

NEW HANOVER COUNTY HEALTH ASSESSMENT



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Acknowledgements

We would like to thank Coastal Carolina Health Alliance, New Hanover Regional Medical Center, Cape Fear Healthy Carolinians and the following community agencies and others for their participation in the 2007 Community Health Assessment.

Town of Carolina Beach Smart Start
Wilmington Housing Authority
Wilmington Family YMCA
Medac physician offices through the local Physician Practice Managers Group
New Hanover County Senior Center Voces Latinas
EVOLVE's Health & Mental Health Community Action Team local
NAACP
Northside Resource Center
New Hanover Community Center
Health Fair participants of the Community Health Assessment included Kohl's Back to School Safety Event, Northside Baptist Church, Jervay Community Center, and the Healthy Carolinians' Fall Fit Fest

“Never doubt that a small group of thoughtful citizens can change the world; indeed, it’s the only thing that ever has.”~ Margaret Mead

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Introduction

The community assessment is an analysis of the health status of the community in context with the community's economic, social and environmental climate. This report will be an important resource for the community to improve the health and well being of the people in New Hanover County. The purpose of the community assessment is to identify factors that affect the health of a population and determine the availability of resources within the community to adequately address these factors. Through collaborative efforts forged among community leaders, public health agencies, businesses and hospitals, the community can begin to answer key questions such as (a) "What are our problems?" (b) What factors contribute to these problems?", and (c) "What resources are available in the community to address these problems?".

In a community based assessment, as is promoted in the North Carolina Community Health Assessment, community members take the lead role in forming partnerships, gathering health related data, determining priority health issues, identifying resources, and planning community health programs. In this framework, the assessment process starts with the people who live in the community. The community has the primary responsibility for determining the focus of the assessment activities at every level, including collection and interpretation of data, evaluation of health resources, identification of health problems, and development of strategies for addressing these problems. In this view, the community assessment is done by the community rather than simply an assessment conducted on a community.

Assessment Process

As part of the community health assessment, a health opinion survey was distributed to various segments of the population. The survey was printed in English and Spanish and distributed to a range of people in the community, targeting different income levels, the Latino community, the elderly, and the general population. In addition to the surveys, focus groups were held to identify the community's perception of the health needs and concerns in New Hanover County.

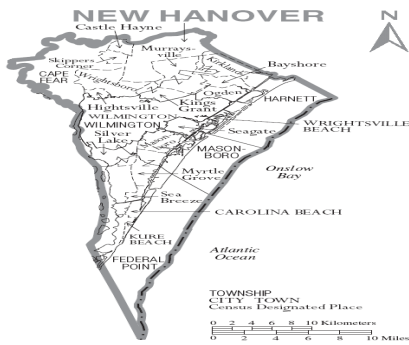
Data Collection Methodology

Primary and Secondary data were collected and analyzed as part of the Community Assessment process. Five focus groups were held in New Hanover County to gain a better understanding of the needs in the community. The group emphasis was to provide an accurate representation of the population through the diverse audience. The groups consisted of the following: approximately 33% males, 67% females, 48% Caucasian, 49% African American, 2% Native American, and 2% Hispanic.

The issues of concern for residents in New Hanover County ranged from obesity, jobs to the public to concerns with transportation.

Secondary (pre-existing data) was collected and compiled using an array of data sources. The major sources of data used in the Community Assessment are:

- Coastal Carolina Health Alliance
- State Center for Health Statistics
- US Census Bureau
- New Hanover County School System
- New Hanover County Sheriff's Department
- Center for Disease Control Behavioral Risk Factor Surveillance Survey
- Healthy People 2010



New Hanover County Profile

Geography & History

Located in southeastern North Carolina and Established in 1729, New Hanover was formed from Craven County, one of three original counties in North Carolina. New Hanover County is the second smallest and one of the most densely populated counties in the State. The County's land area totals approximately 220 square miles; of this total, over 21 square miles consist of water and wetlands. The current population of New Hanover County is approximately 179,553; a 12 percent increase over the 2000 U. S. Census of 160,327. New Hanover County was named in honor of English King George 1 who also ruled the Kingdom of Hanover, Germany. The English royal family was therefore, called the House of Hanover. The New Hanover county seat is the 250- year old port city of Wilmington located along the Cape Fear River. New Hanover, a coastal county in southeastern North Carolina, is home to four incorporated municipalities: Wilmington, Carolina Beach, Kure Beach, and Wrightsville Beach. The County's beaches provide miles of unspoiled natural beauty and are the area's most popular tourist attractions. The surrounding terrain is low lying, with an average elevation of less than 40 feet. The highest elevation is approximately 75 feet above sea level.

The city's riverbanks boast a major container seaport, a charming historical district, Battleship North Carolina, Gothic churches and riverfront shops. To the south lie majestic plantations, the North Carolina Aquarium, Fort Fisher and miles of unspoiled beaches. Although Wilmington is the largest city in southeastern North Carolina, it retains a small town atmosphere. Visitors are treated hospitably and immediately sense the strong community pride. Wilmington is the cultural, medical, educational and economic center for the southeastern region of the state. The city is rich in historical significance, including an architectural heritage reflected in the recently revitalized 200-block National Register Historic District. Wilmington played a vital role during the Civil War as a center for Confederate blockade running; it was the final spot in the South to fall to the Union. In the 20th century, the city's economy shifted from river commerce to the railroad. Wilmington proper is the epitome of what the emerging New south is all about. Its inviting business climate has attracted giants like G.E., DuPont, Corning, PPD and Verizon, in addition to smaller, high-tech firms and corporations. Wilmington is known for historic preservation, its close proximity to area beaches, annual events such as the North Carolina Azalea Festival and Riverfest and a home to a major film studio. All of this adds to the pleasant lifestyle that growing numbers are enjoying in New Hanover County.

Source: Information and demographics from Greater Wilmington Chamber of Commerce



New Hanover County Government

County government

County government, in partnership with its citizens, is dedicated to promoting growth in an orderly fashion, while preserving the outstanding quality of life that has made the County a desirable place in which to live and work. New Hanover

County is governed by five commissioners who are elected by a countywide vote and serve four-year staggered terms. A County Manager is appointed to serve as Chief Executive Officer. Partisan elections for the Board of County Commissioners are held in November in even-numbered years. The Board takes office the first Monday in December following the November elections. At that time, the Board elects a Chairman and Vice Chairman from among its members. The major duties of the Board include: assessing the needs of the County and establishing programs and services to meet these needs, adopting an annual balanced budget, establishing the annual property tax rate, appointing members of County boards and commissions (and some employees), regulating land use and zoning outside the jurisdiction of municipalities, enacting local ordinances, and adopting policies concerning the operations of the County.

The Board also has the authority to call bond referendums, enter into contracts, and establish new programs. The County Manager is responsible to the Board of County Commissioners for management of all County employees except the Sheriff and Register of Deeds, who are elected officials; the Board appoints the County Attorney and the Clerk to the Board as well. The major duties of the County Manager include supervising and coordinating the activities of the County departments, executing all orders and policies set forth by the Board, attending all Board meetings, making recommendations on appropriate matters of business, recommending an annual budget, advising the Board of the financial condition of the County, representing the County in business with other agencies, and performing other duties assigned by the Board. New Hanover County serves its citizens through approximately 30 departments with 1,573 employees.

Transportation Infrastructure

New Hanover County is unique in its ability to provide a complex transportation infrastructure to facilitate industrial growth. With a regional airport, a North Carolina State Port, well development highway system and rail system, Wilmington is an industrial transportation hub of southeastern North Carolina.

North Carolina State Port in Wilmington

Wilmington is home to one of the two state ports in North Carolina. Located on the east bank of the Cape Fear River, the port in Wilmington offers facilities to handle containerized, bulk and breakbulk cargos. The entire Wilmington Terminal is designated as a Foreign Trade Zone. The Port's new 42-foot channel allows current container vessel customers an additional 15 percent vessel capacity. The port has direct interstate access to Interstates 95 and 40 and daily train service from CSX and Norfolk Southern railways. Three million tons of cargo passed through the ports in FY 04-05. Breakbulk (loose cargo, such as cartons, stowed directly in the ship's hold as opposed to containerized or bulk cargo) tonnage increased 21 percent. Nearly 73,000 container moves at Wilmington marked a 37 percent increase. The 42-foot navigation channel, opened in 2004, and the increase in international trade fueled the growth in container activity at the Port. The Wilmington State Port is currently in a \$130 million expansion project that includes four new container cranes and supporting berth improvements.



Freight Railways

Two of the nation's premiere rail companies serve this area. They are CSX and Norfolk Southern Railways. New Hanover County has north to south and east to west rail lines. The availability of high-quality rail services is a major economic feature.

Wilmington International Airport

New Hanover County Airport Authority, governing board to Wilmington International Airport, continues improvements in services and facilities. Terminal expansion and renovation projects were recently completed last year. Future plans include International Terminal renovation, more non-stop flights to the top 10 destinations, runway resurfacing, and new instrument land system. New Hanover County's airport accommodates private and commercial flight with runway length of 8,000 feet. Commercial jet service is provided directly to and from Wilmington International Airport.

New Hanover County Roads

In New Hanover County, 94 percent of the population lives within 10 miles of a 4-lane highway. The inter-regional network of roads and highways in the region has ready access to North-South Interstate 95, East-West Interstate 40 and the developing East-West Interstate 73/74. The region's strategic location relative to domestic and international markets provides an important competitive advantage to industrial sector of the economy.

Industry

Biotech

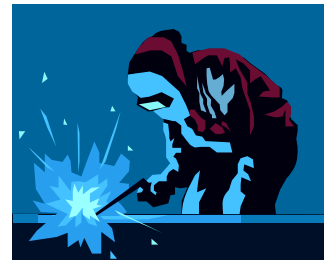
In recent years, New Hanover County has put itself on the Biotech map, becoming home to both large and small firms in the industry. Among them is PPD, Inc., a leading provider of discovery and development services, and products for pharmaceutical and biotechnology firms operating worldwide. LEK Pharmaceuticals, Inc., (now part of Novartis), produces and markets a portfolio of products that include over-the-counter medicines, cosmetics, animal care products, and medical devices. Another is *aaiPharma*, Inc., a science-based, specialty pharmaceutical company with more than 23 years of drug development experience.

General Electric

General Electric has a facility in New Hanover County for Nuclear Energy and Aircraft Engine production and is one of the largest employers in the County.

Film Industry

In late FY 02-03, the Network television series "One Tree Hill" made a decision to film in New Hanover County after a joint effort by the State, City of Wilmington and New Hanover County to attract the series to the area. This has led to a return of a larger segment of the film industry to the County where Dawson's Creek was filmed for six seasons.



Source: <http://www.nhcgov.com/AgnAndDpt/BUDG/Documents/XPriorAdopted/EconomicConsiderations.pdf>

New Hanover County Profile

People QuickFacts 2006	New Hanover County	North Carolina
Population, 2006 estimate	182,591	8,856,505
Population, percent change, April 1, 2000 to July 1, 2006	13.90%	10.10%
Population, 2000	160,307	8,049,313
Persons under 5 years old, percent, 2005	6.00%	7.00%
Persons under 18 years old, percent, 2005	21.10%	24.70%
Persons 65 years old and over, percent, 2005	13.20%	12.10%
Female persons, percent, 2005	51.40%	50.80%
Population Percentage		
White persons, percent, 2005 (a)	81.20%	74.10%
Black persons, percent, 2005 (a)	16.30%	21.80%
American Indian and Alaska Native persons, percent, 2005 (a)	0.40%	1.30%
Asian persons, percent, 2005 (a)	1.10%	1.80%
Native Hawaiian and Other Pacific Islander, percent, 2005 (a)	0.10%	0.10%
Persons reporting two or more races, percent, 2005	0.90%	1.00%
Persons of Hispanic or Latino origin, percent, 2005 (b)	2.70%	6.40%
White persons not Hispanic, percent, 2005	78.70%	68.30%
Living in same house in 1995 and 2000, pct 5 yrs old & over	45.40%	53.00%
Foreign born persons, percent, 2000	3.20%	5.30%
Language other than English spoken at home, pct age 5+, 2000	5.40%	8.00%
High school graduates, percent of persons age 25+, 2000	86.30%	78.10%
Bachelor's degree or higher, pct of persons age 25+, 2000	31.00%	22.50%
Persons with a disability, age 5+, 2000	28,842	1,540,365
Mean travel time to work (minutes), workers age 16+, 2000	20.7	24

People QuickFacts 2006	New Hanover County	North Carolina
Housing units, 2005	92,685	3,940,554
Homeownership rate, 2000	64.70%	69.40%
Housing units in multi-unit structures, percent, 2000	27.30%	16.10%
Median value of owner-occupied housing units, 2000	\$135,600	\$108,300
Households, 2000	68,183	3,132,013
Persons per household, 2000	2.29	2.49
Median household income, 2004	\$41,579	\$40,863
Per capita money income, 1999	\$23,123	\$20,307
Persons below poverty, percent, 2004	13.90%	13.80%
Business QuickFacts		
	New Hanover County	North Carolina
Private nonfarm establishments, 2005	6,774	2,169,941
Private nonfarm employment, 2005	83,709	34,099,681
Private nonfarm employment, percent change 2000-2005	8.10%	0.7% ¹
Nonemployer establishments, 2004	14,934	551,040
Total number of firms, 2002	18,129	642,597
Manufacturers shipments, 2002 (\$1000)	1,919,162	156,821,943
Wholesale trade sales, 2002 (\$1000)	1,229,257	104,331,152
Retail sales, 2002 (\$1000)	2,993,200	88,821,486
Retail sales per capita, 2002	\$18,058	\$10,686
Accommodation and foodservices sales, 2002 (\$1000)	350,447	11,237,386
Building permits, 2006	2,011	99,979
Federal spending, 2004 (\$1000)	1,055,432	552,334,201
Geography Quick Facts		
	New Hanover County	North Carolina
Land area, 2000 (square miles)	198.93	48,710.88
Persons per square mile, 2000	805.6	165.2

Source U.S. Census Bureau: State and County QuickFacts.
New Hanover County Community Assessment

The 2006 US Census Bureau's American Community Survey (ACS) provides an overview of the makeup of New Hanover County.

POPULATION New Hanover County: In 2006, New Hanover County had a total population of 183,000 - 94,000 (52 percent) females and 88,000 (48 percent) males. The median age was 38 years. Twenty-one percent of the population was under 18 years and 13 percent was 65 years and older. For people reporting one race alone, 80 percent was White; 16 percent was Black or African American; 1 percent was American Indian and Alaska Native; 1 percent was Asian; less than 0.5 percent was Native Hawaiian and Other Pacific Islander, and 2 percent was Some other race. One percent reported Two or more races. Three percent of the people in New Hanover County were Hispanic. Seventy-eight percent of the people in New Hanover County was White non-Hispanic. People of Hispanic origin may be of any race.

LANGUAGE: 94.6% of residents of New Hanover County speak English at home, 2.8% speak Spanish, 1.8% speaks other Indo-European, .6% speaks Asian or Pacific Island and .2% speaks another language at home.

HOUSEHOLDS AND FAMILIES: In 2006 there were 82,000 households in New Hanover County. The average household size was 2.2 people. Families made up 55 percent of the households in New Hanover County. This figure includes both married-couple families (41 percent) and other families (14 percent). Nonfamily households made up 45 percent of all households in New Hanover County. Most of the nonfamily households were people living alone, but some were composed of people living in households in which no one was related to the householder.

Affordable, quality housing occurs when legal building code standards are met and housing costs do not create a burden. The percent of households paying more than 30% of their income on housing costs is measured to assess housing cost burden. According to the United Way 2005 Community Assessment, this county 60.1% exceeds the state (47.8%) and national average of (51%) by of households spending 30% or more of income on housing costs.

Because the cost of living is one of the highest in the state, many people are now living on the street. Another study by Southeastern Community Mental Health found 600 people without permanent shelter in New Hanover County. It now costs some \$80 to house a homeless person for a single night, according to the Sheriff's Office. Situational homeless include a very high percentage of domestic violence victims, including families with children, who with the proper help could reintegrate back into the community. About 40% fall into this category. About another 40% fall into chronic homeless, this is defined as living on the streets for more than 3 months. Many of them have periodic or ongoing mental health/drug abuse issues and utilize the dentition facilities for lodging. The street people comprise the other 20% of the homeless. Most of these can live independently, have lived on the streets for many years and know how to get food, money, and shelter when they need it.

Providing basic life necessities, such as food, clothing and safe shelter to people in need is a basic tenant of the community's commitment to caring. The total eligible food stamp participation based on 130% federal poverty level in New Hanover County was 27,758. This issue includes the services provided to members of the community facing serious economic and social barriers

GEOGRAPHIC MOBILITY: In 2006, 76 percent of the people at least one year old living in New Hanover County were living in the same residence one year earlier; 12 percent had moved during the past year from another residence in the same county, 5 percent from another county in the same state, 7 percent from another state, and less than 0.5 percent from abroad.

EDUCATION: In 2006, 88 percent of people 25 years and over had at least graduated from high school and 35 percent had a bachelor's degree or higher. Twelve percent were dropouts; they were not enrolled in school and had not graduated from high school. The total school enrollment in New Hanover County was 47,000 in 2006. Nursery school and kindergarten enrollment was 5,000 and elementary or high school enrollment was 25,000 children. College or graduate school enrollment was 16,000.

DISABILITY: In New Hanover County, among people at least five years old in 2006, 17 percent reported a disability. The likelihood of having a disability varied by age - from 4 percent of people 5 to 15 years old, to 14 percent of people 16 to 64 years old, and to 41 percent of those 65 and older.

INDUSTRIES: In 2006, for the employed population 16 years and older, the leading industries in New Hanover County were Educational services, and health care, and social assistance, 24 percent, and Arts, entertainment, and recreation, and accommodation, and food services, 13 percent.

OCCUPATIONS AND TYPE OF EMPLOYER: Among the most common occupations were: Management, professional, and related occupations, 36 percent; Sales and office occupations, 26 percent; Service occupations, 19 percent; Construction, extraction, maintenance and repair occupations, 9 percent; and Production, transportation, and material moving occupations, 9 percent. Seventy-eight percent of the people employed were Private wage and salary workers; 14 percent was Federal, state, or local government workers; and 8 percent was Self-employed in own not incorporated business workers.

TRAVEL TO WORK: Eighty-one percent of New Hanover County workers drove to work alone in 2006, 11 percent carpooled, 1 percent took public transportation, and 4 percent used other means. The remaining 4 percent worked at home. Among those who commuted to work, it took them on average 20.4 minutes to get to work.

INCOME: The median income of households in New Hanover County was \$43,031. Seventy-nine percent of the households received earnings and 19 percent received retirement income other than Social Security. Twenty-six percent of the households received Social Security. The average income from Social Security was \$14,509. These income sources are not mutually exclusive; that is, some households received income from more than one source.

POVERTY AND PARTICIPATION IN GOVERNMENT PROGRAMS: In 2006, 14 percent of people were in poverty. Eighteen percent of related children under 18 were below the poverty level, compared with 10 percent of people 65 years old and over. Eight percent of all families and 30 percent of families with a female householder and no husband present had incomes below the poverty level.

HOUSING CHARACTERISTICS: In 2006, New Hanover County had a total of 96,000 housing units, 15 percent of which were vacant. Of the total housing units, 69 percent was in single-unit structures, 27 percent was in multi-unit structures, and 5 percent was mobile homes. Forty-four percent of the housing units were built since 1990.

OCCUPIED HOUSING UNIT CHARACTERISTICS: In 2006, New Hanover County had 82,000 occupied housing units - 51,000 (62 percent) owner occupied and 31,000 (38 percent) renter occupied. Fifteen percent of the households did not have telephone service and 8 percent of the households did not have access to a car, truck, or van for private use. Multi Vehicle households were not rare. Thirty-nine percent had two vehicles and another 18 percent had three or more.

HOUSING COSTS: The median monthly housing costs for mortgaged owners was \$1,280, nonmortgage owners \$376, and renters \$769. Thirty-seven percent of owners with mortgages, 16 percent of owners without mortgages, and 54 percent of renters in New Hanover County spent 30 percent or more of household income on housing.

Source: US Census Bureau American Community Survey, 2006



Violence & Crime in New Hanover County

According to the North Carolina Department of Justice, the crime index rate includes the total number of violent crimes (murder, rape, robbery and aggravated assault and Property crimes (burglary, larceny and motor vehicle theft.) Violent crimes are defined in the Uniform Crime Reporting (UCR) Program as those offenses which involve force or threat of force.

	Crime index rate	Violent Crime Rate	Property Crime Rate
North Carolina			
2005	4,622.9	478.6	4,144.3
2006	4,649.8	483.0	4,166.8
New Hanover County			
2005	6,445.1	633.2	5,811.9
2006	6,157.7	636.8	5,520.9

Family Violence

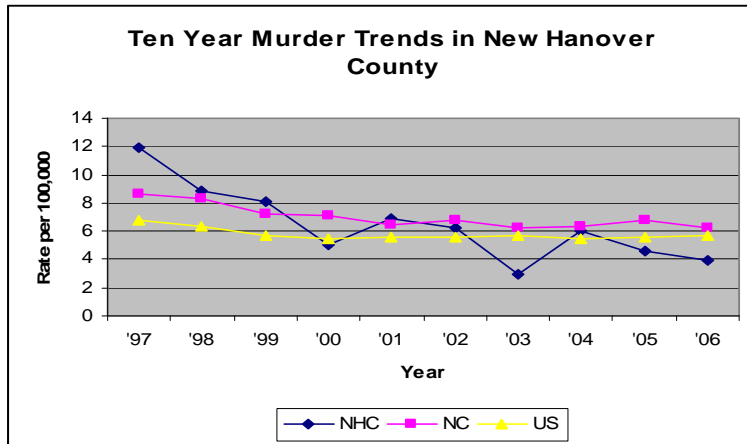
In 2005, United Way researched the violence in New Hanover County. Family Violence is a form of domestic violence that exists when a relationship includes physical, sexual, emotional, or economic abuse. Victims of family violence are most often, women, elderly, and children. This is a very difficult area to track because the majority of evidence is self reported. There were reports of 7 domestic violence homicides in New Hanover County. These can be compared to the 72 reported domestic violence homicide victims reported to the state, which reflects violence inflicted on adults. Another frequent group of adult abuse victims are members of the elderly population. New Hanover County had 22.7% substantiate elderly abuse and neglect cases.

While children are present in a home where violence against women is present, children are 300% more likely to experience family violence. In 2004, New Hanover County reported 34 cases of substantiated child abuses. In 2003 New Hanover had 572 children in DSS placements. Children subjected to a child protective services assessment included 11.8 % abuse, 84.5% neglect, 2.1% abuse and neglect, and 1.6% dependency.

Action for Children Report May 2006	New Hanover County	North Carolina
Early Care Children in Regulated Child Care Ages 0-12	22.4%	17.3%
Maltreatment Reports Investigated (per 1,000)	77.0	53.6
Children in Foster Care (per 1,000)	13.8	4.7
Juveniles with Complaints Approved for court	359	12,119
# of juveniles sentenced	278	8,418

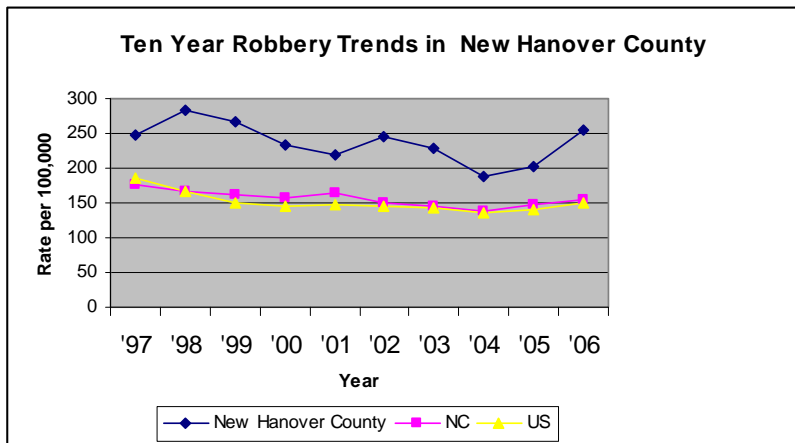
Source: NC Department of Justice, www.ncdoj.com, Action for Children Report www.ncchild.org, Department of Social Services, 2006 United Way Community Assessment

University of North Carolina Wilmington created a presentation regarding violence trends and crime among adults and youth.

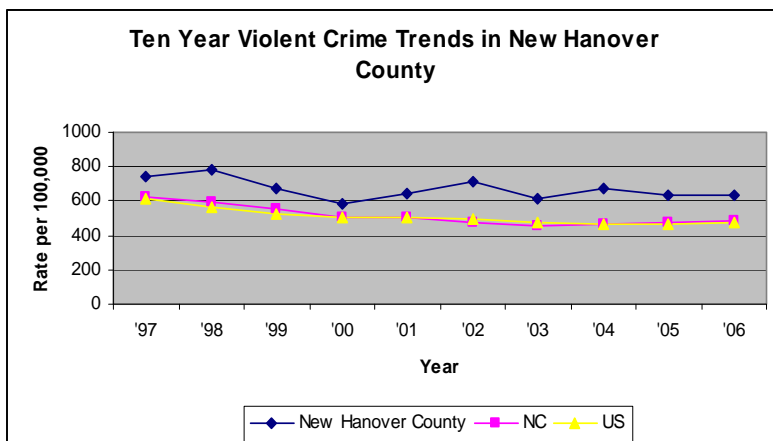


Year	New Hanover	North Carolina	United States
'97	11.9	8.6	6.8
'98	8.9	8.3	6.3
'99	8.1	7.2	5.7
'00	5	7.1	5.5
'01	6.9	6.4	5.6
'02	6.2	6.8	5.6
'03	3	6.2	5.7
'04	6	6.3	5.5
'05	4.6	6.8	5.6
'06	3.9	6.2	5.7

New Hanover County continues to be significantly above the state and the United States rate for robbery and violent crime trends.



Year	New Hanover	North Carolina	United States
'97	247.4	176	186
'98	283.9	166	166
'99	267.6	161	150
'00	232.4	157	145
'01	219.7	165	149
'02	244.1	150	146
'03	229.3	146	143
'04	187.1	139	137
'05	201.2	149	141
'06	253.9	155	149



Year	New Hanover	North Carolina	United States
'97	747.1	620	611
'98	778.9	597	568
'99	672.7	551	523
'00	587.5	501	507
'01	648.4	504	505
'02	710.6	475	494
'03	611.2	455	476
'04	671.9	461	463
'05	633.2	479	469
'06	636.8	483	474

In 2006, New Hanover County ranked 4th in the state for rates for robbery and was ranked 54th in the state for murder rates.

