Community Health Needs Assessment

Edgecombe County

2022

ECU HEALTH
Edgecombe Hospital

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Acknowledgements

ECU Health Edgecombe Hospital and the Edgecombe County Health Department would like to thank our partners for helping to distribute the surveys throughout the county and also, all of the participants who took the time to complete the survey to help further the health and wellness of the community. We look forward to working with you to create a safe, healthy and thriving community.

A special thank you to the Edgecombe County Rural Health Network and other partners who participated in the priority setting session.

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Amber Hinson	Project Momentum, Inc.
Brian Ellerby	OIC Family Medical Centers
Bridgett Luckey	Access East
Brooke Mickelson	Eastpointe Human Services
Chad Eason	Edgecombe County EMS
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Lauren Welsh*	Rural Forward NC
Meredith Capps	Edgecombe County Rural Health Network – ECU Health Edgecombe Hospital
Michele Cherry	ECU Health Edgecombe Hospital
Michelle Etheridge	Edgecombe County Health Department
Mysha Wynn	Project Momentum, Inc.
Sabrina Golling*	Rural Forward NC
Savannah Junkins	Carolina Family Health Centers, Inc.

Sherri Bryant	OIC Family Medical Centers
Thomas Stebner	Edgecombe County Health Dept.

* Rural Forward NC facilitated the priority setting session.

Executive Summary

Edgecombe County is pleased to present its 2022 Community Health Needs Assessment. This report provides an overview of the methods and processes used to identify and prioritize significant health needs in Edgecombe County.

Vision Statement

The Edgecombe County Community Health Needs Assessment Team is dedicated to improving the health and well-being of the residents of Edgecombe County.

Leadership

The 2022 Community Health Needs Assessment (CHNA) was conducted in a regional NC Community Health Needs Assessment process, spearheaded by Health ENC. The completion of the County assessment and priorities were compiled in partnership with the Edgecombe County Health Department, ECU Health Edgecombe Hospital, Health ENC, and members of the Edgecombe County Rural Health Network. Several other local community partners were involved in the completion of the 2022 CHNA.

Organization	Chair
Edgecombe County Rural Health Network	Meredith Capps, Chair
Edgecombe County Health Department	Michelle Etheridge, Health Director
ECU Health Edgecombe Hospital	Patrick Heins, President
Brody School of Medicine Department of Public Health at East Carolina University	Dr. Ronny Bell, Department Chair

Partnerships/Collaborations

Partnerships	Number of Partners
Hospital/Health Care System	1
Healthcare Provider	4
Behavioral Healthcare Providers	3
Dental Health Providers	1
Community Organization(s)—Advocacy, Charitable, NGO	4
Government Agency	4
Business(s)—Employers, not organizations	0
Educational Institution(s)—Colleges, Universities	1

Public School System	1
Media/Communication Outlet(s)	1
Public Member(s)	0

Regional/Contracted Services

The 2022 Edgecombe County CHNA was developed in collaboration with the ECU Health Edgecombe Hospital, ECU Health, Edgecombe County Health Department, and Health ENC.

Theoretical Framework/Model

The Social-Ecological Model was used to guide the development of the 2022 CHNA. The CHNA includes all levels of the model including: primary data through individual responses to the community survey, focus groups to promote relationship and community engagement and secondary data analyses to assess societal factors on health outcomes.

Collaborative Process Summary

ECU Health Edgecombe Hospital and the Edgecombe County Health Department worked closely with Health ENC and the Edgecombe County Rural Health Network to provide the community with the needs assessment survey. The survey was distributed using several different methods from April, 2021 to June, 2021. The results from the completed surveys helped drive the CHNA team's determination of priorities to address over the next three years.

The Edgecombe County Rural Health Network's mission is to provide a collaborative health care network that will improve health and wellness outcomes for ALL Edgecombe County Residents. The vision is an effective multi-agency network that is collaborating in delivering care and reducing barriers based on exchanging and analyzing data, increasing efficiency, and sharing and generating resources. The partners are Access East, Area L AHEC, Carolina Family Health Centers Inc. (FQHC), Eastpointe Human Services (mental health LME) Edgecombe County Health Department, Edgecombe County Rescue, OIC Family Medical Centers (FQHC), Rural Health Group, Inc. (FQHC), and ECU Health Edgecombe Hospital.

Key Findings

Primary Data

The primary data used in this assessment consisted of (1) a community survey distributed through online and paper submissions. 385 Edgecombe County residents contributed their input on the community's health and health-related needs, barriers, and opportunities, with special focus on the needs of vulnerable and underserved populations.

Secondary Data

Secondary data used for this assessment were collected and analyzed from Conduent HCI's community indicator database. The database, maintained by researchers and analysts at Conduent HCI, includes over 100 community indicators from various state and national data sources such as the North Carolina

Department of Health and Human Services, the Centers for Disease Control and Prevention and the American Community Survey. See Appendix B for a full list of data sources used.

Indicator values for Edgecombe County were compared to North Carolina counties and U.S. counties to identify relative need. Other considerations in weighing relative areas of need included comparisons to North Carolina state values, comparisons to national values, trends over time, Healthy People 2030 targets and Healthy North Carolina 2030 targets. Based on these seven different comparisons, indicators were systematically ranked from high to low need.

Summary of 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 the primary and secondary data the significant health needs were determined for Edgecombe County and are displayed in Table 1.

Table 1. Significant Health Needs

Substance Abuse

Community Resources

Health Insurance

COVID-19 Pandemic

Transportation

Food Insecurity

Health Priorities

On December 6, 2021, community partners and members of the Edgecombe County Rural Health Network met to discuss the results from the 2022 Community Health Needs Assessment for Edgecombe County. The discussion was facilitated by Rural Forward NC. After reviewing the data and discussing health issues highlighted in the report, the following priority areas were chosen to be addressed for the next three years:

1. Substance use/mental health
2. Social determinants of health
3. Health disparities and health equity

Next Steps

This report describes the process and findings of a comprehensive health needs assessment for the residents of Edgecombe County, North Carolina. The prioritization of the identified significant health needs will guide community health improvement efforts of Edgecombe County. Following this process, ECU Health Edgecombe Hospital will complete a community health implementation strategy.

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Chapter 1 Introduction

Description of County

Edgecombe County is located in rural Eastern North Carolina and borders Nash, Wilson, Pitt, Martin and Halifax Counties. It is approximately one hour's drive east of Raleigh and two hours inland of the state's coastal beaches. The county is comprised of 10 municipalities with the town of Tarboro serving as the County Seat. The largest municipality in the county is the city of Rocky Mount, which is a city that is divided into two counties, Nash and Edgecombe.

According to the U.S. Census, as of 2019, Edgecombe County had a total of 721 businesses. In Edgecombe County, the largest industries in the county are manufacturing, healthcare and social assistance and retail trade. The most specialized industries are agriculture, forestry, fishing, hunting, manufacturing and transportation/warehousing. The highest paying industries are utilities, educational services and professional, scientific and tech services.

Since the previous CHNA conducted in 2019, the county has continued to experience unique challenges, including environmental disasters such as hurricanes, minor flooding and winter storms as well as increased incidence of chronic health conditions and communicable disease including COVID-19 during a global pandemic. Community members and partners have worked to address such issues and found positive outcomes. With the newly analyzed data from the 2022 CHNA, we will continue to address unmet needs and health priorities in the county.

Overview of Health ENC

Health ENC is a program of the Foundation for Health Leadership and Innovation (FHLI), a nonprofit organization focused on improving health in North Carolina. It is guided by representatives from local health departments, hospitals and community organizations. 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 health data and information that county health departments, hospitals, health systems and community groups can use to help,

- Identify and address key health needs/issues in their communities,
- Plan health and disease prevention services,
- Combine efforts to improve the quality and use of population health data across ENC,
- Maintain local control and decision-making about the choice of health priorities and interventions
- Improve health, partnerships and communication.

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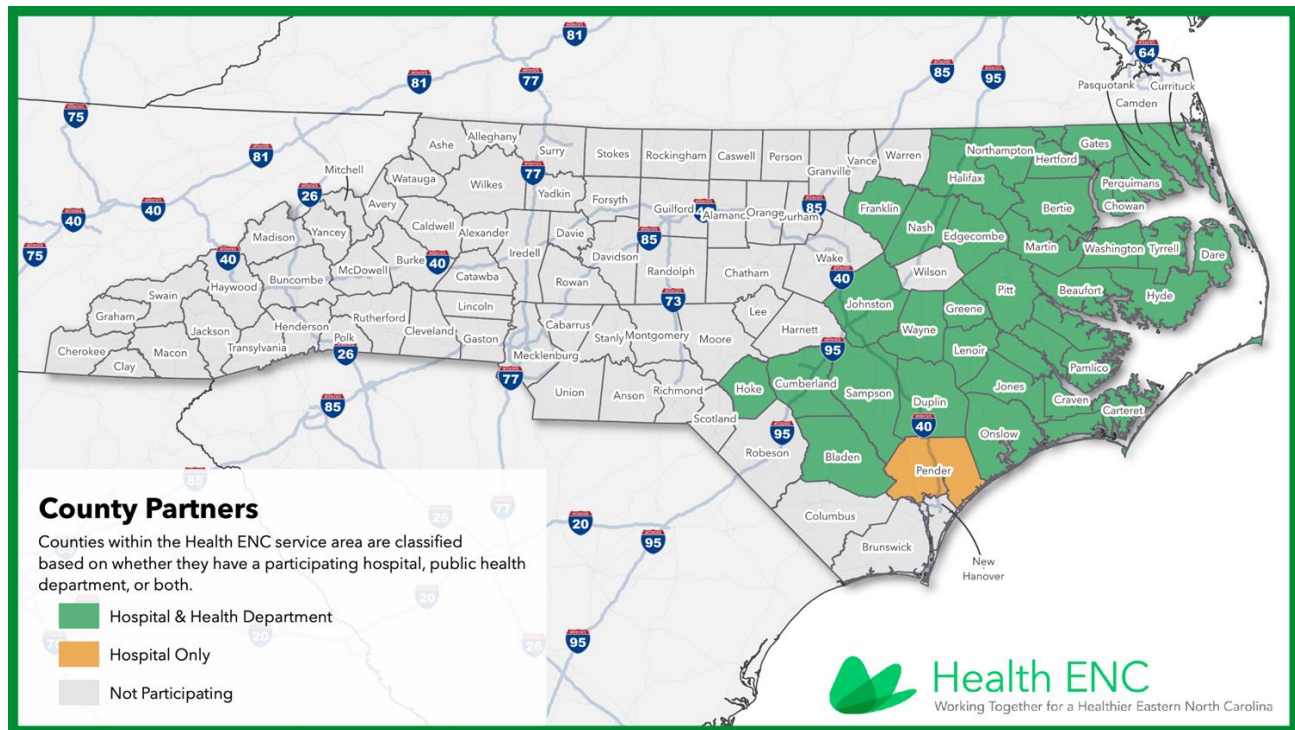
Health ENC serves the following counties: Beaufort, Bertie, Bladen, Camden, Carteret, Chowan, Craven, Cumberland, Currituck, Dare, Duplin, Edgecombe, Franklin, Gates, Greene, Halifax, Hertford, Hoke, Hyde, Johnston, Lenoir, Martin, Nash, Northampton, Onslow, Pamlico, Pasquotank, Pender, Perquimans, Pitt,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

Health Data Sources

Primary Data – Community Survey – data gathered from people in each of the Health ENC counties
Other Health Data- provided by the NC Department of Health and Humans Services and other national and state data sources

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 2021-2022 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 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.

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

County Responses
- 364 Total English (Total in ENC survey =16,661)
- 21 Total Spanish (Total in ENC survey =502)

Secondary Data Sources

Healthy North Carolina 2030 (HNC 2030)

NC State Center for Health Statistics

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

Total Population (U.S.Census)

- 2016: 53,283
- 2017: 52,756
- 2018: 51,984
- 2019: 51,472
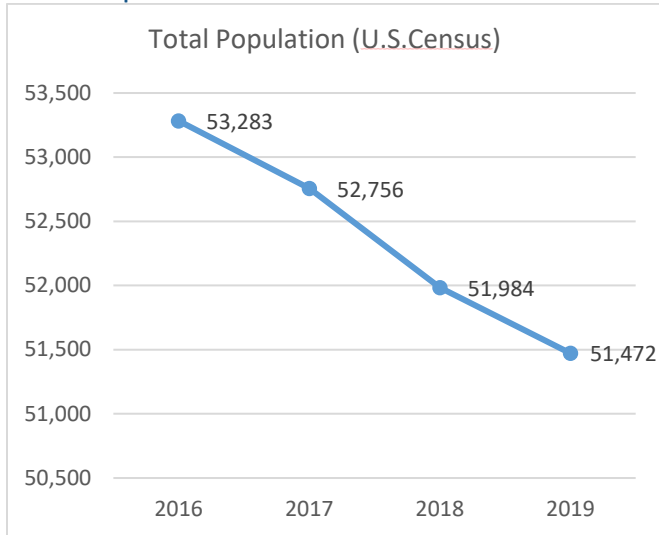
- In 2019, Edgecombe County had a population estimate of 51,472.
- From 2016 to 2019, Edgecombe County's population decreased by overall 3.4%.

Minority Populations

Percent of Population by Race/Ethnicity (Census, 2015-2019)

Race/Ethnicity	Edgecombe	North Carolina	Health ENC Counties
White	39.4	68.7	64.9
Black	57.6	21.4	30.0
Am Indian or Alaska Native	0.1	1.2	1.0
Asian	0.2	2.9	1.3
Native Hawaiian & Other Pacific Islander	0.1	0.1	0.1
Multiracial (Two or More Races	1.5	2.7	3.5
Hispanic or Latino	4.6	9.4	9.6
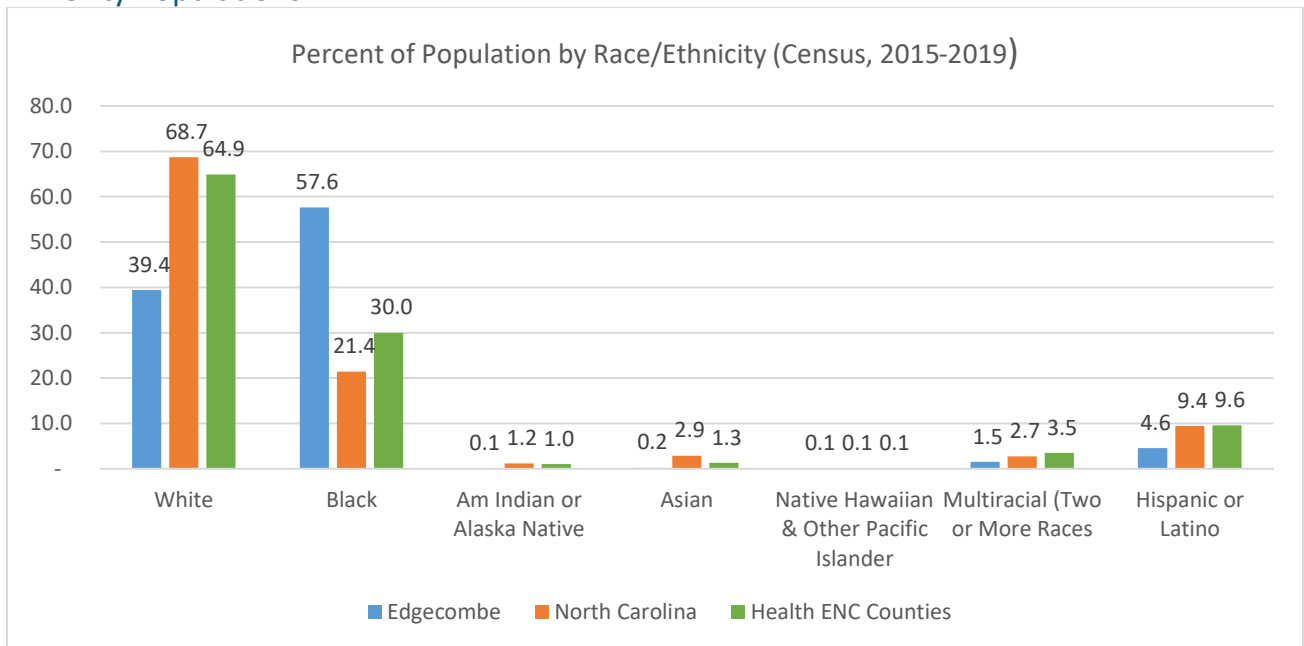
The percent of White population in Edgecombe County (39.4%) is less than the White population for North Carolina (68.7%) and lower than the Health ENC counties (64.9%).

The percent of Black or African American population in Edgecombe County (57.6%) is much higher than the Black or African American population for North Carolina (21.4%) the Health ENC counties (30.0%).

The Hispanic or Latino population comprises 4.6% of Edgecombe County which is significantly lower than North Carolina (9.4%) and Health ENC Counties (9.6%).

Population Growth

- The projected population decline for Edgecombe County for 2029 is estimated at 48,244 persons
- From 2010 to 2019, the total population of Edgecombe County has decreased by an overall 9%

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.

Population and Projected Population for 2029

Age Groups

Percent of the Population by Age Group
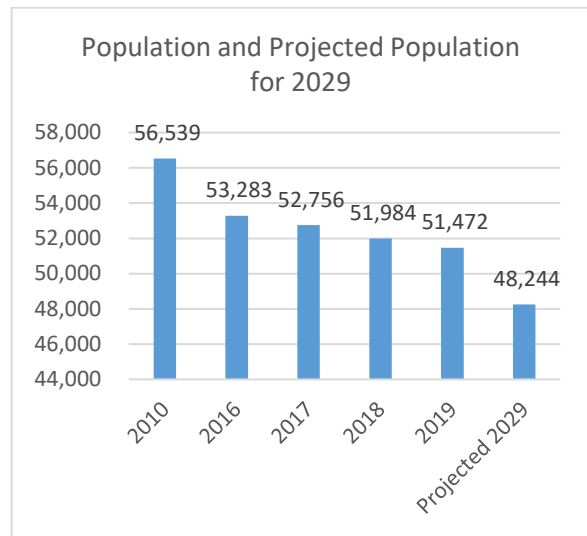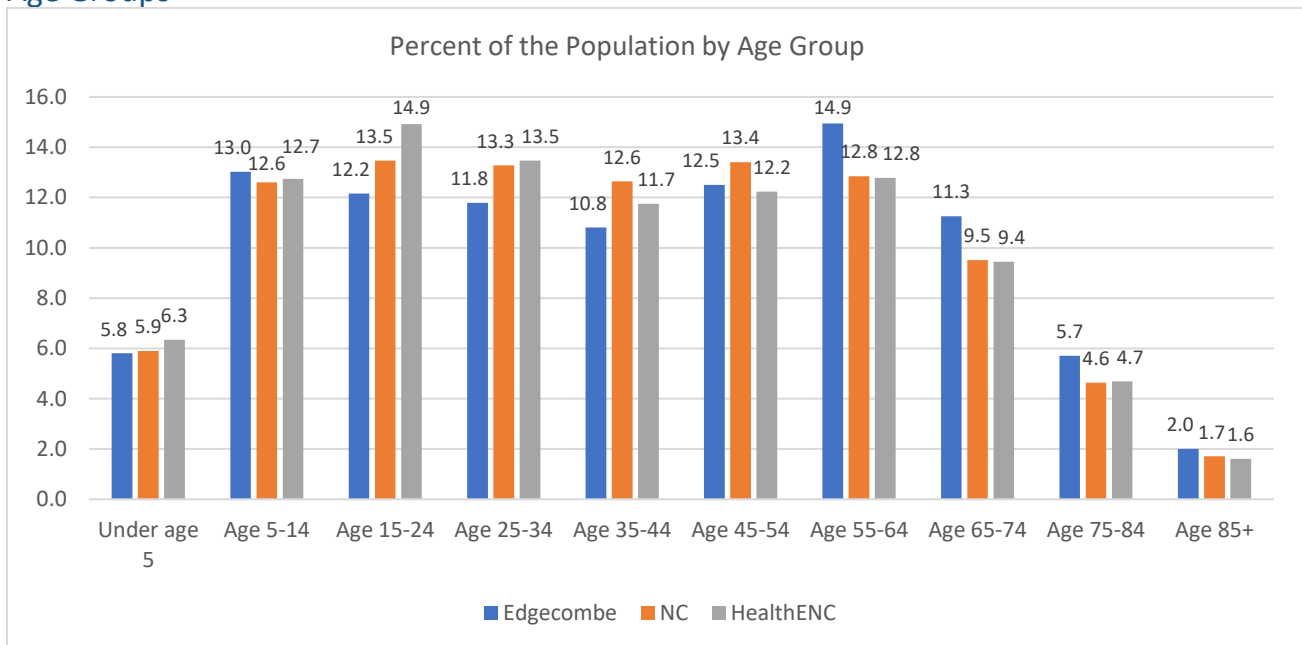
In Edgecombe County, the percent of people between the ages of 55-64 are higher (14.9%) than the Health ENC (12.8%) and N.C. (12.8%).

Military/Veteran Populations

Military Population

Percent of Population in Military (ACS, 2015-2019)

Category	Value
Edgecombe	-
North Carolina	1.1
Health ENC Counties	4.8
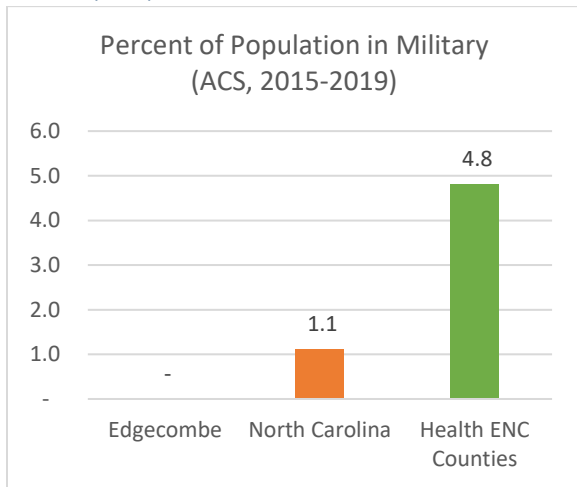
This figure shows the trend of the military population over the 4 most recent measurement periods.

From 2015-2019, the average percent of the population of military population for Edgecombe County was lower than North Carolina and the Health ENC region.

- The percent of reported Military Population in Edgecombe County in 2015-2019 was null (0.0%).
- Compared to the counties in Health ENC (4.8%) and North Carolina (1.1%), Edgecombe County has a smaller military population.

Veteran Population

The veteran population is given as a percent of the civilian population aged 18 years and older.

This data can be used for policy analyses, to develop programs, and/or to create budgets for veteran programs and facilities.

- Edgecombe County's veteran population (6.3%) is lower than the state (8.4%) and Health ENC counties (12.1%)

Percent of Population that are Veterans (ACS, 2015-2019)

Category	Value
Edgecombe	6.3
North Carolina	8.4
Health ENC Counties	12.1

17
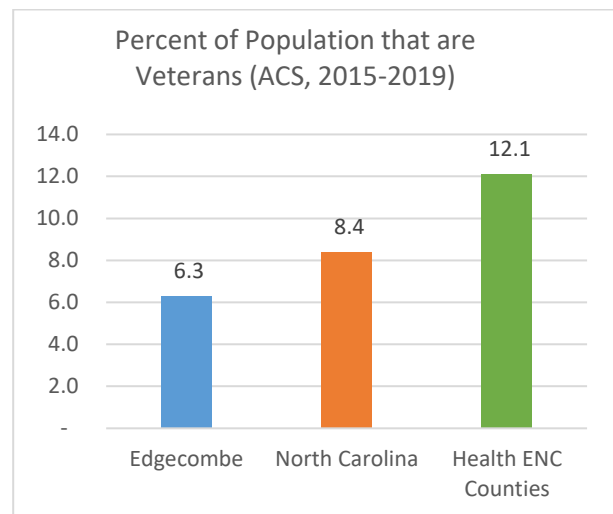
Birth Rates

Live Birth Rate per 1,000 Population (NC SCHS)
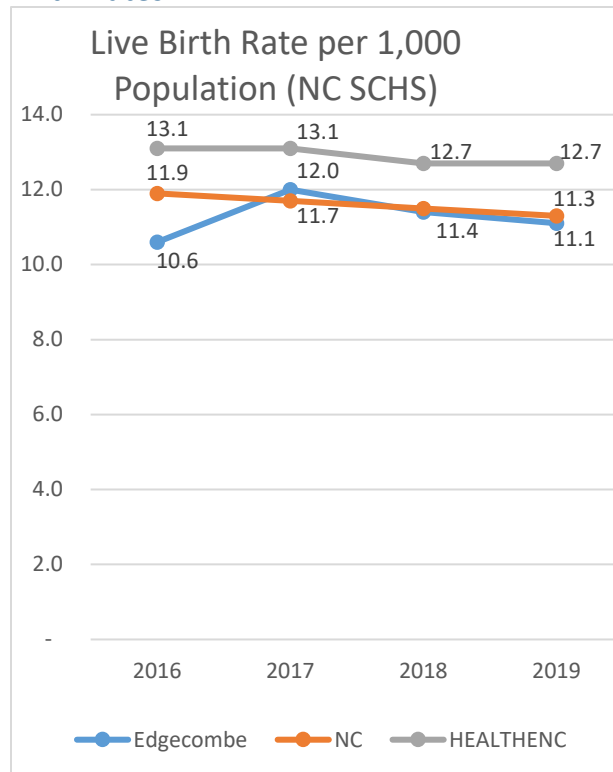
Live birth rates are important measures of population health. The birth rate is usually the dominant factor in determining the rate of population growth; however, population growth is also driven by other factors such as the age structure of the population (e.g., deaths), immigration and emigration.

This figure illustrates that the live birth rates in Edgecombe has increased over the measurement period, and is lower compared to the birth rate in North Carolina and in all Health ENC Counties.

- The Edgecombe County birth rate increased from 10.6 births per 1000 population to 11.1 births per 1000 population in 2019.
- Edgecombe County's live birth rate is lower than the Health ENC County Region (12.7) and N.C. (11.3).

Analysis of Demographic Data

During the last few years, Edgecombe County's number of residents have been on the decline. This trend is estimated to continue through the year 2029. The birth rate is also been on the decline for the last 5 years. Edgecombe county has a diversified age range with the largest age group made up of 55-64-year-old individuals followed by 5-14 year old's. Edgecombe County has a larger percentage of African American (57.6%) compared to White (39.4%) and Hispanic (4.6%) populations. Overall, Edgecombe County contains less military veterans than surrounding counties and North Carolina.

Chapter 3   Socioeconomic Profile

NC Department of Commerce Tier Designation
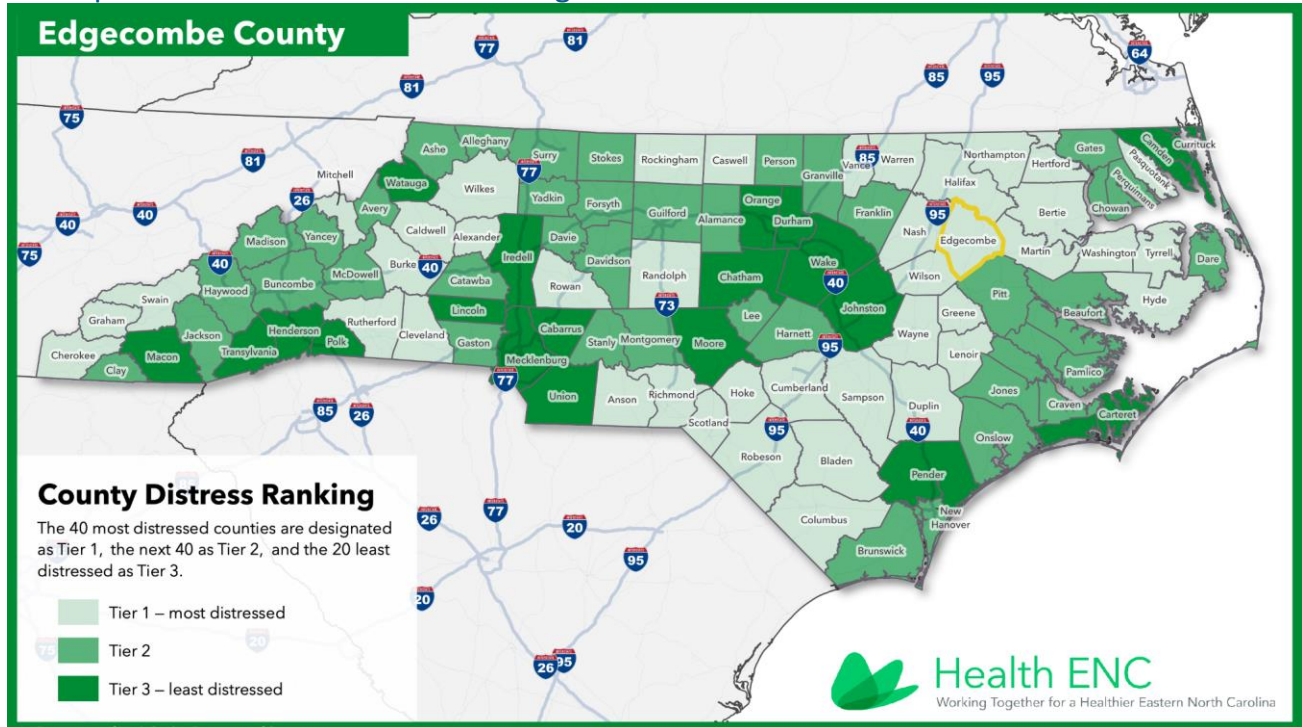
The North Carolina Department of Commerce annually ranks the state's 100 counties based on economic well-being and assigns each a Tier designation. The 40 most distressed counties are designated as Tier 1, the next 40 as Tier 2 and the 20 least distressed as Tier 3. Edgecombe County has been assigned a Tier 1 designation for 2022.

In 2022, Edgecombe County was assigned a Tier 1 designation.

County Tiers are calculated using four factors:

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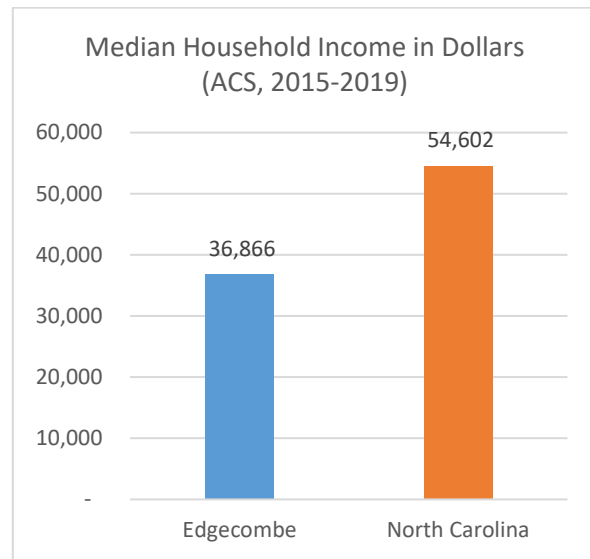- Adjusted property tax base per capita

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.

- The median household income in Edgecombe County ($36,866), which is much lower than the median household income in North Carolina ($54,602).

Median Household Income in Dollars (ACS, 2015-2019)

Edgecombe: 36,866
North Carolina: 54,602

Poverty

Percent People Living Below Poverty Level (ACS, 2015-2019)

Edgecombe: 24
North Carolina: 15
Health ENC Counties: 17.5
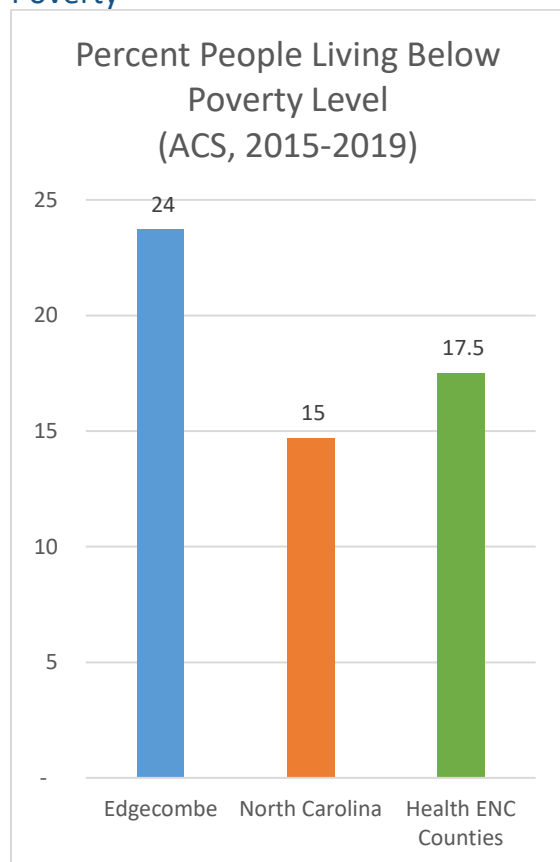
Federal poverty thresholds are set every year by the Census Bureau and vary by size of family and ages of family members. A high poverty rate is both a cause and a consequence of poor economic conditions. Children in poverty are more likely to have physical health problems, behavioral problems and emotional 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 Edgecombe County an estimated 24.0% 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.

Poverty by Race and Ethnicity

Source: U.S. Census Bureau ACS 5-year Estimate
https://datausa.io/profile/geo/edgecombe-county-nc#economy
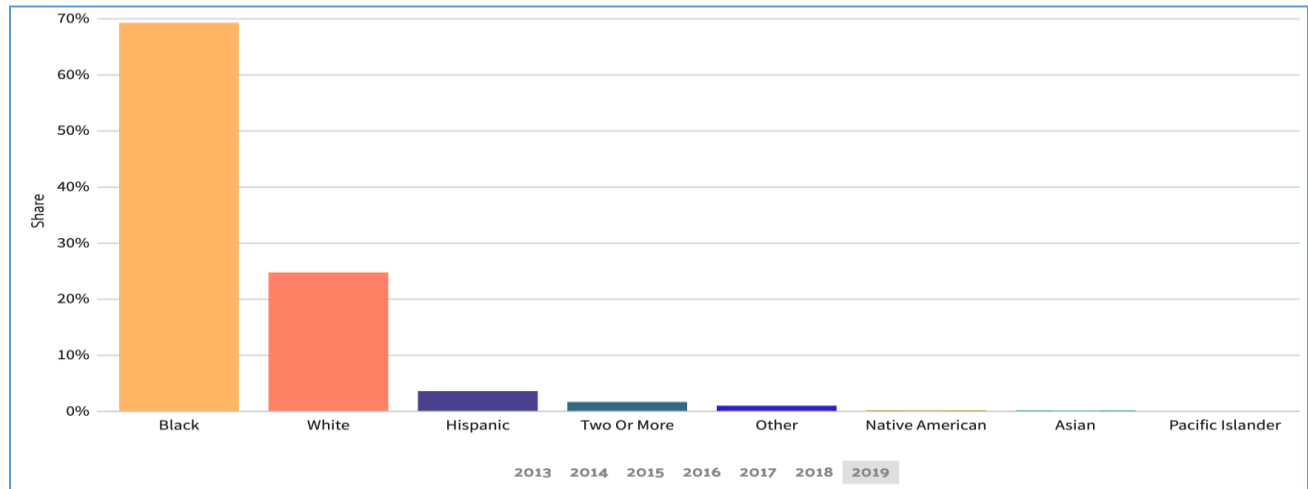
The most common racial or ethnic group living below the poverty line in Edgecombe County, NC is Black, followed by White and Hispanic.

The Census Bureau uses a set of **money income thresholds** 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 Living in Poverty

- The percent of children living below the poverty level is much higher for Edgecombe County when compared with the State of N.C. and the Health ENC Counties

Older Adults in Poverty

Percent Adults 65+ Living Below Poverty Level
(ACS, 2015-2019)

Edgecombe	North Carolina	Health ENC Counties
14.1	9.1	10.3
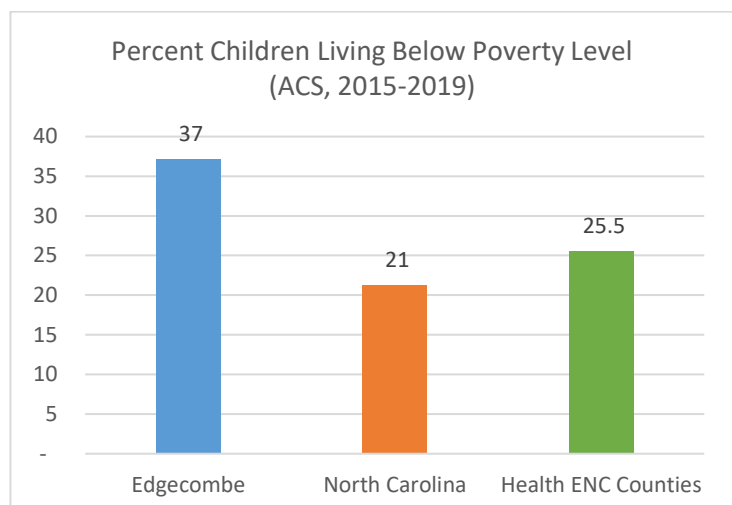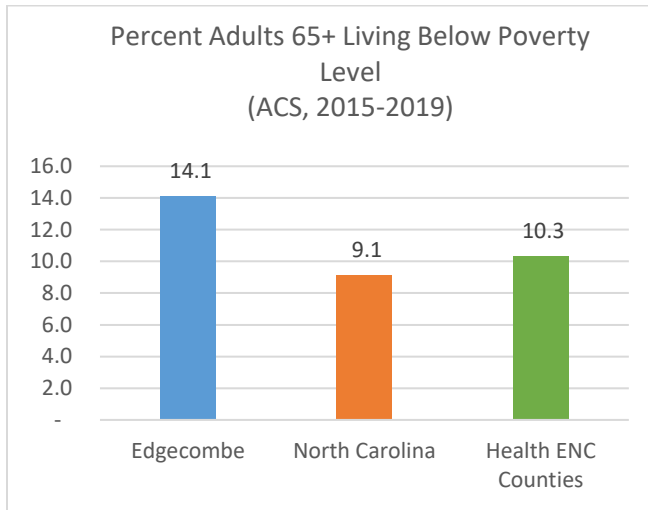
- The rate of adults age 65+ years living in poverty in Edgecombe County is 5.0% higher than NC and 3.8% higher than the Health ENC County Region.

