



State-of-the-County Health Report:
Davie County, NC
Davie County Health Department
December 6, 2010

Overview

It has been determined that the leading community health issues facing Davie County are:

1. Heart Disease
2. Suicide
3. Obesity/Diabetes
4. Breast Cancer
5. Stroke
6. Aging
7. Poor Eating Habits
8. Lack of Exercise/Sedentary Lifestyles
9. Smoking/Tobacco Use
10. Drug Abuse
11. Unaffordable/Inadequate health Insurance

This report describes the background and progress the Davie County Health Department has made on these priorities. If you have questions or suggestions for addressing these priorities, please call Brandi Patti, BS, Health Educator, at 336-753-6750.

Cancer, Heart Disease and Chronic Lower Respiratory Disease

Cancer and heart disease are the top two causes of death across NC and in Davie County. Over the past 4 years, Chronic Lower Respiratory Disease has climbed to the #3 cause of death in Davie County, replacing stroke! The same cannot be said for NC.

Healthy Carolinians of Davie County (HCDC) has been working to reduce the risk factors

for these diseases starting at the youngest ages. The Healthy Carolinians- Physical Activity and Nutrition Sub-Committee and the Davie County school system is currently **working with Sara Lee Center's Women for Health** with two programs called Girls on the Run and Girls on the Track. This program is for elementary and middle school aged females. This program builds respect, self esteem and character with exercise. At the end of the program, the girls will complete a 5 K race. Healthy Carolinians-Physical Activity and Nutrition Sub-Committee are in the works of finding a program for school aged males in the county.

The Healthy Carolinians-Physical Activity and Nutrition Sub-Committee have also helped conduct an Eat Smart Move More Weigh Less class for men and women in the county and plan to continue this program twice a year. Two individuals from the Physical Activity and Nutrition Team are attending training in December 2010 to learn about a new program called Faithful Families Eating Smart and Moving More. This program will begin in 2011 in Davie County.

The Health Educator at the Davie County Health Department has been working with Storehouse for Jesus once a month to educate individuals on heart disease, blood pressure and sodium intake. The individuals get a one-on-one education with material to review at home.

Nationally, minorities can expect to die more often from these leading causes of death. In Davie County, a similar trend is seen with two of these top 3 diseases and among a few others. Some causes of death, such as AIDS and homicide have had a higher percentage of deaths. They are such rare events; however, it makes the graph an unrealistic representation of life. Therefore, they are not shown here. As a result of this local picture, Cancer Services and the Healthy Carolinians Chronic Disease Sub-Committee are working with African American barber shops with a program called Brothers Against Prostate Cancer Awareness to encourage other men to get their prostate examined. The project features a baseball cap with an ethnic "B.A.P." logo, and the dissemination of educational materials on the prostate, healthy eating, and cancer amongst African Americans. Barbers are trained at 'Lunch & Learn' sessions in counties with high rates of prostate cancer/issues for Black men.

The barber in Davie County will discuss prostate risks with his patrons and give away a free cap and set of materials if the men agree to wear the cap and read the information. Participants are tracked via a simple data sheet that remains at the barber shop until **Black Men's Health Initiative** is called to re-supply the barber.

Suicide

In the 2007 Community Health Assessment (CHA), suicide was mentioned as an alarming new trend. State-provided data was not recent enough to support the general feeling of the community. Regardless, community leaders and concerned citizens decided to act on their gut feeling until the data caught up. That finally has happened.

The adjusted death rate or number of deaths per 100,000 deaths, across Davie County shot up to 20.7 deaths per 100,000 deaths during 2003-2007 while across the state the rate dipped slightly to 11.7 per 100,000 deaths. During 2003-2007, suicide was the 3rd most common cause of death in 20-39 year olds in Davie. In 40-64 year olds, suicide moved up from the 4th to 3rd leading cause of death in Davie. Across the state, however, suicide remains the 9th leading cause of death for this same age group. At one point last year, there was one call every other day to emergency services about suicide ideation, threat, attempt or completion.

The Suicide Prevention Team has met several times this year to discuss this urgent issue among our county residents. The group has considered participating in another **training program so we can have more individuals in the county "trained" to help those in need.**

New Initiates

Nutritional Therapy and Diabetes Self-Management Education

In 2009 the Davie County Health Department (DCHD) secured close to \$275,000 to begin a medical nutritional therapy and diabetes self management education program. This program has helped 65 people in Davie County with diabetes to regulate their blood sugar better through proper diet and physical activity, and maintain those regular check-ups to reduce the damaging effects of diabetes on the extremities and eyes. The goal was to provide an affordable and accessible diabetes education program for residents in Davie County. When the proposal was submitted, there was one diabetes education program in the county. The program was offered once a month, and the up front cost to the patient was \$200.00. The current program has been able to serve pre-diabetics and diabetics without an up-front cost. All patients receive individual and/or group education.

Due to the number of overweight/obese Hispanic children in the county; a class has been created to address the issue. The class will be offered after school on a monthly basis. The classes will be for parents and their children. First the children have to be **referred and then they attend an initial nutrition evaluation.** Next, they are scheduled for monthly classroom trainings. Patients and their families will be seen quarterly.

Planting Gardens

DCHD had previously secured an **Eat Smart Move More NC grant to provide "greenhouses" to childcare centers.** This year the grant was wrapped up at the end of the summer. The centers were able to grow food most of the year. They were able to harvest corn, beans, herbs, peppers, tomatoes, cucumbers, and more. Children who are exposed to a variety of fruits and vegetables at the youngest of ages are more likely to enjoy them as adolescents. Children who garden are more likely to eat a variety of fruits and vegetables. The Horticulture Agent from Davie County Cooperative Extension provided education about nutrition and gardening to the childcare centers to help them be **successful in their "growing."**

Emerging Trends

Mental Health Access

Also mentioned in the 2007 CHA was access to mental health services. The only psychiatric service provider (prescribing medicine) in the county is at Triumph. The psychiatrist is there one and a half days a week and has been at Triumph for 13 months. Contributing to this problem of access, many local health insurance plans cover mental health services but the co-pays are so exorbitant that the services become unaffordable. This unaffordable coverage makes adults and their children ineligible for state funds ear-marked for the uninsured.

In the past the Substance Abuse/ Mental Health/ Sexually Transmitted Disease Committee worked to increase access to mental health services. The Community Collaborative of Davie County contracted with Triumph, LLC to co-locate a mental health provider for students on the campus of Davie High eight hours a week.

Discussion is also underway to expand intense services for children by co-locating a mental health provider at a local pediatrician's office in the county.

Chronic Lower Respiratory Disease

Over the past 15 years, the number of deaths from Chronic Lower Respiratory Diseases has increased from 17 per year to 29 per year. The increase in deaths from Chronic Lower Respiratory Disease has been mostly in white females. Chronic Lower Respiratory Disease includes conditions such as chronic obstructive respiratory disease and emphysema. The Chronic Care Network of Northwest North Carolina works with patients living with these chronic illnesses. The case **manager's** help these patients find the services, equipment and medical care they need to live healthier lives and give them guidance on ways to improve their lung health such as reducing exposure to second hand smoke, mold and mild physical activity.