

# Hardeman County Community Health Council

## Community Needs Assessment



**1998**

### **Volume I**

A report on the county's health status and intervention strategies developed by the community

Community Development Section

Tennessee Department of Health

295 Summar Avenue

Jackson, TN 38301

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# INTRODUCTION

## Mission Statement

***The Mission of the Community Health Council is to determine the health needs of the community and develop a plan of action for improving the health status of people in Hardeman County, Tennessee.***

## COUNTY DESCRIPTION

### Land Area

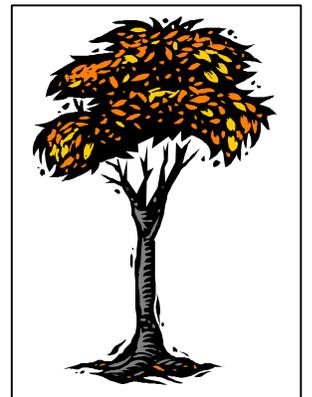
Hardeman County, with an area of 665 square miles, is located in the upper plateau of southwestern Tennessee near the headwaters of the Big Hatchie River. The county was officially organized in 1823 and named in honor of Thomas Jones Hardeman, a veteran of the War of 1812. The county seat was first established one mile south of the present location and given the name Hatchie Town, a Chickasaw word for river. In 1824 town commissioners chose the present location and called the town Bolivar for the South American patriot, Simon Bolivar. The Courthouse is the oldest standing courthouse in West Tennessee. Hardeman County has nine incorporated towns: Bolivar, Grand Junction, Hickory Valley, Hornsby, Middleton, Saulsbury, Silerton, Toone, and Whiteville. The Hardeman County School System consists of nine schools serving eight regional zones with over 5,000 students.

## LOCAL ECONOMY

Hardeman County is known as the Hardwood Capital of the South. Much of the land is hardwood forest. Twenty-seven hardwoods are exported nationally and internationally. There are several operating sawmills in the county. High quality white sand for use in glass, golf courses and beaches is also abundant. Ball clay for the ceramic industry is found in abundance as are gravel and cert. Agricultural crops include corn, cotton, milo, okra, peppers, soybeans, squash, and wheat. Cotton and soybeans are the leading crops. Primary employers in the community include Dover Elevators, Harmon Automotive, Kilgore Corporation, Master Slack, and a federal prison located near Whiteville in northern Hardeman County.

### Hardeman Hardwood Exports

- ◆ Birch
- ◆ Cherry
- ◆ Cypress
- ◆ Gum
- ◆ Maple
- ◆ Oak
- ◆ Persimmon
- ◆ Poplar



# Demographics of Hardeman County

## ***MEDICAL COMMUNITY***

Bolivar General Hospital, an affiliate of West Tennessee Health Care, is a full-service 61 bed, not-for-profit general acute care facility offering a wide range of services on both an inpatient and outpatient basis. Some of the newer services include: Ambulatory Surgery, CAT Scan, Nuclear Medicine, 24 Hour Cardiac Monitoring, Cardiac Stress Testing, Home Health, and Hospice. Such specialties as internal medicine, pediatrics, urology, cardiology, radiology, pathology, and obstetrics are represented on the medical staff. The expanded medical community offers general and family practitioners, dental and orthodontic services, optometrists and opticians. Quinco Mental Health offers a variety of services from early childhood intervention to stress management. There are two intermediate care facilities with a total of 189 beds to meet the nursing home needs of the area. Two home health agencies provide services to those in need of special treatment. The Hardeman County Health Department offers a wide range of services including family planning, prenatal care, WIC, nutritional counseling, child immunizations, adolescent dentistry, Resource Mothers, Childrens' Special Services, STD testing, adolescent pregnancy prevention programs, and health education services.

