Community Health Needs Assessment

Hyde County

2022

ECU HEALTH
Beaufort Hospital
A CAMPUS OF ECU HEALTH MEDICAL CENTER

Contact Information

Copies of the 2022 CHNA report can be found online at www.hydehealth.com/health-education or www.ecuhealth.org.

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Acknowledgements

The Community Health Needs Assessment (CHNA) process requires significant dedication from those community members and organizations who are committed to identifying and addressing health problems within our communities to improve the quality of life for our residents. It is essential that the CHNA team involve people who have significant influence in the county, as well as the people most affected by health issues. People from throughout the county must be mobilized during this process, therefore, a broad representation of county residents, agencies, and organizations were invited to be a part of this process. Thank you to our community partners who contributed to the 2022 CHNA process:

Hyde County Health Department

Hyde County Behavioral Health

Hyde County Cooperative Extension

Hyde County Hotline

Hyde County Department of Social Services

Hyde County Sheriff's Office

Hyde County EMS

ECU Health Beaufort Hospital

ECU Health Cancer Care

Hyde County Schools

County of Hyde (Administration)

Beaufort-Hyde Partnership for Children

Albemarle Regional Health Services

Project DIRECT Legacy for Men & Their Families

Hyde Transit

Engelhard Medical Center

Ocracoke Health Center

ECU Health

Executive Summary

Partnerships/Collaborations

Hyde County Health Department	Luana Gibbs (Health Director), Anna Schafer (Health Education Director), Melissa Sadler (Nursing Supervisor), Misty Gibbs (Preparedness Coordinator), Emma Williams (Nurse Practitioner), Roni Collier (Environmental Health Specialist)
Hyde County Behavioral Health	Mike Wheeler (Peer Support Specialist, Post-Overdose Response Coordinator)
Hyde County Cooperative Extension	Natalie Wayne (Hyde & Tyrrell Extension Director), Lee Brimmage (4-H Youth Development Extension Agent), CatieJo Black (Family & Consumer Sciences Extension Agent)
Hyde County Hotline	Kathy Ballance (Executive Director), Rhonda Ballance (Client Services Advocate)
Hyde County Department of Social Services	Laurie Potter (Director)
Hyde County Sheriff's Office	Guire Cahoon (Hyde County Sheriff)
Hyde County EMS	David White (EMS Director)
ECU Health Beaufort Hospital	Pam Shadle (Director of Marketing, Community Outreach and Development), Kelly Ange (Community Health Improvement Coordinator)
ECU Health Cancer Care	Jennifer Lewis (Outreach Coordinator)
Hyde County Schools	Alison Etheridge (Mattamuskeet Elementary School Principal), Clare Senseney (21st Century After School Coordinator), Desiree LaPorte (Social Worker), Julio Morales (English as a Second Language (ESL) Teacher, District Public Information Officer) Elaya Johnson (21st Century Community Learning Center Program Manager), Stephanie Stewart (School Nurse), Flavia Burton (ESL Teacher), Gwen Austin (Social Studies/Health Teacher), Kristi Gibbs (Guidance Counselor), Mary McKnight (Guidance Counselor), Leslie Cole (Principal, Ocracoke School), Mary Frances Hamrick (Guidance Counselor), Melissa DiMarsico (Health & Physical Education Teacher), Tekisha Jordan (Student Support Services Administrative Assistant, NC Pre-K Administrator), Wesley Creef (Physical Education Teacher), Wesley Floyd (Early College High School Principal), Stephen Basnight (Hyde County Schools Superintendent)
County of Hyde (Administration)	Kris Noble (County Manager), Donnie Shumate (Assistant County Manager), Earl Pugh Jr. (Hyde County Board of Commissioners Chairman)
Beaufort-Hyde Partnership for Children	Jessica Burnham (Director)
Albemarle Regional Health Services	Teresa Beardsley (Region 9 Tobacco Prevention Manager)
Project DIRECT Legacy for Men & Their Families	Christine Davis (Secretary), Archie Green (Co-Chairman)
Hyde Transit	Beverly Paul (Director)
Engelhard Medical Center	Jamie Jones (Clinical Manager)
Ocracoke Health Center	Amanda Cochran (Clinical Nurse Manager)
ECU Health	Latrice Peele (Hyde County Community Health Worker)

Regional/Contracted Services

Hyde County received support in conducting the CHA from Health ENC, which is a partnership between public health agencies, hospitals, and other key partners in Eastern North Carolina with the shared goal of improving the health and wellbeing of our residents. Health ENC is a program of the Foundation for Health Leadership & Innovation (FHLI), a nonprofit organization focused on improving health in North Carolina. FHLI helps Health ENC in building its network and enhancing its overall impact. Health ENC coordinates a regional CHNA in 35 counties of eastern North Carolina, and its Program Manager works to build coalitions and partnerships that will address health issues identified through the regional CHA process. Initiated in 2015 by the Office of Health Access in the Brody School of Medicine at East Carolina University, Health ENC grew out of conversations with health care leaders about improving the CHNA process in eastern North Carolina. You can learn more by visiting https://www.healthenc.org/. For the 2022 CHNA process, Health ENC coordinated regional community survey efforts, as well as secondary data collection, report template creation, and more.

Theoretical Framework/Model

The Hyde County Health Department utilizes the eight-phase assessment process described in the North Carolina Department of Health and Human Services, Division of Public Health's Community Health Assessment Guide Book. This Guide Book is a step-by-step manual for community-based health assessment that provides tools for collecting county level data, worksheets for analyzing the data, data interpretation tips, guidelines for prioritizing local health needs, and community health planning aids. The eight phases of the assessment process are as follows:

Phase 1:   Establish a community health assessment team

Phase 2:   Collect primary data

Phase 3:   Collect secondary data

Phase 4:   Analyze and interpret data

Phase 5:   Determine health priorities

Phase 6:   Create the CHNA document

Phase 7:   Disseminate the CHNA document

Phase 8:   Develop community health improvement plans

Results-Based Accountability™ (RBA) will be employed when developing Hyde County's Community Health Improvement Plans. RBA uses a data-driven, decision-making process to help communities and organizations get beyond talking about problems to taking action to solve problems. It is a simple, common-sense framework that everyone can understand. RBA starts with ends and works backward, towards means.

Collaborative Process Summary

Hyde County's collaborative process occurred at both regional and local levels. Health ENC supports regional assessment efforts and creates a platform for information sharing between similar counties in the eastern North Carolina region. Regional discussions about the CHNA began in early 2021. Primary data collection began in early April 2021 and concluded in late June 2021. Secondary data was compiled and analyzed through Health ENC efforts in June 2021, and primary data analysis occurred in July 2021. The local priority setting process commenced on November 18, 2021, when a meeting was conducted with community stakeholders in which a comprehensive list of potential health priorities was created. Subsequently, a survey was distributed to all stakeholders in an effort to vote on the top priorities. (You can find more information on this process in Chapter 10).

Key Findings

Since 2016 the population of Hyde County has been steadily decreasing and is projected to decline further to 4,879 persons for 2029. However, birth rates have been increasing from 2016-2019 which is a promising factor for population growth. Hyde County has been designated as Tier 1 – most distressed status for 2021 and 2022 out of the state's 100 counties based upon the economic well-being of the county. Nearly a quarter of the population of Hyde County lives below the poverty level, 38% being children. The rate of individuals aged 0-64 years old with health insurance coverage is lower than the rate for North Carolina and the Health ENC region with nearly 18% of the population uninsured. The leading causes of mortality in Hyde County are cancer, heart disease, other unintentional injuries, and chronic lower respiratory diseases. Many of these chronic condition's death rates are higher than the state and the Health ENC County Region rates. In 2018 Chlamydia was the number one reportable communicable disease in Hyde County, comprising half of all reported cases. According to the primary data low income/poverty is the issue which has the highest impact on the quality of life in Hyde County, followed by drugs (substance abuse) and lack of community resources. Most survey respondents agreed that Hyde County is a good place to raise children and that Hyde County is a good place to grow old. Alternatively, most people believe that Hyde County is not a safe place to live and that there is not enough economic opportunity. Participants also disagreed or strongly disagreed that Hyde County has affordable housing that meets their needs, Hyde County has good parks and recreation facilities, and that it is easy to buy healthy foods in Hyde County. The top three services that respondents ranked as the most need of improvement in their community was culturally appropriate health services, availability of employment, and higher paying employment. When asked about the health behaviors that they felt people in their community needed more information about, the majority of respondents replied with substance misuse prevention, exercising/fitness, elder care, and managing weight. When asked about the top areas where the COVID-19 pandemic has impacted them the most, participants responded with stress and anxiety, social isolation, and mental/behavioral health. Between April 1 and June 30, 2021, nearly 67% of participants reported being vaccinated for COVID-19, while 31% had not been vaccinated. Most participants reported that they do not engage in any physical activity or exercise that lasts at least a half hour a few days each week. Most respondents did not have a problem accessing the healthcare they needed over the last year however 18.2% did have a problem with access to needed healthcare, citing COVID-19 and no health insurance coverage as the main barriers to access. At least one time over the past year 13.4% of respondents were worried about whether their family's food would run out before they got money to buy more.

Health Priorities

The significant health needs as identified by the county are:

1. Mental Health
2. Substance Use
3. Child Abuse & Neglect

Next Steps

This report describes the process and findings of a comprehensive health needs assessment for the residents of Hyde County, North Carolina, and will be shared with community stakeholders, partners, and the general public. The prioritization of the identified significant health needs will guide community health improvement efforts of Hyde County. Following this process, Hyde County will outline how they plan to address the prioritized health needs in their implementation plan by utilizing Results-Based Accountability™.

Chapter 1 Introduction

Description of County

Hyde County has a total area of 1,424 square miles, 613 miles is land, and 811 miles is water. Adjacent counties are Tyrrell, Dare, Carteret, Pamlico, Beaufort, and Washington County. There are two bodies of water in Hyde County the Pamlico Sound and the Atlantic Ocean. Hyde County is also home to five nationally protected areas. Attractions in Hyde County consist of the Ocracoke Lighthouse, waterfowl hunting, fishing, and Eco-tourism.

Overview of Health ENC

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

Overview of Community Health Needs Assessment Process

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

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

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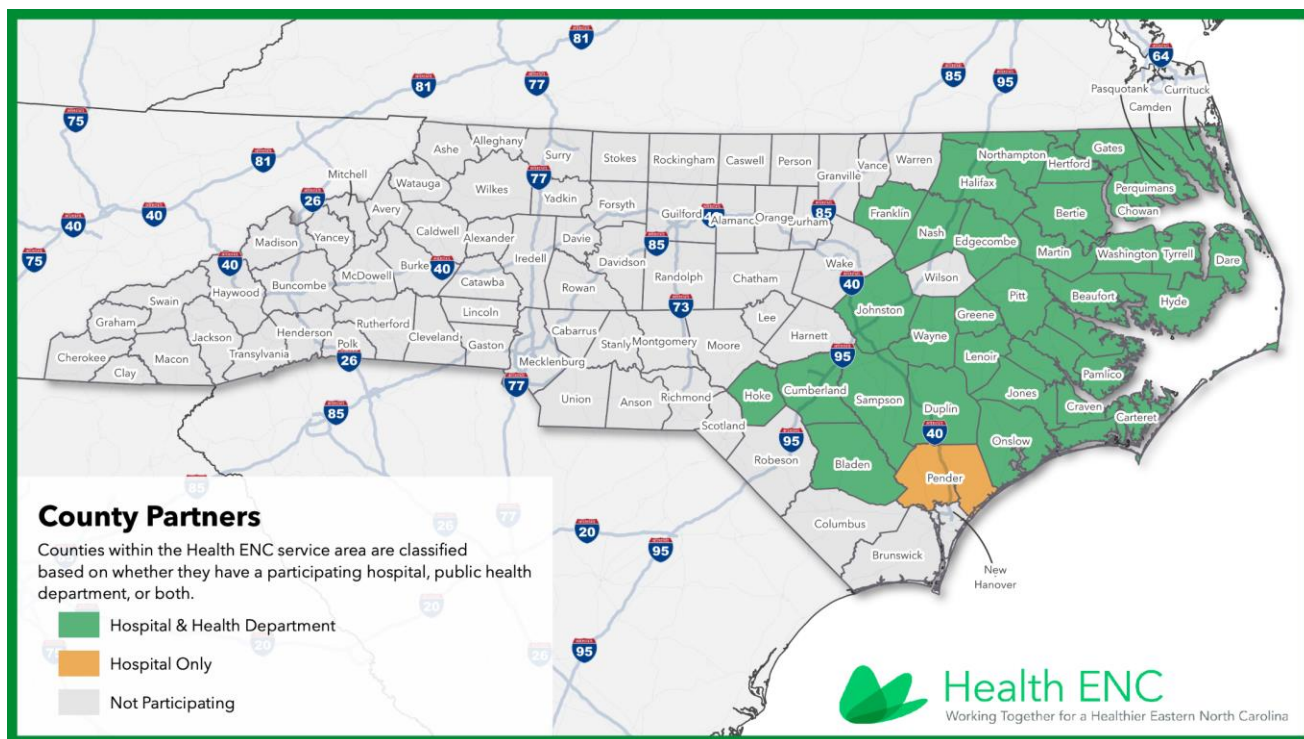
Health ENC serves the following counties: Beaufort, Bertie, Bladen, Camden, Carteret, Chowan, Craven, Cumberland, Currituck, Dare, Duplin, Edgecombe, Franklin, Gates, Greene, Halifax, Hertford, Hoke, Hyde, Johnston, Jones, Lenoir, Martin, Nash, Northampton, Onslow, Pamlico, Pasquotank, Pender, Perquimans,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

Health Data Sources

Primary Data – Community Survey

Survey Methodology/Design

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

Survey Design:

The Health ENC Steering Committee developed a primary survey to gather information from community members about their health concerns. A workgroup of Steering Committee members convened and examined survey questions utilized in the 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.

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.

The survey included 25 questions and was made available in paper format and electronically using the REDcap software from April 1 – June 30, 2021. During that 3-month time frame, surveys were distributed at community outreach events, and the online survey link was shared constantly on Hyde Happenings (Hyde County's online newsletter), as well as on social media.

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

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

Secondary Data Sources

Healthy North Carolina 2030 (HNC 2030) https://nciom.org/healthy-north-carolina-2030/

NC State Center for Health Statistics https://schs.dph.ncdhhs.gov/

Robert Wood Johnson County Health Rankings and Roadmaps https://www.countyhealthrankings.org/

SHEPS Health Workforce NC https://nchealthworkforce.unc.edu/interactive/supply/

US Census Bureau https://data.census.gov/

NC Department of Public Instruction https://www.dpi.nc.gov/

NC Department of Commerce https://www.nccommerce.com/

NC State Bureau of Investigations https://www.ncsbi.gov/Services/SBI-Uniform-Crime-Reports.aspx

NC Department of Public Safety https://www.ncdps.gov/our-organization/juvenile-justice/community-programs/juvenile-crime-prevention-councils/jcpc-planning-process/county-databooks

Annie E. Casey Foundation Kids Count Data Center https://datacenter.kidscount.org/

Limitations
- The data presented represents a snapshot of the population, and 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

Figure 1a. Total Population (U.S.Census)

(Line chart showing total population of Hyde County)

- 2016: 5,434
- 2017: 5,240
- 2018: 5,026
- 2019: 4,937
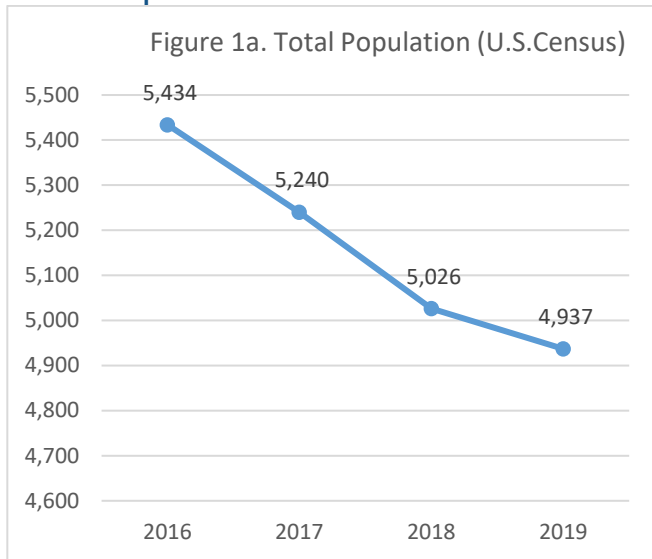
- In 2019, Hyde County had a population estimate of 4,937.

Minority Populations

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

Race/Ethnicity	Hyde	North Carolina	Health ENC Counties
White	66.5	68.7	64.9
Black	29.7	21.4	30.0
Am Indian or Alaska Native	0.1	1.2	1.0
Asian	-	2.9	1.3
Native Hawaiian & Other Pacific Islander	-	0.1	0.1
Multiracial (Two or More Races)	1.0	2.7	3.5
Hispanic or Latino	10.3	9.4	9.6
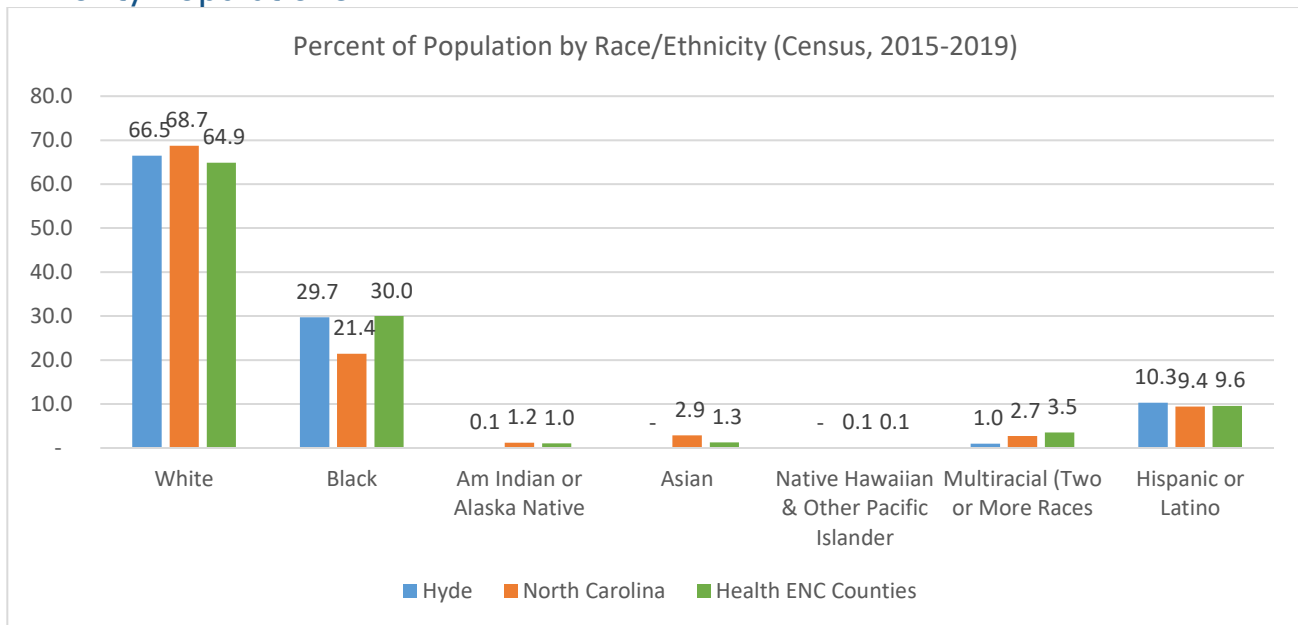
The White population accounts for 66.5% of the total population in Hyde County, with the Black or African American population accounting for 29.7% of the total population. The White population in Hyde County (66.5%) is less than the White population in North Carolina (68.7%) and slightly higher than the Health ENC counties (64.9%). The Black or African American population in Hyde County (29.7%) is higher than the Black or African American population in North Carolina (21.4%) and lower than the Health ENC counties (30.0%). The Hispanic or Latino population comprises 10.3% of Hyde County which is significantly higher than North Carolina (9.4%) and Health ENC Counties (9.6%)

Population Growth

- The projected population decline for Hyde County for 2029 is estimated at 4,879 persons
- From 2010 to 2019, the total population of Hyde County has decreased by an overall 15%

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

Year	Population
2010	5,817
2016	5,434
2017	5,240
2018	5,026
2019	4,937
Projected 2029	4,879

Age Groups

Percent of the Population by Age Group

Age Group	Hyde	NC	HealthENC
Under age 5	4.9	5.9	6.3
Age 5-14	11.3	12.6	12.7
Age 15-24	10.7	13.5	14.9
Age 25-34	11.1	13.3	13.5
Age 35-44	16.4	12.6	11.7
Age 45-54	12.9	13.4	12.2
Age 55-64	13.4	12.8	12.8
Age 65-74	12.4	9.5	9.4
Age 75-84	6.2	4.6	4.7
Age 85+	0.7	1.7	1.6

Military/Veteran Populations

Military Population

Percent of Population in Military (2015-2019)

Location	Percent
Hyde	-
North Carolina	1.1
Health ENC Counties	4.8
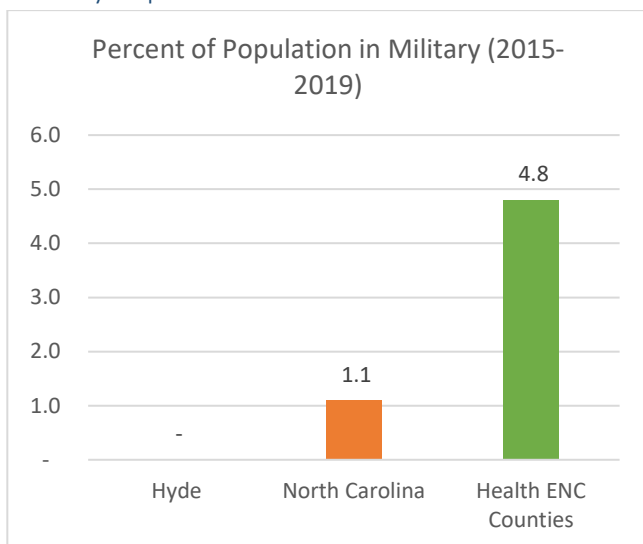
In 2015-2019, Hyde County has a share of residents in the military (0.0%) compared to North Carolina (1.1%) and counties in the Health ENC region (4.8%). Across four time periods, the percent of the population in the military for Hyde County is higher than in North Carolina and lower than the Health ENC region.

Veteran Population

The veteran population is given as a percent of the civilian population aged 18 years and older and this data is used for policy analyses, to develop programs, and to create budgets for veteran programs and facilities. Hyde County has a veteran population of 5.1% in 2015-2019, compared to 8.4% for North Carolina and 12.1% for Health ENC counties.

Percent of Population that are Veterans (2015-2019)

Location	Percent
Hyde	5.1
North Carolina	8.4
Health ENC Counties	12.1

Birth Rates

Live Birth Rate per 1,000 Population (NC SCHS)

Year	Hyde	NC	HEALTHENC
2016	7.1	11.9	13.1
2017	6.3	11.7	13.1
2018	6.7	11.5	12.7
2019	7.5	11.3	12.7
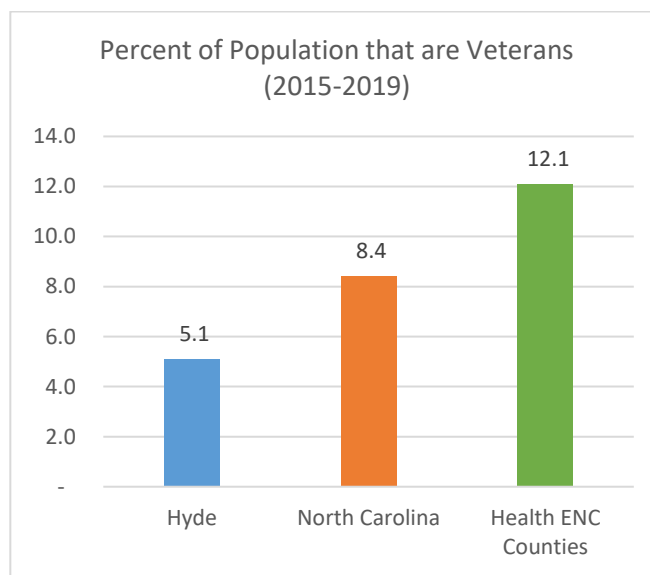
Birth rates are important measures of population health. The birth rate is usually the dominant factor in determining the rate of population growth; however, population growth is also driven by the age structure of the population (e.g., deaths), immigration and emigration. The Hyde County birth rate demonstrated an overall increase over the period presented, with a differing trend seen in the Region and the state.

Analysis of Demographic Data

The total population of Hyde County in 2019 was approximately 4,937. The population of Hyde County is estimated to decreased at 4,879 persons over the next decade and has already seen an overall decrease of 15% of the total population from 2010 to 2019. The White population of Hyde County is less than the White population in North Carolina and slightly higher than the Health ENC counties and accounts for almost one-third of the total population. Whereas the Black or African American population in Hyde County is higher than the Black or African American population in North Carolina and less than the Health ENC counties. The Hispanic or Latino population is significantly higher than both North Carolina and Health ENC counties.

The largest percent of the population are ages 35 – 44 with a median age of 41 years. In 2015-2019 Hyde County had a 0% share of residents in the military and a 5.1% share of the veteran population, both which are lower than in North Carolina and for Health ENC counties. Birth rates have been increasing from 2016 – 2019 at a higher rate than seen in the Region and the State.

Chapter 3 Socioeconomic Profile

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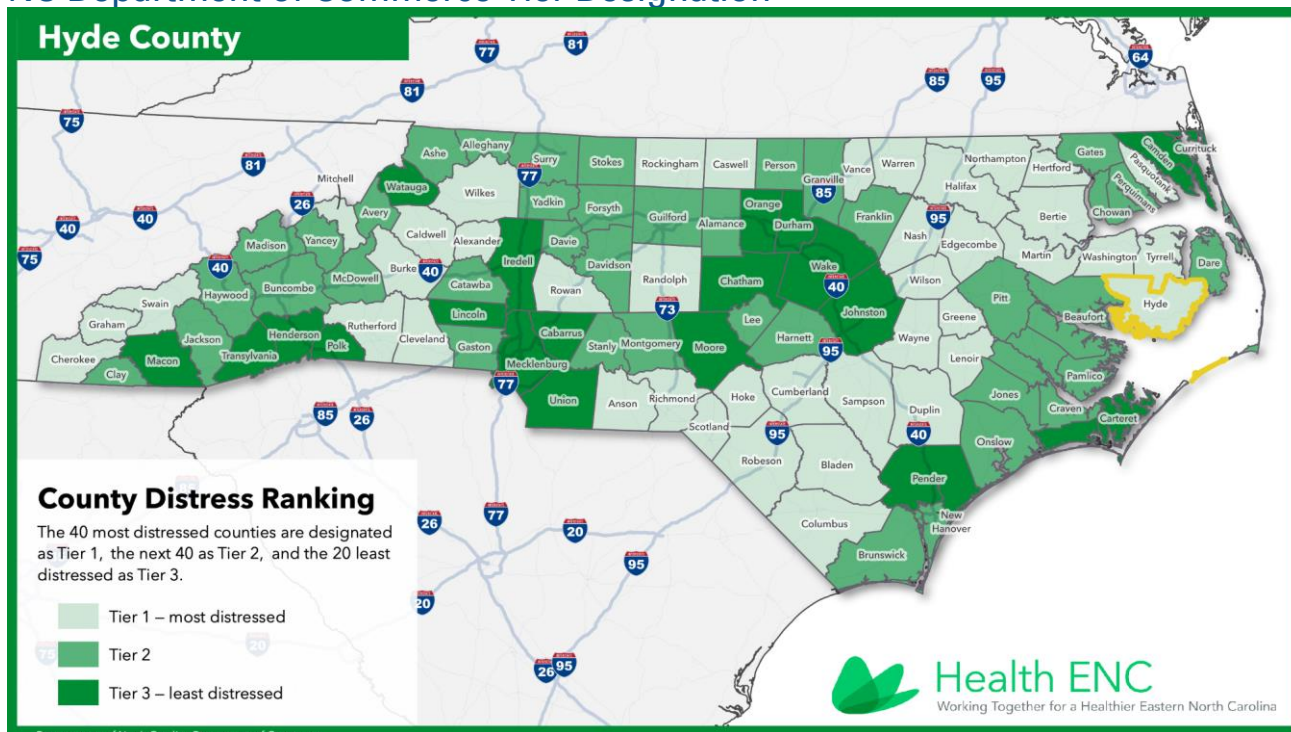
The North Carolina Department of Commerce annually ranks the state's 100 counties based on economic well-being and assigns each a Tier designation. The 40 most distressed counties are designated as Tier 1, the next 40 as Tier 2 and the 20 least distressed as Tier 3. Hyde County has been assigned a Tier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

Hyde County has been assigned a Tier 1 designation for 2022.
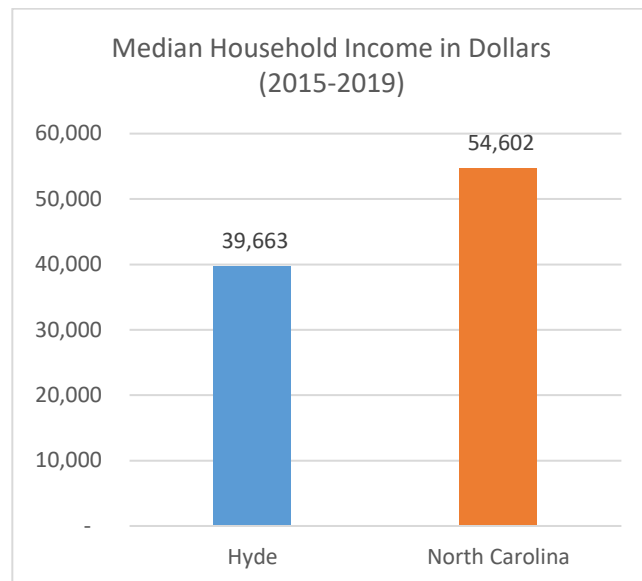
County Tiers are calculated using four factors:

- 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.

Compared to counties in the Health ENC region Hyde County has a low median household income. In the region, 9 counties have a lower median household income than Hyde County.

- The median household income in Hyde County ($39,663), which is much lower than the median household income in North Carolina ($54,602).

Median Household Income in Dollars (2015-2019)

	Hyde	North Carolina
	39,663	54,602

Poverty

Percent People Living Below Poverty Level (2015-2019)

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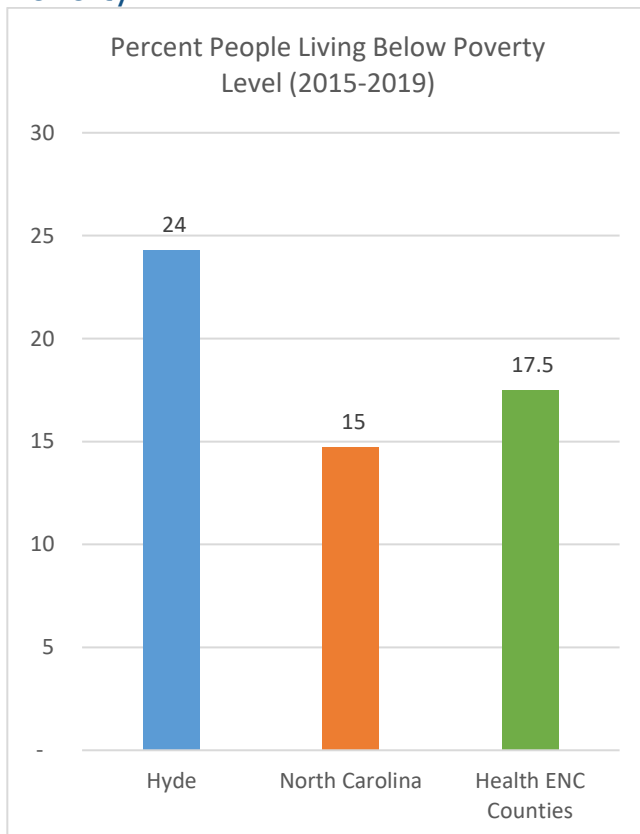
Federal poverty thresholds are set every year by the Census Bureau and vary by size of family and ages of family members. A high poverty rate is both a cause and a consequence of poor economic conditions. Children in poverty are more likely to have physical health problems, behavioral problems, and emotional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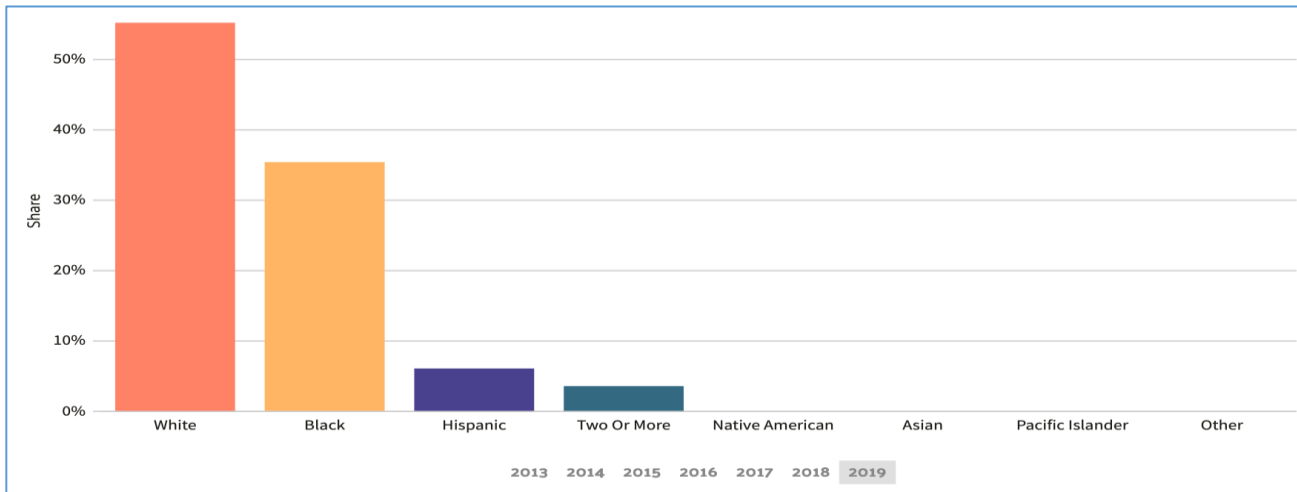
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Poverty by Race and Ethnicity

The most common racial or ethnic group living below the poverty line in Hyde County, NC is White, followed by Black 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 in Poverty

The rate of children below the poverty level is much higher for Hyde County when compared with N.C. and the Health ENC Counties and vice versa for older adults when compared with N.C. and the Health ENC Counties.
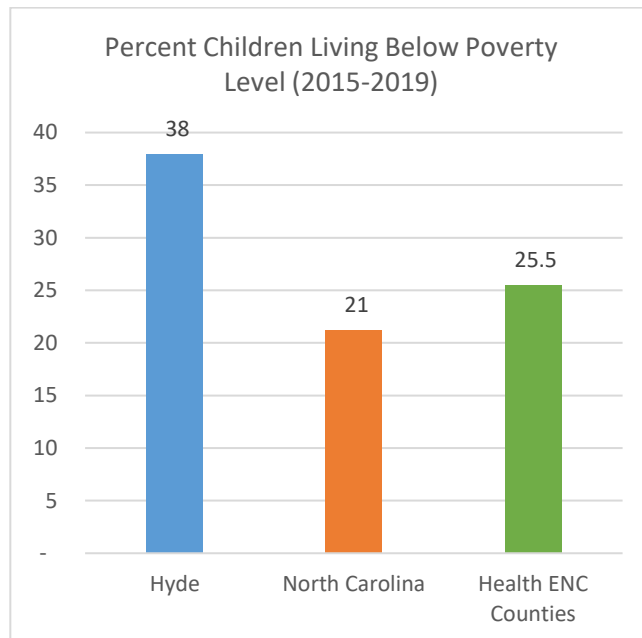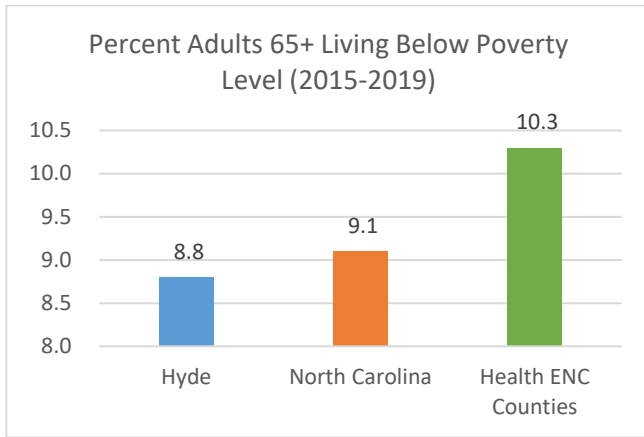
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Older Adults in Poverty

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

Category	Percent
Hyde	8.8
North Carolina	9.1
Health ENC Counties	10.3

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

Disabled People in Poverty

The Census American Community Survey does not provide an estimate for the percent of disabled people living in poverty for Hyde County.
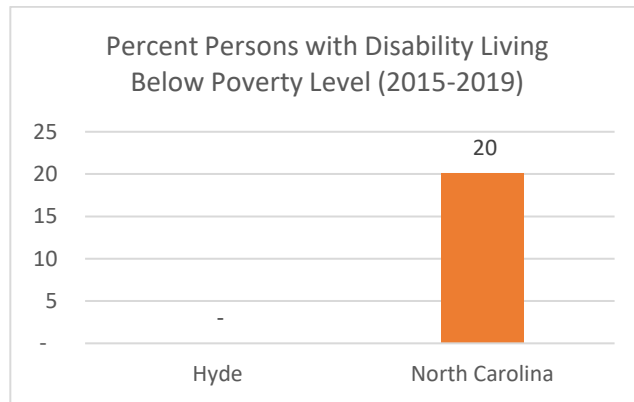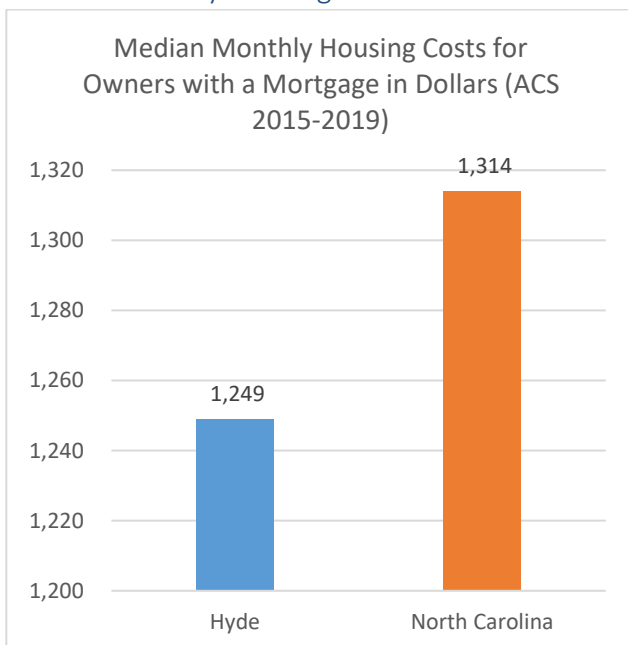
Percent Persons with Disability Living Below Poverty Level (2015-2019)

Category	Percent
Hyde	-
North Carolina	20

Housing

Median Monthly Housing Costs

Median Monthly Housing Costs for Owners with a Mortgage in Dollars (ACS 2015-2019)

Category	Dollars
Hyde	1,249
North Carolina	1,314

The average household size in Hyde County is 2.11 people per household (owners) and 2.89 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).

High costs of homeownership with a mortgage can strain both homeowners and the local housing market. This figure shows mortgaged owners median monthly household costs in the Health ENC region. In Hyde County, the median housing costs for homeowners with a mortgage is $1,249. This is slightly lower than the North Carolina value of $1,314 and is lower than 13 counties in the Health ENC region.

Median Monthly Household Costs in Hyde County and Surrounding Counties
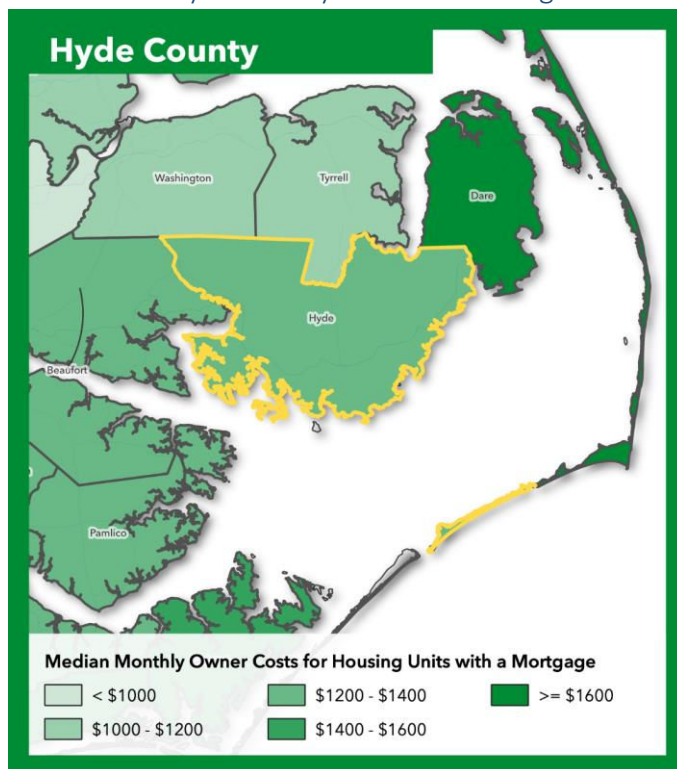
Severe Housing Problems

- Safe and affordable housing is an essential component of healthy communities, and the effects of housing problems are widespread.
- Housing problems include overcrowding, high housing costs, lack of kitchen, or lack of plumbing facilities
- Slightly more than 14.0% of households in Hyde County have severe housing problems, compared to 15.0% in North Carolina and 16.1% in Health ENC Counties.

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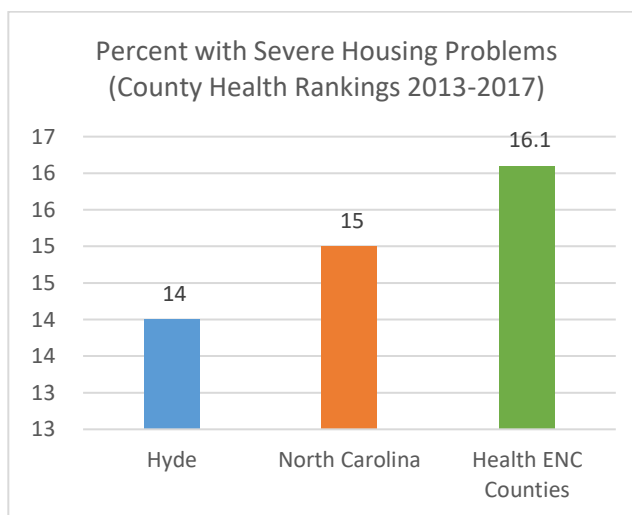
Food Insecurity

Households with SNAP Benefits

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

Hyde	North Carolina	Health ENC Counties
20	13	16.7
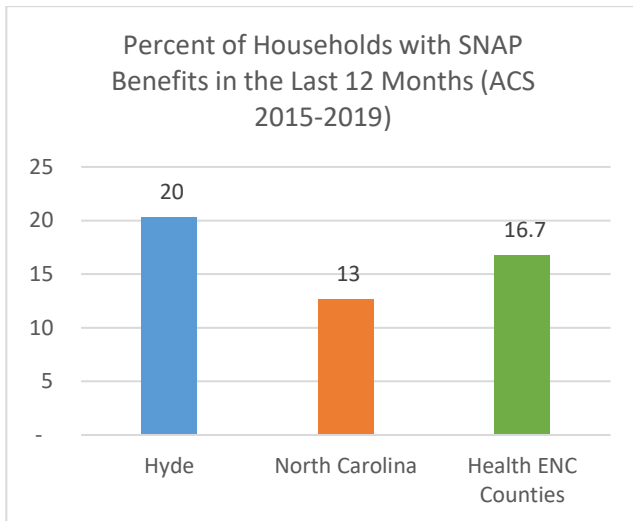
The Supplemental Nutrition Assistance Program (SNAP) is a federal assistance program that provides low-income families with electronic benefit transfers (EBTs) that can be used to purchase food. The goal of the program is to increase food security and reduce hunger by increasing access to nutritious food.

