



2014 Community Health Assessment

Chatham County, NC



CHATHAM
HOSPITAL
UNC HEALTH CARE

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Acknowledgements

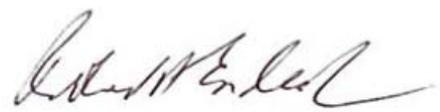
We would like to thank the many people who helped make the 2014 Chatham County Community Health Assessment a success. First, we are grateful to the Steering Committee for its commitment throughout this process. In total, fifty people volunteered to serve on the committee, many of whom also served on subcommittees. The Steering Committee brought a wealth of expertise on a range of topics, and we appreciate their work. We are also grateful to the Chatham County Board of Health for their guidance and engaged discussion of the health priorities, and to the health promotion team of the Chatham County Public Health Department for coordinating the Community Health Assessment process and authorship of this report.

We would like to thank the North Carolina Institute for Public Health, who led us through the Community Health Opinion Survey process, as well as those who volunteered to conduct surveys and focus groups. This includes Steering Committee members, UNC Health Behavior and Epidemiology graduate students, and health department staff. Collecting data is a major undertaking that ensures community perspectives are considered in the prioritization of health issues, and we would not have been able to talk to as diverse of a group of residents without these volunteers. We also appreciate the assistance of staff from the North Carolina State Center for Health Statistics and NC DETECT in acquiring relevant secondary data, as well as the North Carolina Division of Public Health for sharing their expertise on conducting health assessments.

Finally, we are grateful to the residents of Chatham County who shared their perspectives with us through door-to-door surveys and focus groups. We hope that this report brings a better understanding of Chatham County, and we look forward to working with you to improve the health and well-being of those fortunate enough to call Chatham home.



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Health Director
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Steering Committee Members

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Community Health Assessment 2014 Chatham County

Executive Summary

Health Priorities

Obesity



- ▶ Encourage healthy lifestyles through changes in the built environment (community design)
- ▶ Promote physical activity
- ▶ Promote healthy eating

Access to Mental Health Services



- ▶ Work collectively to prevent substance abuse
- ▶ Promote mental health treatment services
- ▶ Promote substance abuse treatment and counseling services

Access to Healthcare



- ▶ Promote, provide, and assist in coordination of healthcare services
- ▶ Examine gaps in healthcare services
- ▶ Promote and increase enrollment in the health insurance marketplace

The three health priorities will be the focus of action planning for the next three years. The bullet points are focus areas within each issue.

Who's involved?

The CHA is a collaborative effort between the Chatham County Public Health Department and Chatham Hospital.



The Steering Committee led the CHA process and determined the health priorities.



Chatham residents shared their perspectives through surveys and focus groups.

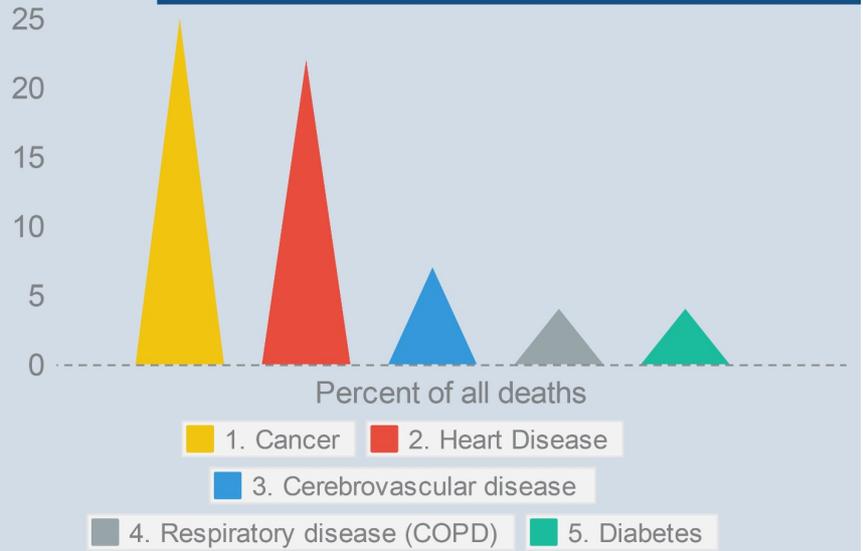
What is the Community Health Assessment?

The Community Health Assessment, or CHA, fosters a better understanding of the health needs of Chatham County residents. This year-long process is used to establish health priorities for the next three years and culminates in an action plan to address these priorities. The CHA helps local agencies and organizations working on health issues to plan and coordinate their efforts, and to ensure that the most pressing health concerns are being addressed. It is also utilized by the Chatham County Public Health Department in its strategic planning process.

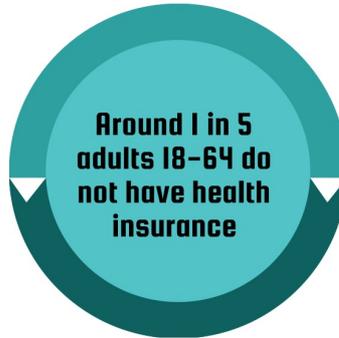
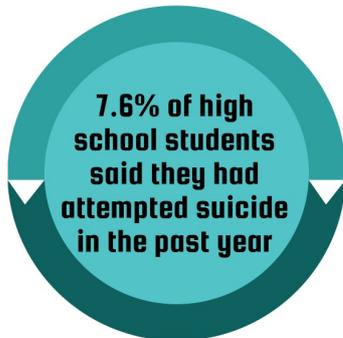
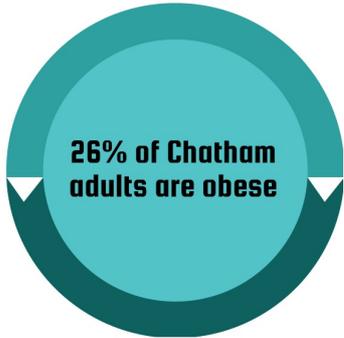
CHA PROCESS

1. Form Steering Committee
2. Hold meetings
3. Conduct survey and focus groups
4. Collect data from local, state, and national sources
5. Compile data and present findings
6. Select health priorities
7. Draft report
8. Share report with Steering Committee, Board of Health, and public
9. Develop Action Plan

Leading Causes of Death, 2009-2013



Key Stats



Economics & Health

Chatham County...

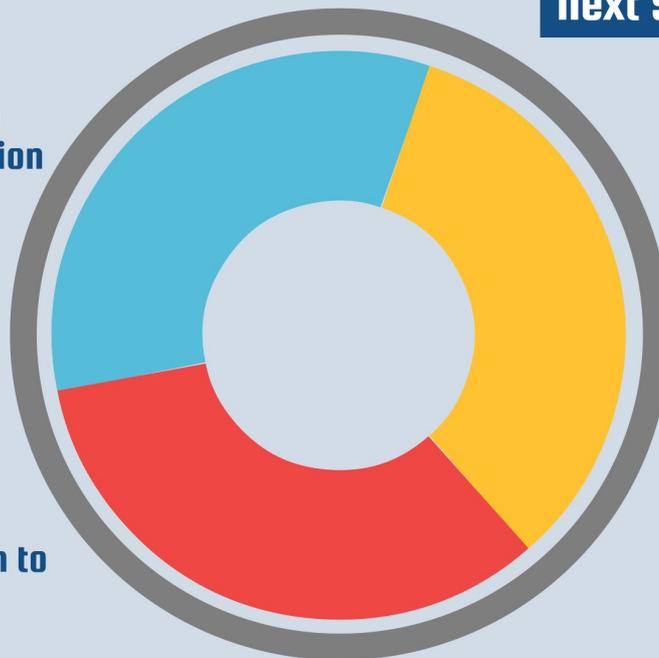
- ★ Lowest unemployment rate (Nov '14)
 - ★ Second longest life expectancy
- ...in the state

STEP 1:

Establish Chatham Health Alliance, the coordinating coalition for health-related efforts in Chatham County

STEP 2:

Develop Action Plan to address health priorities



Next Steps

STEP 3:

Work together to improve the health and well-being of Chatham County residents

For complete report visit:

chathamnc.org/reports

Chatham County Public Health Department
80 East St. | PO Box 130 | Pittsboro, NC 27312 | chathamnc.org/publichealth

Evaluación de la Salud de la Comunidad 2014 Condado de Chatham

Resumen Ejecutivo

Prioridades de la Salud

Obesidad



- ▶ Fomentar estilos de vida saludables a través de cambios en el entorno construido (el diseño de la comunidad)
- ▶ Promover la actividad física
- ▶ Promover la alimentación saludable

Acceso a Servicios de la Salud Mental



- ▶ Trabajar colectivamente para prevenir el abuso de sustancias
- ▶ Promover servicios para el tratamiento de la salud mental
- ▶ Promover el tratamiento para el abuso de sustancias y servicios de consejería

Acceso a Cuidados de Salud



- ▶ Promover, proveer y asistir en la coordinación de los cuidados de salud
- ▶ Examinar las deficiencias en los servicios para los cuidados de salud
- ▶ Promover y aumentar el acceso al mercado de seguros médicos

Las tres prioridades de la salud serán el enfoque de la planificación de medidas de acción por los próximos tres años. Los puntos debajo de cada prioridad son las áreas de enfoque para cada tema.

¿Quién está involucrado?

La CHA es un esfuerzo colaborativo entre el Departamento de Salud Pública del Condado de Chatham y el Hospital de Chatham.



El Comité Directivo dirigió el proceso de la CHA y determinó las prioridades de la salud.



Los residentes del Condado de Chatham compartieron sus perspectivas a través de encuestas y grupos de enfoque.

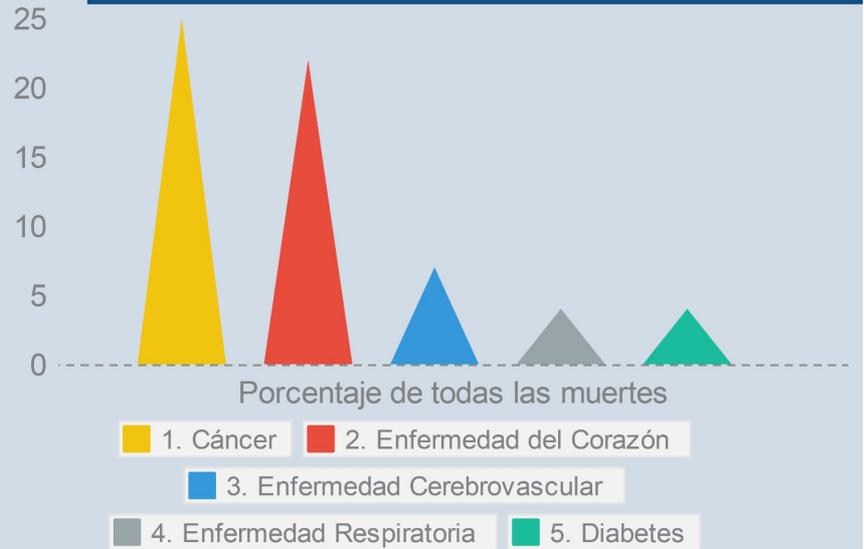
¿Qué es la Evaluación de la Salud de la Comunidad?

La Evaluación de la Salud de la Comunidad, o CHA, fomenta un mejor entendimiento de las necesidades de los residentes del Condado de Chatham. Este proceso de un año se utiliza para establecer las prioridades de la salud para los próximos tres años y culmina con un plan de acción para abordar estas prioridades. La CHA ayuda a las agencias y organizaciones locales a trabajar en los temas de la salud para planear y coordinar sus esfuerzos y para asegurar que los problemas de salud más urgentes sean abordados. Es también utilizada por el Departamento de Salud Pública del Condado de Chatham para el proceso de la planificación estratégica.

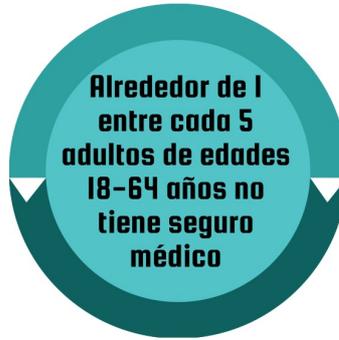
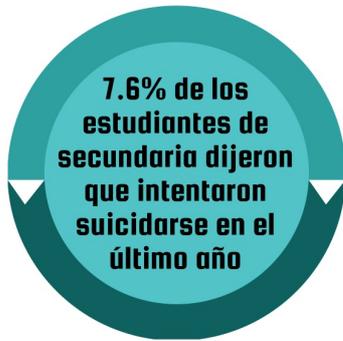
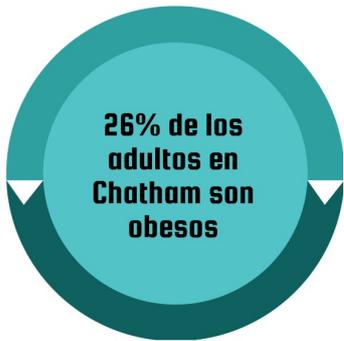
Proceso de la CHA

1. Formar el Comité Directivo
2. Tener reuniones
3. Realizar las encuestas y grupos de enfoque
4. Colectar datos de fuentes locales, estatales y nacionales
5. Recopilar los datos y presentar los resultados
6. Seleccionar las prioridades de la salud
7. Elaborar el reporte
8. Compartir el reporte con el Comité Directivo, el Consejo de Salud y el público
9. Desarrollar el plan de acción

Mayores Causas de Muerte, 2009-2013



Estadísticas Claves



La Economía y la Salud

Condado de Chatham

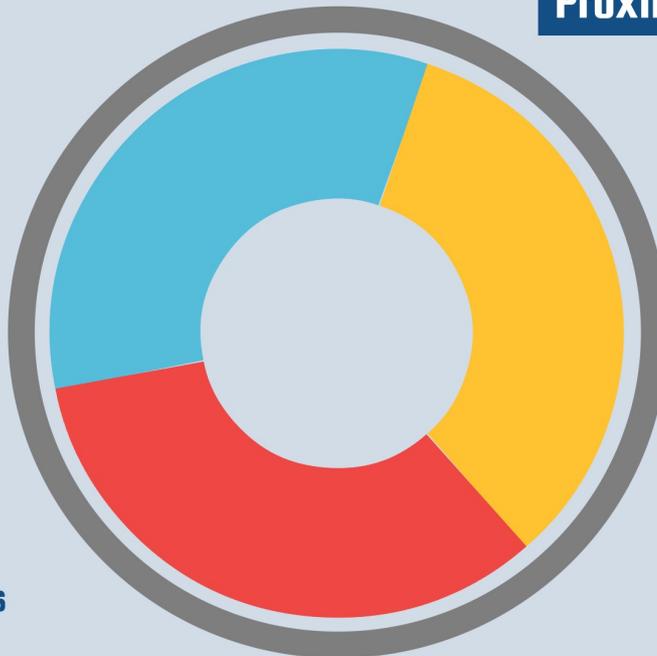
- ★ La tasa más baja de desempleo (Nov. '14)
- ★ Segunda más larga esperanza de vida ...en el estado

Paso 1:

Establecer la Chatham Health Alliance, la coalición de coordinación para esfuerzos relacionados a la salud en el Condado de Chatham

Paso 2:

Desarrollar el plan de acción para abordar las prioridades de la salud



Próximos Pasos

Paso 3:

Trabajar juntos para mejorar la salud y el bienestar de los residentes del Condado de Chatham

Para el reporte completo, visite:

chathamnc.org/reports

Departamento de Salud Pública del Condado de Chatham
80 East St. | PO Box 130 | Pittsboro, NC 27312 | chathamnc.org/publichealth

Chapter 1: Background

The Community Health Assessment, or CHA, fosters a better understanding of the health needs of Chatham County residents. This year-long process is used to establish health priorities for the next three years and culminates in an action plan to address these priorities. The CHA helps local agencies and organizations working on health issues to plan and coordinate their efforts, and to ensure that the most pressing health concerns are being addressed. It is also utilized by the Chatham County Public Health Department (CCPHD or health department) in its strategic planning process.

As one of the requirements for accreditation by the North Carolina Division of Public Health, the health department must conduct a CHA every four years (G.S. § 130A-34.1). Chatham Hospital is also required to conduct a community health needs assessment every three years to retain tax exempt status under IRS code. This is the first CHA conducted by the health department and the hospital as a collaborative effort. In addition to satisfying mandated requirements for both agencies, collaborating on the CHA adds expertise and credibility to the process while creating synergy and avoiding duplication of efforts.

Table 1: CHA Gantt Chart

Activity ↓ →	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	2015
Recruit and from Steering Committee															
Hold Steering Committee Meetings															
Gather and analyze secondary data															
Design survey, data collection strategy, and focus group guide															
Administer survey															
Hold focus groups															
Enter and analyze survey and focus group data															
Compile data into presentation															
Share data findings with Steering Committee															
Steering Committee selects health priorities															
Share health priorities with Board of Health for approval															
Complete draft of Community Health Assessment															
Gather feedback from Steering Committee/BOH and make revisions															
Finalize report and submit to NC Division of Public Health															
Work on Action Plan to address issues															
Meet as Chatham Health Alliance															

CHA Process

The table above shows the timeline of the CHA process. The timeline can be divided into seven phases: Initial planning, data collection and analysis, presentation of findings, prioritization of issues, development of CHA report, action planning, and ongoing Chatham Health Alliance collaboration.

The first step of the CHA process is to form a Steering Committee. The Steering Committee guides the process, providing input and feedback to those working on each task. The Steering Committee is also responsible for prioritizing health issues based on the data collected and reviewing the final CHA report.

Health department staff worked with community partners to recruit members of the Steering Committee. The Steering Committee members represented a broad diversity of individuals with different backgrounds and areas of expertise from all areas of the county. The recruitment process resulted in a group of approximately fifty members that included county residents as well as representatives from various local agencies and organizations. A list of Steering Committee members can be found on page 6 of this report. The Steering Committee brought a wealth of knowledge and expertise on a variety of issues and populations in the county, and the broad range of backgrounds ensured objectivity throughout the prioritization process. The Steering Committee met several times between December 2013 and December 2014 to review strategies for conducting the CHA and to stay informed of the process. It is important to note that the value of forming this group extends well beyond the CHA. The Chatham Health Alliance, consisting predominantly of Steering Committee members, will be the continuing collaborative effort to develop and implement strategies to address the health priorities and other health-related challenges facing Chatham County residents.

Within the Steering Committee, the following subcommittees were formed to focus on specific tasks: Survey Design and Data Collection, Prioritizing Issues, Community Forums, and Dissemination of Findings. These subcommittees met as needed to plan their designated phase of the assessment process.

The Survey Design and Data Collection Subcommittee met in January to devise a strategy for gathering the data necessary to determine health priorities and to create the Community Health Opinion Survey (CHOS). Data collection took place from February-June. This included conducting the CHOS, focus groups, and Youth Health Behavior Survey (YHBS) with middle and high school students, as well as gathering secondary data from local, state, and national sources. This data was compiled into a presentation, or databook (see Appendix 1), which was given to the Steering Committee in July. Based on this presentation of data, the Steering Committee narrowed the list of health issues to three health priorities, which were presented to the Chatham County Board of Health in August and approved by the Board in September. The Board of Health further refined the priorities with the addition of bullet points within each issue to highlight the underlying issues related to each health priority. The prioritization process is described in detail in Chapter 6.

This report was developed in the latter months of 2014 and early 2015 and, after incorporating feedback from the Steering Committee and Board of Health, was submitted to the North Carolina Division of Public Health in March 2015. The next stage of the CHA process is the development of an Action Plan to address the health priorities, which will be done in collaboration with the newly-formed Chatham Health Alliance, a coalition of community members and local stakeholders and professionals working on health-related issues in Chatham County.

Chapter 2: County Description

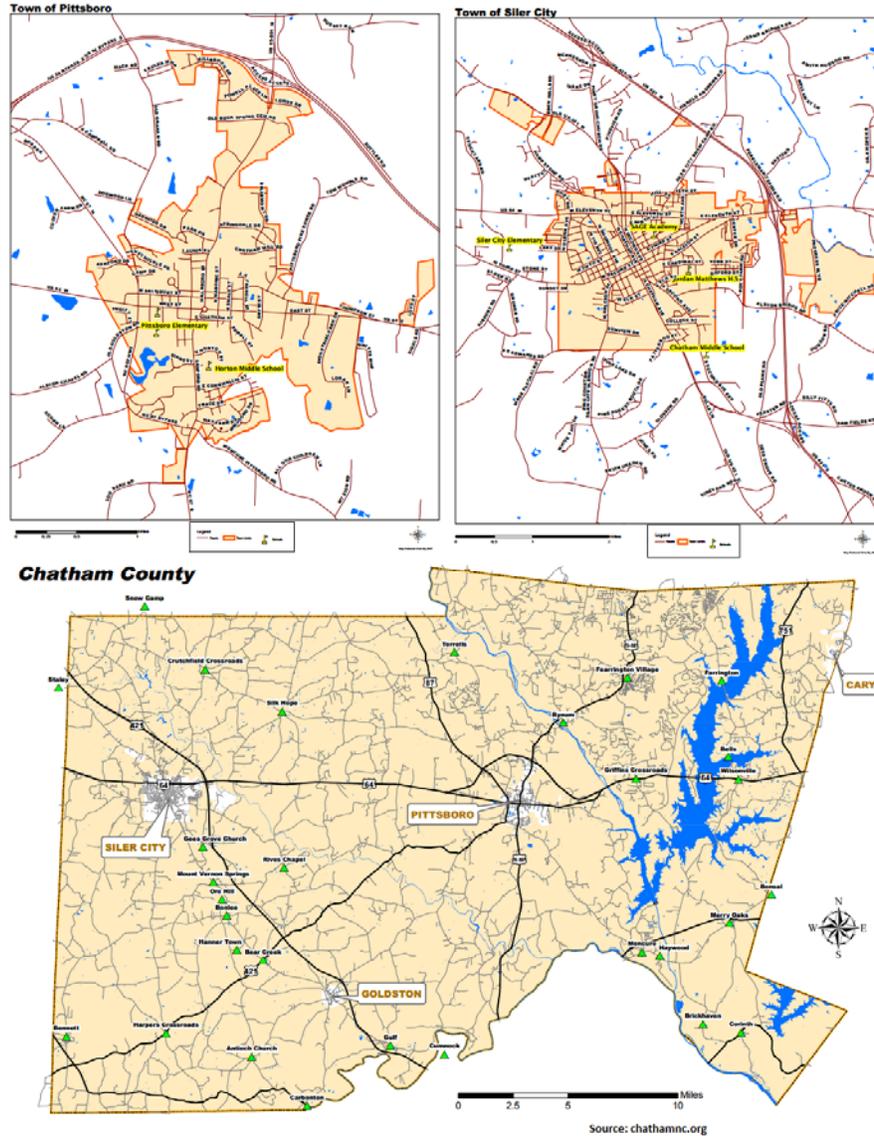
Historical and Geographic Overview

Chatham County was established in 1771 and was named after the Earl of Chatham, William Pitt. Originally part of Orange County, Chatham County was formed because residents living in the area found it too difficult and expensive to travel to the Orange County government seat, Hillsborough, to do business.¹ Chatham County has boundaries with Alamance, Orange, Durham, Wake, Harnett, Lee, Moore, and Randolph counties (see map below).

Figure 1: North Carolina Map

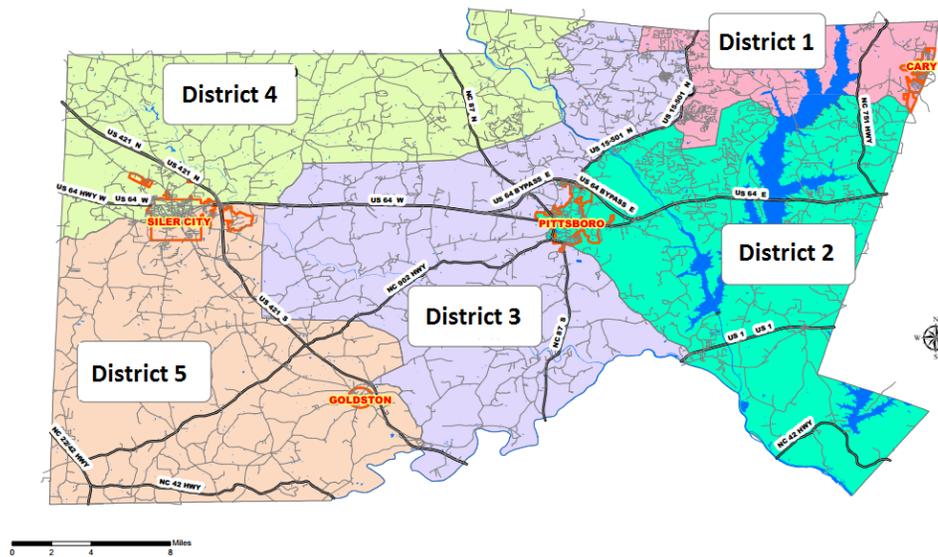


Chatham County is 709 square miles in total area, of which roughly 4% is water. There are four incorporated towns located in Chatham County: Pittsboro, Siler City, Goldston, and Cary. Pittsboro, established in 1787, is the county seat and home to most county offices as well as the historic courthouse, which is the setting for county Board of Commissioners meetings. It is located in the center of the county. Siler City, located 17 miles west of Pittsboro on US-64, was founded in 1887.² With an estimated population of 8,169 residents, as of 2013, it is the largest municipality located within Chatham County's borders.³ Goldston, located in the southwestern side of the county, is Chatham County's smallest township. Like the other townships, Goldston has a mayor and town board. The Town of Cary, while located predominately in Wake County, has annexed a small part of eastern Chatham County.² The rest of the county, which includes Moncure in the southeast and Silk Hope in the northwest, is unincorporated. Maps of Siler City, Pittsboro, and the county's townships and unincorporated communities are shown in Figure 2.

Figure 2: Chatham County Maps: Townships and Unincorporated Areas²

County Governance

The Board of Commissioners is made up of five representatives. While the commissioners must reside in the district in which they are elected, all eligible county residents may vote in each district's commissioner's election. The commissioners are responsible for appointing the county manager, who oversees all day-to-day county business. They also appoint members of many county boards, including the Board of Health, which creates and adopts policies for the county's health department, provides guidance on health issues in the county, and appoints the Health Director.⁴

Figure 3: Chatham County Election Districts⁴

Population

Chatham County's population increased from just under 50,000 in 2000 to nearly 67,000 in 2013.³ 51.8% of county residents are female. The population is 82% White, 13% African American, 1.5% Asian, 1.3% American Indian or Alaska Native, and 1.5% multiracial. 13% of residents are Hispanic/Latino.³ Population density is highest in northeast Chatham and in Siler City, where residents identifying as Hispanic/Latino make up approximately half of the population. Still, Chatham County is a predominately rural county. In 2010, the population density of the county was 93.1 persons per square mile, less than half of the population density of the state as a whole (196.1 persons per square mile). 66% of the population lived in rural areas, which made up 97.5% of the county's total area.⁵

However, several factors are contributing to population growth in the county. Chatham County's proximity to urban areas in the Triangle, particularly the northeastern part of the county, has made it a desirable place to live for those who work there. Home construction is increasing to near pre-recession levels. Furthermore, Chatham County has become a popular retirement destination, with several retirement communities located in the county. The aging population is reflected in US Census numbers and is shown in Figure 6. From 2000 to 2010, the median age of county residents increased five years.⁵ With this population shift comes a greater demand for services for the elderly, ranging from access to healthcare facilities and public transportation, to nursing homes and recreational

Figure 4: Chatham County Population by US Census Block Group, 2010

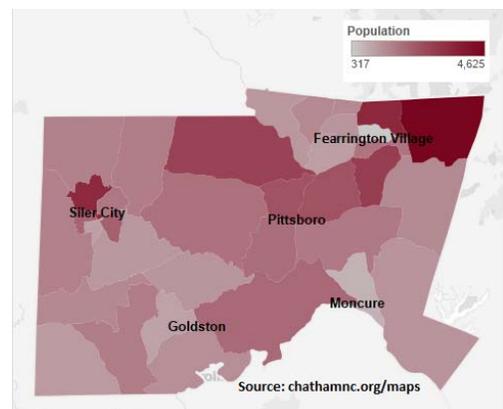
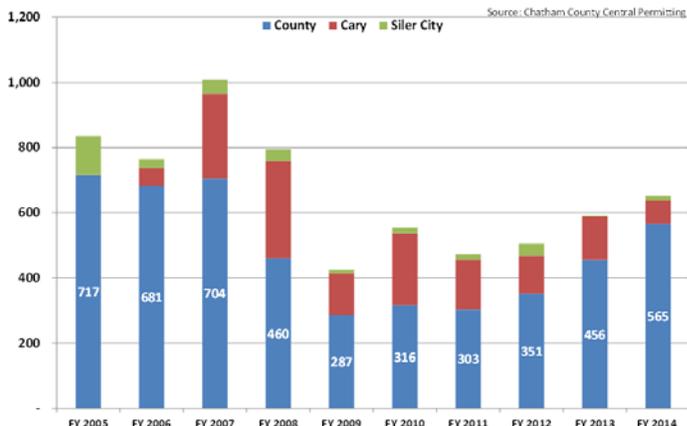


Figure 5: Residential Building Permits Issued

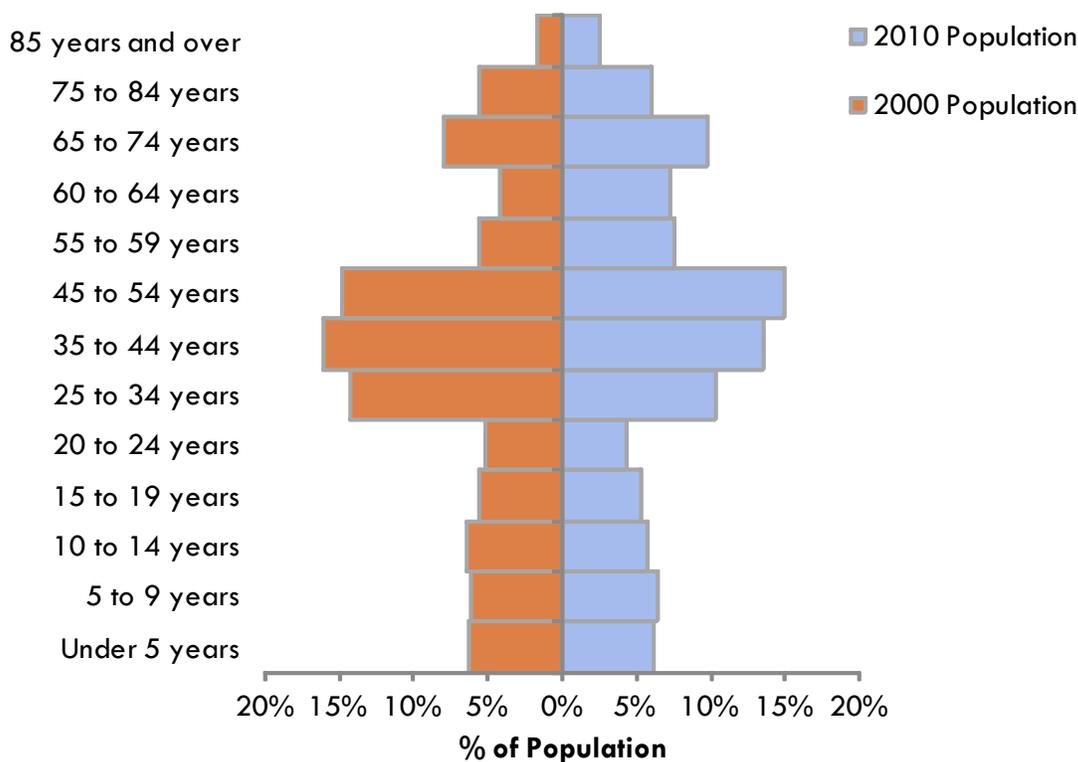


facilities. Currently, Piedmont Health Services operates community health centers in Siler City and Pittsboro, as well as a senior care facility in Pittsboro. The health department also has clinics in Siler City and Pittsboro. Chatham Hospital, which is part of UNC Health Care, is located in Siler City.

Planned developments on both the eastern and western sides of the county have the potential to double the population in the years to come.

Chatham Park is a planned mixed-use development that covers more than 7,000 acres adjacent to Pittsboro and Jordan Lake. In June 2014, the Pittsboro Board of Commissioners approved a rezoning request to allow the project to move forward. Over 35 years, Chatham Park could increase the population of Pittsboro from under 5,000 to over 60,000 people.⁶ Another approved development, the Chatham-Randolph Megasite, is a 1,800 acre plot of land that sits east of Siler City. As of early 2015, officials are looking to attract automotive and other industries to open operations on the site.

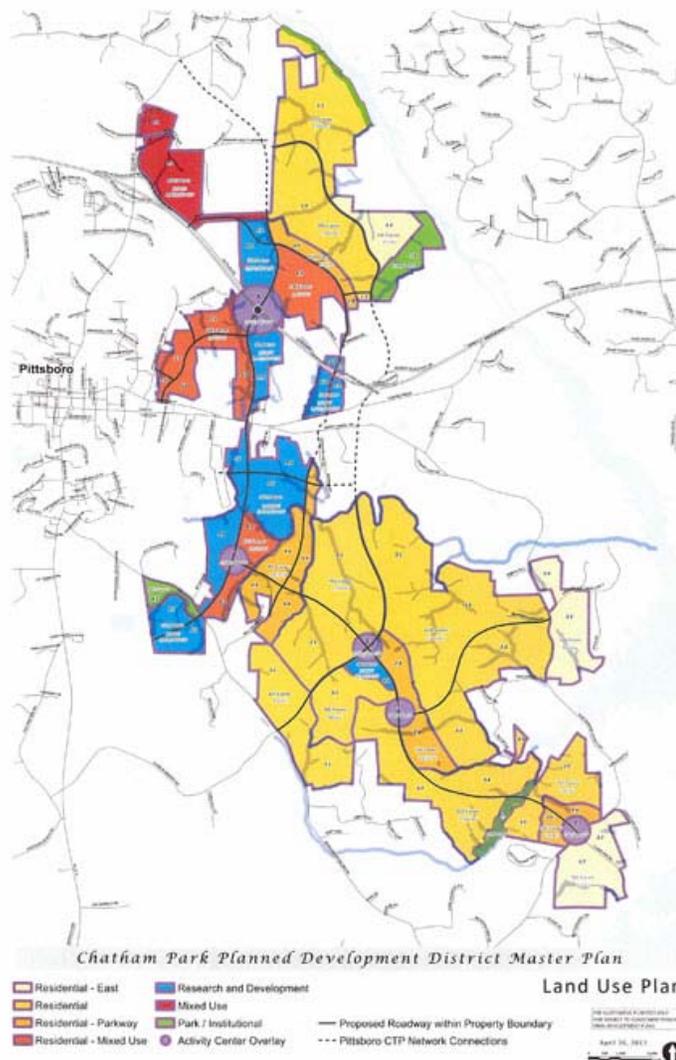
Figure 6: Chatham County Population by Age: 2000 vs 2010⁵



It is important to consider the changing make-up of the county while reading this assessment. Throughout the CHA process, planned and potential changes impacting the county remained a topic of discussion. Development in a community can offer many benefits, from economic opportunity to increased access to services, but can also increase the demand on existing services and infrastructure, from clinics and healthcare facilities to emergency response, police, and even opportunities to be active, like parks and greenways. While some of these effects can be anticipated, the health impacts of a changing demographic and growing population will only become fully clear as growth and development occurs.

