

Chatham County Community Assessment 2021



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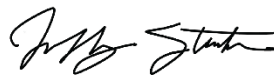
We appreciate the members of the Chatham Health Alliance who came together to review the data and prioritize issues, and who will work together to develop and implement collaborative strategies to address these priorities.

Finally, we are deeply grateful to the hundreds of Chatham community members who took the time to share their perspectives by completing the community survey and participating in Story Circles. They are the heart of the Community Assessment.

We hope that the report brings a better understanding of Chatham County, and we look forward to working with you to improve the health and well-being of those fortunate enough to call Chatham home.



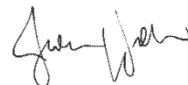
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Executive Summary

The Community Assessment is a collaborative effort between the Chatham Health Alliance, the Chatham County Public Health Department (CCPHD), and Chatham Hospital, in addition to community members throughout the county, with the goals of:

- Understanding the needs of the community
- Identifying factors that affect health and well-being in Chatham County
- Determining the availability of resources within the community to support optimal health for all

The results of this process are used to:

- Meet accreditation requirements for the CCPHD and Chatham Hospital
- Identify priority areas for Chatham Health Alliance
- Understand changes in community health over time
- Identify and understand any inequities between different populations in Chatham
- Improve services and supports to address community needs
- Pursue funding to support these services by a number of agencies and organizations

A primary source of data used in this Community Assessment is the Chatham County Community Survey, which gathers responses from a representative cohort of residents who reflect the adult population of the county. This survey was developed by the Chatham County Public Health Department and North Carolina Institute for Public Health, along with community members who participated in a Community Action Team organized by the Chatham Health Alliance. Data from this survey is complemented by numerous other sources, including contributions from community partners, qualitative data, and secondary data sources such as the U.S. Census.

Key Findings

Key themes and findings from the 2021 Community Assessment include:

- Historic and continued systemic racism persists in driving health inequities across nearly all facets of health and well-being in Chatham County.
- The COVID-19 pandemic affected nearly every area of health and well-being of Chatham County, mostly in a negative way.
- Priorities identified in the previous Community Assessment remain concerns, including access to health care, healthy eating and active living, and economic resilience. New topics also emerged as priorities, including mental health and substance use, transportation, and employment.
- Growth and development in Chatham County present both opportunities and challenges for the future.

Health Impact Priorities

Findings from the 2021 Community Assessment continue to highlight the importance of the Health Impact Priorities originally selected in 2018: Access to Comprehensive Health Services, Healthy Eating, Active Living (formerly Obesity), and Economic Resilience (formerly Poverty).

Access to Comprehensive Health Services

- More than 3 in 10 Chatham County households (**30.9%**) reported facing some kind of barrier to healthcare in 2021.¹
- As of 2020, **9.9%** of all Chatham County residents and **11.2%** of Chatham County adults do not have health insurance.²
- Some groups in Chatham County are much more likely to not have health coverage. That includes non-citizens (**58.2%**), foreign-born residents (**39.0%**), Hispanic/Latinx residents (**32.8%**), those living in poverty (**25.6%**), and those who worked less than full time in the past year (**25.3%**).²

- Approximately 1 in 11 Chatham County adults (**8.7%**) said they did not have a health provider they usually visited when they were sick or needed advice about their health.¹ That's a decrease from 2018 (**9.8%**).³
- Of adults who did not have a regular provider, almost half said this was because they did not have health insurance (**47.2%**).¹

Economic Resilience

- In 2020, Chatham County's poverty rate was **10.7%**, meaning that around **7,700** people in Chatham are living at or below the national poverty line. The national poverty rate was 12.8% and the state rate was 14.0%.⁴
- Black/African American and Hispanic/Latinx residents were nearly four times as likely to experience poverty in 2020 compared to the overall county average.⁴
- Nearly 1 in 3 Chatham adults report money as a primary cause of stress, while nearly 3 in 10 either agreed or strongly agreed that Chatham County has good economic opportunities for them.¹

Healthy Eating, Active Living (formerly "Obesity")

- More than 1 in 3 Chatham County adults (**34.1%**) say that they have ever been told they are overweight or have obesity¹, an increase from 28.8% in 2018.³
- Nearly 1 in 3 Chatham County high school students (**32.1%**) were either overweight or had obesity in 2019.⁵
- More than 1 in 8 Chatham County households (**12.8%**) reported that they worried that they would run out of food before they had money to buy more within the past year.¹
- Many Chatham County adults cite convenience (**41.3%**), cost (**17.3%**), or not having enough time to shop for or prepare

healthy foods (**18.9%**) as a reason they do not eat healthy snacks and meals.¹

- More than half of Chatham County adults (**53.7%**)¹ and around 1 in 4 Chatham high schoolers (**23.1%**)⁵ report spending at least an hour doing physical activity in a day.
- Many Chatham County adults cite not having time (**36.7%**) or being too tired (**30.5%**) as barriers to physical activity.¹

2021 Priority Topics

The Chatham Health Alliance highlighted three topic areas to be the focus of strategic planning within their subcommittees for the next planning and implementation cycle: mental health and substance use, transportation, and employment.

- Mental Health and Substance Use:
 - Several key mental health indicators worsened in results from the 2018 CCCS to the 2021 CCCS, including the percentage of residents reporting "high" day-to-day stress levels (**9.1% to 10.7%**), "fair" or "poor" self-reported mental health (**7.4% to 11.3%**), and ever having anxiety or depression (**20.1% to 33.3%**).¹
 - **7%** of Chatham County adults reported increased use of drugs or alcohol as a result of the COVID-19 pandemic.¹
 - Unintentional overdose death rates have increased substantially in Chatham County in recent years.⁶
- Transportation:
 - **1 in 6** adults in Chatham County reported that there were no sidewalks where they needed to walk as a barrier to transportation, including **1 in 4** Hispanic/Latinx adults.¹
 - **95%** of adults in Chatham County usually use a car or truck to get around, but in some areas of the county, up to **5 to 7%** of households do not have a car.^{1,7}
- Employment:
 - **55.6%** of employed Chatham County residents work outside of the county, compared to 28.5% of North Carolina

workers overall who work outside of their home counties.⁸

- The median household income for White, non-Hispanic/Latinx residents is **1.6 to 2.7 times higher** than other demographic groups in the county.⁹
- Loss of employment or switching jobs was a factor for many who reported not having health insurance at any point in the past year.¹

Next Steps

Following the publication of this report, the data and findings will be shared with community members and organizations throughout the county. The Chatham Health Alliance will lead the development of Community Health Improvement Plans (CHIPs) which outline strategies for addressing the priority topics that emerged from this assessment. These plans will be completed in Fall 2022. CCPHD, Chatham Hospital, and other organizations will also use these findings to inform their strategic plans.

Chapter 1: Background

Overview

The 2021 Chatham Community Assessment (CA) is the culmination of over a year of collaboration between community members and organizations to identify and understand the needs, challenges, strengths, and opportunities that exist in Chatham County, and what we can do together to improve health and quality of life for all. This process is used to establish Health Impact Priorities (HIPs) for the next three years and will inform action plans to address these priorities. The CA brings in data from numerous sources to serve as a central resource and help local agencies and organizations working on these issues to plan and coordinate their efforts and ensure that the most pressing community concerns are being addressed.

The North Carolina Division of Public Health requires local health departments, including the Chatham County Public Health Department (CCPHD), to conduct a Community Health Assessment (CHA) every four years to maintain accreditation. Chatham Hospital, as a tax-exempt hospital, is required under the Patient Protection and Affordable Care Act to complete a Community Health Needs Assessment (CHNA) every three years to meet Internal Revenue Service (IRS) requirements. This document fulfills the requirements for both organizations, and assessments will continue to be conducted every three years to align these efforts.

The 2014 Chatham Community Health Assessment was the first CHA conducted as a collaborative effort between CCPHD and Chatham Hospital. In addition to satisfying mandated requirements for both organizations, collaborating on the assessment added expertise and credibility to the process while creating synergy and avoiding duplication of efforts.

The Chatham Health Alliance (Alliance) was established in March 2015 as an extension of the 2014 CHA Steering Committee. The Alliance is a collaborative of local professionals and residents working together to improve health in Chatham County, with a focus on the health priorities identified through the assessment process.

Recognizing that the conditions in which people live, work, play, and pray impact community health and well-being, the 2018 CA approach was purposefully expanded to encompass this broader view and has since been known as simply as a Community Assessment.

The 2018 CA also introduced a powerful new tool of understanding community needs and opinions through the development of a representative cohort, which reflects the population and demographics of Chatham County adults. Cohort members have offered valuable insights into health and well-being in Chatham County by participating in annual surveys since 2018, including the 2021 Chatham County Community Survey. The cohort was expanded in 2021 to gain better representation of racial/ethnic minorities in the county and allow for disaggregation by race/ethnicity, age, and other factors in order to best understand the diverse experiences of all Chatham County community members.

The 2021 CA seeks to capture data on a range of factors, including housing quality, healthy food access, experiences with racism and discrimination, financial and educational attainment, and access to healthcare, among others, in recognition of the impact of these factors and others, known as social determinants (or social drivers) of health; many health outcomes are driven by a combination of social and economic factors, health behaviors, and the physical environment, which means these issues are crucial to understand and

address in order to improve health and well-being for all. This assessment particularly seeks to understand the “why” behind many health outcomes by exploring barriers to accessing health care and other services, as well as other challenges residents face around health and well-being.

Community Assessment Process

Planning the Process

Planning for and implementation of a community assessment is a cyclical, multi-year process, building from the challenges, successes, and lessons learned from previous assessments. The planning process for the 2021 CA was heavily impacted by two new challenges: 1) Chatham County government experienced a cyber attack in October 2020, which limited access to servers, documents, and communications until systems came back online fully around January 2021, and 2) the COVID-19 pandemic raised new barriers to previously successful components of the community assessment process, such as door-to-door survey collection. Additionally, many partners involved in the 2021 CA process, including CCPHD, Chatham Hospital, the Alliance, and other community partners were primarily focused on distribution of COVID-19 vaccines and other pandemic response efforts that occurred at different times throughout the process. Despite these challenges, collaborative efforts allowed for a successful and robust 2021 CA process, though with a few adaptations to meet the unique circumstances.

Planning began in earnest in the spring of 2021, with roles and contributions of different partners established and the development of focus areas for the 2021 CA process, including a renewed commitment to ensuring the process was community-led, as well as identifying and understanding inequities between different populations within Chatham County.

Cohort Survey

During the summer months of 2021, the protocol for the representative, longitudinal cohort survey, which serves as the cornerstone of the Chatham County CA process, was revisited and opportunities to strengthen the methodology were identified; a revised protocol was developed under the guidance of the NC Institute for Public Health (NCIPH). These revisions centered on expansion of the sample to gain better representation of racial and ethnic minorities, as well as to adapt to changes in data collection necessitated by COVID-19. These changes were reviewed and assessed by the Scientific Advisory Committee (SAC) to ensure that the cohort was conducted in an ethical and methodologically sound manner. Further information about this sampling process can be found in the Data Collection Process chapter and a list of SAC members can be found on the Contributors List.

Simultaneously during summer 2021, the Alliance led the recruitment of a Community Action Team (CAT), which met several times to review and edit the Chatham County Community Survey (CCCS) to ensure that the survey covered topic areas relevant to

A representative longitudinal community cohort is a group of residents that reflects the demographic composition of the community and is followed over time to track changes in the broader community.

community members and that the wording and organization of the survey was accessible to all. Members of the CAT reviewed the survey and removed, added, and edited questions. Additional staff and Alliance members contributed to the survey development as well.

Data Collection and COVID-19 Adaptations

Data collection began in the fall of 2021, when existing and new cohort members were contacted with a series of invitations to fill out the CCCS. Participants were contacted via a series of mailers, phone calls, and emails, when possible. In late September, the decision was officially made to eliminate door-to-door surveying in light of the projected increase in COVID-19 cases at that time. NCIPH and the SAC were consulted to expand data collection efforts in a methodologically-sound manner. Between October and December 2021, 394 surveys were completed, an increase from the 367 surveys collected 2018. All newly sampled participants were invited to join the cohort and will receive additional surveys moving forward; this is a crucial component to ensuring the longevity and quality of the cohort. Participants also received a \$20 Visa gift card as a thank you for their time.

At this time, efforts were also underway to collect CCCS Supplemental Surveys, which were open to all members of the Chatham County community and consisted of four questions from the larger CCCS. The Alliance led the collection of these surveys through community partners, resulting in approximately 200 responses; the survey was also advertised through the Chatham News + Record and other channels, including their Spanish-language La Voz publication.

Qualitative data was collected through a series of community Story Circles held throughout the county, where participants were invited to

share personal narratives about their lives and experiences in Chatham County. This qualitative data added depth and nuance to the findings of the CCCS and other quantitative data sources; themes from these conversations are highlighted throughout this report. Further information about Story Circles can be found in the Data Collection Process chapter.

Data Analysis and Prioritization

Data collection was finalized at the end of the year in 2021; at the start of 2022, NCIPH led the analysis of the CCCS data, including disaggregation by race/ethnicity, age, gender, and other factors wherever possible. Qualitative data team members compiled themes from the Story Circles, including returning to original Story Circle participants to review, discuss, and verify the presentation of the established themes. Additionally, secondary data from various sources, including the 2019 Youth Risk Behavior Survey, U.S. Census, American Community Survey, and local reports were compiled and synthesized with the CCCS data around report topic areas. Subject matter experts from partner organizations were asked to use this data to draft sections of this report.

Throughout early 2022, the Alliance also convened a Prioritization Task Force, which met several times to develop and implement the process for reviewing data to select the Health Impact Priorities for the next three years. Further information about the prioritization process and the selected HIPs can be found in the Health Impact Priorities chapter.

This report was developed in spring 2022 and was reviewed and approved by the Chatham County Board of Health and Chatham Hospital Board of Trustees. It was submitted to the N.C. Division of Public Health and the IRS in June 2022. The next step in the CA process is to

disseminate the findings to community members and organizations throughout the county. CCPHD, Chatham Hospital, and the Alliance, along with other community organizations, will use these data and findings to inform strategic plans moving forward and continue to collaborate to work towards improving health and well-being for all in Chatham County.

Equity and Systems Focus

A commitment to equity was an organizing principle in conducting the Community Assessment, both in informing understanding of disparities in health outcomes and in the process itself. Historic and continued systemic racism, disenfranchisement, and disinvestment in some communities drives health inequity in almost all areas explored in this assessment. Recognition that these issues are intertwined and driven by common systemic factors informs analysis of health outcomes and corresponding strategic plans developed to address them.

The community assessment process is an important tool in the pursuit of health equity in Chatham County. It helps us to not only understand the overall health of our population but to identify these health disparities in our community and the drivers behind them, such as poverty, employment, educational attainment, income inequality, housing stability, access to public transportation, exposure to violence, and racial and ethnic discrimination that contribute to disparate health outcomes. The collection of data is the first step to addressing those issues.

To improve our ability to assess and understand health disparities and their drivers in our community, two objectives were prioritized for the 2021 Chatham County Community Assessment process.

1. **Expand the cohort to allow for a breakdown of the survey data based on demographic categories** like race, ethnicity, age, gender, and more. By having data that can be delineated by those demographics, we can better identify disparities between different populations in Chatham that can be obscured by overall outcomes for the county. To accomplish this, the CCPHD worked with the North Carolina Institute of Public Health to revise the existing methodology to recruit an expanded cohort by adding census blocks which had a higher proportion of Black/African American and Hispanic/Latinx residents.

In 2018, recruitment was conducted through in-person conversations and a mail campaign. Surveys were collected online, by mail, or by door-to-door surveyors, which addressed barriers like literacy levels and lack of internet access. Because the surveys returned via the internet and mail skewed white, female, and upper-income, the door-to-door data collection was a critical strategy for engaging a diverse and representative cohort.

But due to COVID-19, door-to-door data collection was not feasible. As a result, mail and email communications were paired with direct phone outreach using voter registration data. Sampled households were contacted by phone after surveys were sent by mail, and a phone line was staffed with bilingual staff to assist people with completing the survey by phone.

The expanded sample and innovative recruitment strategies were successful. Cohort demographics closely mirrored the racial and ethnic makeup of Chatham County and breakdowns by race/ethnicity, age, gender, and more were possible; these

analyses are highlighted throughout the report.

2. **Create more opportunities for community members to lead the community assessment process.**

A community assessment is not simply a survey. At its best, it is a process of partnering with the community to achieve health equity that starts before data collection and leads to collective action. For the 2021 Chatham County Community Assessment, several strategies were pursued to foster this deeper and sustained engagement.

- In the summer of 2021, the Chatham Health Alliance Equity Subcommittee led an effort to establish a Community Action Team to inform and shape the assessment process, beginning with the development of the survey questions. Community members participated in a series of meetings to review the draft survey. During these meetings, the community members helped to rewrite questions, made suggestions for adding or deleting questions, reviewed and modified answer choices, and approved final wording of the survey that included their recommended changes.
- In response to feedback from community partners, a supplemental short-form survey was created to allow participation

from community members who were not sampled for the cohort. The survey was administered at Chatham Health Alliance Community Hubs and made available through community-based organizations in the county. Approximately 200 responses were collected through community partners, Hubs, Story Circles, and other direct outreach.

- Between October and December 2021, five Community Story Circles were held throughout the county. The Story Circle process is a democratic process for sharing personal experiences in small groups. It is not just a qualitative data collection technique but a space for fostering relationships, trust, and dialogue. The Story Circle approach was adopted as a means of engaging community members in a conversation that was iterative and open-ended. The themes shared in each circle were compiled and incorporated into the report.

Additionally, the Chatham Health Alliance and its members are aligned around a vision of “an active, thriving community for all- a Chatham where residents of all races, religions, ethnicity, sexual orientations, and/or gender identities achieve optimal health,” which informs the prioritization of health topics

Defining Health Equity and Disparities: “Health equity means everyone has the opportunity to attain their highest level of health...*Inequities* are created when barriers prevent individuals and communities from accessing these conditions and reaching their full potential. *Inequities* differ from *health disparities*, which are differences in health status between people related to social or demographic factors such as race, gender, income, or geographic region. Health disparities are one way we can measure our progress toward achieving health equity.” –American Public Health Association

identified in this report, as well as the strategic plans developed to address those priorities. The Alliance maintains a standing Equity subcommittee which provides support for internal equity activities of the organization, in addition to consultation and expertise in program planning and implementation for all Alliance work around health priorities. Together, the Alliance, Community Assessment partners, and community members will strive to use the community assessment process and findings to work towards an equitable future for all Chatham County residents.

Chapter 2: County Description

Historical and Geographic Overview

Chatham County was founded on April 1, 1771, taking its name from the Earl of Chatham, William Pitt, who served as the Prime Minister of Great Britain from 1766-1768. Pittsboro, the county seat, was established 16 years later. The two other incorporated towns in Chatham County are Siler City and Goldston, established in 1887 and 1907, respectively.²⁰

The county is located near the center of North Carolina and shares borders with Durham, Orange, Alamance, Wake, Harnett, Lee, Moore, and Randolph counties. Chatham's proximity to major cities like Raleigh, Durham, and Cary make it an attractive location for both residential and economic growth, which is already underway (see "Population" section).

Pittsboro is in the center of the county and is home to most county government offices and the central office for Chatham County Schools. It is also the location of Chatham Park, a major residential and commercial development that is projected to bring 60,000 residents to the town over the next 20 years.

Siler City is located seventeen miles west of Pittsboro and is the largest municipality in Chatham County. Goldston is in the southwestern portion of the county and is the smallest incorporated town in Chatham. The Town of Cary has annexed a small portion of the

eastern part of Chatham County. The rest of the county, including communities such as Moncure in the southeast and Silk Hope in the northwest, are unincorporated.

County Governance

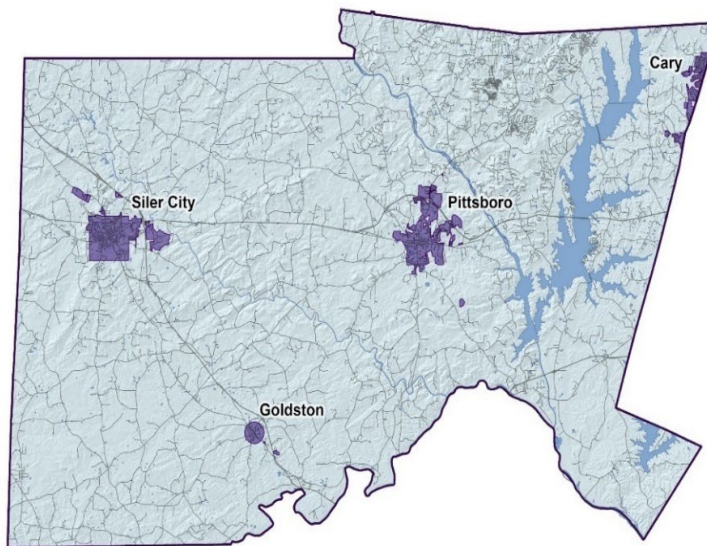
The Chatham County government is overseen by a five-member Board of Commissioners which are elected by county residents. Each of the five members represents a separate district in the county but is voted on by all residents. The Commissioners appoint a County Manager to oversee day-to-day operations of the County government, including personnel and budget oversight. The Board of Commissioners is also

FIGURE 1: CHATHAM COUNTY, NORTH CAROLINA



SOURCE: CHATHAM COUNTY GIS

FIGURE 2: MUNICIPALITIES IN CHATHAM COUNTY



SOURCE: CHATHAM COUNTY GIS

responsible for appointing the County Attorney, Clerk to the Board of Commissioners, and the Tax Administrator.

The County Manager serves as the head of most county operations. While the Manager only hires about one-third of the county department heads, they work closely with all department heads as the County is often responsible for funding some of or all their budgets. Some departments receive oversight from appointment boards or committees; for example, the Public Health Department is overseen by the Chatham County Board of Health, and the Department of Social Services is overseen by the Chatham County Board of Social Services.

The Board of Commissioners has general authority over county policies, while several other boards have authority over specific policy areas, such as the Board of Health, Board of Social Services, Board of Elections, and Soil and Water Conservation District Board. The Board of Commissioners appoints all members of the Board of Health and makes some of the appointments to the Board of Social Services, but neither the Board of Elections nor the Soil and Water District Conservation Board have any commissioner appointments.

The County government provides direct services to residents in several areas, including Central Permitting and Inspections, Elections, Emergency Management, Environmental Quality, Library, Parks and Recreation, Public Health, and Solid Waste & Recycling. As previously mentioned, county offices are mostly located in Pittsboro, but departments like Public Health and the Library have locations in other parts of the county. County governments in North Carolina do not have any responsibility for roads or bridges.

Chatham County contributes funds to the K-12 public education system and community college system in the county. The Chatham County Schools public school district is

governed by its own elected board. Central Carolina Community College (CCCC), which has two campuses in the county, is governed by its own appointed Board of Trustees. The county budget for Fiscal Year 2021-22 set aside more than \$55 million for Chatham County Schools and more than \$3 million for CCCC.¹¹ The county's funding provided 33% of the school district's budget.¹²

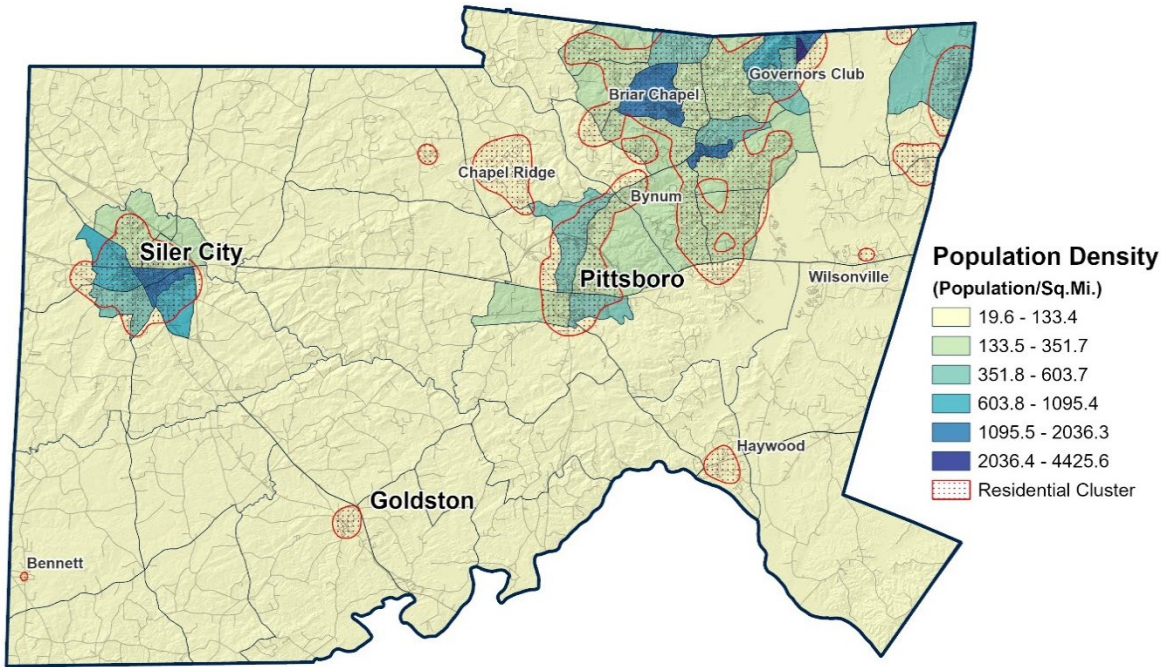
Population

The most recent U.S. Census data shows the population growth Chatham County has experienced in recent years. As of April 1, 2020, 76,285 people lived in Chatham County, an increase of more than 20% from the 2010 Census.¹³ Chatham County is the 36th largest county in North Carolina by population but had the 7th highest rate of population growth of all counties between 2010 and 2020.¹⁴ This growth is covered in greater detail in the Development/Rural Preservation section.

Chatham County's population is 82.2% White (including 72.1% who are White, non-Hispanic/Latinx), 12.4% Black/African American, 12.1% Hispanic/Latinx, 2.2% Asian, and 1.2% American Indian/Alaska Native. Additionally, 52.2% of county residents are female. Approximately 14% of the county's residents 5 years of age and older live in a home where a language other than English is spoken.¹³ According to the 2021 Community Survey, 3.3% of adults in Chatham County identify as LGBTQ+.

Chatham County has a relatively high proportion of residents aged sixty-five and older; approximately 25% of residents are sixty-five and older, compared to around 16% of the state and country populations, respectively. Around 20% of residents are under eighteen, including 4.9% under the age of five.

FIGURE 3: POPULATION DENSITY BY CENSUS BLOCK GROUP AND RESIDENTIAL CLUSTERS IN CHATHAM COUNTY



SOURCE: CHATHAM COUNTY GIS

Chapter 3: Data Collection Process

Chatham County Community Survey

The Chatham County Community Survey (CCCS) was conducted using the Community Assessment (CA) cohort, which was initiated in 2018 through a structured protocol approved by CCPHD and the Scientific Advisory Committee (SAC). The original cohort was designed using a stratified cluster sampling scheme, conducting a two-stage cluster sample in each of three strata of census blocks apportioned into low, middle, and high median household income, as measured at the census block group. By fall 2021, the 341 households represented in the original cohort had declined to 244 remaining households.

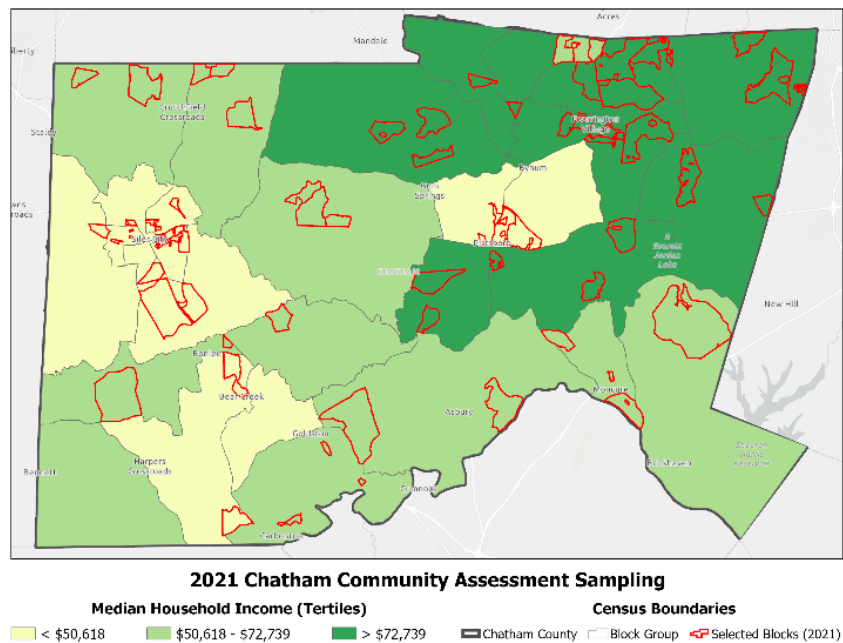
The CCCS was an opportunity to revisit the original sampling scheme and modify the sampling scheme to reflect recent changes in the Chatham County population using the most current data available from the U.S. Census Bureau. Additionally, CCPHD wanted to expand the cohort to replace those lost to follow-up and to recruit more participants for better representation from Black/African American and Hispanic/Latinx community members. CCPHD, NCIPH, and the SAC collaborated to modify the sampling design to incorporate these proposed changes to the cohort.

Cohort Sampling Modifications

The sampling methodology was modified first to account for changes in the median

household income across census block groups in Chatham County using the 2019 American Community Survey 5-year estimates. Using this data, the census blocks were grouped into three categories (tertiles) representing the 33rd and 66th percentiles of the median household income distribution across census blocks, representing low income (\$20,676 - \$50,617), medium income (\$50,618 - \$72,739), and high income (\$72,740 - \$129,079). The originally selected 61 census blocks were apportioned into these categories. To ensure an even number of census blocks in each stratum and to

FIGURE 4: 2021 CHATHAM COMMUNITY ASSESSMENT COHORT CENSUS BLOCK SELECTION, BY ECONOMIC TERTILE.



expand the CA cohort, 15 additional census blocks were selected for a total of 76 census blocks included in the CA cohort sampling. The additional blocks were selected with probability proportionate to the Black and Hispanic or Latino population, based on 2020 Decennial Census population estimates adapted to existing census block boundaries. The final selection of census blocks is shown in Figure 4. For each newly sampled census block 7 households randomly sampled from residential address data, and for the originally sampled blocks with existing cohort members,

replacement households were randomly sampled and added as necessary within each block to obtain a total of 7 households in each block.

CCCS Administration

In fall 2021, given a surge in COVID-19 and elevated community transmission, the decision was made to forego in-person data collection and reach out to cohort members through mail, phone, and email. Phone number, preferred mailing address, and emails were available from the existing cohort members. For the newly selected households the residential address from Chatham County tax parcel data was used for mailing and phone numbers, for matching addresses, were appended based on the most recent (October 2021) N.C. voter registration data from the N.C. State Board of Elections, as available.

In-person surveying has traditionally been a critical method to collect responses for the CA cohort. With the resampling and new additions to the cohort, a low response rate, in the absence of in-person surveying, was anticipated. To account for this, each of the clusters were oversampled by four times the original selection, with an oversampling from 7 to 28 households. For selected clusters with less than 28 households, all were selected as part of the oversample. With the oversampling the total number of 1,860 households.

Households were contacted with two mailings – a postcard followed by a mailed survey packet containing information about the CCCS, a paper copy of the survey, and a pre-addressed stamped envelope to mail the completed survey back to CCPHD. A total of 834 selected households had at least one phone number identified either through existing cohort

records or through an address match with the voter information. Each of these households received at least one phone call in addition to the mailed contacts. Additionally, 177 of the existing cohort members provided an email address and receive email notifications about the survey. All communications and the CCCS were available in both English and Spanish, and existing households who indicated Spanish was the primary language spoken in the home received all communications in Spanish.

The CCCS was open for a total of 8 weeks, from October 18, 2021 to December 10, 2021, and 394 eligible responses were received through online survey, mailed hardcopy survey, and phone interview. Individual and household weights were constructed for each response based on the inverse probability of selection based on the sampling methodology. The full CCCS results can found as an appendix to this report.

TABLE 1: CCCS RESPONSES BY METHOD, 2018 AND 2021

| Response Type | 2018 CCCS Responses | 2021 CCCS Responses |
|---------------|---------------------|---------------------|
| Drop-off | 0 | 4 |
| Mail | 22 | 239 |
| Online | 42 | 146 |
| Phone | 0 | 5 |
| In-Person | 303 | 0 |
| Grand Total | 367 | 394 |

Supplemental Survey

In addition to the cohort survey, a short supplemental survey was offered to all members of the Chatham County community as an opportunity for those not selected as part of the sample to participate and share thoughts about their experiences with health and well-being in Chatham County. The questions were selected from the larger CCCS by the Alliance Prioritization Task Force and the full survey can be found as an appendix to this report.

Responses were gathered throughout the county by several partners, including at Chatham Hospital, the CORA food pantry, the CCPHD Siler City clinic, Alliance Resource Hubs, and Story Circles. Partners were provided with secure lockboxes and privacy envelopes for participants to submit their responses, as many were set up in lobbies and other public settings. CCPHD and Alliance staff collected and entered supplemental surveys, which were analyzed with the assistance of the NC IPH. Overall, 207 responses were collected from October to December 2021. Full results from this supplemental survey can also be found as an appendix.

Qualitative Data: Chatham Talks Community Story Circles

Qualitative data is a vital component of the community assessment process, which allows for community discussion and sharing of opinions, thoughts, and narratives in community members' own words. Past Community Assessments have utilized traditional focus groups to gather qualitative data; for this Assessment, the Story Circle method was used, as this approach centers personal narrative and the members of the conversation are encouraged to define their own themes as a group.

Story Circles have been used in community-organizing, healing, and art-making in many settings for decades. The Story Circle method employed for this community assessment was developed by John O'Neal and the Free Southern Theater. The process is based on four guiding elements or principles:

1. Participants sit in small group arranged in a circle, all facing one another. The shape of a circle puts everyone on an equal playing field with equal access to one another.
2. Each person is given equal time to speak. During that time, no one interrupts or gives

input but listens. If a person chooses not to speak or not use all of their time, the remainder is spent in silence for personal reflection. It is a democratic process where everyone gets the same amount of time and same chance to share.

3. Each person shares a personal story in response to a prompt, hence the name "Story Circles." Instead of sharing opinions like in a focus group, these stories mean sharing experiences and feelings.
4. After stories are shared in response to the prompt, participants pick out themes and similarities, not details. Story Circles are designed to be safe and confidential, allowing participants to share honestly and commonalities to be found.

For more information about the Story Circle facilitation process, see the Story Circle appendix to this report.

Five Community Story Circles were completed in Pittsboro, Moncure, Siler City, and Apex with more than 30 Chatham County residents. One Story Circle event was conducted in Spanish.

One prompt was used per Story Circle, though conversations expanded beyond the prompted topics. The prompts used were:

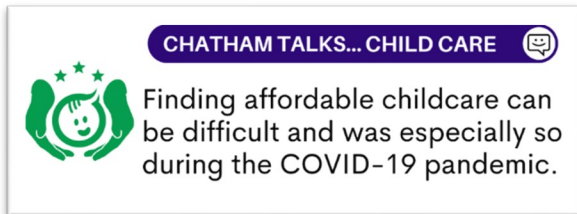
- Tell a story about feeling connected or isolated as a resident of Chatham County
- Tell a story about how COVID-19 affected your sense of home in Chatham County

After participants shared their stories, facilitators guided discussion among the group about the themes, shared experiences, differences in experiences, and the context that emerged from the conversation.

The themes defined by participants from each event were then compiled and synthesized by a team from the Chatham County Public Health Department to pull out common ideas from across the different events. Story Circle

participants were invited to join one of three follow-up sessions to review and validate the compiled themes. These themes are integrated throughout the report in the text accompanying the quantitative data and in callouts that look like this:

These sources serve to complement the data collected through the CA process, offering detail, depth, and nuance on the issues relevant to health and well-being in Chatham County. A list of references for all data sources can be found at the end of each chapter.



Additional Sources

In addition to the data gathered for this assessment through the 2021 Chatham County Community Survey, Supplemental Survey, and Story Circles, data from many other local, state, and national sources were used, ranging from reports community-based organizations to national surveys such as the U.S. Census and American Community Survey. County-level data is presented wherever possible, including from local sources such as the Chatham County Comprehensive Plan, the Chatham County Aging Plan 2018-2023, and more. The State Center for Health Statistics also offers a wide range of county-level data for the entire state, including many vital statistics.

The Youth Risk Behavior Survey (YRBS) provides detailed information on a range of topics related to the health and safety of middle school and high school students and is conducted at the state and national level, as well as in some localities and municipalities around the country, including Chatham County. Chatham County Schools' participation is supported by the CDC's Whole School, Whole Community, Whole Child (WSCC) pilot project through the North Carolina Department of Public Instruction, which the county is part of along with several others in the state.

Chapter 4: Health Impact Priorities

Overview

The quantitative and qualitative data that is collected and analyzed as part of the Community Assessment is used to identify the top health priorities affecting Chatham County. The Chatham Health Alliance organizes subcommittees around these topics and will focus its work and resources on these priorities for the next strategic planning period.

Prioritization happens at the culmination of each Community Assessment, every three years. Members of the Alliance and Chatham Community Members are invited to participate in the prioritization process. This prioritization process began with a Task Force of Alliance members that came together to review initial data, discuss avenues for community input in the process, and plan the prioritization meeting.

The Task Force first discussed how to change or update the current health priorities: Access to Comprehensive Health Services, Healthy Eating and Active Living, and Economic Resilience. Due to the short 3-year timeframe of the Community Assessment process and the fact that the COVID-19 pandemic rerouted a lot of the community's and Alliance's focus and efforts, it was decided that keeping the current three health priorities and prioritizing strategic areas of focus would be the best course of action for this round of the Assessment and prioritization process. The specific language of their proposal is below:

"The current Alliance subcommittees/health priorities will stay as they are. Once the data is analyzed and reviewed, if a new subcommittee/health priority is needed, one can be created. This decision is only for this prioritization year, and not binding for future Alliance prioritization."

In addition to the health priorities identified through the prioritization process, the Chatham Health Alliance has a standing Equity Subcommittee. This group serves to grow and promote equity in the Alliance, in Alliance programs, and publications through review, training, and member engagement. The Equity Subcommittee serves to engage with other subcommittees to ensure equity is at the forefront of planning and implementation of Alliance work, and to provide expertise and support to other Alliance members and committees.

The prioritization meetings took place on Tuesday, May 3rd, 2022 and were scheduled for the morning and evening to increase accessibility of these meetings. Also, to help increase accessibility of the meetings, participants could choose to join in-person or virtually, could bring children, and Spanish translation and interpretation was provided.

During the meeting, an overview was given about the Chatham Health Alliance, the Community Assessment, and the prioritization process; data collected in the CA was highlighted, as well as data presented by Alliance member agencies and partners. The full presentation can be found as an appendix to this report. Meeting participants then broke into small groups with representation from different agencies with different topic area expertise to identify their top three choices. The top three choices overall based on group votes were chosen as the priorities for the strategic planning process. Those strategic priorities are:

1. Mental Health & Substance Use (9 group votes): Several key mental health indicators worsened in results from the 2018 CCCS to the 2021 CCCS, including the percentage of residents reporting "high" day-to-day stress levels (9.1% to 10.7%), "fair" or "poor" self-reported mental health (7.4% to 11.3%), and ever having anxiety or depression (20.1% to 33.3%). YRBS results

from 2019 also indicated that youth in Chatham County are experiencing high levels of depression and other mental health stresses. Women and residents of color were disproportionately affected. Substance use and access to services were also concerns, particularly the sharp increase in unintentional overdose death rates in recent years. For further information, see the Mental Health and Substance Use sections.

2. **Transportation (5 group votes):** Issues with transportation can limit access to many services, activities, and opportunities, such as work, physical activity, healthy food stores, and health care. In many parts of the county, access to a vehicle is crucial; additionally, Chatham County has just one public transportation service, which many residents reported not knowing about or felt was not convenient for their needs. Sidewalks were a common topic of concern in the 2021 CCCS, with 16% of adults saying there were no sidewalks where they needed to walk, including 26% of Hispanic/Latinx adults. For more information, see the Transportation section.
3. **Employment (5 group votes):** Employment is a cross-cutting issue that is intertwined with many other health priorities. While Chatham County has a relatively low unemployment rate (3.6% as of March 2022), more than half of Chatham County workers work outside of the county (55.6%), according to the U.S. Census. Average weekly wage in the county is \$839, compared to the state average of \$1,111, as of Q3 2021. There are also stark disparities in median household income within the county, with White, non-Hispanic/Latinx residents making 1.6 to 2.7 more per year than other demographic groups, according to the U.S. Census. Loss of employment or switching jobs was also a factor for many who reported not having health insurance

in the 2021 CCCS. For more information, see the Employment and Income section.

Access to Comprehensive Health Services

Access to comprehensive health services, including physical health services, mental health services, and other support services and resources, are hugely impactful on the health of an individual and the community as a whole. Lack of access due to cost, insurance status, language, or other barriers ranging from complex referral systems to lack of available services altogether can prevent many from attaining their best health; this access is also unequal among all members of the community, which can create or worsen existing health disparities. More than 3 in 10 Chatham County households (30.9%) faced some barrier to healthcare in 2021, especially primary care and dental care.¹⁵ This section will provide updates on measures related to health services in Chatham County and work done by the Chatham Health Alliance since the last Community Assessment in this area.

Health Insurance

Nearly 1 in 10 (9.9%) in Chatham County do not have health insurance coverage, slightly more than the percentage of uninsured in the United States (8.7%); around 1 in 9 Chatham County adults (11.2%) do not currently have health insurance. Some groups have far less access to this crucial benefit—among the populations with the highest uninsured rate:

- Non-citizens: 58.2%
- Foreign-born residents: 39.0%
- Hispanic/Latinx residents: 32.8%
- Those below 100% of the poverty line: 25.6%
- Those who worked less than full time in the past year: 25.3%¹⁶

Of Chatham County adults who report not having a regular health care provider, almost half say they do not have one because they

don't have health insurance (47.2%) or their insurance is not taken by their preferred provider (15.2%). Nearly 1 in 5 Chatham County adults (18.1%) said the county should focus on more affordable healthcare to improve health and quality of life in the community, with around 1 in 6 (15.4%) saying more affordable health coverage/insurance should be a focus.¹⁷

Healthcare Providers

Less than 1 in 11 Chatham County adults (8.7%) said they did not have a health provider they usually visited when they were sick or needed advice about their health. This is a decrease from 2018 (9.8%), which is a positive change. Of adults who did not have a provider, almost half said they did not have one because they did not have health insurance (47.2%), while more than 1 in 3 said they went to urgent care or the emergency room if they were sick (35.9%). It takes the average Chatham County

adult 19.4 minutes to travel to a health care provider if they have one.¹⁵

Four in five Chatham County adults (80.0%) said it has been less than a year since they visited a doctor for a routine checkup, with another 12.0% saying it had been 1-2 years. Many residents reported not visiting a doctor's office recently due to concerns over the spread of COVID-19. Nearly 7 in 10 Chatham adults (69.2%) said it had been less than a year since their last trip to a dentist for a routine checkup or cleaning.¹⁵

More than 1 in 5 Chatham County households (20.5%) reported seeking mental health services at some point while living in the county. Of those, more than 7 in 10 found them available (74.4%), but only 36% described them as easy to find and 26% called them affordable. Additionally, some Chatham households have sought help for alcohol (2.9%), drug (1.3%), or

FIGURE 5: BARRIERS AMONG ADULTS WITHOUT A REGULAR HEALTH PROVIDER IN CHATHAM COUNTY, 2021¹⁵

Not having health insurance is the top barrier to having a regular health provider for adults in Chatham County.

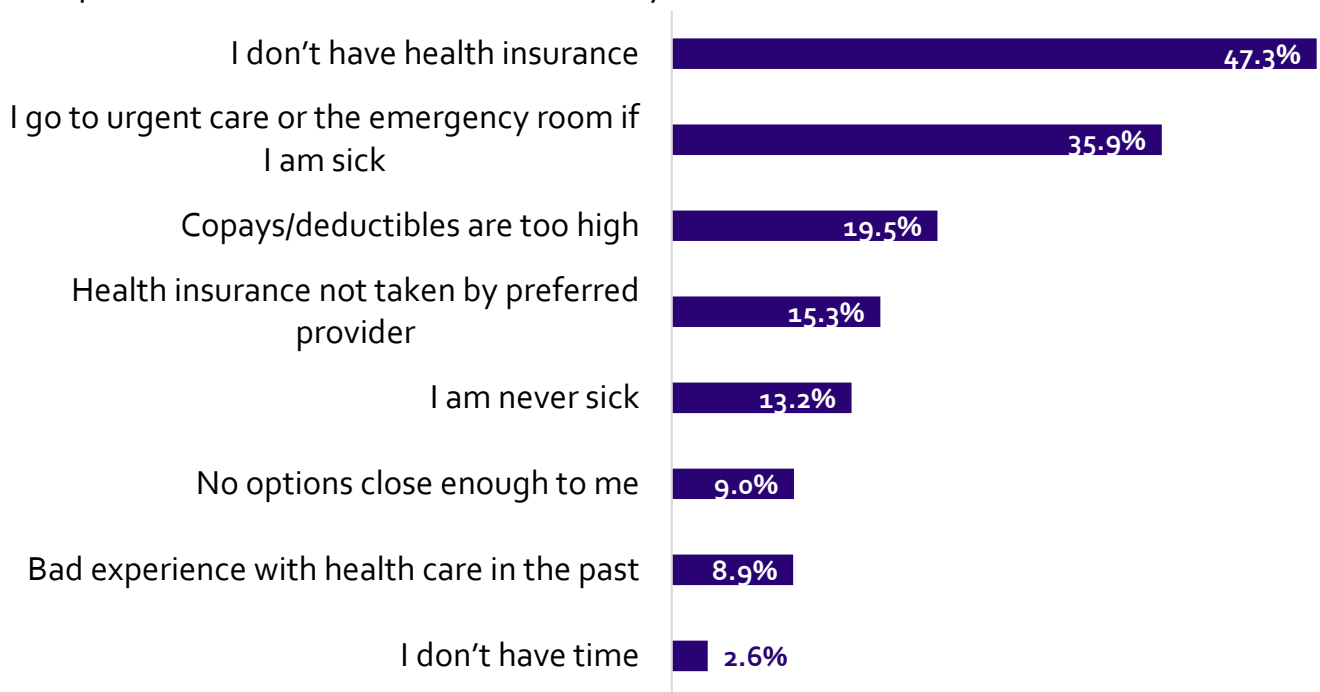
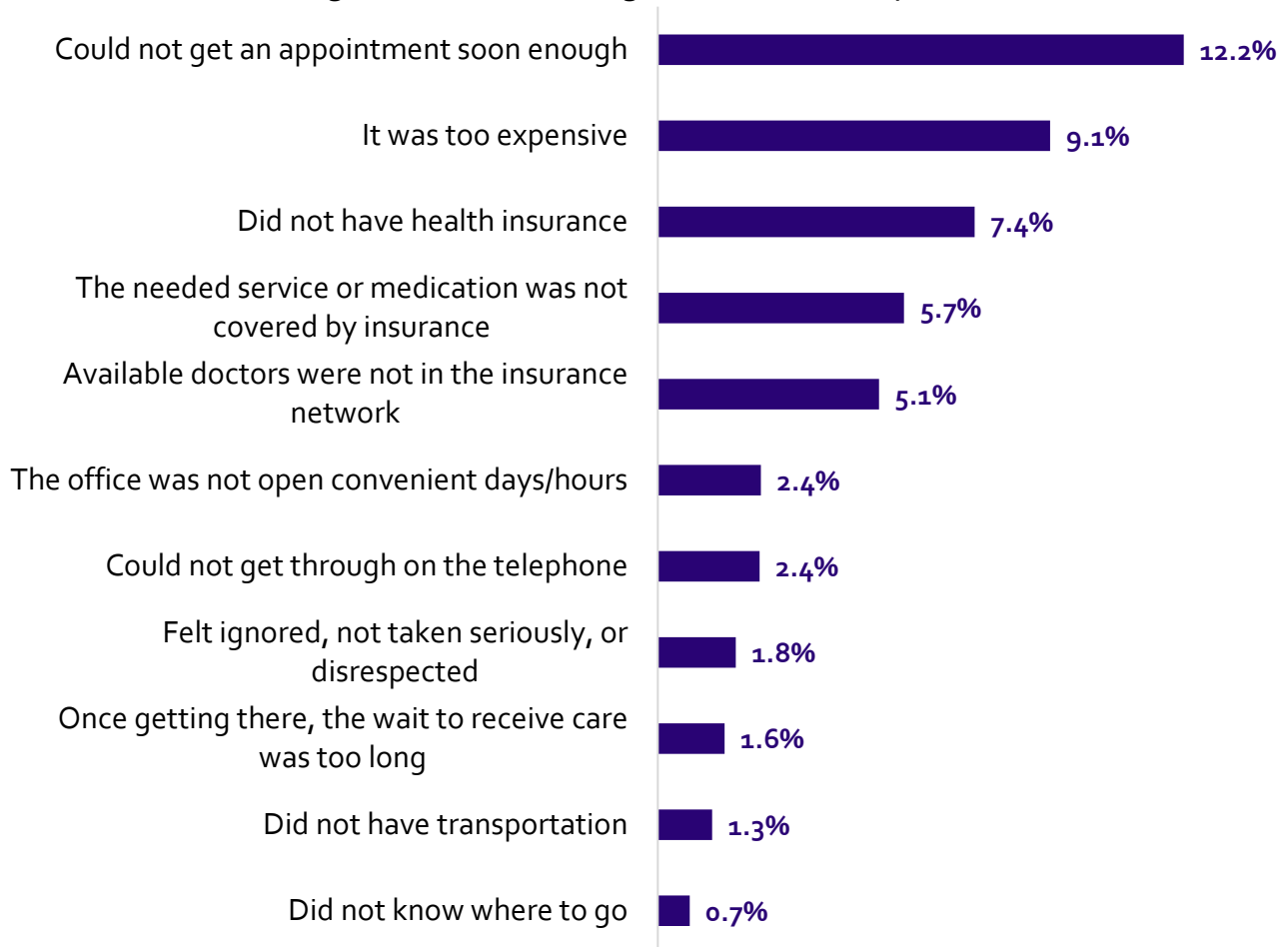


FIGURE 6: BARRIERS TO ACCESSING HEALTH CARE AMONG CHATHAM COUNTY ADULTS, 2021¹⁵

Not being able to get an appointment soon enough and cost are top barriers to accessing health care among Chatham County adults.



tobacco use (1.9%) since they’ve lived in the county. Around half of those seeking help for alcohol use called the services available and affordable, but a much smaller number said they were easy to find and high quality.¹⁵

Finally, around 1 in 5 Chatham County adults (19.8%) said the county should focus on having more healthcare options to improve health and quality of life in Chatham. Additionally, 17.0% said mental health care should be a focus, and 11.0% cited substance use support/treatment as a desired focus.¹⁵

For further information, see the Healthcare section.

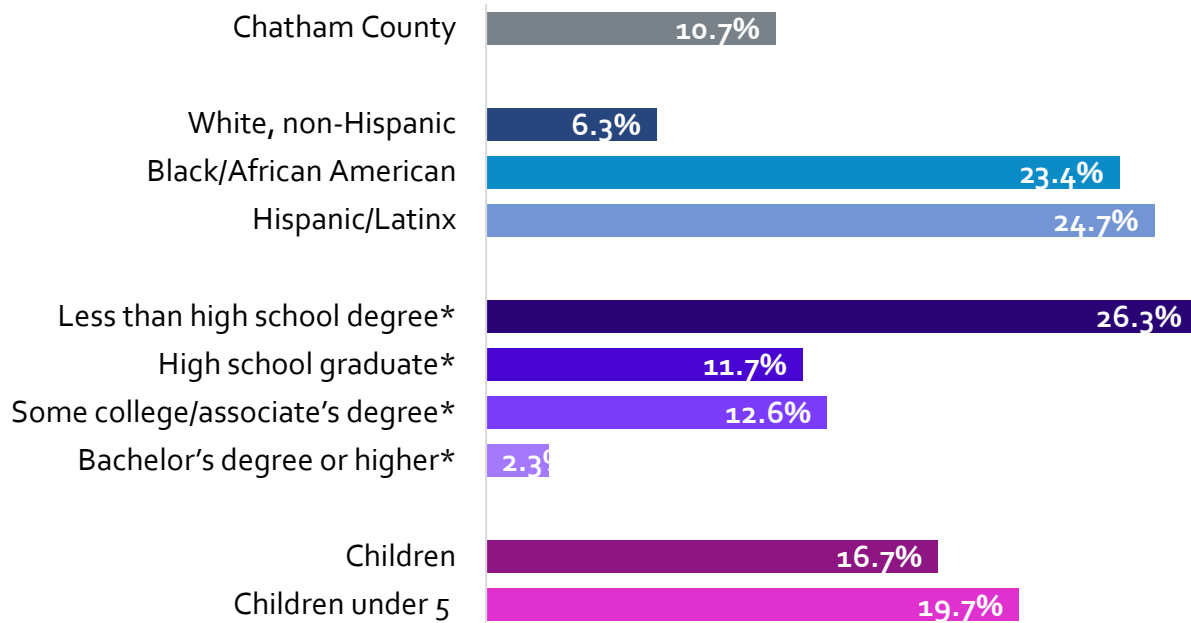
Economic Resilience

Poverty is an issue that underlies many health outcomes. Many of the sections in this report cover the relationship between poverty and health. The American Academy of Family Physicians says: “Poverty occurs when an individual or family lacks the resources to provide life necessities, such as food, clean water, shelter, and clothing. It also includes a lack of access to such resources as health care, education, and transportation.”¹⁸

Since the 2018 Community Assessment process, the Chatham Health Alliance re-titled their Poverty priority and corresponding

FIGURE 7: POVERTY RATES IN CHATHAM COUNTY, 2016-2020²⁰

Poverty rates are disproportionately high among several groups in Chatham County.



*POPULATION AGED 25 AND OLDER ONLY

subcommittee to Economic Resilience. According to the American Psychological Association, “resilience [i]s the process of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress—such as family and relationship problems, serious health problems, or workplace and financial stressors.”¹⁹ When shifting its focus from Poverty to Economic Resilience, the Chatham Health Alliance considered the factors facing Chatham County and worked on practical solutions.

In 2020, 10.7% of Chatham County’s population was living below the poverty line. This was a decrease from 13.0% in 2012. It is also lower than the North Carolina rate (14.0%) and national rate (12.8%). However, the county rate belies significant disparities in poverty rate based on race/ethnicity, education, and location, among other factors.²⁰

The sharp disparities in income in Chatham County stem from historic and continued systemic racism, disenfranchisement, and disinvestment in some communities. The county’s median household income, adjusted for inflation, was \$69,799 in 2020, slightly higher than the U.S.’s median (\$64,994) and much higher than the North Carolina median income (\$56,642). The median household income for White, non-Hispanic individuals (\$81,165) was nearly twice that for Black/African American individuals (\$41,498) and more than 60% higher than that of Hispanic/Latinx individuals (\$50,461).²¹

The 2021 Chatham County Community Survey gave county residents an opportunity to share how often money, or lack thereof, was a barrier to accessing certain services or goods. Of Chatham adults:

- Nearly 1 in 3 (30.4%) reported “money” as a primary cause of stress.

- More than 1 in 6 (17.4%) reported cost as a barrier to eating healthy snacks and meals.
- Around 1 in 15 (6.6%) reported cost as a barrier to physical activity.
- Around 1 in 15 (6.5%) reported that, due to COVID-19, they have not had enough money to make ends meet.

However, many county residents are optimistic about their futures. Nearly 3 in 10 (29.2%) said they either agreed or strongly agreed that Chatham County has good economic opportunities for them, though more than 24.3% disagreed or strongly disagreed.¹⁷

Additionally, in Story Circles held as part of the Community Assessment process, some residents expressed feelings of hope and a brighter future, and many felt like they could give more in volunteering and helping others. Persistence and resilience were identified as positive things about Chatham County.

For further information, see the Economy section.

Healthy Eating, Active Living

The 2018 Chatham County Community Assessment listed “Obesity” as the No. 2 Health Impact Priority for Chatham County, continuing the topic’s long placement as a priority as far back as 2006.²⁴ Since then, the Chatham Health Alliance has re-framed this priority as Healthy Eating, Active Living (HEAL), in recognition of the many complex factors that affect an individual’s diet, physical activity, and lifestyle. All of these are in turn far more impacted by structural elements such as environmental, economic, and societal factors, including racism, sexism, and others, than individual-level choice.²²

More than 1 in 3 Chatham County adults (34.1%) say that a medical professional has told them that they are overweight or have obesity¹⁷, in line with national figures.²³ However, that percentage increased from 28.8% in 2018.²⁴

Healthy Eating and Active Living for Adults

In 2021, 4 in 10 Chatham County adults (40%) reported eating three or more servings of fruits and vegetables every day.¹⁷ This was a decrease from 2018, when 46.1% of adults reported eating three or more servings each day.²⁴ Only 17.2% of Chatham adults said they “always eat healthy snacks and meals,” while the remainder cited a number of factors preventing them from doing so, like convenience (41.3%), taste (23.4%), not having enough time to shop for or prepare those foods (18.9%), and cost (17.3%).¹⁷

A 2013 study by the Harvard School of Public Health found that the healthiest diets cost about \$1.50 more per day than the least healthy diets. The report’s authors suggested that “food policies have focused on the production of ‘inexpensive, high volume’ commodities, which has led to ‘a complex network of farming, storage, transportation, processing, manufacturing, and marketing capabilities that favor sales of highly processed food products for maximal industry profit.’”²⁵ This can place an especially heavy burden on low-income families who have to consider many things when spending their limited funds.

Further, more than 1 in 8 Chatham County households (12.8%) reported that they worried that they would run out of food before they had money to buy more within the past year.¹⁷

Even if the healthy food is affordable, it needs to be accessible and easy to find. The CDC reports that 40 percent of all U.S. households do not live within one mile of healthier food retailers.²³ More than 2 in 5 Chatham County adults (22.2%) say the county should focus on affordable healthy food in Chatham, while more than a quarter (26.4%) said there needed to be more places to buy groceries in the county.¹⁷ Certain areas of the county have access to multiple grocery stores, while others have to drive further to find groceries, which

can limit the amount of healthy food in a household.

Most Chatham County adults engage in some physical activity during a typical day. More than half spend at least an hour doing physical activity in a day (53.7%), while a small amount does less than 30 minutes (15.7%). The main reasons why adults did not engage in physical activity at some point in the last month include not having time to do so (36.7%), having no one to exercise with (30.5%), not liking to exercise (30.5%), and having an injury (10.3%). **Error! Bookmark not defined.** Notably, more than a quarter of Chatham County adults (25.4%) said they exercised less than usual due to the COVID-19 pandemic which started in 2020.¹⁷

There are also many barriers to physical activity. Safe, accessible places to exercise are not available to all; more than half of Americans don't live within half a mile of a park. More than 1 in 5 Chatham County adults (21.2%) think the county should focus on improving sidewalks and bike lanes to improve health and quality of life in the Chatham community.¹⁷ **Error! Bookmark not defined.**

Healthy Eating and Active Living for Adolescents

Almost 1 in 3 Chatham County high school students described themselves as slightly or very overweight (32.5%) in 2019²⁶, a slight increase from 2017 (31.6%).²⁷ Their perceptions are almost spot-on; 16.6% of students were overweight and 15.5% had obesity. Hispanic/Latinx and Black/African American students and males were more likely than their peers to both be overweight and have obesity, due to the same factors referenced above. Chatham's rates are similar to the national and state averages.²⁶

The USDHHS recommends that children ages 6 to 17 engage in up to 60 minutes of physical activity or more per day.²⁸ Just 23.1% of Chatham County high school youth reported

this level of physical activity, with male students (29.9%) almost twice as likely as female students (16.6%) to do so. Almost 1 in 5 Chatham County high schoolers (19.0%) did not engage in at least 60 minutes of physical activity on any day in the past week.²⁶

The U.S. Department of Agriculture recommends that adolescents aged 14-18 eat 1.5 cups of fruit and 2.5 cups of vegetables per day for females, and 2 cups of fruit and 3 cups of vegetables per day for males.²⁹ More than 1 in 5 Chatham high schoolers (22.8%) reported eating vegetables at least twice per day, while around 1 in 11 reported not eating vegetables at all within the last week (8.9%). Black/African American and Hispanic/Latinx students were each more than twice as likely (13.5% each) to not eat vegetables at all in the last week than White students (5.8%).²⁶

For further information, see the Physical Activity section.

Chapter 5: Data Review and Findings

Life Expectancy and Leading Causes of Death

Nationally, the life expectancy for the U.S. population in 2020 was 77.0 years, a decrease of 1.8 years from 2019. Life expectancy for women dropped from 81.4 to 79.9 years and life expectancy for men decreased from 76.6 to 74.2.³⁰ A provisional report of the data cited a few contributors to this decline, namely deaths from the COVID-19 pandemic, an increase in deaths due to accidents/unintentional injuries, and an all-time high in drug overdose deaths.³¹

Chatham County's life expectancy for someone born in the year 2020 was 80.5 years, a slight decrease from the county's life expectancy from 2017-2019 (81.1 years). Women (82.9) and White residents (81.9) were the groups with the longest life-expectancy, while men (77.9) and Black/African American residents (74.7) had the lowest. Chatham's rates were higher than the state average and ranked fourth out of all counties in the state.³² Chatham's life expectancy consistently increased from 1990-1992, when the average was 76.6 years, until recent years, following national trends. The disparities noted above have continued since that time.³³

Mortality Rates

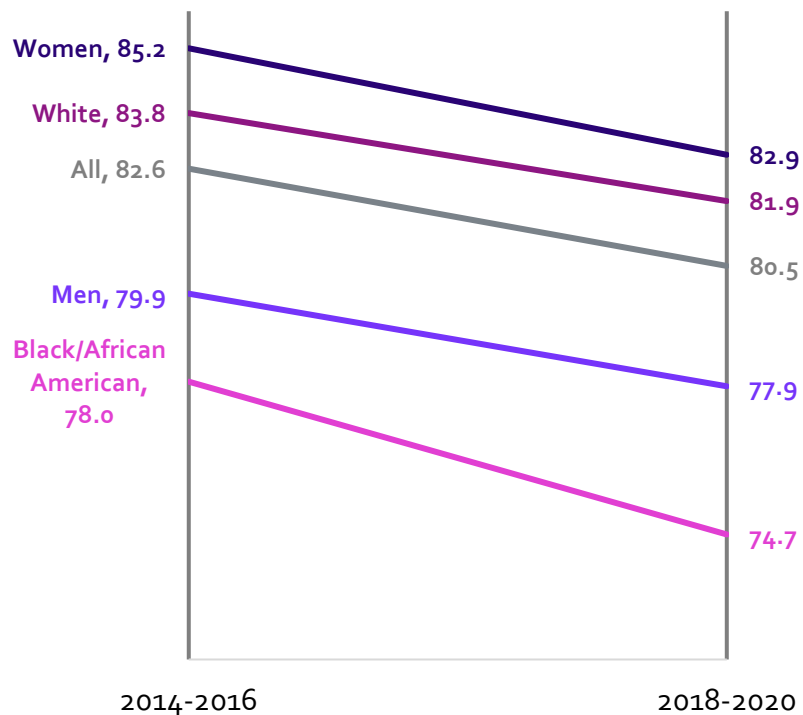
Chatham County had 3,739 deaths from 2016 to 2020, an age-adjusted rate of 618.0 per 100,000 population. This ranked lower than the state age-adjusted mortality rate (793.7 deaths per

100,000 population) during that time,³⁴ and lower than the national rate from 2020 (1,027.0 deaths per 100,000 population). Men had higher mortality rates than women across most causes of death.³⁵

However, serious and significant disparities exist within those rates. In Chatham County, the mortality rate for Black/African American men from 2016-2020 was 1,124.1 per 100,000 population, nearly 82% higher than the overall county rate, driven by particularly high mortality rates from causes such as heart disease and cancers.³⁴

FIGURE 8: LIFE EXPECTANCY IN YEARS IN CHATHAM COUNTY, 2014-2016 AND 2018-2020³²

Life expectancy has decreased in Chatham County. Existing disparities have remained or increased.



Leading Causes of Death

The leading cause of death for Chatham County residents from 2016-2020 was cancer. Cancer also ranked as the top cause of death for individuals aged 40 to 84, and the second-

leading cause of death for individuals aged 85 and older. Cancer caused nearly one-quarter (22.6%) of all Chatham County deaths from 2016-2020.³⁶ Lung/bronchus cancers additionally accounted for 19.5% of Chatham deaths from cancer.³⁷

The second-leading cause of death for Chatham residents from 2016-2020 was diseases of the heart. Heart disease was the second-leading cause of death for individuals aged 40 to 84 and the top cause of death for individuals aged 85 and older. Diseases of the heart made up nearly one-fifth of all Chatham deaths from 2016-2020 (18.7%). Cancer and heart disease consistently rank as the leading causes of death in the county.³⁶

The third-leading cause of death in Chatham County from 2016-2020 was cerebrovascular disease, accounting for nearly 1 of every 16 deaths (6.1%). Cerebrovascular disease was the 7th-leading cause of death for individuals aged 40-64 years, third-highest cause for individuals aged 65-84 years, and fourth-highest cause for individuals aged 85 years and older.³⁶

The top ten leading causes of death in Chatham County from 2016-2020 were as follows:

TABLE 2: TOP TEN LEADING CAUSES OF DEATH IN CHATHAM COUNTY, 2016-2020³⁶

| Rank | Cause of Death | Death Rate |
|------|------------------------------------|------------|
| 1 | Cancer – all sites | 232.5 |
| 2 | Diseases of the heart | 192.7 |
| 3 | Cerebrovascular disease | 63.4 |
| 4 | Alzheimer’s disease | 45.8 |
| 5 | Other unintentional injuries | 44.2 |
| 6 | Chronic lower respiratory diseases | 40.4 |
| 7 | Diabetes mellitus | 33.8 |
| T-8 | Parkinson’s disease | 19.5 |
| T-8 | Motor vehicle injuries | 19.5 |
| 10 | Pneumonia & influenza | 16.2 |

NOTE: ALL RATES PER 100,000 POPULATION.

Certain causes of death were more common in some age groups but did not appear in the top ten causes for other groups. For example, suicide was the third-highest cause of death for individuals aged 0 to 19 and individuals aged 20-39 years and the fifth-highest cause of death for individuals 40-64 years but did not appear in the top ten overall or for other age groups. COVID-19 ranked as the 10th highest cause of death for individuals aged 65-84 years from 2016-2020, despite not being identified in the county until March 2020. Homicide was the sixth-highest cause of death for individuals aged 0-19 years and individuals aged 20-39 years.³⁶

At the same time, causes of death that primarily affect older adults have been on the rise, likely due to Chatham’s shifting demographics and growing older adult population. For example, Alzheimer’s disease ranked sixth overall in the 2018 Chatham County Community Assessment (2013-2017) and eighth from 2008-2012 but has moved up to fourth (2016-2020). Parkinson’s disease was not in the top ten from 2013-2017 and is now eighth overall.³⁶

Impact of COVID-19

As mentioned, the COVID-19 pandemic had a significant impact on life expectancy and mortality rates across the United States in 2020. For most of 2020, 2021, and early 2022, COVID-19 ranked among the top three causes of death in the country, reaching its peak from December 2020 to February 2021 when it was the cause of more deaths daily than any other cause, including heart disease and cancer. Even after vaccines became available and spread in availability, the virus continued to rank as one of the leading causes of death in the United States for some age groups. From August 2021 to January 2022, COVID-19 was the leading cause of death for individuals aged 45-54 years in each month. It was also the leading cause of

death for all people aged 45-84 in January 2022 and caused more deaths than cancer for individuals aged 15 and older that month.³⁸

In provisional mortality data for 2021, COVID-19 was the third-leading cause of death nationwide and was an underlying or contributing cause to 460,513 deaths total, an increase from 384,536 in 2020. Racial and ethnic minorities had the highest rates of deaths related to COVID-19, including Hispanic/Latinx residents (157.8 per 100,000 population) and Black/African American residents (146.8 per 100,000 population).³⁹ Chatham County had 51 deaths due to COVID-19 in 2020 and 109 total deaths as of April 2022.³⁴

Basic Necessities

Affordable Housing

Affordable housing is a longstanding issue in Chatham County. A 2017 report identified several key issues, including:

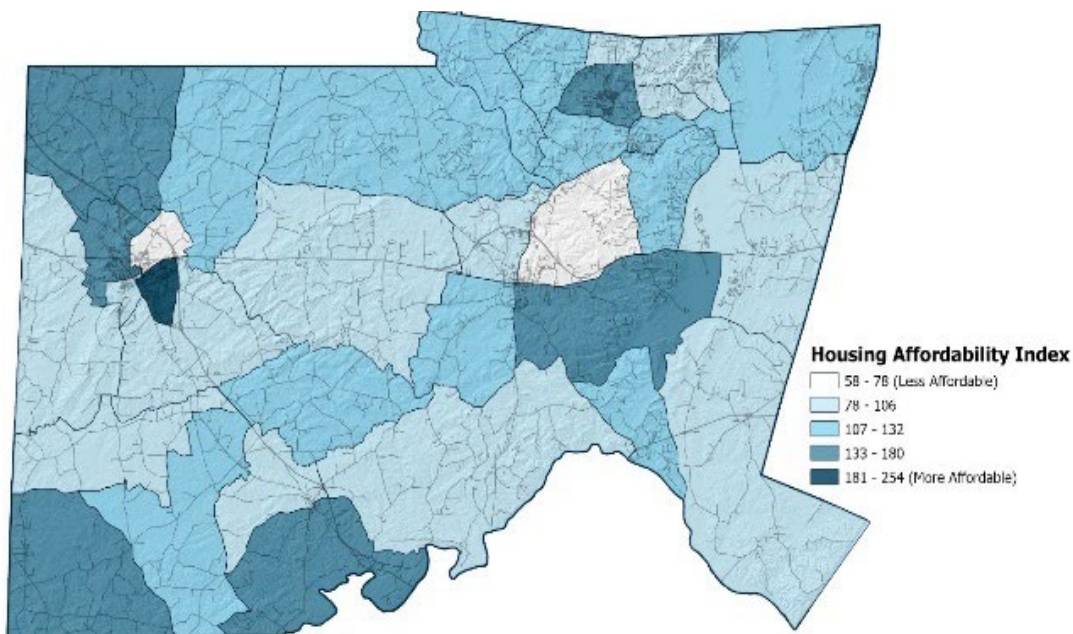
- Nearly half of renter households were making less than 30% of the county’s area median income (AMI).
- There were nearly four times as many renter households making 30% or less of AMI than rental housing affordable to those households.
- Older adults, Black households, and Hispanic/Latinx households all had lower median incomes than the general population.⁴⁰

The 2021 Chatham County Community Survey revealed that the same percentage of county residents (4.6%) were concerned about the stability of their housing over the next two

months as in 2018^{41,42}. Around 1 in 7 Chatham adults (13.8%) disagreed or strongly disagreed that they were able to afford housing in Chatham where they wanted to live.⁴¹ During the Story Circles held as part of the 2021 Community Assessment process, participants in three of the five events said affordable housing was a problem for county residents, saying housing in Chatham was unaffordable for an “average person”. Of participants in the 2021 Chatham County Community Survey, one in 11 (9.1%) said “housing costs” was a primary cause of stress for them.⁴²

Additionally, younger adults were notably more likely to report concerns about housing stability in the next two months and were less likely to report being able to afford housing in the area they wanted to live in 2021 compared to adults aged 59 and over. Black and Hispanic/Latinx residents were approximately four times more likely to list housing costs as a primary cause of stress compared to White, non-Hispanic adults and were significantly more likely to report

FIGURE 9: HOUSING AFFORDABILITY IN CHATHAM COUNTY, 2021



Note: Esri’s Housing Affordability Index (HAI) measures the financial ability of a typical household to purchase an existing home in an area. An HAI of 100 represents an area where median household income is sufficient to afford a home valued at the median home price. An index greater than 100 suggests homes are easily afforded by the average area household while an HAI less than 100 suggests that homes are less affordable.

SOURCE: HOUSING AFFORDABILITY INDEX: ESRI (2021), NCGS, NCDOT, EOC

greater difficulty paying for housing as a result of the COVID-19 pandemic⁴¹.

Overall, home prices in Chatham County have risen by 20.5% over the past year.⁴³ Housing affordability also varies throughout the county.

From 2014-2018, 14.3% of households in

Pittsboro spent more than half of their income on housing compared to 21.1% of households in Siler City.⁴⁴

However, median

monthly housing cost in 2020 in Siler City was \$682, compared to \$983 for Chatham County as a whole.⁴⁵

From 2019 to 2021, the gap between low-income renter households and affordable units increased. The number of affordable rental units rose 13.2% (from 1,397 to 1,582), but the number of households needing those units rose 25.6% (from 2,835 to 3,561), outpacing availability.⁴⁶ According to an Affordable

Housing Advisory Committee (AHAC) report, the median household income for Black and Hispanic/Latinx households is 50-60% lower than that of White households, making housing even less affordable for many.⁴⁷

With the adoption of the 2017 report from the

Triangle J Council of Governments and the creation of the AHAC, Chatham County took proactive steps to follow the



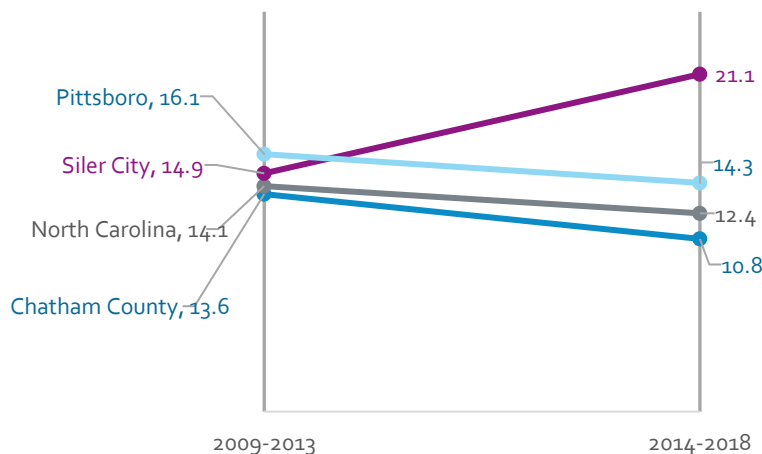
suggestions of that report, including the creation of a housing trust fund to allocate money to projects supporting the construction, development, and preservation of affordable housing across the county. Through 2021, the Housing Trust Fund has allocated \$652,200 to affordable housing projects across the county.⁴⁸ In March 2020, Chatham County residents approved a ballot measure to implement a quarter-cent increase in the county's sales tax rate, to be used for

affordable housing, among other initiatives.⁴⁹ Another source of county money, the Emergency Housing Fund, served more than 40 households in 2021 with money for emergency hotel stays, assistance with utility payments and prevention of evictions and foreclosures.⁴⁶

Municipalities in Chatham have also pushed for more affordable housing. The original plan for Chatham Park, a major planned community in Pittsboro that is projected to house 60,000 people at completion, allocated just 1% of residential development as affordable housing. But when the Pittsboro Board of Commissioners passed the affordable housing element of Chatham Park's

FIGURE 10: HIGH HOUSING COST BURDEN, 2009-2018⁴⁴

High housing cost burden declined overall between 2009-2013 and 2014-2018, but increased notably in Siler City.