Disabled People in Poverty

- The percent of disabled people living in poverty in Edgecombe County (30%) is 10% higher than the percent of disabled people living in poverty for the entire State of N.C. (20%).

Percent Persons with Disability Living Below Poverty Level
(ACS, 2015-2019)

Edgecombe	North Carolina
30	20

Housing

Median Monthly Housing Costs

Median Monthly Housing Costs for Owners with a Mortgage in Dollars (ACS 2015-2019)
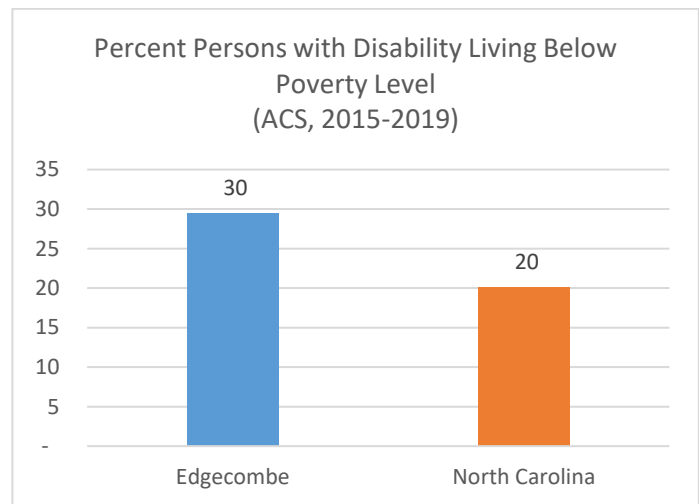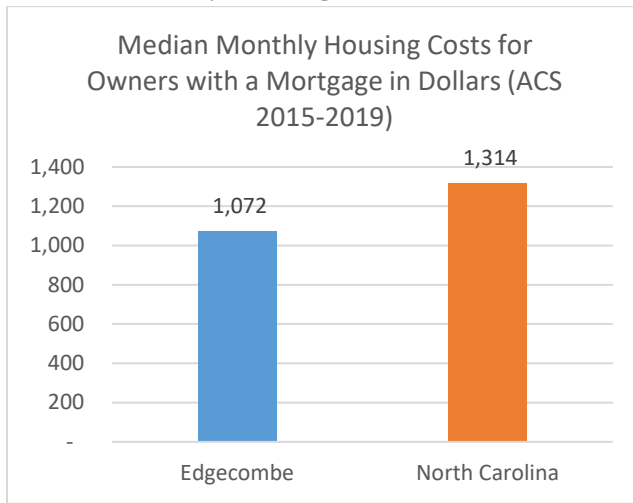
The average household size in Edgecombe County is 2.44 people per household (owners) and 2.48 people per household (renters), which is slightly lower than the North Carolina value of 2.57 people per household (owners) but slightly higher for renters (2.43 people per household).

- In Edgecombe County, the median housing costs for homeowners with a mortgage is $1,072, which is lower than the N.C. median $1,314 cost.

Median Monthly Household Costs in Edgecombe County and Surrounding Counties

Severe Housing Problems

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

Category	Value
Edgecombe	19
North Carolina	15
Health ENC Counties	16.1
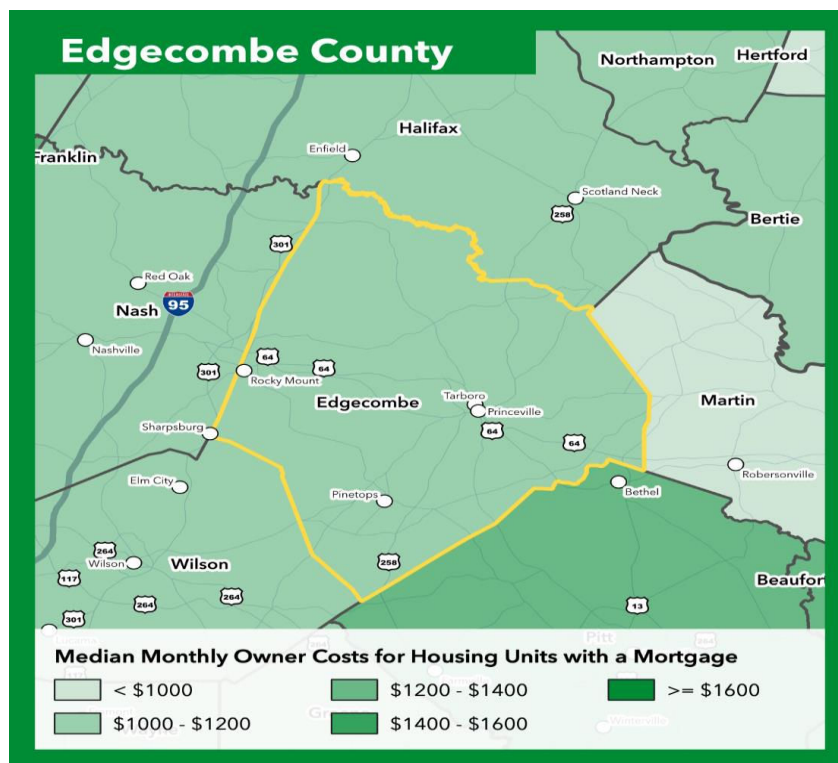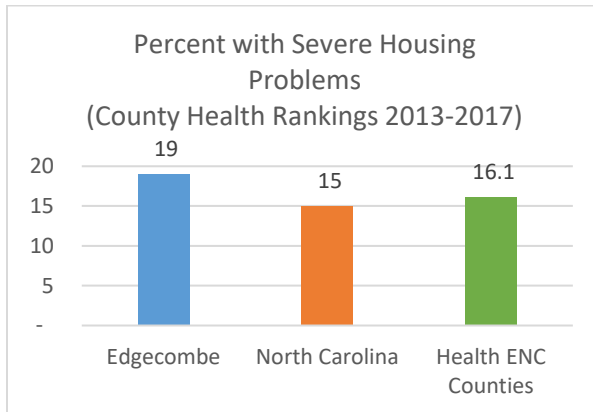
- Safe and affordable housing is an essential component of healthy communities, and the effects of housing problems are widespread.
- Housing problems include overcrowding, high housing costs, lack of kitchen, or lack of plumbing facilities.
- An average of 19.0% of households in Edgecombe County have severe housing problems, compared to 15.0% in North Carolina and 16.1% in Health ENC Counties.

Food Insecurity

Households with SNAP Benefits

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 percent of households with SNAP benefits in Edgecombe County is 28.0%, which is much higher than the state value of 13% and 11.3% higher (16.7%) than the Health ENC County region.

Percent of Households with SNAP Benefits in the Last 12 Months (ACS 2015-2019)

	Edgecombe	North Carolina	Health ENC Counties
Value	28	13	16.7
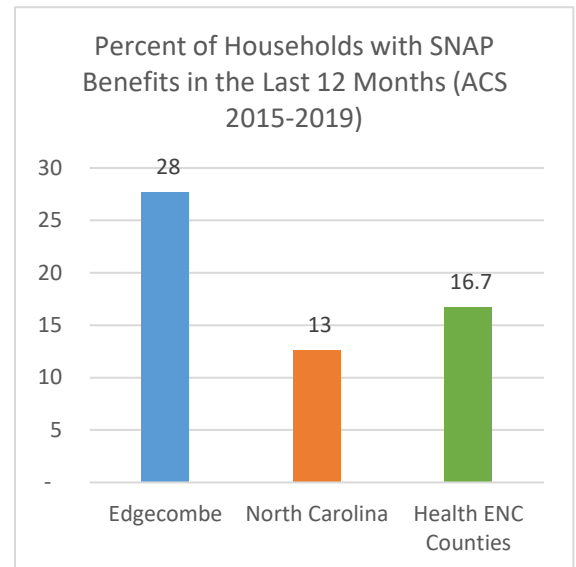
Education

Educational Attainment

Percent of People 25+ with High School or Higher and Bachelor's Degree or Higher (ACS 2015-2019)

	Edgecombe	North Carolina	Health ENC Counties
With a High School Degree or Higher	81.1	87.8	86.6
With a Bachelors Degree or Higher	13.6	31.3	22.0
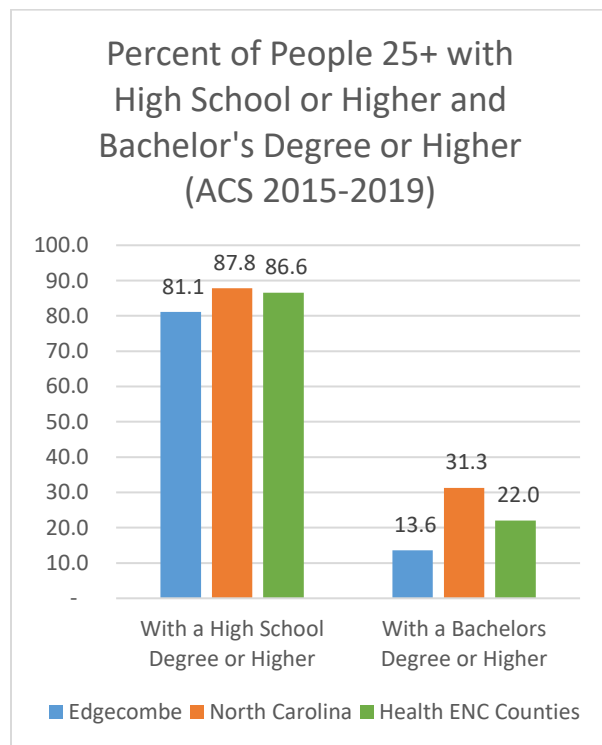
Graduating from high school is an important personal achievement and is essential for an individual's social and economic advancement. Graduation rates can also be an important indicator of the performance of an educational system. Having a bachelor's degree opens up career opportunities in a variety of fields and is often a prerequisite for higher-paying jobs.

- In Edgecombe County the percent of residents 25 or older with a high school degree or higher was lower (81.1%) than the state (87.8%) and also lower than the Health ENC County Region (86.6%).
- Percent with a Bachelor's degree or higher in Edgecombe County was lower (13.6%) compared to N.C. (31.3%) and Health ENC region (22.0%).

High School Drop Out Rate

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.

- Edgecombe County's high school dropout rate was 3.1% in 2019-2020, which was higher than the rate in North Carolina (1.5%) and the Health ENC region (1.4%).

High School Drop Outs per 100 Students (NC DPI)
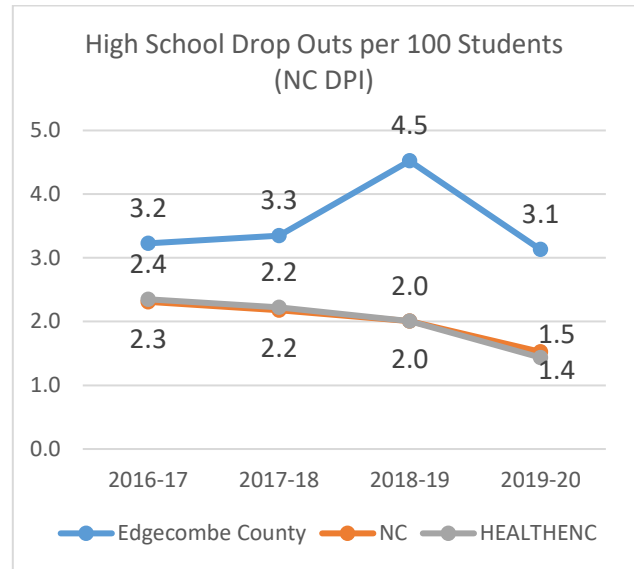
High School Suspension Rate

High School Suspensions per 100 Students (NC DPI)
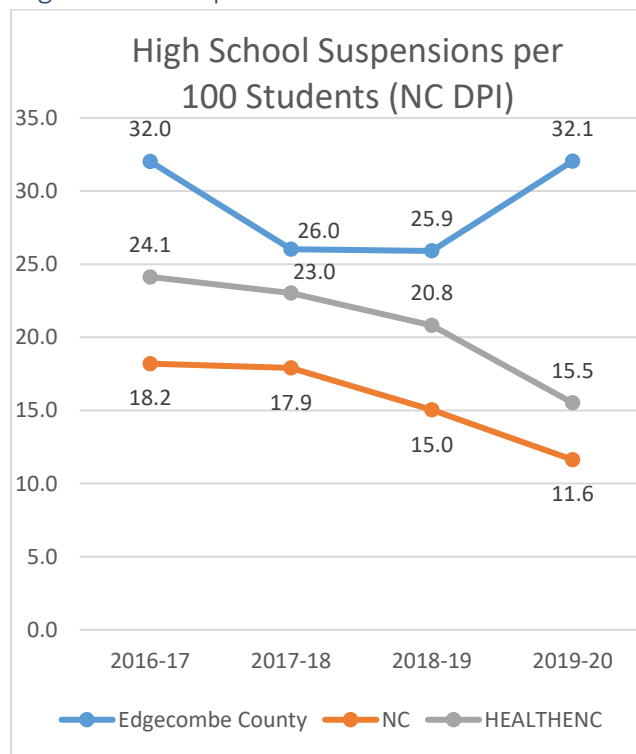
High school suspension is a form of discipline in which a student is temporarily removed from a classroom and/or school due to a violation of school conduct or code. Higher rates of suspension can be related to high rates of antisocial or delinquent behaviors, which may further contribute to potential 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.

- Edgecombe County's rate of high school suspension (32.1 per 100 students) was higher than North Carolina's rate (11.6) the Health ENC counties (15.5) in 2019-2020.

Transportation

Percent of Workers by Mode of Commuting to Work (ACS 2015-2019)

Percent Workers Who Drive Alone to Work (ACS 2015-2019)
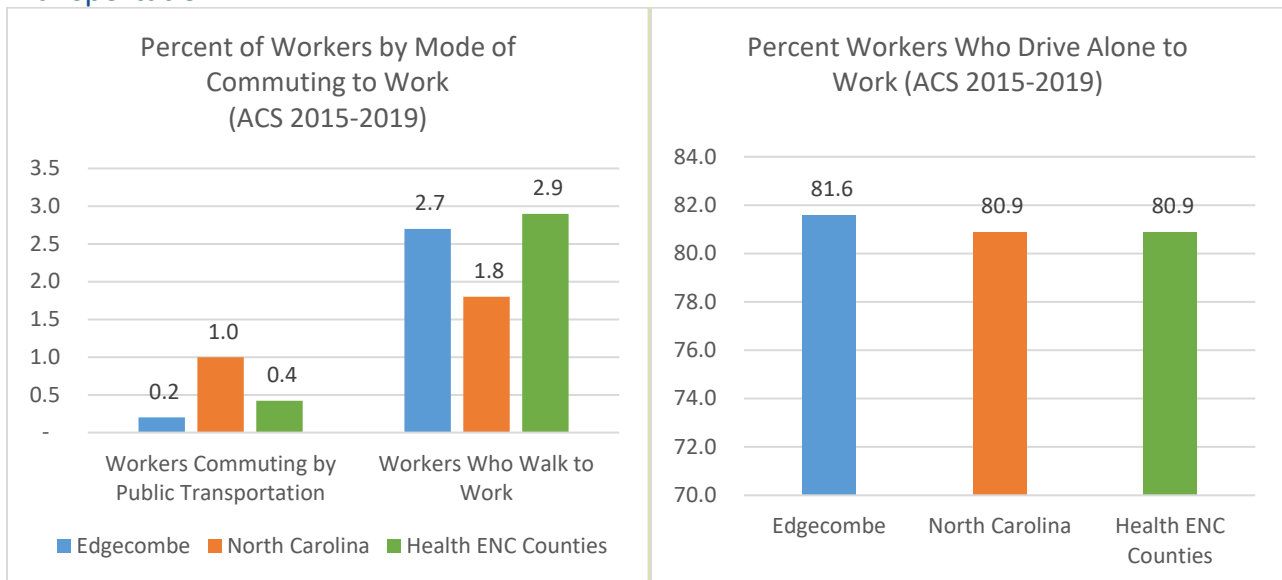
Public transportation offers mobility, particularly to people without cars. Transit can help bridge the spatial divide between people and jobs, services, and training opportunities. Public transportation also reduces fuel consumption, minimizes air pollution, and relieves traffic congestion. Walking to work helps protect the environment, while also providing the benefit of daily exercise.

- In Edgecombe County, an estimated 0.2% of workers commute to work by public transportation, compared to the state value of 1.0%.
- Approximately 2.7% of workers walk to work, which is greater than the state value of 1.8%.
- An estimated 81.6% of workers 16 and older drove alone to work, compared to 80.9% in N.C in 2015-2019 period.

Crime and Safety

Violent Crime Rate per 100,000 Population

Property Crime Rate per 100,000 Population
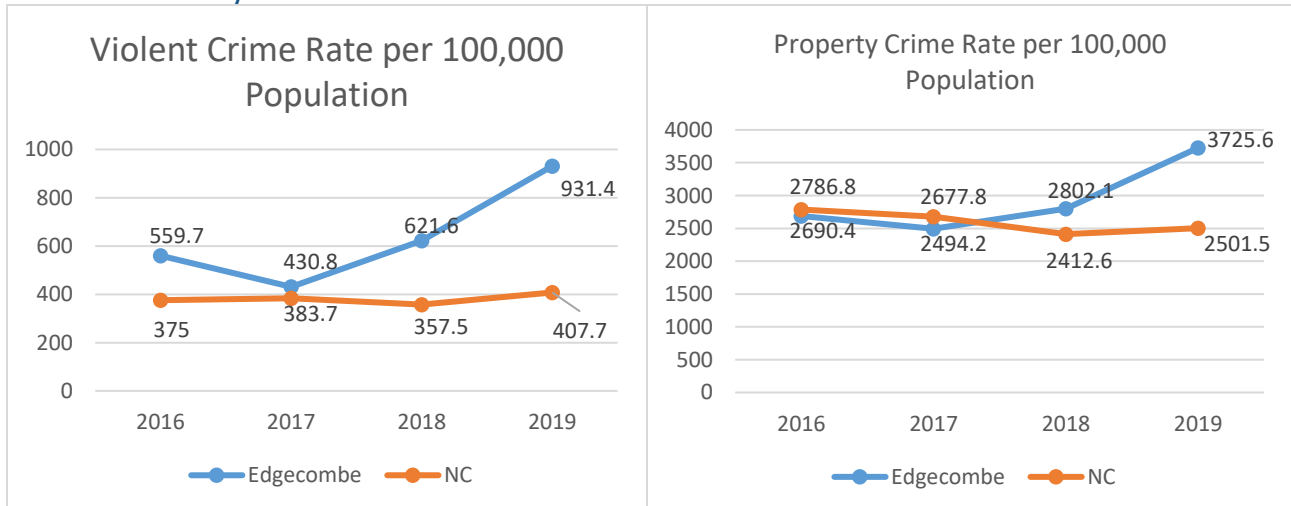
Both violent crime and property crime are used as indicators of a community's crime and safety. Violence negatively impacts communities by reducing productivity, decreasing property values and disrupting social

services. Violent crime includes four offenses: murder and non-negligent manslaughter, rape, robbery, and 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 Edgecombe County increased from 559.7 to 931.4.
- During the same time period, the property crime rate has increased from 2690.4 to 3725.6, which was above the N.C. rate.

Juvenile Crime
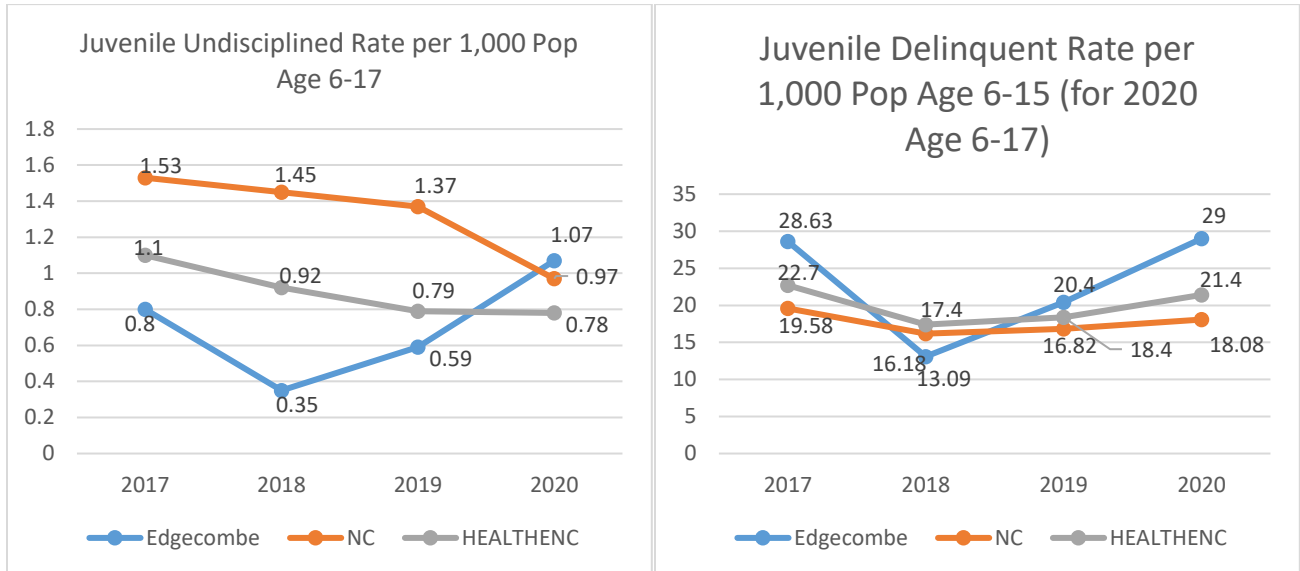
Youth who commit a crime may not gain the educational credentials necessary to secure employment and succeed later in life. Negative peer influences, history of abuse/neglect, mental health issues, and significant family problems increase the risk of juvenile arrest. The juvenile justice system aims 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 Edgecombe County (1.07) was higher than the rate in North Carolina (0.97) and the Health ENC region (0.78).
- In 2020, the juvenile delinquent rate for Edgecombe County was higher (29.0) than N.C. (18.08) 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 Edgecombe County was higher (11.6 per 1,000 pop.) than N.C. (8.0 per 1,000 pop.)

Child Abuse Reports Substantiated Rate per 1000 Population Age 0-18

	2015	2016	2017	2018
Edgecombe	11.3	14.9	18.3	11.6
NC	9.3	9.2	8.7	8.0
HEALTHENC	9.5	10.0	9.3	8.8

Incarceration

Incarceration Rate per 100,000 Population (NC Dept of Public Safety)

	2016-2017	2017-2018	2018-2019	2019-2020
Edgecombe	602.4	602.1	522.4	410.4
NC	369	361.4	347.4	304.2
HEALTHENC	416	412.2	390.4	345.2
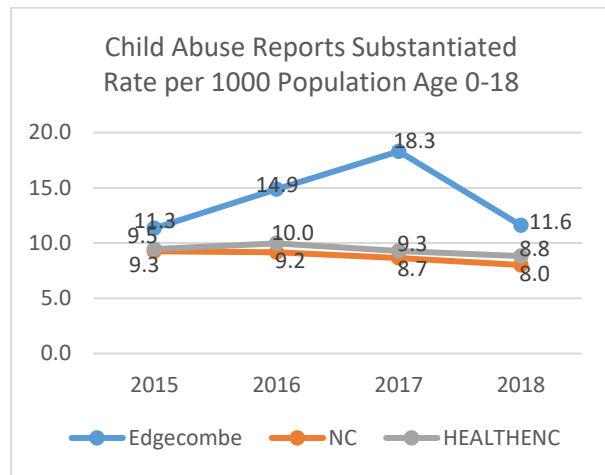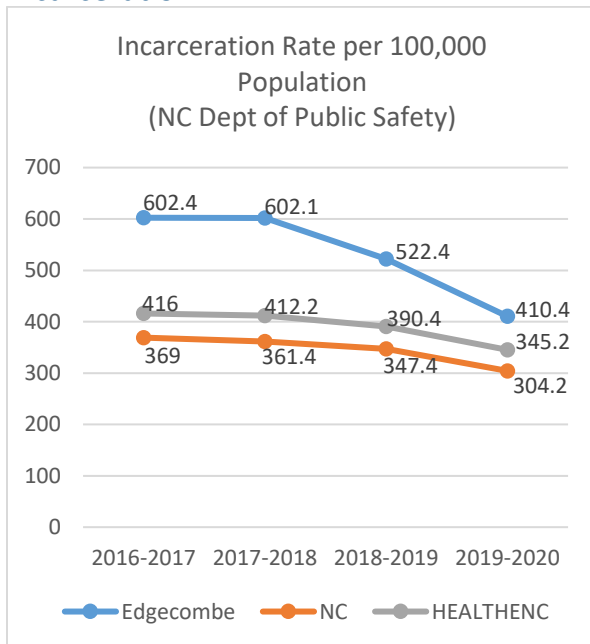
According to the U.S. Bureau of Justice Statistics, approximately one out of 100 adults in the U.S. are in jail or prison. Conditions in jails and prisons can lead to an increased risk of infectious diseases such as tuberculosis and hepatitis C, as well as assault from other inmates. After incarceration, 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 Edgecombe County has shown a decrease.
- In 2019-2020, the incarceration rate in Edgecombe County was higher (410.4 per 1,000 population) than N.C. (304.2) and the Health ENC region (345.2)

29

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.

- Edgecombe County has a slightly lower percent of residents of voting age (77.2%) than North Carolina (77.6%) nearly the same percent of population of voting age as Health ENC County Region (77.1%).

Percent of Population of Voting Age (ACS 2015-2019)

	Edgecombe	North Carolina	Health ENC Counties
Value	77.2	77.6	77.1
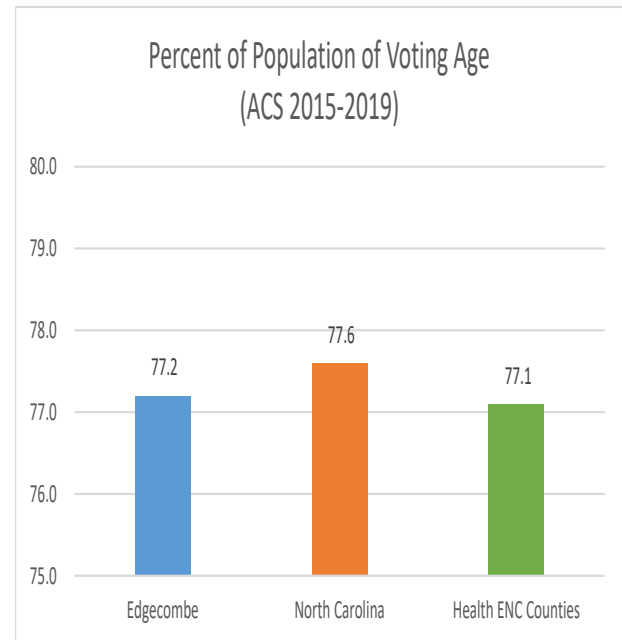
Analysis of Socioeconomic Profile

Edgecombe County is classified as a Tier 1 by the NC Department of Commerce for 2022. This shows that the county faces a variety of challenges as it relates to socio-economic profile. The median income in dollars is $17,736 less than other North Carolinians. Nearly 25% of Edgecombe County residents live below the Federal Poverty Threshold. The most impoverished race is black by more than 2x of those who identify as white. 37% of children live in poverty compared to 14.1% of adults, both statistics higher than other Health ENC counties. The percentage of people living below the poverty level in Edgecombe County who are disabled is 10% higher than the rest of North Carolina. Education is traditionally an indicator of success. Edgecombe experiences a high school suspension rate that is increasing while the NC rate is decreasing. High School dropout rates are decreasing but are still 2x that of surrounding counties and NC. 81% of people 25+ have a high school degree or higher. Working individuals mostly commute alone to work with public transportation only being utilized by .2% of the working class. Safety is an important factor in the community. Edgecombe County has experienced a large increase in violent and property crimes since 2017 while the rest of NC has primarily stayed the same or decreased. At the same time, the number of incarcerations are on the decline. Juveniles make up a large percentage of Edgecombe's population and the rate of juvenile crime is on the increase and is higher than surrounding counties.

Chapter 4   Clinical Care Profile

Health Insurance Coverage

Percent Age 0-64 with Health Insurance (ACS 2015-2019)

Edgecombe	North Carolina	Health ENC Counties
87.3	87.3	87.0
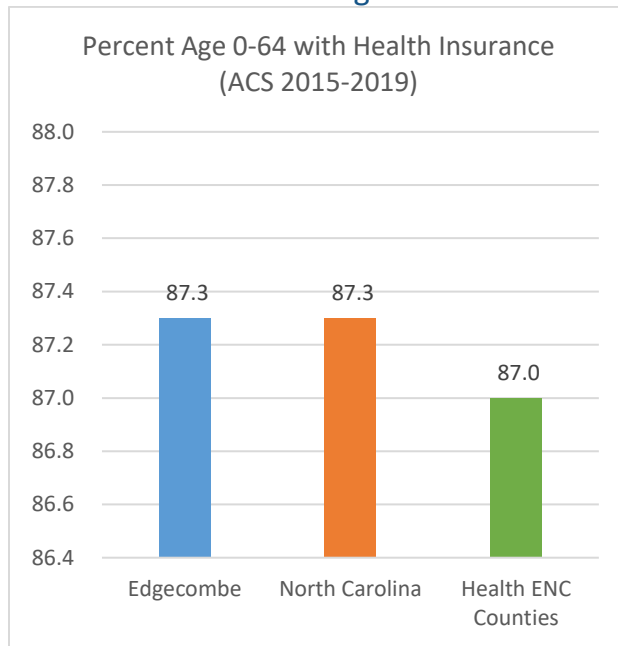
Medical costs in the United States are very high. People without health insurance may not be able to afford medical treatment or prescription drugs. They are also less likely to get routine checkups and screenings, so if they do become ill they may not seek treatment until the condition is more advanced, and therefore more difficult and costlier to treat.

- Nearly 13% of the population 0-64 years of age in Edgecombe County are uninsured.
- The percent of individuals aged 0-64 years old that have health insurance coverage in Edgecombe County is 87.3%, the same as the rate for North Carolina (87.3%) and slightly higher than 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 Edgecombe County, 24.1% of the population report receives health insurance coverage through Medicaid, 6.9% Medicare and 0.3% Tricare.

Percent of People Only Receiving Health Insurance Through Medicaid, Medicare, Tricare (ACS 2015-2019)

	Receiving Medicaid Only	Receiving Medicare Only	Receiving Tricare Only
Edgecombe	24.1	6.9	0.3
North Carolina	13.4	5.5	0.4
Health ENC Counties	15.8	5.0	0.6

Primary Care Practitioners

Population per Primary Care Practitioner, North Carolina, 2017
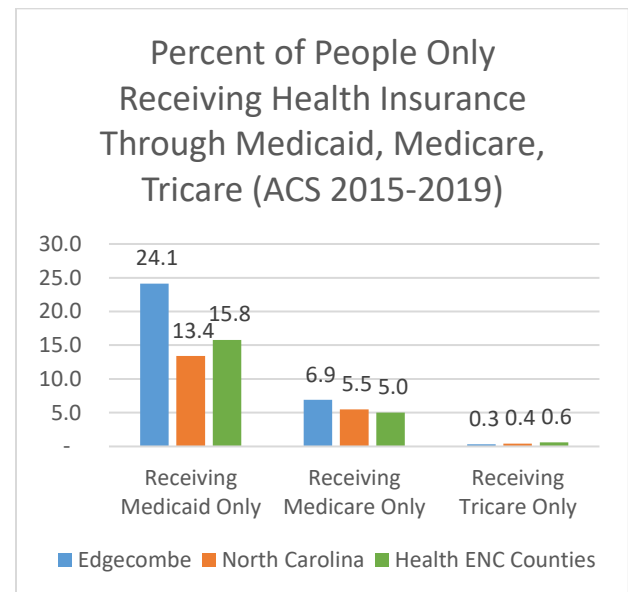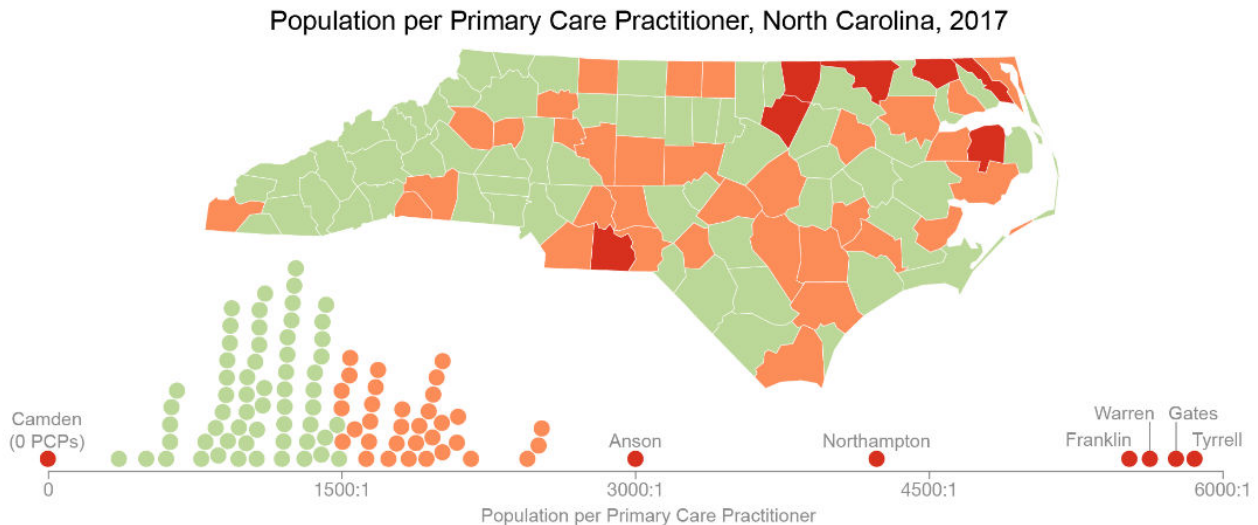
Notes: Updated March 10, 2020 to reflect adjustments to 2017 nurse practitioner data. Primary care physicians, physician assistants, and nurse practitioners are defined as in Spero, J. C., & Galloway, E. M. (2019). Running the Numbers. North Carolina Medical Journal, 80(3), 186-190. Physicians with a primary area of practice of obstetrics/gynecology were weighted as 0.25 of a full-time equivalent (FTE) primary care practitioner. All other primary care physicians were weighted as 1 FTE. Primary care physician assistants, nurse 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 and certified nurse midwife data is derived from licensure data provided by the North Carolina Board of Nursing. Data include active, licensed practitioners in practice in North Carolina as of October 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

Access to primary care is necessary to improving the health outcomes of communities. With the recent spread of the novel coronavirus 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 NC.

On the map above, green indicates the county is meeting the NC Institute of Medicine's target ratio of 1 primary care provider to every 1,500 people. Edgecombe County is orange in color, and does not meet 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/

Physicians per 10,000 Population by County, North Carolina, 2019

State Rate: 24.3
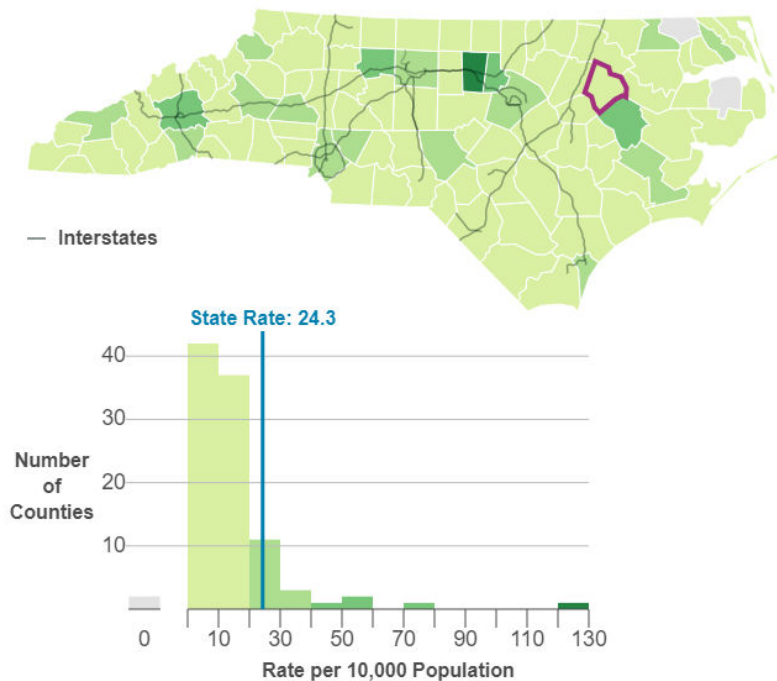
Profession Demographics for Edgecombe County
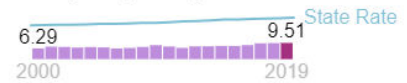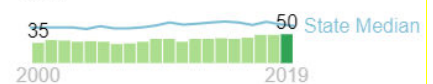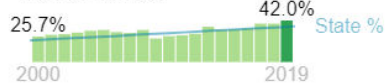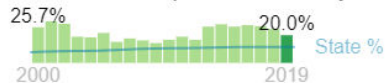
Notes: Data include active, licensed physicians in practice in North Carolina as of October 31 of each year who are not residents-in-training and are not employed by the Federal government. Physician data are derived from the North Carolina Medical Board. County estimates are based on primary practice location. Population census data and estimates are downloaded from the North Carolina Office of State Budget and Management via NC LINC and are based on US Census data. Source: North Carolina Health Professions Data System, Program on Health Workforce Research and Policy, Cecil G. Sheps Center for Health Services Research, University of North Carolina at Chapel Hill. Created August 29, 2021 at https://nchealthworkforce.unc.edu/interactive/supply/.