This figure shows the percent of households with children that participate in SNAP. The rate for Hyde County, 20%, is slightly higher than the state value of 13% and the Health ENC region value of 16.7%.

Education

Educational Attainment

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

- In Hyde County the percent of residents 25 or older with a high school degree or higher was lower (80.8%) than the state value (87.8%) and the Health ENC region (86.6%)
- Percent with a higher education attainment in Hyde County was lower (9.2%) compared to N.C. (31.3%) and Health ENC region (22.0%)

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

	Hyde	North Carolina	Health ENC Counties
With a High School Degree or Higher	80.8	87.8	86.6
With a Bachelors Degree or Higher	9.2	31.3	22.0
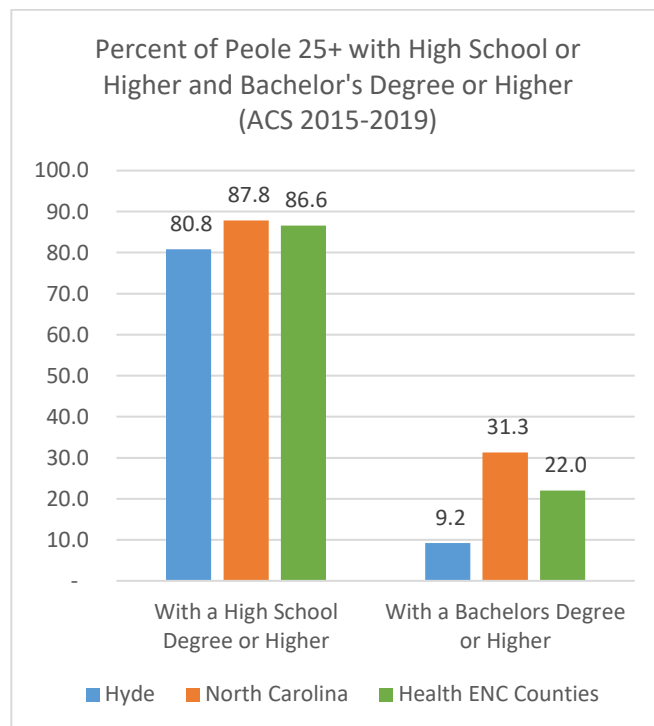
High School Drop Out Rate

High School Drop Outs per 100 Students (NC DPI)

	2016-17	2017-18	2018-19	2019-20
Hyde County	2.2	0.6	2.4	0.7
NC	2.3	2.2	2.0	1.5
HEALTHENC	2.4	2.2	2.0	1.4
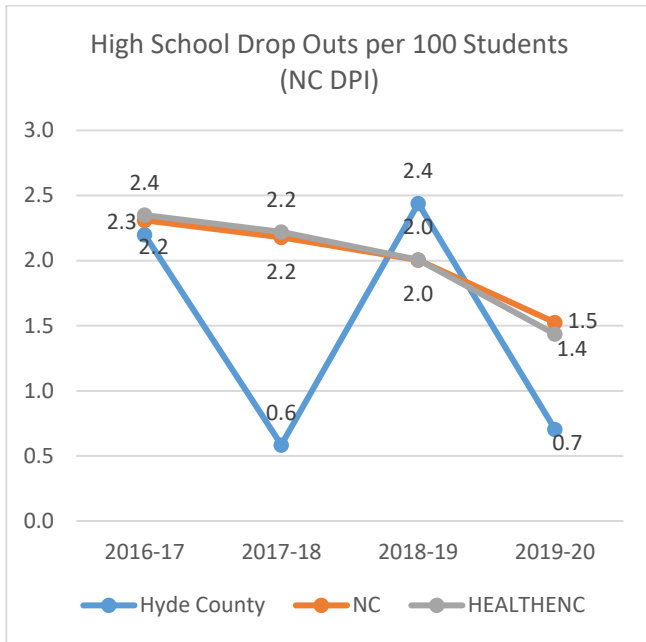
High school dropouts earn less income than high school and college graduates and are more likely to be unemployed. High school dropouts are generally less healthy and require more medical care. Further, high school dropout rates are linked with heightened criminal activity and incarceration rates, influencing a community's economic, social, and civic health.

- Hyde County's high school dropout rate was 0.7% in 2019-2020, which lower than the rate in North Carolina (1.5%) and the Health ENC region (1.4%)
- Hyde County's high school dropout rate has been on a decline over the past four measurement periods

High School Suspension Rate

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

- Hyde County's rate of high school suspension (31.4 per 100 students) was higher than North Carolina's rate (11.6) but lower than the Health ENC counties (15.5) in 2019-2020

High School Suspensions per 100 Students (NC DPI)

	2016-17	2017-18	2018-19	2019-20
Hyde County	25.0	21.6	36.4	31.4
NC	18.2	17.9	15.0	11.6
HEALTHENC	24.1	23.0	20.8	15.5

Transportation

Percent Workers Who Drive Alone to Work (ACS 2015-2019)

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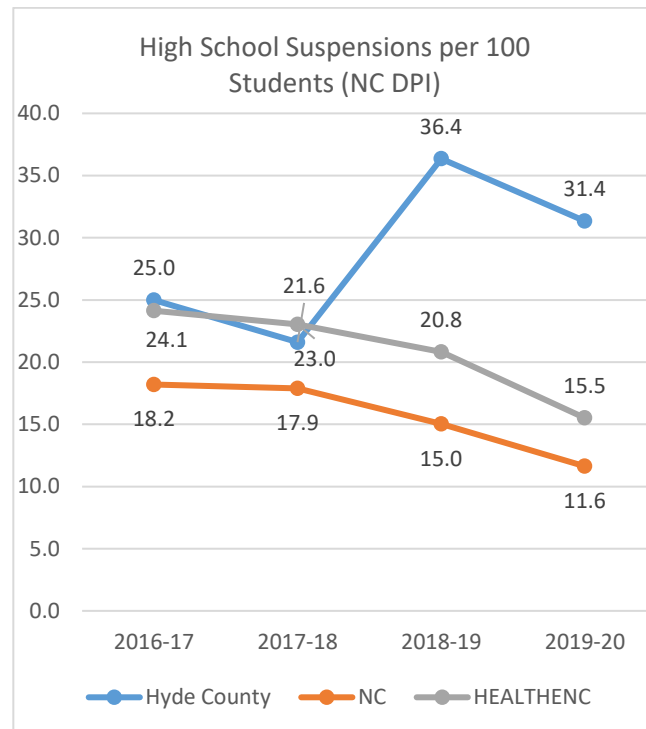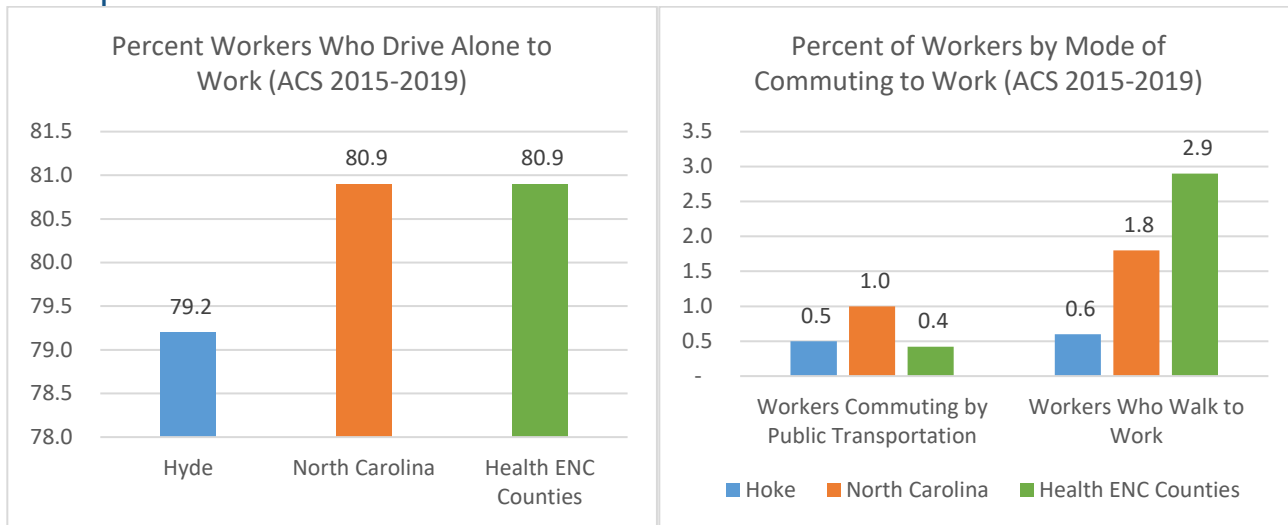
Public transportation offers mobility, particularly to people without cars. Transit can help bridge the spatial divide between people and jobs, services, and training opportunities. Public transportation also reduces fuel consumption, minimizes air pollution, and relieves traffic congestion. Walking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

- In Hyde County, an estimated 0.4% of residents commute to work by public transportation, compared to the state value of 1.0%. Approximately 2.3% of residents walk to work, which was higher than the state value of 1.8%. An estimated 79.2% of workers 16 and older drive alone to work, compared to 80.9% in N.C.

Crime and Safety

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

- From 2016 to 2018, the violent crime rate in Hyde County decreased from 183.5 to 86.1. Data for 2019 were unavailable
- During the same time period, the property crime rate decreased from 2362.1 to 2051.1, which was lower than the N.C. rate

Juvenile Crime

Juvenile Delinquent Rate per 1,000 Pop Age 6-15 (for 2020 Age 6-17)
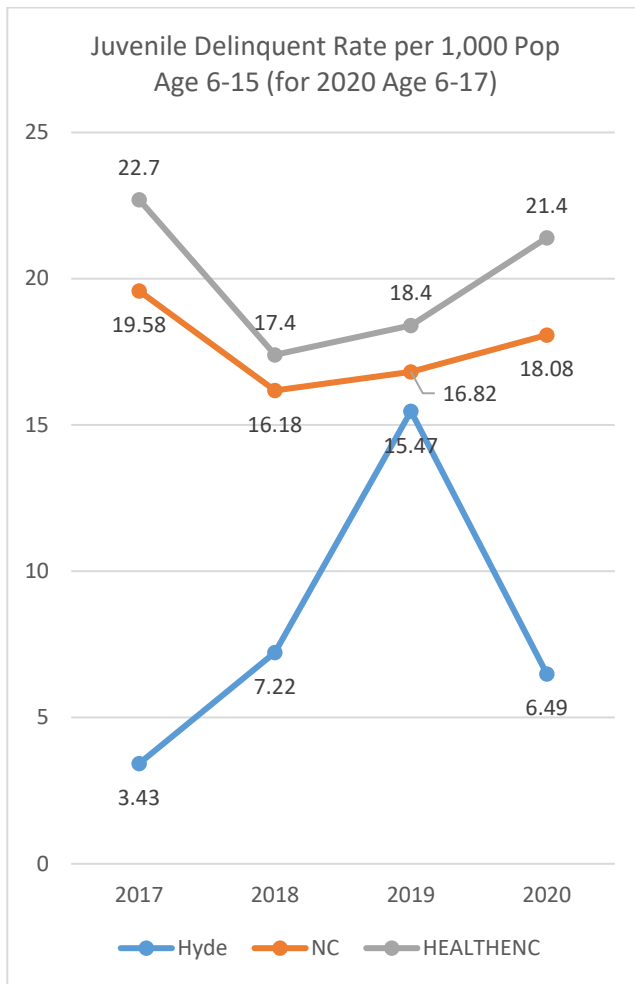
Youth who commit a crime may not gain the educational credentials necessary to secure employment and succeed later in life. Negative peer influences, history of abuse/neglect, mental health issues, and significant family problems increase the risk of juvenile arrest. The juvenile justice system aims 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.

The 2017 juvenile undisciplined rate in Hyde County (0.28) was lower than the rate in North Carolina (1.53) and the Health ENC region (1.1).

The juvenile crime rate in Hyde County remained constant from 2018 to 2020. The juvenile delinquent rate for Hyde County (6.49) in 2020 was lower than North Carolina (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 child abuse rate in Hyde County has been inconsistent over the past three measurement periods. The 2018 child abuse rate in Hyde County (9.2 per 1,000 population) was higher than North Carolina (8.0) and the health ENC (8.8)

Child Abuse Reports Substantiated Rate per 1,000 Population Age 0-18

Incarceration

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

Hyde: 413.1, 405.9, 212.2, 252.7
NC: 369, 361.4, 347.4, 304.2
HEALTHENC: 416, 412.2, 390.4, 345.2

2016-2017, 2017-2018, 2018-2019, 2019-2020

— Hyde — NC — HEALTHENC
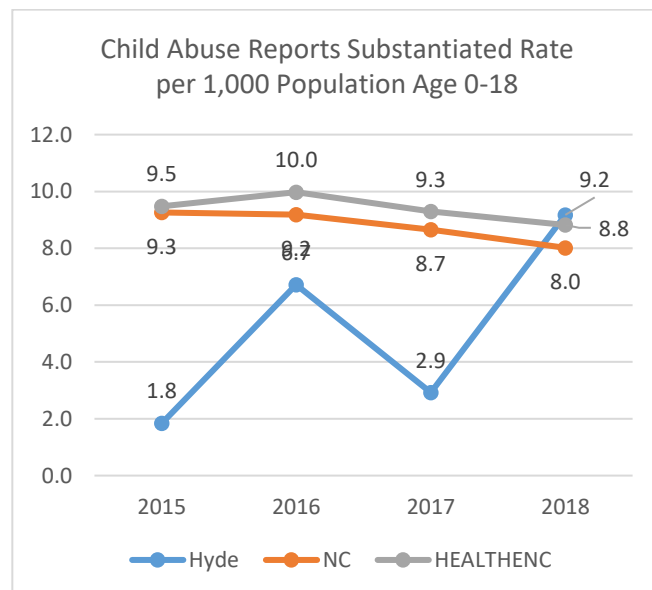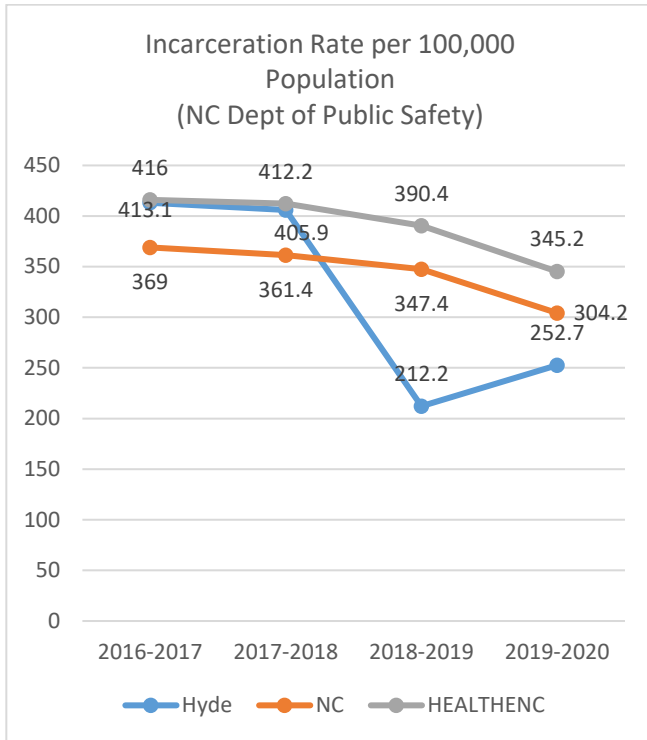
According to the U.S. Bureau of Justice Statistics, approximately one out of 100 adults in the U.S. are in jail or prison. Conditions in jails and prisons can lead to an increased risk of infectious diseases such as tuberculosis and hepatitis C, as well as assault from other inmates. After incarceration, 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 Hyde County has decreased except for 2019-2020 when it went up
- In 2019-2020, the incarceration rate in Hyde County was lower (252.7 per 1,000 population) than N.C. (304.2) and the Health ENC region (345.2)

Civic/Political Engagement

Exercising the right to vote allows a community to choose elected officials and hold them accountable. Voting ensures that all citizens have the opportunity to voice their opinions on issues such as the use of tax dollars, civil rights and foreign policy. By voting, individuals shape their communities and influence the next generation of society. A high level of voter turnout indicates that citizens are involved and interested in who represents them in the political system.
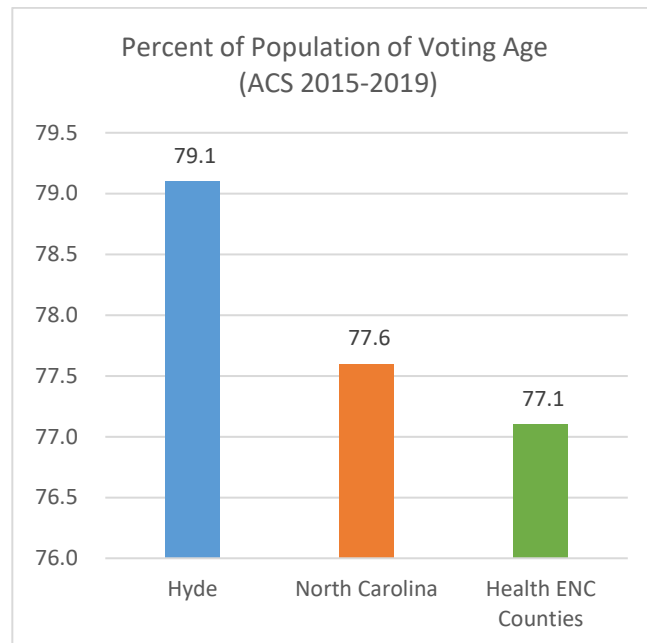
- Hyde County has a higher percent of residents of voting age (79.1%) than North Carolina (77.6%) and the Health ENC Counties (77.1%)

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

Hyde: 79.1
North Carolina: 77.6
Health ENC Counties: 77.1

Analysis of Socioeconomic Profile

Hyde County has been designated as Tier 1 – most distressed status for 2021 and 2022 out of the state's 100 counties based upon the economic well-being of the county. The median household income of Hyde County is 28% lower than the median household income in North Carolina. Almost a quarter of the population of Hyde County lives below the poverty level. With the most common racial or ethnic group living below the poverty line being White, followed by Black and Hispanic. The rate of children below the poverty line is 17% higher compared with N.C. and 12.5% higher than the Health ENC Counties. The rate of adults age 65+ years living in poverty is 0.3% lower in Hyde County when compared with NC and the Health ENC counties by 1.5%.

The average household size in Hyde County is 2.11 people per household (owners) and 2.89 people per household (renters). This value is slightly compared with North Carolina owners and slightly higher for renters. Mortgage homeowner's average monthly household costs is slightly lower than in North Carolina and in 13 counties in the Health ENC region by an average difference of $65 per month. Approximately 14% of households in Hyde County have severe housing problems. The rate of households with children that participate in Snap is 20% which is 7% higher than N.C. and 3.3% higher than the Health ENC region.

Hyde County's high school dropout rate has declined over the past four measurement periods and in 2019-2020 was lower than the rate in North Carolina and the Health ENC region by half at 0.7%.

Most workers 16 and older in Hyde County drive alone to work which is slightly lower compared to N.C. Hyde County also had a lower percentage of residents who commuted by public transportation, 0.6% lower compared to N.C. The percentage of residents who walk to work was higher in Hyde County compared to N.C. by 0.5%.

Violent crime in Hyde County has decreased by 53% from 2016-2018 and property crime rate has decreased by 13% during the same time period. The 2017 juvenile undisciplined rate in Hyde County (0.28) was approximately 5 to 4 times lower than the rate in North Carolina (1.53) and the Health ENC region (1.1), respectively. The juvenile crime rate in Hyde County remained constant from 2018 to 2020. The juvenile delinquent rate for Hyde County (6.49) in 2020 was almost 3 times lower than North Carolina (18.08) and the Health ENC region (21.4). The rate of child abuse in Hyde County has been inconsistent over the past three measurement periods. The 2018 child abuse rate in Hyde County (9.2 per 1,000 population) was higher than North Carolina (8.0) and the health ENC (8.8). The incarceration rate in Hyde County has decreased over the past four measurement periods except of for an increase in 2019 – 2020. The incarceration rate in 2019-23020 remains lower than in N.C. and the Health ENC region.

Hyde County has a higher percent of residents of voting age than North Carolina and the Health ENC counties by 1.5% and 2% respectively.

Chapter 4 Clinical Care Profile

Health Insurance Coverage

Percent Age 0-64 with Health Insurance (ACS 2015-2019)
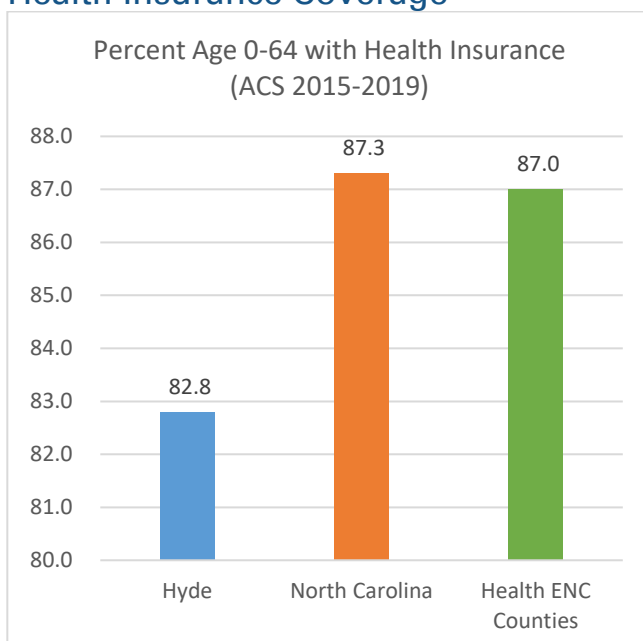
Medical costs in the United States are very high. People without health insurance may not be able to afford medical treatment or prescription drugs. They are also less likely to get routine checkups and screenings, so if they do become ill, they may not seek treatment until the condition is more advanced, and therefore more difficult and costly to treat.

- Nearly 18% of the population 0-64 years of age in Hyde County are uninsured
- The rate of individuals aged 0-64 years old that have health insurance coverage in Hyde County was 82.8%, which was lower than the rate for North Carolina (87.3%) and the Health ENC region (87.0%)

Government Health Insurance Only Coverage – Medicaid, Medicare, Tricare

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

- In Hyde County, 16.4% of the population report receives health insurance coverage through Medicaid, 3.6% Medicare and 0.8% Tricare

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

Receiving Medicaid Only: Hyde 16.4, North Carolina 13.4, Health ENC Counties 15.8
Receiving Medicare Only: Hyde 3.6, North Carolina 5.5, Health ENC Counties 5.0
Receiving Tricare Only: Hyde 0.8, North Carolina 0.4, Health ENC Counties 0.6

Legend: Hyde | North Carolina | Health ENC Counties
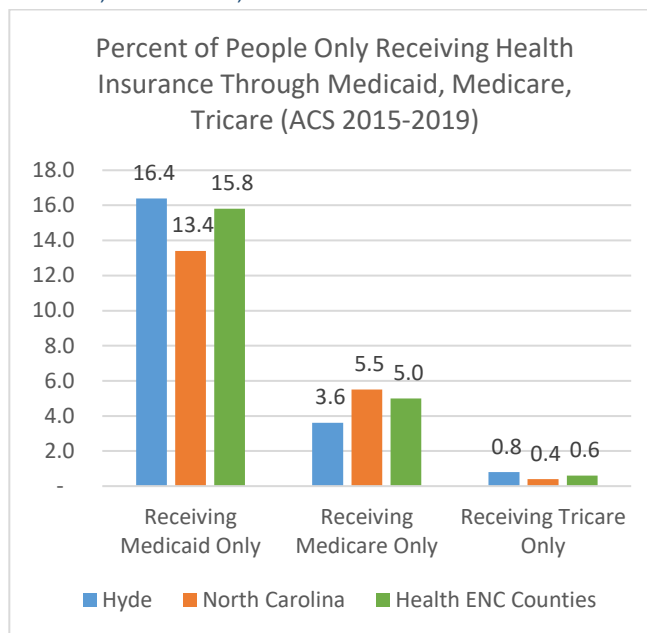
Primary Care Practitioners

Population per Primary Care Practitioner, North Carolina, 2017

Camden (0 PCPs) | Anson | Northampton | Warren | Franklin | Gates | Tyrrell

Population per Primary Care Practitioner

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. Physicia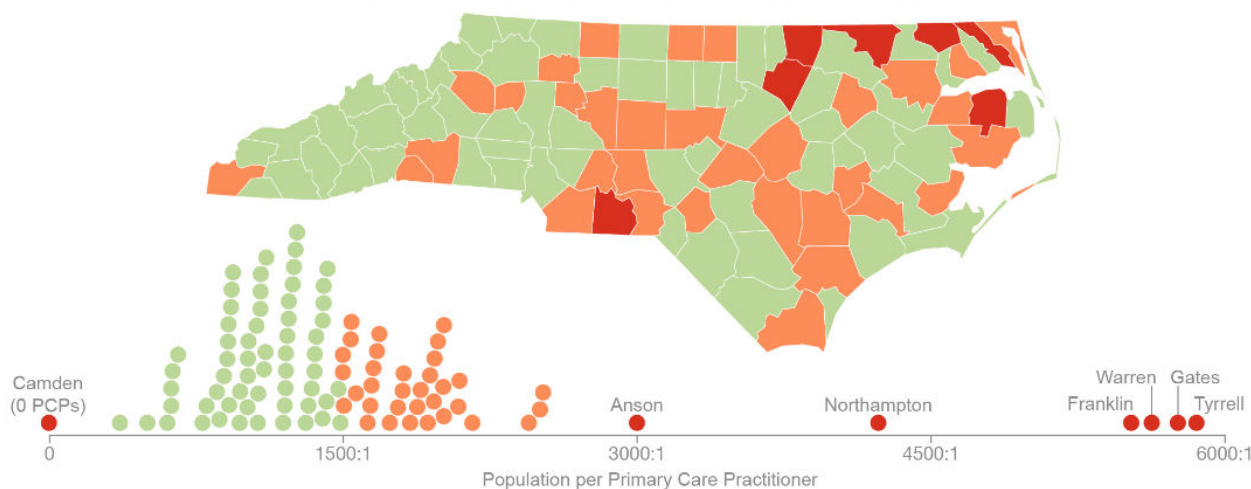ns with a primary area of practice of obstetrics/gynecology were weighted as 0.25 of a full-time equivalent (FTE) primary care practitioner. All other primary care physicians were weighted as 1 FTE. Primary care physician assistants, nurse practitioners, and certified nurse midwives were weighted as 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

SHEPS HEALTH WORKFORCE NC

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.
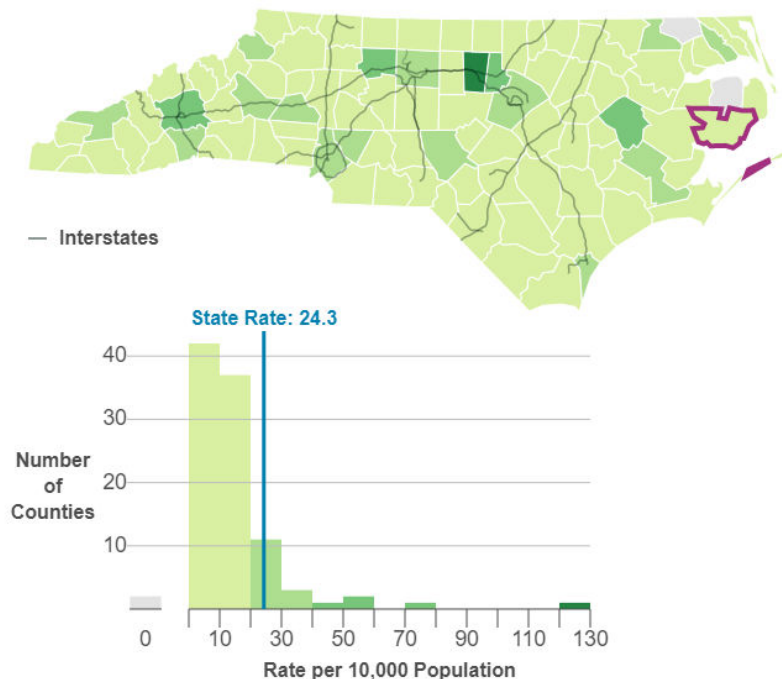
On the map above, Hyde County is shaded in orange, a color that indicates the county is close to, but not quite, meeting the NC Institute of Medicine's (NCIOM) target ratio of 1 primary care provider to every 1,500 people.

Currently, 60% of NC's 100 counties meet the NCIOM's target. As shown in this figure, 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.
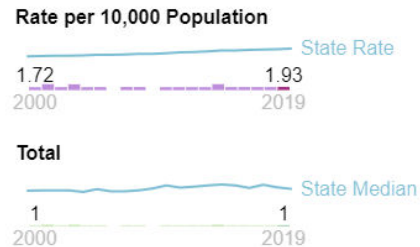
The NCIOM definition of primary care clinician includes physicians, nurse practitioners (NPs), physician assistants (PAs) and certified nurse midwives (CNMs).

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

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

— Interstates

State Rate: 24.3

Number of Counties

Rate per 10,000 Population

Profession Demographics for Hyde County

Rate per 10,000 Population

State Rate

1.72   1.93
2000   2019

Total

State Median

1   1
2000   2019

SHEPS HEALTH WORKFORCE NC

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/.

As shown in this figure, the number of physicians per 10,000 population in Hyde County has increased from 1.72 physicians in 2000 to 1.93 in 2019 which is much below the state rate of 24.3 per 10,000 population.

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 rate of individuals aged 0-64 years old that have health insurance coverage in Hyde County is 4.5% lower than the rate for North Carolina and 4.2% lower than the Health ENC region with nearly 18% of the population being uninsured. In Hyde County, 16.4% of the population report receives health insurance coverage through Medicaid, 3.6% Medicare and 0.8% Tricare. The percentage of those that receive health insurance through Medicaid and Tricare are higher in Hyde County than N.C. and the Health ENC Counties while the percentage of those receiving Medicare is lower in Hyde County comparatively.

Hyde County is close but does not currently meet the NC Institute of Medicine's (NCIOM) target ratio of 1 primary care provider to every 1,500 people. The number of physicians per 10,000 population in Hyde County has increased 12% from 1.72 physicians in 2000 to 1.93 in 2019 but is still below the state rate of 24.3 per 10,000 population.

Chapter 5 Chronic and Communicable Disease Profile

Leading Causes of Death

	Hyde County				North Carolina				Health ENC Counties		
Rank	Cause	Deaths	Rate	Rank	Cause	Deaths	Rate	Rank	Cause	Deaths	Rate
1	Cancer	13	263.32	1	Cancer	19,963	190.34	1	Heart Disease	4546	210.2
2	Heart Disease	11	222.81	2	Heart Disease	19,661	187.46	2	Cancer	4345	200.91
3	Alzheimers Disease	8	162.04	3	Chronic Lower Respiratory Diseases	5,411	51.59	3	Cerebrovascular Disease	1215	56.18
4	Other Unintentional Injuries	6	121.53	4	Cerebrovascular Disease	5,203	49.61	4	Chronic Lower Respiratory Diseases	1114	51.51
5	Chronic Lower Respiratory Diseases	5	101.28	5	Other Unintentional Injuries	4,683	44.65	5	Other Unintentional Injuries	1006	46.52
6	Chronic Liver Disease and Cirrhosis	3	60.77	6	Alzheimers Disease	4,508	42.98	6	Alzheimers Disease	918	42.45
7	Diabetes Mellitus	3	60.77	7	Diabetes Mellitus	3,127	29.81	7	Diabetes Mellitus	838	38.75
8	Nephritis Nephrotic Syndrome and Nephrosis	3	60.77	8	Nephritis Nephrotic Syndrome and Nephrosis	2,121	20.22	8	Nephritis Nephrotic Syndrome and Nephrosis	476	22.01
9	Septicemia	3	60.77	9	Pneumonia and Influenza	1,730	16.49	9	Motor Vehicle Injuries	460	21.27
10	Motor Vehicle Injuries	2	40.51	10	Motor Vehicle Injuries	1,608	15.33	10	Pneumonia and Influenza	382	17.66

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

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

This table shows the leading causes of mortality in Hyde County, North Carolina, and Health ENC Counties in 2019.

Many of these chronic conditions death rates are higher than the state and the Health ENC County Region rates.

Leading Causes of Injury Death

Leading Causes of Injury Death 2016 to 2019 HYDE			Leading Causes of Injury Hospitalization 2016 to 2019 HYDE			Leading Causes of Injury ED Visits 2016 to 2019 HYDE		
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#
1	Poisoning - Unintentional	10	1	Fall - Unintentional	45	1	Fall - Unintentional	205
2	Fall - Unintentional	4	2	MVT - Unintentional	15	2	Unspecified - Unintentional	123
3	MVT - Unintentional	3	3	Poisoning - Unintentional	10	3	MVT - Unintentional	114
4	Suffocation - Unintentional; Other Transport - Unintentional; Fire/Burn - Unintentional; Cut/Pierce - Assault	1	4	Other Land Transport - Unintentional	4	4	Struck By/Against - Unintentional	68
5		0	5	Struck By/Against - Unintentional; Poisoning - Self-Inflicted; Cut/Pierce - Assault	3	5	Poisoning - Unintentional	41
TOTAL		21	TOTAL		97	TOTAL		900

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

Leading Causes of Hospitalizations

Leading Causes of Injury Death 2016 to 2019 HYDE			Leading Causes of Injury Hospitalization 2016 to 2019 HYDE			Leading Causes of Injury ED Visits 2016 to 2019 HYDE		
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#
1	Poisoning - Unintentional	10	1	Fall - Unintentional	45	1	Fall - Unintentional	205
2	Fall - Unintentional	4	2	MVT - Unintentional	15	2	Unspecified - Unintentional	123
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4	Suffocation - Unintentional; Other Transport - Unintentional; Fire/Burn - Unintentional; Cut/Pierce - Assault	1	4	Other Land Transport - Unintentional	4	4	Struck By/Against - Unintentional	68
5		0	5	Struck By/Against - Unintentional; Poisoning - Self-Inflicted; Cut/Pierce - Assault	3	5	Poisoning - Unintentional	41
TOTAL		21	TOTAL		97	TOTAL		900

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

Leading Causes of Emergency Department Visits

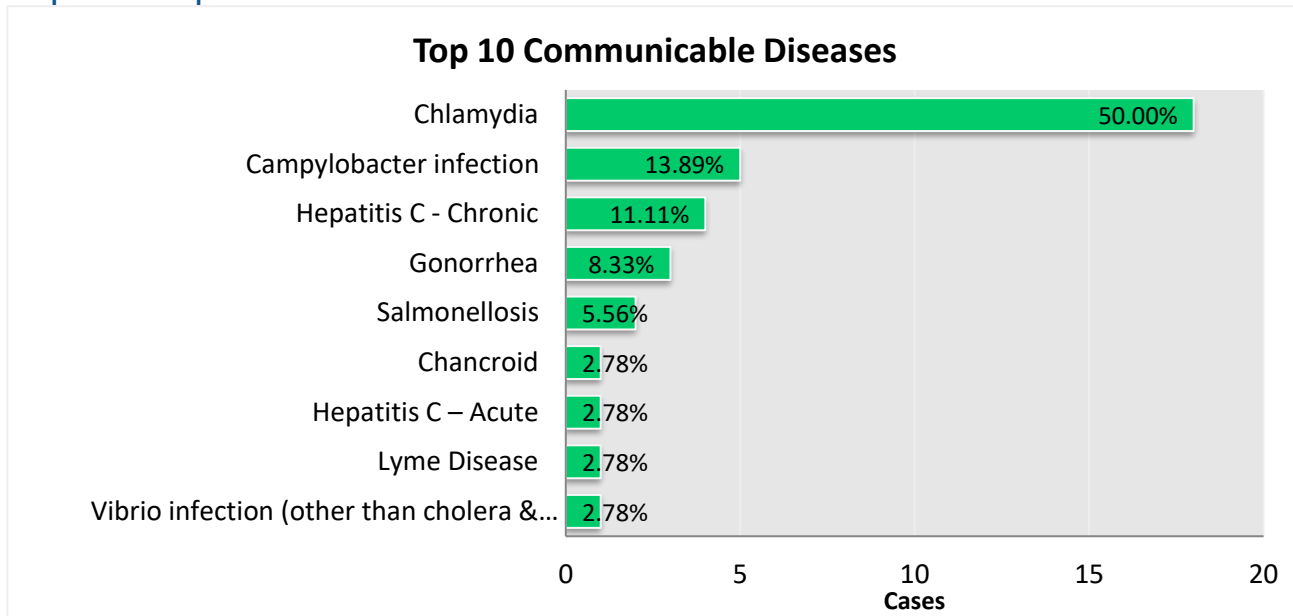| Leading Causes of Injury Death 2016 to 2019 HYDE			Leading Causes of Injury Hospitalization 2016 to 2019 HYDE			Leading Causes of Injury ED Visits 2016 to 2019 HYDE		
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#
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TOTAL		21	TOTAL		97	TOTAL		900

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

Top Ten Reportable Communicable Diseases

Top 10 Communicable Diseases

Disease	Percent
Chlamydia	50.00%
Campylobacter infection	13.89%
Hepatitis C - Chronic	11.11%
Gonorrhea	8.33%
Salmonellosis	5.56%
Chancroid	2.78%
Hepatitis C – Acute	2.78%
Lyme Disease	2.78%
Vibrio infection (other than cholera &…	2.78%

Cases: 0, 5, 10, 15, 20

Note: To view and compare communicable disease rates in your county with NC State-wide rates, reported number of cases, etc., view the custom dashboard
https://NCD3NorthCarolinaDiseaseDataDashboard

- Preventing and controlling the spread of communicable diseases are a top concern among communities.
- The top communicable diseases as reported by NC DHHS in Hyde 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

The leading causes of mortality in 2019 in Hyde County were Cancer with a rate of 263.32, followed by Heart Disease (222.81), Alzheimer's Disease (162.04), Other unintentional injuries (121.53), and Chronic Lower Respiratory Diseases (101.28). Many of these chronic conditions death rates are higher than the state and the Health ENC County Region rates.

The leading cause of Injury Death for Hyde County in 2016-2019 was Poisoning, followed by Fall – Unintentional, and MVT – Unintentional. The leading causes of Injury Hospitalization for the same time period was Fall – Unintentional, followed by MVT – Unintentional, and Poisoning- Unintentional. The leading Causes of Injury ED visits were Fall – Unintentional, Unspecified-Unintentional, and MVT – Unintentional.

In 2018 Chlamydia was the number one reportable communicable disease in Hyde County, comprising half of all reported cases. This is followed by Campylobacter infection at 13.89%, Hepatitis C – Chronic at 11.11%.

# Chapter 6 HNC 2030 Indicator Rankings by Health ENC Regions

Indicators / Measures	Hyde	NC
Health Outcomes		
Premature Death	9,300	7600
Low Birthweight	7%	9%
Health Factors		
Health Behaviors		
Adult Smoking	24%	18%
Adult Obesity	34%	32%
Food environment index	4.1	6.8
Clinical Care		
Uninsured	17%	13%
Primary Care Physicians	5,230 to 1	1400 to 1
Mental Health providers	4,940 to 1	390 to 1
Preventable hospital stays	2,448	4539
Mammography Screening	38%	46%
Flu Vaccinations	51%	52%
Social & Economic Factors		
High School Completion	84%	88%
Some College	51.00%	67.00%
Unemployment	8.60%	3.90%
Social Associations	7.6	11.5
Physical Environment		
Air Pollution - particulate matter	6.4	8.5

Areas to Explore	Areas of Strength

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

Chapter 7 County Health Ranking Indicators

Population Health Model

County Health Rankings model © 2014 UWPHI
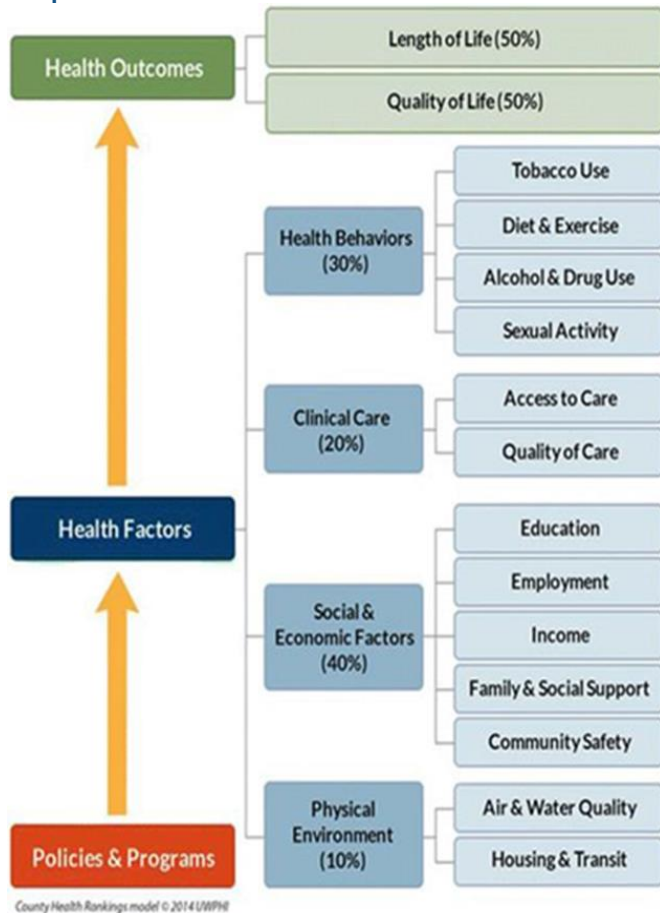
The County Health Rankings are based on a model of community health that emphasizes the many factors that influence how long and how well we live. The Rankings use more than 30 measures that help communities understand how healthy their residents are today (health outcomes) and what will impact their 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

Quality of Life Ranking

Issues Which Have The Highest Impact On Quality Of Life In This County Ranking
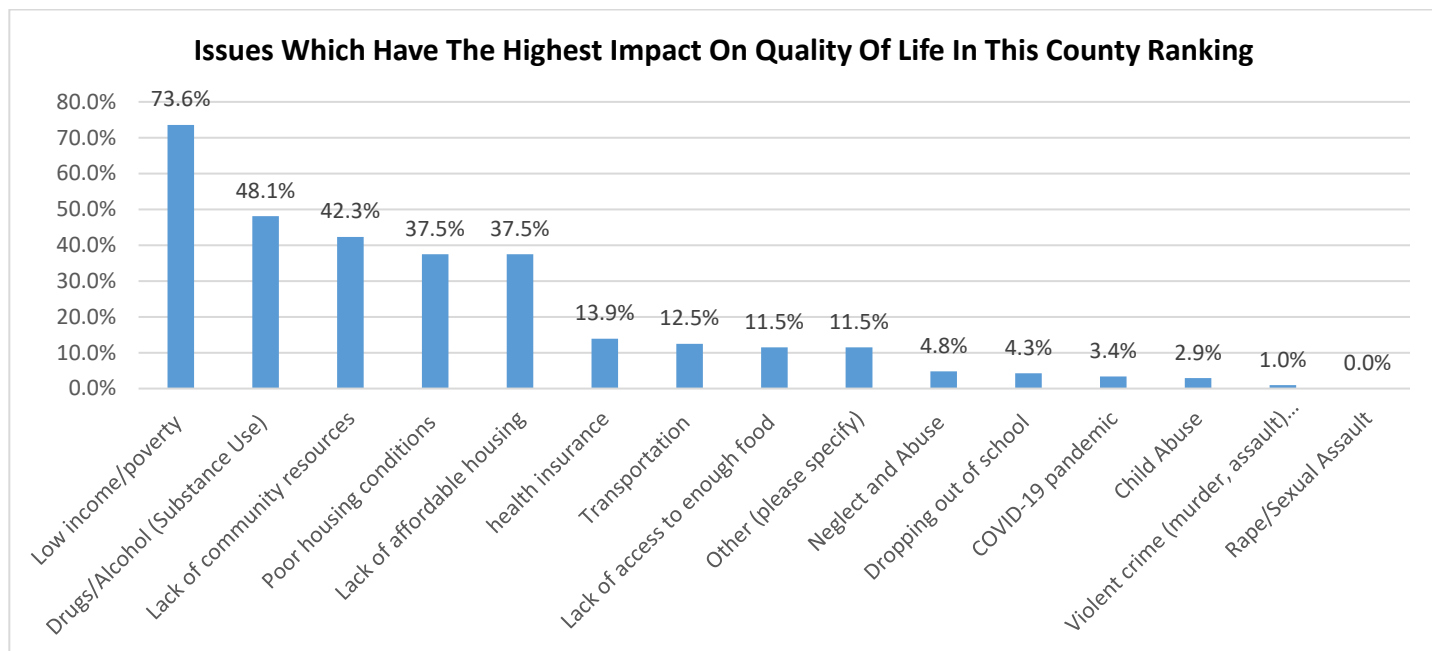
The graph above shows the list of community issues that were ranked by residents as most affecting the quality of life in Hyde County. Low income/ Poverty was the most frequently selected issue and was ranked by 73.6% of survey respondents, followed by Drugs (Substance abuse) (48.1%). Survey respondents ranked Lack of Community Resources (42.3%) as the third issue most affecting quality of life in Hyde County.

