

Cherokee County 2013 *State of the County Health Report*

TO ASSESS, ADDRESS AND ASSURE THE HEALTH AND
ENVIRONMENTAL NEEDS OF CHEROKEE COUNTY.

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The Cherokee County Health Department is pleased to present the 2013 State of the County Health Report (SOTCH), with the focus on Cherokee County's top health issues. Cherokee County completed their most recent Community Health Assessment (CHA) in 2012. Physical Activity and Nutrition was determined to be the first priority because they work together for better health. In Cherokee County obesity and disease rates are on the rise with inadequate nutrition and physical activity practices being two of the most common contributing factors. Tobacco use was the second priority and Chronic Disease was chosen to be the third. This SOTCH report will give and update on how we are working to address these issues, and will also serve to educate Cherokee County residents about the health issues in their community. There have been no new emerging issues affecting the communities health since the 2012 CHA was completed in December 2012.

Top Health Concerns Based on Primary and Secondary Data

► PHYSICAL ACTIVITY & NUTRITION

► TOBACCO USE

► CHRONIC DISEASE

**Unless otherwise, all data is from the State Center for Health Statistics*

Physical Activity & Nutrition

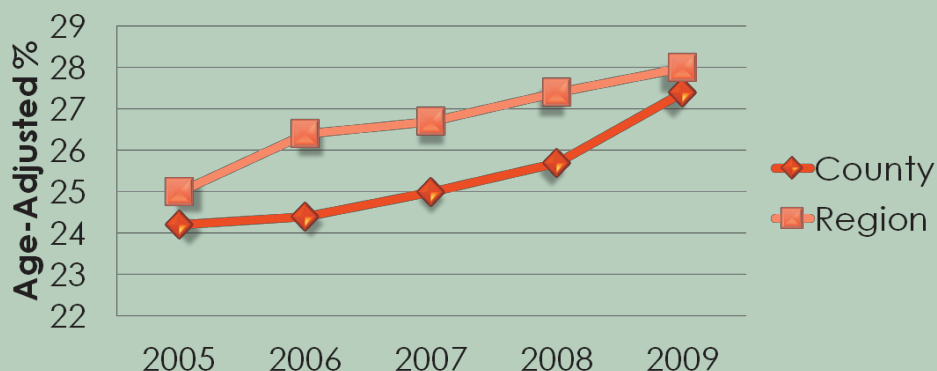
During the 2012 CHA it was reported that only 1 out of 10 residents of Cherokee County ate an average of five or more servings of Fruits/Vegetables per day within the past week according to the WNC Healthy Impact Survey that was completed. The survey also reported that only 5 out of 10 people participated in moderate physical activity at least 5 times a week for 30 minutes at a time, and/or vigorous physical activity (activities that cause heavy sweating or large increases in breathing or heart rate) at least 3 times a week for 20 minutes at a time. When looking and comparing CDC obesity prevalence data there was a 13.2% increase in the obesity rate in Cherokee County from 2005 to 2009. The same trend was consistent regarding overweight and obese children ages 2-18 in Cherokee County as well. We will be working toward the goal of increasing the percentage of adults consuming the recommended daily servings of fruits and vegetables from 10% to 15% by December 2015.

Recently, with the financial and technical assistance of the Community Transformation Grant Region 1, Cherokee County Health Department was able to enhance and expand local access to fresh fruits and vegetables through partnering with Farmers Markets and roadside stands in Cherokee County. Through this project 10 individual farmers who have roadside stands received items such as tents, tables, signage, coolers, and reusable bags. These resources allowed some farmers to vend in multiple locations, store their produce longer in harsh weather, increase visibility, and free up financial resources to produce more crops. A strong partnership has also been formed with the



