



2022-2025

Wilson County, NC

Community Health Needs Assessment

Online and paper copies of this document may be requested from:

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Wilson County Health Department – www.Wilson-co.com 1801 Glendale Dr, Wilson NC 27893 252-237-3141

Wilson Medical Center, a DLP facility, www.wilsonmedical.com 1705 Tarboro St, W, Wilson NC 27893 252-399-8040

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Perspective / Overview

Creating a culture of health in the community

Wilson County is pleased to present its 2022 Community Health Needs Assessment (CHNA). This report provides an overview of the methods and process used to identify and prioritize significant health needs in Wilson County.

The CHNA is a collaboration of Healthcare Foundation of Wilson, Wilson County Health Department and Wilson Medical Center.

The CHNA engaged the community to define priorities for health improvement, created a collaborative community environment to engage stakeholders, and provided open and transparent process to listen and truly understand the health needs of Wilson County, North Carolina.

The community health needs assessment provided the opportunity to:

- Assess the population's health status
- Highlight areas of unmet needs
- Present the community's perspectives
- Provide suggestions for possible interventions
- Highlight recommendations that policymakers might consider when setting new policy goals and objectives for health improvement.

Service Area

The service area for this report is defined as the geographical boundary of Wilson County, North Carolina. Wilson County is located inland from the coastal area of the state and covers an area of 374 square miles, of which only a small portion is water. The county includes the City of Wilson, six municipalities and ten townships.

Methods for Identifying Community Health Needs

Primary Data

The primary data used in this assessment consisted of (1) a community survey distributed through online and paper submissions, two (2) focus group discussions, and a community health summit. Over 900 Wilson County residents contributed their input on the community's health and health-related needs, barriers, and opportunities, with special focus on the needs of vulnerable and underserved populations. See Appendix C for all primary data collection tools used in this assessment.

Secondary Data

This report includes secondary data from national, state and local databases. The primary service area of the local hospital was used to determine statistical data included. The report outlines major findings and details.

The top three health priorities identified which will be addressed over the next three years are:

1. Mental/behavioral health
2. Healthy eating/active living
3. Substance misuse

Community-wide Action Plans will be developed to address these health priorities and may be found on the websites of Healthcare Foundation of Wilson, Wilson County Health Department and Wilson Medical Center.



Action Cycle Source: the Robert Wood Johnson Foundation's County Health Rankings website:

<http://www.Countyhealthrankings.org/roadmaps/action-center>

The Community Health Needs Assessment (CHNA) uses systematic, comprehensive data collection and analysis to define priorities for health improvement, creates a collaborative community environment to engage stakeholders, and an open and transparent process to listen and truly understand the health needs of Wilson County, North Carolina.

The Action Cycle shows how to create healthy communities. The rankings later in the document assist in understanding what makes a healthy community.

Stratason, a healthcare analytics and services company based out of Nashville, Tennessee, provided the analysis of community health data, participated in the focus groups and Summit.

PROJECT GOALS

- 1 To continue a formal and comprehensive community health assessment process which allows for the identification and prioritization of significant health needs of the community to assist with resource allocation, informed decision-making, and collective action that will improve health.
- 2 To continue a collaborative partnership between all stakeholders in the community by seeking input from persons who represent the broad interests of the community.
- 3 To support the existing infrastructure and utilize resources available in the community to instigate health improvement in the community.

Community

Input and Collaboration

Data Collection and Timeline

In April 2022, the Collaborating Organizations began a Community Health Needs Assessment for Wilson County and sought input from persons who represent the broad interests of the community using several methods:

- Information gathering, using secondary public health sources, occurred in August 2022.
- Wilson Forward's Health and Wellness Committee served as the advisory group during the CHNA process. Action plans will be discussed by the committee.
- Community members participated in focus groups and individual interviews for their perspectives on community health needs and issues on June 20 and August 12, 2022.
- A community online survey was conducted from June 1 – July 25, 2022.
- A Health Summit was conducted on August 30, 2022, with community stakeholders. The audience consisted of healthcare providers, business leaders, government representatives, schools, not-for-profit organizations, employers, and other community members.



Photo Credit: Brian Strickland

Information Gaps

While this assessment was quite comprehensive, it cannot measure all possible aspects of health in the community, nor can it adequately represent all possible populations of interest. It must be recognized that these information gaps might in some ways limit the ability to assess all the community's health needs.

Participants

Eighty-five individuals from thirty-four community organizations, plus 979 community members who completed the survey, collaborated to implement a comprehensive CHNA process focused on identifying and defining significant health needs, issues, and concerns of Wilson County. The process centered on gathering and analyzing data, as well as receiving input from persons who represented the broad interests of the community, to provide direction for the community and hospital to create a plan to improve the health of the communities.

Participation by those Representing the Broad Interests of the Community

Participation in interviews and the Community Health Summit creating the Wilson County Community Health Needs Assessment and Improvement Plan included:

| Organization | Population Represented | How Participated |
|---|-------------------------------|---------------------|
| Area L Area Health Ed Center (AHEC) | All | Summit |
| Barton College | Schools, students | Focus Group, Summit |
| Chamber of Commerce | Businesses, employers | Focus Group, Summit |
| City of Wilson | All | Summit |
| Community member | All | Focus Group |
| County of Wilson | All | Summit |
| EastPointe | All | Summit |
| Flynn Christian Fellowship Home | Men, Recovery population | Summit |
| Former HFW board member | All | Summit |
| Foundation YMCA | All | Summit |
| Healthcare Foundation of Wilson | All | Focus Group, Summit |
| Hope Station | Low Income | Summit |
| NAACP Education Committee | Minorities | Summit |
| Physician | All | Summit |
| Retired Board Chair | All | Focus Group |
| Thomas and Farris Law | All | Summit |
| Wilson Co. Substance Prevention Coalition | Substance use | Summit |
| Wilson Community College | Young adults | Focus Group, Summit |
| Wilson County Commissioner | All | Summit |
| Wilson County Department of Social Services | All | Focus Group, Summit |
| Wilson County EMS | All | Focus Group, Summit |
| Wilson County Government | All | Focus Group, Summit |
| Wilson County Health Department | All | Focus Group, Summit |
| Wilson County Public Library | All | Summit |
| Wilson County Schools | Kids, schools | Focus Group, Summit |
| Wilson Fire & Rescue | All | Focus Group, Summit |
| Wilson Forward | All | Focus Group, Summit |
| Wilson Medical Center | All | Focus Group, Summit |
| Wilson Police Department | All | Focus Group |
| Wilson Times | All | Summit |
| Wilson United Way | Low income, kids, underserved | Summit |

In many cases, several representatives from each organization participated.

Community Engagement and Transparency

Many members of the community participated in focus groups, survey, and the Summit. We are pleased to share the results of the Community Health Needs Assessment with the rest of the community in hopes of attracting more advocates and volunteers to improve the health of our communities. The following pages highlight key findings of the assessment. We hope you will take the time to review the health needs of our community as the findings impact every citizen in one way or another; and join in the improvement efforts.

Input of the Medically Underserved, Low-Income, and Minority Populations

Input of medically underserved, low-income and minority populations was received through interviews, focus groups and the community health summit. Agencies representing these population groups were intentionally invited to the focus group, interviews and summit. The community survey was representative of the whole community – by age, income, and education.

Input of those with Expertise in Public Health

The Health Department was a member of the team conducting the CHNA and participated in the focus groups and in the summit. The health department participated in the prioritization of significant community health needs.

Community Selected for Assessment

Wilson County was the primary focus of the CHNA due to the service area of the Organizations guiding the process. The community includes medically underserved, low-income, and minority populations who live in the geographic areas from which the Wilson County Health Department and Wilson Medical Center draws their patients.

All patients were used to determine the service area without regard to insurance coverage or eligibility for financial assistance.

The CHNA Study Area - 2022



Key Findings

Community Health Assessment

Results

Based on the previous CHNA priorities, secondary data, focus groups, and surveys, the summit participants selected the following significant health needs to be the focus of the work of community over the next three years.

1. Mental/behavioral health
2. Healthy eating/active living
3. Substance misuse
4. Access to healthcare or insurance

Other health issues were identified and did not receive the group support based on number of votes as the above issues did.

- | | |
|--------------------------|-------------------------------|
| 5. Chronic Health issues | 10. STI's |
| 6. ACES | 11. Poverty |
| 7. Diabetes | 12. Root cause |
| 8. Adolescent Pregnancy | 13. Early childhood education |
| 9. Housing | 14. Men's health |
| | 15. Child neglect |

Process and Methods

Both primary and secondary data sources were used in the CHNA.

Primary methods included:

- Focus groups with community members
- Community online surveys
- Community Health Summit

Secondary methods included:

- Public health data – death statistics, County Health Rankings, cancer incidence
- Demographics and socioeconomics – population, poverty, uninsured, unemployment
- Psychographics – behavior measured by spending and media preferences



Photo Credit: Wilson County Schools Facebook page

Description of the Communities Served

Demographics

The table below shows the demographic summary of Wilson County compared to North Carolina and the U.S.

| | Wilson County | North Carolina | USA |
|----------------------------------|---------------------------|---------------------------|------------------|
| Population | 78,584 | 10,671,397 | 333,934,112 |
| Median Age | 40.9 | 39.2 | 38.8 |
| Median Household Income | \$45,398 | \$62,513 | \$64,730 |
| Annual Pop. Growth (2022-2027) | -0.16% | 0.57% | 0.71% |
| Household Population | 32,224 | 4,262,517 | 126,470,675 |
| Dominant Tapestry | Southern Satellites (10A) | Southern Satellites (10A) | Green Acres (6A) |
| Businesses | 3,113 | 402,186 | 12,013,469 |
| Employees | 39,658 | 4,549,765 | 150,287,786 |
| Health Care Index* | 73 | 92 | 100 |
| Average Health Expenditures | \$5,192 | \$6,515 | \$6,237 |
| Total Health Expenditures | \$167.3 M | \$27.8 B | \$788.8 B |
| Racial and Ethnic Make-up | | | |
| White | 47% | 62% | 69% |
| Black | 38% | 21% | 13% |
| American Indian | 1% | 1% | 1% |
| Asian/Pacific Islander | 1% | 3% | 6% |
| Other | 7% | 6% | 7% |
| Mixed Race | 6% | 7% | 4% |
| Hispanic Origin | 12% | 11% | 19% |

Source: Esri

*The Health Care Index is household-based, and represents the amount spent out of pocket for medical services and insurance relative to a national index of 100.

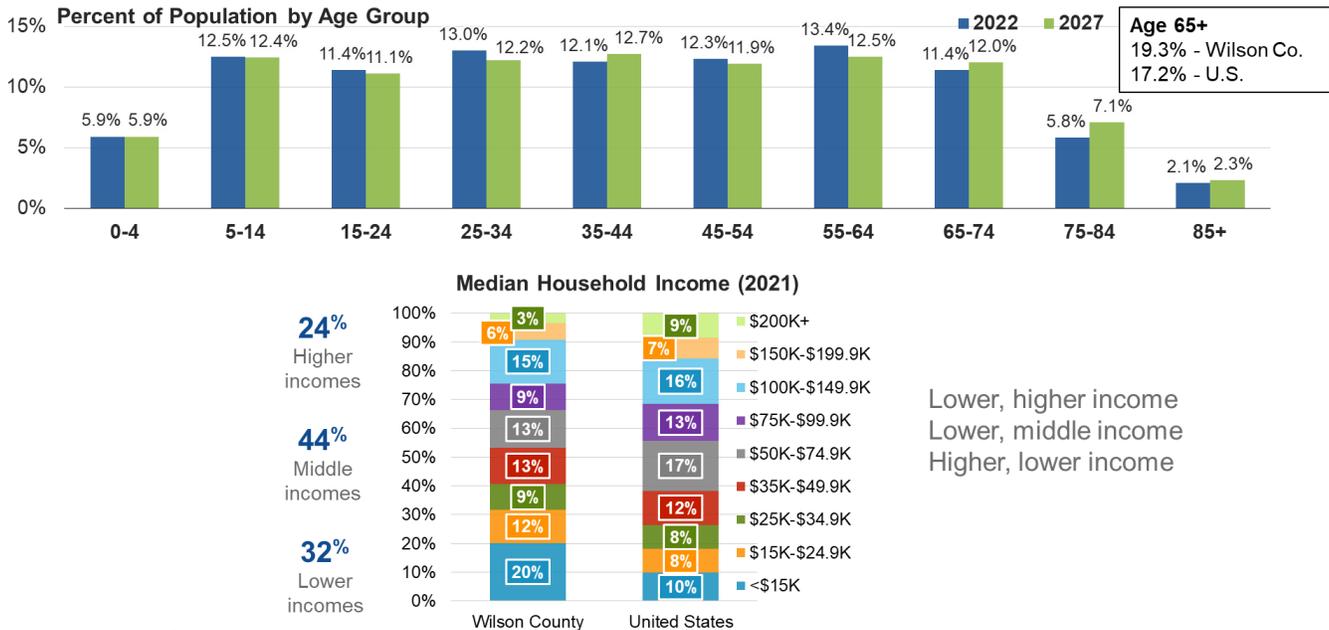
The median is the value at the midpoint of a frequency. There is an equal probability of falling above or below the median.

Photo Credit: The Wilson County Fair



Demographics, cont.

Wilson County

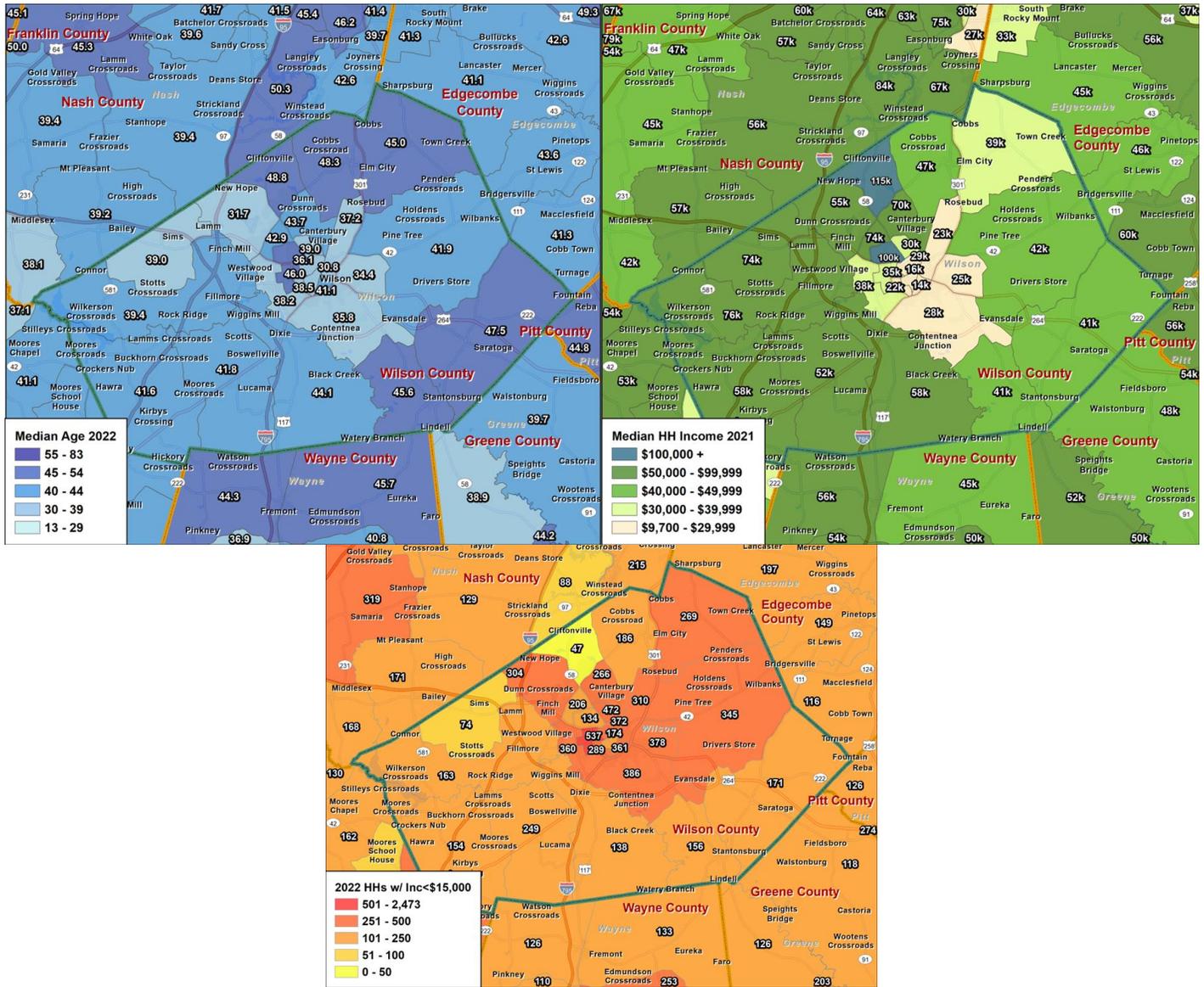


Source: Esri

- The population of Wilson County is projected to decrease from 2022 to 2027 (.16% per year). North Carolina is projected to increase .57% per year. The U.S. is projected to increase .25% per year.
- Wilson County had a higher median age (40.9 median age) than NC (39.2) and the U.S. (38.9). In Wilson County the percentage of the population 65 and over was 19.3%, higher than the U.S. population 65 and over at 17.2%.
- Wilson County's median household income at \$45,398 was lower than NC (\$62,513) and the U.S. (\$72,414). The rate of poverty in Wilson County was 21.2% which was higher than NC (12.9%) and the U.S. (11.9%).
- The household income distribution of Wilson County was 24% higher income (over \$100,000), 44% middle income, and 32% lower income (under \$25,000). The largest income group is the middle income group.
- The health care index measures how much the populations spent out-of-pocket on health care services including insurance premiums. The U.S. index was 100. Wilson County was 73, indicating 27% less spent out of pocket than the average U.S. household on medical care (doctor's office visits, prescriptions, hospital visits) and insurance premiums.
- The racial and ethnic make-up of Wilson County was 47% White, 38% Black, 12% Hispanic origin, 6% more than one race, 1% Asian/Pacific Islander, 1% American Indian, and 7% other. *(These percentages total to over 100% because Hispanic is an ethnicity, not a race.)*

Demographics, cont.

