



# HARNETT HEALTH

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## Harnett Health System

*2019 Community Health Needs Assessment*

**A comprehensive assessment of the health needs of Harnett County residents**

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## *EXECUTIVE SUMMARY*

### *Overview and Background*

Provisions of the Patient Protection and Affordable Care Act (ACA) require all non-profit hospital facilities in the United States to conduct a community health needs assessment and adopt an implementation strategy to meet the identified community health needs. In the process of conducting a community health needs assessment, all non-profit hospitals are required to take into account input from individuals who represent a broad interest of the community served, including those individuals with special knowledge and/or expertise in public health. Harnett Health System conducted a community health needs assessment to evaluate the health of the community, identify high priority health needs, and develop strategies to address the needs of the community.

### *Data Collection and Analysis*

The 2019 Harnett Health System Community Health Needs Assessment represents a combination of quantitative and qualitative information from reputable statistical sources, a community survey and feedback provided by community partners. Primary data included qualitative information from interviews conducted with the target population, including both community members and health service providers. Secondary data included public data on demographics, health and healthcare resources, behavioral health surveys, county rankings, and disease trends, and emergency services. The results of the 2019 Community Health Needs Assessment are summarized in this Report. A comprehensive implementation plan will be developed based on the results of the 2019 Community Health Needs Assessment.

Inquiries regarding the 2019 Harnett Health System Harnett Community Health Needs Assessment should be directed to:

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## ***METHODOLOGY***

### ***Overview***

The assessment process included data collection from a combination of primary and secondary sources. Valuable input from community survey respondents provided primary data for the assessment. Secondary data sources included the 2010 U.S. Census Data and the North Carolina State Center for Health Statistics, and county level data from Harnett Health System and Harnett County Department of Health. Harnett Health System was an integral part of the Community Health Assessment Team (CHAT) established to analyze the community health needs of Harnett County. The CHAT reviewed the primary and secondary data and discussed community health needs that may be addressed by the Harnett Health System. The Community Health Needs Assessment utilized the following seven step process:

#### **Step 1: Establishing the Assessment Infrastructure**

The CHAT participants included representatives from Harnett Health System, Harnett County Health Department, Cape Fear Valley Health System, the Healthy Harnett Coalition, and the Department of Public Health at Campbell University.

Attendees provided input regarding community health strengths and concerns, as well as identified the top health concerns in Harnett County. Those individuals, representing diverse groups in Harnett County were chosen to participate in the CHAT because of their insights about the community's health needs.

#### ***Community Health Needs Assessment Team (CHAT)***

##### ***Harnett County Assessment Team***

- John Rouse, Director, Harnett County Health Department
- Mike Jones, Vice President, Harnett Health System
- David Tillman, Chair, Campbell University Department of Public Health
- Will Haithcock, Sr. Financial Analyst, Cape Fear Valley Health System

##### ***Harnett County Public Health Advisory Group (Healthy Harnett Coalition)***

- Georgia Anthony, Project Access
- Kittrane Sanders, Cooperative Extension
- Debra Hawkins, Harnett County Health Department
- Belinda Rayner, Harnett County Health Department
- Erin Brown, Harnett County Health Department
- Vickie Hicks, Harnett County Health Department
- Debra Vaughn, Harnett County Division on Aging

- Frances Harrington, Lillington Star Church
- Katie Trotta, Campbell University
- Natalia Solera Ortiz, Poe Center for Health Education

Harnett County Assessment Team and Harnett County Public Health Advisory Assessment Team were co-facilitators of the Community Health Needs Assessment process.

Harnett Health System, Harnett County Department of Health, and Campbell University Public Health Program shared these roles and responsibilities:

- Coordinate the overall Community Health Needs Assessment process
- Provide the meeting space
- Motivate other community organizations to participate
- Conduct a community survey to collect primary data
- Collect and organize secondary data
- Identify priority issues
- Develop and implement initiatives to address priority issues.

Partner organizations, contributions, and roles:

- Provide participants and input.

Key factors in developing and maintaining partnerships:

- Maintaining mutual respect and a common language
- Following through on commitments

## **Step 2: Defining Purpose and Scope (Defining the Community)**

The purpose of the Community Health Needs Assessment was to evaluate health needs of the community, and to identify resources in place to meet those needs and major gaps between the two. The CHAT developed a Community Health Needs Assessment Survey (CHNA Survey). CHAT participants disbursed the CHNA Survey to residents of Harnett County. Data from the CHNA Survey were analyzed by the CHAT, and are included in this Report. The CHNA data will be used to develop an action plan to bridge the gap and better meet the health needs of the community.

## **Step 3: Collecting and Analyzing Data (Assess the Community's Health Needs)**

The Community Health Survey for Harnett County was conducted in Spring 2019. A total of 577 individuals were surveyed. After data cleaning (including listwise deletion of incomplete survey responses), the final dataset included 433 responses. Surveys were collected using a combination of household canvassing using addresses randomly selected from a Two-Stage Cluster Sampling process (122 surveys) and online, self-administered convenience sampling (311 surveys). Much of the data loss from the cleaning process is attributed to surveys started by non-residents and surveys in which participants completed less than 5% of the online survey.

Secondary data was collected through several sources, to include U.S. Census Data and the North Carolina State Center for Health Statistics.

## **Step 4: Selecting Priorities**

The CHAT reviewed the primary and secondary data, and discussed the health needs that should be addressed by Harnett Health System. The CHAT determined that it was best to focus on services that impact the community as a whole versus patient-specific services.

## **Step 5: Documenting and Communicating Results**

The CHAT meetings were recorded for future reference and results of the input were tallied to determine the community's strengths/values, barriers/concerns, and the top three health needs. Those results will be presented to the Harnett Health System's Senior Leadership Team for approval.

## **Step 6: Planning for Action and Monitoring Progress**

Following the completion of the 2019 Community Health Needs Assessment Report, an Implementation Plan will be created to meet the applicable identified needs. The Implementation Plan will be presented to the Harnett Health System's Board of Trustees for review and approval. Efforts will be measured appropriately and progress will be reported regularly.

## **Step 7: Make CHNA widely available to the public**

Following the completion of the 2019 Community Health Needs Assessment Report and Implementation Plan, Harnett Health System will post the assessment on its website.

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## *PRIMARY DATA: Community Health Survey Document and Partners*

Harnett Health System and Harnett County Department of Health held meetings for CHAT participants. At the first, the CHAT participants reviewed the Community Health Needs Assessment process, primary and secondary data collection methods, and the required community survey. Additionally, results from the 2013-2015 Community Health Needs Assessment Implementation Plan were shared with the group. Each participant was encouraged to share the following ideas: strengths and values of the community; and concerns and barriers of the community.

Results of the CHNA Survey were analyzed at the second meeting. Attendees provided input regarding community health strengths and concerns, as well as top health concerns seen throughout the Harnett County area.

### *Community Health Needs Assessment Findings*

The CHAT reviewed information and details regarding the Community Health Needs Assessment process, including primary and secondary data collection methods (Appendices 1 - 3 and references). Additionally, results from the 2013-2015 Community Health Needs Assessment Implementation Plan also were reviewed.

CHAT participants were asked to share perceived strengths and values of the community in an effort to identify potential resources to assist in addressing the community's top health needs. The top strengths and values identified include:

- Collaboration between community organizations
- Ongoing Community Health Activities
- Caring professionals
- Quality clinical care
- Strong local government

The CHAT participants were then asked to share their perceived barriers and concerns within the community in an effort to identify potential community health needs. The top barriers and concerns are:

Emerging health issues that have not changed much since the health department's last assessment

- Diabetes
- Cancer
- Heart Disease



- Awareness and education to empower residents to take charge of their own health
- Obesity
- Safety concerns

The CHAT reviewed the primary data and identified the community's barriers and concerns. The CHAT continued to research community health needs by utilizing a variety of secondary data. Recommendations and data will be shared with the Harnett Health System's senior leadership team.

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## ***SECONDARY DATA: County Overview***

Harnett County is a landlocked county located in central North Carolina. It is bordered by Wake County to the northeast, Johnston County to the east, Sampson County to the southeast, Cumberland County to the south, Moore County to the southwest, Lee County to the northwest, and Chatham County to the north-northwest. Harnett County encompasses a land area of approximately 595 square miles, and a water area of six square miles. The county is divided geopolitically into 13 townships: Anderson Creek, Averasboro, Barbecue, Black River, Buckhorn, Duke, Grove, Hectors Creek, Johnsonville, Lillington, Neills Creek, Stewards Creek, and Upper Little River townships (Figure 1). The Town of Lillington (Lillington Township) is the county seat. Other municipalities recognized as “cities” or “towns” by the US Census Bureau include Angier (Black River Township), Coats (Grove Township), Dunn (Averasboro Township), and Erwin (Duke Township). County geopolitical divisions also include 22 unincorporated communities.

Harnett County is a growing yet still predominately rural county linked by proximity to the economic and cultural opportunities in its more populous surrounding counties, especially Wake County, home to Raleigh, the state’s capitol city. Harnett County is not a major tourist destination; it is favored instead by residents seeking the relatively greater affordability of housing and quieter lifestyle possible within striking distance of major employment, healthcare and military centers.

Only one Interstate Highway traverses Harnett County: Interstate 95 runs from the northeast to the southeast along the easternmost edge of the county, through the City of Dunn. Three major US routes serve the county: US 301 parallels I-95 just to its west; US 401 runs north-south through the county and US 421 runs east-west. The southwest corner of the county is served by NC 87 and the north and eastern parts of the county are served by NC 55.

### **North Carolina Map - Harnett County Highlighted in Dark Blue**



## SECONDARY DATA: Demographics

### Population Growth and Age Distribution

Harnett County has an approximate population of 114,678 persons in 2010 and was estimated to have a population of 132,754 persons in 2017 according to the U.S. Census Bureau. The population of Harnett County increased by 15.7% between 2010 and 2017, with a slight median age decrease from 33.5 years in 2010 to 33.4 years in 2017.

#### Age Distribution, Harnett County (2010)

Age Range	2013		2017	
	Number	Percent	Number	Percent
< 5 years	9,441	7.9	9,766	7.6
5-9 years	8,948	7.5	9,589	7.4
10-14 years	9,415	7.9	10,029	7.8
15-19 years	8,778	7.4	8,897	6.9
20-24 years	8,350	7.0	8,335	6.5
25-34 years	17,183	14.5	20,042	15.6
35-44 years	16,849	14.2	17,601	13.7
45-54 years	15,271	12.9	16,138	12.5
55-59 years	6,562	5.5	7,329	5.7
60 years and over	17,996	15.2	21,027	16.4

Source: U.S. Census Bureau, American FactFinder, based upon 2013-2017 American Community Survey 5-Year Estimates

As indicated by these data, population growth in Harnett County increased at an annual rate of 1.96% from 2010 to 2017. As reported in the table below, the gender distribution of Harnett County is similar to the state.

#### Gender, Harnett County and North Carolina (2013-2017, 5-year estimates)

Gender	Harnett	Percent	NC	Percent
Female	65,006	50.5%	5,157,196	51.3%
Male	63,747	49.5%	4,895,368	48.7%
Total	128,753	100%	10,052,567	100%

Source: U.S. Census Bureau, American FactFinder, based upon 2013-2017 American Community Survey 5-Year Estimates

### Race and Ethnicity

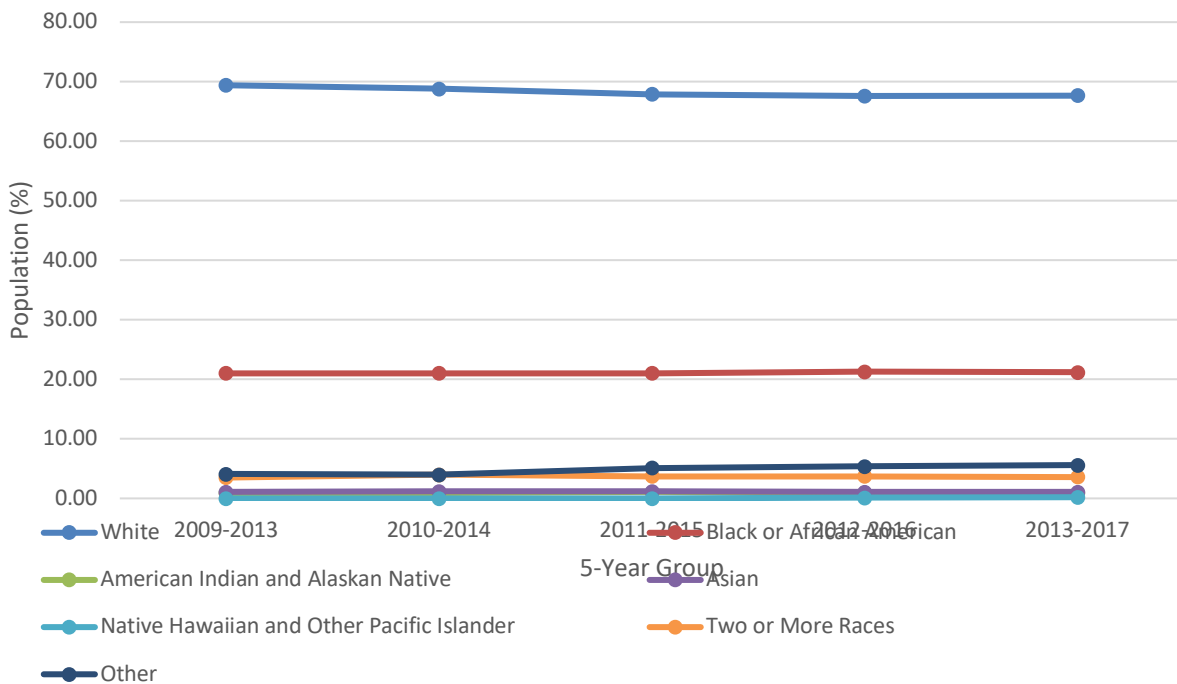
According to the U.S. Census Bureau, the racial composition of Harnett County residents is predominately White (67.5%) and African American (21.2%), with 32.5% representing racial or ethnic minority groups. As shown in the following table, the race distribution in Harnett County is slightly more diverse than that of North Carolina. The figure below shows that these racial distributions have been relatively stable in five-year estimates since 2009.

## Race and Ethnicity, Harnett County and North Carolina (2013-2017, 5-year estimates)

Race	Harnett County		North Carolina	
	Number	Percent	Number	Percent
White	86,860	67.5%	9,801,368	69.0%
Black or African American	27,243	21.2%	2,159,427	21.5%
American Indian and Alaska Native	1,177	0.9%	117,998	1.2%
Asian	1,402	1.1%	269,164	2.7%
Native Hawaiian and Other Pacific Islander	222	0.2%	6,393	0.1%
Two or More Races	4,649	3.6%	251,196	2.5%
Other	7,906	6.1%	310,920	3.1%
Total	128,753	100%	10,052,567	100%

Source: U.S. Census Bureau, American FactFinder, based upon 2013-2017 American Community Survey 5-Year Estimates

## Race, Harnett County 2009-2017 (5-year Group and Population Percentage)



Source: U.S. Census Bureau, American FactFinder, based upon 2009-2017 American Community Survey 5-Year Estimates

### Education

According to the organizational vision statement in the current strategic plan, Harnett County Schools “will be the North Carolina model for developing globally competitive and highly productive citizens.” However, as compared with the state averages and peer counties in the tables and figures below, Harnett County performs

below the state and often performs slightly below the educational achievement of peer counties. With ACT scores in particular, the performance of Harnett County was at the bottom of the group in recent years.

