

Wilkes Community Health Needs Assessment

2025



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LETTER FROM THE HEALTH DIRECTOR

Dear Community Members, Partners, and Stakeholders,

On behalf of the Wilkes County Health Department (Wilkes Health), I am pleased to present the 2025 Community Health Needs Assessment (CHNA) report. This comprehensive assessment reflects our ongoing commitment to understanding and improving the health and well-being of every resident in our county.

The CHNA is a vital tool that helps us identify the most pressing health challenges facing our community. Through data analysis, community surveys, focus groups, and collaboration with local organizations, we have gained valuable insights into the social, economic, and environmental factors that influence health outcomes in Wilkes County.

Key findings from this year's assessment highlight both progress and persistent disparities. While we have seen improvements in areas such as childhood immunization rates and access to primary care, challenges remain in addressing chronic diseases, mental health, substance use, and the social determinants of health such as housing, education, and food security.

This report is not just a reflection of where we are—it is a call to action. It provides a roadmap for strategic planning, resource allocation, and collaborative initiatives that will guide our efforts over the next three years. We are committed to working alongside our community partners, healthcare providers, and residents to implement evidence-based strategies that promote health equity and improve quality of life for all.

I want to extend my deepest gratitude to everyone who contributed to this assessment. Your voices, experiences, and expertise are the foundation of this work. Together, we can build a healthier, more resilient Wilkes County.

Sincerely,

Rachel Willard
Health Director/Chief Executive Officer
Wilkes Health

ACKNOWLEDGEMENTS

Community Health Needs Assessment (CHNA) Steering Committee

The Community Health Needs Assessment (CHNA) Steering Committee was established to guide the development and implementation of the 2025 CHNA for Wilkes County. Comprising a diverse group of stakeholders, the committee included representatives from local hospitals, public health agencies, nonprofit organizations, schools, faith-based groups, and community advocacy organizations. This multidisciplinary team brought a wealth of knowledge, lived experience, and professional expertise to the process. The committee played a critical role in shaping the assessment framework, identifying priority health issues, ensuring inclusive community engagement, and reviewing findings to ensure they accurately reflected the needs and voices of all residents. Their collaborative leadership and commitment to health equity were instrumental in producing a comprehensive and actionable CHNA.

Name	Title	Organization
Rachel Willard	Health Director/Chief Executive Officer	Wilkes Health
Jared Belk	Health Education Supervisor	Wilkes Health
Taylor Stanley	Health Educator	Wilkes Health
Susan Bachmeier	Chief Nursing Officer / Facility Administrator	Atrium Health Wake Forest Baptist Wilkes Medical Center
Heather Murphy	Executive Director	The Health Foundation
Jenn Wages	Assistant Director	The Health Foundation
Kirstin Roberts	Program Manager	The Health Foundation
Dr. Joe Bullis	Executive Director	United Way of Wilkes
Michelle Shepherd	Executive Director	Wilkes Community Partnership for Children
Devin Lyall	Executive Director	Wilkes Recovery Revolution
Caroline Whitson	Executive Director	YMCA of Northwest North Carolina

Central Carolina Community Collaborative (CCCC)

The Central Carolina Community Collaborative (CCCC) launched in 2024, is funded by the Duke Endowment to amplify our local community voice through the Community Health Needs Assessment process. The members of the collaborative are dedicated to improving health outcomes, enhancing the quality of life in Central North Carolina and ensuring all community members can achieve their highest level of health. We bring together diverse voices including health systems, public health departments, academic institutions, United Way agencies and other community-based organizations to identify needs, share resources, and implement meaningful solutions.

The CCCC includes:



Regional CHNA Approach: The 2025 Community Health Needs Assessment (CHNA) for Wilkes County was developed through a collaborative, regionally coordinated process to ensure consistency, inclusivity, and local relevance. Planning began with joint meetings among public health departments, hospitals, and community organizations to establish shared goals, timelines, and tools. Secondary data were sourced from credible regional and national databases, while a culturally appropriate, accessible community health survey was developed and distributed across participating counties in both digital and paper formats. Wilkes County also conducted qualitative research through focus groups, stakeholder interviews, and listening sessions to capture local perspectives and highlight unique strengths and challenges. The assessment was further strengthened by shared data platforms, including the Atlas site and Metopio, which enhanced data visualization, transparency, and stakeholder engagement. Together, these efforts provided a robust foundation for identifying health priorities and guiding strategic planning.

EXECUTIVE SUMMARY

Purpose of the Community Health Needs Assessment

The purpose of the Community Health Needs Assessment (CHNA) is to systematically identify and analyze key health issues, disparities, and social determinants affecting the well-being of residents in Wilkes County. This assessment serves as a foundational tool for guiding public health planning, policy development, and community-based interventions over the next three years.

Methodology Overview

To conduct the 2025 Community Health Needs Assessment (CHNA), data was gathered through a combination of primary and secondary sources. Primary data collection included surveys and focus groups with community members and stakeholders representing public health, healthcare, education, business, and underserved populations to ensure diverse perspectives were represented. Secondary data were gathered from publicly available sources such as the U.S. Census Bureau, Centers for Disease Control and Prevention (CDC), state and local health departments, and hospital discharge data. These data provided insights into key health indicators, including chronic disease prevalence, behavioral health trends, access to care, and social determinants of health. The assessment process was guided by a steering committee composed of local leaders and subject matter experts, ensuring that the methodology was inclusive, equitable, and aligned with national best practices. Data were analyzed using descriptive statistics and thematic coding, and findings were validated through community feedback sessions to ensure accuracy and relevance.

Overview of Key Findings

In Fall 2025, Wilkes Health, in collaboration with the Wilkes County CHNA steering committee, used the primary and secondary data to identify the top health concerns in the county and select key priorities to focus on over the next few years. Several areas were identified as significant health concerns and needs in the county.

Access to Care

Access to healthcare services is a significant concern in Wilkes County. The county has a lower availability of primary care providers (PCPs) compared to the national average, with 31.8 PCPs per 100,000 residents. A significant portion of the population, 30.22%, has delayed medical care in the past year. While 91.07% of respondents have a primary care provider, the estimated population with unmet primary care needs is 3,617. Emergency department visits remain moderate, with 29,353 visits in 2023. Additionally, 7.6% of residents are uninsured, and 18.1% have delayed seeing a doctor due to cost. These barriers are exacerbated by economic challenges, with a median household income of \$50,438 and 16.4% of the population living below the poverty line. Transportation issues and limited public transportation options further hinder access to care. Community members have expressed a need for more mental health

professionals and providers who can offer treatment for substance use. Improving the number of healthcare providers and enhancing transportation options are essential steps to address these issues.

Chronic Disease

Chronic diseases pose a significant health burden in Wilkes County. Conditions such as asthma, coronary heart disease, diabetes, COPD, high blood pressure, and obesity are prevalent. For instance, 11.2% of adults have current asthma, and 34.4% have high blood pressure. The high prevalence of these diseases is linked to limited access to healthcare, lifestyle factors, and social determinants of health. Targeted interventions to promote healthy lifestyle choices and improve healthcare access are necessary to reduce the burden of chronic diseases.

Mental Health and Substance Use

Mental health and substance use are major concerns in Wilkes County. The prevalence of depression is alarmingly high, with 28.5% of adults affected. Residents report an average of 5.58 mentally unhealthy days per month. Substance use, particularly cigarette smoking, is prevalent, with a rate of 18.6%, significantly higher than state and national averages. The community has voiced the need for increased mental health services, especially for young children and caregivers. Addressing these issues through prevention and treatment programs is crucial.

Priority Health Needs

The Wilkes County CHNA team used the results of extensive secondary data collection and analysis and a large community health survey to establish the top three health priorities. As a result, Wilkes County selected the following health priorities to focus on in 2026-2028:

1. Access to Care
2. Chronic Disease and Obesity
3. Mental Health and Substance Use

Recommendations and Future Implications

The findings of this Community Health Needs Assessment highlight several critical areas that require immediate attention and action. Improving access to care, managing chronic diseases, and addressing mental health and substance use are top priorities for Wilkes County. By focusing on these priority areas, Wilkes County can work towards a healthier future for its community members.

Following the submission of this report, Wilkes Health will hold listening sessions and planning meetings to engage community partners, members, and stakeholders in identifying strategies and solutions for addressing the three health priorities. The results of the meetings will be consolidated into a set of priority recommendations to help the health department construct their community health improvement plan (CHIP). Wilkes Health will continue to analyze the data and context of each health priority to ensure a

proper selection of improvement activities. Once implementation of the CHIP has begun, the group will continue to monitor and collect health data, and adjust the plan as needed.

THE COMMUNITY HEALTH NEEDS ASSESSMENT PROCESS

Overview

The Community Health Needs Assessment (CHNA) is a comprehensive process – and document – undertaken by the local health department to identify and evaluate the health needs of the community it serves. The *process* involves the collection and analysis of a wide range of data, including demographic, socioeconomic and health statistics, environmental data, and professional and public opinion. The *document* is a summary of all the available evidence and is a useful data resource until the next assessment. The completed assessment serves as a foundational step in understanding the current health status, disparities, and determinants affecting residents, and it guides the development of strategies to improve population health outcomes.

The CHNA serves multiple purposes:

- **Informing Public Health Planning:** It provides data-driven insights that help prioritize health issues and allocate resources effectively.
- **Engaging the Community:** Through surveys, focus groups, and stakeholder interviews, the CHNA incorporates the voices and experiences of community members, ensuring that health initiatives are responsive and equitable.
- **Fulfilling Regulatory Requirements:** The CHNA meets state and federal mandates, including those outlined by the Internal Revenue Service (IRS) for nonprofit hospitals and public health accreditation standards (G.S. § 130A-34.1). Local public health agencies in North Carolina (NC) are required to conduct a Comprehensive CHNA at least once every three or four years.
- **Promoting Collaboration:** It fosters partnerships among healthcare providers, community organizations, local government, and residents to address complex health challenges collectively.



Wilkes Health partnered with several key organizations to conduct the Community Health Needs Assessment (CHNA). These partners include:

- Atrium Health Wake Forest Baptist Wilkes Medical Center
- The Health Foundation
- United Way of Wilkes
- Wilkes Community Partnership for Children
- Wilkes Family YMCA
- Wilkes Recovery Revolution

Each partner played a crucial role in the assessment process. Atrium Health Wake Forest Baptist Wilkes Medical Center offered clinical expertise and data. The Health Foundation provided resources, data, and facilitated community engagement. The United Way of Wilkes, Wilkes Community Partnership for Children, and Wilkes Family YMCA contributed insights into community health needs and stakeholder input. Wilkes Recovery Revolution provided expertise on substance abuse and recovery services.

These collaborators were chosen for their deep involvement in the community and their commitment to improving health outcomes in Wilkes County. Their diverse perspectives and expertise ensured a comprehensive understanding of the community's health needs.

In addition to local partners and stakeholders, the CHNA team coordinator worked with the Central Carolina Community Collaborative through a regionally coordinated process (listed previously in the Acknowledgements) to conduct a consistent, inclusive, and locally relevant assessment.

Data Collection Methods

Community Surveys

To engage Wilkes County, a brief survey was distributed February through April 2025 to residents and promoted via social media, websites, community partners and local events and engagement. The survey aimed to identify obstacles to ideal health and opportunities for improvement, resulting in over 7,400 surveys taken throughout the Central Carolina Community Collaborative footprint and 540 surveys locally. Convenience sampling was used for this survey, and participants were selected based on ease of access or availability. The data was then analyzed and compiled to understand the needs of the community.

Focus Groups

To gather community and stakeholder input, we conducted three focus groups between September and October 2025. Participants were recruited through outreach efforts by our partner organizations, ensuring a diverse representation of the community. The focus groups provided a platform for community members to share their experiences, concerns, and suggestions regarding health services and needs in Wilkes County.

Key themes and issues raised by community members included access to healthcare services, mental health support, substance abuse prevention, and the need for more health education programs. Participants emphasized the importance of affordable and accessible healthcare for all community members.

Metopio

Central Carolina Community Collaborative has a contract with Metopio to provide an internet-based data resource for their hospitals. This robust platform offers curated data from public and proprietary sources for information on health behaviors and health risks, health outcomes, health care utilization, demographic, and community-level drivers of health like economic, housing, employment, and environmental conditions. Data for each indicator is presented by race, ethnicity, and gender when the data is available (Metopio:

<https://public.metopio.io>). All data collected through Metopio was quantitative and included data comparisons between county, the state of North Carolina and United States data.

