



2021-2022 Community

Health Needs Assessment

BERTIE COUNTY,
NORTH CAROLINA



Health ENC

Working Together for a Healthier Eastern North Carolina





ALBEMARLE REGIONAL HEALTH SERVICES
Partners in Public Health

Dear Community Member,

Your partnership in the Community Health Assessment process is important to the health of our residents. Albemarle Regional Health Services, Sentara Albemarle Medical Center, Vidant Bertie Hospital, Vidant Chowan Hospital, Vidant Roanoke Chowan Hospital and numerous other community partners continue to work together to provide this comprehensive report which illustrates the health status, health needs and improvements, as well as health resources in our communities. This document represents much time and effort by local health department staff, hospital staff, Healthy Carolinians members, and community members like you.

Pasquotank

Perquimans

Camden

Chowan

Currituck

Bertie

Gates

Hertford

Factors such as the rural landscape of our counties and the diversity of our population continue to make the Albemarle region an exciting place to live, work, and learn, as well as create challenges in our systems of service delivery which drive the need for a continuum of programs. Through the Community Health Assessment process, we are allowed to analyze and prioritize our community's needs and strengths *with* the people of the eight counties.

Strategies are implemented to target needs identified in the 2021 Community Health Assessment priority health rankings selection in order to create increased opportunities for healthier outcomes in our communities. Relationships will continue to be formed and strengthened as we join together to address the needs. This document provides data and steps to ensure we empower our communities to seek available and potential resources.

Thank you for your continued interest in the health of our communities.

Sincerely yours,

R. Battle Betts, Jr., MPA
Health Director
Albemarle Regional Health Services



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Contact Information

Albemarle Regional Health Services plans to share results from the Community Health Needs Assessment (CHNA) during meetings to county and city governments, local civic groups, faith organizations, business leaders, and through other community outreach events. The CHNA documents can be found on the Albemarle Regional Health Services website at www.arhs-nc.org. Efforts will be made with other agencies and local government, including county website, to provide links to the information. ARHS also plans to work with the local newspapers to provide news releases to the public about the findings made in each county. Healthy Carolinians of the Albemarle members will have access to the information found in the CHNA at their disposal to use in the community including evidence-based strategies, grant proposals, and program planning and implementation.

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Appendices to the 2021 Community Health Needs Assessment

- Appendix A: Community Health Needs Assessment Survey (Health ENC 2021)
- Appendix B. HNC 2030 State and County Data (December 2021)
- Appendix C. County Data Tables (Spring 2021)

Acknowledgements

This report is the culmination of significant work led by Albemarle Regional Health Services, Sentara Albemarle Medical Center, Vidant Chowan Hospital, Vidant Bertie Hospital, Vidant Roanoke Chowan Hospital, and Vidant Health, in conjunction with key stakeholders from the community.

Support of this document was also provided by many other entities. Albemarle Regional Health Services, Sentara Albemarle Medical Center, Vidant Chowan Hospital, Vidant Bertie Hospital, Vidant Roanoke Chowan Hospital, and Vidant Health greatly appreciate the help of our vital community stakeholders.

Special thanks go to Wanda Stallings for proofing/editing this document.

Executive Summary

Albemarle Regional Health Services and community partners are pleased to present the 2021 Community Health Needs Assessment, which provides an overview of the significant community health needs identified in Bertie County, North Carolina.

The goal of this report is to offer a meaningful understanding of the most pressing health needs across Bertie County, as well as to guide planning efforts to address those needs. Special attention has been given to the needs of vulnerable populations, unmet health needs or gaps in services, and input gathered from the community.

Findings from this report will be used to identify, develop and target initiatives to provide and connect community members with resources to improve the health challenges in their communities.

The 2021 Community Health Needs Assessment was developed through a partnership between Albemarle Regional Health Services, Sentara Albemarle Medical Center, Health ENC and Conduent Healthy Communities Institute, with The Duke Endowment serving as the fiscal sponsor.

Vision Statement

The Public Health professionals and programs of Albemarle Regional Health Services are dedicated to disease prevention and the promotion of a healthy environment to reduce morbidity, mortality, and disability through quality service, education, and advocacy.

Partnerships/Collaborations

Partners in the 2021 CHNA process for Albemarle Regional Health Services include:

- Albemarle Regional Health Services
- Gates Partners for Health
- Healthy Carolinians of the Albemarle
- Sentara Albemarle Medical Center
- Three Rivers Healthy Carolinians
- Vidant Bertie Hospital
- Vidant Chowan Hospital
- Vidant Roanoke Chowan Hospital

Local Healthy Carolinians partnerships utilized grass root efforts to ensure community citizen's opinions were heard and demographic characteristics of participants were considered to ensure that results portrayed an accurate representation of each county as a whole.

Regional/Contracted Services

The 2021-2022 Bertie County CHNA was supported by Health ENC (HealthENC.org), a collaborative initiative of health departments and hospitals in eastern North Carolina that provides support for community needs assessments statewide.

Collaborative Process Summary

For the CHNA, Albemarle Regional Health Services developed a CHNA Leaders Team to help lead the process. The CHNA Leaders Team included county residents as well as representatives from various local agencies and organizations from throughout the eight-county service area. The CHA Leaders Team members brought a wealth of knowledge and expertise on a variety of issues and populations in the county, and the broad range of backgrounds ensured objectivity throughout the prioritization process. The CHA Leaders Team met three times between April 2021 and July 2021 to review strategies for conducting primary data collection for the CHNA, stay informed of the process, and provide feedback.

Collaboration between Albemarle Regional Health Services and other local partners made this assessment possible. Many collaborators spent numerous hours attending meetings, collecting survey data, and attending presentations. These partners also played an active role in the priority selection process.

Key Findings

The CHNA findings are drawn from an analysis of an extensive set of secondary data (over 100 indicators from national and state data sources) and in-depth primary data from community leaders, health and non-health professionals who serve the community at large, vulnerable populations, and populations with unmet health needs. Through a synthesis of primary and secondary data, several significant health needs were identified for Bertie County, as displayed in Table 1.

Table 1. Significant Health Needs

Access to Health Services
Cancer
Diabetes
Economy
Exercise, Nutrition & Weight
Heart Disease & Stroke
Behavioral Health
Substance Abuse

Health Priorities

For Three Rivers Healthy Carolinians (Bertie and Chowan counties) health priorities chosen were, in no particular order:

- Healthy Lifestyle Behaviors
- Access to Healthcare
- Mental Health/Substance Misuse

Next Steps

This report describes the process and findings of a comprehensive health needs assessment for the residents of Bertie County, North Carolina. The prioritization of the identified significant health needs will guide community health improvement efforts of Bertie County. Following this process, Albemarle Regional Health Services and community partners will outline how they plan to address the prioritized health needs in their community improvement plans.

Chapter 1 Introduction

Description of County

Bertie County is a mid-sized, primarily rural county located in the Coastal Plain region of eastern NC. The county is adjacent to Hertford County on the north, Chowan County on the east, Washington County on the southeast, Martin County on the southwest, Halifax County on the west, and Northampton County on the northwest. Bertie County is divided geopolitically into nine townships. The county seat of Windsor is the most populated town in the county.

Bertie County encompasses a land area of 741 square miles, including 42 square miles of the Chowan, Roanoke, and Cashie rivers and the Albemarle Sound. Major highways include US 13, US 17, and NC Highways 11, 42, 45, 305, and 308. US 13 and 17 run through the center of the county and provide a direct connection with US 64, which leads east to the Outer Banks (75 miles away) and west to Raleigh (100 miles away). US 17 connects the county to Wilmington, NC in the south; NC 11 connects the county to southern VA to the north and Greenville, NC to the south. The nearest interstate highway is I-95, 50 miles to the west.

The closest major airport, 56 miles from the county center, is Pitt-Greenville Airport in Greenville, NC. Other airports within a 100 mile radius are the Coastal Carolina Regional Airport in New Bern, NC (80 miles), the Norfolk International Airport in Norfolk, VA (88 miles), and the Newport News/Williamsburg International Airport in Newport News, VA (99 miles). Amtrak stations are located in Rocky Mount, NC (48 miles), Wilson, NC (57 miles) and Norfolk, VA (69 miles). Greyhound bus stations are located in Williamston, NC (13 miles) and Edenton, NC (20 miles).

Originally one of the oldest and largest counties in the state of NC, Bertie County once consisted of the present Bertie County, Tyrell County, Edgecombe County, Northampton County and Hertford County. It was divided to its current size and shape by 1780. The rich soil sustained by the rivers flowing along and within the borders of the county made Bertie County ideal for agriculture. The county's primary crops included cotton, tobacco, peanuts, corn and soybeans. Textile, furniture, and clothing manufacturing plants added to the area's income. The livestock and poultry farming industries were also major contributors to the agricultural base, and the timber industry has been vital to the area, especially in the Windsor region.

There are multiple activities, attractions and cultural events in the county. With twenty miles of shoreline, the Chowan River provides fishing, boating, sailing and water skiing. The Cashie River, which winds through the county for more than twenty miles, is the home of the San Souci Ferry, one of North Carolina's last operational two-car ferries. Other area attractions include the Cashie Wetlands Walk, Livermon Park and Mini-Zoo and the Windsor Historic District Walking Tour. Some of the festivals held in Bertie County include Chicken on the Cashie, the Sea and Tee Festival, Fun Day in the Park at Windsor, and the Scotch Hall Preserve golf course, a public 18-hole course designed by Arnold Palmer.

Overview of Health ENC

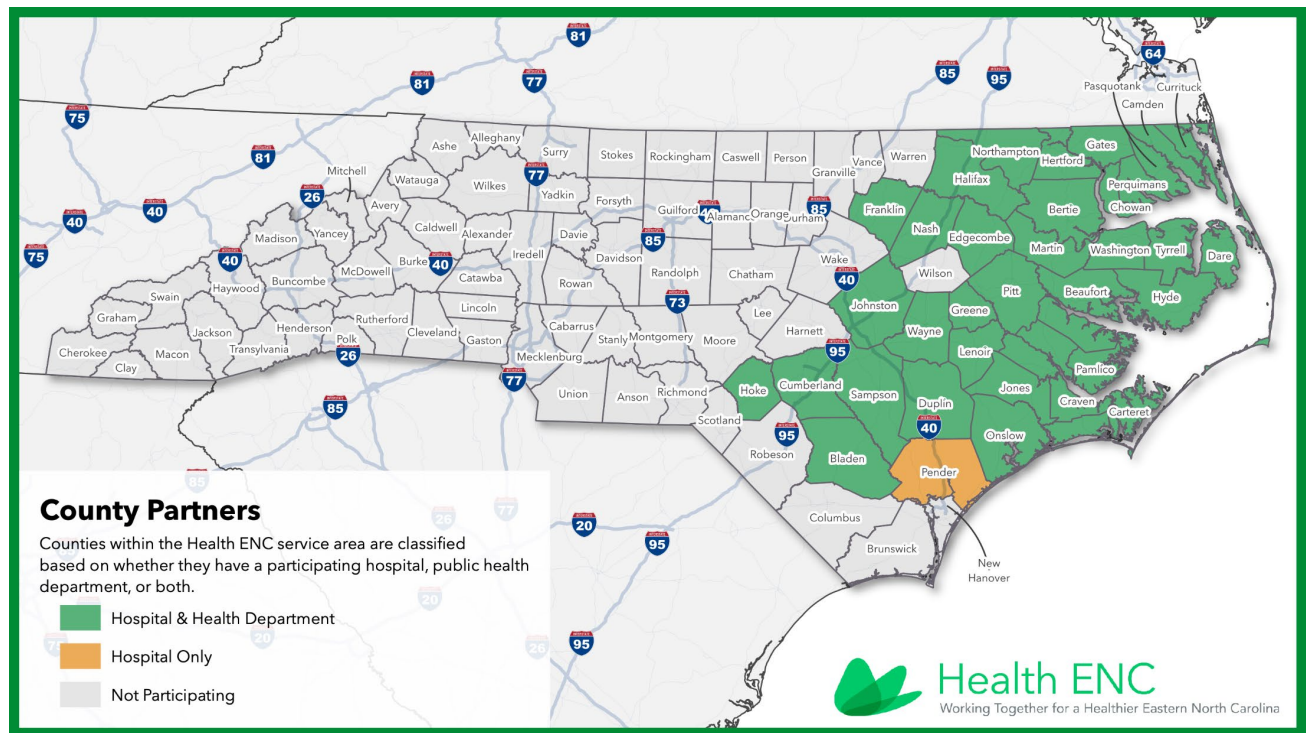
Health ENC is a collaborative initiative of health departments and hospitals in eastern North Carolina. The collaborative serves 35 counties with 34 participating health departments and 31 participating hospitals. The collaborative uses a shared approach for primary and secondary data collection to produce a comprehensive Regional Community Health Needs Assessment every three years that can be used to partially satisfy requirements for North Carolina Local Health Department Accreditation and the Internal Revenue Service requirement under the Patient Protection and Affordable Care Act for charitable hospitals.

Overview of Community Health Needs Assessment Process

The Community Health Needs Assessment Process gathers population health data that county health departments, hospitals, community groups can use to

- Identify key health needs/issues in eastern North Carolina Communities
- Develop strategies and action plans based upon data aim to improve the quality of life
- Collaborate to maximize results by having a collective impact in the region
- Maintain local control and decision-making about the choice of health priorities and interventions, and
- Improve health, partnerships and communication.

Participating Health ENC Counties



Health ENC serves the following counties: Beaufort, Bertie, Bladen, Camden, Carteret, Chowan, Craven, Cumberland, Currituck, Dare, Duplin, Edgecombe, Franklin, Gates, Greene, Halifax, Hertford, Hoke, Hyde, Johnston, Jones, Lenoir, Martin, Nash, Northampton, Onslow, Pamlico, Pasquotank, Pender, Perquimans, Pitt, Sampson, Tyrrell, Washington, and Wayne Counties.

Health Data Sources

Primary Data – Community Survey

Survey Methodology/Design

Health ENC Steering Committee structured the primary data collection for participating health departments and hospitals. The primary data used in the Community Health Needs Assessments included (1) a community survey that could be distributed online or by a paper submission and (2) focus group discussions in some counties. The Health ENC Steering Committee did not encourage focus groups for the 2021-2022 Community Health Needs Assessments because of the global COVID-19 pandemic. However, some counties were able to hold focus group discussions safely despite significant challenges in collecting enough survey responses to accurately represent their community's population.

Survey Design:

The Health ENC Steering Committee developed a primary survey to gather information from community members about their health concerns. A workgroup of steering committee members convened and examined survey questions utilized in the 2018-2019 Community Health Needs Assessment. The workgroup also examined data readily available from secondary data sources. The workgroup focused on developing survey questions to obtain data from community members which was not readily available in the secondary data or where secondary data was weak. In addition, workgroup members worked to combine questions where appropriate and to be more inclusive in the wording of response choices. The steering committee reviewed the sample survey questions and made a few additional revisions to assure the survey only contained questions where community input was needed to guide health priority selection and strategic action planning.

Once the survey questions were finalized, the steering committee decided on targets for each county. Because the survey was a convenience sample that was being conducted during a global pandemic (COVID-19), each county was asked to complete a minimum of 300 surveys with representation from as many community groups as possible to assure sufficient sampling to represent the full community. The target of 300 surveys per county was identified through previous work with data analysis vendors who examined each county's population and confirmed this number should provide an accurate reflection of the total county's population, if responses reflected the population demographics equally.

The surveys were made available to the public from April 1 – June 30, 2021. Surveys were made available in paper format and electronically using the REDcap software. Health ENC partners received feedback throughout the survey period on the age, gender, race/ethnicity, and language of survey respondents to assist them in promoting the surveys to various community members within their counties. At the completion of the survey period, 16,661 English surveys and 502 Spanish surveys were completed. Most counties did not have an equally distributed response to surveys to represent their entire county's population. As a result, survey responses should be considered as only one component of information utilized to select health priorities. The most underserved populations' feedback is not adequately reflected

in most surveys. Health ENC partners were encouraged to include key stakeholders, who served these populations, in the health priority selection process to assure many of their clients' health needs were considered.

The Bertie County survey was comprised of 25 unique questions designed to collect information about key health and wellness areas indicated below. Surveys were made available publicly online and in paper format at a variety of community stakeholder locations between April 1 and June 30, 2021. Community locations for survey distribution were selected to enrich participation representation by historically underrepresented subgroups including minority populations, low income and elderly residents, and males. A total of 393 survey responses were received across Bertie County: 372 in English and 21 in Spanish.

Key Areas Examined

- Quality of life, health behaviors, health perceptions
- Preventative services, exercise, and access to care

County Responses

- 372 Total English (Total in ENC survey =16,661)
- 21 Total Spanish (Total in ENC survey =502)

Secondary Data Sources

The community health/community health needs assessment should provide a comprehensive source of the best available data to improve the lives of people. With a simple search from a smartphone one can access powerful data from reputable sources. The internet and broad-band connectivity have become essential tools for acquiring information and staying informed.

All data starts with a good data source and paying attention to the data sources is a critical factor in the decisions we make using data. Reputable data sources provide original data or complete transparency about the original source. The data source provides enough information about the data to provide context so that the data may be interpreted. The best data sources are current and reliable. Even if the data lag, and perhaps older than a year or more, data trends are often just as important for decision making as a single data point. Changes in definitions and methodology are documented and easily found with the data.

This assessment relies largely on data that are available from the following sources:

- Healthy North Carolina 2030 (HNC 2030) - <https://schs.dph.ncdhhs.gov/units/ldas/hnc.htm>
- N.C. State Center for Health Statistics - <https://schs.dph.ncdhhs.gov/>
- U.S. Census Bureau - <https://www.census.gov/>
- County Health Rankings and Roadmaps - <https://www.countyhealthrankings.org/>

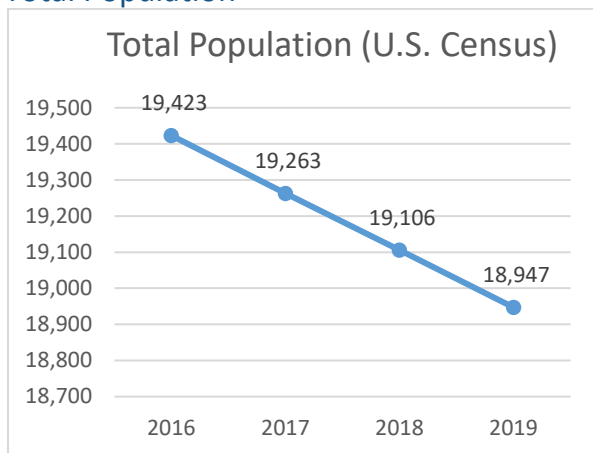
Additional data/data sources that were reviewed for this assessment can be found in the Appendices.

Limitations

- The data presented represents a snapshot of the population, economic and leading health and wellness issues in eastern NC communities
- It includes primary data gathered from community surveys and secondary data from health and other sources.
- This information can be used as a guide for helping communities identify leading health issues in the Health ENC County Region
- Other health issues, data and resources may be available that were not listed here that communities may wish to consider when establishing health priorities

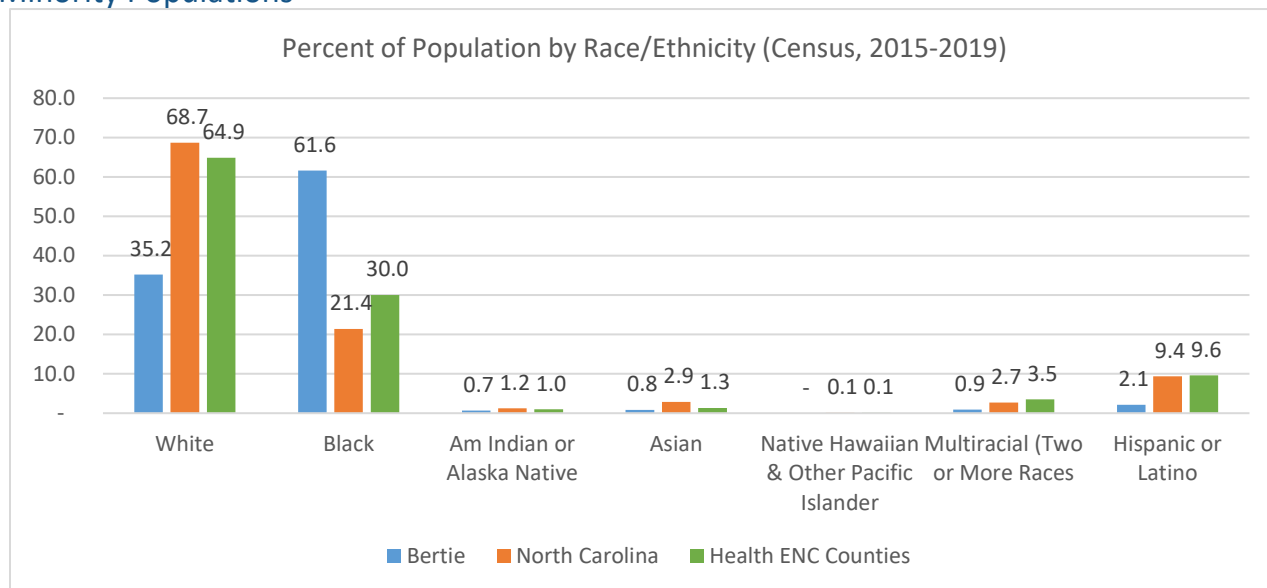
Chapter 2 Demographic Profile

Total Population



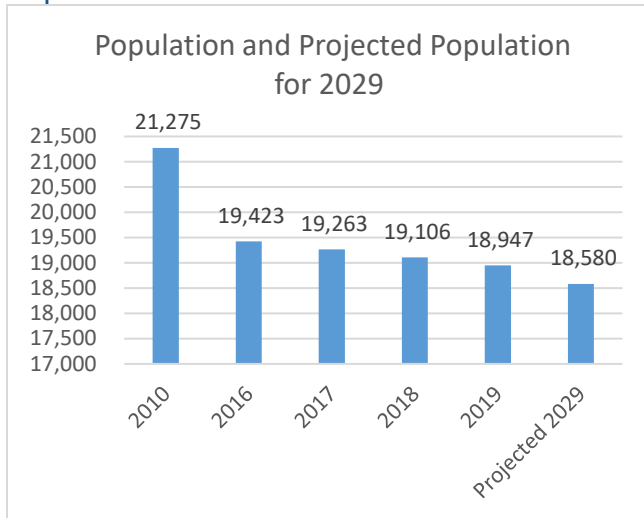
In 2019, Bertie County had a population estimate of 18,947.

Minority Populations



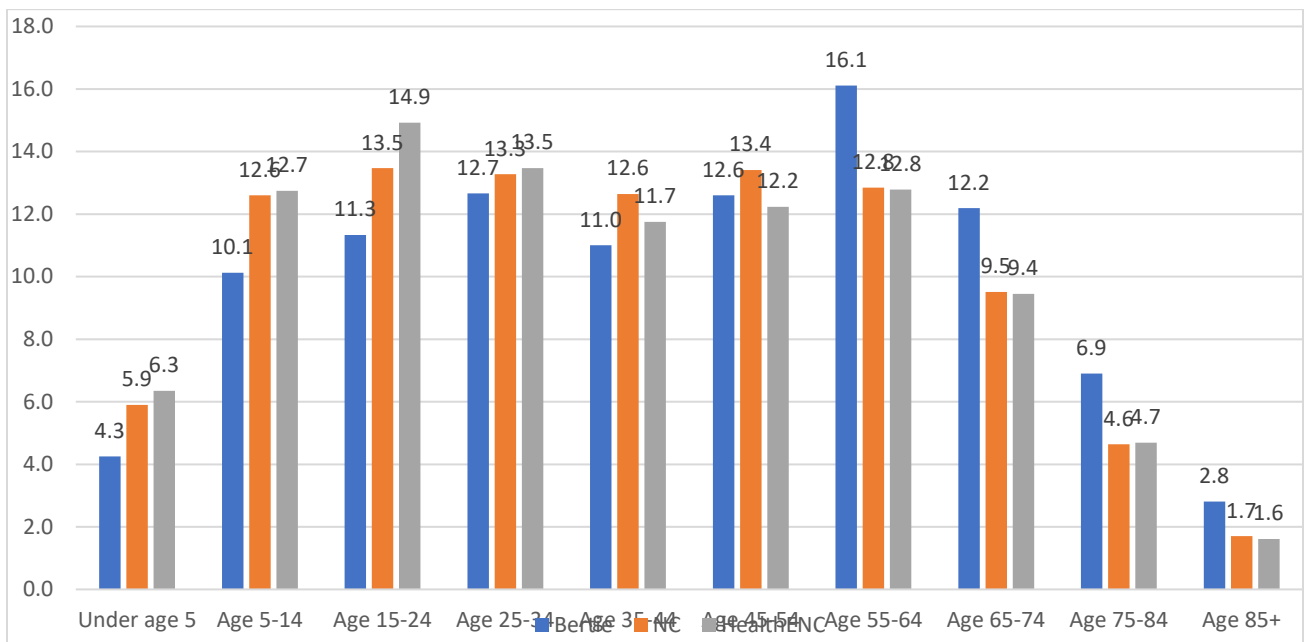
The White population accounts for 35.2% of the total population in Bertie County, with the Black or African American population accounting for 61.6% of the total population. The White population in Bertie County (35.2%) varies from the White population in North Carolina (68.7%) and is lower than the Health ENC counties (64.9%). The Black or African American population in Bertie County (61.6%) is significantly higher than the Black or African American population in North Carolina (21.4%) and higher than the Health ENC counties (30.0%). The Hispanic or Latino population comprises 2.1% of Bertie County which is significantly lower than North Carolina (9.4%) and Health ENC Counties (9.6%)

Population Growth



- The projected population for Bertie County for 2029 is estimated at 18,580 persons.
- From 2010 to 2019, the total population of Bertie County has decreased by an overall 11%

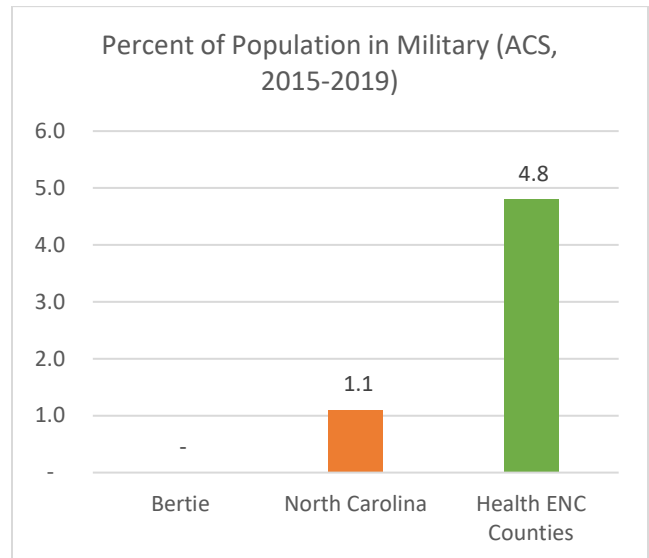
Age Groups



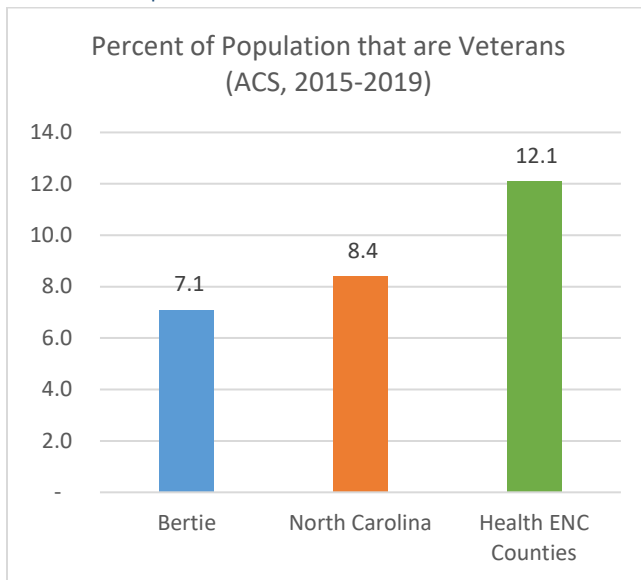
Military/Veteran Populations

Military Population

- The percentage of Military Population in Bertie County is 0.0%
- Compared to the counties in Health ENC (4.8%) and North Carolina (1.1%), Bertie County has a substantially smaller population

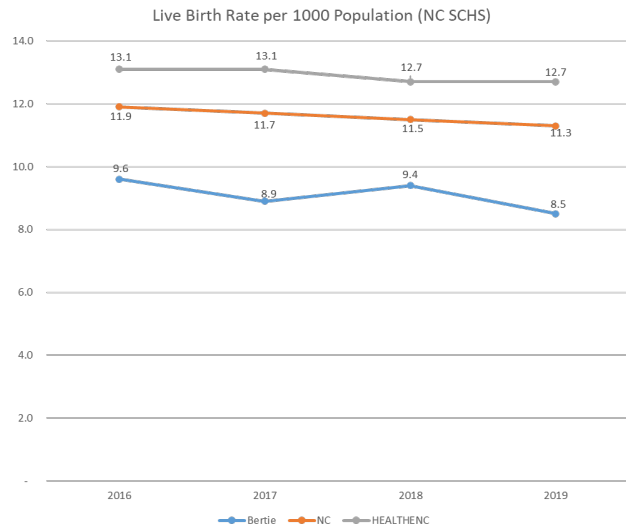


Veteran Population



The veteran population is given as a percent of the civilian population aged 18 years and older and this data is used for policy analyses, to develop programs, and to create budgets for veteran programs and facilities. Bertie County has a veteran population of 7.1% in 2012-2016, compared to 8.4% for North Carolina and 12.1% for Health ENC counties.

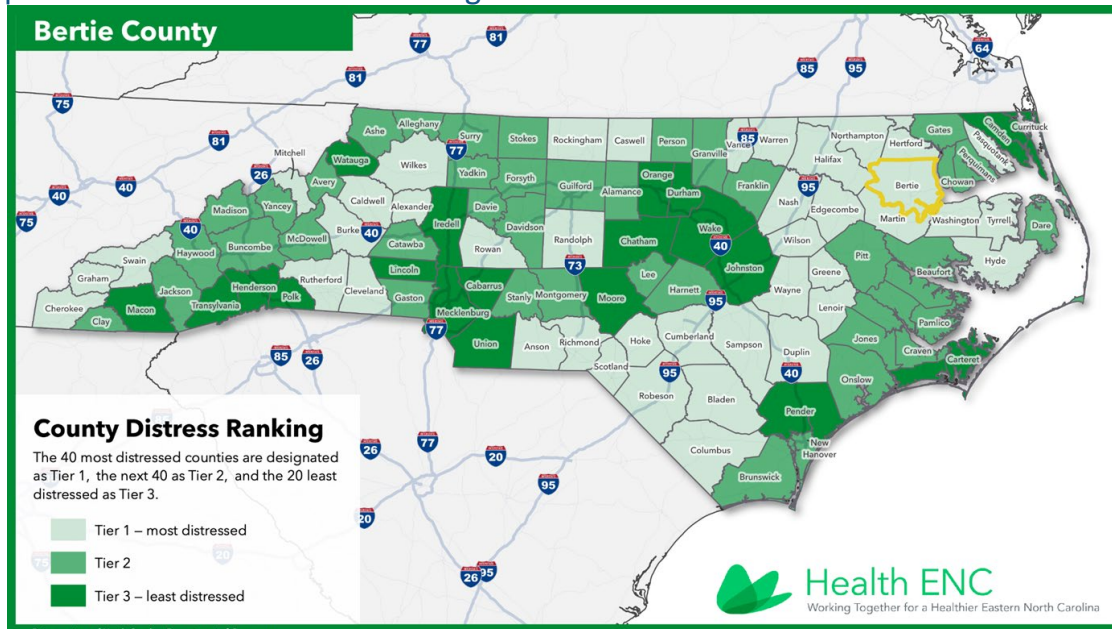
Birth Rates



The Bertie County birth rate demonstrated a small decline over the 2016-2019 period with a similar trend seen in the Health ENC County Region and the state.

Chapter 3 Socioeconomic Profile

NC Department of Commerce Tier Designation

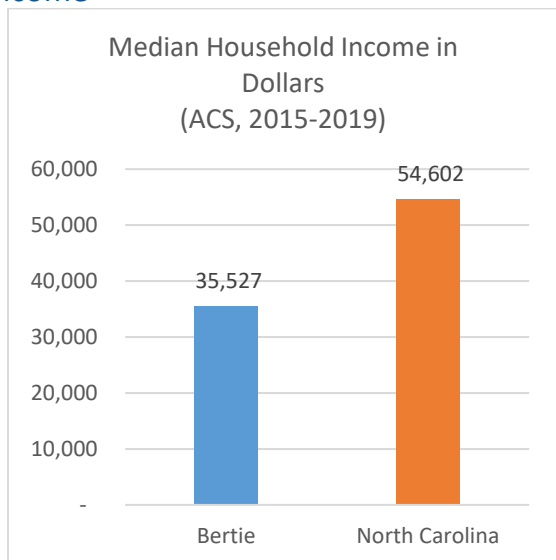


Bertie County has been assigned a Tier 1 designation for 2021

County Tiers are calculated using four factors:

- Average unemployment rate
- Median household income
- Percentage growth in population
- Adjusted property tax base per capita

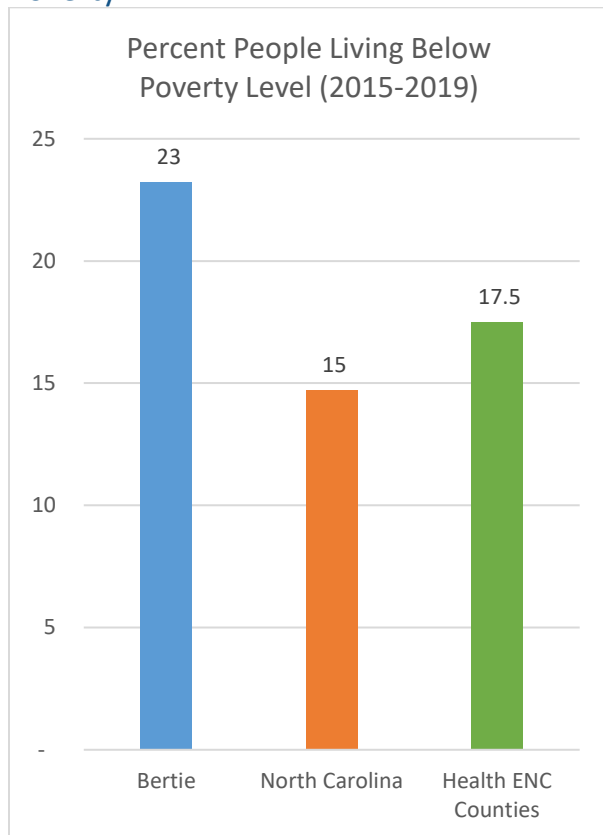
Income



Median household income reflects the relative affluence and prosperity of an area. Areas with higher median household incomes are likely to have a greater share of educated residents and lower unemployment rates. This figure shows the median household income in Bertie County (\$35,527), which is lower than the median household income in North Carolina (\$54,602).

Compared to counties in the Health ENC region Bertie County has a very low median household income. In the region, two counties have a lower median household income than Bertie County; the remaining 32 counties in the Health ENC region have a higher median household income.

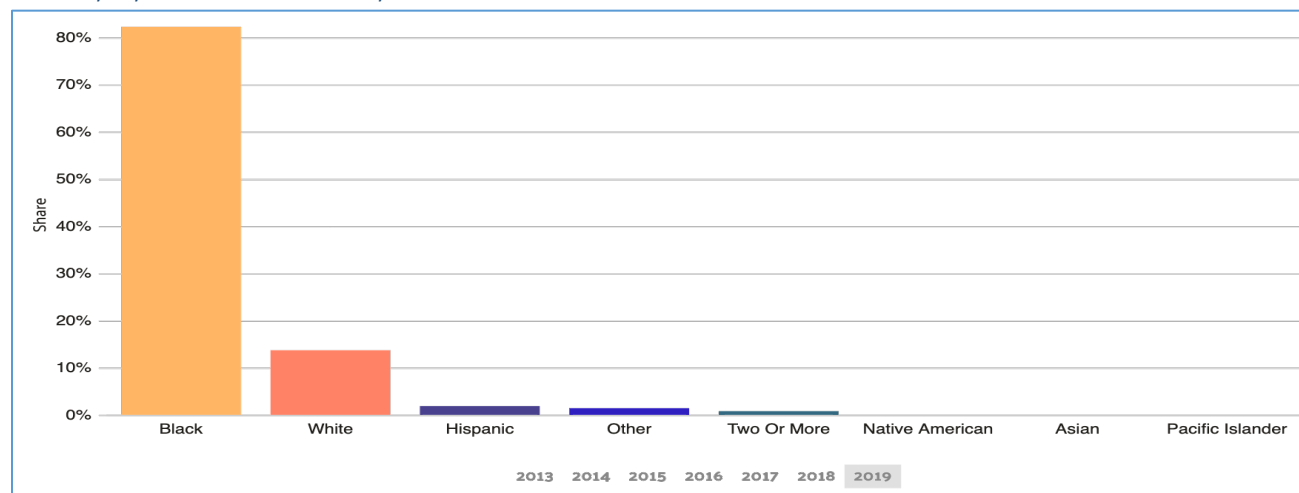
Poverty



Federal poverty thresholds are set every year by the Census Bureau and vary by size of family and ages of family members. A high poverty rate is both a cause and a consequence of poor economic conditions. Children in poverty are more likely to have physical health problems, behavioral problems and emotional problems. Seniors who live in poverty are an especially vulnerable group due to increased physical limitations, medical needs, and social isolation. Persons with a disability are more likely to live in poverty compared to the rest of the population. Without adequate income, individuals with disabilities may not be able to afford necessary expenses, such as rent or mortgage, utility bills, medical and dental care, and food.

As seen in this figure, 23.0% percent of the population in Bertie County lives below the poverty level, which is a higher percent than the rate for North Carolina (15.0% of the population) and the Health ENC region (17.5%).

Poverty by Race and Ethnicity

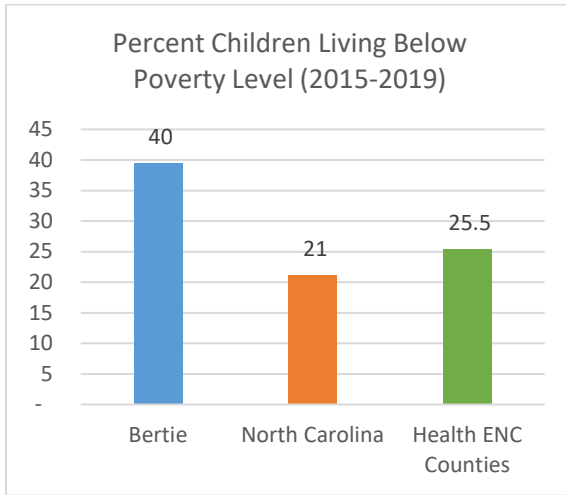


The most common racial or ethnic group living below the poverty line in Bertie County, NC is Black, followed by White and Hispanic.

The Census Bureau uses a set of [money income thresholds](#) that vary by family size and composition to determine who classifies as impoverished. If a family's total income is less than the family's threshold than that family and every individual in it is considered to be living in poverty.

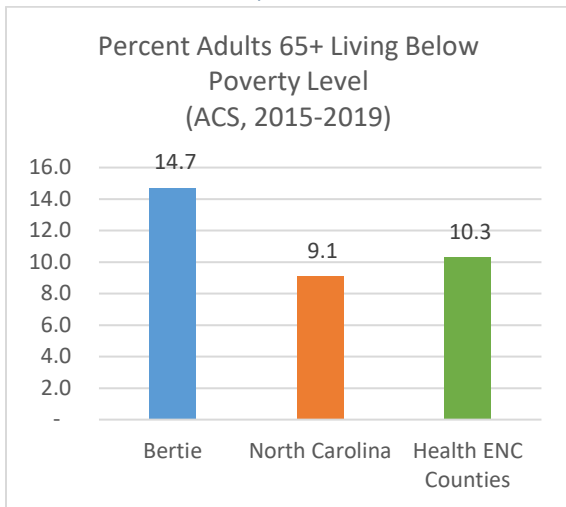
*Data from the [Census Bureau ACS 5-year Estimate](#).

Children in Poverty



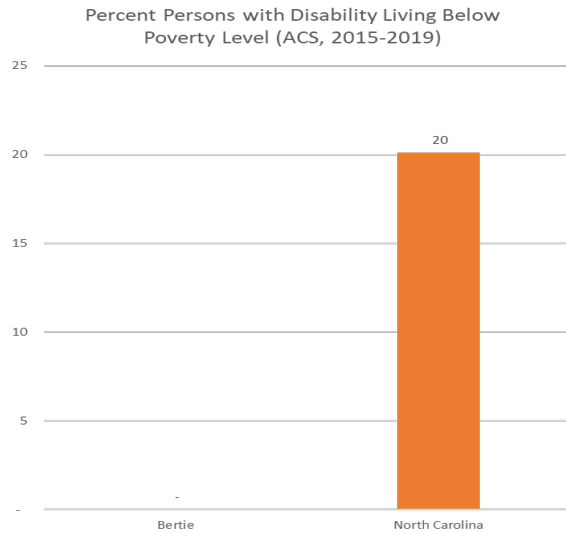
The rate of children living below the poverty level is much higher for Bertie County when compared with N.C. and Health ENC Counties

Older Adults in Poverty



The rate of adults age 65+ years living in poverty is 5.6% higher in Bertie County when compared with NC and 4.4% higher than Health ENC counties.

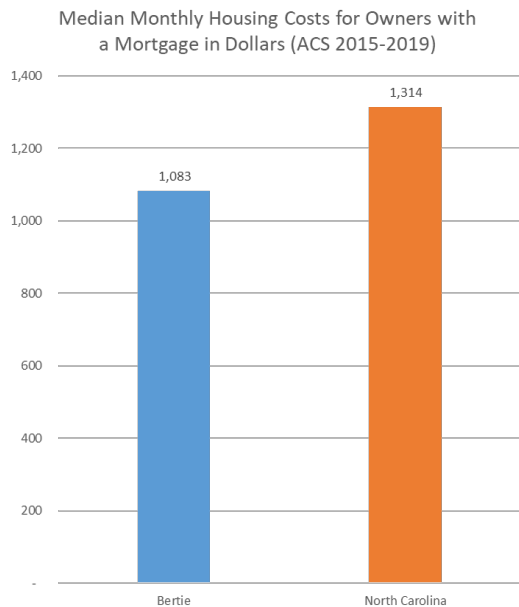
Disabled People in Poverty



The US Census, American Community Survey does not provide an estimate for the percent of disabled people living in poverty for Bertie County. In N.C., the average percent of disabled persons in poverty is 20%.