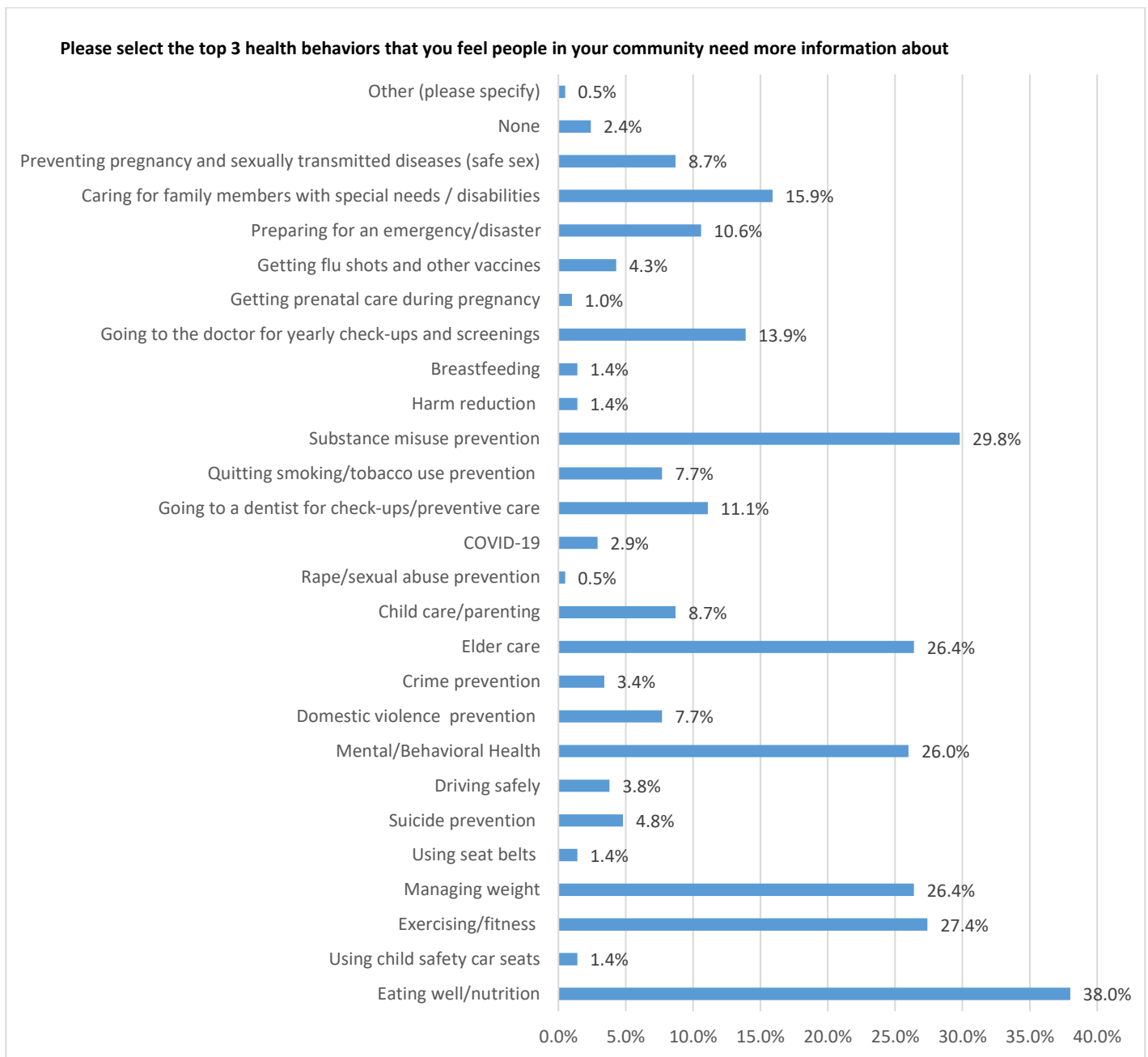## Supporting a Safe and Healthy Lifestyle
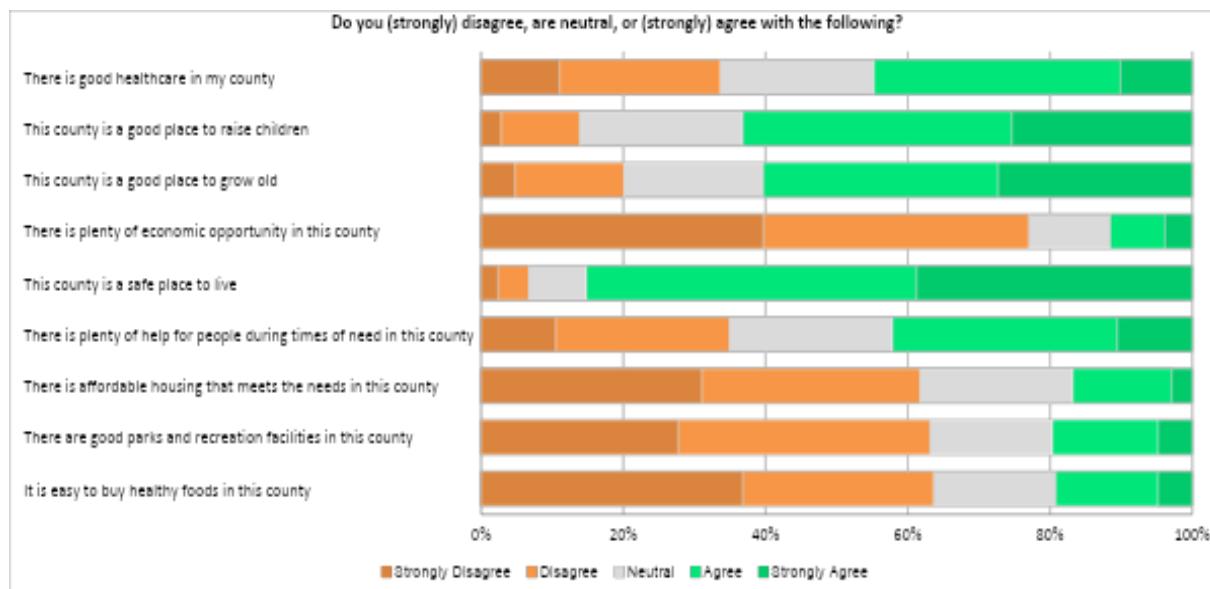
The graph above shows how people responded to certain questions when asked about how they feel or view issues that support a safe and healthy lifestyle in their county. More than 50% of people Agreed or Strongly Agreed that Hyde County is a good place to raise children and that Hyde County is good place to grow old. More than 70% of people either strongly disagreed or disagreed that there is plenty of economic opportunity in Hyde County. Most respondents believe that Hyde County is a safe place to live. More than 60% of participants disagreed or strongly disagreed that Hyde County has affordable housing that meets their needs, Hyde County has good parks and recreation facilities, and that it is easy to buy healthy foods in Hyde County.

Community Improvement and Education

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

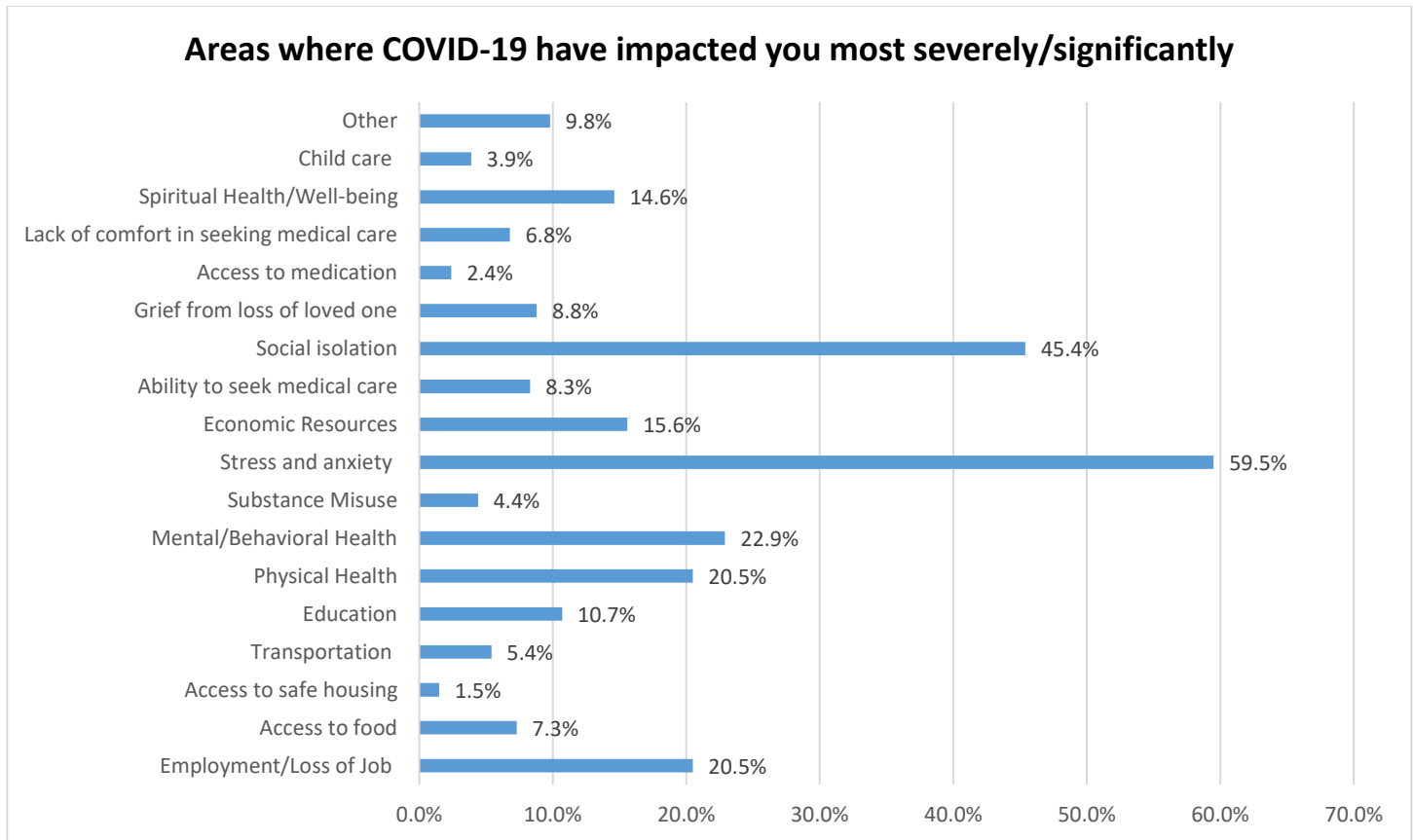| Category	Percentage
Other (please specify)	3.8%
None	0.0%
Healthy family activities	5.8%
Pedestrian and cyclist road safety	1.0%
Road maintenance	9.1%
Higher paying employment	33.2%
Availability of employment	34.6%
Transportation options	4.8%
Positive teen activities	22.1%
Substance Misuse Services/ Recovery Support	7.2%
Better / more recreational facilities (parks, trails, community centers)	32.2%
Counseling / mental and behavioral health / support groups	8.7%
Culturally appropriate health services	50.0%
Number of healthcare providers	12.0%
More affordable / better housing	25.5%
Better/More healthy food choices	19.2%
More affordable health services	8.2%
Services for disabled people	4.3%
Elder care options	27.4%
Child care options	20.7%
Animal control	12.0%

Respondents were asked what they felt are the top 3 services that need the most improvement in their community. 50% of respondents said culturally appropriate health services, followed by availability of employment (34.6%), and higher paying employment (33.2%).

Please select the top 3 health behaviors that you feel people in your community need more information about

Health Behavior	Percentage
Other (please specify)	0.5%
None	2.4%
Preventing pregnancy and sexually transmitted diseases (safe sex)	8.7%
Caring for family members with special needs / disabilities	15.9%
Preparing for an emergency/disaster	10.6%
Getting flu shots and other vaccines	4.3%
Getting prenatal care during pregnancy	1.0%
Going to the doctor for yearly check-ups and screenings	13.9%
Breastfeeding	1.4%
Harm reduction	1.4%
Substance misuse prevention	29.8%
Quitting smoking/tobacco use prevention	7.7%
Going to a dentist for check-ups/preventive care	11.1%
COVID-19	2.9%
Rape/sexual abuse prevention	0.5%
Child care/parenting	8.7%
Elder care	26.4%
Crime prevention	3.4%
Domestic violence prevention	7.7%
Mental/Behavioral Health	26.0%
Driving safely	3.8%
Suicide prevention	4.8%
Using seat belts	1.4%
Managing weight	26.4%
Exercising/fitness	27.4%
Using child safety car seats	1.4%
Eating well/nutrition	38.0%

When asked about the top three health behaviors that they felt people in their community needed more information about, the majority of respondents replied with substance misuse prevention (29.8%), followed by Exercising/fitness (27.4%). 26.4% of respondents replied with both elder care and managing weight as the third most identified health behavior.
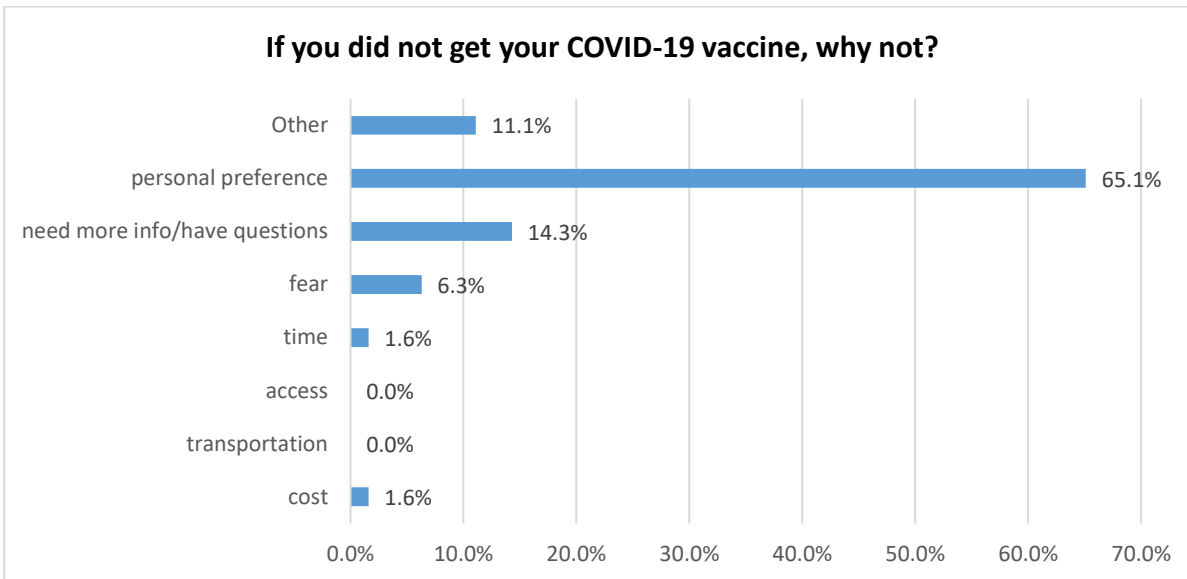
COVID-19

Areas where COVID-19 have impacted you most severely/significantly

Category	Percentage
Other	9.8%
Child care	3.9%
Spiritual Health/Well-being	14.6%
Lack of comfort in seeking medical care	6.8%
Access to medication	2.4%
Grief from loss of loved one	8.8%
Social isolation	45.4%
Ability to seek medical care	8.3%
Economic Resources	15.6%
Stress and anxiety	59.5%
Substance Misuse	4.4%
Mental/Behavioral Health	22.9%
Physical Health	20.5%
Education	10.7%
Transportation	5.4%
Access to safe housing	1.5%
Access to food	7.3%
Employment/Loss of Job	20.5%

The COVID-19 Pandemic has had a significant impact on the residents of Hyde County. Respondents were asked several questions about COVID-19. The graph above shows the responses of participants asked to select the 3 tops areas where COVID-19 has impacted them the most severely/significantly. The majority of participants (59.5%) responded that stress and anxiety has impacted them the most severely/significantly followed by social isolation (45.4%) and mental/behavioral health.

Have you had a COVID-19 vaccine?

Response	Percentage
Yes	67.0%
No	31.1%
Don't know or not sure	1.9%
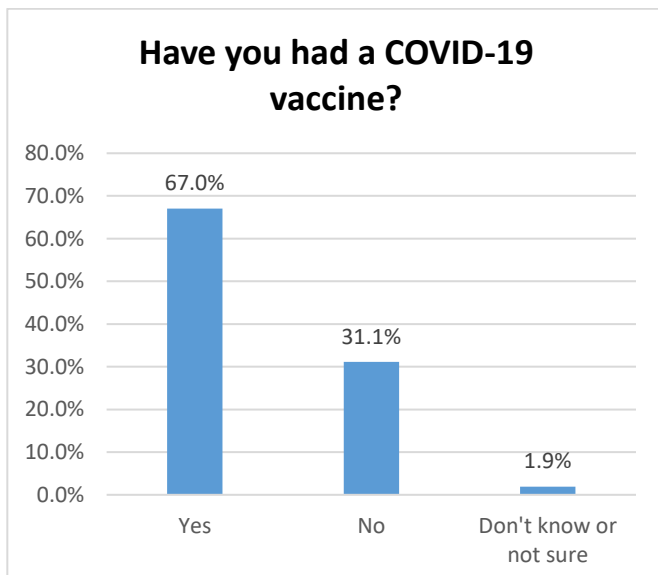
This community survey question asked people if they had received a COVID-19 vaccine.

Between April 1 and June 30, 2021, nearly 67% of participants reported being vaccinated for COVID-19, while 31% had not been vaccinated.

If you did not get your COVID-19 vaccine, why not?

Category	Percentage
Other	11.1%
personal preference	65.1%
need more info/have questions	14.3%
fear	6.3%
time	1.6%
access	0.0%
transportation	0.0%
cost	1.6%

If respondents did not get their COVID-19 vaccine, the majority of respondents, 65.1%, sited personal preference as the reason followed by needing more information or having question (14.3%) and other reasons (11.1%).
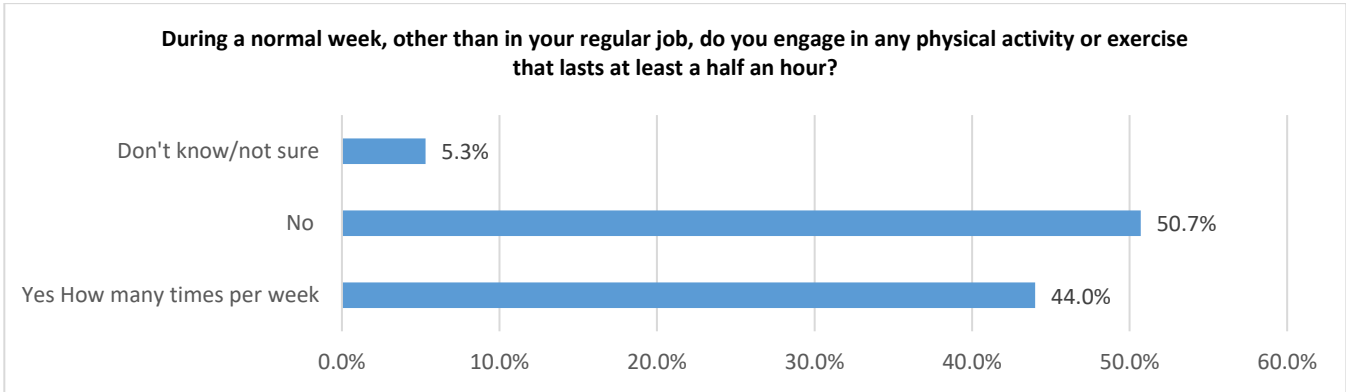
Health Behaviors and Perceptions

Where do you get most of your health-related information?

Source	Percentage
Friends and family	37.0%
Internet	56.3%
Social Media	20.7%
Employer	6.7%
Television	24.0%
Radio	2.9%
Doctor / Nurse	59.6%
My child's school	9.0%
Help lines	1.4%
Pharmacist	17.3%
Hospital	6.3%
Books / magazines	10.6%
Church	7.2%
Health department	31.7%
Community health worker	7.2%
Newspaper	4.8%
Other (please specify)	3.8%
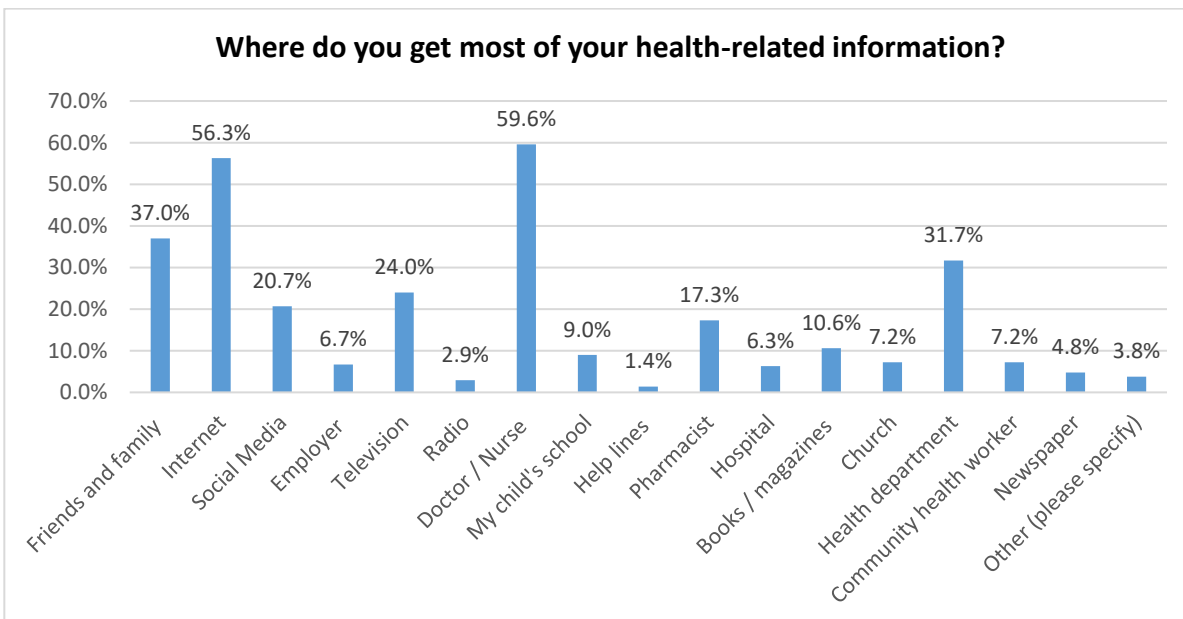
Most respondents receive their health information through a doctor or nurse (59.6%) followed closely by the Internet (56.3%) and then friends and family (37%).

Which of the following preventative services have you had in the past 12 months?
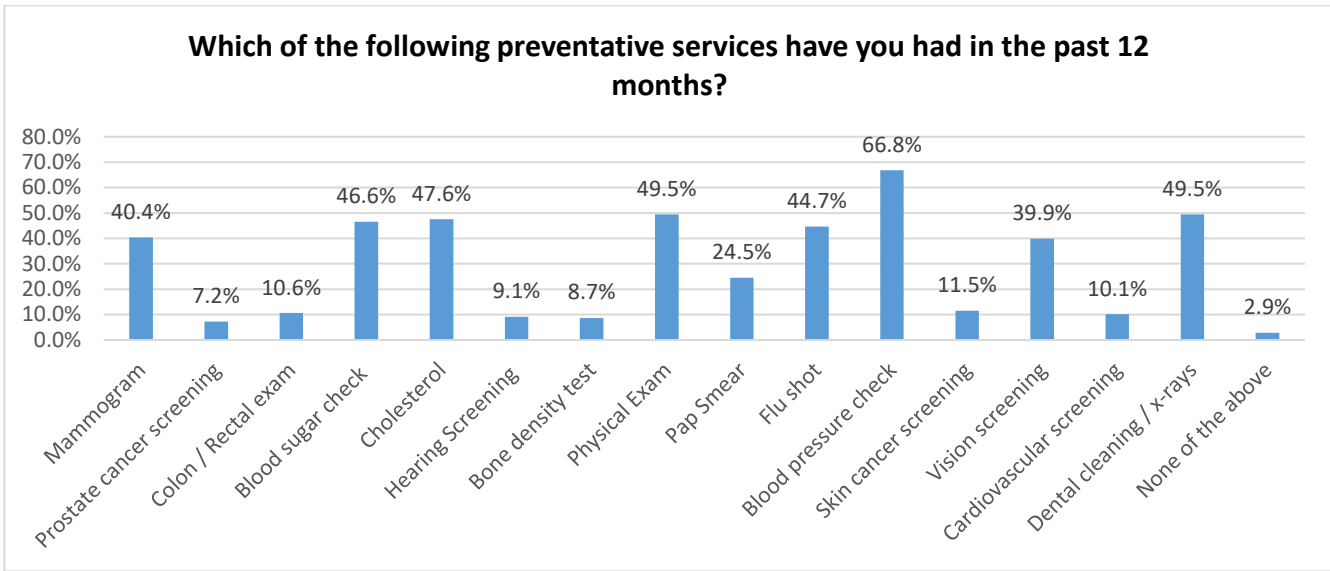
Of the listed preventative services 66.8% of respondents received a blood pressure check in the past 12 months, with 49.5% receiving a dental cleaning/x-rays, and the same percent receiving a physical exam.

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?

Don't know/not sure	5.3%
No	50.7%
Yes How many times per week	44.0%

When asked about physical activity most participants reported that they do not engage in any physical activity or exercise that lasts at least half an hour.

If you do not exercise at least a half hour a few days each week, please select the reasons why you do not exercise?

Reason	Percentage
Other (please specify)	8.2%
Low self-image	11.6%
Facilities closed due to COVID 19	9.5%
I don't have access to a facility that has the things I need, like…	29.3%
I don't like to exercise.	21.8%
I would need transportation and I don't have it.	0.7%
I don't know how to safely	4.1%
I don't know how to find exercise partners.	6.8%
I'm physically disabled.	10.2%
I would need child care and I don't have it.	4.1%
I'm too tired to exercise.	36.1%
I don't have enough time to exercise.	20.4%
There is no safe place to exercise.	17.7%
It costs too much to exercise.	6.8%
Exercise is not important to me.	2.0%
My job is physical or hard labor.	20.4%

For those participants who do not exercise for at least half an hour a few days a week the top reason as to why not was I'm too tired to exercise with 36.1%, followed by not having access to a facility that has things they need to exercise (29.3%), and not liking exercise (21.8%).

Please select any tobacco product you currently use

Product	Percentage
Cigarettes	15.2%
E-cigs / electronic cigarettes	0.0%
Chewing Tobacco	1.0%
Vaping	3.0%
Pipe	1.0%
Cigars	1.0%
Snuff / Dip	3.0%
Other (please list)	0.0%
None	79.7%
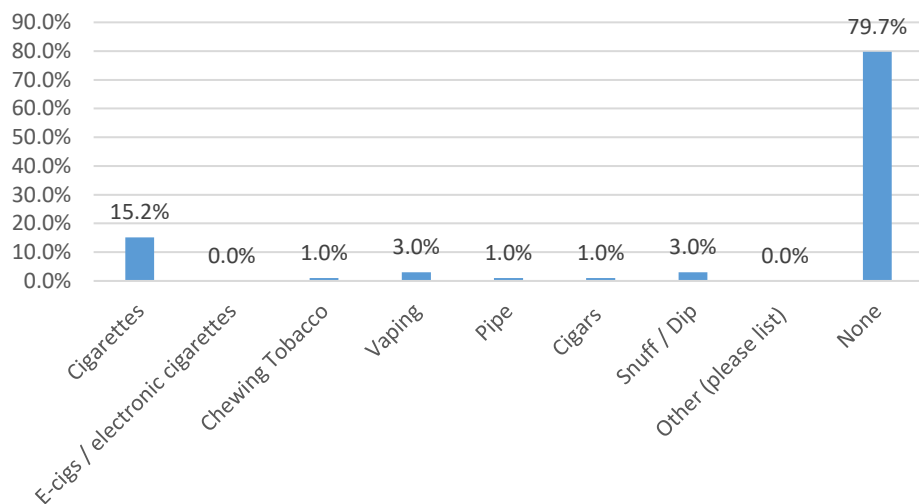
When asked about tobacco use 79.7% reported that they do not currently use tobacco products.

Of those that currently use tobacco products:
- 15.2% use cigarettes
- 3% use vaping
- 3% use snuff/dip

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

Option	Percentage
N/A, I don't want to quit	3.3%
	20.0%
	16.7%
Private counselor / therapist	0.0%
	6.7%
Pharmacy	3.3%
	33.3%
Quit Line	16.7%
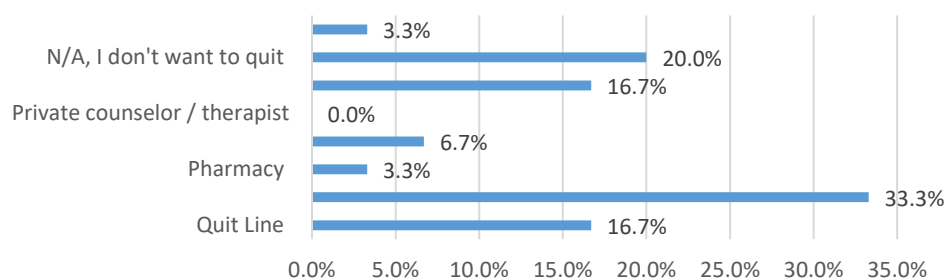
Participants that currently use tobacco products were asked where they would go for help if they wanted to quit. 33.3% said they would go to the NC doctor, 20% said they don't want to quit, and 16.7% of respondents said the Quit line and I don't know.

41

During the past 12 months, have you received a seasonal flu vaccine?

- flu shot: 60.3%
- flu mist: 0.0%
- no: 36.4%
- Don't know or not sure: 3.3%
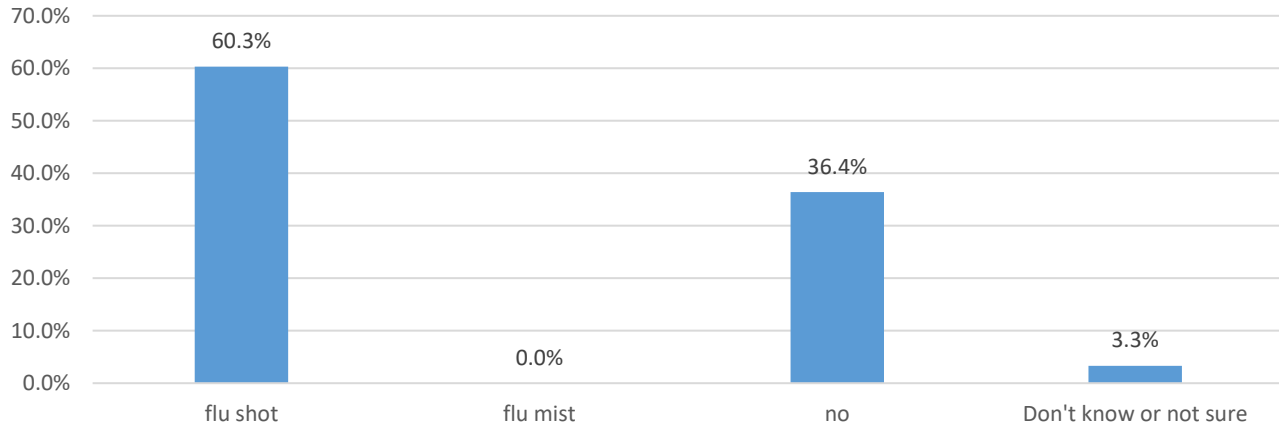
60.3% of respondents reported receiving their seasonal flu shot vaccine during the past 12 months.

If you did not get your flu vaccine, why not?

- cost: 3.0%
- transportation: 0.0%
- access: 0.0%
- time: 4.5%
- fear: 3.0%
- need more info/have questions: 3.0%
- personal preference: 86.6%
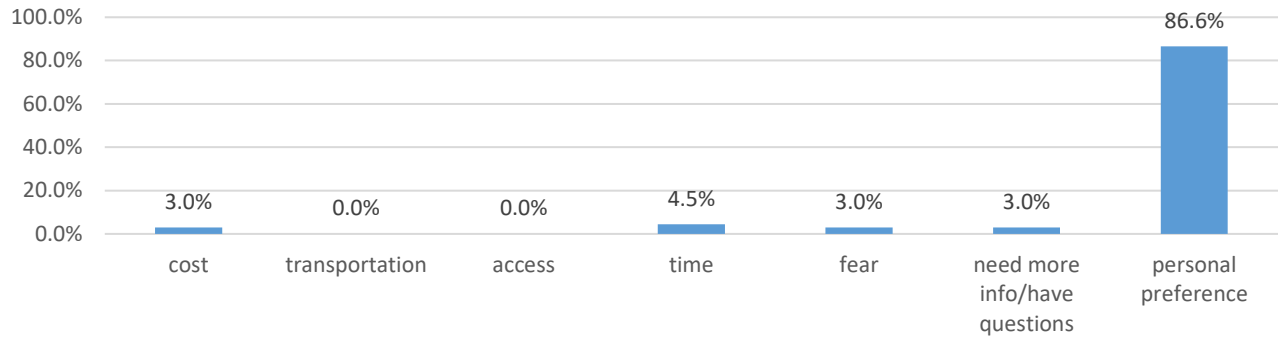
For those that did not get the flu vaccine, 86.6% sited personal preference as the reason as to why not.

Healthcare, Information, and Food access

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

- Yes: 18.2%
- No: 77.5%
- Don't know or not sure: 4.3%
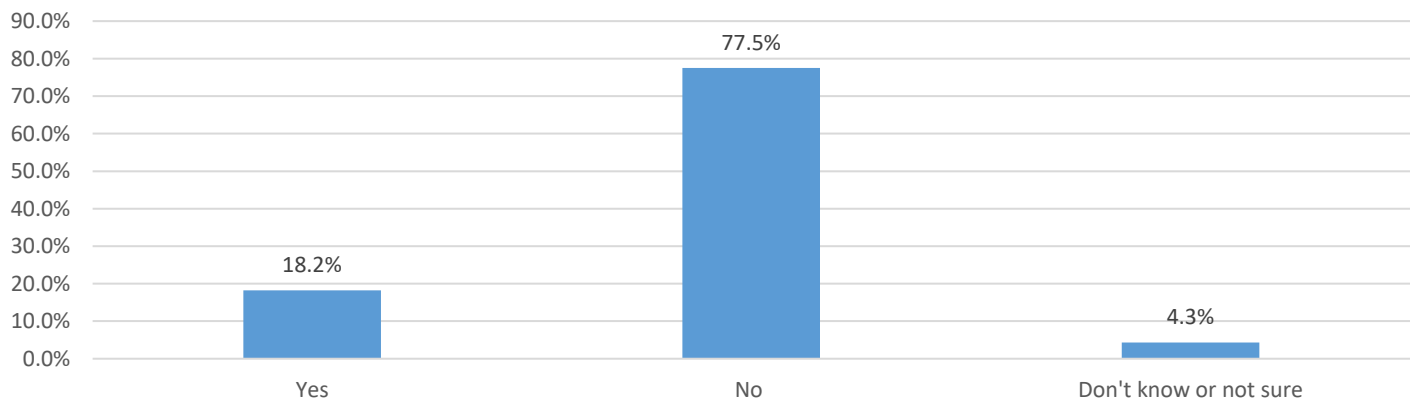
77.5% of respondents said that they didn't have a problem getting the health care they needed in the past 12 months with 18.2% saying that they did have a problem getting needed healthcare.

If yes, what type of provider or facility did you have trouble getting healthcare from?

Category	Percentage
Other (please share more)	7.9%
Mental/Behavioral Health Providers	21.1%
Pharmacy / prescriptions	13.2%
Eye care / optometrist / opthamologist	23.7%
Specialist	39.5%
Health department	10.5%
Hospital	7.9%
Medical clinic	7.9%
Urgent care center	15.8%
OB / GYN	13.2%
Pediatrician	5.3%
Primary Care Doctor	42.1%
Dentist	34.2%

For those that answered yes to having a problem getting needed healthcare, 42.1% said that they had trouble getting healthcare from a Primary Care Doctor, 39.5% said from a specialist, and 34.2% from a dentist.

Which of these problems prevented you from getting the necessary health care?

Category	Percentage
The provider denied me care or treated me in a…	2.6%
COVID 19	25.6%
Hours did not work with my availability	12.8%
Could not miss work to go	5.1%
Did not speak my language	0.0%
The wait was too long	20.5%
Couldn't get an appointment	28.2%
Didn't know where to go	12.8%
No way to get there.	10.3%
Service provider would not take my / our insurance or…	5.1%
My / our share of the cost (deductible / co-pay) was too…	15.4%
Insurance didn't cover what I / we needed.	25.6%
No health insurance	25.6%

28.2% of participants identified that they couldn't get an appointment as the main problem that prevented them from receiving necessary healthcare. 25.6% of participants responded with COVID-19, the same percentage of participants also responded with Insurance didn't cover what they needed and no health insurance.

In a natural disaster (hurrican, flooding, tornado, etc.). do you feel like you now how to access or find the information you need to stay safe?
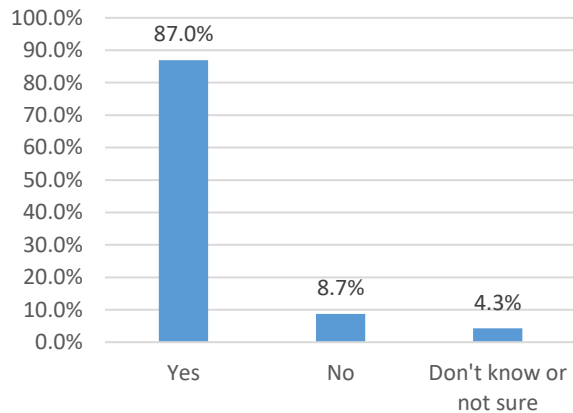
This survey question asked if participants knew how to access to access or find the information to keep you safe.

87% of respondents said yes that they do feel like they know how to access or find information needed to stay safe.

In the graph below respondents said they get their information to stay safe from television (57.4%), text message (47.5%), and internet (43.2%).

Where do you get your information to stay safe?