Ranking of NC Counties by 2006 Robbery Rates

County	Robbery Rate
1. Mecklenburg	420.2
2. Durham	417.9
3. Guilford	274.5
4. New Hanover	253.9
5. Forsyth	229.1
6. Cumberland	224.4
7. Vance	217.8
8. Pitt	210.6
9. Robeson	203.4
10. Edgecombe	200.3
11. Nash	191.1
12. Gaston	153.1
13. Pasquotank	146.4
14. Lee	142.3
15. Halifax	140.4
59. Brunswick	47.3

Source: NC State Bureau of Investigation

Ranking of NC Counties by 2006 Murder Rates

County	Murder Rate
1. Warren	38.2
2. Bladen	24.9
3. Robeson	23.6
4. Anson	22.9
5. Camden	22.3
6. Pasquotank	20.6
7. Vance	16.0
8. Edgecombe	15.3
9. Lenoir	13.9
10. Graham	13.1
11. Hertford	12.6
12. Moore	11.3
13. Northampton	10.9
14. Mecklenburg	10.7
15. Nash	10.7
30. Brunswick	6.9
54. New Hanover	3.9

Source: NC State Bureau of Investigation

Source: 2006 Violence Trends in New Hanover County Presentation

Employment

Labor Force and Employment

Percent Working Age Population	66.2%
Unemployment Rate 2006	3.7%
Female Labor Force Participation Rate	60.0%
Percent Working in Manufacturing	6.1%
Average Wage for Manufacturing	\$58,778
Percent Professionals	34.5%
Percent Working in Production	11.1%
Percent Working in Sales	27.0%
Total Announced Layoffs 2006	84

Agriculture and Natural Resources

Total Agricultural Receipts	\$7,501,000
Total Farms 2002	77
Percent Family Owned Farms	93.5%
Average Farm Size 2002	
Tobacco Dependency Ranking	Medium

Source: NC Rural Economic Development Center

<http://www.ncruralcenter.org/databank/profile.asp?county=New%20Hanover>

The unemployment rate in New Hanover County the end of October 2007 was 3.7% compared to the state's 4.6%

2007 Labor Force Estimates

NHC Unadjusted Figures Month	Labor Force	Number Employed	Number Unemployed	Unemployment Rate
January	104,135	99,998	4,137	4.00%
February	104,673	100,642	4,031	3.90%
March	105,514	101,822	3,692	3.50%
April	106,854	103,320	3,534	3.30%
May	107,635	103,823	3,812	3.50%
June	109,590	105,298	4,292	3.90%
July	110,076	105,763	4,313	3.90%
August	109,006	105,025	3,981	3.70%
September	108,240	104,398	3,842	3.50%
October	107,479	103,548	3,931	3.70%

NC Unadjusted Figures Month	Labor Force	Number Employed	Number Unemployed	Unemployment Rate
January	4,476,952	4,251,275	225,677	5.00%
February	4,489,244	4,270,211	219,033	4.90%
March	4,497,645	4,294,479	203,166	4.50%
April	4,506,090	4,303,189	202,901	4.50%
May	4,527,098	4,312,936	214,162	4.70%
June	4,571,662	4,336,722	234,940	5.10%
July	4,581,689	4,343,108	238,581	5.20%
August	4,540,490	4,327,094	213,396	4.70%
September	4,540,947	4,335,900	205,047	4.50%
October	4,543,048	4,333,665	209,383	4.60%

Source: <http://eslmi23.esc.state.nc.us/ncp/indInfo/topTen.aspx>

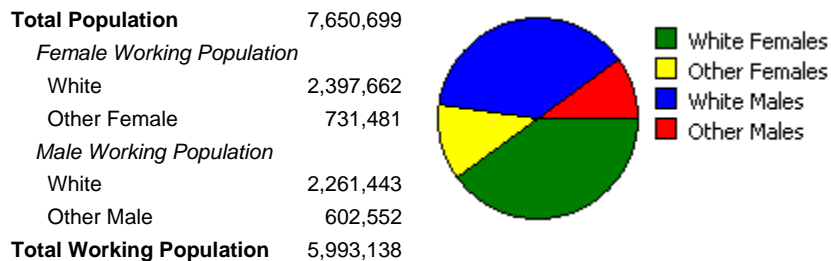
The 2005 United Way Community Assessment found the average weekly wages for Brunswick, New Hanover and Pender counties all fall below the state average of \$696 and far below the national average of \$825. Projections by the North Carolina Employment Security Commission forecast New Hanover County's economy to grow approximately 7.31 to 9.61 percent during the seven-year period between 2006 through 2012. With the growing global economy, future emphasis is on knowledge based industries, information services, and technologies. With UNC-Wilmington College and Cape Fear Community College located in Wilmington, New Hanover County has become a favorable location for knowledge based, information and technology firms. New Hanover County's other economic strengths lie in tourism and retail sales. This has helped New Hanover County continue to have a strong economy even during down turns experienced in other areas outside of New Hanover County.

Source: United Way Community Assessment, New Hanover County Website www.nhcgov.com

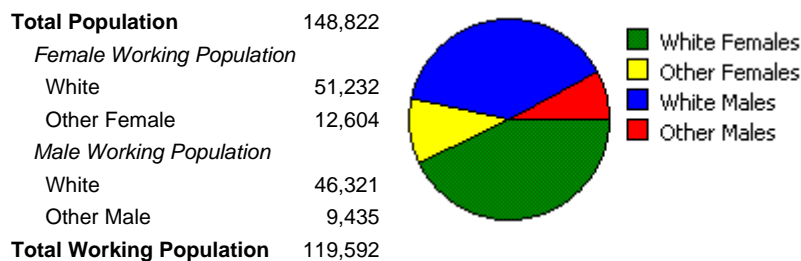
New Hanover County Top Employers

Company Name	Industry	Employment Range
GENERAL ELECTRIC CORP	Manufacturing	500-999
CITY OF WILMINGTON	Public Administration	1,000 or above
CORNING INCORPORATED	Manufacturing	1,000 or above
COUNTY OF NEW HANOVER	Public Administration	1,000 or above
GENERAL ELECTRIC CO INC	Manufacturing	1,000 or above
GENERAL ELECTRIC CO INC	Manufacturing	1,000 or above
NEW HANOVER COUNTY SCHOOLS	Services	1,000 or above
NEW HANOVER REGIONAL MEDICAL CENTER	Services	1,000 or above
UNIV OF NC AT WILM.	Services	1,000 or above
UNIVERSITY OF NORTH CAROLINA	Services	1,000 or above

North Carolina Population Statistics (1999)



New Hanover County Population Statistics(1999)



Source: NC Profile <http://eslmi23.esc.state.nc.us/ncp/genInfo/labForce.aspx>



Education

According to the 2006 New Hanover County School Annual Report, student enrollment has increased from 20,649 students in 1995 to 24,076 students in 2005. From 1995 to 2000, enrollment increased 2.3 percent, compared to 11 percent from 2001 to 2006. This accelerated growth of students is a continual challenge to the system’s capacity to keep up with the need for adequate space and learning materials. Economic growth, while excellent for New Hanover County, also comes with a budgeting responsibility to help fund the additional resulting costs of increased student population.

New Hanover County School System is ranked the 12th largest school system in North Carolina and is comprised of 3500+ faculty and staff members and 24,000+ students. Over 65% of these students are white, 26.3% black, 3% Hispanic, .4% American Indian, 1.2% Asian and 3.6% Multiracial.

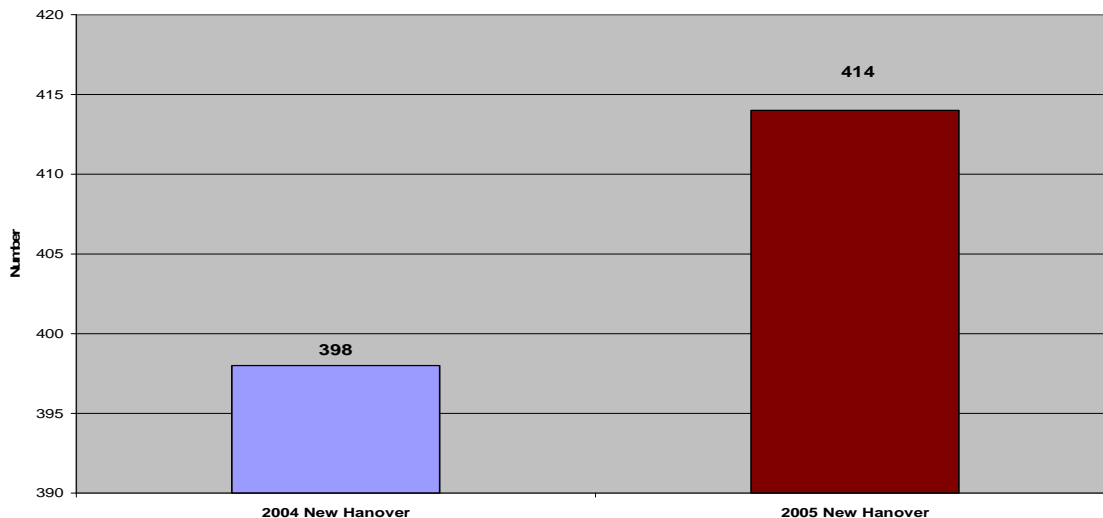
The average school size in New Hanover County compares favorably to the state for elementary students, the exceedingly larger numbers are seen in the secondary schools. New Hanover County Public Schools is the main source of elementary and secondary education in the County with 3 Title One Pre-K Centers, 22 elementary schools, 8 Middle Schools, and 5 High Schools. The County is also home to many private schools both secular (6) and parochial (11). The average school size in New Hanover County compares favorably to the state for elementary students, the exceedingly larger numbers are seen in the secondary schools. The per student expenditures K-12 is \$7,838. The average class size: K-Grade 2-21; Grades 3-9-26; Grades 10-12-29. Number of students receiving disability services: 2,989 and 180 preschool students are receiving disability services.

	Elementary (K-5)	Middle(6-8)	High (9-12)
North Carolina	484	771	1,684
NHCS	494	674	1,026

The mission in the New Hanover County Schools is to provide a high quality education that prepares all students to be productive and contributing citizens of a global society.

New Hanover County has over 60% students entering graduate. Only 12.7% of the population have less than a high school education and about 86% of people age 25 and older have graduated from high school and 31% possess a bachelor’s degree or higher. In 2003, the dropout rate was 4.7% compared to the state’s 4.8%. The numbers of drop outs in New Hanover County have increased since 2004 from 356 to 414.

Number of Public High School Drop-Outs in New Hanover County for 2004 & 2005



Source: www.nhcs.k12.nc.us

New Hanover County School Health

The Center for Science in the Public Interest (CSPI) Schools published The School Foods Report Card which provides the county's nutritional policies. Provided below is the listing of nutritional policies in New Hanover County schools.

- Soft drinks may not be sold in elementary schools and may not be sold in middle and high schools during breakfast and lunch periods.
- Sugared carbonated soft drinks, including mid-calorie carbonated soft drinks, may not be sold in middle schools (diet sodas are allowed).
- Not more than 50% of the offerings for sale to students in high school may be sugared carbonated soft drinks (diet sodas are not counted in the 50%).
- Bottled water products must be available in every school that has beverage vending. Effective by the 2006-2007 school year, snacks will meet the following standards for vending:
 - No snack vending will be available to students in elementary schools.
 - In middle and high schools, 75% of snacks may not have more than 200 calories per portion or package.
- The nutrition standards set will promote gradual changes to increase fruits and vegetables, increase whole grain products, and decrease foods high in total fat, trans fat, saturated fat, and sugar.
- Public schools cannot use cooking oils in their school food programs that contain trans fat or sell processed foods that contain trans fat that were formed during the commercial processing of the foods.

Source: www.cspinet.org/schoolreportcard.pdf.

New Hanover County School Health

There are four main concerns that school health nurses are observing; obesity/nutrition, asthma, severe allergies and diabetes. We have a total of 1307 students with Asthma in the schools. There was a total of 73 Diabetics (Type 1 and 2 combined), 348 students with severe allergies that might require an epipen, 869 children diagnosed as ADD/ADHD and 47,091 injuries that required some type of first aid. There was also a total of 7053 students screened for vision and referred 494 of them for care and 390 of those secured care.

Source: New Hanover County School Health Report 2006-2007

Childhood Obesity:

According to the Obesity Prevention Initiative in New Hanover County, 30.8% of children between 2-18 years are overweight or at-risk for overweight (85th percentile or higher for Body Mass Index - BMI) . Childhood obesity continues to rise in the United States and nationally, research has also shown that it is on the rise in eastern North Carolina as it is in the state and the nation.

Nationally, more than one third of children are at risk for overweight and 17.1 percent are overweight. Some researchers now conclude we may be raising the first generation of children in history to have a shorter life expectancy than their parents due to obesity-related co-morbidities.

Adults in eastern North Carolina have 13 percent higher rates of general mortality than adults in the rest of NC. In 1999-2000, 36.5 percent of adults in ENC were overweight and 24.6 percent were obese. Less than one quarter of adults eats the daily recommended amounts of fruits and vegetables and only 40 percent meet the current recommendation for physical activity Regional studies in ENC reveal 40 to 50 percent of children are at risk for or overweight. Although there has not been a statewide system to monitor child weight status in NC, a growing number of regional studies reveal strikingly similar findings. Many ENC youth are significantly heavier than their counterparts in other parts of the state and nation, with some studies reporting that 30 percent of ENC children and adolescents are overweight compared to 17 percent nationally.

The NC Academy of Family Physicians which impacts Duplin, Hertford, Hoke, Sampson, New Hanover, Nash & Craven is partnering with NC Cooperative Extension to build a referral system for overweight patients ages 12-18 to receive services. They have developed a resource kit for physicians to provide an initial assessment, distribute materials and refer patients to an Cooperative Extension agent for follow up counseling and support.

*Source: New Hanover County School 2006-2007 Annual Report
May 2006 Childhood Obesity by Y. Crawford: How Do Children in Eastern North Carolina Measure Up?*



Insurance & Health Access

According to the United States Bureau of the Census, in 2004, 45.8 million U.S. Residents lacked health insurance for the entire year. Approximately 1.3 million of those uninsured Americans lived in North Carolina. Substantial policy interest has focused on the uninsured both nationally and, given annual increases North Carolina has experienced; it is an especially important issue in this state. The percent of North Carolina residents that lack health insurance for a full year has risen from 15.3 percent in 2000 to 17.5 percent in 2004.

Health insurance coverage for the total population for NC in 2005, 53% employers provided health insurance coverage to their employees, 5% individuals have private insurance, 13% receive Medicaid, 12% receive Medicare coverage, 2% individuals receive other public health insurance and 16% were uninsured. Being un-insured is a major barrier to accessing and receiving health services for the citizens of these counties and relates directly with education, poverty and low-income wages. According to the Sheps 2004 Update, New Hanover County has 27,753 people lacking health insurance, accounting for over 18% of the population. This ranks New Hanover county 31 in the state.

New Hanover County ranks better than the state in terms of the ratio per physician per population, 33.10 % compared to 20.80% in North Carolina. In 2003, there were 841 persons per primary care physicians, 70 persons per nurse, 1386 persons per dentists and the hospital use rate in 2003 was 109 compared to the states rate of 112.

In the 2005 North Carolina Health Risks Among North Carolina adults, approximately 24% stated they do not have a personal doctor and 12% attributed not seeing a doctor due to costs. In the Community Survey, health insurance ranked the number one response of what most people lacked funds for.

Source: 2004 Sheps Update, 2005 Report Health Risks among North Carolina Adults



Pregnancies and Live Births

New Hanover County had a total of 10,709 births from 2001-2005 with a total birth rate of 12.5 compared to North Carolina's birth rate of 14.1 per 1,000 population.

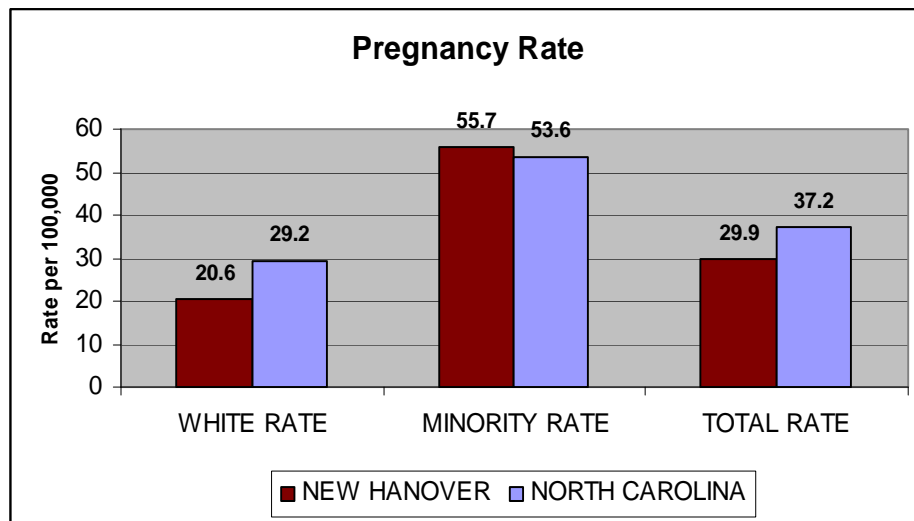
North Carolina Resident Live Birth Rates per 1,000 Population, 2001-2005

Residence	Total Births	Total Rate	White Births	White Rate	Minority Births	Minority Rate
North Carolina	596,524	14.1	433,265	13.7	163,259	15.3
New Hanover	10,709	12.5	8,242	11.8	2,467	15.7

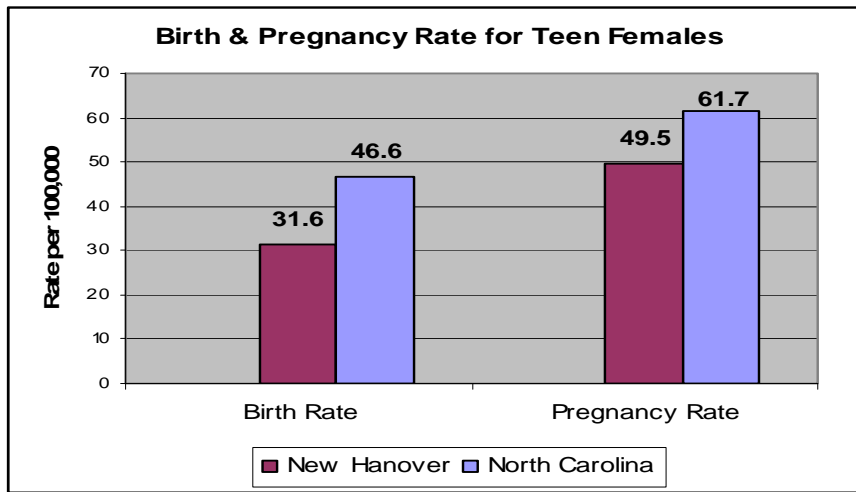
The white birth rate is lower than North Carolina's birth rate (11.8 versus 13.7 per 1000). However, the minority birth rate is slightly higher than the state's average minority birth rate (15.7 versus 15.3 per 1000).

NC RESIDENT PREGNANCY RATES PER 1,000 POPULATION FOR GIRLS 15-17, BY RACE, 2001-2005

	WHITE PREGNANCIES	WHITE RATE	MINORITY PREGNANCIES	MINORITY RATE	TOTAL PREGNANCIES	TOTAL RATE
RESIDENCE	16,328	29.2	13,699	53.6	30,260	37.2
NORTH CAROLINA						
NEW HANOVER	226	20.6	215	55.7	444	29.9



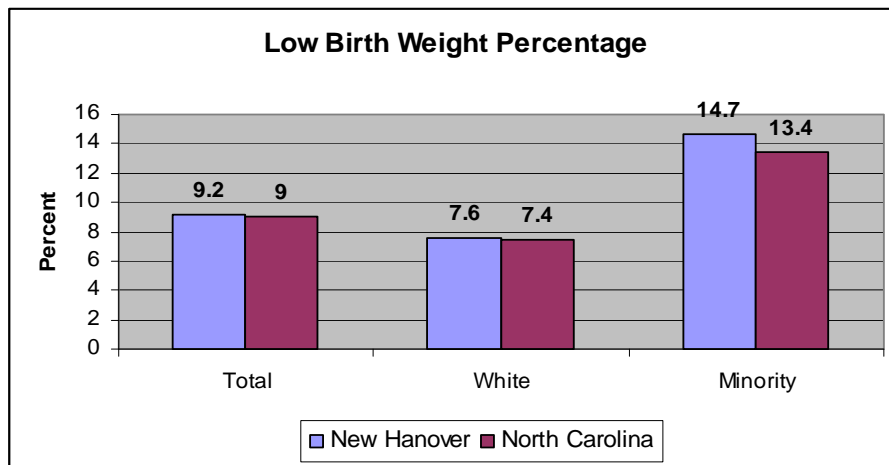
New Hanover County is below the white and total pregnancy rates for girls 15-17 but exceeds the state rate in the minority teen pregnancy rate 55.7 compared to the state's 53.6 per 100,000.



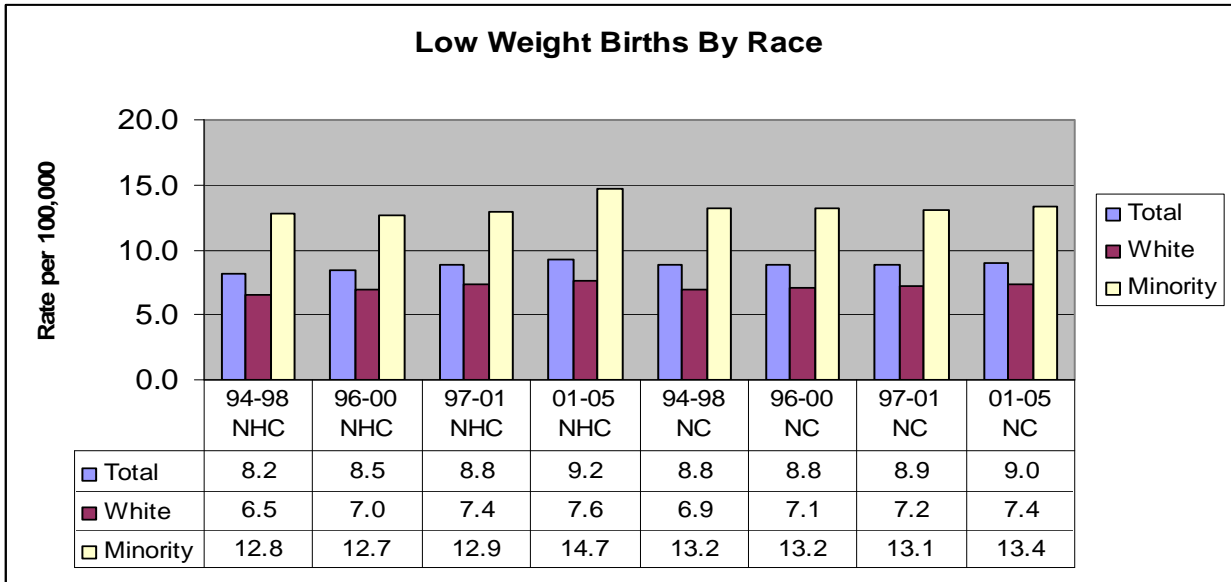
According to the Action for Children May 2006 report, there was over 4.1% of mothers who received late or no prenatal care compared to North Carolina's 2.9%, which can be shown in the percent of low weight births in New Hanover County. New Hanover County had a total of 985 low birth weight babies. The low birth weight percentage in New Hanover County is greater than the North Carolina percentages in both the white and minority populations; white New Hanover County 7.6 compared to 7.4 North Carolina and Minority Low Birth weight of 14.7 in New Hanover County respectively to 13.4 North Carolina percent.

NC RESIDENT BIRTHS 2001-2005: NUMBER AND PERCENT LOW BIRTH WEIGHT BIRTHS BY RACE

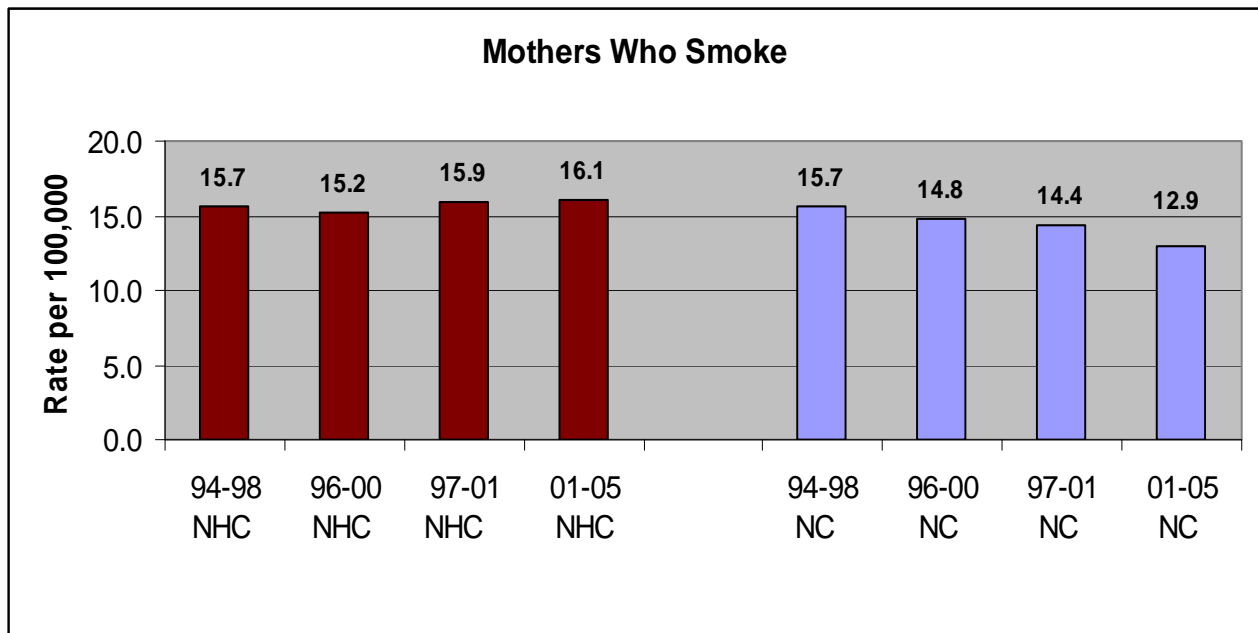
	TOTAL LOW BIRTHWEIGHT		WHITE LOW BIRTHWEIGHT		MINORITY LOW BIRTHWEIGHT	
	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT
RESIDENCE	53,975	9.0	32,097	7.4	21,878	13.4
NORTH CAROLINA						
NEW HANOVER	985	9.2	623	7.6	362	14.7



From 1994-2005, there has been an increase in the rates of low weight births, although New Hanover County continues to rank below the state's rates.



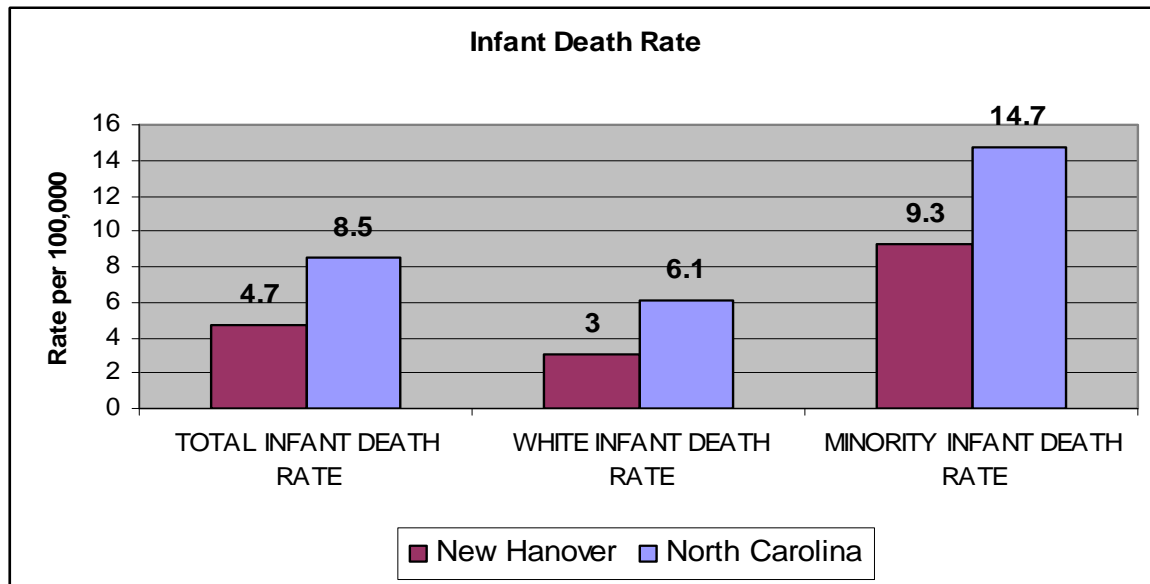
From 2001-2005 there were 1722 (Over 16%) of births were from mothers who smoked prenatally compared to the state percentage of 12.9%.



