



2020

State of the County Health Report

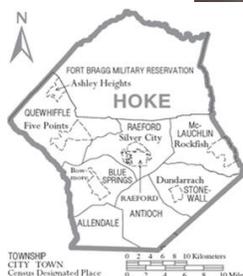


Hoke County, North Carolina

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

Helene Edwards, Health Director

683 East Palmer Road

Raeford, NC 28376

(910) 875-3717

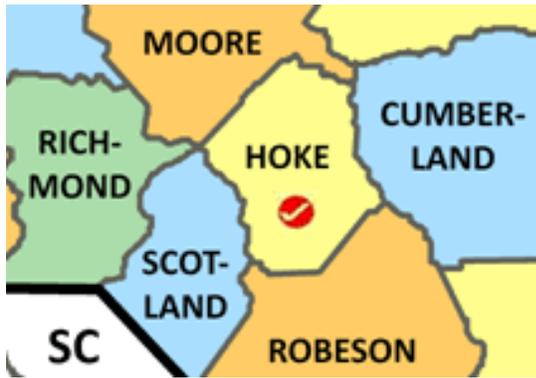
<https://www.hokecounty.net/181/Health-Department>



2019 Hoke County Demographic Characteristics		
Hoke County Population Estimate: 55,234		
Sex	Estimate	Percent
Male	27,230	49.3%
Female	28,003	50.7%
Age	Estimate	Percent
Median Age	32.8	----
Under 18 years	14,968	27.1%
18 years and over	34,411	62.3%
65 years and over	5,855	10.6%
Race and Ethnicity	Estimate	Percent
Asian	829	1.5%
African American	19,608	35.5%
Hispanic/Latino	7,678	13.9%
Native American and Alaskan Native	5,027	9.1
Native Hawaiian and other Pacific Islander alone	221	0.9%
White	27,065	49.0%
Two or More Races	2,486	4.5%
Housing Occupancy	Estimate	Percent
Total housing units	21,344	----
Owner occupied housing units	14,322	67.1%
Employment Status (16 yrs. & older)	Estimate	Percent
In labor force	23,797	58.8%
Not in labor force	16,693	41.2%
Income	Estimate	Percent
Median household income	\$48,072	----
Median family income	\$56,565	----
Per capita income	\$20,991	----
Persons in poverty	9,335	16.9%
Health Insurance Coverage	Estimate	Percent
No coverage, under age 65	8,451	15.3%
Veteran Status	Estimate	Percent
Civilian Veterans	5,903	16.2%
Disability Status	Estimate	Percent
With a disability	9,064	18.1%
Computers and Internet Use	Estimate	Percent
With a computer	15,514	87.2%
With a broadband internet subscription	14,292	80.3%

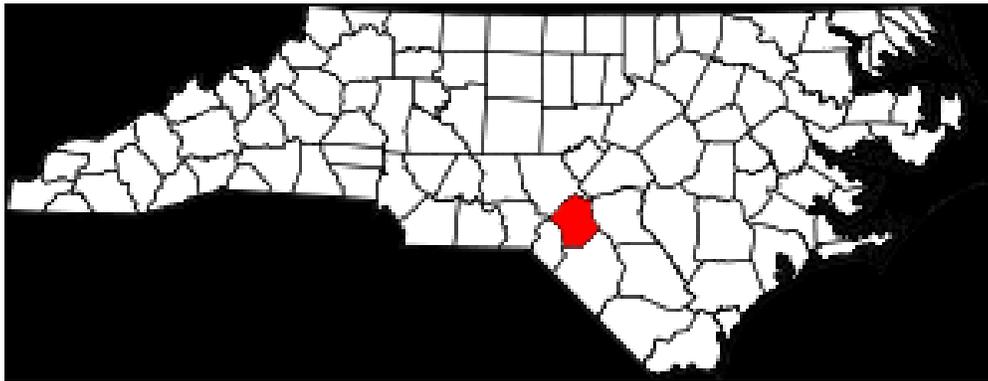
(Data Source: U. S. Census Bureau Hoke County Quick Facts 2019)

Hoke County lies in the southeastern Sandhills region of North Carolina, and is bordered by



Cumberland, Moore, Robeson and Scotland Counties. It was named in honor of Robert F. Hoke, a Major/General in the Confederate States Army. Hoke County span an area approximately 392 square miles, of which 391 square miles are land and 1.6 miles are covered by water. 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.



