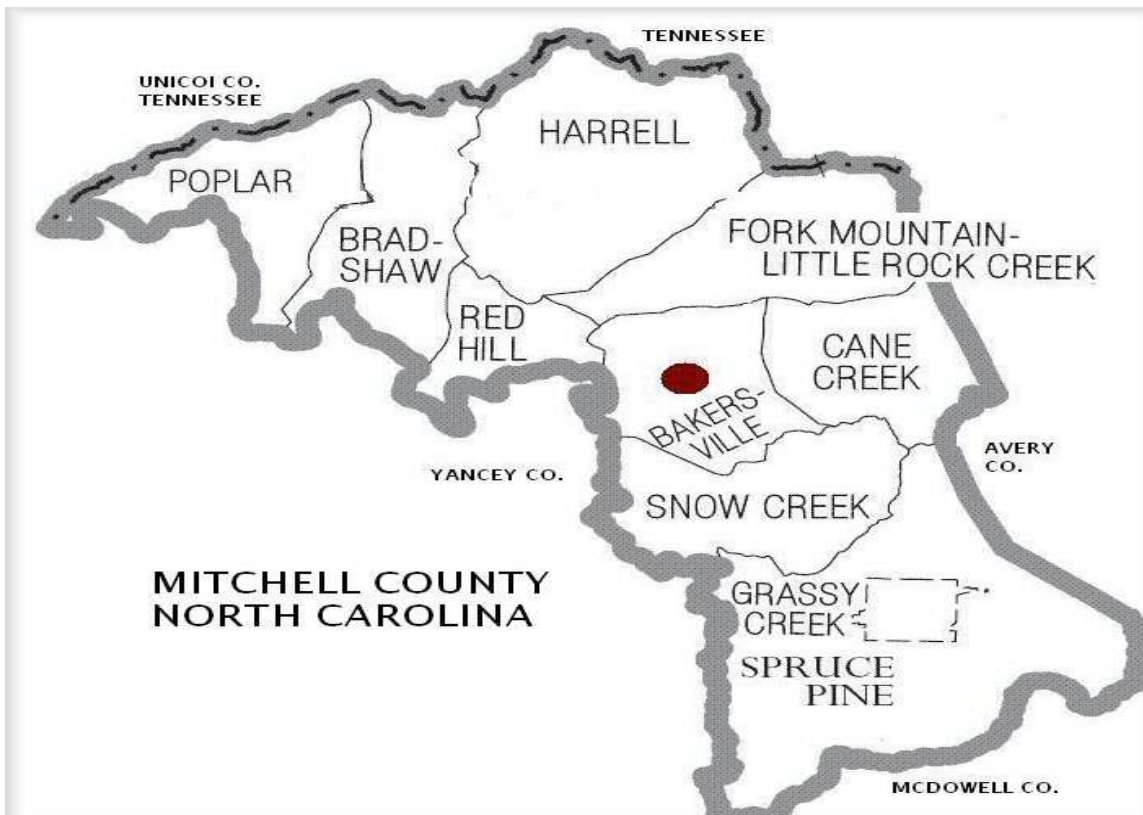


# Mitchell County 2009



## COMMUNITY HEALTH ASSESSMENT

Mitchell County is located in Western North Carolina, approximately 50 miles northeast of Asheville, North Carolina and 25 miles southeast of Johnson City, Tennessee. It is located in the Blue Ridge Mountains. The County's total land is 220 miles. Bakersville is the county seat, with a population of approximately 400. The county's largest town, Spruce Pine, is located in the southern part of the county and has a population of approximately 2,000. The county's average year-round temperature is 52 degrees and it receives an average of 46.7 inches of rain annually. Elevation ranges from 1,700 to 6,313 feet above sea level with an average elevation of 3,000 feet. The mountain climate is particularly appropriate for any number of outdoor activities such as whitewater rafting, hiking, backpacking, camping, fishing, horseback riding, canoeing, kayaking, mountain biking, and picnicking.

### HOW THE COMMUNITY ASSESSMENT WAS CONDUCTED:

#### **COMMUNITY HEALTH ASSESSMENT TEAM**

The following people participated in the development and implementation of the community health assessment:

NAME, AGENCY, AND CONTACT INFORMATION			CHA ROLE
Nancy Yantchook, Chairperson of MCHP	6728 N 226 Hwy. Bakersville, NC 28705	Phone: 828-688-2622 <a href="mailto:paulnancyniles@aol.com">paulnancyniles@aol.com</a>	Participated in Listening Sessions
Ron McKinney, Asst. Chairperson of MCHP	PO Box 176 Bakersville, NC 28705	Phone: 828-688-2740 <a href="mailto:ronmck@gte.net">ronmck@gte.net</a>	Assisted with Listening Sessions and Distribution of Surveys
Libby McKinney, Secretary of MCHP	PO Box 176 Bakersville, NC 28705	Phone: 828-688-2740 <a href="mailto:ronmck@gte.net">ronmck@gte.net</a>	Assisted with Listening Sessions and Distribution of surveys
Reid Duncan, Office Manager of BCMC Treasurer of MCHP	Bakersville Community Medical Clinic PO Box 27 Bakersville, NC 28705	Phone: 828-688-2104 Fax: 828-688-1334 <a href="mailto:Duncan@bakersville.com">Duncan@bakersville.com</a>	Participated in Listening Sessions
Rick Spurling, MCS Asst. Superintendant	Mitchell County Schools 72 Ledger School Rd. Bakersville, NC 28705	Phone: 828-688-4432 Fax: 828-766-2221 <a href="mailto:rspurling@mcscnc.org">rspurling@mcscnc.org</a>	Participated in Listening Sessions
Lynda Craig & Pat Silver MCS School Nurses	Mitchell County Schools 72 Ledger School Rd. Bakersville, NC 28705	Phone: 828-688-4432 Fax: 828-766-2221 <a href="mailto:lcraig@mcscnc.org">lcraig@mcscnc.org</a> <a href="mailto:psilver@mcscnc.org">psilver@mcscnc.org</a>	Assisted with Listening Sessions and Distribution of Surveys
Anita McGee & Cindy Stafford Nurses at School & Family Health Centers	Buladean School & Tipton Hill School Bakersville, NC 28705	<a href="mailto:Amcgee.rm@gmail.com">Amcgee.rm@gmail.com</a> <a href="mailto:cindystaff@gmail.com">cindystaff@gmail.com</a>	Assisted with Listening Sessions and Distribution of Surveys
Kathy Garland, Maternal Care Coordinator	Mitchell County Health Department 130 Forest Service Drive Bakersville, NC 28705	Phone: 828-688-2371 Fax: 828-688-3866 <a href="mailto:Kathy.garland@trhd.dst.nc.us">Kathy.garland@trhd.dst.nc.us</a>	Assisted with Listening Sessions, Distribution of Surveys, and helped with Community Forum
Steve North,	Bakersville Community	Phone: 828-688-2104	