Regional and economic disparities across the county and their links to health outcomes are discussed in Chapter 4.

Figure 7: Chatham Park Planned Development District Master Plan⁶



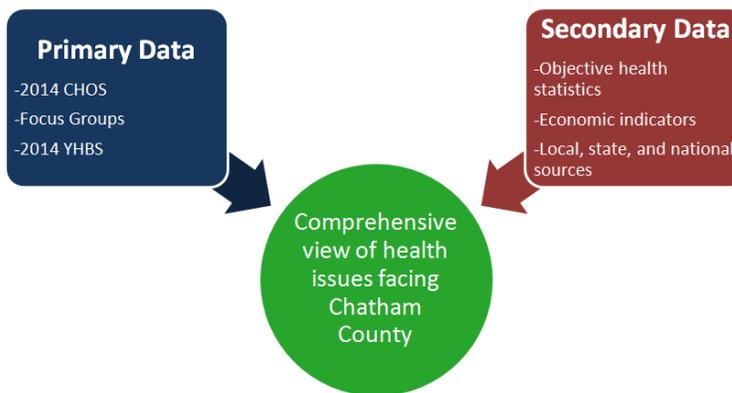
Chapter 3: Health Data Collection Process

Table 2: Timeline for Data Collection and Prioritization of Health Issues

Activity ↓ →	Jan	Feb	Mar	Apr	May	Jun	Jul
Gather and analyze secondary data							
Design survey, data collection strategy, and focus group guide							
Administer survey							
Hold focus groups							
Enter and analyze survey and focus group data							
Compile preliminary survey and focus group data							
Share preliminary findings with Steering Committee							
Prioritize health issues							

From the beginning of the CHA process, the Steering Committee emphasized the importance of utilizing data in its decisions and prioritizing of health issues. Therefore, the Data Collection Subcommittee, charged with organizing and leading all data collection efforts, worked to ensure a comprehensive view of the county’s health through multiple data sources. The data can be divided into two groups: primary data, which the Steering Committee collected, and secondary data, which the committee acquired from outside sources. Together, these types of data give both the residents’ views on what affects the county’s health as well as an indication of how Chatham compares with other counties and how the county has changed over time.

Figure 8: CHA Data Sources



Primary data sources include the Community Health Opinion Survey, or CHOS, and focus groups with community members. The Data Collection Subcommittee was responsible for creating the survey. The subcommittee developed several survey drafts before settling on a version that provided a fairly comprehensive view of residents’ perspectives on health issues in the county while keeping the length of the survey reasonable. The survey included questions gauging perspectives on community health issues as well as individual health behaviors. The CHOS survey can be found in Appendix 3.

The CHOS was conducted door-to-door in March 2014 in consultation with the North Carolina Institute for Public Health (NCIPH). The data collection strategy for the CHOS was based on the CDC’s two-stage cluster sampling Community Assessment for Public Health Emergency Response (CASPER) method, which yields a representative sample of county households. To randomly select households to participate, 30 census blocks, weighted by 2010 US Census population, were chosen at random. Within each selected

block, teams of volunteers visited seven randomly-selected households and conducted surveys using tablets with the surveys preloaded in EpiInfo. If no one was home or the resident refused, surveyors

visited the nearest residences until a survey was completed. The completed surveys were saved and uploaded to a central database.

A total of 190 surveys were completed. Of those who answered the door, 63% completed the survey. One gated community in a section of the county that was selected refused to participate, so another census block was randomly selected to replace it. Once survey collection was finished, the survey team created a database of completed surveys in Microsoft Excel. The data was then cleaned and uploaded into EpiInfo for analysis. Responses were weighted such that each selected Census block was counted equally regardless of the number of completed surveys from that block. Outputs of weighted frequencies for each survey item were generated and a report of survey results was developed (see Appendix 2).

In addition to the CHOS, focus groups were conducted with groups of county residents. Focus

groups are 1 to 1.5-hour facilitated discussions based on a set of pre-identified questions called a focus group guide (Appendix 4). Focus groups are a strategy used to get more in-depth information to complement the Community Health Opinion Survey (CHOS). They also provide an opportunity to talk with specific groups of people, like residents of an area of the county or a specific demographic group, to find out their thoughts, opinions, and needs that may not be clear from the CHOS alone. Overall, 13 focus groups were conducted as part of the 2014 CHA; 10 focus groups with adults, and three with youth.

To select focus group participants, the Steering Committee identified key groups that would yield important information about Chatham’s residents and sought out contacts to those groups. Each focus group was led by a moderator with assistance from a note taker. All focus groups were recorded. After each focus group took place, the moderator and note taker listened to the recording and created summary reports of key themes. These themes were then aggregated, or merged, across all focus groups. Several Steering Committee members who had conducted focus groups held a discussion of findings and voted on the top themes, which are listed in Table 5.

<p>Table 3: Focus Groups Conducted</p> <p style="text-align: center;">Adult Focus Groups</p> <ul style="list-style-type: none"> ▪ Chatham Food Access Network ▪ Chatham Hospital ▪ Eastern Council on Aging ▪ Hispanic/Latino Church Group ▪ North Chatham Residents ▪ Parents of Young Children ▪ Sheriff’s Office ▪ County Staff who live in Siler City ▪ St. Bart’s Church ▪ Western Council on Aging <p style="text-align: center;">Youth/Adolescent Focus Groups</p> <ul style="list-style-type: none"> ▪ Chatham Together Mentor Program ▪ Horton Middle School YMCA After School ▪ Northwood High School Healthful Living Course
--

<p>Table 4: Process of Identifying Issues</p> <ul style="list-style-type: none"> ▪ Identify groups to conduct focus groups with ▪ Conduct focus groups ▪ Take notes ▪ Listen to focus group recordings and identify themes ▪ Compare themes across focus groups ▪ Determine most frequently mentioned themes
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Table 5: Key Themes from Focus Group Discussions (Not in rank order)

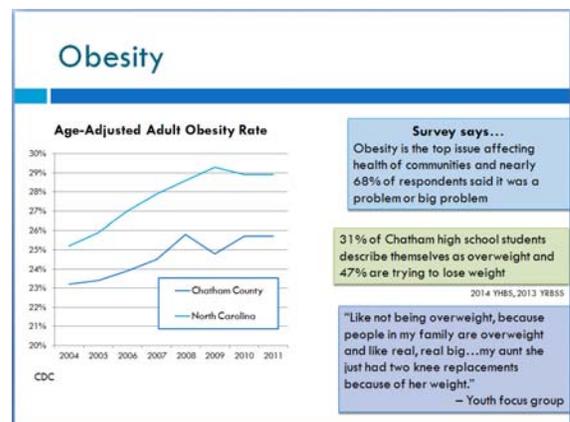
- Mental Health
- Substance Abuse
- Access to Healthy Food
- Poverty
- Chronic Disease
- Obesity
- Safety
- Accessibility of Transportation
- Unemployment
- Impact of Development
- Water and Sewer Infrastructure
- Built Environment and Places to be Active
- Geographic Divide
- Communication
- Knowledge to Make Healthy Choices
- In-County Activities for Youth
- Education Opportunities
- Relationships/Communication/Bullying
- Risky Sexual Behavior/STI/Unintended Pregnancies

While the population surveyed through the CHOS was eighteen years and older, the 2014 Chatham County Youth Health Behavior Survey, or YHBS, provided data on middle and high schools students in the county. The survey was coordinated by Chatham County Schools’ staff with assistance from Chatham Drug Free and the health department. The survey questions focused on nutrition, physical activity, mental health, traffic safety, violence, substance use, sexual behavior, and demographics.

During spring 2014, the middle school survey was sent to teachers at eight middle schools (Bennett, Bonlee, Chatham Middle, Horton Middle, J.S. Waters, Margaret Pollard, Moncure, and Silk Hope) to conduct with their students. A total of 1183 middle school students (grades sixth through eighth), or roughly 61% of Chatham County Schools middle school students, completed the survey. A high school survey, which was identical to the middle school survey with the exception of a few additional questions, was sent at the same time to teachers at four high schools (Chatham Central, Jordan-Matthews, Northwood, and SAGE Academy). In total, 1422 high school students, or 60% of all county high school students, completed the YHBS survey. Data analysis was performed by Chatham Drug Free staff and included raw frequencies for each survey question for middle school students, high school students, and all respondents. A summary of the middle and high school YHBS survey results can be found in Appendix 5, and the YHBS survey in Appendix 6.

In addition to the primary data sources mentioned above, information was gathered from over 30 local, state, and national sources. These sources covered a range of topics, from population growth and the economy to health indicators such as obesity rates and leading causes of death. Combining self-reported data and community perspectives from the primary sources with objective statistics from secondary sources provided a comprehensive view of the health issues facing Chatham County residents.

Figure 9: Example Slide from Prioritization Presentation



To present these findings to the Steering Committee and prioritize health issues, health promotion staff at the health department developed a PowerPoint presentation with slides for each issue for which there was data available. This included both primary and secondary data, and care was taken to include qualitative data, such as focus group quotes, local survey results, and statistical and trend data from outside sources for each issue when available, as shown in the example slide in Figure 9. In total, 43 issues were covered in the presentation, which can be found as a databook in Appendix 1.

A draft version of the presentation was sent out in advance of the July Steering Committee meeting to the Prioritizing Issues Subcommittee for feedback. Once this feedback was incorporated, the presentation and other materials, including a one-page summary of findings and the CHOS results, were e-mailed to Steering Committee members. On July 23rd, 2014, the Steering Committee met to go over findings from the data collection process and to determine the health priorities. The health promotion team presented data on the 43 issues to the Steering Committee and opened the floor to discussion. Each member of the Steering Committee present then voted on their top three health issues based on importance; that is, the degree to which each issue impacts the health of Chatham residents. Absentee votes were also accepted in advance of the meeting. In total, 33 people cast votes during the prioritization process. The votes were weighted such that the top issue was worth three points, second issue two, and third issue one. Votes were tallied and a top 10 list was created. This list is shown in the table below.

Table 6: Top Ten List of Health Issues

Rank	Issues	Total Score
1	Obesity	29
2	Chronic Disease	22
3	Access to Healthcare	17
4	Mental Health	15
5 (tie)	Substance Abuse Unemployment/Adequate Local Employment	13
7 (tie)	Nutrition Poverty	9
9	Built Environment	8
10 (tie)	Housing and Homelessness Tobacco Use (Smoking and Smokeless) Youth Health/Activities for Youth	6

The Steering Committee then reconvened to discuss the top 10 issues and to consider combining issues on the list. The Steering Committee voted to include nutrition and the built environment under obesity, and to combine substance abuse and tobacco use. A motion to combine obesity and chronic diseases did not pass. The table below shows the revised list.

Table 7: Revised Top Ten List of Health Issues

Rank	Issues	Total Score
1	Obesity	29
2	Chronic Disease	22
3	Access to Healthcare	17
4	Access to Mental Health Services	15
5 (tie)	Substance abuse/Tobacco Use Unemployment/Adequate Local Employment	13
7	Poverty	9
8 (tie)	Housing and Homelessness Youth Health/Activities for Youth	6

The Steering Committee was then instructed to vote on their top three health issues from this list, taking into account both the importance of each issue (the degree to which each issue impacts the health of Chatham residents) as well as its changeability (the capacity of organizations, groups, and county residents to effect change on these issues in the county). The votes were weighted in the same manner as the first round of voting. The three issues that received the most votes, or the 2014 CHA Health Priorities, are below.

Table 8: 2014 CHA Health Priorities

Rank	Issues	Total Score
1	Obesity	74
2	Access to Mental Health Services	33
3	Access to Healthcare	24

In August 2014, a summary of the prioritization process and the health priorities was presented to the Chatham County Board of Health for discussion and approval. The Board of Health discussed the importance of the selected issues and sought ways to incorporate other relevant issues, such as substance abuse, without changing the list determined by the Steering Committee. They requested that the health promotion team, with approval from the Steering Committee, develop a list of bullet points of underlying issues of each health priority that would be included in CHA reports and presentations along with the health priorities.

The bullet point list on the following page was drafted by health promotion staff and approved by unanimous vote of the Steering Committee in September. It was then approved by the Board of Health at its meeting on October 6th, 2014. The finalized list is on the next page.

The bullet point approach is beneficial in several ways. First, it preserves the work of the Steering Committee. Second, it highlights underlying issues, including those that were folded into the health

priorities during the prioritization process. Finally, the bullet points are useful in determining strategies to address the health priorities in the Action Planning phase of the CHA process.

Figure 10: 2014 CHA Health Priorities and Bullet Points



Chapter 4: Health Data Results

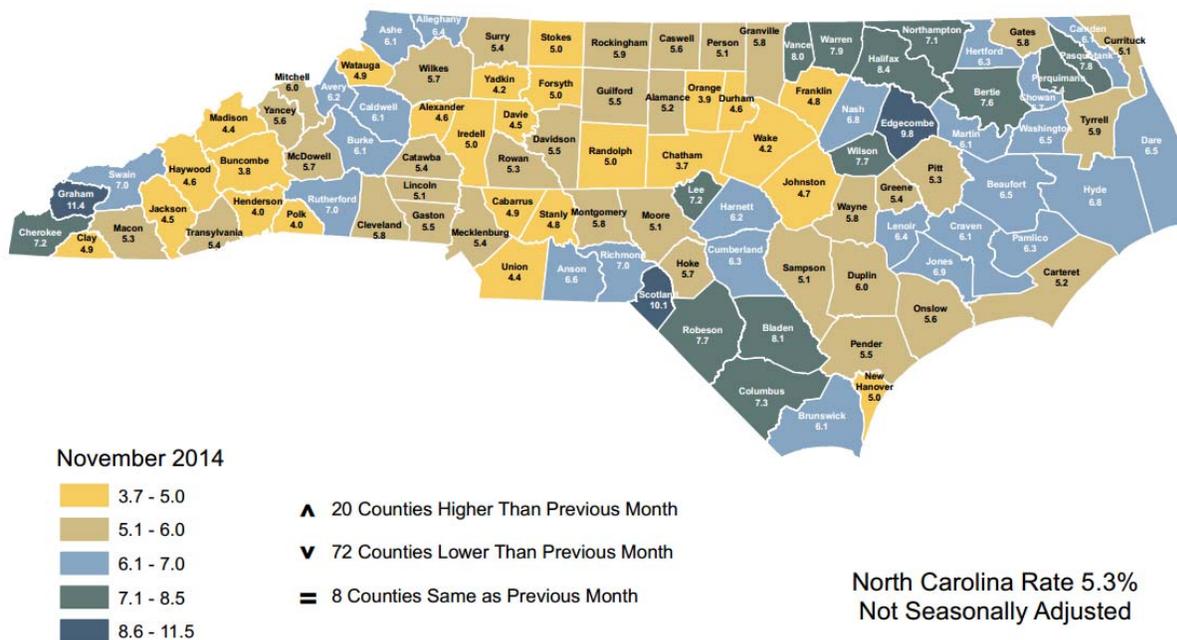
Overview of Data and Findings

This chapter highlights the social, economic, and health data that was used by the Steering Committee to prioritize health issues. In total, over forty health issues were considered. When possible, current Chatham County data is compared to state, national, and peer county data, as well as county data from previous years. For reference, the peer counties, which were chosen by the NC State Center for Health Statistics for their similar size and demographic composition to Chatham County, are: Carteret, Haywood, Moore, and Stanly counties. Also, since the methods used to conduct the CHOS survey in 2014 differed from those used in 2010, statistical comparisons cannot be drawn between the two. Finally, this chapter is intended to provide an overview of the data that was considered in prioritizing health issues. More information about the issues that were prioritized can be found in Chapter 6. For the complete presentation (databook), see Appendix 1.

Social and Economic Environment

On the majority of health and economic indicators, Chatham County is in better shape than the state as a whole. Looking specifically at economic factors, Chatham County is among the highest-performing counties in the state. Chatham County has the second highest per capita income in the state after Wake County. 12.4% of residents live in poverty, the lowest poverty rate among peer counties and well below North Carolina’s rate of 17.5% (2009-2013).⁵ As of November 2014, Chatham County’s unemployment rate is 3.7%, the lowest in the state.⁷

Figure 11: North Carolina Unemployment by County, November 2014⁷



Note: November 2014 data are preliminary. Prepared by Labor & Economic Analysis Division, North Carolina Department of Commerce 12_2014

Given the county’s proximity to urban centers, it is not a surprise that many who live in the county work elsewhere. Lack of access to local employment was among the most frequently cited problems affecting health in the 2014 CHOS survey as well as focus groups with community members. Though unemployment rates are low, three-fourths of county residents who work leave the county to do so.⁸ The mean travel time to work for Chatham residents is 26.8 minutes, slightly higher than the state average of 23.5 minutes.⁵ These long commutes have potentially negative impacts on health, including heightened risk of traffic accidents and stressors related to driving.

“Employment too... We don’t have nothing. I just got through interviewing in Durham. That’s an hour out of the way, but that’s the only thing to make money.”

-Chatham Parent Focus Group

Looking at educational attainment, 36.7% of Chatham County residents age 25 and older have bachelor’s degrees or higher, compared to 26.8% of North Carolinians of the same age. Level of education is a major determinant of financial well-being in the county. For example, the median annual earnings of those with a bachelor’s degree is, at \$50,725, over three times greater than those who do not have a high school diploma (\$16,666). A Chatham County resident with only a high school diploma earns about half as much (\$25,108) as a college graduate.⁵

Employment status and income are also associated with race. From 2009-2013, the unemployment rate among African-Americans in Chatham County was, at 18.3%, more than twice that of whites (8.3%). Among Hispanic/Latino residents, the unemployment rate was 14.2%.⁵

As mentioned in Chapter 2 of this report, there are also regional differences within the county. For example, while Chatham County’s median household income is approximately \$58,000, it is under \$35,000 for Siler City residents. Siler City residents are, with an unemployment rate of 9.8%, twice as likely to be unemployed as Chatham County residents. Whereas 86% of Chatham County residents age 25 or older have at least a high school degree, only 62% of Siler City residents of the same age do. Nearly 12% have received food stamp/SNAP benefits in the past year, compared to 6.6% of county residents.⁵

Figure 12: Number of Chatham Residents who Leave County to Work⁸

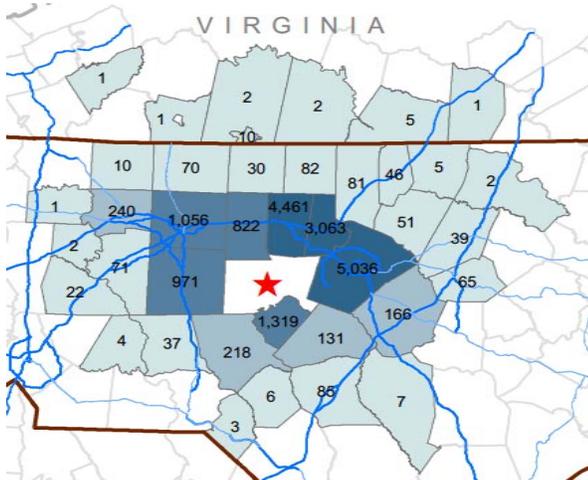


Figure 13: Unemployment Rate by Month, Chatham County and North Carolina⁹

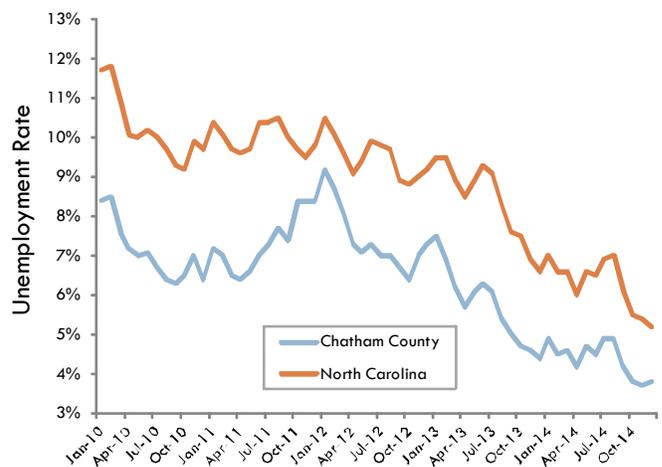
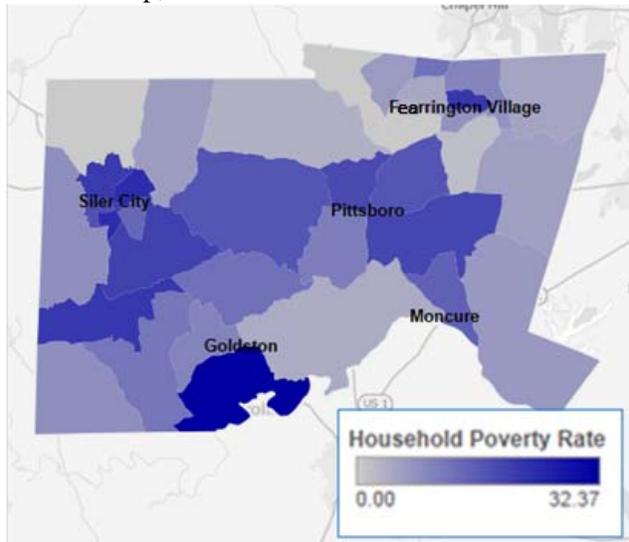


Figure 14: Household Poverty Rate by US Census Block Group, 2010⁵



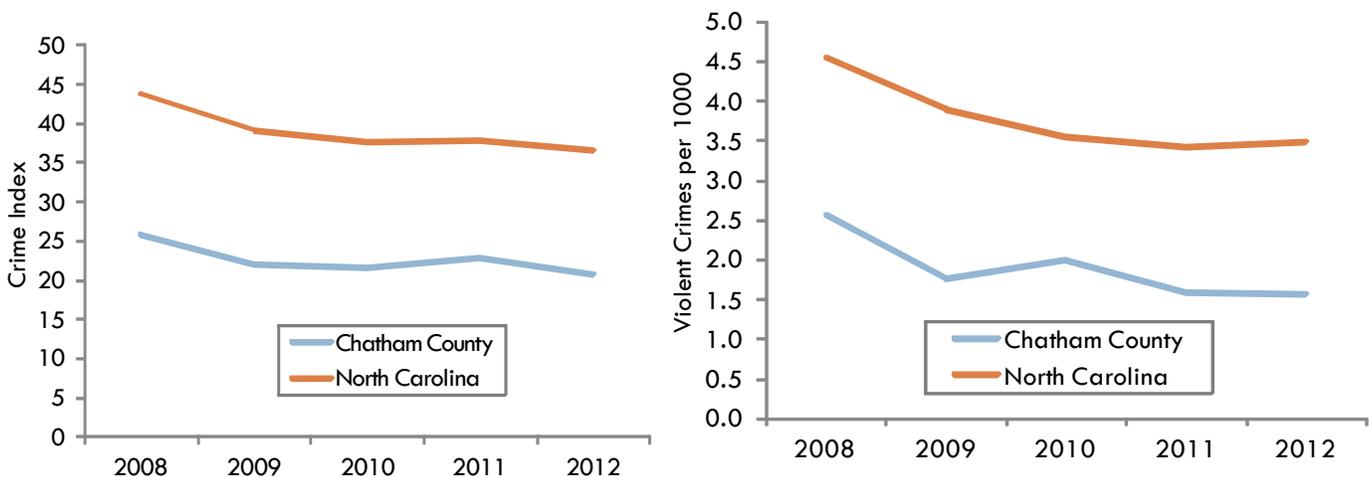
Although the economic disparity between Siler City and the county as a whole is substantial, it would be an oversimplification to consider only Siler City when looking at economically-distressed areas of the county. Pockets of poverty are present across the county, as shown in the map to the left of the percentage of households below the poverty line in each US Census block group.

Looking at other social indicators, such as crime, 97% of CHOS respondents reported feeling safe in their community. Crime rates in Chatham County are lower than the state average and have been declining in recent years, as shown in the charts below.⁹

However, safety was brought up in two youth

focus groups. Young adults in Siler City in particular mentioned being exposed to violence in their communities related to drugs, guns, and other illegal activities and interpersonal conflict. Regarding sexual and dating violence, 5% of Chatham high school students reported being physically hurt by someone they were dating in a way that made them afraid, according to the 2014 YHBS. 24% of those surveyed in the CHOS reported that domestic, dating, or sexual violence was a problem or big problem in their community.

Figure 15: Crime Index and Violent Crimes Reported, Chatham County and NC⁹



Overview of Health Data

Life Expectancy, Leading Causes of Death, and Chronic Diseases

With the well-studied link between economic status and health, it is not surprising that Chatham County’s health outcomes are better than average as well. Both male and female life expectancies at birth in 2011-13, at 79.4 and 83.6 years respectively, are above the state and national averages. In fact, at 81.6 years, Chatham County has the second highest life expectancy at birth of any county in the state. For African-Americans, however, the life expectancy in Chatham County is just 76.2 years.¹⁰ This disparity mirrors the economic differences mentioned above.

At 618 deaths per 100,000 residents, Chatham County has the lowest age-adjusted death rate of any county in North Carolina.

Comparing this report to the last CHA in 2010, the age-adjusted death rate has decreased from 752.9 deaths per 100,000 (2004-2008) to 618.3 deaths per 100,000 (2009-2013). The most recent age-adjusted death rate is the lowest of any county in North Carolina. The majority of the leading causes of death, shown below, are chronic diseases, including the top six. The top two causes of death, cancer and heart disease, have much higher death rates than the other causes and have topped the list for many years.¹⁰ Their death rates tend to be more or less equivalent in the county. In the CHOS survey, chronic diseases were the third highest issue most affecting health in respondents’ communities. According to the CDC, “As a nation, we spend 86% of our health care dollars on the treatment of chronic diseases. These persistent conditions—the nation’s leading causes of death and disability—leave in their wake deaths that could have been prevented, lifelong disability, compromised quality of life, and burgeoning health care costs.”¹¹

Table 9: Leading Causes of Death, Chatham County¹⁰

Rank	Year	
	2009-2013	2004-2008
1	Cancer - All Sites	Diseases of the heart
2	Diseases of the heart	Cancer - All Sites
3	Cerebrovascular disease (including stroke)	Cerebrovascular disease (including stroke)
4	Chronic lower respiratory diseases	Chronic lower respiratory diseases
5	Diabetes mellitus	Diabetes mellitus

The following maps show how Chatham County compares with other counties in the state in terms of chronic disease mortality rates. While these are the leading causes of death in the county, Chatham has relatively low cancer, cerebrovascular disease, and heart disease age-adjusted mortality rates. Diabetes mortality falls in the middle. The maps of Chatham County show death rates related to heart disease, cancer, and diabetes for difference regions of the county. Of note are the disparities in diabetes death rates between east and west Chatham.

Figure 16: Chronic Disease Mortality Maps

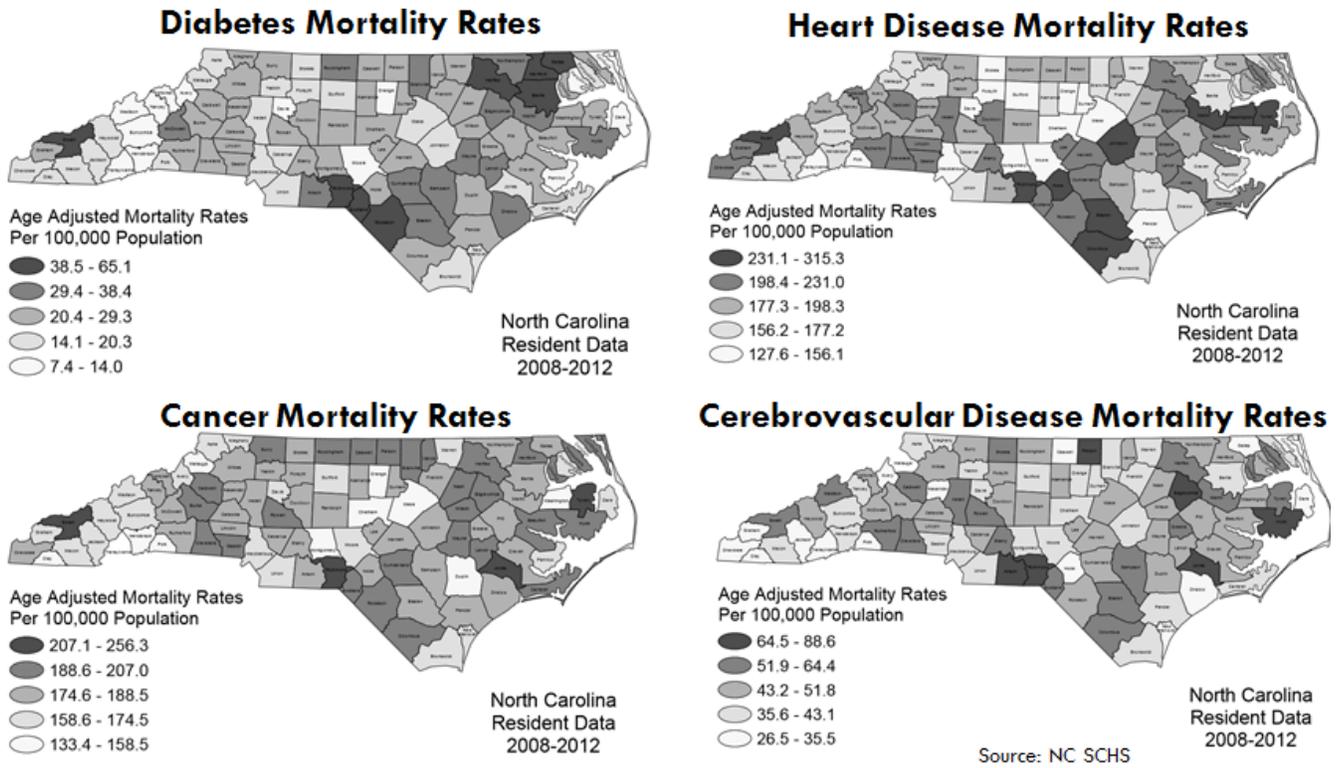
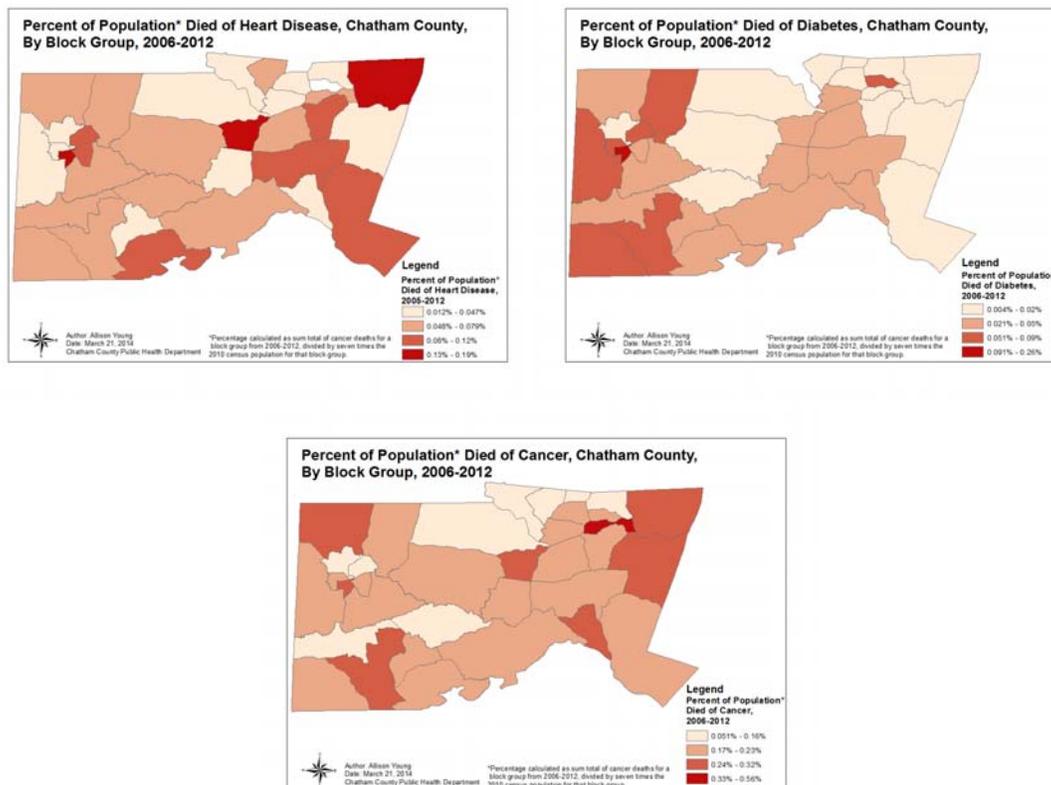


Figure 17: Percent of Population that Died of Heart Disease, Diabetes, and Cancer by Block Group, 2006-2012



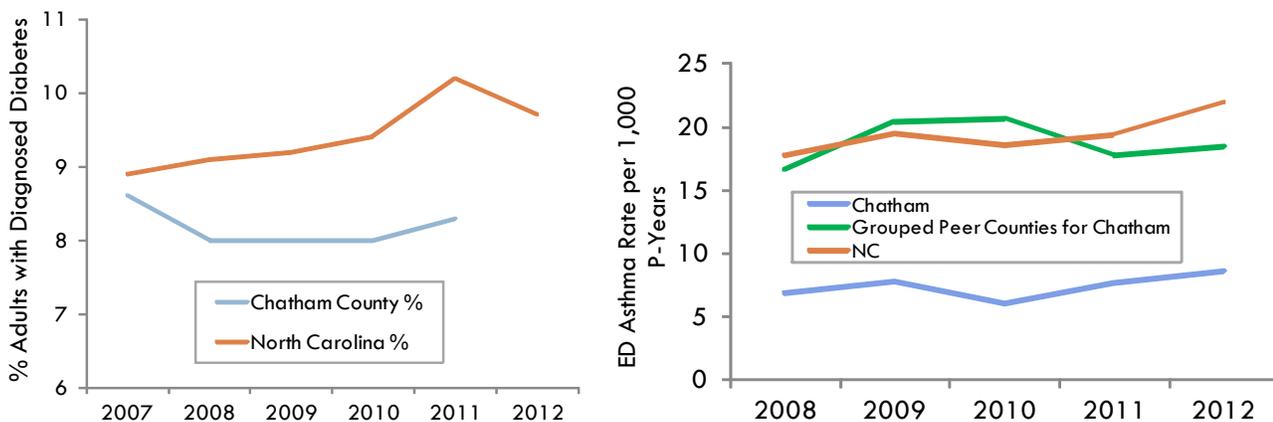
Chronic diseases, and the health and economic burden they create, were discussed in the 2010 CHA as well. In fact, diabetes was a health priority in the last assessment. Gender and racial disparities in all cause, heart disease, and cancer death rates were highlighted, and those disparities remain a source of concern, as highlighted in the box to the right.