Spotlight on Resources: *Chatham County Affordable Housing Advisory Committee*

Born out of a short-term task force created in 2016, the Chatham County AHAC makes recommendations to the Chatham County Board of Commissioners for procedures and policies around affordable housing and administers the county's Housing Trust Fund, which disburses funds to affordable housing projects in Chatham each year. The committee is made up of twelve Chatham County residents and includes representatives from the town boards of Pittsboro, Siler City, and Goldston, and at least one member from each commissioner district. In 2021, the AHAC allotted funds to two projects: \$75,000 to Chatham Habitat for Humanity for new construction of eight units and \$100,000 to Rebuilding Together of the Triangle for housing preservation of fifty units. To learn more, visit: <https://www.chathamcountync.gov/government/appointed-boards-and-committees/affordable-housing-advisory-committee>

development proposals, that number rose to 7.5%.⁵⁰

Despite this progress on some fronts, housing affordability continues to be a major issue in Chatham County. Susan Levy, chair of the Chatham Affordable Housing Advisory Committee, told the Chatham News + Record in February 2022: "Over time, it's going to probably require more than what we're doing now. Just based on what I've seen, for example, in Orange County, which has a really significant affordability problem — and I think we're fast approaching that."⁴⁷

Fair Housing

In 2019, HUD received 160 fair housing complaints from North Carolina, with more than half of the complaints (92) filed based on disability and around a third of complaints (53) related to race discrimination. From 2000-2019, a total of fifteen complaints were filed in Chatham County.⁵¹ Around 1 in 59 Chatham County adults (1.7%) said they had ever experienced discrimination, bias, or prejudice in housing.⁴¹

Fair housing may grow into a bigger issue in Chatham County in the coming years. According to the Analysis of Impediments to Fair Housing in Chatham report from 2019, many issues that have existed previously "have been exacerbated by the explosive economic

growth of the Triangle region and its impact on the housing stock and demographics of the County" (see Affordable Housing, Development and Rural Preservation sections for more). Other impediments to fair housing in the county cited in the report include:

- High housing costs: As the price for buying and renting housing increases, renters and first-time home buyers will find it harder to afford available housing, which is already in short supply.
- Lack of awareness: Low reports of fair housing complaints may be indicative of residents not knowing fair housing principles and the rights they have under federal and state law mentioned above.
- Disparities: Higher prices and changing demographics have made it harder for elderly borrowers and renters and Black/African American borrowers and renters to apply for and receive mortgages and apply for affordable rental units compared to White borrowers and renters.
- Housing stock: The number of low-income households seeking affordable housing far outnumbers the number of units available.⁵²

The percentage of loan applications in Chatham County that were denied for home purchase, refinancing, or improvement, has decreased from 13.6% to 9.4% between 2018

from 2020 and remains lower than the state’s 2020 rate of 11.6%. However, while those decreases have also been seen for Black/African American and Hispanic/Latinx borrowers in Chatham, they were still more than twice as likely to be denied (21.1% for Black/African American borrowers, 20.6% for Hispanic/Latinx applicants) as White borrowers (9.0%) in 2020.⁵³

In addition to federal and state protections against discrimination in housing against a person based on race or color, religion, sex (including sexual orientation and gender identity), national origin, familial status, disability⁵⁴, and family status (families with children),⁵⁵ both the Chatham County and Town of Pittsboro governments have formal fair housing complaint processes in place. The county has hired a Fair Housing Officer and maintains a webpage where residents can learn more about their rights and what to do if they feel they are experiencing discrimination in housing.⁵⁶ The Town of Pittsboro created a complaint form on the town’s website for “residents who feel they have been discriminated against when searching for a home in Pittsboro.” Town Manager Chris Kennedy said the form was more than just checking a box, saying the town “really wanted to steer into this because if we’re going to do this, we’re going to do it right and do something meaningful.”⁵⁷ Anyone experiencing discrimination can also file a complaint with the Housing Discrimination Section of the North Carolina Civil Rights Division.⁵⁸

Homelessness

Homelessness encompasses all situations where an individual or family lacks a fixed, regular, or adequate residence, including living with a family member or friend, in a shelter,

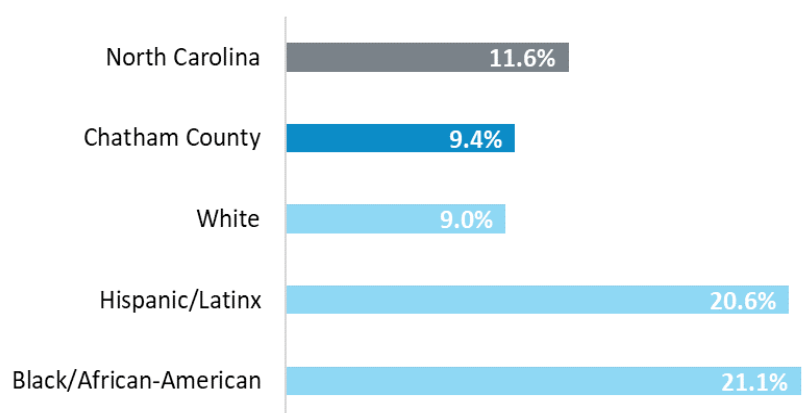
in a hotel or motel room – anywhere that is not a permanent living space.^{59,60} Those who are experiencing homelessness have higher rates of illness and die an average of 12 years earlier than the overall population. Not having a permanent home can be a “dangerous health condition” itself, causing stress, heightening exposure to communicable disease and harmful weather, and many other health impacts.⁶⁰ Accurately counting the number of people experiencing homelessness in any given area is difficult. The most used method is Point-in-Time Counts, measuring the number of people found that are experiencing homelessness on a certain day, at a certain time.

As of January 2020, an estimated 580,466 people in the United States were experiencing homelessness. Around 7 in 10 were individuals, with the remainder those in families. Additionally, around 1 in 17 (nearly 5.9%) were unaccompanied youth. The National Alliance to End Homelessness notes that “historically marginalized groups are more likely to be disadvantaged within housing and homelessness spheres...as with so many other areas of American life.”⁶¹

An estimated 9,280 people in North Carolina were experiencing homelessness as of January

FIGURE 11: HOME LOAN APPLICATION DENIALS, 2020⁵³

Black/African American and Hispanic/Latinx borrowers in Chatham were more likely to have home loan applications denied in 2020.



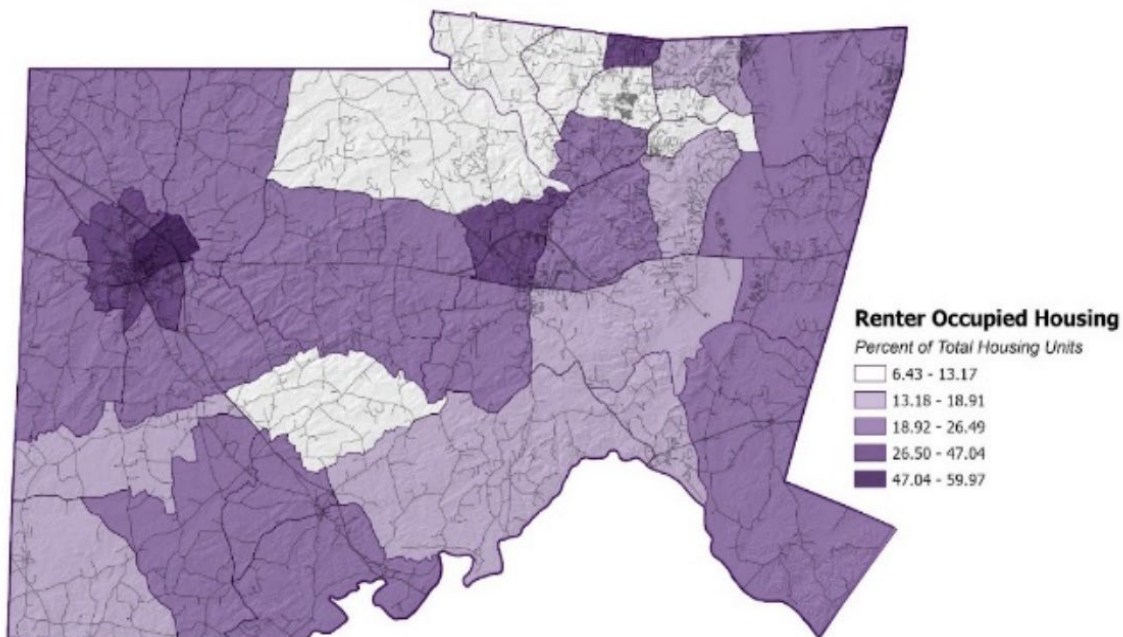
2020, accounting for 8.8 people per 10,000 population in the state. That rate represents a decrease from 13.2 people per 10,000 in 2007, a 21% decrease. Chatham County is part of the North Carolina “Balance of State” Care of Continuum, which experienced a 22% increase in the rate of homelessness in that time, including a 58% increase in individuals experiencing homelessness. The rate is lower than the state’s overall rate, at 6.1 per 10,000, but the rise in homelessness in the area including Chatham County is a cause for concern.⁶²

Siler City Police Chief Mike Wagner told the Chatham News + Record in March 2021, about a year into the COVID-19 pandemic, that his department had counted 16 people “that actually would meet the definition of being homeless” in the town.⁶³ Mack Neeves, a founding member of the nonprofit Love Chatham, told the paper in April 2021 that his group had counted 22 people in Siler City motels through funding from the Salvation Army and Central Piedmont Community Action.⁶⁴

Chatham County Schools serves children and families who are experiencing homelessness through the federal McKinney-Vento Homeless Assistance Act.⁶⁵ As of December 2021, the district had 105 students qualifying for McKinney-Vento assistance. Racial/ethnic minorities were also disproportionately affected by homelessness in this area: just 39% of students qualifying for McKinney-Vento assistance were White, despite comprising 51% of the student population at that time⁶⁶; the remainder of qualifying students were Black/African American, Hispanic/Latinx, or multiracial.⁶⁷

Chatham County students are experiencing different kinds of homelessness. One in 11 (9.1%) report ever sleeping away from parents or guardians because they were kicked out, ran away, or were abandoned. Racial/ethnic disparities exist in this area as well: 11.3% of Hispanic/Latinx students and 10.3% of Black/African American students report experiencing this, compared to 7.2% of White students. Additionally, 3.6% of high school

FIGURE 12: RENTER-OCCUPIED HOUSING IN CHATHAM COUNTY, 2021



SOURCE: ESRI (2021), NCGS, NCDOT, EOC

Spotlight on Resources: *Rebuilding Together of the Triangle*

Rebuilding Together of the Triangle is the local affiliate of Rebuilding Together, a nonprofit working to preserve affordable homeownership and revitalize neighborhoods by providing home repair and renovation services free of charge to those in need. RTT serves Wake, Durham, Orange, and Chatham counties and has been the recipient of funds from the Chatham County Affordable Housing Advisory Committee's Housing Trust Fund multiple times. Typical repairs from RTT include building wheelchair ramps, repairing unsafe electrical wiring, replacing HVAC units, patching leaking roofs, and painting interior and exterior surfaces. Learn more about RTT at www.rtttriangle.org.

students and 1.7% of middle school students report usually sleeping in the home of a friend, family member, or other person in the previous month because they had to leave their home, or their parent or guardian could not afford housing.⁶⁸

Multiple nonprofits, like the Salvation Army of Chatham County and Central Piedmont Community Action, serve people experiencing homelessness, but there is not a homeless shelter in Chatham County. Love Chatham, which was established in 2021 through a church in Siler City, is currently in the process of establishing an emergency temporary shelter network utilizing churches across the county, with plans for a permanent shelter.⁶⁹

Housing Quality

Housing quality can greatly affect health and safety; poor housing conditions are associated with a wide range of health conditions, including respiratory infections, asthma, lead poisoning, injuries, and mental health.⁷⁰ The U.S. Department of Housing and Urban Development has established a standard by which to measure the quality of homes. There are four main housing problems: incomplete kitchen facilities, incomplete plumbing facilities, more than one person living in the house per room, and cost burden (the ratio of housing costs to household income) greater than 30%. There are also four severe housing problems: incomplete kitchen facilities,

incomplete plumbing facilities, more than 1.5 persons per room, and cost burden greater than 50%.

More than 8 in 10 (82.9%) Chatham County households self-rated their housing condition as "good," with 15.2% rating their house's condition as "fair" and 1.4% rating it "poor."⁴³ Around 1 in 4 Chatham County households experienced at least one of the four housing problems from 2014-2018, lower than the state percentage (29.4%) and national percentage (32.5%). Approximately 13% of households in the county had at least one of four severe housing problems, also lower than the state and national rates.⁴⁴

Siler City households were more likely to have housing problems than Pittsboro households (39.3% vs. 28.3%) and nearly twice as likely to have severe housing problems than Pittsboro households (27.0% vs. 14.3%). Additionally, the rate of county renter households with housing problems was twice that of owner households (39.8% vs. 20.1%), with nearly half of Siler City rental households experiencing housing problems. The same disparity was seen with severe housing problems: 21.4% among renters, 10.1% among owners, and 33.2% among renters in Siler City.⁴⁴ A 2019 housing report identified ten neighborhoods in Siler City with "a high proportion of rental properties and a high proportion of properties in poor condition." Of the units in those neighborhoods, 21% were in "poor, very poor,

or unsound condition,” compared to 6% in the county overall.^{40,71}

Lead Poisoning

Lead poisoning can also be a serious risk resulting from housing quality and materials. Studies show that elevated levels of lead greater than five micrograms per deciliter in the bloodstream adversely affect a child’s development and behavior. Lead exposure may also elevate health risks during pregnancy and birth for both mothers and infants. Chatham County Public Health Department’s Childhood Lead Poisoning Prevention Initiative works to increase lead testing and eliminate lead risks in the county. The Chatham County Public Health Department encourages homeowners with children under six who live in a home built before 1978 to have those children tested for lead poisoning.⁷²

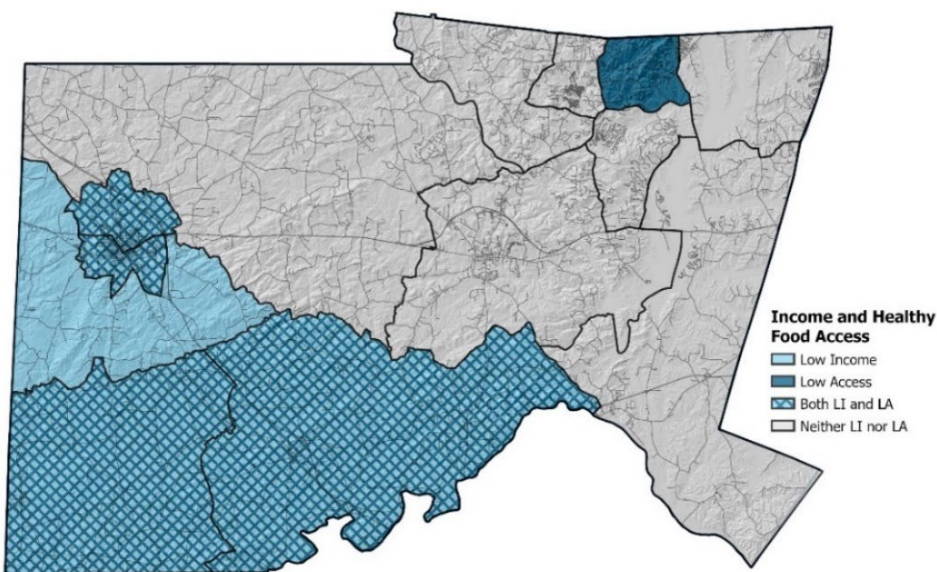
Food Insecurity

Food insecurity is a household-level economic and social condition of limited or uncertain access to adequate food,⁷³ which may increase the risk for numerous negative health

outcomes, like obesity and chronic disease. Children suffering food insecurity are more likely to have developmental and mental health issues.⁷⁴

More than 1 in 10 households in the United States (10.5%) were food insecure in 2020. The prevalence of food insecurity rose to more than 1 in 7 households with children (14.8%) and households with children under age 6 (15.3%). Food insecurity disproportionately affects many groups, including single-parent households, female householders, Black/African American households, and households making less than 185% of the poverty threshold.⁷⁵ Research on food insecurity reveals that “racial discrimination limits people of color’s access to educational and employment opportunities resulting in social and economic consequences that could lead to food insecurity.” As such, combatting the systemic effects of structural racism could improve outcomes related to food access for people of color.⁷⁶ More than 1 in 8 Chatham County adults (12.8%) reported worrying they would run out of food before they had money

FIGURE 13: INCOME AND FOOD ACCESS IN CHATHAM COUNTY, 2019



Note: Low Income (LI) tracts exhibit a poverty rate of 20% or greater; Low Access (LA) tracts contain at least 500 people or 33% of the population living farther than 1 mile (urban) or 10 miles (rural) from the nearest supermarket (USDA, 2019).

SOURCES: USDA (2019), NCGS, NCDOT, EOC

Spotlight on Resources: *CORA Food Pantry*

Short for Chatham Outreach Alliance, CORA served its first food to a six-person family in July 1989 and now distributes more than 1 million meals a year to families across Chatham County. CORA serves any Chatham County resident who needs emergency food. Families can receive a week's worth of groceries up to two times per month. These weekly food allotments are selected to provide twenty-one nutritious meals for each family member. The organization's efforts increased during the COVID-19 pandemic. In FY 2021, CORA served 1.2 million meals and provided nearly 1.2 million pounds of food. The organization is prepping to move into a new building to continue to meet the needs of the community. Visit www.corafoodpantry.org to learn more.

to buy more in the past year, including approximately 30% of Hispanic/Latinx residents and 20% of Black residents. More than 1 in 4 Chatham adults (26.5%) identified having more places to buy groceries as a top priority for the county to improve health and well-being, fourth highest, with affordable healthy food (22.2%) and household food security (11.4%) also a top priority for many.⁴¹

According to the 2019 Feeding America report, Chatham County had a 11.7% food insecurity rate, representing 8,350 people and more than 1 in 9 households; North Carolina had a food insecurity rate of 13.5%. Two-thirds of Chatham residents experiencing food insecurity qualified for the Supplemental Nutrition Assistance Program, more commonly known as "food stamps." Additionally, the average meal in Chatham County cost \$3.51 in 2019, a rise of seven cents from the previous year and fifty-two cents higher than the state average. The county would also need an additional \$5.01 million to meet food needs, an increase from \$4.82 million in 2018 and \$4.28 million in 2017.⁷⁷

Food Insecurity in COVID-19

Feeding America projected that around 45 million people in the U.S., including 15 million children, would experience food insecurity in 2020, with the COVID-19 pandemic playing a trend-changing role. Prior to the pandemic, food insecurity rates were reaching record

lows. But with millions losing jobs and steady income, families lost access to sufficient food because of limited financial resources. The pandemic was also likely to impact most those who were

already experiencing food insecurity or at high-risk for food insecurity, creating greater hardship. Marginalized populations continued to experience disproportionate rates of food insecurity through the pandemic.⁷⁸ In Chatham County, 7% of residents reported not having enough money to make ends meet as a result of COVID-19.

CORA Food Pantry, which provides food boxes to families in need, reported serving an average of 185 families a week as of February 2020; in March and April 2020, that number rose by 49% to around 275 families a week. Numbers returned to normal levels within a year as federal government assistance programs adjusted to the rising need for food.⁷⁹

Free and Reduced Lunch at Schools

Another indicator of the food insecurity in a community is the rate of students in a community eligible to receive free or reduced-price meals at schools. The meals are available through the National School Lunch Program, a federal program that reimburses school districts for providing nutritionally balanced meals.⁸⁰ As of March 2022, 34.1% of Chatham

Table 3: Chatham County Students Receiving Free or Reduced-Price Lunch, 2022⁸²

| School Name | % of Students Receiving Free or Reduced-Price Lunch | City |
|----------------------------------|---|------------|
| Northwood High School | 17.5% | Pittsboro |
| Perry Harrison Elementary School | 18.0% | Pittsboro |
| Pittsboro Elementary School | 26.7% | Pittsboro |
| Horton Middle School | 26.9% | Pittsboro |
| Jordan-Matthews High School | 55.0% | Siler City |
| Siler City Elementary School | 66.9% | Siler City |
| Chatham Middle School | 68.4% | Siler City |
| Virginia Cross Elementary School | 81.0% | Siler City |

County students were receiving free or reduced-price lunches, a rate that has been steadily decreasing in recent years. The most recent high was 53.5% of students in the 2014-2015 school year.⁸¹

However, geographic disparities exist within the county. Schools in Siler City, for example, are more likely to have a higher rate of students receiving free or reduced lunch than schools in Pittsboro.⁸²

Physical Health and Chronic Disease

Physical health is an important part in overall health and well-being, and encompasses many elements, including chronic illnesses, physical activity, nutrition, and more. Many Chatham County adults say they are in good, very good, or excellent health (82.0%), but more than 1 in 4 (25.7%) say that poor physical health at least sometimes keeps them from doing usual activities, like working or spending time with family and friends. Further, 14% of White, non-Hispanic adults rated their health fair or poor, compared to 23% of Black/African American adults and 37% of Hispanic/Latinx adults.⁸³

Chronic illnesses such as arthritis, asthma, heart disease, cancer, mental health conditions, diabetes, and more can limit activities of daily living and may require ongoing medical attention; the CDC reports that chronic illnesses are the leading drivers of health care costs in the United States, where around 3 in 5 adults have at least one chronic condition.⁸⁴ More than 4 in 5 Chatham County adults report that they have at least one chronic illness, with more than 3 in 5 saying they have two or more.⁸³

Alzheimer's Disease

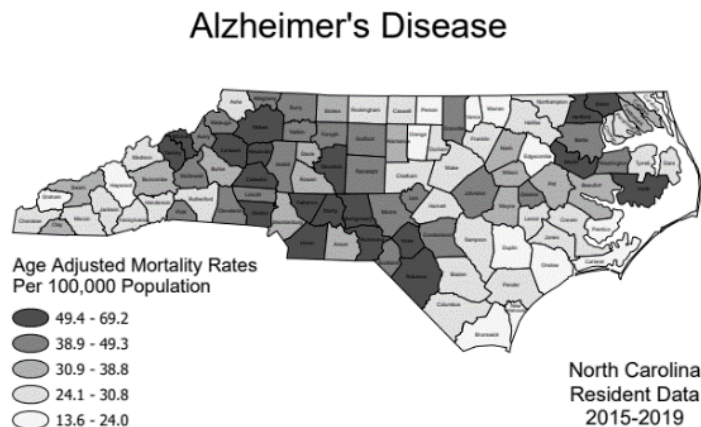
Alzheimer's Disease causes loss of cognitive function abilities like thinking, remembering, and reasoning to the point that it affects daily life, and can eventually lead to severe disability and death.⁸⁵ More than 6 million Americans, most of them older than 65 years of age, are estimated to have dementia caused by Alzheimer's.⁸⁵ Alzheimer's ranked as the sixth-leading cause of death in the United States in 2019 and the fifth-

highest cause of death for adults ages 65 and older.⁸⁶

Alzheimer's was the fourth-leading cause of death in North Carolina in 2019 for individuals 65 years of age and older. It was the third-highest cause of death for females in the state. Alzheimer's was also the fourth-leading cause of death in Chatham County in 2019 and counted for an average of 46 deaths per 100,000 people from 2015-2019.⁸⁷ That's an increase from being the sixth-leading cause of death in the county from 2013-2017 and eighth-leading cause from 2008-2012.⁸⁸ The county's age-adjusted death rate due to Alzheimer's rose from 16.2 per 100,000 population in 2010-2014⁸⁹ to 24.6 per 100,000 population in 2015-2019; the rate for North Carolina overall was 36.9 per 100,000 at that time.⁸⁹

Additionally, in North Carolina Local Health Director Region D, which includes Chatham County, 5.3% of adults aged 45 and older reported cognitive decline in the last year, compared to 6.9% of the state overall.⁹⁰ With the high and increasing number of senior adults in Chatham County, health issues more common among older adults, including Alzheimer's Disease, are likely to be a growing concern in the years ahead.

FIGURE 14: AGE ADJUSTED MORTALITY FROM ALZHEIMER'S DISEASE BY COUNTY IN NORTH CAROLINA, 2015-2019⁸⁹



Spotlight on Resources: *Chatham County Public Health Department Asthma Intervention Program*

The Chatham County Public Health Department's Asthma Intervention Program is designed to provide children and their families the tools needed to help manage an asthma diagnosis by addressing triggers in the home. The program includes an asthma assessment, a free asthma trigger assessment in the home and resources for addressing those triggers. To learn more, visit www.chathamcountync.gov/asthma.

Asthma

Asthma affects the state of the airways in an individual's lungs, causing those tubes that carry air in and out of your lungs to be inflamed and narrowed at times. While asthma often starts during childhood, it can affect people of all ages.⁹¹ In addition to medication, asthma can be controlled through management of environmental triggers, such as reducing exposure to cigarette smoke, dust, mold, and pets.

The CDC reports that around 25 million Americans currently have asthma, with 20% of those cases in children under age 18. Asthma is more common in the southern part of the U.S., accounting for more than 9 million diagnoses. Deep inequities are seen among those who are diagnosed with asthma throughout the country, due to structural and social drivers, such as systemic racism and discrimination, access to health care, and neighborhood and physical environment.⁹² Black/African American children are three times as likely to have asthma compared to White children, and Black/African Americans of all ages are five times more likely to visit the emergency department due to asthma.⁹³ Additionally, from 2006 to 2018, all negative asthma-related health outcomes were more prevalent in individuals in low-income families.⁹⁴ In 2021, 13.7% of Chatham County adults said that they have ever been told by a doctor, nurse, or other health professional that they have asthma⁹⁵ and as of 2019, 8.6% of Chatham adults said they currently have asthma.⁹⁵ Around 1 in 5 Chatham County middle school students (20.5%) have ever been told by a

doctor or nurse that they had asthma, including 26.3% of Hispanic/Latinx males.⁹⁶

Approximately 1 in 4 Chatham high school students (25.3%) have been told the same, including 38.4% of all Black/African American students.

Nearly 1 in 20 emergency department visits in Chatham County (4.7%) were related to asthma in 2020, an increase from 2017 (3.6%), and a higher rate than the North Carolina average in 2020 (3.6%). However, Chatham County's actual rate of emergency visits due to asthma is slightly lower than the state rate.⁹⁷

Cancer

There are more than one hundred types of cancer that can affect almost any part of the body.⁹⁸ Cancer was the number one cause of death in Chatham County residents as of 2019, accounting for nearly 1 in 4 deaths. It was also the leading cause of death in 2015 and 2010.⁹⁹ Chatham County's age-adjusted mortality rate from cancer is 132.6 per 100,000 persons, lower than the state rate of 154.6 per 100,000 persons and in the bottom ten among North Carolina counties.¹⁰⁰

Black/African-American residents in particular bear a disproportionate burden of cancer both nationally and at the local level, due to a variety of social and structural impacts rooted in racism and discrimination that impact risk factors such as exposure to carcinogens and access to cancer screening and treatment.¹⁰¹ According to the American Cancer Society, Black/African American people experience more illness, worse outcomes, and premature death compared to White people and have the

Spotlight on Resources: *Chatham County Public Health Department Breast & Cervical Cancer Control Program*

The Breast & Cervical Cancer Control Program (BCCCP) at the Siler City clinic of the Chatham County Public Health Department is a no-cost initiative designed to help Chatham County women who have no or limited health insurance and do not have Medicaid or Medicare receive screenings and medical consultation referrals. Clients can self-refer or be referred by a physician. Bilingual or interpretation services are also available. To learn more, visit www.chathamcountync.gov/publichealth.

FIGURE 15: CANCER INCIDENCE RATE BY COUNTY IN NORTH CAROLINA, 2018¹⁰²

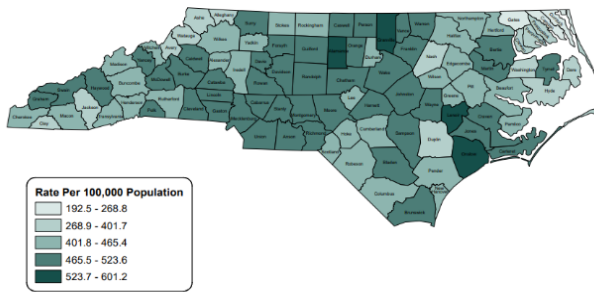


FIGURE 16: CANCER MORTALITY RATE BY COUNTY IN NORTH CAROLINA, 2018¹⁰²

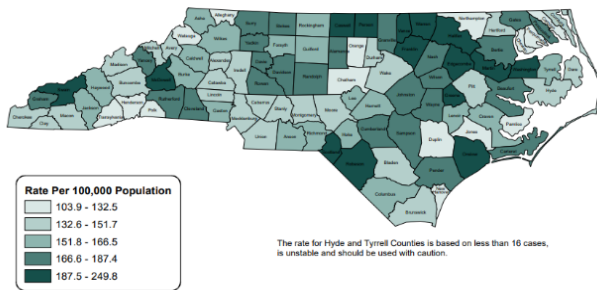
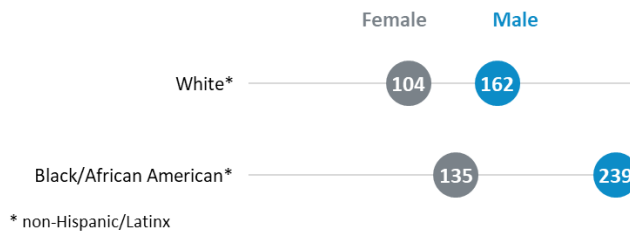


FIGURE 17: AGE ADJUSTED CANCER MORTALITY RATES IN CHATHAM COUNTY BY RACE AND GENDER, 2015-2019¹⁰⁵

Cancer mortality rates are disproportionately high among men, particularly Black/African American men.



highest death rate and shortest survival of any racial/ethnic group for most cancers. Black/African American men are more likely than any demographic group to be diagnosed with cancer.¹⁰² In Chatham County, the cancer mortality rate for Black/African American males is more than twice that of White females.¹⁰³

More than 1 in 7 Chatham County adults (14.0%) report ever being told by a doctor, nurse, or medical professional that they had cancer.⁸³ From 2016-2020, the county's cancer incidence rate was 460.6 per 100,000 persons, slightly lower than the state rate (464.3 per 100,000). In that time, Chatham County had a higher incidence rate of breast cancer among women and skin cancers than North Carolina as a whole.¹⁰⁴

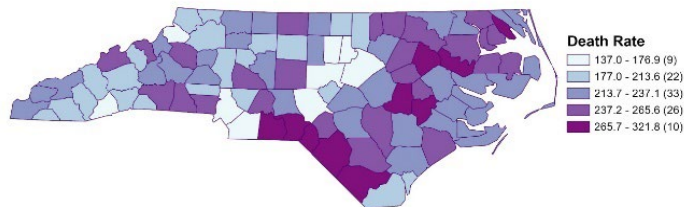
Cardiovascular Disease

Cardiovascular disease, which includes diseases affecting the heart and blood vessels, is the leading cause of death for men, women, and people of most racial and ethnic groups in the United States. About 659,000 people in the U.S. die from heart disease every year, while around 805,000 Americans have a heart attack every year.¹⁰⁵ According to the Centers for Disease Control and Prevention, around half of all Americans (47%) have at least one of three key risk factors for heart disease: high blood pressure, high cholesterol, and smoking.¹⁰⁶

Heart diseases accounted for 1 in 5 deaths in North Carolina from 2015-2019, the second-most of any cause, including the top cause for

all individuals aged 85 and older. From 2017-2019, North Carolina's cardiovascular death rate was slightly lower than the country's, while the state's cardiovascular hospitalization rate was slightly higher than the United States' rate.¹⁰⁷

FIGURE 18: HEART DISEASE MORTALITY RATE BY COUNTY IN NORTH CAROLINA, 2017-2019



SOURCES: INTERACTIVE ATLAS OF HEART DISEASE AND STROKE (CDC.GOV) (STATE LEVEL) (2017-2019), NCGS, NCDOT

Nearly 1 in 7 Chatham County adults (14.8%) report ever being told by a doctor, nurse, or health professional that they have any kind of cardiovascular or heart disease (excluding high blood pressure).⁸³ Diseases of the heart was the second highest cause of death in Chatham County in 2019, accounting for nearly 1 in 5 (19.6%) mortalities. It was the leading cause of death among males (23.3%).⁹⁹ More than 1 in 4 Chatham County residents have been diagnosed with high blood pressure (28.7%), while 5.3% have coronary heart disease and 2.9% have ever suffered a stroke.¹⁰⁸

That said, Chatham County's death and hospitalization rates due to cardiovascular disease are among the lowest in the state. From 2017-2019, Chatham County's cardiovascular disease death rate was 154.3 per 100,000 population, the second lowest in the state and a 68.5% decrease from 2005-2007. In the same time period, Chatham's cardiovascular disease hospitalization rate also decreased by 36.8% and was the fifth lowest county rate in the state.

Of special concern is the higher incidence and mortality due to heart disease among men and Black/African American men in particular. In

Chatham County, the mortality rate from cardiovascular disease for Black/African American men is 291.6 cases per 100,000 population, nearly twice that of the county's average. Chatham County men overall suffer from cardiovascular disease at 194.9 cases per 100,000 population. There are similar disparities for hospitalization rates.⁹⁹

Additionally, high blood pressure, also called hypertension, was a primary or contributing cause to more than half a million deaths in the U.S. in 2019. Nearly half of U.S. adults (47.0%) have hypertension, with just less than a quarter (24.0%) having it under control.¹⁰⁹ More than 1 in 3 North Carolina adults (35.1%) have been diagnosed with high blood pressure¹¹⁰, while the Chatham County self-reported rate is closer to the national percentage (46.8%).⁸³

Diabetes

There are three types of diabetes: Type 1, Type 2, and gestational. Type 1 occurs in 5-10% of people who are diagnosed with the disease and is caused by an autoimmune reaction. Type 2 is the primary type of diabetes, making up 90-95% of diabetes diagnoses. It develops over time, is usually diagnosed in adults, and can often be prevented or delayed through lifestyle factors such as healthy eating and physical activity. Gestational diabetes develops during pregnancy among those who have never had diabetes and usually goes away after the pregnancy is over but increases the risk of type 2 diabetes later in life for both mother and child.¹¹¹

An estimated 37.3 million adults in the United States have diabetes, with about 20% unaware they have it. Diabetes is the seventh-leading cause of death in the country and the top cause of kidney failure, lower-limb amputations, and adult blindness. In the last two decades, the number of adults who have been diagnosed with diabetes has more than doubled.¹¹⁵ As of

Spotlight on Resources: *Chatham County Public Health Department Nutrition Services*

The Nutrition Services team of the Chatham County Public Health Department offers programs designed for diabetes prevention and management, as well as nutrition. The Diabetes Prevention Program is a 24-week curriculum designed to help adults prevent development of type 2 diabetes by focusing on food choices, increasing physical activity, and managing stress. Diabetes Self-Management Education is a referral program for people with diabetes to help manage their health and learn about healthy choices. The Nutrition Counseling program offers one-on-one sessions with a registered dietitian to help participants prevent and/or manage health conditions through eating choices. Find more on these programs at www.chathamcountync.gov/publichealth.

2018, 1 in 10 adults in North Carolina have been diagnosed with diabetes.¹¹¹

In 2021, more than 1 in 6 Chatham County adults (16.8%) reported having been told by a health professional that they have diabetes (not during pregnancy),⁸³ a slight increase from the 15.5% of adults saying the same in 2018.¹¹² Diabetes is also one of the leading causes of death in Chatham County: 7th highest in 2019, 8th highest in 2015, and 5th highest in 2010.⁹⁹ In Chatham County, Black/African American residents and males are more likely to be diagnosed with¹¹³ and to die from diabetes.¹¹⁴

Further, more than 1 in 3 adults in the United States have prediabetes, meaning that their blood sugar levels are higher than normal but not high enough yet to be diagnosed as diabetes. Concerningly, around 4 in 5 of those adults do not know that they have prediabetes. Having prediabetes increases someone's risk for type 2 diabetes, heart disease, and stroke.¹¹⁵

Diabetes prevention and management can greatly impact quality of life and over time, and untreated diabetes can lead to heart disease, vision loss, and kidney disease, among other outcomes.¹¹⁵ For those already diagnosed, the CDC recommends eating well, being physically active, reaching and maintaining a healthy weight, and managing stress and mental health as ways to manage diabetes.¹¹⁶

Arthritis

Arthritis is a general term for illnesses or conditions that affect the joints or areas around the joints in a person's body. Types of arthritis include rheumatoid arthritis, gout, lupus, or fibromyalgia. An estimated 58.5 million U.S. adults have arthritis (a number that will likely grow as the population gets older), and arthritis is the leading cause of work disability in the country.¹¹⁷ Nearly 2 in 5 Chatham County adults (39.5%) report having a type of arthritis⁸³, a significantly higher rate than the state percentage (27.0%).¹¹⁸ This is likely due to the high percentage of senior adults in Chatham County compared to North Carolina.

Lung Disease

Lung diseases are illnesses that affect the working of the lungs, which in turn cause airflow restriction and breathing-related problems. The primary lung disease is chronic obstructive pulmonary disease (COPD), which affects around 16 million Americans, or 6.4% of the population.¹¹⁹ Approximately 8% of North Carolina adults report ever being diagnosed with COPD, emphysema, or chronic bronchitis.¹²⁰ Around 3% of Chatham adults report being diagnosed with a lung disease.⁸³

Physical Activity

Physical activity can take many forms: playing sports, taking a walk, lifting weights, going for a run, doing yoga, and more. Regular physical activity can improve brain health, help individuals maintain or lose weight, reduce risk for multiple diseases, strengthen bones and muscles, and extend the lifespan.¹²¹ In 2020, around 1 in 4 American adults (23.5%) reported that they engaged in no leisure-time physical activity in the previous month, while about half said they were physically active at least 150 minutes each week; North Carolina rates were similar for both metrics.^{122,123}

More than half of Chatham County adults report doing at least an hour's worth of physical activity in a typical day, including running, walking, exercise classes, sports, golf, or gardening. Around 16% reported getting less than 30 minutes a day. The most common reason shared for not engaging in physical

activity was that respondents did not have time (36.7%), were too tired (30.5%), or did not like to exercise (10.8%). Women were significantly more likely than men to report barriers to physical activity, such as expense or having no one to exercise with. Hispanic/Latinx adults were also more likely to report barriers to physical activity than the overall population, in particular not having time, not having childcare, and not having a safe place to exercise.⁸³

More than 40% of Chatham County high schoolers reported frequently engaging in physical activity at least 60 minutes per day. White students (48.8%) were significantly more likely to report this than Hispanic/Latinx students (32.1%) or Black/African American students (29.5%). Around 40% of Chatham high schoolers also reported attending a physical education class at least once a week. Male students were more likely than female students to engage these activities.¹²⁴

FIGURE 19: PERCENT OF CHATHAM COUNTY ADULTS REPORTING BARRIERS TO PHYSICAL ACTIVITY, 2021⁸³

Not having enough time and being too tired are the most common barriers to physical activity for Chatham County adults.



In Chatham County Schools, students in kindergarten through eighth grade have at least 30 minutes of moderate to vigorous physical activity during a normal school day. This can come from a physical education class or through recess, dance, “classroom energizers,” and/or other curriculum-based physical activity programs. There is no requirement listed for high school students.¹²⁵

Nutrition

Access to healthy foods is a major driver of health. Poor nutrition can lead to health problems and diseases like obesity, heart disease, and some cancers.¹²⁶ Nationally, less than 1 in 10 children and adults eat the recommended daily servings of vegetables, and only 4 in 10 children and less than 1 in 7 adults eat enough fruit—about 40% of children and adults in the country consume fruit less than once a day. North Carolina’s adult consumption rates are close to the national rates, but more high schoolers report eating fruits and vegetables less than once a day in the state compared to the country overall.¹²⁷

More than half of Chatham high schoolers report eating fruit at least once per day, with Hispanic/Latinx students (59.7%) more likely to do so than Black/African American students (51.0%) or White students (50.6%). Female students were also more likely to report eating fruit compared to their male counterparts. Around 9% of Chatham high schoolers reported not eating any vegetables within the last week, while 12% reported eating vegetables at least three times a day. More than 1 in 6 Chatham high schoolers reported drinking soda at least once a day, with males (23.4%) again much more likely to do so than females (13.1%).¹²⁴ Additionally, White students (33.6%) were more than

twice as likely as Black/African American students (12.7%) and more likely than Hispanic/Latinx students (24.9%) to eat breakfast every day.¹²⁴

More than 9 in 10 Chatham County adults (94.1%) report eating at least one serving of fruits and vegetables each day – one serving is defined as one small apple, one banana, or a half cup of broccoli. More than half of all adults report eating just 1-2 servings. More than 1 in 6 (17.2%) Chatham adults say they always eat healthy snacks and meals.⁸³

Healthy eating is impacted by many factors, including distance to grocery stores and transportation options available, cost, and time available for people to prepare meals, which are in turn heavily influenced by social factors including poverty and racism, employment, and the built environment. Transportation and distance to healthy food stores can be especially impactful on food access in rural areas.¹²⁸ In Chatham County, 14% of Hispanic/Latinx residents reported stores not having good options as a barrier to healthy eating, significantly more than the overall county average of 3%.⁸³ The main reason

FIGURE 20: PERCENT OF CHATHAM COUNTY ADULTS REPORTING BARRIERS TO EATING HEALTHY FOODS, 2021⁸³

Convenience is the top barrier to eating healthy foods for Chatham County adults.



Chatham adults overall gave for not eating healthy snacks and meals is convenience (41.3%), followed by taste (23.4%) and not having enough time to shop or prepare foods (18.9%). See the Food Insecurity section for more on this topic.

The Chatham County Public Health Department offers a nutrition counseling program operated by a registered dietitian. Participants work with the dietitian to create a personal plan to lose weight, manage diabetes, and lower blood pressure and cholesterol. Most insurance is accepted, and a sliding scale fee is offered for uninsured clients.¹²⁹

Mental Health

Adverse Childhood Experiences (ACEs)

Adverse childhood experiences (ACEs) are stressful or potentially traumatizing events that occur during childhood, including experiencing or witnessing violence, abuse, or neglect, having a family member attempt or die by suicide, or growing up in a household with substance abuse present.¹³⁰ ACEs are linked to higher risk of a variety of mental and physical health outcomes throughout life.¹³¹

Across the United States, 1 in 6 adults have experienced four or more types of ACEs, 61% of adults had experienced at least one ACE, and at least five of the top ten leading causes of death are associated with ACEs.¹³¹ In 2018, 14.4% of Chatham County adults reported having high levels of childhood stress.¹³²

In 2018-2019, 41.7% of North Carolina children have experienced at least one ACE, compared to 39.8% of United States children overall. Black/African American children were more likely to have an ACE. Additionally, 43.9% of North Carolina children with two or more ACEs had a chronic health condition, compared to 20.3% of children with one ACE and 16.1% of children with no ACEs.¹³³

Many Chatham County agencies and nonprofits are designed to tackle the underlying issues that lead to ACEs. Tych Cowdin, the executive director of Communities in Schools of Chatham County, told the Chatham News + Record that it “will take innovation, creative and collaborative problem solving, and a resilient mindset to break the vicious cycle generated by generations of youth growing up with ACEs. The outcome will be a community full of resilient leaders prepared to thrive in a world full of evolving challenges and opportunities.”¹³⁴

Caregiver Services

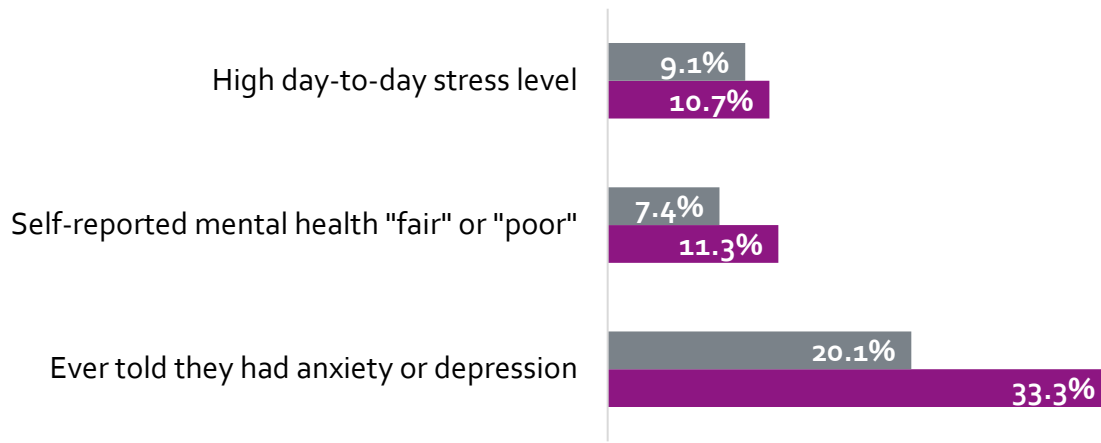
Caregivers provide direct care and assistance to those who need assistance with daily tasks, such as those with chronic illnesses, foster children, children or adults with disabilities, or senior adults. Caregiving can be provided professionally, but in many cases, caregivers are family members who provide informal or unpaid care, which can lead to increased stress and financial hardship.¹³⁵ Nationally, 38% of caregivers of someone aged 50 and older reported high levels of emotional stress, 19% reported a high level of physical strain, and 17% reported a high level of financial strain.¹³⁶

More than 6 in 10 caregivers (61%) nationwide work at least part-time alongside caregiving, and 23% say caregiving has made their health worse.¹³⁷ According to former Chatham County Council on Aging Caregiver Specialist Susan Hardy, “[M]any caregivers are working outside the home when they are confronted with the role of becoming a caregiver...[t]hey must choose between stopping work prematurely or finding help outside of the home. Sometimes there is no choice. The lack of finances leaves them no choice, or if the money is there, then the lack of available qualified help in their community requires them to stop working and take on the full-time caregiver role.”¹³⁸

More than 14% of Chatham County households have someone who needs daily care, and nearly a quarter of Chatham adults (22.2%) are providing care for any family member, including medical care, financial management, daily personal care, and household assistance. Nearly 1 in 10 Chatham adults are caring for an elderly or disabled parent (8.5%) or grandparent (1.29%), while 1 in 20 serves as caregiver for a family member with a chronic illness (5.6%). Hispanic/Latinx adults were notably more likely to report providing caregiving services compared to White, non-Hispanic or Black adults.¹³⁹

FIGURE 21: MENTAL HEALTH INDICATORS IN CHATHAM COUNTY, 2018 AND 2021^{132,139}

Several key mental health indicators worsened among adults in Chatham County from 2018 to 2021.



The need for caregiving has been growing; there were 53 million Americans providing unpaid care to an adult or child with special needs in 2020, compared to 43.5 million in 2015. Additionally, the percentage of Americans caring for more than one person or for someone with Alzheimer’s disease or dementia has grown in that time.¹³⁷ The COVID-19 pandemic also created increased need for caregiving.¹⁴⁰

Chatham County’s large and fast-growing senior population means there is a significant need for caregiver education and related services. The Chatham County Council on Aging provides resources such as “Powerful Tools for Caregivers” classes and weekly support groups. There are also services not exclusively for caregivers but can help with their efforts, including free incontinence supplies, assistive equipment loans, and meal deliveries. Resources like this will be critical to not only support Chatham’s caregivers, but the people that rely on their care as well.

Depression & Anxiety

In the three years since the last Community Assessment, several measures indicate that Chatham County’s overall mental health has been negatively impacted. One-third of

Chatham adults now say they have ever been told by a doctor they had anxiety or depression, compared to about one-fifth in 2018.

Additionally, 11.3% of Chatham adults self-reported their mental health status as “fair” or “poor,” compared to just 7.4% in 2018. Finally, 23.7% of Chatham adults reported that anxiety and/or depression kept them from doing usual activities “sometimes” or “often,” with adults under age 59 and women more likely to report this compared to older adults and men.^{132,139}

Women were more likely to report that they or someone in their household had sought mental health services.¹³⁹

Stress, particularly chronic stress and major stressful events, can contribute to or worsen anxiety and depression.¹⁴¹ In 2021, 45.8% of adults in Chatham County described their day-to-day stress as “high” or “moderate”, with the most common stressors reported as social issues such as politics and the economy, money, work or school, and health concerns. Notably, more than 13% of both Black and Hispanic/Latinx adults reported discrimination as a cause of stress compared to 2% of White adults. Over 40% of Chatham adults also reported increased feelings of stress or anxiety because of the COVID-19 pandemic.¹³⁹

Depression

The CDC reports that 4.7% of American adults have regular feelings of depression, while 11.2% of emergency department visits had depression indicated on the medical record.¹⁴² As of 2019, 18.5% of adults reported experiencing at least mild symptoms of depression in the previous two weeks, with those aged 18-29 (21%) and women (22%) most likely to experience any severity of depression.¹⁴³

In 2020, 4.5% of emergency department visits by Chatham County residents were related to depression, compared to 3.6% of visits by the entire North Carolina population. Female residents (5.8% of visits) were more likely than male residents (3.1%) to make ED visits due to depression.¹⁴⁴

In 2019, 36.1% of Chatham County high school students said they had felt sad or hopeless almost every day for two or more weeks in a row, enough that they stopped doing some usual activities, at some point in the previous 12 months, which are among the primary symptoms of depression.^{145,146} The survey found that female students (44.6%) were more likely to experience depression than males (27.3%), with that disparity significant across all demographics where data was available.¹⁴⁶

Additionally, 32.4% of Chatham middle school students reported the same feelings, an increase of nearly nine percentage points from 2017. Again, female students (42.1%) were more likely to say they felt sad or hopeless almost every day for two weeks or more in the past year than male students (22.4%); Hispanic/Latinx students were particularly affected by depressive symptoms (39.9%), with Hispanic/Latinx females (56.7%) reporting the highest burden among all reported groups.¹⁴⁷

Anxiety

Anxiety disorders affect around 18.1% of the U.S. population every year, making it the most

common mental illness in the United States. Unfortunately, only about 37% of those with an anxiety disorder receive treatment.¹⁴⁸ Additionally, 7.1% of children aged 3-17 years, approximately 4.4 million people, have been diagnosed with anxiety. Just less than 60% of that age group with anxiety has received treatment.¹⁴⁹

In 2020, 5.4% of emergency department visits by Chatham County residents were related to anxiety, compared to 4.5% of the North Carolina population. Female residents (6.9% of visits) were significantly more likely than male residents (3.8%) to make ED visits due to anxiety.¹⁴⁴

Depression & Anxiety in COVID-19

The COVID-19 pandemic had a significant impact on mental health for many people. From August 2020 to February 2021, the percentage of adults nationally with recent symptoms of anxiety or a depressive disorder jumped from 36.4% to 41.5%, and those reporting an unmet mental health care need rose from 9.2% to 11.7%. Adults ages 18-29 and those with less than a high school education saw the largest increases.¹⁵⁰ Anxiety and depression rates of U.S. adults were about 4 times higher between April 2020 and August 2021 than they were in 2019, with some of the largest increases among males, Asian Americans, young adults, and parents with children in the home.¹⁵¹ More than 2 in 5 (42.7%) of Chatham County adults reported feeling more stress or anxiety because of COVID-19.¹³⁹

Young people were particularly affected by the pandemic; the U.S. Surgeon General reported, "rates of psychological distress among young people, including symptoms of anxiety, depression, and other mental health disorders, have increased," and emergency department visits for suspected suicide attempts increased by 51% for adolescent girls from early 2019 to early 2021.¹⁵²

These issues were also seen at the local level; within two months of the first COVID-19 case reported in Chatham, local therapist Kristin Krippa told the Chatham News + Record, “This is an ongoing crisis and there’s no particular end in sight for some people. So they have much higher stress levels — anxiety, depression, sleep problems. And these are all in people that don’t necessarily typically suffer from those issues.” Dr. Luke Smith, the director of El Futuro, a mental health provider that has a clinic in Siler City primarily serving Hispanic/Latinx community members, said his practice saw an increased demand for services, citing the unique challenge for many of his patients who worked in “essential” jobs like construction, manufacturing, and factories.¹⁵³ Chatham County Sheriff Mike Roberson said his office saw an increase in calls related to depression, suicide, and mental health in the early months of COVID-19.¹⁵⁴

Access to Mental Health Services

Mental Health America, a national mental health-focused nonprofit, ranked North Carolina 44th of the 50 states and Washington, D.C., in access to mental health care, a metric that included number of adults and youth with mental health issues who did not receive treatment, who were uninsured, or had insurance that did not cover mental and emotional health, among other measures. North Carolina ranked in the bottom half in all but one category, the ratio of population to mental health care workers (410:1, tied for 26th).¹⁵⁵

Nearly a quarter (23.6%) of all adults with a mental illness across the U.S. said they were not able to get the treatment they needed, a number that hasn’t decreased since 2011. Further, 59.6% of youth with major depression do not receive any mental health treatment. North Carolina is slightly above the national average in both of those cases, at 26.5% and 60.2%, respectively.¹⁵⁵

In Chatham County, 20.6% of households have sought mental health services while living in Chatham, with nearly two-thirds saying such services were available. However, of those who sought services, only 36.3% said they were easy to find, 36.2% called them “high quality,” and around a quarter (26.4%) said they were affordable.¹³⁹

Several organizations do provide a range of mental health services available to Chatham residents, including Daymark Recovery Services, the primary provider of mental health and substance abuse services in the county. Located in Siler City, the Chatham Center offers a walk-in clinic, comprehensive clinical assessments, and individual and group therapy, among other options. Daymark serves residents with Medicaid with no copays and provides a sliding scale fee for uninsured residents.¹⁵⁶

Vaya Health is the state-supported Local Management Organization/Managed Care Organization (LME/MCO) that manages Medicaid, federal, state and local funding for services and supports related to mental health, substance use and intellectual/developmental disabilities in Chatham County. Vaya became the LME/MCO for Chatham in early 2022, taking over for Cardinal Innovations. Vaya offers a 24/7 crisis line at 1-800-849-6127 that is toll free. El Futuro offers bilingual mental health and substance abuse services designed for the Hispanic/Latinx population. KidSCOPE provides mental and emotional health services for children ages 0-5 and their families. There are also several therapists and counselors who have private practices in Chatham County with different specialties.

Chatham County Schools has several mental health professionals on staff and contracts with Pittsboro-based Renaissance Wellness Services to provide additional support. According to a 2021 article in the Chatham News + Record, Renaissance’s staff worked regularly with about 150 students once a week. In the fall of 2021,

the district hired two additional counselors and three more social workers with federal COVID-19 relief funding.¹⁵⁷

Suicide

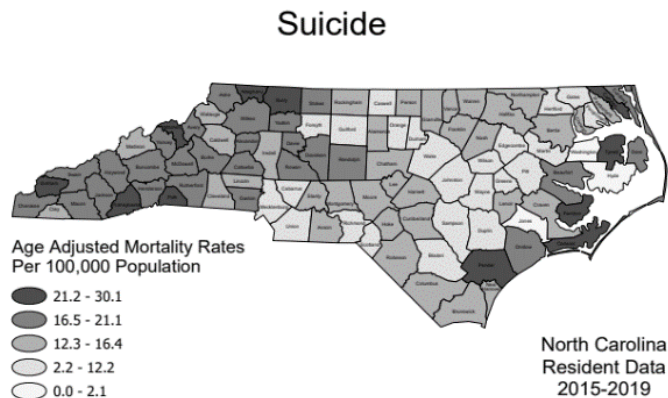
*If you or someone you know needs help, call the National Suicide Prevention Lifeline (suicidepreventionlifeline.org) at **1-800-273-TALK (8255)**, or text the Crisis Text Line (text **HELLO to 741741**). You can also contact the 24/7 Vaya Health Access to Care Line at 1-800-849-6127 (for individuals who are hearing-impaired, dial 711 to reach NC Relay).*

Suicide is the intentional taking of one’s own life. Risk factors for suicide include depression, financial stress, history of adverse childhood experiences (ACEs), or relationship problems. These risk factors increase the possibility of suicide but may not be the causal factor in every attempt.¹⁵⁸

According to the CDC, suicide rates increased by 33% between 1999 and 2019, and suicide was responsible for more than 47,500 deaths in 2019. Additionally that year, 12 million American adults seriously considered suicide, 3.5 million made a suicide plan, and 1.4 million attempted suicide. Suicide is the second-leading cause of death for people ages 10-34.¹⁵⁹ Certain groups have substantially higher rates of suicide than the general population, including veterans, people who live in rural areas, sexual and gender identity minorities, middle-aged adults, and Indigenous/tribal populations.¹⁶⁰

Chatham County’s suicide rate nearly doubled from 2018 (9.2 suicides per 100,000 population) to 2019 (17.9 suicides per 100,000 population) and was higher than both the state (14.7) and national (13.9) rates in that year. White residents, men, and individuals aged 25-34 were more likely to commit suicide. More than

FIGURE 22: AGE ADJUSTED MORTALITY RATE FROM SUICIDE PER 100,000, 2015-2019¹⁶¹



half (57.4%) of those suicides involved firearms.^{162,163} From 2016-2020, suicide was not in the top ten causes of death in Chatham County among the population overall but was in the top 5 for all age groups under 65.¹⁶⁴

Youth and Suicide

In 2019, more than 1 of 6 Chatham County high schoolers (16.8%) reported having seriously considered attempting suicide. Additionally, more than 1 in 7 said they had made a suicide plan (15.1%) and 1 in 9 said they had made a suicide attempt (11.1%).¹⁴⁶ Among Chatham middle school students, 26.1% said they had ever seriously thought about suicide (26.1%), nearly 1 in 5 said they had made a plan (18.8%), and around 1 in 7 said they had ever attempted suicide (13.6%); girls were more likely than their male peers to consider, plan, and attempt to commit suicide across demographic groups.¹⁴⁷

Additionally, 16% of Black/African American high schoolers and 14% of Hispanic/Latinx high schoolers said they had attempted suicide, compared to 7% of White students. Nationally, suicide was the second leading cause of death for Hispanic/Latinx individuals ages 15 to 34. Suicide attempts for Hispanic/Latinx girls in high school were 30 percent higher than for non-Hispanic White girls in the same age group.¹⁶⁵

Spotlight on Resources: *The National Suicide Prevention Lifeline*

The National Suicide Prevention Lifeline (1-800-273-8255) offers people in crisis a chance to talk to a trained counselor. Since its creation in 2005, more than 20 million calls have been made to the lifeline.¹ Starting July 16, 2022, the call will become easier, as the new number will be simply “988.” The current number will remain active as well.¹ Additionally, Vaya Health, the public managed care organization in Chatham County, provides a 24/7 care line at 1-800-849-6127, and a line for those who are hearing-impaired at 711.¹

The Chatham News + Record published a news article in January 2019 noting these disparities and interviewed three Hispanic/Latinx teenage girls asking about this difference. One interviewee shared, “I feel like there’s so much more pressure on a Latino person than there is a white person. I feel like we all try so hard to get out of where we came from, and we have such pressure to be bigger and better than our parents are.” The teens interviewed mentioned cultural stigma, concerns about immigration enforcement, and first-hand discrimination among the stressors.¹⁶⁶

An October 2020 report to Congress from the U.S. Department of Health & Human Services found that Black/African American youth ages 10-17 who had committed suicide were less likely to have received mental health treatment, been diagnosed with a mental health problem, or disclosed an intent to commit suicide. As the report stated, “Lower rates of current or past mental health problems despite higher rates of past suicide attempts suggests that Black youth have limited access to and/or utilization of mental health services.”¹⁶⁷

Disparities in suicide attempts among Chatham County youth were also seen by sexual orientation; in 2019, 23% of gay, lesbian, or bisexual Chatham County high schoolers said they had attempted suicide in the previous year compared to 9% of their heterosexual peers.¹⁴⁶ These numbers generally reflect national numbers from 2019: 23.4% and 6.4%,

respectively.¹⁶⁸ That same year, the nonprofit The Trevor Project published its first national survey on LGBTQ youth mental health. The report found that 71% of LGBTQ youth surveyed had experienced discrimination due to their sexual orientation or gender identity, 71% reported the primary symptoms of depression, and 2 in 3 reported that someone tried to convince them to change their sexual orientation or gender identity. Rates of suicidal ideation and suicide attempts were much higher in transgender and non-binary youth.¹⁶⁹

Intellectual and Developmental (I/DD) Services

Intellectual and Developmental Disabilities (I/DD) is a term used to describe a range of differences in individuals that are usually present at birth and affect development and functioning. These can include cerebral palsy, Down syndrome, degenerative disorders, and congenital hypothyroidism.¹⁷⁰ Around 1 in 20 people in the United States (5.1%), North Carolina (5.4%), and Chatham County (5.2%) live with a cognitive difficulty.¹⁷¹

Like many health-related services in Chatham County, there is a dearth of occupational therapists in Chatham County to serve the population of individuals with IDD. In 2020, there were just 1.67 occupational therapists per 10,000 population in the county, compared to 3.71 in North Carolina overall.¹⁷²

Spotlight on Resources: *Chatham Trades*

Chatham Trades, a nonprofit based in Siler City, provides services to adults with intellectual and developmental disabilities. The organization has been in existence since 1980 and moved into a new 30,000-square foot facility in 2020. Chatham Trades provides adults with IDD opportunities to develop social and professional skills through work with local industries. Participants are paid regular wages. Chatham Trades also offers more intensive services that focus on skill-building and creative outlets. Learn more about Chatham Trades at <https://chathamtrades.org/>.

Chatham County Housing Authority offers housing vouchers to assist low-income families, the elderly, and people with disabilities; among recipients of these vouchers, 12% are nonelderly individuals with disabilities and 17% are elderly individuals with disabilities. The state utilization rate for this type of voucher is 20% for both age groups, and the national rates are 20% for non-elderly and 18% for elderly.¹⁷²

Chatham County residents with I/DDs can receive N.C. Innovations Waivers from managed care organizations. These programs sponsor day support, in-home skill building, personal care services, and caregiver respite, among other needs, which are not available under traditional Medicaid plans. In 2018, more than 11,000 individuals in North Carolina seeking these services were on a waitlist, also referred to as the Registry of Unmet Needs.¹⁷³ According to the Duke Margolis Center for Health Policy, non-Hispanic Black/African Americans and Hispanic/Latinx individuals are less likely to receive a waiver than White individuals, while individuals 21 years of age or younger, females, and rural residents are also less likely than average.

Vaya Health is the administrator of the Innovations Waiver program in Chatham County, taking over from Cardinal Innovations on January 1, 2022. Wait times may increase for this program because of the consolidation of Cardinal and Vaya's waitlists.¹⁷⁴

The NC Department of Public Instruction's Exceptional Children's (EC) program is designed to "ensure that students with disabilities develop intellectually, physically, emotionally, and vocationally through the provision of an appropriated individualized education program in the least restrictive environment."¹⁷⁵ As of December 2021, Chatham County Schools served 1,122 students in the EC program, making up around 12.7% of the student population.¹⁷⁶

Healthcare

Health Insurance

Nationwide, health insurance coverage is a strong predictor of both healthcare access and health outcomes. According to a report by the American Hospital Association, “Adult Medicaid enrollees are five times more likely to have regular sources of care and four times more likely to receive preventative care services than individuals without coverage” and “individuals with coverage are more likely to obtain an early diagnosis and treatment, which may ultimately contribute to improved health outcomes.”¹⁷⁷ Local data reflects this as well, with nearly half (47.3%) of Chatham residents who do not have a regular healthcare provider citing a lack of health insurance as a barrier.¹⁷⁸

While the proportion of adults who do not have health insurance has decreased in recent years both locally and nationwide with the passage of the Patient Protection and Affordable Care Act in 2010 and expansion of Medicaid eligibility in many states, not including North Carolina,¹⁷⁹ many still struggle to get coverage. In 2021,

10.1% of Chatham County adults reported not having health insurance at some time in

the past year, aligning with the percentage who reported not having health insurance in 2018 (10.7%).^{2,180} This is similar to North Carolina as a whole, where 10.7% of residents lacked health insurance as of 2020.¹⁸¹ Among those without coverage in the county, half reported insurance being too expensive as the reason.²

Hispanic/Latinx residents in Chatham County were significantly more likely to report a lack of

health insurance in the past year, compared to adults in the county overall¹⁷⁸. Younger adults, those who are unemployed, and non-citizens were also more likely to not have health insurance¹⁸¹.

In Chatham County, just over 10,000 residents are enrolled in Medicare¹⁸² and nearly 12,000, or approximately 15% of the population, are covered by Medicaid (compared to nearly 25% statewide).¹⁸³ In the 2021 Chatham County Community Survey, 15.4% of respondents cited “More affordable health coverage/insurance” as a top county health priority, ranking it 17th (and 18th on the supplemental survey) among all issues.²

Expanding Medicaid eligibility in North Carolina remains a topic of discussion at the state level, as the Kaiser Family Foundation estimates that 372,400 uninsured nonelderly adults, or 37% of this population, would become eligible for coverage if the program were to expand. Nearly 3 out of 4 of these individuals live below the poverty level, and half are people of color.³

In 2021, North Carolina’s Medicaid system underwent a substantial transformation from a fee-for-service to a managed care approach operated by privately run

health plans. This transition was approved by the NC General Assembly in 2015 and took effect July 1, 2021. In late 2022, tailored plans for those with behavioral health or intellectual and developmental disabilities (I/DD) will become available as part of Medicaid Transformation.¹⁸⁴

CHATHAM TALKS...HEALTHCARE

Some Chatham County residents reported a lack of accessible medical care and resources.

Spotlight on Resources: *Piedmont Health Services*

Piedmont Health (PHS) serves as Chatham County’s Federally-Qualified Health Center and accepts Medicare and Medicaid patients for a number of services, including primary care, prenatal care, immunizations, pharmacy, dental care, and administration of the county’s Women, Infants, and Children (WIC) program. PHS has two locations in Chatham County, one in Siler City and one in Moncure, and has recently added telehealth and teledentistry. Piedmont Health has also been on the frontlines of the COVID-19 pandemic, offering testing and vaccinations. To learn more about PHS, visit www.piedmonthhealth.org.

Dental Care

According to CDC’s Division of Oral Health, oral health plays a critical role in a range of both social and health outcomes, from the ability to eat and self-esteem to school performance, productivity, and cancer.¹⁸⁵ As such, dental care is an important component of overall healthcare, accounting for \$124 billion in costs annually nationwide.¹⁸⁶

According to the 2021 CCCS, 69.2% of Chatham adults reported having visited the dentist for a routine visit in the past year,¹⁷⁸ up from 65.2% in 2018.¹⁸⁰ However, 2.1% reported never having a routine dental visit, up from 0.3% in 2018, and 10.8% reported having

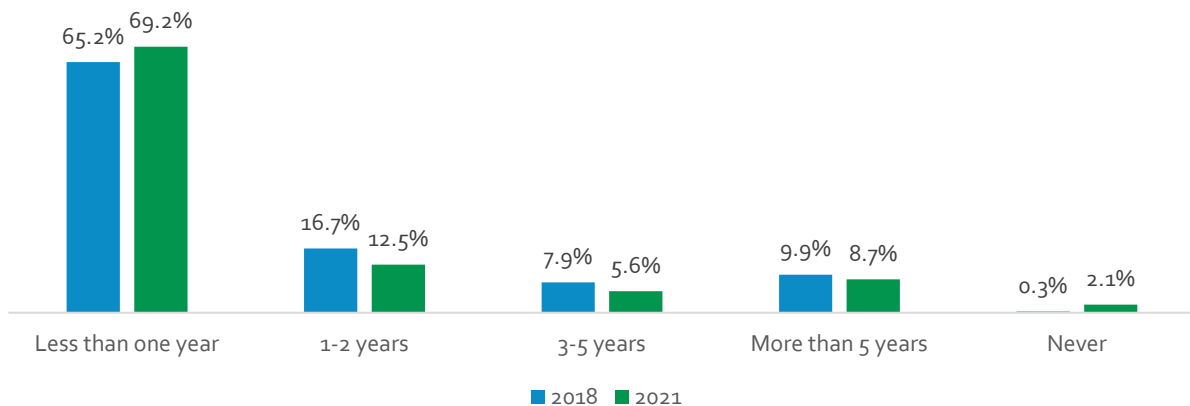
trouble accessing a dentist in the past year.^{178,180} Three-quarters of white, non-Hispanic adults reported a routine dental visit in the past year, compared to 59% of Black adults and 54% of Hispanic/Latinx adults¹⁷⁸. While many Chatham residents access medical care in nearby urban areas, the number of dentists per 10,000 population in Chatham County (2.19) is less than half of what it is statewide (5.25).¹⁸⁷

The importance of good oral health begins early in life. In North Carolina Public Health Region 5, which includes Chatham County, 16.8% of kindergarteners had untreated oral decay in 2019-2020, compared to 15.3% statewide. Regionally, 5.0% of kindergarteners

FIGURE 23: ROUTINE DENTAL CARE VISITS IN CHATHAM COUNTY, 2018-2021¹⁻³

Chatham County residents were more likely to report a recent routine dental visit in **2021 vs. 2018**

However, more residents reported never having a routine dental visit in 2021



were in need of urgent dental care, compared to 2.4% in North Carolina. In addition to access to care, community-level strategies like fluoridating water can help to improve oral health. water can help to improve oral health. Regionally, 92.5% of public water systems receive fluoridated water.¹⁸⁸

Community Civic Participation

Around 84% of registered voters in Chatham voted in the 2020 election, a 5-percentage point increase from the 2018 election and 9 percentage points higher than the state average. That election cycle, 64.4% of Chatham’s registered voters voted early, nearly doubling the rate from 2018 (38%).¹⁸⁹ In fact, Chatham had the highest voter turnout in North Carolina in 2020, despite the COVID-19 pandemic and a countywide cyber incident. The county’s Board of Elections hired a record 120 new elections officials.¹⁹⁰

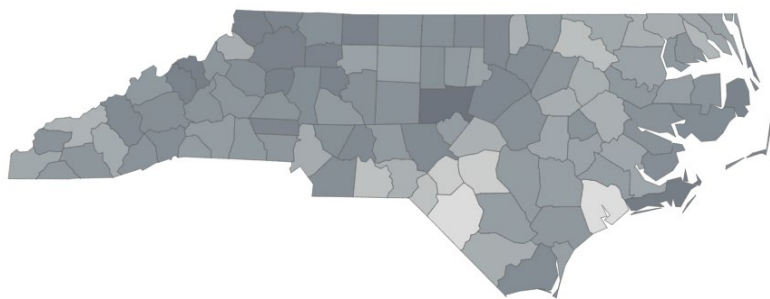
As of February 2022, 36% of registered voters in Chatham County were Democrats, 24% were Republican, 39% were unaffiliated, and less than 1% were Libertarian. The share of unaffiliated voters in Chatham increased from 28% in 2012 to 39% in 2022.¹⁹¹

Much effort has been put into making information about voting and government services available through multiple channels. That said, access to information about government or those in power is not equal for all and can be affected by many factors. Information is not always available in languages other than English, transportation barriers prevent some from going to the polls, and poor internet connection speeds in some part of the county can prohibit people from learning about their county

government and candidates for office. Additionally, news media coverage, especially local television news, focuses on larger, surrounding counties, state offices, or federal elections. These barriers and others may impact fair access to voting and civic participation.

FIGURE 24: VOTER TURNOUT BY COUNTY IN NORTH CAROLINA, 2020 GENERAL ELECTION

Chatham County had the highest voter turnout in the state in the 2020 General Election at 84%.



Government Representation

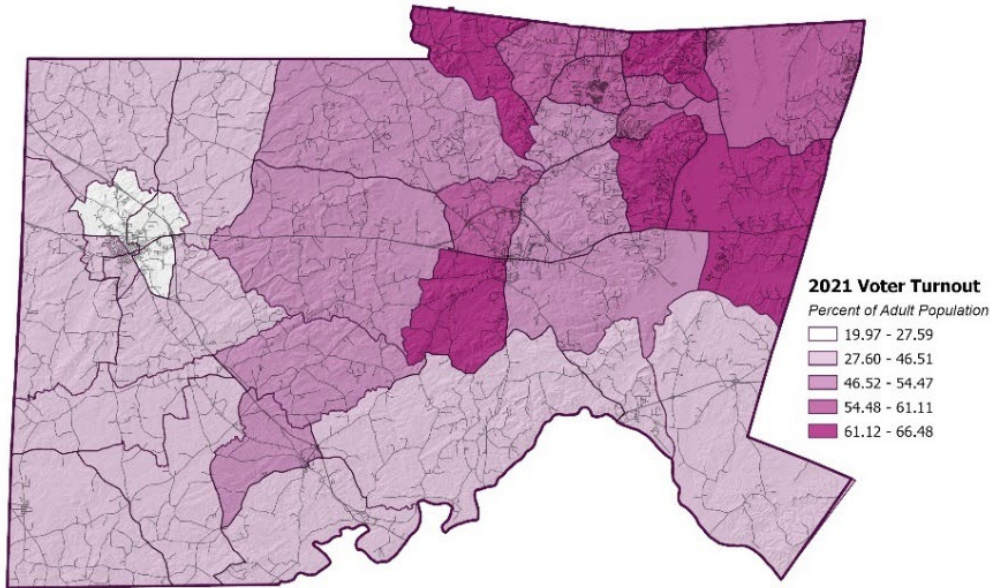
The Chatham County Board of Commissioners is made up of five members representing five districts of the county. All county residents vote on each seat, differentiating from some other governing bodies where district residents vote solely for their representative. The Chatham County Board of Education is also made up of five members representing five different districts and are elected by the same method as the commissioners. County residents also vote for countywide offices like Sheriff and Register of Deeds.

CHATHAM TALKS...CIVIC PARTICIPATION



Some in the community feel their voices are not heard and are not represented by those in power.

FIGURE 25: VOTER TURNOUT BY CENSUS BLOCK GROUP IN PAST 12 MONTHS AS OF 2021

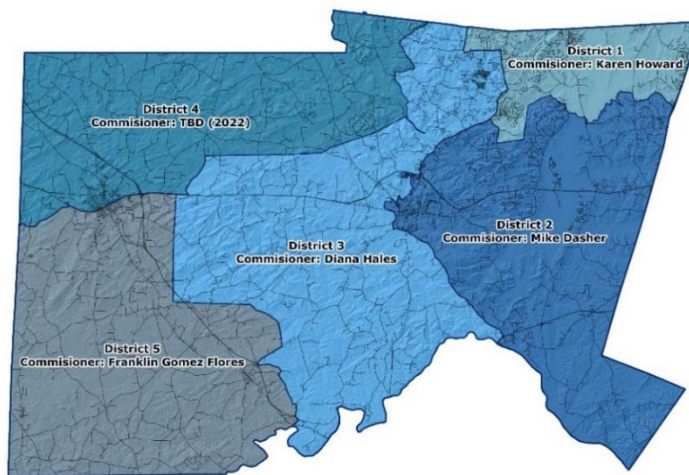


SOURCES: ESRI AND GFK MRI (2021), NCGS, NCDOT, EOC

Around 1 in 4 Chatham County adults (24.2%) agree or strongly agree that they feel represented by decisions made by Chatham County government, while slightly more (25.3%) say they disagree or strongly disagree with that statement. The plurality of county residents (47.2%) say they are neutral.¹⁹³ This sentiment was reflected in Story Circle

conversations held as part of the Community Assessment process. Members of multiple discussion groups said they do not feel their voice is adequately heard or represented or that they do not have avenues to provide input on needs and issues in the community.

FIGURE 26: CHATHAM COUNTY DISTRICTS AND ELECTED COMMISSIONERS, 2022



SOURCES: CHATHAM COUNTY GIS (2022), ESRI (2021), NCGS, NCDOT, EOC

Community Organizations and Volunteering

Participation in community organization and volunteering has a positive effect on physical, mental, and social well-being, as well as offering social connection opportunities.¹⁹² Many Chatham County adults count themselves as members of community organizations. Around 1 in 3 (33.6%) belong to a faith-based organization, 18.5% belong to a community or volunteer group, and 8.2% belong to a professional organization. In the open-ended response section of the Community Survey, respondents referenced environment and nature groups, country clubs, churches, political discussion groups, and yoga communities.¹⁹³

Spotlight on Resources: *Chatham Connecting*

Chatham Connecting is a free online resource that lists opportunities for Chatham County residents to be active in their community. The nonprofits and service agencies that post on the site focus on a wide array of areas, including human service, arts, the environment, and animal welfare. Youth can also find opportunities specifically for them. To learn more, visit www.chathamconnecting.org.

Those interested in volunteering opportunities can visit Chatham Connecting, a free online resource, to connect to volunteer opportunities, including roles for youth or opportunities to volunteer from home.¹⁹⁴ Community organizations and other nonprofits provide many important resources and supports to the Chatham community and played a significant role in the Chatham community's response to the COVID-19 pandemic, from food distribution to needy families and seniors, providing face masks and other personal protective equipment to health care workers, and facilitating COVID-19 vaccine clinics and educational sessions.

Communications/Internet

Internet

The internet is a powerful tool for accessing information and forming social connections. According to the Pew Research Center, 31% of U.S. adults report that they go online "almost constantly," an increase from 21% in 2015. Additionally, 85% of Americans say they go online daily and 8% say they go online several times a week or less often. Those most likely to go online "almost constantly" are adults aged 18-29 (48%), college graduates (42%), adults ages 30-49 (42%), and adults making \$75,000 or more (40%). Of the 7% of people who don't use the internet, the most likely group were adults 65 years of age and older (25%), those making less than

\$30,000 (14%), and those with a high school education or less (14%).¹⁹⁵

Nearly 1 in 7 (15.0%) Chatham adults say they do not feel comfortable accessing the internet, and nearly 1 in 5 (18.5%) report they do not have regular access to a reliable internet connection. Older residents were approximately twice as likely to report lack of comfort accessing information on the internet. More than one-third (35.4%) of 2021 Chatham County Community Survey respondents cited internet access as something they would like to see Chatham County focus on to improve health and quality of life in the community, second only to water quality.¹⁹³ During the Story Circles held for this Community Assessment process, community members expressed frustration with the county's internet coverage, saying good internet was hard to come by if you could not afford it or there was no high-speed internet in your area. Chatham County government has also officially recognized these concerns, stating, "[t]his situation is not acceptable and we continue to work on this issue."¹⁹⁶

In 2019, the North Carolina Department of Information Technology's Division of



CHATHAM TALKS...INTERNET



Quality internet access is not available to everyone in the county.

