



Submitted by the

Montgomery County  
Health Department  
Health Education  
Staff

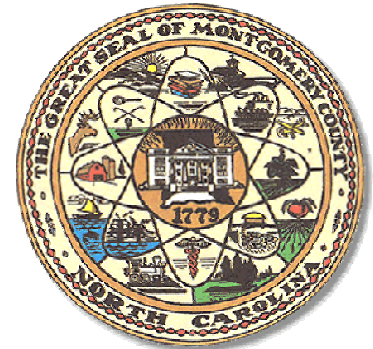
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# STATE OF THE COUNTY HEALTH REPORT

## MONTGOMERY COUNTY

DECEMBER 2007

### Montgomery County At A Glance



### Mortality

The most recent data available from the North Carolina State Center for Health Statistics, (2001-2005 age-adjusted death rates), reveal that the top five leading cases of death in Montgomery County are, ranked from highest to lowest, as follows: (1) Heart Disease, (2) Cancer, (3) Diabetes, (4) Chronic Lower Respiratory and (5) Cerebrovascular Disease. Death rates in the county are higher than state rates for total heart disease, diabetes mellitus, pneumonia/influenza, chronic lower respiratory disease, chronic liver disease, nephritis, unintentional motor vehicle injuries, and homicide. The rates for 2002-2006 should be available in January 2008 and can be accessed at <http://www.schs.state.nc.us/SCHS/>.

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Demographics	Montgomery County	North Carolina
Population, 2006 estimate	27,638	8,856,505
<u>Ethnicity</u>		
White Persons, Not Hispanic:	64.1%	68.3%
Black Persons:	19.7%	21.8%
Hispanic or Latino Persons:	<b>14.1%</b>	6.4%
Asian Persons:	1.8%	1.8%
Other:	0.3%	1.7%
Median Household Income	<b>\$32,374</b>	\$40,863
Per Capita Income, 1999	<b>\$16,504</b>	\$20,307
Persons Below Poverty	15.9%	13.8%
<b>Percent of Children:</b>		
In Poverty (2004)	22%	19%
Enrolled in Free and Reduced Lunch (2005)	<b>64%</b>	48%
Enrolled in Regulated Child Care (2005)	22%	26%
Enrolled in Regulated Child Care Receiving Subsidies (2005)	41%	36%

*Statistics in blue to highlight the difference between state and county rates.*

Montgomery County is made up of five towns: Biscoe, Candor, Mount Gilead, Star and Troy. The largest employers in the county are Montgomery County Schools, Realistic Furniture, Citation/Foundry Service, Jordan Lumber & Supply, and Southern Correctional Institution. The unemployment rate for Montgomery County for September 2007 is 6.3%. Montgomery County has a labor force of 11, 815 people; of those, 747 are currently unemployed.

## Infant and Child Death

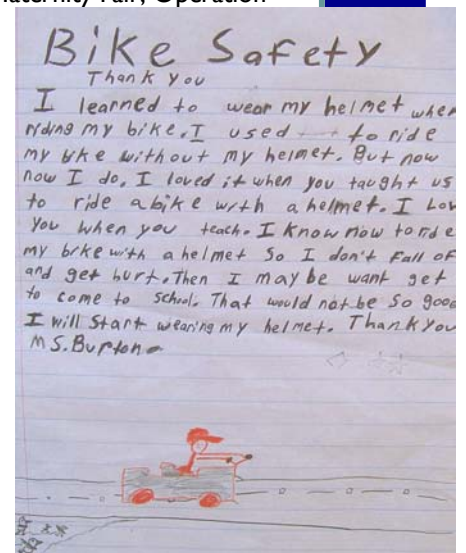
The North Carolina State Center for Health Statistics reports that one child died in Montgomery County in 2006, due to poisoning. A total of 30 children died in the 2002-2006 time period.