- Other (please specify) 4.9%
- Don't know/not sure 0.0%
- text message (emergency alert system) 47.5%
- family 21.9%
- neighbors 18.6%
- social media 18.0%
- print media (i.e.. Newspaper) 2.7%
- cell phone 29.5%
- telephone (landline) 12.0%
- internet 43.2%
- radio 28.4%
- television 57.4%

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?
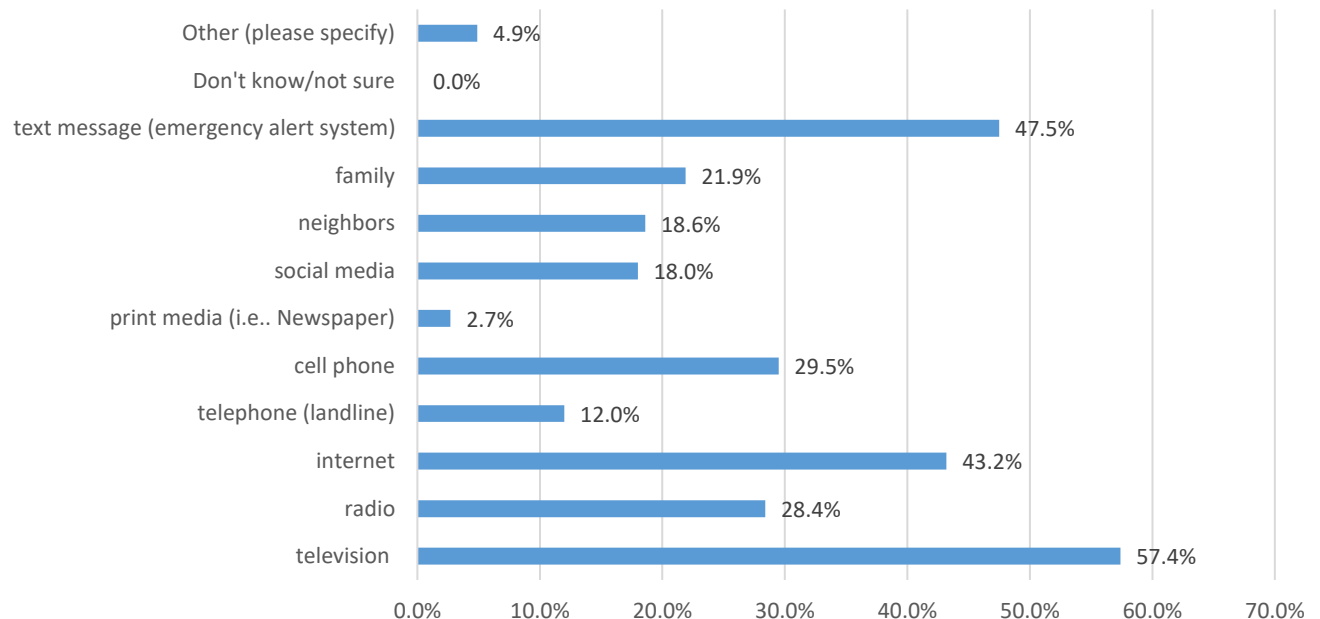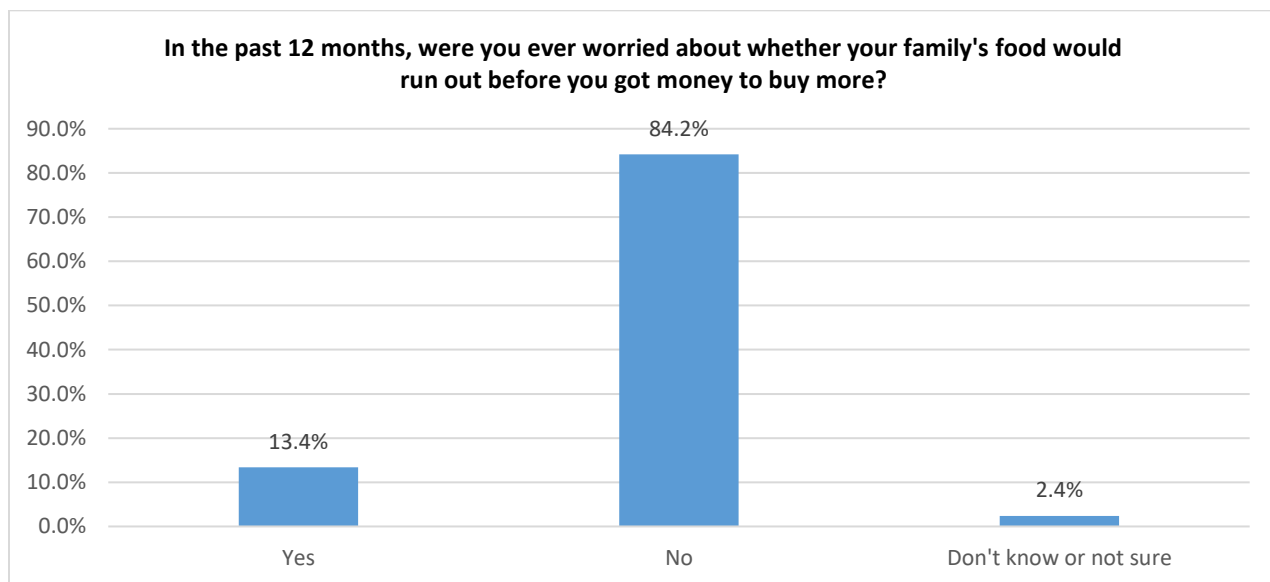
In the above survey questions participants were asked in the past 12 months if they were ever worried about whether their family's food would run out before they got money to buy more. 84% said no and 13.4% responded yes.

Demographics
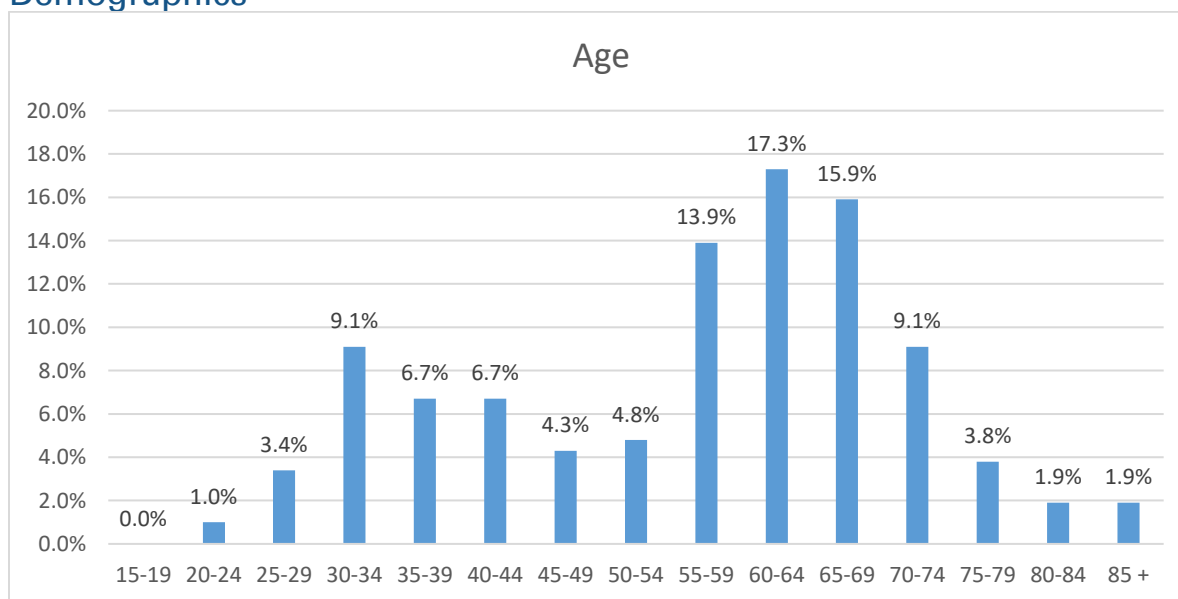
The majority of respondents are aged 60-64 years with the overall age of respondents ranging from 20 – 85+ years.

Race/Ethnicity
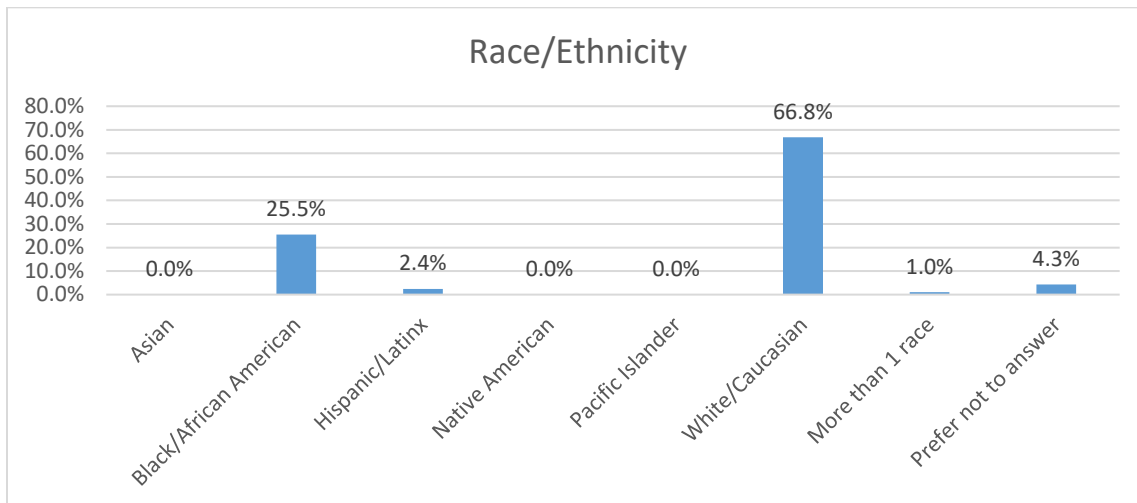
Most participants identified as White/Caucasian (66.8%) followed by Black/African American (25.5%), and Hispanic/Latinx (2.4%).

Is English the primary language spoken in your home?
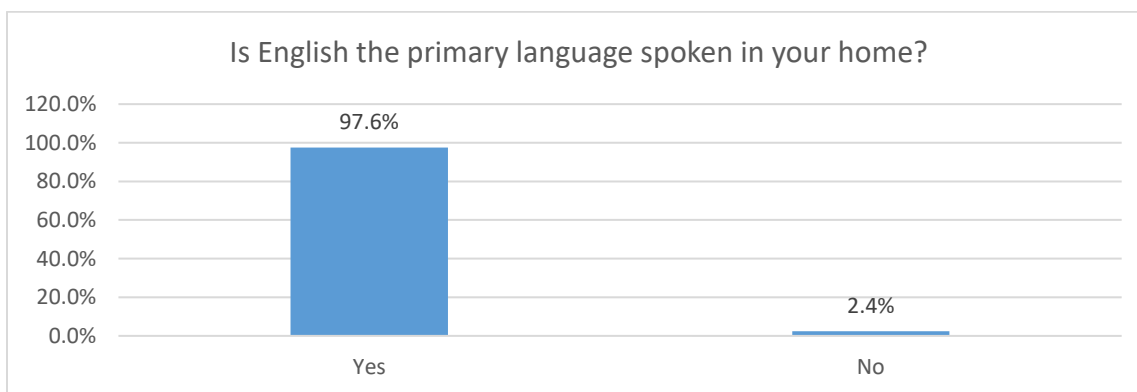
English is the primary language spoken at home as shown in the graph above with Spanish and Creole identified as the primary language spoken at home for respondents where English is not the primary language (as shown in the graph below).

Primary language spoken at home - not English
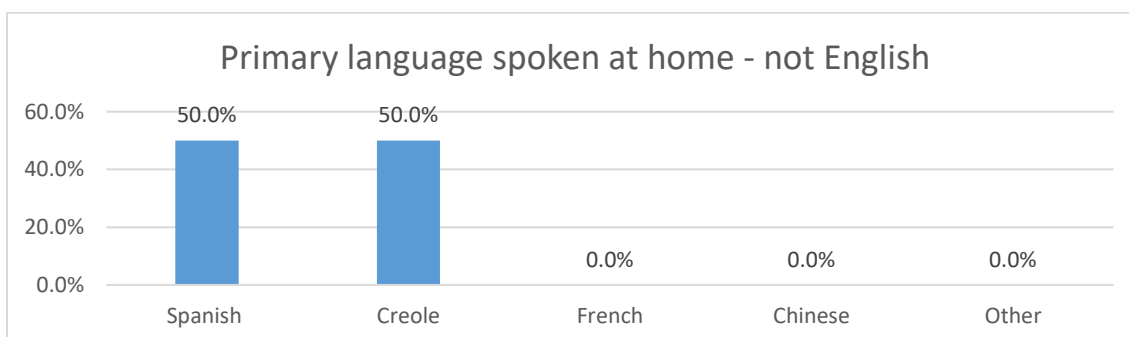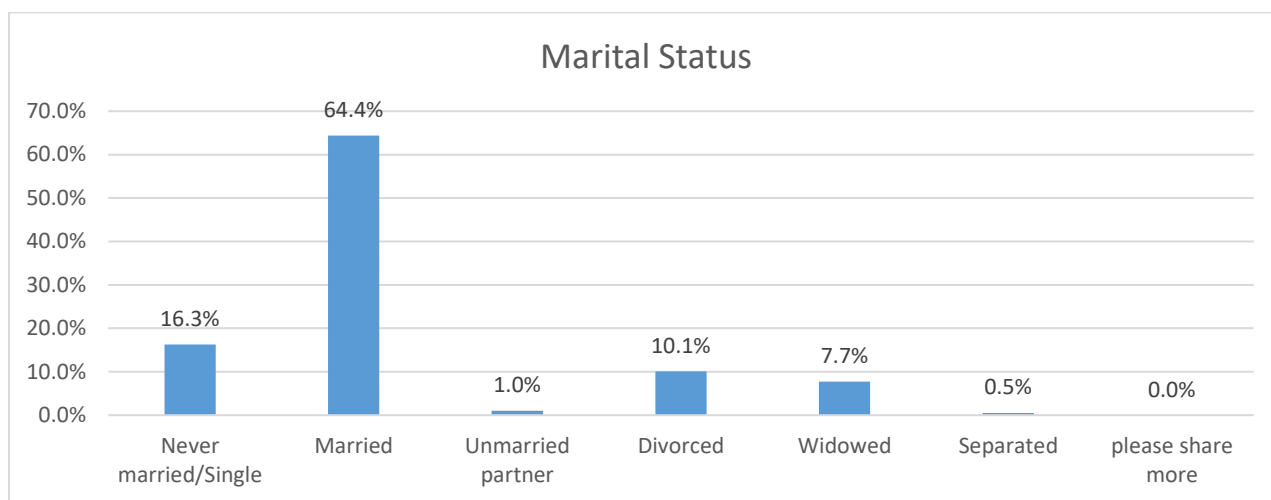
Marital Status

Most participants identified their marital status as married (64.4%) followed by Never married/single (16.3%) and Divorced (10.1%).

Highest Level of Education Completed
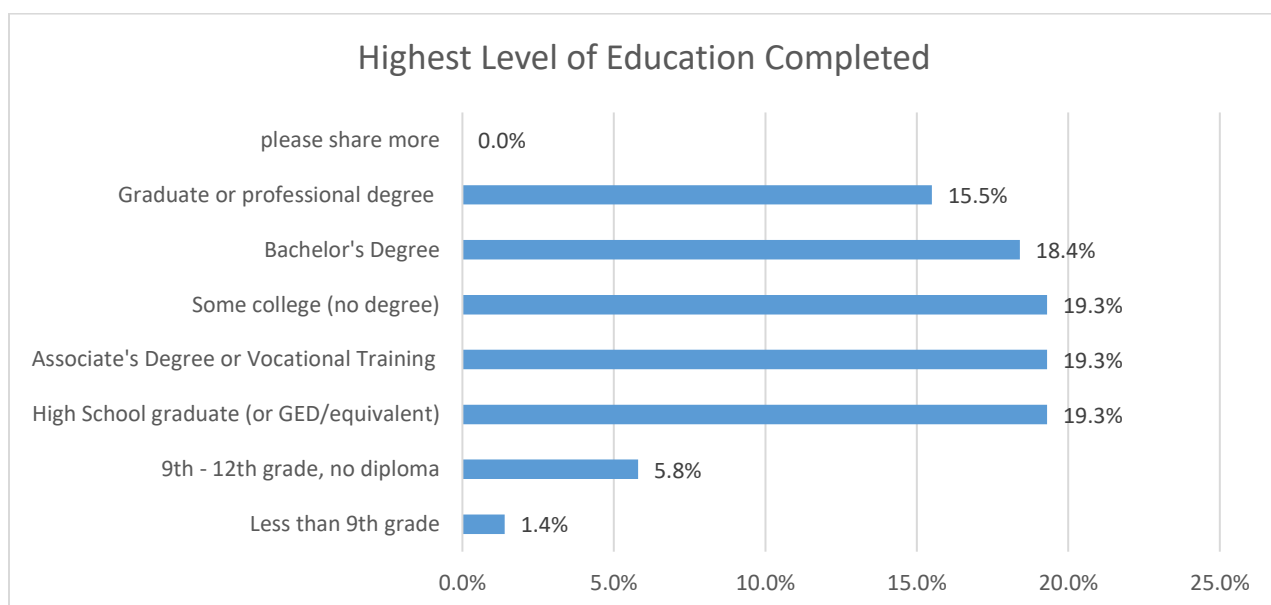
The highest level of education completed by the majority of participants was equal among three categories, Some college (no degree), Associate's Degree or Vocational Training, and High School graduate (or GED/equivalent), with 19.3% of respondents in each category.

Current Job
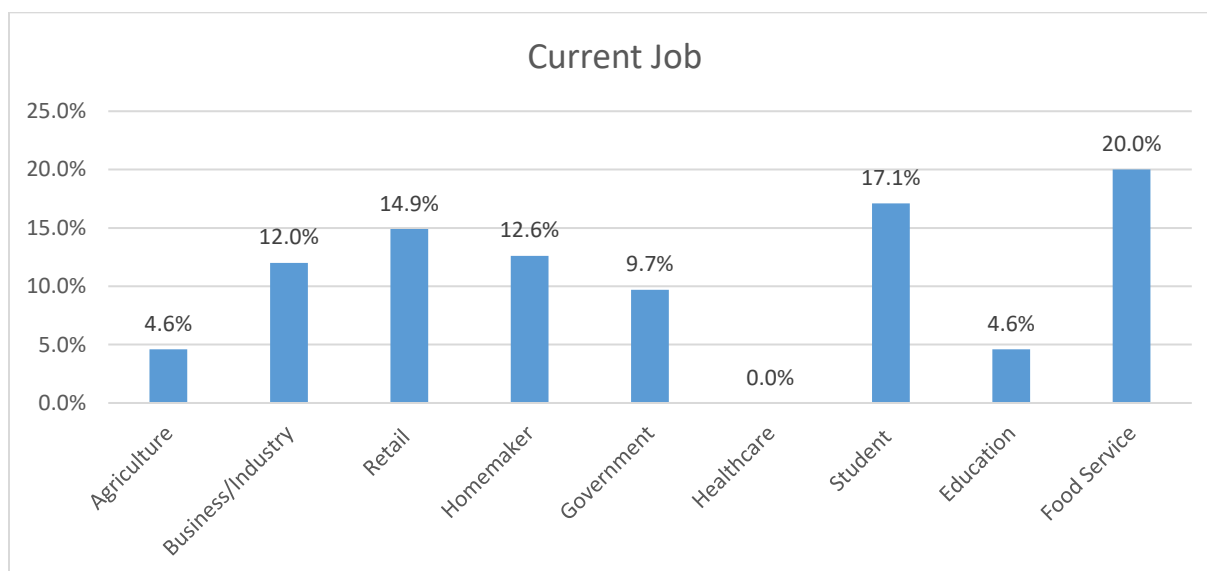
The industry for employment selected by most respondents was Food Service (20%), followed by Student (17.1%), and Retail (14.9%).

Total Household Income
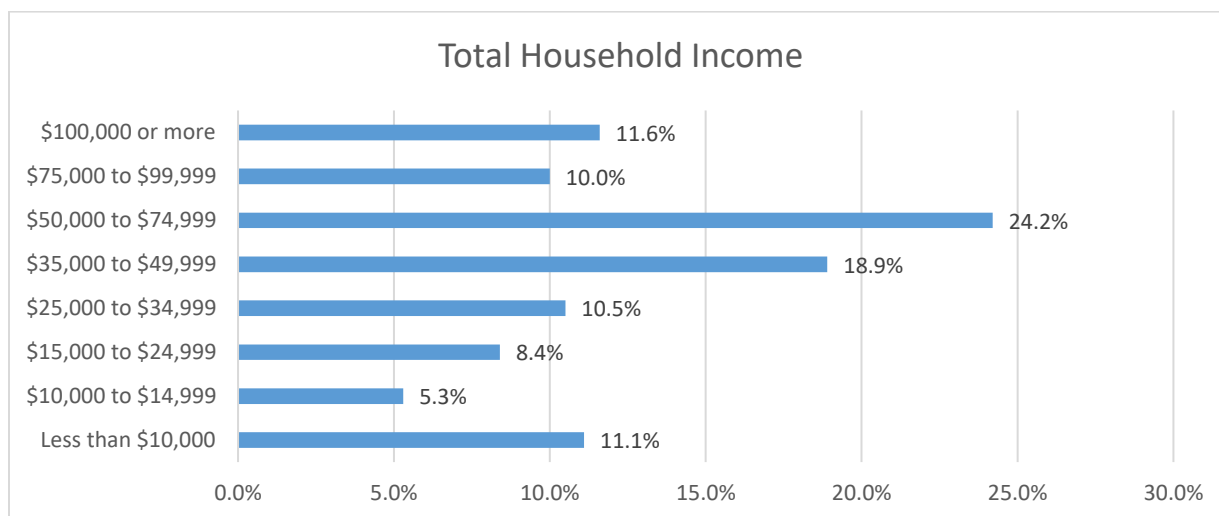
Most respondents identified their total household income as $50,000 to $74,999 (24.2%) followed by $35,000 to $49,999 (18.9%) and $100,000 or more (11.6%).

How many peole live in your household?
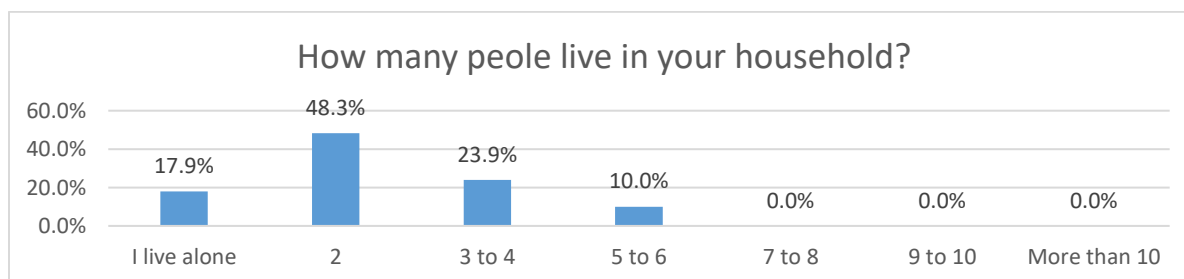
The majority of respondents have 2 people living in their household (48.3%) followed by 3 -4 (23.96%), and 17.9% reporting that they live alone.

Employment Status

Category	Percentage
Unemployed for more than 1 year	4.4%
Unemployed for 1 year or less	0.0%
Self-employed	9.8%
Homemaker	8.3%
Student	1.0%
Disabled	5.9%
Armed forces	0.0%
Retired	30.9%
Seasonal Worker/Temporary	2.9%
Employed in multiple jobs	4.9%
Employed part-time	9.3%
Employed full-time	40.2%
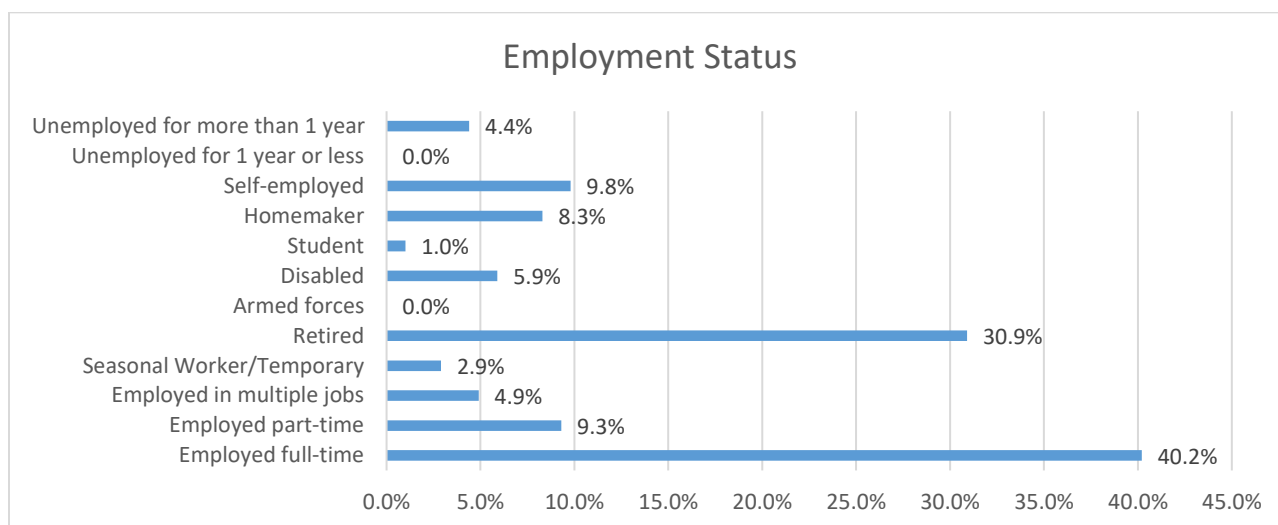
Regarding employment status most respondents are either employed full-time (40.2%) or retired (30.9%) followed by self-employed (9.8%).

Type of Internet Access at Home

Category	Percentage
Please share more	3.4%
None	11.2%
Cellular or Hotspot	10.7%
Wi-Fi	65.9%
Broadband	7.3%
Dial up	1.5%
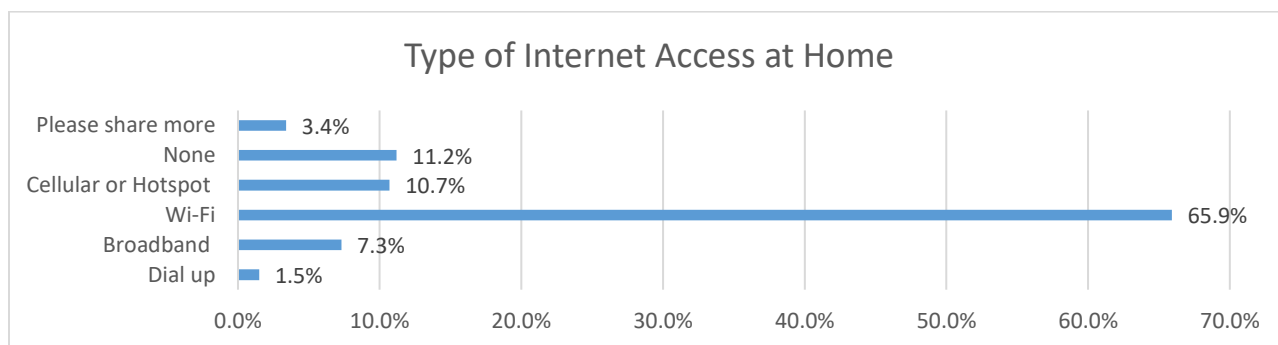
When asked about the type of internet access at home most respondents reported Wi-Fi (65.9%), None (11.2%), and Cellular or Hotspot (10.7%).

Chapter 9 Inventory of Resources

The following is a list of community resources databases:

2-1-1 (Statewide Database)   https://nc211.org/

NCCare360 (Statewide Database)   https://nccare360.org/

NENC Connect (NENC Behavioral Health Resources Only)   https://nencconnect.org/

Chapter 10 Community Prioritization Process

The 2022 Hyde County CHNA Stakeholder Group undertook two phases of prioritization. The first phase began as key stakeholders from Hyde County were convened on November 18, 2021, to review secondary and primary data from the CHA data collection process. Due to COVID-19, stakeholders were given the option to join this meeting virtually. Following the data review and additional discussion, participants were guided through a nominal group technique where a preliminary list of priorities based on the primary and secondary data results was created. In creating this list, the group took into consideration the magnitude of the problem (examination of the data), as well as the feasibility of addressing the problem (community resources and assets) and the impact that could be made by addressing the problem in Hyde County.

The second phase of the prioritization process involved voting on the top three leading health priorities in Hyde County. As previously mentioned, a virtual meeting option was available for the initial prioritization meeting; however, we wanted to ensure that all stakeholders had the opportunity to participate in priority setting, including those who might have been unable to attend the prioritization in-person (due to COVID-19) or virtually (due to lack of internet access). Therefore, a survey via Survey Monkey was created and distributed on November 22, 2021 and closed on December 3, 2021. The survey contained an introduction describing the purpose and process of priority setting, as well as a link to the CHNA data summary. The survey requested that CHNA Stakeholders rank identified priorities according to 1) magnitude/importance of health issue and 2) feasibility/impact of addressing the health issue. As a result of this multi-step process, Hyde County's health priorities for the next three-year period (2022-2025) are:

1. Mental Health
2. Substance Use
3. Child Abuse & Neglect

CHNA References

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

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.

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
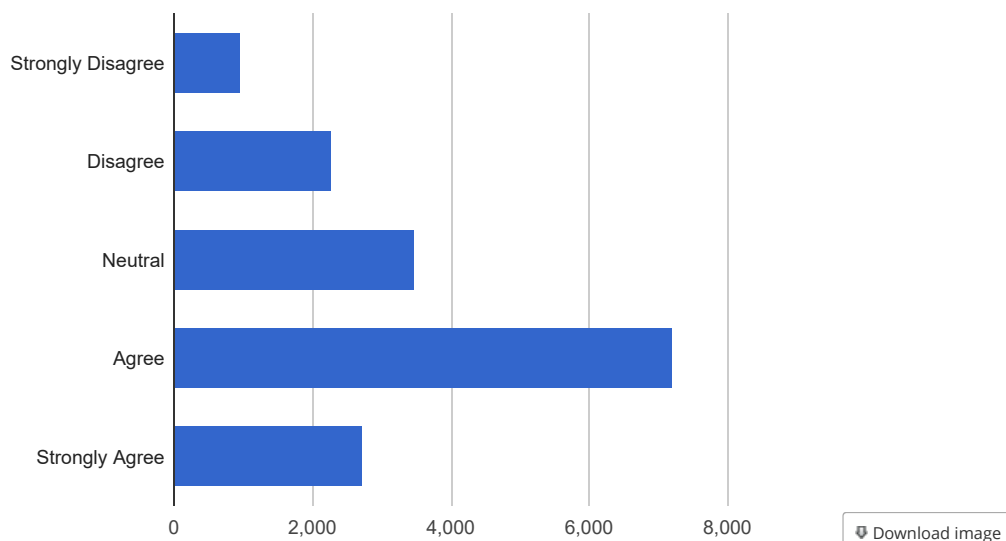
Community Health Needs Assessment `PID 1535`

Data Exports, Reports, and Stats

Hyde County

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

Total Count (N)	Missing*	Unique
208	5 (2.3%)	5

Counts/frequency: Strongly Disagree (23, 11.1%), Disagree (47, 22.6%), Neutral (45, 21.6%), Agree (72, 34.6%), Strongly Agree (21, 10.1%)

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

Total Count (N)	Missing*	Unique
209	4 (1.9%)	5

Counts/frequency: Strongly Disagree (6, 2.9%), Disagree (23, 11.0%), Neutral (48, 23.0%), Agree (79, 37.8%), Strongly Agree (53, 25.4%)
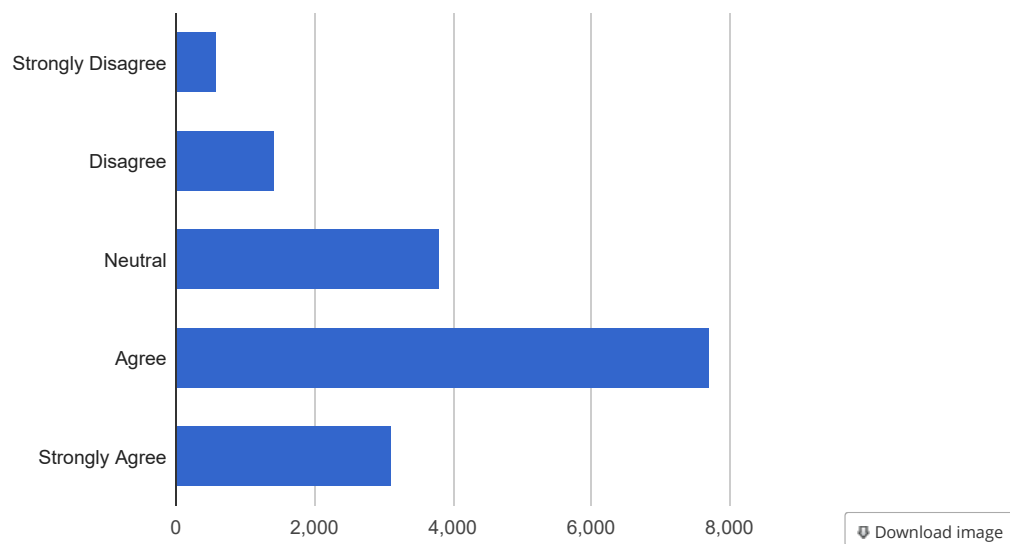
This county is a good place to grow old. *(grow_old)*

Total Count (N)	Missing*	Unique
209	4 (1.9%)	5

Counts/frequency: Strongly Disagree (10, 4.8%), Disagree (32, 15.3%), Neutral (41, 19.6%), Agree (69, 33.0%), Strongly Agree (57, 27.3%)
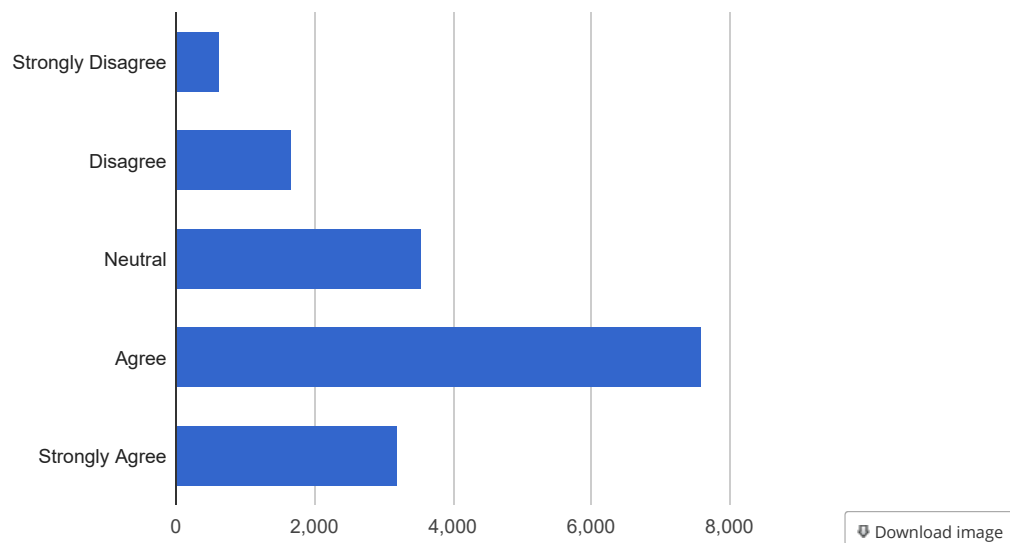
There is plenty of economic opportunity in this county. *(econ_opp)*

Total Count (N)	Missing*	Unique
209	4 (1.9%)	5

Counts/frequency: Strongly Disagree (83, 39.7%), Disagree (78, 37.3%), Neutral (24, 11.5%), Agree (16, 7.7%), Strongly Agree (8, 3.8%)

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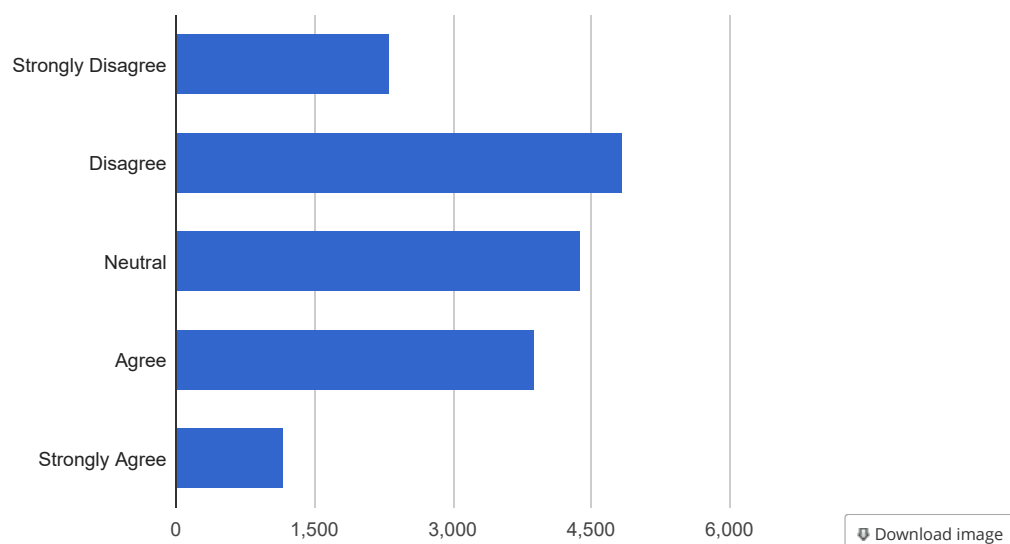
This county is a safe place to live *(safe)*

Total Count (N)	Missing*	Unique
209	4 (1.9%)	5

Counts/frequency: Strongly Disagree (5, 2.4%), Disagree (9, 4.3%), Neutral (17, 8.1%), Agree (97, 46.4%), Strongly Agree (81, 38.8%)

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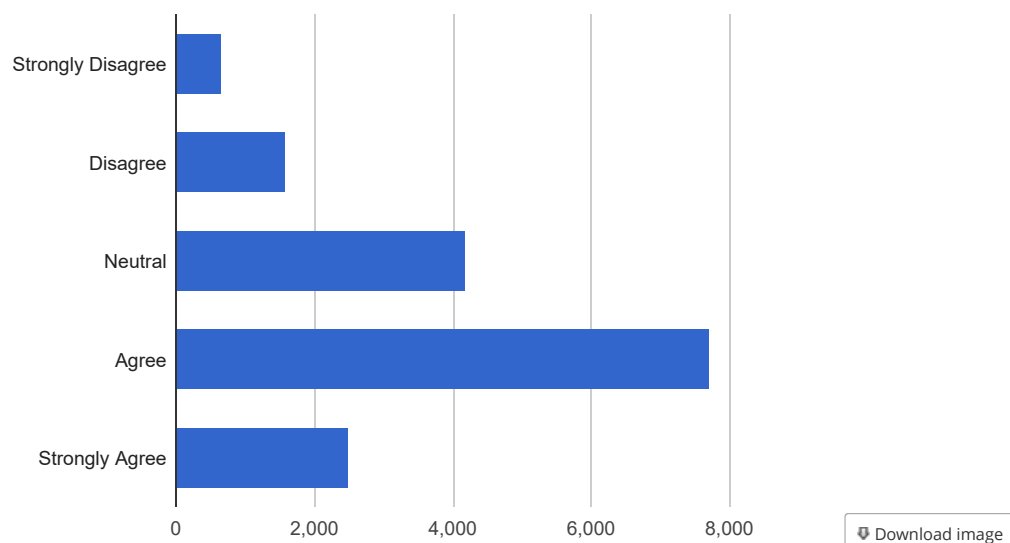
There is plenty of help for people during times of need in this county. *(help)*

Total Count (N)	Missing*	Unique
209	4 (1.9%)	5

Counts/frequency: Strongly Disagree (22, 10.5%), Disagree (51, 24.4%), Neutral (48, 23.0%), Agree (66, 31.6%), Strongly Agree (22, 10.5%)
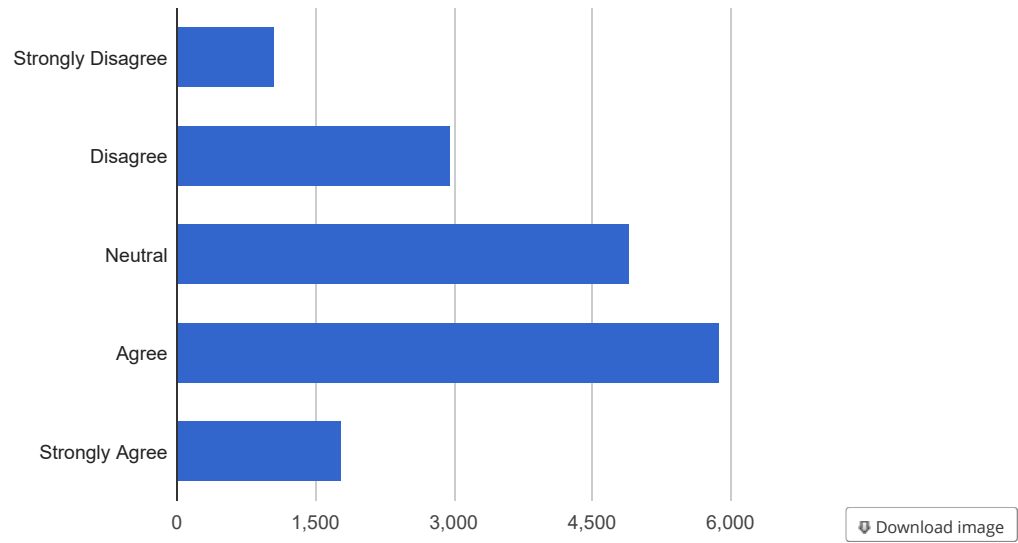
There is affordable housing that meets the needs in this county *(affordable)*

Total Count (N)	Missing*	Unique
209	4 (1.9%)	5

Counts/frequency: Strongly Disagree (65, 31.1%), Disagree (64, 30.6%), Neutral (45, 21.5%), Agree (29, 13.9%), Strongly Agree (6, 2.9%)
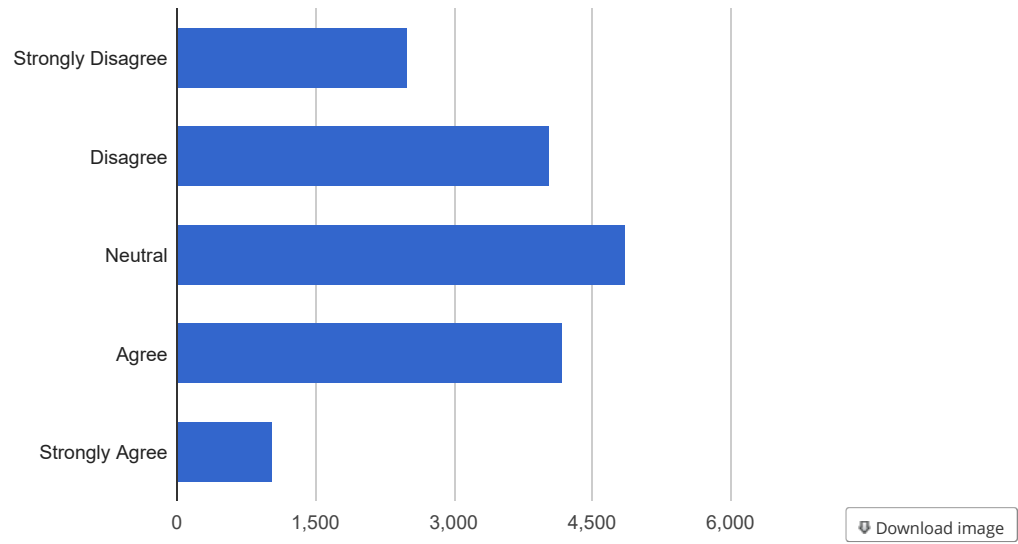
There are good parks and recreation facilities in this county. *(parks)*

Total Count (N)	Missing*	Unique
209	4 (1.9%)	5

Counts/frequency: Strongly Disagree (58, 27.8%), Disagree (74, 35.4%), Neutral (36, 17.2%), Agree (31, 14.8%), Strongly Agree (10, 4.8%)

Strongly Disagree

Disagree

Neutral

Agree

Strongly Agree

0　　2,000　　4,000　　6,000　　8,000

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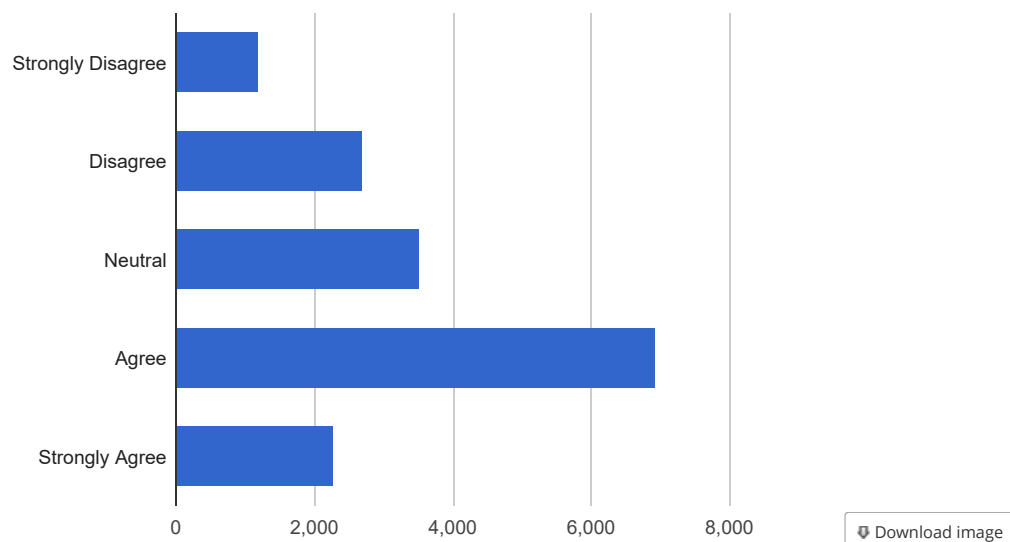
It is easy to buy healthy foods in this county. *(healthyfood)*

