

Progress on CHIPs

The 2021 Community Health Assessment identified 3 focus areas: Mental Health, Substance Use, and Healthy Living (nutrition, physical activity, and healthy weight).

Mental Health

Suicide Prevention Education

Stanly County Partners in Health Coalition promotes suicide and mental wellness education to the community as one of the Healthy Communities initiatives. Partners Health Management, Atrium Health, Stanly Community College, Stanly County Schools, and Graystone Day School have each provided suicide gatekeeper training. Available programs include Mental Health First Aid (MHFA), Question, Persuade, Refer (QPR), and Mental Health 101. Partners Health Management and Atrium Health are able to provide suicide gatekeeper training to community members and groups through outreach and virtual events. Senior Citizen mental health is addressed by Partners Health Management Geriatric and Adult Specialty Team (GAST) through in-person training and webinars. Centralina Area Agency on Aging also offers a webinar series that addresses the health of seniors including mental health. Stanly Senior Center is often a collaborator with these organizations.

School Mental Health

Stanly County Schools and Graystone Day School have focused on strategies to improve mental wellness among students. Youth prevention education with curricula such as Too Good for Drugs and Botvin Life Skills develop skills for making healthy choices, building positive friendships, developing self-efficacy, communicating effectively, and resisting peer pressure and influence. These lessons are used for both improving mental health and preventing substance use by youth. Graystone Day School has adopted a partnership with For Students, which focuses on building student resilience and topics such as anxiety, personality, suicide prevention, and more.

Substance Use

Stanly County Project Lazarus Coalition (a subcommittee of Stanly County Partners in Health) is the lead coordinating organization for substance use prevention, harm reduction, treatment, and recovery strategies in Stanly County. Stanly County Health Department works closely with other agencies and community based organizations to collaborate on initiatives to reduce overdose.

Prescription Drug Safety

Stanly County Health Department, Center for Prevention Services, Safe Kids, and local law enforcement have partnered to educate the community on the importance of safely storing and disposing of prescription medications. There are 3 permanent medication drop boxes, and medication take back events are held in many locations throughout the county. Collected medications are properly disposed of by Albemarle Police Department. Medication lock boxes are distributed at community events and at the health department so that prescription drugs are more difficult to access by youth. Lock Your Meds media campaigns through print, social media, and digital marketing were used to reach the community about the importance of keeping medications stored properly.

Youth Prevention Education

Stanly County Schools, Center for Prevention Services, and Stanly County Health Department have partnered to provide drug use prevention education to students in grades 3-12. This includes curriculums such as Avoid Vapes, Too Good for Drugs, Second Step, and Botvin Life Skills. Each of these programs is designed to give students the social and emotional skills needed to make healthy decisions. This education is available through a SAMHSA (Substance Abuse and Mental Health Services Administration) Partnership for Success grant.

Stanly County Post Overdose Response Team

Stanly County EMS continues their community paramedicine program in which specially trained paramedics and a certified peer support specialist respond to emergency calls that indicate the possibility of overdose. On the scene, they are able to assist the patient through the

medical emergency as well as educate the patient on overdose prevention, use of naloxone, and treatment options. Community paramedics are able to start the patient on MOUD (medication for opioid use disorder) at that time if it is wanted and deemed appropriate. The certified peer support specialist is able to follow up with the patient to link them to local resources and provide counseling. Eighty-four referrals were made in 2023. Fifteen eligible patients began MOUD with 13 continuing treatment at the end of 2023. Referrals are also made to outpatient treatment, facility-based crisis (detox), the recovery resource center, syringe service program, SUN Project (Substance Use Network for pregnant mothers using opioids), and other health and social services.

Harm Reduction Services

Uwharrie Harm Reduction Initiative, Stanly County Health Department, and Stanly County Project Lazarus partner to bring harm reduction resources to people who use drugs. Participants are counseled by certified peer support specialists, linked to treatment, provided with recovery resources, educated on overdose and disease prevention, and receive prevention supplies. Additionally, they provide services such as document restoration, supplies for people experiencing homelessness, on the job training with NC Works, advocacy with the court system, testing for communicable diseases, and more. Services reach people where they are and are based on the harm reduction principle of promoting any positive change.

