

# Rockdale County Health Department's Community Health Assessment and Community Health Improvement Plan

2019

# Rockdale County Health Department, Georgia



## Community Health Assessment and Community Health Improvement Plan, 2019

### About the Rockdale Health Department

The Rockdale County Health Department continuously monitors the health status of the community to identify health problems, educate the public on ways to reduce health risks, and promote better health through individual contact and media interactions.

We regularly participate in and mobilize community groups to develop policies and action plans to improve the health of Rockdale community members. The health department enforces laws, regulations, and ordinances that protect health and ensure safety. Working together to provide these vitally important, essential public health services, we can improve the quality of life for everyone in the community and state.

#### **Our Mission**

To protect and improve the health of our community by monitoring and preventing disease; promoting health and well-being; and preparing for disasters.

#### **Our Vision**

A healthy, protected, and prepared community.

#### **Our Values**

**Availability:** We will be available to our clients through emergency preparedness services, disease and outbreak investigations, expanded hours and readily available services.

**Affability:** We will work to ensure our clients have a good experience at our clinics. We will treat clients, co-workers, partners and others in our community with respect. We will value our employees.

**Ability:** We will work toward a high level of competency in all areas of service.

**Accountability:** We will be good stewards of the funds and materials we receive.

**Adaptability:** We will always look forward to meet the current and future needs of our community.

## **Purpose**

This report represents the information gathered through conducting a combined community health assessment (CHA) and community health improvement plan (CHIP) for Rockdale County, Georgia. By examining the county's standing regarding key health indicators in tandem with community leader and member input, this combined CHA/CHIP will serve as a foundation for collaborative effort toward addressing the most important health needs of Rockdale County residents. This community-wide health assessment is intended to help shape coordinated community plans to improve health.

This report focuses not just on disease indicators like death rates and case counts, but also on the many factors that influence health, which include income, housing, demographics, education, and transportation. It also places an emphasis on community involvement as a means to truly understand the reality of health, well-being, and quality of life in the community. Because of this, both secondary quantitative data and primary qualitative data are included to provide a well-rounded perspective of health in Rockdale.

This report was done in collaboration with Rockdale Coalition for Children and Families, with tremendous support from Executive Director, Michael Hutcheson. Additional support was provided by University of Georgia Master of Public Health and Master of Social Work Candidate and GNR Health Intern, Haley Miranda.

## Table of Contents

### Section I: Background

Rockdale County Health Department  
Purpose of the Report  
The Local Public Health System  
Who Was Involved  
Methods

### Section II: Determinants of Health

Demographics and Diversity  
    Community Health Status  
    Assessment  
    Community Themes & Strengths  
    Assessment  
    Forces of Change Assessment  
    Local Public Health Assessment

Economy  
    Community Health Status  
    Assessment  
    Community Themes & Strengths  
    Assessment  
    Forces of Change Assessment  
    Local Public Health Assessment

Housing  
    Community Health Status  
    Assessment  
    Community Themes & Strengths  
    Assessment  
    Forces of Change Assessment  
    Local Public Health Assessment

Education  
    Community Health Status  
    Assessment  
    Community Themes & Strengths  
    Assessment  
    Forces of Change Assessment  
    Local Public Health Assessment

Transportation

    Community Health Status  
    Assessment  
    Community Themes & Strengths  
    Assessment  
    Forces of Change Assessment  
    Local Public Health Assessment

Environment

    Community Health Status  
    Assessment  
    Community Themes & Strengths  
    Assessment  
    Forces of Change Assessment  
    Local Public Health Assessment

Safety

    Community Health Status  
    Assessment  
    Community Themes & Strengths  
    Assessment  
    Forces of Change Assessment  
    Local Public Health Assessment

### Section III: Health Indicators

About Dashboards

Leading Causes of Premature Death

Overall Health

    Community Health Status  
    Assessment  
    Community Themes & Strengths  
    Assessment  
    Forces of Change Assessment  
    Local Public Health Assessment

Access to Health Services

    Community Health Status  
    Assessment  
    Community Themes & Strengths  
    Assessment  
    Forces of Change Assessment

Local Public Health Assessment

Health Behaviors

- Community Health Status Assessment
- Community Themes & Strengths Assessment
- Forces of Change Assessment
- Local Public Health Assessment

Chronic Disease

- Community Health Status Assessment
- Community Themes & Strengths Assessment
- Forces of Change Assessment
- Local Public Health Assessment

Cancer

- Community Health Status Assessment
- Community Themes & Strengths Assessment
- Forces of Change Assessment
- Local Public Health Assessment

Teen Pregnancy

- Community Health Status Assessment
- Community Themes & Strengths Assessment
- Forces of Change Assessment
- Local Public Health Assessment

Maternal & Child Health

- Community Health Status Assessment
- Community Themes & Strengths Assessment
- Forces of Change Assessment
- Local Public Health Assessment

Infectious Disease

- Community Health Status Assessment
- Community Themes & Strengths Assessment
- Forces of Change Assessment
- Local Public Health Assessment

Mental Health

- Community Health Status Assessment
- Community Themes & Strengths Assessment
- Forces of Change Assessment
- Local Public Health Assessment

Purpose

Methods

Overview of Mobilizing for Action through Planning and Partnerships (MAPP)

Quick Stats

Determinants of Health

Demographics and Diversity

Economy and Basic Needs

Housing

Education and Child Activities

Transportation

Community Engagement

Safety

Environment

Health Status

Premature Death

Overall Health Status

Access to Health Services

Health Behaviors

Chronic Diseases

Injuries

Maternal and Infant Health

Teen Pregnancy

Infectious Diseases

Mental Health and Social Support

Emergency Preparedness

MAPP Assessments

Community Health Status Assessment

Community Themes and Strengths Assessment

Local Public Health Assessment

Forces of Change Assessment

Community involvement? (WIC surveys/interviews?)

Community Health Improvement Plan (CHIP)?

## **Community Health Assessment and Community Health Improvement Plan Methods and Overview of Mobilizing for Action through Planning and Partnerships**

GNR Health conducts a county Community Health Assessment and Community Health Improvement Plan every five years, per PHAB accreditation standards. This cycle of the CHA/CHIP began in June 2017 and continued until March 2017. GNR Health led the assessment process in collaboration with Rockdale Coalition for Children and Families, Community Resource Network, Health SafetyNet, Conyers Housing Authority, More Than Conquerors, Inc., and other community partners.

This CHA/CHIP was done based on a framework called Mobilizing for Action through Planning and Partnerships (MAPP), a community-driven strategic planning process that is used by “communities to move through the process of organizing partners, collecting comprehensive data, and implementing an action plan” (MAPP User’s Handbook, p. 3). The MAPP process involves six phases, outlined in the table below.

<b>Six Phases of the MAPP Process</b>	
Phase One: Organize for Success	Community members and agencies form a partnership and learn about the MAPP process.
Phase Two: Visioning	Those who work, learn, live and play in the MAPP community create a common understanding of what it would look like to achieve a healthier community.
Phase Three: Four MAPP Assessments	Qualitative and quantitative data are gathered to provide a comprehensive picture of health in the community.
Phase Four: Identify Strategic Issues	The data are analyzed to uncover underlying themes that need to be addressed in order for the community to achieve its vision.
Phase Five: Formulate Goals and Strategies	The community identifies goals it wants to achieve and strategies it wasn’t to implement related to strategic issues.
Phase Six: Action Cycle	The community implements and evaluates action plans to meet goals, address strategic issues, and achieve the community’s vision.

Four main assessments are included in Phase Three of the MAPP process, including the Community Health Status Assessment, Community Themes and Strengths Assessment, Local Public Health System Assessment, and Forces of Change Assessment.

The Community Health Status Assessment was utilized during focus groups we conducted with residents of Conyers Public Housing and high school students in August and November of 2018. The survey used was adapted from an assessment done by the San Antonio Metropolitan Health District in San Antonio, Texas.

The Community Themes and Strengths Assessment was addressed through interviews with community members. Throughout the months of March and April in 2018, the Community Health Coordinator at the Gwinnett, Newton, and Rockdale County Health Departments conducted Key Stakeholder Interviews with representatives from various community agencies to gather their insight on health, wellbeing, and quality of life in Rockdale County.

To conduct the Local Public Health System Assessment, we identified organizations and individuals to represent each of the 10 Essential Public Health Services. Each of these organizations and individuals was then invited to participate in a focus group to discuss these essential services in Rockdale County and complete the National Public Health Performance Standards Local Instrument.

In June of 2018, ten individuals from six community agencies met at the Rockdale Health Department to conduct the Forces of Change assessment. Agencies present included the Gwinnett, Newton, and Rockdale County Health Departments, Clouds of Hope Substance Abuse Prevention Services, More than Conquerors, Rockdale Coalition for Children and Families, Prevent Child Abuse Rockdale, and the Conyers Housing Authority.

The processes and findings related to each of these four assessments is further detailed in the CHA/CHIP.

To supplement information gathered from the community, data from the U.S. Census Bureau, Georgia Department of Public Health's Online Analytical Statistical Information System (OASIS), and County Health Rankings were included regarding demographics, poverty, transportation, and morbidity and mortality.



## Quick Stats about Rockdale County and the Health Priorities

- Rockdale's population in 2017 was 90,213 compared to 82,146 in 2007. This change shows approximately a 10% increase over 10 years.
- Rockdale's population density is 674.6 individuals per square mile (2016).  
<https://www.socialexplorer.com/a9676d974c/explore>
- Rockdale's population is 53% female and 47% male.
- 1% of the population is less than one year old; 5% is 1 to 4 years old; 11% is 5 to 12 years old; 10% is 13 to 19 years old; 13% is 20 to 29 years old; 18% is 30 to 44 years old; 22% is 45-59 years old; 15% is 60 to 74 years old; and 5% is 75 or more years old.
- 49.9% of Rockdale's population is Black or African American; 36% is White; 2% is Asian; 0.2% is Native Hawaiian or Other Pacific Islander; 0.097% is American Indian or Alaska Native; and 1.4% is Multiracial.
- 10% of Rockdale's population identifies as Hispanic or Latino.
- 9.6% of Rockdale's residents are foreign-born citizens.
- The unemployment rate in Rockdale County has decreased steadily from 2010 to 2018. In 2010, the unemployment rate was 11.8%; in 2014 it was 8.3%; and in 2018 it was 5.0%.
- 18% of adults in Rockdale County are current smokers.
- 39% of Rockdale's adults report a BMI of 30 or more, which is a 6% increase since 2014.
- There were no deaths due to homicide per 100,000 people in 2016, compared to 2 in 2014.
- The motor vehicle death rate was 12 per 100,000 people compared to 16 in 2014. 22% of these deaths were related to alcohol, which did not change since 2014.
- There were 26 births to females age 15 to 19 per 1,000 compared to 41 births in 2014.
- 10% of live births in Rockdale County are low birthweight, which is a slight increase from 9.5% in 2014.
- There were 11 infant deaths within one year since birth per 1,000 live births. The rate in 2014 was 6.9 per 1,000.
- For children under 18 years of age, the mortality rate is 70 per 100,000 individuals, which has increased since 2014, when the rate was 41.8 deaths per 100,000 individuals.
- 14% of adults age 20 and above in Rockdale have been diagnosed with diabetes (2014).
- In 2014, 30.3 individuals per 100,000 women were diagnosed with breast cancer. The age-adjusted death rate for women diagnosed with breast cancer in 2016 was 32.1 per 100,000 women, and it was 15 per 100,000 women in 2014.
- The age-adjusted death rate for those with cardiovascular disease is 219.8 per 100,000 individuals, which is an increase from 182.9 in 2014.
- In 2017, there were 20 cases, or 22.6 cases per 100,000 individuals, of syphilis in Rockdale. This is approximately the same as the cases and rate in 2014.
- In 2014, there were 135 cases of gonorrhea, compared to 196 cases in 2017.
- There were 576.6 cases of chlamydia in 2014 and 638 cases in 2017.
- There were less than 5 new cases of HIV in 2014 that were tested or received care by the Health Department. There were 5 cases in 2017.

## Determinants of Health

*The social determinants of health are the circumstances in which people are born, grow up, live, work and age, and the systems put in place to deal with illness. These circumstances are in turn shaped by a wider set of forces: economics, social policies, and politics.*

-WHO

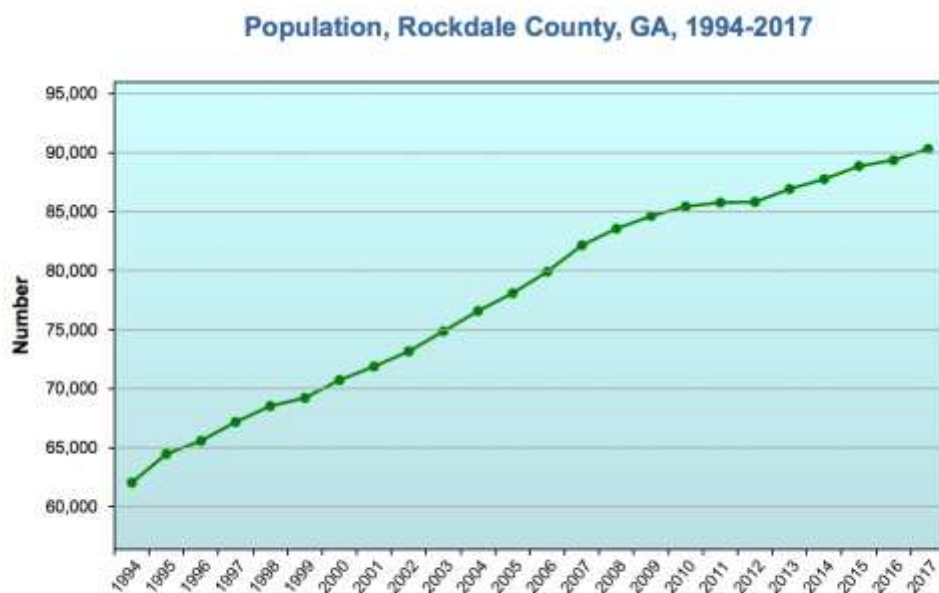
## Demographics and Diversity

To understand and improve health- and health determinants- in Rockdale County, we must first consider the county and its residents.

Rockdale County is located in the Atlanta metropolitan area's eastern suburbs about 25 miles from downtown Atlanta. Over the past 4 decades, the county has grown dramatically, increasing nearly 50% from 1994 to 2017 (Figure). The fastest rate of population growth took place from 1970 to 1980 when the population more than doubled from 18,152 to 36,747, but the population still grew by over 10% from 2007 to 2017. The city of Conyers (population 16,015

[https://www.google.com/publicdata/explore?ds=kf7tgg1uo9ude &met\\_y=population&hl=en&dl=en#!ctype=l&strail=false&bcs=d&nselm=h&met\\_y=population&scale\\_y=lin&ind\\_y=false&rdim=country&idim=place:1319336&ifdim=country&hl=en\\_US&dl=en&ind=false](https://www.google.com/publicdata/explore?ds=kf7tgg1uo9ude&met_y=population&hl=en&dl=en#!ctype=l&strail=false&bcs=d&nselm=h&met_y=population&scale_y=lin&ind_y=false&rdim=country&idim=place:1319336&ifdim=country&hl=en_US&dl=en&ind=false)) is the only incorporated area in the county.

