



2019 State of the County Health Report



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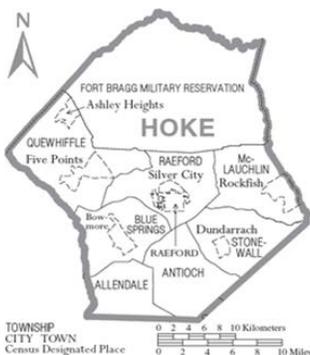
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The State-Of-The-County Health Report (SOTCH) is conducted by the health department and reviews the most recent health statistics, tracks progress made in the last year as it is related to the health priorities, and identifies new initiatives and emerging issues that may impact the health status of Hoke County residents.

This report is a state mandate to be written in the years the county is not conducting a Community Health Assessment (CHA), which was completed in 2018. The report serves as a yearly update of health concerns and the actions taken to address the Community Health Improvement Plans which are submitted six (6) months after the CHA.

A copy of this report is on the Hoke County Website at www.hokecounty.net under the Hoke County Health Department (HCHD) page and in the Hoke County Public Library.



HOKE COUNTY HEALTH DEPARTMENT
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2019 Highlights

Breastfeeding Initiative

Hoke County became the first county in North Carolina to have breastfeeding rooms in every K-12 school. A total of fourteen rooms were created to be used by teachers, staff, and students to express breast milk while they are away from their infant or child. Each room is private and comfortable. Our Hoke County schools are on par with federal guidelines that require space and break time for employees to express breast milk in the workplace.

Doula Services

HCHD has two doulas that are professionally trained in childbirth who are able to provide emotional, physical, and educational support to a mother who is expecting; experiencing labor; and/or has recently given birth. The doulas serve to assist women in having the most safe, memorable, and empowering birthing experience possible. The HCHD Doulas assisted three (3) mothers within the past year with the services related to childbirth.

Rural Syringe Exchange Program

Hoke County is one of forty-seven (47) counties recognized by the North Carolina Department of Health and Human Services as an active and registered NC Syringe Exchange Program with the North Carolina Safe Syringe Initiative. Hoke Syringe Exchange Program (HSEP) partners with TiaHart Community Recovery Center and operates under the health philosophy of harm reduction in providing mobile and fixed site peer-based services.



Hoke County

Hoke County, which lies in the southeastern part of North Carolina, was formed in 1911 from portions of Cumberland and Robeson Counties. It was named in honor of Robert F. Hoke, a Major/General in the Confederate States Army.

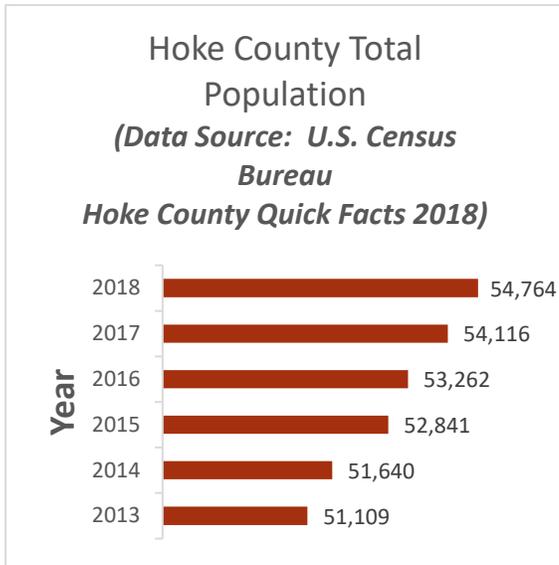


Hoke County spans an area approximately 392 square miles, of which 391 square miles are land and 1.6 miles are covered by water. Hoke County is located in the Sandhills region of the state and is bordered by Cumberland, Moore, Robeson and Scotland Counties.

The county has a golf course, P.K. Airport, a wind tunnel, an ethanol plant, the Carolina Horse Park, Burlington Industries, Butterball, Sunpath, and Unilever. A large part of the county is covered by the Fort Bragg Military Reservation, which continually increases the county's population with military families. The growth is in part due to Base Realignment and Closure (BRAC). Hoke is one of the top five fastest growing counties in North Carolina and is proud of its annual Fall Festival.



Hoke County Demographical Snapshot



Gender	Male	Female
Hoke County	49.4%	50.6%
North Carolina	48.6%	51.4%

Data Source: U. S. Census Bureau Hoke County Quick Facts, 2018

Race	Hoke County
White	49.3%
Black	35.3%
American Indian/ Alaska Native	9.1
Asian	1.5%
Native Hawaiian/ Pacific Islander	0.4%
2 or more races	4.3%
Hispanic or Latino	13.6%

Data Source: U. S. Census Bureau Hoke County Quick Facts 2018

From 2000 to present, Hoke County has seen a major influx of military and migrant workers. The population increased 47.2% during the years 1990-2000 and continues to grow. The percent change from April 1, 2010 to July 1, 2017 is 15.4%. Hoke County has a large number of young people with approximately 27.6% of the population 18 and under. Its senior population (65 and older) currently stands at about 8.9% of the population, which is a 0.5% increase since 2016 compared to 15.5% in North Carolina.