According to NC General Statute (NCGS) 7B-1400, The North Carolina Child Fatality Prevention System was established through the North Carolina General Assembly as a public policy of this State to prevent the abuse, neglect and death of juveniles and finds that the prevention of such acts is a community responsibility that professionals from disparate disciplines have responsibilities for children or juveniles and have expertise that can promote their safety and well-being; and that multidisciplinary reviews of the abuse, neglect and deaths of juveniles can lead to a greater understanding of the causes and methods of preventing these deaths. Guidance for local teams can be found in NCGS 7B-1406. The Montgomery County Child Fatality Prevention & Community Child Protection team is responsible for reviewing child deaths and injuries that occur on children from birth to age 18 who reside in Montgomery County, even if the death or injury occurred elsewhere. The team is made up of two committees: Child Fatality Prevention, which is chaired by Tammie Bell, Montgomery County Health Director and Community Child Protection, which is chaired by Jim Sanders, Montgomery County Director of Social Services. This multi-agency team reviews any information they have on previous services, if any, provided to the child(ren) from their particular agency. The team meets every quarter. The information on child deaths and injuries is reviewed based on the previous year's quarter. Each member of the team and invited participant must sign a statement indicating an understanding of and adherence to confidentiality requirements, including the possible civil or criminal consequences of any breach of confidentiality. The responsibility of the team includes: (1) Developing a communitywide approach to the problem of child abuse and neglect; (2) Understanding the causes of childhood deaths; (3) Identifying any gaps or deficiencies that may exist in the delivery of services to children and their families by public agencies that are designed to prevent future child abuse, neglect, or death; and (4) Making and implementing recommendations for changes to laws, rules, and policies that will

support the safe and healthy development of children and prevent future child abuse, neglect, and death.

The mission of Safe Kids North Carolina is to reduce and prevent accidental childhood injuries birth through age 14. In the Spring of 2007, Montgomery County Safe Kids formally merged with Richmond, Moore, Hoke and Scotland counties to become the Safe Kids Mid-Carolinas chapter. Counties continue to host their individual meetings and conduct individual programs, but act as a region to apply for funding and meet the criteria of North Carolina SafeKids. In Montgomery County, one of the primary focuses of the group is to provide discounted car seats to families receiving public assistance. Two additional committee members completed certification requirements, bringing the county total up to three certified child passenger safety technicians. For the year of 2007, the committee has distributed approximately 70 seats and educational materials to children in the county through scheduled classes, and approximately 75 more in planned outreaches such as the Maternity Fair, Operation Inasmuch, and the "Our Lady of the Americas Catholic Church" clinic.

Additionally, the committee, under the leadership from 4H/ Cooperative Extension Service, conducts a "Safety Days" campaign every September with 4th grade students. Safety topics in 2007 included bicycle/sports, ATV, internet, candle, food, home alone, and sun.



Letter written by  
4th grade participant  
in Safety Days

# Morbidity-Communicable Disease

Communicable Disease Rates (2001-2005)	North Carolina	Montgomery County
Syphilis	0.8	1.8
Gonorrhea	18.3	8.3
AIDS	1.2	0.9
Chlamydia	31.5	15.6
TB	0.4	2.1

As indicated in the table to the left, disease rates in Montgomery County are lower than state rates for gonorrhea, AIDS, and chlamydia; rates are higher for syphilis and tuberculosis.

On November 8, 2007, Montgomery and Randolph county representatives attended the HIV/AIDS Strategic Planning meeting held at Randolph Hospital in Asheboro. The objective of the meeting was to develop a three-year plan to address the

growing HIV/AIDS service delivery and prevention needs in Randolph and Montgomery counties. Representatives from Montgomery County included Dr. Touber Vang of Mid Carolina Family Medicine in Troy; his wife, Lu Vang representing Sandhills Mental Health; Mary Perez, Communicable Disease Nurse and Paula Shaw, Spanish Interpreter, both representing Montgomery County Health Department. The speakers included Tammie Bell, Montgomery County Health Director; Mimi Cooper, Randolph County Health Director; Kent Gammon, Executive Director of Central Carolina Health Network in Greensboro; Sylvia Coleman of Coleman and Associates; and Devin Griffith, Vice President of Randolph Hospital. A committee will be formed in Montgomery County to promote HIV/AIDS awareness and to identify resources in Montgomery County and surrounding counties to help those living with HIV/AIDS in the community.