Healthy Living

Stanly Commons Farmers Market

This farmers market was established by Stanly County Health Department to ensure that residents have access to healthy, locally grown produce. The market is open on Mondays from April through December and is located inside Stanly Commons near Stanly County Department of Social Services and Stanly County Health Department. Stanly Commons Farmers Market accepts EBT for payment and participates in a local food prescription program with the John P. Murray Community Care Clinic, as well as the Senior Farmers Market Nutrition voucher program. In 2023, the WIC farmers market voucher program was not implemented due to the change from paper vouchers to a mobile phone app which was not embraced by farmers. The farmers market also hosts community outreach partners such as NC Medicaid Enrollment Broker, Guardian ad Litem, Stanly County Schools, and NC Cooperative Extension.

Food Banks/Pantries, Community Tables, and Mobile Food Bank

Stanly Community Christian Ministries continues to operate food pantries and community tables in Albemarle, East Albemarle, and Norwood to support people experiencing food insecurity. In 2023, they partnered with Atrium to bring mobile food pantries to additional sites throughout the county. Stanly Family YMCA has held twice monthly mobile food pantries at Stanly County Commons in Albemarle and Stanly Community College Crutchfield Campus in Locust. West Stanly Christian Ministries supports people experiencing food insecurity on the west side of the county through their food pantry in Stanfield.

Golden Shoe

Stanly County Partners in Health hold the Golden Shoe event every March. Two hundred old shoes are repurposed by painting them gold, tagging them with a unique number, and hiding them in local parks throughout the county. From toddlers to seniors, residents get out and get moving while searching for golden shoes and each shoe is associated with a fun prize. When surveyed, participants report that while they were searching for shoes they participated in other fitness activities at the park and that they were likely to return to the park beyond the Golden Shoe event. The prize claim is held at City Lake Park and community organizations are invited to distribute information about their services. This has proven to be an effective way to engage with families.

Nutrition and Physical Activity Education

School aged children are reached by several programs through NC Cooperative Extension-Stanly and Atrium Health-Stanly, that come into the schools to teach the importance of nutrition and physical activity. Atrium Health-Stanly's Office of Health Promotion also offers education to adults on physical activity for all stages of life and nutrition education in support of chronic health conditions. NC Cooperative Extension-Stanly offers educational programs on growing, cooking, and preserving healthy foods as well as physical activity for all ages.

Morbidity and Mortality Changes Since Last CHA

Changes in Mortality

Since the 2022 State of the County Health Report, Stanly County has seen increases in several of the rates of the Top 10 Causes of Mortality including: heart disease, cancer (all sites), cancer (trachea, bronchus, lung), all other unintentional injuries, chronic lower respiratory disease, cerebrovascular disease, and diabetes. Each of these rates remain higher than North Carolina rates. COVID-19 mortality increased by 190.3% to become the fifth leading cause of death even though data for it is only included for 2 years of the 2017-2021 data set. Stanly County mortality rates have decreased in the following: motor vehicle injuries, Alzheimer's Disease, pneumonia and influenza, nephritis, nephrotic syndrome & nephrosis, and prostate cancer.

Stanly County & North Carolina - Causes of Mortality Age-Adjusted Death Rate per 100,000 population 2017-2021				
Stanly County Rank	Cause of Mortality	Stanly County		North Carolina
1	Heart Disease	210.4	↑	161.1
2	Cancer-All Sites	165.7	↑	154.5
3	All Other Unintentional Injuries	68.8	↑	48.5
4	Alzheimer's Disease	54.9	↓	38
5	COVID-19	51.1	↑	34.6
6	Chronic Lower Respiratory Disease	49	↑	41.4
7	Cerebrovascular Disease	48.8	↑	44
8	Cancer- Trachea, Bronchus, Lung	44.3	↑	38.8
9	Diabetes Mellitus	28.1	↑	26.1
10	Pneumonia & Influenza	21.3	↑	15.1
11	Motor Vehicle Injuries	20.7	↓	15.7
12	Nephritis, Nephrotic Syndrome, & Nephrosi	19.5	↓	16.8
13	Septicemia	16.3	↑	12.6
14	Cancer- Colon, Rectum, Anus	15.6	↑	12.9
15	Cancer- Breast	15.4	↑	20.3
16	Chronic Liver Disease & Cirrhosis	14.4	↑	12
17	Suicide	13.8	↑	13.5
18	Cancer - Prostate	12.8	↓	19.7
19	Homicide	N/A**	**	7.8
20	Acquired Immune Deficiency Syndrome***	N/A**	**	1.6

** death rates with small number of death (<50) are not shown
 ** formerly listed as HIV Disease
 Red numbers = higher rate
 Red arrow = rate increase since 2016-2020 report
 Green arrow = rate decrease since 2016-2020 report
 Equal sign = no change in rate since 2016-2020 report