In Chatham County from 2009-2013, the age-adjusted death rate among African-American males (1,057 per 100,000) was over twice that of white, non-Hispanic females (518 per 100,000).

Compared to the 2010 CHA, cancer (161.9 vs. 148.2 deaths per 100,000 residents) and heart disease (180.1 vs. 130.9 deaths per 100,000 residents) death rates have decreased. This follows statewide trends and could be the result of several factors, such as improved healthcare, better screening, and effective prevention strategies.

Chatham County’s cancer incidence rate falls slightly below that of the state, as does the percentage of adults who reported having been diagnosed with diabetes, shown in the chart below. Not adjusting for age, the percent of Chatham residents with diagnosed diabetes, as of 2011, is 10.5%. Diabetes can lead to other chronic health conditions or complicate existing conditions.¹² For example, a positive association has been shown between type-1 diabetes and symptoms of asthma.¹³ The emergency department visit rate for asthma is better than both state and peer county rates as well.¹⁴

Figure 18: Percent of Chatham Residents with Diagnosed Diabetes¹² and Rate of Emergency Department visits related to Asthma¹⁴



Quality of Life and Access to Care

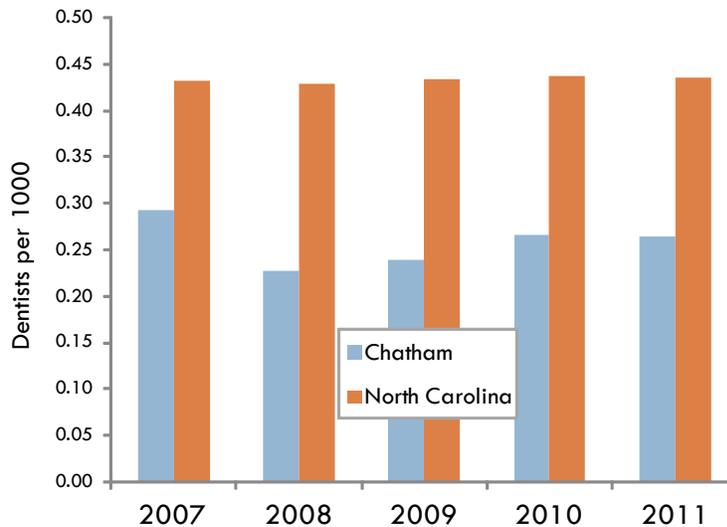
It is also important to consider how county residents view their health and the environments in which they live. In the 2014 CHOS, 82% of respondents described their physical health as excellent, very good, or good. Nearly half were physically active for at least 30 minutes per day on five to seven days in the past week. However, 59% reported their day-to-day level of stress as either moderate or high. Thinking of their communities, residents had an overall positive view of where they live in terms of safety, access to care and services, and other quality of life indicators, as shown in Table 10. Note that since the CHOS data collection methods were different in 2010 and 2014, these results cannot be compared between years.

Table 10: Quality of Life, 2014 Community Health Opinion Survey

Quality of Life Statement	% Total				
	Strongly Agree	Agree	Disagree	Strongly Disagree	Do not Know
1. I can get the healthcare I need near my home.	38%	50%	6%	3%	3%
2. My community is a good place to raise children.	33%	51%	3%	3%	9%
3. My community is a good place to grow old.	36%	54%	4%	2%	4%
4. I feel safe in my home.	46%	52%	1%	1%	0%
5. I feel safe in my community.	42%	55%	1%	2%	0%
6. People of all races, ethnicities, backgrounds and beliefs in my community are treated fairly.	23%	52%	11%	3%	11%

While access to healthcare will be discussed in Chapter 6, it is worthwhile to give an overview in relation to the information presented above. Although the vast majority agreed that they could get the healthcare they needed near their home, there is a shortage of primary care physicians and specialists in the county. For those with sufficient access to transportation, seeking care in neighboring counties is not an issue. However, populations without transportation may face challenges. Chatham County has below average numbers of primary care physicians, registered nurses, and specialists, such as dentists, as shown in the chart below. According to the 2014 CHOS, 12% of adults who responded had not had a dental checkup or cleaning in the last five years.

Figure 19: Dentists per 1,000 Residents⁹



Chatham County compares well to the state on preventive health measures. The county’s immunization rate for children up to three years old is around 95%, among the highest in the state. North Carolina’s county average immunization rate for this age is just 68% as of 2013. Just over half of CHOS respondents reported having received a flu shot in the past year. 73% had been to the doctor in the past year for a physical exam.

Poverty and Health Issues

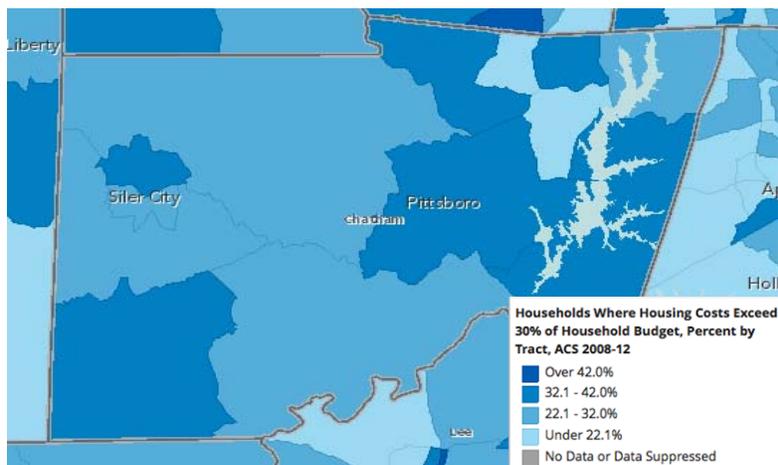
Statistics related to housing, homelessness, and hunger highlight the link between poverty and health. Around 13% of Chatham residents are food insecure, meaning they have trouble purchasing sufficient food due to financial constraints.¹⁵ Although this is lower than the state rate of 19%, this is still an issue that must be addressed by food pantries and other hunger-related programs in the county. Just under 40% of survey respondents said hunger was a problem or big problem in their community, and access to healthy food came up in six focus groups. A little over half of Chatham County public school students applied for free or reduced lunch during the 2012-13 school year.¹⁶

“The disparity between the resources and what it costs [to live, e.g. high rent] is already out of control here.”
 - Parents focus group

Homelessness is directly tied to poverty, poor access to healthcare, and poor health conditions. Unfortunately, there is limited data on the homeless population in Chatham County. There is no homeless shelter in the county, though programs exist to help those in need of housing. However, Chatham County Schools reported that, between 2011 and 2012, 724 students lacked fixed, regular, or adequate nighttime residence. This is among the highest figures in the state, particularly for counties of similar population size. From 2010-2011, 672 students were reported to be in this predicament.¹⁷

Although homelessness is often seen as the most severe housing-related threat to health, living in poor housing conditions can also put residents at risk. From 2007-2011, 16% of households in Chatham had incomplete kitchen facilities, incomplete plumbing facilities, more than one person per room, or a cost burden greater than 50%.¹⁸ According to the 2014 CHOS survey, 28% of Chatham residents believe that affordable housing is a problem or big problem in their community. In Chatham County between 2008 and 2012, the median cost of owner-occupied housing units was \$210,000, compared to the state median cost of \$153,000. In many households in the county, housing costs exceed 30% of the household budget.⁵

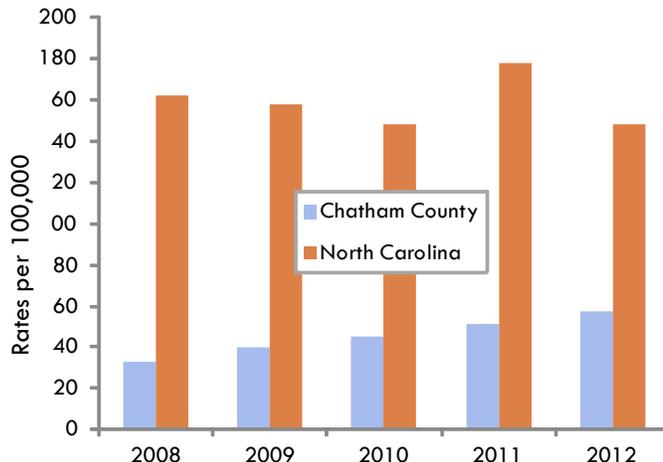
Figure 20: Percent of Households where Housing Costs Exceed 30% of Household Budget⁵



Sexual Health

Sexually transmitted infections, known as STIs or STDs, are on the rise in North Carolina as well as in Chatham County, though the county rates are lower than state and national rates. The most prevalent STI is chlamydia, followed by gonorrhea. As Figure 21 shows, gonorrhea rates have steadily risen in Chatham County in recent years, though the overall numbers remain relatively low. While Chatham County is ranked 74th for new HIV cases in the state, it is important to note that several surrounding counties have among the highest rates in the state. In the 2014 YHBS, 38% of Chatham County high school students said they had had sex at least once, and 9% reported having used alcohol or drugs prior to sexual intercourse the last time they had sex.

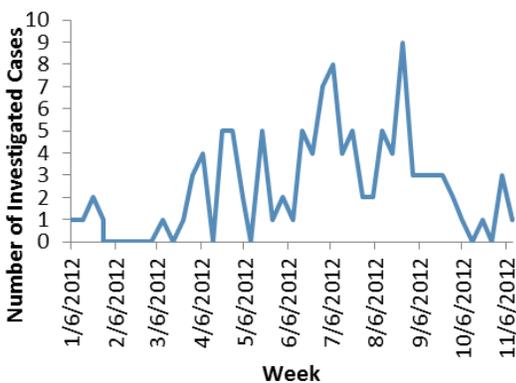
Figure 21: Gonorrhea rates per 100,000, Chatham County and NC¹⁰



Other Health Issues

Chatham County has one of the highest rates of tick borne illness (TBI) in North Carolina. Tick borne illnesses that are endemic to the county include: Rocky Mountain Spotted Fever (RMSF), Southern Tick Associated Rash Illness (STARI), Ehrlichiosis, and Anaplasmosis. Of those surveyed in the 2014 CHOS, nearly half said that TBIs were “a problem” or “a big problem.” In 2012, over 110 cases of tick borne

Figure 22: TBIs, Chatham County 2012



illness were investigated in Chatham County, 70% of which were suspected of being RMSF.¹⁹ Figure 22 shows the investigated tick borne illness cases that year. Tick borne illness cases peak during the summer and early fall. Chatham County, along with Wake, Alamance, and Orange, were the only counties with over 69 cases reported in 2012.

The health department monitors tick borne illnesses in Chatham County. It also undertakes a number of prevention and education measures for tick borne illnesses, including the construction of 13 informational kiosks across the county and distributing tick kits at community events.

Figure 23: Wells in Chatham County²⁰

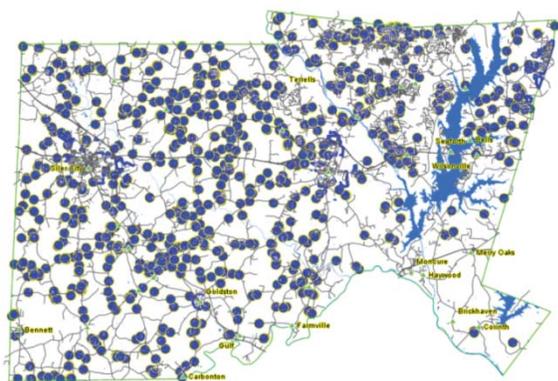


Figure 24: News and Observer Headline on Coal Ash, March 2014



Concern over water quality has been high recently due to several factors. A leaking coal ash dam in Moncure in spring 2014 raised concerns in southeast Chatham. At the time the survey was conducted, residents of Pittsboro and north Chatham had received notices about a seasonal musty taste in their water supply. Fracking has been a hot button issue for a few years, particularly among county residents who rely on wells for their water supply, as shown in the map above.²⁰

Concern over water quality and sewer infrastructure came up in the survey and five focus groups. Water issues mentioned included taste, safety, and quality of water throughout the county. Sewer issues noted included not having county-wide sewer, the failure of existing sewer systems, and the difficulty in obtaining septic permits. Some also linked concern over water quality to planned development.

Another issue is animal welfare. Chatham County has a strong community of animal rights organizations, including animal rescue and adoption groups. In the 2014 CHOS, 28% of surveyed residents reported that animal cruelty or abuse is a problem in the county. Most cited good access to veterinarians and animal health services across the county. Chatham County Animal Services cited the following concerns: Abandoned animals, animal welfare checks, bites from animals owned and strays, space issues in the shelter, rabies, and the number of calls for trap requests. In 2014, the Chatham County Board of Commissioners passed a revised Animal Services Ordinance that included several provisions, such as those in the box to the right, intended to protect the health of Chatham County pets.

The updated Animal Services Ordinance, passed in January 2014 by the Chatham County Board of Commissioners, includes:

- Fines and penalty increases for violations
- Additions to the cruelty section to include more protection for dogs left outdoors
- Humane restraint or tethering requirements for dogs that are tied out

Target Populations

Economic and health disparities among subpopulation of the county were discussed earlier in the chapter. In determining strategies to address the health priorities, it is important to consider populations that may be disproportionately burdened by these issues. Two populations that have been growing in size and may face additional barriers in terms of access to services are the aging population and Latino residents.

As of 2010, 18% of Chatham County residents are 65 or older.⁵

As discussed in Chapter 2, Chatham’s population is aging, with higher concentrations of elderly residents in northeast Chatham and around Siler City. With this population shift comes a greater demand for services for the elderly. While there are many services available across the county, certain areas may have better access. For example, focus group participants pointed to a lack of resources in Siler City, such as a pool, that could benefit elderly residents. Public transportation is also critical for this age group. In 2013, 25% of Chatham Transit’s rides were for medical trips, which logged 43% of the total miles.²¹ Although these trips are not exclusively from elderly passengers, it highlights the importance of access to public transportation for residents who are unable to drive, many of whom are elderly. In 2011, 20% of North Carolina residents had provided regular care or assistance to a friend or family member who had a health problem, long-term illness, or disability in the past month.²²

Service providers that offer assistance to senior residents include: Chatham County Department of Social Services, Council on Aging, the health department, Coventry House, and the Joint Orange-Chatham Community Action Agency. As the elderly population grows, demand for senior services will rise as well.

“The large Hispanic community, some of their needs are not being met because of lack of resources... [and] communication.”

-Chatham Food Access Network Focus Group

Another group that often faces barriers to care is the Latino population. Latino residents are often susceptible to language, transportation, and economic barriers. The highest concentration of Latino residents is in Siler City, which many focus group participants mentioned has a shortage of services and resources in general. However, there are a number of resources in the county that have services tailored to the Latino population. Many of the health department’s Siler City clinic’s patients are of Hispanic ethnicity and utilize interpretation services. A challenge is often getting the word out about available services, particularly with language barriers and different channels of information. Organizations like Hispanic Liaison play an important role in addressing these barriers.

“Our community has the power to be a cross-cultural community that breaks down cultural barriers... It is a community that is growing and has a lot of influence and power.”

-Hispanic Focus Group

Participants in the Latino focus group mentioned a challenge with transportation, especially for those who are undocumented. There is a great deal of concern in the Latino community regarding immigration control (ICE) and checkpoints which, they believe, target Latino residents.

Communication and Partnership

In the process of collecting primary data, communication between county agencies, organizations, and residents emerged as an issue impacting health. Many county residents stated that they did not know much about available services or where to look for information. Agencies and organizations were sometimes unsure where to refer a client and what services were available from other agencies in the county. Access to services takes into account the availability of those services, ability of those who need them to get to them, and awareness about what is available. Communication can increase knowledge and awareness of available services and therefore improve access and identify gaps. Issues related to communication that were mentioned by residents include: Emergency notifications, interagency correspondence, water quality concerns, available services, and the need for a Chatham-specific news channel. The Chatham Health Alliance was established in 2015 in part to address this issue. Local organizations like Chatham Connecting publicize information about local resources, agencies, and volunteer opportunities. Moving forward, improving communication will be critical to addressing the health-related issues facing county residents.

“I would like to know more about what’s happening in Chatham County and TV doesn’t really cover it. Sometimes you’ll see Fearrington village on the weather map if there is tornado near it. And the News and Observer doesn’t really cover Chatham County.”

-North Chatham Focus Group

For more information on the health and socioeconomic issues discussed in this chapter, as well as other issues, survey and focus group findings, and the presentation shown to the Steering Committee before voting on health priorities, see the appendices. For an inventory of health resources in the county, see Appendix 7.

Chapter 5: Prevention and Health Promotion

Looking specifically at health promotion and disease prevention efforts in the county, many of the needs and resources remain similar to those reported in the 2010 CHA. There are a few factors that contribute to this being the case. Notably, the health issues that were deemed most relevant to Chatham County are similar to the last assessment. These issues will be discussed in detail in the following chapter. However, looking at obesity as an example highlights this point. Obesity rates have been rising both locally and nationally for several years, and the field of health promotion has spent much of its time and resources trying to tackle the underlying causes of obesity, especially since it is closely linked to several chronic conditions that can be fatal, like heart disease and cancer. This work will continue and innovate in the years to come.

There has been a small shift in some of the health promotion work around substance abuse. This shift follows trends in the use of different substances. For example, prescription drug use has been on the rise. Therefore, community coalitions and organizations like Chatham Drug Free have worked to educate community members and parents about the importance of safe storage while enacting programs that ensure safe disposal of prescription medicines that are unused. Another substance use issue is the emergence of electronic cigarettes. While the use of other forms of tobacco is on the decline, e-cigarettes are rapidly becoming more popular. Given the potential appeal of e-cigarettes to minors and the fact that they contain nicotine, the addictive chemical found in tobacco products, local health promotion professionals have been educating themselves on the health effects of e-cigarettes and looking into strategies that may mitigate these effects. In November 2014, health promotion coordinators from the health department gave a presentation to the Board of Health on e-cigarettes and their health impacts. Thus, while health promotion efforts are in many ways a continuation of the work from four years ago, local efforts reflect the changes and trends that emerge.

Another reason much of the prevention work is similar is that the main entities that carry out this work in the county are the same. The health department continues to operate clinics that offer screenings for health conditions like cancer and HIV and provide family planning services and other forms of primary care. There is also a registered dietitian on staff and a health promotion team that promotes health in the community. Piedmont Health Services continues to operate clinics in Siler City and Moncure, as well as a senior care facility in Pittsboro. The clinical services they offer are similar to those of the health department, with the addition of dental services. Both Piedmont Health Services and the health department have sliding scale fee programs to make healthcare more affordable to low-income residents. Interpretive services

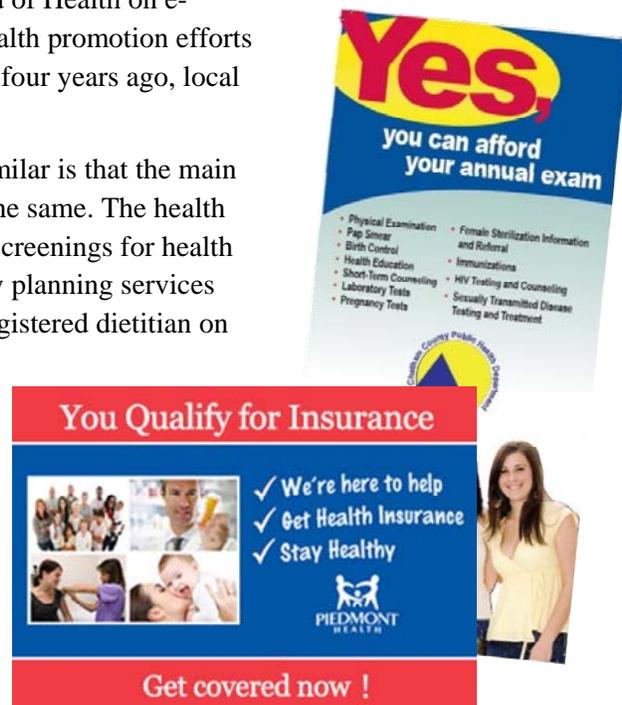


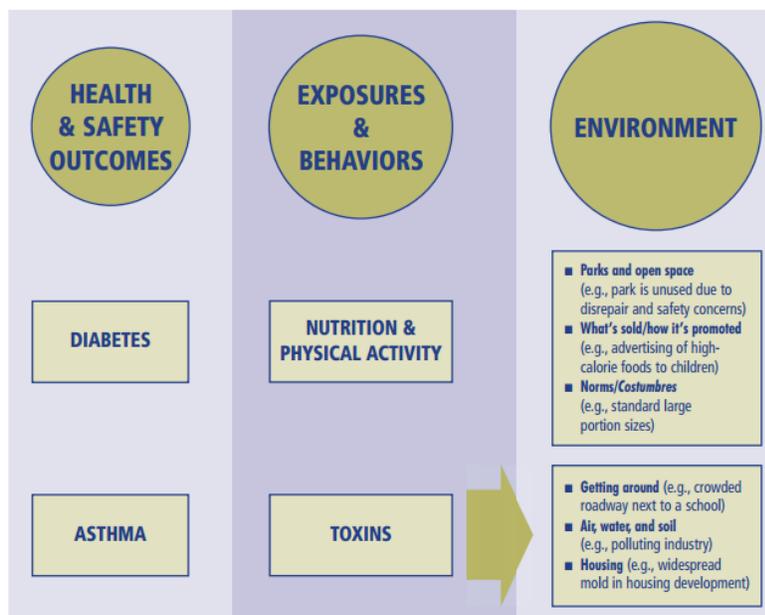
Figure 25: Examples of Health Services at the health department and Piedmont Health Services

at these clinics also reduce language-related barriers that have grown in prevalence with the changing demographic composition of the county. Piedmont Health Services, along with Legal Aid NC, are navigators for the health insurance marketplace, tasked with helping those seeking private insurance enroll for coverage through the program that was established in the Affordable Care Act. Chatham Hospital also offers a number of preventive and clinical services, from diabetes education to specialty care and emergency services. The hospital has trained interpreters as well.

A growing movement in local public health and medicine is the integration of community-driven health prevention efforts with clinical services. In many ways, local public health, specifically the health department, can serve as the link between clinically-focused and community-focused initiatives. While public health has long worked in the community, clinical and hospital work has focused almost exclusively on individual treatment and has rarely extended its efforts into the community. New partnerships are solidifying in Chatham County that are challenging this status quo to the benefit of county residents' health. One example is the Community Health Assessment process itself. For the first time, the health department and Chatham Hospital collaborated on the report. This adds credibility to the process by bringing together two of the main entities in public health and medicine in the county. It also combines resources, offers a platform for the sharing of expertise, strengthens this partnership, and establishes a foundation for future health prevention and promotion efforts.

This foundation has already come to bear fruit. In December 2014, a Chatham County team received a Blue Cross Blue Shield NC grant to attend a training and start a community-centered health homes (CCHH) project. The CCHH model stresses the importance of linking community-focused and clinical efforts. In this model, the focus is on prevention; specifically, how can partners work together to address the underlying factors that lead patients to repeatedly seek clinical care. The Chatham County team

Figure 26: Two Steps in Practice: Identifying Community-Level Factors that Impact Health



Addressing issues in the community environment will have an effect on multiple health and safety outcomes. For example, increasing access to safe parks can affect rates of diabetes, hypertension, depression, and osteoporosis.

Source: "Community-Centered Health Homes," *Prevention Institute* (2011)

includes high-level staff from the health department, Chatham Hospital, Piedmont Health Services, Hispanic Liaison, and the Council on Aging, as well as a county resident with a public health expertise who coordinates the project. The team attended a CCHH training in December and is currently developing collaborative community-focused health prevention activities. For example, the newly-formed Chatham Health Alliance has been integrated into this project.

Additional efforts that bring together public health and non-traditional partners include community planning work. The health department has partnered with town and county planners to look at ways to build health into the community's design by creating opportunities to be active and eat healthily. This includes health department participation in the development of Siler City's Pedestrian Master Plan and transportation boards that have health department representation. This partnership fits with the work described above and will continue to grow in the years to come. As public health continues to take the lead on health promotion and prevention efforts, it is critical that these strong partnerships with both clinical providers and community organizations be fostered and developed.

Chapter 6: Health Priorities

In July 2014, the CHA process culminated in the presentation of data collected and prioritizing of health issues by the Steering Committee. Several factors contributed to the prioritization of health issues being objective and data-driven, while taking into account the perspectives of community members:

- The Steering Committee, which ranked the issues, was made up of a broad group of Chatham residents and organizational leaders and staff that represented different regions of the county, areas of profession, and target populations.
- Prior to voting on health issues, an hour-long presentation of data on over 40 health issues impacting Chatham residents was given to the Steering Committee. This presentation, as well as other key findings, was sent to the Steering Committee for review prior to the meeting. Data sources included quantitative data from the CHOS, secondary data sources, and first-hand accounts from focus group discussions with Chatham County residents. This presentation can be found in Appendix 1.
- Steering Committee members were asked to take the data presented into account when voting on issues.
- Voting was anonymous.

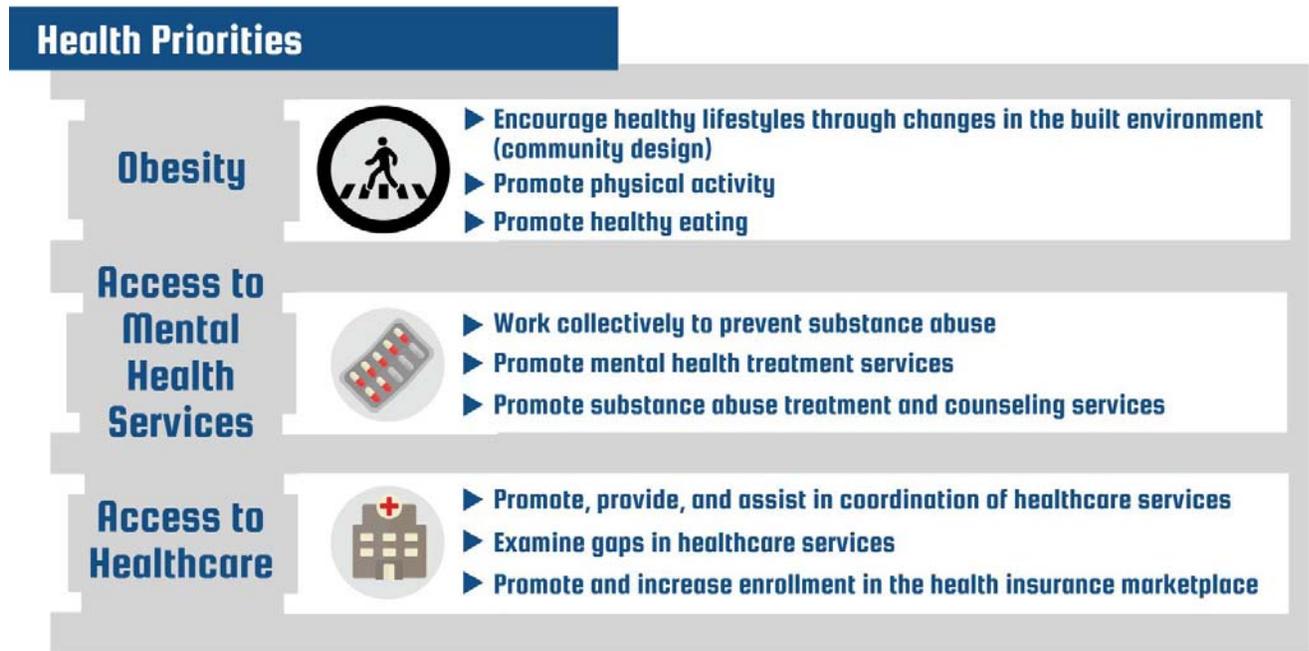
As described in detail in Chapter 3, after going through the presentation and opening the floor to discussion, Steering Committee members voted on their top three health issues based on importance; that is, the degree to which each issue affects the health of Chatham residents. The votes were tallied and a list of the top ten health issues was created. After discussing the list and combining related issues, the Steering Committee voted on their top three from the revised list based on importance and changeability. From this vote, these three health priorities for the 2014 CHA were selected:

Figure 27: 2014 Health Priorities



These health priorities were presented to the Chatham County Board of Health and, after discussion, were approved by the Board of Health with the following bullet points under each issue, which will be used during the Action Planning process:

Figure 28: 2014 CHA Health Priorities and Bullet Points



Obesity

Obesity received the most votes of any health issue and was also a health priority in the 2010 and 2006 CHAs. Furthermore, roughly 80% of North Carolina counties listed obesity as health priority in their most recent health assessments.

Despite the fact that obesity is often singled out as a health concern, it should not be viewed in isolation; obesity is in many ways a proxy for the lifestyle choices or behaviors that make individuals more susceptible to being overweight. The Steering Committee considered both the root causes, or determining factors, of obesity as well as the health issues that can be caused or exacerbated by obesity when prioritizing the issue. Efforts to address these behaviors have become a cornerstone of health promotion work locally and nationally.

These root causes are highlighted in the bullet points above: built environment, physical activity, and diet. Two of these factors, physical activity and diet, are, to an extent, the products of personal lifestyle choices. However, individuals’ behaviors are also influenced by their surroundings, and there are a number of factors within the community that influence the health decisions that people make. For example, people are more likely to walk if they live close to a greenway or in neighborhoods with pedestrian infrastructure like sidewalks and crosswalks.²³ Even in neighborhoods with sidewalks, those who do not feel safe walking or

“The parks were built, but there’s really nothing there, not even a basketball court.”
-Sheriff’s focus group

biking will be less likely to do so. This is where the built environment, or community design, ties into health. A community that creates opportunities to be physically active and encourages healthy eating choices through access to healthier options will stand a better chance of addressing the obesity epidemic. As the county continues to grow and new developments are planned, looking into ways to build health into the community design, through strategies like building parks and schools within walking distance to residential areas, will be critical to improving these trends.

In both surveys and discussions with Chatham County residents, barriers to physical activity and healthy eating were mentioned frequently. In the 2014 CHOS survey, where obesity was the most frequently mentioned threat to health, residents pointed to several changes in the built environment that encourage them to be more active. Nearly half of respondents said more parks, trails, and greenways would help them to be more physically active. Having stores within walking distance, such as grocery stores with healthy food options, could encourage both physical activity and healthy eating.

Trends in physical inactivity, though better than the state average, highlight competing priorities during leisure time. The chart below shows adult physical inactivity in Chatham County and North Carolina. In Chatham County from 2007 to 2011, between 20% and 22% of adults reported no leisure time physical activity in the past month.¹² In the 2014 CHOS, 10% of respondents had not been physically active for at least 30 minutes on one day in the past week, while 45% reported being physically active for at least 30 minutes five or more days. This includes physical activity during work hours. Only one respondent had a child who walked, biked, or skateboarded to school, while many mentioned that was not feasible.

Figure 29: Percent of Chatham County and NC adults reporting no leisure time physical activity¹²

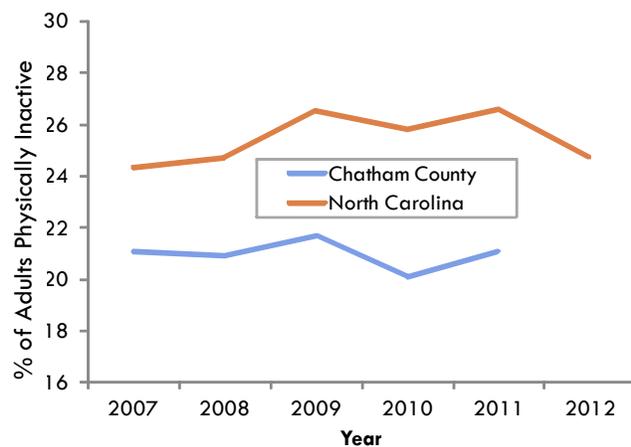
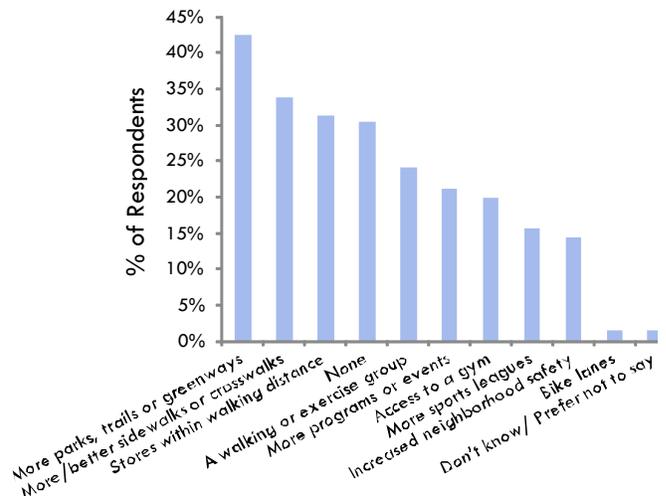


Figure 30: Which of the following would help you to be more physically active? (2014 CHOS)



Looking specifically at middle and high school youth, trends in physical activity are somewhat concerning. In the 2010 YHBS, 34% of students reported being physically active for at least 60 minutes every day during the past week while just 6% reported achieving that level of physical activity no days during the past week. In 2014, the first figure decreased to 31% while the second increased to just over 8%. In order to account for this trend, it is important to look at potential factors that could result in lower levels of physical activity among students. For example, trends in other activities may highlight competing priorities during leisure time. While the percent of students who watched television three or

more hours per day decreased from 34% to 28% over this period, the percent of students who used computers three or more hours per day increased from 26% to 41%. With obesity rates rising along with the emergence of new technologies, there may be an increased need to ensure sufficient time is spent being physically active.

In addition to physical activity, nutrition is an important factor influencing obesity rates. A proper diet is linked to lower risk of obesity and several chronic diseases. Though diet is heavily influenced by personal choice, it also depends on access to healthy foods and knowledge of options that are healthiest.

Certain regions of the county, like southwest Chatham, are located far from supermarkets or other stores with a variety of healthy options. The map below shows food stores across the county.

“Why does it cost so much to eat healthy? I mean I know [to eat healthy], but then you can go buy junk food dirt cheap. And this is why a lot of people are having a hard time feeding their children.”

-Parents focus group

note that the towns of Pittsboro and Siler City, as well as northeast Chatham, have the greatest access to stores with foods like fresh fruits and vegetables, lean proteins, and whole grains that are key to a healthy diet.