Housing

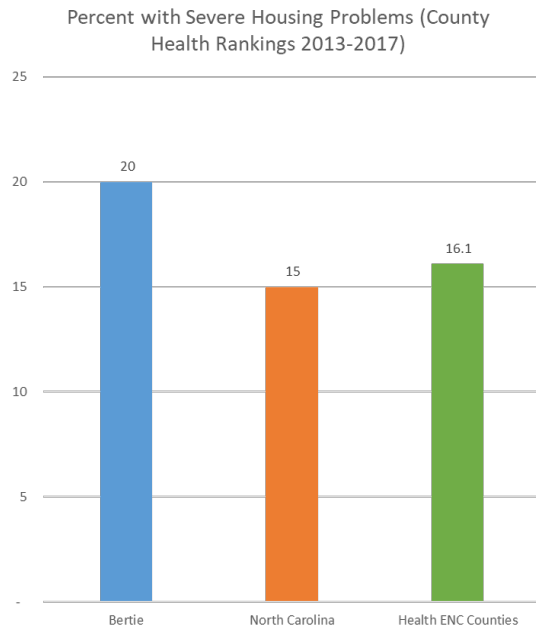
Housing – Median Monthly Housing Costs



The average household size in Bertie County is 2.18 people per household (owners) and 2.56 people per household (renters), which is slightly lower than the North Carolina value of 2.57 people per household (owners) but higher than the North Carolina value of 2.43 people per household (renters).

High costs of homeownership with a mortgage can strain both homeowners and the local housing market. Figure 21 shows mortgaged owners median monthly household costs in the Health ENC region. In Bertie County, the median housing costs for homeowners with a mortgage is \$1,083. This is lower than the North Carolina median cost of \$1,314.

Severe Housing Problems

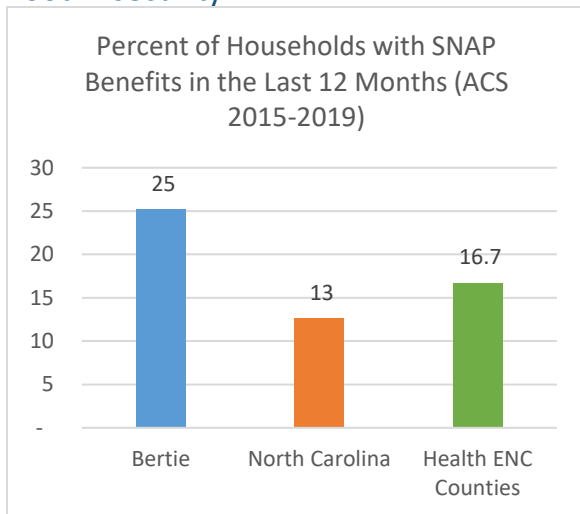


Safe and affordable housing is an essential component of healthy communities, and the effects of housing problems are widespread.

Housing problems include overcrowding, high housing costs, lack of kitchen, or lack of plumbing facilities

Slightly more than 20.0% of households in Bertie County have severe housing problems, compared to 15.0% in North Carolina and 16.1% in Health ENC Counties.

Food Insecurity

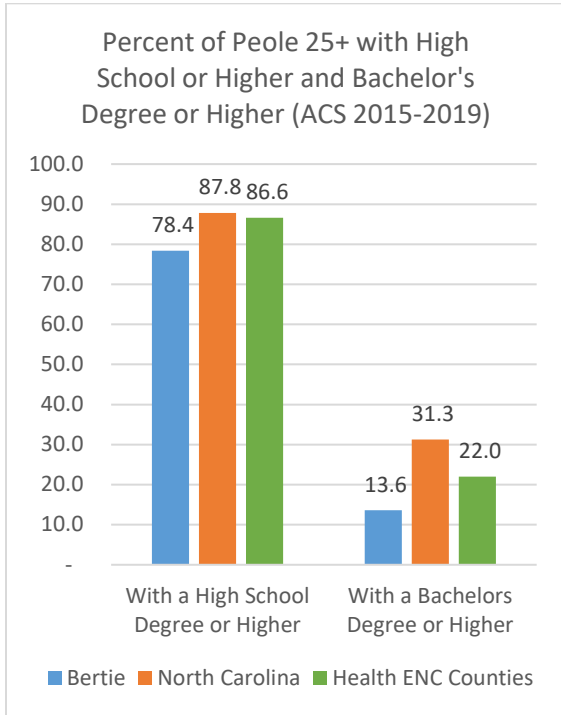


The Supplemental Nutrition Assistance Program (SNAP) is a federal assistance program that provides low-income families with electronic benefit transfers (EBTs) that can be used to purchase food. The goal of the program is to increase food security and reduce hunger by increasing access to nutritious food.

This figure shows the percent of households with children that participate in SNAP. The percent in Bertie County in 2015-2019 period was 25.0%, much higher than the state value of 13.0%, and the Health ENC region value of 16.7%.

Education

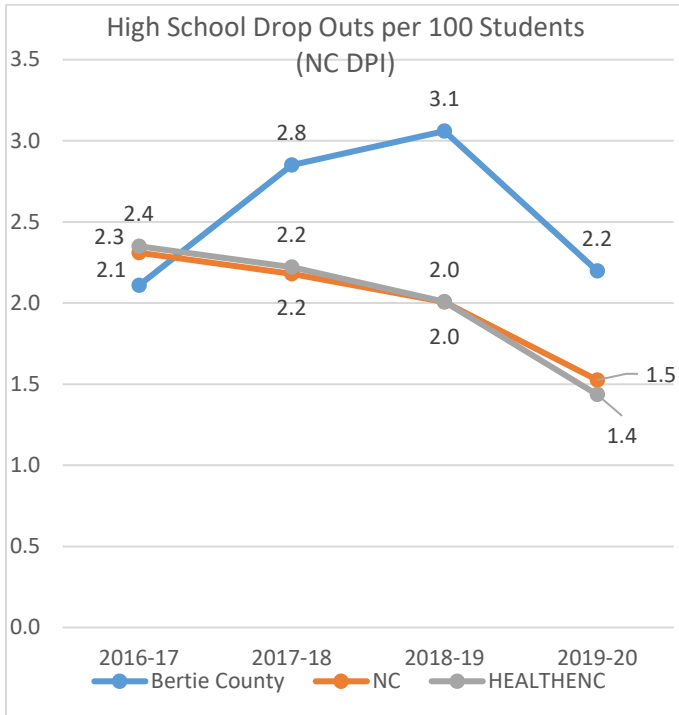
Educational Attainment



Graduating from high school is an important personal achievement and is essential for an individual’s social and economic advancement. Graduation rates can also be an important indicator of the performance of an educational system. Having a bachelor’s degree opens up career opportunities in a variety of fields and is often a prerequisite for higher-paying jobs.

Countywide, the percent of residents 25 or older with a high school degree or higher (78.4%) is lower than the state value (87.8%) and the Health ENC region (86.6%). Higher educational attainment in Bertie County is lower than the state value and the Health ENC region. While 31.3% of residents 25 and older have a bachelor’s degree or higher in North Carolina, only 22% of residents 25 and older have a bachelor’s degree or higher in the Health ENC counties and 13.6% in Bertie County.

High School Drop Out Rate

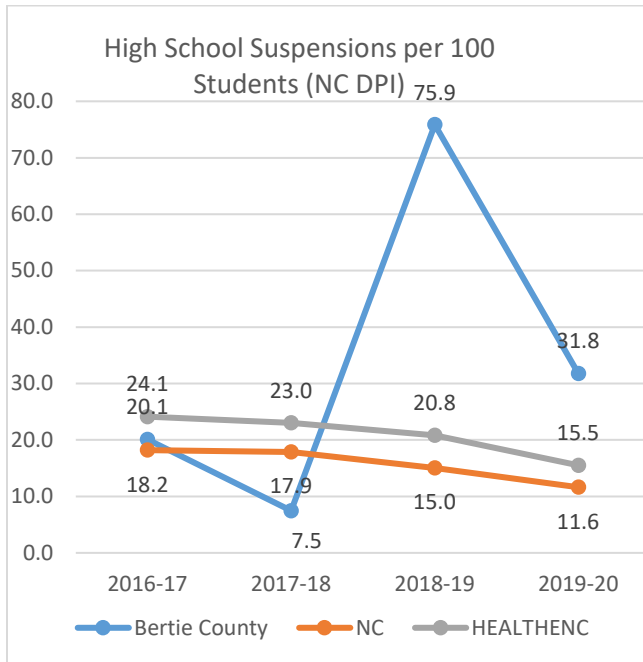


High school dropouts earn less income than high school and college graduates, and are more likely to be unemployed. High school dropouts are generally less healthy and require more medical care. Further, high school dropout rates are linked with heightened criminal activity and incarceration rates, influencing a community’s economic, social, and civic health.

Bertie County’s high school dropout rate was 2.2% in 2019-2020, which was higher than the rate in North Carolina (1.5%) and the Health ENC region (1.4%)

Bertie County’s high school dropout rate has increased from 2.1 % in 2016-2017 to 2.2 % in 2019-2020

High School Suspension Rate

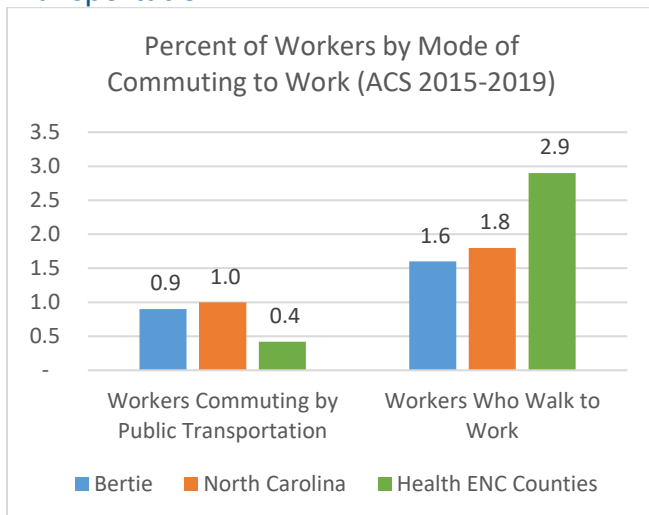


High school suspension is a form of discipline in which a student is temporarily removed from a classroom and/or school due to a violation of school conduct or code. Higher rates of suspension can be related to high rates of antisocial or delinquent behaviors, which may further contribute to potential future involvement in the juvenile justice system. Additionally, schools with higher suspension rates have higher rates of law or board of education violations and generally spend more money per student.

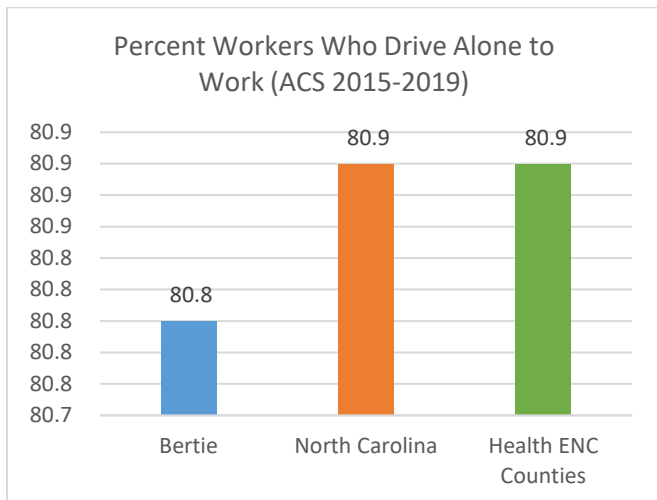
Bertie County’s rate of high school suspension (31.8 suspensions per 100 students) is higher than North Carolina’s rate (11.6) the Health ENC counties rate (15.5) in 2019-2020.

Across the four periods, high school suspension rates has been declining in the state, Health ENC but has been inconsistent in the county with suspension rate spiking to 75.9 in 2018-2019.

Transportation

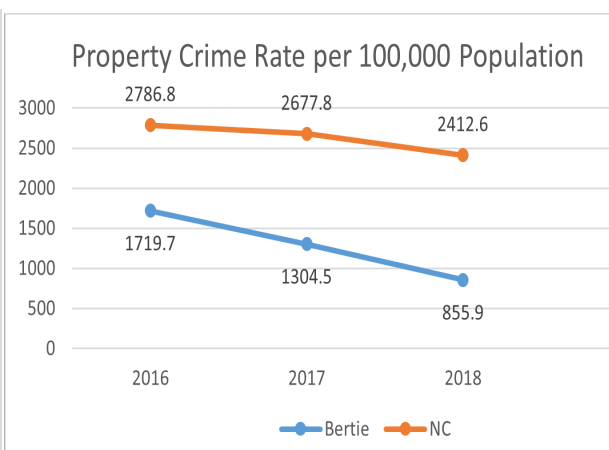
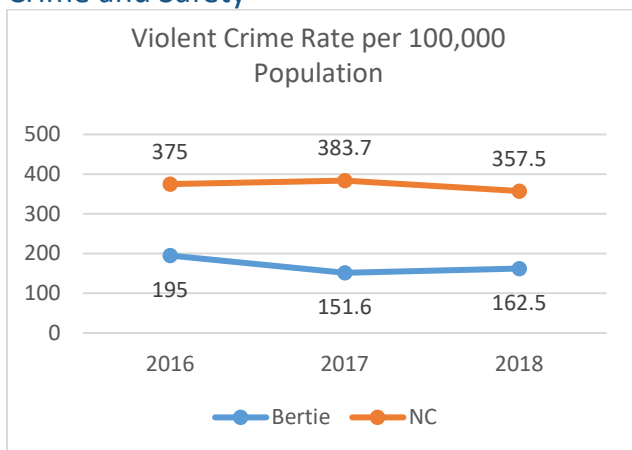


Public transportation offers mobility, particularly to people without cars. Transit can help bridge the spatial divide between people and jobs, services, and training opportunities. Public transportation also reduces fuel consumption, minimizes air pollution, and relieves traffic congestion. Walking to work helps protect the environment, while also providing the benefit of daily exercise.



In Bertie County, an estimated 0.9% of residents commute to work by public transportation, compared to the state value of 1.0%. Approximately 1.6% of residents walk to work, slightly lower than the state value of 1.8%. An estimated 80.8% of workers 16 and older drive alone to work, compared to 80.9% in N.C.

Crime and Safety



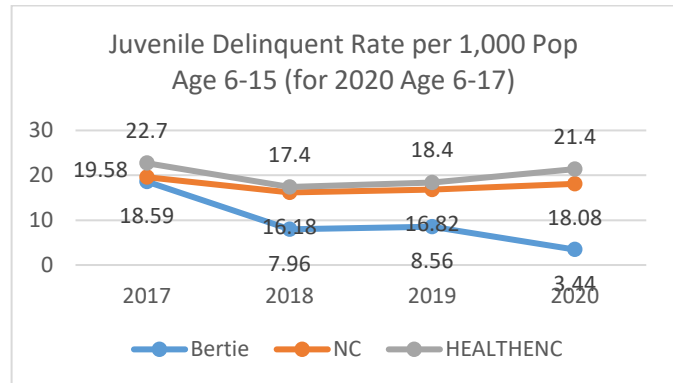
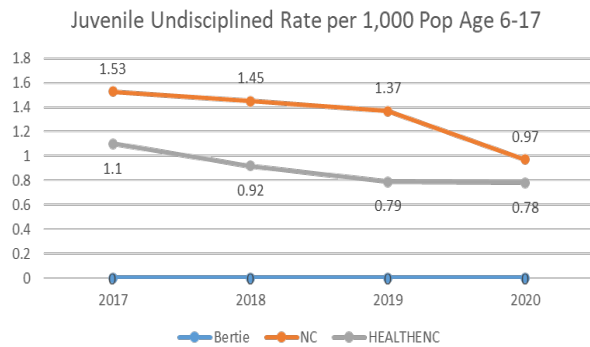
Both violent crime and property crime are used as indicators of a community’s crime and safety. Violence negatively impacts communities by reducing productivity, decreasing property values and disrupting social services. Violent crime includes four offenses: murder and non-negligent manslaughter, rape, robbery, and aggravated assault. Property crime includes the offenses of burglary, larceny-theft, motor vehicle theft, and arson.

The violent crime rate in Bertie County was 162.5 per 100,000 population, compared to 357.5 per 100,000 people in North Carolina in 2018. The property crime rate in Bertie County (855.9 per 100,000 people) was lower than the state value (2412.6 per 100,000 people) in 2018. As shown, the violent crime rate and the property crime rate in Bertie County is exhibiting a decrease.

From 2016 to 2018, the violent crime rate in Bertie County has decreased from 195 to 162.5.

During the same time period, the property crime rate has decreased from 1719.7 to 855.9, but still below the N.C. rate.

Juvenile Crime



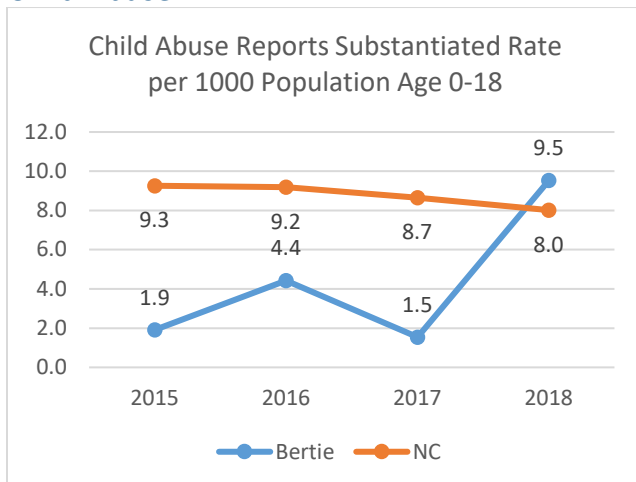
Youth who commit a crime may not gain the educational credentials necessary to secure employment and succeed later in life. Negative peer influences, history of abuse/neglect, mental health issues, and significant family problems increase the risk of juvenile arrest. The juvenile justice system aims to reduce juvenile delinquency through prevention, intervention, and treatment services.

The undisciplined rate describes juveniles who are unlawfully absent from school, regularly disobedient and beyond disciplinary control of the parent/guardian, are regularly found where it is unlawful for juveniles to be, or have run away from home for more than 24 hours.

In 2020, the juvenile undisciplined rate in Bertie County (0.0) was lower than the rate in North Carolina (0.97) and the Health ENC region (0.78)

In 2020, the juvenile delinquent rate for Bertie County was lower (3.44) than N.C. (18.08) and the Health ENC region (21.4)

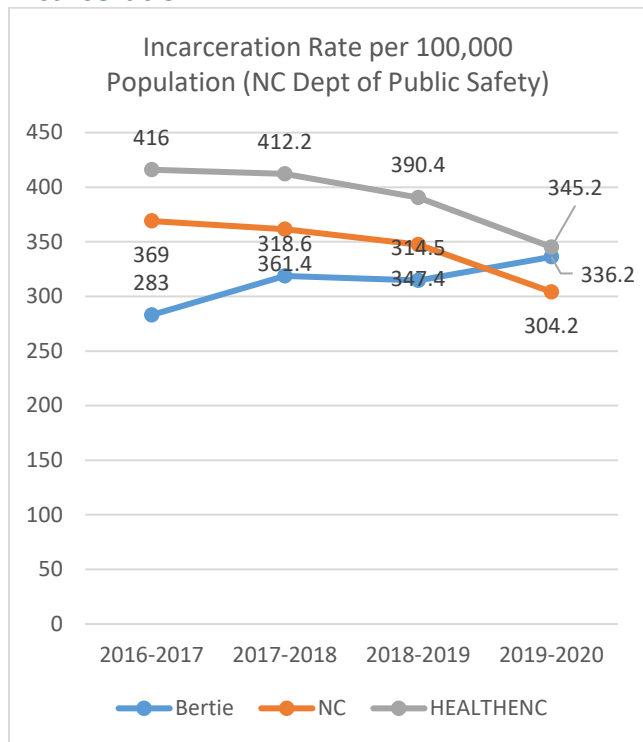
Child Abuse



Child abuse includes physical, sexual and emotional abuse. All types of child abuse and neglect can have long lasting effects throughout life, damaging a child’s sense of self, ability to have healthy relationships, and ability to function at home, at work, and at school.

The child abuse rate in Bertie County has varied over the past. However, in 2017-2018 the child abuse rate exhibited a sharp increase in Bertie County (9.5 per 1,000 population) being much higher than North Carolina (8.0).

Incarceration

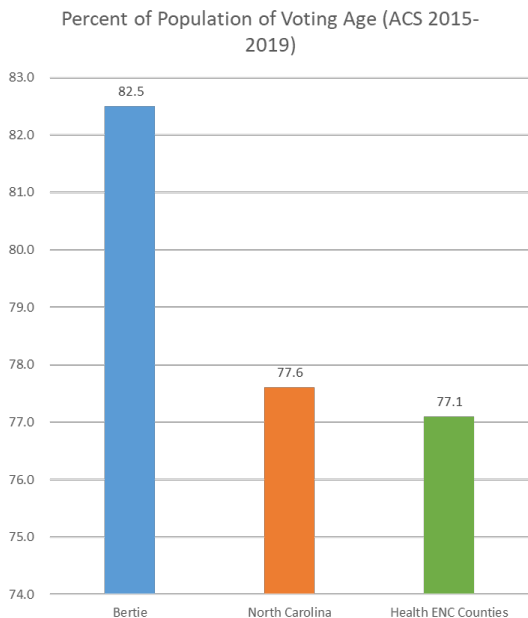


According to the U.S. Bureau of Justice Statistics, approximately one out of 100 adults in the U.S. are in jail or prison. Conditions in jails and prisons can lead to an increased risk of infectious diseases such as tuberculosis and hepatitis C, as well as assault from other inmates. After incarceration, individuals are likely to face a variety of social issues such as employment discrimination, disruption of family relationships and recidivism.

Over the past four measurement periods, the incarceration rate in Bertie County has decreased.

In 2019-2020, the incarceration rate in Bertie County was higher (336.2 per 1,000 population) than N.C. (304.2) but lower than the Health ENC region (345.2)

Civic/Political Engagement

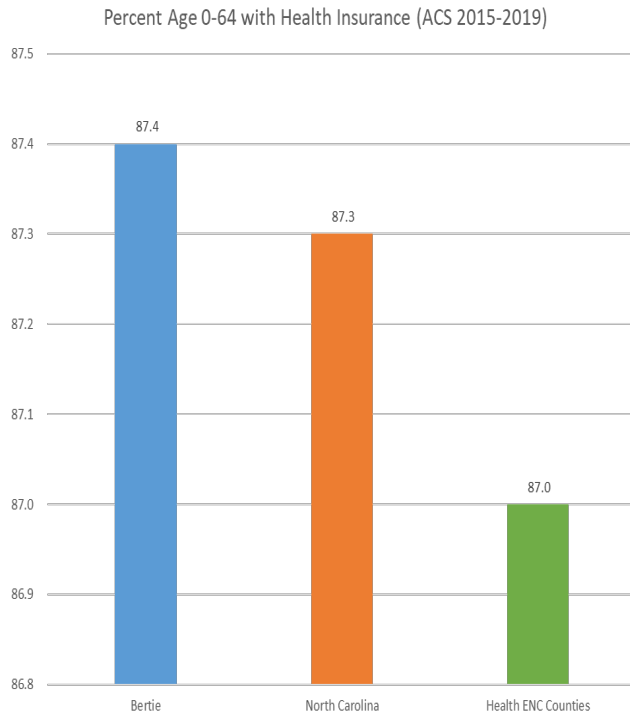


Exercising the right to vote allows a community to choose elected officials and hold them accountable. Voting ensures that all citizens have the opportunity to voice their opinions on issues such as the use of tax dollars, civil rights and foreign policy. By voting, individuals shape their communities and influence the next generation of society. A high level of voter turnout indicates that citizens are involved and interested in who represents them in the political system.

Bertie County has a higher percent of residents of voting age (82.5%) than North Carolina (77.6%) and Health ENC Counties (77.1%)

Chapter 4 Clinical Care Profile

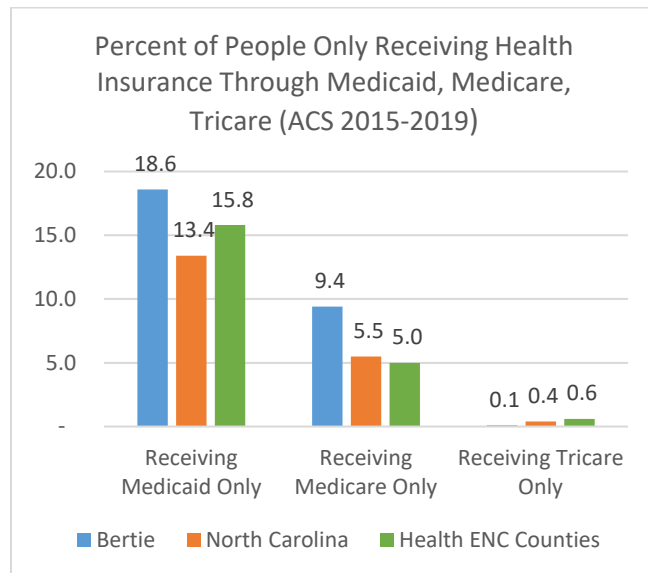
Health Insurance Coverage



Medical costs in the United States are very high. People without health insurance may not be able to afford medical treatment or prescription drugs. They are also less likely to get routine checkups and screenings, so if they do become ill they may not seek treatment until the condition is more advanced, and therefore more difficult and costly to treat.

Nearly 13% of the population 0-64 years of age in Bertie County are uninsured.

The rate of individuals aged 0-64 years old that have health insurance coverage in Bertie County is 87.4%, which is marginally higher than the rate for North Carolina (87.3%) and the Health ENC region (87.0%).



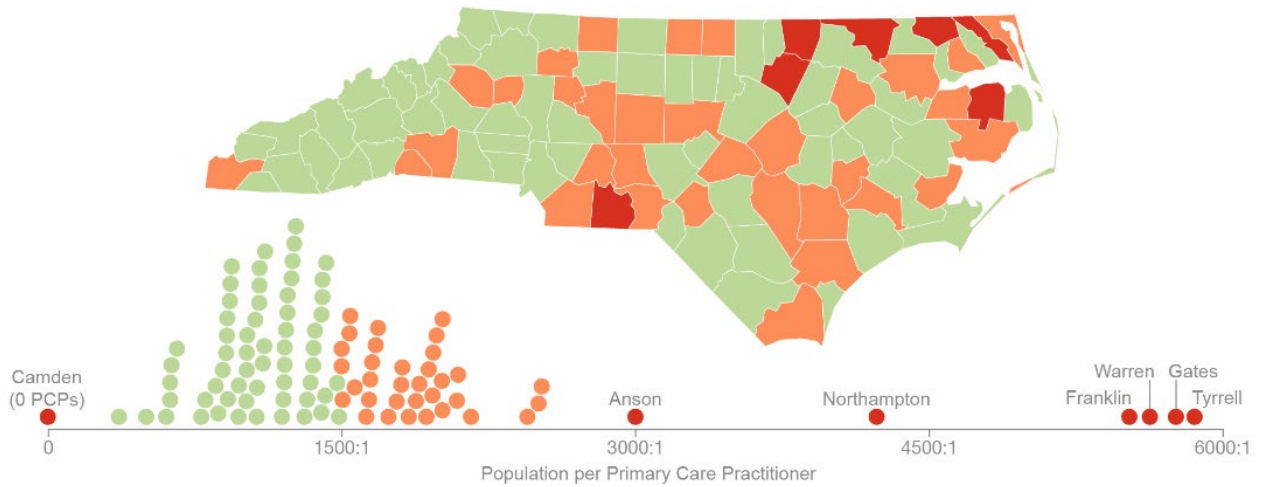
This graph shows the percent of the population only receiving health insurance through Medicaid, Medicare, or military healthcare (TRICARE).

Bertie County has a higher percent of people receiving Medicaid (18.6%) than North Carolina (13.4%) and Health ENC counties (15.8%).

In Bertie County, 18.6% of the population report receives health insurance coverage through Medicaid, 9.4% Medicare and 0.1% Tricare.

Primary Care Practitioners

Population per Primary Care Practitioner, North Carolina, 2017

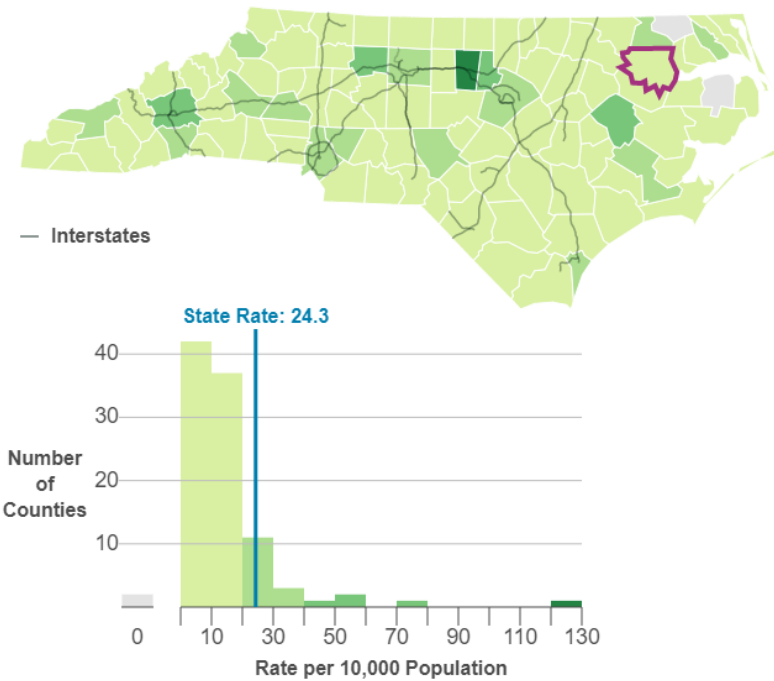


Notes: Updated March 10, 2020 to reflect adjustments to 2017 nurse practitioner data. Primary care physicians, physician assistants, and nurse practitioners are defined as in Spero, J. C., & Galloway, E. M. (2019). Running the Numbers. North Carolina Medical Journal, 80(3), 186-190. Physicians with a primary area of practice of obstetrics/gynecology were weighted as 0.25 of a full-time equivalent (FTE) primary care practitioner. All other primary care physicians were weighted as 1 FTE. Primary care physician assistants, nurse practitioners, and certified nurse midwives were weighted as 0.75 FTE. Physician and physician assistant data are derived from licensure data provided by the North Carolina Medical Board. This analysis only includes physicians who are not residents-in-training and are not employed by the Federal government. Nurse practitioner and certified nurse midwife data is derived from licensure data provided by the North Carolina Board of Nursing. Data include active, licensed practitioners in practice in North Carolina as of October 31, 2017. Practitioners are assigned to counties based on primary practice location. County populations were adjusted for age and gender according to primary care use rates described in data from the Medical Expenditure Panel Survey. The raw (unadjusted) population data was from the NC Office of State Budget and Management

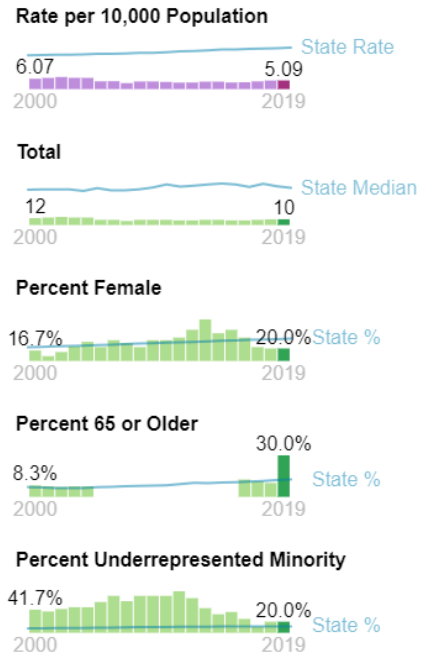


https://nhealthworkforce.unc.edu/blog/primary_care_nc/

Physicians per 10,000 Population by County, North Carolina, 2019



Profession Demographics for Bertie County



Notes: Data include active, licensed physicians in practice in North Carolina as of October 31 of each year who are not residents-in-training and are not employed by the Federal government. Physician data are derived from the North Carolina Medical Board. County estimates are based on primary practice location. Population census data and estimates are downloaded from the North Carolina Office of State Budget and Management via NC LINC and are based on US Census data. Source: North Carolina Health Professions Data System, Program on Health Workforce Research and Policy, Cecil G. Sheps Center for Health Services Research, University of North Carolina at Chapel Hill. Created August 29, 2021 at <https://nchealthworkforce.unc.edu/interactive/supply/>.

Chapter 5 Chronic and Communicable Disease Profile

Leading Causes of Death

Bertie County				North Carolina				Health ENC Counties			
Rank	Cause	Deaths	Rate	Rank	Cause	Deaths	Rate	Rank	Cause	Deaths	Rate
1	Cancer	56	295.56	1	Cancer	19,963	190.34	1	Heart Disease	4546	210.2
2	Heart Disease	47	248.06	2	Heart Disease	19,661	187.46	2	Cancer	4345	200.91
3	Alzheimer's Disease	21	110.84	3	Chronic Lower Respiratory Diseases	5,411	51.59	3	Cerebrovascular Disease	1215	56.18
4	Diabetes Mellitus	19	100.28	4	Cerebrovascular Disease	5,203	49.61	4	Chronic Lower Respiratory Diseases	1114	51.51
5	Chronic Lower Respiratory Diseases	18	95	5	Other Unintentional Injuries	4,683	44.65	5	Other Unintentional Injuries	1006	46.52
6	Cerebrovascular Disease	15	79.17	6	Alzheimer's Disease	4,508	42.98	6	Alzheimer's Disease	918	42.45
7	Nephritis Nephrotic Syndrome and Nephrosis	12	63.33	7	Diabetes Mellitus	3,127	29.81	7	Diabetes Mellitus	838	38.75
8	Other Unintentional Injuries	7	36.95	8	Nephritis Nephrotic Syndrome and Nephrosis	2,121	20.22	8	Nephritis Nephrotic Syndrome and Nephrosis	476	22.01
9	Motor Vehicle Injuries	5	26.39	9	Pneumonia and Influenza	1,730	16.49	9	Motor Vehicle Injuries	460	21.27
10	Chronic Liver Disease and Cirrhosis	4	21.11	10	Motor Vehicle Injuries	1,608	15.33	10	Pneumonia and Influenza	382	17.66

Notes: Leading causes of death are calculated based on the crude number of deaths per 100,000 population in 2019.

Deaths: North Carolina State Center for Health Statistics 2019 Vital Statistics Public Use Data Files, downloaded from the Odum Institute for Research in Social Science at UNC-Chapel Hill Dataverse web site, May 2021. Population: National Center for Health Statistics 2019 Bridged-Race Population Estimates (https://www.cdc.gov/nchs/nvss/bridged_race.htm). Analysis by ECU Department of Public Health, Health Systems Research and Development.

Leading Causes of Injury Death

Leading Causes of Injury Death 2016 to 2019 BERTIE			Leading Causes of Injury Hospitalization 2016 to 2019 BERTIE			Leading Causes of Injury ED Visits 2016 to 2019 BERTIE		
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#
1	MVT - Unintentional	24	1	Fall - Unintentional	209	1	Fall - Unintentional	2,539
2	Poisoning - Unintentional	15	2	MVT - Unintentional	79	2	Unspecified - Unintentional	1,848
3	Firearm - Assault	8	3	Poisoning - Unintentional	41	3	MVT - Unintentional	1,420
4	Fall - Unintentional	7	4	Poisoning - Self-Inflicted	20	4	Struck By/Against - Unintentional	871
5	Unspecified - Unintentional; Suffocation - Self-Inflicted; Firearm - Self-Inflicted; Drowning/Submersion - Unintentional	3	5	Fire/Burn - Unintentional	18	5	Natural/Environmental - Unintentional	584
TOTAL		77	TOTAL		469	TOTAL		10,098

MVT – motor vehicle traffic Source: <https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/index.htm#genData>
(2016-2019, all ages)

Leading Causes of Hospitalizations

Leading Causes of Injury Death 2016 to 2019 BERTIE			Leading Causes of Injury Hospitalization 2016 to 2019 BERTIE			Leading Causes of Injury ED Visits 2016 to 2019 BERTIE		
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#
1	MVT - Unintentional	24	1	Fall - Unintentional	209	1	Fall - Unintentional	2,539
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TOTAL		77	TOTAL		469	TOTAL		10,098

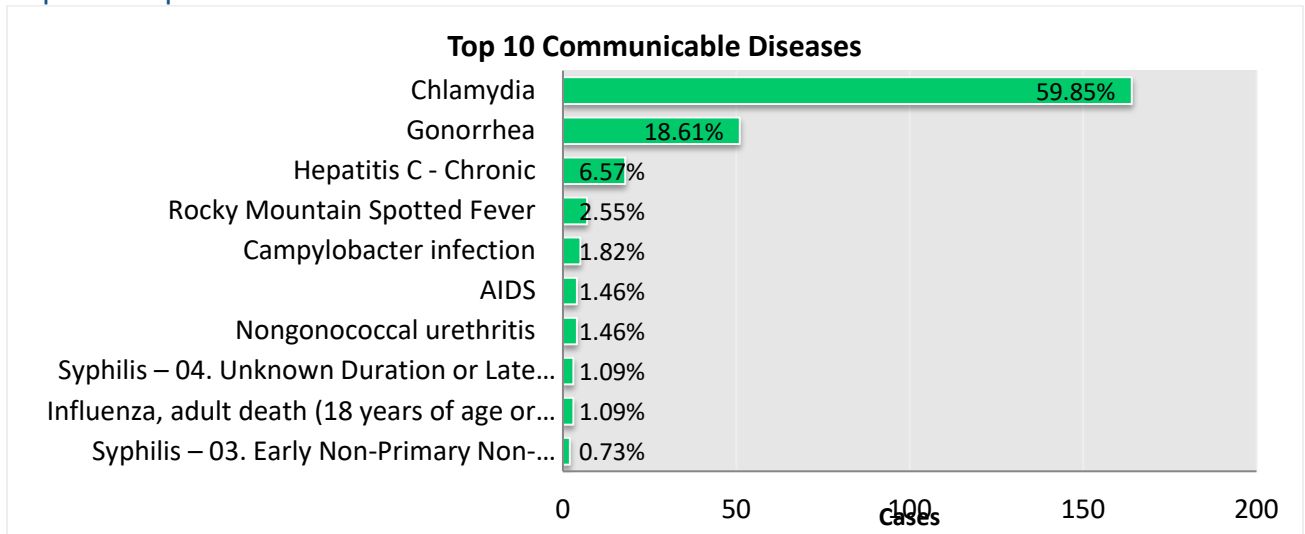
MVT – motor vehicle traffic Source: <https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/index.htm#genData>
(2016-2019, all ages)

Leading Causes of Emergency Department Visits

Leading Causes of Injury Death 2016 to 2019 BERTIE			Leading Causes of Injury Hospitalization 2016 to 2019 BERTIE			Leading Causes of Injury ED Visits 2016 to 2019 BERTIE		
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#
1	MVT - Unintentional	24	1	Fall - Unintentional	209	1	Fall - Unintentional	2,539
2	Poisoning - Unintentional	15	2	MVT - Unintentional	79	2	Unspecified - Unintentional	1,848
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TOTAL		77	TOTAL		469	TOTAL		10,098

MVT – motor vehicle traffic Source: <https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/index.htm#genData>
(2016-2019, all ages)

Top Ten Reportable Communicable Diseases



Note: For NC State-wide rates and reported number of cases, refer to <https://public.tableau.com/app/profile/nc.cdb/viz/NCD3NorthCarolinaDiseaseDataDashboard/DiseaseMapsandTrends>
 Data Source: NCDHHS, (latest available data, 2018).

Note: To view and compare communicable disease rates in your county with NC State-wide rates, reported number of cases, etc., view the custom dashboard

<https://NCD3NorthCarolinaDiseaseDataDashboard>

Chapter 6 HNC 2030 Indicator Rankings by Health ENC Regions

Indicators / Measures	Bertie	NC
Health Outcomes		
Premature Death	10,000	7600
Low Birthweight	12%	9%
Health Factors		
Health Behaviors		
Adult Smoking	25%	18%
Access to Exercise Opportunities	33%	74%
Adult Obesity	45%	32%
Excessive drinking	15%	18%
Sexual Transmitted Diseases	858%	647.8
Clinical Care		
Uninsured	13%	13%
Primary Care Physicians	6340:01:00	1400:01:00
Dentists	9470:1%	1720:01:00
Flu Vaccinations	39%	52%
Mammography Screening	50%	46%
Social & Economic Factors		
High School Completion	78%	88%
Some College	45.00%	67.00%
Unemployment	4.60%	3.90%
Income inequality	5.20%	4.70%
Children in single parent households	50.00%	28.00%
Children in Poverty	30%	19%
Children in single parent households	39%	28%
Social Associations	24.7	11.5
Physical Environment		
Drive alone to work	87%	81%
Air Pollution - particulate matter	7.3	8.5
Severe Housing problems	20%	15%

Areas to Explore

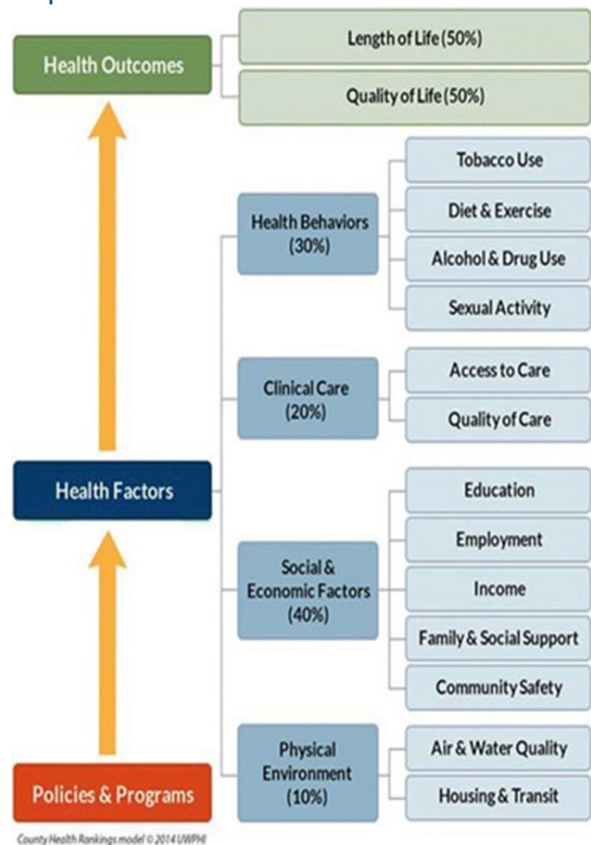
Areas of Strength

Source: County Health Rankings

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

Chapter 7 County Health Ranking Indicators

Population Health Model



The County Health Rankings are based on a model of community health that emphasizes the many factors that influence how long and how well we live. The Rankings use more than 30 measures that help communities understand how healthy their residents are today (health outcomes) and what will impact their health in the future (health factors). Explore the Model to learn more about these measures and how they fit together to provide a profile of community health

There are many factors that influence how well and how long people live.