## ***DEMOGRAPHICS***

<b>Total Population</b>	
<b>1990</b>	<b>23,377</b>
<b>1980</b>	<b>23,873</b>
<b>1970</b>	<b>22,435</b>
<b>1960</b>	<b>21,517</b>

## ***POPULATION CATEGORY***

### **Hardeman Co**

	Number	%	TN Percent
<b>Sex</b>			
Female	<b>11,228</b>	<b>48</b>	<b>52</b>
Male	<b>12,149</b>	<b>52</b>	<b>48</b>
<b>Race</b>			
White	<b>14,550</b>	<b>62</b>	<b>83</b>
Black	<b>8,786</b>	<b>38</b>	<b>16</b>
<b>Other</b>	<b>41</b>	<b>-</b>	<b>-</b>

# Demographics of Hardeman County

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## HOUSEHOLDS

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	<b>County</b>	<b>Region</b>	<b>State</b>
Percent of households that are family households	74.8	74.7	72.7
Percent of households that are families headed by a female with no husband present	16.4	11.8	12.6
Percent of households that are families headed by a female with no husband present and with children under 18 years	9.3	6.4	6.9
Percent of households with the householder 65 and up	26.2	27.5	21.8

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## EDUCATION

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	<b>County</b>	<b>Region</b>	<b>State</b>
Percent of persons age 25 and older	14,565	294,457	3,139,066
Percent of persons 25 and up that are high school graduates or higher	53	56.5	67.1
Percent of persons 25 and up with a bachelor's degree or higher	7.6	7.6	16.0

# Demographics of Hardeman County

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## EMPLOYMENT

	<b>County</b>	<b>Region</b>	<b>State</b>
Number of Persons 16 and Older	17,466	352,668	3,799,725
Percent In Work Force	56.3	59.6	64.0
Number of Persons 16 and Older in Civilian Work Force	9,830	209,376	2,405,077
Percent Unemployed	8.8	7.4	6.4
Number of Females 16 Years and Older	1,380	26,205	287,675

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## POVERTY STATUS

	<b>County</b>	<b>Region</b>	<b>State</b>
Per Capita income in 1989	\$8,650	\$9,850	\$12,255
Percent of persons below the 1989 poverty level	23.3	19.04	15.7
Families with children under 18 years, percent of families below poverty level	29.6	23.8	20.7
Percent of persons age 65 years and older with income in 1989 below the poverty level	28	27.4	20.9

Sources: U.S. Department of Commerce, Bureau of the Census, 1990 Census of Population General Population Characteristics, Tennessee, and 1990 Census of Population and Housing, Summary Social, Economic, and Housing Characteristics Tennessee.

# COMMUNITY NEEDS ASSESSMENT

## HISTORY OF THE PROCESS

In 1996 local health care providers and community leaders in Hardeman County began an on-going dialogue about the challenges facing the community's health care delivery system. It was becoming apparent that the pressures of reform including changes in Medicaid, AFDC, and reimbursement rates for rural hospitals were beginning to strain the community's limited resources. Local leaders responded by forming a Community Health Council to serve as a mechanism for evaluating the health status of the community and pooling resources to address shared problems. The Health Council conducted a comprehensive assessment of the health status of Hardeman County residents and developed a strategy to address the needs identified.

## COMMUNITY DIAGNOSIS

The "Community Diagnosis" process developed by the Tennessee Department of Health was the basis for the assessment. Community Diagnosis is a data-driven assessment process which helps communities identify and prioritize health problems. Information regarding the community's health status, in addition to data available from the State, was collected and analyzed. Primary data was collected through questionnaires administered throughout the community. Particular attention was paid to ensure that surveys reflected the geographic and ethnic diversity of the community.

A separate questionnaire was administered in the school system to ensure that the health concerns of the county's young people were considered. Data from a behavioral risk factor survey conducted by the University of Tennessee was also reviewed. Secondary data available from the Department of Health and other sources was then studied in order to focus discussion. Using this approach a Community Health Problems List was developed. Once a comprehensive list of problems had been compiled, the problems were prioritized based on size, seriousness, and effectiveness of interventions. Work groups then developed specific goals and began the process of designing appropriate interventions.

***"Health Departments across the country have not developed good assessment capabilities, but we must concentrate on this function if we are to enter the 21<sup>st</sup> century with the data and system to recognize health problems as well as resolve them."***

***-Fredia Wadley, M.D.,  
Commssioner  
Tennessee Dept of Health***

# COMMUNITY NEEDS ASSESSMENT

## COUNCIL MAKE-UP

The Hardeman County Community Health Council consists of a diverse group of community leaders which is representative of the community in terms of geography, race, profession, and institutional factors. A list of council representatives is attached as Appendix A.

