2023 Forsyth County, NC State of the County Health (SOTCH) Report





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Introduction

The 2023 Forsyth County State of the County Health (SOTCH) Report provides an overview of changes in Forsyth County's population health since the 2021 Forsyth County Community Health Assessment (CHA) Report. The 2023 SOTCH highlights emerging Forsyth County population health issues and new health initiatives. It provides an update on each Community Health Improvement Plan (CHIP) that was implemented based on the 2021 CHA Report.

Changes in Population Health

Life Expectancy. Forsyth County's 3-year rolling average life expectancy at birth declined from 78.3 years (2014-2016) to 77.6 years (2018-2020) (Table 1). Females (80.3 years), males (74.6 years),

Table 1
Three-Year Rolling Average Life Expectancy at Birth in Forsyth County and North Carolina, 2014-2016 to 2018-2020

Jurisdiction	2018-2020	2017-2019	2016-2018	2015-2017	2014-2016
Forsyth	77.6	77.9	77.9	77.9	78.3
North Carolina	77.7	76.7	77.0	77.0	77.4

Source: NC State Center for Health Statistics.

https://schs.dph.ncdhhs.gov/data/databook/, March 1, 2024

and Black, on-Hispanic/Latino populations (74.9 years) who were born in Forsyth County during 2018-2020 had a lower life expectancy than each group at the state level for the same period (Table 2). However, Table 2 also shows that the State's average life expectancy for White, Non-Hispanic/Latino population (78.6 years) was lower than Forsyth County's (78.9 years) (Table 2).

Table 2

Three-Year Rolling Average Life Expectancy at Birth in Forsyth County and North Carolina based on Race/Ethnicity and Gender, 2018-2020

Race/Ethnicity or Gender	Forsyth	North Carolina
Overall	77.6	77.7
Female	80.3	80.4
Male	74.6	74.9
Black, non-Hispanic/Latino	74.9	75.0
White, non-Hispanic/Latino	78.9	78.6

Source: NC State Center for Health Statistics.

https://schs.dph.ncdhhs.gov/data/databook/, March 1, 2024

Infant Mortality. Table 3 shows that Forsyth County's infant mortality rate exceeded the state's infant mortality rate each year from 2017 to 2021. From 2017 to 2021, Forsyth County's infant mortality rate has ranged from a high of 9.8 (2017, 2019) to a low of 7.2 (2020) (Table 3). In 2021, Forsyth County's infant mortality rate was 8.7 in comparison to the state's which was

Table 3

Infant Mortality Rate, Forsyth County and North Carolina, 2017 to 2021

Jurisdiction	2021	2020	2019	2018	2017
Forsyth	8.7	7.2	9.8	8.3	9.8
North Carolina	6.8	6.9	6.8	6.8	7.1

Source: NC DHHS, NC State Center for Health Statistics. March 1, 2024

6.8 (Table 3). Forsyth County 5-year rolling average infant mortality rate based on race/ethnicity was highest among Black, Non-Hispanic/Latino populations (Table 4). Forsyth County's 5-year rolling average infant mortality rate for Black, Non-Hispanic/Latino (15.8), Hispanic/Latino (5.9), and White, Non-Hispanic/Latino populations (5.4) were each higher than the state's infant mortality rate for the corresponding population (Table 4).

Table 4
5-Year Rolling Average Infant Mortality Rate based on Race/Ethnicity for Forsyth
County and North Carolina, 2017-2021

Jurisdiction	Overall	Black, Non-H/L	Hispanic/Latino	White, Non-H/L
Forsyth County	8.7	15.8	5.9	5.4
North Carolina	6.9	12.6	5.4	4.8

Source: NC DHHS, Department of Public Health, State Center for Health Statistics, March 1, 2024

Forsyth County Department of Public Health

Epidemiology & Surveillance Unit

Infant Mortality Disparity Ratio. Forsyth County's 5-year rolling average infant mortality disparity ratio increased from 2.1 (2014-2018) to 2.9 (2017-2021) (Table 5). Table 5 also shows that Forsyth County's 5-year rolling average infant mortality disparity ratio exceeded the state' average for the two (2) most recent periods.