2022 Median Age & Income



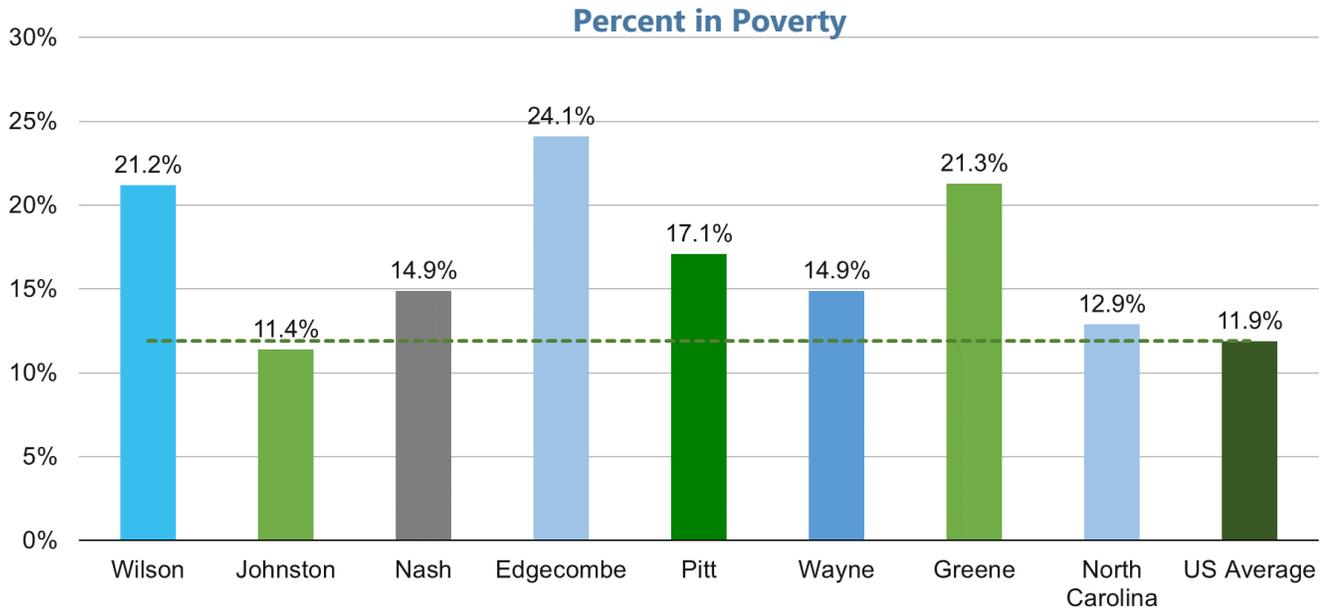
The top two maps depict median age and median income by census tract. Looking at age and income by census tract is helpful to demonstrate all areas of a county are not the same. The health needs may be very different in the census tract in Wilson with a lower median age (30.8) and the tract in the north of the county with a median age of 49.

Looking at median household income by census tract also gives insight into health status. The lower income areas may require more resources than the higher income tracts. The census tracts in Wilson with the lower median household incomes (\$14K to 28K) will have very different health outcomes compared to the census tracts to the northwest with \$100,000 median household income.

The lower map is the number of households making less than \$15,000 per year. A census tract in east Wilson had 537 families making less than \$15,000 per year.

Demographics, cont.

Wilson County's 2020 poverty percentage was 21.2% compared to North Carolina at 12.9% and the U.S. at 11.9%. The cost of living in Wilson County was lower than NC and the U.S.



Business Profile

61% percent of employees in Wilson County were employed in:

- Retail Trade (16.5%)
- Health Care & Social Assistance (16.1%)
- Public Administration (12.3%)
- Educational Services (8.1%)
- Accommodation & Food Service (7.7%)

Source: Esri

Retail, accommodation and food service offer health insurance at a lower rate than healthcare, public administration, and educational services.

Wilson County's May 2022 preliminary unemployment was 5.6%, compared to 3.4% for North Carolina and 4% for the U.S.

It is beneficial to contact people in groups to improve health. There are three primary places people gather during the week: work, church and school. These are three excellent places to reach people to create a culture of health.

Demographics, cont.

Tapestry Segmentation

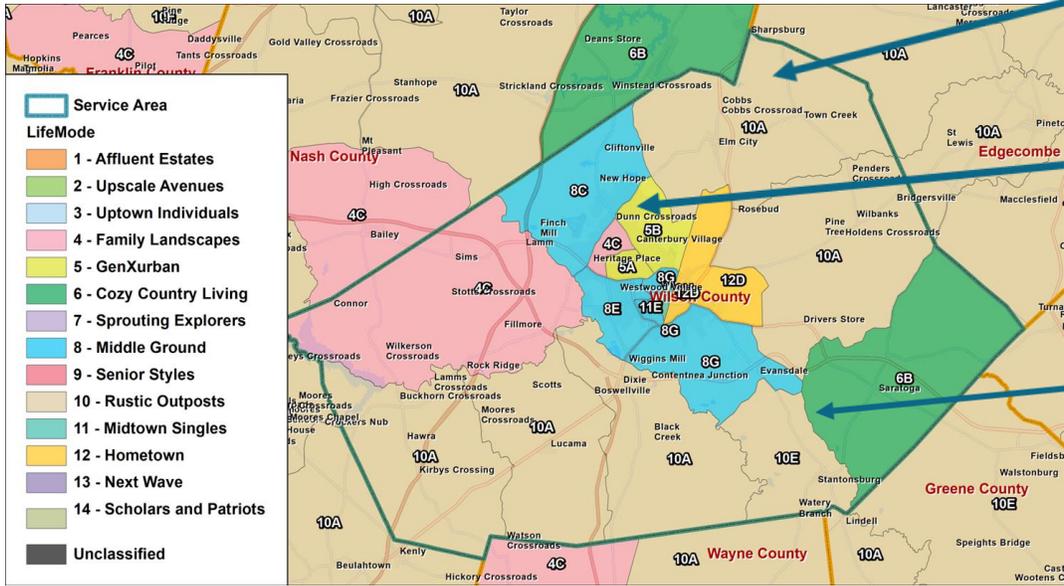
Demographics are population, age, sex, and race. Psychographics are adding behavior data in the form of spending habits and survey data on top of demographics. Fifty percent of Wilson County is included in three Tapestry Segments. The map below is color coded by LifeMode, which are groupings of Tapestry Segments that behave similarly. The dominant Tapestry Segment of each census tract is identified by number.

The dominant Tapestry Segments in the county were Southern Satellites (18%), Middleburg (9%), and Rural Bypasses (8%). The map below demonstrates the dominant Tapestry Segment by census tract.

There is a very brief description of the segments on the right of the map. There is much more information on Tapestry Segments, at <http://doc.arcgis.com/en/Esri-demographics/data/tapestry-segmentation.htm>. Analyzing the Tapestry Segments in the study area helps determine health habits and communication preferences of residents, enabling more effective communication and implementation of solutions to improve health. Many spoke of meeting people where they are in the focus group and interviews. Studying their Tapestry Segment can help do that.

Top three categories represent 35.4% of total households.

Top 3 Tapestry Segments



10A | Southern Satellites (18.4%)

- 40.3 med. age
- \$48k med. HH income
- Do-it-yourselfers who hunt and fish
- They tend to be somewhat late in adapting to technology
- They obtain a disproportionate amount of their information from TV, compared to other media

4C | Middleburg (8.6%)

- 36.1 med. age
- \$60k med. HH income
- Education: 65% with a high school diploma or some college
- Comfortable with the latest in technology for convenience (online banking or saving money on landlines) and entertainment
- TV and magazines provide entertainment and information

10E | Rural Bypasses (8.4%)

- 40.4 med age
- \$33k med. HH income
- Almost 25% have not finished high school; 11% have a bachelor's degree or higher
- Income is primarily derived from wages and supplemented with Social Security and Supplemental Security Incomes
- They rely on television to stay informed

Dominant Tapestry Segmentation of Wilson County
Arrows point to the top 3 tapestry segments within the county. Tapestry segments only appear on map if they are ranked 1st in a census tract.

HH - Household

Source: Esri

Focus Group and Survey Results

Focus Groups

Community stakeholders representing the broad interests of the community as well as those representing low income, medically underserved, and minority populations participated in focus groups on June 20 and August 12, 2022, for their input into the community's health. One focus group represented a broad range of interests and backgrounds and the other was Barton College students. Below is a summary. The full summary is included in the appendices.

The participants defined health as wellbeing, physical, mental, spiritual, financial and emotional health that is personal for each person.

Most felt the health of the county was fair and mixed. Mental health was considered poor.

The most significant health issues for the communities were:

- Mental health – hard to navigate and get care, acute trauma, anxiety, panic disorder, adolescents
- Access to care – poor facilities, primary care, no access on weekends except ED
- Crime and safety – sex trafficking, gun violence
- Substance use
- Lack of activities for younger people
- Food insecurity, poor food choices, poor restaurant options
- Health education
- Chronic diseases - Diabetes, high blood pressure
- Obesity – access to gyms
- Safe, affordable housing
- Poverty – child poverty
- Transportation
- Unemployment for people of color
- Quality, affordable childcare
- Sex education – teen pregnancy, birth control (condoms)

If given a magic wand and no resource restrictions, the participants selected the following solutions to improve health.

- Open more clinics throughout the county
- Depoliticize expanding Medicaid
- More mental health clinicians and resources – especially for adolescents, less stigma
- Self-esteem for all – know you're loved by God and have a purpose
- More equity and diversity in the community, less segregation, more coming together
- More activities and safe recreational places for youth in the community

Survey Results

The community surveys were offered online and paper in English and Spanish. The surveys were placed on websites or via internal email for any interested parties at:

- Healthcare Foundation of Wilson
- Wilson County Health Department
- Wilson Medical Center
- Worksites of some committee members

979 surveys were completed, 830 online and 149 on paper. Full survey results may be found in the appendices.

Most rated their health as good (31%) or fair (40%) as opposed to poor 11%, very good 7%, or excellent 2%.

Respondents rated their mental health better than their physical health.

Based on survey results alone, the top three most important issues related to health and disease in Wilson County were:

1. Alcohol/drugs (substance misuse)
2. Mental/behavioral health
3. Overweight/obesity

People in the community need the most information about:

1. Mental/behavioral health
2. Alcohol/drugs (substance misuse)
3. Overweight/obesity
4. Fitness/exercise/healthy eating

The top four social determinants of health impacting health outcomes were:

1. Affordable housing/homelessness
2. Income/poverty
3. Drugs/alcohol/tobacco
4. Crime/safety

Of the 95% who said they had health insurance access to health care was problematic because deductibles and co-pays were too high, insurance didn't cover what was needed and the wait was too long to get care.



Photo Credit: Wilson County Fair

Health Status Data, Rankings and Comparisons

Health Status Data

Based on the 2022 County Health Rankings study performed by the Robert Wood Johnson Foundation and the University of Wisconsin², Wilson County ranked 82nd for health outcomes and 87th for health factors (1= the healthiest; 100 = unhealthiest). Health outcomes are composed of length of life and quality of life. Health factors are comprised of health behaviors, clinical care, social & environmental factors, and physical environment.

County Health Rankings suggested the areas to explore for improvement in Wilson County were higher adult smoking, higher percentage of adult obesity, higher physical inactivity, higher sexually transmitted infections, higher percentage of uninsured, higher preventable hospital stays, lower high school completion, lower percentage of adults with some college, higher unemployment, higher children in poverty, higher income inequality, higher children in single parent households, and higher violent crime. The areas of strength were lower percentage of excessive drinking, higher mammography screening and flu vaccinations.

When analyzing the health status data, local results were compared to North Carolina, the U.S. (where available), and the top 10% of County in the U.S. (the 90th percentile). Where Wilson County' results were worse than NC and U.S., groups and individuals have an opportunity to act and improve these community measures. To become the healthiest community in North Carolina and eventually the nation, Wilson County must close several lifestyle gaps. For additional perspective, North Carolina was ranked the 28th healthiest state out of the 50 states. (Source: 2020 America's Health Rankings; lower is better) North Carolina strengths were low racial disparity in high school graduation rates, high childhood immunization rate, and low percentage of housing with lead risk. The challenges for NC were high percentage of households with food insecurity, low per capita public health funding, and high prevalence of high-risk HIV behaviors.



Photo Credit: Brian Strickland

Health Status Data, Rankings and Comparisons

Comparisons of Health Status

Information from County Health Rankings and America's Health Rankings was analyzed in the CHNA in addition to the previously reviewed sociodemographic information and other public health data. Other data analyzed is referenced in the bullets below, such as: causes of death, demographics, socioeconomic, consumer health spending, and interviews. If a measure was better than North Carolina, it was identified as a strength, and where an indicator was worse than North Carolina, it was indicated as an opportunity for improvement. To prevent strengths from becoming opportunities for improvement, it's important to continually focus on them. Opportunities were denoted with red octagons, and strengths were denoted with green stars for easy interpretation. The years displayed on the County Health Rankings graphs show the year the data was released. The actual years of the data are contained in the source notes below the graphs.

² The Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work and play. Building on the work of America's Health Rankings, the University of Wisconsin Population Health Institute has used this model to rank the health of North Carolina's counties every year since 2003.

Comparisons of Health Status

In most of the following graphs, Wilson County will be blue, North Carolina (NC) will be red, U.S. will be grey and the 90th percentile of counties in the U.S. will be gold.

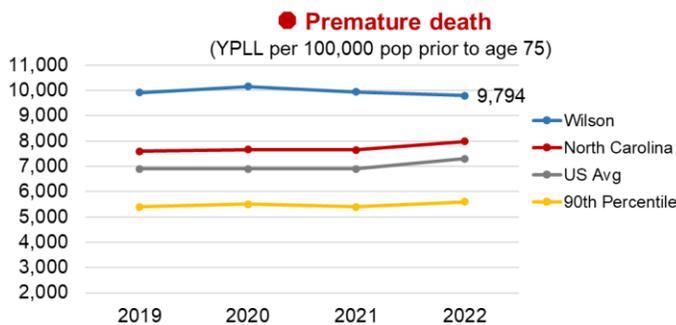
Health Outcomes (Length of Life and Quality of Life)

Health Outcomes are a combination of length of life and quality of life measures. Wilson County ranked 82nd in health outcomes out of 100 North Carolina Counties.

Length of Life

Length of life was measured by years of potential life lost per 100,000 population prior to age 75; here, lower is better. For example, a 25-year-old killed in an accident equates to 50 years of potential life lost prior to age 75. Wilson County ranked 58th in length of life in NC. Wilson County lost 9,594 years of potential life per 100,000 population respectively, which was higher than NC and the U.S.

Wilson County residents can expect to live 1.8 years less than the average U.S. resident.



Premature death by race/ethnicity
(YPLL per 100,000 pop prior to age 75)

| Wilson County | 2018-2020 |
|---------------------------------|-----------|
| American Indian & Alaska Native | NR |
| Asian | NR |
| Black | 12,500 |
| Hispanic | 5,800 |
| White | 8,300 |

● Life Expectancy

(Average number of years a person can expect to live)

| | 2018-2020 |
|-----------------|-----------|
| Wilson County | 75.2 |
| North Carolina | 77.7 |
| US Avg* | 77.0 |
| 90th Percentile | 80.6 |

| Wilson County | 2018-2020 |
|---------------------------------|-----------|
| American Indian & Alaska Native | NR |
| Asian | NR |
| Black | 73.1 |
| Hispanic | 82.9 |
| White | 75.5 |

*U.S. = 2020 Due to impacts of COVID-19, life expectancy in the US decreased 1.8 years from 2019.