The number of physicians per 10,000 population in Edgecombe County has increased from 6.29 physicians in 2000 to 9.51 in 2019.

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

Analysis of Clinical Care Profile

The number of physicians per 10,000 population for Edgecombe County stands at 9.51, compared to the state rate of 24.3. This shows a shortage of providers for our county's residents. The majority of Edgecombe County residents 0-64 years of age (87%) have some type of health insurance coverage, with 13% having no health insurance coverage. This has decreased since the last CHNA where 88% of the population 0-64 had coverage. The number of individuals receiving Medicare, Medicaid, or Tricare only also decreased since the last CHNA.

Chapter 5   Chronic and Communicable Disease Profile

Leading Causes of Death

Rank	Edgecombe County Cause	Deaths	Rate	Rank	North Carolina Cause	Deaths	Rate	Rank	Health ENC Counties Cause	Deaths	Rate
1	Heart Disease	140	271.99	1	Cancer	19,963	190.34	1	Heart Disease	4,546	210.2
2	Cancer	137	266.16	2	Heart Disease	19,661	187.46	2	Cancer	4,345	200.91
3	Cerebrovascular Disease	55	106.85	3	Chronic Lower Respiratory Diseases	5,411	51.59	3	Cerebrovascular Disease	1,215	56.18
4	Chronic Lower Respiratory Diseases	33	64.11	4	Cerebrovascular Disease	5,203	49.61	4	Chronic Lower Respiratory Diseases	1,114	51.51
5	Other Unintentional Injuries	32	62.17	5	Other Unintentional Injuries	4,683	44.65	5	Other Unintentional Injuries	1,006	46.52
6	Diabetes Mellitus	32	62.17	6	Alzheimer's Disease	4,508	42.98	6	Alzheimer's Disease	918	42.45
7	Alzheimer's Disease	27	52.46	7	Diabetes Mellitus	3,127	29.81	7	Diabetes Mellitus	838	38.75
8	Motor Vehicle Injuries	21	40.8	8	Nephritis Nephrotic Syndrome and Nephrosis	2,121	20.22	8	Nephritis Nephrotic Syndrome and Nephrosis	476	22.01
9	Nephritis Nephrotic Syndrome and Nephrosis	19	36.91	9	Pneumonia and Influenza	1,730	16.49	9	Motor Vehicle Injuries	460	21.27
10	Chronic Liver Disease and Cirrhosis	15	29.14	10	Motor Vehicle Injuries	1,608	15.33	10	Pneumonia and Influenza	382	17.66

Leading Causes of Injury Death

Leading Causes of Injury Death 2016 to 2019 EDGECOMBE		
Rank	Cause	#
1	MVT - Unintentional	70
2	Poisoning - Unintentional	53
3	Fall - Unintentional	29
4	Firearm - Assault	28
5	Firearm - Self-Inflicted	22
TOTAL		240

Leading Causes of Injury Hospitalization 2016 to 2019 EDGECOMBE		
Rank	Cause	#
1	Fall - Unintentional	515
2	MVT - Unintentional	183
3	Poisoning - Unintentional	154
4	Poisoning - Self-Inflicted	69
5	Fire/Burn - Unintentional	53
TOTAL		1,228

Leading Causes of Injury ED Visits 2016 to 2019 EDGECOMBE		
Rank	Cause	#
1	Fall - Unintentional	5,631
2	MVT - Unintentional	3,896
3	Unspecified - Unintentional	3,178
4	Struck By/Against - Unintentional	1,617
5	Natural/Environmental - Unintentional	1,077
TOTAL		21,491

Leading Causes of Hospitalizations

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Leading Causes of Emergency Department Visits

Leading Causes of Injury Death 2016 to 2019 EDGECOMBE		
Rank	Cause	#
1	MVT - Unintentional	70
2	Poisoning - Unintentional	53
3	Fall - Unintentional	29
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TOTAL		**21,491**

Top Ten Reportable Communicable Diseases

Top 10 Communicable Diseases

Disease	Percentage
Chlamydia	45.71%
Gonorrhea	24.34%
Nongonococcal urethritis	11.47%
Hepatitis C - Chronic	9.98%
Campylobacter infection	2.63%
HIV	1.23%
Syphilis – 04. Unknown Duration or Late…	1.05%
Salmonellosis	0.61%
Pelvic inflammatory disease	0.53%
AIDS	0.35%

Cases (axis: 0, 100, 200, 300, 400, 500, 600)

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

For a complete list of communicable diseases for Edgecombe and other counties, click the link in the slide.

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

The top communicable diseases as reported by NC DHHS in Edgecombe 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.

Communicable case counts and rates at the state and county level can be found by following the weblink in the slide.

Analysis of Chronic and Communicable Disease Profile
Edgecombe County

Edgecombe County's top 3 leading causes of death as it relates to chronic and communicable disease are heart disease, cancer and cerebrovascular disease. The rates of these conditions are significantly higher in Edgecombe than other Health ENC counties and even higher than the NC rate. The top 3 communicable diseases in the county are chlamydia, gonorrhea, and nongonococcal urethritis. A little over 83% of residents ages 0-64 have a form of health insurance, mirroring the state's average. This number is higher than Health ENC counties. Unintentional motor vehicle incidents and poisonings, respectively, are the leading causes of death among individuals hospitalized and who visit the ED. The number of physicians per 10,000 population in Edgecombe County has increased from 6.29 physicians in 2000 to 9.51 in 2019.

Chapter 6   HNC 2030 Indicator Rankings by Health ENC Regions

Indicators / Measures	Edgecombe	NC
Health Outcomes		
Premature Death (Years of Potential Life Lost)	12,800	7600
Low Birthweight (% < 2500 grams)	13%	9%
Health Factors		
Health Behaviors		
Adult Smoking (% of adults, age adjusted, smokers)	26%	18%
Adult Obesity (% of adults, BMI greater than 30 kg/m2)	40%	32%
Excessive drinking	14%	18%
Sexual Transmitted infections (Chlamydia cases per 100,000 pop)	985.80	647.80
Teen Births (Number births per 1,000 15-19 yrs old)	41	22
Clincal Care		
Uninsured (% of pop <65 without insurance)	13%	13%
Primary Care Physicians (ratio of pop to primary care docs)	2890 to 1	1400 to 1
Preventable hospital stays	5760	4539
Mammography Screening	49%	46%
Flu Vaccinations (% of fee for service Medicare enrollees, got flu shot	52%	52%
Social & Economic Factors		
High School Completion (% 25 and older with HSD or equiv)	81%	88%
Some College	51.00%	67.00%
Unemployment (% 16 or older seeking work)	5.90%	3.90%
Children in Poverty	33.00%	19.00%
Income inequality (ratio of household income 80:20 percentile)	5.50%	4.70%
Children in single parent households	48.00%	28.00%
Violent crime	481	351.0
Injury deaths	109	77
Physical Environment		
Air Pollution - particulate matter	8.3	8.5
Severe Housing problems	19%	15%

Areas to Explore Needs Attention	Areas of Strength Doing Good	Source: County Health Rankings https://www.countyhealthrankings.org/

Chapter 7   County Health Ranking Indicators

Population Health Model

County Health Rankings model © 2014 UWPHI
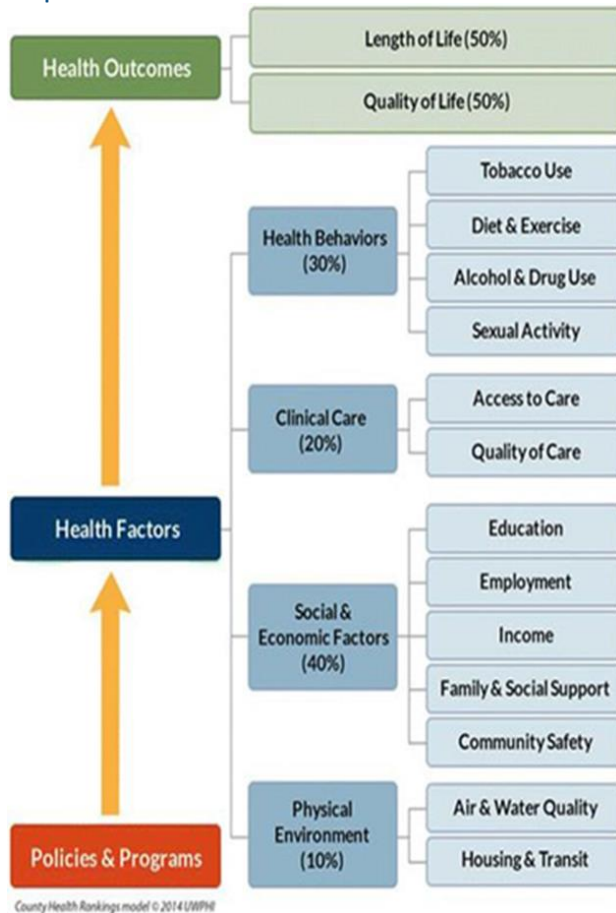
The County Health Rankings are based on a model of community health that emphasizes the many factors that influence how long and how well we live. The Rankings use more than 30 measures that help communities understand how healthy their residents are today (health outcomes) and what will impact their 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.
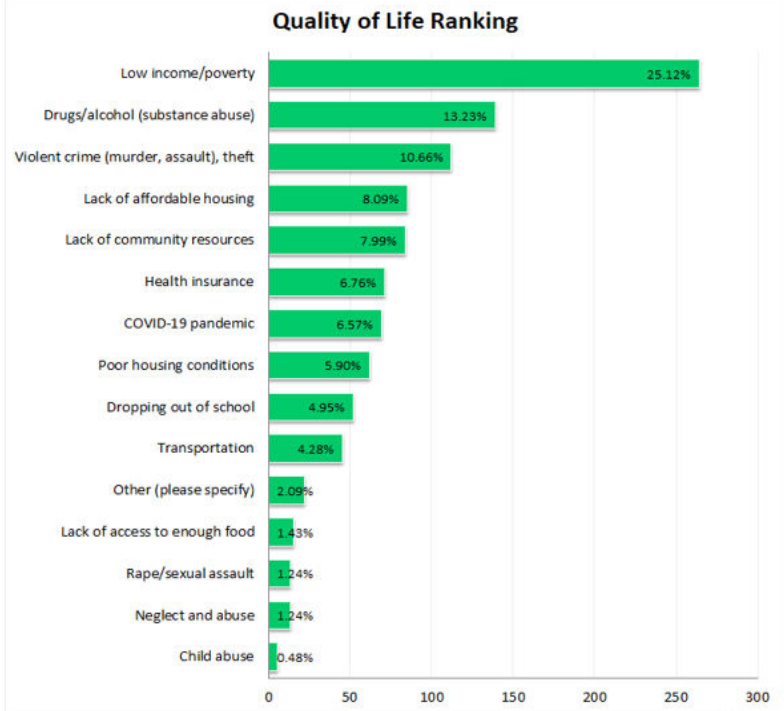
- There are many factors that influence how well and how long people live.
- The *County Health Rankings* model (right) is a population health model that uses data from different sources to help identify areas of concerns and strengths to help communities achieve health and wellness.
- The Rankings provides county-level data on health behavior, clinical care, social and economic and physical environment factors.

Chapter 8   Survey Findings

Community Survey Results: Edgecombe County

Top 3 Quality of Life Issues_identified in community survey

- 25.12% (264) responded Low income/Poverty

- 13.23% (139) responded Drugs/Alcohol (substance abuse) and,

- 10.66% (112) responded Violent crime (murder, assault), theft

Quality of Life Ranking

Issue	Percentage
Low income/poverty	25.12%
Drugs/alcohol (substance abuse)	13.23%
Violent crime (murder, assault), theft	10.66%
Lack of affordable housing	8.09%
Lack of community resources	7.99%
Health insurance	6.76%
COVID-19 pandemic	6.57%
Poor housing conditions	5.90%
Dropping out of school	4.95%
Transportation	4.28%
Other (please specify)	2.09%
Lack of access to enough food	1.43%
Rape/sexual assault	1.24%
Neglect and abuse	1.24%
Child abuse	0.48%

This graph shows the list of community issues that were ranked by residents from the community survey as most affecting the quality of life in Edgecombe County. Low income/ Poverty was the most frequently selected issue and was ranked by 25.12% of survey respondents, followed by 13.2% responding that drugs (substance abuse) was the second most quality of life issue. Survey respondents ranked Violent Crime (Murder, Assault), theft as the third issue most affecting quality of life in Edgecombe County. Less than 1% of survey respondents selected Child abuse as issues most affecting the quality of life in Edgecombe County.

Do you (strong) disagree, are neutral, or (strongly) agree with the following?
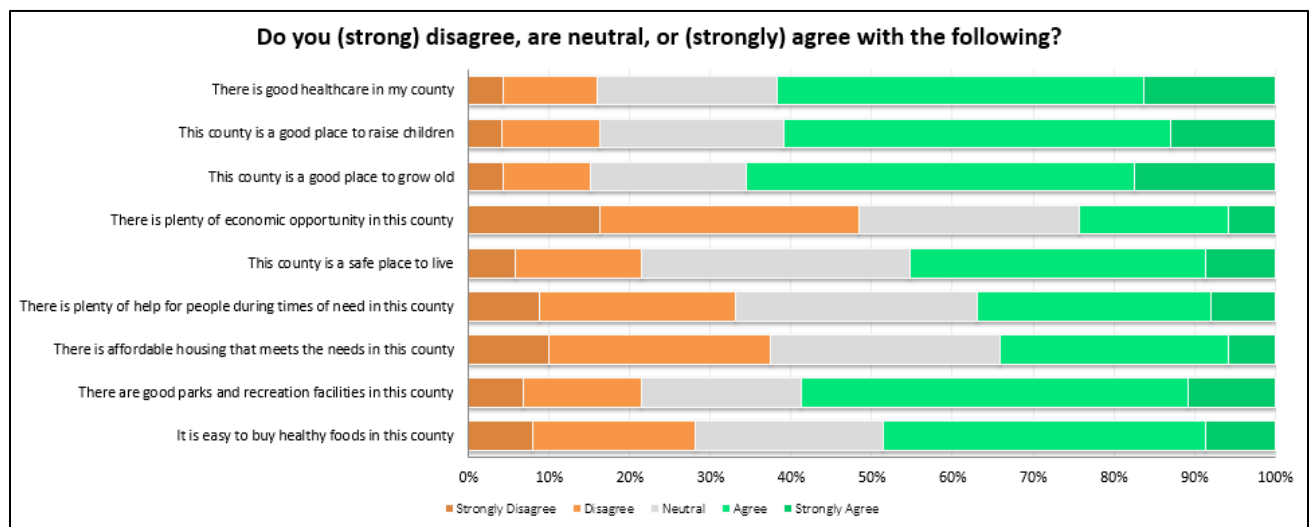
This graph shows how people responded to certain questions when asked about how they feel or view issues that support a safe and healthy lifestyle in their county.

For example, in the first question, when asked, "there is good healthcare in my county," less than 20% of people either strongly disagreed or disagreed, while more than 50% agreed and strongly agreed.

In a question, when asked, "there is plenty of economic opportunity in this county," more than 40% of people either strongly disagreed or disagreed, while less than 30% agreed or strongly agreed.

QUESTION: Have you had a COVID-19 vaccine?
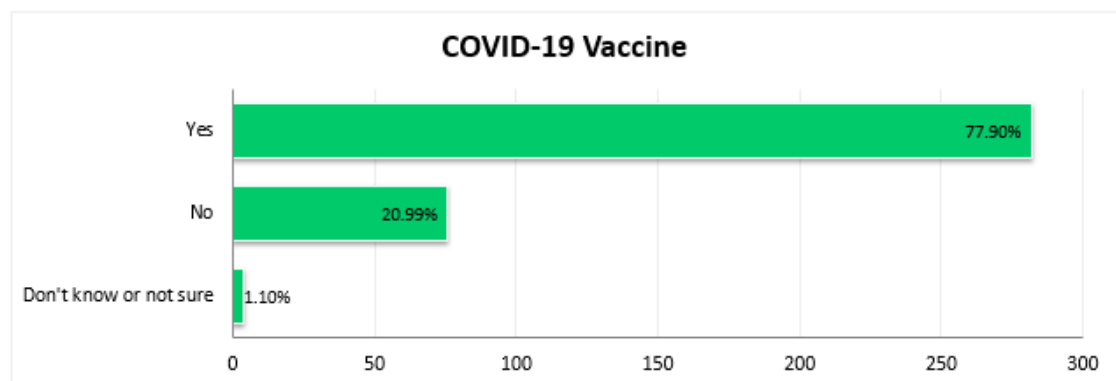
Note: Community survey was distributed between April 1 and June 30, 2021.

This community survey question asked people if they had received a COVID-19 vaccine.

Between April 1 and June 30, 2021, nearly 78% of participants reported being vaccinated for COVID-19. while 21% had not been vaccinated.

Chapter 9   Inventory of Resources

The Edgecombe County Health Department regularly updates a comprehensive community resource guide that includes the following but is not limited to:

- Adoption
- AIDS
- Behavioral Health Services
- Child Care
- Counseling Services
- Disabled Citizens Services
- Education
- Emergency Services
- Environmental Health
- Financial Assistance
- Food
- Health Services
- Homebound Services
- Housing
- Job Services
- Legal Services
- Literacy Programs
- Pregnancy Services
- Professional Resources
- Senior Citizens Services
- Substance Use Services
- Support Groups
- Transportation
- Youth Development Services

This resource guide is disseminated to the community and can also be provided upon request.

Chapter 10   Community Prioritization Process

On December 6, 2021, members of the Edgecombe County Health Department, ECU Health Edgecombe Hospital and Edgecombe County Rural Health Network met to discuss the Community Health Needs Assessment. Facilitated by Rural Forward NC, 22 individuals were present at the priority setting meeting. This meeting was held virtually via Zoom due to COVID-19. Assessment results were shared and a formal process was utilized to determine Edgecombe County's community health priorities. Assessment data (primary and secondary) were shared with key stakeholders. Stakeholders reviewed the information, asked questions, and shared additional data from their respective organizations. Following a comprehensive review of all data provided, participants were separated into breakout groups to further discuss the issues identified by the survey.

The group first joined breakout groups to identify the top most critical challenges identified by the data as well as their own personal experiences in healthcare. In addition, breakout groups identified strengths of this group/community to address these challenges.

Once the breakout sessions ended, the entire group reconvened for further discussion on the priorities to be selected.

Strengths identified were:

1. Strong partnerships and connections between healthcare providers and other community organizations;
2. An abundance of lived experience in providing "boots on the ground" response;
3. A variety of options and resources for both insured and uninsured residents of Edgecombe County;
4. A tight community with strong skills in collaboration and networking;
5. This group has skills in data literacy and a strong background in understanding health issues;
6. Strong community organizations doing relevant work, such as the Parks and Recreation Department.

The top most critical problems identified were:

1. Substance use and mental health
2. Hepatitis rates and reporting
3. Poverty level
4. Workforce hiring policies
5. Disparities in outcomes for the African American population
6. Food insecurity
7. Overdose
8. Chronic disease
9. Lack of affordable housing
10. Low safety levels

Following additional discussion, participants were then guided through a nominal group technique (NGT) where decision-making could be finalized. The nominal group technique was utilized to assure everyone's feedback and opinions were considered (as opposed to traditional voting, where the majority rules). During this process, some priorities were combined as appropriate to finalize the top health priorities for Edgecombe County. As a result of this process, ECHD and ECU Health Edgecombe Hospital will work to develop action plans addressing the top community health issues. The group also chose to identify several themes across the problems, and identified those underlying issues as the priorities to be addressed.

42

The final three priorities chosen were:

1. Substance use, mental health, and overdose – the group suggested open conversations around problematic workforce hiring policies.

2. Social determinants of health – the group discussed specific focus on food insecurity, lack of affordable housing, poverty levels, lack of transportation, and low safety levels/high crime rates.

3. Health disparities and health equity – the group observed that specific groups were disproportionately affected by certain health concerns and aims to address differences in health needs based on race, age, income, and other identities.

CHNA References

Health Outcomes	Source	Years
Life expectancy	NC-DHHS State Center for Health Statistics	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	
Health Behavior Factors	**Source**	**Years**
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
Minority Populations	U.S. Census Bureau, ACS 5-year Estimate	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 Rankings	2013-2017

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.

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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
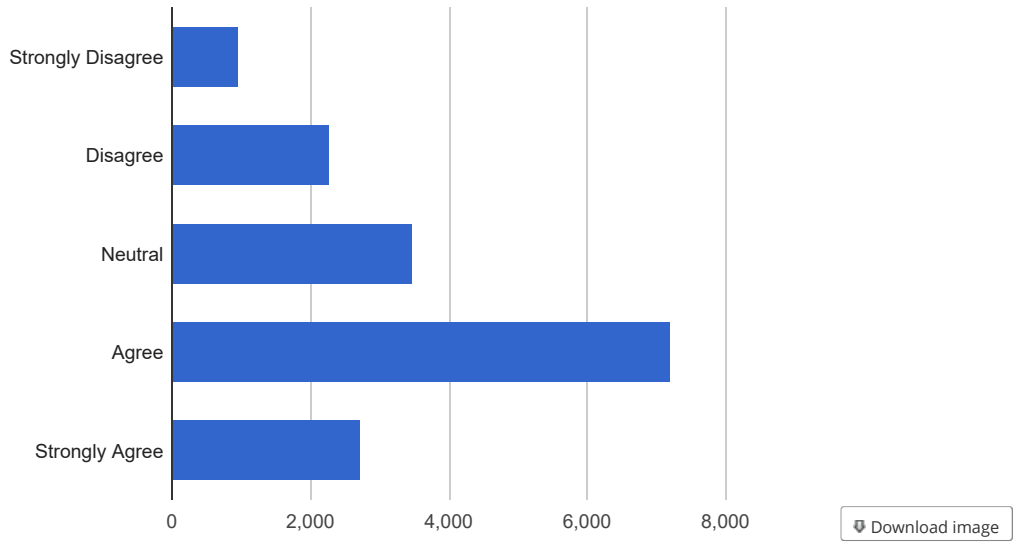
Community Health Needs Assessment

Data Exports, Reports, and Stats

Edgecombe County

There is good healthcare in my county. *(healthcare)*

Total Count (N)	Missing*	Unique
363	1 (0.3%)	5

Counts/frequency: Strongly Disagree (16, 4.4%), Disagree (42, 11.6%), Neutral (81, 22.3%), Agree (165, 45.5%), Strongly Agree (59, 16.3%)

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

Total Count (N)	Missing*	Unique
363	1 (0.3%)	5

Counts/frequency: Strongly Disagree (15, 4.1%), Disagree (44, 12.1%), Neutral (83, 22.9%), Agree (174, 47.9%), Strongly Agree (47, 12.9%)
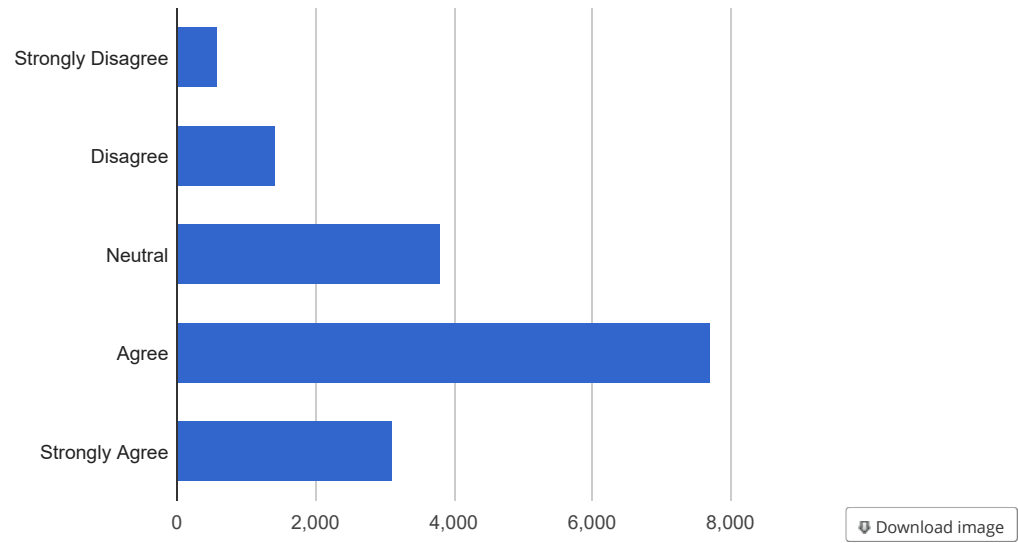
This county is a good place to grow old. *(grow_old)*

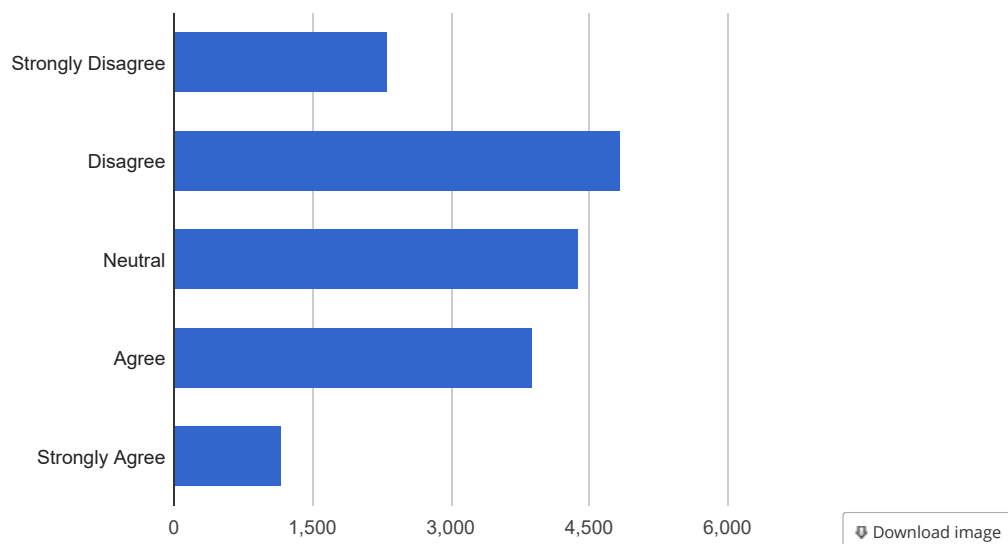| Total Count (N)	Missing*	Unique
363	1 (0.3%)	5

Counts/frequency: Strongly Disagree (16, 4.4%), Disagree (39, 10.7%), Neutral (70, 19.3%), Agree (175, 48.2%), Strongly Agree (63, 17.4%)
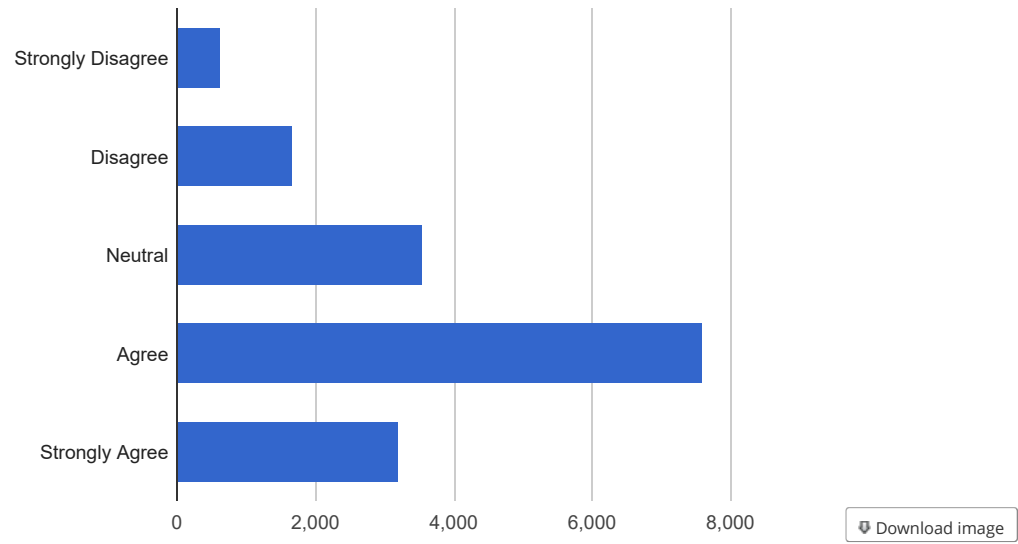
There is plenty of economic opportunity in this county. *(econ_opp)*
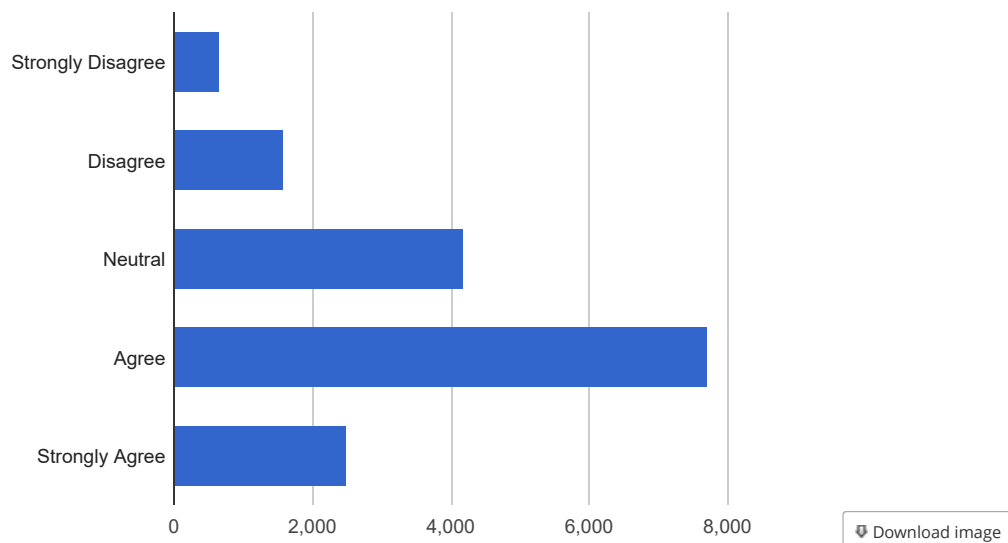
Total Count (N)	Missing*	Unique
363	1 (0.3%)	5

Counts/frequency: Strongly Disagree (59, 16.3%), Disagree (117, 32.2%), Neutral (99, 27.3%), Agree (67, 18.5%), Strongly Agree (21, 5.8%)

This county is a safe place to live *(safe)*

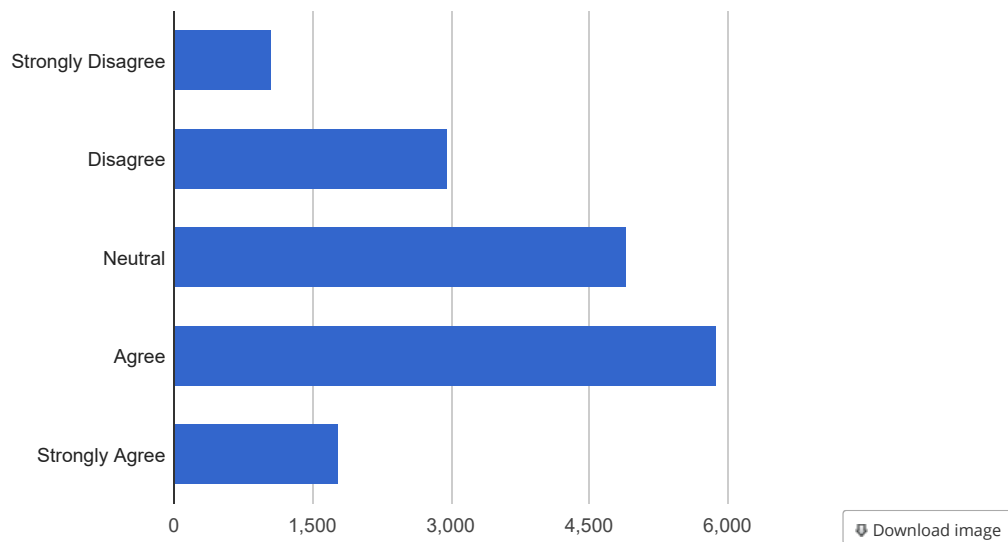| Total Count (N)	Missing*	Unique
363	1 (0.3%)	5

Counts/frequency: Strongly Disagree (21, 5.8%), Disagree (57, 15.7%), Neutral (121, 33.3%), Agree (133, 36.6%), Strongly Agree (31, 8.5%)

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

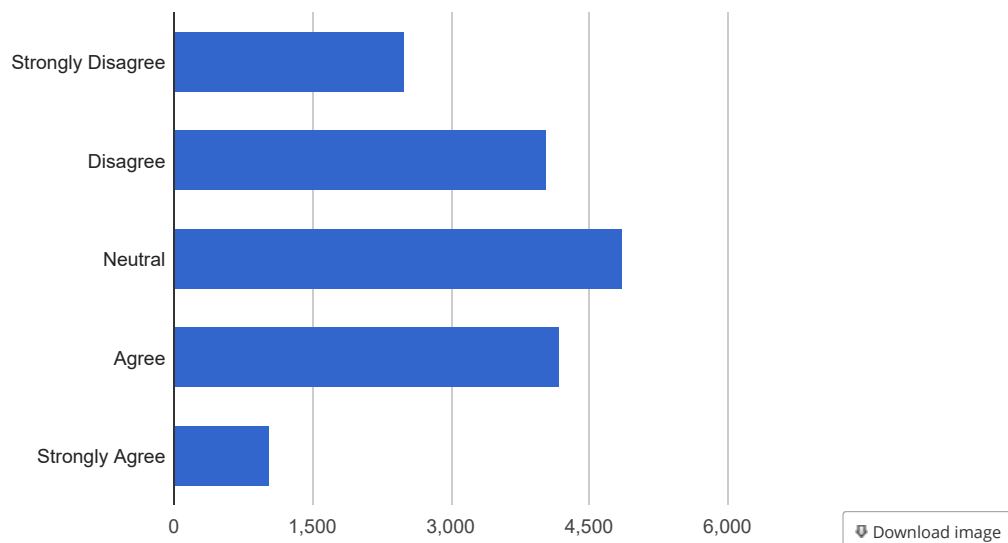| Total Count (N)	Missing*	Unique
363	1 (0.3%)	5

Counts/frequency: Strongly Disagree (32, 8.8%), Disagree (88, 24.2%), Neutral (109, 30.0%), Agree (105, 28.9%), Strongly Agree (29, 8.0%)

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

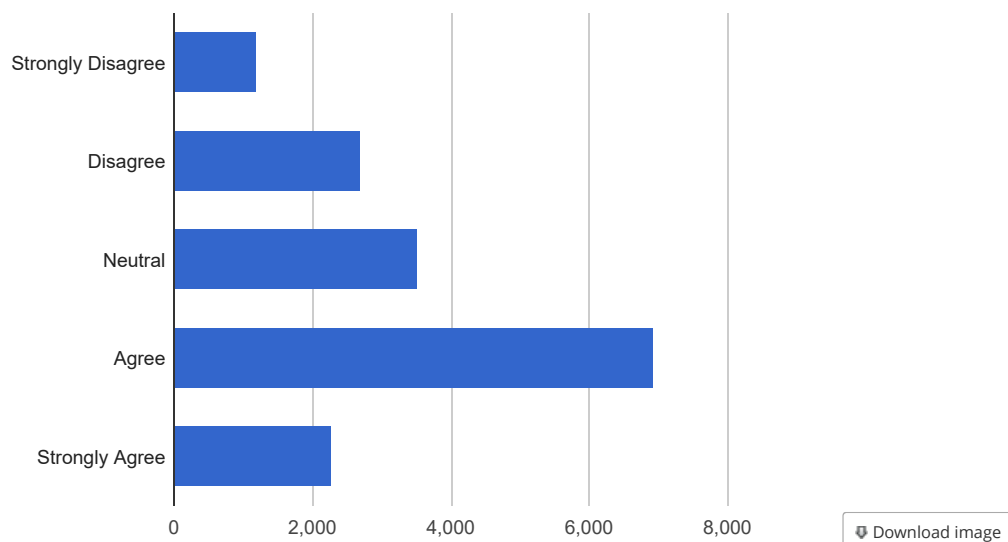| Total Count (N)	Missing*	Unique
361	3 (0.8%)	5

