

2023

YADKIN COUNTY COMMUNITY HEALTH ASSESSMENT

MARCH 2024



TABLE OF CONTENTS

Acknowledgments.....	5
Executive Summary	6
Mission Statement.....	6
Vision Statement	6
Leadership.....	6
Collaborators	7
Contracted Services.....	8
Theoretical Framework/Model	8
Collaborative Process Summary.....	8
Key Findings.....	8
Yadkin County Populations at Risk for Poor Health Outcomes	11
Yadkin County Health Priorities	12
Next Steps	12
The Community Health Assessment Process.....	13
Overview.....	13
Process.....	13
Data Collection Process.....	14
General Demographics	17
County Description	17
Demographics.....	17
Other Populations of Note	19
Economic Stability	20
Income	20
Employment.....	21
Living Wage.....	22
Poverty	23
Housing.....	24
Education Access & Quality	25
Educational Attainment	25
Early Childhood.....	25
Primary and Secondary Education	25

Social and Community Context	26
Crime and Safety	26
Juvenile Crime	27
Sexual Assault and Domestic Violence	28
Child Maltreatment	29
Family and Social Support	29
Environmental Context	30
Air Quality Index	30
Toxic Chemical Releases	30
Drinking Water Systems	30
Solid Waste Disposal	31
Access to Healthy Food & Places	31
Transportation	32
Internet Access	33
Health Status	33
Maternal and Infant Health	33
Pregnancy Rates	33
Pregnancy Risk Factors	34
Birth Outcomes	35
Life Expectancy and Leading Causes of Death	37
Life Expectancy	37
Leading Causes of Death	37
Cancer	42
Morbidity and Chronic Disease	44
Diabetes	44
Overweight and Obesity	45
Chronic Diseases	46
Physical Activity	46
Tobacco Use	46
Communicable Diseases	46
Mental Health	47
Substance Use	47
COVID-19 Pandemic	50

Health Resources	52
Health Insurance.....	52
Health Care Providers	54
Healthcare Access	55
Health Care Facilities	55
Hospital	55
Health Department	56
Emergency Medical Services	57
School Health	57
Long-Term Care Facilities	57
Home Care, Home Health, and Hospice Services	58
Mental Health Services Providers and Service Facilities.....	58
Other Healthcare Resources	59
2-1-1 Calls.....	59
Yadkin County Progress toward Healthy NC 2030 Goals.....	61
Stakeholder Survey Summary.....	62
Community Priorities.....	66
Priority Selection Process.....	66
Priorities	67
Priority 1: Behavioral Health	67
Key Indicators.....	67
Specific Populations at Risk	68
Priority 2: Childhood Health.....	69
Key Indicators.....	69
Specific Populations at Risk	70
Priority 3: Senior Health	70
Key Indicators.....	70
Specific Populations at Risk	71
Health Resources Available Addressing Priorities	72
Next Steps	74
References	76
2023 Yadkin County CHA Appendices.....	85

Appendix 1: Health Data Definitions

Appendix 2: Community Health Survey Instrument

Appendix 3: Consultant's Presentation

Appendix 4: Stakeholder Survey

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ACKNOWLEDGMENTS

This document would not have been possible without the cooperation of the Yadkin County Community Health Assessment Team. This team assisted with the development, distribution, and collection of the community health survey. They also assisted with the collection of additional local data. Team members served as liaisons to other community partners. Their input and expertise were provided throughout other phases of the community health assessment process. Members of the 2023 Yadkin County Community Health Assessment Team included:

Bobby Todd, Executive Director of Yadkin County Chamber of Commerce
Brenda Vasquez, Parent Educator of Children’s Center of Northwest NC
Addie Wilson, Director of Yadkin County Cooperative Extension
Bridgette Boyles, Executive Director of Hands of Hope
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Scott Spillman, Executive Director for Yadkin County YMCA
Natalie Williams, Public Health Education Specialist for Yadkin County Human Services Agency
Laken Royall, Assistant Director for Yadkin County Human Services Agency
Jessica Wall, Agency Director for Yadkin County Human Services Agency

Through CHA team involvement or other support in disseminating the survey and eliciting involvement and input, we would like to acknowledge the following:

County Commissioners:

Kevin Austin, Chair
David Moxley, Vice-Chair
Cliff Collins
Marion Welborn
Frank Zachary

Yadkin County Schools
Yadkin County Government Staff
Yadkin County Libraries
Yadkin County Chamber of Commerce
Yadkin County Cooperative Extension
Yadkin County Senior Centers
Yadkin Family YMCA

Children’s Center of Northwest NC
Smart Start of Yadkin County
Partners Behavioral Health
Town of Yadkinville
Yadkinville Arts Council
Town of Jonesville
Town of Boonville
YVEDDI Head Start/Migrant Head Start
The Yadkin Ripple
Branon Friends Meeting
Yadkinville United Methodist
Hands of Hope Medical Clinic

This report was prepared by Annika Pfaender, Independent Consultant, approved by the CHA Team in January 2024, and approved by the Board of Commissioners in February 2024.

EXECUTIVE SUMMARY

MISSION STATEMENT

The mission of the Yadkin County Human Services Agency (YCHSA) is to protect and improve the health and quality of life of the citizens of Yadkin County. This is accomplished through the strengthening of families, promotion of self-sufficiency, eliminating poverty, assuring, and maintaining a healthy environment, education of the people, providing preventative health services and enforcing state rules and regulations.

VISION STATEMENT

The Yadkin County Human Services Agency was created in 2013 through consolidation of the county's public health and social services departments. The combination creates a multi-sector initiative designed to work collaboratively with community partners to improve the health of those who live, work, learn, play, pray and utilize services in Yadkin County. Part of the responsibilities includes overseeing the Community Health Assessment (CHA) every four years. While the mission includes the mobilization of community partners, its vision for conducting the county's Community Health Assessment (CHA) is to not only identify the top needs, but to also develop community health improvement plans with strategies that can effectively address those issues faced by residents.

With an understanding of social determinants of health, YCHSA recognizes that an individual's health is determined by more than just their physical well-being. According to the Centers for Disease Control and Prevention (CDC), a person's health is impacted by access to social and economic opportunities; the resources and supports available within their homes, neighborhoods, and communities; the quality of schools; the safety of their workplaces; the cleanliness of their water, food, and air; and the nature of their social interactions and relationships. Social determinants of health are issues far too complex for one group or agency to solve alone. YCHSA provides ongoing support to community partners by guiding community strategy development, identifying resources, and helping to create evaluation measures.

LEADERSHIP

The Yadkin County Human Services Agency coordinated the 2023 Community Health Assessment (CHA) process with a CHA Team and support from an independent consultant. In larger counties, where community partners are more plentiful and not as frequently exhausted by service on multiple committees, it may be more feasible to establish both an advisory group and a work group for the CHA process. However, this is not reality for most small, rural counties such as Yadkin County. Therefore, one CHA Team was formed that served simultaneously in advisory and working capacities.

Name	Title/Role	Agency
Bobby Todd	Director	Yadkin Chamber
Brenda Vasquez	Parent Educator	Childrens Center
Addie Wilson	Director	Yadkin County Cooperative Extension
Bridgette Boyles	Executive Director	Hands of Hope
Stephen Harris	Health Services Coordinator	YVEDDI Head Start
Chris Bolden	Assistant Director	Yadkin County Emergency Management
Jonathan Gaylord	Reverend	Yadkinville UMC
Carolyn Choplin	Executive Director	Smart Start of Yadkin County
Jeff Maglio	Director of Student Services	Yadkin County Schools
Tina Love	Social Worker	Yadkin County Schools
Jeff Eads	Regional Director of Community Operations	Partners Behavioral Health
Roxane Eades	School nurse	Yadkin County Schools
Scott Spillman	Executive Director	YMCA of Yadkinville
Natalie Williams	Health Educator	Yadkin County Human Services Agency
Laken Royall	Assistant Director (CHA Coordinator)	Yadkin County Human Services Agency
Jessica Wall	Agency Director	Yadkin County Human Services Agency

COLLABORATORS

Collaboration between Yadkin County Human Services Agency, the independent consultant, and local partners made this assessment possible. Many partners spent numerous hours attending team meetings, collecting local data, promoting, and distributing the initial community health survey, completing the stakeholder survey, and assisting Laken Royall, the CHA Coordinator, in various ways. A collective list of the key partners in the 2023 CHA process in Yadkin County includes:

Collaborating Agencies	Number of Partners
Public Health Agency	3
Hospital/Health Care-related agencies	2
Behavioral Health services (including substance abuse)	1
Dental Health Providers	0
EMS Provider	1
Educational (including public school system)	3
Public Housing Authority	0
Faith Organizations	1
Community Organization (advocacy, senior center, food banks, transportation etc.)	4
Social Services	1
Local government	3
Food banks	0
NC Cooperative Extension	1
Public Safety	1
Public Library	0
Chamber of Commerce	1

CONTRACTED SERVICES

Yadkin County Human Services Agency established a contract with Independent Consultant, Annika Pfaender. The support provided included review of survey tools, stakeholder survey questions, and the collection and analysis of data.

THEORETICAL FRAMEWORK/MODEL

Locally, our approach to the community health assessment process is community-wide and multi-faceted. The establishment of our Community Health Assessment Team represents a diverse group of community sectors, such as the business sector, social services, community members, faith leaders or representatives, as well as non-profit and public health. Our county obtained community input and engagement through: (1) Partnership in conducting the CHA process; (2) Through primary data (survey) collection efforts; (3) Through secondary data collected from community partners; (4) In the identification and prioritization of health issues. Community engagement will remain a focus as we move forward to the collaborative action planning phase of the community health improvement process. Partners and stakeholders with current efforts or interests related to priority health issues will continue to be engaged to effectively disseminate the final CHA document. We also plan to collaborate with our partners to help ensure programs and strategies in our community are developed and implemented to address health priorities identified in the CHA, as well as how to measure the short and long-term success.

COLLABORATIVE PROCESS SUMMARY

The collaborative process began March 13, 2023 when team members discussed the Community Health Assessment goals, responsibility of being on the team, and timeframe. The next meeting was on April 4, 2023 where team members discussed the previous survey and made recommendations for edits. The group discussed survey dissemination methods and agreed to have electronic as the primary method with paper as needed. QR codes were generated through SurveyMonkey as well. The final draft of the survey was brought to the team on May 8th for approval. Survey collection began on May 15th with the CHA Team receiving email updates on survey collection progress from June-October. When demographics were low, the team was emailed for suggestions of how to increase numbers and any community outreach events that may be occurring. This was particularly helpful for generating quick responses before weekend events. Meetings resumed in November and December 2023 to discuss the prioritization process. This CHA report will be available to community partners and the public after March 6, 2024.

KEY FINDINGS

Yadkin County is a land-locked county of gentle hills, rolling farmland, and forests located in the Foothills of western NC. It was home to an estimated 37,200 people in

2021 and is less diverse compared to the state as a whole: 89% white, 3% black/African American, and 11% Hispanic.

The median age in the county is 44.5 years, nearly five years “older” than the population of NC as a whole. The population of citizens over the age of 65 is projected to grow 9% by 2050 while the total population of the county is projected to remain level. It will be critical for the community to monitor the growth of this population to address its needs, since this segment of the population tends to consume health and human services at higher rates.

Although the economy of Yadkin County includes a variety of jobs in manufacturing, vineyards and winemaking, tourism and outdoor activities, textiles, educational services, and transportation and warehousing, nearly 20% of the county’s workers are employed in retail trade or accommodation and food services, both low-paying sectors with many part-time employees and limited benefits. The average weekly wage across all sectors in 2022 was \$761, \$600 lower than the state average. Despite the relatively lower weekly wages, median family and household incomes rose steadily between 2011 and 2021. While unemployment increased abruptly in 2020 due to the Coronavirus (COVID-19) it had fallen to 3.3 by August 2023.

Even with improving income levels, housing can be a challenging expenses for individuals and families. While the data examined as part of this CHA may not yet reflect the impact of higher interest rates on the cost of living, the average gross rent and average monthly mortgage were both hundreds of dollars lower compared to NC and many householders still spend more than 30% of their income on housing. In 2021, an estimated 55% of rented housing units and 20% of owned housing units in Yadkin County were cost-burdened in 2021.

Although it has improved over time, poverty persists in Yadkin County, especially among minorities and children. The 100% poverty rate in Yadkin County in 2021 was 15.4%, higher than in NC as a whole. However, 43% of Hispanic/Latinos were living in poverty, with rates among Some Other Races and Two or More Races similarly high. Among children in the county under the age of 18, the poverty rate was 26% in 2021.

Poverty can diminish all aspects of quality of life, especially physical and mental health. The population in poverty is even more at risk for poor health outcomes if its members do not have health insurance. In 2021, an estimated 15% of the Yadkin County population between ages 0-64 lacked health insurance of any kind. Children ages 0-18 fared better, with only 6% uninsured, due largely to increasing numbers of individuals enrolling in Medicaid and NC Health Choice.

Even with health insurance coverage, the cost of healthcare remains a concern among Yadkin County residents. High costs, lack of appointment availability, and lack of health insurance were the most common barriers reported by community health

survey respondents who could not get needed healthcare in the past year. Yadkin County has much lower healthcare provider-to-population ratios compared to NC, does not have a hospital located within its borders, and lacks pediatricians and OB/GYNs. The aging of the healthcare workforce will only exacerbate access issues: 50% of physicians in Yadkin County were over the age of 65 in 2022.

Economic struggles ranked high on the list of concerns among respondents to the 2023 Community Health Survey distributed among Yadkin County residents, with 59% indicating that it was one of the most important issues affecting quality of life in Yadkin County. Higher paying employment leads the list of services most needing improvement in the county, with employment and employment resources ranking fifth and housing ranking sixth.

Health in Yadkin County

Life expectancy in Yadkin County has not changed much in 30 years. For a person born in 2018-2020, the overall life expectancy was 75.8 years, compared to 75.5 years for a person born in 1990-1992. The most significant improvement occurred among males, for whom life expectancy improved from 72.2 years in 1990-1992 to 73.6 years in 2018-2020. Unfortunately, life expectancy for females decreased from 78.9 years in 1990-1992 to 78.1 years in 2018-2020.

Well-being starts with a healthy birth and while Yadkin County mothers were more likely to receive early prenatal care than the average NC mother in 2021, they were also more likely to have smoked during pregnancy. The percentage of births that were low-weight rose above the state rate in 2017-2021, as did infant mortality rates. Yadkin County pregnancy rates, which decreased in 2021, tend to be lower compared to NC; rates are higher among Hispanic women compared to white women. The teen pregnancy rate was higher compared to NC in 2021.

Comparison of Yadkin County health data over the past two decades has identified improvement in certain health parameters, such as the leading causes of death. Since 2001-2005, mortality rates in the county have declined overall for eight leading causes of death. However, mortality rates rose for unintentional injuries, chronic lower respiratory diseases, Alzheimer's disease, diabetes, unintentional motor vehicle injuries, suicide, and chronic liver disease and cirrhosis. Among these causes of death, unintentional injuries are disproportionately fatal among Yadkin County males; the male 2017-2021 mortality rate was nearly double the mortality rate for females. Despite the long-term decreases in mortality rates for heart disease, cancer, pneumonia and influenza, and kidney diseases, Yadkin County mortality rates for those causes of death remained higher than the comparable state rates in 2017-2021.

Between 2001-2005 and 2017-2021, cancer mortality rates in Yadkin County decreased for the four most common site-specific cancers: lung, colorectal, prostate

and breast. Between 2005-2009 and 2017-2021 incidence rates also decreased for the four main site-specific cancers. However, since 2014-2018, mortality due to colorectal cancers has risen while incidence rates have decreased. Among respondents to the 2023 Community Health Survey, cancer ranked third on the list of leading health concerns, with 41.5% of respondents selecting it from a long list of health problems.

Among the lifestyle factors contributing to chronic diseases like heart disease, diabetes, and kidney diseases, overweight and obesity are perhaps the most important. According to the CDC, the average prevalence of adult obesity in the county from 2006 through 2021 was 25%. More than half (52%) of respondents to the 2023 Community Health Survey self-reported having received a medical diagnosis of overweight/obesity. Respondents identified obesity/overweight as the second most important health problem affecting quality of life in Yadkin County. They also recognized a need in the community for more information about nutrition, managing weight, and exercise. More than 40% of respondents reported getting no physical activity lasting at least 30 minutes in an average week.

More than any other issue, substance abuse was the primary topic of concern among Yadkin County community health survey respondents. Drug use was the most important issue affecting quality of life, with 73% of respondents selecting it. Substance abuse was the leading health problem (53.5%). More than half of respondents felt members of the Yadkin County community, both adults and youths, needed more information about substance abuse. In the face of limited data describing the prevalence of substance use among NC communities, looking at deaths and hospital visits due to unintentional poisonings is one of the primary metrics. The unintentional poisoning mortality rate rose in Yadkin County since 2009-2013 while the percentage of opioid pills dispensed fell steadily since 2016. An increasing proportion of drug overdose deaths involve not prescription opioids but illicit opioids like heroin and fentanyl. Opioids were the most common substance contributing to overdose deaths, emergency department visits and hospitalizations of Yadkin County residents, but the impacts of substances like stimulants and benzodiazepines and alcohol should not be overlooked.

YADKIN COUNTY POPULATIONS AT RISK FOR POOR HEALTH OUTCOMES

The poor, the uninsured, Hispanic/Latinos, and males are at greater risk for poor health outcomes than their wealthy, insured, white, and female counterparts. Other vulnerable populations include people living in the rural parts of the county, especially those with limited transportation options or without internet access. At-risk populations associated specifically with the priority health problems selected in Yadkin County will be discussed in more detail separately.

YADKIN COUNTY HEALTH PRIORITIES

At a meeting in late November 2023, the CHA Team was provided with a summary of the primary and secondary data, including comparisons with peer counties and the state. The Team participated in a discussion around which areas they felt could be successfully targeted over the next four years. It was emphasized that the programs implemented should have measurable outcomes. The group discussed that not all interventions need to be led by the YCHSA. The CHA Team discussed determining agencies and groups that were already doing some work and assisting and supporting them in their efforts. The CHA Team was determined to be stakeholders due to the crucial roles they play in the community. Given the importance of their unbiased input, regardless of their residency, they were asked to complete a Stakeholder Survey via SurveyMonkey. The survey was emailed to each CHA Team member with a two-week response deadline. As a result of the Stakeholder Survey, CHA Team discussions, and consideration by the CHA Coordinator and YCHSA representatives, the following were established as Yadkin County's health priorities for the next four years (2024-2028):

1. **Behavioral health** (including mental health, stress management, and substance abuse)
2. **Childhood health**
3. **Senior health** (physical health/chronic disease).

In January 2024, the CHA Team reviewed the final CHA report and made a recommendation to present it to the Board of County Commissioners for final approval.

NEXT STEPS

Dissemination of the CHA will occur throughout the community through various methods. Examples include, but are not limited to: reaching out to media outlets, conducting and participating in community meetings, and sharing findings with key stakeholders. The final version of the document will always be available on the Yadkin County website, and paper copies will also be available upon request.

THE COMMUNITY HEALTH ASSESSMENT PROCESS

OVERVIEW

Local public health agencies in North Carolina (NC) are required to conduct a Comprehensive Community Health Assessment (CHA) at least once every three or four years. The CHA is a requirement in the consolidated agreement between the NC Division of Public Health (NCDPH) and the local public health agency. Furthermore, a CHA is required for local public health department accreditation through the NC Local Health Department Accreditation Board (G.S. § 130A-34.1).

The community health assessment, which is both a process and a document, investigates and describes the current health status of the community, what has changed since the last assessment, and what still needs to change to improve the health of the community. The *process* involves the collection and analysis of a wide range of data, including demographic, socioeconomic and health statistics, environmental data, and professional and public opinion. The *document* is a summary of all the available evidence and is a useful data resource until the next assessment. The completed assessment serves as the basis for prioritizing the community's health needs and culminates in planning to meet those needs.

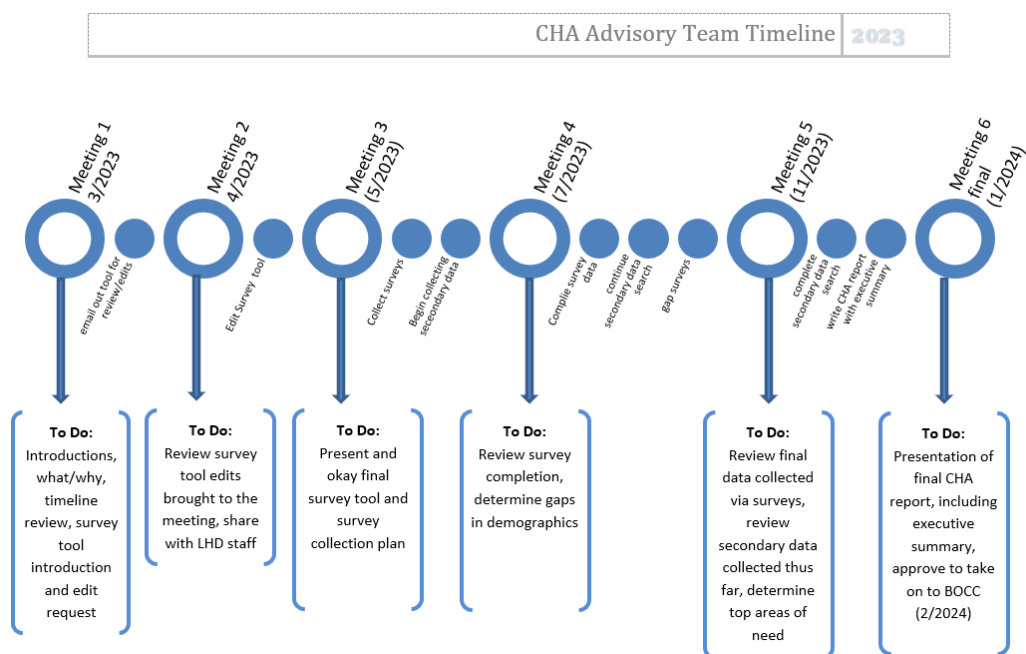
The CHA Coordinator worked with an independent consultant to follow a multi-phase plan for conducting the assessment. The phases included: (1) a secondary data research phase to identify, collect and analyze demographic, socioeconomic, health, and environmental data; (2) a primary data research phase to analyze data collected via a community health survey, available online and in hard copy, in English and Spanish; (3) a data synthesis and analysis phase; (4) a period of data reporting and discussion among the project partners; and (5) a prioritization and decision-making phase. Upon completion of this work, the assessment partners and the community have the tools they need to develop plans and activities that will improve the health and well-being of the people living in Yadkin County. The consultant provided direct technical assistance for phases 1, 2, 3 and 4. To assure project compliance with NCDPH guidelines and requirements, the CHA coordinator and the consultant utilized supporting tools available on the [NCDPH website](#).

PROCESS

Yadkin County Human Services Agency (YCHSA) staff recruited members for a team to guide the CHA process. In larger counties where community partners are more plentiful and not as frequently exhausted by service on multiple committees it may be more feasible to establish both an advisory group and work group for the Community Health Assessment (CHA) process. However, this is not the reality for most small, rural counties such as Yadkin County. Therefore, one CHA Team was formed that served simultaneously in advisory and working capacities. Efforts of the CHA Team were coordinated by a CHA Coordinator, who was the Assistant Director of the YCHSA.

Factors taken into consideration when assembling partners included: diversity and having a representation of county demographics; previous involvement in the CHA process; a vested interest in public health; expertise in various fields that can impact health; representation from community members; partner reputation and reliability; and partner connections within the community.

The initial CHA Team meeting/orientation was held in March 2023. Attendees were provided a brief history of the CHA in Yadkin County, oriented about the phases of the process along with a timeline for each phase and made aware of the expectations of team members. At the next meeting, team members began reviewing a draft of the community health survey prepared by the Coordinator and the consultant. Team meetings were held virtually and in-person as needed with communication in the interim via email and phone. The CHA Team worked to promote the community health survey from May 2023 until mid-September 2023.



By mid-September 2023, 210 community health surveys had been collected via Survey Monkey. Responses were analyzed by the independent consultant. In November 2023, the consultant provided a summary of secondary data findings and results from the community health survey; that presentation was also distributed electronically to the CHA Team. The priority setting process started with a discussion after the presentation and continued with a stakeholder survey distributed among the CHA Team.

DATA COLLECTION PROCESS

The consultant's primary tasks were to identify, collect and analyze secondary data, and to analyze the results of primary data collection activities conducted by the Yadkin County CHA Team.

Because in any community health assessment it is instructive to relate local data to similar data in other jurisdictions, Yadkin County data is compared to like data describing the state of NC, as well as data from Davie and Stokes counties in NC. In some cases, Yadkin County data is compared to US-level data or other standardized measures. Where appropriate, trend data was used to show changes in indicators over time, at least since the previous Yadkin County CHA in 2019, but often further back than that. Throughout the data collection process, attention was given to identifying at-risk and vulnerable populations when the data was disaggregated according to age, gender, or race/ethnicity. The consultant made every effort to obtain the most current data available at the time.

In order to learn about the specific factors affecting the health and quality of life of Yadkin County residents, the consultant tapped numerous readily available secondary data sources. For data on demographic, economic and social characteristics, sources included: the US Census Bureau; NC Office of State Budget and Management; NC Department of Commerce; NC Department of Public Instruction; NC Department of Justice; NC Department of Administration; NC Department of Transportation; NC Medicaid Division of Health Benefits; NC Division of Child Development; NC State Board of Elections; NC Division of Health Services Regulation; and the Cecil B. Sheps Center for Health Services Research.

The main source of secondary health data was the NC State Center for Health Statistics (NC SCHS), including its County Health Data Books, Vital Statistics, and Cancer Registry. Other health data sources included: NC Division of Public Health (NCDPH); NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services; and the NC Institute of Medicine, among other *public domain* sources. Other important *local* health data sources included the Yadkin County Human Services Agency. Definitions of the health statistics terminology used in this report are included in *2023 Yadkin County CHA Appendix 1. Health Data Definitions*.

Secondary environmental data were gathered from public domain sources including the US Environmental Protection Agency, NC Department of Environmental Quality, and the Section of Environmental Health in the NC Division of Public Health (NCDPH).

It should be noted that as is typical in all time-limited activities such as community health assessment, all secondary data were mined at points in time in the recent past and may not represent present conditions. Numbers, entity names, program titles, web addresses, etc. that appear in the consultant's report may no longer be current.

The community health survey was conducted primarily via Survey Monkey™ but was supplemented by hard copy surveys distributed to some population groups that could not easily access the Internet. Between May and September of 2023, 210 surveys were collected, including nine paper surveys that were manually entered and nine Spanish-language surveys. The results were analyzed by the Independent Consultant.

Since the survey was collected via convenience sampling, some groups are typically over- or under-represented. The 2023 survey sample was disproportionately female, older, more highly educated, and wealthier than the general population. While the unique primary data collected via the survey remains an important part of the CHA process, results should be interpreted with an awareness that the survey sample does not represent the full population of Yadkin County. Survey results are interspersed throughout this report. The survey instrument used is included as *2023 Yadkin County CHA Appendix 2. Community Health Survey Instrument*.

The consultant's PowerPoint presentation, containing an abridged summary of the secondary data and community health survey is attached as *2023 Yadkin County CHA Appendix 3. Consultant's Presentation*. The instrument distributed among the CHA Team to help determine the priorities is also provided as *2023 Yadkin County CHA Appendix 4. Stakeholder Survey*.

All secondary data, including indicators that are not discussed in full in this report, as well as summary results from the 2023 Yadkin County Community Health Survey, were compiled into a robust Data Workbook by the Independent Consultant. That workbook can be made available to members of the CHA Team or other partners upon request in order to support their efforts in the community.

All charts and tables presented in this report were generated by the Independent Consultant, based on the data compiled in the fall of 2023 and cited in the Data Workbook. Charts and tables display data that is discussed, and cited as endnotes, in the narrative with references listed at the end of the report. The source of any maps, which were not generated by the consultant, are provided beneath each image.

GENERAL DEMOGRAPHICS

COUNTY DESCRIPTION

Yadkin County is a land-locked county located in the Foothills Region of western NC. It is bordered to the west by Wilkes County, to the east by Forsyth County, to the south by Davie County and Iredell County, and to the north by Surry County.

Yadkin County encompasses a land area of approximately 334 square miles of rolling hills, farmland, and forest. The Yadkin River forms the northern and eastern borders of the county. The county is divided into 12 township districts: Boonville, Deep Creek, East Bend, Forbush, North Buck Shoals, North Fall Creek, North Knobs, North Liberty, South Buck Shoals, South Fall Creek, South Knobs, and South Liberty townships. The county seat of Yadkinville is located in the south-central part of the county.



Source: https://www.carolana.com/NC/Counties/yadkin_county_nc.html

The primary ground transportation routes through Yadkin County are US Interstate 77, US Highways 421, 21 and 601, and NC Highways 67. The city of Winston-Salem (Forsyth County) is located approximately 27 miles to the east of Yadkinville and Statesville (Iredell County) is 35 miles to the south. Residents seeking passenger airlines must travel to Greensboro (50 miles east) or Charlotte (77 miles south) to reach an international airport. No passenger rail service travels to Yadkin County; there is a Greyhound bus stop in Hamptonville, NC.¹

While it remains a primarily rural county, the establishment of the Yadkin Valley Wine Region in 2000 shifted the agricultural focus of Yadkin County from tobacco to grapes. The manufacturing base of the county is diverse and robust. An increasing variety of outdoor recreational activities as well as arts activities entertain tourists and residents alike.²

DEMOGRAPHICS

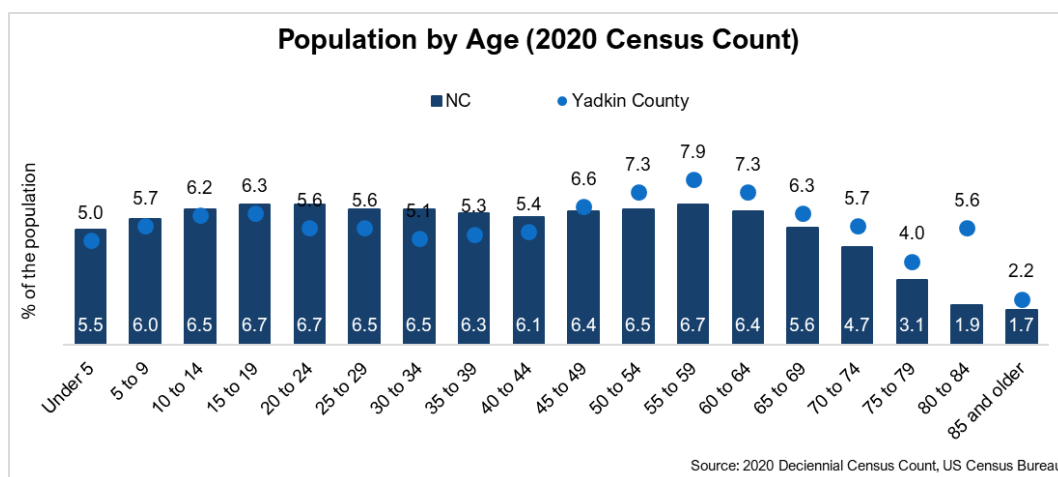
According to the 2020 Decennial Census count, Yadkin County is home to 37,214 people, similar to the 2021 American Community Survey (ACS) estimate of 37,198 and the 2023 NC Office of State Budget and Management (NC OSBM) estimate of 37,082. With a projected population of 36,991 by 2050, the size of the county is expected to

change very little over the next three decades.³ Population change is a combination of births, deaths, and geographic mobility. The birth rate in Yadkin County has remained relatively steady at around 10.0 since 2010-2014; on average, 377 births occur each year in Yadkin County.⁴ Approximately 8% of the county population had moved there from another county, state, or country in 2021.⁵ The projected “natural increase” of the county population is negative over the coming decades, meaning more people are expected to die than are born. The net migration into the county tends to be similar to the natural increase, which is why the population projections remain flat.

The Yadkin County population is less diverse compared to the NC population overall: 89% white, 3% Black/African American, and 11% Hispanic/Latino; the comparable percentages for NC are 66% white, 21% African American, and 10% Hispanic/Latino.⁶

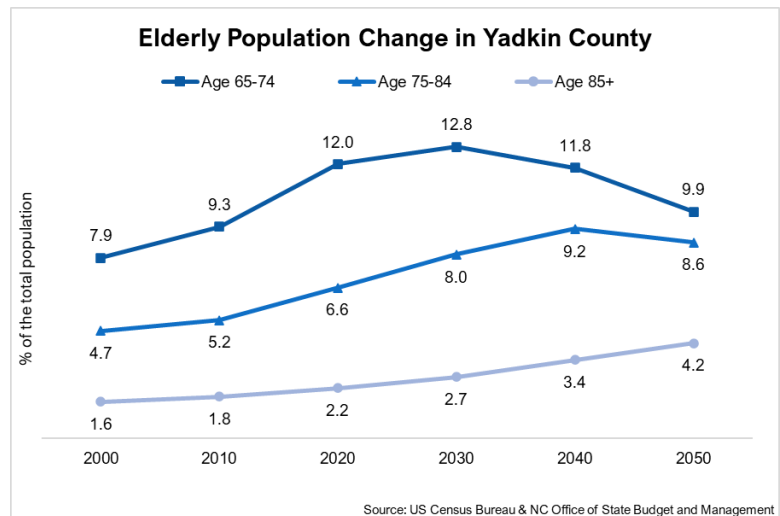
Racial Distribution as a % of the Total Population (2021)	White	Black	AIAN	Asian	Other Race	Multiple Races	Hispanic/Latino
Yadkin County	89.3	3.3	0.4	0.2	3.3	3.5	11.4
Davie County	86.8	4.6	0.5	0.6	2.3	5.2	7.2
Stokes County	92.2	3.9	0.3	0.4	0.7	2.4	3.4
North Carolina	66.2	21.2	1.1	3.3	3.6	4.8	9.8

In 2021 the median age in the county was 44.5 years, nearly five years “older” than the median age of the population of NC as a whole (39.0). As the graph provided below demonstrates, compared to NC, the Yadkin County population has higher percentages of residents over the age of 45 and lower percentages of residents under the age of 45. Minors under the age of 18 comprise approximately 20% of the population while seniors aged 65 and older account for another 20% of the population.⁷



According to figures from the NC OSBM, the population of persons aged 65 and older in Yadkin County could grow by 9% over the coming decades, from approximately 7,700 in 2020 to 8,383 by 2050.

