

## What Concerns Residents the Most?

The most important concerns of residents were nearly identical to concerns identified by the assessment team.

The top ten concerns were:

1. Overweight/obesity
2. Lack of dental care for low-income children and adults
3. Access to, and affordable, health care
4. Mental health
5. Need for medication assistance
6. Substance abuse
7. Tobacco use
8. Shortage of nurses in schools
9. Asthma
10. Cancer

The top five environmental concerns were:

1. Air quality
2. Water quality
3. Road/traffic conditions
4. Trash disposal/burning/littering
5. Need for greenways

## Resources

In addition to the Department of Public Health, Henderson County has a variety of health care resources, including two hospitals, and a community health clinic, which also serves as the Latino Health Center. In a 1999 survey, there were 78 primary care physicians serving 1,056 people per physician, which was better than the state average. In addition, there were 39 dentists who served an average of 2,112 people, which was also better than the state average.



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The complete Community Health Assessment Report and Community Opinion Survey can be seen on the Health Department website.

**Henderson County  
Community  
Health  
Assessment  
2004 - 2007**

**Report to the  
Community**

## What is a Community Health Assessment?

A community health assessment is a process by which community members gain an understanding of the health concerns and health care systems of the community. The role of the community health assessment is to identify factors that affect the health of a population and determine the availability of resources within the community to adequately address these factors. Action plans are completed to address each priority that is identified.

The community health assessment is completed every four years and is the foundation for improving and promoting the health of community members.

As part of our community health assessment, a health opinion survey was developed. The survey was printed in English and Spanish and was distributed to a range of people in our community targeting different income levels, the African-American community, and the Latino community.

Our community health assessment team consisted of the management team of the Henderson County Department of Public Health and representatives of the Board of Directors of the Henderson County Partnership for Health (PFH). The PFH makes up a broad scope of community members and agencies including the Department of Public Health, Public Schools, Pardee Hospital, Park Ridge Hospital, Volunteer Medical Resource Center, Blue Ridge Community Health Services, City Council, and business.

A subcommittee gathered and analyzed data and formulated the action plans with the team's oversight. In addition to the Community Health Opinion Survey, data was also collected from Internet sources, databases, and the *County Health Data Book*.

## Health Concerns to be Addressed in 2004-2007

- ❖ **Obesity** – Data from the WIC Program in 1999 indicated that 50.2 percent of women prior to pregnancy were overweight or obese. In 2000, children receiving health department services of normal weight by age were: 2-4 years olds – 69.1%, 5-11 year olds – 69%, and 12-18 year olds – 62.3%. *By June 2007, the community will establish four programs to address the issue of childhood obesity using a multi-agency approach.*
- ❖ **Dental Health** - The untreated dental decay rate in kindergartners in Henderson County during 2000-01 was 22.8%. The 2007 goal is 19% or less. Access to dental care is another critical concern. *The County will address this issue and increase accessible dental health services for low-income adults and children over the next four years.* There is a shortage of dentists accepting Medicaid and Health Choice, and many children and families have to travel to Asheville, Charlotte or Winston-Salem to receive much needed dental treatment. Henderson County has a great need for a pedodontist, since many general dentists are not comfortable seeing children less than five years of age.
- ❖ **Mental Health** – Hospitalization rates for mental disorders, alcohol, and drug related diagnoses during 1996-1998 were above the state average (of 260.0) at 355.8. *By June 2007, the community will increase mental health service opportunities in primary care offices and will increase mental health service opportunities in the public school system.*
- ❖ **Tobacco Use** – In 2001, 67 people died in Henderson County due to cancer of the lung, trachea, and bronchus. The age-adjusted death rate in 1999-2001 for cancer of the lung, trachea, and bronchus was 49.3. *By June 2007, the community will address tobacco use by working with a minimum of eight local businesses to adopt smoke-free policies. Smoke Free Dining Day will be held at five or more restaurants annually.*
- ❖ **Shortage of Nurses in Schools** – The 2003 ratio of school nurses to students is 1:3000. The recommended ratio is 1:750. *By June 2007, the community will address this issue by decreasing the nurse to student ratio to <1:2000.*
- ❖ **Asthma** - Asthma hospitalizations in 0-14 year olds in Henderson County in 2000 was 303.3. The North Carolina rate was 201.3. *Plans include interventions to increase asthma management and decrease asthma hospitalizations to 200 or less by 2007.*
- ❖ **Cancer (Colorectal)** – Age-adjusted colorectal cancer incidence rates for 1996-00 were higher in Henderson County (49.6) than for the state (48.4). Age-adjusted death rates for colon, rectum and anus cancer in 1999-2000 were slightly higher (21.2) than the state rate (19.2). *By June 2007, the community will continue cancer screening initiatives through collaboration with community partners. The Department of Public Health will screen more than 50% of women for colon cancer who are seen through the Breast and Cervical Cancer Control Program. In addition, two community awareness campaigns will be implemented to increase colorectal cancer screening.*