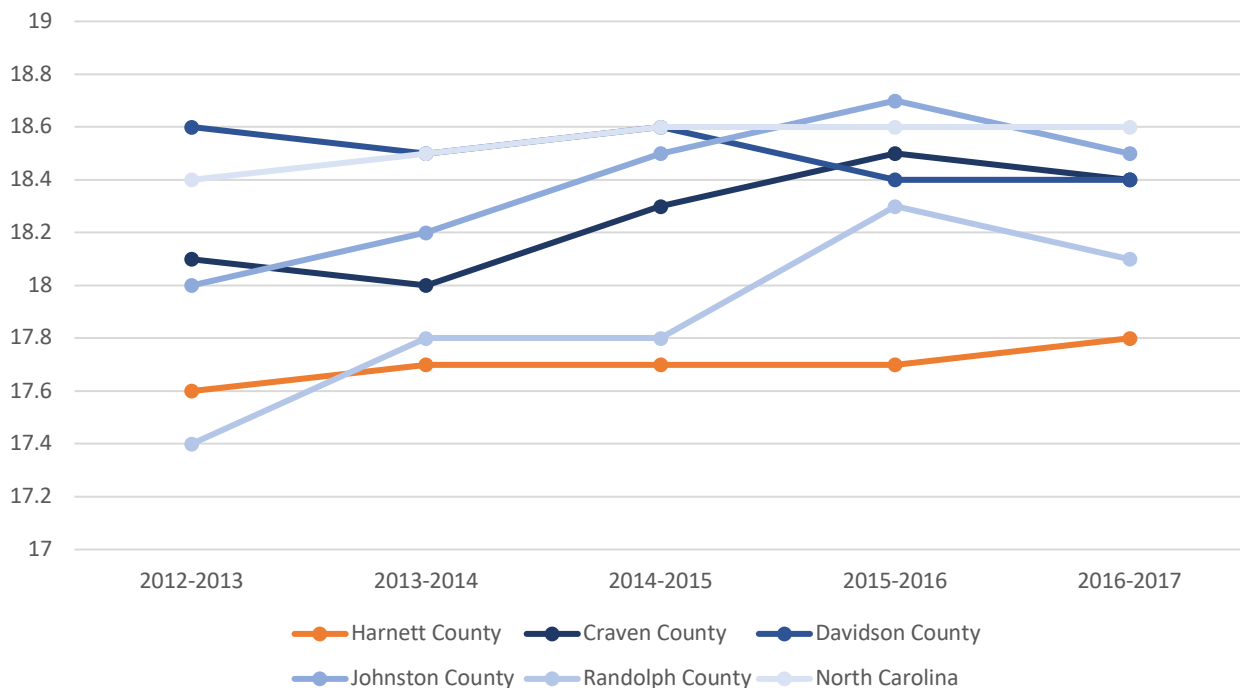
### Education Breakdown for ages 25 and over, Harnett County and North Carolina (2013-2017 5-Year Estimate)

Factor	Harnett County	Craven County	Davidson County	Johnston County	Randolph County	North Carolina
High School Graduate or Higher	86.2%	87.7%	83.4%	85.6%	80.6%	86.9%
Less than 9 <sup>th</sup> Grade	4.5%	4.8%	5.8%	5.6%	6.7%	4.9%
High School, No Diploma	9.3%	7.5%	10.8%	8.8%	12.6%	8.2%
High School Graduate or Equivalency	30.4%	25.8%	33.6%	29.4%	34.4%	26.1%
Some College, No Degree	24.6%	26.5%	21.5%	22.3%	21.2%	21.7%
Associate's Degree	10.9%	11.0%	10.2%	12.2%	9.8%	9.3%
Bachelor's Degree	13.7%	15.3%	12.9%	15.6%	10.9%	19.2%
Graduate or Professional Degree	6.6%	9.0%	5.1%	6.0%	4.4%	10.6%

Source: U.S. Census Bureau, American FactFinder, based upon 2009-2017 American Community Survey 5-Year Estimates

### ACT Scores for Harnett County Public Schools and Peer Counties, 2012-2017

County	ACT Scores				
	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017
Harnett County	17.6	17.7	17.7	17.7	17.8
Craven County	18.1	18.0	18.3	18.5	18.4
Davidson County	18.6	18.5	18.6	18.4	18.4
Johnston County	18.0	18.2	18.5	18.7	18.5
Randolph County	17.4	17.8	17.8	18.3	18.1
North Carolina	18.4	18.5	18.6	18.6	18.6



Source: Public Schools of North Carolina. [ncpublicschools.org/accountability/act/](http://ncpublicschools.org/accountability/act/)

## SECONDARY DATA: Socioeconomic Factors

### Employment, Household Income and Poverty

Harnett County has a heritage of agriculture but began the transition to manufacturing in the early 1920s. Some of the areas' major private employers include Harnett Health System, Food Lion, Campbell University, Edwards Brothers, Wal-Mart, and Rooms To Go. Public employers include Harnett County Public Schools and Harnett County Government.

The U.S. Census Bureau reports Harnett County's median income of \$50,323 (in 2017 dollars), which is almost identical to the median household income in North Carolina (\$50,320). However, the mean household income for North Carolina (\$70,523) is much higher than Harnett County (\$61,707) suggesting that the distribution of income is less skewed toward higher incomes in the county. The per capita income is \$22,351 for Harnett County and \$28,123 for North Carolina. Harnett County's lower per capita income accompanies a relatively high unemployment rate 5.1% in Harnett County compared to 3.8% for the state of North Carolina according to Bureau of Labor Statistics (January 2019).

### Household Income and Benefit Dollars, Harnett County and North Carolina (2017)

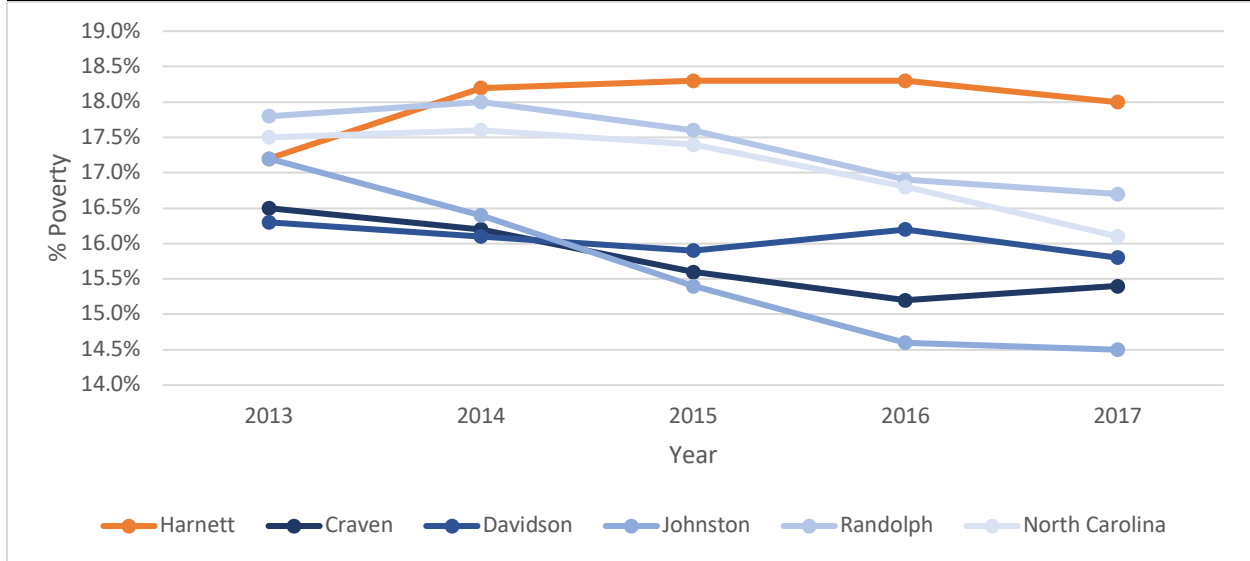
Income Level	Harnett County	North Carolina
Below \$10,000	7.9%	7.3%
\$10,000 – \$24,999	16.6%	16.9%
\$25,000 – \$49,999	25.2%	25.5%
\$50,000 - \$99,999	33.2%	29.9%
\$100,000 - \$199,999	14.9%	16.1%
\$200,000 or more	2.2%	4.3%
Median Household Income	\$50,323	\$50,320
Mean Household Income	\$61,707	\$70,523
Per Capita Income	\$22,351	\$28,123

Source: U.S. Census Bureau, American FactFinder, based upon 2009-2017 American Community Survey 5-Year Estimates

As shown in the previous table, almost half (49.7%) of Harnett County households report an annual household income (including benefit dollars) of under \$50,000. In 2017, 18% of Harnett County residents lived below the poverty level compared to 16.1% of state residents. Unlike peer counties and the state, Harnett County has not experienced a trend of decreasing percentages of people living in poverty in recent years.

## % of Residents Living in Poverty, Harnett, Peer Counties, and North Carolina

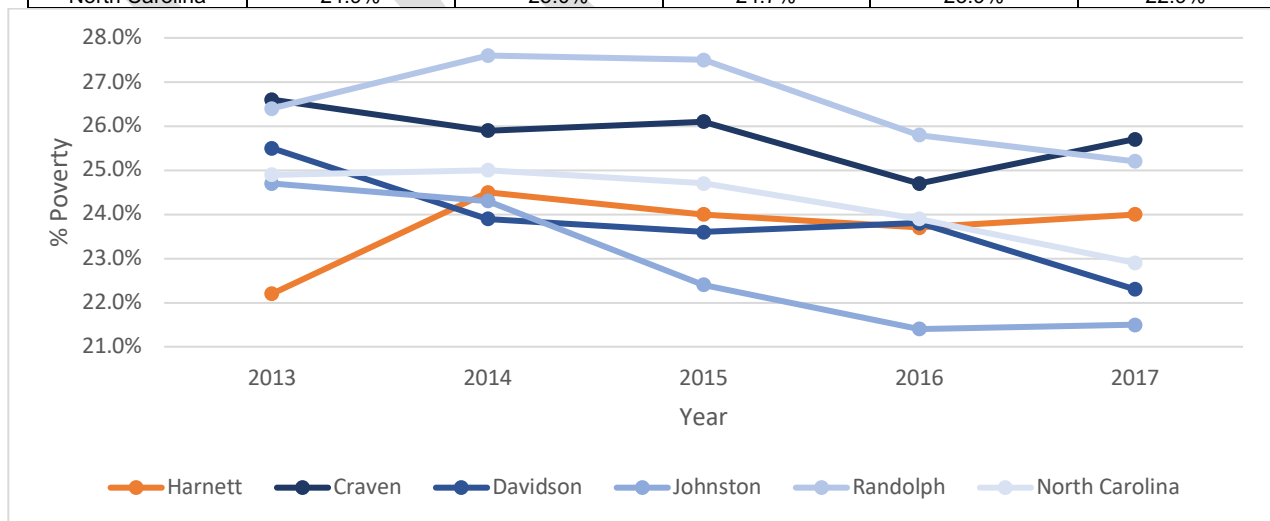
County	2013	2014	2015	2016	2017
Harnett County	17.2%	18.2%	18.3%	18.3%	18.0%
Craven	16.5%	16.2%	15.6%	15.2%	15.4%
Davidson	16.3%	16.1%	15.9%	16.2%	15.8%
Johnston	17.2%	16.4%	15.4%	14.6%	14.5%
Randolph	17.8%	18.0%	17.6%	16.9%	16.7%
North Carolina	17.5%	17.6%	17.4%	16.8%	16.1%



Source: U.S. Census Bureau, American FactFinder, based upon 2009-2017 American Community Survey 5-Year Estimates

## Percentage of Children Living in Poverty (Harnett, Peer Counties, and North Carolina)

County	2013	2014	2015	2016	2017
Harnett County	22.2%	24.5%	24.0%	23.7%	24.0%
Craven	26.6%	25.9%	26.1%	24.7%	25.7%
Davidson	25.5%	23.9%	23.6%	23.8%	22.3%
Johnston	24.7%	24.3%	22.4%	21.4%	21.5%
Randolph	26.4%	27.6%	27.5%	25.8%	25.2%
North Carolina	24.9%	25.0%	24.7%	23.9%	22.9%



Source: U.S. Census Bureau, American FactFinder, based upon 2009-2017 American Community Survey 5-Year Estimates

## *Housing and Cost of Living*

Historically, one of the greatest wealth building opportunities for families living in America was home ownership. Home equity was by far one of the most effective means of obtaining wealth for middle class Americans. Recession and foreclosures have caused a negative impact on financial institutions, home-owners and the community as a whole.

The table below shows the values of owner-occupied homes in Harnett County and the state. Median home values in Harnett County (\$144,700) are approximately 11.3% less than the median home value for North Carolina (\$161,000). Only 27.5% of homes in Harnett County are valued at or above \$200,000, while 37.3% of homes in North Carolina are valued at or above the same price point, as shown in the following table.

### **Values of Owner-Occupied Homes, Harnett County and North Carolina**

Factor	Harnett County	North Carolina
Less than %50,000	11.3%	9.3%
\$50,000 - \$99,000	19.7%	16.8%
\$100,000 - \$149,999	21.2%	19.4%
\$150,000 - \$199,999	20.3%	17.1%
\$200,000 - \$299,999	19.9%	18.5%
\$300,000 - \$499,999	5.9%	13.0%
\$500,000 - \$999,999	1.5%	4.8%
\$1,000,000 or more	0.2%	1.0%
Median	\$144,700	\$161,000

Source: U.S. Census Bureau, American FactFinder, based upon 2009-2017 American Community Survey 5-Year

In 2018, Harnett County had 52,548 occupied housing units, with 65.1 percent of the units owner-occupied and the remainder of rental units paying a median gross rent of \$836.



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## *SECONDARY DATA: Health Status and Behavior*

### *North Carolina Statewide and Harnett County Trends in Key Health Indicators*

The following section reviews a broad range of Harnett County specific data that provide insight into the health status and health-related behavior of residents. Publicly reported data is based on statistics of actual occurrences, such as the incidence of certain diseases, as well statistics based on interviews of individuals about their personal health condition and health concerns from the Behavioral Risk Factor Surveillance System (BRFSS) consolidated through [www.countyhealthrankings.com](http://www.countyhealthrankings.com) website.

As shown in the following table, Harnett County ranks 49<sup>th</sup> out of 100 for health outcomes in 2019, up from 53<sup>rd</sup> in 2013 but unchanged from 2016. In addition, Harnett County ranks 69<sup>th</sup> out of 100 for health factors and 62<sup>nd</sup> in Health Behaviors, among North Carolina counties. Harnett County rankings reflect mortality and morbidity greater than the state average. Compared with the state, the county has substantially different health behavior rankings related to physical activity and access to exercise opportunities. In addition, Harnett County ranks 81<sup>st</sup> in physical environment (primarily related to data on long commutes). Social and economic factors were in line with the North Carolina comparing favorably in some areas and worse in others.

The area of poorest performance is the Clinical Care indicators, where Harnett County ranks 89<sup>th</sup>. These factors include uninsured population, preventable hospital stays, diabetic and mammography screening, but provider ratios are much worse than the average statewide. Access to care across health care provider types is poor in Harnett County with only 1 primary care physician for 3,540 people, 1 dentist for 2,410 people and 1 mental health provider for 1,130 people.

## County Health Rankings 2019 – Health Outcomes, Factors, Behaviors, & Clinical

	Harnett County	Top US Performers	North Carolina	Rank (of 100)
<b>Health Outcomes</b>				<b>49</b>
<b>Length of Life</b>				<b>41</b>
Premature death	8,200	5,400	7,600	
<b>Quality of Life</b>				<b>66</b>
Poor or fair health	21%	12%	18%	
Poor physical health days	4.2	3	3.6	
Poor mental health days	4.5	3.1	3.9	
Low birthweight	8%	6%	9%	
<b>Health Factors</b>				<b>69</b>
<b>Health Behaviors</b>				<b>62</b>
Adult smoking	19%	14%	18%	
Adult obesity	34%	26%	30%	
Food environment index	7.6	8.70	6.60	
Physical inactivity	30%	19%	23%	
Access to exercise opportunities	56%	91%	73%	
Excessive drinking	17%	13%	17%	
Alcohol-impaired driving deaths	33%	13%	30%	
Sexually transmitted infections	471.4	152.8	577.6	
Teen births	27	14	27	
<b>Clinical Care</b>				<b>89</b>
Uninsured	13%	6%	12%	
Primary care physicians	3,540:1	1,050:1	1,420:1	
Dentists	2,410:1	1,260:1	1,800:1	
Mental health providers	1,130:1	310:1	440:1	
Preventable hospital stays	7830	2765	4702	
Mammography screening	0.4	0.49	0.45	
Flu vaccinations	0.46	0.52	0.5	

Source: County Health Rankings (<https://www.countyhealthrankings.org>)

## County Health Rankings 2019 – Social/Economic Factors and Physical Environment

	Harnett County	Top US Performers	North Carolina	Rank (of 100)
<b>Social &amp; Economic Factors</b>				<b>53</b>
High school graduation	86%	96%	86%	
Some college	64%	73%	67%	
Unemployment	5.1%	2.9%	4.6%	
Children in poverty	23%	11%	21%	
Income inequality	4.4	3.7	4.8	
Children in single-parent households	33%	20%	35%	
Social associations	8.3	21.9	11.5	
Violent crime	243	63	351	
Injury deaths	73	57	71	
<b>Physical Environment</b>				<b>81</b>
Air pollution - particulate matter	10.9	6.1	9.8	
Severe housing problems	16%	9%	16%	
Driving alone to work	86%	72%	81%	
Long commute - driving alone	47%	15%	32%	

Source: County Health Rankings (<https://www.countyhealthrankings.org>)

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## SECONDARY DATA: Mortality and Morbidity

### North Carolina and Harnett County Birth Rates

The birth rate in Harnett County is higher than the North Carolina average and all peer counties, which is consistent with the growing, younger population in the County.

