

2025

Davie Medical Center

Davie Medical Center
Community Health Needs Assessment

Letter from the Leader

At Advocate Health, which Atrium Health is a part of, we are redefining care for you, for us, for all. This purpose calls us to see health not just as a service, but as a shared journey, with everyone playing a part, from discovery to everyday moments.

This Community Health Needs Assessments (CHNA) is a roadmap for the future we are working toward, centered on strong partnerships that lead to real and lasting solutions.

Throughout the CHNA process, we strive to listen deeply, learn continuously, and act boldly to the changing needs and strengths of a community. Here at Davie Medical Center and across the communities we serve, we are working together with other health systems, health departments and community organizations, engaging with our neighbors and analyzing local data, so we can provide the best possible care that extends beyond our hospital walls.

As we close another CHNA cycle, we are inspired by the profound difference we make each day – across our hospitals, clinics and communities. From groundbreaking research and exceptional clinical care to meaningful patient programs and cutting-edge innovations, our work is shaped by the communities we serve – and together, we are shaping healthier futures for all.

We are deeply grateful to the many individuals and organizations who contributed to this assessment. Your perspectives and partnership are essential to improving the health and wellbeing of our communities, and we are proud to stand beside you in this work.

Publishing this CHNA is not the end of the conversation but an invitation to keep it going. We welcome your feedback, ideas, or suggestions. At the end of this report, you will find an email where you can share your thoughts on how we can strengthen community programs and strategies to better serve you and your community.

Let's move forward - together - toward better health for all.



Steve Smoot
Division President/Southeast
Advocate Health

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EXECUTIVE SUMMARY

Atrium Health Wake Forest Baptist Davie Medical Center is an active member of the Central Carolina Community Collaborative. The collaborative includes health systems, health departments, and numerous community organizations that work to align data sources and implement programs to impact the health and well-being of their communities. In 2025, the collaborative aligned data sets, survey execution, and the report template design with the future goal of creating improvement plans together for a broader impact.

In the summer of 2025, ad hoc members of Davie Medical Center met to review the community health assessment data, based on the following components:

Community Health Survey (primary data): An online survey was conducted from February 14 – April 28, 2025, where residents completed questions related to top health needs in the community, individuals' perception of their overall health, access to health services, and social drivers of health. In this convenience sample, nearly 7,500 residents from the region completed the survey, including 53 respondents specifically from the Davie Medical Center service area.

Key Informants Interviews (primary data): Within the 2024 CHNA cycle, 17 key informant interviews were conducted by email with key leaders to identify the top social drivers of health and health conditions/behaviors in the community. These interviews were revisited and incorporated in the current CHNA cycle to build on previously identified insights.

Metopio (secondary data): Advocate Health has a contract with Metopio, a robust digital platform that curates data from public and proprietary sources for information on health behaviors and health risks, health outcomes, health care utilization, demographics, and community-level drivers of health like economic, housing, employment, and environmental conditions. Data for each indicator is presented by race, ethnicity, and gender when the data is available (Metopio: <https://public.metopio.io>).

County Health Rankings and Roadmaps: Davie County 2025 (secondary data): A program of the University of Wisconsin Population Health Institute provides a compilation of data using county-level measures from a variety of national and state data sources.

In 2025, Davie Medical Center considered the following criteria in determining the health needs to prioritize:

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

In addition, Davie Medical Center evaluated the impact of the initiatives identified in its 2024 Community Health Implementation Strategy (CHIS).

As a result, Davie Medical Center prioritized the following significant health needs to address in our 2026-2028 implementation strategy:

- Access to Care
- Chronic Disease and Prevention
- Behavioral Health: Mental Health and Substance Use

The 2025 CHNA was presented to the Atrium Health Wake Forest Baptist Board, the authorizing body of the hospital. The board approved the report on May 7, 2026