Tuberculosis continues to be a problem for Montgomery County. In 2006, there were 4.2 cases of TB in North Carolina for every 100,000 people. Montgomery County's rate of 59.6 is considerably higher. In 2006, Montgomery County had the highest rate in the state for TB disease, with 16 active cases. As of December 2007, the Montgomery County Health Department reports having an average of 30-40 patients on latent tuberculosis infection (LTBI) medications, and three active cases. An additional four cases have been ruled out. Ongoing efforts are being made to increase public awareness concerning TB disease and TB infection. Literature about the signs and symptoms of TB and LTBI, as well as disease prevention and progression, has been disseminated in the community through the local newspaper and county water bills. One major point of focus has been to encourage county residents to get skin testing.

*A Strategic Planning meeting was held at Randolph Hospital to develop a three-year plan to address the growing HIV/AIDS service, delivery and prevention needs in Randolph and Montgomery Counties.*



# Morbidity- Cancer Incidence

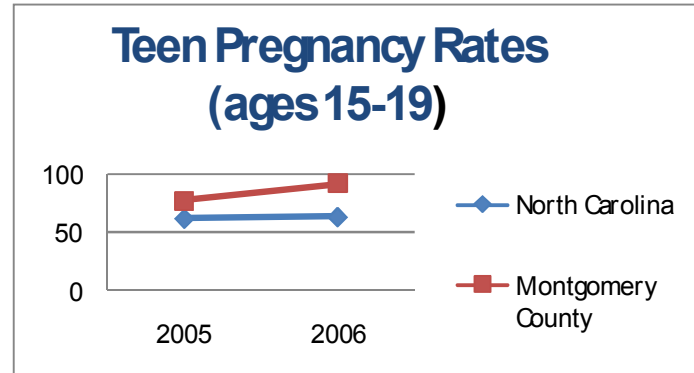
Age-adjusted cancer incidence rates for 2001-2003 are lower for Montgomery County than for North Carolina in all four areas. The "total cancer" rates

for North Carolina are 444.4, while the rates for Montgomery County are only 381.1. Ranked from highest incidence rate to lowest in

- Montgomery County:
- (1) Female Breast-381.1,
  - (2) Prostate Cancer- 116.7,
  - (3) Lung Cancer-69.4 and
  - (4) Colorectal Cancer-31.6.

# Teen Pregnancy

Sixty-two teens between the ages of 15-19 in Montgomery County became pregnant in the year of 2005, giving the county a rate of 76.7— higher than the state rate of 61.7. The county ranked 28th highest in the state. However, the rate increased considerably the following year. In 2006, seventy-six teens became pregnant, raising the rate to 91.3 while the state rate was only 63.1. For the year 2006, Montgomery County ranks 8th highest for teen pregnancy in the state of North Carolina.



*“This is a huge step to be taken by the county in the attempt to decrease the school drop-out rates for academics and teenage pregnancy.”*  
~Tammie Bell,  
Health Director,  
about the TOP  
program

Health directors in the 13-county South Central North Carolina Partnership for Public Health identified teen pregnancy as a significant regional public health concern. The group coordinated a project to identify current programs and major gaps in services, as well as the availability of resources to expand programming. The project also developed practice-based recommendations for a regional response to teen pregnancy that meets locally-identified needs within the region. The study identified the following contributing factors: lack of recreational activities; lack of parental supervision, involvement and communication; lack of accurate and comprehensive information on sexuality; inadequate male involvement and accountability; intergenerational teen pregnancies; and individual attitudes and behaviors. Perceived barriers to implementing a comprehensive teen pregnancy prevention program included a lack of community awareness; focus on abstinence-only programming; lack of inter-agency coordination; and inadequate financial and personnel resources. Several potential intervention programs were identified, including the Teen Outreach Program (TOP).



*Kwain Bryant, motivational speaker, addresses 8-12th graders at the Teen Health Fair in April 2007*

In April of 2007, the first ever “Teen Health Fair” was held at East Montgomery High School. Students in the 8th through 12th grades were invited and encouraged to attend. Booths were set up by a variety of vendors including the Health Department, Montgomery Community College, Montgomery County Schools, and many others. A motivational speaker presented programs on sexuality and substance abuse. One hundred and twelve teens attend the fair, making it a successful event.