Hoke County has:

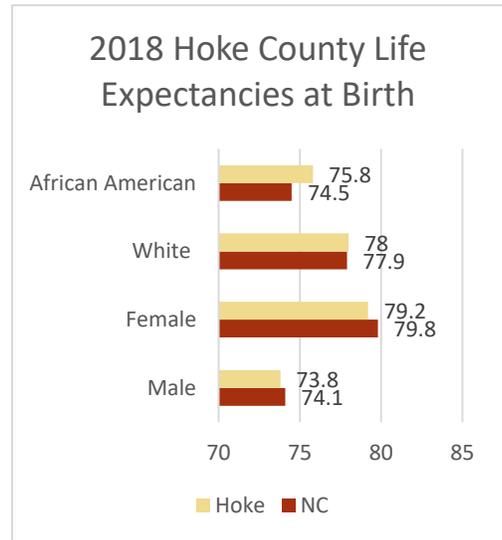
- One (1) OB/GYN practice to care for female health issues including pregnancy;
- One (1) Federally Qualified Health Center (FQHC);
- Two (2) eye clinics;
- Two (2) full service hospitals;
- Eight (8) medical clinics;
- Four (4) dental practices;
- Four (4) private pediatricians; and
- 15 physicians.

The 2018 average per capita income for residents in Hoke County is \$20,656 (2018 inflation-adjusted dollars) with 18.0% of the population living in poverty. This shows a 1.6 % decrease since the 2017 State of the County Health Report (2018 Hoke County Quick Facts - US Census Bureau). In 2017, according to the Kid Count Data Center, 23.2% of children under 18 were below the poverty level. The unemployment rate as of November 2019 is 4.5% which is 1.1% higher than the state rate of 3.4%. (NC Department of Commerce Labor & Economics Division-November 2019 Demand Data Driven Delivery System).

Ten Leading Causes of Death

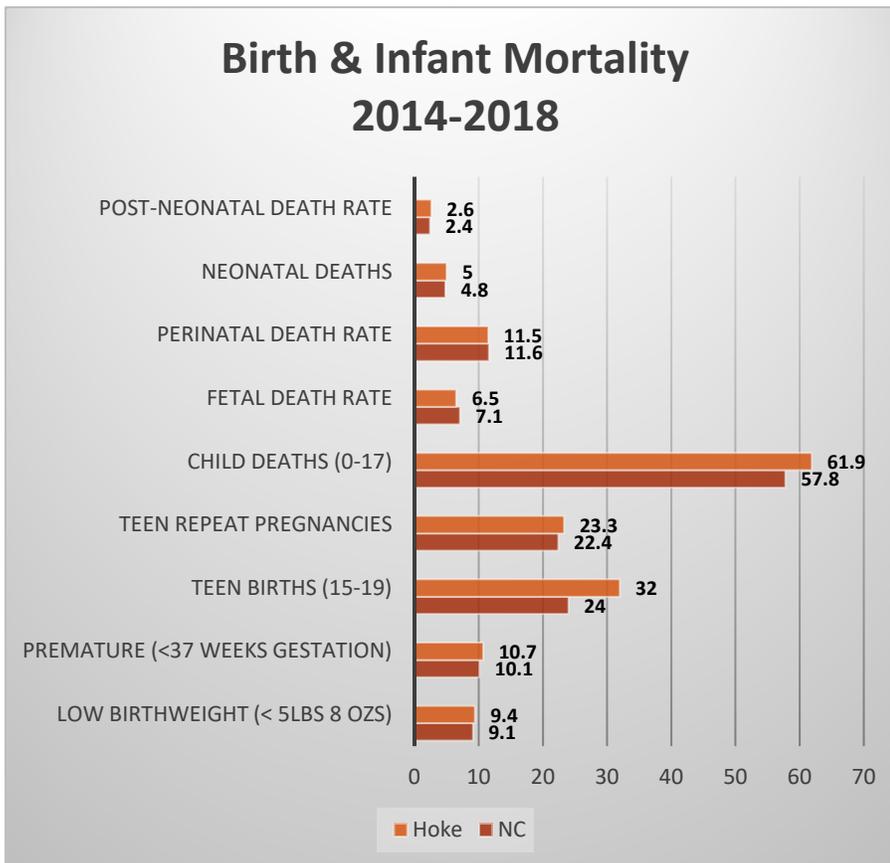
1. Heart Disease
2. Cancer
3. Alzheimer’s Disease
4. Chronic Lower Respiratory Diseases
5. Cerebrovascular Disease
6. Diabetes
7. Unintentional Motor Vehicle Injuries
8. All Other Unintentional Injuries
9. Septicemia
10. Pneumonia and Influenza.