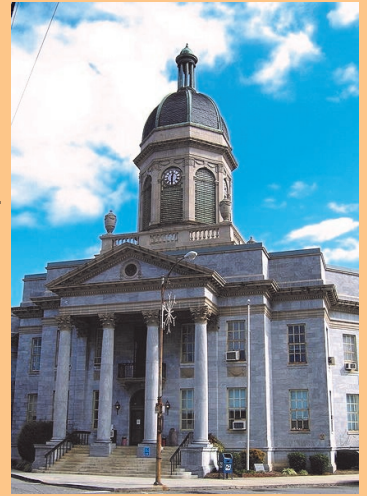
Cedar Valley Farmers Market in Murphy through this initiative as well. This season they were awarded tents, tables, a cooking demo kit, signage, coolers, and equipment to help expand and enhance the current market. There is also a growing relationship with the small Andrews Farmers Market and efforts are being made to help them grow by supplying signage to increase Market visibility, and by providing resources such as tables and tents to improve service efficiency. In the future we anticipate that these partnerships will grow stronger and we will begin to see a noticeable change in market participation and local grower returns.

**Adult Obesity Prevalence Estimate
(CDC)**



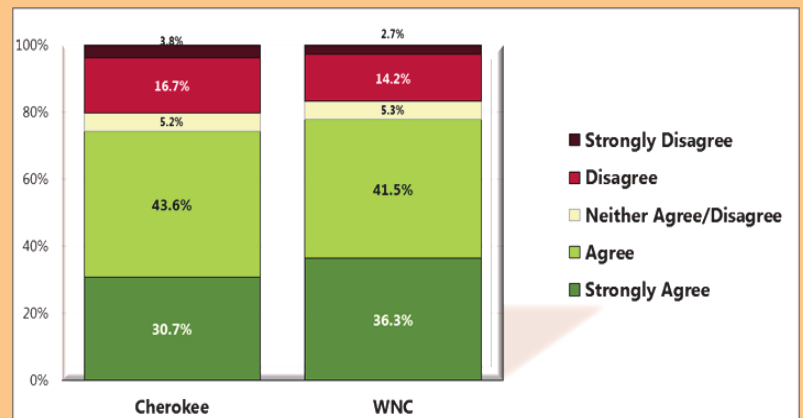
Tobacco Use

Tobacco use is the leading cause of preventable deaths in North Carolina. In Cherokee County approximately 30% of all cancer deaths and nearly 90% of all lung cancer deaths are caused by smoking. The harmful effects of smoking do not end with the smoker. An estimated 88 million nonsmoking Americans, including 54% of children aged 3–11 years, are exposed to secondhand smoke. Addressing tobacco use is complex and will require the collaborative planning, action and coordination of multiple partners in our community. Currently, Cherokee County Health Department is working with County Commissioners for moving forward with a county ordinance to limit or restrict the use of tobacco products on county property. The goal is to have a ordinance in place by July 2014. Tobacco-free environments will promote healthy social norm as well as keep employees and visitors away from the dangers of second hand smoke.



During the 2012 Community Health Assessment – WNC Healthy Impact survey 3 out of 10 residents of Cherokee County said they used some form of tobacco products. To be even more specific, data showed that 3 out of 10 mothers had reported having smoked during pregnancy.

"I believe it is important for government buildings and grounds to be 100% tobacco-free"
 (WNC Healthy Impact Survey)



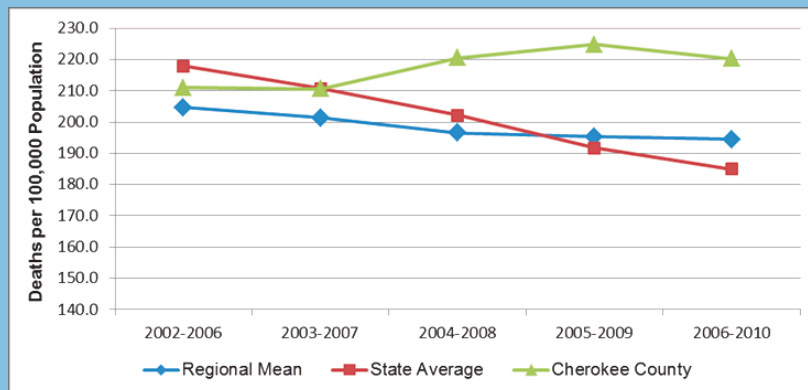
The WNC Healthy Impact Survey showed that residents of Cherokee County strongly support the desire for more tobacco free environments.