Limitations of the Assessment

Despite our efforts, we encountered some limitations and gaps in the data. Certain populations, such as minority groups and low-income individuals, were underrepresented in the focus groups. This underrepresentation may have skewed the data and limited our understanding of their specific health needs.

Additionally, there were challenges in obtaining comprehensive data on mental health and substance abuse services, as some providers were unable or unwilling to share detailed information. This lack of data may have affected our ability to fully assess the community's needs in these areas.

To address these limitations, we made efforts to reach out to underrepresented groups through additional outreach and engagement activities. We also acknowledged the potential biases and gaps in our findings, ensuring transparency in our reporting.

Overall, the methodology used in this CHNA aimed to provide a thorough and transparent assessment of the health needs in Wilkes County, combining community input with secondary data analysis to identify key health priorities and inform future health initiatives.

COMMUNITY PROFILE

County Description and History

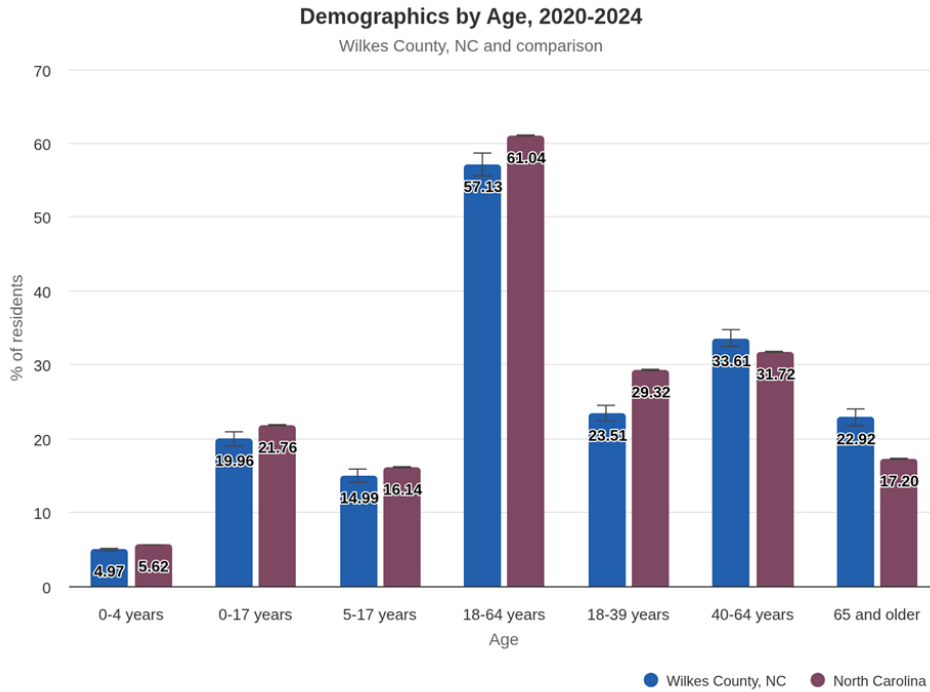
Wilkes County is a large, primarily rural county located in the foothills region of northwestern North Carolina (NC). It is bordered to the west by Ashe and Watauga counties, to the north by Alleghany and Surry counties, to the east by Yadkin County, and to the south by Caldwell, Alexander, and Iredell counties. Wilkes County is divided geopolitically into 21 townships. North Wilkesboro is the most populated city in the county, and the nearby town of Wilkesboro is the county seat. Most Wilkes County services are located in these two communities.

Wilkes County encompasses a land area of 755 square miles with 149 miles of paved roads, and 24% of Wilkes County residents live within 10 miles of a four-lane highway. Major highways include Interstate Highways 77 and 40 and US Highway 421. Several NC highways spread through the county from a central point in Wilkesboro. The Blue Ridge Parkway lies along the northwestern border of the county. US 421 and Interstate 40 provides access to the Piedmont Triad International Airport located 80 miles to the east in Greensboro. Interstate 77 provides access to the Charlotte International Airport located 80 miles to the south. Local air access is provided by the Wilkes County Airport. Wilkes County is not a major stop on any passenger railway system (the closest stop is Winston-Salem) and there are no interstate bus lines within the county that offer passenger services.

Wilkes County is home to several historic landmarks and cultural sites. The John A. Walker Center, Wilkes Playmakers, the Whippoorwill Academy and Village, and the Wilkes Art Gallery generate numerous visitors to the area. Wilkes County hosts the MerleFest, an acclaimed music festival found by Doc Watson, FaithFest, and other events and activities such as the Wilkes Agricultural Fair, the Brushy Mountain Apple Festival, and the North Wilkesboro Fireworks Celebration. In 2022, efforts to revitalize and reopen the North Wilkesboro Speedway began; officially returning to NASCAR in May 2023. Several natural parks and attractions are within Wilkes County as well. Hikers, mountain bikers, boaters, and fishermen visit the W. Kerr Scott Dam and Reservoir, named after William Kerr Scott (1896-1958) a past NC Governor and United States Senator who helped assist in the creation of the dam. Other notable physical features of Wilkes County include Stone Mountain Park and the Rendezvous Mountain Educational State Forest.

Demographic Characteristics

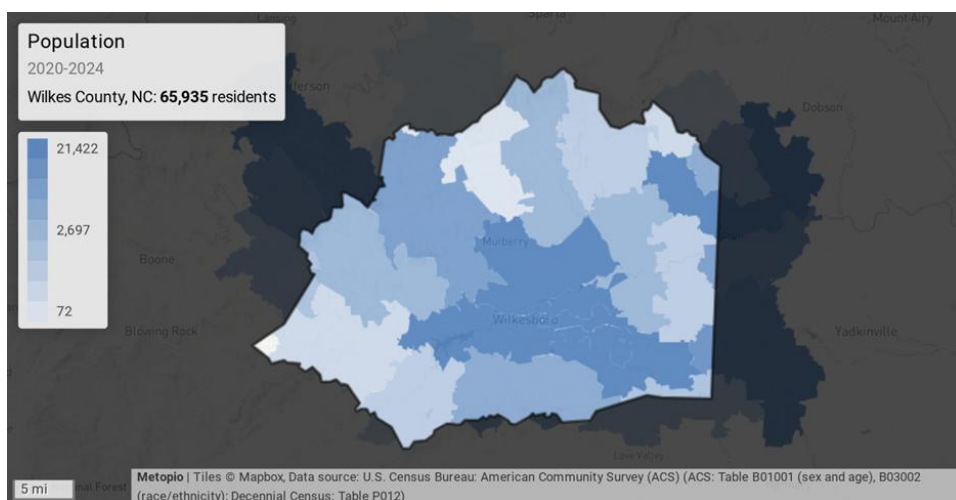
According to the 2020 Decennial Census count, Wilkes County is home to an estimated 65,969 residents. The population distribution in Wilkes County shows a higher proportion of residents aged 65 and older compared to the state average. This indicates an older demographic, which can have implications for healthcare needs and services. The county also has a higher percentage of residents aged 40-64 years than the state average, suggesting a significant middle-aged population. The gender distribution is nearly even, with females comprising 50.5% of the population.



Created on Metopio | metop.io/hg/fgw84 | Data sources: U.S. Census Bureau: American Community Survey (ACS) (Table B01001), U.S. Census Bureau:

Wilkes County has a predominantly white population, making up 85.72% of the residents, which is significantly higher than the state average of 60.0%. The Hispanic or Latino population is lower in Wilkes County at 7.45% compared to the state's 11.31%. Additionally, the county has a smaller proportion of Black residents at 3.64%, contrasting with North Carolina's 20.01%. This demographic makeup suggests a less diverse community compared to the state overall.

The population distribution in Wilkes County shows notable variation across different locations. North Wilkesboro has a population of 21,422, and Wilkesboro has 13,412 residents, indicating that these areas are the most populous within the county. Understanding the geographic distribution of the population can help in planning and delivering healthcare services more effectively.



Households with limited English proficiency are notably present in Wilkes County, with 7.5% of residents speaking a language other than English at home. This indicates a potential need for language support services. Additionally, non-citizens are present in both North Carolina and Wilkes County, though the percentage is higher in the state than in the county. This demographic information highlights the importance of culturally sensitive healthcare services and community engagement initiatives.

Economic Factors

Socio-Economic Factors

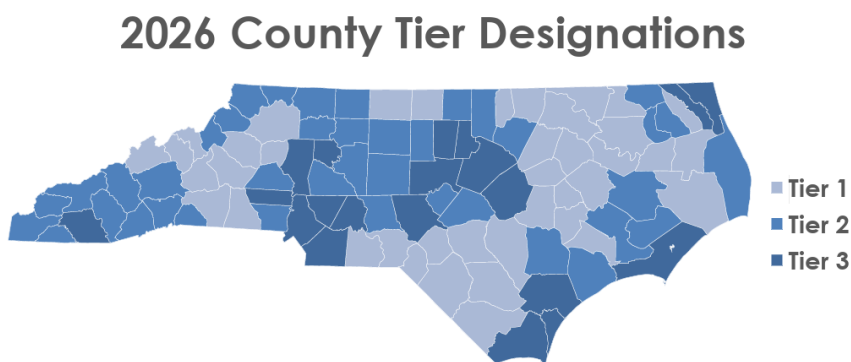
Socio-economic factors play a crucial role in shaping the health and well-being of a community. In Wilkes County, these factors significantly impact residents' quality of life and the local health system's ability to provide adequate care. High levels of economic hardship, limited access to education, and high unemployment rates contribute to a challenging environment for many community members. These conditions not only affect individual health outcomes but also place a strain on community resources and healthcare services. Key findings include:

- High school graduation rate: 79.16% of residents aged 25 or older have at least a high school degree, which is in the lowest 5% nationally.
- College graduation rate: Only 17.26% of residents aged 25 or older have a four-year college degree or higher, also in the lowest 5% nationally.
- Median household income: The median household income in Wilkes County is \$53,189, placing it in the lowest 5% nationally.
- Below 200% of poverty level: 39.55% of residents live below 200% of the federal poverty level, which is in the highest 10% nationally.

These indicators highlight significant economic challenges faced by the community, which can lead to poorer health outcomes and increased strain on healthcare services.

Additionally, the NC Department of Commerce annually ranks the state's 100 counties based on economic well-being and assigns a Tier Designation, where the 40 most distressed counties are Tier 1, the next 40 are Tier 2, and the 20 least distressed are Tier 3. In 2020 Wilkes County shifted from a Tier 2 designation to a Tier 1 designation and it remains there in 2026. With this designation, Wilkes County is eligible for

different economic incentives to prospective businesses compared to its Tier 2 neighboring counties.



Several factors contribute to the socio-economic challenges in Wilkes County. High unemployment rates and low labor force participation are significant barriers. Many residents struggle with the cost of living, including housing, food, and healthcare. The aging population and the burden of caregiving also add to the economic strain. Mental health challenges and the stress of caregiving further exacerbate these issues.

Community members have expressed significant concerns about the socio-economic conditions in Wilkes County. They highlighted the struggle to afford basic necessities such as food, utilities, and healthcare. The high cost of transportation and lack of insurance coverage add to the financial burden. Many residents are also caregivers for aging family members, which places additional stress on their finances and mental health. During a focus group, community members voiced concerns around: “Entry level employment, the cost of food, and increased expenses.” It was also noted that “budget increased for food and other household needs.” Folks are having to choose between food, utilities, medicine, and health care.

Grandparents and great-grandparents raising their grandchildren face additional challenges, especially when considering the future care of these children if caregivers pass away. The community also expressed concerns about the mental health impacts of these economic struggles, including the potential for post-traumatic stress disorder (PTSD) due to homelessness and the stress of caregiving.