The *County Health Rankings* model (right) is a population health model that uses data from different sources to help identify areas of concerns and strengths to help communities achieve health and wellness.

The Rankings provides county-level data on health behavior, clinical care, social and economic and physical environment factors.

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

Chapter 8 Survey Findings

Top 3 issues which have the highest impact on quality of life:

- Low income/Poverty
- Drugs/Alcohol
- Lack of Affordable Housing

Top 3 services that need the most improvement:

- More Affordable/Better Housing
- Positive Teen Activities
- Higher Paying Employment

Survey questions and responses in their entirety are located in Appendix A.

Chapter 9 Inventory of Resources

Community Services and Organizations

Law Enforcement - There are three municipalities in Bertie County that have their own police departments: Aulander, Windsor, and Lewiston-Woodville. The rest of the county is covered by the Bertie County Sheriff's Office, headquartered in Windsor.

Bertie County Sheriff's Office

PO Box 157

104 Dundee St

Windsor, NC 27983

Phone: (252) 794-5330

Availability: Office Hours: 8:30am-5:00pm

Exceptions: Holidays and Inclement Weather

<http://www.co.bertie.nc.us/departments/sheriff/sheriff.html>

The Bertie County, NC fire department directory includes 12 fire departments and fire stations

Source: Fire Department Directory, North Carolina, Bertie County;

<http://www.firedepartment.net/directory/north-carolina/bertie-county>

Fire Departments

Aulander Municipal Volunteer Fire Department

124 E Main ST

PO Box 100

Aulander, NC 27805

Phone: (252) 345-3541

Colerain Volunteer Fire Department

101 Winton ST

PO Box 247

Colerain, NC 27924

Phone: (252) 356-1033

Fax: (252) 356-2124

Perrytown Fire Department

850 Perry Town Rd.

Colerain, NC 27924

Trap Fire Department

213 Valentine Farm Rd

Colerain, NC 27924

Kelford Fire Department

613 Harrells Siding Rd.

Kelford, NC 27847

Lewiston Woodville Volunteer Fire Department

103 W Church ST

PO Box 395

Lewiston Woodville, NC 27849

Phone: (252) 348-2658

Fax: (252) 348-2608

Merry Hill Midway Volunteer Fire Department

109 NC 45 N

Merry Hill, NC 27957

Phone: (252) 482-3656

Powellville Volunteer Fire Department

106 Curtis ST

Powellsville, NC 27967

Roxobel Volunteer Fire Department

204 S Main ST

Roxobel, NC 27872

Phone: (252) 344-7791

Blue Jay Volunteer Fire Department

1351 Indian Wood RD

Windsor, NC 27983

Windsor Fire Department

501 N King ST

Windsor, NC 27983

Phone: (252) 794-3437

Askewville Volunteer Fire Department

105 Askewville S Railroad ST

Windsor, NC 27983

Phone: (252) 794-2553

Mailing Address

Askewville Volunteer Fire Department

117 W Askewville ST #52

Windsor, NC 27983

Public Libraries

There are three public libraries that serve the people of Bertie County:

Lawrence Memorial Public Library

204 Dundee St

Windsor, NC 27983

Phone: 252-794-2244

Fax: 252-794-1546

Hours of Operation:

Mon, Tues, Wed, Fri 10:00 am - 6:00 pm

Thursday 10:00 am - 8:00 pm

Saturday 9:00 am - 12:00 pm

Sallie Harrell Jenkins Memorial Library

302 Broad St

Aulander, NC 27805

Phone: 252-345-4461

Albemarle Regional Library

303 Tryon St

Winton, NC 27986

Phone: 252-358-7832

Website: <http://www.albemarle-regional.lib.nc.us/>

The Bertie County Council on Aging serves all Bertie County senior citizens, age 60 and older. Council programs serve between 400 and 500 seniors and their family caregivers during a typical year.

Council on Aging

103 West School Street

Windsor, NC 27983

Ageing Site Phone: (252) 794-5315

Nutrition Site Phone: (252) 794-5316

Fax: (252) 794-5351

Hours: 8:30am-5:00pm

Exceptions: [Holidays](#) & Inclement Weather

Council on Aging programs include:

- Congregate nutrition provides a noontime meal Monday through Friday at three sites in the county: Windsor, Aulander, and Colerain. Each participant age 60 and older is asked to contribute \$1.00 toward the cost of a meal.
- Home delivered meals, or “Meals on Wheels” provides a lunchtime meal to home-bound seniors on Monday through Friday. There are two delivery routes in the county, one in Windsor and one in Aulander. Meals-to-go are available for pick-up, but not delivery, in Colerain. Each participant age 60 and older is asked to contribute \$1.00 toward the cost of a meal.
- Transportation for seniors from all areas of the county is provided to the Windsor nutrition site, the Department of Social Services, the Health Department, grocery stores, drug stores, the post office and other county sites on a pre-scheduled basis through a contract with the Choanoke Public Transportation Authority. Each participant is asked to contribute \$1.00 to help subsidize the service.
- In-home respite care via certified nursing assistants is provided to relieve primary, unpaid caregivers. Space is limited and many families are on a waiting list. Each family is asked to contribute \$1.00 per hour toward the cost of the service.
- The Senior Center, located in Windsor, provides activities for seniors and information on services available to them. S.H.I.I.P (Senior’s Health Insurance Information Program) trains seniors to peer counsel in their community concerning Medicare, Medicare Supplements and long term care. AARP Tax Aide is available during February, March, and April to assist in state and federal income tax returns for seniors 60 and older with low to middle incomes.
- The Senior Center also plans and administers day field trips. Wellness, Exercise and Arts and Crafts classes and programs are offered at sites in Windsor and Colerain. Windsor conducts two classes Monday, Wednesday, and Friday. Colerain holds classes on Tuesdays and Thursdays. Arts and crafts classes are held throughout the fall, winter, and spring.
- Health Services, such as flu shots and blood pressure checks, are provided by the health department at nutrition sites.
- Library Services available to seniors include a large-print library and periodic visits from a Bookmobile.

Other Community Services and Organizations

It is a nearly impossible task to create a print catalogue or listing of community resources that is current beyond its print date. Therefore, this document provides instead links to on-line or telephone resources

that provide information on community organizations and services available to Bertie County residents. These particular community resource directories and guides have been included because they are sponsored and/or maintained by entities likely to remain in existence, and because they cover a range of community resources.

Bertie County Community Resource Directories and Guides

Windsor-Bertie Chamber of Commerce Lists of schools, churches and civic organizations in Bertie County.
<http://www.windsorbertiechamber.com/index.html>

Bertie County Schools

P.O. Box 10, 715 US Highway 13 North

Windsor, NC 27983

Phone: 252-794-6000

Fax: 252-794-9727

Public Schools

<https://www.bertie.k12.nc.us/>

Askewville Pre-K

121 East Askewville St.

Windsor, NC 27983

Phone 252-794-2260

Fax: 252-794-2428

Aulander Elementary

2515 NC Highway 305

Aulander, NC 27805

Phone: 252-345-3211

Fax: 252-345-0066

Bertie Early College

819 Governor's Road

Windsor, NC 27983

Phone: 252-794-2150

Fax: 252-794-2151

Bertie High School

716 US Highway 13 North

Windsor, NC 27983

Phone: 252-794-3034

Fax: 252-794-8102

Bertie Middle School

652 US Highway 13 North

Windsor, NC 27983

Phone: 252-794-2143

Fax: 252-794-4024

Bertie STEM High School

716 US Highway 13 North

Windsor, NC 27983

Phone: 252-794-3173

Fax: 252-794-8102

Colerain Elementary School

202 North Academy Street

Colerain, NC 27924

Phone: 252-356-4714

Fax: 252-356-4522

West Bertie Elementary School

3734 Governor's Road

Kelford, NC 27847

Phone: 252-344-7621

Fax: 252-344-2828

Windsor Elementary School

104 Cooper Hill Road

Windsor, NC 27983

Phone: 252-794-5221

Fax: 252-794-5218

Private Schools

Bethel Assembly Christian Academy

105 Askewville Bryant St.

Windsor, NC 27983

Phone: 252-794-4034

Heritage Collegiate Leadership Academy

118-B County Farm Rd.

Windsor, NC 27983

Phone: 252-794-0597

Lawrence Academy

148 Avoca Farm Road

Merry Hill, NC 27957

Phone: 252-482-4748

Fax: 252-482-2215

Higher Education

Chowan University

One University Dr.

Murfreesboro, NC 27855

Phone: 252-398-6436

Toll-Free: 1-888-4-CHOWAN

Fax: 252-398-1190

Website: <https://www.chowan.edu/>

Martin Community College - Bertie Campus

409 West Granville St.

Windsor, NC 27983

Phone: 252-794-4861

Website: <http://www.martincc.edu/>

Martin Community College - Williamston Campus

1161 Kehukee Park Rd.

Williamston, NC 27892

Phone: 252-792-1521

Fax: 252-792-0826

Website: <http://www.martincc.edu/>

Roanoke Chowan Community College

109 Community College Rd.

Ahoskie, NC 27910

Phone: 252-862-1200

Website: <https://www.roanokechowan.edu/>

College of the Albemarle - Elizabeth City Campus

1208 N. Road St
PO Box 2327
Elizabeth City, NC 27909
Phone: 252-335-0821
Fax: 252-335-2011

Website: <http://www.albemarle.edu/>

College of the Albemarle - [Dare County Campus](#)

132 Russell Twiford Road
Manteo, NC 27954
Phone: 252-473-2264
Fax: 252-473-5497

Website: <https://www.albemarle.edu/for-the-community/locations/dare-county-campus/>

College of the Albemarle - Roanoke Island Campus

205 Highway 64 S.
Manteo, NC 27954
Fax: 252-473-6002

Website: <https://www.albemarle.edu/for-the-community/locations/dare-county-campus/>

College of the Albemarle - Edenton-Chowan Campus

800 N. Oakum St
Edenton, NC 27932
Phone: 252-482-7900
Fax: 252-482-7999

Website: <http://www.albemarle.edu/about-coa/edenton-chowan-campus>

[Regional Aviation & Technical Training Center](#)

107 College Way
Barco, NC 27917
Phone: 252-453-3035
Fax: 252-453-3215

Website: <https://www.albemarle.edu/for-the-community/locations/regional-aviation-technical-training-center/>

East Carolina University

East Fifth Street

Greenville, NC 27858

Phone: 252-328-6131

Website: <http://www.ecu.edu/>

Windsor/ Bertie County Area Churches

All God's Children United Methodist	252-345-1077
Ashland Missionary Baptist Church	252-356-4391 or 252-752-2235
Askewville Assembly of God	252-794-4034
Askewville Bethel Assembly of God, Inc.	252-794-3830
Aulander Baptist Church	252-345-3931 or 252-345-7729
Aulander First Baptist Church	252-345-0523
Beacon of Light Baptist	252-587-3538
Beautiful Zion Baptist	252-348-3164 or 252-395-2952
Bethany Baptist Church	252-356-4894 or 252-356-4550
Capeharts Baptist Church	252-482-4338
Catholic Community of Bertie County	252-794-5086
Cashie Baptist Church	252-794-2107
CBK Connections	252-209 4660
Cedar Landing Missionary Baptist Church	252-794-2248
Center Grove Baptist Church	252-794-4282
Charity Temple of Holiness	252-345-1004
City Praise	252-732-6883
Choose Life Now Outreach	252-794-0777
Church of God for All People	252-348-2673
Colerain Baptist	252-356-4742
Colerain United Methodist Church	252-345-1077
Connaritsa Baptist Church	252-345-0506 or 252-345-7821
Conoconary Baptist Church	252-345-2175
Crossroad Rescue Mission	252-794-2247 or 252-794-9624
Ebenezer Assembly of God	252-794-4609 or 252-794-4643
Edgewood Baptist Church	252-794-1962 or 252-794-2839
Elm Grove Baptist Church	252-345-0859

Emmanuel Full Gospel	252-482-2141
Eveninglight Church of God	252-794-5023
First Baptist Missionary Church of Colerain	252-356-4277
First Baptist Church of Kelford	252-344-2610
First Baptist Church of Lewiston Woodville, Inc.	252-348-2777
First Baptist Missionary Church of Powellsville	252-332-8330
Free Temple Ministries, Inc.	252-794-9453
Grace Episcopal Church	252-348-2746
Greater Bazemore Temple	252-794-9467
Greater Wynns Grove Baptist Church	252-356-2371
Green Cross	252-794-1832
Holly Grove	252-794-3861
Indian Woods Missionary Baptist Church	252-794-9173
Kelford Baptist Church	252-344-2022 or 252-344-7221
Kingdom Hall Jehovah Witness	252-794-9983
Lawrence Baptist Church	252-345-3979
Lewiston Assembly of God	252-348-2781
Life Changing Ministries	252-794-5021
Luella Baptist	252-348-2525
Mars Hill Baptist Church	252-356-2488 or 252-356-2217
Merry Hill Baptist Church	252-482-3875
Metropolitan Interdenominational Church of God	252-345-1160 or 252-345-1310
Millennium Pentecostal Holiness Baptist	252-345-8121
Mills Branch Missionary Baptist	252-345-0088
Mount Ararat Missionary Baptist Church	252-348-2844
Mount Arie Apostolic Faith Holiness Church	252-794-3620
Mount Herman Missionary Baptist Church	252-794-3508 or 252-795-5486
Mount Olive Missionary Baptist Church	252-348-2644
My Sister House Ministries Inc.	252-209-1036
New Beginning Christian Center	252-482-5243
New Lighthouse Baptist Church	252-794-3494
New Holly Grove	252-356-4544

Oxley Hill Baptist	252-482-0217
Perrytown Assembly of God	252-356-4755
Peterson Chapel Baptist Church	252-482-8394 or 252-325-5062
Peterson Grove Missionary Baptist Church	252-794-1596
Piney Wood Chapel	252-332-5039
Pleasant Grove Baptist Church	252-345-0834
Pleasant Oak Missionary	252-794-1620
Potter's House Christian Fellowship	252-332-6267
Powellville Baptist Church	252-332-5418
Powellville United Methodist Church	252-332-3459
Power House Ministries	252-348-2311
Real Life Ministries	252-794-9774
Refreshing Center Church of God in Christ	252-794-2669
Republican Baptist Church	252-794-3858
Rhema Word Deliverance	252-356-1000
Riverside Baptist Church	252-356-4566
Ross Baptist Church	252-794-4339
Rountree Temple of Praise	252-332-8682
Sandy Branch Missionary Baptist	252-344-7571 or 252-357-7052
Sandy Point Missionary Baptist Church	252-794-4864
Sandy Run Baptist Church	252-344-2000
Siloam Baptist Church	252-794-3704
Speller's Chapel Church of Christ	252-793-5554
Spring Hill Baptist Church	252-348-2620
St. Elmo Baptist Church	252-794-4783
St. Francis Missionary Baptist Church	252-794-3831
St. James Church of Christ Disciples of Christ	252-794-2267 or 252-794-2673
St. John Second Baptist	252-332-6900
St. Lukes Holiness Church	252-348-2675
St. Lukes Missionary Baptist	252-794-4775

St. Marks Baptist	252-356-1370
St. Marks Episcopal Church	252-482-1541
St. Matthews Baptist	252-794-4839
St. Paul Missionary Baptist Church	252-794-9186
St. Thomas Episcopal Church	252-794-3420
Tabernacle Church of Deliverance	252-325-3881
Trueway Holiness Church of God in Christ	252-794-4539
United Outreach Ministries	252-325-2270
Victory Temple Church of God in Christ	252-794-3196
Wakelon Baptist Church	252-356-4693
Weeping Mary	252-348-2152
Windsor Assembly of God Church of God in Christ	252-794-4660
Windsor Pentecostal Holiness Church	252-792-7366
Windsor United Methodist Church	252-799-5086
Woodville Plain Missionary Baptist	252-348-2747
World Harvest Christian Center	252-794-2102
Zion Bethlehem Missionary Baptist	252-794-2969
Zion Grove Baptist	252-345-4531
Zion Hill Missionary Baptist Church	252-356-4990

Clubs and Civic Organizations
Bertie County Arts Council

Phone: 252-794-9762

Windsor Lions Club

Heritage House Restaurant

1303 S King St.

Windsor, NC 27983

Phone: 252-794-4167

1st & 3rd Thursday at 6:30pm

Windsor Rotary Club

The Town House Restaurant

Hwy 13/17 Bypass

Windsor, NC 27983

Phone: 252-794-3011

Thursdays at 12 noon until 1pm

Bertie County Government Directory of Services Alphabetical list of links to services provided by the county. Portal: <http://www.co.bertie.nc.us/>

Albemarle Smart Start Partnership Community Resource Guide

Searchable on-line directory of programs and services available throughout the Albemarle Region. Currently catalogs annotated listings for 125 local and regional agencies and organizations. Portal; <http://albemarleacf.org/news-events/links.html> Also available as a printable version—scroll down to Resource Guide PDF to view the Community Resource Guide below or [download it](#).

Albemarle Smart Start Partnership

715 Highway 13 North

Windsor, N.C. 27983

Phone: 252-794-8190

Toll-Free: 800-262-8314

Fax: (252) 333-1201

Email: smartstart@albemarlessp.org

Website: <http://albemarleacf.org/>

Bertie County Childcare Centers

Source: <https://childcarecenter.us/>

Askeville Pre-School

121 Askeville Rd

Windsor, NC 27983

Phone: 252-794-2260

West Bertie Elementary School Pre K

Kelford, NC 27847

Phone: 252-344-7621

Colerain Elementary School Pre-K

202 North Academy St.

Colerain, NC 27924

Phone: 252-356-4714

Windsor Head Start

104 Cooper Hill Road

Windsor, NC 27983

Phone: 252-794-5521

Email: windsorhs@nc-cada.org

West Bertie Head Start

3734-B Governors Rd.

Kelford, NC 27847

Phone: 252-344-2433

Email: wbertiehs@nc-cada.org

Windsor Christian Child Development Center

Provide care for infants through 12 years old.

191 Cooper Hill Rd

PO Box 623

Windsor, NC 27983

Phone: 252-794-6500

Email: director@wccdc.info

Website: <http://www.christianchildcare.info/>

Afterschool B.E.L.L.S.

106 Queen St.

Windsor, NC 27983

Phone: 252-794-9709

Charity's Educational Center

1834 NC-305

Aulander, NC 27805

Phone: 252-345-1004

Greatest Harvest Day Care Inc

1301 NC-561 West

Aulander, NC 27805

Phone: 252-345-1411

Kiddie World Child Development Center

548 US Hwy 13 and 17 S

Windsor, NC 27983

Phone: 252-794-3967

Millennium Christian Daycare Inc

301 Millennium Rd.
 Aulander, NC 27805
 Phone: 252-345-8121

Rehoboth II

126 Hwy 42
 Powellsville, NC 27910
 Phone: 252-332-2176

South Aulander Child Development Center

2455 NC Hwy 305
 Aulander, NC 27805
 Phone: 252-345-1161

Windsor Jumping Jacks Child Care Center

310 W Granville St. #A
 Windsor, NC 27983
 Phone: 252-794-3337

Home Daycare and Group Home Child Care in Bertie County

Source: <https://childcarecenter.us/>

Name	Address	Phone
KIDDIE'S HAPPY HOME CARE	Pineywood Road Lewiston Woodville, NC 27849	(252) 348-2287
LOVING ARMS FAMILY CHILD CARE HOME	B Bond Lane Windsor, NC 27983	(252) 794-9774
MOORE'S CHILD CARE HOME	643 B Moore Road Kelford, NC 28847	(252) 344-9361

<u>WEE CARE FAMILY CHILD CARE HOME</u>	Cedar Landing Road Windsor, NC 27983	(252) 794-9594
<u>ANN LASSITER DAY CARE HOME</u>	Bruce Farmer Road Aulander, NC 27805	(252) 345-1348
<u>CHRISTIE'S DAY CARE HOME</u>	N King Street Windsor, NC 27983	(252) 794-4061
<u>LEIGH'S DAY CARE</u>	Pocosin Road Windsor, NC 27983	(252) 794-4826
<u>PAM'S DAY CARE</u>	Pocosin Road Windsor, NC 27983	(252) 794-4601

Roanoke Chowan Services for Abused Families with Emergencies (SAFE)

Roanoke Chowan S.A.F.E. is a non-profit organization, founded in 1984, that provides direct services, support, education and public awareness to victims of domestic/family violence and sexual assault in the counties of Hertford, Gates, Bertie and Northampton. SAFE provides the following services: 24 hour crisis line, emergency shelter, food, clothing, court advocacy, crisis intervention, transportation, assistance in filing victim's compensation forms, referrals, and more considering the circumstances. The goal of the agency is to enable clients to live violence-free and to become self-sufficient. SAFE does not charge for its services.

PO Box 98

Ahoskie, NC 27910

Telephone & Crisis Line: 252-332-1933

Fax: 252-332-2450

Website: www.roanoke-chowansafe.webs.com

Social Services:

110 Jasper Bazemore Ave

PO Box 627

Windsor, NC 27983

Phone: 252-794-5320

Fax: 252-794-5344

To Report Abuse, Neglect, or Exploitation of Children or the Elderly after hours, call 252-794-5330

Community Care of Eastern North Carolina (CCPEC)/ Carolina ACCESS

Phone: 252-847-9428

<https://www.accesseast.org/ae-contact-us/>

Bertie County Emergency Services

PO Box 530

106 Dundee St

Windsor, NC 27983

Phone: 252-794-5302

Fax: 252-794-5327

Inclement Weather Hotline: 252-794-5345

Office Hours: 8:30am-5:00pm

Exceptions: Holidays and Inclement Weather

Askewville Rescue Squad

PO Box 88

511 White Oak Rd.

Windsor, NC 27983

Bertie County Rescue Squad

PO Box 74

208 Granville St.

Windsor, NC 27983

Colerain Rescue Squad

PO Box 397

Colerain, NC 27924

Lewiston-Woodville Rescue Squad

PO Box 395

Lewiston-Woodville NC 27849

Public Health Department:

Albemarle Regional Health Services (ARHS) is a regional Public Health agency in rural, northeastern NC serving the eight counties of Bertie, Camden, Chowan, Currituck, Gates, Hertford, Pasquotank and Perquimans. ARHS has provided over 75 years of service to the Albemarle Region.

The regional Public Health agency provides the following healthcare services: immunizations, diabetes care and management, women’s preventive health, maternal health, including high-risk perinatal services, pregnancy care management, child health, WIC and nutrition counseling, pediatric asthma management, services for people with communicable diseases including STDs, HIV disease specialty clinic, adult day health care, behavioral health, children’s developmental services, Public Health preparedness and response, public information, and interpreter assistance.

Albemarle Regional Health Services also administers the following programs: Environmental Health, Regional Landfill, Solid Waste Authority and Recycling, LifeQuest Worksite Wellness, and the Inter-County Public Transportation Authority. The more than 29 ARHS operational sites are completely networked by technology to increase the efficiency and effectiveness of service delivery across the agency.

Three Rivers Healthy Carolinians

202 W. Hicks Street

Edenton, NC 27932

252-482-6003

Website: <http://www.arhs-nc.org/services/health/healthy-communities/carolinians/trhc/>

Bertie County Health Department

102 Rhodes Ave.

Windsor, NC 27983

Phone: 252-794-5322

Bertie County Rural Health Associates

104 Rhodes Ave

PO Box 628

Windsor, NC 27983

252-794-2117

252-794-3042

Vidant Bertie Hospital

1403 South King Street

Windsor, NC 27983

Phone: 252-794-6600

Vidant Bertie Hospital offers many different services such as behavioral & mental health, children's services, diagnostic imaging, emergency services, family medicine, heart and vascular care, home health, hospice care, mammography, orthopedics, pain management, radiology, rehabilitation, specialty services, stroke care, surgical services, wellness & prevention, women's care, and wound care.

Vidant Bertie Hospital offers a variety of events, support groups, and classes. For instance: breastfeeding support groups, sibling class, childbirth class, cancer services support groups, diabetes support groups, Vidant rehabilitation support groups, new grief support groups, and others.

Cashie Medical Center (Located in Vidant Bertie Hospital)

PO Box 509

1403 S. King St

Windsor, NC 27983

252-794-6775

Vidant Family Medicine – Windsor (Located in Vidant Bertie Hospital)

1403 S King St.

PO Box 509

Windsor, NC 27983

252-794-6775

NC Cooperative Extension –Bertie County

204 South Queen St.

PO Box 280

Windsor, NC 27983

Monday through Friday: 8am-5pm

Website: <https://bertie.ces.ncsu.edu/>

Dentist Offices

Wayne Atkisson Pa

402 Sterlingworth St.

Windsor, NC 27983

Phone: 252-794-2053

Hours: Monday, Tuesday, Thursday 8am-4pm

Friday 8am-12pm

Closed: Wednesday, Saturday and Sunday

Albemarle Dental Associates

103 Mark Dr

Edenton, NC 27932

Phone: 252-482-5131

Website: <http://www.albemarledental.com/>

Marshburn David Pa

1025 Hamsway Dr.

Williamston, NC 27892

Phone: 252- 792-7011

Other Resources

<http://healthync.org/assets/media/1395797188-ChronicDiseaseManagementResourceDirectory.pdf>

Eat Smart Move More Weigh Less

A weight management course offered every February in Bertie County.

Contact: Mary Morris, Bertie County Extension Agency

Phone: 252-794-5319

Website: <http://www.eatsmartmovemorenc.com/>

Community Care Plan of Eastern Carolina (CCPEC)

Hypertension Self-Management Program, Living Healthy with Chronic Disease, and Living Healthy with Diabetes

2410 Stantonsburg Road

Greenville, NC 27835

Contact: Janet Tillman

Phone: 252-916-7168

Email: janet.tillman@vidanthealth.com

Tobacco Cessation

QuitlineNC

NC Dept. of Health and Human Services

Phone: 1-800-QUIT-NOW or 1-800-784-8669

Website: <https://www.quitlinenc.com/>

Federally-Qualified Health Centers

Colerain Primary Care (Roanoke-Chowan Community Health Center)

109 W River St.

Colerain, NC 27924

Phone: 252-356-2404

Lewiston Community Health Center

307 S. Main St.

Lewiston-Woodville, NC 27849

Phone: 252-348-2545

Adult Care Facilities

<https://www2.ncdhhs.gov/dhsr/acls/star/results.asp>

<https://www2.ncdhhs.gov/dhsr/data/ahlist.pdf>

A Sharpe Haven

222 Connarista Road

Kelford, NC 27847

Cherry's Family Care Home #3

106 Harmon Street

Aulander, NC 27805

Hawthorn House

1025 Highway 45 North

Merry Hill, NC 27957

Help Center

340 School Road

Windsor, NC 27983

Moore's Family Care

154 Hwy NC 42

Powellsville, NC 27967

Pathways

743 Charles Taylor Road

Aulander, NC 27805

Pathways II

812 Charles Taylor Road

Aulander, NC 27805

Pathways III

1215 Charles Taylor Road

Aulander, NC 27805

Pathways IV

410 Commerce Street

Aulander, NC 27805

Virginia's Place

1517 Governor's Road

Windsor, NC 27983

Phone: 252-348-2007

Fax: 252-348-2050

Windsor House

336 South Rhodes Avenue

Windsor, NC 27983-9611

(252)794-9333 / Fax: (252) 79-5178

Winston Gardens

205 Watson Street

Windsor, NC 27983

(252)484-1048

Fax: (252)484-1096

Nursing Homes/Homes For the Aged

Brian Center Health and Rehabilitation - Windsor

1306 S King St.

Windsor, NC 27983

252-794-5146

Three Rivers Health and Rehabilitation

1403 Conner Dr.

Windsor, NC 27983

252-794-4441

<http://www.libertyhealthcareandrehab.com/threerivers/>

Alternatives to Institutional Care

Eastern Home Health Care

820 US Highway 13 and 17 S

Windsor, NC 27983

252-794-1888

Home Life Care Inc.

10006 N. King St.

Windsor, NC 27983

Phone: 252-794-5999

Fax: 252-794-8566

Email: info@homelifecareinc.com

<http://www.homelifecareinc.com/locations.htm>

New Destiny Home Care Inc.

913 US Hwy 13 and 17 S

Windsor, NC 27983

252-794-2368

Positive Step Inc. - Home Care Agency

102 E. Granville St.

Windsor, NC 27983

252-794-2561

Quality Home Staffing, Inc.

PO Box 490

228 US 13 South Bypass, Suite 1

Windsor, NC 27983

252-794-4227

Fax: 252-794-4419/ www.qualityhomestaffing.com

Sure Care Health Services, Inc.

3804 Governors Road

Kelford, NC 27847

252-344-9381

Vidant Home Health and Hospice

304 W. Granville St.

Windsor, NC 27983

252-794-2622

Trillium

Trillium

Manages Medicaid for mental health, substance use/abuse, and intellectual/development disability services in a 27-county area. Trillium has a network of agencies with licensed therapists to offer services and support to people in need within their community.

Crisis Care & Service Enrollment: 1-877-685-2415

Email: info@trilliumnc.org

Website: <http://www.trilliumhealthresources.org/>

Trillium Access Point

Anonymous, evidence-based, self-conducted screenings online 24hrs a day for depression, bipolar disorder, post-traumatic stress disorder, eating disorders, and alcohol use disorders.

Available in English and Spanish, provides local referral information, and includes learning and resource section.

Website: <http://www.trilliumhealthresources.org/en/Community-Partnerships/Trillium-Initiatives/Access-Point/>

Mental Health Facilities

<http://www.northcarolinahealthnews.org/wp-content/uploads/2012/05/mhllist.pdf>

Bertie Camden

Solid Foundation Facilities, Inc.

301 West Camden Street

Windsor, NC 27983

252-794-6544

Bertie County Day Reporting Center

128 East Granville Street

Windsor, NC 27983

252- 794-2533

Cherry's Group Home #1

Alphonso Cherry

108 Harmon Street

Aulander, NC 27805

252-345-1353

Corday Place

222 Ward Road

Windsor, NC 27983

252-794-2066

Dameron Home

612 Blount Street

Windsor, NC 27983

252-794-5234

Deacon's Dan's Place

222-C Ward Road

Windsor, NC 27983

252-794-9486

East Creek

222-B Ward Road
Windsor, NC 27983
252-794-3392

Farmwood

220 Ward Road
Windsor, NC 27983
252-794-4743

Hillcrest Place

110 Hillcrest Drive
Windsor, NC 27983
252-794-4526

Kasheena House

138 Connaritsa Road
Kelford, NC 27847
252-348-3400

Mary Gladys

450 US 13-17 South
Windsor, NC 27983
252-794-2386

Rachel's House Day Treatment

1212 Charles Street

Windsor, NC 27983

252-794-8503

Residential Loving Care #2 Inc.

106 Orange Lane

Windsor, NC 27983

252-794-2044

Uplift Academy

416 Ghent Street

Windsor, NC 27983

252-794-3832

Visions In View, Inc.

2041 US 17 North

Merry Hill, NC 27957

252-482-2782

West Creek

220-B Ward Road

Windsor, NC 27983

252-794-4610

Windsor House

340 School Road

Windsor, NC 27983

252-794-5234

Windsor Psychosocial Rehabilitation

117 E. Granville Street

Windsor, NC 27983

252-794-1500

Xavier House

814 Governors Road

Windsor, NC 27983

252-794-5234

Other Healthcare Resources

HealthSteps

PO Box 629

Edenton, NC 27932

252-482-8451

Reclamation Family Services: Counseling and Mental Health

306 Winston Lane

Windsor, NC 27983

252-794-3556

Dialysis Centers

BMA of Windsor

1421 B South Kind St

Windsor, NC 27983

252-794-5041

DaVita Edenton Dialysis

312 Medical Arts Dr.

Edenton, NC 27932

1-800-424-6589

Fax: 252-482-0863

Reference #: 3907

<https://www.davita.com/find-a-dialysis-center/davita-edenton-dialysis/312-medical-arts-dr-edenton-27932-8607/id/3907/dva/1>

Elizabeth City Dialysis

1840 W City Dr.

Elizabeth City, NC 27909

866-544-6741 ext. 2908

Farmers Markets and Roadside Stands

Website: <http://healthync.org/>

Windsor Super Farmers Market

112 W Water St.

Windsor, NC 27983

Phone: 252-794-2001

Open May through September

Perry's Produce

Corner of NC 45 and HWY 17

Merry Hill, NC

Phone: 252-287-0441

May - October

Edenton Farmers Market

730 N. Granville St
Edenton, NC
Phone: 252-209-4792

W.R. Bunch Produce Stand 1

2833 Rocky Hock Rd
Edenton, NC 27932
Phone: 252-312-5855
May - September

W.R. Bunch Produce Stand 2

359 Yeopim Rd and 32 South
Edenton, NC 27932
Phone: 252-312-5855
May – September

Winborne & Son Farms

3442 Rocky Hock Road
Edenton, NC 27932
Phone: 252-333-6181/252-221-4204
July 1 - Oct 31, Mon-Sun 8am-6pm

Hare Family Farm (formerly Olan Path) CSA

147 Mexico Rd
Edenton, NC 27932
Phone: 252-370-0890

Pigs Plus Farm

November – January

311 Evans-Bass Rd

Edenton, NC 27932

252-333-6290

Triple B. Farms

Corner of Ryland Rd. and Sign Pine Rd.

Tyner, NC 27980

Phone: 252- 333-6290

Griffin’s Collard Stand

1800 W. Queen St.

Edenton, NC 27932

Martin County Farmers Market

4001 W. Main Street Ext

Williamston, NC 27892

Opens in June

Recreational Facilities

Bertie County Parks & Recreation

PO Box 530

101 W. School St.

Windsor, NC 27983

Phone: 252-794-5363

Fax: 252-794-5362

Website: <http://www.co.bertie.nc.us/departments/rec/rec.html>

Hours: 8:30am-5:00pm

Exceptions: Holidays & Inclement weather

Walking Trails, Senior Citizens Activity Calendar, Senior Bowling Trips, Senior Exercise Class, Spade Tournament, Soccer Registration

Livermon Park & Mini-Zoo

Animals, picnic pavilions, playground equipment, Cashie Wetland Walk, canoes, paddles, and life vests

102 N. York Street

Windsor, NC 27983

252-794-5553

Email: livermonpark@gmail.com

Website: <http://www.windsorbortiechamber.com/16.html>

Summer Hours:

Monday-Friday 8am-8pm

Saturday-Sunday 9am-8pm

Winter Hours:

Monday-Sunday 9am-5pm

Historic Hope Plantation

Restored home of former NC governor and offers insights into late 18th and 19th century rural life in eastern NC.

132 Hope House Road

Windsor, NC 27983

252-794-3140

Website: <http://www.hopeplantation.org/>

Roanoke Cashie River Center

112 West Water Street

Windsor NC, 27983

252-794-2001

Fax: 252-794-5202

Email: pfs@beachlink.com

Facebook: https://www.facebook.com/Roanoke-Cashie-River-Center-165881840104344/?fref=ts&ref=br_tf

Cashie Wetlands Walk

Boardwalk in natural wetland environment, observation deck, and canoes available

101 York St.

Windsor, NC 27983

919-794-5553

Fax: 919-794-3122

Email: windsorchamber@coastalnet.com

River Rambling Educational Boat Tours

Take a ride on the Cashie River while learning about the history and habitats of the surrounding area. Offered by the Roanoke Cashie River Center.

Call for reservations. River Rambling runs April through October.

Neal Moyer

Roanoke Cashie River Center

112 W. Water St.

Windsor, NC 27983

252-794-2001

Sans Souci Ferry

Woodward Rd & Sans Souci Rd at the Cash

Windsor, NC 27983

252-794-4277

Fax: 252-794-5070

Roanoke River National Wildlife Refuge

114 W Water St.

Windsor, NC 27983

252-794-3808

Email: roanokeriver@fws.gov

Website: http://www.fws.gov/refuge/roanoke_river/

Davis Ballpark

Windsor, NC 27983

Windsor Recreational Park

103 N. York St.

Windsor, NC 27983

252-794-5553

Windsor Municipal Park

128 N. King St.

Windsor, NC 27983

252-794-2331

Bertie County Arts Council

124 S. King St.

Windsor, NC 27983

252-794-9402

Facebook Page: <https://www.facebook.com/BertieCountyArtsCouncil/>

YMCA

1102 N. King St.

Windsor, NC 27983

252-794-9622

Cashie Golf & Country Club

132 Country Club Rd.

Windsor, NC 27983

252-794-4942

Bertie County Soil & Water

106 Dundee St. #211

Windsor, NC 27983

252-794-5350

Bertie County Animal Control

106 Dundee St.

Windsor, NC 27983

252-794-5340

Website: <http://www.co.bertie.nc.us/>

Bertie County Humane Society

217 County Farm Road

Windsor, NC 27983

252-325-3647

Website: <http://bertiecountyhumanesociety.org/>

Chapter 10 Community Prioritization Process

A vital phase of the Community Health Needs Assessment (CHNA) involves reporting out to the communities being served and to those residents who participated in the data gathering process. Community health presentations were held to provide the opportunity for community residents and key stakeholders to learn about the health-related primary and secondary data from the 2021 CHNA process. The data was presented by ARHS, Sentara Albemarle Medical Center, and Vidant Health through presentations geographically dispersed throughout the Albemarle Region.

The presentations were widely promoted through email invitations, newspaper announcements, the ARHS website, social media outlets, and by partnering organizations in an effort to bring the community together and strengthen an environment where the individuals were empowered in the decisions highlighted through the prioritization process.

Below is the list of presentations:

Tuesday, November 2, 2021:

Presentation via Zoom for Hertford County

Wednesday, November 10, 2021:

Presentation via Zoom for Gates County

Friday, November 19, 2021:

ECPC Senior Center (Camden, Currituck, Pasquotank, & Perquimans Counties)

Friday, December 2, 2021:

Presentation via Zoom for Bertie and Chowan Counties

In addition to Community Members, Community Agencies in Attendance Include:

Albemarle Alliance for Children and Families

Behavioral Health

Board of Education/School System

City Government

Community College/University

Community Health Centers

Cooperative Extension

County Government

County Commissioners

Hospital Foundations

Law Enforcement

Local Health Departments

Local Hospitals

Local Treatment Centers

NC Partnership for Public Health

Rescue/Emergency Management Services

Chowan/Perquimans Smart Start

United Way

The community health needs prioritization process involved a synthesis of many sources of secondary data, community surveys, and the results of the Healthy North Carolina 2030 Indicator Rankings. After reviewing the CHNA presentation for each county the opinions of community stakeholders and organizations were considered in the analysis of the data and prioritization process. The highest ranked topics were distilled from and compared across these sources to create a shortened list of priorities that was representative of the community and could be acted upon as a community collective.

Considerations set forth in the Centers for Disease Control and Prevention's (CDC's) Healthy People 2030 document factors were considered in the development of the CHNA and in the selection of priority needs areas for Pasquotank County. These factors include the following:

- Consideration of upstream risk factors and behaviors in addition to disease outcomes
- High-priority health issues that have a big impact on specific segments of the community,
- Risk and contributing factors that can be modified in the short term such as through evidence-based interventions and strategies,
- Consideration of SDOH, health disparities, and health equity, and
- Consideration of additional data sources that should be included to inform health priorities.

After discussions, participants were then asked to use the priority list that was developed for each county to vote on their top three priority issues. After the post-presentation results were collected, the health issues were tallied.

For Three Rivers Healthy Carolinians (Bertie and Chowan counties) those were, in no particular order:

- Healthy Lifestyle Behaviors
- Access to Healthcare

- Mental Health/Substance Misuse

It is important to note that these three priorities have been selected for a diverse two-county coalition, so certain priorities may be more applicable to some counties than to others.

CHNA References

Social and Economic Factors	Source	Years
Population	U.S. Census Bureau ACS 5-year Estimate	2015-2019
Projected Population	NC Office of State Mgmt & Budget Pop Projections and US Census	2021
General population characteristics	Census Population Estimates	2015-2019
Education	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Employment	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Income	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Minority Populations	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Military Population	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Veteran Population	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Birth Rate	NC State Center for Health Statistics	2016-2019
Poverty (% of population with income <200% of poverty level)	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Poverty by race and ethnicity	U.S. Census Bureau ACS 5-year Estimate	2013-2019
Children in poverty	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Older adults in poverty	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Disabled people in poverty	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Housing – Median monthly costs	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Housing – median monthly costs in surrounding counties	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Employment by industries	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Food Insecurity	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Percent of population below 200% by zip code	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Educational attainment	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
High School dropout rate (% dropout per 100 students)	N.C. Dept of Public Instruction	2016-2020
High School suspension rate (% suspension per 100 students)	N.C. Dept of Public Instruction	2019-2020
Transportation (% of workers commuting; % of workers drive alone)	U.S. Census Bureau, ACS 5-year Estimate	2015-2019
Tier Designation (County Distress Ranking)	N.C. Department of Commerce	2021

Data Sources and References for ENC Health Community Health Assessment (2020-2021)

Health Outcomes	Source	Years
Life expectancy	NC-DHHS State Center for Health Statistics	2014-2018
Leading causes of death	NC-DHHS State Center for Health Statistics / CDC, NCHS	2019
Fetal deaths and fetal death rates	NC-DHHS State Center for Health Statistics	2014-2018
Leading causes of injury death, hospitalization, and ED visits	NC-DHHS, Injury & Violence Prevention Branch	2016-2019
Communicable diseases	NC-DHHS State Center for Health Statistics	2018
Clinical Care	Source	Years
Population per primary care physicians	Cecil G. Sheps, Center for Health Services Research, UNC	2017
Physicians per population by county	Cecil G. Sheps, Center for Health Services Research, UNC	2019
Health Insurance Coverage	U.S. Census Bureau ACS 5-year Estimate	2015-2019
Government Health Insurance Only	U.S. Census Bureau ACS 5-year Estimate	
Health Behavior Factors	Source	Years
BRFSS	NC-DHHS State Center for Health Statistics	2018
Health ENC Primary Data Questions – Quality of Life, Behavior	Health ENC Report	2020-2021
Healthy NC, 2030	NCIOM / NC DHHS	2020
County Health Rankings	Robert Woods Johnson Foundation	Varies

Community and Safety Factors	Source	Years
Crime and Safety	N.C. State Bureau of Investigations, uniform crime report	2016-2019
Juvenile Crime (% Undisciplined and % Delinquent per 1,000)	NC. Dept. of Public Safety, juvenile justice county Databook	2017-2020
Incarceration (Rate per 100,000 population)	N.C. Dept. of Public Safety	2019-2020
Child Abuse (Reports per 1000, age 0-18 years)	Ann E. Casey Foundation Kids Count Data Center	2015-2018
Severe housing problems	Robert Woods Johnson County Health Rankings	2013-2017

Note: This list is provided as a resource for data and information and may not include all of the above references noted in the slide set.