Chronic Disease

Over the next 20 years Cherokee County is expected to go through a big shift in population age. The percentage of adults here in our county will rise by a noteworthy 33%. This projection translates into an estimated 9,386 residents of Cherokee County being age 65 and older. According to state projected population growth this will mean that about 3 out of 10 people in Cherokee County will be age 65 or older. With this projected growth Cherokee County needs to be prepared for an aging population. Many changes and considerations will need to be made across all sectors of the county along with public health.

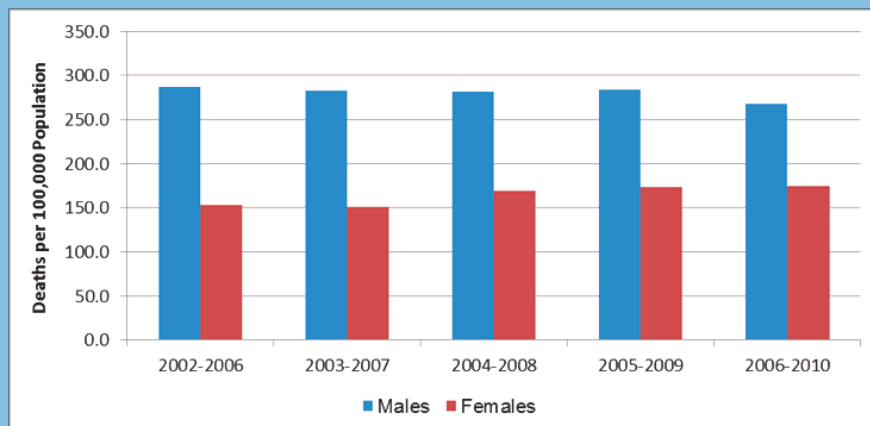
Public health efforts to promote health and functional independence are critical strategies in helping older adults stay healthy. Research has shown that poor health does not have to be an inevitable consequence of aging. Older adults who practice healthy behaviors, take advantage of clinical preventive services, and continue to engage with family and friends are more likely to remain healthy, live independently, and incur fewer health-related costs. An essential component to keeping older adults healthy is preventing chronic diseases and reducing associated complications. About 80% of older adults have one chronic condition, and 50% have at least two.

Chronic diseases are the most common and costly of all the health problems, but they are also the most preventable. Four common, health-damaging, but modifiable behaviors—tobacco use, insufficient physical activity, poor eating habits, and excessive alcohol use are responsible for much of the illness, disability, and premature death related to chronic diseases. Currently, Cherokee County Health Department is working to reduce the heart disease mortality rate from 220 per 100,000 to 154 per 100,000 people by December 2015 through increasing access to lifestyle change programs, healthy food options and early disease detection



Heart Disease Mortality Rate, Deaths per 100,000 Population

Five-Year Aggregates (2002-2006 through 2006-2010)



Gender Disparities in Heart Disease Mortality, Cherokee County

(Five-Year Aggregates, 2002-2006 through 2006-2010)

Low Birth Weight

Even though there is not a specific action plan for addressing low birth weight, the Cherokee County Health Department and community partners are continuing to monitor this issue. Low birth weight is slightly decreasing here in Cherokee County but the average is still higher than regional totals. We are working with community partners through education and prevention. One of the big risk factors we have observed that is on the rise here in Cherokee County is smoking during pregnancy. Prenatal programs within the health department are working to promote healthy choices during pregnancy in order to prevent such complications. We have also seen a decrease in mothers who said that they had received prenatal care during their first trimester which could also be a contributing cause.