Doctor at BCMC	Medical Clinic PO Box 27 Bakersville, NC 28705	Fax: 828-688-1334 <a href="mailto:Steve.north@mac.com">Steve.north@mac.com</a>	Assisted with creation of Surveys
Jennifer Simpson, Executive Director	Mitchell-Yancey Partnership for Children PO Box 1387 Burnsville, NC 28714	Phone: 828-682-0047 Fax: 828-682-7978 <a href="mailto:m-yafc@storefronttech.us">m-yafc@storefronttech.us</a>	Assisted with Listening Sessions and Distribution of surveys
Mary Tichenor, Social Worker	Mitchell County Senior Center 152 Ledger School Road Bakersville, NC 28705	Phone: 828-688-3019 Fax: 828-688-2314 <a href="mailto:marytichenor@bellsouth.net">marytichenor@bellsouth.net</a>	Assisted with Secondary Data Collection and Participated in Community Forum
Sara Thompson Marketing & Public Relations Director	Blue Ridge Regional Hospital 125 Hospital Drive Spruce Pine, NC 28777	Phone: 828-765-4201 <a href="mailto:Sara.thompson@msj.org">Sara.thompson@msj.org</a>	Assisted with the Inventory of Community Health Resources
Jessica Farley, Health Promotion Coordinator	Mitchell County Health Department 130 Forest Service Drive Bakersville, NC 28705	Phone: 828-688-2371 Fax: 828-688-3866 <a href="mailto:Jessica.farley@thrd.dst.nc.us">Jessica.farley@thrd.dst.nc.us</a>	Community Health Assessment Facilitator
Stacie McKinney, Nursing Supervisor	Mitchell County Health Department 130 Forest Service Drive Bakersville, NC 28705	Phone: 828-688-2371 Fax: 828-688-3866 <a href="mailto:stacie.mckinney@trhd.dst.nc.us">stacie.mckinney@trhd.dst.nc.us</a>	Assisted in Primary and Secondary Data analysis
Monica Yokubinas, Project Coordinator	Toe River Project Access PO Box 247 Spruce Pine, NC 2877	Phone: 828-765-1850 <a href="mailto:monica.yokubinas@msj.org">monica.yokubinas@msj.org</a>	Assisted with the Inventory of Community Health Resources
Daniel Barron, Regional Library Director	AMY Library Office PO Drawer 310 Old Hwy. 19E Burnsville, NC 28714	Phone: 828-682-4476 Fax: 828-682-6277 <a href="mailto:drdanbarron@gmail.com">drdanbarron@gmail.com</a>	Assisted with Listening Sessions, Distribution of Surveys, and will help distribute Results
Heather Calhoun, MCS Food Service Director	Mitchell County Schools 72 Ledger School Rd. Bakersville, NC 28705	Phone: 828-688-4432 Fax: 828-766-2221 <a href="mailto:hcalhoun@mcsnc.org">hcalhoun@mcsnc.org</a>	Participated in Listening Sessions
Heather Greene, Child Safety/ Wellness Coordinator	Blue Ridge Regional Hospital 125 Hospital Drive Spruce Pine, NC 28777	Phone: 828-765-1591 <a href="mailto:heather.greene@msj.org">heather.greene@msj.org</a>	Participated in Listening Sessions
Larry Deyton, Director of DSS	Department of Social Services 347 Long View Drive Bakersville, NC 28705	Phone: 828-688-2175 Fax: 828-688-4940 <a href="mailto:Larry.Deyton@ncmail.net">Larry.Deyton@ncmail.net</a>	Participated in Listening Sessions
Lori Gilcrist, Director of Community In Schools	Greenlee Primary School 2206 Carters Ridge Road Spruce Pine, NC 28777	Phone: 828-467-0970 <a href="mailto:gilcrist@aol.com">gilcrist@aol.com</a>	Assisted with Listening Sessions, helped with Community Forum and setting priorities and action plans
Phyllis Hughes Director of MCSC	Mitchell County Senior Center 152 Ledger School Road Bakersville, NC 28705	Phone: 828-688-3019 Fax: 828-688-2314 <a href="mailto:aging@mitchell.main.nc.us">aging@mitchell.main.nc.us</a>	Assisted with Listening Sessions, Distribution of Surveys, and will help distribute Results
Jenny Parker , MCS Tobacco Prevention Coordinator	Mitchell High School 416 Ledger School Rd. Bakersville, NC 28705	Phone: 828-766-3484 <a href="mailto:jparker@mcsnc.org">jparker@mcsnc.org</a>	Participated in Listening Sessions
Misti Silver , Human Services Coordinator	Mayland Community College 200 Mayland Drive PO Box 547 Spruce Pine, NC 28777	Phone: 828-765-7351 <a href="mailto:msilver@mayland.edu">msilver@mayland.edu</a>	Assisted with Listening Sessions, Distribution of Surveys, and assisted with setting priorities and action plans

Billy Stewart, Reverend	Bakersville Baptist Church 101 W Main Street Bakersville, NC 28705	Phone: 828-688-4817 <a href="mailto:pastorman@mtnarea.net">pastorman@mtnarea.net</a>	Assisted in setting up and planning listening sessions
Betty Tumey, Public Health Dental Hygienist	PO Box 616 Spruce Pine, NC 28777	Phone: 828-765-5400 Fax: 828-7652996 <a href="mailto:Betty.tumey@ncmail.net">Betty.tumey@ncmail.net</a>	Assisted with Listening Sessions, Distribution of Surveys, and helped with Community Forum
Jeff Vance, Director	Mitchell County Cooperative Extension 10 S Mitchell Ave PO Box 366 Bakersville, NC 28705	Phone: 828-688-4811 Fax: 828-688-2051 <a href="mailto:jeffery_vance@ncsu.edu">jeffery_vance@ncsu.edu</a>	Participated in Listening Sessions
Eric Wiseman, Emergency Management Director	Mitchell County Emergency Management PO Box 409 Bakersville, NC 28705	Phone: 828-688-2139 or 828-385-0911 <a href="mailto:mitem@main.nc.us">mitem@main.nc.us</a>	Participated in Listening Sessions
Beverly Nelson, Family & Consumer Science Agent	Mitchell County Cooperative Extension 10 S Mitchell Ave PO Box 366 Bakersville, NC 28705	Phone: 828-688-4811 Fax: 828-688-2051 <a href="mailto:Beverly_Nelson@ncsu.edu">Beverly_Nelson@ncsu.edu</a>	Participated in Listening Sessions
Alyce Sparks Owens Director of Housing Authority	Spruce Pine Housing Authority 11 Fairground St Spruce Pine, NC 28777	Phone: 828-765-9182 <a href="mailto:sphousing@bellsouth.net">sphousing@bellsouth.net</a>	Assisted in Primary and Secondary Data Collection
Chad Trivette, Student at Mayland Community College	Jakes Branch Rd Spruce Pine, NC 28777	Phone: 828-467-2082 <a href="mailto:rc2082@hotmail.com">rc2082@hotmail.com</a>	Assisted with Listening Sessions, Distribution of Surveys for Hispanic communities
Silvia Peterson, Director of Center for Latino Services	Center for Latino Services 31 Cross St. PO Box 974 Spruce Pine, NC 28777	Phone: 828-765-9980 <a href="mailto:silvia.peterson@trhd.dst.nc.us">silvia.peterson@trhd.dst.nc.us</a>	Assisted with Listening Sessions, Distribution of Surveys for Hispanic communities
Kathy Young, Assistant for County Administration	Mitchell County Administrative Building Crimson Laurel Circle Bakersville, NC 28705	Phone: 828-688-2139 Fax: 828-688-4443 <a href="mailto:kyoung@mitchell.main.nc.us">kyoung@mitchell.main.nc.us</a>	Participated in Listening Sessions
Sheila Grindstaff, Secretary to Administration for DOT	Mitchell County Department of Transportation Crimson Laurel Circle Bakersville, NC 28705	Phone: 828-688-4715 Fax: 828-688-3510 <a href="mailto:sblalock@hotmail.com">sblalock@hotmail.com</a>	Assisted with Listening Sessions, Distribution of Surveys, and helped with Community Forum
Wade Tipton, Director of Parks & Recreation Dept.	Mitchell County Dept. of Parks & Recreation Crimson Laurel Circle Bakersville, NC 28705	Phone: 828-688-5901 Fax: 828-688-1338	Participated in Listening Sessions
Andy Ashurst, Editor of MNJ	Mitchell News Journal 261 Locust Ave. PO Box 339 Spruce Pine, NC 28777	Phone: 828-765-2071 Fax: 828-765-1616 <a href="mailto:editor@mitchellnews.com">editor@mitchellnews.com</a>	Publicized Listening Sessions, Surveys, and Community Forum to Mitchell County citizens
Michael Sink, Manager of WTOE	WTOE Radio Station 749 Sawmill Rd PO Box 744 Burnsville, NC 28714	Phone: 828-765-7441 Fax: 828-682-6227 <a href="mailto:mike@wkyk.com">mike@wkyk.com</a> or <a href="mailto:1470@wtoe.com">1470@wtoe.com</a>	Publicized Listening Sessions, Surveys, and Community Forum to Mitchell County citizens
Connie Sedberry,	Mitchell County Safe Place	Phone: 828-765-4015	Assisted with Listening