Health Disparities

The 2023 State of the County Health Report has expanded reporting of mortality by race and ethnicity. In cases where county specific race/ethnicity cases are too low to report, state data is included. In Stanly County, mortality rates for all causes, diseases of the heart, other ischemic heart disease (coronary artery disease), cancer, nephritis, nephrotic syndrome, and nephrosis (kidney disease), and cerebrovascular disease (stroke) were higher for African American residents than White residents. Rates for COVID-19 and all other unintentional injuries were higher in the American Indian/Pacific Islander population when comparing state data. All-causes rates for mortality for Hispanic ethnicity is 377.6 per 100,000 population in Stanly County and 444.5 per 100,000 population in North Carolina.

Stanly County & North Carolina Race Specific Age-Adjusted Mortality Rates/100,000 Population 2017-2021										
Disease	Stanly, White, Non-Hisp.	North Carolina, White, Non-Hisp.	Stanly, African American, Non-Hisp.	North Carolina, African American, Non-Hisp.	Stanly, American Indian, Non-Hisp.	North Carolina, American Indian, Non-Hisp.	Stanly, Asian, Non-Hisp.	North Carolina, Asian, Non-Hisp.	Stanly, Hispanic	North Carolina, Hispanic
All Causes	987.8	831.8	1077.3	985.1	*	992.5	673	414.9	377.6	444.9
Diseases of Heart	208.5	159.6	278.3	188.6	*	76.2	*	76.2	*	67.2
Other Ischemic Heart Disease	83.4	59.3	113.5	62.8	*	27.3	*	27.3	*	21.9
Cancer	167.1	154.7	177.4	176.5	*	85.7	*	85.7	*	80.5
Cerebrovascular Disease	46.9	41.8	64.3	57.4	*	42.1	*	32.1	*	24
Nephritis, Nephrotic Syndrome, and Nephrosis (Kidney Disease)	16.1	13.3	56	33.8	*	21.9	*	9.7	*	11.1
Other Unintentional Injuries	72.5	56	63.4	38.8	*	75.2	*	13.7	*	23.1

COVID-19	50.7	31.1	*	46.3	*	53.2	*	23.8	*	45.6
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* Rates based on under 20 cases are unstable and have been suppressed

2023 County Health Data Book

NC Department of Health and Human Services

Stanly County infant mortality disparity has continued to decrease. While African American infants in Stanly County are still 1.15 times more likely to die than White infants, this has decreased from 2.27 times more likely in the 2015-2019 report. The North Carolina infant mortality disparity ratio has increased from 2.59 to 2.63 times more likely. Infant mortality among White infants in Stanly County remains elevated at 8.5 per 1,000 live births compared to the state rate of 4.8.

Peer County & North Carolina Race Specific Infant Mortality/Disparity Rates per 1000 Live Births 2017-2021						
	Stanly County	Granville County	Haywood County	Lee County	Pender County	North Carolina
African-American, Non-Hispanic	9.8*	7.8*	0	16.3	27.8	12.6
White, Non-Hispanic	8.5	3.2*	5.7	3.9*	2.3*	4.8
Disparity Ratio	1.15**	2.44**	*	4.18**	12.09**	2.63

* Rates based on fewer than 10 deaths are unstable and should be interpreted with caution

**Ratio computed based on fewer than 10 deaths should be interpreted with caution

No infant deaths recorded for Stanly County Asian, American Indian or Multiracial populations: Hispanic infant mortality rate is 7.9 but is based on fewer than ten deaths and should be interpreted with caution

Changes in Morbidity Since the 2021 Community Health Assessment

Maternal, Child, and Infant Health

In Stanly County, overall infant mortality has decreased. The county has seen increases in the rate of fetal deaths and decreases in post-neonatal deaths. Low birth weight remains unchanged since last reported. Rates of neonatal deaths and post-neonatal deaths remain lower than state rates. The live births rate per 1,000 births has decreased slightly from the 2022 SOTCH report. Teen pregnancy rates also continue to decline.

Communicable Diseases

Stanly County has seen decreases in rates of newly diagnosed chlamydia and gonorrhea. Newly diagnosed early syphilis continues to increase. Each of these rates remain lower than North Carolina rates. Rates for newly diagnosed HIV have increased but numbers remain less than five and are difficult to interpret. Acute hepatitis B has seen a small increase in rates and acute hepatitis C has remained at zero. Data for chronic hepatitis C has been added to the summary report this year as it is more prevalent in Stanly County than acute hepatitis C.

