

MADISON COUNTY COMMUNITY HEALTH ASSESSMENT OVERVIEW

1. The Team and the Assessment Process

Members of the Madison Community Health Consortium were invited to participate with the Madison County Health Department staff to compose the 22-member assessment team. After an overview of the process was presented, the group was then divided into two groups: Listening Session group and Quantitative Data Review group.

Working with the director of the Center for Assessment and Research Alliances (CARA) at Mars Hill College, a training manual was developed for the **Listening Session** group. Two training sessions, including a power point presentation, were held to create guidelines for interviewing and to insure accuracy of conducting a community listening session. Health opinion surveys of professionals in the community (doctors, nurses, teachers, dentists and mental health providers) were conducted to gain information about health concerns as they view them.

Listening session guides also journeyed into the communities to talk with the residents about their concerns. A total of ten public sessions were held at public schools, fire departments, community centers or churches. One of the groups was composed of Hispanic women meeting at the local Catholic Church. All participants were asked the following questions: What they see as the personal health problems in the community? What do they think can be done locally to address the problem? Is there any group not receiving adequate care? Who do people call when they need help? Please identify barriers/causes of these health problems. After this information was obtained, the results were compiled by CARA at Mars Hill College. (The results will be discussed later in this report).

The **Quantitative Data Review** committee compiled information about the county population, community, pregnancies/births, morbidity, mortality, education and resources. The committee members divided the subjects and working with the county health data book worksheets, consulted the State Center for Health Statistics (SCHS) for the requested information. Inaccurate data was discovered, and the SCHS was notified. This would result in a month's delay in the research process before we received accurate updated information. (The results will be discussed later in this report).

After the Listening Sessions and Quantitative Date Review committees completed their individual task of compiling data, the project chair from the Madison County Health Department and the Madison Community Health Consortium coordinator along with the technical coordinator met with the director of CARA again to discuss the significance of the findings. They later met to create a power point summary of the findings to present to the CHA committee and community.

This informative session was presented at the Madison campus of the Asheville-Buncombe Technical College. The public was notified of the meeting by an article in the local newspaper.

After the presentation by the committee chair, the audience members were invited to comment about the findings, and to assist with the prioritization of health concerns. This stimulated discussion and assisted in creating the list of health concerns to be presented to the entire Community Health Assessment committee for final consideration. The committee decided based on their finding to focus the community action plans on the following identified needs: 1. Mental Health and Substance Abuse, 2. Obesity, 3. Dental issues, and 4. Respiratory Illnesses. Team members volunteered to write action plans for areas of interest.

II. A Picture of Your Community

Geographic / Historical Information

Madison County offers 228,000 scenic acres (450 square miles) of beautiful mountains and fertile valleys. With whitewater rafting, skiing, the Appalachian Trail, scenic byways and a hot natural mineral spring, Madison County is rich in outdoor recreational opportunities. Nearly 78% of the county is forest and 25% public land managed by the U.S. Forest Service. Madison, ranking 53 in size among North Carolina's 100 counties, is located 15 miles North of Asheville on the North Carolina/Tennessee border of the Smoky Mountains of Appalachia. The terrain is steep to gently rolling, with elevations ranging from 1,280 feet to 5,516 feet, the lowest running along the French Broad River into Tennessee. The diverse topography of Madison County, with several peaks over 5,000 feet in elevation and the low French Broad River Valley, provides for spectacular scenic vistas. More than 15,000 acres of the County are located in the Pisgah National Forest. We currently have approximately 620 miles of paved and approximately 75 miles of unpaved roads through the county.

Madison County is home to some of the finest fiddlers and "pickers," and is known for its traditional mountain music. It is also a center for hand made arts and crafts and is rich in historical sites. Many of the sites are located along the former Drovers Trail, the primary route from Tennessee farms to South Carolina markets. The Hot Springs Resort was a grand hotel that accommodated travelers who bathed in the healing waters and played golf on North Carolina's first golf course. It was also an internment camp for Germans in World War I. Although the hotel and golf course no longer exist, many county residents and visitors to the area continue to enjoy baths in the natural warm springs.

Mars Hill College, founded in 1856, a private, liberal arts, co-educational college, is the oldest institution of higher education in Western North Carolina. Its 180-acre main campus is located in Mars Hill.

The college has reorganized itself into three new schools: Education & Leadership, Business & Community Service, and Arts & Science.

The Madison campus of Asheville- Buncombe Technical Community College offers training in tailored trade and technical classes, and industrial training. They also provide meeting facilities for many county organizations. The public schools consist of 6 elementary, 1 middle school and 1 high school. There are approximately 2,500 students in the public school system with one school nurse.

The following three small towns are located in Madison County: Mars Hill, population 1,635; Marshall, population 871; and Hot Springs, population 554. A mayor and a three or five member board of alder persons govern each town.

Demographic Information

The estimated population for Madison County as of July 1, 2001 is 19,780. This is a 0.7% increase since the 2000 census. 48.3% of the total population is white males with 12.7% less than 20 years old and 6.8% age 65+. The total female population in Madison County is 49.9% with 11.5% less than 20 years old, 19.5% 15-44 yrs. of age, and 8.9% age 65+. The minority population makes up approximately 1.7% of the county's population. The Hispanic population has increased; however, their race has historically been recorded as "white," thus giving an inaccurate reflection of this growing population.

(Please see attached graph information).

Social, Economic, and Political Information

In 2000, the per capita income level was \$20,279, and the percent of people with income below the poverty level in Madison County was 15.4%. Records reflect that 13.6% were enrolled in the state Medicaid program.

