

Tennessee and Rutherford County Health Priorities

The Tennessee Health Commissioner has identified six health priorities for the state:

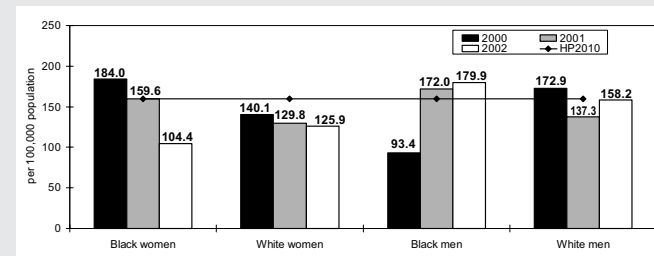
- **Three LifeStart priorities** – Infant Mortality, Adolescent Pregnancy, and Prenatal Care
- **Three LifeStyle priorities** – Cardiovascular Disease, Diabetes, and Obesity

Through a needs assessment, the state Department of Health identified two top health concerns for Rutherford County:

- Cancer rates among black females
- Stroke rates among black males and females

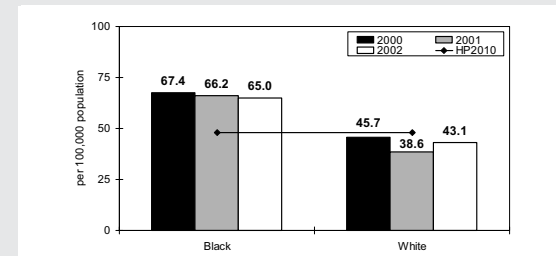
Data appear to indicate that death rates for malignant neoplasms (cancers) are declining among county women but rising for black men. Discrepancies continue to exist between white and black death rates for cerebrovascular disease or stroke.

FIGURE 9. Death Rates for Malignant Neoplasms (Cancers) by Race and Sex, Rutherford County, 2000-2002



Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research; Health Information of Tennessee and Statistical Profiling of Tennessee.

FIGURE 10. Death Rates for Cerebrovascular Disease (Stroke) by Race, Rutherford County, 2000-2002



Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research; Health Information of Tennessee and Statistical Profiling of Tennessee.

Fast Facts About Rutherford County

- Approximately 26% of the county's population is under the age of 18; nearly 8% are age 65 and older.
- Nearly 88% of county residents are white, 10% are black or African American, and 3% are of another race or ethnicity.
- As of October 2002, 30% of Rutherford County children were eligible for free or reduced price school lunches, indicating that their household incomes were 185% of poverty or less. This amounts to an annual income of \$33,485 or less for a family of four.
- Between 1997 and 2002, there were 21 SIDS deaths (Sudden Infant Death Syndrome) in Rutherford County. Only three other counties throughout the state had more—Davidson, Hamilton, and Shelby—all large, populous counties.
- The unemployment rate among youth aged 16-19 years in 2002 was approximately 12%. This is less than the 15% youth unemployment rate for Tennessee.
- The American Lung Association continues to give Rutherford County a grade of F for its air quality. To see state and county data, go to <http://lungaction.org/reports/statoftheair2004.html> and click on Tennessee.

TennCare in Rutherford County

- The total TennCare enrollee rate for all Rutherford County residents in 2001 was 15.4 per 100 population; for those under the age of 21 the rate was 24.1 per 100 population.
- As of December 2002, approximately 72% of enrollees were white, 19% were black or African American, and 3% were Hispanic.
- Females accounted for 59% of all county enrollees as of December 2002; males accounted for 41% of enrollees.
- The number of TennCare enrollees decreased 2.5% between fiscal year (FY) 2002 and 2003. It was the first decrease in four years, from 23,535 at the end of FY 2000 to 26,817 in FY 2001, 27,379 in FY 2002, and 26,705 at the end of FY 2003.