Mitchell County Safe Place	PO Box 544 Spruce Pine, NC 28777	Fax: 828-765-4011	Sessions, Distribution of Surveys, and helped with Community Forum
Charles Vines, County Manager	Mitchell County Administrative Building Crimson Laurel Circle Bakersville, NC 28705	Phone: 828-688-2139 Fax: 828-688-4443 <a href="mailto:mitcty@mitchell.main.nc.us">mitcty@mitchell.main.nc.us</a>	Participated in Listening Sessions
Richard Canipe, Town Manager of Spruce Pine	Spruce Pine Town Hall PO Box 189 Spruce Pine, NC 28777	Phone: 828-766-3000 <a href="mailto:spmgr@bellsouth.net">spmgr@bellsouth.net</a>	Participated in Listening Sessions
Marvin Miller, Kevin Street, & Leroy Ledford County Commissioners	Mitchell County Administrative Building Crimson Laurel Circle Bakersville, NC 28705	Phone: 828-688-2139 Fax: 828-688-4443	Participated in Listening Sessions and helped with Community Forum
Sandy Jobe, United Way Executive Director	United Way of Mitchell Co. PO Box 367 Spruce Pine, NC 28777	Phone: 828-765-7724 <a href="mailto:unitedwaymitchel@bellsouth.net">unitedwaymitchel@bellsouth.net</a>	Assisted with the Distribution of Surveys
Clareese Murphy, Hospice of Mitchell County	Hospice of Mitchell County 236 Hospital Drive PO Box 38 Spruce Pine, NC 28777	Phone: 828-765-5677 <a href="mailto:info@hospicemc.com">info@hospicemc.com</a>	Assisted with planning and conducting Listening Sessions
Pam Sndyer Intermountain Children Services	Intermountain Children Services, Inc. 4929 South 226 Hwy Bakersville, NC 28705	Phone: 828-688-2190	Assisted with planning and conducting Listening Sessions

## TYPES OF DATA COLLECTED

DATA COLLECTED	NUMBER
Community Opinion Surveys	568
Listening Sessions	12 (207 participants)
Key Informant Interviews	2
Review of Secondary Data	

## INPUT FROM THESE SECTORS OF THE COMMUNITY

- Fire Departments
- Faith Community
- Media Outlets
- Community College Students & Staff
- Schools Students & Staff
- School Related Events
- Civic Clubs
- Libraries
- Senior Center
- Transportation Department
- Public Housing
- Hispanic Community
- Banks & Credit Unions
- Wal-Mart Employees & Customers
- Relay For Life
- Local Industries
- Mental Health Agencies
- Hospital
- Health Department
- Daycare Employee
- Department of Social Services
- Cooperative Extension
- USDA
- Nursing Homes
- Prison Employees
- Hosnice

## **RESULTS REPORTED TO THE COMMUNITY**

The results of the community health assessment were presented back to Mitchell County residents in the following ways:

1. A Community Health Forum was held on Thursday, October 22, inviting all citizens of Mitchell County to attend, providing breakfast and guest speakers on each of the top ten health concern voted on by the public. A total of 47 people attended, including county commissioners, law enforcement, and local health professionals.
2. The local newspapers (Mitchell News Journal & Blue Ridge Christian News) published an insert defining the assessment process in the Spring of 2009, and again in the Fall of 2009 outlining the assessment results.
3. The local radio station (WTOE) performed a “Community Close-Up” interview with the CHA Facilitator regarding the results of the community health assessment results, invitation to the Community Health Forum, and an overview of the CHA process in the Fall of 2009.
4. A PowerPoint presentation from the Community Health Forum was distributed to several service agencies and groups in the Fall of 2009.

## **HOW PRIORITIES WERE ESTABLISHED**

To identify the top ten priority issues for the Mitchell County Health Department and the Mitchell Community Health Partnership to work on over the next several years, the following process was used:

1. Residents shared their concerns and priorities regarding the county’s health in listening sessions, surveys, and interviews.
2. Participants at the October 2009 Community Health Forum completed a form in which they ranked their priorities of the key health findings presented by experts in the community
3. The Mitchell County Community Health Assessment Team reviewed the CHA results on Thursday, November 5<sup>th</sup>. The CHA Team prioritized community concerns, and then prioritized the issues to be addressed over the next several years. The CHA Team thought if the health concerns were important enough to be brought up by citizens of Mitchell County and discussed among community members, these would be the priorities we would address.