**NC RESIDENT INFANT (<1 YEAR) DEATH RATES PER 1,000 LIVE BIRTHS,
2001-2005**

New Hanover County is below the state infant death rate in white, minority and total infant death rates. There were a total of 50 infant deaths in New Hanover County. New Hanover is significantly below the state rate in total infant death rates and in the white and minority infant death rates.

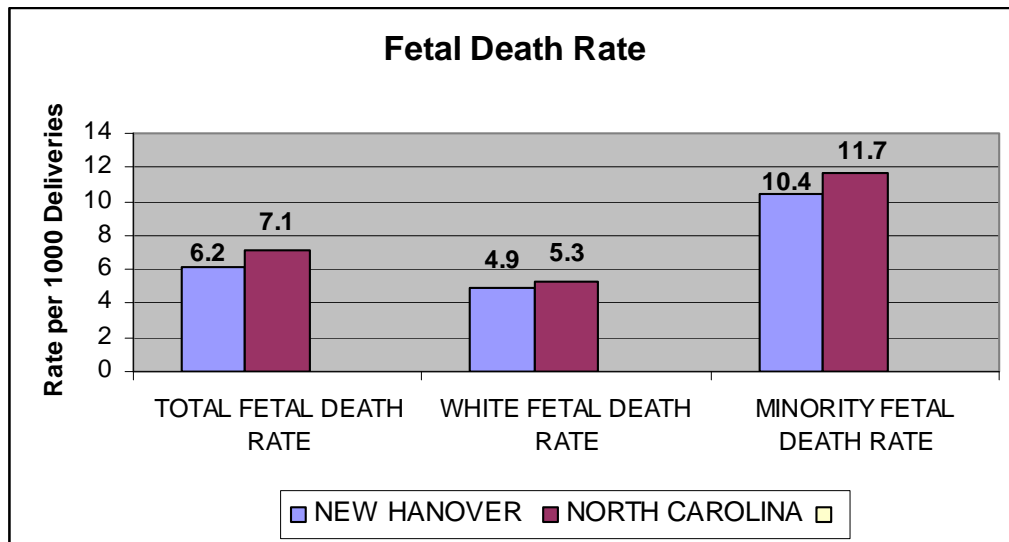
RESIDENCE	TOTAL INFANT DEATHS	TOTAL INFANT DEATH RATE	WHITE INFANT DEATHS	WHITE INFANT DEATH RATE	MINORITY INFANT DEATHS	MINORITY INFANT DEATH RATE
North Carolina	5,056	8.5	2,648	6.1	2,404	14.7
New Hanover	50	4.7	25	3.0	23	9.3



NC RESIDENT FETAL DEATH RATES PER 1,000 LIVE DELIVERIES, 2001-2005

Fetal death is defined as a death that occurs at 20 or more weeks of gestation. The total fetal death rate in New Hanover County is lower than the state's average fetal death rate (6.2 versus 7.1 per 1000 deliveries). All groups, whites and minority fetal death rates in New Hanover County rank below the state as well.

	TOTAL FETAL DEATHS	TOTAL FETAL DEATH RATE	WHITE FETAL DEATHS	WHITE FETAL DEATH RATE	MINORITY FETAL DEATHS	MINORITY FETAL DEATH RATE
RESIDENCE	4,245	7.1	2,300	5.3	1,936	11.7
NORTH CAROLINA						
NEW HANOVER	67	6.2	41	4.9	26	10.4



Intervention Strategies

- Child Fatality Task Force/SIDS counseling
- Safe Kids
- Fresh Start Smoking Cessation Program
- Newborn Postpartum and Maternity Care services



New Hanover County Health Behaviors

How does New Hanover County Measure Up on Health Behaviors?

Health of residents in New Hanover County based on 374 CDC Behavioral Risk Factor Surveillance System Survey Questionnaires from 2002 to 2004:

General health status score of residents in New Hanover County is from 1 (poor) to 5 (excellent) is 3.5. This is about average.

79.7% of residents exercised in the past month. This is about average.

24.3% of residents had sunburn in the past 12 months. This is about average.

52.7% of residents smoked 100+ cigarettes in their life. This is more than average.

54.3% of residents drank alcohol in the past 30 days. This is about average.

75.2% of residents visited a dentist within the past year. This is more than average.

Average weight of males is 195 pounds. This is more than average.

Average weight of females is 157 pounds. This is about average.

Health of residents in New Hanover County based on 433 CDC Behavioral Risk Factor Surveillance System Survey Questionnaires from 2005.

36.5 % of residents ranked overweight

23.5% of residents ranked obese.

38.3% of residents are in the recommended weight range. This is more than average.

1.7% of residents are classified as being underweight. This is about average.

81.6% of residents reported they have participated in exercise in the past 30 days. This is more than average.

14.6% of residents reported have not participated in any physical activities in the past 30 days.

North Carolina Tobacco Use Prevention & Control Branch Update: New Hanover County March 2007 Status and Need

17.3% adults currently smoke cigarettes.

50.9% of New Hanover adults made a serious quit attempt in 2005.

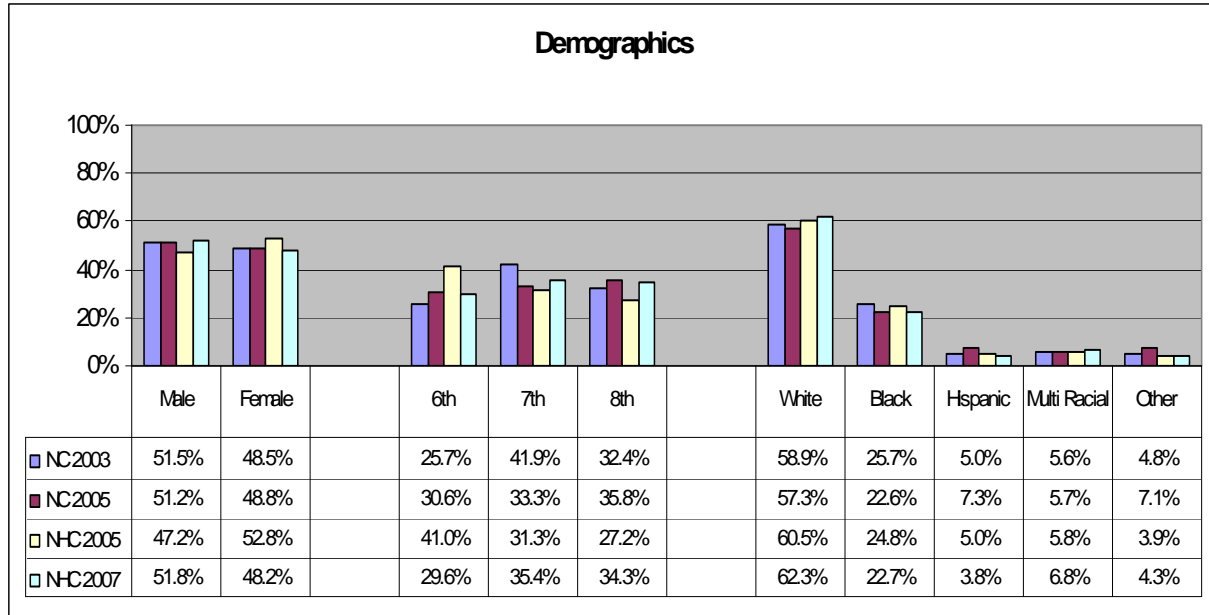
15.5% adults are exposed to secondhand smoke at work.

Estimated smoking attributable to Medicaid costs in New Hanover County in 2002 was \$15,612,153.

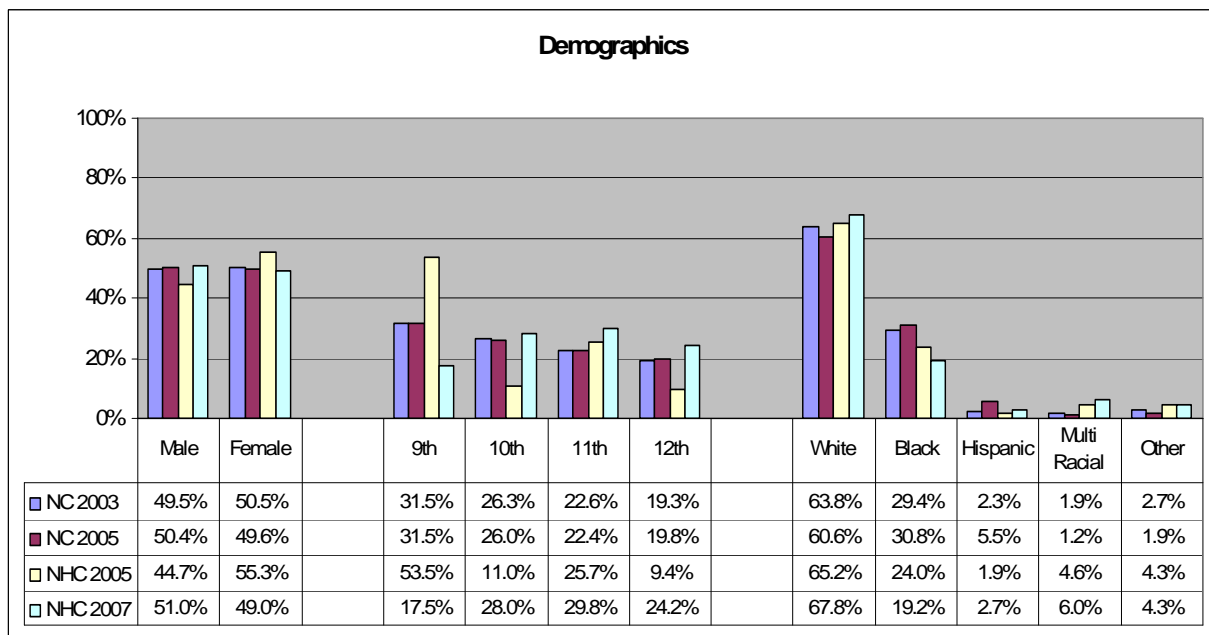
New Hanover County Youth Health Behaviors

Youth risk behavior surveys were conducted by the CDC and UNCW evaluators over a two week period in April of 2005 and 2007. UNCW evaluators surveyed schools not already surveyed by the CDC. In 2005, 5 classrooms in 3 high schools and 5 classrooms in 5 middle schools. In 2007 there were 5 classrooms in 4 high schools and 5 classrooms in 5 middle schools surveyed. Surveys examined health risk behaviors including violence, tobacco and alcohol use, sexual behavior, drug use, physical and psychological health.

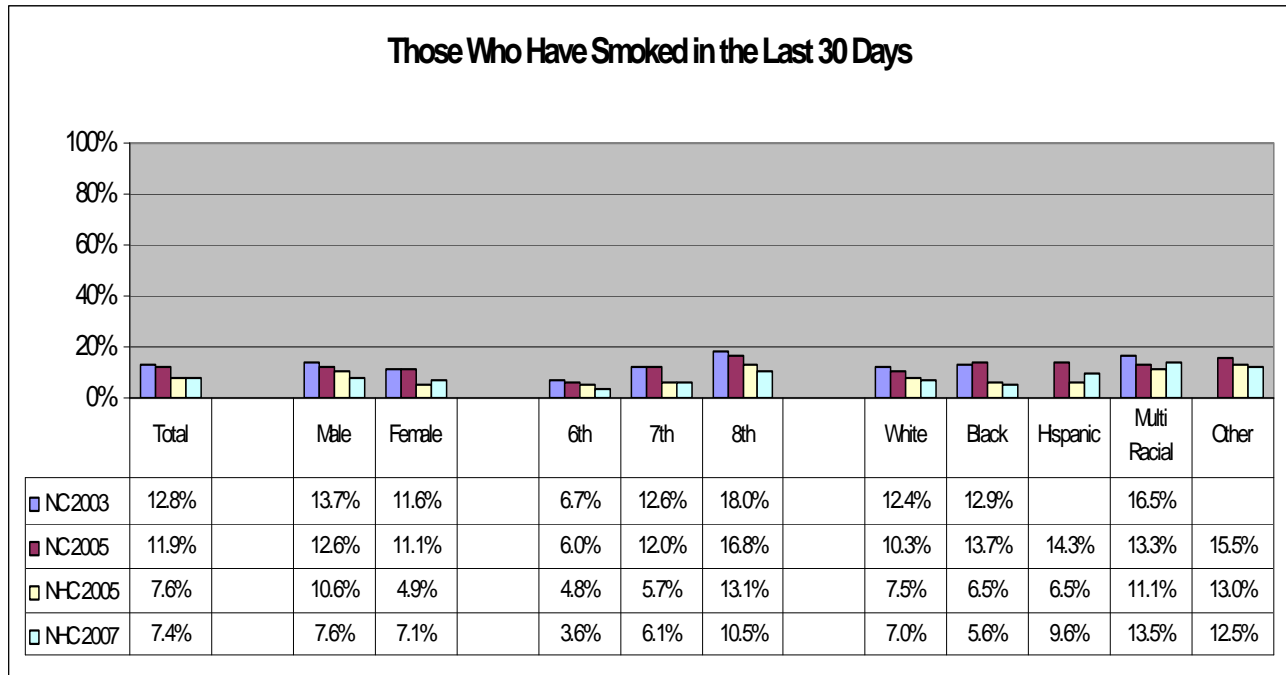
Middle School Survey Participants



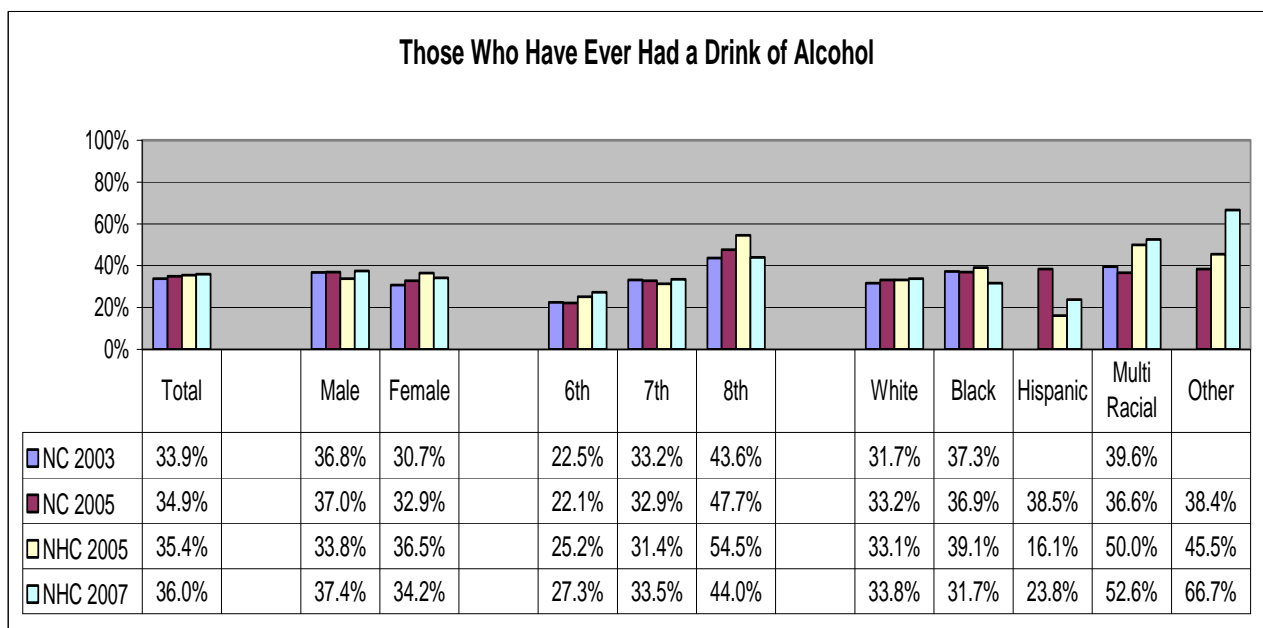
High School Survey Participants



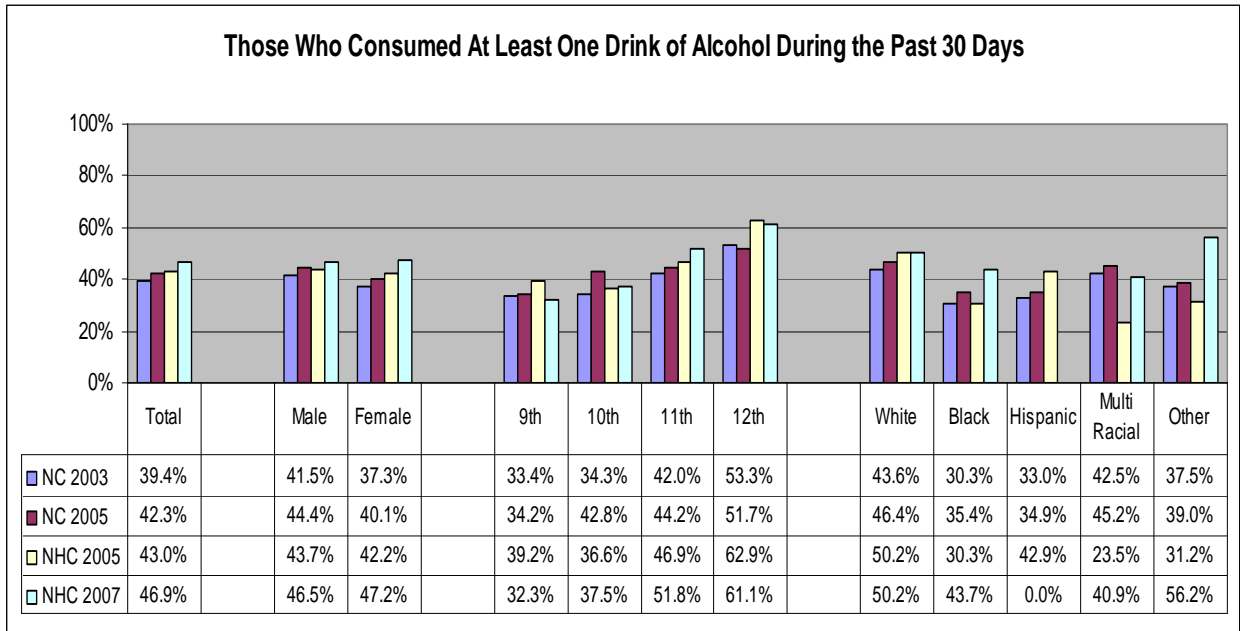
The NC Tobacco Use Prevention and Control Branch found that 62.1% of high school and 33.5% middle school students in this region have tried tobacco. Also 71.3% high school students in this region are exposed to secondhand in rooms or cars at least one day or more per week. There has been a decrease in the amount of 8th graders who have smoked in the last 30 days, but an increase in 7th grades who have smoked.



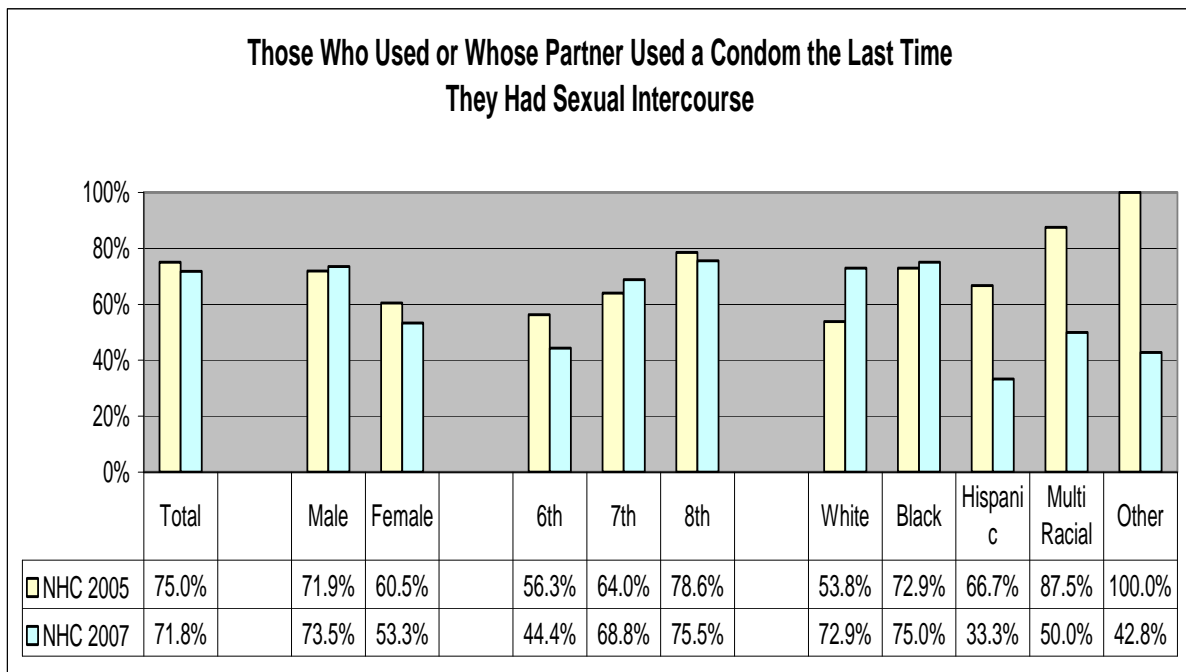
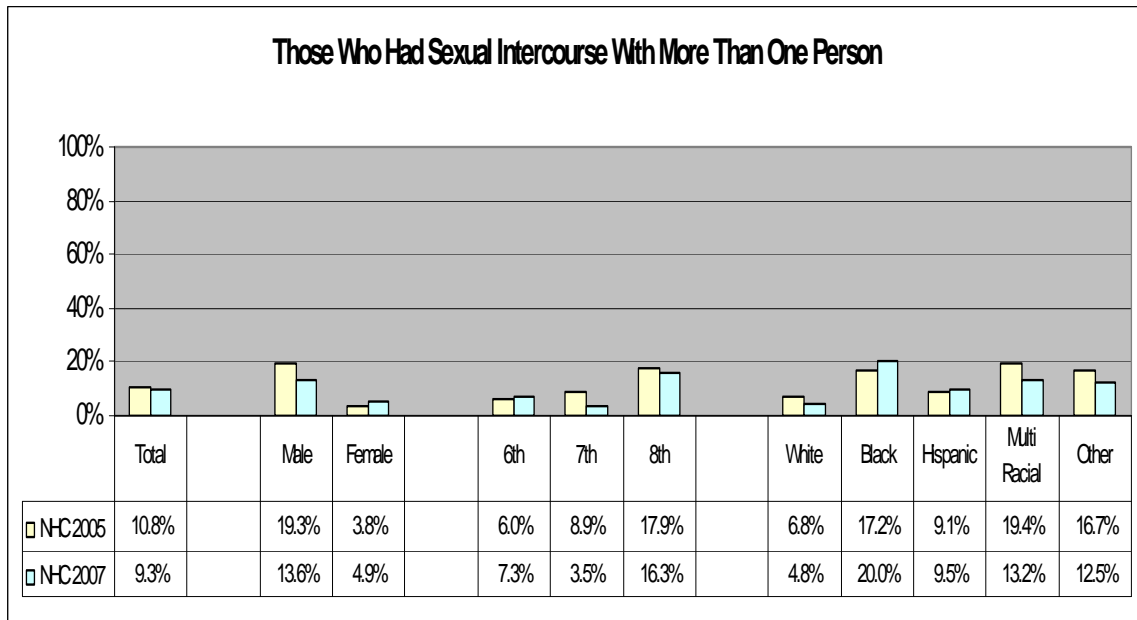
Alcohol remains the substance of choice for youth. Over 44% of 8th and 61% of 12th graders have had a drink of alcohol. Over 44% of those 12th graders have consumed 5 drinks or more within a couple of hours.