Data Source: NC State Center for Health Statistics 2020 County Data Book-NC Resident Race/Ethnicity and Sex Specific Age Adjusted Death Rates per 100,000 Population



Data Source: NC State Center for Health Statistics, 2020 County Health Data Book/Life Expectancy at Birth for State, 2018 and County, 2016-2019

Birth Highlights



(Data Source: NC State Center for Health Statistics County Health Data Book, 2020; Total Pregnancy Rates for Girls 15-19 and SHIFTNC Data-2018)

- For the period 2014-2018 Hoke County’s live birth rate was 17.1%, compared to North Carolina’s rate of 11.8% (per 1,000 population).
- For this same time period, Hoke County had a pregnancy rate of 87.9, with a total of 5,170 pregnancies for women age 15-44.
- In 2018, Hoke County had a total of 987 pregnancies and a total of 846 live births; 377 White, 214 Black, 171 Hispanic and Other (Non-Hispanic) 84.
- In Hoke County, there were 7 births to mothers under age 18 and 738 live births to mothers aged 18-34.
- In 2018, 8 infant deaths (under 1 year) were reported in Hoke County, a rate of 9.5% and 6 fetal deaths (in utero development after 20th week) a rate of 10.5% (per 1000 population) compared to NC’s infant death rate (under 1 year) 6.8% and fetal death rate of 6.7% per 1000 population.

Communicable Diseases

The number of **Tuberculosis (TB)** cases reported in 2015 and 2016 were three cases with a rate of 5.7% respectively; zero reported in 2017 and one case reported in 2018 with a rate of 1.8% (*NC Electronic Surveillance System-NCEDSS*.)

HIV Infection showed an increase in the number of newly diagnosed cases among adults and adolescents: 8 cases with a rate of 18.4% reported in 2018 per 100,000 population by year diagnosed compared to 4 cases reported in 2017 with a rate of 9.3%. Hoke County ranks 36 in the State for HIV Infection. Hoke County continues to rank 34 among the 100 counties for AIDS. (*The table below is cited from Data Source: NC Department of Public Health Epidemiology Branch, 2018, HIVSTD Surveillance Report*)

	2016		2017		2018	
Hoke County	# of Cases	Rate	# of Cases	Rate	# of Cases	Rate
Newly Diagnosed Early Syphilis	3	5.7	4	7.4	6	11.0
Newly Diagnosed Primary & Secondary Syphilis	1	1.9	5	9.2	2	3.7
Newly Diagnosed Gonorrhea	151	285.1	158	291.8	151	275.7
Newly Diagnosed Chlamydia	353	666.4	388	716.6	400	730.4
Newly Diagnosed HIV	3	7.2	4	9.3	8	18.4
# of HIV Cases Living as of 12/31/18	192	N/A	199	N/A	185	N/A
Newly Diagnosed AIDS (Stage 3)	3	7.2	3	7.0	2	4.6
# of AIDS Cases Living as of 12/31/18	99	N/A	103	N/A	111	N/A

The 2019 Hoke County Health Ranking Chart illustrates how Hoke County sizes up with the state on the most common health and social concerns.

		North Carolina	Hoke (HO)
Health Outcomes			49 (Rank)
Length of Life			34 (Rank)
Premature death	7,300		7,400
Quality of Life			72 (Rank)
Poor or fair health	18%		21%
Poor physical health days	3.6		4.2
Poor mental health days	3.9		4.3
Low birthweight	9%		9%
Health Factors			92 (Rank)
Health Behaviors			93 (Rank)
Adult smoking	18%		23%
Adult obesity	30%		33%
Food environment index	6.4		6.5
Physical inactivity	24%		25%
Access to exercise opportunities	76%		60%
Excessive drinking	17%		17%
Alcohol-impaired driving deaths	31%		42%
Sexually transmitted infections	647.4		709.2
Teen births	29		39
Clinical Care			97 (Rank)
Uninsured	13%		17%
Primary care physicians	1,420:1		7,520:1
Dentists		1,830:1	13,320:1
Mental health providers		460:1	920:1
Preventable hospital stays		49	79
Diabetic monitoring		89%	83%
Mammography screening		68%	69%
Social & Economic Factors			77 (Rank)
High school graduation		86%	75%
Some college		66%	62%
Unemployment		5.1%	6.5%
Children in poverty		22%	25%
Income inequality		4.8	4.7
Children in single-parent households		36%	36%
Social associations		11.5	6.6
Violent crime		342	107
Injury deaths		68	56
Physical Environment			84 (Rank)
Air pollution - particulate matter		9.1	9.4
Drinking water violations		N/A	No
Severe housing problems		17%	19%
Driving alone to work		81%	86%
Long commute - driving alone		31%	46%

* 90th percentile, i.e., only 10% are better; Note: Blank values reflect unreliable or missing data (As seen on <http://www.countyhealthrankings.org/app/north-carolina/2018/county/snapshots>)

Community Health Improvement Plan

Cancer Short Term 2019-2021

Reduce the overall Cancer death rate.