Recognizing the need for intervention in this area, the Montgomery County Health Department collaborated with Montgomery County Schools and received a \$156,690 grant from the Kate B. Reynolds Charitable Trust to implement the TOP program over a period of

three years. Through this grant-funding, a health educator was hired and the program was implemented in both high schools in August of 2007.

## 2020 Vision Group in Montgomery County

This community based group is the culmination of efforts to address health issues in Montgomery County as an effort to impact the overall health of the Sandhills region, with a desired outcome of a healthier region by the year 2020. The Montgomery County 2020 group members represent a wide spectrum of county leaders and lead agencies in healthcare, education and industry. Additionally, there are individuals on the committee that represent local health initiatives focusing on the diverse populations of the area. Specifically, some of the groups participating in

the 2020 effort are: First-Health of the Carolinas; FH Montgomery Memorial Hospital; Montgomery County Health Department; Montgomery County Schools; Parks and Recreation; Montgomery County Cooperative Extension Service; Troy-Montgomery Senior Center; School Based Health Centers; and Montgomery Community College, to name a few. Initiatives this year included conducting a community assessment for a Latino Health Initiative, targeting efforts to address health issues of diabetics in the county, implementing health

directed education for targeted populations, and increased media attention for health issues and health screenings. These are only a few of the highlights of the group's efforts. In addition, a natural outcome of these monthly collaborations between community agencies has been the opportunity to "talk" and confer on localized efforts. The group decided on these three core areas of emphasis: (1) Increase the percentage of leisure time/physical activity, (2) Decrease childhood obesity and (3) Decrease adult obesity.



*Collaboration is key to making a healthier region*

## Patient Navigator Program



This program was developed as a collaborative effort between Montgomery Community College and FirstHealth of the Carolinas to develop and train community members from diverse and underserved communities to serve as liaisons between their cultures and healthcare resources and systems. The program is taught through Continuing Education at MCC and is a semester long program. The coursework consists of basic healthcare skills such as taking vital signs and blood pressure, and an introduction to chronic diseases during the lifespan. The focus is on the community and healthcare resources that are available to community members, how to access care and services, and the ways and means of obtaining preventive screenings and other needed services for healthcare needs. Additionally, computer skills are taught. The course meets two nights each week, for a total of four hours each night. Speakers from different agencies in the community are provided in each class, are introduced to the class, and then provide background on their agency/service. Field trips have been part of the program. The class will graduate in December 2007 and have several opportunities for work with different grant projects and agencies in the area. This program is a pilot for potentially similar programs in the rest of the state.

## Bridging the Gap Between Mexico and Montgomery County

Through the North Carolina Center for International Understanding and with generous donations from FirstHealth Montgomery Foundation, Duke Endowment, Kate B. Reynolds Charitable Trust, the North Carolina Office of Rural Health and the North Carolina Division of Public Health, key county leaders were able to travel to Mexico to study health care in order to bridge the gaps in our health care system for the Latino population. This business trip occurred from September 10-16, 2007 and spanned from Mexico City to Puebla. A total of 30 participants from North Carolina were chosen to participate in this project. This year, Montgomery County was selected to participate for the very first time. Montgomery County was chosen due to the high number of Latinos living and working in the county.



*The Montgomery County team in Mexico  
Pictured from left to right:  
Barbara Bennett, Donna Peters,  
Kerry Hensley, Tammie Bell*

The objectives of this project were (1) to gain a deeper understanding of the overall social and historical context of Mexico; cultural attitudes and behaviors surrounding health care in Mexico; and the infrastructure for and accessibility of the Mexican health care system; (2) to gain knowledge about the education and training of health care professionals in Mexico to improve the recruitment and preparation of Latinos who are entering the health field in North Carolina; and (3) to build on existing knowledge regarding Latino health in North Carolina and contribute to an ongoing process, through discussions as well as concrete actions, that

will lead to improvement of care and a better awareness of health care concerns with regards to the Latino community. The trip was intensive and included educational tours of an anthropology museum to better understand Mexican culture, private and public hospitals, rural health clinics, schools and university health care programs (Dental, Nursing, Laboratories and Medicine) in Mexico.

