



	2018 Census Estimate	2020 Survey Goals	TOTAL as of 2/12/20
TOTAL COUNTY POPULATION (ages 18 years and older)	157,125	1,855 (1.18%)	2,160
Female	52.50%	574	1,106
RACE / ETHNICITY			
White, non-Hispanic	63.90%	1,185	996
Black or African American	18.40%	342	221
Hispanic or Latino	10.80%	201	166
Asian	4.10%	77	35
ZIP CODE (2013-2017 Census Estimate)- ages 18 years and older			
28081 Kannapolis	19,725	233	174
28083 Kannapolis	19,025	225	200
28124 Mount Pleasant	4,968	59	40
28025 Concord	39,931	472	403
28027 Concord	45,814	541	403
28075 Harrisburg	12,941	153	137
28107 Midland	6,006	71	41



What is Traumatic Stress?



Exposure to events that involve threats of **injury, death, or danger** during which intense **terror, anxiety, and helplessness** are experienced.



Can occur via **direct experience, witnessing** the event, or even **hearing about** the event.



Intense physical effects, including rapid heartbeat and breathing, shaking, dizziness, and/or loss of bladder or bowel control.



Reactions **vary with age**, but even very young children experience intense reactions.

(Gentry, 2013; NCTSN, 2010)

Even the experts are confused...



(Putnam et al., 2015)

Which term is best?

Reactions to Traumatic Stress

- Problems concentrating, learning, or taking in new information
- Difficulty going to sleep or staying asleep, nightmares
- Emotional lability; moody, sad, angry or aggressive, etc.
- Age-inappropriate behaviors: reacting like a much younger child (i.e., regression)

Caring for Children Who Have Experienced Trauma, 2010

ACE Study helpful, not sufficient

ACE Study results demonstrated the connection between childhood trauma exposure, high-risk behaviors (i.e. making, unprotected sex), chronic illness such as heart disease and cancer, and early death.

ACEs screening may have unintended consequences:

- Potential to re-traumatize children and families
- Considers all adverse experiences to be 'equal' – does not address severity



Murphy and Bartlett, 2019

Overview of ACEs

Adverse Childhood Experiences (ACEs):

- Traumatic events that occur during childhood
- Increases risk of negative health outcomes such as injury and chronic diseases

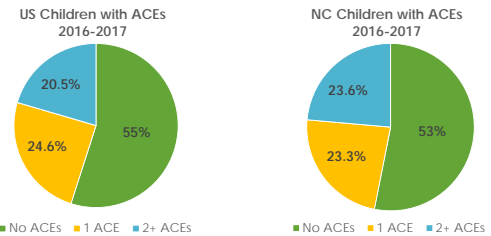
CDC

ACEs Questionnaire

While you were growing up, during your first 18 years of life:

1. Did a parent or other adult in the household often or very often... Swear at you, insult you, put you down, or humiliate you? *or* get ACE in a way that made you afraid that you might be physically hurt?
2. Did a parent or other adult in the household often or very often... Push, grab, slap, or throw something at you? *or* Ever hit you so hard that you had marks or were injured?
3. Did an adult or person at least five years older than you ever... Touch or fondle you or have you touch their body in a sexual way? *or* Attempt or actually have oral, anal, or vaginal intercourse with you?
4. Did you often or very often feel that... No one in your family loved you or thought you were important or special? *or* Your family didn't look out for each other, feel close to each other, or support each other?
5. Did you often or very often feel that... You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you? *or* Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?
6. Were your parents ever separated or divorced?
7. Was your mother or stepmother: Often or very often pushed, grabbed, slapped, or had something thrown at her? *or* Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard? *or* Ever repeatedly hit at least a few minutes or threatened with a gun or knife?
8. Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?
9. Was a household member depressed or mentally ill, or did a household member attempt suicide?
10. Did a household member go to prison?

Percent of Children with two or more ACEs



Trauma and Substance Use

The linkage between ACE's and trauma and substance use disorders (SUD's) is compelling.

People who experience 4 or more ACE's are 500% more likely to abuse alcohol.