ATRIUM HEALTH WAKE FOREST BAPTIST

[Atrium Health Wake Forest Baptist](#) is a preeminent academic health system based in Winston-Salem, North Carolina, and is part of [Advocate Health](#), the third-largest nonprofit health system in the United States. Atrium Health Wake Forest Baptist's two main components are an integrated clinical system – anchored by Atrium Health Wake Forest Baptist Medical Center, an 885-bed tertiary-care hospital in Winston-Salem that includes [Atrium Health Levine Children's Brenner Children's Hospital](#), five community hospitals, more than 300 primary and specialty care locations and more than 2,700 physicians – and [Wake Forest University School of Medicine](#), the academic core of Advocate Health, and a recognized leader in experiential medical education and groundbreaking research, including [Wake Forest Innovations](#), a commercialization enterprise focused on advancing health care through new medical technologies and biomedical discovery. Atrium Health Wake Forest Baptist employs more than 22,000 teammates, part of Advocate Health's more than 160,000 teammates. Committed to redefining care for all, Atrium Health Wake Forest Baptist provides \$1.2 billion in community benefits. Follow us on [Facebook](#), [Instagram](#) and [X](#).

DAVIE MEDICAL CENTER

Atrium Health Wake Forest Baptist Davie Medical Center, a facility of North Carolina Baptist Hospital in Winston-Salem, provides high-quality, patient-centered care to residents of Davie County and surrounding communities. As part of Atrium Health Wake Forest Baptist and affiliated with Wake Forest University School of Medicine, the hospital connects local care with nationally recognized academic expertise. Designed to enhance the patient experience, Davie Medical Center offers convenient access at the intersection of I-40 and Highway 801, with convenient parking and easily navigable doctors' offices.

Davie Medical Center features 50 inpatient beds, surgical, emergency, laboratory, and radiology services, outpatient clinics, rehabilitation therapy, and a retail pharmacy. National recognized for patient experience and quality outcomes, the facility in soothing earth tones and natural light throughout the hospital, creating a welcoming, healing environment. With expert care from Atrium Health Wake Forest Baptist doctors and staff, Davie Medical Center continues to grow and evolve, delivering personalized, coordinated care close to home.



Orthopedics



Spine



Surgery



Ophthalmology



GI



Cardiology



Non-Oncology Infusion



Physical & Occupational Therapy



Cardiac Rehabilitation

2025 COMMUNITY HEALTH NEEDS ASSESSMENT

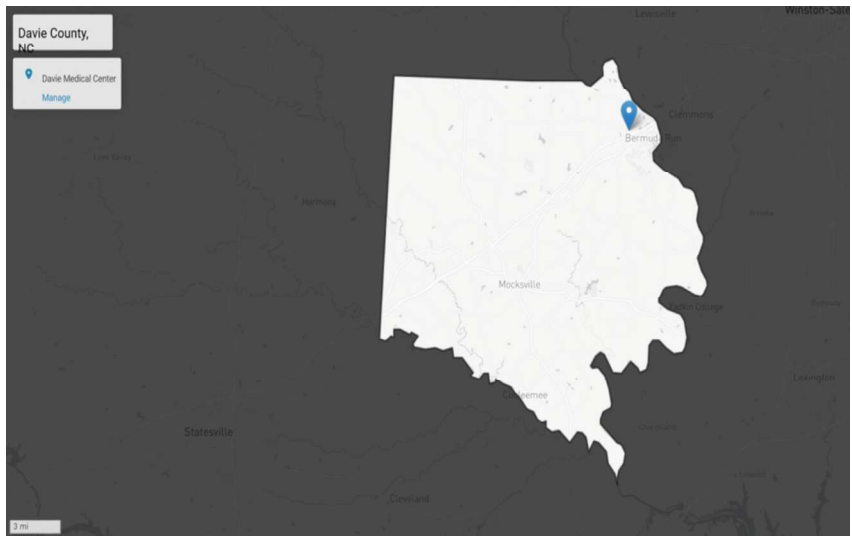
A Community Health Needs Assessment (CHNA) is an analysis of the population, resources, services, health care statuses, health care outcomes, and other data within a defined community or service area that helps identify potential health issues being experienced by community members. Every nonprofit hospital is required to complete a CHNA every three years under the [Patient Protection and Affordable Care Act \(ACA\)](#), to demonstrate that a hospital is committed to promoting health.

A CHNA report is designed to inform a wide range of groups to learn more about a community's health and most urgent needs. It is a key tool for promoting health for all, as it lifts the community voice and encourages collaboration between different groups to create focused strategies to address the health needs identified in the CHNA.

Community Definition

For the purposes of this assessment, "community" is defined as Davie County, a predominantly rural area located in the Piedmont region of the state. For the remainder of the report Atrium Health Wake Forest Baptist Davie Medical Center will also be referenced as Davie Medical Center.