Counts/frequency: Strongly Disagree (36, 10.0%), Disagree (99, 27.4%), Neutral (103, 28.5%), Agree (102, 28.3%), Strongly Agree (21, 5.8%)

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

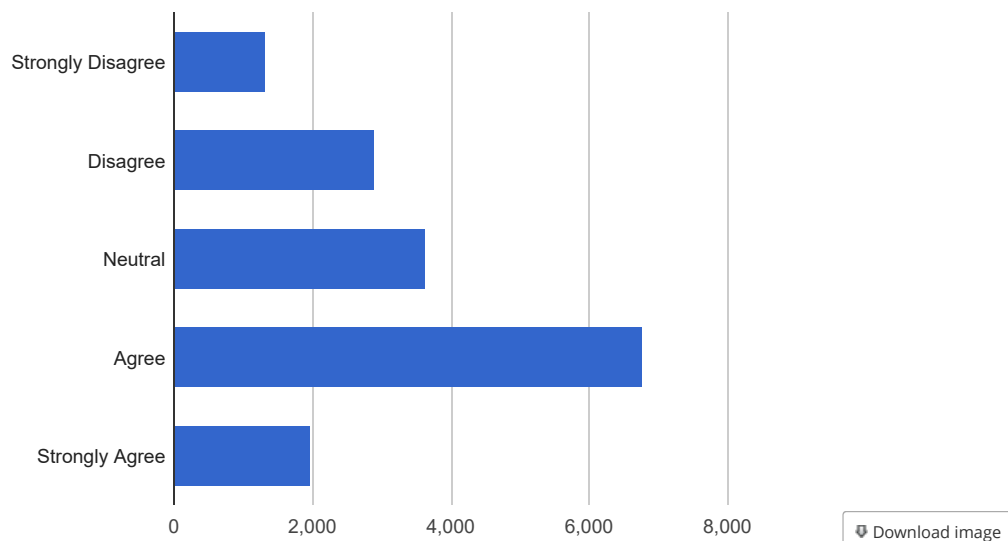| Total Count (N)	Missing*	Unique
363	1 (0.3%)	5

Counts/frequency: Strongly Disagree (25, 6.9%), Disagree (53, 14.6%), Neutral (72, 19.8%), Agree (174, 47.9%), Strongly Agree (39, 10.7%)

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

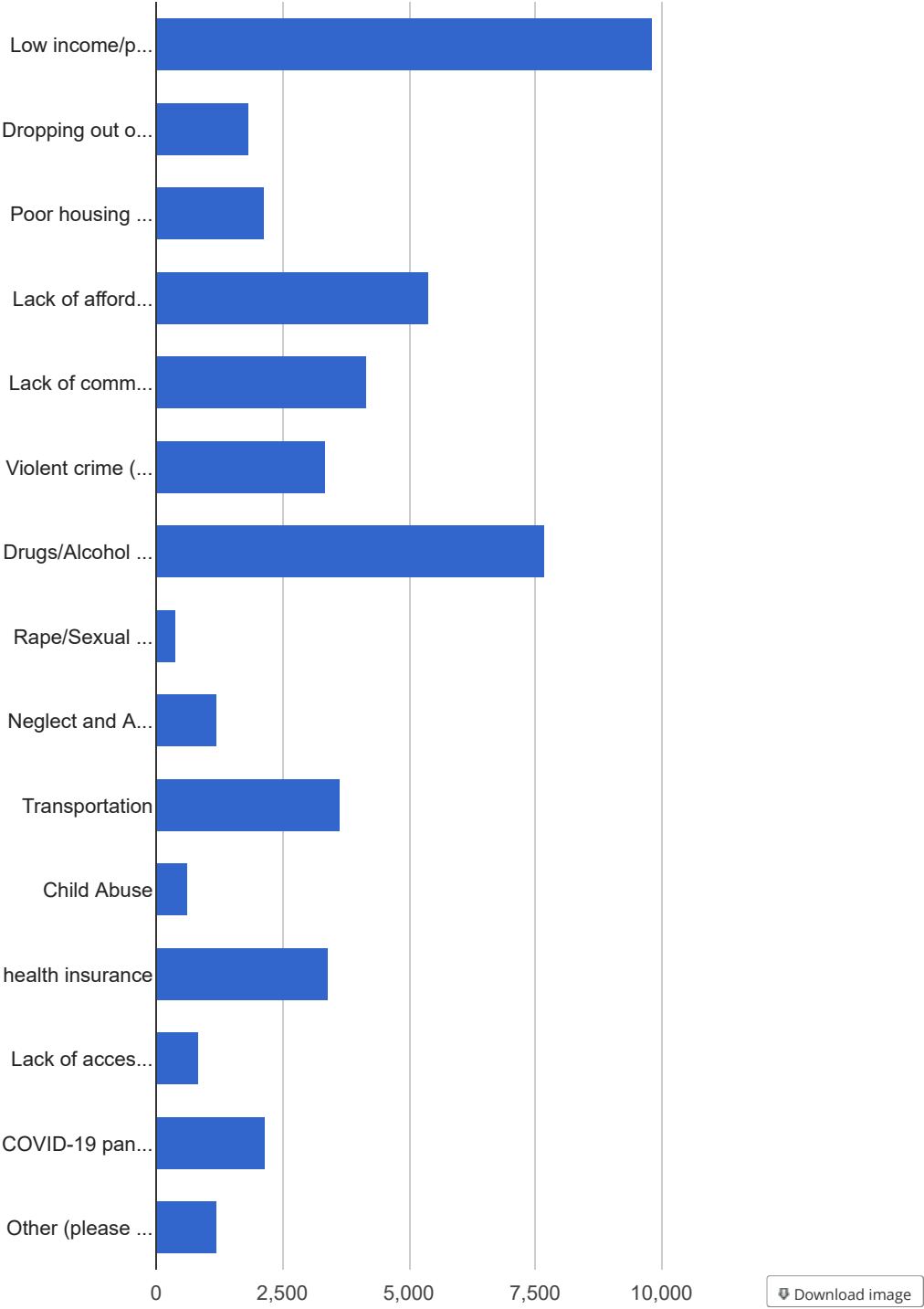| Total Count (N)	Missing*	Unique
363	1 (0.3%)	5

Counts/frequency: Strongly Disagree (29, 8.0%), Disagree (73, 20.1%), Neutral (85, 23.4%), Agree (145, 39.9%), Strongly Agree (31, 8.5%)

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

Total Count (N)	Missing*	Unique
363	1 (0.3%)	15

Counts/frequency: Low income/poverty (264, 72.7%), Dropping out of school (52, 14.3%), Poor housing conditions (62, 17.1%), Lack of affordable housing (85, 23.4%), Lack of community resources (84, 23.1%), Violent crime (murder, assault) Theft (112, 30.9%), Drugs/Alcohol (Substance Use) (139, 38.3%), Rape/Sexual Assault (13, 3.6%), Neglect and Abuse (13, 3.6%), Transportation (45, 12.4%), Child Abuse (5, 1.4%), health insurance (71, 19.6%), Lack of access to enough food (15, 4.1%), COVID-19 pandemic (69, 19.0%), Other (please specify) (22, 6.1%)

Other *(topthreeother1)*

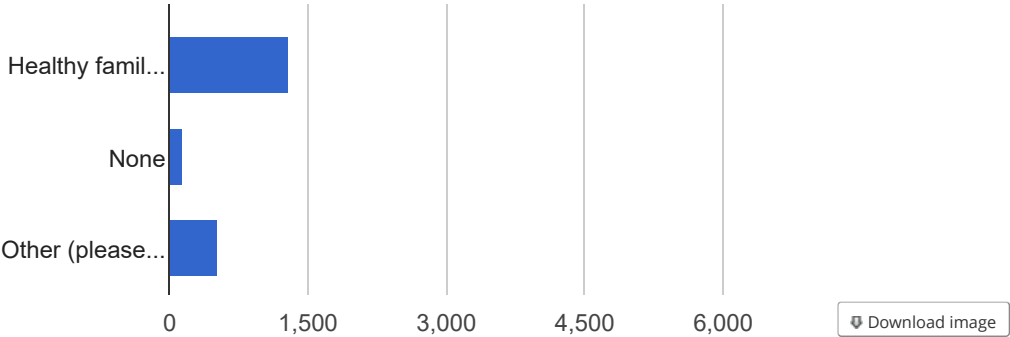| Total Count (N)	Missing*
20	344 (94.5%)

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

Total Count (N)	Missing*	Unique

363	1 (0.3%)	21

Counts/frequency: Animal control (22, 6.1%), Child care options (38, 10.5%), Elder care options (78, 21.5%), Services for disabled people (60, 16.5%), More affordable health services (86, 23.7%), Better/More healthy food choices (41, 11.3%), More affordable / better housing (93, 25.6%), Number of healthcare providers (21, 5.8%), Culturally appropriate health services (17, 4.7%), Counseling / mental and behavioral health / support groups (100, 27.5%), Better / more recreational facilities (parks, trails, community centers) (36, 9.9%), Substance Misuse Services/ Recovery Support (63, 17.4%), Positive teen activities (95, 26.2%), Transportation options (36, 9.9%), Availability of employment (47, 12.9%), Higher paying employment (151, 41.6%), Road maintenance (26, 7.2%), Pedestrian and cyclist road safety (3, 0.8%), Healthy family activities (36, 9.9%), None (5, 1.4%), Other (please specify) (8, 2.2%)
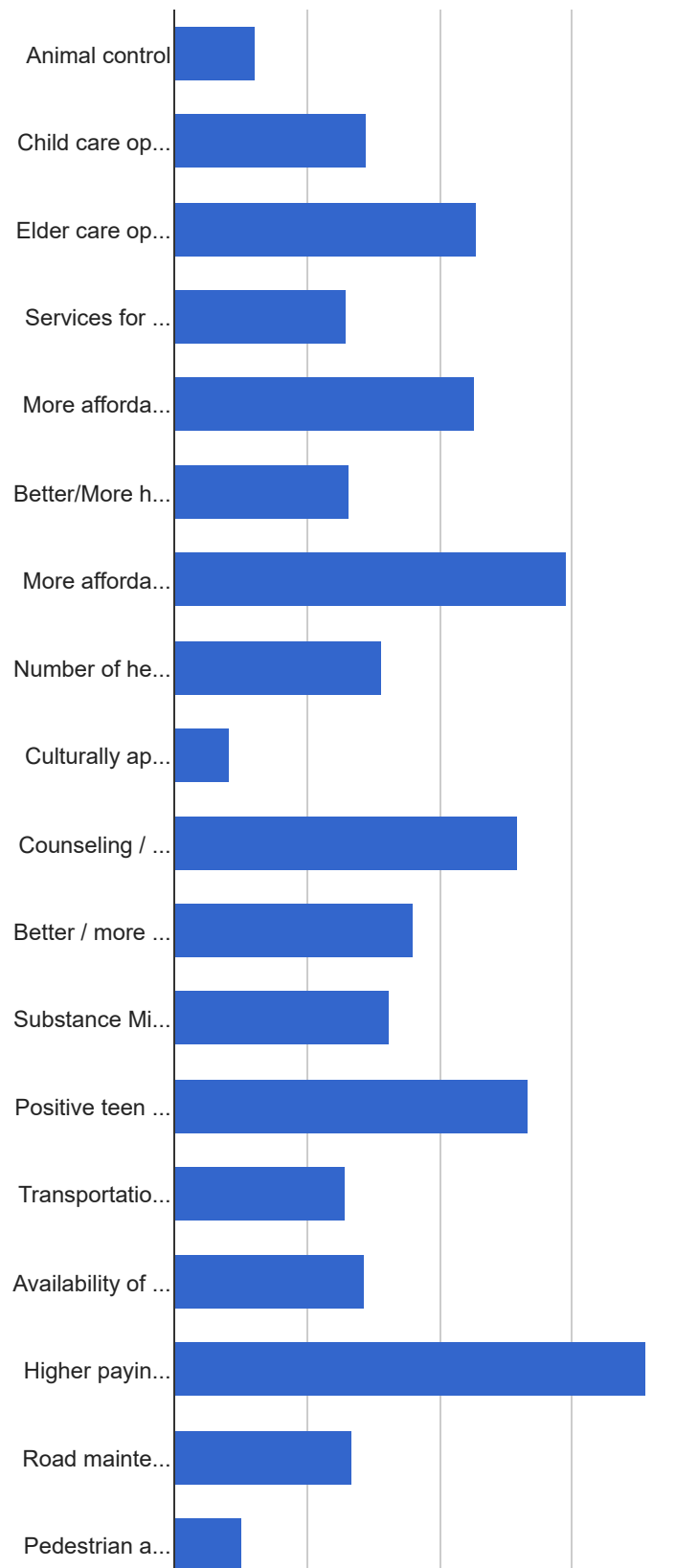
Other *(improvement_other)*

Total Count (N)	Missing*
8	356 (97.8%)

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
363	1 (0.3%)	27

Counts/frequency: Eating well/nutrition (127, 35.0%), Using child safety car seats (14, 3.9%), Exercising/fitness (75, 20.7%), Managing weight (90, 24.8%), Using seat belts (10, 2.8%), Suicide prevention (45, 12.4%), Driving safely (18, 5.0%), Mental/Behavioral Health (159, 43.8%), Domestic violence prevention (39, 10.7%), Crime prevention (74, 20.4%), Elder care (42, 11.6%), Child care/parenting (32, 8.8%), Rape/sexual abuse prevention (6, 1.7%), COVID-19 (26, 7.2%), Going to a dentist for check-ups/preventive care (21, 5.8%), Quitting smoking/tobacco use prevention (13, 3.6%), Substance misuse prevention (52, 14.3%), Harm reduction (7, 1.9%), Breastfeeding (5, 1.4%), Going to the doctor for yearly check-ups and screenings (61, 16.8%), Getting prenatal care during pregnancy (5, 1.4%), Getting flu shots and other vaccines (14, 3.9%), Preparing for an emergency/disaster (24, 6.6%), Caring for family members with special needs / disabilities (45, 12.4%), Preventing pregnancy and sexually transmitted diseases (safe sex) (53, 14.6%), None (5, 1.4%), Other (please specify) (4, 1.1%)
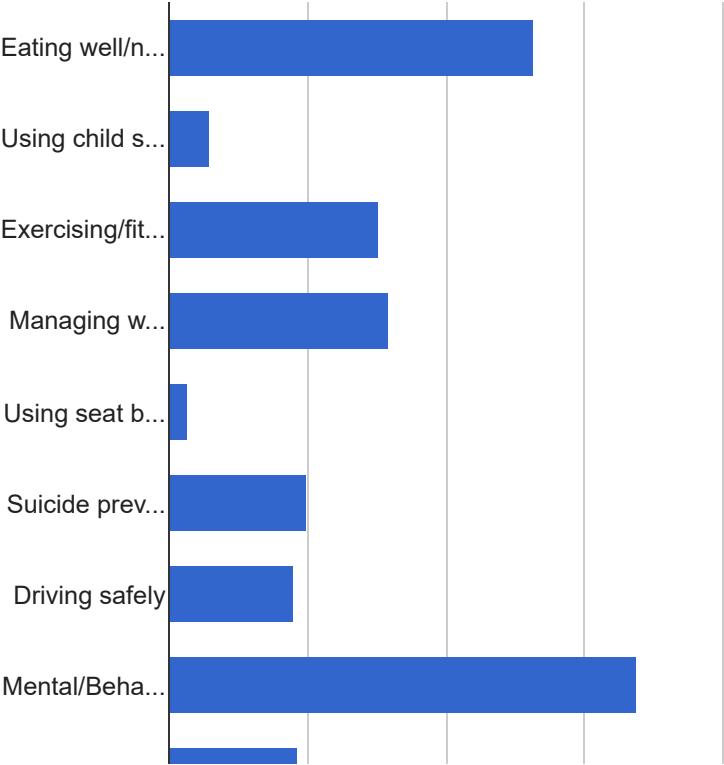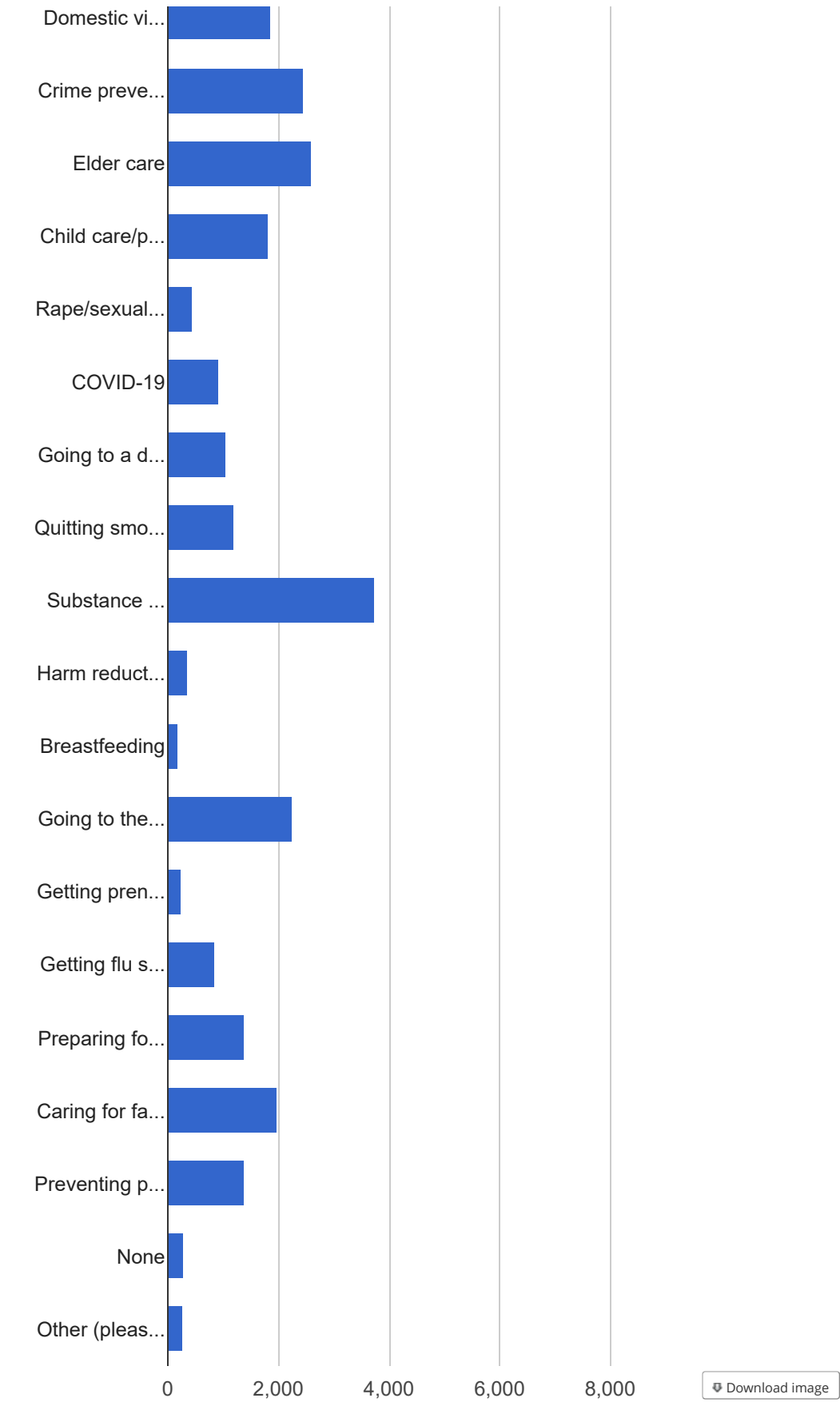
Other *(heath_behavin_other)*

Total Count (N)	Missing*

3	361 (99.2%)

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

Total Count (N)	Missing*	Unique
361	3 (0.8%)	18

Counts/frequency: Employment/Loss of Job (93, 25.8%), Access to food (20, 5.5%), Access to safe housing (12, 3.3%), Transportation (19, 5.3%), Education (57, 15.8%), Physical Health (61, 16.9%), Mental/Behavioral Health (100, 27.7%), Substance Misuse (8, 2.2%), Stress and anxiety (214, 59.3%), Economic Resources (46, 12.7%), Ability to seek medical care (8, 2.2%), Social isolation (171, 47.4%), Grief from loss of loved one (68, 18.8%), Access to medication (8, 2.2%), Lack of comfort in seeking medical care (25, 6.9%), Spiritual Health/Well-being (72, 19.9%), Child care (11, 3.0%), Other (21, 5.8%)
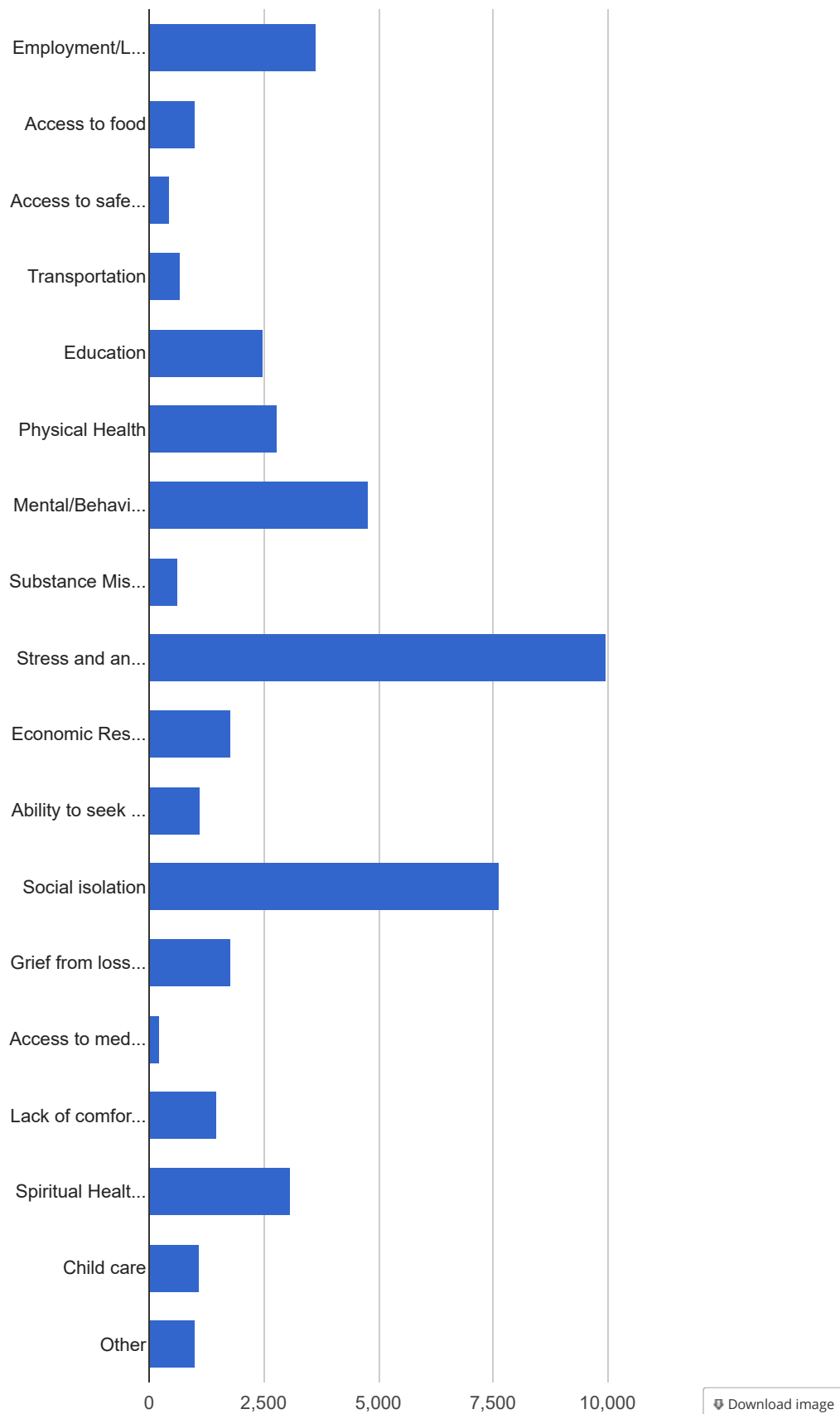
Other *(other_covid)*

Total Count (N)	Missing*
14	350 (96.2%)

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

Total Count (N)	Missing*	Unique
363	1 (0.3%)	17

Counts/frequency: Friends and family (133, 36.6%), Internet (183, 50.4%), Social Media (101, 27.8%), Employer (64, 17.6%), Television (92, 25.3%), Radio (25, 6.9%), Doctor / Nurse (233, 64.2%), My child's school (6, 1.7%), Help lines (10, 2.8%), Pharmacist (55, 15.2%), Hospital (42, 11.6%), Books / magazines (44, 12.1%), Church (31, 8.5%), Health department (78, 21.5%), Community health worker (30, 8.3%), Newspaper (24, 6.6%), Other (please specify) (6, 1.7%)
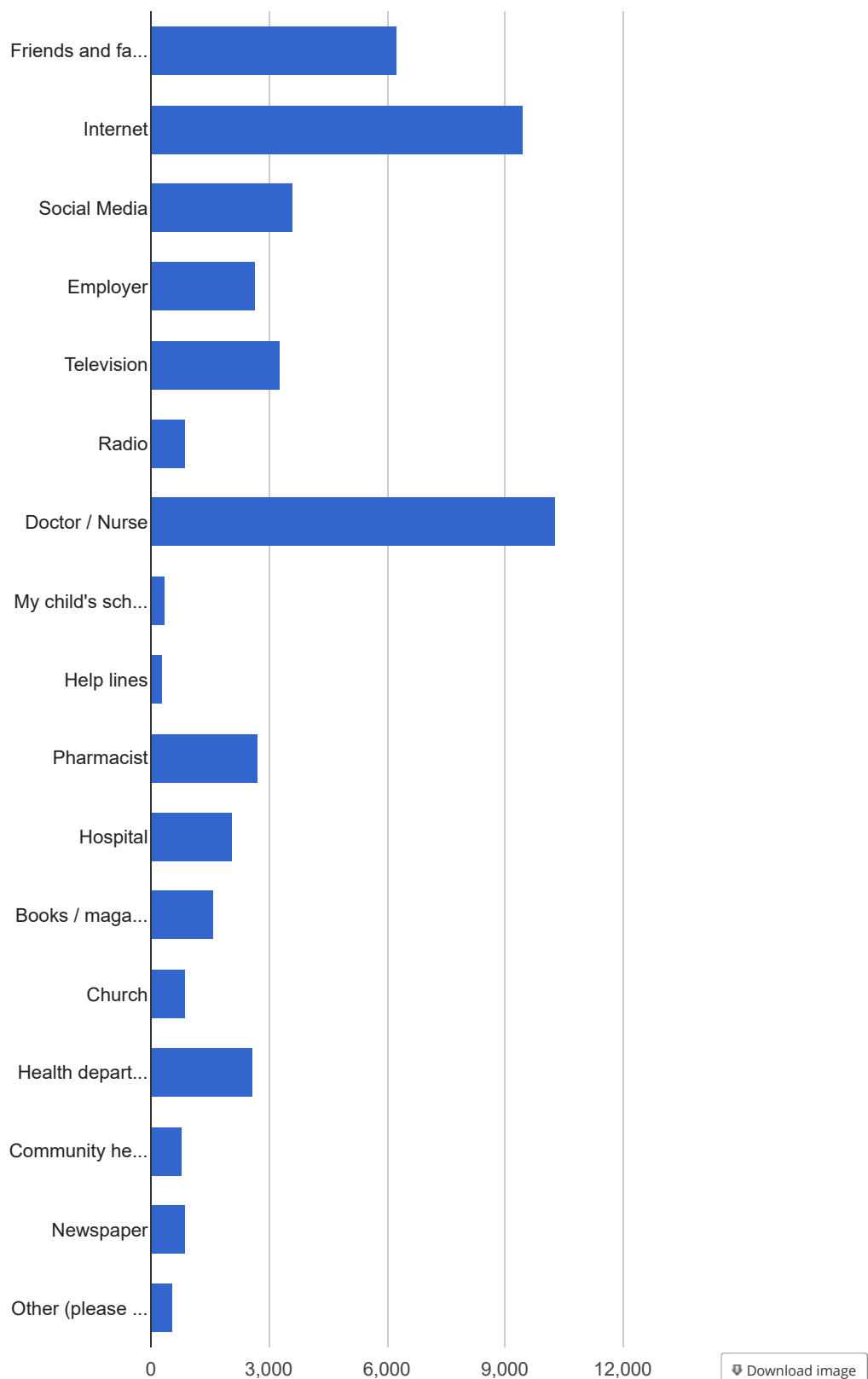
Other *(health_info_other)*

Total Count (N)	Missing*
3	361 (99.2%)

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
362	2 (0.5%)	16

Counts/frequency: Mammogram (140, 38.7%), Prostate cancer screening (26, 7.2%), Colon / Rectal exam (56, 15.5%), Blood sugar check (198, 54.7%), Cholesterol (195, 53.9%), Hearing Screening (28, 7.7%), Bone density test (28, 7.7%), Physical Exam (209, 57.7%), Pap Smear (126, 34.8%), Flu shot (151, 41.7%), Blood pressure check (235, 64.9%), Skin cancer screening (18, 5.0%), Vision screening (163, 45.0%), Cardiovascular screening (51, 14.1%), Dental cleaning / x-rays (160, 44.2%), None of the above (25, 6.9%)
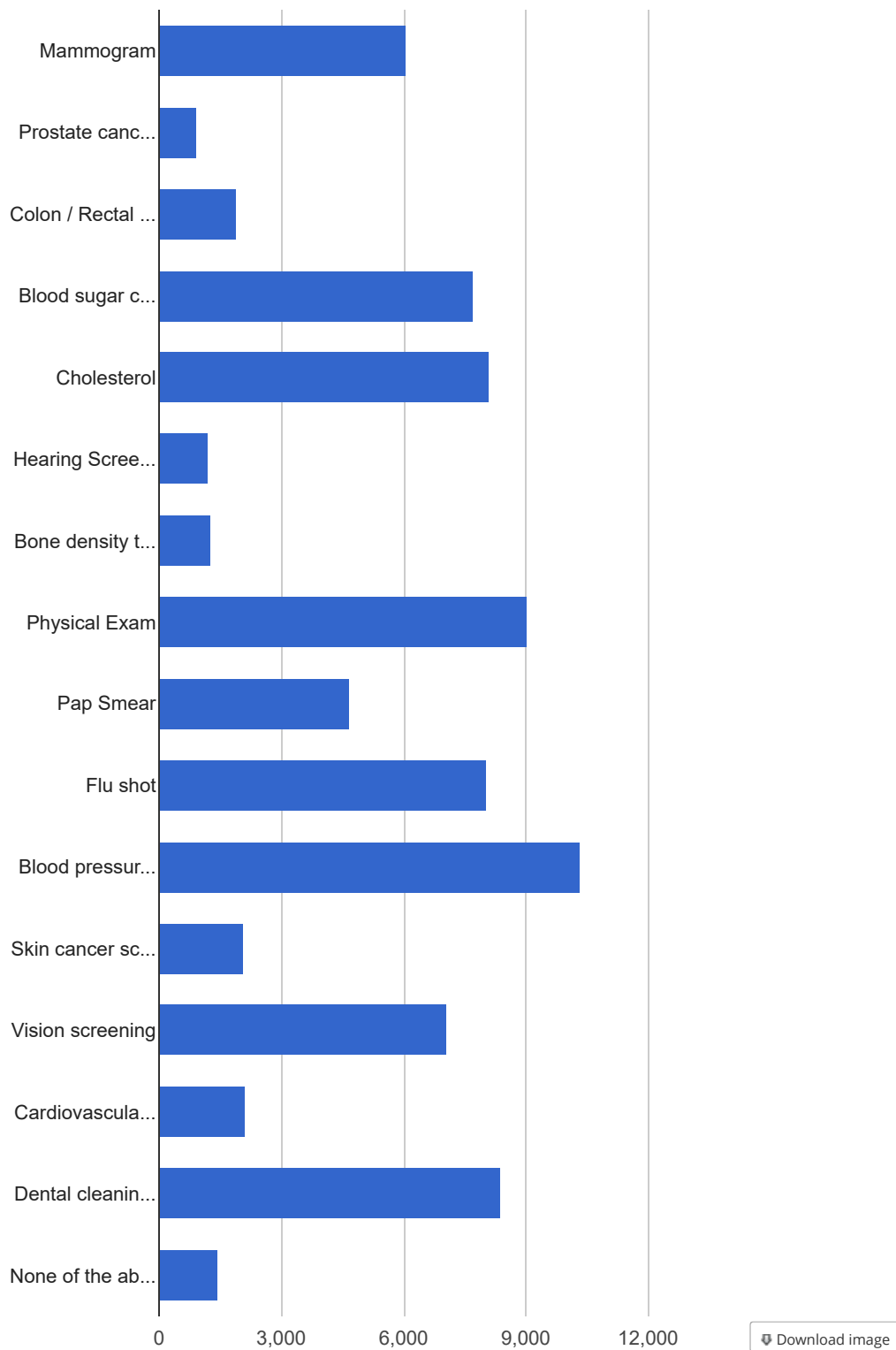
During a normal week, other than in your regular job, do you engage in any physical
activity or exercise that lasts at least a half an hour? (Please select only one) *(physicalactivity)*

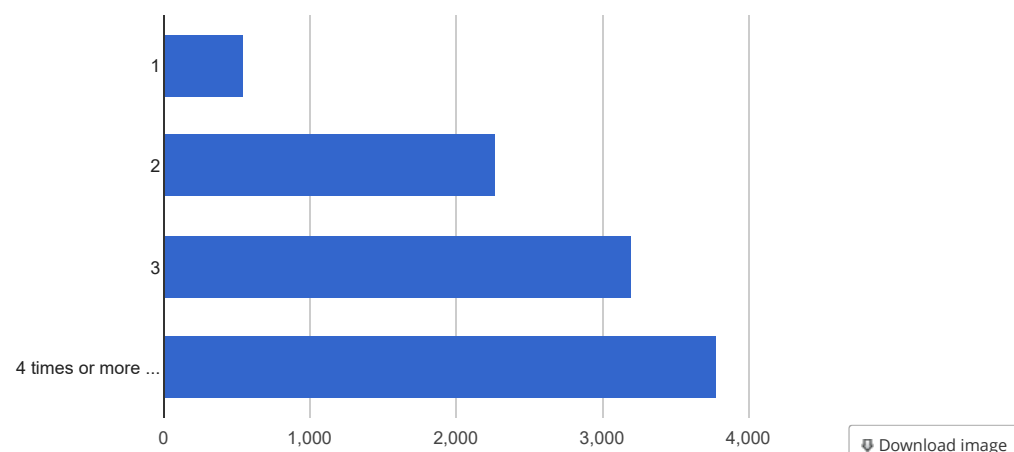| Total Count (N)	Missing*	Unique
363	1 (0.3%)	3

Counts/frequency: Yes How many times per week? (220, 60.6%), No (129, 35.5%), Don't know /not sure (14, 3.9%)
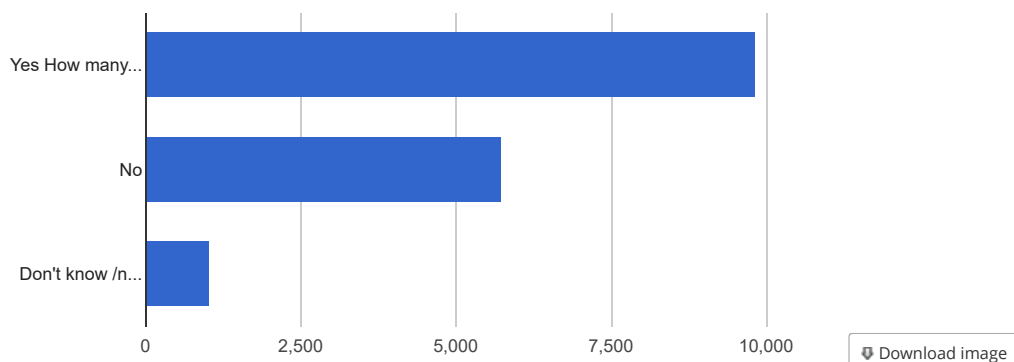
How many times per week? *(excercisetimesweek)*

