

Progress on CHIPs 

The two focus areas identified as priorities from the 2022 Community Health Assessment (CHA) to address are substance use disorder and mental health.

Randolph County monitors progress on its priorities through these programs:

[Naloxone Distribution and Overdose Prevention](#)

[Recovery Friendly Workplaces](#)

[988 Suicide and Crisis Lifeline](#)

Substance Use Disorder

Utilizing the 2019-2020 National Survey on Drug Use and Health, the North Carolina Department of Health and Human Services, Division of Public Health, Injury and Violence Prevention Branch estimates a 12.73% prevalence of substance use disorders among Randolph County residents 12 years and older. Applying this prevalence rate to the population of residents 12 years and older, an estimated 15,823 residents have a substance use disorder.

Randolph County's 2016 Strategic Plan set a goal to save lives from overdoses as a result of substance use disorders. To achieve that goal, Randolph County Public Health was appointed to serve as the lead in establishing a community coalition to develop and implement an action plan. Randolph County Public Health assembled a large number of representatives spanning many sectors to launch the Randolph County Opioid-Drug Community Collaborative in 2017.

Between 2017-2020, the coalition implemented numerous strategies to address the opioid overdose crisis, including:

- Held informational community events to raise awareness and reduce stigma on substance use disorders
- Made materials available at the local library highlighting opioid use disorder, prevention, and treatment
- Implemented various overdose prevention campaigns utilizing multiple channels such as billboards and social media (Lock Your Meds)
- Established medication take-back events and sites
- Increased access to naloxone, a life-saving opioid overdose-reversal first aid medication
- Secured grants to enable uninsured patients to receive behavioral health services
- Expanded access to substance use disorder treatment services and medications for addiction treatment via our local managed care organization, Sandhills Center
- Launched a syringe service program
- Offered Crisis Intervention Team training to local law enforcement
- Piloted a post-overdose response team

Despite an increase in the overdose death rate (see Figure 1), Randolph County's reported community naloxone

reversals sharply increased (see Figure 2). This metric reflects the number of overdose reversals using naloxone reported by community members and does not include the administration of naloxone by first responders.

Figure 1- Rate of Overdose Associated Deaths, Randolph County, 2017-2020

2017	39.1 per 100,000
2018	32.1 per 100,000
2019	40.4 per 100,000
2020	57.8 per 100,000

Figure 2- Rate of Reported Community Naloxone Reversals, Randolph County, 2017-2020

2017	65.6 per 100,000
2018	63.5 per 100,000
2019	287.5 per 100,000
2020	427.4 per 100,000

During the same time frame, Randolph County residents diagnosed with opioid use disorder receiving services from treatment programs steadily increased (see Figure 3).

Figure 3- Rate of Uninsured Individuals and Medicaid Beneficiaries with Opioid Use Disorder (OUD) Served by Treatment Programs, Randolph County, 2017-2020

2017	413.9 per 100,000
2018	459.7 per 100,000
2019	463.6 per 100,000
2020	411.4 per 100,000

In 2022, the coalition developed three workgroups aligning with the NC Opioid Substance Use Action Plan – prevention, harm reduction, and connect to care. As the 2022 Community Health Assessment committee selected substance use disorders as a priority, the workgroups participated in five facilitated, Results-Based Accountability strategic planning sessions from September 2022 – to February 2023. The workgroups created a results statement they seek to achieve. It reads, “All individuals in Randolph County affected by substance use disorders and mental health conditions are healthy, safe, and free of stigma”. The workgroups selected several strategies to focus their collective effort.

These included:

- Advocate for recovery-friendly workplace policies with local employers (e.g., fair chance hiring, recovery support)
- Reduce barriers to naloxone access through distribution and training on how to administer

Mental Health

A mental illness is a condition that affects a person’s thinking, feelings, behavior, or mood. Each mental illness has its symptoms and affects millions of Americans annually. According to the National Alliance on Mental Illness (NAMI), about 1 in 5 adults in the United States and 1 in 6 youth, ages 6-17, experience a mental health disorder every year. According to NAMI finding treatment resources can be a challenge due to a lack of healthcare availability and stigma.