Figure

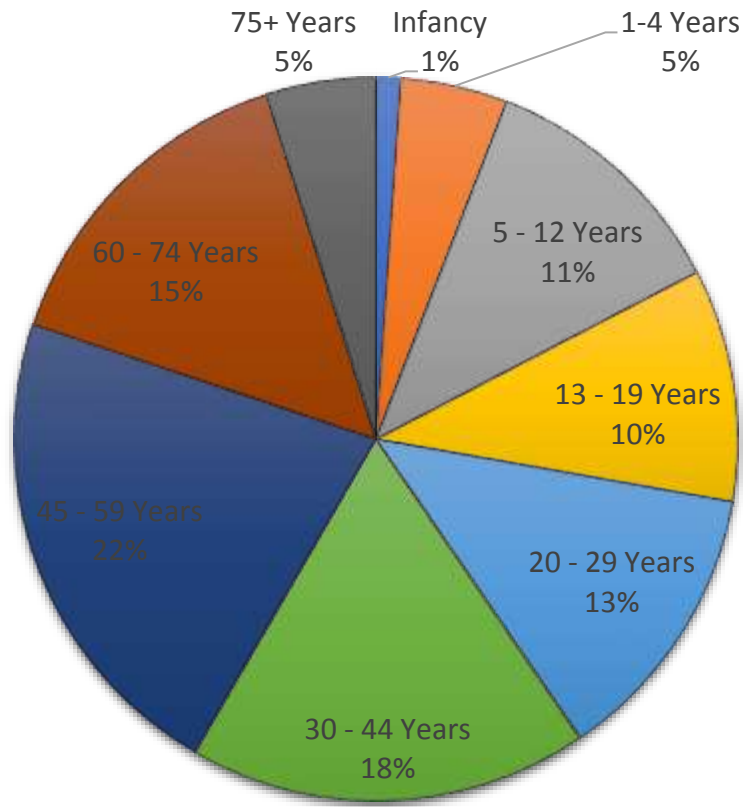


It is important to note that annual population estimates suggest that the rapid population growth apparent in Figure has slowed by 2008, likely due to the economic recession. From 2006 to 2007, the county added an estimated 2,235 residents, but from 2011 to 2012, the estimated increase was only 55 people. Growth has picked up somewhat since then, however, with an average population increase of 898 people per year from 2012 to 2017 (oasis).

### **Age Distribution**

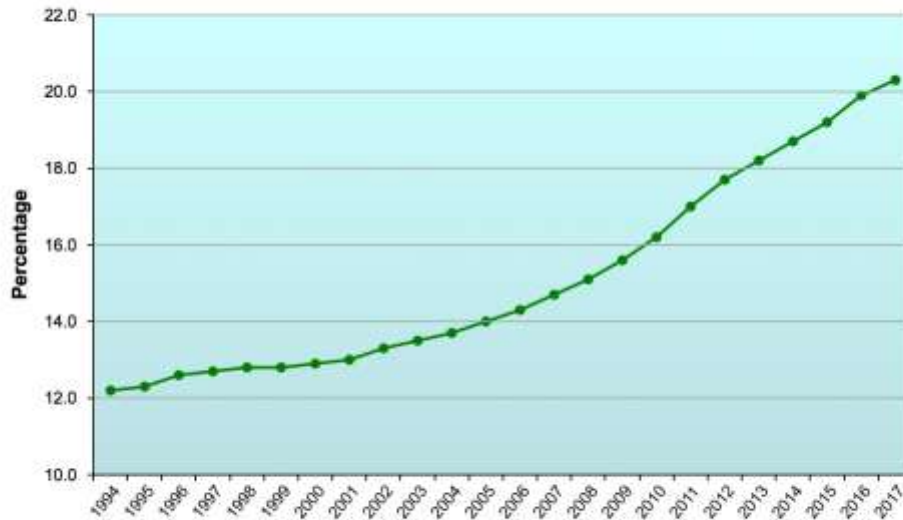
In the 2000 and 2010 censuses, Rockdale County's population was predominantly composed of children and middle-aged adults. However, the county is "home to the fastest growing senior population in the Metro Atlanta region," according to the Rockdale County Comprehensive Transportation Plan (citation). The number of residents 60 years and older grew by 53% from 2000 to 2010, more than twice the overall increase in population during that time (22%), and this group accounted for nearly one-third of the overall population increase. By comparison, there were smaller population increases among children and an even smaller decrease among adults age 35 to 39 years. In 2010, nearly one-third of the population was younger than 20 years old and about one in nine residents was 65 years or older.

As depicted in Figure below, 1% of the population is less than one year old; 5% is 1 to 4 years old; 11% is 5 to 12 years old; 10% is 13 to 19 years old; 13% is 20 to 29 years old; 18% is 30 to 44 years old; 22% is 45-59 years old; 15% is 60 to 74 years old; and 5% is 75 or more years old.



As stated previously, the number of adults who are aging has increased significantly since 2000. Figure shows the trends in the percent of the population over the age of 60, a group that now makes up over 20% of Rockdale's population.

Percent of Population by Age, 60+ Years of Age, Rockdale County, GA, 1994-2017



## Birth Rate

The number and rate of births declined steadily from 2008 to 2012 and had a small uptick from 2012 to 2015 before decreasing again in 2016 and 2017 (Figure). In 2017, 68.8% of births in Rockdale were repeat births.

Number of Births, Rockdale County, GA, 1994-2017



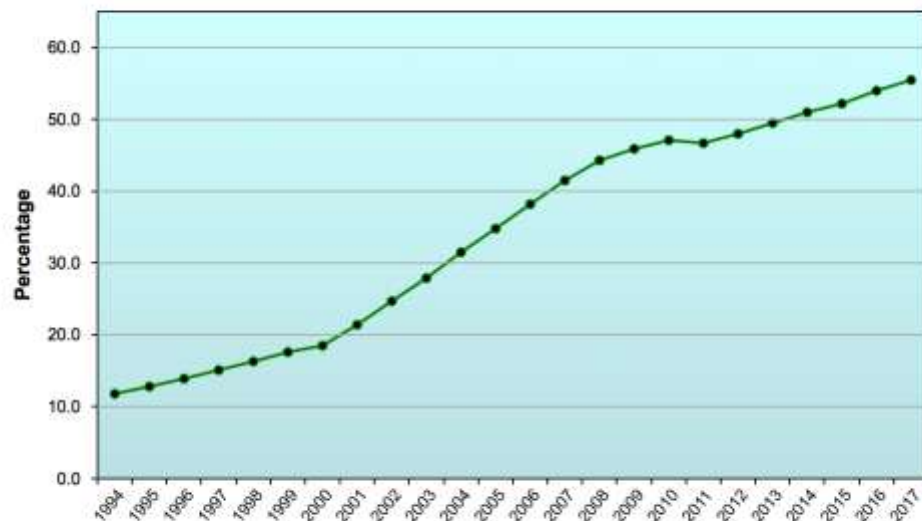
## Diversity

Rockdale County has grown increasingly diverse since 1990. While the percent of the population that is white has decreased significantly (from over 86.6% in 1994 to 39.9% in 2017), the percentage of black or African American individuals has increased substantially (from 11.8% in 1994 to 55.5% in 2017) (Figures).

**Percent of Population by Race, White, Rockdale County, GA, 1994-2017**



**Percent of Population by Race, Black or African-American, Rockdale County, GA, 1994-2017**



In 1994, multiracial residents made up 0.0% of the population, but in 2017, 2.1% of the population was multiracial. The percent of Rockdale's population that is Asian has decreased

from 2.0% in 2000 to 1.8% in 2017. While the American Indian or Alaska Native and Native Hawaiian or Other Pacific Islander groups have increased slightly since 1994, they still make up a very small part of Rockdale's population (0.6% and 0.1% respectively).

Within these racial categories, 10.5% of individuals identify as Hispanic or Latino. In the 2010 census, the Hispanic or Latino population of Rockdale county (9.5% at that time) was majority Mexican (7.2% of the total population) and the remaining Hispanic or Latino population identified as Puerto Rican (0.7%), Cuban (0.2%), or other Hispanic or Latino (1.3%). Among the 1.8% of the population that reported being Asian in 2010, 0.6% were Asian Indian, 0.4% were Vietnamese, 0.2% were Filipino, 0.2% were Korean, 0.1% were Chinese, and 0.3% were other Asian.

According to the U.S. Census Bureau's five-year estimates for 2012 to 2016, 9.6% of Rockdale County Residents were foreign born. Among these estimated 8,670 foreign born residents, 43% were born in Mexico, 24% were born in Latin America, 16% were born in Asia, 6% were born in Europe, and 11% were born in other foreign nations. (<http://maps.gcir.org>).

Because an estimated 32% of the foreign-born population over the age of 5 in Rockdale speak English less than well, linguistic isolation is a point of concern. In addition, 11.2% of Rockdale's residents over the age of 5 speak a language other than English at home (<https://www.census.gov/quickfacts/fact/table/US,GA,rockdalecountygeorgia/IPE120216>).

## **Families and Households**

According to the U.S. Census Bureau's five-year estimates for 2012 to 2016, there were 29,940 households in Rockdale County with an average of 2.9 people per household, compared to an estimated 30,027 households with an average of 2.8 people per household in 2010. Families – defined as a householder with at least one related person – made up 88% of households; over half (57%) were married couple families and 31% were families without a married couple. 12% were non-family households.

<https://censusreporter.org/profiles/06000US1324790774-conyers-ccd-rockdale-county-ga/>

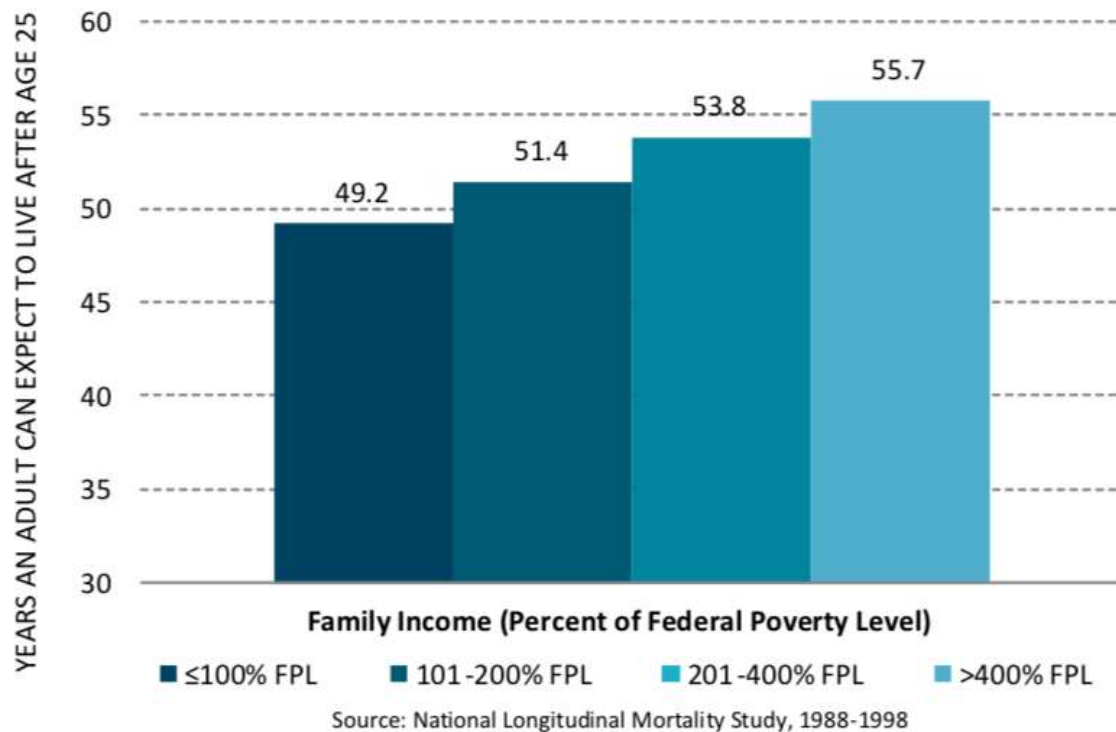
Rockdale County's population has been quite mobile. According to 2012 to 2016 estimates, 15.6% of residents moved or changed residence in the previous year. (<https://www.census.gov/quickfacts/fact/table/US,ga,rockdalecountygeorgia/POP715216#viewtop>)

## **Economy and Basic Needs**

*Few people would deny that there are many advantages of having more income or wealth. Nevertheless, apart from the well-known link between economic resources and being able to afford health insurance and medical care, their influence on health has received relatively little attention from the general public or policy-makers, despite a large body of evidence from studies documenting strong and pervasive relationships between income, wealth and health.*

*-Robert Wood Johnson Foundation (RWJF), Report on Income, Wealth, and Health\*citation in 2014 report*

As described by the Robert Wood Johnson Foundation above, there are strong links between income, wealth, and healthy, which is why any health assessment must include an examination of these factors. To give just one example of the connection between income and health, life expectancy at age 25 is closely correlated with income as a percentage of the federal poverty level (FPL). Life expectancy at age 25 was more than 6 years longer for people earning more than 4 times the FPL compared with those earning less than or equal to the FPL (Figure\*).



We will examine income indicators for Rockdale County first and then markers of poverty within the county.

### Household Income

Rockdale County's median household income (\$51,072) was just slightly higher than the median household income for Georgia (\$51,037), but lower than the median household income in the United States (\$55,322) for years 2012 to 2016.

<https://www.census.gov/quickfacts/fact/table/US,ga,rockdalecountygeorgia/POP715216#viewtop>

When just looking at data from 2016, Rockdale County's median household income (\$56,700) is higher than that of Georgia (\$53,500)

<http://www.countyhealthrankings.org/app/georgia/2018/rankings/rockdale/county/outcomes/overall/snapshot> and less substantially lower than that of the United States (\$57,617).

<https://www.census.gov/content/dam/Census/library/publications/2017/acs/acsbr16-02.pdf>



White residents had the highest median household income in Rockdale (\$54,100), followed by Black residents (\$51,400), and Hispanic residents (\$33,200).

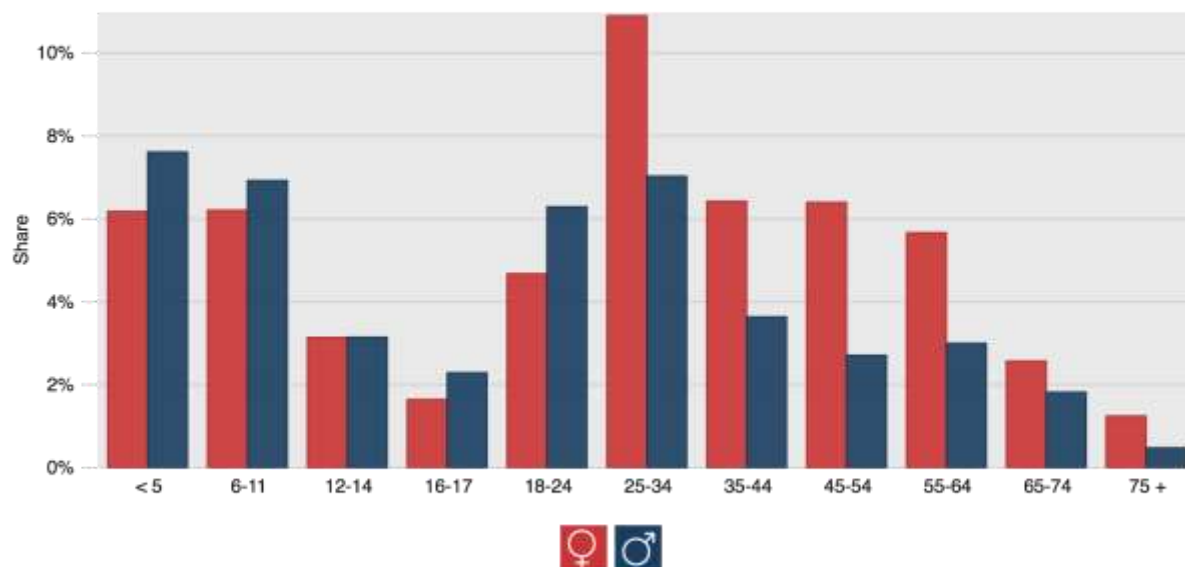
## Poverty

Although the county's median income was higher than the state's, large numbers of residents live in poverty. In 2016, 14.7% of Rockdale's population was living in poverty, which is a slight increase from the 2008 to 2012 estimate of 14%. Further, 24% of children were living in poverty. Of that percentage, 48% of children living in poverty were Hispanic, 27% were Black, and 12% were White.

(<https://www.census.gov/quickfacts/fact/table/US.ga.rockdalecountygeorgia/IPE120217> and <http://www.countyhealthrankings.org/app/#!/georgia/2018/rankings/rockdale/county/outcomes/overall/snapshot>). The following chart represents the percent of people living in poverty by age group and gender (Figure\*). <https://datausa.io/profile/geo/rockdale-county-ga/>

### Poverty by Age and Gender in Rockdale County

The closest comparable data for the county of Rockdale County, GA is from the public use microdata area of Newton & Rockdale Counties PU!