Statistics related to nutrition also show room for improvement. According to the 2014 CHOS survey, 78% of Chatham adults eat less than the recommended

five servings of fruits and vegetables daily and 45% drink at least one sugar-sweetened beverage each day. These habits are often passed on to children, with 12% of middle and high school students reporting not eating vegetables in the past week (up from 10% in 2010) and 78% having had at least one regular soda in the past week (down from 83% in 2010). While 31% of Chatham high school students described

Figure 31: Percent of Students who Used Computers 3 or More Hours per Day (2014 YHBS)

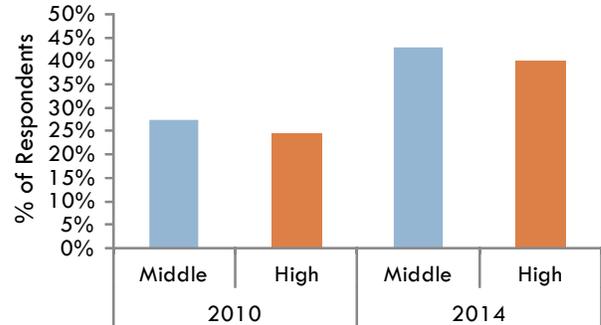


Figure 32: Healthy Food Access in Chatham County

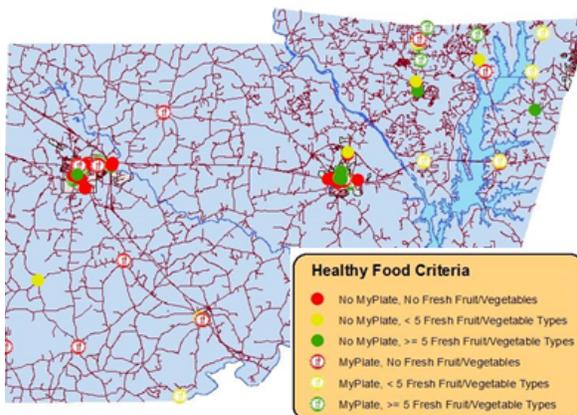
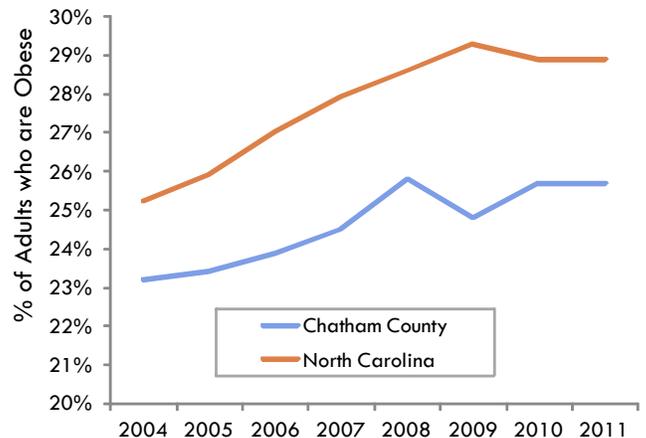


Figure 33: Self-reported Obesity Rates, Chatham County and North Carolina (CDC)



themselves as overweight, nearly half reported trying to lose weight. Nutrition and body image can play an important role in both physical and mental health.

Thus, the factors mentioned above, specifically physical activity, nutrition, and the influence of the built environment, lead to concerning trends in obesity

rates. Currently, reliable data on obesity rates is difficult to acquire. Figure 33 shows self-reported trends in adult obesity rates. While the percent of Chatham adults who are obese is below the state rate, around one-fourth of Chatham residents are obese, and this figure has been steadily increasing over the past several years.

Given the link between obesity and the leading causes of death in Chatham County and its impact on both physical and mental well-being, innovative structural and policy-level interventions targeting obesity will be critical to improving the health of Chatham County residents. The Community Health Improvement Plan, or Action Plan, and the health department's strategic plan will define these strategies and offer a vision for the county over the next three years.

Access to Mental Health Services

Unlike obesity, mental health was not prioritized in the 2010 CHA. While several factors may contribute to why access to mental health services rose in importance this cycle, data on youth mental health was particularly troubling to many Steering Committee members. From the survey of Chatham County students, 8% of high school students and 6% of middle school students reported having attempted suicide in the past 12 months. In 2010, only 4% of high school students reported attempting suicide in the past twelve months. Over 14% of high school students had seriously considered attempting suicide in the past 12 months, compared to 10% in 2010. In both North Carolina

"The patients are stuck, we are all stuck. It is like going down a dead end."

–Hospital Focus Group

and the US, this rate was 17%.²⁴ Thinking of the number of families who could be impacted put the issue of mental health and youth suicide prevention into perspective.

Overall, from 2007-2011, the age-adjusted suicide rate in Chatham County was 13 per 100,000 residents, slightly above the state rate of 12.1 per 100,000.¹⁰

Mental health was also a topic of discussion in nearly half of the focus group discussions. In addition to a perceived stigma associated with accessing mental health services, lack of knowledge of where people needing mental health or substance abuse services could go to get them was identified as a serious issue.

"People come up and ask me what to do to lose weight... People don't know what to do. Eat healthy and get up and exercise. Lifestyle change."

– Sheriff's focus group

7.6% of Chatham high school students and 5.9% of Chatham middle schools students surveyed had attempted suicide in the past twelve months. 12.6% of high school and middle school students had seriously considered attempting suicide during that period. (2014 YHBS)

"Mental health is a big unmet need in this community. I think people don't know where to go and there may not be very much options for people in Chatham."

–CFAN Focus Group

Figure 34: Where would you refer someone in need of mental health services?



While just under 30% of CHOS survey respondents cited access to mental health services as a big problem or problem, it was the tenth most-frequently mentioned issue most affecting health. Furthermore, 63% surveyed did not know where to refer someone for mental healthcare. Those who said they did know where to refer someone were often vague in the responses, citing “the doctor” or “the

clinic.” This uncertainty is likely due in part to high rates of turnover in mental healthcare providers. As a result of mental healthcare reform at the state level that began in the early 2000s, Chatham County has had somewhat of a revolving door of mental health safety net providers; in the last five years, the county has had three different providers. In December 2014, Trinity Behavioral Healthcare, formerly Simrun, became the main provider of mental health services in the county, with offices in Siler City and Pittsboro.

Without clarity in terms of where to access care, those in need of treatment often go without or seek care from other healthcare providers who lack mental health specialists, such as Chatham Hospital. This can lead to challenges for these providers and result in unmet needs for their patients, as the quote on the previous page exemplifies. Those with adequate access to transportation and financial resources can seek care where available. However, those with financial and other barriers are likely to fall through the cracks.

Substance abuse is closely tied to mental health, and many of the access issues for treatment are similar as well. In the CHOS survey, over half of respondents did not know where to refer someone for care.

Substance abuse was an issue brought up in half of the adult focus groups and in two of the three youth focus groups, covering such topics as illegal drug use, alcohol and prescription drug abuse, and inhalants.

“A health concern in Chatham County is prescription drugs. It’s a huge epidemic... not just here, it’s everywhere. It is nationwide.”
 -Sheriff’s Focus Group

A concerning issue closely tied to mental health is prescription drug abuse, which has been on the rise in Chatham County and is increasing as a threat to the health of both adults and children. In North Carolina, if current trends continue, prescription drug poisoning will overtake motor vehicle accidents as the leading cause of accidental death by 2017. Locally, the number of disciplinary cases in Chatham County Schools involving prescription drug offenses increased by over 700% from 2010-11 to 2012-13.¹⁹ In the

Figure 35: Unintentional Poisonings, ED Visits¹⁴

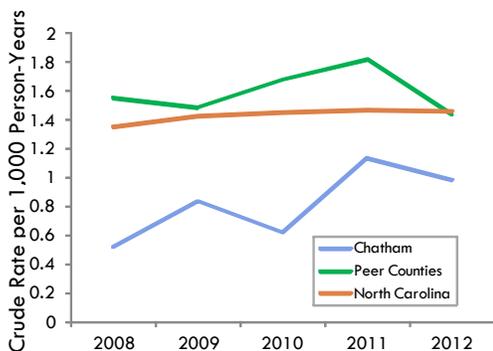


Figure 36: Headline from Forbes Magazine highlighting overdose in Chatham, Dec. 2014

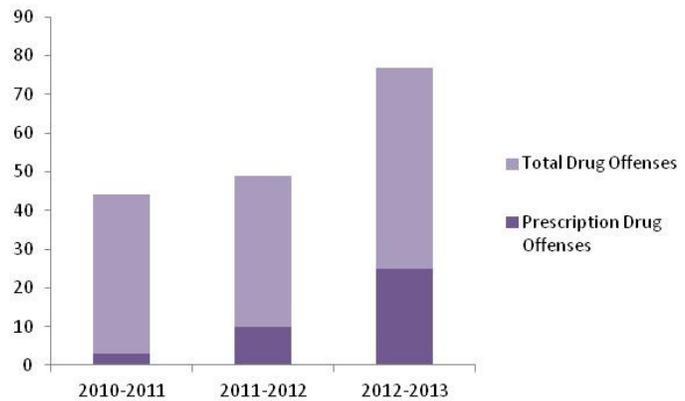


2014 YHBS, over 11% of high school students reporting using prescription drugs without a prescription. In a focus group with Sheriff’s officers for the 2014 Community Health Assessment, many officers specifically mentioned their growing concern around prescription drug abuse, noting it was a problem both locally and nationally. Medical providers expressed concern over proper medication use once patients leave their care.

Poisoning and overdose have also been on the rise, though rates of emergency department visits related to these issues are lower than North Carolina and peer counties. From 2010 to 2012, the rate of emergency department visits due to unintentional medicine or drug overdose among Chatham residents increased from 0.47 visits per

1,000 person-years to 0.70 visits per 1,000 person years. Over that same period, the rate of emergency department visits due to unintentional poisoning increased from 0.61 per 1,000 person-years to 0.99 per 1,000 person years. Since, statewide, an estimated 80% of unintentional poisoning deaths are related to prescription drugs, the need to target this issue is more pressing than ever. Because of this, prescription drug misuse and abuse was highlighted as an “Emerging Issue” in the 2013 Health of Chatham report.

Figure 37: Drug-related Disciplinary Cases in Chatham County Schools¹⁹



11.4% of Chatham high school students have used prescriptions drugs without a prescription, compared to 17.2% of North Carolina high school students.²⁴

While numbers are steadily rising, much of the abuse goes undocumented. Prescription drug abuse can be prevalent in both low-income and affluent households. Programs exist to monitor and discard prescription drugs, including Chatham Drug Free’s Safe Home project and mobile drop-off locations for prescription drugs. With prescription drugs becoming more and more common, efforts such as the Safe Homes project are important for the safety of both adults and children in Chatham County.

Other drug use remains an issue as well. According to the 2014 YHBS, 17% of Chatham high school students use tobacco products, including 8% who use chewing tobacco, dip, or snuff. A quarter of high school students have smoked at least once and 12% currently smoke.²⁴ As of 2010, one in five Chatham adult residents smokes at least 100 cigarettes per year.¹¹

An emerging issue is the use of electronic cigarettes, or e-cigarettes. Though e-cigarettes are often seen as a safe alternative to cigarettes, there is no evidence to support this. For one, e-cigarettes contain nicotine, the highly addictive chemical found in cigarettes, as well as other harmful toxins that can be inhaled through secondhand vapor as well. They are not currently approved as a smoking cessation aid, and many of the sweet flavors sold can be especially appealing to youth. Since 90% of smokers begin

Figure 38: The Components of a Typical E-Cigarette



Source: Nosmoke.org

smoking when they are teenagers, this is particularly concerning. Though local data on e-cigarette use is not yet available, uptake appears to be increasing as new stores specializing in e-cigarettes are gaining a presence in the county.

Illegal drug use was the seventh highest issue affecting health in the CHOS survey and 40% mentioned that illegal drug use was a problem or big problem in their communities. As referenced previously, there was some uncertainty about where residents could go for treatment. Thus, while the number of Chatham residents served in alcohol and drug treatment centers is on the rise, increasing from 16 in 2008 to 34 in 2012,⁹ this may not reflect the true scale of the problem and only capture the most severe cases.

Access to Healthcare

Like access to mental health services, access to healthcare in general was selected a health priority by the Steering Committee. Although access to healthcare was not a health priority in the 2010 CHA, lack of adequate and affordable health insurance was prioritized. Given the overlap between these issues, particularly at the local level, and the emergence of new insurance options through the Affordable Care Act, there is some similarity in the strategies that address these issues.

While the percent of Chatham residents with health insurance has risen since the implementation of the health insurance marketplace, there are still many who struggle to get healthcare. With Chatham County's proximity to urban centers with hospital systems, many residents travel to Chapel Hill, Durham, and Raleigh for doctor's visits.

For those with barriers such as limited access to

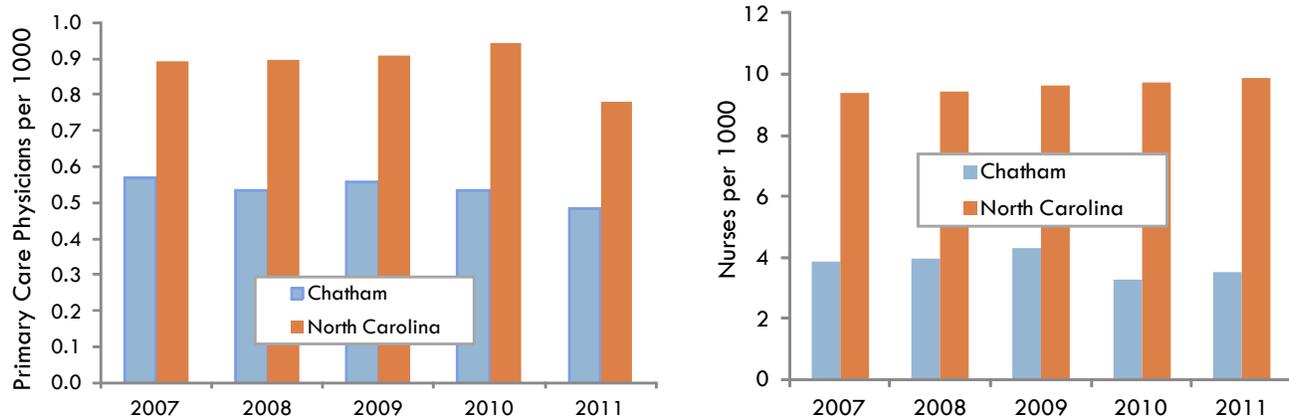
transportation, this may not be feasible. Some services, such as child birthing centers, are not available at all within the county. In Siler City, the absence of an urgent care clinic leads many residents to the emergency department for non-emergencies. Despite these issues, 88% of CHOS respondents strongly agreed or agreed that they could get the healthcare they need near their home and 73% had been to the doctor for a wellness checkup or physical in the past year. Regarding preventive health, Chatham has among the highest immunization rates for children under 36 months in the state. Around half of those surveyed had gotten a flu shot in the past year.

Compared to the state, Chatham County has lower numbers of primary care physicians and registered nurses per capita. Lack of specialists also came up in focus group discussions as a threat to health. These low numbers are likely due in part to high concentrations of medical professionals in Durham, Chapel Hill, and Raleigh. However, as mentioned, this could have an impact on those with transportation or financial barriers.

“There is no place in Chatham County that you can have a baby in a planned way. It is not ideal to just show up in the ER and have a baby.”

–Hospital Focus Group

Figure 39: Primary Care Physicians and Registered Nurses per 1,000 residents⁹



Issues around access to adequate and affordable healthcare came up in all adult focus groups. One participant pointed out how poor access to care and utilization of preventive health services can lead to serious health conditions. Hospital staff mentioned patients who came to the emergency department for routine health services because of outstanding bills at other clinics or other barriers to primary care.

The percent of uninsured Chatham County adults has declined since the implementation of the Affordable Care Act. In the 2014 CHOS, 18% adults age 18 to 64 were uninsured. Of those who privately purchased health insurance, around 35% said they purchased it through the health insurance marketplace. Despite these improvements in coverage, certain groups, like undocumented residents and low-income residents who do not qualify for Medicaid or subsidies, still may struggle to find affordable coverage. This issue came up in several focus groups. Even with insurance, the cost of healthcare can be daunting, with 11% of those surveyed saying there was a time in the past twelve months when they needed to see a doctor but could not because of cost.

Safety net clinics, like Piedmont Health Services and the health department, have programs with sliding scale fees to help those who fall through the cracks. The state legislature is currently looking at different models of healthcare delivery for those with Medicaid. Any policy changes they may enact could have a profound impact on clinics like these and other providers. Whether or not the state expands Medicaid will also affect access to healthcare for many county residents. Healthcare both nationally and within the state is likely to change significantly and the role of public health to target prevention will become even more important in the years to come.

“I hear a lot of people still talking about health insurance. That even though it’s supposed to be reduced or subsidized or whatever. Even when I went to do it I couldn’t afford it, you know if I had a better job, then maybe so. It’s just really hard to take care of that. It’s supposed to be better for us and everything, for some of us it’s still not there.”

-Parents Focus Group

Future Plans

In examining these health priorities, it is clear there is much work to be done. In February 2015, the CHA Steering Committee spun off into the creation of the Chatham Health Alliance. The Chatham Health Alliance will serve as the coordinating coalition for health-related efforts in Chatham County. The Alliance will determine what strategies to adopt to address the health priorities, and then work collectively to make improvements in the three priority areas. Ultimately, the goal of the Chatham Health Alliance will be to work together to improve the overall health of Chatham County residents and reduce barriers to healthy living. Like the Steering Committee, the diverse membership of the Alliance will enable it to pursue a broad array of strategies to accomplish this goal.

The health promotion team of the health department will coordinate with the Dissemination of Results Subcommittee to share the findings of the CHA with the community. This will be accomplished through a multimedia approach, including sharing findings on the health department website, social media, the radio, newspaper, community forums, presentations to local policymakers, and other means as available.

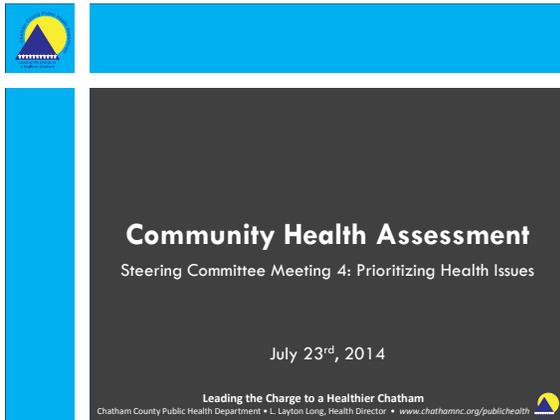
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22. NC SCHS. Annual Survey Results: Behavioral Risk Factor Surveillance System (BRFSS). (2012). at <http://www.schs.state.nc.us/data/brfss/survey.htm>
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Appendices

Appendix 1: CHA Complete Findings Presentation/ Databook



Summary of Data

- Primary
 - 2014 Community Health Opinion Survey (CHOS)
 - Focus Groups
- Secondary
 - 2014 Youth Health Behavior Survey (YHBS)
 - Local, state, and national sources

Presentation Overview

- Process and Background
- Summary of Data Sources
- Description of each Health Issue

2014 CHOS

- Gives residents' perspectives on health issues in their communities
- Random survey of Chatham households
- Census blocks randomly selected and weighted by population
- Conducted door-to-door in March 2014
- Total of 190 surveys completed
- Margin of error within $\pm 10\%$
- Response rate was 63%

Prioritization Process

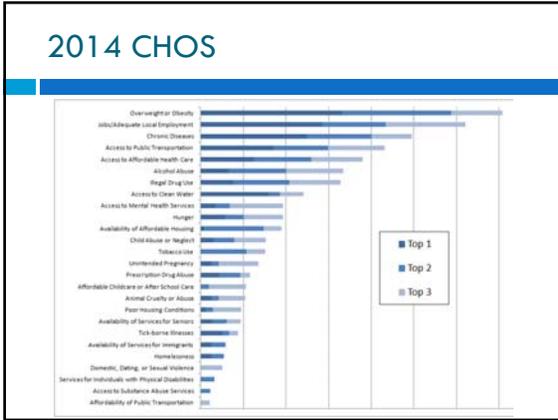
1. Review data on each health issue
2. Briefly discuss findings as a group
3. Individually vote top 3 issues based on importance
4. Using votes, narrow list to top 10
5. Briefly discuss/review top 10 issues
6. Individually vote top 3 issues based on importance and changeability
7. Tally votes and select top 3 issues priority health issues

2014 CHOS

Community Perspective

- Big Problem
- Problem
- Not a Problem
- Don't know

Appendix 1: CHA Complete Findings Presentation/ Databook



- ### Secondary Data Sources
- 2014 Youth Health Behavior Survey (YHBS)
 - 2013 Youth Risk Behavior Surveillance System
 - US Census
 - American Community Survey
 - NC LINC (Log Into North Carolina)
 - NC State Center for Health Statistics (SCHS)
 - Community Transformation Grant (CTG) Reports
 - NC Department of Commerce
 - NC Health Information Portal
 - CCPHD data
 - NC Institute of Medicine (NCIOM)
 - CCPHD Healthy Food Vendor Report
 - Centers for Disease Control and Prevention (CDC)
 - Behavior Risk Factor Surveillance System (BRFSS)
 - County Health Rankings
 - UNC School of Social Work, Child Welfare
 - US HUD (Housing and Urban Development)
 - NC Homeless Education Program
 - NC Detect
 - Chatham Transit Network Revenue Data Report
 - United Way Community Resource Guide
 - ChathamGIS.com
 - Chatham County Schools
 - 2012, 2013 State of the County Health (SOTCH) Report
 - NC DHHS
 - feedingamerica.org
 - Communitycommons.org
 - NC Department of Instruction
 - NC Electronic Disease Surveillance System

- ### Focus Groups
- 10 focus groups with adults
 - Chatham Food Access Network
 - Chatham Hospital Staff and Network
 - Eastern Council on Aging
 - Hispanic/Latino Church Group
 - North Chatham Residents
 - Parents of Young Children
 - Sheriff's Office
 - Siler City County Staff
 - St. Bart's
 - Western Council on Aging
 - Youth/Adolescent Focus Groups
 - Chatham Together Mentor Program
 - Horton Middle School YMCA After School
 - Northwood High School Healthful Living Course
- #### Process of Identifying Issues

 - Identified groups to conduct focus group with
 - Conducted focus groups
 - Took notes
 - Listened to focus group recordings and identified themes
 - Compared themes across focus groups
 - Identified most frequently mentioned themes

Secondary Data Sources-Example

Leading Causes of Death Chatham, 2008-2012

Rank	Cause
1	Cancer - All Sites
2	Diseases of the heart
3	Cerebrovascular disease (including stroke)
4	Chronic lower respiratory diseases
5	Diabetes mellitus
6	Alzheimer's disease
7	Other Unintentional injuries
8	Pneumonia & influenza
9	Motor vehicle injuries
10	Nephritis, nephrotic syndrome, & nephrosis

NC SCHS

- ### Focus Groups
- #### Adult Top Issues (not in order of importance)

 - Mental Health
 - Substance Abuse
 - Access to Healthy Foods
 - Poverty
 - Chronic Disease (including obesity)
 - Accessibility and Affordability of Transportation
 - Unemployment
 - Impact of Development
 - Water and Sewer Infrastructure
 - Built Environment and Safe Places to Be Active
 - Geographic Divide
 - Communication
 - Knowledge to Make Healthy Choices
 - Activities for Youth

Youth Top Issues (not in order of importance)

 - Mental Health
 - Substance Abuse/Tobacco
 - Access to Healthy Foods
 - Unemployment
 - Impact of Development
 - Built Environment and Safe Places to Be Active
 - Educational Opportunities
 - Obesity
 - Safety
 - Relationships/Communication/Bullying
 - Risky Sexual Behavior/STI/Unintended Pregnancies
 - In-county Activities for Youth

Health Issues

Appendix 1: CHA Complete Findings Presentation/ Databook

Growth, Jobs, and Poverty

Geographic Divide

Modeled Level of Need

State Center for Health Statistics, CTG Project

Median Household Income

2010 Census

"There are two separate sides of the county: the east and the west."
-Sheriff's Focus Group

"One thing I like about Chatham County is that we have a very, very diverse community."
-Hispanic Focus Group

Health and Wellness Priority Areas

CTG Region 5 "Health in Planning" Report

Chatham County Population Estimates

Chatham County Population

US Census Estimates (NC LINC)

Chatham County Population by Census Block Group

2010 Census

Unemployment

Unemployment Rate

NC LINC

➤ As of April 2014, Chatham County had the lowest unemployment rate in the state at 4.2%

"I know a lot of people, teens, that want jobs but cannot find them."
"My biggest thing is getting out of here, Siler City."
-Youth Focus Group

Unemployment Rate

2010 Census

Population Growth

What impacts can development have on the health of Chatham County residents?

- Access to care
- Economic opportunity
- Need for new and expanded services
- Changes in the built environment

Population Growth

CTG Region 5 "Health in Planning" Report

Healthcare Building Permits Issued: Siler City & Siler City

Chatham County Central Permitting

Local Employment

76% of employed county residents work outside of county

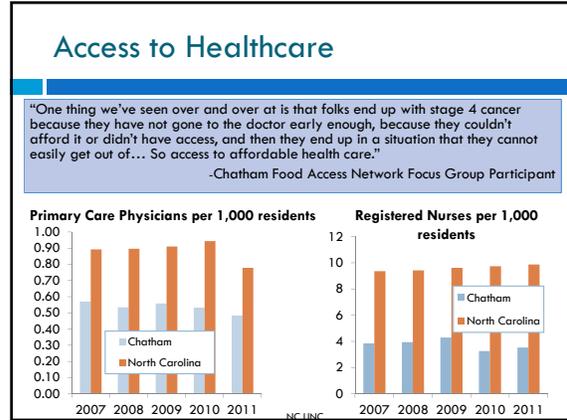
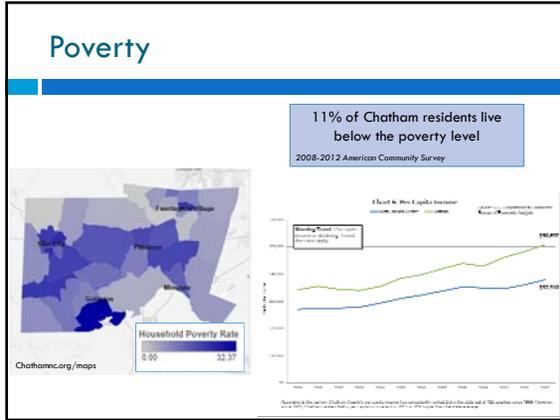
Survey says...
Lack of jobs was the second highest issue affecting health in respondents' communities and 4% were unemployed

"Employment too... We don't have nothing. I just got through interviewing in Durham. That's an hour out of the way, but that's the only thing to make money."
-Chatham Parent Focus Group

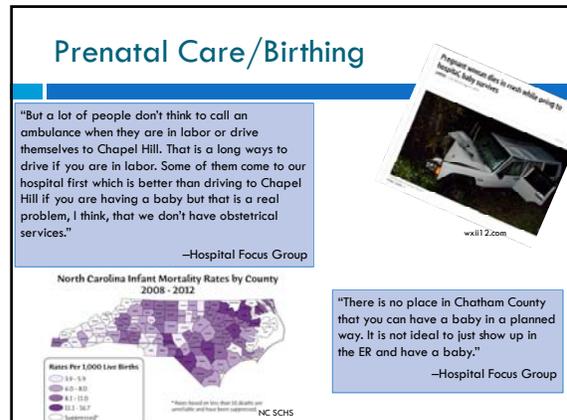
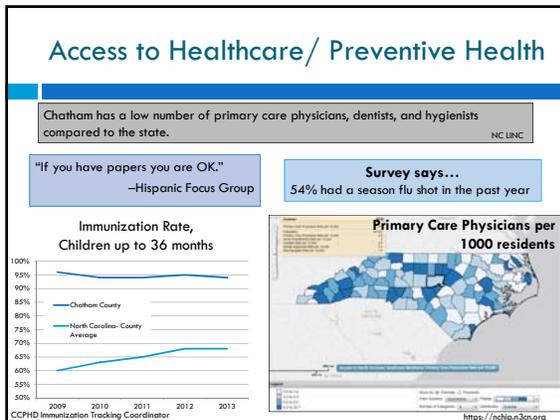
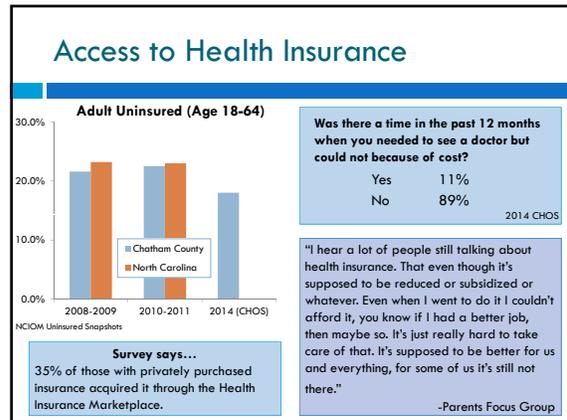
Where Chatham Residents go to Work

Access NC, NC Dept of Commerce

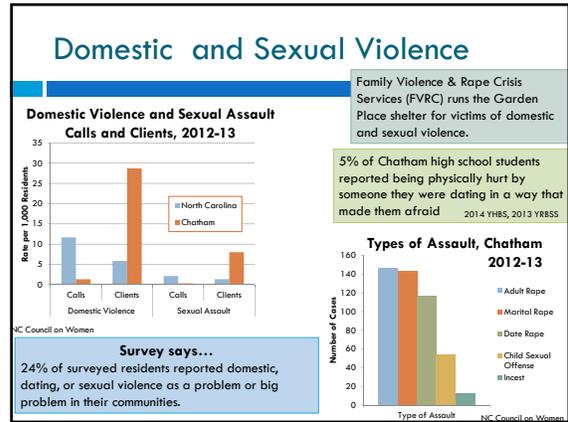
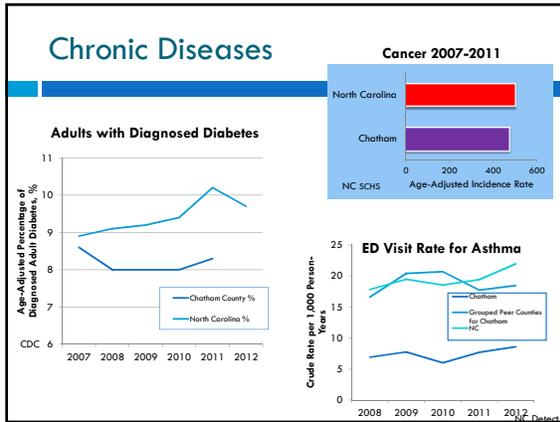
Appendix 1: CHA Complete Findings Presentation/ Databook



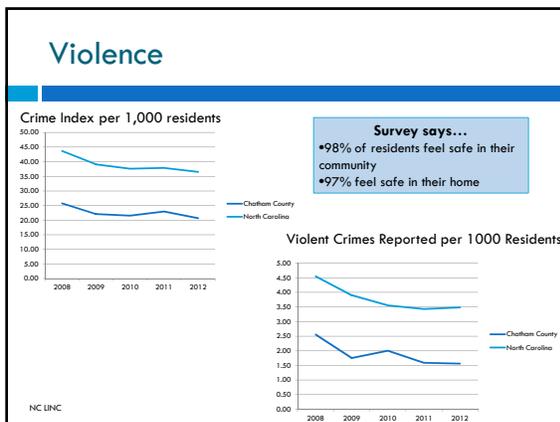
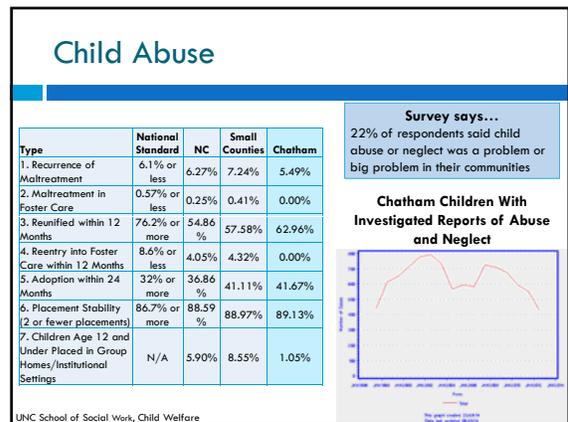
Access to Healthcare and Insurance



Appendix 1: CHA Complete Findings Presentation/ Databook



Crime, Domestic Violence, and Child Abuse



Housing and Homelessness

Appendix 1: CHA Complete Findings Presentation/ Databook

Homelessness

The Chatham Housing Authority oversees federal funds to help qualified low-income residents with their rental payments.

Survey says...
26% of Chatham County residents believe homelessness is a problem or a big problem.

Chatham County Schools reported between 2011 and 2012, 724 students lacked fixed, regular or adequate nighttime residence.