Total Count (N)	Missing*	Unique
209	4 (1.9%)	5

Counts/frequency: Strongly Disagree (77, 36.8%), Disagree (56, 26.8%), Neutral (36, 17.2%), Agree (30, 14.4%), Strongly Agree (10, 4.8%)

Strongly Disagree

Disagree

Neutral

Agree

Strongly Agree

0　　2,000　　4,000　　6,000　　8,000

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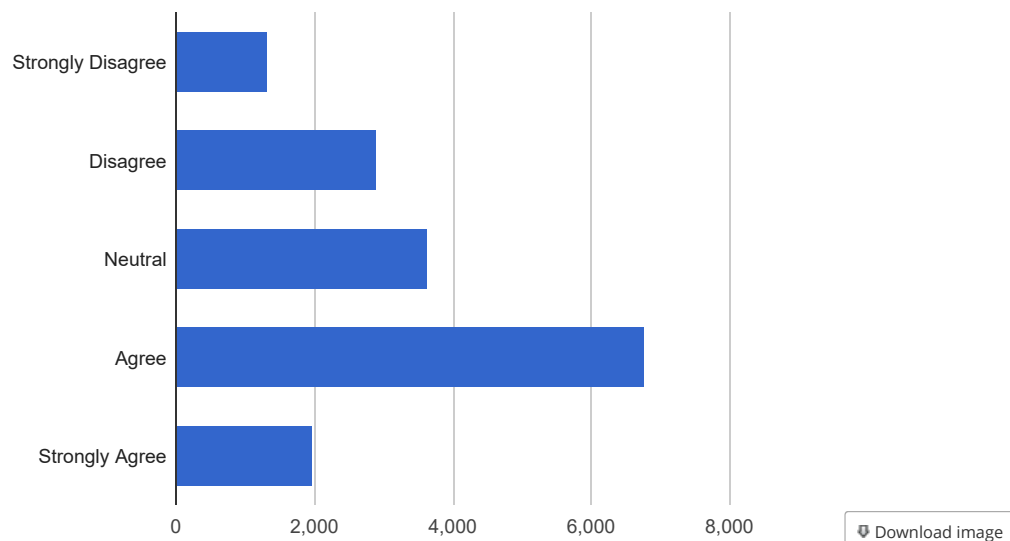
Please select the top 3 issues which have the highest impact on quality of life in this county. *(topissues)*

Total Count (N)	Missing*	Unique
208	5 (2.3%)	14

Counts/frequency: Low income/poverty (153, 73.6%), Dropping out of school (9, 4.3%), Poor housing conditions (29, 13.9%), Lack of affordable housing (78, 37.5%), Lack of community resources (88, 42.3%), Violent crime (murder, assault) Theft (2, 1.0%), Drugs/Alcohol (Substance Use) (100, 48.1%), Rape/Sexual Assault (0, 0.0%), Neglect and Abuse (10, 4.8%), Transportation (26, 12.5%), Child Abuse (6, 2.9%), health insurance (29, 13.9%), Lack of access to enough food (24, 11.5%), COVID-19 pandemic (7, 3.4%), Other (please specify) (24, 11.5%)
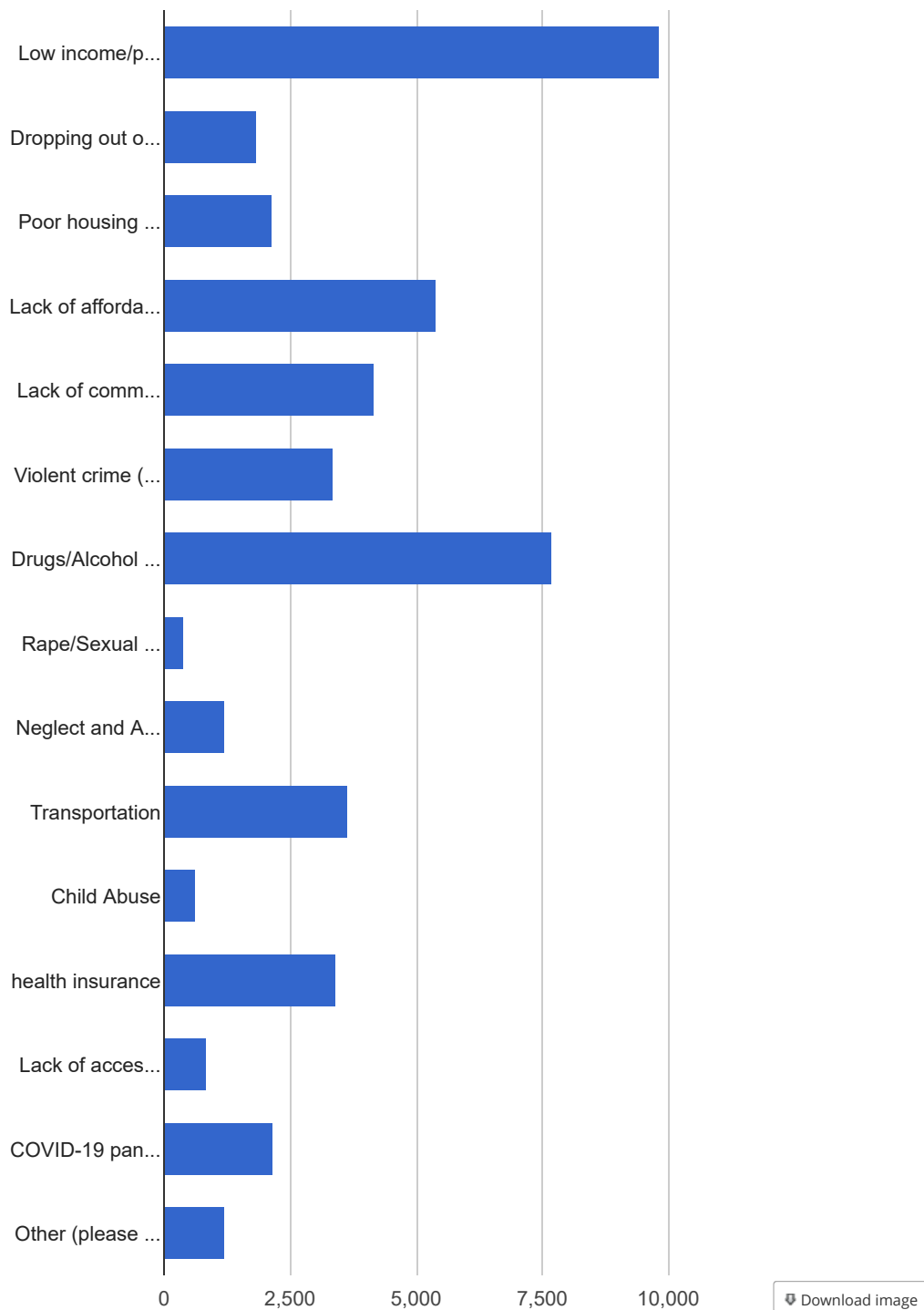
Other *(topthreeother1)*

Total Count (N)	Missing*
25	188 (88.3%)

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

Total Count (N)	Missing*	Unique

208	5 (2.3%)	20

Counts/frequency: Animal control (25, 12.0%), Child care options (43, 20.7%), Elder care options (57, 27.4%), Services for disabled people (9, 4.3%), More affordable health services (17, 8.2%), Better/More healthy food choices (40, 19.2%), More affordable / better housing (53, 25.5%), Number of healthcare providers (25, 12.0%), Culturally appropriate health services (1, 0.5%), Counseling / mental and behavioral health / support groups (18, 8.7%), Better / more recreational facilities (parks, trails, community centers) (67, 32.2%), Substance Misuse Services/ Recovery Support (15, 7.2%), Positive teen activities (46, 22.1%), Transportation options (10, 4.8%), Availability of employment (72, 34.6%), Higher paying employment (69, 33.2%), Road maintenance (19, 9.1%), Pedestrian and cyclist road safety (2, 1.0%), Healthy family activities (12, 5.8%), None (0, 0.0%), Other (please specify) (8, 3.8%)

0 1,500 3,000 4,500 6,000 ⬇ Download image
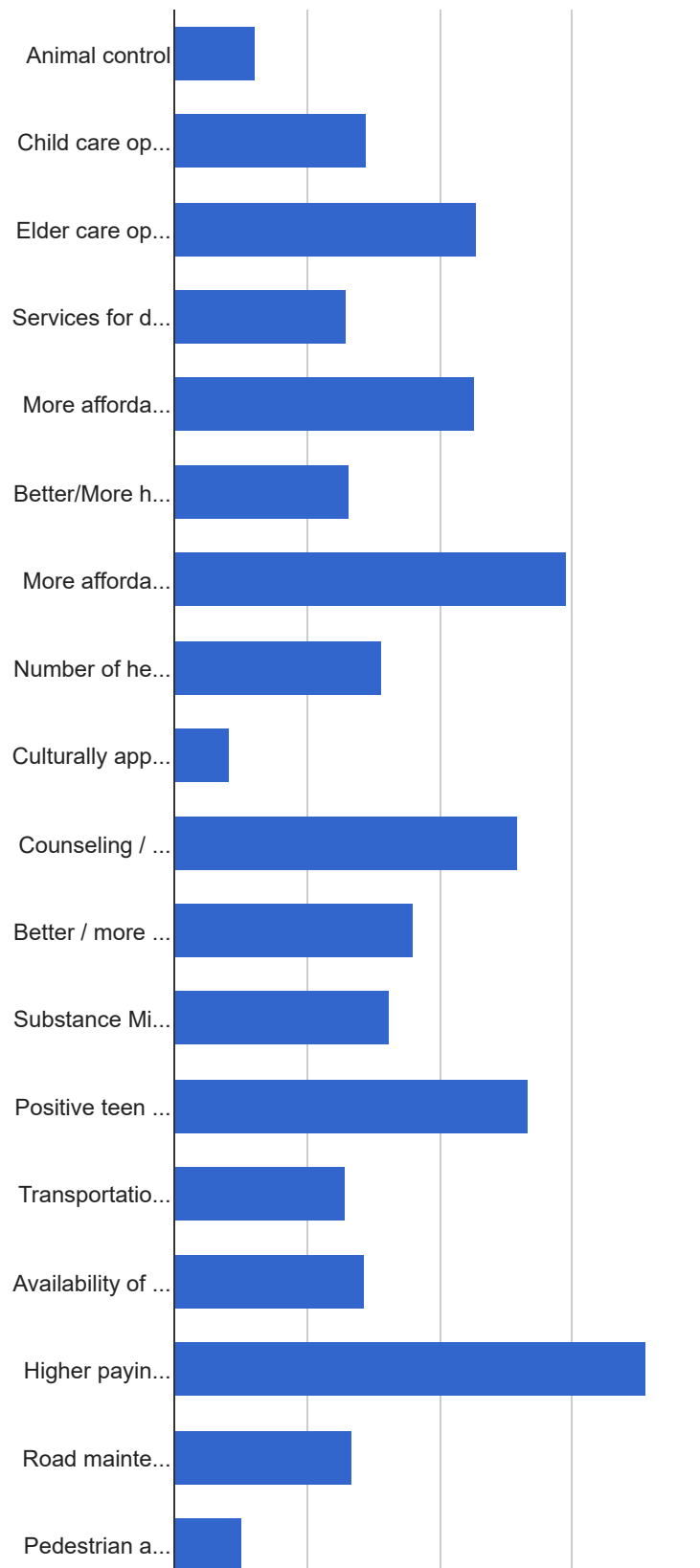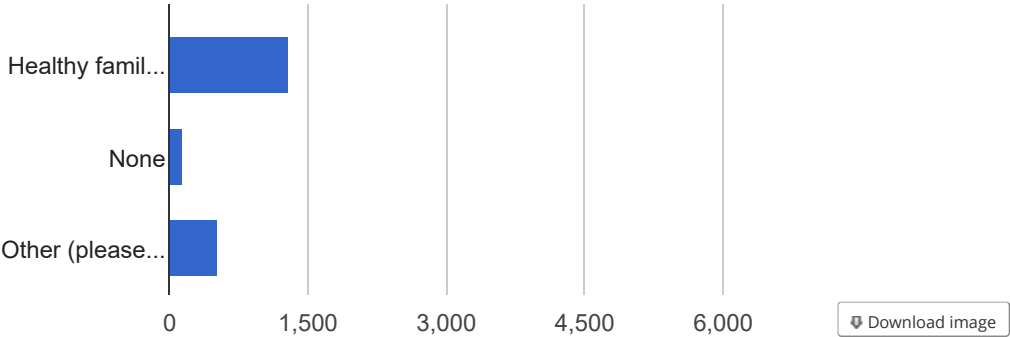
Other *(improvement_other)*

Total Count (N)	Missing*
8	205 (96.2%)

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
208	5 (2.3%)	27

Counts/frequency: Eating well/nutrition (79, 38.0%), Using child safety car seats (3, 1.4%), Exercising/fitness (57, 27.4%), Managing weight (55, 26.4%), Using seat belts (3, 1.4%), Suicide prevention (10, 4.8%), Driving safely (8, 3.8%), Mental/Behavioral Health (54, 26.0%), Domestic violence prevention (16, 7.7%), Crime prevention (7, 3.4%), Elder care (55, 26.4%), Child care/parenting (18, 8.7%), Rape/sexual abuse prevention (1, 0.5%), COVID-19 (6, 2.9%), Going to a dentist for check-ups/preventive care (23, 11.1%), Quitting smoking/tobacco use prevention (16, 7.7%), Substance misuse prevention (62, 29.8%), Harm reduction (3, 1.4%), Breastfeeding (3, 1.4%), Going to the doctor for yearly check-ups and screenings (29, 13.9%), Getting prenatal care during pregnancy (2, 1.0%), Getting flu shots and other vaccines (9, 4.3%), Preparing for an emergency/disaster (22, 10.6%), Caring for family members with special needs / disabilities (33, 15.9%), Preventing pregnancy and sexually transmitted diseases (safe sex) (18, 8.7%), None (5, 2.4%), Other (please specify) (1, 0.5%)
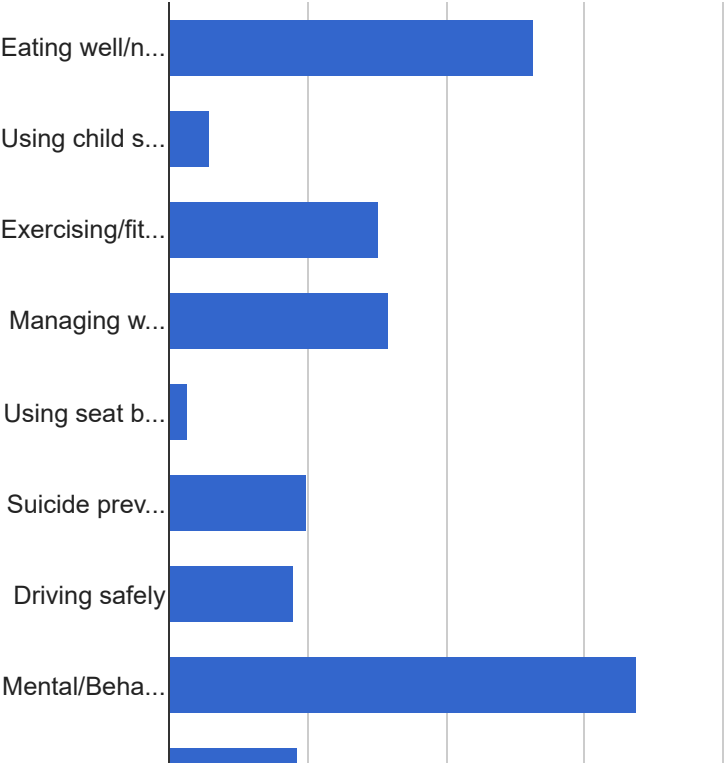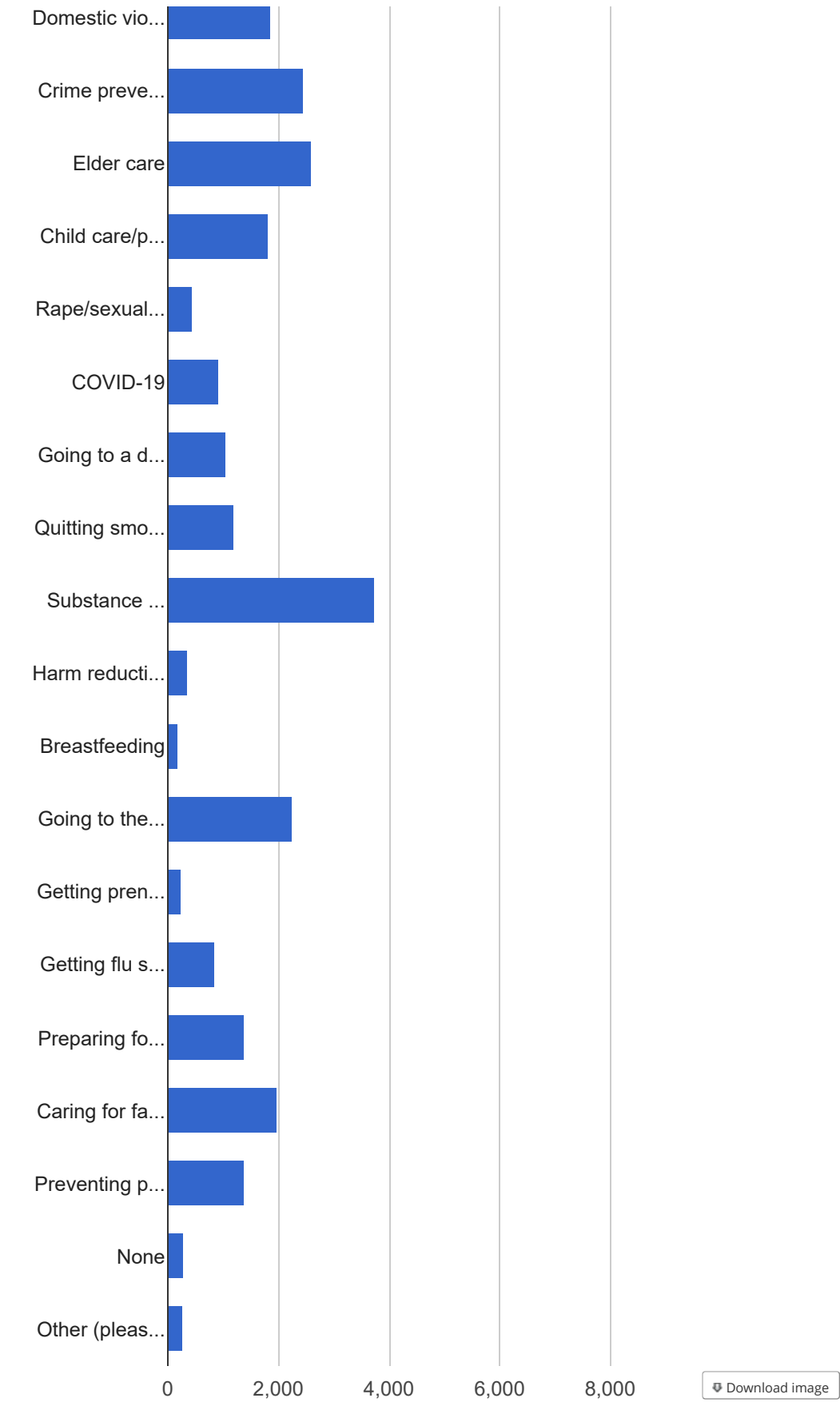
Other *(heath_behavin_other)*

Total Count (N)	Missing*

| 1 | 212 (99.5%) |

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

Total Count (N)	Missing*	Unique
205	8 (3.8%)	18

Counts/frequency: Employment/Loss of Job (42, 20.5%), Access to food (15, 7.3%), Access to safe housing (3, 1.5%), Transportation (11, 5.4%), Education (22, 10.7%), Physical Health (42, 20.5%), Mental/Behavioral Health (47, 22.9%), Substance Misuse (9, 4.4%), Stress and anxiety (122, 59.5%), Economic Resources (32, 15.6%), Ability to seek medical care (17, 8.3%), Social isolation (93, 45.4%), Grief from loss of loved one (18, 8.8%), Access to medication (5, 2.4%), Lack of comfort in seeking medical care (14, 6.8%), Spiritual Health/Well-being (30, 14.6%), Child care (8, 3.9%), Other (20, 9.8%)
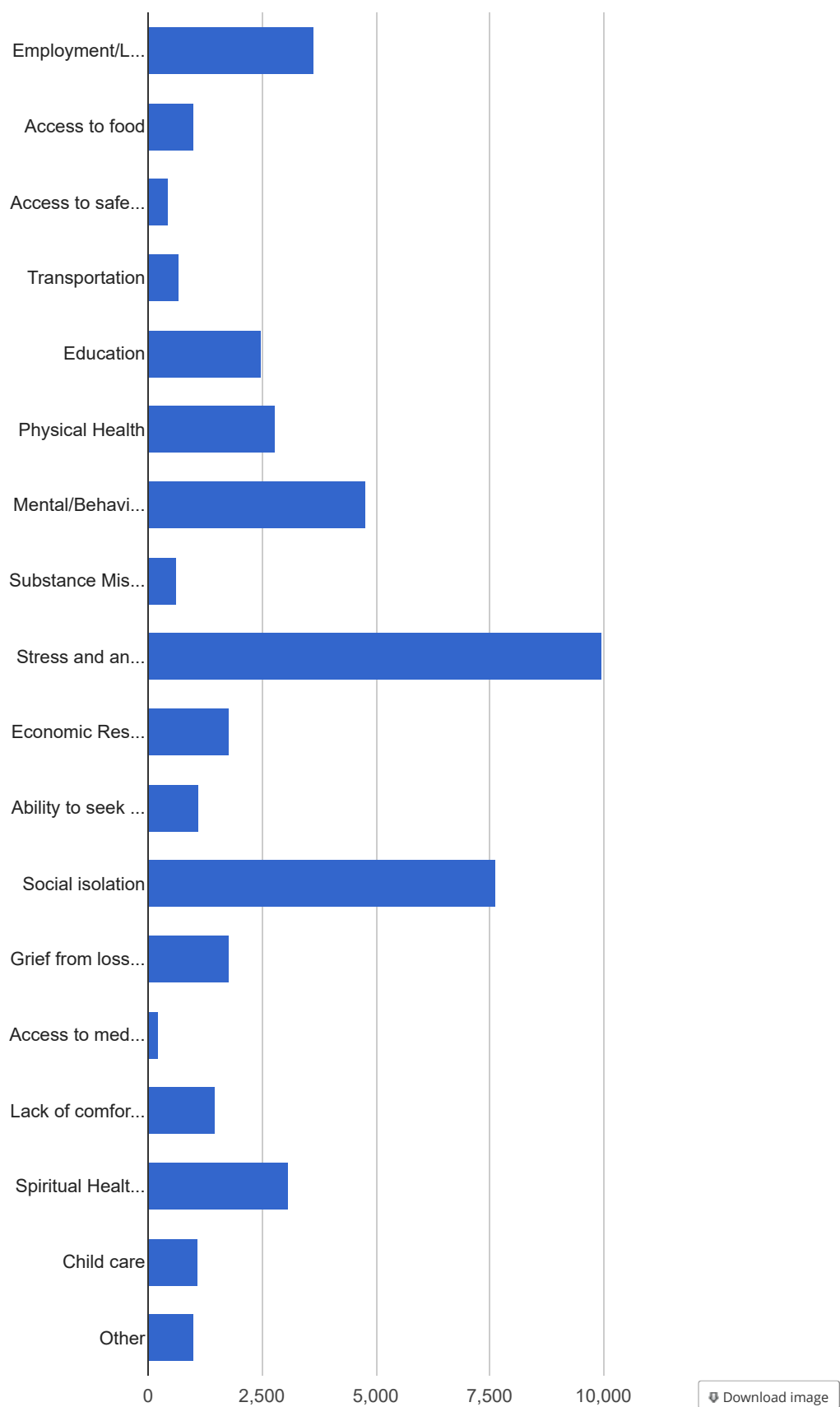
Other *(other_covid)*

Total Count (N)	Missing*
12	201 (94.4%)

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

(health_info)

Total Count (N)	Missing*	Unique
208	5 (2.3%)	17

Counts/frequency: Friends and family (77, 37.0%), Internet (117, 56.3%), Social Media (43, 20.7%), Employer (14, 6.7%), Television (50, 24.0%), Radio (6, 2.9%), Doctor / Nurse (124, 59.6%), My child's school (4, 1.9%), Help lines (3, 1.4%), Pharmacist (36, 17.3%), Hospital (13, 6.3%), Books / magazines (22, 10.6%), Church (15, 7.2%), Health department (66, 31.7%), Community health worker (15, 7.2%), Newspaper (10, 4.8%), Other (please specify) (8, 3.8%)
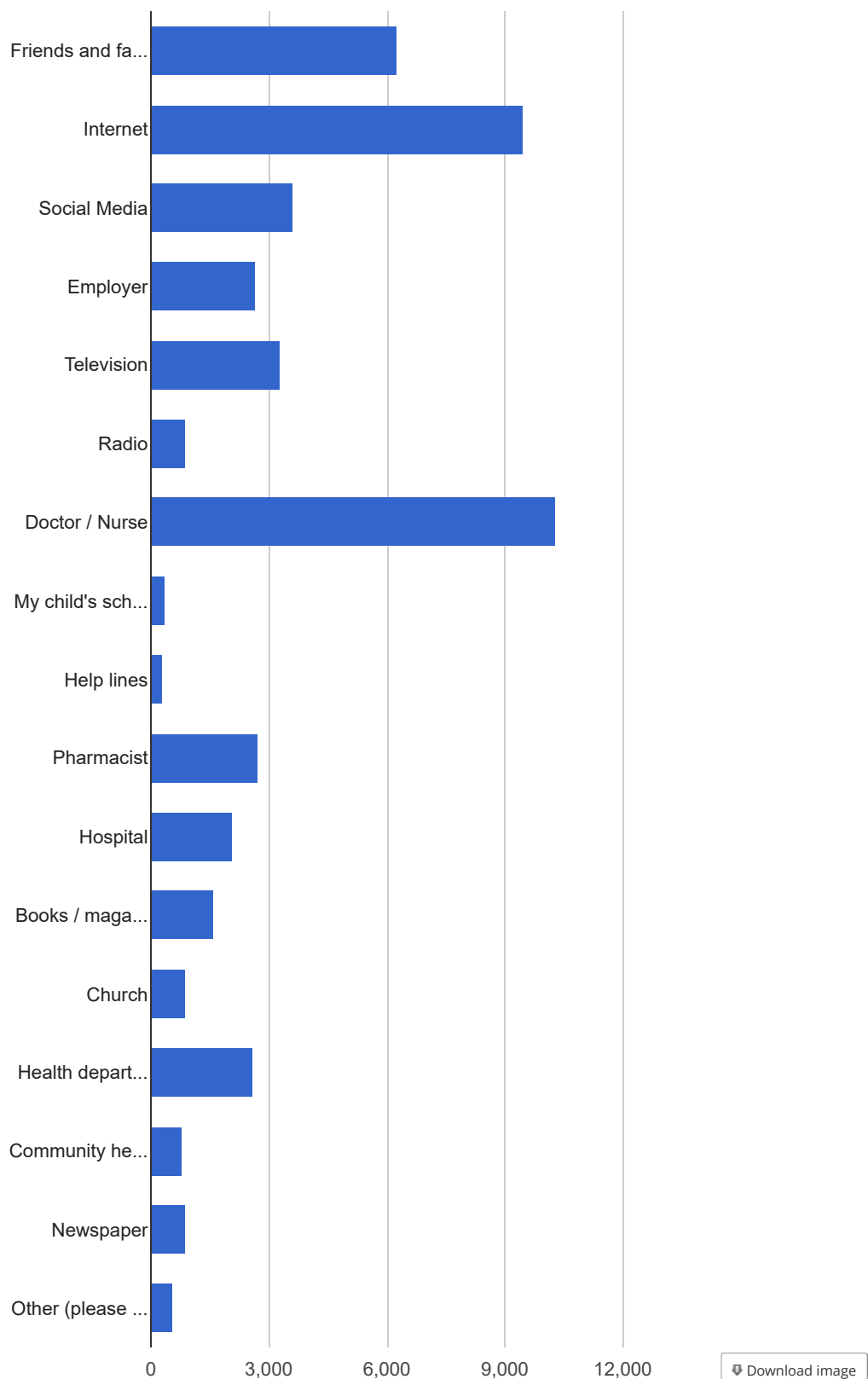
Other *(health_info_other)*

Total Count (N)	Missing*
5	208 (97.7%)

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
208	5 (2.3%)	16

Counts/frequency: Mammogram (84, 40.4%), Prostate cancer screening (15, 7.2%), Colon / Rectal exam (22, 10.6%), Blood sugar check (97, 46.6%), Cholesterol (99, 47.6%), Hearing Screening (19, 9.1%), Bone density test (18, 8.7%), Physical Exam (103, 49.5%), Pap Smear (51, 24.5%), Flu shot (93, 44.7%), Blood pressure check (139, 66.8%), Skin cancer screening (24, 11.5%), Vision screening (83, 39.9%), Cardiovascular screening (21, 10.1%), Dental cleaning / x-rays (103, 49.5%), None of the above (6, 2.9%)
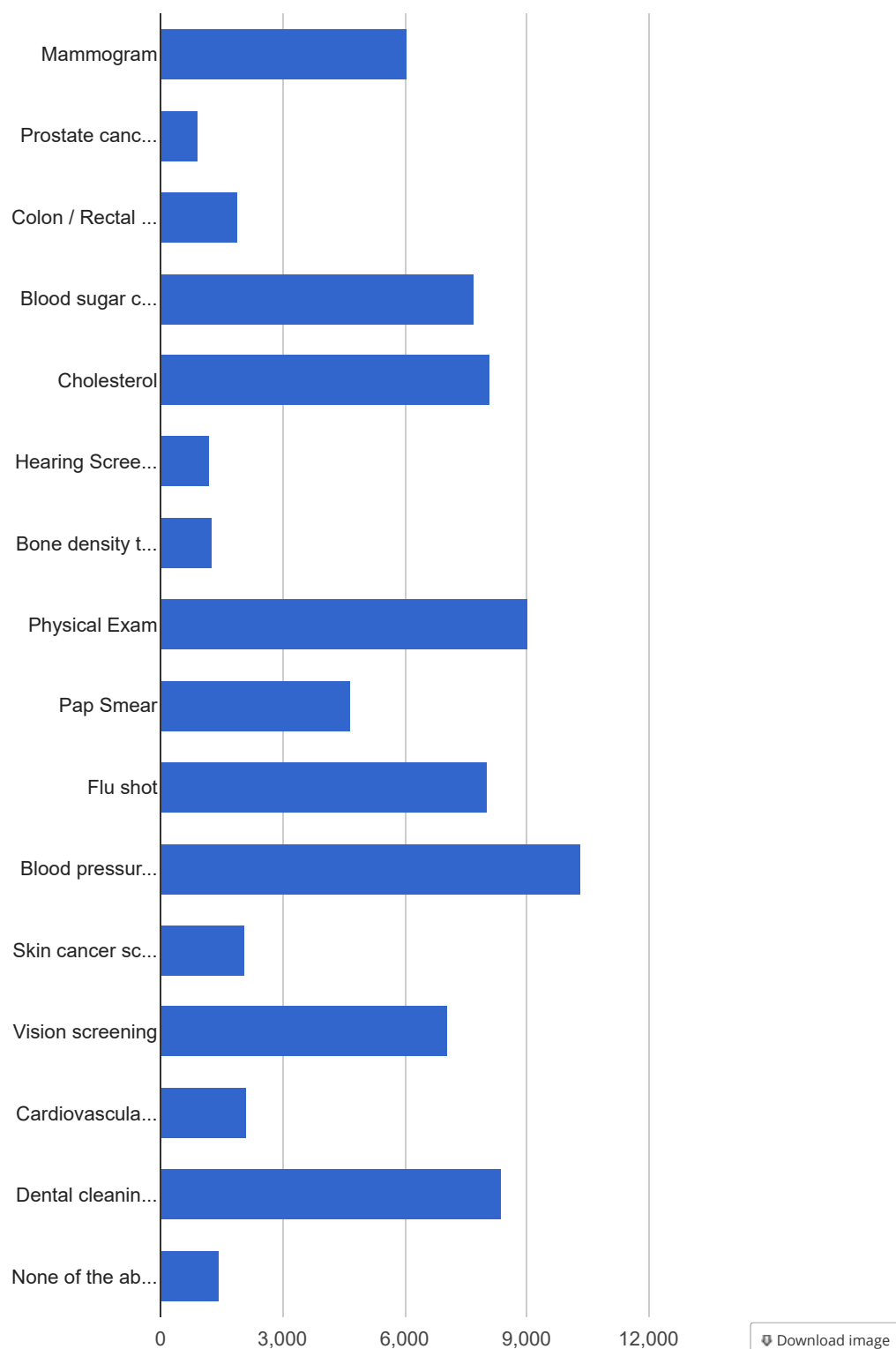
During a normal week, other than in your regular job, do you engage in any physical activity or exercise that lasts at least a half an hour? (Please select only one) *(physicalactivity)*

Total Count (N)	Missing*	Unique
209	4 (1.9%)	3

Counts/frequency: Yes How many times per week? (92, 44.0%), No (106, 50.7%), Don't know /not sure (11, 5.3%)
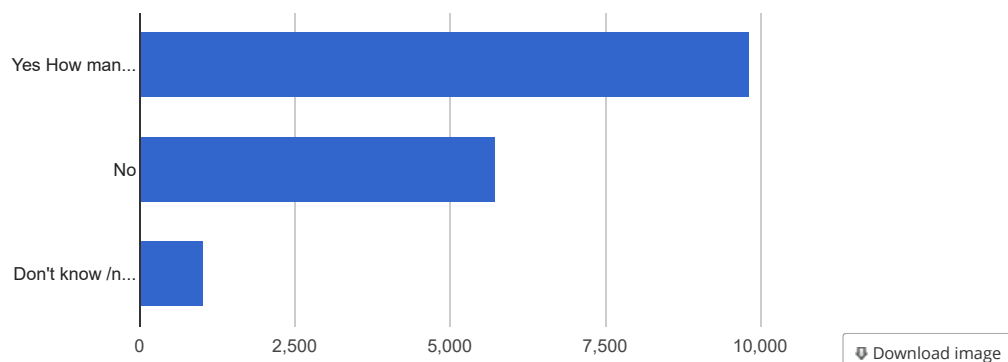
How many times per week? *(excercisetimesweek)*

Total Count (N)	Missing*	Unique
92	121 (56.8%)	4

Counts/frequency: 1 (5, 5.4%), 2 (21, 22.8%), 3 (23, 25.0%), 4 times or more per week (43, 46.7%)
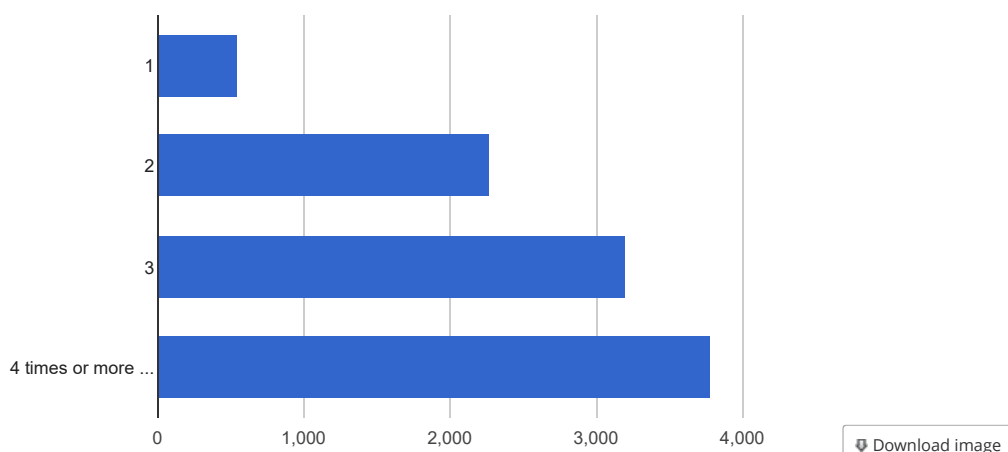
If you do not exercise at least a half hour a few days each week, please select the reasons why you do not exercise? (Please select all that apply) *(notexercise)*

Total Count (N)	Missing*	Unique
147	66 (31.0%)	16

Counts/frequency: My job is physical or hard labor. (30, 20.4%), Exercise is not important to me. (3, 2.0%), It costs too much to exercise. (10, 6.8%), There is no safe place to exercise. (26, 17.7%), I don't have enough time to exercise. (30, 20.4%), I'm too tired to exercise. (53, 36.1%), I would need child care and I don't have it. (6, 4.1%), I'm physically disabled. (15, 10.2%), I don't know how to find exercise partners. (10, 6.8%), I don't know how to safely (6, 4.1%), I would need transportation and I don't have it. (1, 0.7%), I don't like to exercise. (32, 21.8%), I don't have access to a facility that has the things I need, like a pool, golf course, or a track. (43, 29.3%), Facilities closed due to COVID 19 (14, 9.5%), Low self-image (17, 11.6%), Other (please specify) (12, 8.2%)
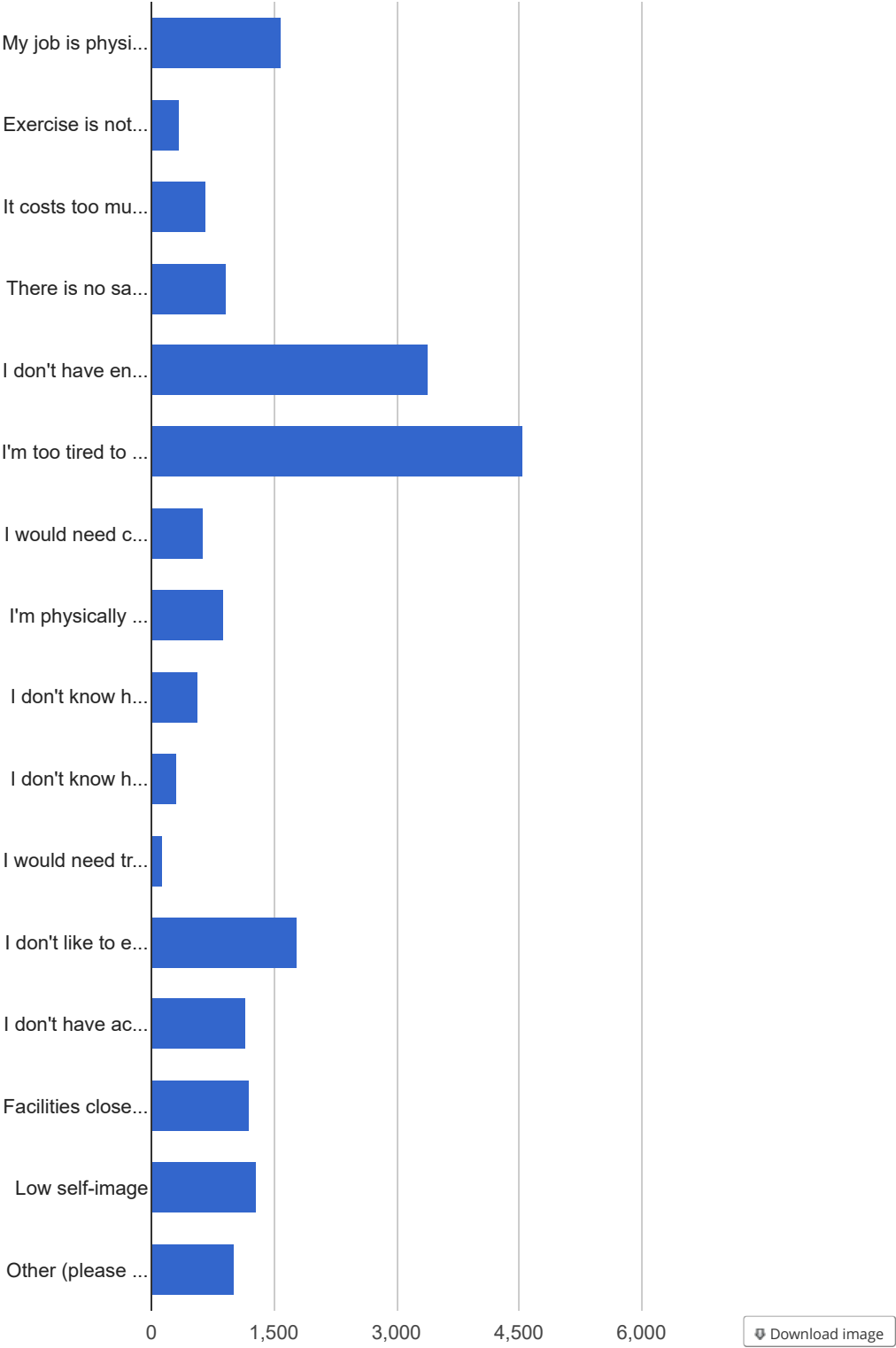
Other *(exercise_other)*

Total Count (N)	Missing*
11	202 (94.8%)

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

Total Count (N)	Missing*	Unique
197	16 (7.5%)	6

Counts/frequency: Cigarettes (30, 15.2%), E-cigs / electronic cigarettes (0, 0.0%), Chewing Tobacco (2, 1.0%), Vaping (6, 3.0%), Pipe (0, 0.0%), Cigars (2, 1.0%), Snuff / Dip (6, 3.0%), Other (please list) (0, 0.0%), None (157, 79.7%)
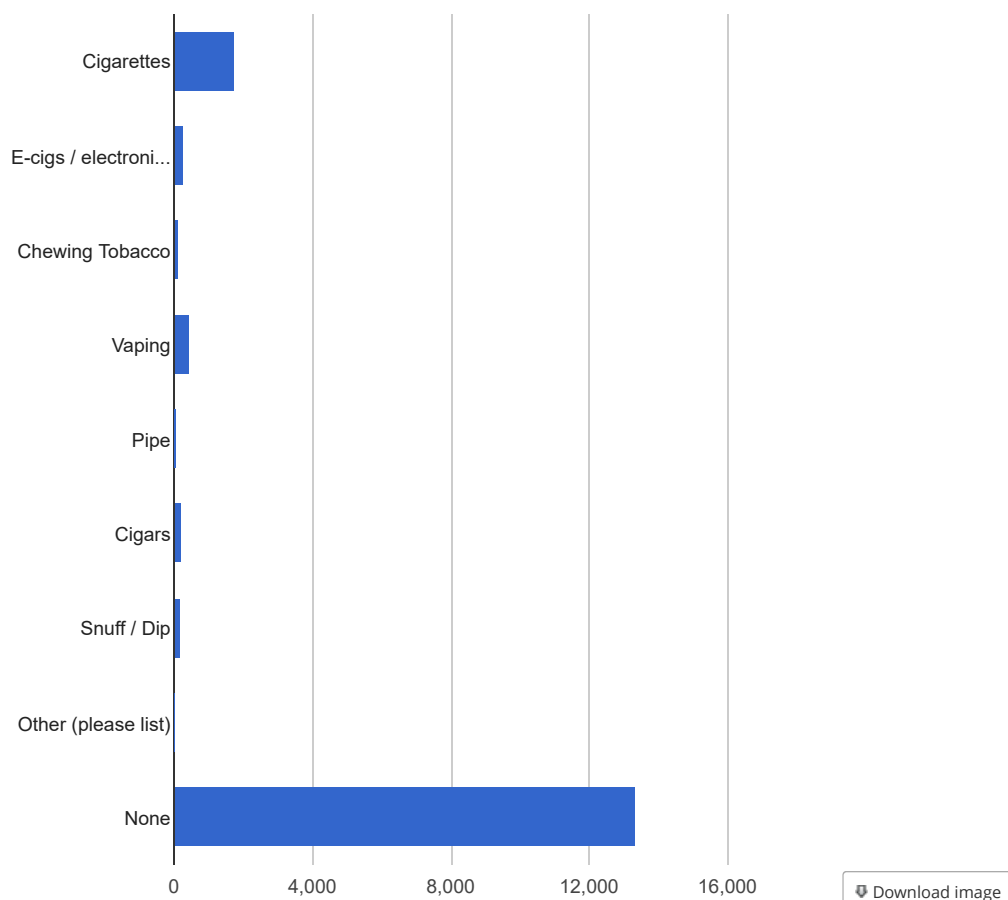
Other (please list) *(other_please_list)*