Decrease the % of adults who currently smoke.

Reduce # of people exposed to secondhand smoke in the workplace.

Increase access and # of women who receive cervical and breast cancer screenings.

Chronic Disease Short Term 2019-2021

Decrease # of obese residents.

Decrease % of adults with diabetes complications.

Increase # of children and adults getting the recommended amount of physical activity.

Increase % of adults who consume fruits and vegetables five or more times a day.

Adolescent Pregnancy Prevention and Sexually Transmitted Disease

Long Term 2019-2029

Decrease teenage pregnancy rate among 13 to 18 year olds in Hoke County.

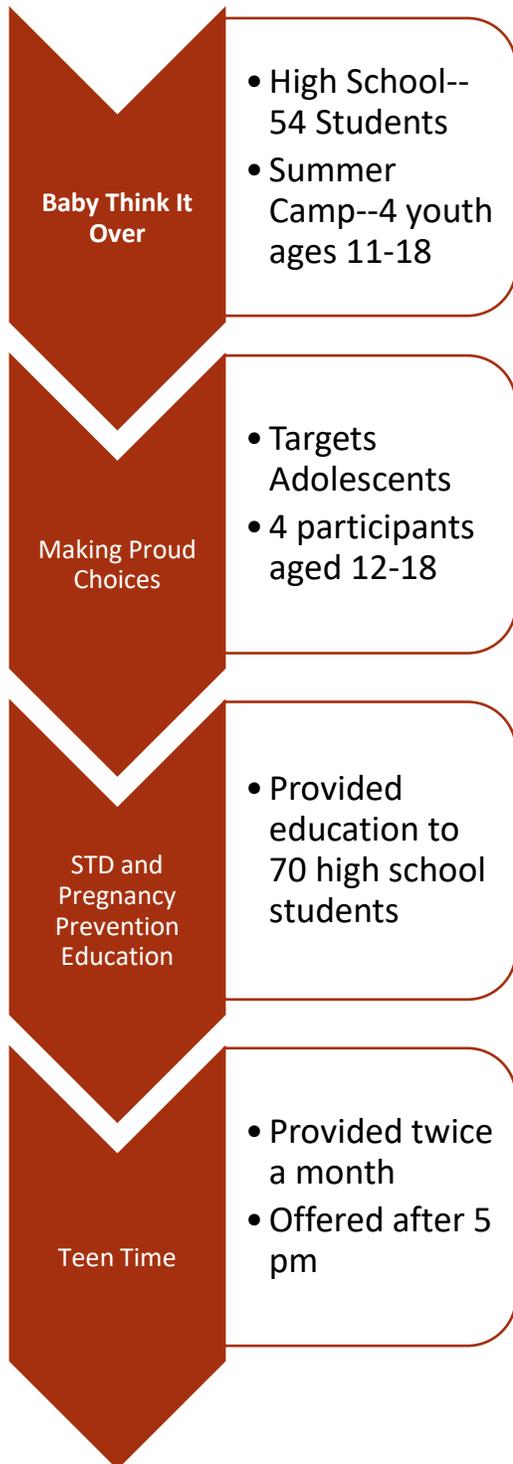
Reduce the rate of new HIV infection diagnosis.



Priority Issue 1

Adolescent Pregnancy Prevention & Sexually Transmitted Diseases

Hoke County's Adolescent Pregnancy Rate for 2019 was significantly higher than North Carolina with a rate of 33.4 Girls age 15-19 years old compared to NC's rate of 24.6. Hoke County ranks 23 in the State for Adolescent Pregnancies which is a 2% change since 2017.



Baby Think It over Program (BTIO)

BTIO aims to reduce the initiation of premature sex, STD/HIV, and most of all, the teen pregnancy rate in Hoke County. Statistically, teen mothers are less likely to complete their education and more likely to be poor and receive public assistance. This year's high school BTIO serviced 54 students. This program consisted of two active discussions on reproductive health and Sexually Transmitted Disease (STD's), followed by care simulation with a baby simulator. HCHD held one summer camp that serviced 4 youth from ages 11-18. HCHD partnered with the Hoke High School and offered the BTIO program to 54 students in the Early Childhood Education Program.



STD and Pregnancy Prevention Education

This past year the HCHD partnered with Turlington High School and Hoke High School to provide STD and Pregnancy Prevention Education to 70 students.