NC Homeless Education Program

Access to Services

Poor Housing Conditions

Chatham (CH) Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities: 15%

Survey says...
34% of Chatham residents define poor housing conditions as a problem or big problem in their communities

RANK 1-25 26-50 51-75 76-100 SC

US HUD, 2006-2010

Transportation

Households without Cars

"In a perfect world it would be free transportation all over the county, of course. But, you know, we do have a free transportation service, but it is very small, and not large enough to put any kind of a dent in the problem."
-Chatham Food Access Network Focus Group

Survey says...
Access to public transportation was the fourth biggest issue affecting community health

"I wouldn't be able to be here [at the Council on Aging] if the bus didn't come and get me."
-ECOFA Focus Group

Chatham Transit Rides by Destination: Top 3

1. Siler City- 38,124
2. Pittsboro- 15,963
3. Chapel Hill- 4,435

Chatham Transit Network Revenue Data Report

Affordable Housing

Percent of Households Where Housing Costs Exceed 30% of Household Budget

Percentage of Households that Spend Over 30% of Their Income on Housing by Income

Household Income American Community Survey, 2008-2012

Services for Latinos

"The large Hispanic community, some of their needs are not being met because of lack of resources... [and] communication."
- Chatham Food Access Network Focus Group

"Our community has the power to be a cross-cultural community that breaks down cultural barriers... It is a community that is growing and has a lot of influence and power."
- Hispanic Focus Group

"You have to have a car. Without one, you can't go anywhere. To buy a car, you need a license. You need a car to get to work."
- Hispanic Focus Group

Percent Hispanic/Latino

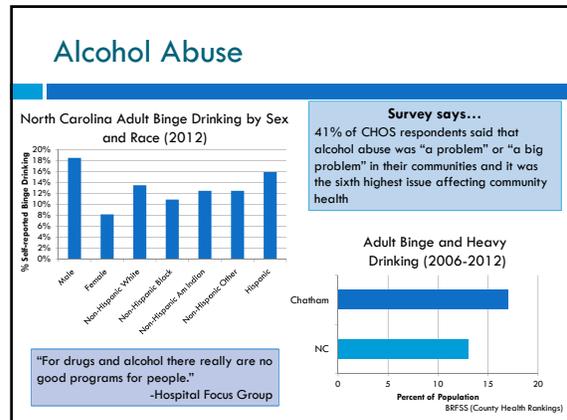
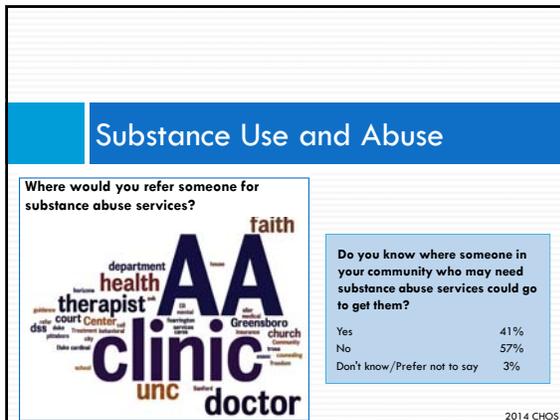
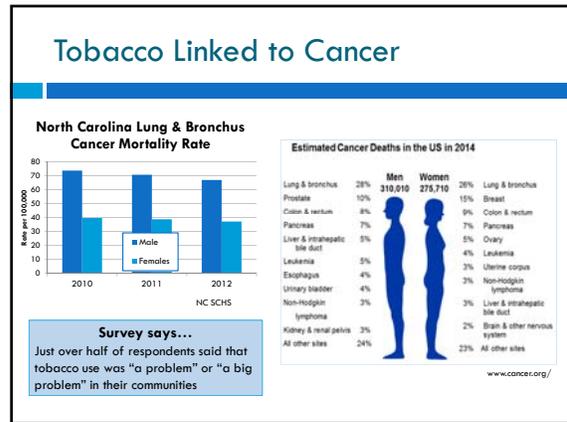
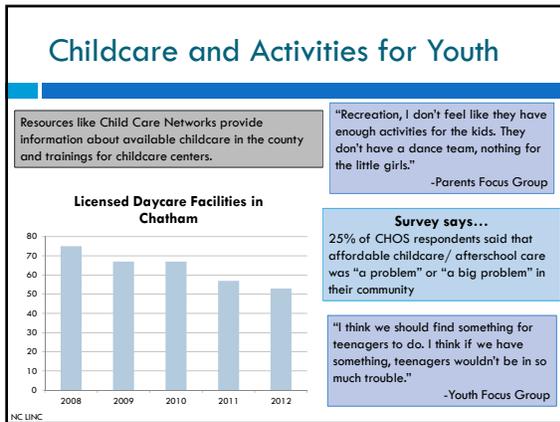
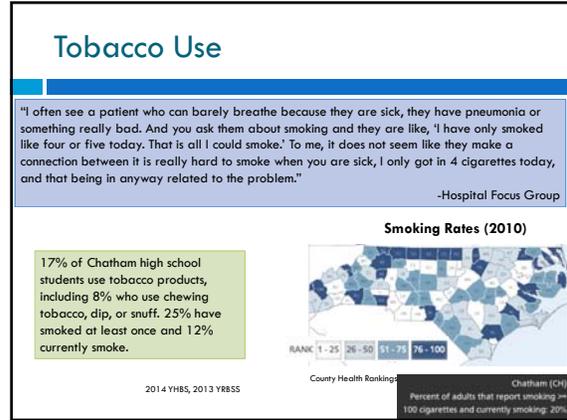
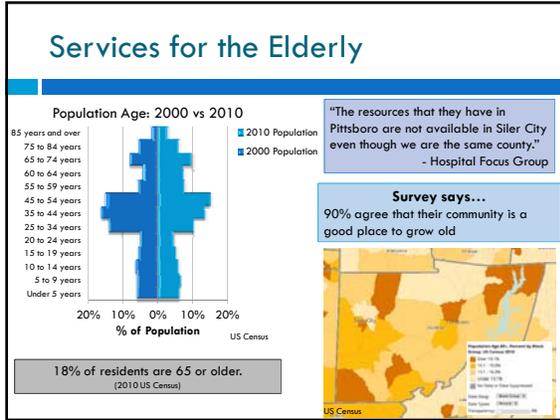
Source: 2010 Census

Existing Resources

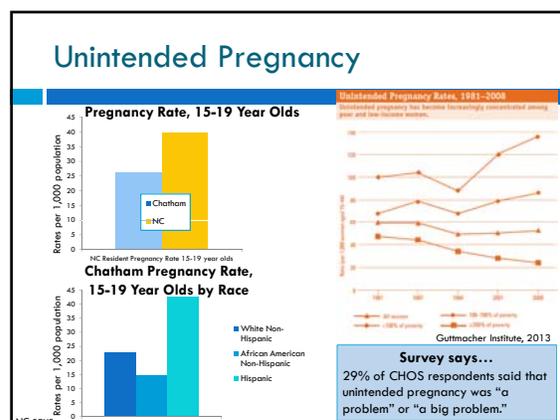
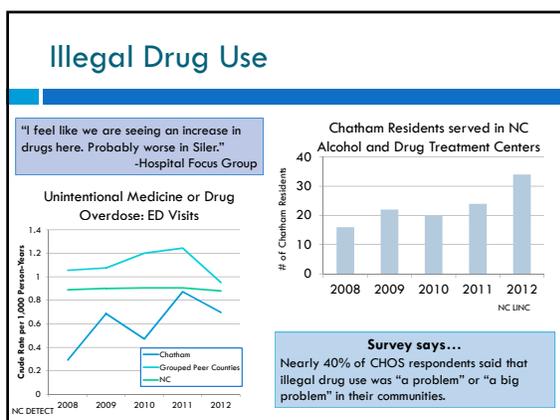
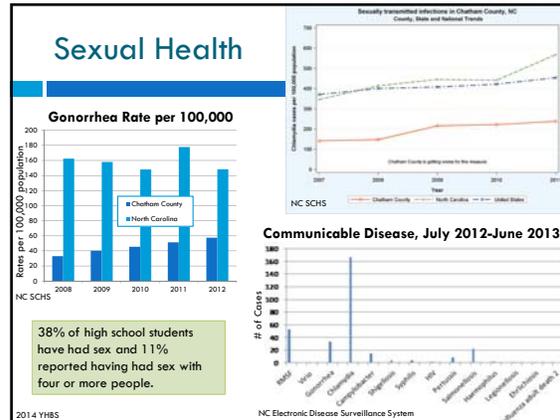
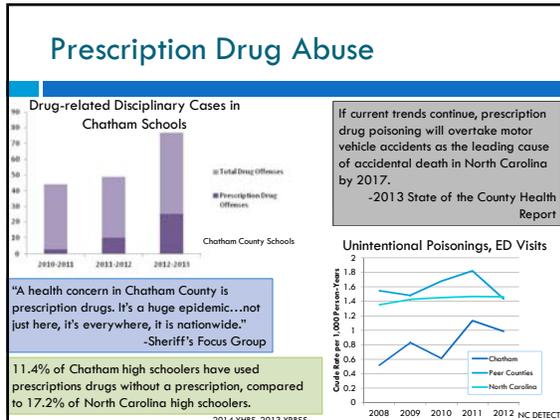
- Child Care Networks
- Coalition for Family Peace
- El Futuro
- Hispanic Liaison/El Vinculo
- Hispano
- CCCC ESL Program
- Chatham County Literacy Council
- Chatham County Together
- Chatham Family Resource Center
- Piedmont Health Services
- Chatham Hospital
- County Public Health Department
- Chatham Social Health Council

United Way Community Resource Guide

Appendix 1: CHA Complete Findings Presentation/ Databook



Appendix 1: CHA Complete Findings Presentation/ Databook



Sexual and Reproductive Health

Other Issues

Appendix 1: CHA Complete Findings Presentation/ Databook

Communication

Communication came up in both the survey and focus groups. Places where communication could be improved included:

- Emergency notifications
- Interagency correspondence
- Water quality concerns
- Available services
- Chatham specific news/channel

"I would like to know more about what's happening in Chatham County and TV doesn't really cover it. Sometimes you'll see Ferrington village on the weather map if there is tornado near it. And the News and Observer doesn't really cover Chatham County."

- North Chatham Focus Group

"Sometimes you don't know where to go. DSS has information down there, but its not really visible."

- Parents of Young Children Focus Group

Where do you receive your news or information?

Source	Percentage
Television	85%
Internet	70%
Word of mouth	65%
Radio	55%
Phone/text messages	45%
Newspaper	40%
Email	35%
Social Networking site	25%
Chatham Channel	15%

2014 CHOS

Traffic Accidents

Traffic Accidents by Year, Chatham

Year	Traffic Accidents	Persons Injured in Traffic Accidents	Alcohol Related Accidents
2008	1350	450	100
2009	1250	450	100
2010	1300	450	100
2011	1200	450	100
2012	1250	450	100

NC LINC

Survey says...
3.4% of those surveyed said more sidewalks and crosswalks would help them to be physically active

"Siler City is almost anti-running. I almost get struck by cars every time I go running."

- Sheriff's Focus Group

Animal Services, Cruelty and Abuse

The updated Animal Services Ordinance was passed on January by the county commissioners. It includes:

- Fines and penalty increases for violations
- Additions to the cruelty section to include more protection for dogs left outdoors
- Humane restraint or tethering requirements for dogs that are tied out

Chatham County Animal Service Calls, 2013-14

Category	Percentage
Nuisance	23%
Trapped	1%
Bit/Owned HSD	2%
Livestock	2%
Robies	2%
Supers/Vedditie	2%
Sick/Injured	3%
Service	3%
Abandoned	1%
After Hours	6%
DAL	5%
Relinquish	7%
Animal Welfare	7%
Check	9%
Trop Request	12%
Stray	14%

Chatham Animal Services

Survey says...
28% of residents reported Animal Cruelty or Abuse as a problem or big problem in their communities.

Tick Borne Illnesses

All Tick-borne Illnesses Investigated in Chatham County in 2012

2008-2012 Tick-Borne Illnesses Spotted Fever Group Rickettsiosis (RMSP) Confirmed and Probable

Survey says...
47% of CHOS respondents said that tick borne illness was "a problem" or "a big problem."

NC DHHS, DPH, Epidemiology Section, Communicable Disease Branch

Water and Sewer

"Water... In the water bill comes a slip, if you are compromised don't drink the water. I don't drink the water anymore... I think water is very important. You should be able to drink it."

- North Chatham Focus Group

Survey says...
Access to clean water was the eighth biggest issue affecting community health

Water quality in the news

Chatham County fired up over fracking

Wells in Chatham

ChathamGIS

"That is a challenge in developing, it's one thing to build a building, it's another to put in plumbing, and sewage treatment facilities, and water treatment facilities."

- Chatham Food Access Network Focus Group

Discussion and Voting

Appendix 1: CHA Complete Findings Presentation/ Databook

Issues

- Population Growth
- Geographic Divide
- Unemployment/Adequate Local Employment
- Poverty
- Access to Healthcare
- Access to Health Insurance
- Prenatal Care/Birthing
- Mental Health
- Dental Care
- Built Environment
- Physical Inactivity
- Nutrition
- Obesity
- Hunger/Food Insecurity
- Chronic Diseases (General)
- Heart Disease
- Cancer
- Diabetes
- Cerebrovascular Disease
- Asthma
- Crime and Violence (General)
- Domestic Violence
- Child Abuse
- Housing and Homelessness (General)
- Homelessness
- Poor Housing Conditions
- Affordable Housing
- Access to Transportation
- Services for Hispanics/Latinos
- Services for the Elderly
- Childcare
- Youth Health/Activities for Youth
- Substance Abuse (General)
- Tobacco Use (Smoking and Smokeless)
- Alcohol Abuse
- Prescription Drug Abuse
- Illegal Drug Use
- Sexual Health and Unintended Pregnancy
- Communication
- Animal Services, Cruelty and Abuse
- Water and Sewer
- Traffic-related Issues
- Tick Borne Illnesses

Discussion

Current vote: Combine obesity and chronic disease?

- Yes: 0
- No:
- Abstain:

Top 10 Issues

Rank	Issue	Total Score
1	Obesity	29
2	Chronic Diseases	22
3	Access to Healthcare	17
4	Mental Health	15
5 (tie)	Substance Abuse	13
	Unemployment/Adequate Local Employment	13
7	Nutrition	9
8	Poverty	9
9	Built Environment	8
10 (tie)	Housing and Homelessness Tobacco Use (Smoking and Smokeless) Youth Health/Activities for Youth	6

Top 10 Issues- Revised

Rank	Issue	Total Score
1	Obesity	29
2	Chronic Diseases	22
3	Access to Healthcare	17
4	Access to Mental Health Services	15
5 (tie)	Substance Abuse/ Tobacco Use	13
	Unemployment/Adequate Local Employment	13
7	Poverty	9
8 (tie)	Housing & Homelessness	6
	Youth Health/Activities for Youth	6

Discussion

Current vote: Combine obesity, nutrition, built environment.

- Yes: 16
- No: 2
- Abstain: 1

Wording of issue: Obesity

- Yes: 20
- No: 1
- Abstain: 3

2014 Chatham Priority Health Issues

Rank	Issue	Total Score
1	Obesity	74
2	Access to Mental Health Services	33
3	Access to Healthcare	24

Appendix 1: CHA Complete Findings Presentation/ Databook

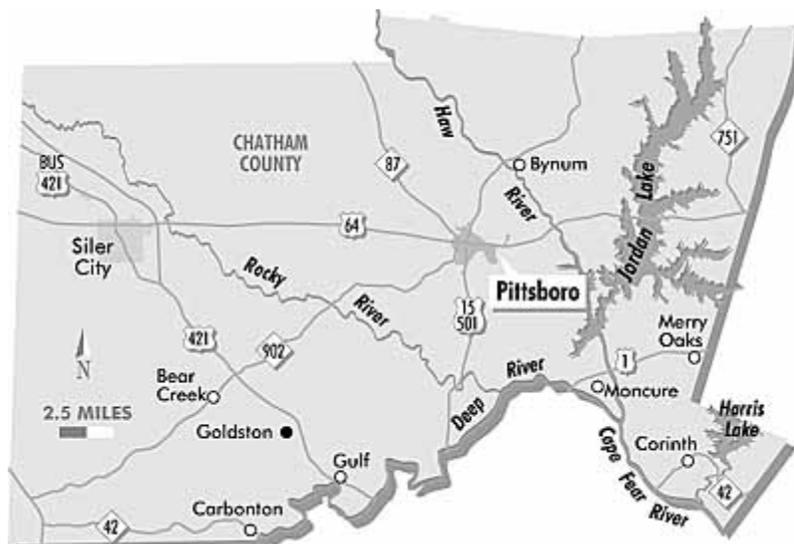
Next Steps

- Compile findings into report
- Share results with public and Board of Health
- Submit report to state
- Create Action Plan to address issues
- Continue to meet as a Health Task Force
- Work together to improve health of Chatham's residents

2014 Chatham County Community Health Opinion Survey Results

The Community Health Opinion Survey (CHOS) is conducted every four years as part of the Community Health Assessment. In March 2014, steering committee members and community volunteers conducted door-to-door surveys of households across the county. 30 census blocks, weighted by 2010 US Census population, were randomly selected. Within each block, seven households were randomly chosen to participate. This strategy was based on the CDC's two-stage cluster sampling Community Assessment for Public Health Emergency Response (CASPER) method, which yields a representative sample of county households. A total of 190 surveys were conducted. Of those who answered the door, 63% completed the survey.

As a statistical sample of county households, there is a margin of error (confidence interval) for each reply. In general, this is within $\pm 10\%$ of the stated figures. This survey was conducted in collaboration with the North Carolina Institute for Public Health.



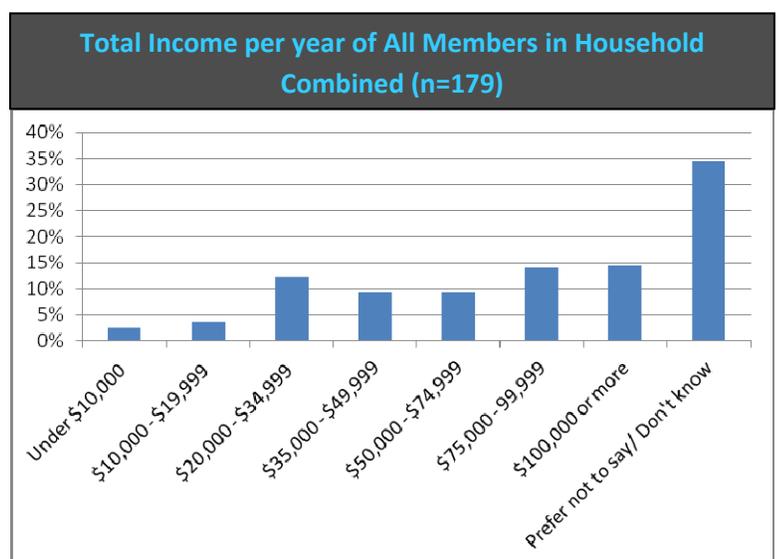
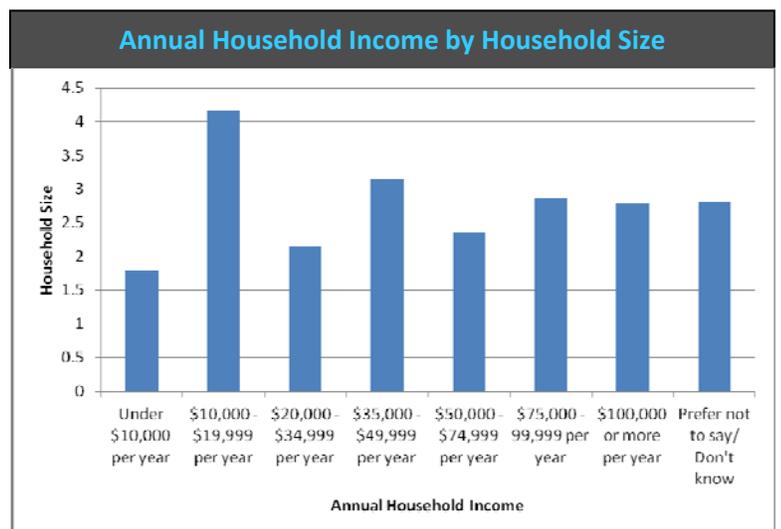
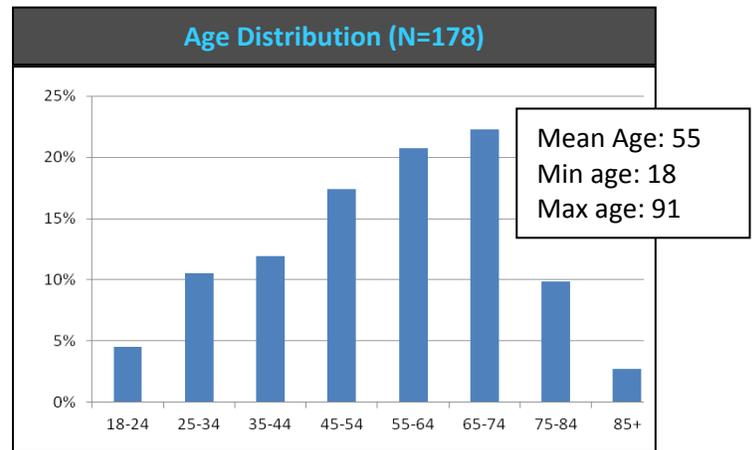
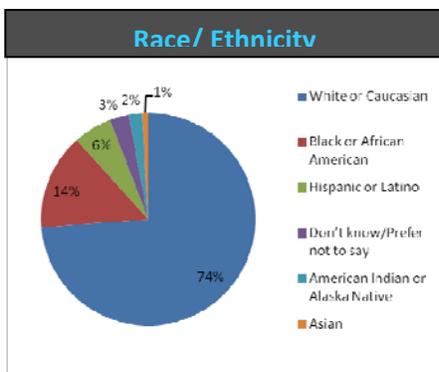
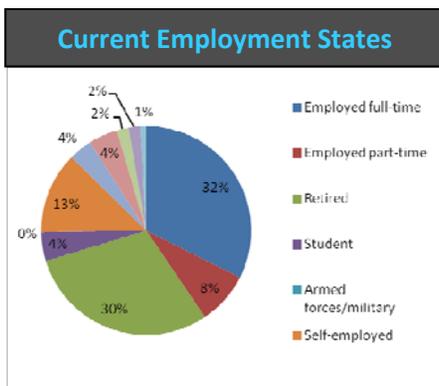
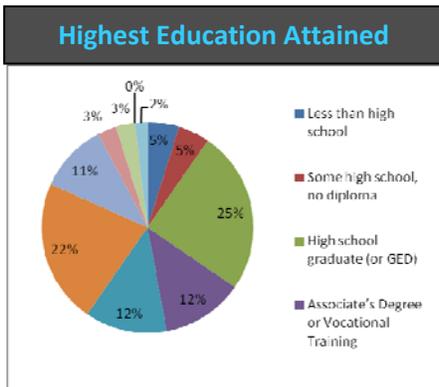
Appendix 2: 2014 Community Health Opinion Survey Results

Demographic Information

Basic demographic information was collected as part of the Community Health Opinion Survey. The survey population is similar demographically to the county overall based on the 2010 US Census, though the median age is slightly older and the Hispanic population is somewhat underrepresented.

Gender	% Total
Male	47%
Female	52%
Other	1%
Prefer not to say	1%

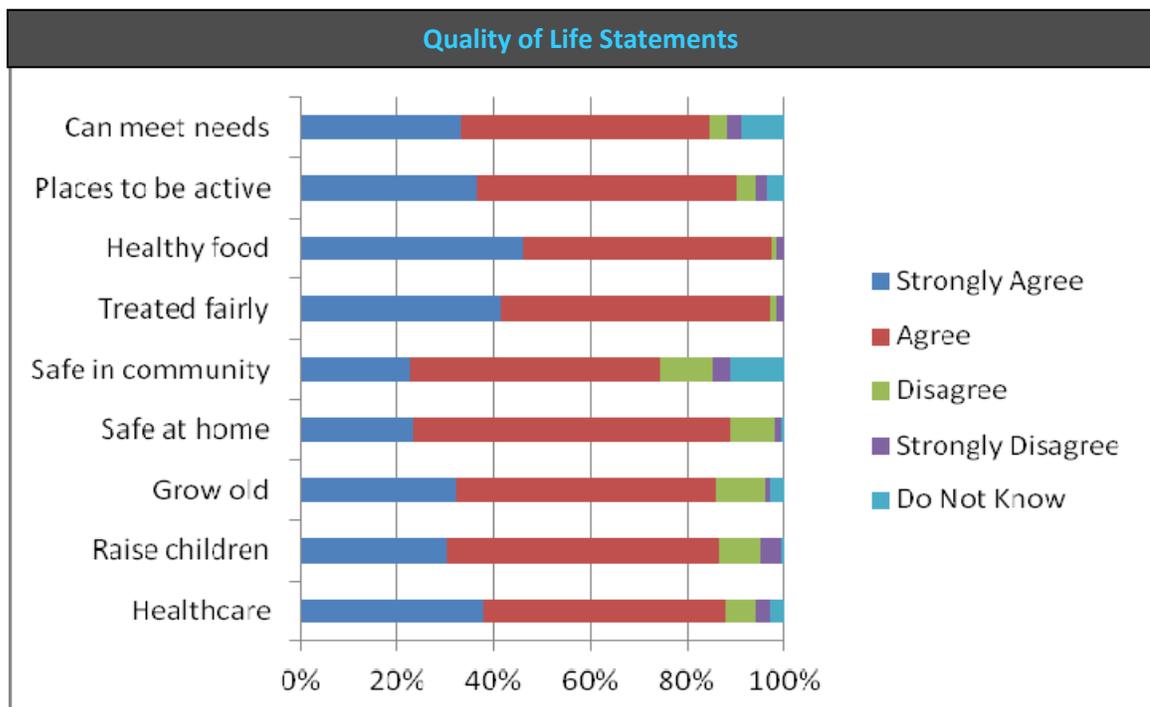
Speak a Language other than English At Home	% Total
Yes	11%
No	89%



Part 1: Quality of Life Statements

These questions focus on aspects of the community. Respondents were asked whether they “strongly agreed,” “agreed,” “disagreed,” or “strongly disagreed” with ten statements, such as “I can get the health care I need near my home,” thinking specifically about their community.

Quality of Life Statement	% Total				
	Strongly Agree	Agree	Disagree	Strongly Disagree	Do Not Know
1. I can get the health care I need near my home.	38%	50%	6%	3%	3%
2. My community is a good place to raise children.	33%	51%	3%	3%	9%
3. My community is a good place to grow old.	36%	54%	4%	2%	4%
4. I feel safe in my home.	46%	52%	1%	1%	0%
5. I feel safe in my community.	42%	55%	1%	2%	0%
6. People of all races, ethnicities, backgrounds and beliefs in my community are treated fairly.	23%	52%	11%	3%	11%
7. I can buy affordable healthy food near my home	23%	65%	10%	1%	1%
8. There are places to be physically active near my home.	32%	54%	10%	2%	3%
9. I have enough financial resources to meet my basic needs.	30%	56%	8%	5%	1%



Part 2: Health

This section of the Community Health Opinion Survey focused on aspects of health, including individual health behaviors and health resources within the community. The majority of these questions had at least 170 responses which yields a county-representative sample with a confidence interval within $\pm 10\%$ as described on page 1. Questions with less than 170 responses are noted and may have a large degree of uncertainty. Therefore, they cannot be assumed to be representative of Chatham County, though their results are worth noting with this uncertainty taken into account.

10. In general, would you say that your physical health is:

Response	% Total
Excellent	17.1%
Very Good	30.8%
Good	33.7%
Fair	13.9%
Poor	4.5%
Don't know/Prefer not to say	0.0%

11. How would you describe your day-to-day level of stress?

Response	% Total
Low	40.4%
Moderate	48.4%
High	10.7%
Not sure/prefer not to say	0.5%

Appendix 2: 2014 Community Health Opinion Survey Results

Questions 12-13 are related to physical activity and exercise for adults. The CDC recommends that adults between the ages of 18-64 get at least 150 minutes of moderate intensity aerobic activity a week and do muscle-strengthening activities at least 2 days a week.

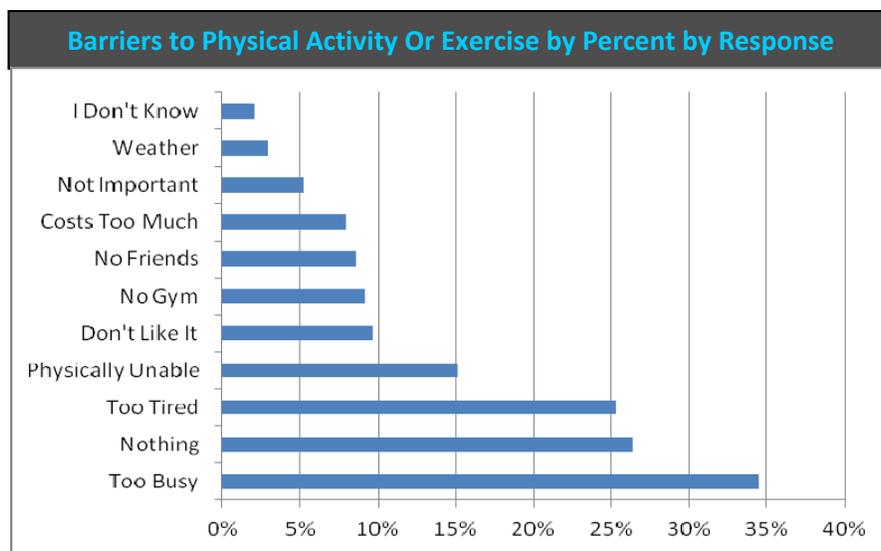
Source: [Center for Disease Control and Prevention](#)

12. During the past 7 days, on how many days were you physically active for a total of at least 30 minutes per day? (Add up all the time you spent in any kind of physical activity that increased your heart rate and made you breathe hard some of the time.)

Response	% Total
0 days	10.1%
1-2 days per week	19.4%
3-4 days per week	25.2%
5 or more days per week	44.8%
Don't know/Prefer not to say	0.5%

13. Which of the following gets in the way of you being more physically active or exercising? Please say yes to the choices that apply.

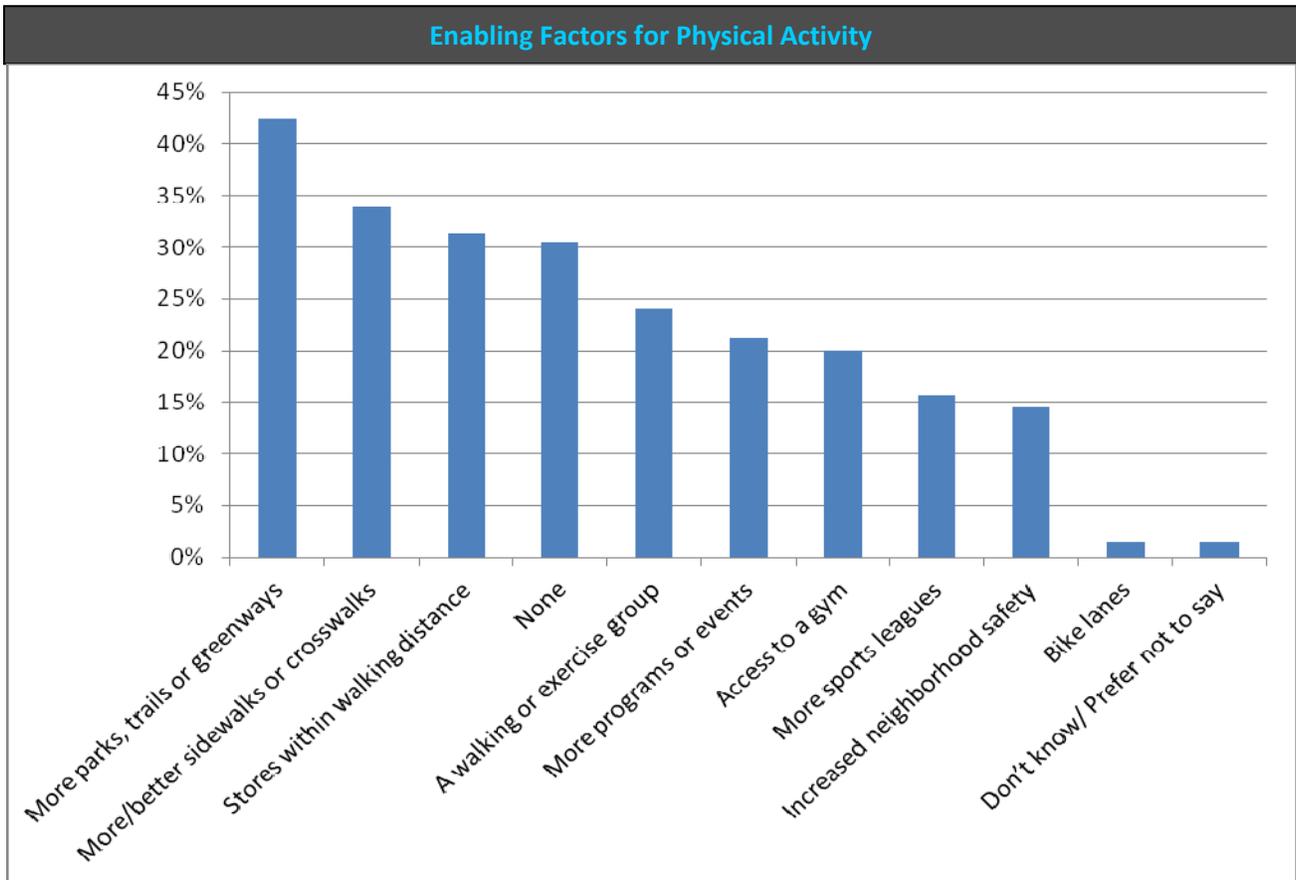
Barriers to Physical Activity or Exercise										
Too Busy	Nothing	Too Tired	Unable	Don't Like it	No Access	No Support	Cost	Un-Important	Weather	Don't Know
34%	26%	25%	15%	10%	9%	9%	8%	5%	3%	2%



Appendix 2: 2014 Community Health Opinion Survey Results

14. Which of the following would help you to be more physically active? Please say yes to the choices that apply.

Enabling Factors for Physical Activity										
More parks, trails, greenways	More/better sidewalks/crosswalks	Stores within walking distance	None	Walking or exercise group	More programs or events	Access to a gym	More sports leagues	Increased neighborhood safety	Bike lanes	Don't know
42%	34%	31%	31%	24%	21%	20%	16%	14%	1%	1%

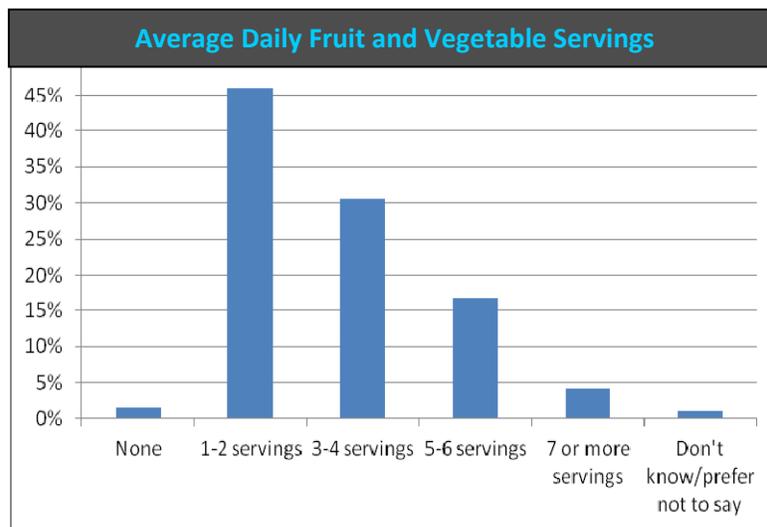


Questions 15 and 16 are related to diet for adults. The CDC recommends that adults get at least 5 or more servings of fruits and vegetables a day.

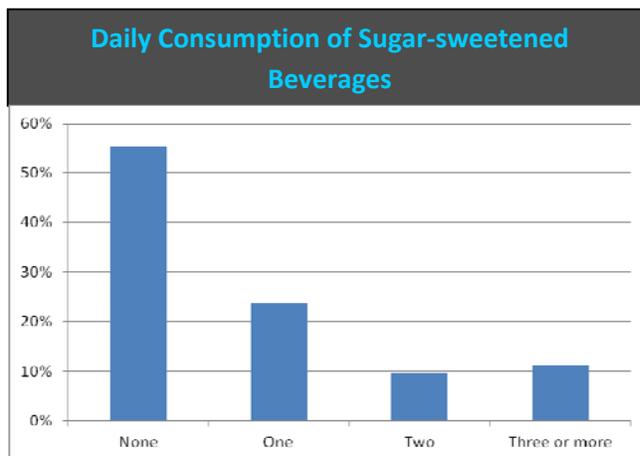
Source: Choosemyplate.gov

15. About how many servings of *fruits and vegetables* do you eat each day? One small apple, one banana, or one half cup of broccoli are all examples of a serving.

Average Daily Fruit and Vegetable Servings					
None	1-2 servings	3-4 servings	5-6 servings	7 or more servings	Don't know
1%	46%	31%	17%	4%	1%



16. About how many cans, bottles, or glasses of sugar-sweetened beverages, such as regular sodas, sugar-sweetened tea and/or, energy drinks, do you drink each day?



Daily Consumption of Sugar-sweetened Beverages	
Response	% Total
None	55%
One	24%
Two	10%
Three or more	11%

Appendix 2: 2014 Community Health Opinion Survey Results

17. In the past 12 months, did you or others in your household ever cut the size of a meal or skip meals because there was not enough money for food?