Total Count (N)	Missing*
0	213 (100.0%)

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

Total Count (N)	Missing*	Unique
30	183 (85.9%)	7

Counts/frequency: Quit Line NC (5, 16.7%), Doctor (10, 33.3%), Pharmacy (1, 3.3%), Health Dept (2, 6.7%), Private counselor / therapist (0, 0.0%), I don't know (5, 16.7%), N/A, I don't want to quit (6, 20.0%), Other (please share more) (1, 3.3%)
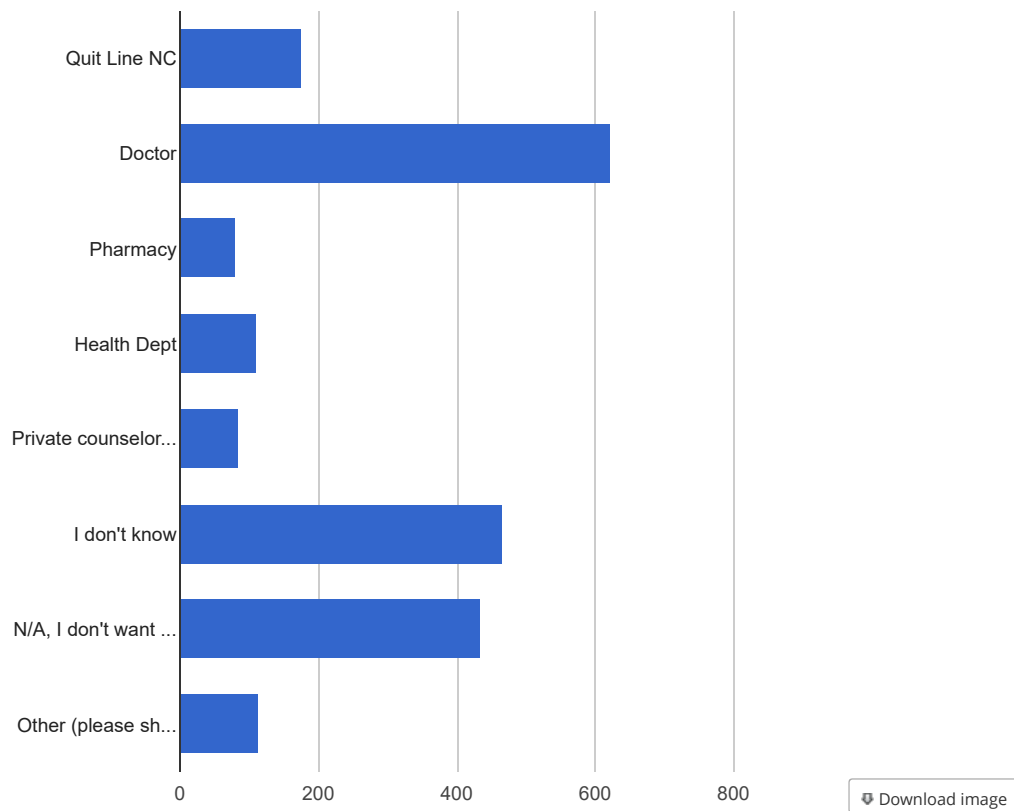
Other: *(quit_other)*

Total Count (N)	Missing*
1	212 (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
209	4 (1.9%)	3

Counts/frequency: flu shot (126, 60.3%), flu mist (0, 0.0%), No (76, 36.4%), Don't know or not sure (7, 3.3%)
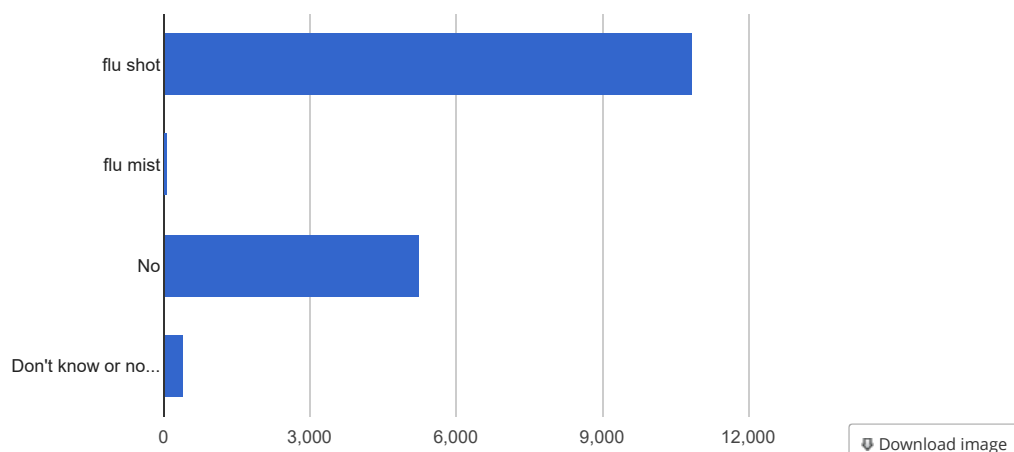
If you did not get your flu vaccine, why not? Please check any barriers. *(flu_barriers)*

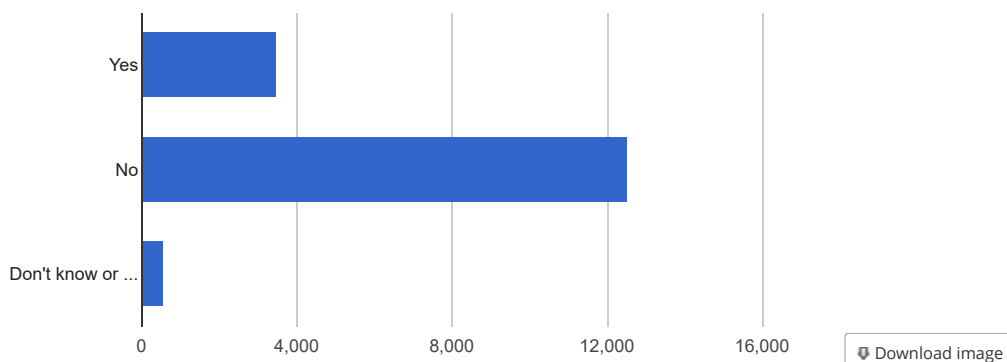| Total Count (N)	Missing*	Unique
67	146 (68.5%)	5

Counts/frequency: cost (2, 3.0%), transportation (0, 0.0%), access (0, 0.0%), time (3, 4.5%), fear (2, 3.0%), need more info / have questions (2, 3.0%), personal preference (58, 86.6%)
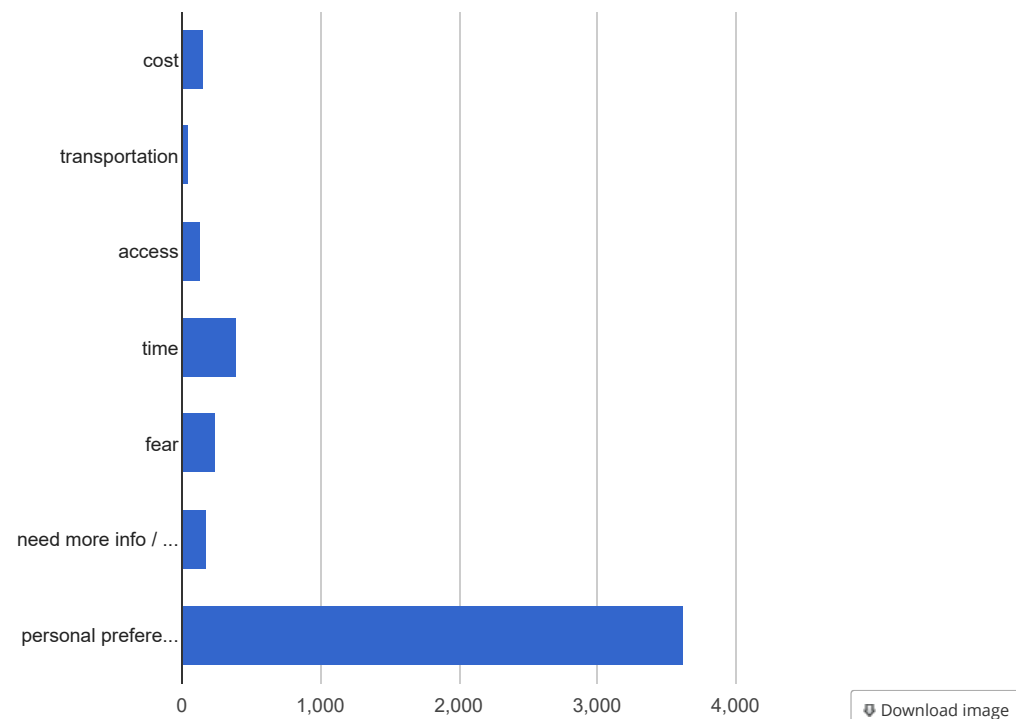
⬇ Download image

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

Total Count (N)	Missing*	Unique
209	4 (1.9%)	3

Counts/frequency: Yes (140, 67.0%), No (65, 31.1%), Don't know or not sure (4, 1.9%)
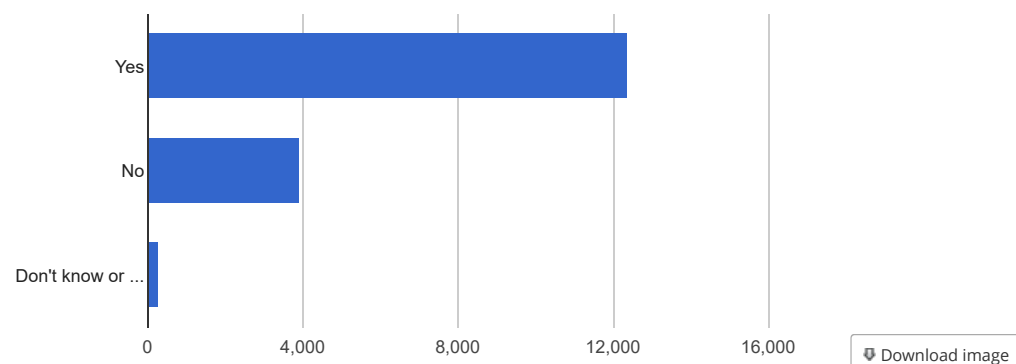
⬇ Download image

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

Total Count (N)	Missing*	Unique
63	150 (70.4%)	6

Counts/frequency: cost (1, 1.6%), transportation (0, 0.0%), access (0, 0.0%), time (1, 1.6%), fear (4, 6.3%), need more info / have questions (9, 14.3%), personal preference (41, 65.1%), other (7, 11.1%)
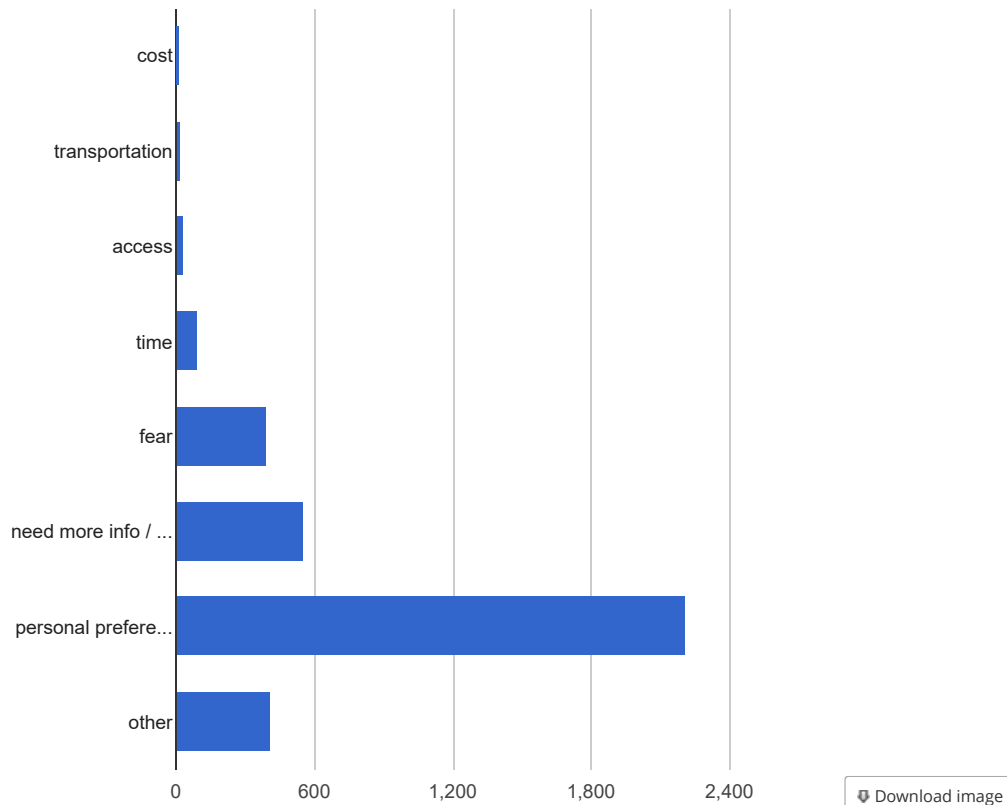
In the past 12 months, did you have a problem getting the health care you needed for you personally or for a family member from any type of health care provider, dentist, pharmacy, or other facility? (Please choose only one) *(healthcarehelp)*
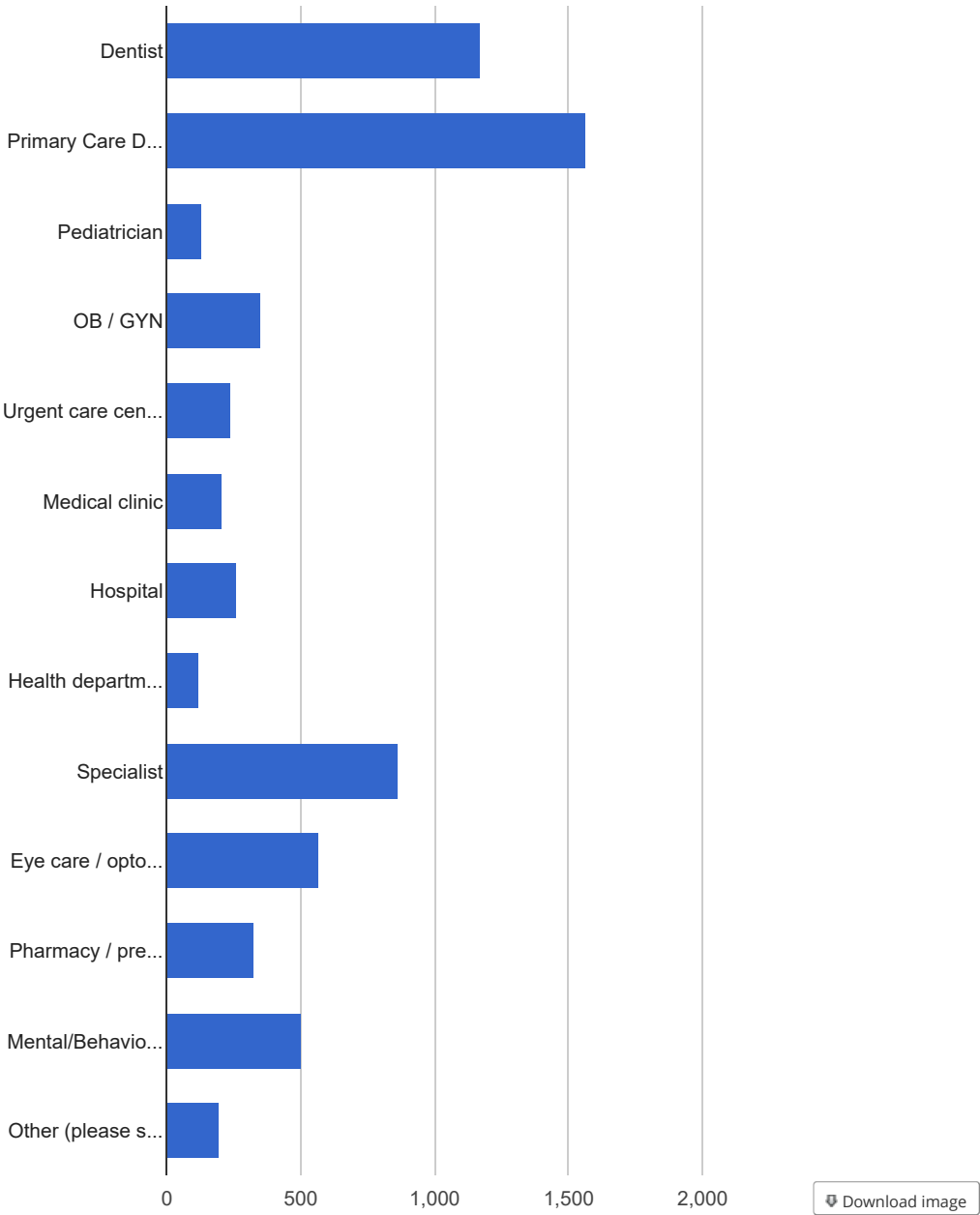
Total Count (N)	Missing*	Unique
209	4 (1.9%)	3

Counts/frequency: Yes (38, 18.2%), No (162, 77.5%), Don't know or not sure (9, 4.3%)

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
38	175 (82.2%)	13

Counts/frequency: Dentist (13, 34.2%), Primary Care Doctor (16, 42.1%), Pediatrician (2, 5.3%), OB / GYN (5, 13.2%), Urgent care center (6, 15.8%), Medical clinic (3, 7.9%), Hospital (3, 7.9%), Health department (4, 10.5%), Specialist (15, 39.5%), Eye care / optometrist / opthamologist (9, 23.7%), Pharmacy / prescriptions (5, 13.2%), Mental/Behavioral Health Providers (8, 21.1%), Other (please share more) (3, 7.9%)


Other *(healthcareprovider_other)*

Total Count (N)	Missing*
3	210 (98.6%)

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

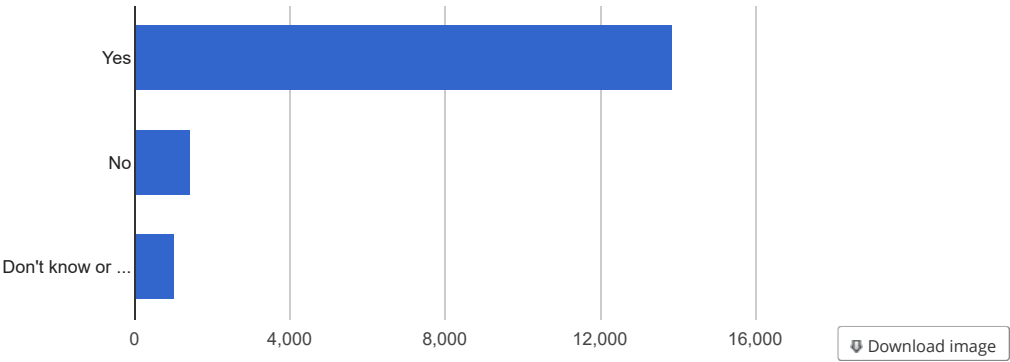| Total Count (N)	Missing*	Unique
39	174 (81.7%)	12

Counts/frequency: No health insurance (10, 25.6%), Insurance didn't cover what I / we needed. (10, 25.6%), My / our share of the cost (deductible / co-pay) was too high. (6, 15.4%), Service provider would not take my / our insurance or Medicaid. (2, 5.1%), No way to get there. (4, 10.3%), Didn't know where to go (5, 12.8%), Couldn't get an appointment (11, 28.2%), The wait was too long (8, 20.5%), Did not speak my language (0, 0.0%), Could not miss work to go (2, 5.1%), Hours did not work with my availability (5, 12.8%), COVID 19 (10, 25.6%), The provider denied me care or treated me in a discriminatory manner because of a protected status (age, race, sexual preference, disease, etc.) (1, 2.6%)
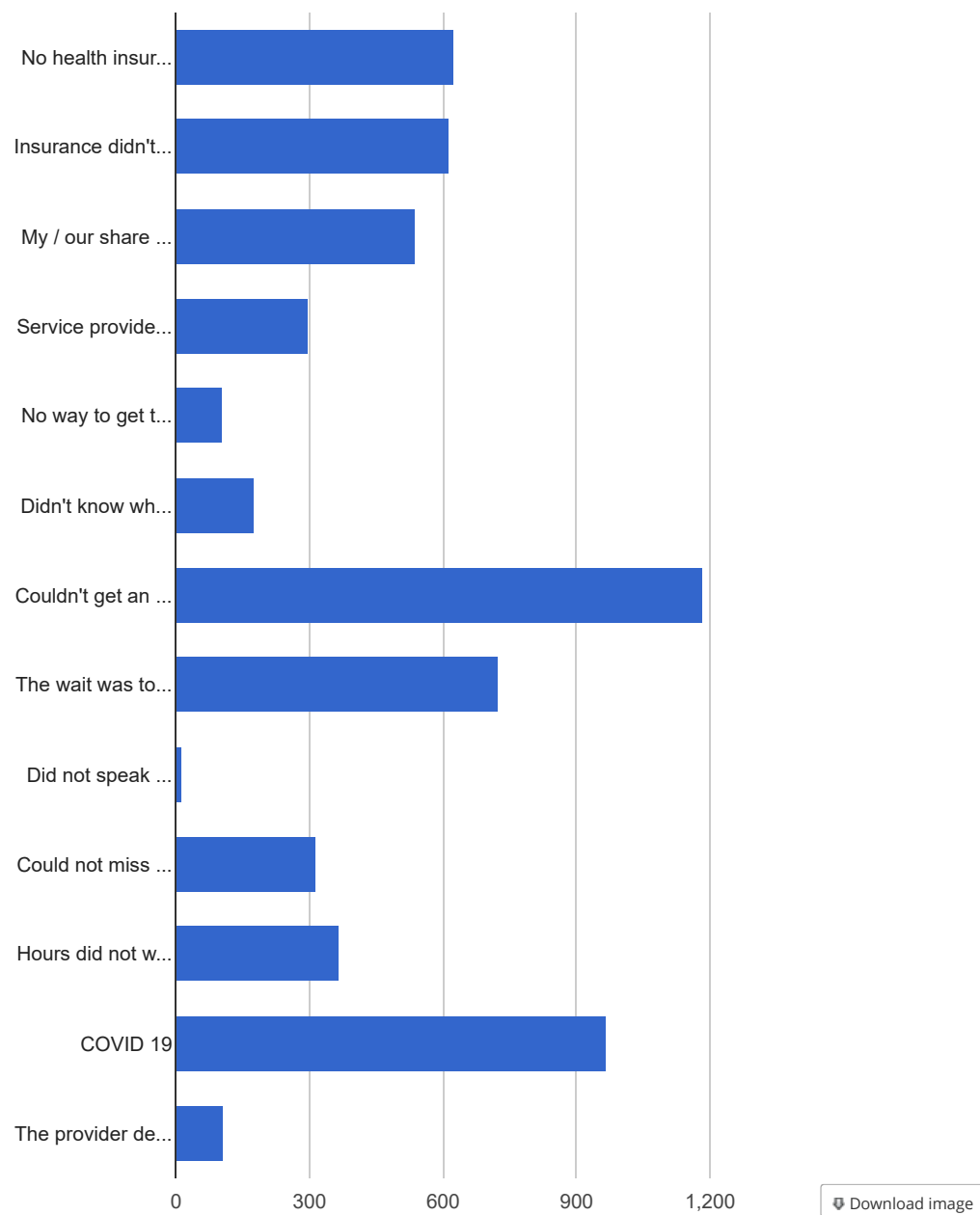
In a natural disaster (hurricane, flooding, tornado, etc.), do you feel like you know how to access or find the information you need to stay safe? *(naturaldisasteraccess)*
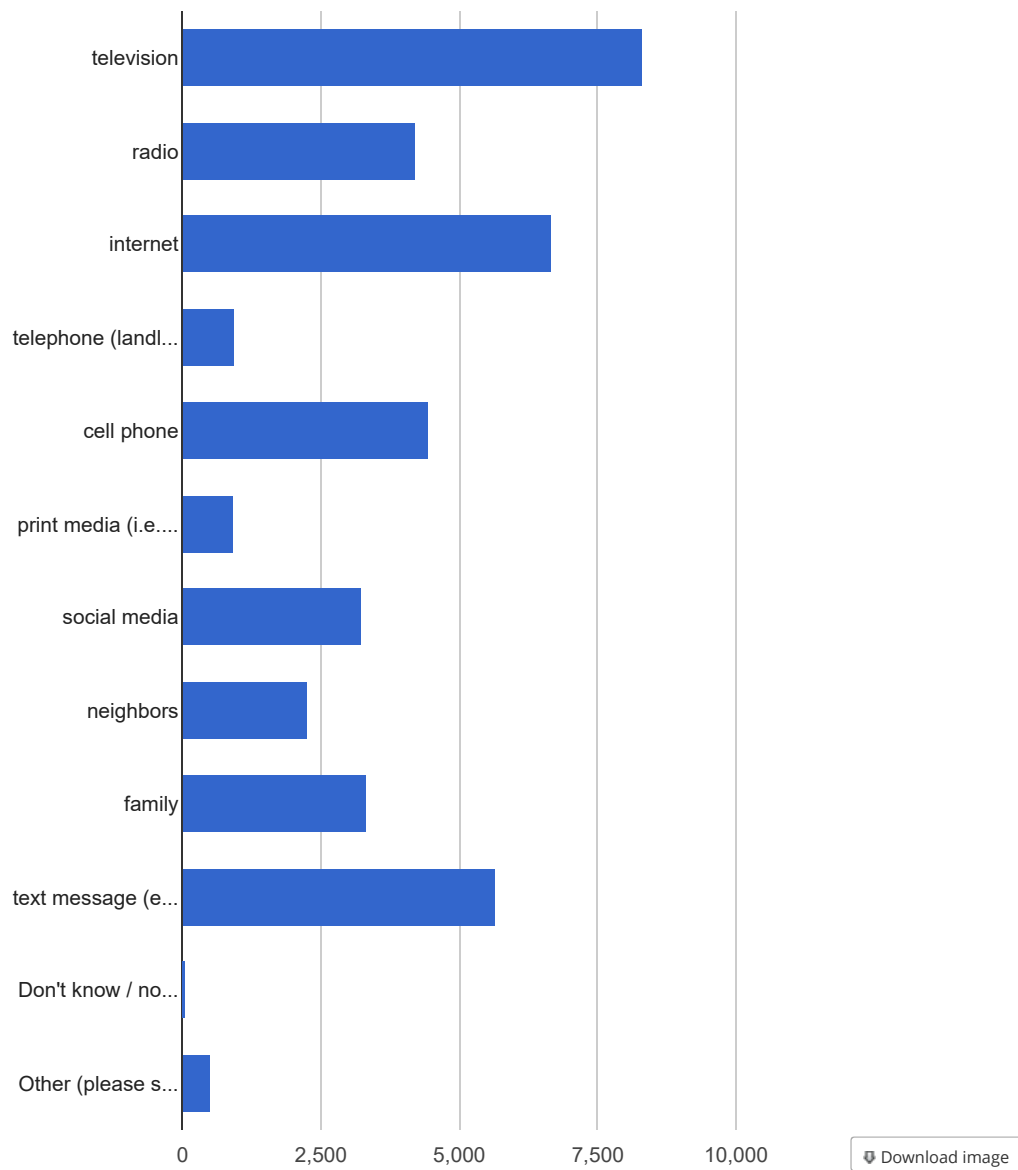
Total Count (N)	Missing*	Unique
208	5 (2.3%)	3

Counts/frequency: Yes (181, 87.0%), No (18, 8.7%), Don't know or not sure (9, 4.3%)

⬇ Download image

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

Total Count (N)	Missing*	Unique
183	30 (14.1%)	11

Counts/frequency: television (105, 57.4%), radio (52, 28.4%), internet (79, 43.2%), telephone (landline) (22, 12.0%), cell phone (54, 29.5%), print media (i.e.. newspaper) (5, 2.7%), social media (33, 18.0%), neighbors (34, 18.6%), family (40, 21.9%), text message (emergency alert system) (87, 47.5%), Don't know / not sure (0, 0.0%), Other (please specify) (9, 4.9%)
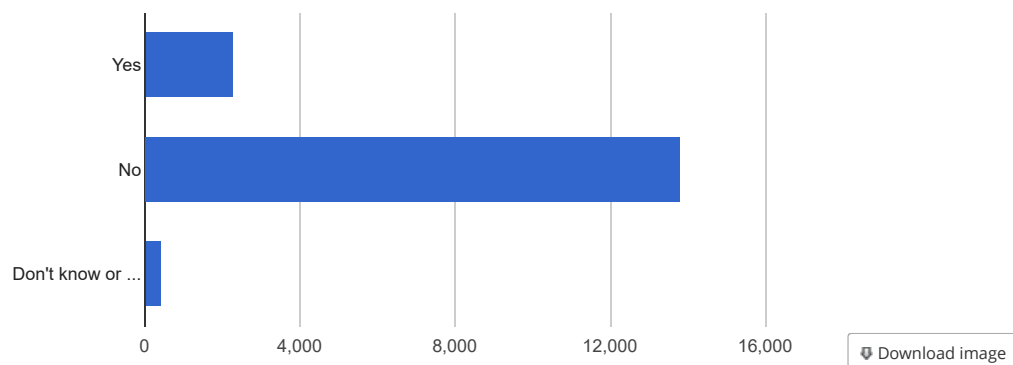
Other *(natural_disaster_other)*

Total Count (N)	Missing*
8	205 (96.2%)

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
209	4 (1.9%)	3

Counts/frequency: Yes (28, 13.4%), No (176, 84.2%), Don't know or not sure (5, 2.4%)

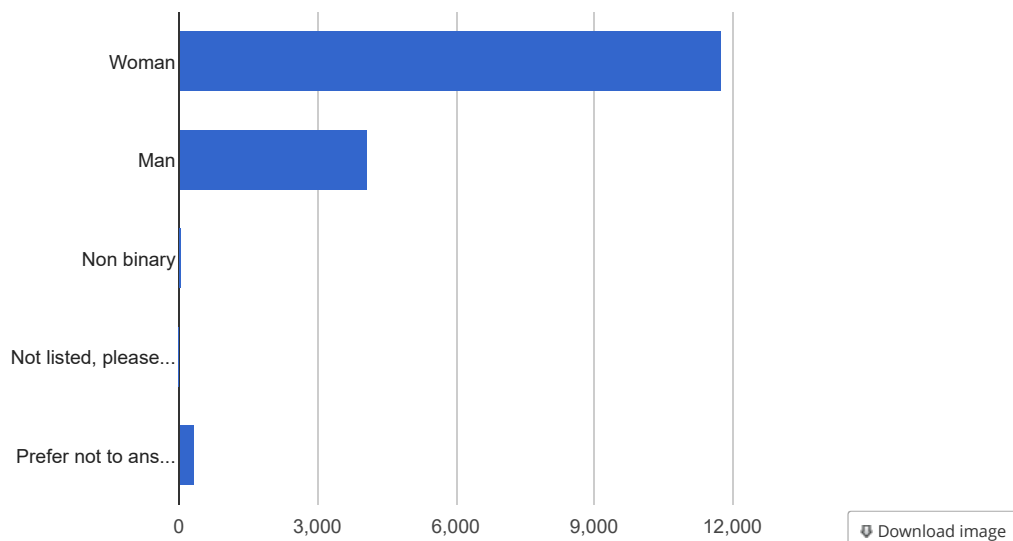## Is there anything else you would like for us to know about your community? *(anythingelse)*

Total Count (N)	Missing*
46	167 (78.4%)

How would you describe yourself? *(gender)*

Total Count (N)	Missing*	Unique
207	6 (2.8%)	4

Counts/frequency: Woman (149, 72.0%), Man (55, 26.6%), Non binary (1, 0.5%), Not listed, please share more: _____ (0, 0.0%), Prefer not to answer (2, 1.0%)
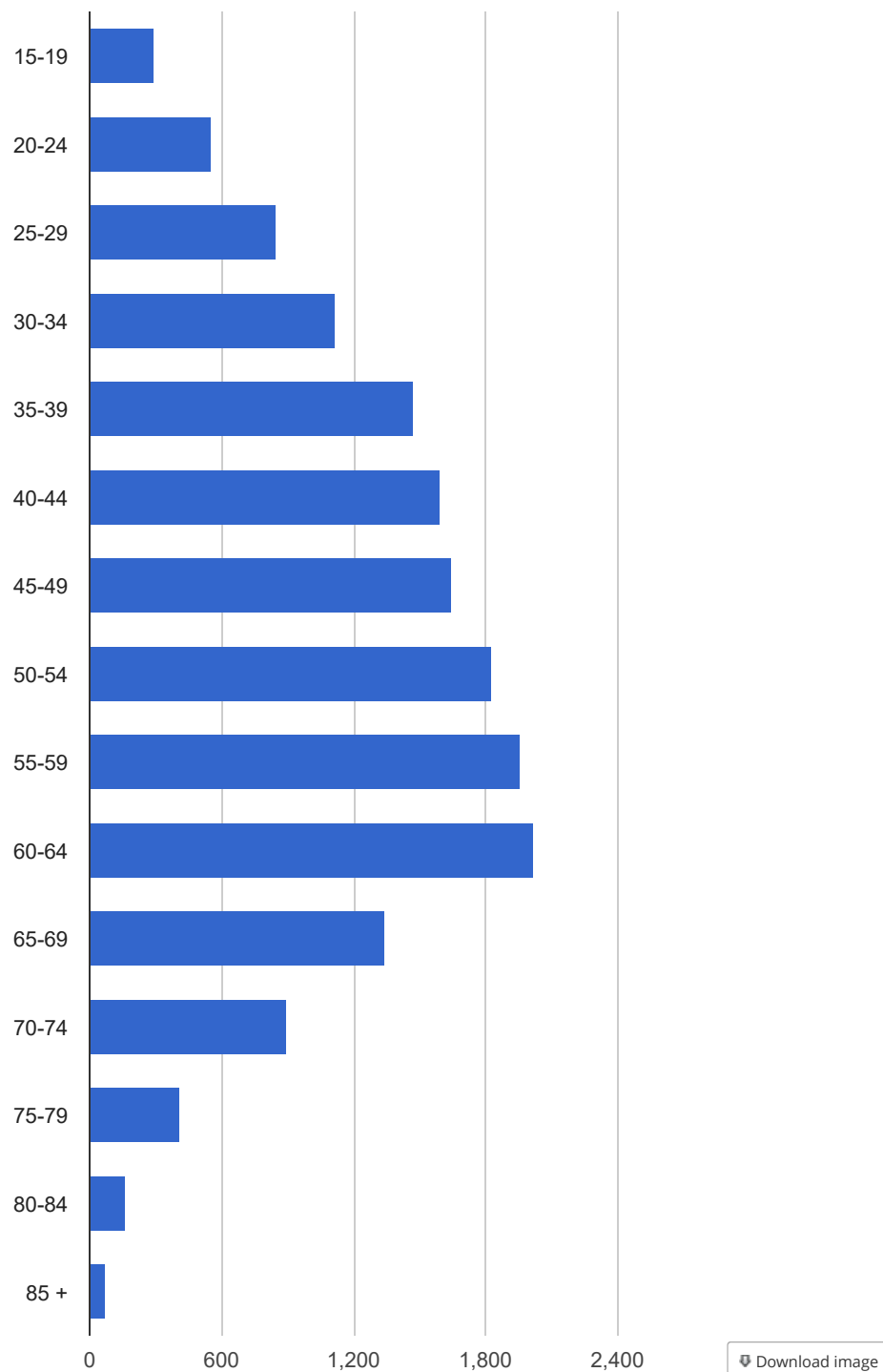

Please share more. *(gender_other)*

Total Count (N)	Missing*
0	213 (100.0%)

How old are you? *(age)*

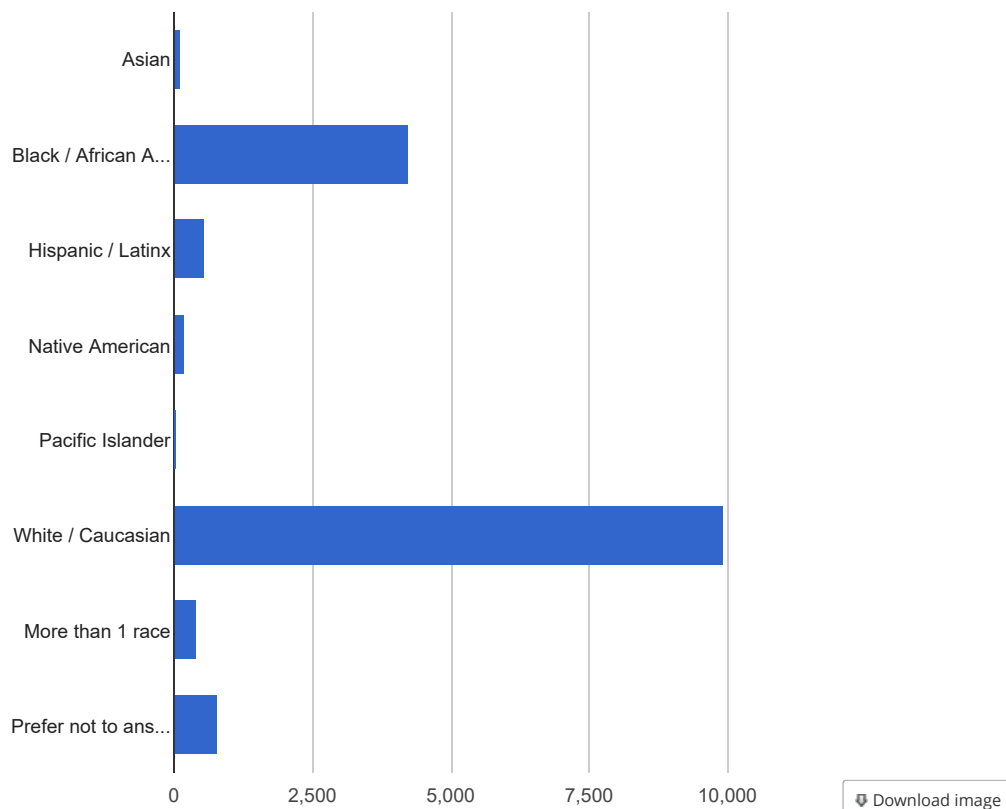| Total Count (N)	Missing*	Unique
208	5 (2.3%)	14

Counts/frequency: 15-19 (0, 0.0%), 20-24 (2, 1.0%), 25-29 (7, 3.4%), 30-34 (19, 9.1%), 35-39 (14, 6.7%), 40-44 (14, 6.7%), 45-49 (9, 4.3%), 50-54 (10, 4.8%), 55-59 (29, 13.9%), 60-64 (36, 17.3%), 65-69 (33, 15.9%), 70-74 (19, 9.1%), 75-79 (8, 3.8%), 80-84 (4, 1.9%), 85 + (4, 1.9%)

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

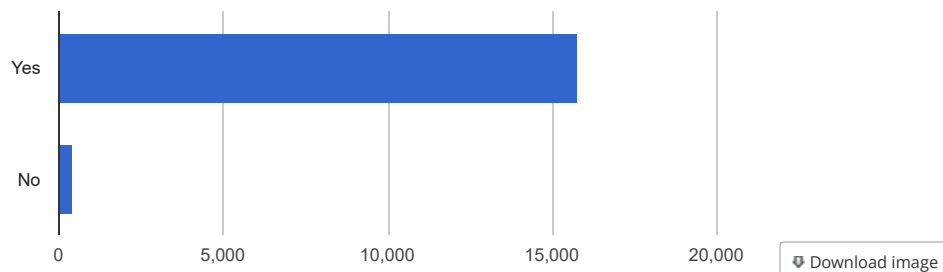| Total Count (N)	Missing*	Unique
208	5 (2.3%)	5

Counts/frequency: Asian (0, 0.0%), Black / African American (53, 25.5%), Hispanic / Latinx (5, 2.4%), Native American (0, 0.0%), Pacific Islander (0, 0.0%), White / Caucasian (139, 66.8%), More than 1 race (2, 1.0%), Prefer not to answer (9, 4.3%)

Is English the primary language spoken in your home? *(language)*
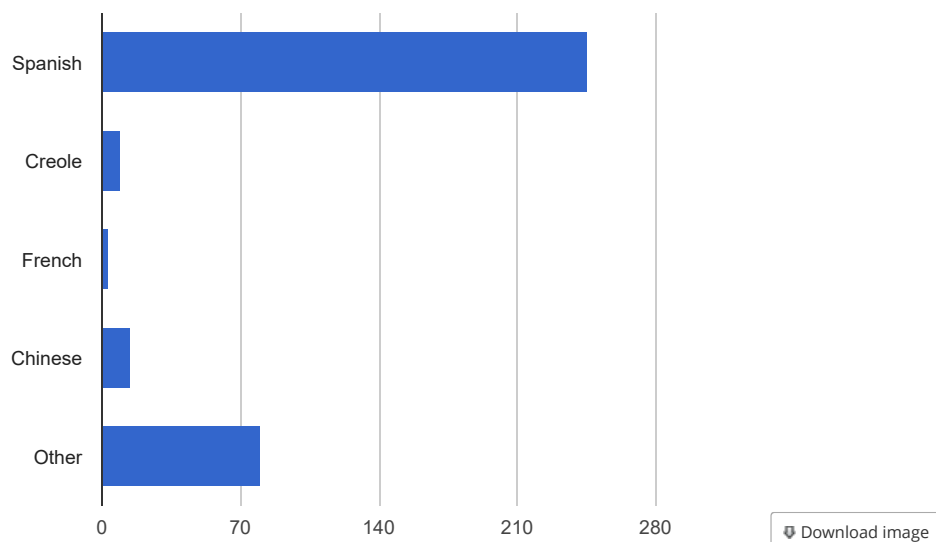
Total Count (N)	Missing*	Unique
208	5 (2.3%)	2

Counts/frequency: Yes (203, 97.6%), No (5, 2.4%)