Monitoring the health of a community is an essential function of a local public health department and measures of mortality are indicators that are frequently used. Using information about the leading causes of death and premature death, we collaborate with our partners to educate the community about how to reduce the risk of certain conditions and adopt healthier lifestyles, as well as ensure access to quality medical screenings and treatment. Together, we are creating communities that promote health.



Data Highlights for 2020

Hoke County Yearly Deaths

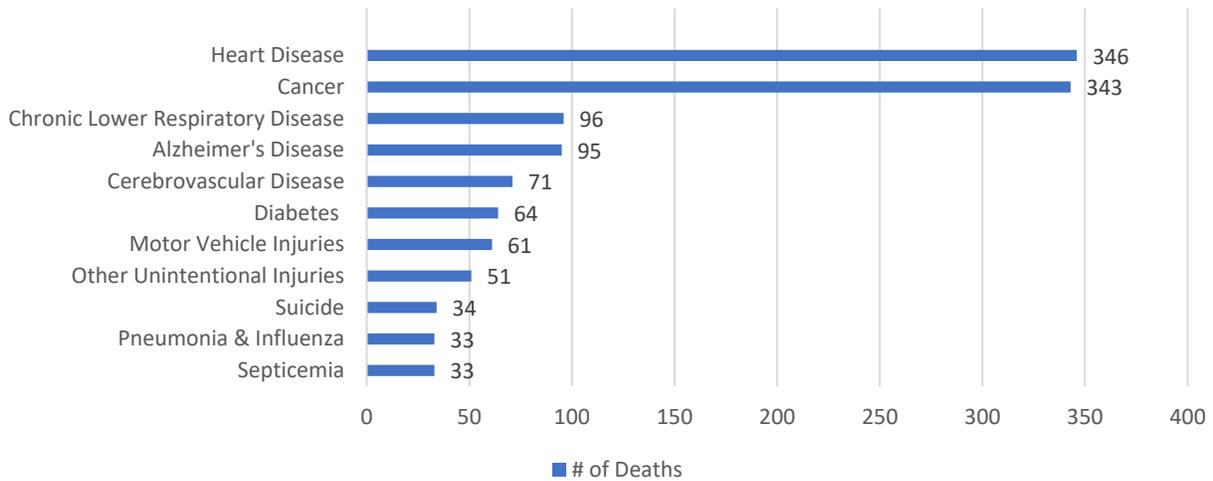
Year	Total Deaths	Female Deaths	Male Deaths
2019	376	185	191
2018	367	177	190
2017	384	184	200
2016	316	147	169
2015	300	140	160
2014	294	148	146

Data Source: NC State Center for Health Statistics 2020 County Data Book-NC Vital Statistics, Volume I: Population, Births, Deaths, Marriages, Divorces

Although there have been improvements, we face challenges in making certain that all Hoke residents benefit equally. Some residents are at higher risk of death than others because of their health behaviors, the environment in which they live, their educational and employment opportunities and their access to medical care. We continue to work with our partners to close these gaps.

While the death rates from many causes of death are decreasing, others have been more resistant to change. As the population ages, the number of deaths from Alzheimer's disease continues to increase, creating the need for sufficient support services for individuals and their caregivers. Intentional and unintentional injuries—such as homicide, suicide, motor vehicle crash, and drug overdose—often affect younger people, resulting in a dramatic impact on premature death; therefore, injury prevention initiatives in a community can help to increase life expectancy.

Hoke County's Leading Causes of Death



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

- ❖ In 2019, the number of deaths among men and women was slightly higher for men—191 men and 185 women. Within the same year, there were 219 deaths of people age 65 and over and 37 deaths of people age 19 and under.

- ❖ There were 3.6 times more deaths from coronary heart disease (346) and cancer (343) respectively than from chronic lower respiratory disease (96) the third leading cause of death and Alzheimer’s disease (95), the fourth leading cause of death.