APPENDICES

Appendix A Community Survey Tool

Appendix B Healthy North Carolina (HNC 2030) State and Local Data

Appendix C Additional Secondary Data for the Community Health Assessment

Community Health Needs Assessment 2021

PID 1535

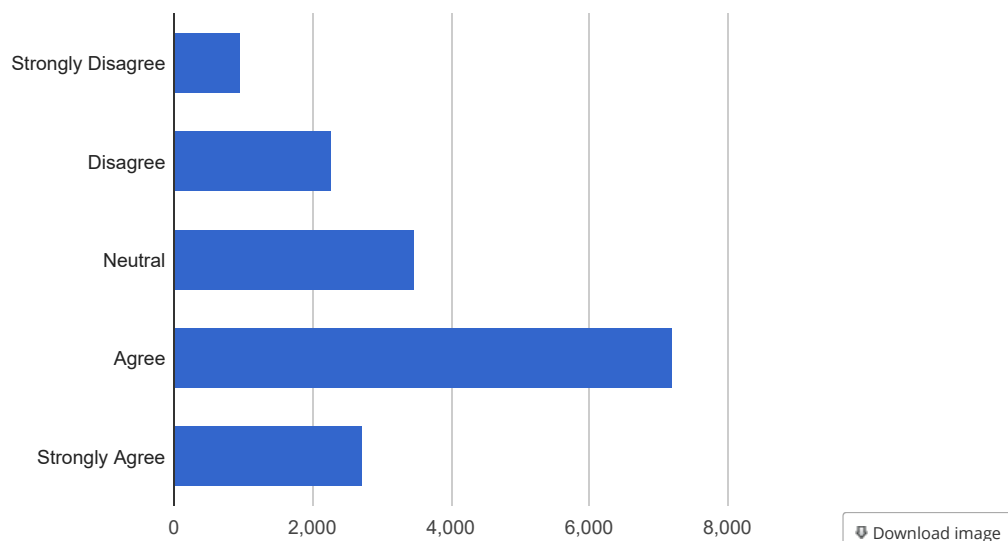
Data Exports, Reports, and Stats

Bertie County

There is good healthcare in my county. *(healthcare)*

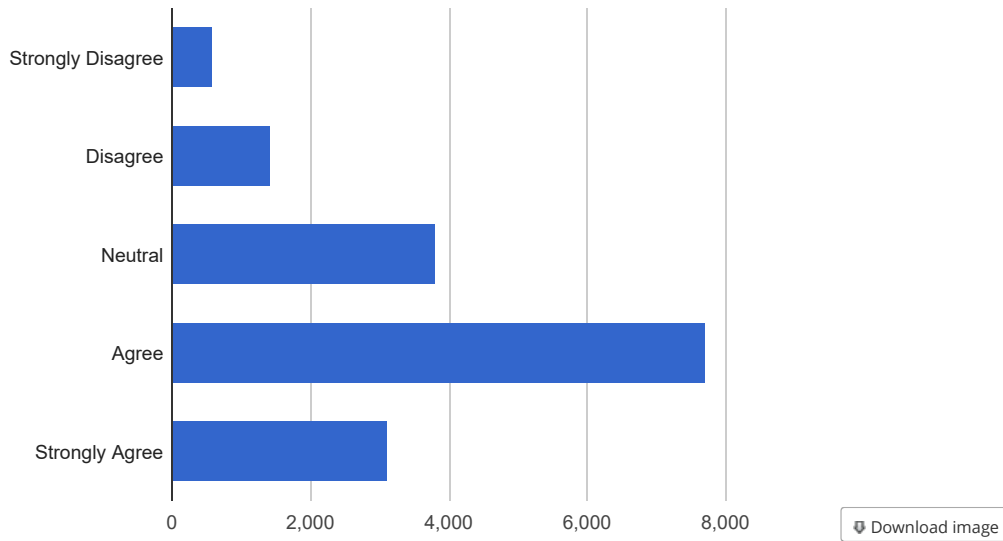
Total Count (N)	Missing*	Unique
369	3 (0.8%)	5

Counts/frequency: Strongly Disagree (10, 2.7%), Disagree (27, 7.3%), Neutral (64, 17.3%), Agree (199, 53.9%), Strongly Agree (69, 18.7%)

This county is a good place to raise children. *(raise_children)*

Total Count (N)	Missing*	Unique
369	3 (0.8%)	5

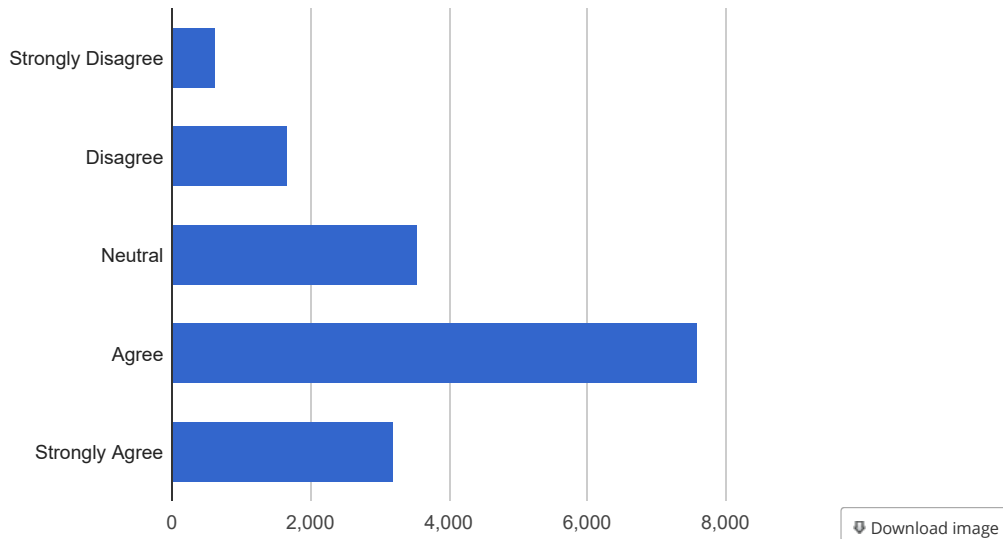
Counts/frequency: Strongly Disagree (19, 5.1%), Disagree (53, 14.4%), Neutral (113, 30.6%), Agree (135, 36.6%), Strongly Agree (49, 13.3%)



This county is a good place to grow old. (*grow_old*)

Total Count (N)	Missing*	Unique
369	3 (0.8%)	5

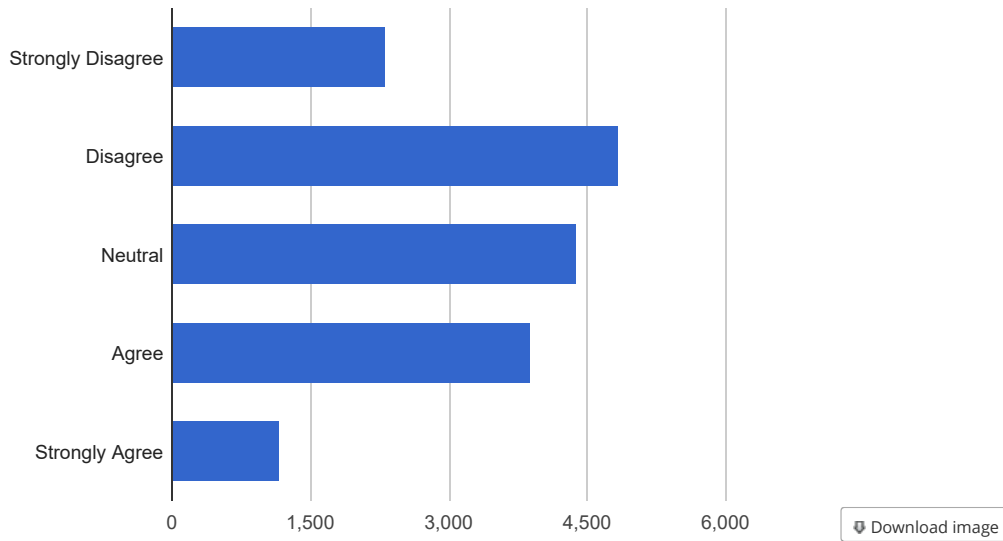
Counts/frequency: Strongly Disagree (17, 4.6%), Disagree (26, 7.0%), Neutral (80, 21.7%), Agree (188, 50.9%), Strongly Agree (58, 15.7%)



There is plenty of economic opportunity in this county. (*econ_opp*)

Total Count (N)	Missing*	Unique
369	3 (0.8%)	5

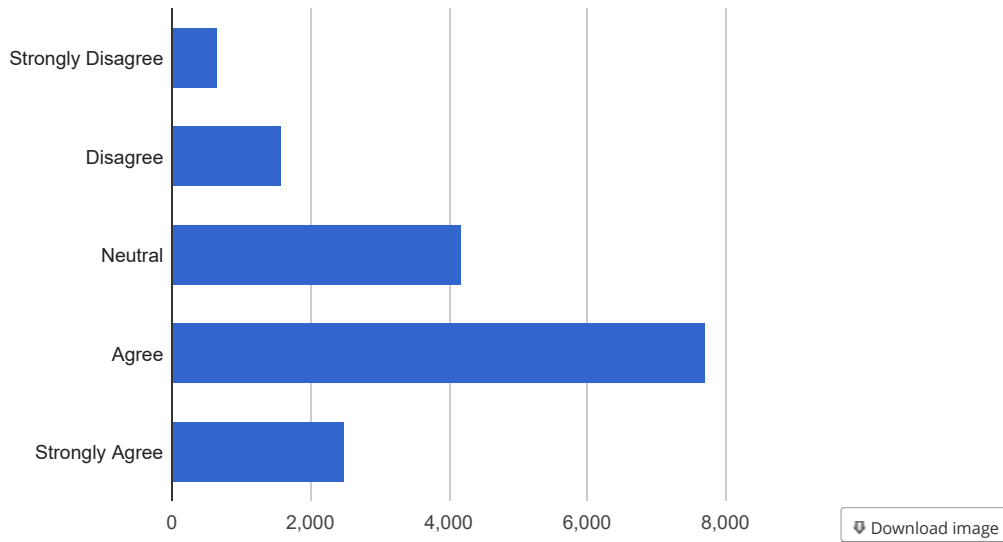
Counts/frequency: Strongly Disagree (82, 22.2%), Disagree (132, 35.8%), Neutral (73, 19.8%), Agree (64, 17.3%), Strongly Agree (18, 4.9%)



This county is a safe place to live *(safe)*

Total Count (N)	Missing*	Unique
369	3 (0.8%)	5

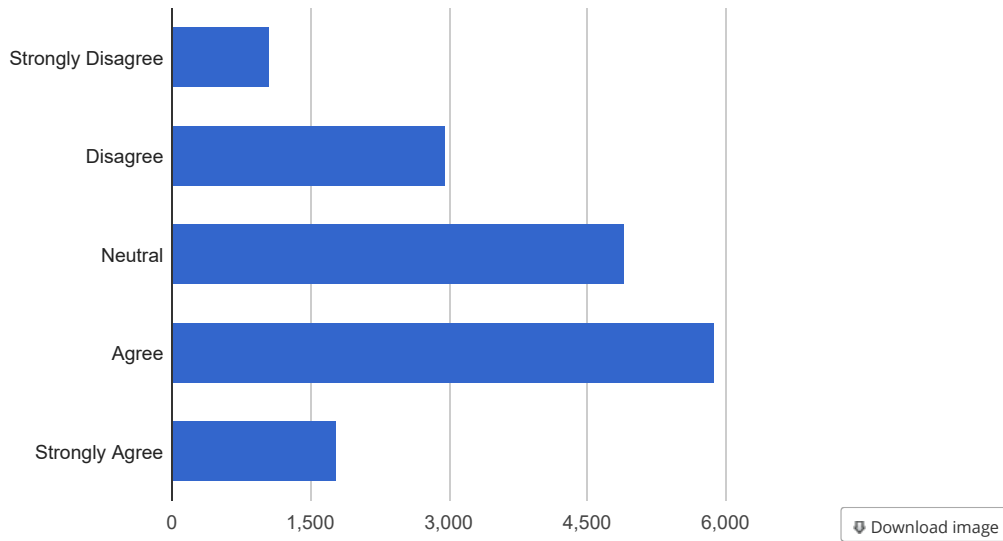
Counts/frequency: Strongly Disagree (15, 4.1%), Disagree (44, 11.9%), Neutral (108, 29.3%), Agree (164, 44.4%), Strongly Agree (38, 10.3%)



There is plenty of help for people during times of need in this county. *(help)*

Total Count (N)	Missing*	Unique
369	3 (0.8%)	5

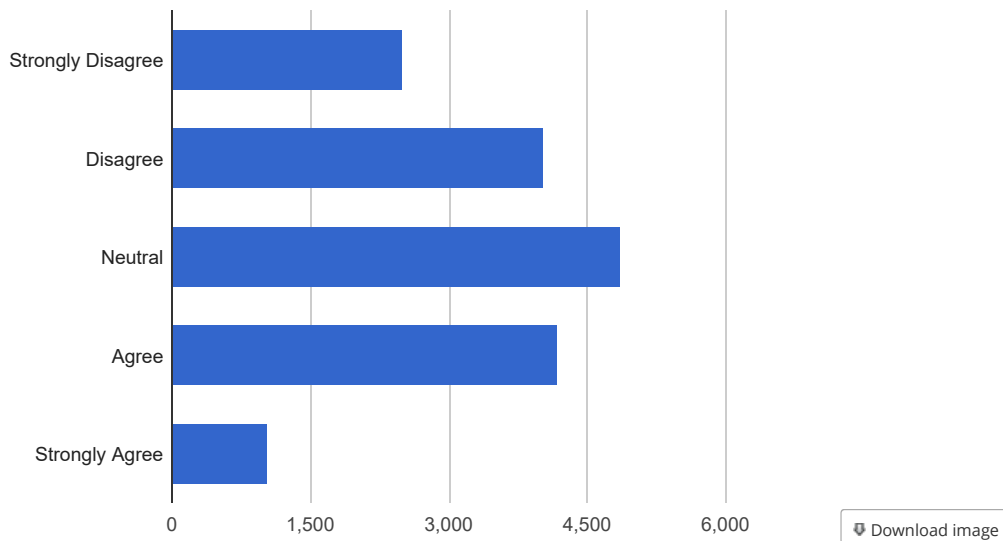
Counts/frequency: Strongly Disagree (23, 6.2%), Disagree (73, 19.8%), Neutral (115, 31.2%), Agree (117, 31.7%), Strongly Agree (41, 11.1%)



There is affordable housing that meets the needs in this county *(affordable)*

Total Count (N)	Missing*	Unique
369	3 (0.8%)	5

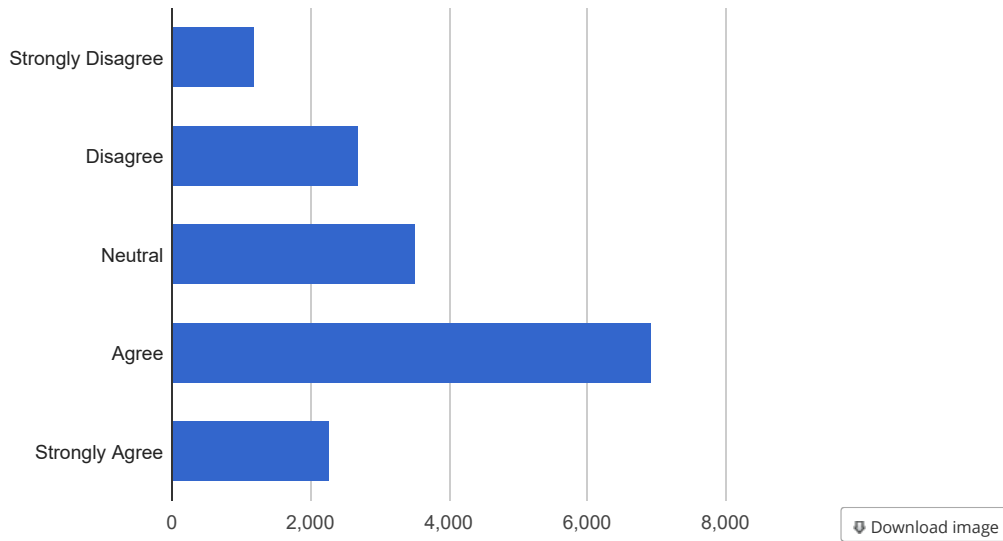
Counts/frequency: Strongly Disagree (34, 9.2%), Disagree (90, 24.4%), Neutral (102, 27.6%), Agree (117, 31.7%), Strongly Agree (26, 7.0%)



There are good parks and recreation facilities in this county. *(parks)*

Total Count (N)	Missing*	Unique
369	3 (0.8%)	5

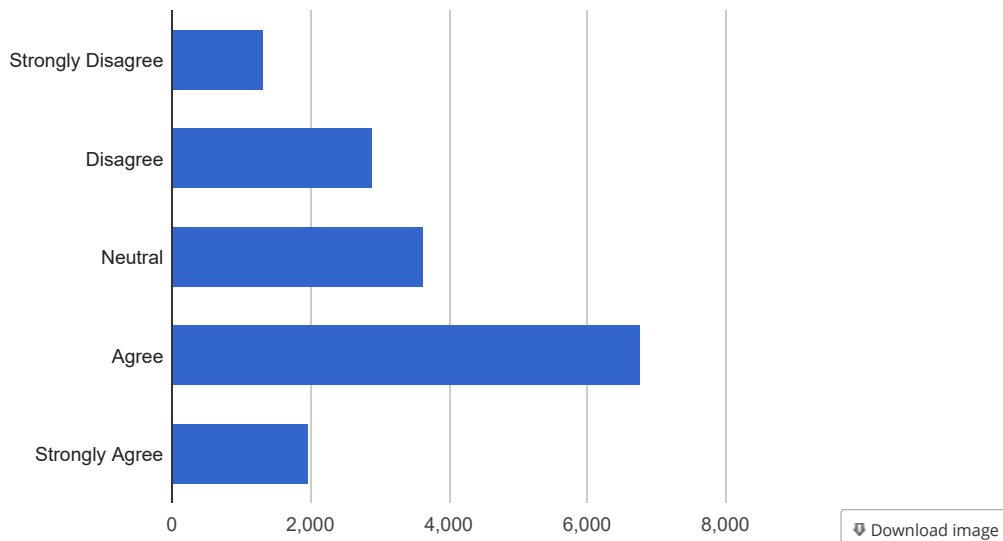
Counts/frequency: Strongly Disagree (37, 10.0%), Disagree (87, 23.6%), Neutral (93, 25.2%), Agree (120, 32.5%), Strongly Agree (32, 8.7%)



It is easy to buy healthy foods in this county. *(healthyfood)*

Total Count (N)	Missing*	Unique
368	4 (1.1%)	5

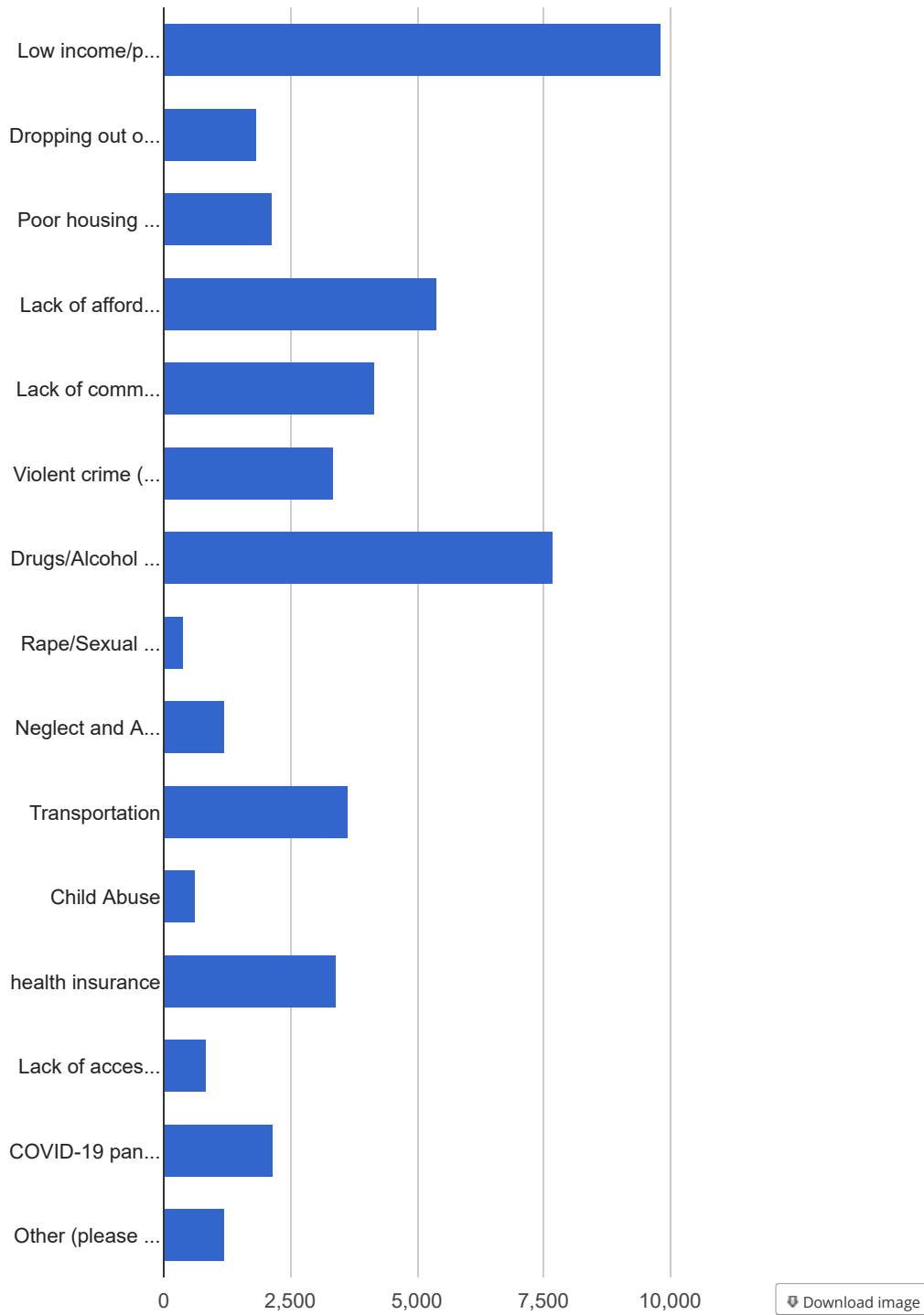
Counts/frequency: Strongly Disagree (29, 7.9%), Disagree (87, 23.6%), Neutral (84, 22.8%), Agree (139, 37.8%), Strongly Agree (29, 7.9%)



Please select the top 3 issues which have the highest impact on quality of life in this county. *(topissues)*

Total Count (N)	Missing*	Unique
368	4 (1.1%)	15

Counts/frequency: Low income/poverty (277, 75.3%), Dropping out of school (46, 12.5%), Poor housing conditions (60, 16.3%), Lack of affordable housing (77, 20.9%), Lack of community resources (109, 29.6%), Violent crime (murder, assault) Theft (100, 27.2%), Drugs/Alcohol (Substance Use) (142, 38.6%), Rape/Sexual Assault (13, 3.5%), Neglect and Abuse (27, 7.3%), Transportation (70, 19.0%), Child Abuse (9, 2.4%), health insurance (57, 15.5%), Lack of access to enough food (15, 4.1%), COVID-19 pandemic (55, 14.9%), Other (please specify) (20, 5.4%)



[Download image](#)

Other (topthreeother1)

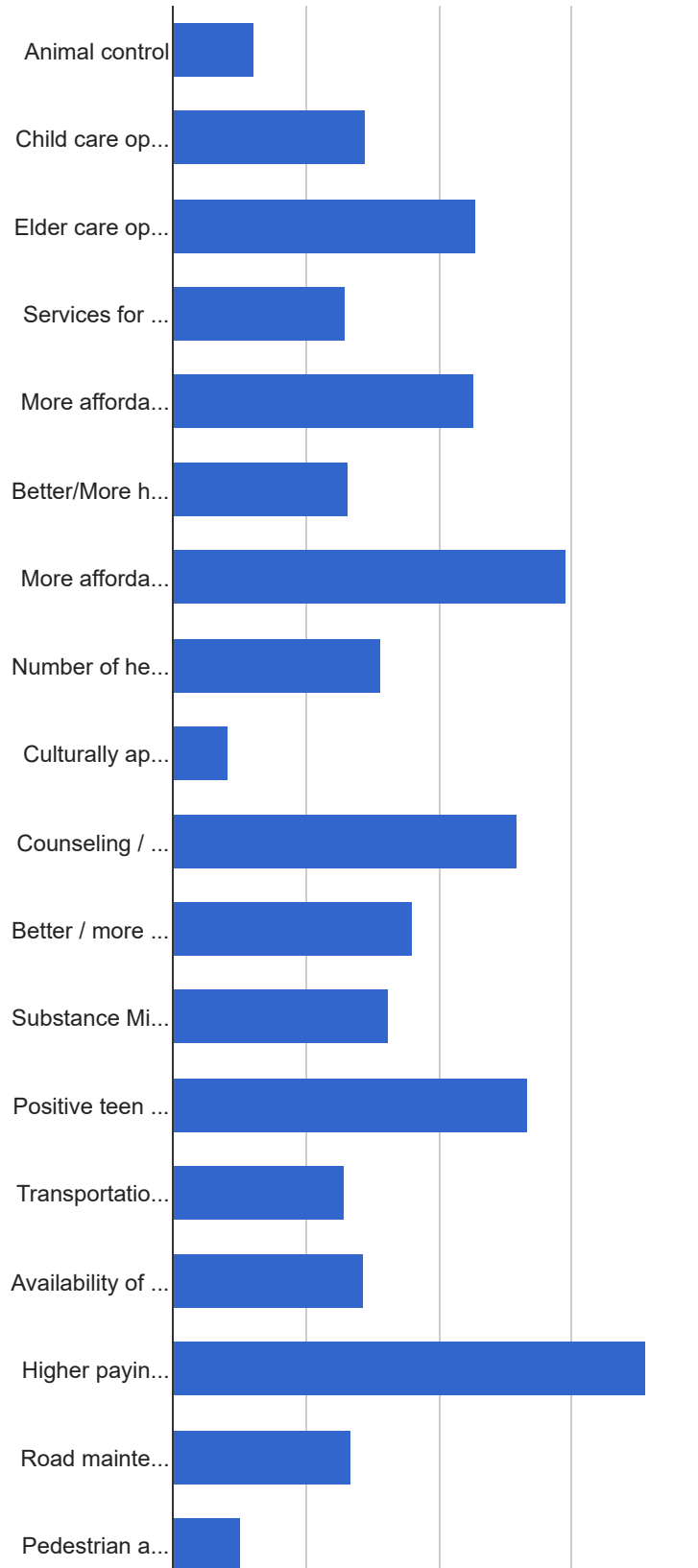
Total Count (N)	Missing*
15	357 (96.0%)

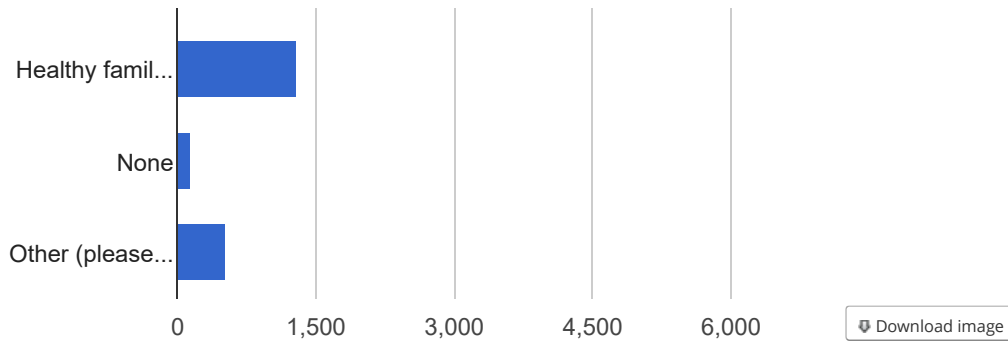
Please select what you feel are the top 3 services that need the most improvement in your community. (improvements)

Total Count (N)	Missing*	Unique

368	4 (1.1%)	21
-----	--------------------------	----

Counts/frequency: Animal control (15, 4.1%), Child care options (73, 19.8%), Elder care options (76, 20.7%), Services for disabled people (46, 12.5%), More affordable health services (60, 16.3%), Better/More healthy food choices (44, 12.0%), More affordable / better housing (67, 18.2%), Number of healthcare providers (43, 11.7%), Culturally appropriate health services (6, 1.6%), Counseling / mental and behavioral health / support groups (66, 17.9%), Better / more recreational facilities (parks, trails, community centers) (85, 23.1%), Substance Misuse Services/ Recovery Support (46, 12.5%), Positive teen activities (91, 24.7%), Transportation options (54, 14.7%), Availability of employment (66, 17.9%), Higher paying employment (141, 38.3%), Road maintenance (49, 13.3%), Pedestrian and cyclist road safety (3, 0.8%), Healthy family activities (33, 9.0%), None (3, 0.8%), Other (please specify) (12, 3.3%)





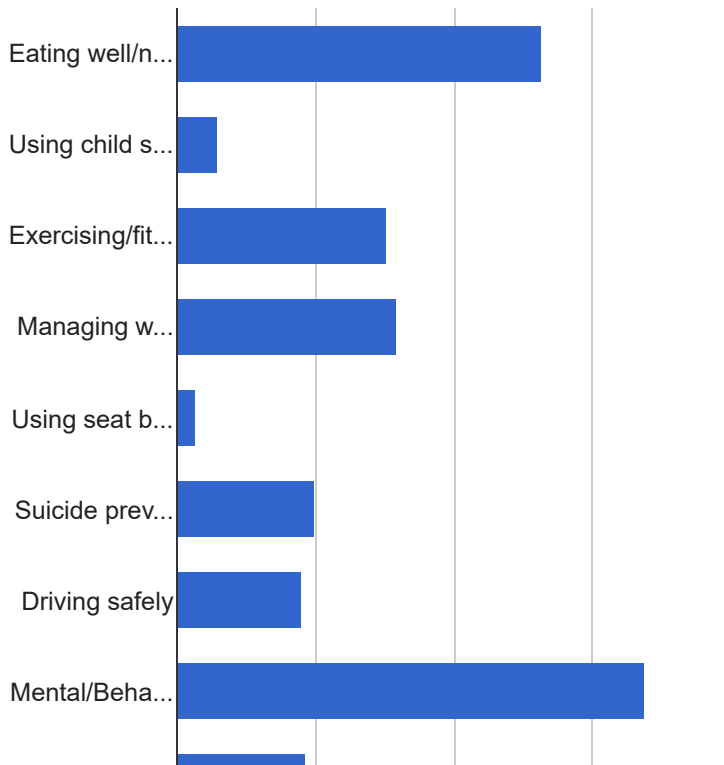
Other (*improvement_other*)

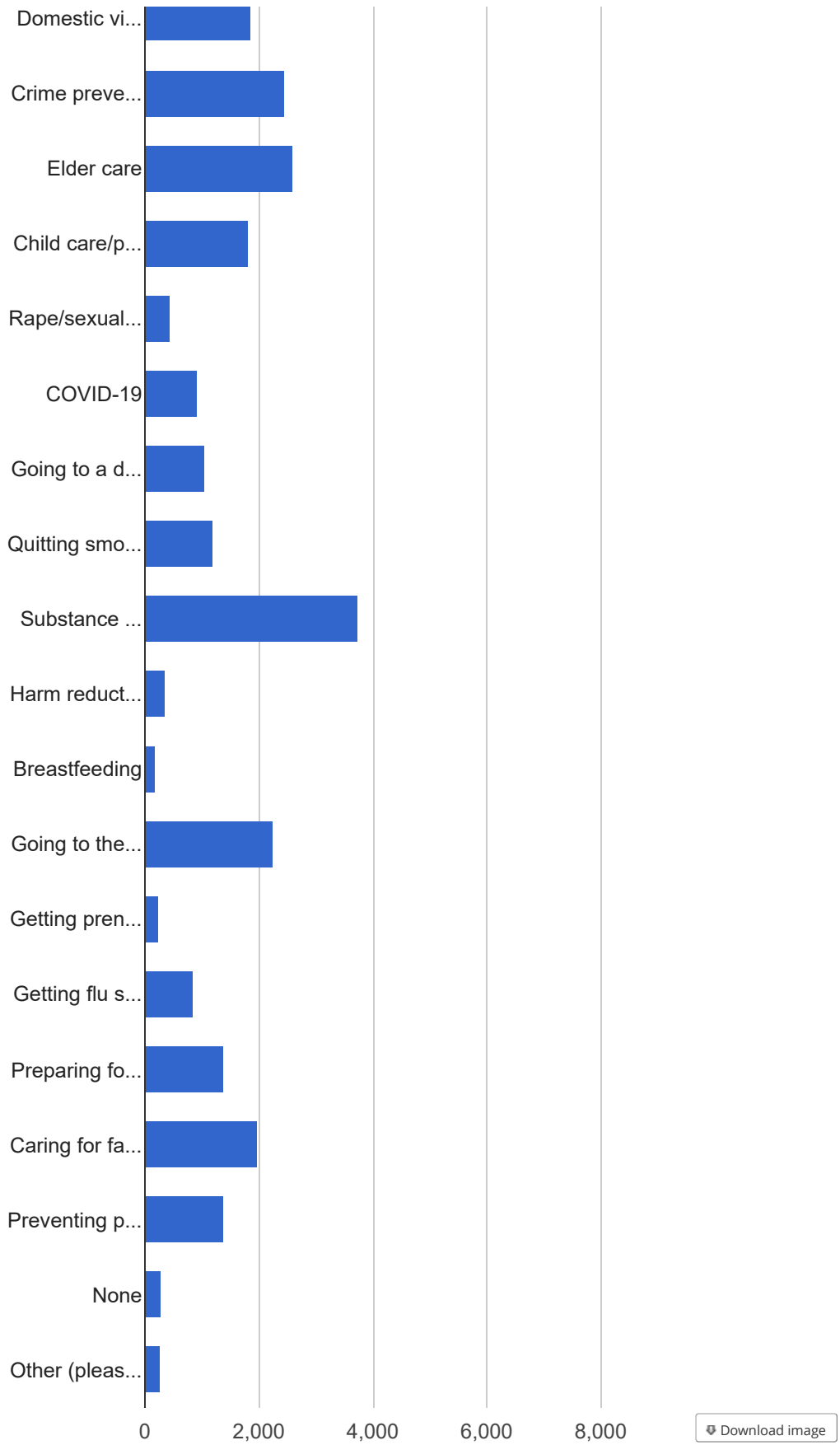
Total Count (N)	Missing*
9	363 (97.6%)

Please select the top 3 health behaviors that you feel people in your community need more information about. (*health_behavin*)

Total Count (N)	Missing*	Unique
369	3 (0.8%)	27

Counts/frequency: Eating well/nutrition (141, 38.2%), Using child safety car seats (17, 4.6%), Exercising/fitness (92, 24.9%), Managing weight (98, 26.6%), Using seat belts (9, 2.4%), Suicide prevention (32, 8.7%), Driving safely (36, 9.8%), Mental/Behavioral Health (120, 32.5%), Domestic violence prevention (52, 14.1%), Crime prevention (74, 20.1%), Elder care (48, 13.0%), Child care/parenting (47, 12.7%), Rape/sexual abuse prevention (8, 2.2%), COVID-19 (23, 6.2%), Going to a dentist for check-ups/preventive care (16, 4.3%), Quitting smoking/tobacco use prevention (34, 9.2%), Substance misuse prevention (57, 15.4%), Harm reduction (7, 1.9%), Breastfeeding (4, 1.1%), Going to the doctor for yearly check-ups and screenings (56, 15.2%), Getting prenatal care during pregnancy (6, 1.6%), Getting flu shots and other vaccines (11, 3.0%), Preparing for an emergency/disaster (11, 3.0%), Caring for family members with special needs / disabilities (36, 9.8%), Preventing pregnancy and sexually transmitted diseases (safe sex) (35, 9.5%), None (6, 1.6%), Other (please specify) (3, 0.8%)





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Other (heath_behavin_other)

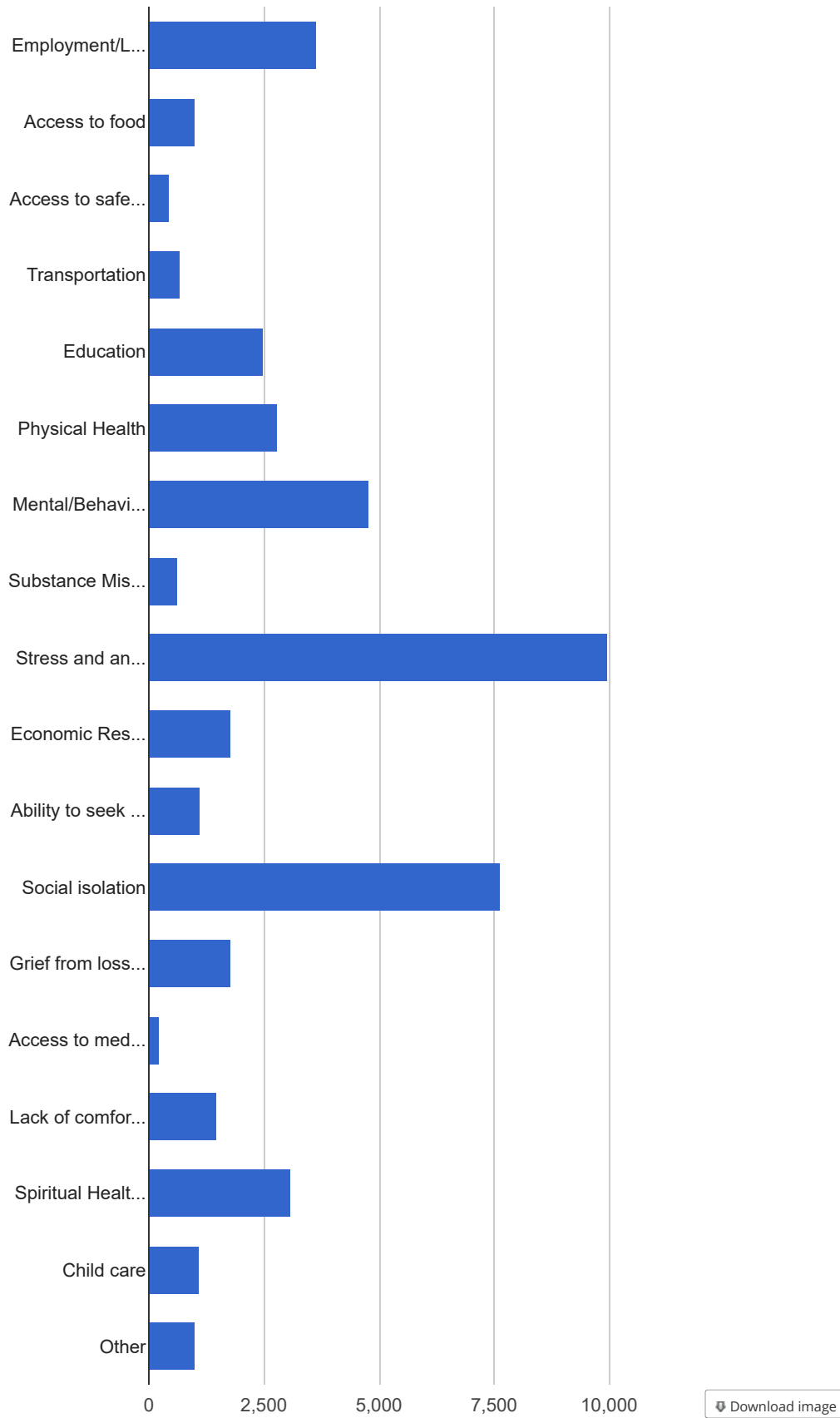
Total Count (N)	Missing*

3	369 (99.2%)
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Please select the top 3 areas where COVID-19 have impacted you most severely/significantly? *(covid)*

Total Count (N)	Missing*	Unique
369	3 (0.8%)	18

Counts/frequency: Employment/Loss of Job (94, 25.5%), Access to food (24, 6.5%), Access to safe housing (13, 3.5%), Transportation (16, 4.3%), Education (62, 16.8%), Physical Health (58, 15.7%), Mental/Behavioral Health (71, 19.2%), Substance Misuse (13, 3.5%), Stress and anxiety (215, 58.3%), Economic Resources (55, 14.9%), Ability to seek medical care (19, 5.1%), Social isolation (163, 44.2%), Grief from loss of loved one (70, 19.0%), Access to medication (1, 0.3%), Lack of comfort in seeking medical care (35, 9.5%), Spiritual Health/Well-being (51, 13.8%), Child care (30, 8.1%), Other (23, 6.2%)



[Download image](#)

Other (*other_covid*)

