

Coastal Carolinas Health Alliance (CCHA) Region Summary of Assessment Findings

Purpose/Overview:

Southeastern North Carolina and northeastern South Carolina is a region with large numbers of ethnic minorities, increased poverty and high risk for chronic health conditions that burden the health care system and reduce quality of life. The region is largely rural with diminished access to many services. In order to assess and prioritize the greatest needs of the community, Coastal Carolinas Health Alliance (CCHA) in conjunction with other contributing community organizations conducted a regional needs assessment.

Through the use of both quantitative and qualitative data, health disparities within the region can be identified. Once the disparities are recognized, a plan of action to improve the health of the region can be formulated with focus in such areas. The assessment comprises secondary health statistics as well as primary data collected from local residents via surveys and in some areas, focus groups. This compilation of information provides vital information necessary to identify the overwhelming needs of the area's residents and develop programs to address those needs. CCHA also hopes to obtain grant funding, where appropriate, to aid in launching suitable initiatives.

Cause of Death/Health Issues:

- **CCHA mortality rate for AIDS is below the NC rate by .038% (2002-2006).** With 4 of the 9 CCHA counties within the region exceeding or equal to the North Carolina (NC) rates. In order from highest to lowest rates still exceeding or equal to NC they are: Robeson County, Columbus County, Bladen County and Sampson County is on par with the NC rate.
- **CCHA Total Asthma Hospitalization rate exceeds NC rate by 52% (2006).**
- **CCHA Total Cancer mortality rate exceeds NC rate by 8.4% and the SC rate by 2.7% (2003).** 6 of the 9 counties in the region exceed the NC rate and 5 of the 9 counties exceed the South Carolina rate.
- **CCHA Breast cancer mortality rate exceeds NC rate by 2.4% and the SC rate by 5%.** 6 of the 9 counties within the region exceed NC (2001-2005 data) and SC rates (2003).
- **CCHA Prostate cancer mortality rate exceeds the NC rate 3.41% and SC rate by .61%.** 5 of the 9 counties exceed the NC (2001-2005) and SC rates (2003).
- **CCHA Bronchus and Lung cancer mortality rate exceeds NC rate by 4.32% and SC by 6.42%.** 8 of the 9 counties exceed the NC (2001-2005) and SC rates (2004).



- **CCHA Colon, Rectum and Anus cancer mortality rate exceeds the NC rate .47% and SC rate by .87%.** 6 of the 9 counties exceed the NC rate (1999-2001).
- **CCHA mortality rate for Diabetes Mellitus exceeds NC by 10.32% and SC by 8.72%.** 6 of the 9 counties exceed the NC (2002-2006) and SC rates (2004).
- **CCHA mortality rate for Cerebrovascular Disease exceeds the NC rate by 20% and SC rate by 9% (2002-2006).** 4 of the 9 counties exceed the NC and SC rates (2002-2006).
- **CCHA Total Heart Disease mortality rate exceeds NC by 8.7% and SC by 8.8%.** 7 of the 11 counties exceed the NC (2002-2006) and SC (2004).
- **CCHA Acute Myocardial Infarction (heart attack) mortality rate exceeds NC by 16%** 6 of the 8 counties exceed the NC rate and 5 of the 9 exceed both the NC and SC rates (2002-2006).
- **CCHA Total Syphilis rate is below the NC by 1.5%.** 2 out of 8 counties exceed the NC rate by more double.(2002-2006).
- **CCHA mortality rate for Motor Vehicle Accidents exceeds NC rate by 140%,** only 1 out of 8 counties remains below the NC rate (2002-2006).
- **CCHA Suicide rate is below the NC and SC rates (2002-2006).**
- **CCHA Homicide rate exceeds NC rate by 44% (2002-2006).**

Lifestyle Issues:

- **The percentage of persons in poverty for CCHA exceeds NC and SC data.**
- **The unemployment rate** remains elevated against the regional numbers.
- **The number of persons served in area Alcohol/Drug Treatment Centers** for CCHA decreased 7% from 2006-2007.
- **The number of persons served in area Mental Health Programs** has decreased slightly, however many of the state funded programs have been closed and the burden of needs for these folks rest in the local hospitals emergency department.
- The CCHA average for number of high school dropouts remains high in the majority of the counties in the region.

Maternal and Infant Health:

- **The CCHA percentage of Teen Pregnancies for the Total Population exceeds the NC percentage by 17% (2002-2006).** 6 of the 9 counties exceed the NC rate.
- **The percent of Teen Pregnancies-** girls age 15-19 for CCHA exceeds NC by 27% (2003-2005).
- **The percent of Teen Births-** girls age 15-19 for CCHA exceeds NC by 22%. (2003-2005).



Community Survey Results:

- Based on community survey results, **Heart Disease/Stroke** was felt to be the greatest cause of death within the CCHA region which correlates well with secondary data results discussed above. Cancer was a close second.
- When asked what the biggest health issue of concern within the region is, the majority reported **Drug/Alcohol abuse**. Obesity was the secondary concern.
- **Lack of health insurance** or the inability to pay for doctor's visits was reported as the major factor which keeps people in the region from seeking medical treatment. The second factor was reported as the lack of appointments at the doctor's office when needed and the long waits associated with care.
- **Income or insurance status** was felt to be the biggest factor affecting the health care of people in the region. Age was second.
- It was felt that people in the region **lack funds for health insurance and medications**.
- The community members would like to see more **job opportunities** within the community to help improve the health of family, friends and neighbors. Wellness screenings is second with cholesterol/blood pressure and diabetes at the top of the list.
- **84%** of the aggregated responses in this study report they currently have health insurance.
- **70%** of the aggregated responses in the study support all public places/building being tobacco-free. 22% support, but not in or at all public place/buildings. 9% do not support tobacco-free public places/buildings.