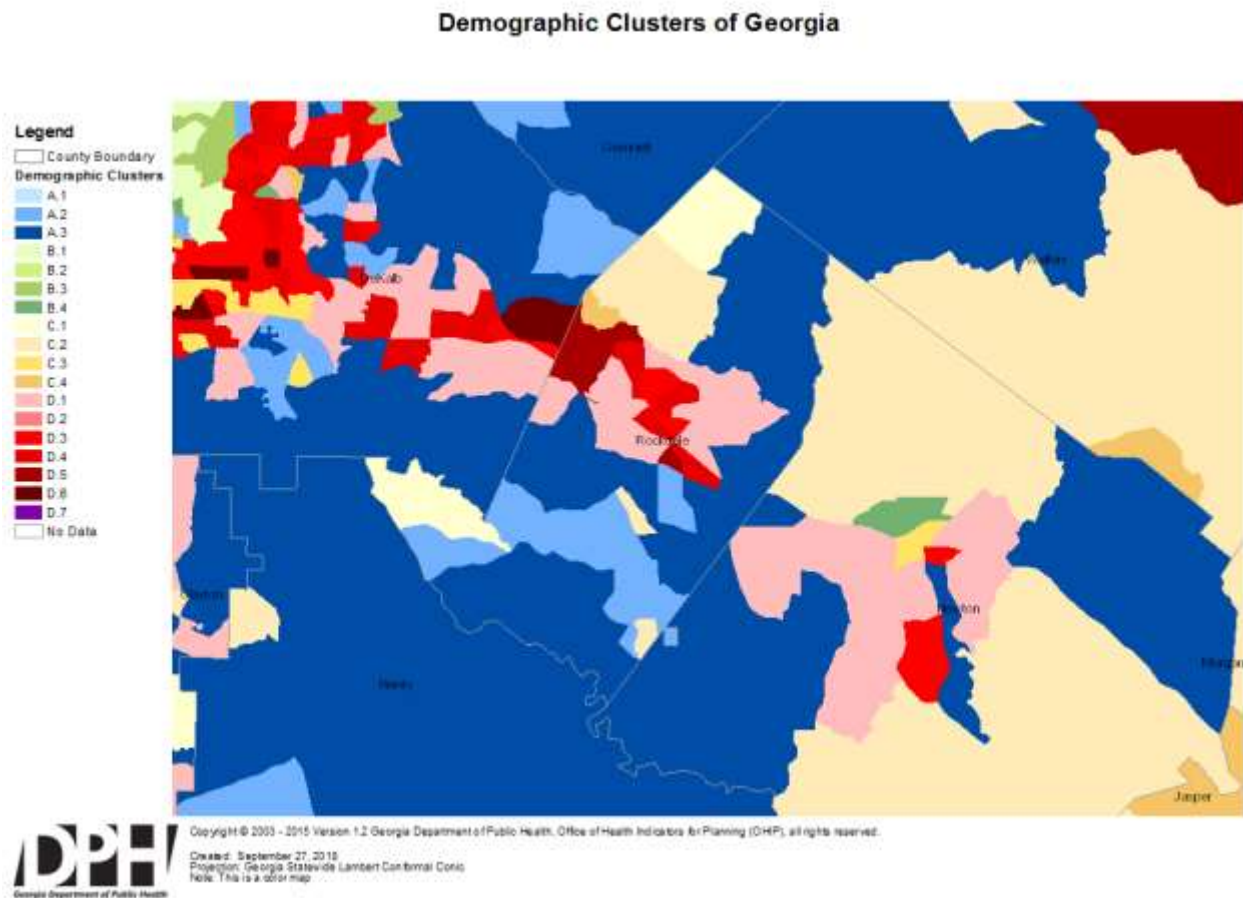
Dataset: ACS 5-year Estimate  
Source: Census Bureau

DATAUSA:

In 2015 to 2016, 71% of students were eligible to receive free or reduced-price school meals which was higher than the same measure in 2013 (66%) and 2000 (25%). This measure is also higher than the percent of students who were eligible during 2015 to 2016 to receive free or reduced-price school meals in all of Georgia (62%).

<http://www.countyhealthrankings.org/app/georgia/2018/rankings/rockdale/county/outcomes/overall/snapshot>

Demographic data suggest that some of the poverty in the county is clustered along the west-central portion of the county along interstate 20, including part of the city of Conyers (Figure\*, 2011, from 2010 Census).



Detailed descriptions of demographic cluster groups are available at <https://oasis.state.ga.us/gis/demographiccluster/documents/DemoClusters2011Description.pdf>  
 Blue colors represent higher income areas; yellow and red colors represent lower income areas.

## Employment and Income

Among workers who commute in their care alone, 46% commute more than 30 minutes.  
<http://www.countyhealthrankings.org/app/#!/georgia/2018/rankings/rockdale/county/outcomes/overall/snapshot> From 2012 to 2016 in Rockdale County, the mean travel time to work for workers age 16 years or older was 30.8 minutes.  
<https://www.census.gov/quickfacts/fact/table/US.ga.rockdalecountygeorgia/IPE120217>

From 2012 to 2016, an estimated 62% of the county's population age 16 years and older was employed. This is a 6% decrease from the time period of 2008 to 2012.

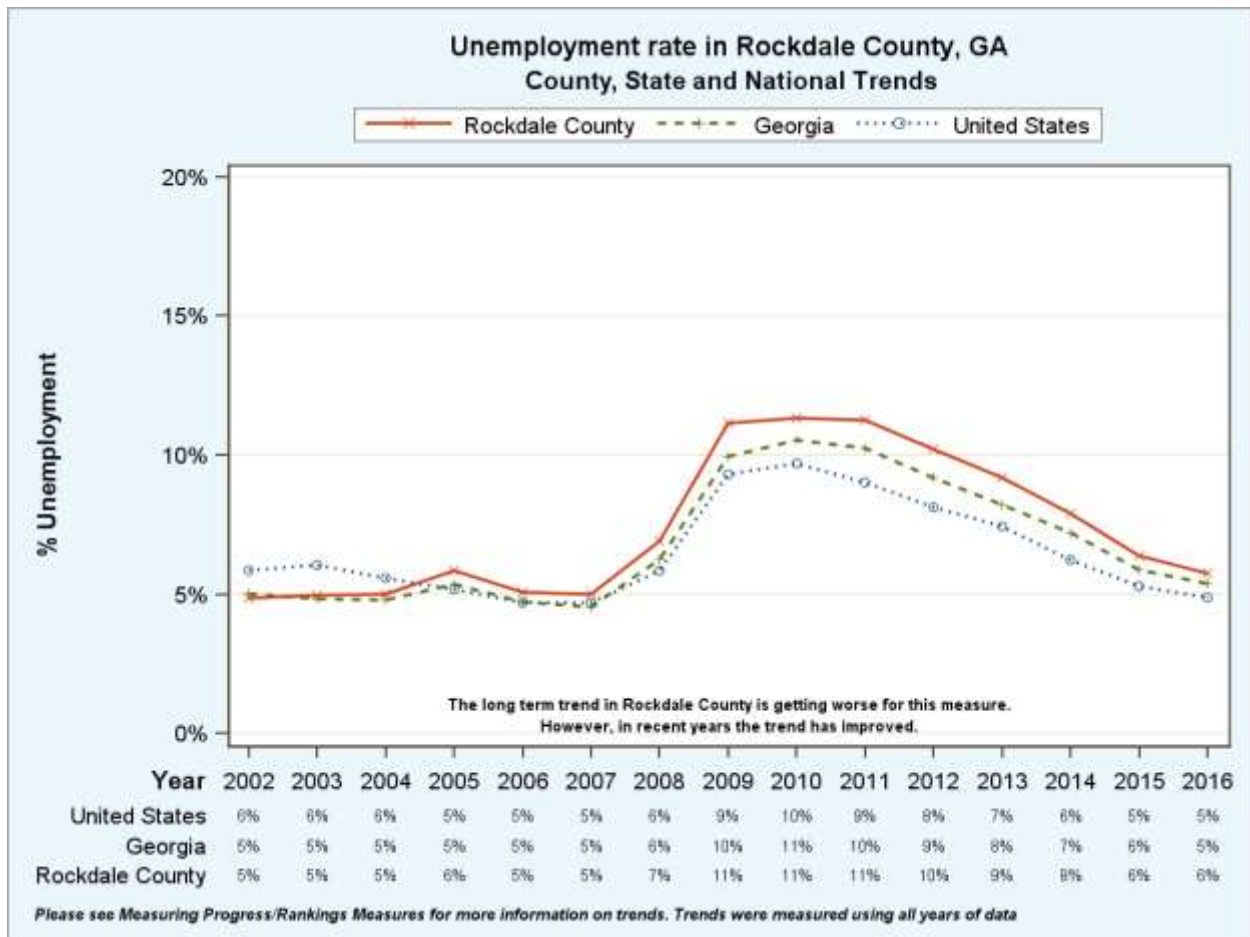
Since 2007, unemployment has become a major problem for Rockdale County, as it has for much of the nation. According to the Robert Wood Johnson Foundation, job loss and

unemployment are linked to a number of health problems, including stress-related conditions like stroke and heart disease

([http://www.rwjf.org/content/dam/farm/reports/issue\\_briefs/2013/rwjf403360](http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2013/rwjf403360)). In 2016, 5.7% of Rockdale's population was unemployed but seeking work (rankings), which was much improved from the 2010 peak of nearly 12.5% and is nearing the lower rates seen in the early 2000s (figure- choose one).

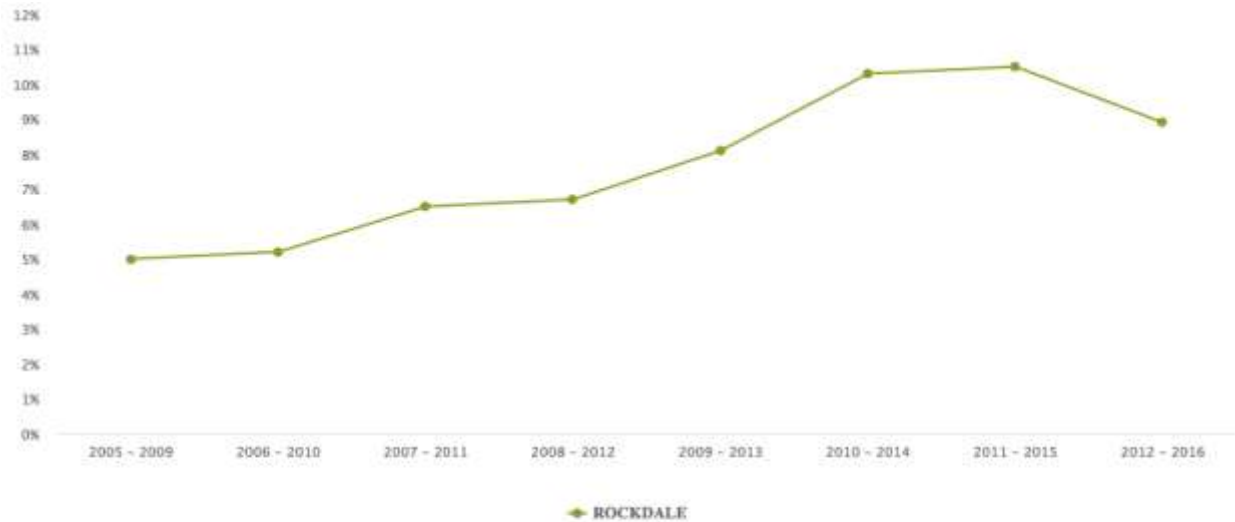


<https://fred.stlouisfed.org/series/GAROCK7URN>



(county health rankings)

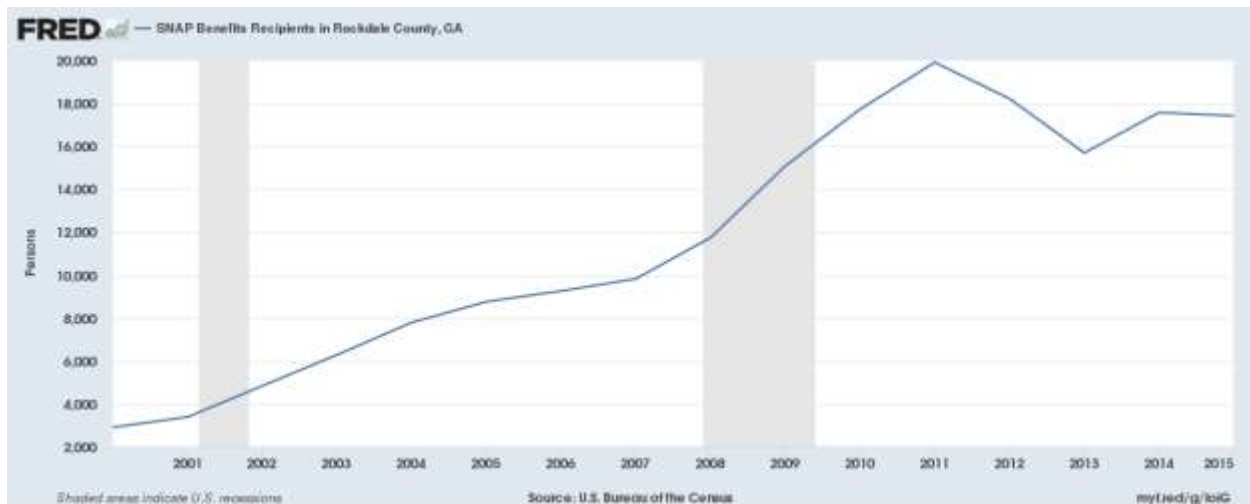
While the unemployment rate has improved over time, the percentage of children with parents who lacked employment has generally increased since 2005. During the years 2012 to 2016, 8.9% of children in Rockdale County had parents who lacked employment. The estimates for five-year periods since 2005 are in the figure below.



## Children Whose Parents Lack Secure Employment

Georgia Family Connection Partnership  
 KIDS COUNT Data Center, [datacenter.kidscount.org](http://datacenter.kidscount.org)  
 A project of the Annie E. Casey Foundation

In 2015, 17,423 individuals in Rockdale County were receiving SNAP benefits (approximately 19% of the population) <https://fred.stlouisfed.org/series/CBR13247GAA647NCEN> Figure\* shows the trend in number of individuals receiving SNAP benefits in Rockdale County.



## Housing

*Where we live is at the very core of our daily lives. Housing is generally an American family's greatest single expenditure, and, for homeowners, their most significant source of wealth. Given its importance, it is not surprising that factors related to housing have the potential to help- or harm- our health in major ways.*

*-Robert Wood Johnson Foundation, Report on Housing and Health (citation in 2014 report)*

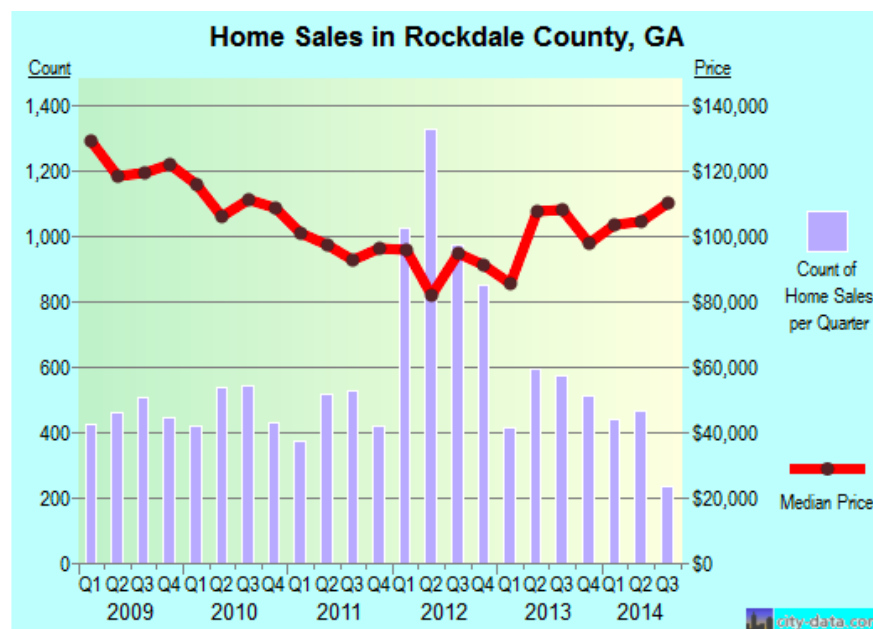
As noted by the Robert Wood Johnson Foundation, housing can strongly affect health.