#### Harnett County and North Carolina Live Births, 2017

County/State	Total Births	Total Rate	White, Non-Hispanic	Black, Non-Hispanic	Hispanic
Harnett	1,886	14.4	1,155	361	317
Craven	1,386	13.5	891	293	132
Davidson	1,762	10.7	1,287	195	225
Johnston	2,318	12.1	1,435	375	471
Randolph	1,576	11.0	1,129	106	304
North Carolina	120,099	11.8	65,314	28,950	18,461

Source: North Carolina Center of Health Statistics. <https://schs.dph.ncdhhs.gov/data/vital/volume1/2017>

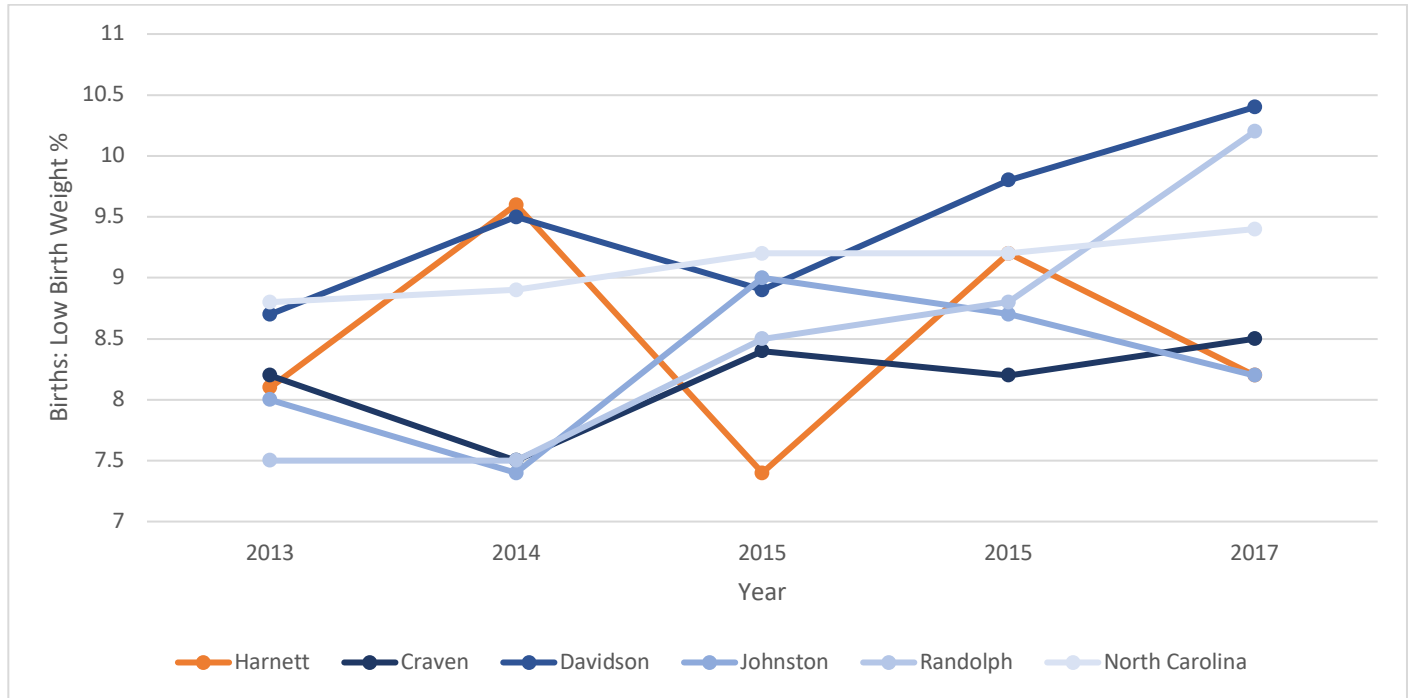
However, as shown in the following table, the percentage of low birth weight babies in Harnett County is slightly lower than the North Carolina average. This represents some improvement relative to the previous CHNA cycle, the year-to-year data for percentage of live births classified as low-birthweight fluctuates around similar value range across peer counties and in NC.

#### Harnett County and North Carolina Low Birth Weight, 2017

County/State	Total Low Birthweight	Total Rate	White, Non-Hispanic	White, Non-Hispanic %	Black, Non-Hispanic	Black, Non-Hispanic %	Hispanic	Hispanic %
Harnett	154	8.2	82	7.1	47	13.0	21	6.6
Craven	118	8.5	67	7.5	35	11.9	9	6.8
Davidson	184	10.4	116	9.0	42	21.5	17	7.7
Johnston	189	8.2	100	7.0	44	11.7	40	8.5
Randolph	160	10.2	107	9.5	21	19.8	27	8.9
North Carolina	11,311	9.4	5,020	7.7	4,188	14.5	1,402	7.6

Source: North Carolina Center of Health Statistics. <https://schs.dph.ncdhhs.gov/data/vital/volume1/2017>

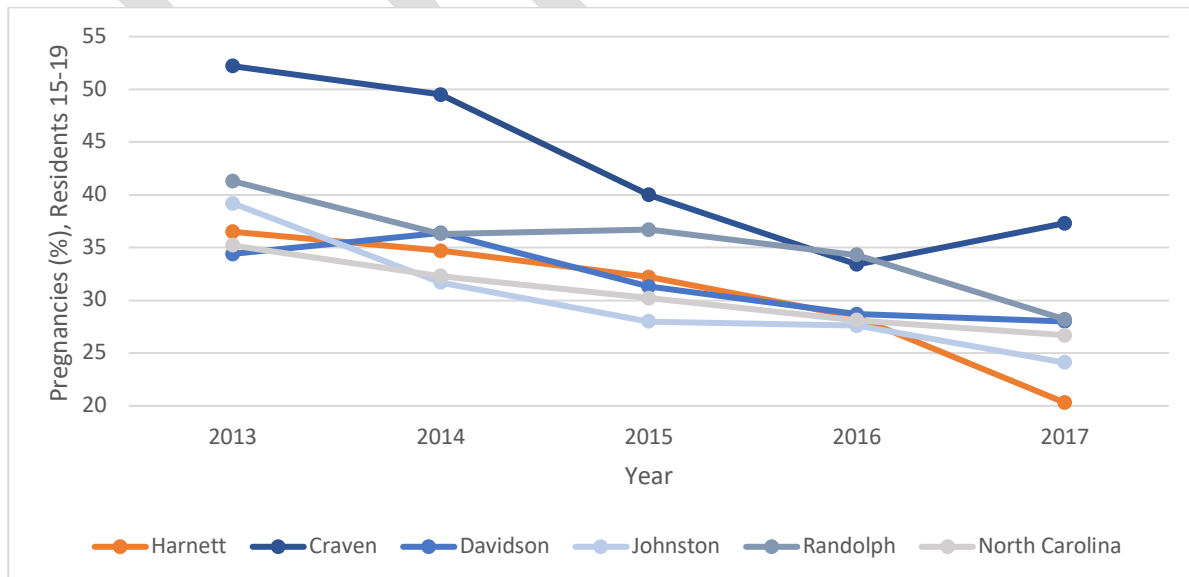
## Percentage Live Births Classified as Low Birth Weight



Source: North Carolina Center of Health Statistics. <https://schs.dph.ncdhhs.gov/data/vital/volume1/2017>

The following chart compares percentage of teen pregnancies in Harnett County to North Carolina and peer counties between 2013 and 2017. As shown in the figure, Harnett County's rate of teen pregnancies decreased considerably over these years and compares favorably to peer counties and the state.

## Pregnancies (%) of Residents Ages 15-19 years old



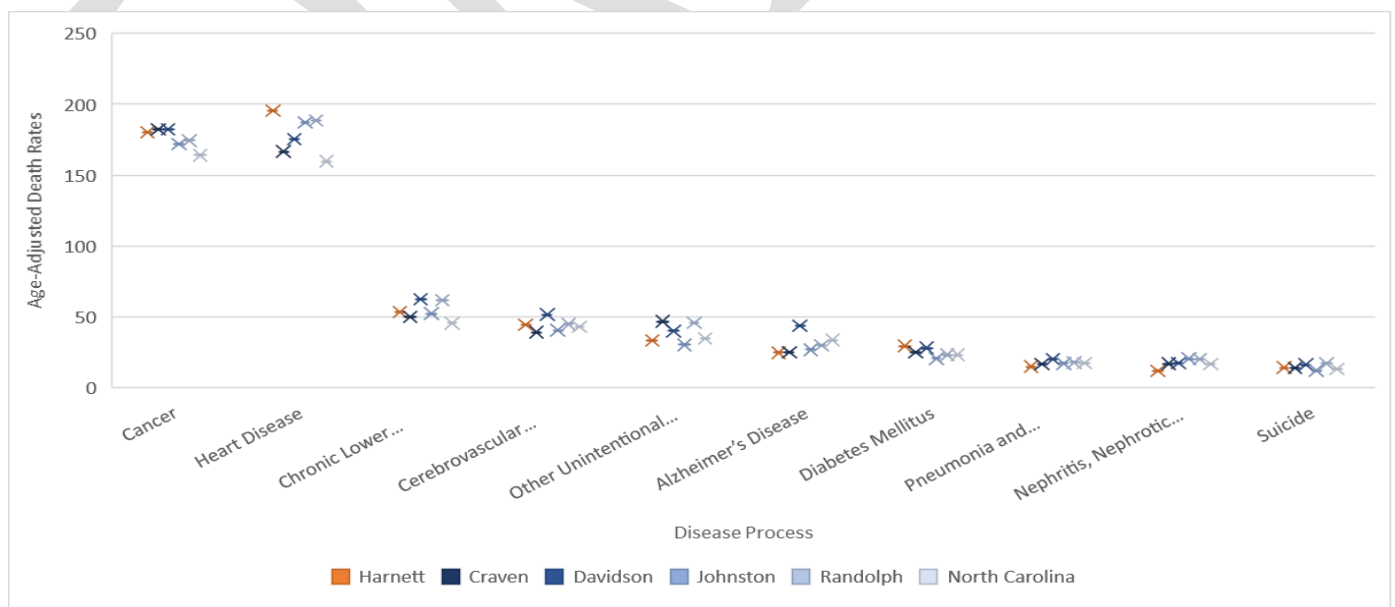
Source: North Carolina Center of Health Statistics. <https://schs.dph.ncdhhs.gov/data/vital/cfm>

## Age Adjusted Death Rates

The following charts reflect the ten leading causes of death for Harnett County and North Carolina, respectively. As shown in the first chart, heart disease and cancer rank as the two leading causes of death in the County, peer counties, and North Carolina. For the most part, the leading causes of death in Harnett County match with the leading causes of death in the state. Those causes of death highlighted (heart disease, diabetes mellitus, motor vehicles injuries, and suicide) are ranked higher in the list for Harnett County than in the order of causes of death for North Carolina.

### Age-Adjusted Death Rates for Harnett, Peer Counties, and North Carolina (2013-2017)

Cause of Death	Harnett	Craven	Davidson	Johnston	Randolph	North Carolina
Overall	846.9	842	883.2	802.4	872.9	782.8
Heart Disease	195.4	166.7	175.4	187.3	188.4	159.8
Cancer	180.1	182.3	182.3	171.9	174.5	164
Chronic Lower Respiratory Diseases	53.4	50.1	62.3	52.3	61.7	45.5
Cerebrovascular Disease	44.4	39.2	51.7	40.6	44.9	43.2
Other Unintentional Injury	33.2	46.8	40.1	30.4	45.7	34.6
Diabetes Mellitus	29.5	25	28	20.6	23.3	23.3
Alzheimer's Disease	24.8	25.1	43.8	26.9	30	33.7
Unintentional Motor Vehicle Injury	20.5	15.2	19.4	15.4	18.7	14.2
Pneumonia and Influenza	15	16.6	20.3	17.1	17.9	17.6
Suicide	14.2	14.1	16.3	12.1	17.2	13.3



Source: North Carolina Center of Health Statistics. <https://schs.dph.ncdhhs.gov/data/vital/cd/2017>

## Harnett County Leading Causes of Death

Data regarding the leading causes of death in Harnett County are provided in the following charts and graphs in the order of severity, and trends are reported 2013-2017. Information sources include:

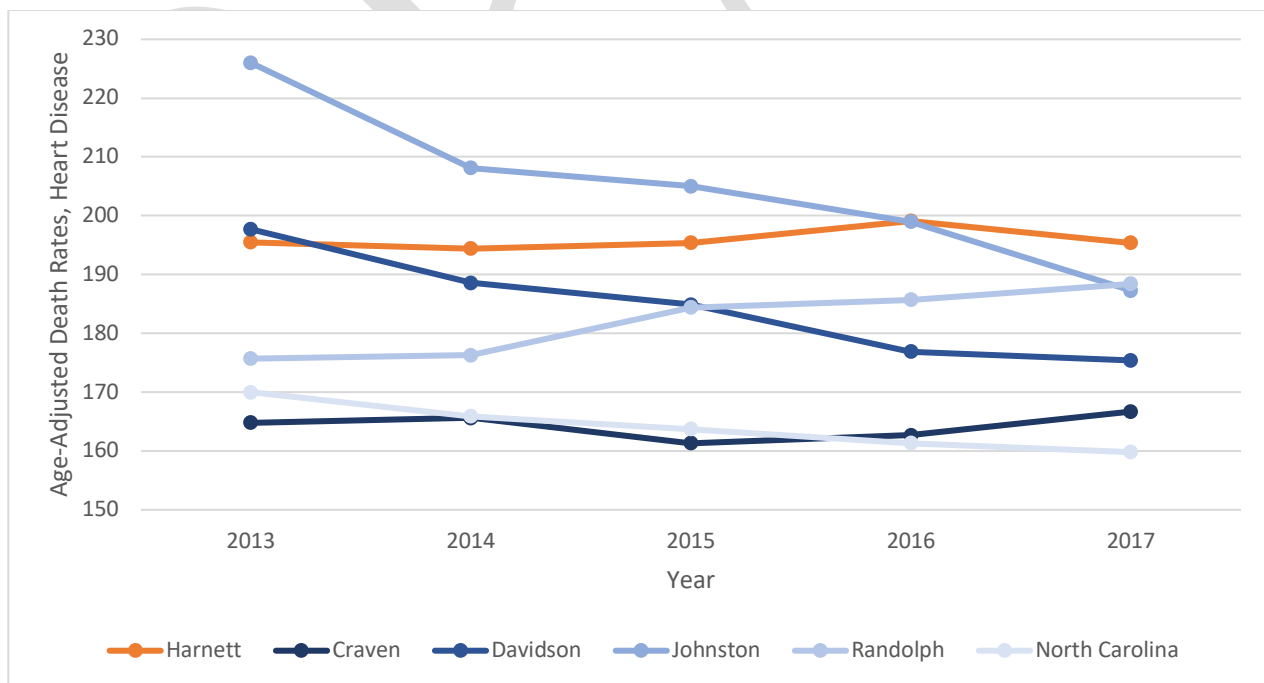
- NC State Center for Health Statistics
- Behavioral Risk Factor Surveillance System (“BRFSS”)
- NC Cancer Central Cancer Registry
- Other databases as noted.

### Heart Disease

Heart Disease is the leading cause of death (age-adjusted) in Harnett County. The number of deaths from heart disease continues to be consistently higher than North Carolina. Between 2013 and 2017, Harnett County’s heart disease age-adjusted death rate remained essentially constant, while the heart disease age-adjusted death rate for the state continued a long-term downward trend and decreased by 6.4% over that timeframe.

**Age-Adjusted Heart Disease Death Rates per 100,000 Residents  
(Harnett, Peer Counties, and North Carolina, 2013-2017)**

County/State	2013	2014	2015	2016	2017
Harnett	195.5	194.4	195.4	199.1	195.4
Craven	164.8	165.6	161.3	162.7	166.7
Davidson	197.7	188.6	184.9	176.9	175.4
Johnston	226.0	208.1	205.0	199.0	187.3
Randolph	175.7	176.3	184.4	185.7	188.4
North Carolina	170.0	165.9	163.7	161.3	159.8



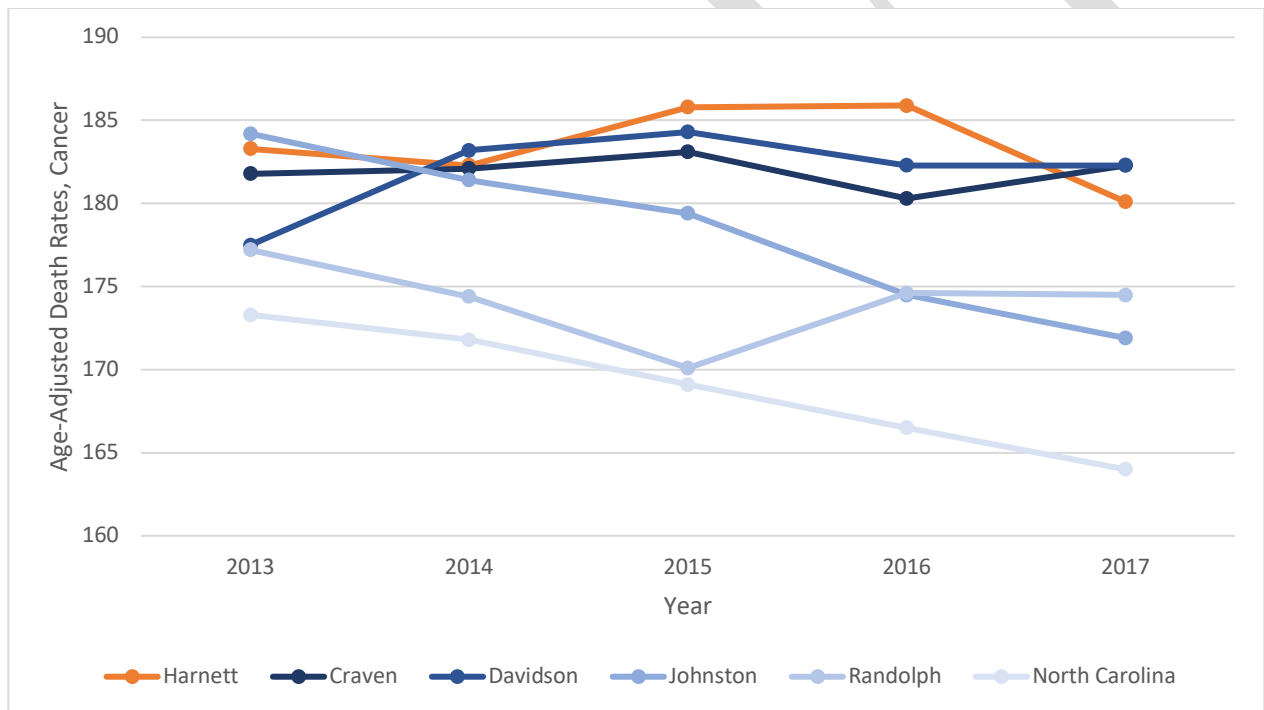
Source: North Carolina Center of Health Statistics. <https://schs.dph.ncdhhs.gov/data/vital/cd/2017>

## Cancer

Cancer is the second leading cause of death (age-adjusted) in Harnett County. The number of deaths from cancer is slightly larger than North Carolina's rate. Between 2013 and 2017, Harnett County's all-cause cancer rate has remained essentially constant while the rate for North Carolina has decreased by 5.7%.