Response	% Total
Yes	7%
No	93%

18. Do you have a child who is under 10 years old?

Response	% Total
Yes	14%
No	86%

Questions 19 and 20 were only asked if a respondent said “Yes” to Question 18, “Do you have a child who is under 10 years old?” For both questions 19 and 20, percent response is based on responses from the 28 individuals who said “Yes” to question 18.

Question 19 asks about average daily physical activity. The CDC recommends that youth 6-18 get at least 60 minutes of moderate intensity aerobic activity a day. Source: [Center for Disease Control and Prevention](#)

Question 20 asks about average daily physical activity. The CDC recommends that children get at least 5 or more servings of fruits and vegetables a day. Source: [Choosemyplate.gov](#)

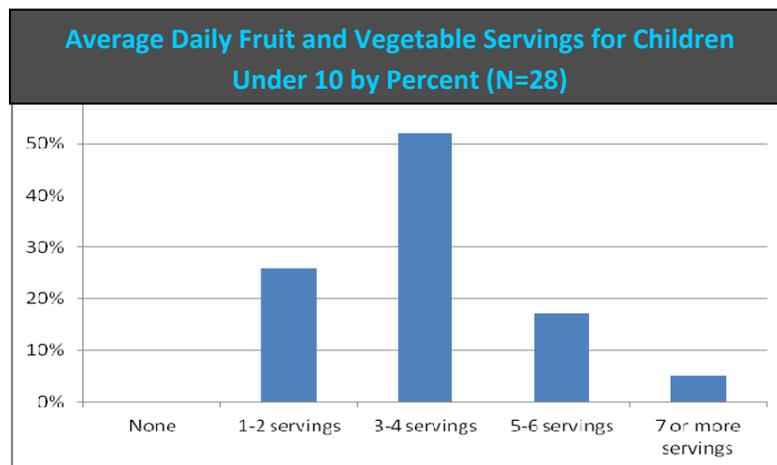
19. If you have a child under 10: Outside of school, during the past 7 days, on how many days was your child physically active for a total of at least 30 minutes per day? If you have more than one child, please answer thinking about your oldest child under 10.

Average Daily Fruit and Vegetable Servings for Children Under 10 (N=28)	
Response	% Total
0 days	0%
1-2 days per week	15%
3-4 days per week	14%
5 or more days per week	72%

Appendix 2: 2014 Community Health Opinion Survey Results

20. If you have a child under 10: About how many servings of *fruits and vegetables* does that child eat each day? Again, if you have more than one child, please answer thinking about your oldest child under 10.

Average Daily Fruit and Vegetable Servings for Children Under 10 by Percent (N=28)				
None	1-2 servings	3-4 servings	5-6 servings	7 or more
0%	26%	52%	17%	5%

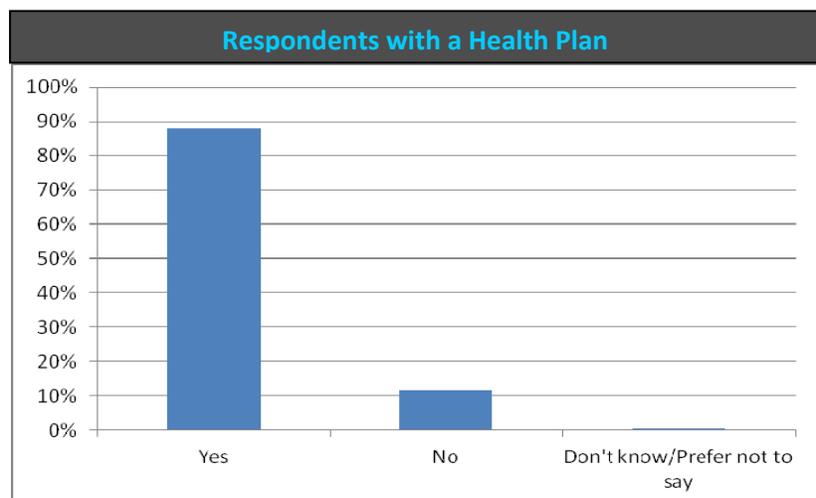


21. Do you have any children under 18 who walk, bike, or skateboard to school?

Children Under 18 who Actively Commute To School (N=181)	
Response	% Total
Yes	.9%
No	99.1%

22. Do you have health insurance or some type of health plan that helps you pay medical expenses? Examples are Medicare, Medicaid, employer-based coverage, or private insurance.

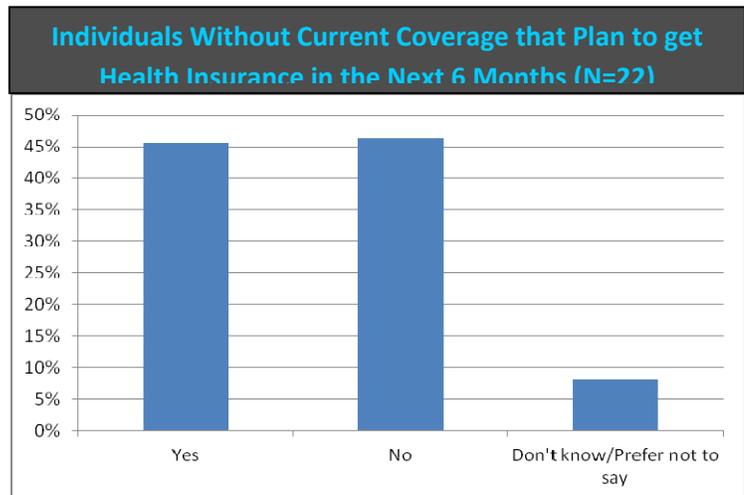
Respondents with a Health Plan		
	Overall	Age 19-64
Yes	88%	82%
No	12%	18%



Questions 23 was only asked if a respondent said “No” to Question 22, “Do you have health insurance or some type of health plan that helps you pay medical expenses?” For question 23, percent response is based on responses from the 22 individuals who said “No” to question 22.

23. If no, are you planning to purchase or get health insurance in the next 6 months?

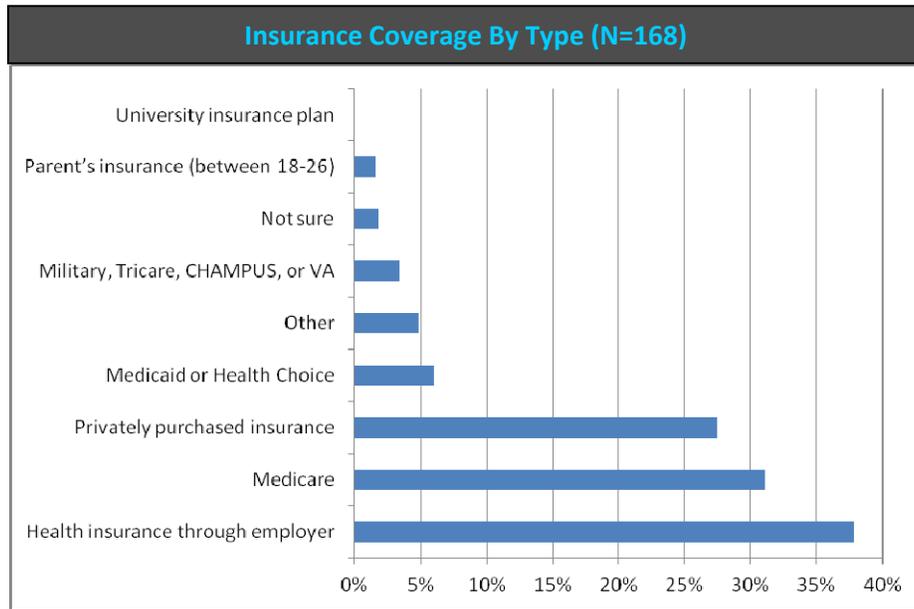
Individuals Without Current Coverage that Plan to get Health Insurance in the Next 6 Months (N=22)	
Response	% Total
Yes	46%
No	46%
Don't know/Prefer not to say	8%



Questions 24 was only asked if a respondent said “Yes” to Question 22, “Do you have health insurance or some type of health plan that helps you pay medical expenses?” For question 24, percent response is based on responses from the 168 individuals who said “Yes” to question 22.

24. If yes, which of the following types of health insurance do you have?

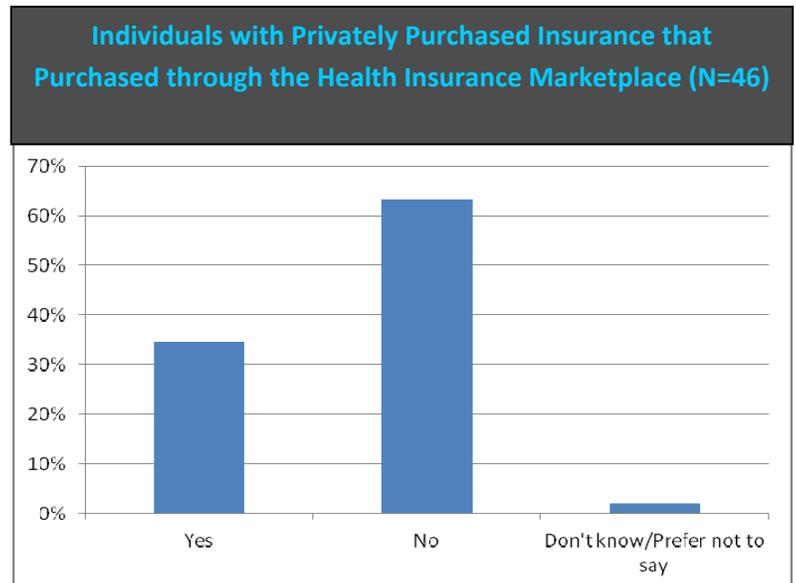
Insurance Coverage By Type (N=168)	
Response	% Total
Health insurance through your employer or spouse’s employer	38%
Medicare	31%
Privately purchased insurance	27%
Medicaid or Health Choice	6%
Any others that I haven’t said?	5%
Military, Tricare, CHAMPUS, or Veterans’ Administration benefits	3%
I have insurance, but do not know the source	2%
Covered by parent’s insurance (between 18-26)	2%
University or college insurance plan	0%



Questions 25 was only asked if a respondent said that their current health insurance was "Privately purchased insurance" on Question 24. For question 25, percent response is based on responses from the 46 individuals who said that their current coverage is "Privately purchased insurance" on question 25.

25. If privately purchased, was your insurance purchased through the Health Insurance Marketplace or Exchange, or healthcare.gov? This is also known as the Affordable Care Act or Obamacare.

Response	% Total
Yes	35%
No	63%
Don't know/Prefer not to say	2%



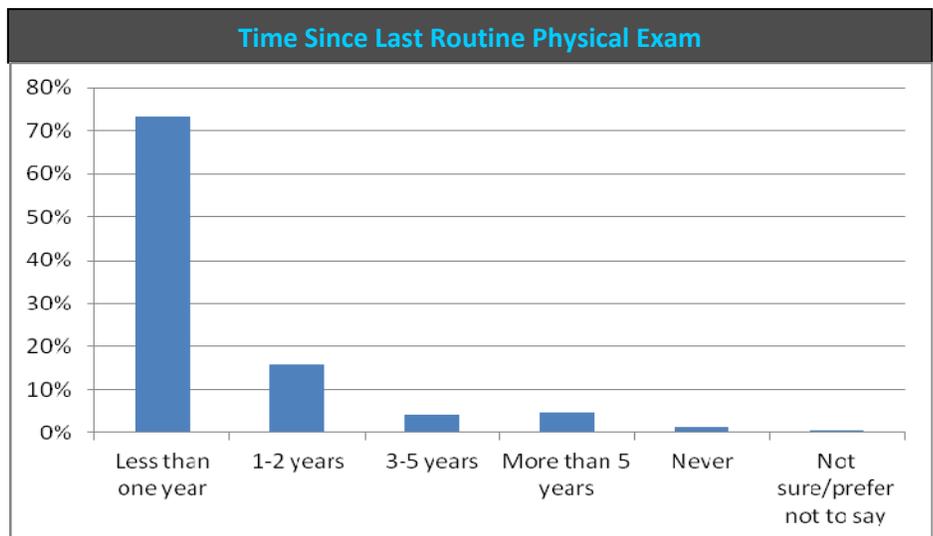
Appendix 2: 2014 Community Health Opinion Survey Results

26. Was there a time in the past 12 months when you needed to see a doctor but could not because of cost?

Percent who Could not See a Doctor Because of Cost	
Response	% Total
Yes	11%
No	89%

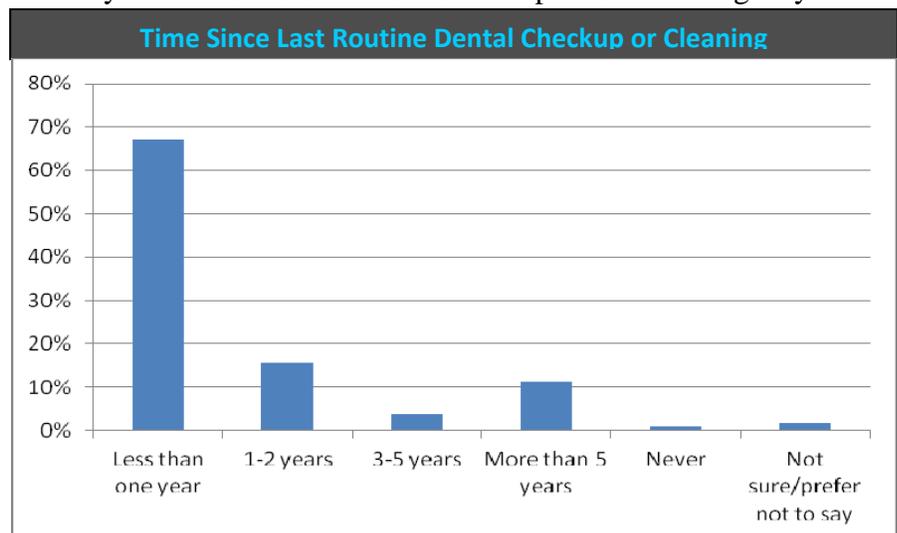
27. About how long has it been since you last visited a doctor for a routine physical exam or wellness checkup? Do not include times you visited the doctor because you were sick or pregnant, or emergency room visits.

Time Since Last Routine Physical Exam	
Response	% Total
Less than one year	73.30%
1-2 years	15.80%
3-5 years	4.20%
More than 5 years	4.70%
Never	1.50%
Not sure/ Prefer not to say	0.60%



28. About how long has it been since you last visited a dentist for a routine checkup or cleaning? Do not include times you visited the dentist because of pain or an emergency?

Time Since Last Routine Dental Checkup or Cleaning	
Response	% Total
Less than one year	67%
1-2 years	16%
3-5 years	4%
More than 5 years	11%
Never	1%
Not sure/ Prefer not to say	2%



29. During the past 12 months, was there a time when one of your children needed dental care but could not get it?

Yes	1% (1 response)
-----	-----------------

Questions 30 was only asked if a respondent said “Yes” to question 29, “During the past 12 months, was there a time when one of your children needed dental care but could not get it?” Only one respondent said “Yes’ to question 29. This same person responded to question 30.

30. What reason or reasons prevented your child from getting dental care at that time?

My child did not want to go (1 response)
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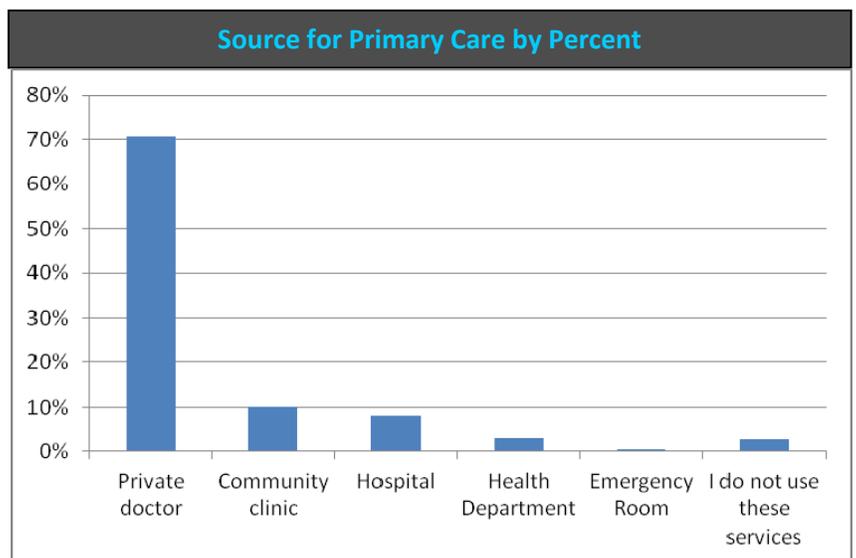
31. During the past 12 months, have you had a seasonal flu vaccine?

Percent that Have had a Seasonal Flu Vaccine in the past 12 Months (N=188)	
Response	% Total
Yes	54%
No	46%

32. Where do you go for primary care or basic clinical services, such as physical exams, health screenings, vaccines and immunization, or nutrition counseling?

Note: Hospital likely includes UNC and Duke primary care physicians.

Source for Primary Care	
Response	% Total
Private doctor	71%
Community clinic	10%
Hospital	8%
Health Department	3%
Emergency Room	0%
I do not use these services	3%



33. Do you know where someone in your community who may need mental health services like counseling or treatment could go to get them?

Do You know Where to Refer for Mental Health Services? (N=188)	
Response	% Total
Yes	38%
No	59%
Don't know/Prefer not to say	4%

Questions 34 was only asked if a respondent said “Yes” to question 33, “Do you know where someone in your community who may need mental health services like counseling or treatment could go to get them?”

34. If yes, where would you refer that person for mental health services?

Note: Question 34 was an open-ended question, which yielded a list of resources for mental health services. The image below shows each of the resources that respondents mentioned. The larger the word in the image below, the more commonly that resource was mentioned by respondents. For example, the most common resource that respondents would refer someone for mental health services in Chatham County was “clinic” followed by “doctor” and “therapist.”



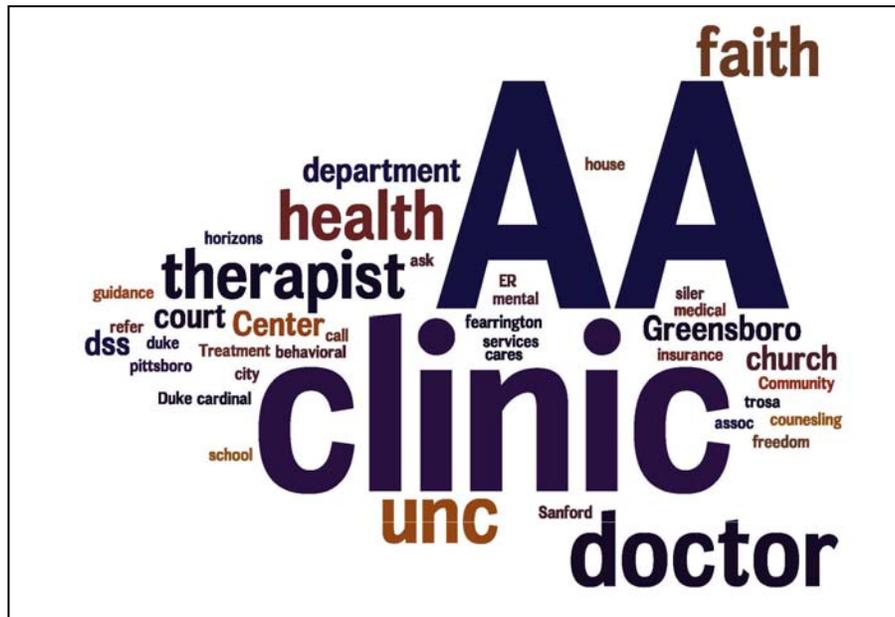
35. Do you know where someone in your community who may need substance abuse services or treatment for alcohol or drug addiction could go to get them?

Do You know Where to Refer for Substance Abuse Services or Treatment?	
Response	% Total
Yes	41%
No	57%
Don't know/Prefer not to say	3%

Questions 36 was only asked if a respondent said “Yes” to question 35, “Do you know where someone in your community who may need substance abuse services or treatment for alcohol or drug addiction could go to get them?”

36. If yes, where would you refer that person for substance abuse services?

Note: Question 36 was an open-ended question, which yielded a list of resources for mental health services. The image below shows each of the resources that respondents mentioned. The larger the word in the image below, the more commonly that resource was mentioned by respondents. For example, the most common resource that respondents would refer someone for mental health services in Chatham County was “AA” followed by “clinic” and “doctor.”



Appendix 2: 2014 Community Health Opinion Survey Results

37. Does your family have a basic emergency supply kit? (These kits could include water, non-perishable food, any necessary prescriptions, first aid supplies, flashlights and batteries, or a blanket).

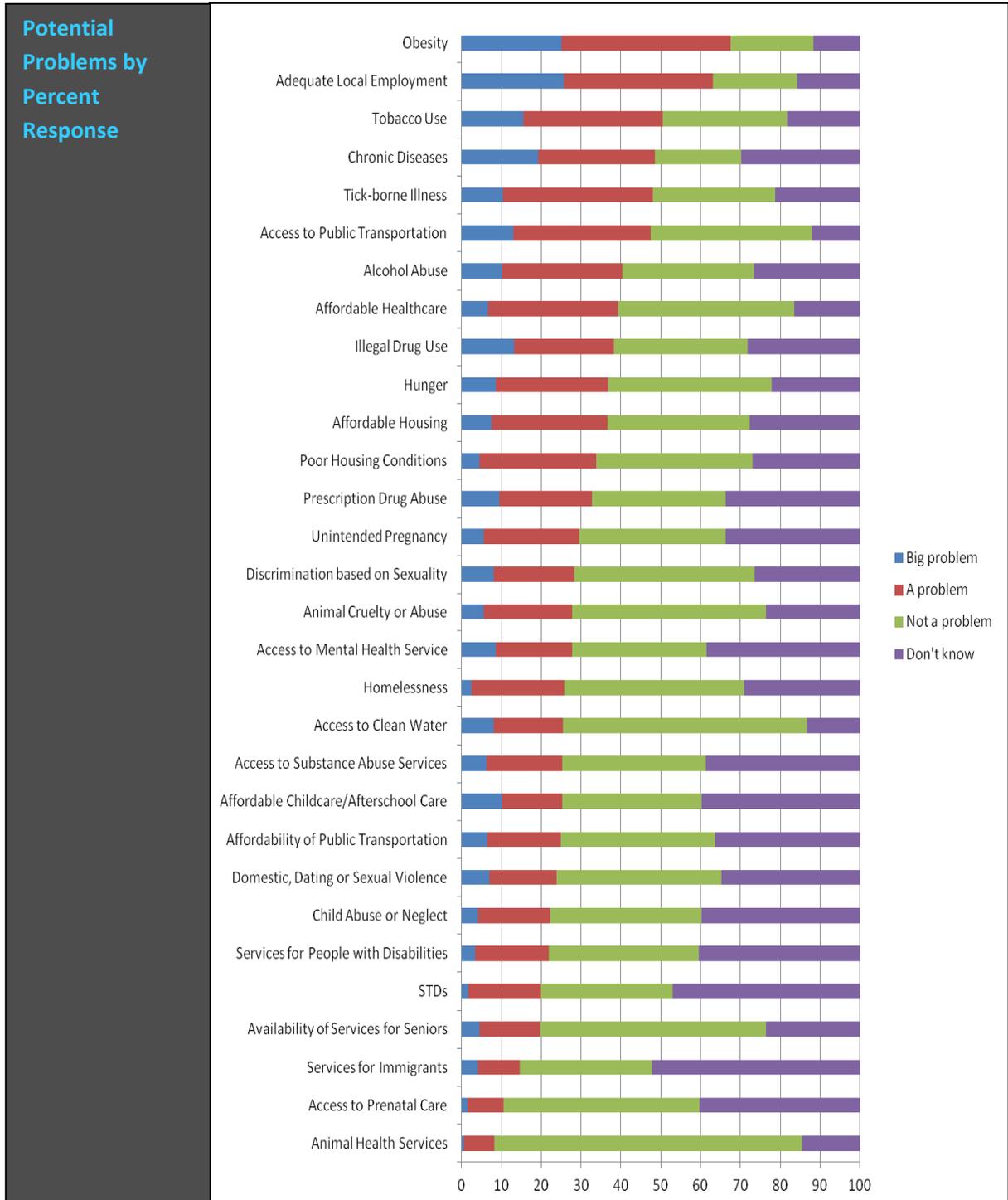
Families with Basic Emergency Supply Kit	
Response	% Total
Yes	37%
No	62%
Don't know/Prefer not to say	1%

38. Of the following, where do you receive your news or information? Say yes for all that apply.

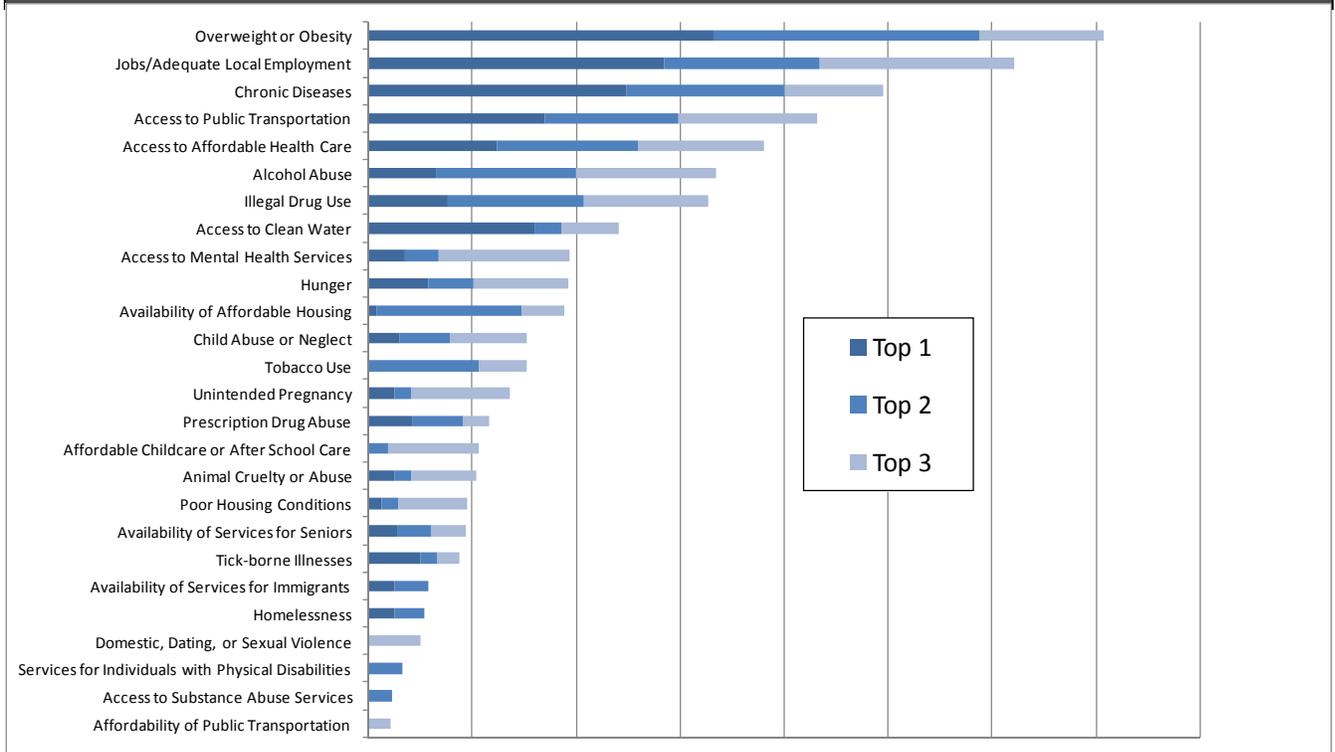
Sources of Information	
Source of Information	% Total
Word of mouth	67%
Internet	69%
Television	86%
Newspaper	42%
Radio	51%
Chatham Chatlist	18%
Email	41%
Phone/text messages	47%
Social Networking site	37%

Part 3: Community Issues

This section focused of the Community Health Opinion Survey focused on potential problems in the community. A total of 30 potential problems were listed and respondents were asked to say if a given problem was “not a problem,” “a problem,” “a big problem,” or “don’t know.” Respondents were also provided the opportunity list any other issues they perceived as problems that had not already listed.



In your opinion, which three issues, either from this list or not, most affect the health of people in your community? Please rank them in order of importance. You may rank fewer than three issues if you would like.



Other Responses:

- Access to Parks and Recreation
- Affordability of Groceries
- Chatham Park
- Clothing for Children
- Fair Wages
- Food Quality
- Fracking
- Health Communication/Notification
- Lack of Funding to Address Needs
- Lack of High-Speed Internet
- School Funding
- Traffic Safety

Chatham County
Community Health Opinion Survey

If you are in an area with Spanish-speaking households, ask which language is preferred.

Hello, I am _____ and this is _____ and we are volunteers working with the Chatham County Public Health Department and community partners (Partnership for Children, Hispanic Liaison, FVRC, Council on Aging, and many others). We are talking with people throughout the community today to learn more about health and quality of life in the county. What we learn during this assessment will help the health department and community organizations to address the major health and community issues in Chatham County.

Your neighborhood was one of many randomly selected from our county to participate. This survey is completely voluntary and all opinions you share with us will be completely confidential. You may decline to answer any question.

The survey should take between 15 and 30 minutes to complete.

Would you be willing to participate? _____ Yes _____ No
(If no, stop the survey here and thank the person for his or her time.)

We have some additional screening questions. We are only interviewing adults 18 and older.

Are you 18 years old or older? _____ Yes _____ No
(If no, ask if you can speak with someone who is 18 years or older. If no one is available, stop the survey here and thank the person for his or her time.)

Do you live in Chatham County? _____ Yes _____ No
(If no, ask if you can speak with someone who lives at the address. If no one is available, stop the survey here and thank the person for his or her time.)

Do live in this household? _____ Yes _____ No
(If no, ask if you can speak with someone who lives at the address. If no one is available, stop the survey here and thank the person for his or her time.)

PART 1: Quality of Life Statements

The following questions focus on aspects of your community. Please tell us whether you “strongly agree”, “agree”, “disagree” or “strongly disagree” with each of the next 10 statements thinking specifically about your community as you see it. If you don’t know, please respond “I don’t know.” Here is a card with the response options. **Hand over answer category card to participant. Read answer choices one time before going through each statement. Read description only if statement is unclear.**

Statements	<i>Circle the number that best represents the person’s opinion of each statement below.</i>				
	Strongly Agree	Agree	Disagree	Strongly Disagree	Do Not Know
<p>1. I can get the health care I need near my home.</p> <p>Consider the cost and quality, number of options, and availability of healthcare within a reasonable distance to your home.</p>	1	2	3	4	5
<p>2. My community is a good place to raise children.</p> <p>Consider the quality and safety of schools and child care, after school care, and places to play in your neighborhood.</p>	1	2	3	4	5
<p>3. My community is a good place to grow old.</p> <p>Consider elder-friendly housing, transportation to medical services, access to shopping centers and businesses, recreation, and services for the elderly.</p>	1	2	3	4	5
<p>4. I feel safe in my home.</p> <p>Consider everything that makes you feel safe, such as neighbors, presence of law enforcement, etc. and everything that could make you feel unsafe at home, including family violence, robbery, housing conditions, etc.</p>	1	2	3	4	5
<p>5. I feel safe in my community.</p> <p>Consider how safe you feel in and around your neighborhood, schools, playgrounds, parks, businesses, and shopping centers.</p>	1	2	3	4	5
<p>6. People of all races, ethnicities, backgrounds and beliefs in my community are treated fairly.</p> <p>Consider any form of discrimination as well as programs and</p>	1	2	3	4	5

Appendix 3: 2014 Community Health Opinion Survey

institutions that treat diversity as an asset.	
	<p>Circle the number that best represents the person's opinion of each statement below.</p>
<p>7. I can buy affordable healthy food near my home.</p> <p>Consider grocery stores, supermarkets, corner stores, and farmers markets that sell fresh fruits, vegetables, lean meats, and other healthy options.</p>	<p>Strongly Agree Agree Disagree Strongly Disagree Do Not Know</p> <p>1 2 3 4 5</p>
<p>8. There are places to be physically active near my home.</p> <p>Consider parks, trails, places to walk, playgrounds, gyms, recreation centers, etc. that are near where you live.</p>	<p>1 2 3 4 5</p>
<p>9. I have enough financial resources to meet my basic needs.</p> <p>Consider income for purchasing food, clothing, shelter, and utilities.</p>	<p>1 2 3 4 5</p>

PART 2: Health

This next section of questions will focus on your health. Again, all the opinions you share with us will be completely confidential and will be reported as a group summary. You may decline to answer any question.

10. In general, would you say that your physical health is:

Read choices and select answer choice that matches response

- Excellent
- Very good
- Good
- Fair
- Poor
- Don't know/Prefer not to say

11. How would you describe your day-to-day level of stress? Read choices and select answer choice that matches response

- High
- Moderate
- Low
- Not sure/prefer not to say

12. During the past 7 days, on how many days were you physically active for a total of at least 30 minutes per day? (Add up all the time you spent in any kind of physical activity that increased your heart rate and made you breathe hard some of the time.) Do not read responses, select answer choice that matches response

- 0 days
- 1-2 days per week
- 3-4 days per week
- 5 or more days per week
- Don't know/ Prefer not to say

13. Which of the following gets in the way of you being more physically active or exercising? Please say yes to the choices that apply. Read choices and check answer choices that match response

- I am too busy or don't have time
- It costs too much
- I'm physically unable
- I'm too tired to exercise
- I don't have access to a gym or facility
- It is not important to me
- I don't like or want to exercise
- I don't have friends or a group to exercise with
- Any others that I haven't said: _____
- Nothing gets in the way (Only read if no option has been checked)
- Don't know/ Prefer not to say

14. Which of the following would help you to be more physically active? Please say yes to the choices that apply. Read choices and check answer choices that match response

- More/better sidewalks or crosswalks
- More parks, trails or greenways
- Access to a gym
- Stores within walking distance
- Increased neighborhood safety
- A walking or exercise group
- More sports leagues
- More programs or events, like races or walking challenges
- Any others that I haven't said: _____
- None (**Only read if no option has been checked**)
- Don't know/ Prefer not to say

15. About how many servings of fruits and vegetables do you eat each day? One small apple, one banana, or one half cup of broccoli are all examples of a serving. Do not read responses, select answer choice that matches response

- None
- 1-2 servings
- 3-4 servings
- 5-6 servings
- 7 or more servings
- Don't know/prefer not to say

16. About how many cans, bottles, or glasses of sugar-sweetened beverages, such as regular sodas, sugar-sweetened tea and/or, energy drinks, do you drink each day? Do not read responses, select answer choice that matches response

- None
- One
- Two
- Three or more
- Not sure/prefer not to say

17. In the past 12 months, did you or others in your household ever cut the size of a meal or skip meals because there was not enough money for food? Do not read responses, select answer choice that matches response

- Yes
- No
- Not sure/prefer not to say

18. Do you have a child who is under 10 years old? If they have multiple children, mark yes as well.

- Yes *(continue to Q19)*
- No *(Skip to Q21)*
- Don't know/ Prefer not to say *(Skip to Q21)*

19. If you have a child under 10: Outside of school, during the past 7 days, on how many days was your child physically active for a total of at least 30 minutes per day? If you have more than one child, please answer thinking about your oldest child under 10. Do not read responses, select answer choice that matches response

- 0 days
- 1-2 days per week
- 3-4 days per week
- 5 or more days per week
- Don't know/ Prefer not to say

20. (Skip logic) If you have a child under 10: About how many servings of fruits and vegetables does that child eat each day? Again, if you have more than one child, please answer thinking about your oldest child under 10. Do not read responses, select answer choice that matches response

- None
- 1-2 servings
- 3-4 servings
- 5-6 servings
- 7 or more servings
- Don't know/prefer not to say

21. Do you have any children under 18 who walk, bike, or skateboard to school? Read choices and select answer choice that matches response

- I do not have any children in school
- Yes
- No
- Don't know/ Prefer not to say

22. Do you have health insurance or some type of health plan that helps you pay medical expenses? Examples are Medicare, Medicaid, employer-based coverage, or private insurance. Do not read responses, select answer choice that matches response

- Yes *(Skip to Q24)*
- No *(Continue to Q23)*
- Not sure/prefer not to say *(Skip to Q26)*

23. (Skip logic) If no... Are you planning to purchase or get health insurance in the next 6 months?