- 50% of all lifetime mental health disorders begin by age 14 and 75% by age 24 (NAMI)
- Suicide is the 2nd leading cause of death among people aged 10-14 in the United States (NAMI)
- Suicide is the 10th leading cause of death in Randolph County and 12th in North Carolina. (NCSCHS)
 - Suicide is the 3rd leading cause of death for ages 20-39 in Randolph County between the years 2017-2021. (NCSCHS)

The Mental Health Collaborative was formed in June 2023 as a result of the 2022 CHA priorities. This collaborative consists of community partners who either work for an agency/organization in the area of mental health or have a personal or invested interest in the topic. Using the Results-Based Accountability (RBA) framework, the Mental Health Collaborative created a result statement that was finalized in late 2023. The statement reads as follows "All individuals in Randolph County will have good mental and emotional health with access to mental health services and are free from stigma".

After the holiday break, the collaborative held their first meeting of the new year in January 2024. New members joined the collaborative. The group reviewed the strategies and finalized them. The collaborative selected strategies to help increase awareness of mental health services and identify and assist people in a mental health crisis.

The strategies created by the Mental Health Collaborative include:

- Promote the 988 Suicide and Crisis Lifeline throughout Randolph County.
 - As of now the collaborative has promoted the 988 lifeline with the community members they work with. Randolph County Public Health has promoted 988 on social media and has distributed educational materials throughout the county. More will be done to promote this service in the years to come.
 - Data for this strategy has only been collected at the state level. We have not been able to get county-level data yet, but we are working on it.
- Determine training needs among employees/employers and the public regarding how to cope with/identify mental health issues among clients, family, friends, etc
 - This strategy was newly developed in the January 2024 meeting. As of now, the collaborative is looking into what mental health first aid programs the group will pursue.
 - Since this strategy is new this year (2024), we don't have any data to report as of now.

988 Suicide & Crisis Lifeline

On July 16, 2022, the three-digit 9-8-8 Suicide & Crisis Lifeline went live nationwide. When someone calls the 988 Suicide & Crisis Lifeline, they are connected to trained counselors who provide free and confidential emotional support to people in a mental health crisis or emotional distress 24 hours a day, 7 days a week, in the United States. (988lifeline)

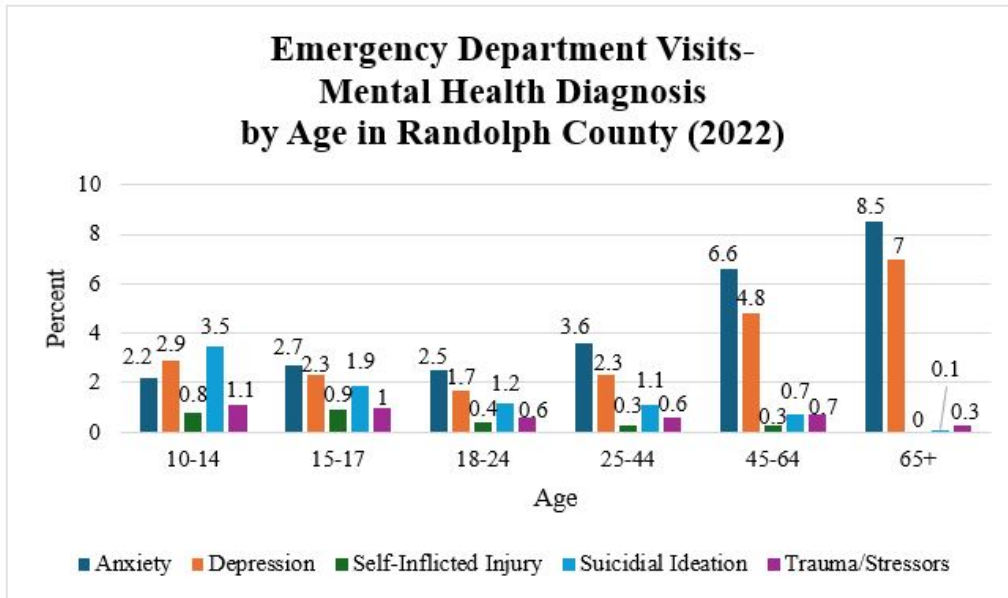
"The 988 Suicide & Crisis Lifeline is a leader in suicide prevention and mental health crisis care. Since its inception, the Lifeline has engaged in a variety of initiatives to improve crisis services and advance suicide prevention for all, including innovative public messaging, best practices in mental health, and groundbreaking partnerships." (988lifeline)