Teen Time Program

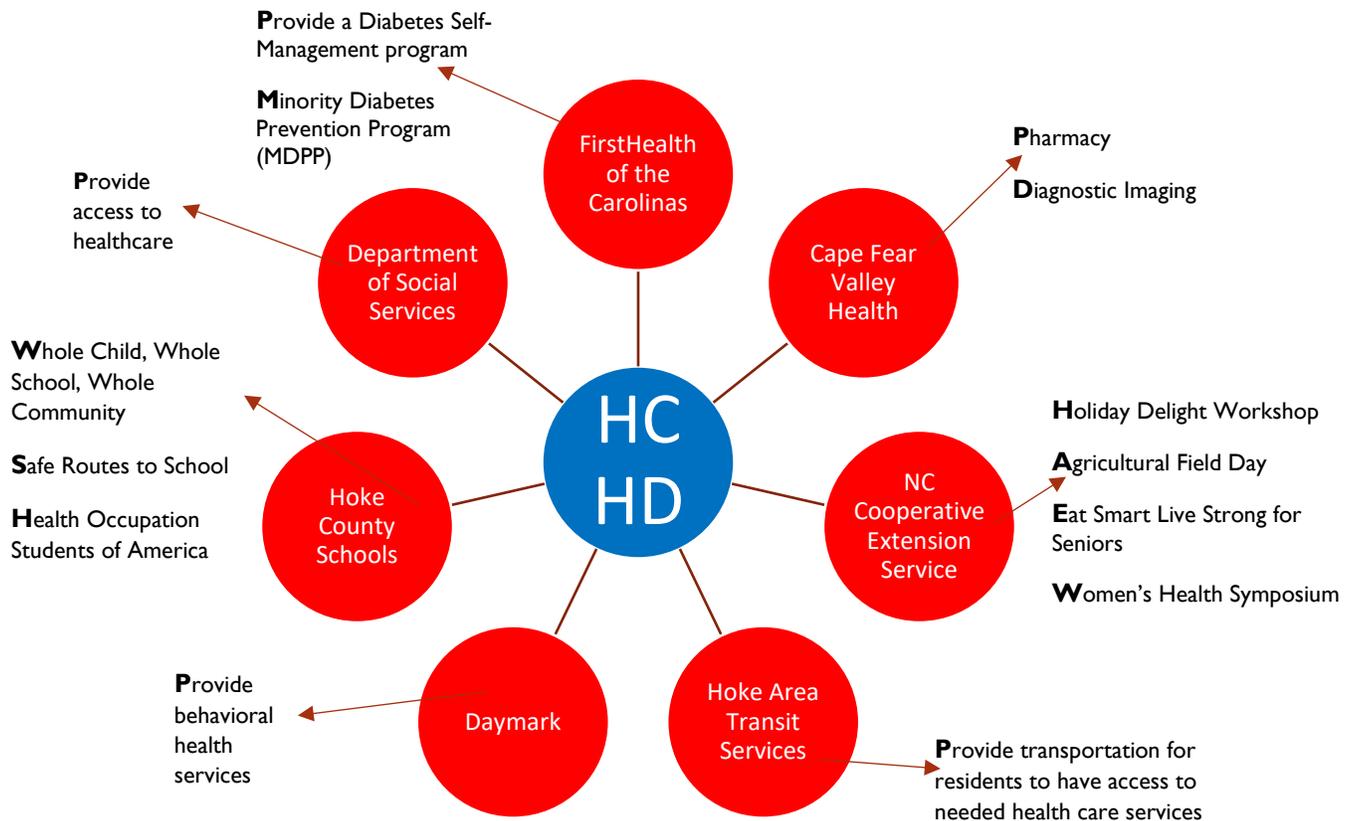
Peer pressure dominates the school day for numerous students and it robs many of a healthy youth. HCHD has seen the need to provide more conducive services that are age appropriate for such vulnerable youth and their peers. The Teen Time Program allows teens time to express themselves to their medical provider and seek the help needed. Teen Time provides a user-friendly venue where healthcare services to patients between the ages of 11-19 years of age are provided and include but not limited to sick visits, immunizations, physicals, nutritional services, self-empowerment classes, family planning/STD prevention.

Making Proud Choices! Program

The Making Proud Choices Program! is an evidenced-based, Safer-Sex Approach to Teen Pregnancy and HIV/STD Prevention. The curriculum provides adolescents with the knowledge, confidence, and skills necessary to reduce the risk of STDs, HIV and pregnancy by abstaining from sex or using condoms if they choose to have sex. The Hoke County held the first Making Proud Choice! program for youth ages 12-18 and was successfully able to educate 4 participants.

Priority Issue 2

Cardiovascular Disease, Diabetes, Physical Activity and Nutrition



History of any Cardiovascular Disease	Cardiovascular Disease YES	Cardiovascular Disease NO	Diabetes YES	Diabetes NO
Local Health Directors Region 6 Demographics	13.1	86.9	15.1	83.0
Male	13.7	86.3	16.7	81.5
Female	12.6	87.4	13.6	84.4
Non-Hispanic White	14.0	86.0	12.0	86.3
Non-Hispanic Black	10.9	89.1	0	78.3
North Carolina	10.3	89.7	12.5	85.0

Data Source: NC State Center for Health Statistics BRFSS Survey Results 2018

The number of deaths due to Chronic Disease continues to plague the residents of Hoke County. The following programs have been held in order to encourage and promote healthier living and wellness.