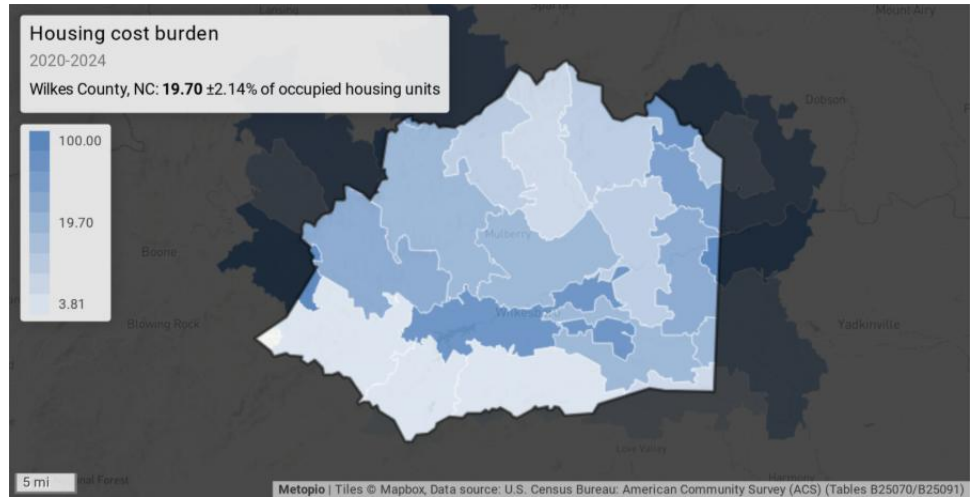
Certain groups in Wilkes County face greater socio-economic challenges. Low-income families, the elderly, and caregivers are particularly vulnerable. The high cost of living and limited access to affordable healthcare and education exacerbates these disparities. These groups often face barriers to accessing necessary resources, which can lead to poorer health outcomes and increased stress. Addressing these disparities requires targeted interventions to support low-income residents, improve access to education and healthcare, and provide resources for caregivers.

Housing

Housing is a critical determinant of health, directly impacting the quality of life and well-being of residents in Wilkes County. Stable and affordable housing can prevent health issues such as chronic stress, respiratory problems, and mental health disorders. Conversely, housing instability and poor housing conditions can exacerbate existing health problems and create new ones. In Wilkes County, the availability of affordable housing is a significant concern that affects the overall health of the community.

- Severe housing cost burden: 20.26% of households in Wilkes County spend more than 50% of their income on housing, which is in the lowest 5% nationally.
- Crowded housing: 1.92% of housing units in Wilkes County are crowded, which is lower than the state average of 2.24%.
- Vacant housing: 13.74% of housing units in Wilkes County are vacant, which is in the top quartile nationally.
- Owner-occupied housing: 73.68% of housing units in Wilkes County are owner-occupied, which is higher than the state average of 66.63%.

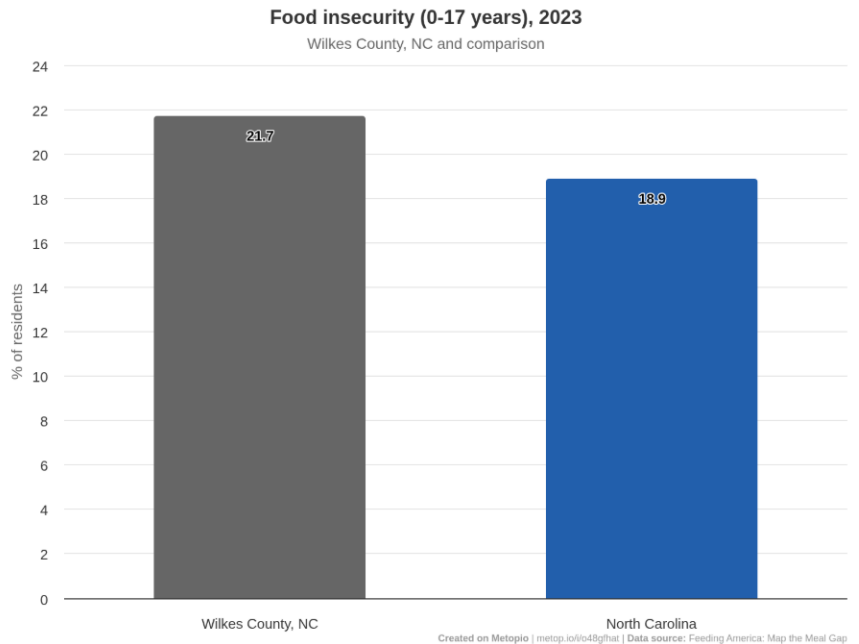
Several factors contribute to the housing challenges in Wilkes County. The high severe housing cost burden indicates that many residents are struggling to afford their homes, which can lead to financial stress and impact overall health. The relatively low rate of crowded housing suggests that while affordability is an issue, overcrowding is less prevalent. The high vacancy rate may indicate a surplus of housing that is unaffordable or undesirable, contributing to housing instability.



Access to Healthy Food

Access to fresh, healthy, and affordable food is a critical component of overall health and well-being. In Wilkes County, food insecurity affects a significant portion of the population, impacting their ability to maintain a healthy diet and leading to various health issues. This need is particularly pronounced among certain demographic groups, including Black/African American and Hispanic/Latino residents, who experience higher rates of food insecurity compared to the state average.

- Food insecurity: 17.2% of Wilkes County residents experience food insecurity, which is higher than the state average of 15.0%. This disparity is even more pronounced among Black/African American residents (27%) and Hispanic/Latino residents (26%).
- Free school lunch eligibility: A staggering 99.06% of students in Wilkes County are eligible for free school lunches, indicating a high level of economic need among families.
- Food stamps (SNAP): 14.51% of households receive SNAP benefits, reflecting the financial struggles many residents face in affording food.
- Households in poverty not receiving food stamps: 66.46% of households below the poverty line do not receive food stamps, highlighting a gap in support for those most in need.



Several factors contribute to the high rates of food insecurity in Wilkes County. Economic challenges, such as lower median household incomes and higher poverty rates, make it difficult for residents to afford adequate food. Access to grocery stores further exacerbates the issue, as residents may have to travel long distances to access fresh produce and other healthy food options. Additionally, the high eligibility rate for free school lunches underscores the widespread economic hardship faced by families in the county.

WILKES COUNTY DEMOGRAPHICS

AGE AND GENDER

Population:

65,969

Median Age: 45.3



Male

49.5%



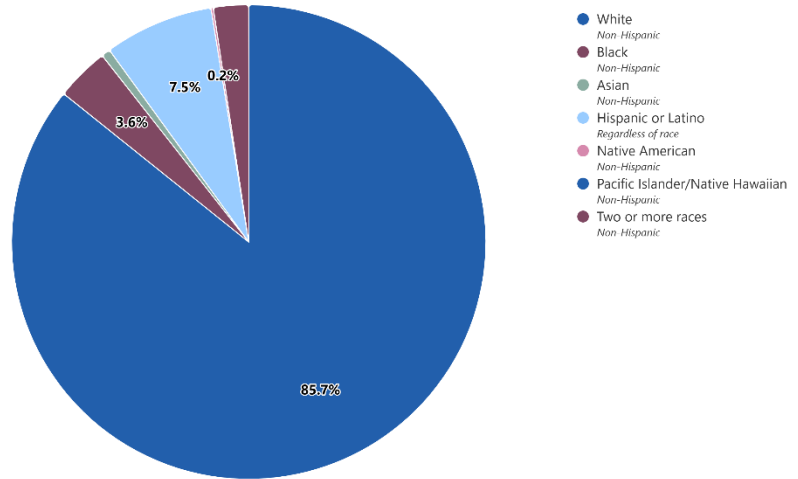
Female

50.5%

RACE/ETHNICITY

Population by Race/Ethnicity

Wilkes County, NC, 2020-2024



Created on Metopio | metop.io/v/59npxazi | Data source: U.S. Census Bureau: American Community Survey (ACS) (ACS: Table B01001 (sex and age), B03002 (race/ethnicity); Decennial Census: Table P012)
Population: Average population over the time period.

LANGUAGE AT HOME



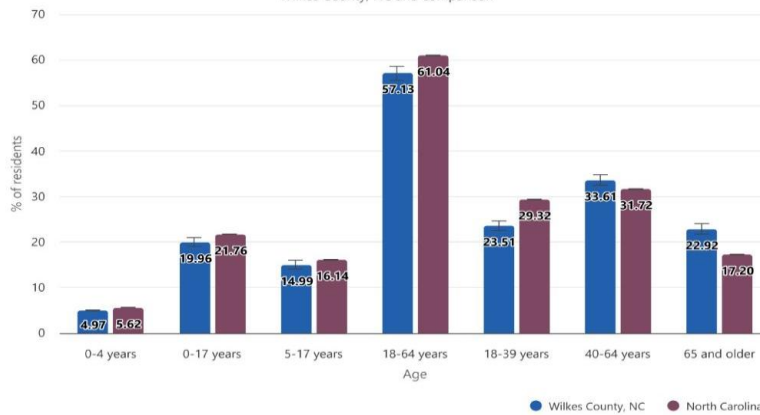
7.5% Language other than English spoken at home



5.9% Single-parent families
23.6% Seniors living alone

Demographics by Age, 2020-2024

Wilkes County, NC and comparison



Created on Metopio | metop.io/v/w92c2v1a | Data sources: U.S. Census Bureau: American Community Survey (ACS) (Table B01001); U.S. Census Bureau: Decennial Census (2020 data only)
Demographics: Percent of residents within each major demographic group. Use this to explore age, gender, and racial/ethnic breakdowns. This data is expressed as a percent to see a breakdown of all residents by count, see Population.

COMMUNITY DEMOGRAPHICS

POPULATION LIVING BELOW POVERTY LEVEL

16.7 percent of residents in families are living below the federal poverty level. The highest rate of poverty in Wilkes County by race and ethnicity is the Hispanic or Latino population at 28.8% and Black population at 27.3%.

25.6% Children 0-4 years of age

25.0% Children 5-17 years of age

14.9% Seniors 65 and older

EMPLOYMENT

Unemployment rate among residents that are 16 years of age or older.

5.0% Wilkes County

4.7% North Carolina

EDUCATION

Individuals with a high school degree or higher.



81.7% Wilkes County Residents

90.1% North Carolina Residents

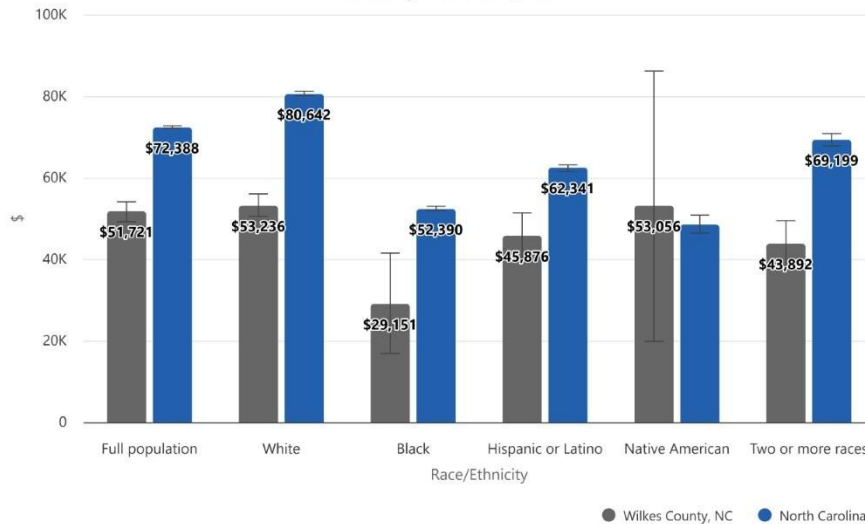


16.9% Wilkes County Residents

35.7% North Carolina Residents

Median household income by Race/Ethnicity, 2020-2024

Wilkes County, NC and comparison



MEDIAN HOUSEHOLD INCOME BY RACE/ETHNICITY

Wilkes County's median household income is \$51,721. North Carolina's median household income is \$72,388

Created on Metopio | metop.io/1z1vjdrsp | Data source: U.S. Census Bureau: American Community Survey (ACS) (Table B19013)

Median household income: Income in the past 12 months.

ASSESSMENT FINDINGS

Overview of Assessment Findings

Overall health encompasses an overarching evaluation of the population's physical and mental well-being, such as life expectancy, self-reported health, and overall quality of life indicators. It is a critical aspect of community health as it directly impacts residents' quality of life and the local health systems' capacity to provide adequate care.

The assessment highlighted several critical health issues. Access to care emerged as a significant concern, with limited availability of primary care providers and high rates of delayed medical care due to cost. The uninsured rate in Wilkes County, although lower than the state average, still poses a barrier to accessing necessary healthcare services. Mental health and substance use issues were also prominent, with high rates of depression and substance use disorders affecting the community. Chronic diseases, such as asthma, coronary heart disease, and COPD, are prevalent, contributing to high mortality rates and frequent hospital admissions.

As you look at the data in the next sections, it is important to remember that these issues are connected to many social and environmental factors that impact people's health.

Mortality

The State Center for Health Statistics of North Carolina assembles the top causes of death for various age groups. The table below encompasses the top eight for Wilkes County among all ages. The top leading causes of death for Wilkes County residents has been consistent for several years.