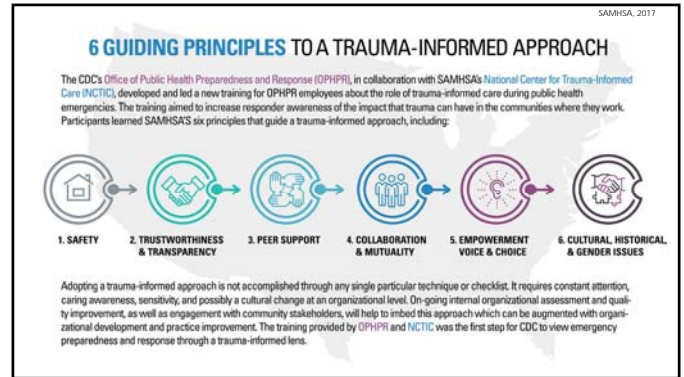
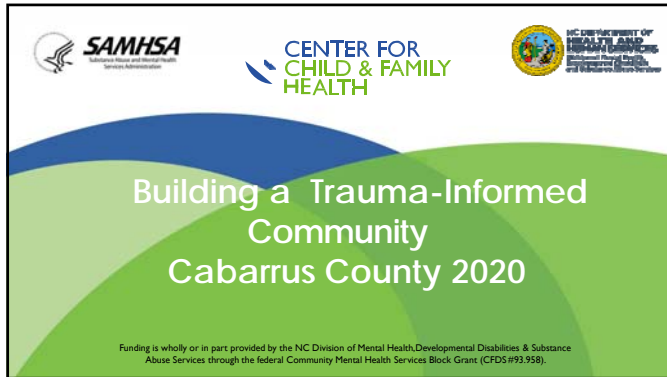
People who report five ACE's or more are 7 to 10 times more likely to report illicit drug abuse.

A jaw-dropping data point indicates that individuals who survive 6 or more ACE's are 46 times more likely to be IV drug abusers than people who report no ACE's.

Trauma truly is the "gateway drug" to addictions.

Resilience

- Ability of a child to recover and show early and effective adaptation after a potentially traumatic event.
- Following a traumatic event, a child's pathway to resilience can include these elements:
 - Responding with minimal distress or effect on daily functioning.
 - Exhibiting a temporary dip in ability to cope followed by an early and effective return to a child's usual level of functioning.
 - Some children may have difficulty functioning in certain domains (e.g., academic), while showing resilience in other areas (e.g., peer relationships).



Department of Human Services

DHS Data – Cabarrus County

Type Reported	FY 2019
Abuse	198
Neglect	2,277
Abuse and Neglect	624
Dependency	20

Abuse: A child is considered abused if his or her parent, guardian, custodian, or caretaker does any of the following:

- Causes serious physical injury to the child
- Creates a substantial risk of serious physical injury to the child
- Uses cruel discipline on the child,
- Commits certain sex crimes against the child,
- Causes serious emotional damage to the child

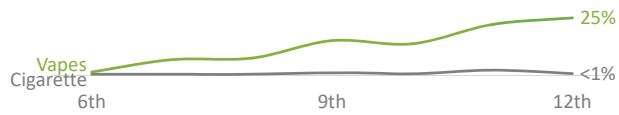
Neglect: If the child does not receive proper care, supervision, or discipline, from the child's parent, guardian, custodian, or caretaker, or the child has been abandoned.

Dependency: A dependent child is one who needs assistance or placement because the child does not have a parent, guardian, or custodian who is taking responsibility for the child's care or supervision.



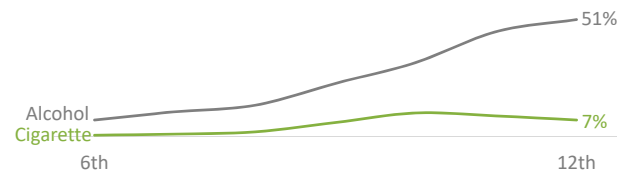
2019 Cabarrus Youth Substance Use Survey

More students report current **vapes use** than cigarette use.



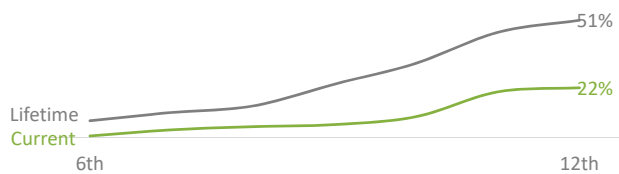
2019 Cabarrus Youth Substance Use Survey

More students report lifetime alcohol use than cigarette use.



