2021-2022 Community Health Needs Assessment

PASQUOTANK COUNTY, NORTH CAROLINA







ALBEMARLE REGIONAL HEALTH SERVICES Partners in Public Health

Dear Community Member,

Your partnership in the Community Health Assessment process is important to the health of our residents. Albemarle Regional Health Services, Sentara Albemarle Medical Center, Vidant Bertie Hospital, Vidant Chowan Hospital, Vidant Roanoke Chowan Hospital and numerous other community partners continue to work together to provide this comprehensive report which illustrates the health status, health needs and improvements, as well as health resources in our communities. This document represents much time and effort by local health department staff, hospital staff, Healthy Carolinians members, and community members like you.

Pasquotank Perquimans

> Camden Chowan Currituck

Bertie

Gates

Hertford

Factors such as the rural landscape of our counties and the diversity of our population continue to make the Albemarle region an exciting place to live, work, and learn, as well as create challenges in our systems of service delivery which drive the need for a continuum of programs. Through the Community Health Assessment process, we are allowed to analyze and prioritize our community's needs and strengths *with* the people of the eight counties.

Strategies are implemented to target needs identified in the 2021 Community Health Assessment priority health rankings selection in order to create increased opportunities for healthier outcomes in our communities. Relationships will continue to be formed and strengthened as we join together to address the needs. This document provides data and steps to ensure we empower our communities to seek available and potential resources.

Thank you for your continued interest in the health of our communities.

Sincerely yours,

R. Battle Betts, Jr., MPA Health Director Albemarle Regional Health Services



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Contact Information

Albemarle Regional Health Services plans to share results from the Community Health Needs Assessment (CHNA) during meetings to county and city governments, local civic groups, faith organizations, business leaders, and through other community outreach events. The CHNA documents can be found on the Albemarle Regional Health Services website at www.arhs-nc.org. Efforts will be made with other agencies and local government, including county website, to provide links to the information. ARHS also plans to work with the local newspapers to provide news releases to the public about the findings made in each county. Healthy Carolinians of the Albemarle members will have access to the information found in the CHNA at their disposal to use in the community including evidence-based strategies, grant proposals, and program planning and implementation.

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Acknowledgements

This report is the culmination of significant work led by Albemarle Regional Health Services, Sentara Albemarle Medical Center, Vidant Chowan Hospital, Vidant Bertie Hospital, Vidant Roanoke Chowan Hospital, and Vidant Health, in conjunction with key stakeholders from the community.

Support of this document was also provided by many other entities. Albemarle Regional Health Services, Sentara Albemarle Medical Center, Vidant Chowan Hospital, Vidant Bertie Hospital, Vidant Roanoke Chowan Hospital, and Vidant Health greatly appreciate the help of our vital community stakeholders.

Special thanks go to Amanda Betts for proofing/editing this document.

Executive Summary

Albemarle Regional Health Services and community partners are pleased to present the 2021 Community Health Needs Assessment, which provides an overview of the significant community health needs identified in Pasquotank County, North Carolina.

The goal of this report is to offer a meaningful understanding of the most pressing health needs across Pasquotank County, as well as to guide planning efforts to address those needs. Special attention has been given to the needs of vulnerable populations, unmet health needs or gaps in services, and input gathered from the community.

Findings from this report will be used to identify, develop and target initiatives to provide and connect community members with resources to improve the health challenges in their communities.

The 2021 Community Health Needs Assessment was developed through a partnership between Albemarle Regional Health Services, Sentara Albemarle Medical Center, Health ENC and Conduent Healthy Communities Institute, with The Duke Endowment serving as the fiscal sponsor.

Vision Statement

The Public Health professionals and programs of Albemarle Regional Health Services are dedicated to disease prevention and the promotion of a healthy environment to reduce morbidity, mortality, and disability through quality service, education, and advocacy.

Partnerships/Collaborations

Partners in the 2021 CHNA process for Albemarle Regional Health Services include:

- Albemarle Regional Health Services
- Gates Partners for Health
- Healthy Carolinians of the Albemarle
- Sentara Albemarle Medical Center
- Three Rivers Healthy Carolinians
- Vidant Bertie Hospital
- Vidant Chowan Hospital
- Vidant Roanoke Chowan Hospital

Local Healthy Carolinians partnerships utilized grass root efforts to ensure community citizen's opinions were heard and demographic characteristics of participants were considered to ensure that results portrayed an accurate representation of each county as a whole.

Regional/Contracted Services

The 2021-2022 Pasquotank County CHNA was supported by Health ENC (HealthENC.org), a collaborative initiative of health departments and hospitals in eastern North Carolina that provides support for community needs assessments statewide.

Collaborative Process Summary

For the CHNA, Albemarle Regional Health Services developed a CHNA Leaders Team to help lead the process. The CHNA Leaders Team included county residents as well as representatives from various local agencies and organizations from throughout the eight county service area. The CHA Leaders Team members brought a wealth of knowledge and expertise on a variety of issues and populations in the county, and the broad range of backgrounds ensured objectivity throughout the prioritization process. The CHA Leaders Team met three times between April 2021 and July 2021 to review strategies for conducting primary data collection for the CHNA, stay informed of the process, and provide feedback.

Collaboration between Albemarle Regional Health Services and other local partners made this assessment possible. Many collaborators spent numerous hours attending meetings, collecting survey data, and attending presentations. These partners also played an active role in the priority selection process.

Key Findings

The CHNA findings are drawn from an analysis of an extensive set of secondary data (over 100 indicators from national and state data sources) and in-depth primary data from community leaders, health and non-health professionals who serve the community at large, vulnerable populations, and populations with unmet health needs. Through a synthesis of primary and secondary data, several significant health needs were identified for Pasquotank County, as displayed in Table 1.

Table 1. Significant Health Needs
Access to Health Services
Cancer
Diabetes
Economy
Exercise, Nutrition & Weight
Heart Disease & Stroke
Behavioral Health
Substance Abuse

Health Priorities

For Healthy Carolinians of the Albemarle (Camden, Currituck, Pasquotank and Perquimans Counties) health priorities chosen were, in no particular order:

- Healthy Lifestyle Behaviors
- Access to Healthcare
- Mental Health/Substance Misuse

Next Steps

This report describes the process and findings of a comprehensive health needs assessment for the residents of Pasquotank County, North Carolina. The prioritization of the identified significant health needs will guide community health improvement efforts of Pasquotank County. Following this process, Albemarle Regional Health Services and community partners will outline how they plan to address the prioritized health needs in their community improvement plans.

Chapter 1 Introduction

Description of County

Pasquotank County is located in northeast NC and is part of the Coastal Plain region. It is made up primarily of flatlands and contains miles of waterfront with the Little River to the west, the Albemarle Sound to the south, and the Pasquotank River to the east. The county covers 289 square miles, 227 of land and 62 of water.

Elizabeth City is the county seat. Other towns include Nixonton and Weeksville. Norfolk, VA is the nearest metropolitan area, approximately 37 miles to the north. Raleigh, NC is about 166 miles to the west, and Wilmington, NC is 214 miles to the southwest. Adjacent to Pasquotank County are Perquimans County to the southwest, Camden County to the east, and Gates County to the northwest.

US Highway 17 runs through Elizabeth City northeast toward the Outer Banks and southwest toward Wilmington; it joins US 64, which leads west to Raleigh. Also running through the county seat is US Highway 158. This highway runs south to the Albemarle Sound and the Outer Banks and northwest to Gates County. The nearest interstate highway is I-95, approximately 30 miles west of the county. The nearest commercial airport to the county is the Norfolk International Airport in Norfolk, VA, located 53 miles from Elizabeth City. The Newport News/Williamsburg International Airport in Newport News, VA is 80 miles from Elizabeth City, and the Pitt-Greenville Airport, in Greenville, NC, is 97 miles from Elizabeth City. The closest stop for any passenger railway system is in Norfolk, VA. The Greyhound bus line has a stop in Elizabeth City.

Pasquotank County was originally inhabited by the Pasquotank Indians and named for the Algonquian Indian word pasketanki, meaning "where the current divides or forks". There are two rivers flanking the county, the Pasquotank River and the Little River, which defined transportation centers, provided fish, and made it possible to take the settler's products directly to Caribbean ports and to the other colonies. The abundance of water also aided the farmers with their crops of tobacco, cotton, wheat and corn.

The first permanent settlers to North Carolina were Virginians, drawn to the region by reports of fertile bottom lands, abundant timber resources, and a favorable climate. By the late 1800s, a new wave of prosperity swept over Pasquotank, with blooded livestock appearing soon after, followed by new crops of soybeans, lespedeza and hybrid corn. Beef production and dairying was added to the hog- and sheepraising. Machine methods in farming became necessary due to lack of good labor following the depression, and revolutionized the county's agriculture. Concrete grain elevators are now common sights about the countryside and farming is one of the county's most profitable activities. The waterways of Pasquotank County are one of its definitive characteristics. Sitting on the northern portion of the Albemarle Sound and bordered by two rivers, the county is an attractive destination for shipping, boating, fishing, diving and other water-related activities. Elizabeth City has become a favorite stop on the Intracoastal Waterway and combines a vast history, integrated economy, and diversified culture. A revitalization of the town included new docks and boat facilities, shops and a museum which interprets over 400 years of local history. Many

changes have been brought to the county over the years, but in basic ways Pasquotank county and its people are still similar to their forefathers and inherited tradition.

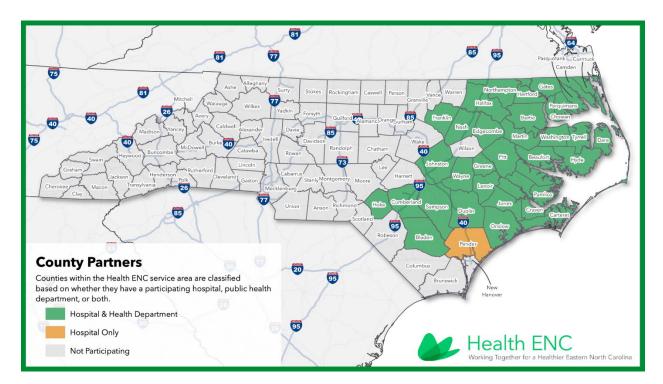
Overview of Health ENC

Health ENC is a collaborative initiative of health departments and hospitals in eastern North Carolina. The collaborative serves 35 counties with 34 participating health departments and 31 participating hospitals. The collaborative uses a shared approach for primary and secondary data collection to produce a comprehensive Regional Community Health Needs Assessment every three years that can be used to partially satisfy requirements for North Carolina Local Health Department Accreditation and the Internal Revenue Service requirement under the Patient Protection and Affordable Care Act for charitable hospitals.

Overview of Community Health Needs Assessment Process

The Community Health Needs Assessment Process gathers population health data that county health departments, hospitals, community groups can use to

- Identify key health needs/issues in eastern North Carolina Communities
- Develop strategies and action plans based upon data aim to improve the quality of life
- Collaborate to maximize results by having a collective impact in the region
- Maintain local control and decision-making about the choice of health priorities and interventions, and
- Improve health, partnerships and communication.



Participating Health ENC Counties

Health ENC serves the following counties: Beaufort, Bertie, Bladen, Camden, Carteret, Chowan, Craven, Cumberland, Currituck, Dare, Duplin, Edgecombe, Franklin, Gates, Greene, Halifax, Hertford, Hoke, Hyde, Johnston, Jones, Lenoir, Martin, Nash, Northampton, Onslow, Pamlico, Pasquotank, Pender, Perquimans, Pitt, Sampson, Tyrrell, Washington, and Wayne Counties.

Health Data Sources

Primary Data – Community Survey

Survey Methodology/Design

Health ENC Steering Committee structured the primary data collection for participating health departments and hospitals. The primary data used in the Community Health Needs Assessments included (1) a community survey that could be distributed online or by a paper submission and (2) focus group discussions in some counties. The Health ENC Steering Committee did not encourage focus groups for the 2021-2022 Community Health Needs Assessments because of the global COVID-19 pandemic. However, some counties were able to hold focus group discussions safely despite significant challenges in collecting enough survey responses to accurately represent their community's population.

Survey Design:

The Health ENC Steering Committee developed a primary survey to gather information from community members about their health concerns. A workgroup of Steering Committee members convened and examined survey questions utilized in the 2018-2019 Community Health Needs Assessment. The workgroup also examined data readily available from secondary data sources. The workgroup focused on developing survey questions to obtain data from community members which was not readily available in the secondary data or where secondary data was weak. In addition, workgroup members worked to combine questions where appropriate and to be more inclusive in the wording of response choices. The Steering Committee reviewed the sample survey questions and made a few additional revisions to assure the survey only contained questions where community input was needed to guide health priority selection and strategic action planning.

Once the survey questions were finalized, the Steering Committee decided on targets for each county. Because the survey was a convenience sample that was being conducted during a global pandemic (COVID-19), each county was asked to complete a minimum of 300 surveys with representation from as many community groups as possible to assure sufficient sampling to represent the full community. The target of 300 surveys per county was identified through previous work with data analysis vendors who examined each county's population and confirmed this number should provide an accurate reflection of the total county's population, if responses reflected the population demographics equally.

The surveys were made available to the public from April 1 – June 30, 2021. Surveys were made available in paper format and electronically using the REDcap software. Health ENC partners received feedback throughout the survey period on the age, gender, race/ethnicity, and language of survey respondents to assist them in promoting the surveys to various community members within their counties. At the completion of the survey period, 16,661 English surveys and 502 Spanish surveys were completed. Most counties did not have an equally distributed response to surveys to represent their entire county's population. As a result, survey responses should be considered as only one component of information utilized to select health priorities. The most underserved populations' feedback is not adequately reflected

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in most surveys. Health ENC partners were encouraged to include key stakeholders, who served these populations, in the health priority selection process to assure many of their clients' health needs were considered.

The Pasquotank County survey was comprised of 25 unique questions designed to collect information about key health and wellness areas indicated below. Surveys were made available publicly online and in paper format at a variety of community stakeholder locations between April 1 and June 30, 2021. Community locations for survey distribution were selected to enrich participation representation by historically underrepresented subgroups including minority populations, low income and elderly residents, and males. A total of 403 survey responses were received across Pasquotank County: 398 in English and 5 in Spanish.

Key Areas Examined

- Quality of life, health behaviors, health perceptions
- Preventative services, exercise, and access to care

County Responses

- 398 Total English (Total in ENC survey =16,661)
- 5 Total Spanish (Total in ENC survey =502)

Secondary Data Sources

The community health/community health needs assessment should provide a comprehensive source of the best available data to improve the lives of people. With a simple search from a smartphone one can access powerful data from reputable sources. The internet and broad-band connectivity have become essential tools for acquiring information and staying informed.

All data starts with a good data source and paying attention to the data sources is a critical factor in the decisions we make using data. Reputable data sources provide original data or complete transparency about the original source. The data source provides enough information about the data to provide context so that the data may be interpreted. The best data sources are current and reliable. Even if the data lag, and perhaps older than a year or more, data trends are often just as important for decision making as a single data point. Changes in definitions and methodology are documented and easily found with the data.

This assessment relies largely on data that are available from the following sources:

- Healthy North Carolina 2030 (HNC 2030) https://schs.dph.ncdhhs.gov/units/ldas/hnc.htm
- N.C. State Center for Health Statistics https://schs.dph.ncdhhs.gov/
- U.S. Census Bureau https://www.census.gov/
- County Health Rankings and Roadmaps https://www.countyhealthrankings.org/

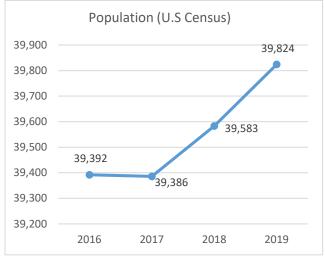
Additional data/data sources that were reviewed for this assessment can be found in the Appendices.

Limitations

- The data presented represents a snapshot of the population, economic and leading health and wellness issues in eastern NC communities
- It includes primary data gathered from community surveys and secondary data from health and other sources.
- This information can be used as a guide for helping communities identify leading health issues in the Health ENC County Region
- Other health issues, data and resources may be available that were not listed here that communities may wish to consider when establishing health priorities

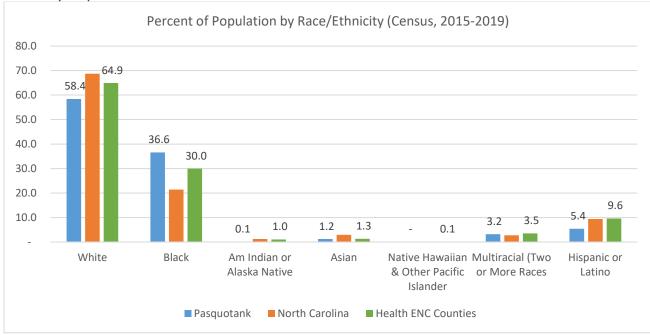
Chapter 2 Demographic Profile

Total Population



• From 2016 to 2019, Pasquotank County's population grew by an estimated 1% to 39,824 persons.

Minority Populations

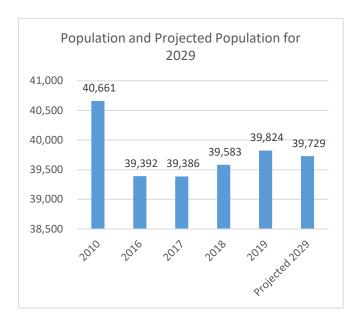


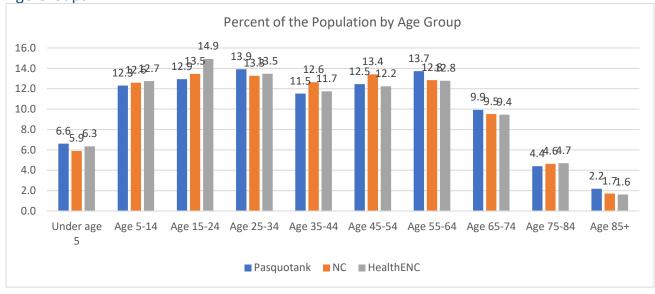
The White population accounts for 58.4% of the total population in Pasquotank County, with the Black or African American population accounting for 36.6% of the total population. The White population in Pasquotank County (58.4%) is less than the White population in North Carolina (68.7%) and slightly higher than the Health ENC counties (64.9%). The Black or African American population in Pasquotank County (36.6%) is higher than the Black or African American population in North Carolina (21.4%) and lower than the Health ENC counties (30.0%). The Hispanic or Latino population comprises 5.4% of Pasquotank County which is significantly higher than North Carolina (9.4%) and Health ENC Counties (9.6%)

Population Growth

 The projected population for Pasquotank County for 2029 is estimated at 39,729 persons.

Note: Population projection for 2029 comes from the NC Office of State Mgmt and Budget Pop Projections. All the other population data is from the Census



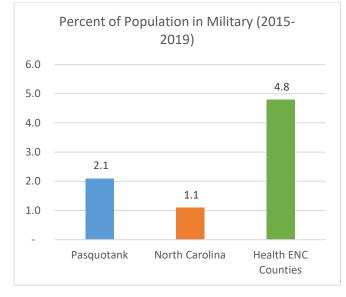


Age Groups

In Pasquotank County, the percent of people between the ages of 55-64 are higher (13.7%) than the Health ENC (12.8%) and N.C. (12.8%).

Military/Veteran Populations

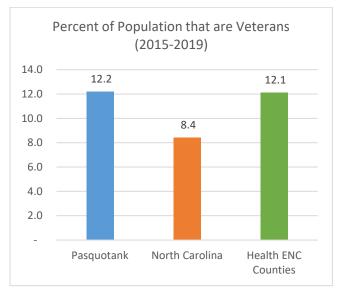
Military Population



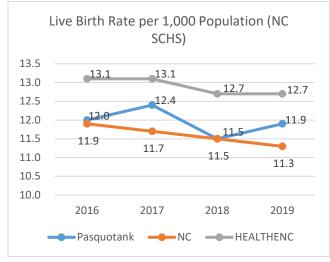
Veteran Population

The veteran population is given as a percent of the civilian population aged 18 years and older and this data is used for policy analyses, to develop programs, and to create budgets for veteran programs and facilities. Pasquotank County has a veteran population of 12.2% in 2015-2019, compared to 8.4% for North Carolina and 12.1% for Health ENC counties.

- The percentage of Military Population in Pasquotank County is 2.1%
- Compared to the counties in Health ENC (4.8%) Pasquotank County has a smaller population, and has a larger population than North Carolina (1.1%)

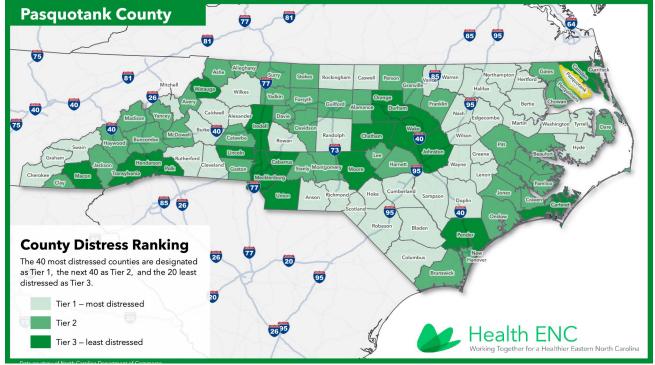


Birth Rates



Birth rates are important measures of population health. The birth rate is usually the dominant factor in determining the rate of population growth; however, population growth is also driven by the age structure of the population (e.g., deaths), immigration and emigration. This figure illustrates that the birth rate in Pasquotank County is the same as the birth rate in North Carolina and lower than the Health ENC Counties.

Chapter 3 Socioeconomic Profile



NC Department of Commerce Tier Designation

The North Carolina Department of Commerce annually ranks the state's 100 counties based on economic well-being and assigns each a Tier designation. The 40 most distressed counties are designated as Tier 1, the next 40 as Tier 2 and the 20 least distressed as Tier 3.

Pasquotank County has been assigned a Tier 1 designation for 2021

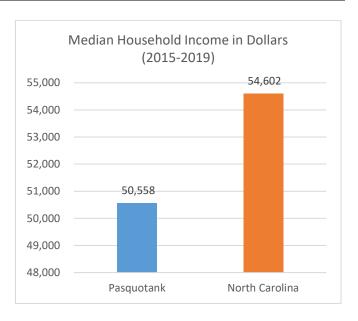
County Tiers are calculated using four factors:

- Average unemployment rate
- Median household income
- Percentage growth in population
- Adjusted property tax base per capita

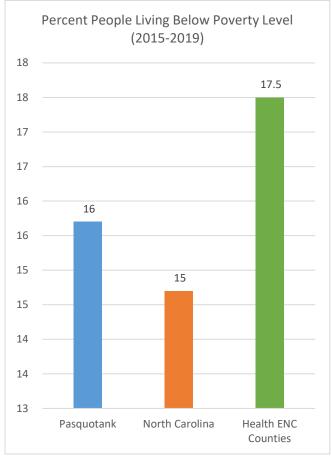
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Income

Median household income reflects the relative affluence and prosperity of an area. Areas with higher median household incomes are likely to have a greater share of educated residents and lower unemployment rates. This figure shows the median household income in Pasquotank County (\$50,558), which is slightly lower than the median household income in North Carolina (\$54,602).



Poverty



Federal poverty thresholds are set every year by the Census Bureau and vary by size of family and ages of family members. A high poverty rate is both a cause and a consequence of poor economic conditions. Children in poverty are more likely to have physical health problems, behavioral problems and emotional problems. Seniors who live in poverty are an especially vulnerable group due to increased physical limitations, medical needs, and social isolation. Persons with a disability are more likely to live in poverty compared to the rest of the population. Without adequate income, individuals with disabilities may not be able to afford necessary expenses, such as rent or mortgage, utility bills, medical and dental care, and food.

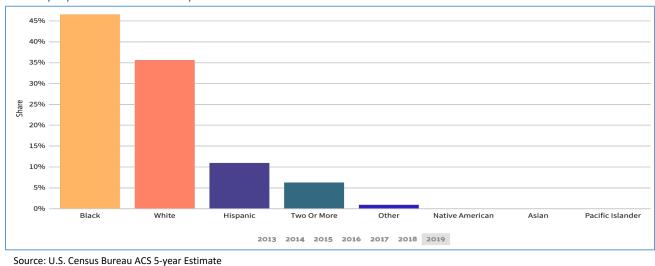
 In Pasquotank County an estimated 16.0% of the population lives below the poverty level, compared to 15.0% of the population in NC and 17.5% for the Health ENC region

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Poverty by Race and Ethnicity

PASQUOTANK

COUNTY



https://datausa.io/profile/geo/pasquotank-county-nc#economy

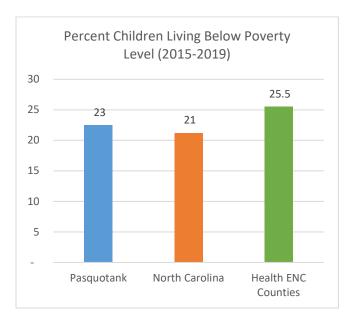
The most common racial or ethnic group living below the poverty line in Pasquotank County, NC is Black, followed by White and Hispanic.

The Census Bureau uses a set of <u>money income thresholds</u> that vary by family size and composition to determine who classifies as impoverished. If a family's total income is less than the family's threshold than that family and every individual in it is considered to be living in poverty.