Disease Mortality (deaths per 100,000 residents)		
Diseases	Wilkes County	North Carolina
Heart Disease	288.9	197.0
Cancer	261.2	191.4
Chronic Lower Respiratory Diseases	112.4	48.8
COVID-19	99.7	55.7
Other Unintentional Injuries	74.4	59.1
Alzheimer's Disease	62.7	41.1
Cerebrovascular Disease	62.1	54.6
Diabetes	50.3	33.8

When reviewing the data around death rates, it is easy to see discrepancies between Wilkes County and North Carolina's rates. The chart above shows that Wilkes County is experiencing certain causes of death at a much greater, alarming rate in comparison to North Carolina and the United States.

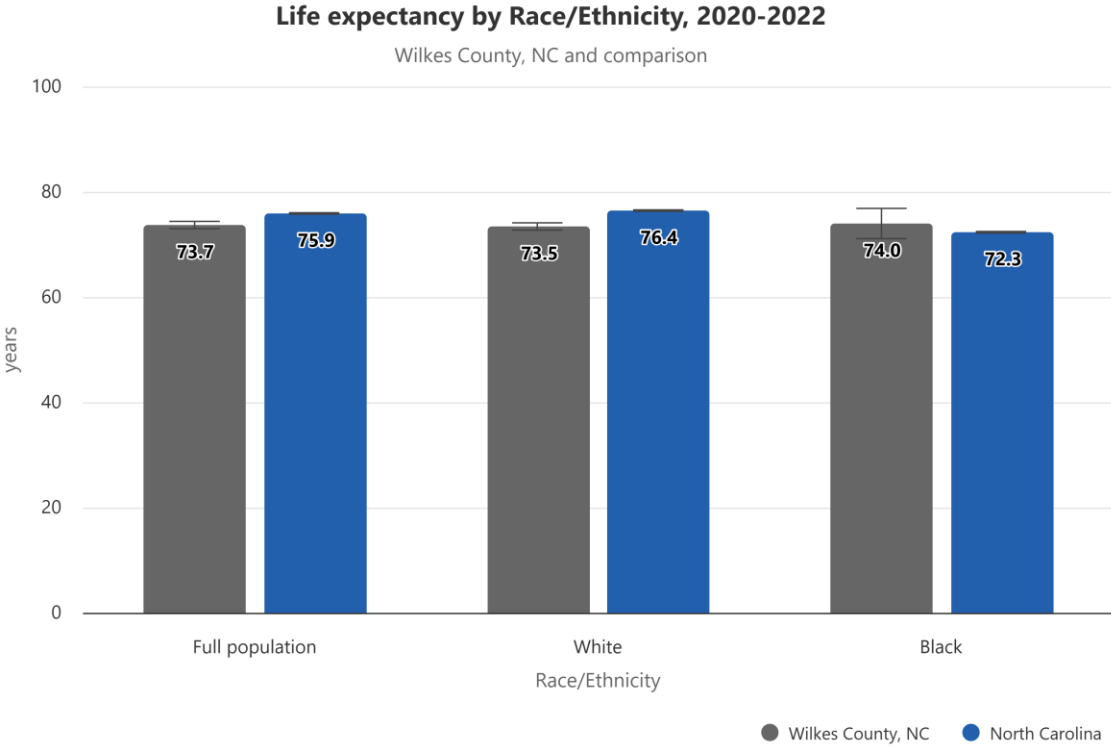
- **Cancer Mortality:** The cancer mortality rate in Wilkes County is 261.2 deaths per 100,000 residents, reflecting a need for improved cancer prevention and treatment services.

- **Chronic Lower Respiratory Disease Mortality:** The mortality rate due to chronic lower respiratory disease is significantly higher in Wilkes County at 112.4 deaths per 100,000 residents compared to the state average. This suggests a need for targeted public health interventions to address respiratory health issues.
- **Diabetes Mortality:** The diabetes mortality rate in Wilkes County is 50.3 deaths per 100,000 residents, which is higher than the state average. This highlights the importance of diabetes prevention and management programs.
- **Heart Disease Mortality:** Heart disease mortality in Wilkes County is 288.9 deaths per 100,000 residents, higher than the state average, indicating a significant health concern that requires attention.

Life Expectancy

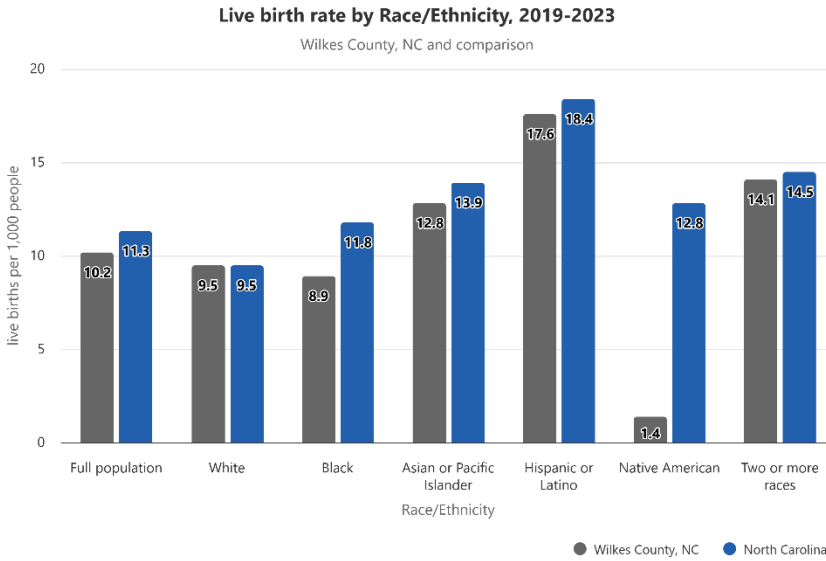


In Wilkes County, life expectancy for the full population is 73.7 years, slightly below the state average of 75.9 years. Black residents in the county have a life expectancy of 74.0 years, which is higher than the state average of 72.3 years for this group. White residents in Wilkes County have a life expectancy of 73.5 years, notably lower than the state average of 76.4 years for this group. This indicates a need for improved health interventions and support systems to increase life expectancy.



Created on Metopio | metopio.io/s4p2owu1 | Data sources: Centers for Disease Control and Prevention (CDC): National Center for Health Statistics, U.S. Small-Area Life Expectancy Estimates Project (USALEEP) (2010-2015), Center for Urban Population Health (Derived from death counts by age and Life expectancy: Life expectancy at birth, or at the start of the specified age bracket. This is equal to the average age at death of all people born in this place, or all people who have lived to the start of the specified age bracket.

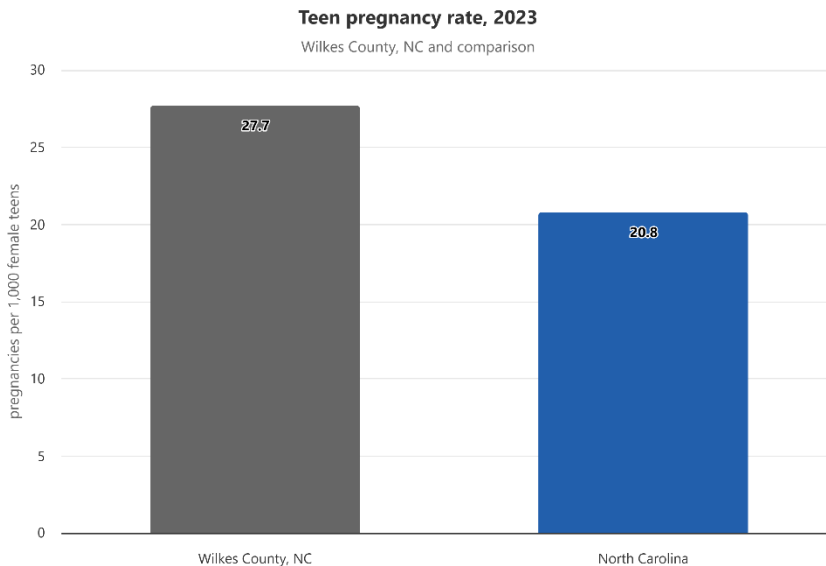
Maternal and Child Health



Created on Metopio | metop.io/f/uvqib5428 | Data source: North Carolina State Center for Health Statistics (NC SCHS); North Carolina Vital Statistics, Volume 1: Population, Births, Deaths, Marriages, Divorces
Live birth rate: Live births in the past year per 1,000 people. A live birth is defined as the full delivery or removal of a fetus from its mother, regardless of the pregnancy's duration, where the fetus exhibits signs of life after separation.

Maternal and child health is a crucial aspect of community well-being, affecting the long-term health outcomes of both mothers and children. In Wilkes County, this issue is particularly important due to the unique demographic and socioeconomic characteristics of the area. Ensuring that mothers and children have access to quality healthcare services is essential for promoting healthy development and preventing long-term health issues.

Data shows that the Wilkes County live birth rate is slightly lower compared to the state of North Carolina; with the highest live birth rates in Wilkes County occurring among Hispanic women.

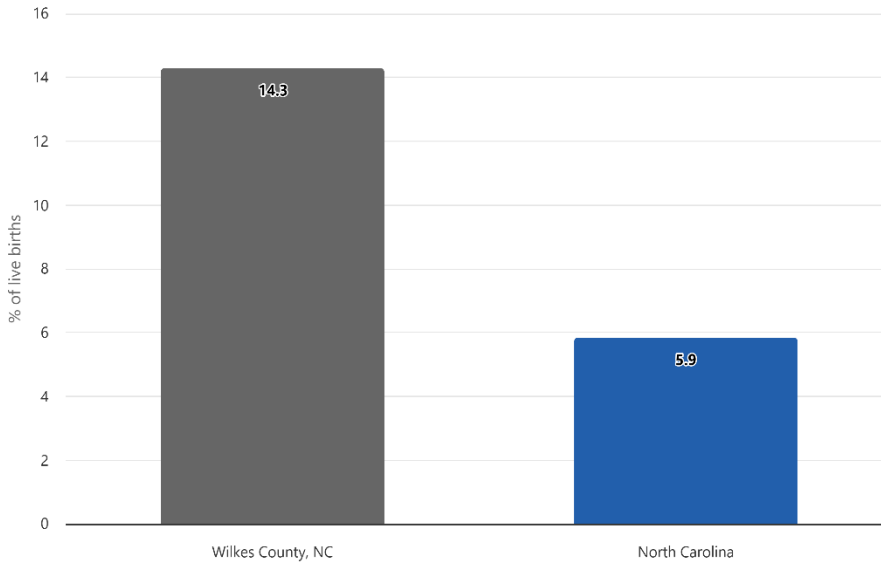


Created on Metopio | metop.io/f/cvwdqz8u | Data source: North Carolina State Center for Health Statistics (NC SCHS); North Carolina Reported Pregnancies
Teen pregnancy rate: The number of pregnancies per 1,000 female teens of reproductive age (15 to 19).

Teen Pregnancy Rate: The teen pregnancy rate for Wilkes County, 27.7 per 1,000, is notably higher than the overall rate for North Carolina, 20.8 per 1,000. This indicates a significant disparity in teen pregnancy rates within the state. Addressing this issue in Wilkes County could help reduce the overall rate for North Carolina.

Smoking during pregnancy, 2020-2022

Wilkes County, NC and comparison



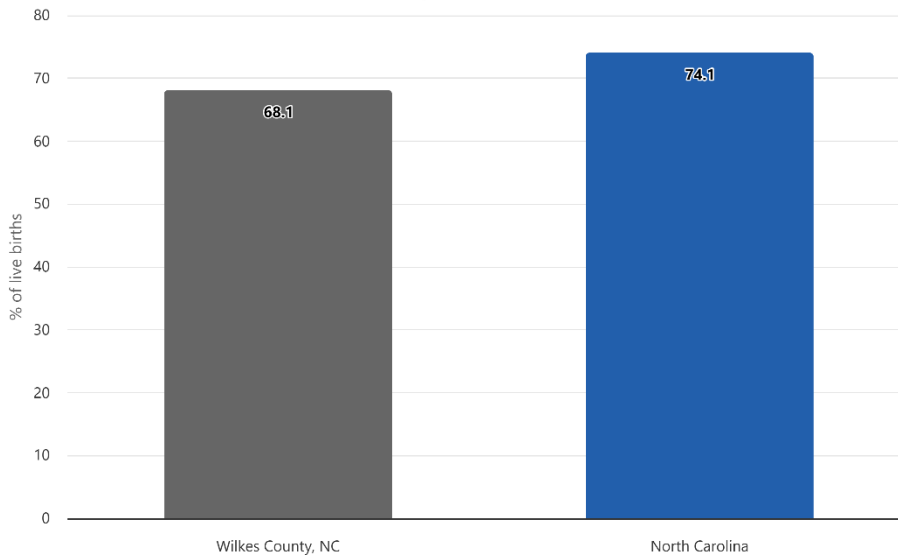
Created on Metopio | metop.io/f/fsvsopzi | Data source: HRSA's Maternal and Child Health Bureau (MCHB): Maternal and Infant Health Mapping Tool
Smoking during pregnancy: Estimated percentage of live births where maternal cigarette smoking was reported during any trimester of pregnancy.