Sources: U.S. Census Bureau (2000); Tennessee Commission on Children and Youth Web site (www.tennessee.gov/tccy/); Kids Count: The State of the Child in Tennessee (2004); American Lung Association (2004); Bureau of TennCare (personal communication 10/16/03).

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The Center for Health and Human Services

collaborates with public and private institutions to develop programs designed to improve the health of the middle and greater Tennessee community. Among the Center's recent projects are the following:

- **Cancer Control Program; Career Mapping Handbook; Maternal and Child Health Needs Assessment; Prevention through Understanding: Investigating Unexpected Infant Death; Smart Mothers Are Resisting Tobacco (S.M.A.R.T. Moms); Youth Led Tobacco Use Prevention Project.**

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www.mtsu.edu/~achcs

Rutherford County HEALTH WATCH

Center for Health and Human Services, Middle Tennessee State University • Vol. 6, No. 1, Fall 2004

Highlights

The Rutherford County Health Watch provides a brief summary of the county's health status at a particular point in time. This edition of the Health Watch highlights the following:

• Population migration

Rutherford County continued to grow

• Birth outcomes, including infant mortality

Disparities among white and black women continued, cesarean birth rates increased for fourth straight year

• Death measures

Death rates remained steady, suicide rates down in the county

• Rutherford County health priorities

Includes cancer and stroke data

• Fast facts about Rutherford County

Selected health and vital statistics

• TennCare in Rutherford County

Enrollee rates decrease

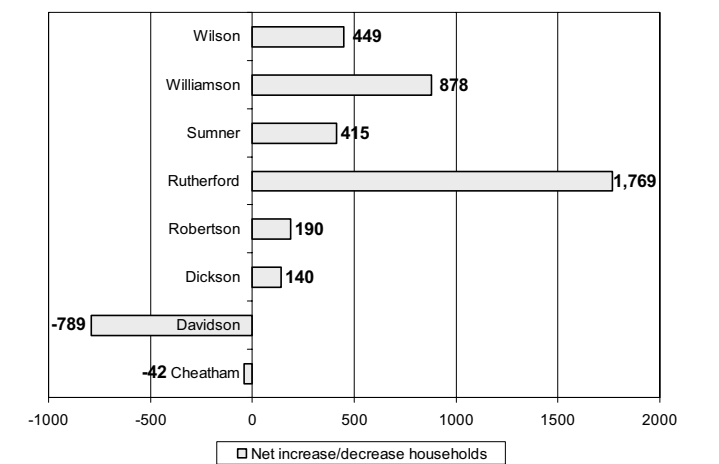
Population Migration

Population migration into Rutherford County continued to grow, with more people migrating into Rutherford than into any of the surrounding seven counties of the Nashville metropolitan area. According to a report by the Business and Economic Research Center at Middle Tennessee State University (MTSU) using Internal Revenue Service data for 2002-2003, 7,215 households (14,242 people) migrated into the county and 5,446 households (10,474 people) migrated out, amounting to a net increase of 1,769 households and 3,768 people migrating into Rutherford County. The median income for people moving into the county is slightly higher than for those moving out but it continued to be lower than the median income of five of the seven neighboring counties. **Figures 1 and 2** show the net migration of households and median income of newcomers for the eight counties in the Nashville metropolitan area.

The median income among Rutherford County newcomers changed little between 2000-2001 and 2002-2003. In 2002-2003, the median income among county newcomers was \$23,117, a slight increase from the \$22,984 newcomer median income for 2000-2001. However, the median income of foreign residents changed dramatically between 2000-2001 and