Stanly County 2023 Summary Report (Data Source: North Carolina Center for Health Statistics)					
	Health Indicator	Report Period	Stanly County	Previous Report Year Comparison	North Carolina
Maternal Child & Infant Health	Infant Mortality (<1yr) (rate/1,000 live births)	2017-2021	8.2	↓	6.9
	Fetal Deaths (per 1,000 deliveries)	2017-2021	8.4	↑	6.4
	Neonatal deaths (<28 days) (per 1,000 live births)	2017-2021	4.4	↑	4.6
	Post-Neonatal Deaths (28 days-1 year) (per 1,000 live births)	2017-2021	3.8	↓	2.3
	Live Births (rate per 1,000 population)	2017-2021	10.9	↓	11.4
	Low Birth Weight (<=2500g) (% of all live births)	2017-2021	9.5	=	9.5
	Teen Pregnancy Rate (<20 yrs.) (per 1,000 females 15-19) Prior birth, infant death or other delivery outcome was recorded	2017-2021	26.0	↓	24.0
Chronic Conditions (Mortality) (age-adjusted rate per 100,000 population)	Heart Disease	2017-2021	210.4	↑	161.1
	Cancers - All Sites	2017-2021	165.7	↑	154.5
	Trachea, Bronchus & Lung	2017-2021	44.3	↑	38.8
	Female Breast**	2017-2021	15.4	↑	20.3
	Colon, Rectum & Anus	2017-2021	15.6	↑	12.9
	Prostate**	2017-2021	12.8	↓	19.7
	Alzheimer's Disease	2017-2021	54.9	↓	38.0
	Cerebrovascular Disease (Stroke)	2017-2021	48.8	↑	44.0
	Chronic Lower Respiratory Disease	2017-2021	49.0	↑	41.4
	COVID-19	2017-2021	51.1	↑	34.6
	Pneumonia & Influenza	2017-2021	21.3	↑	15.1
	Diabetes Mellitus	2017-2021	28.1	↑	26.1
	Septicemia	2017-2021	16.3	↑	12.6
	Nephritis, Nephrotic Syndrome & Nephrosis	2017-2021	19.5	↓	16.8
	Chronic Liver Disease & Cirrhosis**	2017-2021	14.4	↑	12.0
	Unintentional Motor Vehicle Injuries	2017-2021	20.7	↓	15.7

Injury (Mortality rate per 100,000 population)	2017-2021		2022	2023	2024
	All Other Unintentional Injuries	68.8	48.5	↑	48.5
	Suicide	13.8	13.5	↑	13.5
Homicide	N/A***	7.8	***	7.8	
Communicable Diseases (rate per 100,000 population Surveillance)	Newly Diagnosed Chlamydia Annual Rates	2022	411.5	↓	612.8
	Newly Diagnosed Gonorrhea Annual Rates	2022	171.9	↓	254.6
	Newly Diagnosed HIV Average Rate	2020-2022	4.3	↑	14.4
	Newly Diagnosed AIDS Average Rate	2020-2022	2.5	=	7.0
	Newly Diagnosed Early Syphilis Average Rate (Primary, Secondary, Early Latent Syphilis)	2020-2022	8.5	↑	30.5
	Newly Diagnosed Acute Hepatitis B Annual Rate	2022	1.6	↑	1.1
	Newly Diagnosed Hepatitis C Annual Rate (Acute)	2022	0	=	0.7
Newly Diagnosed Hepatitis C Annual Rate (Chronic)	2022	69.4	↑	95.2	

* Fewer than 10 deaths (interpret with caution)
 ** First year reported
 *** death rate (<50) not shown

Priority Areas

Mental Health - Mental wellness, especially for children, was identified as a priority due to social isolation that occurred during COVID-19. Schools and other social outlets were closed or modified during the period of March 2020 through 2022. Age specific rates for self-inflicted injury and suicide ideation in the NCDETECT (North Carolina Disease Event Tracking and Epidemiologic Collection Tool) Mental Health Dashboard support the need for this priority. This dashboard provides an overview of emergency department visits for anxiety, depression, self-inflicted injury, suicide ideation, and trauma/stressors.

In ages 10-14, 18-24, 45-64, and 65 and older experienced increases in suicidal ideation. Age groups reporting the highest rates of suicidal ideation in 2021, 15-17 and 25-44, saw decreases in 2022.

With the exception of ages 45-64, rates of self-inflicted injury decreased from 2021 to 2022.