Madison County has long been a county of many family farms where burley tobacco has been the major crop. The number of tobacco farms has dropped significantly from 3,255 in 1993 to 2,340 in 2003. In 1993 there were 2,500 acres of tobacco planted, but in 2002, only 1,785 acres were planted.

Local farmers are exploring new alternatives to farming in Madison County. There are approximately 200 different types of entrepreneur farms located within the county boundaries. This includes: Christmas trees, organic vegetables, berry farms, nursery ornamentals, horses, goat, sheep, lama and chicken farms. In an effort to market the new farms in the county the N.C Cooperative Extension Service has developed the Madison County Agri-Business Center. A web site that includes information about the products, location of the farms and contact information has been developed to promote exposure of these farming entrepreneurs.

Since the opening of a 9-mile stretch of the I-26 corridor, a Scenic Highway, through Madison County in August 2003, there is much speculation about the potential economic growth within the county. Whether or not this means an increase in small businesses and industry to tap the local labor source remains to be seen.

The service companies provide most of the jobs in Madison County, and the plants and factories provide a quarter of the jobs available. The closing of Honeywell Industries in Mars Hill and LeSportsac Industries in Hot Springs during 2003 is expected to have a major impact on the local economy. There are a few mom and pop groceries, gas stations, clothing and furniture shops. Government jobs make up about 10% of the county work force. Many people travel out of the county for employment.

The Madison County Board of Commissioners is the elected governing board authorized by the state of North Carolina to exercise and discharge legislative responsibilities within the county. This is a five member board. There is also an appointed county manager. Currently there are two county commissioners serving on the local board of health.

There are many small and large churches in Madison County. Every denomination is represented. This includes Baptist, Methodist, Presbyterian, Seven Day Adventist, Church of God, Episcopal, Catholic and one Non-Denominational church.

Health Information

There is not a hospital located in Madison County. The Madison County Health Department offers health services that include family planning, maternity care, WIC, immunizations, dental fluoride care for young children, Health Check and Health Choice, health education that includes childbirth education, CPR and other programs to residents as needed.

There is one private non-profit medical practice, the Hot Springs Health Program, with four offices located throughout the county. They provide primary health care by a staff of family medicine, internal medicine, and pediatric physicians. They also manage a home health, hospice and in-home rehabilitation programs for Madison residents.

The Madison County Emergency Medical Services offers ambulance transportation from all points in the county. Emergency medical helicopter service is available from Mission St. Joseph's Health System located in Asheville, NC.

There are three dental offices in the county. Optical and chiropractic services are also available. There is a new Chinese medicine office located on the Mars Hill College campus. The county is home to two licensed nursing facilities, numerous rest homes and group homes.

The results of the professional surveys, listening sessions and state data revealed the following health concerns and suggestions for means of improvement in the health status of Madison County residents.

- **Education & Information-** Increased health education regarding disease prevention measures: personal hygiene, impact of sedentary activities, impact of tobacco and second-hand smoke.
- **Physical Fitness & Nutrition-** Importance of regular fitness/exercise, improved nutrition (school and home), increased outdoor community activities, increase in community centers, and improved sleep habits for children.
- **Dental Care-** Affordable dental clinic for adults and children, mobile dental facility (Tooth bus), increased dental care for Medicaid patients, dental education for parents.
- **Mental Health-** Increased assistance for depression/anxiety, quicker response to concerns about abuse issues, and to involve teachers for assistance with these concerns.
- **Services-** Increase access to dental and medical treatment. Improve access to mental healthcare. Groups not receiving adequate health care included the elderly, children and the poor. This included people in remote areas, home-schools and the un-insured. Offer free medical care to patients, increased transportation services to remote areas, decreased waiting times in health care facilities, improve coordination of services between health care providers, increase number of medical specialist in the Madison County community. There is a need for a Madison County Directory of Services (211 Project or other published resource).
- **Sick Children at School-** Parents should keep sick children at home. Health care providers should increase availability of appointments for “sick children.” Change in attendance policy at school to allow for illness without penalty. Increase number of school nurses. (Currently 1 nurse for 2,500 students. State and national recommendation is 1:750 students). Put the public health nurses back in the schools.
- **Other Concerns Mentioned Include -** Increased financial support, providing lice treatment in daycare/schools (currently being addressed), environmental issues (clean air), medical office support issues, promote public health and health care providers in schools, decrease obesity in children, promote healthier eating establishments. Although the state data reflected a decrease in the number of mothers who smoke, Madison County remains above the state average (see graph).
- **Hospitalization Rates-** In-Patient hospitalization rates revealed an increase (higher than the state average) in the number of patients hospitalized for “mental disorders, alcohol and drug related diagnoses.” Also, county residents with the diagnosis of chronic obstructive pulmonary disease (COPD), cerebrovascular disease (stroke), and heart disease are averaging a longer hospital stay.

- **Education-** Madison County ranks below the state range in the percent of students taking the SAT (46.7%); however, the total rate (1016) of the SAT for those taking the test was above the state rate (998) in 2001. The dropout rate for grades 9-12 was 6.41% with the state rate at 5.71.

Community Health Assessment Action Plans

The Community Health Assessment Committee has written action plans to address the following health areas in the community: **Respiratory illness** which includes asthma, COPD, pneumonia and flu; **mental health and substance abuse; obesity; and dental** issues. The plans include an increase in public health education. Please see attached action plans.