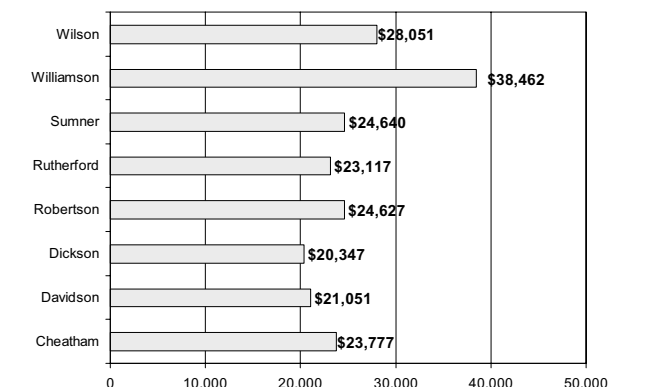
2002-2003. In 2000-2001, foreign residents moving into Rutherford County had a median adjusted gross income of only \$4,249, while those migrating out had a median income of \$14,166, indicating that those moving out of the county earned \$9,917 more than those who moved in. By 2002-2003, the median income of foreigners moving into the county was \$18,332, \$2,083 more than the \$16,249 median income for those moving out. The total number of foreign resident households moving in and out of the county is small—59 households migrating in and 27 migrating out—so these data should be interpreted with caution.

FIGURE 1. Household Migration by County, 2002-2003



Source: Mid-State Economic Indicators, Vol. 14, No. 1.

FIGURE 2. Median Income of Newcomers by County, 2002-2003



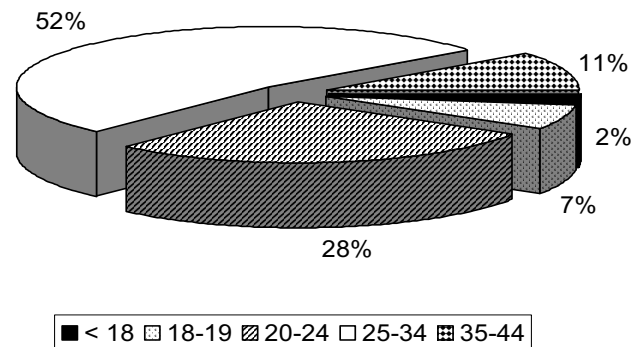
Source: Mid-State Economic Indicators, Vol. 14, No. 1.

Birth Outcomes

There were 2,980 live births in Rutherford County in 2002, a decrease of 2% over the 3,040 live births in 2001. Of these, 9%, or 266 births, were to females aged 10–19. There were 63 births to females under the age of 18 in 2002, a decrease of 31% from the 91 births to young teens in 2001. The percentage of births to females aged 18–19 decreased 16%, from 243 births in 2001 to 203 in 2002. Births to females aged 35 and older also decreased slightly, from 326 in 2001 to 316 in 2002.

Figure 3 shows the percentage of live births, by maternal age, in 2002.

FIGURE 3. Live Births by Maternal Age, Rutherford County, 2002



Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research.

Adverse pregnancy and birth outcomes include no or inadequate prenatal care, premature births, and babies born with low birth weight. These outcomes can result in chronic health and medical problems as well as neonatal and infant mortality. The data for Rutherford County offer both positive and negative trends. The percent of births with low weight decreased over the last year, as did the rate of women receiving late or no prenatal care. The percentage of women who smoke while pregnant is still high. And the rate of cesarean deliveries to county women is now over 30% of all deliveries, double the goal for Healthy People 2010. **Table 1** presents 2002 birth outcomes for the county and state and compares them with the U.S. Department of Health and Human Services Healthy People 2010 (HP2010) goals. **Table 2** provides rates of specific birth outcomes in Rutherford County over the last four years.

TABLE 1. Birth Outcomes, Rutherford County and Tennessee, 2002

Birth Outcome	Rutherford County (%)	Tennessee (%)	Healthy People 2010 Goal (%)
Low birth weight (<2500 g)	7.9	9.2	5.0
Very low birth weight (<1500 g)	1.3	1.7	0.9
Premature births (<37 weeks)	11.4	10.5	7.6
Inadequate or no prenatal care	3.5	6.7	*
Tobacco use during pregnancy	13.3	17.1	1.0

* HP2010 goal is "no more than 10% with no prenatal care in first trimester."

Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research; Health Information Tennessee and Statistical Profiling of Tennessee; U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion.