Davie Medical Center serves a geographic area that includes the towns and cities of Mocksville, Bermuda Run, Advance, and Cooleemee, along with surrounding rural areas. Davie Medical Center, located in Bermuda Run, NC, is characterized by gently rolling hills, forested areas, and farmland, with the Yadkin River forming part of the county's eastern boundary. Davie County's landscape supports agriculture, outdoor recreation, and a growing residential population. With a population of approximately 45,000, the area blends small-town charm with proximity to urban amenities, and Davie Medical Center plays a vital role in meeting the healthcare needs of residents across all age groups, especially those in rural and underserved areas.



Understanding who lives in a community is an important part of the CHNA process. A community is more than just a place on a map - it's made up of the people who live there, their shared experiences, and their differences. These differences can include things like age, income, education, race or ethnicity, and what people know about health. Learning about these details helps us see what specific health problems people face and what support they may need.

Note about the data:

- 1-year data is used where available for large counties (65,000+ residents) to provide the most recent and relevant data.
- Multi-year data is used for small counties (under 65,000 residents) to reduce short-term fluctuations and the margin of error. This Davie County report uses multi-year data where available.

2019-2023 Davie County Data Estimates

Population

43,526

The population has increased by 3.6% between the 2010 and 2020 decennial census.

Gender

49.1% Male

50.9% Female

Median Age

45 years

Race/Ethnicity

Non-Hispanic White 82.7%

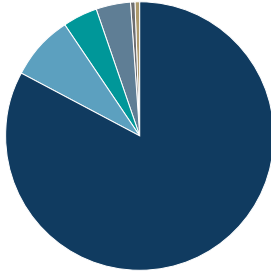
Hispanic or Latino 8.0%

Two or more races 4.2%

Non-Hispanic Black 4.0%

Asian 0.7%

Native American 0.3%



Population by Age Group

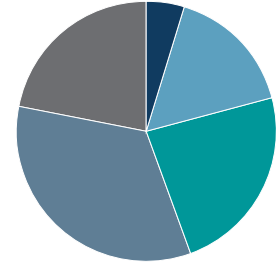
Infants 0-4 4.9%

Juveniles 5-17 16.1%

Young Adults 18-39 23.5%

Middle-Age 40-64 33.7%

Seniors 65+ 21.8%



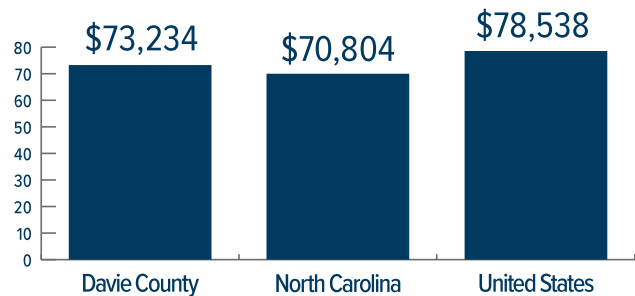
Primary language at Home, other than English

5.9% Spanish

0.7% Asian Languages



Median Household Income



Education

Individuals with a high school degree



90.7% Davie County

90.6% North Carolina

89.8% United States

Individuals with a bachelor's degree or higher



26.8% Davie County

36.8% North Carolina

36.2% United States

Population Living Below Poverty Level

10.0% Davie County

13.2% North Carolina

12.4% United States

Household/Family



3.6% Single Parent Families

24.8% Seniors Living Alone

Employment

Unemployment rate

4.5% Davie County

4.8% North Carolina

5.2% United States



Social Drivers of Health

Social drivers of health are the things in our everyday lives that can help us stay healthy or make it harder to be healthy. These include where we live, the food we eat, the schools we go to, the jobs our families have, and whether we can see a doctor when we need to.

Social Drivers of Health can also cause **health differences** between groups of people. For example, if someone lives far from a store with healthy food, it's harder for them to eat well. This can lead to health problems like heart disease or diabetes. Just telling people to eat healthy isn't enough—we need to make sure they have what they need to make healthy choices. That's why people who work in health, schools, housing, and transportation must work together to help everyone live a healthy life.