**Age-Adjusted Cancer Death Rates per 100,000 Residents  
(Harnett, Peer Counties, and North Carolina, 2013-2017)**

County/State	2013	2014	2015	2016	2017
Harnett	183.3	182.3	185.8	185.9	180.1
Craven	181.8	182.1	183.1	180.3	182.3
Davidson	177.5	183.2	184.3	182.3	182.3
Johnston	184.2	181.4	179.4	174.5	171.9
Randolph	177.2	174.4	170.1	174.6	174.5
North Carolina	173.3	171.8	169.1	166.5	164.0



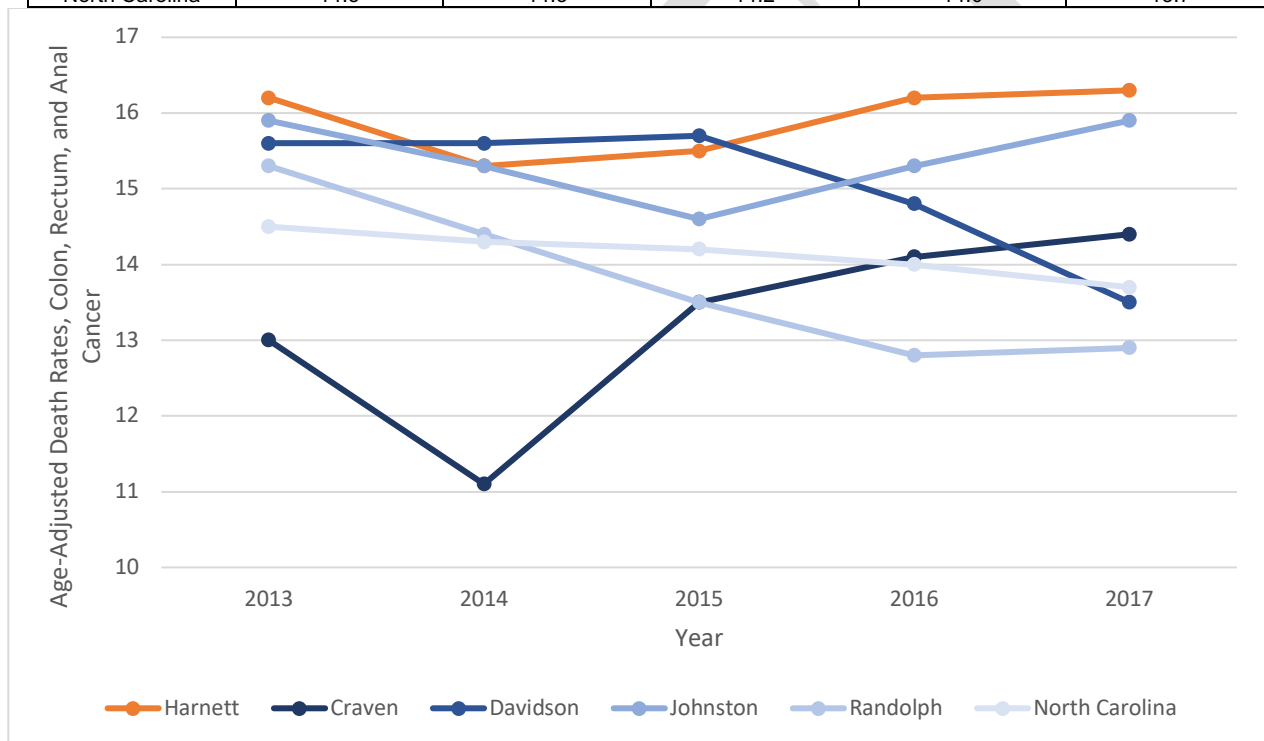
Source: North Carolina Center of Health Statistics. <https://schs.dph.ncdhhs.gov/data/vital/cd/2017>



The number of deaths from Colon, Rectum, Anus Cancer for Harnett County is currently slightly higher than the North Carolina age adjusted death rate. Between 2013 and 2017, Harnett's death rate for Colon, Rectum, Anus Cancer remained essentially constant, while the North Carolina death rate decreased from 14.5 to 13.7 for a decrease of 5.5%. Harnett County's rate is currently the highest among peer counties.

### Age-Adjusted Colon, Rectum, and Anal Cancer Death Rates per 100,000 Residents (Harnett, Peer Counties, and North Carolina, 2013-2017)

County/State	2013	2014	2015	2016	2017
Harnett	16.2	15.3	15.5	16.2	16.3
Craven	13.0	11.1	13.5	14.1	14.4
Davidson	15.6	15.6	15.7	14.8	13.5
Johnston	15.9	15.3	14.6	15.3	15.9
Randolph	15.3	14.4	13.5	12.8	12.9
North Carolina	14.5	14.3	14.2	14.0	13.7

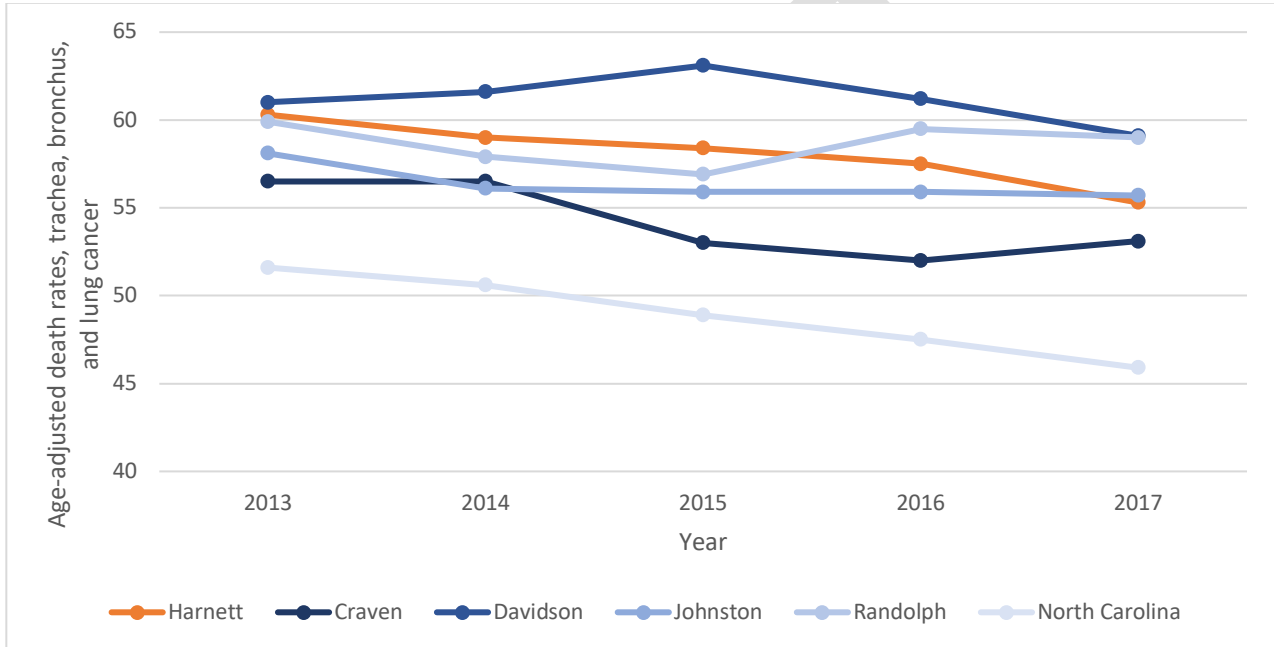


Source: North Carolina Center of Health Statistics. <https://schs.dph.ncdhhs.gov/data/vital/cd/2017>

The number of deaths from Trachea, Bronchus, & Lung Cancer is consistently higher than the North Carolina mortality rate. Between 2013 and 2017, Harnett's death rate for Trachea, Bronchus, & Lung Cancer decreased from 60.3 to 55.3 or 8.3% and the North Carolina death rate decreased from 51.6 to 45.9 or 11%.

## Age-Adjusted Trachea, Bronchus, and Lung Cancer Death Rates per 100,000 Residents (Harnett, Peer Counties, and North Carolina, 2013-2017)

County/State	2013	2014	2015	2016	2017
Harnett	60.3	59.0	58.4	57.5	55.3
Craven	56.5	56.5	53.0	52.0	53.1
Davidson	61.0	61.6	63.1	61.2	59.1
Johnston	58.1	56.1	55.9	55.9	55.7
Randolph	59.9	57.9	56.9	59.5	59.0
North Carolina	51.6	50.6	48.9	47.5	45.9

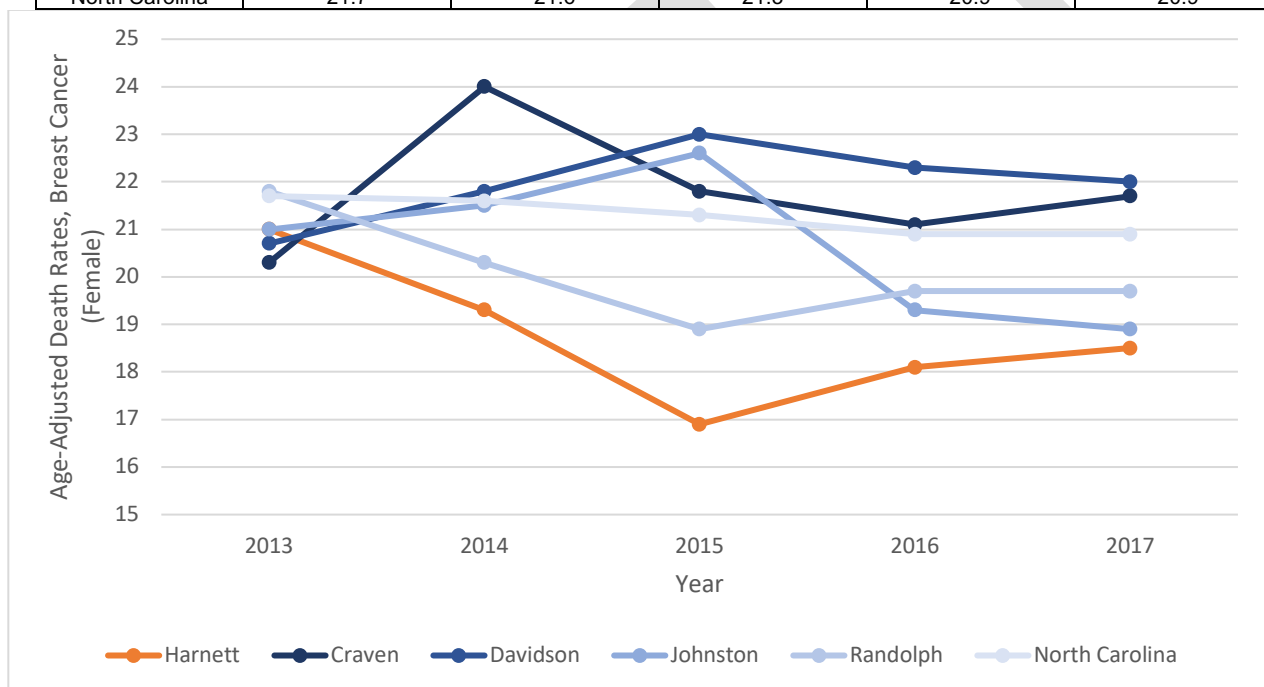


Source: North Carolina Center of Health Statistics. <https://schs.dph.ncdhhs.gov/data/vital/cd/2017>

The mortality rate for Female Breast Cancer has decreased since 2000. Early detection and testing has improved over the last two decades, which has increased awareness and vigilance. Harnett’s mortality rate for Female Breast Cancer decreased since 2013 by 11.9%, while the North Carolina rate has only decreased by 3.7% over the same time frame. Harnett County’s rate is lower than the state rate and is currently the lowest among peer counties.

### Age-Adjusted Female Breast Cancer Death Rates per 100,000 Residents (Harnett, Peer Counties, and North Carolina, 2013-2017)

County/State	2013	2014	2015	2016	2017
Harnett	21.0	19.3	16.9	18.1	18.5
Craven	20.3	24.0	21.8	21.1	21.7
Davidson	20.7	21.8	23.0	22.3	22.0
Johnston	21.0	21.5	22.6	19.3	18.9
Randolph	21.8	20.3	18.9	19.7	19.7
North Carolina	21.7	21.6	21.3	20.9	20.9

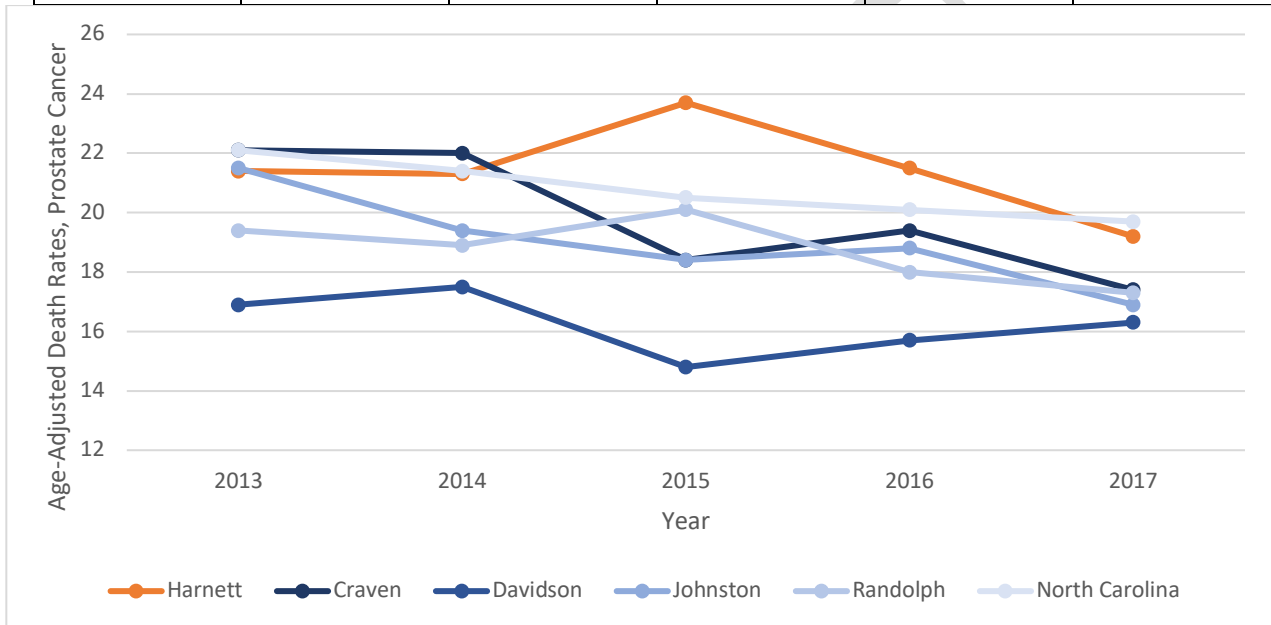


Source: North Carolina Center of Health Statistics. <https://schs.dph.ncdhhs.gov/data/vital/cd/2017>

The age-adjusted death rate for Prostate Cancer in Harnett County has had much more variation when compared to the North Carolina rate since 2000, partly due to the low numbers of annual deaths in many of the data-collection years. Low numbers of deaths make interpretation and comparison of derived rates difficult. Even so, Harnett County’s rate for Prostate Cancer tends to be higher than the state and higher than peer counties.