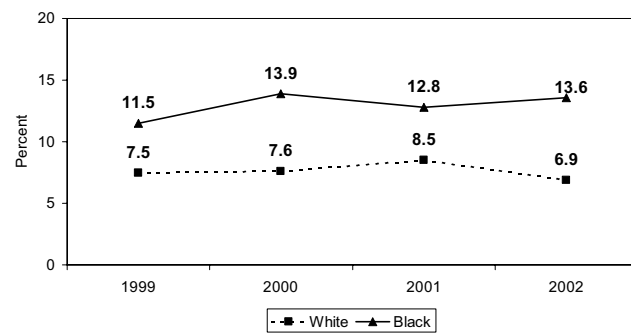
TABLE 2. Birth Outcomes, Percent in Rutherford County, 1999-2002

Birth Outcome	1999	2000	2001	2002
Low birth weight (<2500 g)	7.9	8.5	9.1	7.9
Premature births (<37 weeks)	11.7	11.0	13.0	11.4
Inadequate or no prenatal care	6.0	6.4	4.5	3.5
Tobacco use during pregnancy	14.7	15.5	13.2	13.3
Cesarean delivery	21.6	25.6	28.3	30.3

Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research; Health Information Tennessee and Statistical Profiling of Tennessee.

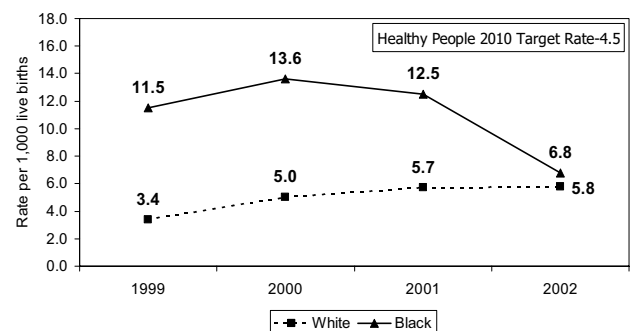
In Rutherford County, overall infant mortality rates have declined over the last several years. The infant mortality rate for 2000–2002 was 6.1 per 1,000 live births, down from an infant mortality rate of 6.9 from 1997–1999 and 7.4 from 1994–1996. Infant mortality rates and low birth weight for babies born to black mothers were higher than those for white mothers, though the infant mortality gap narrowed considerably in 2002. **Figures 4** and **5** show low birth weight and infant mortality rates for Rutherford County, by maternal race.

FIGURE 4. Percent Low Birth Weight by Maternal Race, Rutherford County, 1999-2002



Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research; Health Information Tennessee and Statistical Profiling of Tennessee.

FIGURE 5. Infant Mortality Rates by Maternal Race, Rutherford County, 1999-2002



Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research; Health Information Tennessee and Statistical Profiling of Tennessee.

Death Measures

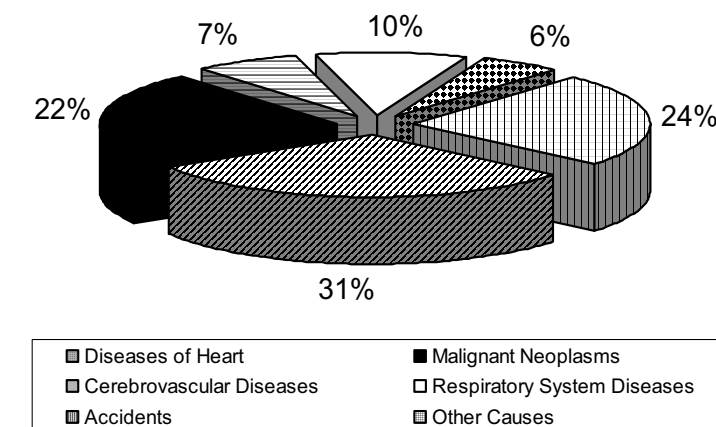
There were 1,187 deaths recorded in Rutherford County in 2002, up slightly from 1,143 deaths in 2001. There has been very little change in the overall county and state death rates during the last three years. In Rutherford County, deaths from cardiovascular diseases and malignant neoplasms (cancers) increased slightly between 2001 and 2002, but deaths due to diabetes, motor vehicle accidents, and suicides decreased during the same time period. **Table 3** presents death rates for the county and state for 2000–2002. **Figure 6** presents Rutherford County deaths, by cause of death, in 2002. Heart disease and cancers accounted for over half of all deaths in Rutherford County in 2002, just as they did in 2001.