Social Conditions at a Glance

To better understand these factors and identify health inequities in a community, Advocate Health has partnered with Metopio, a software company that focuses on how communities are connected through people and places. Metopio's tools use data to show how different factors in each area influence health. It uses the latest data to create visual tools that focus on specific communities and hospital service areas.

The following section contains descriptions of four important indices found in Metopio. These indices combine various data points to compare areas in the community, helping to identify disparities caused by social factors that impact health. This approach allows health improvement efforts to be focused where they are most needed.

Social Vulnerability Index (SVI)

The SVI shows how vulnerable a community is based on 15 social factors like unemployment, disability, and minority status. Scores range from 0 (least vulnerable) to 100 (most vulnerable). (Source: Metopio, CDC, 2022)

The SVI for the Davie Medical Center service area is lower than both the state and national averages, indicating a higher community resilience and availability of resources.



Childhood Opportunity Index

The COI measures how well neighborhoods support children’s healthy growth. Scores range from Very Low (1–19) to Very High (80–100). (Source: Metopio, Diversitydatakids.org, 2017–2021)

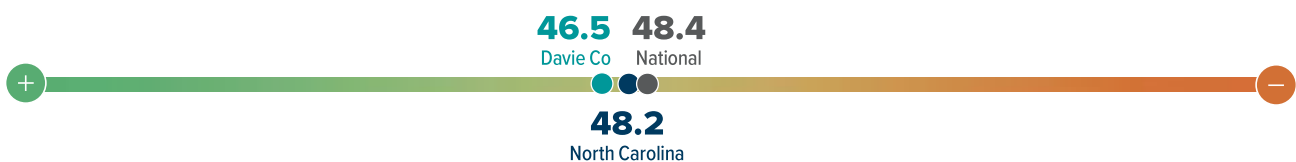
The COI for Davie Medical Center service area is higher than the state average and lower than the national average. The data suggests that children in the area have the same access to key resources that support healthy development, such as quality education, safe housing, and economic stability compared to the state.



Hardship Index

This index shows how much hardship a community faces. It includes things like unemployment, poverty, and crowded housing. Higher scores mean more hardship. (Source: Metopio, U.S. Census Bureau, ACS, 2018–2022)

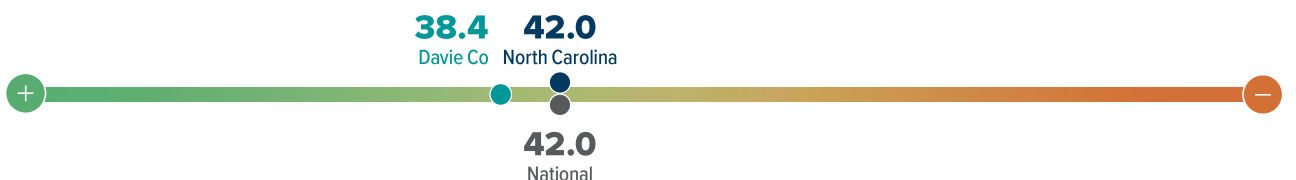
The Hardship Index for the Davie Medical Center is slightly lower than the state and national average. The data suggests that the community faces about the same hardship as others across the state and country on average.



ALICE Index

ALICE stands for Asset Limited, Income Constrained, Employed. It shows the percentage of working households that earn above the poverty line but still can’t afford basic needs like housing, food, and childcare. The data presented is the percentage of households living below the ALICE threshold.

The data suggests that the Davie Medical Center service area has a lower proportion of households facing financial hardship than the state and the country.



How the CHNA Was Conducted

Purpose and Process

Every three years, Davie Medical Center along with the Central Carolina Community Collaborative conducts a Community Health Needs Assessment (CHNA) across Central North Carolina. The CHNA serves as the foundation from which the hospitals and local health departments develop their respective community health improvement strategies. These findings are also intended to inform a broader audience – community health centers, government health agencies, public health departments, philanthropists, community-based organizations, and civic leaders - about the top health issues facing our community. This 2025 cycle is a back-to-back cycle to align with the Central Carolina Community Collaborative.