Broadband and Digital Equity produced a report ranking the availability, quality, and adoption of internet in counties across the state; the top county received a score of 100 and the bottom county received a score of 0. Chatham County received a score of 70.8. While all but 0.04% of the county's population had access to at least one internet provider, coverage across the county was inconsistent. Areas in the northeast part of Chatham had scores in the high 80s and 90s, while some parts of the western part of the county scored below 65. Around 1 in 6 residents (16.4%) did not have access to "quality internet service", per the Federal Communications Commission. Fiber technology, which has the largest data transmission capability of any existing technology, was only available to 38.1% of the population.¹⁹⁷

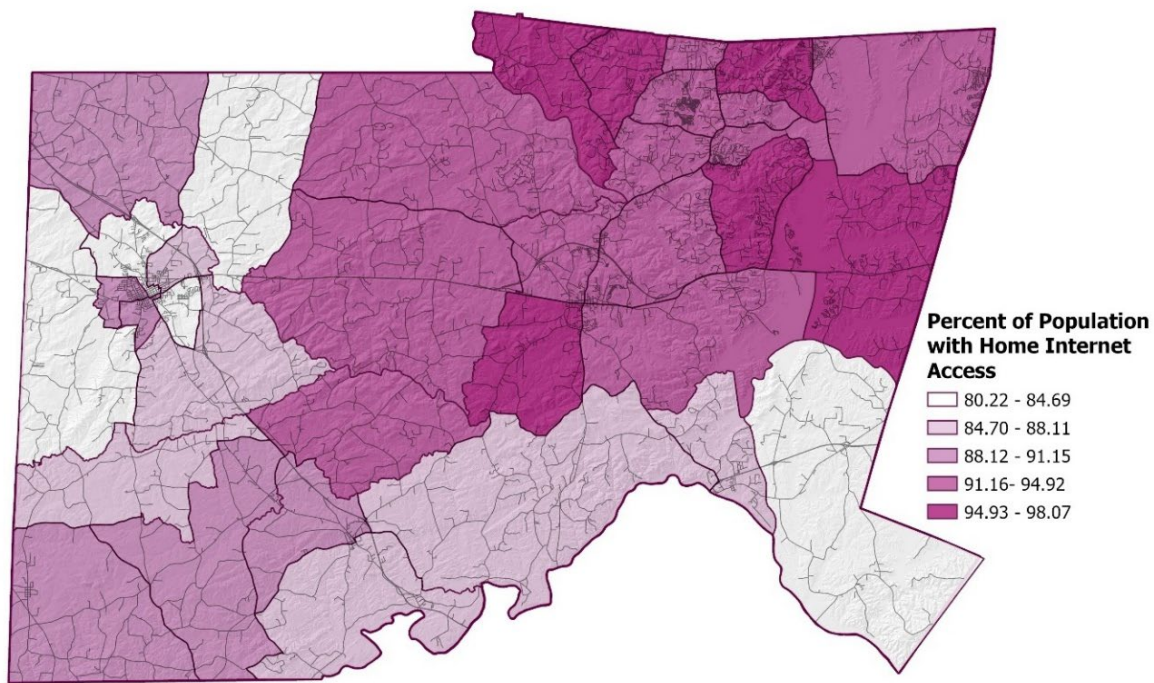
Regarding adoption or utilization of internet, Chatham County scored 51.3 on the index. Around 1 in 3 Chatham households did not have any internet subscription. Additionally, around

1 in 10 (10.7%) of households did not have a computing device.¹⁹⁸

Municipalities and county governments are not permitted under state law to create their own broadband service programs or infrastructure for existing providers. A March 2018 report from the NC League of Municipalities recommended that the state legislature open more opportunities for more public-private partnerships to expand broadband access across the state.¹⁹⁹

Expanding high-speed internet access across Chatham County would be a critical piece in improving the health and well-being of county residents. Many health-related resources are available online and through social media, and services like telehealth appointments are becoming more widespread. Improved and equitable access to internet could play a significant role in diminishing established health inequities by increasing access to resources and connection to providers.

FIGURE 27: HOME INTERNET ACCESS BY CENSUS BLOCK GROUP IN CHATHAM COUNTY, 2021



SOURCES: ESRI AND GFK MRI (2021), NCGS, NCDOT, EOC

Spotlight on Resources: *Chatham News + Record*

Chatham County's newspaper of record has been in existence since the late 19th century but got an update in 2018 when new ownership took over operations. Since then, the paper has expanded its web and social media presence and continues to provide local journalism and reporting. In April 2021, the Chatham News + Record began publishing its first Spanish-language edition, called "La Voz de Chatham," a quarterly publication. To learn more, visit www.chathamnewsrecord.com.

Internet access and COVID-19

Disparities in internet access and use were particularly impactful during the COVID-19 pandemic, many people began working from home, including students participating in remote learning. In April 2020, Tripp Crayton, then the principal of Jordan-Matthews High School in Siler City, said about 18 percent of his students did not have internet access. And while the school district gave out internet hotspots and laptops, that did not guarantee service because hotspots rely on reliable phone cell service, which is also not uniform throughout the county. The county's public libraries, which provide use of devices connected to internet free for residents, were closed to limit spread of the virus, but worked to provide access to their networks for those who could sit in library parking lots.²⁰⁰ More than 1,200 hotspots were requested by Chatham County Schools parents in the first months of the 2020-2021 school year, and the school district set up school bus "hot spot" locations, where buses would be equipped with Wi-Fi devices students could access if parked near the bus.²⁰¹

Social Media Use

The most popular social media platform for Chatham County adults is Facebook, with 63.6% of adults reporting they use it. Second most is YouTube (35.6%), followed by Instagram (25.3%), WhatsApp (14.2%), and Twitter (10.4%). TikTok, a much-newer social media site primarily used for sharing short video clips, was used by 10.3% of Chatham County adults. Men were twice as likely as

women in Chatham County to not use any social media platforms.¹⁹³

Local Information Sources

The primary sources of news and information about Chatham County include:¹⁹³

- Surrounding news television stations (WRAL, ABC11, CBS17, etc.): 63.9%
- Social media: 33.9%
- Chatham News + Record newspaper: 32.2%
- Nextdoor social network: 22.4%
- Chatham Chatlist email digest: 14.8%

Other outlets include Chatham Magazine, Chatham County Line, Chatham County government email notifications, the WNCA radio station in Siler City, and the Chatham County CodeRED emergency alert system.

Language and Communication

Nearly 1 in 7 Chatham County residents (13.7%) live in a home where a language other than English is spoken. Around 1 in 9 Chatham residents (11.2%) live in a house where Spanish is spoken, including nearly half of the population in Siler City (47.1%).²⁰²

Most Chatham County adults (93.4%) say they can access resources in their preferred language, while just 2.1% say they cannot.¹⁹³ Advocates say the number of Spanish-language resources has expanded in recent years, but that gaps persist, including translations for county alerts and hiring of bilingual staff.



CHATHAM TALKS...COMMUNICATION

Residents feel that not all services and activities are accessible to those who don't speak English as a first language.

At least three media outlets provide news and information in Spanish regarding Chatham County. The Qué Pasa Media Network, based in Raleigh, provides a Spanish-language newspaper and website that sometimes features Chatham County stories.²⁰³ La Ley 101.1 FM, a Spanish-language radio station, reaches Chatham County as well.²⁰⁴ And in April 2021, the Chatham News + Record published its first Spanish-language edition, called “La Voz de Chatham,” and has continued to do so on a quarterly basis after receiving a grant from the Facebook Journalism Project.²⁰⁵

The Hispanic Liaison, a nonprofit in Siler City serving the Hispanic/Latinx population, often works with residents to fill out important documents or find resources that are in Spanish. For more information about the Hispanic Liaison, visit www.hispanicliaison.org. The Chatham County Public Health Department employs multiple full-time interpreters and bilingual staff, as do other county departments.²⁰⁶ Improving access to Spanish-language resources is a crucial element in achieving equity in many areas in Chatham.

Discrimination/Racism

In August 2020, the Chatham County Board of Health adopted a resolution declaring structural racism as a public health crisis, in recognition of the injustice perpetuated through historic and continued disenfranchisement, disinvestment, and marginalization, and the resulting health inequities.²⁰⁷ Many health inequities are driven by social and economic policies and practices that create barriers to opportunity for marginalized groups, including racial and ethnic

minorities, low-income populations, disabled individuals, and the LGBTQ+ community, among others. Racism and other forms of discrimination, bias, and prejudice can take many forms, including structural, institutional, and interpersonal, all of which can disallow people from reaching their optimal health and well-being.²⁰⁸

The CDC calls racism “a serious threat to the public’s health,” stating, “[a] growing body of research shows that centuries of racism in this country (have) had a profound and negative impact on communities of color. The impact is pervasive and deeply embedded in our society—affecting where one lives, learns, works, worships, and plays and creating inequities in access to a range of social and economic benefits—such as housing, education, wealth, and employment. These conditions—often referred to as social determinants of health—are key drivers of health inequities within communities of color, placing those within these populations at greater risk for poor health outcomes.”

Chatham County, like much of the American South and the country as a whole, has a history of violence towards racial and ethnic minorities, including the enslavement of thousands of Black/African American residents. Census records suggest that just before the Civil War, in 1860, a full third of Chatham’s population was made up of enslaved persons (over 6,000 individuals), an increase from 17% (about 1,500 individuals) in 1790.²⁰⁹ The county was the location of six recorded lynchings of Black/African American residents, the last in 1921 when 18-year-old Eugene Daniel was killed without a trial and his killers went unpunished. The Chatham County Board of Commissioners issued a formal apology “for any part an elected official or appointed local official played” in the event in September 2021.²¹⁰ This history leaves a lasting impact on Chatham County.

Spotlight on Resources: *Chatham Organizing for Racial Equity*

Chatham Organizing for Racial Equity (CORE) focuses its efforts in three areas: education, organizing, and reconciliation. Their workshops and events are designed to educate participants on the history of systemic racism and strategies for dismantling it. CORE's organizing projects seek to build community relationships around race equity issues, and its reconciliation efforts seek to broaden and deepen awareness of racial inequity. CORE offers workshops throughout the year for community members and organizations. To learn more, visit www.corenc.org.

Nearly 1 in 5 Chatham County adults (18.3%), equaling more than 11,000 individuals, say they have experienced discrimination, bias, or prejudice of any kind in Chatham County. Around 1 in 10 adults (9.9%) say they experienced this treatment in a store, restaurant, or other business, while 5.4% said they experienced it with law enforcement or the justice system and 5.3% in employment. Around 1 in 20 adults (5.3%) list discrimination as a primary cause of stress. Nearly 3 in 10 (29.4%) agree or strongly agree that they have experienced racial tension in Chatham County.¹⁹³

Women were significantly more likely to report experiencing discrimination, bias, or prejudice in Chatham County compared to men, particularly in health care and settings such as stores or restaurants. More than 13% of both Black and Hispanic/Latinx adults reported discrimination as a cause of stress compared to 2% of White adults. Half of Black adults reported experiencing racial tension in Chatham County, as did 44% of Hispanic/Latinx adults; in comparison, only 25% of White residents reported the same. Almost one half of Black adults and almost one third of Hispanic/Latinx adults reported experiencing discrimination, bias, or prejudice in Chatham County.¹⁹³


Immigration

Immigrants make up a significant portion of

Chatham County's population. As of 2019, around 1 in 8 Chatham residents (12.3%) were born outside of the United States, an increase from 9.9% in 2012, higher than the state percentage (8.4%), and slightly lower than the national percentage (13.7%). An estimated 25.4% of Siler City's population is made up of foreign-born residents. A little more than 1 in 4 (28%) of Chatham County's foreign-born residents are naturalized citizens.²¹¹

Of foreign-born Chatham County residents, more than 3 in 5 (65.7%) are from Latin American countries; a little more than 1 in 6 (17.0%) hail from Asian countries and 11.8% from European countries.²¹²

Anecdotally, the life experience of undocumented immigrants in Chatham County differs from that of documented immigrants. In Story Circles held as part of the Community Assessment process, documented immigrants felt positive about their inclusion in the community and had hope for a brighter future for the next generation. However, undocumented immigrants shared challenges such as confusion over the legal process related



CHATHAM TALKS... DISCRIMINATION/ RACISM 

Many in the community experience discrimination in contexts ranging from stores and businesses to law enforcement to employment.

to immigration and fear of reaching out to law enforcement authorities. Some also felt their children were disadvantaged when going to school if they spoke Spanish as a first language. Further, many undocumented immigrants pay taxes (a contribution of over \$270 million in state and local taxes in North Carolina alone) but are unable to claim benefits like retirement, social security, and Medicare because of their legal status.²¹³

Several resources and organizations exist to support immigrants to the Chatham community. The Hispanic Liaison, a Siler City-based nonprofit, provides a wide variety of services for the Hispanic/Latinx population in Siler City, including documented and undocumented immigrants. The Chatham County Literacy Council, also based in Siler City, has provided a free citizenship preparation program for immigrants since 2009, primarily serving Hispanic/Latinx immigrants but open to others as well.²¹⁴ Additionally, Vidas de Esperanza, a nonprofit medical clinic in Siler City, provides free medical and dental services to residents, 95% of whom are Hispanic/Latinx.²¹⁵

In late 2021, the first members of the Siler City Immigrant Advisory Committee were appointed. The committee was designed to identify and make plans to address the needs of immigrant residents in Siler. All seven members of the committee either migrated from Latin American countries like Guatemala or Honduras or are of Hispanic/Latinx descent.²¹⁶ In 2020, Franklin Gomez Flores, born in Guatemala, was elected to the Chatham County Board of Commissioners; he is the first member of Hispanic/Latinx origin on the Board.²¹⁷

The advisory committee was one of the results of the Building Integrated Communities report, published by The Latino Migration Project at UNC-Chapel Hill in 2018. Among the issues the report identified for immigrants in Siler City were transportation, housing, public safety and

law enforcement, communication, and youth mental health.

LGBTQ+ Issues

LGBTQ+ stands for lesbian, gay, bisexual, transgender, queer, plus other identifiers like asexual, intersex, and pansexual. In short, it references individuals who have a sexual orientation other than heterosexual or straight or whose gender identity differs from that assigned at birth.

A 2021 report from polling organization Gallup said that more than 1 in 18 U.S. adults (5.6%) identify as LGBTQ+, with more than half of that group (54.6%) identifying as bisexual, 24.5% as gay, 11.7% as lesbian and 11.3% as transgender. The remaining used a different term to define their sexuality. Some respondents gave multiple identifiers.²¹⁸ In Chatham County, 3.3% of adults identified as LGBTQ+, representing more than 2,000 county residents.¹⁹³

In 2019, 2.5% of high school students nationwide identified as gay or lesbian, 8.7% identified as bisexual, and 4.5% said they were not sure of their sexual identity.²¹⁹ In Chatham County, 4% of high school students identified as gay or lesbian, 8% identified as bisexual, and 4% said they were not sure of their sexual identity.²²⁰

Disproportionate Health Effects for LGBTQ+ Youth

Sexual minority youth (SMY), according to the Centers for Disease Control and Prevention, have a higher risk of suicide, depression, substance use disorder, and poor academic performance than their peers, and higher proportions of SMY have experienced violence, experienced poor mental and suicide ideation, and used high-risk substances than their non-SMY peers. Additionally, "there have been no significant declines in these health risk behaviors and experiences among SMY since

2015, indicating that the root causes of these issues have not diminished.”

One particular cause for concern is mental health among LGBTQ+ youth. High school students who identified as lesbian, gay, or bisexual were nearly four times as likely as their heterosexual peers to attempt suicide and more than twice as likely to experience primary symptoms of depression.²²¹

LGBTQ+ youth in Chatham County face similar challenges. As a whole, compared to their heterosexual peers, Chatham high schoolers who identify as gay, lesbian, or bisexual were:

- Nearly 3 times as likely to have ever been physically forced to have sexual intercourse when they did not want to
- More than 3 times as likely to have experienced sexual violence, physical dating violence, and sexual dating violence at least once in the last year
- Nearly 2.5 times as likely to experience the primary symptoms of depression
- Nearly 3 times as likely to attempt suicide, and nearly 4 times as likely to consider attempting suicide
- Nearly twice as likely to say they strongly disagree, disagree, or are not sure that they feel good about themselves

Additionally, nearly half (47.6%) of gay, lesbian, or bisexual-identifying students in Chatham County said they had been the victim of teasing or name calling because someone thought they were gay, lesbian, or bisexual in the 12 months prior to the survey. More than 1 in 4 Chatham County middle school students (26.2%) said they had ever been the victim of such teasing or name calling.²²²

Finally, gay, lesbian, or bisexual high schoolers were significantly more likely to have experienced electronic bullying, bullying on school property, use an electronic vapor product, binge drink, use marijuana, be offered, sold, or given an illegal drug on school

property, and have ever taken a prescription drug without a doctor’s prescription.²²⁰

Legal Protections

An annual State Equality Index published by the Human Rights Campaign Foundation and Equality Federation Institute placed North Carolina in its lowest category, “High Priority to Achieve Basic Equality,” in 2021. There are no state laws requiring equal protection in employment, housing, and public accommodations, school suicide prevention policies are not required statewide, and there are no statutes outlawing conversion therapy.²²³

In late 2021, the Chatham County Board of Commissioners adopted an LGBTQ-inclusive nondiscrimination ordinance, which prohibits discrimination in places of public accommodation (like restaurants, retail stores, and hotels) against someone due to sexual orientation and gender identity, adding these two categories to other protected categories like race, ethnicity, sex, and religion. Chatham County became the 12th local government in North Carolina to adopt this policy.²²⁴

Chatham County had been unable to adopt such a policy by a North Carolina law passed in 2017 preventing local governments from enacting such ordinances. However, that section of the law expired in December 2020, allowing localities to pass their own rules.²²⁵

Recreation/Entertainment Opportunities

More than a quarter (27.2%) of respondents to the 2021 Chatham County Community Survey cited “parks and recreation” as an area for Chatham County to focus on to improve health and quality of life in the community, ranking third among all topics. Other prominent answers included “sidewalks/bike lanes” (21.2%), “activities for teenagers” (18.7%), and “arts and cultural events” (16.3%).¹⁹³

Spotlight on Resources: *Siler City, Pittsboro, and Chatham County Parks & Recreation Departments*

Siler City Parks & Recreation publishes a quarterly newsletter, The Rec Connect, providing regular updates to town residents on registration for youth sports, weekly program notes and upcoming adult classes. The newsletter is also published in Spanish. In addition to this programming, the department operates six parks, four facilities and a greenway, all within Siler City's six square miles. To learn more and sign up for the newsletter, visit www.silercity.org/parks-recreation. The Chatham County Parks & Recreation Department provides information on their parks and programs at <https://www.chathamcountync.gov/government/departments-programs-i-z/parks-recreation>. Similarly, information on Pittsboro's Parks & Recreation facilities can be found at <https://pittsboronc.gov/195/Parks-Recreation-Facilities>.

Participants in Story Circles as part of the Community Assessment process stated that there were not many things for young people to do in Chatham County. One participant said youth usually need to travel out of county to do anything, which leads to possible dangers like traveling and driving late at night.

Chatham County has many parks, both as part of the county parks system and municipal parks programs. The Chatham County Parks & Recreation Department operates four district parks, one neighborhood park, and three river access sites.²²⁶ Siler City Parks & Recreation has six public parks, a greenway system, and a sports complex.²²⁷ Pittsboro Parks & Recreation has eight parks and a community center.²²⁸ Both the Chatham County and Siler City parks departments operate recreational sports and educational programs throughout the year.

There are multiple opportunities throughout the year for entertainment for Chatham County residents. The annual Shakori Hills GrassRoots Festival of Music & Dance attracts thousands to the Pittsboro area with a focus on folk music. The Bynum General Store regularly hosts musical acts. But for the most part, popular entertainment options exist outside of Chatham County. There is currently no movie theater within Chatham's borders, although the Mosaic at Chatham Park development is slated to have one on its premises, along with a 350-

seat performing arts theater and 100-seat black box theater for stage and musical performances.²²⁹

Religion & Faith

Religious faith plays a significant role in many people's lives. In the United States, around 7 of 10 individuals (70.6%) identify as some type of Christian, with 25.4% identifying as evangelical Protestant, 20.8% identifying as Catholic, and 14.7% identifying as mainline Protestant. An additional 5.9% say they are part of a non-Christian faith, including Judaism, Islam, or Buddhism, while 22.8% of Americans describe themselves as "unaffiliated," a term that includes atheist, agnostic, or "nothing in particular."²³⁰ Additionally, 77% of American adults say religion is "somewhat important" or "very important" to them²³¹, and 69% say they attend church at least a few times a year.²³²

In North Carolina, the percentages of people identifying as Christian (77.0%), belonging to a non-Christian faith (3.0%), and religiously "unaffiliated" (20.0%) are relatively close to the national averages, with slightly more identifying as Christian; 84% of North Carolinians say religion is "somewhat important" or "very important" to them and 85% attend church at least a few times a year.²³³

In 2021, one-third of Chatham County residents said they were a member of a faith-based organization.¹⁹³

In 2019, the Chatham County Council on Aging compiled a list of churches and other religious facilities in Chatham County. An updated version of that list in 2021 identified 192 facilities in the county, 55 of which are Baptist or Southern Baptist, 26 are Methodist, 19 are African Methodist Episcopal (AME) or AME Zion, 8 are Pentecostal and 6 are Presbyterian, with the rest belonging to various denominations including Church of Christ, Church of God, Missionary Baptist and Quakers.

The Zen Center of North Carolina in Pittsboro serves those adhering to Buddhism. There are also plans for the construction of a Hindu temple in the Moncure area.

Social Isolation

Social isolation can have negative impacts on mental and physical health.²³⁴ Nearly 3 in 10 (28.9%) Chatham County adults reported feeling isolated or lonely either sometimes or often, and 14.5% of adults say they disagree or strongly disagree with the statement "I feel connected to others in my community."¹⁹³ The COVID-19 pandemic and resulting social distancing safety measures may have also exacerbated feelings of isolation among many people in the county.^{235, 236, 237}

In older adults especially, social isolation is considered a serious health risk. Adults aged 65 and older are more likely to feel alone and be socially isolated because they are more likely to live alone, face the loss of family or friends, have a chronic illness or have hearing loss. In Chatham County, 1 in 4 adults aged 65 and older live alone (24.7%, more than 4,200 people), slightly less than the state rate (26.4%).²³⁸

Social isolation has been associated with a 50% increased risk of dementia, higher rates of depression, anxiety, and suicide, and a significant increase in risk of premature death from all causes, near the level of smoking, obesity, and physical inactivity. Additionally, due to several factors, immigrants and LGBTQ+ people are at higher risk of social isolation and related health effects.²³⁹

Chatham County youth also experience loneliness and isolation. Only half of Chatham County high schoolers (50.3%) did not report feeling alone in their life. Nearly 1 in 4 (23.5%) say they are alone after school without a parent or adult three or more hours per day on an average school day. Students who identify as gay, lesbian, or bisexual are much more likely than students who identify as heterosexual (68.3% vs. 45.8%) to strongly agree, agree, or be not sure that they feel alone in their life.²²⁰

In Chatham County, the Council on Aging provides several opportunities for seniors to reduce social isolation:

- Meals on Wheels: Volunteers bring a hot meal and visit with home-bound older adults who cannot get to congregate meals at one of the COA's Senior Centers.
- Friendly Phone Caller: A trained volunteer will call a home-bound senior during the day for no charge just to chat.
- Senior Center Meals: Congregate meals are provided at noon Monday through Friday for an optional donation, allowing seniors to get a nutritious lunch and connect with others in the community.
- Activities: The COA provides a wide range of activities for seniors, including games, nutrition education, exercise classes, art classes, and support groups.²⁴⁰Family and Education

Family and Education

Child Care

Children who attend high-quality childcare programs are more likely to experience better socio-economic, health, behavioral and academic outcomes. High-quality early education can also minimize gaps in school readiness between low-income and more economically advantaged children.²⁴¹

In Chatham County, there are 3,478 children under the age of five, accounting for 4.7% of the county's population.²⁴² As of February 2022, 1,268 children ages 0-5 attended some type of childcare, with 43 licensed childcare facilities in operation.²⁴³ Around 1 in 10 households in Chatham County (9.9%) utilize some type of childcare.²⁴⁴

There can be barriers to accessing quality childcare, one of which is cost. The average cost of infant care in North Carolina is \$790 per month, which for one child is 17.8% of the median family income; for a typical family in the state, the cost of childcare for an infant and a four-year-old is equivalent to 33% of annual income.²⁴⁵ There are multiple opportunities for Chatham residents to find help for paying for child care, including the Child Care Subsidy program. In 2020-21, 1,929 children in the county were eligible for that assistance, yet just 18.1% (349 children) were receiving that funding.²⁴⁶ The Chatham County Partnership for Children has more information and resources about paying for childcare in Chatham.²⁴⁷

Another challenge related to childcare is availability. From 2010 to 2022, the number of children enrolled in childcare in Chatham

County remained stable at just below 1300, but the number of active programs decreased from 67 to 43.²⁴¹ Child care programs also saw a decline in attendance and staffing levels in North Carolina due to the COVID-19 pandemic.²⁴⁸ Many programs have returned to pre-pandemic enrollment numbers but have struggled to bring in new teachers and pay them competitive salaries. As of 2020, the average pay for a childcare staff member in North Carolina was \$11.83 an hour or \$24,600 annually.²⁴⁹ About 53% of infant-toddler teachers and 69% of 3-5-year-old teachers have an associate degree in early childhood education or related field.²⁵⁰



CHATHAM TALKS... CHILD CARE



Finding affordable childcare can be difficult and was especially so during the COVID-19 pandemic.

In late 2021, many of Chatham's licensed childcare programs applied to receive North Carolina Child Care Stabilization Grants, which were funded by the American Rescue Plan Act. Programs have been able to use these funds for personnel costs, rent, facility maintenance or improvements, personal protective equipment, mental health supports for children and employees and health and safety trainings for staff.²⁵¹

Education

Education and health are strongly correlated. The CDC reports that health-risk behaviors, particularly among young people, "are consistently linked to poor grades and test scores and lower educational attainment." Conversely, educational attainment is often a strong positive predictor for health for youth and adults.²⁵²

Spotlight on Resources: *Chatham County Partnership for Children*

First incorporated in June 1994, the Chatham County Partnership for Children promotes opportunities for all of Chatham’s young children to grow up safe, healthy, and able to succeed. In collaboration with community partners, the Partnership plans, funds, and implements quality care and education, health, and family support initiatives. The organization administers Smart Start funding and supports NC Pre-K classrooms throughout the county. The Partnership also has a vested interest in childcare facilities; their staff offers professional development and trainings for facility operators and staff and helps individuals interested in starting their own programs in Chatham. To learn more, visit www.chathamkids.org.

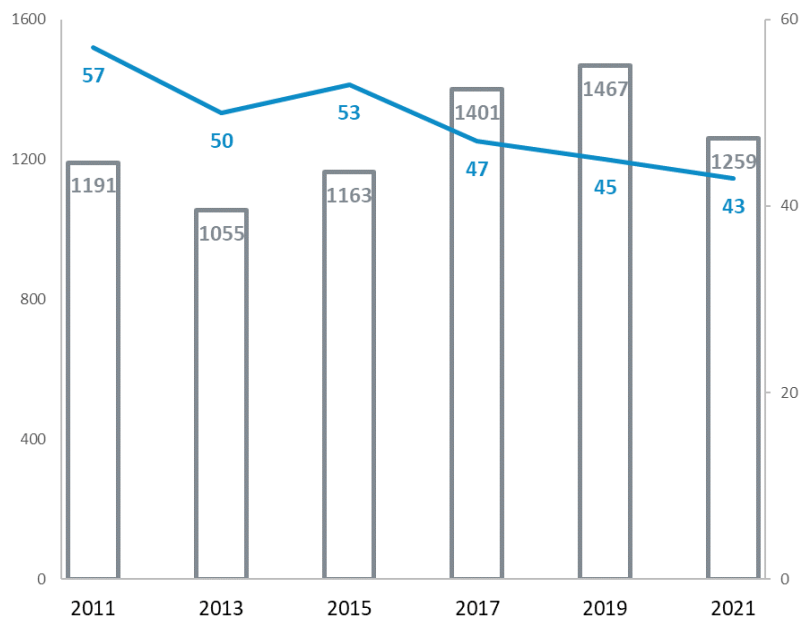
Chatham County has a public school system with nineteen schools, three public charter schools, and a community college with two campuses. Chatham County Schools, the public school district, has a four-year graduation rate of 87.8%, equivalent with the state’s graduation rate. Student performance on varying standardized tests is similar to state performance.²⁵³ More than 2 in 5 Chatham County adults (40.4%) agree or strongly agree that there are high quality K-12 schools where they live, compared to around 1 in 7 (14.5%) who disagree or strongly disagree.²⁴⁴

Nearly 9 in 10 Chatham County residents aged twenty-five and older (89.1%) have at least a high school diploma, while more than 2 in 5 (43.7%) have at least a bachelor’s degree. Comparatively, around the same percentage of North Carolina and United States residents have at least a high school diploma, while fewer North Carolinians (32.0%) and Americans (32.5%) have at least a bachelor’s degree.²⁵⁴ However, educational attainment rates in Chatham County, like throughout the country, vary by

race/ethnicity, with Asian and White residents more likely to have attained higher education.²⁵⁴ These disparities are heavily influenced by the intertwined issues of race/ethnicity and poverty, especially with regards to school funding and quality. For example, students in high-poverty areas are less likely to have access to college-prep classes or math and science courses that may support

FIGURE 28: CHILDCARE PROGRAMS AND ENROLLMENT IN CHATHAM COUNTY, 2011-2021²⁴¹

The number of children enrolled in childcare programs increased in Chatham County in the past ten years, especially before the COVID-19 pandemic, while the number of



Spotlight on Resources: *Chatham County Schools Dual Language Program*

Chatham County Schools' Dual Language Program uses a Two-way/50-50 model that emphasizes academic instruction in both English and Spanish each day. Students in the program come from both native English and native Spanish speaking backgrounds and spend 50% of each day using Spanish and 50% using English. A Kindergarten through 8th grade Language Allocation Plan lays out which academic areas are taught in which languages each year. At the high school level, students can select from various course options taught in Spanish with a goal of two courses per year being available. The program is offered at North Chatham Elementary School, Siler City Elementary School, Chatham Middle School, Margaret B. Pollard Middle School, and Jordan-Matthews High School. To learn more, visit <https://www.chatham.k12.nc.us/Page/20948>.

further education; in these same areas, 80% of students are Black or Hispanic.²⁵⁵

While educational attainment can be a positive factor in health and well-being, disparities within education may also create barriers to success for some. Approximately 2.3% of adults in Chatham County report having experienced discrimination, bias or prejudice in education, equivalent to about 1500 individuals.²⁴⁴

Another concerning disparity related to education is suspension rates and other disciplinary actions. Male students, Black/African American students, economically disadvantaged students, English learners, and

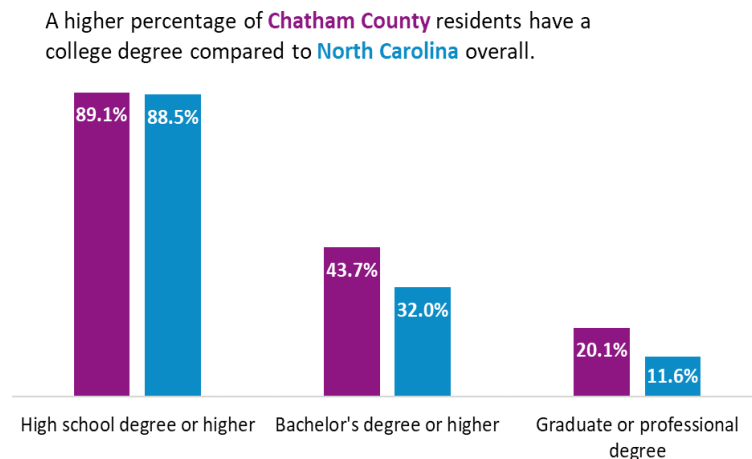
students with disabilities are more likely than average to receive certain disciplinary actions, such as short-term suspensions, in-school suspensions, and referral to law enforcement.²⁵³

Parenting

Parenting influences development of a child on many levels. The American Psychological Association says that parents and caregivers “provide the most intimate context for the nurturing and protection of children as they develop their personalities and identities and also as they mature physically, cognitively, emotionally, and socially.”²⁵⁶ Nationally, the number of parents with children under age 18 living at home was 63.1 million as of 2020, accounting for around 19.5% of the American population.²⁵⁷ More than 1 in 4 Chatham County households (27.4%) have at least one resident that is under 18 years of age.²⁵⁸ In 2021, women in Chatham County were significantly more likely to report caring for children under age 5 compared to men.²⁴⁴

Of the approximately 7,314 households Chatham County who have a child under 18 years old, more than 7 in 10 (72.6%) are married couples, nearly 2 in 10

FIGURE 29: EDUCATIONAL ATTAINMENT FOR ADULTS AGE 25+ IN CHATHAM COUNTY AND NORTH CAROLINA, 2016-2020²⁵⁴



(19.8%) are single female householders, and less than 1 in 10 (7.4%) are single male householders.²⁵⁸ Additionally, 37.8% of grandparents in Chatham County live with and are responsible for their own grandchildren.²⁵⁹ Around 5% of Chatham County adults describe themselves as stay-at-home parents, and more than 60% of Chatham adults agree or strongly agree that Chatham County is a good place to raise children.²⁴⁴

Active parenting takes time each day. Nationwide, parents of children under age 18 reported spending approximately an hour and 21 minutes per day caring for and helping household children as their main activity in 2019, with parents with a child under age 6 spending approximately two hours and eight minutes each day. Most of that time is spent in physical care. Mothers spent around twice as much time with parenting as their main activity as fathers.²⁶⁰

Parenting Resources

The free Incredible Years Parent Training Program supports parents of children ages 3-6 and focuses on strengthening parenting competencies and fostering parent involvement in children's school experiences to promote children's academic, social and emotional skills and reduce conduct problems. In 2020-21, 60 parents/caregivers in Chatham County successfully completed the program through KidSCOPE, an organization that provides a variety of family services in Chatham, Orange, and Durham counties. KidSCOPE also has implemented both virtual and in person parent cafes to connect families to encourage the sharing of positive parent behaviors, continuing services through the COVID-19 pandemic.²⁶¹

Focus on Fathers, supported by the Partnership for Children and run through the Chatham County Public Health Department, provides education and support for parents of children ages 0-5. Referrals come from the Chatham County Department of Social Services and participants receive support groups, parenting

technique classes, educational and employment planning, and goal setting.²⁶²

Child Welfare

The welfare of children in Chatham County is the focus of many government agencies and nonprofit organizations, focusing on issues like education, food insecurity, and mental and emotional health, including the Chatham County Department of Social Services (DSS).

Child Abuse and Neglect

In 2020, there were 281 reports of child abuse, neglect, or dependency accepted by Chatham DSS²⁶³, a decrease from 580 in 2019—a number more representative of typical years, prior to a decrease in reports due to COVID-19.²⁶⁴ The number of reports does not equal the number of children included in reports, and some children may have been the subject of multiple reports. A consistent factor in reports was substance use or substance use disorder in parents or caregivers; in 2020, at least 35% of investigated parents or caregivers reported substance or alcohol abuse.²⁶³

According to the 2020 report from the Chatham County Community Child Protection Team, the sharp decrease in child protection reports in 2020 “most likely result(ed) from decreased access to children by school system reporters due to virtual learning during the (COVID-19) pandemic.” In the early months of the pandemic, officials with both Chatham DSS and the Chatham County Sheriff's Office said they had seen a decrease in child abuse reports, which was a cause for concern. “While fewer child abuse and neglect reports might seem like a good thing, we are concerned about child abuse not getting reported to us because families are more isolated,” said Jennie Kristiansen, Director of Chatham DSS. “The life pressures that all families are facing, and especially families who are struggling with lost jobs on top of mental health stressors, substance use or domestic violence can make it more difficult to keep kids safe.”²⁶⁵

Foster Care

The number of children in foster care in Chatham County has seen fluctuations; the average number of children in foster care each month in 2017 was 90 and rose to 108 in 2019. For the whole of 2020, Chatham DSS served 172 children in foster care.²⁶⁶ Of the children that entered DSS custody in 2020, 40% were 5 years of age or younger, including five infants, and 66% had parent or caretaker substance or alcohol abuse as the primary factor. The number of children legally eligible for adoption each year has slightly increased, from around 20 per year from 2017-2019 to 34 in 2020.²⁶⁶

In state fiscal year 2020-21, 138 children received foster care services in Chatham, with 27 children leaving foster care throughout the year. There were also fourteen adoptions. Disparities remain within the foster care systems; though Black/African American children comprise just 9% of the population under age 18 in Chatham County, they made up 28% of children receiving foster care services. Additionally, nearly 32% of White children in care found permanency (permanent care with parents, relatives, or adoption) compared to 19% of Black/African American children and 11% of Hispanic/Latinx children.²⁶³

One statistic of concern is the reports of maltreatment and recurrence of maltreatment in foster care in Chatham County. There were 12.5 reports of maltreatment per 100,000 days of care in Chatham from October 2020 to September 2021, nearly three times the state rate, and a 14.2% of recurrence of maltreatment in foster care, compared to a 10.8% rate in North Carolina overall. Chatham's rates were also higher than national numbers on both measures.²⁶⁶

Sexual and Reproductive Health

Sexual and reproductive health are in many ways fundamental building blocks for healthy individuals, families, and communities. In fact, the international public health community frames sexual and reproductive health (SRH) as a fundamental human right,²⁶⁷ encompassing “the right for everyone to make decisions about their sexual and reproductive health, including the choice to marry and determine the number, timing, spacing, of their children, to sexual and reproductive security and to be informed and have access to safe and legal family planning services and healthcare”²⁶⁸.

Framed this way sexual and reproductive health is understood as a lifetime concern that encompasses sexual orientation and gender identity, sexual expression, relationships, and pleasure as well as the health outcomes associated with sexual behavior. Differences in sexual and reproductive health outcomes among different populations do exist and these differences reflect persistent social and economic inequities.

Sexual Health

The World Health Organization defines sexual health as “a state of physical, emotional, mental and social well-being in relation to sexuality; it is not merely the absence of disease, dysfunction or infirmity”.²⁶⁹ The essential elements of good sexual health are equitable relationships and sexual fulfillment with access to information and services to avoid the risk of unintended pregnancy, illness, or disease.²⁷⁰ The data presented in this section focuses on the potential negative health consequences associated with sex like sexually transmitted infections (STIs) and unintended pregnancies as well as the behaviors that put

people at risk for these poor outcomes. However, it is important to acknowledge that these outcomes are only the tip of the iceberg-- individual behaviors are not the root causes of poor sexual health outcomes, but reflect access to high-quality information to make informed decisions, access to SRH services, and much more.

Sexually Transmitted Infections

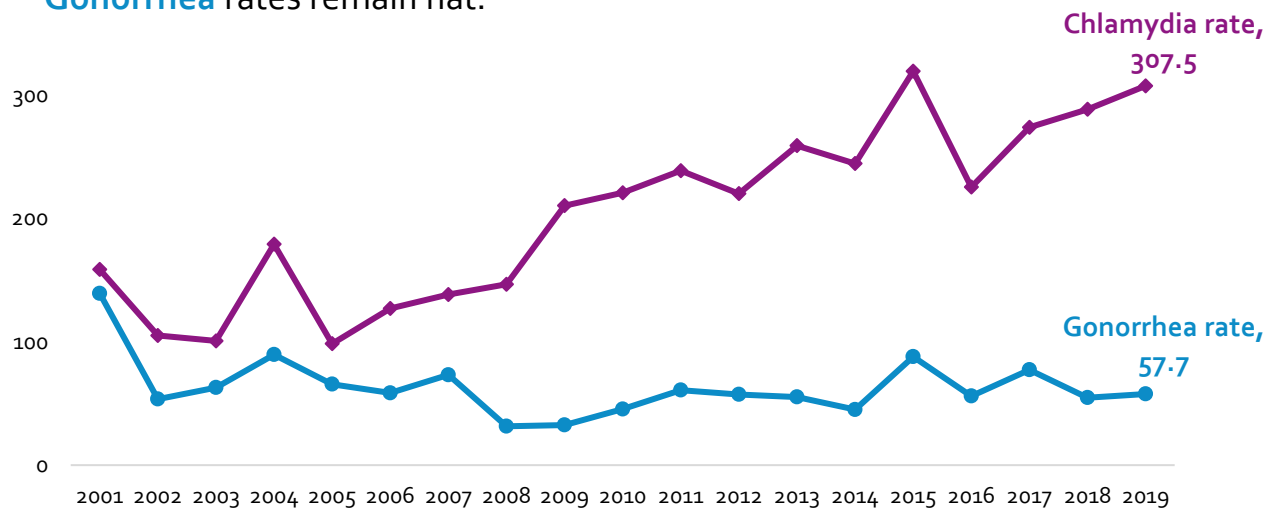
Sexually transmitted infections (STIs) are preventable and treatable infections that pass from person to person in blood, semen, or vaginal and other bodily fluids. STIs don't always cause symptoms. As a result, they often go undetected and untreated, which can lead to serious health consequences.

One in five people in the United States have an STI. The most common STIs in the United States and worldwide are Human Papillomavirus (HPV), Chlamydia, and Gonorrhea. Chlamydia, trichomoniasis, genital herpes, and HPV account for nearly all reported STIs in the U.S.²⁷¹ In 2019, STI infection rates reached an all-time high in the US for the 6th consecutive year.²⁷² Rates did fall slightly in 2020 but this was likely due to disruptions in screening and surveillance activities caused by the COVID-19 pandemic and not a measure of a significant reduction in infections. Over half (53%) of reported cases in 2020 were among youth 15 to 24 years old.²⁷³

In Chatham County, Chlamydia rates have been trending upwards since 2005 but Gonorrhea rates have stayed relatively flat. In 2019, there were 307.5 cases of Chlamydia per 100,000 residents in Chatham County, lower than both the North Carolina and U.S. rates at 670 per 100,000 and 551 per 100,000, respectively. Gonorrhea rates in Chatham (57.7 cases per 100,000) were also low compared to the state (251.5) and the country overall (187.8).²⁷¹ In Chatham County, 69% of reported Chlamydia

FIGURE 30: CHLAMYDIA AND GONORRHEA CASE RATES PER 100,000 IN CHATHAM COUNTY, 2001-2019²⁷¹

Rates of **Chlamydia** have increased in Chatham County, while **Gonorrhea** rates remain flat.



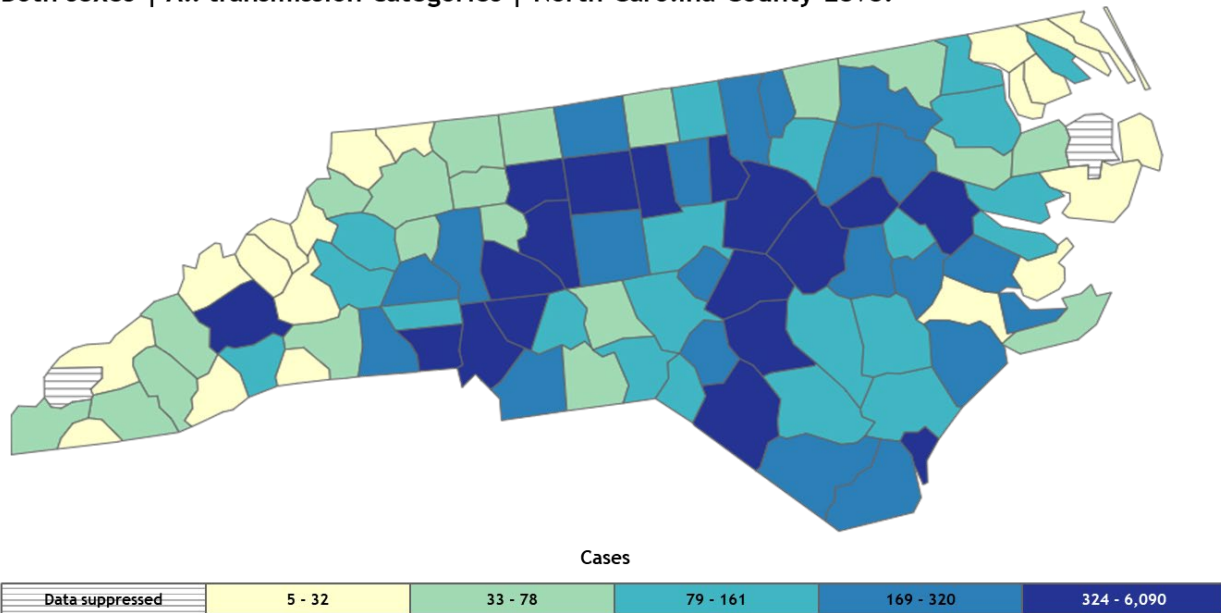
cases in 2019 were among 15- to 24-year-olds. Additionally, HIV rates in Chatham County are in the middle range among all counties in the state.²⁷⁴

Adolescent Sexual Health

As indicated by the STI statistics above, when it comes to sexual health, youth between 15 and 24 years old are at a disproportionate risk. According to the 2019 Chatham County Youth Risk Behavior Survey, 34.7% of Chatham

FIGURE 31: HIV PREVALENCE BY COUNTY IN NORTH CAROLINA, 2019²⁷⁴

HIV prevalence | 2019 | Ages 13 years and older | All races/ethnicities | Both sexes | All transmission categories | North Carolina-County Level



Footnotes: Prevalence data for the year 2019 are preliminary and based on death data received by CDC as of December 2020.

County high schoolers report having ever had sex; this percentage is low compared to both North Carolina and United States high school students (41% and 40% respectively).^{275,276} It also represents a decrease from 2017 when 41% of Chatham's high school students reported ever having sex. Almost half of those who reported ever having sex said they did not use a condom the last time they had sex (48%), which was higher than in 2017 (43%), and over 1 in 10 high school students (13%) stated that they had not used any form of contraception the last time they had sex. Additionally, 1 in 5 Chatham high schoolers reported drinking alcohol or using drugs before their last sexual encounter.²⁷⁵

Unintended Pregnancies

Unintended pregnancy rates are also a "central measure of reproductive health," indicating the extent to which people have autonomy over their reproduction, as well as the associated potential risks to both mothers and infants associated with unintended pregnancy, such as delayed prenatal care, and premature and low-birth-weight infants.²⁷⁷

According to the 2019 National Survey of Family Growth, 99% of 15-44 year old women in the country report using contraception at some point in their life and 81% reported using contraception the last time they had sex.²⁷⁸ The same survey found that only 16% of women who had a baby in the past five years did not want the pregnancy, while 22% characterized the pregnancy as unintended but not unwanted, just mistimed. In North Carolina, 24.9% of new moms surveyed in 2019 indicated that the pregnancy was unintended.²⁷⁹ The percentage of unintended pregnancies was higher (37.7%) for Black/African American new moms.²⁷⁹

A related measure is adolescent pregnancies. Nationally, adolescent pregnancy rates have

been falling since its height in the 1990s. Like the rest of the country, the number of teen pregnancies in Chatham has fallen, with 23 pregnancies among 15-19-year-old females reported in 2020.²⁸⁰ In 2020, the majority of adolescent pregnancies occurred among females 18-19 years old. The teen pregnancy rate in Chatham County in 2020 was 10.8 per 1,000 15-19 year old females, much lower than North Carolina's rate of 23 per 1,000 and a decrease from the 2013-2017 average for Chatham County of 22.5.²⁸⁰

STI and Unintended Pregnancy Prevention

It is important to highlight that STIs are preventable. There are behaviors that individuals can practice to reduce their risk of infection like abstinence, condom use, talking openly with their partner, having fewer partners, getting tested, and even getting vaccinated for HPV.

A vaccine for HPV became available in the United States in 2006. HPV is the most common STI in the United States. It often causes no symptoms and can go away on its own but in some cases, it will cause genital warts and cancer.²⁸¹ The HPV vaccine is an effective means of preventing HPV infection. HPV vaccination rates in North Carolina and the United States continue to climb but remain well below the Health People 2020 goal of an 80% vaccination rate among 13-15-year-olds.²⁸²

Condoms are the most common form of protection used during first sexual intercourse among men and women in the U.S. However, among unmarried women and men 15-49 years of age who ever used a condom and who had sexual intercourse in the previous month, condom use was not consistent, with less than 50% using a condom.²⁷⁸ Among sexually active high school students in Chatham County, 13.8% reported using no method to prevent pregnancy during last sexual intercourse; 52.1%

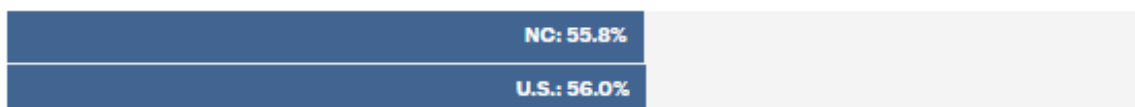
FIGURE 32: HPV IMMUNIZATION BY GENDER IN NORTH CAROLINA AND THE UNITED STATES, 2020²⁸²

GENDER

HPV Immunization - Females



HPV Immunization - Males



Percentage of adolescents ages 13-17

reported using a condom and 33.1% reported using contraceptive methods including birth control pills, an IUD, or other hormonal contraceptives. Use of both a condom and another form of contraceptive is most effective at preventing both unintended pregnancy and STI transmission; 8.9% of sexually active high schoolers reported using both.²⁷⁵

Maternal and Infant Health

Healthy moms and babies are a primary reproductive health goal and an area where the United States is not performing well. While maternal mortality rates are declining around the world, the United States' rates are increasing. In 2020, 861 women died of maternal related causes in the United States. The maternal mortality rate in the US was 23.8 per 100,000 live births.²⁸³ The infant mortality rate has been decreasing but is still high, at 5.4 infant deaths per 1,000 live births.²⁸⁴ The important story behind these numbers is the existence of significant and persistent disparities in birth outcomes for women of color. In 2020, the maternal mortality rate for non-Hispanic Black women was 55.3 deaths per 100,000 live births, 2.9 times the rate for non-Hispanic White women, and significantly higher than the rate in 2019.²⁸³ In 2018, the infant mortality rate for Black women was 2.3 times higher than for White women.²⁸⁵

At the root of these birth disparities is racism, interpersonal and structural, experienced

across the lifespan. The pathways by which racism contributes to the poor health of women and babies include unequal access to resources and social capital, increased weathering of stress and greater allostatic load, and poorer quality and access to care. As such, reducing disparities in birth outcomes requires us to intervene in ways that disrupt these pathways while striving to dismantle racism within our institutions and our communities.

Local data on maternal mortality and morbidity is not available but infant birth outcomes data suggest that the experiences of moms and babies in Chatham County are similar if not worse than what is observed for the United States.

Infant Health Outcomes

Chatham County's infant health outcomes are relatively poor. The infant mortality rate in Chatham County from 2016-2020 was 9.4 per 1,000 live births, which was higher than North Carolina's rate of 7 per 1,000 live births.²⁸⁶ The percentage of low and very low birthweight babies (<2500 grams at birth) for the same time period was 10.8% in the county versus 11.1% for the state overall, though certain groups in the county experience a far higher percentage, as described below. below.²⁸⁷ The percentage of preterm births (less than 37 weeks gestation) was 10.6%, approximately the same as the state percentage.²⁸⁸

FIGURE 34: INFANT MORTALITY PER 100,000 LIVE BIRTHS, 2016-2020²⁸⁶

Infant mortality is higher in **Chatham County** compared to the state overall.

Rates are particularly high among Black/African American and Hispanic/Latinx residents in the county.

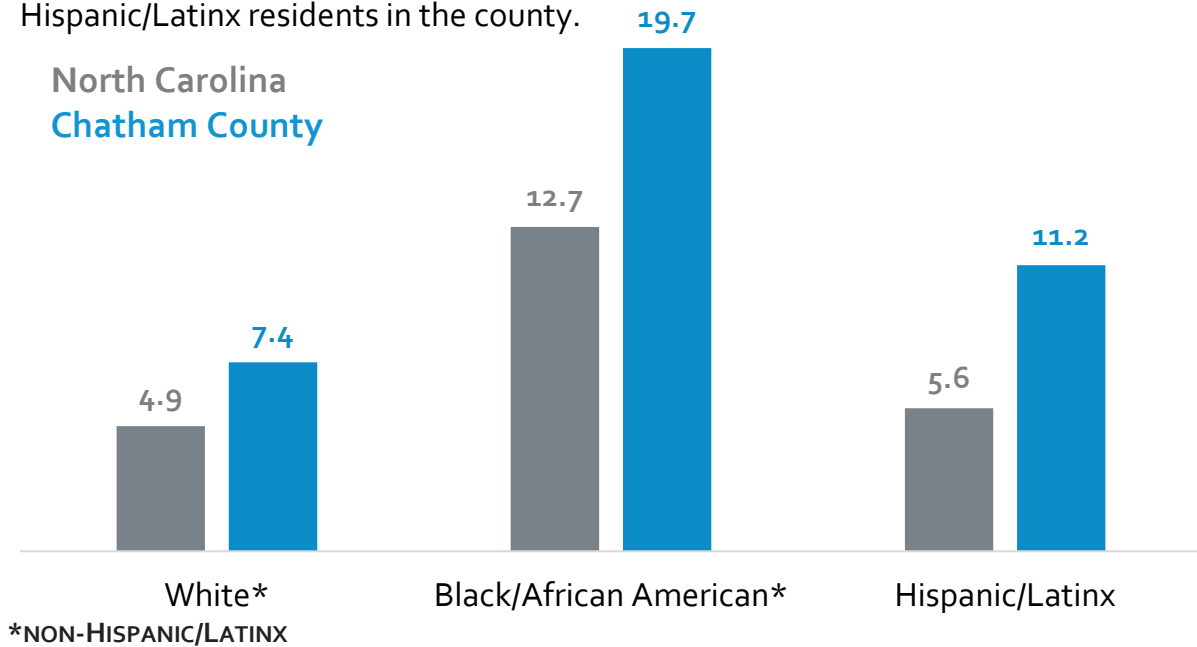
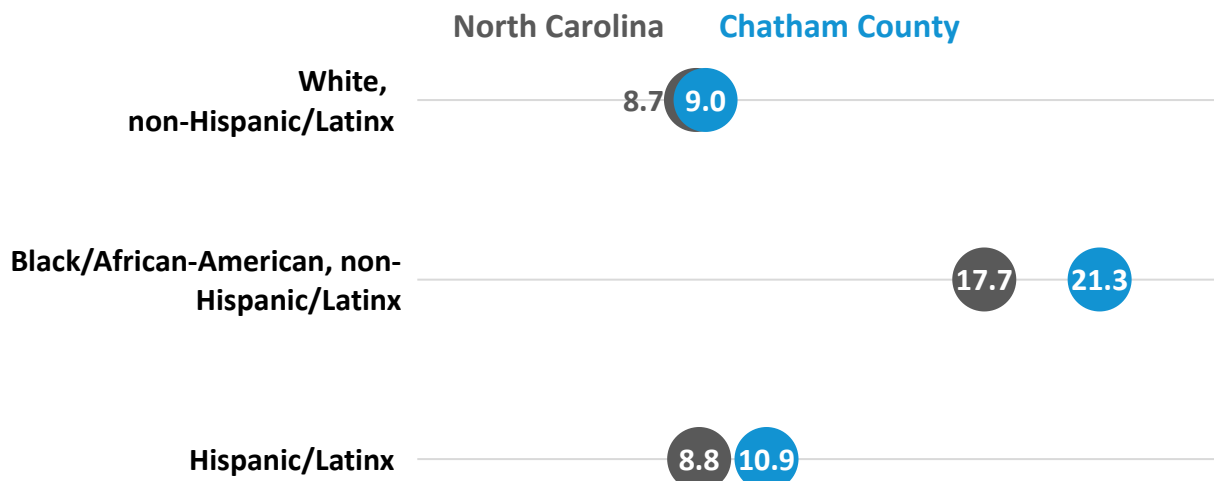


FIGURE 33: PERCENTAGE OF LOW AND VERY LOW BIRTH WEIGHTS, 2016-2020²⁸⁷

Black/African American residents experience a higher percentage of low and very low birth weights in the county and the state.

This is slightly higher for Hispanic/Latinx residents in the county as well.



Spotlight on Resources: *Equity for Moms and Babies Realized Across Chatham*

Equity for Moms and Babies Realized Across Chatham (EMBRACe), a collaborative project led by Chatham County Public Health Department, Chatham County Department of Social Services, Chatham Hospital, Piedmont Health Services, and Chatham Organizing for Racial Equity, aims to achieve successful and equitable birth outcomes for moms and babies in Chatham through community-led system and service alignment. The project is centered on the knowledge that the root of birth disparities is racism, interpersonal and structural, experienced across the life span. It focuses on disrupting the pathways by which racism contributes to the poor health of women and babies through the creation of a person-centered system of care oriented around women of color- their lived experiences, their full personhood, and their well-being. For more information, visit: <https://www.chathamcountync.gov/government/departments-programs-i-z/public-health/community-programs/embrace>.

Hidden within the outcomes for the overall population in Chatham are stark disparities between White, non-Hispanic/Latinx women and women of color. The 2016-2020 infant mortality rate for both Black/African-American women (19.7 per 1,000 live births) and Hispanic/Latinx women (11.2 per 1,000 live births) was significantly higher than the rate for White, non-Hispanic/Latinx women (7.4 per 1,000 live births).²⁸⁹ In 2020, similar disparities existed for low and very low birthweights (9.0% for White, Non-Hispanic/Latinx women, 21.3% for Black/African American women, and 10.9% for Hispanic/Latinx women).²⁸⁷ Disparities in preterm birth also existed for Black/African American women (15.8% vs. 10.7% for White women).²⁹⁰ It is worth noting that in the United States and North Carolina, disparities in birth outcomes are not typically observed between Hispanic/Latinx women and White, Non-Hispanic/Latinx women.

Prenatal Care

The drivers of poor maternal and infant health outcomes are complex and bound to social and economic inequities. That said, access to prenatal care early in pregnancy can contribute to improved outcomes for mom and baby. Studies show that early prenatal care has an

especially positive impact for teens, single women, and women of color. In 2018, 73% of pregnant women in Chatham County began receiving prenatal care in their first trimester. Notably, the percentage was much lower for Hispanic/Latinx women (58%), and slightly lower for Black/African American women (68%).²⁹¹ While the proportion of women who were early to care could be improved, only a small percentage (3.8%) of pregnant women were late to care (began prenatal care in their third trimester) and the differences by race and ethnicity were smaller though not absent.²⁹⁰

Substance Use

Alcohol Abuse

Alcohol abuse is associated with many negative health outcomes, such as cancer, liver disease, and heart disease, and excessive alcohol use leads to approximately 95,000 deaths in the United States each year.²⁹² More than 70% of alcohol-attributable deaths occurred among men and more than 80% were adults aged 35 and older.²⁹³

Approximately 11.5% of Chatham County adults report that drinking alcohol ever negatively affects their usual activities, such as work or spending time with family and friends, though only 1.7% report that this happens “sometimes” or “often.” However, while 94% of women reported that drinking alcohol never negatively affects their usual activities, only 80% of men reported the same.²⁹⁴

In North Carolina Local Health Director Region 5, which includes Chatham County, 12.6% of adults reported binge drinking (four or more drinks on one occasion for women or five for men) in the past month in 2020, a decline from 15.6% five years earlier.²⁹⁵ Additionally, 11% of adults under age 59 in Chatham County reported having drunk or used drugs more as a result of the COVID-19 pandemic.²⁹⁴

From 2015 to 2020, alcohol contributed to 4.9% of all vehicle crashes in Chatham County, ranking 54th of 100 counties in North Carolina, and 23.6% of all fatal crashes, compared to 26.2% in the state overall.²⁹⁶

A primary resource for those seeking to change their drinking habits is Alcoholics Anonymous. Chatham County is served by AA North Carolina District 33, which includes Alamance, Orange, Chatham, and Caswell counties. Meetings are regularly held in Carrboro, Graham, Chapel Hill, Hillsborough, Yanceyville, and Pittsboro, in the form of small groups. The Pittsboro group meets at Pittsboro United

Methodist Church; those interested can learn more at www.aanc33.org/meetings/Pittsboro-aa.²⁹⁷ Chatham Drug Free, a Pittsboro-based nonprofit, works to prevent alcohol use among youth, along with tobacco and drug use, and works with schools, families, and students to raise awareness of issues and provide resources to those seeking help.²⁹⁸ Another non-profit, NCFASD Informed, helps caregivers, educators, and practitioners from all disciplines to understand the impact of exposure to alcohol in utero, which can result in a variety of developmental disability diagnoses collectively referred to as fetal alcohol spectrum disorder (FASD).²⁹⁹

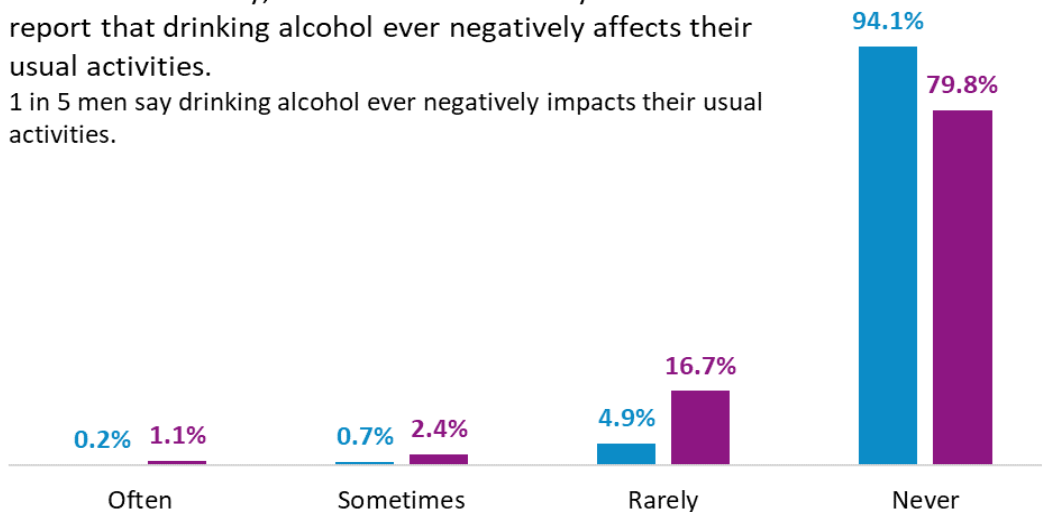
Adolescent Alcohol Use

Nearly 30% of high school students in the United States and 24.2% North Carolina high schoolers report drinking alcohol at least one day in the last month. Additionally, 12.5% of North Carolina high school students and 13.7% of American high school students report recent binge drinking.³⁰⁰

Alcohol use among Chatham County high schoolers is slightly higher than North Carolina rates overall. Nearly 29% report drinking alcohol at least one day in the last month, with female students (33.1%) more likely than male students (24.3%) to report recent drinking. More than 1 in 7 (14.7%) high schoolers report recent binge drinking.³⁰¹ Approximately 19% of all Chatham high schoolers reported riding with a driver who had been drinking alcohol (slightly higher than state and national averages³⁰⁰), and 1 in 20 students who drive regularly say they had driven after drinking alcohol at least once in the previous 30 days-- a decrease from the rate two years before, but higher than the state overall.^{300,301}

FIGURE 35: FREQUENCY OF NEGATIVE IMPACTS FROM DRINKING ALCOHOL AMONG CHATHAM COUNTY ADULTS, 2021²⁹⁴

In Chatham County, **women** were less likely than **men** to report that drinking alcohol ever negatively affects their usual activities.
 1 in 5 men say drinking alcohol ever negatively impacts their usual activities.



Illicit Substance Use

Illicit substance use refers to the use of any drug that is illegal. In North Carolina, illegal substances include, but are not limited to, heroin, LSD, PCP, cocaine, and marijuana.³⁰² For further information on opioid use, see the Prescription Drug and Opioid Use section. Many illicit drugs can contribute to negative health outcomes, as well as other risks such as dependency or addiction disorders, infection from activities such as sharing injection needles, and injury or death from impaired driving.³⁰³

Around 1 in 9 Americans aged twelve and older (11.7%) used any illicit drugs in the past month, including nearly 1 in 4 individuals ages 18-25 (23.9%). Men were more likely to use illicit drugs than women (14.0% vs. 9.5%).³⁰⁴ In 2021, 2.5% of Chatham County adults reported use of illicit substances, such as methamphetamines or cocaine, in the past year.²⁹⁴

In 2020, Chatham County had 22.8 unintentional overdose deaths per 100,000 residents, including opioid-related deaths but also overdoses from heroin, cocaine,

methamphetamine, and more. This rate was low compared to other counties but was the highest rate in Chatham since this data was first tracked in 2000. Through eight months of 2021, the rate was 34.2 deaths per 100,000, higher than the state rate of 30.2 per 100,000.³⁰⁵

Illicit Substance Use Among Adolescents

Adolescent overdose deaths in the United States more than doubled from 2019 to 2021, with 1,146 deaths from overdose among individuals ages 14-18 in 2021. Illicit fentanyl and synthetics accounted for 77.1% of those overdoses, followed by benzodiazepines (13.2%) and methamphetamine (9.7%).³⁰⁶

In 2019, 7.4% of Chatham County high school students reported ever using cocaine, higher than the state rate (4.8%) and nearly twice as much as the national rate (3.9%).^{300,301} One in 10 (10.6%) Chatham County high school students said they had ever used inhalants (sniffing glue, or breathing in contents from aerosolized cans, paints, or sprays),³⁰¹ a higher rate than North Carolina students (8.2%) and American students overall (6.4%).³⁰⁰ Over 30% of

Chatham County high schoolers report ever using marijuana, with 1 in 5 (20.2%) using it at least once in the past month, similar to both statewide and national numbers.^{300,301}

Prescription Drug and Opioid Use

From May 2020 to April 2021, the United States recorded 75,673 opioid overdose deaths, a 34.9% increase from the previous 12 months, according to provisional data. These deaths made up the vast majority of the 100,306 overdose deaths from all drugs over that period.³⁰⁷ An average of nine North Carolinians died from overdose, of either illicit substances or prescription drugs, every day in 2020, a 40% increase from the previous year. Additionally, the state had nearly 15,000 emergency department visits due to overdoses in 2020.³⁰⁸ This was followed by a projected 21.8% increase in drug overdose deaths from September 2020 to September 2021, outpacing the 15.9% increase at the national level.³⁰⁹

Chatham County has also been impacted by this growing epidemic. The Chatham County Sheriff's Office responded to eleven overdoses in 2019, 21 in 2020, and 58 in 2021. The Siler City Police Department reported an increase

from fourteen responses to drug overdoses and one death in 2020 to twenty-five responses and four deaths in 2021.³¹⁰

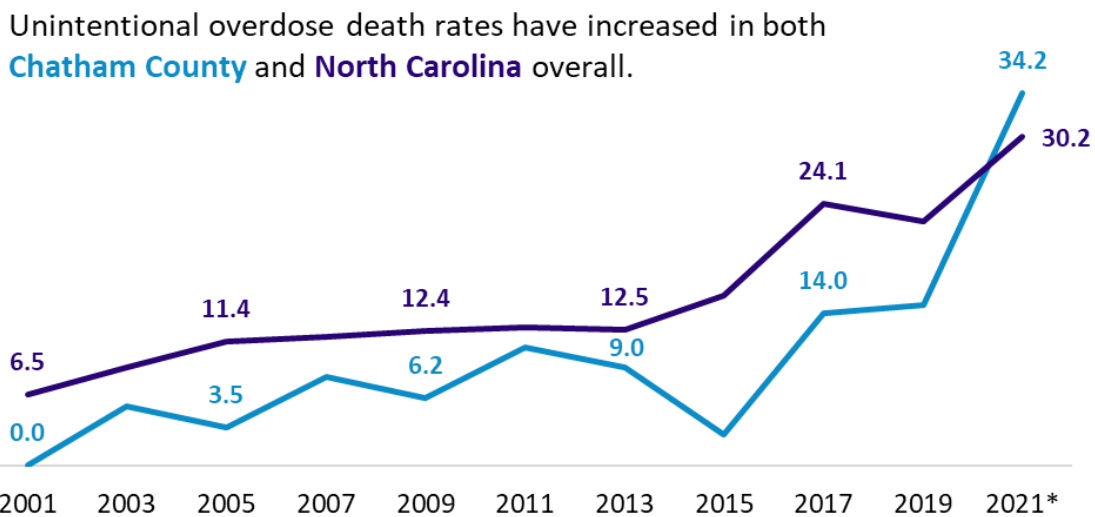
The county saw 22.8 unintentional overdose deaths per 100,000 population in 2020, a 714% increase from 2016 (2.8 per 100,000), though lower than the state average of 29.7 per 100,000. Additionally, Chatham County reported 91.3 opioid overdose visits to the emergency department per 100,000 compared to 142.5 visits per 100,000 in the state. Around 1 in 11 (8.7%) Chatham residents received prescription opioid pills in 2020 (a drop from 13.3% in 2016) compared to 13.7% of North Carolina residents that year.³¹¹

In 2021, 2.4% of Chatham County households reported intentional misuse of prescription drugs in the past year and 1.4% reported seeking help for drug use while living in Chatham.²⁹⁴

Prescription Drug and Opioid Use Among Adolescents

Approximately 1 in 5 (19.9%) Chatham County high schoolers reported ever misusing prescription pain medicine or using it without a prescription in 2019, a slight increase from 2017

FIGURE 36: UNINTENTIONAL OVERDOSE DEATHS PER 100,000 RESIDENTS, 2001-2021³⁰⁵



*Year to Date at month 8

Spotlight on Resources: *Tobacco Cessation*

There are many free resources available for people who want to quit smoking and others that take most insurance, including Medicaid and Medicare. The Chatham County Public Health Department also holds regular QuitSmart classes with a trained professional who helps participants create a personal quit plan and holds support groups. To find a resource for you, visit www.chathamcountync.gov/quitsmoking. QuitlineNC also provides tobacco cessation support through phone and web-based services. For more information, visit quitlinenc.dph.ncdhhs.gov or call 1-800-QUIT-NOW.

and higher than state (16.6%) and national (14.3%) rates.^{300,301,312} Additionally, around 1 in 7 Chatham high school students (14.7%) said they had ever taken a prescription drug without a prescription.³⁰¹ Attention to substance abuse among young people grew in particular following the deaths of three teenagers in Chatham County from opioid or related overdoses in 2016 and 2017.³¹³

Tobacco Use

Tobacco use is “the largest preventable cause of death and disease in the United States,” with approximately 480,000 Americans dying each year from tobacco-related illnesses, and more than 16 million Americans suffering from at least one disease caused by smoking. Use of tobacco products such as cigarettes, vapes/electronic cigarettes, smokeless tobacco like chew or dip, cigars, and pipes can contribute to cancer, heart disease, stroke, lung diseases, diabetes, and chronic obstructive pulmonary disease, and increases risk for tuberculosis, certain eye diseases, and problems of the immune system including rheumatoid arthritis.³¹⁴

Nearly 1 in 7 American adults (13.7%) were current cigarette smokers in 2018³¹⁴ and in 2019, nearly 1 in 5 North Carolina adults (18.5%) reported smoking cigarettes.³¹⁵ In Chatham County, 1 in 9 adults say they use any tobacco product (11.2%), with the most common being cigarettes (8.2%), followed by cigars (1.9%) and

vapes/electronic cigarettes (1.1%).²⁹⁴ These numbers represented a decline from 2018, when 13.9% of Chatham adults reported smoking cigarettes, 1.9% reported using smokeless tobacco and 1.3% reported use of electronic cigarettes.³¹⁶ This decline matches a national decline in tobacco use.³¹⁷ Of Chatham County adults who use tobacco products, 47% cited at least one resource or support tool that would be helpful if they were interested in quitting, including a personalized quit plan or nicotine replacement like patches or gum.²⁹⁴

Tobacco use during pregnancy also increases risk of negative health outcomes for pregnant people and infants, including preterm delivery, low birth weight, and stillbirth.³¹⁴ From 2016 to 2020, 5.5% of Chatham mothers smoked during pregnancy, the 8th-lowest rate in North Carolina. Statewide, 8.1% reportedly smoked during pregnancy.³¹⁸

Use of any tobacco product on Chatham County property is prohibited by county ordinance passed on December 16, 2019, that went into effect on January 2, 2020. The Town of Siler City has a similar ordinance focused on parks and recreation facilities that also went into effect in 2020.³¹⁹

Youth Tobacco Use

In contrast to large scale declines in tobacco use among all ages, use of vapes or electronic cigarettes (“vaping”) has increased dramatically since their introduction to the market; these

products have specifically targeted youth with flavored cartridges and corporate marketing practices, leading to vapes being the most used tobacco product among youth in Chatham County, North Carolina, and the country overall.³²⁰ However, vapes pose a significant and avoidable health risk to users. While early studies have shown that vaping is less harmful than smoking, there are still several harmful chemicals in vape products, and they can be similarly addictive as other tobacco products.³²¹

In 2019, more than half of Chatham County high schoolers (53.5%) reported ever vaping, an increase from 46.0% in 2017. Additionally, 35.0% reported vaping at least once in the past 30 days, approximately three times the rate of students who smoked a cigarette in that time (12.9%) and a sizeable increase from 2017 (22.4%).^{301,312} Around 1 in 12 Chatham high schoolers reported vaping daily (8.0%)

compared to the approximately 1 in 76 (1.3%) who said they smoked cigarettes daily. Hispanic/Latinx students, male students, students eighteen or older, and students identifying as gay, lesbian, or bisexual were more likely than their peers to report vaping on a regular basis.³⁰¹

However, recent national data indicate that vape use by youth might be on the decline-- current use of vapes declined among middle school students (10.5% in 2019 to 4.7% in 2020) and high school students (27.5% in 2019 to 19.6% in 2020).³²² Further data will help determine whether this trend will continue in the coming years.

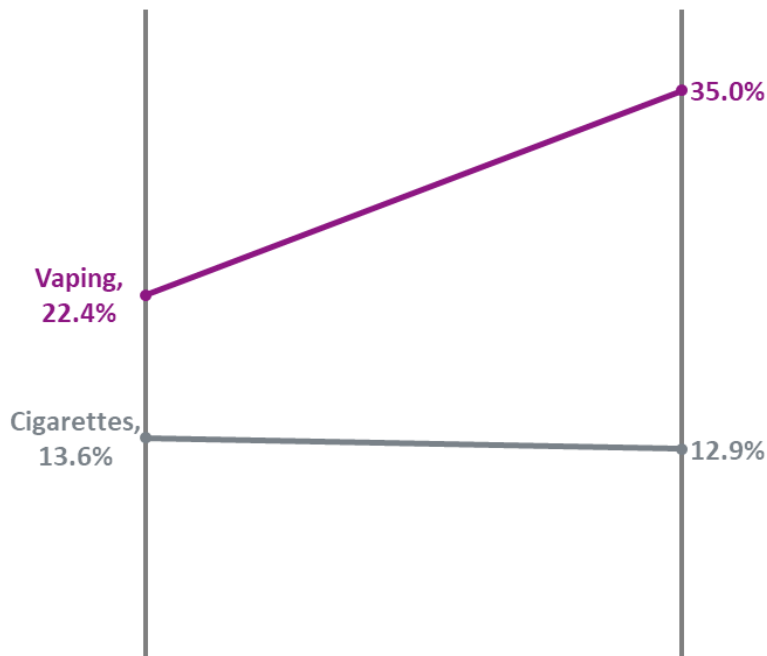
Secondhand Smoke

Secondhand smoke causes more than 7,300 deaths from lung cancer and more than 8,000 deaths from a stroke per year nationally in those who do not smoke.³²³

Secondhand smoke exposure has declined, likely due to decreasing rates of cigarette smoking and ordinances like Chatham County's prohibition of tobacco use in public spaces. The effects of secondhand smoke exposure were referenced in the county's resolution passing that ordinance.³²⁴ Around 1 in 11 Chatham County adults (8.8%) reported being regularly exposed to secondhand smoke as of 2021, most commonly in homes, cars, restaurants, bars, and workplaces.²⁹⁴ Further, strong disparities exist in secondhand smoke exposure: Black/African American individuals, people who live below the poverty line, people living in multi-unit housing, and children ages 3-11 are more likely than other groups to be exposed to secondhand smoke.³²⁵

FIGURE 37: CURRENT TOBACCO PRODUCT USE AMONG CHATHAM COUNTY HIGH SCHOOL STUDENTS, 2017-2019³⁰¹

Vaping has become the most used tobacco product among Chatham County high school students.