Table 5
5-Year Rolling Average Infant Mortality Disparity Ratio, Forsyth County and North Carolina, 2013-2017 to 2017-2021

Jurisdiction	2017-2021	2016-2020	2015-2019	2014-2018	2013-2017
Forsyth	2.9	2.8	2.4	2.1	2.2
North Carolina	2.6	2.6	2.5	2.4	2.4

Source: NC DHHS, Department of Public Health, State Center for Health Statistics, March 1, 2024

Other Mortality. Forsyth County's overall rolling average death rate exceeded the State's for the three (3) most recent 5-year rolling average years 2015-2019, 2016-2018, and 2017-2021 (Table 6). Forsyth County's rolling average death rate due to chronic diseases and other health conditions increased from 801.6 per 100,000 population during 2016-2018 (Table 6) to 841.7 per 100,000 population during 2017-2021 (Table 6). Forsyth County's 2017-2021 5-year rolling average death rate for cancer (156.1), Other intentional injuries (57.1), Diabetes Mellitus (26.1), and Septicemia 13.0() exceeded each of the State's respective rates for the same period (Table 6).

Morbidity. Forsyth County's number of new cancer cases is projected to increase from 2,295 in 2021 to 2,324 in 2022 (Table 7). Female breast cancer cases are projected to increase from 419 in 2021 to 429 in 2022. Forsyth County's colon/rectum and lung/bronchus cancer cases are projected to decrease from 171 in 2021 to 169 in 2022, and from 327 cases to 325 cases, respectively (Table 7).

Table 6.

2017-2021 Five (5) Year Rolling Average Forsyth County Race/Ethnicity—Specific and Sex-Specific Age-Adjusted Top Ten (10) Death Rates with corresponding data for 2016-2020 and 2015-2019

Disassas/5 Vaer period	Fe	orsyth County		North Carolina		
Diseases/5-Year period	2017-2021	2016-2020	2015-2019	2017-2021	2016-2020	2015-2019
All Causes of Death	841.7	801.6	783.4	838.5	793.7	780.0
Cancer	156.1	156.3	157.9	154.5	154.6	158.0
Heart Disease	152.3	147.2	147	161.1	156.1	157.3
Other Unintentional Injuries *	57.1	50.5	40.5	48.5	43.2	39.3
Cerebrovascular Disease	43.3	43.6	44.2	44.0	42.7	42.7
Chronic Lower Respiratory Diseases	41.0	42.6	45.3	44.0	42.5	44.0
Alzheimer's	39.3	39.7	40.1	52.8	37.4	36.9
Diabetes Mellitus	26.1	23.6	22.9	26.0	24.5	25.4
Kidney Diseases	18.3	17.1	16.7	18.6	16.4	22.6
Pneumonia and Influenza	14.4	15.9	17.5	24.3	15.7	15.6
Septicemia	13.0	13.5	15.0	10.5	12.5	15.4

Source: NC DHHS, Department of Public Health, State Center for Health Statistics, March 1, 2024

Table 7
Projected Number of New Cancer Cases for Forsyth County, NC, 2018-2022

Year	Total	Colon/Rectum	Female Breast	Lung/Bronchus	Prostate
2022	2,324	169	429	325	280
2021	2,295	171	419	327	273
2020	2,254	169	407	327	263
2019	2,207	168	397	325	255
2018	2,161	167	386	319	259

Source: NC DHHS, Department of Public Health, State Center for Health Statistics, March 1, 2024

^{*}Does not include unintentinonal motor vehicle injuries

¹Age-Adjusted to the 2000 US Standard Population Census

Community Health Improvement Plan (CHIP)

https://scorecard.clearimpact.com/Scorecard/Details/77212

CHIP I: Infant Mortality/Disparity Ratio/Maternal Health

Vision Statement: All babies in Forsyth County are born healthy, thrive in caring and healthy homes, and see their first birthday

Implemented Programs that are working towards this goal:

- Forsyth County Infant Mortality Reduction Coalition (FCIMRC)
- Parenting Education Programs (Prenatal & Childbirth Classes, Safe Sleep/Cribs for Kids)
- Healthy Beginnings
- Care Management for High Risk Pregnancies (CMHRP)
- Nurse Family Partnership (NFP)
- Care Management for at Risk Children (CMARC)
- Special Supplemental Nutrition Program for Women, Infants and Children (WIC)

CHIP II: Chronic Diseases (Diabetes, Opioid & Substance use, and Violence)

Vision Statements

- All people in Forsyth County will live long and healthy lives.
- Forsyth County will make no-cost naloxone available in at least three community locations, will provide education via training and community events at least 15 times per year, and will experience a reduction in stigma.
- Forsyth WINS (Cure Violence) will decrease acts of violence within Winston Salem to improve our neighborhood by networking with those likely to commit crimes, employing community-based strategies and bringing residents together.