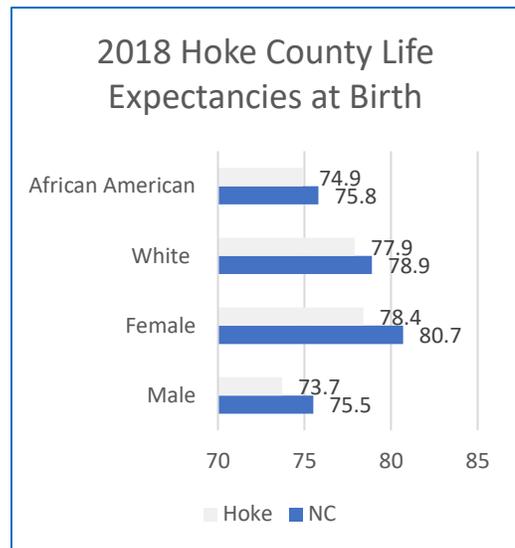
- ❖ There were 343 deaths from all types of cancer combined. Of these, trachea, bronchus and lung cancer were the most common (90 deaths), followed by breast cancer (28 deaths) and pancreas cancer (25 deaths).

- ❖ Heart disease (346 deaths) remained an important cause of death and premature death for both men and women, for all race/ethnic groups. The heart disease-specific rates were highest for African Americans and American Indians and higher for men than for women.

- ❖ Among people aged 1 to 39 years, injuries caused 54% of the deaths (16 unintentional injuries, 19 homicides, and 19 suicides). The most common unintentional injuries were motor vehicle crash and drug overdose.

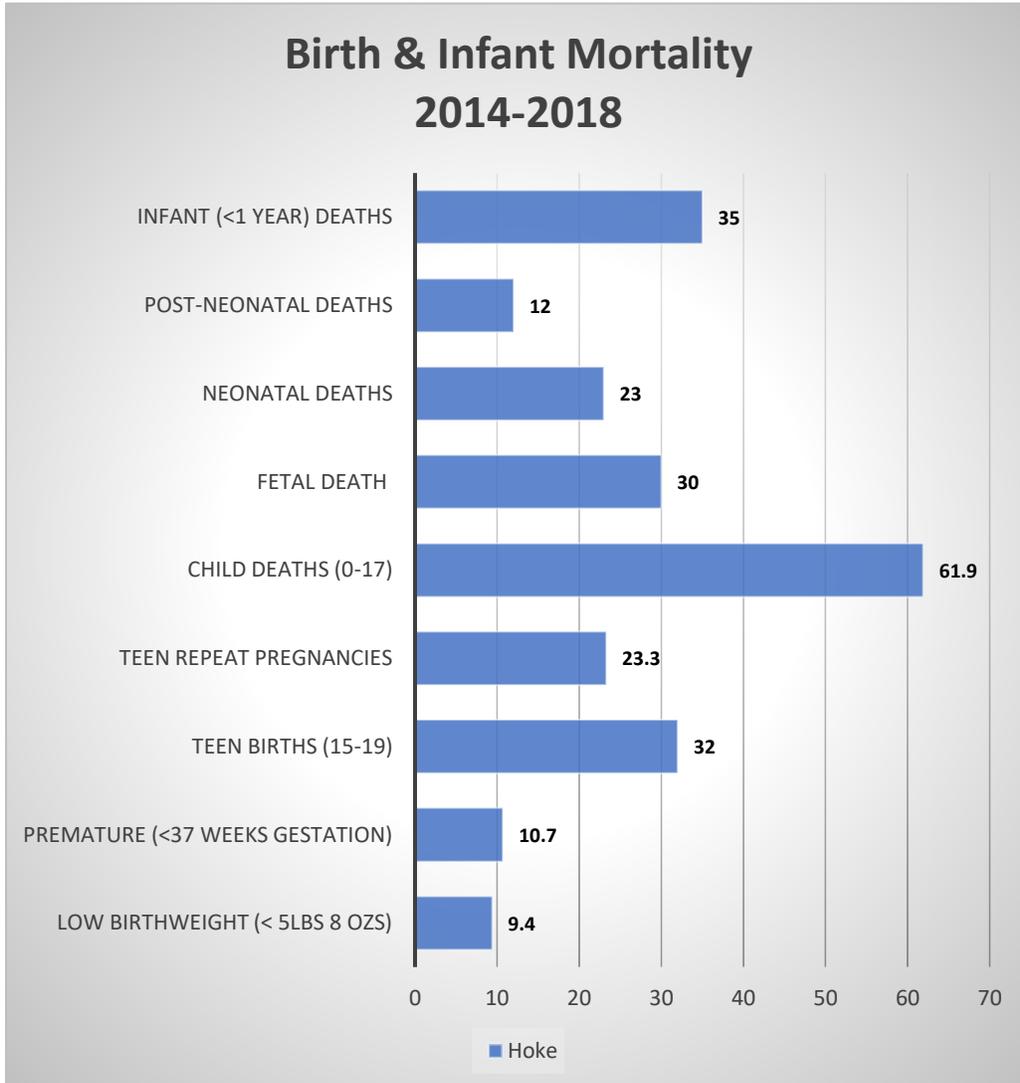
- ❖ Death rates were higher for men than for women for every leading cause of death and premature death, except for Alzheimer’s diseases and breast cancer.