Total Count (N)	Missing*	Unique
217	147 (40.4%)	4

**Counts/frequency:** 1 (15, 6.9%), 2 (59, 27.2%), 3 (74, 34.1%), 4 times or more per week (69, 31.8%)

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
232	132 (36.3%)	16

Counts/frequency: My job is physical or hard labor. (43, 18.5%), Exercise is not important to me. (6, 2.6%), It costs too much to exercise. (12, 5.2%), There is no safe place to exercise. (22, 9.5%), I don't have enough time to exercise. (69, 29.7%), I'm too tired to exercise. (96, 41.4%), I would need child care and I don't have it. (8, 3.4%), I'm physically disabled. (16, 6.9%), I don't know how to find exercise partners. (13, 5.6%), I don't know how to safely (4, 1.7%), I would need transportation and I don't have it. (2, 0.9%), I don't like to exercise. (27, 11.6%), I don't have access to a facility that has the things I need, like a pool, golf course, or a track. (28, 12.1%), Facilities closed due to COVID 19 (28, 12.1%), Low self-image (26, 11.2%), Other (please specify) (22, 9.5%)
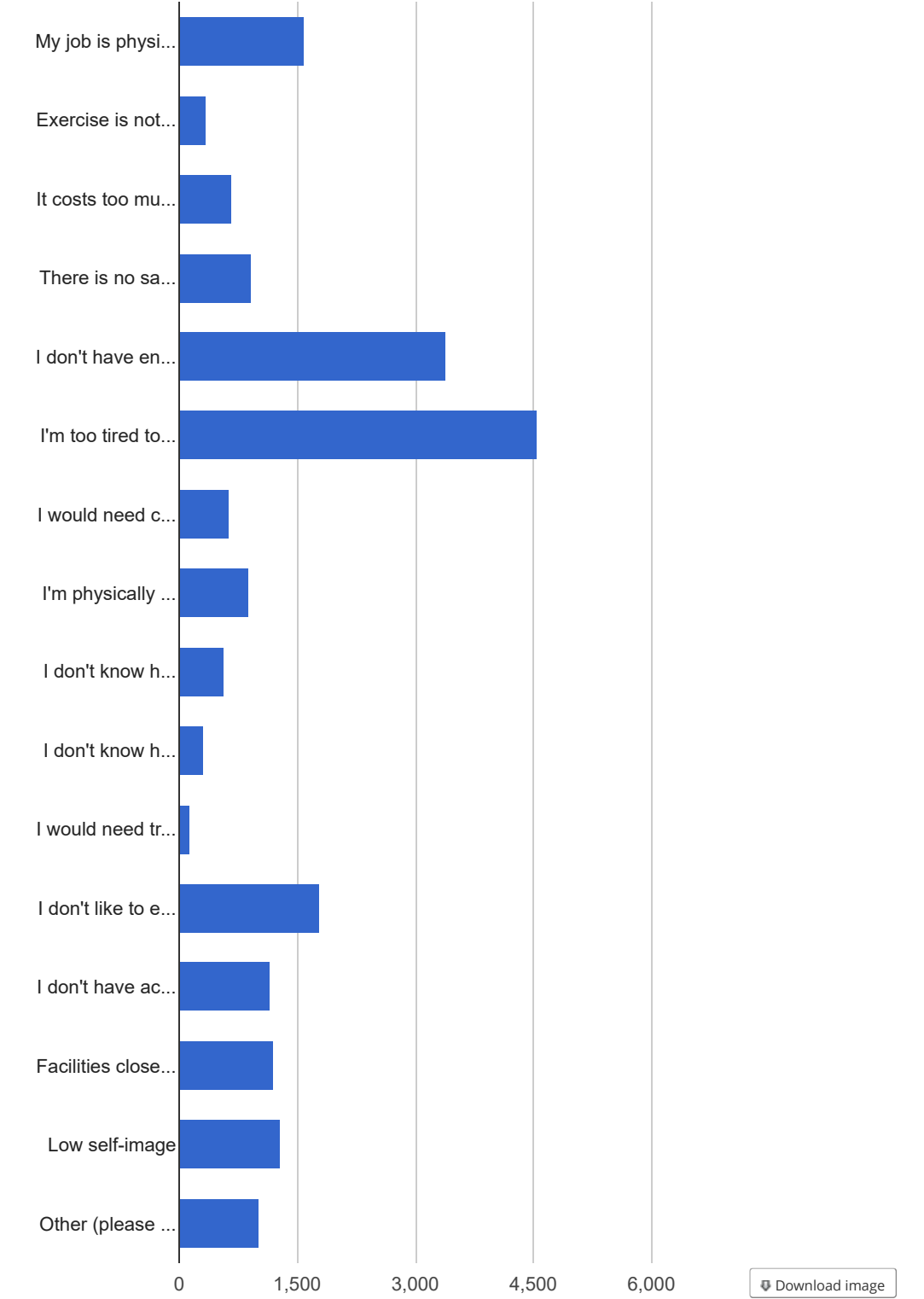
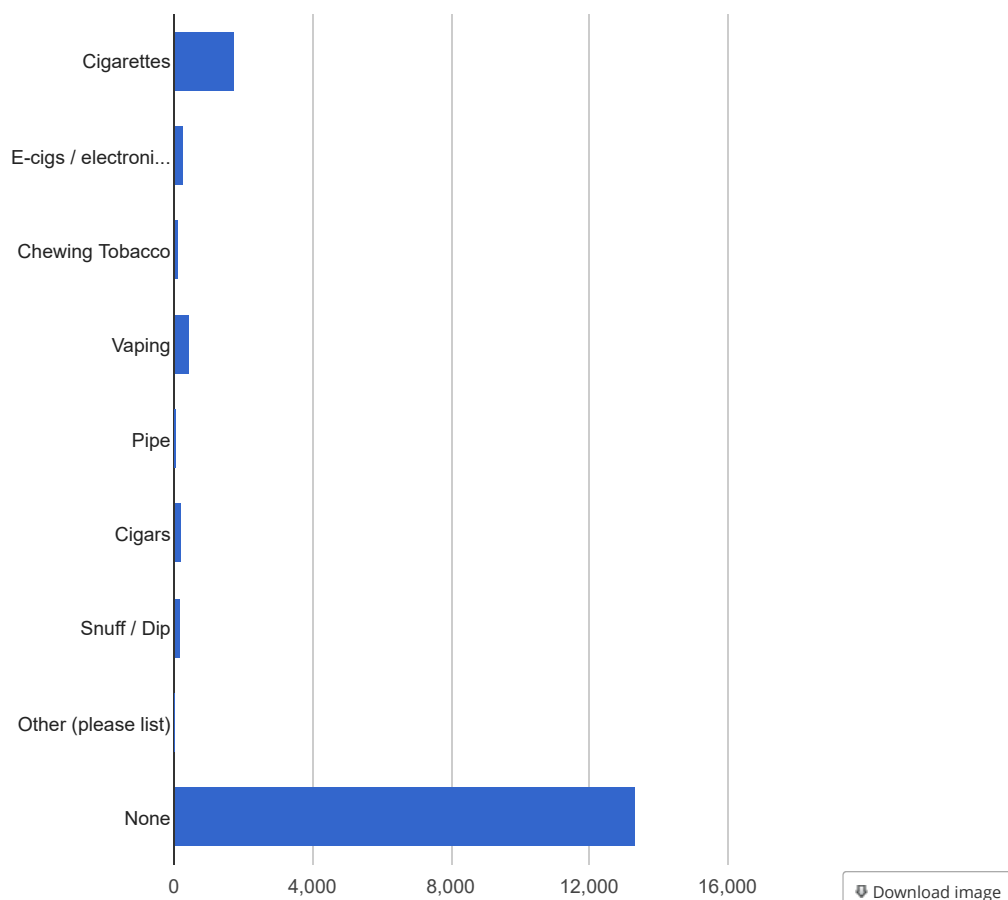## Other *(exercise_other)*

Total Count (N)	Missing*
19	345 (94.8%)

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

Total Count (N)	Missing*	Unique
350	14 (3.8%)	9

Counts/frequency: Cigarettes (45, 12.9%), E-cigs / electronic cigarettes (4, 1.1%), Chewing Tobacco (1, 0.3%), Vaping (8, 2.3%), Pipe (2, 0.6%), Cigars (2, 0.6%), Snuff / Dip (2, 0.6%), Other (please list) (1, 0.3%), None (292, 83.4%)

Other (please list) *(other_please_list)*

Total Count (N)	Missing*
1	363 (99.7%)

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

Total Count (N)	Missing*	Unique
45	319 (87.6%)	7

Counts/frequency: Quit Line NC (2, 4.4%), Doctor (19, 42.2%), Pharmacy (0, 0.0%), Health Dept (1, 2.2%), Private counselor / therapist (1, 2.2%), I don't know (12, 26.7%), N/A, I don't want to quit (8, 17.8%), Other (please share more) (2, 4.4%)
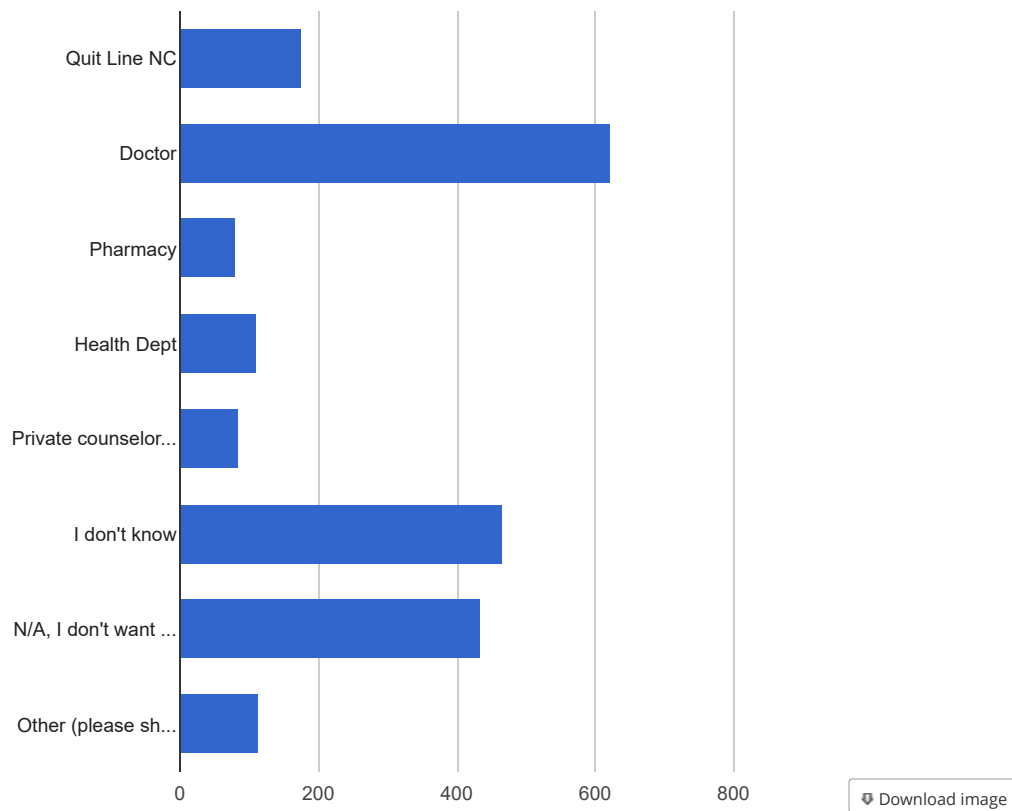
Other: *(quit_other)*

Total Count (N)	Missing*
2	362 (99.5%)

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
362	2 (0.5%)	4

Counts/frequency: flu shot (204, 56.4%), flu mist (2, 0.6%), No (143, 39.5%), Don't know or not sure (13, 3.6%)
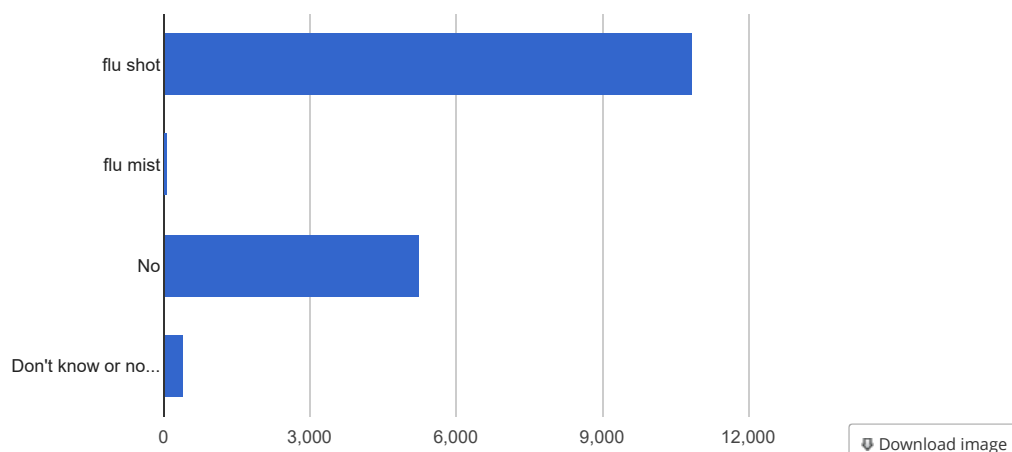
If you did not get your flu vaccine, why not? Please check any barriers. *(flu_barriers)*

Total Count (N)	Missing*	Unique
133	231 (63.5%)	6

Counts/frequency: cost (4, 3.0%), transportation (0, 0.0%), access (7, 5.3%), time (11, 8.3%), fear (11, 8.3%), need more info / have questions (6, 4.5%), personal preference (94, 70.7%)
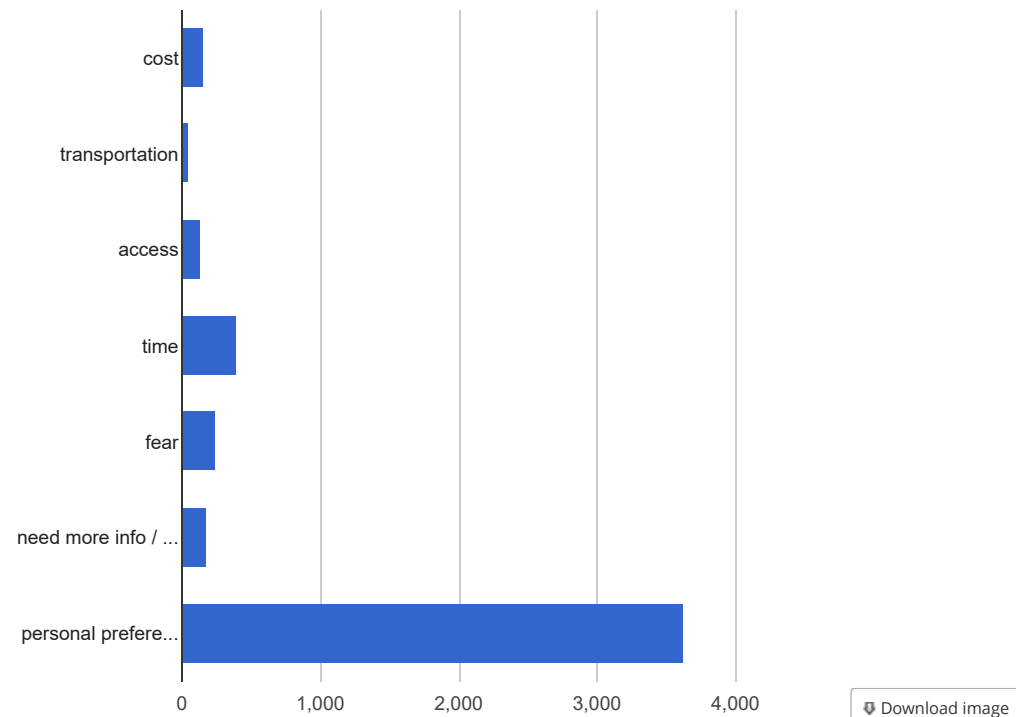
Have you had a COVID-19 vaccine? *(covidshot)*

Total Count (N)	Missing*	Unique
362	2 (0.5%)	3

Counts/frequency: Yes (282, 77.9%), No (76, 21.0%), Don't know or not sure (4, 1.1%)
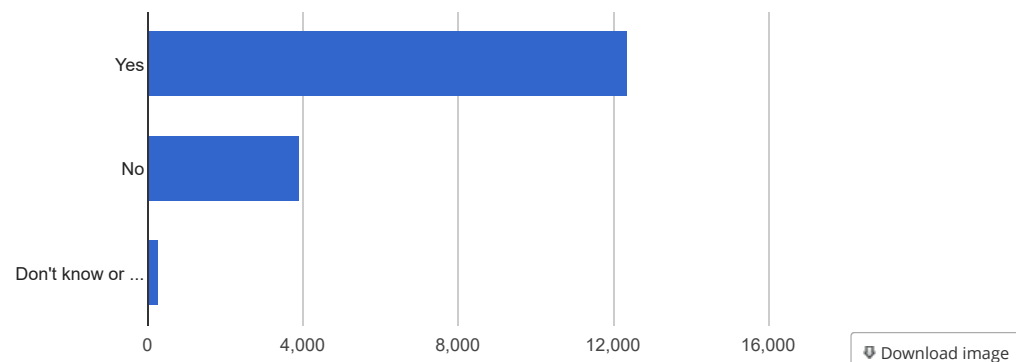
If you did not get your COVID-19 vaccine, why not? Please check any barriers. *(covidyesskip)*

Total Count (N)	Missing*	Unique
71	293 (80.5%)	4

Counts/frequency: cost (0, 0.0%), transportation (0, 0.0%), access (0, 0.0%), time (0, 0.0%), fear (9, 12.7%), need more info / have questions (10, 14.1%), personal preference (44, 62.0%), other (8, 11.3%)
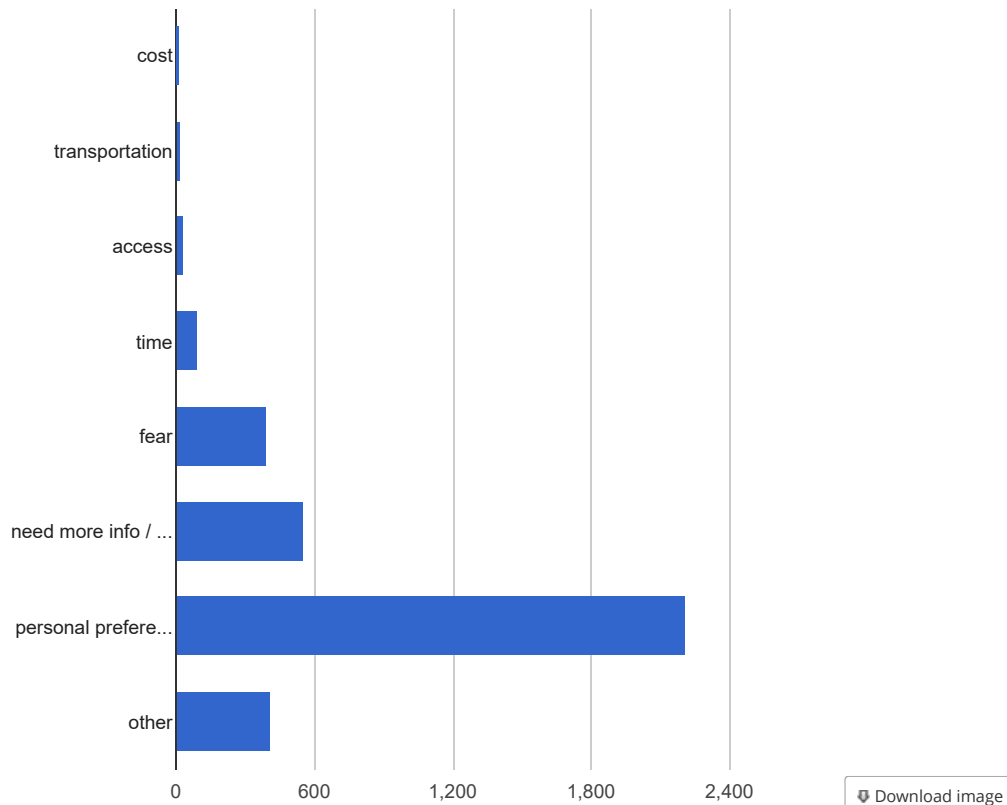
In the past 12 months, did you have a problem getting the health care you needed for you personally or for a family member from any type of health care provider, dentist, pharmacy, or other facility? (Please choose only one) *(healthcarehelp)*

Total Count (N)	Missing*	Unique
363	1 (0.3%)	3

Counts/frequency: Yes (65, 17.9%), No (290, 79.9%), Don't know or not sure (8, 2.2%)
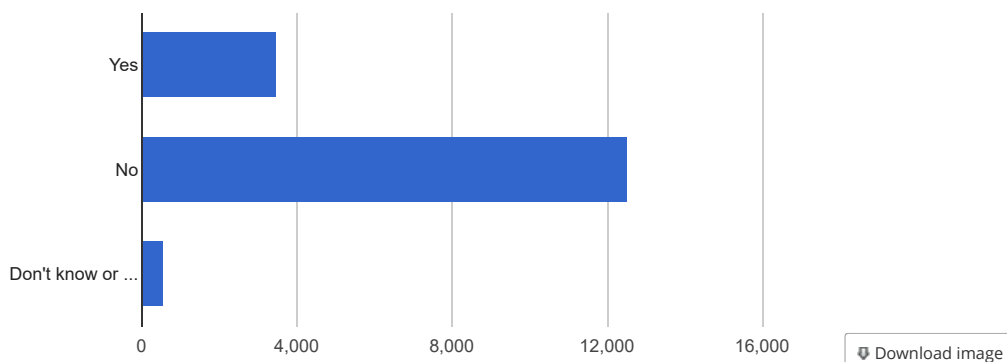
If yes, what type of provider or facility did you have trouble getting healthcare from? (Please choose all that apply) *(healthcareproviderhelp)*

Total Count (N)	Missing*	Unique
57	307 (84.3%)	13

Counts/frequency: Dentist (23, 40.4%), Primary Care Doctor (24, 42.1%), Pediatrician (3, 5.3%), OB / GYN (9, 15.8%), Urgent care center (3, 5.3%), Medical clinic (4, 7.0%), Hospital (2, 3.5%), Health department (3, 5.3%), Specialist (11, 19.3%), Eye care / optometrist / opthamologist (6, 10.5%), Pharmacy / prescriptions (4, 7.0%), Mental/Behavioral Health Providers (6, 10.5%), Other (please share more) (5, 8.8%)
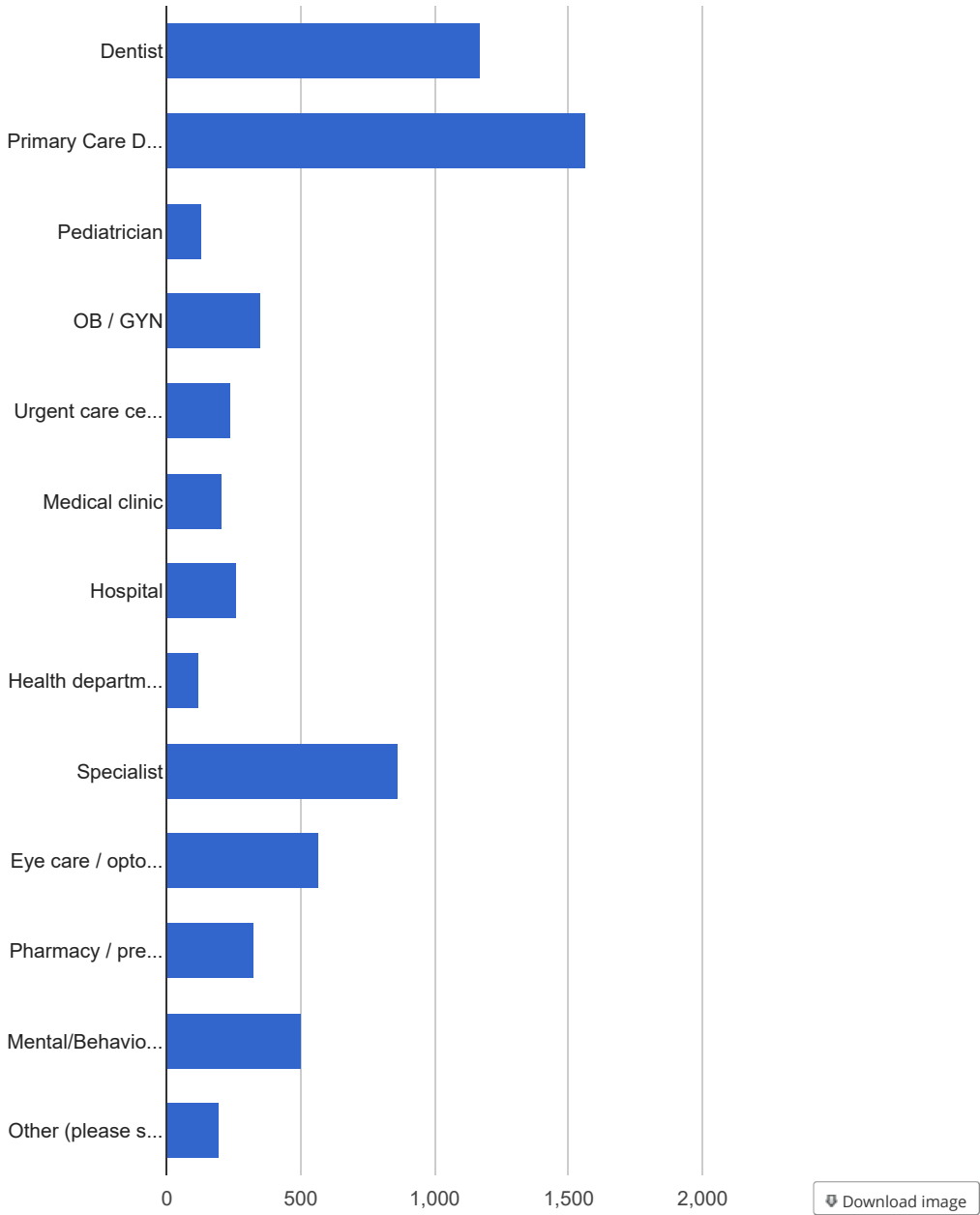
Other *(healthcareprovider_other)*

Total Count (N)	Missing*
4	360 (98.9%)

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

Total Count (N)	Missing*	Unique
59	305 (83.8%)	13

Counts/frequency: No health insurance (17, 28.8%), Insurance didn't cover what I / we needed. (14, 23.7%), My / our share of the cost (deductible / co-pay) was too high. (9, 15.3%), Service provider would not take my / our insurance or Medicaid. (6, 10.2%), No way to get there. (1, 1.7%), Didn't know where to go (3, 5.1%), Couldn't get an appointment (16, 27.1%), The wait was too long (12, 20.3%), Did not speak my language (1, 1.7%), Could not miss work to go (8, 13.6%), Hours did not work with my availability (5, 8.5%), COVID 19 (12, 20.3%), The provider denied me care or treated me in a discriminatory manner because of a protected status (age, race, sexual preference, disease, etc.) (2, 3.4%)
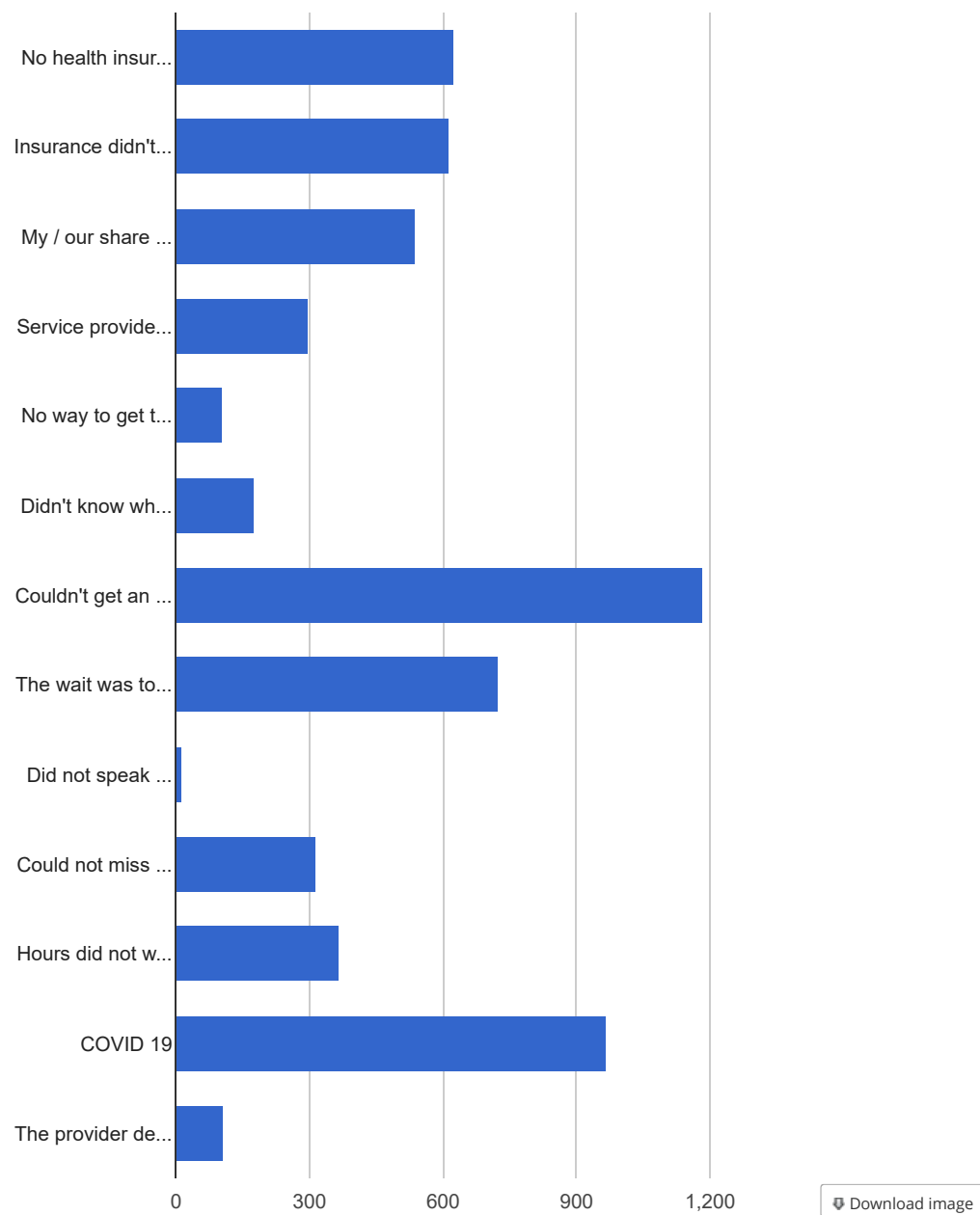
In a natural disaster (hurricane, flooding, tornado, etc.), do you feel like you know how to access or find the information you need to stay safe? *(naturaldisasteraccess)*

Total Count (N)	Missing*	Unique
349	15 (4.1%)	3

Counts/frequency: Yes (305, 87.4%), No (30, 8.6%), Don't know or not sure (14, 4.0%)
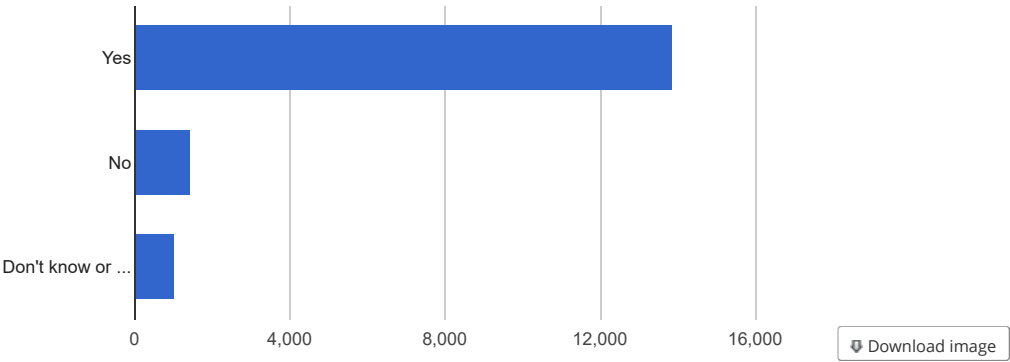
If so, where do you get your information to stay safe? *(naturaldisasterinfo)*

Total Count (N)	Missing*	Unique
292	72 (19.8%)	12

Counts/frequency: television (215, 73.6%), radio (122, 41.8%), internet (144, 49.3%), telephone (landline) (37, 12.7%), cell phone (116, 39.7%), print media (i.e.. newspaper) (24, 8.2%), social media (85, 29.1%), neighbors (44, 15.1%), family (83, 28.4%), text message (emergency alert system) (137, 46.9%), Don't know / not sure (1, 0.3%), Other (please specify) (10, 3.4%)
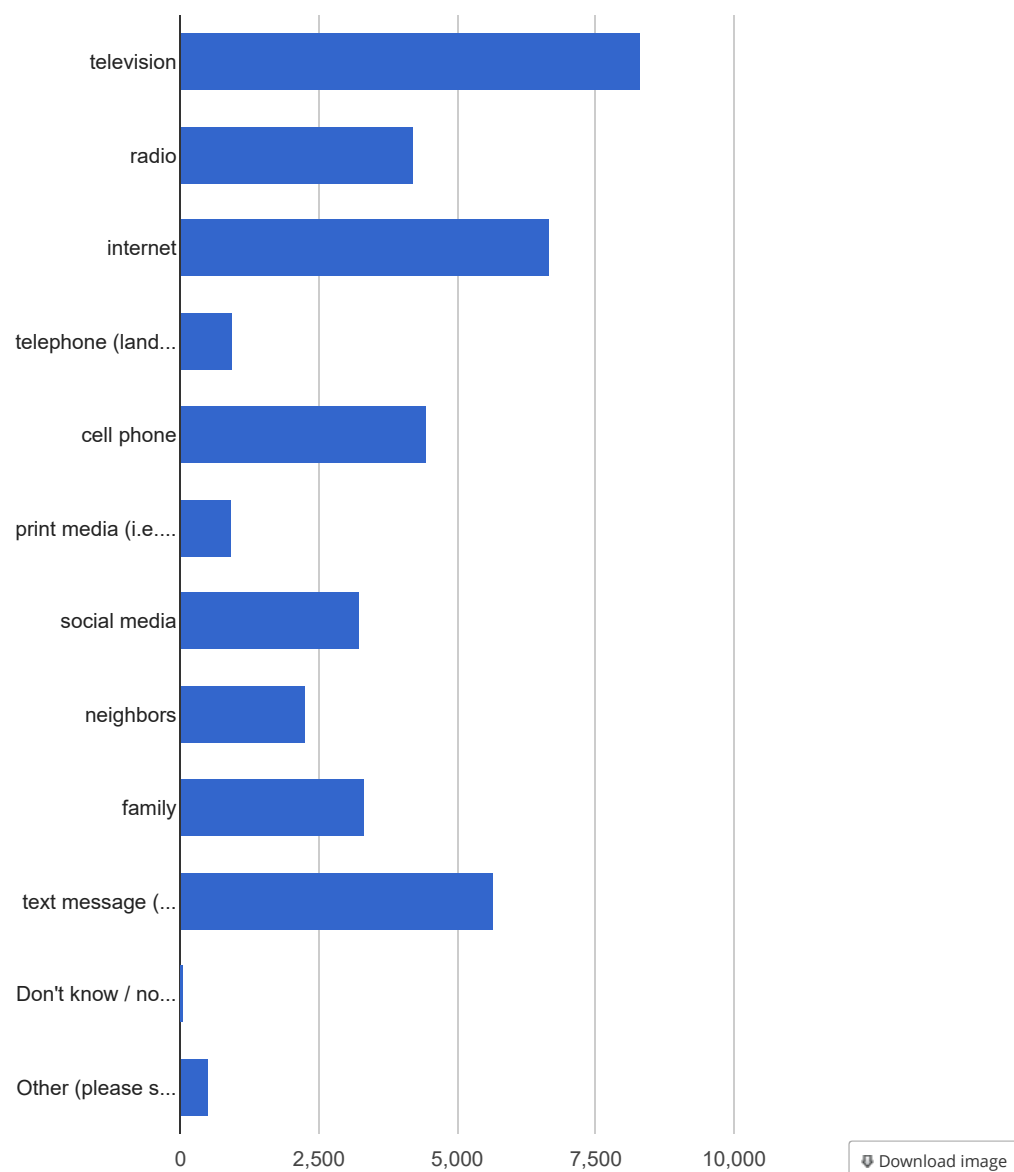
Other *(natural_disaster_other)*

Total Count (N)	Missing*
8	356 (97.8%)

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
363	1 (0.3%)	3

Counts/frequency: Yes (64, 17.6%), No (290, 79.9%), Don't know or not sure (9, 2.5%)
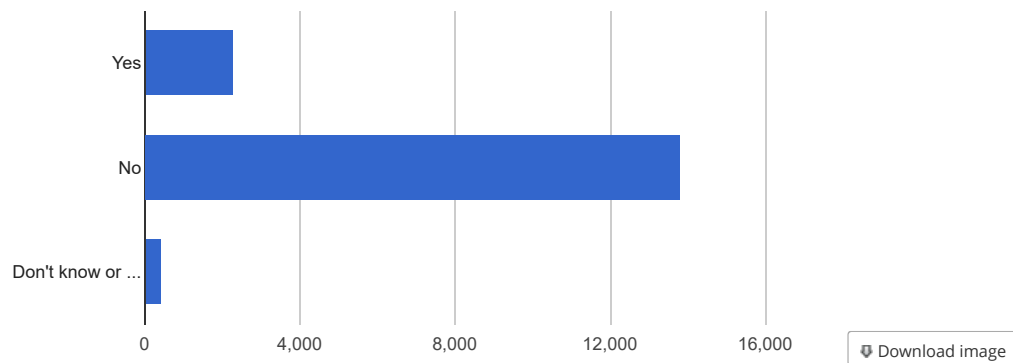
Is there anything else you would like for us to know about your community? *(anythingelse)*

Total Count (N)	Missing*
66	298 (81.9%)