According to the U.S. Census Bureau, in July of 2017, there were 33,619 housing units in Rockdale County. About 68% of Rockdale County housing units were owner-occupied from 2012 to 2016. From 2012 to 2016, the median monthly housing cost in Rockdale County was \$1,259 for mortgage owners and \$344 for non-mortgage owners (census quick facts). The median monthly housing cost for renters was \$922.

A relatively high percentage of Rockdale County residents are considered “cost burdened” when it comes to housing. The Department of Housing and Urban Development defines cost burdened households as those that pay more than 30% of income for housing. People in these households may have difficulty affording necessities like food, transportation, and medical care.

Housing foreclosures have been a major problem for many Rockdale County residents in recent years. Related to the foreclosure trend, prices from home sales declined substantially since 2008, but increased in 2013 (figure\*). From 2012 to 2016, the median value of owner-occupied housing units was \$143,400, which is lower than the Georgia (\$152,400) and U.S. (\$184,700) values. This value has also decreased since the 2008 to 2012 time period in which the median value was \$156,200

(<https://www.census.gov/quickfacts/fact/table/US,ga,rockdalecountygeorgia/IPE120217>).



[http://www.city-data.com/county/Rockdale\\_County-GA.html](http://www.city-data.com/county/Rockdale_County-GA.html)

Estimates of the number of individuals experiencing homelessness in Rockdale County are sparse and somewhat unclear, but the Georgia Department of Community Affairs' 2015 Report on Homelessness estimated through a point-in-time count that there are 59 individuals experiencing homelessness who are unsheltered and 41 individuals experiencing homelessness who are sheltered (in emergency or transitional housing), making a total of 100 individuals experiencing homelessness in Rockdale County. It was also estimated at this time that there were

74 emergency and transitional beds for those experiencing homelessness in Rockdale.

<https://www.cityofhinesville.org/DocumentCenter/View/1880/2015-State-Homelessness-Report>

## **Education and Child Activities**

*Everyone knows that without a good education, prospects for a good job with good earnings are slim. Few people think of education as a crucial path to health, however. Yet a large body of evidence strongly- and, with very rare exceptions, consistently- links education with health, even when other factors like income are taken into account.*



*-Robert Wood Johnson Foundation, Report on Education and Health*

Rockdale County residents have education levels similar to people across the state and the nation. Rockdale County residents were more likely to have completed high school than were people statewide or nationwide but were slightly less likely to have completed a bachelor's degree. The county has a large public-school system and several institutions of higher learning.

From 2012 to 2016, an estimated 87% of Rockdale County residents 25 years and older were high school graduates, which was higher than the percentage for Georgia (85.8%) and the same as the nation (87%). About one in four (26%) residents age 25 years and older had a bachelor's degree or higher. By comparison, 29.4% and 30.3% of Georgia and U.S. residents held a bachelor's degree, respectively (census quick facts).

The Rockdale County Public School System (RCPSS) serves the entire county and includes 11 elementary schools, 4 middle schools, 3 high schools, 4 non-traditional schools (including a Career Academy and STEM Magnet School), 1 virtual campus, and 14 specialty and choice programs. All are fully accredited by AdvancEd, the parent company for the Southern Association of Colleges and Schools. <https://www.rockdaleschools.org/about>  
As of 2013, Georgia began measuring school districts using the Georgia College and Career Readiness Performance Index (CCRPI) on a 100 point scale. The score from the 2015 to 2016 school year increased nearly 4 percentage points from the year before, putting the RCPSS at an overall score of 76.5. This was the second year in a row that the RCPSS outperformed the state average on the CCRPI.

In addition, the four-year average for graduation rate increased to a graduation rate of 83.3% <https://www.rockdaleschools.org/cms/one.aspx?portalId=136388&pageId=5216446> in 2016, which is just below the national rate of 84.1% [https://nces.ed.gov/ccd/tables/ACGR\\_RE\\_and\\_characteristics\\_2015-16.asp](https://nces.ed.gov/ccd/tables/ACGR_RE_and_characteristics_2015-16.asp) and above the Georgia rate of 79.4% <http://www.gadoe.org/External-Affairs-and-Policy/communications/Pages/PressReleaseDetails.aspx?PressView=default&pid=567>. At this time, four out of five RCPSS high school students were graduating on time and receiving a diploma in four years, which is a vast improvement from 2011 when the four-year cohort rate was 66%. <https://www.rockdaleschools.org/cms/one.aspx?portalId=136388&pageId=5216446>

The Rockdale Center and Rockdale Career Academy campuses of Georgia Piedmont Technical College are located within the county <https://www.gptc.edu/future-students/locations/>. The Rockdale County Extension Office of the University of Georgia College of Agricultural and Environmental Sciences is also located in Conyers <http://extension.uga.edu/county-offices/rockdale.html>.

## **Transportation**

*Transportation decisions affect our individual lives, economy and health. Everyone needs to use various modes of transportation to get to work or school, to get medical attention, to access healthy foods at grocery stores and markets, and to participate in countless other activities every day. -American Public Health Association (citation in report)*



## **Vehicle Transportation**

Rockdale County is generally highly dependent on personal vehicles for transportation, though portions of the city are classified as walkable (<https://www.walkscore.com/score/1209-lester-rd-nw-conyers-ga-30012>). As stated previously, the average travel time to work in Rockdale County from 2012-2016 was estimated to be 30.8 minutes, which was longer than the Georgia average of 27.7 and the national average of 26.1 minutes (census quick facts). Lengthy commutes cut into workers' free time and can contribute to health problems like headaches, anxiety, and increased blood pressure. Longer commute times also require workers to consume more fuel, which is both expensive to workers and damaging to the environment.

According to Rockdale County's 2009 Comprehensive Transportation Plan, which underwent a revision process during 2017, certain groups of people are often dependent on public transit and include "the elderly, the disabled, low income individuals and households without private transportation." An estimated 6.5% of households do not have access to a vehicle for private use. [http://www.city-data.com/county/Rockdale\\_County-GA.html](http://www.city-data.com/county/Rockdale_County-GA.html)

Public transit is limited within the county. According to the Rockdale County Comprehensive Transportation Plan, "regional bus service operated by Georgia Regional Transportation Authority (GRTA) and a limited amount of transportation services for residents ages 60 and over are currently available in Rockdale County. No conventional, fixed route, fixed schedule transit service or rail transit service is currently provided in Rockdale County."

While the Blue Bus was introduced in previous years, this bus is not currently running and it is unclear whether it will be running in the near future. The website appears to have outdated information, suggesting that the bus is running and has specific routes, but it is and does not. <http://www.catchthebluebus.com/ctbb/>

The Comprehensive Plan highlights several transportation programs for residents ages 60 and over offered by Rockdale County Senior Services, which include fixed-route transportation services, demand response services, group shopping, and a transportation voucher program. <https://rockdalecountyga.gov/wp-content/uploads/2016/09/Rockdale-2009-CTP-Final-Report.pdf>

## **Bicycle and Pedestrian Facilities**

Walking and biking have clear health benefits and are particularly beneficial in Rockdale County given the large burden of inactivity and chronic diseases. The Rockdale County Comprehensive Transportation Plan includes information on bicycle and pedestrian facilities. The report emphasizes that proper design is important to maintain safety for those on foot or riding a bicycle. Also according to the plan, "everyone is a pedestrian at one point in almost every trip, even if the primary mode of travel for a trip involves a personal vehicle or transit." <https://rockdalecountyga.gov/wp-content/uploads/2016/09/Rockdale-2009-CTP-Final-Report.pdf>

The plan suggests that Rockdale has a fairly well-developed sidewalk network in the City of Conyers and a basic network in Rockdale County. While there are sidewalks in the areas around school and community facilities, there are observed gaps in sidewalks or they exist only on one side of the road.

The plan points out that the county and city have several trails located within parks. Portions of the Arabia Mountain, Rockdale County, and River Trails, supported by the PATH Foundation, are located within the county (<http://pathfoundation.org/trails/arabia-mountain/>). However, according to data cited in the plan, the average “Level of Service” for existing bike lanes in Rockdale County was rated as grade D. Although this level was better than the grade of F that the Atlanta metropolitan region received, it is below what is considered adequate for bicycle connectivity. <https://rockdalecountyga.gov/wp-content/uploads/2016/09/Rockdale-2009-CTP-Final-Report.pdf>

Community input is important when determining future steps for a transportation network. Listed below is input from community members about bicycle and pedestrian facilities and public transportation from community stakeholder meetings, as described in the Comprehensive Transportation Plan.

- Need a bicycle plan for the city
- Need multi-use paths
- More bicycle and pedestrian facilities in Downtown neighborhoods
- Sidewalk and golf cart paths needs within a ¼ mile radius of activity nodes
- Needs of greens space and trails in northern County
- Connect the trails from DeKalb County in the southern part of the County
- Better bicycle and pedestrian facilities around schools, parks, recreation areas, and civic areas
- Bicycle and pedestrian safety improvements around Flat Shoals Road and Parker Road
- Pedestrian refuge need at certain locations
- Retrofit some intersections to increase a pedestrian friendly environment
- Need inter county transit system
- Potential of Light Rail transit is at the Park & Ride but people need some place to go; need to make Rockdale a destination, not just a pass-through
- Shuttle needs between urban centers for seniors

<https://rockdalecountyga.gov/wp-content/uploads/2016/09/Rockdale-2009-CTP-Final-Report.pdf>

## **Environment**

*By focusing on reducing environmental and social risk factors, nearly a quarter of the global burden of disease can be prevented.*

*-WHO's Department of Public Health, Environmental and Social Determinants of Health*

[http://www.who.int/phe/about\\_us/en/](http://www.who.int/phe/about_us/en/)

According to the County Health Rankings, Rockdale's physical environment ranked 110<sup>th</sup> of the 159 Georgia counties (compared to 103<sup>rd</sup> at the time of the 2014 CHA). The Healthy Communities Institute defines the physical environment as all places where we live and work (e.g., homes buildings, streets, and parks). The environment influences a person's level of physical activity and ability to have healthy lifestyle behaviors. For example, inaccessible or nonexistent sidewalks or walking paths increase sedentary habits. These habits contribute to obesity, cardiovascular disease, and diabetes. Factors that contribute to healthy lifestyle behaviors include access to grocery stores and recreation facilities. Environmental aspects that contribute or impede health are tightly knit with demographic factors such as socioeconomic status and race and ethnicity. This reiterates the importance of considering the social determinants of health when discussing the health status of a community.

### **Access to Healthy Foods**

In 2014, the county had 21 grocery stores per 100,000 population, which was similar to the nationwide county average <https://www.ers.usda.gov/data-products/food-environment-atlas/go-to-the-atlas.aspx#Um68NcC-qtE>. There are strong correlations between the density of grocery stores in a neighborhood and the nutrition and diet of its residents. According to the U.S. Department of Agriculture, an estimated 35,030 (nearly 39%) Rockdale residents (including 9,623 children and 3,452 seniors) had low access to a grocery store in 2015 and an estimated 516 households had no car and low access to a grocery store. Additionally, there were 1,142 families receiving SNAP benefits who had low access to a grocery store. About 15% of low-income residents had low access to a grocery store. <https://www.ers.usda.gov/data-products/food-environment-atlas/go-to-the-atlas.aspx#Um68NcC-qtE>

People who live in certain areas of Rockdale County have less access to fresh foods than others. The U.S. Department of Agriculture defines a food desert as a census tract with a substantial share of residents who live in low-income areas and have low levels of access to a grocery store or a healthy, affordable food retail outlet (<http://apps.ams.usda.gov/fooddeserts/>). Often, however, communities do display resilience in addressing their food access-related needs through backyard or community gardens and smaller, ethnic food stores.

The figure below shows the low-income census tracts in Rockdale where a significant number or share of residents is more than 1 mile (urban) or 10 miles (rural) from the nearest supermarket. The green spaces represent these low-income and low access areas. Census tracts in the center of Rockdale County, including part of the city of Conyers and areas bordering interstate 20, are considered food deserts (figure\*).



## **Liquor Stores**

In 2018, Rockdale County had a liquor store density of approximately 9.9 per 100,000 people, a slight increase from 9 per 100,000 in 2011. Studies have shown that neighborhoods with a high density of alcohol outlets are associated with higher rates of violence, regardless of other community characteristics like poverty and age of residents. High alcohol outlet density has been shown to be related to increased rates of drinking and driving, motor vehicle-related pedestrian injuries, and child abuse and neglect.

Rockdale County Sheriff's Department

## **Parks and Recreation**

Rockdale had an estimated 8 recreation or fitness facilities per 100,000 residents in 2010, which was the same as the Georgia average but lower than the national benchmark of 16 per 100,000 (<http://www.countyhealthrankings.org/app/georgia/2013/measure/factors/68/map>).

## **Water Safety**

According to the Safe Drinking Water Information System cited in the County Health Rankings, drinking water safety in Rockdale County was good. In 2016, no residents were reported to have been exposed to water exceeding a violation limit.

<http://www.countyhealthrankings.org/app/georgia/2018/measure/factors/124/map>

## **Air Quality**

According to the County Health Rankings, in 2012, the average daily measure of fine particulate matter (10.7 micrograms per cubic meter)

<http://www.countyhealthrankings.org/app/georgia/2018/rankings/rockdale/county/outcomes/overall/snapshot> in Rockdale County exceeded the state average but came in below the national benchmark of 12 micrograms per cubic meter.

<https://www3.epa.gov/region1/airquality/pm-aq-standards.html> Rockdale ranks in the 10<sup>th</sup> percentile in the U.S. for average daily measure of fine particulate matter and was one of 21 metropolitan Atlanta counties with poor air quality in 2014.

## **Safety**

### **Violent Crime Rate**

For the years 2012 to 2016, the violent crime rate in Rockdale County was 334 per 100,000 population, which was lower than the Georgia rate (374 per 100,000).

<http://www.countyhealthrankings.org/app/georgia/2018/measure/factors/43/map>

From 2013 to 2017, violent crime (assault and homicide) was the sixth leading cause of premature death in the county. <https://oasis.state.ga.us/CHNADashboard/Default.aspx>

### **Motor Vehicle Collisions**

Motor vehicle-related injuries kill more children and young adults than any other single cause in the United States and they were the third leading cause of years of potential life lost (i.e., premature death) in Rockdale County from 2013 to 2017.

<https://oasis.state.ga.us/CHNADashboard/Default.aspx>

Rockdale County had a death rate due to motor vehicle collisions in 2010 to 2016 that was similar to the Georgia rate (12 vs. 13 per 100,000) and met the Healthy People 2020 goal of 12 per 100,000.

<http://www.countyhealthrankings.org/app/georgia/2018/rankings/rockdale/county/outcomes/overall/snapshot>

<https://www.healthypeople.gov/2020/topics-objectives/topic/injury-and-violence-prevention/objectives>

For the years 2006 to 2008, the Rockdale County rate was 17.1 per 100,000, suggesting the rate had improved in recent years. According to the CDC, one in three crash deaths involve a drunk driver, suggesting that alcohol is likely involved in many Rockdale County motor vehicle-related deaths as well ([http://www.cdc.gov/vitalsigns/drinkinganddriving/?s\\_cid=vitalsigns-093-bb](http://www.cdc.gov/vitalsigns/drinkinganddriving/?s_cid=vitalsigns-093-bb)). In fact, from 2012 to 2016, an estimated 22% of driving deaths in Rockdale County involved alcohol.