## DATA GATHERED

### ***Demographic and Socioeconomic Data***

Population Demographics  
Life Cycle of Residents  
Labor Force Status  
Marital Status  
Poverty Status  
Family/Household Status

### ***Health Professionals Data***

Primary Care Physicians  
OB/GYN Physicians  
Internists  
Pediatricians  
Specialists  
Dentists  
Nurse Practitioners/Nurse  
Midwives

## ***Health and Vital Statistics Data***

Fertility Data  
Cancer  
Adolescent Pregnancy Rates  
Diabetes  
Live Births by Age and Race  
Heart Conditions  
Birthweight Trends  
Hypertension  
Infant Deaths by Race  
HIV/Aids  
Leading Causes of Death  
Stress  
Mothers Exhibiting Maternal Risk Factors  
Tobacco Use  
Motor Vehicle Mortality  
Hospital Discharge Data  
Accidental Death Mortality  
Violent Deaths  
Sexually Transmitted Diseases  
Obesity

### ***Family Data***

Domestic Violence Patterns  
Child Abuse and Neglect  
Alcohol and Drug Abuse

# COMMUNITY NEEDS ASSESSMENT

## ***Community Health Surveys***

**The Council supplemented published data by conducting a survey of community residents regarding the health status of the community. Approximately 900 surveys were collected and analyzed. Results from a behavioral risk factor survey conducted by the University of Tennessee were also carefully reviewed.**

## **Community Health Concerns Identified**

- ❑ **Diabetes**
- ❑ **Cancer**
- ❑ **Teen Pregnancy/Sex Among Teens**
- ❑ **Alcohol/Drug Abuse**
- ❑ **Child Abuse/Neglect**
- ❑ **HIV/Aids/STDs**
- ❑ **Hypertension**
- ❑ **Stress**
- ❑ **Motor Vehicle Accidents**
- ❑ **Domestic Violence**

## **PRIORITIZED PROBLEMS**

The Council discussed an increasing range of pressing health problems that the community must address with limited resources. To direct those resources well, the Council established priorities from among the problems identified. For this task the Council chose a modification of the method developed by J.J. Hanlon who is a nationally known public health professional. This method sets priorities on the basis of the size and seriousness of the problem in conjunction with knowledge about the effectiveness of potentially available interventions. Each problem being considered was given a numerical score on a scale of 0 to 10 based on the size of the population affected, the seriousness of the problem and the effectiveness of potential interventions. The following formula was used for the calculation of total scores (D) where A = Size; B = Seriousness, and C = Effectiveness of Interventions,

$$D = A + (2B) \times C$$

Once health problems had been rated for size, seriousness and effectiveness of potential interventions, they were judged for the factors of Propriety, Economics, Acceptability, Resources and Legality.

# COMMUNITY NEEDS ASSESSMENT

## ***Priorities with Justification***

1996-97

### ***Adolescent Pregnancy Child Abuse and Neglect Motor Vehicle Accidental Deaths***

The Community Health Council selected three problems from the list of health concerns to be addressed during the first project year. These community health priorities are adolescent pregnancy, child abuse/neglect and motor vehicle accidental deaths. When selecting these priorities for 1996-97, the Council worked through the entire sequence of interacting factors that contribute to each community health problem identified. Links between problems, barriers to effective intervention and the availability of resources were all important considerations.

## ***Community Resources***

### **TEEN PREGNANCY/UNINTENDED PREGNANCY**

- Hardeman County Health Department
- West Tennessee Regional Health Department
- Schools
- Resource Mothers

- Tennessee Department of Children's Services
- Churches
- Hardeman County Juvenile Court
- Quinco Community Mental Health Center
- University of Tennessee Extension Services
- API Council
- March of Dimes

### ***MOTOR VEHICLE ACCIDENTS***

- Dept. of Transportation
- Tennessee Highway Patrol
- Schools
- Churches
- Hardeman County Juvenile Court
- Hardeman County Ambulance Authority
- Civic Clubs
- Bolivar General Hospital
- API Council
- March of Dimes
- Resource Mothers
- CHAD