- ❖ Alzheimer’s disease continued to be an important cause of death, although it had limited impact on premature death.



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

The Infant Mortality Rate is a public health indicator of a complex societal problem. Sudden unexpected infant deaths occur suddenly and unexpectedly in previously healthy infants who are less than 1 year of age and are commonly reported as accidental suffocation and strangulation in bed, unknown causes and Sudden Infant Death Syndrome.



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

According to SHIFT NC, Hoke County is ranked twenty-third (23) in the state of North Carolina for the number of teenage pregnancies. In 2018, Hoke County had 53 pregnancies among 15-19-year-old girls with a rate of 33.4 per 1,000. Hoke County has an 8.8% higher rate than North Carolina which has a rate of 24.6. Of those pregnancies, 7 pregnancies were among 15-17-year-old girls and 46 pregnancies among 18-19-year-old girls. As of the end of 2018, the county has a teen birth rate per 1,000 15-19-year-old girls at 27.7 which is significantly higher than the rate of NC ranked at 18.7.

Major Findings

- In 2018, 8 infant deaths (under 1 year) were reported in Hoke County, a rate of 9.5% (per 1,000 live births) and 6 fetal deaths (in utero development after 20th week) a rate of 10.5% compared to NC's infant death rate (under 1 year) 6.8% and fetal death rate of 6.7%. Many post neonatal deaths are influenced by social determinants of health, including the age and maturity of the mother.
- 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
- 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.

Age of Child	Cause of Death
1 Infants: <ul style="list-style-type: none"> • 12 months 	Illnesses
2 Infants: <ul style="list-style-type: none"> • 2 four months of age 	Accidents
6 Infants: <ul style="list-style-type: none"> • Three infants 1 day of age • One infant 2 days of age • One infant 5 days of age • One infant 1 month of age 	Prematurity and perinatal complications
1 teen: 14 years of age	Severe birth defects
1 teen: 17 years of age	Accident



In 2019, the Child Fatality Prevention Team reported a total of 11 children under the age of 18 whose fatalities were not due to abuse or neglect. The Hoke County Child Protective Services of DSS screened in a total of 469 reports during the fiscal year of July 2019-June 2020. Child Protective Services screened out 105 cases for not meeting the statue of abuse, neglect & dependency.



Communicable diseases are those that can be transmitted from person to person (or animal to human) via direct contact with body fluids, ingesting contaminated food or water, inhalation of contaminated air, or the bite of an infected insect. Preventing and controlling communicable

disease is a necessary and critical aspect of assuring population health, and is an affirmative duty of the Hoke County Health Department (HCHD). In efforts to protect the public's health from communicable disease threats, the HCHD maintains a proactive public health disease surveillance system, timely epidemiological assessment, and ongoing disease prevention education. HCHD monitors the occurrence of specific diseases on a community-wide basis and works with local physicians, laboratories, and schools in the reporting of all cases of disease to the Health Department.

	2017		2018		2019	
	# of Cases	Rate	# of Cases	Rate	# of Cases	Rate
Hoke County						
Newly Diagnosed Early Syphilis	4	7.4	6	11.0	7	12.7
Newly Diagnosed Primary & Secondary Syphilis	5	9.2	2	3.7	3	5.4
Newly Diagnosed Gonorrhea	158	291.8	150	274.2	182	329.5
Newly Diagnosed Chlamydia	387	714.8	400	731.3	421	762.2
Newly Diagnosed HIV	4	9.3	8	18.5	5	11.4
# of HIV Cases residing in Hoke County as of 12/31/18	N/A	N/A	185	N/A	N/A	N/A
# of HIV Cases residing in Hoke County as of 12/31/19	N/A	N/A	N/A	N/A	177	N/A
Newly Diagnosed AIDS (Stage 3)	3	7.0	2	4.6	5	11.4
# of AIDS Cases Living as of 12/31/18	111	N/A	N/A	N/A	N/A	N/A
Newly Diagnosed Chronic Hepatitis B	6	11.1	5	9.1	2	3.6
Acute Hepatitis B	0	0.0	1	1.8	0	0.0
Acute Hepatitis C	0	0.0	0	0.0	0	0.0
Chronic Hepatitis C	60	110.8	50	91.4	48	86.9