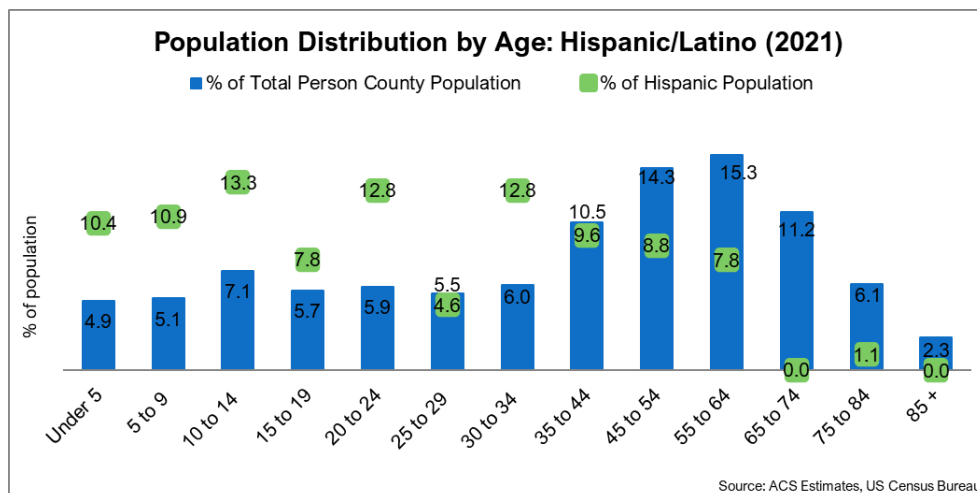
More specifically, while the population age 65-74 is projected to decrease by 17%, the population age 75-84 is projected to increase by 30% and the population over age 85 may increase by 89%.⁸ The oldest adults can face unique challenges such as increased risk of falls, different patterns of health care utilization, more demanding and complicated long-term care needs, as well as transportation and mobility issues.



OTHER POPULATIONS OF NOTE

Approximately 7% of Yadkin County households, around 1,080, spoke a language other than English in 2021. Spanish was the most common language spoken and 26% of the non-English speakers in Yadkin County would be considered linguistically isolated, meaning they speak English "less than very well".⁹

With more than 4,200 Hispanic/Latino-identifying people living in Yadkin County, it is worth noting that this population skews significantly younger than the total Yadkin County population. In 2021, approximately 42% of the Hispanic/Latino population were minors and only 1% were aged 65 and older.¹⁰



Yadkin County was home to 2,250 veterans in 2021; 58% were over the age of 65, a higher proportion compared to Davie County (55%), Stokes County (51%), and the state of NC (45%).¹¹

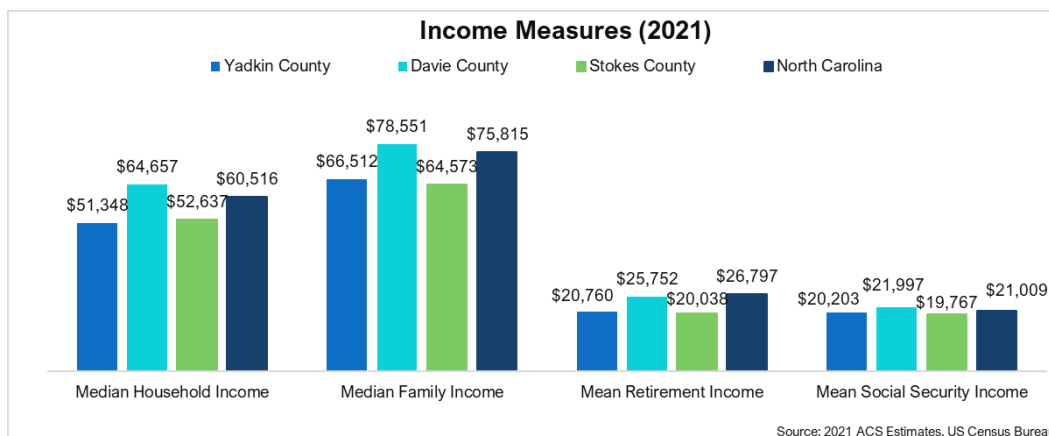
According to 2021 ACS estimates, 15% of the Yadkin County population (nearly 5,700 individuals) was living with a disability, higher than North Carolina (13%) and lower than Davie County (17%) and Stokes County (19%). Ambulatory difficulties were most common (9% of the population) followed by independent living difficulties (each 8%) and cognitive difficulties (5.5%). Approximately 4% of the county population had a hearing difficulty, 3.5% had a self-care difficulty, and 3% had a vision difficulty.¹²

ECONOMIC STABILITY

The NC Department of Commerce annually ranks the state's 100 counties based on economic well-being and assigns a Tier Designation, where the 40 most distressed counties are Tier 1, the next 40 are Tier 2, and the 20 least distressed are Tier 3. Unemployment rate, median household income, population growth, and poverty rate are the primary measures used to calculate the rankings. For 2023 and 2024, Yadkin County had a Tier 2 designation.¹³ With this designation, Yadkin County is eligible for different economic incentives to prospective businesses compared to its Tier 3 peer Davie County.

INCOME

Yadkin County income measures, as presented in the chart below, are lower compared to the state and Davie County and similar to Stokes County.

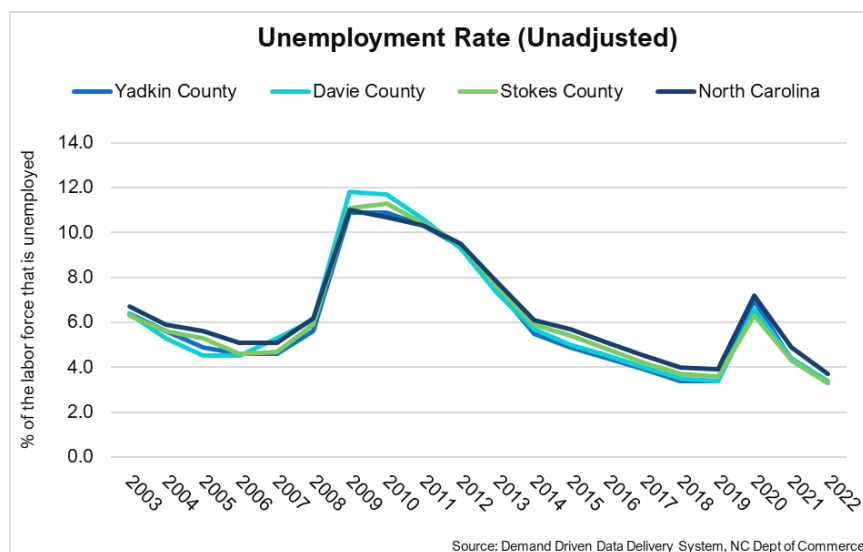


The *median household income* in Yadkin County increased from \$40,375 in 2011 to \$51,348 in 2021 and the *median family income* rose from \$52,199 to \$66,512 over the same decade. *Mean retirement income* rose by \$2,800 between 2011 and 2021 and mean social security income rose by nearly \$5,000 over the same period. The wage gap between males and females also rose over the decade: in 2021 full-time, year-round female workers in Yadkin County made \$9,500 less than males working year-round full-time jobs; in 2011 female workers made \$5,700 less than male workers.¹⁴

EMPLOYMENT

In 2022, the manufacturing sector employed the largest percentage of the Yadkin County workforce (27.5%) and paid an average weekly wage of \$940; statewide, the average weekly wage in the manufacturing sector was \$1,306. Retail Trade was the second largest sector, employing 9.8% of the workforce and paying an average of \$577 per week, \$148 lower than the state average. The retail trade sector typically includes many part-time employees working unpredictable and variable hours, and many employers do not provide health benefits. The third largest sectors, each accounting for approximately 9.5% of the workforce, were Transportation & Warehousing (\$986 average weekly wage) and Accommodation & Food Services (\$328 average weekly wage). In 2022, the average weekly wage across all employment sectors was \$761 in Yadkin County, \$609 less than the average weekly wage per worker statewide (\$1,370).¹⁵

The unemployment rate in Yadkin County follows the same general pattern as its peer counties and the state. In 2022, the Yadkin County unemployment rate was 3.3, lower than NC (3.7). The abrupt rise in the unemployment rate in 2020 is due to the COVID-19 pandemic. The unemployment rate decreased slightly in the spring of 2023 and had risen to 3.3 by August 2023.¹⁶

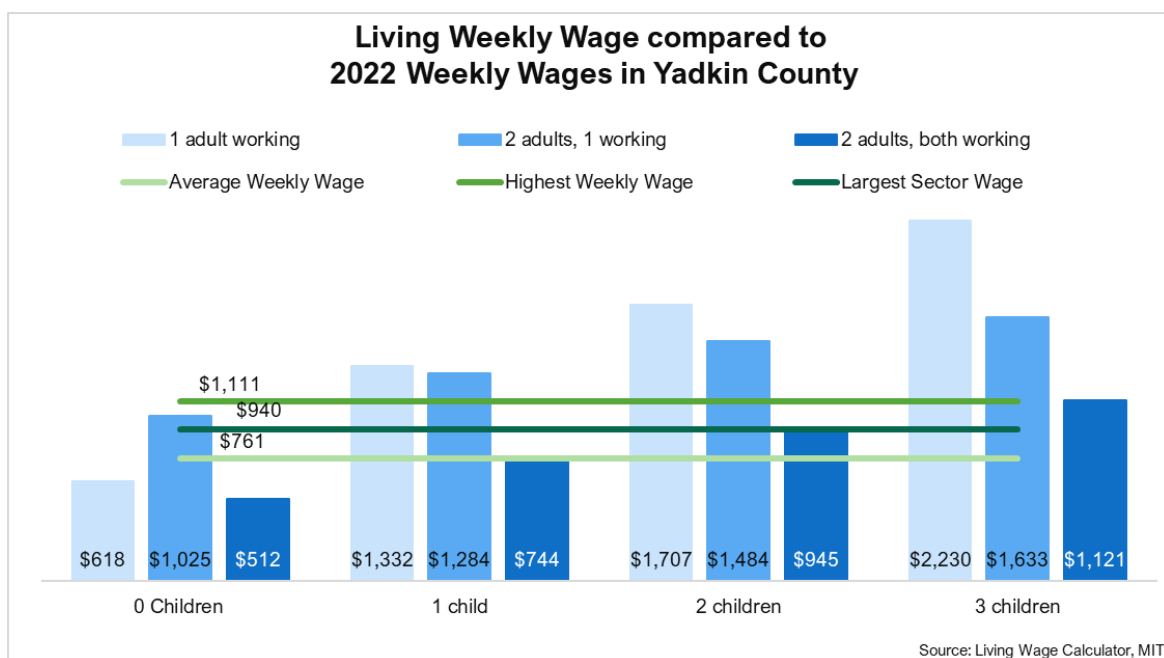


Living Wage

A researcher in the Department of Urban Studies and Planning at the Massachusetts Institute of Technology has produced a Living Wage Calculator. "The living wage is the minimum income standard that, if met, draws a very fine line between the financial independence of the working poor and the need to seek out public assistance or suffer consistent and severe housing and food insecurity. In light of this fact, the living wage is perhaps better defined as a minimum subsistence wage for persons living in the United States."¹⁷

The bars in the chart below represent the estimated living wage for Yadkin County, based on the number of adults earning income and the number of children in the family. The light blue bars indicate what one working adult would need to make per week to earn what would be considered a living wage. The sky blue bars are what two adults in a household, with only one working, would need to earn. And in medium blue is what a household with two working adults, each earning the amount stated, would need to earn.¹⁸ The green lines in the chart represents the average weekly wage earned by Yadkin County employees in 2022: the average weekly wage, the highest weekly wage (in the Finance & Insurance sector) and the weekly wage in the largest sector (Manufacturing).

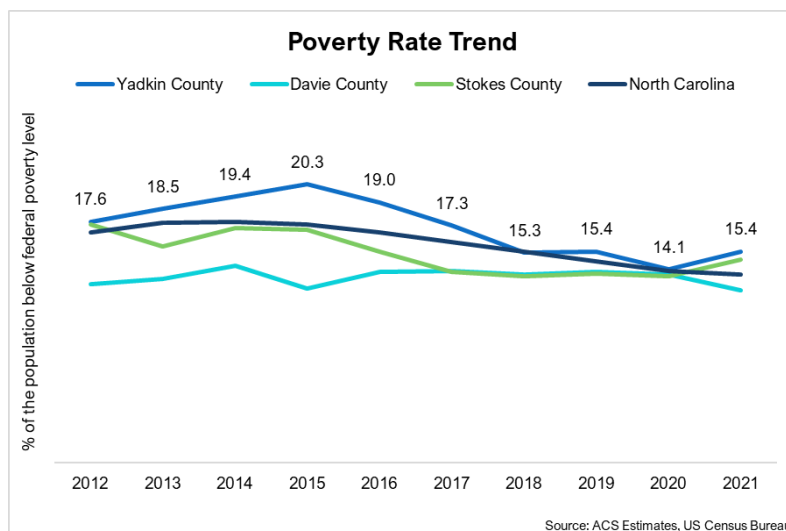
The average weekly wage earned by a Yadkin County employee in 2021 (\$761) would be considered a living wage only for an individual with no children or a dual-income couple with no children or only one child. It would not be enough for a single parent with one or more children, families with one working parent and 1 or more children, or a dual-earning family with two or more children.



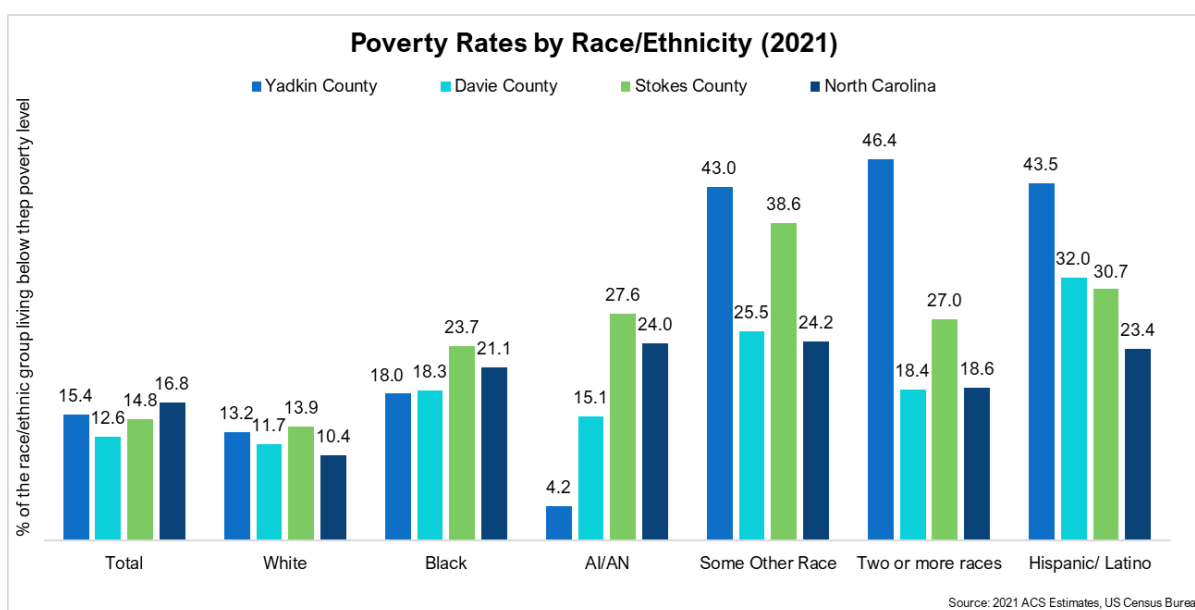
POVERTY

Poverty can diminish all aspects of quality of life including physical and mental health. The population in poverty is even more at risk for poor health outcomes if its members do not have health insurance. The uninsured population in Yadkin County will be discussed more fully in the Health Resources section of this report.

Although the poverty rate in Yadkin County decreased from a high point in 2015, compared to its peer counties and NC, Yadkin County demonstrated higher poverty rates over the entire 2012 to 2021 period. In 2021, 15.4% of the Yadkin County population (an estimated 5,685 individuals) lived below the federal poverty line.¹⁹



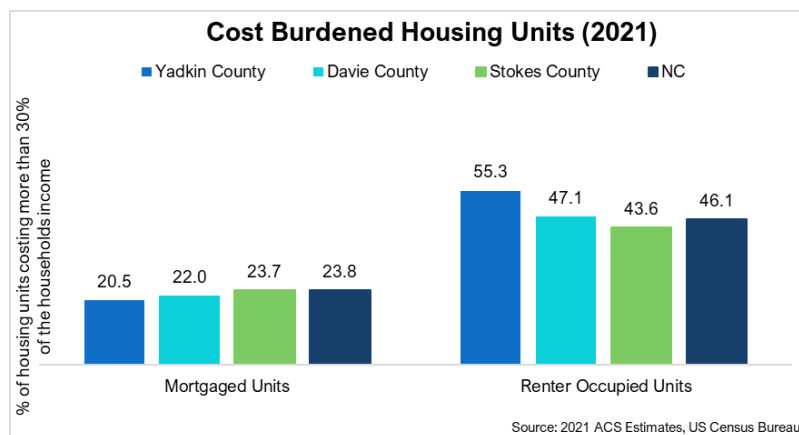
Hispanic/Latino populations and residents identifying as mixed race or "some other race" endure poverty at higher rates than their white counterparts. In 2021, the poverty rate among Hispanic/Latinos in Yadkin County (43.5%) was nearly three times the rate among white residents (13.2%). Youths also demonstrated higher poverty rates in 2021: 25.8% of children under 18 lived below the poverty level compared to 15.4% among the overall population.²⁰



HOUSING

In 2021, Yadkin County residents were more likely to be homeowners compared to NC: 76% of housing units in Yadkin County were owned and 24% were rented. Statewide, 34% of housing units were rented in 2021.

Housing is typically the largest expense for a household. A benchmark often used to compare housing expense among communities is to cite the proportion of household units spending 30% or more of total household income on housing. These households are considered “cost burdened”.



The estimated monthly mortgage cost increased in Yadkin County, from \$996 in 2016 to \$1,025 in 2021, still well below the NC average of \$1,397. The percentage of cost burdened owned housing units decreased from 32.0% in 2016 to 20.5% in 2021, lower than NC (24%), Davie County (22%) and Stokes County (24%).

In 2021, the average gross rent in Yadkin County was \$643 per month, lower than the NC average of \$988. Among rented units in Yadkin County, 55% were cost burdened in 2021, an increase from 47% in 2016 and higher compared to NC and both peer counties.²¹

Across Yadkin County, 23% of occupied housing units both owned and rented, were mobile homes in 2021, nearly double the proportion statewide (12%). Nineteen percent of housing units had been built before 1959 and 16% were heated with fuel oil, kerosene, coal, coke, or other fuels. Approximately 126 housing units in the county had no heating source, 139 lacked complete kitchen or plumbing facilities, and 136 had no telephone service.²²

The 2023 Yadkin County Community Health Survey asked respondents to select the top three Issues that had an impact on quality of life in Yadkin County (see *Appendix 2: Community Health Survey Instrument*). Low income/poverty ranked second on the list, as identified by 59% of respondents. When asked to identify the service issues that most needed improvement in Yadkin County, higher paying employment ranked first, as selected by 35.5% of respondents. Employment/employment resources was identified as a service needing improvement by 24% of respondents; 22% of respondents identified Housing as an area needing improvement.²³

EDUCATION ACCESS & QUALITY

EDUCATIONAL ATTAINMENT

According to 2021 ACS estimates, 14% of the Yadkin County population over age 25 had less than a high school education, higher than NC as a whole (11%). Compared to the state rate of 25%, Yadkin County had a higher proportion of residents who graduated from high school and sought no further education (35.5%). While 33% of the state population has a bachelor's degree or higher, 14% of the Yadkin County population had attained at least a college degree.²⁴

According to data on adult literacy and numeracy from the National Center for Education Statistics, Yadkin County adults are more likely to struggle with more complicated reading and mathematical tasks compared to NC and the US. An estimated 26% of Yadkin County adults are at or below the lowest level of literacy, which requires adults to recognize basic vocabulary and determine meaning in order to locate a single, simple piece of information in a short text; 21% of NC and 22% of the US are at the same literacy level. An estimated 38% of Yadkin County adults are at or below the lowest level of numeracy, which requires basic mathematical processes in concrete contexts, such as simple arithmetic, percentages, and special or graphical representations. Approximately one-third of NC and the US are at the same numeracy level.²⁵

EARLY CHILDHOOD

As of April 2023, 23 licensed child care centers and two licensed family child care homes were operational in Yadkin County. Among the 1,443 licensed slots in child care centers, 690 children were enrolled; no licensed slots are available during 2nd or 3rd shifts. As of April 2023, 12 children were enrolled among 16 total licensed slots in family child care homes; no 2nd and 3rd shift slots are currently available in these homes.²⁶

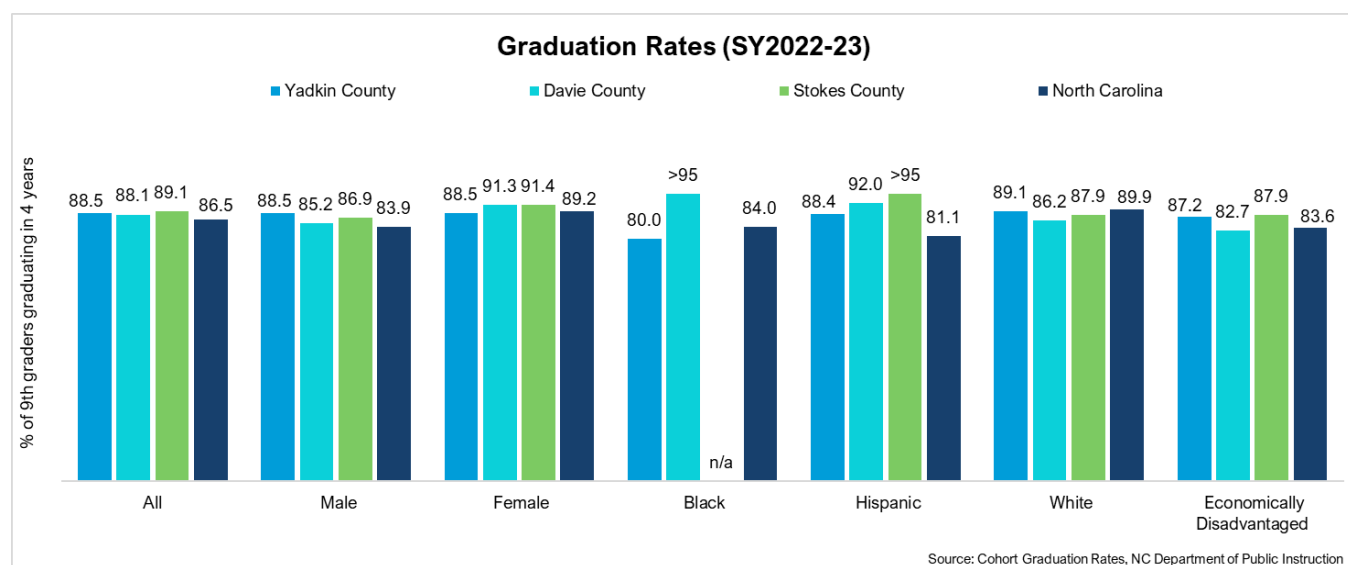
PRIMARY AND SECONDARY EDUCATION

There are currently 14 public schools in the Yadkin County school district: eight elementary schools, two middle schools, two high schools, one early college and one alternative school, all serving a total of almost 5,100 students in School Year (SY) 2021-22. Enrollment in Yadkin County Schools has decreased steadily from a high of 6,201 in SY2007-08.²⁷ There are also three private schools in the county, all of them religiously affiliated, with approximately 62 students enrolled in SY2022-23.²⁸

According to the NC Department of Public Instruction, a "drop-out" is any student who leaves school for any reason before graduation or completion of a program of studies without transferring to another elementary or secondary school. The Yadkin County high school drop-out rate has decreased over the past decade, from a high of 2.15 (39 students dropped out) in SY2012-13 to 0.18 (3 students) in SY2021-22. Drop-out rates

in Yadkin County tend to be lower compared to peer counties Davie and Stokes and compared to NC.²⁹

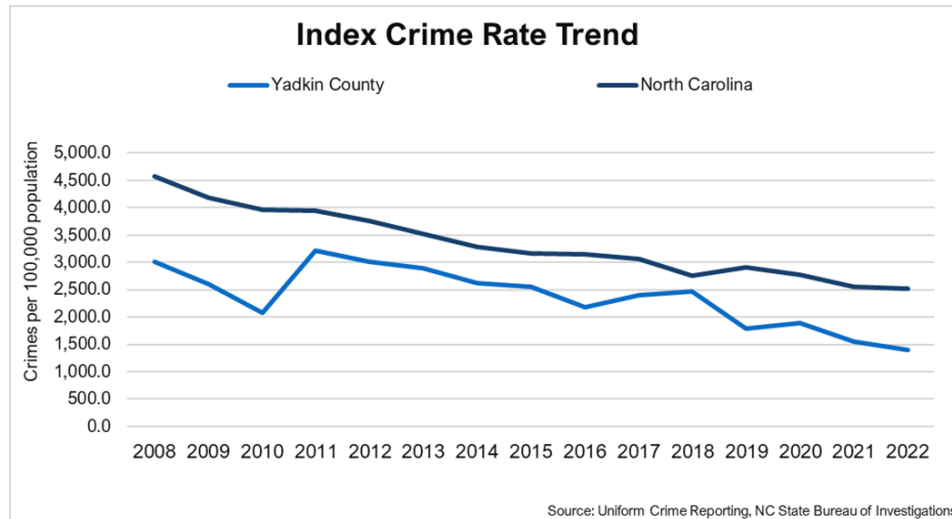
Some educators prefer to use graduation rates rather than drop-out rates when discussing the proportion of students who finish/do not finish school, since it emphasizes success rather than failure. The four-year cohort graduation rates for subpopulations of students are shown in the following chart, which illustrates that the Yadkin County graduation rates were higher compared to the state among males, Hispanic Students, and the economically disadvantaged.³⁰



SOCIAL AND COMMUNITY CONTEXT

CRIME AND SAFETY

The NC Department of Justice catalogs trend data on *index crime*, which is composed of *violent crime* and *property crime*. Violent crime includes murder, rape, robbery, and aggravated assault; property crime includes burglary, larceny, arson, and motor vehicle theft and tends to account for a higher proportion of all crimes. The index crime rate in Yadkin County has decreased overall since 2011 and was lower than the comparable state rate throughout the period shown below.³¹ In Yadkin County, the most common violent crime reported tends to be aggravated assault, and the predominant property crime reported in every year cited was larceny (theft of property without the use of force).³²



Type of Crime Reported	2018	2019	2020	2021	2022
Violent Crime	130	69	65	55	60
<i>Murder</i>	1	3	1	6	1
<i>Rape</i>	10	15	10	13	14
<i>Robbery</i>	7	6	6	4	1
<i>Aggravated Assault</i>	112	45	48	32	44
Property Crime	769	534	615	510	449
<i>Burglary</i>	279	140	170	147	100
<i>Larceny</i>	445	364	409	310	303
<i>Motor Vehicle Theft</i>	45	30	36	53	46
Total Index Crimes	899	603	680	565	509

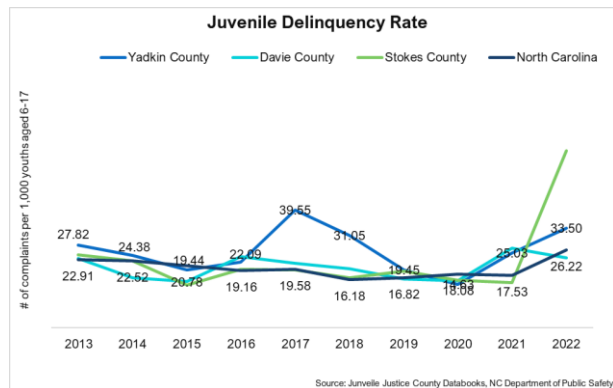
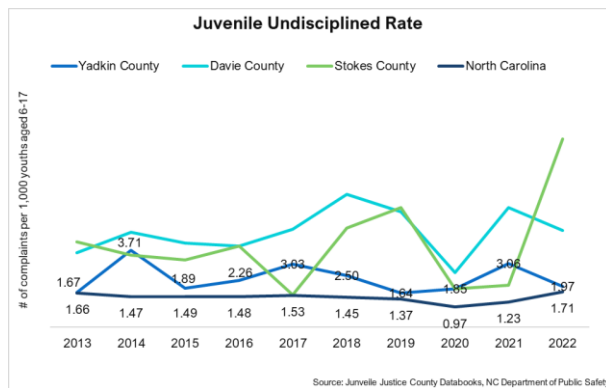
Source: NC State Bureau of Investigations, Crime Statistics

In 2018 through 2022, there were 811 arrests related to the sale/manufacture or possession of drugs in Yadkin County. Among those arrests, 39% involved “other dangerous drugs” such as barbiturates and amphetamines, 28% involved marijuana, 27% involved opium or cocaine, and 7% involved synthetic narcotics (e.g. methadone, Demerol). Statewide over that same period, 44% of drug-related arrests involved marijuana, 26% involved other dangerous drugs, 26% related to opium or cocaine, and 4% involved other synthetic narcotics. There were 197 arrests for driving under the influence in Yadkin County in 2018-2022, an average of 39 per year.³³ According to the NC State Bureau of Investigation, there was only one methamphetamine drug lab bust in Yadkin County in 2018 through 2021.³⁴

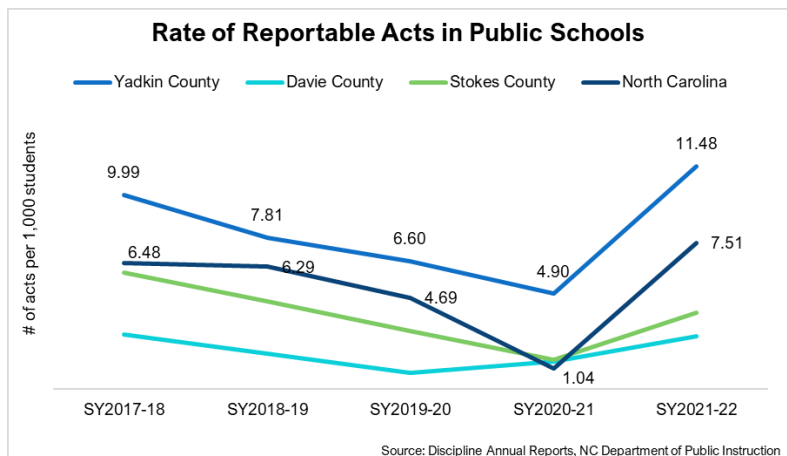
Juvenile Crime

Between 2013 and 2022, an average of 135 complaints of juvenile offenses were processed each year in Yadkin County. The juvenile undisciplined rate in Yadkin County was higher compared to NC over the entire period shown below. Yadkin County’s juvenile delinquency rate increased since 2020 and it was higher than NC

over much of the period shown. A juvenile is determined to be undisciplined if they committed offenses that would not be crimes if committed by adults (truancy, running away from home, ungovernable, or is regularly found where it is unlawful for juveniles to be). A juvenile delinquent is any juvenile between 6 and 15 who commits an offense that would be a crime under state or local law if committed by an adult.³⁵



Compared to its peer counties and the state, Yadkin County presented higher rates of reportable crime and violence in the school setting in the period graphed. A total of 206 reportable offenses occurred in SY2017-18 through SY2021-22. The most common reportable offense in Yadkin County schools over the period shown was possession of a controlled substance (105 acts), followed by possession of alcohol (45 acts) and possession of a weapon (35 acts).³⁶



Sexual Assault and Domestic Violence

The Domestic Violence Commission of the NC Council for Women publishes data pertaining to both sexual assault and domestic violence, as provided by local agencies that receive funding from them. In FY2021-22 that local agency was [YVEDDI](#) (Yadkin Valley Economic Development District's Domestic Violence Sexual Assault Program). YVEDDI served 344 clients filing domestic violence complaints, providing a wide range of services, the most frequent of which were referrals, accompaniment to court, and information. The local domestic violence shelter was not full on any day in the 2021-22 fiscal year. In FY2020-21, 48 individuals filed sexual assault complaints with the YVEDDI program, which provided referrals, court accompaniment, and transportation most frequently. The most common type of offender was a boyfriend,

girlfriend or partner, and the most common type of assault reported was rape.³⁷ Between 2008 and 2022 there were 11 domestic violence-related homicides in Yadkin County.³⁸

Child Maltreatment

The responsibility for identifying and reporting cases of child abuse, neglect, and exploitation falls to the child protective services program within a county's department of social services. Between FY2007-08 and FY2021-22, an average of 199 reports of child abuse, neglect or dependency were investigated in Yadkin County each year and an average of 22 (6%) were substantiated. Neglect was the most common finding, accounting for an average of 81% of substantiated cases between FY2007-08 and FY2021-22. In FY2022-22 there were 9 substantiated findings: no cases of abuse and neglect, five cases of abuse, and four cases of neglect. Among the substantiated cases in FY2021-22, 100% were white non-Hispanic, 66% were female and 33% were male; 33% were under age 6, 55.5% were aged 6-12, and 11% were aged 13-17.³⁹

Among 2023 Yadkin County Community Health Survey respondents, 25% identified child neglect and abuse as one of the most important local issues; 10% identified domestic violence and 7% chose elder neglect and abuse.⁴⁰

FAMILY AND SOCIAL SUPPORT

According to 2021 ACS estimates, 15% of Yadkin County householders were living alone and 65% of householders living alone were over the age of 65. Twenty percent of Yadkin County households are comprised of married couples with minor children, 4% are single mothers of minor children, and less than 1% are single fathers of minor children.⁴¹

In 2021, an estimated 410 grandparents in Yadkin County were living with minor grandchildren; 53% of those grandparents were responsible for the grandchildren, meaning they are financially responsible for the basic needs of the grandchild, including food, clothing, and day care. Compared to NC, a higher proportion of the Yadkin County grandparents responsible for grandchildren were white (75%), male (52%), disabled (28%), and lived below the poverty level (26%).⁴²

Nearly 24% of the respondents to the 2023 Community Health Survey felt that the lack of community support was an issue affecting quality of life in Yadkin County. Twenty seven percent felt the need for improvement of positive teen activities and another 10% wanted to see improvement in healthy family activities.⁴³

ENVIRONMENTAL CONTEXT

AIR QUALITY INDEX

The US Environmental Protection Agency (EPA) maintains air quality monitoring stations throughout the country to continuously measure the air pollutants that most affect the health and well-being of the public including: carbon monoxide, nitrous oxide, sulfates, ozone, and particulate matter. These stations tend to be in populous areas or along highway routes that carry significant traffic loads. There is no monitoring station located in Yadkin County, Davie County or Stokes County. The primary air pollutants in neighboring Forsyth County tend to be fine inhalable particulate matter and ozone.⁴⁴ Although pollution did not rank as an important issue among respondents to the 2023 Community Health Survey, 45% reported being exposed to secondhand smoke in the past year, from either cigarettes or vape products.⁴⁵

TOXIC CHEMICAL RELEASES

The US Toxic Releases Inventory (TRI) program is the tool the EPA uses to track industrial releases of toxic chemicals to land, air, and water. Approximately 20,000 industrial facilities are required to report estimates of their environmental releases and waste generation annually to the TRI program office. Note that these reports do not cover all toxic chemicals, and they omit pollution from motor vehicles and small businesses. Yadkin County has not been one of the reporting counties in NC since 2007; the last time any facility in the county reported any toxic releases was 1997.⁴⁶

DRINKING WATER SYSTEMS

Public water systems provide drinking water to most Americans, and they must abide by established and enforced safety standards. The most common non-public source of water is private wells, the safety of which must be maintained by the homeowner. The EPA's Safe Drinking Water Information System (SDWIS) contains information about public water systems and their violations of EPA's drinking water regulations, as reported to EPA by the states. The EPA establishes maximum contaminant levels, treatment techniques, and monitoring and reporting requirements to ensure that water systems provide safe water to their customers.