SOURCE: CHATHAM COUNTY GIS

Spotlight on Resources: *Chatham Recovery*

Chatham Recovery is an opioid treatment program in Chatham County. Its Siler City clinic offers daily dosing of methadone or buprenorphine in addition to counseling to help people manage addiction to heroin and other opiates. The clinic also offers psychiatric services including medication management, and an office-based suboxone program. To learn more about Chatham Recovery's options, visit www.morseclinics.com/locations/chatham-recovery.

Access to Substance Use Treatment

Around 1 in 9 Chatham County adults (11.0%) say substance use support/treatment is something the county should focus on to improve health and quality of life in the community. Over 6% of Chatham County households report that a household member had sought help for alcohol, drug, or tobacco use while living in the county. Around half found alcohol abuse services affordable and available, while 15.3% said they were easy to find. There was not enough data on substance use services available.²⁹⁴

A variety of barriers may prevent those in need from accessing support services. A nationally representative survey of people with mental health and substance abuse disorders found that 15.3% cited lack of health insurance and concerns about cost as a reason for not seeking treatment, 12.8% cited availability, and 9.8% found treatment options inconvenient.³²⁶ Additionally, 91.9% of substance abuse treatment facilities in the United States are in urban areas, which may be inaccessible to many. Only 2.2% of practicing physicians in the United States are approved to administer buprenorphine, a medication commonly used for opioid addiction, and 90% of them are based in urban counties.³²⁷

Stigma around addiction may also prevent people from receiving appropriate care; national survey respondents who had difficulty accessing services cited barriers such as that it

"might cause neighbors or the community to have a negative opinion" and "that it might cause a negative effect on a person's job."³²⁸

Economy

Built Environment

A community's built environment is a powerful social driver of health. Healthy People 2030 lists "Neighborhood and Built Environment" as one of the five domains for achieving the goal of "attaining the full potential for health and well-being for all."³²⁹ The built environment encompasses everything from housing, streets and sidewalks, parks and trails, to grocery stores and public transportation.

Safe, Accessible Places for Physical Activity

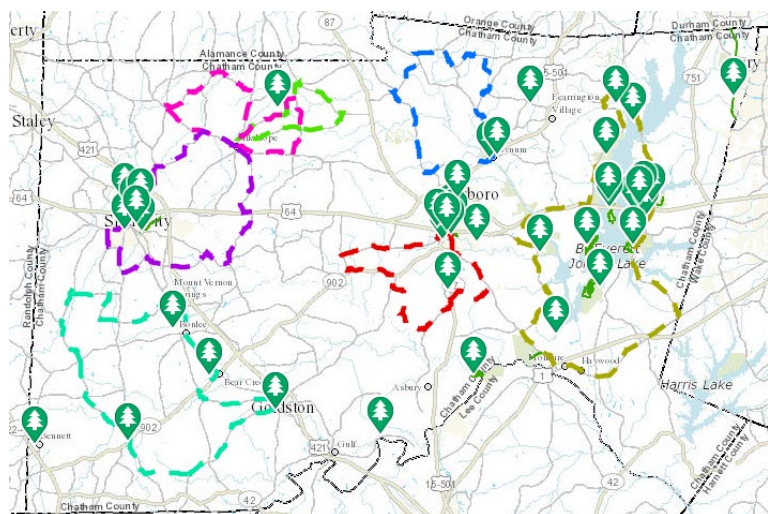
Easy access to places such as parks and trails allows greater opportunity for physical activity; the closer a person lives to a park, the more likely they are to walk or bike to and use the park for exercise.³³⁰ Chatham County is a rural county with concentrated areas of development; as such, walkable access to parks is limited for many residents. According to the 2021 Health Rankings, only 63% of Chatham County residents live reasonably close to a park (1/2 mile in non-rural census blocks and 3 miles in rural census blocks), while 74% of North Carolinians overall live reasonably close to a park.³³¹ That said, only a small portion of residents reported not having a safe place to exercise (6.6%) or no place to exercise (6.0%) near their home as a barrier to physical activity.³³²

This may be due to the many opportunities to get outdoors and be active in the county. The County Parks and Recreation Department manages 466 acres of parkland and 4.6 miles of greenway trails. There are also an additional 176 acres of parks managed by local municipalities and unincorporated

communities and over 50,000 acres of publicly and privately-owned conservancy and forested areas including the 14,000-acre Jordan Lake State Park.³³³ The map below shows the location of parks and bike paths throughout Chatham County (Figure 39).

In addition to park infrastructure, sidewalks, bike lanes, and greenways are essential for creating healthy places. For Chatham County residents, a top concern is the lack of these types of infrastructure throughout the county. Lack of sidewalks arose as a particular issue,

FIGURE 38: PARKS AND RECREATIONAL BIKE ROUTES IN CHATHAM COUNTY³³³



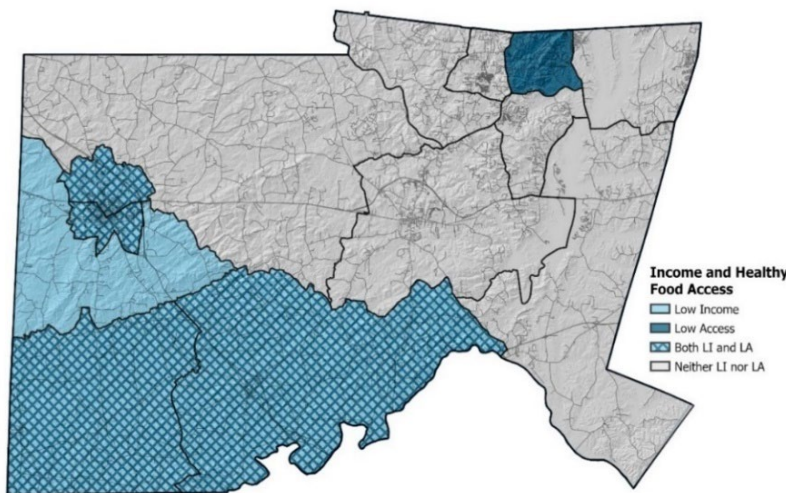
with 11.7% of Chatham County residents citing the lack of sidewalks in areas where they needed to walk as a barrier. Additionally, 1 in 5 (21.2%) Chatham County adults indicated that they would like Chatham County to focus on creating more sidewalks and bike lanes to improve health and quality of life in the community.³³²

Access to Healthy Food Outlets

Given the size of Chatham and its rural nature, there are large swaths of the county where people need to travel more than ten miles to get to a healthy food outlet or grocery store. However, according to the U.S. Department of

Agriculture, less than 1 in 20 of Chatham County residents (4.9%) have low access to a healthy food outlet (live more than 1 mile from a supermarket or large grocery store if in an urban area, or more than 10 miles from a supermarket or large grocery store if in a rural area).³³⁴ This reflects that fact that grocery stores are located in areas of higher population density, so although grocery stores are not equally distributed throughout the county, most people have access to them. The map below offers an illustration of this reality.

FIGURE 39: LOW INCOME AND LOW ACCESS TO HEALTHY FOOD OUTLETS CENSUS TRACTS IN CHATHAM COUNTY.³³⁵



Note: Low Income (LI) tracts exhibit a poverty rate of 20% or greater; Low Access (LA) tracts contain at least 500 people or 33% of the population living farther than 1 mile (urban) or 10 miles (rural) from the nearest supermarket (USDA, 2019).

As indicated on the map, a good portion of the western side of the county qualifies as a low-income and low access to healthy foods areas but while the geographic area impacted is large, only 2% of Chatham residents qualify as having limited access to healthy food (by this measure).³³⁶

That said, Chatham County residents are concerned about the limited amount of grocery stores in the county (.19 stores per 1,000 residents³³⁴). In 2021, 26.5% of Chatham County adults identified the need for more places to buy groceries as a top area of focus to

improve health and wellness in the community.³³²

Development and Rural Preservation

Chatham County holds a unique position as a county in close proximity to urban centers that also has strong rural and agricultural roots. The county has experienced significant development, with further projects underway and still more planned for the future, including

one of the largest residential and business developments in North Carolina in the form of Chatham Park and the state's largest ever economic development project that landed in Chatham County in 2022, VinFast electric car manufacturing.

The Chatham Park development, which broke ground in 2014, is expected to cover 7,068 acres with 22,000 homes for an estimated 60,000 residents, to be completed by 2045.³³⁸ Chatham Park leadership called 2022 a "breakout year" for the development, with eleven builders currently

constructing homes. The year will also see construction and/or completion on a hotel, a new grocery store, mixed-use buildings, rental apartments, restaurants, and more retail options.³³⁹ The development has not come without public pushback, including concerns about the amount of affordable housing the development will offer³⁴⁰, tree protection and coverage area³⁴¹, and the impact of new roads.³⁴²


Chatham County will also be the future site of the manufacturing plant for VinFast, a Vietnamese electric vehicle manufacturer. Announced in late March 2022, the project is

projected to employ 7,500 people with an average wage of \$51,100. The first vehicles are scheduled to be completed in mid-2024. Economic officials estimate the project will increase the state’s economy by more than \$71 billion over 32 years and increase the area’s payroll by \$383 million a year. The project will be located at Triangle Innovation Point, a “megasite” near Moncure in the southeastern portion of Chatham.³⁴³

In response to this wave of development, the Chatham County Comprehensive Plan, passed in 2017, established preferred locations for future development in the county while picking areas “that are valued for their natural and cultural assets, and should therefore be the subject of future conservation efforts.” The Plan referenced a survey conducted in the summer of 2016 which asked residents what their vision for Chatham County was in 15 years. The top answers included “preserving rural character (which included mentions of farming, lifestyle, quality of life)” and “preservation of the natural environment and agriculture.” The future land use designations outlined in the Comprehensive Plan allotted areas in the county for employment, development, neighborhoods, rural, and agricultural use, as well as areas specifically for conservation where any development, “is sensitively integrated into the landscape.”³⁴⁴

Additionally, in 2020, Chatham County voters approved a quarter-cent increase to the county’s Article 46 sales tax, with increased funds to be

used for education, affordable housing, parks and recreation, and agriculture/land banking purposes, as well as an update to the county’s Farmland and Open Space Preservation Plan, first prepared in December 2009.^{345,346}



CHATHAM TALKS...

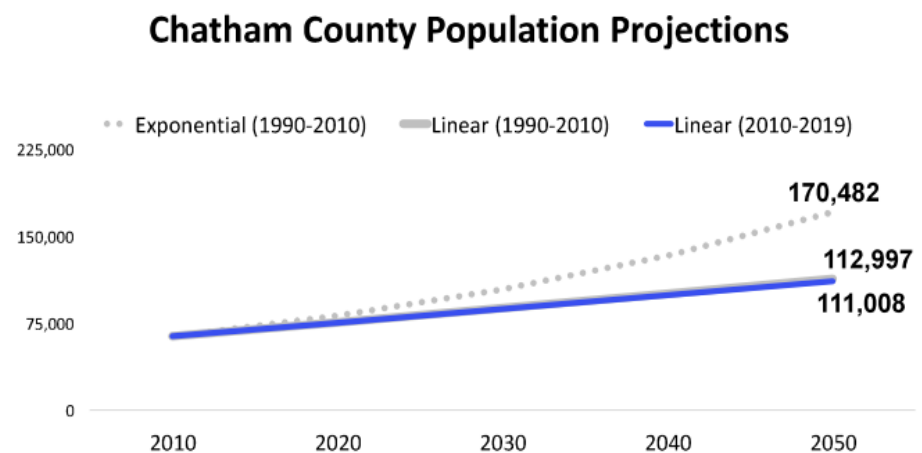
DEVELOPMENT/
PRESERVATION



County residents are seeing some industry and business growth, but residents in some areas feel they are not seeing the benefits.

There is uncertainty about how these developments will change Chatham County long-term. In the days following the VinFast announcement, county residents spoke to the board of commissioners about their concerns related to development, like having enough schools, potential environmental degradation, and housing density.³⁴⁷ Participants in the Story Circles held as part of the Community Assessment process raised concerns about whether or not new housing developments will benefit or harm the community and whether

FIGURE 40: CHATHAM COUNTY POPULATION GROWTH, 2010-2050³³⁵



Source: Decennial Census and Census Population Estimates

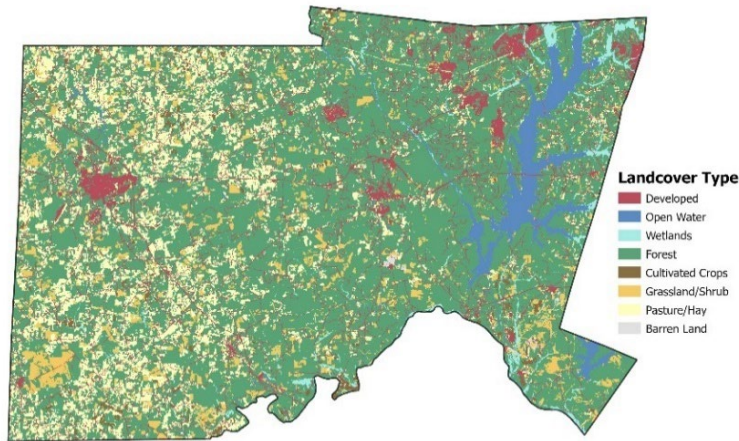


they would address needs or exacerbate issues already present.

Transportation

Transportation is a crucial element in daily life, including accessing necessities such as groceries, health care services, or going to

FIGURE 41: CHATHAM COUNTY LANDCOVER



SOURCES: MLRC CONSORTIUM (2019), NCGS, NCDOT, EOC

work. Lack of safe, convenient, affordable transportation options, including vehicles, walking, or biking, and public transportation, can be a barrier to health and well-being for many. More than 9 in 10 Chatham County adults (94.8%) say they usually take a car or truck to get to work, school, or shop for groceries, while 5.7% said they get rides from family or friends and 3.5% said they walk. Other options selected included bicycle, motorcycle, and public transportation. Black and Hispanic/Latinx adults were significantly more likely to report using public transportation than White, non-Hispanic adults.³³²

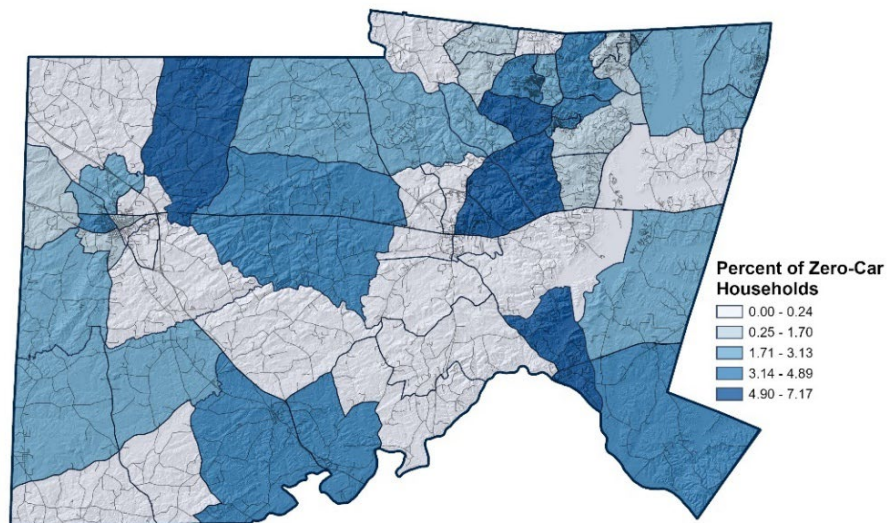
Regarding issues with transportation, around 1 in 6 adults (16.0%) said there were no sidewalks where they needed to walk, 9.2% said available public transportation routes were not convenient for them, 8.1% cited a lack of knowledge with how to use public

transportation, and 7.2% reported not being able to afford necessary repairs. Further, more than a quarter of Hispanic/Latinx adults reported that there were no sidewalks where they needed to walk and 22% reported lack of knowledge about using Chatham's public transportation was a barrier in the past year.³³²

Chatham Transit Network is the primary public transportation option in the county. The agency provides subscription transportation services to select locations in Chatham and Lee

counties, general public transportation on two routes run each weekday, and a reservation service that provides rides from any location in Chatham to any other location in Chatham.³⁴⁸ Chatham Transit provided free transportation for county residents to receive the COVID-19

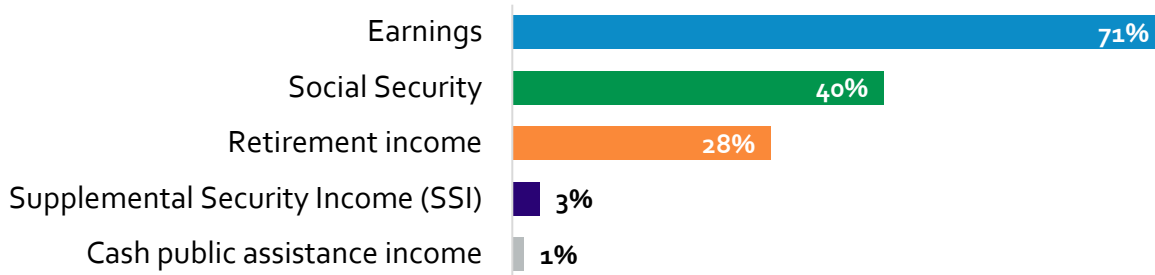
FIGURE 43: PERCENT OF ZERO-CAR HOUSEHOLDS IN CHATHAM COUNTY, 2014-2019



SOURCES: AMERICAN COMMUNITY SURVEY (5-YR) (2014-2019), EOC, NCGS, NCDOT

FIGURE 44: SOURCES OF HOUSEHOLD INCOME IN CHATHAM COUNTY, 2016-2020³⁵¹

A relatively high proportion of Chatham County Households' source of income is retirement income.



vaccine in early 2021, paid for through a grant from the N.C. Department of Transportation and N.C. Department of Health and Human Services.³⁴⁹

Another important connection between transportation and health is the environmental health impact of living near major roadways and in particular, the fact that some communities are more likely to experience these negative harms. The American Public Health Association reports that “[t]ransportation decisions that take place upstream affect our lives downstream. We all use various ways to get to work or school, to access healthy foods and to do countless other things every day. Yet poor transportation decisions can harm health and are not always fair across all communities. For example, communities near a highway or major roadway are often low-income and communities of color. Living near a highway or major roadway increases a person's exposure to traffic-related air pollution. Traffic-related air pollution is linked to respiratory conditions like wheezing and decreased lung functioning and also cardiovascular disease. Long-term exposure to traffic-related air pollution is linked to childhood asthma.”³⁵⁰

Employment and Income

Overall, Chatham County's employment and income indicators are strong. The county has a low unemployment rate and relatively high

median income. About 55% of the Chatham residents who are 16 and older are employed while 42% of the 16 and older population are not currently in the labor force.³⁵¹ According to the 2021 CCCS, nearly 80% of employed Chatham County residents work full-time.³³² Notably, 24% of the population is 65 years and older, contributing to a relatively high proportion of households utilizing retirement income.³⁵¹

Despite these strong overall measures, there are notable disparities in employment and income. Additionally, the availability of jobs in the county itself and lower than average wages are causes of concern for many residents. In fact, higher paying employment was selected as a top priority by 26.3% of CCCS respondents making it among the top five issues of concern.³³²

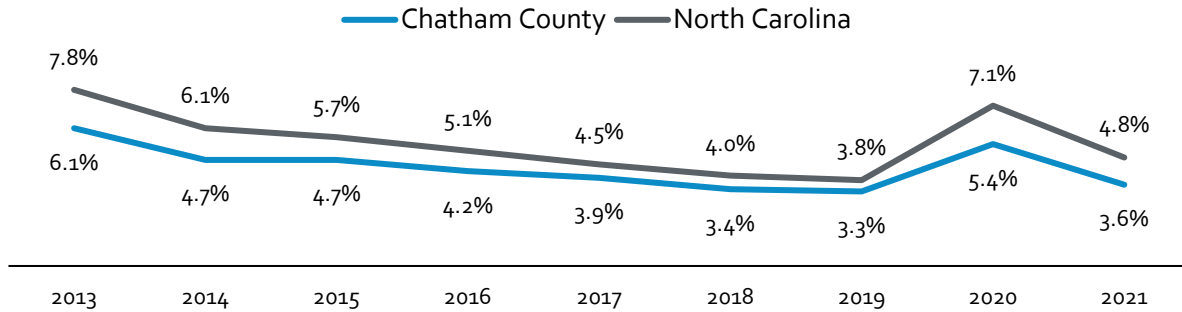
Unemployment

In January 2022, the seasonally unadjusted unemployment rate in Chatham County was 2.8%.³⁵² This is lower than both North Carolina's and the United States' unemployment rate, both 4.0% at that time.³⁵³ The self-reported unemployment rate among

FIGURE 45: SEASONALLY UNADJUSTED UNEMPLOYMENT RATE, CHATHAM COUNTY AND NORTH CAROLINA, 2013-2021³⁴⁹

With the exception of 2020, Chatham County’s unemployment numbers have been trending downward in recent years.

Chatham County’s unemployment rate is consistently below the state overall.



Chatham County adults was slightly higher at 4.3%.²⁹⁴ With the exception of 2020 and the impact of COVID-19, Chatham County’s unemployment numbers have been trending downward since 2013.

COVID-19 Employment Impacts

In 2020, the impacts of COVID-19 drove up the county’s unemployment rate, peaking in April and May 2020 at 8.8% and 9.5% respectively.³⁵⁴

The 2021 CCCS found that COVID-19 negatively impacted employment and income for at least 1 in 10 adults in the county.³³²

Household Income and Employee Wages

The median household income in Chatham County is \$69,799, about 25% higher than the state’s median household income of \$56,642.³⁵⁵ While this overall measure is strong, it does not capture the stark and concerning disparities between different demographic groups.

FIGURE 46: DISPARITIES IN MEDIAN HOUSEHOLD INCOME IN CHATHAM COUNTY, 2020³⁵⁵

Median household income for White, not Hispanic/Latinx residents is **1.6 to 2.7 times higher** than other demographic groups in the county.

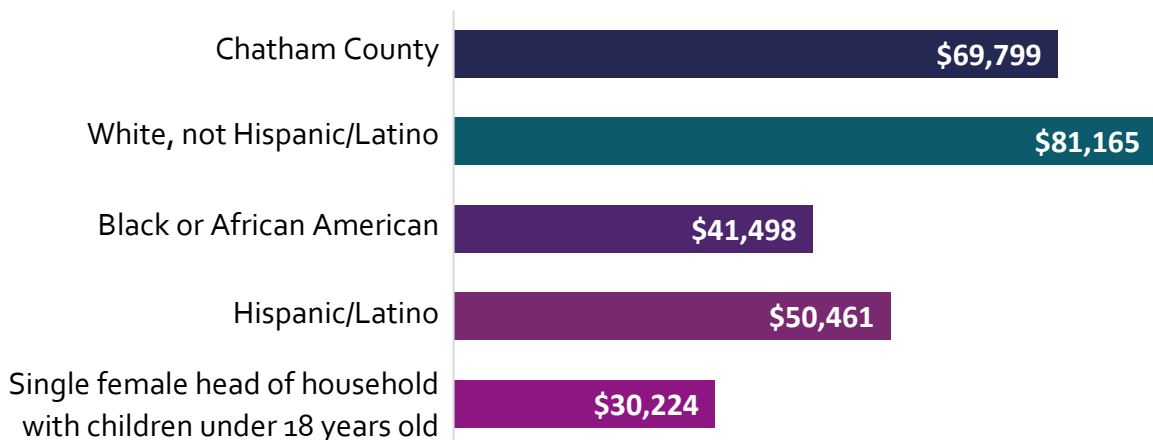


FIGURE 47: COVID-19 IMPACTS ON EMPLOYMENT AND INCOME AMONG CHATHAM COUNTY ADULTS³⁵⁶

COVID-19 impacted employment and income for many in Chatham County.

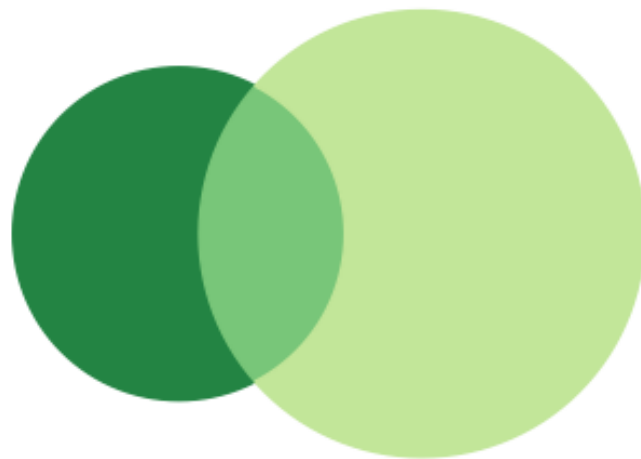


Considered in relation to the average cost of living index for Chatham County, the impact of these disparities is significant. According to the NC Justice Center’s Budget and Tax Center, Chatham County is one of the 5 most expensive counties to live in in North Carolina.³⁵⁷ The Sperling’s Best Places to Live Cost of Living Index gives Chatham County a score of 107.8, indicating Chatham County is a more expensive place to live than the average place in the United States.³⁵⁸ Using the Budget and Tax Center’s Livable Income Standard, the high cost of living in Chatham means that for a family of four to make ends meet, they need a household income of \$58,717.³⁵⁷ Nearly 40% of Chatham County households make less than that annually.³⁵⁵

2021.³⁵³ This may help to explain why more than half of all working adults in Chatham (55.6%) are employed outside the county (compared to 28.5% of workers in North Carolina overall)³⁵⁹, and that higher-paying employment within the county was cited as a top concern among county residents in 2021.³³²

FIGURE 48: PROPORTION OF WORKERS WHO LIVE AND WORK IN CHATHAM COUNTY, 2019¹

Most Chatham County workers are employed outside the county and most people employed in Chatham County live in another county.



| | |
|--------|--|
| 11,074 | - Employed in Selection Area, Live Outside |
| 24,818 | - Live in Selection Area, Employed Outside |
| 6,134 | - Employed and Live in Selection Area |

Adding to the challenge of making ends meet in Chatham County is the fact that wages in the county have not kept up with the cost of living. In the third quarter of 2021, the average weekly wage in Chatham County was \$839, which amounts to only \$43,628 annually and is less than the state average of \$1,111 per week. The average weekly wage was also much lower than surrounding counties. For instance, Durham County’s average weekly wage was \$1,567, Orange County’s was \$1,303, and Wake County’s was \$1,272 in Q3 of

Within the county, the largest employers are³⁵³:

- Chatham County Schools
- County of Chatham
- Carolina Meadows, Inc.
- Mountaire Farms of NC, Inc.
- Galloway Ridge, Inc.
- UNC Health
- Wal-Mart Associates, Inc.

Work-Related Stress

When asked about their primary causes of stress, 30.8% of Chatham County adults cited work as a cause and 6.8% indicated that they were stressed about job stability.³³² A factor that potentially contributes to work related stress is the comparatively long commute for employed Chatham County residents. The average travel time to work for residents is 29.8 minutes with 10.4% of commuters taking 60 minutes to travel to work.³⁶⁰ Another important stress-related factor assessed on the 2021 CCCS was discrimination, bias, or prejudice in employment; 1 in 20 residents (5.3%) indicated that this was something they had experienced in Chatham County.³³²

Environmental Health

Climate Change and Public Health

Climate change affects the frequency, severity, duration, and location of weather and climate events, such as heavy rain, droughts, rising temperatures, and more. According to the U.S. Global Change Research Program, climate change affects health in two ways: “first, by changing the severity or frequency of health problems that are already affected by climate or weather factors; and second, by creating unprecedented or unanticipated health problems or health threats in places where they have not previously occurred.”³⁶¹

Those changes are being felt in North Carolina. According to the North Carolina Institute for Climate Studies, North Carolina has warmed by about one degree Fahrenheit over the last 120 years, and scientists expect this warming will continue. That projected heat presents a public health risk and the impacts from weather, particularly severe weather events, will be more significant. A summary of a report from the Institute states: “Over the next 80 years, the state can expect disruptive sea level rise, increasingly hot nights, and more days with dangerous heat and extreme rainfall unless the global increase in heat-trapping gases is stopped.”³⁶²

The Chatham County Environmental Quality Department has produced multiple greenhouse gas inventories in recent years. The most recent was published in 2021, evaluating data from 2020. The transportation sector accounted for 43% of the county’s carbon dioxide emissions, followed by industrial (20%), residential (19%), commercial (9%), agriculture (5%), waste (3%), and internal government (1%), for a total of 918,410 metric tons of emissions. However, the county also has carbon sinks, defined as

“forests, soils, oceans, or other natural environments that absorb more carbon than they release.” Chatham’s carbon sinks absorbed an estimated 1,151,631 metric tons per year between 2008 and 2016. The report states this would leave Chatham carbon neutral but cautions that this figure specifically should be viewed with “healthy skepticism,” especially as the landscape of Chatham County has changed significantly from 2016 to the present day with heightened residential development. The report also noted that the opening of a coal ash pit in Chatham in the near future will likely emit an additional 142,309 metric tons a year, about 15% of the county’s current yearly emissions.³⁶³

The Chatham County Climate Change Advisory Committee (CCAC) has been meeting for several years to evaluate the state of Chatham’s climate and make recommendations to the county’s Board of Commissioners. In June 2017, noting the increasing impact of climate change, the commissioners passed a resolution “supporting a state and national goal of 100% clean energy by 2050 and the creation of green jobs,” including the county itself in that goal.³⁶⁴ In December 2021, the CCAC outlined the following ten recommendations in pursuit of these goals³⁶⁵:

Sequestration and Regeneration Recommendations:

1. Conserve Lands - Develop Strategy for 20,000 acres with interim goals
2. Tree Preservation - Develop tree protection ordinance
3. Promote Sustainable Agriculture - Hold a mini-summit
4. Learning Areas - Establish 10 carbon management demonstration areas in parks & public places
5. Green Space in New Developments - Set policies to ensure ample set asides

Reducing Greenhouse Gas Pollution
Recommendations

6. Cleaner County Fleets - Increase use of EVs and hybrid vehicles
7. Accessibility of EV Charging Stations
8. Reduce Emissions with Green Buildings

General Recommendations:

9. Green Jobs Summit
10. Climate Perspective in County Decisions and Progress Measurement

Tick-Borne Illnesses

Ticks are parasites that feed on warm-blooded hosts through bites. Ticks can feed on mammals, birds, reptiles, and amphibians, and illnesses from those bites can be consequential if not treated early.³⁶⁶ In 2021, 39.5% of households in Chatham County reported that a household member had found a tick on their body in the past year, down from 57.8% in 2018, while 6.6% of adults reported they had ever been diagnosed with a tick-borne illness (TBI), slightly lower than in 2018 (8.3%).³⁶⁷ There are many TBIs, but three are most common in Chatham County and North Carolina: Ehrlichiosis, Spotted Fever Group Rickettsiosis, and Lyme Disease.

Ehrlichiosis: This illness to humans often comes from the bite of the lone star tick, which is found primarily in the southcentral and eastern United States. People infected with this illness will often have symptoms of fever, chills, headache, muscle aches, and

sometimes upset stomachs.³⁶⁸

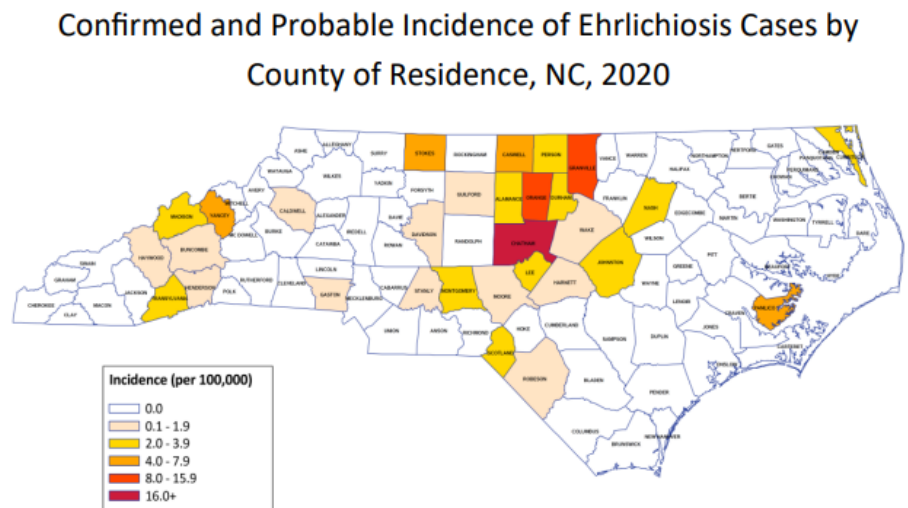
The national rate of ehrlichiosis was 0.65 cases per 100,000 residents in 2019. Chatham County had the highest rate of ehrlichiosis diagnoses in the state in 2020 with more than 16 cases per 100,000 population, compared to the state rate of 1 case per 100,000 (which has increased since 2015).³⁶⁹

Spotted Fever Group Rickettsiosis: Also known as spotted fevers or SFGR, these illnesses are commonly spread through infected mites and ticks. These illnesses can range from mild to life-threatening, with most people getting a dark scab at the site of the tick or mite bite, fever, headache, and rash.³⁷⁰

The national average incidence of confirmed and probable cases in 2019 was 1.59 per 100,000 population. In 2020, North Carolina saw 1.81 cases of SFGR per 100,000 residents. Once again, Chatham was near the top of the pack, with more than 16 cases per 100,000 population, putting the county alongside only three others with similar rates.³⁷¹

Lyme Disease: The most common vector-borne disease in the United States, Lyme

FIGURE 49: EHRLICHIOSIS CASE INCIDENCE PER 100,000 IN NORTH CAROLINA, 2020³⁶⁹



Spotlight on Resources: *Tick-Borne Infections Council of North Carolina*

Based in Pittsboro, the Tick-Borne Infections Council of North Carolina, Inc. is a non-profit organization working to improve the recognition, treatment, control, and understanding of tick-borne diseases in North Carolina. The agency advocates for surveillance of tick-borne illnesses and education in healthcare sectors about TBIs. The Council’s website offers numerous educational tools for North Carolina residents on the most common ticks in the state, preventative measures to avoid illness and the organization’s quarterly newsletter. To learn more, visit www.tic-nc.org.

disease is transmitted to humans through the bite of infected blacklegged ticks. Common symptoms are fever, headache, fatigue, and a skin rash called “erythema migrans.” If untreated, the infection can spread to other parts of the body.³⁷²

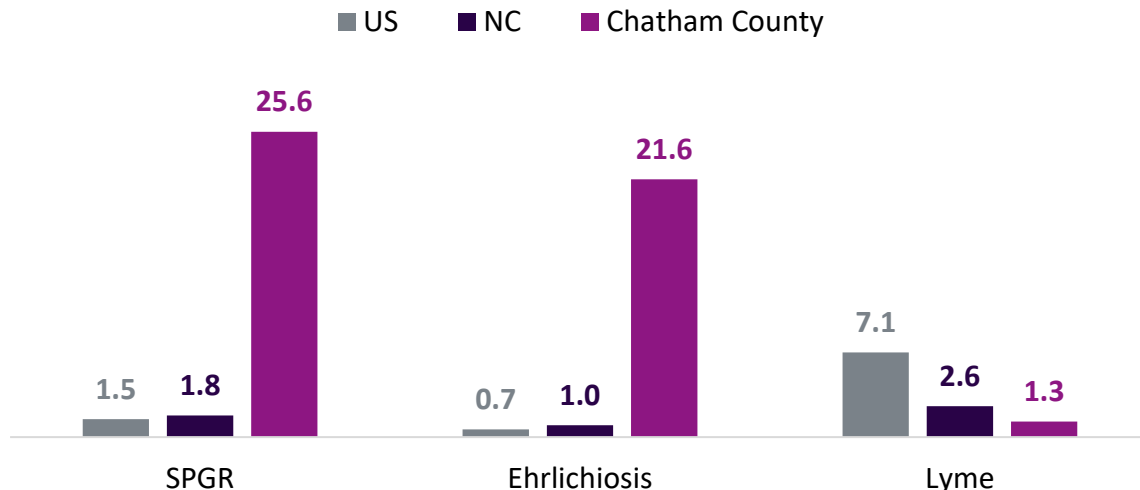
The national incidence rate in 2019 was 7.1 cases per 100,000 residents. Lyme disease reports in North Carolina have risen in the last five years, with more cases reported in the northwestern part of the state. The state saw 2.59 confirmed and probable cases of the infection per 100,000 residents in 2020. Chatham County was slightly lower than the

state average, seeing less than 2 cases per 100,000.³⁷³

Chatham County has particularly large areas of tick habitat, primarily brushy areas with high grass and vegetation, likely contributing to the high number of TBIs. As such, county residents and visitors should actively prevent tick bites by avoiding those habitats when possible, walking in the center of trails, checking for ticks after being outside, and removing ticks promptly and properly. Additional recommended prevention measures include using EPA-registered tick repellents, wearing light colored clothing, and tucking shirts into pants and pants into socks when walking where ticks live. Those who are

FIGURE 50: TICK-BORNE ILLNESSES CASE RATES PER 100,000, 2019-2020³⁶⁹⁻³⁷³

Chatham County has higher rates of SPGR and Ehrlichiosis compared to the state and country, but lower rates of Lyme disease.



bitten should monitor themselves for symptoms and seek medical attention right away.

The Chatham County Public Health Department offers free tick kits to the community that include sharp-tipped tweezers with a magnifying glass, first aid strips, and information on how to safely remove a tick. They can be picked up at the Environmental Health Division window in the Pittsboro office.

Water Quality

Water quality is a particularly salient topic in Chatham County, emerging as the top area of concern among CCCS respondents.²⁹⁴ Of particular concern is the presence and levels of per- and polyfluoroalkyl substances (PFAS), which may increase risk of health issues such as kidney or testicular cancer, elevated cholesterol levels, high blood pressure during pregnancy, low birth weight, and poor immune system responses.³⁷⁴ In 2021, Pittsboro was identified as having among the highest levels of PFAS in the United States. Pittsboro water samples were found to have 80.2 parts per trillion (ppt) of PFAS, above than the federal advisory level of 70 ppt.³⁷⁵ Pittsboro has had water quality issues reported to the public as far back as 1985, when a drinking water study found thirty-eight named chemicals and fifteen unnamed chemicals in the Haw River. An additional toxic chemical, 1,4-Dioxane, has also been discovered in the Haw.³⁷⁶

One study found the concentration of PFAS is two to four times higher in the blood of Pittsboro residents than the U.S. population as a whole. Researchers believe that the Haw River may be the carrier of the chemical, stemming from a wastewater treatment plant in Greensboro, since an earlier study found similar chemicals in the blood of residents of Wilmington, which also gets water from the Haw.³⁷⁷

Additionally, Pittsboro has seen three separate discharges containing 1,4-Dioxane into the Haw River and through Pittsboro's drinking water supply since July 2021:

- July 2021: The City of Greensboro discharged 1,4-Dioxane levels 20 times higher than the Environmental Protection Agency recommended level into one of the Haw's tributaries.
- November 2021: An improper discharge from a Greensboro facility produced a 1,4-Dioxane level of 767 micrograms per liter, nearly 22 times higher than the EPA level, in the Haw River proper.³⁷⁸
- April 2022: Another discharge into the Haw, again likely emanating from Greensboro, saw samples come back at 52.2 micrograms per liter and 95.1 micrograms per liter of 1,4-Dioxane.³⁷⁹

These latest developments might explain why Chatham County residents chose "water quality" as the number one area the county should focus on to improve health and quality of life, with more than 1 in 3 adults (36.7%) selecting the issue. Additionally, more than 1 in 5 Chatham adults (21.2%) disagree or strongly disagree that Chatham County's environment (including air and water) is healthy. Water quality is especially important, particularly from tap water, because the vast majority of Chatham residents use tap water. More than 6 in 10 Chatham adults (60.6%) use it for both drinking and cooking, while almost 1 in 4 (23.6%) use it for cooking but not drinking, and 1.3% use it for drinking but not cooking. Black and Hispanic/Latinx households were notably less likely to use their tap water for drinking and cooking than White households.³⁶⁷

In 2019, the Town of Pittsboro created the Pittsboro Water Quality Task Force to address the rising levels of pollutants and contaminants in water. The primary recommendation was to stop discharges at the source, but the task

Spotlight on Resources: *Chatham County Environmental Health Department*

Chatham County's Environmental Health (EH) Division serves a variety of roles in the county, primarily in conducting inspections and making sure regulations are followed in the operation of restaurants, food trucks, swimming pools and more. The EH division also offers water quality sampling; staff collect water samples to be tested for the presence of a number of bacteria and other contaminants by the State Public Health Laboratory. These types of analyses are required within 30 days of completion of a newly constructed well. To learn more about this program, visit www.chathamcountync.gov/environmentalhealth.

force noted it was unlikely that municipalities like Greensboro would prevent such discharges. The Town has joined with the City of Durham and Chatham County to form the Western Intake Partnership, which would eventually build a new water treatment facility, intake facility, and pump station on Jordan Lake to deliver water to those areas. The plant is currently projected to be ready in 2031. In the meantime, the Town of Pittsboro has taken steps to improve its own wastewater systems and provide town residents with free access to a reverse osmosis water filling station at Chatham Marketplace.³⁷⁹

The quality of groundwater in Chatham County is also important. More than half of county properties use wells as their drinking water source.³⁸⁰ Historically, high levels of manganese and iron, which are naturally occurring contaminants, have been detected in wells in Chatham County and in wells across the southeastern United States. A 2019 study of 242 wells in Chatham County found that more than half had levels of chromium-6, a cancer-causing chemical, above state health standards, and 84% of the wells contained high levels of vanadium, which could cause cancer as well.³⁸¹

These contaminants and many others can be treated with residential treatment systems. Well owners are responsible for the operation,

maintenance, and monitoring of their well water quality and should consult with a water treatment specialist for any questions about water treatment systems, costs, and maintenance. The Chatham County Public Health Department encourages all well owners to sample their well routinely for bacteria, inorganic/minerals, and for other contaminants as needed based upon past or current activities around the well.

Safety

Bullying & School Safety

Students who are bullied are more likely to experience negative mental health effects, decreased academic achievement, and other health complaints.³⁸² Nearly 1 in 4 Chatham County high school students (22.9%) reported that they had been bullied on school property sometime in the last year, compared to 1 in 5 high school students nationwide (19.5%) who report the same. Female students (26.9%) were more likely than male students (18.8%) to be bullied. In addition, 37.6% of students who identified as gay, lesbian, or bisexual reported experiencing bullying on school property compared to 20.2% of their heterosexual peers.²⁷⁵ Among Chatham County middle school students, 46.9% said they had ever been bullied on school property. Additionally, more than half (59.8%) said they have seen other students being bullied in their school.²²²

Electronic bullying, which means being bullied through texting, Instagram, Facebook, or other social media, is also a concern. While fewer high school students in Chatham County report this kind of bullying (15.6%, almost exactly the national average³⁸³) compared to in-person bullying, girls are disproportionately affected. More than 1 in 5 female students (21.3%) report being the victim of electronic bullying compared to less than 1 in 10 males (9.6%). This gender disparity is consistent throughout all age groups, grade levels, and races/ethnicities. Additionally, around 1 in 4 students (24.8%) identifying as gay, lesbian, or bisexual reported being electronically bullied in the past year, compared to around 1 in 7 (14.0%) of their heterosexual peers.²⁷⁵ Approximately a quarter (24.0%) of middle school students reported ever being the target of cyberbullying, including 30.7% of female students.²²²

In Chatham County Schools, school employees are required to report instances of bullying or harassment. Others wishing to report such

actions may make anonymous statements. All reports, according to district policy, “will be investigated expeditiously.” There are also policies on cyberbullying, discrimination, and harassment based on race, sex, color, national origin, religion, disability, or age.³⁸⁴

Safety on School Premises

Most Chatham County high school students indicate that they feel safe at school, but 13.9% said they did not go to school at least one day in the past month because they felt unsafe at school or on their way to or from school. Hispanic/Latinx female students (18.3%) were most likely to not go to school because they felt unsafe at or on their way to school, along with Hispanic/Latinx students (16.8%) and female students as a whole (15.2%).²⁷⁵ While the national percentage of students feeling unsafe has increased, it is significantly lower at 8.7%.³⁸³

More than 8% of high school students in Chatham said they had been threatened or injured with a weapon on school property in the past year. While more than 1 in 5 students (21.0%) reported having been in a physical fight at some point in the previous year, only 6.7% reported being in a physical fight on school property.²⁷⁵

Intimate Partner and Sexual Violence

If you or someone you know needs help, call the Second Bloom 24/7 crisis line at 919-545-0055.

Find out more at

<https://www.secondbloomofchatham.org/>.

Intimate partner violence (IPV) is the term used to describe any type of violence or abuse towards a romantic partner or spouse, including physical violence, sexual violence, stalking, and psychological aggression.³⁸⁵ According to the National Coalition Against Domestic Violence:

- 1 in 4 women and 1 in 9 men have experienced severe IPV, sexual violence from an intimate partner, or stalking from an intimate partner
- 1 in 3 women and 1 in 4 men have experienced some form of physical violence by an intimate partner.
- 1 in 10 women have been sexually assaulted by an intimate partner.
- IPV accounts for 15% of all violent crime.³⁸⁶

Most sexual violence is committed by someone the victim knows; 8 of 10 sexual assaults are committed by an acquaintance, current or former spouse or partner, or someone else the victim knows.³⁸⁷ In 2019, 1 in 11 North Carolina adults (9.0%) reported that someone had sex with them without their consent. In Region 5 of the North Carolina Association of Local Health Directors, which includes Chatham County, the prevalence is 4.9%.³⁸⁸

While specific numbers on how many Chatham County residents have experienced IPV are lacking, residents in just less than 1 in 50 households (1.82%) in the county reported seeking help for abuse (including physical, verbal, emotional/psychological, or sexual abuse) while living in Chatham.³⁸⁹ Considering the much higher rates of IPV in the general population, this is likely not reflective of the total of the population who has experienced such abuse.

Intimate partner violence also has a strong connection to homicides committed against women. In 2019, 2 in 5 homicides against women (40.0%) in North Carolina were related to intimate partner violence, compared to just 8.7% of homicides against men.³⁹⁰

The COVID-19 pandemic was projected to potentially lead to more incidents of IPV due to stay-at-home orders requiring people to stay within potentially abusive situations. In one survey of women and transgender/nonbinary individuals in Michigan, researchers found that around the same number of participants reported IPV in the months after the pandemic started as before. However, more than half of those who reported IPV said such abuse was new to the relationship or of increased severity. The report stated that cases of new or increased IPV were more concentrated in marginalized groups.³⁹¹

Teen Sexual and Dating Violence

Teen dating violence is a nationwide issue. According to the CDC, nearly 1 in 11 female and approximately 1 in 14 male high school students report experiencing physical dating violence within the past year, and 1 in 8 female and 1 in 26 male high school students report experiencing sexual dating violence.³⁹²

Chatham County teens face these issues as well. Twelve percent of Chatham County high school students report ever being physically forced to have sexual intercourse when they did not want to, including 17.2% of female students. Additionally:

- 14.7% of students reported experiencing any form of sexual violence in the previous year, including more than 1 in 5 female students (21.8%).
- 9.6% of students reported experiencing sexual dating violence within the past year, including approximately 1 in 7 female students (14.8%).

- 8.4% of students reported experiencing physical dating violence within the past year.²⁷⁵

Chatham County students who identified as gay, lesbian, or bisexual were nearly 3 times as likely to have ever been physically forced to have sexual intercourse when they did not want to, more than twice as likely to have experienced sexual violence within the past year, and more than 3 times as likely to experience sexual dating violence or physical dating violence within the past year.³⁹³ The percentage of high school students who had ever been physically forced to have sexual intercourse, had experienced sexual violence, and had experienced sexual dating violence increased from 2017 to 2019, while the percentage that reported physical dating violence decreased slightly.²⁷⁵ All the above numbers were higher than both North Carolina and United States rates.³⁸³

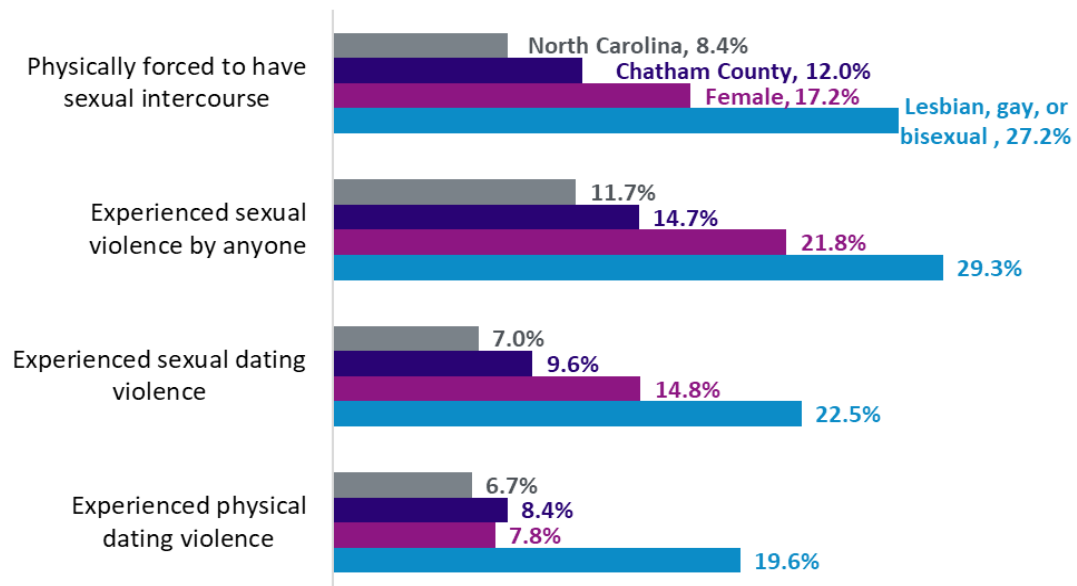
Resources

After the Family Violence Rape Crisis Center closed in October 2018, Chatham County was without an established nonprofit for domestic violence and sexual assault support.³⁹⁴ Within the next year, Chatham County Court Programs established the Family Violence Prevention Services (FVPS) division to meet the need for domestic violence services. FVPS and Second Bloom of Chatham, a newly established nonprofit, partnered to establish a crisis phone line.³⁹⁵ Over 2020 and 2021, Second Bloom hired staff members and became an accredited agency with the North Carolina Coalition Against Domestic Violence.³⁹⁶

Second Bloom currently operates a crisis line at 919-545-0055 for those experiencing intimate partner violence or sexual abuse and offers in-person crisis support and assistance with completing and filing domestic violence protective orders. The nonprofit also offers support groups for survivors and community education.³⁹⁷

FIGURE 51: SEXUAL AND DATING VIOLENCE EXPERIENCED BY HIGH SCHOOL STUDENTS IN PAST YEAR, 2019²⁷⁴

Female students and **lesbian, gay, or bisexual students** experience higher rates of sexual violence in Chatham County compared to their peers. Rates of sexual and dating violence are higher among teens in **Chatham County** than in **North Carolina** overall.



Spotlight on Resources: *Chatham County Council on Aging*

The Chatham County Council on Aging (COA) promotes independent living and physical and mental wellness for seniors ages 60 and older through services, supports and activities. Among other things, the COA provides home-based services like in-home aide personal care and meal delivery; programs and activities on health, wellness, nutrition, and recreation; and support for caregivers of older adults who want to stay living at home. The COA, founded in 1974, has two Senior Centers, one in Pittsboro and one in Siler City. To learn more, visit www.chathamcouncilonaging.org.

Additionally, Pathways to Change, a nonprofit based in Orange County, provides intervention and classes for abusers in Chatham, Orange, and Durham counties.³⁹⁸

Elder Abuse

According to 2020 Census estimates, individuals ages 65 and older made up 24.4% of Chatham County's population, a significantly higher rate than the state (16.3%) and national (16.0%) proportions.³⁹⁹ That percentage is projected to grow to 34% by 2039—more than 2 in 5 residents (41%) will be 60 years of age and older and the number of adults ages 85 and older is expected to nearly triple over the next 20 years.⁴⁰⁰

Older adults are at risk of victimization from elder abuse, defined as "an intentional act or failure to act that causes or creates a risk of harm to an older adult." The CDC defines "older adult" as anyone age 60 or older, but some define the group by those age 65 and older. Elder abuse can take many forms, including physical, sexual, emotional or psychological, neglect, and financial abuse. Nationally, studies have found that elder abuse is experienced by around 1 in 10 older adults who live at home. Men and individuals of color are more likely than their peers to be the victim of elder abuse.⁴⁰¹ Estimates also suggest that for every incident of abuse reported, up to an additional twenty-four cases go unreported.⁴⁰²

No numbers are immediately available for types of elder abuse in Chatham County, but

anecdotally, it has been an issue. In August 2021, Siler City Police Chief Mike Wagner told the Chatham News + Record that senior adults in the town had seen an increase in scams, saying, "calls to his department reporting senior-targeting scams have distinctly escalated since the pandemic's start, and tens of thousands of dollars, if not more, have been stolen from town residents."⁴⁰³

Emergency Preparedness

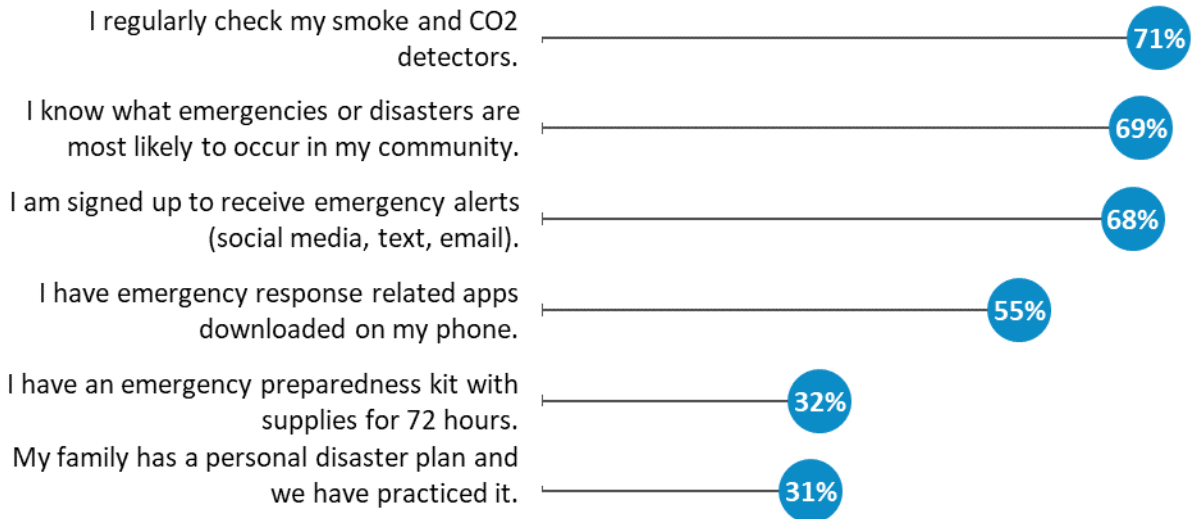
Emergency preparedness takes many forms. Government agencies have preparedness divisions to help respond to natural disasters, public health incidents, and other events requiring large-scale intervention. Additionally, individuals can act in their own lives to properly prepare for emergencies. In 2020, 68% of Americans reported that they had taken three or more basic actions to prepare for an emergency, including gathering supplies, seeking preparedness information, and creating an emergency plan.⁴⁰⁴ However, more than 2 in 3 Chatham County adults say they do know what emergencies or disasters are likely to occur in the community (69.0%).³⁸⁹

Since the last Community Assessment in 2018, North Carolina has seen three major natural disasters: Hurricane Dorian in September 2019, Hurricane Isaias in August 2020, and Tropical Storm Fred in August 2021.⁴⁰⁵

Many Chatham County households expressed concerns about issues caused by disasters and emergencies. Most are concerned about their

FIGURE 52: CHATHAM COUNTY SELF-REPORTED EMERGENCY PREPAREDNESS, 2021³⁸⁹

Many Chatham County residents have taken steps to prepare for emergencies. Fewer residents have emergency preparedness kits or family disaster plans.



homes, like losing power (71.9%), damage being done to their home or property (62.6%), and losing home heating and cooling (55.6%). Many also expressed concern about roads being blocked or flooded (44.5%). Just 13.1% said they had no concerns related to disasters or emergencies.⁴⁰⁶

A key part of individual emergency preparedness is a basic emergency supply kit. These kits can include several items like nonperishable food, water, flashlights, and batteries. Around 3 in 10 (31.8%) Chatham County households say they have an emergency preparedness kit with supplies for three days, with almost the exact same number (31.1%) saying they have a personal disaster plan they have practiced.³⁸⁹

Chatham County Emergency Management (CCEM), like other divisions in governments across North Carolina and the country, works to keep Chatham ready for any possible emergency and helps lead the response to natural disasters, chemical spills, and other events that require their services. CCEM uses the software CodeRED to notify enrolled

residents on imminent threats to health and safety based on location. These notifications can be received through phone calls, text messages, and email and 68% of Chatham adults say they are signed up to receive emergency alerts through some platform.³⁸⁹ To register for the CodeRed alert system, visit <https://www.chathamcountync.gov/government/departments-programs-a-h/emergency-management/alert-chatham>, or call 919-545-8163.

Firearm Safety

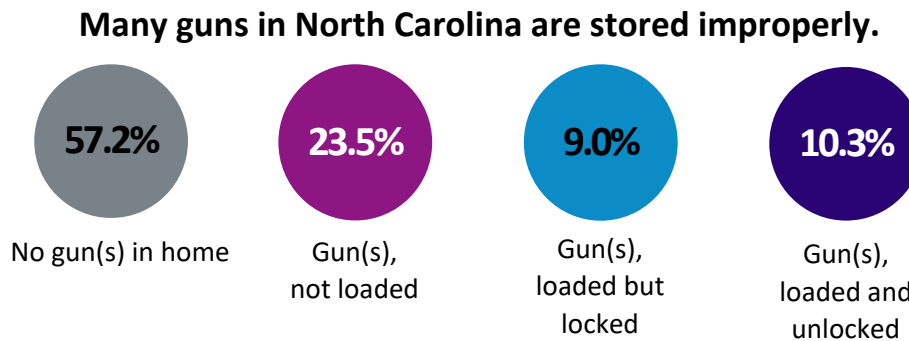
In a 2020 Gallup survey, 32% of American adults said they own a gun, while 44% said they live in a household where a gun is present. Men are more than twice as likely as women to own a firearm (45% vs. 19%), and those living in rural areas (48%) are more than twice as likely as those in a city (23%) and nearly twice as likely as those in a suburb (25%) to own one.⁴⁰⁷ In North Carolina, nearly half of all adults (42.8%) live in a home with a gun, with more than 1 in 10 (10.3%) living in a home with an unlocked and loaded gun.⁴⁰⁸

Between January 1, 2015, and December 31, 2020, there were at least 2,070 unintentional shootings by children under age 18, causing 765 deaths and 1,366 injuries nationally. Seven in ten of these shootings occurred in homes, and rates of death or injury from these shootings in states with no secure storage laws were two to three times higher the rates in states without these laws.⁴⁰⁹ Firearm-related deaths are now the main cause of premature deaths due to trauma in the United States, overtaking car crashes⁴¹⁰ and firearm-related injuries rank in the top five causes of death for people ages 1-64 in the United States.⁴¹¹ Easy access to “lethal means,” including a gun, is also one of the highest risk factors for suicides.⁴¹² In 2020, there were 670 non-suicide firearm-related deaths in North Carolina, an increase from 511 in 2019. Gun injuries in the state also increased around 13% from the previous year.

13.2 per 100,000. Men were nearly five times more likely to die from firearms than women.⁴¹⁴ Firearm injuries accounted for 1 of every 166 emergency department visits in Chatham (0.6%) in 2021, with the vast majority (85%) of those injuries unintentional.⁴¹⁵

All local Department of Veterans' Affairs and Project Child Safe have free cable gun locks that individuals and organizations can request. Keeping guns locked away and separate from ammunition not only reduces risk of accidental discharge but reduces the chances of someone acting on suicide ideation. Gun owners should take all precautions to lessen the likelihood of these injuries and deaths. For information about firearm safety and how to practice proper handling and storage, visit <https://www.atf.gov/firearms/learn-about-firearms-safety-and-security>.

FIGURE 53: SELF-REPORTED PRESENCE AND STORAGE OF GUNS IN HOMES IN NORTH CAROLINA, 2019³²



Additionally, North Carolina had twenty mass shootings (where four or more individuals are shot and/or killed in a single event at the same general time and location, not including the shooter) in 2020, up from eleven in 2019. One of those mass shootings occurred in Chatham County and was the deadliest in the state in 2020.⁴¹³

More than half of suicide deaths in Chatham County (57.4%) and 2 in 5 homicides (40.0%) from 2015-2019 involved firearms, and firearms were responsible for 9.1 deaths per 100,000 population, which is lower than the state rate of

Reckless/Drunk Driving and Traffic Accidents

According to the CDC, motor vehicle accidents are a public health issue in the US and globally, with more than 100 deaths per day from vehicle crashes in the United States.⁴¹⁶ From 2015-2019, motor vehicle accidents were the fifth leading cause of death among infants and children in Chatham County.⁴¹⁷ To reduce the risk of severe injury and death, laws have been enacted across the state. For example, all individuals in a moving car must wear a seat belt by North Carolina law, and children under 8

years of age and weighing less than 80 pounds must be secured in a weight-appropriate child passenger restraint system.⁴¹⁸

Reckless driving, or driving in a way that endangers others, and drunk driving can lead to traffic accidents, causing property damage, injury, and death. Reckless driving can include excessive lane changing, speeding, or driving while distracted. The National Highway Traffic Safety Administration (NHTSA) estimated that 2.74 million people were injured and 36,096 people died from motor vehicle traffic crashes nationally in 2019.⁴¹⁹

In general, Chatham County has fewer crashes than most North Carolina counties. In 2020, Chatham ranked 94th in the N.C. Department of Transportation's County Crash Ranking, which is a composite of multiple factors such as number and severity of crashes, improving from 79th in 2017. In 2020, Chatham had a lower total crash rate (crashes per 100 million vehicle miles traveled) than the state (188.5 vs. 295.1) and fewer crash injuries per 1,000 people than North Carolina as a whole (6.9 vs 11.8).⁴²⁰

From 2016 to 2020, motor vehicle injuries were tied for being the 8th leading cause of deaths in Chatham County for all ages, ranking 5th for individuals ages 0-19 years and 2nd for individuals ages 20-39 years.⁴²¹

One of the most common distractions is the use of mobile phones while driving. It is currently illegal in North Carolina for anyone to drive while using a cell phone to send or read texts or emails, and for anyone under 18 to use a phone at all while driving.⁴²² Of 2019 traffic fatalities in the United States, 8.7% were connected to at least one driver being distracted.⁴²³

In 2019, among Chatham County high school students who had driven at least once in the last month, more than 1 in 3 (36.7%) reported texting or emailing while driving at least once in

the last month.²⁷⁵ That marked a slight decrease from two years prior (41.7%).²⁷ Despite laws requiring seat belts, more than 1 in 16 Chatham County high school students reported in 2019 that they rarely or never wore a seat belt when riding in a car driven by someone else (6.4%), with male students (8.1%) twice as likely to report this as female students (4.0%).⁴²⁴ This is a decrease from the 8.3% overall that reported the same in 2017.⁴²⁵ Additionally, in 2019, Hispanic/Latinx students (8.2%) were disproportionately more likely to report rarely or never wearing a seat belt compared to Black/African American students (5.4%) or White students (4.4%). Among Chatham County middle school students, 4.4% said they rarely or never wore a seat belt when riding in a car, including 7.3% of Hispanic/Latinx students.⁴²⁶

Even though drunk driving is illegal in every state, around twenty-eight people in the United States die in drunk driving crashes every day, making up 28.0% of traffic fatalities in 2019.⁴²⁷ Nearly 1 in 20 (4.3%) of crashes in Chatham County in 2020 involved alcohol, slightly higher than the state rate of 3.6%.⁴²⁸

More than 1 in 20 (5.1%) of Chatham County high school students who drive report driving a car or other vehicles when they had been drinking alcohol at least once in the previous month, and nearly 1 in 5 (18.8%) report riding in a car with someone who had been drinking at least once in the last month. Hispanic/Latinx students and male students are more likely to engage in both behaviors than their peers.²⁷⁵

More than 1 in 4 traffic fatalities nationwide in 2019 (26.0%) were related to speeding.⁴²⁹ In 2020, speeding was a contributing factor in 1 in 4 fatal crashes in North Carolina, leading to 416 deaths. More than 9 in 10 (91%) fatalities occurred on non-interstate roads. From 2016-2020, men made up the largest percentage of speed-related crash fatalities, accounting for three-quarters of deaths. In that same period,

Spotlight on Resources: *Safe Kids Chatham County*

Safe Kids Chatham County is led by the UNC Health Care Trauma Program, which provides dedicated and caring staff, operation support and other resources to assist in achieving a common goal: keeping kids safe. Based on the needs of the community, this coalition implements evidence-based programs, such as car-seat checkups, safety workshops, and sports clinics, that help parents and caregivers prevent childhood injuries. For more information, visit <https://www.safekids.org/coalition/safe-kids-chatham-county>.

Chatham County had twenty-one speed-related crash fatalities, 25th most in the state.⁴³⁰

Violent Crime

Violence crime is reported as the number of murders, nonnegligent manslaughters, rapes, robberies, and aggravated assaults referred to law enforcement. Though violent crime rates have dropped dramatically since the early 1990s, the American Public Health Association refers to violence as a “public health crisis,” citing not only the injuries and deaths that are the direct result of violence but that being exposed to violence increases the risk of asthma, hypertension, cancer, stroke, depression, post-traumatic stress disorder, poor sleep, social isolation, and smoking.⁴³¹ Younger people and those with lower incomes are far more likely to report being a victim of violent crime.⁴³²

Chatham County’s violent crime rate in 2020 was 250.7 incidents per 100,000 population. That was an increase from 212.8 per 100,000 in 2019, but much lower than the 2020 state rate (451.6 per 100,000) and the 2019 national rate (366.7 per 100,000).⁴³³ More than 4 in 5 Chatham County adults (87.2%) either strongly agree or agree that they feel safe where they live in Chatham County, while 2.1% disagree or strongly disagree.³⁸⁹

In 2019, an estimated 1.2 million violent crimes were reported to law enforcement nationwide. Aggravated assaults made up 68.2% of those crimes, robbery accounted for 22.3%, rape

offenses were 8.2% of crimes, and murder was 1.4% of reported violent crimes. The violent crime rate dropped 1.0% from 2018 and 9.3% from 2010.⁴³⁴ In 2019, aggravated assault made up most violent crimes (69.2%) reported to Chatham County law enforcement entities, followed by rapes (18.3%), robberies (11.7%), and murders/nonnegligent manslaughters (0.6%).^{435,436}

From 2016 to 2020, homicide was not the in top ten causes of death for Chatham County residents overall but was the 6th leading cause for individuals 0 to 19 years (2.5 deaths per 100,000 population) and for individuals ages 20-39 years (7.3 deaths per 100,000).⁴³⁷

COVID-19

History

The COVID-19 pandemic was the first major worldwide spread of a disease in a century. As of January 2022, the world had seen more than 383 million people infected with the virus and nearly 5.7 million deaths associated with it.⁴³⁸ Since the first case in March 2020 to January 2022, there have been more than 11,500 cases and more than 100 deaths resulting from COVID-19 in Chatham County.⁴³⁹

The First Case

The first signs of COVID-19 worldwide came on December 12, 2019, when a group of patients in Wuhan, Hubei Province, China, began to experience shortness of breath and fever. On January 20, 2020, the first case of SARS-CoV-2, a “novel coronavirus” and now most frequently known as COVID-19, was confirmed in the United States in Washington state. On March 11, 2020, the World Health Organization formally declared COVID-19 a pandemic.⁴⁴⁰

In early 2020, the Chatham County Public Health Department (CCPHD) began meeting with community partners to plan for the spread of SARS-CoV-2 into the county.

On Friday, March 6, 2020, the first case of COVID-19 in Chatham County was confirmed in a press conference in Raleigh. Then-Chatham County Public Health Director Layton Long shared the news alongside N.C. Gov. Roy Cooper and Dr. Mandy Cohen, Secretary of the Department of Health and Human Services. At that time, there were just over 95,000 confirmed cases in the world of COVID-19.⁴⁴¹

As more residents tested positive, the CCPHD began sharing more information and guidance for the public on responding to the virus.

“Because of the infectiousness of the new coronavirus, we expect the number of cases to

continue to rise,” Long said in a news release. “I urge the public not to focus on specific confirmed case counts but rather, as a result of known community transmission occurring in NC, those things that we all can do collectively to slow the spread of the virus and protect ourselves and those at higher risk of serious illness: stay home and away from public places to the fullest extent possible, practice social distancing if you do have to go out, do not go out, if you are having symptoms call your doctor, and wash your hands and sanitize surfaces that may have come into contact with others before touching them.”⁴⁴²

Early Spread of COVID-19

Chatham County, along with the state and country, began to focus on prevention and treatment of COVID-19. Early work focused primarily on high-risk locations for spread and serious illness like meat-processing plants and long-term care homes.

Long highlighted the challenge that COVID-19 presented in a May 2020 statement: “As we have seen across the United States, containing the spread of COVID-19 is exceedingly difficult in the general population and is even more challenging in settings where people live or work in close quarters such as congregate living facilities and meat processing plants. The capacity of this virus to infect others far exceeds the usual flu virus that we experience each year and continues to spread in our communities despite the best efforts of local, state, and federal public health agencies, medical professionals, and countless organizations and agencies.”⁴⁴³

At the state level, officials made efforts to limit the spread. On March 14, 2020, eight days after the first reported case in Chatham County was announced, Gov. Cooper issued an executive order closing all K-12 public schools and banning gatherings of more than 100 people.⁴⁴⁴ The initial length of the order was two weeks,

but these measures were just the beginning. They included:

- March 17, 2020: Closure of sit-down services at bars and restaurants⁴⁴⁵
- March 23, 2020: Extension of school closure to May 15, lowers gathering ban to fifty people, closure of close-contact businesses like bowling alleys, gyms, and hair salons⁴⁴⁶
- March 27, 2020: Stay-at-home order for 30 days, lowering of gathering ban to ten people⁴⁴⁷

On March 25, 2020, the first North Carolinian died from COVID-19.⁴⁴⁸ Chatham County's first COVID-19 death was reported on April 14, 2020.⁴⁴⁹

Chatham Responds

In May, the county began collecting stories of “partnership, hope and inspiration” on the Chatham Together webpage. The page highlighted UNC medical students volunteering with the Chatham County Council on Aging to deliver food and medical supplies and the Chatham Health Alliance leading a drive to collect cloth face masks for grocery stores, childcare facilities, and those in need.⁴⁵⁰

When Chatham residents visited grocery stores in the early weeks of the pandemic, many things were missing, like toilet paper, hand sanitizer, and disinfectant wipes. A Chatham News + Record story highlighted a March 16 Facebook post from the Siler City Piggly Wiggly that said the store had received a truck of supplies and restocked shelves with “bananas, fresh chicken, ground beef, eggs, milk, potatoes, toilet paper and paper towels, etc.” As the story read, “Normally, you’d figure a shipment of supplies wouldn’t warrant a Facebook post with all caps and exclamation marks. But as been demonstrated time and time again, these aren’t ‘normal’ times.”⁴⁵¹

Many organizations stepped up to meet the need. When schools closed, Chatham County Schools began offering free meals for children

18 and under and paid meals for parents in need. Additionally, the district began planning for at-home learning for all students.⁴⁵² By early April, district teachers had set up some virtual class times for students, ranging from performing lab demonstrations from kitchen tables to using the screen recording software Screencastify to read stories to special education students.⁴⁵³

CORA Food Pantry, a nonprofit in Pittsboro that provides food to those in need, saw an uptick in their demand early on and began serving more than their normal number of recipients. In the week after the first announced case of COVID-19 in Chatham, and more folks started staying home, CORA served more than 1,800 people, more than twice their average.⁴⁵⁴ With the advent of the Zoom video call technology, the Chatham County Council on Aging began hosting virtual workout videos to replace cancelled in-person events. One video had nearly four hundred views just hours after it went public in late March.⁴⁵⁵

COVID-19 also presented new challenges and exacerbated some old ones. Local businesses suffered. Greg Lewis, at the time the owner of the Pittsboro Roadhouse, told the News + Record that he laid off 34 employees, lost almost all his catering business and most of his dine-in business. With dine-in service closed, many restaurants adapted to pick-up meals, but it still took a toll. “There’s absolutely nothing we can do about it,” Lewis said. “I don’t even know what to think about it. If you think about it too much, it makes you want to cry.”⁴⁵⁶ In mid-March, North Carolina added COVID-19 as an accepted reason for seeking unemployment benefits. Within a week, more than 140,000 claims were filed with the N.C. Division of Employment Security.⁴⁵⁷ Chatham’s well-documented internet connectivity issues were also apparent as children and adults alike were asked to work from home.⁴⁵⁸

Many Chatham County residents faced significant financial hardships due to the

pandemic, as reflected in a 2020 survey conducted by the CCPHD among Community Cohort participants:

- 12.1% said they lost their job, were furloughed, or had their work hours reduced.
- 7.9% said they lost their business or income.
- 6.6% said they filed for unemployment or financial benefits.
- 6.5% said they did not have enough money to make ends meet.
- 3.9% said they were unable to pay their rent, mortgage, or utility bills.

Additionally, 60.5% of Chatham adults said the county responded appropriately to the pandemic, with 15.8% saying “no” and nearly 1 in 5 (19.5%) saying they didn’t know.⁴⁵⁹

Cases

According to the NC Department of Health and Human Services COVID-19 dashboard, the first COVID-19 case was diagnosed on March 4, 2020, then announced two days later. Cases did not rise above five per day until April 10, when thirty-four cases were reported.

Chatham County’s case trends followed the state’s peaks and valleys. After a small peak in summer 2020, case numbers increased in the fall and winter up to January 12, 2021, when the county registered fifty-two cases reported. The slope went down again, with confirmed cases dropping to as low as two a day or even zero in the summer of 2021. However, the emergence of the Delta variant increased cases again, reaching fifty-two reported cases again by August 25, 2021. Once again, cases declined and then increased dramatically when the far more contagious Omicron variant became dominant in the winter of 2021-2022.

The Omicron variant spread more easily than the original SARS-CoV-2 virus and the Delta variant. It generally caused less severe illness but was more infectious. While it was not

confirmed how many of Chatham’s cases were due to Omicron, it quickly accounted for nearly all cases statewide. The emergency of Omicron was the likely reason a county record of 264 new was reported on January 10, 2022. Cases hit similarly highs twice more in January before declining again into March 2022.