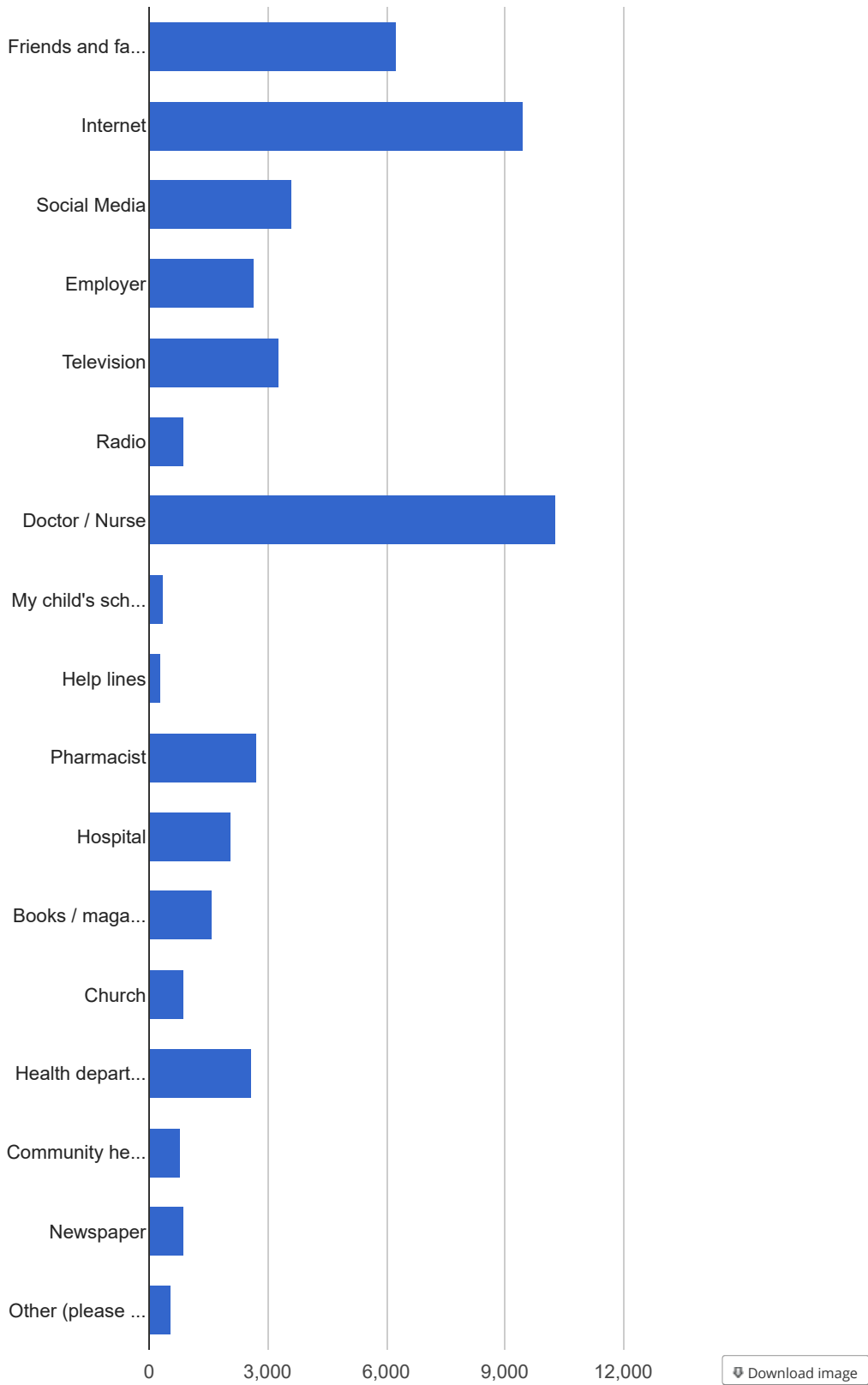
Total Count (N)	Missing*
18	354 (95.2%)

Where do you get most of your health-related information? (Please check all that apply)

(health_info)

Total Count (N)	Missing*	Unique
369	3 (0.8%)	17

Counts/frequency: Friends and family (143, 38.8%), Internet (166, 45.0%), Social Media (76, 20.6%), Employer (67, 18.2%), Television (94, 25.5%), Radio (21, 5.7%), Doctor / Nurse (224, 60.7%), My child's school (3, 0.8%), Help lines (3, 0.8%), Pharmacist (29, 7.9%), Hospital (91, 24.7%), Books / magazines (26, 7.0%), Church (19, 5.1%), Health department (28, 7.6%), Community health worker (15, 4.1%), Newspaper (16, 4.3%), Other (please specify) (5, 1.4%)



[Download image](#)

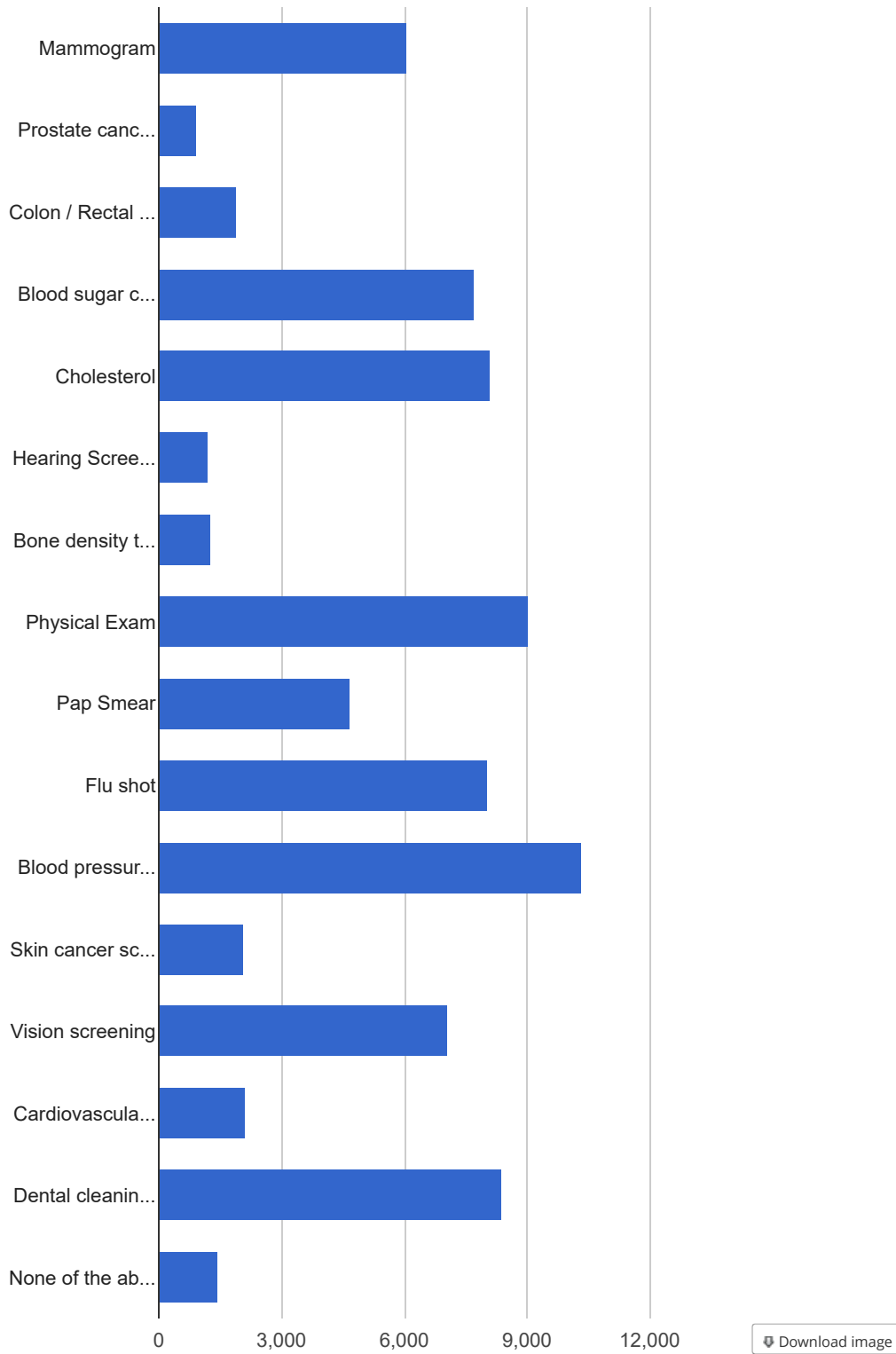
Other (*health_info_other*)

Total Count (N)	Missing*
3	369 (99.2%)

Which of the following preventative services have you had in the past 12 months? (Check all that apply) *(prevent_services)*

Total Count (N)	Missing*	Unique
369	3 (0.8%)	16

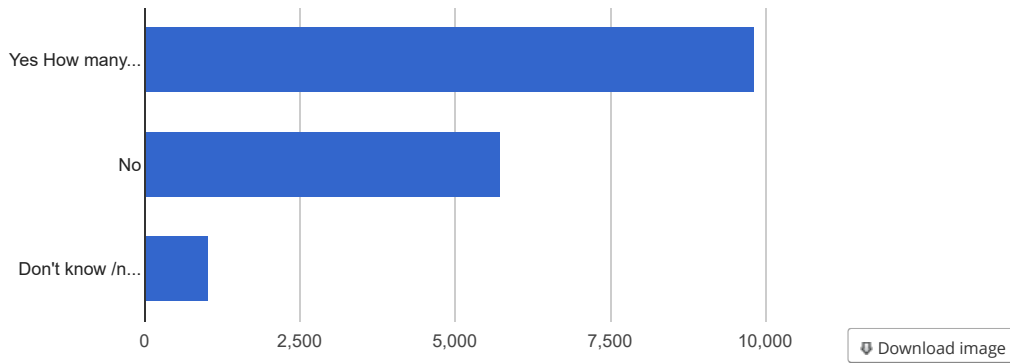
Counts/frequency: Mammogram (120, 32.5%), Prostate cancer screening (20, 5.4%), Colon / Rectal exam (33, 8.9%), Blood sugar check (158, 42.8%), Cholesterol (147, 39.8%), Hearing Screening (18, 4.9%), Bone density test (21, 5.7%), Physical Exam (171, 46.3%), Pap Smear (85, 23.0%), Flu shot (155, 42.0%), Blood pressure check (211, 57.2%), Skin cancer screening (15, 4.1%), Vision screening (141, 38.2%), Cardiovascular screening (27, 7.3%), Dental cleaning / x-rays (134, 36.3%), None of the above (38, 10.3%)



During a normal week, other than in your regular job, do you engage in any physical activity or exercise that lasts at least a half an hour? (Please select only one) *(physicalactivity)*

Total Count (N)	Missing*	Unique
369	3 (0.8%)	3

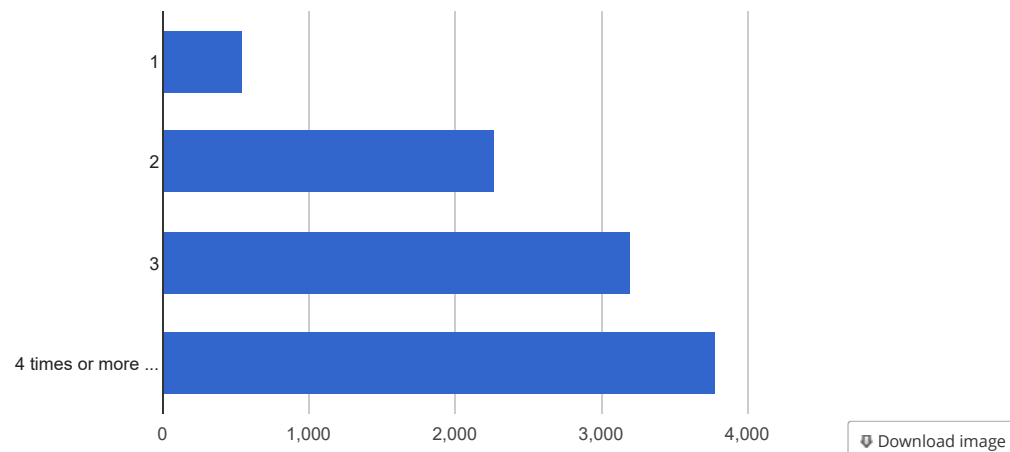
Counts/frequency: Yes How many times per week? (201, 54.5%), No (146, 39.6%), Don't know /not sure (22, 6.0%)



How many times per week? (*exercisetimesweek*)

Total Count (N)	Missing*	Unique
201	171 (46.0%)	4

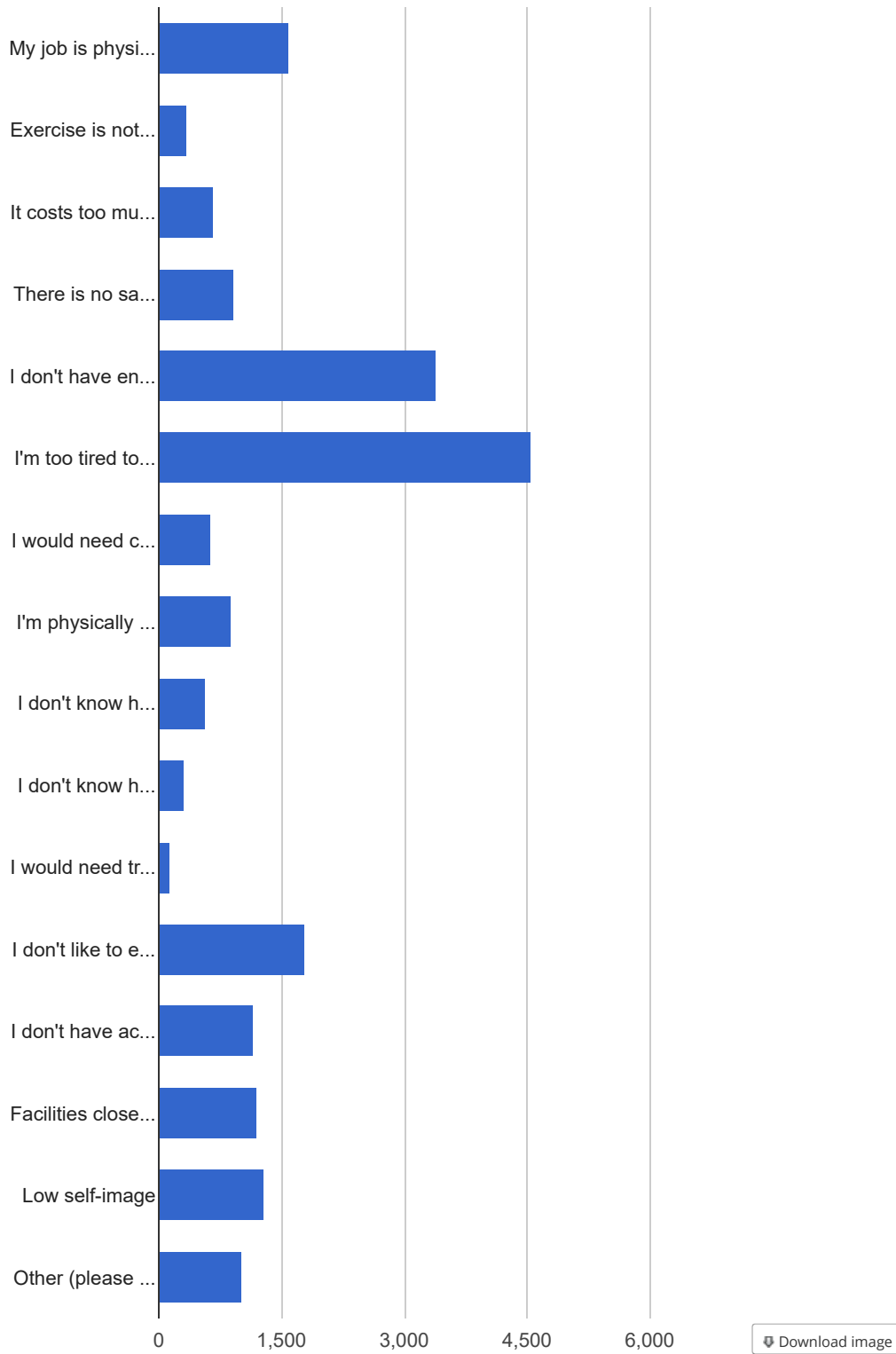
Counts/frequency: 1 (11, 5.5%), 2 (56, 27.9%), 3 (70, 34.8%), 4 times or more per week (64, 31.8%)



If you do not exercise at least a half hour a few days each week, please select the reasons why you do not exercise? (Please select all that apply) (*notexercise*)

Total Count (N)	Missing*	Unique
227	145 (39.0%)	16

Counts/frequency: My job is physical or hard labor. (55, 24.2%), Exercise is not important to me. (6, 2.6%), It costs too much to exercise. (13, 5.7%), There is no safe place to exercise. (11, 4.8%), I don't have enough time to exercise. (54, 23.8%), I'm too tired to exercise. (81, 35.7%), I would need child care and I don't have it. (10, 4.4%), I'm physically disabled. (15, 6.6%), I don't know how to find exercise partners. (5, 2.2%), I don't know how to safely (9, 4.0%), I would need transportation and I don't have it. (5, 2.2%), I don't like to exercise. (27, 11.9%), I don't have access to a facility that has the things I need, like a pool, golf course, or a track. (23, 10.1%), Facilities closed due to COVID 19 (27, 11.9%), Low self-image (12, 5.3%), Other (please specify) (26, 11.5%)



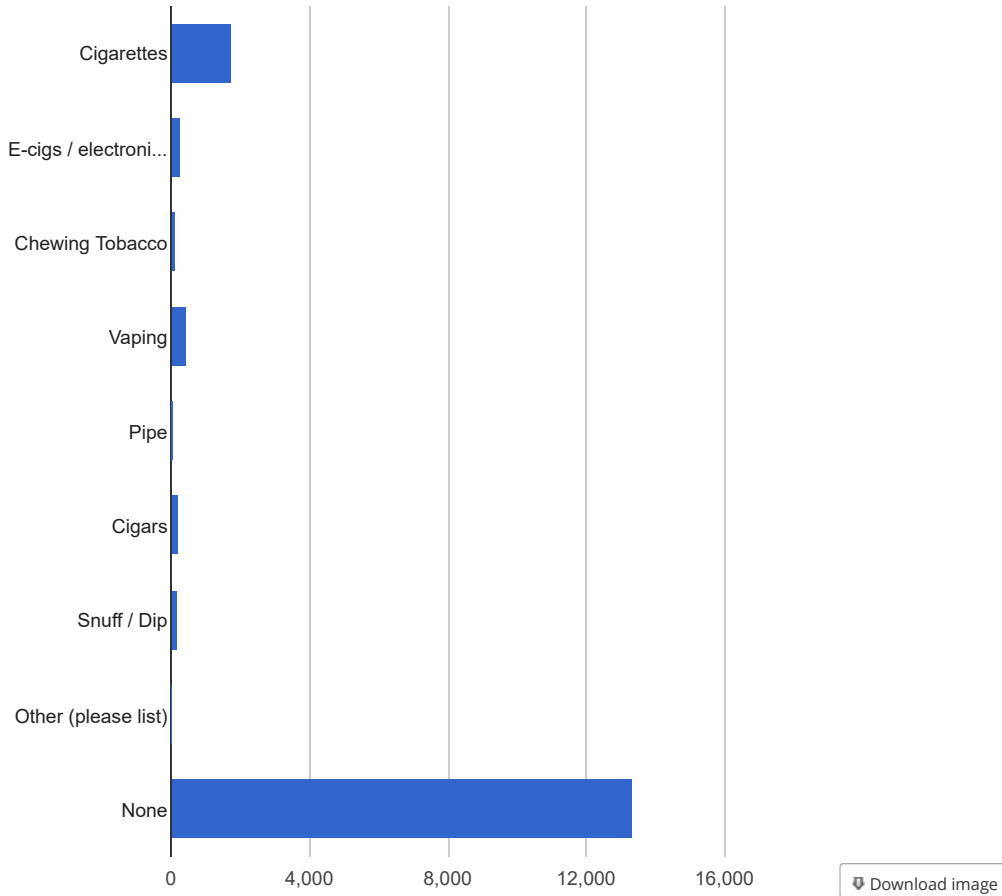
Other (*exercise_other*)

Total Count (N)	Missing*
22	350 (94.1%)

Please select any tobacco product you currently use, (*please_select_any_tobacco*)

Total Count (N)	Missing*	Unique
354	18 (4.8%)	8

Counts/frequency: Cigarettes (38, 10.7%), E-cigs / electronic cigarettes (3, 0.8%), Chewing Tobacco (3, 0.8%), Vaping (6, 1.7%), Pipe (1, 0.3%), Cigars (3, 0.8%), Snuff / Dip (2, 0.6%), Other (please list) (0, 0.0%), None (303, 85.6%)



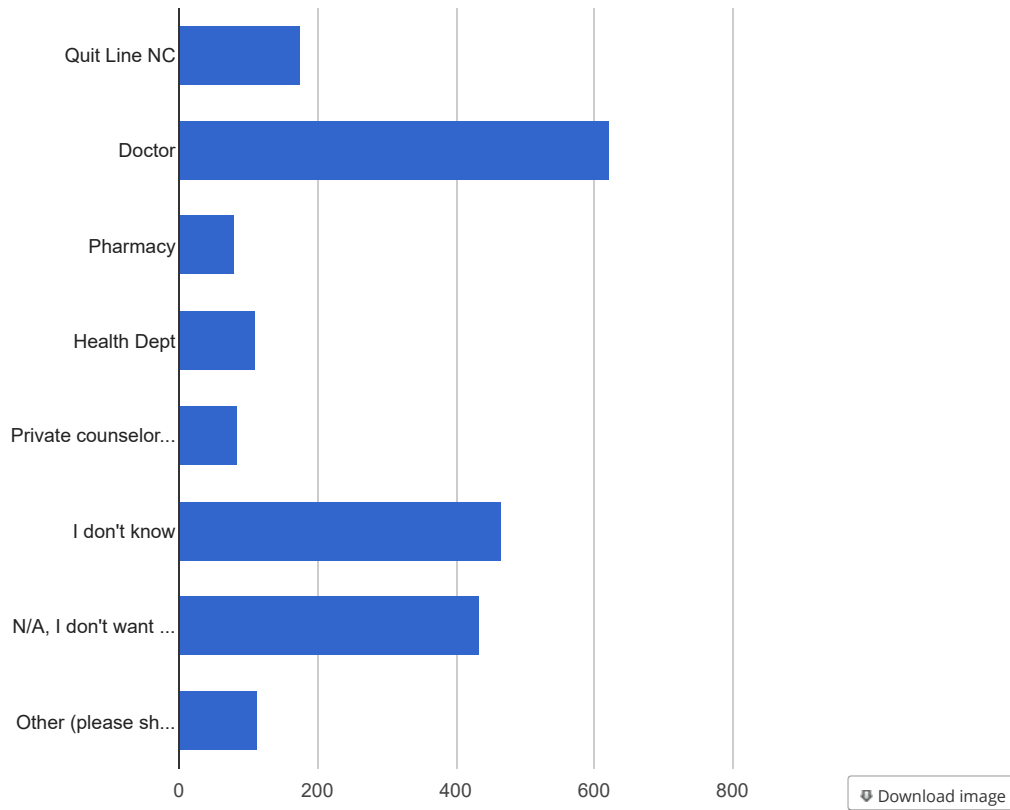
Other (please list) (*other_please_list*)

Total Count (N)	Missing*
0	372 (100.0%)

Where would you go for help if you wanted to quit? (*quit*)

Total Count (N)	Missing*	Unique
42	330 (88.7%)	7

Counts/frequency: Quit Line NC (3, 7.1%), Doctor (20, 47.6%), Pharmacy (3, 7.1%), Health Dept (0, 0.0%), Private counselor / therapist (1, 2.4%), I don't know (8, 19.0%), N/A, I don't want to quit (6, 14.3%), Other (please share more) (1, 2.4%)



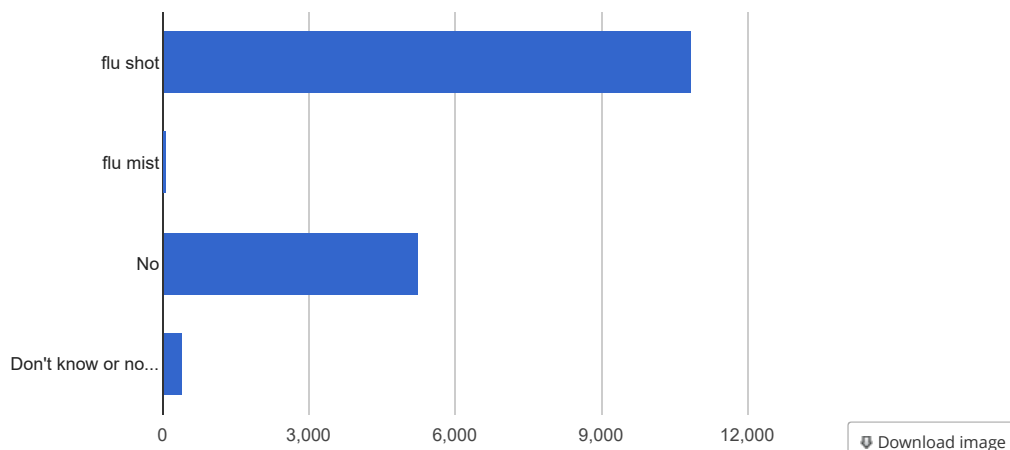
Other: (*quit_other*)

Total Count (N)	Missing*
1	371 (99.7%)

An influenza / flu vaccine can be a "flu shot" injected into your arm or a spray like "Flu Mist" which is sprayed into your nose. During the past 12 months, have you received a seasonal flu vaccine? (Choose only one) (*flu*)

Total Count (N)	Missing*	Unique
369	3 (0.8%)	4

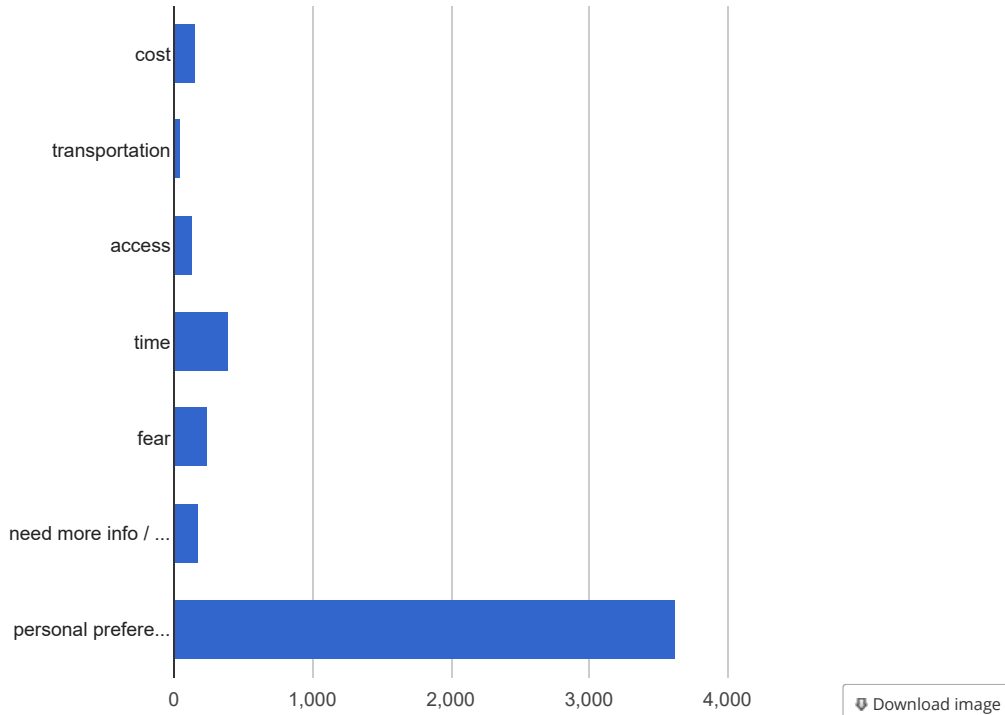
Counts/frequency: flu shot (262, 71.0%), flu mist (7, 1.9%), No (86, 23.3%), Don't know or not sure (14, 3.8%)



If you did not get your flu vaccine, why not? Please check any barriers. (flu_barriers)

Total Count (N)	Missing*	Unique
71	301 (80.9%)	6

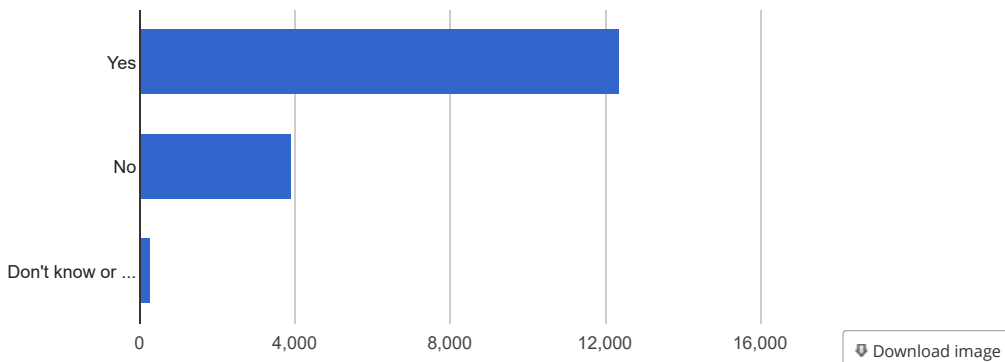
Counts/frequency: cost (1, 1.4%), transportation (0, 0.0%), access (3, 4.2%), time (5, 7.0%), fear (7, 9.9%), need more info / have questions (3, 4.2%), personal preference (52, 73.2%)



Have you had a COVID-19 vaccine? (covidshot)

Total Count (N)	Missing*	Unique
369	3 (0.8%)	3

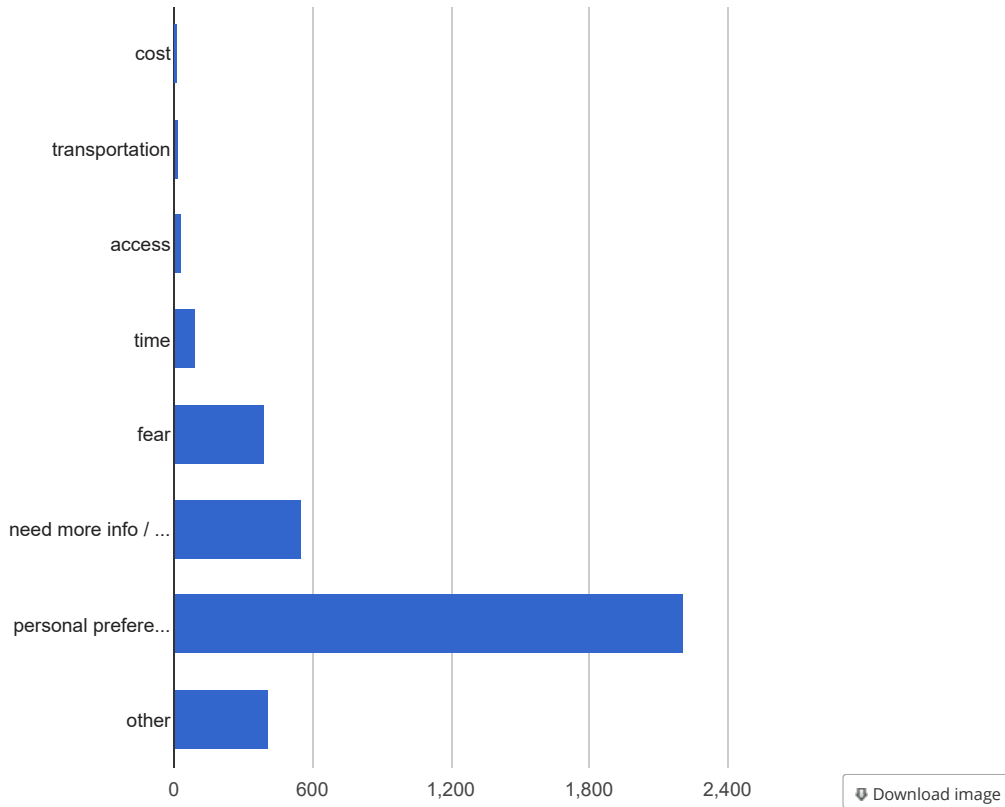
Counts/frequency: Yes (240, 65.0%), No (124, 33.6%), Don't know or not sure (5, 1.4%)



If you did not get your COVID-19 vaccine, why not? Please check any barriers. (covidyesskip)

Total Count (N)	Missing*	Unique
119	253 (68.0%)	6

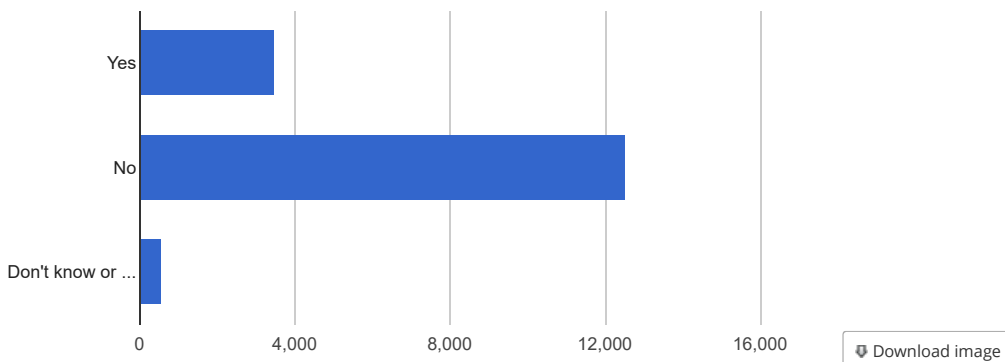
Counts/frequency: cost (0, 0.0%), transportation (1, 0.8%), access (0, 0.0%), time (3, 2.5%), fear (10, 8.4%), need more info / have questions (18, 15.1%), personal preference (73, 61.3%), other (14, 11.8%)



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? (Please choose only one) *(healthcarehelp)*

Total Count (N)	Missing*	Unique
369	3 (0.8%)	3

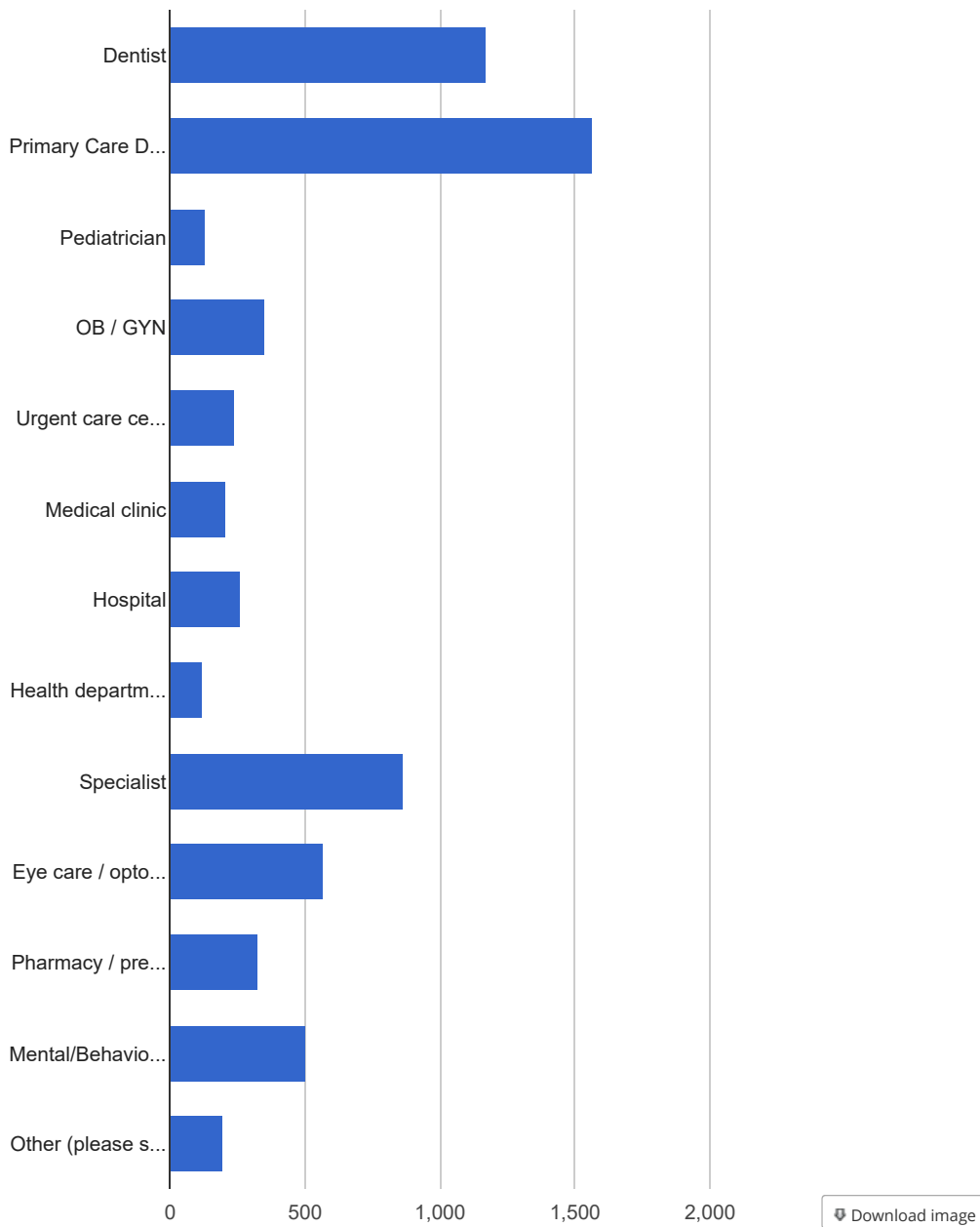
Counts/frequency: Yes (47, 12.7%), No (311, 84.3%), Don't know or not sure (11, 3.0%)



If yes, what type of provider or facility did you have trouble getting healthcare from? (Please choose all that apply) *(healthcareproviderhelp)*

Total Count (N)	Missing*	Unique
44	328 (88.2%)	12

Counts/frequency: Dentist (19, 43.2%), Primary Care Doctor (17, 38.6%), Pediatrician (1, 2.3%), OB / GYN (5, 11.4%), Urgent care center (1, 2.3%), Medical clinic (2, 4.5%), Hospital (3, 6.8%), Health department (0, 0.0%), Specialist (5, 11.4%), Eye care / optometrist / ophthalmologist (9, 20.5%), Pharmacy / prescriptions (2, 4.5%), Mental/Behavioral Health Providers (2, 4.5%), Other (please share more) (2, 4.5%)



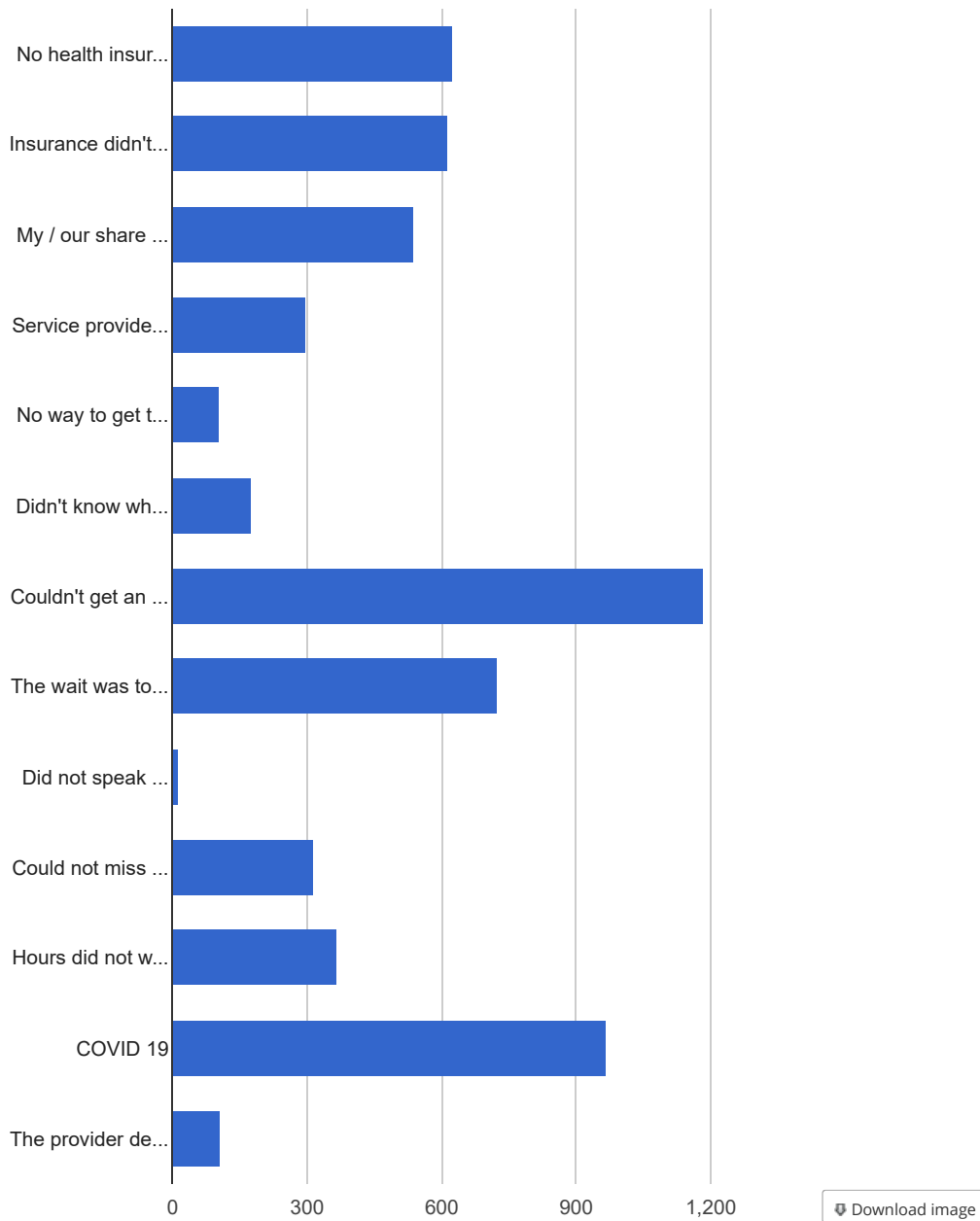
Other (*healthcareprovider_other*)

Total Count (N)	Missing*
1	371 (99.7%)

Which of these problems prevented you from getting the necessary health care? (Please choose all that apply) (*healthcarewhichproblems*)