Smoking during pregnancy is an unhealthy behavior that may have negative effects on both the mother and the fetus. Smoking can lead to fetal and newborn death and contribute to low birth weight and pre-term delivery. Smoking during pregnancy is notably higher in Wilkes County compared to the overall rate in North Carolina. This suggests a significant local health concern that may require targeted

intervention.

Prenatal care in first trimester, 2020-2022

Wilkes County, NC and comparison



Created on Metopio | metop.io/f/fbwctgtt | Data source: HRSA's Maternal and Child Health Bureau (MCHB): Maternal and Infant Health Mapping Tool
Prenatal care in first trimester: Estimated percentage of live births with first trimester prenatal care.

Good pre-conception health and early prenatal care can help assure women the healthiest pregnancies possible. The percent of pregnant women in Wilkes County who received early prenatal care (i.e., prenatal care in the first three months of their pregnancies) is notably higher in North Carolina compared to the national average. Wilkes County, NC, shows a lower rate of early prenatal care

compared to the state average. This disparity highlights the need for targeted healthcare interventions in specific regions.

Child Opportunity Index 3.0: The index score for Wilkes County is 11, indicating a Very Low rating. This score is in the second quartile nationally, suggesting that the neighborhood resources and conditions for children's healthy development are significantly below average.

Low birth weight can result in serious health problems in newborns (e.g., respiratory distress, bleeding in the brain, and heart, intestinal and eye problems), and cause lasting disabilities (developmental delays, cerebral palsy, and vision and hearing loss) or even death.

The data indicates that the rate of low birth weight (less than 5.5 pounds) in Wilkes County, NC, is higher than the state average for North Carolina. Specifically, Wilkes County has a low-birth-weight rate of 10.1%, compared to the state's average of 9.4%. This suggests that Wilkes County may face greater challenges related to low birth weight than the rest of the state.

Several factors contribute to the challenges faced in maternal and child health in Wilkes County. The Child Opportunity Index score indicates that many children in the county do not have access to the resources necessary for healthy development. This includes access to quality preschool programs, as highlighted by the community. Community members have expressed concerns about the availability of services for young children and the mental health challenges faced by this age group. One community member noted, "Not many places take kids under 5 and there is a lack of preschool programs. The three Head Start centers located in Wilkes, have a little over 100 spots for our children." This indicates a significant gap in early childhood education and care services, which are essential for supporting healthy child development.

Certain groups in Wilkes County face greater barriers to accessing maternal and child health services. The Child Opportunity Index score of 11 highlights that many children in the county do not have access to the necessary resources for healthy development. This disparity is particularly pronounced in rural areas, where access to healthcare services and educational opportunities may be limited.

The findings indicate a need for targeted interventions to improve maternal and child health in Wilkes County. Increasing access to early childhood education and care services, as well as mental health support for young children, are critical steps to address these challenges. Collaborating with local organizations and stakeholders to develop and implement these interventions can help improve health outcomes for mothers and children in the community.

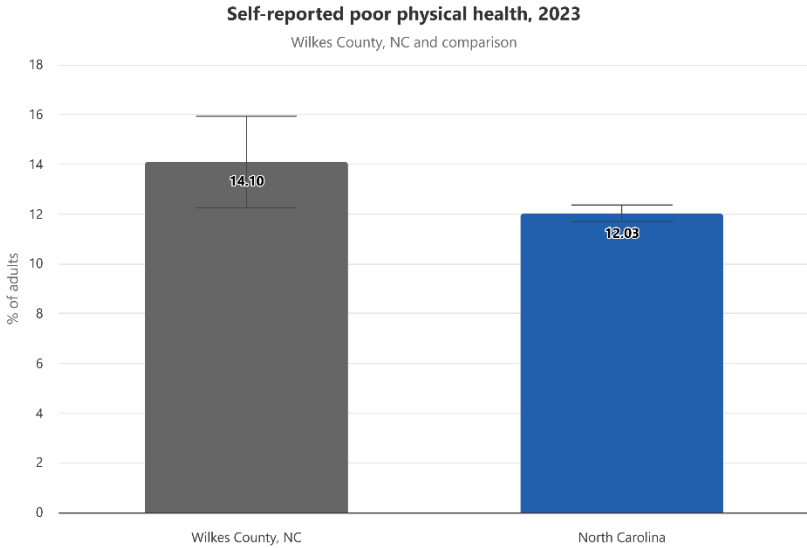
Morbidity

Chronic Diseases

Chronic diseases are long-term health conditions that can significantly impact the quality of life for residents in Wilkes County. These diseases, such as heart disease, diabetes, and chronic obstructive pulmonary disease (COPD), often develop slowly due to a combination of genetic, environmental, and lifestyle factors. Managing these conditions requires ongoing medical care and can complicate the management of other health issues. In Wilkes County, chronic diseases are a major health concern, contributing to high mortality rates and frequent hospital admissions. From review of the secondary data, statistics show the following:

- Current asthma: 11.2% of adults in Wilkes County have current asthma, higher than the state average of 9.9%.
- Coronary heart disease: 6.4% of adults in Wilkes County have been diagnosed with coronary heart disease, with rates varying across different areas.
- Diagnosed diabetes: 8.1% of adults in Wilkes County have been diagnosed with diabetes, lower than the state average of 10.8%.
- Chronic obstructive pulmonary disease (COPD): 8.2% of adults in Wilkes County have been diagnosed with COPD, significantly higher than the state average of 6.1%.
- High blood pressure: 34.4% of adults in Wilkes County have high blood pressure, slightly higher than the state average of 33.7%.
- Obesity: 31.3% of adults in Wilkes County are obese, slightly higher than the state average of 30.9%.
- Diagnosed stroke: 3.5% of adults in Wilkes County have been diagnosed with a stroke, with rates slightly higher than the state average.

Several factors contribute to the high prevalence of chronic diseases in Wilkes County. Chronic diseases such as heart disease, cancer, and diabetes are leading causes of death, particularly among those under the age of 75. Many of these chronic conditions can be prevented with healthy habits, but access to resources such as money, education, and support plays a crucial role in preventing these diseases. As indicated by results of the 2025 Wilkes County Community Health Survey, 14.1% of respondents self-reported that they have poor physical health, compared to North Carolina at 12.0%.



Created on Metapio | metap.io/zcfscqphs | Data source: Centers for Disease Control and Prevention (CDC); PLACES
 Self-reported poor physical health: Percent of resident adults aged 18 and older who report 14 or more days during the past 30 days during which their physical health was not good.

Self-reported poor physical health in Wilkes County is notably higher than the state average. This suggests a significant disparity in health outcomes within the county compared to the broader state.

Limited access to healthcare providers can result in delayed diagnoses and inadequate management of these conditions. The cost of healthcare and health insurance can also be a significant barrier, even for those with higher incomes. Additionally, lifestyle factors such as diet,

exercise, and smoking play a crucial role in the development and management of chronic diseases. In Wilkes County, the high rates of COPD and high blood pressure highlight the need for targeted health interventions and public health initiatives to address these issues.

Residents and stakeholders have expressed concerns about the impact of chronic diseases on the community. One community member noted, "Loopholes in insurance coverage. Even with insurance, you

have to pay for healthcare costs and supplies out of pocket until a deductible is met." This highlights the financial burden that chronic diseases can impose on individuals and families. Another concern is the high mortality rate from heart disease in Wilkes County, which is significantly higher than the state average. The top three leading causes of death under the age of 75 are chronic diseases: heart disease, cancer, and chronic lower respiratory disease.

Community members also expressed concerns about health outcomes and the need for better support systems. One resident highlighted the importance of workplaces supporting wellness programs and allowing staff to lead initiatives. Another pointed out the high diabetes mortality rate in the Wilkes Medical Center Health service area, emphasizing the need for better diabetes management and prevention strategies.

Certain groups in Wilkes County are more affected by chronic diseases than others. Low-income individuals and those without stable housing face greater challenges in managing their health due to limited access to healthcare and healthy food options. Additionally, racial and ethnic minorities may face disparities in healthcare access and outcomes.

The findings on chronic diseases in Wilkes County highlight the need for targeted interventions to improve health outcomes. Increasing access to affordable healthcare, promoting healthy lifestyle choices, and addressing social determinants of health are crucial steps in reducing the burden of chronic diseases. Many chronic diseases can be prevented with healthy habits, but access to resources such as healthy food and stable housing can be a challenge for some residents.

Collaboration between local healthcare providers, community organizations, and public health officials can help align resources and prioritize efforts in working towards reducing the prevalence of chronic diseases while improving the overall health and well-being of our residents.

Communicable Disease

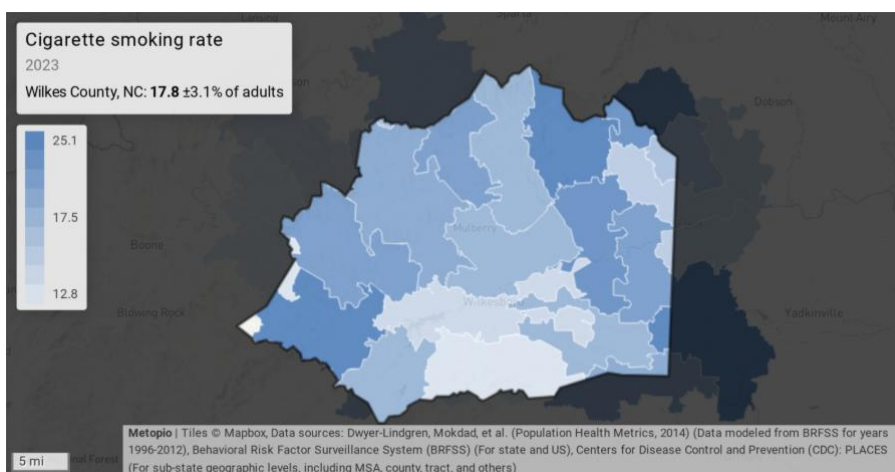
Sexually transmitted infections (STIs) are the most common communicable diseases in Wilkes County. Chlamydia is the most prevalent STI, followed by gonorrhea. Wilkes County incidence rates for both chlamydia and gonorrhea were consistently lower than comparable rates for the state overall from 2021 through 2024. In 2020 the Wilkes County incidence rate for chlamydia infection was 250.95 new cases per 100,000 population, less than half the comparable chlamydia rate of 597.08 in North Carolina. In 2024 the gonorrhea incidence rate in Wilkes County was 22.0 new cases per 100,000 population, the state rate showed a decrease of 44.5 in new cases. HIV incidence is highly variable in Wilkes County and is typically based on fewer than five cases per year. However, in 2024 Wilkes County incidence rates increased by 3.5 putting our rate at 5.2, the highest rate since 2022. Even with the increased rate to 5.2 for 2024, Wilkes remained lower than North Carolina's rate of 14.6.

Health Behaviors

Health behaviors are the actions and habits that individuals engage in, which can either promote or compromise their physical, mental, and social well-being. These behaviors encompass a wide range of

activities, including diet, exercise, substance use, and preventive screenings and vaccines. Health behaviors play a critical role in the overall health and quality of life of Wilkes County residents. The community's health behaviors are influenced by various factors, including access to healthcare, environmental factors and socioeconomic conditions. Socioeconomic conditions, such as income and education levels, play a significant role. People with more money, education, and support tend to live longer and avoid chronic conditions. However, those without these resources often face worse health outcomes. Limited access to healthy food, busy schedules, and mental health struggles can make it difficult for individuals to maintain healthy habits. Additionally, transportation is a significant issue, with many residents lacking access to reliable transportation and having a driver's license. At a glance, key findings include:

- Excessive Drinking: 19.97% of adults in Wilkes County report excessive drinking, which is higher than the state average.
- Binge Drinking: 16.7% of adults engage in binge drinking, reflecting a significant local issue.
- Smokeless Tobacco Use: 5.13% of survey respondents use smokeless tobacco, with usage rates highest among those aged 40-64 years.
- Tobacco Use: 9.31% of the full population uses tobacco, with males having a significantly higher rate (14.96%) compared to females (6.71%).
- Youth Tobacco Use: High school students in Wilkes County report a vaping rate of 36.9%.
- Cholesterol Screening: 83.6% of adults have had their cholesterol checked within the past five years, indicating a strong engagement in preventive health measures.
- Colorectal Cancer Screening: 57.5% of adults aged 50-75 have had colorectal cancer screenings, which is lower than the state average (61.7%).
- Mammography Use: 75.8% of female adults aged 50-74 have had a mammogram within the past two years.