(Data Source: NC Department of Public Health Epidemiology Branch, 2019, HIV/STD Surveillance Report)

With this information, HCHD monitors both the incidence (number of new cases) and prevalence (number of existing cases) of disease within Hoke County. Hoke County ranks 33 among the 100 counties for newly diagnosed HIV rates. Hoke County ranks 23 among the 100 counties for newly diagnosed AIDS rates. 98 residents diagnosed with Chronic Hepatitis B are presumed alive and living within Hoke County. 172 residents diagnosed with Chronic Hepatitis C reside within Hoke County.

Hoke County Health Outcomes

Quality of Life	2015	2016	2017	2018	2019	2020
Child mortality	51.9	40	60	60	70	70
Diabetes prevalence	12%	11%	12%	10%	10%	12%
HIV prevalence	378	417	411	372	372	
Infant mortality	7.2	6	5	6	6	6
Poor mental health days	3.1	4.1	4.2	4.3	4.3	4.3
Poor physical health days	3.9	4.3	4.6	4.2	4.2	4.6
Health Behaviors						
Access to exercise opportunities	82%	78%	78%	60%	37%	21%
Adult obesity	34%	35%	33%	33%	32%	37%
Adult smoking	20%	23%	22%	23%	23%	20%
Drug overdose deaths	9	8	10	10	9	13
Food insecurities	19%	19%	19%	19%	19%	18%
Motor vehicle crash deaths	27	25	20	21	22	20
Physical inactivity	30%	30%	25%	25%	25%	29%
Sexually transmitted infections	548	489	551	709	668	715
Teen births	57	54	50	39	36	32
Clinical Care						
Dentists	10,264:1	12,900:1	13,170:1	13,320:1	13,530:1	13,690:1
Mental health providers	1,047:1	1,080:1	910:01:00	920:01:00	860:01:00	860:01:00
Mammography screening	71.10%	72%	69%	69%	42%	44%
Other primary care providers	2,231:1	1,912:1	1,951:1	1,614:1	1,463:1	1,441:1
Primary care physicians	16,845:1	10,260:1	10,320:1	7,520:1	4,840:1	4,510:1
Uninsured	22%	21%	17%	17%	16%	16%
Uninsured adults	29%	27%	22%	22%	21%	20%
Uninsured children	9%	8%	6%	5%	5%	6%
Social & Economical Factors						
Children in poverty	32%	28%	29%	25%	23%	26%
Children in single-parent households	39%	40%	36%	36%	36%	34%
High school graduation	74%	71%	75%	75%	82%	82%
Homicides	9	10	9	9	9	10
Injury deaths	63	56	59	56	59	65
Long commute – driving alone	43%	43%	45%	46%	46%	45%
Median household income	\$43,987	\$44,200	\$42,800	\$46,000	\$50,800	\$47,900
Severe housing problems	19%	19%	21%	19%	17%	16%
Some college	61.70%	64%	64%	62%	63%	64%
Unemployment	8.30%	7.90%	8.10%	6.50%	5.80%	5%
Violent crime	138	138	107	107	124	124

(As seen on <http://www.countyhealthrankings.org/app/north-carolina/2018/county/snapshots>)

Community Health Improvement Plan



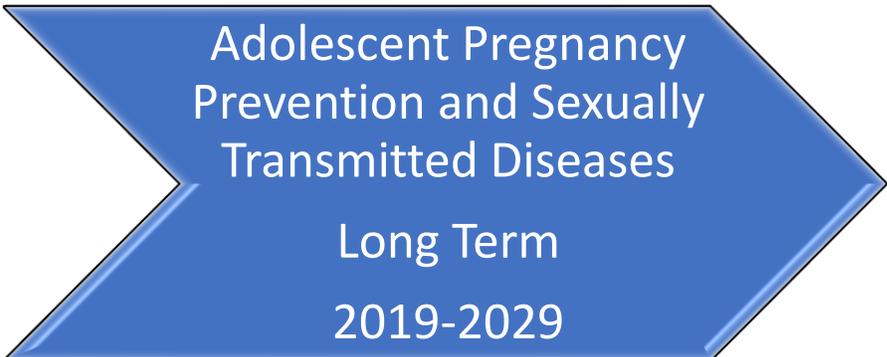
Cancer
Short Term
2019-2021

- 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 screening



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



Adolescent Pregnancy
Prevention and Sexually
Transmitted Diseases
Long Term
2019-2029