How would you describe yourself? *(gender)*

Total Count (N)	Missing*	Unique
358	6 (1.6%)	4

Counts/frequency: Woman (254, 70.9%), Man (94, 26.3%), Non binary (1, 0.3%), Not listed, please share more: _____ (0, 0.0%), Prefer not to answer (9, 2.5%)
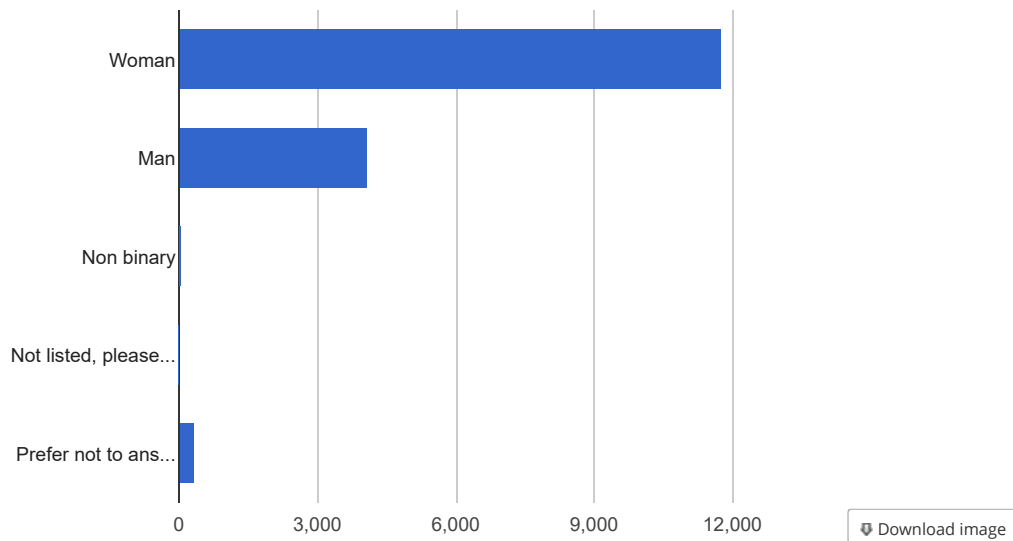
Please share more. *(gender_other)*

Total Count (N)	Missing*
0	364 (100.0%)

How old are you? *(age)*

Total Count (N)	Missing*	Unique
358	6 (1.6%)	14

Counts/frequency: 15-19 (5, 1.4%), 20-24 (16, 4.5%), 25-29 (18, 5.0%), 30-34 (26, 7.3%), 35-39 (23, 6.4%), 40-44 (36, 10.1%), 45-49 (46, 12.8%), 50-54 (35, 9.8%), 55-59 (47, 13.1%), 60-64 (45, 12.6%), 65-69 (36, 10.1%), 70-74 (18, 5.0%), 75-79 (5, 1.4%), 80-84 (2, 0.6%), 85 + (0, 0.0%)
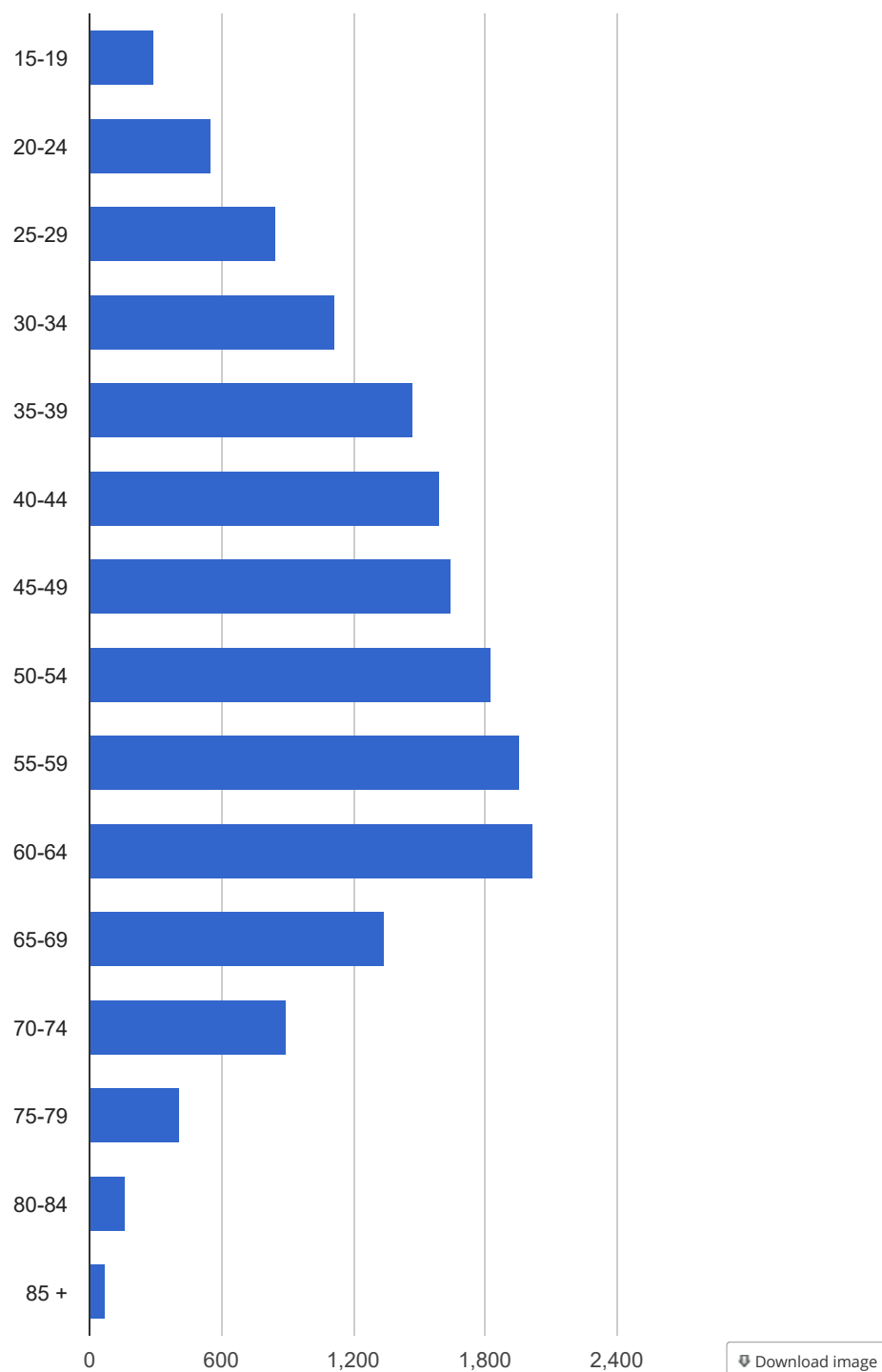
How do you describe your race/ethnicity? *(raceethnicity)*

Total Count (N)	Missing*	Unique
358	6 (1.6%)	5

Counts/frequency: Asian (0, 0.0%), Black / African American (199, 55.6%), Hispanic / Latinx (9, 2.5%), Native American (0, 0.0%), Pacific Islander (0, 0.0%), White / Caucasian (129, 36.0%), More than 1 race (4, 1.1%), Prefer not to answer (17, 4.7%)
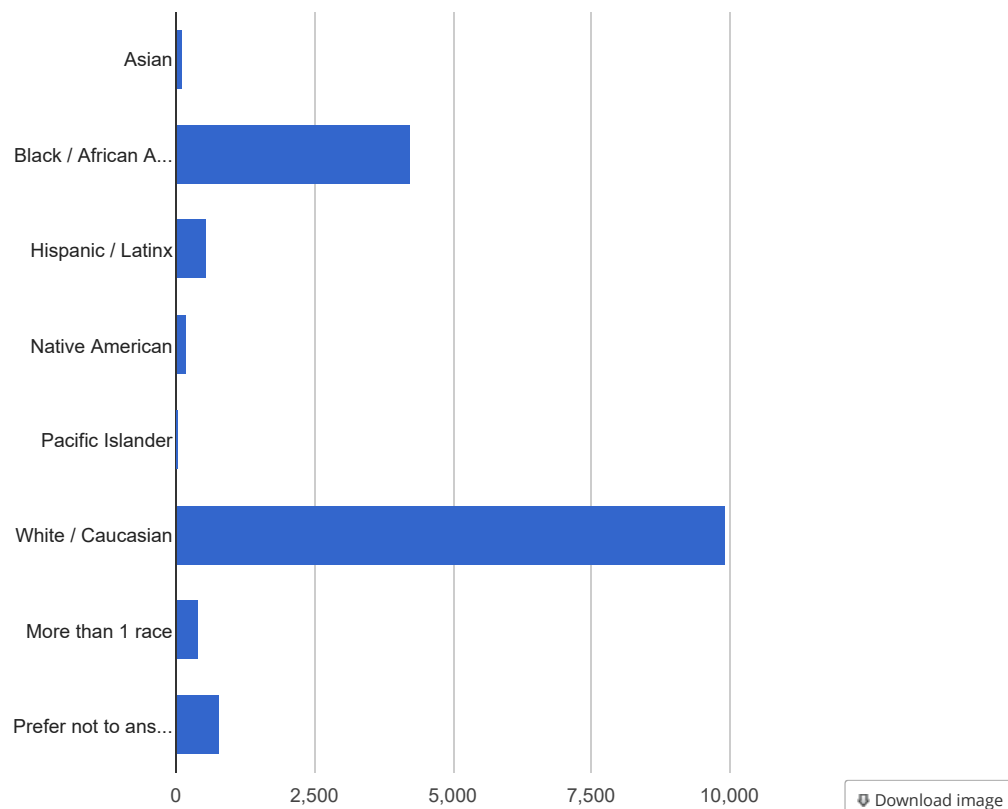
Is English the primary language spoken in your home? *(language)*

Total Count (N)	Missing*	Unique
355	9 (2.5%)	2

Counts/frequency: Yes (347, 97.7%), No (8, 2.3%)
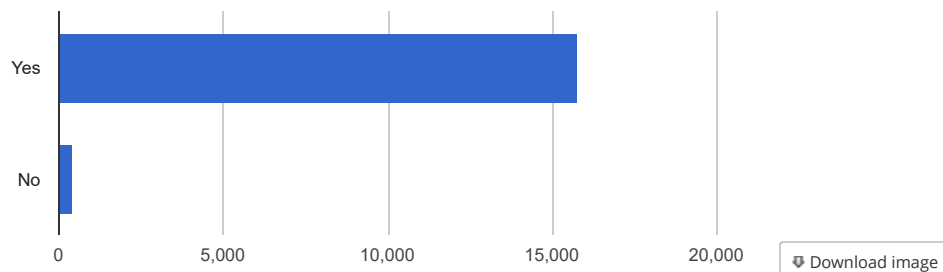
If no, please share which primary language *(languageno)*

Total Count (N)	Missing*	Unique
6	358 (98.4%)	2

Counts/frequency: Spanish (4, 66.7%), Creole (0, 0.0%), French (0, 0.0%), Chinese (0, 0.0%), Other (2, 33.3%)
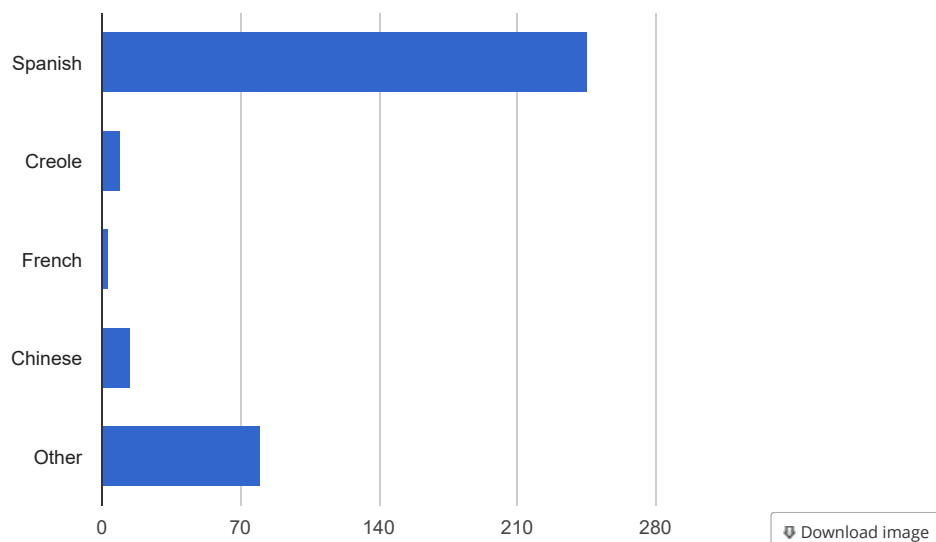
What is your marital status? *(marriagestatus)*

Total Count (N)	Missing*	Unique
351	13 (3.6%)	7

Counts/frequency: Never married/Single (95, 27.1%), Married (180, 51.3%), Unmarried partner (5, 1.4%), Divorced (39, 11.1%), Widowed (21, 6.0%), Separated (10, 2.8%), please share more (1, 0.3%)
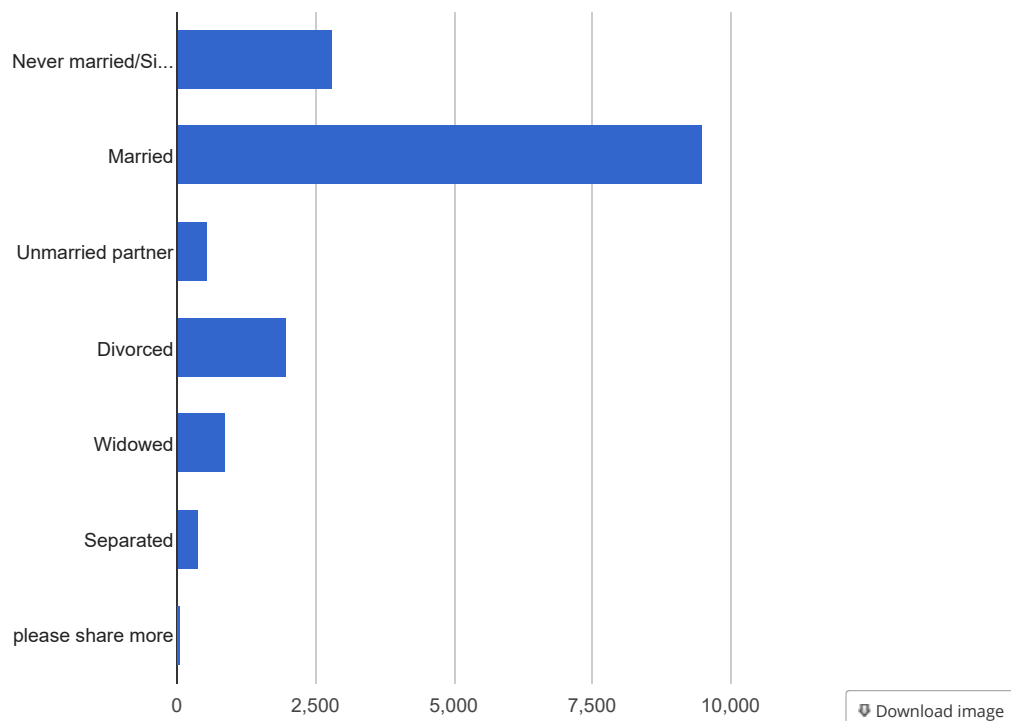
please share more. *(marital_other)*

Total Count (N)	Missing*
0	364 (100.0%)

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

Total Count (N)	Missing*	Unique
349	15 (4.1%)	8

Counts/frequency: Less than 9th grade (4, 1.1%), 9th - 12th grade, no diploma (14, 4.0%), High School graduate (or GED/equivalent) (64, 18.3%), Associate's Degree or Vocational Training (69, 19.8%), Some college (no degree) (69, 19.8%), Bachelor's Degree (73, 20.9%), Graduate or professional degree (51, 14.6%), please share more (5, 1.4%)
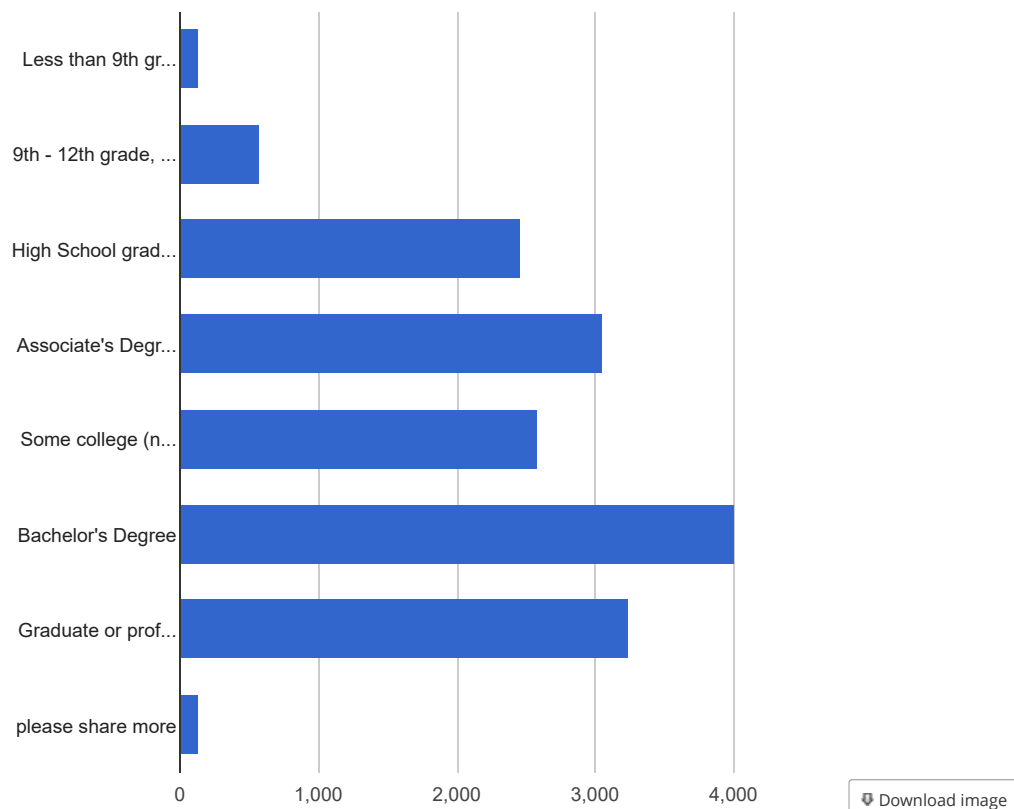
Please share more *(please_share_more)*

Total Count (N)	Missing*
4	360 (98.9%)

How is your current job best described? *(job)*

Total Count (N)	Missing*	Unique
329	35 (9.6%)	10

Counts/frequency: Agriculture (10, 3.0%), Business / Industry (35, 10.6%), Retail (5, 1.5%), Homemaker (14, 4.3%), Government (74, 22.5%), Healthcare (97, 29.5%), Student (4, 1.2%), Education (31, 9.4%), Food Service (14, 4.3%), please share more (45, 13.7%)
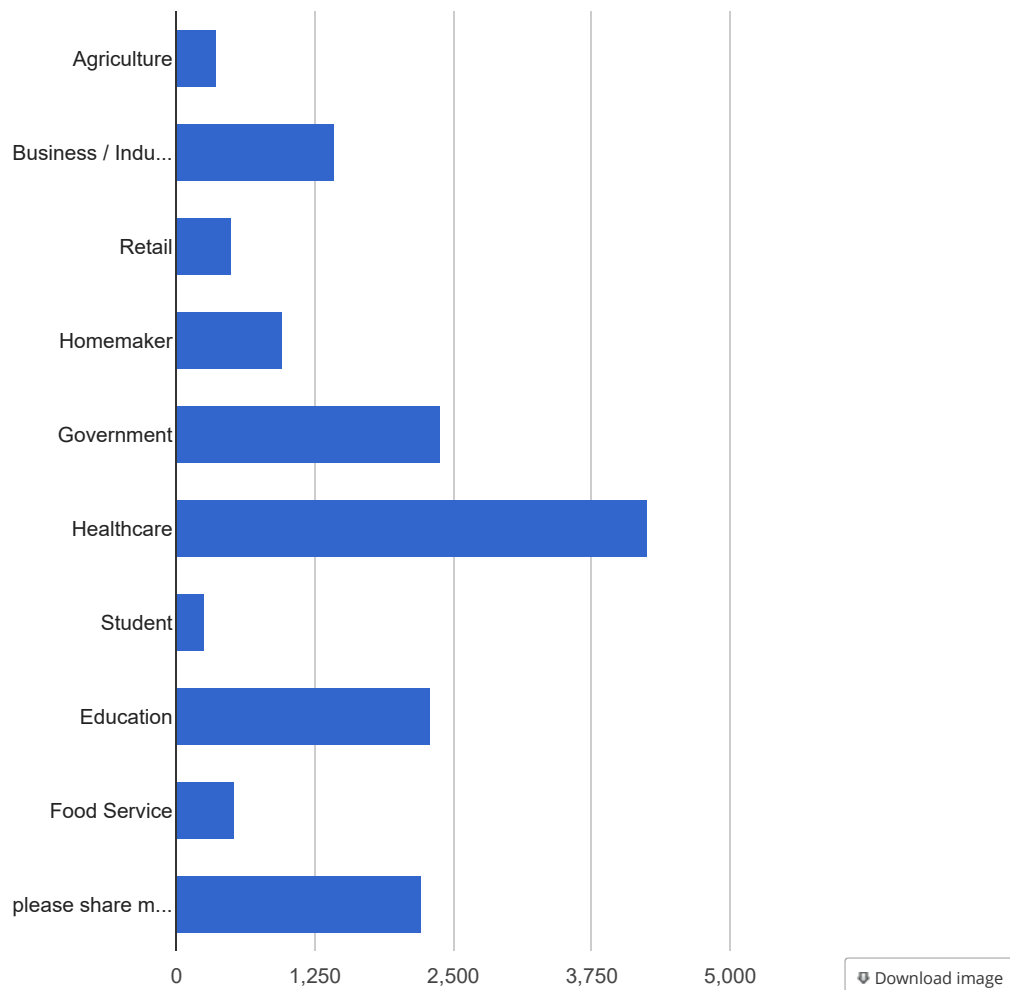
Please share more *(job_other)*

Total Count (N)	Missing*
42	322 (88.5%)

What is your total household income? *(income)*

Total Count (N)	Missing*	Unique
330	34 (9.3%)	8

Counts/frequency: Less than $10,000 (20, 6.1%), $10,000 to $14,999 (24, 7.3%), $15,000 to $24,999 (30, 9.1%), $25,000 to $34,999 (40, 12.1%), $35,000 to $49,999 (47, 14.2%), $50,000 to $74,999 (69, 20.9%), $75,000 to $99,999 (55, 16.7%), $100,000 or more (45, 13.6%)
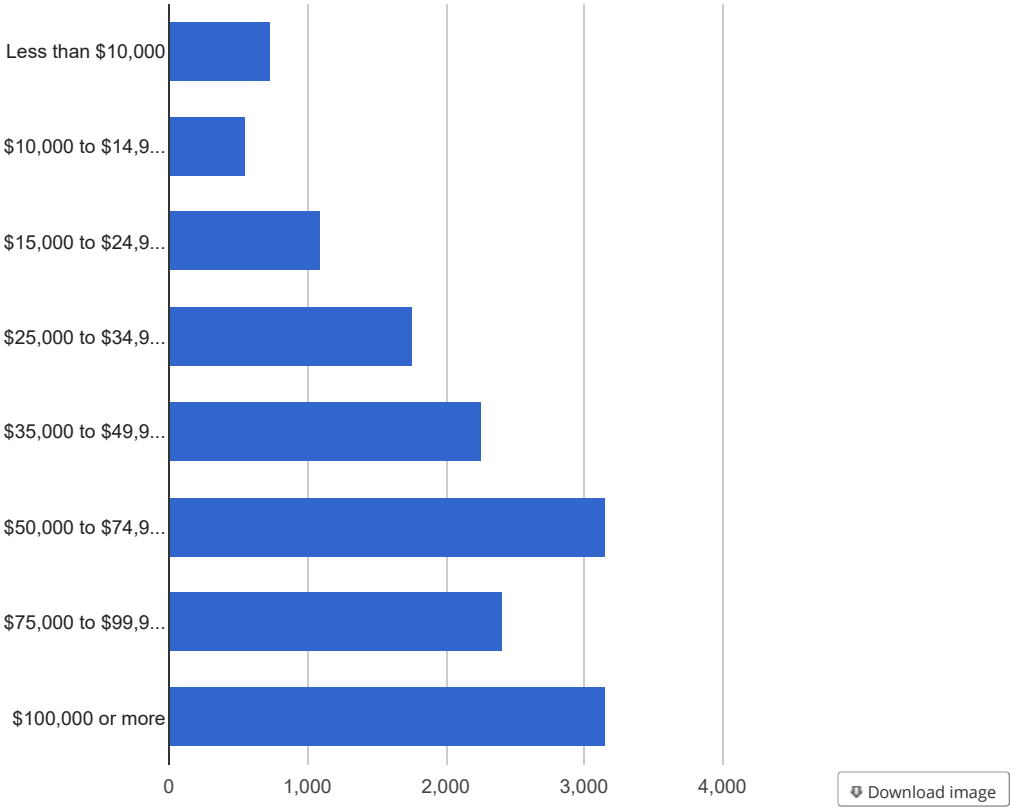
How many people live in your household? *(householdnumber)*

Total Count (N)	Missing*	Unique
350	14 (3.8%)	6

Counts/frequency: I live alone (52, 14.9%), 2 (127, 36.3%), 3-4 (139, 39.7%), 5-6 (27, 7.7%), 7-8 (4, 1.1%), 9-10 (0, 0.0%), More than 10 (1, 0.3%)
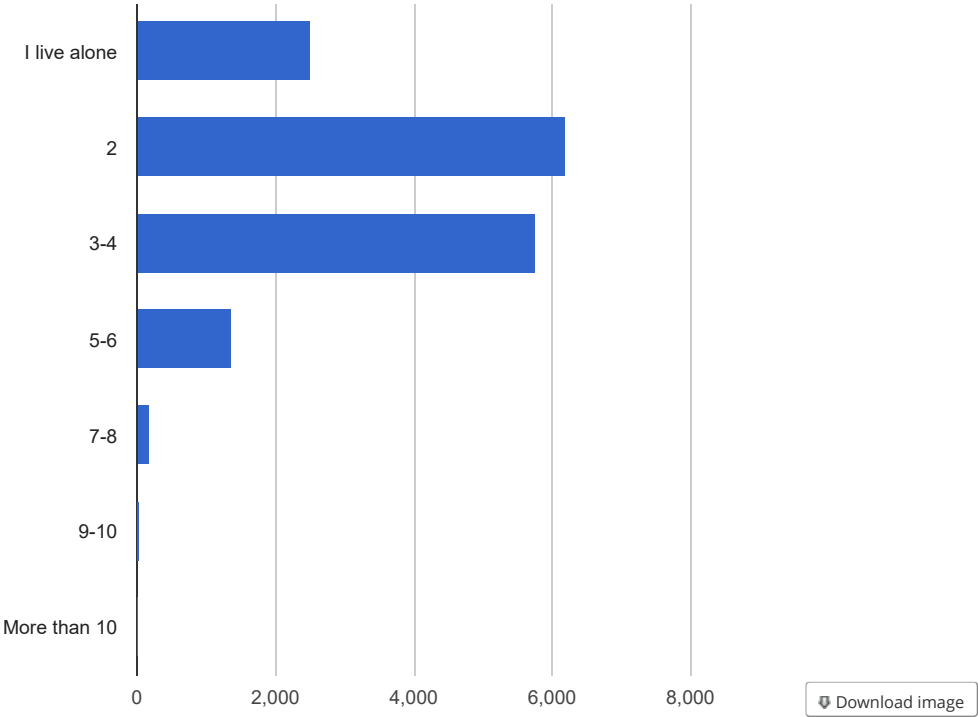
What is your employment status? Please check all that apply. *(employment)*

Total Count (N)	Missing*	Unique
348	16 (4.4%)	11

Counts/frequency: Employed full-time (248, 71.3%), Employed part-time (26, 7.5%), Employed in multiple jobs (8, 2.3%), Seasonal Worker/Temporary (5, 1.4%), Retired (49, 14.1%), Armed forces (0, 0.0%), Disabled (12, 3.4%), Student (5, 1.4%), Homemaker (3, 0.9%), Self-employed (15, 4.3%), Unemployed for 1 year or less (3, 0.9%), Unemployed for more than 1 year (7, 2.0%)
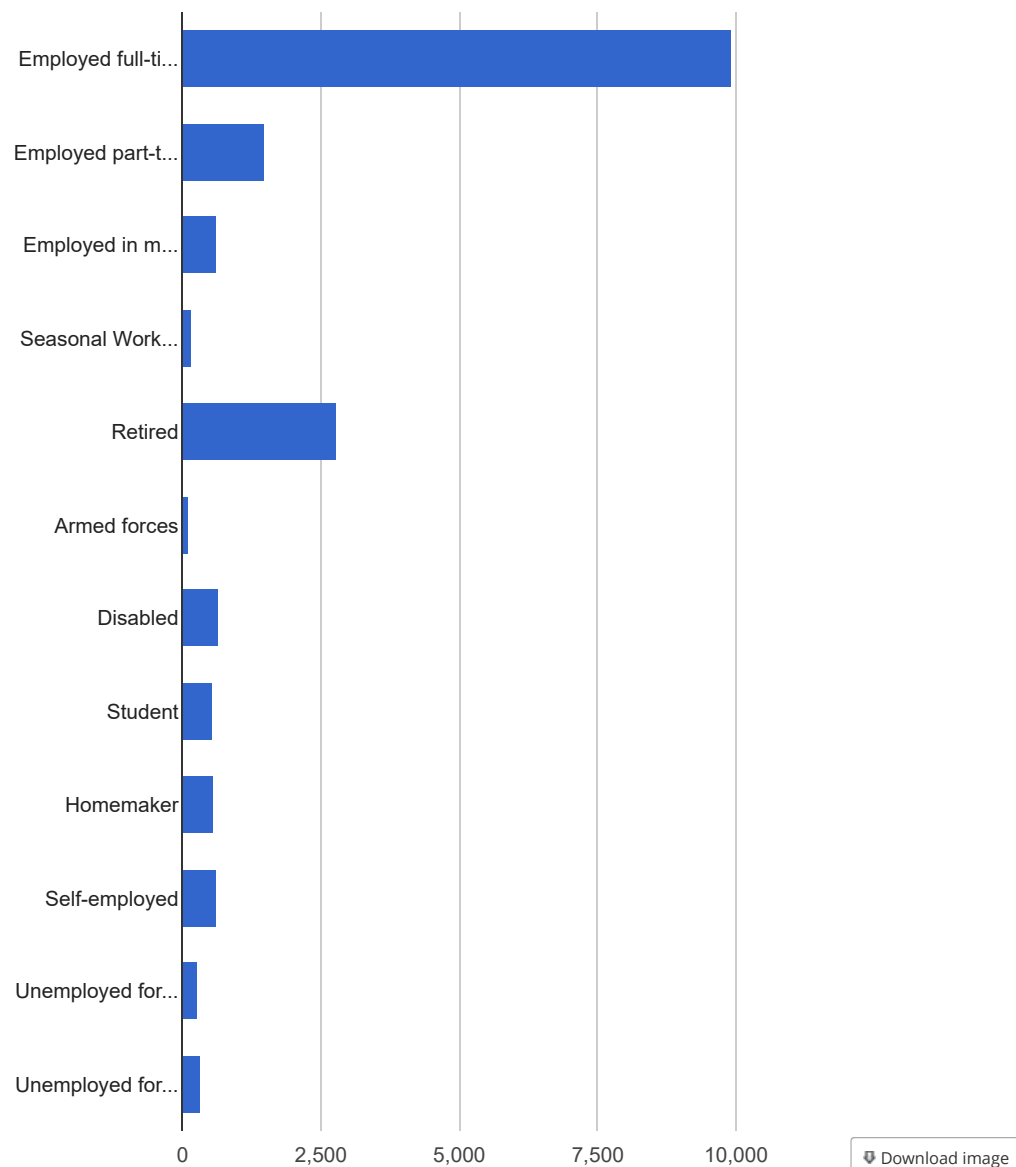
What type of internet access do you have at your home? *(internet_or_wifi)*

Total Count (N)	Missing*	Unique
341	23 (6.3%)	6

Counts/frequency: Dial up (1, 0.3%), Broadband (26, 7.6%), Wi-Fi (274, 80.4%), Cellular or Hotspot (15, 4.4%), None (20, 5.9%), please share more (5, 1.5%)
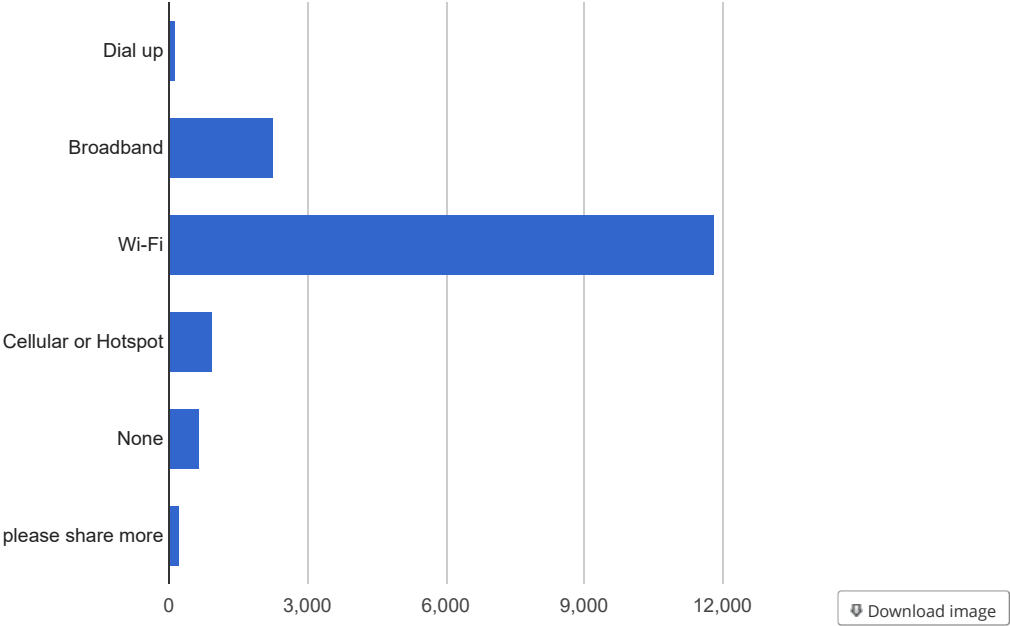
Other *(internet_or_wifi_other)*

Total Count (N)	Missing*
5	359 (98.6%)