Through April, 2022, Chatham County recorded 115 deaths from COVID-19. The county saw no more than three deaths reported on a single day at any time, and the deaths were spread out throughout the two years of the pandemic. A significant portion of the deaths took place before COVID-19 vaccines became available in the winter of 2020-2021, especially in long-term care facilities early in the pandemic.⁴³⁹

Nearly 1 in 5 Chatham County residents (17.9%) reported that at least one person in their household had tested positive for COVID-19 since the beginning of the pandemic. Additionally, 17.5% of county residents reported experiencing grief from losing a loved one.⁴⁵⁹

COVID-19 cases disproportionately affected populations that have been economically and socially marginalized. This was noted in the early months of the pandemic. Through September 18, 2020, 55% of Chatham County’s COVID-19 cases were among the Hispanic/Latinx population, even though only 12% of the county’s population was Hispanic/Latinx.⁴⁶⁰ Through April 1, 2022, 22% of COVID-19 cases in Chatham County had been in the Hispanic/Latinx population, nearly 10 percentage points higher than its share of the county population.⁴³⁹

FIGURE 56: COVID-19 CASES IN CHATHAM COUNTY, MARCH 2020 TO APRIL 2022⁴³⁹

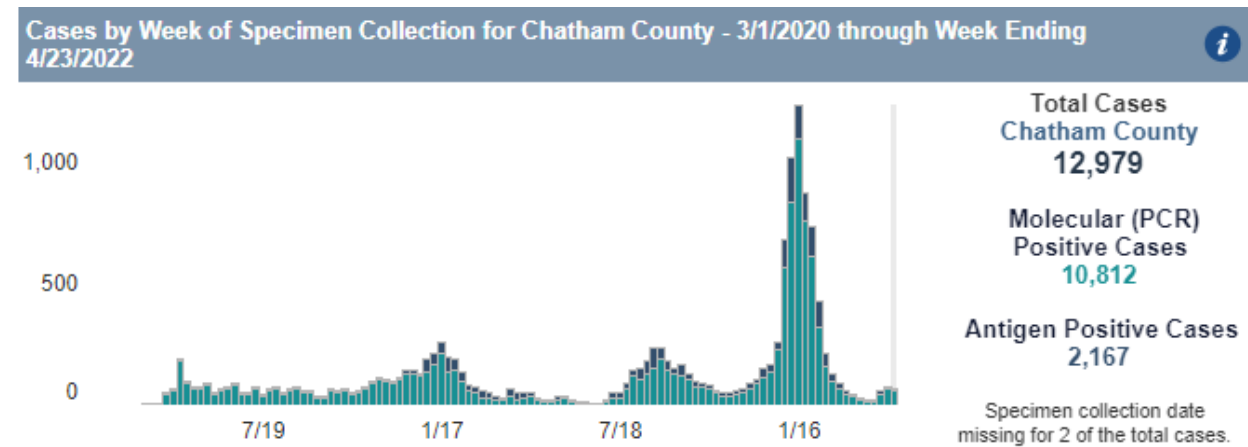


FIGURE 54: COVID-19 DEATHS IN CHATHAM COUNTY, MARCH 2020 TO APRIL 2022⁴³⁹

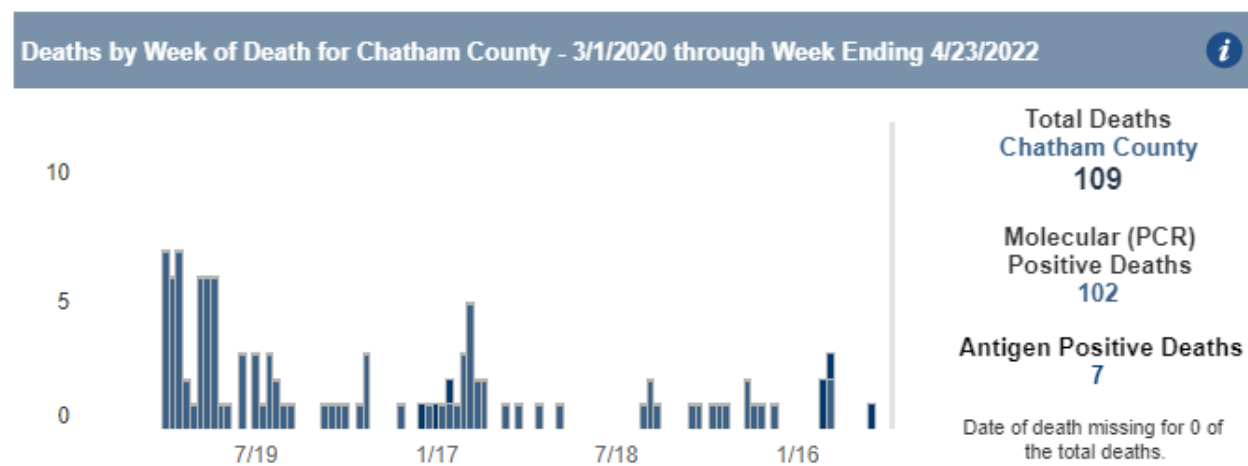
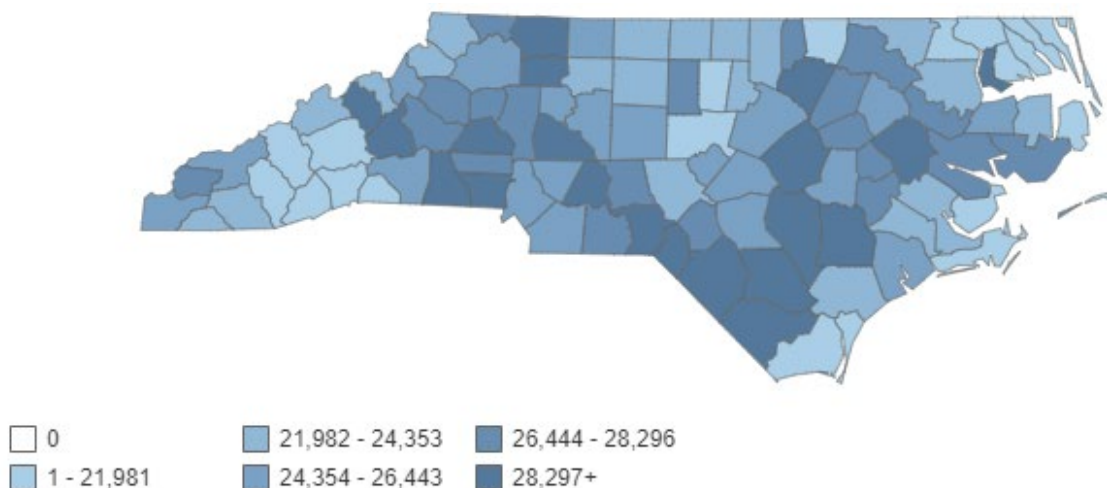


FIGURE 55: COVID-19 CASES PER 100,000 RESIDENTS BY COUNTY IN NORTH CAROLINA, MARCH 2020 TO APRIL 2022⁴³⁹



COVID-19 was the underlying cause for 13.3% of all deaths in the United States in 2021, rising from 10.4% in 2020, and was the third-leading cause of death in both 2020 and 2021 nationally. COVID-19 was the main cause of death in 415,399 cases and contributed to 45,114 more deaths in 2021, while serving as the main or underlying cause in 384,536 deaths nationwide in 2020. COVID-19 death rates increased from 2020 to 2021 in all age groups except those aged 85 years and older.

Black/African Americans and Hispanic/Latinx residents were more likely to die from COVID nationally in both 2020 and 2021 than White, non-Hispanic Americans. In fact, the COVID-19 mortality rate for White, non-Hispanic Americans increased from 2020 (74.1 deaths per 100,000 population) to 2021 (100.6 per 100,000), while the mortality rates for Black/African American residents (154.8 per 100,000 to 146.8 per 100,000) and Hispanic/Latinx residents (164.8 per 100,000 to 157.8 per 100,000) decreased slightly from year to year.⁴⁶¹

Vaccinations

Beginning in December 2020, three COVID-19 vaccines became available in the United States:

- Pfizer/BioNTech: This vaccine utilized relatively new mRNA technology. It was the first vaccine given Emergency Use Authorization by the US Food and Drug Administration (FDA) in December 2020 and fully approved by the FDA in August 2021. It was also the first vaccine authorized for people under 18 and later marketed as “Comirnaty.”
- Moderna: This vaccine used the same technology as the Pfizer/BioNTech vaccine. The FDA gave this vaccine an EUA in late December 2020 and fully approved it in January 2022. It was marketed as “Spikevax.”
- Johnson & Johnson (also known as Janssen): This vaccine used adenovirus technology and was given an EUA in February 2021.⁴⁶²

The first COVID-19 vaccine in Chatham County, outside of participants in the clinical trials, was given at 12:50 p.m. on Wednesday, December 16, 2020, to Dr. Jesus Ruiz, a family medicine and primary care specialist at Chatham Hospital in Siler City. Dr. Ruiz received the first of twenty-five doses given on that first day, kicking off a years-long campaign to get Chatham County vaccinated against COVID-19.⁴⁶³

The NC Department of Health and Human Services instituted prioritization guidance for who would be receiving a limited supply of vaccine. That guidance was updated multiple times, but the final groups were as follows:

- Group 1: Health care workers with in-person patient contact
- Group 2: All adults ages 65 and older
- Group 3a: Staff at PreK-12 schools and childcare facilities
- Group 3b: Frontline essential workers⁴⁶⁴
- Group 4a: Individuals ages 16-64 with medical conditions that put them at high risk for severe COVID-19 and individuals who are homeless, living in a homeless shelter or incarcerated in a prison/jail
- Group 4b: Any remaining essential workers not covered by previous phases⁴⁶⁵
- Group 5: Any adult not already eligible for a vaccine⁴⁶⁶

The CCPHD and Chatham Hospital received the first batch of vaccines in Chatham County in early 2021. The CCPHD gave its first vaccinations to the general public during a mass vaccination clinic on January 18, 2021 at the Chatham County Agriculture and Conference Center in Pittsboro, administering 400 first doses of the Moderna COVID-19 vaccine to adults 75 and older and health care professionals who did in-person work with patients.⁴⁶⁷ Vaccination efforts continued at mass clinics through January and February and into early March, when the CCPHD turned mass vaccination efforts over to StarMed Healthcare, a Charlotte-based local healthcare provider

that conducted community-based vaccination efforts across the state. StarMed’s first vaccination event took place in Pittsboro on March 12, 2021.⁴⁶⁸

This shift allowed the CCPHD to focus more on mobile vaccination efforts, with a particular focus on marginalized populations and ensuring equitable access to vaccination. The department held its first on-site vaccination event on February 5, 2021, when 210 people were vaccinated at Roberts Chapel Missionary Baptist Church in Goldston at a drive-thru event.⁴⁶⁹ More mobile events happened throughout 2021 at churches, businesses, and neighborhoods across the county.

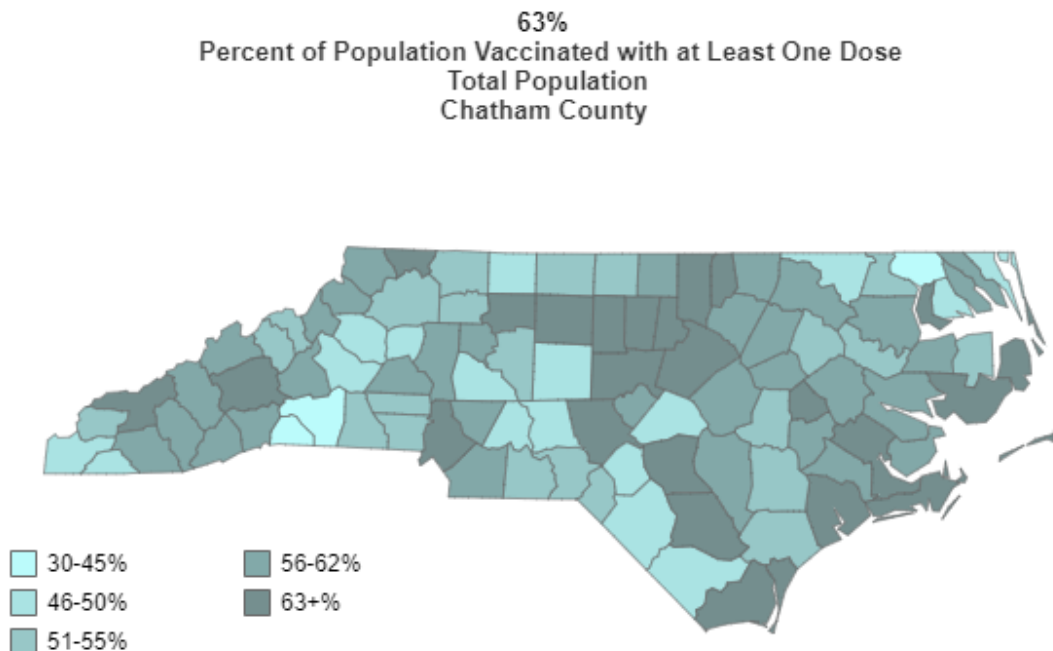
The extremely limited supply of vaccine in the early months was a barrier to large-scale vaccination. As more supply became available, more locations began holding vaccine appointments throughout the county. StarMed added a weekly vaccination event in Goldston to increase access. The CCPHD worked with many local vaccine providers to get them their

first doses of vaccine to increase options and access across the county.

Through nearly four months of vaccination, more than 41% of county residents had received at least one dose of the COVID-19 vaccine.⁴⁷⁰ Appointments and doses were in high demand; however, that demand quickly plateaued. After reaching 40% in April, the percentage of the population with at least one dose crossed 50% around three months later, despite access increasing and more people becoming eligible.⁴⁷¹

The benefits of safe and effective COVID-19 vaccines were seen almost immediately. According to NCDHHS, 99% of COVID-19 cases and 99% of COVID-19 deaths from May 6-June 28, 2021, before the rise of the Delta variant, in North Carolina were in persons not fully vaccinated.⁴⁷² NCDHHS said in late December 2021 that more than 90% of people who died with COVID-19 in 2021 were not fully vaccinated.⁴⁷³

FIGURE 57: PERCENT OF TOTAL POPULATION VACCINATED WITH AT LEAST ONE DOSE BY COUNTY IN NORTH CAROLINA, MAY 1, 2022⁴⁷⁵



In September 2021, the U.S. Centers for Disease Control and Prevention (CDC) recommended that certain groups get booster doses of the Pfizer vaccine if they had received their second dose at least six months prior.⁴⁷⁴ The eligibility and booster options available expanded over the following months. Booster doses were shown to increase immune response against COVID-19.

As of May 1, 2022, 63% of the total Chatham County population was vaccinated with at least one dose, including 67% of the eligible population (age 5 and older). Nearly 60% of the county's total population was fully vaccinated with either two doses of Moderna or Pfizer, or one dose of J&J and 38% of the county's population had received at least one booster shot as of that date.⁴⁷⁵

Equity

The distribution of cases and impacts from COVID-19 were inequitable in Chatham County, as was apparent early in the pandemic. On June 8th, 2020, the CCPHD released the first data set that showed how Chatham County's Hispanic/Latinx population had been disproportionately affected by COVID-19. Hispanic/Latinx residents made up 12% of Chatham County's population, but 34% of confirmed cases up to that point. By September 18, 2020, 55% of COVID-19 cases in Chatham were among the Hispanic/Latinx population. This was also reflected in state data: North Carolina's population was 10% Hispanic/Latinx, but that group made up 39% of confirmed cases.⁴⁷⁶ According to data from the CDC in February 2022, Hispanic/Latinx persons in the United States were 1.5 times as likely to be infected with, 2.4 times as likely to be hospitalized with and 1.9 times as likely to die from COVID-19 than White, non-Hispanic/Latinx Americans.⁴⁷⁷

"We remain concerned about the impact COVID-19 is having in Chatham County, and especially among the Latinx population and in

long-term care facilities," then-Interim Public Health Director Mike Zelek said in a June 2020 news release.⁴⁷⁸

These disparities were driven by several structural and societal factors, including increased risk of exposure from employment and unequal access to health care disproportionately impacting people of color. Dr. LaQuandra Nesbitt of the District of Columbia Department of Health summarized: "As states implemented stay-at-home orders in response to the rapid acceleration phase of the pandemic, in communities across the United States, racial and ethnic minorities were overrepresented in the critical infrastructure workforce such as food retail/grocery, public transportation, and allied health professions and unlicensed/uncredentialed health care workers. The disproportionate representation of racial and ethnic minorities in these employment categories, largely a function of access to educational opportunities, increased their risk of exposure to SARS-CoV-2, thus leading to higher COVID-19 incidence and disparities."⁴⁷⁹

Economic Impacts

The disproportionate effect of the COVID-19 pandemic on the Hispanic/Latinx population did not stop at cases. The Pew Research Center found in May 2020 that 59% of Hispanic/Latinx residents nationwide "said they live in households that have experienced job losses or pay cuts due to the coronavirus outbreak, with a far lower share of U.S. adults (43%) saying the same."⁴⁸⁰ Additionally, according to an October 2020 report, around two-thirds of employed Hispanic/Latinx parents with children younger than 12 (67%) said they had trouble handling child care responsibilities, compared to around half of all U.S. working parents with children younger than 12 (52%).⁴⁸¹

These data points are emblematic of long-lasting inequities in health and well-being among populations that have been

economically and socially marginalized. The CDC cited five overall factors driving these inequities:

- Discrimination in systems designed to improve health and well-being.
- Barriers to accessing health care, including well-earned mistrust of medical systems and cultural differences between patients and providers.
- Predominance of Hispanic/Latinx residents working in essential worker settings like healthcare, factories and grocery stores that stayed open and operating throughout the pandemic.
- Gaps in access to high-quality education, which usually leads to lower-paying jobs, which means missing work is not an option.
- A higher percentage of the Hispanic/Latinx population lives in crowded conditions, leading to more spread of the virus.⁴⁸²

Vaccination

The racial and ethnic disparities continued into COVID-19 vaccination efforts. Four months after the first COVID-19 vaccine was made available, just less than a quarter of Chatham County's Hispanic/Latinx population had received at least one dose compared to just more than 42% of the county's overall population, as of April 19, 2021. Part of that inequity was due to who was eligible when vaccinations were made available, but as more age groups and professions were made eligible, the disparity continued.

Community leaders shared a few reasons why this could be the case:

- Lack of access to information due to technology shortfalls. "What (the disparity) confirms for us is the systemic challenge that our community faces – mainly technology driven," said Will Mendoza, COVID-19 Project Manager for The Hispanic Liaison.
- Lack of information in Spanish. "There's still some lack of information to the community in Spanish about the vaccines

and how to make appointments," said Ilana Dubester, executive director of The Hispanic Liaison.⁴⁸³

- A spread of misinformation through social media and word of mouth. "That has created fear and reservation in many people's minds," said Father Julio Martinez, pastor of St. Julia Catholic Church in Siler City.⁴⁸⁴

However, the disparity slowly declined thanks to the work of many. By December 2021, Chatham's Hispanic/Latinx population had a similar vaccination rate as the non-Hispanic/Latinx population. This increase was attributable to local leaders and community partnerships; for example, The Hispanic Liaison hosted a COVID-19 Health Fair in September 2021 where more than 200 people received their first dose, with a follow-up clinic for second doses the next month. The organization also placed a significant focus on education, hosting multiple Facebook Live events and providing information in English and Spanish for community members. "We got really lucky to find good partnerships and sort of got on a roll," Mendoza told the News + Record. "We had enough demand from people in the community, so we sort of got busy real fast."⁴⁸⁵

Other Equity Issues

Throughout the first year of the pandemic, before the availability of vaccines, equity was a driving force in much of Chatham County's response to the virus. Food pantries stepped up to reach families who needed meals due to job loss or financial hardship by participating in resource hubs throughout the county where boxes of food could be picked up, intentionally locating those hubs in predominately Spanish-speaking neighborhoods in 2021.⁴⁸⁶ Chatham County Schools distributed nearly 2,000 laptops to elementary and middle school students who didn't have a home computer.⁴⁸⁷ The North Carolina National Guard partnered with NC DHHS, Piedmont Health Services, the CCPHD, and others to host a special COVID-19

testing event at Mountaire Farms in Siler City in April 2020 once positive case numbers were identified at the facility.⁴⁸⁸

When vaccination rolled around, equity was again a driving force, both at the state and county level. In a December 2020 press release, the CCPHD outlined its first plan for COVID-19 vaccine distribution. Following state guidance, the first vaccines in Chatham County were given to those most at-risk: healthcare workers, long-term care facility staff and adults aged 65 and older. CCPHD also made efforts to increase outreach to communities that have been economically and socially marginalized and ensure vaccination appointments were kept available to those at increased risk of infection and disease impact, including the elderly, people of color, and homebound individuals. This included geographic analysis of vaccination rates used to identify areas of county in which to locate informational mailers and public signage and conduct direct outreach phone calls.

In January 2021, Gov. Roy Cooper and other state officials visited Piedmont Health SeniorCare center in Pittsboro to see Chatham County residents and others get their first doses of the COVID-19 vaccine. The facility focuses on providing care to underserved seniors in Chatham County and other counties in the region. In a press release, Dr. Mandy Cohen, Secretary of the NC Department of Health and Human Services, highlighted the role community health centers like Piedmont Health play: "Community health centers are the lifeline to health care for thousands of rural and underserved communities. They've been frontline partners in providing testing throughout the pandemic and are an important part of the state's strategy to ensure marginalized residents have access to COVID-19 vaccines."⁴⁸⁹

Community Outreach

Community outreach for COVID-19 took three different approaches: digital and internet resources, distribution of physical resources, and in-person activities and events.

Digital Outreach

Throughout the pandemic, the internet proved to be a useful tool for Chatham County agencies to provide information directly to the public when in-person meetings and gatherings were discouraged.

The Chatham County Public Health Department and the entire county government moved quickly to establish webpages in English and Spanish with information about the coronavirus and county operations, addressing frequently asked questions for the public, businesses, and childcare providers.

In partnership with several economic development organizations in the area and the CCPHD, the Chatham County Economic Development created "Reopening Your Business: A Guide to Safely Reopening and Operating Your Business" in July 2020. This document outlined best practices for businesses in several areas, like face coverings, cleaning, personal protective equipment, and maintaining a healthy work environment. A website was also created, reopeninghelp.com, to serve as a digital hub for the information.⁴⁹⁰

Teleconferencing was a growing part of the business landscape prior to COVID-19, but with many people staying home and businesses operating remotely, programs like Zoom and GoToMeeting rose in use. That allowed for organizations and agencies to utilize these technologies to continue serving people and provide information and resources.

- The Hispanic Liaison hosted multiple Facebook Live events, utilizing Zoom, to share information about the COVID-19 vaccine with county residents in Spanish. An event on February 20, 2021, featured

representatives from the CCPHD, UNC Health, and Piedmont Health Services.⁴⁹¹

- The CCPHD held an “Ask the Doctor” session about the COVID-19 vaccine for children on November 5, 2021, on Facebook Live with Dr. Michaela McCuddy, the department’s medical director. Dr. McCuddy answered questions submitted by the community in both English and Spanish.⁴⁹²
- CCPHD staff held regular Zoom meetings with childcare providers, food service operators, and long-term care facilities throughout the pandemic to provide weekly guidance and answer questions related to COVID-19.

Physical Outreach

Given that not everyone has access to the internet, strategies beyond websites and virtual platforms were critical to reaching the Chatham community. Furthermore, some important resources and supplies needed to be distributed by hand.

Early in the pandemic, personal protective equipment like face masks were in short supply and reserved primarily for health care workers. In late spring 2020, the Chatham Health Alliance began the Masks for Chatham initiative, encouraging people to donate protective items to frontline health care workers and vulnerable populations. This included homemade masks alongside other cleaning and sanitation supplies. This was one of multiple homemade mask drives that occurred in Chatham throughout the pandemic.

Nearly two years later, in early 2022, masks were once again the subject of community distribution. In early February, the CCPHD received a shipment of over 200,000 N95 respirators for the public. Many were distributed through the three branches of the Chatham County Public Libraries, while

thousands were also set aside for community nonprofits, churches, and businesses.⁴⁹³

The pandemic also brought on a demand for COVID-19 information in physical form. The CCPHD and other organizations created physical versions of flyers, banners, postcards, and packets that featured information about the virus, the COVID-19 vaccine, and locations for COVID-19 testing and vaccination.

Resource Hubs

A consistent form of community outreach throughout the pandemic was the Chatham Health Alliance’s Resource Hubs.

The Chatham Health Alliance (CHA) developed the event template in collaboration with partner agencies like CORA Food Pantry to provide free resources to those in need across the county. The hubs started as monthly events in Siler City where CORA would give boxes of food, while the Alliance and its member organizations gave out masks, medication lock boxes, medication disposal kits, and information about the preventing the spread of COVID-19, and other local agency resources. Throughout the pandemic, offerings extended to other sites in the county like churches and businesses.

In early 2021, the Hubs became a place where Chatham residents could get information on and sign up for the COVID-19 vaccine. Additionally, the Inter-Faith Food Shuttle, a Raleigh-based nonprofit, began participating and giving out hot meals to attendees. At the first event with the Food Shuttle, volunteers gave out 127 free hot meals over two hours. Future hubs also included vaccinations on-site.

This was public health in action, as CHA Executive Director Julie Wilkerson explained to the Chatham News + Record in April 2021: “When we were talking through what sort of things we thought the community needed, we were hearing that community agencies were

having a hard time getting their resources out safely. So that's where we came up with the idea to drive-thru events and to make these hubs mobile. We're actually going out into the community where the community lives."⁴⁸⁶

Appendices

Appendix A: 2021 Chatham County Community Survey (English)



2021 Chatham County Community Survey

To complete the survey online, visit
www.chathamhealthalliancenc.org/survey

To complete the survey by phone, call 919-704-4421

Para completar la encuesta en línea, visite
www.chathamhealthalliancenc.org/encuesta

SECTION 1: HOUSEHOLD

This first section of questions will focus on your household. All the opinions you share with us will be completely confidential and will be reported as a group summary. You may decline to answer any question by selecting "Prefer not to say".

1. How many people in each age group are currently in your household (including yourself)?

| | |
|-------------|--|
| 0-4 YEARS | |
| 5-14 YEARS | |
| 15-19 YEARS | |
| 20-29 YEARS | |
| 30-39 YEARS | |
| 40-49 YEARS | |
| 50-59 YEARS | |
| 60-69 YEARS | |
| 70-79 YEARS | |
| 80+ YEARS | |

Prefer not to say

Appendix A: 2021 Chatham County Community Survey (English)

2. Are you currently caring for – (select all that apply)?

- Elderly or disabled parent
- Elderly or disabled grandparent
- Elderly or disabled spouse/partner
- Child(ren) under 5 years
- Disabled child(ren)
- Foster child(ren)
- Family member with chronic illness
- I am not caring for anyone who fits these descriptions → Skip to Q3
- Prefer not to say → Skip to Q3

2a. If yes, do you provide any of the following types of care? (Select all that apply.)

- Medical care
- Financial management
- Daily care (e.g. feeding, bathing, toileting, grooming, etc.)
- Household assistance (e.g. grocery shopping, transportation to appointments, etc.)
- Other: _____
- None of the above
- Prefer not to say

3. Are you worried or concerned that in the next two months you may NOT have stable housing that you own, rent, or stay in as part of a household?

- Yes
- No
- Don't know
- Prefer not to say

4. How would you rate the condition of your housing?

- Good
- Fair
- Poor
- Prefer not to say

5. How do you usually get around to go to work, school, grocery shopping, etc.? (Select all that apply.)

- Walk
- Bicycle
- Motorcycle or moped
- Car or truck
- Public transportation
- I get rides from family or friends
- Other: _____
- Prefer not to say

Appendix A: 2021 Chatham County Community Survey (English)

6. Have you experienced any of the following issues with transportation in the past 12 months? (Select all that apply.)

- No sidewalks where I needed to walk
- Couldn't afford to buy a vehicle
- Couldn't afford gas
- Couldn't afford necessary repairs
- Couldn't get to repair shop
- Public transportation routes aren't convenient for me
- Public transportation hours of operation aren't convenient for me
- Public transportation takes too long
- Public transportation is too expensive
- I don't know how to use public transportation (i.e., bus routes, buying tickets, etc.)
- Other: _____
- Prefer not to say

7. Do you use your tap water for drinking and cooking?

- Yes, drinking
- Yes, cooking
- Yes, both
- No
- Prefer not to say

8.

| | Yes | No | Not sure | Prefer not to say |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| A. I know what emergencies or disasters are most likely to occur in my community. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. My family has a personal disaster plan and we have practiced it. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. I have an emergency preparedness kit with supplies for 72 hours. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D. I regularly check my smoke and CO2 detectors. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. I have emergency response related apps downloaded on my phone (e.g., Red Cross, Weather, ReadyNC, etc.). | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F. I am signed up to receive emergency alerts (social media, text, email). | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Appendix A: 2021 Chatham County Community Survey (English)

9. Are you concerned about any of the following issues related to a disaster or emergency? (Select all that apply.)

- Roads blocked or flooded
- Damage to home or property
- Losing power
- Losing home heating or cooling
- Difficulty accessing medical care
- Difficulty accessing safety information or updates
- Other: _____
- None of the above
- Prefer not to say

10. Do you feel comfortable accessing information and resources on the internet?

- Yes
- No
- Prefer not to say

11. Do you have regular access to reliable internet?

- Yes
- No
- Prefer not to say

12. Of the following, where do you get news or information about Chatham County? (Select all that apply.)

- Chatham Chatlist
- Chatham County Line
- Chatham Magazine
- Chatham News + Record
- WNCA
- Surrounding area news stations (WRAL, ABC11, CBS17, etc.)
- 2-1-1
- Que Pasa
- Nextdoor social network
- Chatham County news alerts (eNotifications)
- Chatham County CodeRED
- Social Media
- Other: _____
- None of the above
- Prefer not to say

13. Which of the following social media platforms do you use? (Select all that apply.)

- Facebook
- Instagram
- Twitter
- YouTube
- Snapchat
- WhatsApp
- Reddit
- TikTok
- Other: _____
- I don't use social media
- Prefer not to say

SECTION 2: HEALTH

This next section of questions will focus on your health.

14. Would you say that, in general, your health is...?

- Excellent
- Very Good
- Good
- Fair
- Poor
- Prefer not to say

15. How often does poor physical health keep you from doing your usual activities, such as work or spending time with family and friends?

- Often
- Sometimes
- Rarely
- Never
- Prefer not to say

16. Have you ever been told by a doctor, nurse, or other health professional that you have any of the listed health conditions?

| | Yes | No | Don't know | Prefer not to say |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| A. Arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Asthma | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Any kind of cardiovascular or heart disease (not high blood pressure) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D. Cancer | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. Depression or anxiety | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F. Diabetes (not during pregnancy) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G. High blood pressure (not during pregnancy) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| H. High cholesterol | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I. Lung disease | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| J. Tickborne illness | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K. Overweight/obesity | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

17. Does anyone in your household, including yourself, need support to be independent in daily activities because of a - (select all that apply). *Daily activities include feeding, toileting, selecting proper attire, grooming, maintaining continence, putting on clothes, bathing, walking, and transferring (such as moving from bed to wheelchair).*

- Physical disability
- Intellectual or developmental disability
- Difficulty seeing or hearing
- Mental illness
- Substance abuse or dependence
- Medical conditions
- Dementia or Alzheimer's
- None of the above → Skip to Q18
- Prefer not to say → Skip to Q18

17a. If yes, do you have regular access to the support you need?

- Yes
- No
- Prefer not to say

18. In the past year, did you or someone in your household find a tick on their body?

- Yes
- No → Skip to Q19
- Don't know → Skip to Q19
- Prefer not to say → Skip to Q19

18a. If yes, did you seek any health care or advice?

- Yes
- No
- Prefer not to say

19. During the past 12 months, was there any time that you did not have health insurance or coverage?

- Yes
- No → Skip to Q20
- Don't know → Skip to Q20
- Prefer not to say → Skip to Q20

19a. If you did not have coverage for any period of time, what was the reason?

- Lost job
- Switched jobs
- Too expensive
- Didn't need health insurance
- Didn't know how to get health insurance
- Other: _____
- Prefer not to say

20. Is there a health provider that you usually visit when you are sick or need advice about your health?

- Yes → Go to Q20a
- No → Skip to Q20b
- Prefer not to say → Skip to Q21

20a. About how long does it take you to travel to this health provider?

_____ minutes

- Prefer not to say
➔ Skip to Q21

Appendix A: 2021 Chatham County Community Survey (English)

20b. If no, what is the reason you do not have a regular health provider? (Select all that apply.)

- I don't have health insurance
- Health insurance not taken by preferred provider
- Copays/deductibles are too high
- No options close enough to me
- I don't have time
- Bad experience with health care in the past
- I am never sick
- I go to urgent care or the emergency room if I am sick
- Other: _____
- Prefer not to say

21. About how long has it been since you last visited a doctor for a routine checkup? Do not include times you visited the doctor because you were sick, injured, or pregnant, or emergency room visits.

- Less than one year
- 1-2 years
- 3-5 years
- More than 5 years
- I have never been to the doctor for a routine checkup
- Don't know
- Prefer not to say

22. About how long has it been since you last visited a dentist for a routine checkup or cleaning? Do not include times you visited the dentist because of pain or an emergency.

- Less than one year
- 1-2 years
- 3-5 years
- More than 5 years
- I have never been to the dentist for a routine checkup
- Don't know
- Prefer not to say

23. In the past 12 months, have any of the following prevented you or someone in your household from getting the health care (e.g. doctor visit, dental care, eye care, surgery or medical procedure, prescribed medicines, etc.) you needed? (Select all that apply.)

- Could not get through on the telephone
- Could not get an appointment soon enough
- Once getting there, the wait to receive care was too long
- The office was not open convenient days/hours
- Did not have transportation
- It was too expensive
- Did not have health insurance
- Available doctors were not in the insurance network
- The needed service or medication was not covered by insurance
- There was no one who spoke my preferred language and no interpreter available
- Felt ignored, not taken seriously, or disrespected
- Did not know where to go
- Other: Please specify: _____
- I have not experienced any of these issues → skip to Q24
- Prefer not to say → skip to Q24

23a. If yes, which of the following health care providers or facilities did you have trouble accessing? (Select all that apply.)

- Dentist
- General practitioner/Primary care doctor
- Eye care/optometrist/ophthalmologist
- Pharmacy/prescriptions
- Pediatrician
- OB/GYN
- Hospital
- Urgent care center
- Specialist: Please specify: _____
- Nobody in my household had trouble accessing health care providers or facilities
- Prefer not to say

24. Do you seek alternative health care or home remedies?

- Yes
- No → Skip to Q25
- Don't know → Skip to Q25
- Prefer not to say → Skip to Q25

24a. If yes, please describe: _____

- Prefer not to say

SECTION 3: MENTAL HEALTH

This next section of questions will focus on your mental health.

25. In general, would you say that your mental health is:

- Excellent
- Very good
- Good
- Fair
- Poor
- Prefer not to say

26. How often do feelings of anxiety or depression keep you from doing your usual activities, such as work or spending time with family and friends?

- Often
- Sometimes
- Rarely
- Never
- Prefer not to say

27. How often do you feel isolated or lonely?

- Often
- Sometimes
- Rarely
- Never
- Prefer not to say

28. How would you describe your day-to-day level of stress?

- High
- Moderate
- Low
- Prefer not to say

Appendix A: 2021 Chatham County Community Survey (English)

29. What are the primary causes of stress that you experience? (Select all that apply.)

- Money
- Work or school
- Personal health concerns
- Children/childcare
- Caretaking
- Relationships (e.g., spouse, kids, girl/boyfriend)
- Health problems affecting my family
- Housing costs (e.g., mortgage or rent)
- Social issues (politics, the economy, etc.)
- Job stability
- Personal safety
- Discrimination
- Other, please specify: _____
- Prefer not to say

30. While living in Chatham County, have you or a member of your household sought help for any of the following? (Select all that apply.):

- Mental health → Go to Q30a
 - **30a. If yes, were these services (Select all that apply.):**
 - Available?
 - Easy to find?
 - High quality?
 - Affordable?
 - None of the above
 - Prefer not to say

- Abuse (including physical, verbal, emotional/psychological, or sexual abuse) → Go to Q30b
 - **30b. If yes, were these services (Select all that apply.):**
 - Available?
 - Easy to find?
 - High quality?
 - Affordable?
 - None of the above
 - Prefer not to say

- None of the above
- Prefer not to say

SECTION 4: HEALTHY EATING/PHYSICAL ACTIVITY

This next section of questions will focus on eating and exercise.

31. About how many servings of fruits and vegetables do you eat each day? *One small apple, one banana, or one half cup of broccoli are all examples of a serving.*

- None
- 1-2 servings
- 3-4 servings
- 5-6 servings
- 7 or more servings
- Don't know
- Prefer not to say

32. When you do not eat healthy snacks and meals, what is the main reason? (Select all that apply.)

- Cost
- Taste
- Convenience
- Not enough time to shop or prepare foods
- Don't know what is healthy or not
- Distance to store
- No transportation to the store
- Store doesn't have good options
- Other: _____
- I always eat healthy snacks and meals
- Prefer not to say

33. Within the past twelve months, did you ever worry that you would run out of food before you had money to buy more?

- Yes
- No
- Prefer not to say

34. How much time do you spend doing physical activity or exercise (such as running or walking, exercise classes, sports, golf, or gardening) in a typical day?

_____ hours _____ minutes

- Prefer not to say

35. In the past month, were there any times when you didn't engage in physical activity for any of the following reasons? (Select all that apply.)

- I didn't have time
- It is too expensive (i.e., costs such as gym fees, equipment, exercise clothes)
- I am not familiar with different exercises
- I didn't have a place to exercise
- There is no safe place to exercise
- I didn't have childcare
- I have no one to exercise with
- I was too tired to exercise
- My job involves physical labor
- I didn't know where to find activities I am interested in, such as classes or sports teams
- I didn't like to exercise
- I'm physically disabled
- I had an injury
- Other: _____
- None of the above
- Prefer not to say

SECTION 5: SUBSTANCE USE

The next section of questions will focus on substance use.

36. Do you use any of the following tobacco products? (Select all that apply.)

- Cigarettes
- Vape/Electronic cigarettes (e-cigarettes) (JUUL, Stig, Puff Bars, Blue, etc.)
- Smokeless tobacco (chew, dip, snuff, snus)
- Cigars
- Pipes
- Hookah
- I don't use any tobacco products → Skip to Q37
- Prefer not to say → Skip to Q37

36a. If yes, what resources or support would be helpful to you if you were interested in quitting tobacco products? (Select all that apply.)

- Personalized quit plan
- Medical provider
- Nicotine replacement (patches, gum, or lozenges)
- Medication
- Support group of others trying to quit using tobacco
- Hotline for questions/support
- App or other way to track progress
- Text message service
- Other, please specify: _____
- None of the above
- Prefer not to say

Appendix A: 2021 Chatham County Community Survey (English)

**37. Are you regularly exposed to secondhand smoke in any of these locations in Chatham County?
(Select all that apply.)**

- I am not regularly exposed to secondhand smoke in Chatham County
- Home or car
- Workplace
- Parks
- Restaurants or bars
- School
- Sidewalks
- Hospital
- Other: Please Specify: _____
- Prefer not to say

38. How often does drinking alcohol negatively affect your usual activities, such as work or spending time with family and friends?

- Often
- Sometimes
- Rarely
- Never
- Prefer not to say

39. In the past 12 months, have you or a member of your household intentionally misused any form of prescription drugs (e.g. used without a prescription, used more than prescribed, used more often than prescribed, or used for any reason other than a doctor's instructions)?

- Yes
- No → Skip to Q40
- Don't know → Skip to Q40
- Prefer not to say → Skip to Q40

39a. If yes, were any of these prescription drugs for pain, such as codeine, Vicodin, Percocet, morphine, oxycodone, Tramadol, fentanyl, hydrocodone, or OxyContin?

- Yes
- No
- Don't know
- Prefer not to say

Appendix A: 2021 Chatham County Community Survey (English)

**40. Have you or a member of your household used any of these substances in the past 12 months?
(Select all that apply.)**

- Methamphetamines
- Cocaine or crack
- Heroin
- Ecstasy
- Other: _____
- Unknown drug(s)
- Don't know
- None of the above
- Prefer not to say

41. While living in Chatham County, have you or a member of your household sought help for any of the following? (Select all that apply.):

- Alcohol use → Go to Q41a
 - **41a. If yes, were these services (Select all that apply.):**
 - Available?
 - Easy to find?
 - High quality?
 - Affordable?
 - None of the above
 - Prefer not to say
- Drug use → Go to Q41b
 - **41b. If yes, were these services (Select all that apply.):**
 - Available?
 - Easy to find?
 - High quality?
 - Affordable?
 - None of the above
 - Prefer not to say
- Tobacco use --> Go to Q41c
 - **41c. If yes, were these services (Select all that apply.):**
 - Available?
 - Easy to find?
 - High quality?
 - Affordable?
 - None of the above
 - Prefer not to say
- None of the above
- Prefer not to say

SECTION 6: COMMUNITY

The following questions focus on aspects of your community.

42. Please tell us whether you “strongly agree”, “agree”, “disagree” or “strongly disagree” with each of the next few statements thinking specifically about your community as you see it.

| | STRONGLY AGREE | AGREE | NEUTRAL | DISAGREE | STRONGLY DISAGREE | PREFER NOT TO SAY |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| A. I feel connected to others in my community. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Chatham County is a good place to raise children. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Chatham County is a good place to grow old. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D. There are high quality K-12 schools where I live. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. Chatham County has good economic opportunities for me. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F. I am able to afford housing in an area of Chatham County where I want to live. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G. I feel Chatham County’s environment is healthy (air, water, etc.). | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| H. I feel safe where I live. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I. I can access resources in my preferred language. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| J. I feel represented in decisions made by Chatham County government. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K. I have experienced racial tension in Chatham County. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

43. Have you experienced discrimination, bias, or prejudice in any of the following settings in Chatham County? (i.e. have you felt like you have been treated differently because of your identity or who you are?) (Select all that apply.)

- Health Care
- Employment
- Housing
- Education
- Stores, restaurants, etc.
- Law enforcement or justice system
- Other: _____
- I have not experienced discrimination, bias or prejudice in Chatham County
- Prefer not to say

Appendix A: 2021 Chatham County Community Survey (English)

44. Are you a member of any of the following community organizations? (Select all that apply.)

- Faith-based organization
- Community or volunteer group
- Professional organization
- Civic organization
- Hobby group or club
- Other: _____
- None of the above
- Prefer not to say

45. Why did you choose the childcare you use? (Select all that apply.)

- I don't use childcare
- Convenient location
- Affordable
- High quality
- Don't know
- Prefer not to say

46. Which of the following would you like Chatham County to focus on in order to improve health and quality of life in the community? (Choose three.) If there is something you would like to include that is not listed, please add it below.

Healthcare

- More healthcare options
- More affordable healthcare
- More affordable health coverage/insurance
- Better quality healthcare
- Culturally specific health services (for example, Spanish language services)
- Health providers serve Medicaid/care
- Access to good health information

Infrastructure/Environment

- Transportation options
- Disaster/extreme weather preparedness
- Sidewalks/bike lanes
- Water quality
- Internet access

Housing and social services

- Affordable housing
- Rental assistance programs
- Protection for renters
- Disability services
- Healthy aging/aging in place

Appendix A: 2021 Chatham County Community Survey (English)

Childcare/Education

- More childcare options
- More affordable childcare
- Support for children with intellectual and developmental disabilities
- Child development (physical and social/emotional supports)

Food

- Affordable healthy food
- More places to buy groceries
- Household food security (food pantries, Meals on Wheels, SNAP, WIC)

Employment

- More employment opportunities
- Higher paying employment
- Career counseling

Mental Health and Substance Use

- Mental health care
- Substance use support/treatment (drugs, alcohol, etc.)

Recreation and culture

- Parks and recreation
- Arts and cultural events
- Healthy family activities
- Activities for teenagers
- Youth leadership opportunities

Community

- Equity and elimination of health disparities
- Safe neighborhoods
- Social connection opportunities
- Civic engagement opportunities

Other

- Other: _____
- Other: _____
- Other: _____

- Prefer not to say

SECTION 7: COVID-19

This section of questions will focus on the COVID-19 (also known as coronavirus) pandemic and how it has impacted you and your household.

47. Has anyone in your household tested positive for COVID-19 since the beginning of the pandemic?

- Yes, one person
- Yes, more than one person
- No
- Prefer not to say

48. Did you experience any of the following as a result of the COVID-19 pandemic? (Select all that apply.)

- I lost my job, was furloughed, or had my work hours reduced
- I lost business or income
- I lost my health insurance
- I was not able to access health care services
- I filed for unemployment or financial benefits
- I have been unable to pay my rent, mortgage, or utility bills
- I have not had enough money to make ends meet
- I have exercised less than usual
- I have drunk or used drugs more than usual
- I have felt more stress or anxiety
- I have worried about my own health
- I have worried about the health of family or friends
- I have experienced grief from losing a loved one
- I have sought help or support but was unable to get it (Please describe: _____)
- Other: _____
- None of the above
- Prefer not to say

49. Would you like to get a COVID-19 vaccine?

- I already got a vaccine → Skip to Q50
- I am planning to get a vaccine → Skip to Q50
- I am not interested in getting a COVID -19 vaccine right now
- Prefer not to say → Skip to Q50

49a. If no, what is the main reason why you are not interested in getting a vaccine?

-
- Prefer not to say

Appendix A: 2021 Chatham County Community Survey (English)

50. Do you feel the county responded appropriately to the COVID-19 pandemic?

- Yes → Skip to Q51
- No
- Don't know → Skip to Q51
- Prefer not to say → Skip to Q51

50a. If no, what do you think could have been done better?

- Prefer not to say

SECTION 8: DEMOGRAPHICS

We're almost finished! We just need to know a little more about who you are. Just to remind you, all the information you give us will be completely confidential. It will be reported only as a group summary.

51. What is your age? _____ Years

- Prefer not to say

52. Which of the following best describes your race, ethnicity, or origin? (Select all that apply.)

- Asian
- Native Hawaiian or other Pacific Islander
- Black/African-American
- White
- American Indian/Alaska Native
- Hispanic or Latino/a/x
- Other: Please specify: _____
- Prefer not to say

53. What is your gender?

- Male (M)
- Female (F)
- Non-binary/neither male nor female
- I am not sure
- Prefer not to say
- Other gender identity, please describe: _____

54. Do you identify as LGBTQ+ (lesbian, gay, bisexual, transgender, etc.)?

- Yes
- No
- Not sure
- Prefer not to say

Appendix A: 2021 Chatham County Community Survey (English)

55. Which language is most often spoken in your home? (Select all that apply.)

- English
- Spanish
- American Sign Language
- Other: Please specify: _____
- Prefer not to say

56. What is your marital status?

- Married
- Widowed
- Divorced
- Separated
- Unmarried partner
- Never married
- Prefer not to say

57. What is the total number of years you have lived in Chatham County? *If you have lived in Chatham County for less than one year, please enter 0.*

_____ Years

- Prefer not to say

58. What is the highest level of school that you have completed? *If you are currently enrolled, mark the previous grade or highest degree received.*

- No schooling completed
- Less than high school
- High school diploma or equivalent
- Some college, no degree
- Trade certification
- Associate's degree (AA, AS, etc)
- Bachelor's degree (BA, BS, etc.)
- Master's degree (MA, MS, Meng, Med, MSW, MBA, etc.)
- Doctorate or Professional degree (MD, PhD, DDS, DVM, EdD, JD, etc.)
- Prefer not to say

Appendix A: 2021 Chatham County Community Survey (English)

59. What is your employment status? (Select all that apply.)

- Employed full-time (40 or more hours per week)
- Employed part-time (under 40 hours per week)
- Retired
- Student
- Armed forces/military
- Self-employed
- Stay at home parent
- Unable to work due to illness or injury
- Unemployed for less than one year
- Unemployed for more than one year
- Prefer not to say

60. What is the TOTAL income per year of all the members in your household combined? *Total income includes wages, salary, commissions, bonuses, or tips from all jobs; interest, dividends, net rental income, royalty income, or income from estates and trusts; Social Security or Railroad Retirement; Supplemental Security Income (SSI); any public assistance or welfare payments from the state or local welfare office; retirement, survivor, or disability pensions; and any other sources of income received regularly such as Veterans' (VA) payments, unemployment compensation, child support, or alimony.*

- Under \$20,000 per year
- \$20,000 to \$34,999 per year
- \$35,000 to \$49,999 per year
- \$50,000 to \$74,999 per year
- \$75,000 to \$99,999 per year
- \$100,000 to \$149,999 per year
- \$150,000 to \$199,999 per year
- \$200,000 or more per year
- Don't know
- Prefer not to say

61. What questions or topics would you like to see asked in future surveys?

Appendix B: 2021 Chatham County Community Survey (Spanish)



**CHATHAM
HEALTH ALLIANCE**
BUILDING COMMUNITY THROUGH COLLABORATION



Encuesta a la Comunidad del Condado de Chatham 2021

Para completar la encuesta en línea, visite
www.chathamhealthalliancenc.org/encuesta

Para completar la encuesta por teléfono, llame al 919-704-

SECCIÓN 1: GRUPO FAMILIAR

Esta primera sección de preguntas se centrará en su grupo familiar. Todas las opiniones que comparta con nosotros serán completamente confidenciales y se usarán para preparar un resumen grupal. Puede elegir no contestar alguna pregunta seleccionando “Prefiero no contestar”.

1. ¿Cuántas personas de cada grupo etario tiene su grupo familiar (incluido usted)?

| | |
|----------------|--|
| 0-4 AÑOS | |
| 5-14 AÑOS | |
| 15-19 AÑOS | |
| 20-29 AÑOS | |
| 30-39 AÑOS | |
| 40-49 AÑOS | |
| 50-59 AÑOS | |
| 60-69 AÑOS | |
| 70-79 AÑOS | |
| MÁS DE 80 AÑOS | |

Prefiero no contestar

2. ¿Está cuidando de alguien actualmente? (Marque todas las que correspondan)

- Padre/madre mayor o con discapacidad
- Abuelo mayor o con discapacidad
- Cónyuge/pareja mayor o con discapacidad
- Hijos menores de 5 años
- Hijos con discapacidad
- Niños en crianza temporal
- Familiar con enfermedad crónica
- No estoy cuidando de nadie que se ajuste a estas descripciones → Saltar a la P3
- Prefiero no contestar → Saltar a la P3

2a. Si la respuesta es sí, ¿da alguno de los siguientes tipos de cuidado? (Marque todos los que correspondan).

- Atención médica
- Administración de finanzas
- Cuidado diario (p. ej., ayuda para comer, bañarse, ir al baño, asearse, etc.)
- Asistencia en la casa (p. ej., compras del supermercado, transporte a citas, etc.)
- Otro: _____
- Ninguno de los anteriores
- Prefiero no contestar

3. ¿Lo preocupa que en los próximos dos meses sea posible que NO tenga una vivienda estable de la que sea dueño, que alquile o en la que viva como parte de un grupo familiar?

- Sí
- No
- No sé
- Prefiero no contestar

4. ¿Cómo calificaría el estado de su vivienda?

- Buena
- Regular
- Mala
- Prefiero no contestar

5. ¿Cómo suele ir a trabajar, a la escuela, a hacer las compras, etc.? (Marque todas las que correspondan).

- Caminando
- En bicicleta
- En motocicleta o ciclomotor
- En auto o camión
- En transporte público
- Me llevan familiares o amigos
- Otro: _____
- Prefiero no contestar

6. ¿Ha tenido alguno de los siguientes problemas con el transporte en los últimos 12 meses? (Marque todos los que correspondan).

- No había aceras donde tenía que caminar.
- No pude permitirme comprar un vehículo.
- No pude pagar la gasolina.
- No pude pagar reparaciones necesarias.
- No pude ir al taller de reparaciones.
- Las rutas del transporte público no son convenientes para mí.
- Las horas de funcionamiento del transporte público no son convenientes para mí.
- El transporte público tarda demasiado.
- El transporte público es demasiado costoso.
- No sé cómo usar el transporte público (es decir, las rutas de autobuses, cómo comprar pasajes, etc.)
- Otro: _____
- Prefiero no contestar

7. ¿Usa el agua corriente para beber y cocinar?

- Sí, para beber
- Sí, para cocinar
- Sí, para las dos cosas
- No
- Prefiero no contestar

8.

| | Sí | No | No estoy seguro | Prefiero no contestar |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| A. Sé qué emergencias o desastres tienen más probabilidad de ocurrir en mi comunidad. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Mi familia tiene un plan personal para desastres y lo hemos practicado. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Tengo un kit de preparación para emergencias con provisiones para 72 horas. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D. Controlo periódicamente los detectores de humo y de CO2. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. Descargué en mi teléfono aplicaciones de respuesta a emergencias (p. ej., Red Cross, Weather, ReadyNC, etc.). | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F. Estoy registrado para recibir alertas de emergencia (redes sociales, mensajes de texto, correo electrónico). | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**9. ¿Lo preocupa alguno de los siguientes problemas relacionados con desastres o emergencias?
(Marque todos los que correspondan).**

- Caminos bloqueados o inundados
- Daño a la vivienda o propiedad
- Pérdida de suministro eléctrico
- Pérdida de calefacción o refrigeración de la vivienda
- Dificultad para obtener atención médica
- Dificultad para obtener noticias o información de seguridad
- Otro: _____
- Ninguno de los anteriores
- Prefiero no contestar

10. ¿Se siente cómodo consultando información y recursos en internet?

- Sí
- No
- Prefiero no contestar

11. ¿Tiene acceso habitual a una conexión confiable de internet?

- Sí
- No
- Prefiero no contestar

**12. De las siguientes, ¿de dónde obtiene noticias o información sobre el condado de Chatham?
(Marque todas las que correspondan).**

- Chatham Chatlist
- Chatham County Line
- Chatham Magazine
- Chatham News + Record
- WNCA
- Estaciones de noticias de la región (WRAL, ABC11, CBS17, etc.)
- 2-1-1
- Qué Pasa
- Red social Nextdoor
- Alertas de noticias del condado de Chatham (notificaciones electrónicas)
- CodeRED del condado de Chatham
- Redes sociales
- Otra: _____
- Ninguna de las anteriores
- Prefiero no contestar

13. ¿Cuáles de las siguientes plataformas de redes sociales usa? (Marque todas las que correspondan).

- Facebook
- Instagram
- Twitter
- YouTube
- Snapchat
- WhatsApp
- Reddit
- TikTok
- Otra: _____
- No uso redes sociales
- Prefiero no contestar

SECCIÓN 2: SALUD

La siguiente sección de preguntas se centrará en su salud.

14. ¿Cómo describiría su salud en general?

- Excelente
- Muy buena
- Buena
- Regular
- Mala
- Prefiero no contestar

15. ¿Con qué frecuencia la mala salud física le impide hacer actividades habituales, como trabajar o pasar tiempo con familiares y amigos?

- Con frecuencia
- A veces
- Rara vez
- Nunca
- Prefiero no contestar

16. ¿Le ha dicho alguna vez un médico, enfermero u otro profesional médico que tiene alguna de las condiciones médicas mencionadas?

| | Sí | No | No sé | Prefiero no contestar |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| A. Artritis, artritis reumatoide, gota, lupus o fibromialgia | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Asma | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Cualquier tipo de enfermedad cardiovascular o cardíaca (no presión alta) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D. Cáncer | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. Depresión o ansiedad | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F. Diabetes (no durante el embarazo) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G. Presión arterial alta (no durante el embarazo) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| H. Colesterol elevado | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I. Enfermedad pulmonar | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| J. Enfermedad transmitida por garrapatas | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K. Sobrepeso/obesidad | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

17. ¿Necesita alguna persona en su grupo familiar, incluido usted, asistencia para ser independiente en las actividades diarias por algún motivo? (Marque todo lo que corresponda). *Las actividades diarias incluyen comer, ir al baño, elegir la ropa adecuada, afeitarse, mantener la continencia, vestirse, bañarse, caminar y cambiar de lugar (como moverse de la cama a la silla de ruedas).*

- Discapacidad física
- Discapacidad intelectual o del desarrollo
- Problemas visuales o auditivos
- Enfermedad mental
- Consumo o dependencia de sustancias
- Condiciones médicas
- Demencia o enfermedad de Alzheimer
- Ninguna de las anteriores → Saltar a la P18
- Prefiero no contestar → Saltar a la P18

17a. Si la respuesta es sí, ¿recibe habitualmente la asistencia que necesita?

- Sí
- No
- Prefiero no contestar

18. En el último año, ¿se ha encontrado usted o alguien en su grupo familiar una garrapata en el cuerpo?

- Sí
- No → Saltar a la P19
- No sé → Saltar a la P19
- Prefiero no contestar → Saltar a la P19

18a. Si la respuesta es sí, ¿solicitó atención o consejo médico?

- Sí
- No
- Prefiero no contestar

19. Durante los últimos 12 meses, ¿hubo algún momento en el que no haya tenido seguro o cobertura médica?

- Sí
- No → Saltar a la P20
- No sé → Saltar a la P20
- Prefiero no contestar → Saltar a la P20

19a. Si no tuvo cobertura durante algún período, ¿cuál fue el motivo?

- Perdí mi trabajo
- Cambié de trabajo
- Era demasiado cara
- No necesitaba seguro médico
- No sabía cómo obtener seguro médico
- Otro: _____
- Prefiero no contestar

20. ¿Hay algún proveedor médico al que visite normalmente cuando está enfermo o necesita consejos sobre su salud?

- Sí → Ir a la P20a
- No → Saltar ir a la P20b
- Prefiero no contestar → Saltar a la P21

20a. ¿Cuánto tiempo le lleva viajar para visitar a este proveedor médico?

_____ minutos

- Prefiero no contestar
➔ Saltar a la P21

20b. Si la respuesta es no, ¿cuál es el motivo por el que no tiene un proveedor médico habitual? (Marque todos los que correspondan).

- No tengo seguro médico
- El proveedor preferido no acepta el seguro médico
- Los copagos/deducibles son demasiado elevados
- No hay opciones suficientemente cerca
- No tengo tiempo
- He tenido malas experiencias con la atención médica en el pasado
- Nunca me enfermo
- Voy a la sala de emergencias o urgencias médicas si estoy enfermo
- Otro: _____
- Prefiero no contestar

21. ¿Cuánto tiempo ha pasado aproximadamente desde su última visita al médico para un control de rutina? No incluya las veces que visitó al médico porque estaba enfermo, lastimado o embarazada, ni las visitas a la sala de emergencias.

- Menos de un año
- 1-2 años
- 3-5 años
- Más de 5 años
- Nunca he ido al médico para un control de rutina
- No sé
- Prefiero no contestar

22. ¿Cuánto tiempo ha pasado aproximadamente desde su última visita al dentista para un control de rutina o una limpieza? No incluya las veces que fue al dentista por dolor o por una emergencia.

- Menos de un año
- 1-2 años
- 3-5 años
- Más de 5 años
- Nunca he ido al dentista para un control de rutina
- No sé
- Prefiero no contestar

23. En los últimos 12 meses, ¿impidió alguno de los siguientes problemas que usted o a alguien de su grupo familiar recibieran la atención médica (p. ej., visita al médico, atención dental, atención oftalmológica, cirugía o procedimiento médico, medicamentos recetados, etc.) que necesitaba? (Marque todos los que correspondan).

- No pude comunicarme por teléfono
- No pude obtener una cita a tiempo
- Una vez allí, había demasiada espera para recibir atención
- El consultorio no estaba abierto en días/horarios convenientes
- No tenía transporte
- Era demasiado caro
- No tenía seguro médico
- Los médicos disponibles no estaban en la red del seguro
- El seguro no cubría el servicio o el medicamento necesarios
- No había nadie que hablara mi idioma preferido y no había ningún intérprete disponible
- Sentí que me ignoraban, que no me tomaban en serio o que me faltaban el respeto
- No sabía dónde ir
- Otro: Especifique: _____
- No tuve ninguno de estos problemas → Saltar a la P24
- Prefiero no contestar → Saltar a la P24

23a. Si la respuesta es sí, ¿con cuáles de los siguientes proveedores o centros de atención médica tuvo problemas de acceso? (Marque todos los que correspondan).

- Dentista
- Médico general/médico de atención primaria
- Oculista/optometrista/oftalmólogo
- Farmacia/recetas
- Pediatra
- Obstetra/ginecólogo
- Hospital
- Centro de urgencias
- Especialista: Especifique: _____
- Nadie en mi grupo familiar tuvo problemas para encontrar proveedores o centros médicos
- Prefiero no contestar

24. ¿Buscó remedios caseros o atención médica alternativa?

- Sí
- No → Saltar a la P25
- No sé → Saltar a la P25
- Prefiero no contestar → Saltar a la P25

24a. Si la respuesta es sí, describa: _____

- Prefiero no contestar

SECCIÓN 3: SALUD MENTAL

La siguiente sección de preguntas se centrará en su salud mental.

25. En general, ¿cómo describiría su salud mental?

- Excelente
- Muy buena
- Buena
- Regular
- Mala
- Prefiero no contestar

26. ¿Con qué frecuencia la sensación de ansiedad o depresión le impide hacer actividades habituales, como trabajar o pasar tiempo con familiares y amigos?

- Con frecuencia
- A veces
- Rara vez
- Nunca
- Prefiero no contestar

27. ¿Con qué frecuencia se siente aislado o solo?

- Con frecuencia
- A veces
- Rara vez
- Nunca
- Prefiero no contestar

28. ¿Cómo describiría su nivel de estrés diario?

- Alto
- Moderado
- Bajo
- Prefiero no contestar

29. ¿Cuáles son las principales causas de estrés que tiene? (Marque todas las que correspondan).

- Dinero
- Trabajo o escuela
- Preocupaciones sobre su propia salud
- Hijos/cuidado de los niños
- Cuidado de otras personas
- Relaciones (p. ej., cónyuge, hijos, novio)
- Problemas de salud que afectan a mi familia
- Costos de vivienda (p. ej., hipoteca o alquiler)
- Problemas sociales (política, economía, etc.)
- Estabilidad laboral
- Seguridad personal
- Discriminación
- Otro, especifique: _____
- Prefiero no contestar

30. Desde que vive en el condado de Chatham, ¿ha pedido usted o un miembro de su grupo familiar ayuda por algo de lo siguiente? (Marque todo lo que corresponda):

- Salud mental → Ir a la P30a
 - **30a. Si la respuesta es sí, estos servicios (Marque todo lo que corresponda):**
 - Estaban disponibles
 - Fueron fáciles de encontrar
 - Fueron de alta calidad
 - Fueron asequibles
 - Ninguna de las anteriores
 - Prefiero no contestar

- Abuso (incluyendo abuso físico, verbal, emocional/psicológico o sexual) → Ir a la P30b
 - **30b. Si la respuesta es sí, estos servicios (Marque todo lo que corresponda):**
 - Estaban disponibles
 - Fueron fáciles de encontrar
 - Fueron de alta calidad
 - Fueron asequibles
 - Ninguna de las anteriores
 - Prefiero no contestar

- Ninguna de las anteriores
- Prefiero no contestar

SECCIÓN 4: ALIMENTACIÓN SALUDABLE/ACTIVIDAD FÍSICA

La siguiente sección de preguntas se centrará en la alimentación y el ejercicio.

31. ¿Aproximadamente cuántas porciones de frutas y verduras come cada día? *Una manzana chica, un plátano o media taza de brócoli son ejemplos de una porción.*

- Ninguna
- 1-2 porciones
- 3-4 porciones
- 5-6 porciones
- 7 porciones o más
- No sé
- Prefiero no contestar

32. Cuando no come snacks y comidas saludables, ¿cuál es el motivo principal? (Marque todos los que correspondan).

- Costo
- Sabor
- Conveniencia
- No tengo suficiente tiempo para comprar o preparar comida
- No sé qué es saludable o no
- La distancia hasta la tienda
- No hay transporte hasta la tienda
- La tienda no tiene buenas opciones
- Otro: _____
- Siempre como snacks y comidas saludables
- Prefiero no contestar

33. En los últimos doce meses, ¿lo preocupó alguna vez quedarse sin comida antes de tener el dinero para comprar más?

- Sí
- No
- Prefiero no contestar

34. ¿Cuánto tiempo dedica a hacer actividad física o ejercicio (como correr o caminar, clases de ejercicios, deportes, golf o jardinería) en un día típico?

_____ horas _____ minutos

- Prefiero no contestar

35. En el último mes, ¿hubo ocasiones en las que no hizo actividad física por alguno de los siguientes motivos? (Marque todos los que correspondan).

- No tuve tiempo
- Es demasiado caro (p. ej., costos como cuotas de gimnasio, equipos, ropa para hacer ejercicio)
- No estoy familiarizado con diferentes ejercicios
- No tenía un lugar para hacer ejercicio
- No hay un lugar seguro para hacer ejercicio
- No tenía quién cuidara a los niños
- No tenía a nadie con quien hacer ejercicio
- Estaba demasiado cansado para hacer ejercicio
- Hago un trabajo físico
- No sabía dónde encontrar actividades que me interesaran, como clases o equipos de deportes
- No me gustaba hacer ejercicio
- Tengo una discapacidad física
- Tuve una lesión
- Otro: _____
- Ninguno de los anteriores
- Prefiero no contestar

SECCIÓN 5: CONSUMO DE SUSTANCIAS

La siguiente sección de preguntas se centrará en el consumo de sustancias.

36. ¿Usa alguno de los siguientes productos del tabaco? (Marque todos los que correspondan).

- Cigarrillos
- Vapeo/cigarrillos electrónicos (JUUL, Stig, Puff Bars, Blue, etc.)
- Tabaco sin humo (tabaco de mascar, tabaco oral, rapé, snus)
- Cigarros
- Pipas
- Narguile
- No uso ningún producto del tabaco → Saltar a la P37
- Prefiero no contestar → Saltar a la P37

36a. Si la respuesta es sí, ¿qué recursos o asistencia sería útil para usted si le interesara dejar de usar productos del tabaco? (Marque todos los que correspondan).

- Plan personalizado para dejar el tabaco
- Proveedor médico
- Reemplazo de nicotina (parches, goma de mascar o pastillas)
- Medicamentos
- Grupo de apoyo con otras personas que estén intentando dejar de usar tabaco
- Línea directa para preguntas/asistencia
- Aplicación u otra forma de hacer un seguimiento del progreso
- Servicio de mensajes de texto
- Otro, especifique: _____
- Ninguno de los anteriores
- Prefiero no contestar

37. ¿Está expuesto habitualmente al humo de tabaco en el ambiente en alguno de estos lugares en el condado de Chatham? (Marque todos los que correspondan).

- No estoy expuesto habitualmente al humo de tabaco en el ambiente en el condado de Chatham
- Vivienda o auto
- Lugar de trabajo
- Parques
- Restaurantes o bares
- Escuela
- Aceras
- Hospital
- Otro: Especifique: _____
- Prefiero no contestar

38. ¿Con qué frecuencia beber alcohol ha afectado negativamente a sus actividades habituales, como trabajar o pasar tiempo con familiares y amigos?

- Con frecuencia
- A veces
- Rara vez
- Nunca
- Prefiero no contestar

39. En los últimos 12 meses, ¿ha consumido intencionalmente de manera indebida usted o un miembro de su grupo familiar algún medicamento recetado (p. ej., sin receta, una cantidad mayor que la recetada, con una frecuencia mayor que la recetada o por cualquier motivo distinto a las instrucciones del médico)?

- Sí
- No → Saltar a la P40
- No sé → Saltar a la P40
- Prefiero no contestar → Saltar a la P40

39a. Si la respuesta es sí, ¿fueron algunos de estos medicamentos recetados analgésicos, como codeína, Vicodin, Percocet, morfina, oxicodona, Tramadol, fentanilo, hidrocodona u OxyContin?

- Sí
- No
- No sé
- Prefiero no contestar

40. ¿Ha consumido usted o un miembro de su grupo familiar alguna de estas sustancias en los últimos 12 meses? (Marque todas las que correspondan).

- Metanfetaminas
- Cocaína o crack
- Heroína
- Éxtasis
- Otro: _____
- Drogas desconocidas
- No sé
- Ninguna de las anteriores
- Prefiero no contestar

41. Desde que vive en el condado de Chatham, ¿ha pedido usted o un miembro de su grupo familiar ayuda por algo de lo siguiente? (Marque todo lo que corresponda):

- Consumo de alcohol → Ir a la P41a
 - **41a. Si la respuesta es sí, estos servicios (Marque todo lo que corresponda):**
 - Estaban disponibles
 - Fueron fáciles de encontrar
 - Fueron de alta calidad
 - Fueron asequibles
 - Ninguno de los anteriores
 - Prefiero no contestar

- Consumo de drogas → Ir a la P41b
 - **41b. Si la respuesta es sí, estos servicios (Marque todo lo que corresponda):**
 - Estaban disponibles
 - Fueron fáciles de encontrar
 - Fueron de alta calidad
 - Fueron asequibles
 - Ninguno de los anteriores
 - Prefiero no contestar

- Uso de tabaco --> Ir a la P41c
 - **41c. Si la respuesta es sí, estos servicios (Marque todo lo que corresponda):**
 - Estaban disponibles
 - Fueron fáciles de encontrar
 - Fueron de alta calidad
 - Fueron asequibles
 - Ninguna de las anteriores
 - Prefiero no contestar

- Ninguna de las anteriores
- Prefiero no contestar

SECCIÓN 6: COMUNIDAD

Las siguientes preguntas se centran en aspectos de su comunidad.

42. Díganos si está “muy de acuerdo”, “de acuerdo”, “en desacuerdo” o “muy en desacuerdo” con cada una de las siguientes afirmaciones, pensando específicamente en su comunidad como la ve usted.

| | MUY DE ACUERDO | DE ACUERDO | NEUTRO | EN DESACUERDO | MUY EN DESACUERDO | PREFIERO NO CONTESTAR |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| A. Me siento conectado con otras personas en mi comunidad. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. El condado de Chatham es un buen lugar para criar hijos. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. El condado de Chatham es un buen lugar en el que envejecer. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D. Hay escuelas K-12 de alta calidad en donde vivo. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. El condado de Chatham tiene buenas oportunidades económicas para mí. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F. Puedo pagar una vivienda en un área del condado de Chatham en la que quiero vivir. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G. Siento que el ambiente del condado de Chatham es saludable (aire, agua, etc.) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| H. Me siento seguro donde vivo. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I. Puedo acceder a recursos en mi idioma preferido. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| J. Me siento representado en las decisiones que toma el gobierno del condado de Chatham. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K. He sufrido tensión racial en el condado de Chatham. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

43. ¿Ha sufrido discriminación, imparcialidad o prejuicios en alguno de los siguientes entornos en el condado de Chatham? (es decir, ¿ha sentido que lo trataron diferente debido a su identidad o quién es?) (Marque todo lo que corresponda).

- Atención médica
- Empleo
- Vivienda
- Educación
- Tiendas, restaurantes, etc.
- Fuerzas del orden o sistema de justicia
- Otro: _____
- No he sufrido discriminación, imparcialidad ni prejuicios en el condado de Chatham
- Prefiero no contestar

44. ¿Pertenece usted a alguna de las siguientes organizaciones de la comunidad? (Marque todas las que correspondan).

- Organización religiosa
- Grupo comunitario o de voluntarios
- Organización profesional
- Organización cívica
- Grupo o club de algún hobby
- Otro: _____
- Ninguna de las anteriores
- Prefiero no contestar

45. ¿Por qué eligió la guardería actual? (Marque todo lo que corresponda).

- No uso guardería
- Ubicación conveniente
- Asequible
- Alta calidad
- No sé
- Prefiero no contestar

46. ¿En cuáles de las siguientes cuestiones le gustaría que el condado de Chatham se centre para mejorar la salud y la calidad de vida en la comunidad? (Elija tres). Si hay algo que le gustaría incluir que no esté en la lista, agréguelo abajo.

Atención médica

- Más opciones de atención médica
- Atención médica más asequible
- Cobertura/seguro médico más asequible
- Atención médica de mejor calidad
- Servicios médicos específicos para mi cultura (por ejemplo, servicios en español)
- Proveedores médicos que atiendan Medicaid/Medicare
- Acceso a buena información médica

Infraestructura/ambiente

- Opciones de transporte
- Preparación para desastres/condiciones climáticas extremas
- Aceras/carriles para bicicletas
- Calidad del agua
- Acceso a internet

Vivienda y servicios sociales

- Viviendas asequibles
- Programas de asistencia para el alquiler
- Protección para inquilinos
- Servicios por discapacidad
- Envejecimiento saludable/envejecimiento en el hogar

Guarderías/educación

- Más opciones de guardería
- Guardería más asequible
- Apoyo para niños con discapacidades intelectuales y del desarrollo
- Desarrollo infantil (apoyo físico y social/emocional)

Comida

- Comida saludable asequible
- Más lugares para comprar comestibles
- Seguridad alimentaria para los hogares (despensas de comida, Meals on Wheels, SNAP, WIC)

Empleo

- Más oportunidades laborales
- Empleos con paga más alta

Appendix B: 2021 Chatham County Community Survey (Spanish)

- Orientación para el desarrollo profesional

Salud mental y consumo de sustancias

- Atención de salud mental
- Apoyo/tratamiento por el consumo de sustancias (drogas, alcohol, etc.)

Recreación y cultura

- Parques y recreación
- Arte y eventos culturales
- Actividades familiares saludables
- Actividades para adolescentes
- Oportunidades de liderazgo para jóvenes

Comunidad

- Igualdad y eliminación de disparidades en salud
- Barrios seguros
- Oportunidades de conexión social
- Oportunidades de participación cívica

Otro

- Otro: _____
- Otro: _____
- Otro: _____

- Prefiero no contestar

SECCIÓN 7: COVID-19

Esta sección de preguntas se centrará en la pandemia de COVID-19 (también conocido como coronavirus) y cómo lo afectó a usted y a su grupo familiar.

47. ¿Ha dado positivo de COVID-19 algún miembro de su grupo familiar desde que comenzó la pandemia?

- Sí, una persona
- Sí, más de una persona
- No
- Prefiero no contestar

48. ¿Sufrió usted algo de lo siguiente como resultado de la pandemia de COVID-19? (Marque todo lo que corresponda).

- Perdí mi trabajo, me suspendieron o me redujeron las horas de trabajo
- Perdí negocios o ingresos
- Perdí mi seguro médico
- No pude acceder a servicios de atención médica
- Solicité beneficios por desempleo o beneficios económicos
- No he podido pagar el alquiler, la hipoteca o las facturas de servicios públicos
- No he tenido suficiente dinero para llegar a fin de mes
- Hice menos ejercicio de lo normal
- He tomado alcohol o consumido drogas más de lo habitual
- He sentido más estrés o ansiedad
- Me he preocupado sobre mi propia salud
- Me he preocupado sobre la salud de familiares o amigos
- He estado en duelo por la pérdida de un ser querido
- He solicitado ayuda o asistencia, pero no pude obtenerla
(Describe: _____)
- Otro: _____
- Ninguna de las anteriores
- Prefiero no contestar

49. ¿Le gustaría ponerse una vacuna contra el COVID-19?

- Ya me puse una vacuna → Saltar a la P50
- Estoy planeando ponerme una vacuna → Saltar a la P50
- No me interesa ponerme una vacuna contra el COVID-19 en este momento
- Prefiero no contestar → Saltar a la P50

49a. Si la respuesta es no, ¿cuál es el motivo principal por el que no le interesa ponerse una vacuna?

-
- Prefiero no contestar

50. ¿Considera que el condado respondió apropiadamente a la pandemia de COVID-19?

- Sí → Saltar a la P51
- No
- No sé → Saltar a la P51
- Prefiero no contestar → Saltar a la P51

50a. Si la respuesta es no, ¿qué cree que se podría haber hecho mejor?

-
- Prefiero no contestar

SECCIÓN 8: DATOS DEMOGRÁFICOS

¡Ya casi terminamos! Solo necesitamos saber un poco más sobre quién es usted. Solo como recordatorio, toda la información que nos dé será completamente confidencial. Solamente se preparará un resumen grupal.

51. ¿Qué edad tiene? _____ años

- Prefiero no contestar

52. ¿Cuál de las siguientes describe mejor su raza, etnia u origen? (Marque todas las que correspondan).

- Asiático
 Nativo de Hawái o de otras islas del Pacífico
 Negro/afroamericano
 Blanco
 Indio americano/nativo de Alaska
 Hispano o latino
 Otro: Especifique: _____
 Prefiero no contestar

53. ¿Cuál es su género?

- Masculino (M)
 Femenino (F)
 No binario/ni masculino ni femenino
 No estoy seguro
 Prefiero no contestar
 Otra identidad de género, describa: _____

54. ¿Se identifica como LGBTQ+ (lesbiana, gay, bisexual, transgénero, etc.)?

- Sí
 No
 No estoy seguro
 Prefiero no contestar

55. ¿Qué idioma se habla con más frecuencia en su casa? (Marque todos los que correspondan).

- Inglés
 Español
 Lenguaje de señas americano
 Otro: Especifique: _____
 Prefiero no contestar

56. ¿Cuál es su estado civil?

- Casado
- Viudo
- Divorciado
- Separado
- En pareja
- Nunca me casé
- Prefiero no contestar

57. ¿Cuántos años en total ha vivido en el condado de Chatham? Si ha vivido en el condado de Chatham durante menos de un año, escriba 0. _____ años

- Prefiero no contestar

58. ¿Cuál es el nivel de estudios más alto que ha completado? Si está inscrito actualmente, marque el grado anterior o título más alto recibido.

- Ningún nivel educativo completado
- Menos que escuela secundaria
- Diploma de escuela secundaria o equivalente
- Educación superior incompleta, sin título
- Certificación de oficio
- Associate's degree (AA, AS, etc.)
- Bachelor's degree (BA, BS, etc.)
- Master's degree (MA, MS, Meng, Med, MSW, MBA, etc.)
- Doctorado o título de posgrado (MD, PhD, DDS, DVM, EdD, JD, etc.)
- Prefiero no contestar

59. ¿Cuál es su situación laboral? (Marque todo lo que corresponda).

- Empleado a tiempo completo (40 horas o más a la semana)
- Empleado a tiempo parcial (menos de 40 horas a la semana)
- Retirado
- Estudiante
- Fuerzas armadas/militar
- Independiente
- Amo de casa
- No puedo trabajar debido a una enfermedad o lesión
- Desempleado hace menos de un año
- Desempleado hace más de un año
- Prefiero no contestar

60. ¿Cuáles son los ingresos TOTALES al año de todos los miembros de su grupo familiar combinados?
Los ingresos totales incluyen salario, sueldo, comisiones, bonos o propinas de todos los trabajos; intereses, dividendos, ingresos netos por alquileres, ingresos por regalías o ingresos por sucesiones y fideicomisos; beneficios del Seguro Social o del Retiro para Empleados Ferroviarios; Seguridad de Ingreso Suplementario (SSI); cualquier pago de bienestar o asistencia pública de la oficina de bienestar social estatal o local; pensiones por discapacidad, supervivencia o jubilación; y cualquier otra fuente de ingresos que se reciba periódicamente como pagos para Veteranos (VA), compensación por desempleo, manutención infantil o alimentos.