As of December 2023, approximately 30% of the Yadkin County population, around 11,000 residents, were served by community water systems. The largest water system, serving the town of Yadkinville, had no health-based violations (a contaminant exceeded the safety standard or water was not treated properly) in the past 10 years. The remaining 70% of the county population gets their water from private wells or other sources and are at greatest risk for environmental contamination of their water source.⁴⁷ Responsibility for maintaining private wells lies with the property owners and local health departments inspect new well sites, well heads, and take samples when

necessary. According to data provided by the Environmental Health division of the Yadkin County Human Services Agency, between January 1, 2020 and December 31, 2022, 130 well sites were evaluated, 331 construction permits for new wells were issued, 173 new wells were completed; 174 samples, bacteriological or other, were collected from wells in Yadkin County.⁴⁸

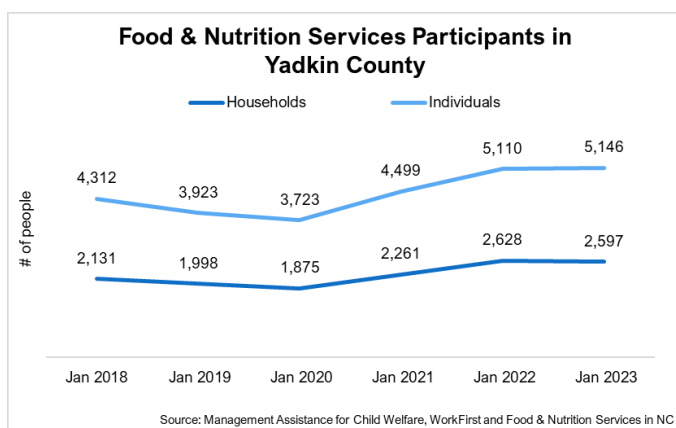
SOLID WASTE DISPOSAL

In FY2021-22, Yadkin County disposed 35,370 tons of municipal solid waste (MSW), a rate of 0.95 tons per capita, which is a 42% decrease from the per capita rate for FY1991-92 (the period customarily used for the base rate). The overall state per capita solid waste management rate was 1.33, 24% higher than the FY1991-92 base per capita rate.⁴⁹

Most (89%) of the solid waste generated in Yadkin County is landfilled at the Foothills Environmental Landfill, located in Caldwell County.⁵⁰ According to a state report for FY2021-22, the landfill had enough capacity estimated to last for nearly 20 years.⁵¹

ACCESS TO HEALTHY FOOD & PLACES

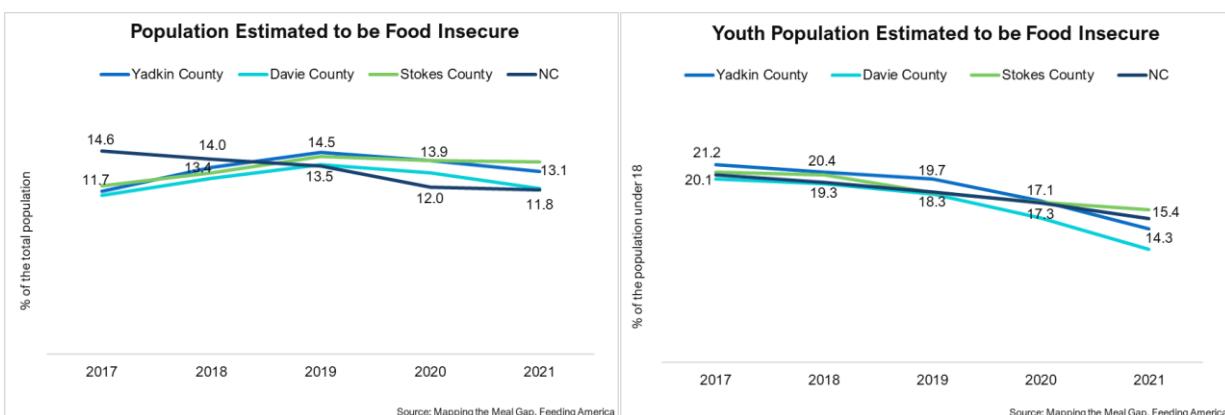
As of January 2023, nearly 2,600 households comprised of more than 5,100 individuals (36% of them under the age of 18) were receiving Food and Nutrition Services (FNS) benefits, more than in any of the previous five years. Since 2018, the number of seniors over the age of 65 receiving FNS benefits has risen.⁵²



Meals provided by local school systems are an important source of nutrition, particularly in rural counties. School children who are determined to be “needy” (usually referred to by school systems as Economically Disadvantaged) qualify to receive free- and reduced-cost school meals. In Yadkin County, 57% of students in SY19-20 were determined to be needy, similar to NC (58%) and higher than Davie County (44%) and Stokes County (51%). More recent data is unavailable due to a statewide policy that all school meals were provided to all children for free in SY20-21 and SY21-22.⁵³

Food security, as defined by the United Nations’ Committee on World Food Security, exists when all people, at all times, have physical, social, and economic access to sufficient, safe, and nutritious food to meet their dietary needs and food preferences for an active and healthy life. According to Feeding America’s estimates, 13% of the overall Yadkin County population, approximately 4,880 people, was food insecure in

2021. While data is only available to describe a few years, Yadkin County estimates were higher compared to NC and Davie County estimates in 2019-2021. Food insecurity tends to be higher among children compared to the total population, although the percentage of food insecure children has decreased over the past five years. The rate among youths decreased in Yadkin County in 2021, to below the state rate of 15.4%.⁵⁴



Respondents to the 2023 Community Health Survey ranked “eating well/nutrition” fourth on the list of health behaviors Yadkin County residents needed more information about, as selected by 22%. Nutrition did not rank high on the list of issues about which respondents felt youths needed more information. “Healthy food choices” was selected by 17% of respondents when asked what services most needed improvement in Yadkin County.⁵⁵

Transportation

According to 2021 ACS estimates, 5% (749) of Yadkin County housing units had no vehicle available, a similar proportion compared to Davie County (4.5%) and NC (5.5%) and higher than Stokes County (2.6%). Rented units were more likely than owned units to have no vehicle available: 11.7% of renter-occupied units lacked vehicle access while 2.3% of owner-occupied units did not have a vehicle. Yadkin County householders over the age of 65 were more likely than middle-aged or younger residents to lack vehicle access: 46% of the households with no vehicle access had householders aged 65 and older. Statewide, higher proportions of middle aged householders (aged 35-64) lack vehicle access.⁵⁶

Among workers aged 16 and older, an estimated 52% traveled outside of Yadkin County for work in 2021; less than 1% traveled outside of NC for work. The majority of those individuals drove alone to work (84%); 9% carpooled, 3% walked, used a taxi, motorcycle, or other form of transportation, and 4.5% worked from home.⁵⁷

The lack of transportation options did not rise to the top of the list of services needing improvement, with only 8% of 2023 Community Health Survey respondents selecting it. Road maintenance ranked higher, with 18% identifying it as an area needing improvement.⁵⁸

Internet Access

Nearly 1,800 households, an estimated 12% of all Yadkin County households, did not have a computer in 2021, which is higher than the NC and Davie County proportions (8% and 7%, respectively) and lower compared to Stokes County (14.5%). More than 3,100 Yadkin County households (21%) did not have an internet subscription, higher than NC (14%) and Davie County (10%). Approximately 13% of Yadkin County households relied on a smartphone as their only computing device in 2021; 11% used only their cellular data plan for internet access, similar to NC and both peer counties.⁵⁹

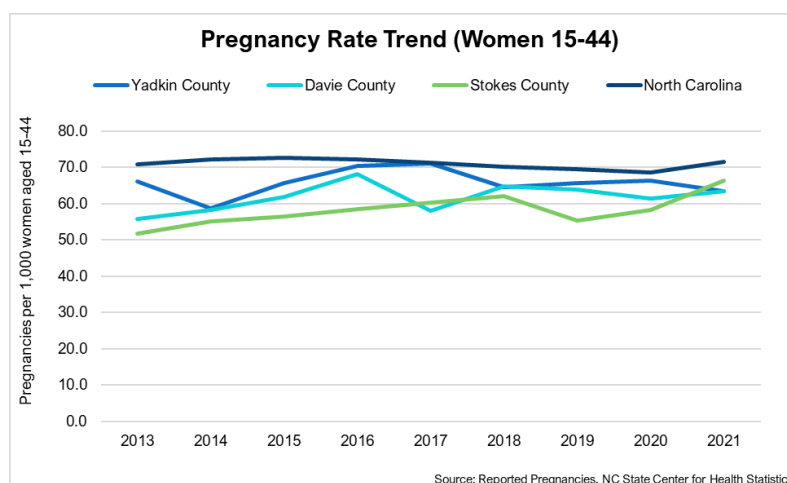
HEALTH STATUS

For clarity regarding abbreviations and terminology used in this section, see *Appendix 1: Glossary of Abbreviations and Health Data Definitions*.

MATERNAL AND INFANT HEALTH

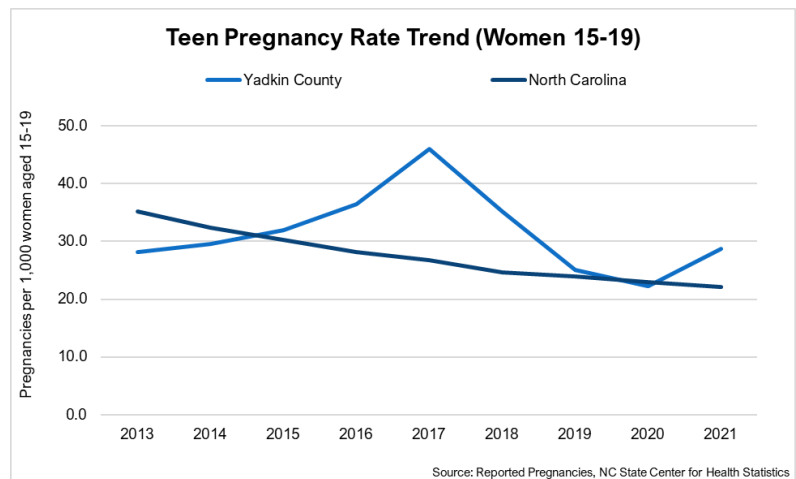
Pregnancy Rates

While the NC pregnancy rate for women of childbearing age (15-44) has remained quite level, the Yadkin County rate demonstrates more variability over time. The 2021 Yadkin County pregnancy rate of 63.5 was lower compared to NC (71.6) and Stokes County (66.3) and similar to Davie County (63.4).



The pregnancy rate among Hispanic women in Yadkin County tends to be higher than the rate among white non-Hispanic women. The rate of 76.7 was lower in 2021 than in any year since 2013; the pregnancy rate among white women was 60.0 in 2021. There are too few pregnancies among other racial groups for rates to be calculated by the source of this data.⁶⁰

Pregnancy rates among teens (ages 15-19) in Yadkin County decreased from a high of 46.0 in 2017 to 28.7 in 2021. The county rates were higher compared to NC over much of the period presented in the chart. Note that Davie and Stokes counties are not graphed due to suppressed rates in some of the years shown. In terms of numbers rather than rates, teen pregnancies in Yadkin County fell from a high of 50 in 2017 to a low of 22 in 2020, before rising to 28 in 2021.⁶¹

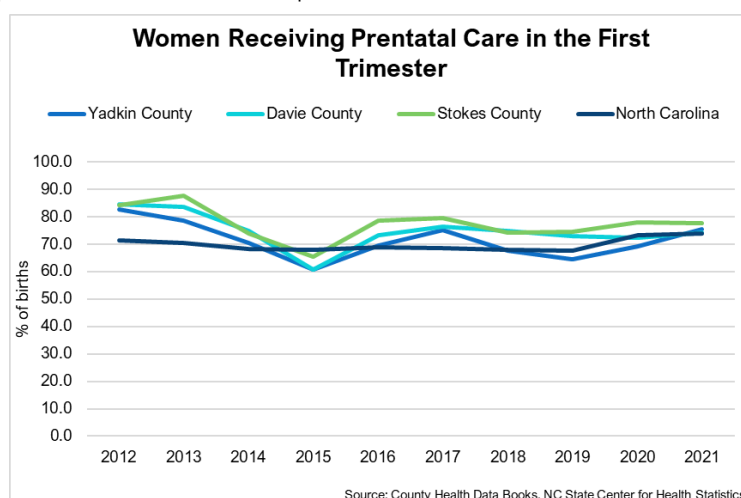


Pregnancy Risk Factors

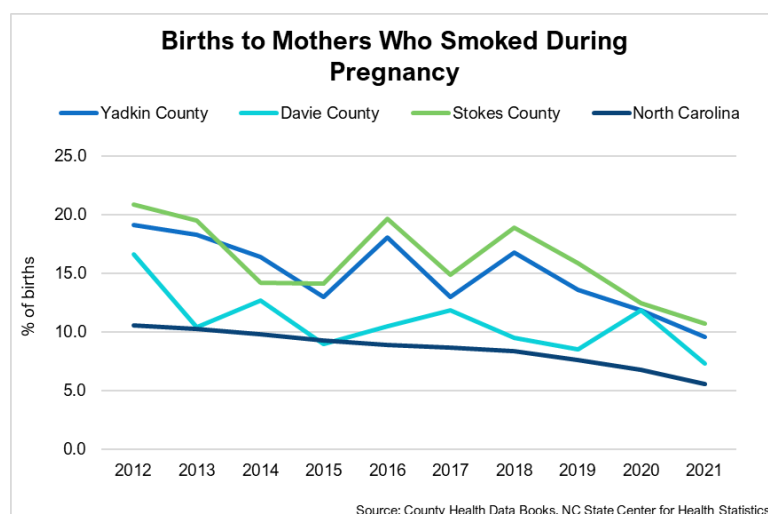
A birth is considered *high parity* if the mother has had five or more pregnancies lasting to at least 20 weeks gestation. A *short-interval* birth involves a conception occurring less than six months since the last birth. High-parity and short-interval pregnancies can be a physical strain on the mother and sometimes contribute to complicated pregnancies and/or poor birth outcomes.

Yadkin County mothers were slightly more likely than NC mothers to have high parity and short-interval births in 2017-2021. Approximately 14% of births to mothers under 30 and 24% of births to mothers over age 30 were high parity in Yadkin County in 2017-2021 compared to 12% and 23% in NC, respectively.⁶² In Yadkin County, 13.4% of births were short-interval compared to 13.1% in NC.⁶³

Good pre-conception health and early prenatal care can help assure women the healthiest pregnancies possible. The percent of pregnant women in Yadkin County who received early prenatal care (in the first three months of their pregnancies) was lower compared to peer counties Davie and Stokes over most of the 2012-2021 period shown in the chart. However, the trend is hopefully demonstrating improvement: the percentage increased from 64.5% in 2019 to 75.3% in 2021. Statewide in 2021, 73.8% of women received prenatal care in the first trimester.⁶⁴



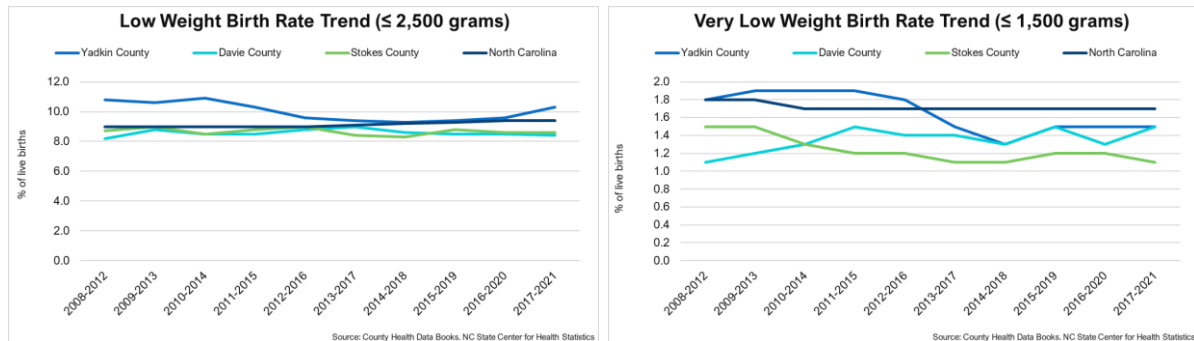
Smoking during pregnancy is an unhealthy behavior that may have negative effects on both the mother and the fetus. Smoking can lead to fetal and newborn death and contribute to low birth weight and pre-term delivery. The percentage of births to mothers who smoked during pregnancy was higher in Yadkin County than in NC between 2012 and 2021. In 2021, 9.6% of births were to mothers who reported smoking while pregnant, compared to 7.3% in Davie County, 10.7% in Stokes County and 5.6% statewide.⁶⁵



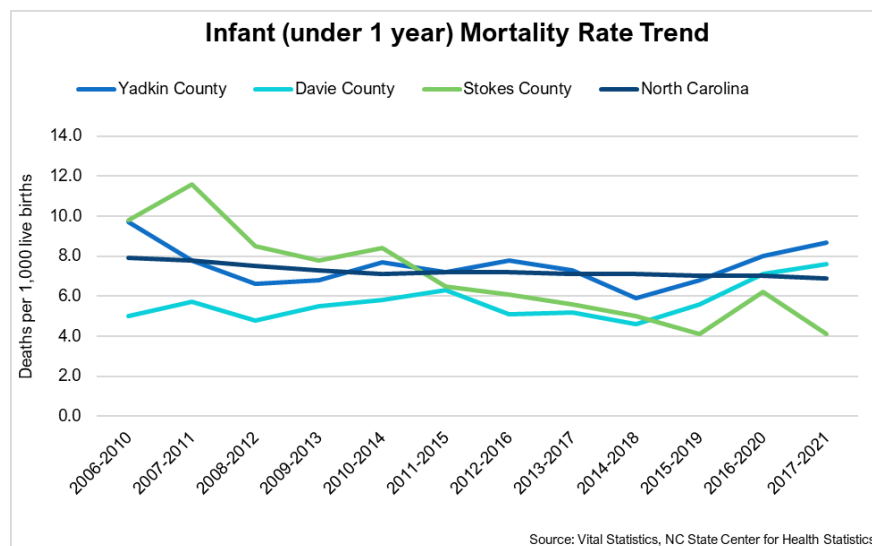
Birth Outcomes

Low birth weight can result in serious health problems in newborns (e.g., respiratory distress, bleeding in the brain and heart, intestinal and eye problems) and cause lasting disabilities (developmental delays, cerebral palsy, and vision and hearing loss) or even death.⁶⁶

In 2017-2021, 10.3% of births were low weight (less than 5.5 pounds), higher compared to NC and both peer counties. Very low-weight births (less than 3.3 pounds) decreased from a high of 1.9 in 2011-2015 but increased in 2015-2019 and remains steady at 1.5% in 2017-2021, higher compared to Stokes County (1.1%), the same as Davie County, and lower than NC (1.7%).⁶⁷



The infant mortality rate is the number of deaths of infants under one year of age per 1,000 live births. The infant mortality rate in Yadkin County demonstrated variability over the period shown in the chart, through the rate rose steadily from 5.9 in 2014-2018 to 8.7 in 2017-2021. In the most recent period, the overall infant mortality rate in Yadkin County was higher compared to NC (6.9), Davie County (7.6) and Stokes County (4.1). Between 2006-2010 and 2017-2021 an average of 8 infant deaths occurred each year.⁶⁸

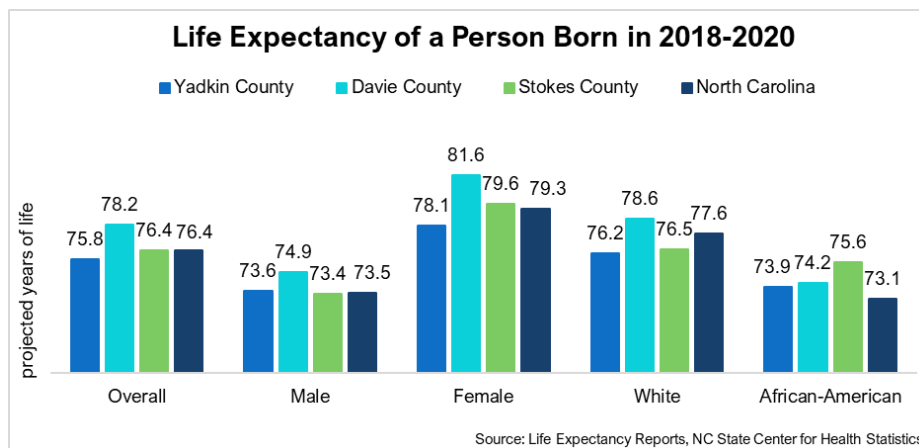


There are too few incidents of infant death among minorities in Yadkin County to calculate stable infant mortality rates, but it is apparent from statewide data that infant mortality rates among African American non-Hispanics far exceed the comparable rates for white non-Hispanics. Statewide in 2017-2021, the infant mortality rate among African American non-Hispanics was 12.6, nearly double the overall rate (6.9) and more than double the comparable rate among white non-Hispanic (4.8), Other Non-Hispanic (6.6) and Hispanic (5.4).⁶⁹

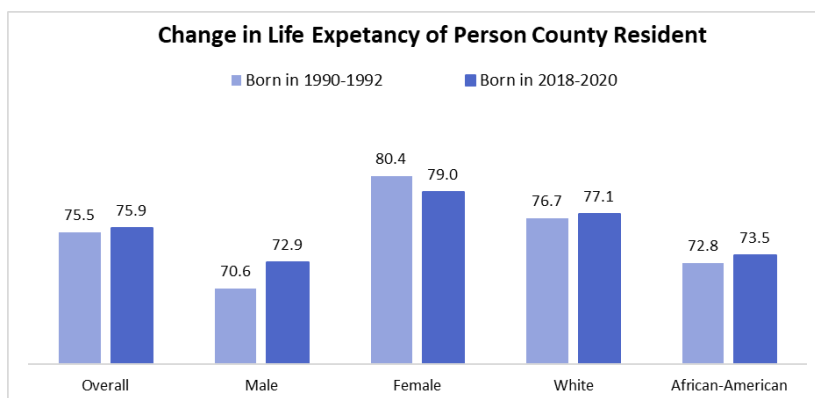
LIFE EXPECTANCY AND LEADING CAUSES OF DEATH

Life Expectancy

A person born in Yadkin County in 2018-2020 has an average life expectancy of 75.8 years. Females tend to live longer than males, with the average male in Yadkin County living to be 73.6 years old and the average female living to be 78.1. African Americans in Yadkin County have shorter life expectancies than white individuals: 73.9 years compared to 76.2.



Life expectancy in Yadkin County has demonstrated very little change in the past several decades. Compared to someone born in Yadkin County in 1990-1992, someone born in 2018-2020 only lives a fraction of a year longer. Life expectancy has increased the most for males and improved a little for white and African American residents. Life expectancy for females, however, has decreased.⁷⁰



Leading Causes of Death

Two tables are provided below the following narrative. The first table provides age-adjusted mortality rates for Yadkin County, Davie County, Stokes County and North Carolina. The second table provides the calculated rate changes since 2001-2005,

since 2014-2018 (the data presented in the last Yadkin County CHA), and the differences between Yadkin County and the comparators used.⁷¹

1. **Heart disease** was the leading cause of death in Yadkin County in 2017-2021, and the mortality rate due to heart disease decreased 18% since 2001-2005 and increased 3% since 2014-2018. The heart disease mortality rate was 20% higher in Yadkin County compared to Davie County, similar to Stokes County and 9% higher compared to NC in 2017-2021.
2. **Cancer** was the second leading cause of death in Yadkin County, with a 2017-2021 mortality rate that was 8% higher compared to NC, slightly higher compared to Davie County and slightly lower compared to Stokes County. The cancer mortality rate in Yadkin County decreased 17% overall since 2001-2005 and decreased 4% since 2014-2018. Further discussion of the most common site-specific cancers is included in later sections of this report.
3. **Unintentional injuries** (which include death without purposeful intent due to poisoning and overdoses, falls, burns, choking, animal bites, drowning, and occupational or recreational injuries) were the third most common cause of death in Yadkin County in 2017-2021. The county mortality rate was 11% higher than Davie County and 29% higher compared to NC, but 19% lower than Stokes County. Since 2001-2005, unintentional injury mortality rose 72% in Yadkin County; the rate increased 37% since 2014-2018.
4. **Chronic lower respiratory diseases (CLRD)** were the fourth leading cause of death in Yadkin County, and the 2017-2021 mortality rate was 17% higher than the Davie County rate, 2% higher than the Stokes County rate, and 43% higher compared to NC. The CLRD mortality rate in Yadkin County increased 12% since 2001-2005 and increased 1% since 2014-2018.
5. **Cerebrovascular disease (stroke)** was the fifth leading cause of death in Yadkin County, with a 2017-2021 mortality rate 3% lower compared to Davie County, 8% higher compared to Stokes County, and 6% lower compared to NC. The Yadkin County stroke mortality rate has decreased over time: 45% since 2001-2005 and 15% since 2014-2018.
6. **Alzheimer's disease** ranked as the sixth leading cause of death in Yadkin County in 2017-2021, with a county mortality rate 17% higher than the state rate and 49% higher than Davie County's rate and 20% higher than Stokes County's rate. The Yadkin County Alzheimer's disease mortality rate rose 40% since 2001-2005 and rose 20% since 2014-2018.
7. **COVID-19** was the seventh leading cause of death in Yadkin County, with a 2017-2021 mortality rate that was 8% higher compared to Davie County, 20% higher

compared to Stokes County, and 12% higher than NC. Due to the newness of the virus, longer-term trend data is not available currently.

8. **Diabetes** was the eighth leading cause of death in Yadkin County, and in 2017-2021, the mortality rate was 59% higher compared to Davie County, 34% higher compared to Stokes County, and 26% higher compared to NC. Yadkin County diabetes mortality increased 17% overall since 2001-2005 and decreased 5% since 2014-2018.
9. **Unintentional motor vehicle injuries (UMVI)** are the ninth leading cause of death in Yadkin County. The 2017-2021 mortality rate was more than double the rate in Davie County, 30% higher than Stokes County, and 55% higher compared to NC. The Yadkin County UMVI mortality rate increased over time: 9% since 2001-2005 and 17% since 2014-2018.
10. **Suicide** was the tenth leading cause of death in Yadkin County, and the 2017-2021 mortality rate was approximately 50% higher than the three other comparators: Davie County, Stokes County, and NC. The suicide mortality rate rose 54% since 2001-2005 and rose 15% since 2014-2018.
11. **Pneumonia and influenza** ranked as the eleventh leading cause of death in Yadkin County in 2017-2021. Although the mortality rate in the county has fallen over time, 12% since 2001-2005 and 24% since 2014-2018, it remains higher than the comparators. In 2017-2021 the pneumonia/influenza mortality rate in Yadkin County was 17% higher than Stokes County and 30% higher compared to Davie County and NC.
12. **Kidney diseases (Nephritis, Nephrotic Syndrome, and Nephrosis)** were the twelfth leading cause of death in Yadkin County, with a 2017-2021 county mortality rate 31% higher than Davie County, 9% higher than Stokes County and 3% higher than the NC rate. The Yadkin County kidney disease mortality rate decreased 10% since 2001-2005 and increased 2% since 2014-2018.
13. **Chronic liver disease and cirrhosis** were the thirteenth leading cause of death in Yadkin County; the 2017-2021 liver disease mortality rate was similar to Davie County, 31% lower compared to Stokes County and 9% lower than the NC rate. The Yadkin County rate has increased over time: the 2017-2021 rate was 3% higher compared to 2001-2005 and 20% higher compared to 2014-2018.
14. **Septicemia** was the fourteenth leading cause of death in Yadkin County in 2017-2021. The county mortality rate was similar to Davie County, 32% lower than Stokes County, and 13% lower compared to NC. The Yadkin County rate has decreased over time: 36% since 2001-2005 and 46% since 2014-2018.

15. **Homicide** was the fifteenth leading cause of death in Yadkin County, with many of the mortality rates based on less than 20 deaths per 5-year aggregate, with subsequently unstable rates. Homicide mortality rates increased in Yadkin County, Davie County, Stokes County and statewide between 2016-2020 and 2017-2021.
16. **AIDS** deaths are rare in Yadkin County. Many aggregate periods examined for the purpose of this report reflect fewer than five deaths, and rates are variable from period to period.⁷²

Age-Adjusted Mortality Rates for the Leading Causes of Death	Yadkin County	Yadkin County	Yadkin County	Davie County	Stokes County	NC
	2001-2005	2014-2018	2017-2021	2017-2021	2017-2021	2017-2021
Diseases of the Heart	212.6	170.8	175.3	146.2	176.9	161.1
Cancer	202.1	174.0	166.9	158.4	172.6	154.5
All Other Unintentional Injuries	36.5	45.8	62.7	56.5	77.8	48.5
Chronic Lower Respiratory Disease	52.8	58.5	59.2	50.4	58.0	41.4
Cerebrovascular Disease	74.8	48.6	41.3	42.7	38.2	44.0
Alzheimer's Disease	31.7	37.2	44.5	29.8	37.1	38.0
COVID-19	n/a	n/a	38.6	35.7	32.3	34.6
Diabetes Mellitus	28.3	34.7	33.0	20.8	24.7	26.1
Unintentional Motor Vehicle Injuries	22.4	20.9	24.4	11.7	18.8	15.7
Suicide	13.3	17.9	20.5	13.4	13.7	13.5
Pneumonia and Influenza	22.5	25.8	19.7	15.2	16.8	15.1
Nephritis, Nephrotic Syndrome & Nephrosis	19.5	16.9	17.3	13.2	15.8	16.8
Chronic Liver Disease and Cirrhosis	10.6	9.1	10.9	10.8	15.7	12.0
Septicemia	16.5	19.5	10.5	10.4	15.4	12.0
Homicide	5.7	1.8	5.2	2.4	4.1	7.8
Acquired Immune Deficiency Syndrome	1.8	0.6	0.0	1.0	1.1	1.6

Source: NC State Center for Health Statistics, County Health Data Books.

Rates based on fewer than 20 cases (indicated by N/A) are unstable and have been presented in bold.

Calculated Comparisons & Changes Leading Causes of Death	% Change since	% Change since	% Difference from Davie	% Difference from Stokes	% Difference from NC
	2001-2005	2014-2018	2017-2021	2017-2021	2017-2021
Diseases of the Heart	- 18%	+ 3%	+ 20%	-1%	+ 9%
Cancer	- 17%	- 4%	+ 5%	- 3%	+ 8%
All Other Unintentional Injuries	+ 72%	+ 37%	+ 11%	-19%	+ 29%
Chronic Lower Respiratory Disease	+ 12%	+ 1%	+ 17%	+ 2%	+ 43%
Cerebrovascular Disease	- 45%	- 15%	- 3%	+ 8%	- 6%
Alzheimer's Disease	+ 40%	+ 20%	+ 49%	+ 20%	+ 17%
COVID-19	n/a	n/a	+ 8%	+ 20%	+ 12%
Diabetes Mellitus	+ 17%	- 5%	+ 59%	+ 34%	+ 26%
Unintentional Motor Vehicle Injuries	+ 9%	+ 17%	+ 109%	+ 30%	+ 55%
Suicide	+ 54%	+ 15%	+ 53%	+ 50%	+ 52%
Pneumonia and Influenza	- 12%	- 24%	+ 30%	+ 17%	+ 30%
Nephritis, Nephrotic Syndrome & Nephrosis	- 11%	+ 2%	+ 31%	+ 9%	+ 3%
Chronic Liver Disease and Cirrhosis	+ 3%	+ 20%	+ 1%	- 31%	- 9%
Septicemia	- 36%	- 46%	+ 1%	- 32%	- 13%
Homicide	- 9%	+ 189%	+ 117%	+ 27%	- 33%
Acquired Immune Deficiency Syndrome	- 100%	- 100%	- 100%	-1 00%	- 100%

Although complete analysis of disaggregated data in the following table is hampered by suppressed unstable rates, from the stable rates available it appears that Yadkin County males disproportionately suffer mortality from many leading causes of death.⁷³

Calculated Gender and Racial Disparities Leading Causes of Death	% Difference Male and Female Rates
	2017-2021
Diseases of the Heart	+ 36%
Cancer	+ 58%
All Other Unintentional Injuries	+ 84%
Chronic Lower Respiratory Disease	+ 6%
Cerebrovascular Disease	+ 16%
Alzheimer's Disease	- 12%
COVID-19	+ 100%
Diabetes Mellitus	+ 25%
Unintentional Motor Vehicle Injuries	--
Suicide	--
Pneumonia and Influenza	+ 33%
Nephritis, Nephrotic Syndrome, and Nephrosis	--
Chronic Liver Disease and Cirrhosis	--
Septicemia	--
Homicide	--
Acquired Immune Deficiency Syndrome	--

Each age group tends to have its own leading causes of death. Note that for this purpose, it is important to use *non-age-adjusted* death rates. In the period 2017-2021, the leading cause(s) of death in each of the age groups in Yadkin County were as follows:⁷⁴

- Age Group 00-19: Conditions originating in the perinatal period
- Age Group 20-39: All other unintentional injuries (non-motor vehicle injuries)
- Age Group 40-64: Cancer – all sites
- Age Group 65-84: Cancer – all sites
- Age Group 85+: Diseases of the heart

Cancer

Total cancer was the second leading cause of death in Yadkin County in 2017-2021. Examining incidence and mortality rate trends for site-specific cancers can help clarify the problem of cancer in the community. The tables below summarize calculated trends in the incidence and mortality rates for the four most common site-specific

cancers: lung cancer, prostate cancer, breast cancer, and colorectal cancer. It is important to remember that screening activities impact incidence rates by discovering cancer cases that might otherwise go unnoticed. A rise in incidence connected to screening is not necessarily bad, since the resulting figure may include numerous cases that were caught early and treated.