## Age-Adjusted Prostate Cancer Death Rates per 100,000 Residents (Harnett, Peer Counties, and North Carolina, 2013-2017)

County/State	2013	2014	2015	2016	2017
Harnett	21.4*	21.3*	23.7*	21.5*	19.2
Craven	22.1	22.0	18.4	19.4	17.4*
Davidson	16.9	17.5	14.8	15.7	16.3
Johnston	21.5	19.4	18.4	18.8	16.9
Randolph	19.4	18.9	20.1	18.0	17.3
North Carolina	22.1	21.4	20.5	20.1	19.7



Source: North Carolina Center of Health Statistics. <https://schs.dph.ncdhhs.gov/data/vital/cd/2017>

\*Death rates with <50 deaths should be interpreted with caution (see table above)

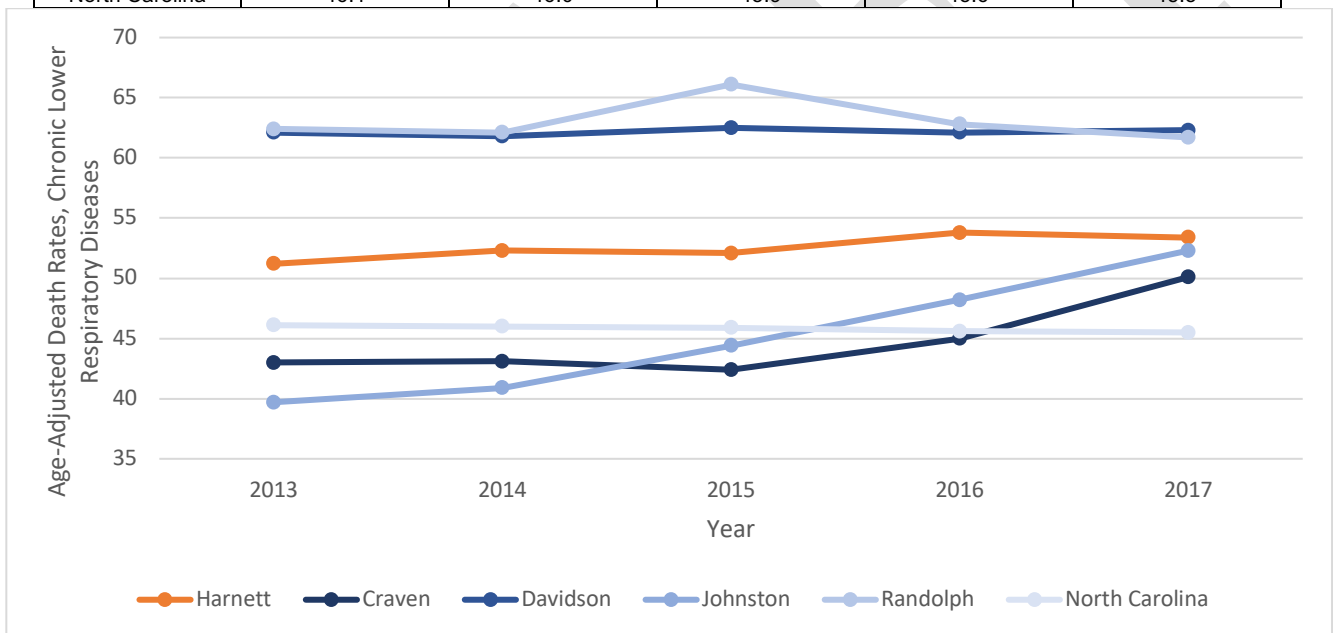
## Chronic Lower Respiratory Disease

Chronic Lower Respiratory Disease is the 3<sup>rd</sup> leading cause of death (age-adjusted) in both Harnett County and North Carolina.

When adjusted for age, Harnett County's mortality rate for Chronic Lower Respiratory Disease (53.4) is greater than the NC rate (45.5). The rate for Harnett County has slightly increased (4.3%) since 2013 versus the state rate which has slightly decreased (1.3%).

### Age-Adjusted Chronic Lower Respiratory Disease Death Rates per 100,000 Residents (Harnett, Peer Counties, and North Carolina, 2013-2017)

County/State	2013	2014	2015	2016	2017
Harnett	51.2	52.3	52.1	53.8	53.4
Craven	43.0	43.1	42.4	45.0	50.1
Davidson	62.1	61.8	62.5	62.1	62.3
Johnston	39.7	40.9	44.4	48.2	52.3
Randolph	62.4	62.1	66.1	62.8	61.7
North Carolina	46.1	46.0	45.9	45.6	45.5



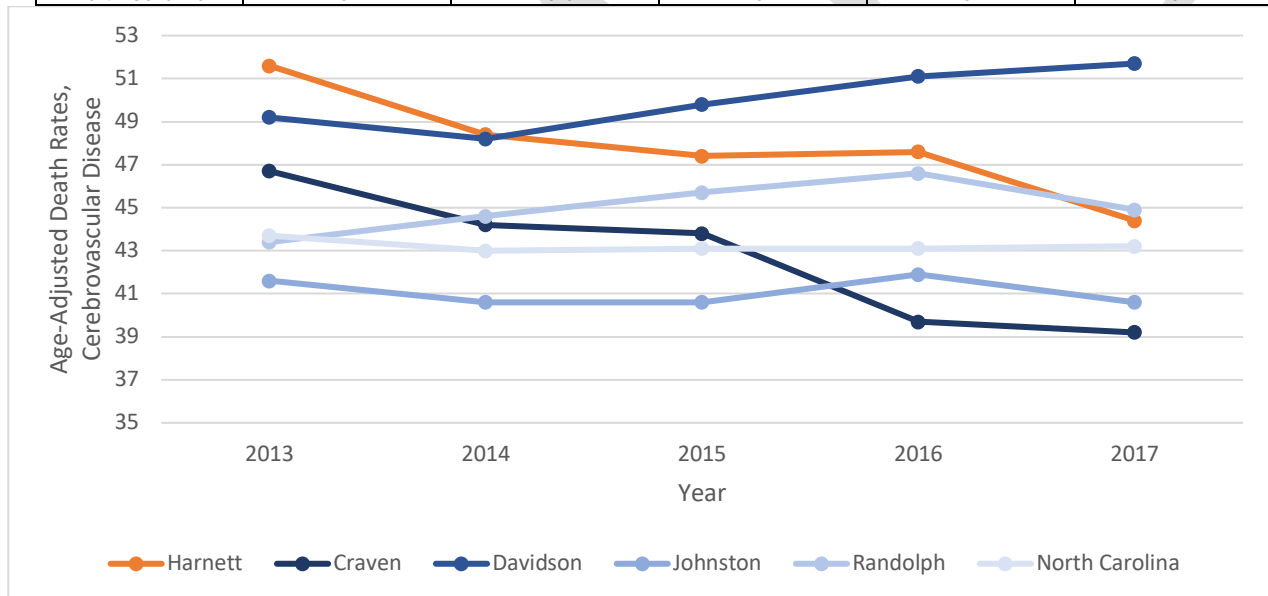
Source: North Carolina Center of Health Statistics. <https://schs.dph.ncdhhs.gov/data/vital/cd/2017>

## Cerebrovascular Disease

Cerebrovascular Disease (stroke) is the 4<sup>th</sup> leading cause of death (age-adjusted) in both Harnett County and North Carolina. As shown in the following chart, Harnett County's number of deaths from cerebrovascular disease is slightly greater than the North Carolina average. Since 2013, Harnett County's rate decreased from 51.6 to 44.4 (or 14.0%). North Carolina's rate over that time has remained essentially constant. Significant improvement has been made in preventing, diagnosing, and treating cerebrovascular disease.

**Age-Adjusted Cerebrovascular Disease Death Rates per 100,000 Residents  
(Harnett, Peer Counties, and North Carolina, 2013-2017)**

County/State	2013	2014	2015	2016	2017
Harnett	51.6	48.4	47.4	47.6	44.4
Craven	46.7	44.2	43.8	39.7	39.2
Davidson	49.2	48.2	49.8	51.1	51.7
Johnston	41.6	40.6	40.6	41.9	40.6
Randolph	43.4	44.6	45.7	46.6	44.9
North Carolina	43.7	43.0	43.1	43.1	43.2



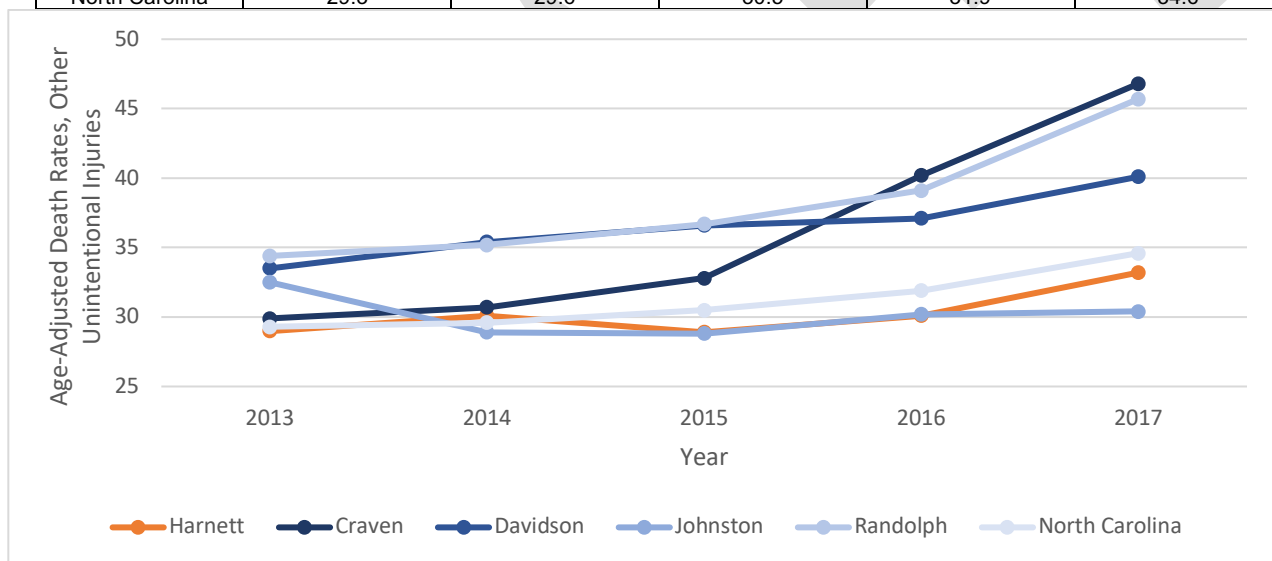
Source: North Carolina Center of Health Statistics. <https://schs.dph.ncdhhs.gov/data/vital/cd/2017>

## Other Unintentional Injuries

Other Unintentional Injuries is the 5<sup>th</sup> leading cause of death (age-adjusted) in Harnett County. As shown in the following chart, the number of deaths from unintentional injuries in Harnett County has increased comparably to the North Carolina average from 2013 to 2017. Over the past 20 years, both Harnett County and North Carolina have experienced significant increases in unintentional injury deaths. Unintentional injuries include poisoning deaths and overdoses.

**Age-Adjusted Other Unintentional Injuries Death Rates per 100,000 Residents  
(Harnett, Peer Counties, and North Carolina, 2013-2017)**

County/State	2013	2014	2015	2016	2017
Harnett	29.0	30.1	28.9	30.1	33.2
Craven	29.9	30.7	32.8	40.2	46.8
Davidson	33.5	35.4	36.6	37.1	40.1
Johnston	32.5	28.9	28.8	30.2	30.4
Randolph	34.4	35.2	36.7	39.1	45.7
North Carolina	29.3	29.6	30.5	31.9	34.6



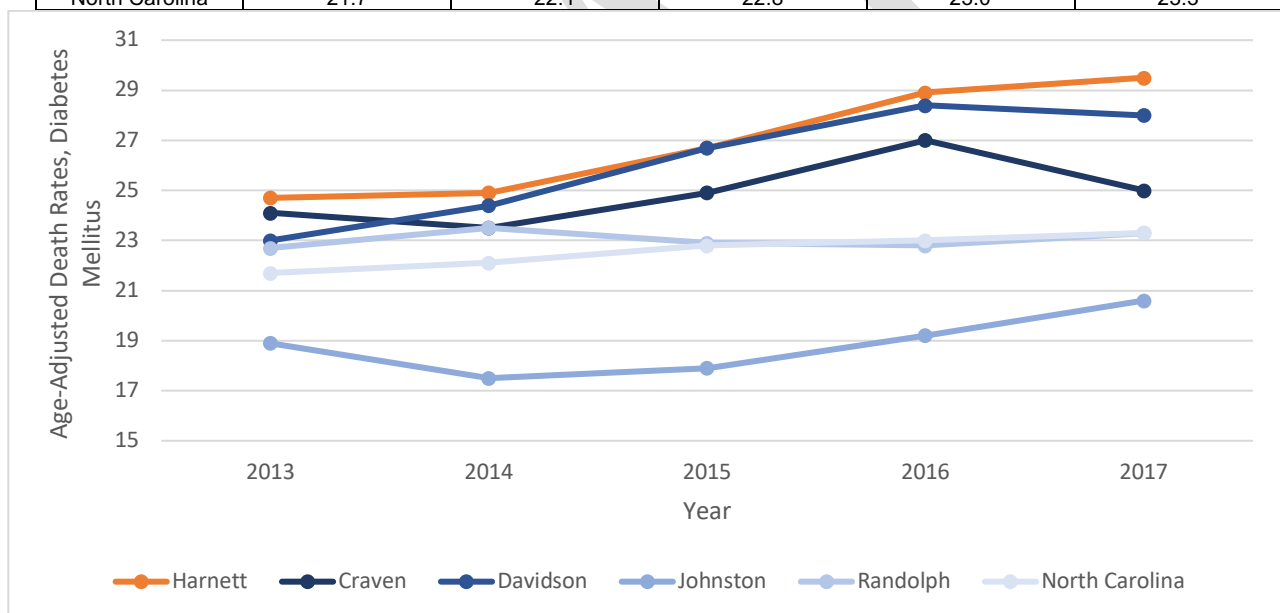
Source: North Carolina Center of Health Statistics. <https://schs.dph.ncdhhs.gov/data/vital/cd/2017>

## Diabetes

Diabetes is the 6<sup>th</sup> leading cause of death (age-adjusted) in Harnett County, while it is the 7<sup>th</sup> leading cause of death in North Carolina. As shown in the following chart, the number of deaths from diabetes in Harnett County has been consistently higher than North Carolina and also the highest among peer counties. Since 2013, Harnett County's rate also slightly increased from 24.7 to 29.5 (or 19.4%). Over that same time period, North Carolina's death rate decreased from 27.5 to 22.1 (or 7.3%). While diabetes is reflected as the 6<sup>th</sup> leading cause of death, it is also often a secondary and a complicating factor that co-exists with heart disease, renal disease, and obesity.

**Age-Adjusted Diabetes Mellitus Disease Related Death Rates per 100,000 Residents (Harnett, Peer Counties, and North Carolina, 2013-2017)**

County/State	2013	2014	2015	2016	2017
Harnett	24.7	24.9	26.7	28.9	29.5
Craven	24.1	23.5	24.9	27.0	25.0
Davidson	23.0	24.4	26.7	28.4	28.0
Johnston	18.9	17.5	17.9	19.2	20.6
Randolph	22.7	23.5	22.9	22.8	23.3
North Carolina	21.7	22.1	22.8	23.0	23.3



Source: North Carolina Center of Health Statistics. <https://schs.dph.ncdhhs.gov/data/vital/cd/2017>

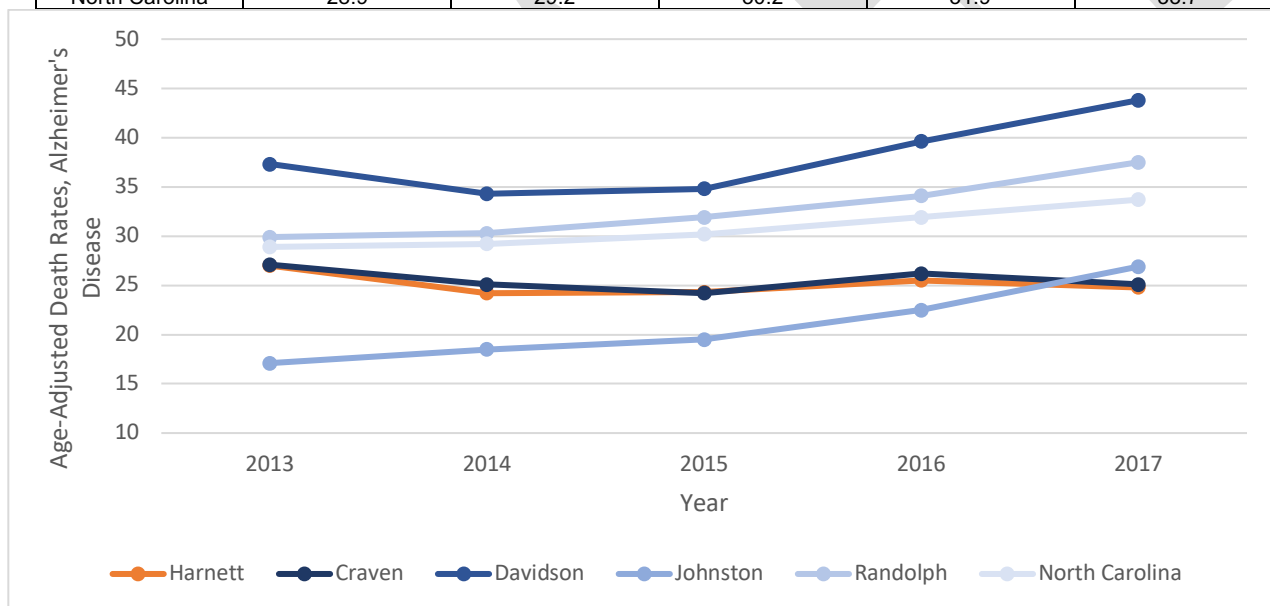


## Alzheimer's Disease

Alzheimer's is the 7<sup>th</sup> leading cause of death (age-adjusted) in Harnett County. As shown in the following chart, Harnett County's deaths from Alzheimers is below the average rate for North Carolina. From 2013 to 2017, Harnett County's age adjusted death rate is consistently lower than the state of North Carolina and decreased from 27.0 to 24.8 (or 8.1%). During that same period, the rate for North Carolina increased from 28.9 to 33.7 (or 16.6%).