Trends by Age Group for Suicidal Ideation:
Stanly

	2017	2018	2019	2020	2021	2022
Ages 10-14	57.8	47.1	49.4	58.3	92.2	111.3
Ages 15-17	77.3	64.2	94.9	59.9	118.7	96.9
Ages 18-24	97.7	100.7	93.6	88.5	88.4	100.6
Ages 25-44	113.1	94.5	77.7	60.1	110.6	92.8
Ages 45-64	74.1	55.5	54.3	34.2	43.5	60.6
Ages 65+	25.6	13.7	14.9	13.7	11.9	16.4

Counts <5 are excluded for rates may not be available for all age groups.

Trends by Age Group for Self-Inflicted Injury:
Stanly

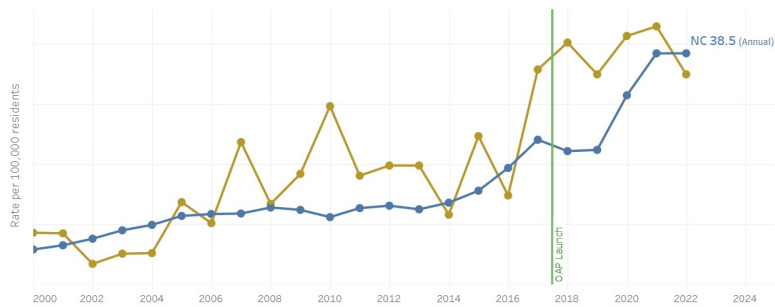
	2017	2018	2019	2020	2021	2022
Ages 10-14			23.40	31.80	35.25	25.05
Ages 15-17	21.48	59.93	47.45	47.03	67.83	33.71
Ages 18-24	12.67	23.81	20.19	11.06	22.10	20.12
Ages 25-44	17.93	16.44	25.01	14.68	19.20	14.48
Ages 45-64	10.50	9.34	8.18	8.84	3.58	6.00

Counts <5 are excluded for rates may not be available for all age groups.

Substance Use - Stanly County saw a 18.6% decrease in overdose deaths in 2022, falling below the state rate for the first time since 2016. Overdoses reported by the emergency department increased by 11.9% in 2023 in Stanly County. Opioid related overdoses continue to decrease with an estimated 45.5% of overdoses being attributed to opioids, which is down from 79.6% in 2018. From 2018, Stanly County has seen a 27.8% decrease in overdoses. This is attributed to broad naloxone distribution from community partners including Stanly County EMS and Uwharrie Harm Reduction Initiative.

Deaths in Stanly

The rate of overdose deaths among residents of Stanly in 2022 (Annual) was **35.0**.
 (Rate per 100,000 residents. Number of deaths: 22)

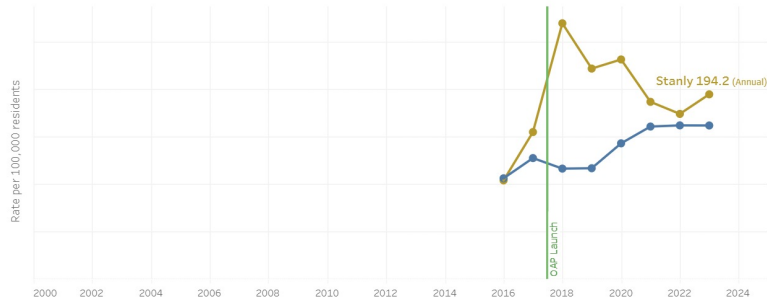


ED Visits in Stanly

The rate of overdose ED visits among residents of Stanly in 2023 (Annual)

was **194.2**.