In December 2023, the North Carolina Department of Health and Human Services (NCDHHS) launched a 988 performance dashboard that reports data on call volume, reason for calling, resources offered to the caller, etc. In North Carolina, from February 2023 to January 2024 the call volume to 988 was 68,840 calls. The top three reasons for people calling 988 are interpersonal/family (34,046), depression (15,451), and threat to self (13,058). The caller can report multiple reasons for calling.

The two graphs below are from the North Carolina DETECT Mental Health Dashboard and represent emergency department visits to the hospital for a mental health-related diagnosis by age and by sex for Randolph County in 2022. The mental health diagnoses are coded using ICD-10 codes which are codes that physicians/medical

providers use to classify all diagnoses, symptoms, and procedures for claims processing. The definitions for the mental health diagnoses were taken from other sources and not NC DETECT as they code the diagnoses as ICD-10 codes.

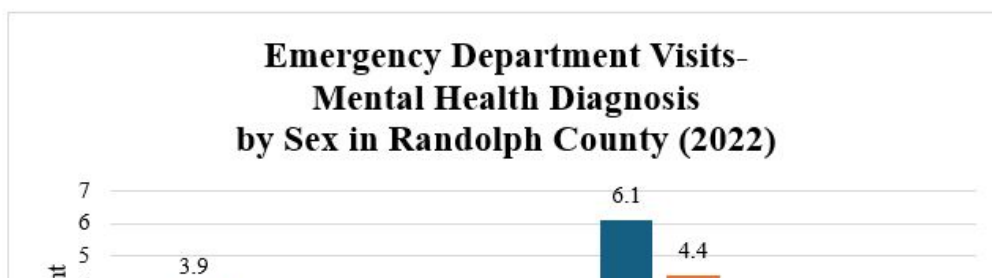
In Randolph County, many individuals seek medical help from the hospital emergency department (ED) for symptoms that may result in a diagnosis of a mental health condition or illness. ED visits for mental health-related conditions or illnesses are typically diagnosed as anxiety, depression, self-inflicted injury, suicidal ideation, and/or trauma/stressors.

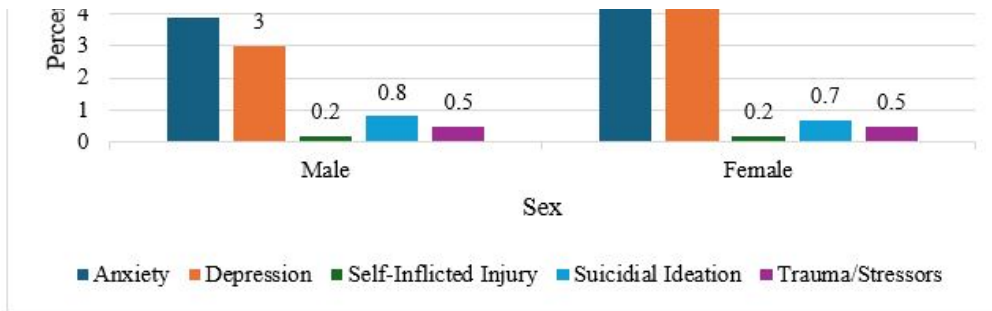


Source: NC DETECT Mental Health Dashboard

Definitions for mental health conditions:

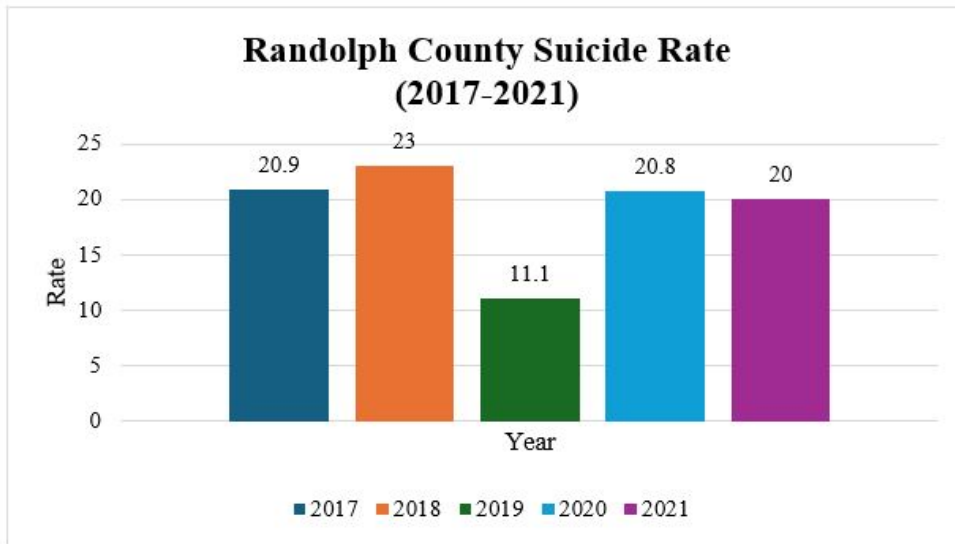
- Anxiety Disorders: feelings of intense fear and distress that are overwhelming and can prevent an individual from doing everyday activities. (NAMI)
- Depression: disorder of the brain and is a serious mental illness that is more than just a feeling of being “down in the dumps” or “blue” for a few days. (SAMHSA)
- Self-inflicted injury: occurs when someone purposely hurts themselves, also referred to as self-injury, self-abuse, self-mutilation, deliberate self-harm, parasuicidal behavior, and non-suicidal self-injury. (New York State Department of Health)
- Suicidal ideation: an individual having thoughts of wanting to harm themselves. It is a term used to describe a range of contemplations, wishes, and preoccupations with death and suicide. (National Library of Medicine)
- Trauma: an emotional response to a terrible event like an accident, rape, or natural disaster. (American Psychological Association)
- Stressors: events/things that cause a state of strain or tension. (Merriam-Webster)





Source: NC DETECT Mental Health Dashboard

The chart below shows the suicide rates over the last five years in Randolph County. During the timeframe of 2016-2020, suicide was one of the top ten leading causes of death in Randolph County, listed as number nine. It was listed as number ten during 2017-2021, according to the North Carolina State Center for Health Statistics (NCSCHS). Suicide is the third leading cause of death for those 20-39 years old, and the fourth leading cause for individuals between the ages of 0-19.



Source: NC State Center for Health Statistics
Rate is per 100,000

Morbidity and Mortality Changes



Morbidity can be another term for illness. The National Cancer Institute defines morbidity as having a disease or a symptom of a disease, or the amount of disease within a population. This term does not mean deaths. A person can have several co-morbidities simultaneously such as cancer, Alzheimer's disease, diabetes, etc. Mortality is another term for death. Mortality rate is the number of deaths due to disease divided by the total population.

In the 2022 CHA for the 2016-2020 timeframe for the top ten leading causes of death for Randolph County, COVID-19 was not on the list. Now for the 2017-2021 timeframe for Randolph County, COVID-19 was the 5th leading cause of death. Also, in the years 2016-2020, suicide was the 9th leading cause of death for Randolph County, now for the years 2017-2021 its the 10th leading cause of death.

The data below shows the top 10 leading causes of death for Randolph County and North Carolina for the most recent set of years 2013-2017 and 2017-2021.

Leading Causes of Death in Randolph County and NC 2017-2021 and Comparison Year (2013-2017)

	Randolph County- Report Period 2017-2021		Previous Report Comparison 2013-2017	North Carolina- Report Period 2017-2021	
Total Deaths- All Causes	981.9		872.9	838.5	
Leadings Causes of Death	Rank	Rate	Status	Rank	Rate
Diseases of the Heart	1	198.1	▲	1	161.1
Cancer	2	176.8	▲	2	154.5
All Other Unintentional Injuries	3	75.0	▲	3	48.5
Chronic Lower Respiratory Diseases	4	56.6	▼	5	41.4
COVID-19*	5	47.5	-	7	34.6
Cerebrovascular Disease	6	46.8	▲	4	44.0
Alzheimer's Disease	7	44.0	▲	6	38.0
Diabetes Mellitus	8	28.2	▲	8	26.1
Unintentional Motor Vehicle Injuries	9	22.2	▲	10	15.7
Suicide	10	18.3	▲	12	13.5

Source: NC State Center for Health Statistics- Leading Causes of Death
Age-adjusted rate- expressed as deaths per 100,000
*No rate for 2013-2017 as COVID-19 was not present during this timeframe

For the ages 20-39, suicide is still the 3rd leading cause of death in Randolph County. No change since the last reported year (2019) in the 2022 CHA.