Cancer Mortality Rates	Yadkin County	Yadkin County	Yadkin County	Davie County	Stokes County	NC
	2001-2005	2014-2018	2017-2021	2017-2021	2017-2021	2017-2021
Total Cancer	202.1	174.0	166.9	158.4	172.6	154.5
Lung Cancer	67.3	54.8	47.0	46.3	42.3	38.8
Colorectal Cancer	18.0	9.7	11.5	12.0	15.3	12.9
Prostate Cancer	28.8	21.2	20.8	17.4	17.1	19.7
Breast Cancer	19.4	19.3	14.8	16.1	14.9	19.7

Source: NC State Center for Health Statistics, Cancer Mortality Rates.

Calculated Cancer Mortality Rate Comparison	% Change since	% Change since	% Difference from Davie	% Difference from Stokes	% Difference from NC
	2001-2005	2014-2018	2017-2021	2017-2021	2017-2021
Total Cancer	- 17%	- 4%	+5%	-3%	+8%
Lung Cancer	- 30%	- 14%	+2%	+11%	+21%
Colorectal Cancer	- 36%	+ 19%	-4%	-25%	-11%
Prostate Cancer	- 28%	- 2%	+20%	+22%	+6%
Breast Cancer	- 24%	- 23%	-8%	-1%	-27%

Cancer Incidence Rates	Yadkin County	Yadkin County	Yadkin County	Davie County	Stokes County	NC
	2005-2009	2014-2018	2017-2021	2017-2021	2017-2021	2017-2021
Total Cancer	498.9	460.7	464.5	491.7	475.2	472.4
Lung Cancer	80.0	68.8	75.0	38.8	74.5	60.0
Colorectal Cancer	46.5	38.7	31.3	33.7	33.9	34.2
Prostate Cancer	156.2	78.7	87.3	100.4	96.5	121.7
Breast Cancer	138.3	127.8	130.7	154.6	149.2	168.0

Source: NC State Center for Health Statistics, Cancer Incidence Rates.

Calculated Cancer Incidence Rate Comparison	% Change since	% Change since	% Difference from Davie	% Difference from Stokes	% Difference from NC
	2005-2009	2014-2018	2017-2021	2017-2021	2017-2021
Total Cancer	- 7%	+ 1%	-6%	-2%	- 2%
Lung Cancer	- 7%	+ 9%	+9%	+1%	+ 25%
Colorectal Cancer	- 33%	- 19%	-7%	-8%	- 8%
Prostate Cancer	- 44%	+ 11%	-13%	-10%	- 28%
Breast Cancer	- 5%	+ 2%	-15%	-12%	- 22%

Mortality for all four site-specific cancers has fallen since 2001-2005 in Yadkin County; only colorectal cancer mortality rates have risen in the short term. Yadkin County demonstrated higher mortality rates for lung cancer and prostate cancer compared to Davie County, Stokes County and North Carolina. Compared to all three other locations, Yadkin County had lower mortality rates for colorectal cancer and breast cancer in 2017-2021.⁷⁵

Incidence for all four site-specific cancers has also fallen since 2001-2005 in Yadkin County. In the short term, only colorectal cancer incidence rates have fallen while rates have risen for lung, prostate, and breast cancers. Compared Davie County, Stokes County and NC, Yadkin County had lower incidence rates for colorectal, prostate and breast cancers and higher incidence rates for lung cancer.⁷⁶ The decrease in colorectal cancer incidence and the rise in colorectal cancer mortality may merit further investigation.

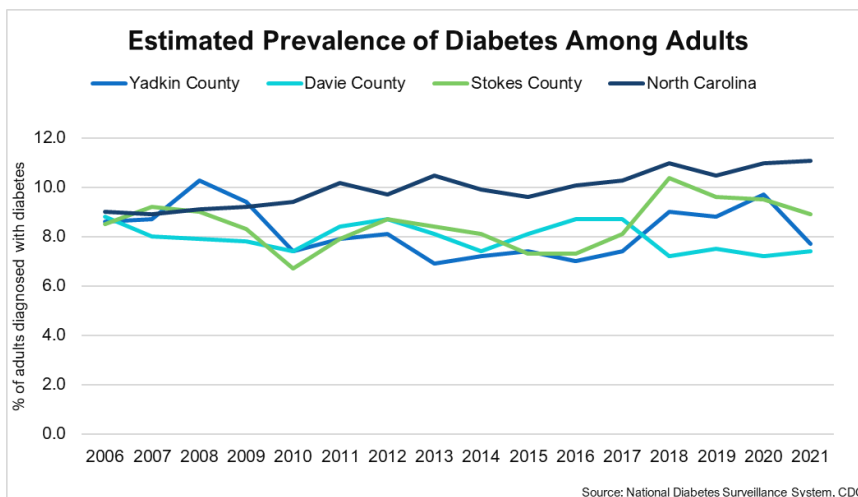
MORBIDITY AND CHRONIC DISEASE

Diabetes

As noted previously, diabetes was the eighth leading cause of death overall in Yadkin County in 2017-2021. In that period, the county diabetes mortality rate exceeded the state rate by 26%, and it decreased by only 5% since the 2014-2018 period.

Approximately 12% of the respondents to the 2023 Yadkin County Community Health Survey reported having received a medical diagnosis of diabetes. Diabetes ranked as the fifth most important health problem impacting quality of life in Yadkin County, as selected by 29% of respondents.⁷⁷

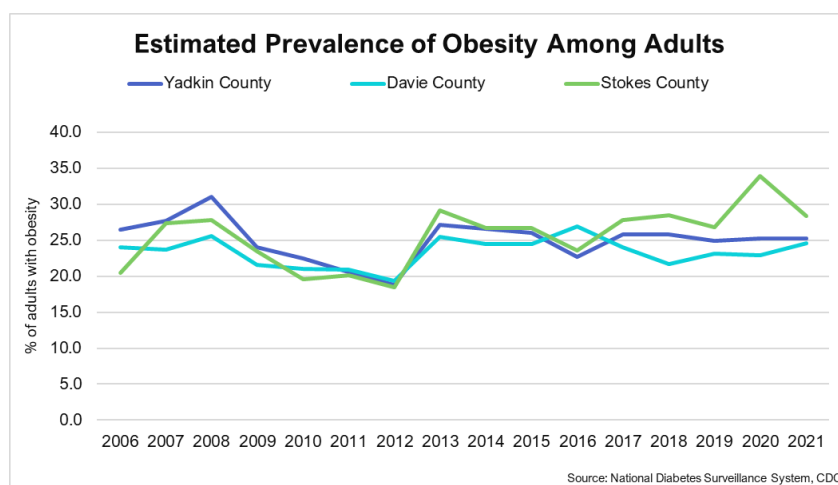
Data from the Centers for Disease Control and Prevention (CDC), based on estimates derived from self-reported responses to the BRFSS, describes the estimated prevalence of diagnosed diabetes among adults aged 20 and older at the county level. According to this data, the prevalence of adult diabetes in Yadkin County was 7.7% in 2021, a decrease from 9.7% in 2020 and well below the NC rate of 11.1% in 2021. Nearly 2,800 Yadkin



County adults were estimated to have diabetes in 2021.⁷⁸

Overweight and Obesity

Overweight and obesity are well-recognized as precursors to many health problems, including diabetes. As with diabetes, the CDC describes the estimated prevalence of diagnosed obesity in adults aged 20 and older at the county level. According to this data (also derived from the BRFSS), the prevalence of diagnosed obesity in Yadkin County was 25.2% in 2021, lower compared to 28.3% in Stokes County and higher than 24.6% in Davie County. An estimated 7,300 Yadkin County adults were obese in 2021. Comparable state-level data is not available from the source.⁷⁹



According to results from the 2023 Yadkin County Community Health Survey, 52% of respondents reported that they had been diagnosed by a doctor, nurse, or other health professional as either overweight or obese. Obesity/overweight ranked as the second most important health problem affecting quality of life Yadkin County, with 43% of respondents choosing it from the list of options. Eating well/Nutrition and managing weight were both selected by 22% of respondents from the list of health behaviors about which Yadkin County residents needed more information.⁸⁰

While data on childhood obesity is just as sparse as data on adult obesity, the existing data appears to indicate that overweight and obesity are less pervasive among Yadkin County young children compared to peer counties and NC as a whole. According to 2018 data from North Carolina Pediatric Nutrition and Epidemiology Surveillance System (NCPedNESS), 15% of 2 to 4-year-olds in the NCPedNESS program in Yadkin County were overweight, and 13% were obese. For comparison, in Davie County, 17% of 2 to 4-year-old participants were overweight, 20% were obese, and statewide 14% were overweight, and 16% were obese. In Stokes County, 20% of the 2 to 4-year-olds assessed were overweight and 17% were obese in 2018.⁸¹

Chronic Diseases

Complications from overweight and obesity include not only diabetes but also heart disease, high cholesterol, and high blood pressure. Each of these conditions is prevalent in the Yadkin County community, as indicated by results of the 2023 Yadkin County Community Health Survey. In this survey, 4.4% of the respondents reported they had been diagnosed with angina or heart disease, 39% reported they had been diagnosed with high blood pressure, and 34% had received a diagnosis of high cholesterol.⁸²

Physical Activity

The 2023 Yadkin County Community Health Survey asked whether respondents engaged in any physical activity or exercise lasting at least half an hour in a normal week. Approximately 59% of respondents reported exercising in a normal week; approximately 20% exercised 3-5 times per week and another 20% reported daily physical activity. Exercising at home was the most commonly reported location, followed by local parks and the YMCA. Lack of time was the most frequent reason for not getting physical activity, followed by being too tired. Lack of exercise/poor physical fitness was the third most commonly identified unhealthy behavior, as selected by 57% of respondents. Exercising/fitness was identified by 17% of respondents from the list of behaviors about which people needed more information.⁸³

Tobacco Use

As noted earlier, chronic lower respiratory disease was the fourth leading cause of death, rates rose in both the long and short term, and the 2017-2021 Yadkin County mortality rate was 43% higher compared to the state. Tobacco use is a critical risk factor for CLRD and Chronic Obstructive Pulmonary Disease (COPD). As discussed in the Maternal Health section, 10% of Yadkin County births in 2021 were to mothers who smoked during pregnancy, higher than the state rate of 5.6%. Among 2023 Yadkin County survey respondents, 13% reported using tobacco products and 6% reported current e-cigarette/vape use.⁸⁴

Communicable Diseases

Sexually transmitted infections (STIs) such as chlamydia, gonorrhea, HIV, and syphilis are the most common communicable diseases in Yadkin County, comprising approximately 55% of all reportable communicable diseases in the county between 2015 and 2022.⁸⁵ Chlamydia is the most prevalent STI, followed by gonorrhea. While Yadkin County incidence rates for both chlamydia and gonorrhea were well below the comparable rates for the state from 2013 through 2022, rates have increased over time. In 2022, the Yadkin County incidence rate for chlamydia infection was 236.6 new cases per 100,000 population compared to the state rate of 612.8.⁸⁶ In 2022, the gonorrhea incidence rate in Yadkin County was 83.4 new cases per 100,000

population, lower than the state rate of 254.6.⁸⁷ HIV incidence is low in Yadkin County and is typically based on fewer than five cases per year; Yadkin County HIV incidence rates were lower compared to NC between 2013 and 2022 and higher compared to Davie and Stokes counties.⁸⁸

Mental Health

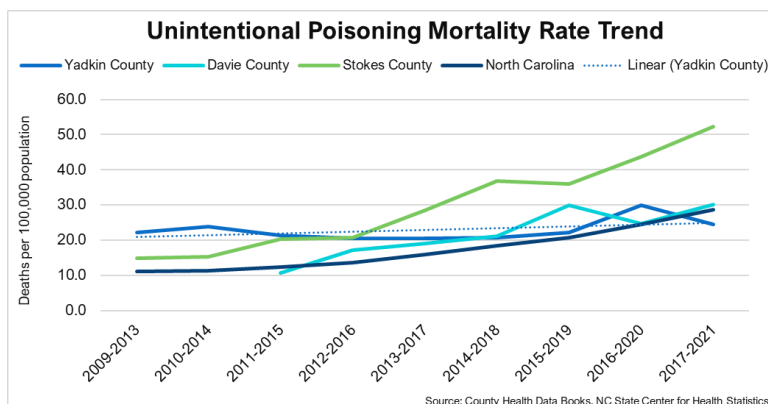
According to data from the NC Division of Mental Health/Developmental Disabilities/Substance Abuse Services (MH/DD/SAS), the number of Yadkin County residents served by the Local Management Entity (currently Partners Behavioral Health) averaged 1,576 per year between SFY2016 and SFY2022.⁸⁹ In 2020, Partners served 1,253 people and the clients skewed younger compared to the total population of the county: 36% were aged 10-17, 63% were aged 18-64, and 4% were 65 or older.⁹⁰ Youths under 18 and seniors 65 and older each comprise 20% of the county population.

Between 2017 and 2022, 11,000 emergency departments visits were made by Yadkin County residents suffering from anxiety, depression, self-harm, suicidal ideation, or trauma/stressors. Averaging more than 3,000 visits per year, these diagnoses were involved in approximately 10% of all ED visits. Anxiety was the most common diagnoses, accounting for 45% of the mental health-related ED visits in 2017-2022, followed by depression, a diagnosis that was involved in 34% of ED visits relating to mental health. Over that same period, 1,150 ED visits included a diagnosis of suicidal ideation, an average of 192 per year and comprising 11% of mental health visits to emergency departments made by Yadkin County residents.⁹¹

On the 2023 Yadkin County Community Health Survey, 40% of respondents self-reported a personal diagnosis of depression or anxiety. Mental health was the fourth most commonly identified health problem impacting quality of life in Yadkin County, with 37% of respondents choosing it. It was the second most frequently identified topic respondents felt youths in Yadkin County needed more information about, as selected by 46% of respondents.⁹²

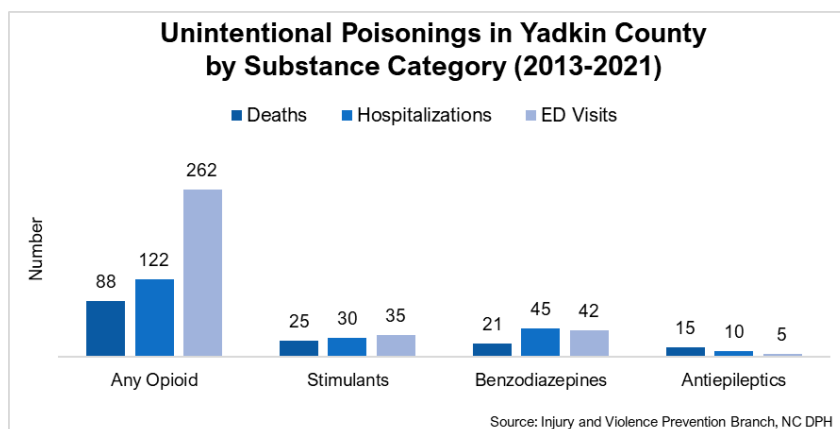
Substance Use

The Yadkin County unintentional poisoning mortality rate has demonstrated a gradual increase since data were first published in 2009-2013. In 2017-2021, the Yadkin County unintentional poisoning mortality rate was 24.4, lower compared to 30.2 in David

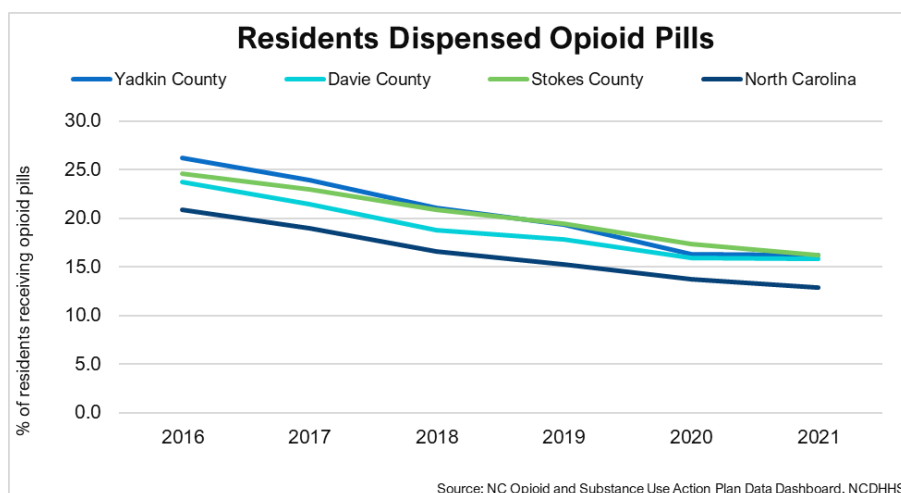


County, 52.3 in Stokes County, and 28.7 in NC.⁹³

According to unintentional poisoning-related data from the Injury and Violence Prevention Branch at NC Division of Public Health, between 2012 and 2021, there were 95 deaths, 304 hospitalizations, and 907 ED visits due to unintentional poisoning among Yadkin County residents. Opioids were the most common substance contributing to these ED visits, hospitalizations, and deaths in Yadkin County. Stimulants and benzodiazepines were the other most common substances. Note that a reported hospital encounter or death may involve multiple substances and that alcohol is not included in this data.⁹⁴



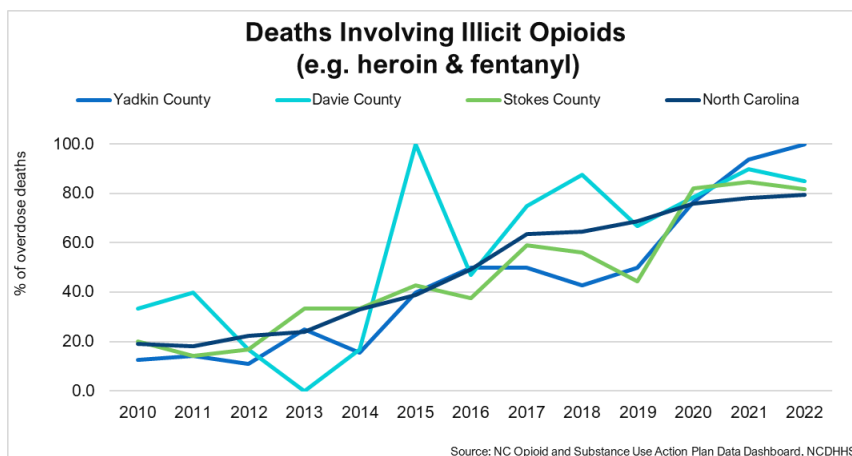
The NC Opioid and Substance Use Action Plan established a data dashboard in 2017, and while the metrics presented have evolved over time, the dashboard remains a unique source of substance-use data. The number and percentage of Yadkin County residents who were dispensed opioid pills has decreased steadily since 2016, but the Yadkin County rate exceeded the state rate over the entire period shown, below.



Between 2016 and 2022, the dashboard reflects a total of 461 emergency department visits with a drug overdose diagnosis among Yadkin County residents, an average of 66 per year. Compared to Davie County and NC, Yadkin County demonstrated a

higher rate of drug overdose ED visits, with the rate increasing steadily between 2019 and 2022.

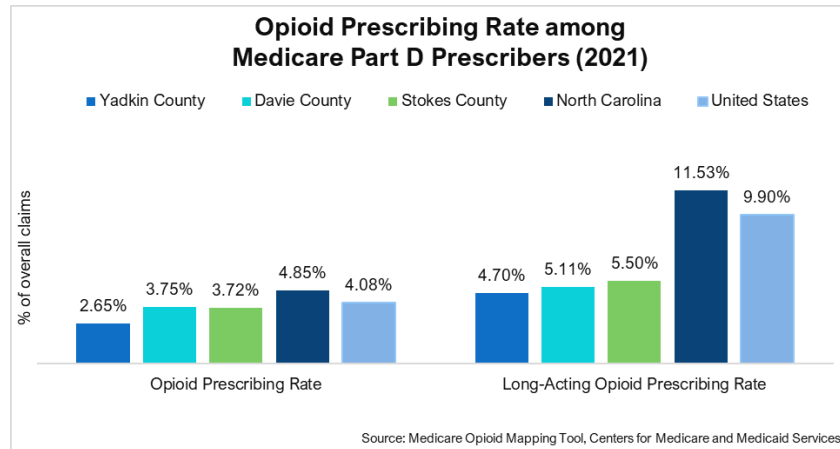
An increasing percentage of opioid deaths in counties across North Carolina involve illicit opioids such as heroin, fentanyl, and fentanyl-analogues. In 2022, 100% of overdose deaths (16 occurrences) in Yadkin County involved illicit opioids; the comparable figures are 85% for Davie County, 82% in Stokes County, and 79% statewide.



Between 2015 and 2021, the proportion of children in foster care in Yadkin County due to parental substance use increased from 32% to 50%, slightly higher compared to Davie County (49%), Stokes County (47%) and the state (46%).

Buprenorphine is the primary medication used in medication-assisted treatment of opioid dependence. In Yadkin County, the number of buprenorphine prescriptions dispensed has increased, from 201 in 2016 to 365 in 2021, indicating expanded treatment access and/or increasing need for treatment. Compared to peer counties and NC, Yadkin County dispensed a higher percentage of buprenorphine prescriptions. The number of Yadkin County Medicaid beneficiaries and uninsured individuals served by opioid use disorder treatment programs increased from 114 in 2013 to 312 in 2021. The rate of individuals served by treatment programs was higher in Yadkin County (828.3) compared to NC (463.7) Davie County (464.5) and Stokes County (598.8) in 2021.⁹⁵

The Centers for Medicare and Medicaid track the prescribing rates of physicians participating in the Medicare Part D plan. In 2021, there were 50 Part D prescribers in Yadkin County, and 34 of them (68%) prescribed opioids. Those 34 providers filed 4,276 opioid claims and 201 long-acting opioid claims. Yadkin County demonstrated a lower opioid prescribing rate compared to both peer counties, NC and the US. The opioid prescribing rate is the percentage of a prescribers total Part D claims that were for opioids. The long-acting opioid prescribing rate was also lower compared to the other four locations. The long-acting prescribing rate is the percentage of prescribers Part D opioid claims that were for long-acting opioids. Since 2017, there were 1.5% fewer opioid claims, and 0.5% fewer long-acting opioid claims filed in Yadkin County.⁹⁶



Among respondents to the 2023 Yadkin County Community Health Survey, drug use (illegal and prescription) ranked as the issue most affecting quality of life (73%) and substance abuse was the most commonly identified health problem in the county. More than 50% of respondents felt substance abuse prevention was the health behavior about which people in the county need more information. More than half of respondents (53.4%) felt that their lives had been negatively impacted, to some degree, by their own or someone else's substance abuse issues.⁹⁷

COVID-19 PANDEMIC

On March 31, 2020, Yadkin County Government issued a Declaration of Emergency and increased its Emergency Operations Center (EOC) to "operations level" to respond to the new Coronavirus (COVID-19) in the United States and State of North Carolina.

Local public health response efforts began even prior to this declaration. Yadkin County Government and local public health operations were considerably impacted by the pandemic. Local government operations were altered through building closures; employees transitioning to teleworking or altered schedules; providing some services virtually and limiting in-person services; providing COVID-19 leave to employees; adapting physical environments to protect employees and the people served; instituting screenings before allowing entry into county buildings; following state orders in regard to face coverings, gathering limits, and social distancing. Yadkin County Human Services Agency (YCHSA) established a Joint Information Center with community partners to communicate information to each other as well as the public. Many partnerships were established for local response efforts. YCHSA contracted with the NC Public Health Alliance and Community Care of NC to hire staff to help with case investigation, contact tracing, call center operations, and numerous vaccination efforts. Yadkin County government employees as well as community volunteers were utilized to help with the call center and various vaccination efforts. Additionally, Yadkin

County was impacted by COVID-19 through school closures; virtual and hybrid learning; the cancellation of various functions; church closures and that of many other organizations; and business closures and restrictions.

Yadkin County's first confirmed case of COVID-19 was reported on Saturday, March 21, 2020. The County's first death occurred on April 13, 2020. In March 2020, YCHSA set up a COVID-19 phone line. In January 2021, a call center was established, utilizing numerous staff and volunteers, to respond to vaccine inquiries as well as to schedule vaccine appointments. From January through April 2021, over 11,000 calls were fielded through the call center. The first local COVID-19 vaccination clinic was held on December 30, 2020. On January 2, 2021, a mass drive through vaccination clinic occurred at a former hospital facility in Yadkinville. Over 300 people were vaccinated at this event. To vaccinate a greater number of individuals at a time, the majority of clinics were held off-site at larger facilities such as this. Vaccination clinics required collaboration with many partners, both traditional and non-traditional to public health.

In 2021, Yadkin County's local COVID-19 response efforts continued to focus on case investigation, contact tracing, testing, media/messaging campaigns around preventive measures, and providing guidance to community partners. While all of these efforts were extremely important, the priority for the year was providing vaccinations to anyone eligible. Planning, preparing for, and operating vaccination clinics was very labor intensive for public health staff and community partners. It was necessary to seek assistance from Community Care of North Carolina, Medical Edge Recruitment, and community volunteers. With the emergence of the Delta variant, the demand for testing drastically increased. Hospital Emergency Departments were overwhelmed with individuals seeking COVID-19 testing. In efforts to reserve ED services for true emergencies, YCHSA collaborated with the North Carolina Department of Health and Human Services, OptumServe, to establish a community-testing site. Shortly after the closure of the testing site in September 2022, YCHSA began to make available COVID-19 At-Home Test Kits free of charge to the public.

By 2021, most of the COVID-19 vaccination clinics were moved back to the Yadkin County Medical Clinic facility. Later in the year, there were some community-based clinics held in response to the release of the bivalent vaccine.

Between December 2020 and June 2021, the Yadkin County Human Services Agency provided approximately 18,000 COVID vaccinations at a variety of clinics around the county. In FY21-22, more than 6,800 vaccinations were given at 104 clinic events and in FY22-23 nearly 1,800 vaccinations were provided at 84 clinics.⁹⁸

COVID-19 had clear and continuing impacts on many elements of daily life and its influence on the employment landscape should not be ignored. While 5% of respondents lost a job during the pandemic, 17% gained a job between March 2020

and April 2023. Almost 18% reported losing hours or wages but not their job and 15% gained hours or wages during the pandemic. And while 3% lost insurance at some point during the pandemic, 13% gained insurance. Approximately 65% of respondents reported being fully vaccinated per CDC recommendations. COVID-19 did not seem to be a significant barrier to receiving preventive healthcare like routine checkups or cancer screenings, with less than 5 community health survey respondents delaying blood pressure checks, mammograms, or dental visits due to COVID-19. It was also not a commonly reported access issue for respondents who were not able to get needed medical care at some point in the past year.⁹⁹

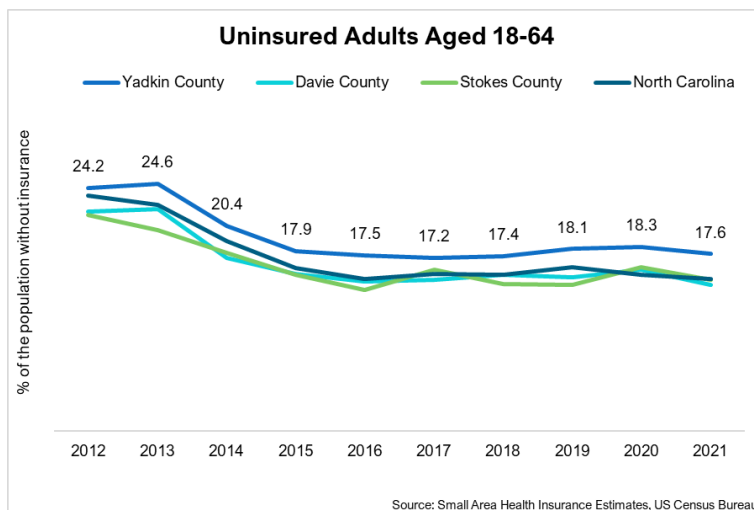
HEALTH RESOURCES

Access to and utilization of healthcare is affected by a range of variables including the availability of health insurance coverage, availability of medical and dental professionals, transportation, cultural expectations, and other factors.

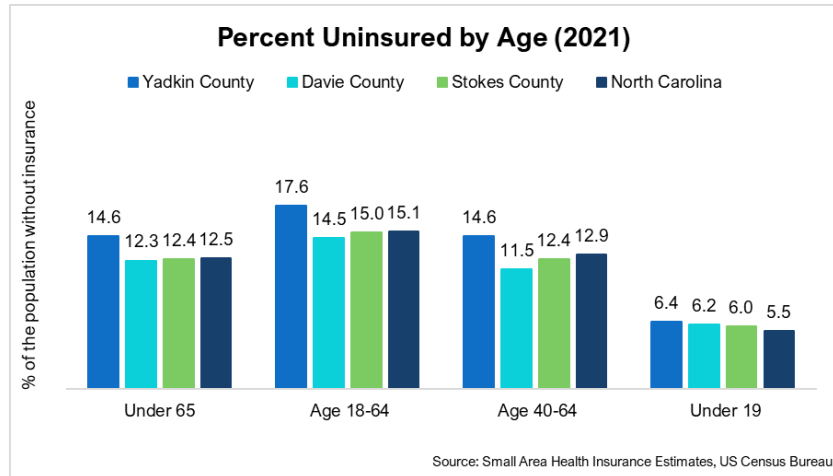
HEALTH INSURANCE

In most communities, citizens' utilization of healthcare services is related to their ability to pay for those services, either directly or through private or government health insurance plans and programs. People without health insurance are often the segment of the population least likely to seek and/or to be able to access necessary health care.

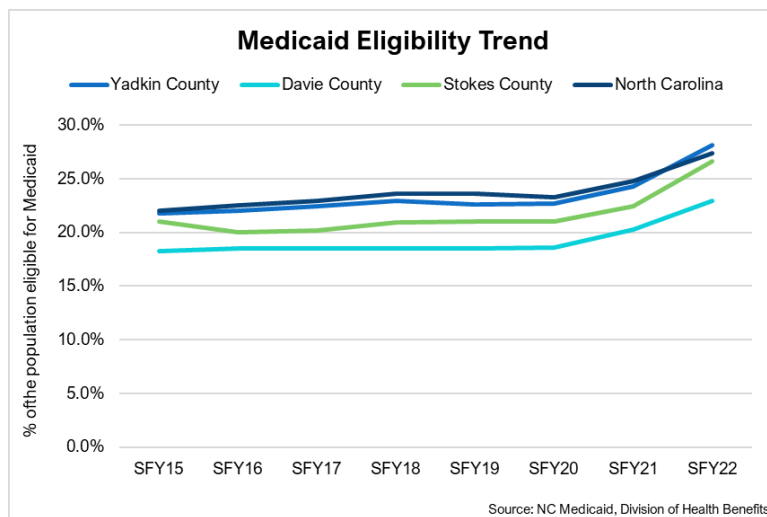
The proportion of the working age population (18-64) without health insurance in Yadkin County decreased from an estimated high point of 24.6% in 2013 to 17.6% (approximately 3,835 individuals) in 2021. Historically, Yadkin County tends to demonstrate higher rates of uninsured adults compared to NC, Davie County and Stokes County.