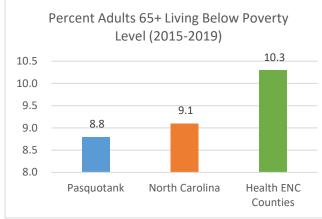
*Data from the Census Bureau ACS 5-year Estimate.

Children in Poverty

• The rate of children living below the poverty level is slightly higher for Pasquotank County when compared with N.C. but slightly lower than the Health ENC Counties



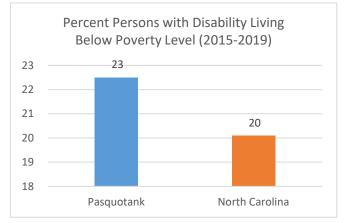
Older Adults in Poverty



Disabled People in Poverty

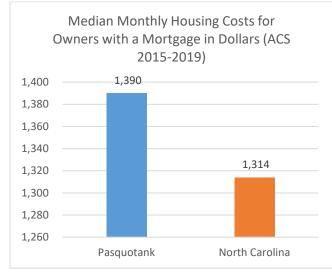
• The percent of disabled people living in poverty in Pasquotank County (23%) is slightly higher than N.C. (20%)

 The rate of adults age 65+ years living in poverty is 0.3% lower in Pasquotank
 County when compared with NC and the Health ENC counties by 1.5%.



Housing

Median Monthly Housing Costs

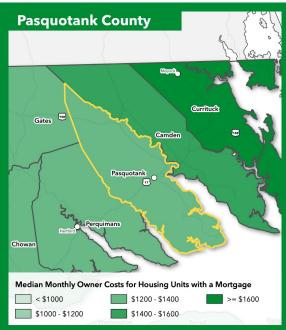


The average household size in Pasquotank County is 2.44 people per household (owners) and 2.64 people per household (renters), which is slightly lower than the North Carolina value of 2.57 people per household (owners) but slightly higher for renters (2.43 people per household).

 In Pasquotank County, the median housing costs for homeowners with a mortgage is \$1,390, which is slightly higher than the N.C. median \$1,314 costs.

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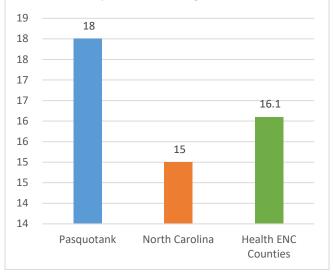




Severe Housing Problems

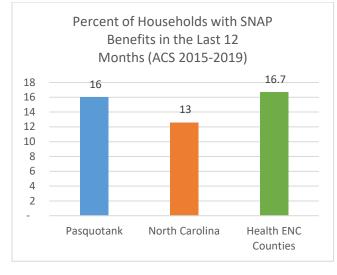
- Safe and affordable housing is an essential component of healthy communities, and the effects of housing problems are widespread.
- Housing problems include overcrowding, high housing costs, lack of kitchen, or lack of plumbing facilities
- Slightly more than 18.0% of households in Pasquotank County have severe housing problems, compared to 15.0% in North Carolina and 16.1% in Health ENC Counties.

Percent with Severe Housing Problems (County Health Rankings 2013-2017)



Food Insecurity

Households with SNAP Benefits



Education

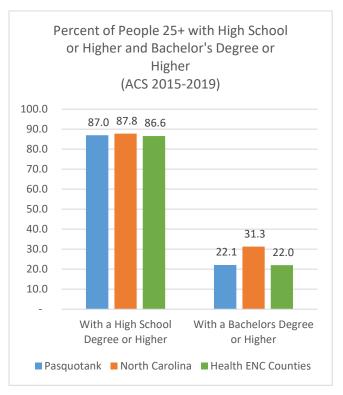
Educational Attainment

Graduating from high school is an important personal achievement and is essential for an individual's social and economic advancement. Graduation rates can also be an important indicator of the performance of an educational system. Having a bachelor's degree opens up career opportunities in a variety of fields and is often a prerequisite for higher-paying jobs.

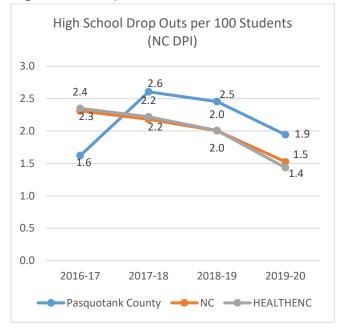
- In Pasquotank County the percent of residents 25 or older with a high school degree or slightly lower was lower (87%) than the state value (87.8%) but slightly higher than the Health ENC region (86.6%)
- Percent with a higher education attainment in Pasquotank County was lower (22.1%) compared to N.C. (31.3%) but marginally than the Health ENC region (22.0%)

The Supplemental Nutrition Assistance Program (SNAP) is a federal assistance program that provides low-income families with electronic benefit transfers (EBTs) that can be used to purchase food. The goal of the program is to increase food security and reduce hunger by increasing access to nutritious food.

This figure shows the percent of households with children that participate in SNAP. The rate for Pasquotank County, 16%, is slightly higher than the state value of 13% but lower than the Health ENC region value of 16.7%.



High School Drop Out Rate

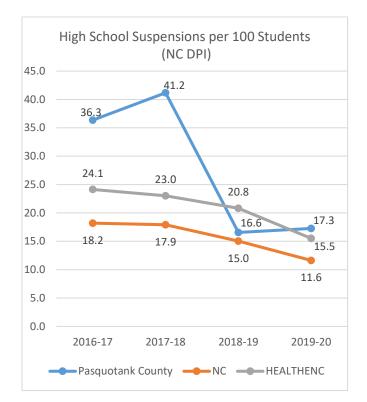


High School Suspension Rate

High school suspension is a form of discipline in which a student is temporarily removed from a classroom and/or school due to a violation of school conduct or code. Higher rates of suspension can be related to high rates of antisocial or delinquent behaviors, which may further contribute to potential future involvement in the juvenile justice system. Additionally, schools with higher suspension rates have higher rates of law or board of education violations and generally spend more money per student.

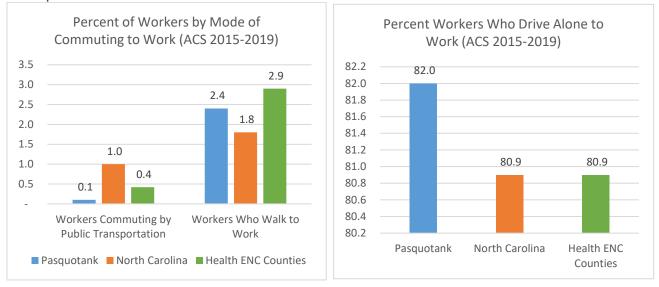
 Pasquotank County's rate of high school suspension (17.3 per 100 students) was higher than North Carolina's rate (11.6) the Health ENC counties (15.5) in 2019-2020 High school dropouts earn less income than high school and college graduates and are more likely to be unemployed. High school dropouts are generally less healthy and require more medical care. Further, high school dropout rates are linked with heightened criminal activity and incarceration rates, influencing a community's economic, social, and civic health.

- Pasquotank County's high school dropout rate was 1.9% in 2019-2020, which was higher than the rate in North Carolina (1.5%) and the Health ENC region (1.4%)
- Since 2017, Pasquotank County's high school dropout rate has been declining



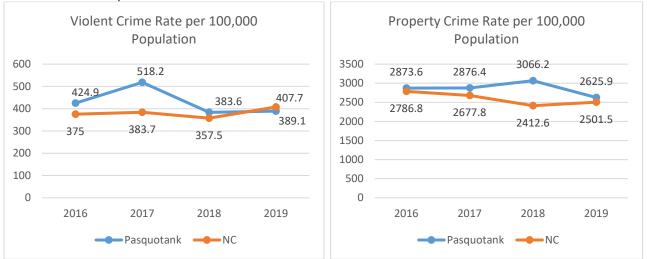
2021-2022 Community Health Needs Assessment

Transportation



Public transportation offers mobility, particularly to people without cars. Transit can help bridge the spatial divide between people and jobs, services, and training opportunities. Public transportation also reduces fuel consumption, minimizes air pollution, and relieves traffic congestion. Walking to work helps protect the environment, while also providing the benefit of daily exercise.

- In Pasquotank County, an estimated 0.1% of workers that commuted to work by public transportation, compared to the state value of 1.0%.
- Approximately 2.4% of workers walked to work, which was higher than the state value of 1.8%.
- An estimated 82% of workers 16 and older drive alone to work, compared to 80.9% in N.C.



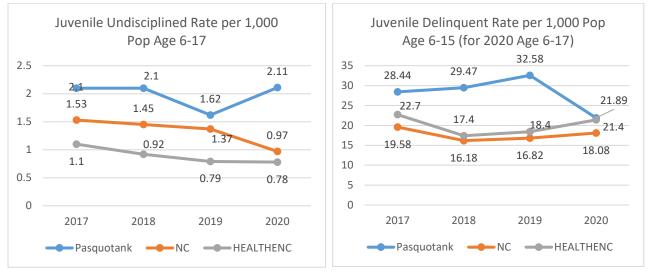
Crime and Safety

Both violent crime and property crime are used as indicators of a community's crime and safety. Violence negatively impacts communities by reducing productivity, decreasing property values and disrupting social services. Violent crime includes four offenses: murder and non-negligent manslaughter, rape, robbery, and

PASQUOTANK COUNTY 2021-2022 Community Health Needs Assessment

aggravated assault. Property crime includes the offenses of burglary, larceny-theft, motor vehicle theft, and arson.

- From 2016 to 2019, the violent crime rate in Pasquotank County decreased from 424.9 to 389.1
- During the same time period, the property crime rate decreased from 2873.6 to 2625.9, which was higher than the N.C. rate



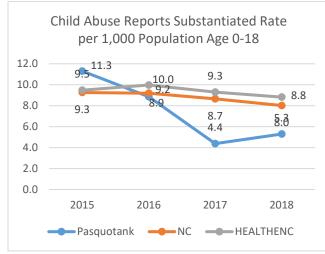
Juvenile Crime

Youth who commit a crime may not gain the educational credentials necessary to secure employment and succeed later in life. Negative peer influences, history of abuse/neglect, mental health issues, and significant family problems increase the risk of juvenile arrest. The juvenile justice system aims to reduce juvenile delinquency through prevention, intervention, and treatment services.

The undisciplined rate describes juveniles who are unlawfully absent from school, regularly disobedient and beyond disciplinary control of the parent/guardian, are regularly found where it is unlawful for juveniles to be or have run away from home for more than 24 hours.

- In 2020, the juvenile undisciplined rate in Pasquotank County (2.11) was higher than the rate in North Carolina (0.97) and the Health ENC region (0.78)
- In 2020, the juvenile delinquent rate for Pasquotank County was higher (21.89) than N.C. (18.1) and the Health ENC region (21.4)

Child Abuse



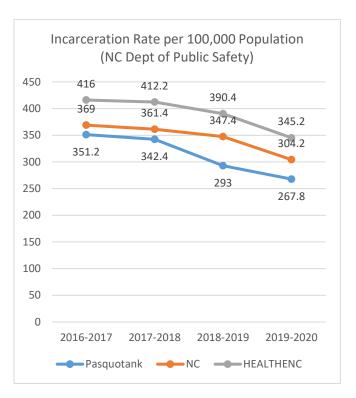
Child abuse includes physical, sexual and emotional abuse. All types of child abuse and neglect can have long lasting effects throughout life, damaging a child's sense of self, ability to have healthy relationships, and ability to function at home, at work, and at school.

 The 2018 child abuse rate in Pasquotank County was lower (5.3 per 1,000 pop.) than N.C. (8.0 per 1,000 pop.) and the Health ENC (8.8)

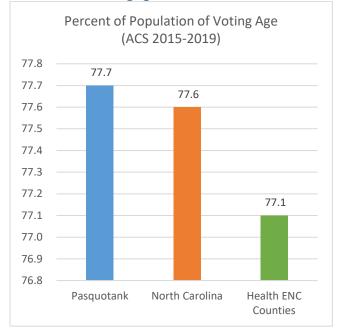
Incarceration

According to the U.S. Bureau of Justice Statistics, approximately one out of 100 adults in the U.S. are in jail or prison. Conditions in jails and prisons can lead to an increased risk of infectious diseases such as tuberculosis and hepatitis C, as well as assault from other inmates. After incarceration, individuals are likely to face a variety of social issues such as employment discrimination, disruption of family relationships and recidivism.

- Over the past four measurement periods, the incarceration rate in Pasquotank County has decreased
- In 2019-2020, the incarceration rate in Pasquotank County was lower (267.8 per 1,000 population) than N.C. (304.2) and the Health ENC region (345.2)



Civic/Political Engagement



Exercising the right to vote allows a community to choose elected officials and hold them accountable. Voting ensures that all citizens have the opportunity to voice their opinions on issues such as the use of tax dollars, civil rights and foreign policy. By voting, individuals shape their communities and influence the next generation of society. A high level of voter turnout indicates that citizens are involved and interested in who represents them in the political system.

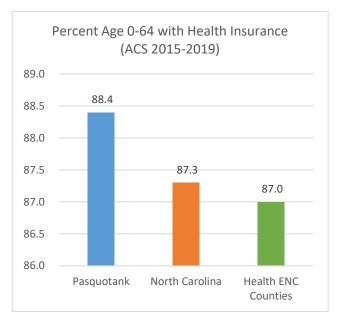
 Pasquotank County has a marginally higher percent of residents of voting age (77.7%) than North Carolina (77.6%) and the Health ENC Counties (77.1%)

Chapter 4 Clinical Care Profile

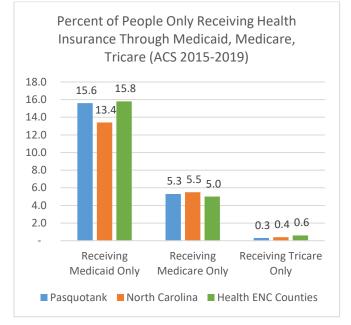
Health Insurance Coverage

Medical costs in the United States are very high. People without health insurance may not be able to afford medical treatment or prescription drugs. They are also less likely to get routine checkups and screenings, so if they do become ill they may not seek treatment until the condition is more advanced, and therefore more difficult and costly to treat.

 The rate of individuals aged 0-64 years old that have health insurance coverage in Pasquotank County is 88.4%, which was higher than the rate for North Carolina (87.3%) and the Health ENC region (87.0%)



Government Health Insurance Only Coverage – Medicaid, Medicare, Tricare

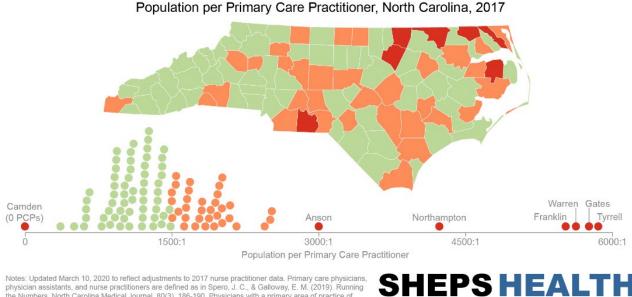


This graph shows the percent of the population only receiving health insurance through Medicaid, Medicare, or military healthcare (TRICARE).

 In Pasquotank County, 15.6% of the population report receives health insurance coverage through Medicaid, 5.3% Medicare and 0.3% Tricare

ORKFORCE

Primary Care Practitioners



The physician assistants, and nurse practitioners are defined as in Spero, J. C., & Galloway, E. M. (2019). Running the Numbers. North Carolina Medical Journal, 80(3), 186-190. Physicians with a primary care of practice of obstetrics/gynecology were weighted as 0.25 of a full-time equivalent (FTE) primary care practitioners, and certified nurse midwives were weighted as 0.75 FTE. Physician and physician assistant data are derived from licensure data provided by the North Carolina Medical Board. This analysis only includes physicians who are not residents-in-training and are not employed by the Federal government. Nurse practitioner are certified nurse midwire form licensure data provided by the North Carolina Medical Board. Tobs analysis only includes physicians and certified nurse midwire data is derived from licensure data provided by the North Carolina Medical Board. Tobs analysis only includes physicians. Data include active, licensed practitioners in practice in North Carolina as of the cober 31, 2017. Practitioners are assigned to counties based on primary practice location. County populations were adjusted for age and gender according to primary care use rates described in data from the Medical Expenditure Panel Survey. The raw (unadjusted) population data was from the NC Office of State Budget and Management

(unadjusted) population data was from the NC Office of State Budget and Management. Access to primary care is necessary to improving the health outcomes of communities. With the recent

spread of the novel <u>coronavirus</u> in North Carolina, primary care is critical as an entry-point to further care. Many rural areas of North Carolina lack adequate access to primary care providers. The disparities in access between rural and metropolitan areas have continued to grow despite an overall increase of physicians in

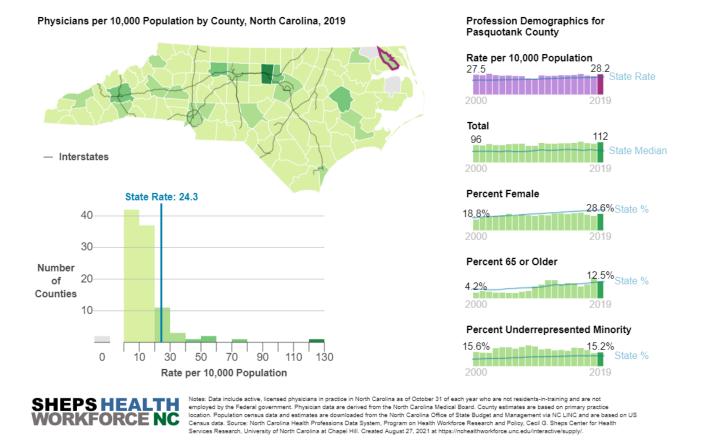
On the map above, Pasquotank is green, indicating the county is meeting the NC Institute of Medicine's target ratio of 1 primary care provider to every 1,500 people.

Currently, **60% of NC's 100 counties meet the NCIOM's target**. Seven counties were substantially below target: Anson, Northampton, Franklin, Warren, Gates, Tyrrell and Camden. Camden has a population of just over 10,000, and no primary care providers.

The NCIOM definition of primary care clinician includes physicians, nurse practitioners (NPs), physician assistants (PAs) and certified nurse midwives (CNMs).

https://nchealthworkforce.unc.edu/blog/primary_care_nc/

NC.



The number of physicians per 10,000 population in Pasquotank County has increased from 27.5 physicians in 2000 to 28.5 in 2019.

Source: North Carolina Health Professions Data System, <u>Program on Health Workforce Research and Policy</u>, Cecil G. Sheps Center for Health Services Research, University of North Carolina at Chapel Hill. Created September 29, 2021 at <u>https://nchealthworkforce.unc.edu/interactive/supply/</u>

Chapter 5 Chronic and Communicable Disease Profile

Leading Causes of Death

Pasquotank County				North Carolina				Health ENC Counties			
Rank	Cause	Deaths	Rate	Rank	Cause	Deaths	Rate	Rank	Cause	Deaths	Rate
1	Heart Disease	109	273.7	1	Cancer	19,963	190.34	1	Heart Disease	4546	210.2
2	Cancer	86	215.95	2	Heart Disease	19,661	187.46	2	Cancer	4345	200.91
3	Chronic Lower Respiratory Diseases	24	60.27	3	Chronic Lower Respiratory Diseases	5,411	51.59	3	Cerebrovascular Disease	1215	56.18
4	Other Unintentional Injuries	21	52.73	4	Cerebrovascular Disease	5,203	49.61	4	Chronic Lower Respiratory Diseases	1114	51.51
5	Alzheimer's Disease	19	47.71	5	Other Unintentional Injuries	4,683	44.65	5	Other Unintentional Injuries	1006	46.52
6	Cerebrovascular Disease	17	42.69	6	Alzheimer's Disease	4,508	42.98	6	Alzheimer's Disease	918	42.45
7	Diabetes Mellitus	17	42.69	7	Diabetes Mellitus	3,127	29.81	7	Diabetes Mellitus	838	38.75
8	Pneumonia and Influenza	12	30.13	8	Nephritis Nephrotic Syndrome and Nephrosis	2,121	20.22	8	Nephritis Nephrotic Syndrome and Nephrosis	476	22.01
9	Motor Vehicle Injuries	7	17.58	9	Pneumonia and Influenza	1,730	16.49	9	Motor Vehicle Injuries	460	21.27
10	Nephritis Nephrotic Syndrome and Nephrosis	6	15.07	10	Motor Vehicle Injuries	1,608	15.33	10	Pneumonia and Influenza	382	17.66

Notes: Leading causes of death are calculated based on the crude number of deaths per 100,000 population in **2019**.

Deaths: North Carolina State Center for Health Statistics 2019 Vital Statistics Public Use Data Files, downloaded from the Odum Institute for Research in Social Science at UNC-Chapel Hill Dataverse web site, May 2021. Population: National Center for Health Statistics 2019 Bridged-Race Population Estimates (<u>https://www.cdc.gov/nchs/nvss/bridged_race.htm</u>). Analysis by ECU Department of Public Health, Health Systems Research and Development.

Leading Causes of Iniury Death

Leading Causes of Injury Death 2016 to 2019 PASQUOTANK				Leading Causes of Injury Hospitalization 2016 to 2019 PASQUOTANK			Leading Causes of Injury ED Visits 2016 to 2019 PASQUOTANK			
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#		
1	Poisoning - Unintentional	39	1	Fall - Unintentional	283	1	Fall - Unintentional	5,583		
2	MVT - Unintentional	21	2	Poisoning - Unintentional	54	2	Unspecified - Unintentional	3,329		
3	Firearm - Self-Inflicted	13	3	Poisoning - Self-Inflicted	37	3	Struck By/Against - Unintentional	2,728		
4	Fall - Unintentional	11	4	Unspecified - Unintentional; MVT - Unintentional	13	4	MVT - Unintentional	2,396		
5	Suffocation - Self-Inflicted	7	5	Struck By/Against - Unintentional	9	5	Natural/Environmental - Unintentional	1,290		
ΤΟΤΑΙ	-	125	TOTAL		454	ΤΟΤΑ	-	21,989		

MVT – motor vehicle traffic Source: <u>https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/index.htm#genData</u>

(2016-2019, all ages)

Leading Causes of Hospitalizations

Leading Causes of Injury Death 2016 to 2019 PASQUOTANK				Leading Causes of Injury Hospitalization 2016 to 2019 PASQUOTANK			Leading Causes of Injury ED Visits 2016 to 2019 PASQUOTANK			
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#		
1 2 3 4	Poisoning - Unintentional MVT - Unintentional Firearm - Self-Inflicted Fall - Unintentional	39 21 13 11	1 2 3 4	Fall - Unintentional Poisoning - Unintentional Poisoning - Self-Inflicted Unspecified - Unintentional; MVT -	283 54 37 13	1 2 3 4	Fall - Unintentional Unspecified - Unintentional Struck By/Against - Unintentional MVT - Unintentional	5,583 3,329 2,728 2,396		
5	Suffocation - Self-Inflicted	7	5	Unintentional Struck By/Against - Unintentional	9	5	Natural/Environmental - Unintentional	1,290		
τοται	-	125	TOTAL		454	ΤΟΤΑΙ	-	21,989		

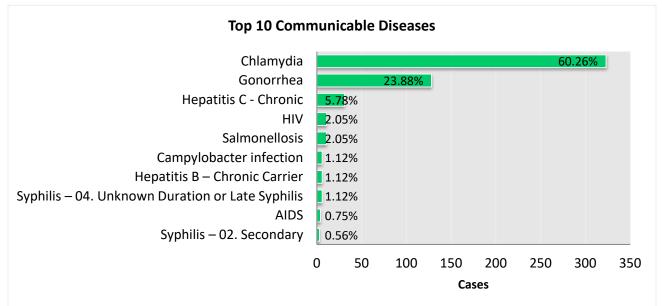
MVT – motor vehicle traffic Source: <u>https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/index.htm#genData</u> (2016-2019, all ages)

Leading Causes of Emergency Department Visits

Leading Causes of Injury Death 2016 to 2019 PASQUOTANK				Leading Causes of Injury Hospitalization 2016 to 2019 PASQUOTANK			Leading Causes of Injury ED Visits 2016 to 2019 PASQUOTANK			
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#		
	5							5 500		
1	Poisoning - Unintentional	39	1	Fall - Unintentional	283	1	Fall - Unintentional	5,583		
2	MVT - Unintentional	21	2	Poisoning - Unintentional	54	2	Unspecified - Unintentional	3,329		
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TOTAL		125	TOTAL		454	τοτα	-	21,989		

MVT – motor vehicle traffic Source: <u>https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/index.htm#genData</u> (2016-2019, all ages)

Top Ten Reportable Communicable Diseases



Note: To view and compare communicable disease rates in your county with NC State-wide rates, reported number of cases, etc., view the custom dashboard

https://NCD3NorthCarolinaDiseaseDataDashboard

Preventing and controlling the spread of communicable diseases are a top concern among communities.

The top communicable diseases as reported by NC DHHS in Pasquotank County in 2018 are shown above.

Chlamydia ranked highest among percent of cases reported. Chlamydia is a common STD that can infect both men and women. It can cause serious, permanent damage to a woman's reproductive system.