Total Count (N)	Missing*	Unique
55	317 (85.2%)	12

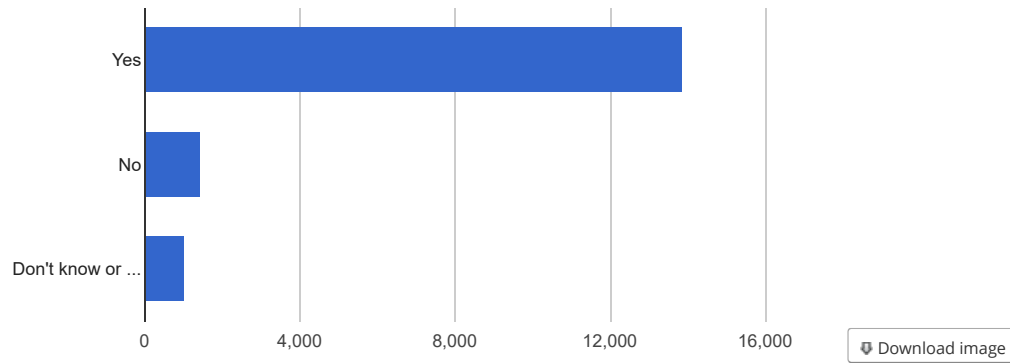
Counts/frequency: No health insurance (6, 10.9%), Insurance didn't cover what I / we needed. (10, 18.2%), My / our share of the cost (deductible / co-pay) was too high. (7, 12.7%), Service provider would not take my / our insurance or Medicaid. (2, 3.6%), No way to get there. (3, 5.5%), Didn't know where to go (3, 5.5%), Couldn't get an appointment (13, 23.6%), The wait was too long (5, 9.1%), Did not speak my language (0, 0.0%), Could not miss work to go (2, 3.6%), Hours did not work with my availability (5, 9.1%), COVID 19 (17, 30.9%), The provider denied me care or treated me in a discriminatory manner because of a protected status (age, race, sexual preference, disease, etc.) (2, 3.6%)



In a natural disaster (hurricane, flooding, tornado, etc.), do you feel like you know how to access or find the information you need to stay safe? *(naturaldisasteraccess)*

Total Count (N)	Missing*	Unique
362	10 (2.7%)	3

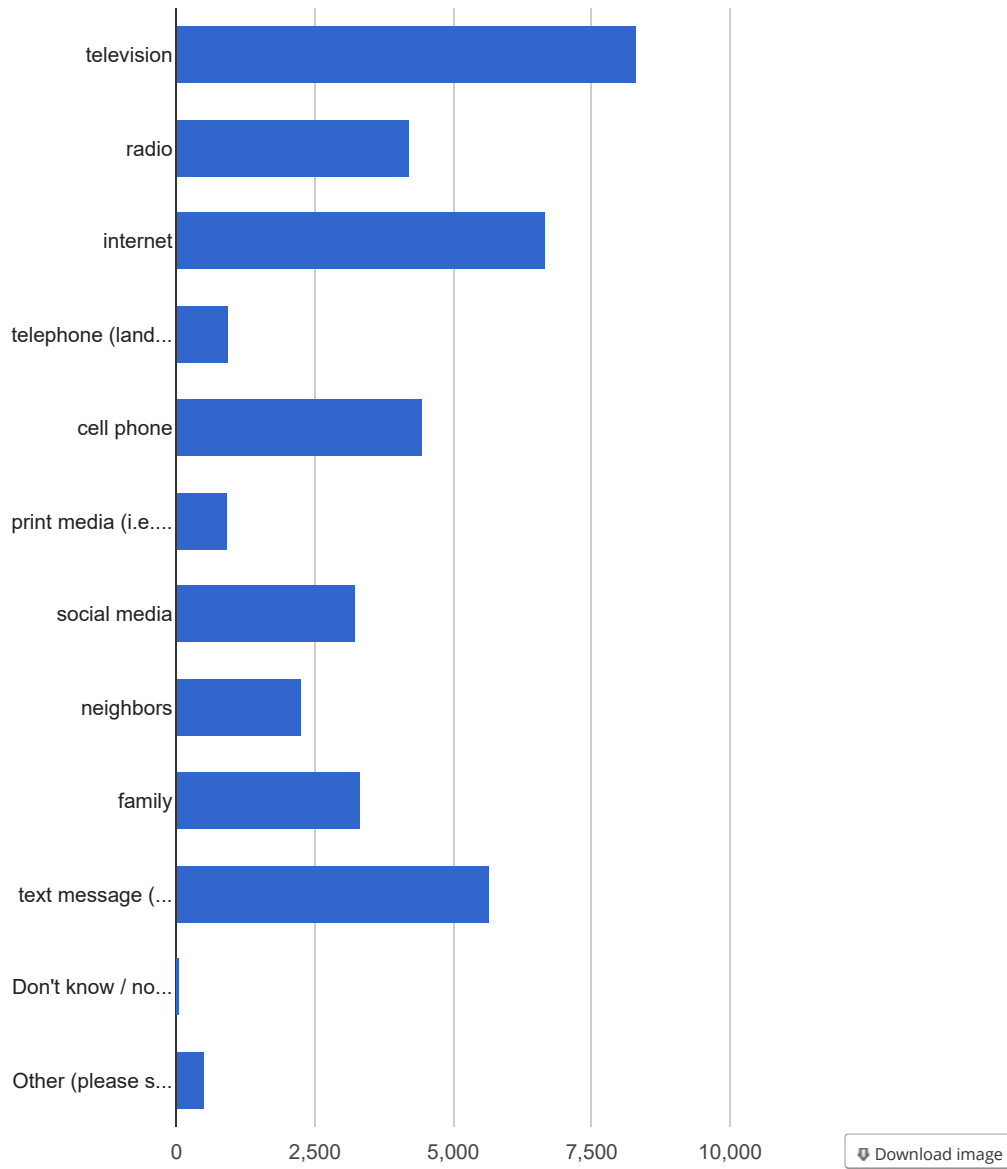
Counts/frequency: Yes (321, 88.7%), No (22, 6.1%), Don't know or not sure (19, 5.2%)



If so, where do you get your information to stay safe? *(naturaldisasterinfo)*

Total Count (N)	Missing*	Unique
318	54 (14.5%)	12

Counts/frequency: television (210, 66.0%), radio (72, 22.6%), internet (88, 27.7%), telephone (landline) (22, 6.9%), cell phone (96, 30.2%), print media (i.e.. newspaper) (13, 4.1%), social media (55, 17.3%), neighbors (41, 12.9%), family (83, 26.1%), text message (emergency alert system) (103, 32.4%), Don't know / not sure (2, 0.6%), Other (please specify) (11, 3.5%)



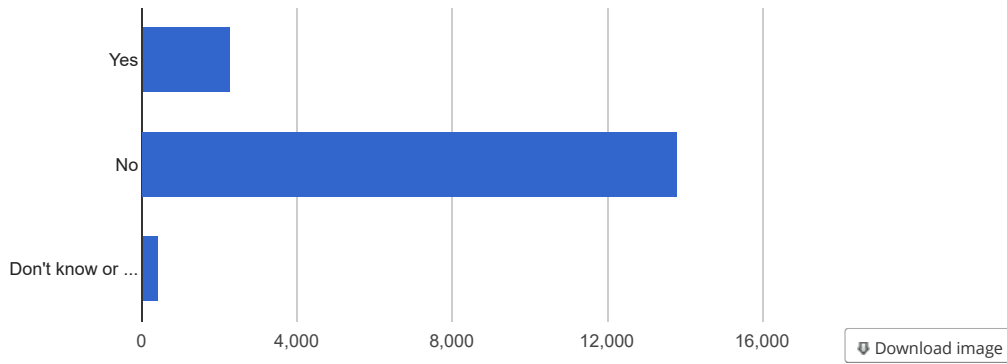
Other (*natural_disaster_other*)

Total Count (N)	Missing*
10	362 (97.3%)

In the past 12 months, were you ever worried about whether your family's food would run out before you got money to buy more? (Please choose only one) (*foodworried*)

Total Count (N)	Missing*	Unique
369	3 (0.8%)	3

Counts/frequency: Yes (49, 13.3%), No (314, 85.1%), Don't know or not sure (6, 1.6%)



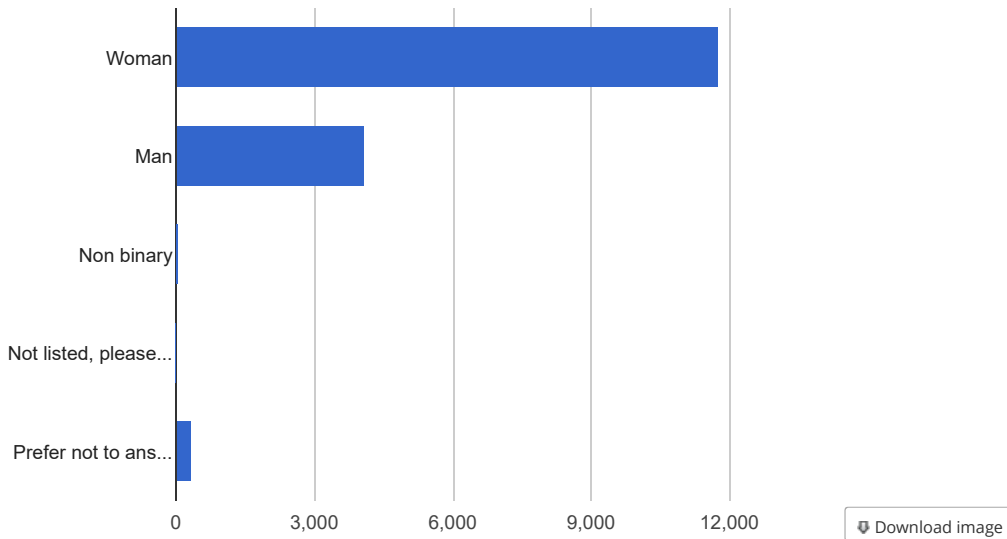
Is there anything else you would like for us to know about your community? *(anythingelse)*

Total Count (N)	Missing*
38	334 (89.8%)

How would you describe yourself? *(gender)*

Total Count (N)	Missing*	Unique
365	7 (1.9%)	3

Counts/frequency: **Woman** (209, 57.3%), **Man** (147, 40.3%), **Non binary** (0, 0.0%), **Not listed, please share more:** _____ (0, 0.0%), **Prefer not to answer** (9, 2.5%)



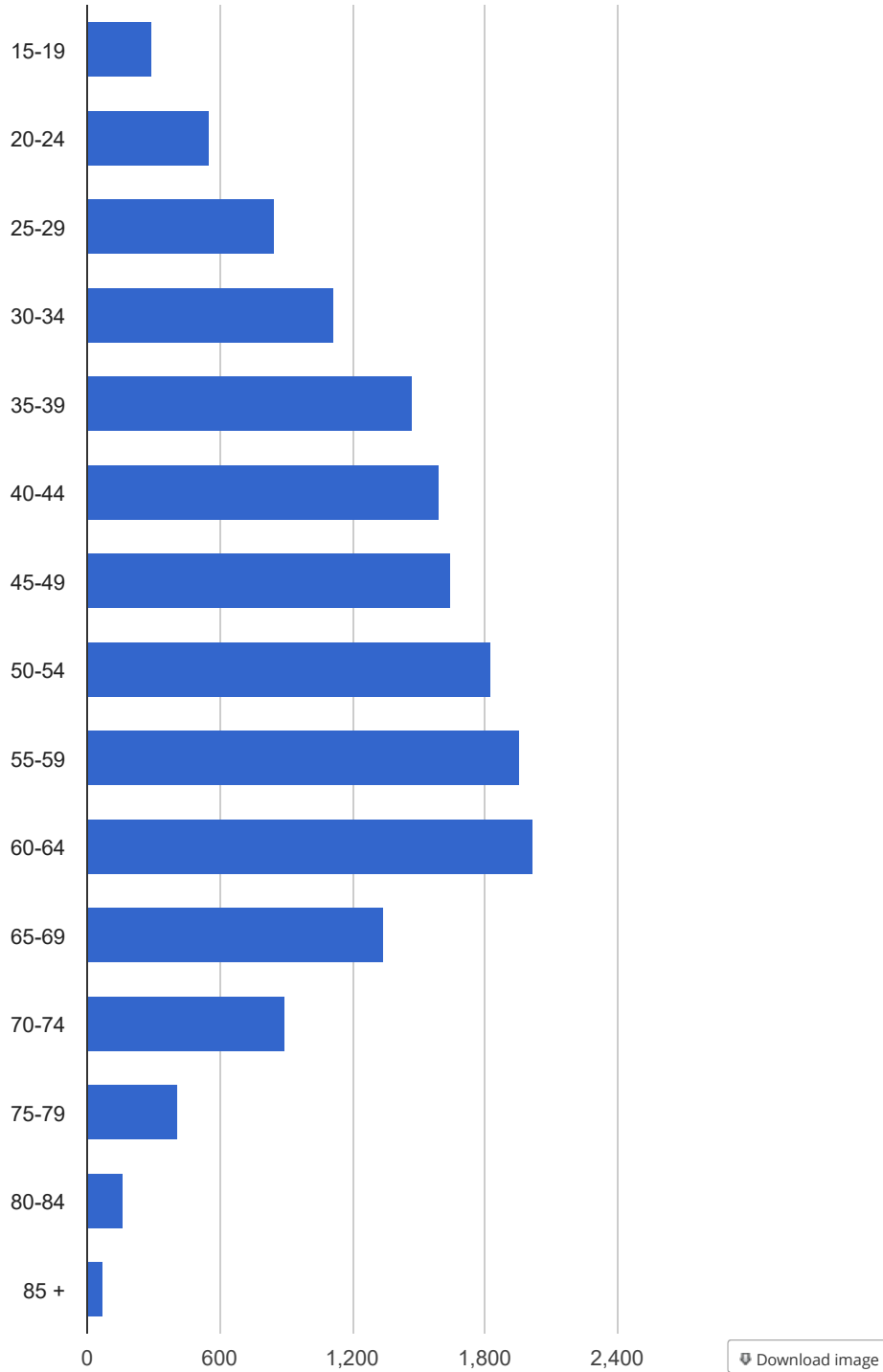
Please share more. *(gender_other)*

Total Count (N)	Missing*
0	372 (100.0%)

How old are you? *(age)*

Total Count (N)	Missing*	Unique
363	9 (2.4%)	15

Counts/frequency: 15-19 (1, 0.3%), 20-24 (18, 5.0%), 25-29 (26, 7.2%), 30-34 (21, 5.8%), 35-39 (33, 9.1%), 40-44 (42, 11.6%), 45-49 (42, 11.6%), 50-54 (50, 13.8%), 55-59 (45, 12.4%), 60-64 (39, 10.7%), 65-69 (24, 6.6%), 70-74 (14, 3.9%), 75-79 (5, 1.4%), 80-84 (1, 0.3%), 85 + (2, 0.6%)

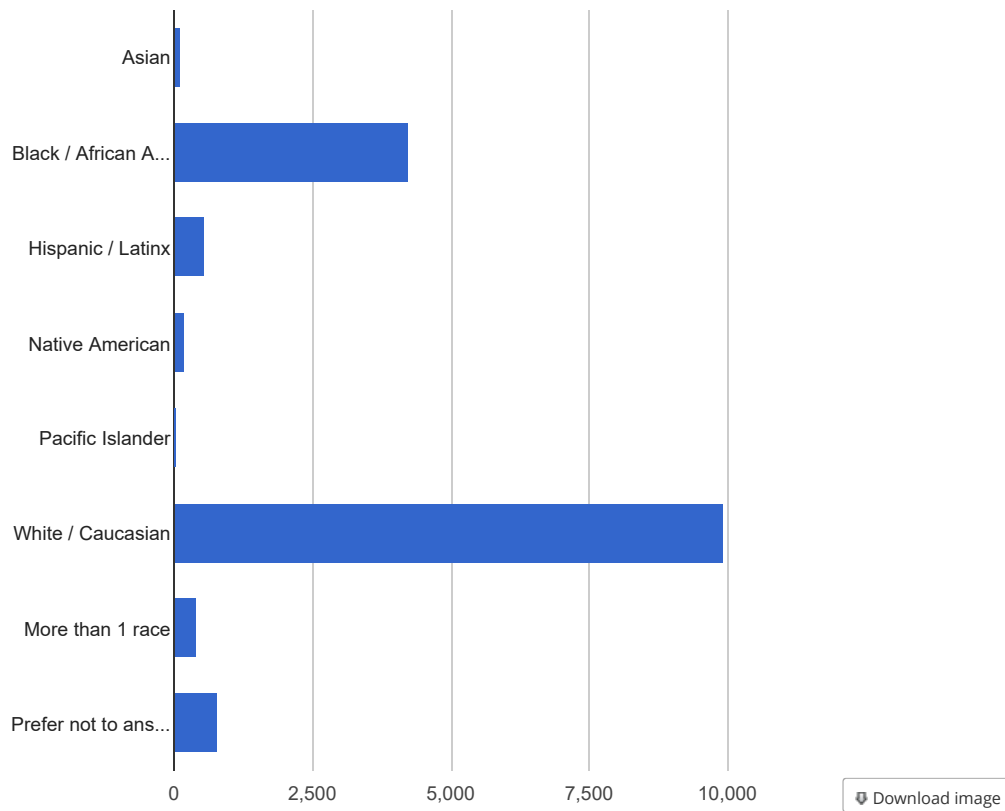


[Download image](#)

How do you describe your race/ethnicity? (*raceethnicity*)

Total Count (N)	Missing*	Unique
363	9 (2.4%)	7

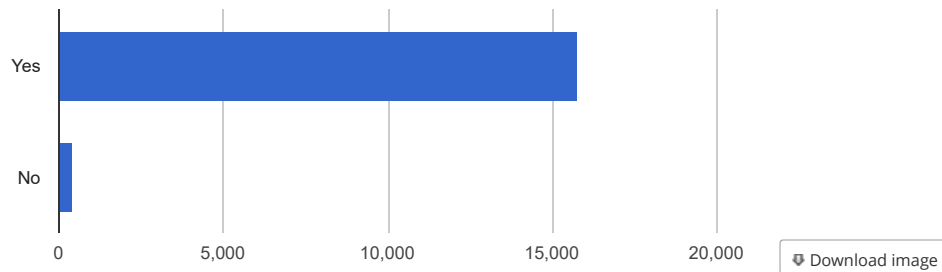
Counts/frequency: Asian (1, 0.3%), Black / African American (192, 52.9%), Hispanic / Latinx (1, 0.3%), Native American (3, 0.8%), Pacific Islander (0, 0.0%), White / Caucasian (137, 37.7%), More than 1 race (4, 1.1%), Prefer not to answer (25, 6.9%)



Is English the primary language spoken in your home? *(language)*

Total Count (N)	Missing*	Unique
359	13 (3.5%)	2

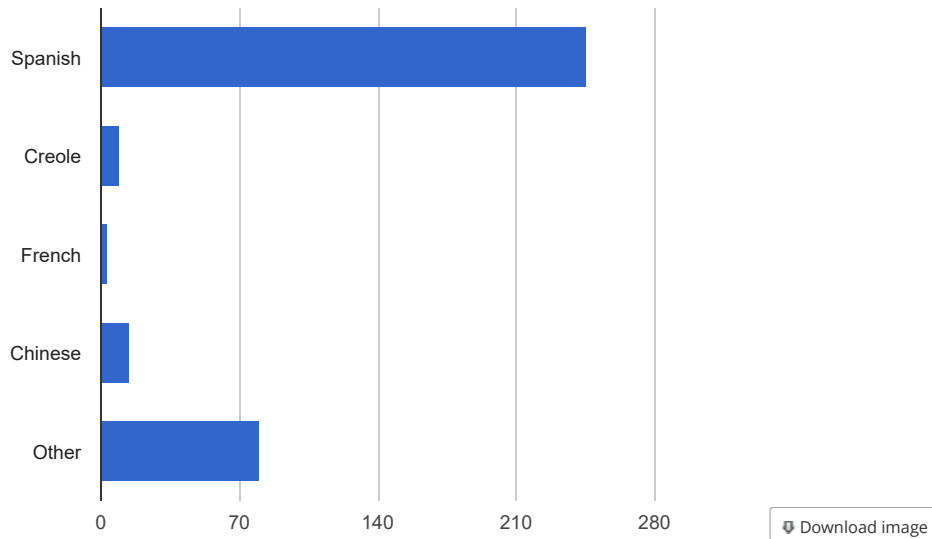
Counts/frequency: Yes (355, 98.9%), No (4, 1.1%)



If no, please share which primary language *(languageno)*

Total Count (N)	Missing*	Unique
3	369 (99.2%)	2

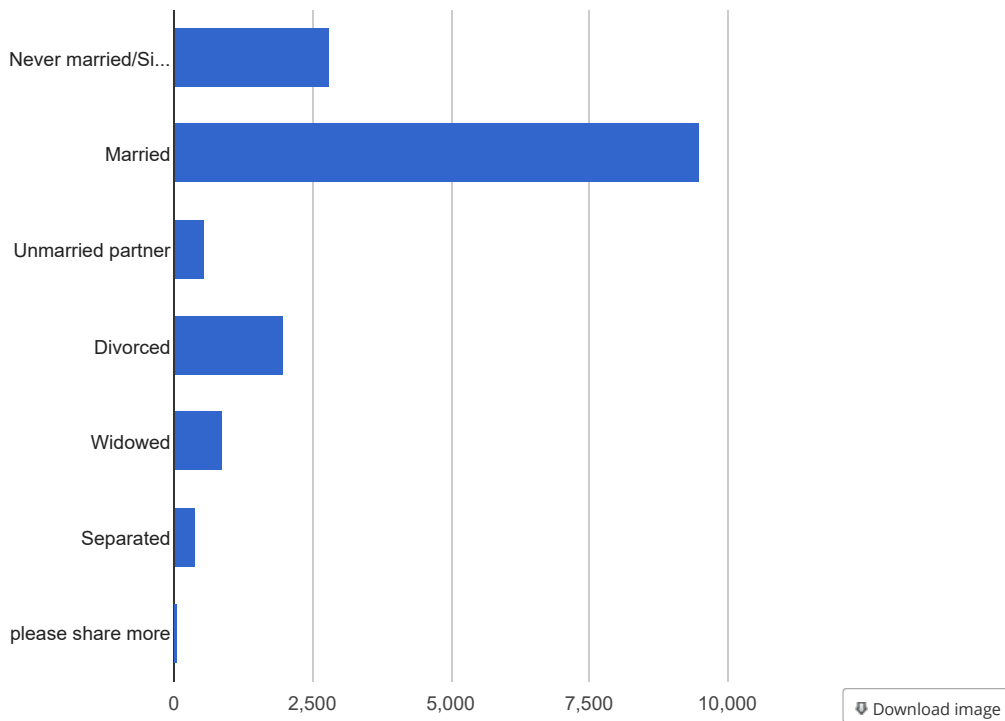
Counts/frequency: Spanish (0, 0.0%), Creole (0, 0.0%), French (1, 33.3%), Chinese (0, 0.0%), Other (2, 66.7%)



What is your marital status? (*marriagestatus*)

Total Count (N)	Missing*	Unique
357	15 (4.0%)	7

Counts/frequency: Never married/Single (99, 27.7%), Married (182, 51.0%), Unmarried partner (7, 2.0%), Divorced (41, 11.5%), Widowed (16, 4.5%), Separated (11, 3.1%), please share more (1, 0.3%)



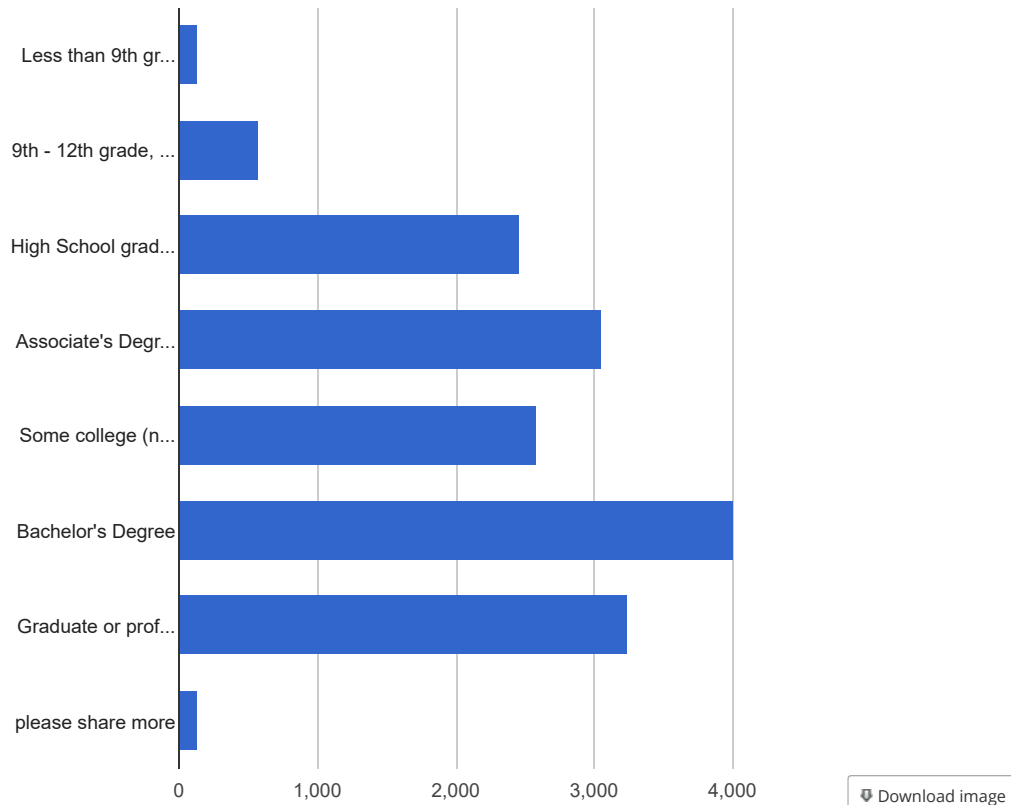
please share more. (*marital_other*)

Total Count (N)	Missing*
0	372 (100.0%)

What is the highest level of education you have completed? *(education)*

Total Count (N)	Missing*	Unique
357	15 (4.0%)	8

Counts/frequency: *Less than 9th grade* (4, 1.1%), *9th - 12th grade, no diploma* (21, 5.9%), *High School graduate (or GED/equivalent)* (84, 23.5%), *Associate's Degree or Vocational Training* (75, 21.0%), *Some college (no degree)* (60, 16.8%), *Bachelor's Degree* (78, 21.8%), *Graduate or professional degree* (32, 9.0%), *please share more* (3, 0.8%)



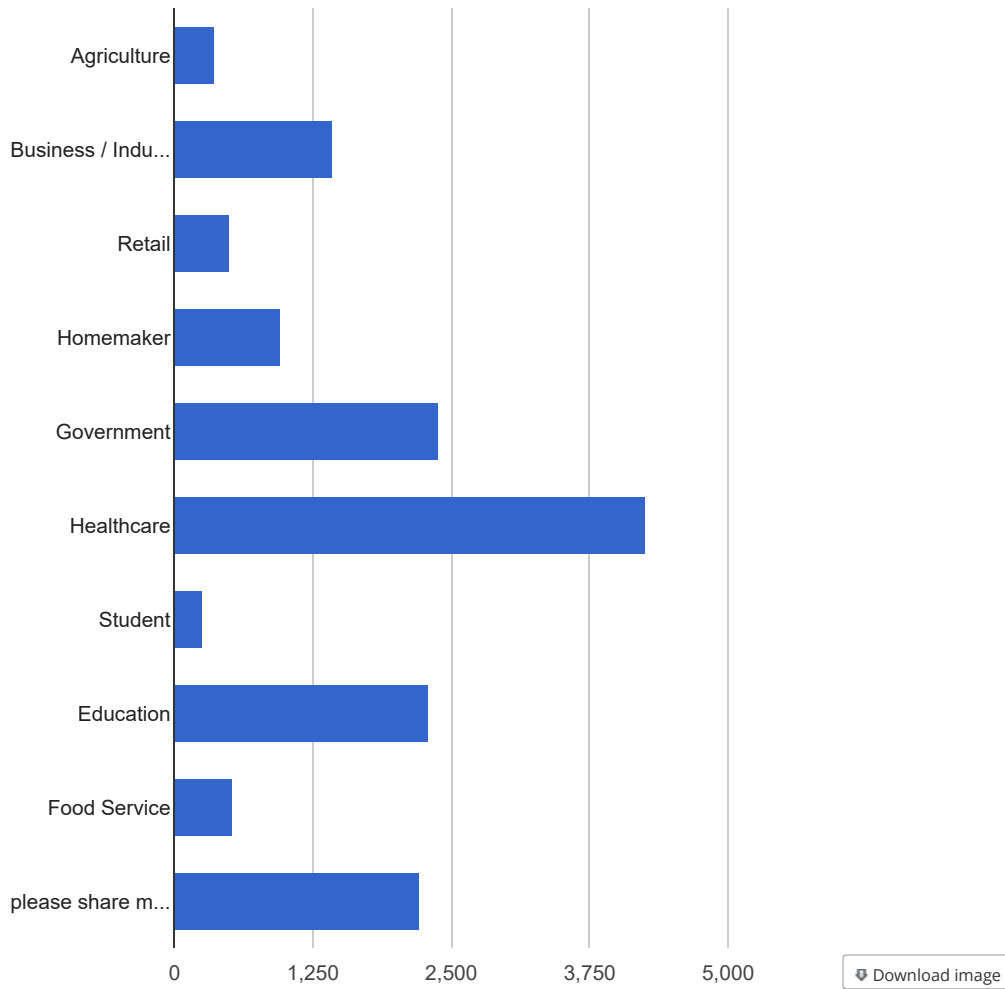
Please share more *(please_share_more)*

Total Count (N)	Missing*
3	369 (99.2%)

How is your current job best described? *(job)*

Total Count (N)	Missing*	Unique
328	44 (11.8%)	10

Counts/frequency: *Agriculture* (7, 2.1%), *Business / Industry* (47, 14.3%), *Retail* (15, 4.6%), *Homemaker* (17, 5.2%), *Government* (21, 6.4%), *Healthcare* (151, 46.0%), *Student* (2, 0.6%), *Education* (11, 3.4%), *Food Service* (24, 7.3%), *please share more* (33, 10.1%)



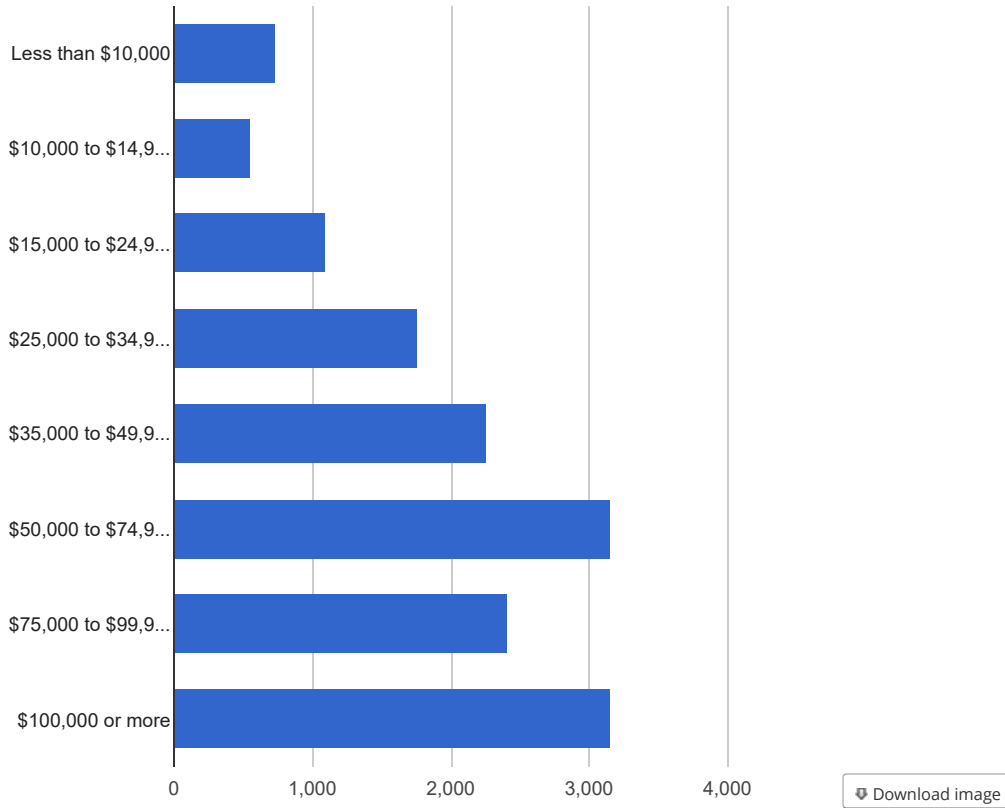
Please share more (*job_other*)

Total Count (N)	Missing*
31	341 (91.7%)

What is your total household income? (*income*)

Total Count (N)	Missing*	Unique
330	42 (11.3%)	8

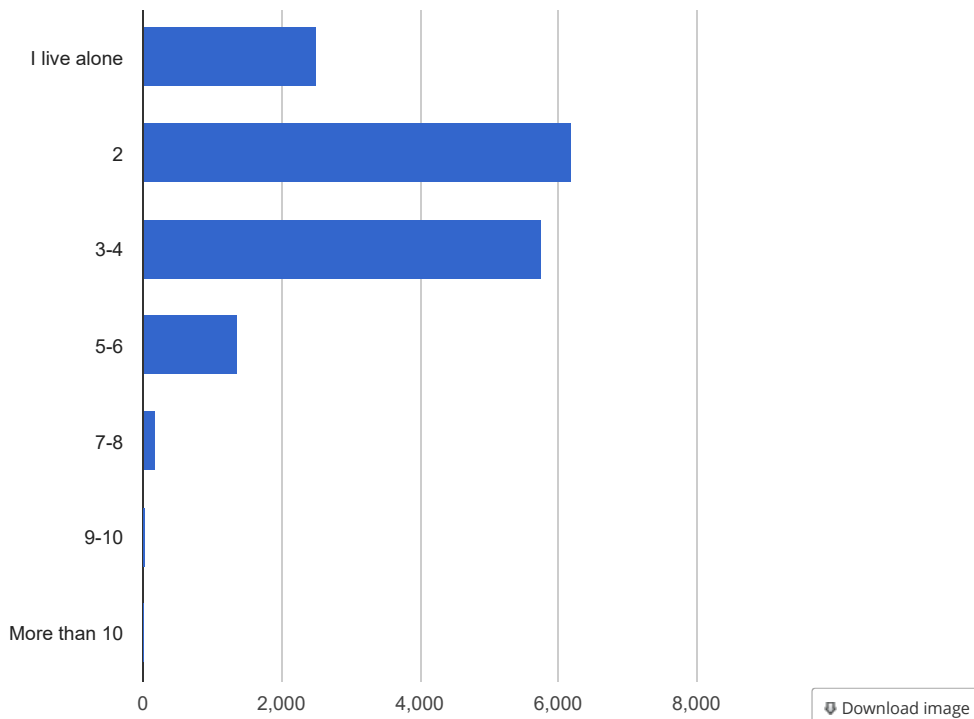
Counts/frequency: Less than \$10,000 (19, 5.8%), \$10,000 to \$14,999 (23, 7.0%), \$15,000 to \$24,999 (25, 7.6%), \$25,000 to \$34,999 (56, 17.0%), \$35,000 to \$49,999 (42, 12.7%), \$50,000 to \$74,999 (66, 20.0%), \$75,000 to \$99,999 (42, 12.7%), \$100,000 or more (57, 17.3%)



How many people live in your household? (*householdnumber*)

Total Count (N)	Missing*	Unique
347	25 (6.7%)	6

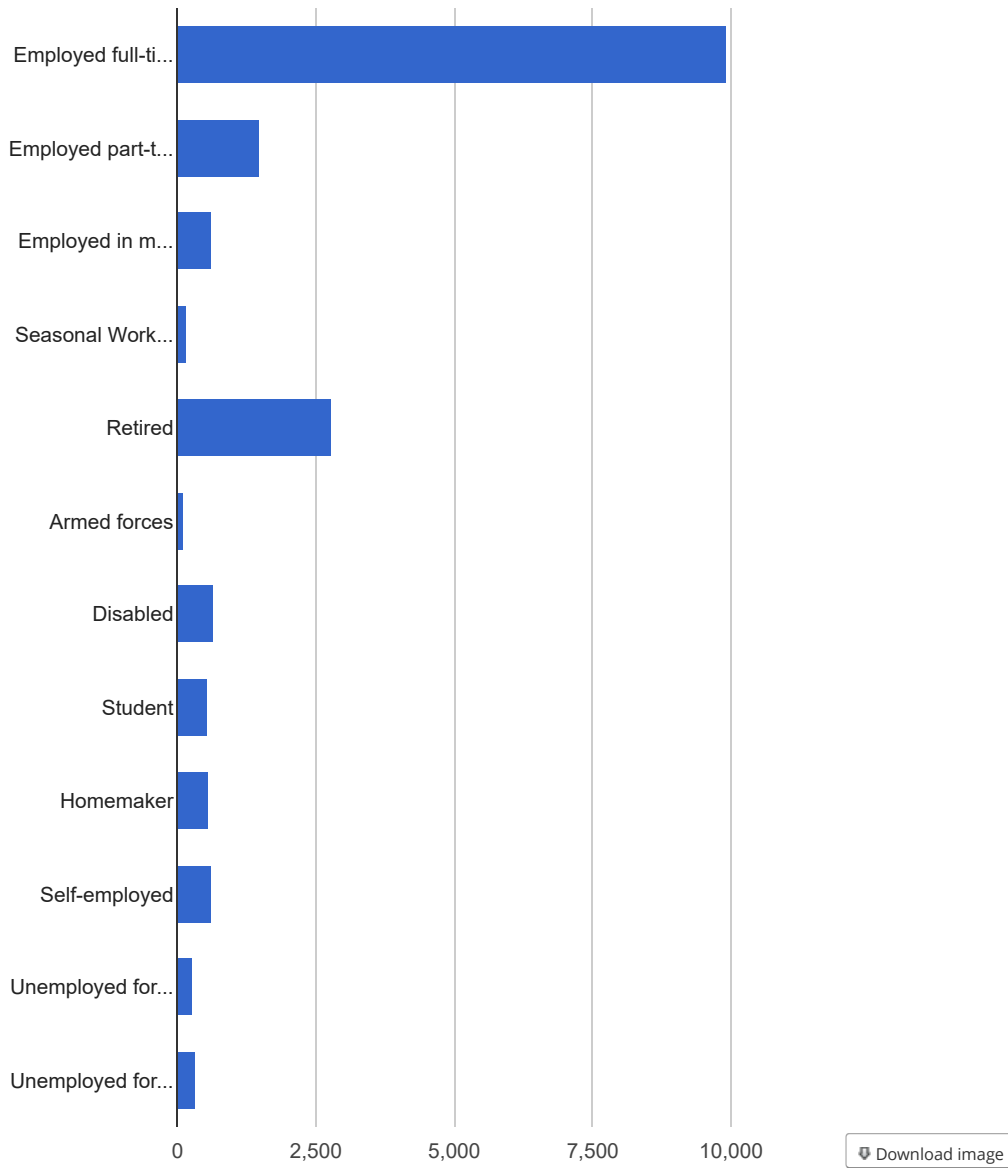
Counts/frequency: **1** live alone (55, 15.9%), **2** (128, 36.9%), **3-4** (130, 37.5%), **5-6** (30, 8.6%), **7-8** (3, 0.9%), **9-10** (1, 0.3%), **More than 10** (0, 0.0%)



What is your employment status? Please check all that apply. *(employment)*

Total Count (N)	Missing*	Unique
359	13 (3.5%)	12

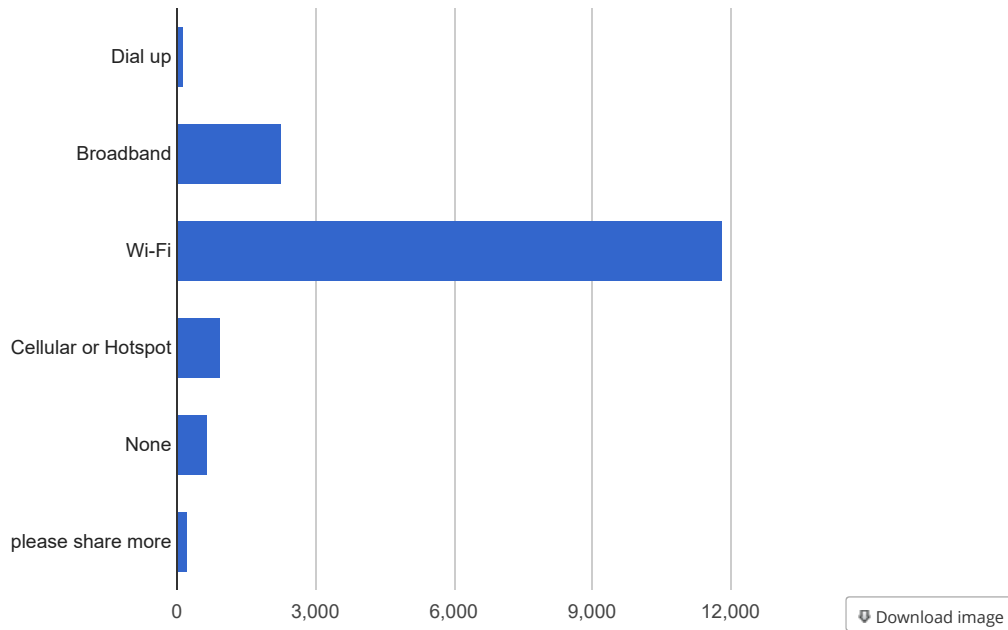
Counts/frequency: Employed full-time (257, 71.6%), Employed part-time (33, 9.2%), Employed in multiple jobs (13, 3.6%), Seasonal Worker/Temporary (1, 0.3%), Retired (34, 9.5%), Armed forces (1, 0.3%), Disabled (23, 6.4%), Student (4, 1.1%), Homemaker (8, 2.2%), Self-employed (12, 3.3%), Unemployed for 1 year or less (3, 0.8%), Unemployed for more than 1 year (7, 1.9%)



What type of internet access do you have at your home? *(internet_or_wifi)*

Total Count (N)	Missing*	Unique
355	17 (4.6%)	6

Counts/frequency: Dial up (2, 0.6%), Broadband (37, 10.4%), Wi-Fi (244, 68.7%), Cellular or Hotspot (35, 9.9%), None (31, 8.7%), please share more (6, 1.7%)



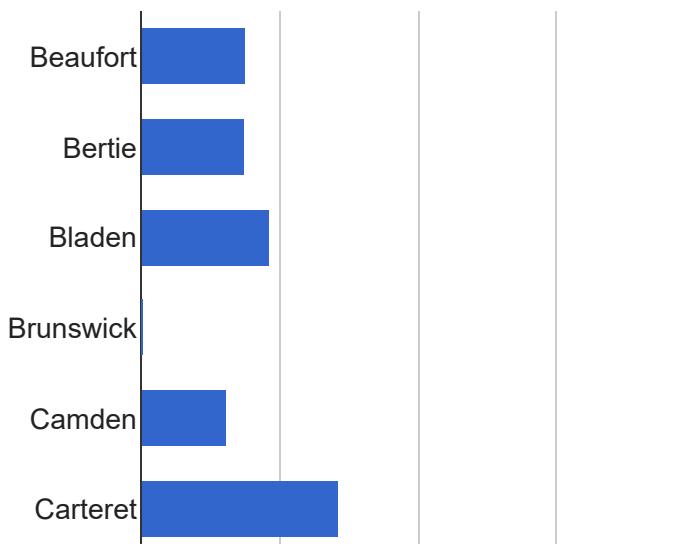
Other (*internet_or_wifi_other*)