Residents and stakeholders have expressed their concerns about health behaviors in Wilkes County. One respondent stated that being a caregiver can be stressful. Another respondent expressed that doctors and providers should listen to patients and hear

their concerns. The community highlighted the need for a bridge between care disciplines and more "warm handoffs" to ensure continuity of care. Providers often focus on the number of patients seen, prioritizing quantity over quality.

It's important to understand that making healthy choices isn't always easy – and it's not equal for everyone. Certain groups in Wilkes County face more significant barriers to maintaining healthy behaviors. Low-

income individuals, those with limited education, and residents of rural areas often have worse health outcomes and are more likely to engage in unhealthy behaviors.

To overcome obstacles to healthy behaviors, it is vital for healthcare providers, community organizations, and local government to collaborate effectively. Enhancing access to health screenings, encouraging healthy lifestyle choices, and addressing socioeconomic inequalities are pivotal actions necessary to boost the health and well-being of Wilkes County residents. By concentrating on these priorities, the community can strive towards a healthier future for everyone.

Physical Activity

The built environment, encompassing the human-made surroundings in which people live, work, play, and pray, has a crucial role in public health outcomes. In Wilkes County, the built environment significantly influences physical activity levels, access to resources, and exposure to environmental hazards.

Understanding these factors is essential for improving community health and addressing the needs of priority populations. Findings related to physical activity encompass:

- Access to Exercise Opportunities: 66.5% of the population has access to exercise opportunities, which is lower than the national average of 84.5%.
- No Exercise: 22.8% of adults report no exercise, higher than the state average of 19.7%.
- Green Space Proximity: 51.1% of the area is within 1 mile of green space, reflecting moderate access to green spaces.
- Walkability Index: The walkability index is 4.5, suggesting a less walkable environment.

Lower access to exercise opportunities and green spaces may discourage physical activity, affecting overall health. Additionally, the moderate walkability indicates an area for improvement in creating a healthier environment.

Community members have expressed concerns about the built environment's impact on health. One resident noted, "We have a great greenway, and safe areas to walk." However, others highlighted challenges such as transportation issues which limits community members access to parks and the greenway system located within Wilkesboro and North Wilkesboro city limit. These insights underscore the need for targeted interventions to improve the built environment.

The findings highlight the need for collaborative efforts to improve the built environment in Wilkes County. Opportunities for intervention include expanding public transportation, increasing access to exercise opportunities, and enhancing green spaces. By addressing these areas, the community can create a healthier environment that supports the well-being of all residents.

Mental Health and Substance Use

Mental health and substance use are critical components of community health, affecting residents' quality of life and the local healthcare system. These issues can lead to significant challenges, including social isolation, chronic stress, and increased healthcare needs. Addressing mental health and substance use is essential for promoting overall well-being and reducing long-term health disparities.

- Depression: The prevalence of depression among adults in Wilkes County is 28.5%, which is higher than the state average of 24.8%.
- Poor Mental Health Days: Self-reported poor mental health in Wilkes County is 19.5%, which is higher than the state average of 17.35%.
- Opioid Treatment Providers: Wilkes County's rate for opioid treatment providers is 11.5 per 100,000 which is lower than North Carolina's rate of 14.7.
- Overdose Mortality: The overdose mortality rate in Wilkes County is 30.2 per 100,000 residents in 2024, compared to the state rate of 26.6.
- Alcohol-Related Mortality: Wilkes County's alcohol-related mortality rate from 2019-2023 is 21.0 per 100,000, higher than North Carolina's rate of 11.6.
- Foster Care due to Parental Substance Use: In 2023, 62.4% of children in Wilkes County foster care was due to parental substance use, which is higher than the state at 45.2%.

Several factors contribute to the mental health and substance use challenges in Wilkes County. The higher prevalence of depression and poor mental health days suggests a significant burden on residents. Additionally, data indicates that North Carolina has a significant number of mental health providers, with a total of 62,172. Wilkes County has a smaller number of mental health providers, with only 208. This suggests a considerable disparity in access to mental health services between urban and rural areas within the state.

Community members have expressed significant concerns about mental health and substance use. Community members noted that school-aged children are experiencing mental health issues; showing that mental health is a grave concern for all ages. Findings from the focus group found that it is a common belief among community members that many individuals became addicted to substances following prescriptions from their doctors. The lack of mental health professionals and providers who can offer treatment for substance use was also highlighted. Another noted, "If you need counseling there is a waiting period, or wait to get an appointment. If in crisis, help is needed now not a month later." One resident noted, "More connections for virtual mental health/substance use are needed." Another emphasized the need for increased mental health professionals in Wilkes, stating, "More in-person connections are crucial." The community recognizes the importance of being connected and making healthy choices, with many individuals sharing their struggles with substance abuse, anxiety, and depression.

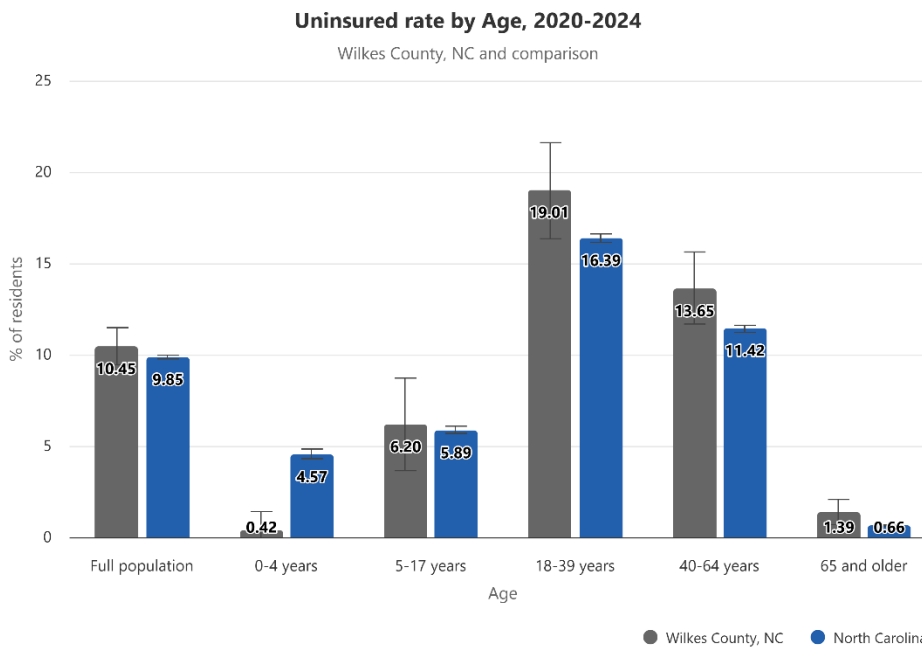
Certain groups in Wilkes County face greater challenges related to mental health and substance use. The higher prevalence of depression and substance use among adults indicates a need for targeted support. The community's input highlights the importance of addressing these issues across all demographics, with a particular focus on those experiencing significant stress and isolation.

The findings suggest several opportunities for action. Increasing access to mental health services, particularly for school-aged children is crucial. Addressing substance use through prevention and treatment programs can help reduce the burden on the healthcare system. Collaboration between local healthcare providers, community organizations, and residents is essential for developing effective strategies to improve mental health and reduce substance use in Wilkes County.

By focusing on these areas, Wilkes Health can better support the community's mental health and substance use needs, ultimately improving overall well-being and health outcomes.

Access to Care

Access to care is a critical component of community health. It affects residents' ability to receive timely medical attention, manage chronic conditions, and maintain overall well-being. In Wilkes County, limited access to healthcare providers can lead to delayed or inadequate healthcare, impacting the overall health outcomes of community members. This issue is particularly significant given the county's demographic and socioeconomic characteristics.

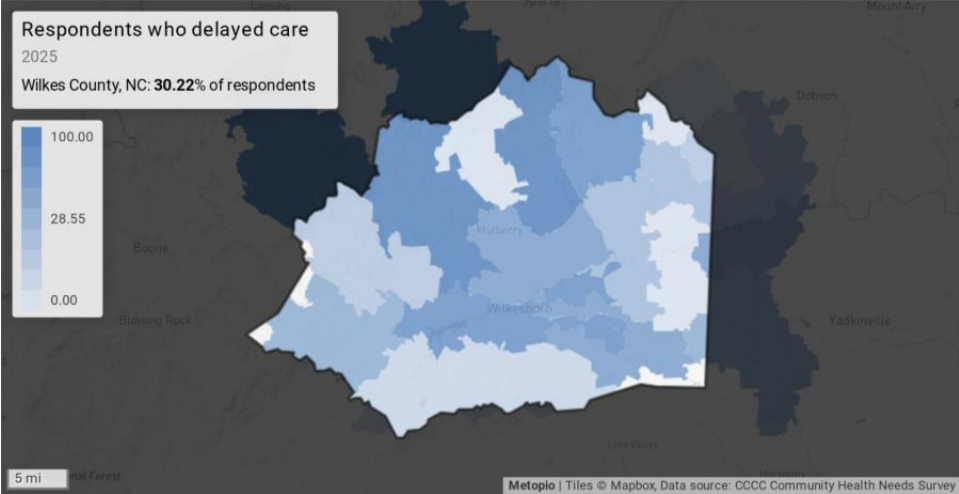


Several factors contribute to the access to care challenges in Wilkes County. The median household income in Wilkes County is \$50,438, significantly lower than the state average of \$69,904. Additionally, 16.4% of the population lives below the poverty line, compared to 13.2% statewide. The uninsured rate in Wilkes County is

10.5%, which is slightly higher than the statewide average (9.9%) across most age groups. Notably, the 18-39 age group in Wilkes County has a significantly higher uninsured rate of 19.01% compared to North Carolina's 16.39%. Additionally, the 65 and older group in Wilkes County has a higher uninsured rate of 1.39%, contrasting with the state's 0.66%. These economic barriers make it difficult for many residents to afford healthcare services.

- **Primary Care Providers (PCP) per Capita:** Wilkes County has 31.8 PCPs per 100,000 residents. North Carolina has a higher average of 84.5 PCPs per capita. This data indicates a disparity in PCPs per capita between Wilkes County and North Carolina.
- **Mental Health Providers per Capita:** Wilkes County has 323.9 mental health providers per 100,000 residents, which is lower than North Carolina's rate of 632.3 per 100,000 residents.
- **Unmet primary care provider needs:** The estimated population with unmet primary care needs is 3,617.
- **Emergency department visits:** Wilkes County accounted for 29,353 emergency department visits in 2023, reflecting moderate usage.

- Visited Doctor for Routine Checkup: 76.8% of adults in Wilkes County have visited a doctor for a routine checkup in the past year, compared to the state average of 78.5%.



The discrepancy between secondary data and survey responses regarding delayed medical care in Wilkes County highlights a significant concern. While secondary data indicates that 18.1% of adults delayed visiting a doctor due to

financial constraints, survey findings paint a grimmer picture, with nearly one-third (30.2%) reporting delays in the past year. This stark contrast suggests that the burden of healthcare costs may be more widespread than previously understood. These figures surpass the state average of 16.7%, indicating a localized issue that warrants further investigation. The higher survey percentage could reflect a growing financial strain or increased awareness among respondents. Understanding these hidden barriers is key to making sure everyone can access healthcare. By addressing these challenges, policymakers and healthcare providers can work together to reduce financial obstacles and improve access to care.

The data points reveal a notable contrast in perceptions of healthcare among respondents. It is interesting to note that a substantial 91.07% of respondents report having a primary care provider, which would indicate widespread access to primary healthcare services. However, this may not be reflective of the whole community and despite this higher rate, only 32.74% of respondents express satisfaction with the overall healthcare system. This disparity suggests underlying issues that might not be addressed by merely having a primary care provider. Potential factors contributing to this dissatisfaction could include concerns about the quality of care, long wait times, limited availability of specialized services, or financial constraints.