- HCHD provided 25 education classes to county seniors at the Senior service center.
- The **18th Annual Diabetes Symposium**, themed **“Health Decision Day, Take Charge of Your Health”** consisted of exhibitors and free screenings.
- The **Diabetes Support Group** continues to meet monthly and provides education to Diabetics within the county
- The **ADA Diabetes Self-Management Program** through the NC DHHS Diabetes Prevention and Control Branch continues to be offered. **Medical Nutrition Therapy** is provided for patients who have a medical provider referral.

Priority Issue 3

Cancer Prevention

Hoke County Health Department



- Tobacco Prevention Treatment Specialist
- Clinical Effort Against Secondhand Smoke Exposure (CEASE)
- Breast and Cervical Cancer Screening Program
- QuitlineNC

FirstHealth Community Health Services



- FirstQuit

Tobacco use is the most important risk factor for cancer and is responsible for approximately 22% of cancer deaths. The economic impact of cancer is significant and is increasing. Hoke County continues to see an increase in the number of cancer deaths. And cancer serves as the second leading cause of death for Hoke County residents. Smoking is recognized as the major contributing factor to cancer. HCHD continues to provide supportive services for those battling cancer but also preventive efforts to deter smoking and increased opportunities for early cancer detection and diagnosis.

HCHD staffs a Tobacco Prevention Specialist who is able to provide effective evidence-based intervention for tobacco dependence. Referrals are made based on information gathered from initial patient health assessment.

Clinical Effort Against Secondhand Smoke Exposure (CEASE)



CEASE aims to increase delivery of tobacco cessation interventions to parents. CEASE addresses family smoking behavior and helps families establish rules for smoking at home and in cars. Within the past year, HCHD was able to provide fourteen (14) parents smoking cessation services.

Breast and Cervical Cancer Screening Program



HCHD provides free or low-cost breast and cervical cancer screenings and follow-up under the guidelines of the North Carolina Breast and Cervical Cancer Control Program. Participants are eligible if they are: uninsured or underinsured; without Medicare Part B or Medicaid; between ages 40-64 for breast screening services and 21-64 for cervical screening services; and have a household income at or below 250% of the federal poverty level.

- **If women are diagnosed with cancer through NC BCCCP, assistance is available. Breast and Cervical Cancer Medicaid (BCCM)** provides funding for treatment to NC BCCCP enrolled clients who are diagnosed with breast or cervical cancer and who meet additional requirements. BCCM eligible women must be enrolled in NC BCCCP prior to a cancer diagnosis.

FirstHealth Community Health Services:

FirstQuit

Support to be tobacco-free

FirstQuit is a program that assist tobacco-users in making a quit plan through support groups and quit classes made available in Hoke County.

New Initiatives



HCHD recognizes that mental health and substance use challenges are difficult and sees the importance in the community being able to understand the warning signs and risk factors. Mental Health First AID is a public education program that assist individuals across the community understand mental illnesses, support timely intervention and save lives. HCHD now has two nationally certified instructors. One is certified in Adult and the other in Youth and provides monthly training to educate others in how to assist youth and adults who are experiencing a mental health or substance use challenge or is in crisis.

HCHD has partnered with Cribs for Kids® to decrease incidences of infant mortality due to Sudden Infant Death Syndrome (SIDS) or other infant sleep-related deaths. To date, the Health Department has distributed 80 Safe-Sleep Cribettes with Safe Sleep Survival Kits (60 English kits/20 Spanish kits) to participants of our Child Health, Childbirth Education, Maternal Health, and WIC programs. We understand that the safest place for an infant to sleep is in his/her own separate sleeping environment, and it is our goal to ensure that families in need have access to this valuable resource.



HCHD has spearheaded the Hope-N-Hoke Coalition since 2017 in efforts to combat the opioid issue. Through community assessment and with a collaborative consensus, the community recognized the need for harm reduction efforts. In response, the HCHD received funding to establish a syringe exchange program and partnered with TiaHart Community Recovery Center. In the fall of 2019, the Hoke Syringe Exchange Program (HSEP) was in operation and recognized and listed by the North Carolina Harm Reduction Coalition as an established syringe exchange program.

Hoke County WIC with the staff and funding of the Sandhills ICO4MCH grant planned and achieved a new project that has created an ongoing breastfeeding friendly community within all of the local Hoke County Schools. As of August 2019, Hoke County became the first county in North Carolina to have breastfeeding rooms in every K-12 school. A total of fourteen rooms were created to be used by teachers, staff, and students to express breast milk while they are away from their infant or child. Each room and is private and comfortable. The addition of these rooms promotes an increase of breastfeeding initiation and duration rates. Our Hoke County schools are on par with federal guidelines that require space and break time for employees to express breast milk in the workplace.