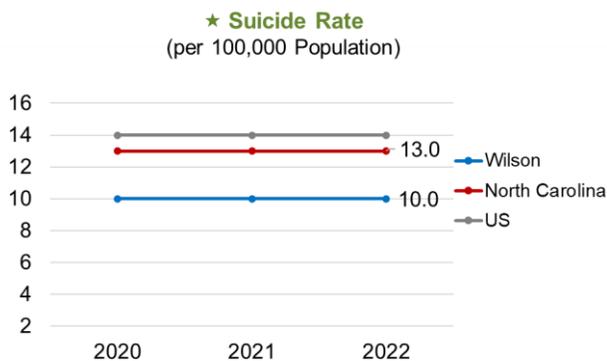
Source: County Health Rankings; National Center for Health Statistics – Mortality File 2018-2020

Leading Causes of Death: Age-Adjusted Death Rates per 100,000 Population

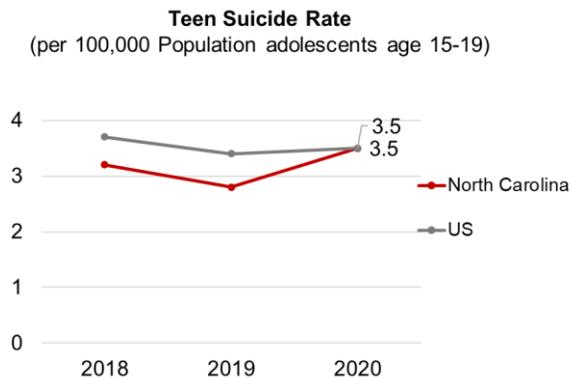
| Cause of Death | Wilson County North Carolina | US |
|------------------------------------|------------------------------|-------|
| Heart Disease | 193.9 | 168.2 |
| Cancer | 152.4 | 144.1 |
| COVID-19* | 93.7 | 85 |
| Accidents (Unintentional Injuries) | 69.6 | 57.6 |
| Strokes | 58.7 | 38.8 |
| Respiratory Diseases | 39.4 | 36.4 |
| Alzheimer's | 46.3 | 32.4 |
| Diabetes | 35.3 | 24.8 |
| Liver Disease | 10.5 | 13.3 |
| Influenza and Pneumonia | 15.9 | 13 |
| Nephritis, nephrosis | 19.5 | 12.7 |
| Hypertension | 15.1 | 10.1 |
| Parkinson Disease | 11.5 | 9.9 |
| Septicemia | 13.2 | 9.7 |

Age-adjusted rates per 100,000 population.
Wilson County data combined from 2019-2020. US and NC data from 2020
Rates that appear in red for a county denote a higher value compared to state data.
Age Adjustment Uses 2000 Standard Population.

Rates in red had death rates higher than NC. The leading causes of death in Wilson County were heart disease, cancer, COVID-19, followed by accidents, strokes and Alzheimer's.



Age-adjusted rates per 100,000 population.
Wilson County, NC, North Carolina, and US data are from individual years.
Age Adjustment Uses 2000 Standard Population.

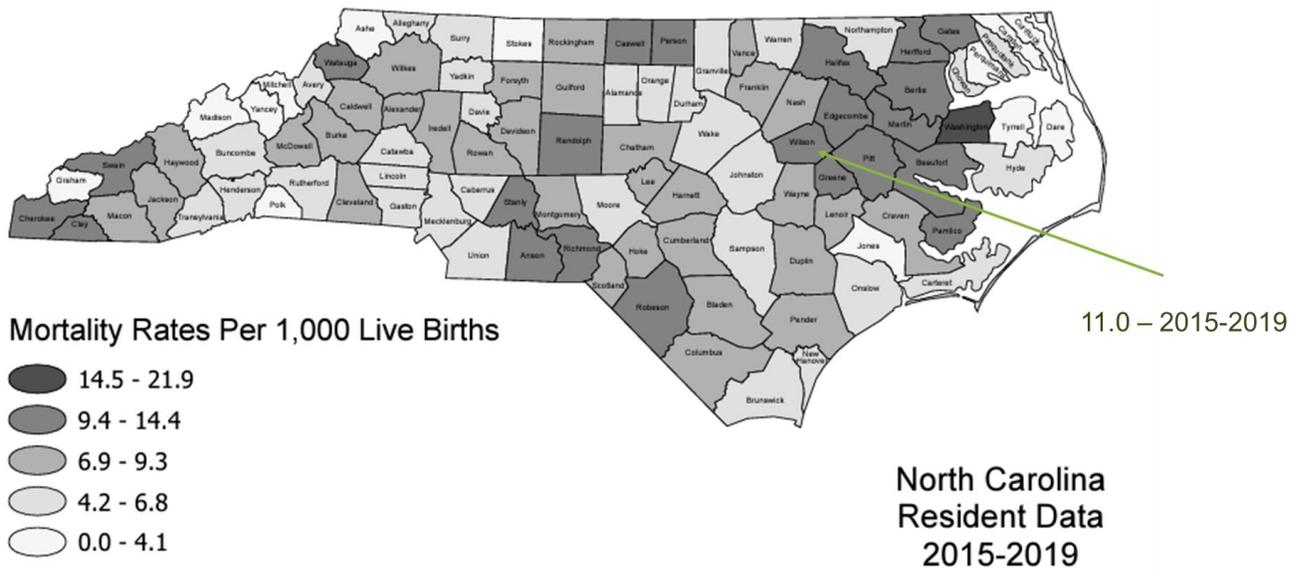


Crude rates per 100,000 population.
North Carolina, and US data are from individual years.
Age Adjustment Uses 2000 Standard Population.

Wilson County's suicide rate (10) was below NC (13) and the U.S. (14). The Teen suicide rate in NC increased in 2020.

Source(s): Wonder CDC.gov (2019) Age-adjusted rates per 100,000 population. Age Adjustment Uses 2000 Standard Population.

Infant Mortality Rates in NC



Length of Life STRENGTHS

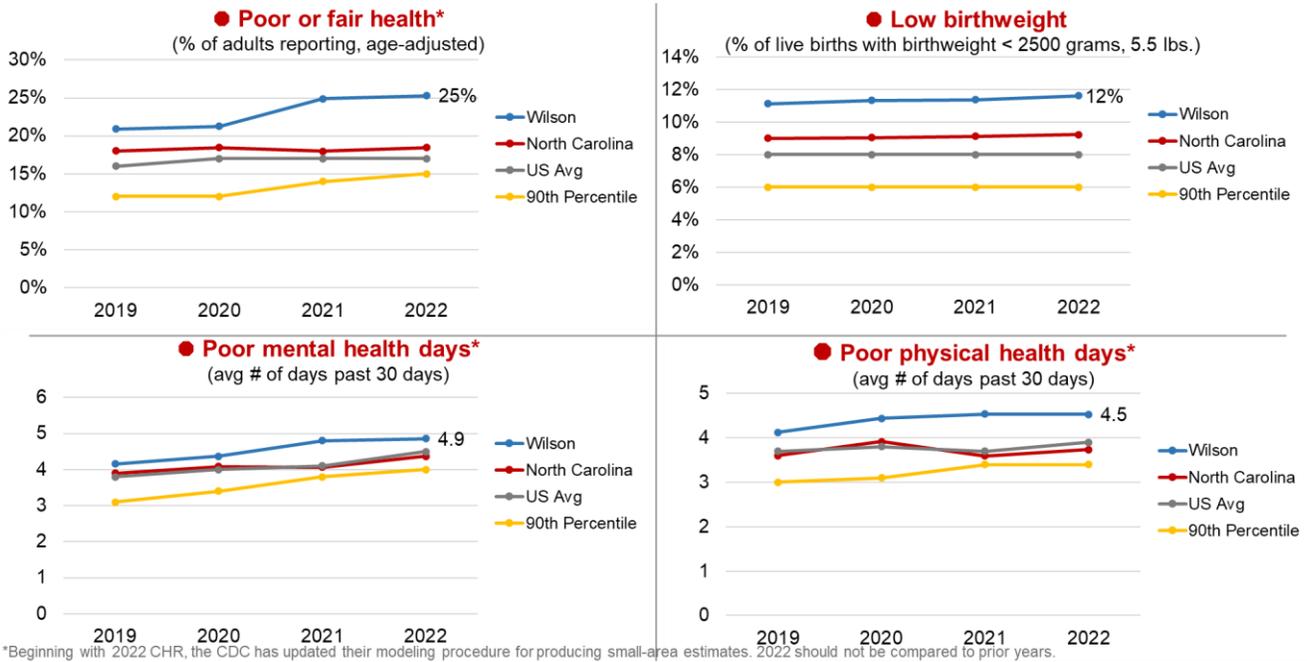
- Wilson County had a lower death rate due to liver disease than both NC and the U.S.
- Wilson County had lower suicide rate at 10 per 100,000 population than NC and the U.S.

Length of Life OPPORTUNITIES

- Wilson County had shorter life expectancy at 75.2 years than NC at 77.7 and the U.S. at 77.
- Wilson County had higher death rates for all but one of the leading causes of death than NC.
- Wilson County had higher numbers of premature deaths than both NC and the U.S.
- Wilson County had higher infant mortality rates than most counties in NC.

Quality of Life

Quality of life was measured by: % reporting fair or poor health, the average number of poor physical health days and poor mental health days in the past 30 days, and % of live births with birthweight less than 2500 grams, or 5.5 lbs. Wilson County ranked 85th in quality of life out of 100 North Carolina Counties.

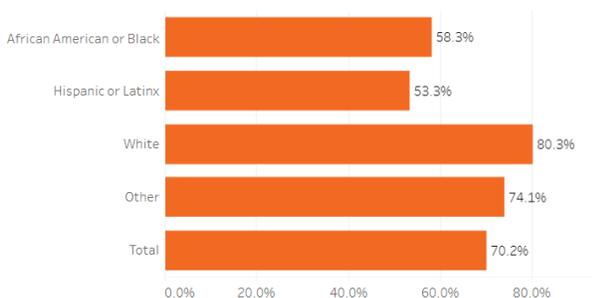


Source: County Health Rankings; Behavioral Risk Factor Surveillance System (BRFSS) 2019
Source: County Health Rankings; National Center for Health Statistics – Natality files (2014-2020)

Wilson County Healthy Babies

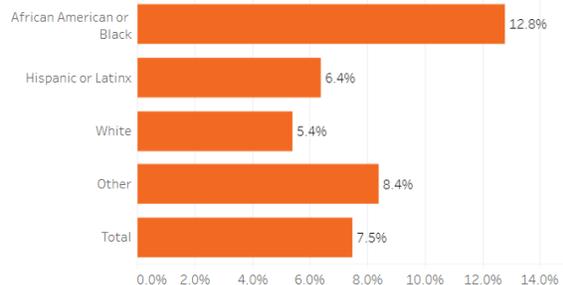
Women who receive early prenatal care

Early prenatal care improves a baby's chances for a healthy birth and a great start in life. Studies show that early prenatal care has the greatest impact on teens, single women, and women of color - all of whom are at higher risk for complications during pregnancy. Ensuring that families have affordable health insurance and local health care providers can help eliminate racial disparities.



Babies born at a low birthweight

A low birthweight (less than approximately 5.5 pounds) increases the risk of health problems as an infant and later in life. Black families are most likely to have a low birthweight baby compared to all other racial and ethnic groups. Many factors can increase the likelihood of low birthweight, from environmental factors like exposure to air pollution or lead, to health factors like nutrition and stress. Affordable health insurance and quality health care are two of the most effective tools to reduce racial disparities, so that more children can be born at a healthy birthweight.



Source: NC Child, 2020



Photo Credit: Brian Strickland

Quality of Life OPPORTUNITIES

- Wilson County had a higher percentage of poor or fair health days at 25% than both NC and the U.S.
 - Wilson County had a higher percentage of low birthweight babies at 12% than both NC and the U.S.
 - Wilson County had a higher average number of poor mental health days in the last 30 days at 4.9 than NC and the U.S.
 - Wilson County had a higher average number of poor physical health days at 4.5 than both NC at the U.S.
 - There were racial and ethnic disparities in early prenatal care and low birthweight babies.
-

Health Factors or Determinants

Health factors or determinants rankings are comprised of measures related to health behaviors (30%), clinical care (20%), social & economic factors (40%), and physical environment (10%). Wilson County ranked 87th in health factors out of 100 North Carolina Counties.

Health Behaviors

Health behaviors are made up of nine measures and account for 30% of the county rankings. Wilson County ranked 79th in health behaviors out of 100 Counties in North Carolina.

● Adult obesity

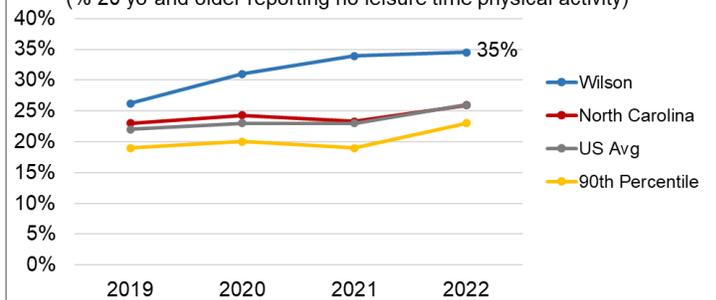
(% of adults that report a BMI of 30 or more)

| 2022 | |
|-----------------|-----|
| Wilson County | 39% |
| North Carolina | 34% |
| US Avg | 32% |
| 90th Percentile | 30% |

Beginning with 2022 CHR, the CDC has updated their modeling procedure for producing small-area estimates. 2022 released data should not be compared to prior years.

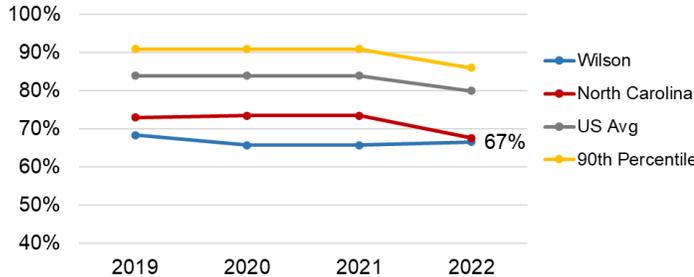
● Physical inactivity

(% 20 yo and older reporting no leisure time physical activity)



● Access to exercise opportunities

(% of population with adequate access to locations for physical activity)



● Adult smoking

(% that report every day or "most days")

| 2022 | |
|-----------------|-----|
| Wilson County | 23% |
| North Carolina | 19% |
| US Avg | 16% |
| 90th Percentile | 15% |

In 1965, 45% of the US smoked

Beginning with 2022 CHR, the CDC has updated their modeling procedure for producing small-area estimates. 2022 released data should not be compared to prior years.