<http://www.countyhealthrankings.org/app/georgia/2018/rankings/rockdale/county/outcomes/overall/snapshot>

### **Poisoning**

According to Poison Control, there were 2,159,032 human exposures to poison in 2016 and children under the age of six comprise a disproportionate percentage of the cases.

<https://www.poison.org/poison-statistics-national>

Poisonings are a leading cause of death nationwide and were the fifth leading cause of premature death in Rockdale County from 2013 to 2017.

<https://oasis.state.ga.us/CHNADashboard/Default.aspx>

In 2017, the age-adjusted death rate for poisoning was 12.7 and from 2010 to 2017, there were 84 deaths due to poisoning. <https://oasis.state.ga.us/oasis/webquery/qryMortality.aspx>

The Rockdale Coalition's Community Resource List provides information on legal resources.

<http://www.rockdalecoalition.org/wp-content/uploads/2018/01/CRN-Resource-Guide-01-18.pdf>



The Rockdale County Task Force on Family Violence is a long-standing organization that works to end family violence in the county and increase victim safety and offender accountability through “coordinating local services and effecting change through creating a coordinated community response to domestic violence.” <https://gcfv.georgia.gov/what-family-violence-task-force-0>

## **Emergency Preparedness**

Rockdale County has several agencies and organizations that plan for and respond to emergencies, which include natural disasters (e.g., floods), man-made accidents (e.g., train wreck involving a chemical spill), disease epidemics or pandemics, and intentional acts of terrorism involving chemical, biological, or radiological devices. These groups include the Emergency Preparedness Department of the Health Department (website), the Rockdale County Emergency Services Department (website), the Rockdale County Sheriff’s Office (website), hospitals, emergency medical services (EMS), and volunteer groups, such as the Medical Reserve Corps (website). Other partners include the Georgia Department of Public Health, the Georgia Emergency Management Agency, the Centers for Disease Control (CDC), and the Federal Emergency Management Agency (FEMA).

The Strategic National Stockpile (SNS) is a national storehouse of medical supplies and pharmaceuticals maintained by the CDC and local health departments, including the Rockdale County Health Department. It is deployed during an emergency situation in which a chemical or biological agent, such as anthrax or plague, is released into our community, which might happen by accident or as a part of a terrorist attack (Partners in Preparedness website).

Information for Rockdale County residents on preparing themselves and their families for emergencies, including specific situations like floods, tornadoes, and hurricanes, as well as links to other organizations, is available through the Health Department (Local Preparedness and Safety Information website <http://www.gnrhealth.com/services/emergency-preparedness/local-preparedness-safety/>) and other community sources.

## Health Status

### Overall Health Status

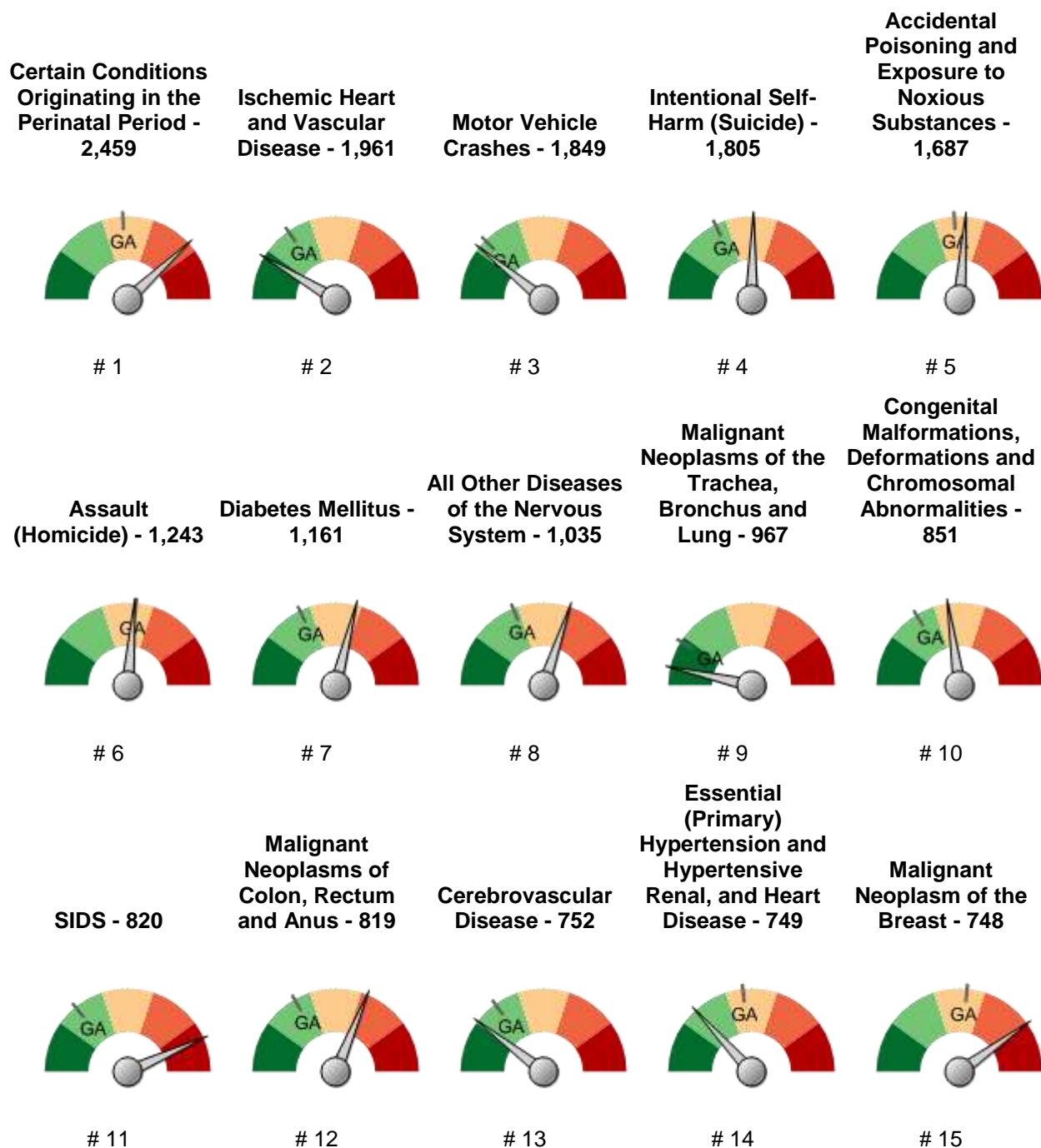
A combined measure of death and disability (like the DALY) in Rockdale County is not available, but data are available on leading causes of premature death in Rockdale County (figures\*\*). This local information is similar to the data from the national level: chronic disease like heart disease and cancer dominate this list. Because this measure examines the number of potential years of life lost before age 75 years, conditions that cause death among children and adolescents are weighted heavily. Deaths from injuries and accidents (motor vehicle crashes, poisoning, assault, and suicide) led to many years of potential life lost; many of these conditions are related to abuse of alcohol and drugs and mental health conditions. Conditions that affect infants (conditions originating in the perinatal period and congenital malformations) were also major causes of premature death; tobacco use and other drugs can increase the risk of these conditions. It is important to note that this measure does not adjust for age, as do many other measures cited in this report, and Rockdale County's relatively younger population likely explains some of the high burden of conditions more common among younger people. In figure \*\* below, the number indicates years of potential life lost due to death before the age of 75 per 100,000 population less than 75 years of age. The "GA" marker indicates the Georgia rate. The second figure outlines the leading causes of premature death for each age group.

<https://oasis.state.ga.us/CHNADashboard/Default.aspx>

It is important to note that intentional harm or suicide is within the top five leading causes of premature death for six of the eleven age groups. In recent years, suicide and mental illness have more prominently come into view as imminent, extraordinarily important issues to address, especially among young people. In Rockdale, it is the number one cause of premature death among children age 10 to 14.



## Ranked Causes and State/County Comparison, Premature Death Rate (YPLL), Rockdale County, 2013 - 2017



Numbers shown are the sum of YPLL, not number of deaths

**Top 10 Causes of Premature Death by selected age groups, Rockdale County,  
2013 - 2017**

Rank	<1 year	1-4 years	5-9 years	10-14 years	15-19 years	20-24 years
1	Certain Conditions Originating in the Perinatal Period  2,459	Congenital Malformations, Deformations and Chromosomal Abnormalities  74	Accidental Exposure to Smoke, Fire and Flames  133	Intentional Self-Harm (Suicide)  64	Motor Vehicle Crashes  340	Assault (Homicide)  470
2	SIDS  820	Malignant Neoplasm of Bladder, Kidney, and Renal Pelvis  73	Motor Vehicle Crashes  69	Motor Vehicle Crashes  62	Assault (Homicide)  111	Motor Vehicle Crashes  368
3	Congenital Malformations, Deformations and Chromosomal Abnormalities  745	Accidental Exposure to Smoke, Fire and Flames  72	Accidental Drowning and Submersion  67		Anemias  60	Intentional Self-Harm (Suicide)  316
4	All Other Endocrine, Nutritional and Metabolic Diseases  75				All Other Diseases of the Nervous System  56	Pneumonia  55
5	All Other Diseases of the Nervous System  75				Intentional Self-Harm (Suicide)  56	Septicemia  54
6	Cerebrovascular Disease  75					Diseases of the Musculoskeletal System and Connective Tissue  54
7	Accidental Exposure to Smoke, Fire and Flames  75					Accidental Poisoning and Exposure to Noxious Substances  54

8	Suffocation	Accidental Drowning and Submersion
	75	53
9		Cerebrovascular Disease
		52
10		All Other Endocrine, Nutritional and Metabolic Diseases
		51

Rank	25-34 years	35-44 years	45-54 years	55-64 years	65-74 years	75+ years
1	Intentional Self-Harm (Suicide) 628	Accidental Poisoning and Exposure to Noxious Substances 451	Ischemic Heart and Vascular Disease 443	Ischemic Heart and Vascular Disease 882	Ischemic Heart and Vascular Disease 404	
2	Accidental Poisoning and Exposure to Noxious Substances 627	Intentional Self-Harm (Suicide) 354	Accidental Poisoning and Exposure to Noxious Substances 363	Diabetes Mellitus 427	Malignant Neoplasms of the Trachea, Bronchus and Lung 340	
3	Motor Vehicle Crashes 544	Diabetes Mellitus 234	Diabetes Mellitus 357	Malignant Neoplasms of the Trachea, Bronchus and Lung 408	All COPD Except Asthma 229	
4	Assault (Homicide) 467	Malignant Neoplasms of Colon, Rectum and Anus 165	Malignant Neoplasms of Colon, Rectum and Anus 295	Malignant Neoplasm of the Breast 351	Cerebrovascular Disease 181	
5	All Other Diseases of the Nervous System 222	Assault (Homicide) 163	Intentional Self-Harm (Suicide) 263	Essential (Primary) Hypertension and Hypertensive Renal, and Heart Disease 282	Essential (Primary) Hypertension and Hypertensive Renal, and Heart Disease 153	

<b>6</b>	Ischemic Heart and Vascular Disease 134	Cerebrovascular Disease 133	Malignant Neoplasms of the Trachea, Bronchus and Lung 220	Malignant Neoplasms of Colon, Rectum and Anus 270	Diabetes Mellitus 144
<b>7</b>	Alcoholic Liver Disease 92	Motor Vehicle Crashes 132	All Other Diseases of the Nervous System 217	All COPD Except Asthma 268	All Other Diseases of the Nervous System 107
<b>8</b>	All Other Endocrine, Nutritional and Metabolic Diseases 90	All Other Diseases of the Nervous System 130	Human Immunodeficiency Virus (HIV) Disease 180	All Other Diseases of the Nervous System 230	Malignant Neoplasm of Pancreas 101
<b>9</b>	Falls 90	All Other Endocrine, Nutritional and Metabolic Diseases 115	Alcoholic Liver Disease 180	Accidental Poisoning and Exposure to Noxious Substances 179	Malignant Neoplasms of Colon, Rectum and Anus 90
<b>10</b>	Malignant Neoplasm of the Breast 89	Pregnancy, Childbirth and the Puerperium 107	Malignant Neoplasm of the Cervix Uteri, Uterus, and Ovary 175	Cerebrovascular Disease 162	Malignant Neoplasm of the Breast 76



Georgia Department of Public Health - [Office of Health Indicators for Planning \(OHIP\) Contact Us](#)

OASIS Community Health Needs Assessment Dashboard - <http://oasis.state.ga.us/>

Application Version: 1.1.0, Content Version: 1.8

Date Accessed: 9/13/2018 2:22:28 PM

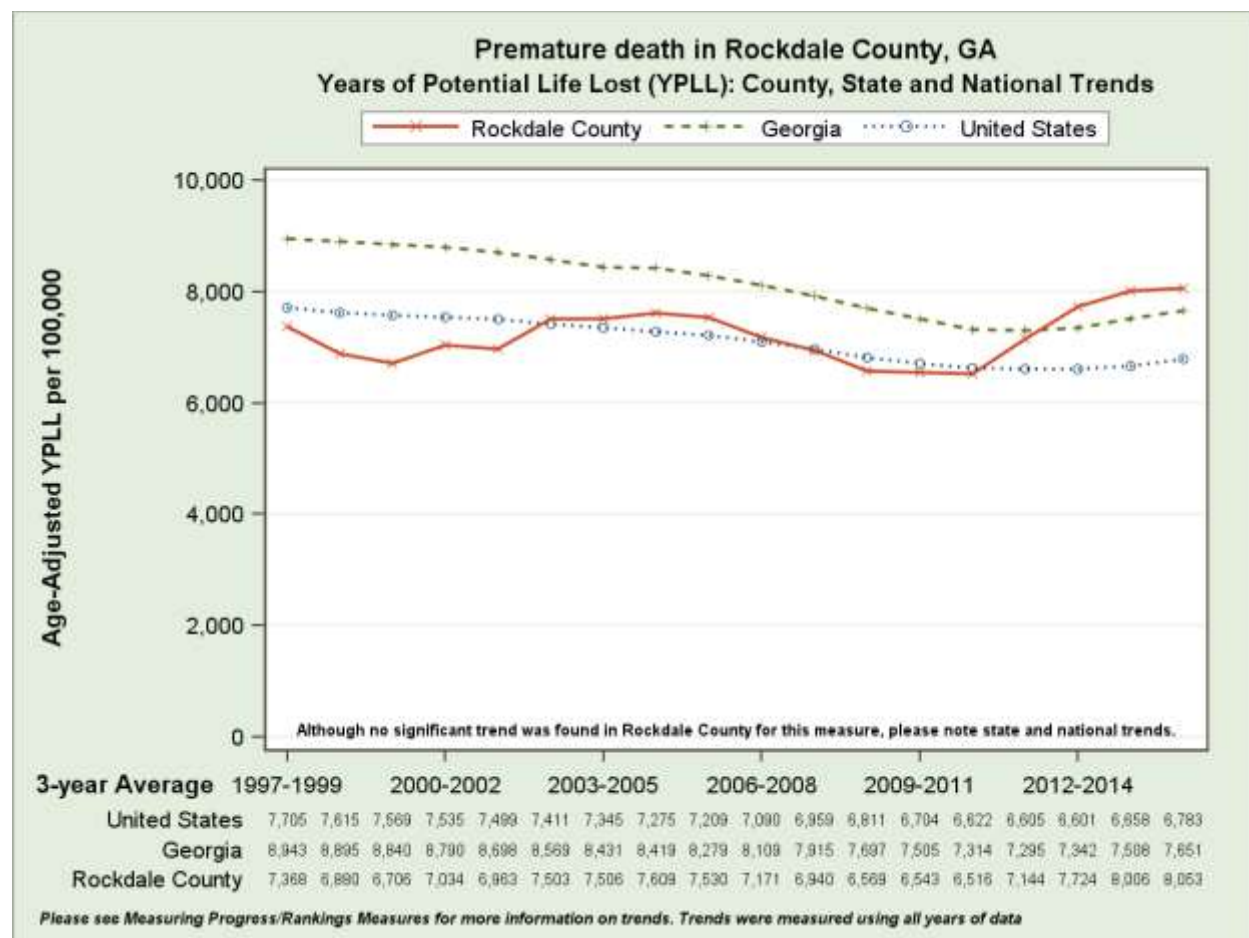
Rockdale County is relatively healthy compared with other counties in Georgia, but still has a great deal of room for improvement. In 2013, Rockdale County ranked 10<sup>th</sup> among the 159 Georgia counties in terms of overall health outcomes. In 2018, Rockdale is ranked 53<sup>rd</sup>. The largest change in ranking was from 2015 (15) to 2016 (35). Falling forty-three ranks in five years is a drastic change that could be associated with worsening health in Rockdale, improved health outcomes in other counties, or both.