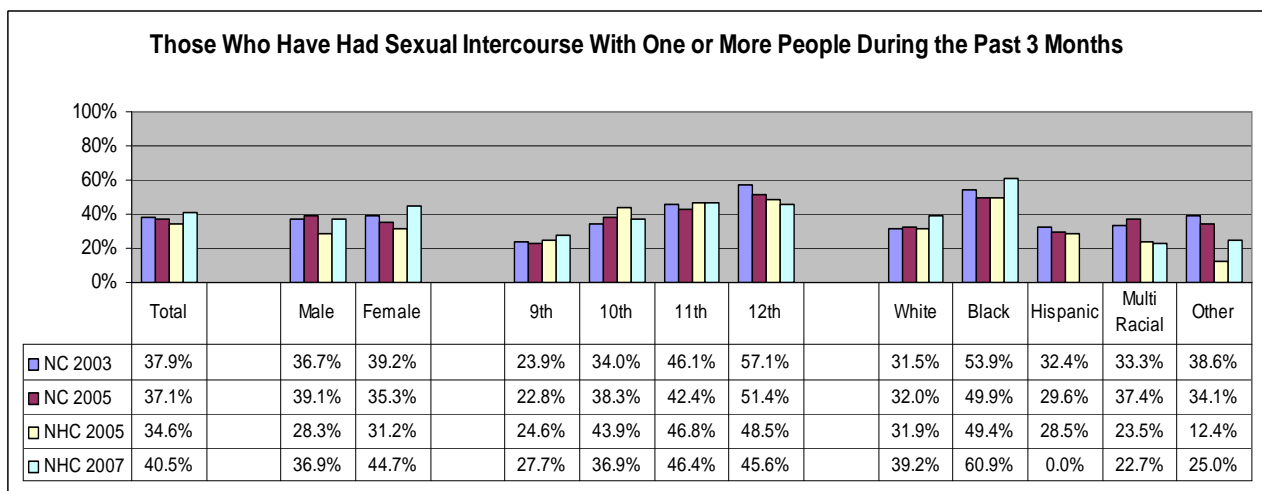
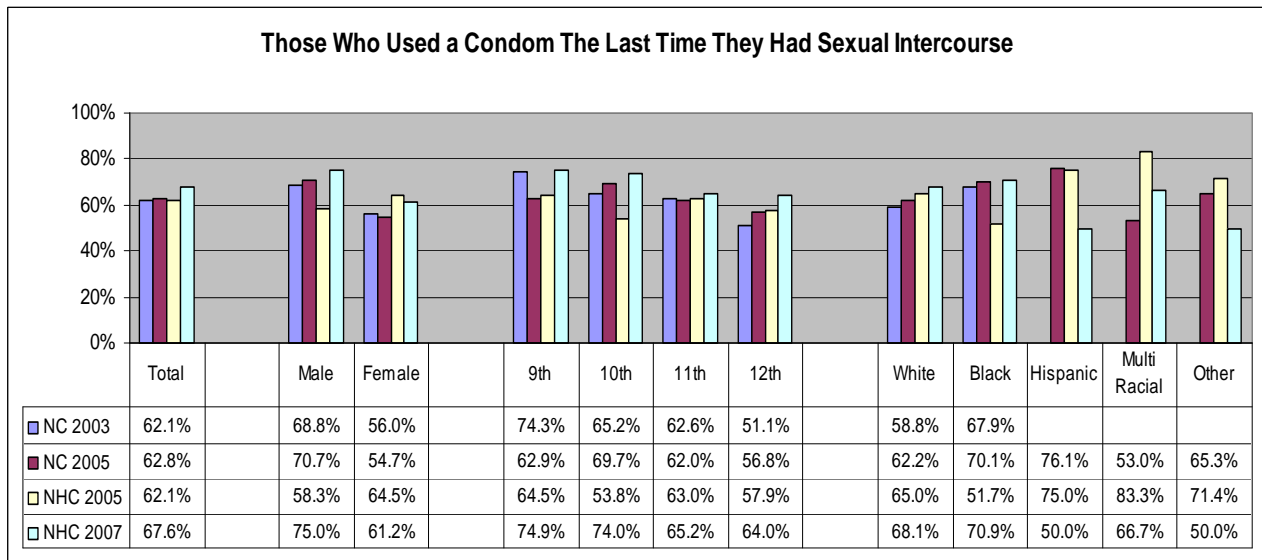
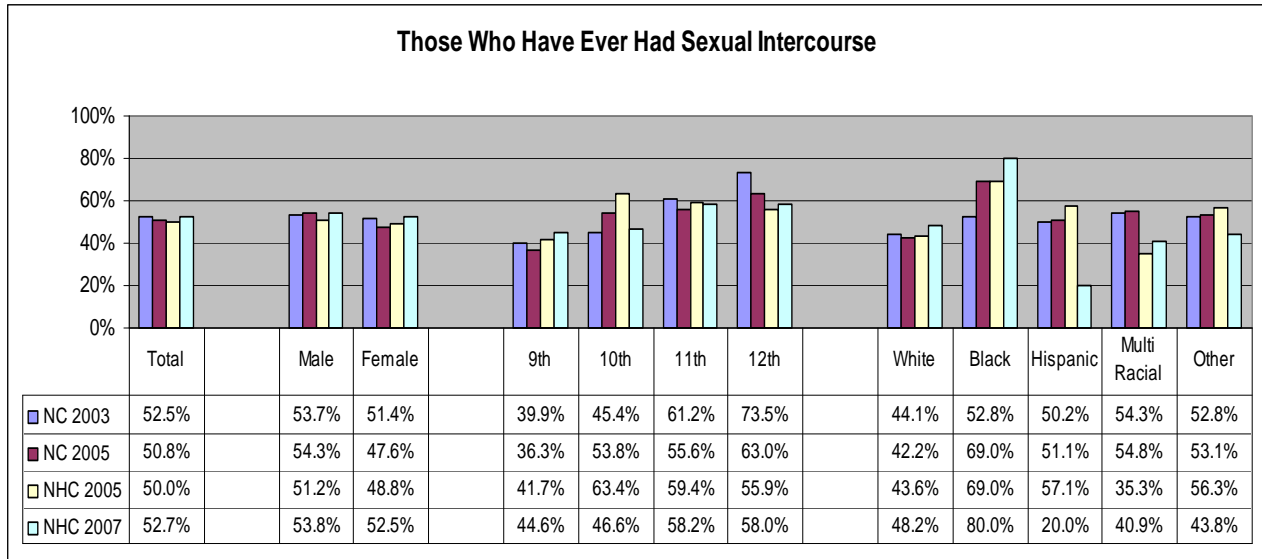
Over 61% of 12th graders and over 32% of 9th graders have consumed at least one drink of alcohol in the past 30 days.



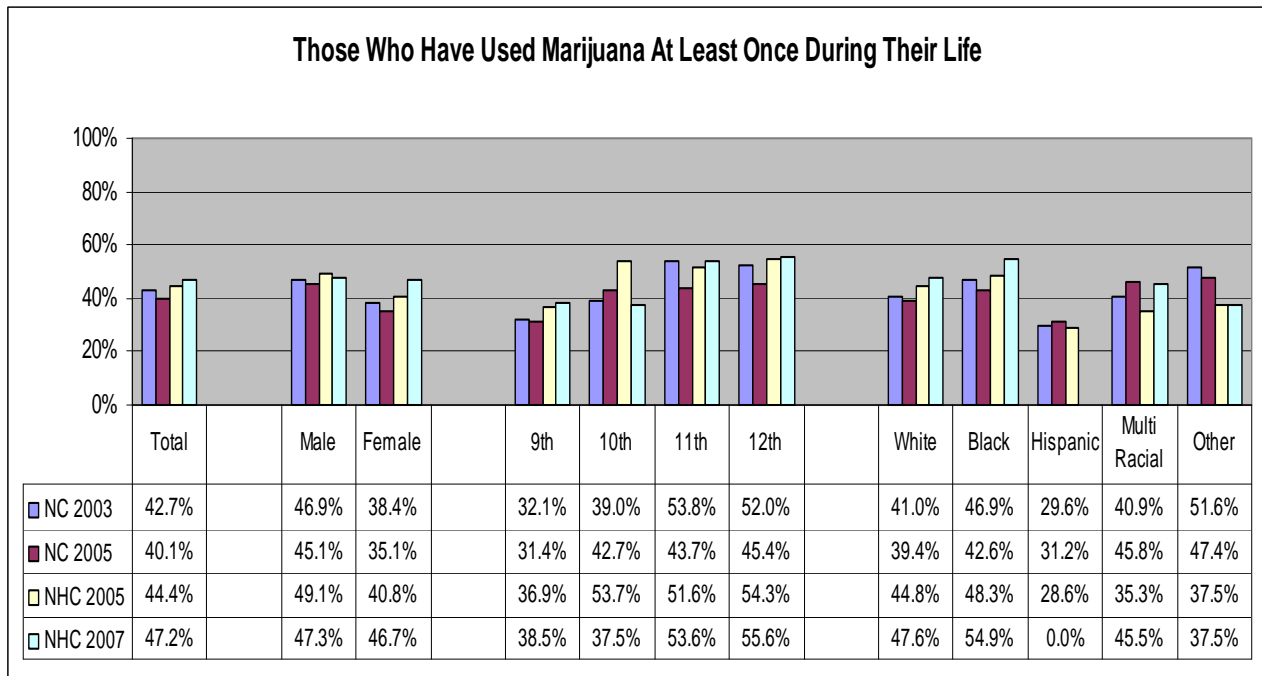
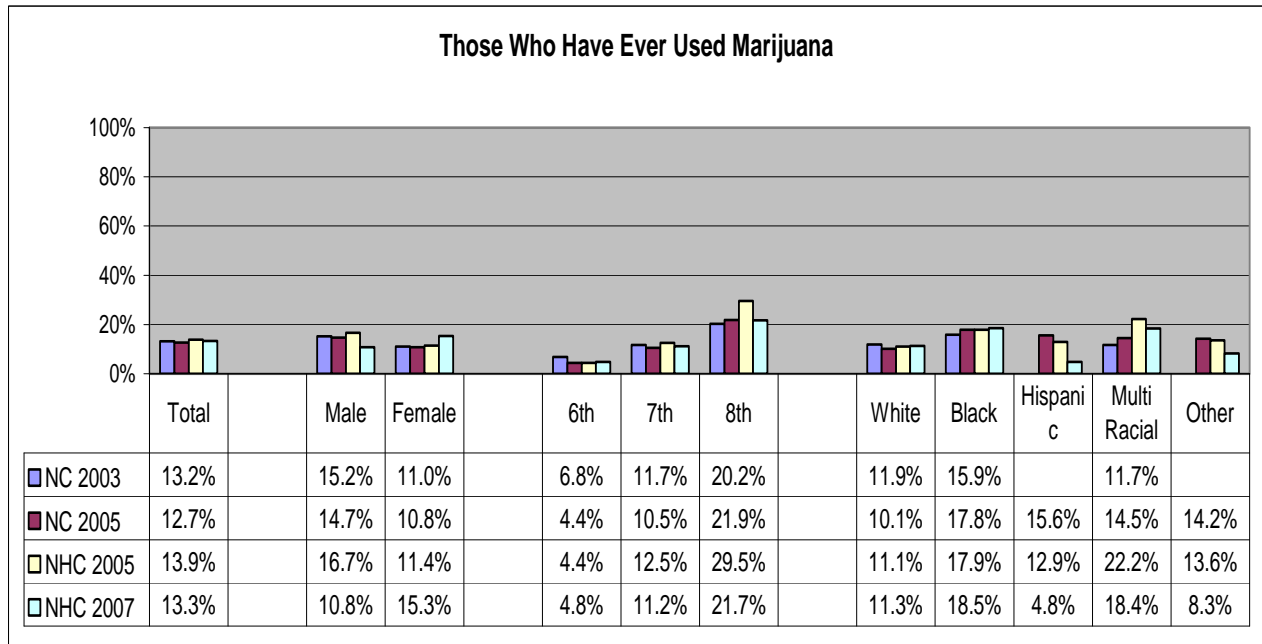
Over 16% of 8th graders have had sexual intercourse with more than one person and 76% have used a condom the last time they had sexual intercourse.



Over 58% of 12th graders have ever had sex, 64% have used a condom the last time they had sex, but over 45% have had sex with more than one person in the past three months.

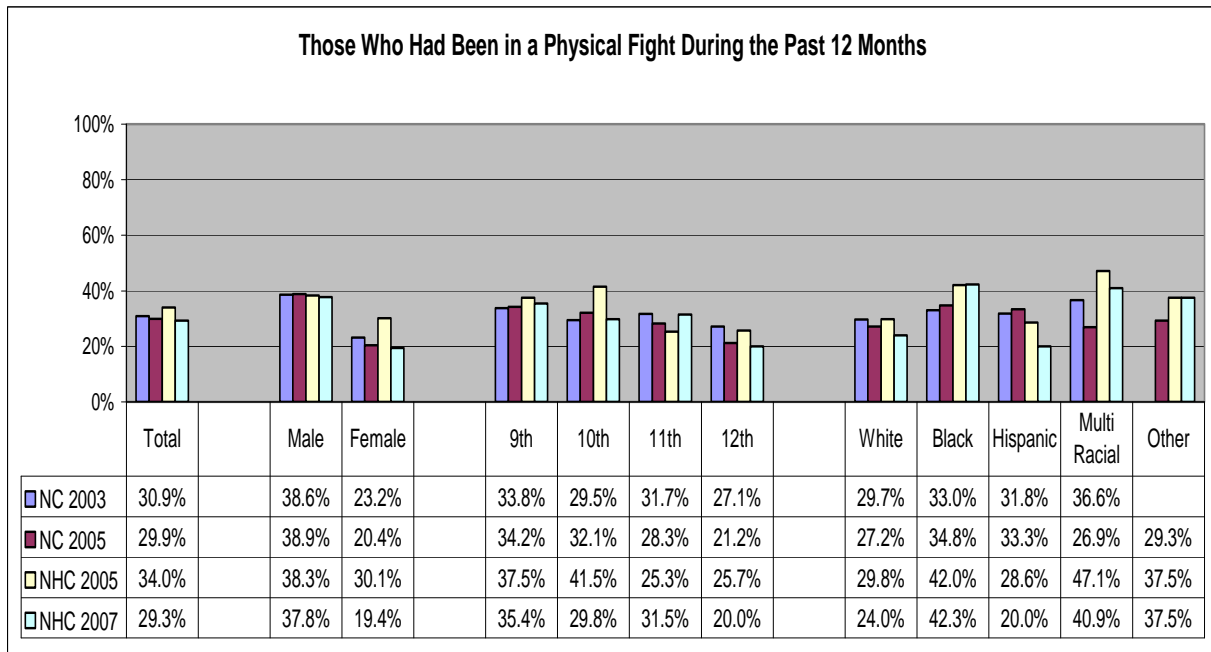
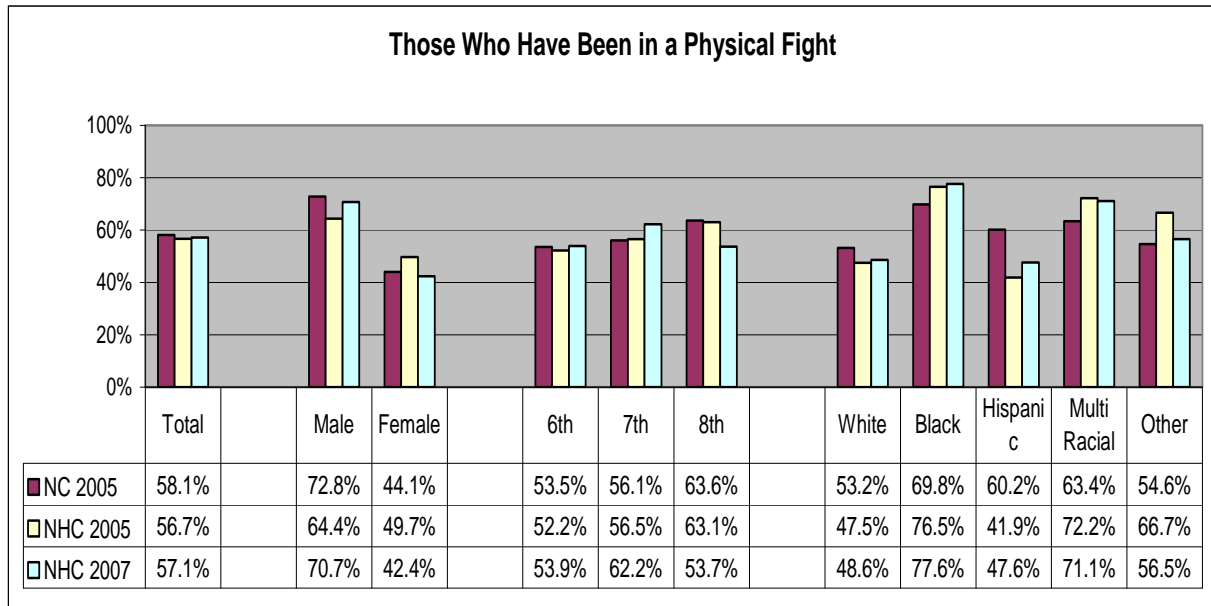


Other drug use has become prevalent in New Hanover County's youth. Over 21% of 8th and 56% of 12th graders have used marijuana.



Violent Behavior

Over 53 % of 8th graders have been in a physical fight, while in 12th grade, there was 20% of those who responded have been in a physical fight during the past 12 months.



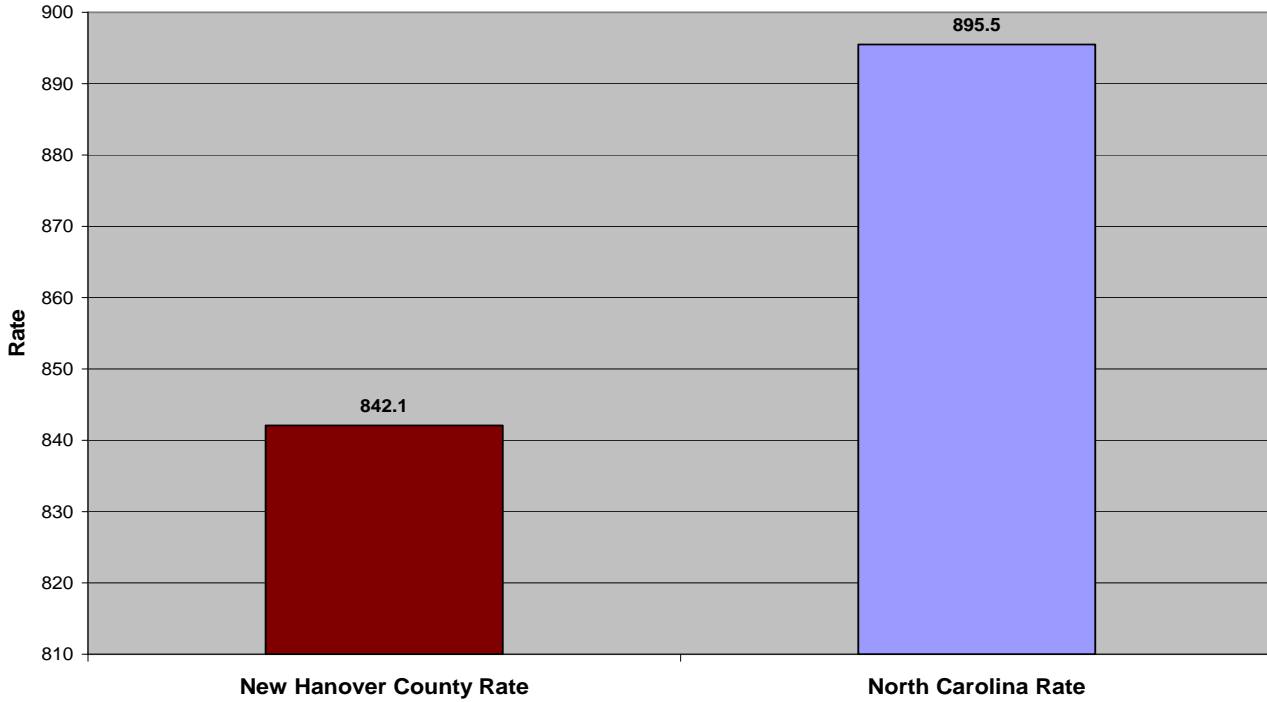
Age-Adjusted Death Rates by Race and Sex for Selected Causes, 2001-2005

The table and graph below illustrate an overview of the diseases that affect the population of New Hanover County. The age-adjusted death rates are used to eliminate the age differences. Older populations have higher death rates, because death rates increase with age. This age adjusting is done to provide a more meaningful comparison of the risk of mortality over time and among groups.

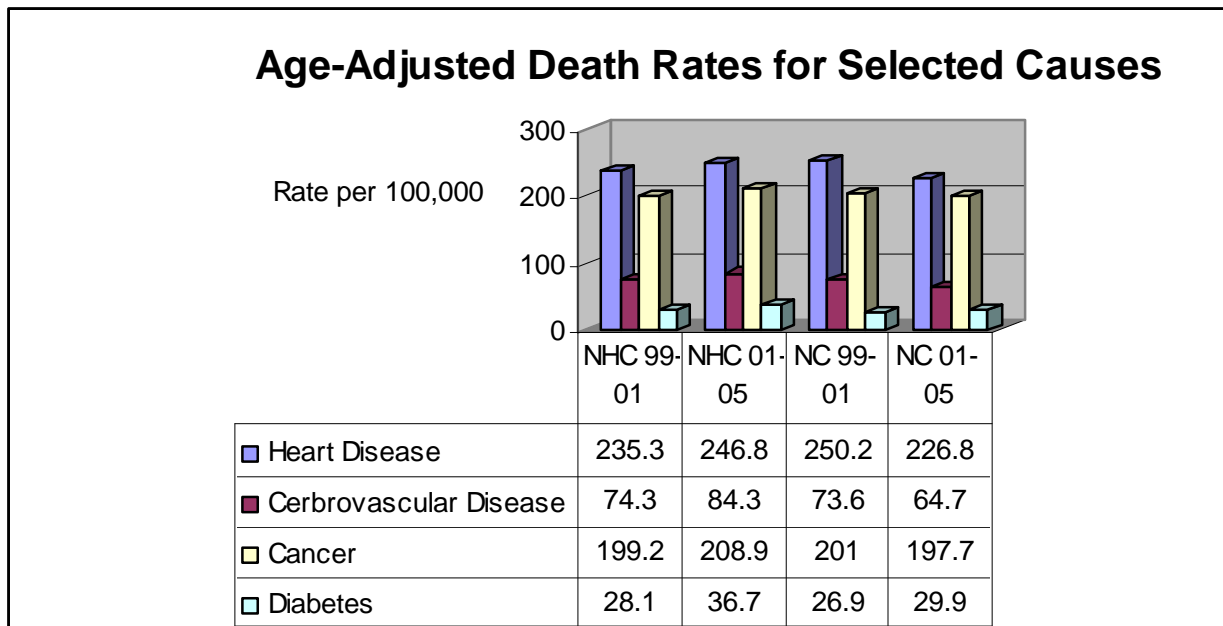
Age-Adjusted Death Rates By Race and Sex for Selected Causes, 2001-2005

	NHC	NC	NHC	NC	NHC	NC	NHC	NC	NHC	NC
	White	Minorities	Males	Females	Total					
The Highlighted Areas shows New Hanover County total age-adjusted death rate by race and sex exceeds the State Rate.										
Leading Causes of Death										
Diseases of Heart	216.1	218.5	264.5	259.4	279.7	285.5	182.0	183.0	223.1	226.8
----Acute Myocardial Infarction	36.1	53.8	50.8	59.0	47.5	71.6	31.2	42.4	38.3	54.8
----Other Ischemic Heart Disease	118.4	98.1	122.3	105.9	151.0	134.8	93.8	74.1	118.6	99.7
Cerebrovascular Disease	55.5	59.8	90.3	85.2	65.9	65.8	56.7	63.0	60.8	64.7
Cancer	188.3	191.2	238.3	223.6	235.7	252.6	171.3	162.0	195.9	197.7
----Colon, Rectum, and Anus	13.7	17.4	30.5	23.6	18.7	22.3	14.9	16.0	16.2	18.6
----Pancreas	9.4	10.3	15.9	13.5	10.8	12.8	9.6	9.3	10.3	10.9
----Trachea, Bronchus, and Lung	63.1	60.4	52.4	57.0	80.5	85.6	48.3	41.7	61.7	59.9
----Female Breast	27.0	24.0	56.6	32.6	0.7	0.4	31.4	25.7	31.8	26.0
----Prostate	19.3	23.7	49.8	62.7	22.6	29.9	0.0	0.0	22.6	29.9
Diabetes Mellitus	16.8	21.8	66.5	53.8	28.7	30.4	20.0	25.3	23.9	27.6
Pneumonia and Influenza	19.7	23.5	20.1	22.0	20.7	28.0	19.1	20.5	19.7	23.3
Chronic Lower Respiratory Diseases	43.8	50.3	12.7	30.0	43.2	61.0	37.1	38.6	39.4	46.9
Chronic Liver Disease and Cirrhosis	7.5	8.8	11.2	8.7	11.9	12.6	4.8	5.6	8.1	8.8
Septicemia	8.4	12.7	20.4	22.1	10.0	15.7	10.3	13.6	10.1	14.5
Nephritis, Nephrotic Syndrome, and Nephrosis	13.6	14.3	39.9	33.7	17.7	21.0	17.1	15.9	17.4	17.9
Unintentional Motor Vehicle Injuries	10.0	19.3	14.8	19.5	15.4	27.4	7.2	11.8	11.1	19.3
All Other Unintentional Injuries	25.7	27.3	26.4	20.9	35.1	34.7	17.7	18.3	25.7	26.0
Suicide	13.0	13.4	5.1	5.5	18.9	19.3	5.3	4.8	11.7	11.6
Homicide	2.4	4.5	20.1	14.9	8.7	11.0	2.3	3.3	5.5	7.2
Alzheimer's disease	10.0	28.5	14.3	20.7	11.7	21.6	10.1	29.6	10.7	27.1
Acquired Immune Deficiency Syndrome	1.6	1.4	19.5	17.4	5.4	7.4	4.0	3.1	4.6	5.2
All Causes	796.7	855.2	1090.3	1047.0	993.8	1082.3	730.1	754.9	842.1	895.5

**Age-Adjusted Death Rates for Total Deaths
All Causes in New Hanover County, 2001-2005**

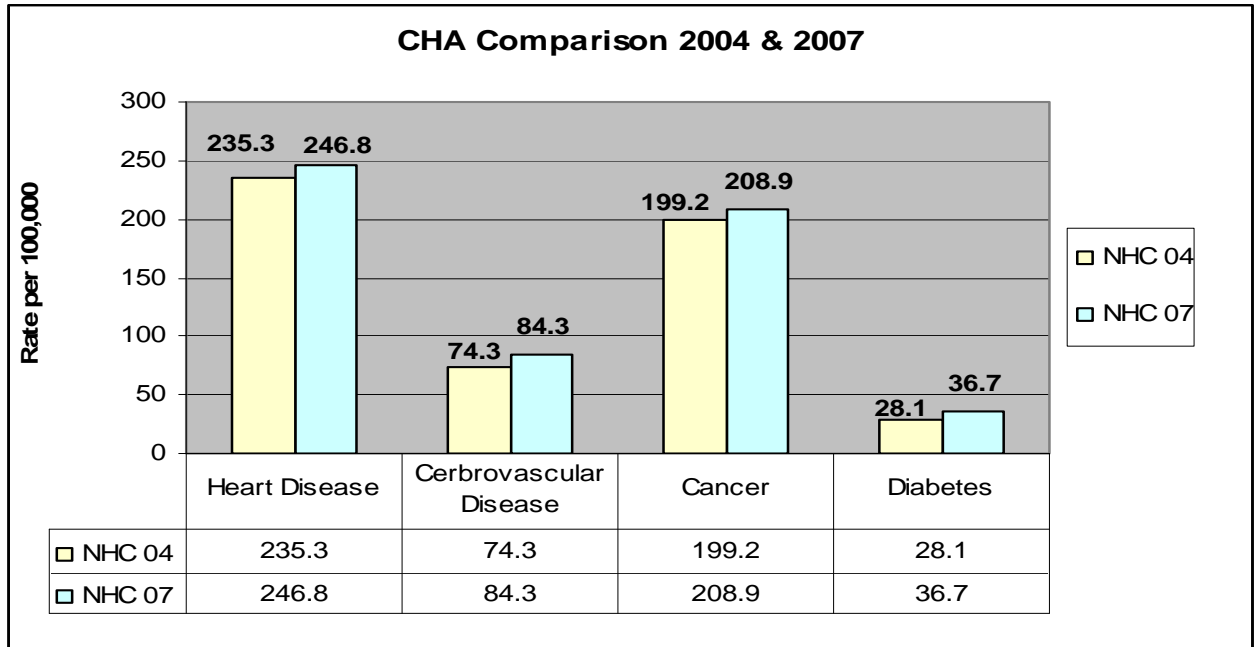


There were 7,232 deaths of all causes in New Hanover County, with an age-adjusted death rate of 842.1 compared lower than North Carolina's rate of 895.5. the leading causes of death in New Hanover County were disease of the heart, cancer, other ischemic heart disease, trachea, bronchus and lung cancer, and cerebrovascular disease.



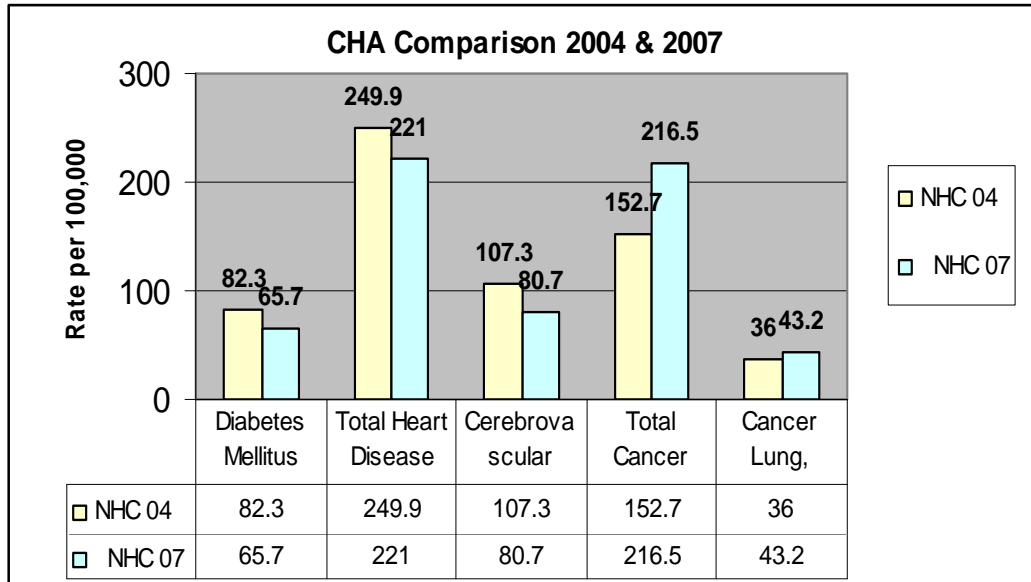
New Hanover County Health Assessment Comparisons

These charts illustrate the comparison of the data in the 2004 Community Health Assessment, which was from 1999-2001 and the data in the 2007 Community Health Assessment which is 2001-2005.