The percent of children who are uninsured is *lower* than the percent of adults: in 2021 an estimated 6.4% of Yadkin County's population under age 19 did not have health insurance; statewide, 5.5% of children under 19 are uninsured.¹⁰⁰



The percentage of the population eligible for Medicaid has increased in all locations presented for comparison, with Yadkin County rates surpassing Davie County and Stokes County proportions over the entire eight year period shown. Statewide in SFY2022, 27.4% of the population was Medicaid-eligible, compared to 22.9% in Davie County, 26.6% in Stokes County. In SFY2022, 28.1% of the Yadkin County population, more than 10,400 individuals, was eligible for Medicaid.¹⁰¹

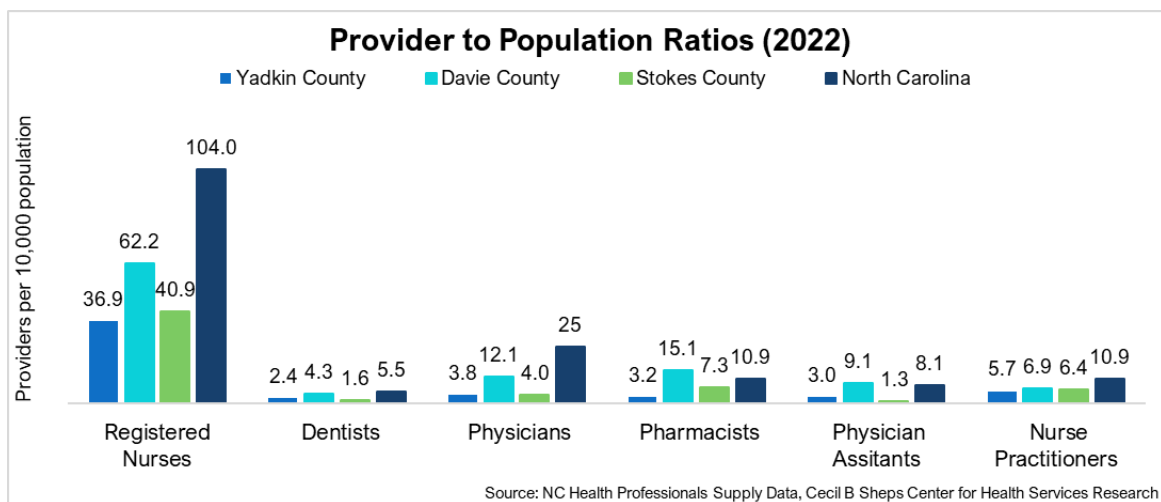


By the end of SFY2023, 11,400 individuals were enrolled in Medicaid programs in Yadkin County. The largest Medicaid program in the county was Infants and Children, with 2,234 individuals enrolled, followed by Temporary Aid to Needy Families with dependents under 21 (1,709 eligibles), and Family Planning (1,609 eligibles). A total of 1,412 children were enrolled in the Children's Health Improvement Program (CHIP) or its expansion program Medicaid-Children's Health Improvement Program (MCHIP) in FY2023, higher than any of the previous eight years.¹⁰²

With the Medicaid Expansion that rolled out on December 1, 2023 the number of adults between the ages of 19 and 64 eligible for Medicaid should increase. The population already eligible for Family Planning was screened by Yadkin County Human Services Agency and if they meet the criteria for full Medicaid, they were automatically entitled to enroll in the new Medicaid with full benefits. According to the NC Medicaid Expansion Enrollment Dashboard, 851 Yadkin County adults were enrolled as of December 2023; by January 12, 2024, 1,055 people were enrolled. Individuals aged 19-39 comprise the largest segment of these new Medicaid eligibles, followed by 30-39 year-old; those aged 60-64 comprise the smallest proportion.¹⁰³

HEALTH CARE PROVIDERS

According to NC Health Workforce data from the Cecil B. Sheps Center for Health Services Research, there were 14 physicians, 9 dentists, 137 registered nurses, 11 physician assistants, 12 pharmacists, and 21 nurse practitioners active in Yadkin County in 2022. In 2022, Yadkin County had lower ratios of providers to population for all major groups of health care professionals compared to NC, indicating that there are fewer licensed, active providers available to serve the population compared to the average county. As of 2022, Yadkin County had no: certified nurse midwife, nurse anesthetist, cardiologist, dermatologist, gastroenterologist, obstetrician-gynecologist, pediatrician, podiatrist, only one psychologist, one psychological associate, and two psychiatrists.¹⁰⁴



As the workforce of health professionals ages and providers approach retirement, office hours often shorten, and providers may be less likely to accept new patients. Rural areas tend to face the challenge of attracting new, younger providers to replace the retiring physicians. In 2022, 37% of Yadkin County's registered nurses, 11% of dentists, 50% of physicians and 18% of physician assistants were over the age of 65.¹⁰⁵

Healthcare Access

More than 66% of respondents to the 2023 Community Health Survey seek care from a doctor’s office when they are sick; 15% seek care from a workplace wellness clinic and 12% go to an urgent care facility when sick. Fewer than 5 respondents reported that they do not usually get healthcare when sick. Approximately 32% reported that they usually seek healthcare services outside the county. When asked if there was a time in the past year when they needed but could not get health care, 12% responded “yes”. Among those respondents (n=17), 59% could not get health care from a primary care provider, 29% could not get dental care or urgent care, and 23% could not get eye care or pharmacy care. The primary barrier was cost (71%), followed by lack of appointment availability or lack of insurance (47%).¹⁰⁶

HEALTH CARE FACILITIES

Hospital

Currently, there is no hospital facility in Yadkin County. According to the 2024 State Medical Facilities Plan, Yadkin Valley Community Hospital, a critical access hospital which closed in 2015, is scheduled to reopen with 22 beds in January 2025.¹⁰⁷

In the absence of a local hospital, Yadkin County residents must travel out of the county to seek treatment in an emergency department, for inpatient hospitalizations and procedures, or to give birth. Even before the closure of Yadkin Valley Community Hospital, hospitals in other counties served a larger number of Yadkin County residents. Approximately 66% of the more than 50,000 county residents discharged from inpatient hospitalizations in NC between FY2010-11 and FY2020-21 were treated in Winston-Salem facilities, with Novant Health Forsyth Medical Center seeing more patients than Atrium Health Wake Forst Baptist Medical Center. The third most commonly utilized hospital among Yadkin County residents was Hugh Chatham Memorial Hospital in Elkin, NC (Surry County). Novant Health Forsyth Medical Center sees more Yadkin County residents for acute cases, normal newborn cases, psychiatric cases, substance abuse cases, and rehabilitation cases compared to other hospitals in the area. Data describing emergency room discharges and outpatient utilization are not available at the county level from this source.¹⁰⁸

Hospital (most recent name/owner)	Inpatient Discharges, FY2010-11 through FY2020-21						
	Total Cases	% Cases	Acute Cases	Normal Newborn Cases	Psych Cases	Substance Abuse Cases	Rehab Cases
Total	50,853	100%	45,240	2,603	2,132	390	488
Novant Health Forsyth Medical Center (Winston-Salem)	22,857	44.9%	20,183	1,465	725	181	303
Atrium Health Wake Forest Baptist Medical Center (Winston-Salem)	10,807	21.3%	10,040	77	480	56	156

Hugh Chatham Memorial Hospital (Elkin)	11,103	21.8%	10,086	912	47	45	13
Novant Health Clemmons Medical Center (Clemmons)	626	1.2%	626	0	0	0	0

Source: Cecil B Sheps Center for Health Services Research, NC Hospital Discharge Data

Health Department

Yadkin County Human Services Agency (YCHSA) is comprised of the Social Services Division, WIC Division, the Medical Clinic, and the Environmental Health Division. The medical clinic offers preventive care, acute sick care for those enrolled in the preventive care program, immunizations, testing and treatment for communicable diseases, and care management for children and pregnant women enrolled in Medicaid.¹⁰⁹

In FY2022-23, YCHSA served 1,307 patients, a decrease from the previous two fiscal years. Between FY2020-21 and FY2022-23, the proportion of females served increased, as did the percentage of youths served. Children under the age of 18 account for two thirds of the patients seen in the preventive care program provided by YCHSA. Since there is currently no licensed active pediatrician or OB/GYN practicing in the county, the YCSHA clearly fills an important healthcare gap for women and children. An increasing percentage of YCHSA patients are uninsured or on Medicaid. The YCHSA contracts with Atrium Health Wake Forest Baptist Medical Center to provide an OB/GYN for two days a month in Yadkin County. This physician provides prenatal care, routine gynecological care, birth control, and other women's health care services. Pregnant women under the care of this provider need to travel to Winston-Salem to give birth at the hospital. Two nurse practitioners with YCHSA can also provide routine women's health care services.¹¹⁰

Yadkin County Human Services Agency Patient Demographics	FY2020-21		FY2021-22		FY2022-23	
	#	%	#	%	#	%
Total Patients	4,610		2,184		1,307	
Male	1,973	42.8%	854	39.1%	468	35.8%
Female	2,564	55.6%	1,295	59.3%	813	62.2%
Unknown/Declined Gender	73	1.6%	35	1.6%	26	2.0%
Ages 18 and younger	466	10.1%	629	28.8%	530	40.6%
Ages 19-30	756	16.4%	352	16.1%	226	17.3%
Ages 31-45	831	18.0%	368	16.8%	235	18.0%
Ages older than 45	2627	57.0%	835	38.2%	316	24.2%
Hispanic/Latino	701	15.2%	619	28.3%	546	41.8%
Not Hispanic/Latino	3,052	66.2%	1,183	54.2%	604	46.2%
Unknown/Declined Ethnicity	857	18.6%	382	17.5%	157	12.0%
White	4,056	88.0%	1,802	82.5%	1,069	81.8%
Black or African American	124	2.7%	82	3.8%	47	3.6%
Asian	41	0.9%	7	0.3%	5	0.4%
AI/AN	15	0.3%	9	0.4%	1	0.1%

Native Hawaiian or Other Pacific Islander	0	0.0%	0	0.0%	1	0.1%
Multi-racial	36	0.8%	16	0.7%	9	0.7%
Unknown/Declined Race	338	7.3%	268	12.3%	175	13.4%
Insured	4,055	88.0%	1,694	77.6%	755	57.8%
Uninsured	555	12.0%	490	22.4%	552	42.2%
Self-Pay	555	12.0%	490	22.4%	552	42.2%
Medicare	34	0.7%	50	2.3%	14	1.1%
Medicaid	594	12.9%	597	27.3%	427	32.7%
Other Public	0	0.0%	0	0.0%	0	0.0%
Private	3,427	74.3%	1,047	47.9%	314	24.0%
Less Than 100% FPL	145	3.1%	136	6.2%	147	11.2%
100% and 150% FPL	72	1.6%	70	3.2%	81	6.2%
151% and 200% FPL	29	0.6%	42	1.9%	46	3.5%
201% and 250% FPL	22	0.5%	21	1.0%	22	1.7%
Greater Than 250% FPL	861	18.7%	710	32.5%	750	57.4%
Unknown/Declined FPL	3,481	75.5%	1,205	55.2%	261	20.0%

Emergency Medical Services

Yadkin County Emergency Medical Services serves the county with five Advanced Life Support ambulances and one Quick Response Vehicle. One full-time Community Paramedic provides in-home education related to disease management, prescription medication, and locating community resources; this individual is also available for educational events in the community.¹¹¹

School Health

Yadkin County Schools currently lists six school nurses serving 14 public schools; five nurses serve two schools each and one nurse serves two schools plus the Early College and the alternative school.¹¹² Given the total enrollment of 5,091 in SY21-22, the school nurse-to-student ratio in Yadkin County is 1 nurse to 727 students, better than the statewide average of 1:833 in SY2021-22. Yadkin County's school nurse-to-student ratio was also better than the recommended standard of 1:750 regular education students.¹¹³

Long-Term Care Facilities

As of November 2023, there were two state-licensed nursing homes offering 223 skilled nursing beds and 20 adult care home beds. Three adult care homes offer 169 beds between them; no family care homes are licensed in Yadkin County. All of these facilities are located in Yadkinville.¹¹⁴ According to the 2024 State Medical Facilities Plan, with the in-county nursing home facilities projected to operate at 75.3% capacity, there is no need for additional beds by 2027.¹¹⁵

Home Care, Home Health, and Hospice Services

An alternative to institutional care preferred by many disabled and senior citizens is to remain at home and use community in-home health and/or home aide services. As of November 2023, there were four licensed home care, home health or hospice agencies in Yadkin County providing a range of services, from companions, sitters, and respite caregivers to infusion nursing care, medical social services, occupational, physical and speech therapy, and hospice home services.¹¹⁶ This report prefers to cite only those in-home health and/or home aide services that are licensed by the state of NC. Note that there may be additional providers in Yadkin County that refer to themselves as “home health service (or care) providers” that are *not* licensed by North Carolina.

Mental Health Services Providers and Service Facilities

The local management entity/managed mental health care organization (LME/MCO) for Yadkin County was Partners Behavioral Health, which serves a total of 14 counties in NC. Partners manages Medicaid, state, and local funds for services around mental health, intellectual/developmental disabilities, substance use disorder, and traumatic brain injury. When the State launches Tailored Plans in 2024, Partners will also cover physical health and pharmacy services. Partners itself does not provide services but they ensure that the healthcare providers in their network meet strict standards. Headquartered in Gastonia, the closest offices to Yadkin County are in Elkin or Winston-Salem.¹¹⁷ There is a toll-free 24/7 Behavioral Health Crisis phone line and several online search tools the public can use to look for physical health providers, behavioral health providers, and pharmacies. Printable directories are available for download.¹¹⁸

As of November 2023, there were eight state-licensed mental health facilities in Yadkin County offering a range of services, including supervised living for developmentally disabled adults, psychosocial rehabilitation for adults with mental illness, day activity for individuals in all disability groups, and day treatment for children and adolescents with mental illness. One of the listed facilities is licensed by the state to provide intensive outpatient substance abuse treatment. Three of the four facilities providing residential treatment were at capacity as of November 2023.¹¹⁹

Respondents to the 2023 Yadkin County Community Health Survey were asked to whom they would refer a friend or family member needing mental health care or treatment for a drug or alcohol abuse problem. A doctor was the most common response (40%) followed by crisis hotline (13%) or private counselor or therapist (13%). When asked what barriers prevented respondents from seeking mental health care or counseling, cost/no insurance coverage was the most common reason (26%), followed by not knowing where to go (17%), lack of providers (14%), and stigma (10%).¹²⁰

Other Healthcare Resources

As of November 2023, there were no independent, free-standing ambulatory surgical facilities in Yadkin County.¹²¹ There is only one Medicare-approved dialysis facility in the county (operated by Atrium Health Wake Forest Baptist), with 13 hemodialysis stations. As of December 2022, Yadkin Dialysis Center of Wake Forst University served 39 patients, 34 in-center and 5 for home peritoneal dialysis.¹²² As noted previously in this document, with kidney disease mortality rates rising in Yadkin County, diabetes prevalence remaining an issue, and high blood pressure persisting among the population, the need for life-saving kidney dialysis could be expected to increase.

2-1-1 CALLS

Local public health, behavioral health, and social service agencies, as well as local providers, refer clients to 2-1-1. 2-1-1 can be an important resource for counties because it is an easy to remember, three-digit telephone number that connects people with important community services to meet every day needs and the immediate needs of people in crisis. It is free, confidential, and available 24 hours a day, through the internet or calling toll-free from any landline or cell phone.

Examining the types of calls received by 2-1-1 can help identify resources gaps in a community. Among Yadkin County residents, housing and shelter, utility, healthcare, and employment and income related calls tend to be the most common.

Between 2018 and 2022, rent assistance and information about low-cost housing were the most common housing related requests. Assistance with electric utilities was the most common type of Utilities request. Within the Healthcare category, information about health insurance and COVID were the most common request. Among those calling for help with employment and income, the most common request was for financial assistance.¹²³

Top 2-1-1 Request Categories	2018	2019	2020	2021	2022	Total
Housing & Shelter	22	26	71	126	152	397
Shelters	5	3	15	21	37	81
Low-cost housing	4	4	7	39	37	91
Home repair/maintenance	5	3	11	6	12	37
Rent assistance	8	12	31	52	62	165
Mortgage assistance	0	4	2	4	1	11
Landlord/tenant issues	0	1	4	4	0	9
Food	6	6	39	3	21	75
Help buying food	0	0	8	0	8	16
Food pantries	6	6	26	2	10	50
soup kitchens and meals to go	0	0	0	0	1	1
Feeding children	0	0	0	0	1	1
Home-delivered meals	0	0	3	0	0	3
Utilities	16	22	69	95	86	288

<i>Electric</i>	14	19	55	76	75	239
<i>Gas</i>	1	0	1	3	2	7
<i>Water</i>	0	2	6	8	4	20
<i>Heating Fuel</i>	0	0	3	1	2	6
<i>Phone/Internet</i>	1	0	1	3	0	5
<i>Other</i>	0	0	3	3	0	6
Healthcare (including COVID)	6	9	34	15	26	90
<i>Health insurance</i>	0	2	1	2	11	16
<i>Medical expense assistance</i>	0	5	3	1	4	13
<i>Medical providers</i>	3	4	0	1	4	12
<i>Dental & eye care</i>	2	4	0	4	2	12
<i>Prescription medications</i>	1	3	1	1	2	8
<i>Nursing home & Adult Care</i>	0	0	1	2	4	7
<i>Public Health & Safety</i>	0	0	8	1	0	9
<i>COVID related</i>	0	0	15	2	0	17
<i>Contact information</i>	0	1	0	1	0	2
<i>Other</i>	0	0	5	0	0	5
Mental Health & Addictions	0	2	6	5	6	19
Employment & Income	7	6	19	15	23	70
<i>Job search</i>	0	0	0	2	2	4
<i>Job development</i>	0	0	0	0	1	1
<i>Unemployment benefits</i>	0	0	7	0	0	7
<i>Tax preparation</i>	1	0	1	4	1	7
<i>Financial Assistance</i>	6	4	10	6	19	26
<i>Other</i>	0	2	0	3	0	5
Clothing & Household	2	1	2	1	4	10
Child Care & Parenting	1	1	1	0	2	5
Government & Legal	3	4	10	8	18	43
Transportation Assistance	0	5	3	3	8	19
Education	0	0	1	1	1	3
Disaster	5	1	10	1	0	17
Other	11	14	50	37	27	139
Total for top requests	79	107	315	310	374	1,185

YADKIN COUNTY PROGRESS TOWARD HEALTHY NC 2030 GOALS

Health Indicator	Yadkin	Year	2030 Target	NC (Year)
Individuals Below 200% Federal Poverty Level	32.6%	2021	27.0%	32.3% (2021)
Unemployment disparity ratio	0.35 disparity (1.8 Black rate / 5.1 white rate)	2021	reduce disparity ratio to <1.7	5.3 (2021)
Short term suspensions per 10 students	0.72	SY21-22	0.80	146.6 (SY21-22)
Incarceration Rate per 100,000 population	Prison population = 131 Rate not available at county level		150	167.3 (2021)
Adverse Childhood Experiences (2+)	not available at county level		18.0%	17.8% (20-21)
Third Grade Reading Level Proficiency	43.8%	SY22-23	80.0%	46% (SY21-22)
Access to Exercise Opportunities	52%	2023	92%	75% (2022)
Limited Access to Healthy Food	not available at county level		5%	8% (2022)
Food Insecurity	13.1%	2021	Unclear	12% (2020)
Severe Housing Problems	13%	2021	14.0%	14% (2021)
Drug Overdose Deaths per 100,000 population	42.5	2022	18.0	39.8 (2021)
Tobacco Use - Youth	not available at county level		9.0%	5.2% MS, 12.3% HS (2022)
Tobacco Use - Adult	22%	2023	15.0%	20.7% (2021)
Excessive Drinking	18%	2023	12.0%	16.7% (2021)
Sugar-Sweetened Beverage Consumption - Youth	not available at county level		17.0%	29.8% (2021)
Sugar-Sweetened Beverage Consumption - Adult	not available at county level		20.0%	29.8% (2021)
HIV Diagnosis per 100,000 population	9.4	2022	6.0	15.7 (2021)
Teen (age 15-19) Birth Rate per 1,000 population	not available at county level		10.0	16 (2021)
Uninsured (Under age 65)	14.6%	2021	8.0%	12.5% (2021)
Early Prenatal Care	75.3%	2021	80.0%	73.8% (2021)
Suicide Mortality Rate per 100,000 population	20.5	2017-2021	11.10	13.3 (2021)
Infant Mortality per 1,000 births	8.7	2017-2021	6.0	6.8 (2021)
Life Expectancy in Years	75.8	2018-2020	82.0	76.5 (2021)
Primary Care Clinicians (Number of Counties with less than 1,500 population per Primary Care Clinician)	1:806	2022	25% decrease for counties above 1:1500	78 counties (2021)

Source: North Carolina Institute of Medicine. Healthy North Carolina 2030 Scorecard. Available at <https://schs.dph.ncdhhs.gov/units/ldas/hnc.htm>

STAKEHOLDER SURVEY SUMMARY

In December 2023, a brief survey was distributed among the members of the CHA Team, who represent a range of agencies serving Yadkin County: EMS, Yadkin County Schools, Partners Health Management, the Chamber of Commerce, YVEDDI, the YMCA, YCHSA, and local churches. Twelve respondents completed the instrument via SurveyMonkey. Please see *Appendix 4: Stakeholder Survey* for the full list of questions.

In response to the question “What do you feel are the most important characteristics of a healthy community?” nine respondents mentioned access to healthcare, with qualifiers like “quality,” “affordable,” and “sufficient”. Access to “fresh,” “healthy” food was mentioned by five respondents. Opportunities for exercise, especially “safe” opportunities, was identified by four respondents. Several participants identified communication and collaboration between agencies and the greater community in order to ensure that needs are being met; “community support” in general was discussed several times. Public safety was mentioned three times, quality educational opportunities were mentioned twice, as was “adequate” and “safe” housing.

When asked to offer examples demonstrating how Yadkin County is a healthy community, several respondents noted the active collaboration that exists:

“Accessible communication channels. Leaders in public health are easy to get in touch with and respond quickly. Yadkin is a county that seeks opportunities to collaborate, and seeks representation from community stakeholders.”

“Agencies work together to work on complex issues in the community, like the committee including business leaders, local government, nonprofit organizations, funders, etc. working on the lack of child care in Yadkin County.”

“...community organizations work well to provide for all the individuals in the county.”

The YMCA and access to recreation opportunities, particularly the beautiful parks and the variety of outdoor activities, were mentioned several times as positives in Yadkin County. Low crime rates help the community feel safe. Local healthy food options were praised, as was the existing network of healthcare providers.

When asked to describe how the needs of their agency’s clients have changed over the past five years, an increased demand for behavioral health services seemed common.

“The COVID-19 pandemic has contributed to a surge in mental health needs. Factors such as social isolation, economic uncertainties, and health concerns have led to increased stress, anxiety, and depression. As a result, there has been a growing demand for mental health services and support. The pandemic has been associated with an increase in substance use and relapse for individuals with substance use disorders. Isolation, disrupted routines, and heightened stress levels have contributed to challenges in managing and overcoming substance use issues.”

“Families are also dealing with children with more challenging behaviors, including the increase in children diagnosed with autism.”

“Mental health concerns are rising, and Yadkin County is a mental health desert without enough resources to meet the needs.”

“Serving more youth and adult with different abilities.”

Several respondents focused on the needs of families, emphasizing safe, affordable housing, child care, and employment opportunities.

“Our agency provides numerous resources to families; one need that continues to grow is the need for housing which is safe and affordable as well as transportation resources.”

“Lack of child care has gotten worse over the last five years. Even our neighboring counties are not able to serve Yadkin County families. Families are also having a harder time finding low-income housing in our county.”

“Well paying work seems to be an issue, work that is close by and provides what they need for their family. The cost of items seems to be more of a barrier to families so they need more benefits.”

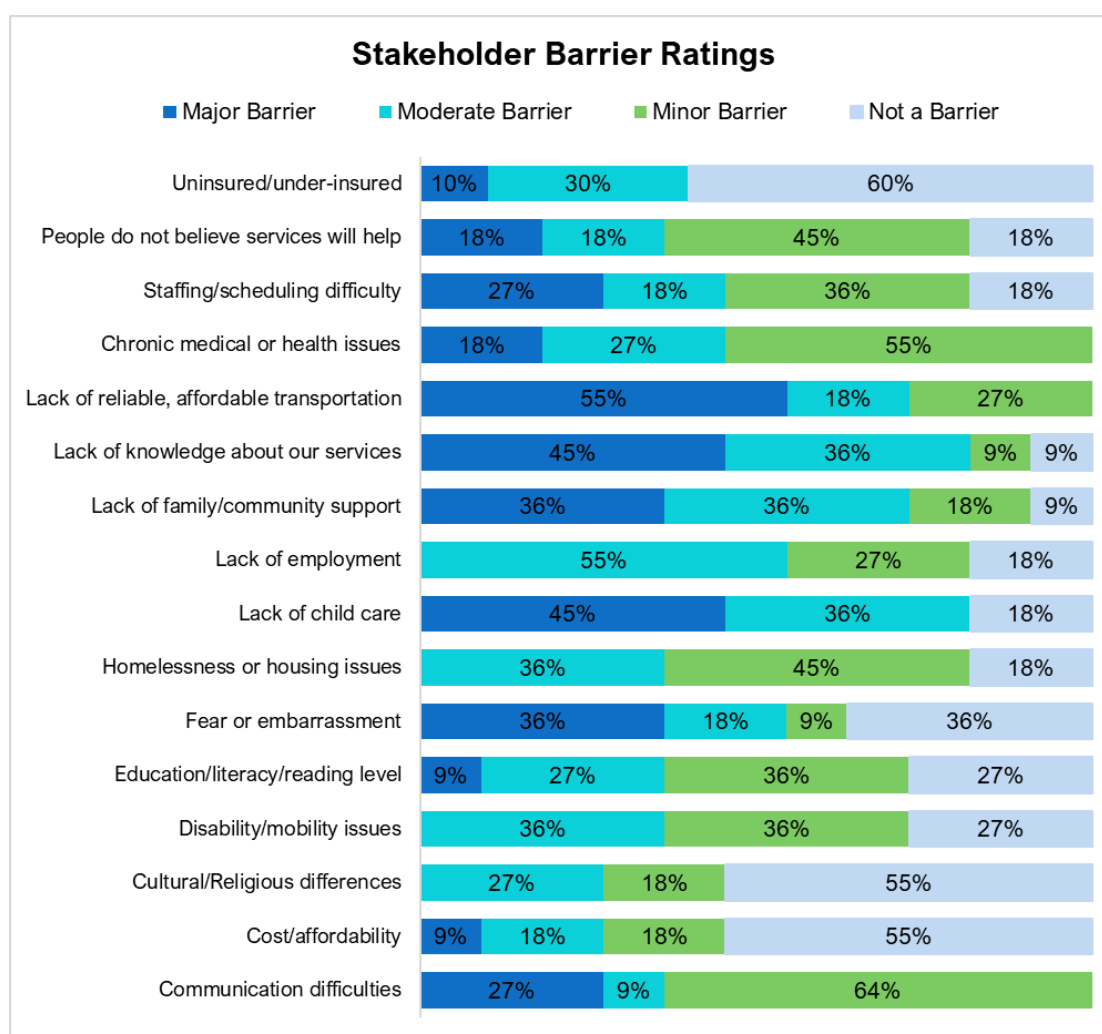
“Job opportunities are limited/declining, which results in some youths not wanting to return to the county to raise a family after receiving a post-secondary education.”

Two respondents described the changing landscape around technology and services:

“Telehealth services have become more widely adopted in response to the pandemic. This shift has improved access to mental health care, particularly for individuals who may face barriers to in-person services, such as those in rural locations such as Yadkin or with mobility issues.”

“Increase in how to incorporate technology into best practices with food, agriculture, and youth activities.”

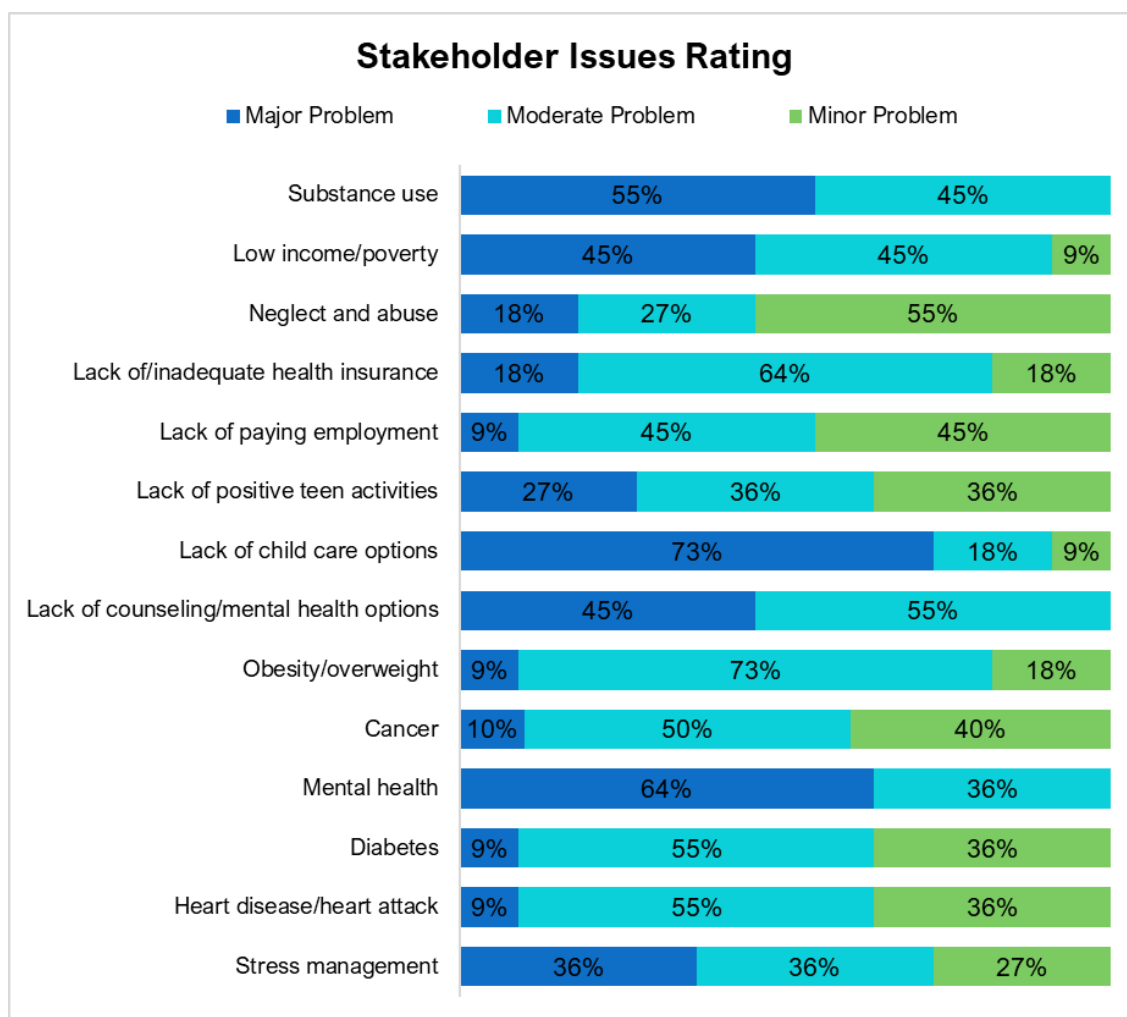
Stakeholders were provided a list of common barriers that might prevent people from accessing the services provided by their agencies. More than half of respondents identified the lack of reliable, affordable transportation as a major barrier. The second most common major barriers were lack of knowledge about services and lack of child care. Lack of employment was identified as a moderate barrier by more than half of respondents. Communication difficulties (such as language barriers, access to access to a phone, email, or websites) and chronic medical or health issues were the most commonly identified minor barriers. Being un- or under-insured, cost/affordability, and cultural/religious differences were not identified as common barriers to accessing the services provided by this group of stakeholders.



In order to address barriers faced by those needing their services, several respondents reported either providing transportation or taking services out into the community. Communicating and collaborating with other agencies, whether to pool funding, offer referrals, or coordinate services, was offered as a successful strategy by several respondents. A number of agencies reported increasing their marketing and

advertising, via promotional campaigns, outreach activities, and social media presence. Offering services for free or on a sliding-scale, offering financial assistance, and providing interpreters or bilingual staff has also helped address barriers faced by the Yadkin County community.

The final Stakeholder Survey question asked respondents to rate a list of 14 issues as major, moderate, minor, or not a problem. Mental health, substance use, and lack of counseling/mental health options were each identified by 100% of respondents as either a major or moderate problem. Low income/poverty and the lack of child care options was seen as a major or moderate problem by 91% of respondents. Obesity/overweight was the most commonly identified moderate problem, followed by lack of/inadequate health insurance. Note that none of the issues listed were rated as “not a problem”.



COMMUNITY PRIORITIES

PRIORITY SELECTION PROCESS

In November 2023, the Independent Consultant provided the CHA Team a presentation of summary data findings, which included secondary data and community health survey results. The presentation of summary data findings can be found in *Appendix 3: Consultant's Presentation*. This presentation provided the team details around:

- County mortality and morbidity data and how it compared to peer counties (Davie County and Stokes County) and the state
- County rates compared to the previous assessment to identify disparities and any trends
- Community health survey data from 2023

Immediately following the presentation, the CHA Coordinator facilitated a Team discussion around which of these areas they felt could be successfully targeted over the next four years. It was emphasized that the programs implemented should have measurable outcomes and the Team was encouraged to consider:

1. **Magnitude:** How many persons does the issue/problem affect, either actual or potential?
2. **Seriousness of Consequences:** What degree of disability or premature death occurs because of the issue/problem? What are the potential burdens to the community if the issue/problem is not addressed?
3. **Feasibility of Correcting:** Is the issue/problem amenable to interventions? What resources of equipment, expertise, personnel, partnerships, funding, community support, etc. are necessary to address the issue/problem? Are those resources available or can they reasonably be acquired?

The group discussed that not all interventions need to be led by the Yadkin County Human Services Agency. The CHA Team discussed determining agencies and groups that were already doing some work and assisting and supporting them in their efforts. Due to the crucial roles the CHA Team members play in the greater Yadkin County community, they were all determined to be stakeholders. So given the importance of their unbiased input, regardless of their residency, they were asked to complete a Stakeholder Survey via SurveyMonkey. The survey was emailed to each CHA Team member with a two-week response deadline. Please see *Appendix 4: Stakeholder Survey* for the full list of questions.

PRIORITIES

As a result of the conversations after the Consultant's Presentation, the Stakeholder Surveys, and consideration by YCHSA representatives, the targeted areas were decided to be:

1. **Behavioral health** (including mental health, stress management, and substance abuse)
2. **Childhood health**
3. **Senior health** (physical health/chronic disease).

PRIORITY 1: BEHAVIORAL HEALTH

Behavioral health, which encompasses mental health disorders, substance use, as well as the wide-ranging impact of life's stressors and crises, is an increasing concern at the national, state, and local level. As made apparent by the indicators highlighted below (and discussed previously) the impacts of behavioral health stretch across all ages, races, educational, and economic segments of a community.

Key Indicators

- The suicide mortality rate in Yadkin County rose 54% since 2001-2005, rose 15% since 2014-2018, and was 50% higher compared to Davie County, Stokes County, and NC in 2017-2021.
- Yadkin County residents averaged 3,000 emergency department visits per year between 2017-2022 for anxiety, depression, self-inflicted injury, suicidal ideation, or trauma/stressors.
- 40% of respondents to the 2023 Community Health Survey reported having been diagnosed with depression or anxiety by a health professional.
- 37% of respondents identified mental health as one of the most important health problems impacting quality of life in Yadkin County.
- 46% of respondents felt youths in Yadkin County needed more information about mental health.
- The unintentional poisoning mortality rate, while lower than comparators, rose 10% since 2009-2013.
- Between 2012-2021, there were 95 deaths, 304 hospitalizations and 907 ED visits due to unintentional poisonings among Yadkin County residents.
- While the percentage of residents dispensed opioid pills has declined steadily, the clear rise in the percentage of overdose deaths involving fentanyl and heroin makes it starkly apparent that the greatest threat, statewide and across most communities in NC, is illicit opioids.
- Drug use was the leading issue in general as well as the leading health concern among respondents to the 2023 Community Health Survey.

- 53% of respondents felt their lives had been negatively impacted by their own or someone else's substance abuse issues.
- There are eight licensed mental health facilities in Yadkin County, four of which are small, supervised living providers for developmentally disabled adults. Only one facility in Yadkin County provides intensive outpatient substance abuse treatment and only one provides services specifically for children and adolescents.
- 40% of survey respondents said they would refer someone needing behavioral health services to a doctor, and 13% would refer to a crisis hotline or private counselor/therapist. The cost of behavioral health care was cited as a barrier by 26% of respondents, while 17% did not know where to go for such care.

Specific Populations at Risk

The poor and uninsured. The uninsured and those in poverty are always at risk for poor outcomes to mental health and substance abuse problems because of access issues. In addition, it is not uncommon for persons of any age burdened by economic and other life stressors to seek "relief" in alcohol or drugs. Access to mental health and substance abuse services in this group is difficult to begin with and the stigma of being poor or uninsured compounds the already prevalent stigma of addiction disorders.