- Menos de \$20,000 al año
- Entre \$20,000 y \$34,999 al año
- Entre \$35,000 y \$49,999 al año
- Entre \$50,000 y \$74,999 al año
- Entre \$75,000 y \$99,999 al año
- Entre \$100,000 y \$149,999 al año
- Entre \$150,000 y \$199,999 al año
- \$200,000 o más al año
- No sé
- Prefiero no contestar

61. ¿Qué preguntas o temas le gustaría que se incluyan en encuestas futuras?

Appendix C: 2021 Chatham County Community Survey Results

2021 Chatham County Community Survey

This Appendix includes the weighted results of the 2021 Chatham County Community Survey. Results have been weighted to represent the adult population. “Prefer not to say” and “Don’t know” responses were excluded from these calculations if they totaled fewer than 3% of all responses.

1. How many people in each age group are currently in your household (including yourself)?

| | |
|----------|-------|
| 1 person | 25.5% |
| 2 people | 45.2% |
| 3 people | 13.0% |
| 4 people | 10.9% |
| 5 people | 3.7% |
| 6 people | 0.9% |
| 7 people | 0.8% |

2. Are you currently caring for – (select all that apply)?

| | |
|--|-------|
| Elderly or disabled parent | 8.5% |
| Elderly or disabled grandparent | 1.3% |
| Elderly or disabled spouse/partner | 3.2% |
| Child(ren) under 5 years | 4.6% |
| Disabled child(ren) | 1.7% |
| Family member with chronic illness | 5.7% |
| I am not caring for anyone who fits these descriptions | 75.3% |

2a. If yes, do you provide any of the following types of care? (Select all that apply.)

| | |
|--|-------|
| Medical care | 29.2% |
| Financial management | 42.2% |
| Daily care (e.g. feeding, bathing, toileting, grooming, etc.) | 25.4% |
| Household assistance (e.g. grocery shopping, transportation to appointments, etc.) | 69.8% |
| Other | 4.2% |
| None of the above | 12.7% |

3. Are you worried or concerned that in the next two months you may NOT have stable housing that you own, rent, or stay in as part of a household?

| | |
|------------|-------|
| Yes | 4.6% |
| No | 90.1% |
| Don't know | 4.3% |

4. How would you rate the condition of your housing?

| | |
|------|-------|
| Good | 82.9% |
| Fair | 15.3% |
| Poor | 1.4% |

5. How do you usually get around to go to work, school, grocery shopping, etc.? (Select all that apply.)

| | |
|------------------------------------|-------|
| Walk | 3.5% |
| Bicycle | 1.0% |
| Motorcycle or moped | 2.2% |
| Car or truck | 94.9% |
| Public transportation | 2.1% |
| I get rides from family or friends | 5.7% |
| Other | 1.2% |

Appendix C: 2021 Chatham County Community Survey Results

6. Have you experienced any of the following issues with transportation in the past 12 months? (Select all that apply.)

| | |
|--|-------|
| No sidewalks where I needed to walk | 16.0% |
| Couldn't afford to buy a vehicle | 3.6% |
| Couldn't afford gas | 5.6% |
| Couldn't afford necessary repairs | 7.2% |
| Couldn't get to repair shop | 2.1% |
| Public transportation routes aren't convenient for me | 9.3% |
| Public transportation hours of operation aren't convenient for me | 2.9% |
| Public transportation takes too long | 3.8% |
| Public transportation is too expensive | 2.3% |
| I don't know how to use public transportation (i.e., bus routes, buying tickets, etc.) | 8.1% |
| Other | 2.9% |
| Prefer not to say | 14.2% |

7. Do you use your tap water for drinking and cooking?

| | |
|---------------|-------|
| Yes, drinking | 1.3% |
| Yes, cooking | 24.6% |
| Yes, both | 60.6% |
| No | 13.4% |

8.

| | |
|---|-------|
| 8A. I know what emergencies or disasters are most likely to occur in my community. | |
| Yes | 69.0% |
| No | 9.5% |
| Not Sure | 20.8% |

Appendix C: 2021 Chatham County Community Survey Results

| | |
|---|-------|
| 8B. My family has a personal disaster plan and we have practiced it. | |
| Yes | 31.1% |
| No | 60.3% |
| Not Sure | 7.1% |
| 8C. I have an emergency preparedness kit with supplies for 72 hours. | |
| Yes | 31.9% |
| No | 63.5% |
| Not Sure | 4.0% |
| 8D. I regularly check my smoke and CO2 detectors. | |
| Yes | 70.8% |
| No | 26.6% |
| Not Sure | 1.7% |
| 8E. I have emergency response related apps downloaded on my phone (e.g., Red Cross, Weather, ReadyNC, etc.). | |
| Yes | 55.0% |
| No | 42.3% |
| Not Sure | 2.4% |
| 8F. I am signed up to receive emergency alerts (social media, text, email). | |
| Yes | 68.4% |
| No | 25.1% |
| Not Sure | 6.1% |

9. Are you concerned about any of the following issues related to a disaster or emergency? (Select all that apply.)

| | |
|--|-------|
| Roads blocked or flooded | 44.6% |
| Damage to home or property | 62.7% |
| Losing power | 72.0% |
| Losing home heating or cooling | 55.7% |
| Difficulty accessing medical care | 22.9% |
| Difficulty accessing safety information or updates | 11.6% |
| Other | 3.0% |
| None of the above | 13.1% |

10. Do you feel comfortable accessing information and resources on the internet?

| | |
|-----|-------|
| Yes | 83.4% |
| No | 15.0% |

11. Do you have regular access to reliable internet?

| | |
|-----|-------|
| Yes | 81.2% |
| No | 18.6% |

Appendix C: 2021 Chatham County Community Survey Results

12. Of the following, where do you get news or information about Chatham County? (Select all that apply.)

| | |
|---|-------|
| Chatham Chatlist | 14.8% |
| Chatham County Line | 12.4% |
| Chatham Magazine | 13.5% |
| Chatham News + Record | 32.4% |
| WNCA | 8.4% |
| Surrounding area news stations (WRAL, ABC11, CBS17, etc.) | 63.9% |
| 2-1-1 | 0.2% |
| Que Pasa | 2.5% |
| Nextdoor social network | 22.5% |
| Chatham County news alerts (eNotifications) | 11.2% |
| Chatham County CodeRED | 7.4% |
| Social Media | 34.0% |
| Other (specify): | 9.1% |
| None of the above | 5.1% |

13. Which of the following social media platforms do you use? (Select all that apply.)

| | |
|--------------------------|-------|
| Facebook | 63.6% |
| Instagram | 25.3% |
| Twitter | 10.4% |
| YouTube | 35.6% |
| Snapchat | 7.9% |
| WhatsApp | 14.3% |
| Reddit | 2.9% |
| TikTok | 10.4% |
| Other | 1.3% |
| I don't use social media | 23.1% |

14. Would you say that, in general, your health is...?

| | |
|-----------|-------|
| Excellent | 9.7% |
| Very good | 39.9% |
| Good | 32.4% |
| Fair | 13.4% |
| Poor | 4.0% |

15. How often does poor physical health keep you from doing your usual activities, such as work or spending time with family and friends?

| | |
|-----------|-------|
| Often | 7.3% |
| Sometimes | 18.5% |
| Rarely | 41.4% |
| Never | 32.6% |

16. Have you ever been told by a doctor, nurse, or other health professional that you have any of the listed health conditions?

| | |
|--|-------|
| 16A. Arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia | 39.6% |
| 16B. Asthma | 13.8% |
| 16C. Any kind of cardiovascular or heart disease (not high blood pressure) | 14.8% |
| 16D. Cancer | 14.0% |
| 16E. Depression or anxiety | 33.3% |
| 16F. Diabetes (not during pregnancy) | 16.9% |
| 16G. High blood pressure (not during pregnancy) | 46.8% |
| 16H. High cholesterol | 43.3% |
| 16I. Lung disease | 3.2% |
| 16J. Tickborne illness | 6.6% |
| 16K. Overweight/obesity | 34.1% |

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17. Does anyone in your household, including yourself, need support to be independent in daily activities because of a - (select all that apply). *Daily activities include feeding, toileting, selecting proper attire, grooming, maintaining continence, putting on clothes, bathing, walking, and transferring (such as moving from bed to wheelchair).*

| | |
|--|-------|
| Physical disability | 5.3% |
| Intellectual or developmental disability | 2.9% |
| Difficulty seeing or hearing | 4.2% |
| Mental illness | 3.0% |
| Substance abuse or dependence | 0.4% |
| Medical conditions | 5.2% |
| Dementia or Alzheimer's | 1.2% |
| None of the above | 83.1% |

17a. If yes, do you have regular access to the support you need?

| | |
|-------------------|-------|
| Yes | 77.9% |
| No | 17.8% |
| Prefer not to say | 4.3% |

18. In the past year, did you or someone in your household find a tick on their body?

| | |
|------------|-------|
| Yes | 39.5% |
| No | 56.6% |
| Don't know | 3.8% |

18a. If yes, did you seek any health care or advice?

| | |
|-----|-------|
| Yes | 13.2% |
| No | 85.7% |

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19. During the past 12 months, was there any time that you did not have health insurance or coverage?

| | |
|-----|-------|
| Yes | 10.1% |
| No | 87.6% |

19a. If you did not have coverage for any period of time, what was the reason?

| | |
|---|-------|
| Lost job | 27.9% |
| Switched jobs | 12.0% |
| Too expensive | 50.8% |
| Didn't know how to get health insurance | 3.7% |
| Other | 5.5% |
| Prefer not to say | 4.6% |

20. Is there a health provider that you usually visit when you are sick or need advice about your health?

| | |
|-----|-------|
| Yes | 90.1% |
| No | 8.7% |

20a. About how long does it take you to travel to this health provider?

Mean: 19.5 minutes; **Median:** 14.4 minutes; **Range:** 2-70 minutes

20b. If no, what is the reason you do not have a regular health provider? (Select all that apply.)

| | |
|--|-------|
| I don't have health insurance | 47.3% |
| Health insurance not taken by preferred provider | 15.3% |
| Copays/deductibles are too high | 19.5% |
| No options close enough to me | 9.0% |
| I don't have time | 2.6% |
| Bad experience with health care in the past | 8.9% |
| I am never sick | 13.2% |
| I go to urgent care or the emergency room if I am sick | 35.9% |
| Other | 8.8% |

21. About how long has it been since you last visited a doctor for a routine checkup? Do not include times you visited the doctor because you were sick, injured, or pregnant, or emergency room visits.

| | |
|---|-------|
| Less than one year | 80.1% |
| 1-2 years | 12.1% |
| 3-5 years | 2.3% |
| More than 5 years | 2.4% |
| I have never been to the doctor for a routine checkup | 2.3% |

22. About how long has it been since you last visited a dentist for a routine checkup or cleaning? Do not include times you visited the dentist because of pain or an emergency.

| | |
|--|-------|
| Less than one year | 69.2% |
| 1-2 years | 12.5% |
| 3-5 years | 5.6% |
| More than 5 years | 8.7% |
| I have never been to the dentist for a routine checkup | 2.1% |

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23. In the past 12 months, have any of the following prevented you or someone in your household from getting the health care (e.g. doctor visit, dental care, eye care, surgery or medical procedure, prescribed medicines, etc.) you needed? (Select all that apply.)

| | |
|---|-------|
| Could not get through on the telephone | 2.4% |
| Could not get an appointment soon enough | 12.2% |
| Once getting there, the wait to receive care was too long | 1.6% |
| The office was not open convenient days/hours | 2.4% |
| Did not have transportation | 1.3% |
| It was too expensive | 9.1% |
| Did not have health insurance | 7.4% |
| Available doctors were not in the insurance network | 5.1% |
| The needed service or medication was not covered by insurance | 5.7% |
| There was no one who spoke my preferred language and no interpreter available | 0.0% |
| Felt ignored, not taken seriously, or disrespected | 1.8% |
| Did not know where to go | 0.7% |
| Other | 4.4% |
| I have not experienced any of these issues | 65.0% |

23a. If yes, which of the following health care providers or facilities did you have trouble accessing? (Select all that apply.)

| | |
|--|-------|
| Dentist | 34.9% |
| General practitioner/Primary care doctor | 49.0% |
| Eye care/optometrist/ophthalmologist | 18.0% |
| Pharmacy/prescriptions | 11.6% |
| Pediatrician | 4.9% |
| OB/GYN | 4.7% |
| Hospital | 9.9% |
| Urgent care center | 11.5% |
| Specialist | 11.2% |

24. Do you seek alternative health care or home remedies?

| | |
|------------|-------|
| Yes | 29.9% |
| No | 63.9% |
| Don't know | 3.3% |

25. In general, would you say that your mental health is:

| | |
|-----------|-------|
| Excellent | 23.3% |
| Very good | 37.4% |
| Good | 28.0% |
| Fair | 10.1% |
| Poor | 1.2% |

26. How often do feelings of anxiety or depression keep you from doing your usual activities, such as work or spending time with family and friends?

| | |
|-----------|-------|
| Often | 4.6% |
| Sometimes | 19.2% |
| Rarely | 27.6% |
| Never | 47.3% |

27. How often do you feel isolated or lonely?

| | |
|-----------|-------|
| Often | 4.7% |
| Sometimes | 24.3% |
| Rarely | 35.2% |
| Never | 35.1% |

28. How would you describe your day-to-day level of stress?

| | |
|----------|-------|
| High | 10.7% |
| Moderate | 35.1% |
| Low | 52.0% |

29. What are the primary causes of stress that you experience? (Select all that apply.)

| | |
|--|-------|
| Money | 30.4% |
| Work or school | 30.8% |
| Personal health concerns | 25.8% |
| Children/childcare | 12.4% |
| Caretaking | 10.3% |
| Relationships (e.g., spouse, kids, girl/boyfriend) | 24.2% |
| Health problems affecting my family | 20.8% |
| Housing costs (e.g., mortgage or rent) | 9.1% |
| Social issues (politics, the economy, etc.) | 38.4% |
| Job stability | 6.8% |
| Personal safety | 5.4% |
| Discrimination | 5.3% |
| Other | 6.2% |
| Prefer not to say | 7.0% |

30. While living in Chatham County, have you or a member of your household sought help for any of the following? (Select all that apply.):

| | |
|--|-------|
| Mental health | 20.6% |
| Abuse (including physical, verbal, emotional/psychological, or sexual abuse) | 1.8% |
| None of the above | 74.1% |

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31. About how many servings of fruits and vegetables do you eat each day? *One small apple, one banana, or one half cup of broccoli are all examples of a serving.*

| | |
|--------------------|-------|
| None | 3.6% |
| 1-2 servings | 53.9% |
| 3-4 servings | 31.8% |
| 5-6 servings | 7.4% |
| 7 or more servings | 1.1% |

32. When you do not eat healthy snacks and meals, what is the main reason? (Select all that apply.)

| | |
|--|-------|
| Cost | 17.4% |
| Taste | 23.5% |
| Convenience | 41.3% |
| Not enough time to shop or prepare foods | 19.0% |
| Don't know what is healthy or not | 2.6% |
| Distance to store | 2.2% |
| No transportation to the store | 0.5% |
| Store doesn't have good options | 3.1% |
| Other (specify): | 8.6% |
| I always eat healthy snacks and meals | 17.2% |
| Prefer not to say | 3.8% |

33. Within the past twelve months, did you ever worry that you would run out of food before you had money to buy more?

| | |
|-----|-------|
| Yes | 12.8% |
| No | 86.7% |

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34. How much time do you spend doing physical activity or exercise (such as running or walking, exercise classes, sports, golf, or gardening) in a typical day?

Mean: 77.5 minutes; **Median:** 47.5 minutes; **Range:** 0-600 minutes

35. In the past month, were there any times when you didn't engage in physical activity for any of the following reasons? (Select all that apply.)

| | |
|--|-------|
| I didn't have time | 36.7% |
| It is too expensive (i.e., costs such as gym fees, equipment, exercise clothes) | 6.6% |
| I am not familiar with different exercises | 1.1% |
| I didn't have a place to exercise | 6.6% |
| There is no safe place to exercise | 6.0% |
| I didn't have childcare | 5.6% |
| I have no one to exercise with | 5.8% |
| I was too tired to exercise | 30.5% |
| My job involves physical labor | 3.3% |
| I didn't know where to find activities I am interested in, such as classes or sports teams | 4.6% |
| I didn't like to exercise | 10.9% |
| I'm physically disabled | 4.2% |
| I had an injury | 10.4% |
| Other | 8.9% |
| None of the above | 23.1% |
| Prefer not to say | 3.7% |

36. Do you use any of the following tobacco products? (Select all that apply.)

| | |
|---|-------|
| Cigarettes | 8.3% |
| Vape/Electronic cigarettes (e-cigarettes) (JUUL, Stig, Puff Bars, Blue, etc.) | 1.2% |
| Smokeless tobacco (chew, dip, snuff, snus) | 0.3% |
| Cigars | 1.9% |
| Pipes | 0.3% |
| I don't use any tobacco products | 85.6% |

36a. If yes, what resources or support would be helpful to you if you were interested in quitting tobacco products? (Select all that apply.)

| | |
|--|-------|
| Personalized quit plan | 26.7% |
| Medical provider | 19.0% |
| Nicotine replacement (patches, gum, or lozenges) | 23.8% |
| Medication | 18.0% |
| Support group of others trying to quit using tobacco | 14.5% |
| Hotline for questions/support | 9.7% |
| App or other way to track progress | 12.3% |
| Text message service | 9.7% |
| Other | 4.9% |
| None of the above | 52.0% |

**37. Are you regularly exposed to secondhand smoke in any of these locations in Chatham County?
(Select all that apply.)**

| | |
|--|-------|
| I am not regularly exposed to secondhand smoke in Chatham County | 83.1% |
| Home or car | 5.3% |
| Workplace | 1.5% |
| Parks | 0.1% |
| Restaurants or bars | 2.3% |
| Sidewalks | 0.5% |
| Other | 1.0% |
| Prefer not to say | 5.3% |

38. How often does drinking alcohol negatively affect your usual activities, such as work or spending time with family and friends?

| | |
|-----------|-------|
| Often | 0.5% |
| Sometimes | 1.2% |
| Rarely | 9.8% |
| Never | 87.5% |

39. In the past 12 months, have you or a member of your household intentionally misused any form of prescription drugs (e.g. used without a prescription, used more than prescribed, used more often than prescribed, or used for any reason other than a doctor's instructions)?

| | |
|-----|-------|
| Yes | 2.4% |
| No | 94.6% |

39a. If yes, were any of these prescription drugs for pain, such as codeine, Vicodin, Percocet, morphine, oxycodone, Tramadol, fentanyl, hydrocodone, or OxyContin

| | |
|-----|-------|
| Yes | 13.5% |
| No | 86.5% |

**40. Have you or a member of your household used any of these substances in the past 12 months?
(Select all that apply.)**

| | |
|-------------------|-------|
| Methamphetamines | 1.1% |
| Cocaine or crack | 1.4% |
| Other (specify): | 1.4% |
| Unknown drug(s) | 1.0% |
| None of the above | 94.8% |

41. While living in Chatham County, have you or a member of your household sought help for any of the following? (Select all that apply.):

| | |
|-------------------|-------|
| Alcohol use | 2.9% |
| Drug use | 1.4% |
| Tobacco use | 1.9% |
| None of the above | 93.4% |

42. Please tell us whether you “strongly agree”, “agree”, “disagree” or “strongly disagree” with each of the next few statements thinking specifically about your community as you see it.

| | |
|---|-------|
| 42A. I feel connected to others in my community. | |
| Strongly Agree | 9.8% |
| Agree | 40.2% |
| Neutral | 34.7% |
| Disagree | 12.1% |
| Strongly Disagree | 2.4% |
| 42B. Chatham County is a good place to raise children. | |
| Strongly Agree | 11.9% |
| Agree | 49.7% |
| Neutral | 26.1% |
| Disagree | 6.3% |

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| | |
|--|-------|
| Strongly Disagree | 1.6% |
| Prefer not to say | 4.5% |
| 42C. Chatham County is a good place to grow old. | |
| Strongly Agree | 15.4% |
| Agree | 50.9% |
| Neutral | 27.0% |
| Disagree | 5.7% |
| Strongly Disagree | 0.7% |
| 42D. There are high quality K-12 schools where I live. | |
| Strongly Agree | 9.8% |
| Agree | 30.7% |
| Neutral | 38.0% |
| Disagree | 13.0% |
| Strongly Disagree | 1.6% |
| Prefer not to say | 7.0% |
| 42E. Chatham County has good economic opportunities for me. | |
| Strongly Agree | 4.4% |
| Agree | 24.8% |
| Neutral | 41.8% |
| Disagree | 21.2% |
| Strongly Disagree | 3.1% |
| Prefer not to say | 4.8% |
| 42F. I am able to afford housing in an area of Chatham County where I want to live. | |
| Strongly Agree | 19.7% |
| Agree | 49.0% |
| Neutral | 14.9% |
| Disagree | 8.7% |
| Strongly Disagree | 5.2% |

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| | |
|--|-------|
| 42G. I feel Chatham County's environment is healthy (air, water, etc.). | |
| Strongly Agree | 9.8% |
| Agree | 49.0% |
| Neutral | 20.0% |
| Disagree | 14.1% |
| Strongly Disagree | 7.0% |
| 42H. I feel safe where I live. | |
| Strongly Agree | 23.8% |
| Agree | 63.5% |
| Neutral | 10.6% |
| Disagree | 1.5% |
| Strongly Disagree | 0.7% |
| 42I. I can access resources in my preferred language. | |
| Strongly Agree | 39.9% |
| Agree | 53.5% |
| Neutral | 4.2% |
| Disagree | 1.5% |
| Strongly Disagree | 0.0% |
| 42J. I feel represented in decisions made by Chatham County government. | |
| Strongly Agree | 3.8% |
| Agree | 20.4% |
| Neutral | 47.3% |
| Disagree | 17.0% |
| Strongly Disagree | 8.4% |
| Prefer not to say | 3.1% |
| 42K. I have experienced racial tension in Chatham County. | |
| Strongly Agree | 7.0% |
| Agree | 22.6% |

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| | |
|-------------------|-------|
| Neutral | 21.2% |
| Disagree | 30.0% |
| Strongly Disagree | 16.8% |

43. Have you experienced discrimination, bias, or prejudice in any of the following settings in Chatham County? (i.e. have you felt like you have been treated differently because of your identity or who you are?) (Select all that apply.)

| | |
|---|-------|
| Health Care | 3.9% |
| Employment | 5.3% |
| Housing | 1.8% |
| Education | 2.3% |
| Stores, restaurants, etc. | 10.0% |
| Law enforcement or justice system | 5.5% |
| Other | 3.9% |
| I have not experienced discrimination, bias, or prejudice in Chatham County | 75.2% |
| Prefer not to say | 4.1% |

44. Are you a member of any of the following community organizations? (Select all that apply.)

| | |
|------------------------------|-------|
| Faith-based organization | 33.7% |
| Community or volunteer group | 18.5% |
| Professional organization | 8.3% |
| Civic organization | 5.2% |
| Hobby group or club | 12.1% |
| Other | 2.6% |
| None of the above | 43.0% |

45. Why did you choose the childcare you use? (Select all that apply.)

| | |
|-----------------------|-------|
| I don't use childcare | 90.2% |
| Convenient location | 3.6% |
| Affordable | 6.5% |
| High quality | 3.8% |

46. Which of the following would you like Chatham County to focus on in order to improve health and quality of life in the community? (Choose three.) If there is something you would like to include that is not listed, please add it below.

| | |
|--|-------|
| More healthcare options | 19.8% |
| More affordable healthcare | 18.2% |
| More affordable health coverage/insurance | 15.4% |
| Better quality healthcare | 11.6% |
| Culturally specific health services (for example, Spanish language services) | 4.8% |
| Health providers serve Medicaid/care | 11.5% |
| Access to good health information | 13.5% |
| Transportation options | 13.7% |
| Disaster/extreme weather preparedness | 10.0% |
| Sidewalks/bike lanes | 21.2% |
| Water quality | 36.7% |
| Internet access | 35.4% |
| Affordable housing | 23.5% |
| Rental assistance programs | 9.5% |
| Protection for renters | 8.6% |
| Disability services | 11.1% |
| Healthy aging/aging in place | 26.2% |
| More childcare options | 8.8% |

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| | |
|---|-------|
| More affordable childcare | 23.6% |
| Support for children with intellectual and developmental disabilities | 12.8% |
| Child development (physical and social/emotional supports) | 10.1% |
| Affordable healthy food | 22.2% |
| More places to buy groceries | 26.5% |
| Household food security (food pantries, Meals on Wheels, SNAP, WIC) | 11.4% |
| More employment opportunities | 19.6% |
| Higher paying employment | 26.3% |
| Career counseling | 6.2% |
| Mental health care | 17.1% |
| Substance use support/treatment (drugs, alcohol, etc.) | 11.1% |
| Parks and recreation | 27.2% |
| Arts and cultural events | 16.4% |
| Healthy family activities | 12.8% |
| Activities for teenagers | 18.7% |
| Youth leadership opportunities | 10.0% |
| Equity and elimination of health disparities | 11.0% |
| Safe neighborhoods | 15.2% |
| Social connection opportunities | 14.3% |
| Civic engagement opportunities | 7.9% |
| Other | 17.2% |

47. Has anyone in your household tested positive for COVID-19 since the beginning of the pandemic?

| | |
|---------------------------|-------|
| Yes, one person | 9.8% |
| Yes, more than one person | 8.1% |
| No | 81.6% |

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48. Did you experience any of the following as a result of the COVID-19 pandemic? (Select all that apply.)

| | |
|---|-------|
| I lost my job, was furloughed, or had my work hours reduced | 12.1% |
| I have felt more stress or anxiety | 42.7% |
| I have worried about my own health | 40.4% |
| I have worried about the health of family or friends | 49.5% |
| I have experienced grief from losing a loved one | 17.4% |
| I have sought help or support but was unable to get it | 1.0% |
| I lost business or income | 8.0% |
| I lost my health insurance | 0.8% |
| I was not able to access health care services | 2.8% |
| I filed for unemployment or financial benefits | 6.6% |
| I have been unable to pay my rent, mortgage, or utility bills | 3.9% |
| I have not had enough money to make ends meet | 6.5% |
| I have exercised less than usual | 25.5% |
| I have drunk or used drugs more than usual | 6.8% |
| Other | 1.8% |
| None of the above | 19.3% |

49. Would you like to get a COVID-19 vaccine?

| | |
|--|-------|
| I already got a vaccine | 88.2% |
| I am planning to get a vaccine | 2.9% |
| I am not interested in getting a COVID -19 vaccine right now | 6.8% |

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50. Do you feel the county responded appropriately to the COVID-19 pandemic?

| | |
|-------------------|-------|
| Yes | 60.5% |
| No | 15.9% |
| Don't know | 19.5% |
| Prefer not to say | 4.1% |

51. What is your age? _____ Years

Mean: 59.3; **Median:** 61.4; **Range:** 22-99 years

52. Which of the following best describes your race, ethnicity, or origin? (Select all that apply.)

| | |
|---|-------|
| White | 75.1% |
| Black/African-American | 13.3% |
| American Indian/Alaska Native | 0.2% |
| Asian | 0.6% |
| Native Hawaiian or other Pacific Islander | 0.1% |
| Hispanic or Latino/a/x | 10.1% |
| Other race | 0.6% |

53. What is your gender?

| | |
|------------------------------------|-------|
| Male (M) | 33.7% |
| Female (F) | 64.7% |
| Non-binary/neither male nor female | 0.8% |
| I am not sure | 0.1% |

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54. Do you identify as LGBTQ+ (lesbian, gay, bisexual, transgender, etc.)?

| | |
|-----|-------|
| Yes | 3.3% |
| No | 95.4% |

55. Which language is most often spoken in your home? (Select all that apply.)

| | |
|---------|-------|
| English | 91.4% |
| Spanish | 6.4% |
| Other | 1.9% |

56. What is your marital status?

| | |
|-------------------|-------|
| Married | 57.9% |
| Widowed | 10.4% |
| Divorced | 13.6% |
| Separated | 3.3% |
| Unmarried partner | 3.0% |
| Never married | 10.1% |

57. What is the total number of years you have lived in Chatham County? *If you have lived in Chatham County for less than one year, please enter 0.*

Mean: 25.6; **Median:** 19.4; **Range:** 0-87 years

| | |
|--------------------|-------|
| Less than 1 year | 0.7% |
| 1-2 years | 4.6% |
| 3-5 years | 12.0% |
| 6-10 years | 12.4% |
| 11-20 years | 23.1% |
| More than 20 years | 47.1% |

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58. What is the highest level of school that you have completed? *If you are currently enrolled, mark the previous grade or highest degree received.*

| | |
|-----------------------------------|-------|
| No schooling completed | 1.7% |
| Less than high school | 1.3% |
| High school diploma or equivalent | 19.9% |
| Some college, no degree | 12.1% |
| Trade certification | 5.0% |
| Associate's degree | 9.3% |
| Bachelor's degree | 23.8% |
| Master's degree | 15.7% |
| Doctorate or Professional degree | 9.1% |

59. What is your employment status? (Select all that apply.)

| | |
|--|-------|
| Employed full-time (40 or more hours per week) | 30.4% |
| Employed part-time (under 40 hours per week) | 11.5% |
| Retired | 38.9% |
| Student | 0.2% |
| Armed forces/military | 0.0% |
| Self-employed | 7.8% |
| Stay at home parent | 4.7% |
| Unable to work due to illness or injury | 4.3% |
| Unemployed for less than one year | 2.3% |
| Unemployed for more than one year | 2.0% |

60. What is the TOTAL income per year of all the members in your household combined? *Total income includes wages, salary, commissions, bonuses, or tips from all jobs; interest, dividends, net rental income, royalty income, or income from estates and trusts; Social Security or Railroad Retirement; Supplemental Security Income (SSI); any public assistance or welfare payments from the state or local welfare office; retirement, survivor, or disability pensions; and any other sources of income received regularly such as Veterans' (VA) payments, unemployment compensation, child support, or alimony.*

| | |
|---------------------------------|-------|
| Under \$20,000 per year | 11.6% |
| \$20,000 to \$34,999 per year | 13.2% |
| \$35,000 to \$49,999 per year | 10.1% |
| \$50,000 to \$74,999 per year | 12.6% |
| \$75,000 to \$99,999 per year | 9.5% |
| \$100,000 to \$149,999 per year | 9.6% |
| \$150,000 to \$199,999 per year | 4.5% |
| \$200,000 or more per year | 5.1% |
| Prefer not to say | 21.0% |

Appendix D: 2021 Chatham County Community Assessment Supplemental Survey (English)



**CHATHAM
HEALTH ALLIANCE**
BUILDING COMMUNITY THROUGH COLLABORATION



2021 Chatham County Community Assessment Supplemental Survey

1. Please tell us whether you “strongly agree”, “agree”, “disagree” or “strongly disagree” with each of the next few statements thinking specifically about your community as you see it.

| | STRONGLY AGREE | AGREE | NEUTRAL | DISAGREE | STRONGLY DISAGREE | PREFER NOT TO SAY |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| A. I FEEL CONNECTED TO OTHERS IN MY COMMUNITY. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. CHATHAM COUNTY IS A GOOD PLACE TO RAISE CHILDREN. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. CHATHAM COUNTY IS A GOOD PLACE TO GROW OLD. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D. THERE ARE HIGH QUALITY K-12 SCHOOLS WHERE I LIVE. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. CHATHAM COUNTY HAS GOOD ECONOMIC OPPORTUNITIES FOR ME. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F. I AM ABLE TO AFFORD HOUSING IN AN AREA OF CHATHAM COUNTY WHERE I WANT TO LIVE. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G. I FEEL CHATHAM COUNTY’S ENVIRONMENT IS HEALTHY (AIR, WATER, ETC.). | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| H. I FEEL SAFE WHERE I LIVE. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I. I CAN ACCESS RESOURCES IN MY PREFERRED LANGUAGE. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | | | | | | | | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <p>J. I FEEL REPRESENTED IN DECISIONS MADE BY CHATHAM COUNTY GOVERNMENT.</p> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>K. I HAVE EXPERIENCED RACIAL TENSION IN CHATHAM COUNTY.</p> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

2. In the past 12 months, have any of the following prevented you or someone in your household from getting the health care (e.g. doctor visit, dental care, eye care, surgery or medical procedure, prescribed medicines, etc.) you needed? (Select all that apply.)

- Could not get through on the telephone
- Could not get an appointment soon enough
- Once getting there, the wait to receive care was too long
- The office was not open convenient days/hours
- Did not have transportation
- It was too expensive
- Did not have health insurance
- Available doctors were not in the insurance network
- The needed service or medication was not covered by insurance
- There was no one who spoke my preferred language and no interpreter available
- Felt ignored, not taken seriously, or disrespected
- Did not know where to go
- Other: Please specify: _____
- I have not experienced any of these issues → skip to Q3
- Prefer not to say → skip to Q3

2a. If yes, which of the following health care providers or facilities did you have trouble accessing? (Select all that apply.)

- Dentist
- General practitioner/Primary care doctor
- Eye care/optometrist/ophthalmologist
- Pharmacy/prescriptions
- Pediatrician
- OB/GYN
- Hospital
- Urgent care center
- Specialist: Please specify: _____
- Nobody in my household had trouble accessing health care providers or facilities
- Prefer not to say

3. Which of the following would you like Chatham County to focus on in order to improve health and quality of life in the community? If there is something you would like to include that is not listed, please add it below.

(CHOOSE THREE.)

Healthcare

- More healthcare options
- More affordable healthcare
- More affordable health coverage/insurance
- Better quality healthcare
- Culturally specific health services (for example, Spanish language services)
- Health providers serve Medicaid/care
- Access to good health information

Infrastructure/Environment

- Transportation options
- Disaster/extreme weather preparedness
- Sidewalks/bike lanes
- Water quality
- Internet access

Housing and social services

- Affordable housing
- Rental assistance programs
- Protection for renters
- Disability services
- Healthy aging/aging in place

Childcare/Education

- More childcare options
- More affordable childcare
- Support for children with intellectual and developmental disabilities
- Child development (physical and social/emotional supports)

Food

- Affordable healthy food
- More places to buy groceries
- Household food security (food pantries, Meals on Wheels, SNAP, WIC)

Employment

- More employment opportunities
- Higher paying employment
- Career counseling

Mental Health and Substance Use

- Mental health care
- Substance use support/treatment (drugs, alcohol, etc.)

Recreation and culture

Appendix D: 2021 Chatham County Community Assessment Supplemental Survey (English)

- Parks and recreation
- Arts and cultural events
- Healthy family activities
- Activities for teenagers
- Youth leadership opportunities

Community

- Equity and elimination of health disparities
- Safe neighborhoods
- Social connection opportunities
- Civic engagement opportunities

Other

- Other: _____
- Other: _____
- Other: _____

- Prefer not to say

DEMOGRAPHICS

We're almost finished! We just need to know a little more about who you are. Just to remind you, all the information you give us will be completely confidential. It will be reported only as a group summary.

4. What is your age? _____ Years

- Prefer not to say

5. Which of the following best describes your race, ethnicity, or origin? (Select all that apply.)

- Asian
- Native Hawaiian or other Pacific Islander
- Black/African-American
- White
- American Indian/Alaska Native
- Hispanic or Latino/a/x
- Other: Please specify: _____
- Prefer not to say

6. What is your gender?

- Male (M)
- Female (F)
- Non-binary/neither male nor female
- I am not sure
- Prefer not to say
- Other gender identity, please describe: _____

7. Do you identify as LGBTQ+ (lesbian, gay, bisexual, transgender, etc.)?

- Yes
- No
- Not sure
- Prefer not to say

8. Which language is most often spoken in your home? (Select all that apply.)

- English
- Spanish
- American Sign Language
- Other: Please specify: _____
- Prefer not to say

9. What is the total number of years you have lived in Chatham County? *If you have lived in Chatham County for less than one year, please enter 0.* _____ Years

- Prefer not to say

10. What is the highest level of school that you have completed? *If you are currently enrolled, mark the previous grade or highest degree received.*

- No schooling completed
- Less than high school
- High school diploma or equivalent
- Some college, no degree
- Trade certification
- Associate's degree (AA, AS, etc)
- Bachelor's degree (BA, BS, etc.)
- Master's degree (MA, MS, Meng, Med, MSW, MBA, etc.)
- Doctorate or Professional degree (MD, PhD, DDS, DVM, EdD, JD, etc.)
- Prefer not to say

11. What is your employment status? (Select all that apply.)

- Employed full-time (40 or more hours per week)
- Employed part-time (under 40 hours per week)
- Retired
- Student
- Armed forces/military
- Self-employed
- Stay at home parent
- Unable to work due to illness or injury
- Unemployed for less than one year
- Unemployed for more than one year
- Prefer not to say

12. What is the TOTAL income per year of all the members in your household combined? *Total income includes wages, salary, commissions, bonuses, or tips from all jobs; interest, dividends, net rental income, royalty income, or income from estates and trusts; Social Security or Railroad Retirement; Supplemental Security Income (SSI); any public assistance or welfare payments from the state or local welfare office; retirement, survivor, or disability pensions; and any other sources of income received regularly such as Veterans' (VA) payments, unemployment compensation, child support, or alimony.*

- Under \$20,000 per year
- \$20,000 to \$34,999 per year
- \$35,000 to \$49,999 per year
- \$50,000 to \$74,999 per year
- \$75,000 to \$99,999 per year
- \$100,000 to \$149,999 per year
- \$150,000 to \$199,999 per year
- \$200,000 or more per year
- Don't know
- Prefer not to say

13. What is your address?

- Prefer not to say

Street

Address: _____

City: _____ **Zip Code:** _____

Appendix E: 2021 Chatham County Community Assessment Supplemental Survey (Spanish)



La Evaluación de la Comunidad de Chatham Encuesta Complementaria

1. Díganos si está “muy de acuerdo”, “de acuerdo”, “en desacuerdo” o “muy en desacuerdo” con cada una de las siguientes afirmaciones, pensando específicamente en su comunidad como la ve usted.

| | MUY DE ACUERDO | DE ACUERDO | NEUTRO | EN DESACUERDO | MUY EN DESACUERDO | PREFERIR NO CONTINUAR |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| A. ME SIENTO CONECTADO CON OTRAS PERSONAS EN MI COMUNIDAD. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. EL CONDADO DE CHATHAM ES UN BUEN LUGAR PARA CRIAR HIJOS. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. EL CONDADO DE CHATHAM ES UN BUEN LUGAR EN EL QUE ENVEJECER. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D. HAY ESCUELAS K-12 DE ALTA CALIDAD EN DONDE VIVO. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. EL CONDADO DE CHATHAM TIENE BUENAS OPORTUNIDADES ECONÓMICAS PARA MÍ. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F. PUEDO PAGAR UNA VIVIENDA EN UN ÁREA DEL CONDADO DE CHATHAM EN LA QUE QUIERO VIVIR. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G. SIENTO QUE EL AMBIENTE DEL CONDADO DE CHATHAM ES SALUDABLE (AIRE, AGUA, ETC.) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| H. ME SIENTO SEGURO DONDE VIVO. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I. PUEDO ACCEDER A RECURSOS EN MI IDIOMA PREFERIDO. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| J. ME SIENTO REPRESENTADO EN LAS DECISIONES QUE TOMA EL GOBIERNO DEL CONDADO DE CHATHAM. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K. HE SUFRIDO TENSIÓN RACIAL EN EL CONDADO DE CHATHAM. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

2. En los últimos 12 meses, ¿impidió alguno de los siguientes problemas que usted o a alguien de su grupo familiar recibieran la atención médica (p. ej., visita al médico, atención dental, atención oftalmológica, cirugía o procedimiento médico, medicamentos recetados, etc.) que necesitaba? (Marque todos los que correspondan).

- No pude comunicarme por teléfono
- No pude obtener una cita a tiempo
- Una vez allí, había demasiada espera para recibir atención
- El consultorio no estaba abierto en días/horarios convenientes
- No tenía transporte
- Era demasiado caro
- No tenía seguro médico
- Los médicos disponibles no estaban en la red del seguro
- El seguro no cubría el servicio o el medicamento necesarios
- No había nadie que hablara mi idioma preferido y no había ningún intérprete disponible
- Sentí que me ignoraban, que no me tomaban en serio o que me faltaban el respeto
- No sabía dónde ir
- Otro: Especifique: _____
- No tuve ninguno de estos problemas → Saltar a la P3
- Prefiero no contestar → Saltar a la P3

2a. Si la respuesta es sí, ¿con cuáles de los siguientes proveedores o centros de atención médica tuvo problemas de acceso? (Marque todos los que correspondan).

- Dentista
- Médico general/médico de atención primaria
- Oculista/optometrista/oftalmólogo
- Farmacia/recetas
- Pediatra
- Obstetra/ginecólogo
- Hospital
- Centro de urgencias
- Especialista: Especifique: _____
- Nadie en mi grupo familiar tuvo problemas para encontrar proveedores o centros médicos
- Prefiero no contestar

3. ¿En cuáles de las siguientes cuestiones le gustaría que el condado de Chatham se centre para mejorar la salud y la calidad de vida en la comunidad? Si hay algo que le gustaría incluir que no esté en la lista, agréguelo abajo.

(ELIJA TRES)

Atención médica

- Más opciones de atención médica
- Atención médica más asequible
- Cobertura/seguro médico más asequible
- Atención médica de mejor calidad
- Servicios médicos específicos para mi cultura (por ejemplo, servicios en español)
- Proveedores médicos que atiendan Medicaid/Medicare
- Acceso a buena información médica

Infraestructura/ambiente

- Opciones de transporte
- Preparación para desastres/condiciones climáticas extremas
- Aceras/carriles para bicicletas
- Calidad del agua
- Acceso a internet

Vivienda y servicios sociales

- Viviendas asequibles
- Programas de asistencia para el alquiler
- Protección para inquilinos
- Servicios por discapacidad
- Envejecimiento saludable/envejecimiento en el hogar

Guarderías/educación

- Más opciones de guardería
- Guardería más asequible
- Apoyo para niños con discapacidades intelectuales y del desarrollo
- Desarrollo infantil (apoyo físico y social/emocional)

Comida

- Comida saludable asequible
- Más lugares para comprar comestibles
- Seguridad alimentaria para los hogares (despensas de comida, Meals on Wheels, SNAP, WIC)

Empleo

- Más oportunidades laborales
- Empleos con paga más alta
- Orientación para el desarrollo profesional

Salud mental y consumo de sustancias

- Atención de salud mental
- Apoyo/tratamiento por el consumo de sustancias (drogas, alcohol, etc.)

Recreación y cultura

- Parques y recreación
- Arte y eventos culturales
- Actividades familiares saludables
- Actividades para adolescentes
- Oportunidades de liderazgo para jóvenes

Comunidad

- Igualdad y eliminación de disparidades en salud
- Barrios seguros
- Oportunidades de conexión social
- Oportunidades de participación cívica

Otro

- Otro: _____
- Otro: _____
- Otro: _____

- Prefiero no contestar

DATOS DEMOGRÁFICOS

¡Ya casi terminamos! Solo necesitamos saber un poco más sobre quién es usted. Solo como recordatorio, toda la información que nos dé será completamente confidencial. Solamente se preparará un resumen grupal.

4. ¿Qué edad tiene? _____ años

- Prefiero no contestar

5. ¿Cuál de las siguientes describe mejor su raza, etnia u origen? (Marque todas las que correspondan).

- Asiático
- Nativo de Hawái o de otras islas del Pacífico
- Negro/afroamericano
- Blanco
- Indio americano/nativo de Alaska
- Hispano o latino
- Otro: Especifique: _____
- Prefiero no contestar

6. ¿Cuál es su género?

- Masculino (M)
- Femenino (F)
- No binario/ni masculino ni femenino
- No estoy seguro
- Prefiero no contestar
- Otra identidad de género, describa: _____

7. ¿Se identifica como LGBTQ+ (lesbiana, gay, bisexual, transgénero, etc.)?

- Sí
- No
- No estoy seguro
- Prefiero no contestar

8. ¿Qué idioma se habla con más frecuencia en su casa? (Marque todos los que correspondan).

- Inglés
- Español
- Lenguaje de señas americano
- Otro: Especifique: _____
- Prefiero no contestar

9. ¿Cuántos años en total ha vivido en el condado de Chatham? Si ha vivido en el condado de Chatham durante menos de un año, escriba 0. _____ años

- Prefiero no contestar

10. ¿Cuál es el nivel de estudios más alto que ha completado? Si está inscrito actualmente, marque el grado anterior o título más alto recibido.

- Ningún nivel educativo completado
- Menos que escuela secundaria
- Diploma de escuela secundaria o equivalente
- Educación superior incompleta, sin título
- Certificación de oficio
- Associate's degree (AA, AS, etc.)
- Bachelor's degree (BA, BS, etc.)
- Master's degree (MA, MS, Meng, Med, MSW, MBA, etc.)
- Doctorado o título de posgrado (MD, PhD, DDS, DVM, EdD, JD, etc.)
- Prefiero no contestar

11. ¿Cuál es su situación laboral? (Marque todo lo que corresponda).

- Empleado a tiempo completo (40 horas o más a la semana)
- Empleado a tiempo parcial (menos de 40 horas a la semana)
- Retirado
- Estudiante
- Fuerzas armadas/militar
- Independiente
- Amo de casa
- No puedo trabajar debido a una enfermedad o lesión
- Desempleado hace menos de un año
- Desempleado hace más de un año
- Prefiero no contestar

12. ¿Cuáles son los ingresos TOTALES al año de todos los miembros de su grupo familiar combinados?
Los ingresos totales incluyen salario, sueldo, comisiones, bonos o propinas de todos los trabajos; intereses, dividendos, ingresos netos por alquileres, ingresos por regalías o ingresos por sucesiones y fideicomisos; beneficios del Seguro Social o del Retiro para Empleados Ferroviarios; Seguridad de Ingreso Suplementario (SSI); cualquier pago de bienestar o asistencia pública de la oficina de bienestar social estatal o local; pensiones por discapacidad, supervivencia o jubilación; y cualquier otra fuente de ingresos que se reciba periódicamente como pagos para Veteranos (VA), compensación por desempleo, manutención infantil o alimentos.

- Menos de \$20,000 al año
- Entre \$20,000 y \$34,999 al año
- Entre \$35,000 y \$49,999 al año
- Entre \$50,000 y \$74,999 al año
- Entre \$75,000 y \$99,999 al año
- Entre \$100,000 y \$149,999 al año
- Entre \$150,000 y \$199,999 al año
- \$200,000 o más al año
- No sé
- Prefiero no contestar

13. ¿Cuál es su dirección?

- Prefiero no contestar

Dirección: _____

Ciudad: _____

Código postal: _____

Appendix F: 2021 Chatham County Community Assessment Supplemental Survey Results

2021 Chatham County Supplemental Survey

This Appendix includes the results of the 2021 Chatham County Supplemental Survey. “Prefer not to say” and “Don’t know” responses were excluded from these calculations if they totaled fewer than 3% of all responses.

1. Please tell us whether you “strongly agree”, “agree”, “disagree” or “strongly disagree” with each of the next few statements thinking specifically about your community as you see it.

| | |
|--|-------|
| A. I feel connected to others in my community. | |
| Strongly Agree | 28.6% |
| Agree | 37.1% |
| Neutral | 21.4% |
| Disagree | 7.1% |
| Strongly Disagree | 4.9% |
| B. Chatham County is a good place to raise children. | |
| Strongly Agree | 34.7% |
| Agree | 41.4% |
| Neutral | 18.5% |
| Disagree | 3.2% |
| Strongly Disagree | 0.9% |
| Prefer not to say | 1.4% |
| C. Chatham County is a good place to grow old. | |
| Strongly Agree | 36.2% |
| Agree | 41.5% |
| Neutral | 16.5% |
| Disagree | 2.7% |
| Strongly Disagree | 2.2% |
| D. There are high quality K-12 schools where I live. | |
| Strongly Agree | 20.3% |
| Agree | 40.1% |
| Neutral | 25.2% |
| Disagree | 6.8% |
| Strongly Disagree | 5.4% |
| Prefer not to say | 2.3% |
| E. Chatham County has good economic opportunities for me. | |
| Strongly Agree | 12.5% |
| Agree | 33.8% |
| Neutral | 27.3% |

Appendix F: 2021 Chatham County Community Assessment Supplemental Survey Results

| | |
|-------------------|-------|
| Disagree | 15.3% |
| Strongly Disagree | 7.9% |
| Prefer not to say | 3.2% |

| | |
|--|-------|
| F. I am able to afford housing in an area of Chatham County where I want to live. | |
| Strongly Agree | 18.2% |
| Agree | 34.1% |
| Neutral | 20.9% |
| Disagree | 14.6% |
| Strongly Disagree | 9.6% |
| G. I feel Chatham County's environment is healthy (air, water, etc.). | |
| Strongly Agree | 15.6% |
| Agree | 35.7% |
| Neutral | 27.2% |
| Disagree | 11.6% |
| Strongly Disagree | 8.5% |
| H. I feel safe where I live. | |
| Strongly Agree | 35.9% |
| Agree | 48.9% |
| Neutral | 11.2% |
| Disagree | 3.1% |
| Strongly Disagree | 0.5% |
| I. I can access resources in my preferred language. | |
| Strongly Agree | 46.9% |
| Agree | 34.7% |
| Neutral | 11.3% |
| Disagree | 4.1% |
| Strongly Disagree | 1.4% |
| J. I feel represented in decisions made by Chatham County government. | |
| Strongly Agree | 11.8% |
| Agree | 25.8% |
| Neutral | 29.0% |
| Disagree | 16.7% |
| Strongly Disagree | 14.5% |
| Prefer not to say | 2.3% |
| K. I have experienced racial tension in Chatham County. | |
| Strongly Agree | 16.4% |
| Agree | 28.8% |
| Neutral | 19.2% |
| Disagree | 15.5% |
| Strongly Disagree | 13.2% |

Appendix F: 2021 Chatham County Community Assessment Supplemental Survey Results

2. In the past 12 months, have any of the following prevented you or someone in your household from getting the health care (e.g. doctor visit, dental care, eye care, surgery or medical procedure, prescribed medicines, etc.) you needed? (Select all that apply.)

| | |
|---|-------|
| Could not get through on the telephone | 13.3% |
| Could not get an appointment soon enough | 22.2% |
| Once getting there, the wait to receive care was too long | 11.5% |
| The office was not open convenient days/hours | 4.7% |
| Did not have transportation | 5.1% |
| It was too expensive | 13.3% |
| Did not have health insurance | 12.8% |
| Available doctors were not in the insurance network | 6.0% |
| The needed service or medication was not covered by insurance | 6.8% |
| There was no one who spoke my preferred language and no interpreter available | 1.3% |
| Felt ignored, not taken seriously, or disrespected | 6.0% |
| Did not know where to go | 3.9% |
| Other | 4.7% |
| I have not experienced any of these issues | 32.9% |
| Prefer not to say | 5.6% |

2a. If yes, which of the following health care providers or facilities did you have trouble accessing? (Select all that apply.)

| | |
|--|-------|
| Dentist | 25.7% |
| General practitioner/Primary care doctor | 47.6% |
| Eye care/optometrist/ophthalmologist | 11.4% |
| Pharmacy/prescriptions | 8.6% |
| Pediatrician | 6.7% |
| OB/GYN | 3.8% |
| Hospital | 15.2% |
| Urgent care center | 11.4% |
| Specialist (specify): | 8.6% |
| Nobody in my household had trouble accessing health care providers or facilities | 5.7% |
| Prefer not to say | 3.8% |

Appendix F: 2021 Chatham County Community Assessment Supplemental Survey Results

3. Which of the following would you like Chatham County to focus on in order to improve health and quality of life in the community? (Choose three.) If there is something you would like to include that is not listed, please add it below.

| | |
|--|-------|
| More healthcare options | 18.8% |
| More affordable healthcare | 26.5% |
| More affordable health coverage/insurance | 20.5% |
| Better quality healthcare | 13.3% |
| Culturally specific health services (for example, Spanish language services) | 6.8% |
| Health providers serve Medicaid/care | 10.7% |
| Access to good health information | 22.7% |
| Transportation options | 25.2% |
| Disaster/extreme weather preparedness | 10.3% |
| Sidewalks/bike lanes | 15.8% |
| Water quality | 36.3% |
| Internet access | 41.5% |
| Affordable housing | 38.0% |
| Rental assistance programs | 15.4% |
| Protection for renters | 9.4% |
| Disability services | 18.0% |
| Healthy aging/aging in place | 23.9% |
| More childcare options | 14.5% |
| More affordable childcare | 32.5% |
| Support for children with intellectual and developmental disabilities | 17.5% |
| Child development (physical and social/emotional supports) | 16.2% |
| Affordable healthy food | 28.2% |
| More places to buy groceries | 26.9% |
| Household food security (food pantries, Meals on Wheels, SNAP, WIC) | 18.8% |
| More employment opportunities | 21.4% |
| Higher paying employment | 35.9% |
| Career counseling | 9.4% |
| Mental health care | 29.1% |
| Substance use support/treatment (drugs, alcohol, etc.) | 24.8% |
| Parks and recreation | 25.6% |
| Arts and cultural events | 13.3% |
| Healthy family activities | 20.1% |
| Activities for teenagers | 22.2% |
| Youth leadership opportunities | 20.1% |
| Equity and elimination of health disparities | 14.5% |
| Safe neighborhoods | 22.7% |
| Social connection opportunities | 15.0% |
| Civic engagement opportunities | 10.3% |
| Other (specify): | 11.5% |

4. What is your age? _____ Years

Mean: 54.0; **Median:** 55.5; **Range:** 18-90 years

5. Which of the following best describes your race, ethnicity, or origin? (Select all that apply.)

| | |
|---|-------|
| White | 44.2% |
| Black/African-American | 27.4% |
| American Indian/Alaska Native | 2.6% |
| Asian | 0.0% |
| Native Hawaiian or other Pacific Islander | 0.0% |
| Hispanic or Latino/a/x | 25.3% |
| Other race | 0.5% |

6. What is your gender?

| | |
|------------------------------------|-------|
| Male (M) | 24.6% |
| Female (F) | 71.5% |
| Non-binary/neither male nor female | 0.5% |
| I am not sure | 0.0% |
| Other gender identity | 0.5% |

7. Do you identify as LGBTQ+ (lesbian, gay, bisexual, transgender, etc.)?

| | |
|-------------------|-------|
| Yes | 4.7% |
| No | 84.8% |
| Not sure | 1.6% |
| Prefer not to say | 8.9% |

8. Which language is most often spoken in your home? (Select all that apply.)

| | |
|---------|-------|
| English | 75.2% |
| Spanish | 20.4% |
| Other | 2.4% |

9. What is the total number of years you have lived in Chatham County? *If you have lived in Chatham County for less than one year, please enter 0.*

Mean: 27.5; **Median:** 21.2; **Range:** 0-90 years

| | |
|--------------------|-------|
| Less than 1 year | 1.8% |
| 1-2 years | 4.7% |
| 3-5 years | 14.2% |
| 6-10 years | 7.1% |
| 11-20 years | 19.5% |
| More than 20 years | 52.7% |

10. What is the highest level of school that you have completed? *If you are currently enrolled, mark the previous grade or highest degree received.*

| | |
|-----------------------------------|-------|
| Less than high school | 5.6% |
| High school diploma or equivalent | 25.8% |
| Some college, no degree | 21.7% |
| Trade certification | 5.1% |
| Associate's degree | 3.0% |
| Bachelor's degree | 13.6% |
| Master's degree | 15.2% |
| Doctorate or Professional degree | 3.5% |
| Prefer not to say | 6.6% |

11. What is your employment status? (Select all that apply.)

| | |
|--|-------|
| Employed full-time (40 or more hours per week) | 30.3% |
| Employed part-time (under 40 hours per week) | 1.3% |
| Retired | 9.4% |
| Student | 23.9% |
| Armed forces/military | 1.3% |
| Self-employed | 0.4% |
| Stay at home parent | 1.7% |
| Unable to work due to illness or injury | 3.9% |
| Unemployed for less than one year | 6.4% |
| Unemployed for more than one year | 3.9% |
| Prefer not to say | 7.3% |

12. What is the TOTAL income per year of all the members in your household combined? *Total income includes wages, salary, commissions, bonuses, or tips from all jobs; interest, dividends, net rental income, royalty income, or income from estates and trusts; Social Security or Railroad Retirement; Supplemental Security Income (SSI); any public assistance or welfare payments from the state or local welfare office; retirement, survivor, or disability pensions; and any other sources of income received regularly such as Veterans' (VA) payments, unemployment compensation, child support, or alimony.*

| | |
|---------------------------------|-------|
| Under \$20,000 per year | 21.6% |
| \$20,000 to \$34,999 per year | 16.6% |
| \$35,000 to \$49,999 per year | 12.6% |
| \$50,000 to \$74,999 per year | 7.5% |
| \$75,000 to \$99,999 per year | 3.5% |
| \$100,000 to \$149,999 per year | 5.0% |
| \$150,000 to \$199,999 per year | 5.0% |
| \$200,000 or more per year | 3.0% |
| Prefer not to say | 23.1% |

Appendix G: Chatham Talks: Community Story Circle Facilitation Guidance

Chatham Talks: Community Story Circle - Guidance

WELCOME

TIME: 5 minutes

Welcome and thank you, we are so excited to have you join us for a community story circle. This Story Circle is 1 of 4 that will happen throughout the county between now and December 2.

Our goals for the Story Circles are to create a space that is brave, honest, and open. Our primary intention is to open a space that honors the stories of Chatham community members and builds relationships and community between everyone here and our community organizations. We want to learn from you and lift up your collective stories about your life and experiences here; to co-create a shared story that will unleash both individual and collective power and spark lasting change in the systems and institutions in our community.

So, once again I welcome you. As an expert in your life and the experience of living in Chatham.

Housekeeping

Before we settle in. Please help yourself to food. Bathrooms are over there. We will need to wear masks while we are inside. You may remove them to eat/drink. We have tried to space us out as much as we can in the room as well. (Depending on the number of people, eating may be delayed to prevent a more crowded space from being mask-less)

VIRTUALLY – We invite you to get something that makes you feel cozy while at home, grab your favorite blanket, pillow, or slippers and join us in making this a place where you can share.

SETTLING IN TO THE SPACE

TIME: 20 minutes

Centering Exercise (5 minutes)

Let's start our circle with a quick centering exercise so that we can let go of the day so far and settle ourselves into this moment.

Lead Participants in Deep Breathing (10 Deep Breaths) or
Lead Participants in Grounding (Ask them to place feet flat on the ground, envision negative energy as red and imagine red light flowing out to the feet)

Deep Introductions (10 minutes)

Great! How was that? All right, now let's get to know each other. We like to start with deep introductions, this means going a little further than just your name and your job title.

→ **Your name,**

Chatham Talks: Community Story Circle - Guidance

- **Choose a couple other introduction prompts that invite people to share a bit about who they are or what they care about**

- Examples include:

- in 10 words or less complete the following statements, the land I come from is..., my people are..
- I feel most myself when... (2nd Story Circle Prompt)

Group Norms For The Story Circle and Our Time Together (3 minutes)

- Confidentiality: The Vegas Rule – What happens in this circle, stays in the circle.
- Active Listening – This means we are listening to take in and not just to respond.
- Hold Space – We honor your story, we are here to give space for your experience
- Be open to the process, the stories, the experience
- Permission to cry, to engage with your emotions and to take care of yourself – Get up if you need to, step out if you need to, take a break if you need to.

All right, now that we all know each other. We ready for a Story Circle?

INTRODUCTION TO THE STORY CIRCLE

TIME: 5 minutes

What is a Story Circle? (1 minute)

- The circle equalizes – each story is respected, your silence is respected, your time is yours
- It is a democratic process everyone gets the same time to share

What's a Story? (1 minute)

- A personal experience, something that really happened to you. A true story from your life.
- Example: A story is not “Well, what I think about immigration is ...”
- A story is: “What happened to me the last time I crossed the border...” That’s a story.

Structure and Guidelines (3 minutes)

- We will split into groups of 3-4.
- When in your groups, you need a volunteer timekeeper and someone who is willing to share themes of the conversation with the larger group when we come back together.

Chatham Talks: Community Story Circle - Guidance

- Each person will get up to 3 minutes for their story. You don't have to fill 3 minutes (silence is ok -it starts when it starts, and it's over when it's over)
- The timekeeper will indicate when you have one minute left, and will show you the clock when your 3 minutes is up; please wrap up your thought/sentence at 3 minutes.
- The first person to share will then pass the baton to the left or right. You can pass on the first go-around if you're not ready; the facilitator will come back to you after everyone else has told their story.
- No cross-talk during the Story Circle; you will have an opportunity to make connections after everyone has shared a story.
- It is ok to be in the moment, to respond to what is happening in the circle. The prompt is like a gentle cloud floating over the circle – it might rain down into your story, it might not. If what's happening in the circle seems more important in the moment, go with that.
- Don't think about it too much – If you spend all your time worrying about what you're going to say, you're not really listening. Be fully present. Trust that you will have a story when the circle comes around to you.
- You choose which story you want to tell. Check-in with yourself, decide how deep you want to go. There are some stories you may not feel ready to share, and that's ok. Choose what feels right today.
- After everyone in the circle has had their time, you will be giving 5 minutes for cross-talk and reflecting on the themes, acknowledging the feelings and emotions that emerged during the circle

THE STORY CIRCLE

TIME: 40 minutes

Today's Prompt (20 minutes)

Use the prompt chosen for the story circle

Reflections (20 minutes)

- What similarities did you all experience within the group?
- What differences did you all observe?
- What feelings surrounded the stories?
- Individual check-in
 - Where did you have to stretch to relate to these themes/stories?

Chatham Talks: Community Story Circle - Guidance

- Where did you see yourself in these themes/stories?
- Any other ideas/thoughts provoked by this experience that you would like to lift up and share for future reflection and action?

Building Community

TIME: 20 minutes

Coming Back to the Present (5 minutes)

Want to acknowledge that these stories can bring up heavy memories, good/bad/beautiful/ugly. We would like to take a minute to acknowledge those feelings, invite you all back to the present moment, with the hope that you are leaving this space feeling supported, connected, and strengthened.

So as we did at the beginning, we invite you to take 10 deep purposeful breaths 5 for letting go and 5 for letting in whatever it is you need to let in as you leave this space.

If you would like to share anything that has come up for you, we are here to listen.

Looking Ahead Together (15 minutes)

Is there anything that feels unfinished here today? (2) Is there any immediate need for information or connection? (3) How can we support you and others to return to the next Story Circles?

Final Housekeeping (5 minutes)

| | | |
|-----------------------------|---------------------|--------------------------------|
| Thursday, October 14, 2021 | 6:00 PM – 8:00 PM | Pittsboro and Siler City |
| Thursday, October 28, 2021 | 6:00 PM – 8:00 PM | Goldston and Northeast Chatham |
| Saturday, November 13, 2021 | 10:00 AM – 12:00 PM | Pittsboro and Siler City |
| Thursday, December 2, 2021 | 6:00 PM – 8:00 PM | Goldston and Northeast Chatham |

- If extra food is available, please take what you'd like.
- Thank you for the honor of your time, we'll see you again soon!

Appendix H: Chatham Health Alliance Prioritization Presentation



CHATHAM
HEALTH ALLIANCE
BUILDING COMMUNITY THROUGH COLLABORATION

WELCOME!/BIENVENIDO

Chatham Health Alliance Prioritization Meeting

Reunión de priorización de Chatham Health Alliance

Tuesday, May 3rd

Martes, 3 de mayo

Prioritization Meeting Agenda Agenda de la reunión de priorización

- Presentation about the Chatham Health Alliance, Community Health Assessment, and Prioritization Process
- Break
- Presentation on Topic Areas and Data
- Small Group Discussion and Topic Selection
- Large Group Share Out
- Presentación sobre Chatham Health Alliance, Evaluación de la salud de la comunidad y proceso de priorización
- Receso
- Presentación sobre áreas temáticas y datos
- Debate en grupos pequeños y elección de temas
- Puesta en común en grupo grande

What is the Chatham Health Alliance? ¿Qué es Chatham Health Alliance?

Mission/Misión

To bring organizations and residents together to work on issues affecting health in Chatham County, with a focus on the health priorities identified in the Community Health Assessment.

Acercar a las organizaciones y a los residentes para trabajar en los problemas que afectan a la salud en el condado de Chatham, centrándonos en las prioridades de salud que se identifiquen en la Evaluación de la salud de la comunidad.

Vision/Visión

Our vision is an active, thriving community for all- a Chatham where residents of all races, religions, ethnicities, sexual orientations, and/or gender identities achieve optimal health.

Nuestra visión es la de una comunidad activa y próspera para todos en Chatham, en la que los residentes de cualquier raza, religión, etnia, orientación sexual o identidad de género alcancen una salud óptima.

What is the Chatham Health Alliance? ¿Qué es Chatham Health Alliance?

A membership led organization.

Somos una organización dirigida por miembros.

Members include a wide range of Chatham County agencies and Community Members.

Los miembros incluyen una amplia gama de agencias del condado de Chatham y miembros de la comunidad.

Work on the Health Priorities identified through the Prioritization Process every 3 years.

Las prioridades de salud se identifican mediante el proceso de priorización cada tres años.

Current Health Priorities are Access to Comprehensive Health Services, Equity, Healthy Eating & Active Living, and Economic Stability & Resilience.

Las prioridades de salud actuales son el acceso a servicios de salud integrales, la igualdad, la alimentación saludable y la vida activa, y la estabilidad económica y la resiliencia.

Chatham Health Alliance Health Priorities & Successes Prioridades de salud y logros de Chatham Health Alliance

The Access Subcommittee focuses on strategies related to equitable accessibility of physical, mental, and behavioral health services.

El Subcomité de Acceso se centra en las estrategias relacionadas con la igualdad en el acceso a los servicios de salud física, mental y conductual.

Successes:

- Planning pilot program for referral program to community based resources
- The EMBRACe Project
- Launched a Chatham County event calendar to track in real-time events, trainings, and important news for Chatham County

Logros:

- Planificación de un programa piloto para la remisión a recursos basados en la comunidad.
- Proyecto EMBRACe.
- Lanzamiento de un calendario de eventos del condado de Chatham para seguir en tiempo real los eventos, las capacitaciones y las noticias importantes del condado.

Chatham Health Alliance Health Priorities & Successes Prioridades de salud y logros de Chatham Health Alliance

The Equity Subcommittee is a standing subcommittee of the Chatham Health Alliance. The Equity Subcommittee helps to grow and promote equity internally in the Alliance, in Alliance programs, and publications through review, training, and member engagement.

El Subcomité de Igualdad es un subcomité permanente de Chatham Health Alliance. El Subcomité de Igualdad ayuda a incrementar y promover la igualdad internamente en Chatham Health Alliance, en sus programas y en las publicaciones por medio de la revisión, la capacitación y la participación de los miembros.

Successes:

- Created a community engagement plan for the Community Assessment
- Developed and launched a demographic survey for the Chatham Health Alliance membership
- Developing a plan to make the Alliance more accessible

Logros:

- Creación de un plan de participación comunitaria para la Evaluación de la comunidad.
- Desarrollo y lanzamiento de una encuesta demográfica para los miembros de Chatham Health Alliance.
- Creación de un plan para hacer que Chatham Health Alliance sea más accesible.

Chatham Health Alliance Health Priorities & Successes Prioridades de salud y logros de Chatham Health Alliance

The H.E.A.L. Subcommittee focuses on strategies related to physical activity and nutrition.

El Subcomité de H.E.A.L. se centra en estrategias relacionadas con la actividad física y la nutrición.

Successes:

Logros:

- Began steps to launch SNAP/EBT at the Pittsboro Farmers Market
- Implemented the Track Trails program at Southwest Park

- Primeros pasos para lanzar el SNAP/la EBT en el mercado de agricultores de Pittsboro.
- Implementación del programa Track Trails en Southwest Park.

Chatham Health Alliance Health Priorities & Successes Prioridades de salud y logros de Chatham Health Alliance

The Resilience Subcommittee focuses on social determinants of health with an emphasis on strategies related to Education, Employment, and Neighborhood & Built Environment.

El Subcomité de Resiliencia se centra en los factores determinantes sociales de la salud, haciendo énfasis en las estrategias relacionadas con la educación, el empleo, el vecindario y el entorno urbano.

Successes:

Logros:

- Helped launch and evaluate the Chatham Resource Hub
- Created a Chatham Youth Advisory Council, Youth Voices of Chatham
- Developed a tracking and reporting system for workforce development trainings and job opportunities

- Colaboración para el lanzamiento y la evaluación del Centro de Recursos de Chatham.
- Creación de un consejo asesor de jóvenes de Chatham: Youth Voices of Chatham.
- Despliegue de un sistema de seguimiento y presentación de informes para capacitaciones de desarrollo de la fuerza laboral y oportunidades de trabajo.

Community Health Assessment Evaluación de la salud de la comunidad

What is a Community Health Assessment?
¿Qué es una Evaluación de la salud de la comunidad?

A community health assessment, also known as community health needs assessment, refers to a state, tribal, local, or territorial health assessment that identifies key health needs and issues through systematic, comprehensive data collection and analysis.

Una Evaluación de la salud de la comunidad, también conocida como evaluación de las necesidades de salud de la comunidad, se refiere a una evaluación de la salud estatal, tribal, local o territorial que identifica los requerimientos y los problemas de salud clave mediante la recopilación y el análisis de datos de manera sistemática e integral.

The Community Health Assessment in Chatham County
Evaluación de la salud de la comunidad en el condado de Chatham

In Chatham County the Chatham Health Alliance, Chatham County Public Health Department and Chatham Hospital partner on the Assessment every 3 years. Our Assessment process includes the Cohort Survey, Supplemental Survey, and Qualitative Data Collection

En el condado de Chatham, Chatham Health Alliance, el Departamento de Salud Pública del condado de Chatham y el Chatham Hospital colaboran en la evaluación cada tres años. Nuestro proceso de evaluación incluye la Encuesta de cohorte, la Encuesta complementaria y la Recopilación de datos cualitativos.

Cohort Survey Methodology Metodología de la Encuesta de cohorte

What is a Cohort Style Survey?

- Residents are randomly selected in a way that statistically represents the entire (adult) population
- Random selection of addresses based on income and race/ethnicity makeup of census area

Who was invited to be in the Cohort?

- Existing Cohort from 2018: 244 Households
- New Cohort Added: 302 Households
- Expanded Survey Recipients: 1314 Households

Why Did We Expand the Cohort?

- To replace cohort households that dropped out
- To get enough surveys to disaggregate data by race/ethnicity, age, gender, etc.
- To make up for not being able to go door-to-door to collect surveys

¿Qué es una Encuesta de tipo cohorte?

- Los residentes se eligen al azar de manera que representen estadísticamente a toda la población (adulta).
- La elección de domicilios al azar se hace según el ingreso y la composición racial/étnica de las áreas censales.

¿A quién se invitó a formar parte de la cohorte?

- Cohorte existente de 2018: 244 viviendas
- Nueva cohorte agregada: 302 viviendas
- Destinatarios de la encuesta ampliada: 1314 viviendas

¿Por qué ampliamos la cohorte?

- Para reemplazar las viviendas de la cohorte que abandonaron la encuesta.
- Para obtener suficientes encuestas que permitan desglosar los datos por raza/etnia, edad, género, etc.
- Para compensar la imposibilidad de ir de puerta a puerta para recoger las encuestas.

Survey Responses Respuestas a la encuesta

Cohort Survey:
Encuesta de cohorte:

| Response Type/Tipo de respuesta | Responses/Respuestas |
|----------------------------------|----------------------|
| Drop-off/Entrega | 4 |
| Mail/Correo | 239 |
| Online/En línea | 146 |
| Phone/Teléfono | 5 |
| Grand Total/Total general | 394 |

Supplemental Survey:

~200 responses gathered through partners, including:

- CORA
- Chatham Hospital
- Resource Hubs
- Direct Outreach/Canvassing
- Story Circles

Encuesta complementaria:

Aproximadamente, 200 respuestas obtenidas por los colaboradores, incluso:

- CORA
- Chatham Hospital
- Centros de Recursos
- Alcances directos/sondeos
- Círculo de historias

Supplemental and Qualitative Data Collection Recopilación de datos complementarios y cualitativos

Supplemental Survey

Available for anyone in Chatham County to take

Consisted of 4 questions that also appeared in the cohort survey

Used to broaden reach of survey participation, resulting in responses from overall younger and more racial/ethnically diverse group

Qualitative Data

Qualitative data is descriptive data that is often expressed as a narrative as opposed to in numerical form.

Story Circle allow participants to tell their own stories and self-define themes from their conversations

Story Circles—several sessions held throughout the county, attendance boosted by collaboration with specific groups, particularly churches

Encuesta complementaria

Disponible para cualquier persona del condado de Chatham.

Constaba de cuatro preguntas que también aparecían en la Encuesta de cohorte.

Se utilizó para ampliar el alcance de la participación en la encuesta, lo que dio lugar a respuestas de un grupo más joven y de mayor diversidad racial/étnica.

Datos cualitativos

Los datos cualitativos son datos descriptivos que suelen expresarse como una narración en lugar de hacerlo de forma numérica.

Los Círculos de historias permiten que los participantes cuenten sus propias historias y autodefinan los temas a partir de sus conversaciones.

Círculos de historias: se celebraron varias sesiones en todo el condado, con una mayor asistencia gracias a la colaboración de grupos específicos, especialmente las iglesias.

Chatham Health Alliance Prioritization Priorización de Chatham Health Alliance

What is Prioritization?

Prioritization is a process of using qualitative and quantitative data from the Assessment process to identify the top health priorities that the Alliance will focus on over the next 3 years.

What is the Process?

- Survey respondents identify their top 3 health topic priorities
- Prioritization Task Force Forms
- From those top choices, 10 topics are identified
- Alliance members and community members meet to look at the data of the top 10 topics
- Topics are narrowed down through discussion and voting

¿Qué es la priorización?

La priorización es un proceso que utiliza datos cualitativos y cuantitativos del proceso de evaluación para identificar las prioridades de salud más importantes en las que Chatham Health Alliance se centrará durante los próximos tres años.

¿En qué consiste el proceso?

- Los encuestados identifican sus tres prioridades más importantes en materia de salud.
- Se completan los formularios del grupo de trabajo de priorización.
- A partir de esas opciones más importantes, se identifican diez temas.
- Los miembros de Chatham Health Alliance y los de la comunidad se reúnen para analizar los datos de los diez temas más importantes.
- Los temas se van acotando mediante el debate y la votación.

Prioritization Task Force Grupo de trabajo de priorización

Thank you to everyone who participated in the Prioritization Task Force!
Gracias a todos los que participaron en el grupo de trabajo de priorización.

Member Agencies represented on the task force:
Agencias miembros representadas en el grupo de trabajo:

Chatham County Public Health Department

CORA Food Pantry

Partnership for Children

NC Tracs Institute

CORE

Chatham County Cooperative Extension

KidSCOpe

2022 Prioritization Proposal Propuesta de priorización 2022

"The current Alliance subcommittees/health priorities will stay as they are. Once the data is analyzed and reviewed, if a new subcommittee/health priority is needed, one can be created. This decision is only for this prioritization year, and not binding for future Alliance prioritization."

"Los subcomités de Chatham Health Alliance y las prioridades de salud actuales permanecerán tal como están. Una vez que se analicen y revisen los datos, podrá establecerse un subcomité o una prioridad de salud nuevos de ser necesario. Esta decisión es solo para este año de la priorización, y no es vinculante para la priorización de Chatham Health Alliance en el futuro".

What is Prioritization Used For? ¿Para qué se utiliza la priorización?

Chatham Health Alliance Strategic Planning:

- Alliance members use the topics prioritized to develop action plans
- These action plans outline where Alliance member work and Alliance resources will be focused for the next 3 years

CCPHD Community Health Improvement Plan

- A plan developed to address the topic areas that are prioritized based on the Assessment
- Required by the state for Public Health Department Accreditation

Planificación estratégica de Chatham Health Alliance:

- Los miembros de Chatham Health Alliance utilizan los temas de priorización para desarrollar planes de acción.
- Estos planes de acción guían el trabajo y los recursos de Chatham Health Alliance para los próximos tres años.

Plan del CCPHD para Mejorar la Salud de la Comunidad

- Plan desarrollado para tratar las áreas temáticas que se priorizan en función de la evaluación.
- La Acreditación de salud pública es un requisito del estado.

**BREAK
RECESO**

10:00

**Data Review
Revisión de datos**

Which of the following would you like Chatham County to focus on in order to improve health and quality of life in the community?

¿En cuáles de las siguientes cuestiones le gustaría que el condado de Chatham se centre para mejorar la salud y la calidad de vida en la comunidad?