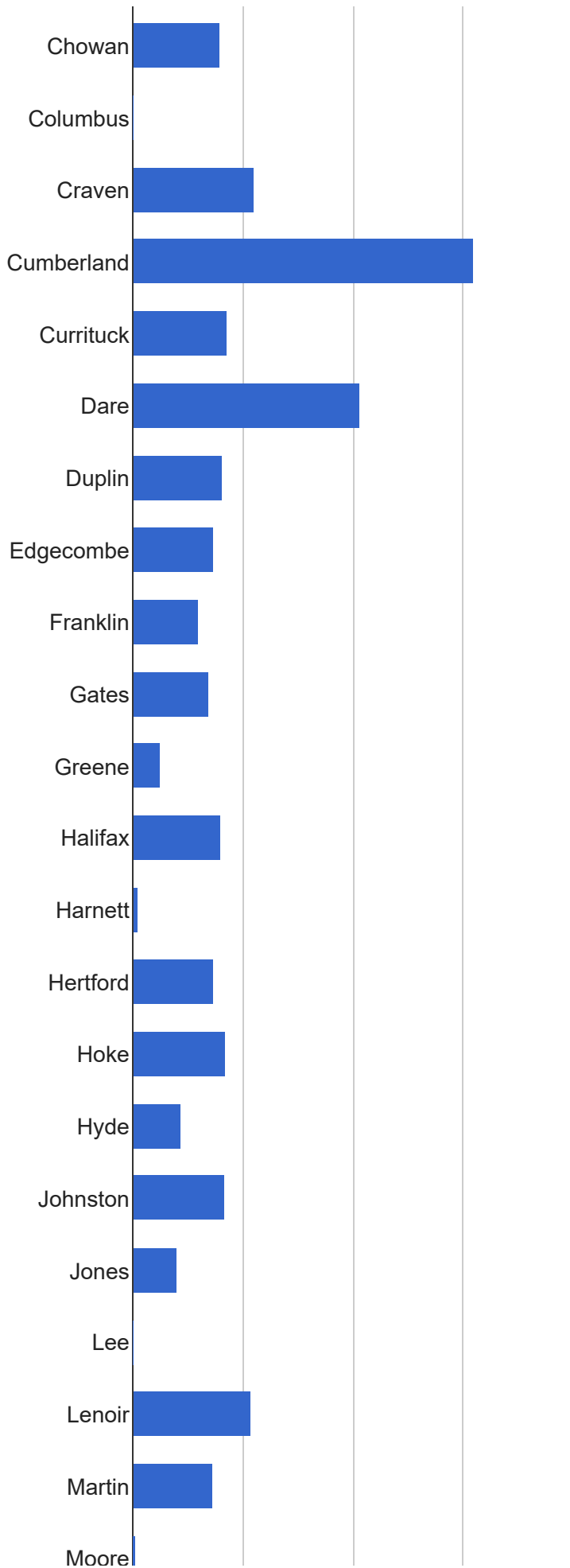
Total Count (N)	Missing*
6	366 (98.4%)

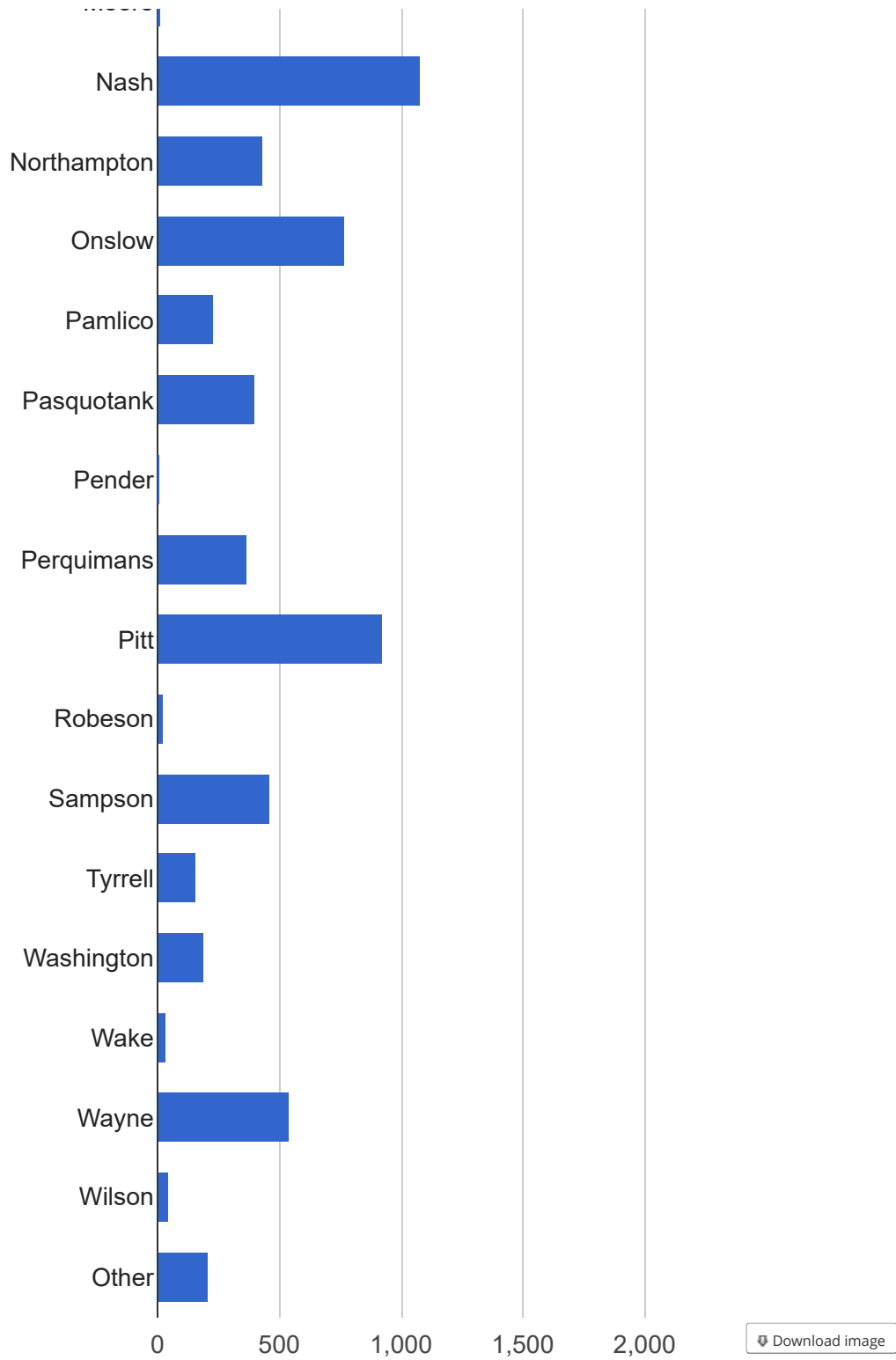
Which county do you live in? (*county*)

Total Count (N)	Missing*	Unique
372	0 (0.0%)	1

Counts/frequency: Beaufort (0, 0.0%), Bertie (372, 100.0%), Bladen (0, 0.0%), Brunswick (0, 0.0%), Camden (0, 0.0%), Carteret (0, 0.0%), Chowan (0, 0.0%), Columbus (0, 0.0%), Craven (0, 0.0%), Cumberland (0, 0.0%), Currituck (0, 0.0%), Dare (0, 0.0%), Duplin (0, 0.0%), Edgecombe (0, 0.0%), Franklin (0, 0.0%), Gates (0, 0.0%), Greene (0, 0.0%), Halifax (0, 0.0%), Harnett (0, 0.0%), Hertford (0, 0.0%), Hoke (0, 0.0%), Hyde (0, 0.0%), Johnston (0, 0.0%), Jones (0, 0.0%), Lee (0, 0.0%), Lenoir (0, 0.0%), Martin (0, 0.0%), Moore (0, 0.0%), Nash (0, 0.0%), Northampton (0, 0.0%), Onslow (0, 0.0%), Pamlico (0, 0.0%), Pasquotank (0, 0.0%), Pender (0, 0.0%), Perquimans (0, 0.0%), Pender (0, 0.0%), Pitt (0, 0.0%), Robeson (0, 0.0%), Sampson (0, 0.0%), Tyrrell (0, 0.0%), Washington (0, 0.0%), Wake (0, 0.0%), Wayne (0, 0.0%), Wilson (0, 0.0%), Other (0, 0.0%)







Other (county_other)

Total Count (N)	Missing*
0	372 (100.0%)

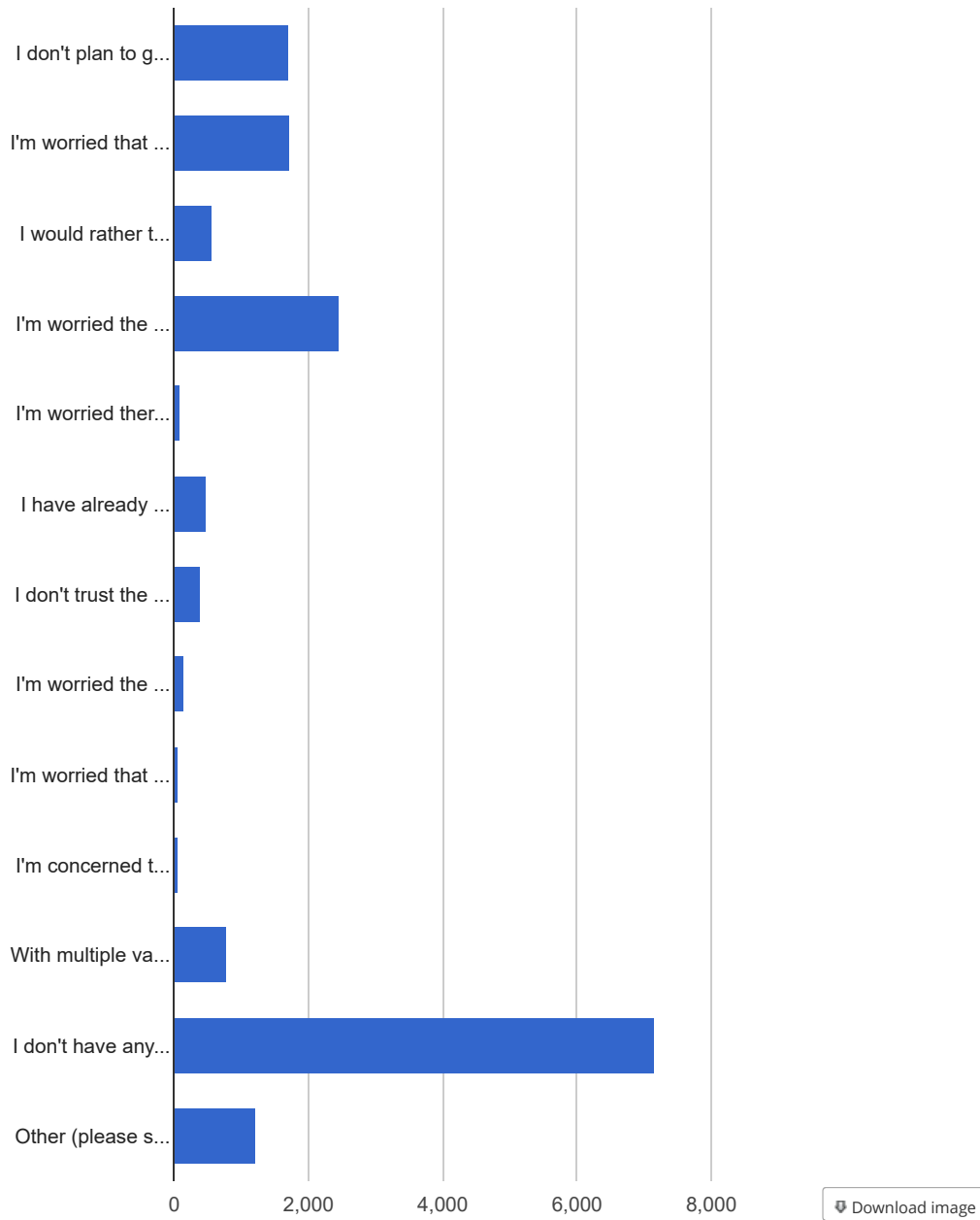
What is your 5 digit zip code? (zip_code)

Total Count (N)	Missing*
83	<u>289 (77.7%)</u>

**Which of the following concerns do you have, if any, about receiving a COVID-19 vaccine?
(Please select all that apply)** *(covidconcerns)*

Total Count (N)	Missing*	Unique
212	<u>160 (43.0%)</u>	12

Counts/frequency: I don't plan to get a vaccine. (40, 18.9%), I'm worried that the COVID-19 vaccine isn't safe. (44, 20.8%), I would rather take the risk of getting sick with COVID-19. (13, 6.1%), I'm worried the COVID-19 vaccine may be harmful or have side effects. (59, 27.8%), I'm worried there may be a cost associated with receiving the COVID-19 vaccine. (1, 0.5%), I have already had COVID-19 so I don't believe a vaccine is necessary. (8, 3.8%), I don't trust the distribution process of the COVID-19 vaccine. (12, 5.7%), I'm worried the COVID-19 vaccine has not been distributed fairly. (2, 0.9%), I'm worried that the location of the COVID-19 vaccine will be difficult to travel to. (1, 0.5%), I'm concerned that I won't have time to get the COVID-19 vaccine. (0, 0.0%), With multiple vaccines becoming available, I'm concerned about knowing which one is best for me. (15, 7.1%), I don't have any concerns about getting the COVID-19 vaccine. (87, 41.0%), Other (please specify) (19, 9.0%)



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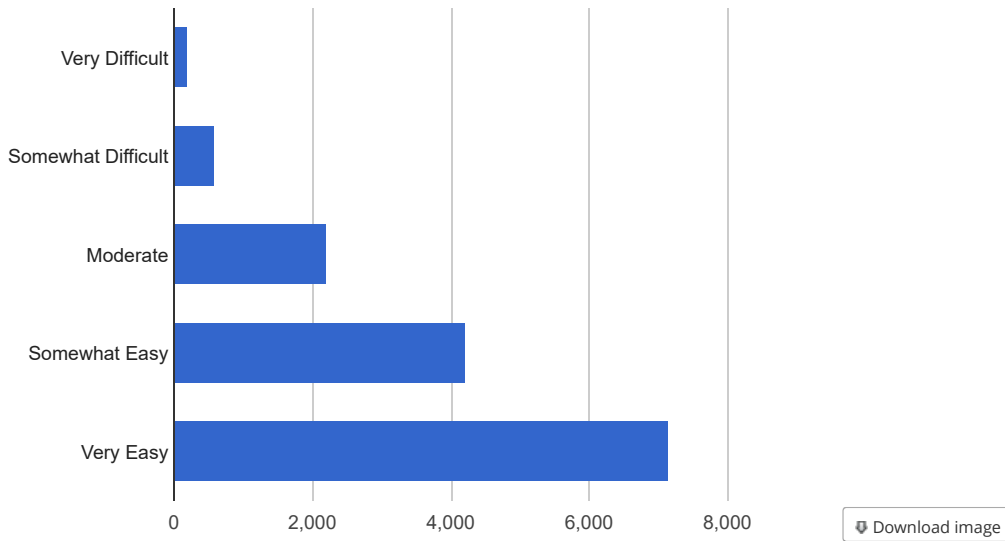
Other (*covid_concerns_other*)

Total Count (N)	Missing*
10	362 (97.3%)

Find the information you need related to COVID-19? (*covideasy*)

Total Count (N)	Missing*	Unique
247	125 (33.6%)	5

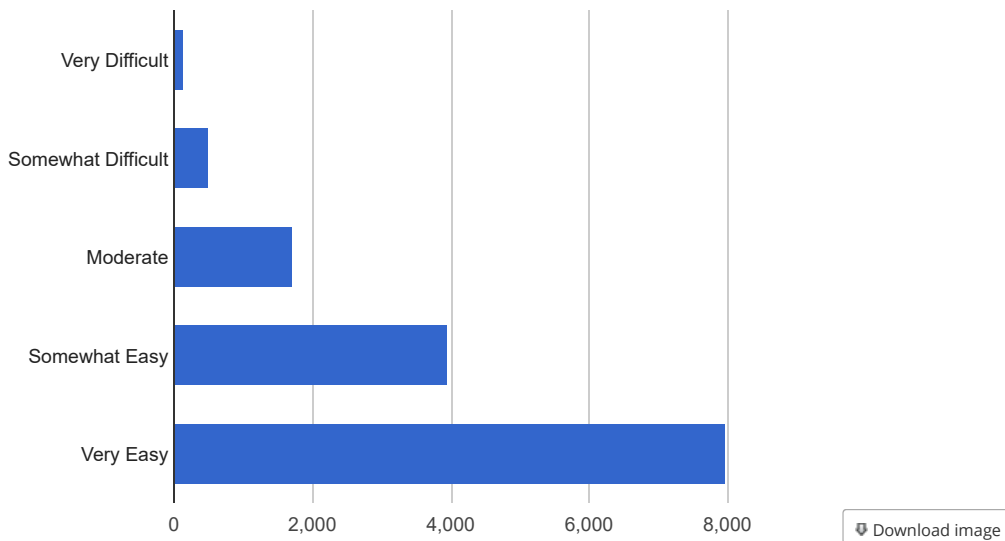
Counts/frequency: **Very Difficult** (4, 1.6%), **Somewhat Difficult** (3, 1.2%), **Moderate** (40, 16.2%), **Somewhat Easy** (77, 31.2%), **Very Easy** (123, 49.8%)



Find out where to go to get a COVID-19 vaccine? (*covidwhere*)

Total Count (N)	Missing*	Unique
247	125 (33.6%)	4

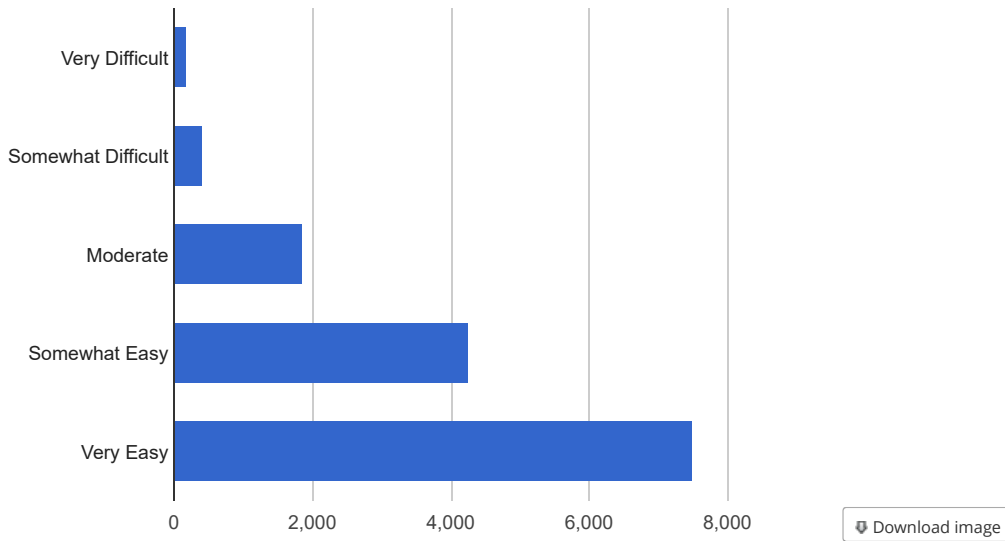
Counts/frequency: Very Difficult (0, 0.0%), Somewhat Difficult (6, 2.4%), Moderate (26, 10.5%), Somewhat Easy (73, 29.6%), Very Easy (142, 57.5%)



Understand information about what to do if you think you have COVID-19? (*covidunderstand*)

Total Count (N)	Missing*	Unique
243	129 (34.7%)	4

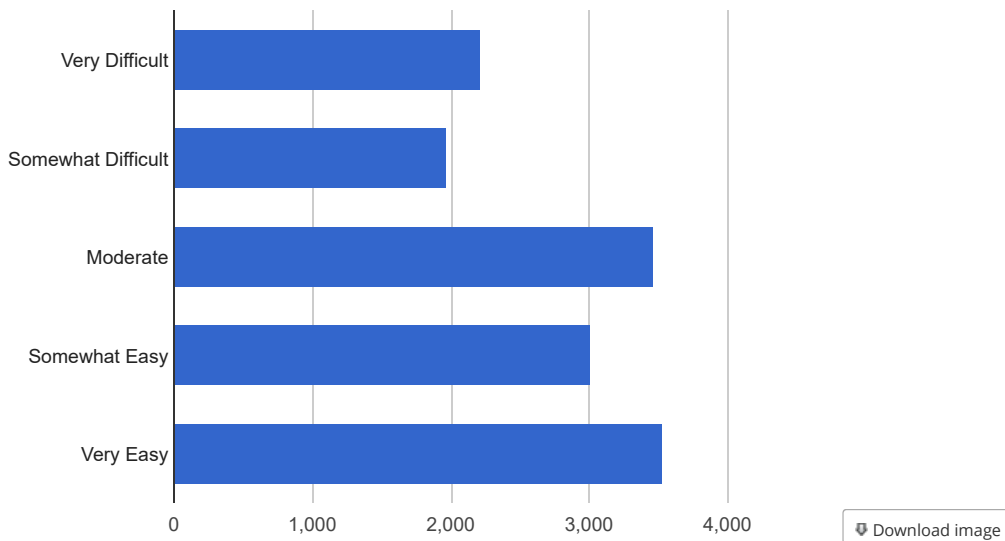
Counts/frequency: Very Difficult (0, 0.0%), Somewhat Difficult (5, 2.1%), Moderate (20, 8.2%), Somewhat Easy (75, 30.9%), Very Easy (143, 58.8%)



Trust if the information about COVID-19 in the media is reliable? (covidtrust)

Total Count (N)	Missing*	Unique
239	133 (35.8%)	5

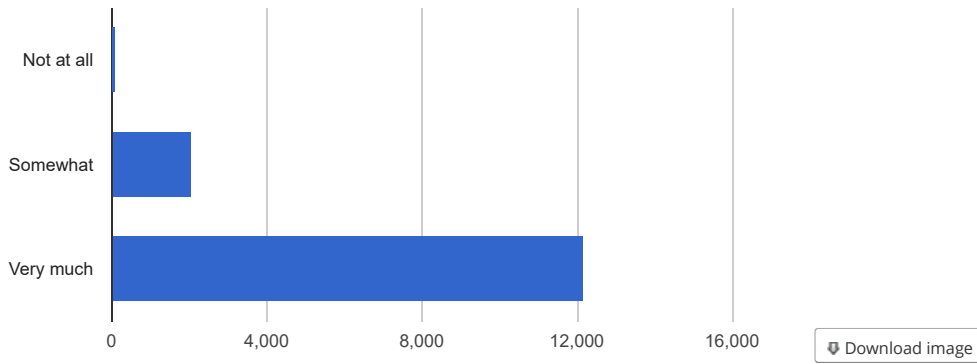
Counts/frequency: Very Difficult (37, 15.5%), Somewhat Difficult (32, 13.4%), Moderate (63, 26.4%), Somewhat Easy (46, 19.2%), Very Easy (61, 25.5%)



I know how to protect myself from coronavirus. (covidprotect)

Total Count (N)	Missing*	Unique
247	125 (33.6%)	3

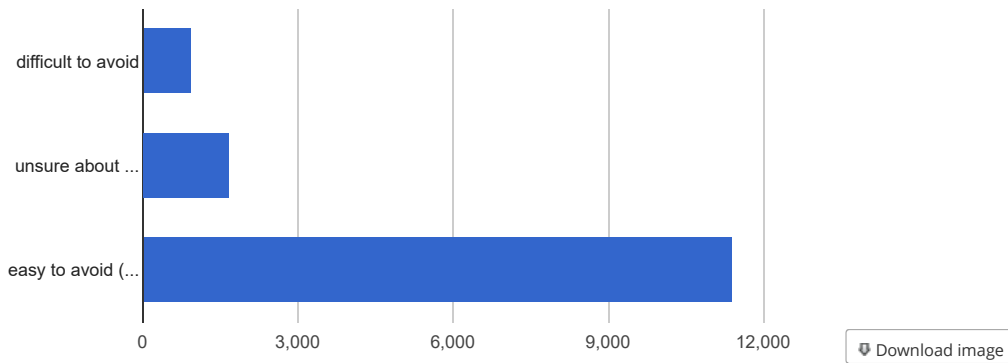
Counts/frequency: Not at all (3, 1.2%), Somewhat (42, 17.0%), Very much (202, 81.8%)



For me avoiding an infection with COVID-19 in the current situation is... (*covidavoid*)

Total Count (N)	Missing*	Unique
245	127 (34.1%)	3

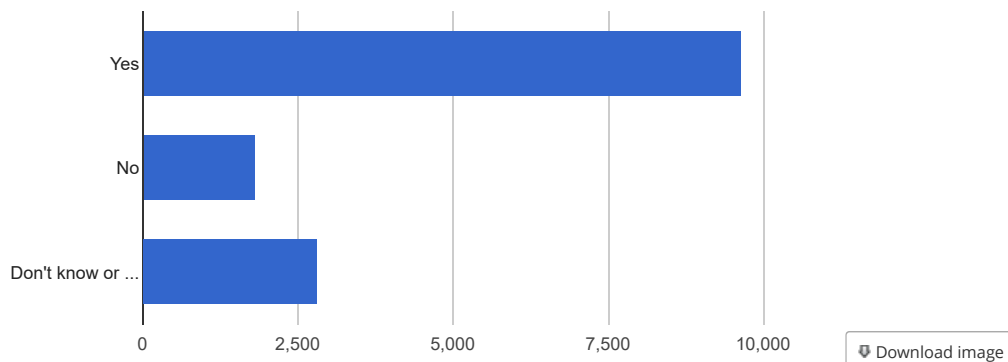
Counts/frequency: difficult to avoid (18, 7.3%), unsure about how to avoid (39, 15.9%), easy to avoid (I have no problem) (188, 76.7%)



Do you think that global warming is happening? (*warmingyesno*)

Total Count (N)	Missing*	Unique
234	138 (37.1%)	3

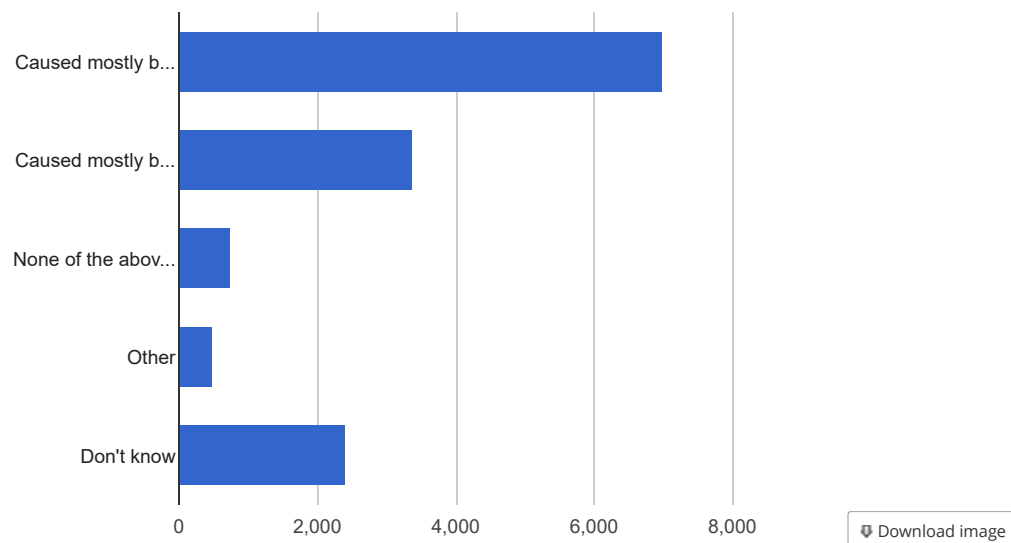
Counts/frequency: Yes (150, 64.1%), No (31, 13.2%), Don't know or unsure (53, 22.6%)



Assuming global warming is happening, do you think it is... ? (*warmingdoyouthink*)

Total Count (N)	Missing*	Unique
227	145 (39.0%)	5

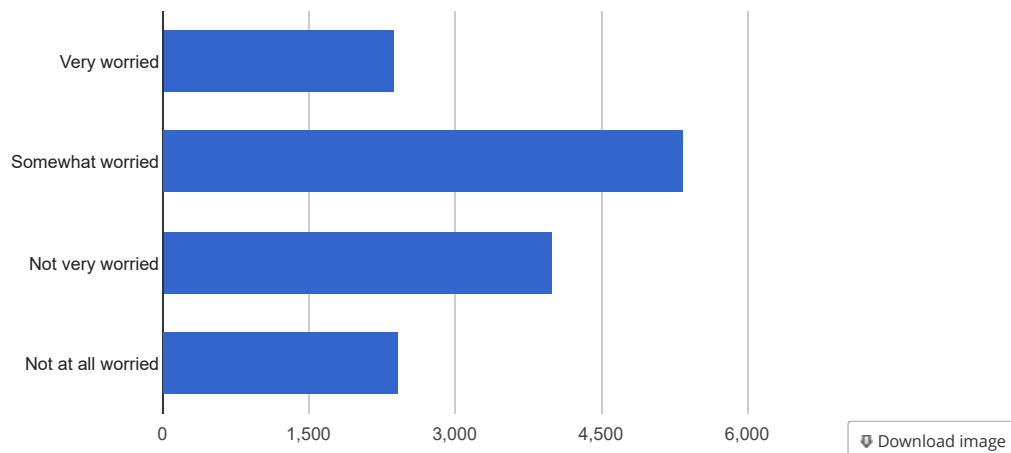
Counts/frequency: Caused mostly by human activities (86, 37.9%), Caused mostly by natural changes in the environment (75, 33.0%), None of the above because global warming isn't happening (6, 2.6%), Other (10, 4.4%), Don't know (50, 22.0%)



How worried are you about global warming? (*warmingworried*)

Total Count (N)	Missing*	Unique
229	143 (38.4%)	4

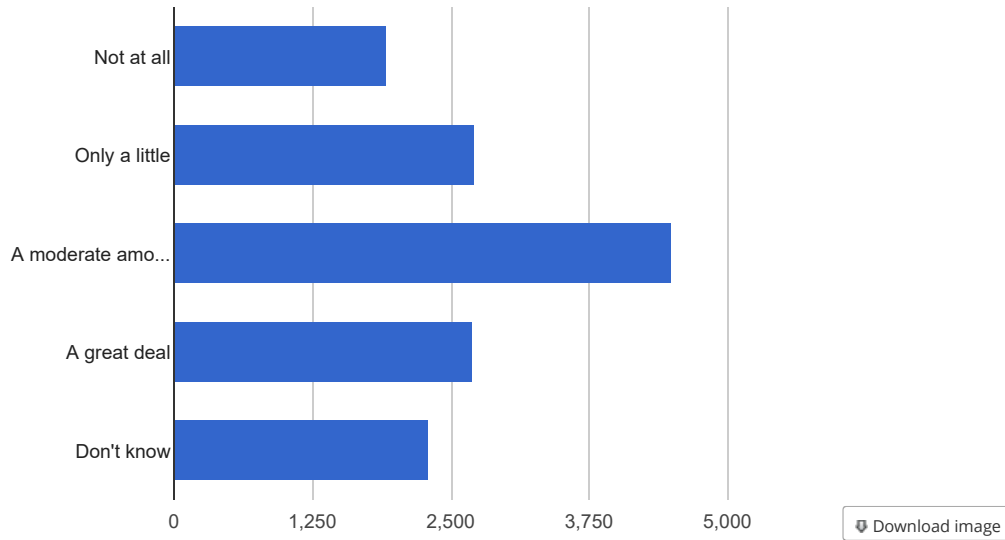
Counts/frequency: Very worried (22, 9.6%), Somewhat worried (86, 37.6%), Not very worried (76, 33.2%), Not at all worried (45, 19.7%)



How much do you think global warming will harm you personally? (*warmingharm*)

Total Count (N)	Missing*	Unique
229	143 (38.4%)	5

Counts/frequency: Not at all (27, 11.8%), Only a little (47, 20.5%), A moderate amount (62, 27.1%), A great deal (43, 18.8%), Don't know (50, 21.8%)

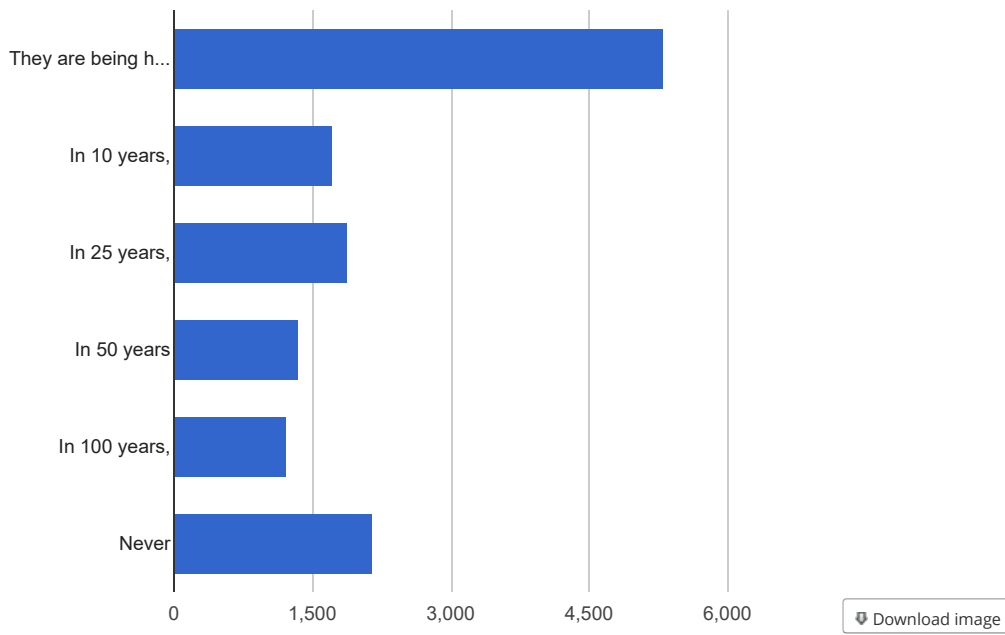


When do you think global warming will start to harm people in the United States?

(warmingwhenharm)

Total Count (N)	Missing*	Unique
221	151 (40.6%)	6

Counts/frequency: They are being harmed right now, (67, 30.3%), In 10 years, (31, 14.0%), In 25 years, (39, 17.6%), In 50 years (28, 12.7%), In 100 years, (20, 9.0%), Never (36, 16.3%)

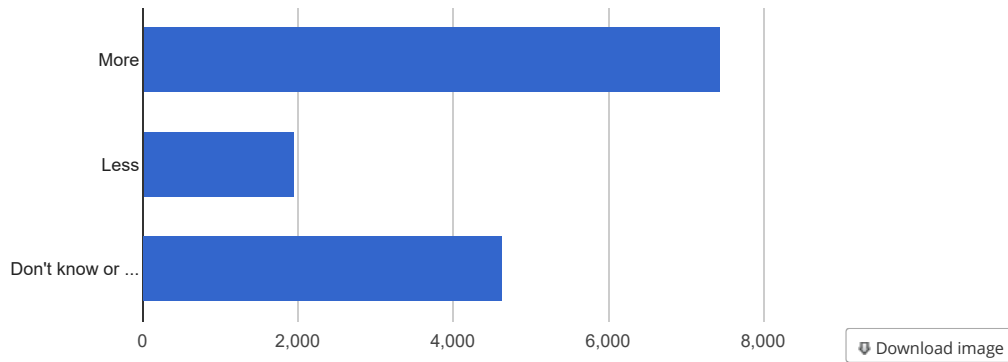


Do you think the government and politicians in your county should be doing more or less to address global warming?

(warminggovt)

Total Count (N)	Missing*	Unique
228	144 (38.7%)	3

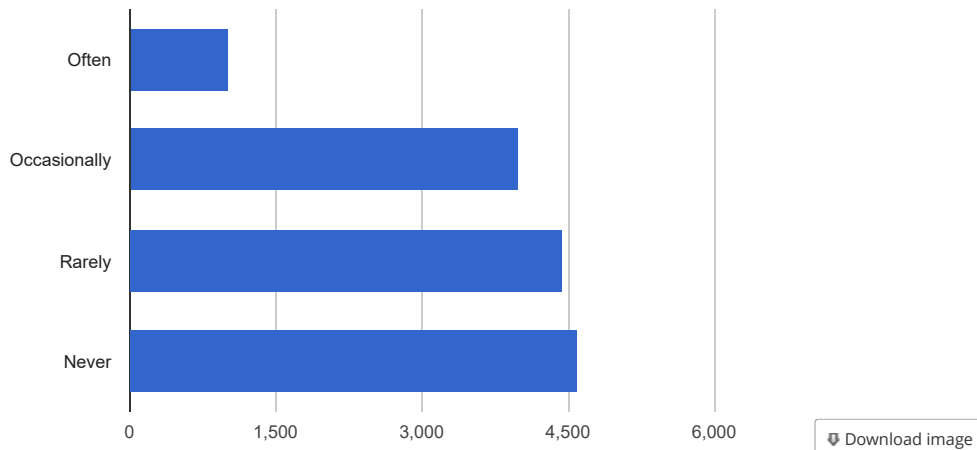
Counts/frequency: More (114, 50.0%), Less (28, 12.3%), Don't know or not sure (86, 37.7%)



How often do you discuss global warming with your friends and family? (*warmingfriends*)

Total Count (N)	Missing*	Unique
228	144 (38.7%)	4

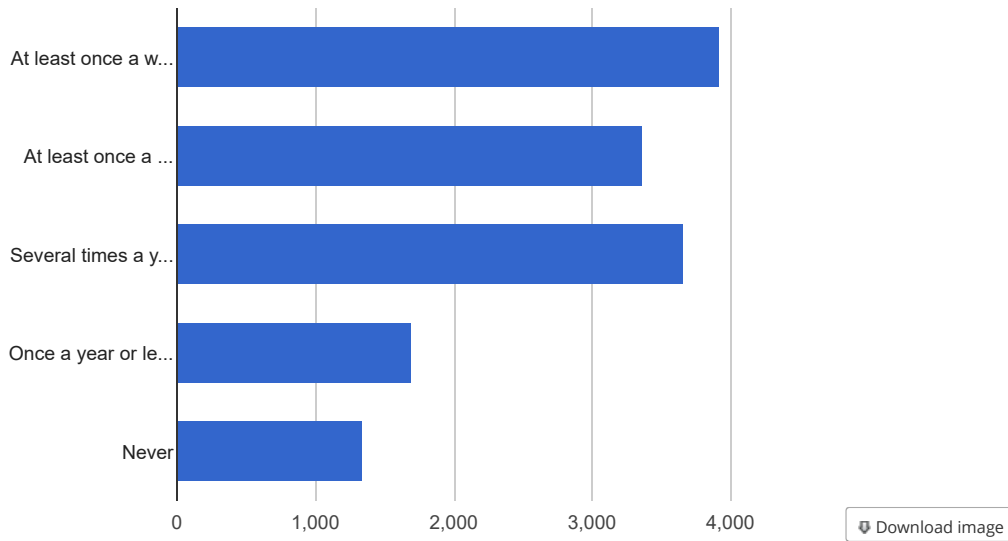
Counts/frequency: Often (5, 2.2%), Occasionally (73, 32.0%), Rarely (60, 26.3%), Never (90, 39.5%)



How often do you hear about global warming in the media? (*warmingmedia*)

Total Count (N)	Missing*	Unique
227	145 (39.0%)	5

Counts/frequency: At least once a week (51, 22.5%), At least once a month (43, 18.9%), Several times a year (56, 24.7%), Once a year or less often (40, 17.6%), Never (37, 16.3%)



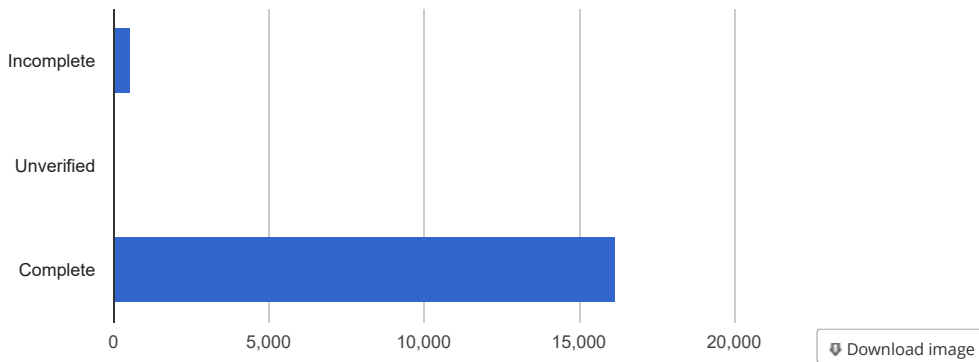
Thank you for your participation! Please feel free to include any additional comments in the box below. *(thankyou)*

Total Count (N)	Missing*
17	355 (95.4%)

Complete? *(form_1_complete)*

Total Count (N)	Missing*	Unique
372	0 (0.0%)	2

Counts/frequency: **Incomplete** (7, 1.9%), **Unverified** (0, 0.0%), **Complete** (365, 98.1%)



* Note: Values listed as 'Missing' may include records with a Missing Data Code (if Missing Data Codes are defined).