### ***CHILD ABUSE/NEGLECT***

- Tennessee Department of Children's Services
- Schools
- Hardeman County Juvenile Court
- Churches
- Exchange Club-Carl Perkins Center for Prevention of Child Abuse
- Quinco Community Mental Health Center
- Tennessee Early Intervention Program
- Bolivar General Hospital
- Physician Offices

# COMMUNITY NEEDS ASSESSMENT

## **Adolescent Pregnancy**

The adolescent pregnancy rate for Hardeman County has been historically among the highest in the state. There are many causal factors related to teenage pregnancy, including low self-esteem, family history of early pregnancy, previous sexual abuse, substance abuse, lack of involvement in community activities, lack of adult supervision, economic factors, lack of knowledge about reproductive health, as well as issues surrounding male involvement and responsibility.

Community Survey Results indicated that 87 percent of respondents believe adolescent pregnancy is a "Very Serious" community health problem. Similar results were found from the Behavioral Risk Factor Survey conducted by the University of Tennessee.

## **Child Abuse/Neglect**

Healthy outcomes for our children can only be achieved through a proactive strategy that focuses on environmental conditions and social development. Lack of effective parenting skills and limited opportunities for children are environmental conditions that have a negative impact on the social development of children. Available resources in the community are

inadequate to meet the needs identified. Parenting resources and opportunities for youth are extremely limited. Data reflecting risk factors for adolescent problem behaviors were carefully reviewed. The rate of children in state custody in Hardeman County is 10.5 per 1,000 children. The rate for the State of Tennessee is 9.0. The percent of children referred to Juvenile Court is 7.1 percent in Hardeman County as compared to 5.1 percent for the state. The rate of children in state care is also higher for Hardeman County than for the state. Promotion rates for children in Hardeman County have consistently been below the state rates since the 92-93 school year. The dropout rate for Hardeman County has increased since the 94-95 school year.

### ***Promotion Rates K-8*** Hardeman County and Tennessee

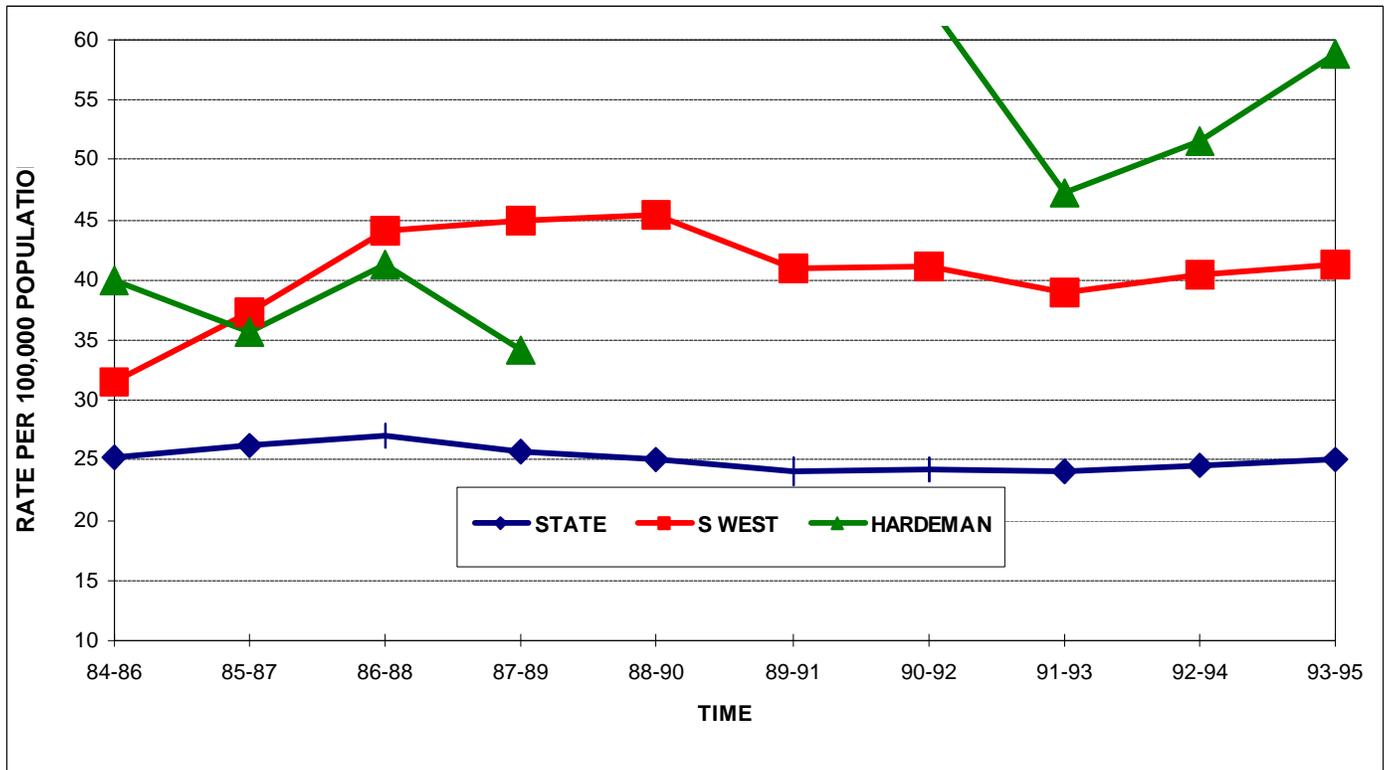
	<b>92-93</b>	<b>93-94</b>	<b>94-95</b>	<b>95-96</b>
Hardeman	93.7	94.0	94.5	91.9
Tennessee	96.1	96.1	96.5	96.6