**REVIEW OF COUNTY DEMOGRAPHICS COMPARED TO STATE & SURVEY/LISTENING SESSIONS DATA:**

<b>INDICATOR</b>	<b>NORTH CAROLINA</b>	<b>MITCHELL COUNTY</b>	<b>LISTENING SESSIONS</b>	<b>SURVEYS</b>
<b>Population, 2008</b>	9,222,414	15,784	207	568
<b>Male, 2007</b>	48.9%	48.9%	28%	21%
<b>Female, 2007</b>	51.5%	51.1%	72%	79%
<b>Under 5 years old, 2007</b>	7.0%	5.2%	n/a	n/a
<b>Under 18 years old, 2007</b>	24.5%	19.7%	n/a	n/a
<b>65 years and over, 2007</b>	12.2%	19.6%	29%	10%
<b>Percent White, 2007</b>	74.0%	97.7%	98%	97%
<b>Percent Minority (Latino), 2007</b>	33%	5.5%	2%	3%
<b>High School Graduates, 2000</b>	78.7%	68.6%	35%	59%
<b>Bachelor's Degree or Higher, 2000</b>	22.5%	12.2%	65%	37%
<b>Median Household Income, 2007</b>	\$44,772	\$36,239	n/a	n/a
<b>Individuals Below Poverty Level, 2007</b>	14.3%	15.8%	n/a	n/a
<b>Uninsured Rate, 2005</b>	48%	51.6%	n/a	n/a

\*US Census Bureau, Bureau of Economic Analysis, Bureau of Labor Statistics, National Agricultural Statistics Service, National Center for Health Statistics and Fed Stats

**COLLECTING & ANALYZING COMMUNITY DATA:**

**RESULTS OF THE LISTENING SESSIONS, INTERVIEWS, & SURVEYS**

Listening Sessions and Community Key Informant Interviews:

Twelve listening sessions were conducted incorporating a total of 207 participants. These listening sessions took place with:

1. Mitchell Community Health Partnership Members (27 participants)
2. Mayland Community College Staff and Students (13)
3. Mitchell County Senior Center Staff and elderly participants (36)
4. Mitchell County Relay For Life 2009 event Planning Committee and participants (12)
5. Big Crabtree Baptist Church Members (38)
6. Mitchell County Health Department Staff and Clientele (18)
7. Mitchell County School Health Advisory Council and Administration (9)
8. Juvenile Crime Prevention Committee (15)
9. Mitchell County Resource Committee (8)
10. Bakersville Rural Housing Apartments (9)
11. Hospice of Mitchell County Staff and Clientele (18)
12. Housing Development in a Latino Community (4)

Questions Asked Included (mainly the first ten questions ask to all groups, other questions ask specific to the group):

1. What do you like most about living in Mitchell County?
2. What concerns you most about living here?
3. What keeps people in your community from being healthy?
  - a. What about medical office visits?
  - b. What about cost of medicines?
  - c. What about health insurance?
  - d. What about cost of other types of health services?
  - e. What about availability of information on health and health services?
  - f. What about challenges of having healthy habits?
4. What could be done to solve these problems?
5. What do you and others do to stay healthy?
  - a. What about personal behaviors?
  - b. What about getting check-ups or health screenings?
  - c. What about physicians?
  - d. What about other providers?
  - e. What about pharmacists?
  - f. What about neighbors?
  - g. What about family?
  - h. What about health food stores?
6. What health problems have you and your family had to deal with?
7. Is there any group not receiving enough health care? If so, why?
8. What are the strengths of the health services available in Mitchell County?
9. What do you think are some changes in health care that need to be made in Mitchell County?
10. What are some health services people need that are currently not being offered?
11. What do you see as the major health-related problems in Mitchell County?
  - a. What about physical health problems?
  - b. What about social health problems that affect health (violence, substance abuse, etc.)
  - c. What about mental health problems?What are the causes of these problems?
12. How would you try to reduce these health-related problems?
13. What health resources exist for the older people in Mitchell County?
14. What health services are needed for children and adolescents that are not being provided in Mitchell County?
15. What is the job market like in Mitchell County?
16. How do different races or ethnic groups get along?
17. What problems has Mitchell County had in the past 5 years? How did the community overcome them?
18. What community organizations are active in Mitchell County?
19. What does the term "Public Health" mean to you?
20. Is there anything else you would like to add, or you think would be helpful for us to know?

Interviews of 2 Community Health Leaders were conducted and used these same questions. The top five priorities described in the listening sessions and community leader interviews are as follows:

#### **Unemployment/Underemployment**

- Low wages and no benefits
- Property values driving up housing values and making homes unaffordable for lower and middle class
- Young families have to move out of the area to find jobs
- Demographics shifting as more older people moving into the County and young adults moving out to find jobs

**Major Health-Related Problems (including chronic diseases, risk factors, & mental disorders)**

- Concerned about abuse of illegal drugs among residents, as well as the misuse of prescription drugs among teens and young adults
- Alcohol abuse apprehensions are on the rise because in March of 2009 the town of Spruce Pine in Mitchell County approved beer, wine, and ABC store sales.
- Risk factors most often seen among Mitchell County residents were obesity, mental health disorders, and depression/anxiety/stress.
- Chronic diseases most often seen among Mitchell County residents were diabetes, cancer, and heart disease.

**Lack of Access To Health Care**

- Lack of primary care physicians, dentists, and mental health support, including expanded hours and services
- Mental Health services are perplexing and not accessible.
- Doctors and Dentists requiring upfront payments
- Lack of adequate transportation
- Lack of health insurance and prescription medication not affordable
- Need for Urgent Care Clinic

**Unhealthy Behaviors**

- Lack of Education (Low Graduation Rate)
- Lack of Physical Activity
- Lack of Knowledge regarding Nutrition
- Tobacco Use high
- Lack of Fitness Opportunities

**Concerns with Elderly Population**

- Unaware of health and human resources available to them
- Some are not getting enough to eat and unable to drive
- Number of elder people are increasing in the area
- Community organizations try to indentify seniors at risk, but most will not accept help because they are too proud
- Isolation, need personal contact and socialization, especially when spouse dies
- Need assisted living facility, or at least an adult daycare
- Need more volunteers and intergenerational opportunities

## Survey of Mitchell County Residents

The Community Opinion Survey was offered as a hardcopy, online, and in English and Spanish versions. 568 Community members completed a fifty-question survey with the following results:

#	RESPONSE TO QUESTION
1.	45% strongly or somewhat agreed “There is a good healthcare system in Mitchell County”.
2.	58% strongly or somewhat agreed “Mitchell County is a good place to raise children”.
3.	57% strongly or somewhat agreed “Mitchell County is a good place to grow old”.
4.	58% strongly or somewhat disagreed “There is plenty of economic opportunity in Mitchell County”.
5.	66% strongly or somewhat agreed “Mitchell County is a safe place to live”.
6.	55% strongly or somewhat agreed “There is plenty of help for individuals and families during times of need in Mitchell County”.
7.	Top Five Health Problems that have the largest impact on the community as a whole: (1) Cancer, (2) Obesity/Overweight, (3) Heart Disease, (4) Aging Problems, (5) Mental Health
8.	Top Five Unhealthy Behavior that have the largest impact on the community as a whole: (1) Drug Use, (2) Smoking/Tobacco Use, (3) Alcohol Use, (4) Lack of Exercise, (5) Poor Eating Habits
9.	Top Five Community-Wide Issues that have the largest impact on the overall quality of life in Mitchell County: (1) Unemployment, (2) Dropping Out of School, (3) Low Income/Poverty, (4) Affordability of health services, (5) Availability of Positive Teen/Family Activity Centers
10.	50% rated their own health as “healthy”.
11.	58% go to the doctor/nurse/pharmacist to get most of their health-related information.
12.	75% go to the doctor’s office when they are sick or need advice about health.
13.	23% have had a problem getting health care they needed from any type of health care provider or facility in the past 12 months.
14.	Out of the 23% who did have a problem getting health care they needed, 8% could not get an appointment, 7% didn’t have health insurance, and 7% share of the cost was too high.
15.	13% did have a problem filling a medically necessary prescription in the past 12 months.
16.	Out of the 13% who did have a problem filling a medically necessary prescription, 6% share of the cost was too high, 5% didn’t have health insurance, 4% insurance did not cover what they needed.
17.	21% had trouble receiving dental in the past 12 months when they needed it.
18.	Out of the 21% who did have trouble receiving dental care, 13% did not have insurance, and 12% couldn’t afford the cost.
19.	30% said if a family member or friend needed counseling for a mental health or drug/alcohol abuse problem, they would contact a Private counselor or Therapist to talk to them.
20.	23% had felt sad or worried enough to keep them from going about their normal business during a normal week.
21.	62% engage in an exercise activity that lasts at least a half an hour, other than their regular job, during a normal week
22.	35% engage in physical activity 3 times a week, 22% engage in physical activity 2 times a week.
23.	42% go home to engage in physical activity, 23% use park trails, 17% use walking trails.
24.	38% do not engage in physical activity, 15% don’t have enough time, 12% are too tired, and 9% do not have access to a facility that has things they need.
25.	52% watch TV, play video games, or use the computer for recreation 2-3 hours per day.

