

## Cumberland Board of Health Members

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Public Representative

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Registered Nurse

Buck Wilson  
Health Director



## SOTCH Report

2015

The SOTCH Report is an annual report that provides information on health priorities identified in the 2013 Community Health Assessment and reviews recent mortality and morbidity data for Cumberland County.

The 2013 Community Health Assessment can be viewed at [www.co.cumberland.nc.us/health.aspx](http://www.co.cumberland.nc.us/health.aspx)

The 2013 CHA identified four priority health concerns:

- ❖ Reduce the Burden of Chronic Diseases (Heart Disease, Diabetes and Cancer)
- ❖ Lack of Physical Activity
- ❖ Reduce Sexually Transmitted Infections
- ❖ Teen Pregnancy Prevention

## New Initiative

Cumberland County Department of Public Health was one of two counties that were awarded funding from Shift NC to reduce teen pregnancy.

## Emerging Issue

Zika Virus

Cumberland County Department of Public Health continues to partner with local agencies to plan strategies that will better prepare them to deal with potential Zika cases in the county.

## Addressing Health Priorities: A Glimpse of Progress

**Heart Disease:** To address heart disease the Health Educators implemented the Chronic Disease Self-Management program and Eat Smart Move More Weigh Less evidence-based programs. The Chronic Disease Self-Management Program is a workshop given two and a half hours, once a week, for six weeks, in community settings such as senior centers, churches etc. One community-based chronic disease self-management program was provided. Eat Smart Move More weigh Less, is a 19-week weight management program. The program uses the Theory of Planned Behavior, informing, empowering, and motivating participants to live mindfully as they make choices about eating and physical activity. The Health Educator implemented one work-site and two community-based Eat Smart Move More Weigh Less programs.

**Diabetes:** To address diabetes the Health Educators implemented the diabetes self-management program and Faithful Families Eating Smart and Moving More. The Diabetes Self-Management Program is a 6-week workshop for people with type 2 diabetes. It teaches the skills needed in the day-to-day management of diabetes and to maintain and/or increase life's activities. The Health Educators conducted one community-based and one work-site diabetes self-management program. Faithful Families Eating Smart and Moving More provide guidance and tools for nutrition and physical activity programs in the faith community. The health Educators scheduled two churches to participate in faithful Families Eating Smart and Moving More. Both churches cancelled due to unforeseen circumstances.

**Cancer:** To address cancer the Health Educator promoted the NC Quitline program through-out the community. Quitlines use the telephone to provide evidence-based behavioral counseling and support to help tobacco users who want to quit. Counseling is provided by trained cessation specialists who follow standardized protocols that may include several sessions delivered over one or more months. NC Quitline received 458 calls from Cumberland County residents.

**Lack of Physical Activity:** To address lack of physical activity the health Educators implemented the Eat Smart Move More Weigh Less and the Faithful Families Eating Smart and Moving More. Both programs have a physical activity component. The Health Educators provided two community-based and one work site Eat Smart Move More weigh Less programs.

**Reduce Sexually Transmitted Infections:** To address sexually transmitted infections, the Health Educator implemented Making Proud Choices and VOICES (Video Opportunities for Innovation Condom Education and Safer Sex). The Health Educators provided fifty community and school based Making Proud Choices programs. Approximately 1,315 youth participated in the program. VOICES is a single-session, video-based program for the prevention of HIV and other sexually transmitted diseases (STDs). The Health Educator provided eight VOICES programs in the Cumberland County Detention center. Fifty-eight (58) inmates participated in the program.

**Teen Pregnancy Prevention:** To address teen pregnancy prevention the Health educator provided contraceptive education in the community. According to research, it's reasonable to think that by offering education classes in alternative or non-clinical settings class attendance will increase. The Health educator conducted school-based contraceptive education classes at ten high schools. One thousand thirty-seven (1,037) students participated in the class.

## Review of Mortality and Morbidity Data 2010-2014

### Infant Mortality (Infant death rates per 1000 live births)

Indicator Infant deaths	Cumberland Rates
Total	8.4
White	6.1
African-American	13.2
Hispanic	**
Other-Non-Hispanic	**

(<1 year) Death rates per 1,000 Live Births, [www.schs.state.us/SCHS/data/databook](http://www.schs.state.us/SCHS/data/databook) click on mortality-infants. \*\*Rates based on small numbers (fewer than 20 cases) are not reported.