- Decrease teenage pregnancy rate among 13 to 18-year-old in Hoke County
- Reduce the rate of new HIV infection diagnosis

Due to COVID-19 restrictions, guidelines were established and followed in compliance with safety protocols. Restrictions were made in relation to temperature checks, limited appointments, social distancing and the abstinence from group gatherings.

Cancer Prevention

(Due to Covid19 restrictions, many of the programs normally conducted were limited in taking place.)

On December 20, 2019, the Federal Government changed the nationwide minimum age to purchase tobacco and vaping products to age 21. 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. Vaping has become increasingly popular especially among our youth and close surveillance of research is being conducted to stay abreast of findings and preventative efforts. 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.

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. In 2020, the program was able to screen 10 at-risk women and was able to provide education, follow-up and referral.



➤ 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 FirstQuit is a program to assist tobacco-users in making a quit plan through support groups and quit classes made available in Hoke County.
 Support to be tobacco-free

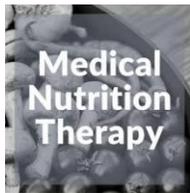
Chronic Disease

(Due to Covid19 restrictions, many of the programs normally conducted were limited in taking place.)



HCHD Health Educators are helping to address interventions, treatments, and lifestyle changes that can improve the quality of life for individuals with lasting conditions. Efforts have been continually made to develop educational materials for dissemination and tracking of progress and outcomes for projected outreach efforts.

Faithful Families works directly with communities of faith to promote health for individuals, families, and local communities. The practice-tested program engages faith communities in health education, environmental changes to support health, and community-wide health initiatives.



Medical Nutrition Therapy (MNT) is an individualized nutrition process meant to help treat certain medical conditions. It's vastly different from nutrition education, and seeks to instruct individuals on how to use their diet to best support their medical conditions. It not only addresses existing medical conditions but also attempts to lower the risk of new complications.

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. SRTS seeks to 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.



Diabetes Self-Management Education services provide information and skills for people to manage their diabetes and related conditions. It is tailored to individual needs, goals and life experiences and guided by evidence-based standards. The program was able to provide supportive services to two participants who successfully completed the program.

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) serves to safeguard the health of low-income pregnant, postpartum, and breastfeeding women, infants, and children up to age 5 who are at nutritional risk by providing nutritious foods to supplement diets, information on healthy eating including breastfeeding promotion and support, and referrals to health care.



Breastfeeding Peer Counselor Program utilizes mothers in the community with personal breastfeeding experience who is trained to give information and support to new moms. She mentor, coaches, and supports mothers and their baby's needs. She seeks to provide basic information about breastfeeding, ideas on how family and friends can be of support, ways to get a good start with breastfeeding, tips for a healthy supply of breast milk and support with breastfeeding concerns. The program was able to support 15 moms and provided 12 single user electric pumps.

Adolescent Pregnancy Prevention and Sexually Transmitted Diseases

(Due to Covid19 restrictions, many of the programs normally conducted were limited in taking place.)

STD and Pregnancy Prevention Education

Due to COVID19 restriction, the HCHD was unable to partner with Turlington High School and Hoke High School to provide regularly sessions of STD and Pregnancy Prevention Education.

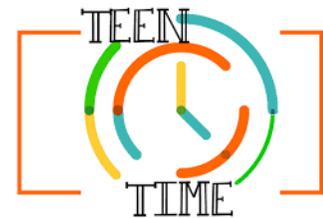


The Baby Think It Over

The Baby Think It Over program 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.

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

**Making
Proud
Choices!**

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.

COVID-19

The pandemic has presented North Carolina healthcare providers with an unprecedented public health challenge. The public health crisis created by COVID-19 has had, and will continue to have, lasting impacts on our way of life. The far-reaching impacts of COVID-19 have reverberated through all of our personal and professional lives. The implications of preventive measures taken across the state, and throughout our county, have been felt since the State of North Carolina officially declared a state of emergency on March 10th, and Hoke County stated its first positive case on March 18th.