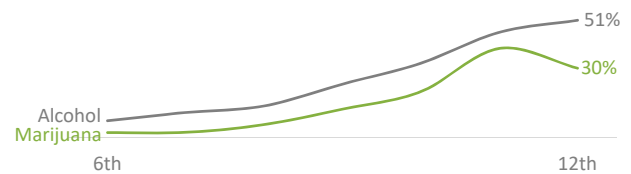
2019 Cabarrus Youth Substance Use Survey

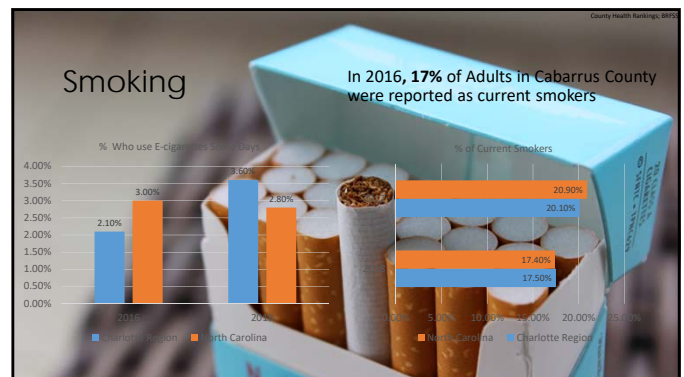
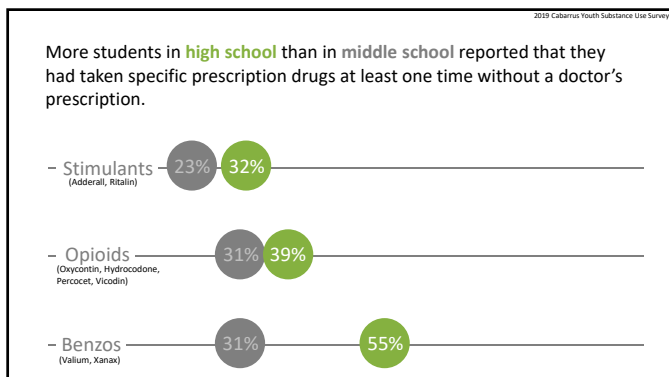
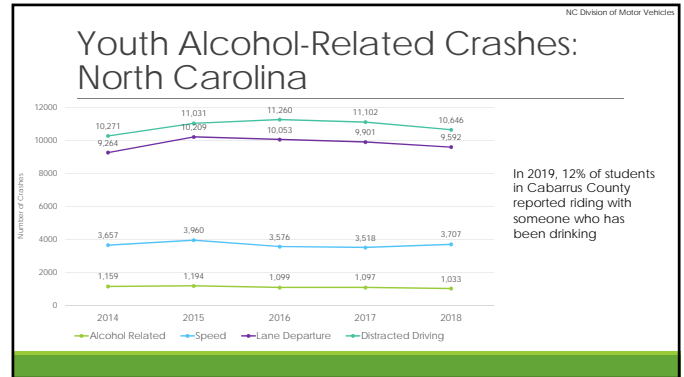
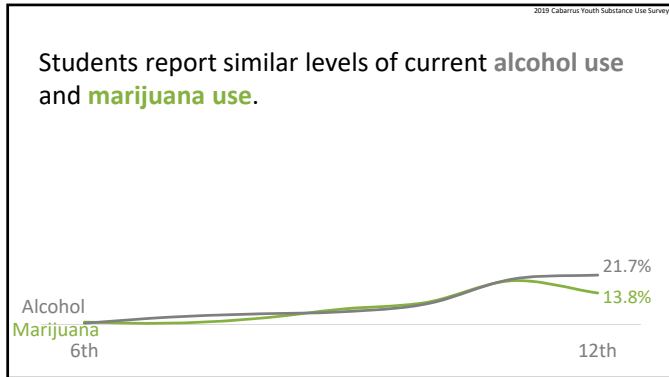
Fewer than half of those who report lifetime alcohol use report current alcohol use.