Cumberland County African-American infant death rate is twice as high as the White infant death rate. Contributing factors to infant deaths include: preterm birth, low birth weight, late access to prenatal care, teen pregnancy and tobacco and drug use.

### HIV/STD Rates per 100,000 Populations 2010-2014

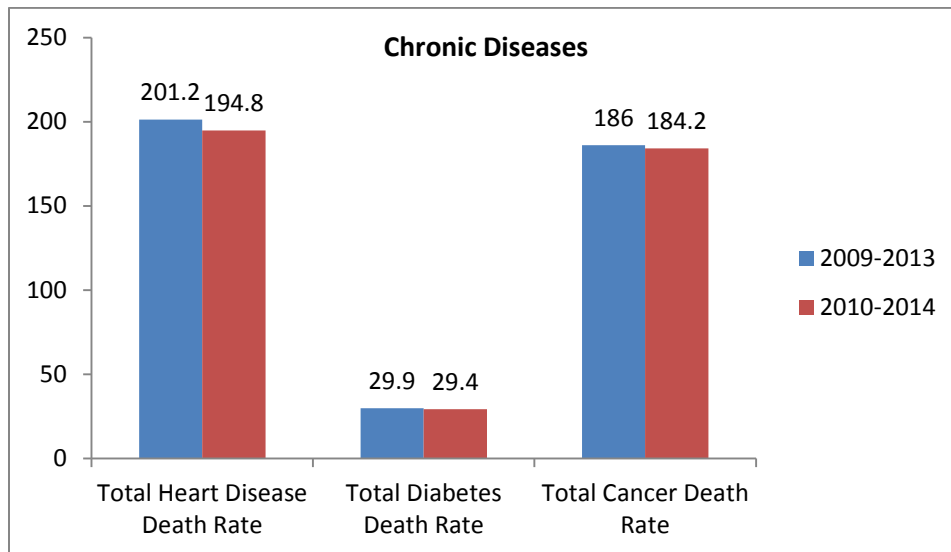
INDICATOR	CUMBERLAND
Gonorrhea	357.8
Syphilis *(Primary & Secondary)	7.7
Chlamydia	995.7
HIV	23.9
AIDS	11.8

North Carolina Department of Health and Human Services, Raleigh, North Carolina. [Table 3, 7, 10, 12, 13]. Accessed [March 3, 2016].

### Cumberland County's five leading causes of deaths:

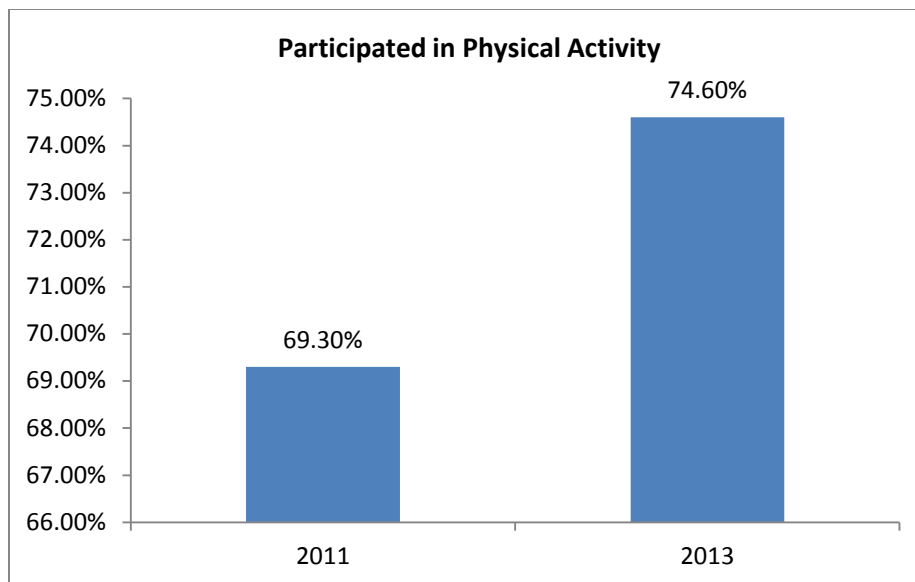
- ❖ Heart Disease
- ❖ Total cancer
- ❖ Chronic Lower Respiratory Diseases
- ❖ Stroke
- ❖ All Other Unintentional Injuries