26.	31% had experience physical pain or health problems that made it hard for them to do their usual activities such as driving, working around the house, or going to work.
27.	17% eat 2 cups of fruit a day, 13% eat 5 cups of vegetables, in an average week (not including juice, iceberg lettuce salad, or potato products)
28.	32% are exposed to secondhand smoke at restaurants, 15% at home, and 12% at the workplace.
29.	15% do currently smoke.
30.	7% would go to a doctor if they wanted to quit smoking.
31.	15% (asthma), 30% (depression/anxiety disorder), 31% (high blood pressure), 26% (high cholesterol), 8% (diabetes), 8% (osteoporosis), and 33% obesity/overweight are conditions that they have been told they have by a doctor, nurse, or other health professional.
32.	29% have children between the ages of 9 and 19.
33.	27% do not think their child is engaging in any high risk behaviors.
34.	94% are comfortable talking to their child about risky behaviors.
35.	11% think that children need more information about alcohol use and drug abuse.
36.	47% of households have working smoke detectors only, 43% has both smoke detectors and carbon monoxide detectors.
37.	53% of households have a Family Emergency Plan.
38.	66% has no basic emergency supply kit for the family. 11% has a 3 day supply, 13% has one week supply.
39.	Ages of Respondents: 3% (15-19), 5% (20-24), 20% (25-34), 23% (35-44), 21% (45-54), 18% (55-64), 6% (65-74), and 4% (75 or older)
40.	79% were female, and 21% male.
41.	3% were Hispanic
42.	98% were white, and 1% was black
43.	96 % spoke English and 4% spoke Spanish
44.	77% were married, 9% divorced, 7% never married/single, 4% widowed, and 2% separated
45.	22% has a bachelor's degree, 21% has an associate's degree, 20% has some college, 18% has a high school diploma or GED, 15% has a graduate or professional degree, 2% has some high school
46.	27% has an household income before taxes of \$50,000 to \$74,999, 20% (\$35,000 to \$49,999), 19% (over \$75,000), 13% (\$25,000 to \$34,999), 12% (less than \$14,999), 10% (\$15,000 to \$24,999)
47.	36% said the income supported 2 people, 20% supported 4 people, 19% supported 3, 12% supported 1, 9% supported 5 people, and 3% supported 6 people.
48.	56% are employed full time. 14% are employed part-time. 12% are retired. 6% are unemployed. 5% are students, a homemaker, or self-employed. 4% are disabled.
49.	87% have access to the internet.
50.	50% are from the Spruce Pine community. 47% were from the Bakersville community. 2% were from the Little Switzerland community.

An overriding concern of the people surveyed was the lack of employment opportunities in the county. That this issue should rank so high on a health survey is significant. It gives validity to the idea that just living in Mitchell County is an economic hardship for most residents and creates a health disparity for many of them.

In that regard, lack of medical insurance also ranked high on the survey. Many of the survey participants displayed health concern for health issues such as dental health, not

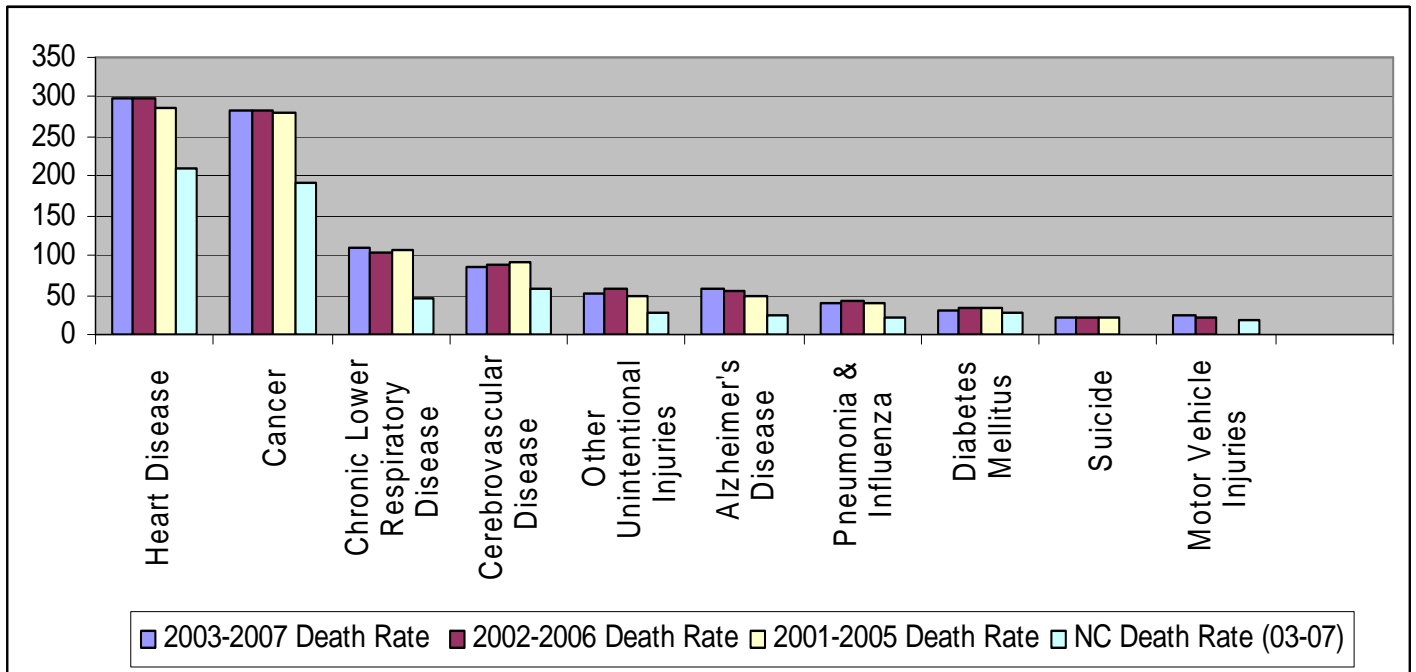
receiving prenatal care, availability of child care, affording prescribed medications, and feeling depressed. The overall rate of concern for healthcare is almost twice as high for those uninsured as for those who are insured.