Low-Weight Births (Five-Year Aggregates, 2004-2008 through 2007-2011)

Geography	2004-2008		2005-2009		2006-2010		2007-2011	
	#	%	#	%	#	%	#	%
Cherokee County	138	10.5	129	9.8	130	10.3	116	9.6
Regional Total	3,467	8.3	3,434	8.2	3,373	8.2	3,194	8.1
State Total	57,823	9.1	58,461	9.1	58,260	9.1	57,604	9.1

Morbidity & Mortality

In 2010 the leading causes of death in Cherokee County were heart disease, cancer, chronic lower respiratory disease. These three conditions made up almost 56% of all county deaths. They were also the leading causes of death in 2011 and 2012

Rank of Cause-Specific Mortality Rates for the Fifteen Leading Causes of Death (Five-Year Aggregate, 2008-2012)

Leading Cause of Death	Rank	Deaths
Heart Disease	1	427
Total Cancer	2	410
Chronic Lower Respiratory Disease	3	111
All Other Unintentional Injuries	4	85
Cerebrovascular Disease	5	78

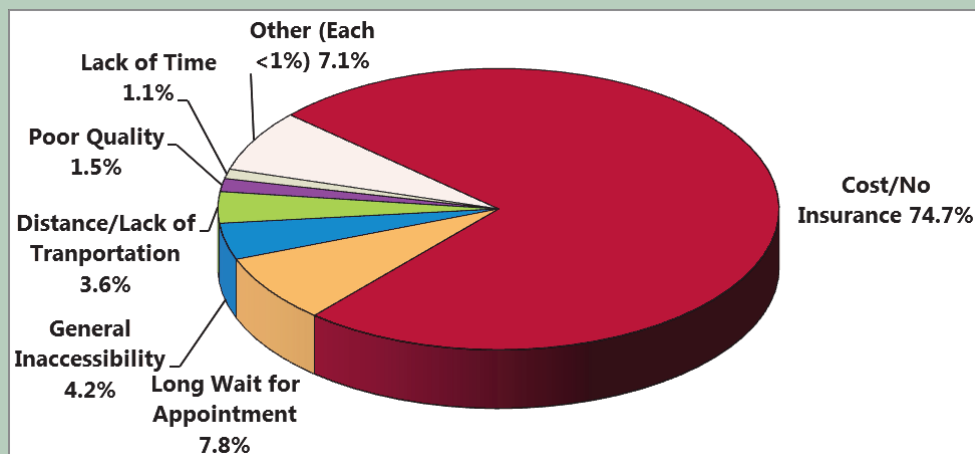
New and Immerging Issues

Access to comprehensive, quality health care services is important for the achievement of health equity and for increasing the quality of a healthy life for everyone. It impacts: overall physical, social, and mental health status; prevention of disease and disability; detection and treatment of health conditions; quality of life; preventable death; and life expectancy. Access to health services means the timely use of personal health services to achieve the best health outcomes. It requires three distinct steps: 1) gaining entry into the health care system; 2) accessing a health care location where needed services are provided; and 3) finding a health care provider with whom the patient can communicate and trust (DHHS, 2010). When conducting the survey for the 2012 CHA we found that the reason most people are not receiving medical care was due to cost/no insurance. With the implementation of the upcoming Affordable Care and new regulations regarding insurance and patients we are hopeful that this barrier will begin to dwindle.

Primary Reason for Inability to Get Needed Medical Care (WNC Healthy Impact)

(Adults Unable to Get Needed Medical Care at Some Point in the Past Year)

(Western North Carolina, 2012)



Also within the next year the Eastern Band of Cherokee Indians will be constructing a casino here in Cherokee County. This establishment is estimated to produce hundreds of jobs in the county. Along with this casino will also come thousands of tourists throughout the year. We do not know yet of all the positive and negative impact on our county but what is for sure is that it will change many aspects of our community and those aspects will include health.

This SOTCH report will be available to the community partners and the general population of the Cherokee County website, at the Nantahala Regional Library and Cherokee County Chamber of Commerce. The Cherokee County Board of Health will be presented with this information and the Cherokee County Commissioners will also receive this report through direct mailing.

To help us work toward a healthier Cherokee County or for more information on projects mentioned in this document please contact 828-837-1212

December 3, 2013