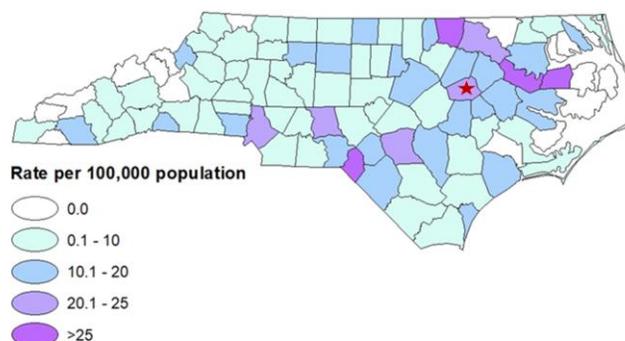
Source: Obesity & Physical Inactivity – CHR, Behavioral Risk Factor Surveillance System, 2019

Source: Access to exercise opportunities – CHR, Business Analyst, Delorme map data, Esri, & US Census Tigerline Files, 2010 and 2021. Measures the percentage of individuals in a County who live reasonably close to a location for physical activity, defined as parks or recreational facilities (local, state national parks, gyms, community centers, YMCAs, dance studios and pools based on SIC codes)

Source: Smoking - CHR; Behavioral Risk Factor Surveillance System (BRFSS), 2019

Source: HIV – North Carolina HIV Surveillance Report 2020

HIV Rate (newly diagnosed by county of residence 2021)

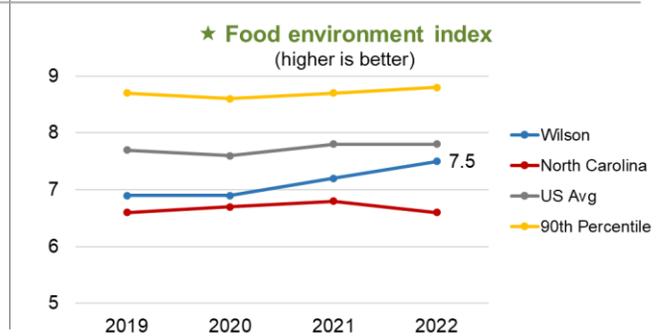
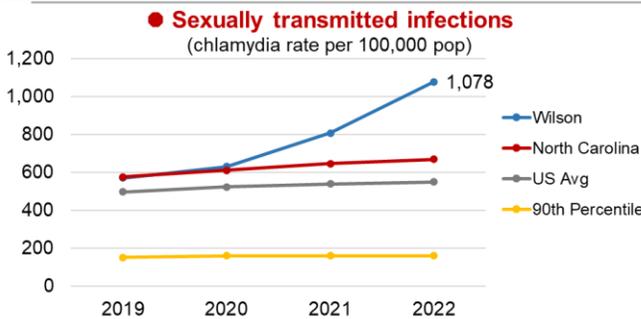
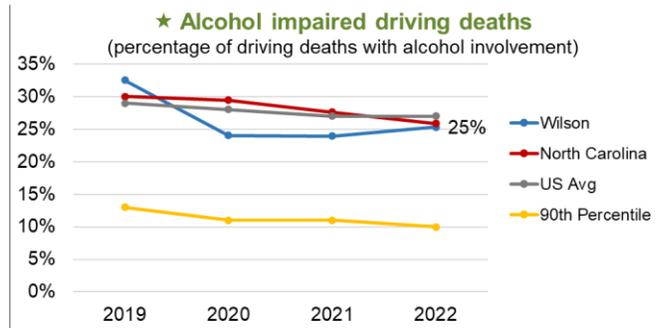
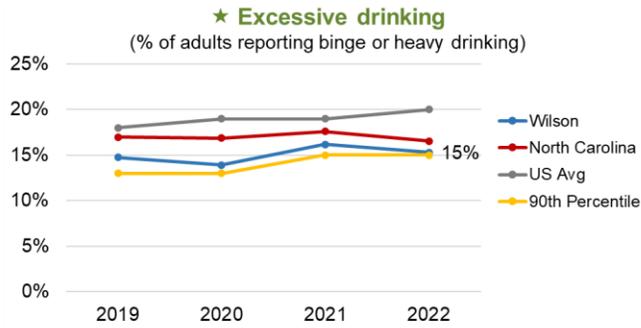


394 - # of people diagnosed with HIV in Wilson County

21.9 - 2018-2020 average rate

*Note: 2020 data should be treated with caution due to reduced availability of testing caused by the COVID-19 pandemic. Data Source: enhanced HIV/AIDS Reporting System (eHARS) (data as of June 28, 2021).

Health Behaviors, Cont.



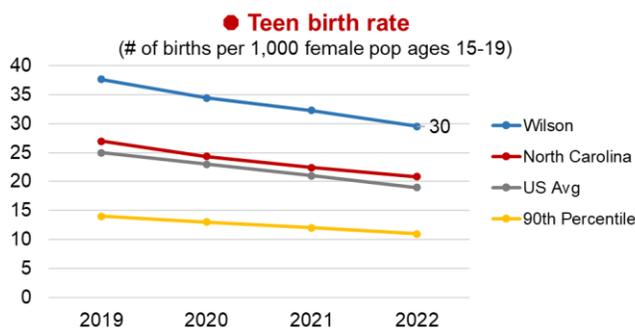
Source: Excessive drinking - CHR; Behavioral Risk Factor Surveillance System (BRFSS), 2019

Source: Alcohol-impaired driving deaths - CHR; Fatality Analysis Reporting System, 2016-2020

Source: STIs - CHR; National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2019

Source: Food environment: CHR; USDA Food Environment Atlas, Map the Meal Gap from Feeding America, 2019

The food environment index is comprised of the % of the population with limited access to healthy foods and the % of the population with food insecurity. Limited access to foods estimates the % of the population who are low income and do not live close to a grocery store. Food insecurity is the % of the population who did not have access to a reliable source of food during the past year.



Teen birth rate
(# of births per 1,000 female pop ages 15-19)

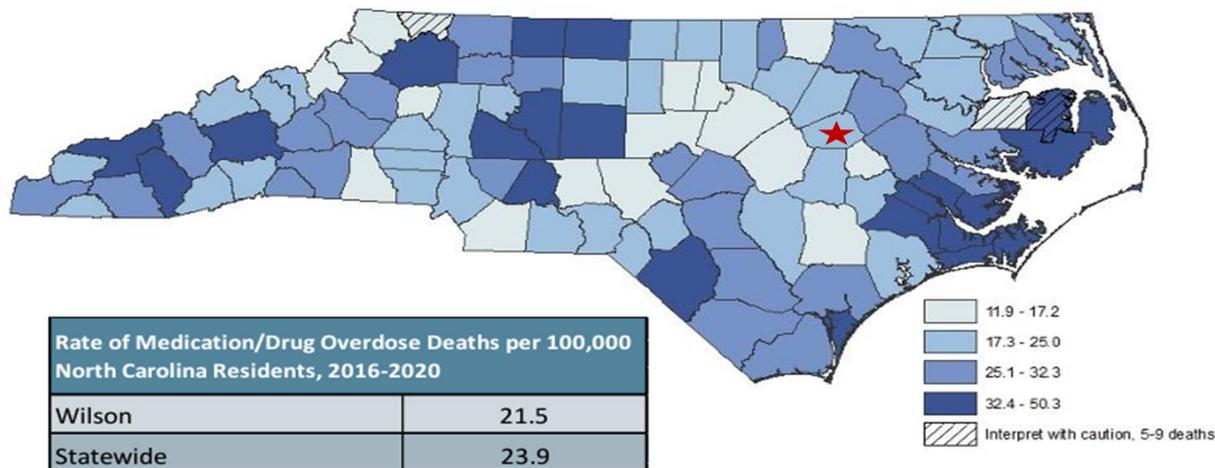
| Wilson County | 2021 |
|---------------|------|
| Asian | NR |
| Black | 40 |
| Hispanic | 47 |
| White | 13 |

Source: Teen birth rate - CHR; National Center for Health Statistics - Natality files, 2014-2020

Health Behaviors, Cont.

Rate of Medication and Drug Overdose Deaths

Wilson County experienced fewer medication and drug overdose deaths per 100,000 residents than NC.



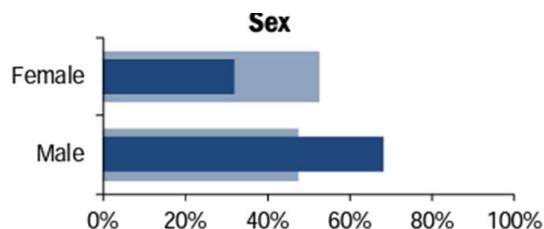
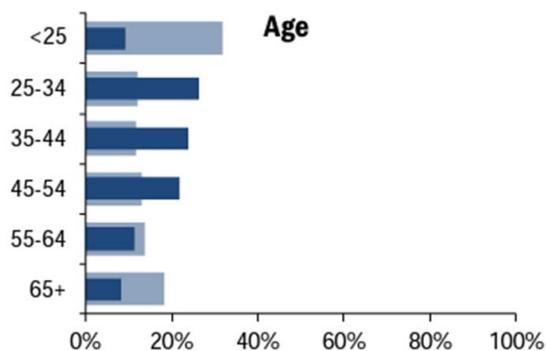
Technical Notes: Rates are per 100,000 NC residents; All intent medication and drug poisoning: X40-X44, X60-X64, Y10-Y14, X85
Source: Deaths-NC State Center for Health Statistics, Vital Statistics; Population-National Center for Health Statistics
 Analysis by Injury Epidemiology and Surveillance Unit



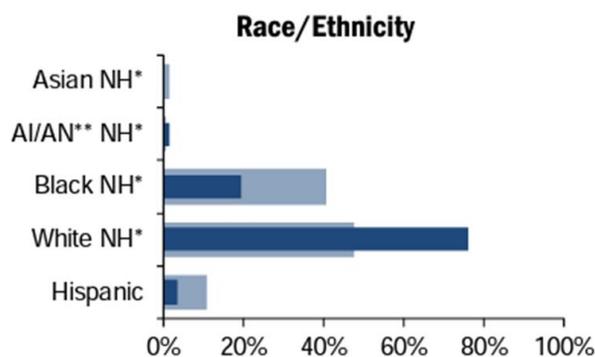
Demographics of Medication and Drug Overdose Deaths in Wilson County

Compared to County Population

■ Wilson County Resident Population, 2016-2020
 ■ Wilson County Resident Overdose Deaths, 2016-2020



Technical Notes: All intent medication and drug poisoning: X40-X44, X60-X64, Y10-Y14, X85
Source: Deaths-NC State Center for Health Statistics, Vital Statistics; Population-NCHS
 Analysis by Injury Epidemiology and Surveillance Unit



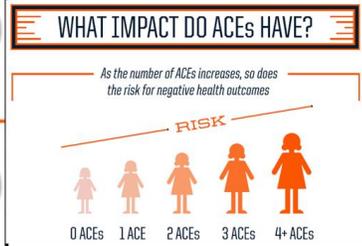
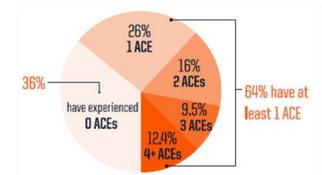
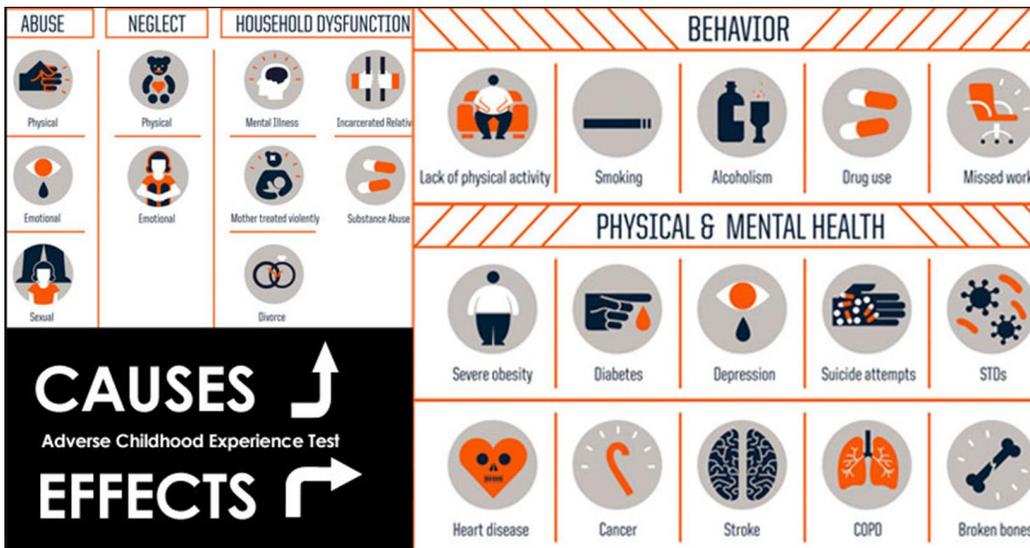
* Non-Hispanic
 ** American Indian/Alaskan Native

The population ages 25-54 were dying from overdoses at a higher rate than other age groups. The white population and males were dying at a higher rate than represented in the population.

Health Behaviors, Cont.

Adverse Childhood Experiences (ACEs)

Abuse, neglect and household dysfunction have the effect of poor health behaviors as well as poor physical and mental health. The more ACEs a child has the higher risk they are for poor health outcomes. According to the CDC, "Adverse Childhood Experiences have a tremendous impact on future violence victimization and perpetration, and lifelong health and opportunity." ACEs are strongly associated with social inequities. While present in all populations, females, people of color, and those experiencing income disparities are at a greater risk of experiencing multiple ACEs.



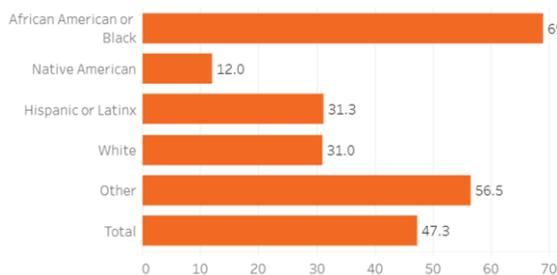
| | 0 ACEs | 1 ACEs | 2+ ACEs |
|-----------------------|--------|--------|---------|
| United States | 54% | 25% | 22% |
| North Carolina | 50% | 26% | 24% |

<https://www.childhealthdata.org/browse/survey/results?q=4783&r=1&r2=35>

Among children from birth through age 17, percentage reported to have had zero, one, and two or more ACEs, nationally and by state. Data Source: National Survey of Children's Health 2016, Health Resources and Services Administration, Maternal and Child Health Bureau. <https://mchb.hrsa.gov/data/national-surveys>. Citation: Child and Adolescent Health Measurement Initiative. 2016 National Survey of Children's Health (NSCH) data query. Data Resource Center for Child and Adolescent Health supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved [09/15/21] from [www.childhealthdata.org].

ACEs data is not available for Wilson County. However, North Carolina had a lower percentage of youth with no ACEs, and higher percentages of 1 and 2+ ACEs.

Children assessed for abuse or neglect per 1,000



Children without health insurance

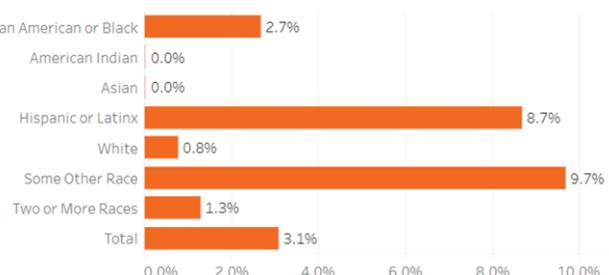




Photo Credit: Red Door Homes

Health Behaviors **STRENGTHS**

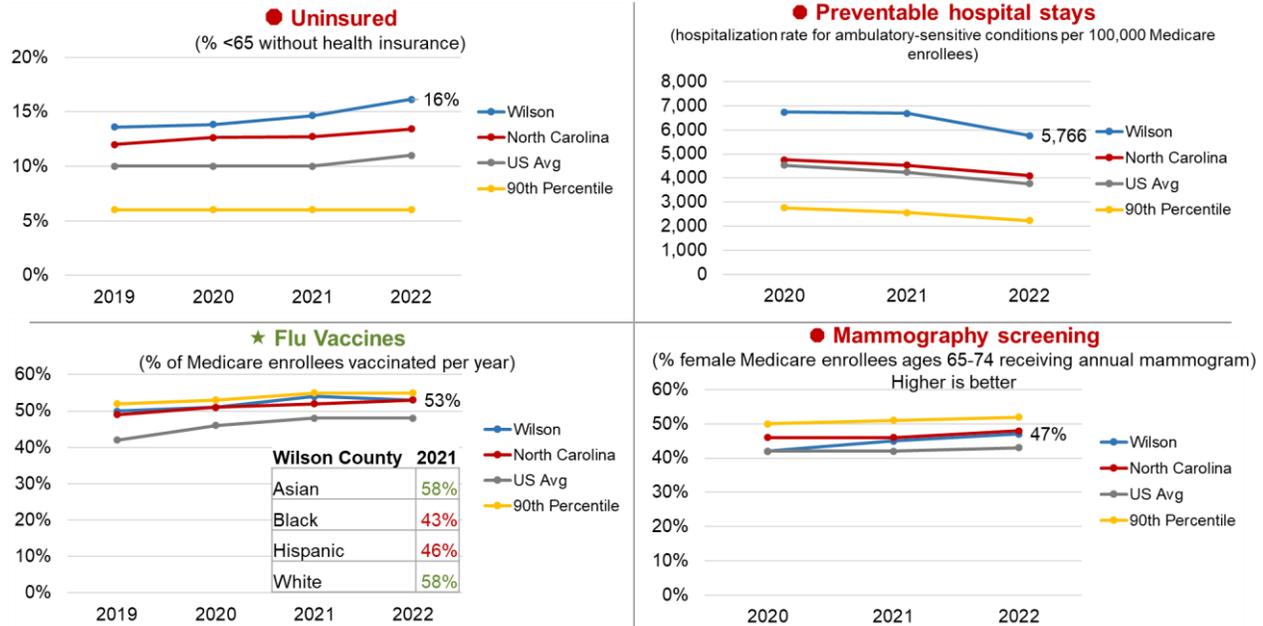
- The food environment index was higher (better) in Wilson County (7.5) than NC.
- Excessive drinking at 15% was lower in Wilson County than NC and the U.S.
- The percentage of alcohol impaired driving deaths was lower in Wilson County at 25% than both NC and the U.S.