Top 3 Leading Causes of Death by Age Group in Randolph County (2017-2021)

Top 3 Leading Causes of Death by Age Group (2017-2021)	
Age Group	Cause of Death
Ages 0-19	1. Conditions originating in the perinatal period
	2. Motor vehicle injuries
	3. Congenital anomalies (birth defects)
Ages 20-39	1. Other unintentional injuries
	2. Motor vehicle injuries
	3. Suicide
Ages 40-64	1. Cancer- All sites
	2. Diseases of the heart
	3. Other unintentional injuries

Ages 65-84	1. Cancer- All sites
	2. Diseases of the heart
	3. Chronic lower respiratory disease
Ages 85+	1. Diseases of the heart
	2. Cancer- All sites
	3. Alzheimer's Disease

Source: NC State Center for Health Statistics- Leading Causes of Death by County and Age Group
 *Unadjusted death rates per 100,000 population

The data below shows infant and child mortality rates for Randolph County and North Carolina for the years 2016-2020 and 2017-2021. For infant death rates there is a slight decrease for both Randolph County and North Carolina. For child death rates there is a slight increase for Randolph County and North Carolina stayed the same.

Resident Infant Death Rates for NC and Randolph County (2016-2021) (per 1,000 live births)		
	2016-2020	2017-2021
Randolph County	9.9	9.5
North Carolina	7	6.9

Source: NC State Center for Health Statistics

Resident Child Death Rates for NC and Randolph County Ages 0-17 (2016-2021)		
	2016-2020	2017-2021
Randolph County	68.5	69.9
North Carolina	56.2	56.2

Source: NC State Centers for Health Statistics
 Deaths per 100,000

Emerging Issues



Syphilis

Syphilis is a sexually transmitted infection (STI) that develops in four stages and can cause serious health problems without treatment. Without treatment, syphilis can damage the heart, brain, other vital organs, and it can become life-threatening. Syphilis can spread from mother to her baby during pregnancy/birth, this is called congenital syphilis. Consequences of congenital syphilis can include miscarriage, stillbirth, infant death, prematurity, and lifelong health problems. It is vital for adults and pregnant women to receive timely testing and treatment.

According to the Centers for Disease Control and Prevention (CDC), newborn syphilis cases in the United States have surged over the last ten years. New data from the CDC reports that more than 37,000 babies were born with syphilis in 2022, which is ten times the number since 2012. This increase follows a rise in the number of cases among women of reproductive age combined with social and economic factors that create barriers to prenatal care and resources.

Gonorrhea and Chlamydia

Gonorrhea and Chlamydia are sexually transmitted infections (STIs) that can cause serious health issues. According to the CDC, gonorrhea is common in youth between the ages of 15-24 years old. In pregnant women, these STIs can be transmitted to the baby. It is important to get tested and treated promptly. Sexual health education is vital to teaching the community about sexually transmitted infections and prevention.

Below are the number of reported cases of sexually transmitted infections in Randolph County. For the fiscal year 2022-2023, there were 21 syphilis, 1 congenital syphilis, 155 gonorrhea, and 482 chlamydia reported cases. These were cases that were diagnosed and reported by the health department and do not include cases that may not have been reported to the health department. Reported cases for the fiscal year 2023-2024 (7/1/23-6/30/24) are still being actively documented. The final number of reported cases will not be available until the end of the fiscal year (6/30/24).