Furthermore, geographical and transportation barriers play a role in limited access to healthcare providers. Many residents face difficulties accessing healthcare providers due to the rural nature of the county and limited public transportation options. One-fourth of survey respondents noted lack of transportation as an issue affecting the community and access to medical appointments. Often providers limit the number of public-assistance patients they accept, exacerbating the issue for low-income residents.

Residents and stakeholders have voiced significant concerns about clinical care access. One respondent shared, "Tried to get ongoing medications filled, and was told to go to the Emergency Department for refills when primary care physician left." Another noted cost of insurance as barrier stating, "You see increases in deductibles which results in increased monthly costs." Some participants noted that providers in the area take 30 days to get a school physical, while another shared it can be a 6-9 month wait if you are not

established patient. Community members also expressed concerns and frustrations with medical apps and technology. With medical practices moving to a more online presence with use of apps and telehealth, this can be quite challenging for older adults. Respondents felt that the personal piece is gone; it can even be difficult getting through to someone on the phone, dialing through a menu or with automated menus. These quotes highlight the urgency and frustration felt by community members facing delays and gaps in care and demonstrate a need for a deeper examination of the healthcare system to understand and address the factors affecting patient satisfaction.

The findings indicate a need for targeted interventions to improve clinical care access in Wilkes County. Increasing the number of healthcare providers, particularly in rural areas, and enhancing transportation options could help address these challenges. Additionally, expanding safety net programs and ensuring that providers accept public-assistance patients can help bridge the gap for low-income residents. By addressing these issues, Wilkes County can improve health outcomes and ensure that all residents have access to the care they need.

HEALTH RESOURCES

Access to and utilization of healthcare is affected by a range of variables including the availability of health insurance coverage, availability of medical and dental professionals, transportation, cultural expectations, and other factors.

Health Care Facilities

Hospital

The town of North Wilkesboro is home to Atrium Health Wake Forest Baptist Wilkes Medical Center, which offers a full line of comprehensive medical and educational services. The facility is licensed for 120 beds, including 10 skilled nursing beds on the main campus. The hospital provides both inpatient and outpatient services, including an emergency department, women's services, and a Hematology and Oncology clinic. Through offsite facilities the medical center has expanded outpatient services to include a 24-station Dialysis Center and a state-of-the-art cardiac and pulmonary Rehabilitation Center.

Health Department

The Wilkes County Health Department is in the heart of downtown Wilkesboro. It has been serving the community for over 50 years, offering services from well/sick visits, health promotion and healthy lifestyle choices, diabetes and nutritional counseling, maternity and postpartum care, and immunizations, to environmental health services such as well water testing, septic and waste water services, and restaurant inspections.

The Wilkes County Health Department cares for men, women, and children by providing comprehensive services focused on wellness, education, and prevention. Agency programs include disease prevention and control, preparedness and response to emergent diseases and events, environmental health, WIC, and personal health programs, such as prenatal care services, well and sick adult and child healthcare, and adult and child dental services.

Federally Qualified Health Center (FQHC)

Wilkes Community Health Center, which is operated by the Health Department, is located in Wilkesboro and is a designated FQHC. The facility provides comprehensive primary and preventive care to people of all ages, regardless of their ability to pay. It accepts private insurance, Medicare, and Medicaid, as well as the uninsured, and offer a sliding scale discount program for patients. Interpreters are available for multiple languages and services are offered for those with a disability, the deaf, and the hard of hearing. Services include primary care for adults and children, gynecological care and family planning, mental health and substance abuse services, nutrition, screenings, immunizations, laboratory, and pharmaceutical services.

In 2025, Wilkes Community Health Center served 3,317 patients, including 449 mental health patients. Adults aged 18-64 comprise 62% of patients, with pediatric patients (30%) and seniors (8%) accounting for the rest. Approximately 39.5% were of Hispanic or Latino ethnicity and 5.2% were Black/African American.

Approximately 69% of patients were best served in a language other than English. A majority of patients fell below the 200% Federal poverty guideline and 32% fell below the 100% poverty line. About half of the patients in 2025 were uninsured, 28% were Medicaid or CHIP patients, and 8% were Medicare patients.

Emergency Medical Services

Established in 1971, Wilkes County Emergency Medical Services (EMS) is a county government owned and operated medical service. Employing 58 full time and 26 part time field paramedics, Wilkes County Emergency Medical Services operates three full-time bases providing around-the-clock advanced life support care for the citizens of Wilkes County. Wilkes EMS responds to over 12,000 calls per year, with crews working 12-hour day or night shifts and with one quick-response vehicle per shift.

School Health

Wilkes County Schools employs all school health nursing staff. Student's needs range from first aid for cuts, acute illness nursing, and hygiene counseling to chronic disease management, grief counseling, and suicide prevention. In school year 2025-2026 there were 12 school nurse positions serving the school system.

Long-Term Care Facilities

As of March 2026, there were three state-licensed nursing homes offering 402 skilled nursing beds and 29 adult care home beds; two adult care homes offer 162 beds between them. There is currently no family care home in Wilkes County. All facilities are located in Wilkesboro or North Wilkesboro.

Home Care, Home Health and Hospice Services

An alternative to institutional care preferred by many disabled and senior citizens is to remain at home and use community in-home health and/or home aide services.

As of February 2026, there were 12 licensed home care, home health or hospice providers in Wilkes County, all of them located in either Wilkesboro or North Wilkesboro, providing a range of services, from companions, sitters, and respite caregivers to infusion nursing care, hospice home services, and clinical respiratory services. This report prefers to cite only those in-home health and/or home aide services that are licensed by the state of North Carolina. Note that there may be additional providers in Wilkes County that refer to themselves as "home health service (or care) providers" that are not licensed by the state.

Mental Health Services Providers and Service Facilities

The local management entity/managed mental health care organization (LME/MCO) for Wilkes County is Vaya Health, which is headquartered in Asheville, NC and serves a total of 32 counties in North Carolina. There is a toll-free 24/7 Access to Care phone line, a downloadable Provider Director, and an online search tool the public can use to look for services and support for mental health, developmental disabilities, and substance abuse in their community. There is also the option to visit a walk-in center for medication

management, individual and group therapy, and other services: the Wilkes County option is Daymark Recovery Services.

As of March 2026, there were 20 state-licensed mental health facilities in Wilkes County offering a range of services, including supervised living and vocational programs for developmentally disabled adults, residential treatment facilities for children and adolescents, psychosocial rehabilitation for individuals with mental illness, and facility-based crisis services. There are seven intermediate care facilities for individuals with intellectual disabilities in Wilkes County, with a total capacity of 48 beds. Five of the listed facilities are licensed by the state to provide substance abuse services, including outpatient and inpatient programs.

Disease Prevention and Health Promotion Resources

The following is a list of some of the prevention and health promotion resources in Wilkes County. Specifically, these resources are provided by the Wilkes County Health Department/Wilkes Community Health Center (Wilkes Health) with partnership and support from community stakeholders. It is by no means an exhaustive list. The list highlights services, programs, partnerships, community resources and facilities, and a resource guide, all of which have and will continue to play an important role in addressing the health priorities of Wilkes County.

Diabetes Prevention Program (DPP)

DPP is able to be offered through a local grant from The Health Foundation. Each DPP program cohort meets for one year. In the first six months the group meets weekly, while in the second six months the group meets monthly. The program follows a CDC developed, evidence-based curriculum that includes topics such as eating well, stress management, coping with triggers, getting enough sleep, energy balance, heart health, enlisting support, and staying motivated, among others. The program is led by a trained lifestyle coach and registered dietitian and emphasizes adopting sustainable lifestyle changes that have been proven to prevent or delay the onset of type 2 diabetes among high-risk individuals by 58%.

To supplement the CDC-based curriculum, while maintaining fidelity to the program, cohort participants receive a family YMCA membership to engage in exercise and physical activity.

Mobile Expanded School Health (MESH)

MESH is a mobile medical unit that goes to Wilkes County High schools Monday-Friday. MESH makes it convenient to provide care to the students while at school, therefore, decreasing the amount of time that students are out of the classroom. Students return to class in a timely manner. MESH is staffed by an Advanced Practice Provider and a Clinical Assistant every day. MESH also provides middle and high school students access to mental health counselors, at no cost to students. MESH coordinates with school nurses to be at the school on opposite days. MESH provides minor illness/injury assessment and treatment, sports physicals, and certain immunizations and laboratory tests. There are over-the-counter medications on the MESH unit for symptom relief and prescriptions can be written. The counselor is available to talk to students when necessary.

Joint Use Agreements

Wilkes County has increased access to recreational facilities for county residents and organizations through joint use agreements. Wilkes Health has established a joint use agreement with Wilkes County Schools for shared usage of school playgrounds. This agreement opens all 13 Wilkes County School's elementary school playgrounds during weekdays from after school until dusk, and on weekends from dawn until dusk.

Local Farmers' Markets and Wilkes Fresh

Wilkes Fresh is a mobile produce market increasing access to local fruits and vegetables. It travels to 7 different sites weekly, with one store front, and operates from May through November. In addition to accepting cash and cards, Wilkes Fresh accepts Market Bucks and EBT/SNAP. Market Bucks is a very successful local program that gives 'Bucks' to lower income households to use at Farmer's Markets.

The Wilkes County Farmers' Market is open late April through October on Saturdays 7:30am to 12pm and Tuesdays 3:30pm to 5:30pm. Wilkes County Farmers' Market was established in the 1980s, and offers delicious, fresh, local produce and goods, direct from local farmers to your family's table. The Wilkes County Farmers' Market accepts EBT/SNAP benefits and debit cards.

Kids in Parks

By turning existing, outdoor trails into kid-friendly hiking trails, the Kids in Parks (KIP) program increases access to and the number of places for physical activity. KIP influences multiple levels of the socio-ecologic model by directly changing the community environment and by providing incentives and organizational supports to promote physical activity through hiking. Wilkes County has four trails located at Smoot Park, Cub Creek Park, Jefferson Turnpike, and Mulberry Fields at West Park.

Smoking Cessation

Wilkes Health connects smokers looking to quit to appropriate resources and provides technical assistance with smoke- and tobacco-free policies in public spaces. Clients looking to quit smoking are often referred to the NC Quitline, and providers also utilize the "5 A's" evidence-based strategy. Another resource is Atrium Health Wake Forest Baptist Wilkes Medical Center's Care Connection Pharmacy, which offers a five-session cessation class over 12 weeks for community members. The cessation class includes a combination of tobacco education with nicotine replacement therapy (patches AND lozenges or gum). The Tobacco Cessation Group Program includes 6 weeks of themed sessions on subjects in relation to quitting, followed by four brief bi-weekly check-in sessions as a group. Wilkes Health has also been involved in helping draft and enact smoke free policies in spaces such as county and city owned buildings, multi-unit housing, and public parks. Wilkes Health works with and connects community partners with the Northwest Regional Tobacco Prevention and Control Manager

COMMUNITY PRIORITIES

Priority Selection Process

After receiving the primary data and secondary data summaries from Central Carolina Community Collaborative and Metopio, the Steering Committee was involved in a series of meetings to determine the community's health priorities. The importance of broad community involvement was emphasized and encouraged.

In 2025, the Wilkes County Steering Committee was asked to consider the following criteria before selecting their priorities:

- Size/seriousness of the problem
- Effectiveness of available interventions
- Available resources to address the issue
- County/Healthcare system adequately situated to address the health issue
- Meets a defined community need as identified through data
- Potential for issue to impact other health and social issues
- Ability to effectively address or impact health issue through collaboration

Using these criteria, the following areas were identified as significant health needs through primary and secondary data.

Access to Care



This need was selected because issues with accessing care continues to be a concern in the community, including implications for availability of primary care physicians and specialist, as well as seeking mental health support services. There are concerning disparities for certain groups. Low-income residents, those without insurance, and individuals living in rural areas are particularly affected. These groups often experience delays in receiving care and have limited options for healthcare providers. The higher uninsured rate among Hispanic or Latino individuals further highlights the disparities in access to care. To enhance access to clinical care in Wilkes County, targeted interventions are essential. This could be achieved by increasing the number of healthcare providers, especially in rural regions, and by improving transportation options. Expanding safety net programs and ensuring healthcare providers accept patients on public assistance are also crucial steps in closing the gap for low-income residents. By tackling these issues, Wilkes County can improve health outcomes and ensure that all residents receive the necessary care.