Drug use, especially misuse of prescription drugs, is of great concern to those surveyed. The risk factors for participants with low income and limited education include, smoking, depression, high blood pressure and cholesterol, prevalence of diabetes, and being overweight.

### ANALYZING STATISCAL COUNTY & STATE DATA

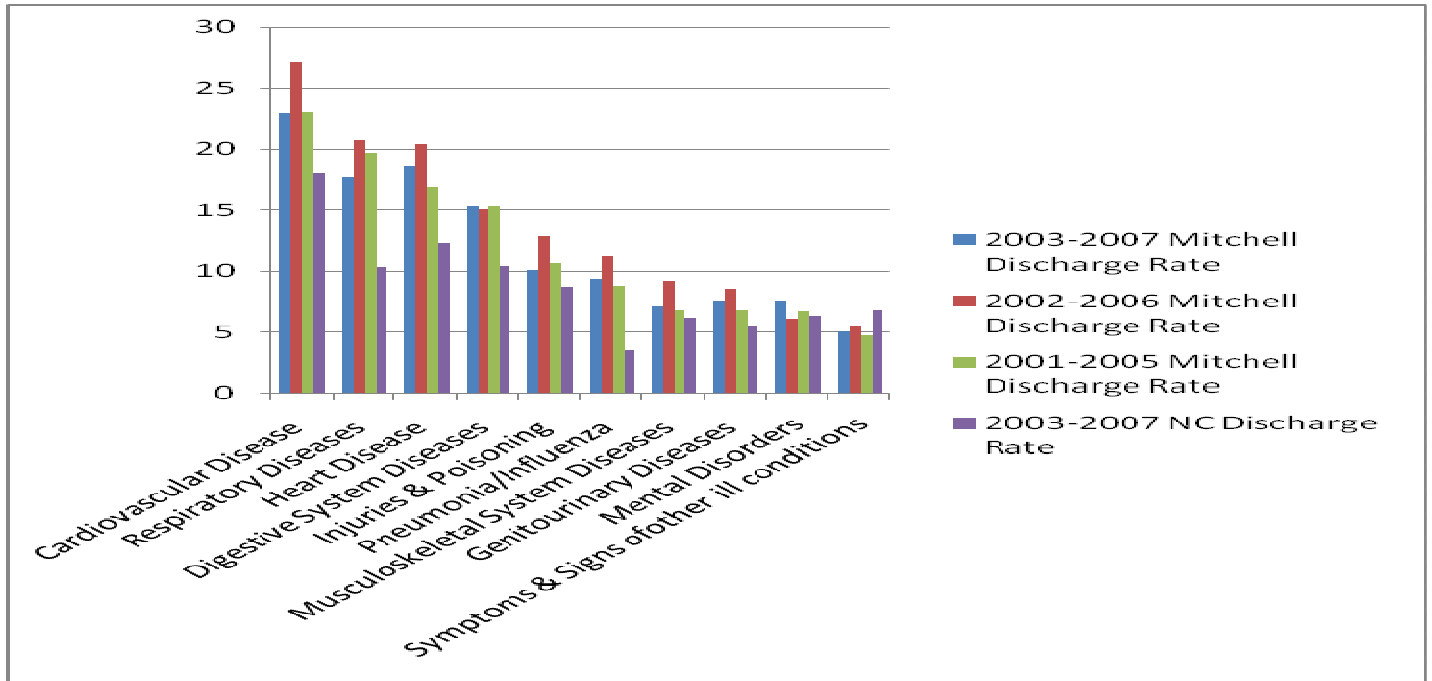
The following graphs explain the leading causes of death and hospitalizations per 100,000 populations in the state, as well as in the county over the past 6 years. Heart Disease and Lung Disease are at the top of the list. This could be because of a number of factors, such as tobacco use, lack of knowledge concerning nutrition, and lack of physical activity regarding statewide and county-wide populations.

#### **LEADING CAUSES OF DEATH IN MITCHELL COUNTY AND NC**



SCHS North Carolina Data Book: Death Counts and Crude Death Rates Data per 100,000 POP by County

## LEADING CAUSES OF HOSPITALIZATIONS IN MITCHELL COUNTY AND NC



SCHS North Carolina Data Book: Inpatient Hospital Discharge Rate Data per 100,000 POP by County

In the past six years, Digestive System Disorders and Mental Disorders seem to continue to be on the rise, with the other causes of hospitalization gradually decreasing. Trends regarding the causes of death basically have stayed the same over the past several years.

Annually, the local medical professions strive to promote the most preventable strategy in avoiding the spread of influenza, which can lead to pneumonia, by advising all citizens to get vaccinated. However, influenza and pneumonia is the seventh leading cause of death, and the sixth leading cause of hospitalization in Mitchell County, leading to higher rates than the state.

## COMPARING HEALTH-RELATED DATA WITH OTHER JURISDICTIONS

The NC-CATCH Mitchell County Profile, presented here, provides the local public with easy assembly of a wide array of demographic and community health data, along with comparisons with peer counties and the state. Peer Counties include Ashe, Cherokee, Madison, and Yancey counties. NC-CATCH data was used to capture the health status of Mitchell County compared to counties most similar regarding population, race, income, and health behaviors.

### **Key:**

Yellow= Mitchell County higher than Peer Counties, but about average with the State rate

Green= Mitchell County higher than Peer Counties and the State rate

SELECTED SIGNIFICANT HEALTH INDICATORS	MITCHELL COUNTY	PEER COUNTIES	NORTH CAROLINA
Chlamydia per 100,000 population, 2007	76.5	89.3	345.6
HIV Disease per 100,000 population, 2007	19.1	12.1	21.9
Lung-Bronchus Cancer Cases per 100,000 population, 2005	60.9	82.1	76.4
Colon-Rectum Cancer Cases per 100,000 population, 2005	45.5	39.7	48.8
Prostate Cancer Cases per 100,000 Male population, 2005	114.4	147.3	147.8
Breast Cancer Cases per 100,000 Female population, 2005	94.1	114.9	147.5
Total Cancer Cases per 100,000 population, 2005	489.2	484.9	511.8
Dentists per 10,000 population, 2006	4.4	2.2	4.4
Licensed Practical Nurses per 10,000 population, 2006	37.1	21.7	19.8
Pharmacists per 10,000 population, 2006	8.2	6.3	9.0
Physical Therapists per 10,000 population, 2006	5.0	2.9	4.6
Physicians per 10,000 population, 2006	18.2	9.0	20.8
Primary Care Physicians per 10,000 population, 2006	13.8	6.2	9.0
Registered Nurses per 10,000 population, 2006	95.6	54.6	94.4
% Medicaid Births, 2006	48.5	66.2	51.8
% of Births where Child was referred to CSC, 2005	13.1	9.3	9.0
% of Live Births to Mothers Less Than Age 18, 2006	5.4	2.8	3.8
% of Live Births Where the Mother Smoked During Pregnancy, 2006	29.9	22.6	11.5
Teen Pregnancy per 1,000 Girls Ages 15-19, 2006	62.9	50.5	65.5
Persons with Developmental Disabilities Age 3-17, 2008	86	127	n/a
Persons with Developmental Disabilities Age 18+, 2008	91	131	n/a
Persons with Severe Emotional Disturbance Ages 0-17, 2008	322	475	n/a
Persons with Severe Emotional Disturbance Ages 18+, 2008	691	1,006	n/a
Youth with Substance Abuse Ages 12-17, 2008	87	126	n/a
Youth with Substance Abuse Ages 18-25, 2008	257	369	n/a
Youth with Substance Abuse Ages 25+, 2008	782	1,141	n/a
% of 5 <sup>th</sup> Graders with Untreated Tooth Decay, 2007	4.0	2.8	4.0
% of Kindergarteners with Untreated Tooth Decay, 2007	28.0	19.3	18.0

NC-CATCH Data Source: Mitchell County Health Profile

This data represents some of the selected health indicators significant to Mitchell County. In the area of Infectious disease morbidity, Mitchell County seems to be in average with the state, but slightly higher than the peer counties. Overall, total cancer cases are somewhat higher than the peer counties, but lower than the state rate. Health professionals for the Mitchell community appear to be in abundance being higher than peer counties, and the state rate in some areas, such as Licensed Practical Nurses and Primary Care Physicians.