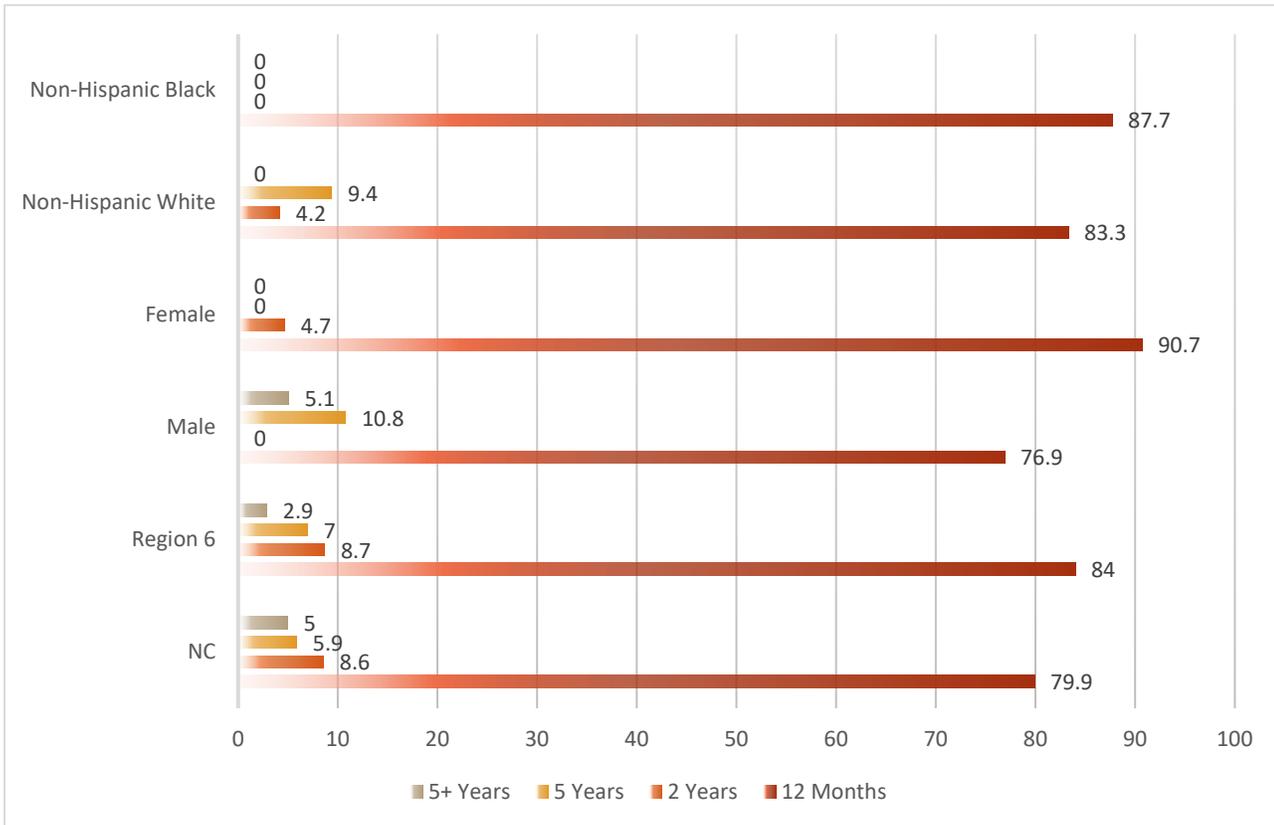


The Safe Routes to School (SRTS) movement works to make sure students can safely walk and bicycle to and from school, encouraging incorporation of healthy physical activity into daily routines. In partnership with North Carolina Department of Transportation and Hoke County Schools, the Hoke County SRTS intends to include families and students, as well as public health, active transportation, education, and environmental stakeholders, who will work to increase the number of students within the eight (8) elementary schools to have greater opportunity to walk and bicycle to and at