Indicators / Measures	Pasquotank	NC
Health Outcomes		
Premature Death	8800	7600
Low Birthweight	9%	9%
Health Factors		
Health Behaviors		
Adult Smoking	21%	18%
Adult Obesity	42%	32%
Sexual Transmitted infections	807.70	647.80
Clinical Care		
Primary Care Physicians	1590 to 1	1400 to 1
Preventable hospital stays	5535	4539
Mammography Screening	50%	46%
Flu Vaccinations	45%	52%
Social & Economic Factors		
Unemployment	4.60%	3.90%
Physical Environment		
Air Pollution - particulate matter	7	8.5

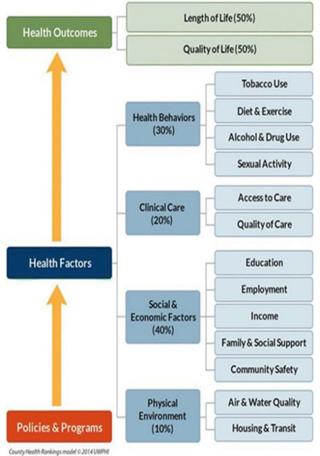
Chapter 6 HNC 2030 Indicator Rankings by Health ENC Regions

Areas to Explore Areas of Strength

Source: County Health Rankings https://www.countyhealthrankings.org/

Chapter 7 County Health Ranking Indicators

Population Health Model



Source: County Health Rankings https://www.countyhealthrankings.org/ The County Health Rankings are based on a model of community health that emphasizes the many factors that influence how long and how well we live. The Rankings use more than 30 measures that help communities understand how healthy their residents are today (health outcomes) and what will impact their health in the future (health factors). Explore the Model to learn more about these measures and how they fit together to provide a profile of community health

- There are many factors that influence how well and how long people live.
- The County Health Rankings model (right) is a population health model that uses data from different sources to help identify areas of concerns and strengths to help communities achieve health and wellness.
- The Rankings provides county-level data on health behavior, clinical care, social and economic and physical environment factors.

Chapter 8 Survey Findings

Top 3 issues which have the highest impact on quality of life:

- Low income/Poverty
- Drugs/Alcohol
- Lack of Affordable Housing

Top 3 services that need the most improvement:

- More Affordable/Better Housing
- Positive Teen Activities
- Higher Paying Employment

Survey questions and responses in their entirety are located in Appendix A.

Chapter 9 Inventory of Resources

Elizabeth City Chamber of Commerce Extensive

Categorized lists of businesses, services, organizations and things to do in Pasquotank County/Elizabeth City. Search banner heading tabs: Business Directory, Visit, and Live and Work. Portal - <u>http://www.elizabethcitychamber.org/</u>

Pasquotank County Government Directory of Services

Lists of live links to services provided by the county. Portal: <u>http://www.co.pasquotank.nc.us/</u>

Albemarle Smart Start Partnership Community Resource Guide

Searchable on-line directory of programs and services available throughout the Albemarle Region. Currently catalogs annotated listings for 125 local and regional agencies and organizations. Portal; <u>http://albemarleacf.org/news-events/links.html</u> Also available as a printable version—scroll down to Resource Guide PDF to view the Community Resource Guide below or <u>download it</u>.

Albemarle Alliance for Children and Families—Formerly known as Albemarle Smart Start Partnership, INC.

1403 Parkview Drive Elizabeth City, NC 27909 Phone: 252-333-1233 Fax: 252-333-1201 Email: <u>contact@albemarleacf.org</u> Website: <u>http://albemarleacf.org/</u>

Mission: Albemarle Alliance for Children and Families builds the capacity of families, communities and schools, to prepare the next generation for academic, emotional, social and economic success in a global world.

Learn more and get involved.

PASQUOTANK COUNTY 2021-2022 Commu

2021-2022 Community Health Needs Assessment

Vision Statement: All Albemarle children are given the support needed to reach their full potential as adults, thereby ensuring the long-term economic vitality of the region's families, communities and companies in a globally competitive world.

North Carolina Arts Council the NC Arts Council

Maintains a resource list of cultural, arts, and civic organizations that is searchable by county. Currently catalogs 33 regional resources. Portal: <u>http://search.ncarts.org/localarts_search.php</u>

Elizabeth City, NC Fire Department

https://www.cityofec.com/index.asp?SEC=5E2C5950-2C00-4F29-BB2E-DE3C7D214960&Type=B_BASIC

Fire Station 1 South Gate Station

902 Halstead Blvd. Elizabeth City, NC 27909

252-335-5398

Fire Station 2

410 Harney Street, Elizabeth City, NC 27909

252-333-1045

Elizabeth City Fire Department Elizabeth City Fire Department - Station 1

Elizabeth City Fire Department - Station 2

Pasquotank Nixonton Volunteer Fire Department

Pasquotank Providence Volunteer Fire Department

Pasquotank Newland Volunteer Fire Department

Weeksville Volunteer Fire Department

Weeksville Volunteer Fire Department - Station 2

Pasquotank-Camden Emergency Medical Service

1144 N. Road St.

P.O. Box 469, Elizabeth City, NC 27907

252-335-1524

Fax: 252-335-2560

Website: https://www.pasquotankcamdenems.com/

Pasquotank County Sheriff's Office

200 East Colonial Ave.

Elizabeth City, NC 27909

252-338-2191

Fax: 252-338-1667

Website: https://www.pasquotankcountync.org/sheriff

Elizabeth City Police Department

302 E. Colonial Ave.

Elizabeth City, NC 27909

252-335-4321

Fax: 252-338-0128

Website: <u>http://www.cityofec.com/index.asp?SEC=5B9153FA-8605-4CBB-AFA0-BAB1260CB448&Type=B_BASIC</u>

Pasquotank County NC Cooperative Extension

1209 McPherson St

Elizabeth City, NC 27909

(252) 338-3954

Website: https://pasquotank.ces.ncsu.edu/

The Elizabeth City Area Chamber of Commerce

502 East Ehringhaus Street

Elizabeth City, NC 27909

252-335-4365

Fax: 252-335-5732

Website: http://www.elizabethcitychamber.org/

SPCA of Northeastern Carolina

102 Enterprise Dr.

Elizabeth City, NC 27909

252-338-5222

Fax: 252-338-5209

Website: http://www.spcaofnenc.org/

Farmers Markets, Farm Stands, and Roadside Stands (6)

Website: http://healthync.org/healthy-foods/markets-and-stands/#Pasquotank-County

Bright's Delight Produce

1156 Us Hwy 17 South

Elizabeth City, NC 27909

252-338-6421

Downtown Waterfront Market

Water St.

Elizabeth City, NC 27909

Mariner's Wharf Park

252-267-8329

Accepts: SNAP, EBT, FMNP, Senior FMNP, WIC

PASQUOTANK COUNTY

Brothers Farm Market

154 Perkins Lane

Elizabeth City, NC 27909

252-619-3920

Halls Creek Blueberry Farm

583 Old Halls Creek Road

Elizabeth City, NC 27909

252-333-7332

Meadstown Produce

636 Meadstown Rd.

Elizabeth City, NC 27909

252-331-9253

Hall Farms

707 Bayside Rd.

Elizabeth City, NC

252-562-3396

Public Transportation in Pasquotank County

Public transportation in Pasquotank County is provided by the Inter-County Public Transportation Authority (ICPTA), operated by Albemarle Regional Health Services, which serves the five-county area of Camden, Chowan, Currituck, Pasquotank and Perquimans counties.

https://icpta.net/

Childcare

Website: <u>https://childcarecenter.us/north_carolina/27909_childcare</u> 43

PASQUOTANK COUNTY

Central Elementary ASEP

1059 US 17 HWY South Elizabeth City, NC 27909 (980) 343-5567

Emmanuel Baptist Church Day Care Center

109 Chadburn Avenue

Elizabeth City, NC 27909

252-335-1617

JC Sawyer Elementary ASEP

1007 Park Street

Elizabeth City, NC 27909

Pasquotank Elementary ASEP

1407 Peartree Road

Elizabeth City, NC 27909

Sheep Harney Elementary ASEP

200 W. Elizabeth Street

Elizabeth City, NC 27909

Sheep Harney Elementary Pre-K

285 Elvin Drive

Elizabeth City, NC 27909

Weeksville Elementary ASEP

1170 Salem Church Road

Elizabeth City, NC 27909

ALC Albemarle Learning Center

1400 North Road Street

Elizabeth City, NC 27909

252-335-5229

https://www.albemarlelearningcenter.com/

Creative Kids Childcare Center

116 Corporate Drive

Elizabeth City, NC 27909

252-333-1021

Girls Incorporated of the Albemarle

304 S. Road Street

Elizabeth City, NC 27909

252-335-7346

Jackie's Tender Loving Care

311 C South Hughes BoulevardElizabeth City, NC 27909252-338-5683

Northside Elementary ASEP

1062 Northside Road

Elizabeth City, NC 27909

PW Moore Elementary ASEP

606 Roanoke Avenue

Elizabeth City, NC 27909

Rehoboth Learning Academy

1000 Maple St.

Elizabeth City, NC 27909

252-331-2811

Dot's Angels

702 Beech Street Elizabeth City, NC 27909 252-331-3126

EDU Care Learning Center, INC.

217 Bray Street

Elizabeth City, NC 27909

252-335-5900

Tender Years Child Care Center

1092 Us 17 South

Elizabeth City, NC

252-335-5833

ALBEMARLE PRESCHOOL AND CHILD CARE CENTER

U S 17 South, Elizabeth City NC

(252) 338-6496

BRIGHT BEGINNINGS ACADEMY INC. I 818 Walker Avenue, Elizabeth City NC

(252) 335-9471

BRIGHT BEGINNINGS ACADEMY INC. II 900 Walker Avenue, Elizabeth City NC

(252) 335-9471

CATHEDRAL KIDDIE CAMPUS 612 W Elizabeth Street, Elizabeth City NC

(252) 335-0994

DING DONG SCHOOL 1107 Carolina Avenue, Elizabeth City NC

(252) 335-1351

E.I.C. PASQUOTANK LOIS JOHNSON CENTER 501 Bank Street, Elizabeth City NC

(252) 331-1980

ELIZABETH CITY STATE UNIVERSITY-LAB SCHOOL 1704 Weeksville Road, Elizabeth City NC

(252) 335-3374

<u>GRACE MONTESSORI ACADEMY, INC.</u> 104 Commercial Blvd, Elizabeth City NC

(252) 621-1777

<u>KIDS-N-PLAY</u> 504 Albemarle Street, Elizabeth City NC

(252) 338-8180

MOTHER GOOSE DAYCARE & PRESCHOOL 1109 Herrington Road, Elizabeth City NC

(252) 337-7144

PASQUOTANK COUNTY

PASQUOTANK HEAD START

409 Bank St, Elizabeth City NC

(252) 335-7698

JUDY'S CHILD CARE 208 Walnut Street, Elizabeth City NC

(252) 331-1040

YOUNG ONES DAY CARE 906 West Church Street, Elizabeth City NC

(252) 335-7577

Public Schools

Central Elementary School

1059 U.S. Hwy 17 South

Elizabeth City, Nc 27909

252-335-4305

Fax: 252-337-6601

Website: http://www.edline.net/pages/Central E S

Elizabeth City Middle School

1066 Northside Road

Elizabeth City, NC 27909

252-335-2974

Fax: 252-335-1751

Website: http://www.edline.net/pages/Elizabeth City Middle School

H.L. Trigg Community School

1004 Parkview Drive

Elizabeth City, NC 27909

252-335-1765

Fax: 252-337-6740

Website: http://www.edline.net/pages/H L Trigg Community School

J.C. Sawyer Elementary School

1007 Park Street

Elizabeth City, NC 27909

252-338-1012

Fax: 252-338-2388

Website: http://www.edline.net/pages/JCS

Northeastern High School

963 Oak Stump Rd.

Elizabeth City, NC 27909

252-335-2932

Fax: 252-335-1005

Website: http://www.edline.net/pages/Northeastern High School

Northside Elementary School

1062 Northside Rd.

Elizabeth City, NC 27909

252-335-2033

Fax: 252-331-1332

Website: http://www.edline.net/pages/Northside E S

P.W. Moore Elementary School

606 Roanoke Ave.

Elizabeth City, NC 27909

252-338-5000

Fax: 252-338-6554

Website: http://www.edline.net/pages/PWMoore ES

Pasquotank County High

1064 Northside Rd.

Elizabeth City, NC 27909

252-337-6880

Fax: 252-337-6890

Website: http://www.edline.net/pages/PCHS

Pasquotank Elementary School

1407 Peartree Rd.

Elizabeth City, NC

252-335-4205

Fax: 252-335-4966

Website: http://www.edline.net/pages/Pasquotank ES

River Road Middle School

1701 River Rd.

Elizabeth City, NC 27909

252-333-1454

Fax: 252-331-1339

Website: http://www.edline.net/pages/River Road Middle School

Sheep-Harney Elementary School

200 W. Elizabeth St.

Elizabeth City, NC 27909

252-335-4303

Fax: 252-335-4738

Website: http://www.edline.net/pages/Sheep-Harney_ES

Weeksville Elementary School

1170 Salem Church Rd.

Elizabeth City, NC 27909

252-330-2606

Fax: 252-330-5700

Website: http://www.edline.net/pages/Weeksville ES

Private Schools

Albemarle School

1210 US Highway 17 South

Elizabeth City, NC 27909

252-338-0883

http://thealbemarleschool.org/

Elizabeth City Seventh-Day Adventist School

117 US Highway 17 South

Elizabeth City, NC 27909

252-335-0343

St. Stephen Missionary Baptist Church Child Care

513 W. Cypress St. Elizabeth City, NC 27909 252-835-5003

Victory Christian School

684 Old Hertford Hwy Elizabeth City, NC 27909 252-264-2011

New Life Academy

1958 N. Road St.

Elizabeth City, NC 27909

252-335-5812

Higher Education

Chowan University

One University Place

Murfreesboro, NC 27855

Phone: 252-398-6500 Toll-Free: 1-888-4-CHOWAN

Fax: 252-398-1190

Website: https://www.chowan.edu/

Martin Community College - Bertie Campus

409 Granville St. Windsor, NC 27983 Phone: 252-794-4861

Website: http://www.martincc.edu/

Martin Community College - Williamston Campus

1161 Kehukee Park Rd. Williamston, NC 27892 Phone: 252-792-1521 Fax: 252-792-0826

Website: http://www.martincc.edu/

Mid-Atlantic Christian University

715 N. Poindexter St.

Elizabeth City, NC 27909

252-334-2070

Website: http://www.macuniversity.edu/

Roanoke Chowan Community College

109 Community College Rd.

Ahoskie, NC 27910

Phone: 252-862-1200

Website: https://www.roanokechowan.edu/

Elizabeth City State University

1704 Weeksville Rd. Elizabeth City, NC 27909 252-335-3400 Website: http://www.ecsu.edu/

College of the Albemarle - Elizabeth City Campus

1208 N. Road St PO Box 2327 Elizabeth City, NC 27909 Phone: 252-335-0821 Fax: 252-335-2011

Website: http://www.albemarle.edu

College of the Albemarle - Dare County Campus

132 Russell Twiford Road Manteo, NC 27954 Phone: 252-473-2264 Fax: 252-473-5497 Website: <u>https://www.albemarle.edu/for-the-community/locations/dare-county-campus/</u>

College of the Albemarle - Roanoke Island Campus

205 Highway 64 S. Manteo, NC 27954 Fax: 252-473-6002 Website: <u>https://www.albemarle.edu/for-the-community/locations/dare-county-campus/</u>

College of the Albemarle - Edenton-Chowan Campus

800 N. Oakum St Edenton, NC 27932 Phone: 252-482-7900 Fax: 252-482-7999

Website: http://www.albemarle.edu/about-coa/edenton-chowan-campus

Regional Aviation & Technical Training Center

107 College Way Barco, NC 27917 Phone: 252-453-3035 Fax: 252-453-3215 Website: <u>https://www.albemarle.edu/for-the-community/locations/regional-aviation-technical-training-center/</u>

East Carolina University

East Fifth Street

Greenville, NC 27858

Phone: 252-328-6131

Website: http://www.ecu.edu/

Albemarle Hopeline, Inc.

Phone: 252-338-5338

24-hour crisis line: 252-338-3011

Fax: 252-338-2952

Mailing address: PO Box 2064, Elizabeth City, NC 27906-2064

Website: www.albemarlehopeline.org

Albemarle Hopeline, a private, non-profit organization founded in 1981, is the only program of its kind in the Albemarle region, with outreach through four satellite offices (Chowan, Currituck, Gates and Perquimans counties), a shelter/direct service facility, and a thrift store. The agency is guided by the mission of "providing comprehensive direct and preventive services to victims of family violence, sexual assault and teen dating violence" in the counties of Camden, Chowan, Currituck, Gates, Pasquotank and Perquimans.

Services include: 24-hour crisis line; emergency Hope House shelter; food, clothing and transportation; crisis intervention; court advocacy; individual and group counseling for adults and children; Displaced Homemaker Program; information and referral; outreach; and prevention through awareness and education to school, church and civic groups and the community-at-large. Since the opening of an enlarged 14,200 square foot Hope House facility in 2006, Hopeline has been able to consolidate services to both residential and non-residential victims, and improve coordination and effectiveness. All services are designed to meet basic safety needs of victims of domestic and sexual violence, empowering them to establish and maintain healthy, violence-free lives (36).

Social Services

709 Roanoke Ave.

Elizabeth City, NC 27909

252-338-2126

Website: http://www.co.pasquotank.nc.us/

PASQUOTANK COUNTY

Hospital

Sentara Albemarle Medical Center 1144 N. Road St. Elizabeth City, NC 27909

252-335-0531

Website: <u>http://www.sentara.com/albemarle-north-carolina/hospitalslocations/locations/new-sentara-albemarle-medical-center.aspx</u>

Albemarle Regional Health Services

Albemarle Regional Health Services (ARHS) is a regional Public Health agency in rural, northeastern NC serving the eight counties of Bertie, Camden, Chowan, Currituck, Gates, Hertford, Pasquotank and Perquimans. ARHS has provided over 70 years of service to the Albemarle Region.

The regional Public Health agency provides the following healthcare services: immunizations, diabetes care and management, women's preventive health, maternal health, including high-risk perinatal services, pregnancy care management, child health, WIC and nutrition counseling, pediatric asthma management, services for people with communicable diseases including STDs, HIV disease specialty clinic, adult day health care, behavioral health, children's developmental services, Public Health preparedness and response, public information, and interpreter assistance.

Albemarle Regional Health Services also administers the following programs: Environmental Health, Regional Landfill, Solid Waste Authority and Recycling, LifeQuest Worksite Wellness, and the Inter-County Public Transportation Authority. The more than 29 ARHS operational sites are completely networked by technology to increase the efficiency and effectiveness of service delivery across the agency.

Pasquotank County Health Department

711 Roanoke Avenue Elizabeth City, NC 27909 252-338-4400 Website: <u>http://www.arhs-nc.org</u>

Community Care of Eastern North Carolina (CCPEC)/ Carolina ACCESS

Phone: 252-847-9428

https://www.accesseast.org/ae-contact-us/

Trillium

Manages mental health, substance use, and intellectual/development disability services in a 24county area. Trillium partners with agencies and licensed therapists to offer services and support to people in need within their community.

Crisis Care & Service Enrollment: 1-877-685-2415

Email: info@trilliumnc.org

Website: http://www.trilliumhealthresources.org/

Trillium Access Point

Anonymous, evidence-based, self-conducted screenings online 24hrs a day for depression, bipolar disorder, post-traumatic stress disorder, eating disorders, and alcohol use disorders.

Available in English and Spanish, provides local referral information, and includes learning and resource section.

<u>Website: http://www.trilliumhealthresources.org/en/Community-Partnerships/Trillium-</u> Initiatives/Access-Point/

Quitline NC

Free, confidential, one-on-one support, nicotine replacement therapy - patch, gum and lozenge - is now available for every person who enrolls.

Telephone Service is available 24/7 toll-free at

1-800-QUIT-NOW (1-800-784-8669)

https://www.quitlinenc.com/

YouthBuild River City Community Development Corporation

303 West Ehringhaus Street

Elizabeth City, NC 27909

252-331-6312

Migrant and Seasonal Farmworker Program – Gateway Community Health Centers

510 S. Martin Luther King Dr.

Elizabeth City, NC 27909

252-384-2651

Albemarle Resource Center

400 East Elizabeth Street

Elizabeth City, NC 27909

252-333-1202

Food Bank of the Albemarle

109 Tidewater Way

Elizabeth City, NC 27909

252-335-4035

https://afoodbank.org/

New Beginnings Homeless Shelter

112 Herrington Road

Elizabeth City, NC 27909

252-334-9801

Albemarle Pregnancy Resource Center

201 E. Ehringhaus Street

Elizabeth City, NC 27909

252-338-1655

http://albemarleprc.org/

Community Care Clinic of Pasquotank County

918 Greenleaf Street

Elizabeth City, NC 27909

252-384-4733

Elizabeth City Housing Authority

440 Hariot Drive

Elizabeth City, NC 27909

252-335-5411

River City Community Development Corporation

501 E. Main

Elizabeth City, NC 27909

252-331-2925

Port Human Services Elizabeth City Outpatient Clinic

1141 N. Road St.

Suite L

Elizabeth City, NC 27909

252-335-0803

Guardian Ad Litem

1305 – D McPherson St.

Elizabeth City, NC 27909

252-331-4755

Pasquotank County Veterans Service Office

NC Division of VA

1023 US 17 South, Suite 2

Elizabeth City, NC 27909

252-331-4741

Albemarle Teen Challenge

504 East Elizabeth Street, Suite 7 Elizabeth City, NC 27909 252-338-8263

Kids First, Inc.

Child Abuse Treatment Center

808 West Ehringhaus Street

Elizabeth City, NC 27909

252-338-5658

Girls Incorporated of the Albemarle

304 South Road Street

Elizabeth City, NC 27909

252-335-7346

Elizabeth City-Pasquotank County Senior Center

200 East Ward Street

Elizabeth City, NC 27909

252-337-6661

https://www.cityofec.com/index.asp?SEC=A2417086-9477-4012-9EBC-08D8DF310A7A&Type=B_BASIC

Kindred Transitional Care and Rehabilitation

901 Halstead Blvd.

Elizabeth City, NC 27909

252-338-0137

Brookdale

401 Hastings Lane Elizabeth City, NC 27909 252-558-1070

Heritage Care

100 Timmerman Drive

Elizabeth City, NC 27909

252-338-2816

W.R. Winslow Memorial Home

1075 US Highway 17 South

Elizabeth City, NC 27909

252-338-3975

Brian Center Health & Rehab

1300 Don Juan Road

Hertford, NC 27944

252-426-5391

https://www.savaseniorcare.com/brian-center-health-and-rehabilitation-hertford

Sentara Nursing Center

3907 Caratoke Highway

Barco, NC 27917

Sentara Home Care Services

300 E Church St.

Elizabeth City, NC 27909

252-331-1203

Dentists

Alison L. Boone, DDS

905 Halstead Blvd. #4

252-331-2050

Complete Dental Care

407 S. Road St.

252-335-0548

Robert T. Gillam PA

508 E. Main St #322

252-335-4545

Dental Transformations

408 E. Colonial Ave.

252-335-4341

Morris & Taylor Ltd

416 E. Colonial Ave.

252-338-0143

Dr. Jason A Banks

103 Tanglewood Pkwy S.

252-331-2304

Dr. Johnny E. Haynes, DDS

303 E. Main St. #7

252-338-8995

Dandar Regis A, DDS

217 S. Poindexter St.

252-335-4421

Turner Harold L, DDS

215 N. McMorrine St.

252-335-2801

Pearson P Z DDS

1141 N. Rd St.

252-335-9303

Blanchard Periodontics

200 N. Water St.

252-335-4332

Carolina Coast Pediatric Dentistry

416 E. Colonial Ave

843-790-9299

Dr. Lee B. Kreger, DDS

1161 N. Road St.

252-737-7250

Van Belois H J DDS

416 E. Colonial Ave.

252-338-8077

Dr. Bald and Associates

1221 Carolina Ave.

252-338-8077

Coastal Endodontics

200 N. Water St.

252-331-5777

Physicians

Albemarle Health Physician Directory

Albemarle Health provides on its website a list, searchable by name or specialty, of the more than 100 physicians on its staff representing nearly 30 specialties. Search results are returned in a printable format. Portal: <u>http://www.albemarlehealth.org/find-a-physician/</u>

PASQUOTANK COUNTY

Roanoke Primary Care

902 Roanoke Ave.

Elizabeth City, NC 27909

252-384-0154

Albemarle Family Practice

1141 N. Road St.

Elizabeth City, NC 27909

252-335-5424

Sentara Pediatric Physicians

1141 N. Road St.

Elizabeth City, NC 27909

252-384-2590

Sentara Family & Internal Medicine Physicians

1507 N. Road St. Suite 2

Elizabeth City, NC 27909

252-333-1149

Comprehensive Rehabilitation

135 E. Rich Blvd Elizabeth City, NC 27909 252-333-1277

Community Family Practice

107 Medical Dr.

Elizabeth City, NC 27909

252-335-0503

Northeastern Family Medicine

206 S. Rd St.

Elizabeth City, NC 27909

252-335-2355

Sentara Orthopedic & Sports Medicine Specialists

1134 N. Road St.

Elizabeth City, NC 27909

252-384-2360

2021-2022 Community Health Needs Assessment

Chapter 10 Community Prioritization Process

PASQUOTANK

COUNTY

A vital phase of the Community Health Needs Assessment (CHNA) involves reporting out to the communities being served and to those residents who participated in the data gathering process. Community health presentations were held to provide the opportunity for community residents and key stakeholders to learn about the health–related primary and secondary data from the 2021 CHNA process. The data was presented by ARHS, Sentara Albemarle Medical Center, and Vidant Health through presentations geographically dispersed throughout the Albemarle Region.