Concerning areas includes the percent of births where the mother smoked during pregnancy and percent of Kindergarteners with untreated tooth decay. The rate for Mitchell County regarding smoking while pregnant is triple the rate of the state and vaguely higher than the rate of the peer counties. We are higher than the peer counties in teen pregnancy and most similar to the state rate.

According to NC-CATCH data, pleasing areas of health regarding Mitchell County compared to others include mental health and some types of cancer. Even though this topic ranked so high when surveyed by the community members, we are still lower in developmental disabilities and emotional disturbances among all ages in Mitchell County than the peer counties and state cases.

## **ANALYZING THE RESULTS**

When all the data from surveys, listening sessions, interviews, and a review of statistics was compared, ten top issues emerged for Mitchell County:

1. Substance Abuse (Including Alcohol Use, Drug Abuse, & Prescription Drug Misuse)
2. Unemployment/Underemployment (Low Income & Poverty)
3. Chronic Disease (Including Heart Disease & Diabetes)
4. Cancer
5. Unhealthy Behaviors (Including Poor Nutrition, Tobacco Use, and Lack of Physical Activity)
6. Mental Health Issues and Lack of Services
7. Lack of Medical Resources (Lack of Insurance, Medical Providers, and Urgent Care Clinics)
8. Lack of Community Resources (Lack of Fitness Center, & Family & Teen Activity Centers)
9. Lack of Education/High School Dropout Rate
10. Aging Problems/Care for the Elderly

While all these health concerns are important and expressed by many concerned citizens, other factors need to be taken into account when accessing the entirety of the county. Health is a very broad term and can incorporate various, in many cases, all aspects of life.

## SOCIOECONOMIC, EDUCATIONAL, AND ENVIRONMENTAL FACTORS THAT AFFECT HEALTH

Everything we do affects our everyday lives. The documentary, “Unnatural Causes: Is Inequality Making Us Sick”, shows the relationship between your body, your bank account, and the health your entire community. These factors do affect health, but to what extent we cannot be sure. Although these factors were not used in this assessment, they do need to be taken into consideration when looking at the health of our county in its entirety.

### **SOCIOECONOMIC FACTORS**

- Mitchell County demographics are changing from a largely working class population to a retirement community. This shift is because of major and small business closures. The retirement community includes people residing both in the summers and year-round. Tourism is becoming a major economic force in the region because of the proximity of the Blue Ridge Parkway. One of Spruce Pine’s most famous natives is the children’s author Gloria Houston, who was born and raised in the nearby Green Valley community. Recently, Houston gave the town of Spruce Pine the rights to brand the town as the “Home of the Perfect Christmas Tree”, taken from her best-selling book “The Year of the Perfect Christmas Tree”. As retirees get older, more senior services are going to be desired.
- Because of new wealthy retirees moving here, housing developments are being created in remote areas across the county resulting in higher cost for houses and property taxes. This creates another financial burden on Mitchell County residents.
- Major mental health service provider Alpha Omega is no longer serving any patients in Mitchell County. RHA Behavioral Health Services has taken over some services, such as substance abuse and community support programs; plus added extra programs, such as intensive home-care for children, and a more comprehensive community support team service. However, Alpha Omega offered a service concerning developmentally delayed clientele and RHA is not offering this service at this time. This resource is a big loss because not everyone is going to qualify for higher levels of care.
- Like much of Western North Carolina, there has been an influx of the methamphetamines in this community in the past few years. This affects whole families and service providers. This situation seems to have improved with the new restrictive laws on buying meth ingredients.
- Mitchell County is a rural county in the Appalachian Mountains without a major hospital, jail or fitness center. The poverty rate for Mitchell County is 15.8% in contrast to the state’s at 14.3%.
- Mitchell County’s population is predominantly white, but has a growing number of Hispanic individuals with an estimated percentage of 5.5%. This will demand services and resources to provide Spanish materials, and bilingual providers or offer translators.

### **EDUCATIONAL FACTORS**

- Mitchell High School graduation rate hopes to rise because of implementation of the Freshman Academy. Mitchell High School has been awarded a \$95,032 grant to help students address social issues that can affect school success, including poverty, drug and

domestic abuse, and pregnancy. The program will focus on students already identified in its Freshmen Leadership Academy, students who may fail a class, students with several discipline referrals, ESL (*English as a Second Language*) students, and students who are experiencing social issues that may put them at-risk of dropping out. The current graduation rate is 68.6%, meaning over a fourth of the students at the local high school will not receive a high school diploma.

- Mitchell County has a lower literacy rate than the state, implying that educational materials that concern health need to be at a lower literacy rate than what others may use.

## **ENVIRONMENTAL FACTORS**

- Last winter, a fire at Spruce Pine quartz plant forced evacuations within a four mile radius because toxic chemicals in the air. Approximately 100 people had to leave their homes and stay at the nearest emergency shelter, Bakersville Baptist Church. This fire at the local plant resulted in a layoff incorporating approximately 50 employees.
- In January of 2009, the closing of one of the major plants resulted in a temporary layoff of approximately 150 employees. The county went from an unemployment rate of 8.3 annual averages for the year of 2008 to a high of 15.6 in the month of February in 2009. Workers now have to work for lower wages to make ends meet, usually without health insurance and other benefits they use to enjoy. Many have to travel out of county to work, and many have moved away in search of work. Coupled with the growing retiree population, the county's overall population is much older than it was just a few years ago. By 2010, one third of the county is expected to be over 65.
- In this rural county, most people are on well water or city water, in which neither have naturally-occurring fluoride in it. This exacerbates the limited access to dental providers to make dental health a serious need in the community.
- Local high school seeks funds to attempt to be added onto city water and sewer lines. In the past this has been a problem closing the local high school because of low water levels.
- H1N1 Flu spreads to Mitchell County, demanding emergency management to meet and activate a plan to protect our citizens from a county-wide epidemic. Emergency Management meetings have been held through the year of 2009 monitoring the spread of H1N1 flu. Presently, the health department is gearing up to educate hold mass vaccination clinics and serve the target groups, planning to partner with the school system, media and daycares to vaccinate all who desires to receive the H1N1 vaccination. The local media outlets are supporting and cooperating to educate the population about the events and alterations evolving during this pandemic.