### ***Dropout Rates 9-12***

	<b>92-93</b>	<b>93-94</b>	<b>94-95</b>	<b>95-96</b>
Hardeman	4.6	3.0	5.8	5.5
Tennessee	4.8	4.7	4.8	4.5

# COMMUNITY NEEDS ASSESSMENT

Hardeman County averaged nine fatal crashes per year from 1994 to 1996. The average rate of fatal crashes (.56 per 1,000 licensed drivers) ranks Hardeman 15<sup>th</sup> worst among Tennessee's ninety-five counties. The county has averaged 201 injury crashes per year from 1994 to 1996 for a rate of 12.39 per 1,000 licensed drivers. This injury crash rate is among the thirty worst in the state. Hardeman County's average rate of death from motor vehicle accidents for 1993-95 was 58.9 per 100,000 population. The state's average rate for the same time period was 25.0. The Year 2000 national objective is 16.8.



## ***Actions and Strategies***

Subcommittees were formed to serve as working groups for each priority identified and were expanded to include individuals with knowledge and experience related to each problem. Each subcommittee was charged with the responsibility of developing a plan of action which included objectives, activities and evaluation criteria.

Hardeman County  
Community Health Council

**George Austin**  
**Administrator**  
**Bolivar General Hospital**

**Bob Williamson**  
**Dover Elevator**

**Carla Clifft**  
**Hardeman Co. Schools**

**Arylne Cheers, Ed. D.**  
**Retired Educator**

**Bettie Rixie, R.N.**  
**Nursing Supervisor**

**Lisa Raines, R.N.**  
**Hardeman Co. Schools**

**Lucille Howell**  
**Bolivar General Hospital**

**Rev. Lloyd King**  
**Local Pastor**

**Rev. Granville Morgan**  
**Local Pastor**

**Vanessa Holmberg, R.N.**  
**Hardeman Co. Schools**

**Lisa Nunn**  
**County DHS**

**Mary Heinzen,**  
**Executive Director**  
**Community Health**  
**Center**

**Charles Frost, M.D.**  
**City Mayor**

**Vicki Lake, Ph.D.**  
**West Tennessee Health**  
**Care**

**Rev. Rick King**  
**Local Pastor**

**Anne Ingle, Editor**  
**The Bolivar Bulletin**

**Honorable Steven Hornsby**  
**County Judge**

**Carol Gill,**  
**Executive Director**  
**Chamber of Commerce**

**Rev. Larry Berg**  
**Local Pastor**

**Rosemary Cotham,**  
**Health Dept. Director**