<http://www.countyhealthrankings.org/app/georgia/2018/rankings/rockdale/county/outcomes/overall/snapshot>

The county ranked 63<sup>rd</sup> by measures of illness and disability (morbidity) and 44<sup>th</sup> by a measure of premature death (mortality) (compared to 16<sup>th</sup> and 13<sup>th</sup> in 2013, respectively). From 2014 to 2016, Rockdale County had 8,000 age-adjusted years of potential life lost per 100,000 residents, which was higher than the state rate of 7,500 and higher than the 2013 Rockdale rate (6,569).

YPLL). Figure \* shows county, state, and national trends of years of potential life lost from 1997 to 2014.

<http://www.countyhealthrankings.org/app/georgia/2018/rankings/rockdale/county/outcomes/overall/snapshot>



An estimated 19% of Rockdale County residents reported their health to be poor or fair, which was the same as the statewide rate. Similarly, Rockdale County residents reported an average of 3.9 days of poor physical health per month, just above Georgia's average (3.8 days). Rockdale County residents also reported the same average number of poor mental health days (3.8 per month) as did statewide residents.

<http://www.countyhealthrankings.org/app/georgia/2018/rankings/rockdale/county/outcomes/overall/snapshot>

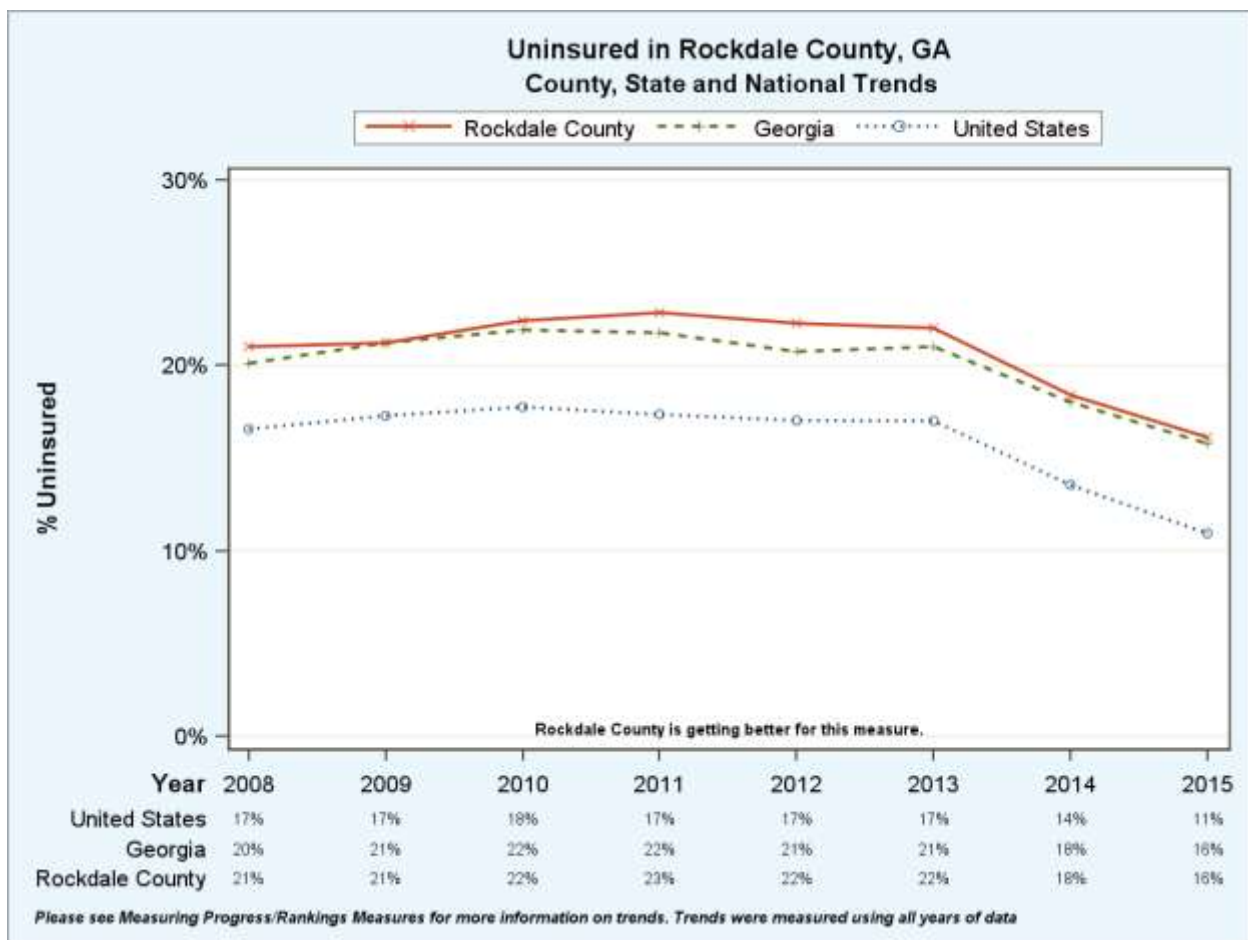
## Access to Health Services

Clinical care is an important part of maintaining good health. The County Health Rankings estimates that about 20% of a community's health status can be attributed to clinical care [http://www.countyhealthrankings.org/sites/default/files/Hood\\_AmJPrevMed\\_2015.pdf](http://www.countyhealthrankings.org/sites/default/files/Hood_AmJPrevMed_2015.pdf). This organization ranks Rockdale County's clinical care as 58<sup>th</sup> out of the 159 Georgia counties (compared to 23<sup>rd</sup> in 2014).

<http://www.countyhealthrankings.org/app/georgia/2018/rankings/rockdale/county/outcomes/overall/snapshot>

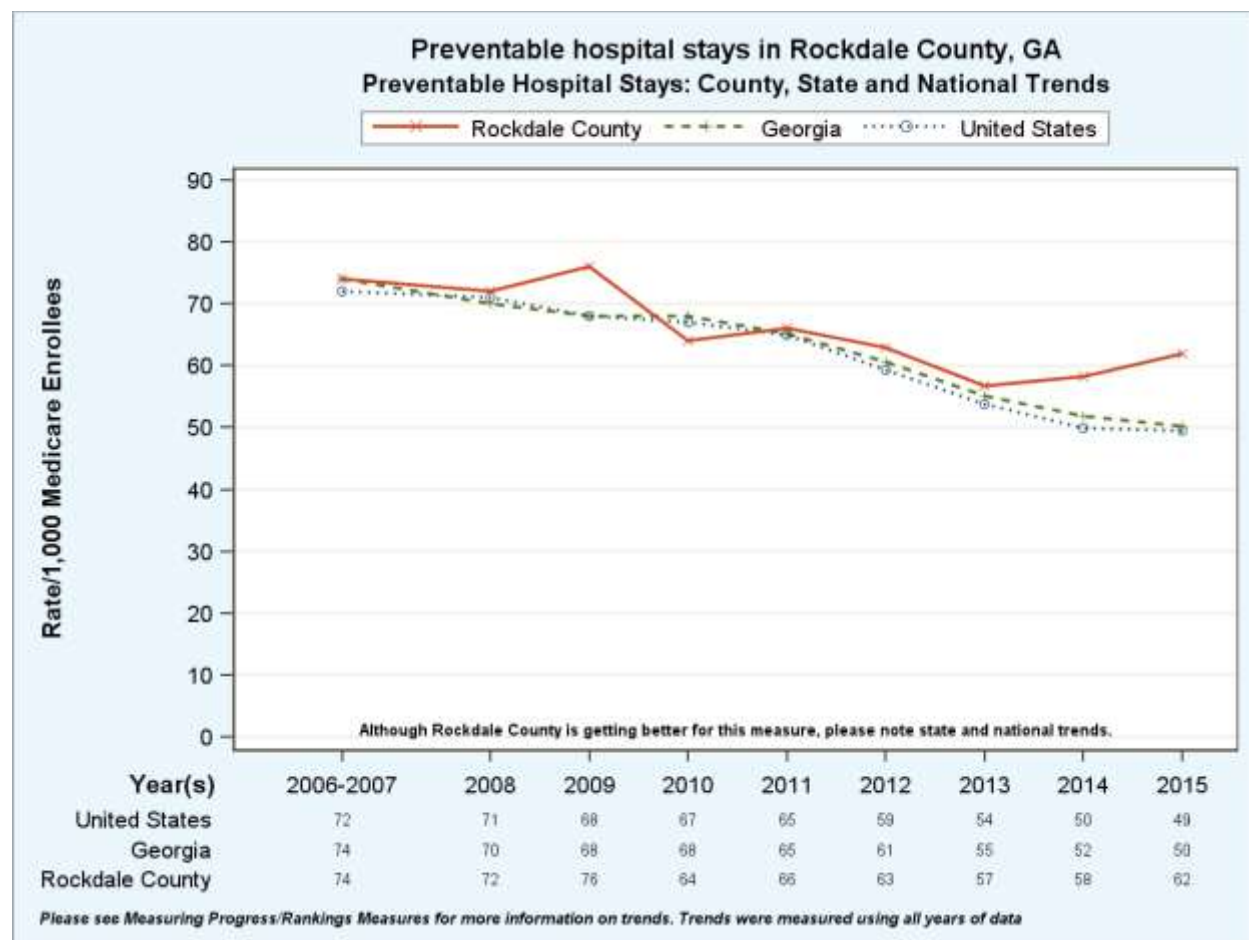
Whether or not a person has health insurance plays a major role in access to health services. In 2015, 16% of Rockdale County residents lacked health insurance. Twenty percent of adults under the age of 65 were uninsured, and 8% of children under the age of 18 were uninsured (7% in Georgia). Figure (\*) below shows the county, state, and national trends for uninsured individuals from 2008 to 2015.

<http://www.countyhealthrankings.org/app/georgia/2018/rankings/rockdale/county/outcomes/overall/snapshot>



In 2015, the ratio of residents to primary care physicians was 1,370:1, which was lower than the statewide ratio of 1,520:1, suggesting that primary care services are accessible in the county, at least to residents with health insurance and transportation. Similarly, there was an estimated 1 dentist per 1,350 residents, compared to 1 dentist per 1,980 residents in the state of Georgia.  
<http://www.countyhealthrankings.org/app/georgia/2018/rankings/rockdale/county/outcomes/overall/snapshot>

Rockdale County had more preventable hospital stays per 1,000 individuals (62) than Georgia (50) and the U.S., as shown in Figure \*\*.



A similar percentage of diabetic Medicare enrollees in the county (86%) were screened with an HBA1c test – which is important for monitoring blood sugar control – as diabetic Medicare enrollees throughout Georgia (85%). Additionally, 58% of female Medicare enrollees received mammography screening in the county compared to 62% in Georgia.  
<http://www.countyhealthrankings.org/app/georgia/2018/rankings/rockdale/county/outcomes/overall/snapshot>



## Health Behaviors

As noted previously, most of the top risk factors for premature death, disease, and disability in the United States are health behaviors – or are closely linked to health behaviors – that lead to chronic diseases (<http://www.healthdata.org/united-states>). For this reason, we must focus attention on health behaviors to make the biggest improvements in health in Rockdale County. We must also recognize that people’s health behaviors are strongly influenced by biological factors like addiction, as well as the environment, public policy, socioeconomic status, and many other life circumstance-related factors. The table below shows the top ten risk factors for premature death and disability in 2016.

1.	Tobacco
2.	High body-mass index
3.	Dietary risks
4.	Alcohol & drug use
5.	High fasting plasma glucose
6.	High blood pressure
7.	High total cholesterol
8.	Impaired kidney function
9.	Occupational risks
10.	Air pollution

Rockdale County is ranked 76<sup>th</sup> among the 159 Georgia counties in the realm of health behaviors, which is a significant drop from its ranking in 2013 (20<sup>th</sup>), when it was in the top quartile of Georgia counties.

<http://www.countyhealthrankings.org/app/georgia/2013/rankings/rockdale/county/outcomes/overall/snapshot>

### Tobacco Use

According to the CDC, smoking harms nearly every organ in the body and it accounts for nearly one of every five deaths each year in the United states.

[https://www.cdc.gov/tobacco/data\\_statistics/fact\\_sheets/health\\_effects/effects\\_cig\\_smoking/index.htm](https://www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/effects_cig_smoking/index.htm)

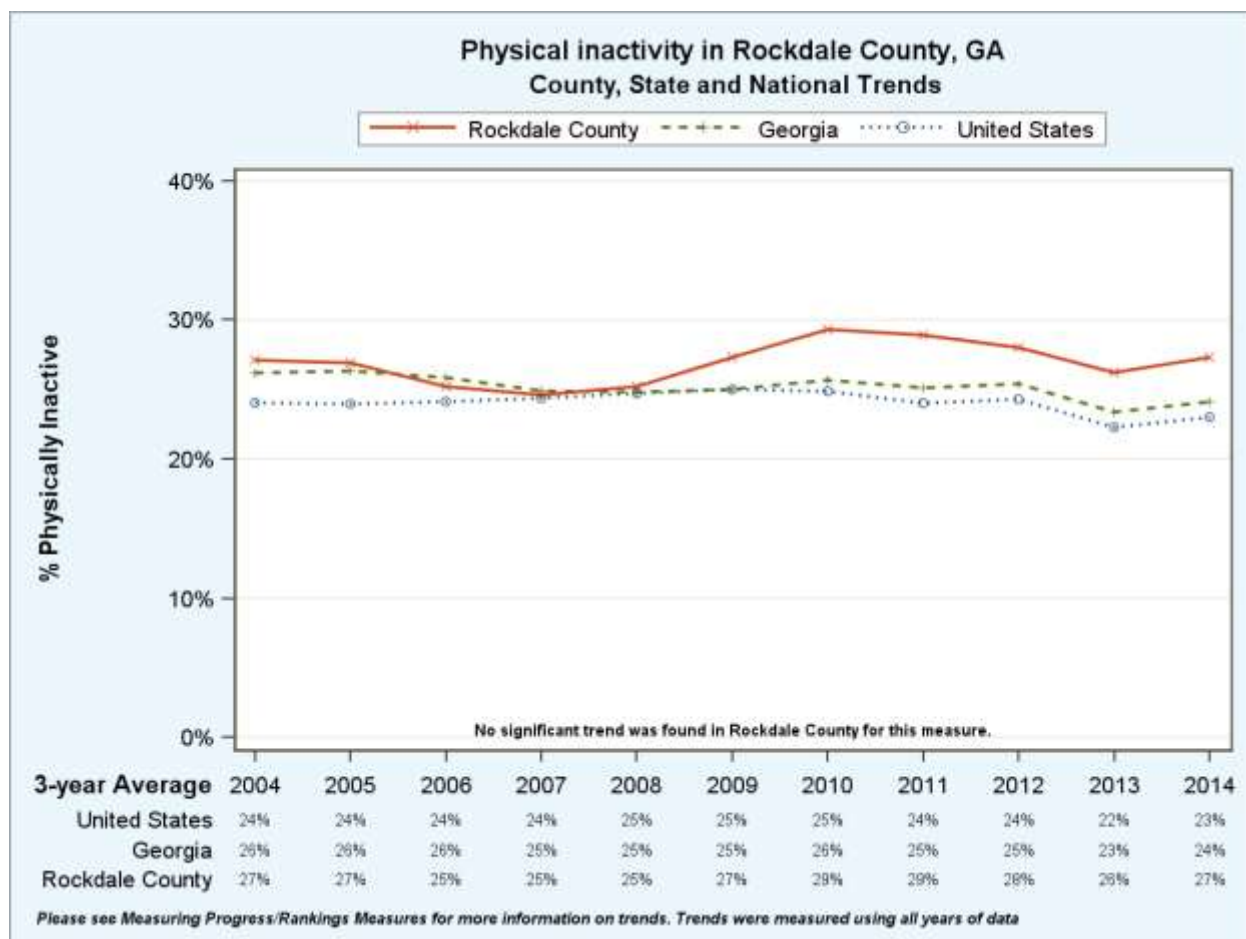
The same percentage of Rockdale County adults smoke as do adults statewide (18%). This percentage is no longer below the Healthy People 2020 target of 12% (as it was in 2013).