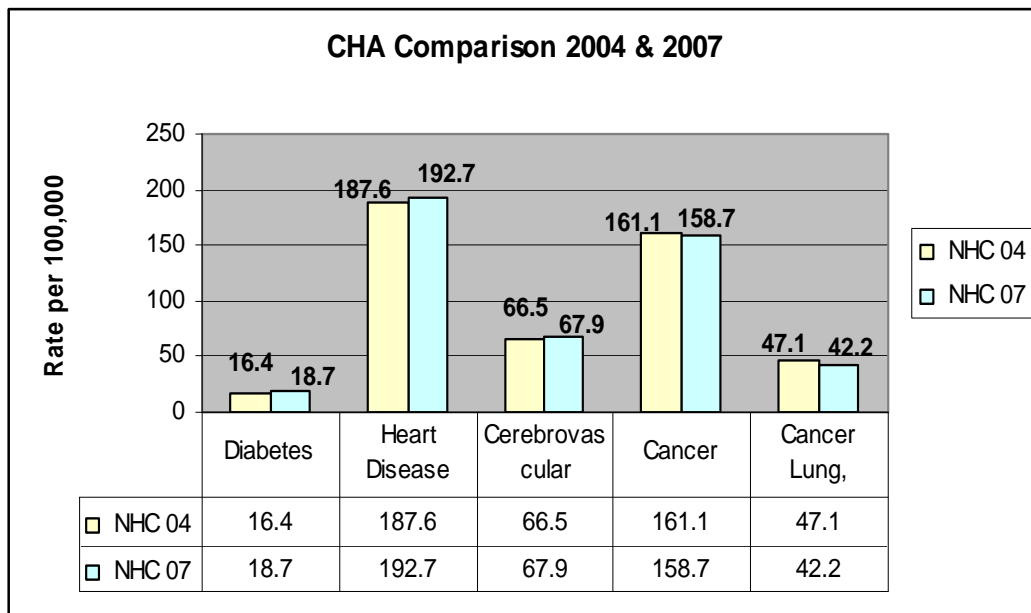


These comparisons are among the various groups in New Hanover County: minority females, white females, minority males and white males.

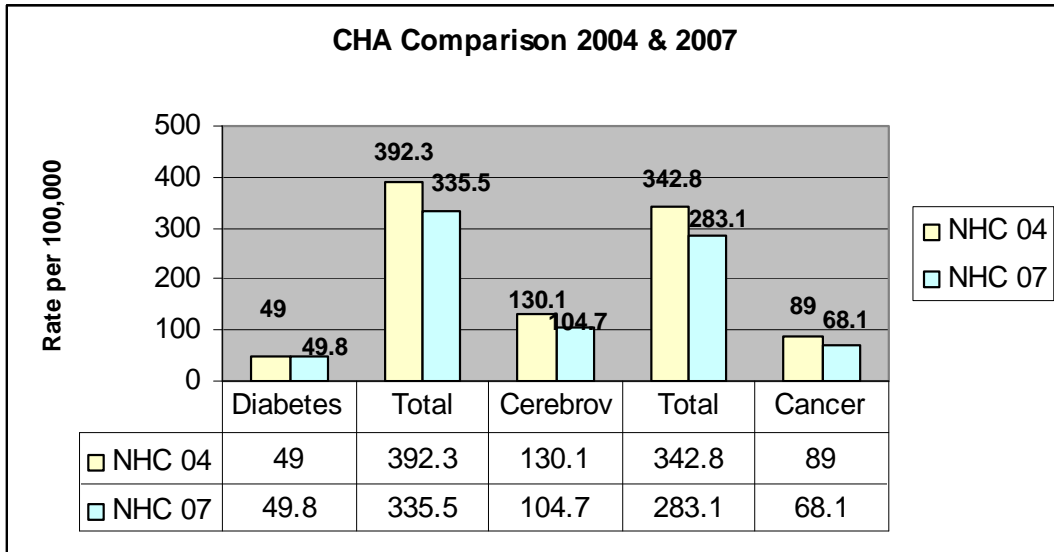
Minority Females



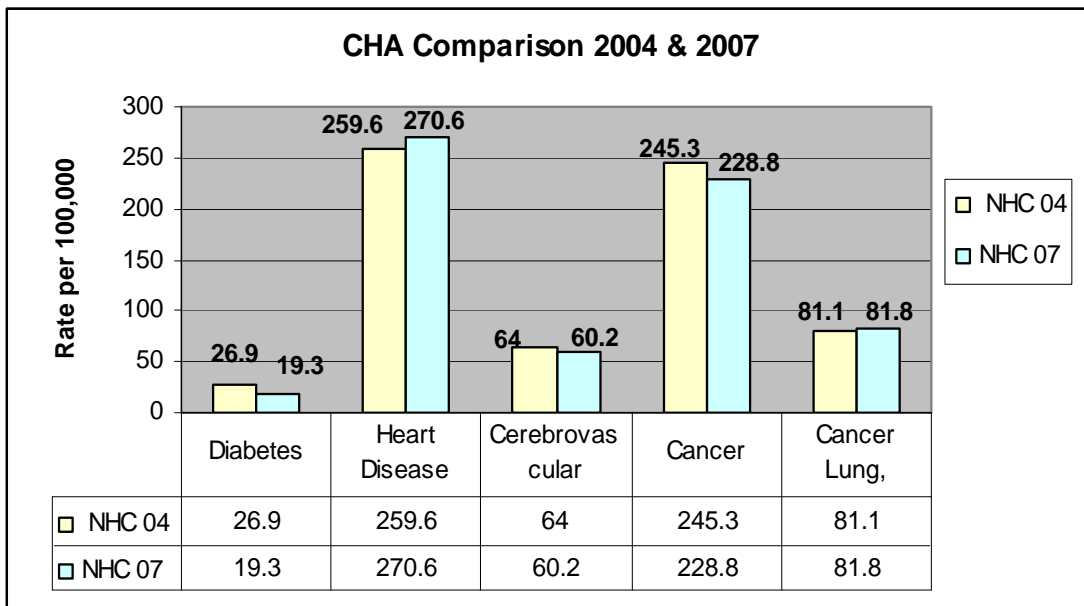
White Females



Minority Males



White Males



2001-2005 Race-Sex-Specific Age-Adjusted Death Rates for New Hanover County

New Hanover County	White Male		Minority Male	
	New Hanover	State Rate	New Hanover	State Rate
<i>Diseases of Heart</i>	270.6	276.5	335.5	323.7
----Acute Myocardial Infarction	45.1	71.2	63.2	73
----Other Ischemic Heart Disease	151.8	133.4	145.1	139.9
Cerebrovascular	60.2	60.2	104.7	92
Cancer	228.8	240.6	283.1	309.6
----Colon, Rectum, and Anus	15.7	21	40.3	28.4
----Pancreas	10.2	12.3	14.3	15.3
----Trachea, Bronchus, and Lung	81.8	83.6	68.1	94.1
----Female Breast	0.5	0.4	2.2	0.5
----Prostate	19.3	23.7	49.8	62.7
Diabetes Mellitus	23.8	25.3	65.6	55.3
Pneumonia and Influenza	19.3	27.6	29	29.5
Chronic Lower Respiratory Diseases	47.1	62.7	13.7	51.4
Chronic Liver Disease and Cirrhosis	10.9	12.4	17.3	13.3
Septicemia	8	13.5	25.5	26.3
Nephritis, Nephrotic Syndrome, and Nephrosis	14.7	17.5	28.9	38
Unintentional Motor Vehicle Injuries	13.4	26.7	23.5	30.1
All Other Unintentional Injuries	34.8	35.8	37.8	30.5

New Hanover County	White Female		Minority Female	
	New Hanover	State Rate	New Hanover	State Rate
<i>Diseases of Heart</i>	175	174.4	221	215
----Acute Myocardial Infarction	28.3	40.6	47.6	49.7
----Other Ischemic Heart Disease	92.6	71.9	103.1	82.5
Cerebrovascular	51.8	58.6	80.7	79.8
Cancer	162.3	158.3	216.5	174.1
----Colon, Rectum, and Anus	12.4	14.7	27.3	20.8
----Pancreas	8.5	8.7	15.6	11.9
----Trachea, Bronchus, and Lung	49.3	43.6	43.2	33.3
----Female Breast	26.8	23.7	55.2	32.3
----Prostate	0	0	0	0
Diabetes Mellitus	11.3	19	65.7	51.9
Pneumonia and Influenza	19.9	21	15.6	17.9
Chronic Lower Respiratory Diseases	41.6	43	13.3	18.5
Chronic Liver Disease and Cirrhosis	4.5	5.6	6.1	5.1
Septicemia	8.8	12.1	18.4	19.8
Nephritis, Nephrotic Syndrome, and Nephrosis	12.6	12.2	40.9	31.3
Unintentional Motor Vehicle Injuries	7.2	12.1	7	10.8
All Other Unintentional Injuries	17.7	19.6	17.9	13.6

Source: NC State Health Statistics

Mortality Rates

There are some differences in the mortality rates between the races and the genders of New Hanover County residents.

Minority Males

The leading causes of death:

1. Heart Disease
2. Cancer
3. Other Ischemic Heart Disease
4. Cerebrovascular Disease
5. Trachea, Bronchus, and Lung Cancer

White Males

The leading causes of death:

1. Heart diseases
2. Cancer
3. Other ischemic heart disease
4. Trachea, Bronchus, and Lung Cancer
5. Cerebrovascular Disease

Minority Females

The leading causes of death:

1. Heart disease
2. Cancer
3. Other Ischemic Heart Disease
4. Cerebrovascular Disease
5. Diabetes

White Females

The leading causes of death:

1. Heart disease
2. Cancer
3. Other Ischemic Heart Disease
4. Cerebrovascular Disease
5. Chronic Lower Respiratory Disease

All groups consistently ranked the top three causes of death: heart disease, cancer and other ischemic heart disease. Minorities and white females had cerebrovascular disease as their fourth leading causes of death, while white males' fourth leading cause of death was trachea, bronchus and lung cancer. Trachea, bronchus and lung cancer ranked as the minority males fifth leading causes of death. White females' fifth leading cause of death was chronic lower respiratory disease and minority females were diabetes.

Leading Causes of Death listed for New Hanover
From: 2001-2005 Race- Sex Specific Age-Adjusted Rates

<i>Leading Causes</i>	<i>New Hanover Rate</i>	<i>State Rate</i>	<i>County Rate Exceeds the State Rate By</i>
Diseases of Heart	246.8	226.8	-9%
----Acute Myocardial Infarction	58.0	54.8	6%
----Other Ischemic Heart Disease	110.3	99.7	11%
Cerebrovascular Disease	84.3	64.7	30%
Cancer	208.9	197.7	6%
----Colon, Rectum, and Anus	21.6	18.6	16%
----Pancreas	10.0	10.9	-8%
----Trachea, Bronchus, and Lung	57.7	59.9	-4%
----Female Breast	28.4	26.0	9%
----Prostate	36.7	29.9	23%
Diabetes Mellitus	31.4	27.6	14%
Pneumonia and Influenza	29.9	23.3	28%
Chronic Lower Respiratory Diseases	57.4	46.9	22%
Chronic Liver Disease and Cirrhosis	11.1	8.8	26%
Septicemia	17.7	14.5	22%
Nephritis, Nephrotic Syndrome, and Nephrosis	21.5	17.9	20%
Unintentional Motor Vehicle Injuries	25.5	19.3	32%
All Other Unintentional Injuries	21.6	26.0	-17%
Suicide	10.0	11.6	-14%
Homicide	9.4	7.2	31%
Alzheimer's disease	23.8	27.1	-12%
Acquired Immune Deficiency Syndrome	6.5	5.2	25%
All Causes	1010.5	895.5	13%

Source: NC State Health Statistics

Comparison of 2004 and 2007 Leading Causes of Death for New Hanover County

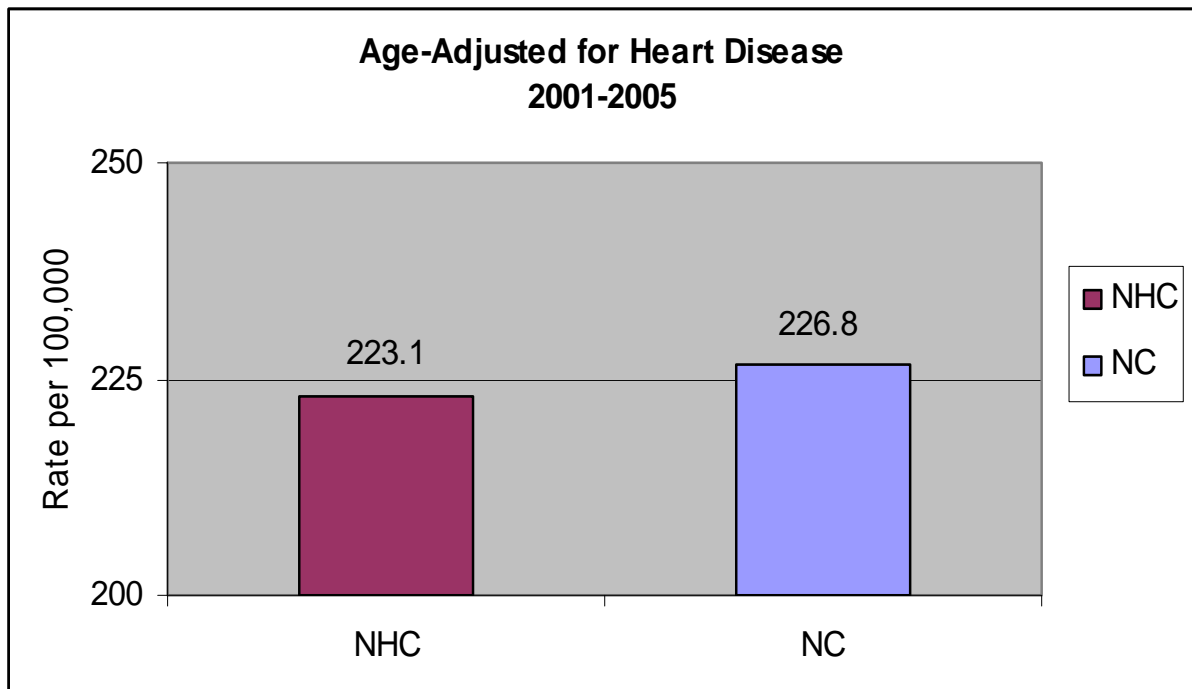
Leading Causes	2004 Rate	NHC Rate	2004 Rate	NC Rate	NHC Exceeds NC 2004	NHC Exceeds NC 2007
Diseases of Heart	235.3	246.8	250.2	226.8	-6%	-9%
----Acute Myocardial Infarction	37.3	58.0	66.5	54.8	-44%	6%
----Other Ischemic Heart Disease	124.5	110.3	111.7	99.7	11%	11%
Cerebrovascular Disease	74.3	84.3	73.6	64.7	1%	30%
Cancer	199.2	208.9	201.0	197.7	-1%	6%
----Colon, Rectum, and Anus	14.7	21.6	19.6	18.6	-25%	16%
----Pancreas	13.0	10.0	10.5	10.9	24%	-8%
----Trachea, Bronchus, and Lung	60.6	57.7	60.5	59.9	0%	-4%
----Female Breast	26.4	28.4	25.3	26.0	4%	9%
----Prostate	30.8	36.7	33.9	29.9	-9%	23%
Diabetes Mellitus	28.1	31.4	26.9	27.6	4%	14%
Pneumonia and Influenza	21.9	29.9	24.9	23.3	-12%	28%
Chronic Lower Respiratory Diseases	40.0	57.4	46.5	46.9	-14%	22%
Chronic Liver Disease and Cirrhosis	7.8	11.1	9.2	8.8	-15%	26%
Septicemia	9.1	17.7	13.6	14.5	-33%	22%
Nephritis, Nephrotic Syndrome, and Nephrosis	16.7	21.5	16.4	17.9	2%	20%
Unintentional Motor Vehicle Injuries	10.0	25.5	19.6	19.3	-49%	32%
All Other Unintentional Injuries	20.1	21.6	22.5	26.0	-11%	-17%
Suicide	11.9	10.0	11.6	11.6	3%	-14%
Homicide	8.6	9.4	7.7	7.2	12%	31%
Alzheimer's disease		23.8		27.1		-12%
Acquired Immune Deficiency Syndrome	HIV 3.5	6.5	5.7	5.2	HIV-39%	25%
All Causes	858.2	1010.5	912.7	895.5	-6%	13%

Source: 2004 NHC Community Assessment

Numbers of Leading Causes of Deaths in New Hanover County

NEW HANOVER Leading Causes	White Male		Minority Male		White Female		Minority Female		OVERALL	
	#	Rate	#	Rate	#	Rate	#	Rate	#	Rate
Diseases of Heart	772	270.6	156	335.5	775	175	189	221	1,892	223.1
----Acute Myocardial Infarction	138	45.1	26	63.2	125	28.3	40	47.6	329	38.3
----Other Ischemic Heart Disease	433	151.8	69	145.1	412	92.6	89	103.1	1,003	118.6
Cerebrovascular Disease	163	60.2	47	104.7	229	51.8	71	80.7	510	60.8
Cancer	731	228.8	136	283.1	694	162.3	176	216.5	1,737	195.9
----Colon, Rectum, and Anus	49	15.7	17	40.3	53	12.4	23	27.3	142	16.2
----Pancreas	35	10.2	8	14.3	37	8.5	12	15.6	92	10.3
----Trachea, Bronchus, and Lung	272	81.8	35	68.1	211	49.3	34	43.2	552	61.7
----Female Breast	1	0.5	1	2.2	113	26.8	45	55.2	160	31.8
----Prostate	53	19.3	21	49.8	0	0	0	0	74	22.6
Diabetes Mellitus	75	23.8	31	65.6	50	11.3	54	65.7	210	23.9
Pneumonia and Influenza	49	19.3	13	29	87	19.9	14	15.6	163	19.7
Chronic Lower Respiratory Diseases	141	47.1	6	13.7	181	41.6	11	13.3	339	39.4
Chronic Liver Disease and Cirrhosis	40	10.9	11	17.3	18	4.5	5	6.1	74	8.1
Septicemia	22	8	11	25.5	38	8.8	15	18.4	86	10.1
Nephritis, Nephrotic Syndrome, and Nephrosis	42	14.7	17	38.9	55	12.6	34	40.9	148	17.4
Unintentional Motor Vehicle Injuries	47	13.4	18	23.5	27	7.2	6	7	98	11.1
All Other Unintentional Injuries	116	34.8	24	37.8	69	17.7	15	17.9	224	25.7
Suicide	73	20.4	7	9.5	24	6.2	1	1.2	105	11.7
Homicide	13	3.6	26	35.4	5	1.3	6	6.8	50	5.5
Alzheimer's disease	27	10.4	7	20.3	43	9.7	11	12.3	88	10.7
Acquired Immune Deficiency Syndrome	9	2.6	14	21.3	2	0.6	15	18.5	40	4.6
All Causes	2,822	945.4	640	1297	2,960	683.7	810	961.4	7,232	842.1

HEART DISEASE



Heart disease is any disorder that affects the heart's ability to function normally. There were 1,892 deaths due to diseases of the heart in New Hanover County and New Hanover County ranks lower than the state, 233.1 compared to 226.8 per 100,000. The age-adjusted death rates for males are significantly higher than for females; respectively 279.7 compared to 182.0 They are specifically higher for minorities. Minority males had a greater death rate than white males (335.5 versus 270.6. per 100,000). Minority females' rate was 221 was higher than the white females of 175 per 100,000.

Although New Hanover County is below the state average, heart disease is a serious health topic that concerns many residents. According to the New Hanover County Health Survey, over 55% of respondents listed heart disease as the cause of most deaths in the community.

Ischemic heart disease, which can ultimately lead to a heart attack, is the term given to heart problems caused by narrowed heart arteries. When arteries are narrowed by cholesterol deposits, less blood and oxygen reach the heart muscle.

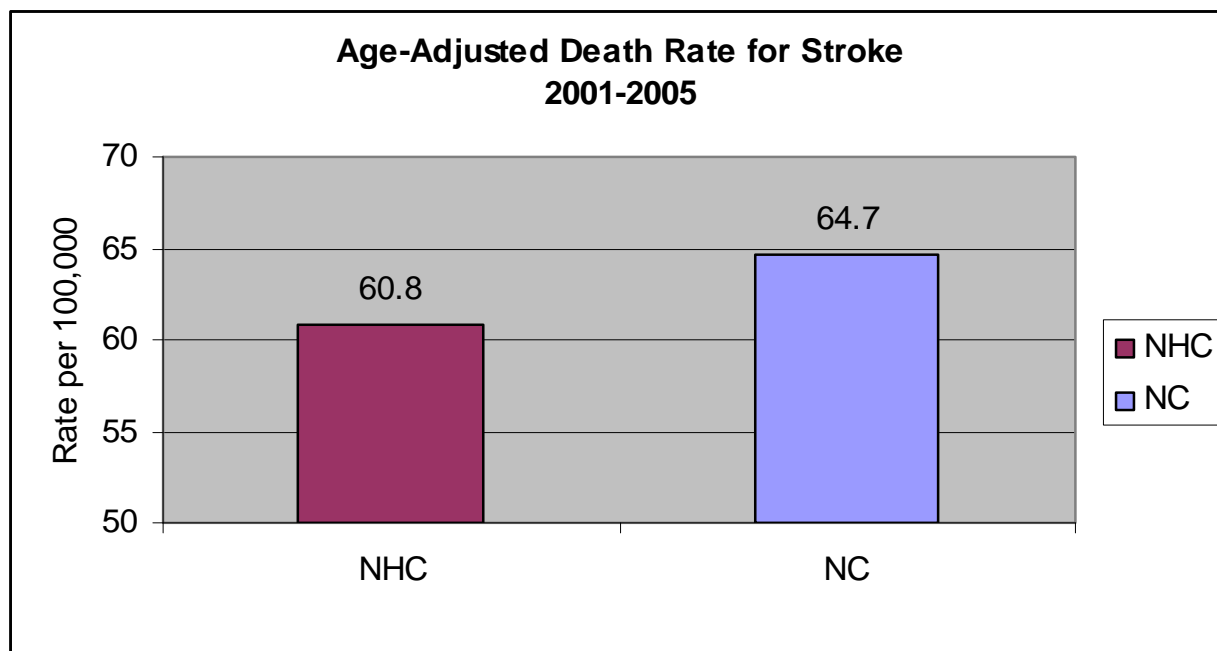
Ischemic heart disease accounted for 1,003 deaths in New Hanover County. New Hanover County is above the state average (118.6 versus 99.7 per 100,000). White males had the highest death rate of all groups in New Hanover County (151.8 following is minority males with 145.1 per 100,000.) Minority females were affected the most following the males with a rate of 103.1 compared to white females of 92.6 per 100,000.)

Intervention Strategies

Eat Smart Move More

Winner's Circle Healthy Dining Program

CEREBROVASCULAR DISEASE



Cerebrovascular disease, stroke is a type of cardiovascular disease. It affects the arteries leading to and within the brain. A stroke occurs when a blood vessel that carries oxygen and nutrients to the brain is either blocked by a clot or bursts. When that happens, part of the brain cannot get the blood (and oxygen) it needs, so it starts to die.

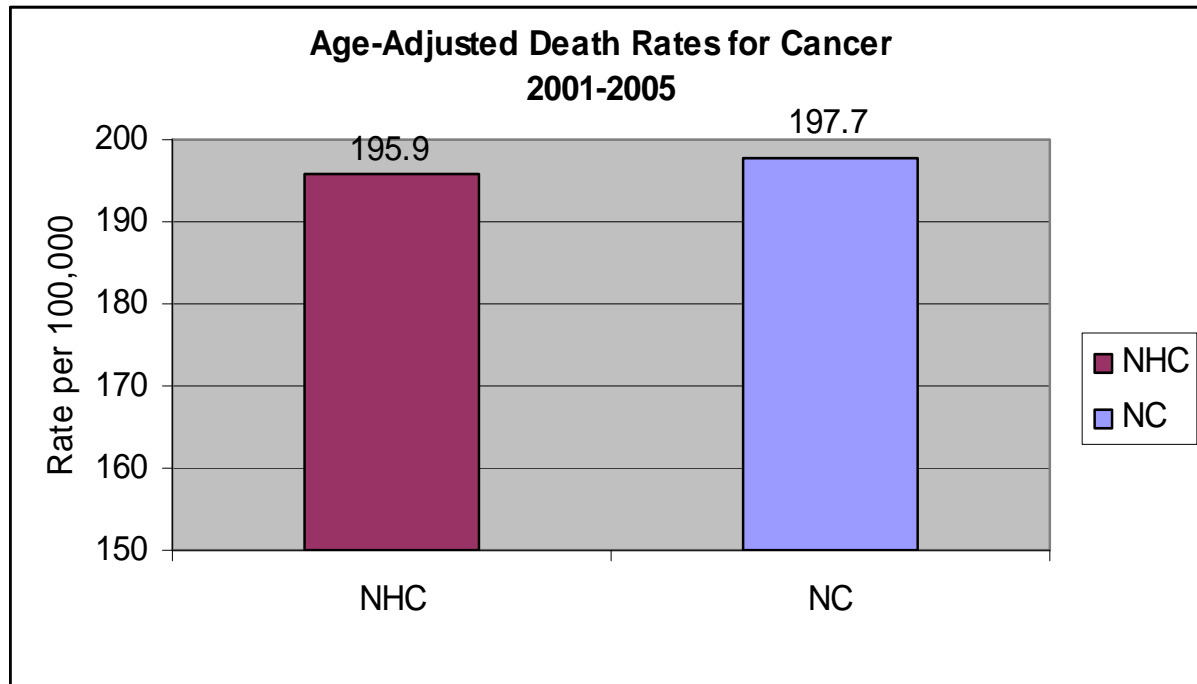
New Hanover County's age-adjusted rate is slightly below the average death rate for North Carolina (60.8 versus 64.7 per 100,000). Cerebrovascular disease age-adjusted death rates are marginally higher for minority males than white males (104.7 compared to 60.2 per 100,000). Minority females rank right behind minority males with a death rate of 80.7 per 100,000, with white females' being least affected of the groups with an age-adjusted rate of 51.8 per 100,000.

Intervention Strategies

Eat Smart Move More

Winner's Circle Healthy Dining Program

Cancer Rates



Cancer is the second leading cause of death in North Carolina and in the United States. In 2005, 16,673 persons in North Carolina died from cancer, 344 in New Hanover County. It is estimated that nearly four in ten North Carolinians will develop cancer during their lives.