Health Behaviors **OPPORTUNITIES**

- Adult obesity in Wilson County was 39% which was higher than NC and the U.S. Obesity puts people at increased risk of chronic diseases including diabetes, kidney disease, joint problems, hypertension, and heart disease. Obesity can cause complications in surgery and with anesthesia. It has been implicated in Alzheimer's and often leads to metabolic syndrome and type 2 diabetes.
- Physical inactivity at 35% was higher in Wilson County than in NC and the U.S. and is trending up.
- Sexually transmitted infections measured by chlamydia rate per 100,000 population were higher in Wilson County at 1,078 than NC (670) and the U.S. (551).
- Sixty-seven percent of Wilson County had access to exercise opportunities which was lower than NC and the U.S.
- Wilson County had a higher percentage of adult smokers at 23% than both NC at 19% and the U.S. at 16%.
- The teen birth rate in Wilson County was higher at 30 births per 1,000 females ages 15-19 than NC and the U.S. and is trending down. The teen birth rate is higher in the black and Hispanic populations.
- Wilson County's HIV rate was higher than most other counties in NC.
- Focusing on white men age 25-54 could decrease overdose drug deaths. The most common substances contributing to overdose deaths were heroin and/or Fentanyl, followed by cocaine, then alcohol.

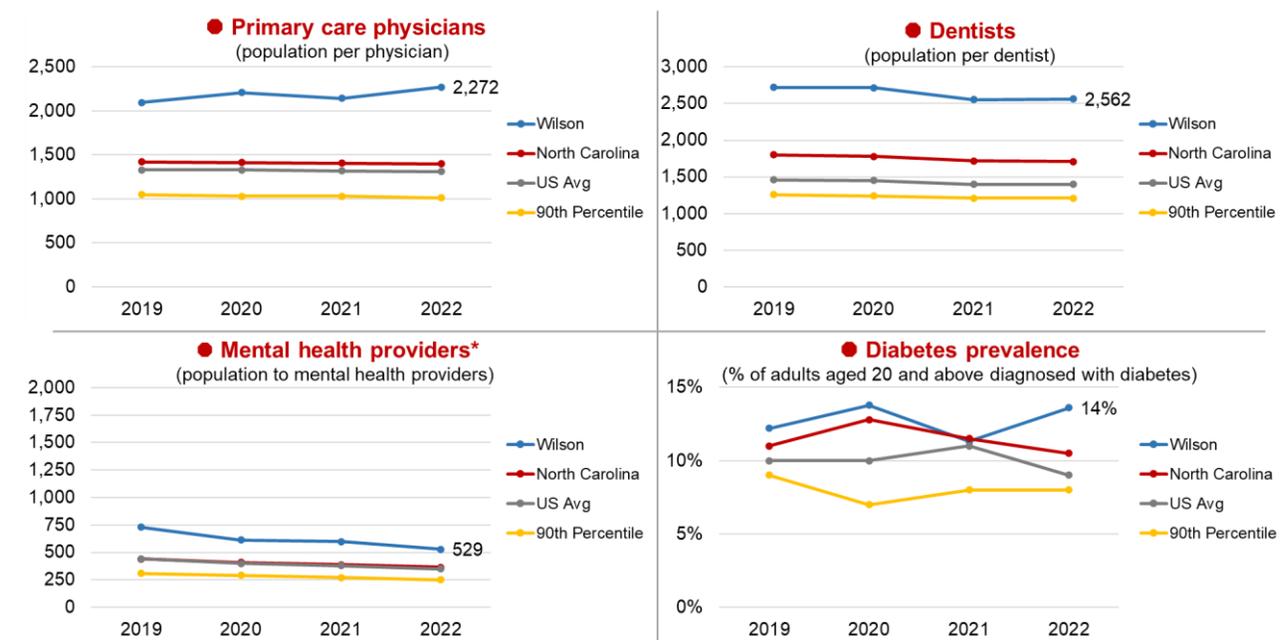
Clinical Care

Clinical care ranking is made up of seven indicators, and account for 20% of the county rankings. Wilson County ranked 84th in clinical care out of 100 North Carolina Counties.



Source: Uninsured - CHR; Small Area Health Insurance Estimates, 2019

Source: Preventable hospital stays, mammography screening, flu vaccinations – CHR, CMS Mapping Medicare Disparities Tool, 2019



Source: Pop to PCP - CHR; Area Health Resource File/American Medical Association, 2019

Source: Pop to Dentists - CHR; Area Health Resource File/National Provider Identification file, 2020

Source: Pop to mental health provider (psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapists and advanced practice nurses specializing in mental health) CHR; CMS, National Provider Identification, 2021

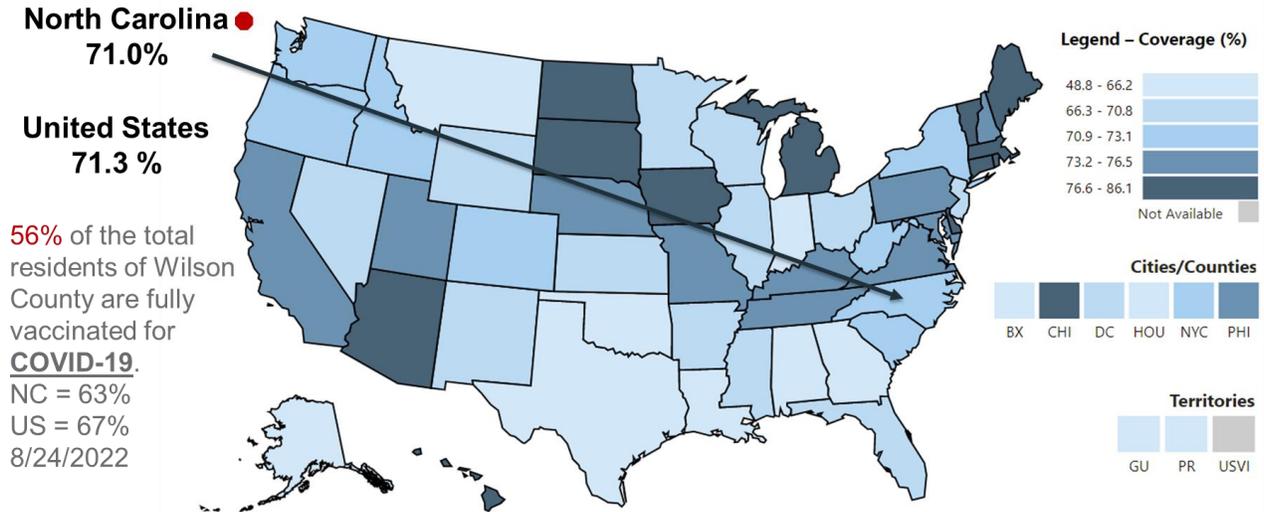
Source: Diabetes prevalence – Behavioral Risk Factor Surveillance System, 2019

Clinical Care, cont.

NC had a lower vaccination percentage among children 19-35 months old than the U.S. and lower COVID-19 vaccination rates.

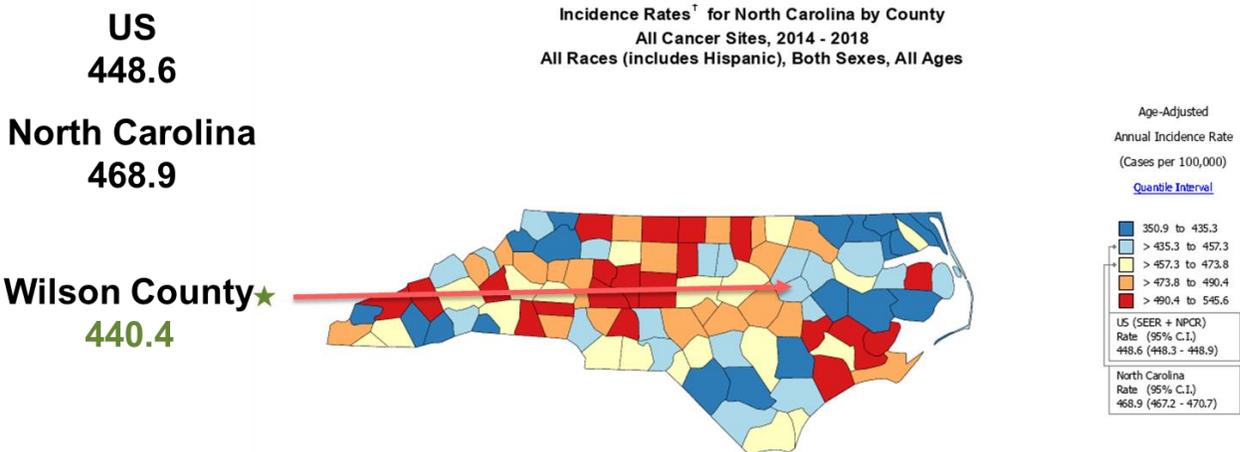
Vaccination Coverage Among Children and COVID-19 Vaccination Rates

Combined 7 Series Vaccination Coverage by Age 24 Months among Children Born in 2018, National Immunization Survey-Child (NIS-Child), 2018



Combined 7 vaccine series (4:3:1:3*:3:1): 4 or more doses of DTaP, 3 or more doses of Polio, 1 or more doses of MMR, Hib full series (3 or 4 doses, depending on product type received), 3 or more doses of HepB, 1 or more doses of Varicella, and 4 or more doses of PCV (In 2013 data, referred to as 4:3:1:4:3:1:4-FS)

Source: CDC, National Center for Immunization and Respiratory Diseases (2018 data posted 2022)



Notes:
State Cancer Registries may provide more current or more local data.
Data presented on the State Cancer Profiles Web Site may differ from statistics reported by the State Cancer Registries (for more information).
† Incidence rates (cases per 100,000 population per year) are age-adjusted to the 2000 US standard population (19 age groups: <1, 1-4, 5-9, ..., 80-84, 85+). Rates are for invasive cancer only (except for bladder which is invasive and in situ) or unless otherwise specified. Rates calculated using SEER*Stat. Population counts for denominators are based on Census populations as modified by NCI.
The 1969-2018 US Population Data File is used for SEER and NPCR incidence rates.
Rates are computed using cancers classified as malignant based on ICD-O-3. For more information see [malignant.html](#)
Data for the United States does not include data from Puerto Rico



Photo Credit: Barton College

Clinical Care **STRENGTHS**

- The percent of Medicare enrollees with flu vaccines per year in Wilson County at 53% was the same as NC and higher than the U.S.
- The cancer incidence rate was lower in Wilson county at 440.4 than NC and the U.S.

Clinical Care **OPPORTUNITIES**

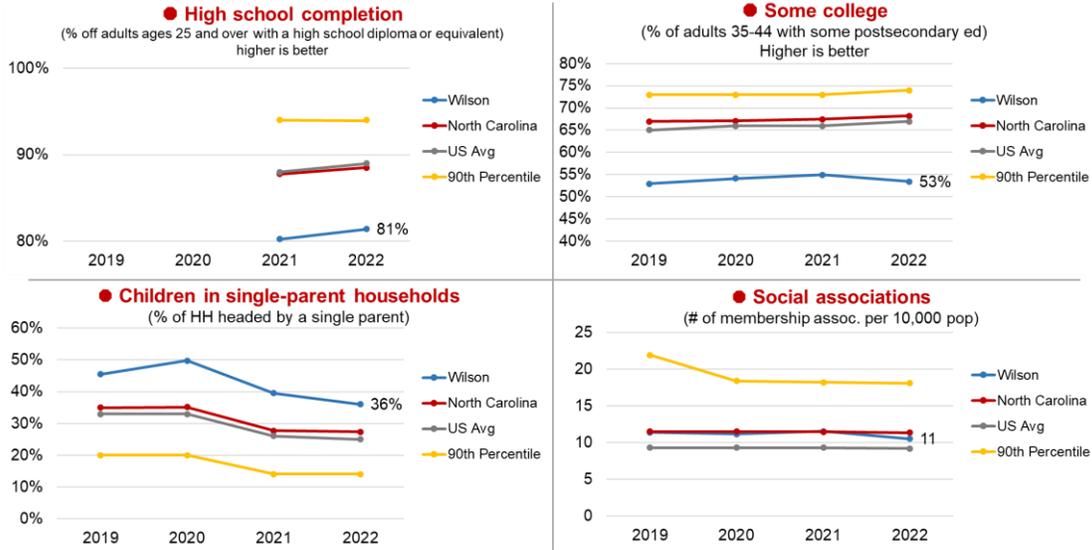
- The population per primary care physician was at 2,272 in Wilson County, higher than both NC and the U.S.
- The percent of population under sixty-five without health insurance in Wilson County was 16%. This is higher than NC and the U.S.
- Preventable hospital stays in Wilson County were 5,766 per 100,000 Medicare enrollees which was higher than NC (4,096) and the U.S. (3,767).

Hospitalization ambulatory-care sensitive conditions, which are diagnoses treatable in outpatient settings, suggests that the quality of care provided in the outpatient setting was less than ideal. This measure may also represent a tendency to overuse hospitals as a main source of care. Preventable Hospital Stays could be classified as both a quality and access measure, as some literature describes hospitalization rates for ambulatory care-sensitive conditions primarily as a proxy for access to primary health care. Source: CHR; Brumley R, Enguidanos S, Jamison P, et al. Increased satisfaction with care and lower costs: Results of a randomized trial of in-home palliative care. J Am Geriatric Soc. 2007;55:993-1000.

- Mammography screening was lower in Wilson County than NC at 47%, but higher than the U.S.
- COVID-19 vaccinations were lower in Wilson County than NC at 56% than NC at 63% and the U.S. at 67%.
- The population per primary care physicians, dentists, and mental health providers was higher in Wilson County than NC and the U.S.
- Diabetes prevalence was higher in Wilson County at 14% than NC and the U.S.

Social & Economic Factors

Social and economic factors account for 40% of the county rankings. There are eight measures in the social and economic factors category. Wilson County ranked 91st in social and economic factors out of 100 NC Counties.

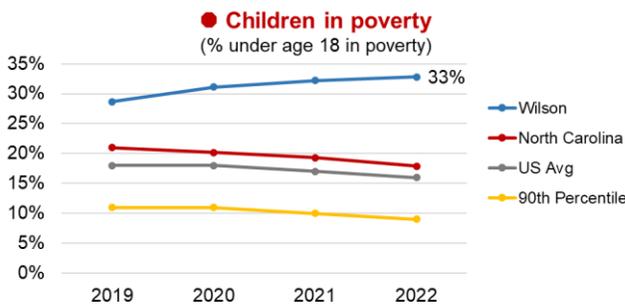


Source: High school completion– CHR; American Community Survey, 5-yr estimates, 2016-2020

Source: Some college CHR; American Community Survey, 5-year estimates, 2016-2020.

Source: Children in poverty - CHR; U.S. Census, Small area Income and Poverty Estimates, 2020

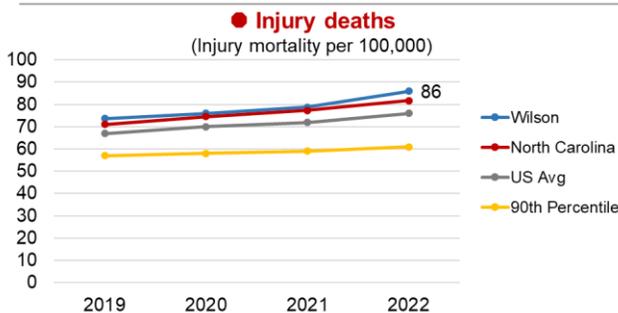
Source: Social associations - CHR; County Business Patterns, 2019



Children in poverty
(% under age 18 in poverty)

| Wilson County | 2022 |
|---------------------------------|------|
| American Indian & Alaska Native | 88% |
| Asian | NR |
| Black | 39% |
| Hispanic | 51% |
| White | 9% |

63% of children are eligible for free or reduced-price lunches 2020-2021, compared to 58% for NC



Injury deaths
(Injury mortality per 100,000)

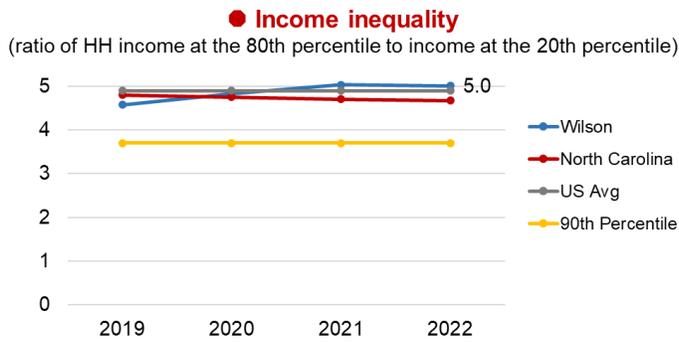
| Wilson County | 2022 |
|---------------------------------|------|
| American Indian & Alaska Native | NR |
| Asian | NR |
| Black | 77 |
| Hispanic | 48 |
| White | 104 |

Source: Income inequality and children in single-parent households - CHR; American Community Survey, 5-year estimates 2016-2020

Source: Injury deaths – CHR; National Center for Health Statistics – Mortality Files, 2016-2020

Source: Crime rate – NC Sate Bureau of Investigation – October 2021

Social & Economic Factors Cont.