The presentations were widely promoted through email invitations, newspaper announcements, the ARHS website, social media outlets, and by partnering organizations in an effort to bring the community together and strengthen an environment where the individuals were empowered in the decisions highlighted through the prioritization process.

Below is the list of presentations: Tuesday, November 2, 2021: Presentation via Zoom for Hertford County Wednesday, November 10, 2021: Presentation via Zoom for Gates County Friday, November 19, 2021: ECPC Senior Center (Camden, Currituck, Pasquotank, & Perguimans Counties) Friday, December 2, 2021: Presentation via Zoom for Bertie and Chowan Counties In addition to Community Members, Community Agencies in Attendance Include: Alliance for Children and Families **Behavioral Health** Board of Education/School System **City Government** Community College/University **Community Health Centers Cooperative Extension**

PASQUOTANK COUNTY

County Government County Commissioners Hospital Foundations Law Enforcement Local Health Departments Local Hospitals Local Treatment Centers NC Partnership for Public Health Rescue/Emergency Management Services Smart Start United Way

The community health needs prioritization process involved a synthesis of many sources of secondary data, community surveys, and the results of the Healthy North Carolina 2030 Indicator Rankings. After reviewing the CHNA presentation for each county the opinions of community stakeholders and organizations were considered in the analysis of the data and prioritization process. The highest ranked topics were distilled from and compared across these sources to create a shortened list of priorities that was representative of the community and could be acted upon as a community collective.

Considerations set forth in the Centers for Disease Control and Prevention's (CDC's) Healthy People 2030 document factors were considered in the development of the CHNA and in the selection of priority needs areas for Pasquotank County. These factors include the following:

- Consideration of upstream risk factors and behaviors in addition to disease outcomes
- High-priority health issues that have a big impact on specific segments of the community,

• Risk and contributing factors that can be modified in the short term such as through evidence-based interventions and strategies,

- Consideration of SDOH, health disparities, and health equity, and
- Consideration of additional data sources that should be included to inform health priorities.

After discussions, participants were then asked to use the priority list that was developed for each county to vote on their top three priority issues. After the post-presentation results were collected, the health issues were tallied.

For Healthy Carolinians of the Albemarle (Camden, Currituck, Pasquotank and Perquimans Counties) those were, in no particular order:

- Healthy Lifestyle Behaviors
- Access to Healthcare
- Mental Health/Substance Misuse

It is important to note that these three priorities have been selected for a diverse four-county coalition, so certain priorities may be more applicable to some counties than to others.

PASQUOTANK COUNTY

2021-2022 Community Health Needs Assessment

CHNA References

Data Sources and References for ENC Health Community Health Assessment (2020-2021)

Health Outcomes Life expectancy	Source NC-DHHS State Center for Health Statistics	Years 2014-2018
Leading causes of death	NC-DHHS State Center for Health Statistics / CDC, NCHS	2019
Fetal deaths and fetal death rates	NC-DHHS State Center for Health Statistics	2014-2018
Leading causes of injury death, hospitalization, and ED visits	NC-DHHS, Injury & Violence Prevention Branch	2016-2019
Communicable diseases	NC-DHHS State Center for Health Statistics	2018
Clinical Care	Source	Years
Population per primary care physicians	Cecil G. Sheps, Center for Health Services Research, UNC	2017
Physicians per population by county	Cecil G. Sheps, Center for Health Services Research, UNC	2019
Health Insurance Coverage	U.S. Census Bureau ACS 5-year Estimate	2015-2019
Government Health Insurance Only	U.S. Census Bureau ACS 5-year Estimate Source	Years
Health Behavior Factors BRFSS	NC-DHHS State Center for Health Statistics	2018
Health ENC Primary Data Questions – Quality of Life, Behavior	Health ENC Report	2020-2021
Healthy NC, 2030	NCIOM / NC DHHS	2020
County Health Rankings	Robert Woods Johnson Foundation	Varies
Social and Economic Factors	Source	Years
Population	U.S. Census Bureau ACS 5-year Estimate	2015-2019
Projected Population	NC Office of State Mgmt & Budget Pop Projections and US Census	2021
General population characteristics	Census Population Estimates	2015-2019
Education	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Employment	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Income	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
	U.S. Census Bureau, ACS 5-year Estimate	
Minority Populations	•	2015-2019
Military Population	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Veteran Population	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Birth Rate	NC State Center for Health Statistics	2016-2019
Poverty (% of population with income <200% of poverty level)	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Poverty by race and ethnicity	U.S. Census Bureau ACS 5-year Estimate	2013-2019
Children in poverty	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Older adults in poverty	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Disabled people in poverty	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Housing – Median monthly costs	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Housing – median monthly costs in surrounding counties	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Employment by industries	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Food Insecurity	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Percent of population below 200% by zip code	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Educational attainment	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
High School dropout rate (% dropout per 100 students)	N.C. Dept of Public Instruction	2016-2020
High School suspension rate (% suspension per 100 students)	N.C. Dept of Public Instruction	2019-2020
Transportation (% of workers commuting; % of workers drive alone)	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Tier Designation (County Distress Ranking)	N.C. Department of Commerce	2021
Community and Safety Factors	Source	Years
Crime and Safety	N.C. State Bureau of Investigations, uniform crime report	2016-2019
Juvenile Crime (% Undisciplined and % Delinquent per 1,000)	NC. Dept. of Public Safety, juvenile justice county Databook	2017-2020
Incarceration (Rate per 100,000 population)	N.C. Dept. of Public Safety	2019-2020
Child Abuse (Reports per 1000, age 0-18 years)	Annie E. Casey Foundation Kids Count Data Center	2015-2018
Severe housing problems	Robert Woods Johnson County Health Rankings2013-201	

Note: This list is provided as a resource for data and information and may not include all of the above references noted in the slide set.

APPENDICES

- Appendix A Community Survey Tool
- Appendix B Healthy North Carolina (HNC 2030) State and Local Data
- Appendix C Additional Secondary Data for the Community Health Assessment

Community Health Needs Assessment 2021 PID 1535

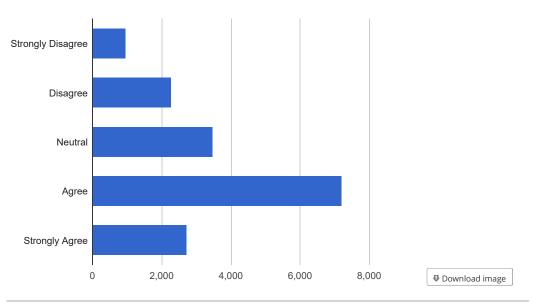
Data Exports, Reports, and Stats

Pasquotank County

There is good healthcare in my county. (healthcare)

Total Count (N)	Missing*	Unique
397	<u>1 (0.3%)</u>	5

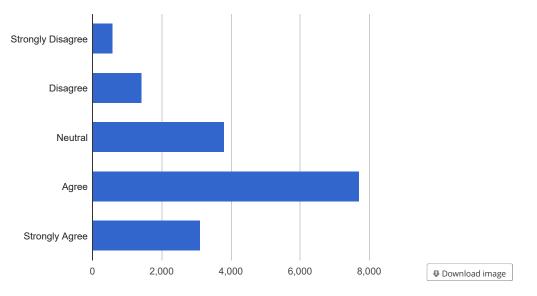
Counts/frequency: Strongly Disagree (13, 3.3%), Disagree (39, 9.8%), Neutral (72, 18.1%), Agree (213, 53.7%), Strongly Agree (60, 15.1%)



This county is a good place to raise children. (raise_children)

Total Count (N)	Missing*	Unique	
397	<u>1 (0.3%)</u>	5	

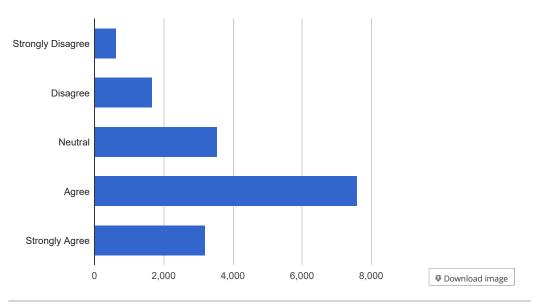
Counts/frequency: Strongly Disagree (14, 3.5%), Disagree (46, 11.6%), Neutral (109, 27.5%), Agree (177, 44.6%), Strongly Agree (51, 12.8%)



This county is a good place to grow old. (grow_old)

Total Count (N)	Missing*	Unique
396	<u>2 (0.5%)</u>	5

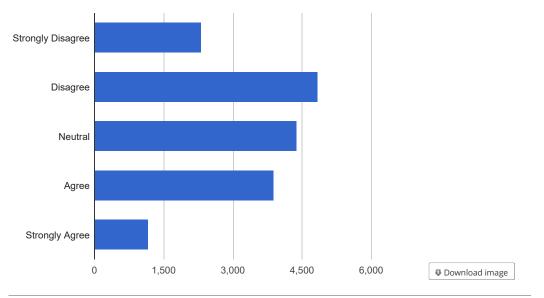
Counts/frequency: Strongly Disagree (10, 2.5%), Disagree (39, 9.8%), Neutral (94, 23.7%), Agree (196, 49.5%), Strongly Agree (57, 14.4%)



There is plenty of economic opportunity in this county. (econ_opp)

Total Count (N)	Missing*	Unique
397	<u>1 (0.3%)</u>	5

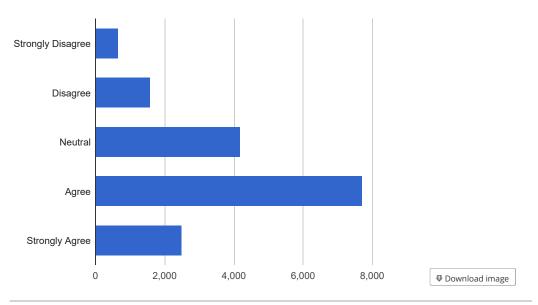
Counts/frequency: Strongly Disagree (46, 11.6%), Disagree (140, 35.3%), Neutral (120, 30.2%), Agree (71, 17.9%), Strongly Agree (20, 5.0%)



This county is a safe place to live (safe)

Total Count (N)	Missing*	Unique
397	<u>1 (0.3%)</u>	5

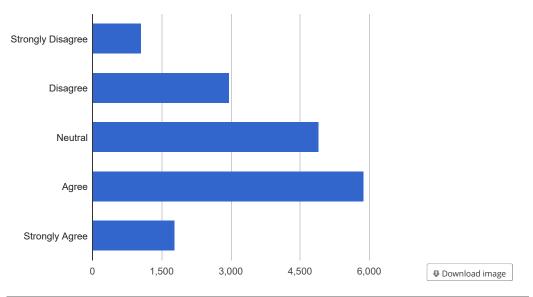
Counts/frequency: Strongly Disagree (16, 4.0%), Disagree (61, 15.4%), Neutral (129, 32.5%), Agree (155, 39.0%), Strongly Agree (36, 9.1%)



There is plenty of help for people during times of need in this county. (help)

Total Count (N)	Missing*	Unique
397	<u>1 (0.3%)</u>	5

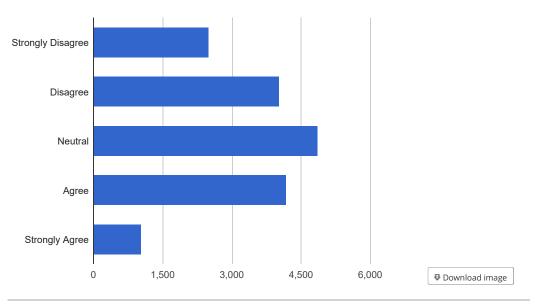
Counts/frequency: Strongly Disagree (22, 5.5%), Disagree (77, 19.4%), Neutral (126, 31.7%), Agree (138, 34.8%), Strongly Agree (34, 8.6%)



There is affordable housing that meets the needs in this county (affordable)

Total Count (N)	Missing*	Unique
396	<u>2 (0.5%)</u>	5

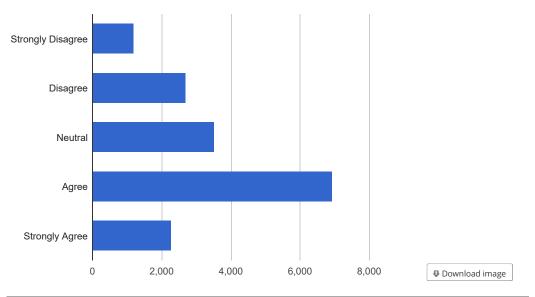
Counts/frequency: Strongly Disagree (48, 12.1%), Disagree (110, 27.8%), Neutral (114, 28.8%), Agree (101, 25.5%), Strongly Agree (23, 5.8%)



There are good parks and recreation facilities in this county. (parks)

Total Count (N)	Missing*	Unique
397	<u>1 (0.3%)</u>	5

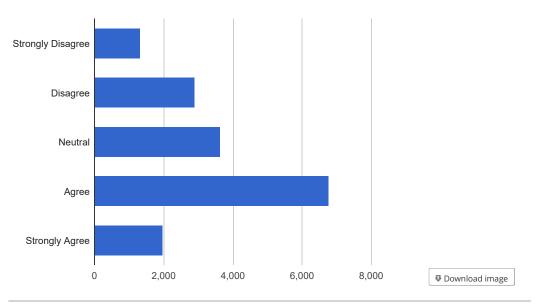
Counts/frequency: Strongly Disagree (25, 6.3%), Disagree (65, 16.4%), Neutral (119, 30.0%), Agree (159, 40.1%), Strongly Agree (29, 7.3%)



It is easy to buy healthy foods in this county. (healthyfood)

Total Count (N)	Missing*	Unique
397	<u>1 (0.3%)</u>	5

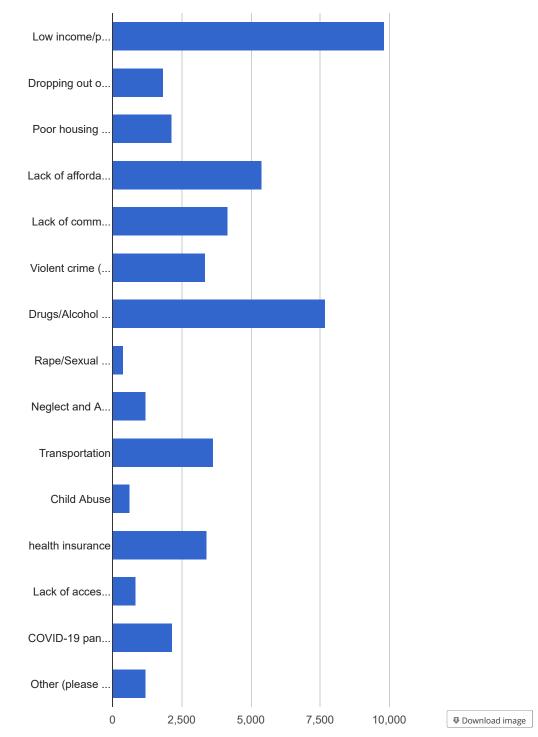
Counts/frequency: Strongly Disagree (29, 7.3%), Disagree (65, 16.4%), Neutral (80, 20.2%), Agree (184, 46.3%), Strongly Agree (39, 9.8%)



Please select the top 3 issues which have the highest impact on quality of life in this county. *(topissues)*

Total Count Missing* (N)		Unique
396	<u>2 (0.5%)</u>	15

Counts/frequency: Low income/poverty (275, 69.4%), Dropping out of school (41, 10.4%), Poor housing conditions (45, 11.4%), Lack of affordable housing (146, 36.9%), Lack of community resources (82, 20.7%), Violent crime (murder, assault) Theft (100, 25.3%), Drugs/Alcohol (Substance Use) (197, 49.7%), Rape/Sexual Assault (6, 1.5%), Neglect and Abuse (18, 4.5%), Transportation (78, 19.7%), Child Abuse (11, 2.8%), health insurance (82, 20.7%), Lack of access to enough food (13, 3.3%), COVID-19 pandemic (46, 11.6%), Other (please specify) (25, 6.3%)



Other (topthreeother1)

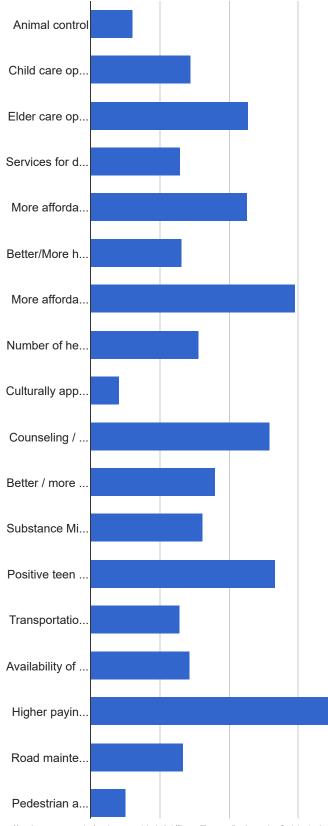
Total Count (N)	Missing*
25	<u>373 (93.7%)</u>

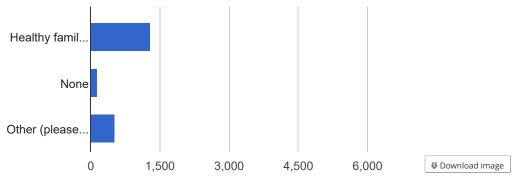
Please select what you feel are the top 3 services that need the most improvement in your community. *(improvements)*

Total Count (N)	Missing*	Unique
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394	<u>4 (1.0%)</u>	21
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Counts/frequency: Animal control (8, 2.0%), Child care options (37, 9.4%), Elder care options (87, 22.1%), Services for disabled people (48, 12.2%), More affordable health services (66, 16.8%), Better/More healthy food choices (41, 10.4%), More affordable / better housing (130, 33.0%), Number of healthcare providers (64, 16.2%), Culturally appropriate health services (15, 3.8%), Counseling / mental and behavioral health / support groups (101, 25.6%), Better / more recreational facilities (parks, trails, community centers) (58, 14.7%), Substance Misuse Services/ Recovery Support (63, 16.0%), Positive teen activities (125, 31.7%), Transportation options (34, 8.6%), Availability of employment (62, 15.7%), Higher paying employment (117, 29.7%), Road maintenance (54, 13.7%), Pedestrian and cyclist road safety (17, 4.3%), Healthy family activities (19, 4.8%), None (2, 0.5%), Other (please specify) (11, 2.8%)





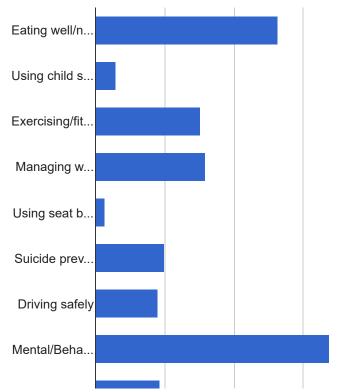
Other (*improvement_other*)

Total Count (N)	Missing*
11	<u>387 (97.2%)</u>

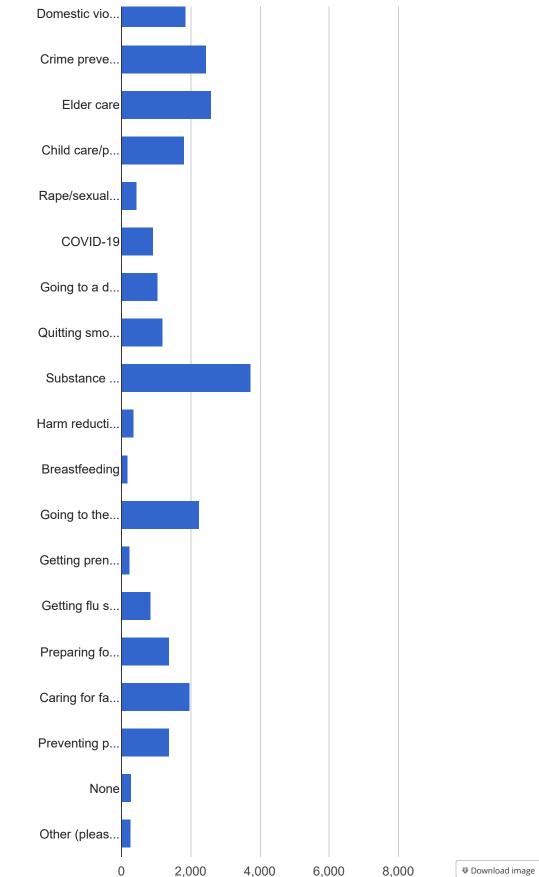
Please select the top 3 health behaviors that you feel people in your community need more information about. *(health_behavin)*

Total Count (N)	Missing*	Unique
393	<u>5 (1.3%)</u>	27

Counts/frequency: Eating well/nutrition (139, 35.4%), Using child safety car seats (6, 1.5%), Exercising/fitness (73, 18.6%), Managing weight (93, 23.7%), Using seat belts (8, 2.0%), Suicide prevention (47, 12.0%), Driving safely (28, 7.1%), Mental/Behavioral Health (162, 41.2%), Domestic violence prevention (37, 9.4%), Crime prevention (78, 19.8%), Elder care (60, 15.3%), Child care/parenting (43, 10.9%), Rape/sexual abuse prevention (6, 1.5%), COVID-19 (21, 5.3%), Going to a dentist for check-ups/preventive care (37, 9.4%), Quitting smoking/tobacco use prevention (21, 5.3%), Substance misuse prevention (98, 24.9%), Harm reduction (5, 1.3%), Breastfeeding (1, 0.3%), Going to the doctor for yearly check-ups and screenings (54, 13.7%), Getting prenatal care during pregnancy (3, 0.8%), Getting flu shots and other vaccines (24, 6.1%), Preparing for an emergency/disaster (21, 5.3%), Caring for family members with special needs / disabilities (47, 12.0%), Preventing pregnancy and sexually transmitted diseases (safe sex) (21, 5.3%), None (7, 1.8%), Other (please specify) (6, 1.5%)







Other (heath_behavin_other)

Total	
Count	Missing*
(N)	

Community Health Needs Assessment 2021 | REDCap

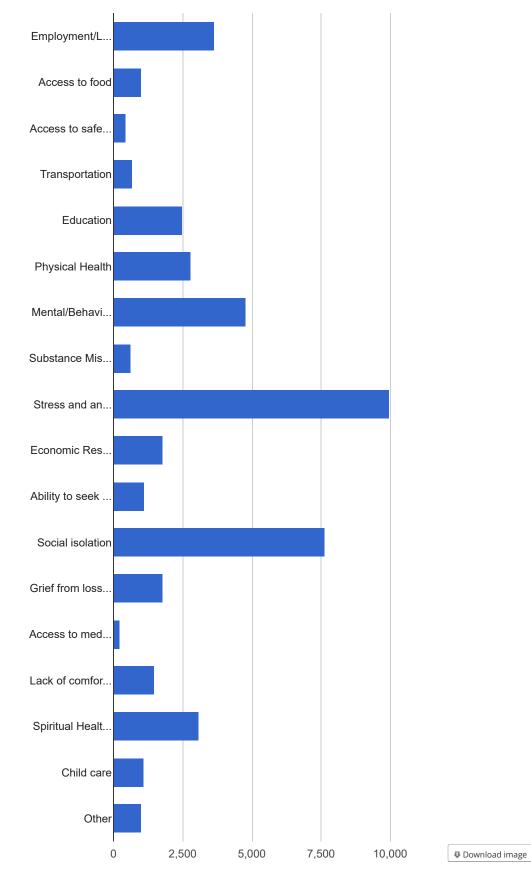
6 <u>392 (98.5%)</u>

Please select the top 3 areas where COVID-19 have impacted you most severely/significantly? (covid)

Total Count (N)	Missing*	Unique
394	<u>4 (1.0%)</u>	18

Counts/frequency: Employment/Loss of Job (72, 18.3%), Access to food (32, 8.1%), Access to safe housing (8, 2.0%), Transportation (11, 2.8%), Education (55, 14.0%), Physical Health (70, 17.8%), Mental/Behavioral Health (113, 28.7%), Substance Misuse (12, 3.0%), Stress and anxiety (238, 60.4%), Economic Resources (45, 11.4%), Ability to seek medical care (21, 5.3%), Social isolation (204, 51.8%), Grief from loss of loved one (44, 11.2%), Access to medication (5, 1.3%), Lack of comfort in seeking medical care (31, 7.9%), Spiritual Health/Well-being (86, 21.8%), Child care (20, 5.1%), Other (32, 8.1%)

https://redcap.ecu.edu/redcap_v10.6.24/DataExport/index.php?pid=1535&report_id=4041&stats_charts=1