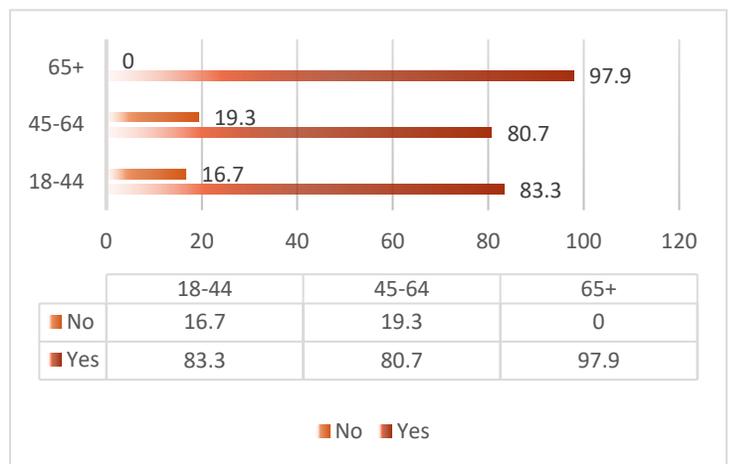
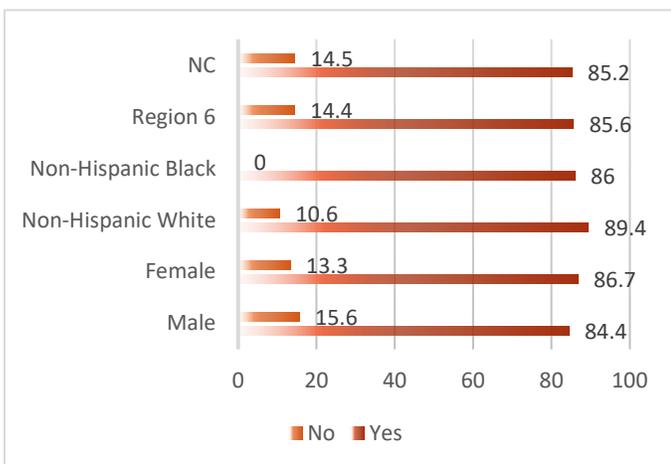
school and address the lack of safe conditions for such activities.

Emerging Issues and Data Changes

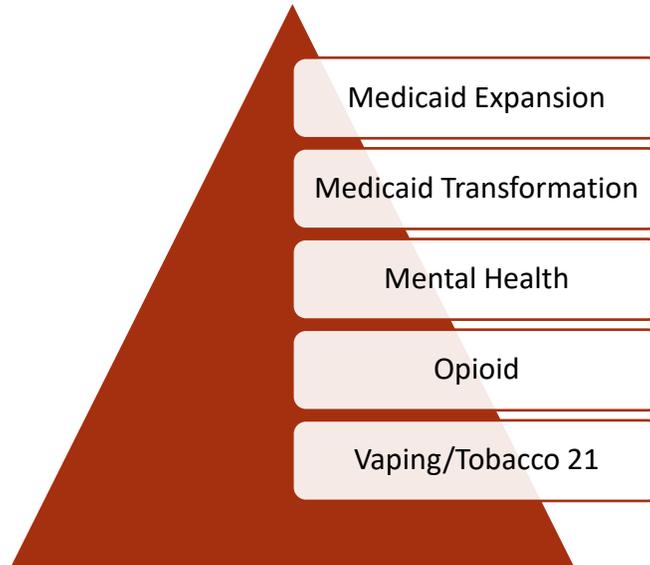
The following graph shows Health Care Access in Local Health Directors Region 6 Demographics according to the BRFSS 2018 Question: About how long has it been since you last visited a doctor for a routine checkup? A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition?



The following graph shows Health Care Access in Local Health Directors Region 6 Demographics according to the BRFSS 2018 Question: Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMO's or government plans such as Medicare?



The Hoke County Public Health Advisory Council has provided input into new and emerging health issues that are affecting the health and wellness of Hoke County residents. The table below highlights given feedback that will be addressed through public health initiatives within the upcoming year.



Conclusion

Upon evaluating the health needs of Hoke County, HCHD and its community partners will continue to aggressively advocate for more education in efforts to reduce the high rate of teenage pregnancies and sexually transmitted diseases, *[Hoke County is ranked twenty-third (23) in the state of North Carolina for the number of teenage pregnancies]*. An emphasis on community outreach remains a priority. Hoke County's youth require increased education about the consequences of being a parent, and about the deadly risks of transmitting sexually transmitted diseases. The county is soon to break ground on a new recreational center that will provide an enticing venue for local youth and all residents alike to become more actively engaged.

FirstHealth of the Carolinas and Cape Fear Valley Health hospitals and specialty clinics have assisted in providing greater options for local residents to access health care services. The new FQHC Goshen Medical clinic affords residents another choice to receive health care at a reduced or no cost. HCHD and its collaborative partners will continue to provide health care services and health education outreach programs to help close the gap on health issues that are prevalent in our community

HCHD will continue to be at the forefront in combatting major health issues of its citizens through collaboration and education. In collaboration with community partners and the Public Health Advisory Council, emphasis will maintain to strive in improving health disparities and the quality of life for all Hoke County residents. According to the outcomes from the 2018 Community Health Assessment, there is still a need to focus more on the emerging health issues and health concerns that presented little to no change (i. e. *health insurance coverage, access to health care, mental health, substance misuse*). as well as foster innovative ways to bridge these disparities gaps. HCHD and its community partners are committed to its plans to improve its citizen's health and well-being and continue to address population health concerns.