Crime Rates

(crime per 100,000 pop)

The Crime Index includes the total number of murders, rapes, robberies, aggravated assaults, burglaries, larcenies, and motor vehicle thefts.

| 2020 | Index Crime Rate | Violent Crime Rate | Property Crime Rate |
|---------------|------------------|--------------------|---------------------|
| NC | 2,775.5 | 451.6 | 2,324.0 |
| Wilson County | 2,549.1 | 386.3 | 2,162.8 |

Crime Index offences decreased 4.5% from 2019 to 2020.

Social & Economic Factors STRENGTHS

- The number of violent and property crimes per 100,000 population was lower in Wilson County than NC.
- The cost of living was lower in Wilson County than NC and the US.

Social & Economic Factors OPPORTUNITIES

- High school completion was lower in Wilson County at 81% than NC and the U.S.
- The percentage of adults with some college was lower in Wilson County at 53% than NC and the U.S.
- The percentage of children in single-parent households was 36% in Wilson County, higher than NC and the U.S.
- Social associations were lower in Wilson County at 11 memberships per 10,000 population than NC. (NOTE: Associations include membership organizations such as civic organizations, bowling centers, golf clubs, fitness centers, sports organizations, religious organizations, political organizations, labor organizations, business organizations, and professional organizations.)
- The percentage of children in poverty at 33% was higher in Wilson County than NC and the U.S. Children in poverty was higher in the Black and Hispanic populations.
- Income inequality represents the ratio of household income at the 80th percentile compared to income at the 20th percentile. Income inequality was higher in Wilson County at 5.0 than NC and the U.S.
- Injury deaths were higher in Wilson County at 86 and minimally higher than NC or the U.S.
- The median household income in Wilson County was \$45,398, lower than NC at \$62,513 and the U.S. at \$72,414.
- Wilson County had 21.2% of the population in poverty, higher than NC and the U.S.

Populations Disparately Affected

Secondary data was further assessed to determine health disparities for race/ethnic, age or gender groups. The table below identifies indicators in which a specific population subgroup differs significantly and negatively from the overall population in Wilson County.

| Health Indicator | Group(s) Disparately Affected* |
|--|--|
| Lung and Bronchus Cancer Incidence Rate | Male |
| All Cancer Incidence Rate | Male |
| Bladder Cancer Incidence Rate | Male |
| Children Living Below Poverty Level | Black or African American, Hispanic or Latino, Other, Two or More Races |
| Families Living Below Poverty Level | Black or African American, Hispanic or Latino, Other, Two or More Races |
| HIV, STDs, and Hepatitis C | Person's with Substance Use Disorder |
| People Living Below Poverty Level | <6, 6-11, 12-17, Black or African American, Hispanic or Latino, Other, Two or More Races |
| People 65+ Living Below Poverty Level | Black or African American |
| Median Household Income | Black or African American, Hispanic or Latino, Other, Two or More Races |
| Per Capita Income | Black or African American, Hispanic or Latino, Other, Two or More Races |
| People 25+ with a Bachelor's Degree or Higher | Black or African American, Hispanic or Latino, Other |
| People 25+ with a High School Degree or Higher | 65+, Black or African American, Hispanic or Latino, Other |
| Workers who Walk to Work | Ages 55-59 |
| Workers who Drive Alone to Work | Native Hawaiian or Other Pacific Islander, White, non-Hispanic |
| COVID-19 | 65+, Black, Hispanic, American Indian/Alaska Native, Native Hawaiian or Other Pacific Islander |

Source: HealthENC.org; CDC Oct. 19, 2022; Kaiser Family Foundation, Aug. 22, 2022

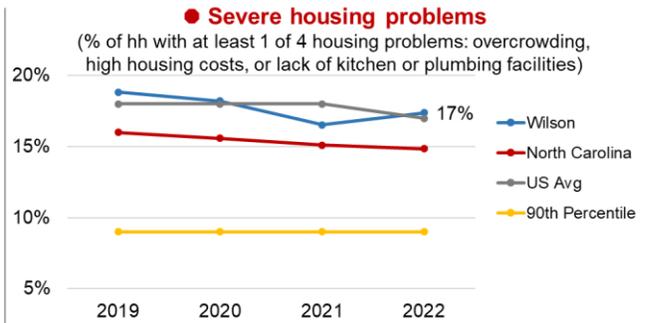
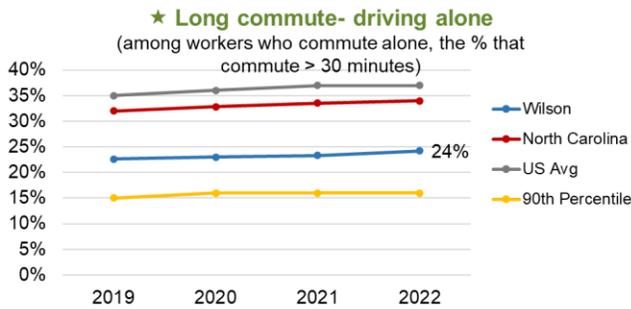
Physical Environment

Physical environment contains four measures in the category and accounts for 10% of the county rankings. Wilson County ranked 48th in physical environment out of 100 North Carolina Counties.

★ **Drinking water violations**

| | 2020 | 2021 | 2022 |
|---------------|------|------|------|
| Wilson County | No | No | No |

Source: EPA Safe Drinking Water Information System.



● **Broadband access**
(% of households with broadband internet connection)

| Wilson County | 2022 |
|-----------------|------|
| Wilson County | 76% |
| North Carolina | 83% |
| US Avg | 85% |
| 90th Percentile | 88% |

Source: Drinking water violations – County Health Rankings; EPA, Safe Drinking Water Information System, 2020 Source: Severe housing problems – County Health Rankings; HUD Comprehensive Housing Affordability Strategy data, 2014-2018. Source: Driving alone to work and long commute – County Health Rankings; American Community Survey, 5-year estimates, 2016-2020. Source: Air pollution – County Health Rankings; CDC National Environmental Health Tracking Network, 2018
Source: Broadband access – CHR; American Community Survey, 5-yr estimates, 2016-2020

Physical Environment STRENGTHS

- Wilson County reported no drinking water violations in each of the last three years.
- 24% of workers in Wilson County who commute alone commute over 30 minutes was lower than NC and the U.S.

Physical Environment OPPORTUNITIES

- Wilson County had a higher percentage of severe housing problems at 17% than NC and the U.S.
- Broadband access was lower in Wilson County at 76% than NC and the U.S. (85%).



Photo Credit: Brian Strickland

There were Four Broad Themes that Emerged in this Process:

- Wilson County needs to continue to create a “Culture of Health” which permeates throughout the towns, employers, churches, and community organizations to engender commitment to health improvement.
 - There is a direct relationship between health outcomes and affluence (income and education). Those with the lowest income and education generally have the poorest health outcomes.
 - While any given measure may show an overall good picture of community health, subgroups such as the lower income census tracts may experience lower health status measures.
 - It takes partnerships with a wide range of organizations and citizens pooling resources to meaningfully impact the health of the community. Wilson County has many assets to improve health.
-

Results of the CHNA: Community Health Summit Prioritized Health Needs

Prioritization of Health Needs

Prioritization Criteria

At the Community Health Summit, the attendees reviewed the community health information and used the criteria below to prioritize the health needs in the community.

| | |
|---------------------------------|--|
| Magnitude | How big is the problem? How many individuals does the problem affect, either actually or potentially? |
| Seriousness of the Consequences | What would happen if the issue were not made a priority? What is the level of burden on the community (economic, social or other)? |
| Equity | Does this affect one group more than others? |
| Feasibility | Is the problem preventable? How much change can be made? What is the community's capacity to address it? |

Most Significant Community Health Needs

The following needs were prioritized by attendees at the Community Health Summit. Using a nominal group technique, each attendee received three sticky notes and selected their top three health needs and posted their ideas on paper at the back of the room.

1. Mental/behavioral health -29
2. Healthy eating/active living -21
3. Substance misuse -19
4. Access to healthcare or insurance – 12
5. Chronic health issues (diabetes, heart disease, etc.) – 6
6. ACES – 6
7. Housing – 3
8. Poverty – 3
9. STIs – 2
10. Root cause – 2
11. Early childhood education – 2
12. Men's health – 1
13. Child neglect - 1

Impact of 2019 CHNA and Implementation Plan

Impact

COVID-19 impacted implementation in 2020. Groups were unable to meet in person and services were limited in the community. However, progress was made on the Implementation Plan.

Obesity

1. Healthcare Foundation of Wilson approved a strategic grant initiative – funding an after-school program for middle school students, which now provides opportunities to address obesity, fitness & nutrition, alcohol and substance abuse and adolescent pregnancy for all middle school students in the community. This program was implemented in the Fall of 2022.
2. Healthcare Foundation of Wilson funded additional grants within the community to address obesity targets. Specific grants were funded to the Wilson County Schools, Wilson County Department of Social Services, and non-profits in the community.
3. Wilson Medical Center continued its work with the Wilson County Schools to address obesity education.
4. The Wilson County Health Department together with the Department of Social Services expanded the evidenced based Eat Smart Move More initiative with an emphasis on physical activity and nutrition.
5. The Wilson County Health Department offered the evidenced based Diabetes Prevention Program. The Health Department offered classes with a specific focus on the minority population and also worked in partnership with the local YMCA to offer the program to the community.

Fitness and Nutrition

1. Healthcare Foundation of Wilson approved a strategic grant initiative – funding an after-school program for middle school students, providing opportunities to address obesity, fitness & nutrition, alcohol and substance abuse and adolescent pregnancy for all middle school students in the community. This program was implemented in the fall of 2022.
2. Healthcare Foundation of Wilson funded grants within the community to provide support for nutritional education and healthy cooking. Twenty-nine grants were implemented to address outcomes associated with the positive impact of fitness and nutrition for the Wilson Community.
3. Wilson Medical Center sponsored and facilitated various events within the area to educate and promote healthy living. These events include, but are not limited to, Health Fairs, Support Groups, Wellness Screenings, Exercise Programs and Lunch N' Learns.

Impact of 2019 CHNA and Implementation Plan, cont.

Impact

Mental Health, Including Alcohol and Substance Abuse

1. Healthcare Foundation of Wilson has implemented a strategic grant initiative – funding an after-school program for middle school students, which will provide opportunities to address obesity, fitness & nutrition, alcohol and substance abuse and adolescent pregnancy for all middle school students in the community.
2. Healthcare Foundation of Wilson has provided funding to address mental health needs, particularly for women and children at one of the local 501c (3) organizations.
3. Healthcare Foundation of Wilson funded five grants specifically to address alcohol and substance misuse.
4. Wilson Medical Center provided emergency services to patients that presented to the Emergency Department with emergent medical conditions resulting from substance abuse.
5. Wilson Medical Center offered comprehensive hospital based behavioral health services for voluntary and involuntary committed patients.
6. Wilson Medical Center focused on integration with community resources to ensure a care continuum is available for patients with behavioral health diagnoses.
7. Wilson Medical Center actively recruited psychiatrists to staff an inpatient psychiatric unit; Healthcare Foundation of Wilson has helped to fund the Phase 1 renovation of the hospital which included an inpatient psychiatric unit that will include geriatric and adult services to help address this need.
8. The Wilson County Health Department will continue to offer a syringe exchange program in partnership with The Healthcare Foundation of Wilson, OIC, Inc., the City of Wilson Police Department, the Wilson County Sheriff's Department, and the Wilson County Substance Prevention Coalition.
9. The Wilson County Health Department will offer Tobacco Cessation classes.

Impact of 2019 CHNA and Implementation Plan, cont.

Impact

Access to Healthcare

1. Healthcare Foundation of Wilson funded grants to the Wilson County Health Department and Carolina Family Health Centers (a FQHC) and to a local 501c-3 to subsidize mammograms and surgical consultations to women who do not have health insurance coverage.
2. Healthcare Foundation of Wilson funded a strategic grant to the Wilson County Health Department, and Wilson County Schools to expand and support school health clinics in the largest middle school in the county and all high schools in Wilson County. This grant will continue to provide additional school health clinics.
3. Flu vaccinations were provided to uninsured by Wilson County Health Department, funded by Healthcare Foundation of Wilson.
4. Wilson Medical Center assisted patients and their families with the Medicaid eligibility process to achieve additional coverage for families.
5. Wilson Medical Center will continue to recruit providers with a focus on Primary Care, Gastroenterology, Pulmonology, Urology and Orthopedics.
6. Wilson Medical Center will remain focused on Duke Connected Care development and integration of employed and non-employed physicians.
7. Duke University Health System and Wilson Medical Center will continue to collaborate around tele-stroke services and cancer care services. These collaborations ensure patients are able to receive the highest quality and safest care without having to leave their community.
8. Wilson Medical Center will continue to develop and grow their Transitional Care program. This program ensures underinsured and uninsured patients have access to appropriate healthcare resources after they are discharged from the hospital to home.
9. The Wilson County Health Department will continue to provide primary care on a sliding fee scale for adults and children.

Impact of 2019 CHNA and Implementation Plan, cont.

Impact

Adolescent Pregnancy / Sexually Transmitted Diseases

1. Healthcare Foundation of Wilson has implemented a strategic grant initiative – funding an after-school program for middle school students, which will provide opportunities to address obesity, fitness & nutrition, alcohol and substance abuse and adolescent pregnancy for all middle school students in the community.
2. Healthcare Foundation of Wilson provided grant support to the Wilson County Health Department to fund the long-acting reversible contraceptives for uninsured young adults through age 26.
3. Healthcare Foundation of Wilson funded eight grants to address adolescent pregnancy and STDs.
4. The Wilson County Health Department’s SOTCH report will outline additional action items specific to this organization.
5. The Wilson County Health Department in partnership with Wilson County Schools will be teaching the evidenced based curriculum “Real Baby” to 9-12 grade students at Daniels Learning Center.
6. The Wilson County Health Department and the Wilson County Department of Social Services were provided grant funding to implement the program “Making Proud Choices.”



Photo Credit: The Wilson County Fair

Appendices

1. Community Survey
2. Focus Group Summary
3. Community Asset Inventory
4. Acknowledgements

Survey Results

Community Survey

The Community Survey included an online and paper survey in English and in Spanish. The survey was open from June 1, 2022, through July 25, 2022. The survey was placed on websites and via internal email for any interested parties at:

- Healthcare Foundation of Wilson
- Wilson County Health Department
- Wilson Medical Center, including physicians on staff or with privileges
- Worksites of some Committee members

979 completed surveys were received, 830 online and 149 on paper.