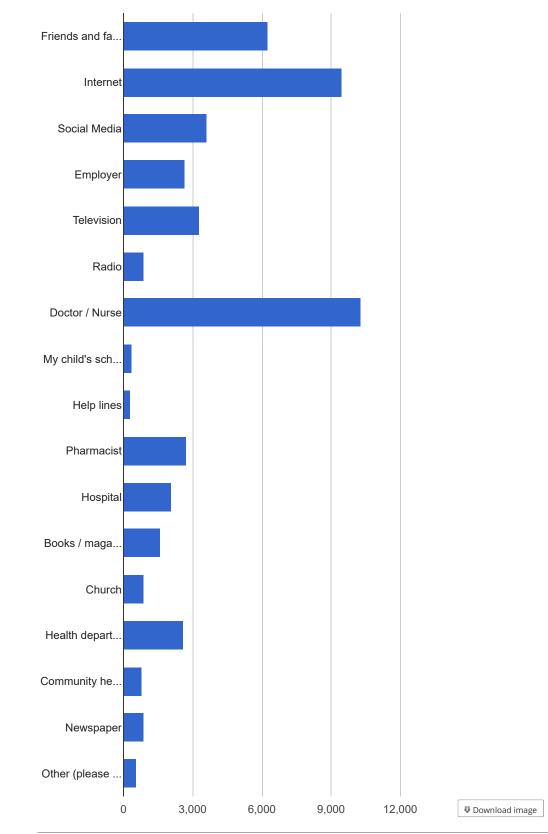
Other (other_covid)

Total Count (N)	Missing*
26	<u>372 (93.5%)</u>

Where do you get most of your health-related information? (Please check all that apply) (health_info)

Total Count (N)	Missing*	Unique
396	<u>2 (0.5%)</u>	17

Counts/frequency: Friends and family (110, 27.8%), Internet (237, 59.8%), Social Media (71, 17.9%), Employer (64, 16.2%), Television (92, 23.2%), Radio (23, 5.8%), Doctor / Nurse (258, 65.2%), My child's school (4, 1.0%), Help lines (7, 1.8%), Pharmacist (62, 15.7%), Hospital (53, 13.4%), Books / magazines (39, 9.8%), Church (17, 4.3%), Health department (54, 13.6%), Community health worker (16, 4.0%), Newspaper (30, 7.6%), Other (please specify) (11, 2.8%)



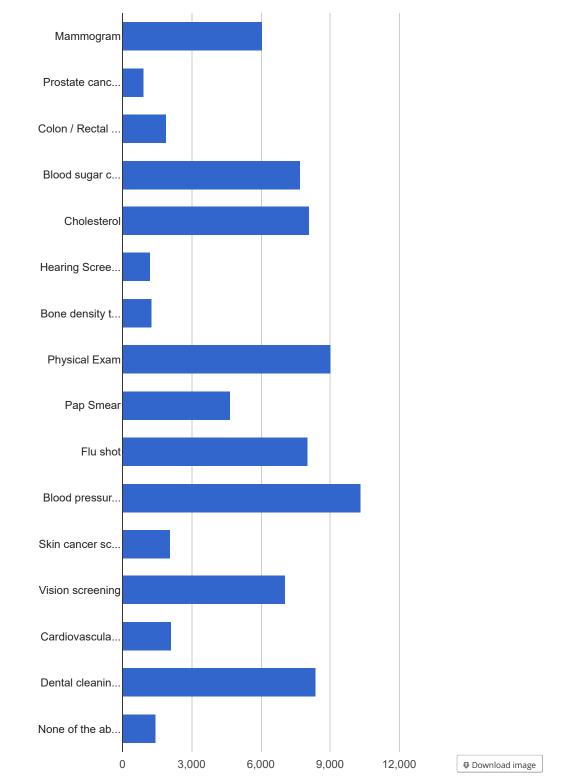
Other (health_info_other)

Total Count (N)	Missing*
10	<u>388 (97.5%)</u>

Which of the following preventative services have you had in the past 12 months? (Check all that apply) (prevent_services)

Total Count (N)	Missing*	Unique
396	<u>2 (0.5%)</u>	16

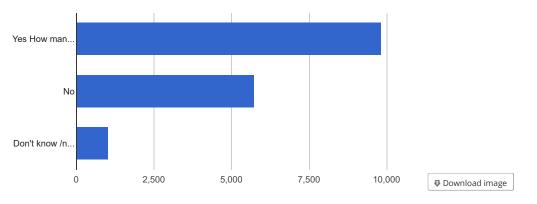
Counts/frequency: Mammogram (174, 43.9%), Prostate cancer screening (37, 9.3%), Colon / Rectal exam (57, 14.4%), Blood sugar check (219, 55.3%), Cholesterol (249, 62.9%), Hearing Screening (31, 7.8%), Bone density test (44, 11.1%), Physical Exam (260, 65.7%), Pap Smear (112, 28.3%), Flu shot (227, 57.3%), Blood pressure check (290, 73.2%), Skin cancer screening (55, 13.9%), Vision screening (197, 49.7%), Cardiovascular screening (81, 20.5%), Dental cleaning / x-rays (212, 53.5%), None of the above (26, 6.6%)



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? (Please select only one) (physicalactivity)

Total Count (N)	Missing*	Unique
396	<u>2 (0.5%)</u>	3

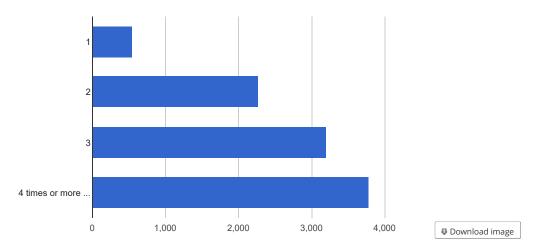
Counts/frequency: Yes How many times per week? (243, 61.4%), No (130, 32.8%), Don't know /not sure (23, 5.8%)



How many times per week? (excercisetimesweek)

Total Count (N)	Missing*	Unique
243	<u>155 (38.9%)</u>	4

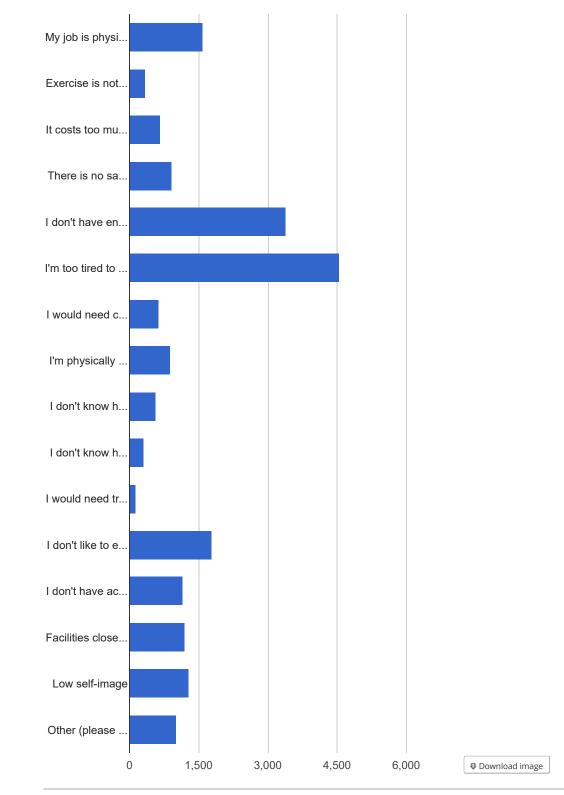
Counts/frequency: 1 (16, 6.6%), 2 (48, 19.8%), 3 (101, 41.6%), 4 times or more per week (78, 32.1%)



If you do not exercise at least a half hour a few days each week, please select the reasons why you do not exercise? (Please select all that apply) (notexercise)

Total Count (N)	Missing*	Unique
233	<u>165 (41.5%)</u>	16

Counts/frequency: My job is physical or hard labor. (34, 14.6%), Exercise is not important to me. (4, 1.7%), It costs too much to exercise. (14, 6.0%), There is no safe place to exercise. (14, 6.0%), I don't have enough time to exercise. (60, 25.8%), I'm too tired to exercise. (104, 44.6%), I would need child care and I don't have it. (6, 2.6%), I'm physically disabled. (35, 15.0%), I don't know how to find exercise partners. (9, 3.9%), I don't know how to safely (7, 3.0%), I would need transportation and I don't have it. (4, 1.7%), I don't like to exercise. (41, 17.6%), I don't have access to a facility that has the things I need, like a pool, golf course, or a track. (15, 6.4%), Facilities closed due to COVID 19 (31, 13.3%), Low self-image (34, 14.6%), Other (please specify) (25, 10.7%)



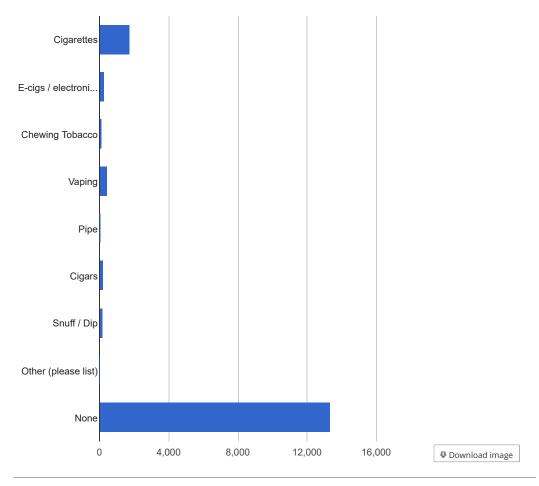
Other (exercise_other)

Total Count (N)	Missing*
24	<u>374 (94.0%)</u>

Please select any tobacco product you currently use, (please_select_any_tobacco)

Total Count (N)	Missing*	Unique
384	<u>14 (3.5%)</u>	9

Counts/frequency: Cigarettes (37, 9.6%), E-cigs / electronic cigarettes (6, 1.6%), Chewing Tobacco (2, 0.5%), Vaping (3, 0.8%), Pipe (3, 0.8%), Cigars (3, 0.8%), Snuff / Dip (3, 0.8%), Other (please list) (1, 0.3%), None (333, 86.7%)



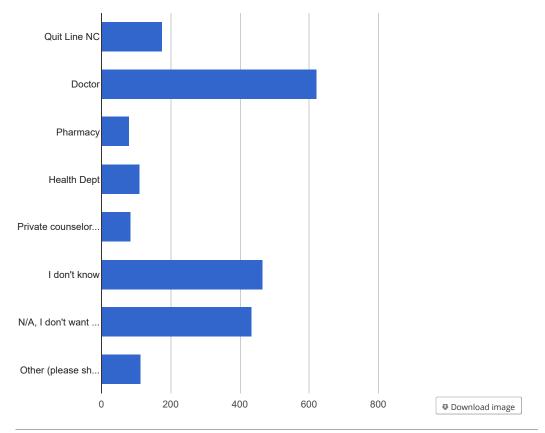


Total Count (N)	Missing*
1	<u>397 (99.7%)</u>

Where would you go for help if you wanted to quit? (quit)

Total Count (N)	Missing*	Unique
53	<u>345 (86.7%)</u>	8

Counts/frequency: Quit Line NC (2, 3.8%), Doctor (15, 28.3%), Pharmacy (5, 9.4%), Health Dept (1, 1.9%), Private counselor / therapist (3, 5.7%), I don't know (12, 22.6%), N/A, I don't want to quit (11, 20.8%), Other (please share more) (4, 7.5%)



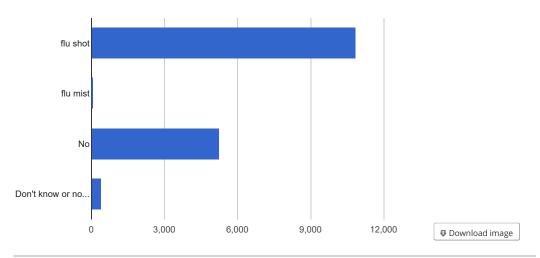
Other: (quit_other)

Total Count (N)	Missing*
3	<u>395 (99.2%)</u>

An influenza / flu vaccine can be a "flu shot" injected into your arm or a spray like "Flu Mist" which is sprayed into your nose. During the past 12 months, have you received a seasonal flu vaccine? (Choose only one) (flu)

Total Count (N)	Missing*	Unique
396	<u>2 (0.5%)</u>	4

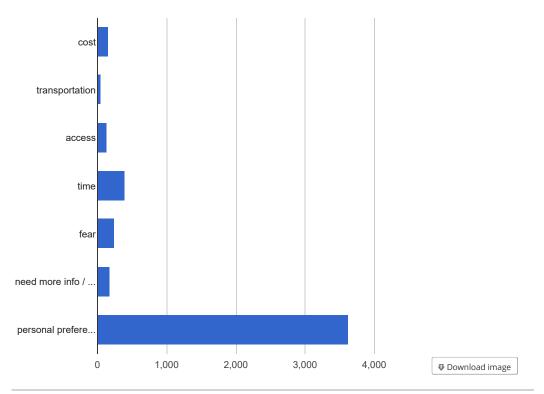
Counts/frequency: flu shot (274, 69.2%), flu mist (2, 0.5%), No (114, 28.8%), Don't know or not sure (6, 1.5%)



If you did not get your flu vaccine, why not? Please check any barriers. (flu_barriers)

Total Count (N)	Missing*	Unique
84	<u>314 (78.9%)</u>	7

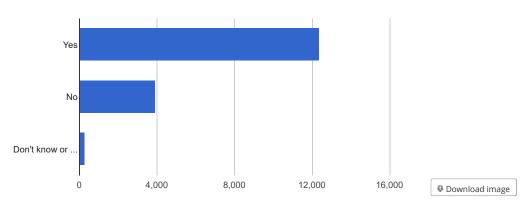
Counts/frequency: cost (1, 1.2%), transportation (3, 3.6%), access (3, 3.6%), time (4, 4.8%), fear (6, 7.1%), need more info / have questions (4, 4.8%), personal preference (63, 75.0%)



Have you had a COVID-19 vaccine? (covidshot)

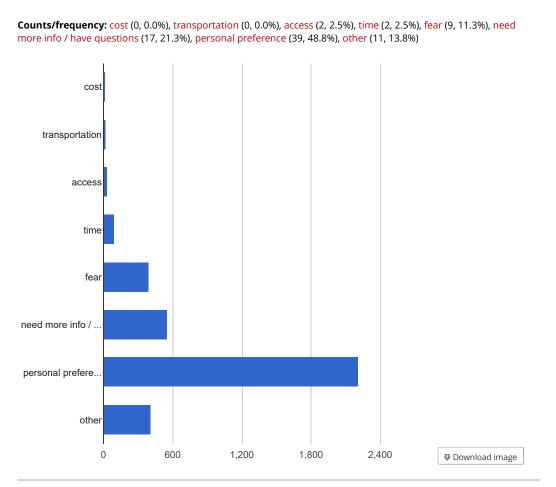
Total Count (N)	Missing*	Unique
397	<u>1 (0.3%)</u>	3

Counts/frequency: Yes (314, 79.1%), No (81, 20.4%), Don't know or not sure (2, 0.5%)



If you did not get your COVID-19 vaccine, why not? Please check any barriers. (covidyesskip)

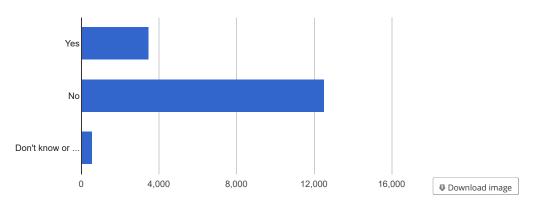
Total Count (N)	Missing*	Unique
80	<u>318 (79.9%)</u>	6



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? (Please choose only one) (healthcarehelp)

Total Count (N)	Missing*	Unique
398	0 (0.0%)	3

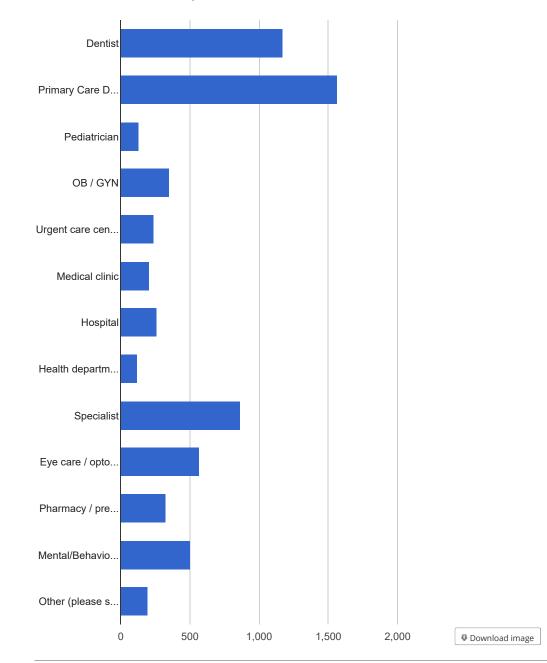
Counts/frequency: Yes (68, 17.1%), No (322, 80.9%), Don't know or not sure (8, 2.0%)



If yes, what type of provider or facility did you have trouble getting healthcare from? (Please choose all that apply) (healthcareproviderhelp)

Total Count (N)	Missing*	Unique
63	<u>335 (84.2%)</u>	12

Counts/frequency: Dentist (36, 57.1%), Primary Care Doctor (23, 36.5%), Pediatrician (1, 1.6%), OB / GYN (7, 11.1%), Urgent care center (3, 4.8%), Medical clinic (0, 0.0%), Hospital (4, 6.3%), Health department (1, 1.6%), Specialist (19, 30.2%), Eye care / optometrist / opthamologist (15, 23.8%), Pharmacy / prescriptions (3, 4.8%), Mental/Behavioral Health Providers (9, 14.3%), Other (please share more) (5, 7.9%)



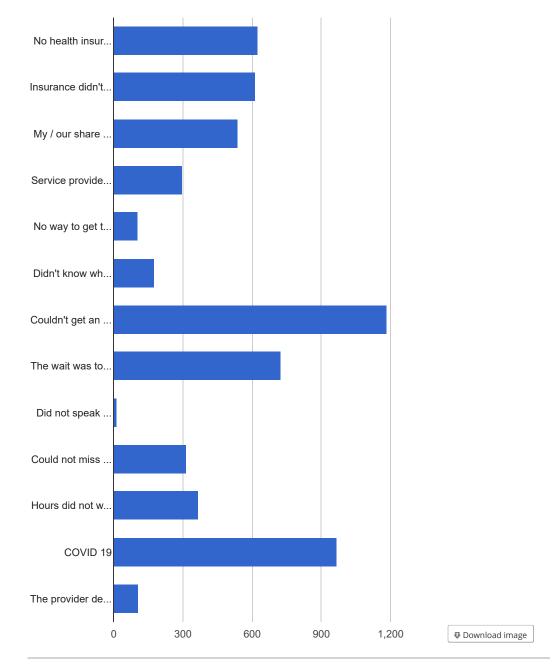
Other (healthcareprovider_other)

Total Count (N)	Missing*	
4	<u>394 (99.0%)</u>	

Which of these problems prevented you from getting the necessary health care? (Please choose all that apply) (healthcarewhichproblems)

Total Count (N)	Missing*	Unique
85	<u>313 (78.6%)</u>	11

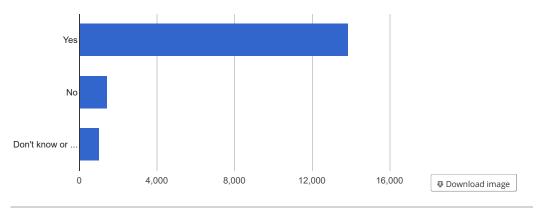
Counts/frequency: No health insurance (7, 8.2%), Insurance didn't cover what I / we needed. (16, 18.8%), My / our share of the cost (deductible / co-pay) was too high. (12, 14.1%), Service provider would not take my / our insurance or Medicaid. (10, 11.8%), No way to get there. (4, 4.7%), Didn't know where to go (11, 12.9%), Couldn't get an appointment (30, 35.3%), The wait was too long (20, 23.5%), Did not speak my language (0, 0.0%), Could not miss work to go (17, 20.0%), Hours did not work with my availability (15, 17.6%), COVID 19 (31, 36.5%), The provider denied me care or treated me in a discriminatory manner because of a protected status (age, race, sexual preference, disease, etc.) (0, 0.0%)



In a natural disaster (hurricane, flooding, tornado, etc.), do you feel like you know how to access or find the information you need to stay safe? (natural disasteraccess)

Total Count (N)	Missing*	Unique
397	<u>1 (0.3%)</u>	3

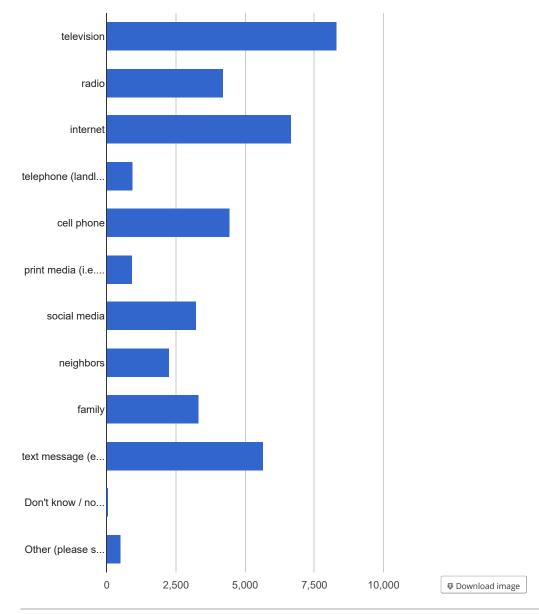
Counts/frequency: Yes (345, 86.9%), No (26, 6.5%), Don't know or not sure (26, 6.5%)



If so, where do you get your information to stay safe? (naturaldisasterinfo)

Total Count (N)	Missing*	Unique
348	<u>50 (12.6%)</u>	11

Counts/frequency: television (204, 58.6%), radio (75, 21.6%), internet (135, 38.8%), telephone (landline) (22, 6.3%), cell phone (80, 23.0%), print media (i.e.. newspaper) (20, 5.7%), social media (60, 17.2%), neighbors (26, 7.5%), family (57, 16.4%), text message (emergency alert system) (120, 34.5%), Don't know / not sure (0, 0.0%), Other (please specify) (11, 3.2%)



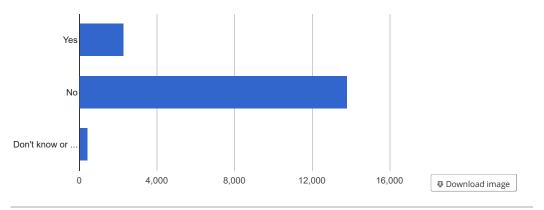
Other (natural_disaster_other)

Total Count (N)	Missing*
11	<u>387 (97.2%)</u>

In the past 12 months, were you ever worried about whether your family's food would run out before you got money to buy more? (Please choose only one) (foodworried)

Total Count (N)	Missing*	Unique
396	<u>2 (0.5%)</u>	3

Counts/frequency: Yes (55, 13.9%), No (336, 84.8%), Don't know or not sure (5, 1.3%)



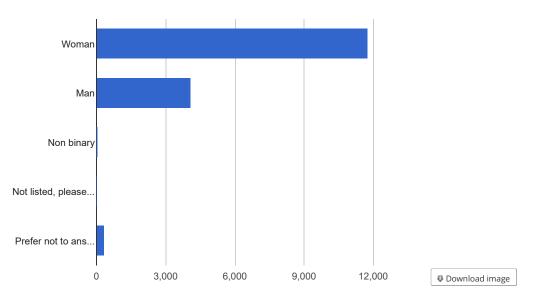
Is there anything else you would like for us to know about your community? (anythingelse)

Total Count (N)	Missing*
70	<u>328 (82.4%)</u>

How would you describe yourself? (gender)

Total Count (N)	Missing*	Unique
395	<u>3 (0.8%)</u>	3

Counts/frequency: Woman (289, 73.2%), Man (100, 25.3%), Non binary (0, 0.0%), Not listed, please share more: ______ (0, 0.0%), Prefer not to answer (6, 1.5%)



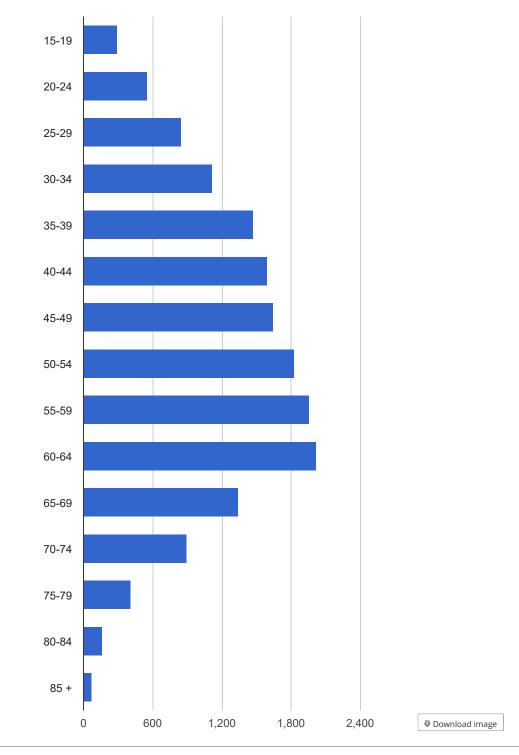
Please share more. (gender_other)

Total Count (N)	Missing*
0	<u>398 (100.0%)</u>

How old are you? (age)