## POPULATION GROUPS AT RISK

- Because of the rapid growth of low income, unemployed and underemployed, the uninsured or underinsured residents are among those at highest risk in this community.
- Residents of Mitchell County who live in rural outlying communities are a population at risk, facing barriers to accessing health resources.
- Children and adults in low income working families are falling through the gap; their income makes them ineligible for some services, and they cannot afford other services.
- Primary and secondary data did not reveal difference between Latino's and other populations in the community. Note, Latino's reported more concern about reckless driving; however, the sample was small.

## EXISTING AND NEEDED HEALTH RESOURCES

### MEDICAL FACILITIES

- Blue Ridge Regional Hospital (BRRH) is a committed hospital located in Spruce Pine, offering 46 beds, serving Mitchell Yancey, lower Avery and upper McDowell Counties. In the past few years, most all the local doctors office changed their name to become affiliated with BRRH.
- DaVita Dialysis Center is also located in Spruce Pine, and opened January 1, 2008 offering in-center hemo-dialysis treatments. The facility has served a total of 51 patients, with a current case load of 13 patients.
- The Toe River Dental Clinic located in Bakersville, opened about ten ago and has been improving and extending their services ever since. With dental decay is the most common childhood disease. More than 80% of children have cavities by the age of 17. Our children in the Toe River Valley have even higher rates of the disease than the average for the state. Many parents in the Toe River Valley have trouble getting their children to the dentist. Transportation to and from Toe River Children's Dental Clinic are available upon request by the Department of Mitchell County Transportation.
- In the Spring of 1999 plans were laid for the School and Family Health Centers in Tipton Hill and Buladean communities. The School and Family Health Centers are administered by the Bakersville Community Medical Clinic. These clinics are made possible by the generous support from the Mitchell County Board of Education, Mitchell Health Partnership, and Spruce Pine Community Hospital. School and Family Health Centers are open to all members of the community. The centers work closely with the schools to offer information, services, and programs best suited to the needs of the students and are still very successful today.
- An urgent care clinic is a need for Mitchell County residents. The clinic is needed to deliver ambulatory care in a facility dedicated to the delivery of medical care outside the hospital emergency department, hopefully on a walk-in basis. Mitchell County recognizes the need for a center to primarily treat patients who have an injury or illness that requires immediate care but is not serious enough to warrant a visit to an emergency room. An urgent care clinic will do just that.
- An Assisted Living Facility is desired by many residents of the county. The county needs a capacity that will provide care for seniors who need some help with activities of daily

living yet wish to remain as independent as possible. A middle ground between independent living and nursing homes, the Assisted Living Facility will aim to foster as much autonomy as the resident is capable of. The facility needs to offer 24-hour supervision and an array of support services, with more privacy, space, and dignity than many nursing homes—at a lower cost.

- The county is rural; most of the local medical offices are located in Spruce Pine and the local hospital, Blue Ridge Regional Hospital, has done a tremendous amount of work to bring specialty health care providers into the area. However, when a specialist is not available many residents have to travel to Asheville, Johnson City, or Hickory to seek care in which can entail at least a 60 minutes commute over poor mountain roads. This can be a hardship for families, especially without vehicles, and will be a challenge as retiree's age and become frailer
- Mitchell County is not considered a health provider shortage area in terms of medical, dental, and mental health.

### **HEALTH PROMOTION, POLICIES & FACILITIES**

- Our local correctional institutes, which is the one of the top twenty-five employers of Mitchell County, has recently adopted a policy to become a tobacco free environment in January of 2010. Currently, they are offering tobacco cessation classes for all staff and inmates in preparation to implement the policy change.
- Mitchell County strives for a fitness center located in centralized location for all residents to have an opportunity to participate in physical activity. County officials are currently seeking grant opportunities to pursue this need. No fitness centers exist in the entire county at this time.
- Mitchell County Schools have been a tobacco-free environment since August 2007.
- According to the House Bill 2, all local restaurants and bars are going tobacco-free in January 2010 per state law.
- Walking trails exist at every school with public access to all community members. Greenways also exist in both Bakersville and Spruce Pine.

## LEADING COMMUNITY HEALTH PROBLEMS

The priorities selected by the Community Health Assessment Team and the Mitchell Community Health Partnership to focus on the next several years include:

1. Substance Abuse (Including Alcohol Use, Drug Abuse, Tobacco Use, & Prescription Drug Misuse)
2. Unemployment/Underemployment (Low Income & Poverty)
3. Mental Health Issues and Lack of Services

According to the NC County Trend Reports data, Mitchell County has continued to increase in the following areas over a number of years: mothers smoking during pregnancy, diabetes death rate, lung and breast cancer diagnosis, and obesity rates among children. Substance Abuse, Unemployment, and Mental Health can all be risk factors or be related to most of these areas of increase.

The CHA Team decided if these were important enough to be brought up by citizens of Mitchell County and discussed among community members, these would be the priorities we would address. The team decided to tackle these through multiple possibilities such as developing a county-wide volunteer database for those wanting opportunities to build a resume for a new career, publishing and mass distributing an updated resource guidebook to offer help to those who need additional resources in the county, and advocate for faith communities becoming more involved in offering workshops on desired topics to students, parents, and other community members intergrading different aged people together. These action plans brainstormed by the CHA Team will be discussed in partnership with the Mitchell Community Health Partnership and forthcoming in June 2010 as Community Health Assessment Action Plans.

## DISSEMINATE RESULTS OF THE COMMUNITY HEALTH ASSESSMENT

Offer to the Toe River Health District Board of Health  
Present to the Mitchell Community Health Partnership  
Distribution to Mitchell County School Nurses  
Distribution to doctors & nurses at Blue Ridge Regional Hospital  
Distribution to Mitchell County Senior Center  
Post on the local radio station website:

[www.wtoe.com](http://www.wtoe.com)

Publish on the monthly Health Page and posted on the local newspapers websites:

[www.mitchellnewsjournal.com](http://www.mitchellnewsjournal.com)

[www.blueridgechristainnews.com](http://www.blueridgechristainnews.com)

*All citizens of Mitchell County can access this report on these websites by visiting the local libraries in Spruce Pine and Bakersville.*

Community members are encouraged to join the Mitchell Community Health Partnership, a group of concerned citizens working together to improve the quality of health in Mitchell County, which meets quarterly. For more information, please contact:

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All statistical data presented in this report has been compiled from the sources listed below.

- NC Catch
- The State Center for Health Statistics at [www.schs.state.nc.us/SCHS/](http://www.schs.state.nc.us/SCHS/)

### **APPENDIX**

1. Community Opinion Survey Sample (English)
2. Community Opinion Survey Sample (Spanish)
3. Listening Session and Key Informant Questions
4. Community Health Assessment Newspaper Article
5. Community Health Assessment Flyer with distribution list
6. Community Health Assessment Business Cards for all Mitchell County School Staff
7. Community Health Assessment Public Forum Newspaper Article
8. Community Health Assessment Public Forum Invitation with distribution list
9. Community Health Assessment Public Forum Flyers with distribution list
10. Community Health Assessment Forum Voting Ballot
11. Brochure of Executive Summary of this document to disseminate to the Public
12. Inventory of Community Health & Human Services Provider Directory