If no, please share which primary language *(languageno)*

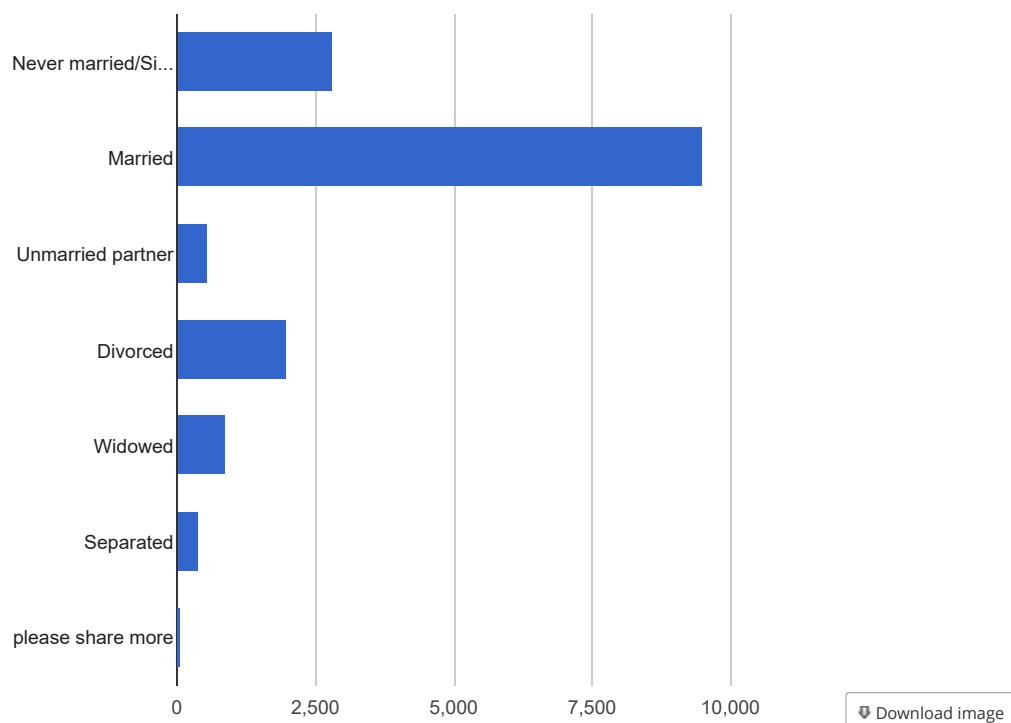| Total Count (N)	Missing*	Unique
2	211 (99.1%)	2

Counts/frequency: Spanish (1, 50.0%), Creole (1, 50.0%), French (0, 0.0%), Chinese (0, 0.0%), Other (0, 0.0%)

What is your marital status? *(marriagestatus)*

Total Count (N)	Missing*	Unique
208	5 (2.3%)	6

Counts/frequency: Never married/Single (34, 16.3%), Married (134, 64.4%), Unmarried partner (2, 1.0%), Divorced (21, 10.1%), Widowed (16, 7.7%), Separated (1, 0.5%), please share more (0, 0.0%)


please share more. *(marital_other)*

Total Count (N)	Missing*
0	213 (100.0%)

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

Total Count (N)	Missing*	Unique
207	6 (2.8%)	7

Counts/frequency: Less than 9th grade (3, 1.4%), 9th - 12th grade, no diploma (12, 5.8%), High School graduate (or GED/equivalent) (40, 19.3%), Associate's Degree or Vocational Training (42, 20.3%), Some college (no degree) (40, 19.3%), Bachelor's Degree (38, 18.4%), Graduate or professional degree (32, 15.5%), please share more (0, 0.0%)
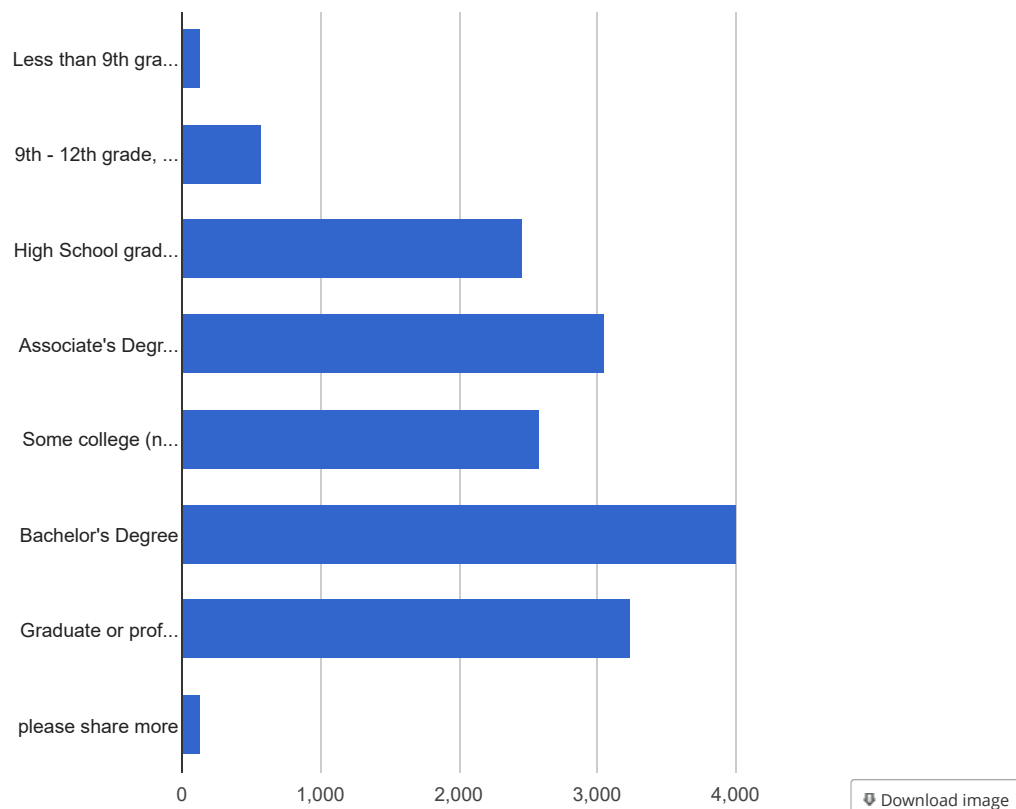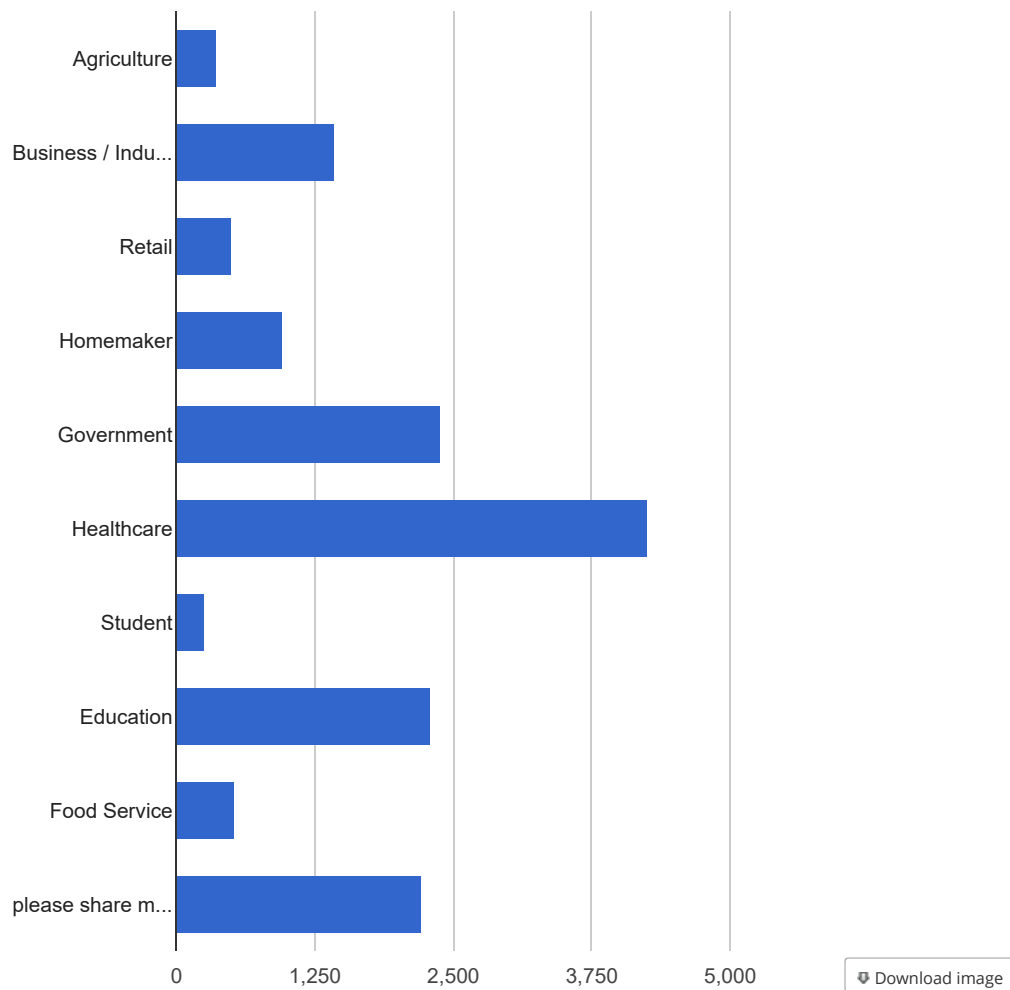

Please share more *(please_share_more)*

Total Count (N)	Missing*
0	213 (100.0%)

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

Total Count (N)	Missing*	Unique
175	38 (17.8%)	9

Counts/frequency: Agriculture (8, 4.6%), Business / Industry (21, 12.0%), Retail (8, 4.6%), Homemaker (26, 14.9%), Government (22, 12.6%), Healthcare (17, 9.7%), Student (0, 0.0%), Education (30, 17.1%), Food Service (8, 4.6%), please share more (35, 20.0%)
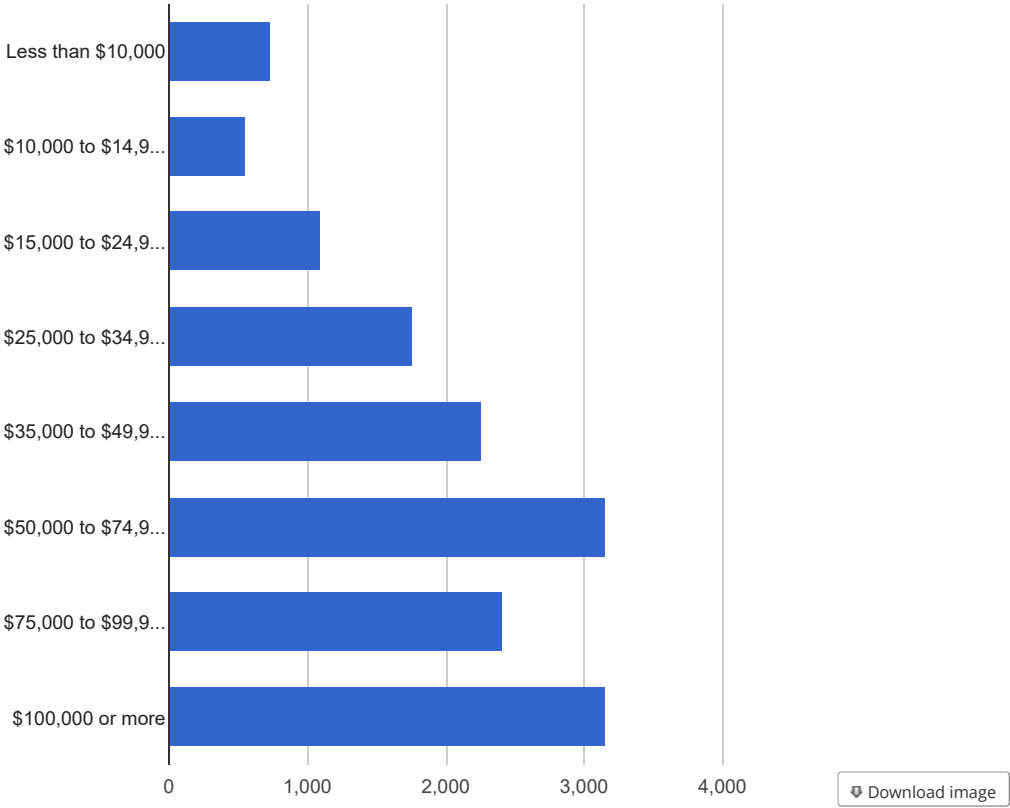
Please share more *(job_other)*

Total Count (N)	Missing*
33	180 (84.5%)

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

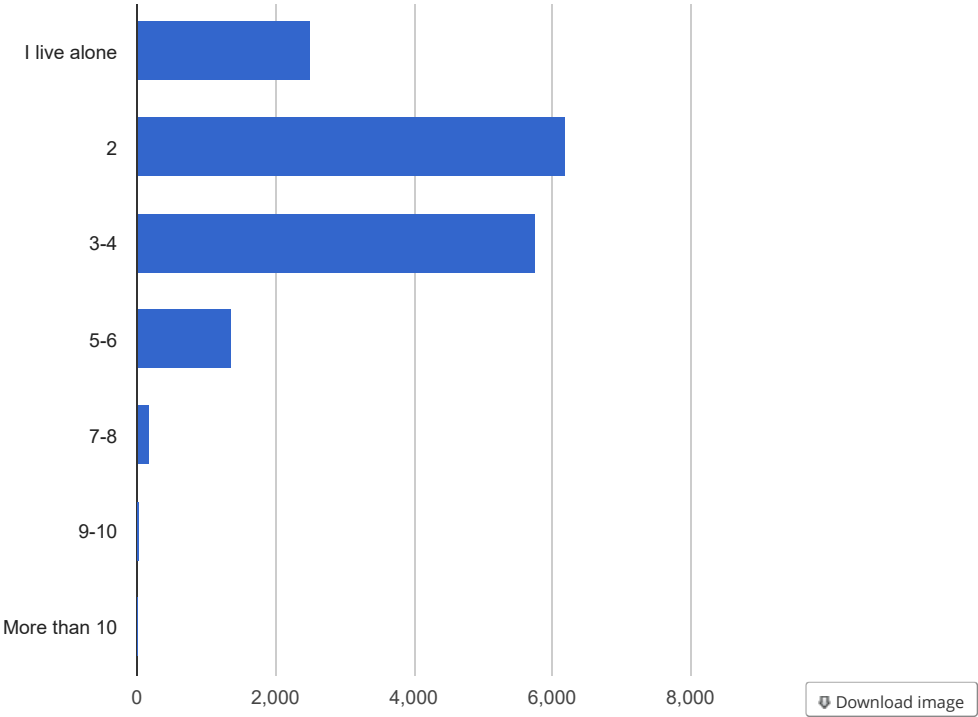| Total Count (N)	Missing*	Unique
190	23 (10.8%)	8

Counts/frequency: Less than $10,000 (21, 11.1%), $10,000 to $14,999 (10, 5.3%), $15,000 to $24,999 (16, 8.4%), $25,000 to $34,999 (20, 10.5%), $35,000 to $49,999 (36, 18.9%), $50,000 to $74,999 (46, 24.2%), $75,000 to $99,999 (19, 10.0%), $100,000 or more (22, 11.6%)

How many people live in your household? *(householdnumber)*
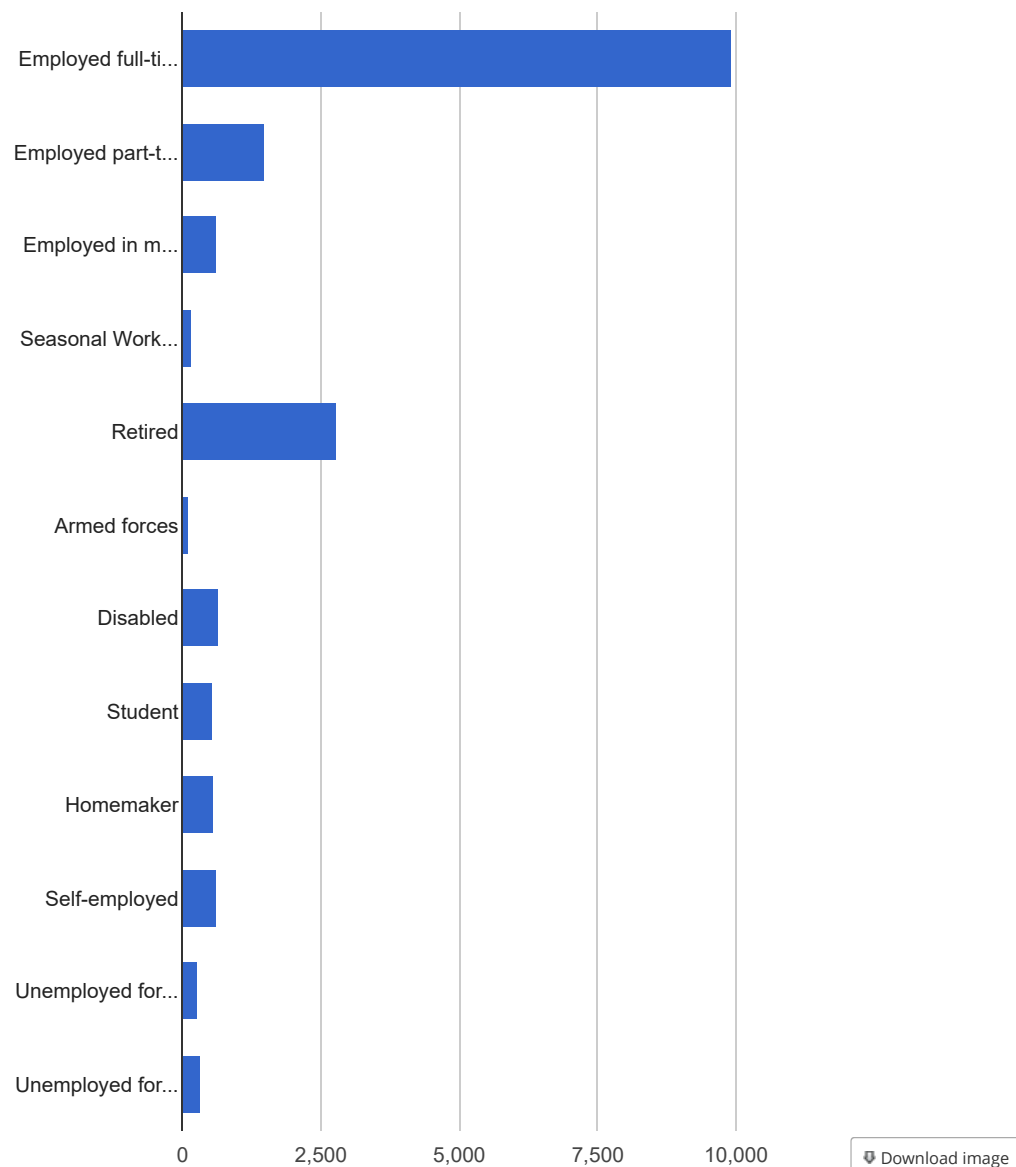
Total Count (N)	Missing*	Unique
201	12 (5.6%)	4

Counts/frequency: I live alone (36, 17.9%), 2 (97, 48.3%), 3-4 (48, 23.9%), 5-6 (20, 10.0%), 7-8 (0, 0.0%), 9-10 (0, 0.0%), More than 10 (0, 0.0%)

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

Total Count (N)	Missing*	Unique
204	9 (4.2%)	10

Counts/frequency: Employed full-time (82, 40.2%), Employed part-time (19, 9.3%), Employed in multiple jobs (10, 4.9%), Seasonal Worker/Temporary (6, 2.9%), Retired (63, 30.9%), Armed forces (0, 0.0%), Disabled (12, 5.9%), Student (2, 1.0%), Homemaker (17, 8.3%), Self-employed (20, 9.8%), Unemployed for 1 year or less (0, 0.0%), Unemployed for more than 1 year (9, 4.4%)

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

Total Count (N)	Missing*	Unique
205	8 (3.8%)	6

Counts/frequency: Dial up (3, 1.5%), Broadband (15, 7.3%), Wi-Fi (135, 65.9%), Cellular or Hotspot (22, 10.7%), None (23, 11.2%), please share more (7, 3.4%)
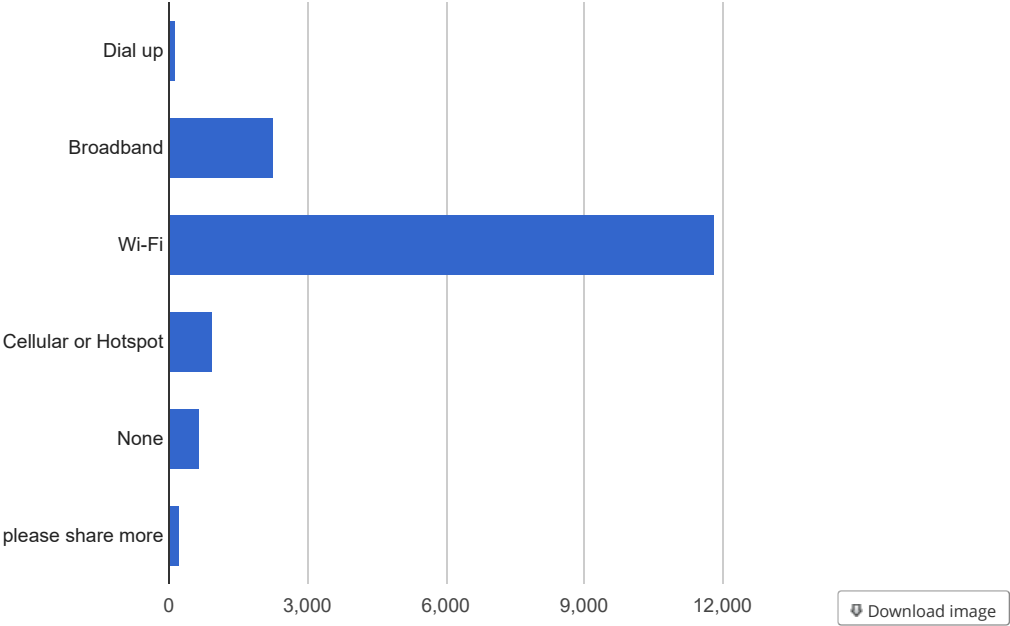
Other *(internet_or_wifi_other)*
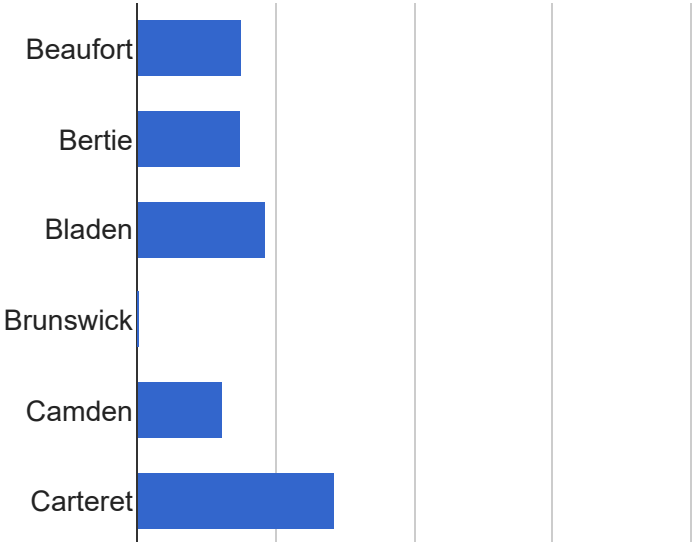
Total Count (N)	Missing*
7	206 (96.7%)

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

Total Count (N)	Missing*	Unique
213	0 (0.0%)	1

Counts/frequency: Beaufort (0, 0.0%), Bertie (0, 0.0%), Bladen (0, 0.0%), Brunswick (0, 0.0%), Camden (0, 0.0%), Carteret (0, 0.0%), Chowan (0, 0.0%), Columbus (0, 0.0%), Craven (0, 0.0%), Cumberland (0, 0.0%), Currituck (0, 0.0%), Dare (0, 0.0%), Duplin (0, 0.0%), Edgecombe (0, 0.0%), Franklin (0, 0.0%), Gates (0, 0.0%), Greene (0, 0.0%), Halifax (0, 0.0%), Harnett (0, 0.0%), Hertford (0, 0.0%), Hoke (0, 0.0%), Hyde (213, 100.0%), 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%)
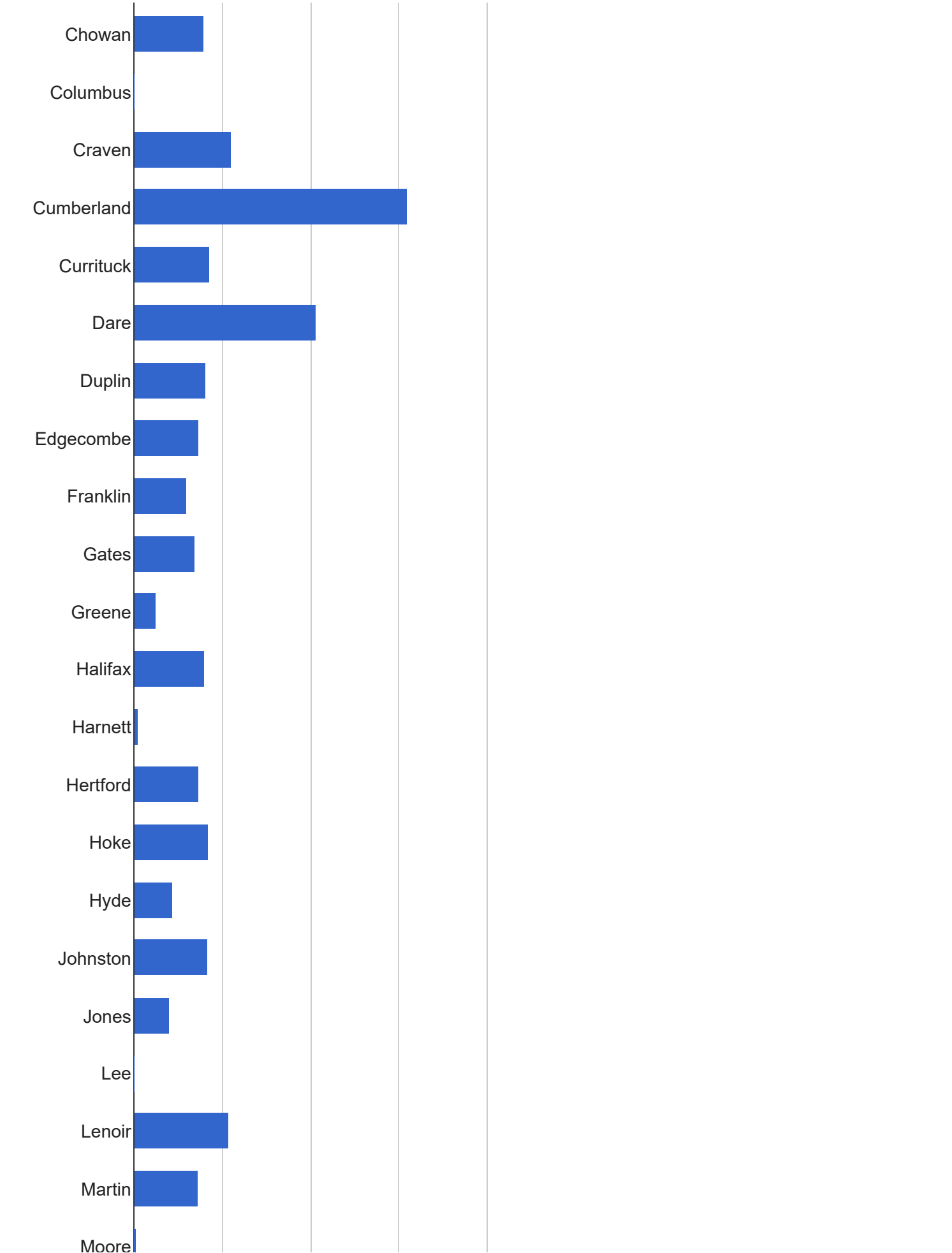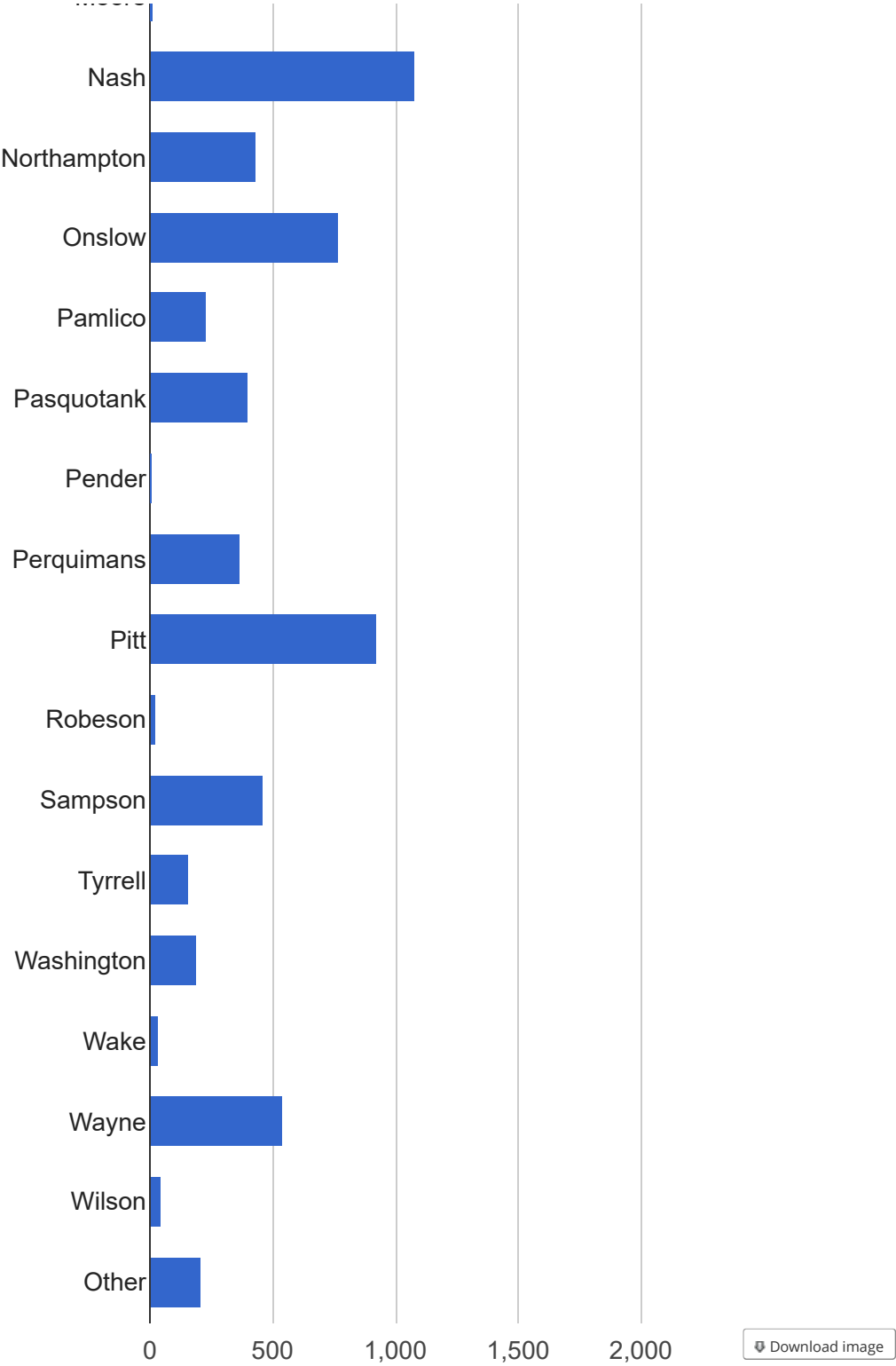
Other *(county_other)*

Total Count (N)	Missing*
0	213 (100.0%)

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

Total Count (N)	Missing*
60	153 (71.8%)

## 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
159	54 (25.4%)	13

Counts/frequency: I don't plan to get a vaccine. (41, 25.8%), I'm worried that the COVID-19 vaccine isn't safe. (22, 13.8%), I would rather take the risk of getting sick with COVID-19. (10, 6.3%), I'm worried the COVID-19 vaccine may be harmful or have side effects. (36, 22.6%), I'm worried there may be a cost associated with receiving the COVID-19 vaccine. (1, 0.6%), I have already had COVID-19 so I don't believe a vaccine is necessary. (6, 3.8%), I don't trust the distribution process of the COVID-19 vaccine. (8, 5.0%), I'm worried the COVID-19 vaccine has not been distributed fairly. (3, 1.9%), I'm worried that the location of the COVID-19 vaccine will be difficult to travel to. (1, 0.6%), I'm concerned that I won't have time to get the COVID-19 vaccine. (2, 1.3%), With multiple vaccines becoming available, I'm concerned about knowing which one is best for me. (8, 5.0%), I don't have any concerns about getting the COVID-19 vaccine. (83, 52.2%), Other (please specify) (13, 8.2%)
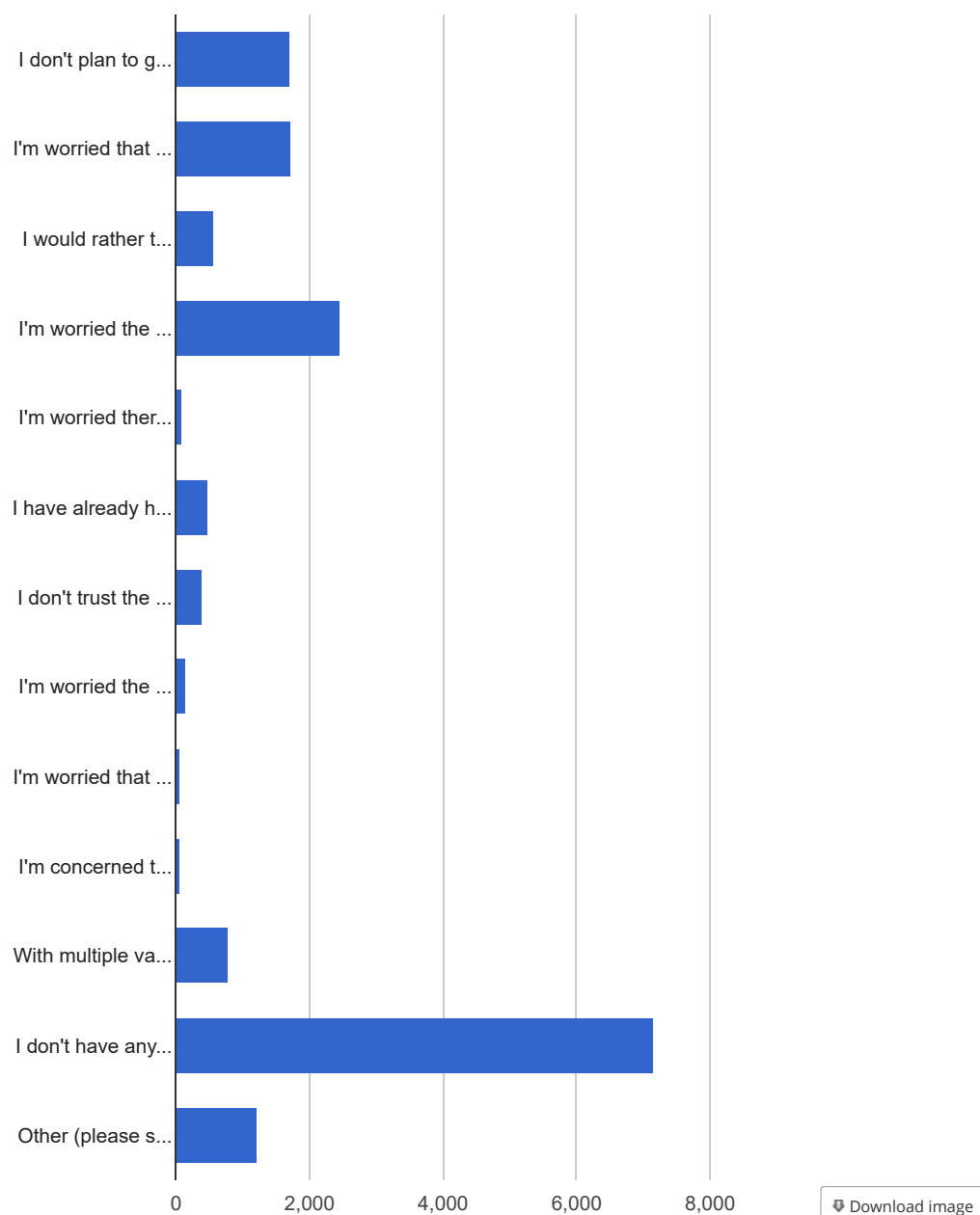
Other *(covid_concerns_other)*

Total Count (N)	Missing*
13	200 (93.9%)

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

Total Count (N)	Missing*	Unique
186	27 (12.7%)	5

Counts/frequency: Very Difficult (8, 4.3%), Somewhat Difficult (14, 7.5%), Moderate (28, 15.1%), Somewhat Easy (48, 25.8%), Very Easy (88, 47.3%)
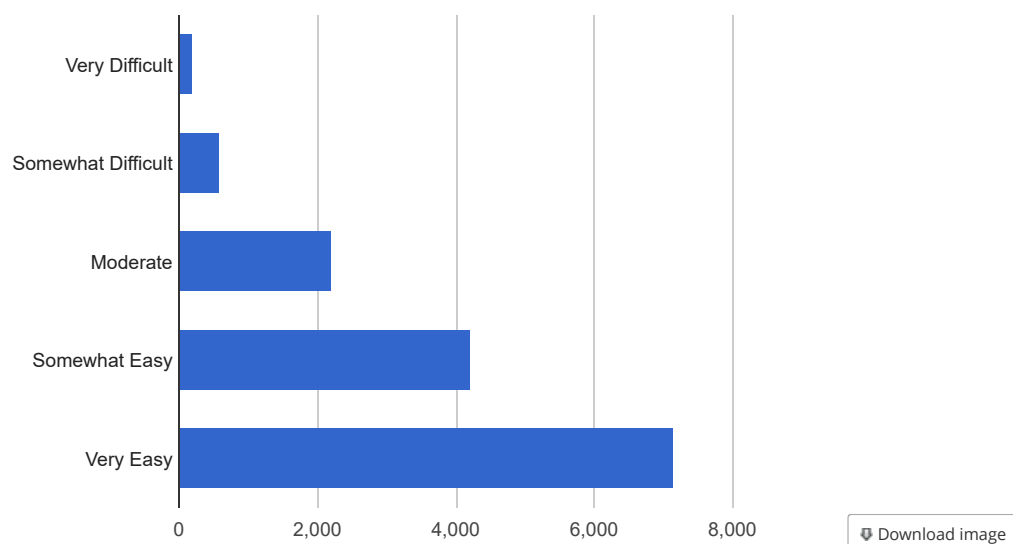
Find out where to go to get a COVID-19 vaccine? *(covidwhere)*

Total Count (N)	Missing*	Unique
184	29 (13.6%)	5

Counts/frequency: Very Difficult (2, 1.1%), Somewhat Difficult (2, 1.1%), Moderate (16, 8.7%), Somewhat Easy (38, 20.7%), Very Easy (126, 68.5%)
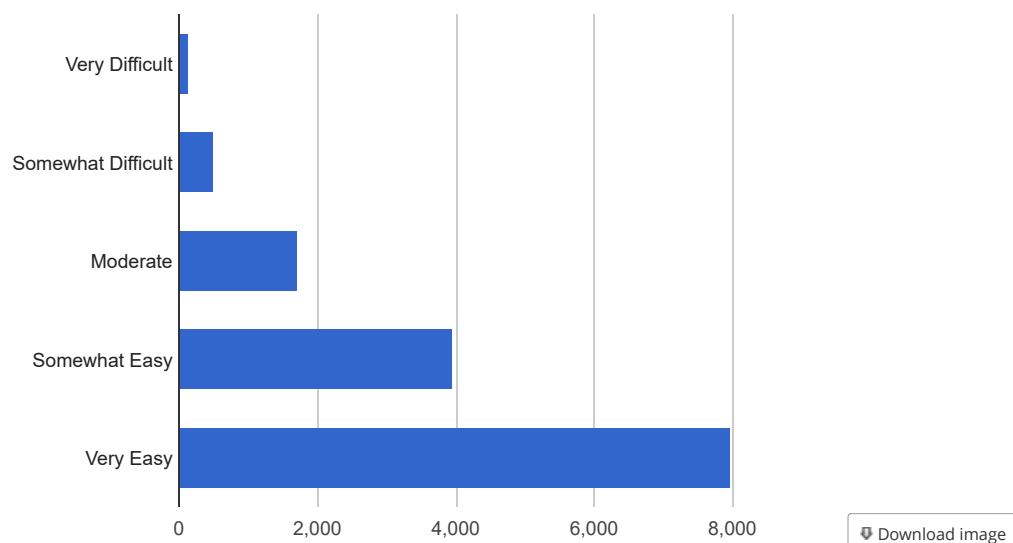
Understand information about what to do if you think you have COVID-19? *(covidunderstand)*

Total Count (N)	Missing*	Unique
184	29 (13.6%)	5

Counts/frequency: Very Difficult (5, 2.7%), Somewhat Difficult (6, 3.3%), Moderate (25, 13.6%), Somewhat Easy (46, 25.0%), Very Easy (102, 55.4%)
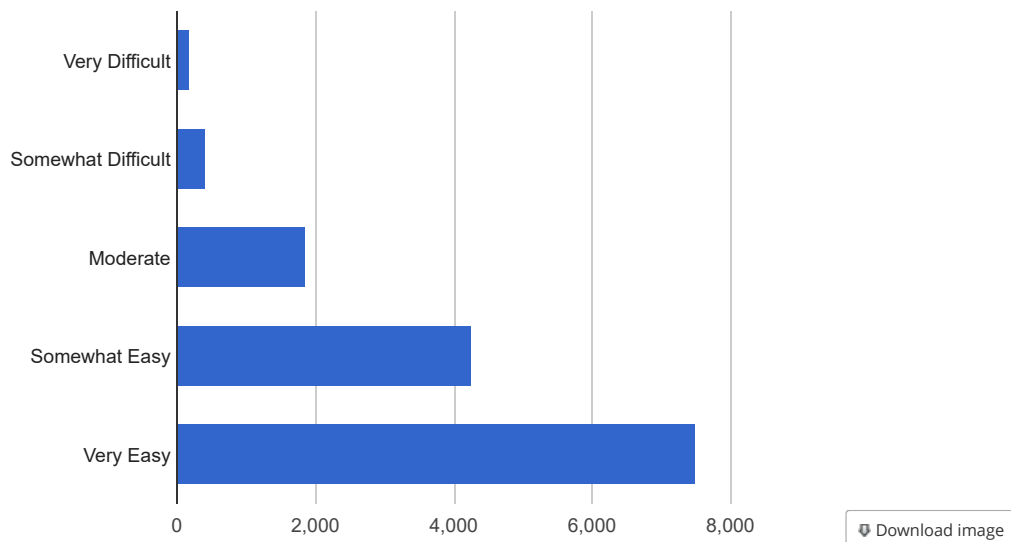
Trust if the information about COVID-19 in the media is reliable? *(covidtrust)*