Total Count (N)	Missing*	Unique
398	0 (0.0%)	14

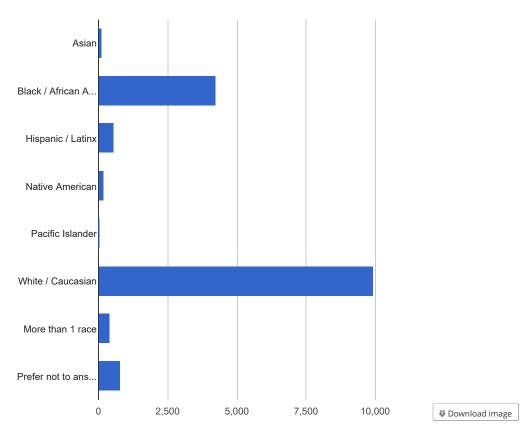
Counts/frequency: 15-19 (0, 0.0%), 20-24 (14, 3.5%), 25-29 (21, 5.3%), 30-34 (25, 6.3%), 35-39 (28, 7.0%), 40-44 (37, 9.3%), 45-49 (30, 7.5%), 50-54 (43, 10.8%), 55-59 (49, 12.3%), 60-64 (43, 10.8%), 65-69 (50, 12.6%), 70-74 (40, 10.1%), 75-79 (14, 3.5%), 80-84 (3, 0.8%), 85 + (1, 0.3%)



How do you describe your race/ethnicity? (raceethnicity)

Total Count (N)	Missing*	Unique
398	0 (0.0%)	7

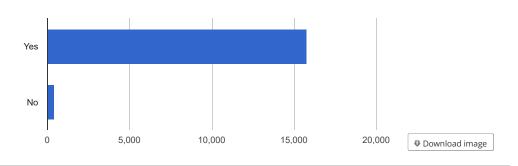
Counts/frequency: Asian (2, 0.5%), Black / African American (94, 23.6%), Hispanic / Latinx (4, 1.0%), Native American (1, 0.3%), Pacific Islander (0, 0.0%), White / Caucasian (265, 66.6%), More than 1 race (11, 2.8%), Prefer not to answer (21, 5.3%)



Is English the primary language spoken in your home? (language)

Total Count (N)	Missing*	Unique
395	<u>3 (0.8%)</u>	2

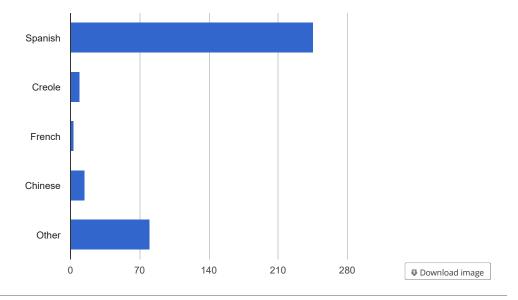
Counts/frequency: Yes (389, 98.5%), No (6, 1.5%)



If no, please share which primary language (languageno)

Total Count (N)	Missing*	Unique
3	<u>395 (99.2%)</u>	2

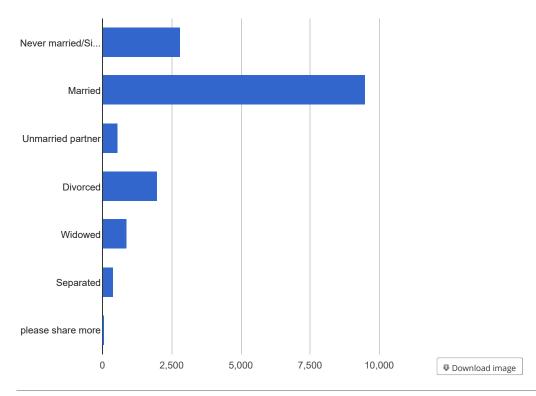
Counts/frequency: Spanish (1, 33.3%), Creole (0, 0.0%), French (0, 0.0%), Chinese (0, 0.0%), Other (2, 66.7%)



What is your marital status? (marriagestatus)

Total Count (N)	Missing*	Unique
397	<u>1 (0.3%)</u>	7

Counts/frequency: Never married/Single (59, 14.9%), Married (236, 59.4%), Unmarried partner (11, 2.8%), Divorced (47, 11.8%), Widowed (25, 6.3%), Separated (18, 4.5%), please share more (1, 0.3%)



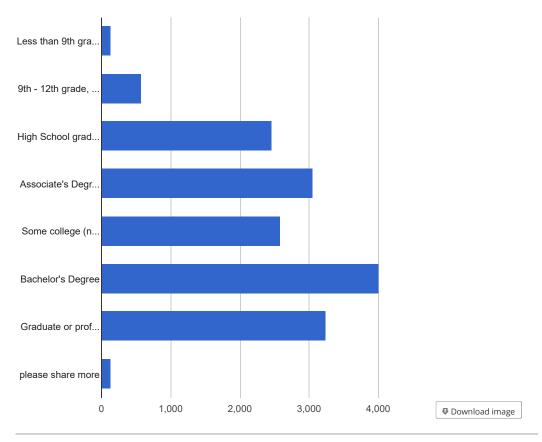
please share more. (marital_other)

Total Count (N)	Missing*
1	<u>397 (99.7%)</u>

What is the highest level of education you have completed? (education)

Total Count (N)	Missing*	Unique
396	<u>2 (0.5%)</u>	8

Counts/frequency: Less than 9th grade (1, 0.3%), 9th - 12th grade, no diploma (5, 1.3%), High School graduate (or GED/equivalent) (60, 15.2%), Associate's Degree or Vocational Training (80, 20.2%), Some college (no degree) (79, 19.9%), Bachelor's Degree (83, 21.0%), Graduate or professional degree (84, 21.2%), please share more (4, 1.0%)



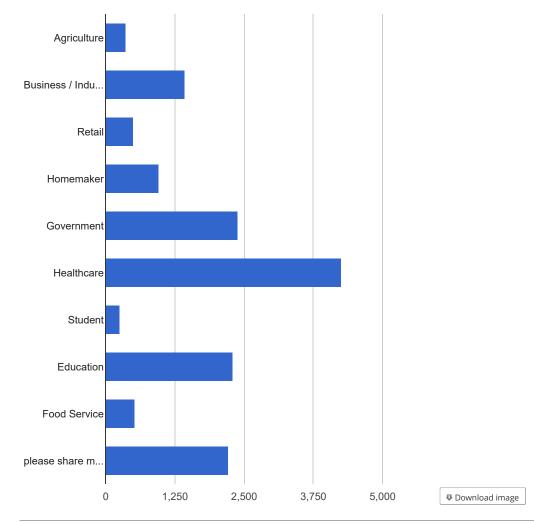
Please share more (please_share_more)

Total Count (N)	Missing*
4	<u>394 (99.0%)</u>

How is your current job best described? (job)

Total Count (N)	Missing*	Unique
373	<u>25 (6.3%)</u>	10

Counts/frequency: Agriculture (2, 0.5%), Business / Industry (34, 9.1%), Retail (7, 1.9%), Homemaker (39, 10.5%), Government (41, 11.0%), Healthcare (126, 33.8%), Student (4, 1.1%), Education (42, 11.3%), Food Service (7, 1.9%), please share more (71, 19.0%)



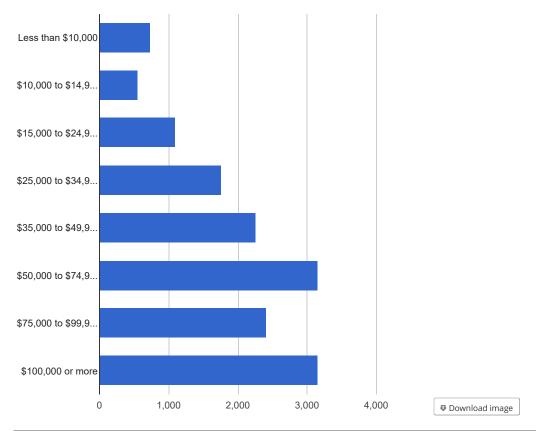
Please share more (job_other)

Total Count (N)	Missing*
71	<u>327 (82.2%)</u>

What is your total household income? (income)

Total Count (N)	Missing*	Unique
374	<u>24 (6.0%)</u>	8

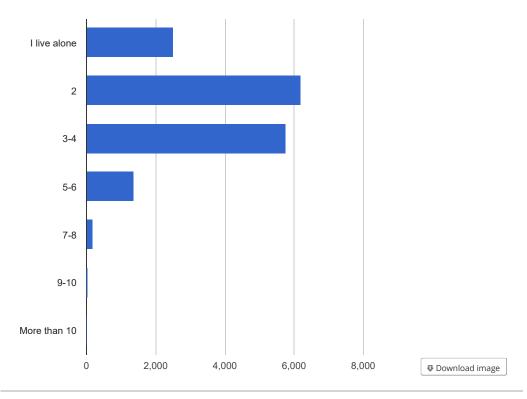
Counts/frequency: Less than \$10,000 (13, 3.5%), \$10,000 to \$14,999 (12, 3.2%), \$15,000 to \$24,999 (35, 9.4%), \$25,000 to \$34,999 (36, 9.6%), \$35,000 to \$49,999 (43, 11.5%), \$50,000 to \$74,999 (94, 25.1%), \$75,000 to \$99,999 (70, 18.7%), \$100,000 or more (71, 19.0%)



How many people live in your household? (householdnumber)

Total Count (N)	Missing*	Unique
392	<u>6 (1.5%)</u>	5

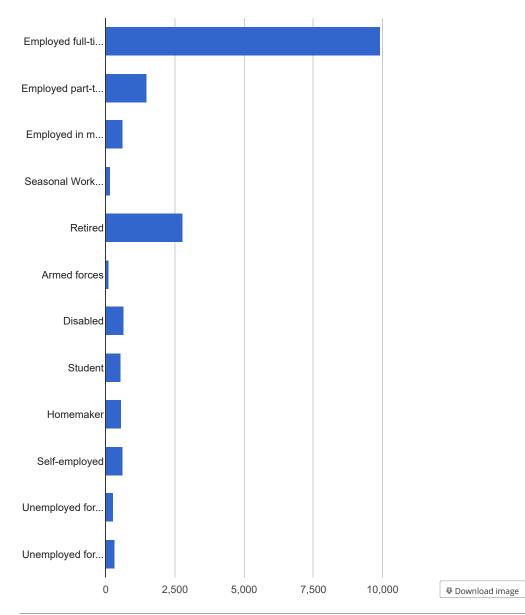
Counts/frequency: I live alone (79, 20.2%), 2 (150, 38.3%), **3**-4 (131, 33.4%), **5**-6 (29, 7.4%), **7**-8 (3, 0.8%), **9**-10 (0, 0.0%), More than 10 (0, 0.0%)



What is your employment status? Please check all that apply. (employment)

Total Count (N)	Missing*	Unique	
393	<u>5 (1.3%)</u>	11	

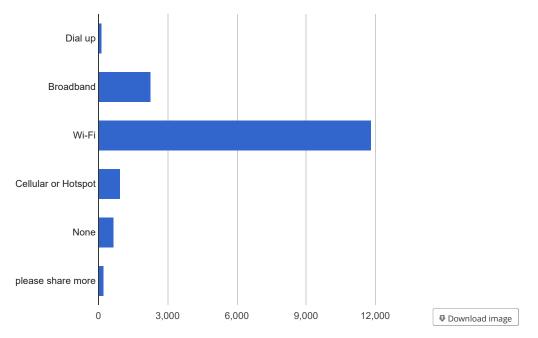
Counts/frequency: Employed full-time (215, 54.7%), Employed part-time (24, 6.1%), Employed in multiple jobs (12, 3.1%), Seasonal Worker/Temporary (0, 0.0%), Retired (104, 26.5%), Armed forces (7, 1.8%), Disabled (20, 5.1%), Student (11, 2.8%), Homemaker (16, 4.1%), Self-employed (15, 3.8%), Unemployed for 1 year or less (6, 1.5%), Unemployed for more than 1 year (9, 2.3%)



What type of internet access do you have at your home? (internet_or_wifi)

Total Count (N)	Missing*	Unique
396	<u>2 (0.5%)</u>	6

Counts/frequency: Dial up (3, 0.8%), Broadband (60, 15.2%), Wi-Fi (306, 77.3%), Cellular or Hotspot (12, 3.0%), None (9, 2.3%), please share more (6, 1.5%)



Other (internet_or_wifi_other)

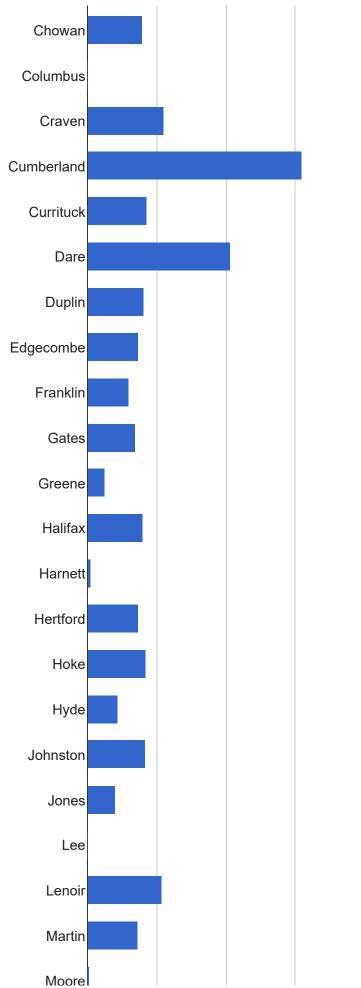
Total Count (N)	Missing*	
6	<u>392 (98.5%)</u>	

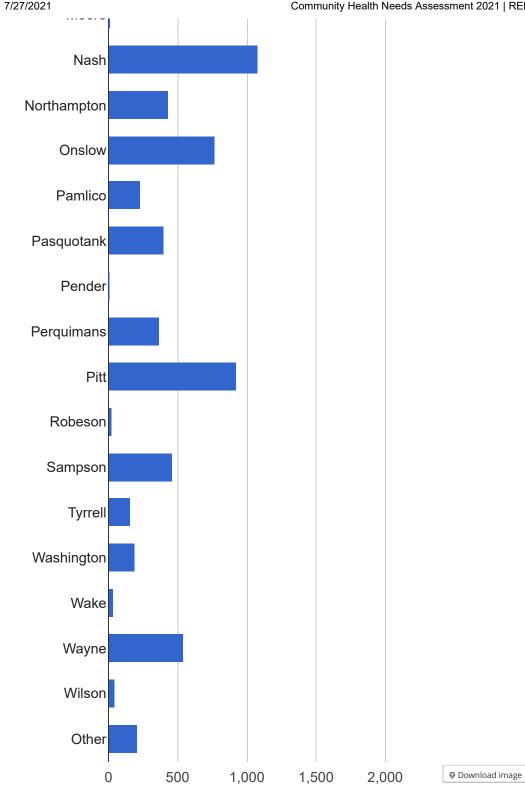
Which county do you live in? (county)

Total Count (N)	Missing*	Unique
398	0 (0.0%)	1

Counts/frequency: Beaufort (0, 0.0%), Bertie (0, 0.0%), Bladen (0, 0.0%), Brunswick (0, 0.0%), Camden (0, 0.0%), Carteret (0, 0.0%), Chowan (0, 0.0%), Columbus (0, 0.0%), Craven (0, 0.0%), Cumberland (0, 0.0%), Currituck (0, 0.0%), Dare (0, 0.0%), Duplin (0, 0.0%), Edgecombe (0, 0.0%), Franklin (0, 0.0%), Gates (0, 0.0%), Greene (0, 0.0%), Halifax (0, 0.0%), Harnett (0, 0.0%), Hertford (0, 0.0%), Hoke (0, 0.0%), Hyde (0, 0.0%), Johnston (0, 0.0%), Jones (0, 0.0%), Lee (0, 0.0%), Lenoir (0, 0.0%), Martin (0, 0.0%), Moore (0, 0.0%), Nash (0, 0.0%), Northampton (0, 0.0%), Onslow (0, 0.0%), Pamlico (0, 0.0%), Pasquotank (398, 100.0%), Pender (0, 0.0%), Perquimans (0, 0.0%), Pender (0, 0.0%), Pitt (0, 0.0%), Robeson (0, 0.0%), Sampson (0, 0.0%), Tyrrell (0, 0.0%), Washington (0, 0.0%), Wake (0, 0.0%), Wayne (0, 0.0%), Wilson (0, 0.0%), Other (0, 0.0%)







Other (county_other)

Total Count (N)	Missing*
0	<u>398 (100.0%)</u>

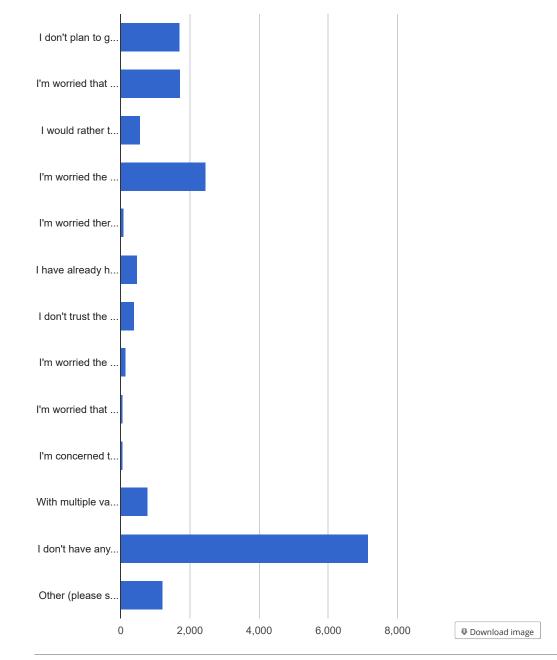
What is your 5 digit zip code? (zip_code)

Total Count (N)	Missing*
196	<u>202 (50.8%)</u>

Which of the following concerns do you have, if any, about receiving a COVID-19 vaccine? (Please select all that apply) (covidconcerns)

Total Count (N)	Missing*	Unique
312	<u>86 (21.6%)</u>	11

Counts/frequency: I don't plan to get a vaccine. (27, 8.7%), I'm worried that the COVID-19 vaccine isn't safe. (33, 10.6%), I would rather take the risk of getting sick with COVID-19. (4, 1.3%), I'm worried the COVID-19 vaccine may be harmful or have side effects. (57, 18.3%), I'm worried there may be a cost associated with receiving the COVID-19 vaccine. (3, 1.0%), I have already had COVID-19 so I don't believe a vaccine is necessary. (12, 3.8%), I don't trust the distribution process of the COVID-19 vaccine. (4, 1.3%), I'm worried the COVID-19 vaccine has not been distributed fairly. (0, 0.0%), I'm worried that the location of the COVID-19 vaccine will be difficult to travel to. (0, 0.0%), I'm concerned that I won't have time to get the COVID-19 vaccine. (2, 0.6%), With multiple vaccines becoming available, I'm concerned about knowing which one is best for me. (22, 7.1%), I don't have any concerns about getting the COVID-19 vaccine. (190, 60.9%), Other (please specify) (32, 10.3%)



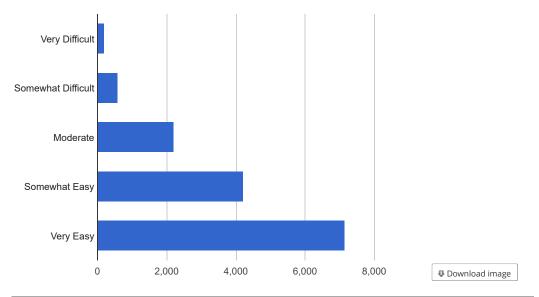
Other (covid_concerns_other)

Total Count (N)	Missing*
27	<u>371 (93.2%)</u>

Find the information you need related to COVID-19? (covideasy)

Total Count (N)	Missing*	Unique
360	<u>38 (9.5%)</u>	5

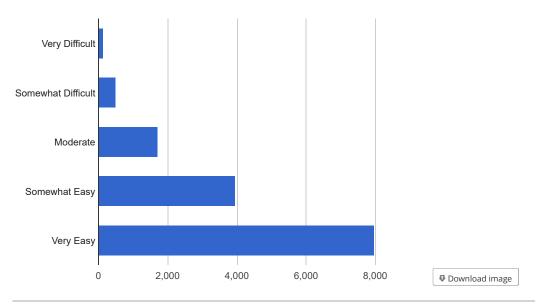
Counts/frequency: Very Difficult (4, 1.1%), Somewhat Difficult (10, 2.8%), Moderate (49, 13.6%), Somewhat Easy (115, 31.9%), Very Easy (182, 50.6%)



Find out where to go to get a COVID-19 vaccine? (covidwhere)

Total Count (N)	Missing*	Unique
359	<u>39 (9.8%)</u>	5

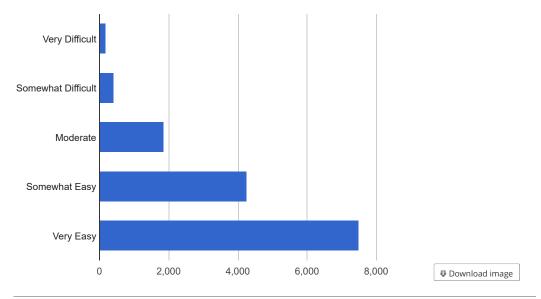
Counts/frequency: Very Difficult (3, 0.8%), Somewhat Difficult (23, 6.4%), Moderate (51, 14.2%), Somewhat Easy (110, 30.6%), Very Easy (172, 47.9%)



Understand information about what to do if you think you have COVID-19? (covidunderstand)

Total Count (N)	Missing*	Unique	
353	<u>45 (11.3%)</u>	5	

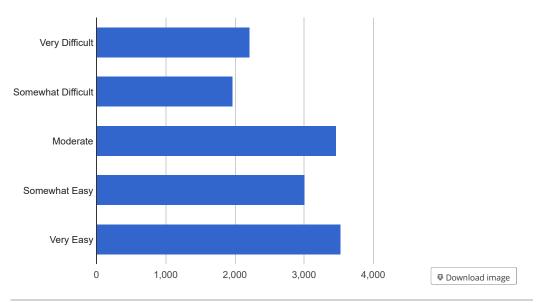
Counts/frequency: Very Difficult (2, 0.6%), Somewhat Difficult (8, 2.3%), Moderate (50, 14.2%), Somewhat Easy (120, 34.0%), Very Easy (173, 49.0%)



Trust if the information about COVID-19 in the media is reliable? (covidtrust)

Total Count (N)	Missing*	Unique
349	<u>49 (12.3%)</u>	5

Counts/frequency: Very Difficult (45, 12.9%), Somewhat Difficult (44, 12.6%), Moderate (84, 24.1%), Somewhat Easy (90, 25.8%), Very Easy (86, 24.6%)

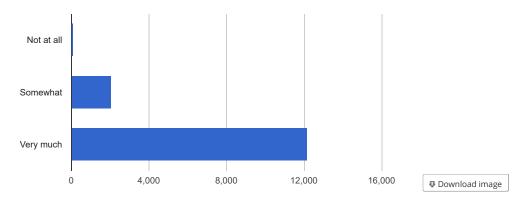


I know how to protect myself from coronavirus. (covidprotect)

Total Count (N)	Missing*	Unique
362	<u>36 (9.0%)</u>	3

Counts/frequency: Not at all (2, 0.6%), Somewhat (35, 9.7%), Very much (325, 89.8%)

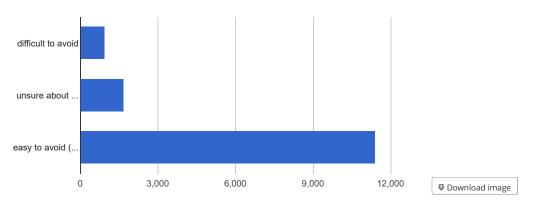
Community Health Needs Assessment 2021 | REDCap



For me avoiding an infection with COVID-19 in the current situation is... (covidavoid)

Total Count (N)	Missing*	Unique
349	<u>49 (12.3%)</u>	3

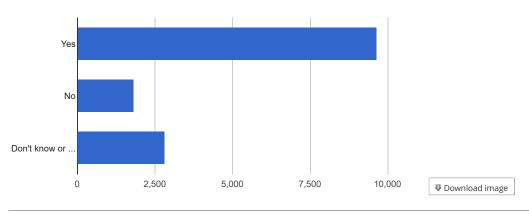
Counts/frequency: difficult to avoid (15, 4.3%), unsure about how to avoid (33, 9.5%), easy to avoid (I have no problem) (301, 86.2%)



Do you think that global warming is happening? (warmingyesno)

Total Count (N)	Missing*	Unique
360	<u>38 (9.5%)</u>	3

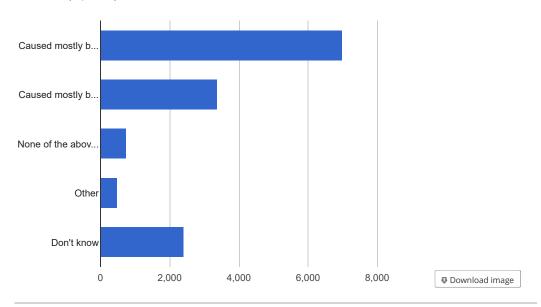
Counts/frequency: Yes (245, 68.1%), No (40, 11.1%), Don't know or unsure (75, 20.8%)