Medicaid Eligibles. While the expansion of Medicaid may increase the possibilities for its enrollees to access needed healthcare, those services may not be readily available in the community. The impact of an influx of new clients on the limited and already taxed network of providers is yet unclear.

Adults. Working age adults (ages 18-64) were more likely to be uninsured compared to children and the elderly in Yadkin County in 2021. Employed residents in Yadkin County earn less per hour, on average, compared to NC, Davie County and Stokes County. Nearly a third of county households live in cost burdened housing. Access issues beginning with a limited network of options for treatment are compounded by the lack of insurance, struggles to afford care, and working hours that make it difficult to arrange appointments for behavioral health care.

Those lacking internet access. Twelve percent of Yadkin County households do not have a computing device, 11% rely on a cellular data plan only, and 21% do not have an internet subscription. With the increase in telehealth options, particularly around behavioral health services, those without internet access may be left behind. When websites are the primary source of information about providers, resources, and insurance, those who rely on only smartphones for internet connectivity may struggle with reception issues, the cost of reliable access, and the functionality of websites on small screens.

PRIORITY 2: CHILDHOOD HEALTH

The well-being of a community's members begins at birth and adverse childhood experiences can lead to lifelong challenges. While there is a lack of data describing the health issues faced by children, there are indicators, all discussed previously, that point to issues impacting the youth population.

Key Indicators

- Minors comprise 20% of the Yadkin County population and the number of youths is projected to increase by 2050.
- 26% of children under 18 lived below the Federal poverty limit in 2021.
- 57% of students enrolled in Yadkin County Schools were economically disadvantaged in SY19-20 and eligible for free- or reduced-cost school meals.
- The number of households and individuals participating in Food and Nutrition Services increased since 2020 and 36% of recipients were under the age of 18.
- 14% of children were estimated to be food insecure in 2021.
- Despite the increasing number of enrollments in CHIP and MCHIP, an estimated 6% of the Yadkin County population under age 19 was uninsured in 2021, higher compared to peer counties Davie and Stokes, as well as North Carolina.
- The Infants and Children program comprises the largest Medicaid program in Yadkin County.
- Compared to peer counties Davie and Stokes as well as NC, Yadkin County births were more likely to be low-weight (under 5.5 pounds) in 2017-2021. They were also more likely to be pre-term.
- The infant mortality rate in Yadkin County, though based on small numbers, has risen since 2014-2018 and was higher than Davie County, Stokes County and NC in 2016-2020 and 2017-2021.
- Although data describing child abuse indicates decreasing instances of substantiated abuse and neglect, it was selected by 25% of survey respondents as an issue impacting quality of life in Yadkin County.
- 36% of the individuals served by Partners Health Management in CY2020 were under the age of 18.
- The percentage of children in foster care due to parental substance abuse increased between 2017 and 2021.
- "Positive teen activities" was identified by 27% of survey respondents as a service needing improvement.
- There is no licensed pediatrician active in Yadkin County, no emergency department, and residents must travel out of county for labor and delivery services.

Specific Populations at Risk

Hispanic/Latino Population. Compared to the overall population, the Hispanic/Latino population (comprising 11% of the total population) skews much younger: 42% of this population is younger than 19 compared to 20% of the county population. Nearly 31% of Spanish-speaking households are limited English speakers. Approximately 43% of the Hispanic/Latino population lived below the poverty level in 2021, an increase over previous years. An increasing percentage of the patients served by the Yadkin County Human Services Agency were of Hispanic/Latino ethnicity.

The poor and uninsured. The need to travel outside of Yadkin County to receive healthcare from a pediatrician increases the financial burden on poor families, both in terms of transportation costs and the time it takes to travel. The percentage of children served by the preventive care program at YCHSA and the increasing proportion of uninsured clients and Medicaid beneficiaries demonstrates an increasing demand for youth oriented healthcare. While programs like CHIP continue to grow and provide benefits for young members of the Yadkin County community, more than 500 minors were uninsured in 2021.

Other at-risk populations noted by the CHA Team include: children and families dealing with mental health issues, parents with low literacy levels or poor health literacy, children with decreased physical activity, and youths experiencing Adverse Childhood Experiences (ACEs).

PRIORITY 3: SENIOR HEALTH

The elderly population in Yadkin County, and in many locations across North Carolina, is projected to increase over the coming decades, particularly the 85 and older age group. While the population of seniors can rely on Medicare for health insurance, the accumulating impacts of chronic health conditions like diabetes, heart disease, kidney disease, and respiratory diseases lay lead this group to utilize health resources more frequently.

Key Indicators

- Seniors over the age of 65 account for 20% of the county population; the population aged 75-84 is projected to grow 30% by 2050 and the population aged 85 and older could increase by 89%.
- The mean retirement income in Yadkin County tends to be thousands of dollars lower compared to the state. Mean Social Security income is also lower compared to NC.
- An increasing number of seniors participated in Food and Nutrition Services.
- Householders over the age of 65 were more likely than other age groups to lack access to a vehicle.

- Heart disease, cancer, chronic lower respiratory diseases, and cerebrovascular disease (stroke) are the most common causes of death among the older age groups. While cerebrovascular mortality rates have fallen in Yadkin County and were lower compared to NC, heart disease and cancer mortality rates were higher in Yadkin County. And CLRD rates have risen over time and were 43% higher compared to NC in 2017-2021.
- The unintentional injury mortality rate has increased over time and was 29% higher than NC in 2017-2021. Falls comprise a portion of those injury deaths. In 2021, among the 31 deaths due to unintentional injuries, 13 (42%) were fall-related and 100% of those fall-related deaths were among those aged 65 and older.¹²⁴
- Between 2017 and 2022, Yadkin County residents averaged more than 1,000 emergency department visits each year for unintentional falls. Seniors aged 65 and older comprised 41% of those visits, on average.
- Two nursing homes provide 223 skilled nursing beds in Yadkinville and while the State Medical Facilities Plan does not project the need for additional beds by 2027, the projected growth of the elderly population in the longer term could indicate a need for additional long-term care options.
- While the four agencies providing home care, home health and hospice services in Yadkin County do offer a comprehensive range of services, their capacity could be taxed by the growing elderly population.
- Among community health survey respondents, 25% identified elder care options as a service most needing improvement and 24% felt people needed more information about elder care.

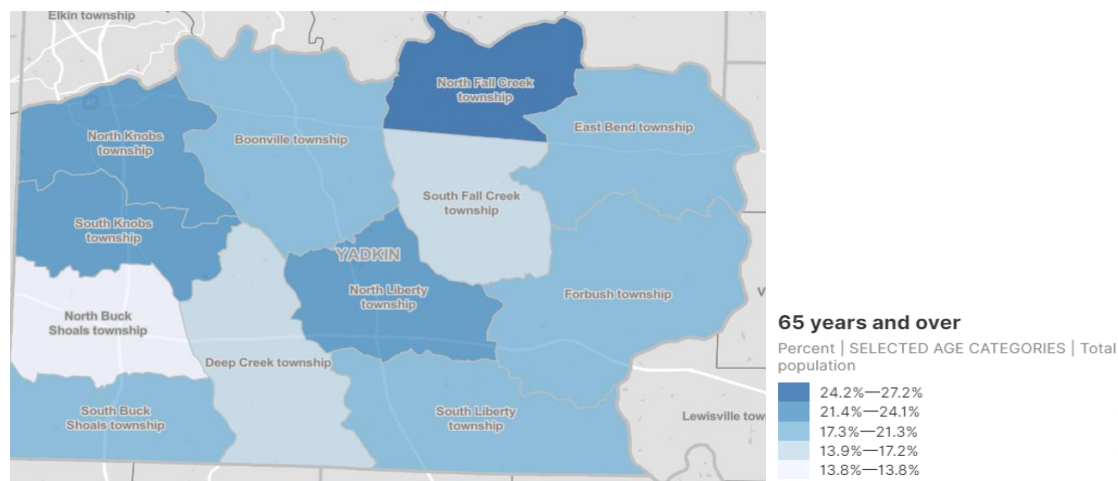
Specific Populations at Risk

The poor and underinsured. While Medicare is a valuable source of healthcare coverage for seniors, costs continue to burden Yadkin County households. Poverty rates for seniors tend to be lower compared to the total population (8.2% among seniors compared to 15.4% of the total population), but the retirement and social security incomes tend to be lower in Yadkin County compared to NC and other locations. According to ACS estimates for 2022, 2,600 Yadkin County residents aged 65 and older (35%) have Medicare coverage only.¹²⁵ Compared to the 65% of seniors who have Medicare coverage combined with secondary or supplemental insurance coverage, the Medicare-only population may face fewer provider and treatment options in an already limited local healthcare network and likely struggle to afford the healthcare they can access.

Those lacking transportation. Most health care providers and facilities in Yadkin County are located in Yadkinville; residents must travel out of the county for any type of hospital-based care and to see specialists. Among the Yadkin County households with no vehicle available, 46% were householders aged 65 and older. As the map

below demonstrates, the elderly population is not concentrated near Yadkinville, so even those with vehicle access often have to travel to seek healthcare.

Percent of Population Aged 65 and Older, 2022



Source: 2022 ACS Estimates, US Census Bureau.

Other at-risk populations noted by the CHA Team include: seniors suffering from chronic diseases or poor mental health, BIPOC seniors, and the elderly with low literacy, poor health literacy or limited English proficiency.

HEALTH RESOURCES AVAILABLE ADDRESSING PRIORITIES

Yadkin County does not have a hospital within its boundaries. The private hospital closed in May 2015. Despite efforts on behalf of the Board of County Commissioners and the County, the facility has not been re-opened as a hospital. The facility and grounds are owned by the County. The administration has since renamed the property Yadkin Medical Campus. The Yadkin Medical Campus hosts a variety of health professionals, including Emergency Management/Emergency Services, a private medical doctor, an employee wellness clinic for County employees, and a behavioral health provider.

The clinical services unit of the Yadkin County Human Services Agency, also known as Yadkin County Medical Clinic, was housed in the Yadkin Medical Campus as recently as January 2020. The Yadkin County Medical Clinic moved facilities to share a physical location with the local free clinic, Hands of Hope. In addition to a new and shared facility, the agencies also share a nurse practitioner. The Yadkin County Medical Clinic is also utilized for its clinic services such as the child health, family planning, immunization, and maternity care programs. In 2023, the Yadkin County Medical Clinic added a part-time provider to clinical services. This position also serves as Nursing Supervisor and sees patients on the days our shared provider is working at Hands of

Hope. This additional staff role is aiding our expansion of adult health services to better serve the residents of Yadkin County. Our Care Management for at-risk children (CMARC) and high-risk pregnancies (CMHRP) programs are now in-house. This allows our Social Work Care Manager to work closely with the various programs across the Human Services Agency to provide resources for enrolled patients. Yadkin County Women, Infants, & Children (WIC) continues to work closely with Yadkin County Cooperative Extension and Yadkin County Library for the WIC Garden. This nutrition education program was created since the last CHA and provides a hands-on garden experience for families looking to start their own garden. Beginning in 2024, Yadkin County Medical Clinic will begin a partnership with the Forsyth County Health Department's MDPP program to reduce rates of Type 2 diabetes in adults. The program will take referrals from any adult who is currently pre-diabetic or has been diagnosed with Type 2 diabetes. The program will be at no-cost to the patients.

There have been some changes to the Providers located in Yadkin County. Those located in Yadkinville are Yadkin Medical Associates, Dr. James McGrath, MD (private practice), and Express Care of Yadkinville; Jonesville has Atrium Health Wake Forest Baptist-Jonesville Family Medical Center, Hugh Chatham Health Family Medicine and Hugh Chatham Health Urgent Care located within the same facility; and Dr. Roque Arias operates a private practice in East Bend. There are four pharmacies located in two of the five municipalities. Yadkin County has three traditional nursing home facilities and five assisted living facilities. Triple P (Positive Parenting Program) was able to expand some services within the County by sending a community partner to regional training.

Yadkin County does not have some health resources that the community needs. There is no hospital providing OB/GYN services, surgical/outpatient services, or emergency department services. The urgent care facilities allow people an opportunity to seek care during the evenings and on the weekends, but since the hospital is closed, there is no true emergency medicine. There are no practicing OB/GYN physicians in the county. Currently, women can only receive full maternity care services in the county at the local health department, and must deliver in the new Labor & Delivery unit of Wake Forest Baptist Health in the neighboring county. Most residents deliver in either Surry County or Forsyth County. Both delivery locations are approximately a 30-minute drive from the county seat of Yadkinville. Most Yadkin County residents utilize medical practices and services outside of the County due to the smaller number of practices and the complete lack of specialized care such as OB/GYN, cardiology, pulmonology, etc.

Other health and developmental services that are available in Yadkin County include mental health and substance abuse resources, although those are limited and often taxed. These include Daymark Recovery Services, Blue Ridge Counseling, PQA Healthcare, A Still Waters Counseling Services & Training, Jodi Province Counseling, and Hope Recovery Services. The latter is located in Jonesville, while all the other

facilities are in Yadkinville. During the 2019 CHA, Yadkin County had two residential treatment facilities for men and women dealing with substance abuse issues. As of now, the male facility has permanently closed. The female facility, Solus Christus, remains open, and is located in East Bend. Yadkin County also has an active Opioid Action Coordinator employed by the County, as well as an active Opioid Committee. The team meets to discuss action plans for the coordinator that will benefit the community, and consists of relevant community partners.

There are many churches and other organizations that provide services, assistance, and food to local families in need. These include Union Baptist Church, Union Grove Baptist Church, Courtney Baptist Church, Yadkin Christian Ministries, and Tri-County Christian Ministry. Yadkin County also has an organization called Compassion Care. It is a faith based, private, non-profit organization that has a medical clinic offering limited ultrasounds, pregnancy tests, prenatal/parenting classes, STD testing/treatment and post abortion support groups. In a limited capacity, the facility has also began seeing currently enrolled maternal health patients during their first trimester.

Yadkin County has access to and programs offered by a local community action agency. YVEDDI, Inc. receives federal, state and local funding to provide a variety of social, economic, and health programs including the domestic violence/sexual assault program, Head Start, Migrant Head Start, transportation, Community Services Block Grant, Retired and Senior Volunteer Program (RSVP), three local senior centers, and weatherization. The community is also assisted by other agencies offering a variety of programming including Smart Start of Yadkin County, The Children's Center of Northwest North Carolina, Insight Human Services, New Horizons, and multiple home health agencies. Also providing programming and support are the four branches of libraries which are part of the Northwest Regional Library Organization located in Yadkinville, Boonville, Jonesville, and East Bend.

Some of these local agencies will hold health fairs and will coordinate health screenings through local medical agencies such as Novant Health. Some churches and other organizations hold programs for their members to provide education and this may include inviting the local public health educator to provide education and training.

NEXT STEPS

Dissemination of the CHA will occur throughout the community through various methods. Examples include, but are not limited to: reaching out to media outlets, conducting, and participating in community meetings, and sharing findings with key stakeholders. The final version of the document will always be available on the County website, and paper copies will also be available upon request.

Community Health Improvement Plans for the three priorities, demonstrating key characteristics of Results-Based Accountability, will be established and documented in Clear Impact Scorecard (online tool).

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APPENDIX 1 –HEALTH DATA DEFINITIONS

Routinely collected surveillance data can be used to describe—and compare—the health status of communities. These data, which are readily available in the public domain, typically use standardized definitions. Some of the important terms used in this section of the report are defined or explained below, as excerpted from the consultant’s comprehensive CHA report:

- **Rates** – a rate converts a raw count of events (births, deaths, diseases, accidents) in a target population to a ratio representing the number of same events in standardized population, which removes the variability associated with the size of the sample. Each rate has its own standard denominator that must be specified (per 1,000 women, per 10,000 population, per 100,000 population). While rates do help make data comparable across time and locations, small numbers of events can yield rates that are highly unstable: a small change in the count may result in a large change in rate. Some rates based on small numbers are suppressed by the source (typically the NC State Center for Health Statistics) but even when the rates are available (they are identified as such in this report and in the Data Workbook), they should be interpreted with caution due to the instability.
- **Mortality rate** – The mortality rate, or the rate of death, is calculated by dividing the number of deaths in a target population in a given time period due to a specific cause by the total number of persons in the target population in the same period. Mortality rate typically is described as number of deaths per 100,000 persons.
- **Age-adjustment** – Many factors can affect the risk of death, including race, gender, occupation, education and income. The most significant factor is age, because as a population ages, its collective risk of death increases. In order to compare mortality data from one community with the same kind of data from another, it is necessary first to control for differences in the age composition of the communities being compared. This is accomplished by age-adjusting the data, a statistical manipulation usually performed by the professionals responsible for collecting and cataloging health data at the NC State Center for Health Statistics.
- **Aggregate data** – Aggregation of data combines annual data gathered over a multi-year period, usually three or five years. The practice of presenting data that are aggregated avoids the instability typically associated with using highly variable year-by-year data consisting of relatively few cases or deaths. Aggregating annual counts over a five-year period before calculating a rate is a method commonly used by the NC State Center for Health Statistics (NCSCHS). Sometimes even aggregating data is not sufficient, so the NCSCHS recommends that all rates based on fewer than 20 events—whether covering an aggregate period or not—be considered “unstable” and interpreted only with caution.

- **Morbidity** - Morbidity as used in this report refers generally to the presence of injury, sickness or disease (and sometimes the symptoms and/or disability resulting from those conditions) among the living population. Morbidity data usually is presented as a percentage or a count, but not a rate.
- **Prevalence** - Prevalence refers to the number of *existing* cases of a disease or health condition in a population at a defined point in time or during a defined period. Prevalence is usually expressed as a *proportion*, not a rate.
- **Incidence** - Incidence is the population-based *rate* at which *new* cases of a disease occur and are diagnosed. It is calculated by dividing the number of newly diagnosed cases of a disease or condition during a given period by the population size during that period. Typically, the resultant value is multiplied by 100,000 and is expressed as cases per 100,000; sometimes the multiplier is a smaller number, such as 10,000.
- **Pregnancy rate** - The pregnancy rate is the number of pregnancies per 1,000 women of target reproductive age. In this report, the target ages are "all women of reproductive age" (15-44 years) and "teen women" (15-19 years).

YADKIN COUNTY COMMUNITY HEALTH SURVEY**Community Health Survey**

We are conducting a survey of our county to learn more about the health and quality of life in Yadkin County. The Yadkin County Human Services Agency will use the results of this survey to help address the major health and community issues in our county.

The survey is completely voluntary, and it should take no longer than 20 minutes to complete. Your answers will be completely confidential. The information you give us will not be linked to you in any way. Before you begin, please answer the following questions to determine if you should participate.

1. Do you live in YADKIN County? _____ Yes _____ No

(If no, you do not need to complete this survey.)

2. Have you participated in this year's survey already? _____ Yes _____ No _____ Not Sure

(If yes or not sure, you do not need to complete this survey.)

3. How did you hear about our survey?

_____ Business _____ Church _____ Friend/Family

_____ Internet _____ Library _____ Word of mouth _____ Other

Yadkin County Community Health Survey**PART 1: Community Improvement**

The next set of questions will ask about community problems, issues, and services that are important to you. Remember your choices will not be linked to you in any way.

4. Please look at this list of community issues. In your opinion, which THREE ISSUES most affect the quality of life in Yadkin County?

- | | |
|--|--|
| <input type="checkbox"/> Child Abuse and Neglect | <input type="checkbox"/> Low income/poverty |
| <input type="checkbox"/> Depression/Helplessness | <input type="checkbox"/> Not completing High School |
| <input type="checkbox"/> Discrimination/Racism | <input type="checkbox"/> Pollution (air, water, land) |
| <input type="checkbox"/> Domestic Violence | <input type="checkbox"/> Rape/sexual assault |
| <input type="checkbox"/> Drug Use (illegal or prescription) | <input type="checkbox"/> Theft |
| <input type="checkbox"/> Elder Abuse and Neglect | <input type="checkbox"/> Violent crime (murder, assault) |
| <input type="checkbox"/> Homelessness | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Lack of Community Support | <input type="checkbox"/> None of the above |
| <input type="checkbox"/> Lack of/Inadequate health insurance | |

5. In your opinion, which THREE SERVICES need the most improvement in your neighborhood or community?

- | | |
|--|---|
| <input type="checkbox"/> Affordable housing | <input type="checkbox"/> Healthy family activities |
| <input type="checkbox"/> Animal control | <input type="checkbox"/> Higher paying employment |
| <input type="checkbox"/> Child care options | <input type="checkbox"/> Recreational facilities (parks, trails, community centers) |
| <input type="checkbox"/> Culturally appropriate health services | <input type="checkbox"/> Positive teen activities |
| <input type="checkbox"/> Counseling/ mental health/ support groups | <input type="checkbox"/> Road maintenance |
| <input type="checkbox"/> Elder care options | <input type="checkbox"/> Road safety |
| <input type="checkbox"/> Educational opportunities | <input type="checkbox"/> Services for disabled people |
| <input type="checkbox"/> Employment and employment resources | <input type="checkbox"/> Transportation options |
| <input type="checkbox"/> Healthy food choices | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Housing | <input type="checkbox"/> None of the above |
| <input type="checkbox"/> Health services (variety of) | |
| <input type="checkbox"/> Health care providers (number or type) | |

6. In your opinion, which THREE HEALTH PROBLEMS most affect the quality of life in Yadkin County?

- | | |
|--|---|
| <input type="checkbox"/> Accidental injuries (falls, drowning, poisoning, gun accidents, etc.) | <input type="checkbox"/> Liver disease |
| <input type="checkbox"/> Alzheimer's disease | <input type="checkbox"/> Lung disease (asthma, emphysema, COPD) |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Mental health |
| <input type="checkbox"/> Dental health | <input type="checkbox"/> Motor vehicle accidents |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Obesity/ overweight |
| <input type="checkbox"/> Heart disease/ heart attack | <input type="checkbox"/> Pre-diabetes/ borderline diabetes |
| <input type="checkbox"/> HIV/ AIDS | <input type="checkbox"/> Sexually transmitted diseases |
| <input type="checkbox"/> Infant death | <input type="checkbox"/> Stroke |
| <input type="checkbox"/> Infections/ contagious diseases (COVID, flu, pneumonia) | <input type="checkbox"/> Substance abuse |
| <input type="checkbox"/> Kidney disease | <input type="checkbox"/> Teenage pregnancy |
| | <input type="checkbox"/> Other: _____ |
| | <input type="checkbox"/> None |

7. In your opinion, which THREE HEALTH BEHAVIORS do you or the people in your community need more information about?

- | | |
|--|---|
| <input type="checkbox"/> Anger management | <input type="checkbox"/> Managing weight |
| <input type="checkbox"/> Caregiving for family members | <input type="checkbox"/> Parenting resources |
| <input type="checkbox"/> Crime prevention | <input type="checkbox"/> Preparing for an emergency/disaster |
| <input type="checkbox"/> Driving safely | <input type="checkbox"/> Quitting or preventing tobacco/e-cigarette use |
| <input type="checkbox"/> Domestic violence prevention | <input type="checkbox"/> Rape/ sexual abuse prevention |
| <input type="checkbox"/> Eating well/ nutrition | <input type="checkbox"/> Substance abuse prevention (drugs, alcohol and prescription medications) |
| <input type="checkbox"/> Elder care | <input type="checkbox"/> Suicide prevention |
| <input type="checkbox"/> Exercising/ fitness | <input type="checkbox"/> Stress management |
| <input type="checkbox"/> Getting prenatal care during pregnancy | <input type="checkbox"/> Using seat belts or child safety seats |
| <input type="checkbox"/> Getting flu shots and other vaccines | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Going to a dentist for check-ups/ preventive care | <input type="checkbox"/> None |
| <input type="checkbox"/> Going to the doctor for yearly check-ups and screenings | |

8. Are you familiar with the Good Samaritan Law? (This law provides limited immunity from prosecution if a person seeks medical assistance for an individual experiencing an alcohol or drug related emergency by contacting 911, law enforcement or emergency medical personnel.)

☐ Yes ☐ No

9. Where do **you** get most of your health-related information? (Please choose **only one**.)

- | | |
|---|--|
| <input type="checkbox"/> Books/magazines | <input type="checkbox"/> Hospital |
| <input type="checkbox"/> Church | <input type="checkbox"/> Help lines |
| <input type="checkbox"/> Doctor/nurse | <input type="checkbox"/> My child's school |
| <input type="checkbox"/> Friends and family | <input type="checkbox"/> Social Media |
| <input type="checkbox"/> Internet | <input type="checkbox"/> Pharmacist |
| <input type="checkbox"/> Health department | <input type="checkbox"/> Other _____ |

10. Which of the following health topics do you think **youth** in the County need(s) more information about? (Please **choose 3**)

- | | |
|---|---|
| <input type="checkbox"/> Alcohol | <input type="checkbox"/> Nutrition |
| <input type="checkbox"/> Asthma management | <input type="checkbox"/> Pregnancy prevention |
| <input type="checkbox"/> Bullying | <input type="checkbox"/> Physical Activity |
| <input type="checkbox"/> Dental hygiene | <input type="checkbox"/> Reckless driving/speeding |
| <input type="checkbox"/> Diabetes management | <input type="checkbox"/> STDs |
| <input type="checkbox"/> Eating Disorders | <input type="checkbox"/> Suicide prevention |
| <input type="checkbox"/> Drug Abuse | <input type="checkbox"/> Tobacco/vaping/e-cigarette use |
| <input type="checkbox"/> Mental health issues | <input type="checkbox"/> Other _____ |

PART 4: Personal Health

These next questions are about your own personal health. Remember, the answers you give for this survey will not be linked to you in any way.

11. Would you say that, in general, your health is...(Choose **only one**)

- ☐ Excellent ☐ Very good ☐ Good ☐ Fair ☐ Poor

12. Have you ever been told by a **doctor, nurse, or other health professional** that you have any of the following health conditions? (DK= Don't know/ Not sure; R= Refuse to answer)

- | | | | | |
|---------------------------------|------------------------------|-----------------------------|-----------------------------|----------------------------|
| Angina/ heart disease | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> R |
| Asthma | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> R |
| Cancer | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> R |
| Depression or anxiety | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> R |
| Diabetes (not during pregnancy) | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> R |
| High cholesterol | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> R |
| High blood pressure | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> R |
| Osteoporosis | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> R |
| Overweight/Obesity | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> R |

13. In the past year, have you:

Had a routine/ annual physical or check-up?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Delayed due to COVID
Been to the dentist/ dental hygienist?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Delayed due to COVID
Had a recommended screening?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Delayed due to COVID
Had your blood pressure checked?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Delayed due to COVID
Had your cholesterol checked?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Delayed due to COVID
Had your blood sugar levels checked?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Delayed due to COVID

14. In the past 30 days, have there been any days when feeling sad or worried kept you from going about your normal business?

☐ Yes ☐ No ☐ Don't know/ Not sure

15. During a normal week, other than in your regular job, do you engage in any physical activity or exercise that lasts at least a half an hour?

☐ Yes ☐ No (*skip to question #20*)

16. Since you said yes, how many times do you exercise or engage in physical activity during a normal week? (If you exercise more than once a day, count each separate physical activity that lasts for at least a half hour to be one "time.")

_____ **Number of times per week**

17. Where do you go to exercise or engage in physical activity? (Check all that apply)

<input type="checkbox"/> Church	<input type="checkbox"/> Public Recreation Center
<input type="checkbox"/> Home	<input type="checkbox"/> Schools
<input type="checkbox"/> Park	<input type="checkbox"/> Senior Center
<input type="checkbox"/> Private gym	<input type="checkbox"/> YMCA
	<input type="checkbox"/> Other: _____

18. Since you said "no", what are the reasons you do not exercise for at least a half hour during a normal week? (Check all that apply)

<input type="checkbox"/> Exercise is not important to me.	<input type="checkbox"/> I'm too tired to exercise.
<input type="checkbox"/> It costs too much to exercise	<input type="checkbox"/> I'm physically disabled.
<input type="checkbox"/> I don't have access to a facility that has	<input type="checkbox"/> I would need child care and I don't

- | | |
|--|---|
| the things I need (like a pool, golf course, or a track) | _____ have it. |
| _____ I don't have enough time to exercise. | _____ There is no safe place to exercise. |
| _____ I don't know how to find exercise partners. | _____ My job is physical or hard labor |
| _____ I don't like to exercise. | _____ I don't know |
| | _____ Other _____ |

19. Not counting lettuce salad or potato products, think about how often you eat fruits and vegetables in an average week. **How many cups per week of fruits and vegetables would you say you eat?** (One apple or 12 baby carrots = one cup. Write number of cups in the space provided.)

- | | |
|---------------------------------------|--------------------------------------|
| Number of cups of fruit _____ | _____ I never eat fruit |
| Number of cups of vegetables _____ | _____ I never eat vegetables |
| Number of cups 100% fruit juice _____ | _____ I never drink 100% fruit juice |

Lettuce salad is the typical "house salad" with iceberg lettuce, or the salad mixes you get at the store or fast food restaurants, even if they have meat on top. Potato products are French fries, baked potatoes, hash browns, mashed potatoes...anything made from white potatoes. Ketchup is not considered a vegetable.

20. One of the recommendations for healthy eating is to eat at least 5 servings of fruits & vegetables a day. **Please choose up to three main reasons that keep you from eating this way.**

- | | |
|---|--|
| _____ Nothing, I eat 5 or more servings a day. | _____ I (or my family) won't eat them. |
| _____ I don't have access to fresh fruits and vegetables. | _____ I just don't think about it. |
| _____ I don't have time to fix them. | _____ Lack of fruits and vegetables in restaurants |
| _____ I don't know how to prepare them. | _____ They are too expensive. |
| _____ I don't know where to buy them. | _____ They go bad before we eat them. |
| _____ I don't think they're important | _____ They're not available in the off-season. |
| | _____ Other: _____ |

21. Do you currently **use tobacco products**, including snuff, dip, chewing tobacco, vapes or cigarettes? (Include regular smoking in social settings.)

- _____ Yes _____ No (*If no, skip to question #26*)

22. If yes, where would you go for help if you wanted to quit? (Choose **only one.)**

- | | |
|--|---|
| <input type="checkbox"/> Church | <input type="checkbox"/> Quit Line NC |
| <input type="checkbox"/> Doctor | <input type="checkbox"/> I don't know |
| <input type="checkbox"/> Health Department | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Pharmacy | <input type="checkbox"/> Not applicable; I don't want to quit |
| <input type="checkbox"/> Private counselor/therapist | |

23. Electronic "vaping" products, such as electronic cigarettes, are battery-operated devices that simulate traditional cigarette smoking, but do not involve the burning of tobacco. Do you NOW use electronic "vaping" products, such as e-cigarettes?

- ☐ Always ☐ Usually ☐ Sometimes ☐ Never ☐ Rarely

24. Have you been exposed to secondhand smoke in the past year, including vaping and e-cigarettes?

- ☐ Yes ☐ No ☐ Don't know / Not sure

25. In the PAST YEAR, have you used any prescription opiates, whether or not a doctor had prescribed them to you?

- ☐ Yes ☐ No

26. To what degree has your life been negatively affected by your own or someone else's substance abuse issues, including alcohol, prescription, and other drugs?

- ☐ A great deal ☐ Somewhat ☐ A little ☐ Not at all

27. An influenza/flu vaccine can be a "flu shot" injected into your arm or spray like "FluMist" which is sprayed into your nose. **During the past 12 months, have you had a seasonal flu vaccine?**

- ☐ Yes ☐ No ☐ Don't know / Not sure

28. Since the beginning of the COVID-19 pandemic, did you:

- | | | |
|--|------------------------------|-----------------------------|
| a) Lose a job | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b) Lose hours or wages (but didn't lose a job) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

- | | | |
|--|---------|--------|
| c) Lose health insurance coverage | ___ Yes | ___ No |
| d) Gain a job or change jobs | ___ Yes | ___ No |
| e) Gain hours or wages (but not a new job) | ___ Yes | ___ No |
| f) Gain health insurance coverage | ___ Yes | ___ No |

29. COVID vaccinations have been available at no cost for everyone over age 12 in Yadkin County. If you have not gotten vaccinated against COVID, what is the main reason:

- | | |
|--|-------------------------------------|
| ___ Not applicable; I am fully vaccinated. | ___ Don't think it's necessary |
| ___ Couldn't get an appointment | ___ Language barrier |
| ___ Couldn't miss work | ___ Wait was too long |
| ___ Concerned about side effects/ reaction | ___ No way to get there |
| ___ Didn't know where to go | ___ Treated poorly/ disrespectfully |
| ___ Don't think it works | ___ Other: _____ |
| ___ Don't think it's safe | _____ |

Part 5. Access to Care/ Family Health

30. Where do you go most often when you are sick? (Choose only one)

- | | |
|-----------------------|---|
| ___ Doctor's office | ___ Urgent Care Center |
| ___ Health Department | ___ I don't go to the doctor when sick. |
| ___ Hospital | ___ Other: _____ |
| ___ Medical Clinic | |

31. In the past 12 months, did you have a problem getting the health care you needed for you personally or for a family member from any type of health care provider, dentist, pharmacy, or other facility?

- ___ Yes ___ No (*Skip to question #32*) ___ Don't know/ Not sure

32. Since you answered "yes," what type of provider or facility did you or your family member have trouble getting health care from? You can choose as many of these as you need to. If there was a provider that you tried to see but we do not have listed here, please write it in.

- | | |
|--|------------------|
| ___ Dentist | ___ OB/GYN |
| ___ Eye care/ optometrist/ ophthalmologist | ___ Pediatrician |

- ___ Health Department/ Yadkin County Medical Clinic
- ___ Hospital
- ___ General practitioner
- ___ Mental health provider

- ___ Pharmacy/ prescriptions
- ___ Specialist (type:): _____
- ___ Substance use treatment
- ___ Urgent Care Center
- ___ Workplace medical clinic

33. Which of these problems prevented you or your family member from getting the necessary health care (including dental health)? You can choose as many of these as you need to.