**Age-Adjusted Alzheimer's Disease Death Rates per 100,000 Residents  
(Harnett, Peer Counties, and North Carolina, 2013-2017)**

County/State	2013	2014	2015	2016	2017
Harnett	27.0	24.2	24.3	25.5	24.8
Craven	27.1	25.1	24.2	26.2	25.1
Davidson	37.3	34.3	34.8	39.6	43.8
Johnston	17.1	18.5	19.5	22.5	26.9
Randolph	29.9	30.3	31.9	34.1	37.5
North Carolina	28.9	29.2	30.2	31.9	33.7



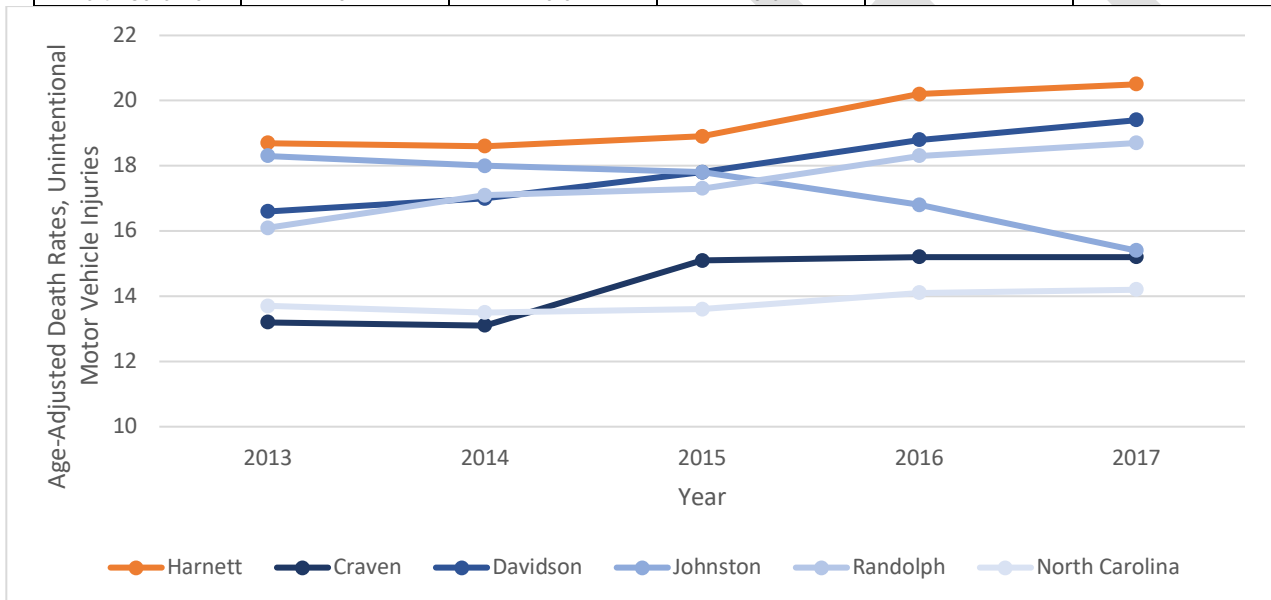
Source: North Carolina Center of Health Statistics. <https://schs.dph.ncdhhs.gov/data/vital/cd/2017>

## Unintentional Motor Vehicle Injuries

Unintentional Motor Vehicle Injuries are the 8<sup>th</sup> leading cause of death (age-adjusted) in Harnett County. From 2013 to 2017, Harnett County's motor vehicle injury age-adjusted mortality rate slightly increased from 18.7 to 20.5 per 100,000 population (or 9.6%). North Carolina's rate also increased from 13.7 to 14.2 per 100,000 population (or 3.6%). Harnett County's rate is much higher than the state and the highest among peer counties.

### Age-Adjusted Unintentional Motor Vehicle Injury Death Rates per 100,000 Residents (Harnett, Peer Counties, and North Carolina, 2013-2017)

County/State	2013	2014	2015	2016	2017
Harnett	18.7	18.6	18.9	20.2	20.5
Craven	13.2	13.1	15.1	15.2	15.2
Davidson	16.6	17.0	17.8	18.8	19.4
Johnston	18.3	18.0	17.8	16.8	15.4
Randolph	16.1	17.1	17.3	18.3	18.7
North Carolina	13.7	13.5	13.6	14.1	14.2



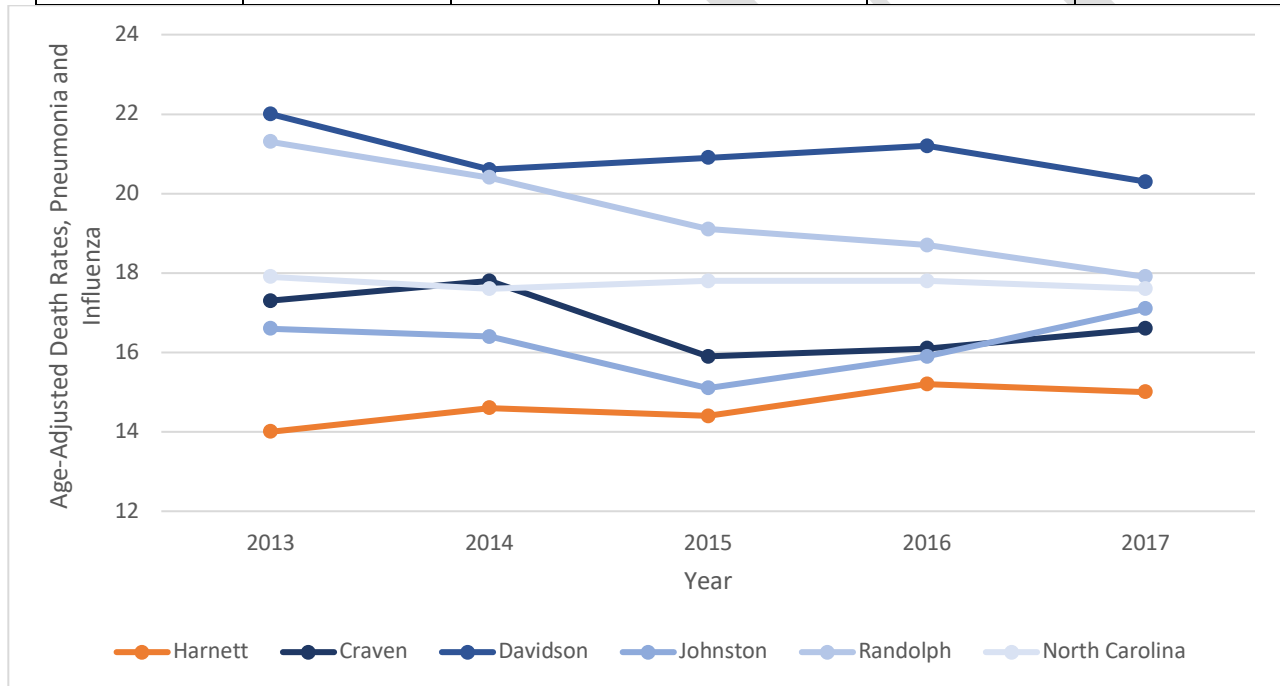
Source: North Carolina Center of Health Statistics. <https://schs.dph.ncdhhs.gov/data/vital/cd/2017>

## *Pneumonia and Influenza*

Pneumonia and influenza is the 9th leading cause of death (age-adjusted) in Harnett County. As shown in the following chart, the number of deaths from pneumonia and influenza in Harnett County are consistently lower than the state of North Carolina and that of peer counties. However, from 2013 to 2017, the rate for Harnett County has slightly increased.

**Age-Adjusted Pneumonia & Influenza Related Death Rates per 100,000 Residents  
(Harnett, Peer Counties, and North Carolina, 2013-2017)**

County/State	2013	2014	2015	2016	2017
Harnett	14.0	14.6	14.4	15.2	15.0
Craven	17.3	17.8	15.9	16.1	16.6
Davidson	22.0	20.6	20.9	21.2	20.3
Johnston	16.6	16.4	15.1	15.9	17.1
Randolph	21.3	20.4	19.1	18.7	17.9
North Carolina	17.9	17.6	17.8	17.8	17.6



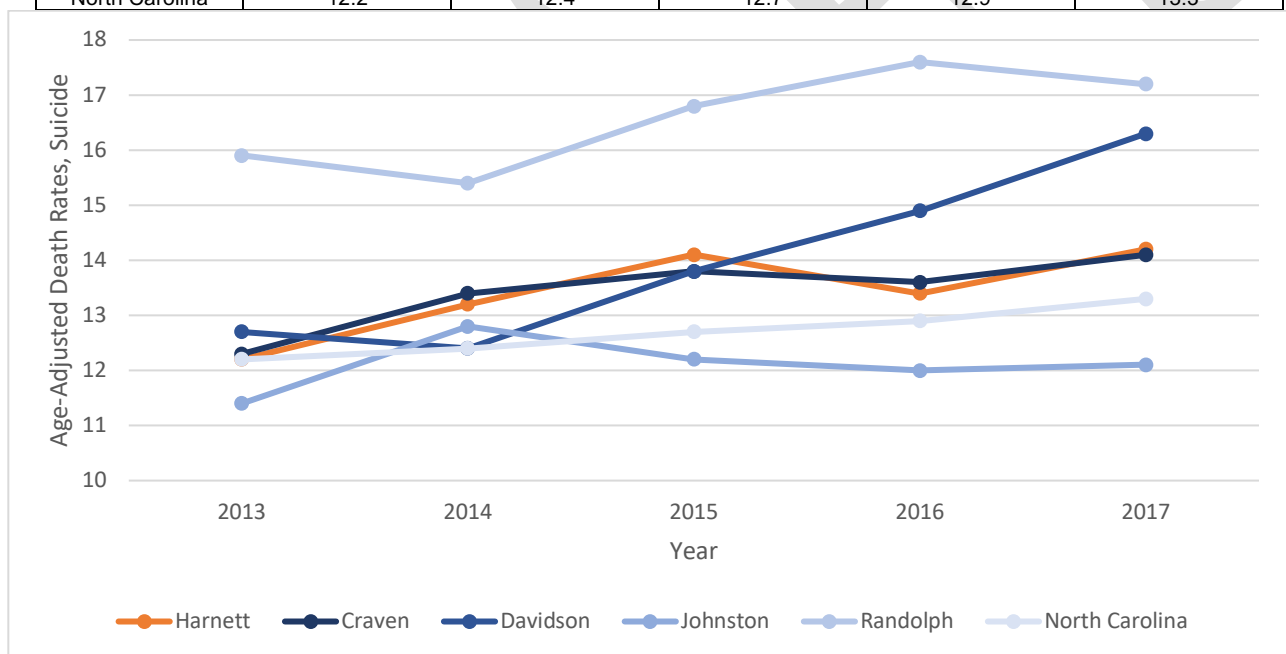
Source: North Carolina Center of Health Statistics. <https://schs.dph.ncdhhs.gov/data/vital/cd/2017>

## Suicide

Suicides are the 10<sup>th</sup> leading cause of death (age-adjusted) in Harnett County. In the previous CHNA cycle, suicide was not among the ten leading causes of death in Harnett County and is still not among the ten leading causes of death for the state of North Carolina. From 2013 to 2017, Harnett County's suicide-related mortality rate slightly increased from 12.2 to 14.2 per 100,000 population (or 16.4%). North Carolina's rate also increased from 12.2 to 13.3 per 100,000 population (or 9.0%).

### Age-Adjusted Suicide Death Rates per 100,000 Residents (Harnett, Peer Counties, and North Carolina, 2013-2017)

County/State	2013	2014	2015	2016	2017
Harnett	12.2	13.2	14.1	13.4	14.2
Craven	12.3	13.4	13.8	13.6	14.1
Davidson	12.7	12.4	13.8	14.9	16.3
Johnston	11.4	12.8	12.2	12.0	12.1
Randolph	15.9	15.4	16.8	17.6	17.2
North Carolina	12.2	12.4	12.7	12.9	13.3



Source: North Carolina Center of Health Statistics. <https://schs.dph.ncdhhs.gov/data/vital/cd/2017>

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## ***SECONDARY DATA: Existing Healthcare Facilities and Resources***

The following section provides a description of the health care landscape in Harnett County, including the available health care facilities and services, the need for additional health care facilities and services as identified by North Carolina.

### ***Hospital Services***

#### ***Harnett Health System***

Harnett Health is a private, not-for-profit healthcare organization based in Harnett County, N.C. The healthcare system encompasses a network of facilities and physician offices throughout Harnett County and surrounding communities and has more than 250 credentialed providers.

Harnett Health has a long history of service in Harnett County. Betsy Johnson Hospital in Dunn, N.C. was founded in 1937 and continues to provide quality healthcare to the residents of Harnett County and surrounding communities. Central Harnett Hospital in Lillington, which opened January 18, 2013, expanded Harnett Health's commitment to the residents of Harnett County to meet the healthcare needs of fast growing population in Angier and Lillington and throughout Harnett County.

Services offered through Betsy Johnson Hospital include emergency services ; outpatient surgery; diagnostic imaging, birthing center; 87 bed inpatient nursing care with hospitalists for critical care, medical-surgical care, and pediatrics; breast care; rehabilitation services with physical, occupational, and speech therapies, aquatic therapy & exercise, and cardiac and pulmonary rehab. Services at Central Harnett include emergency services, outpatient surgery, cardiac cath lab, Cancer Center, diagnostic imaging, critical care and inpatient nursing with 44 private inpatient rooms.

Inpatient and outpatient services at Harnett Health have long included caring for cardiac patients, providing diagnostic services, and both inpatient acute care and outpatient care. Both Central Harnett and Betsy Johnson provide a variety of cardiac services. Cardiac Catheterization services were added at Central Harnett Hospital in 2018. Outpatient Cardiac Testing (Cardiopulmonary Services) is available at several locations in Harnett County including:

Central Harnett Hospital | 215 Brightwater Drive, Lillington  
Betsy Johnson Hospital | 800 Tilghman Drive, Dunn

- Harnett Health System
  - Betsy Johnson
    - 87 Acute Care beds
  - Central Harnett Hospital
    - 44 Acute Care beds

Harnett Health System (HHS) is managed by Cape Fear Valley Health System (CFVHS). CFVHS operates a variety of health care facilities from its headquarters in Fayetteville, North Carolina including a tertiary acute care hospital, a long-term acute care hospital, a critical access hospital, an inpatient rehabilitation facility, county emergency medical services, an outpatient psychiatric facility, a detoxification facility, a wellness center, 15 primary care clinics, 20 specialty care clinics, 4 walk-in clinics, and Health Pavilion North, an outpatient complex.

### **Relationships with Other Health Care Providers**

Betsy Johnson established a relationship with the Cape Fear Valley Health Medical Oncology department over five years ago to facilitate services for Medical Oncology. The Cancer Center at Central Harnett opened in July, 2019. Multiple Cardiology groups are now providing services in Harnett County.

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## *HEALTH NEEDS, PRIORITIZATION PROCESS, AND RESULTS*

The final portion of the CHNA includes a summary of the priority health needs identified. Although a large number of potential needs have been discussed, it is simply not feasible for Harnett Health System to apply significant resources to each and every area of need. To determine which needs are priorities, Harnett Health System reviewed outcomes and findings from the CHAT Survey and utilized an objective approach to estimate which areas of need are of greatest concern. The process and associated results are as follows:

### *Prioritization Process*

Each section of the CHAT Survey has been incorporated not only to measure and estimate the level of health needs for Harnett County residents, but also to highlight key factors and conditions expected to have the greatest impact on those needs going forward. Those sections included the following:

- Demographics
- Quality of Life Indicators
- Community Priorities
- Health Care Utilization
- Health Status & Health Behaviors
- Emergency Preparedness

Leveraging the analyses and findings from those sections and based upon our community survey and review of secondary data, Harnett Health System has condensed its list to select areas which it believes to be the priorities for Harnett County. The health issues in Harnett County include:

- Heart Disease
- Cancer
- Diabetes
- Oral Health
- Mental Health
- Fitness and Nutrition

## *Results*

At the conclusion of the prioritization process, Harnett Health System identified seven health needs as the key areas for action. These areas of concern impact utilization at Betsy Johnson and Central Harnett Hospital. The seven priority health needs are:

- Heart and Vascular Disease (*1<sup>st</sup> leading cause of death*)
- Cancer (*2<sup>nd</sup> leading cause of death*)
- Diabetes (*6<sup>th</sup> leading cause of death*)
- Oral health (*Major concern per community survey, health rankings, and state*)
- Mental Health (*Major concern per community survey, health rankings, and state; related to Suicide, the 10<sup>th</sup> leading cause of death*)
- Fitness and Nutrition Education (*Major concern per community survey and state*)

Harnett Health will continue to work with the representatives from the Harnett County Health Department, Cape Fear Valley Health System, the Healthy Harnett Coalition, Campbell University School of Medicine and the Campbell University School of Public Health, First Choice Community Health Center, and others as identified to address these needs and improve population health.

In particular, Harnett Health will develop an implementation plan to address continuing efforts associated with addressing chronic disease in Harnett County in particular heart disease, cancer, diabetes and fitness/nutrition.