Summary of Active COVID-19 Positive Cases in Hoke County (12/30/20)

COVID-19 + Cases (Active)	COVID-19 + Cases Hospitalization (Present)	COVID-19 + Cases (Recovered)
340	2	2,368
COVID-19 + Cases (Total)	COVID-19 + Cases Hospitalization (Total)	COVID-19 Deaths (Total)
2,744	73	36
COVID-19 - 19 Vaccine for 1a Participants	COVID-19 - 19 Vaccine for 1a Participants	
31	-	

Contact Tracing is a tool that can help slow the spread of infectious diseases, such as coronavirus disease 2019 (COVID-19). Contact tracing is a key element in Governor Cooper's strategy of testing, tracing and trends aimed at gradually easing stay-at-home-restrictions and supporting a safe economic recovery. HCHD contact tracers asks each person with COVID-19 about people with whom they've recently had close contact. The contact tracers then quickly (usually within 24 hours) alert people who are close contacts that they may have been exposed to the COVID-19 virus. The name of the person who may have exposed them is never shared and this makes the contact tracing process anonymous and confidential. The sooner health officials can alert close contacts, the lower the risk of the COVID-19 virus spreading further.

A **Social Media Campaign** was launched early on before the first case was reported. The public outreach campaign informs the community of testing, preventative measures, updates, other resources, and any information about upcoming preparation for mass vaccination. Upon launch in July, HCHD utilized the state's Prevent and Protect campaign. Public information has continuously been provided on readyhoke.org including COVID-19 information, press releases, resources, guidance, reports, testing, contact tracing, and stimulus and relief.



New Initiatives



HCHD has been instrumental in the development of the Hoke Syringe Exchange Program. In partnership with Tia Hart Recovery Community, HCHD has been able to provide access to sterile syringes and other injectable equipment and safe disposal after use. New efforts

have been made to prevent opioid overdose deaths by integrating evidence-based opioid overdose education and naloxone distribution. Efforts are underway to provide culturally relevant services designed to reach persons at high risk for experiencing or observing an opioid overdose.

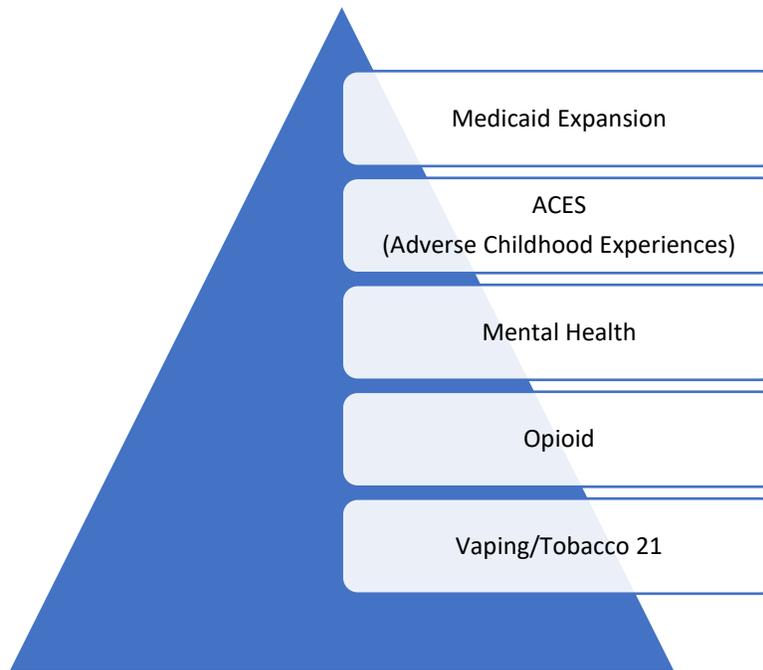
HCHD has trained over five (5) staff on the Triple P – Positive Parenting Program. The program is an evidence-based parenting program that gives parents simple and practical strategies to help them build strong, healthy relationships. Triple P confidently assist caregivers in managing their children's behavior and preventing problems from developing.



To further support healthy families, HCHD has incorporated the Mothers and Babies evidence-based program that is an effective intervention for the prevention of postpartum depression and its long-term effects on both mother and child. Mothers and Babies provides pregnant women with strategies and support to improve their mood and cope with stress when they become new

mothers. The program is flexibly designed to be delivered one-on-one or in a group, or virtually by phone or video.

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.



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. 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.