Demographics

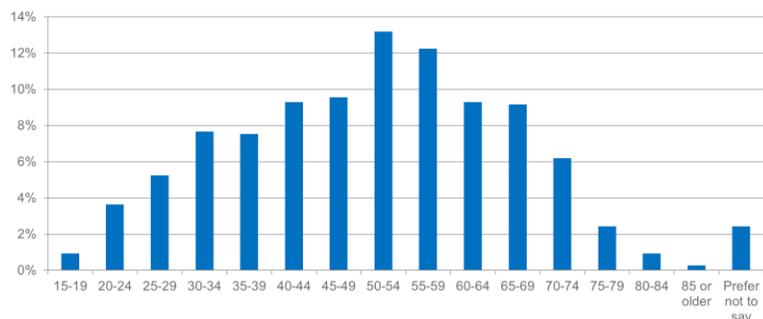
| Gender | |
|-------------------|--------|
| Male | 20.19% |
| Female | 76.31% |
| Prefer not to say | 3.10% |

| Ethnicity Participation | |
|-------------------------|--------|
| Asian | 0.13% |
| Black/African American | 26.38% |
| Hispanic/Latino | 4.98% |
| Native American | 0.94% |
| Pacific Islander | 0.13% |
| White/Caucasian | 60.70% |
| More than one race | 1.75% |
| Prefer not to say | 6.59% |

Where did the survey takers live?

| | |
|----------------------|--------|
| 27893 - Wilson | 32.84% |
| 27896 - Wilson | 24.09% |
| Non-Wilson County | 17.09% |
| 27822 - Elm City | 6.19% |
| Prefer not to say | 4.71% |
| 27851 - Lucama | 3.77% |
| 27880 - Sims | 3.36% |
| 27883 - Stantonburg | 2.69% |
| 27542 - Kenly | 1.75% |
| Other | 0.67% |
| 27803 - Rocky Mount | 0.54% |
| 27807 - Bailey | 0.54% |
| 27813 - Black Creek | 0.54% |
| 27873 - Saratoga | 0.40% |
| 27557 - Middlesex | 0.27% |
| 27830 - Fremont | 0.27% |
| 27852 - Macclesfield | 0.13% |
| 27888 - Walstonburg | 0.13% |

Age of Survey Participants

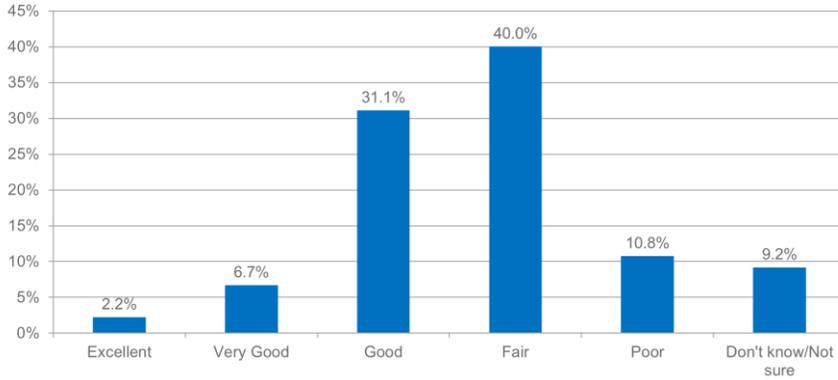


Survey Results

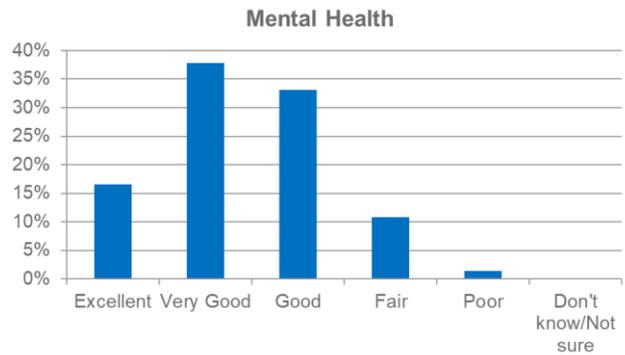
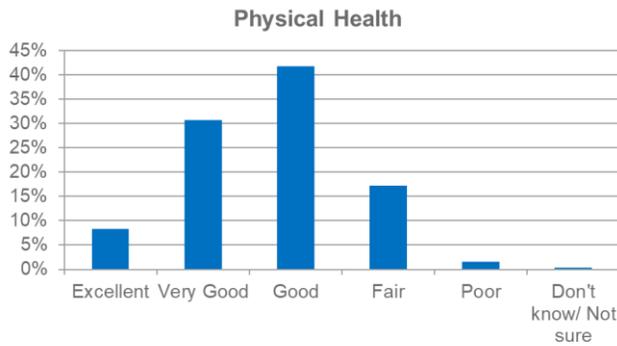
Community Survey, cont.

Results

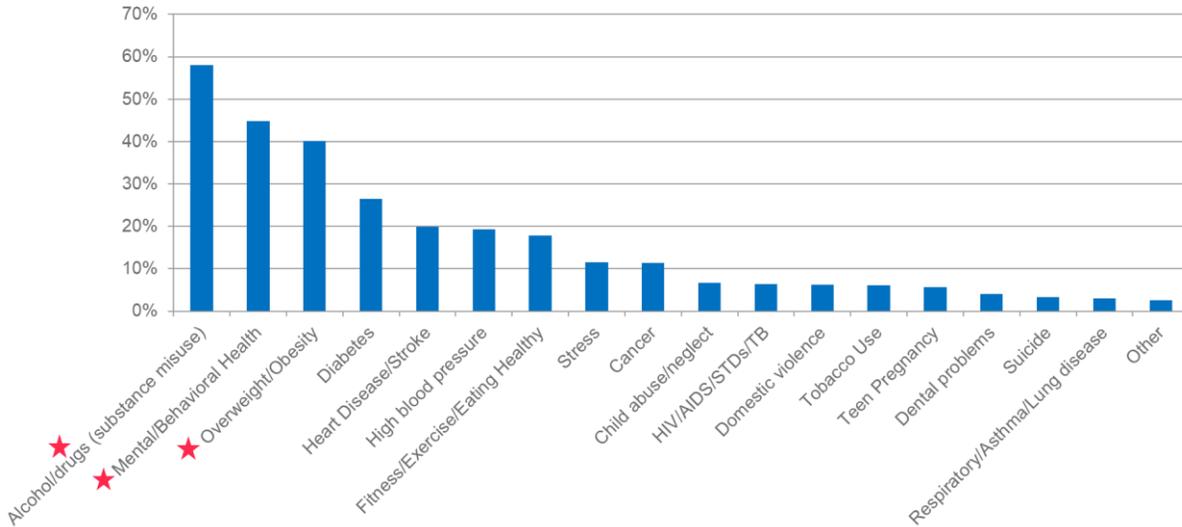
How would you rate the overall health of Wilson County?



How would you rate your own health?



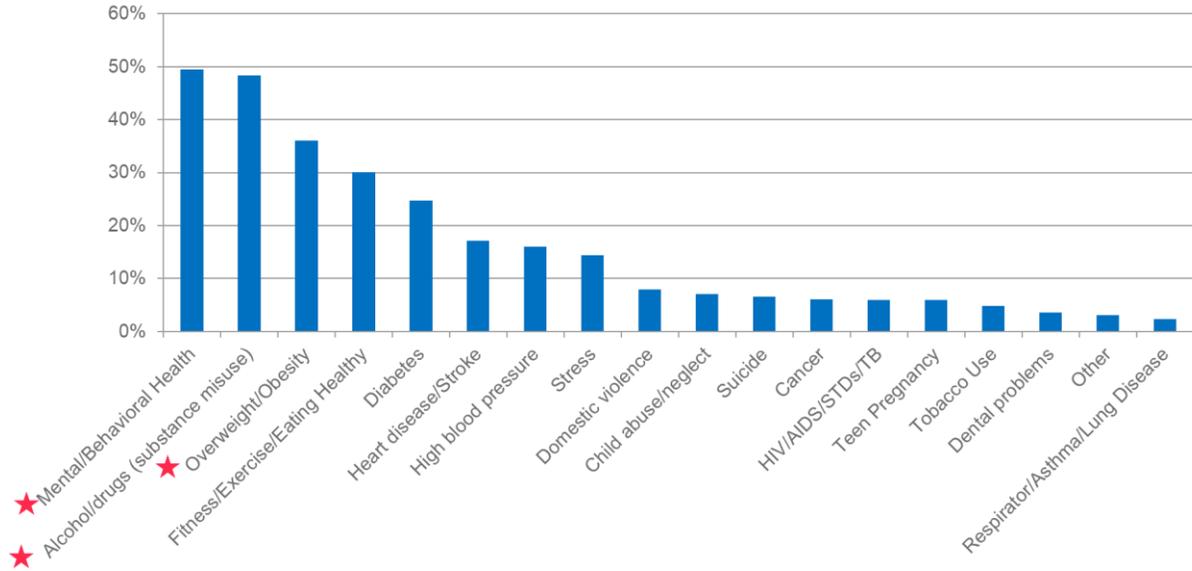
What are the three (3) most important issues related to health and disease in Wilson County?



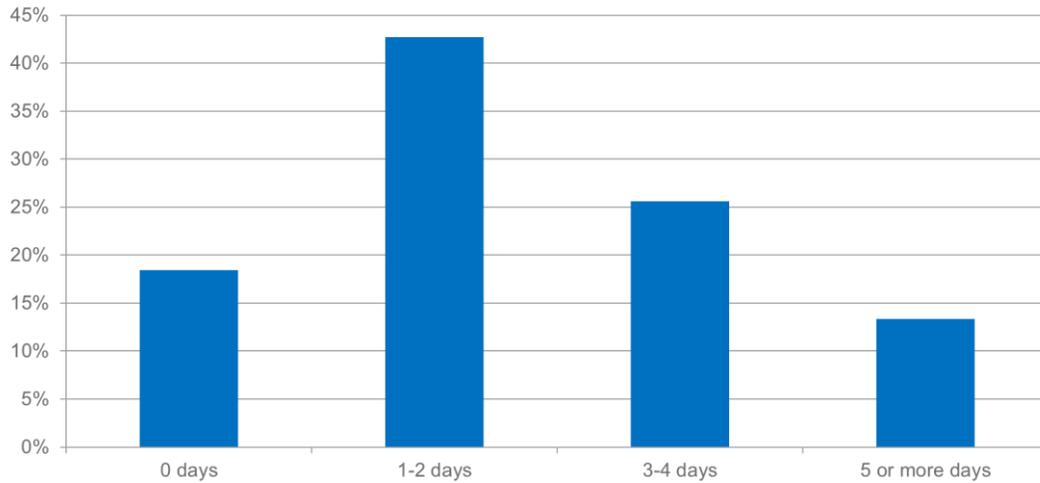
Survey Results

Community Survey, cont.

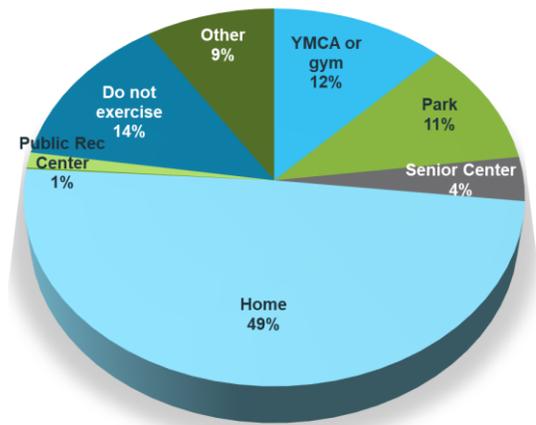
What 3 health behaviors do people in the community need the most information about?



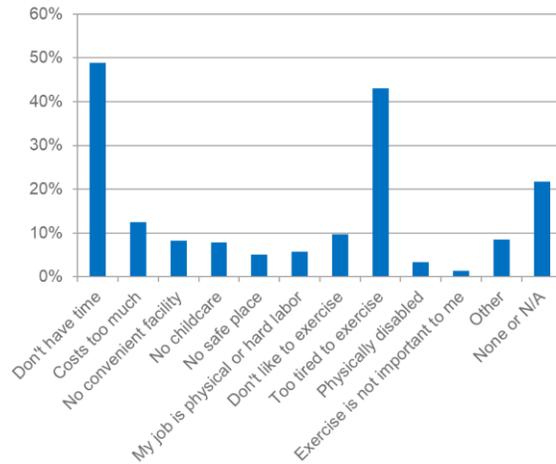
How often do you exercise each week?



Where do you exercise?



Rationale for not exercising

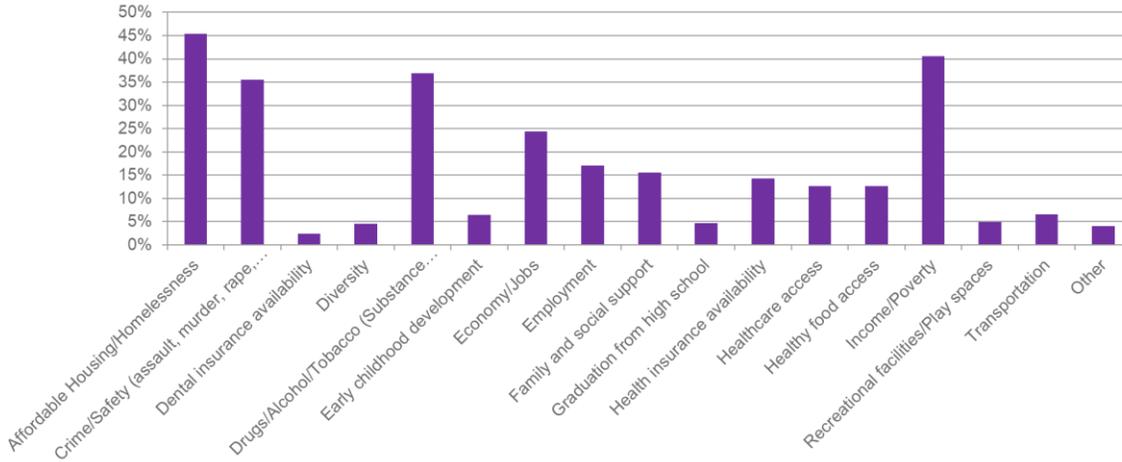


Survey Results

Community Survey, cont.

Quality of Life-What are 3 top Social Determinants impacting Wilsonians' health outcomes?

Social Determinants of health* (SDH) are the non-medical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live and age, and the wider set of forces and systems shaping the conditions of daily life.

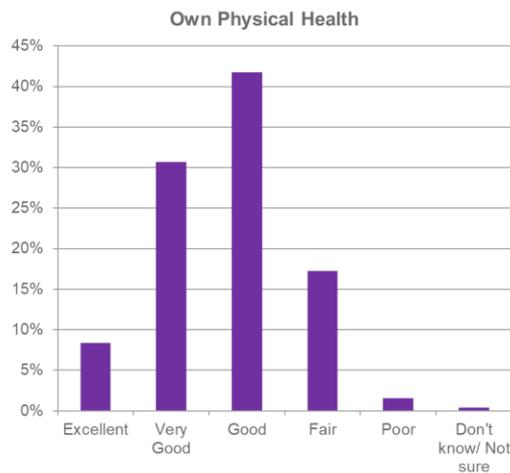
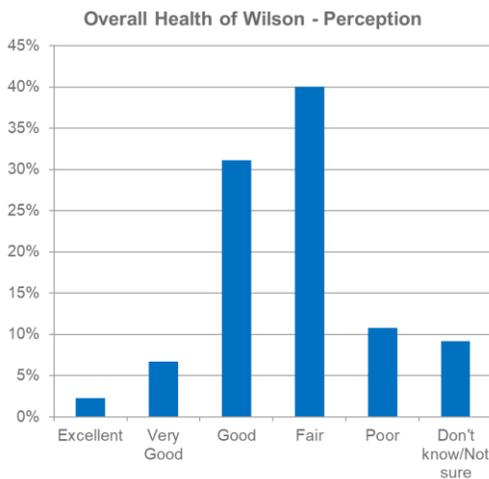


Survey results for thought. . . .

Of the 900+ responses:

- Just over 95% had health insurance
- 89% did not use any form of tobacco
- 55% ate fruits at vegetables 5-7 days a week
- Only 18% of survey takers never exercise

Survey takers – generally healthier ?



Survey Results

Community Survey, cont.

Of the surveys completed, 95% who had health insurance said access to health care was problematic because:

| REASON | % |
|---|--------|
| Deductible/co-pay was too high | 22.82% |
| Insurance didn't cover what I/we needed | 17.72% |
| The wait was too long | 16.11% |
| Couldn't get an appointment | 11.54% |
| The hours and days they are open are not convenient | 10.74% |
| Doctor would not take my/our insurance or Medicaid | 6.58% |
| Didn't know where to go | 3.36% |
| Pharmacy would not take my/our insurance or Medicaid | 3.09% |
| No transportation to get there | 2.28% |
| Hospital would not take my/our insurance | 1.34% |
| There was no one who spoke my preferred language and no interpreter available | 0.67% |

| Where do you go most often when you are sick? | | Where are your healthcare providers located? | |
|---|-------------|--|-------|
| | % Responses | | % |
| Doctor's office | 76.6% | Wilson | 67.3% |
| Health Department | 3.2% | Pitt (Greenville) | 9.4% |
| Community Health Center | 4.3% | Wake (Raleigh) | 7.7% |
| Hospital | 2.4% | Nash (Rocky Mount) | 5.5% |
| Urgent Care Center | 11.1% | Johnston (Clayton/Smithfield) | 3.4% |
| Other (please specify) | 2.3% | Wayne (Goldsboro) | 1.9% |
| | | Other | 1.9% |
| | | Durham (Duke Health Care) | 1.2% |
| | | Orange (UNC - Chapel Hill) | 0.7% |
| | | Edgecombe (Tarboro) | 0.4% |
| | | Greene (Snow Hill) | 0.4% |

Populations that are not being adequately served by our local health services:

| | |
|------------------------|-------|
| Uninsured/Underinsured | 53.4% |
| Low income/poor | 51.3% |
| Homeless | 45.0% |
| Seniors/Elderly | 39.6% |
| Minorities | 24.0% |
| Disabled | 19.7% |
| Children | 14.4% |
| None | 11.8% |
| Other | 4.7% |

Survey Results

Community Survey, cont.

| Survey Rank of Most Important Health Issues | Responses |
|---|-----------|
| Alcohol/drugs (substance misuse) | 58.1% |
| Mental/Behavioral Health | 44.8% |
| Overweight/Obesity | 40.0% |
| Diabetes | 26.5% |
| Heart Disease/Stroke | 19.8% |
| High blood pressure | 19.3% |
| Fitness/Exercise/Eating Healthy | 17.9% |
| Stress | 11.5% |
| Cancer | 11.4% |
| Child abuse/neglect | 6.7% |
| HIV/AIDS/STDs/TB | 6.4% |
| Domestic violence | 6.3% |
| Tobacco Use | 6.1% |
| Teen Pregnancy | 5.6% |
| Dental problems | 4.1% |
| Suicide | 3.3% |
| Respiratory/Asthma/Lung disease | 3.0% |
| Other | 2.6% |

| What needs to be addressed for better health in the community | Responses |
|---|-----------|
| Mental/Behavioral Health | 49.5% |
| Alcohol/drugs (substance misuse) | 48.3% |
| Overweight/Obesity | 36.0% |
| Fitness/Exercise/Eating Healthy | 30.0% |
| Diabetes | 24.7% |
| Heart disease/Stroke | 17.1% |
| High blood pressure | 16.1% |
| Stress | 14.4% |
| Domestic violence | 8.0% |
| Child abuse/neglect | 7.1% |
| Suicide | 6.5% |
| Cancer | 6.0% |
| HIV/AIDS/STDs/TB | 5.9% |
| Teen Pregnancy | 5.9% |
| Tobacco Use | 4.8% |
| Dental problems | 3.5% |
| Other | 3.1% |
| Respiratory/Asthma/Lung Disease | 2.4% |

Focus Group Results

Focus Groups

Community stakeholders representing the broad interests of the community as well as those representing low income, medically underserved, minority and college populations participated in individual interviews and focus groups on June 20, 2022, and August 12, 2022, for their input into the community's health. Community participation in individual interviews represented a broad range of interests and backgrounds. Below is a summary of the focus groups.