Assuming global warming is happening, do you think it is...? (warmingdoyouthink)

Total Count (N)	Missing*	Unique
358	<u>40 (10.1%)</u>	5

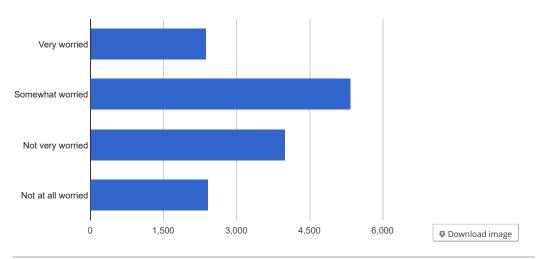
Counts/frequency: Caused mostly by human activities (177, 49.4%), Caused mostly by natural changes in the environment (89, 24.9%), None of the above because global warming isn't happening (25, 7.0%), Other (8, 2.2%), Don't know (59, 16.5%)



How worried are you about global warming? (warmingworried)

Total Count (N)	Missing*	Unique
361	<u>37 (9.3%)</u>	4

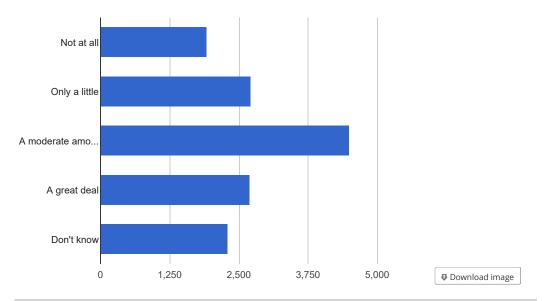
Counts/frequency: Very worried (68, 18.8%), Somewhat worried (119, 33.0%), Not very worried (122, 33.8%), Not at all worried (52, 14.4%)



How much do you think global warming will harm you personally? (warmingharm)

Total Count (N)	Missing*	Unique
359	<u>39 (9.8%)</u>	5

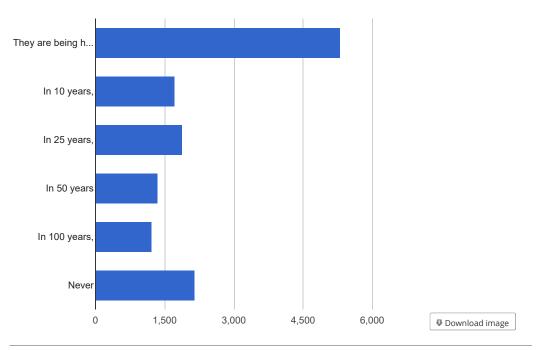
Counts/frequency: Not at all (49, 13.6%), Only a little (77, 21.4%), A moderate amount (111, 30.9%), A great deal (73, 20.3%), Don't know (49, 13.6%)



When do you think global warming will start to harm people in the United States? (warmingwhenharm)

Total Count (N)	Missing*	Unique	
346	<u>52 (13.1%)</u>	6	

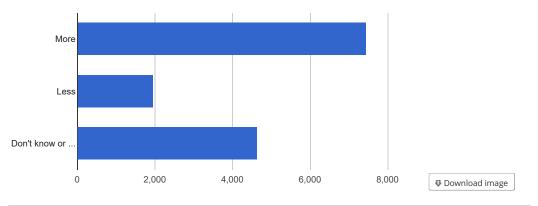
Counts/frequency: They are being harmed right now, (126, 36.4%), In 10 years, (48, 13.9%), In 25 years, (49, 14.2%), In 50 years (40, 11.6%), In 100 years, (35, 10.1%), Never (48, 13.9%)



Do you think the government and politicians in your county should be doing more or less to address global warming? (*warminggovt*)

Total Count Missing (N)		Unique
355	<u>43 (10.8%)</u>	3

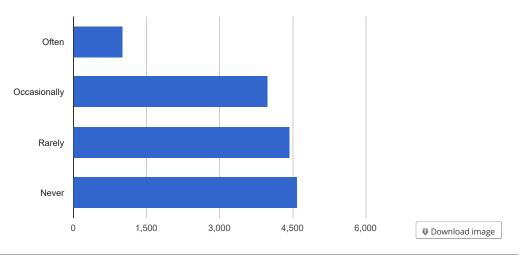
Counts/frequency: More (189, 53.2%), Less (44, 12.4%), Don't know or not sure (122, 34.4%)



How often do you discuss global warming with your friends and family? (warmingfriends)

Total Count (N)	Missing*	Unique	
355	<u>43 (10.8%)</u>	4	

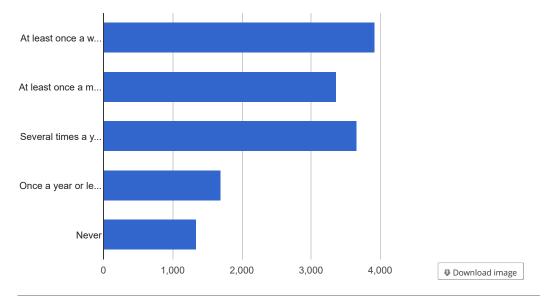
Counts/frequency: Often (28, 7.9%), Occasionally (102, 28.7%), Rarely (118, 33.2%), Never (107, 30.1%)



How often do you hear about global warming in the media? (warmingmedia)

Total Count (N)	Missing*	Unique
353	<u>45 (11.3%)</u>	5

Counts/frequency: At least once a week (103, 29.2%), At least once a month (85, 24.1%), Several times a year (98, 27.8%), Once a year or less often (48, 13.6%), Never (19, 5.4%)



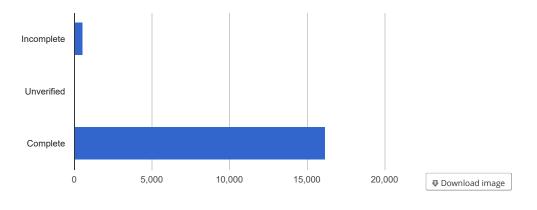
Thank you for your participation! Please feel free to include any additional comments in the box below. *(thankyou)*

Total Count (N)	Missing*
15	<u>383 (96.2%)</u>

Complete? (form_1_complete)

Total Count (N)	Missing*	Unique	
398	0 (0.0%)	2	

Counts/frequency: Incomplete (16, 4.0%), Unverified (0, 0.0%), Complete (382, 96.0%)



* Note: Values listed as 'Missing' may include records with a Missing Data Code (if Missing Data Codes are defined).

Appendix B

HNC 2030 County/State Data

Social and Economic Factors					
Health Indicator	Desired Result	Definition	Pasquotank County	North Carolina	HNC 2030 Target
Poverty*	All people in North Carolina are financially stable and have lifetime economic prosperity.	Percent of individuals with incomes at or below 200% of the Federal Poverty Level	No data available	31% (2020)	27.0%
Unemployment*	All people of working age in North Carolina have equitable pathway to fulfilling employment.	Percent of population aged 16 and older who are unemployed but seeking work	No data available	6.4% (2020)	Reduce unemployment disparity ratio between white and other populations to 1.7 or lower
Short-term Suspensions	All people in North Carolina are supported by a K-12 educational system that values diversity, equity, and inclusion for its students, faculty, staff, and communities.	Number of out-of- school short-term suspensions in educational facilities for all grades per 10 students	DPI unable to provide update to SCHS	1.5 (2018-2019)	0.80
Incarceration**	North Carolina embraces a fair and equitable justice system, free from racism and bias, where safety is foundational to all aspects of a free society, and all communities are free from harm and violence.	Incarceration in North Carolina prisons per 100,000 population	222 (2020)	288 (2020)	150
Adverse Childhood Experiences	All children in North Carolina thrive in safe, stable, and nurturing environments.	Percent of children who have experienced two or more Adverse Childhood Experiences at or below 200% FPL	ACEs do not have county level data	20.9% (2019/2010)	18.0%
Third Grade Reading Proficiency	All children in North Carolina can discover the joy of reading at an early age and are supported in the home, school, and community to be lifelong readers.	Percent of children reading at a proficient level or above based on third grade End of Grade exams: Proficiency defined as Level 3 or higher	DPI unable to provide update to SCHS	56.8% (2018-2019)	80.0%

Notes for social and economic factor data:

*Poverty and unemployment data come from American Community Survey – one-year estimates. 2020 ACS data are considered experimental and should not be compared to prior ACS data years. ACS data can only estimate county level data for a limited number of counties due to sample size, so 2019 data is reported here at the county level. ACS releases 5-year estimates in March 2022 that will be useful for comparisons going forward.

** Incarceration data should be age adjusted, but 2020 data set is considered experimental and does not include 13 and older population. Prior 2020, the rate is per 100,00 NC population age adjusted.

	Physical Environment					
Health Indicator	Desired Result	Definition	Pasquotank County	North Carolina	HNC 2030 Target	
Access to Exercise Opportunities	All people in North Carolina have equitable and adaptive/adaptable access to physical activity opportunities across the lifespan.	Percent of the population living half a mile from a park in any area, one mile from a recreational center in a metropolitan area, or three miles from a recreational center in a rural area	69% (2019)	74% (2019)	92.0%	
Limited Access to Healthy Food*	All people in North Carolina have equitable access to affordable, nutritious,	Percent of people who are low-income that are not near a grocery store	12% (2015)	7% (2015)	5.0%	
Food Insecurity**	culturally appropriate foods.		15% (2018)	14% (2018)	(No target)	
Severe Housing Problems	All people in North Carolina have safe, affordable, quality housing opportunities.	Percent of households with at least 1 of 4 severe housing problems	18% (2013-2017)	15% (2013- 2017)	14.0%	

Notes for Physical Environment data:

* The U.S. Department of Agriculture last updated this measure in 2015.

** Food insecurity added to HNC 2030 because the data are updated annually (with a two-year delay in reporting).

	Health Behaviors						
Health Indicator	Desired Result	Definition	Pasquotank County	North Carolina	HNC 2030 Target		
Drug Overdose Deaths	All individuals and families in North Carolina with substance use disorder receive person-centered care incorporating evidence-based behavioral and pharmacological approaches.	Number of persons who die because of drug poisoning per 100,000 population (unintentional poisoning deaths/overdose deaths)	61.10 (2020)	32.50 (2020)	18.0		
	All people in North Carolina live in communities that	school students		MS: 10.4% (2019)	9.0%		
Tobacco Use*	support tobacco-free/e- cigarette-free lifestyles	reporting current use of any tobacco product		HS: 27.3% (2019)	9.0%		
		Percentage of adults reporting current use of any tobacco product	24.8% (2020)	22.6% (2020)	15.0%		
Excessive Drinking*	All North Carolina communities support safe and responsible use of alcohol.	Percent of adults reporting binge or heavy drinking	17.3% (2020)	15.6% (2020)	12.0%		

Sugar-Sweetened Beverage Consumption*	All people in North Carolina live in communities that support healthy food and beverage choices.	Percent of youth reporting consumption of one or more sugar- sweetened beverages per day	DPI unable to provide update to SCHS	30.1 % (2019)	17.0%
		Percent of adults reporting consumption of one or more sugar- sweetened beverages per day	39.5% (2019)	35.4% (2019)	20.0%
HIV Diagnosis	All people in North Carolina experience sexual health with equitable access to quality and culturally competent prevention, treatment, and management of sexually transmitted infections.	Number of new HIV diagnoses per 100,000 population	14.7% (2020)	12.0 (2020)	6.0
Teen Births	All people in North Carolina live in communities support healthy choices for family planning and have equitable access to high quality, affordable reproductive health services.	Number of births to girls aged 15-19 per 1,000 population	18.0 (2019)	18.2 (2019)	10.0

Notes for Health Behaviors data:

*Adult Tobacco Use, Adult Sugar-Sweetened Beverage Consumption, and Excessive Drinking data are only available as regional data from the Behavioral Risk Factor Surveillance System.

*BRFSS Data for Adult Smoking, Adult Sugar Sweetened Beverage Consumption, and Excessive Drinking are reported for the LHD Region, and is not county level data.

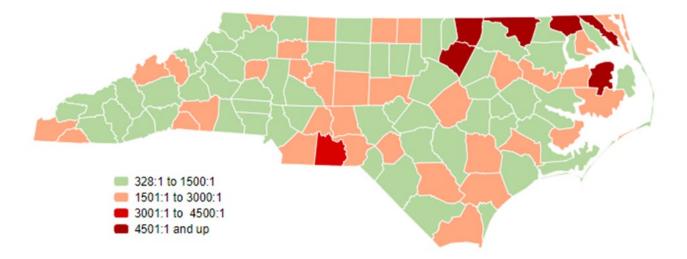
Note: HIV Diagnosis *2020 data should be treated with caution due to reduced availability of testing caused by the COVID-19 pandemic.

Health Outcomes					
Health Indicator	Desired Result	Definition	Pasquotank County	North Carolina	HNC 2030 Target
	All babies in North Carolina are born healthy, thrive in	Rate of infant deaths per 1,000 live births	10.9 (2020)	6.9 (2020)	6.0
Infant Mortality	caring and healthy homes, and see their first birthday.	Disparity ratio between white non-Hispanic and African American, non- Hispanic infant deaths	2.19 (2016-2020)	2.59 (2016-2020)	Black/White disparity ratio = 1.5
Life Expectancy (years)	All people in North Carolina have long and healthy lives.	Average number of years of life remaining for persons who have attained a given age	74.9 (2020)	76.4 (2020)	82.0

Notes on Health Outcomes:

*Disparity ratio – Rates based on less than 10 deaths are unreliable and should be interpreted with caution. Source: NC Department of Health & Human Services State Center for Health Statistics, 29NOV2021. See table on website for more information. <u>https://schs.dph.ncdhhs.gov/data/vital/ims/2020/2020-IMR-TABLE3b.html</u>

Clinical Care					
Health Indicator	Desired Result	Definition	Pasquotank County	North Carolina	HNC 2030 Target
Uninsured	All people in North Carolina live in communities with access to comprehensive, high quality, affordable health insurance.	Population under age 65 without insurance	No data available	12.9% (2020)	8.0%
Early Prenatal Care	All birthing people have healthy pregnancies and maternal birth outcomes.	Percentage of women who receive pregnancy- related health care services during the first trimester of pregnancy	80.2% (2020)	73.1% (2020)	80.0%
Suicide	All people in North Carolina live in communities that foster and support positive mental health.	Age-adjusted number of deaths attributable to self- harm per 100,000 population	14.8 (2020)	13.3 (2020)	11.1
Primary Care Clinicians (Counties at or below 1:1500 providers to population)	All people in North Carolina live in communities with access to comprehensive, high quality, affordable health care.	Primary care workforce as a ration of the number of full- time equivalent primary care clinicians to county population (primary care provider to population ratio)	See map below		25% decrease for counties above 1:1500 provider to population



Appendix C

County Data Tables (Spring 2021)

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References

 Table 1. Population Estimate, Pasquotank County, North Carolina, and United States

 (2019)

Pasquotank County		North Carolina		United States	
39,824		10,488,084		328,239,523	
Estimated Percent Change April 1, 2010 to July 1, 2019	-2.1%	Estimated Percent Change April 1, 2010 to July 1, 2019	10.0%	Estimated Percent Change April 1, 2010 to July 1, 2019	6.3%
Source: U.S. Census Bureau Populations Estimate Program (PEP) & U.S. Census Bureau.					

American Community Survey (ACS) 1-Year Estimate https://www.census.gov/quickfacts/fact/table/pasquotankcountynorthcarolina/RHI825219

Table 2. Age Distribution, Pasquotank County and North Carolina (2019)

Age Group	Pasquotank County (%)	North Carolina (%)
Persons under 5 years	6.1%	5.8%
Persons under 18 years	22.0%	21.9%
Persons 65 years and over	17.2%	16.7%

Source: U.S. Census Bureau Populations Estimate Program (PEP) & U.S. Census Bureau, American Community Survey (ACS) 1-Year Estimate https://www.census.gov/quickfacts/fact/table/pasquotankcountynorthcarolina/RHI825219

Table 3. Age Distribution by Age Group, Pasquotank County (2015-2019)Age GroupEstimatePercent						
Total population	39,514	100%				
Under 5 years	2,614	6.6%				
5 to 9 years	2,498	6.3%				
10 to 14 years	2,365	6.0%				
15 to 19 years	2,534	6.4%				
20 to 24 years	2,579	6.5%				
25 to 34 years	5,501	13.9%				
35 to 44 years	4,556	11.5%				
45 to 54 years	4,923	12.5%				
55 to 59 years	2,911	7.4%				
60 to 64 years	2,515	6.4%				
65 to 74 years	3,922	9.9%				
75 to 84 years	1,735	4.4%				
85 years and over	861	2.2%				
Median age (years)	38.6					

Table ID: DP05

https://data.census.gov/cedsci/table?q=DP05&g=0500000US37139&tid=ACSDP5Y2019.DP0 5&hidePreview=true&moe=false

Table 4. Population Distribution by Gender	, Pasquotank County and North Carolina
(2019)	

Gender	Pasquotank (Percent)	North Carolina (Percent)	
Female	51.1%	51.4%	
Male	48.9%	48.6%	

Source: U.S. Census Bureau Populations Estimate Program (PEP) & U.S. Census Bureau, American Community Survey (ACS) 1-Year Estimate. Sex estimates of the population are produced for the United States, states, and counties, as well as for the Commonwealth of Puerto Rico and its municipios (county-equivalents for Puerto Rico). Sex is based on the biological attributes of men and women (chromosomes, anatomy, and hormones). https://www.census.gov/quickfacts/fact/table/pasquotankcountynorthcarolina/RHI825219

Table 5. Veterans, Pasquotank County (2015-2019)					
	Number	Percent of population 18 years and older			
Veterans	3,662	12.2%			
Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates					
Table ID: S2101					
https://data.census.gov/cedsci/table?q=Pasquotank%20County,%20North%20Carolina&text=v					
eteran%20status&g=0500000US37139&tid=ACSST5Y2019.S2101&moe=false&hidePreview					
<u>=true</u>					

Table 6. Race/Ethnicity, Pasquotank County and North Carolina (2015-2019)					
Race	Pasquotank County		North Carolina		
Kace	Number	Percent	Number	Percent	
White	23,087	58.4%	7,049,919	68.7%	
Black or African American	14,449	36.6%	2,200,761	21.4%	
American Indian and Alaska Native	27	0.1%	123,952	1.2%	
Asian	485	1.2%	292,992	2.9%	
Native Hawaiian and Other Pacific Islander	0	0.0%	7,213	0.1%	
Hispanic or Latino (of any race)	2,123	5.4%	962,665	9.4%	
Some other race	201	0.5%	316,763	3.1%	
Two or more races	1,261	3.2%	273,276	2.7%	
Total	39,514	100%	10,264,876		
Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates					
Table ID: DP05					
https://data.census.gov/cedsci/table?text=DP05&g=0500000US37139&tid=ACSDP5Y2019.D					
P05&hidePreview=true&moe=false					

Table 7. Hispanic or Latino Origin and Race, Pasquotank County and North Ca	irolina
(2015-2019)	

	Race and Hispanic or Latino Origin in the past 12 months							
	XX 71 · 4	Black or	American		Native	Some	Two or	
County/State	White alone	African	Indian and Alaska	Asian alone	Hawaiian and other Islander	Other race	more	
	aione	American	Native	aione	alone	alone	races	
Pasquotank	54.8%	36.4%	0.1%	1.2%	0.0%	0.0%	2.2%	
North Carolina	63.1%	21.1%	1.1%	2.8%	0.1%	0.2%	2.2%	
Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates								
Table ID: DP05								

https://data.census.gov/cedsci/table?text=DP05&g=0500000US37139&tid=ACSDP5Y2019.D P05&hidePreview=true&moe=false

Table 8. Limited English-Speaking Households, Pasquotank County (2015-2019)							
All households	14,697	100%					
Limited English-speaking households	166 ± 90	1.1%					
Households Speaking:	Number	Percent					
Spanish	573 ± 123	3.9%					
Other Indo-European languages	238 ± 114	1.6%					
Asian and Pacific Island languages	144 ± 75	1.0%					
Other languages	11 ± 18	0.1%					
Source: U.S. Census Bureau, American Com	munity Survey (A	CS), 5-Year Estimates					
Table ID: S1602							
https://data.census.gov/cedsci/table?q=S1602&g=0500000US37139&tid=ACSST5Y2019.S16							
02&hidePreview=true							

Table 9. Educational Attainment Population 25+ years, Pasquotank County and NorthCarolina (2015-2019)

	Pasquotank County	North Carolina				
High School Graduate or Higher	87.0%	87.8%				
Less than 9 th Grade	4.8%	4.5%				
High School, No Diploma	8.2%	7.7%				
High School Graduate or Equivalency	32.0%	25.7%				
Some College, No Degree	23.8%	21.2%				
Associate Degree	9.1%	9.7%				
Bachelor's Degree	13.5%	20.0%				
Graduate or Professional Degree	8.6%	11.3%				
Source: U.S. Census Bureau, American Com	munity Survey (ACS), 5-Year Estimates				
Table ID: S1501						
https://data.census.gov/cedsci/table?q=S1501&g=0500000US37139&tid=ACSST5Y2019.S15						
01&hidePreview=true						

Table 10. SAT scores for Pasquotank County Public Schools with State and National Scores (2016-2019)

		SAT Scores				
	2019	2018	2017	2016		
Pasquotank County	985	980	981	915		
North Carolina	1,091	1,090	1,074	997		
United States	1,039	1,049	NR	NR		
Source: North Carolina School Report Cards						
Source: North Carolina School Report Cards						

https://ncreports.ondemand.sas.com/src/?county=Pasquotank

Table 11. ACT Scores for Pasquotank County Public Schools and North Carolina (2016-2019)

	ACT Proficiency					
	2019	2018	2017	2016		
Pasquotank County	36.6%	39.2%	43.1%	48.1%		
North Carolina	55.8%	57.9%	58.8%	59.9%		
Source: North Carolina School Report Cards						

Source: North Carolina School Report Cards <u>https://ncreports.ondemand.sas.com/src/?county=Pasquotank</u>

Table 12. Income per Household in the Past 12 Months (Inflation-Adjusted Dollars), Pasquotank County and North Carolina (2015-2019)

Income Level	Pasquotank County	North Carolina
Below \$10,000	7.4%	6.4%
\$10,000-\$14,999	6.0%	5.0%
\$15,000-\$24,999	12.1%	10.3%
\$25,000-\$34,999	9.3%	10.3%
\$35,000-\$49,999	14.4%	13.9%
\$50,000-74,999	18.8%	18.0%
\$75,000-\$99,999	14.1%	12.4%
\$100,000-\$149,999	11.5%	13.1%
\$150,000-\$199,999	4.2%	5.1%
\$200,000 or more	2.1%	5.4%
Median household income	\$50,558	\$54,602
Source: U.S. Census Bureau, A	merican Community Survey (A	CS), 5-Year Estimates
Table ID: S1901		

https://data.census.gov/cedsci/table?q=income&g=0500000US37139&tid=ACSST5Y2019.S1 901&moe=false&hidePreview=true

Table 13. Poverty Status in the Past 12 Months Disaggregated by Age, Pasquotank County and North Carolina (2015-2019)

	Age Group						
County/State	Under 5	5-17	18-34	35-64	60 years	65 years	
County/State	years	years	years	years	and over	and over	
Pasquotank County	21.6%	22.9%	19.0%	13.0%	12.4%	8.8%	
North Carolina	23.8%	20.2%	18.3%	11.3%	9.8%	9.1%	
		C	·				

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates Table ID: S1701

https://data.census.gov/cedsci/table?q=Pasquotank%20county%20north%20carolina%20pover ty%20status&tid=ACSST5Y2019.S1701&hidePreview=true&moe=false

Label	Estimate
Total:	16,903
Car, truck, or van:	15,715
Drove alone	13,866
Carpooled:	1,849
In 2-person carpool	1,328
In 3-person carpool	397
In 4-person carpool	78
In 5- or 6-person carpool	22
In 7-or-more-person carpool	24
Public transportation (excluding taxicab):	25
Bus	25
Subway or elevated rail	0
Long-distance train or commuter rail	0
Light rail, streetcar, or trolley (carro público in	0
Puerto Rico)	
Ferryboat	0
Taxicab	43
Motorcycle	14
Bicycle	46
Walked	411
Other means	239
Worked from home	410
Source: U.S. Census Bureau, American Community	Survey (ACS), 5-Year Estimates
Table ID: B08301	
https://data.census.gov/cedsci/table?q=B08301&g=0	500000US37139&tid=ACSDT5Y2019

08301&hidePreview=true

 Table 15. Financial Characteristics for Housing Units with a Mortgage in Pasquotank
 County (2015-2019)