Which county do you live in? *(county)*

Total Count (N)	Missing*	Unique
364	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 (364, 100.0%), 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 (0, 0.0%), 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%)
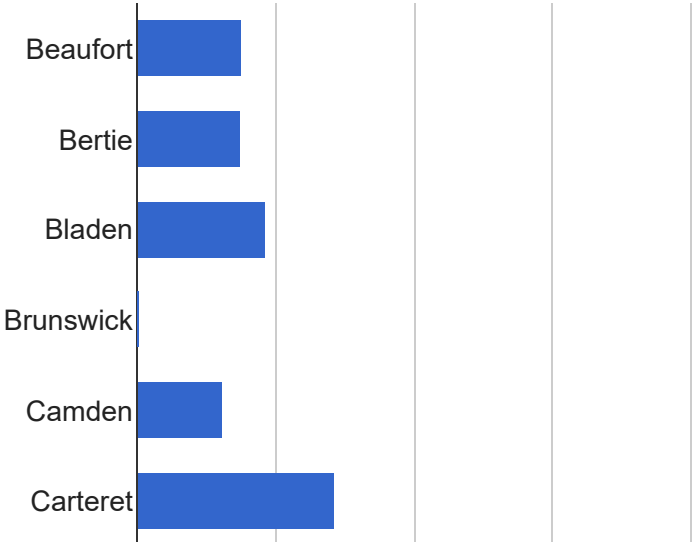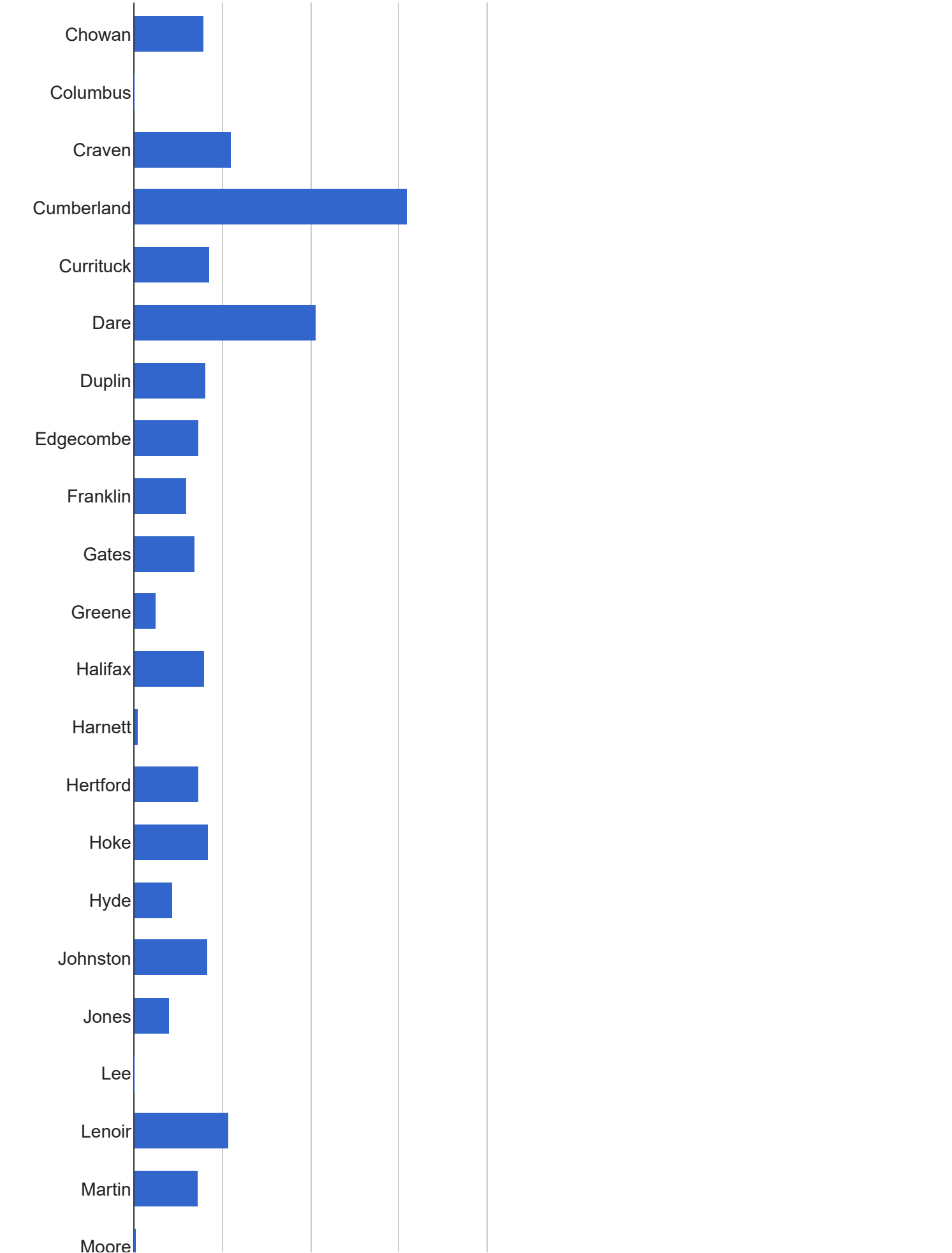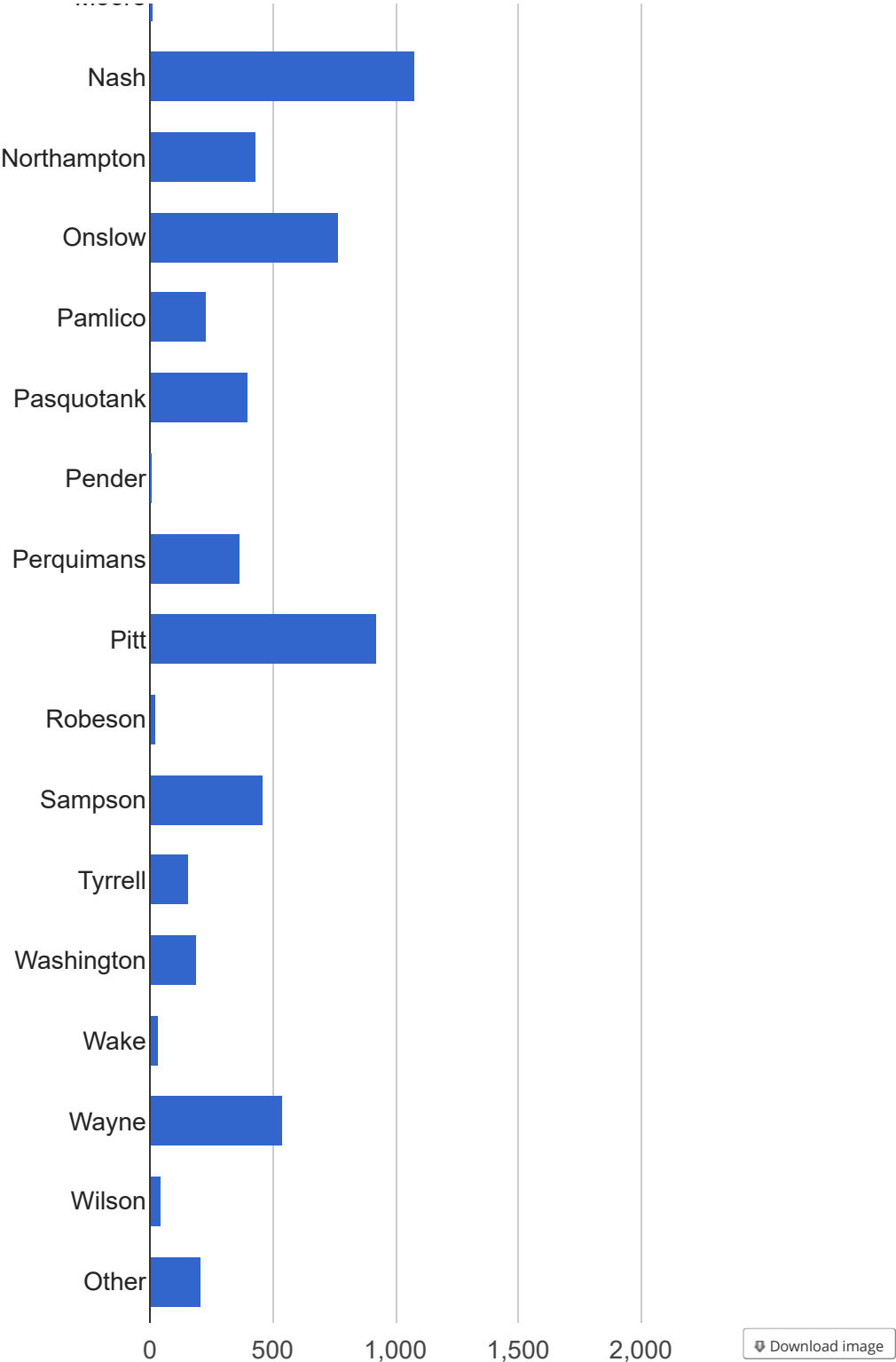
Other *(county_other)*

Total Count (N)	Missing*
0	364 (100.0%)

What is your 5 digit zip code? *(zip_code)*

Total Count (N)	Missing*
223	141 (38.7%)

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
273	91 (25.0%)	13

Counts/frequency: I don't plan to get a vaccine. (32, 11.7%), I'm worried that the COVID-19 vaccine isn't safe. (41, 15.0%), I would rather take the risk of getting sick with COVID-19. (8, 2.9%), I'm worried the COVID-19 vaccine may be harmful or have side effects. (53, 19.4%), I'm worried there may be a cost associated with receiving the COVID-19 vaccine. (1, 0.4%), I have already had COVID-19 so I don't believe a vaccine is necessary. (15, 5.5%), I don't trust the distribution process of the COVID-19 vaccine. (7, 2.6%), I'm worried the COVID-19 vaccine has not been distributed fairly. (4, 1.5%), I'm worried that the location of the COVID-19 vaccine will be difficult to travel to. (1, 0.4%), I'm concerned that I won't have time to get the COVID-19 vaccine. (2, 0.7%), With multiple vaccines becoming available, I'm concerned about knowing which one is best for me. (21, 7.7%), I don't have any concerns about getting the COVID-19 vaccine. (145, 53.1%), Other (please specify) (35, 12.8%)
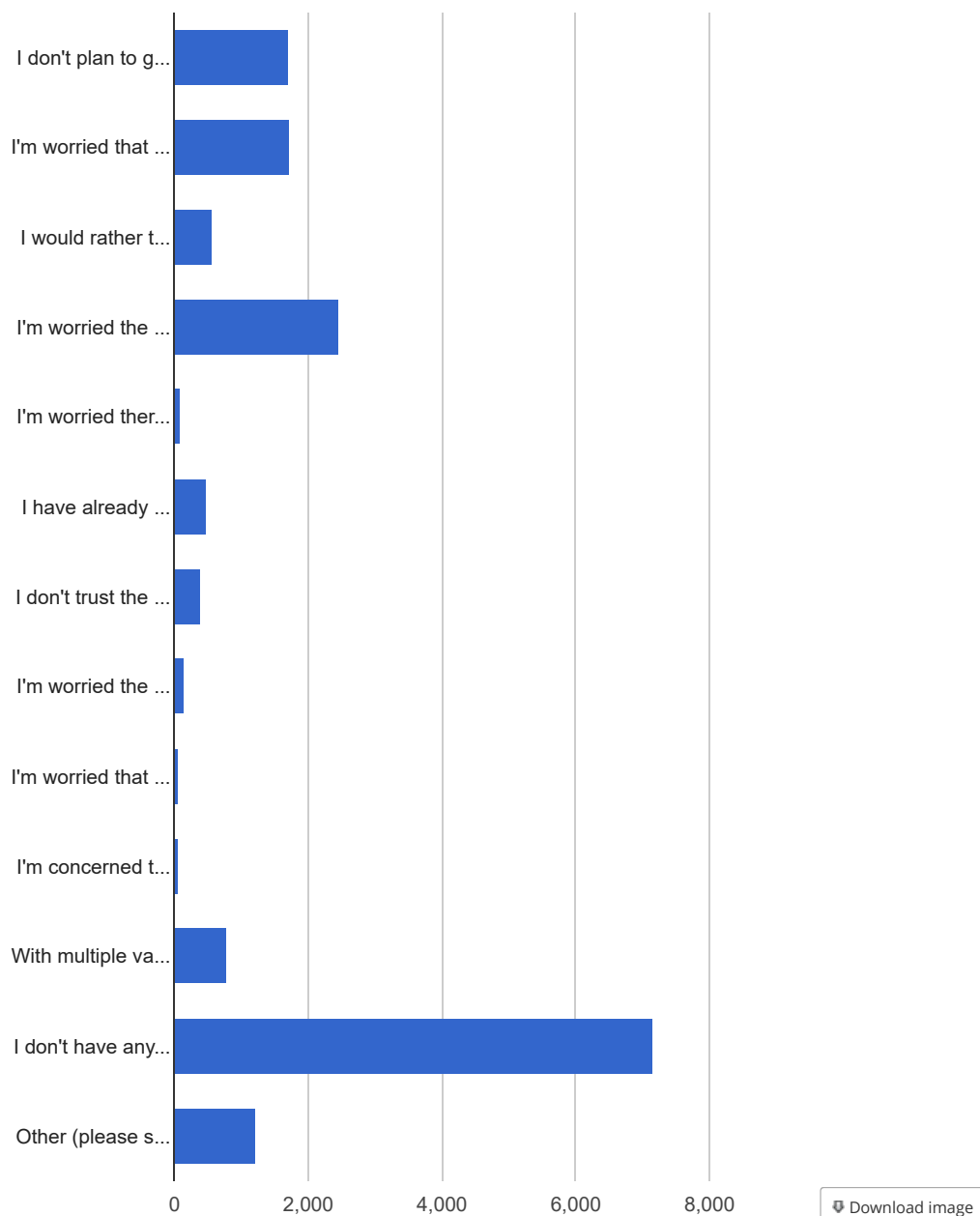
Other *(covid_concerns_other)*

Total Count (N)	Missing*
31	333 (91.5%)

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

Total Count (N)	Missing*	Unique
320	44 (12.1%)	5

Counts/frequency: Very Difficult (4, 1.3%), Somewhat Difficult (9, 2.8%), Moderate (52, 16.3%), Somewhat Easy (92, 28.8%), Very Easy (163, 50.9%)
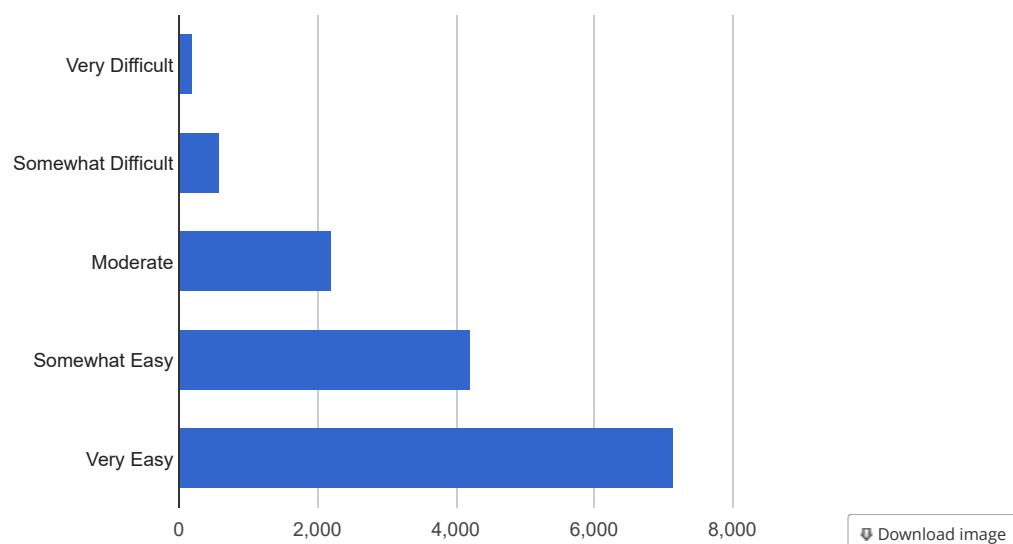
Find out where to go to get a COVID-19 vaccine? *(covidwhere)*

Total Count (N)	Missing*	Unique
315	49 (13.5%)	5

Counts/frequency: Very Difficult (1, 0.3%), Somewhat Difficult (7, 2.2%), Moderate (45, 14.3%), Somewhat Easy (84, 26.7%), Very Easy (178, 56.5%)
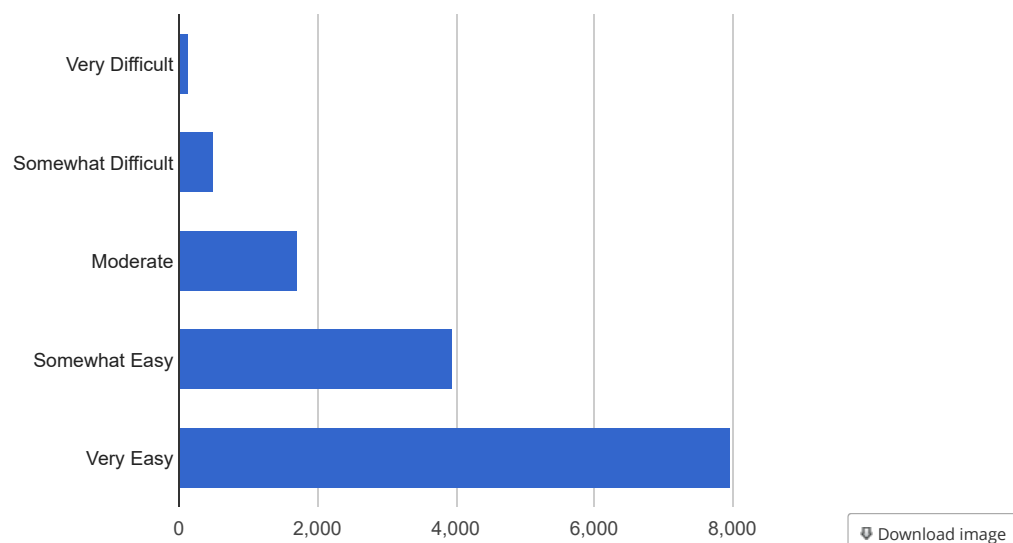
Understand information about what to do if you think you have COVID-19? *(covidunderstand)*

Total Count (N)	Missing*	Unique
315	49 (13.5%)	5

Counts/frequency: Very Difficult (3, 1.0%), Somewhat Difficult (8, 2.5%), Moderate (37, 11.7%), Somewhat Easy (95, 30.2%), Very Easy (172, 54.6%)
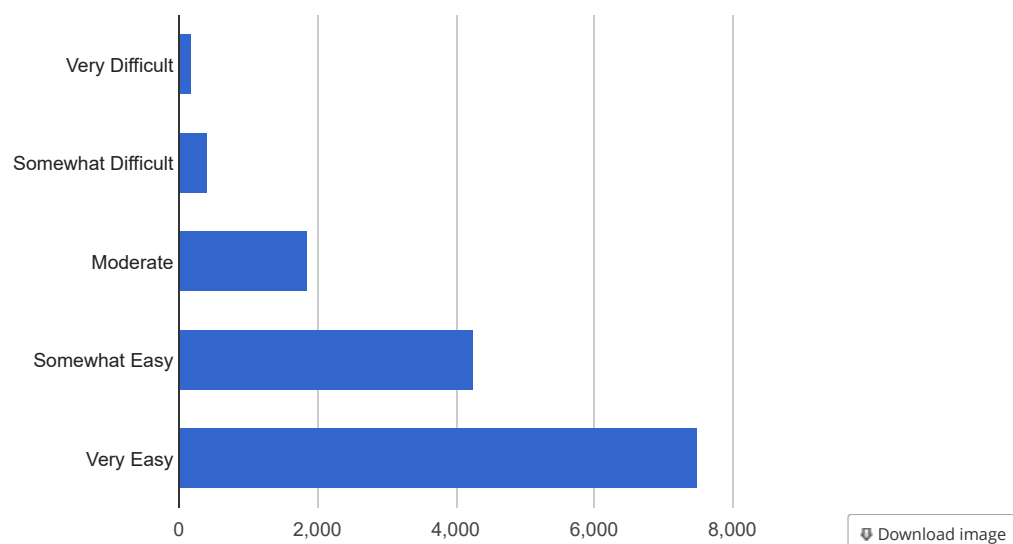
Trust if the information about COVID-19 in the media is reliable? *(covidtrust)*

Total Count (N)	Missing*	Unique
313	51 (14.0%)	5

Counts/frequency: Very Difficult (41, 13.1%), Somewhat Difficult (30, 9.6%), Moderate (77, 24.6%), Somewhat Easy (82, 26.2%), Very Easy (83, 26.5%)
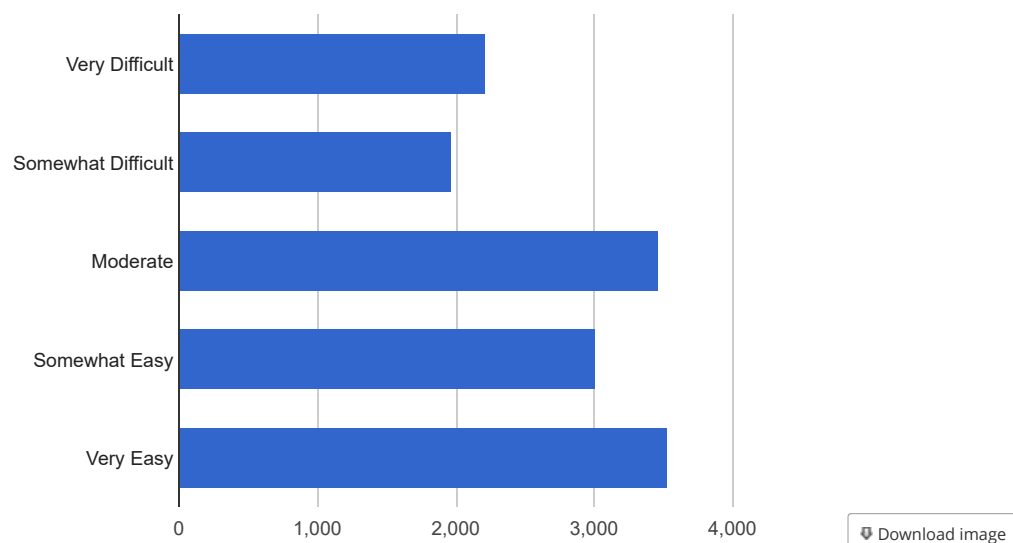
I know how to protect myself from coronavirus. *(covidprotect)*

Total Count (N)	Missing*	Unique
317	47 (12.9%)	3

Counts/frequency: Not at all (1, 0.3%), Somewhat (60, 18.9%), Very much (256, 80.8%)
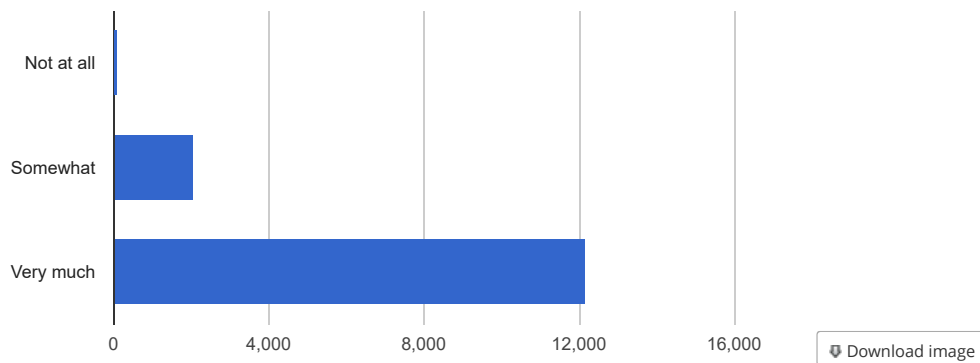
For me avoiding an infection with COVID-19 in the current situation is... *(covidavoid)*

Total Count (N)	Missing*	Unique
315	49 (13.5%)	3

Counts/frequency: difficult to avoid (29, 9.2%), unsure about how to avoid (39, 12.4%), easy to avoid (I have no problem) (247, 78.4%)
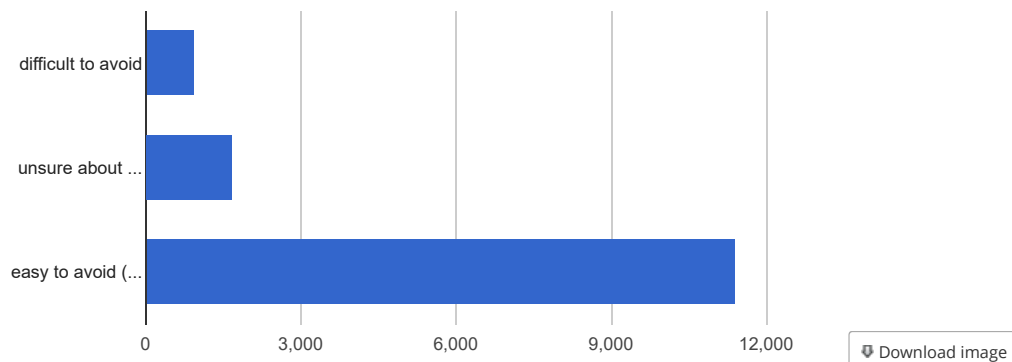
Do you think that global warming is happening? *(warmingyesno)*

Total Count (N)	Missing*	Unique
317	47 (12.9%)	3

Counts/frequency: Yes (209, 65.9%), No (33, 10.4%), Don't know or unsure (75, 23.7%)
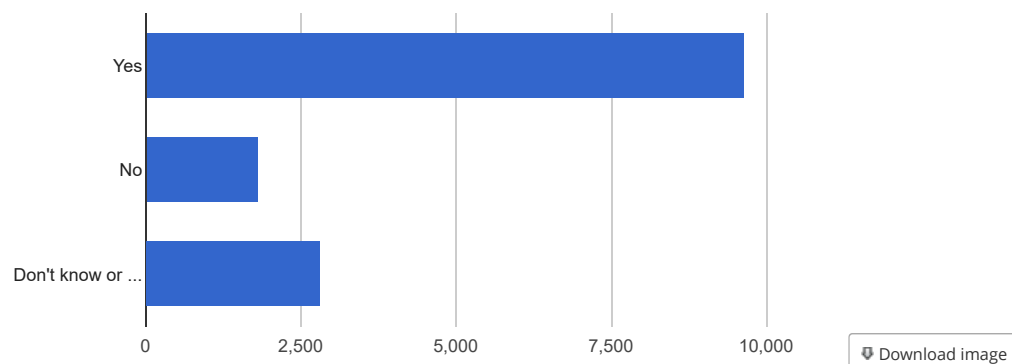
Assuming global warming is happening, do you think it is... ? *(warmingdoyouthink)*

Total Count (N)	Missing*	Unique
311	53 (14.6%)	5

Counts/frequency: Caused mostly by human activities (144, 46.3%), Caused mostly by natural changes in the environment (72, 23.2%), None of the above because global warming isn't happening (15, 4.8%), Other (9, 2.9%), Don't know (71, 22.8%)
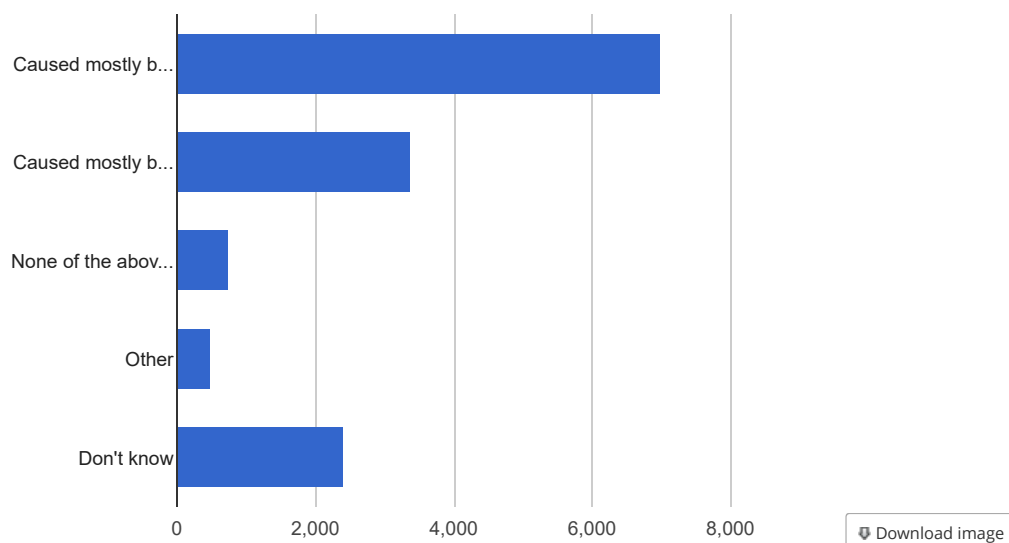
How worried are you about global warming? *(warmingworried)*

Total Count (N)	Missing*	Unique
318	46 (12.6%)	4

Counts/frequency: Very worried (42, 13.2%), Somewhat worried (139, 43.7%), Not very worried (92, 28.9%), Not at all worried (45, 14.2%)
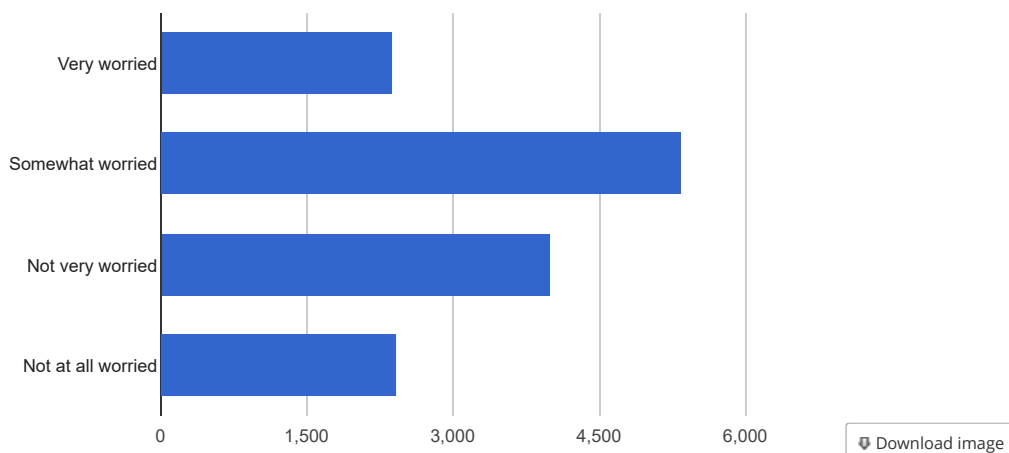
How much do you think global warming will harm you personally? *(warmingharm)*

Total Count (N)	Missing*	Unique
320	44 (12.1%)	5

Counts/frequency: Not at all (36, 11.3%), Only a little (52, 16.3%), A moderate amount (103, 32.2%), A great deal (68, 21.3%), Don't know (61, 19.1%)
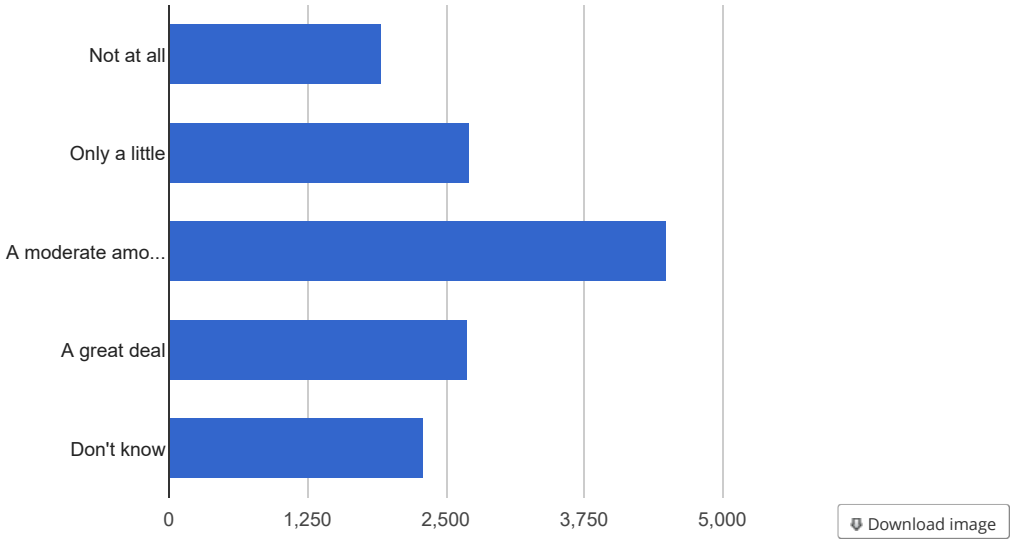
When do you think global warming will start to harm people in the United States?
(warmingwhenharm)

Total Count (N)	Missing*	Unique
302	62 (17.0%)	6

Counts/frequency: They are being harmed right now, (118, 39.1%), In 10 years, (39, 12.9%), In 25 years, (54, 17.9%), In 50 years (32, 10.6%), In 100 years, (21, 7.0%), Never (38, 12.6%)
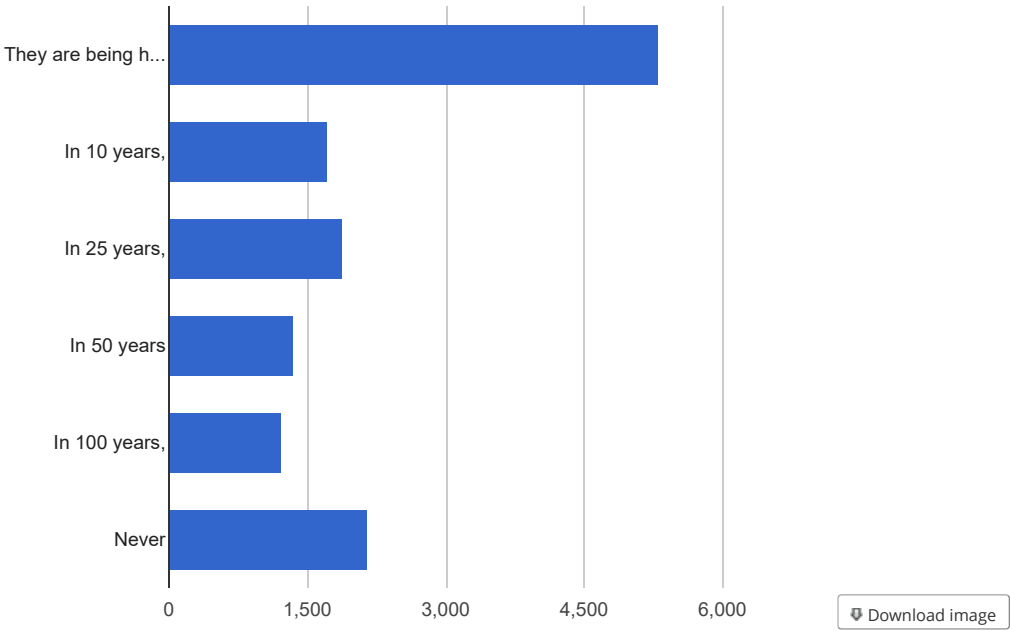
Do you think the government and politicians in your county should be doing more or less to address global warming? *(warminggovt)*

Total Count (N)	Missing*	Unique
314	50 (13.7%)	3

Counts/frequency: More (179, 57.0%), Less (36, 11.5%), Don't know or not sure (99, 31.5%)
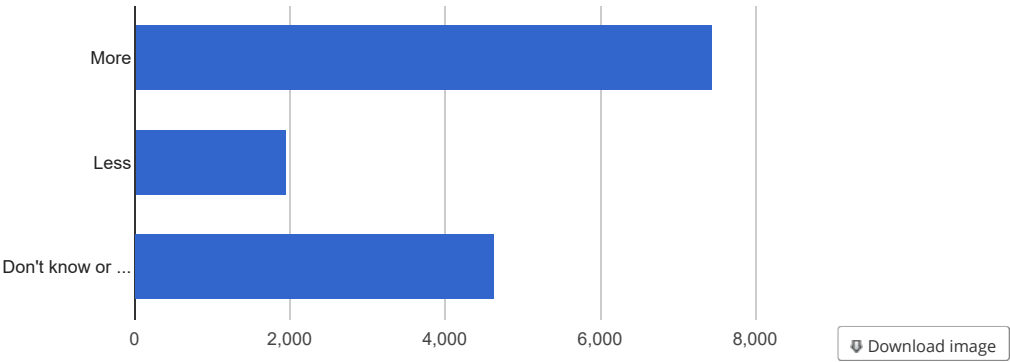
How often do you discuss global warming with your friends and family? *(warmingfriends)*

Total Count (N)	Missing*	Unique
314	50 (13.7%)	4

Counts/frequency: Often (18, 5.7%), Occasionally (78, 24.8%), Rarely (98, 31.2%), Never (120, 38.2%)
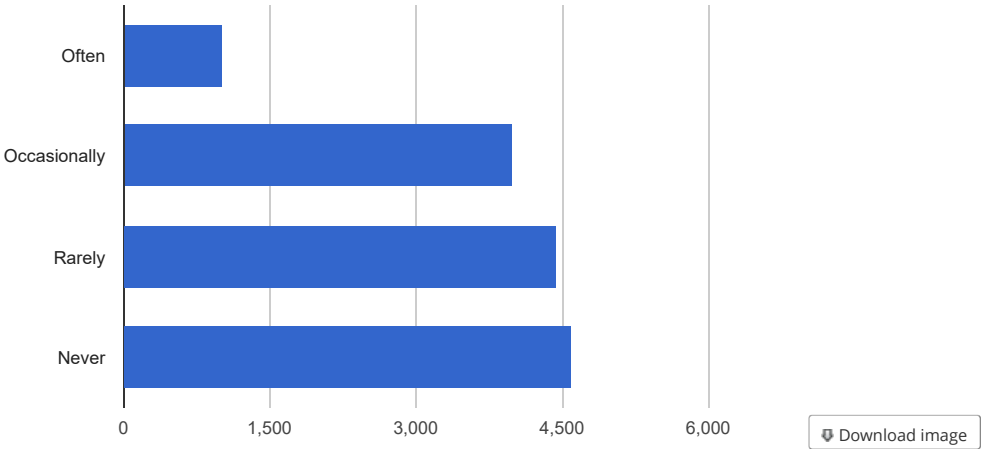
How often do you hear about global warming in the media? *(warmingmedia)*

Total Count (N)	Missing*	Unique
311	53 (14.6%)	5

Counts/frequency: At least once a week (70, 22.5%), At least once a month (71, 22.8%), Several times a year (92, 29.6%), Once a year or less often (38, 12.2%), Never (40, 12.9%)
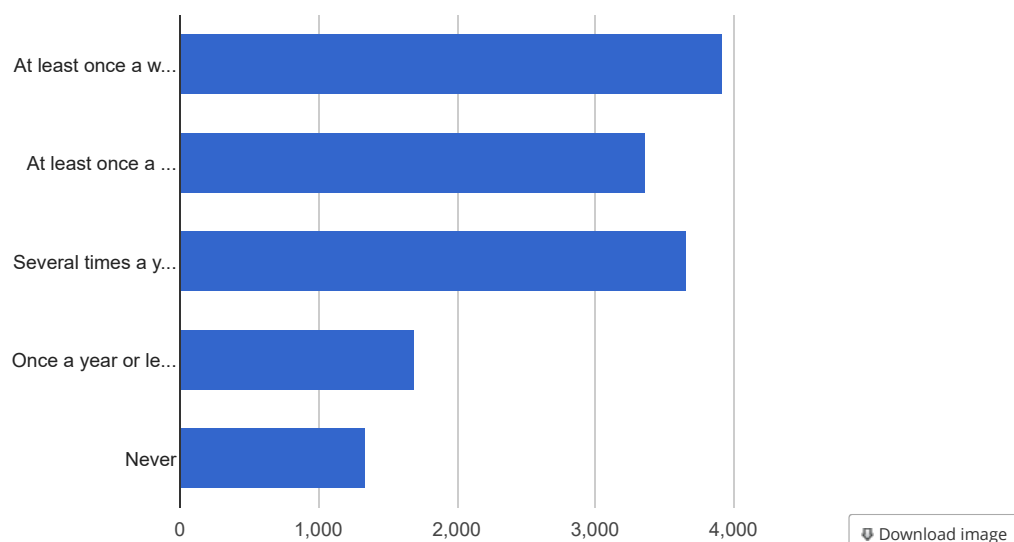
Thank you for your participation! Please feel free to include any additional comments in the box below. *(thankyou)*

Total Count (N)	Missing*
24	340 (93.4%)

Complete? *(form_1_complete)*

Total Count (N)	Missing*	Unique
364	0 (0.0%)	2

Counts/frequency: Incomplete (6, 1.6%), Unverified (0, 0.0%), Complete (358, 98.4%)
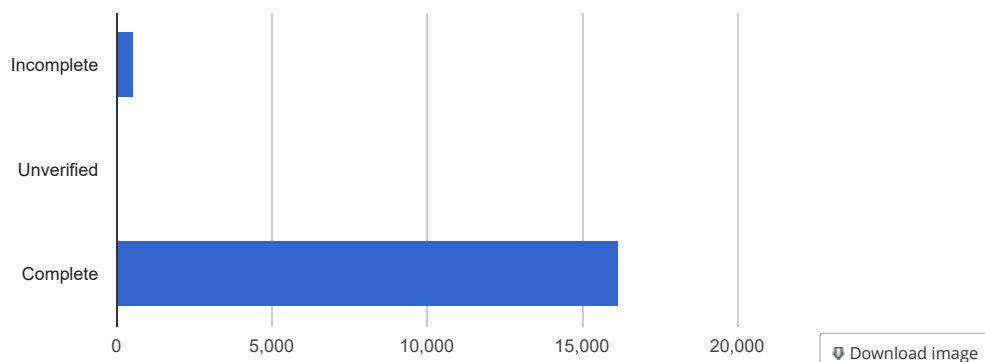
* Note: Values listed as 'Missing' may include records with a Missing Data Code (if Missing Data Codes are defined).