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## *Appendix 1 PRIMARY DATA: Community Health Survey Results*

The Community Health Survey for Harnett County was conducted in Spring 2019. A total of 577 individuals were surveyed. After data cleaning (including listwise deletion of incomplete survey responses), the final dataset included 443 responses. Surveys were collected using a combination of household canvassing using addresses randomly selected from a Two-Stage Cluster Sampling process (122 surveys) and online, self-administered convenience sampling (321 surveys). Much of the data loss from the cleaning process is attributed to surveys started by non-residents and surveys in which participants completed less than 5% of the online survey.

The Community Health Survey for Harnett County is a collaboration between Harnett Health, Harnett County Health Department, the Healthy Harnett Coalition, and the Department of Public Health at Campbell University.

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## Demographics

	2019 CHA Survey		2017 ACS (projections)		2010 Census	
Sample Size (N)	443		121,789		114,678	
<b>Gender</b>						
Male	112	25.3%	59,921	49.2%	56,199	49.0%
Female	309	69.8%	61,868	50.8%	58,479	51.0%
<b>Age</b>						
Median	48		33.4		33.5	
Under 5 years	-	-	9,766	7.60%	9,304	8.1%
5 to 9 years	-	-	9,589	7.40%	9,000	7.8%
10-14 years	-	-	10,029	7.80%	8,626	7.5%
15-19 years	6	1.6%	8,897	6.90%	8,540	7.4%
20-24 years	21	4.7%	8,335	6.50%	7,975	7.0%
25-29 years	39	8.8%	20,042	15.60%	8,080	7.0%
30-34 years	32	7.2%			8,212	7.2%
35-39 years	42	9.5%	17,601	13.70%	8,493	7.4%
40-44 years	47	10.6%			7,955	6.9%
45-49 years	30	6.8%	16,138	12.50%	7,730	6.7%
50-54 years	48	10.8%	7,329	5.70%	7,207	6.3%
55-59 years	43	9.7%			6,199	5.4%
60-64 years	37	8.4%	6,197	4.80%	5,410	4.7%
65-69 years	37	8.4%			4,061	3.5%
70-74 years	26	5.9%	9,116	7.10%	3,002	2.6%
75-79 years	12	2.7%			2,196	1.9%
80-84 year	7	1.5%	1,387	3.40%	1,476	1.3%
85 years and over	2	0.5%			1,212	1.1%

	2019 CHA Survey		2017 ACS (projections)		2010 Census	
<b>Race</b>						
White	365	82.4%	83,794	68.8%	78,300	68.3%
Black or African American	42	9.5%	25,581	21.0%	23,973	20.9%
American Indian	6	1.4%	1,138	0.9%	1,392	1.2%
Asian / Asian Indian	3	0.7%	1,509	1.2%	1,029	0.9%
Native Hawaiian and Other Pacific	0	0.0%	40	0.0%	139	0.1%
Some Other Race	9	2.0%	4,910	4.0%	6,272	5.5%
Two or more races	-		4,817	4.0%	3,573	3.1%
<b>Education</b>						
Less than HS Diploma or GED	8	1.8%	13,365	15.1%	*16,561	*24.9%
Bachelor's Degree or Higher	173	39.1%	15,056	17.1%	*7,864	*11.8%
<b>Household Income</b>						
Sample Size (N)	443		41,601			
Median household	**\$50,000-\$74,999		\$44,417			

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## Quality of Life Indicators

Quality of Life Scores by Demographic Category							
Category		Good Health Care System (Mean)	Good Place to Raise Children (Mean)	Good Place to Grow Old (Mean)	Plenty of Economic Opportunity (Mean)	Safe Place to Live (Mean)	Plenty of Help for People in Times of Need(Mean)
Total (433)		3.12	3.83	3.67	2.52	3.77	3.34
Race	White (365)	3.12	3.84	3.68	2.56	3.75	3.35
	African- American (42)	3.29	3.95	3.90	2.14	4.07	3.45
	Native (6)	2.50	3.67	3.33	2.33	4.00	2.83
Gender	Females (309)	3.09	3.85	3.60	2.52	3.77	3.33
	Males (112)	3.26	3.80	3.80	1.80	3.80	2.80
Age Group	19 & Under (6)	3.67	3.67	3.83	3.17	4.00	3.83
	20-39 (134)	3.09	3.66	3.62	2.51	3.69	3.43
	40-69 (242)	3.11	3.92	3.66	2.47	3.83	3.31
	70 & Older (61)	3.21	3.84	3.79	2.67	3.69	3.25
Hispanic Ethnicity	Yes (11)	3.55	3.55	3.55	2.55	3.64	3.27
	No (410)	3.12	3.85	3.69	2.53	3.80	3.37
Income Category	Less than \$10,000 (12)	3.33	3.42	3.17	2.42	4.00	3.67
	\$10,000-\$14,999 (14)	2.64	3.93	4.07	1.69	3.71	2.93
	\$15,000-\$24,999 (16)	3.19	406	3.25	2.38	3.75	2.94
	\$25,000-\$34,999 (39)	3.21	3.67	3.56	2.49	3.77	3.05
	\$35,000-\$49,999 (64)	3.28	3.78	3.80	2.39	3.73	3.42
	\$50,000-\$74,999 (60)	3.40	4.08	3.93	2.78	3.97	3.62
	\$75,000-\$99,999 (69)	2.87	3.75	3.39	2.55	3.74	3.28
	\$100,000 or more (110)	3.07	3.96	3.71	2.44	3.79	3.33
	Refused to Answer (22)	3.36	3.82	4.36	3.18	4.14	3.91
Education Status	<9 <sup>th</sup> grade (3)	2.67	4.00	3.33	1.50	3.33	2.67
	9-12 grade, no diploma (5)	3.20	4.00	3.40	2.50	3.80	3.00
	High school or GED (69)	3.41	3.88	3.97	2.62	3.91	3.59
	Associate degree (102)	3.14	3.87	3.67	2.45	3.72	3.27
	Some college, no degree (62)	2.98	3.84	3.66	2.81	3.84	3.18
	Bachelor's Degree (108)	3.04	3.71	3.65	2.35	3.65	3.42
	Graduate/professional (65)	3.15	4.02	3.58	2.55	4.03	3.37

## Community Priorities

Which health behavior do you think the community needs more information about? (Frequency of 10 or more)	
Health Behavior	Frequency of Response
Substance Abuse Prevention	96
Eating Well/Nutrition	57
Exercising/Fitness	25
Managing Weight	21
Caring for Family Members with Special Needs/Disabilities	20
Going to the Doctor for Yearly Checkups and Screenings	20
Elder Care	16
Driving Safely	16
Quitting Smoking/Tobacco Use Prevention	13
Preparing for an Emergency/Disaster	19
Going to the Dentist for Yearly Checkups and Screenings	10
Stress Management	10

Which one issue most affects the quality of life for the people who live in Harnett County?		
Community Issue	Frequency of Response	Percent
Low Income/Poverty	188	42.4%
Theft	28	6.3%
Lack of/Inadequate Insurance	25	5.6%
Lack of Community Support	21	4.7%
Violent Crime	18	4.1%
Dropping Out of School	15	3.4%
Pollution (air, water, land)	11	2.5%
Discrimination/Racism	7	1.6%
Domestic Violence	6	1.4%
Homelessness	5	1.1%
Hopelessness	4	0.9%
Child Abuse	4	0.9%
Elder Abuse	4	0.9%
Other	68	15.3%
None	35	7.9%

<b>Which one of the following services needs the most improvement in your neighborhood or community?</b>		
<b>Community Service</b>	<b>Frequency of Response</b>	<b>Percent</b>
Better/more recreational facilities	46	10.4%
Animal control	20	4.5%
Positive teen activities	36	8.1%
Availability of employment	24	5.4%
Higher paying employment	54	12.2%
More affordable health services	37	8.4%
Elder care options	15	3.4%
Better/more health food choices	39	8.8%
Healthy family activities	14	3.2%
Transportation options	17	3.8%
Road maintenance	18	4.1%
Services for disabled people	12	2.7%
More affordable/better housing	12	2.7%
Child care options	8	1.8%
Counseling/mental health/support groups	28	6.3%
Number of health care providers.	23	5.2%
No improvement needed	10	2.3%
Road safety	5	1.1%
Other	20	4.5%

## Health Care Utilization

Where do you go to seek health care when you are sick?		
Response Options	Response Percent	Response Count
Doctor's Office	74.5%	330
Walk-in Medical Clinic	4.3%	18
Health Department	5.4%	24
Urgent Care Center	5.9%	26
Hospital	2.9%	13
Other	4.3%	19
Total Number of Responses		430
Skipped Question		13

The most common "Other" selected was military-centered care (e.g., VA, Ft. Bragg, military).

If you needed to go to a hospital, to which hospital would you most likely go?		
Response Options	Response Percent	Response Count
Central Harnett	23.9%	106
Betsy Johnson	14.9%	66
WakeMed or Western Wake	19.9%	88
REX	13.1%	58
Cape Fear Valley	2.9%	13
Central Carolina	5.2%	23
Johnson Health	0.9%	4
Other	12.9%	57
Total Number of Responses		430
Skipped Question		13

<b>What is your primary health insurance plan?</b>		
<b>Response Options</b>	<b>Response Percent</b>	<b>Response Count</b>
Blue Cross and Blue Shield of North Carolina	32.5%	144
The military, Tricare, CHAMPUS, or the VA	9.0%	40
Medicare	12.2%	54
Other private health insurance plan purchased from employer or workplace	23.7%	105
Medicaid or Carolina ACCESS or Health Choice 55	2.7%	12
Other private health insurance plan purchased directly from an insurance company	2.9%	13
Other government plan	1.4%	6
No Health Plan of Any Kind	5.4%	24
The State Employee Health Plan	5.9%	26
<b>Total Number of Responses</b>		<b>430</b>
<b>Skipped Question</b>		<b>13</b>

<b>In the past 12 months, did you have a problem getting the health care you needed for you personally or for a family member from any type of health care provider, dentist, pharmacy, or other facility?</b>		
<b>Response Options</b>	<b>Response Percent</b>	<b>Response Count</b>
Yes	16.7%	74
No	78.8%	349
Don't Know	1.6%	7
<b>Total Number of Responses</b>		<b>430</b>
<b>Skipped Question</b>		<b>13</b>

<b>What type of provider or facility did you or your family member have trouble getting health care from?</b>	
<b>Response Options</b>	<b>Response Count</b>
Dentist	21
General Practitioner	21
Specialist	21
Pharmacy/Rx	15
OBGYN	8
Eye Care/Ophthalmologist/Optometrist	7
Urgent Care Center	5
Pediatrician	4
Hospital	4
Health Department	3
Medical Clinic	2



Which of these problems prevented you or your family member from getting the necessary health care?	
Response Options	Response Count
No Insurance Coverage	8
High Cost	12
Insurance was not Accepted by Provider	2
Insurance was not Accepted by Hospital	0
Insurance was not Accepted by Pharmacy	2
Insurance was not Accepted by Dentist	1
Unavailable Transportation	2
Unaware of where to go	4
Could not get an appointment	8
Wait was too long	6

If a friend or family member needed counseling for a mental health or a drug/alcohol abuse problem, who is the first person you would tell them to talk to?		
Response Options	Response Percent	Response Count
Private counselor or therapist	30.7%	136
Doctor	30.7%	136
Support Group	5.9%	26
Minister / Religious Official	13.1%	58
School Counselor	0.9%	4
Other	5.0%	22
Don't know	10.6%	47
Total Number of Responses		429
Skipped Question		14

## Health Status & Health Behaviors

Would you say that, in general, your health is...		
Response Options	Response Percent	Response Count
Excellent	10.4%	46
Very Good	35.4%	157
Good	35.9%	159
Fair	13.8%	61
Poor	2.7%	12
Don't Know	0.5%	2
Total Number of Responses		437
Skipped Question		6

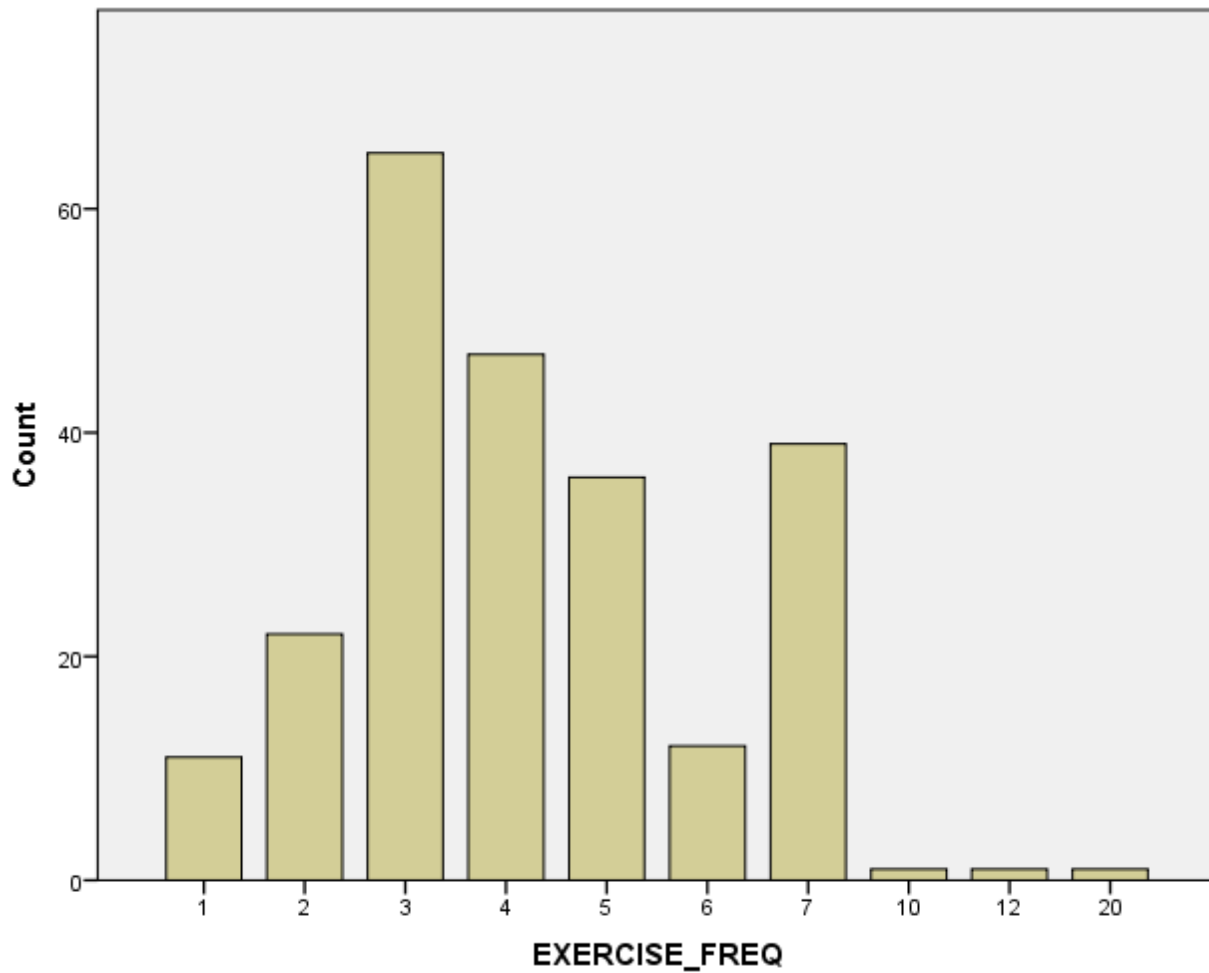
Have you ever been told by a doctor, nurse, or other health professional that you have any of these health conditions?		
Response Options	Response Percent	Response Count
Asthma	12.9%	57
Depression or Anxiety	33.3%	146
High Blood Pressure	39.7%	176
High Cholesterol	30.0%	133
Diabetes	10.8%	48
Osteoporosis	6.3%	28
Overweight/Obesity	38.8%	172
Angina/ Heart Disease	8.1%	36
Cancer	10.8%	48



## Health Behaviors

During a normal week (7 days), other than in your regular job, do you engage in any physical activity or exercise that lasts at least a half an hour?		
Response Options	Response Percent	Response Count
Yes	65.0%	288
No	30.5%	135
Total Number of Responses		434
Skipped Question		9

Since you said yes, how many times do you exercise or engage in physical activity during a normal week (7 days)?