## Changes in Data



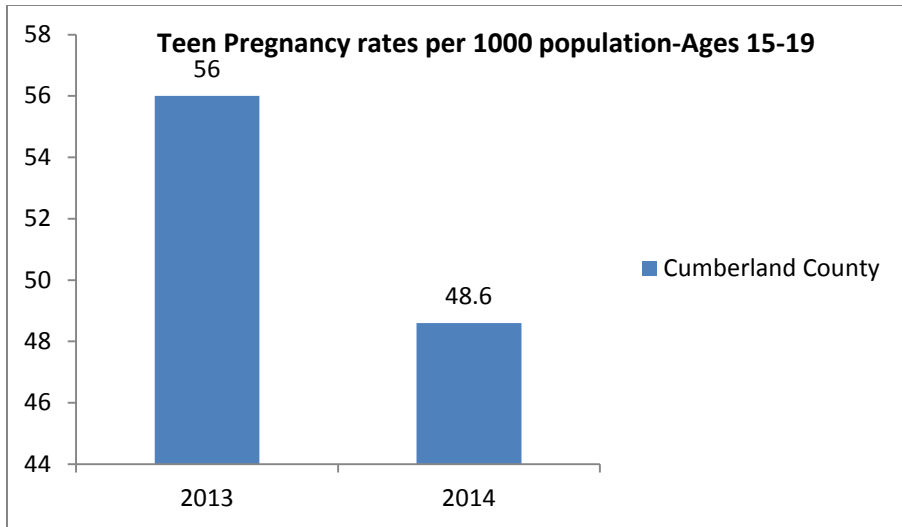
North Carolina State Center for Health Statistics, 2016 County Health Data Book  
<http://www.schs.state.nc.us/schs/data/databook> Accessed March 3, 2016

Cumberland County's total death rates for heart disease, diabetes and total cancer were slightly lower during the period 2010-2014 than the 2009-2013 periods.



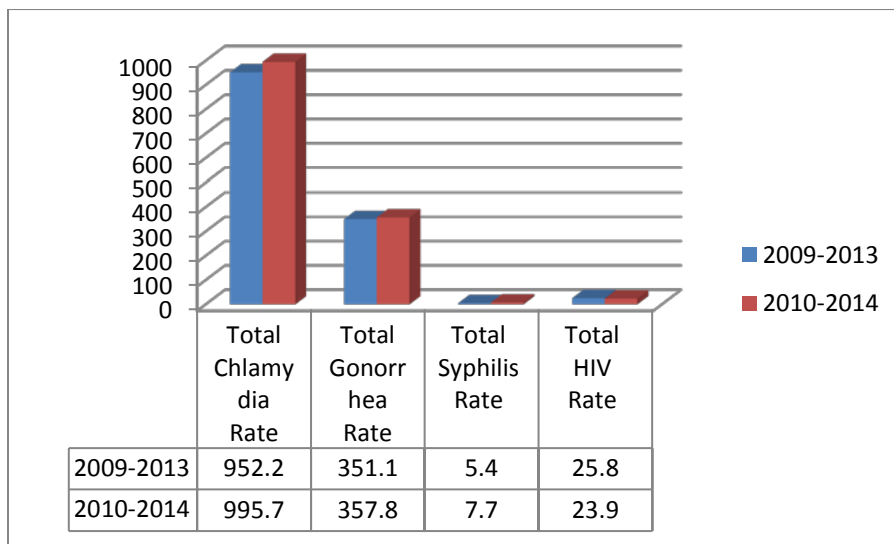
<http://www.schs.state.nc.us/data/brfss/2014/nc/nccr> Click on exercise

According to the 2013 Behavioral Risk Factor Surveillance System (BRFSS), 74.6% of Cumberland County residents reported participating in physical activities or exercises compared to 69.30% of Cumberland County residents who reported participating in physical activities or exercises in 2011.



[http://files.www.shiftnc.org/data/map/northcarolina/2014\\_pregnancy](http://files.www.shiftnc.org/data/map/northcarolina/2014_pregnancy) Assessed on March 3, 2016  
[http://files.www.shiftnc.org/data/map/northcarolina/2013\\_pregnancy](http://files.www.shiftnc.org/data/map/northcarolina/2013_pregnancy) Assessed on March 3, 2016

Cumberland County continues to make progress in lowering its teen pregnancy rate.



Cumberland County’s sexually transmitted disease rates for chlamydia, gonorrhea and syphilis increased during the period 2010-2014. However, the HIV rate was slightly lower than the 2009-2013 periods.