<http://www.countyhealthrankings.org/app/georgia/2018/rankings/rockdale/county/outcomes/overall/snapshot>

### Physical Activity

An estimated 27% of Rockdale residents get no leisure-time physical activity compared with a state average of 24% (Figure \*\*). However, 69% of Rockdale’s population has adequate access to locations for physical activity. Lack of physical activity is a major risk factor for premature death and can contribute to an unhealthy body weight.





## Excessive Drinking and Drug Abuse

According to the Guide to Community Preventive Services, excessive alcohol consumption is the third leading cause of preventable death in the United States. In 2010, the estimated economic cost of excessive drinking in the U.S. was nearly a quarter of a trillion dollars.

<https://www.thecommunityguide.org/topic/excessive-alcohol-consumption>

An estimated 13% of adults in Rockdale reported binge or heavy drinking in 2016, compared with a statewide average of 15%.

<http://www.countyhealthrankings.org/app/georgia/2018/rankings/rockdale/county/outcomes/overall/snapshot>

According to the Community Guide, evidence-based interventions that can further reduce the level of excessive drinking include increasing alcohol taxes, maintaining limits on the days and hours of alcohol sales, and enhanced enforcement of laws prohibiting alcohol sales to minors.

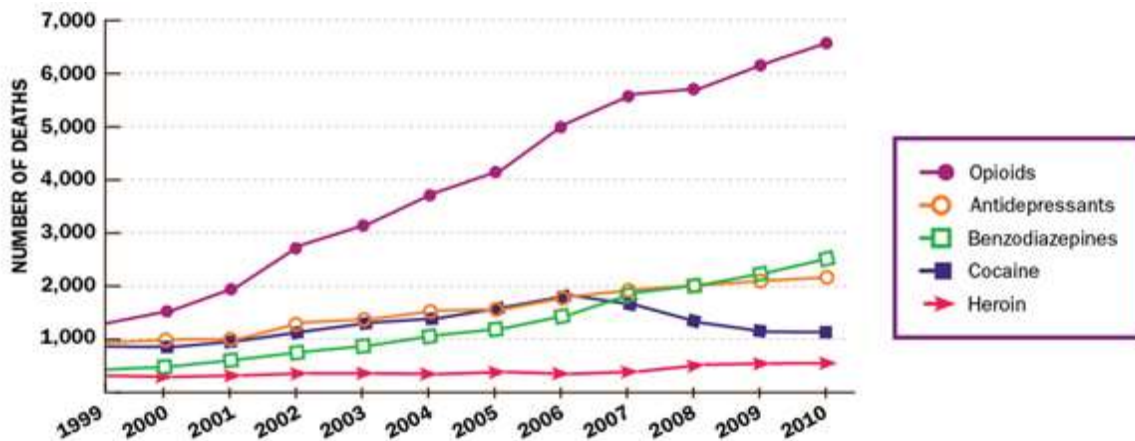
<https://www.thecommunityguide.org/topic/excessive-alcohol-consumption>

Data are not widely available specific to Rockdale County, but prescription drug abuse is a growing epidemic in the United States. Nationwide, deaths from prescription painkiller overdoses have increased 265% among men and 400% among women from 1999 to 2013. According to the CDC, “this rise relates closely to increased prescribing of these drugs during

the past decade. Health care providers can help improve the way painkillers are prescribed while making sure women have access to safe, effective pain treatment.”

<https://www.cdc.gov/vitalsigns/PrescriptionPainkillerOverdoses/>

Figure \*\* shows the trend in types of drugs involved in overdose deaths among women from 1999 to 2010. It is clear that overdose death due to opioids is a consistently growing concern.



From 2014 to 2016, there were 14 drug overdose deaths per 100,000 population in Rockdale County. <http://www.countyhealthrankings.org/app/georgia/2018/measure/factors/138/data>

According to a recent needs assessment done by the Council on Alcohol and Drugs, “the Georgia Student Health Survey is administered statewide by the Georgia Department of Education to students in grades 3 through 12.” This survey showed that in 2016, 1.42% of students in Rockdale County reported painkiller use. <https://stoprxabuseinga.org/wp-content/uploads/2018/08/PDMP-Assessment-2017-Report-updated-09-25-2017-1.pdf>

In 2008 to 2009, an estimated 617,000 (8%) of Georgians age 12 years and older used illicit drugs and an estimated 361,000 (5%) misused prescription pain relievers. About one in seven (14%) of the 361,000 abusers of prescription drugs were 12-17 years old and another third (33%) were 18-25 years old. <https://stoprxabuseinga.org/wp-content/uploads/2016/06/2012-Rx-Drug-Abuse-Final-Needs-Assessment.pdf>

The Georgia Prescription Drug Abuse Prevention Initiative is focused on four priority areas (education, monitoring, proper medication disposal, and enforcement) to reduce prescription drug abuse. <https://stoprxabuseinga.org> According to this organization, Rockdale County has two drop box locations for safe prescription drug disposal. <https://stoprxabuseinga.org/prescription-drug-disposal/>

Safe Prescription Drug Disposal Locations:

Rockdale County Sheriff's Office  
911 Chambers Drive  
Conyers, GA 30012

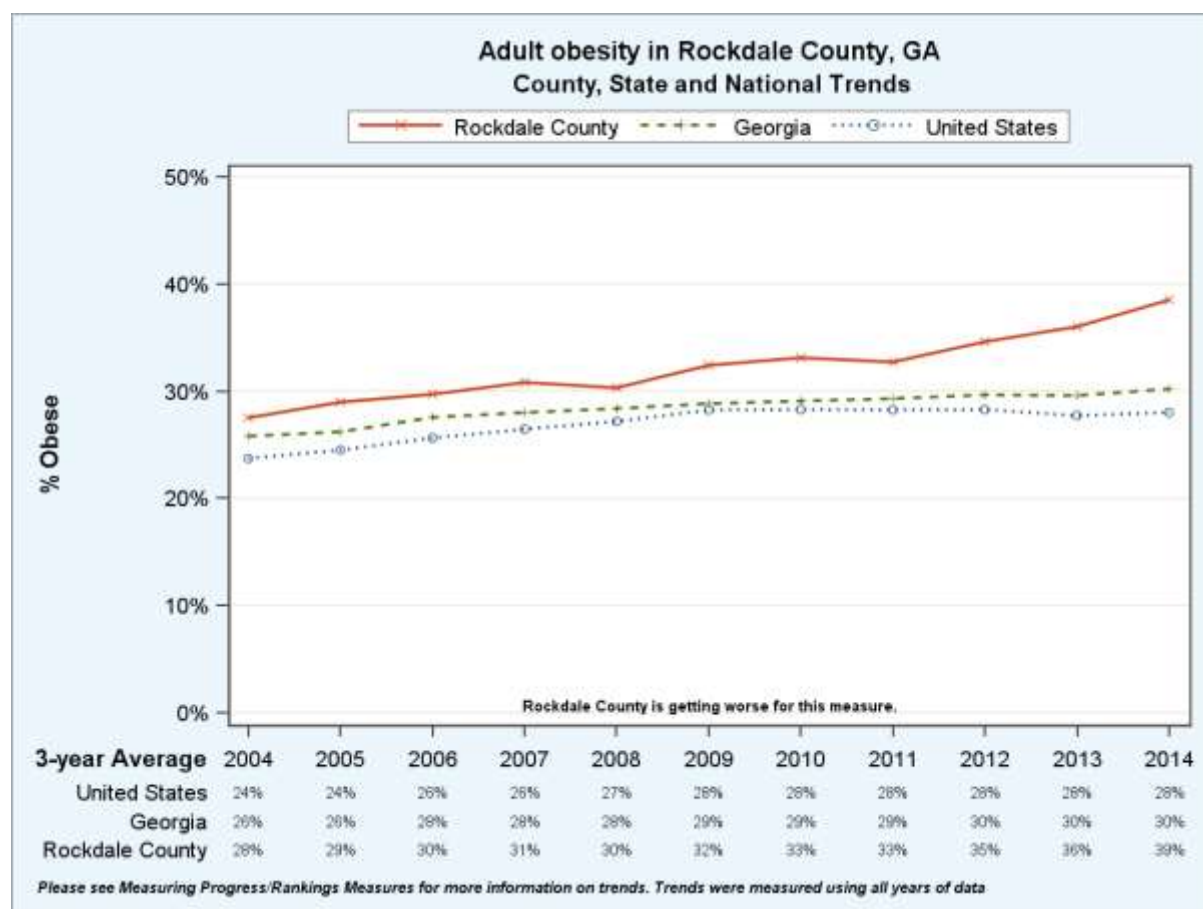
Walgreens  
1510 Milstead Avenue NE  
Conyers, GA 30012

## Chronic Diseases

Rockdale County faces a growing burden of chronic disease and interventions to foster healthy behaviors, prevent chronic disease, and treat these diseases in their early stages have huge potential impacts on health and are imperative to consider and implement.

### Adult Obesity

An estimated 39% of Rockdale County adults are obese (defined as a body mass index of 30 or higher) compared with a statewide percentage of 30% (figure \*\*). This level of obesity puts over one-third of adult residents at higher risk for serious conditions like diabetes, heart disease, cancer, osteoarthritis, respiratory problems, and stroke. It is important to note that this degree of obesity is relatively new for both Rockdale County and Georgia. For instance, back in 1990, Georgia's obesity rate was only 10%.



From 2009 to 2011, an estimated one in seven (15.4%) Rockdale low-income children in preschool (ages 2-4) were obese compared with a nationwide county average of 14% ([http://static.nichq.org/obesity-factsheets/Georgia/GA\\_Rockdale\\_factsheet.pdf](http://static.nichq.org/obesity-factsheets/Georgia/GA_Rockdale_factsheet.pdf)). Obesity this early in life carries both immediate and potentially severe long-term risks. Nationwide, childhood obesity has increased dramatically in recent decades, raising concern that many of

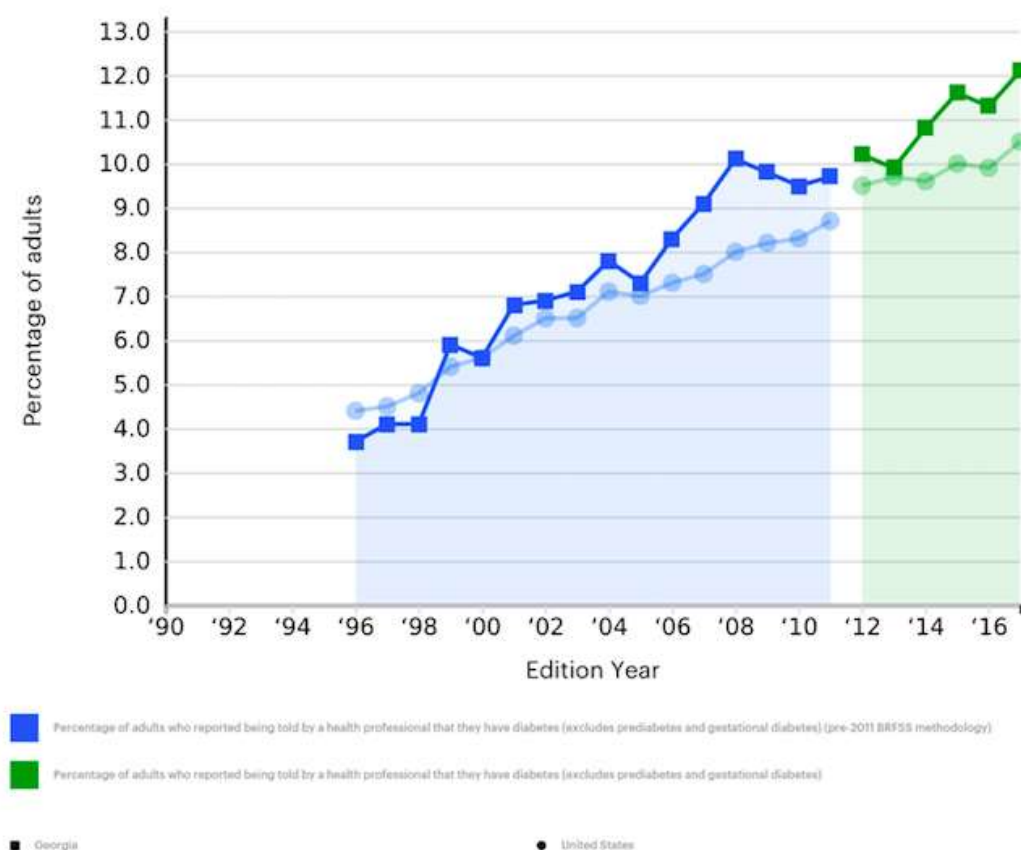
today's children might live shorter lives than their parents. In Georgia, obesity-related hospitalizations of children cost \$2.1 million a year and continue to rise  
[http://dph.georgia.gov/sites/dph.georgia.gov/files/related\\_files/site\\_page/2010%20Child%20and%20Youth%20Obesity%20Data%20Summary.pdf](http://dph.georgia.gov/sites/dph.georgia.gov/files/related_files/site_page/2010%20Child%20and%20Youth%20Obesity%20Data%20Summary.pdf).

## Diabetes

Diabetes affects nearly all of the body's organ systems and can lead to disability and early death. In 2014, an estimated 14% of Rockdale adults had been diagnosed with diabetes, which was higher than the Georgia estimate of 11%

(<http://www.countyhealthrankings.org/app/georgia/2018/rankings/rockdale/county/outcomes/overall/snapshot>). Diabetes is a part of the growing chronic disease trend. From 1996 to 2010, the percent of Georgians with diabetes more than doubled from 4% to 10% and the number of people with the disease more than tripled (Figure\*\*

<https://www.americashealthrankings.org/explore/annual/measure/Diabetes/state/GA>). From 2013 to 2017, diabetes was the seventh leading cause of death in Rockdale County. (OASIS Community Health Needs Assessment Dashboard - <http://oasis.state.ga.us/>)



In 2017, the age-adjusted death rate due to diabetes in Rockdale County was 30.8 per 100,000 population compared with a statewide rate of 21.5 per 100,000. From 2009 to 2011, the age-adjusted death rate due to diabetes in Rockdale was 19.8 per 100,000, showing a significant increase. Although the age-adjusted death rate was higher for men than women from 2009 to 2011, the 2017 rates are almost identical (30.5 for men and 30.4 for women).

African-Americans had a higher age-adjusted death rate from diabetes in Rockdale (55 per 100,000) when compared to Georgia (35.5 per 100,000), but both rates were higher than that of non-Hispanic White residents (22.4 per 100,000 in Rockdale and 17.6 per 100,000 in Georgia) <https://oasis.state.ga.us/oasis/webquery/qryMortality.aspx>. These data display a clear health disparity and suggest that innovative and culturally relevant prevention and intervention strategies, addressing structural and behavioral aspects, need to be introduced to increase access to care and disease surveillance, healthy and affordable foods, and regular physical activity, specifically among minority communities.

## **Cardiovascular Disease and Stroke**

In 2017, major cardiovascular diseases were responsible for nearly a quarter of the deaths in Rockdale County. <https://oasis.state.ga.us/oasis/webquery/qryMortality.aspx> These diseases are strongly related to obesity, diabetes, high blood pressure, and tobacco use. Although Rockdale's age-adjusted rates of heart disease and stroke are below the statewide averages, they remain important health threats in the county, just as they are nationwide. Smoking, lack of physical activity, poor diet, high cholesterol, diabetes, and high blood pressure are all risk factors for heart disease and stroke.