	Pasquotank County, N	orth Carolina
	Owner-occupied	% owner-occupied
	housing units with a	housing units with a
	mortgage	mortgage
Owner-Occupied Housing Units with a Mortgage	5,134	5,134
Less than \$50,000	240	4.7%
\$50,000 to \$99,999	785	15.3%
\$100,000 to \$299,999	3,391	66.0%
\$300,000 to \$499,999	559	10.9%
\$500,000 to \$749,999	129	2.5%
\$750,000 to \$999,999	18	0.4%
\$1,000,000 or more	12	0.2%
Median (dollars)	\$176,000	\$176,000
Mortgage Status		
With either a second mortgage, or home equity loan, but not both	595	11.6%
Second mortgage only	97	1.9%
Home equity loan only	498	9.7%
Both second mortgage and home equity		
loan	0	0.0%
No second mortgage and no home	4,539	88.4%
equity loan Household Income in the Past 12 Months (in 2019 inflation-adjusted dollars)		
Less than \$10,000	183	3.6%
\$10,000 to \$24,999	293	5.7%
\$25,000 to \$34,999	315	6.1%
\$35,000 to \$49,999	503	9.8%
\$50,000 to \$74,999	1,162	22.6%
\$75,000 to \$99,999	1,030	20.1%
\$100,000 to \$149,999	999	19.5%
++=	649	12.6%
\$150,000 or more		

https://data.census.gov/cedsci/table?q=Owner-occupied%20units%20a%20Mortgage&g=0500000US37139&tid=ACSST5Y2019.S 2506&moe=false&hidePreview=true

 Table 16. Financial Characteristics for Housing Units without a Mortgage in Pasquotank County (2015-2019)

	Pasquotank County, North Carolina				
	Owner-occupied housing units without a mortgage	% owner-occupied housing units without a mortgage			
Owner-Occupied Housing Units with a Mortgage	3,630	3,630			
Less than \$50,000	646	17.8%			
\$50,000 to \$99,999	640	17.6%			
\$100,000 to \$199,999	1,328	36.6%			
\$200,000 to \$299,999	616	17.0%			
\$300,000 to \$499,999	316	8.7%			
\$500,000 to \$749,999	63	1.7%			
\$750,000 to 999,999	0	0.0%			
\$1,000,000 or more	21	0.6%			
Median (dollars)	\$136,500	\$136,500			
Household Income in the Past 12 Months (in 2019 inflation-adjusted					
dollars) Less than \$10,000	209	5.8%			
\$10,000 to \$24,999	700	19.3%			
\$25,000 to \$34,999	451	12.4%			
\$35,000 to \$49,999	626	17.2%			
\$50,000 to \$74,999	601	16.6%			
\$75,000 to \$99,999	539	14.8%			
\$100,000 to \$149,999	283	7.8%			
\$150,000 or more	221	6.1%			
	\$46,957	\$46,957			

https://data.census.gov/cedsci/table?q=without%20a%20Mortgage&g=0500000US37139&tid =ACSST5Y2019.S2507&moe=false&hidePreview=true

Table 17. Live Births, Pasquotank County and North Carolina (2018)								
			White-	White	Black,	Black		
County/State	Total	Total	non-	non-	non-	non-	Hispanic	Hispanic
County/State	Births	Rate	Hispanic	Hispanic	Hispanic	Hispanic	number	rate
			number	rate	number	rate		
Pasquotank	454	11.5	242	11.0	159	10.9	44	19.5
North Carolina	118,957	11.5	64,637	9.8	28,719	12.5	18,359	18.4
Source: N.C. State Center for Health Statistics								
https://schs.dph	.ncdhhs.g	ov/data	vital/volu	me1/2018/	Pasquotanl	<u>k.html</u>		

Table 18. Live Births by Sex, Pasquotank County (2018)									
County/State	Total	Total Rate	White, Non- Hispanic	White, Non- Hispanic rate	Black, non- Hispanic	Black, non- Hispanic rate	Hispanic	Hispanic rate	
Male	244	6.2	127	5.8	83	5.7	30	13.3	
Females	210	5.3	115	5.2	76	5.2	14	6.2	
	Source: N.C. State Center for Health Statistics								

https://schs.dph.ncdhhs.gov/data/vital/volume1/2018/Pasquotank.html

	1011 21		8		Pasquotank County and North Carolina (2014-20 Non-Hispanic								
		Tota	ıl	Total		Whi	te	Blac	:k	Other		Hispa	nic
County of Residence	Birth Weight	Births	Pct.	Births	Pct.	Births	Pct.	Births	Pct.	Births	Pct.	Births	Pct.
North	Low	55,413	9.2	48,847	9.6	25,047	7.6	20,450	14.2	3,350	9.4	6,566	7.2
North Carolina	Very Low	10,222	1.7	9,080	1.8	4,011	1.2	4,591	3.2	478	1.3	1,142	1.3
	Low	231	9.4	219	9.6	90	7.1	121	12.7	8	15.1	12	6.7
Pasquotank Very Low 43 1.8 42 1.8 10 0.8 29 3.0 3 5.7 1 0.6													
Source: N.C. State Center for Health Statistics													
https://schs.dph.ncdhhs.gov/data/databook/CD6A-													
B%20LBW%20&%20VLBW%20by%20race.html													

Table 20. Fetal Death Rates per 1,000 Deliveries, Pasquotank County and North Carolina (2014-2018)

	Total Fetal Deaths	Total Fetal Death Rate	White Non- Hispanic Fetal Deaths	White Non- Hispanic Fetal Death Rate	Af. Am. Non- Hispanic Fetal Deaths	Af. Am. Non- Hispanic Fetal Death Rate	Other Non- Hispanic Fetal Deaths	Other Non- Hispanic Fetal Death Rate	Hispanic Fetal Deaths	Hispanic Fetal Death Rate
North Carolina	4,166	6.9	1,764	5.3	1,682	11.6	194	5.4	526	5.7
Pasquotank	11	*	3	*	6	*	1	*	1	*
	Source: N.C. State Center for Health Statistics https://schs.dph.ncdhhs.gov/data/databook/CD8%20fetal%20death%20rates.rtf									

Table 21. C	Table 21. Cancer Incidence Rates for selected sites per 100,000 population age adjusted									
to the 2000 U.S. Census, Pasquotank County and North Carolina (2012-2016)										
County Colon/Rectum Lung/Bronchus Female Breast Prostate All Cancers										
County	County Cases Rate Cases Rate Cases Rate Cases Rate Cases Rate									
North Carolina	21,168	37.1	40,216	68.8	49,457	161.8	35,584	115.9	277,277	481.9
Pasquotank	Pasquotank 106 45.9 171 71.7 242 193.1 160 138.4 1,167 495.8									
Source: N.C. State Center for Health Statistics https://schs.dph.ncdhhs.gov/data/databook/CD13A%20leadingcancers.xlsx										

Table 22. Neonatal (<28 Days) Death Rates, Pasquotank County and North Carolina (2014-2018)</th>

	0)									
	Total neonate deaths	Total neonatal death rate	White non- Hispanic neonatal deaths	White non- Hispanic neonatal death rate	Af. Am. Non- Hispanic neonatal deaths	Af. Am. Non- Hispanic neonatal death rate	Other non- Hispanic neonatal deaths	Other non- Hispanic neonatal death rate	Hispanic neonatal deaths	Hispanic neonatal death rate
North Carolina	2,865	4.8	1,092	3.3	1,247	8.7	160	4.5	366	4.0
Pasquotank	10	*	3	*	7	*	0	*	0	*

Prepared by N.C. DHHS State Center for Health Statistics

Note: rates based on small numbers (fewer than 20 cases) are unstable and are not reported" <u>https://schs.dph.ncdhhs.gov/data/databook/CD9A%20neonatal%20death%20rates.rtf</u>

	no	nite, on- oanic	Ame n	rican rican, on- panic	Ind ne	erican lian, on- panic	Ra	ther ices, on- panic	His	panic	N	Iale	Fen	nale	Ove	erall
Cause of Death:	Deat hs	Rate	Dea ths	Rate	Dea ths	Rate	Dea ths	Rate	Dea ths	Rate	Deat hs	Rate	Deat hs	Rate	Deat hs	Rate
All Causes	1,354	894.5	711	918.2	6	N/A	13	N/A	23	491.9	1,055	1,027.2	1,052	772.5	2,107	889.1
Diseases of Heart	409	261.2	193	248.3	2	N/A	7	N/A	5	N/A	316	309.5	300	209.0	616	255.0
Acute Myocardial Infarction	169	106.9	87	113.6	1	N/A	2	N/A	2	N/A	116	117.5	145	98.2	261	108.0
Other Ischemic Heart Disease	134	84.8	59	74.9	0	N/A	4	N/A	2	N/A	117	109.6	82	58.8	199	81.4
Cerebrovascular Disease	59	37.0	39	50.8	0	N/A	2	N/A	0	N/A	48	47.3	52	36.2	100	41.3
Cancer	285	181.9	154	189.3	3	N/A	1	N/A	5	N/A	246	225.5	202	149.6	448	182.9
Colon, Rectum, and Anus	28	18.1	11	N/A	1	N/A	0	N/A	0	N/A	22	21.4	18	N/A	40	16.5
Pancreas	15	N/A	12	N/A	0	N/A	0	N/A	0	N/A	16	N/A	11	N/A	27	10.7
Trachea, Bronchus, and Lung	91	55.7	37	44.2	0	N/A	1	N/A	1	N/A	75	64.6	55	39.7	130	51.2
Breast	22	26.5	14	N/A	0	N/A	0	N/A	1	N/A	0	N/A	37	28.4	37	28.4
Prostate	17	N/A	14	N/A	0	N/A	0	N/A	0	N/A	31	31.8	0	N/A	31	31.8
Diabetes Mellitus	38	24.6	40	49.9	0	N/A	0	N/A	2	N/A	40	37.4	40	28.8	80	32.5
Pneumonia and Influenza	25	16.9	21	27.4	0	N/A	0	N/A	0	N/A	25	26.0	21	15.2	46	19.5
Chronic Lower Respiratory Diseases	76	48.2	21	26.6	0	N/A	1	N/A	0	N/A	50	49.5	48	33.8	98	40.6
Chronic Liver Disease and Cirrhosis	22	15.1	6	N/A	0	N/A	0	N/A	1	N/A	20	18.1	9	N/A	29	12.3
Septicemia	17	N/A	17	N/A	0	N/A	0	N/A	0	N/A	16	N/A	18	N/A	34	14.8
Nephritis, Nephrotic Syndrome, and Nephrosis	10	N/A	7	N/A	0	N/A	0	N/A	0	N/A	10	N/A	7	N/A	17	N/A
Unintentional Motor Vehicle Injuries	15	N/A	8	N/A	0	N/A	0	N/A	0	N/A	12	N/A	11	N/A	23	11.0
All Other Unintentional Injuries	47	42.1	12	N/A	0	N/A	0	N/A	2	N/A	36	37.2	25	23.8	61	30.3
Suicide	28	21.9	5	N/A	0	N/A	0	N/A	1	N/A	23	23.3	11	N/A	34	16.1
Homicide	5	N/A	8	N/A	0	N/A	0	N/A	0	N/A	9	N/A	4	N/A	13	N/A
Alzheimer's disease	54	34.8	28	38.5	0	N/A	0	N/A	0	N/A	24	26.6	58	40.1	82	35.0
Acquired Immune Deficiency Syndrome	1	N/A	0	N/A	0	N/A	0	N/A	0	N/A	1	N/A	0	N/A	1	N/A

https://schs.dph.ncdhhs.gov/data/databook/CD12B%20racespecific%20and%20sexspecific%20rates.rtf

Table 24. North Carolina Newly Diagnosed Chlamydia, Gonorrhea, and Early Syphilis (Primary, Secondary and Early Latent) Infections by Residence at Time of Diagnosis, Pasquotank County (2018-2020)

	C	hlamyd	ia	Gonorrhea		P. & S. Syphilis			E. L. Syphilis			
	2018	2019	2020	2018	2019	2020	2018	2019	2020	2018	2019	2020
County	Jan-	Jan-	Jan-	Jan-	Jan-	Jan-	Jan-	Jan-	Jan-	Jan-	Jan-	Jan-
-	Mar	Mar	Mar	Mar	Mar	Mar	Mar	Mar	Mar	Mar	Mar	Mar
Pasquotank	75	67	84	34	49	13	1	0	0	0	1	1

Source: North Carolina Division of Health and Human Services Communicable Disease Branch

https://epi.dph.ncdhhs.gov/cd/stds/figures/vol20no1.pdf

Table 25. All Other Unintentional Injuries Death Rates per 100,000 Residents, Pasquotank County and North Carolina (2018) and (2014-2018)

County and Inc	county and North Caronina (2010) and (2011 2010)											
County/State	Number of Deaths 2018	Death Rate 2018	Number of Deaths 2014- 2018	Death Rate 2014-2018	Age-Adjusted Death Rate 2014-2018							
Pasquotank	11	27.8	61	30.9	30.3							
North Carolina	4,478	43.1	19,576	38.6	37.0							
	â											

Source: N.C. State Center for Health Statistics

https://schs.dph.ncdhhs.gov/data/vital/lcd/2018/otherinjuries.html

Table 26. Age-Adjusted Unintentional Motor Vehicle Injury Death Rates per 100,000Residents, Pasquotank County and North Carolina (2018) and (2014-2018)

· · · · · · · · · · · · · · · · · · ·	~			(
County/State	Number of Deaths 2018	Death Rate 2018	Number of Deaths 2014- 2018	Death Rate 2014-2018	Age-Adjusted Death Rate 2014-2018		
Pasquotank	8	20.2	23	11.7	11.0		
North Carolina	1,591	15.3	7,553	14.9	14.5		
Source: N.C. State Center for Health Statistics							

Source: N.C. State Center for Health Statistics <u>https://schs.dph.ncdhhs.gov/data/vital/lcd/2018/motorvehicle.html</u>

Table 27. Crime Rate per 100,000 persons, Pasquotank County and North Carolina(2018)

	V	Violent	Crime Rate	Property Crime Rate				
County/State	Murder Rape Robbery		Agg Assault	Burglary	Larceny	MVT		
North Carolina		3	56.6		2,406.6			
North Carolina	5.8	23.7	77.1	250.0	577.4	1,667.2	162.0	
Pasquotank County	383.6					3,066.2		

Source: N.C. Bureau of Investigation

'-' indicates missing data for full 12-month period for over 50 percent of the county population for 2017 and 2018

http://ncsbi.gov/Services/SBI-Statistics/SBI-Uniform-Crime-Reports/2018-Annual-Summary.aspx

Table 28. Poisoning Mortality Rates per 100,000 North Carolina Res	sident Deaths,
Pasquotank County and North Carolina (2015-2019)	

1 V	()						
County of Residence	Total Deaths	Crude Rate	Age-Adjusted Rate					
North Carolina	9,367	18.25	18.80					
Pasquotank	28	14.18	15.20					
Source: N.C. State Center for Health Statistics. (2015-2019). Poisoning Mortality Rates (per								

100,000) 2015-2019 North Carolina Resident Deaths.

Table 29. Poisoning Mortality Rates by Race/Ethnicity per 100,000 North Carolina Resident Deaths (2019)

Race/Ethnicity	Total Deaths	Population Estimate	Crude Rate	Age-Adjusted Rate			
White, non-Hispanic	1,667	6,668,532	25.00	26.60			
Black, non-Hispanic	349	2,320,112	15.04	15.20			
American Indian, non-Hispanic	55	124,642	44.13	47.10			
Other, non-Hispanic	15	348,968	4.30	3.90			
Hispanic	62	1,025,830	6.04	6.50			
North Carolina Total	2,148	10,488,084	20.48	21.20			
Source: N.C. State Center for Health Statistics. (2019). Poisoning Mortality Rates (per 100,000)							

by Race/Ethnicity 2019 North Carolina Resident Deaths.

Table 30. Poisoning Mortality Rates by Sex 2019 per 100,000 North Carolina ResidentDeaths (2019)

Gender	Total Deaths	Population Estimate	Crude Rate	Age-Adjusted Rate
Male	1,485	5,100,264	29.12	30.00
Female	663	5,387,820	12.31	12.70
North Carolina Total	2,148	10,488,084	20.48	21.20
Source: N.C. State Center for He	alth Statistics. (2	019). Poisoning	Mortality Ra	ates (per 100,000)

Source: N.C. State Center for Health Statistics. (2019). Poisoning Mortality Rates (per 100,000) by Sex 2019 North Carolina Resident Deaths.

Image 1. 2019 BRFSS Survey Results: North Carolina Regions Hypertension Awareness: Adults who have been told they have high blood pressure by a doctor, nurse, or other health professional (CDC calculated variable)

	Total		Yes		No			
	Respond.^	N	%	C.I.(95%)	N	%	C.I.(95%)	
North Carolina	4,266	1,674	35.1	33.5-36.8	2,592	64.9	63.2-66.5	
Medicaid Region 6	503	159	31.9	27.3-36.9	344	68.1	63.1-72.7	
GENDER								
Male	233	75	30.5	23.9-37.9	158	69.5	62.1-76.1	
Female	270	84	33.3	27.1-40.0	186	66.7	60.0-72.9	
RACE								
Non-Hispanic White	313	96	29.2	23.9-35.1	217	70.8	64.9-76.1	
Non-Hispanic Black	103	***	***	***	***	***	***	
Other	87	18	15.7	9.5-25.0	69	84.3	75.0-90.5	
AGE								
18-44	216	29	13.4	9.0-19.5	187	86.6	80.5-91.0	
45-64	179	72	42.6	34.1-51.5	107	57.4	48.5-65.9	
65+	98	***	***	***	***	***	***	

Source: N.C. State Center for Health Statistics

https://schs.dph.ncdhhs.gov/data/brfss/2019/Medicaid/region6/ RFHYPE.html

Image 2. 2019 BRFSS Survey Results: North Carolina Regions Chronic Health Conditions: History of any cardiovascular diseases

	Total					No				
	Respond. [^]	N	%	C.I.(95%)	N	%	C.I.(95%)			
North Carolina	4,250	495	9.7	8.8-10.8	3,755	90.3	89.2-91.2			
Medicaid Region 6	507	29	5.6	3.8- 8.3	478	94.4	91.7-96.2			

Source: N.C. State Center for Health Statistics

https://schs.dph.ncdhhs.gov/data/brfss/2019/Medicaid/region6/cvdhist.html

	Total		Yes	5		No	
	Respond.^	N	%	C.I.(95%)	N	%	C.I.(95%)
North Carolina	4,214	532	13.8	12.5-15.1	3,682	86.2	84.9-87.5
Medicaid Region 6	500	53	10.7	7.8-14.4	447	89.3	85.6-92.2
GENDER							
Male	235	21	8.9	5.1-15.1	214	91.1	84.9-94.9
Female	265	32	12.5	8.7-17.6	233	87.5	82.4-91.3
RACE							
Non-Hispanic White	309	29	10.4	6.8-15.7	280	89.6	84.3-93.2
Non-Hispanic Black	102	12	10.7	6.0-18.4	90	89.3	81.6-94.0
Other	89	12	12.4	6.9-21.5	77	87.6	78.5-93.1
AGE							
18-44	215	34	13.5	9.4-19.0	181	86.5	81.0-90.6
45-64	178	15	12.3	6.4-22.1	163	87.7	77.9-93.6
65+	97	***	***	***	93	96.1	89.0-98.7

Image 3. 2019 BRFSS Survey Results: North Carolina Regions Healthy Days: Frequent Mental Distress (within the past 30 days)

Source: N.C. State Center for Health Statistics

https://schs.dph.ncdhhs.gov/data/brfss/2019/Medicaid/region6/FMD.html

Image 4. All Ages: Leading Causes of Injury Death, Hospitalization, and Emergency Department Visits by County, Pasquotank County (2016-2019)

	Leading Causes of Injury Dea 2016 to 2019 PASQUOTANK	ith	Leading Causes of Injury Hospitalization 2016 to 2019 PASQUOTANK				Leading Causes of Injury ED Visits 2016 to 2019 PASQUOTANK				
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#			
1	Poisoning - Unintentional	39	1	Fall - Unintentional	283	1	Fall - Unintentional	5,583			
2	MVT - Unintentional	21	2	Poisoning - Unintentional	54	2	Unspecified - Unintentional	3,329			
3	Firearm - Self-Inflicted	13	3	Poisoning - Self-Inflicted	37	3	Struck By/Against - Unintentional	2,728			
4	Fall - Unintentional	11	4	Unspecified - Unintentional; MVT - Unintentional	13	4	MVT - Unintentional	2,396			
5	Suffocation - Self-Inflicted	7	5	Struck By/Against - Unintentional	9	5	Natural/Environmental - Unintentional	1,290			
τοται	-	125	ΤΟΤΑΙ		454	τοτα	L	21,989			

Source: N.C. Injury & Violence Prevention Branch.

https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCounty2016_2019Final.pdf

Image 5. Ages 0-14: Leading Causes of Injury Death, Hospitalization, and Emergency Department Visits by County, Pasquotank County (2016-2019)

	Leading Causes of Injury Death 2016 to 2019 PASQUOTANK		Leading Causes of Injury Hospitalization 2016 to 2019 PASQUOTANK				Leading Causes of Injury ED Visits 2016 to 2019 PASQUOTANK			
Rank	Cause	#	Rank	Cause	#	R	ank	Cause	#	
1	Drowning/Submersion - Unintentional	1	1	Unspecified - Unintentional; Natural/Environmental - Unintentional; Fall - Unintentional	1	Γ	1	Fall - Unintentional	1,015	
2 3 4 5		0 0 0 0	2 3 4 5		0 0 0		2 3 4 5	Struck By/Against - Unintentional Unspecified - Unintentional Natural/Environmental - Unintentional Other Specified/Classifiable - Unintentional	742 566 370 250	
ΤΟΤΑΙ	L	1	ΤΟΤΑΙ		3	то	DTAL		3,898	

Source: N.C. Injury & Violence Prevention Branch.

https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCounty2016_2019_ages0-14Final.pdf

Image 6. Ages 15-34: Leading Causes of Injury Death, Hospitalization, and Emergency Department Visits by County, Pasquotank County (2016-2019)

	Leading Causes of Injury Dea 2016 to 2019 PASQUOTANK	th	Le	ading Causes of Injury Hospitalizat 2016 to 2019 PASQUOTANK	ion	Leading Causes of Injury ED Visits 2016 to 2019 PASQUOTANK				
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#		
1	Poisoning - Unintentional	18	1	Poisoning - Unintentional	11	1	Unspecified - Unintentional	1,120		
2	MVT - Unintentional	9	2	Poisoning - Self-Inflicted; Fall - Unintentional	7	2	MVT - Unintentional	1,100		
3	Firearm - Self-Inflicted	5	3	MVT - Unintentional	4	3	Struck By/Against - Unintentional	956		
4	Suffocation - Self-Inflicted	4	4	Struck By/Against - Unintentional; Pedestrian Other - Unintentional; Motor Vehicle-Nontraffic - Unintentional: Cut/Pierce - Assault	2	4	Fall - Unintentional	925		
5	Firearm - Assault	2	5	Struck By/Against - Assault; Other Specified/Classifiable - Assault; Natural/Environmental - Unintentional; Firearm - Unintentional	1	5	Cut/Pierce - Unintentional	403		
TOTAL		43	ΤΟΤΑΙ		39	ΤΟΤΑΙ		7,031		

Source: N.C. Injury & Violence Prevention Branch.

https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCounty2016_2019_ages1 5-34Final.pdf

Image 7. Ages 35-64: Leading Causes of Injury Death, Hospitalization, and Emergency Department Visits by County, Pasquotank County (2016-2019)

	Leading Causes of Injury Death 2016 to 2019 PASQUOTANK		Le	ading Causes of Injury Hospitalizat 2016 to 2019 PASQUOTANK	ion		Leading Causes of Injury ED Vis 2016 to 2019 PASQUOTANK	ts
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#
1	Poisoning - Unintentional	21	1	Fall - Unintentional	64	1	Fall - Unintentional	1,699
2	MVT - Unintentional	7	2	Poisoning - Unintentional	26	2	Unspecified - Unintentional	1,245
3	Firearm - Self-Inflicted	4	3	Poisoning - Self-Inflicted	24	3	MVT - Unintentional	885
4	Poisoning - Undetermined	3	4	Unspecified - Unintentional; MVT - Unintentional	5	4	Struck By/Against - Unintentional	742
5	Suffocation - Self-Inflicted; Fall - Unintentional; Cut/Pierce - Self- Inflicted	2	5	Other Specified/Classifiable - Unintentional; Natural/Environmental - Unintentional	4	5	Natural/Environmental - Unintentional	419
ΟΤΑΙ		53	TOTAL		140	τοται	-	7,355

Source: N.C. Injury & Violence Prevention Branch.

https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCounty2016_2019_ages3 5-64Final.pdf

Image 8. Ages 65+: Leading Causes of Injury Death, Hospitalization, and Emergency Department Visits by County, Pasquotank County (2016-2019)

	Leading Causes of Injury Deat 2016 to 2019 PASQUOTANK	h	Leading Causes of Injury Hospitalization 2016 to 2019 PASQUOTANK			Leading Causes of Injury ED Visits 2016 to 2019 PASQUOTANK			
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#	
1 2 3 4 5	Fall - Unintentional MVT - Unintentional Firearm - Self-Inflicted Unspecified - Unintentional Firearm - Assault	9 5 4 3 2	1 2 3 4 5	Fall - Unintentional Poisoning - Unintentional Unspecified - Unintentional Poisoning - Self-Inflicted Struck By/Against - Unintentional	211 17 7 6 5	1 2 3 4 5	Fall - Unintentional Unspecified - Unintentional Struck By/Against - Unintentional MVT - Unintentional Natural/Environmental - Unintentional	1,944 398 288 198 117	
TOTAL		28	ΤΟΤΑΙ		272	τοτα	L	3,705	

Source: N.C. Injury & Violence Prevention Branch.

https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCounty2016_2019_ages6 5upFinal.pdf

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