- | | |
|--|--|
| ___ Communication issues/ language barrier | ___ No insurance/ insurance didn't cover what was needed |
| ___ Cost was too high/ Couldn't afford it | ___ No way to get there |
| ___ Couldn't get an appointment | ___ Office hours inconvenient |
| ___ Delayed due to COVID | ___ Provider/facility would not take my insurance/Medicaid |
| ___ Didn't know where to go | ___ Stigma |
| ___ Fears about confidentiality | ___ Treated poorly/disrespectfully |
| ___ Lack of child care | ___ Other: _____ |
| ___ Lack of providers | |

34. If a friend or family member needed counseling for a mental health or a drug/alcohol abuse problem, who is the first person you would tell them to talk to? (Choose **only one)**

- | | |
|----------------------------------|--|
| ___ Crisis hotline | ___ Partners |
| ___ Call 911 | ___ Private counselor or therapist |
| ___ Daymark | ___ School counselor, nurse or social worker |
| ___ Doctor | ___ Support Group |
| ___ Hospital | ___ Don't know |
| ___ Minister/ religious official | ___ Other: _____ |

35. What is the MAIN reason for not seeking mental health care or counseling?

- | | |
|---------------------------------|---|
| ___ Cost/no insurance coverage | ___ Other: _____ |
| ___ Distance | ___ Previous negative experiences/distrust of mental health providers |
| ___ Didn't know where to go | ___ Stigma |
| ___ Fears about confidentiality | ___ Too busy to attend an appointment |
| ___ Lack of child care | ___ Too long of wait for an appointment |
| ___ Lack of providers | ___ Trouble getting an appointment |
| ___ Lack of transportation | ___ Other: _____ |
| ___ Office hours | |

- 36. Opiates or opioids are drugs that doctors prescribe to treat pain. Examples of prescription opiates include morphine, codeine, hydrocodone, oxycodone, methadone, and fentanyl. In the past year, have you used any of these prescription opiates? (Brand names include Vicodin, Dilaudid, Percocet, Oxycontin, Demerol)**

___ Yes ___ No ___ Don't know/Not sure

Part 6. Emergency Preparedness

- 37. Does your family have a basic emergency supply kit that would last for 72 hours?**
(These kits include water, non-perishable food, any necessary prescriptions, first aid supplies, flashlight and batteries, non-electric can opener, blanket, etc.)

___ Yes ___ No ___ Don't know/Not sure

- 38. What would be your main way of getting information from authorities in a large-scale disaster or emergency? (Choose only one)**

___ Internet	___ Television
___ Neighbors	___ Text message (emergency alert system)
___ Print media (newspaper)	___ Don't know/ Not sure
___ Radio	___ Other: _____
___ Social media site	

- 39. If public authorities announced a mandatory evacuation, what would be the main reason you might not evacuate if asked to do so? (Choose only one)**

___ I would evacuate	___ Health problems (could not be moved)
___ Concern about leaving pets	___ Lack of transportation
___ Concern about leaving property behind	___ Lack of trust in public officials
___ Concern about personal/family safety	___ Don't know/ Not sure
___ Concern about traffic jams and inability to get out	___ Other: _____

Part 7. Demographic Questions

The next set of questions are general questions about you, which will only be reported as a summary of all answers given by survey participants. Your answers will remain anonymous.

40. How old are you?

☐ Under 20 ☐ 20-29 ☐ 30-39 ☐ 40-49
☐ 50-59 ☐ 60-64 ☐ 65-69 ☐ 70-79 ☐ 80 or older

41. Are you Male or Female?

☐ Male ☐ Female ☐ Choose not to disclose

42. Are you of Hispanic, Latino, or Spanish origin?

☐ Yes ☐ No

43. If yes, please choose from:

☐ Mexican, Mexican American, or Chicano
☐ Puerto Rican
☐ Cuban
☐ Other Hispanic or Latino (please specify) _____

44. What is your race? (Please check all that apply.)

☐ White
☐ Black or African American
☐ American Indian or Alaska Native (*List tribe(s) including Lumbee*) _____
☐ Asian Indian
☐ Other Asian including Japanese, Chinese, Korean, Vietnamese, and Filipino/a:
 (*write in race*) _____
☐ Pacific Islander including Native Hawaiian, Samoan, Guamanian/ Chamorro:
 (*write in race*) _____
☐ Other race not listed here: (*write in race*) _____

45. Do you speak a language other than English at home?

☐ Yes ☐ No If yes, what language: _____

46. What is the highest level of school, college or vocational training that you have finished?

(Choose **only one**)

☐ Less than 9th grade ☐ Some college (no degree)
☐ 9-12th grade, no diploma ☐ Bachelor's degree
☐ High school graduate (or GED/
 equivalent) ☐ Graduate or professional degree
☐ Other: _____

___ Associate's Degree or Vocational Training

47. What was your total household income last year, before taxes? (Choose only one)

- | | |
|--------------------------|--------------------------|
| ___ Less than \$10,000 | ___ \$35,000 to \$49,999 |
| ___ \$10,000 to \$14,999 | ___ \$50,000 to \$74,999 |
| ___ \$15,000 to \$24,999 | ___ \$75,000 to \$99,999 |
| ___ \$25,000 to \$34,999 | ___ \$100,000 or more |

48. How many people does this income support? (include yourself) _____

(If you are paying child support but your child is not living with you, this still counts as someone living on your income.)

49. What is your employment status? I will read a list of choices. Let me know which ones apply to you. (Check all that apply.)

- | | |
|-------------------------------------|-----------------------------------|
| ___ Employed full-time | ___ Disabled |
| ___ Employed full-time | ___ Student |
| ___ Retired | ___ Homemaker |
| ___ Armed forces | ___ Self-employed |
| ___ Unemployed for more than 1 year | ___ Unemployed for 1 year or less |

50. Overall, how would you rate your personal or your family's financial situation, in terms of being able to afford adequate food and housing, and to pay the bills you currently have?

- | | | | | |
|----------------------------|--------------------|---------------------------|-------------------------|-----------------------------|
| ___ Extremely
confident | ___ Very confident | ___ Somewhat
confident | ___ Not so
confident | ___ Not at all
confident |
|----------------------------|--------------------|---------------------------|-------------------------|-----------------------------|

These are all the questions that we have. Thank you so much for taking the time to complete this survey!

THE END.

2023 YADKIN COUNTY COMMUNITY HEALTH ASSESSMENT

PRESENTATION OF SUMMARY DATA FINDINGS: SECONDARY DATA & COMMUNITY HEALTH SURVEY RESULTS

Prepared by Public Health Consultant Annika Pfaender, November 2023

PURPOSE OF THE COMMUNITY HEALTH ASSESSMENT

- Describe the health status of the community using:
 - Authoritative secondary data sources for demographic, socioeconomic, health, and environmental indicators.
 - Community health survey of 200+ Yadkin County residents conducted in Summer 2023.
 - Comparators North Carolina, Davie County, Stokes County, and occasionally the US.
- Create a report that will serve as a resource for the Yadkin County Health Department and other community organizations.
- Provide direction for the planning of disease prevention and health promotion services and activities.

FLOW OF THE PRESENTATION

In service of the planning step of the CHA, the data gathered as part of the process will be summarized in this presentation format:

1. General Demographics
2. Health Status
3. Healthcare Resources
4. Economic Stability
5. Education Access & Quality
6. Social & Community Context

We take special notice when:

- Yadkin County statistics deviate from the comparators.
- Trend data shows significant changes over time.
- There are significant age, gender, or racial disparities.

ABOUT THE PRESENTATION

- **Yadkin County** data appears in a medium blue in all charts and graphs; peer county **Davie County** is turquoise, **Stokes County** is green, and **North Carolina** is dark blue.
- Responses to the Community Health Survey are woven into the presentation where applicable and appropriate.
- The statistics presented here are supported by a robust data workbook displaying data on these indicators and many more. Sources include the NC State Center for Health Statistics, Division of Public Health, NC Department of Health and Human Services, the US Census Bureau, NC Office of State Budget and Management, NC Department of Commerce, NC Department of Public Instruction, Department of Public Safety, among others.

NEXT STEPS

- This presentation will be distributed electronically to members of the CHA Team.
- The prioritization process required as part of the CHA will begin with a stakeholder survey distributed soon by Laken Royall.
- The final list of priorities will be discussed further in the full Community Health Assessment report that will be shared with the Board in January and submitted to the State in March.

POPULATION

AGE

RACE

ETHNICITY

GENERAL DEMOGRAPHICS

POPULATION

According to the 2020 Census count Yadkin County was home to 37,214 people, similar to the 2021 ACS estimate of 37,198 people. In 2023, the NC OSBM estimated 37,082 residents of the county.

The county was comprised of very similar numbers of males and females (which not the case in many counties).

The median age of 44.5 in 2021 was nearly 5 years older than the NC average (39.0).

The county population is projected to remain steady over the coming decades, changing by less than 100 people by 2050.

In 2021, 8% of the county had moved there from another county, state, or country.

The birth rate has remained relatively steady at around 10 births per 1,000 population since 2010-2014. On average, 377 people are born each year in Yadkin County.

The full range of data pulled as part of this project is not available yet from the 2020 Census, so the bulk of the population-based statistics we will be discussing in this section come from the American Community Survey (2021 and previous years).

Population change details: it is estimated that more people will die than are born in the county and enough people will move into the county to make up the difference. (e.g between 2030-2040, 1142 more people will die than are born and 1133 will migrate into the county.)

Sources: 2021 ACS estimates, projections from NC OSBM, birth rate from NC SCHS

BLACK, INDIGENOUS, AND PEOPLE OF COLOR

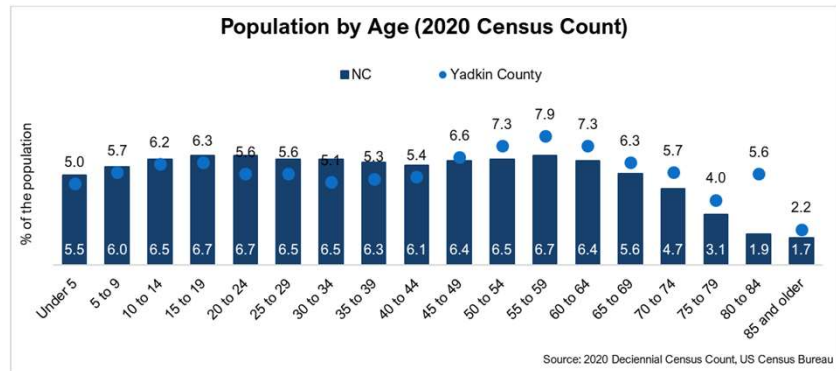
- Yadkin County is less diverse than NC, with BIPOC residents comprising just over 10% of the total county population.
- Compared to NC and peer counties, Yadkin County has a larger Hispanic/Latino population.
- In 2021, Yadkin County was home to approximately 1,240 Black/African American residents and approximately 4,260 Hispanic/Latino residents.
 - The Hispanic/Latino population is significantly younger than the overall Yadkin County population.

Racial Distribution	Percent of the Overall Population (2021 ACS Estimates)						
	White	Black	AI/AN	Asian	Other Race	Multiple Races	Hispanic/Latino
Yadkin County	89.3	3.3	0.4	0.2	3.3	3.5	11.4
Davie County	86.8	4.6	0.5	0.6	2.3	5.2	7.2
Stokes County	92.2	3.9	0.3	0.4	0.7	2.4	3.4
North Carolina	66.2	21.2	1.1	3.3	3.6	4.8	9.8

Note that the figures in a row are not additive. Hispanicity is an ethnic category that overlaps with other racial groups.

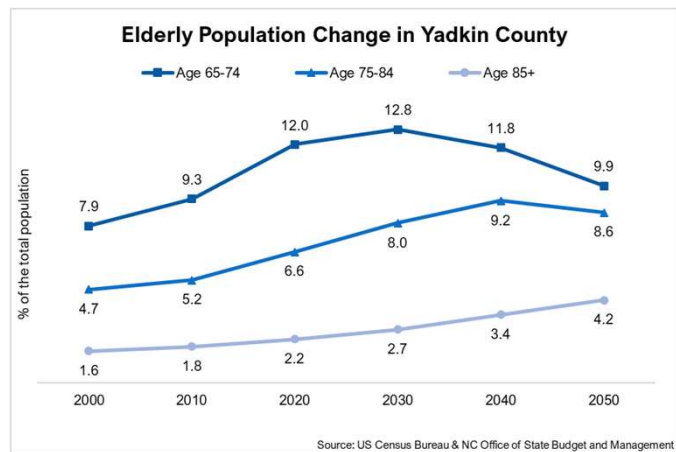
AGE

- Compared to NC, Yadkin County is comprised of a higher proportion of residents over the age of 45.
- Minors comprised approximately 20% of the population in 2020.
- Seniors (65 and older) also comprised 20% of the 2020 population.



ELDERLY POPULATION

- The population over the age of 65 is expected to increase by 9% over the next three decades, from approximately 7,700 in 2020 to a projected 8,383 by 2050.
 - Population aged 65-74 is projected to *decrease* by 17%.
 - Population aged 75-84 is projected to increase by 30%.
 - Population aged 85+ is projected to increase by 89%.



OTHER POPULATIONS OF NOTE

- Approximately 8% of the population (2,250 people) was a military veteran in 2021.
- Approximately 7% of the population was non-English speaking, with Spanish being the most common language spoken. As of 2021, among non-English speakers in Yadkin County, 26% were considered linguistically isolated (speaks English less than “very well”).
- 15% of Yadkin County residents had a disability in 2021, a lower proportion than either peer county and higher than NC (13%).
 - 9% had an ambulatory difficulty
 - 8% had an independent living difficulty
 - 5.5% had a cognitive difficulty
 - 4% had a hearing difficulty
 - 3.5% had a self-care difficulty
 - 3% had a vision difficulty

The disability % listed are out of the total County population.

Source: 2021 ACS Estimates

Hearing difficulty: deaf or having serious difficult hearing

Vision difficulty: blind or having serious difficulty seeing, even when wearing glasses

Cognitive difficulty: Because of a physical, mental, or emotional problem, having difficulty remembering, concentrating, or making decisions

Ambulatory difficulty: Having serious difficulty walking or climbing stairs

Self-care difficulty: Having difficulty bathing or dressing

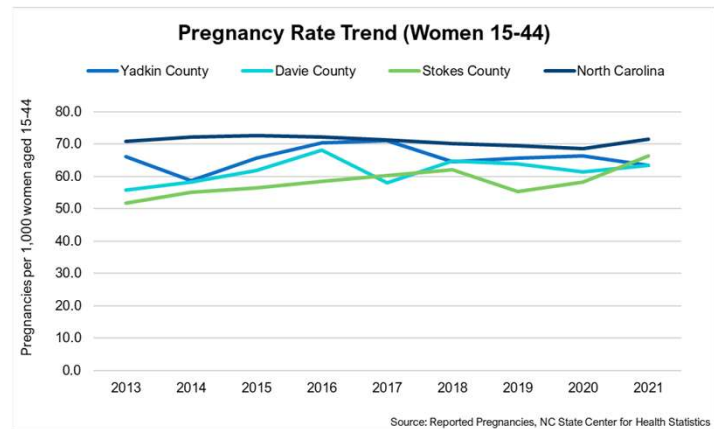
Independent living difficulty: Because of a physical, mental, or emotional problem, having difficulty doing errands alone such as visiting a doctor’s office or shopping

MATERNAL &
INFANT HEALTH
LIFE EXPECTANCY
MORTALITY
MORBIDITY

HEALTH STATUS

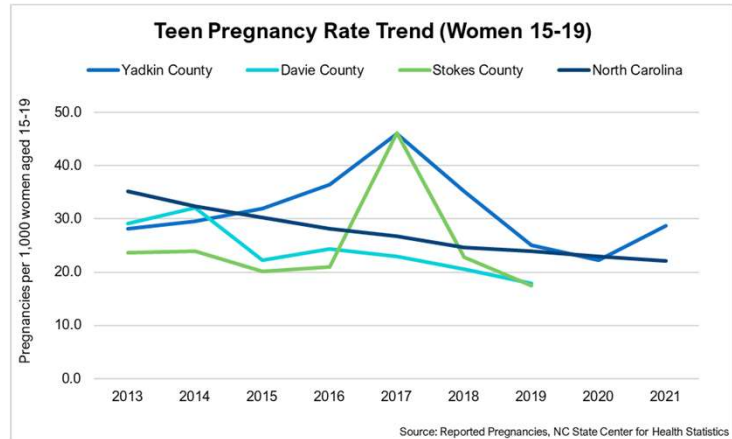
PREGNANCY

- The pregnancy rate among women of childbearing age in Yadkin County has decreased from a high of 71.0 in 2017 to 63.5 in 2021 and tends to be lower compared to NC.
- The pregnancy rate among Hispanic women fluctuates but trends higher than the rate among white women.



TEEN PREGNANCY

- Among women aged 15-19, the pregnancy rate fell from a high of 46.0 in 2017 to 28.7 in 2021.
- The Yadkin County teen pregnancy rate was higher compared to the state rate in 2021.



Pregnancies among women 15-19 in 2021:

28 in Yadkin

15 in Davie

26 in Stokes

PREGNANCY RISK FACTORS

In 2021 Yadkin County mothers were:

- similarly likely to have high parity births and short interval births
- more likely to have smoked during pregnancy
- more likely to have received prenatal care in the first trimester
- more likely to have delivered pre-term (less than 37 weeks gestation)
- less likely to have been diagnosed with gestational diabetes
- more likely to have a pre-pregnancy BMI in the Obese category
- less likely to deliver by C-section

compared to NC in 2021.

A high parity birth means that mother has had a large number of births for her age; short interval means conception occurred within 6 months of the last birth.

9.6% of Yadkin births were to mothers who reported smoking during pregnancy in 2021, compared to less than 5.6% in NC and 7.3% in Davie and 10.7% in Stokes.

75.3% of Yadkin mothers received prenatal care in the first trimester compared to 73.8% in NC in 2021.

14% of births were pre-term vs. 10.8% in NC and 11.4% in both Stokes and Davie in 2021

5.2% with gestational diabetes vs 8.2% in NC

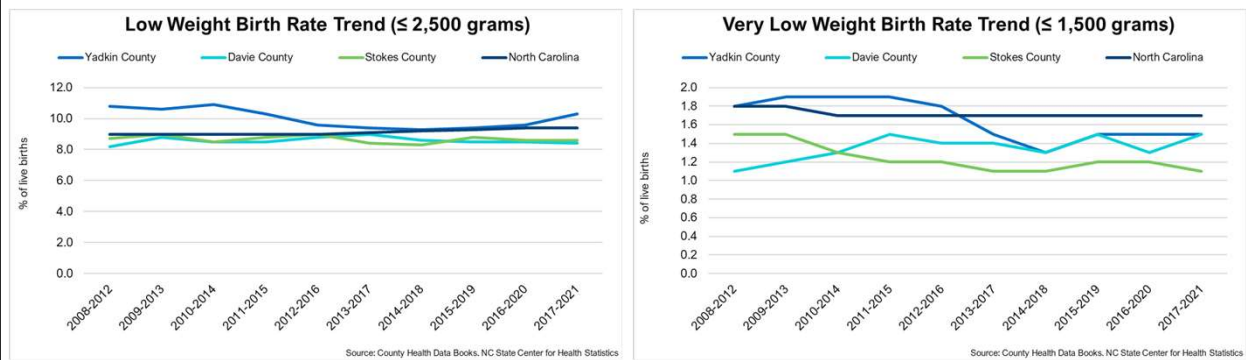
42% obese vs. 32% in NC

28% c-sections vs 30% in NC

Source: NC SCHS

PREGNANCY OUTCOMES

The percentage of births that are considered low weight (<5.5 pounds) increased recently in Yadkin County and was higher than other comparators over the period shown. Very low weight births (<3.3 pounds) have decreased overall since 2008-2012 and were lower compared to NC in the most recent period.

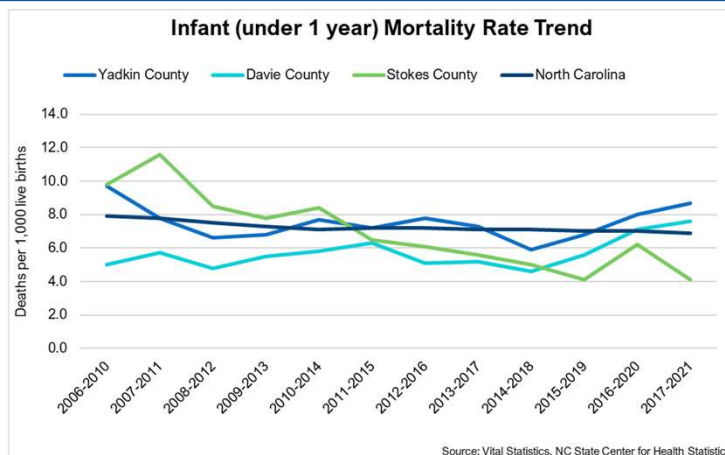


Low weight births occur at higher rates among African American, Multi-racial, and Hispanic mothers in Yadkin County, though some rates are based on low numbers.

African American women demonstrated the highest percentage of very low weight births compared to Davie, Stokes and NC in 2017-2021.

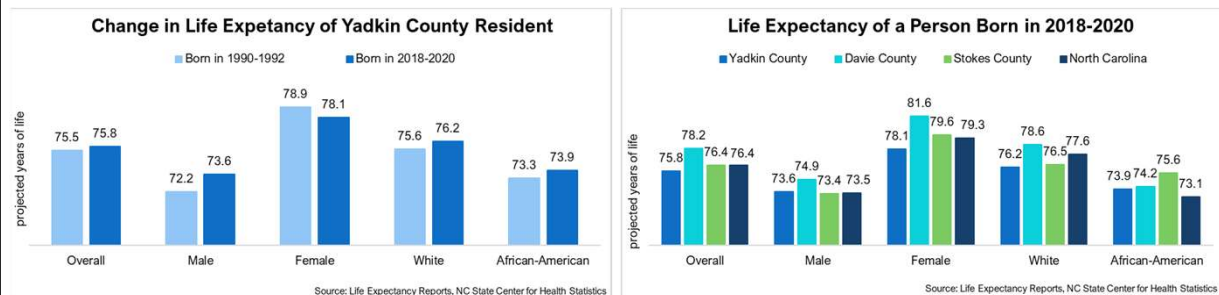
INFANT MORTALITY

- The Yadkin County infant mortality rate rose over the most recent four periods and was higher than NC in the most recent two periods.
- The average number of infant deaths over the period shown was 8 per 5-year period.
- Most infant deaths in Yadkin County occur among White non-Hispanic residents.



LIFE EXPECTANCY

- The average Yadkin County resident born in 2018-2020 could be expected to live to the age of almost 76, about the same as a resident born in 1990-1992.
- Compared to 1990-1992, life expectancy increased among males, white and African Americans and *decreased* among females.



Yadkin County residents have similar life expectancies compared to NC and Stokes County, for the most part, and fare worse compared to Davie County residents.

MORTALITY: LEADING CAUSES OF DEATH

2017-2021 Leading Causes of Death, in descending order	% change since 2001-2005	% change since last CHA	Difference from NC Rate in 2017-2021
Diseases of the Heart	- 18%	+ 3%	+ 9%
Cancer	- 17%	- 4%	+ 8%
All Other Unintentional Injuries	+ 72%	+ 37%	+ 29%
Chronic Lower Respiratory Disease	+ 12%	+ 1%	+ 43%
Cerebrovascular Disease	- 45%	- 15%	- 6%
Alzheimer's Disease	+ 40%	+ 20%	+ 17%
COVID-19	n/a	n/a	+ 12%
Diabetes Mellitus	+ 17%	- 5%	+ 26%
Unintentional Motor Vehicle Injuries	+ 9%	+ 17%	+ 55%
Suicide	+ 54%	+ 15%	+ 52%
Pneumonia and Influenza	- 12%	- 24%	+ 30%
Nephritis, Nephrotic Syndrome, and Nephrosis	- 11%	+ 2%	+ 3%
Chronic Liver Disease and Cirrhosis	+ 3%	+ 20%	- 9%
Septicemia	- 36%	- 46%	- 13%
Homicide	- 9%	+ 189%	- 33%
Acquired Immune Deficiency Syndrome	- 100%	- 100%	- 100%

Source: NC SCHS

Note that COVID-19 was added to the list of Leading Causes of Death in the 2016-2020 period. The mortality rate due to COVID-19 was 14.1 in 2016-2020 and 38.6 in 2017-2021.

The last CHA was conducted in 2019 and included mortality rates from 2014-2018.

Red (positive number) indicates a rise in rates, green (negative number) indicates a decrease in the rate.

MORTALITY: DISPARITIES

2017-2021 Leading Causes of Death, in descending order	Difference between Male and Female rates
Diseases of the Heart	+ 36%
Cancer	+ 58%
All Other Unintentional Injuries	+ 84%
Chronic Lower Respiratory Disease	+ 6%
Cerebrovascular Disease	+ 16%
Alzheimer's Disease	- 12%
COVID-19	+ 100%
Diabetes Mellitus	+ 25%
Unintentional Motor Vehicle Injuries	--
Suicide	--
Pneumonia and Influenza	+ 33%
Nephritis, Nephrotic Syndrome, and Nephrosis	--
Chronic Liver Disease and Cirrhosis	--
Septicemia	--
Homicide	--
Acquired Immune Deficiency Syndrome	--

Source: NC SCHS

With the exception of Alzheimer's disease, all other available mortality rates for males were higher compared to females.

There are no mortality rates available for races other than White Non-Hispanic.

CANCER

2017-2021 Cancer Mortality Rate Trend	% change since 2001-2005	% change since last CHA	Difference from NC Rate in 2017-2021
Cancer	- 17%	- 4%	+ 8%
Trachea, Bronchus, and Lung	- 30%	- 14%	+ 21%
Colon, Rectum and Anus	- 36%	+ 19%	- 11%
Prostate	- 28%	- 2%	+ 6%
Breast	- 24%	- 23%	- 27%

2017-2021 Cancer Incidence Rate Trend	% change since 2005-2009	% change since last CHA	Difference from NC Rate in 2017-2021
Cancer	- 7%	+ 1%	- 2%
Trachea, Bronchus, and Lung	- 7%	+ 9%	+ 25%
Colon, Rectum and Anus	- 33%	- 19%	- 8%
Prostate	- 44%	+ 11%	- 28%
Breast	- 5%	+ 2%	- 22%

Source: NC SCHS

MORBIDITY

As a general long-term trend, chlamydia and gonorrhea incidence rates are on the rise in Yadkin County but rates remain much lower compared to NC.

The prevalence of adult diabetes fell between 2008 and 2013 but has risen since. Nearly 2,800 adults were estimated to have diabetes in Yadkin County in 2021 (7.7%), lower compared to 11% statewide.

Although it fluctuates on a yearly basis, the estimated prevalence of adult obesity has not changed in the long term. Approximately 25% of Yadkin County adults (7,300 people) were considered obese in 2021.

According to 2018 estimates, 28% of 2 to 4-year-olds assessed by NC PedNESS were overweight (15%) or obese (13%), a decrease compared to the previous two years (32% and 33%).

Between 2017 and 2022, Yadkin County residents made an average of 1,018 ED visits related to unintentional falls. Females and seniors comprised a disproportionate percentage of those ED visits.

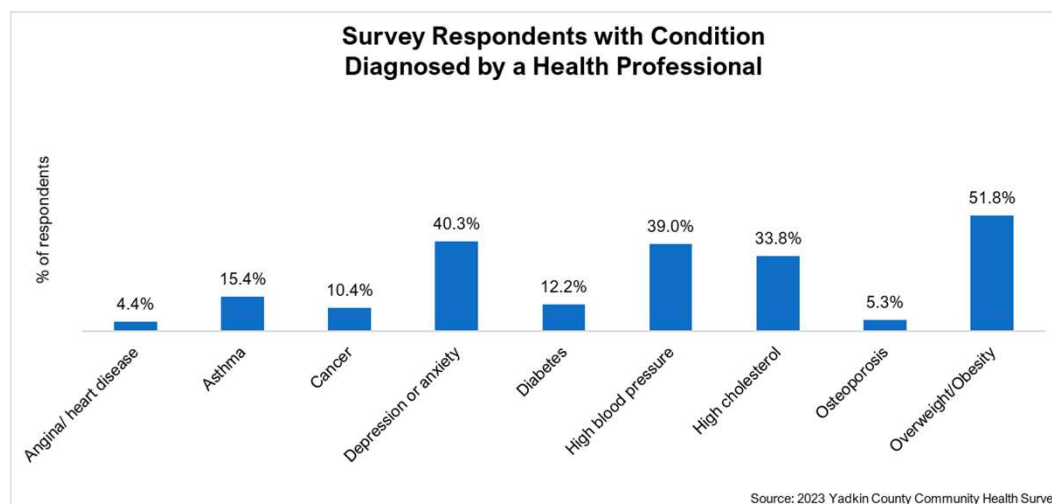
Among Yadkin County survey respondents, Obesity/overweight ranked as the second most important health problem (43%), Cancer ranked third (41.5%) and Diabetes ranked fifth (29%).

Incidence = newly reported cases

Prevalence = the number of people sick with something, not just those newly diagnosed

Sources: NC SCHS, DPH Communicable Diseases Branch, CDC for diabetes and obesity, youth obesity is from Eat Smart Move More NC, fall data from NC DETECT.

SELF-REPORTED DIAGNOSES: COMMUNITY SURVEY RESPONSES



Note: the 2022 survey sample skews female, middle aged, white, with an income over \$50,000 a year.

MENTAL HEALTH

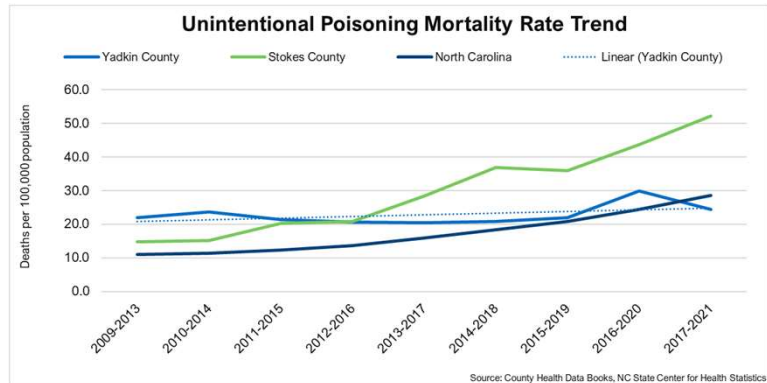
- An average of 1,576 Yadkin County residents were served each year by the LME for Yadkin County (Partners Behavioral) in SFY2016 through SFY2022.
- According to data supplied by Partners describing the Yadkin County residents served in CY2020, 36% were aged 10-17, 63% were 18-64, and 4% were age 65 or older.
- According to data from NC DETECT, 1,005 Yadkin County residents aged 10 and older were seen in emergency departments for suicidal ideation between 2017 and 2021, an average of 200 per year. 20% were aged 10-17, 74% were aged 18-64 and 5% were aged 65 and older.

MENTAL HEATH: COMMUNITY SURVEY RESPONSES

- Among 2023 Community Health Survey respondents:
 - 40% reported being diagnosed with depression or anxiety.
 - 73% felt Drug Use (illegal and prescription) was an issue greatly affecting the quality of life in Yadkin County. 18% selected Depression/Helplessness.
 - “Counseling/mental health/support groups” was identified by 25% as a service needing improvement.
 - 53% felt Substance Abuse was the health problem most affecting quality of life; 37% identified mental health as one of the most impactful health problems.
 - Substance Abuse (52%) was the most commonly identified health behavior respondents felt people needed more information about; 25% selected stress management and 11% identified suicide prevention.
 - Drug abuse (55%) and mental health issues (46%) lead the list of health topics respondents felt Yadkin County youths needed more information about.

UNINTENTIONAL POISONING DEATHS

- The unintentional poisoning mortality rate in Yadkin County has risen since it was first reported in 2009-2013.
- In 2017-2021, there were 20 deaths with an underlying cause of unintentional poisoning in Yadkin County a decrease from 50 deaths in 2016-2020.



Davie is not graphed because its rates were suppressed for a few years due to low numbers.

UNINTENTIONAL POISONINGS

- According to data from the IVP Branch of NC DPH, between 2012 and 2021 among Yadkin County residents, there were:
 - 95 unintentional poisoning-related deaths
 - 304 unintentional poisoning-related hospitalizations
 - 907 unintentional poisoning-related ED visits
 - Opioids were the most common substance contributing to these ED visits, hospitalizations, and deaths.
 - Fentanyl is involved in an increasing number of deaths: 11 in 2012-2019 combined, 11 in 2020, and 14 in 2021. It is not involved in an increasing number of hospitalizations or ED visits.
 - Stimulants and benzodiazepines were the other most contributing common substances.

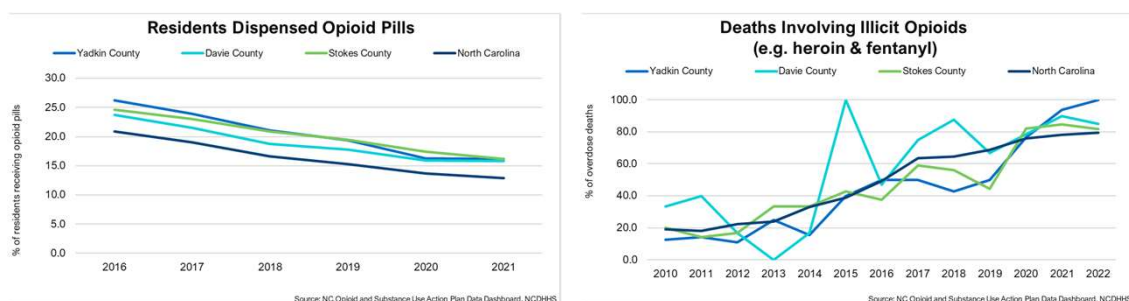
This is according to data provided by the Injury and Violence Prevention Branch of Department of Public Health. There may be more than one substance involved in a death/hospitalization/ED discharge.

Stimulants includes methamphetamines, cocaine, ecstasy

Benzodiazepines (depressants) include Valium®, Xanax®, Halcion®, Ativan®, and Klonopin

OPIOIDS

- The rate of unintentional overdose deaths is variable on a yearly basis in Yadkin County but rose overall since 2010.
- The rate of ED visits with a drug overdose diagnosis was higher in Yadkin County in 2021 (199.1) compared to Davie (182.0) and NC (161.5) and similar to Stokes (199.6).
- The percentage of residents receiving prescribed opioid pills fell steadily from 26.2% (9,818 residents) in 2016 to 16.2% (6,086 residents) in 2021.
- An increasing proportion of overdose deaths in Yadkin, Davie, Stokes counties and across NC involved illicit opioids like heroin, fentanyl and fentanyl analogues.



Source: NC Opioid & Substance Use Action Plan Data Dashboard

OPIOIDS (NC OPIOID DASHBOARD)

- Between 2015 and 2021, an average of 38% of children in foster care in Yadkin County were there due to parental substance use, higher compared to Davie County (25%), and lower compared to Stokes County (56%) and NC (42%).
- The percentage of residents dispensed buprenorphine rose between 2016 and 2021 and was higher compared to Davie County, Stokes County, and the state.
- The rate at which Medicaid beneficiaries and the uninsured are served by treatment providers for OUD has also risen in Yadkin County and was higher compared to Davie County, Stokes County, and NC in 2021.