Communicable Disease Cases in Randolph County (Fiscal Years 2022-2024)

Fiscal Year (FY*)	Communicable Disease	Reported Cases
2022-2023		
	Syphilis	21
	Congenital Syphilis	1
	Gonorrhea	155
	Chlamydia	482
2023-2024**		
	Syphilis	14
	Congenital Syphilis	0
	Gonorrhea	58
	Chlamydia	230

*FY July 1-June 30

**numbers for this FY are not complete until 6/30/2024

Other Significant Events

Communicable disease surveillance is ongoing throughout the year and serves as a critical public health service. Trained public health nurses conduct investigations of reportable communicable diseases and ensure necessary steps are taken to prevent the spread of the disease to others.

Tuberculosis (TB) is one of the most important reportable diseases closely followed by public health. During the months of January 2022 to December 2023, there were five confirmed cases of tuberculosis in Randolph County. All five individuals were isolated and received the appropriate treatment. The team leading a TB investigation that led to a confirmed case also led the team to forty-one exposed cases at a local business. No contacts developed TB.

In August 2022, the bivalent COVID-19 booster became available. The bivalent COVID-19 for children became available in mid-September 2022. Randolph County Public Health received the vaccine and offered the vaccine to those who were interested and eligible per State guidelines.

In August 2022, Randolph County reported its first case of Mpox (formerly Monkeypox). Between the months of August 2022 and November 2022, Randolph County reported a total of ten Mpox cases.

In October 2022, flu/respiratory illnesses and COVID-19 cases increased. Randolph County Public Health assisted the community by focusing on health education, prevention, and patient treatment. The COVID-19 vaccine was offered along with COVID-19 quarantine and isolation guidance, and the distribution of no-cost, at-home COVID-19 test kits to the community.

In March 2023, six varicella (chickenpox) cases were identified in a childcare facility. The facility closed for two days to ensure the appropriate cleaning and disinfecting was completed.

On May 12, 2023, the public health emergency COVID-19 response ended. COVID-19 was removed from the required reportable communicable disease list. Randolph County Public Health continues to follow outbreaks and clusters in the county.

New/Paused/Discontinued Initiatives Since the Last CHA



These two programs are a focus at the health department.

Safe Sleep

In January 2019, due to the increased number of infant deaths resulting from unsafe sleep practices, the Child Fatality Prevention Team Annual Report recommended safe sleep practices be addressed. An unsafe sleep environment can lead to risks of sudden infant death syndrome (SIDS), or other sleep-related infant deaths. Other sleep-related infant deaths are deaths linked to how or where a baby sleeps. These deaths are a type of Sudden Unexpected Infant Death (SUID) and differ from SIDS. They can include deaths from the following:

- Suffocation: pillow, blanket, or an adult's arm, covers the baby's face and nose.
- Strangulation: something can press on or wrap around a baby's neck or head.
- Entrapment or wedging: the baby's body or head gets stuck between two objects, such as a mattress and wall, bed frame, or furniture.

Collaboratively, Randolph County Public Health and Safe Kids Randolph promote safe sleep by providing Charlie's Kids Safe Sleep books for the "Books for Babies" program, sponsored by the Partnership for Children. In addition, annual training is required for public health staff who engage with families of young children. The care management programs for at-risk children and high-risk pregnant women (CMARC & CMHRP) are collaborating with the Health Promotion and Policy Team on a Safe Sleep Program for the county.

CATCH My Breath – Youth Vaping Prevention Program

Randolph County Public Health (RCPH) implemented a youth vaping prevention program called CATCH My Breath (CMB) in May 2023. This is an evidence-based program that helps prevent students from initiating the use of e-cigarettes and vapes and empowers youth to make informed decisions.

Through the School Health Advisory Council (SHAC) meetings, the Randolph County School System expressed concerns that vaping was an issue throughout the school system. In collaboration with the Randolph County School System, the Health Promotion and Policy team implemented a CMB pilot program in May 2023 at a middle school targeting 5th and 7th graders.

The pilot program demonstrated success and as of now, health educators have conducted the CMB program in 3 schools. This program will continue in the Randolph County School System and the Health Promotion and Policy team seeks to expand it to all schools in the county.

See the following pdf's for an overview of the program that was implemented at two of the middle schools in October 2023.

[SERMSOverall.pdf](#)

[UwharrieRidge6-12Overview.pdf](#)