Appendix B

HNC 2030 County/State Data

Social and Economic Factors					
Health Indicator	Desired Result	Definition	Bertie County	North Carolina	HNC 2030 Target
Poverty*	All people in North Carolina are financially stable and have lifetime economic prosperity.	Percent of individuals with incomes at or below 200% of the Federal Poverty Level	No data available	31% (2020)	27.0%
Unemployment*	All people of working age in North Carolina have equitable pathway to fulfilling employment.	Percent of population aged 16 and older who are unemployed but seeking work	No data available	6.4% (2020)	Reduce unemployment disparity ratio between white and other populations to 1.7 or lower
Short-term Suspensions	All people in North Carolina are supported by a K-12 educational system that values diversity, equity, and inclusion for its students, faculty, staff, and communities.	Number of out-of-school short-term suspensions in educational facilities for all grades per 10 students	DPI unable to provide update to SCHS	1.5 (2018-2019)	0.80
Incarceration**	North Carolina embraces a fair and equitable justice system, free from racism and bias, where safety is foundational to all aspects of a free society, and all communities are free from harm and violence.	Incarceration in North Carolina prisons per 100,000 population	379 (2020)	288 (2020)	150
Adverse Childhood Experiences	All children in North Carolina thrive in safe, stable, and nurturing environments.	Percent of children who have experienced two or more Adverse Childhood Experiences at or below 200% FPL	ACEs do not have county level data	20.9% (2019/2010)	18.0%
Third Grade Reading Proficiency	All children in North Carolina can discover the joy of reading at an early age and are supported in the home, school, and community to be lifelong readers.	Percent of children reading at a proficient level or above based on third grade End of Grade exams: Proficiency defined as Level 3 or higher	DPI unable to provide update to SCHS	56.8% (2018-2019)	80.0%

Notes for social and economic factor data:

*Poverty and unemployment data come from American Community Survey – one-year estimates. 2020 ACS data are considered experimental and should not be compared to prior ACS data years. ACS data can only estimate county level data for a limited number of counties due to sample size, so 2019 data is reported here at the county level. ACS releases 5-year estimates in March 2022 that will be useful for comparisons going forward.

** Incarceration data should be age adjusted, but 2020 data set is considered experimental and does not include 13 and older population. Prior 2020, the rate is per 100,00 NC population age adjusted.

Physical Environment					
Health Indicator	Desired Result	Definition	Bertie County	North Carolina	HNC 2030 Target
Access to Exercise Opportunities	All people in North Carolina have equitable and adaptive/adaptable access to physical activity opportunities across the lifespan.	Percent of the population living half a mile from a park in any area, one mile from a recreational center in a metropolitan area, or three miles from a recreational center in a rural area	33% (2019)	74% (2019)	92.0%
Limited Access to Healthy Food*	All people in North Carolina have equitable access to affordable, nutritious, culturally appropriate foods.	Percent of people who are low-income that are not near a grocery store	3% (2015)	7% (2015)	5.0%
Food Insecurity**			18% (2018)	14% (2018)	(No target)
Severe Housing Problems	All people in North Carolina have safe, affordable, quality housing opportunities.	Percent of households with at least 1 of 4 severe housing problems	20% (2013-2017)	15% (2013-2017)	14.0%

Notes for Physical Environment data:

* The U.S. Department of Agriculture last updated this measure in 2015.

** Food insecurity added to HNC 2030 because the data are updated annually (with a two-year delay in reporting).

Health Behaviors					
Health Indicator	Desired Result	Definition	Bertie County	North Carolina	HNC 2030 Target
Drug Overdose Deaths	All individuals and families in North Carolina with substance use disorder receive person-centered care incorporating evidence-based behavioral and pharmacological approaches.	Number of persons who die because of drug poisoning per 100,000 population (unintentional poisoning deaths/overdose deaths)	26.00 (2020)	32.50 (2020)	18.0
Tobacco Use*	All people in North Carolina live in communities that support tobacco-free/e-cigarette-free lifestyles	Percentage of high school students reporting current use of any tobacco product		MS: 10.4% (2019) HS: 27.3% (2019)	9.0%
		Percentage of adults reporting current use of any tobacco product	24.8% (2020)	22.6% (2020)	15.0%
Excessive Drinking*	All North Carolina communities support safe and responsible use of alcohol.	Percent of adults reporting binge or heavy drinking	17.3% (2020)	15.6% (2020)	12.0%

Sugar-Sweetened Beverage Consumption*	All people in North Carolina live in communities that support healthy food and beverage choices.	Percent of youth reporting consumption of one or more sugar-sweetened beverages per day	DPI unable to provide update to SCHS	30.1 % (2019)	17.0%
		Percent of adults reporting consumption of one or more sugar-sweetened beverages per day	39.5% (2020)	35.4% (2019)	20.0%
HIV Diagnosis	All people in North Carolina experience sexual health with equitable access to quality and culturally competent prevention, treatment, and management of sexually transmitted infections.	Number of new HIV diagnoses per 100,000 population	18.0 (2019)	12.0 (2020)	6.0
Teen Births	All people in North Carolina live in communities support healthy choices for family planning and have equitable access to high quality, affordable reproductive health services.	Number of births to girls aged 15-19 per 1,000 population	50.1 (2019)	18.2 (2019)	10.0

Notes for Health Behaviors data:

*Adult Tobacco Use, Adult Sugar-Sweetened Beverage Consumption, and Excessive Drinking data are only available as regional data from the Behavioral Risk Factor Surveillance System.

*BRFSS Data for Adult Smoking, Adult Sugar Sweetened Beverage Consumption, and Excessive Drinking are reported for the LHD Region, and is not county level data.

Note: HIV Diagnosis *2020 data should be treated with caution due to reduced availability of testing caused by the COVID-19 pandemic.

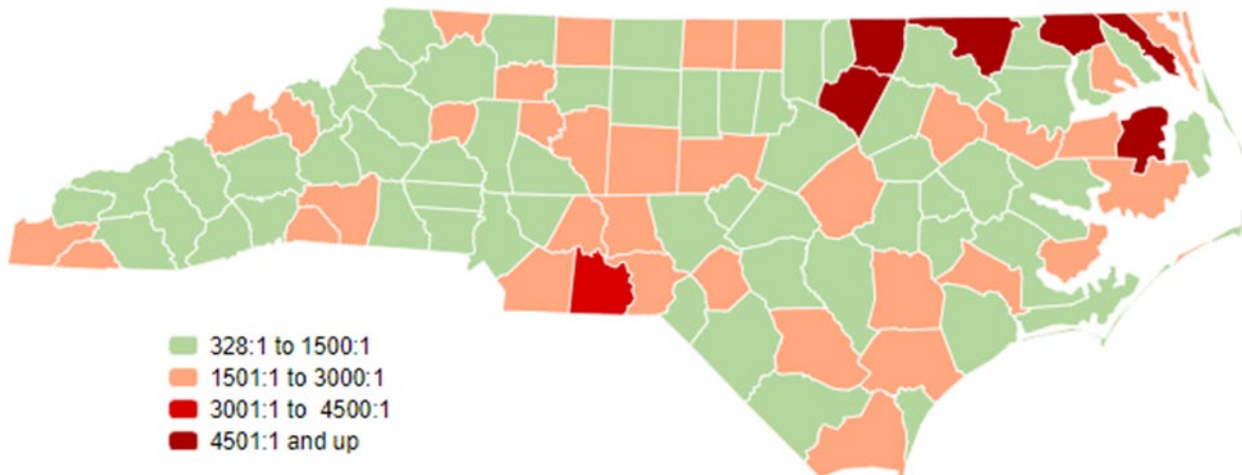
Health Outcomes					
Health Indicator	Desired Result	Definition	Bertie County	North Carolina	HNC 2030 Target
Infant Mortality	All babies in North Carolina are born healthy, thrive in caring and healthy homes, and see their first birthday.	Rate of infant deaths per 1,000 live births	16.9 (2020)	6.9 (2020)	6.0
		Disparity ratio between white non-Hispanic and African American, non-Hispanic infant deaths	4.19 (2016-2020)	2.59 (2016-2020)	Black/White disparity ratio = 1.5
Life Expectancy (years)	All people in North Carolina have long and healthy lives.	Average number of years of life remaining for persons who have attained a given age	75.6 (2020)	76.4 (2020)	82.0

Notes on Health Outcomes:

*Disparity ratio – Rates based on less than 10 deaths are unreliable and should be interpreted with caution. Source: NC Department of Health & Human Services State Center for Health Statistics, 29NOV2021. See table on website for more information.

<https://schs.dph.ncdhhs.gov/data/vital/ims/2020/2020-IMR-TABLE3b.html>

Clinical Care					
Health Indicator	Desired Result	Definition	Bertie County	North Carolina	HNC 2030 Target
Uninsured	All people in North Carolina live in communities with access to comprehensive, high quality, affordable health insurance.	Population under age 65 without insurance	No data available	12.9% (2020)	8.0%
Early Prenatal Care	All birthing people have healthy pregnancies and maternal birth outcomes.	Percentage of women who receive pregnancy-related health care services during the first trimester of pregnancy	83.1 (2020)	73.1% (2020)	80.0%
Suicide	All people in North Carolina live in communities that foster and support positive mental health.	Age-adjusted number of deaths attributable to self-harm per 100,000 population	5.4 (2020)	13.3 (2020)	11.1
Primary Care Clinicians (Counties at or below 1:1500 providersto population)	All people in North Carolina live in communities with access to comprehensive, high quality, affordable health care.	Primary care workforce as a ration of the number of full-time equivalent primary care clinicians to county population (primary care provider to population ratio)	See map below		25% decrease for counties above 1:1500 provider to population



Appendix C

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Table 1. Population Estimate, Bertie County, North Carolina, and United States (2019)					
Bertie County		North Carolina		United States	
18,947		10,488,084		328,239,523	
Estimated Percent Change April 1, 2010 to July 1, 2019	-10.9%	Estimated Percent Change April 1, 2010 to July 1, 2019	10.0%	Estimated Percent Change April 1, 2010 to July 1, 2019	6.3%
Source: U.S. Census Bureau Populations Estimate Program (PEP) & U.S. Census Bureau, American Community Survey (ACS) 1-Year Estimate https://www.census.gov/quickfacts/fact/table/bertiecountynorthcarolina/RHI825219					

Table 2. Age Distribution, Bertie County and North Carolina (2019)		
Age Group	Bertie County (%)	North Carolina (%)
Persons under 5 years	4.3%	5.8%
Persons under 18 years	17.4%	21.9%
Persons 65 years and over	23.6%	16.7%
Source: U.S. Census Bureau Populations Estimate Program (PEP) & U.S. Census Bureau, American Community Survey (ACS) 1-Year Estimate https://www.census.gov/quickfacts/fact/table/bertiecountynorthcarolina/RHI825219		

Table 3. Age Distribution by Age Group, Bertie County (2015-2019)		
Age Group	Estimate	Percent
Total population	19,380	100%
Under 5 years	825	4.3%
5 to 9 years	1,004	5.2%
10 to 14 years	958	4.9%
15 to 19 years	1,026	5.3%
20 to 24 years	1,171	6.0%
25 to 34 years	2,454	12.7%
35 to 44 years	2,133	11.0%
45 to 54 years	2,443	12.6%
55 to 59 years	1,456	7.5%
60 to 64 years	1,666	8.6%
65 to 74 years	2,362	12.2%
75 to 84 years	1,337	6.9%
85 years and over	545	2.8%
Median age (years)	45.4	
Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates Data are based on a sample and are subject to sampling variability. Table ID: DP05 https://data.census.gov/cedsci/table?q=DP05&g=0500000US37015&tid=ACSDP5Y2019.DP05&hidePreview=true&moe=false		

Gender	Bertie (Percent)	North Carolina (Percent)
Female	49.3%	51.4%
Male	50.7%	48.6%

Source: U.S. Census Bureau Populations Estimate Program (PEP) & U.S. Census Bureau, American Community Survey (ACS) 1-Year Estimate. Sex estimates of the population are produced for the United States, states, and counties, as well as for the Commonwealth of Puerto Rico and its municipios (county-equivalents for Puerto Rico). Sex is based on the biological attributes of men and women (chromosomes, anatomy, and hormones).
<https://www.census.gov/quickfacts/fact/table/bertiecountynorthcarolina/RHI825219>

	Number	Percent of population 18 years and older
Veterans	1,130	7.1%

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates
Table ID: S2101
<https://data.census.gov/cedsci/table?text=veteran%20status&g=0500000US37015&tid=ACSS15Y2019.S2101&moe=false&hidePreview=true>

Race	Bertie County		North Carolina	
	Number	Percent	Number	Percent
White	6,830	35.2%	7,049,919	68.7%
Black or African American	11,933	61.6%	2,200,761	21.4%
American Indian and Alaska Native	138	0.7%	123,952	1.2%
Asian	151	0.8%	292,992	2.9%
Native Hawaiian and Other Pacific Islander	1	0.0%	7,213	0.1%
Hispanic or Latino (of any race)	413	2.1%	962,665	9.4%
Some other race	156	0.8%	316,763	3.1%
Two or more races	171	0.9%	273,276	2.7%
Total	19,380		10,264,876	

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates
Table ID: DP05
<https://data.census.gov/cedsci/table?q=DP05&g=0500000US37015&tid=ACSDP5Y2019.DP05&hidePreview=true&moe=false>

Table 7. Hispanic or Latino Origin and Race, Bertie County and North Carolina (2015-2019)

County/State	Race and Hispanic or Latino Origin in the past 12 months						
	White alone	Black or African American	American Indian and Alaska Native	Asian alone	Native Hawaiian and other Islander alone	Some Other race alone	Two or more races
Bertie County	34.6%	61.1%	0.6%	0.8%	0.0%	0.0%	0.8%
North Carolina	63.1%	21.1%	1.1%	2.8%	0.1%	0.2%	2.2%

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates.
 Table ID: DP05
<https://data.census.gov/cedsci/table?q=DP05&g=0500000US37015&tid=ACSDP5Y2019.DP05&hidePreview=true&moe=false>

Table 8. Limited English-Speaking Households, Bertie County (2015-2019)

All households	7,909	
Limited English-speaking households	18 ± 30	0.2%
Households Speaking:		
	Number	Percent
Spanish	150 (± 74)	1.9%
Other Indo-European languages	62 (± 41)	0.8%
Asian and Pacific Island languages	57 (± 34)	0.7%
Other languages	0 (±19)	0.0%

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates.
 Table ID: S1602
<https://data.census.gov/cedsci/table?q=S1602&g=0500000US37015&tid=ACSST5Y2019.S1602&hidePreview=true>

Table 9. Educational Attainment Population 25+ years, Bertie County and North Carolina (2015-2019)

	Bertie County	North Carolina
High School Graduate or Higher	78.4%	87.8%
Less than 9 th Grade	6.3%	4.5%
High School, No Diploma	15.4%	7.7%
High School Graduate or Equivalency	38.1%	25.7%
Some College, No Degree	19.4%	21.2%
Associate Degree	7.2%	9.7%
Bachelor's Degree	8.2%	20.0%
Graduate or Professional Degree	5.5%	11.3%

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates
 Table ID: S1501
<https://data.census.gov/cedsci/table?q=S1501&g=0500000US37015&tid=ACSST5Y2019.S1501&hidePreview=true>

Table 10. SAT scores for Bertie County Public Schools with State and National Scores (2016-2019)

	SAT Scores			
	2019	2018	2017	2016
Bertie County	887	910	912	1,188
North Carolina	1,091	1,090	1,074	997
United States	1,039	1,049	NR	NR

Source: North Carolina School Report Cards
<https://ncreports.ondemand.sas.com/src/?county=Bertie>

Table 11. ACT Scores for Bertie County Public Schools and North Carolina (2016-2019)

	ACT Proficiency			
	2019	2018	2017	2016
Bertie County	25.7%	32.1%	34.7%	40.4%
North Carolina	55.8%	57.9%	58.8%	59.9%

Source: North Carolina School Report Cards
<https://ncreports.ondemand.sas.com/src/?county=Bertie>

Table 12. Income per Household in the Past 12 Months (Inflation-Adjusted Dollars), Bertie County and North Carolina (2015-2019)

Income Level	Bertie County	North Carolina
Below \$10,000	11.7%	6.4%
\$10,000-\$14,999	9.5%	5.0%
\$15,000-\$24,999	16.6%	10.3%
\$25,000-\$34,999	11.5%	10.3%
\$35,000-\$49,999	15.1%	13.9%
\$50,000-\$74,999	16.2%	18.0%
\$75,000-\$99,999	6.9%	12.4%
\$100,000-\$149,999	6.0%	13.1%
\$150,000-\$199,999	4.3%	5.1%
\$200,000 or more	2.4%	5.4%
Median household income	\$35,527	\$54,602

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates
Table ID: S1901
<https://data.census.gov/cedsci/table?q=income&g=0500000US37015&tid=ACSST5Y2019.S1901&moe=false&hidePreview=true>

Table 13. Poverty Status of Households Disaggregated by Age, Bertie County and North Carolina (2015-2019)						
County/State	Age Group					
	Under 5 years	5-17 years	18-34 years	35-64 years	60 years and over	65 years and over
Bertie County	40.5%	39.2%	26.4%	18.9%	14.8%	14.7%
North Carolina	23.8%	20.2%	18.3%	11.3%	9.8%	9.1%

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates
Table ID: S1701
<https://data.census.gov/cedsci/table?q=Bertie%20county%20north%20carolina%20poverty%20status&tid=ACSST5Y2019.S1701&hidePreview=true>

Table 14. Means of Transportation to Work, Bertie County (2015-2019)	
	Bertie County, North Carolina
Total:	7,196
Car, truck, or van:	6,688
Drove alone	5,814
Carpooled:	874
In 2-person carpool	666
In 3-person carpool	128
In 4-person carpool	40
In 5- or 6-person carpool	2
In 7-or-more-person carpool	38
Public transportation (excluding taxicab):	64
Bus	64
Subway or elevated rail	0
Long-distance train or commuter rail	0
Light rail, streetcar, or trolley (carro público in Puerto Rico)	0
Ferryboat	0
Taxicab	12
Motorcycle	0
Bicycle	0
Walked	117
Other means	66
Worked from home	249

Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates
Table ID: B08301
<https://data.census.gov/cedsci/table?q=B08301&text=means%20of%20transportation&g=0500000US37015&tid=ACSST5Y2019.B08301&moe=false&hidePreview=true>

Table 15. Financial Characteristics for Housing Units With a Mortgage in Bertie County (2015-2019)

	Bertie County, North Carolina	
	Owner-occupied housing units with a mortgage	% owner-occupied housing units with a mortgage
Owner-Occupied Housing Units with a Mortgage	2,591	2,591
Less than \$50,000	484	18.7%
\$50,000 to \$99,999	781	30.1%
\$100,000 to \$299,999	1,134	43.8%
\$300,000 to \$499,999	132	5.1%
\$500,000 to \$749,999	34	1.3%
\$750,000 to \$999,999	16	0.6%
\$1,000,000 or more	10	0.4%
Median (dollars)	\$102,200	\$102,200
Mortgage Status		
With either a second mortgage, or home equity loan, but not both	298	11.5%
Second mortgage only	26	1.0%
Home equity loan only	272	10.5%
Both second mortgage and home equity loan	0	0.0%
No second mortgage and no home equity loan	2,293	88.5%
Household Income in the Past 12 Months (in 2019 inflation-adjusted dollars)		
Less than \$10,000	136	5.2%
\$10,000 to \$24,999	302	11.7%
\$25,000 to \$34,999	223	8.6%
\$35,000 to \$49,999	366	14.1%
\$50,000 to \$74,999	632	24.4%
\$75,000 to \$99,999	363	14.0%
\$100,000 to \$149,999	280	10.8%
\$150,000 or more	289	11.2%
Median household income (dollars)	\$62,224	\$62,224
Source: U.S. Census Bureau, American Community Survey (ACS), 5-Year Estimates Table ID: S2506 https://data.census.gov/cedsci/table?q=Owner-occupied%20units%20with%20a%20Mortgage&g=0500000US37015&tid=ACSST5Y2019.S2506&moe=false&hidePreview=true		

Table 16. Financial Characteristics for Housing Units Without a Mortgage in Bertie County (2015-2019)		
	Bertie County, North Carolina	
	Owner-occupied housing units without a mortgage	% owner-occupied housing units without a mortgage
Owner-Occupied Housing Units with a Mortgage	3,296	3,296
Less than \$50,000	1,179	35.8%
\$50,000 to \$99,999	1,146	34.8%
\$100,000 to \$199,999	675	20.5%
\$200,000 to \$299,999	223	6.8%
\$300,000 to \$499,999	73	2.2%
\$500,000 to \$749,999	0	0.0%
\$750,000 to \$999,999	0	0.0%
\$1,000,000 or more	0	0.0%
Median (dollars)	\$71,300	\$71,300
Household Income in the Past 12 Months (in 2019 inflation-adjusted dollars)		
Less than \$10,000	427	13.0%
\$10,000 to \$24,999	1,074	32.6%
\$25,000 to \$34,999	427	13.0%
\$35,000 to \$49,999	334	10.1%
\$50,000 to \$74,999	486	14.7%
\$75,000 to \$99,999	171	5.2%
\$100,000 to \$149,999	155	4.7%
\$150,000 or more	222	6.7%
Median household income (dollars)	\$29,139	\$29,139
Source: U.S. Census Bureau, American Community Survey (ACS) 5-Year Estimates Table ID: S2507 https://data.census.gov/cedsci/table?q=without%20a%20Mortgage&g=0500000US37015&tid=ACSST5Y2019.S2507&moe=false&hidePreview=true		

Table 17. Live Births, Bertie County and North Carolina (2018)

County/State	Total Births	Total Rate	White-non-Hispanic number	White non-Hispanic rate	Black, non-Hispanic number	Black non-Hispanic rate	Hispanic number	Hispanic rate
Bertie County	179	9.4	60	9.0	113	9.7	5	11.7
North Carolina	118,957	11.5	64,637	9.8	28,719	12.5	18,359	18.4

Source: N.C. State Center for Health Statistics
<https://schs.dph.ncdhhs.gov/data/vital/volume1/2018/bertie.html>

Table 18. Live Births by Sex, Bertie County (2018)

County/State	Total	Total Rate	White, Non-Hispanic	White, Non-Hispanic rate	Black, non-Hispanic	Black, non-Hispanic rate	Hispanic	Hispanic rate
Male	96	5.0	30	4.5	63	5.4	2	4.7
Females	83	4.4	30	4.5	50	4.3	3	7.0

Source: N.C. State Center for Health Statistics
<https://schs.dph.ncdhhs.gov/data/vital/volume1/2018/bertie.html>

Table 19. Low Birth Weight, Bertie County and North Carolina (2014-2018)

County of Residence	Birth Weight	Total		Non-Hispanic									
		Births	Pct.	Total		White		Black		Other		Hispanic	
		Births	Pct.	Births	Pct.	Births	Pct.	Births	Pct.	Births	Pct.	Births	Pct.
North Carolina	Low	55,413	9.2	48,847	9.6	25,047	7.6	20,450	14.2	3,350	9.4	6,566	7.2
	Very Low	10,222	1.7	9,080	1.8	4,011	1.2	4,591	3.2	478	1.3	1,142	1.3
Bertie County	Low	116	13.3	112	13.1	17	7.0	94	15.6	1	12.5	4	20.0
	Very Low	26	3.0	25	2.9	2	0.8	23	3.8	0	0.0	1	5.0

Source: N.C. State Center for Health Statistics
<https://schs.dph.ncdhhs.gov/data/databook/CD6A-B%20LBW%20&%20VLBW%20by%20race.html>

Table 20. Fetal Death Rates per 1,000 Deliveries, Bertie County and North Carolina (2014-2018)

	Total Fetal Deaths	Total Fetal Death Rate	White Non-Hispanic Fetal Deaths	White Non-Hispanic Fetal Death Rate	Af. Am. Non-Hispanic Fetal Deaths	Af. Am. Non-Hispanic Fetal Death Rate	Other Non-Hispanic Fetal Deaths	Other Non-Hispanic Fetal Death Rate	Hispanic Fetal Deaths	Hispanic Fetal Death Rate
North Carolina	4,166	6.9	1,764	5.3	1,682	11.6	194	5.4	526	5.7
Bertie	11	*	2	*	9	*	0	*	0	*

Source: N.C. State Center for Health Statistics
<https://schs.dph.ncdhhs.gov/data/databook/CD8%20fetal%20death%20rates.rtf>

Table 21. Cancer Incidence Rates for Selected Sites per 100,000 Population Age-Adjusted to the 2000 U.S. Census, Bertie County and North Carolina (2012-2016)

County	Colon/Rectum		Lung/Bronchus		Female Breast		Prostate		All Cancers	
	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate
North Carolina	21,168	37.1	40,216	68.8	49,457	161.8	35,584	115.9	277,277	481.9
Bertie	64	41.1	121	80.7	124	166.6	92	133.8	662	452.9

Source: N.C. State Center for Health Statistics

<https://schs.dph.ncdhhs.gov/data/databook/CD13A%20leadingcancers.xlsx>

Table 22. Neonatal (<28 Days) Death Rates, Bertie County and North Carolina (2014-2018)

	Total neonatal deaths	Total neonatal death rate	White non-Hispanic neonatal deaths	White non-Hispanic neonatal death rate	Af. Am. Non-Hispanic neonatal deaths	Af. Am. Non-Hispanic neonatal death rate	Other non-Hispanic neonatal deaths	Other non-Hispanic neonatal death rate	Hispanic neonatal deaths	Hispanic neonatal death rate
North Carolina	2,865	4.8	1,092	3.3	1,247	8.7	160	4.5	366	4.0
Bertie County	9	*	1	*	8	*	0	*	0	*

Prepared by N.C. Department of Health and Human Services State Center for Health Statistics

Note: rates based on small numbers (fewer than 20 cases) are unstable and are not reported"

<https://schs.dph.ncdhhs.gov/data/databook/CD9A%20neonatal%20death%20rates.rtf>

Table 23. Age-Adjusted Death Rates, Bertie County (2014-2018)

Cause of Death:	White, non-Hispanic		African American, non-Hispanic		American Indian, non-Hispanic		Other Races, non-Hispanic		Hispanic		Male		Female		Overall	
	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate
All Causes	544	878.0	704	861.0	1	N/A	1	N/A	1	N/A	626	1,011.0	625	728.3	1,251	857.8
Diseases of Heart	108	165.9	149	177.6	0	N/A	0	N/A	0	N/A	141	222.1	116	129.5	257	171.2
Acute Myocardial Infarction	16	N/A	19	N/A	0	N/A	0	N/A	0	N/A	13	N/A	22	25.0	35	23.6
Other Ischemic Heart Disease	51	77.6	47	54.7	0	N/A	0	N/A	0	N/A	63	97.3	35	39.2	98	64.6
Cerebrovascular Disease	33	48.4	41	45.1	0	N/A	0	N/A	0	N/A	31	45.5	43	44.6	74	45.9
Cancer	124	192.9	132	156.1	0	N/A	0	N/A	0	N/A	137	207.0	119	141.2	256	168.8
Colon, Rectum, and Anus	6	N/A	14	N/A	0	N/A	0	N/A	0	N/A	11	N/A	9	N/A	20	13.9
Pancreas	10	N/A	6	N/A	0	N/A	0	N/A	0	N/A	7	N/A	9	N/A	16	N/A
Trachea, Bronchus, and Lung	40	55.2	33	37.5	0	N/A	0	N/A	0	N/A	46	66.2	27	28.7	73	45.0
Breast	6	N/A	12	N/A	0	N/A	0	N/A	0	N/A	0	N/A	18	N/A	18	N/A
Prostate	5	N/A	5	N/A	0	N/A	0	N/A	0	N/A	10	N/A	0	N/A	10	N/A
Diabetes Mellitus	31	49.2	71	84.9	0	N/A	0	N/A	1	N/A	47	73.3	56	64.4	103	69.2
Pneumonia and Influenza	7	N/A	9	N/A	0	N/A	0	N/A	0	N/A	10	N/A	6	N/A	16	N/A
Chronic Lower Respiratory Diseases	24	39.0	22	23.4	0	N/A	1	N/A	0	N/A	26	40.0	21	24.7	47	29.9
Chronic Liver Disease and Cirrhosis	8	N/A	2	N/A	0	N/A	0	N/A	0	N/A	6	N/A	4	N/A	10	N/A
Septicemia	11	N/A	15	N/A	0	N/A	0	N/A	0	N/A	14	N/A	12	N/A	26	17.5
Nephritis, Nephrotic Syndrome, and Nephrosis	12	N/A	8	N/A	0	N/A	0	N/A	0	N/A	10	N/A	10	N/A	20	13.4
Unintentional Motor Vehicle Injuries	14	N/A	23	38.5	0	N/A	0	N/A	0	N/A	24	49.5	13	N/A	37	36.9
All Other Unintentional Injuries	23	45.2	13	N/A	1	N/A	0	N/A	0	N/A	20	38.6	17	N/A	37	31.4
Suicide	10	N/A	2	N/A	0	N/A	0	N/A	0	N/A	10	N/A	2	N/A	12	N/A
Homicide	2	N/A	12	N/A	0	N/A	0	N/A	0	N/A	10	N/A	4	N/A	14	N/A
Alzheimer's disease	28	39.8	33	36.0	0	N/A	0	N/A	0	N/A	27	43.7	34	31.9	61	36.7
Acquired Immune Deficiency Syndrome	0	N/A	2	N/A	0	N/A	0	N/A	0	N/A	0	N/A	2	N/A	2	N/A

Source: N.C. State Center for Health Statistics

<https://schs.dph.ncdhhs.gov/data/databook/CD12B%20racespecific%20and%20sexspecific%20rates.rtf>

Table 24. North Carolina Newly Diagnosed Chlamydia, Gonorrhea, and Early Syphilis (Primary, Secondary and Early Latent) Infections by Residence at Time of Diagnosis, Bertie County (2018-2020)

County	Chlamydia			Gonorrhea			P. & S. Syphilis			E. L. Syphilis		
	2018 Jan- Mar	2019 Jan- Mar	2020 Jan- Mar	2018 Jan- Mar	2019 Jan- Mar	2020 Jan- Mar	2018 Jan- Mar	2019 Jan- Mar	2020 Jan- Mar	2018 Jan- Mar	2019 Jan- Mar	2020 Jan- Mar
Bertie	48	42	37	14	13	9	0	0	0	0	1	0

Source: N.C. Division of Health and Human Services Communicable Disease Branch
<https://epi.dph.ncdhhs.gov/cd/stds/figures/vol20no1.pdf>

Table 25. All Other Unintentional Injuries Death Rates per 100,000 Residents, Bertie County and North Carolina (2018) and (2014-2018)

County/State	Number of Deaths 2018	Death Rate 2018	Number of Deaths 2014-2018	Death Rate 2014-2018	Age-Adjusted Death Rate 2014-2018
Bertie County	7	36.8	37	37.7	31.4
North Carolina	4,478	43.1	19,576	38.6	37.0

Source: N.C. State Center for Health Statistics
<https://schs.dph.ncdhhs.gov/data/vital/lcd/2018/otherinjuries.html>

Table 26. Age-Adjusted Unintentional Motor Vehicle Injury Death Rates per 100,000 Residents, Bertie County and North Carolina (2018) and (2014-2018)

County/State	Number of Deaths 2018	Death Rate 2018	Number of Deaths 2014-2018	Death Rate 2014-2018	Age-Adjusted Death Rate 2014-2018
Bertie County	5	26.3	37	37.7	36.9
North Carolina	1,591	15.3	7,553	14.9	14.5

Source: N.C. State Center for Health Statistics
<https://schs.dph.ncdhhs.gov/data/vital/lcd/2018/motorvehicle.html>

Table 27. Crime Rate per 100,000 persons, Bertie County and North Carolina (2018)

County/State	Violent Crime Rate				Property Crime Rate		
	Murder	Rape	Robbery	Agg Assault	Burglary	Larceny	MVT
North Carolina	356.6				2,406.6		
	5.8	23.7	77.1	250.0	577.4	1,667.2	162.0
Bertie County	162.5				855.9		

Source: N.C. Bureau of Investigation
 ‘-’ indicates missing data for full 12-month period for over 50 percent of the county population for 2017 and 2018
<http://ncsbi.gov/Services/SBI-Statistics/SBI-Uniform-Crime-Reports/2018-Annual-Summary.aspx>

Table 28. Poisoning Mortality Rates per 100,000 North Carolina Resident Deaths, Bertie County and North Carolina (2015-2019)

County of Residence	Total Deaths	Crude Rate	Age-Adjusted Rate
North Carolina	9,367	18.25	18.80
Bertie County	12	12.22	12.50

Source: N.C. State Center for Health Statistics. (2015-2019). Poisoning Mortality Rates (per 100,000) 2015-2019 North Carolina Resident Deaths.

Table 29. Poisoning Mortality Rates by Race/Ethnicity per 100,000 North Carolina Resident Deaths (2019)

Race/Ethnicity	Total Deaths	Population Estimate	Crude Rate	Age-Adjusted Rate
White, non-Hispanic	1,667	6,668,532	25.00	26.60
Black, non-Hispanic	349	2,320,112	15.04	15.20
American Indian, non-Hispanic	55	124,642	44.13	47.10
Other, non-Hispanic	15	348,968	4.30	3.90
Hispanic	62	1,025,830	6.04	6.50
North Carolina Total	2,148	10,488,084	20.48	21.20

Source: N.C. State Center for Health Statistics. (2019). Poisoning Mortality Rates (per 100,000) by Race/Ethnicity 2019 North Carolina Resident Deaths.

Table 30. Poisoning Mortality Rates by Sex 2019 per 100,000 North Carolina Resident Deaths (2019)

Gender	Total Deaths	Population Estimate	Crude Rate	Age-Adjusted Rate
Male	1,485	5,100,264	29.12	30.00
Female	663	5,387,820	12.31	12.70
North Carolina Total	2,148	10,488,084	20.48	21.20

Source: N.C. State Center for Health Statistics. (2019). Poisoning Mortality Rates (per 100,000) by Sex 2019 North Carolina Resident Deaths.

Image 1. 2019 BRFSS Survey Results: North Carolina Regions Hypertension Awareness: Adults who have been told they have high blood pressure by a doctor, nurse, or other health professional (CDC calculated variable)

	Total Respond.^	Yes			No		
		N	%	C.I.(95%)	N	%	C.I.(95%)
North Carolina	4,266	1,674	35.1	33.5-36.8	2,592	64.9	63.2-66.5
Medicaid Region 6	503	159	31.9	27.3-36.9	344	68.1	63.1-72.7
GENDER							
Male	233	75	30.5	23.9-37.9	158	69.5	62.1-76.1
Female	270	84	33.3	27.1-40.0	186	66.7	60.0-72.9
RACE							
Non-Hispanic White	313	96	29.2	23.9-35.1	217	70.8	64.9-76.1
Non-Hispanic Black	103	***	***	***	***	***	***
Other	87	18	15.7	9.5-25.0	69	84.3	75.0-90.5
AGE							
18-44	216	29	13.4	9.0-19.5	187	86.6	80.5-91.0
45-64	179	72	42.6	34.1-51.5	107	57.4	48.5-65.9
65+	98	***	***	***	***	***	***

Source: N.C. State Center for Health Statistics

https://schs.dph.ncdhhs.gov/data/brfss/2019/Medicaid/region6/_RFHYPE.html

Image 2. 2019 BRFSS Survey Results: North Carolina Regions Chronic Health Conditions: History of any cardiovascular diseases

	Total Respond.^	Yes			No		
		N	%	C.I.(95%)	N	%	C.I.(95%)
North Carolina	4,250	495	9.7	8.8-10.8	3,755	90.3	89.2-91.2
Medicaid Region 6	507	29	5.6	3.8- 8.3	478	94.4	91.7-96.2

Source: N.C. State Center for Health Statistics

<https://schs.dph.ncdhhs.gov/data/brfss/2019/Medicaid/region6/cvdhist.html>

Image 3. 2019 BRFSS Survey Results: North Carolina Regions Healthy Days: Frequent Mental Distress (within the past 30 days)

	Total Respond.^	Yes			No		
		N	%	C.I.(95%)	N	%	C.I.(95%)
North Carolina	4,214	532	13.8	12.5-15.1	3,682	86.2	84.9-87.5
Medicaid Region 6	500	53	10.7	7.8-14.4	447	89.3	85.6-92.2
GENDER							
Male	235	21	8.9	5.1-15.1	214	91.1	84.9-94.9
Female	265	32	12.5	8.7-17.6	233	87.5	82.4-91.3
RACE							
Non-Hispanic White	309	29	10.4	6.8-15.7	280	89.6	84.3-93.2
Non-Hispanic Black	102	12	10.7	6.0-18.4	90	89.3	81.6-94.0
Other	89	12	12.4	6.9-21.5	77	87.6	78.5-93.1
AGE							
18-44	215	34	13.5	9.4-19.0	181	86.5	81.0-90.6
45-64	178	15	12.3	6.4-22.1	163	87.7	77.9-93.6
65+	97	***	***	***	93	96.1	89.0-98.7

Source: N.C. State Center for Health Statistics

<https://schs.dph.ncdhhs.gov/data/brfss/2019/Medicaid/region6/FMD.html>

Image 4. All ages: Leading Causes of Injury Death, Hospitalization, and Emergency Department Visits by County, Bertie County (2016-2019)

Leading Causes of Injury Death 2016 to 2019 BERTIE			Leading Causes of Injury Hospitalization 2016 to 2019 BERTIE			Leading Causes of Injury ED Visits 2016 to 2019 BERTIE		
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#
1	MVT - Unintentional	24	1	Fall - Unintentional	209	1	Fall - Unintentional	2,539
2	Poisoning - Unintentional	15	2	MVT - Unintentional	79	2	Unspecified - Unintentional	1,848
3	Firearm - Assault	8	3	Poisoning - Unintentional	41	3	MVT - Unintentional	1,420
4	Fall - Unintentional	7	4	Poisoning - Self-Inflicted	20	4	Struck By/Against - Unintentional	871
5	Unspecified - Unintentional; Suffocation - Self-Inflicted; Firearm - Self-Inflicted; Drowning/Submersion - Unintentional	3	5	Fire/Burn - Unintentional	18	5	Natural/Environmental - Unintentional	584
TOTAL		77	TOTAL		469	TOTAL		10,098

Source: N.C. Injury & Violence Prevention Branch

https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCounty2016_2019Final.pdf

Image 5. Ages 0-14: Leading Causes of Injury Death, Hospitalization, and Emergency Department Visits by County, Bertie County (2016-2019)

Leading Causes of Injury Death 2016 to 2019 BERTIE			Leading Causes of Injury Hospitalization 2016 to 2019 BERTIE			Leading Causes of Injury ED Visits 2016 to 2019 BERTIE		
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#
1	Other Land Transport - Unintentional; Drowning/Submersion - Unintentional	1	1	Fire/Burn - Unintentional	6	1	Fall - Unintentional	361
2		0	2	Other Specified/Classifiable - Unintentional; MVT - Unintentional	3	2	Unspecified - Unintentional	259
3		0	3	Other Specified/Classifiable - Assault	2	3	Struck By/Against - Unintentional	234
4		0	4	Poisoning - Unintentional; Firearm - Unintentional; Fall - Unintentional; Drowning/Submersion - Unintentional	1	4	MVT - Unintentional	171
5		0	5			5	Natural/Environmental - Unintentional	135
TOTAL		2	TOTAL		18	TOTAL		1,544

Source: N.C. Injury & Violence Prevention Branch

https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCounty2016_2019_ages0-14Final.pdf

Image 6. Ages 15-34: Leading Causes of Injury Death, Hospitalization, and Emergency Department Visits by County, Bertie County (2016-2019)

Leading Causes of Injury Death 2016 to 2019 BERTIE			Leading Causes of Injury Hospitalization 2016 to 2019 BERTIE			Leading Causes of Injury ED Visits 2016 to 2019 BERTIE		
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#
1	MVT - Unintentional	7	1	MVT - Unintentional	27	1	MVT - Unintentional	598
2	Firearm - Assault	5	2	Poisoning - Unintentional	11	2	Unspecified - Unintentional	569
3	Unspecified - Assault; Poisoning - Unintentional; Firearm - Self- Inflicted; Drowning/Submersion - Unintentional; Cut/Pierce - Assault	1	3	Motor Vehicle-Nontraffic - Unintentional	10	3	Fall - Unintentional	385
4		0	4	Struck By/Against - Assault; Firearm - Assault; Cut/Pierce - Assault	7	4	Struck By/Against - Unintentional	313
5		0	5	Poisoning - Self-Inflicted	6	5	Cut/Pierce - Unintentional	189
TOTAL		17	TOTAL		97	TOTAL		3,168

Source: N.C. Injury & Violence Prevention Branch

https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCounty2016_2019_ages15-34Final.pdf

Image 7. Ages 35-64: Leading Causes of Injury Death, Hospitalization, and Emergency Department Visits by County, Bertie County (2016-2019)

Leading Causes of Injury Death 2016 to 2019 BERTIE			Leading Causes of Injury Hospitalization 2016 to 2019 BERTIE			Leading Causes of Injury ED Visits 2016 to 2019 BERTIE		
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#
1	Poisoning - Unintentional	13	1	Fall - Unintentional	52	1	Fall - Unintentional	774
2	MVT - Unintentional	11	2	MVT - Unintentional	29	2	Unspecified - Unintentional	719
3	Suffocation - Self-Inflicted; Firearm - Assault	3	3	Poisoning - Unintentional	18	3	MVT - Unintentional	522
4	Unspecified - Unintentional; Suffocation - Unintentional; Poisoning - Self-Inflicted; Firearm - Self-Inflicted; Drowning/Submersion - Self-Inflicted; Cut/Pierce - Assault	1	4	Poisoning - Self-Inflicted	14	4	Struck By/Against - Unintentional	245
5		0	5	Motor Vehicle-Nontraffic - Unintentional; Fire/Burn - Unintentional	5	5	Natural/Environmental - Unintentional	214
TOTAL		36	TOTAL		148	TOTAL		3,433

Source: N.C. Injury & Violence Prevention Branch

https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCounty2016_2019_ages35-64Final.pdf

Image 8. Ages 65+: Leading Causes of Injury Death, Hospitalization, and Emergency Department Visits by County, Bertie County (2016-2019).

Leading Causes of Injury Death 2016 to 2019 BERTIE			Leading Causes of Injury Hospitalization 2016 to 2019 BERTIE			Leading Causes of Injury ED Visits 2016 to 2019 BERTIE		
Rank	Cause	#	Rank	Cause	#	Rank	Cause	#
1	Fall - Unintentional	7	1	Fall - Unintentional	153	1	Fall - Unintentional	1,019
2	MVT - Unintentional	6	2	MVT - Unintentional	20	2	Unspecified - Unintentional	301
3	Unspecified - Unintentional; Other Specified/Classifiable - Unintentional	2	3	Poisoning - Unintentional	11	3	MVT - Unintentional	129
4	Unspecified - Assault; Suffocation - Unintentional; Poisoning - Unintentional; Firearm - Self-Inflicted; Drowning/Submersion - Unintentional	1	4	Unspecified - Unintentional	5	4	Natural/Environmental - Unintentional	83
5		0	5	Fire/Burn - Unintentional	3	5	Struck By/Against - Unintentional	79
TOTAL		22	TOTAL		206	TOTAL		1,953

Source: N.C. Injury & Violence Prevention Branch

https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCounty2016_2019_ages65upFinal.pdf

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