The age-adjusted death rate due to “obstructive” heart disease (which includes heart attacks) in Rockdale County was 69.6 per 100,000 from 2015 to 2017, which was lower than the statewide rate of 74.6 per 100,000, but higher than Rockdale's rate from 2009 to 2011 (64.4 per 100,000). <https://oasis.state.ga.us/oasis/webquery/qryMortality.aspx> Women had lower rates than men (48.4 per 100,000 and 98.2 per 100,000, respectively). Non-Hispanic Black residents had lower rates than non-Hispanic White residents of the same gender (71.8 per 100,000 and 73.7 per 100,000, respectively). <https://oasis.state.ga.us/oasis/webquery/qryMortality.aspx>

Strokes, sometimes referred to as “brain attacks,” are one of the leading causes of death in the United States. The age-adjusted death rate due to stroke in Rockdale County from 2015 to 2017 was 39.4 per 100,000 (compared to 37.1 from 2009 to 2011), which was lower than the Georgia rate of 43.8 per 100,000. White men had a higher age-adjusted rate (43 per 100,000) of stroke than Black men (40.9 per 100,000) and both White (39.3 per 100,000) and Black women (34.5 per 100,000). At the time of the 2014 Rockdale Community Health Assessment, White women had the highest age-adjusted death rate due to stroke. <https://oasis.state.ga.us/oasis/webquery/qryMortality.aspx>

## **Emphysema and Chronic Bronchitis**

Emphysema and chronic bronchitis are the fourth leading cause of disability and death in the United States [https://www.cdc.gov/nchs/data/nvsr/nvsr67/nvsr67\\_06.pdf](https://www.cdc.gov/nchs/data/nvsr/nvsr67/nvsr67_06.pdf). Tobacco smoke is a key factor in the development and progression of these diseases. The age-adjusted death rate from emphysema and chronic bronchitis from 2013 to 2017 in Rockdale County was 3.7 per 100,000 population (2.6 in Georgia). <https://oasis.state.ga.us/oasis/webquery/qryMortality.aspx> Avoiding tobacco smoke is the key way to prevent both emphysema and chronic bronchitis.

## Cancer

Cancer caused more than one in five deaths in Rockdale County from 2013 to 2017.

In 2013 to 2017, the overall age-adjusted death rate due to cancer in Rockdale County was 152.7 deaths per 100,000 population, which was below the Georgia average of 160.7 per 100,000 <https://oasis.state.ga.us/oasis/webquery/qryMortality.aspx> and met the Healthy People 2020 target of 161 per 100,000. It was also lower than the 2007 to 2011 rate of 162 deaths per 100,000.

The following table displays the age-adjusted death rate due to cancer by race and sex in Rockdale County from 2013-2017. <https://oasis.state.ga.us/oasis/webquery/qryMortality.aspx>

Population Group	Age-Adjusted Death Rate Due to Cancer (per 100,000)
White	168.0
White male	210.2
White female	136.4
Black or African American	131.9
Black or African American Male	174.1
Black or African American Female	111.6

Lung cancer, colorectal cancer, breast cancer, and prostate cancer are the four most common types of cancer in Rockdale County and nationwide. Rockdale County age-adjusted death rates due to these cancers were below statewide rates except for breast cancer.

<https://oasis.state.ga.us/oasis/webquery/qryMortality.aspx>

The following table outlines the age-adjusted death rates from 2013-2017 due to the four most common types of cancer in Rockdale County compared to Georgia.

Cancer Type	Age-Adjusted Death Rate (per 100,000) in Rockdale	Age-Adjusted Death Rate (per 100,000) in Georgia
Lung	36.0	42.2
Colorectal	14.3	15.1
Breast	14.7	12.3
Prostate	7.8	8.6



## Maternal and Infant Health

Of the 969 births to Rockdale County mothers in 2017, over half (54%) were to women age 20 to 29 years, about a third (37%) were to women 30 to 39 years, about one in twenty (5.6%) were to girls and women 10 to 19 years, and 2.8% were to women 40 years and older. About 70% of the births to mothers in their 40s were to African American mothers, compared with 61% of births for mothers in their 30s, 60% of mothers in their 20s, and 56.8% for mothers 10 to 19 years.

<https://oasis.state.ga.us/oasis/webquery/qryBirth.aspx>

Among the 969 births to Rockdale County mothers in 2017, 12% of infants were born premature or preterm (defined as birth before the end of the 37<sup>th</sup> week of pregnancy). This percentage was higher than the statewide average of 10.7%. Preterm birth is a leading cause of infant death and disability and may be influenced by smoking, alcohol use, stress, and lack of prenatal care and vitamins. In Rockdale County in 2017, women in their 40s had the highest rates of preterm delivery. Among race/ethnic groups, Black or African American women were most likely to have preterm birth (13.9%), followed by non-Hispanic White women (13.5%) and Hispanic or Latina women (13.1%). <https://oasis.state.ga.us/oasis/webquery/qryBirth.aspx>

Low birth weight is closely related to preterm birth but may be caused by other factors. About 10.1% of babies born in Rockdale County in 2017 had low birth weight (less than 5 pounds, 8 ounces), which was higher than the statewide average of 9.9% and higher than the Healthy People 202 target of 7.8%. <https://oasis.state.ga.us/oasis/webquery/qryBirth.aspx> Low birth weight was most common among women over 40, and Black or African American women.

Babies born at a very low birth weight (less than 3 pounds, 5 ounces) are at high risk of complications like infection, sudden infant death syndrome (SIDS), breathing problems, and bleeding inside the brain. About 2.2% of babies born in Rockdale County in 2017 had very low birth weight. This percentage was higher than the state average (1.8%) and the Healthy People 2020 target (1.4%). Risk factors for very low birth weight are similar to those for low birth weight. <https://oasis.state.ga.us/oasis/webquery/qryBirth.aspx>

## Mothers who Smoked During Pregnancy

Smoking during pregnancy poses significant risks to both the mother and the fetus, including an increased risk for preterm birth and low birth weight. From 2013 to 2017, 5.6% of pregnant women in Rockdale County smoked. This percentage was slightly higher than the statewide percentage of 5.5% and over four times the percentage in nearby Gwinnett County (1.3%). On the positive side, smoking rates among pregnant women have declined substantially since 2000 to 2001 (12.2%). Smoking during pregnancy was far more common among non-Hispanic White women (15%) than non-Hispanic Black women (2.1%) and Hispanic or Latina women (2.3%). In terms of age groups, pregnant women age 20 to 24 years (6.9%) and 25 to 29 years (6.6%) had the highest smoking rates. <https://oasis.state.ga.us/oasis/webquery/qryBirth.aspx>



## Teen Pregnancy

According to the Healthy Communities Institute, teen pregnancy and childbearing have substantial social and economic impacts for communities, contributing to high school dropout and increased health care and foster care costs. Teen pregnancy has declined substantially in Rockdale County and Georgia as a whole over the past decade, but still remains high compared to other industrialized countries where rates are much lower.

<http://www.hhs.gov/ash/oah/adolescent-health-topics/reproductive-health/teen-pregnancy/trends.html>

In 2017, the teen pregnancy rate in Rockdale County was 5.1 per 1,000 girls age 15 to 17, which was lower than the Georgia statewide rate of 9 per 1,000. In 2000, the rate was almost five times as high (24.5 per 1,000). <https://oasis.state.ga.us/oasis/webquery/qryBirth.aspx>

## Infectious Diseases

Infectious disease, including influenza, pneumonia, tuberculosis, HIV, hepatitis, and sexually transmitted infections, remain a threat to Rockdale County's health. Ongoing vigilance is critical in our increasingly interconnected world.

According to the National Foundation for Infectious Disease, each year, on average, in the U.S., more than 50,000 adults die from vaccine-preventable diseases <http://www.nfid.org/about-vaccines/reasons>. A number of diseases and infections are easily prevented in both children and adults through adequate immunizations including diphtheria\*, *Haemophilus influenzae* type B\* (Hib), hepatitis A, hepatitis B\*, measles\*, mumps\*, pertussis\* (whooping cough), polio\*, rubella\* (German measles), *Streptococcus pneumoniae*, tetanus\* (lockjaw), and varicella\* (chickenpox). Georgia law requires vaccination for the diseases marked with an asterisk (\*) for children who attend daycare and prior to entry into school.

### Influenza and Pneumonia

Influenza and pneumonia rank eight among the leading causes of death in the United States, and vaccines for influenza and pneumonia can help prevent serious illness and death <https://www.cdc.gov/nchs/fastats/leading-causes-of-death.htm>. In Rockdale County, the 2015 to 2017 age-adjusted death rate due to influenza and pneumonia was 12.1 per 100,000 population. By comparison, the statewide rate was 14.3 per 100,000, but the rate in nearby Gwinnett County was 9.2 per 100,000.

### HIV/AIDS

HIV/AIDS affects people in Rockdale County. In 2015, there were 397 individuals aged 13 years and older living with a diagnosis of human immunodeficiency virus per 100,000 population (290 cases). This figure was lower than the statewide prevalence of 588 per 100,000. Of the 290 cases in Rockdale County, 193 cases were male and 97 were female. Two hundred and fifteen cases were Black or African American individuals, 49 were White, and 8 were Hispanic or Latino. Eighteen cases were individuals age 13 to 24 years, 36 were 25 to 34 years old, 68 were 35 to 44 years old, 102 were 45 to 54 years old, and 66 were 55 years or older. 78.8% of cases of HIV in Rockdale County involve men who have sex with men <https://aidsvu.org/resources/#/2015>. There were 5 cases of HIV in 2017 that were tested or received care by the Health Department (compared to less than 5 in 2014). However, an estimated one in five people with HIV nationwide are unaware of their status, suggesting that rates of HIV are likely higher, particularly among young people. <http://aids.gov/federal-resources/policies/care-continuum/>

### Hepatitis

Hepatitis is a viral disease that causes inflammation of the liver. Transmission and/or treatment differ depending on which virus causes the illness. There are five possible viruses named hepatitis: A, B, C, D, and E viruses. Other viruses may cause hepatitis but are very rare. In Georgia, hepatitis A, B, and C are reportable diseases; hepatitis D is not reportable as it only occurs among individuals already infected with hepatitis B; hepatitis E is not monitored as it is

not found in the U.S. Vaccines are available for both hepatitis A and B, but no vaccine is available for hepatitis C.

Each type of hepatitis can be spread in different ways. Hepatitis A virus is spread from person to person by putting something in the mouth that has been contaminated with the stool of a person with hepatitis A. Casual contact, as in the usual office, factory or school setting, does not spread the virus. Hepatitis B virus is spread when blood from an infected person enters the body of a person who is not infected. For example, hepatitis B is spread through having unprotected sex with an infected person, by sharing drugs, needles or other paraphernalia, through need sticks or sharps exposures on the job, or from mother to her baby during birth. Hepatitis C virus is also spread when blood from an infected person enters the body of a person who is not infected. However, it is rare for hepatitis C to be spread through unprotected sexual activities.

### **Sexually Transmitted Diseases**

In 2012, Georgia's rates of sexually transmitted diseases (STDs) like Syphilis, Gonorrhea, and Chlamydia, were among the highest in the country (within the top 10 for each).

<https://www.cdc.gov/std/stats17/toc.htm>

#### **Chlamydia**

Like elsewhere in Georgia, STDs are a health problem in Rockdale County. In 2017, there were 809.4 cases of Chlamydia per 100,000 people, representing a more than 80% increase from 2010, when the rate was 441.3 per 100,000. The statewide rate was 623.7 per 100,000 in 2017. The reported incidence of Chlamydia in Rockdale County was highest among non-Hispanic Black residents and women. <https://oasis.state.ga.us/oasis/webquery/qrySTD.aspx>

#### **Gonorrhea**

Like Chlamydia, Gonorrhea can cause serious and permanent health problems in women and men. The 2017 Gonorrhea rate for Rockdale County was 242.5 per 100,000 compared with a statewide rate of 217.5 per 100,000. The Gonorrhea rate for Black or African American residents (247.6 per 100,000) was over seven times the rate for White residents (33.3 per 100,000). The rate for men (274.7 per 100,000) was higher than the rate for women (211.7 per 100,000). Rates were highest among young adults age 20 to 24 years.

<https://oasis.state.ga.us/oasis/webquery/qrySTD.aspx>

#### **Syphilis**

The 2017 rate for Syphilis was 27.7 per 100,000 in Rockdale County compared with a statewide rate of 41.8 per 100,000 (these rates include primary, secondary, early latent, late latency, unknown latency, and neuro). Nineteen of the 25 cases reported in 2012 in Rockdale County were among Black or African American Individuals.

<https://oasis.state.ga.us/oasis/webquery/qrySTD.aspx>

## **Mental Health and Social Support**

In 2016, Rockdale County residents reported an estimated 3.8 days of poor mental health in the 30 days before interview (same as the Georgia average). Additionally, 12% of adults in Rockdale County reported 14 or more days of poor mental health per month. From 2005 to 2010, 20% of adults reported that they did not get the social and emotional support they needed, similar to the overall Georgia percentage of 21%. This indicator is important for overall health because research has shown that people with social and emotional support experience better health outcomes (including recovery from cardiac surgery, coping with cancer pain, and overall longevity) compared with people who lack such support.

<http://www.countyhealthrankings.org/app/georgia/2018/rankings/rockdale/county/outcomes/overall/snapshot>

## **Mental Health Care Providers**

In 2017, there was an estimated 1 mental health care provider per 920 residents in Rockdale County compared to 1 mental health care provider per 830 residents in all of Georgia. This is a significant improvement from 2011 to 2012 when there was an estimated 1 mental health care provider per 7,118 residents in Rockdale.

<http://www.countyhealthrankings.org/app/georgia/2018/rankings/rockdale/county/outcomes/overall/snapshot>

## **Suicide**

Suicide is a major, preventable public health problem and was the tenth leading cause of death in the United States in 2014 <https://www.nimh.nih.gov/health/statistics/suicide.shtml>. As previously stated, it is important to note that intentional harm or suicide is within the top five leading causes of premature death for six of the eleven age groups. In recent years, suicide and mental illness have more prominently come into view as imminent, extraordinarily important issues to address, especially among young people. In Rockdale, it is the number one cause of premature death among children age 10 to 14. <https://oasis.state.ga.us/CHNADashboard/Default.aspx>

The 2015 to 2017 age-adjusted death rate due to suicide in Rockdale was 15.7 per 100,000, which was higher than the statewide rate of 13 per 100,000 and Rockdale's rate from 2009 to 2011 (10.8 per 100,000). The age-adjusted rate for males (27.4 per 100,000) was nearly five times the rate for women (6.1 per 100,000).

<https://oasis.state.ga.us/oasis/webquery/qryMortality.aspx>

## **People 65+ Living Alone**

People over age 65 years who live alone may be at risk for social isolation, limited access to support, and institutionalization. According to the 2012 to 2016 American Community Survey 5-year estimates, 7.7% of occupied housing units in Rockdale County were occupied by an individual age 65 years or older who lived alone.

<https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=CF>

## Alzheimer's Disease

Alzheimer's disease is the fifth leading cause of death in the United States among adults 65 years and older. <https://www.alz.org/alzheimers-dementia/facts-figures> In Rockdale County, the age-adjusted death rate due to Alzheimer's in 2015 to 2017 was 48.1 per 100,000, which was slightly lower than the statewide rate of 49.8 per 100,000, but higher than the 2009 to 2011 rate of 23.6 per 100,000. <https://oasis.state.ga.us/oasis/webquery/qryMortality.aspx>

No specific actions have been clearly shown to reduce the risk of Alzheimer's disease. However, diabetes, smoking, and depression have been associated with cognitive decline (or worsening mental function), and cognitive engagement and physical activity have been associated with a *lower* risk of cognitive decline. Since smoking cessation, physical activity, social and cognitive engagement, and prevention of diabetes have many other positive health benefits, promoting these activities is clearly worthwhile and might help prevent Alzheimer's disease.