Implemented Programs that are working towards this goal:

- Minority Diabetes Prevention Program
- Men's Health

CHIP III: Mental Health/Behavioral Health

Vision Statement

 All people in Forsyth County live in communities that foster and support positive mental health, where sigma does not exist, and where timely access to the correct level of care is always available.

Emerging Issues

An emerging issue which we are seeking to better understand is the extent to which the success of naloxone limits contacts between first responders and vulnerable populations with poor health, and how first responders are finding ways to provide counselling and information to these populations.

New Initiatives

Behavioral Health Services (operations). Forsyth County created Behavioral Health Services (BHS), a new Health and Human Services (HHS) division, that focuses on managing the county's mental health, substance use, and intellectual/developmental disability responsibilities. This division offers programs and services, manages funding to many community organizations and providers, facilitates Opioid Settlement responsibilities, and serves as a convener between the state, community providers, the LME/MCO, and the community. Programs and/or personnel that are part of this Division include the Forsyth County Pharmacy, Stepping Up/MHC, Peer Support at the public library, and the Substance Use Health Educator.

BHS is engaged with several construction projects that will expand capacity to satisfy needed resources, services and supports. For example, the redesign of the Highland Avenue Center will provide the Forsyth community with a one stop location for individuals with behavioral health needs. Once complete the facility will include a new 16-bed adult Facility Based Crisis Center, the existing Forsyth County pharmacy, in addition to existing services including a primary care clinic, behavioral health urgent care, open access walk-in outpatient services, and the local management entity/manage care organization (LME/MCO)). Included in the upgraded facility will be a 6-bed licensed level 3 group home for youth in DSS custody awaiting transition to the necessary level of care. This group home will allow youth to receive services in a trauma informed setting as they await transitions.

Behavioral Health Services (pass through funding). While not a part of BHS, funding is provided through Maintenance of Effort (MOE) funding source managed by BHS) to support the Mobile Integrated Healthcare (MIH), a division of EMS. Since 2016, MIH has assisted individuals experiencing behavioral health crises to the appropriate level of care, including providing medical clearance allowing residents to be served at community-based alternative destination sites rather than requiring transport to emergency rooms. Beginning 3/1/2024, MIH will provide connections to care for individuals that receive emergency room-based induction of medication, assisted treatment for substance or opioid use disorders.

Additionally, in the coming weeks, MIH will be onboarding four Peer Support Specialists who will be an integral part of a post overdose response.

Maintenance of Effort (MOE) funding is also used to financially support the Behavioral Health Unit for men operated by the Detention Center's jail health provider.

Implemented in September 2023, MOE dollars were also authorized by the Board of County
 Commissioners to support expanded behavioral health services for women at the detention center.

Forsyth County will be receiving over \$38,000,000 in Opioid Settlement funds over the next 18 years. Electing Option B strategies affords access to the broadest array of strategies.

- Option B strategies require completion of a community strategic plan at least every four years. This Strategic Plan includes activities such as a needs assessment/gaps analysis, establishing shared vision, identification of root causes, analyzing opportunities for funding, and prioritizing strategies. The shared vision of the Opioid Settlement Stakeholder committee is as follow -
 - The Forsyth County Opioid Settlement Committee envisions communities where the needs of every person is met holistically and timely, free of stigma and judgement, and rich with hope and acceptance. Communities where the supports

to achieve goals and dreams, whatever those goals and dreams are, are accessible to all. A place where we are knowledgeable and equipped to make informed decisions, and where individuals, children, and families receive long-term healing supports. A community skilled and equipped with resources to recognize trauma, and navigate from trauma to healing.

Forsyth County BHS continues work associated with two existing grants. Planning for a Recovery to Work Curriculum continues through a grant provided by the Appalachian Regional Council. The term of this agreement was extended. The National Association of County and City Health Official (NACCHO) grant was extended, and additional funding added. NACCHO also provided technical assistance this year to establish a stigma index survey that substantially conforms to the national index administered by Shatterproof. The survey was implemented locally providing a baseline to measure the success of new strategies and also the ability to compare our local results with communities in other parts of the United States.

Forsyth County BHS, along with Winston-Salem/Forsyth County Schools, Partners Health Management, and the Mental Health Association, was selected via a competitive application process to participate in Our State, Our Wellbeing, a coalition of 15 North Carolina communities that come together to establish strategies to reduce the number of deaths by suicide. Further, this group is hosting quarterly Community Conversations on Suicide, followed by Question, Persuade, and Refer (QPR) training being offered by Partners Health Management. BHS is leading Forsyth Focused, a local group of stakeholders planning local strategies.

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