After answering skip to Q26

- Yes *(Skip to Q26)*
- No *(Skip to Q26)*
- Not sure/prefer not to say *(Skip to Q26)*

24. (Skip logic) If yes... Which of the following types of health insurance do you have? Read choices and check all that apply

- Medicare *(Skip to Q26)*
- Medicaid or Health Choice *(Skip to Q26)*
- Health insurance through your employer or spouse's employer *(Skip to Q26)*
- Privately purchased insurance
- Military, Tricare, CHAMPUS, or Veterans' Administration benefits *(Skip to Q26)*
- Covered by parent's insurance (between 18-26) *(Skip to Q26)*
- University or college insurance plan *(Skip to Q26)*
- I have insurance, but do not know the source *(Skip to Q26)*
- Any others that I haven't said? _____ *(Skip to Q26)*
- Not insured *(Skip to Q26)*

25. (Skip logic) If privately purchased, was your insurance purchased through the Health Insurance Marketplace or Exchange, or healthcare.gov? This is also known as the Affordable Care Act or Obamacare. Do not read responses, select answer choice that matches response

- Yes
- No
- Not sure/prefer not to say

26. Was there a time in the past 12 months when you needed to see a doctor but could not because of cost? Do not read responses, select answer choice that matches response

- Yes
- No
- Not sure/ prefer not to say

27. About how long has it been since you last visited a doctor for a routine physical exam or wellness checkup? Do not include times you visited the doctor because you were sick or pregnant, or emergency room visits. Do not read responses, select answer choice that matches response

- Less than one year
- 1-2 years
- 3-5 years
- More than 5 years
- I have never been to the doctor for a routine checkup
- Not sure/prefer not to say

28. About how long has it been since you last visited a dentist for a routine checkup or cleaning? Do not include times you visited the dentist because of pain or an emergency? Do not read responses, select answer choice that matches response

- Less than one year
- 1-2 years
- 3-5 years
- More than 5 years
- I have never been to the dentist for a routine checkup
- Not sure/prefer not to say

29. During the past 12 months, was there a time when one of your children needed dental care but could not get it? Do not read responses, select answer choice that matches response

- I do not have children *(Skip to Q31)*
- Yes *(Continue to Q30)*
- No *(Skip to Q31)*
- Not sure/prefer not to say *(Skip to Q31)*

30. (Skip logic) What reason or reasons prevented your child from getting dental care at that time? Read choices and check answer choices that match response

- I don't know a dentist
- There is no dentist nearby
- I couldn't get an appointment
- I didn't have transportation
- Could not afford it
- Dentist does not accept Medicaid
- Dentist does not accept child's health insurance
- There is no dentist who speaks my language
- Dentist does not offer the service my child needed
- My child did not want to go
- Any others that I haven't said: _____
- None *(Only read if no option has been checked)*
- Don't know/ Prefer not to say

31. During the past 12 months, have you had a seasonal flu vaccine? Do not read responses, select answer choice that matches response

- Yes
- No
- Not sure/prefer not to say

32. Where do you go for primary care or basic clinical services, such as physical exams, health screenings, vaccines and immunization, or nutrition counseling? Do not read responses, check answer choices that match response

- Private doctor
- Community clinic (like Piedmont Health)
- Chatham Public Health Department Clinic
- Hospital
- Emergency Room
- I do not use these services
- Don't know/ Prefer not to say
- Other: _____

33. Do you know where someone in your community who may need mental health services like counseling or treatment could go to get them? Do not read responses, select answer choice that matches response

- Yes (*Continue to Q34*)
- No (*Skip to Q35*)
- Don't know/ Prefer not to say (*Skip to Q35*)

34. (Skip logic) If yes, where would you refer that person for mental health services? Do not read choices or give examples but check all that apply

- Community clinic (such as Center for Behavioral Healthcare)
- Private therapist or social worker
- Private doctor
- Faith-based leader (like priest or pastor)
- Emergency Room
- Friend
- Don't know/ Prefer not to say
- Other: _____

35. Do you know where someone in your community who may need substance abuse services or treatment for alcohol or drug addiction could go to get them? Do not read responses, select answer choice that matches response

- Yes (*Continue to Q36*)
- No (*Skip to Q37*)
- Don't know/ Prefer not to say (*Skip to Q3728*)

36. If yes, where would you refer that person for substance abuse services? Do not read choices or give examples but check all that apply

- Community clinic (such as Center for Behavioral Healthcare)
- Alcoholics Anonymous
- Private therapist or social worker
- Private Doctor
- Faith-based leader (like priest or pastor)
- Emergency Room
- Friend
- Don't know/ Prefer not to say
- Other: _____

37. Does your family have a basic emergency supply kit? (These kits could include water, non-perishable food, any necessary prescriptions, first aid supplies, flashlights and batteries, or a blanket). Do not read responses, select answer choice that matches response

- Yes
- No
- Not sure/prefer not to say

38. Of the following, where do you receive your news or information? Say yes for all that apply. Read list and check all that apply. For television, newspaper, and radio, give specifics as indicated.

- Word of mouth (Friends, family, coworkers)
- Internet
- Television (Any channels in particular? _____)
- Newspaper (Which newspapers? _____)
- Radio (Any stations in particular? _____)
- Chatham Chatlist
- Email
- Phone/text messages
- Social Networking site (like Facebook or Twitter)
- Any others that I haven't said? _____
- None/Not sure/prefer not to say

PART 3: Community Issues

39. This next section of questions will focus on potential problems in your community. For each potential problem, please tell us if this is “not a problem,” “a problem,” “a big problem” or “don’t know” thinking specifically about your community as you see it. **Hand participant card with response choices and definitions and read each option and its definition to respondent.** Here is a card with the answer choices and their definitions for reference.

Not a Problem The issue is not a problem and requires no additional attention by my community.

A Problem This issue is somewhat of a problem. My community needs to address this problem.

Big Problem This issue is a major problem. My community needs to address this problem now.

Don't Know I do not know enough information to determine whether or not this is a problem.

Appendix 3: 2014 Community Health Opinion Survey

Issue	<u>Not a Problem</u>	<u>A Problem</u>	<u>Big Problem</u>	<u>Don't Know</u>
Chronic Diseases (Heart Disease, Cancer, Diabetes)	0	1	2	d/k
Overweight or Obesity	0	1	2	d/k
Tick-borne Illnesses (such as Lyme Disease and Rocky Mountain Spotted Fever)	0	1	2	d/k
Alcohol Abuse	0	1	2	d/k
Tobacco Use (smoking, dip, chew, etc)	0	1	2	d/k
Prescription Drug Abuse	0	1	2	d/k
Illegal Drug Use (meth, heroin, marijuana, etc)	0	1	2	d/k
Access to Affordable Health Care	0	1	2	d/k
Access to Mental Health Services (like counseling, treatment)	0	1	2	d/k
Access to Substance Abuse Services (for alcohol and drug addiction)	0	1	2	d/k
Access to Prenatal Care	0	1	2	d/k
Availability of Services for Seniors	0	1	2	d/k
Availability of Services for individuals with physical disabilities	0	1	2	d/k
Access to Public Transportation	0	1	2	d/k
Affordability of Public Transportation	0	1	2	d/k
Availability of Affordable Childcare or After School Care	0	1	2	d/k
Availability of Services for Immigrants	0	1	2	d/k
Jobs/Adequate Local Employment	0	1	2	d/k
Hunger (which is prolonged lack of food)	0	1	2	d/k
Poor Housing Conditions	0	1	2	d/k
Availability of Affordable Housing	0	1	2	d/k
Homelessness	0	1	2	d/k

Appendix 3: 2014 Community Health Opinion Survey

Issue	<u>Not a Problem</u>	<u>A Problem</u>	<u>Big Problem</u>	<u>Don't Know</u>
Access to Clean Water	0	1	2	d/k
Child Abuse or Neglect	0	1	2	d/k
Domestic, Dating, or Sexual Violence (Rape or Sexual Assault)	0	1	2	d/k
Animal Cruelty or Abuse	0	1	2	d/k
Access to Animal Health Services (Rabies vaccine, spay/neuter, vet)	0	1	2	d/k
Unintended Pregnancy	0	1	2	d/k
Sexually Transmitted Infections including HIV/AIDS	0	1	2	d/k
Discrimination against people based on their sexuality	0	1	2	d/k
Other: please specify _____	0	1	2	d/k

In your opinion, which three issues, either from this list or not, most affect the health of people in your community? Please rank them in order of importance. You may rank fewer than three issues if you would like. Give participant a card with the choices above and mark responses.

PART 4: Demographics

We're almost finished! We just need to know a little more about who you are. Just to remind you, all the information you give us will be completely confidential. It will be reported only as a group summary.

40. What is your age? _____

Prefer not to say

41. What is the TOTAL income per year of all the members in your household combined?

Read choices and check answer choices that match response

- | | |
|--|---|
| <input type="radio"/> Under \$10,000 per year | <input type="radio"/> \$50,000 - \$74,999 per year |
| <input type="radio"/> \$10,000 - \$19,999 per year | <input type="radio"/> \$75,000 – 99,999 per year |
| <input type="radio"/> \$20,000 - \$34,999 per year | <input type="radio"/> \$100,000 or more per year |
| <input type="radio"/> \$35,000 - \$49,999 per year | <input type="radio"/> Prefer not to say/ Don't know |

42. How many people does this income support? _____

43. What is your gender? Do not read responses, select answer choice that matches response

- Female
- Male
- Other
- Prefer not to say

44. How would you describe your race or ethnicity? If they do not respond immediately, read the categories. Select all that apply.

- | | |
|---|---|
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> White or Caucasian |
| <input type="checkbox"/> Asian | <input type="checkbox"/> Hispanic or Latino |
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Don't know/Prefer not to say |
| | <input type="checkbox"/> Other: Please specify _____ |

45. Do you speak a language other than English at home? Do not read responses, select answer choice that matches response

- Yes
- No
- Prefer not to say

46. What is your employment status? Read choices and check all that apply

- Employed full-time
- Employed part-time
- Retired
- Student
- Armed forces/military
- Self-employed
- Stay at home parent
- Unable to work due to illness or injury
- Unemployed for less than one year
- Unemployed for more than one year
- Not sure/prefer not to say

47. What is the highest level of school, college or vocational training that you have finished? Read answer choices only if necessary. Check only one unless they have both a Professional and Doctorate Degree.

- Less than high school
- Some high school, no diploma
- High school graduate (or GED)
- Associate's Degree or Vocational Training
- Some college (no degree)
- Bachelor's Degree
- Master's Degree (MS, MPH, MA, MSW, etc)
- Professional school degree (MD, DDC, JD, etc)
- Doctorate degree (PhD, EdD, etc)
- Other: _____
- Not sure/prefer not to say

Focus Group Guide
2014 Community Health Assessment
Focus Group Guide

[Provide fact sheet with more information about assessment and points of contact]

Opening

- *Thank you* for taking the time to meet with us for this discussion group. We recognize that your time is valuable and we appreciate your participation.

- We are part of a community health assessment team consisting of Health and Human Service Agencies in Chatham County. They include:
Chatham County Department of Parks and Recreation
Chatham County Government
Chatham County Partnership for Children
Chatham County Public Health Department
Chatham County Schools
Chatham Hospital
Family Violence and Rape Crisis Services
Hispanic Liaison
Piedmont Health Services
A diverse group of community members

The purpose of group is to help the community to identify its strengths, challenges, and future directions.

- My name is _____ and I am from _____. (Fill in appropriate agency.) I am here today with _____ from _____ who will be taking notes on what is said during the discussion. The information we gather will be summarized and shared with the community and agencies within the county. The community assessment will also be used to update the annual Health of Chatham Report. A copy of the report will be sent to the state office of the Department of Health and Human Services. We will share with the community through local libraries, agencies, and the health department website at www.chathamnc.org/publichealth. If you would like to receive a copy of the executive summary by mail or e-mail, please put your name and address on the sign-up sheet.

- The *purpose* of speaking with you today is to find out about your thoughts and experiences of living in Chatham County. We are interested in your opinions. There are no right or wrong answers.

- **Time:** The discussion should last about an hour to an hour and a half.

- We distributed fact sheet as you arrived that described the assessment in more detail. On the fact sheets are phone numbers of people you can call if you would like more information after you leave here today. Did everyone get a fact sheet?

Confidentiality

- Your comments today will remain confidential. We will be reporting summaries of the comments made by community members but will not identify who said what, nor will we identify the names of the individuals who participate. We would like to only use first names in the discussion, if that is okay.
- We would also like to take notes and record this interview. Your input is important and we want to make sure that we accurately record what you tell us. Feel free not respond to any question we ask, or ask to stop the recorder at any time. After we are finished using the tapes to summarize what people say, the recordings will be stored at the Chatham County Public Health Department. However, your full name will not be attached to the recording. Is this okay with everyone?

Ground Rules

- We want your opinions. There are no right or wrong answers.
- I am not an expert. I am here to facilitate a discussion around strengths and issues in Chatham County.
- You are not required to answer any question you may not wish to answer.
- If at any time while we are talking you do not feel comfortable, you do not need to respond.
- Please speak clearly, listen to the responses of other participants, and do not interrupt others.
- Please give everyone a chance to speak.
- If you cannot hear what I am saying or what the other participants are saying, please ask us to speak up.
- Also, please do not discuss responses of the people in this discussion with others when you leave here today.
- Please turn off cell phones or put them on vibrate.

Guiding Questions

1. What do Chatham County community members think of as the strengths and weakness in their community?
 2. What do Chatham County community members think are the important health issues in their community?
 3. What community resources are important to Chatham County community members?
-

Opening

Let's start with introductions.

1. One at a time, please introduce yourselves and tell us where you live in Chatham County and how long you've lived there.

Community-Focused Questions

For the next couple questions, we will be talking about your community.

2. What do you consider to be your community in Chatham County?
 - a. County? Town? A particular neighborhood or other geographical area? A group?
3. Imagine someone was going to join your community, how would you describe your community to them?
 - a. What are the physical characteristics of your community?
 - b. Who lives in your community? Families? Seniors? Racial/ethnic groups?
 - c. What is the history of your community?
4. What do you think are the strengths or good things about your community?
 - a. Neighbors? Housing? Recreation activities? Transportation? Employment? Schools? Community services? Access to resources?
5. What are your concerns about your community?
 - a. Neighbors? Housing? Recreation activities? Transportation? Employment? Schools? Community services? Access to resources?
4. If you needed help for some reason, where would you turn to for help in your community?
 - a. For different types of help? Legal? Health? Financial?
 - b. What people would you turn to?
 - c. What community organizations would you turn to?
5. What resources or activities would you like to see in your community that are not here now?

- a. Neighbors? Housing? Recreation activities? Transportation? Employment? Schools? Community services? Access to resources?
 - b. What are some the obstacles you see for new projects in your community?
6. Where do you and others in your community get most of your information?
 - a. TV? Radio? Internet? Experience or comfort with technology?
 - b. Is this different for different types of information? Health information? Community events? Community resources?
 7. How has your community changed over the past five years?
 - a. What is different about your community now that was not the case 5 years ago?
 - b. Why do you think it has changed?
 8. How do you think your community will change over the next 5 years?
 - a. Why do you think it will change?

Health

For the rest of today's discussion we will be talking about people's health here in Chatham County.

9. Since we will be talking about health, what does being healthy mean to you personally?
 - a. Physically? Mentally?
10. Another way to think about health is looking at the health of a community, not individuals. To you, what would a healthy community look like?
11. What do you perceive as the major health issues in Chatham County?
12. Are there groups of people within your community whose health issues seem to be overlooked, or whose health needs are not met?
 - a. Who? Older Adults? Men? Women? People who live in rural areas?
 - b. In what ways?
 - c. Why do you think that might be?

Closing

13. Thinking about the conversations we've had today about your community and health, is there anything that we have not asked or that you would like to add?
14. Of all the issues we have talked about today, what issues do you think are the most important for your community to address?
15. Do you have any questions about the community health assessment process?

ADMIN STUFF:

- Request completion of the profile sheets

Appendix 4: 2014 Focus Group Guide

- Ask if anyone wants to sign up to receive the executive summary
- Ask if anyone wants a copy of the Health of Chatham report

Appendix 5: Youth Health Behavior Survey Results

Chatham County Youth Health Behavior Survey 2014				
Behavior Class	Behavior	Percentage	Middle	High
Dietary Behaviors	Did not Eat Breakfast	9.9%	10.0%	9.9%
	Ate Breakfast All 7 Days	40.9%	45.1%	37.3%
	Did Not Eat Fruit or Drink 100% Fruit Juices	4.5%	3.7%	5.2%
	Ate Fruit or Drank 100% Fruit Juices One or More Times Per Day	65.5%	72.0%	60.1%
	Ate Fruit or Drank 100% Fruit Juices Two or More Times Per Day	36.4%	41.6%	32.1%
	Ate Fruit or Drank 100% Fruit Juices Three or More Times Per Day	22.2%	26.6%	18.6%
	Did Not Eat Vegetables	11.7%	13.3%	10.4%
	Ate Vegetables One or More Times Per Day	38.4%	38.6%	38.2%
	Ate Vegetables Two or More Times Per Day	21.9%	20.5%	23.1%
	Ate Vegetables Three or More Times Per Day	9.7%	9.8%	9.5%
	Did Not Drink Soda or Pop	22.1%	21.4%	22.7%
	Drank Soda or Pop One or More Times Per Day	31.2%	33.6%	29.2%
	Drank Soda or Pop Two or More Times Per Day	20.9%	22.7%	19.4%
	Drank Soda or Pop Three or More Times Per Day	11.6%	13.4%	10.1%
	Did Not Drink Milk	18.0%	15.5%	20.1%
	Drank Milk One or More Times Per Day	42.6%	46.4%	39.5%
	Drank Milk Two or More Times Per Day	24.7%	28.0%	22.1%
Drank Milk Two or More Times Per Day	11.8%	13.6%	10.3%	
Physical Activity	Did Not Participate in at Least 60 Minutes of Physical Activity on at Least 1 Day	8.4%	6.1%	10.4%
	Physically Active at Least 60 Minutes per Day on 5 or More Days	53.7%	54.1%	53.4%
	Physically Active at Least 60 Minutes per Day on All 7 Days	31.1%	32.3%	30.0%
	Watched Television 3 or More Hours per Day	28.1%	32.2%	24.7%
	Used Computers 3 or More Hours per Day	41.3%	42.9%	39.9%
Obesity, Overweight, and Weight Control	Overweight**	23.7%	15.3%	29.8%
	Obese**	8.4%	4.2%	11.5%
	Described Themselves as Overweight	29.4%	27.2%	31.3%
	Were Trying to Lose Weight	47.3%	47.1%	47.4%
	Did Not Eat for ≥ 24 Hours to Lose Weight or to Keep from Gaining Weight	9.6%	9.0%	10.2%
	Took Diet Pills, Powders, or Liquids to Lose Weight or to Keep from Gaining Weight	3.7%	2.9%	4.3%
	Vomited or Took Laxatives to Lose Weight or to Keep from Gaining Weight	4.4%	4.1%	4.7%
Behaviors that Contribute to Unintentional Injuries	Texted or E-mailed While Driving	36.4%	--	36.4%
	Never or Rarely Wore a Bicycle Helmet	79.4%	77.3%	82.1%
	Never or Rarely Wore a Four-Wheeler Helmet	67.3%	61.7%	72.5%
	Never or Rarely Wore a Motorcycle Helmet	48.8%	48.3%	49.3%
	Never or Rarely Wore a Seat Belt While Riding	5.7%	5.7%	--
Behaviors that	Never or Rarely Wore a Seat Belt While Driving	5.8%	--	5.8%
	Carried a Weapon	21.0%	19.3%	22.5%
	Carried a Weapon on School Property	4.0%	2.7%	5.0%

Appendix 5: Youth Health Behavior Survey Results

Contribute to Violence	Easy to Get A Gun (Middle School)	26.9%	26.9%	--
	Easy to Get A Gun (High School)	29.7%	--	29.5%
	Physical Dating Violence (Middle School)	19.1%	19.1%	--
	Physical Dating Violence (High School)	4.9%	--	4.9%
	Sexual Dating Violence (Middle School)	3.6%	3.6%	--
	Sexual Dating Violence (High School)	9.0%	--	9.0%
	School Resource Officer is Helpful in Reducing School Violence	57.4%	59.1%	56.0%
	Felt Sad or Hopeless	26.6%	25.0%	28.0%
	Seriously Considered Attempting Suicide	12.6%	10.4%	14.4%
	Attempted Suicide	6.8%	5.9%	7.6%
Behaviors that Contribute to Pregnancy and STDs	Ever Had Sexual Intercourse	37.6%	--	37.6%
	Had Sexual Intercourse Before Age 13 Years	5.0%	--	5.0%
	Had Sexual Intercourse with Four or More Persons	10.9%	--	10.9%
	Drank Alcohol Last Time Had Sex*	9.3%	--	9.3%
	Used Condom Last Time Had Sex*	23.1%	--	23.1%
	Did Not Use Any Protection Last Time Had Sex*	7.1%	--	7.1%
	Used Birth Control Pills Last Time Had Sex*	12.2%	--	12.2%
	Used IUD Last Time Had Sex*	0.8%	--	0.8%
	Used An Implant Last Time Had Sex*	1.0%	--	1.0%
	Used a Shot or Patch Last Time Had Sex*	2.0%	--	2.0%
	Used Emergency Contraception Last Time Had Sex*	0.9%	--	0.9%
	Used Withdrawal Last Time Had Sex*	10.1%	--	10.1%
	Not Sure of Protection Last Time Had Sex*	6.7%	--	6.7%
	Parents Talked With Me About Sex	70.4%	58.8%	79.8%
	Taught About How to Avoid HIV and Other STDs in School	65.3%	42.9%	83.6%
	Taught About How to Prevent Pregnancy in School	63.0%	37.4%	83.9%
	Have Not Needed Reproductive Health Services	81.6%	68.5%	91.4%
	Have Needed, But Not Received Reproductive Health Services	3.4%	6.8%	0.9%
	Received Reproductive Health Services at Doctors Office	6.6%	10.1%	4.0%
	Received Reproductive Health Services at Health Department	7.2%	11.5%	4.1%
	Received Reproductive Health Services at Community Health Center	3.9%	4.0%	3.8%
	Received Reproductive Health Services at Planned Parenthood	2.1%	3.8%	0.8%
	Received Reproductive Health Services With School Nurse	1.7%	2.1%	1.4%
	Received Reproductive Health Services at Pharmacy	5.9%	8.5%	4.0%
	Received Reproductive Health Services at Hospital	3.7%	3.9%	3.5%
	Do Not Have Any Problems Getting Needed Reproductive Health Services	84.8%	89.9%	81.1%
	Do Not Get Needed Reproductive Health	2.9%	2.1%	3.5%

Appendix 5: Youth Health Behavior Survey Results

	Because Not Enough Services			
	Do Not Get Needed Reproductive Health Because Not Enough Hours	2.6%	1.1%	3.8%
	Do Not Get Needed Reproductive Health Because I Don't Know Where to Go	4.2%	3.0%	5.1%
	Do Not Get Needed Reproductive Health Because Cost of Services is too Expensive	3.9%	2.1%	5.3%
	Do Not Get Needed Reproductive Health Because Parent Permission Required	5.1%	3.5%	6.2%
	Do Not Get Needed Reproductive Health Because Not Confidential	3.8%	2.4%	4.8%
	Do Not Get Needed Reproductive Health Because Afraid Parents Will Find Out	8.4%	4.1%	11.4%
	Do Not Get Needed Reproductive Health Because Afraid Friends Will Find Out	3.5%	3.2%	3.8%
	Do Not Get Needed Reproductive Health Because I Don't Have Transportation	4.2%	2.0%	5.8%
	Do Not Get Needed Reproductive Health Because I'm Embarrassed	5.6%	6.1%	5.2%
	Do Not Get Needed Reproductive Health Because Not Teen Friendly	3.2%	2.4%	3.8%
	Get Sex Information From None	20.4%	31.1%	12.0%
	Get Sex Information From Friends	45.7%	34.8%	54.2%
	Get Sex Information From Partner	23.1%	14.1%	30.1%
	Get Sex Information From Parents	55.0%	46.9%	61.4%
	Get Sex Information From Grandparents	15.7%	15.5%	15.8%
	Get Sex Information From Other Family Members	30.7%	27.0%	33.6%
	Get Sex Information From A Peer Educator	23.7%	16.0%	29.7%
	Get Sex Information From Class	46.2%	35.2%	54.9%
	Get Sex Information From Planned Parenthood	5.1%	4.6%	5.5%
	Get Sex Information From A Doctor	12.8%	8.1%	16.5%
	Get Sex Information From the Hospital	9.5%	8.6%	10.3%
	Get Sex Information From the Health Department	9.8%	7.0%	12.0%
	Get Sex Information From the Internet	26.6%	17.8%	33.6%
	Get Sex Information From Social Media	20.4%	14.5%	25.1%
Tobacco Use	Easy to Get Tobacco	31.2%	13.8%	45.3%
	Moderate to Great Risk For Regular Cigarette Smoking	18.4%	20.3%	16.7%
	Parents Think it is Wrong For You to Smoke Cigarettes	90.7%	96.1%	86.3%
	Friends Think it is Wrong For you to Smoke Cigarettes	72.1%	85.5%	61.4%
	Ever Smoked Cigarettes	17.2%	8.1%	24.7%
	Smoked a Whole Cigarette by 6th Grade or Earlier*** (Middle School)	51.9%	51.9%	
	Smoked a Whole Cigarette by 8th Grade or Earlier*** (High School)	57.4%		57.4%
	Current Cigarette Use	7.8%	2.8%	11.9%
	Smoked More than 10 Cigarettes per Day***	13.1%	14.3%	12.9%
	Tried to Quit Smoking Cigarettes***	41.4%	36.3%	43.1%

Appendix 5: Youth Health Behavior Survey Results

	Smoked Cigarettes on School Property	4.5%	2.4%	6.2%
	Bought Cigarettes in a Store or Gas Station***	33.5%	14.5%	38.4%
	Gave Someone Else Money to Buy Cigarettes For Me***	33.2%	26.3%	35.0%
	Borrowed Cigarettes From Someone Else***	34.9%	32.9%	35.4%
	A Person 18 Years Old or Older Gives Cigarettes to Me***	30.5%	28.9%	31.0%
	Took Cigarettes From a Family Member	19.5%	27.6%	17.3%
	Took Cigarettes From a Store	7.0%	5.3%	7.5%
	Got Cigarettes in Another Way***	24.1%	39.5%	20.1%
	Current Smokeless Tobacco Use	5.2%	2.2%	7.7%
	Current Cigar Use	5.8%	1.8%	9.0%
	Current Tobacco Use	11.0%	3.9%	16.9%
Alcohol Use	Rode with a Driver Who Had Been Drinking Alcohol	14.6%	13.2%	15.7%
	Drove When Drinking Alcohol	6.1%		6.1%
	Easy to Get Alcohol	39.2%	21.6%	53.5%
	Moderate to Great Risk For Binge Drinking	28.4%	27.8%	28.9%
	Parents Think it is Wrong For You to Drink Alcohol	91.3%	94.8%	88.4%
	Friends Think it is Wrong For you to Drink Alcohol	71.8%	85.5%	60.8%
	Ever Drank Alcohol	34.9%	17.1%	49.7%
	Tried Alcohol by 6th Grade or Earlier*** (Middle School)	67.3%	67.3%	
	Tried Alcohol by 8th Grade or Earlier*** (High School)	57.1%		57.1%
	Current Alcohol Use	16.1%	4.9%	25.4%
	Current Binge Drinking	7.7%	1.8%	12.5%
	Buys Alcohol in Store or Gas Station***	8.6%	6.7%	9.0%
	Buys Alcohol at a Restaurant, Bar, or Club***	4.2%	5.2%	3.9%
	Buys Alcohol at a Public Event Such as a Concert or Sporting Event***	5.4%	6.7%	5.1%
	Gave Someone Else Money to Buy Alcohol***	26.6%	14.2%	29.4%
	Someone Gave Alcohol***	56.5%	46.3%	58.8%
	Took Alcohol From a Family Member***	28.9%	35.1%	27.6%
Got Alcohol Some Other Way***	30.3%	35.8%	29.1%	
Marijuana Use	Easy to Get Marijuana	28.1%	11.6%	41.3%
	Moderate to Great Risk For Smoking Marijuana Regularly	44.0%	30.9%	54.8%
	Parents Think it is Wrong For You to Smoke Marijuana	91.3%	96.3%	87.4%
	Friends Think it is Wrong For You to Smoke Marijuana	68.6%	85.5%	55.1%
	Ever Smoked Marijuana	19.2%	7.6%	28.9%
	Tried Marijuana by 6th Grade or Earlier*** (Middle School)	40.2%	40.2%	
	Tried Marijuana by 8th Grade or Earlier*** (High School)	46.3%		46.3%
	Current Marijuana Use	9.5%	2.8%	15.1%
Prescription Drug Use	Easy to Get Prescription Drugs	20.8%	12.8%	27.2%
	Moderate to Great Risk For Taking Prescription	20.8%	23.6%	18.5%

Appendix 5: Youth Health Behavior Survey Results

	Medications Not Intended For You			
	Parents Think it is Wrong For You to Use Prescription Medications Not Intended For You	95.3%	96.4%	94.5%
	Friends Think it is Wrong For You to Use Prescription Drugs Not Intended for You	82.4%	89.1%	77.1%
	Ever Used Prescription Drugs Not Intended For You	8.8%	5.6%	11.4%
	Used Prescription Drugs Not Intended For You by 6th Grade*** (Middle School)	67.3%	67.3%	
	Used Prescription Drugs Not Intended For You by 8th Grade*** (High School)	43.0%		43.0%
	Current Prescription Drug Use	4.1%	2.4%	5.4%
	Friend Gave Prescription Drugs***	39.3%	24.4%	43.8%
	Buys Prescription Drugs From Someone***	34.3%	31.7%	35.0%
	Took Prescription Drugs From a Family Member***	34.3%	43.9%	31.4%
	Got Prescription Drugs Some Other Way***	41.0%	48.8%	38.7%
Other Drug Use	Ever Used Inhalants	2.3%	3.2%	1.7%
	Used Inhalants by 6th Grade or Earlier*** (Middle School)	72.7%	72.7%	
	Used Inhalants by 8th Grade or Earlier*** (High School)	82.5%		82.5%
	Ever Used Cocaine	1.8%	1.2%	2.3%
	Used Cocaine by 6th Grade or Earlier*** (Middle School)	50.0%	50.0%	
	Used Cocaine by 8th Grade or Earlier*** (High School)	49.3%		49.3%
	Ever Used Methamphetamines	1.6%	1.0%	2.1%
	Used Methamphetamines by 6th Grade or Earlier*** (Middle School)	50.0%	50.0%	
	Used Methamphetamines by 8th Grade or Earlier*** (High School)	69.6%		69.6%
	Ever Used Ecstasy	2.4%	1.1%	3.4%
	Used Ecstasy by 6th Grade or Earlier*** (Middle School)	58.8%	58.8%	
	Used Ecstasy by 8th Grade or Earlier*** (High School)	36.3%		36.3%
	Ever Used Heroin	1.5%	1.1%	1.8%
	Used Heroin by 6th Grade or Earlier*** (Middle School)	100.0%	100.0%	
Used Heroin by 8th Grade or Earlier*** (High School)	40.0%		40.0%	
	Ever Injected Any Illegal Drug	2.3%	1.8%	2.7%
Substance Use	Offered, Sold, or Given an Illegal Drug on School Property	17.4%	11.4%	22.3%
	Used Alcohol or Other Drugs At Home With Family	22.2%	22.6%	22.1%
	Used Alcohol or Other Drugs At Home With Family Not Present	32.3%	15.1%	36.0%
	Used Alcohol or Other Drugs In a Car	24.1%	14.0%	26.2%
	Used Alcohol or Other Drugs At the Home of Adult Family Members	14.1%	14.0%	14.1%
	Used Alcohol or Other Drugs At the Home of	52.3%	32.3%	56.5%

Appendix 5: Youth Health Behavior Survey Results

	Friends			
	Used Alcohol or Other Drugs At School	9.2%	11.8%	8.7%
	Used Alcohol or Other Drugs In Other Places	56.8%	60.2%	56.0%
	Used Alcohol or Other Drugs During the School Day	4.2%	2.1%	6.0%
	Used Alcohol or Other Drugs Before School	6.5%	2.4%	9.9%
	Drug Problem at School	36.6%	29.0%	42.8%
	School Resource Officer is Helpful in Reducing Alcohol and Other Drug Use	52.4%	57.8%	48.3%

*Among those who had sex

**Estimates of overweight and obesity as calculations are based upon BMI, not child BMI percentiles

***Among Users

page 1

2014 Community Health Assessment High School Youth Health Behavior Survey This survey is about health behavior. It has been developed so you can tell us what you do that may affect your health. The information you give will be used to develop better health education for young people like yourself. The answers you give will be kept private. No one will know how you respond. Answer the questions based on what you really do. Completing the survey is voluntary. Whether or not you answer the questions will not affect your grade in this class. If you are not comfortable answering a question, just leave it blank. The questions that ask about your background will be used only to describe the types of students completing this survey. The information will not be used to find out your name. No names will ever be reported. Make sure to read every question thoroughly before you respond to it. When you are finished with the survey, follow your teacher's instructions. Thank you very much for your help.

page 2

The first questions are just for general background information.