Data Review Revisión de datos

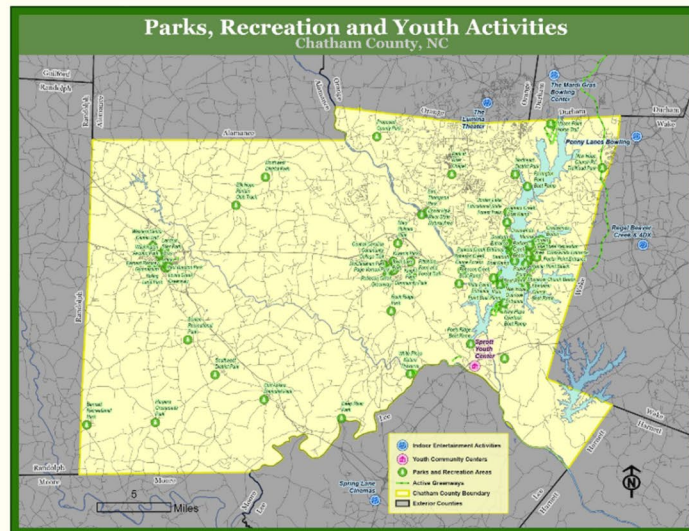
Top 10 Topic Areas for Review:

- Activities for Youth
- Childcare
- Built Environment
- Employment
- Healthcare Access
- Healthy Aging
- Healthy Food Systems
- Mental Health
- Substance Use Support/Treatment
- Transportation

Las diez áreas temáticas más importantes para revisión:

- Actividades para los jóvenes
- Cuidado infantil
- Entorno urbano
- Empleo
- Acceso a la atención médica
- Envejecimiento saludable
- Sistemas de alimentación saludable
- Salud mental
- Apoyo y tratamiento para el consumo de sustancias
- Transporte

Data Review/Revisión de datos Activities for Youth/Actividades para los jóvenes

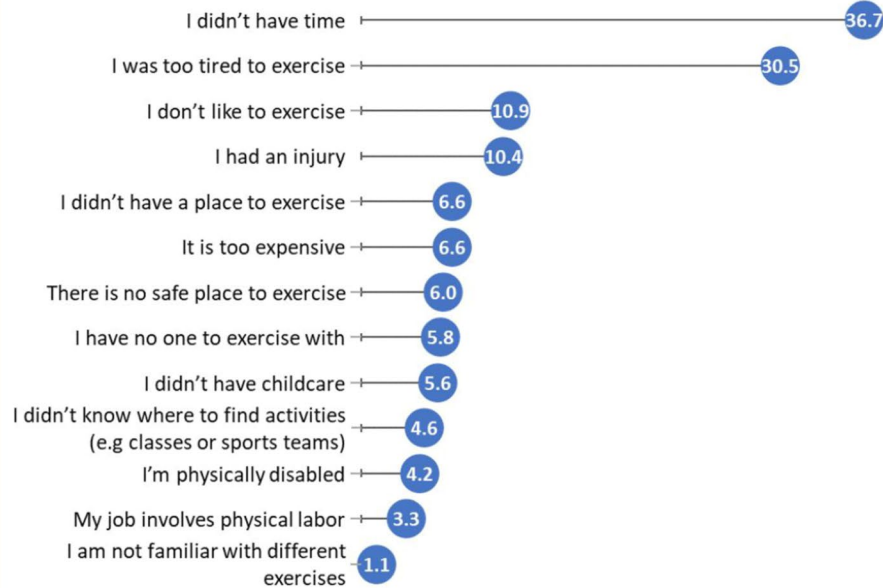


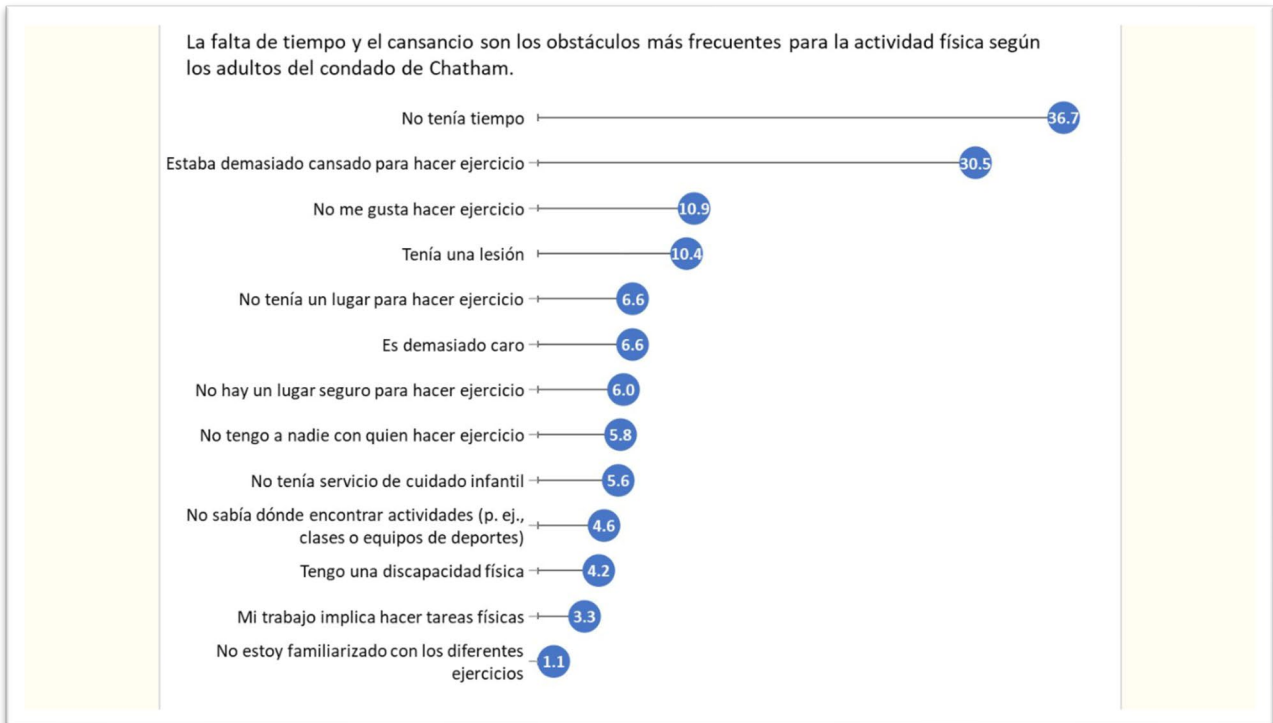
[Youth Activities Map.pdf](#)

Data Review/Revisión de datos Built Environment/Entorno urbano



Not having enough time and being too tired are the most common barriers to physical activity for Chatham County adults.





CCCS Equity Analyses/Análisis de Equidad de CCCS

- Hispanic/Latinx adults were more likely to report barriers to physical activity than the overall population, in particular not having time, not having childcare, and not having a safe place to exercise.
- Los adultos hispanos/latinx tenían más probabilidades de reportar barreras para la actividad física que la población en general, en particular el no tener el tiempo, no tener cuidado infantil, y el no tener un lugar seguro para hacer ejercicio.

Data Review/Revisión de datos Childcare/Cuidado infantil



Childcare/Cuidado infantil

1 in 11

Chatham households use some kind of childcare
Los hogares de Chatham usan algún tipo de cuidado infantil

SOURCE/FUENTE: CCCS, 2021

\$790

Average cost of childcare in NC; 17.8% of median family income for one child
El costo promedio de cuidado infantil en Carolina del Norte; El 17.8% del promedio del ingreso familiar

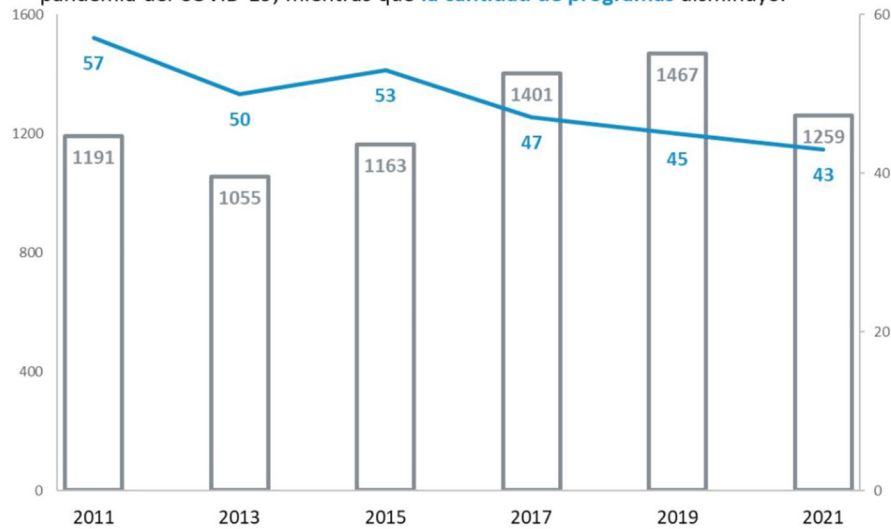
Source/Fuente: Economic Policy Institute

\$11.93/hour/hora

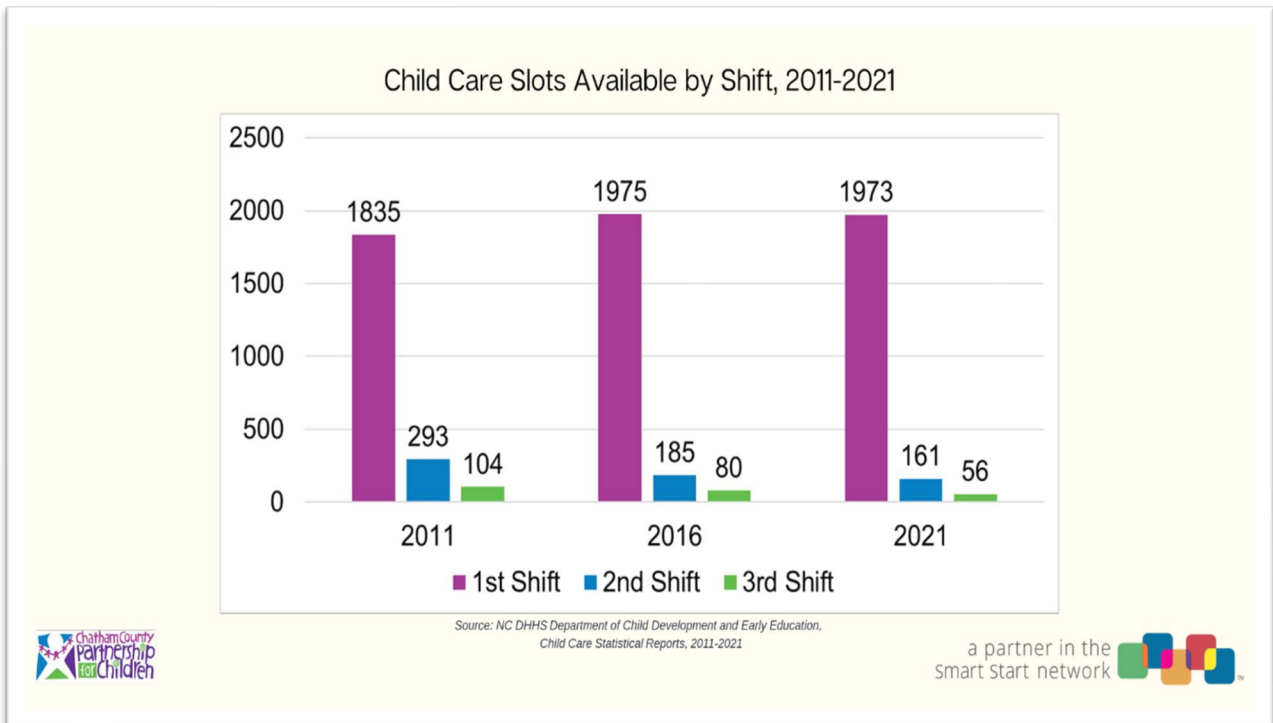
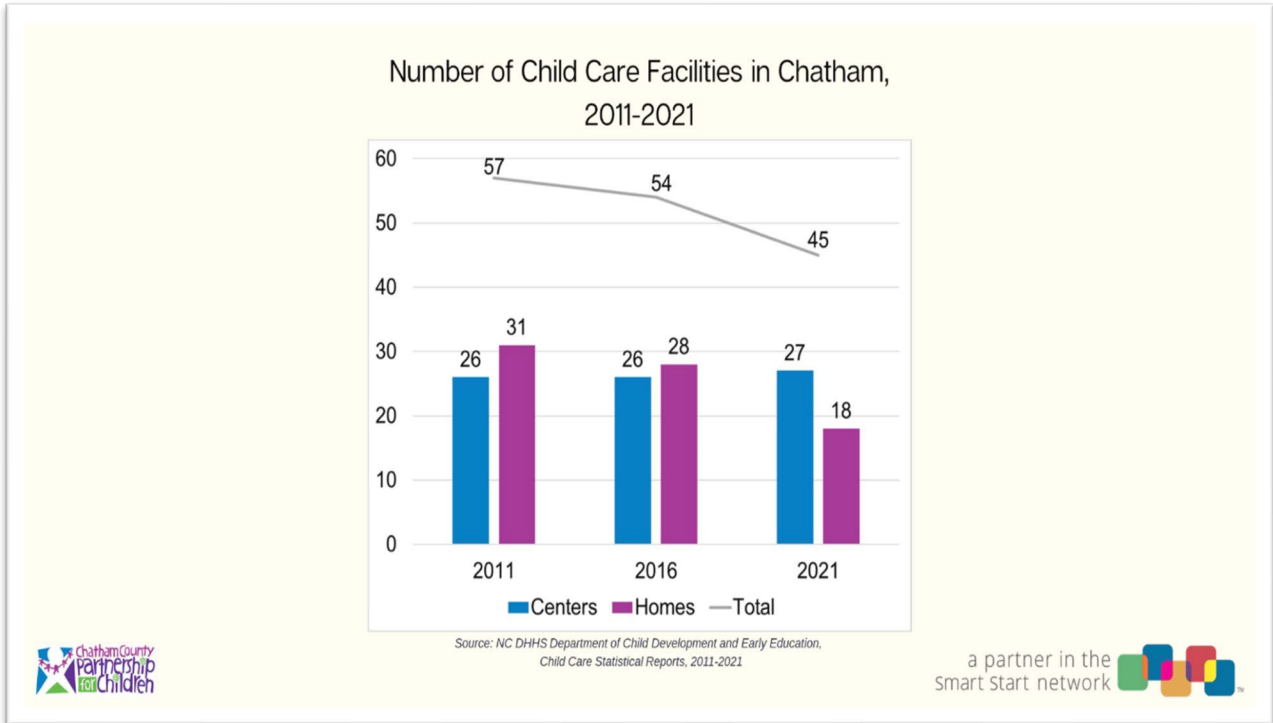
Average pay of NC childcare staffer, \$24,820 a year

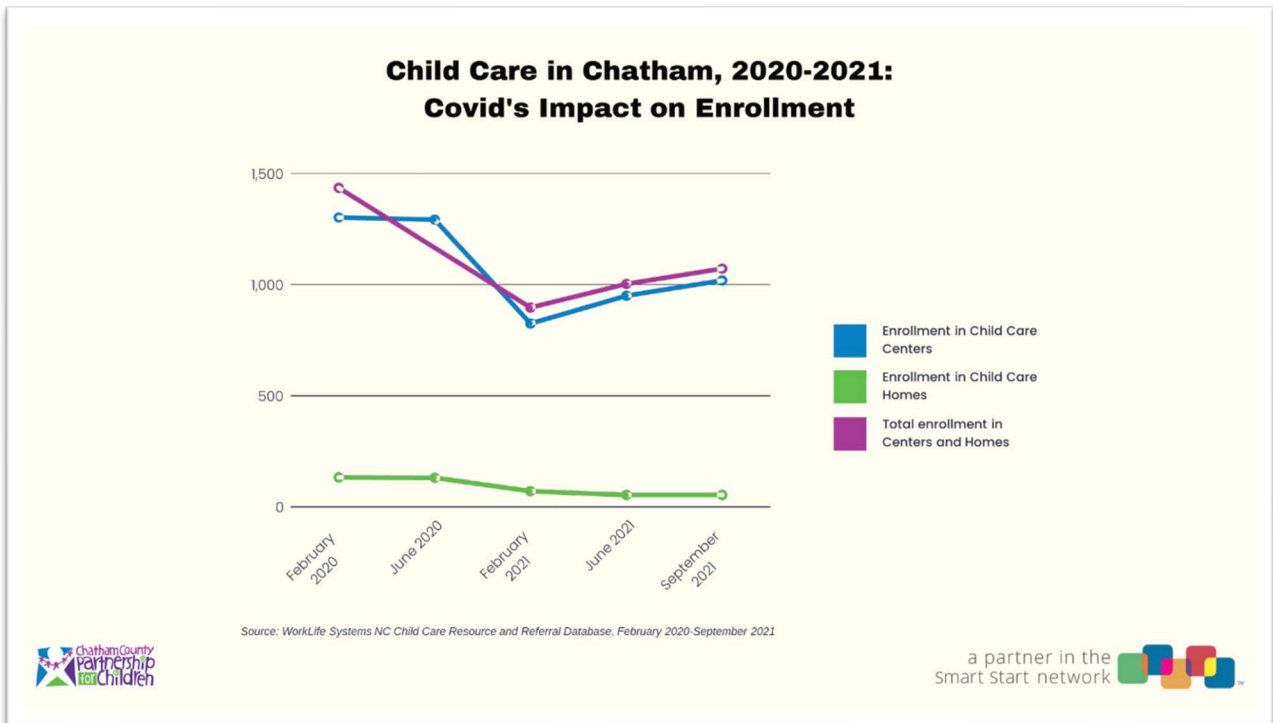
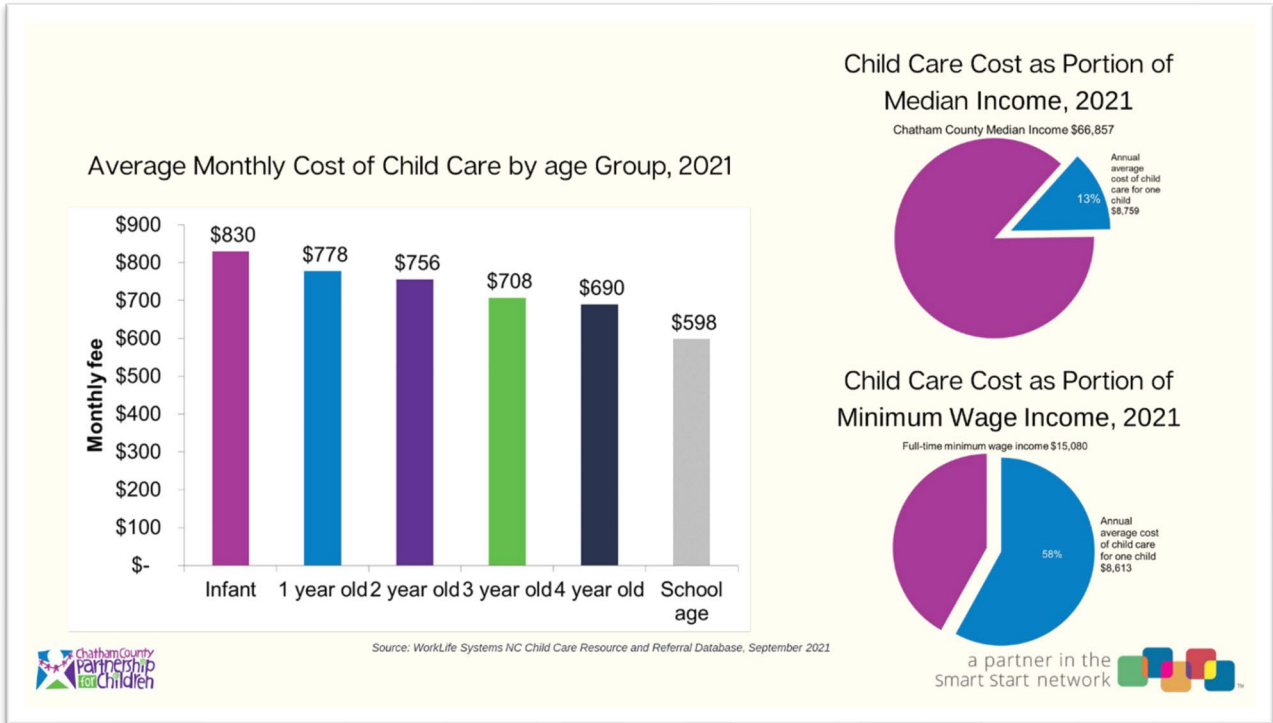
Salario promedio del personal de cuidado infantil de Carolina del Norte, \$24,820 al año
Source/Fuente: Bureau of Labor Statistics

The number of children enrolled in childcare programs increased in Chatham County in the past ten years, while the number of programs decreased.
La cantidad de niños inscritos en programas de cuidado infantil aumentó en el condado de Chatham en los últimos diez años, especialmente antes de la pandemia del COVID-19, mientras que la cantidad de programas disminuyó.



Appendix H: Chatham Health Alliance Prioritization Presentation



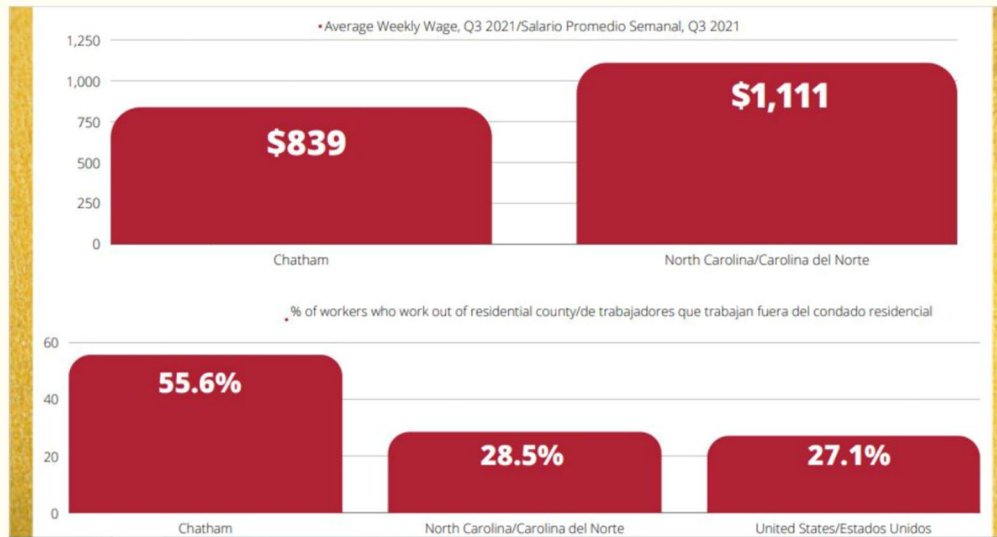


Data Review/Revisión de datos Employment/Empleo



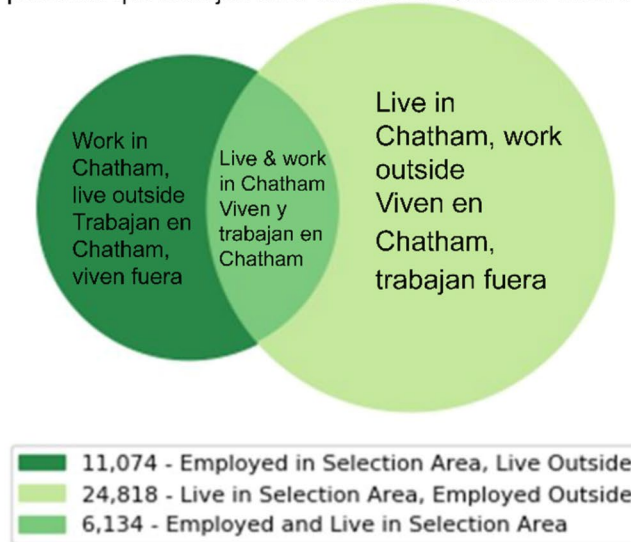
| | |
|---|--|
| 40% of CCCS respondents reported being retired | 40% de los encuestados de CCCS informaron estar jubilados |
| Among the remaining respondents: | Entre los encuestados restantes: |
| 84.3% reported some form of employment | 84.3% reportaron algún tipo de empleo |
| 75% of employed said they work full-time | 75% de los empleados dijeron que trabajan tiempo completo |

SOURCE/FUENTE: CCCS, 2021



Appendix H: Chatham Health Alliance Prioritization Presentation

Most Chatham County workers are employed outside the county and most people employed in Chatham County live in another county.
 La mayoría de los trabajadores del condado de Chatham tienen empleos fuera del condado, y la mayoría de las personas que trabajan en el condado de Chatham viven en otro condado.

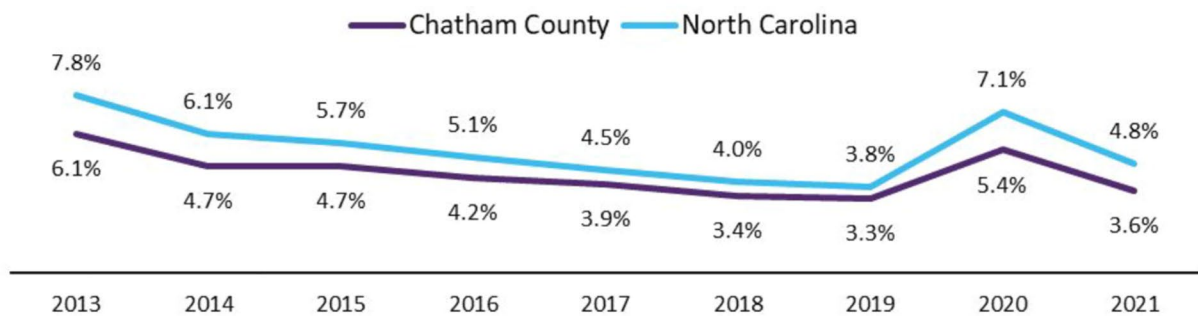


Con excepción de 2020, las cifras de desempleo del condado de Chatham han tendido a la baja en los últimos años.

La tasa de desempleo del condado de Chatham está constantemente por debajo de la tasa general del estado.

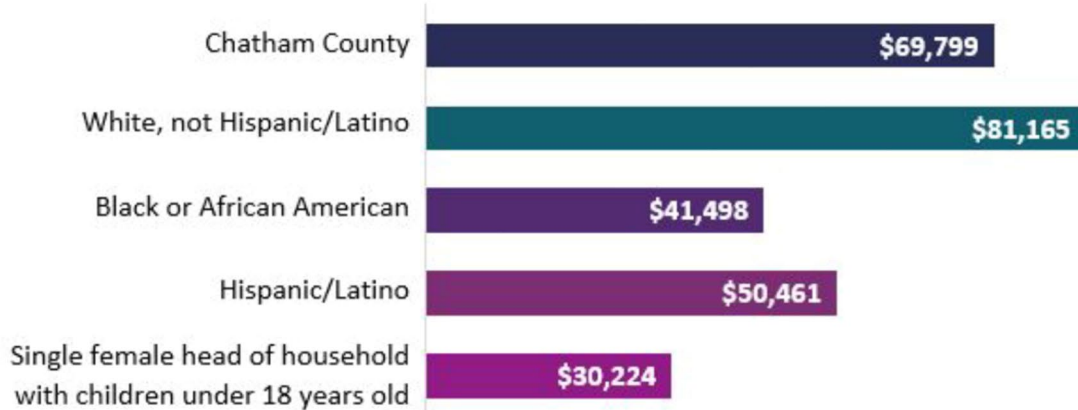
With the exception of 2020, Chatham County's unemployment numbers have been trending downward in recent years.

Chatham County's unemployment rate is consistently below the state overall.



El ingreso familiar medio de los residentes blancos, no hispanos/latinos, es de **1.6 a 2.7 veces mayor** que el de otros grupos demográficos del condado.

Median household income for White, not Hispanic/Latinx residents is **1.6 to 2.7 times higher** than other demographic groups in the county.



Employment: NCWorks Data Empleo: Datos de NCWorks

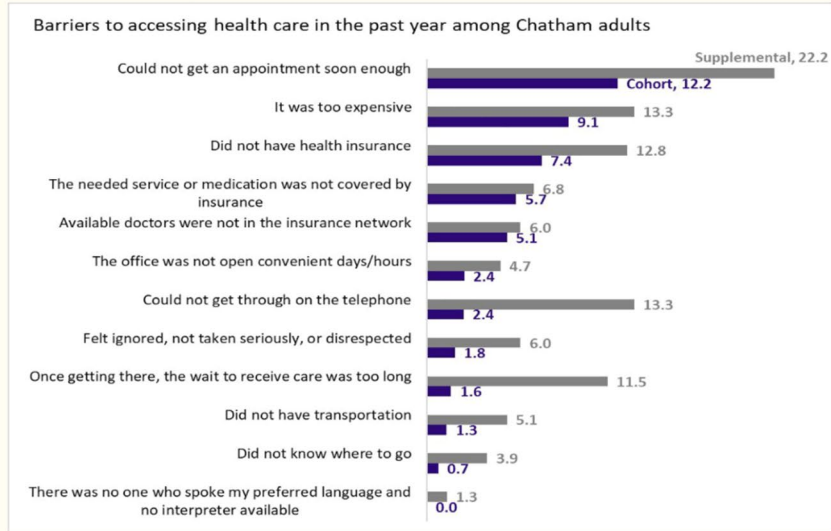
Malinda Marsh
NCWorks Career Center Coordinator
Central Carolina Community College

As of April 27th, there are over 1,200 jobs available in Chatham County! Over the next three years these numbers will increase significantly, especially in manufacturing, hospitality/tourism, construction, health care, retail, etc.

Malinda Marsh
Coordinadora del Centro de Carreras de NCWorks
Central Carolina Community College

Al 27 de abril, hay más de 1,200 puestos de trabajo disponibles en el condado de Chatham. En los próximos tres años, estos números aumentarán significativamente, sobre todo en los sectores de fabricación, hotelería/turismo, construcción, atención médica y comercio minorista, entre otros.

Data Review/Revisión de datos Health Care Access/Acceso a la atención médica

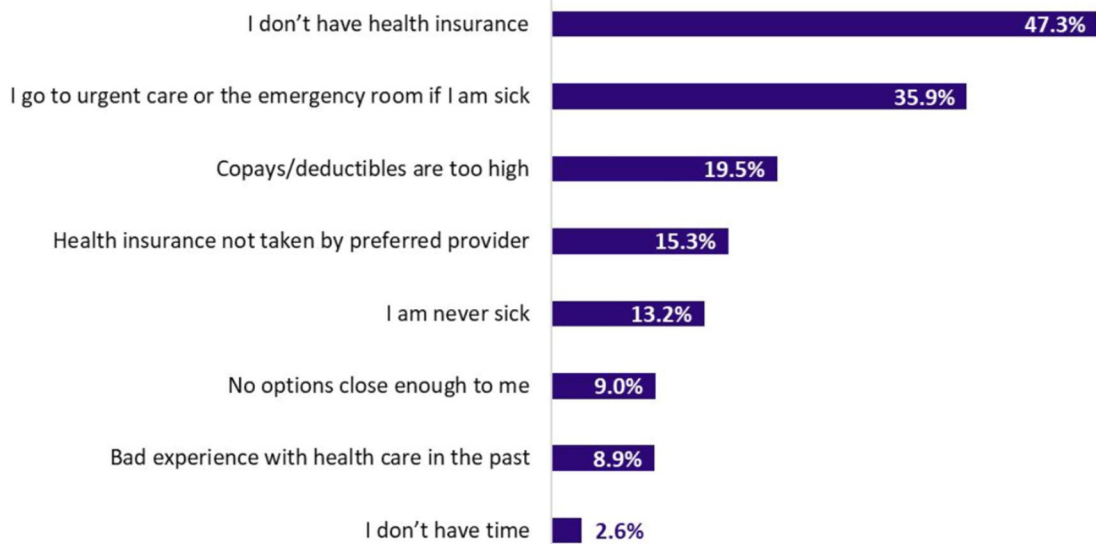


Obstáculos para acceder a la atención médica en el último año entre los adultos de Chatham.

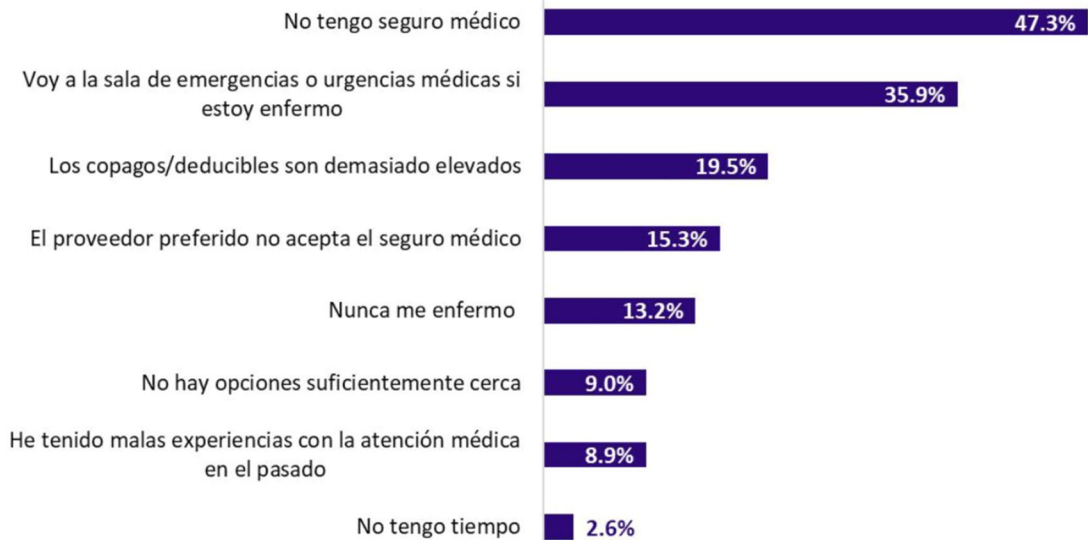


Appendix H: Chatham Health Alliance Prioritization Presentation

Not having health insurance is the top barrier to having a regular health provider for adults in Chatham County.



La falta de seguro médico es el principal obstáculo para atenderse con un proveedor de atención médica de manera habitual según los adultos del condado de Chatham.



CCCS Equity Analyses

- Younger adults were less likely to have gone to a routine healthcare visit recently, and were more likely to cite inconvenient hours, expense, and issues with insurance coverage as barriers to receiving care.
- Women were more likely to report recent routine checkups; over 5% of men reported never having been to a routine checkup.
- Hispanic/Latinx adults were significantly less likely to have a regular health care provider compared to white, non-Hispanic adults.
- Hispanic/Latinx adults were significantly more likely to report experiencing barriers to getting health care; 1/3 of Hispanic/Latinx adults reported lack of health insurance as a barrier, compared to 5% of white, non-Hispanic and Black adults, respectively.

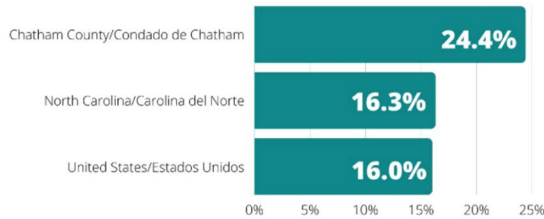
Análisis de Equidad de CCCS

- Los adultos más jóvenes tenían menos probabilidades de haber ido a una visita médica de rutina recientemente, y eran más propensos a citar horarios inconvenientes, gastos y problemas con la cobertura del seguro como barreras para recibir atención médica.
- Las mujeres eran más propensas a reportar chequeos de rutina recientes; más del 5% de los hombres informaron nunca haber ido a un chequeo de rutina.
- Los adultos hispanos/latinx tenían significativamente menos probabilidades de tener un proveedor de atención médica regular en comparación con los adultos blancos no hispanos.
- Los adultos hispanos/latinx fueron significativamente más propensos a informar que experimentaron barreras para obtener atención médica; 1/3 de los adultos hispanos/latinx informaron que la falta de seguro médico es una barrera, en comparación con el 5 % de los adultos blancos, no hispanos y de la raza negra, respectivamente.

Data Review/Revisión de datos Healthy Aging/Envejecimiento saludable



Porcentaje de la población de 65 años o mayores ■ Percent of population age 65+



Source/Fuente: US Census Bureau



1 in 10

older adults who live at home have experienced elder abuse.

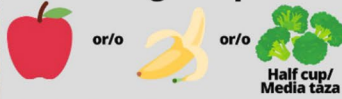
los adultos mayores que viven en el hogar han experimentado abuso de ancianos.

Source/Fuente: Centers for Disease Control and Prevention

Data Review/Revisión de datos Healthy Food Systems/Sistemas de alimentación saludable



One serving/Una porción:



More than 9 in 10

Chatham adults report eating at least one serving of fruits and vegetables each day.

Más de 9 de cada 10

adultos de Chatham informan que comen al menos una porción de frutas y verduras cada día.

More than half

of Chatham adults report eating just 1-2 servings.

Más de la mitad

de los adultos de Chatham informan que solo comen 1-2 porciones.

SOURCE/FUENTE: CCCS, 2021



Food Insecurity/ Inseguridad Alimentaria

Chatham County/Condado de Chatham

11.7% 2019

11.9% 2018

11.0% 2017

North Carolina/Carolina del Norte

13.5% 2019

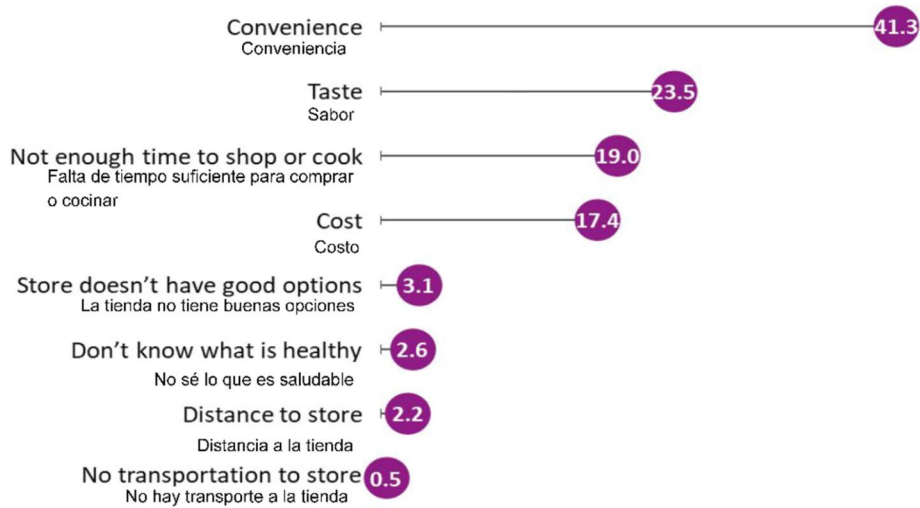
United States/Estados Unidos

10.9% 2019

Source/Fuente: Feeding America

La conveniencia es el principal obstáculo para consumir comidas saludables según los adultos del condado de Chatham.

Convenience is the top barrier to eating healthy foods for Chatham County adults.



CCCS Equity Analyses

- Approximately 30% of Hispanic/Latinx residents and 20% of Black residents reported worrying about running out of food without being able to buy more, compared to 13% of residents overall
- 14% of Hispanic/Latinx residents reported stores not having good options as a barrier to healthy eating, significantly more than the overall county average of 3%.

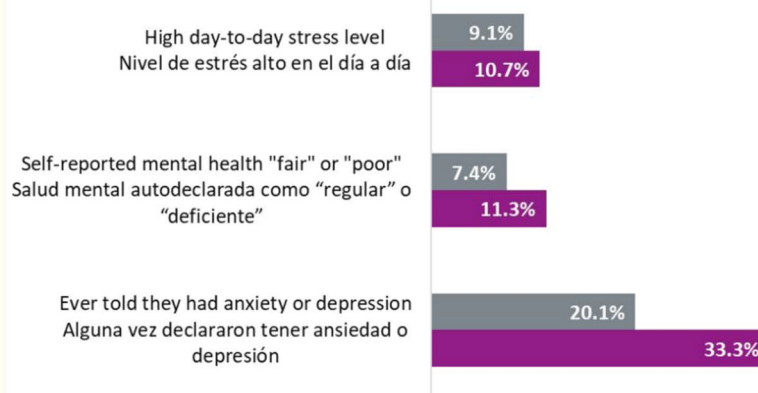
Análisis de Equidad de CCCS

- Aproximadamente el 30% de los residentes hispanos/latinx y el 20% de los residentes de la raza negra informaron estar preocupados por quedarse sin alimentos y sin poder comprar más, en comparación con el 13% de los residentes en general.
- El 14% de los residentes hispanos/latinx informaron que las tiendas no tienen buenas opciones como una barrera para una alimentación saludable, significativamente más que el promedio general del condado de 3%.

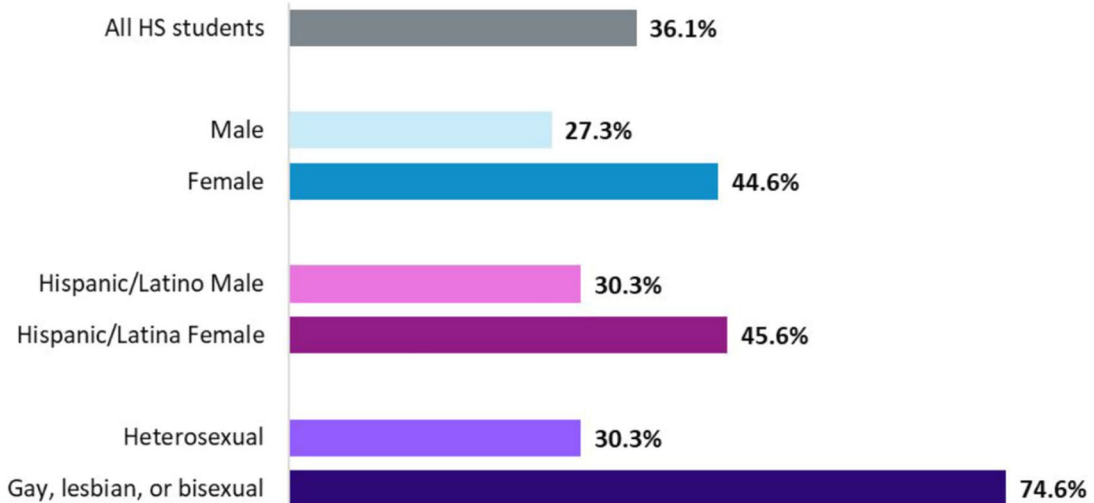
Data Review/Revisión de datos Mental Health/Salud mental

Several key mental health indicators declined among adults in Chatham County from 2018 to 2021.

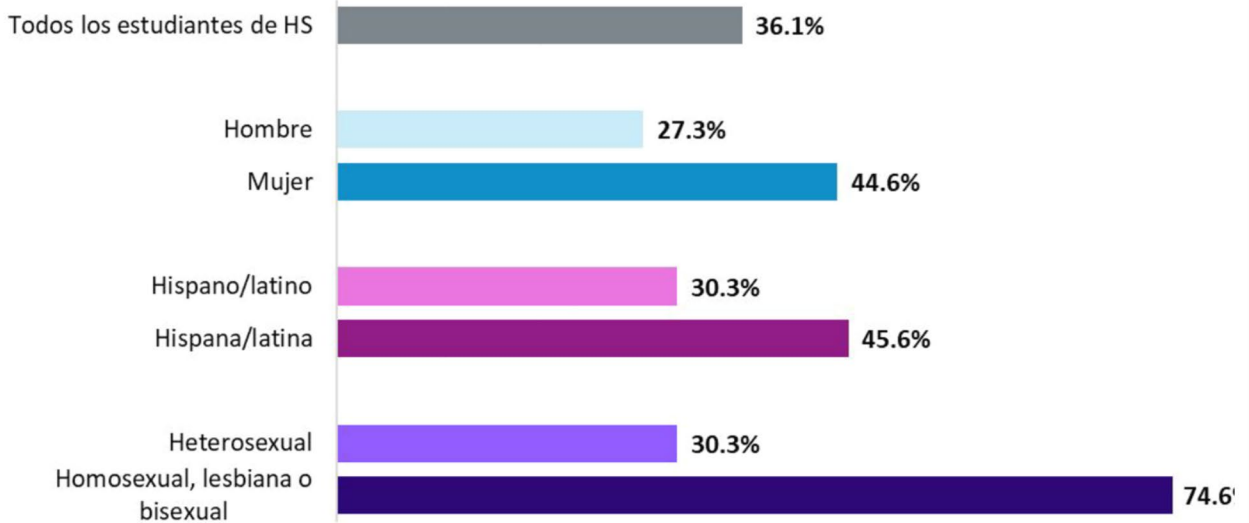
Varios indicadores clave de salud mental empeoraron entre los adultos del condado de Chatham entre 2018 y 2021.



Over one third of Chatham HS students report experiencing depression in the past year. Some groups experience even higher rates of depressive periods.



Más de un tercio de los estudiantes de HS (escuela secundaria) de Chatham reportan haber tenido depresión en el último año. Algunos grupos experimentan tasas incluso más altas de períodos depresivos.



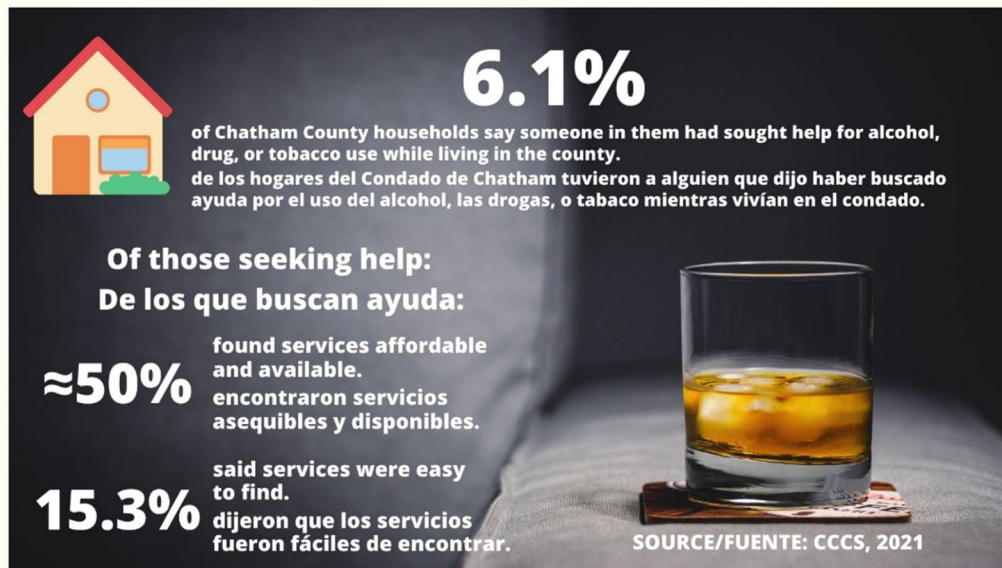
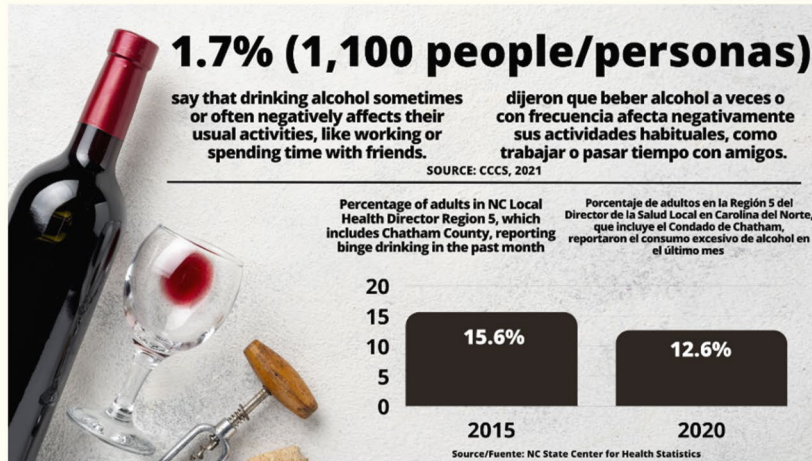
CCCS Equity Analyses

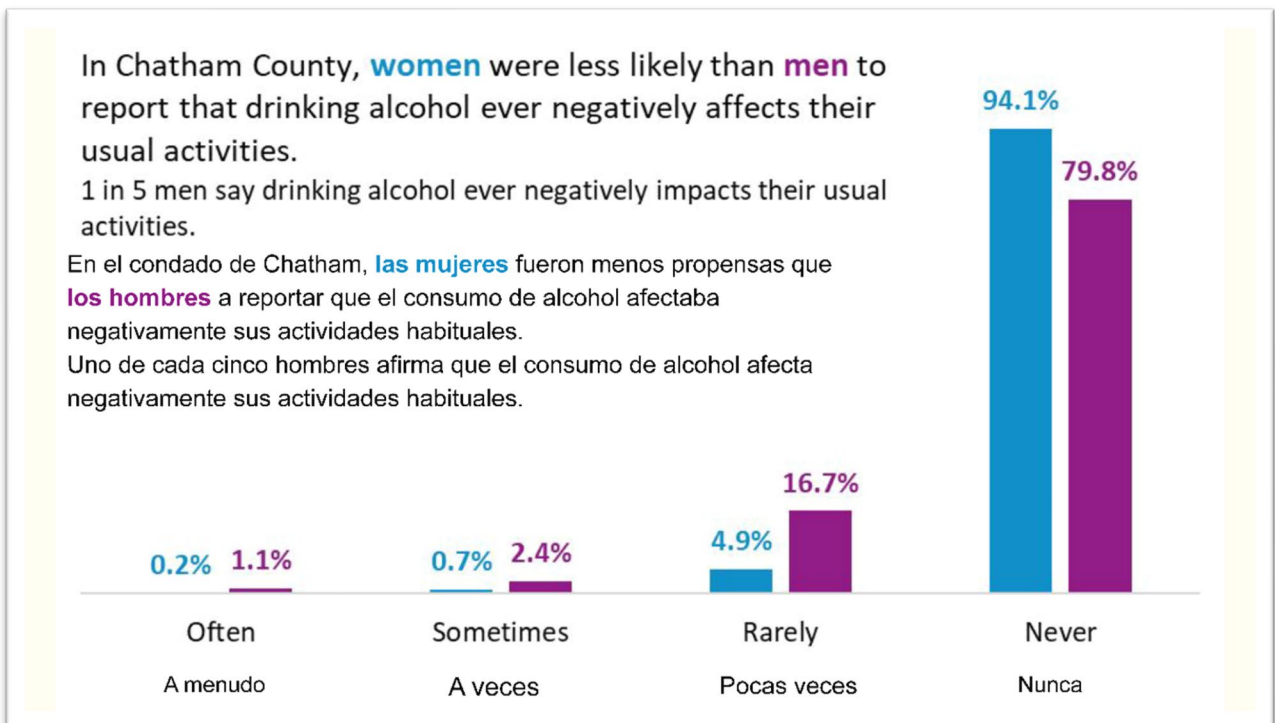
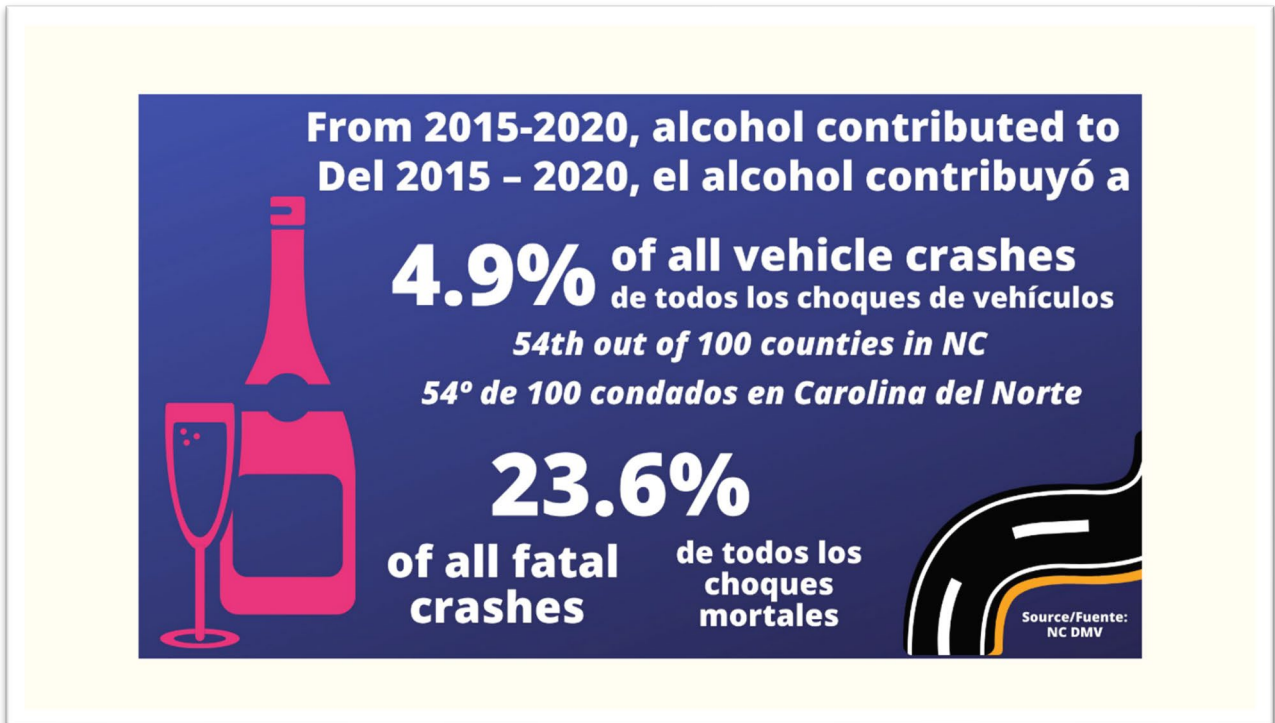
- Black residents were twice as likely to report experiencing grief from losing a loved one from COVID-19 compared to White residents.
- Women were notably more likely than men to report certain negative impacts as a result of the COVID-19 pandemic, such as difficulty paying bills and increased stress or anxiety.
- More than 13% of both Black and Hispanic/Latinx adults reported discrimination as a cause of stress compared to 2% of White adults. Almost one half of Black adults and almost one third of Hispanic/Latinx adults reported experiencing discrimination, bias, or prejudice in Chatham County.

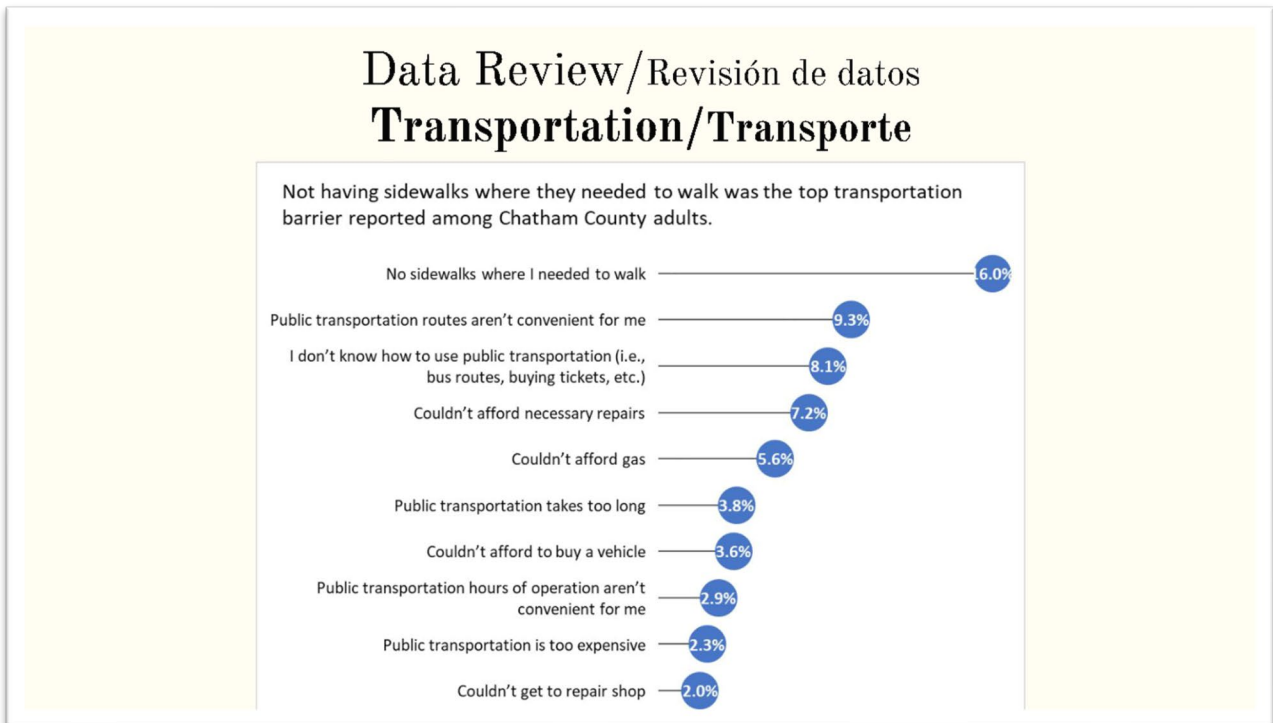
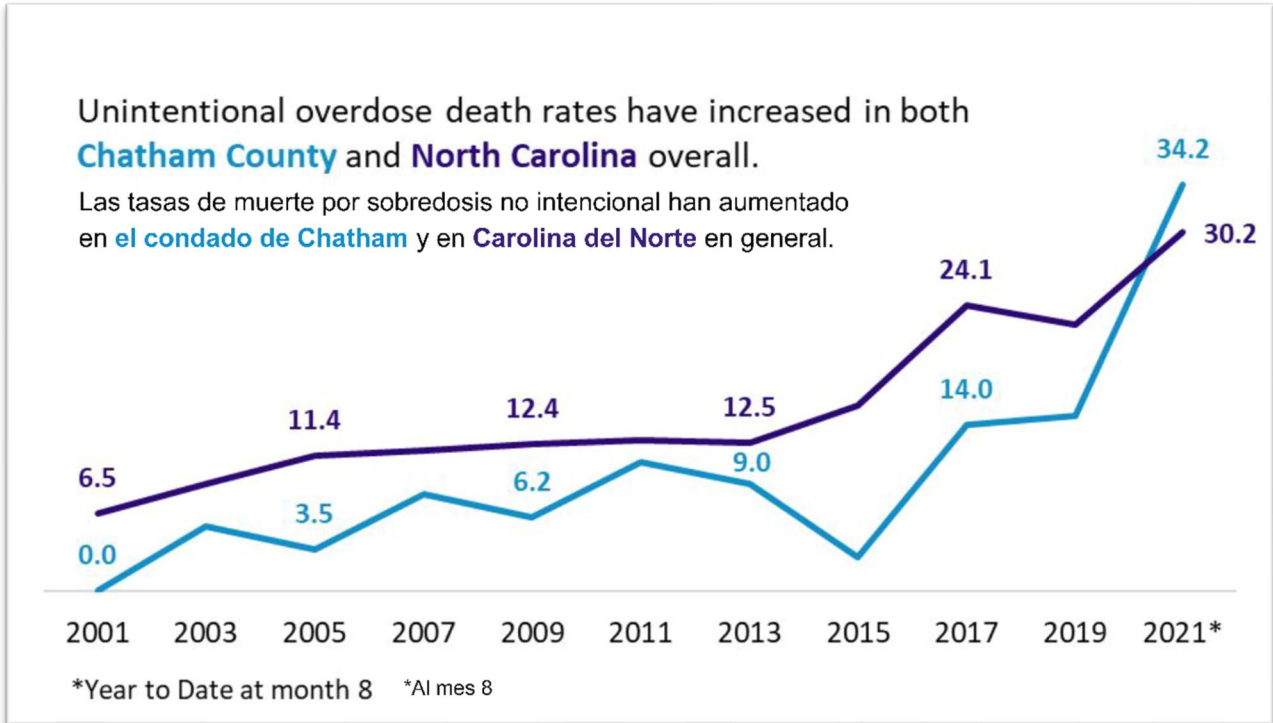
Análisis de Equidad de CCCS

- Los residentes de la raza negra tenían el doble de probabilidades de informar haber experimentado duelo por la pérdida de un ser querido a causa del COVID-19 en comparación con los residentes blancos.
- Las mujeres eran notablemente más propensas que los hombres a informar ciertos impactos negativos como resultado de la pandemia de COVID-19, como dificultad para pagar las cuentas y aumento del estrés o la ansiedad.
- Más del 13% de ambos adultos hispanos/latinx y de la raza negra informaron la discriminación como causa de estrés en comparación de un 2% de los adultos blancos. Casi la mitad de los adultos de la raza negra y casi un tercio de los adultos hispanos/latinx informaron haber experimentado discriminación, parcialidad o prejuicio en el Condado de Chatham.

Data Review/Revisión de datos Substance Use/Consumo de sustancias

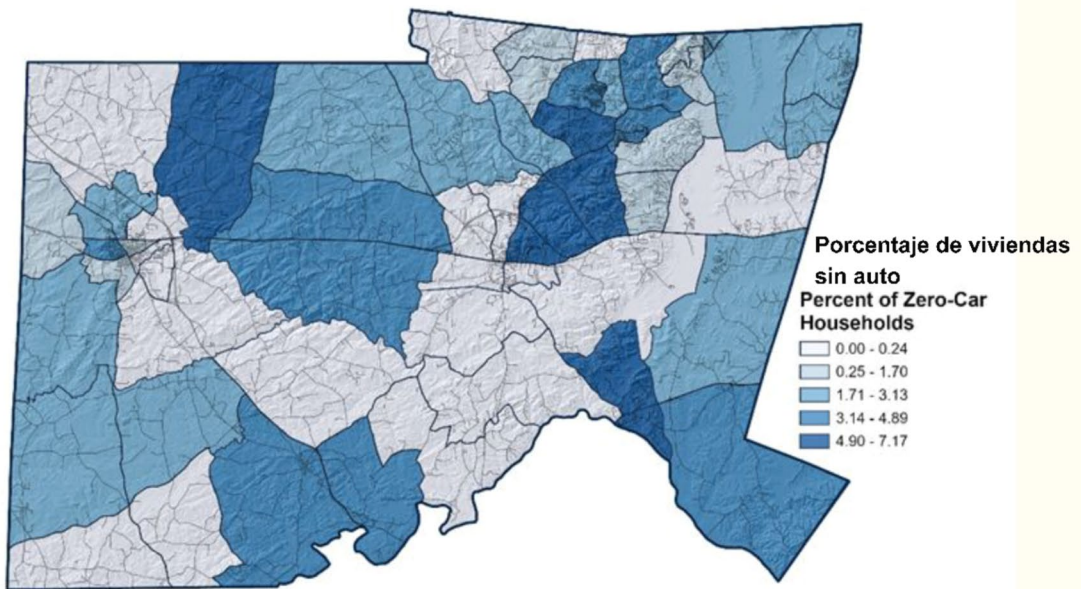
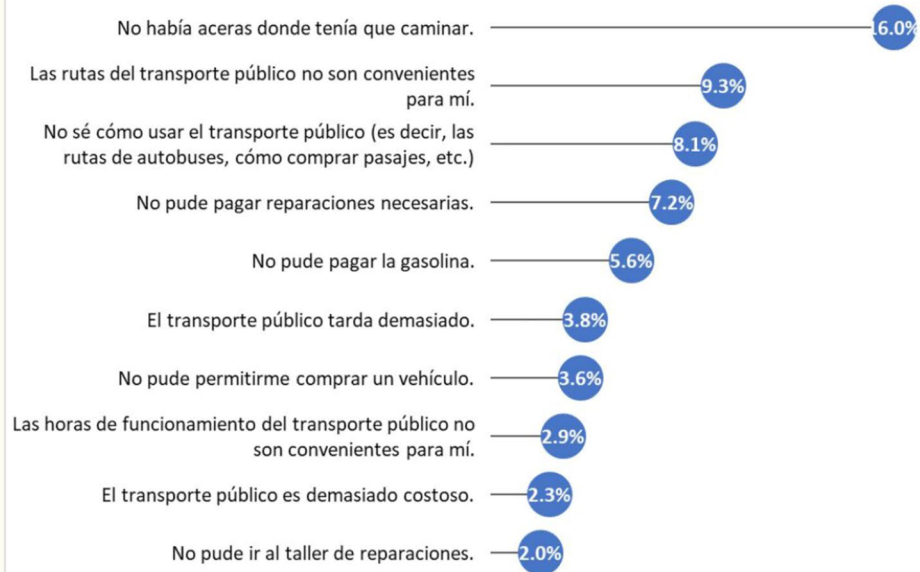






Appendix H: Chatham Health Alliance Prioritization Presentation

La falta de aceras donde poder caminar fue el principal obstáculo de transporte reportado entre los adultos del condado de Chatham.



CCCS Equity Analyses

- Black and Hispanic/Latinx adults were significantly more likely to report using public transportation than White, non-Hispanic adults.
- 26% of Hispanic/Latinx adults reported that there were no sidewalks where they needed to walk; 22% reported lack of knowledge about using Chatham's public transportation was a barrier in the past year.

Análisis de Equidad de CCCS

- Los adultos de la raza negra y los hispanos/Latinx fueron significativamente más propensos a informar que usan el transporte público más que los adultos blancos, no hispanos.
- El 26 % de los adultos hispanos/latinx informaron que no había aceras donde necesitaban caminar; el 22% informó que la falta de conocimiento sobre el uso del transporte público de Chatham fue una barrera el año pasado.

Small Group Discussions Debates en grupos pequeños

Goal:

- Discuss data for each topic
- Identify top 3 topic areas
- Identify someone to share out top 3 topic areas, why you chose them, and which subcommittee you think they fit in

Objetivo:

- Debatir sobre los datos de cada tema
- Identificar las tres áreas temáticas más importantes
- Identificar a alguien para poner en común las tres áreas temáticas más importantes, por qué las eligió y en qué subcomité cree que encajan.

Large Group Share Out Puesta en común en grupo grande

Goal:

- Hear from other groups about their top 3 topics
- Overall top 3 topics will be identified based on majority chosen by each small group

Objetivo:

- Escuchar a otros grupos hablar de sus tres temas más importantes.
- Se identificarán los tres temas más importantes en función de lo elegido por la mayoría de cada grupo pequeño

Thank you so much for your time and participation!
¡Muchas gracias por su tiempo y participación!

Learn more about the Chatham Health Alliance:

<http://www.chathamhealthalliancenc.org>

Questions?

Email Julie Wilkerson, Chatham Health Alliance
Executive Director at

julie.wilkerson@chathamcountync.gov

Conozca más sobre Chatham Health Alliance:

<http://www.chathamhealthalliancenc.org>

¿Preguntas?

Envíe un correo electrónico a Julie Wilkerson,
directora ejecutiva de Chatham Health Alliance, a

julie.wilkerson@chathamcountync.gov

Appendix I: 2019 Middle School Youth Risk Behavior Survey

2019 Middle School Youth Risk Behavior Survey

This survey is about health behavior. It has been developed so you can tell us what you do that may affect your health. The information you give will be used to improve health education for young people like yourself.

DO NOT write your name on this survey. The answers you give will be kept private. No one will know what you write. Answer the questions based on what you really do.

Completing the survey is voluntary. Whether or not you answer the questions will not affect your grade in this class. If you are not comfortable answering a question, just leave it blank.

The questions that ask about your background will be used only to describe the types of students completing this survey. The information will not be used to find out your name. No names will ever be reported.

Make sure to read every question. Fill in the ovals completely. When you are finished, follow the instructions of the person giving you the survey.

Thank you very much for your help.

Directions

- **Use a #2 pencil only.**
- **Make dark marks.**
- **Fill in a response like this: A B ● D.**
- **If you change your answer, erase your old answer completely.**

1. How old are you?
 - A. 10 years old or younger
 - B. 11 years old
 - C. 12 years old
 - D. 13 years old
 - E. 14 years old
 - F. 15 years old
 - G. 16 years old or older

2. What is your sex?
 - A. Female
 - B. Male

3. In what grade are you?
 - A. 6th grade
 - B. 7th grade
 - C. 8th grade
 - D. Ungraded or other grade

4. Are you Hispanic or Latino?
 - A. Yes
 - B. No

5. What is your race? **(Select one or more responses.)**
 - A. American Indian or Alaska Native
 - B. Asian
 - C. Black or African American
 - D. Native Hawaiian or Other Pacific Islander
 - E. White

The next 4 questions ask about safety.

6. **When you ride a bicycle, how often do you wear a helmet?**
 - A. I do not ride a bicycle
 - B. Never wear a helmet
 - C. Rarely wear a helmet
 - D. Sometimes wear a helmet
 - E. Most of the time wear a helmet
 - F. Always wear a helmet

7. **When you rollerblade or ride a skateboard**, how often do you wear a helmet?
- A. I do not rollerblade or ride a skateboard
 - B. Never wear a helmet
 - C. Rarely wear a helmet
 - D. Sometimes wear a helmet
 - E. Most of the time wear a helmet
 - F. Always wear a helmet
8. How often do you wear a seat belt when **riding** in a car?
- A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always
9. Have you ever ridden in a car driven by someone who had been drinking alcohol?
- A. Yes
 - B. No
 - C. Not sure

The next 2 questions ask about violence-related behaviors.

10. Have you ever carried a **weapon**, such as a gun, knife, or club?
- A. Yes
 - B. No
11. Have you ever been in a physical fight?
- A. Yes
 - B. No

The next 2 questions ask about bullying. Bullying is when 1 or more students tease, threaten, spread rumors about, hit, shove, or hurt another student over and over again. It is not bullying when 2 students of about the same strength or power argue or fight or tease each other in a friendly way.

12. Have you ever been bullied **on school property**?
- A. Yes
 - B. No
13. Have you ever been **electronically** bullied? (Count being bullied through texting, Instagram, Facebook, or other social media.)
- A. Yes
 - B. No

The next 3 questions ask about attempted suicide. Sometimes people feel so depressed about the future that they may consider attempting suicide or killing themselves.

14. Have you ever **seriously** thought about killing yourself?
 - A. Yes
 - B. No
15. Have you ever made a **plan** about how you would kill yourself?
 - A. Yes
 - B. No
16. Have you ever **tried** to kill yourself?
 - A. Yes
 - B. No

The next 4 questions ask about cigarette smoking.

17. Have you ever tried cigarette smoking, even one or two puffs?
 - A. Yes
 - B. No
18. How old were you when you first tried cigarette smoking, even one or two puffs?
 - A. I have never tried cigarette smoking, not even one or two puffs
 - B. 8 years old or younger
 - C. 9 years old
 - D. 10 years old
 - E. 11 years old
 - F. 12 years old
 - G. 13 years old or older
19. During the past 30 days, on how many days did you smoke cigarettes?
 - A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days
20. During the past 30 days, on the days you smoked, how many cigarettes did you smoke **per day**?
 - A. I did not smoke cigarettes during the past 30 days
 - B. Less than 1 cigarette per day
 - C. 1 cigarette per day
 - D. 2 to 5 cigarettes per day
 - E. 6 to 10 cigarettes per day
 - F. 11 to 20 cigarettes per day
 - G. More than 20 cigarettes per day

The next 3 questions ask about electronic vapor products, such as JUUL, Vuse, MarkTen, and blu. Electronic vapor products include e-cigarettes, vapes, vape pens, e-cigars, e-hookahs, hookah pens, and mods.

21. Have you ever used an electronic vapor product?
- A. Yes
 - B. No
22. During the past 30 days, on how many days did you use an electronic vapor product?
- A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days
23. During the past 30 days, how did you **usually** get your own electronic vapor products? (Select only **one** response.)
- A. I did not use any electronic vapor products during the past 30 days
 - B. I bought them in a store such as a convenience store, supermarket, discount store, gas station, or vape store
 - C. I got them on the Internet
 - D. I gave someone else money to buy them for me
 - E. I borrowed them from someone else
 - F. A person who can legally buy these products gave them to me
 - G. I took them from a store or another person
 - H. I got them some other way

The next 2 questions ask about other tobacco products.

24. During the past 30 days, on how many days did you use **chewing tobacco, snuff, dip, snus, or dissolvable tobacco products**, such as Copenhagen, Grizzly, Skoal, or Camel Snus? (Do not count any electronic vapor products.)
- A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days

25. During the past 30 days, on how many days did you smoke **cigars, cigarillos, or little cigars**?
- A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days

The next 2 questions ask about drinking alcohol. This includes drinking beer, wine, wine coolers, and liquor such as rum, gin, vodka, or whiskey. For these questions, drinking alcohol does not include drinking a few sips of wine for religious purposes.

26. Have you ever had a drink of alcohol, other than a few sips?
- A. Yes
 - B. No
27. How old were you when you had your first drink of alcohol other than a few sips?
- A. I have never had a drink of alcohol other than a few sips
 - B. 8 years old or younger
 - C. 9 years old
 - D. 10 years old
 - E. 11 years old
 - F. 12 years old
 - G. 13 years old or older

The next 2 questions ask about marijuana use. Marijuana also is called pot, weed, or cannabis.

28. Have you ever used marijuana?
- A. Yes
 - B. No
29. How old were you when you tried marijuana for the first time?
- A. I have never tried marijuana
 - B. 8 years old or younger
 - C. 9 years old
 - D. 10 years old
 - E. 11 years old
 - F. 12 years old
 - G. 13 years old or older

The next question asks about the use of prescription pain medicine without a doctor's prescription or differently than how a doctor told you to use it. For this question, count drugs such as codeine, Vicodin, OxyContin, Hydrocodone, and Percocet.

30. Have you ever taken **prescription pain medicine** without a doctor's prescription or differently than how a doctor told you to use it? (Count drugs such as codeine, Vicodin, OxyContin, Hydrocodone, and Percocet.)
- A. Yes
 - B. No

The next 3 questions ask about other drugs.

31. Have you ever used **any** form of cocaine, including powder, crack, or freebase?
- A. Yes
 - B. No
32. Have you ever sniffed glue, breathed the contents of spray cans, or inhaled any paints or sprays to get high?
- A. Yes
 - B. No
33. Have you ever taken **steroid pills or shots** without a doctor's prescription?
- A. Yes
 - B. No

The next 4 questions ask about sexual intercourse.

34. Have you ever had sexual intercourse?
- A. Yes
 - B. No
35. How old were you when you had sexual intercourse for the first time?
- A. I have never had sexual intercourse
 - B. 8 years old or younger
 - C. 9 years old
 - D. 10 years old
 - E. 11 years old
 - F. 12 years old
 - G. 13 years old or older
36. With how many people have you ever had sexual intercourse?
- A. I have never had sexual intercourse
 - B. 1 person
 - C. 2 people
 - D. 3 people
 - E. 4 people
 - F. 5 people
 - G. 6 or more people

37. The **last time** you had sexual intercourse, did you or your partner use a condom?
- A. I have never had sexual intercourse
 - B. Yes
 - C. No

The next 2 questions ask about body weight.

38. How do **you** describe your weight?
- A. Very underweight
 - B. Slightly underweight
 - C. About the right weight
 - D. Slightly overweight
 - E. Very overweight
39. Which of the following are you trying to do about your weight?
- A. **Lose** weight
 - B. **Gain** weight
 - C. **Stay** the same weight
 - D. I am **not trying to do anything** about my weight

The next question asks about eating breakfast.

40. During the past 7 days, on how many days did you eat **breakfast**?
- A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days
 - G. 6 days
 - H. 7 days

The next 5 questions ask about physical activity.

41. During the past 7 days, on how many days were you physically active for a total of **at least 60 minutes per day**? (Add up all the time you spent in any kind of physical activity that increased your heart rate and made you breathe hard some of the time.)
- A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days
 - G. 6 days
 - H. 7 days

42. On an average school day, how many hours do you watch TV?
- A. I do not watch TV on an average school day
 - B. Less than 1 hour per day
 - C. 1 hour per day
 - D. 2 hours per day
 - E. 3 hours per day
 - F. 4 hours per day
 - G. 5 or more hours per day
43. On an average school day, how many hours do you play video or computer games or use a computer for something that is not school work? (Count time spent playing games, watching videos, texting, or using social media on your smartphone, computer, Xbox, PlayStation, iPad, or other tablet.)
- A. I do not play video or computer games or use a computer for something that is not school work
 - B. Less than 1 hour per day
 - C. 1 hour per day
 - D. 2 hours per day
 - E. 3 hours per day
 - F. 4 hours per day
 - G. 5 or more hours per day
44. In an average week when you are in school, on how many days do you go to physical education (PE) classes?
- A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days
45. During the past 12 months, on how many sports teams did you play? (Count any teams run by your school or community groups.)
- A. 0 teams
 - B. 1 team
 - C. 2 teams
 - D. 3 or more teams

The next question asks about concussions. A concussion is when a blow or jolt to the head causes problems such as headaches, dizziness, being dazed or confused, difficulty remembering or concentrating, vomiting, blurred vision, or being knocked out.