HEALTH BEHAVIORS: COMMUNITY SURVEY RESPONSES

- 13% reported using tobacco products (snuff, dip, chewing tobacco, vapes, or cigarettes).
- 6% reported using vape products sometimes, usually, or always.
- 7% reported never eating vegetables and 7% reported never eating fruit.
- 41% reported that they did not engage in any physical activity or exercise lasting at least half an hour in an average week.
- 11% reported that they used prescription opiates, whether or not prescribed them by a doctor, and 9% reported using opiates that WERE prescribed by a doctor.

HEALTH INSURANCE

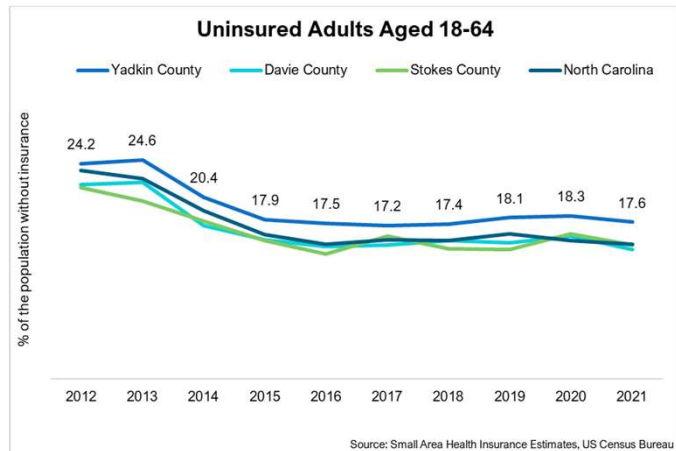
PROVIDERS &
FACILITIES

UTILIZATION

HEALTHCARE RESOURCES

UNINSURED POPULATION

- The percentage of uninsured adults has fallen in Yadkin County though it remains higher compared to NC.
- In 2021, an estimated 3,835 adults aged 18-64 were without health insurance.
- 6.4% of individuals under 18 were uninsured in Yadkin County, compared to 5.5% in NC.



MEDICAID

- The number of residents eligible for Medicaid increased from 8,228 in 2015 to 11,400 in 2023 when approximately 31% of the Yadkin County population was Medicaid eligible.
- 1,412 children were enrolled in CHIP or MCHIP in SFY2023.
- The largest Medicaid programs in Yadkin County tend to be Infants and Children, TANF (age under 21), and Family Planning.

Source: NC DHHS, Division of Health Benefits

HEALTHCARE PROVIDERS

- Active, licensed providers practicing in Yadkin County in 2022:
 - 14 physicians 50% were over the age of 65.
 - 9 dentists 11% were over the age of 65.
 - 12 pharmacists 8% were over 65.
 - 137 registered nurses none were older than 65.
 - 11 physician assistants and 21 nurse practitioners
- The provider-to-population ratios were lower for Yadkin County (often by more than half) compared to NC for the above six provider types. Meaning that in Yadkin County there are fewer providers serving the population compared to NC as a whole.

It is exceedingly difficult to get an accurate count of medical providers.

Another way to think of the ratios is that each provider needs to see more people than the average NC provider.

Yadkin	NC
RN= 36.9 : 10,000	vs. 104.0 : 10,000
DDS = 2.4 : 10,000	vs. 5.5 : 10,000
MD = 3.8 : 10,000	vs. 25 : 10,000
Pharm = 3.2 : 10,000	vs. 10.9 : 10,000
PA's = 3.0 : 10,000	vs. 8.1 : 10,000
NP's = 5.7 : 10,000	vs. 10.9 : 10,000

LICENSED HEALTHCARE FACILITIES

One dialysis facility: 13 stations and no shifts after 5pm (operated by Atrium Health Wake Forest Baptist). Served 39 patients as of December 2022, 34 of them in-center.

No cardiac rehabilitation facility, no independent ambulatory surgical facility, and no licensed nursing pool.

A total of 223 skilled nursing beds across 2 nursing homes. The State Medical Facilities Plan does not project any additional beds being needed by 2027.

3 Adult Care Homes with 169 beds total and no Family Care Homes. And additional 20 Adult Care Home beds exist at the Yadkin Nursing Center.

3 agencies providing a variety of home health and/or home care, and one agency providing hospice-related services.

8 mental health-related facilities; one of those facilities offers intensive outpatient treatment for substance abuse and one offers services specifically for children and adolescents.

Various sources, including NC Division of Health Service Regulation and the 2024 State Medical Facilities Plan

Yadkin Valley Community Hospital (currently closed) had 22 beds It is scheduled to reopen no later than January 18, 2025

HEALTHCARE UTILIZATION: COMMUNITY SURVEY RESPONSES

- Respondents to the Community Health Survey reported that, in the past year:
 - 86% had a routine physical or check-up.
 - 77% had been to the dentist or hygienist.
 - 97% had their blood pressure checked, 84% had their cholesterol checked and 84% had their blood sugar levels checked.
 - 60% got a seasonal flu vaccine and 65% said they were fully vaccinated per CDC recommendations.
 - 12% indicated that there was a time when they needed medical care but could not get it. General practitioner was the most frequent type of provider needed but not accessed. “High cost/couldn’t afford it” was the most common reason for not getting needed care, followed by lack of insurance/insurance not covering what was needed.

HEALTHCARE ACCESS: COMMUNITY SURVEY RESPONSES

- 25% selected lack of/inadequate health insurance as an impactful issue.
- Elder care options was selected as a service needing improvement by 27% of respondents.
- Less than 15% identified health care providers or health services as services needing improvement.
- Elder care ranked second among health behaviors people needed more information about (25%). 18% chose “caring for family members with special needs/disabilities” from the list.
- 66% of respondents visit a doctor’s office most often when sick; 15% visit a workplace wellness clinic, and 12% go to urgent care.

INCOME

EMPLOYMENT

POVERTY

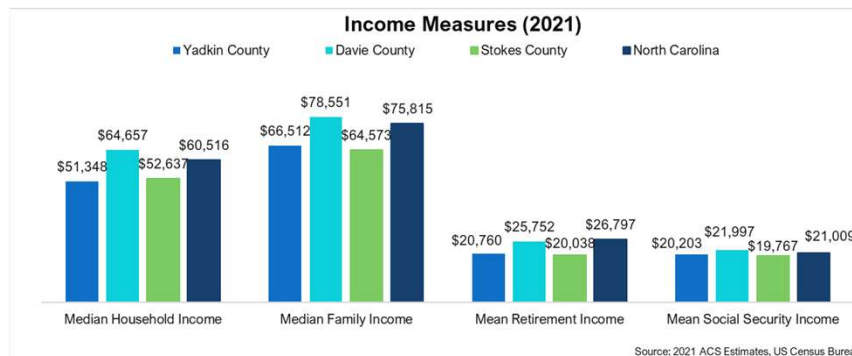
HOUSING

FOOD INSECURITY

ECONOMIC STABILITY

INCOME

- Compared to the state and Davie County, Yadkin County has lower incomes across all four measures below. Income levels are similar in Yadkin and Stokes Counties.
- Between 2011 and 2021 incomes rose by thousands of dollars across all four measures presented.



Household income describes all people aged 15 and older living in the same housing unit regardless of relationship (e.g. roommates are a household)

Family income describes all related (through bloodline or marriage) people aged 15 and older living in the same housing unit.

Yadkin County:

Median household income rose by almost \$11,000

Median Family income rose by more than \$14,000

Per capita income rose by \$7,000

Mean Retirement income rose by almost \$2900

Mean Soc. Sec. Income rose by nearly \$5000

EMPLOYMENT

- Largest employment sectors in Yadkin County in 2022:

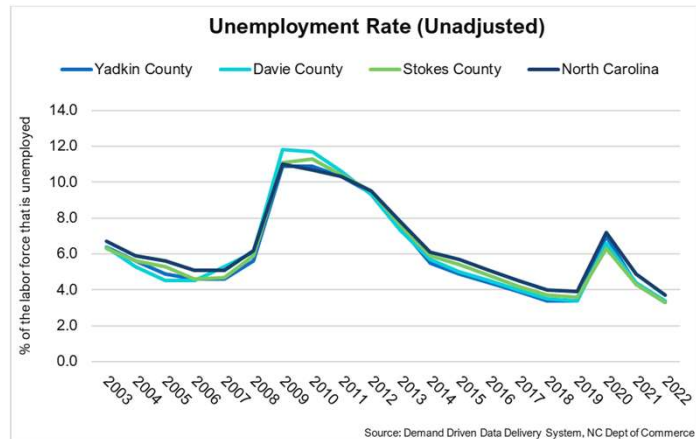
○ Manufacturing	27.5%	\$940 average weekly wage	(\$366 below NC average)
○ Retail Trade	9.8%	\$577 average weekly wage	(\$148 below NC average)
○ Transportation & Warehousing	9.5%	\$986 average weekly wage	(\$84 below NC average)
○ Accommodation & Food Services	9.4%	\$328 average weekly wage	(\$124 below NC average)

- The average weekly wage across all sectors in Yadkin County was \$761, \$609 less than the NC average of \$1,370.
- The highest average weekly wage in Yadkin County was Finance & Insurance (\$1,111) and the lowest was Arts, Entertainment & Recreation (\$253).

Source: NC Department of Commerce

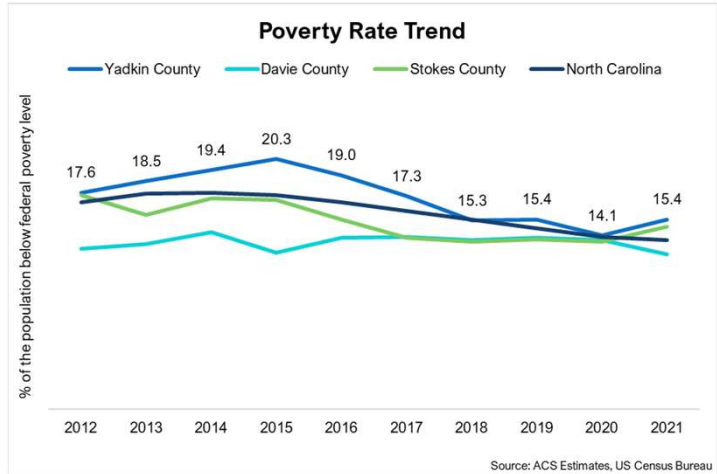
UNEMPLOYMENT

- The unemployment rate in Yadkin County follows a similar trend to the comparators.
- As of August 2023, the unemployment rate in Yadkin County was 3.3, up from a low of 2.8 in April 2023.



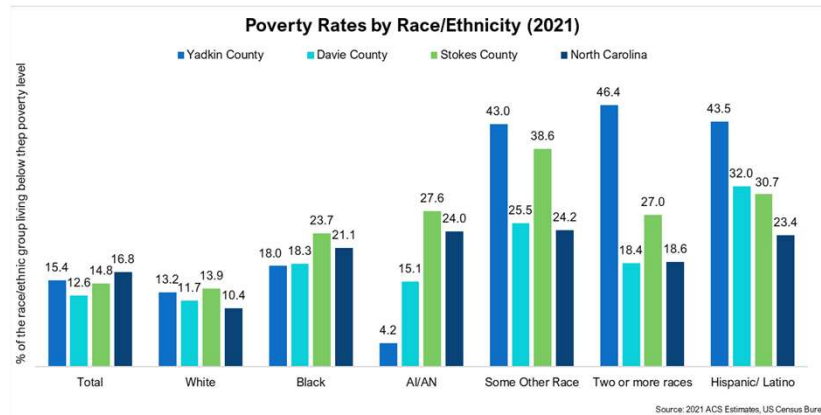
POVERTY

- Although the poverty rate in Yadkin County is lower than it was in 2015 it remains higher compared to NC.
- In 2021, an estimated 5,685 Yadkin County residents lived below the federal poverty level (\$26,500 for a 4-person family/household).



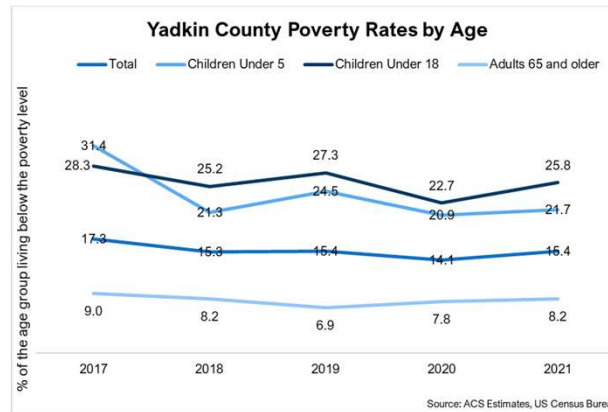
POVERTY

BIPOC residents, especially Hispanic/Latino people, are more likely to live in poverty compared to white residents.



POVERTY

Children, especially those under age 5, are more likely to live below the poverty level.



HOUSING

According to 2021 estimates, 76% of Yadkin County housing units were owned and 24% were rented units. 13% of housing units were vacant.

In 2021 the average gross rent was \$643 per month, higher than it was in 2010 (\$526) but still much lower than the NC average of \$988.

Among rented housing units in 2021, 55% were cost burdened. Comparable figures are 47% in Davie, 44% in Stokes, and 46% statewide.

The average monthly mortgage cost has also risen slightly, from \$1,018 in 2010 to \$1,025 in 2021. The average mortgage cost in NC was \$1,397 in 2021.

Among owned units with mortgages, 20.5% were cost burdened in 2021, compared to 24% in NC, 22% in Davie, and 24% in Stokes.

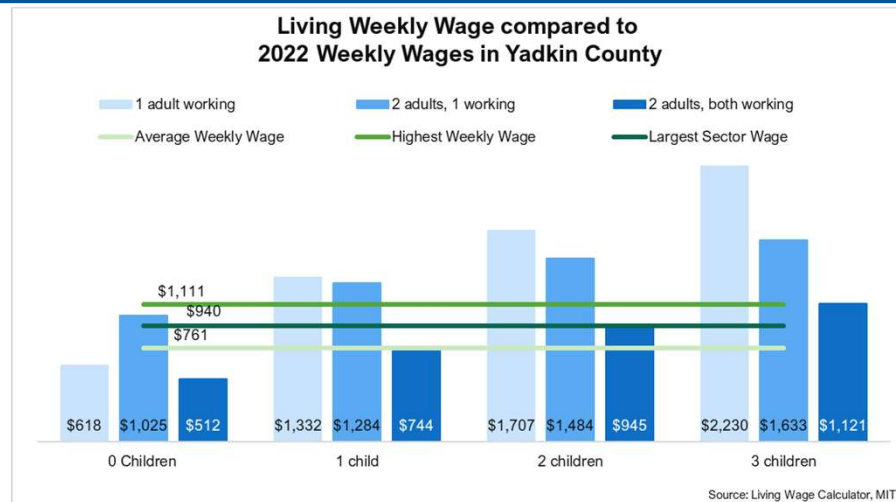
In 2021, 22% of housing units were mobile homes, 19% were built before 1959, 16% used fuel oil, kerosene, coal, coke or other fuels for heating. Less than 1% lacked complete plumbing or kitchen facilities or heat.

Source: ACS Estimates

It's worth noting that these figures likely do not reflect the recent and sometimes dramatic increases in housing and rental costs.

Cost burdened is typically defined as the housing costs more than 30% of the renter's monthly income.

LIVING WAGE



MIT has produced a Living Wage Calculator. "The living wage is the minimum income standard that, if met, draws a very fine line between the financial independence of the working poor and the need to seek out public assistance or suffer consistent and severe housing and food insecurity. In light of this fact, the living wage is perhaps better defined as a minimum subsistence wage for persons living in the United States."

The bars in the chart represent the estimated living wage for Yadkin County, based on the number of adults bringing in income and the number of children in the family. So, looking at the first three bars, the pale blue bar indicates that one working adult with no children to support would need to make \$618 a week to earn what would be considered a living wage. Then in sky blue, if there are two adults in a household, one of them working and with no children to support, that working adult would need to earn \$1,025 a week to earn a living wage. And in medium blue is a household with two working adults and no children, each adult would need to earn \$512 to hit the living wage threshold.

The light green line in the chart represents the average weekly wage earned by Yadkin County employees in 2022: \$761. The darker green line is the highest weekly wage (earned by the 1.5% who are in the finance and insurance sector): \$1,111. And the darkest green represented the largest sector, Manufacturing, with a weekly wage of \$940 in 2022.

COST OF LIVING (BASED ON 2020 DATA)

To achieve a modest, adequate standard of living and pay for housing, food, childcare, transportation, health care, other necessities, and taxes, Yadkin County individuals and families would need to earn:

Yadkin County	Monthly Total	Annual Total
1 adult, no children	\$2,784	\$33,411
1 adult, 1 child	\$4,093	\$49,120
1 adult, 2 children	\$4,987	\$59,849
1 adult, 3 children	\$6,093	\$73,122
2 adults, no children	\$3,719	\$44,633
2 adults, 1 child	\$5,034	\$60,403
2 adults, 2 children	\$5,928	\$71,139
2 adults, 3 children	\$6,862	\$82,340

Average monthly income (2022) = \$3,844
(based on average weekly wage)

Average annual income (2022) = \$39,572
(based on average hourly wage for 2080 hours per year)

Median Family Income (2021) = \$66,512

Median Household Income (2021) = \$51,348

Source: Family Budget Calculator from the Economic Policy Institute.

<https://www.epi.org/resources/budget/>

Income data from NC Dept of Commerce and ACS Estimates.

The source does a lot of fiddling (though methodical and thorough and they can explain why they did what they did) and combining of data and looking at percentiles and making some assumptions. And at this point it doesn't take inflation into consideration.

FOOD INSECURITY

- In SY19-20 (the last year for which data is available from NC DPI) 57% of students in Yadkin County Schools were determined to be “economically disadvantaged” and qualified for free- or reduced-cost school meals.
- As of January 2023, nearly 2,600 households comprised of more than 5,140 individuals (36% of them under the age of 18) were receiving Food and Nutrition Services.
- Feeding America estimates that approximately 13% of the Yadkin County population was food insecure in 2021; the rate is slightly higher among children, 14% of whom were estimated to be food insecure in 2021.
- Food insecurity is more prevalent in Yadkin County compared to Davie County but less common than in Stokes County or in NC as a whole.

Food insecurity refers to [USDA's measure](#) of lack of access, at times, to enough food for an active, healthy life for all household members and limited or uncertain availability of nutritionally adequate foods. Food insecure children are those children living in households experiencing food insecurity. Food insecure households are not necessarily food insecure all the time. Food insecurity may reflect a household's need to make trade-offs between important basic needs, such as housing or medical bills, and purchasing nutritionally adequate foods.

Sources: Department of Public Instruction; DSS Management Assistance/UNC-CH School of Social Work

ECONOMIC ISSUES: COMMUNITY SURVEY RESPONSES

- Low income/poverty ranked 2nd on the list of issues that had the greatest impact on quality of life in Yadkin County, as identified by 59% of respondents.
- Higher paying employment was ranked as the #1 area most needing improvement in Yadkin County, with 35.5% of respondents choosing it. Employment and employment resources was selected by 24% of respondents. Housing was chosen by 22%.

EDUCATIONAL
ATTAINMENT

LITERACY

EARLY CHILDHOOD

SCHOOLS

EDUCATION ACCESS & QUALITY

EDUCATIONAL ATTAINMENT

14% of the Yadkin County population over the age of 25 has less than a high school education, higher compared to NC (11%).

36% graduated from high school (or equivalency) and sought no further education, compared to 22% across NC in 2021.

14% of the population over age 25 has a bachelor's degree or higher, compared to 33% in NC.

The high school drop-out rate is typically quite low in Yadkin County, with less than 5 students leaving school before graduation each school year.

88.5% of Yadkin County high school seniors graduating in SY22-23 did so within four years: rates are highest among AG students (>95%) and lowest among students with disabilities (79%).

According to estimates from the National Center for Education Statistics, 26% of Yadkin County adults are at or below the lowest level of literacy and 38% are at or below the lowest level of numeracy.

Source: 2021 ACS Estimates, NC DPI

Data is from the Program for the International Assessment of Adult Competencies (based on 2021, 2014 and 2017 surveys) at the National Center for Education Statistics.

Compared to Davie, Stokes, NC and the US Yadkin County has a higher percentage of adults at or below level 1 literacy AND numeracy.

LITERACY

Below level 1 requires only basic vocabulary knowledge, and the reader is not required to understand the structure of sentences or paragraphs. Can read brief continuous texts on familiar topics to locate a single piece of information without competing information and the requested information is identical to the information in the question or directive. Tasks below level 1 do not make use of any features specific to digital texts.

Level 1 requires the adult to read relatively short digital or print texts (continuous, non-continuous or mixed) to locate a single piece of information that is identical or synonymous with the information given in the question or directive. Little competing

information is present. Knowledge in recognizing basic vocabulary to determine the meaning of sentences and paragraphs.

NUMERACY

Below Level 1: requires simple processes of counting, sorting, performing basic arithmetic operations with whole numbers or money; recognize common spatial representations in concrete, familiar contexts with explicit mathematical content.

Level 1: basic mathematical processes in common concrete contexts, one step processing involve counting, sorting, basic arithmetic, simple percents, simple or common graphical or spatial representations.

SCHOOLS

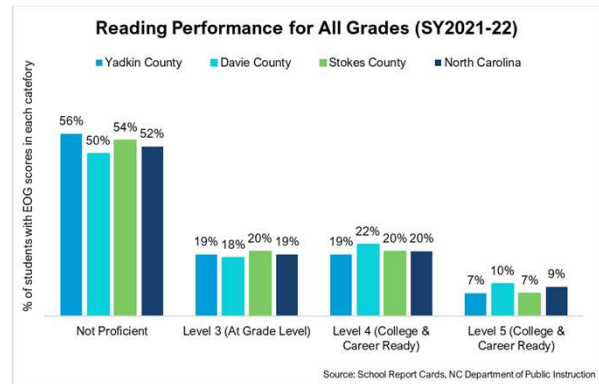
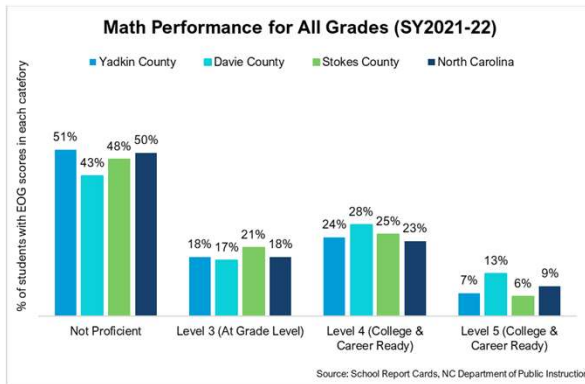
- There are 14 public schools in Yadkin County: 8 elementary schools, 2 middle schools, 2 high schools, 1 early college, and 1 alternative school.
 - 5,091 students were enrolled in the SY21-22 school year; enrollment has declined every year since at least SY07-08.
- There are three religiously affiliated private schools in Yadkin County, with approximately 62 students enrolled in SY22-23.
- The Yadkin County school system is the second largest employer in the county.
- The average per pupil expenditure - \$12,352 – was higher in Yadkin County in SY21-22 compared to NC (\$12,352) and Davie County (\$11,264) and lower compared to Stokes County (\$13,217).

Source: various departments of NC Department of Public Instruction

State based expenditures make up the largest portion of per student spending in all locations (\$8,143); in Yadkin County federal funding is the second largest segment (\$2,441) and local spending is the smallest (\$1,768).

EDUCATIONAL PROFICIENCY

More than half of students at all grade levels in Yadkin County were not proficient in reading or math in SY21-22. Consider this data within the context of COVID and its impacts on learning and the educational environment.



SCHOOL DISCIPLINE AND SAFETY

- In SY21-22, 359 students were given short-term suspensions. Compared to Davie County, Stokes County and NC as a whole, Yadkin County tends to demonstrate a lower rate of STS per 100 students.
- Long-term suspensions and expulsions are rare in Yadkin County.
- The number of violent or criminal acts that occur on school property fluctuates on a yearly basis in Yadkin County and was higher compared to the state rate in SY17-18 through SY21-22.
- In SY21-22, 57 reportable acts were committed: possession of a controlled substance (31), possession of alcohol (9) were most common followed by possession of a weapon (6) and sexual offense (6).

Short term = up to 10 days

Long term = 11 or more days

Sources: Department of Public Instruction

CHILD CARE

- As of April 2023, there were 23 licensed Child Care Centers in Yadkin County with a total enrollment of 690 out of 1,443 licensed slots.
- 2 licensed Family Child Care Homes were operational as of April 2023, with 12 children enrolled out of 16 licensed slots.
- Child care options ranked third among the list of services needing improvement in Yadkin County among respondents to the Community Health Survey.
- According to 2021 estimates, 410 Grandparents in Yadkin County live with their own grandchildren under the age of 18: 53% (216) are financially responsible for those grandchildren.
 - 72% were White and 25% were Black/African American
 - 58% were female
 - 41% were still in the labor force
 - 28% had a disability
 - 25.5% lived below the poverty level
 - 34% had no parent of the grandchild(ren) present

Source: NC Division of Child Development, ACS Estimates

16 of the 23 centers were 5-star centers, and 4 were 4-star centers.

Responsible means they are financial responsible for the child(ren)'s basic needs: food, shelter, clothing, day care.

The availability of childcare was identified as a service issue by 36% of respondents.

CRIME & VIOLENCE

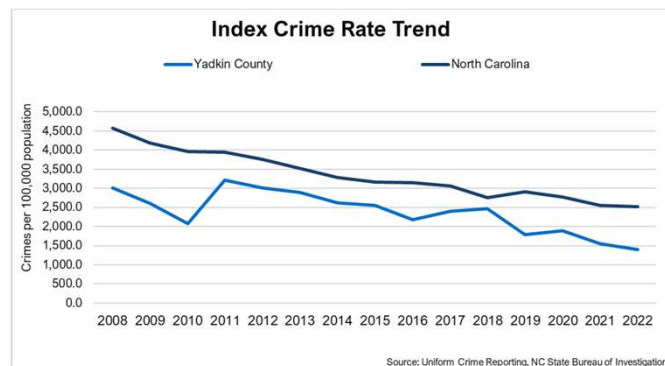
TRANSPORTATION

RECREATION

SOCIAL & COMMUNITY CONTEXT

CRIME AND VIOLENCE

- The crime rate in Yadkin County has fallen from a high point in 2011 and has remained lower compared to NC over the entire period presented below.
- In 2022, there were 60 violent crimes (aggravated assault was most common) and 449 property crimes (larceny was the most common) reported by the Yadkin County Sheriff, Jonesville PD, Yadkin PD, and Boonville PD combined.



Larceny = theft of property without the use of force.

Note that crime rates are missing at the source for Davie and Stokes in recent years and so they are not graphed.

CRIMINAL ACTIVITIES

In 2018-2022 in Yadkin County:

- A total of 811 arrests were related to the sale/manufacture or possession of drugs an average of 162 per year.
 - 39% were related to “other dangerous drugs” (such as barbiturates and amphetamines)
 - 28% were related to marijuana
 - 27% were related to opium or cocaine
 - 7% were related to synthetic narcotics (such as Demerol, methadone)
- 197 arrests were for driving under the influence
- Between 2018 and 2021, one clandestine methamphetamine lab bust occurred in Yadkin County.

County-level crime data is really lagging at the source, the SBI. It’s not clear why it hasn’t been published since 2017; the site just says “not available at this time” and published state-level data.

Source: Dept of Public Safety - State Bureau of Investigation

DOMESTIC VIOLENCE AND SEXUAL ASSAULT

- In FY21-22, 344 individuals filed domestic violence complaints with YVEDDI's Domestic Violence Sexual Assault program, an increase from 241 clients in FY20-21 but lower than the 410 filing in FY19-20.
 - Those clients were provided a wide range of services; the most frequent of which were referrals and "court".
 - The local domestic violence shelter was full on 0 days in FY21-22.
- Between 2008 and 2022 there were 11 domestic violence-related homicides in Yadkin County.
- In FY21-22, 48 individuals filed sexual assault complaints with the agency, 16 clients filed complaints in FY19-20 and 12 in FY20-21.
 - The majority of reported assaults were classified as rape and the most common type of offender was boyfriend/girlfriend/partner.

Source: NC Council for Women, data submitted by grantees of the program: YVEDDI.

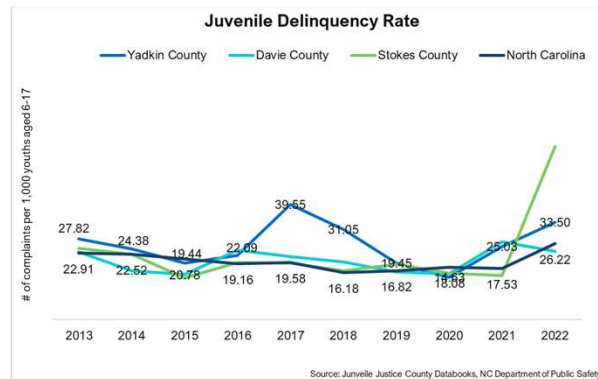
CHILD ABUSE

- In FY21-22, 144 reports of child abuse or neglect were investigated, fewer than any other of the previous 15 fiscal years.
 - 9 (6% of investigated reports) were substantiated (more than the previous three fiscal years): 5 were determined to be abuse, 4 were substantiated as neglect.
 - 5 needed services, another 60 had services recommended.
 - 12 were unsubstantiated and 58 were not recommended services.
- Among the substantiated cases:
 - 100% were white non-Hispanic, two-thirds were female, 55.5% were aged 6-12

DSS Management Assistance data portal from UNC-CH School of Social Work.

JUVENILE JUSTICE

- The Yadkin County juvenile delinquency rate has been quite variable over time but was higher compared to NC in the most recent two years.
- 12 juveniles were detained in 2022, more than in any year since 2013.
- 203 were served by community programs (e.g. JCPC), more than in any year since 2013.
- Transfers to Superior Court are rare.



Delinquent = Any juvenile between 6 and not yet 16 who commits an offense that would be a crime under state or local law if committed by an adult.

COMMUNITY ISSUES: COMMUNITY SURVEY RESPONSES

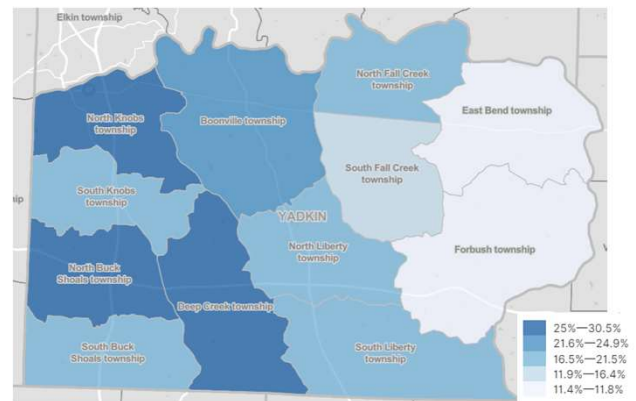
- Child neglect and abuse ranked as the third most important issue affecting quality of life (25%). A lack of community support was chosen by 24% of respondents.
- Domestic violence was chosen by 10% of respondents.
- Crime prevention was identified by 17% of respondents as an issue people need more information about; 6% selected domestic violence prevention from this list.
- Positive teen activities ranked second on the list of services needed improvement, as identified by 27% of respondents. An addition 10% selected healthy family activities and recreational facilities.

DSS Management Assistance data portal from UNC-CH School of Social Work.

INTERNET ACCESS

- According to 2021 estimates, 12% of Yadkin County households have no computing device.
- 13% of households used a smartphone as their only type of computing device.
- 21% of households did not have an internet subscription.
- 11% used only their cellular data plan for internet access.
- Among households with a household income less than \$20,000, 35% did not have an internet subscription.

% of Households with No Internet Access, 2021



Source: 2021 ACS Estimate, US Census Bureau

In this map, the darker colors indicate higher percentages.

TRANSPORTATION

- In 2021 an estimated 2% of owned housing units and 12% of rented housing units do not have a vehicle available. Householders over the age of 65 are more likely than other age groups to lack a vehicle.
- 52% of workers aged 16 and older traveled outside of Yadkin County for work in 2021; an additional 1% travel outside of NC for work.
 - 84% drove alone to work, 9% carpooled
 - 4.5% worked from home
 - 3% walked or used a bicycle, taxi, motorcycle or other form of transportation
- Road maintenance was identified as a service needing improvement by 18% of respondents to the Community Health Survey. Transportation options was selected by 8% of respondents.

2023 YADKIN COUNTY

COMMUNITY STAKEHOLDER SURVEY

1. What do you feel are the most important characteristics or qualities of a “healthy community”. Please provide up to three responses.
2. What are some examples that come to mind to demonstrate how Yadkin County is a healthy community?
3. In the past 5 years, have there been any changes in the **needs** of the people who use the services your agency or organization provides?
4. Below are listed some common barriers that might prevent people in Yadkin County from accessing your services. Please rate whether they are a major, moderate, minor barrier, or not a barrier at all.

	Major Barrier	Moderate Barrier	Minor Barrier	Not a Barrier
communication difficulties (language barriers, access to phone, email or websites)				
cost/affordability				
cultural differences				
disability, mobility issues, lack of assistive devices or accommodations				
education/literacy/reading level				
fear or embarrassment				
homelessness or housing issues				
lack of child care				
lack of employment				
lack of family/community support				
lack of knowledge about our services				
lack of information about health issues				
Lack of reliable, affordable transportation				
medical or health issues				
scheduling difficulty (appointment availability, office hours insufficient or inconvenient)				
staffing issues				
people do not believe services will help				
religious beliefs				
uninsured/insurance doesn't cover what's needed				

5. What does your agency do to help overcome the barriers faced by people in Yadkin County?

6. Below are listed 14 issues. Please rate whether each one is a major problem, a moderate problem, a minor problem, or not a problem at all in Yadkin County.

	Major Problem	Moderate Problem	Minor Problem	Not a Problem
Substance Use				
Low income/poverty				
Neglect and abuse				
Lack of/inadequate health insurance				
Lack of paying employment				
Lack of positive teen activities				
Lack of child care options				
Lack of counseling/mental health services				
Obesity/Overweight				
Cancer				
Mental Health				
Diabetes				
Heart Disease/Heart Attack				
Stress Management				