovascular diseases</td>
</tr>
<tr>
<td>6</td>
<td>Cerebrovascular diseases</td>
<td>All other unintentional injuries</td>
</tr>
<tr>
<td>7</td>
<td>Diabetes mellitus</td>
<td>Diabetes mellitus</td>
</tr>
<tr>
<td>8</td>
<td>Influenza and pneumonia</td>
<td>Influenza and pneumonia</td>
</tr>
<tr>
<td>9</td>
<td>Intentional self-harm (suicide)</td>
<td>Nephritis, nephrotic syndrome and nephrosis</td>
</tr>
<tr>
<td>10</td>
<td>Chronic liver disease and cirrhosis</td>
<td>Intentional self-harm (suicide) AND Septicemia</td>
</tr>
</tbody>
</table>

Source: State Center for Health Statistics