New Hanover County had 1,737 deaths contributing to cancer. Although cancer death rates for New Hanover County are lower than the state average rate (195.9 versus 197.7 per 100,000). Cancer, specifically trachea, bronchus and lung cancer are serious health issues for New Hanover County. Males have a higher rate of cancer than females (235.7 compared to 171.3) and minority males have the highest death rate of all groups (283.1 per 100,000) Minority females' death rates are 1.3 greater than white females (216.5 versus 162.5 per 100,000). Over 21% of New Hanover County survey participants responded to cancer being the second health issue in this county.

2007 Projected Cancer Cases	New Hanover County	North Carolina
Lung/Bronchus	125	5,550
Colon/Rectum	100	4,425
Female Breast	135	6,155
Prostate	145	6,420
All Cancers	905	40,860

Prostate Cancer

The prostate is a gland found only in men. It is walnut-sized and is located in front of the rectum underneath the urinary bladder. Most prostate cancers grow slowly. During the period of 2001-2005, there were a total of 74 cases of prostate cancer in New Hanover County. The age-adjusted death rates in New Hanover County were 22.6 compared to 29.9.5 per 100,000. Minority males were over 2 times greater than the rates in white males (49.8 versus 19.3 per 100,000).

Lung/Bronchus Cancer

Most lung cancers start in the lining of the bronchi. Lung cancer is a life-threatening disease because it often spreads before it is found. During the period of 2001-2005, there were with 552 cases of trachea, bronchus and lung cancer in New Hanover County. The trachea, bronchus and lung cancer age-adjusted rates were higher than the state average for New Hanover County (61.7 versus 59.9 per 100,000). White males had the highest death rate with 81.8 ranking below the state's rate of 83.6. Minority males were the second group most affected by trachea, bronchus and lung with a death rate of 68.1 which rates below the state rate of 94.1. While both groups of females rated above the state rate; the death rates for white females in New Hanover was 49.3 compared to the state's rate of 43.6 and the death rate of 43.2 death rate for minority females respectively higher than the state rate of 33.3 per 100,000.

Invention Strategies

Project ASSIST advocates for tobacco free policies
Tobacco education

Colon/Rectum Cancer

Colorectal cancer is a term used to refer to cancer that develops in the colon or the rectum. There were 142 deaths contributing to colon, rectum and anal cancer in New Hanover County. The age-adjusted death rate for colon, rectal and anal cancer was 20.20 per 100,000, which was higher than the state's rate of 19.6 per 100,000 population. White males have the highest age-adjusted death rates in this county. The death rate for white males is greater than the minority males (28.4 versus 25.2 per 100,000). White females also have a higher death rate than minority females (16.7 versus 1.1 per 100,000).

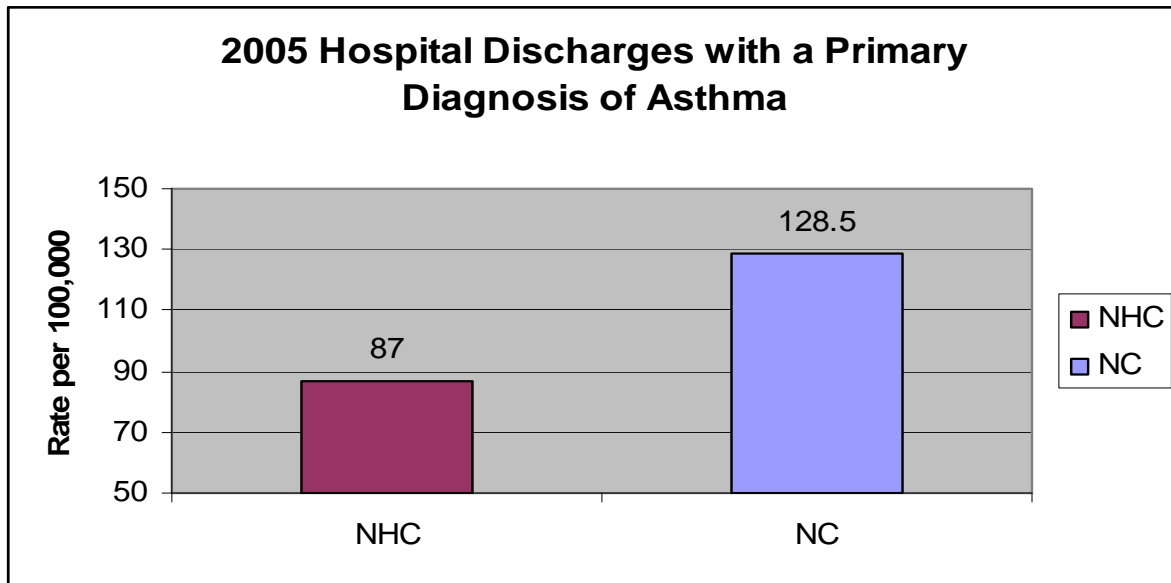
Female Breast Cancer

Breast cancer happens when cells in the breast begin to grow out of control and then invade nearby tissues or spread throughout the body. There were 160 Breast cancer deaths in New Hanover County. The minority females ranked significantly higher than the states average rate for female breast cancer (55.2 compared to 32.3) While white females are slightly above the state rate of 26.8 compared to the state rate of 23.7 per 100,000.

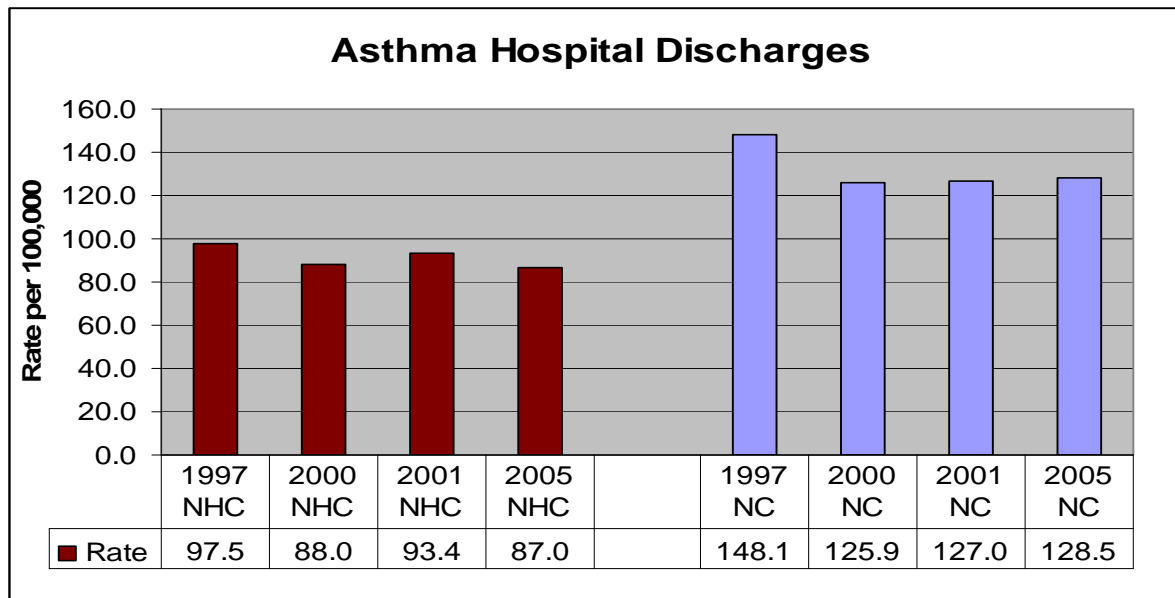
Intervention Strategies

Breast and Cervical Cancer Control Program
Educational sessions on self-breast examinations

Asthma



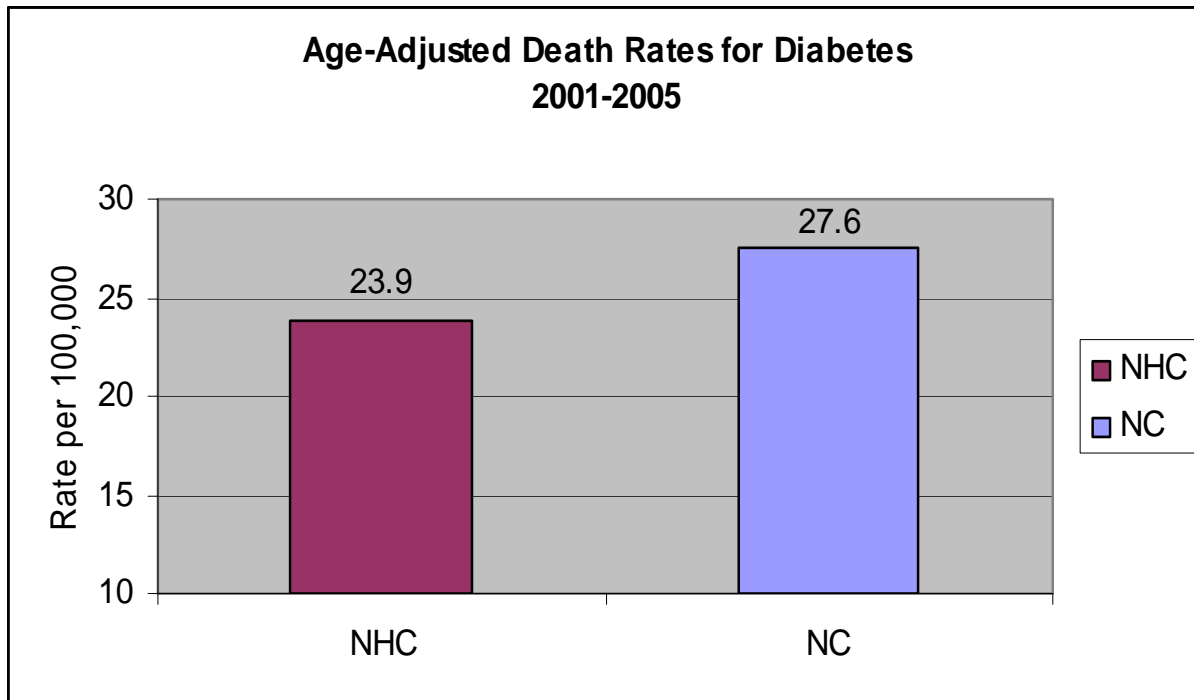
Asthma is a disease that affects your lungs. It is the most common long-term disease of children, but adults have asthma as well. New Hanover County's rate of 87 per 100,000 is below the state rate of 128.5 for hospital discharges with a primary diagnosis of asthma.



Intervention Strategies

Community agencies are striving towards keeping these rates low. Efforts in reducing these rates include county awareness on adopting smoke free policies to reduce exposure to secondhand smoke as well as education on better asthma management.

Diabetes



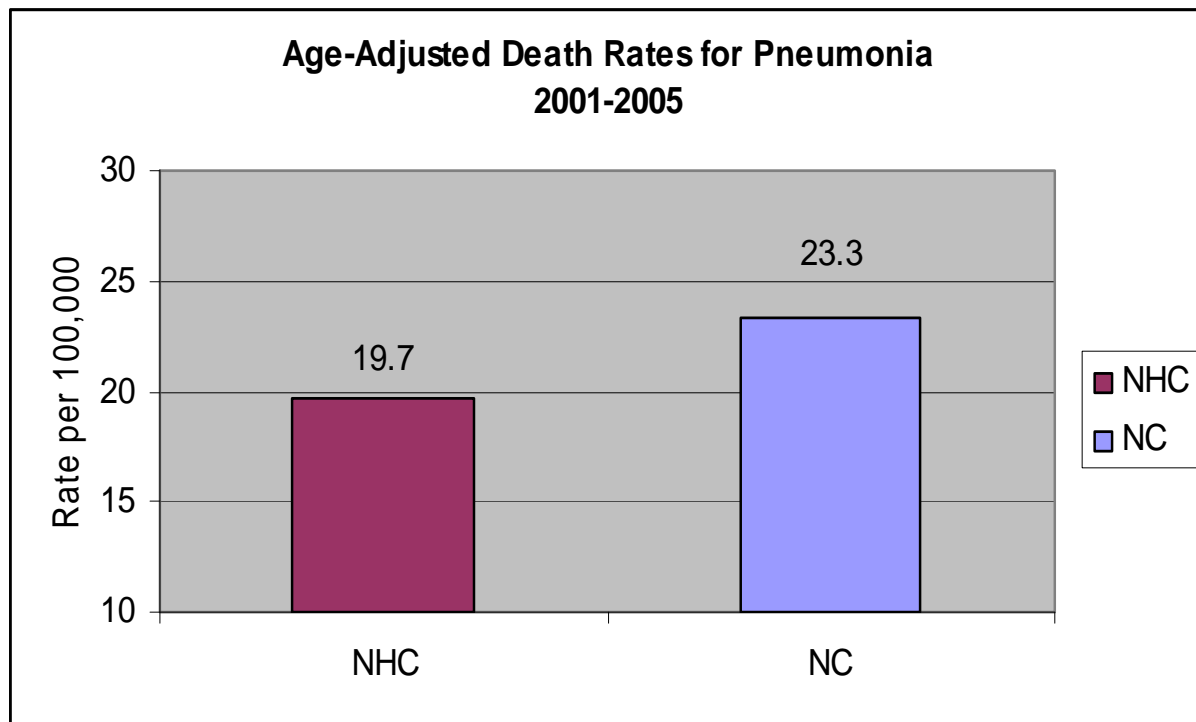
Diabetes, a disorder of metabolism, is a disease in which blood glucose levels are above normal. The pancreas, an organ that lies near the stomach, makes a hormone called insulin to help glucose get into the cells of our bodies. The body of a diabetic either does not make enough insulin or cannot use its own insulin efficiently.

There were 210 deaths in New Hanover County resulting from diabetes. The diabetes mellitus mortality rate in New Hanover County was lower than the rate for North Carolina (23.9 versus 27.6 per 100,000). Minorities have the highest death rate in New Hanover County for diabetes mellitus (66.5 per 100,000). Minority females have the highest death rate of 65.7 and then the minority males of 65.6 per 100,000. While white males rank next with a death rate of 23.8 and white females of 11.3 per 100,000.

Intervention Strategies

Eat Smart Move More
Diabetes Education Support Group
Wellness Programs

Pneumonia/Influenza



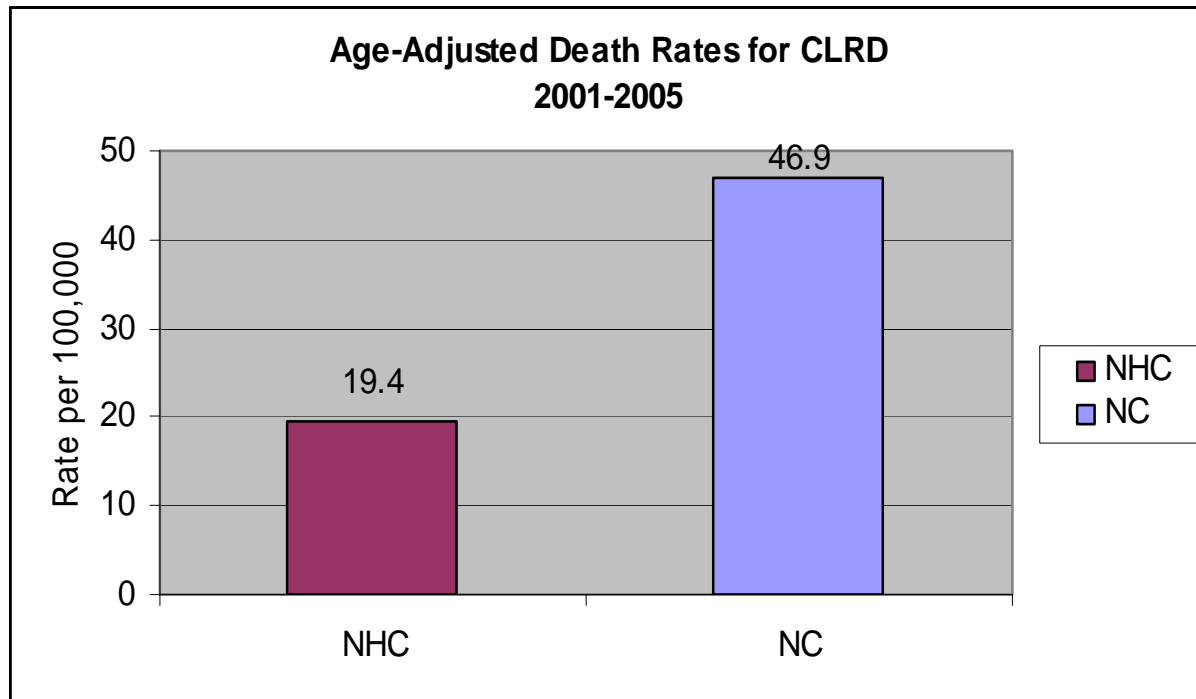
Pneumonia, an inflammation of the lungs, is a common illness that affects millions of people each year in the United States. The infection is caused by many different organisms including bacteria, viruses, and fungi. New Hanover County had 163 deaths from pneumonia from 2001-2005.

New Hanover County had a death rate lower than North Carolina's death rate (19.7 versus 23.3) for pneumonia/influenza. The highest death rates for pneumonia/influenza were from minority males with a death rate of 29, which was slightly lower than the state rate for minority males of 29.5. Next the white females rated 19.9 compared to the white female state rate of 21 per 100,000. White males followed the white females with a death rate of 19.3 rated below the state rate of 27.6. Minority females had the lowest death rate of 15.6 compared to the state's rate of 17.9 per 100,000.

Intervention Strategies

Increased availability and access to flu clinic

CHRONIC LOWER RESPIRATORY DISEASE (CLRD)



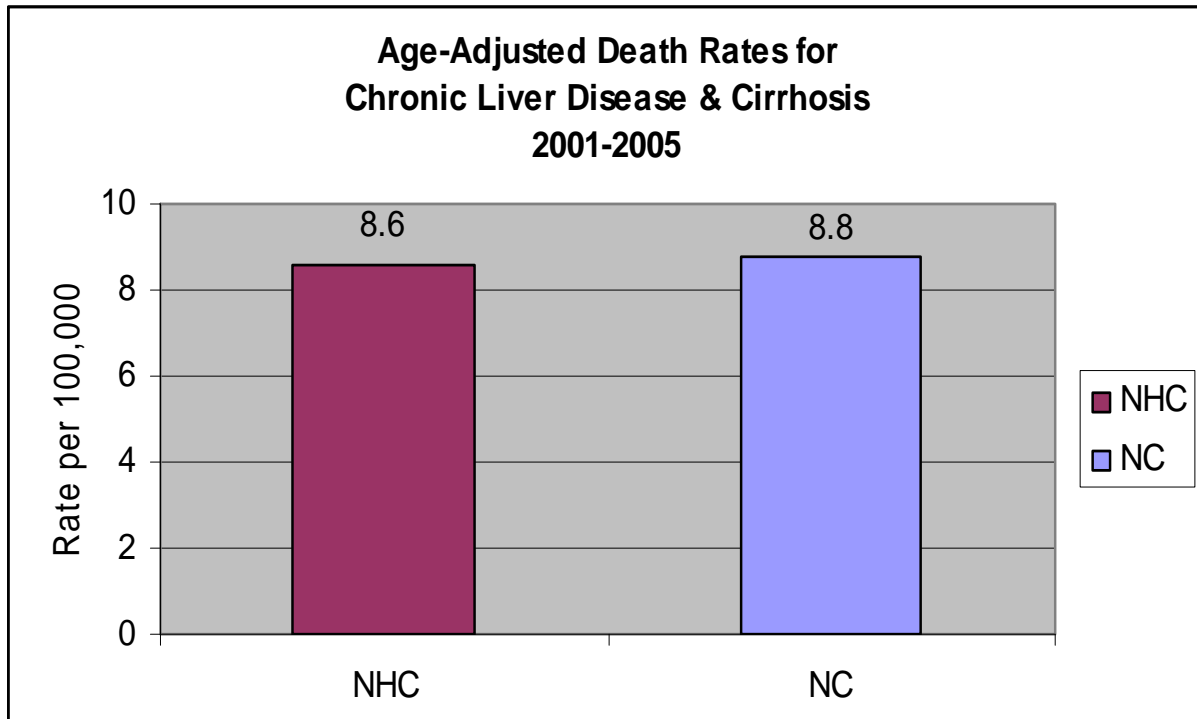
Chronic Lower Respiratory Disease, CLRD, used to be called Chronic Obstructive Pulmonary Disease, COPD before 1999. It refers to a group of diseases that cause airflow blockage and breathing-related problems. It includes emphysema, chronic bronchitis, and in some cases asthma.

New Hanover County had 339 deaths attributed to chronic lower respiratory disease. New Hanover County's age adjusted death rates was 19.1, which is significantly lower than the state's average of 46.9 per 100,000. The white group had the highest death rates; white males' death rates of 47.1 below the state rate of 62.7 and 41.6 for white females compared to 43 of the state white female rate. Next, the minority males had a death rate of 17.3 versus the state's 13.3. Minority females had the lowest rate of the groups which was 13.3 compared to 18.5 per 100,000.

Intervention Strategies

Project ASSIST provides education and policy changing towards a smoke free community

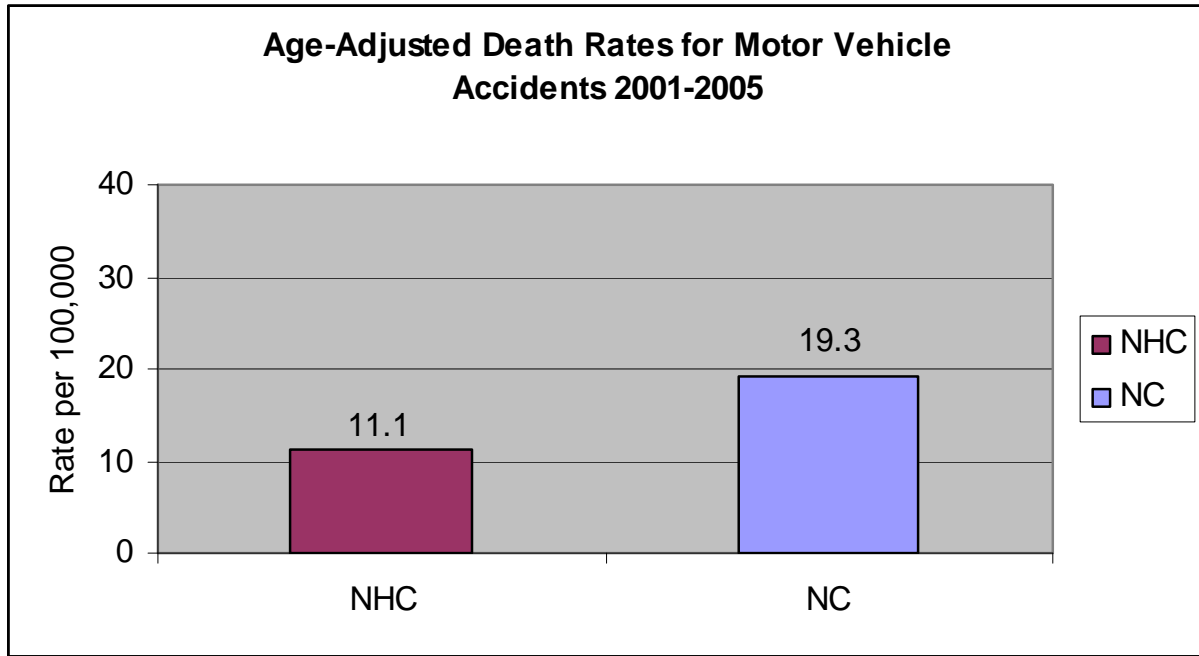
LIVER DISEASE & CIRRHOSIS



Many chronic liver diseases are associated with malnutrition. One of the most common of these is cirrhosis. Cirrhosis refers to the replacement of damaged liver cells by fibrous scar tissue that disrupts the liver's important functions. Cirrhosis occurs as a result of excessive alcohol intake (most common), common viral hepatitis, obstruction of the bile ducts, and exposure to certain drugs or toxic substances.

There were 74 cases reported of deaths attributed to Chronic liver disease and cirrhosis. New Hanover County's death rate for chronic liver disease and cirrhosis was 8.6 which were slightly below the state's death rate of 8.8 per 100,000. Minority males had the highest death rate, 17.3 per 100,000, which was higher than the state's minority male death rate of 13.3 per 100,000. White males had the next highest death rate for chronic liver disease and cirrhosis in New Hanover County with a death rate of 10.9 compared to the state's 12.4 per 100,000. The minority females had above the state rates, 6.1 versus 5.1 for North Carolina. White females had the lowest rate with 4.5 compared to the state rate of 5.6 per 100,000.

MOTOR VEHICLE ACCIDENTS



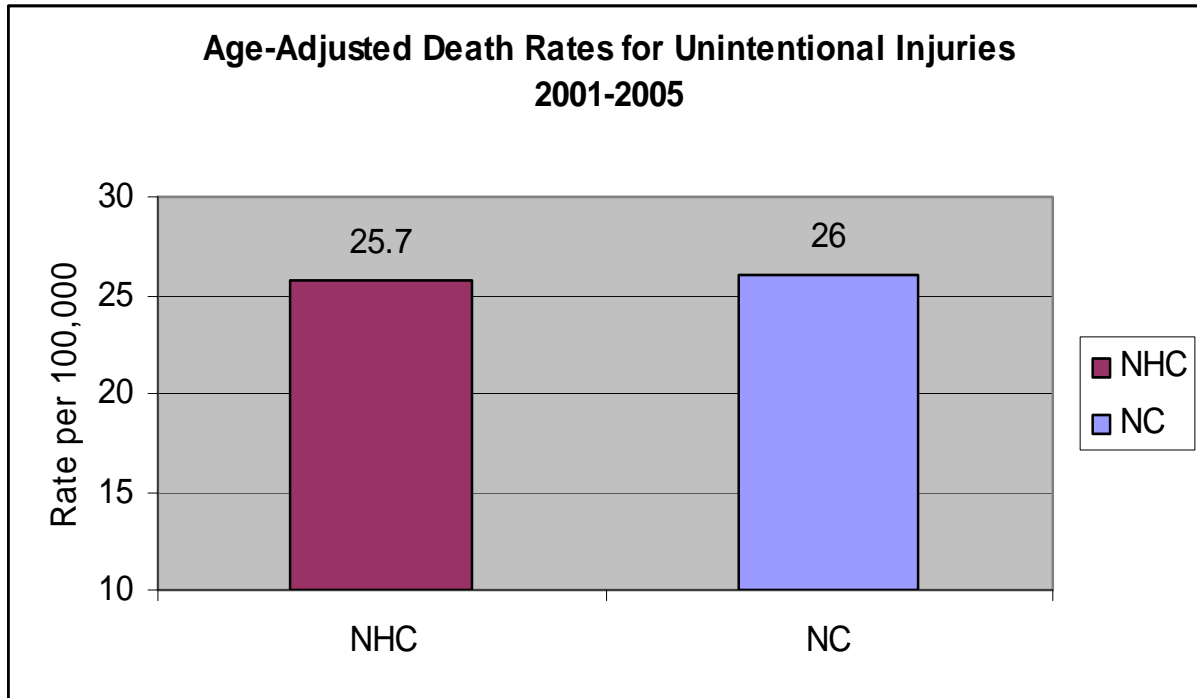
Motor vehicle injuries are the leading cause of death and the greatest public health problem facing children today. The risk of injury is so great that most persons sustain a significant injury at some time during their lives.