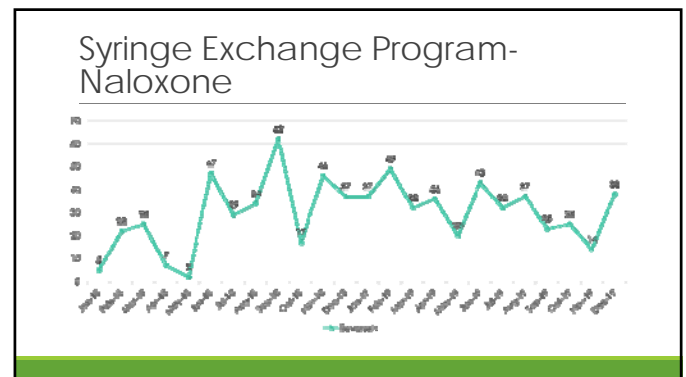
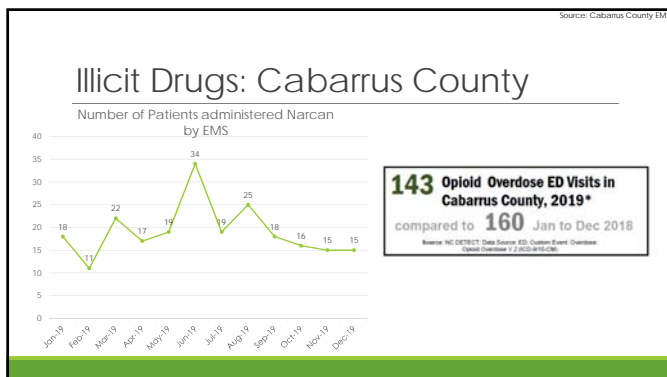
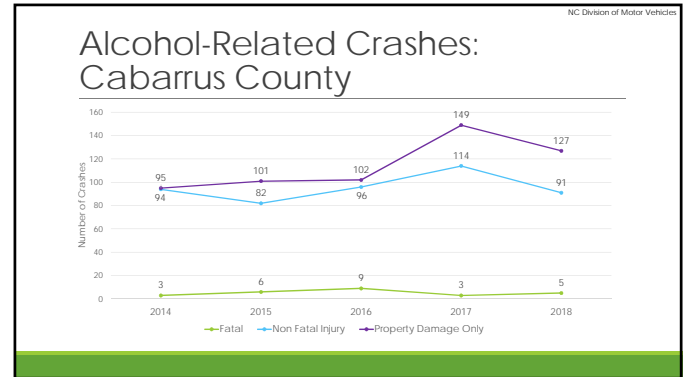


2019 Cabarrus Youth Substance Use Survey

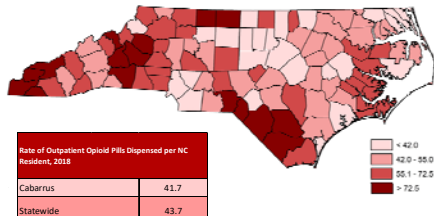
More students report lifetime alcohol use than marijuana use.







Rate of Outpatient Opioid Pills Dispensed Per North Carolina Residents, 2018

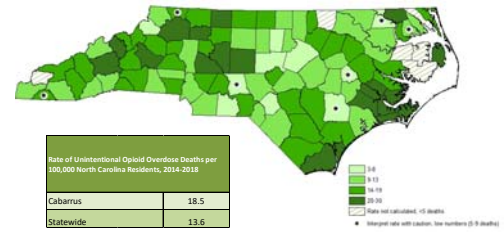


Source: Opioid Dispensing - NC Division of Mental Health, Controlled Substance Reporting System; Population: NCCHS
Analysis by Injury Epidemiology and Surveillance Unit

NCCHHS, Division of Public Health | County Overview Slides | November 2019

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Rate of Unintentional Opioid Overdose Deaths Per 100,000 North Carolina Residents, 2014-2018

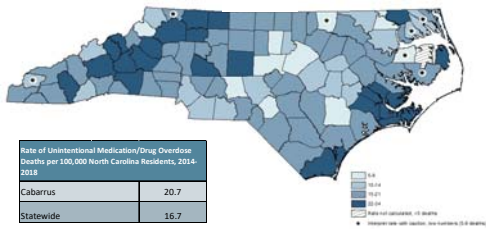


Technical Notes: Rates are per 100,000 N.C. residents; Unintentional medication and drug poisoning: X40-X44 and any mention of 162.2 (poison), 162.2 (Other Opioids), 162.3 (Mechanisms), 140.4 (Other synthetic opioid) and/or 162.4 (Other unspecified narcotics)
Source: Deaths N.C. State Center for Health Statistics, Vital Statistics, Population-NCCHS
Analysis by Injury Epidemiology and Surveillance Unit

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Rate of Unintentional Medication & Drug Overdose Deaths Per 100,000 North Carolina Residents, 2014-2018

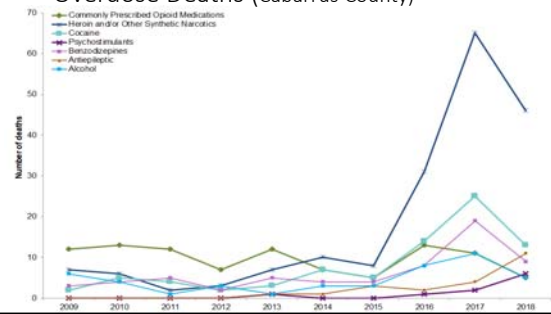


Technical Notes: Rates are per 100,000 N.C. residents; Unintentional medication and drug poisoning: X40-X44
Source: Deaths N.C. State Center for Health Statistics, Vital Statistics, Population-NCCHS
Analysis by Injury Epidemiology and Surveillance Unit

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Substances Contributing to Unintentional Overdose Deaths (Cabarrus County)



One Year's Estimated Total Lifetime Costs Medical and Work Loss from Medication & Drug Fatalities, All Intents, 2018

Total Medical Costs in Cabarrus County, 2018	\$339,177
Total Work Loss Costs in Cabarrus County, 2018	\$76,285,405
Combined Costs, 2018	\$76,624,582
Cost per capita in Cabarrus County, 2018	\$363

Technical Note: These estimates only include fatalities and do not include additional costs associated with non-fatal overdoses, treatment, recovery, and other costs associated with this epidemic.

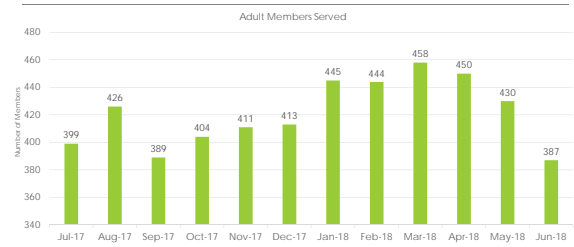
Source: Deaths-N.C. State Center for Health Statistics, Vital Statistics, Unintentional medication and drug overdose: 140.844/Population-National Center for Health Statistics/Economic Impact CDC, NIOSH, Cost of Injury Reports, National Center for Injury Prevention and Control, CDC for all medication and drug deaths (any intent), Base year (2018) costs indexed to state 2017 prices. Analysis by Henry's Epidemiology and Surveillance Unit.



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Cardinal Data-Substance Use Disorder



Individuals with Differing Abilities

Debbie Biggerstaff
Carol Cranford

Defining Intellectual and Developmental Disabilities

Intellectual and Developmental
Physical Ability Differences
Youth with Comorbidities

Percent with Disability

26.8% of Adults in North Carolina have some sort of disability (2017)

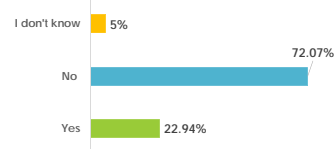
Types of disabilities:

- Mobility
- Cognition
- Independent living
- Hearing
- Vision
- Self-care

22% of Children in North Carolina have some type of special health care need or disability (2012)

2016 Community Needs Assessment

Do you or anyone in your household have a disabling condition or special healthcare need (chronic medical, physical, developmental, intellectual or behavioral)?



Those that had someone in their household with a disabling condition reported these unmet needs for services:

- Accessible programs or facilities for physical activity
- Nutritional resources to eat healthy foods
- Transportation to access services in the community
- In-home assistance
- Child caregiver assistance
- Insurance assistance

Missing population

School, education
Employment
Crime and Safety
Medicaid
Clinical care and wellness
Dental Health care

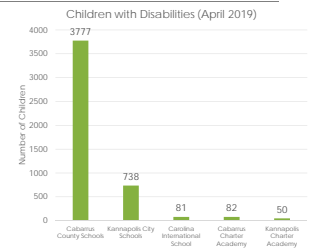
School Data

EC Head Count: children with disabilities who receive special education and related services

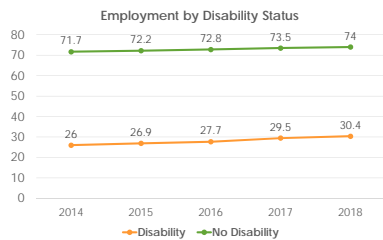
Eligibility Categories include:

- Autism
- Deaf/Blind
- Developmental Delay
- Emotional Disability
- Intellectual Disability
- Orthopedic Impairment
- Specific Learning Disability
- Speech/Language Impairment
- Traumatic Brain Injury

Of the total children(4,728), 340 are eligible due to Intellectual Disability



Life after graduation...



30.4% of individuals with disabilities (ages 16-64 years) are employed compared to **74%** of individuals without disabilities (ages 16-64)

Complex Needs

People with disability have different types of needs

Therapy, 101 caregiving, specialized education, modified transportation, etc.

Affordability
 In 2015, 70% of adults with disabilities in North Carolina reported that within the past 12 months they had a time when medical care was delayed or not received because of the cost. 23% of adults with disabilities reported that they had a time when medical care was delayed or not received because of the cost.

Registry of Unmet needs for the Innovation Waiver
 The Innovation Waiver Medicaid program is designed to meet the needs of individuals with developmental disabilities to provide services that are not covered by Medicaid.

Private Insurance vs. Medicaid

While 89.0% of people with disabilities in the United States have health insurance coverage, only 44.2% have private health insurance (2015).

Barriers to Accessing Care

In 2015, **9.5% of families of Children with Special Health Care Needs** in North Carolina reported that in the past 12 months there was a time when medical care was delayed or not received.

Barriers to Care:

- Inaccessible health care facilities and equipment
- Transportation difficulties
 - In 2015, **7.2% of adults with disabilities** in North Carolina reported a delay in getting needed medical care due to lack of transportation
- Effective communication
- Accommodation needs

Barriers to Accessing Care

The Issue of appropriate healthcare for those with IDD, Autism and disorders of childhood that persist into adulthood:

- The absence of professional training on disability competency issues is one of the most significant barriers that prevent people with disabilities from receiving appropriate and effective health care
- Physicians may be unsure how to treat and work with individuals with adult patients who have IDD
- Lack of training and awareness can result in incorrect assumptions and stereotypes about people with disabilities, and can result in inadequate and inappropriate care.

Intersection of Disability and Physical Health

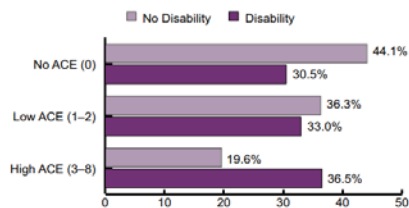
North Carolina (2018)

Physical Health	Disability	No Disability
Current Smoker	40.2%	26.4%
Binge Drinker	21.0%	28.9%
Heavy Drinker	23.4%	28.9%
COPD	65.2%	25.3%
Asthma	49.8%	26.7%
Diabetes	52.0%	25.4%
Has 2 or more Chronic Diseases	54.7%	18.6%

Special Olympic Data (2018)

Health Condition	North Carolina	Cabarrus County
Fitness Problems- Strength	95.4%	44.7%
Fitness Problems- Flexibility	96.7%	71.1%
Fitness Problems- Balance	91.9%	73.7%
Obese (Adult)	55.4%	44.4%
Overweight (Child)	23.7%	66.7%
Untreated Tooth Decay	30.5%	43.8%

ACE Scores by Disability Status



People with disabilities who reported at least Adverse Childhood Experience were found to have a higher prevalence of risky behaviors such as smoking.

Source: Henick, H. W., & Austin, A. E. Disability and Exposure to High Levels of Adverse Childhood Experiences (ACEs) in North Carolina: The Effect on Health and Risk Behavior.

Mental Health

Sonja Bohannon-Thacker

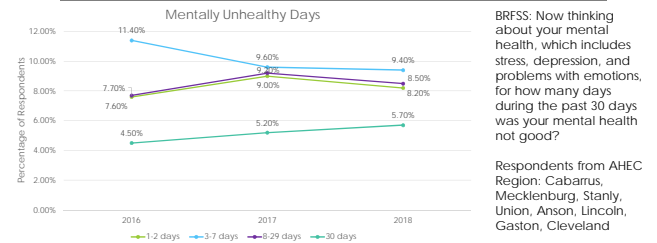
What is Mental Illness?

A *health* condition that affects a person's thinking, feeling or mood, or a combination of these.

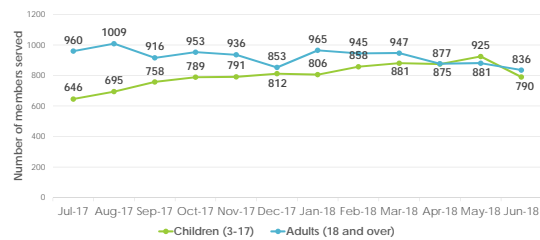
These conditions may affect someone's ability to relate to others and function each day.

Each person will have different experiences, even people with the same diagnosis.

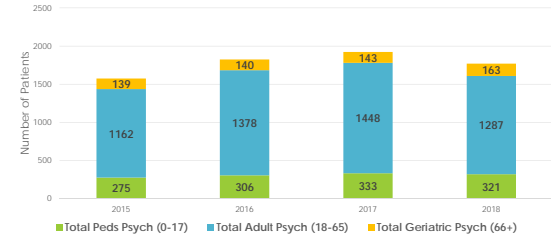
Mentally Unhealthy Days



Cardinal Innovations Healthcare- Number of Members Served

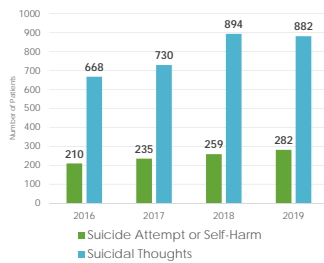


Atrium Health Cabarrus ED: Behavioral Health



Suicide

ED Admission Data



Cabarrus County Suicide Death Rate (2013-2017)*

Age Groups	Suicide Deaths	Rate per 100,000
15-24	13	Unreliable
25-34	16	Unreliable
35-44	28	19.4
45-54	23	15.8
55-64	22	19.5
Total	124	12.6

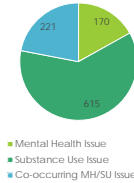
*Deaths under 20 are considered too unreliable to calculate rates.

Stepping Up Data

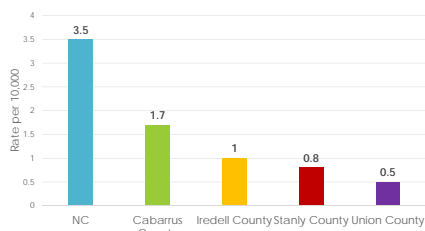
The Stepping Up program is an initiative that is aimed at reducing the number of people with mental illnesses in jail.

89% of Stepping Up participants in 2019 that were released have not returned to jail.

Out of the jail population who screened positive for a Mental Health/Substance Use issue:



Mental Health Care Workforce per 10,000 Population (2017)



Mental Health Care Providers: includes active licensed physicians and active licensed psychologists

NC Child Treatment Program

Treatment Model	Acronym	Client Ages	# Clinicians Trained
Attachment & Bio-Behavioral Catch-Up	ABC	0-2	0
Child and Parent Psychotherapy	CPP	0-5	0
Parent-Child Interaction Therapy	PCIT	2.5-6.5	5
Trauma-Focused Cognitive-Behavioral Therapy	TF-CBT	3-18	25 (4 in training)
Structured Psychotherapy for Adolescents Responding to Chronic Stress	SPARCS	12-19	8

Treatment for Adults with PTSD

Gold standard treatment for adults with trauma histories and symptoms of PTSD is Cognitive Processing Therapy (CPT).

In NC, there are only 92 Mental health providers who have met roster requirements to be a CPT Provider or CPT Quality Provider. These individuals currently offer CPT treatment in a community-based setting.

Cabarrus County only has 2 Mental Health Providers that provide CPT.

Mental Health Services

- Intensive In-Home Program
- Medication Management
- Mobile Crisis Management
- Outpatient Therapy
- Walk-in Crisis Services
- Facility Based Crisis
- Assertive Community Treatment Team
- Community Response Team
- Medication Assisted Treatment Programs
- School Based Therapy
- School Based Day Treatment
- Peer Support
- Atrium Health – Cabarrus Geriatric Psych Unit

Opportunities for Cabarrus County

- More behavioral health specialists in primary care offices
- IPS Supportive Employment
- Spanish-speaking therapists
- Psychiatrist for children, adolescents, and adults
- Specialized service providers for individuals with Autism, Behavior Disorders, and Attachment Disorders



Focus Group Ranked Priorities

Mental Health



2nd

Disability and Health



5th

Substance Use



4th

Tobacco and Vaping



10th

Questions