Total Count (N)	Missing*	Unique
187	26 (12.2%)	5

Counts/frequency: Very Difficult (41, 21.9%), Somewhat Difficult (27, 14.4%), Moderate (52, 27.8%), Somewhat Easy (26, 13.9%), Very Easy (41, 21.9%)
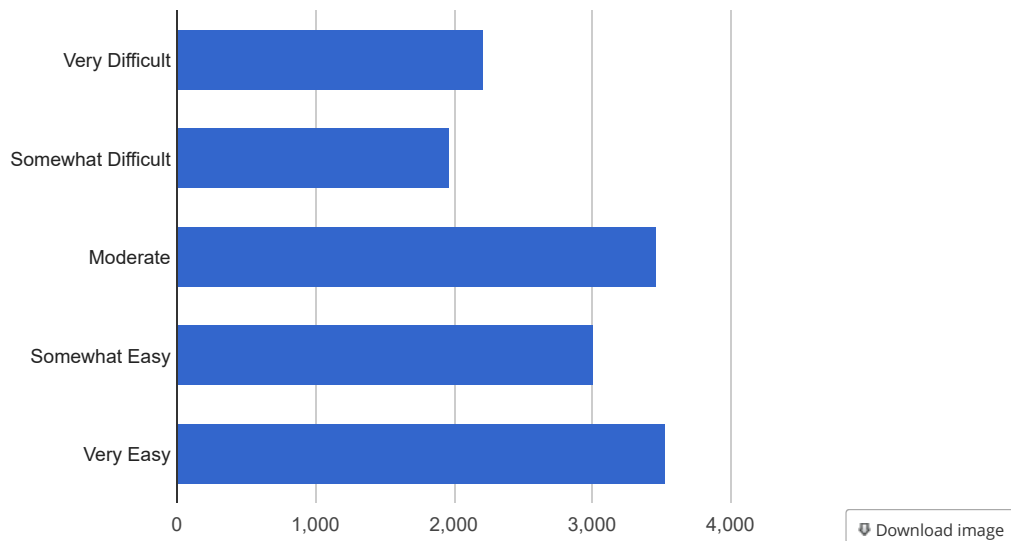
I know how to protect myself from coronavirus. *(covidprotect)*

Total Count (N)	Missing*	Unique
190	23 (10.8%)	3

Counts/frequency: Not at all (4, 2.1%), Somewhat (37, 19.5%), Very much (149, 78.4%)
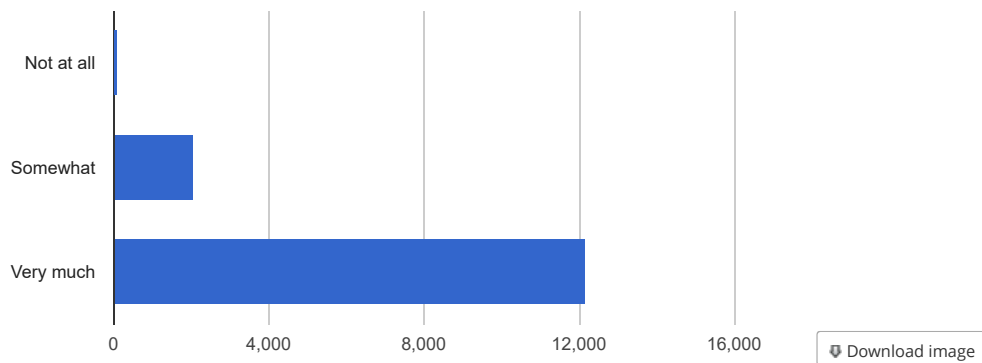
For me avoiding an infection with COVID-19 in the current situation is... *(covidavoid)*

Total Count (N)	Missing*	Unique
186	27 (12.7%)	3

Counts/frequency: difficult to avoid (13, 7.0%), unsure about how to avoid (16, 8.6%), easy to avoid (I have no problem) (157, 84.4%)
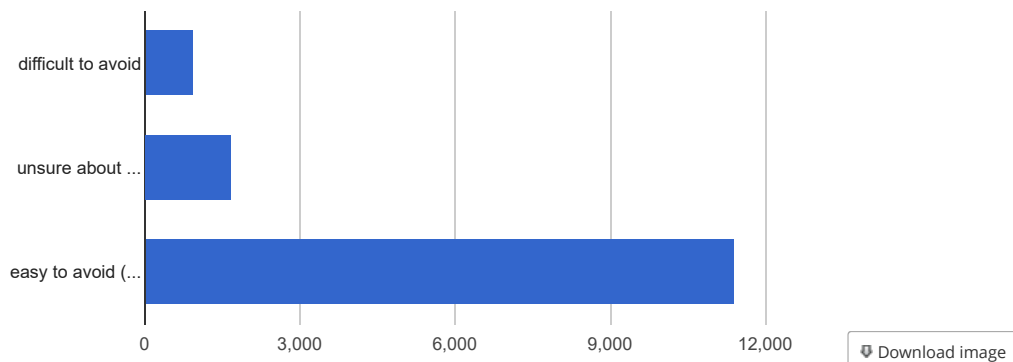
Do you think that global warming is happening? *(warmingyesno)*

Total Count (N)	Missing*	Unique
193	20 (9.4%)	3

Counts/frequency: Yes (113, 58.5%), No (40, 20.7%), Don't know or unsure (40, 20.7%)
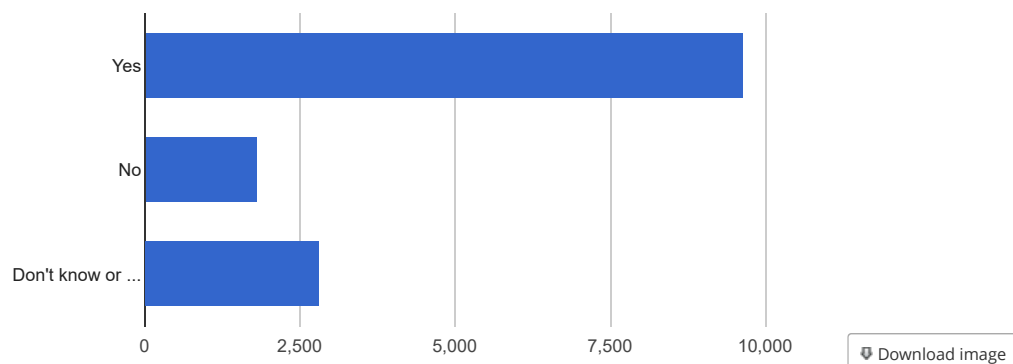
Assuming global warming is happening, do you think it is... ? *(warmingdoyouthink)*

Total Count (N)	Missing*	Unique
186	27 (12.7%)	5

Counts/frequency: Caused mostly by human activities (72, 38.7%), Caused mostly by natural changes in the environment (57, 30.6%), None of the above because global warming isn't happening (18, 9.7%), Other (8, 4.3%), Don't know (31, 16.7%)
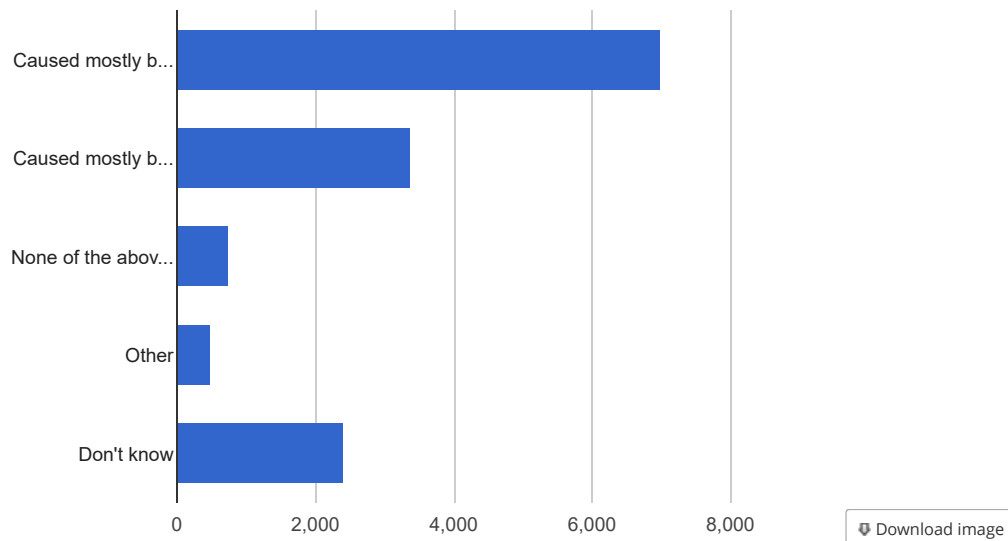
How worried are you about global warming? *(warmingworried)*

Total Count (N)	Missing*	Unique
192	21 (9.9%)	4

Counts/frequency: Very worried (30, 15.6%), Somewhat worried (66, 34.4%), Not very worried (47, 24.5%), Not at all worried (49, 25.5%)
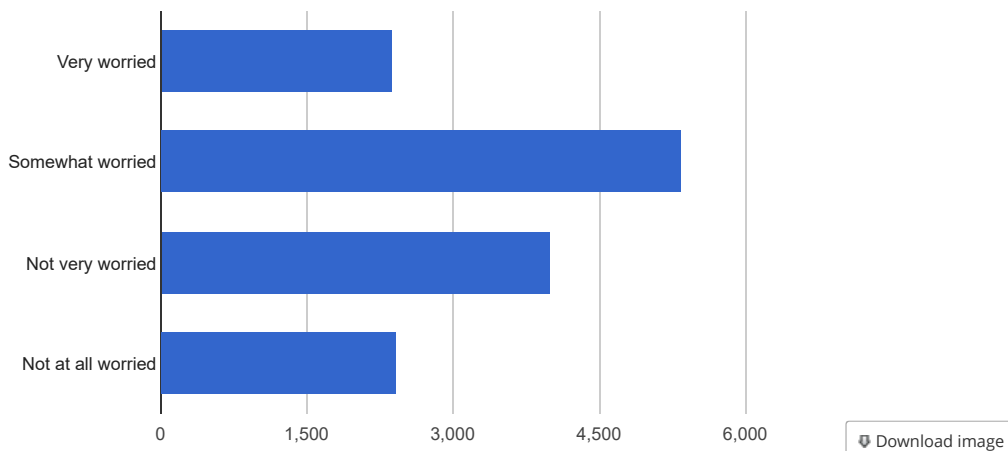
How much do you think global warming will harm you personally? *(warmingharm)*

Total Count (N)	Missing*	Unique
193	20 (9.4%)	5

Counts/frequency: Not at all (35, 18.1%), Only a little (31, 16.1%), A moderate amount (55, 28.5%), A great deal (35, 18.1%), Don't know (37, 19.2%)
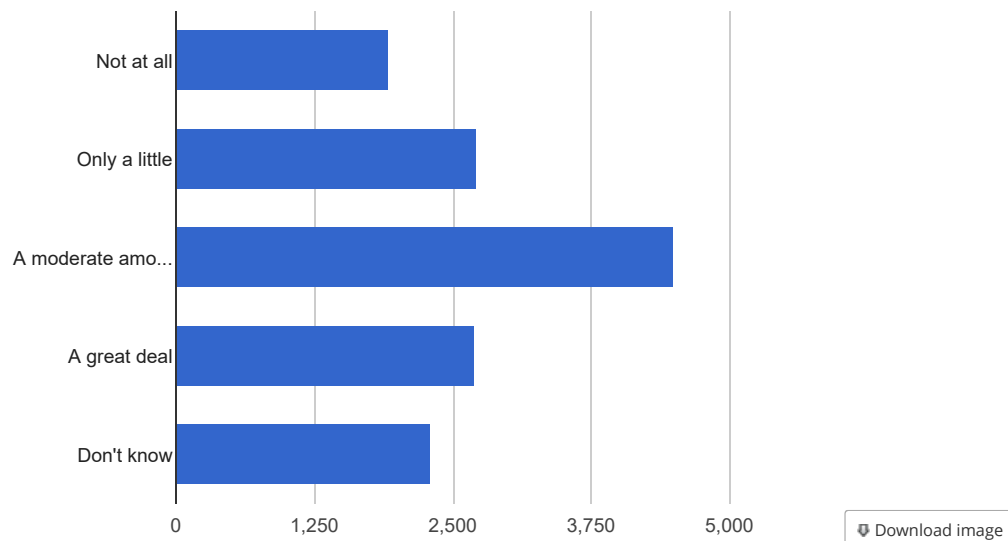
When do you think global warming will start to harm people in the United States?
(warmingwhenharm)

Total Count (N)	Missing*	Unique
178	35 (16.4%)	6

Counts/frequency: They are being harmed right now, (84, 47.2%), In 10 years, (21, 11.8%), In 25 years, (13, 7.3%), In 50 years (9, 5.1%), In 100 years, (11, 6.2%), Never (40, 22.5%)
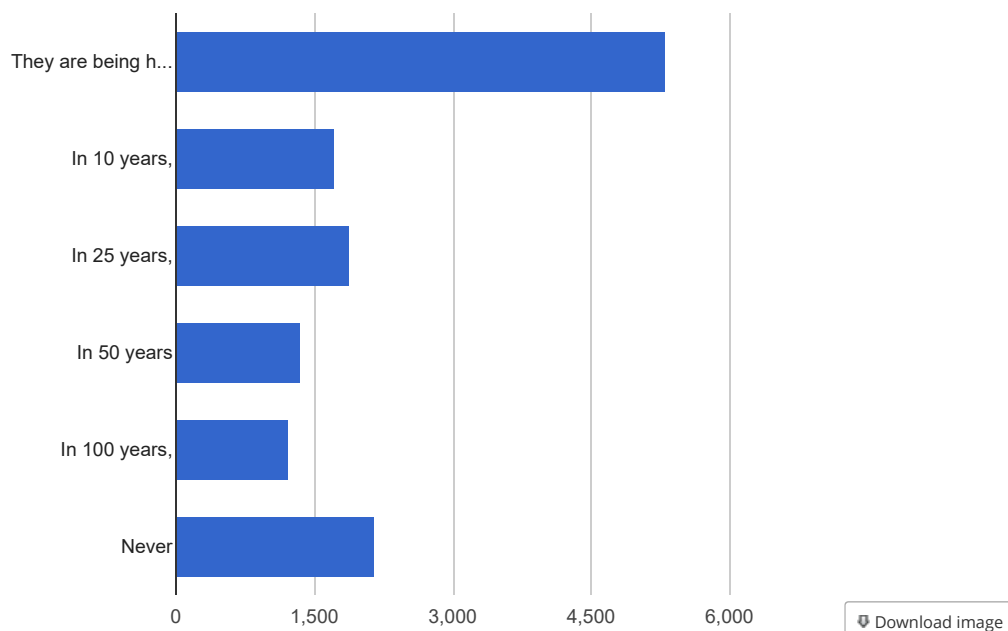
Do you think the government and politicians in your county should be doing more or less to address global warming? *(warminggovt)*

Total Count (N)	Missing*	Unique
189	24 (11.3%)	3

Counts/frequency: More (94, 49.7%), Less (34, 18.0%), Don't know or not sure (61, 32.3%)
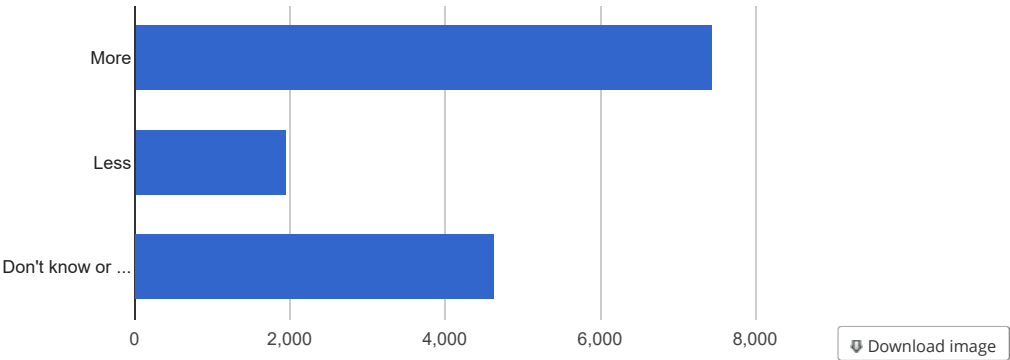
How often do you discuss global warming with your friends and family? *(warmingfriends)*

Total Count (N)	Missing*	Unique
190	23 (10.8%)	4

Counts/frequency: Often (14, 7.4%), Occasionally (55, 28.9%), Rarely (53, 27.9%), Never (68, 35.8%)
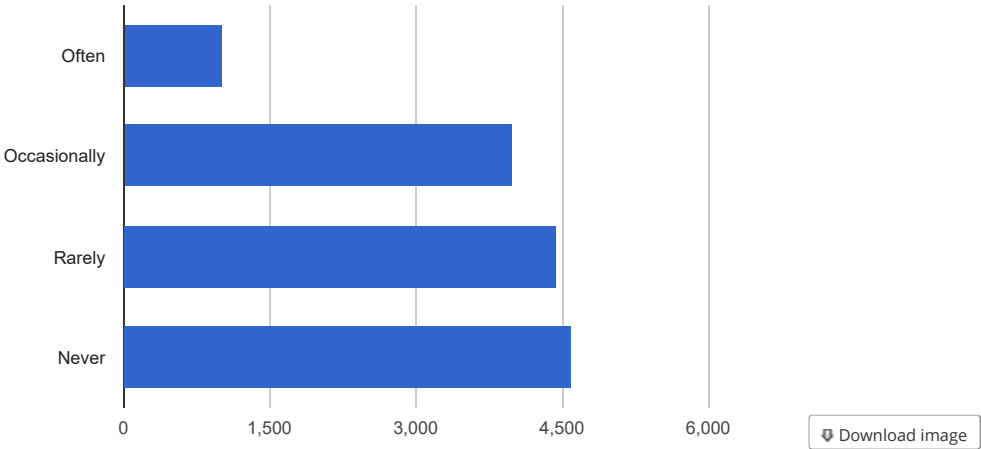
How often do you hear about global warming in the media? *(warmingmedia)*

Total Count (N)	Missing*	Unique
188	25 (11.7%)	5

Counts/frequency: At least once a week (75, 39.9%), At least once a month (42, 22.3%), Several times a year (40, 21.3%), Once a year or less often (14, 7.4%), Never (17, 9.0%)
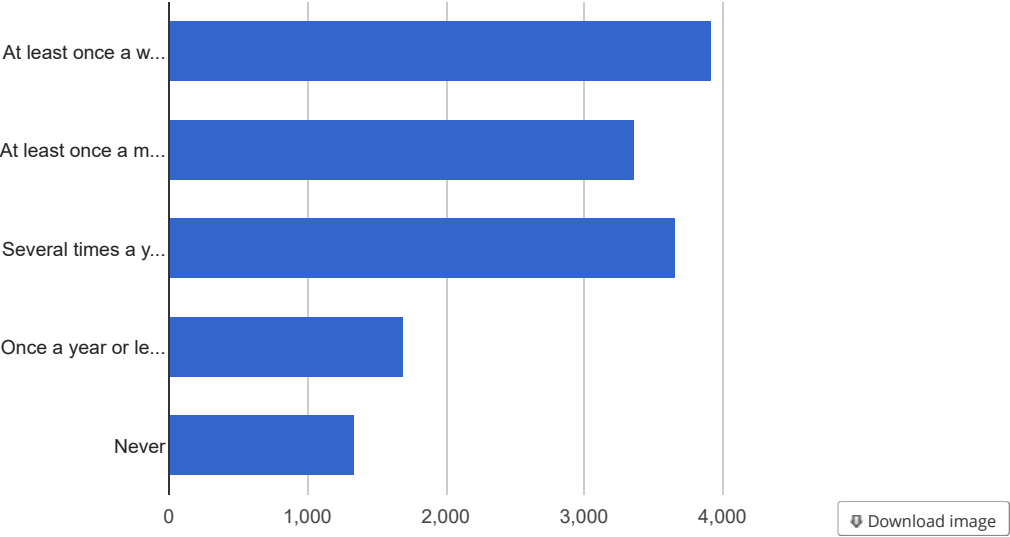
Thank you for your participation! Please feel free to include any additional comments in the box below. *(thankyou)*

Total Count (N)	Missing*
22	191 (89.7%)

Complete? *(form_1_complete)*

Total Count (N)	Missing*	Unique
213	0 (0.0%)	2

Counts/frequency: Incomplete (9, 4.2%), Unverified (0, 0.0%), Complete (204, 95.8%)

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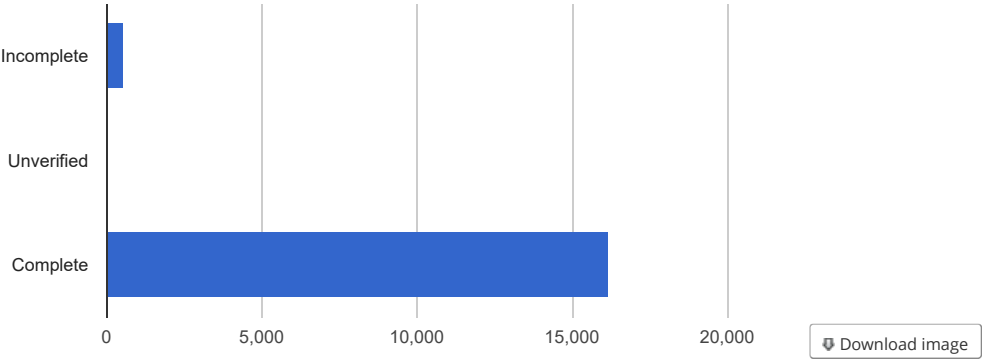
* Note: Values listed as 'Missing' may include records with a Missing Data Code (if Missing Data Codes are defined).

Appendix B

HNC 2030 County/State Data

Social and Economic Factors					
Health Indicator	**Desired Result**	**Definition**	**Hyde 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	283 (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	Hyde 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	65% (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	35% (2015)	7% (2015)	5.0%
Food Insecurity**			18% (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	14% (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	Hyde 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)	11.60 (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	24.8% (2020)	22.6% (2020)	15.0%
Excessive Drinking*	All North Carolina communities support safe and responsible use of alcohol.	Percent of adults reporting binge or heavy drinking	17.3% (2020)	15.6% (2020)	12.0%

Sugar-Sweetened Beverage Consumption*	All people in North Carolina live in communities that support healthy food and beverage choices.	Percent of youth reporting consumption of one or more sugar-sweetened beverages per day	DPI unable to provide update to SCHS	30.1 % (2019)	17.0%
		Percent of adults reporting consumption of one or more sugar-sweetened beverages per day	39.5% (2019)	35.4% (2019)	20.0%
HIV Diagnosis	All people in North Carolina experience sexual health with equitable access to quality and culturally competent prevention, treatment, and management of sexually transmitted infections.	Number of new HIV diagnoses per 100,000 population	0.0 (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	23.8 (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**	**Hyde 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	0.0 (2020)	6.9 (2020)	6.0
		Disparity ratio between white non-Hispanic and African American, non-Hispanic infant deaths	0.0 (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	75.6 (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	Hyde 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	75.7% (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	N/A (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
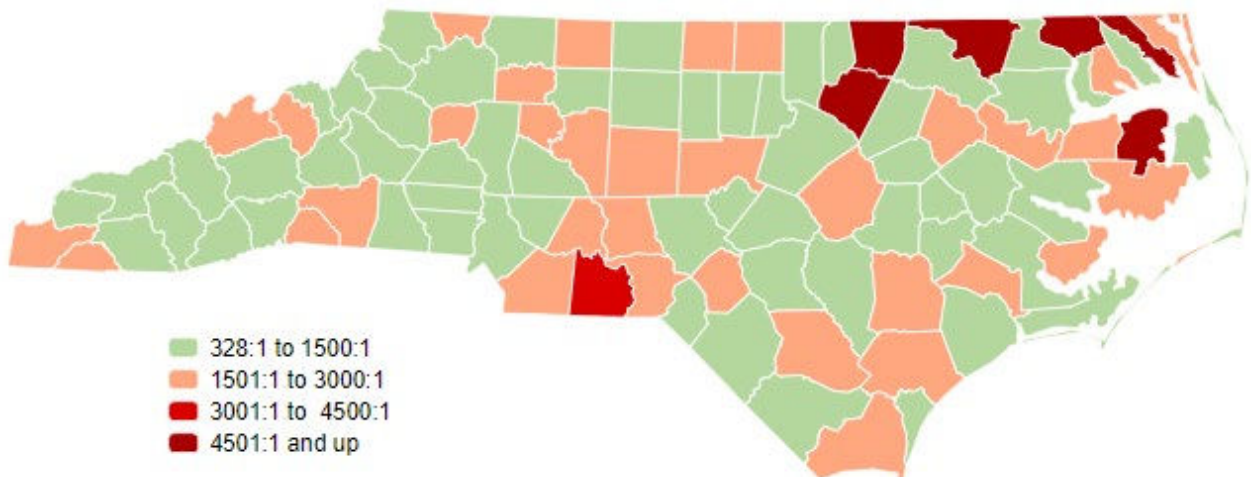
County Data Tables (Spring 2021)

Table 1. Population Estimate, Hyde County, North Carolina, and United States (2019)					
Hyde County		North Carolina		United States	
4,937		10,488,084		328,239,523	
Estimated Percent Change April 1, 2010 to July 1, 2019	-15.1%	Estimated Percent Change April 1, 2010 to July 1, 2019	10.0%	Estimated Percent Change April 1, 2010 to July 1, 2019	6.3%
Source: U.S. Census Bureau Populations Estimate Program (PEP) & U.S. Census Bureau, American Community Survey (ACS) 1-Year Estimate https://www.census.gov/quickfacts/fact/table/hydecountynorthcarolina/RHI825219					

Table 2. Age Distribution, Hyde County and North Carolina (2019)		
Age Group	Hyde County (%)	North Carolina (%)
Persons under 5 years	3.7%	5.8%
Persons under 18 years	17.0%	21.9%
Persons 65 years and over	22.6%	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/hydecountynorthcarolina/RHI825219		

Table 3. Age Distribution by Age Group, Hyde County (2015-2019)		
Age Group	Estimate	Percent
Total population	5,213	100%
Under 5 years	253	4.9%
5 to 9 years	306	5.9%
10 to 14 years	284	5.4%
15 to 19 years	410	7.9%
20 to 24 years	148	2.8%
25 to 34 years	578	11.1%
35 to 44 years	853	16.4%
45 to 54 years	671	12.9%
55 to 59 years	284	5.4%
60 to 64 years	414	7.9%
65 to 74 years	649	12.4%
75 to 84 years	325	6.2%
85 years and over	38	0.7%
Median age (years)	40.9	(X)
Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates Table ID: DP05 Data are based on a sample and are subject to sampling variability. https://data.census.gov/cedsci/table?q=DP05&g=0500000US37095&tid=ACSDP5Y2019.DP05&hidePreview=true&moe=false		

Table 4. Population Distribution by Gender, Hyde County and North Carolina (2019)		
Gender	Hyde (Percent)	North Carolina (Percent)
Female	46.6%	51.4%
Male	53.4%	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/hydecountynorthcarolina/RHI825219		

Table 5. Veterans, Hyde County (2015-2019)		
	Number	Percent of population 18 years and older
Veterans	211	5.1%
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=0500000US37095&tid=ACSST5Y2019.S2101&moe=false&hidePreview=true		

Table 6. Race/Ethnicity, Hyde County and North Carolina (2015-2019)				
Race	Hyde County		North Carolina	
	Number	Percent	Number	Percent
White	3,468	66.5%	7,049,919	68.7%
Black or African American	1,550	29.7%	2,200,761	21.4%
American Indian and Alaska Native	6	0.1%	123,952	1.2%
Asian	0	0.0%	292,992	2.9%
Native Hawaiian and Other Pacific Islander	0	0.0%	7,213	0.1%
Hispanic or Latino (of any race)	539	10.3%	962,665	9.4%
Some other race	137	2.6%	316,763	3.1%
Two or more races	52	1.0%	273,276	2.7%
Total	5,213		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=0500000US37095&tid=ACSDP5Y2019.DP05&hidePreview=true&moe=false				

Table 7. Hispanic or Latino Origin and Race, Hyde 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
Hyde County	58.9%	29.7%	0.1%	0.0%	0.0%	0.0%	1.0%
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=0500000US37095&tid=ACSDP5Y2019.DP05&hidePreview=true&moe=false

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

All households	1,947	
Limited English-speaking households	69 ± 46	3.5%
Households Speaking:	Number	Percent
Spanish	160 ± 62	8.2%
Other Indo-European languages	0 ± 17	0.0%
Asian and Pacific Island languages	0 ± 17	0.0%
Other languages	0 ± 17	0.0%

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates
Table ID: S1602
https://data.census.gov/cedsci/table?q=S1602&g=0500000US37095&tid=ACSST5Y2019.S1602&hidePreview=true

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

	Hyde County	North Carolina
High School Graduate or Higher	80.8%	87.8%
Less than 9th Grade	3.6%	4.5%
High School, No Diploma	15.6%	7.7%
High School Graduate or Equivalency	38.7%	25.7%
Some College, No Degree	27.0%	21.2%
Associate Degree	5.9%	9.7%
Bachelor's Degree	7.5%	20.0%
Graduate or Professional Degree	1.7%	11.3%

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates
Table ID: S1501
https://data.census.gov/cedsci/table?q=Hyde%20county%20north%20carolina%20educational%20attainment&g=0500000US37095&tid=ACSST5Y2019.S1501&hidePreview=true&moe=false

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

	SAT Scores			
	2019	2018	2017	2016
Hyde	1,121	960	1,012	975
North Carolina	1,091	1,090	1,074	997
United States	1,039	1,049	NR	NR

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

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

	ACT Proficiency			
	2019	2018	2017	2016
Hyde County	55.6%	52.1%	41.7%	55.6%
North Carolina	55.8%	57.9%	58.8%	59.9%

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

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

Income Level	Hyde County	North Carolina
Below $10,000	7.0%	6.4%
$10,000-$14,999	4.7%	5.0%
$15,000-$24,999	21.9%	10.3%
$25,000-$34,999	8.2%	10.3%
$35,000-$49,999	15.2%	13.9%
$50,000-$74,999	19.3%	18.0%
$75,000-$99,999	14.0%	12.4%
$100,000-$149,999	9.0%	13.1%
$150,000-$199,999	0.7%	5.1%
$200,000 or more	0.0%	5.4%
Median household income	$39,663	$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=0500000US37095&tid=ACSST5Y2019.S1901&moe=false&hidePreview=true

Table 13. Poverty Status in the Past 12 Months Disaggregated by Age, Hyde 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
Hyde County	23.7%	42.1%	44.3%	16.9%	8.9%	8.8%
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=Hyde%20county%20north%20carolina%20poverty%20status&tid=ACSST5Y2019.S1701&hidePreview=true&moe=false

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

Label	Estimate
Total:	1,876
Car, truck, or van:	1,583
Drove alone	1,486
Carpooled:	97
In 2-person carpool	78
In 3-person carpool	19
In 4-person carpool	0
In 5- or 6-person carpool	0
In 7-or-more-person carpool	0
Public transportation (excluding taxicab):	7
Bus	7
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	0
Motorcycle	0
Bicycle	9
Walked	44
Other means	51
Worked from home	182

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates
Table ID: B08301
https://data.census.gov/cedsci/table?text=means%20of%20transportation&g=0500000US37095&tid=ACSDT5Y2019.B08301&moe=false&hidePreview=true

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

	Hyde County, North Carolina	
	Owner-occupied housing units with a mortgage	% owner-occupied housing units with a mortgage
Owner-Occupied Housing Units with a Mortgage	749	
Value		
Less than $50,000	52	6.9%
$50,000 to $99,999	226	30.2%
$100,000 to $299,999	316	42.2%
$300,000 to $499,999	155	20.7%
$500,000 to $749,999	0	0.0%
$750,000 to $999,999	0	0.0%
$1,000,000 or more	0	0.0%
Median (dollars)	$152,300	$152,300
Mortgage Status		
With either a second mortgage, or home equity loan, but not both	105	14.0%
Second mortgage only	31	4.1%
Home equity loan only	74	9.9%
Both second mortgage and home equity loan	35	4.7%
No second mortgage and no home equity loan	609	81.3%
Household Income in the Past 12 Months (in 2019 inflation-adjusted dollars)		
Less than $10,000	0	0.0%
$10,000 to $24,999	52	6.9%
$25,000 to $34,999	55	7.3%
$35,000 to $49,999	120	16.0%
$50,000 to $74,999	250	33.4%
$75,000 to $99,999	162	21.6%
$100,000 to $149,999	110	14.7%
$150,000 or more	0	0.0%
Median household income (dollars)	$58,822	$58,822
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=0500000US37095&tid=ACSST5Y2019.S2506&moe=false&hidePreview=true		

Table 16. Financial Characteristics for Housing units without a Mortgage in Hyde County (2015-2019)		
	Hyde County, North Carolina	
	Owner-occupied housing units without a mortgage	% owner-occupied housing units without a mortgage
Owner-Occupied Housing Units with a Mortgage	571	
Less than $50,000	177	31.0%
$50,000 to $99,999	69	12.1%
$100,000 to $199,999	191	33.5%
$200,000 to $299,999	23	4.0%
$300,000 to $499,999	50	8.8%
$500,000 to $749,999	61	10.7%
$750,000 to 999,999	0	0.0%
$1,000,000 or more	0	0.0%
Median (dollars)	$120,600	$120,600
Household Income in the Past 12 Months (in 2019 inflation-adjusted dollars)		
Less than $10,000	35	0.0%
$10,000 to $24,999	260	6.9%
$25,000 to $34,999	66	7.3%
$35,000 to $49,999	117	16.0%
$50,000 to $74,999	29	33.4%
$75,000 to $99,999	50	21.6%
$100,000 to $149,999	0	14.7%
$150,000 or more	14	0.0%
Median household income (dollars)	$23,750	$23,750
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=0500000US37095&tid=ACSST5Y2019.S2507&moe=false&hidePreview=true		

Table 17. Live Births, Hyde 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
Hyde	35	6.7	20	6.3	7	4.6	8	16.7
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/Hyde.html

Table 18. Live Births by Sex, Hyde County (2014-2018)

County/State	Total	Total Rate	White, non-Hispanic	White, non-Hispanic rate	Black, non-Hispanic	Black, non-Hispanic rate	Hispanic	Hispanic rate
Male	15	2.9	79	4.1	3	2.0	4	8.4
Females	20	3.8	12	3.8	4	2.6	4	8.4

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

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

						Non-Hispanic							Hispanic	
		Total		Total		White		Black		Other		Hispanic		
County of Residence	Birth Weight	Births	Pct.	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
Hyde County	Low	10	5.2	8	5.1	4	3.3	4	10.8	0	0.0	2	5.6
	Very Low	1	0.5	1	0.6	0	0.0	1	2.7	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, Hyde 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
Hyde County	1	*	1	*	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, Hyde 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
Hyde County	8	21.2	25	64.2	22	102.5	17	98.6	143	366.2

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, Hyde 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
Hyde County	1	*	0	*	1	*	0	*	0	*

Prepared by N.C. DHHS State Center for Health Statistics
Note: rates based on small numbers (fewer than 20 cases) are unstable and are not reported"
https://schs.dph.ncdhhs.gov/data/databook/CD9A%20neonatal%20death%20rates.rtf

Table 23. Age-Adjusted Death Rates for Hyde County (2014-2018)																
	White, non-Hispanic		African American, non-Hispanic		American Indian, non-Hispanic		Other Races, non-Hispanic		Hispanic		Male		Female		Overall	
Cause of Death:	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate
All Causes	229	874.6	88	886.0	1	N/A	0	N/A	1	N/A	176	1,041.8	143	704.5	319	852.7
Diseases of Heart	57	210.1	20	189.5	1	N/A	0	N/A	0	N/A	43	252.7	35	156.2	78	202.1
Acute Myocardial Infarction	14	N/A	5	N/A	0	N/A	0	N/A	0	N/A	11	N/A	8	N/A	19	N/A
Other Ischemic Heart Disease	21	79.9	5	N/A	1	N/A	0	N/A	0	N/A	19	N/A	8	N/A	27	71.4
Cerebrovascular Disease	20	74.9	4	N/A	0	N/A	0	N/A	0	N/A	15	N/A	9	N/A	24	62.3
Cancer	49	185.3	26	246.7	0	N/A	0	N/A	0	N/A	38	212.6	37	190.0	75	195.4
Colon, Rectum, and Anus	7	N/A	2	N/A	0	N/A	0	N/A	0	N/A	5	N/A	4	N/A	9	N/A
Pancreas	3	N/A	4	N/A	0	N/A	0	N/A	0	N/A	6	N/A	1	N/A	7	N/A
Trachea, Bronchus, and Lung	18	N/A	5	N/A	0	N/A	0	N/A	0	N/A	9	N/A	14	N/A	23	61.3
Breast	0	N/A	2	N/A	0	N/A	0	N/A	0	N/A	0	N/A	2	N/A	2	N/A
Prostate	1	N/A	2	N/A	0	N/A	0	N/A	0	N/A	3	N/A	0	N/A	3	N/A
Diabetes Mellitus	14	N/A	5	N/A	0	N/A	0	N/A	0	N/A	10	N/A	9	N/A	19	N/A
Pneumonia and Influenza	2	N/A	2	N/A	0	N/A	0	N/A	0	N/A	2	N/A	2	N/A	4	N/A
Chronic Lower Respiratory Diseases	21	74.5	1	N/A	0	N/A	0	N/A	1	N/A	13	N/A	10	N/A	23	58.5
Chronic Liver Disease and Cirrhosis	2	N/A	0	N/A	0	N/A	0	N/A	0	N/A	2	N/A	0	N/A	2	N/A
Septicemia	3	N/A	1	N/A	0	N/A	0	N/A	0	N/A	1	N/A	3	N/A	4	N/A
Nephritis, Nephrotic Syndrome, and Nephrosis	3	N/A	2	N/A	0	N/A	0	N/A	0	N/A	5	N/A	0	N/A	5	N/A
Unintentional Motor Vehicle Injuries	2	N/A	1	N/A	0	N/A	0	N/A	0	N/A	3	N/A	0	N/A	3	N/A
All Other Unintentional Injuries	10	N/A	3	N/A	0	N/A	0	N/A	0	N/A	10	N/A	3	N/A	13	N/A
Suicide	1	N/A	0	N/A	0	N/A	0	N/A	0	N/A	1	N/A	0	N/A	1	N/A
Homicide	1	N/A	1	N/A	0	N/A	0	N/A	0	N/A	2	N/A	0	N/A	2	N/A
Alzheimer's disease	12	N/A	3	N/A	0	N/A	0	N/A	0	N/A	3	N/A	12	N/A	15	N/A
Acquired Immune Deficiency Syndrome	0	N/A	0	N/A	0	N/A	0	N/A	0	N/A	0	N/A	0	N/A	0	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 Hyde 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
Hyde	5	1	3	1	1	0	0	0	0	0	0	0

Source: North Carolina Division of Health and Human Services Communicable Disease Branch
https://epi.dph.ncdhhs.gov/cd/stds/figures/vol20no1.pdf

Table 25. All Other Unintentional Injuries Death Rates per 100,000 Residents for Hyde 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
Hyde County	5	95.6	13	58.2	41.1
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 for Hyde 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
Hyde County	0	0.0	3	11.1	11.2
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, Hyde 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
Hyde County	-				-		

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, Hyde County and North Carolina (2015-2019)

County of Residence	Total Deaths	Crude Rate	Age-Adjusted Rate
North Carolina	9,367	18.25	18.80
Hyde County	6	22.25	25.70

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, Hyde County (2016-2019)

Leading Causes of Injury Death 2016 to 2019 HYDE			Leading Causes of Injury Hospitalization 2016 to 2019 HYDE			Leading Causes of Injury ED Visits 2016 to 2019 HYDE		
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#
1	Poisoning - Unintentional	10	1	Fall - Unintentional	45	1	Fall - Unintentional	205
2	Fall - Unintentional	4	2	MVT - Unintentional	15	2	Unspecified - Unintentional	123
3	MVT - Unintentional	3	3	Poisoning - Unintentional	10	3	MVT - Unintentional	114
4	Suffocation - Unintentional; Other Transport - Unintentional; Fire/Burn - Unintentional; Cut/Pierce - Assault	1	4	Other Land Transport - Unintentional	4	4	Struck By/Against - Unintentional	68
5		0	5	Struck By/Against - Unintentional; Poisoning - Self-Inflicted; Cut/Pierce - Assault	3	5	Poisoning - Unintentional	41
TOTAL		21	TOTAL		97	TOTAL		900

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, Hyde County (2016-2019)

Leading Causes of Injury Death HYDE			Leading Causes of Injury Hospitalization 2016 to 2019 HYDE			Leading Causes of Injury ED Visits 2016 to 2019 HYDE		
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#
1		0	1	Fall - Unintentional	*	1	Fall - Unintentional	24
2		0	2	Poisoning - Self-Inflicted; Other Specified/Classifiable - Assault	*	2	Struck By/Against - Unintentional	19
3		0	3	Unspecified - Self-Inflicted; Struck By/Against - Unintentional; Natural/Environmental - Unintentional; Fire/Burn - Unintentional	*	3	Unspecified - Unintentional	16
4		0	4		0	4	Natural/Environmental - Unintentional	9
5		0	5		0	5	Other Specified/Classifiable - Unintentional	7
TOTAL		0	TOTAL		10	TOTAL		106

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, Hyde County (2016-2019).

Leading Causes of Injury Death 2016 to 2019 HYDE			Leading Causes of Injury Hospitalization 2016 to 2019 HYDE			Leading Causes of Injury ED Visits 2016 to 2019 HYDE		
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#
1	Poisoning - Unintentional	4	1	Poisoning - Unintentional	*	1	MVT - Unintentional	61
2	MVT - Unintentional	1	2	Struck By/Against - Unintentional; Poisoning - Self-Inflicted; Other Specified/Classifiable - Unintentional; MVT - Unintentional; Machinery - Unintentional; Cut/Pierce - Unintentional	*	2	Unspecified - Unintentional	38
3		0	3		0	3	Struck By/Against - Unintentional	26
4		0	4		0	4	Fall - Unintentional	23
5		0	5		0	5	Poisoning - Unintentional	18
TOTAL		5	TOTAL		10	TOTAL		267

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, Hyde County (2016-2019)

Leading Causes of Injury Death 2016 to 2019 HYDE		
Rank	Cause	#
1	Poisoning - Unintentional	6
2	MVT - Unintentional	2
3	Other Transport - Unintentional; Cut/Pierce - Assault	1
4		0
5		0
TOTAL		10

Leading Causes of Injury Hospitalization 2016 to 2019 HYDE		
Rank	Cause	#
1	Fall - Unintentional	10
2	MVT - Unintentional	7
3	Poisoning - Unintentional	5
4	Other Land Transport - Unintentional	4
5	Cut/Pierce - Assault	3
TOTAL		33

Leading Causes of Injury ED Visits 2016 to 2019 HYDE		
Rank	Cause	#
1	Fall - Unintentional	65
2	Unspecified - Unintentional	48
3	MVT - Unintentional	32
4	Other Specified/Classifiable - Unintentional	17
5	Struck By/Against - Unintentional; Poisoning - Unintentional	16
TOTAL		330

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 Visit by County, Hyde County (2016-2019).

Leading Causes of Injury Death 2016 to 2019 HYDE		
Rank	Cause	#
1	Fall - Unintentional	4
2	Suffocation - Unintentional; Fire/Burn - Unintentional	1
3		0
4		0
5		0
TOTAL		6

Leading Causes of Injury Hospitalization 2016 to 2019 HYDE		
Rank	Cause	#
1	Fall - Unintentional	32
2	MVT - Unintentional	7
3	Poisoning - Unintentional; Machinery - Unintentional	1
4		0
5		0
TOTAL		44

Leading Causes of Injury ED Visits 2016 to 2019 HYDE		
Rank	Cause	#
1	Fall - Unintentional	93
2	Unspecified - Unintentional	21
3	MVT - Unintentional	17
4	Struck By/Against - Unintentional; Natural/Environmental - Unintentional	7
5	Other Specified/Classifiable - Unintentional	6
TOTAL		197

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

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