Appendix B

HNC 2030 County/State Data

Social and Economic Factors					
Health Indicator	**Desired Result**	**Definition**	**Edgecombe 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	476 (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	ACE's 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**	**Edgecombe 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	59% (2019)	74% (2019)	92.0%
Limited Access to Healthy Food*	All people in North Carolina have equitable access to affordable, nutritious, culturally appropriate foods.	Percent of people who are low-income that are not near a grocery store	8% (2015)	7% (2015)	5.0%
Food Insecurity*			20% (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	19% (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**	**Edgecombe 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)	41.20 (2020)	32.50 (2020)	18.0
Tobacco Use*	All people in North Carolina live in communities that support tobacco-free/e-cigarette-free lifestyles	Percentage of high school students reporting current use of any tobacco product		MS: 10.4% (2019)	9.0%
				HS: 27.3% (2019)	9.0%
		Percentage of adults reporting current use of any tobacco product	15.9% (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	15.8% (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	33.0% (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	14.0 (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	31.9 (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**	**Edgecombe County**	**North Carolina**	**HNC 2030 Target**
Infant Mortality	All babies in North Carolina are born healthy, thrive in caring and healthy homes, and see their first birthday.	Rate of infant deaths per 1,000 live births	11.8 (2020)	6.9 (2020)	6.0
		Disparity ratio between white non-Hispanic and African American, non-Hispanic infant deaths	1.51 (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	71.9 (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.

https://schs.dph.ncdhhs.gov/data/vital/ims/2020/2020-IMR-TABLE3b.html

Clinical Care					
Health Indicator	Desired Result	Definition	Edgecombe 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	69.3% (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	13.6 (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

328:1 to 1500:1
1501:1 to 3000:1
3001:1 to 4500:1
4501:1 and up
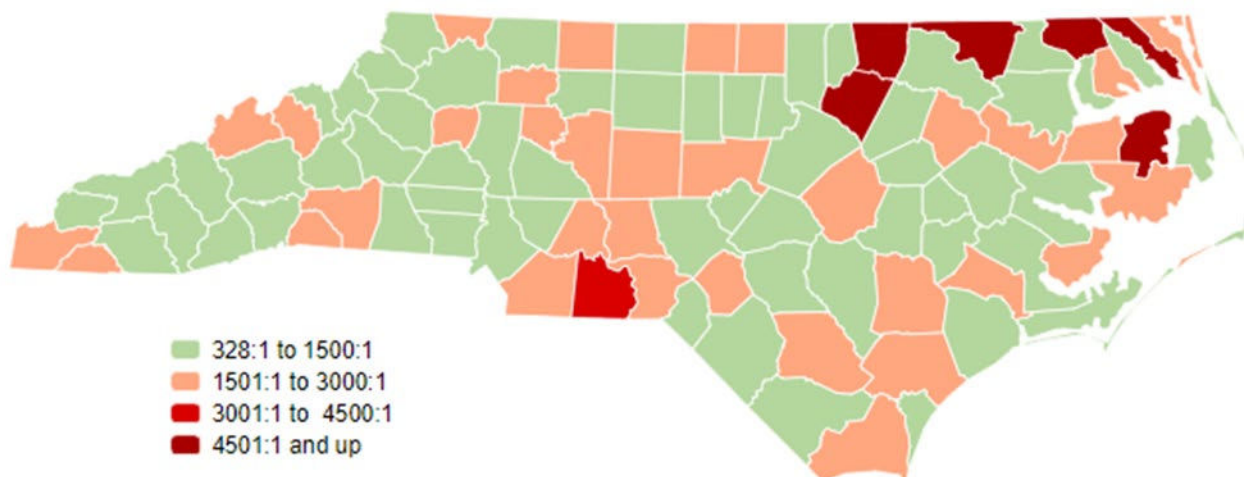
Appendix C

County Data Tables (Spring 2021)

Table 1. Population Estimate, Edgecombe County, North Carolina, and United States (2019)

Edgecombe County		North Carolina		United States	
51,472		10,488,084		328,239,523	
Estimated Percent Change April 1, 2010 to July 1, 2019	-9.0%	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/edgecombecountynorthcarolina/RHI825219					

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

Age Group	Edgecombe County (%)	North Carolina (%)
Persons under 5 years	5.7%	5.8%
Persons under 18 years	22.5%	21.9%
Persons 65 years and over	20.4%	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/edgecombecountynorthcarolina/RHI825219		

Table 3. Age Distribution by Age Group, Edgecombe County (2015-2019)

Age Group	Estimate	Percent
Total population	52,648	100%
Under 5 years	3,058	5.8%
5 to 9 years	2,976	5.7%
10 to 14 years	3,879	7.4%
15 to 19 years	3,194	6.1%
20 to 24 years	3,207	6.1%
25 to 34 years	6,205	11.8%
35 to 44 years	5,693	10.8%
45 to 54 years	6,584	12.5%
55 to 59 years	3,815	7.2%
60 to 64 years	4,052	7.7%
65 to 74 years	5,927	11.3%
75 to 84 years	3,004	5.7%
85 years and over	1,054	2.0%
Median age (years)	41.7	
Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates Table ID: DP05 https://data.census.gov/cedsci/table?q=Edgecombe%20county&tid=ACSDP5Y2019.DP05&hidePreview=true&moe=false		

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

Gender	Edgecombe (Percent)	North Carolina (Percent)
Female	53.8%	51.4%
Male	46.2%	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/edgecombecountynorthcarolina/RHI825219

Table 5. Veterans, Edgecombe County (2015-2019)

	Number	Percent of population 18 years and older
Veterans	2,578	6.3%

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates
Table ID: S2101
https://data.census.gov/cedsci/table?text=veteran%20status&g=0500000US37065&tid=ACSST5Y2019.S2101&moe=false&hidePreview=true

Table 6. Race/Ethnicity, Edgecombe County and North Carolina (2015-2019)

Race	Edgecombe County		North Carolina	
	Number	Percent	Number	Percent
White	20,721	39.4%	7,049,919	68.7%
Black or African American	30,332	57.6%	2,200,761	21.4%
American Indian and Alaska Native	70	0.1%	123,952	1.2%
Asian	113	0.2%	292,992	2.9%
Native Hawaiian and Other Pacific Islander	62	0.1%	7,213	0.1%
Hispanic or Latino (of any race)	2,415	4.6%	962,665	9.4%
Some other race	543	1.0%	316,763	3.1%
Two or more races	807	1.5%	273,276	2.7%
Total	52,648		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=0500000US37065&tid=ACSDP5Y2019.DP05&hidePreview=true

Table 7. Hispanic or Latino Origin and Race, Edgecombe County and North Carolina (2015-2019)

County/State	Race and Hispanic or Latino Origin in the past 12 months						
	White alone	Black or African American	American Indian and Alaska Native	Asian alone	Native Hawaiian and other Islander alone	Some Other race alone	Two or more races
Edgecombe	36.2%	57.5%	0.1%	0.2%	0.1%	0.1%	1.2%
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=0500000US37065&tid=ACSDP5Y2019.DP05&hidePreview=true&moe=false

Table 8. Limited English-Speaking Households, Edgecombe County (2015-2019)

All households	21,151	
Limited English-speaking households	200 ± 88	0.9%
Households Speaking:	Number	Percent
Spanish	659 ± 107	3.1%
Other Indo-European languages	58 ± 41	0.3%
Asian and Pacific Island languages	59 ± 44	0.3%
Other languages	47 ± 42	0.2%

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates
Table ID: S1602
https://data.census.gov/cedsci/table?q=S1602&g=0500000US37065&tid=ACSST5Y2019.S1602&hidePreview=true

Table 9. Educational Attainment Population 25+ years, Edgecombe County and North Carolina (2015-2019)

	Edgecombe County	North Carolina
High School Graduate or Higher	81.1%	87.8%
Less than 9th Grade	6.9%	4.5%
High School, No Diploma	11.9%	7.7%
High School Graduate or Equivalency	37.5%	25.7%
Some College, No Degree	21.1%	21.2%
Associate Degree	9.0%	9.7%
Bachelor's Degree	9.4%	20.0%
Graduate or Professional Degree	4.2%	11.3%

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates
Table ID: S1501
https://data.census.gov/cedsci/table?q=edgecombe%20county%20north%20carolina%20educational%20attainment&g=0500000US37065&tid=ACSST5Y2019.S1501&hidePreview=true&moe=false

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

	SAT Scores			
	2019	2018	2017	2016
Edgecombe County	945	954	976	861
North Carolina	1,091	1,090	1,074	997
United States	1,039	1,049	NR	NR

North Carolina School Report Cards
https://ncreports.ondemand.sas.com/src/?county=Edgecombe

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

	ACT Proficiency			
	2019	2018	2017	2016
Edgecombe County	27.5%	32.2%	31.0%	29.8%
North Carolina	55.8%	57.9%	58.8%	59.9%

North Carolina School Report Cards
https://ncreports.ondemand.sas.com/src/?county=Edgecombe

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

Income Level	Edgecombe County	North Carolina
Below $10,000	12.0%	6.4%
$10,000-$14,999	9.2%	5.0%
$15,000-$24,999	14.1%	10.3%
$25,000-$34,999	12.6%	10.3%
$35,000-$49,999	14.7%	13.9%
$50,000-$74,999	15.3%	18.0%
$75,000-$99,999	11.4%	12.4%
$100,000-$149,999	7.7%	13.1%
$150,000-$199,999	1.8%	5.1%
$200,000 or more	1.2%	5.4%
Median household income	$36,866	$54,602

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates
Table ID: S1901
https://data.census.gov/cedsci/table?q=income&g=0500000US37065&tid=ACSST5Y2019.S1901&moe=false&hidePreview=true

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

County/State	Age Group					
	Under 5 years	5-17 years	18-34 years	35-64 years	60 years and over	65 years and over
Edgecombe County	43.3%	35.0%	26.1%	19.2%	15.6%	14.1%
North Carolina	23.8%	20.2%	18.3%	11.3%	9.8%	9.1%

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates
Table ID: S1701
https://data.census.gov/cedsci/table?q=edgecombe%20county%20north%20carolina%20poverty%20status&tid=ACSST5Y2019.S1701&hidePreview=true

Table 14. Means of Transportation to Work by Age, Edgecombe County (2015-2019)

Label	Estimate
Total:	20,926
Car, truck, or van:	18,868
Drove alone	17,084
Carpooled:	1,784
In 2-person carpool	1,297
In 3-person carpool	361
In 4-person carpool	56
In 5- or 6-person carpool	48
In 7-or-more-person carpool	22
Public transportation (excluding taxicab):	41
Bus	41
Subway or elevated rail	0
Long-distance train or commuter rail	0
Light rail, streetcar, or trolley (carro público in Puerto Rico)	0
Ferryboat	0
Taxicab	39
Motorcycle	2
Bicycle	19
Walked	561
Other means	966
Worked from home	430

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates
Table ID: S1701
https://data.census.gov/cedsci/table?text=means%20of%20transportation&g=0500000US37065&tid=ACSDT5Y2019.B08301&moe=false&hidePreview=true

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

	Edgecombe County, North Carolina	
	Owner-occupied housing units with a mortgage	% owner-occupied housing units with a mortgage
Owner-Occupied Housing Units With a Mortgage	5,963	
Less than $50,000	597	10.0%
$50,000 to $99,999	2,546	42.7%
$100,000 to $299,999	2,511	42.1%
$300,000 to $499,999	187	3.1%
$500,000 to $749,999	89	1.5%
$750,000 to $999,999	10	0.2%
$1,000,000 or more	23	0.4%
Median (dollars)	$96,400	$96,400
Mortgage Status		
With either a second mortgage, or home equity loan, but not both	592	9.9%
Second mortgage only	189	3.2%
Home equity loan only	403	6.8%
Both second mortgage and home equity loan	14	0.2%
No second mortgage and no home equity loan	5,357	89.8%
Household Income in the past 12 months (in 2019 inflation-adjusted dollars)		
Less than $10,000	202	3.4%
$10,000 to $24,999	844	14.2%
$25,000 to $34,999	662	11.1%
$35,000 to $49,999	768	12.9%
$50,000 to $74,999	1,085	18.2%
$75,000 to $99,999	1,240	20.8%
$100,000 to $149,999	809	13.6%
$150,000 or more	353	5.9%
Median household income (dollars)	$62,890	$62,890
Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates Table ID: S2506 https://data.census.gov/cedsci/table?q=Owner-occupied%20units%20with%20a%20Mortgage&g=0500000US37065&tid=ACSST5Y2019.S2506&moe=false&hidePreview=true		

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

	Edgecombe County, North Carolina	
	Owner-occupied housing units without a mortgage	% owner-occupied housing units without a mortgage
Owner-Occupied Housing Units With a Mortgage	6,473	
Less than $50,000	1,804	27.9%
$50,000 to $99,999	2,683	41.4%
$100,000 to $199,999	1,521	23.5%
$200,000 to $299,999	300	4.6%
$300,000 to $499,999	105	1.6%
$500,000 to $749,999	60	0.9%
$750,000 to 999,999	0	0.0%
$1,000,000 or more	0	0.0%
Median (dollars)	$76,300	$76,300
Household Income in the Past 12 Months (in 2019 inflation-adjusted dollars)		
Less than $10,000	527	8.1%
$10,000 to $24,999	1,614	24.9%
$25,000 to $34,999	730	11.3%
$35,000 to $49,999	1,124	17.4%
$50,000 to $74,999	1,203	18.6%
$75,000 to $99,999	603	9.3%
$100,000 to $149,999	469	7.2%
$150,000 or more	203	3.1%
Median household income (dollars)	$39,210	$39,210
Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates Table ID: S2507 https://data.census.gov/cedsci/table?q=without%20a%20Mortgage&g=0500000US37065&tid =ACSST5Y2019.S2507&moe=false&hidePreview=true		

Table 17. Live Births, Edgecombe County and North Carolina (2018)

County/State	Total Births	Total Rate	White-non-Hispanic number	White non-Hispanic rate	Black, non-Hispanic number	Black non-Hispanic rate	Hispanic number	Hispanic rate
Edgecombe	593	11.4	164	8.6	368	12.2	57	23.0
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.gov/data/vital/volume1/2018/Edgecombe.html

Table 18. Live Births by Sex, Edgecombe 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	298	5.7	79	4.1	190	6.3	27	10.9
Females	295	5.7	85	4.5	178	5.9	30	12.1

Source: N.C. State Center for Health Statistics
https://schs.dph.ncdhhs.gov/data/vital/volume1/2018/Edgecombe.html

Table 19. Low Birth Weight, Edgecombe County and North Carolina (2014-2018)

				Non-Hispanic										
		Total		Total		White		Black		Other		Hispanic		
County of Residence	Birth Weight	Births	%.	Births	Pct.	Births	Pct.	Births	Pct.	Births	Pct.	Births	Pct.	
North Carolina	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	
	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	
Edgecombe	Low	389	12.8	377	13.4	64	7.8	310	15.7	3	16.7	12	5.4	
	Very Low	70	2.3	70	2.5	13	1.6	57	2.9	0	0.0	0	0.0	

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, Edgecombe 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
Edgecombe	41	13.4	7	*	34	17.0	0	*	0	*

Source: N.C. State Center for Health Statistics
https://schs.dph.ncdhhs.gov/data/databook/CD8%20fetal%20death%20rates.rtf

Table 21. Cancer Incidence Rates for selected sites per 100,000 population age adjusted to the 2000 U.S. Census, Edgecombe County and North Carolina (2012-2016)

County	Colon/Rectum		Lung/Bronchus		Female Breast		Prostate		All Cancers	
	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
Edgecombe County	133	37.8	269	72.0	286	150.5	207	118.3	1,641	463.9

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, Edgecombe County and North Carolina (2014-2018)

	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
Edgecombe	16	*	1	*	12	*	2	*	1	*

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"
https://schs.dph.ncdhhs.gov/data/databook/CD9A%20neonatal%20death%20rates.rtf

Table 23. Age-Adjusted Death Rates, Edgecombe County (2014-2018)

Cause of Death:	White, non-Hispanic		African American, non-Hispanic		American Indian, non-Hispanic		Other Races, non-Hispanic		Hispanic		Male		Female		Overall	
	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate
All Causes	1,614	997.3	1,697	945.6	5	N/A	6	N/A	24	347.1	1,698	1,200.6	1,648	788.8	3,346	967.2
Diseases of Heart	359	208.4	370	199.8	1	N/A	0	N/A	4	N/A	398	271.3	336	155.5	734	204.4
Acute Myocardial Infarction	108	61.9	105	54.8	0	N/A	0	N/A	2	N/A	128	85.7	87	38.6	215	57.7
Other Ischemic Heart Disease	142	83.7	116	61.2	0	N/A	0	N/A	1	N/A	156	105.1	103	46.8	259	71.1
Cerebrovascular Disease	177	100.4	160	91.4	0	N/A	0	N/A	1	N/A	148	107.1	190	84.4	338	95.0
Cancer	331	193.4	349	182.1	1	N/A	2	N/A	5	N/A	358	234.7	330	156.7	688	187.7
Colon, Rectum, and Anus	29	17.5	35	19.0	0	N/A	0	N/A	1	N/A	43	26.7	22	11.1	65	17.8
Pancreas	17	N/A	32	16.3	0	N/A	0	N/A	0	N/A	25	15.6	24	11.2	49	12.8
Trachea, Bronchus, and Lung	103	59.2	76	39.1	0	N/A	0	N/A	0	N/A	108	68.5	71	34.1	179	48.2
Breast	23	23.1	35	28.4	0	N/A	1	N/A	0	N/A	0	N/A	59	27.1	59	27.1
Prostate	9	N/A	18	N/A	0	N/A	1	N/A	0	N/A	28	21.9	0	N/A	28	21.9
Diabetes Mellitus	37	22.7	73	39.9	0	N/A	0	N/A	0	N/A	54	37.3	56	26.8	110	31.2
Pneumonia and Influenza	35	19.6	32	19.0	0	N/A	0	N/A	0	N/A	32	22.8	35	17.4	67	19.4
Chronic Lower Respiratory Diseases	92	51.5	57	31.8	0	N/A	0	N/A	0	N/A	83	58.3	66	31.0	149	41.5
Chronic Liver Disease and Cirrhosis	33	20.5	26	13.6	0	N/A	0	N/A	2	N/A	37	23.6	24	12.1	61	17.5
Septicemia	44	25.9	47	26.1	0	N/A	0	N/A	0	N/A	44	31.8	47	21.7	91	25.4
Nephritis, Nephrotic Syndrome, and Nephrosis	19	N/A	50	27.0	0	N/A	0	N/A	1	N/A	37	24.8	33	14.8	70	19.1
Unintentional Motor Vehicle Injuries	31	33.1	36	24.2	1	N/A	0	N/A	2	N/A	48	42.0	22	15.6	70	27.8
All Other Unintentional Injuries	77	69.1	35	21.0	2	N/A	0	N/A	2	N/A	67	52.8	49	29.5	116	40.6
Suicide	26	24.1	6	N/A	0	N/A	0	N/A	0	N/A	29	21.9	3	N/A	32	10.6
Homicide	6	N/A	31	23.4	0	N/A	0	N/A	3	N/A	31	30.1	9	N/A	40	17.5
Alzheimer's disease	38	21.4	22	13.1	0	N/A	0	N/A	1	N/A	13	N/A	48	21.1	61	17.4
Acquired Immune Deficiency Syndrome	1	N/A	18	N/A	0	N/A	0	N/A	0	N/A	10	N/A	9	N/A	19	N/A

Source: N.C. State Center for Health Statistics
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, Edgecombe County (2018-2020)

County	Chlamydia			Gonorrhea			P. & S. Syphilis			E. L. Syphilis		
	2018 Jan-Mar	2019 Jan-Mar	2020 Jan-Mar	2018 Jan-Mar	2019 Jan-Mar	2020 Jan-Mar	2018 Jan-Mar	2019 Jan-Mar	2020 Jan-Mar	2018 Jan-Mar	2019 Jan-Mar	2020 Jan-Mar
Edgecombe	111	136	167	52	65	82	0	0	1	0	2	2

Source: N.C. State Center for Health Statistics
https://epi.dph.ncdhhs.gov/cd/stds/figures/vol20no1.pdf

Table 25. All Other Unintentional Injuries Death Rates per 100,000 Residents, Edgecombe 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
Edgecombe	27	51.9	116	43.5	40.6
North Carolina	4,478	43.1	19,576	38.6	37.0

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 100,000 Residents, Edgecombe 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
Edgecombe	23	44.2	70	26.3	27.8
North Carolina	1,591	15.3	7,553	14.9	14.5

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

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

County/State	Violent Crime Rate				Property Crime Rate		
	Murder	Rape	Robbery	Agg Assault	Burglary	Larceny	MVT
North Carolina	356.6				2,406.6		
	5.8	23.7	77.1	250.0	577.4	1,667.2	162.0
Edgecombe County	606.6				2,742.0		

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 Resident Deaths, Edgecombe County and North Carolina (2015-2019)

County of Residence	Total Deaths	Crude Rate	Age-Adjusted Rate
North Carolina	9,367	18.25	18.80
Edgecombe County	44	16.50	18.20

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 Resident Deaths (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 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 Respond.^	Yes			No		
		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 Respond.^	Yes			No		
		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

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

	Total Respond.^	Yes			No		
		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

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, Edgecombe County (2016-2019)

Leading Causes of Injury Death 2016 to 2019 EDGECOMBE			Leading Causes of Injury Hospitalization 2016 to 2019 EDGECOMBE			Leading Causes of Injury ED Visits 2016 to 2019 EDGECOMBE		
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#
1	MVT - Unintentional	70	1	Fall - Unintentional	515	1	Fall - Unintentional	5,631
2	Poisoning - Unintentional	53	2	MVT - Unintentional	183	2	MVT - Unintentional	3,896
3	Fall - Unintentional	29	3	Poisoning - Unintentional	154	3	Unspecified - Unintentional	3,178
4	Firearm - Assault	28	4	Poisoning - Self-Inflicted	69	4	Struck By/Against - Unintentional	1,617
5	Firearm - Self-Inflicted	22	5	Fire/Burn - Unintentional	53	5	Natural/Environmental - Unintentional	1,077
TOTAL		240	TOTAL		1,228	TOTAL		21,491

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, Edgecombe County (2016-2019).

Leading Causes of Injury Death 2016 to 2019 EDGECOMBE			Leading Causes of Injury Hospitalization 2016 to 2019 EDGECOMBE			Leading Causes of Injury ED Visits 2016 to 2019 EDGECOMBE		
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#
1	MVT - Unintentional	5	1	Poisoning - Unintentional; Fire/Burn - Unintentional; Fall - Unintentional	11	1	Fall - Unintentional	875
2	Suffocation - Unintentional	2	2	MVT - Unintentional	9	2	Unspecified - Unintentional	566
3	Unspecified - Assault; Pedal Cyclist Other - Unintentional; Drowning/Submersion - Unintentional	1	3	Unspecified - Unintentional; Other Specified/Classifiable - Assault; Other Land Transport - Unintentional	6	3	Struck By/Against - Unintentional	411
4		0	4	Other Specified/Classifiable - Unintentional	4	4	MVT - Unintentional	384
5		0	5	Suffocation - Unintentional; Poisoning - Self-Inflicted; Natural/Environmental - Unintentional	3	5	Natural/Environmental - Unintentional	291
TOTAL		10	TOTAL		70	TOTAL		3,373

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, Edgecombe County (2016-2019).

Leading Causes of Injury Death 2016 to 2019 EDGECOMBE			Leading Causes of Injury Hospitalization 2016 to 2019 EDGECOMBE			Leading Causes of Injury ED Visits 2016 to 2019 EDGECOMBE		
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#
1	MVT - Unintentional	28	1	MVT - Unintentional	57	1	MVT - Unintentional	1,720
2	Poisoning - Unintentional	19	2	Firearm - Assault	30	2	Unspecified - Unintentional	902
3	Firearm - Assault	16	3	Poisoning - Self-Inflicted	28	3	Fall - Unintentional	780
4	Firearm - Self-Inflicted	4	4	Poisoning - Unintentional	19	4	Struck By/Against - Unintentional	573
5	Firearm - Unintentional	3	5	Fall - Unintentional	16	5	Cut/Pierce - Unintentional	424
TOTAL		73	TOTAL		222	TOTAL		6,726

Source: N.C. Injury & Violence Prevention Branch.
https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCounty2016_2019_ages15-34Final.pdf

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

Leading Causes of Injury Death 2016 to 2019 EDGECOMBE		
Rank	Cause	#
1	Poisoning - Unintentional	31
2	MVT - Unintentional	23
3	Firearm - Self-Inflicted	9
4	Firearm - Assault	8
5	Suffocation - Self-Inflicted; Fall - Unintentional	5
TOTAL		90

Leading Causes of Injury Hospitalization 2016 to 2019 EDGECOMBE		
Rank	Cause	#
1	Fall - Unintentional	133
2	Poisoning - Unintentional	97
3	MVT - Unintentional	85
4	Poisoning - Self-Inflicted	30
5	Unspecified - Unintentional	20
TOTAL		458

Leading Causes of Injury ED Visits 2016 to 2019 EDGECOMBE		
Rank	Cause	#
1	Fall - Unintentional	1,735
2	MVT - Unintentional	1,445
3	Unspecified - Unintentional	1,237
4	Struck By/Against - Unintentional	488
5	Natural/Environmental - Unintentional	390
TOTAL		7,385

Source: N.C. Injury & Violence Prevention Branch.
https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCounty2016_2019_ages35-64Final.pdf

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

Leading Causes of Injury Death 2016 to 2019 EDGECOMBE		
Rank	Cause	#
1	Fall - Unintentional	24
2	MVT - Unintentional	14
3	Firearm - Self-Inflicted	9
4	Natural/Environmental - Unintentional; Firearm - Assault	4
5	Suffocation - Unintentional; Poisoning - Unintentional	3
TOTAL		67

Leading Causes of Injury Hospitalization 2016 to 2019 EDGECOMBE		
Rank	Cause	#
1	Fall - Unintentional	355
2	MVT - Unintentional	32
3	Poisoning - Unintentional	27
4	Unspecified - Unintentional	13
5	Struck By/Against - Unintentional; Fire/Burn - Unintentional	10
TOTAL		478

Leading Causes of Injury ED Visits 2016 to 2019 EDGECOMBE		
Rank	Cause	#
1	Fall - Unintentional	2,241
2	Unspecified - Unintentional	473
3	MVT - Unintentional	347
4	Struck By/Against - Unintentional	145
5	Natural/Environmental - Unintentional	114
TOTAL		4,007

Source: N.C. Injury & Violence Prevention Branch.
https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCounty2016_2019_ages65upFinal.pdf

References

N.C. Bureau of Investigation. (2018). Crime in North Carolina. Retrieved from
http://ncsbi.gov/Services/SBI-Statistics/SBI-Uniform-Crime-Reports/2018-Annual-Summary.aspx

N.C. Division of Health and Human Services Communicable Disease Branch. (2020). North Carolina HIV/STD Quarterly Surveillance Report: Vol. 2020, No. 1. Retrieved from
https://epi.dph.ncdhhs.gov/cd/stds/figures/vol20no1.pdf

N.C. Injury & Violence Prevention Branch. (2016-2019) Leading Causes of Injury Death, Hospitalizations, and Emergency Department Visits All Ages. Retrieved from
https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCounty2016_2019Final.pdf

N.C. Injury & Violence Prevention Branch. (2016-2019) Leading Causes of Injury Death, Hospitalizations, and Emergency Department Visits Ages 0-14. Retrieved from
https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCounty2016_2019_ages0-14Final.pdf

N.C. Injury & Violence Prevention Branch. (2016-2019) Leading Causes of Injury Death, Hospitalizations, and Emergency Department Visits Ages 15-34. Retrieved from
https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCounty2016_2019_ages15-34Final.pdf

N.C. Injury & Violence Prevention Branch. (2016-2019) Leading Causes of Injury Death, Hospitalizations, and Emergency Department Visits Ages 35-65. Retrieved from
https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCounty2016_2019_ages35-64Final.pdf

N.C. Injury & Violence Prevention Branch. (2016-2019) Leading Causes of Injury Death, Hospitalizations, and Emergency Department Visits Ages 65+. Retrieved from
https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCounty2016_2019_ages65upFinal.pdf

N.C. State Center for Health Statistics. (2014-2018). All Other Unintentional Injuries Death Rates per 100,000. Retrieved from
https://schs.dph.ncdhhs.gov/data/vital/lcd/2018/otherinjuries.html

N.C. State Center for Health Statistics. (2019). BRFSS Survey Results: North Carolina Regions Chronic Health Conditions: History of any cardiovascular diseases. Retrieved from
https://schs.dph.ncdhhs.gov/data/brfss/2019/Medicaid/region6/cvdhist.html

N.C. State Center for Health Statistics. (2019). BRFSS Survey Results: North Carolina Regions Healthy Days: Frequent Mental Distress (within the past 30 days). Retrieved from
https://schs.dph.ncdhhs.gov/data/brfss/2019/Medicaid/region6/FMD.html

N.C. State Center for Health Statistics. (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). Retrieved from
https://schs.dph.ncdhhs.gov/data/brfss/2019/Medicaid/region6/_RFHYPE.html

N.C. State Center for Health Statistics. (2012-2016). Cancer Incidence Rates by County for selected cities per 100,000 population Age-Adjusted to the 2000 US Census. Retrieved from https://schs.dph.ncdhhs.gov/data/databook/CD13A%20leadingcancers.xlsx

N.C. State Center for Health Statistics. (2014-2018). Fetal Death Rates per 1,000 Deliveries. Retrieved from
https://schs.dph.ncdhhs.gov/data/databook/CD8%20fetal%20death%20rates.rtf

N.C. State Center for Health Statistics. (2018). Live Births. Retrieved from
https://schs.dph.ncdhhs.gov/data/vital/volume1/2018/Edgecombe.html

N.C. State Center for Health Statistics. (2014-2018). Live Births by Sex. Retrieved from
https://schs.dph.ncdhhs.gov/data/vital/volume1/2018/Edgecombe.html

N.C. State Center for Health Statistics. (2018). Low Birth Weight. Retrieved from
https://schs.dph.ncdhhs.gov/data/databook/CD6A-B%20LBW%20&%20VLBW%20by%20race.html

N.C. State Center for Health Statistics. (2014-2018). Motor Vehicle Injury Death Rates per 100,000. Retrieved from
https://schs.dph.ncdhhs.gov/data/vital/lcd/2018/motorvehicle.html

N.C. State Center for Health Statistics. (2014-2018). Neonatal (<28 Days) Death Rates per 1,000 Live Births. Retrieved from
https://schs.dph.ncdhhs.gov/data/databook/CD9A%20neonatal%20death%20rates.rtf

N.C. State Center for Health Statistics. (2015-2019). Poisoning Mortality Rates (per 100,000) 2015-2019 North Carolina Resident Deaths.

N.C. State Center for Health Statistics. (2019). Poisoning Mortality Rates (per 100,000) by Race/Ethnicity 2019 North Carolina Resident Deaths.

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

N.C. State Center for Health Statistics. (2014-2018). Race/Ethnicity-Specific Age Adjusted Death Rates Standard = Year 2000 U.S. Population per 100,000 for Edgecombe County. Retrieved from
https://schs.dph.ncdhhs.gov/data/databook/CD12B%20racespecific%20and%20sexspecific%20rates.rtf

North Carolina ACT Benchmark Percentages by State, System, and School for Grade 11 Students. (2016-2019). Retrieved from
https://ncreports.ondemand.sas.com/src/?county=Edgecombe

North Carolina SAT Performance by District and School. (2016-2019). Retrieved from
https://ncreports.ondemand.sas.com/src/?county=Edgecombe

U.S. Census Bureau American Community Survey 5-Year Estimates Data Profiles (2015-2019). Age. Retrieved from
https://data.census.gov/cedsci/table?q=Edgecombe%20county&tid=ACSDP5Y2019.DP05&hidePreview=true&moe=false

U.S. Census Bureau American Community Survey 5-Year Estimates Data Profiles (2015-2019). Hispanic or Latino Origin and Race. Retrieved from
https://data.census.gov/cedsci/table?text=DP05&g=0500000US37065&tid=ACSDP5Y2019.DP05&hidePreview=true&moe=false

U.S. Census Bureau American Community Survey 5-Year Estimates Data Profiles (2015-2019). Race/Ethnicity. Retrieved from
https://data.census.gov/cedsci/table?q=Edgecombe%20county&tid=ACSDP5Y2019.DP05&hidePreview=true&moe=false

U.S. Census Bureau American Community Survey 5-Year Estimates Subject Tables (2015-2019). Educational Attainment. Retrieved from https://data.census.gov/cedsci/table?q=edgecombe%20county%20north%20carolina%20educational%20attainment&g=0500000US37065&tid=ACSST5Y2019.S1501&hidePreview=true&moe=false

U.S. Census Bureau American Community Survey 5-Year Estimates Subject Tables (2015-2019). Financial Characteristics for Housing Units With a Mortgage. Retrieved from https://data.census.gov/cedsci/table?q=Owner-occupied%20units%20with%20a%20Mortgage&g=0500000US37065&tid=ACSST5Y2019.S2506&moe=false&hidePreview=true

U.S. Census Bureau. American Community Survey 5-Year Estimates Subject Tables (2015-2019). Financial Characteristics for Housing Units Without a Mortgage. Retrieved from https://data.census.gov/cedsci/table?q=without%20a%20Mortgage&g=0500000US37065&tid=ACSST5Y2019.S2507&moe=false&hidePreview=true

U.S. Census Bureau American Community Survey 5-Year Estimates Subject Tables. (2015-2019). Income in the past 12 months (in 2019 Inflation-Adjusted Dollars). Retrieved from https://data.census.gov/cedsci/table?q=income&g=0500000US37065&tid=ACSST5Y2019.S1901&moe=false&hidePreview=true

U.S. Census Bureau American Community Survey 5-Year Estimates Subject Tables (2015-2019). Limited English-Speaking Households. Retrieved from https://data.census.gov/cedsci/table?q=S1602&g=0500000US37065&tid=ACSST5Y2019.S1602&hidePreview=true

U.S. Census Bureau American Community Survey 5-Year Estimates Subject Tables (2015-2019). Means of Transportation to Work. Retrieved from https://data.census.gov/cedsci/table?text=means%20of%20transportation&g=0500000US37065&tid=ACSDT5Y2019.B08301&moe=false&hidePreview=true

U.S. Census Bureau American Community Survey 5- Year Estimates Subject Tables (2015-2019). Poverty Status in the past 12 months. Retrieved from https://data.census.gov/cedsci/table?q=edgecombe%20county%20north%20carolina%20poverty%20status&tid=ACSST5Y2019.S1701&hidePreview=true

U.S. Census Bureau American Community Survey 5-Year Estimates Subject Tables (2015-2019). Veteran Status. Retrieved from https://data.census.gov/cedsci/table?text=veteran%20status&g=0500000US37065&tid=ACSST5Y2019.S2101&moe=false&hidePreview=true

U.S. Census Bureau Census QuickFacts Estimates (2019). Age and Sex. Retrieved from https://www.census.gov/quickfacts/fact/table/edgecombecountynorthcarolina/RHI825219

U.S. Census Bureau, Census QuickFacts Estimates. (2019). Age Distribution. Retrieved from https://www.census.gov/quickfacts/fact/table/edgecombecountynorthcarolina/RHI825219

U.S. Census Bureau, Census QuickFacts Estimates. (2019). Population Estimates. Retrieved from https://www.census.gov/quickfacts/fact/table/edgecombecountynorthcarolina/RHI825219