There were 98 unintentional motor vehicle injuries reported in New Hanover County from 2001-2005. The motor vehicle mortality rate was lower in New Hanover County than in North Carolina (11.1 versus 19.3 per 100,000). Motor vehicle mortality rate was the highest among the minority male group even though the overall rate is lower than the state's rate; 23.5 compared to 30.1. White males ranked next with a death rate of 13.4 below the state's rate of 26.7. Females had very similar rates; White Females had a death rate of 7.2 compared to the state's rate of 12.1 per 100,000 and minority females with a death rate of 7 rating under the minority female state rate of 10.8 per 100,000. also significantly higher than the state rate of 11.8 per 100,000.

Intervention Strategies

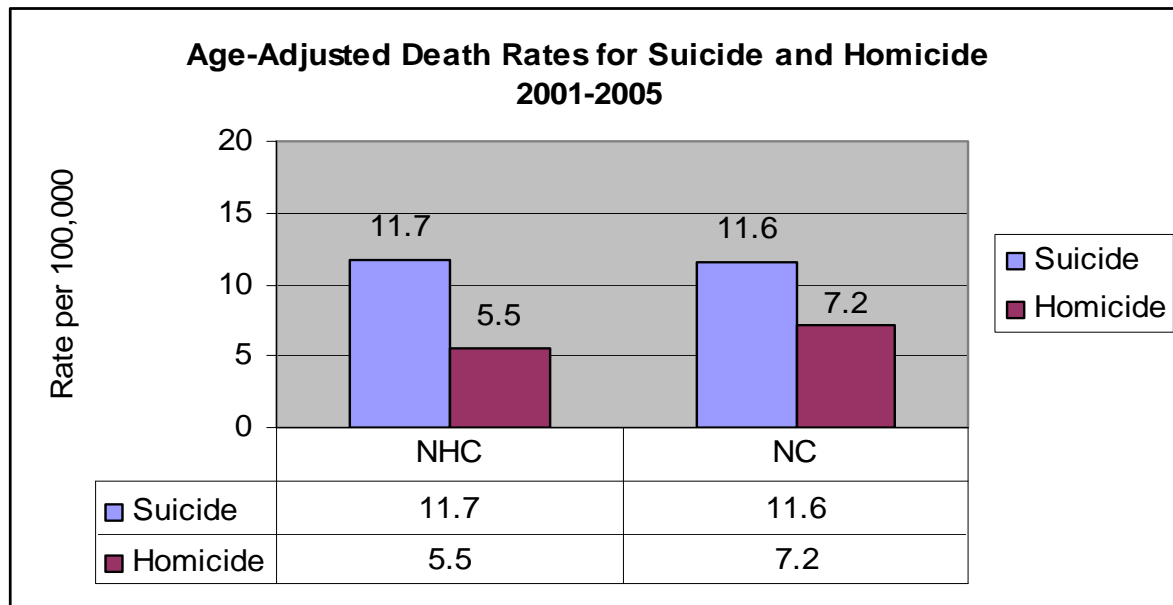
Safe Kids

OTHER UNINTENTIONAL INJURY/ACCIDENTS



Unintentional injuries may include unknown causes as well as others such as exposure to inanimate mechanical forces, unspecified/accidental threats to breathing, exposure to electric current, etc.. There were 224 unintentional injuries reported in New Hanover County from 2001-2005. New Hanover County ranked slightly below the state rate in other unintentional injury/accidents; 25.7 compared to 26. Minority males death rate was 37.8 compared to state's rate of 30.5 and. White males death rates were below the state rate of 34.8 compared to the state's rate of 35.8. Minority females rated above the state rate; 17.9 compared to the states 13.6. White females had the lowest death rate of 17.7 which was lower than the state rate for females of 19.6 per 100,000.

Suicide & Homicide



Suicide

There were 105 suicide deaths in New Hanover County. The suicide death rate for New Hanover County 11.7 ranked above the state's average of 11.6.

The highest death rate in New Hanover County was white females with a death rate of 14.1 compared to the white female state rate of 9.7. Next, were the white males with a rate of 12.0 compared to the state rate of 21.9. The minority males' rate was 2.0 versus 5.7 minority male state rate and minority females were 0 compared to the state rate of 1.8.

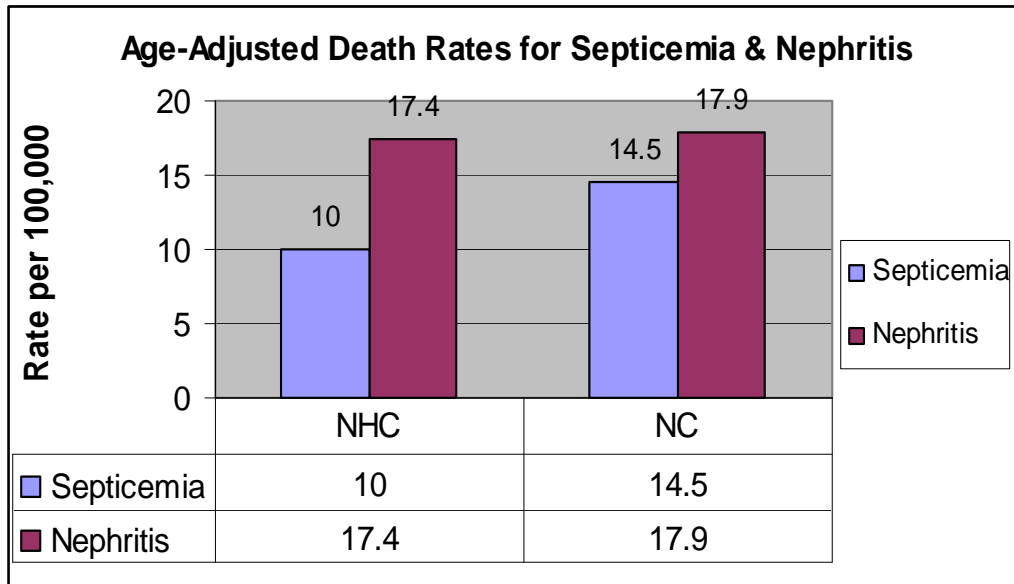
Intervention Strategies

Teen Suicide Education Programs

Homicide

In New Hanover County, there were 50 reported homicide cases during the period of 2001-2005. The New Hanover County rate of 5.5 is below the state's rate of 7.2. The group in New Hanover County with the highest death rate was the white females with a death rate of 15.2, which is still below the state rate of 27.2. Next the white males had a rate of 8.7, above the state average of 6.8. The minority females had a rate of 4.1, which was lower than North Carolina's rate of 6.2 and minority males had the lowest death rate in the county of 0, compared to the state rate for minority males of 2.5 per 100,000.

Septicemia & Nephritis



Septicemia

Septicemia is the presence of bacteria in the blood and is often associated with severe disease. Septicemia is a serious, rapidly progressing, life-threatening infection that can arise from infections throughout the body, including infections in the lungs, abdomen, and urinary tract. It may precede or coincide with infections of the bone, central nervous system, or other tissues.

New Hanover County had a death rate of 10 which was below the state rate of 14.5. Minority males' death rate was 25.5 slightly below the states rate of 26.3 per 100,000. Minority females had the next highest death rate of 18.4 which was below the state rate of 19.8. The White female group had a death rate of 8.8 below the state's rate of 12.1. The White male group ranked lowest, with a death rate of 8.0 compared to the state's rate for white males of 13.5.

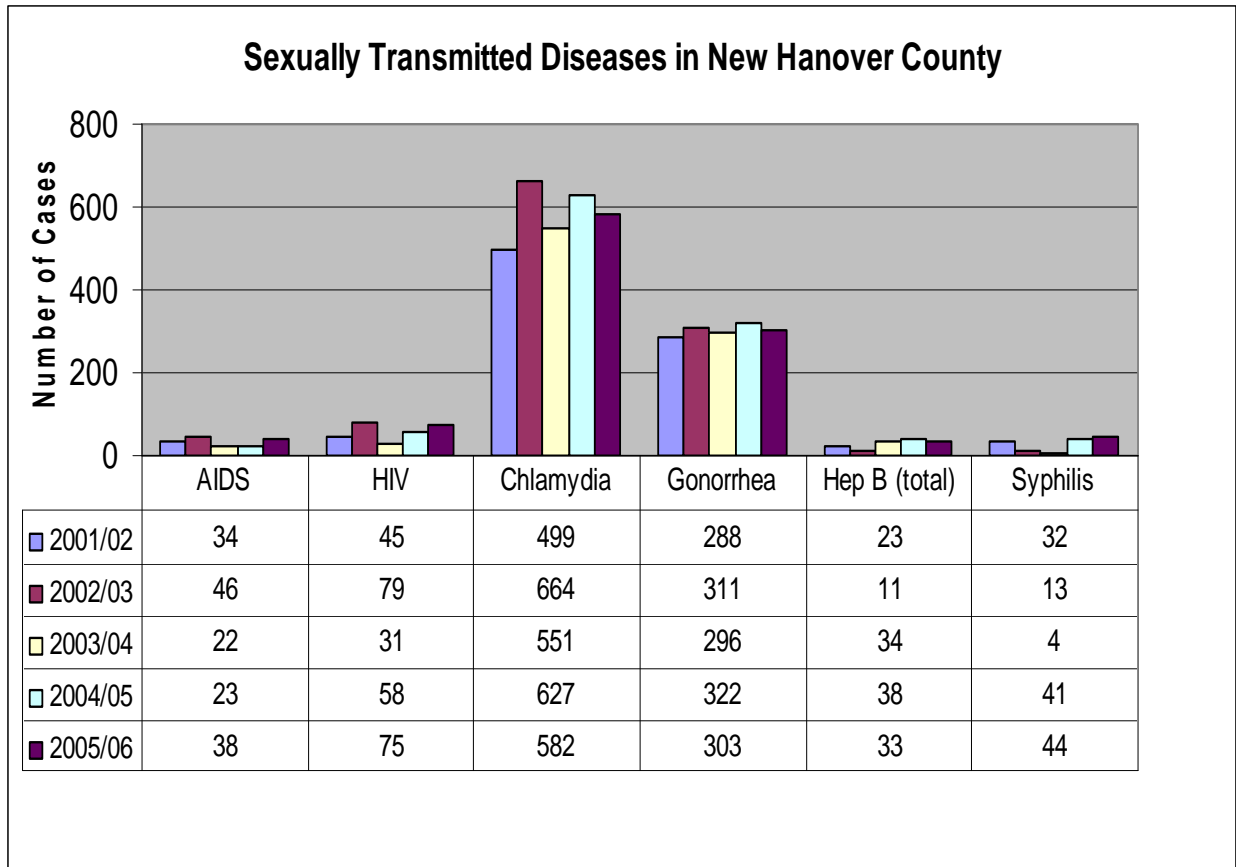
Nephritis

Nephrotic syndrome is a constellation of signs and symptoms including protein in the urine (exceeding 3.5 grams per day), low blood protein levels, high cholesterol levels, and swelling.

New Hanover County's age-adjusted death rate of 17.4 was lower than the state rate of 17.9 per 100,000. Minority females had the highest death rates in this county with a death rate of 40.9 versus the state's average of 31.3. The group white females rated slightly above the state rate for white females; 12.6 New Hanover County rate compared to 12.2 North Carolina rate. Minority males had a death rate of 28.9 compared to state rate of 38 and white males ranked below the state rate of 14.7 to the states 17.5.

Sexually Transmitted Diseases (STD)

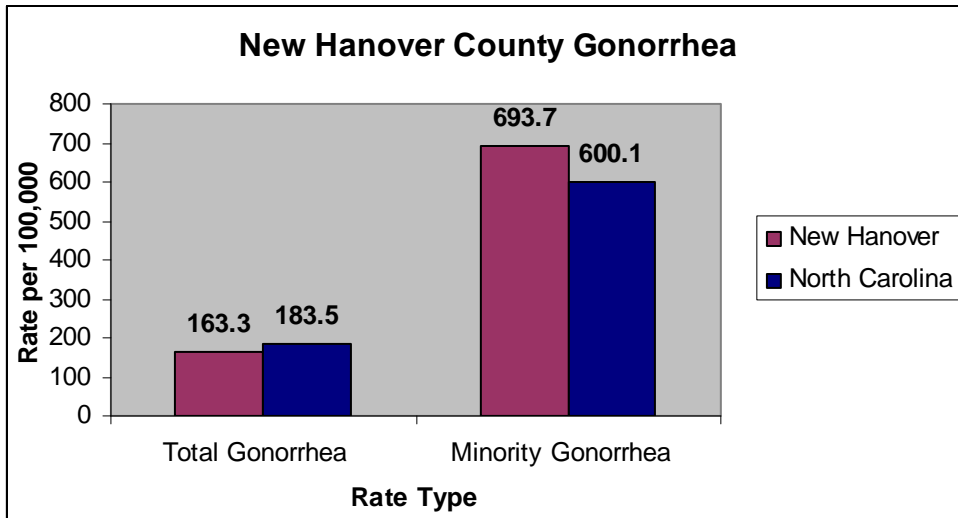
Sexually Transmitted Diseases are on the rise in New Hanover County. Chlamydia and Gonorrhea continues to be the most prevalent sexually transmitted diseases in New Hanover County. Below is an illustration of the trends in sexually transmitted diseases from 2001-2006.



Data from New Hanover County Health Department Annual Reports 2001-2006

Gonorrhea

RESIDENCE	TOTAL Gonorrhea Cases	RATE Per 100,000	Minority Gonorrhea Cases	Rate Per 100,000
North Carolina	77,371	183.5	63,939	600.1
New Hanover	1,394	163.3	1,087	693.7

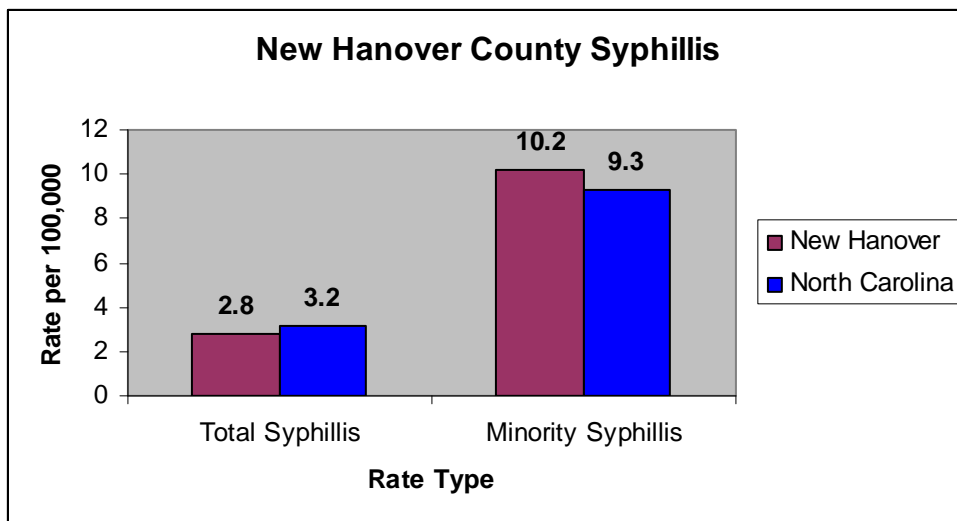


Gonorrhea is caused by *Neisseria gonorrhoeae*, a bacterium that can grow and multiply easily in the warm, moist areas of the reproductive tract, including the cervix (opening to the womb), uterus (womb), and fallopian tubes (egg canals) in women, and in the urethra (urine canal) in women and men. The rate of minority gonorrhea (693.7) in New Hanover County exceeds the state rate (600.1), although New Hanover County ranks below the state with the total gonorrhea cases (163.3 compared to NC state rate of 183.5)

Syphilis

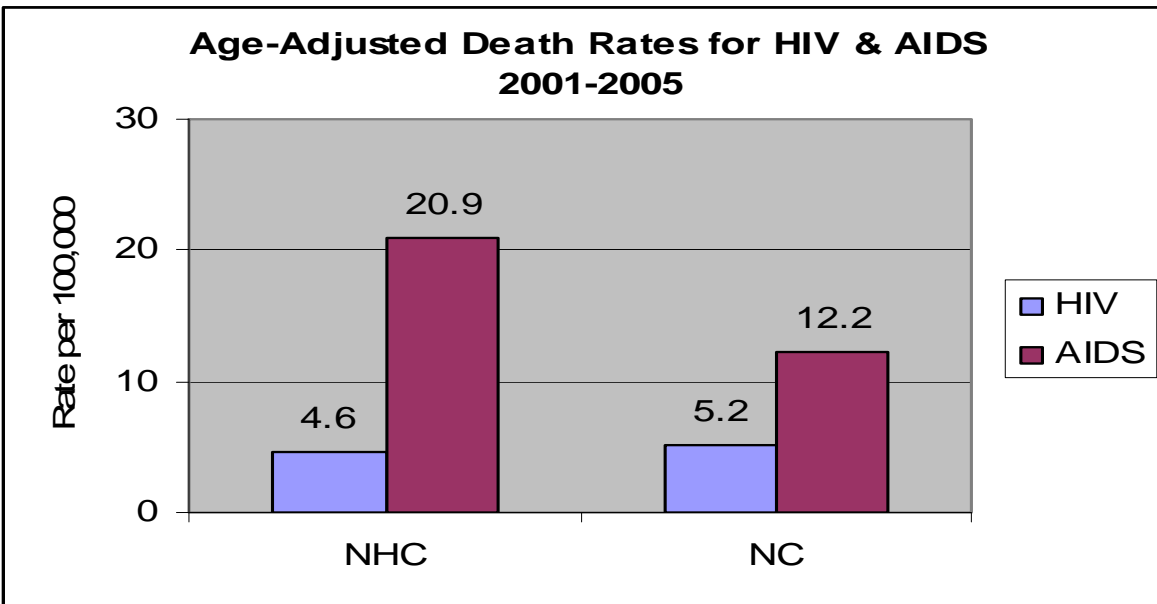
NC Syphilis Cases and Rates per 100,000 2001-2005

RESIDENCE	TOTAL Syphilis Cases	RATE Per 100,000	Minority Syphilis Cases	Rate Per 100,000
North Carolina	1,340	3.2	987	9.3
New Hanover	24	2.8	16	10.2



Syphilis is a sexually transmitted disease (STD) caused by the bacterium *Treponema pallidum*. It has often been called “the great imitator” because so many of the signs and symptoms are indistinguishable from those of other diseases. New Hanover County ranks higher in total syphilis than the state (3.2 compared to 2.8 per 100,000) But in the category of minority syphilis New Hanover County remains below the state average (10.2 compared to 9.3)

HIV & AIDS



HIV stands for human immunodeficiency virus. This is the virus that causes AIDS. The HIV Mortality rate in New Hanover County was below the rate for North Carolina (4.6 versus 5.2 per 100,000). The rate for minority males had the highest age-adjusted death rates in New Hanover County, 21.3 per 100,000 population. Minority females had the next highest death rates for HIV in New Hanover County with a death rate of 15 per 100,000. White males had a death rate of 2.6 per 100,000 and white females were the least affected in New Hanover County with a death rate of 0.6 per 100,000.

NC Resident AIDS Cases and Rates Per 100,000 2001-2005

RESIDENCE	TOTAL NUMBER	TOTAL RATE
North Carolina	5,151	12.2
New Hanover	178	20.9

AIDS stands for acquired immunodeficiency syndrome. AIDS is the final stage of HIV infection. New Hanover County's rate was significantly higher than the state rate (20.9 compared to 12.2).

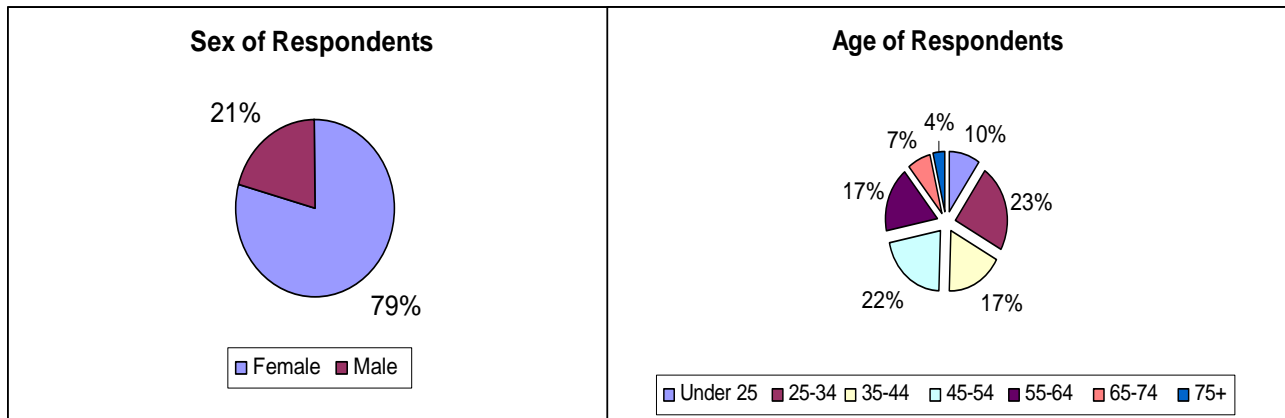
Intervention Strategies for STDs, HIV & AIDS

- Grant funding STD/HIV health educator
- Innovative STD/HIV outreach and sex education
- Increased awareness of access and availability of testing

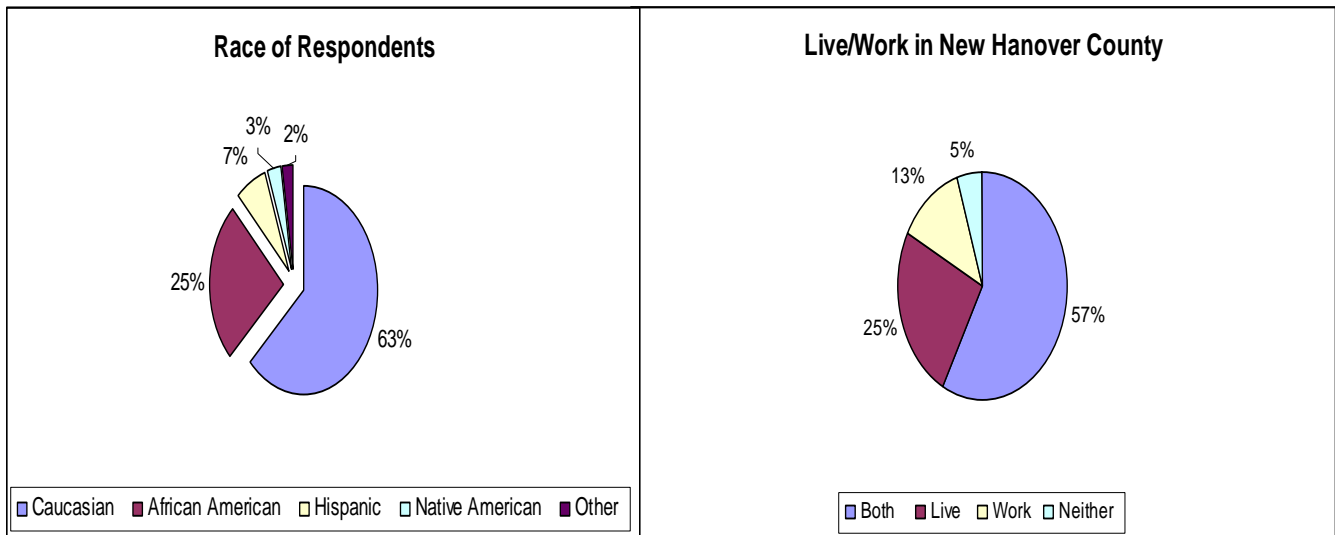
New Hanover County Survey

The New Hanover County Community Health Survey was administered to a sample of the community during the summer and fall of 2007. There were 423 paper surveys completed out of the goal of 500 surveys. The return rate was 84.60%. The survey asked respondents about what they perceived as the most pressing health issues in New Hanover County.

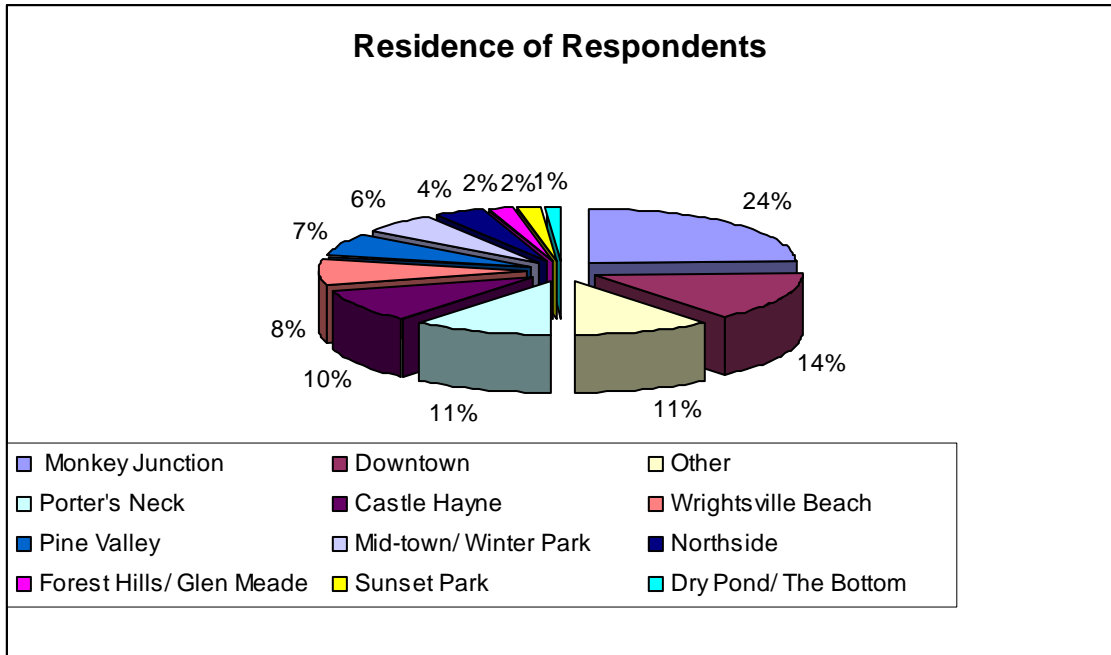
Over 79% of survey respondents were female and 21% were males. The three leading age groups responding to the survey were 23% from ages 25-34, 22% from ages 45-54 and 17% from ages 35-44.



Over 63% of the respondents were Caucasian, 25% African American, 7% Hispanic, 3% Native American and 2% other.