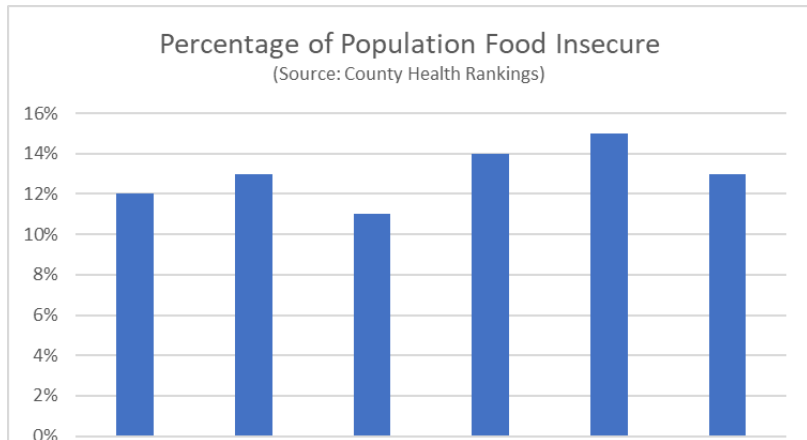
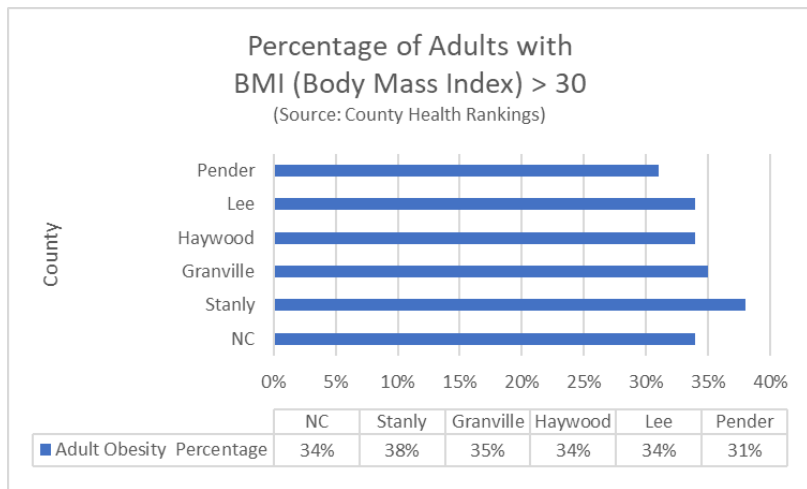
(Rate per 100,000 residents. Number of ED visits: 122)



Healthy Living (nutrition, physical activity, healthy weight)

Stanly County is found to have 38% of adults who report a BMI (Body Mass Index) of greater than 30 kg/m sq. This percentage is highest when compared to our peer counties and higher than North Carolina by four percentage points.

Thirteen percent of Stanly County adults are estimated to be food insecure. This is slightly higher than the state at 12% but lower than the highest peer county percentage at 15%.



Emerging Issues Since Last CHA

Emerging Issues

While rates for sexually transmitted infections chlamydia and gonorrhea declined from the previous State of the County Health Report, there are continuing increases in early syphilis. The rate of newly diagnosed early syphilis is up from 6.4 per 100,000 population in 2021 to 8.5 in 2022, this is still below the state rate of 30.5 per 100,000. The rates for newly diagnosed HIV have also increased from 3.1 to 4.3 per 100,000, the low number of cases makes this increase difficult to interpret.

Rates for newly diagnosed chronic hepatitis C were added to this year's State of the County Health Report. Since 2020, rates have increased 14% from 60.8 to 69.4 per 100,000 in 2022.

New/Paused/Discontinued Initiatives Since Last CHA

New Initiatives

Opioid Settlement Funds

- \$8.47 million designated for Stanly County
 - Distributed in unequal annual installments through 2039
- Stanly County Opioid Settlement Funds Task Force was assembled in November 2023 for strategic planning
 - Developed grant application
 - Will make recommendations for funding to the Board of County Commissioners
- Disbursements have been made in support of recovery housing, recovery resources, harm reduction, medication assisted treatment, and post overdose response

SUN (Substance Use Network) Project

- Program specifically for pregnant mothers who use substances
- Includes monthly care management and cooperation between agencies integrated with maternal healthcare

Stanly County Reentry Roundtable

- Convened local agencies and organizations to build a local reentry council
- Received training from state reentry council experts

Discontinued Initiatives

Stanly County Youth Drug Survey

- Discontinued by Stanly County Board of Education in 2023 due to NC Senate Bill 49
- Without the data collected there are no sources for local data concerning youth concerning attitudes about and use of substances including tobacco/vaping

HRSA RCORP (Health Resource Services Administration - Rural Communities Opioid Response Program) grant

- This grant concluded in May 2023 after three years and a nine month extension
- Work plan projects have transitioned in part to funding through opioid settlement funds
- Projects
 - Establishment of harm reduction services and certified peer support services
 - Support of post overdose response through community paramedic and certified peer support specialist positions

- Increased access to medication assisted treatment for those with opioid use disorder and uninsured
- Support of recovery housing
- Anti-stigma media campaigns
- Outcomes
 - 18.6% decrease in overdose deaths in Stanly County from 2018-2022
 - 27.8% decrease in overdose cases that present to the emergency department in Stanly County from 2018-2023

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