Although the trip has ended, the Montgomery County team's work has just begun. Through a series of presentations to key health care, school, government and community officials about their experiences in Mexico, the team will form partnerships and establish a committee to address improving Latino health care in Montgomery County. Some of the knowledge gained

from the cultural experience will also be used to improve staff development and cultural competency within various agencies as well as to comply with accreditation standards.

The entire Montgomery Latino Health Coalition Project team agreed that this was an unforgettable cultural experience that was extremely enlightening. This business trip has solidified their desire to help make a difference in every realm of health care in Montgomery County.

***“This business trip has solidified their desire to help make a difference in every realm of health care in Montgomery County.”***

## Child Health

### School Based Health Clinics

During the 2006-07 school year, the Montgomery County School Based Health Centers identified students needing additional immunizations to bring them up to date with current requirements. In collaboration with the Montgomery County Health Department, more than 1,000 doses of vaccine were given. Working with the Health Check Coordinator at MCHD, students were also identified who needed well-child checks and these checks were performed. School based health center nurses have recognized overweight and obesity as an issue for many of the students they treat. According to their protocol, students seen in the clinics are weighed and measured and their BMI calculated. If it is determined that students are obese or at-risk, they are

referred to a dietician for counseling. The centers have also begun to draw their own labs and have been able to identify students with elevated glucose, insulin levels and cholesterol. These determinations encourage parents to seek needed medical services for their children.

### Operation Fit Kids

2006 data shows that 22.3% of children in Montgomery County are overweight; an additional 17.4% are at risk for becoming overweight. In an effort to attack this problem, Cooperative Extension Service and the Montgomery County Health Department partnered with Mt. Gilead Elementary School to pilot a health and fitness program entitled "Operation Fit Kids" in the spring of 2007. Staff members from CES and the

Health Department visited the 5th grade classrooms and taught sessions on making healthier food choices.

The Physical Education teacher taught the importance of increasing physical activity. The classes competed to see which could walk the furthest during the program. During free time, students could check out pedometers and record their steps. The winning student walked 17.8 miles. The three classrooms walked a total of 724 miles. All 63 students participated in the walking program, and 89% walked at least 10 miles. The program is continuing with a new class in the Fall of 2007, and it is hoped to expand the program to other schools in the county in upcoming years.



*"This is a really great program and I hope that it can be continued."*  
~Mrs. Jordan, fifth grade teacher



*Staff during Mass Vaccination Clinic*

Schools. These mass vaccination clinics served as a public health preparedness and response training drill for the department. On July 26, 2007, members of the MCHD staff took part in a regional exercise; the scenario involved mass prophylaxis of postal workers who had been exposed to anthrax. This exercise allowed the participants to set up a POD, complete paperwork and measure throughput. In August, MCHD staff had an active role in the Castleberry recall—teams were formed and the county was divided into three regions. Staff visited stores and facilities that stocked canned items, looking for the Castleberry recalled products. The MCHD Preparedness Coordinator continues to reach out to the citizens of Montgomery County providing education and materials on preparedness.

## Preparedness

In 2007, the Montgomery County Health Department submitted a Pandemic Influenza Standard Operating Guide (SOG) to the NCPHP and GCDC. (North Carolina Public Health Preparedness-NC General Communicable Disease Control Branch). The Pandemic Influenza SOG was approved.