1. How do you define health?

- State of wellbeing, absence of disease
- Perception of wholeness
- Spiritual, emotional, social continuum
- Overall state of feeling good in every aspect – psychological, social, emotionally healthy
- Mentally and financially well

2. For the purposes of this Community Health Needs Assessment, the community is Wilson County. Generally, how would you describe the community's health?

- Between fair and good, some have excellent health
- Mental health is not good
- Not healthy
- Health is affected by unsafe environments

3. What are the most significant health issues for the community today?

- Mental health – anxiety and panic, increased issues in youth, challenges accessing care
- Substance misuse – PCP, heroin
- Youth – lack of services available, substance use in schools
- HBP, childhood obesity and diabetes
- Access to food
- Need more health education
- Overall access to care
- Crime and safety
- Affordable housing
- Lack of activities for young adults
- Hygiene, environmental cleanliness

4. What are the most significant health issues facing various populations including medically underserved and low-income populations?

- Lack of trust in healthcare system
- Transportation
- Safe, affordable housing
- Food insecurity, poverty
- Lack of childcare

Interview and Focus Group Results, cont.

- Substance use, lack of resources for recovery
- Poor air quality
- Human trafficking
- Poor clinical staff – need to focus on health equity and being more compassionate
- Access to care
- Limited LGBTQIA resources
- Suicide in the community

5. What are the most significant health issues facing the minority populations?

- Socioeconomics – unemployment, affordable housing, transportation, food insecurity
- Lack of childcare
- Obesity, diabetes
- Pandemic has shifted priorities – jobs vs. time spent with family
- Minority communities aren't always welcomed, Hispanic and Latino communities aren't granted the same care
- College students using tobacco products/vaping

6. What are the most important health issues facing youth and children?

- Vaccination health
- Lack of activity for high school students
- Sex education, health, anatomy and hygiene education
- Reliance on electronics
- Teen pregnancy
- Children growing up sickly
- Imbalance of education and division between girls and boys

7. What are the most important health issues facing seniors?

- Safe, affordable housing
- Affordable caregivers
- Spending down to qualify for Medicaid
- Dementia, Alzheimer's
- Isolation contributing to mental health
- Food insecurity
- Responsibility of caring for grandchildren

8. What are the most important health issues facing college students?

- Sex health education
- Unhealthy cafeteria food, need access to healthier options
- Need basic life skill classes
- Need education about community resources
- Safety and health hazards - CO2 detectors, pest control, etc.
- Handicap accessibility throughout campus

Interview and Focus Group Results, cont.

9. The community performed a CHNA in 2019 and identified priorities for health improvement

- a. Obesity
- b. Fitness/nutrition
- c. Mental health – including alcohol and substance misuse

What has changed most related to health status in the last three years?

- Better
 - Healthcare access for children in schools (WASH)
 - More places to exercise (Lake Wilson, Foundation YMCA)
 - Hope Alliance placement
- Worse
 - Mental health and substance misuse
 - Vaping
- Still Issues
 - Obesity
 - Fitness/nutrition
- Additional
 - Access to care
 - Early childhood education
 - Crime and safety
 - Sexual health and education
 - Limited ADA accommodations

10. What, if any, health issues or inequities did the COVID-19 pandemic expose in the community?

- Exploited pre-existing issues – substance misuse, isolation, mental health
- Exposed vulnerability of our systems
- Exposed trust issues – healthcare politicized, misinformation on social media
- Lack of childcare
- Mental health days are necessary
- Lack of COVID testing on campus
- Lack of communication for Health services resources on campus
- Professors not accommodating

11. What behaviors have the biggest impact on community health?

- Neglect seeking care
- Drugs, smoking, sugar, and alcohol
- Circle of influence
- Emotional state – choice to be happy or sad

Interview and Focus Group Results, cont.

12. What environmental factors have the biggest impact on community health?

- Unsafe neighborhoods, lack of sidewalks, hot temperatures impede outdoor activity
- Income levels, financial concerns
- New YMCA downtown gives more access, safe place to exercise
- Extended greenway
- Lack of progress, lack of expansion

13. What do you think the barriers will be to improve health in the communities?

- Personal and financial resources
- Lack of government funding for schools
- Childhood education – access, shortage of teachers
- Shortage of PCPs
- Health culture in Wilson, need prioritized community plan
- Lack of value placed in the greenway space
- Lack of progression in the community

14. What community assets support health and wellbeing?

- Extended greenway
- Healthcare Foundation of Wilson
- Wilson Forward
- Community partnerships – collaboration is strong
- Farmers' Market
- Public Health Centers

15. If you had a magic wand, what improvement activity should be a priority for Wilson County to improve health?

- Healthcare – increase providers and training, depoliticize expanding Medicaid
- More mental health clinicians and resources
- Increase diversity in the community
- Communicating that everyone is loved by God, have a purpose

Asset Inventory Table of Contents

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| Update & Change Form | 63 |

The section contains a list of community assets and resources that can help improve the health of the community and assist with implementation of the plan accompanies this document. This asset inventory is not exhaustive and may have inadvertently omitted community resources. The focus group also identified community resources to improve health, which are listed on page 53 of the Community Health Needs Assessment.

Mental Health/Behavioral Health

Mental/Behavioral Health Facilities

Monarch
2693 Forest Hills Rd SW
Wilson, NC 27893
866-272-7826

MindPath Health
2261 Nash Street NW
Wilson, NC 27896-1735
252-237-8403

Universal MH/DD/SAS
602 W. Nash Street
Wilson, NC 27896
252-674-7131

Pride in North Carolina
2416 Bedgood Dr.
Wilson, NC 27893
Phone: (252) 265-9200

Journeys in Mental Health & Wellness
2305 Wellington Dr SW Suite E
Wilson, NC 27893
Phone: (252) 306-7474

Wilson Private Practice
2401 Wooten Blvd. Suite K
Wilson, NC 27893
252-291 – 0735

Freedom Psychiatry
2231 Nash St, Ste A
Wilson NC 27896
252-281-2515

The Carter Clinic
105 Douglas Street
Wilson, NC 27893
252-281-4724

Primary Health Choice Inc.
3358 B Airport Blvd. NW
Wilson, NC 27896-8813
252-234-7200

Counseling Services

Carolina Wellness and Counseling
3204 Nash Street North, Suite B
Wilson, NC 27896-3002
252-319-5454

Anchor Family Therapy
3201-A Nash St. North
Wilson, NC 27896
252-289-1798

Heal & Restore PLLC
2270 Nash Street N
Wilson, NC 27896
252-696-4091

Healthy Eating/Active Living

Food Pantries

New Christian Food Pantry
111 Douglas St S
Wilson, NC 27893
252-265-6165

Love "N" Action Outreach Inc.
121 Pettigrew St S Wilson
Wilson, NC 27893
252-406-2872

Spreading Seeds
1760 Parkwood Blvd West
Wilson, NC 27893
252-520-0081

Total Outreach Ministries
502 Jordan Street SW
Wilson, NC 27893
252-296-9007

Hope Station
309 Goldsboro Street East
Wilson, NC 27893
252-291-7278

The Word Became Flesh Ministries
201 East Tarboro Street
Wilson, NC - 27894
252-245-2126

Glad Tidings Gospel Church
4422 301 South
Wilson, NC - 27893
252-243-6970

Tabernacle of God Community Church/ Hearts
2 Hands Food Pantry
6326 Speight School Road
Wilson, NC - 27893
252-292-1075

Fitness Centers

Foundation YMCA
233 Nash Street N
Wilson, NC 27893
252-291-9622

Reid Street Community Center
901 Reid Street East
Wilson, NC 27893
252-399-7530

Regency Athletic Club
2402 Wooten Boulevard
Wilson, NC 27893
252-291-7675

Victory Fitness
1901 Westwood Ave W
Wilson, NC 27893
252-234-9113

Cross Fit
2806 & 2804 Forest Hills Rd. SW
Wilson, NC 27893
252-289-1222

Janie Jennings Pilates
3201A Nash St SW
Wilson, NC 27896
252-373-4722

Senior Activities

Wilson County Senior
1808 Goldsboro St S
Wilson, NC 27893
252-206-4059

Gee Corbett Village Adult Life Success Center
1817 Butterfield Ln SE
Wilson, NC 27893
252-243-4403

Substance Misuse

Substance Misuse Centers

Stepping Stones Community Resources, Inc.
3904-A Airport Dr
Wilson NC 27896
919-269-9300

Wilson Professional Center
3709 Nash Street
Wilson, NC 27896
252-206-5799

One to One with Youth, Inc.
3011 Hwy 42 W. Suite G
Wilson, NC 27893
252-991-3985

Carolina Outreach LLC - Wilson
608 NE Nash Street
Wilson, NC 27893
252-291-2200

Access to healthcare or insurance

Health Departments

Wilson County Health Department
1801 Glendale Drive
Wilson, NC 27893
252-237-3141

Hospitals

Wilson Medical Center
1705 Tarboro Street
Wilson, NC 27893
252-399-8040

Medical Clinics

Wilson Community Center
303 Green Street East
Wilson, NC 27893
252-243-9800

Harvest Family Health Center
8250 NC South 58
Elm City, NC 27822
252-443-7744

Eastern Carolina Pediatrics
1702 Medical Park Dr
Wilson, NC 27893
252-243-7944

Freedom Family Medicine
3008 Nash Street North
Wilson, NC 27896
252-991-6800

Wilson Medical Group
3302 Nash St, N
Wilson, NC 27896
252-237-5237

Access to healthcare or insurance

Medical Clinics

Wilson Medical Group – Downtown
402 Nash St, E
Wilson, NC 27896
252-237-5237

Specialty Clinics

Regional Medical Oncology Center
2624 Ortho Dr
Wilson, NC 27893
252-991-5261

EmergeOrtho
1803 Forest Hills Road W
Wilson, NC 27893
252-243-0915

Signature Smiles Orthodontics
2250 Nash ST NW
Wilson, NC 27896
252-291-5977

Goeckner Orthodontics
130 Point Drive NW
Wilson, NC, 27896, US
252-237-9999

Wilson Dermatology Clinic
2874 Ward Blvd.
Wilson, NC 27893
252-291-5600

Triangle Implant Center
1706 Medical Park Dr. W
Wilson, NC 27893
252-243-3223

Long-Term Care and Assisted Living

Wilson House
1800 Martin Luther King Jr Pkwy SE
Wilson, NC 27893
252-237-4243

Parkwood Village and The Landing
1730 Parkwood Boulevard
Wilson, NC, 27893
252-237-9050

Accordius Health at Wilson
1804 Forest Hills Rd W
Wilson, NC 27893
252-237-8161

Brian Center Health & Rehabilitation Wilson
2501 Downing St SW
Wilson, NC 27893
252-237-6300

Wilson Rehabilitation & Nursing Center
1705 Tarboro Street
Wilson, NC 27893
252-399-8998

Spring Arbor of Wilson
2045 Ward Blvd.
Wilson, NC 27893-2873
833-434-1160

Home Healthcare and Hospice

Wilson Pines
403 Crestview Avenue
Wilson, NC 27893-4505
252-237-0724

Phillips Home Healthcare – Wilson
3621 Airport Blvd NW
Wilson, NC 27896
252-246-9700

Access to healthcare or insurance

Home Healthcare and Hospice Care

Home Life Care
2835 Daisy Lane
Wilson NC 27896-6942
252-246-1090

Home Health Care of Wilson
1901 Tarboro Street SW, Suite 304
Wilson, NC 27893
252-237-4335

Finch Home Care Agency
1502 W. Nash Street, Suite H
Wilson, NC 27893
252-399-1191

ComForCare Home Care Wilson
117 Goldsboro Street South
Wilson, NC 27893
252-243-4020

3HC
2400 B Montgomery Drive
Wilson, NC 27893
252-291-4400

Interim Homecare
1705 Medical Park Dr.
Wilson, NC 27893
252-243-7665

Myles Home Health Agency
3102 Nash St N
Wilson, NC 27896
252-206-1112

Community Home Care & Hospice
2841 Daisy Lane N
Suite E
Wilson, NC 27896

Dentists

Isaacs Dentistry
603 Nash St West Suite C
Wilson NC, 27893
252-291-6313

Luper Family Dentistry
1310 Nash Street North
Wilson, North Carolina 27893
252-237-3117

B. Scott Via, DMD
2563 Ward Blvd
Wilson, NC 27893
252-237-4191

Wilson Pediatric Dentistry
2401 Wooten Blvd SW Suite F
Wilson, NC 27893
252-291-4300

Aspen Dental
2920 Raleigh Rd Pkwy W Ste A
Wilson, NC 27896
252-218-3012

Dixon Boles and Associates
109 Brentwood Center Ln
Wilson, NC 27896
252-888-6209

Immediate Dental Care
1468 Tarboro St W Ste F
Wilson, NC 27893
252-243-8448

Lee Dentistry
118 Brentwood Center LN
Wilson, NC 27896
252-243-2554

Access to healthcare or insurance

Dentists

Ideal Dental Wilson
3401 Raleigh Road Pkwy W Ste 10C
Wilson, NC 27896
252-653-4099

The Dental Care Center
3001-B Raleigh Road Parkway West
Wilson, NC 27896
252-293-4469

Holmes and Williford
2801 Wooten Blvd SW Ste. B
Wilson, NC 27893-8629
252-237-8812

Watson Family Dentistry
603 West Nash St.
Wilson, NC 27893
252-237-5124

Sources

Mental Health Services

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Substance Misuse Center

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Access to Healthcare or Insurance

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To update or add information, complete the form below

Name of Organization:

Contact Name:

Phone #:

Fax #:

Email:

Web page:

Mailing Address:

List services:

Please describe your organization's purpose, services, etc.

Submit updated information to:
Wilson Medical Center Marketing Department
Wilson County Health Department
Healthcare Foundation of Wilson

Thank you to our Advisory Committee which included members from the following organizations.

AmeriCorps VISTA
Area L AHEC
Barton College
Carolina Family Health Centers, Inc.
Carolina Outreach
Choices Pregnancy Center
City of Wilson
Community Impact North Carolina
Diversified Opportunities Inc.
East Carolina Health
Eastpointe
Foundation YMCA
Healthcare Foundation of Wilson
Hope Station
Integrity Unlimited CDC
Land of Learning
Legal Aid of North Carolina
Mental Health America
N.C. Cooperative Extension, Wilson County
N.E.W.
NC Office Of Rural Health
Next Step Life Coaching
OIC of Wilson
Rhema Word Christian Center
Salvation Army/Project CATCH
Seeds of Hope

The Poe Center for Health Education
The SPOT
United Way of Wilson
Upper Coastal Plain Council of Government
Veterans Residential Service of Wilson
Vollis Simpson Whirligig Park and Museum
Wesley Shelter
Wilson Area Habitat for Humanity
Wilson Area NAACP
Wilson Chamber of Commerce
Wilson Community College
Wilson Community Improvement Association (WCIA)
Wilson County 4H Youth Development
Wilson County Department of Social Services
Wilson County Emergency Medical Services
Wilson County Government
Wilson County Health Department
Wilson County Partnership for Children
Wilson County Public Library
Wilson County Schools
Wilson County Substance Prevention Coalition
Wilson Crisis Center
Wilson Education Partnership
Wilson Forward
Wilson Housing Authority
Wilson Medical Center
Wilson Police Department

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Community Health Needs Assessment for Wilson County

Completed in collaboration with:

