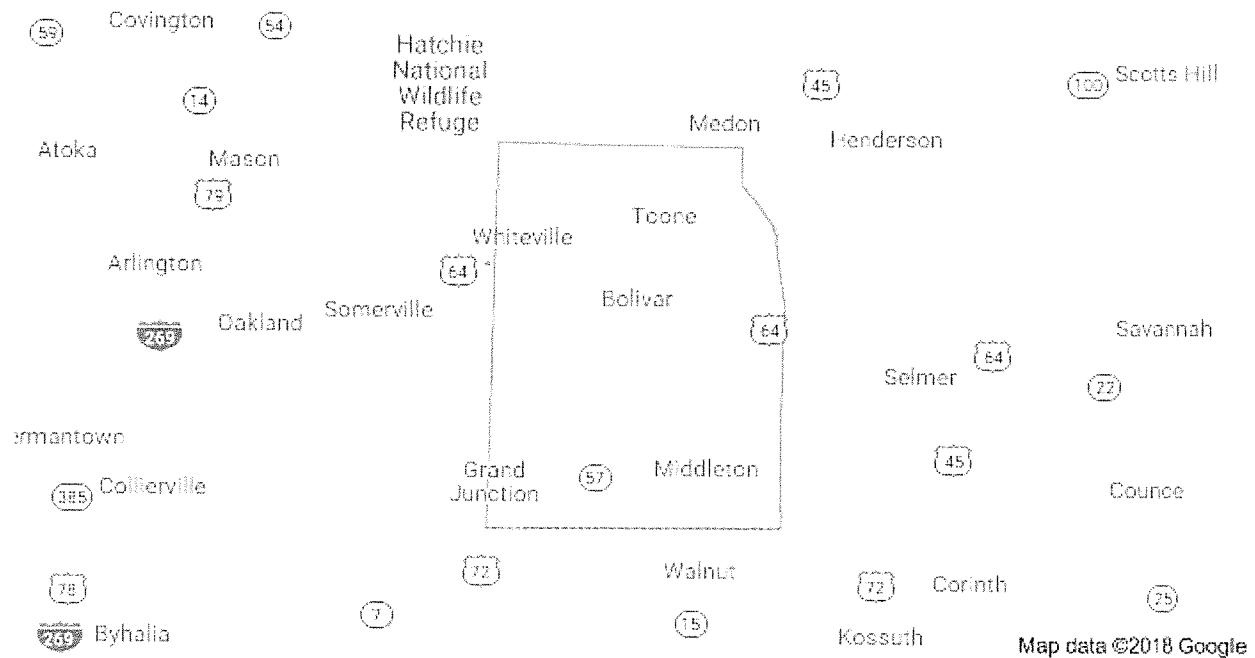


Community Health Needs Assessment

Hardeman County, Tennessee



Conducted by:

Jackson-Madison County General Hospital

Department of Business Development and Planning

Dawn Harris and Victoria S. Lake

Update: September 2018

In fulfillment of the requirements of the Patient
Protection and Affordable Care Act Pub.L. No.111-148,
124 Stat. 119, enacted March 23, 2010

**RESOLUTION OF THE BOARD OF TRUSTEES
OF
JACKSON-MADISON COUNTY GENERAL HOSPITAL DISTRICT
AND
CAMDEN GENERAL HOSPITAL, INC.
AND
BOLIVAR GENERAL HOSPITAL, INC.
AND
MILAN GENERAL HOSPITAL, INC.
AND
DYERSBURG HEALTH
AND
MARTIN HEALTH
AND
PATHWAYS OF TENNESSEE, INC.**

COMMUNITY HEALTH NEEDS ASSESSMENT APPROVAL

WHEREAS, the Patient Protection and Affordable Care Act, enacted March 10, 2010, required public and not-for-profit hospitals to perform a Community Health Needs Assessment for each hospital; and

WHEREAS, the staff of the District has conducted such an Assessment and prepared the report as required for each of its hospitals; and

WHEREAS, the Assessments were prepared in accordance with IRS rules and regulations as amended; and

WHEREAS, the Board finds that the Assessments substantially meet the requirements of the of the Patient Protection and Affordable Care Act and the IRS rules and regulations as amended, and that the Implementation Strategies set forth in the Assessments shall be implemented in accordance with Management recommendations.

NOW, THEREFORE, BE IT RESOLVED, that the Community Health Needs Assessments given to the Board are approved and adopted.

ADOPTED, this the 30th day of October, 2018.

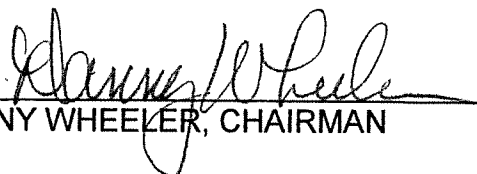

DANNY WHEELER, CHAIRMAN

Exhibit Q2

Table of Contents

Executive Summary

Final Report

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Attachments

| | |
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| Attachment A..... | Secondary Data |
| Attachment B | Health Council Brochure and Minutes |

Hardeman County Community Health Needs Assessment

2018 Update

Executive Summary

Under the leadership of Jackson-Madison County General Hospital a community health needs assessment of Hardeman County, Tennessee was conducted. This was completed in fulfillment of the requirements of the Patient Protection and Affordable Care Act Pub.L. No.111-148, 124 Stat. 119, enacted March 23, 2010. The community health needs assessment update process was a blending of Hardeman County Health Council top health priorities and implementation strategies, and secondary data on the actual extent of particular health issues.

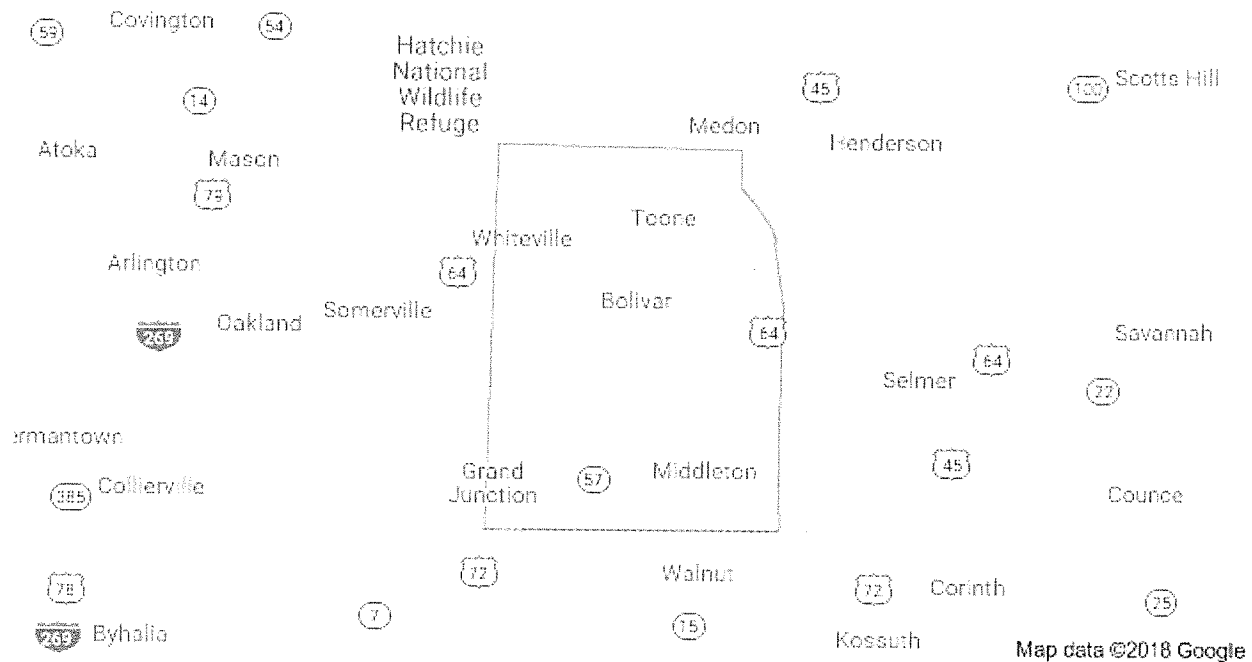
The mission of the Community Health Needs Assessment is to evaluate and improve the health status and wellbeing of the residents of Hardeman County, Tennessee with an emphasis on preventive measures.

The first stage of the Update process involved gathering secondary data from multiple sources including the Tennessee Department of Health, County Health Rankings and Roadmaps, Tennessee Department of Economic & Community Development, Behavioral Health County and Region Services Data Book, NIBRS, TN PRISM, Traumatic Brain Injury Program, and the National Institute of Mental Health. The second step in the Community Health Needs Assessment Update process consisted of reviewing priorities and implementation strategies developed by the Hardeman County Health Council.

The Hardeman County Health Council identified three priority health issues: Obesity, Physical Inactivity, and Tobacco/ Substance Abuse. Several goals, objectives, and implementation strategies were identified to address these health issues that emphasize screenings, education and collaboration with other community agencies with the purpose of easing the burden of health disparity for the Hardeman County community.

Community Health Needs Assessment

Hardeman County, Tennessee



Conducted by:

Jackson-Madison County General Hospital

Department of Business Development and Planning

Dawn Harris and Victoria S. Lake

Update: September 2018

In fulfillment of the requirements of the Patient
Protection and Affordable Care Act Pub.L. No.111-148,
124 Stat. 119, enacted March 23, 2010

Introduction

Under the leadership of Bolivar General and the Hardeman County Health Council a community health needs assessment of Hardeman County, Tennessee was conducted. This was completed in fulfillment of the requirements of the Patient Protection and Affordable Care Act Pub.L. No.111-148, 124 Stat. 119, enacted March 23, 2010; and Department of the Treasury Internal Revenue Service 26 CFR Parts 1, 53, and 62 *Additional Requirements for Charitable Hospitals; Community Health Needs Assessments for Charitable Hospitals; Requirements of a Section 4959 Excise Tax Return and Time for Filing the Return.*

The community health needs assessment update process was a blending of Hardeman County Health Council top health priorities and implementation strategies, and secondary data on the actual extent of particular health issues.

Description of the Hospital and Community

Bolivar General Hospital is a critical access hospital (CAH) licensed for 25 beds and was acquired by the Jackson-Madison County General Hospital District in 1995. The hospital is a member of the American Hospital Association, the Tennessee Hospital Association, and is accredited by The Joint Commission and has been approved by the U.S. Department of Health and Human Services for participation in Medicare and Medicaid Programs. The service area is Hardeman County, Tennessee.

Located in Bolivar, Tennessee, the Hospital provides general medical, outpatient rehabilitation services, general surgery, a sleep center, internal medicine, a medical/surgical nursing unit, a critical care unit, pathology and laboratory department, radiology (computerized axial tomography, mammography, ultrasound, and diagnostic X-ray), 24 hour/7 days a week emergency services, and social services.

With a 2017 population of 25,447, Hardeman County is located in the rural Southwest Tennessee approximately 69 miles East of Memphis and 159 miles West of Nashville and is

comprised of 56.1 percent Caucasian, 41.6 percent African American, and 2.3 percent Other races. According to the Tennessee Department of Economic & Community Development (2018), 23.7 percent of the population is below the Federal poverty level. The personal income per capita is \$28,296. The population under 65 years of age represents 83.5 percent while the over age 65 population is 16.5 percent. The high school graduation rate is 88.4 percent; 14.7 percent have an Associate Degree or higher and 10.5 percent have a Bachelor Degree or higher.

Hardeman County has a wide range of industries that employ individuals living in and around the county. Hardeman County is home to manufacturers or businesses such as: Thyssen-Krupp which specializes in elevators (700 employees), Kilgore Corporation associated with military flares (450 employees), Moltan Company which focuses on cat litter and absorbent (80 employees), I.C.E. an industrial heater business (65 employees), Vandiver Sawmill which focuses on hardwood lumber (62 employees), Howell and Sons Lumber company which also is geared toward hardwood lumber (60 employees), ICO Polymers which produces grind polyethylene (37 employees), Designer Cabinets which conducts business in custom cabinetry (35 employees), Hopper Sawmill which deals with hardwood lumber (35 employees), Precision Industries with a focus on high performance torque converters (30 employees), and El Paso Energy dealing with natural gas (30 employees).

The county seat of Hardeman County is Bolivar, Tennessee. The City of Bolivar, City of Whiteville, City of Grand Junction, Hardeman County Government, and the Hardeman County School System are all located in Hardeman County. The public school system has nine schools and serves approximately 3,543 students.

Description of the Community Health Needs Assessment Survey Process

The mission of the Community Health Needs Assessment is to evaluate and improve the health status and wellbeing of the residents of Hardeman County, Tennessee with an emphasis on preventive measures.

The first stage of the Update process involved gathering secondary data from multiple sources including the Tennessee Department of Health, County Health Rankings and Roadmaps, Tennessee Department of Economic & Community Development, Behavioral Health County and Region Services Data Book, NIBRS, TN PRISM, Traumatic Brain Injury Program, and the National Institute of Mental Health. This data is presented in **Appendix A**.

The second step in the Community Health Needs Assessment Update process consisted of reviewing priorities and implementation strategies developed by the Benton County Health Council. A Health Council brochure, meeting minutes, and a cross section of implementation program brochures are in **Appendix B**. The final stage consisted of reviewing the two sets of data and final report production.

Hardeman County Health Council

The Hardeman County Health Council is organized under the auspices of the State of Tennessee Department of Health, and is composed of community members who represent diverse spectrums of Hardeman County as well as staff from the local and regional health departments.

The Benton County Health Council partners with area agencies, organizations, businesses, churches and faith-based organizations, schools, colleges and universities, and local government to fulfill its mission to identify and prioritize health issues and problems while continually working to promote, protect, and improve the health of persons living and working in the county (Health Council brochure, 2018).

Members of the Hardeman County Health Council include:

| | | |
|-------------------|--------------|------------------|
| Ruby Kirby, Chair | Taylor Woods | Casandra Bufford |
| Linda Woods | Caleb Vivio | Levi Smith |
| Tamara Overstreet | Sara Skinner | Debbie Armour |
| Dawn Harris | Barbara Bond | Rodger Jowers |

The Hardeman County Health Council meets on a quarterly basis to develop and implement strategies to address the health priorities of the county. The Council goes through a structured process to select county priorities and adopt strategies to improving health outcomes. Priorities are selected for a period of 2 - 3 years with the last priority selection occurring in the spring of 2017. Through this process, the Hardeman County Health Council identified three priority health issues:

1. Obesity
2. Physical Inactivity
3. Tobacco/ Substance Abuse

Implementation Strategies

Several goals, objectives, and implementation strategies were identified to address the three health issues selected. The strategies emphasize screenings, education and collaboration with other community agencies.

Obesity

The Hardeman County Department of Health presents information on healthy eating at the Team Up Women event and at various outreach events annually. These community activities provide resources to the community for reducing obesity and living healthier lives. In addition, Bolivar General Hospital received a \$10,000 diabetes grant that has a focus on the underserved population. The focus is to promote diabetes education and self-adherence programming to area diabetics and caregivers.

Physical Inactivity

Hardeman County initiated a program called *Walk with the Mayor* to support community engagement in physical activity. Another program to encourage physical activity is the *Walk Across Tennessee* program. This is a collaboration between UT Extension and the Hardeman County Health Department.

In addition to the obesity, diabetes, and physical activity programs, Hardeman County has been awarded the distinction of being a Healthier Tennessee Community. Healthier Tennessee is a program initiated through the Governor's Foundation for Health and Wellness. The program focuses on providing support and resources for Tennesseans to live healthier lives by being physically active, consuming healthier foods, and reducing use of tobacco products.

★ Recognized

| Healthier Communities | | |
|-----------------------|------------------|-------------------|
| EAST | MIDDLE | WEST |
| Franklin County | ★ Franklin | ★ Dyer County |
| ★ Grundy County | ★ Hickman County | ★ Germanton |
| Jefferson County | ★ Houston County | ★ Hardeman County |
| ★ Kingsport | ★ Macon County | ★ Haywood County |

Tobacco/ Substance Abuse

Hardeman County utilizes Baby and Me, an evidence-based smoking cessation program, to reduce the high incidence of nicotine addiction among young women. The Gold Sneaker initiative is another program Hardeman County offers to enhance wellness through policy initiatives within licensed child care facilities in Tennessee.

Hardeman County will continue its efforts with a youth-led initiative called TNSTRONG (Tennessee Stop Tobacco and Revolutionize Our New Generation). The program is a peer-to-peer education and advocacy for prevention of tobacco and nicotine addiction across the state.

Conclusion

The Hardeman County Community Health Needs Assessment was presented to the West Tennessee Healthcare Quality Council on October 2, 2018. The document was approved for submission to the West Tennessee Healthcare Board of Trustees. A presentation was made to the Board of Trustees on October 30, 2018, and the Hardeman County Community Health Needs Assessment was approved on this date. The Assessment will be updated in three years as stipulated in the Patient Protection and Affordable Care Act Pub.L. No.111-148, 124 Stat. 119, enacted March 23, 2010.

HARDEMAN COUNTY 2018

Hardeman County Community Health Assessment

Health Issue Prevalence Data

September 2018

Allergies

- * 1 in 5 Americans suffer from all types of allergies.
- * Allergies are increasing. They affect up to 30% of adults and 40% of children.
- * Allergies are the 6th leading cause of chronic illness in the U.S.
- * 10% of U.S. children have respiratory allergies.
- * Up to 10% of people report being allergic to penicillin.
- * People visit the emergency room 200,000 times each year because of food allergies.
- * 8.8 million children in the U.S. have skin allergies.

Source: Better Tennessee Health Brief, 2018.

Arthritis, Rheumatoid Arthritis, Gout, Lupus, or Fibromyalgia

Have you ever been told by a doctor, nurse, or other health care professional that you had Arthritis, Rheumatoid Arthritis, Gout, Lupus, or Fibromyalgia? (percent)

| | Southwest | TN |
|------|-----------|------|
| 2016 | no data | 31 |
| 2015 | no data | 32 |
| 2014 | no data | 32.6 |
| 2013 | 29.7 | 26.4 |
| 2012 | 30.4 | 29.8 |
| 2011 | 25.4 | 25.9 |
| 2009 | 27.7 | 25.9 |
| 2007 | 40.4 | 34.0 |
| 2005 | 33.6 | 29.7 |

Source: Tennessee Department of Health. Behavioral Risk Factor Surveillance System.

| Tennessee | 2011 | 2013 |
|----------------------------------|-----------|---------|
| Adults with Arthritis | 1,250,000 | 160,000 |
| Adults limited by arthritis | 594,000 | 68,000 |
| Percent with arthritis | 26 | 25 |
| Percent women/men with arthritis | 31/21 | 27/23 |
| Percent age 18-44 with arthritis | 10 | 8 |
| Percent age 45-64 with arthritis | 34 | 32 |

HARDEMAN COUNTY 2018

| | | | |
|--|--|----|----|
| Percent age 65 and older with arthritis | | 50 | 52 |
| Percent with arthritis who are inactive | | 55 | 33 |
| Percent arthritis among adults with diabetes | | 53 | 49 |
| Percent arthritis among adults with hypertension | | 42 | 42 |
| Percent arthritis among adults who are obese | | 37 | 34 |
| <u>Source:</u> Centers for Disease Control and Prevention. | | | |

Asthma

Have you ever been told by a doctor, nurse, or other health care professional that you had asthma? (percent)

| | Southwest | TN |
|------|------------------|-----------|
| 2016 | no data | 16.1 |
| 2015 | no data | 14.5 |
| 2014 | no data | 14.4 |
| 2013 | 6.5 | 11.3 |
| 2012 | 13.8 | 11.0 |
| 2011 | 6.3 | 10.4 |
| 2010 | 8.7 | 9.3 |
| 2009 | 8.7 | 11.9 |
| 2008 | 9.4 | 12.6 |
| 2007 | 12.1 | 12.4 |
| 2006 | 15.9 | 11.7 |
| 2005 | 11.6 | 11.6 |

Source: Tennessee Department of Health. Behavioral Risk Factor Surveillance System.

2002-2007 childhood hospitalizations for Asthma Ages 10-17 TN

| | |
|--|---------|
| Inpatient hospitalizations per 100,000 | 200 |
| Emergency Room visits per 100,000 | 828 |
| Average inpatient charges per stay | \$5,845 |
| Average Outpatient charge per visit | \$800 |

Asthma in Tennessee:

* In 2010, asthma prevalence was 6 percent in adults and 9.5 percent in children.

* Adult asthma prevalence increased with decreasing income and education.

* In 2010, there were 7,059 inpatient hospitalization in Tennessee for a primary diagnosis of asthma and the age-adjusted rate was 109/100,000.

* In 2010, the length of stay for inpatient asthma hospitalizations ranged from 0-52 days with a mean of 3.4 days and a median of 3 days.

HARDEMAN COUNTY 2018

| | |
|---|--|
| *In 2010, there were 37,462 ED visits with an age adjusted rate of 612/100,000. | |
| * Hospital charges for a primary asthma diagnosis totaled \$178.8 million in 2010. | |
| * Almost two-thirds of asthma charges (\$111.6 million) were for inpatient hospitalizations and \$65.2 million for outpatient hospital visits. | |
| * In 2010 66 Tennesseans died due to an underlying diagnosis of asthma and there were 174 deaths for which asthma was listed as any cause of death. | |
| Source: Tennessee Department of Health Division of Policy, Planning & Assessment Surveillance, Epidemiology and Evaluation, 2012. | |

Cancer

Deaths from Malignant Neoplasms Per 100,000

| | Hardeman County | | | | TN | | |
|------|-----------------|-------|-------|--|-------|-------|-------|
| | Total | White | Black | | Total | White | Black |
| 2016 | 243.8 | 301.9 | 169.5 | | 217.5 | 235.1 | 178 |
| 2015 | 256.8 | 298.5 | 204.6 | | 214.8 | 229.5 | 170.4 |
| 2014 | 269.5 | 308.2 | 231.2 | | 216.1 | 231.8 | 182.4 |
| 2013 | 247.0 | 262.8 | 237.3 | | 214.5 | 231.0 | 176.4 |
| 2012 | 207.2 | 267.5 | 135.6 | | 211.2 | 226.5 | 176.3 |
| 2011 | 227.2 | 249.3 | 207.0 | | 210.2 | 224.6 | 180.1 |
| 2010 | 286.2 | 357.6 | 203.9 | | 212.9 | 234.6 | 178.9 |
| 2009 | 278.0 | 308.1 | 244.8 | | 216.2 | 226.9 | 183.5 |

Rates of SKIN Cancer

Rates of OTHER Cancer

| | TN | | TN |
|------|-------|------|-------|
| | Total | | Total |
| 2016 | 7.4 | 2016 | 6.5 |
| 2015 | 7.5 | 2015 | 6.8 |
| 2014 | 6.8 | 2014 | 7.4 |

Source: Tennessee Department of Health Division of Policy, Planning, and Assessment.

Child Abuse

Number and rate of substantiated child abuse/neglect cases under age 18 and rate per 1,000 age 0-18

| | Hardeman County | TN |
|--------|-----------------|-----|
| Cy2013 | 16/* | 4.9 |
| Cy2012 | 26/4.9 | 4.9 |
| Cy2011 | 28/5.1 | 4.8 |

HARDEMAN COUNTY 2018

Source: Tennessee Department of Mental Health and Substance Abuse Services. Tennessee Behavioral Health County Data Book 2014.

Child Abuse & Neglect in Tennessee

| | Hardeman County | TN |
|------|-----------------|------|
| 2012 | 2.8 | 4.9 |
| 2010 | 2.7 | 5.5 |
| 2009 | 3.1 | 7.0 |
| 2008 | 3.3 | 8.4 |
| 2007 | 3.4 | 11.6 |
| 2006 | 17.4 | 11.7 |

Source: Tennessee Commission on Children and Youth: KIDS COUNT: The State of the Child in Tennessee.

COPD, Emphysema, or Chronic Bronchitis

Have you ever been told by a doctor, nurse, or other health care professional that you had COPD, Emphysema, or Chronic Bronchitis? (percent)

| | TN |
|------|------|
| 2016 | 10.1 |
| 2015 | 9.6 |
| 2014 | 10.7 |

Source: Tennessee Department of Health. Behavioral Risk Factor Surveillance System.

Dementia/Alzheimer's Disease

* Alzheimer's disease is an irreversible, progressive brain disorder that slowly destroys memory and thinking skills and, eventually, the ability to carry out the simplest tasks.

* Alzheimer's disease is currently ranked as the sixth leading cause of death in the United States, but recent estimates indicate that the disorder may rank third, just behind heart disease and cancer, as a cause of death for older people.

* Over 5 million Americans are living with Alzheimer's Disease 110,000 in Tennessee.

* By 2050, this number is projected to rise to 14 million people, a nearly three-fold increase

* Tennessee in 2014: 16,000 adults ages 65-74 living with Alzheimer's.

* Tennessee in 2014: 47,000 adults ages 75-84 living with Alzheimer's.

* Tennessee in 2014: 41,000 adults ages 85+ living with Alzheimer's.

HARDEMAN COUNTY 2018

Source: Tennessee Department of Health; National Institute on Aging; Centers for Disease Control and Prevention.

Dental Care

Have you visited a dentist, dental hygienist or dental clinic within the past year? (percent)

| | Southwest | TN |
|------|-----------|------|
| 2013 | 47.8 | 38.6 |
| 2012 | 47.8 | 38.6 |
| 2010 | 37.2 | 33.7 |

Source: Tennessee Department of Health. Behavioral Risk Factor Surveillance System.

* TennCare dental benefits are only provided to minors and orthodontists are not typically covered

* Stigma and shame associated with accessing dental care.

* Low socioeconomic groups, minorities, and those living in fluoride deficient communities are at a high risk for oral disease and are the least likely to be able to access dental care.

Diabetes

Deaths from Diabetes per 100,000

| | Hardeman County | | | | TN | | |
|------|-----------------|-------|-------|--|-------|-------|-------|
| | Total | White | Black | | Total | White | Black |
| 2016 | 62.9 | 77.2 | 47.1 | | 28.4 | 27.5 | 37.3 |
| 2015 | 46.7 | 48.6 | 46.5 | | 27.1 | 26.6 | 32.8 |
| 2014 | 73.2 | 68.5 | 83.2 | | 26.3 | 25.8 | 33.5 |
| 2013 | 34.2 | 47.2 | 18.3 | | 27.9 | 27.1 | 36.8 |
| 2012 | 41.4 | 13.4 | 81.4 | | 28.2 | 27.4 | 36.7 |
| 2011 | 22.4 | 32.8 | 9.0 | | 27.1 | 26.3 | 35.7 |
| 2010 | 51.4 | 26.0 | 88.6 | | 26.4 | 26.4 | 35.0 |
| 2009 | 51.5 | 49.3 | 55.3 | | 28.2 | 26.8 | 37.7 |

Source: Tennessee Department of Health Division of Policy, Planning, and Assessment.

Have you ever been told by a doctor that you have diabetes, not including gestational diabetes? (percent)

| | Southwest | TN |
|------|-----------|------|
| 2016 | no data | 12.7 |

HARDEMAN COUNTY 2018

| | | | | | | | |
|------|--|---------|--|------|--|--|--|
| 2015 | | no data | | 12.7 | | | |
| 2014 | | no data | | 13 | | | |
| 2013 | | 17.3 | | 12.2 | | | |
| 2012 | | 18.1 | | 11.9 | | | |
| 2011 | | 13.5 | | 11.2 | | | |
| 2010 | | 12.0 | | 11.3 | | | |
| 2009 | | 12.2 | | 10.3 | | | |
| 2008 | | 11.6 | | 10.4 | | | |
| 2007 | | 12.3 | | 11.9 | | | |
| 2006 | | 9.4 | | 10.7 | | | |
| 2005 | | 11.6 | | 9.1 | | | |

Have you ever been told that diabetes has affected your eyes or that you have retinopathy? (percent)

| | | | | | | | |
|------|--|------------------|--|-----------|--|--|--|
| | | Southwest | | TN | | | |
| 2013 | | 18.7 | | 16.8 | | | |
| 2012 | | 21.0 | | 22.8 | | | |
| 2011 | | 21.6 | | 21.7 | | | |
| 2010 | | 28.2 | | 25.7 | | | |
| 2009 | | 33.2 | | 27.4 | | | |
| 2008 | | 12.0 | | 21.0 | | | |
| 2007 | | 22.0 | | 25.9 | | | |
| 2006 | | 18.6 | | 18.6 | | | |
| 2005 | | 11.9 | | 20.1 | | | |

Source: Tennessee Department of Health. Behavioral Risk Factor Surveillance System.

Percentage of Population Diagnosed with Diabetes

| | | | | | | | |
|------|--|------------------------|--|-----------|--|--|--|
| | | Hardeman County | | TN | | | |
| 2018 | | 15 | | 13 | | | |
| 2017 | | 15 | | 13 | | | |
| 2016 | | 15 | | 12 | | | |
| 2015 | | 14 | | 12 | | | |
| 2014 | | 13 | | 11 | | | |
| 2013 | | 12 | | 11 | | | |
| 2012 | | 12 | | 11 | | | |
| 2011 | | 12 | | 11 | | | |

Source: County Health Rankings and Roadmaps 2016-2018.

Source: Robert Wood Johnson Foundation and University of Wisconsin Population Health Institute.

| | | | | | | | |
|--|--|--|--|--|--|--|--|
| | | | | | | | |
|--|--|--|--|--|--|--|--|

HARDEMAN COUNTY 2018

| | | | |
|---|--|------------------|-----------|
| Dental Care | | | |
| Have you visited a dentist, dental hygienist or dental clinic within the past year? (percent) | | | |
| | | TN | |
| 2016 | | 59.1 | |
| 2015 | | 58.5 | |
| 2014 | | 58.3 | |
| Source: Tennessee Department of Health. Behavioral Risk Factor Surveillance System. | | | |
| * TennCare dental benefits are only provided to minors and orthodontists are not typically covered | | | |
| * Stigma and shame associated with accessing dental care. | | | |
| * Low socioeconomic groups, minorities, and those living in fluoride deficient communities are at a high risk for oral disease and are the least likely to be able to access dental care. | | | |
| Financial Resources | | | |
| Was there a time in the past 12 months when you needed to see a doctor but could not because of cost? (percent) | | | |
| | | Southwest | TN |
| 2016 | | no data | 12.4 |
| 2015 | | no data | 15.5 |
| 2014 | | no data | 15.5 |
| 2013 | | 20.5 | 17.6 |
| 2012 | | 17.5 | 19.2 |
| 2011 | | 21.3 | 20.9 |
| 2010 | | 18.4 | 17.7 |
| 2009 | | 20.8 | 17.5 |
| 2008 | | 16.9 | 15.9 |
| 2007 | | 14.5 | 16.5 |
| 2006 | | 14.0 | 14.8 |
| 2005 | | 14.5 | 13.3 |
| Individuals under 18 in poverty | | | |
| | | Region 6 | TN |
| 2017 | | 27.6 | 25.5 |
| 2016 | | 33 | 26 |
| 2015 | | 32 | 27 |
| 2014 | | 35 | 26 |

HARDEMAN COUNTY 2018

| | | |
|------|----|----|
| 2013 | 31 | 27 |
| 2012 | 34 | 26 |
| 2011 | 27 | 22 |
| 2010 | 26 | 23 |

Source: 2017 Tennessee Behavioral Health County and Region Services Data Book.

Uninsured Adults-Percent Population Under Age 65 without health insurance

| | Hardeman County | TN |
|------|------------------------|-----------|
| 2018 | 15 | 15 |
| 2017 | 18 | 17 |
| 2016 | 19 | 20 |
| 2015 | 16 | 16 |
| 2014 | 16 | 21 |
| 2013 | 16 | 21 |
| 2012 | 19 | 20 |
| 2011 | 15 | 19 |
| 2010 | 13 | 15 |

Percent Children Living in Single-Parent households

| | Hardeman County | TN |
|------|------------------------|-----------|
| 2016 | 56 | 36 |
| 2015 | 54 | 36 |
| 2014 | 51 | 36 |
| 2013 | 45 | 35 |
| 2012 | 47 | 35 |
| 2011 | 44 | 34 |

Source: County Health Rankings and Roadmaps 2014-2016.

Source: Robert Wood Johnson Foundation and University of Wisconsin Population Health Institute.

Source: Tennessee Department of Health. Behavioral Risk Factor Surveillance System.

All People in Poverty-Percent

| | Hardeman County | TN |
|-----------|------------------------|-----------|
| 2017 | 24.8 | 17.6 |
| 2010-2014 | 25.3 | 18.3 |
| 2009-2013 | 24.6 | 17.6 |

Source: 2017 Tennessee Behavioral Health County and Region Services Data Book.

Unemployment

HARDEMAN COUNTY 2018

| | Hardeman County | | | TN | | |
|--|-----------------|-------|-------|-------|-------|-------|
| 2018 | 6.3 | | | 4.8 | | |
| 2017 | 7.8 | | | 5.8 | | |
| 2016 | 9.4 | | | 6.7 | | |
| 16-Jul | 5.9 | | | 4.9 | | |
| Oct-14 | 9.0 | | | 7.1 | | |
| Sep-14 | 8.6 | | | 7.3 | | |
| Oct-13 | 10.8 | | | 8.1 | | |
| Source: County Health Rankings and Roadmaps 2016-2018. | | | | | | |
| Source: Tennessee Department of Labor & Workforce Development. | | | | | | |
| Heart Conditions | | | | | | |
| Death from Diseases of the Heart Per 100,000 | | | | | | |
| Rate | | | | | | |
| | Hardeman County | | | TN | | |
| | Total | White | Black | Total | White | Black |
| 2016 | 405.0 | 491.5 | 310.7 | 232.1 | 249.9 | 196.8 |
| 2015 | 280.1 | 340.1 | 195.3 | 237.5 | 252.8 | 190.1 |
| 2014 | 261.8 | 308.2 | 212.7 | 232.0 | 250.8 | 189.3 |
| 2013 | 228.0 | 269.5 | 173.4 | 226.7 | 245.1 | 183.1 |
| 2012 | 203.5 | 234.0 | 171.8 | 220.6 | 241.2 | 165.2 |
| 2011 | 242.1 | 262.4 | 225.0 | 221.0 | 239.7 | 175.3 |
| 2010 | 231.2 | 299.1 | 141.8 | 228.3 | 254.0 | 181.8 |
| 2009 | 199.1 | 277.3 | 102.7 | 228.0 | 241.1 | 185.8 |
| Source: Tennessee Department of Health Division of Policy, Planning, and Assessment. | | | | | | |
| Has a doctor, nurse, or other health professional ever told you that you had a heart attack or myocardial infarction? (percent) | | | | | | |
| | Southwest | | | TN | | |
| 2016 | no data | | | 5.6 | | |
| 2015 | no data | | | 6 | | |
| 2014 | no data | | | 5.7 | | |
| 2013 | 9.6 | | | 6.9 | | |
| 2012 | no data | | | 6.7 | | |
| 2011 | 4.9 | | | 5.2 | | |
| Has a doctor, nurse, or other health professional ever told you that you had angina or coronary heart disease? (percent) | | | | | | |
| | Southwest | | | TN | | |

HARDEMAN COUNTY 2018

| | | | | | | | |
|------|--|---------|--|-----|--|--|--|
| 2016 | | no data | | 5.4 | | | |
| 2015 | | no data | | 4.9 | | | |
| 2014 | | no data | | 5.6 | | | |
| 2013 | | 9.6 | | 6.3 | | | |
| 2012 | | 7.0 | | 7.2 | | | |
| 2011 | | 5.7 | | 5.0 | | | |

Source: Tennessee Department of Health. Behavioral Risk Factor Surveillance System.

High Blood Pressure

Deaths from Cerebrovascular Disease per 100,000

| | Hardeman County | | | TN | | |
|------|-----------------|-------|-------|-------|-------|-------|
| | Total | White | Black | Total | White | Black |
| 2016 | 55 | 63.2 | 47.1 | 52.8 | 55.1 | 52.6 |
| 2015 | 54.5 | 34.7 | 83.7 | 52.2 | 53.9 | 49.8 |
| 2014 | 73.2 | 75.3 | 74 | 50.7 | 53.1 | 48.4 |
| 2013 | 79.4 | 60.6 | 36.5 | 48.1 | 50.5 | 45.8 |
| 2012 | 71.6 | 73.6 | 72.3 | 46.3 | 48.6 | 42.9 |
| 2011 | 85.7 | 118.1 | 45.0 | 50.1 | 52.8 | 46.2 |
| 2010 | 58.7 | 58.5 | 62.1 | 50.1 | 54.3 | 45.6 |
| 2009 | 24.0 | 24.7 | 23.7 | 50.6 | 51.9 | 48.2 |

Source: Tennessee Department of Health Division of Policy, Planning, and Assessment.

Have you ever been told by a doctor, nurse or other health professional that you have high blood pressure? (percent)

| | Hardeman County | | TN |
|------|-----------------|--|------|
| 2016 | no data | | 41.8 |
| 2015 | no data | | 38.5 |
| 2013 | 40.1 | | 38.8 |
| 2012 | 46.9 | | 39.7 |
| 2011 | 42.9 | | 38.7 |
| 2010 | 35.6 | | 35.4 |
| 2009 | 36.4 | | 32.6 |
| 2007 | 30.2 | | 33.8 |
| 2005 | 35.6 | | 30.2 |

Are you currently taking medicine for your high blood pressure? (percent)

| | Hardeman County | | TN |
|------|-----------------|--|-------|
| 2016 | no data | | 84.55 |

HARDEMAN COUNTY 2018

| | | |
|------|------|------|
| 2013 | 93.0 | 83.9 |
| 2012 | 89.7 | 80.0 |
| 2011 | 85.1 | 78.3 |
| 2010 | 35.6 | 85.6 |
| 2009 | 89.0 | 81.8 |
| 2007 | 89.0 | 84.0 |
| 2005 | 91.3 | 83.4 |

Source: Tennessee Department of Health. Behavioral Risk Factor Surveillance System.

Influenza in rural West Tennessee

Sentinel Provider Influenza-Like Illness Surveillance Data

| | # Patients |
|---------------------|------------|
| 2017 (yearly total) | 28 |
| 2014-November | 35 |

Source: Tennessee Department of Health Sentinel Provider Influenza-like Illness Surveillance Summary.

Mental Illness

* Mental illness affected 1 in 5 adults in the United States in 2016.

* 18.3 percent or 44.7 million Americans age 18 and older suffer from a diagnosed mental illness.

* 10.4 million age 18+ or 4.2 percent of the population live with a serious, persistent mental illness. Of those, 6.7 percent received treatment.

* 51.5 percent of 18-25 year olds received treatment; 66.1 percent of 26-49 year olds received treatment; 71.5 percent of 50+ received treatment.

* Major depression disorder 6.7 percent of adults had an episode in 2016.

* Bi-polar disorder 2.8 percent of adults.

* Schizophrenia has a prevalence of 0.25-0.64 percent.

* Schizophrenia is one of the top 15 leading causes of disability worldwide.

* Panic disorder 2.7 percent of adults.

* Post traumatic stress disorder 3.6 percent of adults.

Source: National Institute of Mental Health (2018).

Average Number of Mentally Unhealthy Days Reported in Last 30 Days

| | Hardeman County | TN |
|------|-----------------|-----|
| 2018 | 4.8 | 4.5 |
| 2017 | 4.8 | 4.4 |
| 2016 | 5.0 | 4.9 |

HARDEMAN COUNTY 2018

Source: County Health Rankings and Road Maps 2016-2018.

Estimated number and percent of people over the age of 18 with serious mental illness in the past year.

| | |
|-----------|-----------|
| | TN |
| | Percent |
| 2015-2016 | 5 |
| 2014-2015 | 4.4 |
| 2013-2014 | 4.7 |

Estimated number and percent of people over the age of 18 with any mental illness in the past year

| | |
|-----------|-----------|
| | TN |
| | Percent |
| 2015-2016 | 19.6 |
| 2014-2015 | 19.9 |
| 2013-2014 | 20.4 |

Source: Behavioral Health Indicators for Tennessee and the United States 2018 Data Book.

Number of behavioral health safety net (BHSN) enrollments and and enrollments as a percentage of people over age 18 with a serious mental illness

| | Hardeman County | | TN |
|------|------------------------|---------|-----------|
| | # | Percent | Percent |
| 2017 | 90 | 1.9 | 3.4 |
| 2016 | 104 | 2.2 | 3.5 |
| 2015 | 109 | 2.3 | 4.0 |

Source: TN.gov Behavioral Health Safety Net Fast Facts 2015-2017.

Obesity

Percent of Adults who have a body mass index greater than 25-overweight or obese

| | Hardeman County | | TN |
|------|------------------------|--|-----------|
| 2018 | 40 | | 32 |
| 2017 | 38 | | 32 |
| 2016 | 39 | | 32 |
| 2015 | 36 | | 32 |

HARDEMAN COUNTY 2018

| | | |
|--|------------------------|-----------|
| 2014 | 37 | 32 |
| 2013 | 39 | 32 |
| 2012 | 39 | 32 |
| 2011 | 38 | 31 |
| 2010 | 38 | 31 |
| <u>Source:</u> County Health Rankings and Road Maps 2016-2018. | | |
| Adults who have a body mass index greater than 30-obese (percent) | | |
| | Southwest | TN |
| 2013 | 38.8 | 33.7 |
| 2012 | no data | 31.1 |
| 2011 | 33.4 | 29.2 |
| 2010 | 37.2 | 31.7 |
| <u>Source:</u> Tennessee Department of Health. Behavioral Risk Factor Surveillance System. | | |
| Sexually Transmitted Diseases | | |
| Ages 15-17 diagnosed with Chlamydia, gonorrhea, or syphilis | | |
| | Hardeman County | TN |
| Year | # | # |
| 2016 | 259 | 4081 |
| 2015 | 253 | 3830 |
| 2014 | 216 | 3988 |
| 2012 | 45.5 | 20.3 |
| 2010 | 23.8 | 18.9 |
| 2009 | 39.2 | 21.2 |
| 2008 | 46.3 | 21.2 |
| 2007 | 43.0 | 22.5 |
| 2006 | 52.5 | 21.2 |
| <u>Source:</u> TN-PRISM (Patient Reporting Investigating Surveillance Manager). | | |
| <u>Source:</u> Tennessee Commission on Children and Youth: KIDS COUNT: The State of the Child in Tennessee. | | |
| Substance Use | | |
| Heavy drinkers (Adult men having more than 14 drinks per week and adult women having more than 7 drinks per week) (percent) | | |
| | TN | |
| 2016 | 5.6 | |

HARDEMAN COUNTY 2018

| | | | | | | | | | |
|--|--|------------------------|--|--|--|-----------|--|--|--|
| 2015 | | 4.7 | | | | | | | |
| 2014 | | 4.1 | | | | | | | |
| Binge drinkers: (Males having five or more drinks on one occasion and females having four or more drinks on one occasion) (percent) | | | | | | | | | |
| | | | | | | | | | |
| | | Southwest | | | | TN | | | |
| 2016 | | no data | | | | 13.1 | | | |
| 2015 | | no data | | | | 10.3 | | | |
| 2014 | | no data | | | | 10.6 | | | |
| 2013 | | 4.3 | | | | 9.6 | | | |
| 2012 | | 6.1 | | | | 11.3 | | | |
| 2011 | | 8.2 | | | | 10.0 | | | |
| 2010 | | 4.7 | | | | 6.6 | | | |
| 2009 | | 12.7 | | | | 6.8 | | | |
| 2008 | | 8.5 | | | | 10.5 | | | |
| 2007 | | 6.3 | | | | 9.0 | | | |
| 2006 | | 11.0 | | | | 8.6 | | | |
| 2005 | | 9.9 | | | | 8.6 | | | |
| Source: Tennessee Department of Health. Behavioral Risk Factor Surveillance System, 2014-2016. | | | | | | | | | |
| During the past 30 days have you had at least one drink--beer, wine, malt beverage, liquor? (percent) | | | | | | | | | |
| | | | | | | | | | |
| | | Southwest | | | | TN | | | |
| 2013 | | 35 | | | | 37.5 | | | |
| 2012 | | 28.9 | | | | 38.6 | | | |
| 2011 | | 33.3 | | | | 37.5 | | | |
| 2010 | | 19.9 | | | | 28.2 | | | |
| 2009 | | 21.0 | | | | 25.1 | | | |
| 2008 | | 27.1 | | | | 33.6 | | | |
| 2007 | | 23.7 | | | | 32.9 | | | |
| 2006 | | 22.5 | | | | 29.5 | | | |
| 2005 | | 26.6 | | | | 34.7 | | | |
| Estimated number and percent of people over age 18 with a dependence on illicit drugs or alcohol in the past year | | | | | | | | | |
| | | | | | | | | | |
| | | Hardeman County | | | | TN | | | |
| 2010-2012 | | 1,699/7.91 | | | | 8.20 | | | |
| 2008-2010 | | 1,697/7.90 | | | | 8.04 | | | |
| 2006-2008 | | 1,695/7.85 | | | | 8.86 | | | |

HARDEMAN COUNTY 2018

| | | | |
|---|------------------------|------------|--|
| Number of unique TDMHSAS A&D Treatment Admissions as a percent of people over age 18 with a dependence on or abuse of illicit drugs or alcohol in the past year. | | | |
| | Hardeman County | TN | |
| Fy2014 | 49/2.88 | 3.95 | |
| Fy2013 | 54/3.18 | 3.53 | |
| Fy2012 | 105/6.19 | 3.52 | |
| Number and percent TDMHSAS funded treatment admissions with ALCOHOL identified as substance of abuse | | | |
| | Hardeman County | TN | |
| 2016 | 28/50.9 | 5,894/42.1 | |
| 2015 | 30/61.2 | 6,004/44.7 | |
| 2014 | 26/60.5 | 6,213/45.9 | |
| Fy2015 | 30/58.8 | 44.8 | |
| Fy2014 | 27/55.1 | 44.2 | |
| Fy2013 | 43/67.2 | 45.4 | |
| Fy2012 | 73/68.2 | 45.3 | |
| Number and percent TDMHSAS funded treatment admissions with CRACK COCAINE identified as substance of abuse | | | |
| | Region 6 | TN | |
| 2016 | 274/17.1 | 2,614/18.7 | |
| 2015 | 328/20 | 2,634/19.6 | |
| 2014 | 340/20.1 | 2,722/20.1 | |
| Number and percent TDMHSAS funded treatment admissions with HEROIN identified as substance of abuse | | | |
| | Region 6 | TN | |
| 2016 | 138/8.6 | 1,518/10.8 | |
| 2015 | 87/5.3 | 1,069/8 | |
| 2014 | 52/3.1 | 721/5.3 | |
| Number and percent TDMHSAS funded treatment admissions with MARIJUANA identified as substance of abuse | | | |
| | Hardeman County | TN | |
| 2016 | 26/47.3 | 5,327/38 | |
| 2015 | 24/49 | 5,206/38.7 | |
| 2014 | 23/53.5 | 5,362/39.6 | |

HARDEMAN COUNTY 2018

| | | | |
|---|------------------------|------------|--|
| Number and percent TDMHSAS funded treatment admissions with METH identified as substance of abuse | | | |
| | Hardeman County | TN | |
| 2016 | 20/36.4 | 2,869/20.5 | |
| 2015 | 9/* | 2,089/15.5 | |
| 2014 | 12/* | 1,849/13.7 | |
| Fy2015 | 9/* | 15.3 | |
| Fy2014 | 11/* | 11.6 | |
| Fy2013 | 18/* | 12 | |
| Fy2012 | <5/* | 10.1 | |
| Number and percent TDMHSAS funded treatment admissions with OPIOIDS identified as substance of abuse | | | |
| | Region 6 | TN | |
| 2016 | 25/59.5 | 5,792/41.4 | |
| 2015 | 15/* | 5,907/43.9 | |
| 2014 | 19/* | 5,859/43.3 | |
| Fy2015 | 21/41.2 | 43.2 | |
| Fy2014 | 11/* | 40.2 | |
| Fy2013 | 12/* | 28.4 | |
| Fy2012 | 33/30.8 | 39.1 | |
| Number and percent TDMHSAS funded treatment admissions with OTHER illicit drugs identified as substance of abuse | | | |
| | Region 6 | TN | |
| 2016 | 16/* | 208/1.5 | |
| 2015 | 15/* | 281/2.1 | |
| 2014 | 20/1.2 | 300/2.2 | |
| Fy2014 | 19/* | 38.6 | |
| Fy2013 | 47/44.8 | 37.3 | |
| Fy2012 | 20/37.0 | 36.9 | |
| Source: 2017 Tennessee Behavioral Health County and Region Services Data Book. | | | |
| Number of drug related arrests for adults over 18 in Hardeman County | | | |
| 2017 | 56 | | |
| 2016 | 47 | | |
| 2015 | 87 | | |
| Cy2013 | 116 | | |

HARDEMAN COUNTY 2018

| | | | | | | | | |
|--|--|------------------------|--------------|--------------|--|--------------|--------------|--------------|
| Cy2012 | | 169 | | | | | | |
| Cy2011 | | 135 | | | | | | |
| Source: NIBRS, 2015-2017. | | | | | | | | |
| Source: Tennessee Department of Mental Health and Substance Abuse Services. Tennessee Behavioral Health County Data Book 2014. | | | | | | | | |
| Teenage Pregnancy | | | | | | | | |
| Pregnancies Age 10-17 per 1,000 Females | | | | | | | | |
| | | Hardeman County | | | | TN | | |
| | | Total | White | Black | | Total | White | Black |
| 2016 | | 7 | 5.2 | 9.7 | | 5.4 | 4.5 | 9.7 |
| 2015 | | 6.7 | 1.6 | 13.2 | | 6 | 5.1 | 10.2 |
| 2014 | | 9.9 | 3.2 | 18.1 | | 6.3 | 5.5 | 10.7 |
| 2013 | | 7.2 | 9.5 | 5.1 | | 7.2 | 6 | 12.9 |
| 2012 | | 9.3 | 6.2 | 11.6 | | 8.3 | 7.0 | 14.0 |
| 2011 | | 10.7 | 6.2 | 16.0 | | 8.9 | 7.3 | 15.5 |
| 2010 | | 13.5 | 9.1 | 19.1 | | 10.0 | 8.3 | 17.9 |
| 2009 | | 7.4 | 2.7 | 12.2 | | 12.0 | 9.1 | 21.9 |
| Pregnancies Age 15-17 Per 1,000 Females | | | | | | | | |
| | | Hardeman County | | | | TN | | |
| | | Total | White | Black | | Total | White | Black |
| 2016 | | 14.7 | 9.6 | 21.1 | | 13.7 | 11.5 | 23.6 |
| 2015 | | 16 | 4.7 | 28.2 | | 15.2 | 13.2 | 24.7 |
| 2014 | | 27.5 | 9.4 | 47.2 | | 16.1 | 14.2 | 25.6 |
| 2013 | | 15.9 | 23.9 | 9.1 | | 18.2 | 15.6 | 30.8 |
| 2012 | | 26.1 | 17.5 | 32.7 | | 21.2 | 18.1 | 33.9 |
| 2011 | | 27.9 | 13.2 | 44.8 | | 22.4 | 18.9 | 36.5 |
| 2010 | | 32.6 | 22.7 | 46.8 | | 24.8 | 21.1 | 42.1 |
| 2009 | | 18.1 | 6.7 | 29.2 | | 29.6 | 22.4 | 55.5 |
| Source: Tennessee Department of Health. | | | | | | | | |
| Tobacco Use | | | | | | | | |
| Are you a current smoker? | | | | | | | | |
| | | Hardeman County | | | | TN | | |
| 2018 | | 24 | | | | 22 | | |
| 2017 | | 24 | | | | 22 | | |

HARDEMAN COUNTY 2018

| | | |
|------|------|------|
| 2016 | 28 | 24 |
| 2013 | 32.8 | 24.3 |
| 2012 | 29.0 | 24.9 |
| 2011 | 26.0 | 23.0 |
| 2010 | 24.9 | 20.1 |
| 2009 | 20.5 | 22.0 |
| 2008 | 23.0 | 23.1 |
| 2007 | 31.0 | 24.3 |
| 2006 | 25.5 | 22.6 |
| 2005 | 21.4 | 26.7 |

Source: County Health Rankings and Road Maps 2016-2018.

Source: Tennessee Department of Health. Behavioral Risk Factor Surveillance System.

Adult Smoking-Percent of Adults that report smoking at least 100 cigarettes

| | Hardeman County | TN |
|------|------------------------|-----------|
| 2016 | 28 | 24 |
| 2015 | 27 | 23 |
| 2014 | 27 | 23 |
| 2013 | no data | 23 |
| 2012 | no data | 24 |
| 2011 | no data | 24 |
| 2010 | no data | 25 |

Source: Robert Wood Johnson Foundation and University of Wisconsin Population Health Institute.

Traumatic Brain Injury

Hardeman County

| | |
|----------------------------|------|
| TBI related fatality count | 3 |
| Relative Rate | 1.18 |

Source: Traumatic Brain Injury Program Annual Report 2016-2017.

Key findings

* A total of 11,334 unique patients were reported to the TBI Registry during 2016. Of these, 7,458 presented with a TBI-related hospitalization (length of stay > 24 hours) and 843 were deceased.

* 54% of all TBIs were in the senior population (over 55 years).

* Overall, 58% of TBI patients were males. The number of male TBI patients exceeded females in each age group except in patients over 75 years.

HARDEMAN COUNTY 2018

| | |
|--|--|
| * Falls were the leading cause of TBI in Tennessee, followed by motor vehicle accidents. | |
| * Over 10% of concussion-related hospitalizations in 2016 were sports-related, but overall, sports-related concussions are likely underestimated. | |
| * The age-adjusted TBI hospitalization rate for Tennesseans in 2016 was 84.17 per 100,000, while the age-adjusted death rate was 9.11 per 100,000 residents. | |

HARDEMAN COUNTY HEALTH PROFILE

HARDEMAN COUNTY HEALTH COUNCIL PROFILE

2015 Populations

Estimates: 25,707

% White: 56.0%

% Black: 41.8%

Other: 2.2

<https://www.census.gov/quickfacts/>

Education Level:

High School Graduate:

76.8 %

Bachelor's Degree:

10.1%

<https://www.census.gov/quickfacts/>

Median Household Income: \$31,801

Persons in Poverty: 24.2%

Children in Poverty: 31.1%

Public Schools: 9

Students Receiving Free/Reduced Lunch: 68.1%

<https://tennessee.educationbug.org/>
<http://thecenter.kutcount.org>

2015 Teen Pregnancy Rates (age 10 – 17): *per 1000

State Rate: 6.0 /1000

County Rate 6.7/1000

<https://www.tn.gov/health/articles/statistics-pregnancy>

2015 Infant Mortality Rates:

State Rate: 7.0/1,000

County Rate: 3.8/1000

<https://www.tn.gov/health/articles/statistics-death>

2017 COUNTY HEALTH RANKINGS:

Health Outcomes: 80

Health Factors: 86

<http://www.countyhealthrankings.org>

Health Outcomes: represent how healthy a county is within the state. The healthiest county is ranked #1.

This rank is based on: how long people live and how healthy they feel while alive.

Health Factors: represent what influences the health of a county. This rank is based on: health behaviors, clinical care, social and economic factors, and physical environment factors.

Top Health Council Priorities:

1. Obesity
2. Physical Inactivity
3. Tobacco/Substance Abuse

Meeting Times:

Regular Meetings are Bi-Monthly: 3rd Wednesday of January, March, May, July, September, and November.

Community Partners:

The Hardeman County Health Council partners with area agencies/organizations, businesses, churches/fairth-based organizations, schools, colleges/universities, and local government to fulfill its mission to identify and prioritize health issues and problems while continually working to promote, protect, and improve the health of persons living and working in the county.

2015 Leading Causes of Death:

1. Heart Disease
2. Malignant Neoplasm
3. Chronic Lower Respiratory Disease
4. Cerebrovascular Disease
5. Diabetes Mellitus

*Deaths that are not attributed to one specific cause

<https://www.tn.gov/health/articles/statistics-death>

2017 Leading Behavioral Risk Factors:

1. Adult Obesity 38%
2. Physical Inactivity 33%
3. Adult Smoking 24%
4. Alcohol impaired driving death 9%

<http://www.countyhealthrankings.org>

TOBACCO SETTLEMENT PROJECTS:

During the 2016 year of funding, Hardeman County received \$18,711 plus an additional \$9,360 for 2017 to work with community partners to limit Second hand Smoke Exposure to Little Children, to reduce the number of pregnant women who smoke during pregnancy, and the Tennessee Teens Talk Tobacco (TT4) T4 which focuses on Youth Smoking Prevention.

During the 2016 year of funding, Hardeman County received \$18,711 plus an additional \$9,360 for 2017 to work with community partners to limit Second hand Smoke Exposure to Little Children, to reduce the number of pregnant women who smoke during pregnancy, and the Tennessee Teens Talk Tobacco (TT4) T4 which focuses on Youth Smoking Prevention.

During the 2016 year of funding, Hardeman County received \$18,711 plus an additional \$9,360 for 2017 to work with community partners to limit Second hand Smoke Exposure to Little Children, to reduce the number of pregnant women who smoke during pregnancy, and the Tennessee Teens Talk Tobacco (TT4) T4 which focuses on Youth Smoking Prevention.

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During the 2016 year of funding, Hardeman County received \$18,711 plus an additional \$9,360 for 2017 to work with community partners to limit Second hand Smoke Exposure to Little Children, to reduce the number of pregnant women who smoke during pregnancy, and the Tennessee Teens Talk Tobacco (TT4) T4 which focuses on Youth Smoking Prevention.

2017 Health Promotion Highlights

Hardeman Annual 5K
Extraordinary Baby Shower
Hardeman Health Expo
Hardeman Annual Color Run
Team Up! Tennessee Cancer
Prevention Grant

If you would like more information or if you are interested in joining the Hardeman County Health Council, please contact the Health Educator.

Hardeman County Health Educator:

Linda Woods

Phone | 731.658.5291
E-mail | linda.woods@tn.gov

Hardeman County Chair:

Ruby Kirby
Phone | 731-658-3100
E-mail | ruby.kirby@wth.org

HARDEMAN COUNTY HEALTH COUNCIL PROFILE (2017)



Hardeman County Health Council is a community-based organization that works to improve the health and well-being of the people of Hardeman County.

MISSION STATEMENT:

The Hardeman County Community Health Council acts as a working council whose purpose is to address health issues of significance, resource availability and allocation, and to develop strategies to improve health outcomes within the community.

Hardeman County Health Council Meeting Minutes

650 Nuckolls Road Bolivar, TN 38008

May 16, 2018

12:00-1:00p.m.

The meeting was called to order at 12:05 p.m. by council chair Ruby Kirby.

In Attendance: Linda Woods, Tamara Overstreet, Dawn Harris, Taylor Woods, Caleb Vivio, Sara Skinner, Barbara Bond, Casandra Bufford, Levi Smith, Debbie Armour, Rodger Jowers, Monroe Woods, Elise Gillespie, Ruby Kirby, Lisa Raines, Edward Bowers, Yolanda Wood

Reading and Approval of Minutes: There was a motion to approve the minutes by Levi Smith. There was a second on the motion by Lisa Raines. There were 18 members in favor none opposed, and none abstained. The minutes were approved as written.

Old Business

Tobacco Settlement Update –Linda Woods

Linda Woods, health educator, reported that Tennessee Stop Tobacco and Revolutionize Our New Generation (TNSTRONG) peer educators are gearing up for the TNSTRONG Conference to be held June 3-5, 2018 in Chattanooga, Tennessee. She informed council members that 4 students would be attending the conference in Chattanooga as well as Tennessee Teen Institute in Martin, Tennessee on June 17-22, 2018. Ms. Woods reported that 3 women are currently receiving diaper vouchers through the Baby and Me Program and 3 daycares in the county are working towards becoming Gold Sneaker certified.

Healthier TN-Linda Woods

Linda Woods discussed the Healthier TN Update. She shared information regarding upcoming activities in the county. Activities are listed below:

- a. **Walk Across TN-** Linda Woods informed council members that Walk Across TN would resume in July 2018 and encouraged members to get their teams ready. She stated that each team should consist of 8 -10 people. Ms. Woods stated that the (WAT) packages could be picked up at UT Extension Office or the Hardeman County Health Department.
- b. **Teen Pregnancy –**Linda Woods distributed updated Health Council Brochures and discussed County Health Rankings. Emphasis was placed on the county's current teen pregnancy rates. Ms Woods asked for suggestions to help deter this health concern. She stated that the Teen Pregnancy subcommittee is currently developing ideas for a youth summit to shed light on this issue as well as other concerns that target our youth. She asked for volunteers to submit ideas for the planned summit at the next council meeting.

New Business

TennderCare-Tamara Overstreet

Tamara Overstreet, informed council members about the TennderCare Program. She stated that Ms. Annie Smith is the county outreach worker and that she goes out into the schools and community to discuss health prevention and to encourage parents to make sure their children receive annual health screenings/exams.

Diabetes Grant- Ruby Kirby

Ruby Kirby, council chair, discussed the \$10,000 diabetes grant that Bolivar General Hospital received. She stated that the grant's focus would be on the underserved population. She informed members that each program participant would be reevaluated with a 6 month follow up screening. Ms. Kirby stated that the original kickoff was to be held in Whiteville on June 5, 2018 but had to be rescheduled due to inclement weather conditions. She stated that the council is currently working on setting a date for the Grand Junction kickoff event.

Cornerstone- Linda Woods

Linda Woods informed council members that as of June 30, 2018 Cornerstone would no longer be serving Hardeman County due to loss of funding. She informed council members that Ms. Sherry Boyd the program's Outreach Specialist stated that the curriculum, powerpoint and videos would be made available upon request to anyone who would like a copy.

Announcements

Linda Woods announced that the Back to School Stay in School event is July 28, 2018 from 12:00-2:00 p.m. at the old Boys and Girls Club located on Hope Street in Bolivar, Tennessee.

Dawn Harris announced that she is currently working to update Hardeman County Needs Assessment Surveys and that she may be contacting some of the council members for their input.

Adjournment

There was a motion to adjourn by Lisa Raines. There was a second on the motion by Elise Gillespie. The motion carried by an unanimous vote. The meeting was adjourned at 1:00 p.m.

Minutes submitted by Linda Woods, on May 31, 2018.

The next meeting will be July 18, 2018.