In February 2007, the MCHD staff administered a total of 155 doses of Menactra® vaccine to 11th and 12th grade college-bound students at East and West High

# New Initiatives in Montgomery County

**FIRSTFIT-** FirstFit is FirstHealth of the Carolinas' initiative to improve the overall health of its employees. The FirstFit kick-off at Montgomery Memorial Hospital in May 2007, featured fun, health-related activities, including jump-roping and hoola hoop contests, a nutrition seminar, and an ice cream social that featured low-fat smoothies. All employees received a pedometer and were encouraged to walk one of the new indoor or outdoor walking trails and to participate in the "walk-around-the-hospital" scavenger hunt. Today, you can see employees walking the trails, as well as eating healthy options served in the Hospital cafeteria. Healthy choices are always available, and employees can even special order grilled chicken any day. Price reductions for healthy food and drink choices, and increases for less healthy, will be coming soon. Employees are having fun doing their daily health tip featured on a monthly calendar. It can be anything from "walk the stairs" or "eat fruit for dessert" to "do 5 jumping jacks", and some are keeping a wellness diary. Employees also participate in the Employee Health Improvement Team (EHIP), which offers financial incentives for meeting wellness goals. Coming soon will be a weight-loss competition (similar to The Biggest Loser), an on-site fitness room for employees to use during their break times, physical enhancements to a stairwell to make walking stairs more fun, as well as additional seminars on wellness and fitness topics. For more information contact Ellie Wiles at [EWiles@firsthealth.org](mailto:EWiles@firsthealth.org).

**THE SPARROW PROJECT-** The Sparrow Project is a cardiovascular disease and stroke education prevention program targeting at-risk African Americans through the provision of a workshop based curriculum focusing on lifestyle change, with an emphasis on diet modification, exercise, and smoking cessation, which will be conducted through partnerships with local African-American churches. The Project started on July 1, 2006 and is the first multi-county, minority based CVD/stroke intervention proposed for the south central region of NC, a 13 county region with high rates of CVD and stroke. The project was conceived by the South Central Partnership for Public Health and is administered by the Robeson County Health Department. In Montgomery County, Revival Temple Church of God in Christ partnered with the Sparrow Project in December 2006. There are 19 participants included in the cohort. Through partnership with other community agencies, the Project has offered health screenings and a series of workshops on stroke, heart disease, exercise, nutrition and diabetes. Since partnering with the Sparrow Project, individuals in this church have lost a total combined weight of 149.4 pounds, 14 individuals had a lowered blood pressure, 8 individuals reported increased servings of fruits and vegetable intakes, and 10 individuals reported increased sessions of physical activity. For more information, contact Alice Stradford at [alice.stradford@co.robeson.nc.us](mailto:alice.stradford@co.robeson.nc.us).



*Revival Temple Church of God  
In Christ participants*

**REACHING OUT-** "Reaching Out" is a Kate B. Reynolds Charitable Trust grant-funded program with a target population of children and parents of refugee and immigrant populations. Both groups are present in Montgomery County, with the large influx of the Hispanic population, and the establishment of "Samthong Village" to house Laotian and Hmong refugees who were employed originally at McRae Industry. The grant encompasses 3 groups: the parents of the identified students at risk, the refugee and immigrant high school students at risk, and the teachers and faculty of the high schools in the county. The mental-health program works with the three groups in promoting better communication, enhancing and promoting self-esteem of students, and providing parents with the tools for parenting their children under current circumstances. For further information contact Barbara Bennett at [BBennett@firsthealth.org](mailto:BBennett@firsthealth.org).



**MARY G'S DIABETES AWARENESS OUTREACH-** Mary G's Diabetes Awareness Outreach formed in September 2006 to offer services to improve the lives of people affected with diabetes. The program provides education in the areas of testing, nutrition, exercise and weight control. Nine members have joined a walking group, and more are expected to participate. The program provides educational workshops on the prevention and management of diabetes and kidney disease. Diabetes testing supplies are provided for people with no insurance. For further information or to get involved, contact Mary Graves at (910) 974-7986.

**2G5 BRIDGING THE GAPS-** This faith-based initiative is comprised of five programs. Regal Remnant is geared toward 3rd-8th grade students and is designed to use biblical principles to create, enhance and promote true imaging. Gentlemen of Valor/Ladies of Virtue develops young males/females aged 13-19 by promoting physical, mental and spiritual achievement. The Life Proficiency Program empowers adults to resume positions in the family and community. The Core Health Program is a network of local churches and community organizations to create and promote a physical, mental, and spiritually healthy life for the neighborhood. For more information, contact [Cindy Taylor](mailto:Cindy Taylor) at (910) 571-0141.