TABLE 3. Death Rates, Rutherford County and Tennessee, 2000-2002

Deaths and Causes	Rutherford Co. Rates			Tennessee Rates		
	2000	2001	2002	2000	2001	2002
Death rate per 100,000 population	626.8	614.4	623.9	968.3	961.4	976.6
Deaths from major cardiovascular diseases	224.7	241.3	242.8	381.0	368.4	373.2
Deaths from malignant neoplasms	152.7	134.4	138.8	216.4	213.2	216.1
Deaths from diabetes mellitus	14.8	20.4	17.3	27.9	30.4	30.2
Deaths from motor vehicle accidents	18.1	16.7	13.1	24.2	22.7	21.3
Deaths from suicides	11.5	14.0	11.6	12.8	12.4	13.4

Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research; Health Information Tennessee and Statistical Profiling of Tennessee.

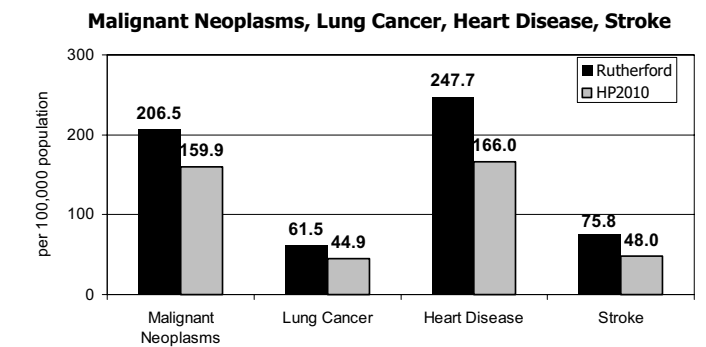
FIGURE 6. Deaths by Cause of Death, Rutherford County, 2002



Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research; Health Information Tennessee and Statistical Profiling of Tennessee.

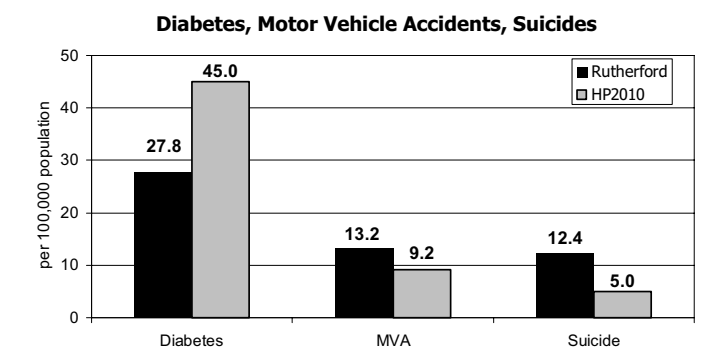
Generally, death rates among Rutherford County residents are higher than Healthy People 2010 target rates, although the county death rate for those with diabetes complications is lower than the HP2010 goal. **Figures 7** and **8** show age-adjusted death rates by selected causes per 100,000 population for Rutherford County and compare them with HP2010 target rates.

FIGURE 7. Age-Adjusted Death Rates by Cause of Death, Rutherford County, 2002, and HP2010 Targets



Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research; Health Information Tennessee and Statistical Profiling of Tennessee.

FIGURE 8. Age-Adjusted Death Rates by Cause of Death, Rutherford County, 2002, and HP2010 Targets



Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research; Health Information Tennessee and Statistical Profiling of Tennessee.