Chronic Disease and Obesity



Chronic disease and obesity present a considerable health challenge in Wilkes County, with conditions like asthma, coronary heart disease, diabetes, COPD, high blood pressure, and obesity being widespread. The prevalence of these diseases is closely tied to restricted access to healthcare, lifestyle choices, and social determinants of health. Lack of these resources leads to worse health and shorter life expectancy. In Wilkes County, some groups are more impacted by chronic diseases than others. Individuals with lower incomes and those lacking stable housing encounter significant obstacles in managing their health, primarily due to restricted access to healthcare and nutritious food. Furthermore, racial and ethnic minorities often experience disparities in both healthcare access and outcomes. It's essential to recognize that healthy choices and behaviors are not always an easy option, and creating supportive environments is key to encouraging healthy lifestyle habits and improving health for all.

Mental Health and Substance Use



Mental health and substance use was selected as a priority, as these issues pose significant challenges for Wilkes County. Certain groups in Wilkes County encounter more significant challenges concerning mental health and substance use. There is a notable higher prevalence of depression and substance use among adults, underscoring the necessity for targeted assistance. Community feedback emphasizes the crucial need to tackle these issues across all demographics, with a special focus on individuals experiencing substantial stress and isolation. Collaboration among local healthcare providers, community organizations, and residents is crucial for developing effective strategies that enhance mental health and reduce substance use in Wilkes County. By concentrating on these critical areas, Wilkes Health can better meet the mental health and substance use needs of the community, ultimately leading to improved overall well-being and health outcomes.

NEXT STEPS

Following submission of this report, Wilkes Health will hold several listening sessions in person, or virtually. The listening sessions will serve a dual purpose in which community partners, members, and stakeholders receive information about the Community Health Needs Assessment (CHNA), while being engaged to identify strategies and solutions for addressing the health priorities. At the listening sessions, various staff will provide a brief overview of the results, with an emphasis on Chronic Disease and Obesity, Mental Health and Substance Abuse, and Access to Care. Following the presentation, participants will be able to suggest enhancement of current programs, new evidenced based strategies, and prospective partnerships.

Suggestions from the meeting will be recorded by a facilitator and note taker for each group and subsequently consolidated into a set of priority recommendations to assist the health department construct their community health improvement plan (CHIP).

The health department will continue to analyze the data and context of each health priority to ensure a proper selection of improvement activities. Once the CHIP has been finalized, it will be distributed to existing coalitions, community members, and stakeholders for input and buy-in for each health priority.

Once implementation of the CHIP has begun, the group will continue to monitor and collect health data, and adjust the plan as needed.

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APPENDICES

Appendix 1: Community Resources Available for Significant Needs



The resources under each significant need are not a complete list. For more community resources, please visit please visit the Wilkes County Resource Guide: <https://wilkescounty.net/656/Community-Resource-Guide> or scan the QR code:

Chronic Disease and Obesity Prevention

Organization	Website	Contact
Wilkes County Health Department/Wilkes Health	Wilkeshealth.com	336-651-7450
Atrium Health Wake Forest Baptist Health	Wakehealth.edu	336-651-8100
Foothills Center for Women	Foothillscenterforwomen.com	336-667-8241

Access to Care

Organization	Website	Contact
Wilkes County Health Department/Wilkes Health	Wilkeshealth.com	336-651-7450
Atrium Health Wake Forest Baptist Health	Wakehealth.edu	336-651-8100
Foothills Free Medical Clinic		(336) 667-3191
Pregnancy Care Clinic		(336) 838-9272

Mental Health and Substance Use

Organization	Website	Contact
Suicide and Crisis Lifeline	988lifeline.org	988
Wilkes Recovery Revolution	Wilkesrecoveryrevolution.com	336-818-1909
Daymark Recovery Services	Daymarkrecovery.org	336-667-5151

Project Lazarus	Projectlazarus.org	336-818-1660
Stepping Stones of Wilkes	Pinnacletreatment.com	336-568-0271
CareNet Counseling	Carenetnc.org	336-838-1644
Jodi Province Counseling Services	www.jodiprovincecs.com	336-818-0733

Appendix 2: Survey Instruments

Central Carolina Community Collaborative Survey

Welcome to the 2025 Community Health Needs Survey.

This survey will take less than 10 minutes. We will ask you questions about the health needs of your community. Community is where you live, work, play and engage. The information will help us:

- Understand problems that affect our community
- Better understand the needs of our community
- Work together to find solutions to our needs

The answers you give are important and kept confidential. When you get to the end of the survey please make sure you hit the blue button that says submit.

We thank you for your time and input.

Introduction

1. What county do you live in?*

- Alexander
- Ashe
- Brunswick
- Cabarrus
- Carroll (VA)
- Davidson
- Davie
- Duplin
- Forsyth
- Gaston
- Grayson (VA)
- Guilford
- Iredell
- Lancaster
- Lincoln
- Mecklenburg
- New Hanover
- Onslow
- Pender
- Randolph
- Rockingham

- Rowan
- Scotland
- Stanly
- Stokes
- Surry
- Union
- Wilkes
- Yadkin
- York
- Other

2. If "Other" in Question 1, please list your county
3. What is your home zip code?*
4. What is your age?*

Your Community

5. What do you believe are the most important health related challenges in your community? Please select 3.
 - Access to affordable medication
 - Access to health care (availability and accessibility)
 - Autoimmune Disorders
 - Cancers - all types
 - Diabetes
 - Hearing and vision loss
 - Heart disease (high blood pressure, stroke)
 - Infectious diseases (tuberculosis or TB, flu, COVID-19)
 - Lung disease (asthma, chronic obstructive pulmonary disease or COPD)
 - Mental health issues including anxiety and depression
 - Obesity
 - Oral Health
 - Sexually Transmitted Infections (STDs) including chlamydia, gonorrhea, hepatitis, syphilis, HIV
 - Substance use (drug or alcohol use)
 - Tobacco use including vaping
 - Women's health including maternity care and other issues that are unique to women
 - Other (Please list): _____

6. What are the most important community issues? Please select 3.
 - Access to affordable healthy food
 - Affordable and safe housing
 - Access to affordable child care

- Access to educational opportunities
- Access to employment opportunities
- Access to arts and cultural events
- Access to physical activity opportunities
- Access to social support and engagement
- Issues related to child and youth well-being
- Issues related to aging (Older Adults)
- Racism or other discrimination
- Safety or crime
- Environmental Health including clean air and water
- Transportation (the ability to get to medical appointments, work, errands, etc.)
- Other (Please list): _____

7. What does your community need to be healthy?
8. Please rate your agreement with the following statements. Strongly Disagree, Disagree, Neither Agree Strongly, Agree
- There are affordable places to live in my community _____
- I am satisfied with the healthcare system in this community _____
- Public transportation is easy to use if I need it _____
- I feel safe in my community _____ T
- here are enough well-paying jobs in my community _____

Your Health

9. In the past week, how many days did you eat fruit and/or vegetables. Please think about all forms of fruits and vegetables including cooked or raw, fresh, frozen, or canned.
- None
 - 1-2
 - 3-5
 - More than 5
 - I don't know
10. How easy or difficult is it for you to get fresh fruits and vegetables?
- Very difficult
 - Somewhat difficult
 - Somewhat easy
 - Very easy

11. If “Very Difficult” or “Somewhat Difficult”, what are the reasons it is difficult to get fresh fruits and vegetables? Select all that apply.

- The store(s) within a mile of where I live don't sell fresh fruits and vegetables
- The quality of fresh fruits and vegetables where I shop is poor
- Fresh fruits and vegetables are too expensive where I shop
- The store(s) where I use my EBT/SNAP benefits does not sell fresh fruits and vegetables
- I don't have transportation to get to a store that sells fresh fruits and vegetables
- I don't have the ability to store or prepare food

12. In the past 30 days, have you used Yes No

- Marijuana or cannabis
- Drugs besides marijuana or cannabis
- Tobacco (cigarettes, cigarillo, cigar)
- Smokeless tobacco (chew, dip, snuff)
- Electronic cigarettes, such as JUUL or blu (also known as e-cigarettes or vapes)

13. How often does substance use by someone in your household negatively affect your usual activities?

- Daily
- Weekly
- Monthly
- Rarely
- Never

14. How often do you get the social and emotional support you need?

- Always
- Usually
- Sometimes
- Rarely
- Never

15. How often do you feel lonely?

- Always
- Usually
- Sometimes
- Rarely
- Never

Access to Care

16. Do you have a doctor or clinic where you go for care when you need it?
- Yes
 - No
17. Please choose the type(s) of health insurance you currently have. Select all that apply.
- I don't have health insurance
 - Insurance purchased through the Marketplace, Affordable Care Act or Obamacare
 - Insurance from an employer
 - Medicare
 - Medicaid
 - I'm on my parent's insurance
 - Other (Please list): _____
18. If you have insurance, how well does it meet your needs?
- Very Dissatisfied
 - Dissatisfied
 - Neutral
 - Satisfied
 - Very Satisfied
 - Not Applicable
19. Do you have dental insurance?
- Yes
 - No
20. Do you have vision insurance?
- Yes
 - No
21. In the past 12 months, have you delayed any medical care such as annual physicals?
- Yes
 - No
22. If "Yes" to Question 21, what were the reasons you delayed medical care?
- Wait time for appointment
 - Cost of service
 - Transportation
 - Inconvenient hours
 - Lack of provider
 - No insurance

- I am not at risk
- Did not want to get vaccinated
- Other (Please list): _____

23. During the past 12 months, was there any time when you needed mental health treatment or counseling?

- Yes
- No

24. If "Yes" to Question 23, were you able to get the mental health treatment you needed?

- Yes
- No

25. If "No" to Question 24, please select the reason(s) you did not get the mental health treatment or counseling you needed. Select all that apply.

- I could not afford the cost
- I was concerned that getting help might cause my family or community to have a negative opinion of me
- I was concerned that getting help might have a negative effect on my job
- My health insurance does not cover or pay enough for mental health treatment or counseling
- I did not know where to get services
- I was concerned that the information I gave the counselor might not be kept private
- I was concerned that I might be taken to a psychiatric hospital or have to take medicine
- I tried to get mental health treatment or counseling but was put on a waitlist
- I could not find a therapist who was culturally or disability competent
- I did not have transportation to get to an appointment
- Other (Please list): _____

26. Within the past 12 months, has a lack of transportation kept you from medical appointments, work, or other important things that you need to do?

- Yes
- No

27. How prepared do you feel your household is to handle an emergency or disaster (such as natural disaster, power outage, or public health crisis)?

- Very prepared – We have an emergency plan, supplies, and know what to do
- Somewhat prepared – We have some supplies and an idea of what to do, but could use more information.
- Not very prepared – We have limited supplies and no clear plan
- Not prepared at all – We do not have supplies or a plan in place

28. What resources, training, or information would help you feel more prepared for emergencies?
Please specify

About You

29. What sex were you assigned at birth?

Female

Male

Another term: _____

30. What is your race and/or ethnicity group? Select all that apply.

American Indian or Alaskan Native

Asian

Black or African American

Middle Eastern or Northern African

Native Hawaiian or Pacific Islander

Latino or Hispanic

White

Prefer to self-describe: _____

31. What kind of place do you live in?

Own my home

Rent my home

Emergency shelter

Living outside

Living with a friend or family member

Hotel or Motel

Something else: _____

32. How many people in each age group are currently in your household (including yourself)? Children

0-5 years old: _____

Children 6-10 years old: _____

Children/Teenagers 11-14 years old: _____

Children/Teenagers 15-18 years old: _____

Young adults 19-24 years old: _____

Adults 25-64 years old: _____

Adults 65 and older: _____

33. Is a language other than English spoken in your home?
 Yes
 No
34. If "Yes" to Question 33, what language(s) other than English are spoken in your home?
35. What is the highest level of education you have completed?
 Less than high school
 Some high school
 High school graduate or GED
 Vocational or technical school
 Some college
 College graduate or higher
36. What is your yearly household income?
 Less than \$10,000
 \$10,000 to \$14,999
 \$15,000 to \$24,999
 \$25,000 to \$34,999
 \$35,000 to \$49,999
 \$50,000 to \$74,999
 \$75,000 to \$99,999
 \$100,000 to \$149,999
 \$150,000 to \$199,999
 \$200,000 or more
 I don't know
37. What is your current employment status?
 Employed (full-time)
 Employed (part-time)
 Retired
 Student
 Self-employed
 Not employed
38. If employed, what county do you work in if different than where you live?
 I live and work in the same county
 I work in: _____

39. Does anyone in your house live with a physical, mental, or intellectual disability?

Yes, a child 0 to 17

Yes, an adult 18 or older

No

Thank you for taking our survey!

Your response is very important to us and will help us plan ways to improve health in your community.

If you have any questions about the survey, please email survey@metop.io