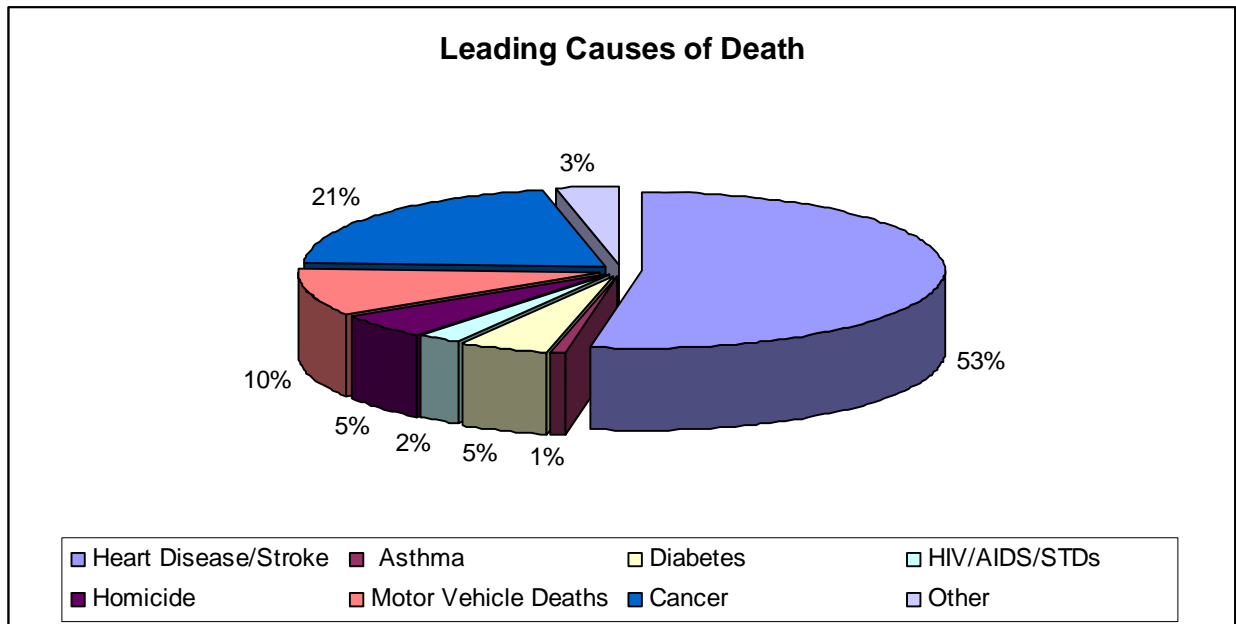


Residence of Survey Respondents

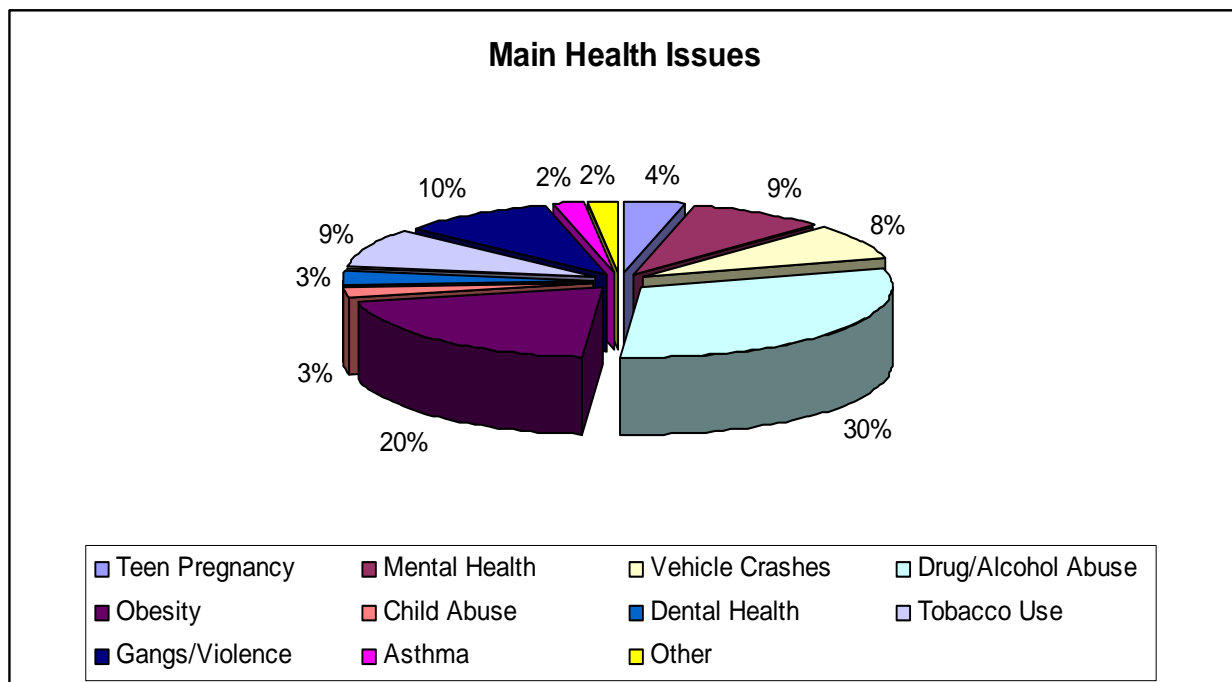


Survey Results

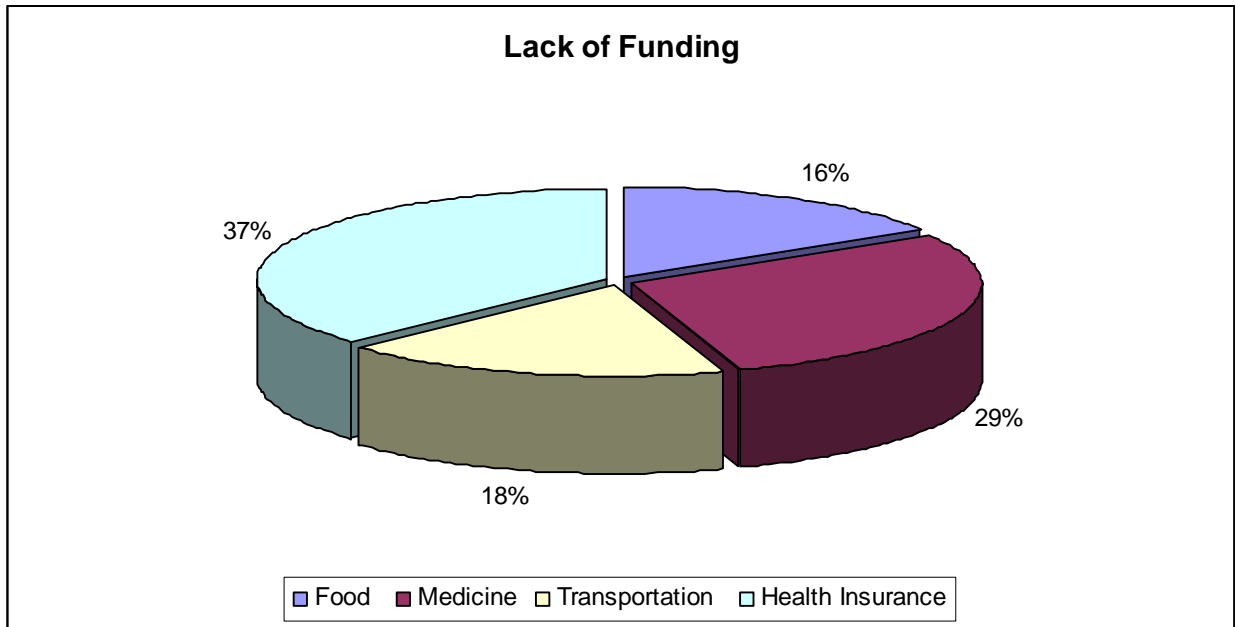
The leading causes of death perceived by the community survey participants ranked Heart Disease/Stroke (58%) as the number one death, cancer (21%) and Motor Vehicle Deaths (10%) ranked as the third leading cause of death from the survey participants.



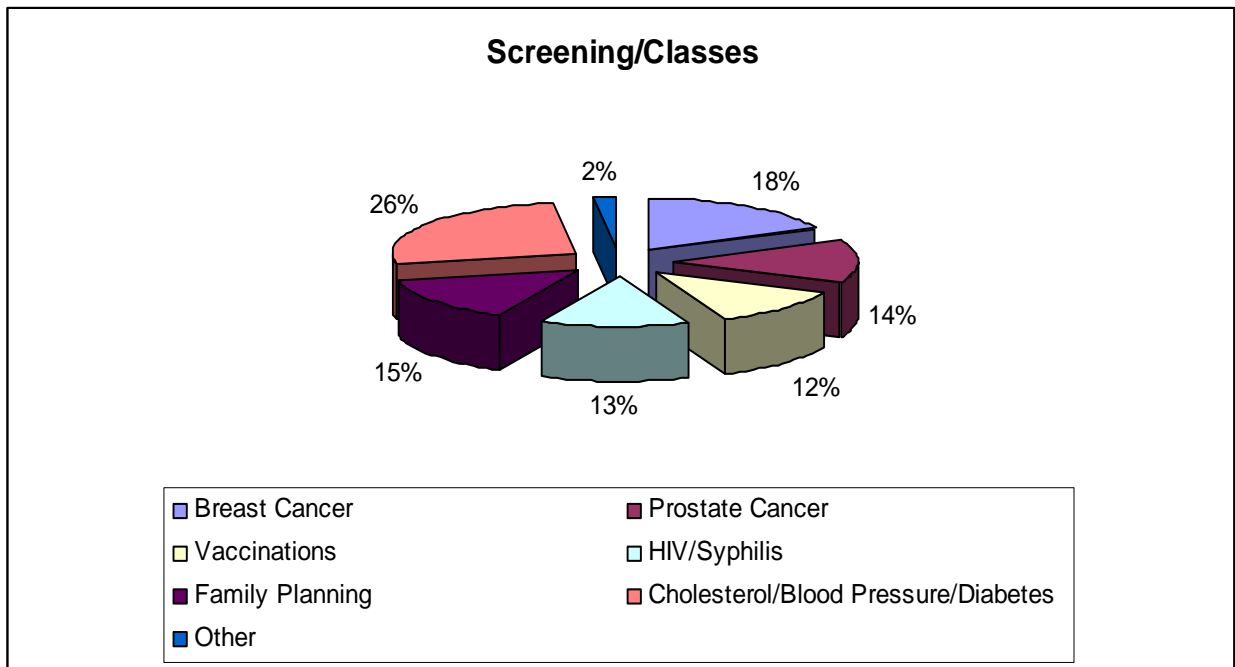
The main health concerns found in this community survey were drug/alcohol abuse (31%), obesity (20%), and gangs/violence (10%) of survey respondents.



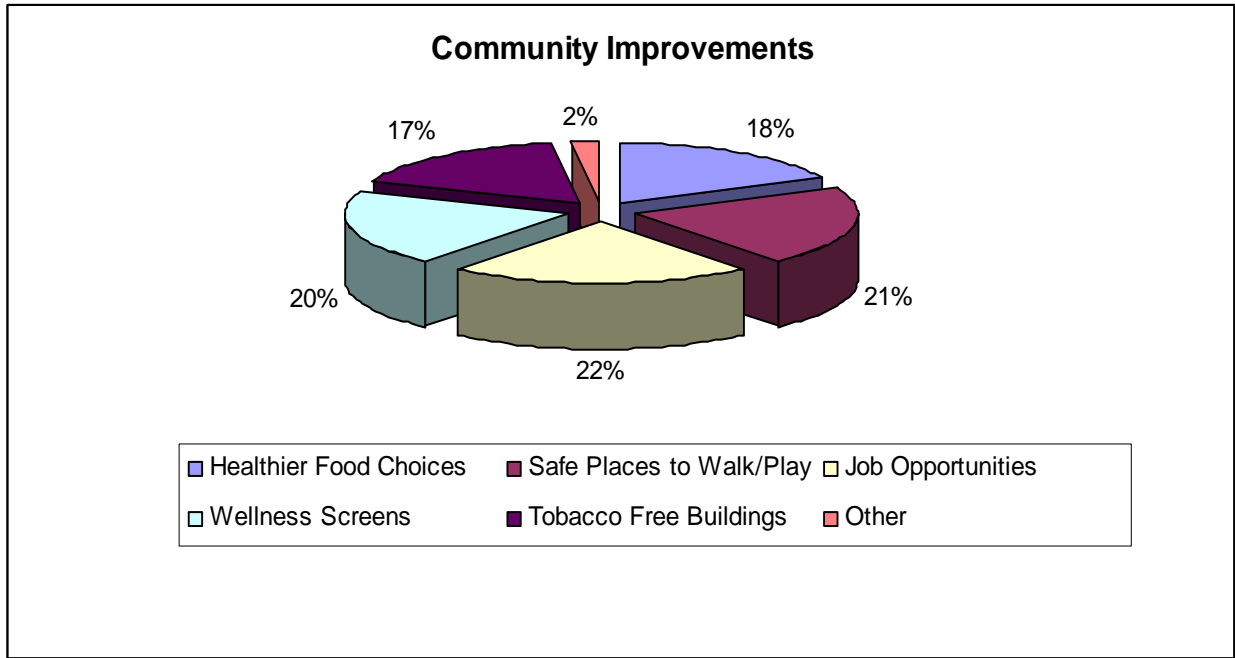
According to the survey, 37% participants responded that health insurance and 29% ranked medicine as what people mostly lacked the funds for. Transportation was the third leading response with 18% of survey respondents.



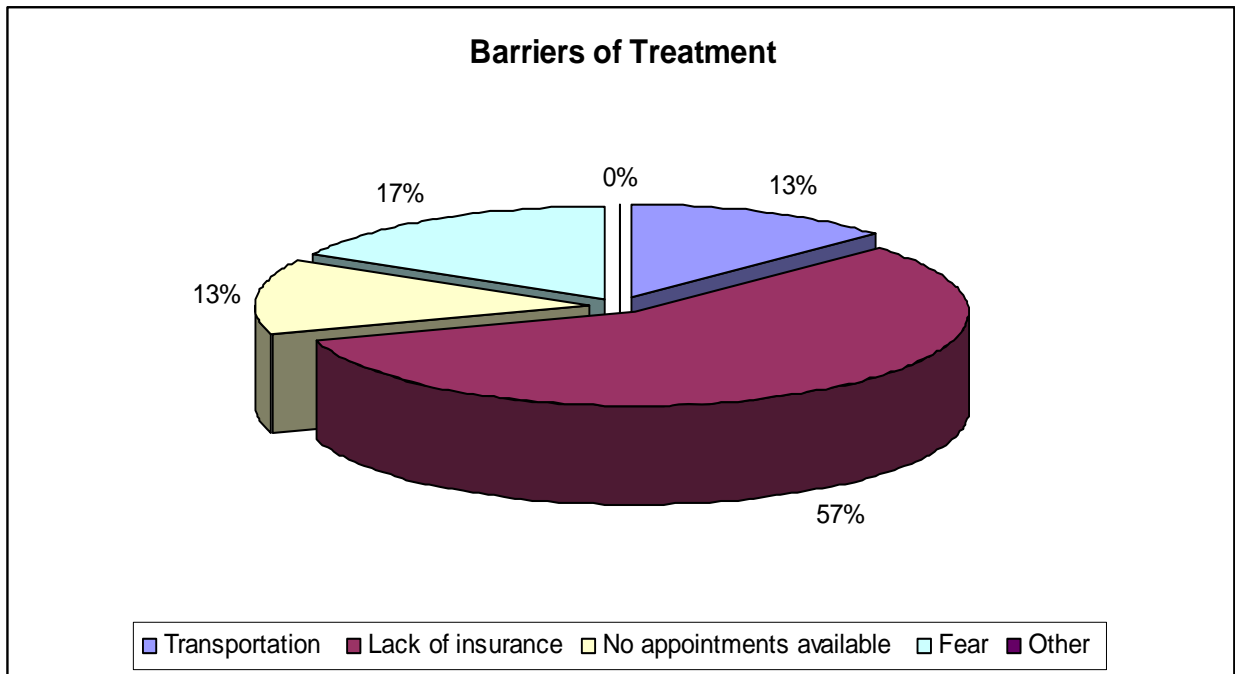
Eighteen percent (18%) of the responses ranked cholesterol/blood pressure/diabetes screening/classes as the number one type of service they would like to see more of. Breast Cancer was the next highest rate of respondents with 14% and the third was 12% for more family planning classes.



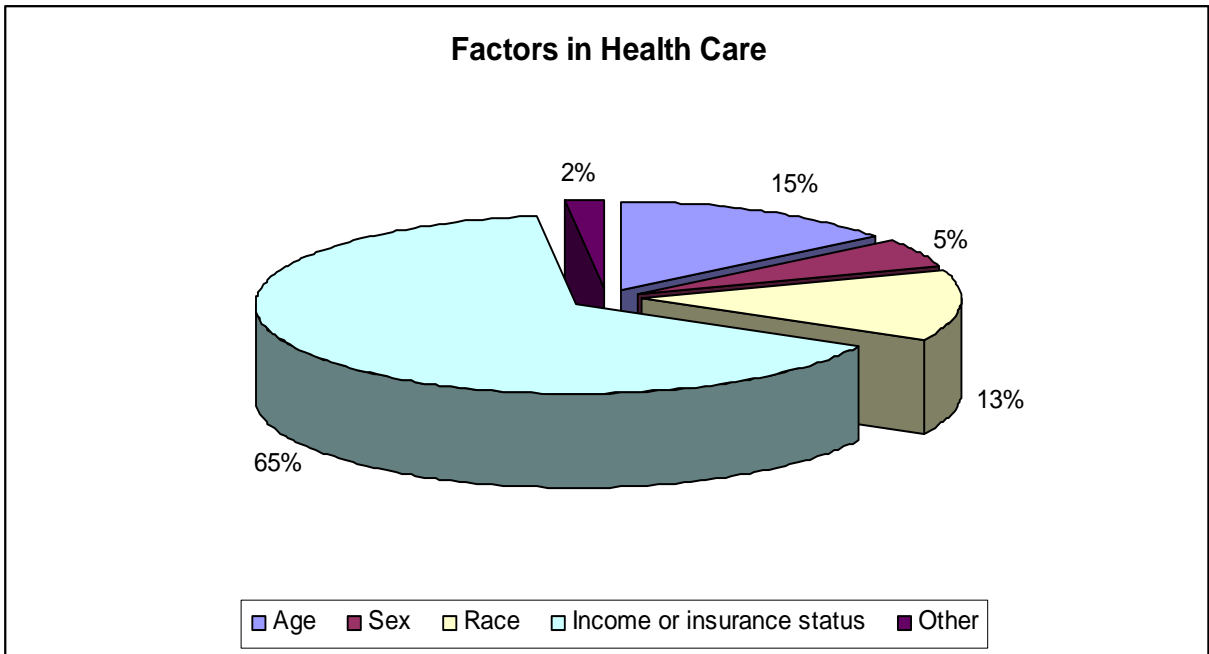
Twenty-two percent (22%) survey respondents would like to see more job opportunities, 21% would like to see safe places to walk and play and 20% would like to have wellness screenings to improve the quality of health for New Hanover County.



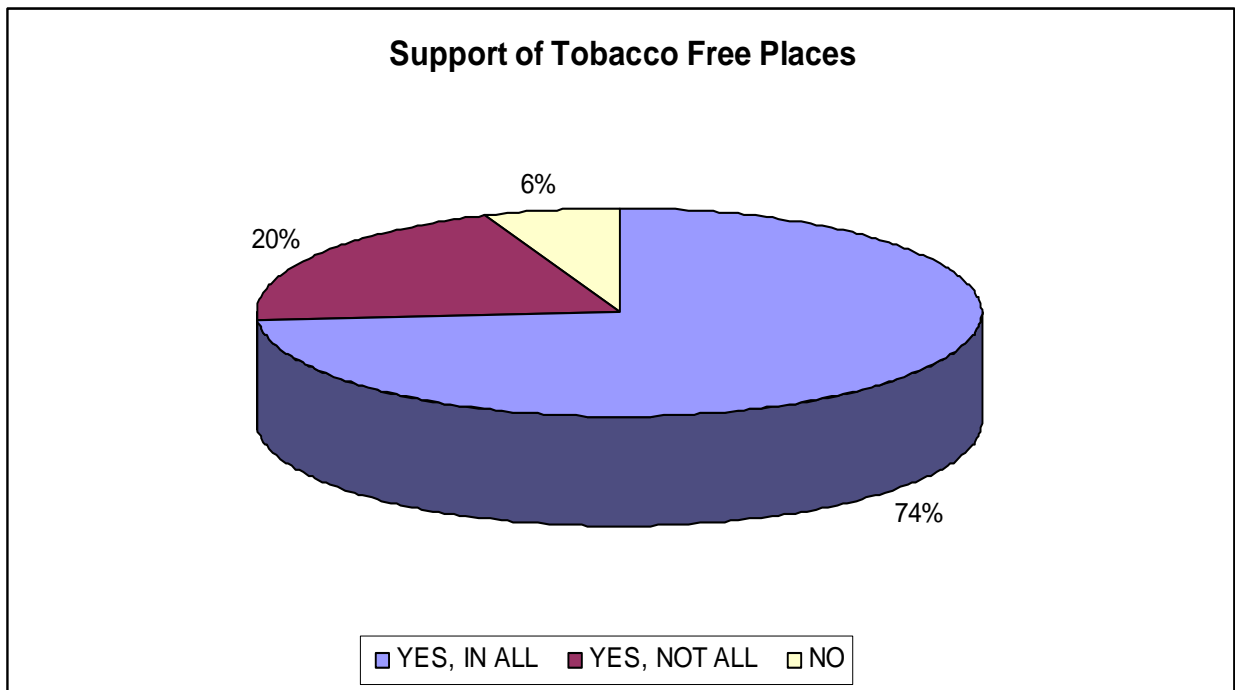
Fifty-seven (57%) of survey respondents felt lack of insurance kept people from seeking treatment, 17% ranked fear, and 13% respondents rated transportation and no available appointments available as barriers to receiving medical treatment in this community.



Over 66% survey respondents felt that income/insurance status affected the quality care they received, 15% responded age and 13% responded race as factors affecting quality of health care in this community.



Seventy-four percent (74%) of the responses are in support of tobacco free public places and building. Twenty percent (20%) support tobacco free policies but not in all public buildings and only 6% did not support tobacco policies in New Hanover County.



Focus Group Results

Focus Groups 2007 Needs Assessment

Five focus groups were held in New Hanover County to gain a better understanding of the needs in the community. The group emphasis was to provide a well-rounded representation of the population through key leaders, service providers and the general community. The groups consisted of the following: approximately 33% males, 67% females, 48% Caucasian, 49% African American, 2% Native American, and 2% Hispanic.

Community responses are in italics

Strengths in New Hanover County

Abundance of healthcare providers	Diversity
Beach	Good neighborhoods
Size	<i>Beach</i>
Climate	<i>Weather</i>
University	<i>Lots of community activities</i>
Arts community	<i>UNCW/CFCC – colleges in town</i>
Economy	<i>Not a lot of traffic compared to other metropolitan areas like Atlanta</i>
Employment options	

Challenges in New Hanover County

Transportation	Mental health services
Lack of affordable housing	A variety of job opportunities
Gang violence	Geographically isolated
Dropout rate/lack of resources	Racial issues
Conservative attitudes	High cost of living
Educational gap	Hurricane seasons
Homelessness	Non-environmental, pedestrian, exercise friendly
Access to healthcare/lack of affordable healthcare	<i>Sewer systems and water quality</i>
Lack of communication among races and non English speaking population growth	<i>Irrigation/sewer/water systems</i>
Prevailing attitudes of local leaders	<i>Violence</i>
Violence & health	<i>High number of traffic accidents</i>
Infrastructure	<i>High cost of living</i>

Major concerns related to health and welfare of New Hanover County

Lack of mental health	Traffic management
Public accessible transportation	Racial disparities
Health Access	Sewer
Obesity	Lack of jobs paying insurance
Violence	<i>Teen pregnancy</i>
Breakdown of mental health system	<i>Tobacco use</i>
Lack of medical community involvement	<i>High number of uninsured</i>
Stigma regarding mental health	<i>Drunk driving</i>
Drug/Substance Abuse	<i>Lack of safety in schools</i>
Homelessness	<i>Lack of visible law enforcement</i>
Cancer rates	
Nuclear power plants	

Major environmental issue/concerns in New Hanover County

Sewer systems, polluted water, mold and mildew
Public pesticide usage
Proximity of nuclear plants
Coastal erosion
Over development, landlocked
Air quality, smoking in public places
Development of wetlands- destruction of land
Access to recycling and the education of recycling to community

Education on climate change and lifestyle
Lack of pedestrian sidewalks and bicycle paths.
Dirty beaches
Sewer spills
Water pollution
Too many retention ponds (breeding ground for mosquitoes)
Air pollution
Lack of recycling opportunities

Ways to improve our level of collaboration

Encourage and obtain the buy-in from health providers accept indigent patients to ensure access to care
Improve is for developers to become more environmental conscious
Discourage conflict of interest
Include media and ensure dissemination to population
Bring all parties to the table and be open to listen
Include politicians
Decrease fragmentation
Reduce individual bias and look at the community as a whole

Getting public attention and support (cohesive)
Increase community support
Sensitivity workshops raising awareness of cultural needs
Church outreach
Central database of community resources
Better communication
Centralized listing of opportunities / resources
Raise awareness of existing opportunities / resources
More funding
Hold event to raise awareness – like a resource fair

Health Services in New Hanover County

Clinics open to all- bilingual interpreters and free health services available
Community resources through the community health center, mental health services in schools

Not very well
Elderly lack enough services
Lack of professionalism / training

Social Services in New Hanover County

Churches helping and disaster preparedness
Increase the Spanish signs for Hispanic population
Underfunded limits the services provided

Not very well
Too many people needing services to do it well
People not aware of services
Employees need more training

Barriers and/or challenges in health care or social services in New Hanover County

Funding
Lack of availability of affordable long term care for older/disabled patients
Access is poor
Availability of mental health is poor
Prevention services and education programs and services
Bureaucracy may limit those who may receive services
Gap in those who don't qualify for services
Hard for people to know where to go
Alternative care not covered by insurance
Transportation

Language
Resources
Age
Transportation
Lack of money
Fear
Lack of insurance
Not knowing where to go
Not recognizing symptoms to know what to do – ignorance

Assistance needed to find employment

More jobs and Increase in level of professional jobs
Transportation
Childcare subsidy
Illiterate/Education/
Vocational programs- mentorship
Increase computer education classes
Graduates not prepared for real world jobs

Places to get training
Transportation
Education on completing applications
Discouraged by online application process
Help creating resumes
Interviewing skills

Barriers to employment are there in New Hanover County for citizens with disabilities

More jobs
Transportation
Childcare subsidy
Illiterate/Education/Vocational programs
Lack of empathy, employers need sensitivity training
Costs to make facility accommodations

Handicapped accessible public transportation
Handicap access on buildings
Education and accessible education opportunities
Having services for disabled in buildings
Lack of comfort working with people with disabilities
Lack of sensitivity training

Additional services or changes to the existing services do you feel are needed

Economic development
Affordable health insurance
Supportive employment family policies
Job trainings
Bilingual education
Adult dental care
Preventive health programs
Chronic disease management- diabetes education
Job fairs

More education for professional growth
Obesity mitigation
More services for disabled
More employment agencies
More translators in schools and other places
More ESL classes
More clinics
More policies / agencies

ONE thing to change to make New Hanover County a better community to live in

Collaboration
Smoke free environments
Bring back family life planning
Parental Education Programs
Long Range Programming
Job Pay Scale
Improve transportation and road systems
Improve school/decrease dropout rates
Eliminate poverty
Social harmony
Eliminate crime, drugs, substance abuse
Promote integration among social classes
Improve school systems
Free health care opportunities
Better roads / traffic system / infrastructure
Healthier and better tasting food in schools
Better crisis services

Conclusion

Community Health Priorities

Conducting this community needs assessment has allowed the opportunity to explore these health issues that need to be addressed by looking at the preexisting data as well as gaining insight from the community perceptions of the health status in New Hanover County. The Community Assessment provides the framework and foundation for the development and implementation of a strategic plan to reduce the morbidity and mortality in New Hanover County.

New Hanover County plans to target the modifiable risk factors associated with the leading causes of death: overweight, poor diet, physical inactivity and tobacco use. Other areas highlighted throughout this assessment which are significant issues for this community is violence, crime, access to care, and mental health. New Hanover County Health Department, Cape Fear Healthy Carolinians and other community partners plan on utilizing this assessment to strategically plan the services and programs that will best impact the community's health outcomes.

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