46. During the past 12 months, how many times did you have a concussion **from playing a sport or being physically active**?
- A. 0 times
 - B. 1 time
 - C. 2 times
 - D. 3 times
 - E. 4 or more times

The next 3 questions ask about other health-related topics.

47. Has a doctor or nurse ever told you that you have asthma?
- A. Yes
 - B. No
 - C. Not sure
48. On an average school night, how many hours of sleep do you get?
- A. 4 or less hours
 - B. 5 hours
 - C. 6 hours
 - D. 7 hours
 - E. 8 hours
 - F. 9 hours
 - G. 10 or more hours
49. During the past 12 months, how would you describe your grades in school?
- A. Mostly A's
 - B. Mostly B's
 - C. Mostly C's
 - D. Mostly D's
 - E. Mostly F's
 - F. None of these grades
 - G. Not sure

**This is the end of the survey.
Thank you very much for your help.**

Appendix J: 2019 Middle School Youth Risk Behavior Survey Results

| Behavior | Chatham Middle Schools (%) | NC Middle Schools (%) |
|---|----------------------------|-----------------------|
| Rarely or never wore a bicycle helmet (among students who had ridden a bicycle) | 68.4 | 64.9 |
| Rarely or never wore a helmet when rollerblading or skateboarding (among students who used rollerblades or rode a skateboard) | 74.8 | 72.3 |
| Rarely or never wore a seat belt (when riding in a car) | 4.4 | 5.3 |
| Ever rode with a driver who had been drinking alcohol (in a car) | 21.7 | 19.3 |
| Ever carried a weapon (such as a gun, knife, or club) | 36.0 | 31.4 |
| Were ever in a physical fight | 43.2 | 47.2 |
| Were ever bullied on school property | 46.9 | 46.2 |
| Were ever electronically bullied (counting being bullied through texting, Instagram, Facebook, or other social media) | 24.0 | 22.0 |
| Ever seriously thought about killing themselves | 26.1 | 23.4 |
| Ever made a plan about how they would kill themselves | 18.8 | 16.3 |
| Ever tried to kill themselves | 13.6 | 11.5 |
| Currently smoke cigarettes (on at least 1 day in past 30 days) | 4.1 | 4.4 |
| Currently smoke cigarettes frequently (on 20 or more days in past 30 days) | 0.3 | 0.4 |
| Currently smoke cigarettes daily (on all 30 days in past 30 days) | 0.3 | 0.4 |
| Ever used an electronic vapor product | 24.9 | 25.4 |
| Currently use an electronic vapor product (on at least 1 day in past 30 days) | 12.8 | 14.4 |
| Currently use electronic vapor products frequently (on 20 or more days in past 30 days) | 1.6 | 1.6 |
| Currently use electronic vapor products daily (on all 30 days in past 30 days) | 1.3 | 1.0 |
| Currently smoke cigarettes or use electronic vapor products (on at least 1 day in past 30 days) | 15.2 | 16.8 |
| Ever drank alcohol (other than a few sips) | 23.2 | 20.4 |
| Drank alcohol for the first time before age 11 years (other than a few sips) | 9.9 | 7.4 |
| Ever used marijuana | 9.2 | 10.5 |
| Tried marijuana for the first time before age 11 years | 2.5 | 2.5 |
| Ever took prescription pain medicine without a doctor's prescription or differently than how a doctor told them to use it (counting drugs such as codeine, Vicodin, Oxycontin, hydrocodone, and Percocet) | 8.8 | 8.0 |
| Ever used cocaine (any form of cocaine, including powder, crack, or freebase) | 2.0 | 1.0 |
| Ever used inhalants (sniffed glue, breathed the contents of spray cans, or inhaled any paints or sprays to get high) | 8.1 | 6.5 |
| Ever had sexual intercourse | 7.2 | 10.3 |
| Described themselves as slightly or very overweight | 30.2 | 28.3 |
| Were trying to lose weight | 49.1 | 45.5 |
| Did not eat breakfast (in past 7 days) | 18.5 | 12.4 |
| Ate breakfast on all 7 days (in past 7 days) | 34.9 | 43.4 |
| Were physically active at least 60 minutes per day on 5 or more days (in any kind of physical activity that increased their heart rate and made them breathe hard some of the time in past 7 days) | 57.1 | 54.9 |
| Did not participate in at least 60 minutes of physical activity on at least 1 day (in any kind of physical activity that increased their heart rate and made them breathe hard some of the time in past 7 days) | 8.1 | 12.2 |

Appendix J: 2019 Middle School Youth Risk Behavior Survey Results

| | | |
|--|------|------|
| Were physically active at least 60 minutes per day on all 7 days (in any kind of physical activity that increased their heart rate and made them breathe hard some of the time in past 7 days) | 31.7 | 30.3 |
| Watched television 3 or more hours per day (on an average school day) | 19.7 | 26.3 |
| Played video or computer games or used a computer 3 or more hours per day (counting time spent on things such as playing games, watching videos, texting, or using social media on their smartphone, computer, Xbox, playstation, ipad, or other tablet, for something that was not school work, on an average school day) | 46.5 | 49.4 |
| Attended physical education (PE) classes on 1 or more days (in an average week when they were in school) | 77.3 | 73.7 |
| Attended physical education (PE) classes on all 5 days (in an average week when they were in school) | 32.0 | 54.9 |
| Played on at least one sports team (counting any teams run by their school or community groups, during the past 12 months before the survey) | 56.7 | 56.0 |
| Had ever been told by a doctor or nurse that they had asthma | 20.5 | 22.8 |
| Got 8 or more hours of sleep (on an average school night) | 45.6 | 50.4 |
| Described their grades in school as mostly A's or B's (in past 12 months) | 81.0 | -- |
| Were threatened or injured by someone with a weapon on school property (such as a gun, knife, or club, in past 12 months) | 6.7 | -- |
| Did not go to school because they felt they would be unsafe at school or on their way to or from school (in past 30 days) | 5.0 | -- |
| Reported that there is gang activity in their school | 10.8 | -- |
| Have seen other students being bullied in their school | 59.8 | -- |
| Have ever been the victim of teasing or name calling because someone thought they were gay, lesbian, or bisexual | 26.2 | -- |
| Felt sad or hopeless (almost every day for ≥ 2 weeks in a row so that they stopped doing some usual activities, ever in past 12 months) | 32.4 | -- |
| Usually got the alcohol they drank by someone giving it to them (in past 30 days, among students who currently drink alcohol) | 30.9 | -- |
| Used marijuana (in past 30 days) | 6.6 | -- |
| Were offered, sold, or given an illegal drug on school property (in past 12 months) | 6.7 | -- |
| Have been taught about abstaining from sexual activity | 49.9 | -- |
| Have been taught about AIDS or HIV infection in school | 53.4 | -- |
| Have been taught about chlamydia, gonorrhea, syphilis, human papillomavirus, or genital warts | 34.1 | -- |
| Usually talk with their parent or other adult family member when they have questions about sexually transmitted diseases (STD), HIV, AIDS, or pregnancy prevention (among students who have questions about sexually transmitted diseases (STD), HIV, AIDS, or pregnancy prevention) | 52.7 | -- |
| Reported their parents or other adults in their family talked with them about what they expect them to do or not to do when it comes to sex | 39.1 | -- |
| Have ever exercised to lose weight or to keep from gaining weight | 72.5 | -- |
| Have ever eaten less food, fewer calories, or foods low in fat to lose weight or to keep from gaining weight | 50.5 | -- |
| Have ever gone without eating for 24 hours or more to lose weight or to keep from gaining weight (also called fasting) | 19.0 | -- |
| Usually walk or ride their bike to school one or more days per week | 17.0 | -- |
| Reported that some of their classroom teachers provide short physical activity breaks during regular class time (not counting their physical education teacher) | 31.5 | -- |
| Consider themselves to have a disability | 11.8 | -- |

Appendix J: 2019 Middle School Youth Risk Behavior Survey Results

| | | |
|--|------|----|
| Are limited in any way in any activities because of a disability or health problem | 8.2 | -- |
| Have trouble learning, remembering, or concentrating because of a disability or health problem | 13.0 | -- |
| Had been told by a doctor or nurse that they had asthma and who still have asthma | 10.4 | -- |
| Saw a doctor or nurse (for a check-up or physical exam when they were not sick or injured in past 12 months) | 64.1 | -- |
| Saw a dentist (for a check-up, exam, teeth cleaning, or other dental work, in past 12 months) | 71.9 | -- |
| Are alone after school without a parent or adult three or more hours per day on an average school day | 12.1 | -- |
| Participate in school activities other than sports (such as band, drama, clubs, or student government) | 53.7 | -- |
| Would most likely talk with their parent or other adult family member about their feelings (among students who report having felt sad, empty, hopeless, angry, or anxious) | 27.7 | -- |
| Strongly agree or agree that they feel good about themselves | 55.4 | -- |
| Disagree or strongly disagree that they feel alone in their life | 56.5 | -- |
| Strongly agree or agree that their teachers really care about them and give them a lot of encouragement | 50.5 | -- |
| Did not usually sleep in their parent's or guardian's home (in past 30 days) | 2.8 | -- |
| Never saw a dentist (for a check-up, exam, teeth cleaning, or other dental work) | 1.3 | -- |

Appendix K: 2019 State and Local Youth Risk Behavior Survey

2019 State and Local Youth Risk Behavior Survey

This survey is about health behavior. It has been developed so you can tell us what you do that may affect your health. The information you give will be used to improve health education for young people like yourself.

DO NOT write your name on this survey. The answers you give will be kept private. No one will know what you write. Answer the questions based on what you really do.

Completing the survey is voluntary. Whether or not you answer the questions will not affect your grade in this class. If you are not comfortable answering a question, just leave it blank.

The questions that ask about your background will be used only to describe the types of students completing this survey. The information will not be used to find out your name. No names will ever be reported.

Make sure to read every question. Fill in the ovals completely. When you are finished, follow the instructions of the person giving you the survey.

Thank you very much for your help.

Directions

- Use a #2 pencil only.
- Make dark marks.
- Fill in a response like this: A B ● D.
- If you change your answer, erase your old answer completely.

1. How old are you?
 - A. 12 years old or younger
 - B. 13 years old
 - C. 14 years old
 - D. 15 years old
 - E. 16 years old
 - F. 17 years old
 - G. 18 years old or older

2. What is your sex?
 - A. Female
 - B. Male

3. In what grade are you?
 - A. 9th grade
 - B. 10th grade
 - C. 11th grade
 - D. 12th grade
 - E. Ungraded or other grade

4. Are you Hispanic or Latino?
 - A. Yes
 - B. No

5. What is your race? **(Select one or more responses.)**
 - A. American Indian or Alaska Native
 - B. Asian
 - C. Black or African American
 - D. Native Hawaiian or Other Pacific Islander
 - E. White

Appendix K: 2019 State and Local Youth Risk Behavior Survey

6. How tall are you without your shoes on?
 Directions: Write your height in the shaded blank boxes. Fill in the matching oval below each number.

Example

| Height | |
|--------|--------|
| Feet | Inches |
| 5 | 7 |
| ③ | ⑩ |
| ④ | ① |
| ● | ② |
| ⑥ | ③ |
| ⑦ | ④ |
| | ⑤ |
| | ⑥ |
| | ● |
| | ⑧ |
| | ⑨ |
| | ⑩ |
| | ⑪ |

| Height | |
|--------|--------|
| Feet | Inches |
| | |
| ③ | ⑩ |
| ④ | ① |
| ⑤ | ② |
| ⑥ | ③ |
| ⑦ | ④ |
| | ⑤ |
| | ⑥ |
| | ⑦ |
| | ⑧ |
| | ⑨ |
| | ⑩ |
| | ⑪ |

7. How much do you weigh without your shoes on?
 Directions: Write your weight in the shaded blank boxes. Fill in the matching oval below each number.

Example

| Weight Pounds | | |
|---------------|---|---|
| 1 | 5 | 2 |
| ① | ① | ① |
| ● | ① | ① |
| ② | ② | ● |
| ③ | ③ | ③ |
| | ④ | ④ |
| | ● | ⑤ |
| | ⑥ | ⑥ |
| | ⑦ | ⑦ |
| | ⑧ | ⑧ |
| | ⑨ | ⑨ |

| Weight Pounds | | |
|---------------|---|---|
| | | |
| | | |
| ① | ① | ① |
| ② | ② | ② |
| ③ | ③ | ③ |
| | ④ | ④ |
| | ⑤ | ⑤ |
| | ⑥ | ⑥ |
| | ⑦ | ⑦ |
| | ⑧ | ⑧ |
| | ⑨ | ⑨ |

The next 4 questions ask about safety.

8. How often do you wear a seat belt when **riding** in a car driven by someone else?
 - A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always

9. During the past 30 days, how many times did you **ride** in a car or other vehicle **driven by someone who had been drinking alcohol**?
 - A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or more times

10. During the past 30 days, how many times did you **drive** a car or other vehicle **when you had been drinking alcohol**?
 - A. I did not drive a car or other vehicle during the past 30 days
 - B. 0 times
 - C. 1 time
 - D. 2 or 3 times
 - E. 4 or 5 times
 - F. 6 or more times

11. During the past 30 days, on how many days did you **text or e-mail** while **driving** a car or other vehicle?
 - A. I did not drive a car or other vehicle during the past 30 days
 - B. 0 days
 - C. 1 or 2 days
 - D. 3 to 5 days
 - E. 6 to 9 days
 - F. 10 to 19 days
 - G. 20 to 29 days
 - H. All 30 days

The next 11 questions ask about violence-related behaviors.

12. During the past 30 days, on how many days did you carry a **weapon** such as a gun, knife, or club?
 - A. 0 days
 - B. 1 day
 - C. 2 or 3 days
 - D. 4 or 5 days
 - E. 6 or more days

13. During the past 30 days, on how many days did you carry a **weapon** such as a gun, knife, or club **on school property**?
 - A. 0 days
 - B. 1 day
 - C. 2 or 3 days
 - D. 4 or 5 days
 - E. 6 or more days

14. **During the past 12 months**, on how many days did you carry a **gun**? (Do **not** count the days when you carried a gun only for hunting or for a sport, such as target shooting.)
 - A. 0 days
 - B. 1 day
 - C. 2 or 3 days
 - D. 4 or 5 days
 - E. 6 or more days

15. During the past 30 days, on how many days did you **not** go to school because you felt you would be unsafe at school or on your way to or from school?
 - A. 0 days
 - B. 1 day
 - C. 2 or 3 days
 - D. 4 or 5 days
 - E. 6 or more days

16. During the past 12 months, how many times has someone threatened or injured you with a **weapon** such as a gun, knife, or club **on school property**?
 - A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or 7 times
 - F. 8 or 9 times
 - G. 10 or 11 times
 - H. 12 or more times

17. During the past 12 months, how many times were you in a **physical fight**?
- A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or 7 times
 - F. 8 or 9 times
 - G. 10 or 11 times
 - H. 12 or more times
18. During the past 12 months, how many times were you in a **physical fight on school property**?
- A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or 7 times
 - F. 8 or 9 times
 - G. 10 or 11 times
 - H. 12 or more times
19. Have you ever been physically forced to have sexual intercourse when you did not want to?
- A. Yes
 - B. No
20. During the past 12 months, how many times did **anyone** force you to do sexual things that you did not want to do? (Count such things as kissing, touching, or being physically forced to have sexual intercourse.)
- A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or more times

21. During the past 12 months, how many times did **someone you were dating or going out with** force you to do sexual things that you did not want to do? (Count such things as kissing, touching, or being physically forced to have sexual intercourse.)
- A. I did not date or go out with anyone during the past 12 months
 - B. 0 times
 - C. 1 time
 - D. 2 or 3 times
 - E. 4 or 5 times
 - F. 6 or more times
22. During the past 12 months, how many times did **someone you were dating or going out with** physically hurt you on purpose? (Count such things as being hit, slammed into something, or injured with an object or weapon.)
- A. I did not date or go out with anyone during the past 12 months
 - B. 0 times
 - C. 1 time
 - D. 2 or 3 times
 - E. 4 or 5 times
 - F. 6 or more times

The next 2 questions ask about bullying. Bullying is when 1 or more students tease, threaten, spread rumors about, hit, shove, or hurt another student over and over again. It is not bullying when 2 students of about the same strength or power argue or fight or tease each other in a friendly way.

23. During the past 12 months, have you ever been bullied **on school property**?
- A. Yes
 - B. No
24. During the past 12 months, have you ever been **electronically** bullied? (Count being bullied through texting, Instagram, Facebook, or other social media.)
- A. Yes
 - B. No

The next 5 questions ask about sad feelings and attempted suicide. Sometimes people feel so depressed about the future that they may consider attempting suicide, that is, taking some action to end their own life.

25. During the past 12 months, did you ever feel so sad or hopeless almost every day for **two weeks or more in a row** that you stopped doing some usual activities?
- A. Yes
 - B. No

26. During the past 12 months, did you ever **seriously** consider attempting suicide?
A. Yes
B. No
27. During the past 12 months, did you make a plan about how you would attempt suicide?
A. Yes
B. No
28. During the past 12 months, how many times did you actually attempt suicide?
A. 0 times
B. 1 time
C. 2 or 3 times
D. 4 or 5 times
E. 6 or more times
29. **If you attempted suicide** during the past 12 months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?
A. **I did not attempt suicide** during the past 12 months
B. Yes
C. No

The next 4 questions ask about cigarette smoking.

30. Have you ever tried cigarette smoking, even one or two puffs?
A. Yes
B. No
31. How old were you when you first tried cigarette smoking, even one or two puffs?
A. I have never tried cigarette smoking, not even one or two puffs
B. 8 years old or younger
C. 9 or 10 years old
D. 11 or 12 years old
E. 13 or 14 years old
F. 15 or 16 years old
G. 17 years old or older
32. During the past 30 days, on how many days did you smoke cigarettes?
A. 0 days
B. 1 or 2 days
C. 3 to 5 days
D. 6 to 9 days
E. 10 to 19 days
F. 20 to 29 days
G. All 30 days

33. During the past 30 days, on the days you smoked, how many cigarettes did you smoke **per day**?
- A. I did not smoke cigarettes during the past 30 days
 - B. Less than 1 cigarette per day
 - C. 1 cigarette per day
 - D. 2 to 5 cigarettes per day
 - E. 6 to 10 cigarettes per day
 - F. 11 to 20 cigarettes per day
 - G. More than 20 cigarettes per day

The next 3 questions ask about electronic vapor products, such as JUUL, Vuse, MarkTen, and blu. Electronic vapor products include e-cigarettes, vapes, vape pens, e-cigars, e-hookahs, hookah pens, and mods.

34. Have you ever used an electronic vapor product?
- A. Yes
 - B. No
35. During the past 30 days, on how many days did you use an electronic vapor product?
- A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days
36. During the past 30 days, how did you **usually** get your own electronic vapor products? (Select only **one** response.)
- A. I did not use any electronic vapor products during the past 30 days
 - B. I bought them in a store such as a convenience store, supermarket, discount store, gas station, or vape store
 - C. I got them on the Internet
 - D. I gave someone else money to buy them for me
 - E. I borrowed them from someone else
 - F. A person who can legally buy these products gave them to me
 - G. I took them from a store or another person
 - H. I got them some other way

The next 3 questions ask about other tobacco products.

37. During the past 30 days, on how many days did you use **chewing tobacco, snuff, dip, snus, or dissolvable tobacco products**, such as Copenhagen, Grizzly, Skoal, or Camel Snus? (Do not count any electronic vapor products.)
- A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days
38. During the past 30 days, on how many days did you smoke **cigars, cigarillos, or little cigars**?
- A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days
39. During the past 12 months, did you ever try **to quit** using **all** tobacco products, including cigarettes, cigars, smokeless tobacco, shisha or hookah tobacco, and electronic vapor products?
- A. I did not use any tobacco products during the past 12 months
 - B. Yes
 - C. No

The next 5 questions ask about drinking alcohol. This includes drinking beer, wine, wine coolers, and liquor such as rum, gin, vodka, or whiskey. For these questions, drinking alcohol does not include drinking a few sips of wine for religious purposes.

40. How old were you when you had your first drink of alcohol other than a few sips?
- A. I have never had a drink of alcohol other than a few sips
 - B. 8 years old or younger
 - C. 9 or 10 years old
 - D. 11 or 12 years old
 - E. 13 or 14 years old
 - F. 15 or 16 years old
 - G. 17 years old or older

41. During the past 30 days, on how many days did you have at least one drink of alcohol?
- A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days
42. During the past 30 days, on how many days did you have **4** or more drinks of alcohol in a row, that is, within a couple of hours (if you are **female**) or **5** or more drinks of alcohol in a row, that is, within a couple of hours (if you are **male**)?
- A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 to 5 days
 - E. 6 to 9 days
 - F. 10 to 19 days
 - G. 20 or more days
43. During the past 30 days, what is the largest number of alcoholic drinks you had in a row, that is, within a couple of hours?
- A. I did not drink alcohol during the past 30 days
 - B. 1 or 2 drinks
 - C. 3 drinks
 - D. 4 drinks
 - E. 5 drinks
 - F. 6 or 7 drinks
 - G. 8 or 9 drinks
 - H. 10 or more drinks
44. During the past 30 days, how did you **usually** get the alcohol you drank?
- A. I did not drink alcohol during the past 30 days
 - B. I bought it in a store such as a liquor store, convenience store, supermarket, discount store, or gas station
 - C. I bought it at a restaurant, bar, or club
 - D. I bought it at a public event such as a concert or sporting event
 - E. I gave someone else money to buy it for me
 - F. Someone gave it to me
 - G. I took it from a store or family member
 - H. I got it some other way

The next 3 questions ask about marijuana use. Marijuana also is called pot, weed, or cannabis.

45. During your life, how many times have you used marijuana?
- A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 to 99 times
 - G. 100 or more times
46. How old were you when you tried marijuana for the first time?
- A. I have never tried marijuana
 - B. 8 years old or younger
 - C. 9 or 10 years old
 - D. 11 or 12 years old
 - E. 13 or 14 years old
 - F. 15 or 16 years old
 - G. 17 years old or older
47. During the past 30 days, how many times did you use marijuana?
- A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times

The next question asks about synthetic marijuana use. Synthetic marijuana also is called Spice, fake weed, K2, King Kong, Yucatan Fire, or Skunk.

48. During your life, how many times have you used synthetic marijuana?
- A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times

The next question asks about the use of prescription pain medicine without a doctor's prescription or differently than how a doctor told you to use it. For this question, count drugs such as codeine, Vicodin, OxyContin, Hydrocodone, and Percocet.

49. During your life, how many times have you taken **prescription pain medicine** without a doctor's prescription or differently than how a doctor told you to use it?
- A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times

The next 8 questions ask about other drugs.

50. During your life, how many times have you used **any** form of cocaine, including powder, crack, or freebase?
- A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times
51. During your life, how many times have you sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high?
- A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times
52. During your life, how many times have you used **heroin** (also called smack, junk, or China White)?
- A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times

53. During your life, how many times have you used **methamphetamines** (also called speed, crystal meth, crank, ice, or meth)?
- A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times
54. During your life, how many times have you used **ecstasy** (also called MDMA)?
- A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times
55. During your life, how many times have you taken **steroid pills or shots** without a doctor's prescription?
- A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times
56. During your life, how many times have you used a needle to inject any **illegal** drug into your body?
- A. 0 times
 - B. 1 time
 - C. 2 or more times
57. During the past 12 months, has anyone offered, sold, or given you an illegal drug **on school property**?
- A. Yes
 - B. No

The next 9 questions ask about sexual behavior.

58. Have you ever had sexual intercourse?
- A. Yes
 - B. No

59. How old were you when you had sexual intercourse for the first time?
- A. I have never had sexual intercourse
 - B. 11 years old or younger
 - C. 12 years old
 - D. 13 years old
 - E. 14 years old
 - F. 15 years old
 - G. 16 years old
 - H. 17 years old or older
60. During your life, with how many people have you had sexual intercourse?
- A. I have never had sexual intercourse
 - B. 1 person
 - C. 2 people
 - D. 3 people
 - E. 4 people
 - F. 5 people
 - G. 6 or more people
61. During the past 3 months, with how many people did you have sexual intercourse?
- A. I have never had sexual intercourse
 - B. I have had sexual intercourse, but not during the past 3 months
 - C. 1 person
 - D. 2 people
 - E. 3 people
 - F. 4 people
 - G. 5 people
 - H. 6 or more people
62. Did you drink alcohol or use drugs before you had sexual intercourse the **last time**?
- A. I have never had sexual intercourse
 - B. Yes
 - C. No
63. The **last time** you had sexual intercourse, did you or your partner use a condom?
- A. I have never had sexual intercourse
 - B. Yes
 - C. No

64. The **last time** you had sexual intercourse, what **one** method did you or your partner use to **prevent pregnancy**? (Select only **one** response.)
- A. I have never had sexual intercourse
 - B. No method was used to prevent pregnancy
 - C. Birth control pills
 - D. Condoms
 - E. An IUD (such as Mirena or ParaGard) or implant (such as Implanon or Nexplanon)
 - F. A shot (such as Depo-Provera), patch (such as Ortho Evra), or birth control ring (such as NuvaRing)
 - G. Withdrawal or some other method
 - H. Not sure
65. During your life, with whom have you had sexual contact?
- A. I have never had sexual contact
 - B. Females
 - C. Males
 - D. Females and males
66. Which of the following best describes you?
- A. Heterosexual (straight)
 - B. Gay or lesbian
 - C. Bisexual
 - D. Not sure

The next 2 questions ask about body weight.

67. How do **you** describe your weight?
- A. Very underweight
 - B. Slightly underweight
 - C. About the right weight
 - D. Slightly overweight
 - E. Very overweight
68. Which of the following are you trying to do about your weight?
- A. **Lose** weight
 - B. **Gain** weight
 - C. **Stay** the same weight
 - D. I am **not trying to do anything** about my weight

The next 9 questions ask about food you ate or drank during the past 7 days. Think about all the meals and snacks you had from the time you got up until you went to bed. Be sure to include food you ate at home, at school, at restaurants, or anywhere else.

69. During the past 7 days, how many times did you drink **100% fruit juices** such as orange juice, apple juice, or grape juice? (Do **not** count punch, Kool-Aid, sports drinks, or other fruit-flavored drinks.)
- A. I did not drink 100% fruit juice during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
70. During the past 7 days, how many times did you eat **fruit**? (Do **not** count fruit juice.)
- A. I did not eat fruit during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
71. During the past 7 days, how many times did you eat **green salad**?
- A. I did not eat green salad during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
72. During the past 7 days, how many times did you eat **potatoes**? (Do **not** count french fries, fried potatoes, or potato chips.)
- A. I did not eat potatoes during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day

73. During the past 7 days, how many times did you eat **carrots**?
- A. I did not eat carrots during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
74. During the past 7 days, how many times did you eat **other vegetables**? (Do **not** count green salad, potatoes, or carrots.)
- A. I did not eat other vegetables during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
75. During the past 7 days, how many times did you drink a **can, bottle, or glass of soda or pop**, such as Coke, Pepsi, or Sprite? (Do **not** count diet soda or diet pop.)
- A. I did not drink soda or pop during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
76. During the past 7 days, how many **glasses of milk** did you drink? (Count the milk you drank in a glass or cup, from a carton, or with cereal. Count the half pint of milk served at school as equal to one glass.)
- A. I did not drink milk during the past 7 days
 - B. 1 to 3 glasses during the past 7 days
 - C. 4 to 6 glasses during the past 7 days
 - D. 1 glass per day
 - E. 2 glasses per day
 - F. 3 glasses per day
 - G. 4 or more glasses per day

77. During the past 7 days, on how many days did you eat **breakfast**?
- A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days
 - G. 6 days
 - H. 7 days

The next 5 questions ask about physical activity.

78. During the past 7 days, on how many days were you **physically active** for a total of **at least 60 minutes per day**? (Add up all the time you spent in any kind of physical activity that increased your heart rate and made you breathe hard some of the time.)
- A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days
 - G. 6 days
 - H. 7 days
79. On an average school day, how many hours do you watch TV?
- A. I do not watch TV on an average school day
 - B. Less than 1 hour per day
 - C. 1 hour per day
 - D. 2 hours per day
 - E. 3 hours per day
 - F. 4 hours per day
 - G. 5 or more hours per day
80. On an average school day, how many hours do you play video or computer games or use a computer for something that is not school work? (Count time spent playing games, watching videos, texting, or using social media on your smartphone, computer, Xbox, PlayStation, iPad, or other tablet.)
- A. I do not play video or computer games or use a computer for something that is not school work
 - B. Less than 1 hour per day
 - C. 1 hour per day
 - D. 2 hours per day
 - E. 3 hours per day
 - F. 4 hours per day
 - G. 5 or more hours per day

81. In an average week when you are in school, on how many days do you go to physical education (PE) classes?
- A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days
82. During the past 12 months, on how many sports teams did you play? (Count any teams run by your school or community groups.)
- A. 0 teams
 - B. 1 team
 - C. 2 teams
 - D. 3 or more teams

The next question asks about concussions. A concussion is when a blow or jolt to the head causes problems such as headaches, dizziness, being dazed or confused, difficulty remembering or concentrating, vomiting, blurred vision, or being knocked out.

83. During the past 12 months, how many times did you have a concussion **from playing a sport or being physically active**?
- A. 0 times
 - B. 1 time
 - C. 2 times
 - D. 3 times
 - E. 4 or more times

The next 6 questions ask about other health-related topics.

84. Have you ever been tested for HIV, the virus that causes AIDS? (Do **not** count tests done if you donated blood.)
- A. Yes
 - B. No
 - C. Not sure
85. During the past 12 months, have you been tested for a sexually transmitted disease (STD) other than HIV, such as chlamydia or gonorrhea?
- A. Yes
 - B. No
 - C. Not sure

86. When was the last time you saw a dentist for a check-up, exam, teeth cleaning, or other dental work?
- A. During the past 12 months
 - B. Between 12 and 24 months ago
 - C. More than 24 months ago
 - D. Never
 - E. Not sure
87. Has a doctor or nurse ever told you that you have asthma?
- A. Yes
 - B. No
 - C. Not sure
88. On an average school night, how many hours of sleep do you get?
- A. 4 or less hours
 - B. 5 hours
 - C. 6 hours
 - D. 7 hours
 - E. 8 hours
 - F. 9 hours
 - G. 10 or more hours
89. During the past 12 months, how would you describe your grades in school?
- A. Mostly A's
 - B. Mostly B's
 - C. Mostly C's
 - D. Mostly D's
 - E. Mostly F's
 - F. None of these grades
 - G. Not sure

**This is the end of the survey.
Thank you very much for your help.**

Appendix L: 2019 High School Youth Risk Behavior Survey Results

| Behavior | Chatham Middle Schools (%) | NC Middle Schools (%) |
|---|----------------------------|-----------------------|
| Rarely or never wore a bicycle helmet (among students who had ridden a bicycle) | 68.4 | 64.9 |
| Rarely or never wore a helmet when rollerblading or skateboarding (among students who used rollerblades or rode a skateboard) | 74.8 | 72.3 |
| Rarely or never wore a seat belt (when riding in a car) | 4.4 | 5.3 |
| Ever rode with a driver who had been drinking alcohol (in a car) | 21.7 | 19.3 |
| Ever carried a weapon (such as a gun, knife, or club) | 36.0 | 31.4 |
| Were ever in a physical fight | 43.2 | 47.2 |
| Were ever bullied on school property | 46.9 | 46.2 |
| Were ever electronically bullied (counting being bullied through texting, Instagram, Facebook, or other social media) | 24.0 | 22.0 |
| Ever seriously thought about killing themselves | 26.1 | 23.4 |
| Ever made a plan about how they would kill themselves | 18.8 | 16.3 |
| Ever tried to kill themselves | 13.6 | 11.5 |
| Currently smoke cigarettes (on at least 1 day in past 30 days) | 4.1 | 4.4 |
| Currently smoke cigarettes frequently (on 20 or more days in past 30 days) | 0.3 | 0.4 |
| Currently smoke cigarettes daily (on all 30 days in past 30 days) | 0.3 | 0.4 |
| Ever used an electronic vapor product | 24.9 | 25.4 |
| Currently use an electronic vapor product (on at least 1 day in past 30 days) | 12.8 | 14.4 |
| Currently use electronic vapor products frequently (on 20 or more days in past 30 days) | 1.6 | 1.6 |
| Currently use electronic vapor products daily (on all 30 days in past 30 days) | 1.3 | 1.0 |
| Currently smoke cigarettes or use electronic vapor products (on at least 1 day in past 30 days) | 15.2 | 16.8 |
| Ever drank alcohol (other than a few sips) | 23.2 | 20.4 |
| Drank alcohol for the first time before age 11 years (other than a few sips) | 9.9 | 7.4 |
| Ever used marijuana | 9.2 | 10.5 |
| Tried marijuana for the first time before age 11 years | 2.5 | 2.5 |
| Ever took prescription pain medicine without a doctor's prescription or differently than how a doctor told them to use it (counting drugs such as codeine, Vicodin, Oxycontin, hydrocodone, and Percocet) | 8.8 | 8.0 |
| Ever used cocaine (any form of cocaine, including powder, crack, or freebase) | 2.0 | 1.0 |
| Ever used inhalants (sniffed glue, breathed the contents of spray cans, or inhaled any paints or sprays to get high) | 8.1 | 6.5 |
| Ever had sexual intercourse | 7.2 | 10.3 |
| Described themselves as slightly or very overweight | 30.2 | 28.3 |
| Were trying to lose weight | 49.1 | 45.5 |
| Did not eat breakfast (in past 7 days) | 18.5 | 12.4 |
| Ate breakfast on all 7 days (in past 7 days) | 34.9 | 43.4 |
| Were physically active at least 60 minutes per day on 5 or more days (in any kind of physical activity that increased their heart rate and made them breathe hard some of the time in past 7 days) | 57.1 | 54.9 |
| Did not participate in at least 60 minutes of physical activity on at least 1 day (in any kind of physical activity that increased their heart rate and made them breathe hard some of the time in past 7 days) | 8.1 | 12.2 |

Appendix L: 2019 High School Youth Risk Behavior Survey Results

| | | |
|--|------|------|
| Were physically active at least 60 minutes per day on all 7 days (in any kind of physical activity that increased their heart rate and made them breathe hard some of the time in past 7 days) | 31.7 | 30.3 |
| Watched television 3 or more hours per day (on an average school day) | 19.7 | 26.3 |
| Played video or computer games or used a computer 3 or more hours per day (counting time spent on things such as playing games, watching videos, texting, or using social media on their smartphone, computer, Xbox, playstation, ipad, or other tablet, for something that was not school work, on an average school day) | 46.5 | 49.4 |
| Attended physical education (PE) classes on 1 or more days (in an average week when they were in school) | 77.3 | 73.7 |
| Attended physical education (PE) classes on all 5 days (in an average week when they were in school) | 32.0 | 54.9 |
| Played on at least one sports team (counting any teams run by their school or community groups, during the past 12 months before the survey) | 56.7 | 56.0 |
| Had ever been told by a doctor or nurse that they had asthma | 20.5 | 22.8 |
| Got 8 or more hours of sleep (on an average school night) | 45.6 | 50.4 |
| Described their grades in school as mostly A's or B's (in past 12 months) | 81.0 | -- |
| Were threatened or injured by someone with a weapon on school property (such as a gun, knife, or club, in past 12 months) | 6.7 | -- |
| Did not go to school because they felt they would be unsafe at school or on their way to or from school (in past 30 days) | 5.0 | -- |
| Reported that there is gang activity in their school | 10.8 | -- |
| Have seen other students being bullied in their school | 59.8 | -- |
| Have ever been the victim of teasing or name calling because someone thought they were gay, lesbian, or bisexual | 26.2 | -- |
| Felt sad or hopeless (almost every day for ≥ 2 weeks in a row so that they stopped doing some usual activities, ever in past 12 months) | 32.4 | -- |
| Usually got the alcohol they drank by someone giving it to them (in past 30 days, among students who currently drink alcohol) | 30.9 | -- |
| Used marijuana (in past 30 days) | 6.6 | -- |
| Were offered, sold, or given an illegal drug on school property (in past 12 months) | 6.7 | -- |
| Have been taught about abstaining from sexual activity | 49.9 | -- |
| Have been taught about AIDS or HIV infection in school | 53.4 | -- |
| Have been taught about chlamydia, gonorrhea, syphilis, human papillomavirus, or genital warts | 34.1 | -- |
| Usually talk with their parent or other adult family member when they have questions about sexually transmitted diseases (STD), HIV, AIDS, or pregnancy prevention (among students who have questions about sexually transmitted diseases (STD), HIV, AIDS, or pregnancy prevention) | 52.7 | -- |
| Reported their parents or other adults in their family talked with them about what they expect them to do or not to do when it comes to sex | 39.1 | -- |
| Have ever exercised to lose weight or to keep from gaining weight | 72.5 | -- |
| Have ever eaten less food, fewer calories, or foods low in fat to lose weight or to keep from gaining weight | 50.5 | -- |
| Have ever gone without eating for 24 hours or more to lose weight or to keep from gaining weight (also called fasting) | 19.0 | -- |
| Usually walk or ride their bike to school one or more days per week | 17.0 | -- |
| Reported that some of their classroom teachers provide short physical activity breaks during regular class time (not counting their physical education teacher) | 31.5 | -- |
| Consider themselves to have a disability | 11.8 | -- |

Appendix L: 2019 High School Youth Risk Behavior Survey Results

| | | |
|--|------|----|
| Are limited in any way in any activities because of a disability or health problem | 8.2 | -- |
| Have trouble learning, remembering, or concentrating because of a disability or health problem | 13.0 | -- |
| Had been told by a doctor or nurse that they had asthma and who still have asthma | 10.4 | -- |
| Saw a doctor or nurse (for a check-up or physical exam when they were not sick or injured in past 12 months) | 64.1 | -- |
| Saw a dentist (for a check-up, exam, teeth cleaning, or other dental work, in past 12 months) | 71.9 | -- |
| Are alone after school without a parent or adult three or more hours per day on an average school day | 12.1 | -- |
| Participate in school activities other than sports (such as band, drama, clubs, or student government) | 53.7 | -- |
| Would most likely talk with their parent or other adult family member about their feelings (among students who report having felt sad, empty, hopeless, angry, or anxious) | 27.7 | -- |
| Strongly agree or agree that they feel good about themselves | 55.4 | -- |
| Disagree or strongly disagree that they feel alone in their life | 56.5 | -- |
| Strongly agree or agree that their teachers really care about them and give them a lot of encouragement | 50.5 | -- |
| Did not usually sleep in their parent's or guardian's home (in past 30 days) | 2.8 | -- |
| Never saw a dentist (for a check-up, exam, teeth cleaning, or other dental work) | 1.3 | -- |

Appendix M: Chatham County Community Assessment Survey Methods

Background and Objectives

The Chatham County Community Survey (CCCS), also referred to as the Community Health Opinion Survey (CHOS), was collected using the Chatham Community Assessment (CA) cohort, which was initiated in 2018 through a structured protocol approved by the Chatham County Health Director and the Scientific Advisory Committee. The original cohort was designed using a stratified cluster sampling scheme, conducting a two-stage cluster sample in each of three strata of census blocks apportioned into low, middle, and high median household income, as measured at the census block group. The initial sampling identified 441 households and recruited 341 in the initial cohort – which, due to multiple non-response to subsequent surveys in 2019 and 2020 and migration out of the cohort, had declined to 244 remaining cohort participants in Fall 2021.

The protocol established a framework and methodology to ensure that the cohort continues to be a representative sample of the Chatham County population. The 2021 CA was an opportunity to revisit the original sampling scheme and modify the sampling scheme to reflect recent changes in the population throughout Chatham County using the 2020 decennial census data and the *anticipated* release of the accompanying American Community Survey (ACS) 2020 5-year estimates (2016-2020) in December 2021. Due to the delay in the 2020 ACS data (released March 2022) the 2019 ACS 5-year estimates were used instead.

The objectives of the resampling plan for the 2021 CA were to:

- 1) Replace lost to follow-up and other administratively censored households from the initial selection of addresses (*e.g.*, those who declined to participate, withdrew from the cohort, moved out of County, or died) within each originally selected census block;
- 2) Review the most current median household income data and restructure the median household income tertiles to ensure an even number of selected census blocks were selected; and,
- 3) Select new blocks to grow the cohort and increase representation from underrepresented populations in Chatham County, incorporating probability proportionate to size (PPS) sampling based on the proportion of Black and Hispanic or Latino populations within each census block.

In addition to the resampling plan and subsequent survey of the CA cohort, the 2021 CA also included a concurrent community-wide survey to allow for participation and involvement of Chatham County residents beyond those the cohort. The survey methodology is documented at the end of this appendix.

Participant Replacement & Tertile Realignment

Given the 244 cohort participants remaining in Fall 2020, a total of 197 replacement households were needed to return to the originally selected sample size of 441 households (147 households from 21 selected clusters in each tertile). Between 2018 and 2021, there was 72% retention of cohort participants, and comparable retention across tertiles. The tertile-specific enrollment and replacement numbers are shown below in Table 1.

Table 1. Chatham Community Assessment Cohort original sampling (2018) and replacement needs (2021).

| Economic Stratum | Median Household Income in 2018 ¹ | Census Blocks Sampled in 2018 ² | Households Selected in 2018 | Participants ³ Enrolled in 2018 | Participants Enrolled in 2021 | Households Needed for Replacement |
|--------------------|--|--|-----------------------------|--|-------------------------------|-----------------------------------|
| Low (Tertile 1) | \$21,419 - \$46,579 | 20 | 147 | 106 | 76 | 71 |
| Medium (Tertile 2) | \$46,578 - \$56,929 | 20 | 147 | 112 | 78 | 69 |
| High (Tertile 3) | \$59,930 - \$108,953 | 21 | 147 | 123 | 90 | 57 |
| Total | \$21,419 - \$108,953 | 61 | 441 | 341 | 244 | 197 |

¹ 2018 data were based on census block group data estimates applied to census blocks using American Community Survey 5-year estimates (2011-2015), Table B19013.

² Two clusters in Tertile 1 and Tertile 2 were sampled twice in the original selection.

³ While households were selected and are the primary unit of analysis, cohort members are referred to as participants, representing their households.

Beyond replacement of original cohort participants, the cohort protocol outlined a process to review current data and modify the sampling of the cohort to reflect changing demographics for the 2021 cohort sample. The 2020 Decennial Census afforded an opportunity to obtain the most current population data, along with the accompanying 2020 ACS estimates for median household income. The delay in the release of the 2020 ACS estimates resulted in the use of the 2019 ACS 5-year estimates to assess changes in median household income.

The initial sampling design and apportioning of census blocks into economic tertiles used the 2016 ACS 5-year estimates, which were aligned to the 2010 census boundaries. Changes in median household income at the census block group level between the 2016 and 2019 ACS 5-year estimates were assessed across Chatham County and resulted in an uneven number of clusters in each tertile. These changes were incorporated into the realignment and resampling for the 2021 CA, and the realignment is shown in Table 2, noting the changes in the binning of the tertiles based on the updated median household income.

Table 2. Chatham Community Assessment Cohort tertile realignment based on median household income.

| Economic Stratum | Median Household Income in 2018 ¹ | Census Blocks Sampled in 2018 ² | Median Household Income in 2021 ³ | Census Blocks Realigned in 2021 ⁴ | Additional Census Blocks Added for 2021 Expansion ⁵ |
|--------------------|--|--|--|--|--|
| Low (Tertile 1) | \$21,419 - \$46,579 | 20 | \$20,676 - \$50,617 | 18 | 26 |
| Medium (Tertile 2) | \$46,578 - \$56,929 | 20 | \$50,618 - \$72,739 | 21 | 25 |
| High (Tertile 3) | \$59,930 - \$108,953 | 21 | \$72,740 - \$129,079 | 22 | 25 |
| Total | \$21,419 - \$108,953 | 61 | \$20,676 - \$129,079 | 61 | 76 |

Appendix M: Chatham County Community Assessment Survey Methods

¹ 2018 data were based on census block group data estimates applied to census blocks using American Community Survey 5-year estimates (2011-2015), Table B19013.

² Two clusters in Tertile 1 and Tertile 2 were sampled twice in the original selection.

³ 2021 data were based on census block group data estimates applied to census blocks using American Community Survey 5-year estimates (2015-2019), Table B19013.

⁴ The two double sampled clusters shifted to Tertile 2 and Tertile 3

⁵ Census blocks added for expansion were selected with probability proportionate to the share of Black and Hispanic or Latino population in a given census block.

To preserve the equal number of selected blocks within each stratum of median household income, and to further grow the cohort, additional census blocks were sampled for inclusion in the 2021 CA cohort. Within each tertile, additional blocks were added to obtain 26 sampled blocks (or 25 for tertiles 2 and 3 with the double sampled clusters from 2018). These additional census blocks were sampled with probability proportionate to the Black and Hispanic or Latino population, based on 2020 population estimates adapted to existing census block boundaries. The final sample for the 2021 CA cohort – including existing cohort participants, replacements of those lost to follow-up, and newly selected households – was 546 households from 76 census blocks in Chatham County. This number is based on an equal number of households (7) per census block, accounting for the two census blocks that were double sampled (14 households for each block). The distribution of the selected blocks and their respective tertiles of median household income, are shown in Figure 1, both for 2018 and 2021.

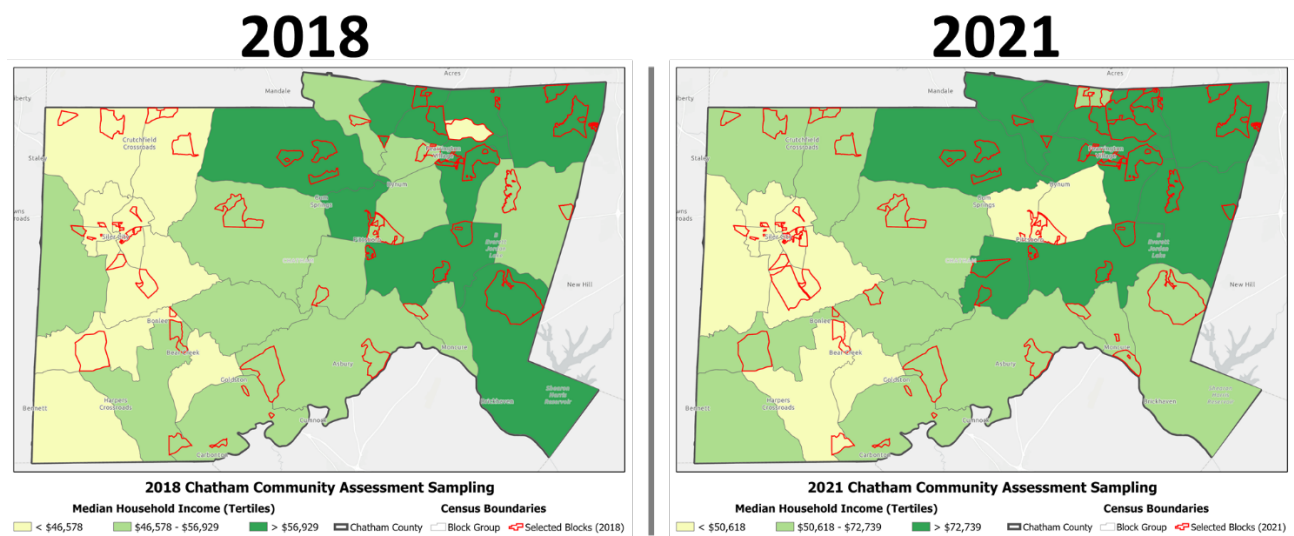


Figure 1. Chatham Community Assessment cohort census block selection, 2018 (left panel) and 2019 (right panel).

Survey Administration

In Fall 2021, given a surge in COVID-19 and elevated community transmission, the decision was made to forego in-person data collection and reach out to cohort members through mail, phone, and email. Phone number, preferred mailing address, and emails were available from the existing cohort members. For the newly selected households the residential address from Chatham County tax parcel data was

Appendix M: Chatham County Community Assessment Survey Methods

used for mailing and phone numbers, for matching addresses, were appended based on the most recent (October 2021) N.C. voter registration data from the N.C. State Board of Elections, as available.

In-person surveying has traditionally been a critical method to collect responses for the CA cohort. With the resampling and new additions to the cohort, a low response rate, in the absence of in-person surveying, was anticipated. To account for this, each of the clusters were oversampled by four times the original selection, with an oversampling from 7 to 28 households. For selected clusters with less than 28 households, all were selected as part of the oversample. This most commonly occurred in tertile 2, as shown in Table 3.

Table 3. Final sampling numbers, based on realignment, expansion, and oversampling for the 2021 Chatham Community Assessment Cohort.

| Economic Stratum | Median Household Income in 2021 ¹ | Census Blocks Realigned in 2021 ² | Additional Census Blocks Added for 2021 Expansion ³ | Households Selected in 2021 | Total Households Including Oversampling in 2021 ⁴ |
|--------------------|--|--|--|-----------------------------|--|
| Low (Tertile 1) | \$20,676 - \$50,617 | 18 | 26 | 182 | 628 |
| Medium (Tertile 2) | \$50,618 - \$72,739 | 21 | 25 | 182 | 570 |
| High (Tertile 3) | \$72,740 - \$129,079 | 22 | 25 | 182 | 662 |
| Total | \$20,676 - \$129,079 | 61 | 76 | 546 | 1860 |

¹ 2021 data were based on census block group data estimates applied to census blocks using American Community Survey 5-year estimates (2015-2019), Table B19013.

² The two double sampled clusters shifted to Tertile 2 and Tertile 3

³ Census blocks added for expansion were selected with probability proportionate to the share of Black and Hispanic or Latino population in a given census block.

⁴ Households were oversampled four times the initial sample or until all households in a census block were exhausted.

The CA survey was open for a total of 8 weeks, from October 18, 2021 to December 10, 2021, and 394 eligible responses were received through online survey, mailed hardcopy survey, and phone interview. Individual and household weights were constructed for each response based on the inverse probability of selection based on the sampling methodology. These results are included in the CCCS results appendix of the report.

In response to community feedback and overall CCPHD goals to address health equity through inclusion of diverse communities, a supplemental survey was administered concurrent with the CA survey. This survey was open to any adult living in Chatham County and included selected questions about community health concerns from the CA survey. A total of 207 survey responses were collected in the supplemental survey, with responses from a more diverse population than the CA cohort with a greater representation from Black and Hispanic or Latino respondents. The unweighted results of the supplemental survey were paired with the CA survey results for shared questions, and included in this report.

Appendix N: Chatham County Community Assessment Resource List (Winter 2021)

AGING

| CHATHAM COUNTY COUNCIL ON AGING www.chathamcouncilonaging.org | | | |
|---|--|-------------------------------|---|
| Western Chatham Senior Center | 112 Village Lake Road, Siler City, NC 27344 Phone: (919) 742-3975 | Eastern Chatham Senior Center | 365 NC Highway 87 N Phone: (919) 542-4512 |
| Resources | <ul style="list-style-type: none"> - Home-based services include in-home aide personal care, Meals on Wheels or home-delivered meals, minor home repair and loaning mobility and assistive equipment - Health, wellness, nutrition, recreational, educational and social programs and activities for seniors at Senior Centers - Referrals for other services - Support for family caregivers through respite, support groups, trainings and more | | |
| PIEDMONT HEALTH SENIORCARE www.piedmonthalthseniorcare.org | | | |
| LOCATION | 163 Chatham Business Dr, Pittsboro, NC 27312 | CONTACT | Phone: (919) 545-7337 Toll Free: (877) 714-2100 |
| Resources | <ul style="list-style-type: none"> - Medical and social services while helping seniors live at home. - Provide seniors with comprehensive long-term health, social, medical and dietary care. - All participants receive individualized plan of care. | | |
| TRANSITIONS LIFECARE www.transitionslifecare.org | | | |
| LOCATION | 200 Hospice Circle, Raleigh, NC 27607 | CONTACT | Phone: (919) 828-0890 Toll Free: (888) 900-3959 |
| Resources | <ul style="list-style-type: none"> - Palliative Care: Consultative service that provides an extra layer of support in a hospital, clinic, or home. Preventing and relieving symptoms to provide an improved quality of life. - Home Health: Individualized home health support for patients coping with skilled nursing and/or rehabilitative therapy need. - Hospice Care: General inpatient, short-stay routine and respite care at Raleigh facility. - Transitions Kids: Palliative and hospice care to children and families impacted by illness or loss. Designed for patients aged 0-18. | | |

TRANSPORTATION

| CHATHAM TRANSIT www.chathamtransit.org | | | |
|---|---|----------------|-----------------------|
| LOCATION | 127 Martin Luther King Jr. Dr, Pittsboro, N.C. 27312 | CONTACT | Phone: (919) 542-5136 |
| Resources | <ul style="list-style-type: none"> - Transportation options for county residents, utilizing vans, lift vans and light transit vehicles with and without lifts. - In-County: A reservation service from any location in Chatham County to any location in Chatham County. Fares charged per mile, available from 8 AM to 4:30 PM each weekday. - CT Express: Regularly-scheduled rides to and from certain locations in and around Chatham County. Locations include Lowe’s Home Improvement in Pittsboro, the UNC Parking Deck and Ridge Road. See full list: www.chathamtransit.org/ct-express | | |

HOUSING

| CHATHAM COUNTY HOUSING AUTHORITY www.chathamcountyhousingauthority-nc.org | | | |
|--|--|----------------|-----------------------|
| LOCATION | 13450 US Highway 64, Siler City, NC 27344 | CONTACT | Phone: (919) 742-1236 |
| Resources | <ul style="list-style-type: none"> - Provides Housing Choice or Section 8 Vouchers, subsidies given to individuals and families to assist in securing Section 8 housing. - Provides Veterans Affairs Supportive Housing Vouchers, housing assistance for homeless veterans that includes connecting them to a local VA medical center. | | |

| CHATHAM HABITAT FOR HUMANITY www.chathamhabitat.org | | | |
|--|--|----------------|-----------------------|
| LOCATION | 467 West Street, Pittsboro, NC 27312 | CONTACT | Phone: (919) 542-0794 |
| Resources | <ul style="list-style-type: none"> - Homeownership Program: Builds homes along with families who demonstrate a need for affordable housing, the ability to pay and a willingness to partner. Includes classes on homeownership. - ReStore: Stores that sell merchandise like furniture, appliances, home goods, electronics, building materials, hardware, paint and more at a reasonable price. | | |

| CENTRAL PIEDMONT COMMUNITY ACTION www.cpcanc.org | | | |
|---|---|----------------|-----------------------|
| LOCATION | 1401 Ross Avenue, Siler City, NC 27344 | CONTACT | Phone: (919) 742-2277 |
| Resources | <ul style="list-style-type: none"> - Rapid Re-housing Program: Assists with housing relocation and stabilization services and short or medium-term rental support as necessary to help individuals or families living in shelters or in places not meant for human habitation move as quickly as possible into permanent housing and achieve stability in that housing. - Self-Sufficiency Program: Through intensive case management, guidance, and referrals, low-income individuals and families are assisted to transition from poverty to economic security. Offerings include trainings in money management, workforce readiness and short-term job skills. - Weatherization Assistance Program: Assists low-income families and individuals improve their comfort level and lower energy costs through the provisions of energy conservation measures and heating/air repair and replacement. | | |

| SALVATION ARMY OF CHATHAM COUNTY www.salvationarmycarolinas.org/greensboro/chatham | | | |
|---|--|----------------|---|
| LOCATION | 2535 Old US Highway 421 N, Siler City, NC 27344 | CONTACT | Phone: (919) 542-1593 or (919) 548-6856 |
| Resources | <ul style="list-style-type: none"> - Crisis Assistance: Clients can apply for emergency assistance for rent and utilities. Qualification guidelines apply. - Clothing Assistance: Clothing voucher issued under conditions. Offered Tuesdays and Thursdays from 9 am to 12 pm. - Hotel Voucher: Determination based on need, funding, feasibility and follow-up plan. | | |

NUTRITION/HEALTHY EATING

| CHATHAM COUNTY PUBLIC HEALTH DEPARTMENT www.chathamcountync.gov/wellness | | | |
|---|--|----------------|-----------------------|
| LOCATION | 1000 S. Tenth Avenue, Siler City, NC 27344 | CONTACT | Phone: (919) 742-5641 |
| Resources | <ul style="list-style-type: none"> - Nutrition Counseling: Registered Dietitian provides nutrition therapy to prevent or manage many health conditions. Create personalized plan to meet health goals. - Diabetes Prevention: 16-week program focuses on how to make better food choices, become more physically active and find ways to manage problems and stress. - Diabetes Self-Management Education: Designed to help people with diabetes manage their health, learn about healthy choices, carbohydrate | | |

| | |
|--|--|
| | counting and much more. Group sessions with registered dietitian. Need physician referral. |
|--|--|

FOOD SERVICES

| CORA FOOD PANTRY www.corafoodpantry.org | | | |
|--|---|----------------|--|
| LOCATION | 40 Camp Drive, Pittsboro, NC 27312 | CONTACT | Phone: (919) 542-5020, Email: info@corafoodpantry.org |
| Resources | <ul style="list-style-type: none"> - Food Pantry: Grocery distribution to families in need. During COVID-9, open Monday, Tuesday, Wednesday, and Thursday between 10 am and 1 pm. Families allowed 2 visits per month. - Mobile Market: Drive-through model food distribution. Families stay in car and groceries are placed in vehicle. <ul style="list-style-type: none"> o 2nd Tuesday of each month: 4-6 pm, 326 Nature Trail, Chapel Hill o 4th Tuesday of each month: 10 am to 12 pm, Technology Way, Siler City | | |

| WEST CHATHAM FOOD PANTRY https://www.facebook.com/WCFoodPantryNC/ | | | |
|---|--|----------------|--|
| LOCATION | 2535 Old US Highway 421 N, Siler City, NC 27344 | CONTACT | Phone: (919) 742-3111, Email: wcfodpantry@gmail.com |
| Resources | - Food pantry and distribution in western Chatham County | | |

| SALVATION ARMY OF CHATHAM COUNTY www.salvationarmycarolinas.org/greensboro/chatham | | | |
|---|--|----------------|---|
| LOCATION | 2535 Old US Highway 421 N, Siler City, NC 27344 | CONTACT | Phone: (919) 542-1593 or (919) 548-6856 |
| Resources | <ul style="list-style-type: none"> - Food Assistance: In collaboration with: <ul style="list-style-type: none"> o West Chatham Food Pantry in Siler City: 4:30-6 pm on Mondays, 12:30-2 pm on Wednesdays, 12:30-2 pm on Fridays o CORA Food Pantry in Pittsboro: 10 am to 2 pm, Monday to Friday | | |

PHYSICAL ACTIVITY

| CHATHAM YMCA www.ymcatriangle.org/locations/chatham-ymca | | | |
|--|--|----------------|-----------------------|
| LOCATION | 287 East Street, Suite 412, Pittsboro, NC 27312 | CONTACT | Phone: (919) 545-9622 |
| Resources | <ul style="list-style-type: none"> - Free weights and strength/cardio equipment. - Group exercise classes in yoga, interval training, Zumba and others. Virtual options during COVID-19. - Kid Zone Care for children 2 months to 10 years from 8:30 am to 11:30 am. - Free 7-day pass for first-timers. | | |

Appendix N: Chatham County Community Assessment Resource List (Winter 2021)

| CHATHAM COUNTY PARKS & RECREATION | | | |
|---|--|----------------|--|
| https://www.chathamcountync.gov/government/departments-programs-i-z/parks-recreation | | | |
| LOCATION | 964 East Street, Suite 100, Pittsboro, NC 27312 | CONTACT | Phone: (919) 545-8555 Email: recreation@chathamcountync.gov |
| Resources | <ul style="list-style-type: none"> - Four district parks, one neighborhood park and three river access sites throughout the county. - Various programs and camps for youth and adults <ul style="list-style-type: none"> o Youth athletics: Basketball, wrestling, track & field, open gym, softball, T-ball, volleyball, tennis o Adult: Co-ed softball, basketball, open gym o Summer camp for youth o Youth instructional programs: Jump rope, after-school art classes o Adult instructional programs: Yoga, Zumba | | |

| SILER CITY PARKS & RECREATION www.silercity.org | | | |
|---|--|----------------|--|
| LOCATION | 311 N. Second Avenue, Siler City, NC 27344 | CONTACT | Phone: (919) 742-2699 Email: recreation@silercity.org |
| Resources | <ul style="list-style-type: none"> - Five parks, two gyms, one pool/aquatic facility, one sports complex, one community center, one greenway. - Youth programs: baseball, softball, t-ball, basketball, football, cheerleading, kickball, Outdoor Storytime, open homeschool recess, Taekwondo for You, Mini Masters Art Camp (summer) - Adult programs: Open-gym basketball, Senior Bridge, open-play pickleball, indoor walking | | |

| PITTSBORO PARKS https://nc-pittsboro.civicplus.com/192/Parks-Recreation | | | |
|--|---|----------------|-----------------------|
| LOCATION | | CONTACT | Phone: (919) 533-5480 |
| Resources | - 7 town parks (1 additional under construction), one greenway, 6 paddle access points, 1 community center for rent, 1 picnic shelter for rent. | | |

| CHISELED GYM AND NUTRITION | | | |
|-----------------------------------|--|----------------|-----------------------|
| LOCATION | 229 W. Third Street, Siler City, NC 27344 | CONTACT | Phone: (919) 704-6880 |
| Resources | Personal trainer and gym. | | |

Appendix N: Chatham County Community Assessment Resource List (Winter 2021)

| JOY OF MOVEMENT STUDIO www.thejoyofmovementcm.com | | | |
|--|--|----------------|---|
| LOCATION | 480 Hillsboro Street, Suite 410, Pittsboro, NC 27312 | CONTACT | Email: infojoyofmovement@gmail.com |
| Resources | <ul style="list-style-type: none"> - Offering in-person and online classes in a number of physical disciplines. <ul style="list-style-type: none"> o Dance: Adult ballet, ballroom and social dancing, belly dancing, inclusive joyful dance, body prayer o Martial arts: T'ai Chi for Body Awareness, Capoeira, Muay chaiya o Meditation o Energy healing o Nia: Expressive, low impact cardio o Yoga | | |

| LADIES' FITNESS CENTER OF PITTSBORO www.ladiesfitnesspittsboro.com | | | |
|---|--|----------------|-----------------------|
| LOCATION | 81 Hillsboro Street, Pittsboro, NC 27312 | CONTACT | Phone: (919) 545-0099 |
| Resources | <ul style="list-style-type: none"> - Women's gym - 24-hour member access to cardio and resistance training equipment - Weekly fitness classes - Individual and small-group personal training | | |

| CHISELED GYM AND NUTRITION | | | |
|-----------------------------------|---|----------------|-----------------------|
| LOCATION | 229 W. Third Street, Siler City, NC 27344 | CONTACT | Phone: (919) 704-6880 |
| Resources | Personal trainer and gym. | | |

MENTAL HEALTH

| Daymark Recovery Services https://www.daymarkrecovery.org/locations/chatham-center | | | |
|--|---|----------------|--|
| LOCATION | 1105 E. Cardinal Street Siler City, NC 27344 | CONTACT | Phone: (919) 663-2955 Hours: M-F, 8 am to 5 pm |
| Resources | <ul style="list-style-type: none"> - Comprehensive clinical assessments, walk-in clinic - Mental health and substance abuse treatment - Outpatient individual and group therapy - 24-Hour Crisis Hotline: (866) 275-9552 Payment Options: <ul style="list-style-type: none"> o Individuals with Medicaid have no obligation for a copay. o Individuals who are uninsured are eligible for a sliding scale or discounted fee | | |

Appendix N: Chatham County Community Assessment Resource List (Winter 2021)

| LOVE CHATHAM (Chatham County NC Homeless Shelters) | | | |
|---|--|---------|---|
| Website: www.chathamhomeless.org | | | |
| LOCATION | | CONTACT | Phone: (929) 726-9976 Email: help@chathamhomeless.org |
| Resources | <ul style="list-style-type: none"> - Upcoming temporary housing program - Free food and clothing distribution - Temporary hotel stays | | |

| El Futuro https://elfuturo-nc.org/appointments-and-referrals/ | | | |
|--|--|---------|-----------------------|
| LOCATION | 40 N. Ivey Avenue, Siler City, NC 27344 | CONTACT | Phone: (919) 688-7101 |
| Resources | <ul style="list-style-type: none"> - Nonprofit outpatient mental health clinic with bilingual services. - Clinic-based services: Comprehensive mental health evaluations; individual, family and group treatment; DWI assessment and treatment; substance abuse evaluation and treatment; psychiatric treatment. | | |

| KidSCOPE https://fcrinc.org/portfolio-items/kidscope-early-intervention/ | | | |
|---|--|---------|-----------------------|
| LOCATION | 220 Chatham Business Dr, Pittsboro, NC 27312 | CONTACT | Phone: (919) 806-6447 |
| Resources | <ul style="list-style-type: none"> - Mental Health Consultation: Free screenings and support to children aged 0-5 whose childcare providers have concerns about their development, behavior or ability to succeed in the classroom. - Mental Health Services: Evidence-based therapies for families with children aged 0-5 which focus on improving the caregiver-child relationship and increasing children's positive behaviors. - Parent Education Support: Free evidence-based program for parents of children aged 0-6. Parents learn skills to promote children's social competence, school readiness and to reduce behavior problems. Offered in English and Spanish, classes focus on play and positive involvement with children, praise and rewards, effective limit setting and non-violent discipline practices. - Inclusive childcare program | | |

Appendix N: Chatham County Community Assessment Resource List (Winter 2021)

| Pinnacle Family Services www.pinnaclefamilyservices.com | | | |
|--|---|---------|-----------------------|
| LOCATION | 3117 Poplarwood Court, Suite 350 Raleigh, NC 27604 | CONTACT | Phone: (919) 790-8580 |
| Resources | <ul style="list-style-type: none"> - Family-Centered Treatment: Home-based mental health treatment for families and youth with mental health diagnoses as well as histories of delinquent behavior. - Fostering Solutions: Treatment for children in therapeutic foster care. Support for foster parents including support from clinical specialists and parent support groups. | | |

| Therapeutic Alternatives www.mytahome.com | | | |
|--|--|---------|-----------------------|
| LOCATION | 962 S. Fayetteville Street, Asheboro, NC 27203 | CONTACT | Phone: (336) 626-1700 |
| Resources | <ul style="list-style-type: none"> - Individualized one-on-one support - Innovations waiver services - Hospital transition team services - Mobile crisis response teams - Psychosocial rehabilitation | | |

| UNC Farm at Penny Lane https://www.med.unc.edu/psych/cecmh/community-and-recovery-services/the-farm-at-penny-lane/ | | | |
|---|---|---------|------------------------------|
| LOCATION | <u>263 Penny Lane, Pittsboro, NC 27312</u> | CONTACT | Phone: <u>(919) 445-0665</u> |
| Resources | <ul style="list-style-type: none"> - <u>Various classes and healing and recovery programs, including</u> <ul style="list-style-type: none"> o <u>Brushes with Life (visual arts)</u> o <u>Music and writing open mics</u> o <u>Farm Crew (gardening skills)</u> o <u>Emotional resiliency skills</u> o <u>Yoga</u> o <u>Cooking</u> o <u>Interpersonal skills through personality theory</u> o <u>Horticultural therapy</u> - PAWS (Peer Assisted Wellness Support): Recovery and rehabilitation program assisting individuals living with psychiatric disabilities, such as schizophrenia, bipolar disorder, major depression and post-traumatic stress. Clients from the UNC Center of Excellence in Community Health trained shelter dogs in performing basic obedience skills, with dogs ultimately being placed in forever homes. - CORA Food Pantry: Food distribution every 2nd Tuesday each month from 10 am to 12 pm and every 4th Tuesday each month from 5:30 pm to 7 pm. - Tiny Homes Village: Providing new affordable housing options for people with mental illness and other | | |

| Youth Villages www.youthvillages.org | | | |
|--|---|----------------|-----------------------|
| LOCATION | 1822 E. NC Highway 54, Suite 300 Durham, NC 27713 | CONTACT | Phone: (919) 474-6400 |
| Resources | <ul style="list-style-type: none"> - Multi-Systemic Therapy: Home-based mental health treatment for youth aged 12-17 who display serious antisocial behaviors and are at-risk of placement out of the home due to their behaviors. - Intercept: Family intervention that involves intensive support, new parenting and communications skills education and mental health intervention services. Serves children aged 0-18 who have serious emotional and behavioral problems or have experienced trauma, including abuse and/or neglect. - LifeSet: Provides support and assistance to teens transitioning out of foster care. | | |

Other Chatham County Mental Health Resources

Website: www.chathamcountync.gov/mentalhealth

SUBSTANCE/ALCOHOL USE

| Daymark Recovery Services https://www.daymarkrecovery.org/locations/chatham-center | | | |
|--|---|----------------|--|
| LOCATION | 1105 E. Cardinal Street, Siler City, NC 27344 | CONTACT | Phone: (919) 663-2955 Hours: M-F, 8 am to 5 pm |
| Resources | <ul style="list-style-type: none"> - Substance abuse treatment - Substance abuse intensive outpatient Payment Options: <ul style="list-style-type: none"> o Individuals with Medicaid have no obligation for a copay. o Individuals who are uninsured are eligible for a sliding scale or discounted fee. | | |

| Chatham Recovery https://www.morseclinics.com/locations/chatham-recovery | | | |
|---|---|----------------|-----------------------|
| LOCATION | 1758 E. 11 th Street, Suite E, Siler City, NC 27344 | CONTACT | Phone: (919) 663-3303 |
| Resources | <ul style="list-style-type: none"> - Daily doses of methadone or buprenorphine, suboxone program - Addiction counseling (individual and group) - Psychiatric services, medication management | | |

TOBACCO USE

Tobacco Cessation Resources In and Outside of Chatham County

Website: www.chathamcountync.gov/quitsmoking

Other Substance Use Resources in Chatham County

Website: www.chathamcountync.gov/recovery

SERVICES FOR IMMIGRANTS

| The Hispanic Liaison/El Vínculo Hispano www.hispanicliaison.org | | | |
|---|--|----------------|-----------------------|
| LOCATION | 200 N. Chatham Avenue, Siler City, NC 27344 | CONTACT | Phone: (919) 742-1448 |
| Resources | <ul style="list-style-type: none"> - Community Support: Offer individualized assistance to immigrants on various issues, help to secure important documents, support families impacted by ICE raids, detentions, and deportations. - Orgullo Latinx Pride Youth Program: Free year-round after-school program for Latinx youth, designed to help them develop leadership skills, succeed academically, and give back to the community. - Advocacy & Civic Engagement: Coordinate leadership, civic engagement and know your rights trainings, case management for families impacted by raids or deportation. - Hispanic Arts & Culture: Host cultural celebrations, workshops, exhibits and festivals to celebrate Hispanic culture, promote cultural pride and community integration. | | |

EQUITY

| Chatham Organizing for Racial Equity www.corenc.org | | | |
|--|--|----------------|--|
| LOCATION | Mailing Address: PO Box 1043, Pittsboro, NC 27312 | CONTACT | Email: info@corenc.org Email: chathamforracialequity@gmail.com |
| Resources | <ul style="list-style-type: none"> - Education: Raises awareness of systemic racism and provides education on strategies to dismantle it. - Organizing: Builds and strengthens relationships with individuals, community groups, religious organizations and nonprofits interested in racial equity issues. - Reconciliation: Utilizes racial identity caucusing to broaden and deepen awareness gained after taking part in racial equity workshops. | | |

| West Chatham NAACP www.cwcnaacp.org | | | |
|--|--|----------------|---|
| LOCATION | <i>Corner of Ross Avenue and Trinity Street Siler City, NC 27344</i> | CONTACT | Email: westchathamnaacp@gmail.com <i>Email: president@ccwcnaacp.org Phone: (919) 451-5250</i> |
| Resources | <ul style="list-style-type: none"> - Branch of the national NAACP located in Siler City. Membership community. - Chapter meets the second Saturday of each month, 10:00AM – Noon at the Central Piedmont Community Action Center | | |

Appendix N: Chatham County Community Assessment Resource List (Winter 2021)

| | |
|---|---|
| Chatham Community NAACP www.crc-c.org/5377.html | |
| LOCATION | CONTACT |
| Resources | - Meetings held fourth Monday of each month at 2:15 pm. |

| | |
|---|---|
| RACE for Equity www.raceforequity.net | |
| LOCATION | CONTACT |
| Resources | Phone: (410) 262-3470 Email: deitre@race4equity.com |
| Resources | - Training and technical assistance for organizations looking to integrate an equity lens into their operations, including evaluation, facilitating results-based strategic planning, leadership and intercultural development and qualitative data documentation |

COVID-19 RESOURCES

Chatham County Public Health Department

COVID-19 Information: (919) 742-5641

COVID-19 Vaccine webpage: www.chathamcountync.gov/coronavirusvaccine

COVID-19 Testing webpage: www.chathamcountync.gov/coronavirustesting

Appendix O: List of Acronyms

| | |
|---------|--|
| AA | Alcoholics Anonymous |
| ACE | Adverse Childhood Experience |
| ACS | American Community Survey |
| AHAC | Chatham County Affordable Housing Advisory Committee |
| AMI | Area Median Income |
| BCCCP | Breast & Cervical Cancer Control Program |
| BMC | Biomedcentral |
| BRFSS | Behavioral Risk Factor Surveillance System |
| CA | Community Assessment |
| CAT | Community Action Team |
| CCAC | Chatham County Climate Change Advisory Committee |
| CCCC | Central Carolina Community College |
| CCCS | Chatham County Community Survey |
| CCEM | Chatham County Emergency Management |
| CCPHD | Chatham County Public Health Department |
| CCTC | Carolina Community Tracing Collaborative |
| CDC | Centers for Disease Control and Prevention |
| CHA | Chatham Health Alliance |
| CHAS | Comprehensive Housing Affordability Strategy |
| CHIP | Community Health Improvement Plan |
| CHNA | Community Health Needs Assessment |
| CHOS | Community Health Opinion Survey |
| COA | Council on Aging |
| CoC | Continuum of Care |
| COPD | Chronic Obstructive Pulmonary Disease |
| CORA | Chatham Outreach Alliance |
| CORE | Chatham Organizing for Racial Equity |
| DSM-5 | Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition |
| DSS | Department of Social Services |
| EC | Exceptional Children |
| ED | Emergency Department |
| EMBRACe | Equity for Moms and Babies Realized Across Chatham |
| EOC | Chatham County Emergency Operations Center |
| EPA | Environmental Protection Agency |
| EUA | Emergency Use Authorization |
| FASD | Fetal Alcohol Spectrum Disorder |
| FDA | United States Food and Drug Administration |
| FVPS | Family Violence Prevention Services |
| GIS | Geographic Information System |
| HIP | Health Impact Priority |

Appendix O: List of Acronyms

| | |
|------------|---|
| HIV | Human immunodeficiency virus |
| HPV | Human Papillomavirus |
| HUD | U.S. Department of Housing and Urban Development |
| I/DD | Intellectual and Developmental Disabilities |
| IPV | Intimate Partner Violence |
| IRS | Internal Revenue Service |
| JAMA | Journal of the American Medical Association |
| KFF | Kaiser Family Foundation |
| LGBTQ+ | Lesbian, Gay, Bisexual, Transgender, Queer, etc. |
| LME/MCO | Local Management Organization/Managed Care Organization |
| MMWR | Morbidity and Mortality Weekly Report |
| MRLC | Multi-Resolution Land Characteristics |
| mRNA | messenger ribonucleic acid |
| NC | North Carolina |
| NC DETECT | North Carolina Disease Event Tracking and Epidemiologic Collection Tool |
| NCDHHS | North Carolina Department of Health and Human Services |
| NCDOT | North Carolina Department of Transportation |
| NCGS | North Carolina Geodetic Survey |
| NCIPH | North Carolina Institute of Public Health |
| NHTSA | National Highway Traffic Safety Administration |
| PFAS | per- and polyfluoroalkyl substances |
| PHS | Piedmont Health Services |
| PLACES | Population Level Analysis and Community Estimates |
| ppt | parts per trillion |
| Q3 | Third quarter |
| RTT | Rebuilding Together of the Triangle |
| SAC | Scientific Advisory Committee |
| SAMHSA | Substance Abuse and Mental Health Services Administration |
| SARS-CoV-2 | severe acute respiratory syndrome coronavirus 2 |
| SFGR | Spotted Fever Group Rickettsiosis |
| SMY | Sexual minority youth |
| SRH | Sexual and reproductive health |
| STI | Sexually-transmitted infection |
| TB | Tuberculosis |
| TBI | Tick-borne illnesses |
| UNC | University of North Carolina |
| US DHHS | United States Department of Health and Human Services |
| USDA | U.S. Department of Agriculture |
| USGS | United States Geological Survey |
| WIC | Women, Infants and Children |
| YRBS | Youth Risk Behavior Survey |

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