1. Which school do you attend? (Select one option)

- Chatham Central
- Jordan-Matthews
- Northwood
- SAGE

2. How old are you? (Select one option)

- 13 years old
- 14 years old
- 15 years old
- 16 years old
- 17 years old
- 18 years old or older

3. What is your gender? (Select one option)

- Male
- Female

4. In what grade are you? (Select one option)

- 8th grade
- 9th grade
- 10th grade
- 11th grade
- 12th grade

5. How would you describe your race/ethnicity? (Select one or more responses)

- American Indian or Alaska Native
- Asian
- Black or African American
- Hispanic or Latino
- Native Hawaiian or Other Pacific Islander
- White

The next three questions are about your height and weight. The first question asks for the feet part of your height, the second question asks for the inches part. So, if you are 5 feet and 2 inches, you would respond to the first question with 5 and the second question with 2. The third question asks how many pounds you weigh.

6. How tall are you in feet? (Select one option)

- 3 feet
- 4 feet
- 5 feet
- 6 feet
- 7 feet

7. How tall are you in inches? (Select one option)

- 0 inches
- 1 inch
- 2 inches
- 3 inches
- 4 inches
- 5 inches
- 6 inches
- 7 inches
- 8 inches
- 9 inches
- 10 inches
- 11 inches

8. How many pounds do you weigh?

page 3

The next questions ask about food you ate or drank during the past 7 days. Think about all the meals and snacks you had from the time you got up until you went to bed. Be sure to include food you ate at home, at school, at restaurants, or anywhere else.

9. During the past 7 days, on how many days did you eat breakfast? (Select one option)

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days

- 5 days
- 6 days
- 7 days

10. During the past 7 days, how many times did you drink 100% fruit juices such as orange juice, apple juice, or grape juice? (Do not count punch, Kool-Aid, sports drinks, or other fruit-flavored drinks.) (Select one option)

- I did not drink 100% fruit juice during the past 7 days
- 1 to 3 times during the past 7 days
- 4 to 6 times during the past 7 days
- 1 time per day
- 2 times per day
- 3 times per day
- 4 or more times per day

11. During the past 7 days, how many times did you eat fruit? (Do not count fruit juice.) (Select one option)

- I did not eat fruit during the past 7 days
- 1 to 3 times during the past 7 days
- 4 to 6 times during the past 7 days
- 1 time per day
- 2 times per day
- 3 times per day
- 4 or more times per day

12. During the past 7 days, how many times did you eat vegetables? (Select one option)

- I did not eat vegetables in the past 7 days
- 1 to 3 times during the past 7 days
- 4 to 6 times during the past 7 days

- 1 time per day
- 2 times per day
- 3 times per day
- 4 or more times per day

13. During the past 7 days, how many times did you drink a can, bottle, or glass of soda, such as Coke, Pepsi, or Sprite? (Do not include diet soda or diet drink.) (Select one option)

- I did not drink soda during the past 7 days
- 1 to 3 times during the past 7 days
- 4 to 6 times during the past 7 days
- 1 time per day
- 2 times per day
- 3 times per day
- 4 or more times per day

14. During the past 7 days, how many glasses of milk did you drink? (Include the milk you drank in a glass or cup, from a carton, or with cereal. Count the half pint of milk served at school as equal to one glass.) (Select one option)

- I did not drink milk during the past 7 days
- 1 to 3 glasses during the past 7 days
- 4 to 6 glasses during the past 7 days
- 1 glass per day
- 2 glasses per day
- 3 glasses per day
- 4 or more glasses per day

The next questions ask about physical activity.

15. During the past 7 days, on how many days were you physically active for a total of at least 60 minutes per day? (Add up all the time you spent in any kind of physical activity that increased your heart rate and made you breathe hard some of the time.) (Select one option)

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days

16. On an average school day, how many hours do you watch TV? (Select one option)

- I do not watch TV on an average school day
- Less than 1 hour per day
- 1 hour per day
- 2 hours per day
- 3 hours per day
- 4 hours per day
- 5 or more hours per day

17. On an average school day, how many hours do you play video or computer games or use a computer for something that is not school work? (Count time spent on things such as Xbox, PlayStation, an iPod, an iPad or other tablet, a smartphone, YouTube, Facebook or other social networking tools, and the Internet.) (Select one option) (Select one option)

- I do not play video or computer games or use a computer for something that is not school work
- Less than 1 hour per day
- 1 hour per day
- 2 hours per day

- 3 hours per day
- 4 hours per day
- 5 or more hours per day

page 5

The next questions ask about body weight.

18. How do you describe your weight? (Select one option)

- Very underweight
- Slightly underweight
- About the right weight
- Slightly overweight
- Very overweight

19. Which of the following are you trying to do about your weight? (Select one option)

- I am not trying to do anything about my weight
- Lose weight
- Gain weight
- Stay the same weight

20. During the past 30 days, did you go without eating for 24 hours or more (also called fasting) to lose weight or to keep from gaining weight? (Select one option)

- Yes
- No

21. During the past 30 days, did you take any diet pills, powders, or liquids without a doctor's advice to lose weight or to keep from gaining weight? (Do not include meal replacement products such as Slim Fast.) (Select one option)

- Yes
- No

22. During the past 30 days, did you vomit or take laxatives to lose weight or to keep from gaining weight? (Select one option)

- Yes
- No

page 6

The next questions ask about safety.

23. During the past 30 days, on how many days did you text or e-mail while driving a car or other vehicle? (Select one option)

- I did not drive a car or other vehicle during the past 30 days
- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

24. When you rode a bicycle, skateboard or Razor/scooter during the past 12 months, how often did you wear a helmet? (Select one option)

- I did not ride a bicycle, skateboard or Razor/scooter in the past 12 months
- Never wore a helmet
- Rarely wore a helmet
- Sometimes wore a helmet
- Most of the time wore a helmet

Always wore a helmet

25. When you rode a four-wheeler or dirt bike during the past 12 months, how often did you wear a helmet? (Select one option)

- I did not ride a four wheeler or dirt bike in the past 12 months
- Never wore a helmet
- Rarely wore a helmet
- Sometimes wore a helmet
- Most of the time wore a helmet
- Always wore a helmet

26. When you rode a motorcycle or moped during the past 12 month, how often did you wear a helmet? (Select one option)

- I did not ride a motorcycle or moped in the past 12 months
- Never wore a helmet
- Rarely wore a helmet
- Sometimes wore a helmet
- Most of the time wore a helmet
- Always wore a helmet

27. How often do you wear a seat belt when riding in a car driven by yourself or someone else? (Select one option)

- Never
- Rarely
- Sometimes
- Most of the time
- Always

28. During the past 30 days, how many times did you ride in a car or other vehicle driven by someone who had been drinking alcohol? (Select one option)

- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

29. During the past 30 days, how many times did you drive a car or other vehicle when you had been drinking alcohol? (Select one option)

- 0 times
- 1 time
- 2 or 3 times
- 4 or 5 times
- 6 or more times

page 7

The next questions ask about violence-related behaviors.

30. During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club? (Select one option)

- 0 days
- 1 day
- 2 or 3 days
- 4 or 5 days
- 6 or more days

31. During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club on school property? (Select one option)

- 0 days
- 1 day

- 2 or 3 days
- 4 or 5 days
- 6 or more days

32. How easy would it be for you to get a gun if you wanted to? (Select one option)

- Extremely easy
- Fairly easy
- Somewhat easy
- Very hard
- Don't know

33. Has someone you were dating or going out with ever physically hurt you on purpose in a way that made you afraid? (Count such things as being hit, slammed into something, or injured with an object or weapon.) (Select one option)

- Yes
- No

34. Has someone you were dating or going out with forced you to do sexual things that you did not want to do? (Count such things as kissing, touching, or being physically forced to have sexual intercourse.) (Select one option)

- Yes
- No

35. How helpful do you think the School Resource Officer has been in reducing violence at your school? (Select one option)

- We do not have a School Resource Officer
- Very helpful
- Helpful
- Somewhat helpful

Not helpful

page 8

The next questions ask about sad feelings and attempted suicide. Sometimes people feel so depressed about the future that they may consider attempting suicide, that is, taking some action to end their own life.

36. During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities? (Select one option)

- Yes
 No

37. During the past 12 months, did you ever seriously consider attempting suicide? (Select one option)

- Yes
 No

38. During the past 12 months, how many times did you actually attempt suicide? (Select one option)

- 0 times
 1 time
 2 or 3 times
 4 or 5 times
 6 or more times

page 9

The next questions ask about the use of tobacco products, which include cigarettes, cigars, cigarillos, little cigars, chewing tobacco and dip.

39. How much do you think people risk harming themselves (physically or in other ways) if they smoke one or more packs of cigarettes per day? (Select one option)

- No risk
- Slight risk
- Moderate risk
- Great risk

40. What grade were you in when you smoked a whole cigarette for the first time? (Select one option)

- I have never smoked a whole cigarette
- 6th grade or below
- 7th - 8th grade
- 9th - 10th grade
- 11th - 12th grade

41. When was the last time you smoked all or part of a cigarette? (Select one option)

- I have never smoked a cigarette
- Prior to last year
- Within the last year
- Within the last 30 days
- Within the last week

42. During the past 30 days, on the days you smoked, how many cigarettes did you smoke per day? (Select one option)

- I did not smoke cigarettes during the past 30 days
- Less than 1 cigarette per day
- 1 cigarette per day
- 2 to 5 cigarettes per day

- 6 to 10 cigarettes per day
- 11 to 20 cigarettes per day
- More than 20 cigarettes per day

43. When was the last time you used chewing tobacco, snuff, or dip, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen? (Select one option)

- I have never used chewing tobacco, snuff or dip
- Prior to last year
- Within the last year
- Within the last 30 days
- Within the last week

44. When was the last time you smoked cigars, cigarillos or little cigars? (Select one option)

- I have never smoked cigars, cigarillos or little cigars
- Prior to last year
- Within the last year
- Within the last 30 days
- Within the last week

45. If you use tobacco products, how do you usually get them? (Select all that apply.)

- I do not use tobacco products
- I buy them in a store such as a convenience store, supermarket, discount store or gas station
- I give someone else money to buy them for me
- I borrow (or bum) them from someone else
- A person 18 years old or older gives them to me
- I take them from a family member

- I take them from a store
- I get them some other way

46. During the past 30 days, on how many days did you use tobacco products on school property? (Select one option)

- 0 days
- 1 or 2 days
- 3 to 5 days
- 6 to 9 days
- 10 to 19 days
- 20 to 29 days
- All 30 days

47. During the past 12 months, did you ever try to quit using tobacco products? (Select one option)

- I did not use tobacco products during the past 12 months
- Yes
- No

page 10

The next questions ask about drinking alcohol. This includes drinking beer, wine, wine coolers, and liquor such as rum, gin, vodka, or whiskey in any amount. For these questions, drinking alcohol does not include drinking a few sips of wine for religious purposes.

48. How much do you think people risk harming themselves (physically or in other ways) when they have 5 or more drinks of an alcoholic beverage per week? (Select one option)

- No risk
- Slight risk
- Moderate risk

Great risk

49. If you have tried drinking alcohol, about what grade were you in when you first tried it? (Select one option)

- I have never used alcohol
- 6th grade or below
- 7th - 8th grade
- 9th - 10th grade
- 11th - 12th grade

50. When was the last time you had at least one drink of alcohol? (Select one option)

- I have never used alcohol
- Prior to last year
- Within the last year
- Within the last 30 days
- Within the last week

51. During the past 30 days, what is the largest number of alcoholic drinks you had in a row, that is, within a couple of hours? (Select one option)

- I did not drink alcohol during the past 30 days
- 1 drink
- 2 drinks
- 3 drinks
- 4 drinks
- 5 drinks
- 6 or more drinks

52. If you drink alcohol, how do you usually get the alcohol you drink? (Select all that apply.)

- I do not drink alcohol
- I buy it in a store such as a liquor store, convenience store, supermarket, discount store or gas station
- I buy it at a restaurant, bar, or club
- I buy it at a public event such as a concert or sporting event
- I give someone else money to buy it for me
- Someone gives it to me
- I take it from a family member
- I get it some other way

page 11

The next questions ask about marijuana use. Marijuana also is called weed or pot.

53. How much do you think people risk harming themselves (physically or in other ways) if they smoke marijuana once or twice per week? (Select one option)

- No risk
- Slight risk
- Moderate risk
- Great risk

54. If you have ever tried marijuana, about what grade were you in when you first tried it? (Select one option)

- I have never used marijuana
- 6th grade or below
- 7th - 8th grade
- 9th - 10th grade
- 11th - 12th grade

55. When was the last time you used marijuana? (Select one option)

- I have never used marijuana
- Prior to last year
- Within the last year
- Within the last 30 days
- Within the last week

page 12

The next questions ask about other drugs.

56. If you have used prescription medications without a doctor's prescription or a doctor's recommendation (such as OxyContin, Percocet, Vicodin, codeine, Adderall, Ritalin, or Xanax), about what grade were you in when you first tried them? (Select one option)

- I have never used prescription medications without a doctor's prescription or a doctor's recommendation
- 6th grade or below
- 7th - 8th grade
- 9th - 10th grade
- 11th - 12th grade

57. When was the last time you used prescription medications (such as OxyContin, Percocet, Vicodin, codeine, Adderall, Ritalin, or Xanax), without a doctor's prescription or a doctor's recommendation? (Select one option)

- I have never used prescription medications without a doctor's prescription or a doctor's recommendation
- Prior to last year
- Within the last year
- Within the last 30 days
- Within the last week

58. Where do you get prescription medications not prescribed for you?

- I do not use prescription medications not prescribed to me
- A friend gives them to me
- I buy them from someone
- I take them from a family member
- I get them some other way

59. How much do you think people risk harming themselves (physically or other ways) if they use prescription medications that are not prescribed to them? (Select one option)

- No risk
- Slight risk
- Moderate risk
- Great risk

60. If you have sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high, about what grade were you in when you first tried it? (Select one option)

- I have never sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays
- 6th grade or below
- 7th - 8th grade
- 9th - 10th grade
- 11th - 12th grade

61. When was the last time you sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high? (Select one option)

- I have never sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays
- Prior to last year
- Within the last year

- Within the last 30 days
- Within the last week

62. If you have used any form of cocaine, including powder, crack, or freebase, about what grade were you in when you first tried it? (Select one option)

- I have never used cocaine
- 6th grade or below
- 7th - 8th grade
- 9th - 10th grade
- 11th - 12th grade

63. When was the last time you used any form of cocaine, including powder, crack or freebase? (Select one option)

- I have never used cocaine
- Prior to last year
- Within the last year
- Within the last 30 days
- Within the last week

64. If you have used methamphetamines (also called meth, speed, crystal, crank, or ice), about what grade were you in when you first tried it? (Select one option)

- I have never used methamphetamines
- 6th grade or below
- 7th - 8th grade
- 9th - 10th grade
- 11th - 12th grade

65. When was the last time you used methamphetamines (also called meth, speed, crystal, crank, or ice)? (Select one option)

- I have never used methamphetamines
- Prior to last year
- Within the last year
- Within the last 30 days
- Within the last week

66. If you have used ecstasy or hallucinogens such as LSD, acid, PCP or mushrooms, about what grade were you in when you first tried it? (Select one option)

- I have never used ecstasy or hallucinogens
- 6th grade or below
- 7th - 8th grade
- 9th - 10th grade
- 11th - 12th grade

67. When was the last time you used ecstasy or hallucinogens such as LSD, acid, PCP or mushrooms? (Select one option)

- I have never used ecstasy or hallucinogens
- Prior to last year
- Within the last year
- Within the last 30 days
- Within the last week

68. If you have used heroin (also called smack, junk, or China White), about what grade were you in when you first tried it? (Select one option)

- 6th grade or below
- 7th - 8th
- 9th - 10th
- 11th - 12th

69. When was the last time you used heroin (also called smack, junk or China White)? (Select one option)

- I have never used heroin
- Prior the the last year
- Within the last year
- Within the last 30 days
- Within the last week

70. If you use alcohol or other drugs (for example, marijuana or a medicine not prescribed to you), where do you use them? (Select all that apply.)

- I do not use alcohol or other drugs
- At home with family
- At home with family not present
- In a car
- At the home of adult family members
- At the home of friends
- At school
- Other places

71. During this school year, has anyone offered, sold, or given you an illegal drug (for example, marijuana, cocaine, or methamphetamines) or medicine not prescribed to you, on school property? (Select one option)

- Yes
- No

72. During your life, how many times have you used a needle to inject any illegal drug (such as heroin or methamphetamine) into your body? (Select one option)

- 0 times
- 1 time

2 or more times

page 13

The next questions are about alcohol and other drug use.

73. During this school year, have you used alcohol or other drugs during the school day? (Select one option)

- Yes
- No

74. During this school year, have you used alcohol or other drugs before coming to school? (Select one option)

- Yes
- No

75. How easy would it be for you to get alcohol? (Select one option)

- Extremely easy
- Fairly easy
- Somewhat hard
- Very hard
- Don't know

76. How easy would it be for you to get tobacco? (Select one option)

- Extremely easy
- Fairly easy
- Somewhat hard
- Very hard
- Don't know

77. How easy would it be for you to get marijuana? (Select one option)

- Extremely easy
- Fairly easy
- Somewhat hard
- Very hard
- Don't know

78. How easy would it be for you to get prescription medication not prescribed for you? (Select one option)

- Extremely easy
- Fairly easy
- Somewhat hard
- Very hard
- Don't know

79. Do you think there is a drug or alcohol problem at your school? (Select one option)

- Yes
- No

80. Do your parents or other adults in your family talk to you about the dangers of alcohol and other drug use? (Select one option)

- Yes
- No

81. If your parents or guardians knew you were drinking one or two drinks of an alcoholic beverage nearly every day, what would they think/how would they feel? (Select one option)

- It is not at all wrong

- It is a little wrong
- It is wrong
- It is very wrong

82. If your parents or guardians knew you were using tobacco, what would they think? (Select one option)

- It is not at all wrong
- It is a little wrong
- It is wrong
- It is very wrong

83. If your parents or guardians knew you were using marijuana, what would they think? (Select one option)

- It is not at all wrong
- It is a little wrong
- It is wrong
- It is very wrong

84. If your parents or guardians knew you were using prescription medication without a prescription, what would they think? (Select one option)

- It is not at all wrong
- It is a little bit wrong
- It is wrong
- It is very wrong

85. If your friends knew you were having one or two drinks of alcohol nearly every day, what would they think? (Select one option)

- It is not at all wrong
- It is a little bit wrong
- It is wrong

It is very wrong

86. If your friends knew you were using tobacco, what would they think?
(Select one option)

- It is not at all wrong
- It is a little bit wrong
- It is wrong
- It is very wrong

87. If your friends knew you were using marijuana, what would they think?
(Select one option)

- It is not at all wrong
- It is a little bit wrong
- It is wrong
- It is very wrong

88. If your friends knew you were using prescription medication without a prescription, what would they think? (Select one option)

- It is not at all wrong
- It is a little bit wrong
- It is wrong
- It is very wrong

89. How helpful do you think the School Resource Officer has been in reducing alcohol and other drug use at your school? (Select one option)

- We do not have a School Resource Officer
- Very helpful
- Helpful
- Somewhat helpful
- Not helpful

page 14

The next questions ask about sexual behavior.

90. Have you ever had sexual intercourse? (Select one option)

- Yes
- No

91. How old were you when you had sexual intercourse for the first time? (Select one option)

- I have never had sexual intercourse
- 11 years old or younger
- 12 years old
- 13 years old
- 14 years old
- 15 years old
- 16 years old
- 17 years old or older

92. During your life, with how many people have you had sexual intercourse? (Select one option)

- I have never had sexual intercourse
- 1 person
- 2 people

- 3 people
- 4 people
- 5 people
- 6 or more people

93. Did you drink alcohol or use drugs before you had sexual intercourse the last time? (Select one option)

- I have never had sexual intercourse
- Yes
- No

94. The last time you had sexual intercourse, did you and your partner use a condom? (Select one option)

- I have never had sexual intercourse
- Yes
- No

95. The last time you had sexual intercourse, what method other than condoms did you or your partner use to prevent pregnancy? (Select only one response)

- I have never had sexual intercourse
- No method was used to prevent pregnancy
- Birth control pills
- An IUD (intrauterine device such as Mirena, ParaGard or Skyla)
- An implant (such as Implanon or Nexplanon)
- A shot (such as Depo-Provera), patch (such as Ortho, Evra), birth control ring (such as NuvaRing)
- Emergency Contraception (Plan B)
- Withdrawal
- Not sure

96. Have your parents or other adults in your family ever talked with you about sex? (Select one option)

Yes

No

97. Have you ever been taught in school about how people can avoid being infected by HIV or other sexually transmitted infections (STD, STI)? (Select one option)

Yes

No

Not sure

98. Have you ever been taught in school about how people can avoid becoming pregnant? (Select one option)

Yes

No

Not sure

99. Where do you go for sexual and reproductive health services such as birth control, condoms, sexually transmitted infection (STI) testing and counseling or physical exams? (Check all that apply)

I have not needed to go

I have needed to go but I have not gone

Private doctor's office

Health Department Clinic (Pittsboro or Siler City)

Community health center (Piedmont Health Care Siler City Clinic or Moncure Health Center)

Planned Parenthood

School nurse

Pharmacy

Hospital

100. What things may prevent you from receiving the sexual and reproductive health services you need? (Check all that apply)

- I do not have any problems getting the services I need
- Not enough available services
- Hours of operation do not work with school hours
- I do not have enough information on where to go and what services are available
- Costs of services/services are too expensive
- Need parent's permission to get services
- Lack of confidentiality of services
- Afraid parents will find out
- Afraid friends will find out
- No transportation to get to services
- Embarrassed to ask about sex
- Services not designed for teens/not "teen friendly"

101. Where do you get information about sex? (Check all that apply)

- I have not had the opportunity to learn about sex
- Friends
- Boyfriend/girlfriend/partner
- Parents (mother/father/stepparent/fosterparent)
- Grandparents
- Other family members (brother/sister/cousins/aunt/uncle, etc.)
- Peer educators (people your own age who are educated about these matters with whom you could talk to in private)
- School/health education class
- Planned Parenthood
- Private doctor

Appendix 6: 2014 High School Youth Health Behavior Survey (YHBS)

Hospital

Health Department Clinic (Siler City or Pittsboro)

Internet (Google)

Social Media (Facebook, Twitter, blogs, etc.)

Appendix 7: Chatham County Community Resource List

NEED	SERVICE	SERVICE PROVIDER	PHONE NUMBER	COMMENTS	WEBSITE
Adult Education	Literacy	Central Carolina Community College (CCCC)		Pittsboro Campus Siler City Center	http://www.cccc.edu/continuingeducation/business-industries/
	GED/High School	CCCC	919-777-7700 919-777-7701, ext. 7721		
	ESL	CCCC	919-545-8044 919-545-8663		http://www.cccc.edu/ecd/departments/ccreadiness/ESL.php
Aging and Adult Services	Home-Delivered Meals (Meals-on-Wheels)	Chatham County Council on Aging	919-542-4512 (Pittsboro) 919-742-3975 (Siler City)		www.chathamcoa.org
	Congregate (Senior Center) Meals				
	In-Home Aide Personal Care				
	Family Caregiver Support				
	Health Promotion/Wellness				
	Volunteer Opportunities				
	Assistive and Mobility Equipment Loan				
	Adult Protective Services and Guardianship	Chatham County Department of Social Services	(919) 542-2759		http://www.chathamnc.org/Index.aspx?page=130
Special Assistance In-Home Program					
Child Care	Resources, Referrals	Child Care Networks	919-542-6644	English and Spanish speaking	http://www.childcarenetworks.org/
	Preschool Programs	Head Start	919-742-5316 919-851-7611		http://www.education.com/schoolfinder/us/north-carolina/siler-city/chatham-county-head-start/
		NC Pre-K	919-542-7449, ext. 31		http://www.chathamkids.org/moreatfour.html
	After School Programs	4-H Club	919-542-8202	Various Activities	http://www.chathamnc.org/Index.aspx?page=309
		Chatham County YMCA	919-545-9622		http://www.chcymca.org/locations/chatham/

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NEED	SERVICE	SERVICE PROVIDER	PHONE NUMBER	COMMENTS	WEBSITE
Child Care, Continued		Chatham County Schools	919-542-3626		http://www.chatham.k12.nc.us/
Community Service		Community Service Office	919-942-0941	Court ordered community service; \$200 program fee	
		Deep River Mediation	919-542-4075	For juveniles ordered to complete community service or restitution; no program fee	http://www.leecountyunitedway.org/deepriver/index.htm
Employment	Resources/Job Listing	JOCCA Job Link Center	919-542-4781		
		Employment Security Commission	919-742-7454		www.ncesc.com
	Training/Assessment	Vocational Rehabilitation	919-324-1500		http://dvr.dhhs.state.nc.us/
	Employment Assistance	Work First Program	919-542-2759		http://www.chathamnc.org/Index.aspx?page=460
Family Support	Pregnant women	Pregnancy Care Management	919-545-8367	-All programs of Chatham County Public Health Department -Main Health Dept. # 919-542-8220 -Supports families in a variety of ways	http://www.chathamnc.org/index.aspx?page=1602
	Families with children 0-5	Care Coordination for Children (CC4C)	919-545-8367		http://www.chathamnc.org/index.aspx?page=1602
	Disabled adults	Community Alternatives Program	919-742-5641		http://www.chathamnc.org/index.aspx?page=671
	Fathers with children 0-5	Focus on Fathers	919-545-8367		http://www.chathamnc.org/index.aspx?page=1602
	Parents of children 6-18	Communities in Schools of Chatham County	919-663-0116	Supports families in a variety of ways	http://www.cischattham.org
	Private therapeutic boarding school offering 8th - 12th grade college preparatory education	Auldern Academy	919-837-2336		http://www.auldern.com
	Seniors	Council on Aging	919-542-4512 919-742-3975		http://www.chathamcouncilonaging.org/
	Families, homeless mothers, abuse victims	Baptist Children's Homes	1-800-476-3669	Family and individual sessions with highly trained	www.bchfamily.org/centralarea

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Family Support, Continued	Families, homeless mothers, abuse victims		336-474-1200	physicians, adult living preparation classes, recreational programming, spiritual growth opportunities, residential care, parenting education classes, life-skill training for residents	
	Parents of children 3-6	KidSCOpe	919-542-9891	15-week program	http://chtop.org/Programs/KidSCOpe.html
	For children 7-17	Communities in Schools of Chatham County	919-663-0116 919-542-5155	Mentoring program	http://chathamcountytogether.org/our-programs/youth-development-programs/mentoring/
	For special needs children	UNC TEAACH Autism Program	919-966-5156		http://www.teacch.com/
		Children's Developmental Service Agency	919-707-5520	Developmental evaluations and assistance for children 0-3	www.ncei.org
		Chatham County Schools	919-542-3626	Ages 3 and up Developmental evaluations and assistance	http://www.chatham.k12.nc.us/
Family Violence	Crisis Hotline	Family Violence and Rape Crisis Services	919-545-0224 (hotline) 919-542-5445 (office)	24 hours; English and Spanish speaking	http://www.fvrc.org/
	Victim Services	Coalition for Family Peace		English and Spanish speaking; offering shelter, parent education, support groups, advocacy, crisis counseling, legal referrals	http://www.fvrc.org/?page_id=34
	Child Victim Services	Coordinator of Victim Services	919-542-1792	Victim advocacy for sexually abused children and their non-offending family members	
	Batterer Intervention	Family Violence and Rape Crisis Center PEACE program	919-542-5445	A 26 week class for adults who are violent toward their partners	http://www.fvrc.org/

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NEED	SERVICE	SERVICE PROVIDER	PHONE NUMBER	COMMENTS	WEBSITE
Family Violence, Continued	Children Exposed to Violence	Child Protective Services, Department of Social Services	919-542-2759	Mandatory reporting of child abuse victims	http://www.chathamnc.org/index.aspx?page=547
	Supervised Visitation & Exchange	Family Visitation Services	919-542-5281	Provides a place to exchange children & supervise visitation; On-site security	http://www.svnetwork.net/providers_detail.asp?page=1&memID=325
Financial	Assistance	DSS	919-542-2759	Work First, Food Stamps, help w/ utilities	WORK FIRST: http://www.chathamnc.org/Index.aspx?page=465 FOOD STAMPS: http://www.chathamnc.org/Index.aspx?page=462 UTILITIES: http://www.chathamnc.org/Index.aspx?page=464
		Salvation Army	919-542-1593 919-663-0443	Disaster relief, utilities	http://www.salvationarmycarolinas.org/greensboro/chatham/
	Child Support	Child Support Office	919-542-2759	At DSS	http://www.chathamnc.org/Index.aspx?page=458
Food	Emergency food supply	CORA	919-542-5020	Need referral from an agency or church	http://www.corafoodpantry.org/
		Haw River Church	336-578-0611	Second Saturday and Fourth Thursday of each month	http://hawriverumc.org/
		Mt. Gilead Baptist Church	919-542-2431		http://mountgileadbaptist.org/
		Alston Chapel Church	919-542-4111	Monday, Wednesday and Friday	
		Take and Eat Food Pantry	919-533-9330	Through Evergreen UMC	
	Ongoing food assistance	DSS Food Stamps	919-542-2759		http://www.chathamnc.org/Index.aspx?page=462
		WIC – Moncure CHC,SCCHC	919-542-4991		http://www.piedmonthealth.org/moncure

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NEED	SERVICE	SERVICE PROVIDER	PHONE NUMBER	COMMENTS	WEBSITE
Health Insurance	General Assistance	NC Health Choice	919-542-2759	Free/reduced price health care for children	http://www.chathamnc.org/Index.aspx?page=695
		Medicaid	919-542-2759		http://www.chathamnc.org/Index.aspx?page=461
Housing	Transitional Housing	Project HomeStart	919-932-6025		http://www.ifcweb.org/services.html
	Families, homeless mothers, abuse victims	Baptist Children's Homes	336-474-1200 1-800-476-3669	Family and individual sessions for: Preparation for adult living, recreational programming, Spiritual growth opportunities, residential care, Parenting education, Life Skill training for residents	http://www.bchfamily.org/help/
	Resources and Referrals	Chatham Co. Housing Authority	919-742-1236		http://www.chathamnc.org/Index.aspx?page=215
		Habitat for Humanity	919-542-0794		http://www.chathamhabitat.org/
Immigrant information	Resources and Referrals	Hispanic Liaison	919-742-1448	Orientation Program	http://www.hispanicliaison.org/
Legal Issues	Legal Services	Legal Aid of North Carolina – Pittsboro office	919-542-0475		http://www.legalaidnc.org/Public/Learn/offices/pittsboro/default.aspx
	Paternity establishment, court order child support	Child Support Office	919-542-2759		http://www.chathamnc.org/Index.aspx?page=458

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Mediation	General Mediation	Deep River Mediation	919-542-4075	Victim-Offender, Community Mediation, Teen Court, Juvenile Community Service, Juvenile Restitution, Family and Divorce, District Court Mediation, anger management	http://www.leecountyunitedway.org/deepriver/index.htm
Medical Providers/ Health		Call Health Department for a list	919-542-8220 919-742-5641		
Mental Health	Assessment and treatment	Carolina Outreach	919-542-4042	In-home therapy and support	http://www.carolinaoutreach.com/
		Trinity Behavioral Healthcare, PC	919-663-2955 919-663-2975 919-542-2141 919-542-2171	Pittsboro and Siler City Offices	
		Trinity Behavioral Healthcare After Hours Crisis Line	336-212-9891		
		El Futuro – Siler City	919-799-2625 or Toll Free 877-235-6809	Services for Spanish-speaking people	http://www.elfuturo-nc.org/welcome/
	For children 0-6 with emotional/behavioral issues	Preschool Outreach Program	919-542-9891	Offers child-specific support for child care providers	http://chtop.org/Programs/KidScope.html
	Pregnancy, Postpartum Depression, Pregnancy Loss and Infertility	UNC Center for Women’s Mood Disorders	919-966-9640	The Center provides comprehensive treatment for reproductive mood disorders (depression during pregnancy, postpartum depression, pregnancy loss, and infertility).	www.womensmooddisorders.org

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NEED	SERVICE	SERVICE PROVIDER	PHONE NUMBER	COMMENTS	WEBSITE
Poison Control	General	National Poison Control Hotline	1-800-222-1222	Provides immediate, free, expert advice over the phone about treatment for possible exposure to poisons.	http://www.ncpoisoncenter.org/
Parenting Education	Families, homeless mothers, abuse victims	Baptist Children's Homes	336-474-1200 1-800-476-3669	Family and individual sessions with highly trained physicians, adult living preparation classes, recreational programming, spiritual growth opportunities, residential care, parenting education classes, life skill training for residents	www.bchfamily.org/centralarea
	Behavioral and emotional issues	Communities in School of Chatham County	919-663-0116 919-542-5155		http://chathamcountytogether.org
Recreation	General	Chatham County Parks and Recreation Department	919-545-8555		http://www.chathamnc.org/Index.aspx?page=150
		Siler City Recreational Facilities: Paul Braxton Gym Paul Braxton Recreational Center	919-742-2699 919-742-4732		http://www.silercity.org/index.asp?Type=B_BASIC&SEC=%7B8297BB84-8B09-4620-B8A9-82B98893CB1B%7D
		4-H Club	919-542-8202		http://www.chathamnc.org/Index.aspx?page=309
		Chatham YMCA	919-545-9622		http://www.chcymca.org/locations/chatham
		Girl Scouts of Chatham County	919-545-6204		http://sites.google.com/site/chathamcountygirlscouts/
	Girl Scout administrative organization	Girl Scouts North Carolina Coastal Pines	919-782-3021 or 1-800-284-4475	Provides girl scout leader training, scholarships, and organizes local events	http://www.nccoastalpines.org/

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Student Services	Educational support services for students	Chatham County Schools Student Services	919-542-6400		http://student-services.district.chatham.k12.nc.us /
Substance Abuse Treatment	General	Project Turnaround	919-932-2930	Adult and Juvenile programs	http://www.nccourts.org/County/Chatham/Programs/Turnaround.asp
	Pregnant women & mothers of infants	Horizons –UNC	919-966-9830	Outpatient program; inpatient program; residential	
	General	Trinity Behavioral Healthcare	336-212-9891	Assessment, outpatient treatment, referrals	
	Spanish speaking services	El Futuro	919-799-2625	Assessment and treatment	
	Spanish speaking services, continued	Murray and Associates	919-876-2242	DWI classes	
	Support		Narcotics Anonymous	919-831-5321	Call for mtg times & locations
Alcoholics Anonymous			1-888-237-3235		http://www.aanc33.org/
Summer Camps	General	4-H Club	919-542-8202		http://www.chathamnc.org/Index.aspx?page=309
		Chatham County Parks and Recreation Department	919-545-8555		http://www.chathamnc.org/Index.aspx?page=636
Translation Services	Translation	Hispanic Liaison	919-742-1448		
		CHICLE	919-933-0398		http://www.chi-cle.com/
Transport	General transportation	Chatham Transit Network	919-542-5136	Call for schedules and pickup	http://www.chathamtransit.org/
		DSS –Medicaid Transportation	919-542-2759	Call 72 hours before appt.	

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