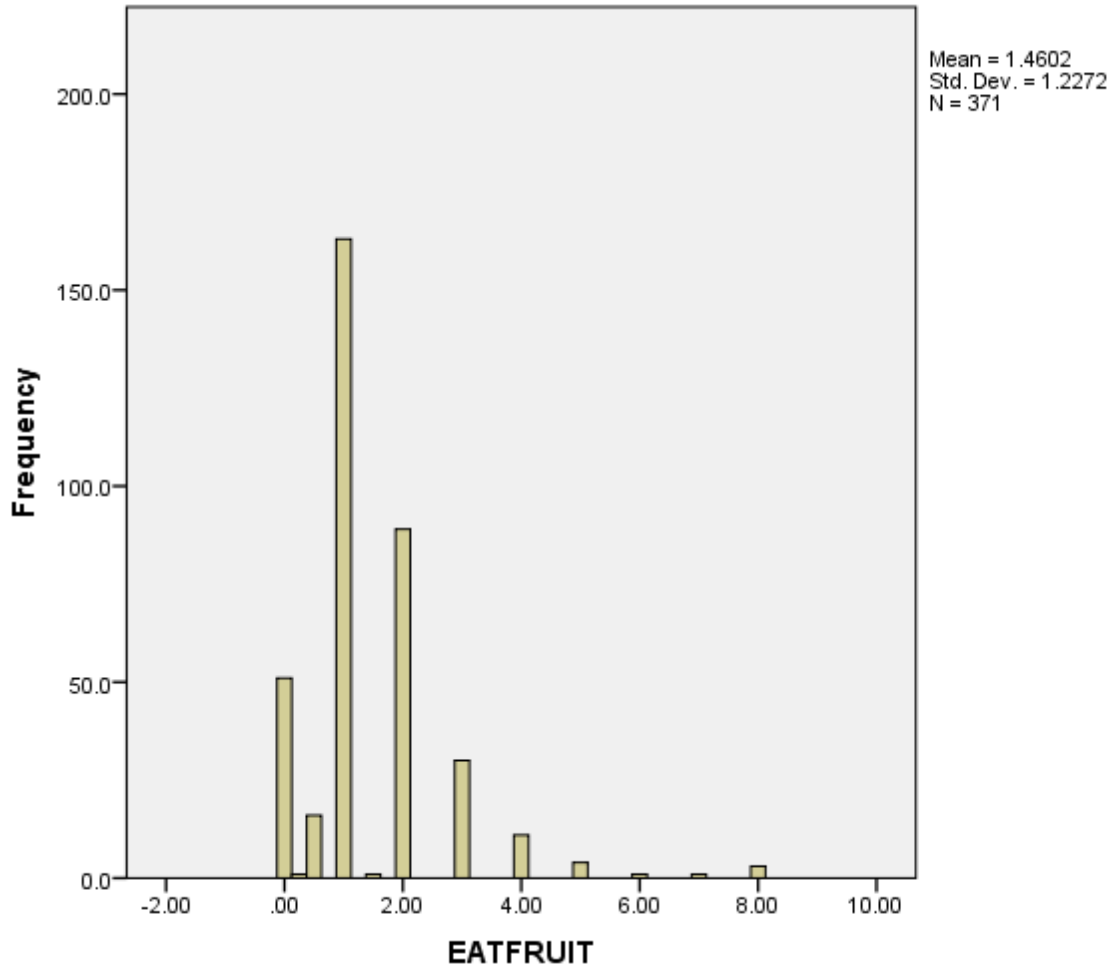


Where do you go to exercise or engage in physical activity?		
Response Options	Response Percent	Response Count
Home	39.3%	174
Private Gym	17.8%	79
Park	7.7%	34
Public Recreation Center	3.8%	17
Other	10.4%	46

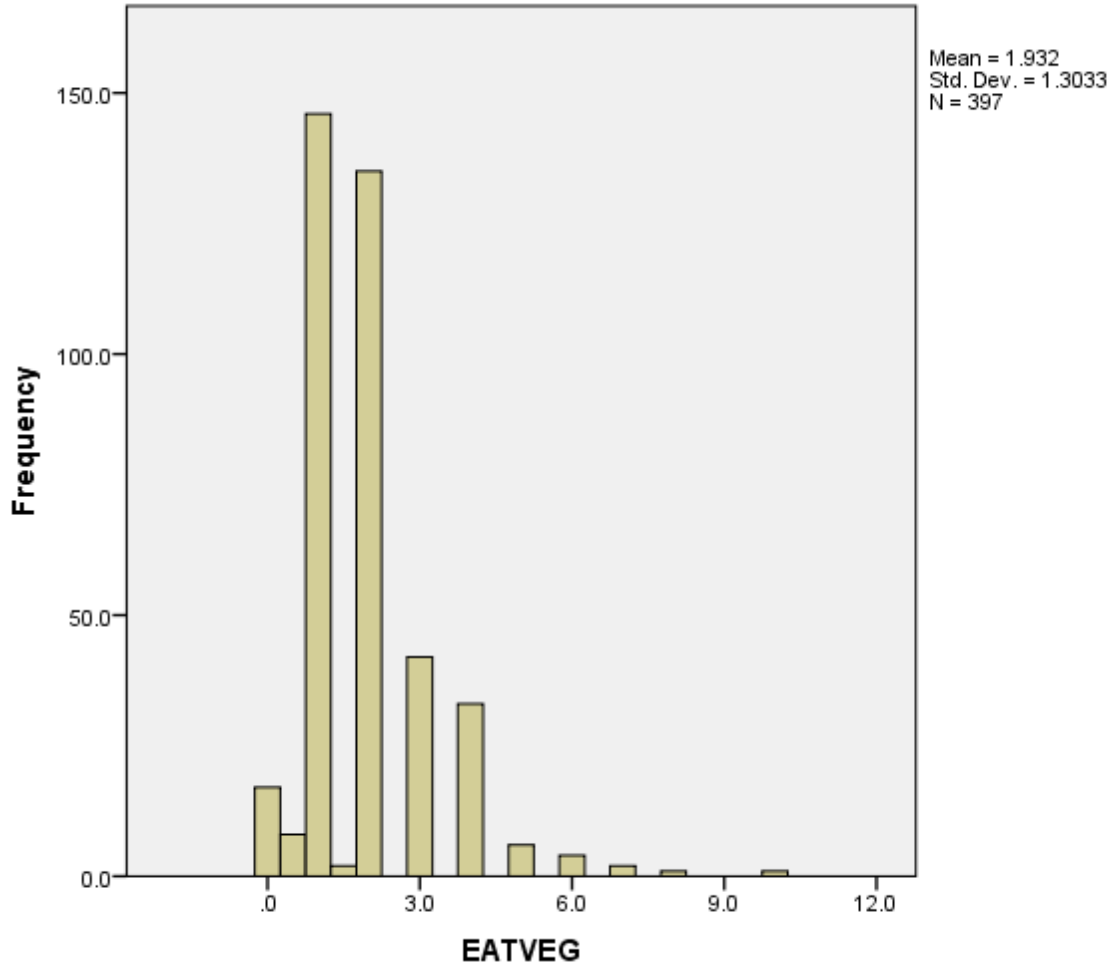
Most common "other" responses included" neighborhood/community, Fort Bragg, and School

What are the reasons you do not exercise for at least a half hour during a normal week?		
Response Options	Response Percent	Response Count
My job is physical or hard labor	5.2%	23
Exercise is not important to me.	2.3%	10
I don't have access to a facility that has the things I need, like a pool, golf course, or a track.	2.3%	10
I don't have enough time to exercise.	9.5%	42
I would need child care and I don't have it.	2.5%	11
I don't know how to find exercise partners.	1.8%	8
I don't like to exercise.	7.7%	34
It costs too much to exercise.	2.3%	10
There is no safe place to exercise.	2.3%	10
I'm too tired to exercise.	9.5%	42
I'm physically disabled.	3.4%	15

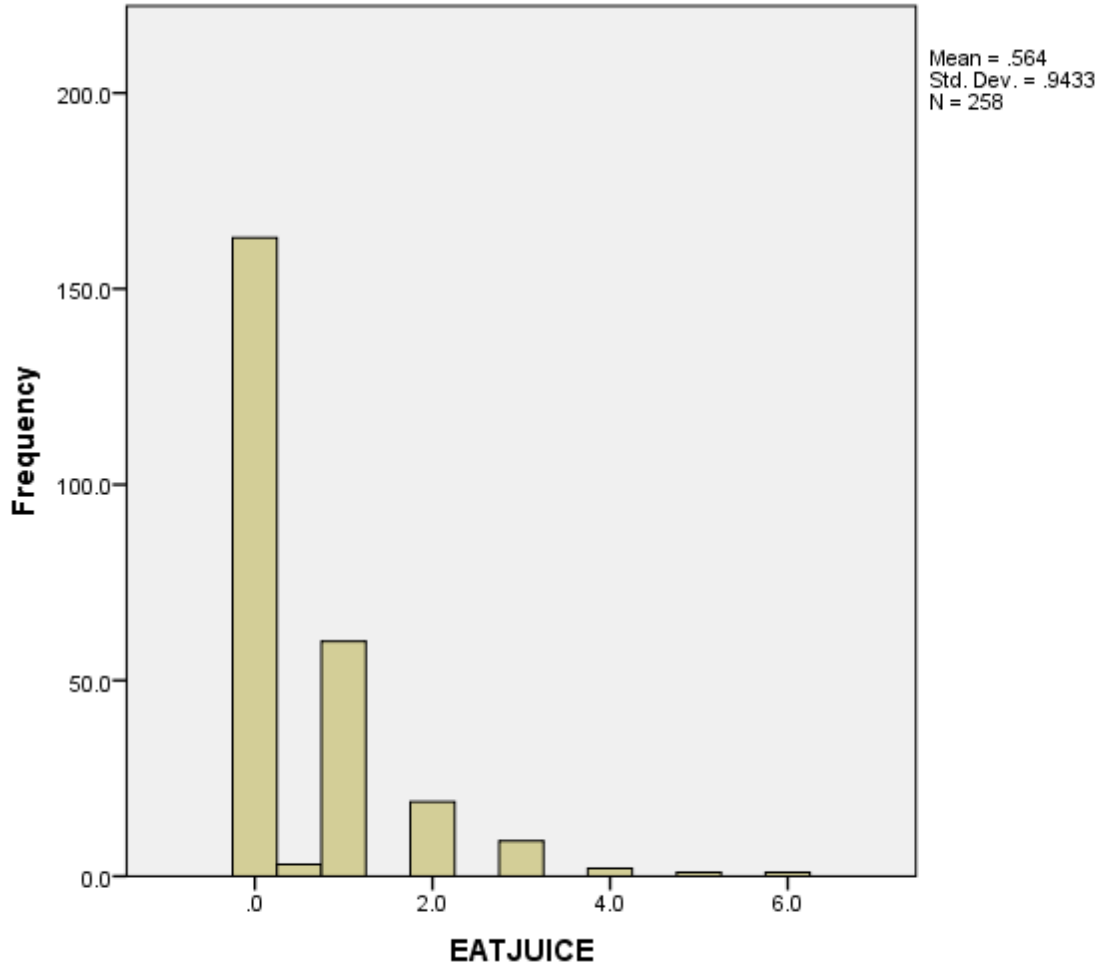
How many cups of fruit would you say you eat in a typical day?



How many cups of vegetables would you say you eat in a typical day?



How many cups of 100% fruit juice would you say you consume in a typical day?



Have you been exposed to secondhand smoke in the past year?		
Response Options	Response Percent	Response Count
Yes	42.9%	190
No	50.8%	225
I don't know	3.2%	14
Total Number of Responses		429
Skipped Question		14

Do you currently smoke?		
Response Options	Response Percent	Response Count
Yes	12.6%	56
No	84.9%	376
Total Number of Responses		432
Skipped Question		11

During the past 12 months, have you had a seasonal flu vaccine?		
Response Options	Response Percent	Response Count
Yes	65.4%	290
No	31.6%	140
Total Number of Responses		430
Skipped Question		13

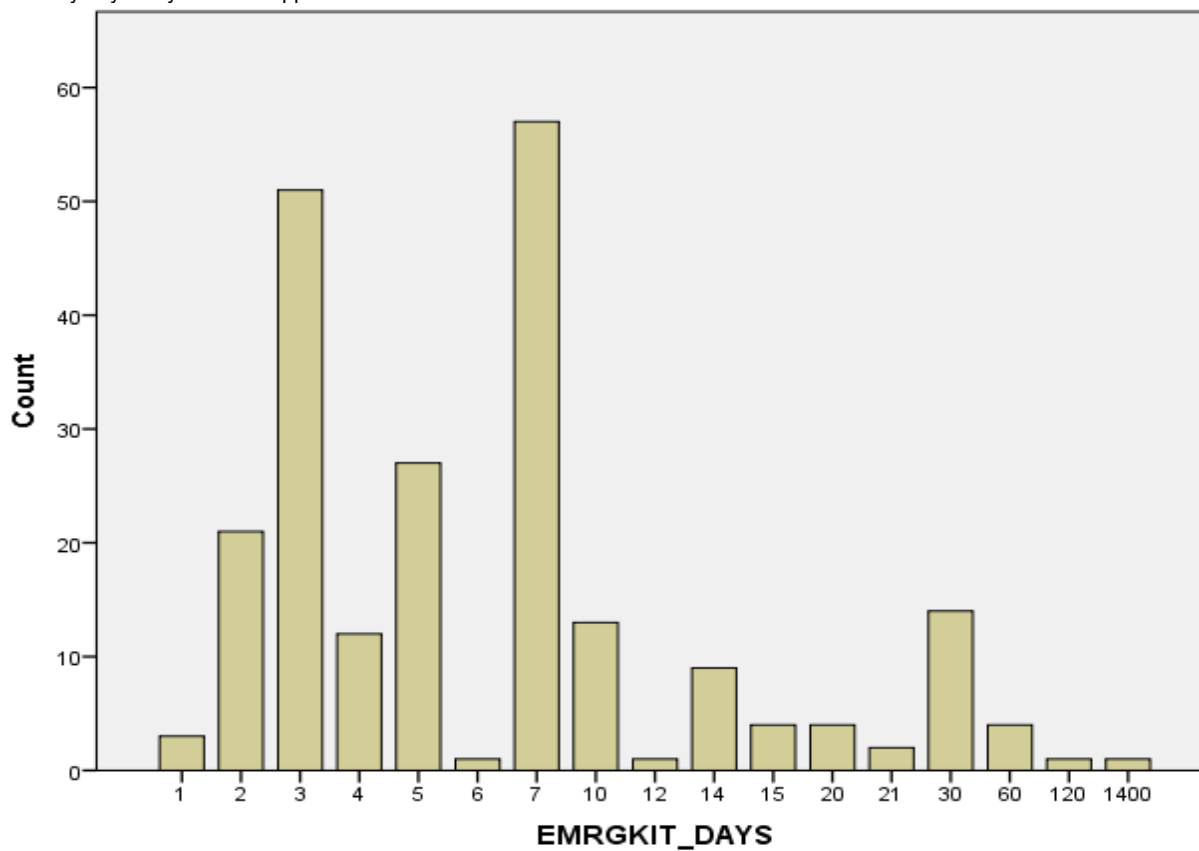


## Emergency Preparedness

Does your household have working smoke and carbon monoxide detectors?		
Response Options	Response Percent	Response Count
Yes, smoke detectors only	33.2%	147
Yes, carbon monoxide detectors only	0.2%	1
Yes, both	57.8%	256
No	4.7%	21
Don't Know / Not Sure	1.1%	5
Total Number of Responses		430
Skipped Question		13

Does your family have a basic emergency supply kit?		
Response Options	Response Percent	Response Count
Yes	60.9%	270
No	33.4%	148
Don't Know / Not Sure	2.7%	12
Refused to Answer	3.1%	8
Total Number of Responses		430
Skipped Question		13

How many days do you have supplies for?



<b>What would be your main way of getting information from authorities in a large-scale disaster or emergency?</b>		
<b>Response Options</b>	<b>Response Percent</b>	<b>Response Count</b>
Television	24.6%	109
Radio	11.7%	52
Internet	22.1%	98
Social networking site	8.6%	38
Neighbors	1.4%	6
Text message (emergency alert system)	23.3%	103
Don't know/ Not sure	1.6%	7
Other	3.2%	14
<b>Total Number of Responses</b>		<b>427</b>
<b>Skipped Question</b>		<b>16</b>

<b>If public authorities announced a mandatory evacuation from your neighborhood or community due to a large-scale disaster or emergency, would you evacuate?</b>		
<b>Response Options</b>	<b>Response Percent</b>	<b>Response Count</b>
Yes	76.3%	338
No	5.6%	25
Don't Know / Not Sure	14.4%	64
<b>Total Number of Responses</b>		<b>427</b>
<b>Skipped Question</b>		<b>16</b>

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## *Appendix 2: Harnett Health Community Outreach Programs*

The following list itemizes the number and type of Community Outreach Programs provided by Harnett Health System.

Date	Activity Name	County	Purpose	# Served

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## *REFERENCES*

Harnett County Health Department. 2011 Community Health Needs Assessment  
<http://www.ecu.edu/cs-dhs/healthaccess/upload/Harnett-County-Health-Department-CHNA-2011.pdf>

Office of State Budget and Management  
<http://www.osbm.state.nc.us/>

North Carolina State Center for Health Statistics  
<http://www.schs.state.nc.us/SCHS/>

County Health Rankings  
<http://www.countyhealthrankings.org/app/#!/north-carolina/2016/rankings/harnett/county/outcomes/overall/snapshot>

US Census Bureau  
[www.census.gov/2010census](http://www.census.gov/2010census)

NC Census (uses US Census Bureau)  
<http://quickfacts.census.gov/qfd/states/37000.html>

Bureau of Labor Statistics  
<http://data.bls.gov>

Harnett County Economic Development Council website  
<http://www.harnettedc.org/major-employers.asp>

American Fact Finder Community Facts  
[http://factfinder.census.gov/faces/nav/jsf/pages/community\\_facts.xhtml](http://factfinder.census.gov/faces/nav/jsf/pages/community_facts.xhtml)