Partnership: The Central Carolina Community Collaborative

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

The CCCC includes:

Health Systems



Public Health



Community Organizations



Regional CHNA Approach: This Community Health Needs Assessment was strengthened by the use of shared data resources and collaborative platforms that enhanced both the depth and accessibility of our analysis. We are especially grateful for the Central Carolina Community Collaborative’s support in leveraging the **Atlas** site—a regional data-sharing hub that promotes transparency and cross-sector alignment. [CCCC Atlas](#)

Additionally, the **Metopio** platform played a critical role in visualizing complex health and demographic data, enabling stakeholders to explore trends, disparities, and community assets in an interactive and user-friendly format. These tools not only informed our findings but also empowered partners and residents to engage with data in meaningful ways, fostering a more informed and connected approach to community health improvement.

Data Sources, Collection and Analysis



Community Surveys

To engage the Davie Medical Center community, a brief survey was distributed from February through April 2025. It was promoted through social media, websites, community partners, and local events and engagement. The survey aimed to identify obstacles to ideal health and opportunities for improvement, resulting in nearly 7,500 surveys taken throughout the Central Carolina Community Collaborative footprint and 53 surveys locally. Convenience sampling was used for this survey, and participants were selected based on ease of access or availability. The data was then analyzed and compiled to understand the needs of the community.



Key Informant Interviews

To learn more specifics about the community's needs, stakeholders and leaders who have broad knowledge of the health of the community were interviewed by email as part of this process. Participants were chosen because of their ability to identify the primary concerns of the populations with whom they work, as well as of the community overall, and 17 participants completed the interviews. The interviews were conducted as part of the 2024 CHNA cycle and the data was incorporated as part of this 2025 cycle to ensure continuity in understanding the community's key health drivers.



County Health Rankings & Roadmaps

County Health Rankings & Roadmaps (CHR&R), a program of the University of Wisconsin Population Health Institute, draws attention to why there are differences in health within and across communities. The program highlights policies and practices that can help everyone be as healthy as possible. CHR&R aims to grow a shared understanding of health, equity and the power of communities to improve health for all. This work is rooted in a long-term vision where all people and places have what they need to thrive. *(County Health Rankings & Roadmaps, About Us, 2025)*



Secondary Data

Central Carolina Community Collaborative has a contract with Metopio to provide an internet-based data resource for their hospitals. This robust platform offers curated data from public and proprietary sources for information on health behaviors and health risks, health outcomes, health care utilization, demographic, and community-level drivers of health like economic, housing, employment, and environmental conditions. Data for each indicator is presented by race, ethnicity, and gender when the data is available (*Metopio: <https://public.metopio.io>*). All data collected through Metopio was quantitative and included data comparisons between county, the state of North Carolina and United States data.

Limitations of the Assessment

This report gives us a lot of helpful information about the health of people in the community. But it does not tell us everything. Some groups of people couldn't take part, like people without homes, people in jails, or people who don't speak English or Spanish, or Creole which were the languages supported by the survey. Respondents were also more likely to be insured, have a college education, be Caucasian and female. Through community collaboration and engagement, our teams will be intentionally working with underrepresented populations to amplify the community's voice in the implementation strategy phase of the work.

Also, even though the report talks about many health and social topics, it does not cover every sickness or health problem.

Summary of Findings

Overall Health Status

Overall, the health outcomes of Davie County are faring better than the average county in the state and the average county in the nation. (County Health Rankings and Roadmaps, 2025)

However, many disparities – or differences in outcomes - exist between groups of populations in nearly every social and health issue, especially for Black, Indigenous and People of Color (BIPOC) populations. These disparities are often caused by barriers that these communities face. Health inequities are the unfair differences in health that can be avoided, measured, and are often linked to injustice (AMA, 2021). Racism, both in systems and in personal interactions, is a key reason for these health inequities and the disparities in disease burden (CDC, 2024).

As you look at the data in the following sections, it is important to remember that these health issues are connected to many broader social and environmental factors.

Mortality

The top three leading causes of death in Davie County are:

All Ages:

Cancer
Diseases of the heart
Chronic lower respiratory diseases

Ages 0-19:

Conditions originating in the perinatal period
Motor vehicle injuries
Congenital abnormalities (birth defects)

(North Carolina County Health Data Book 2025)

Life Expectancy

The average life expectancy among residents:

- Davie County: 76.4 years
- North Carolina: 75.9 years
- United States: 77.1 years
- *(County Health Rankings & Roadmaps, Davie, North Carolina).*

Overall, the service area has seen a decrease in life expectancy from 78.0 in 2019.

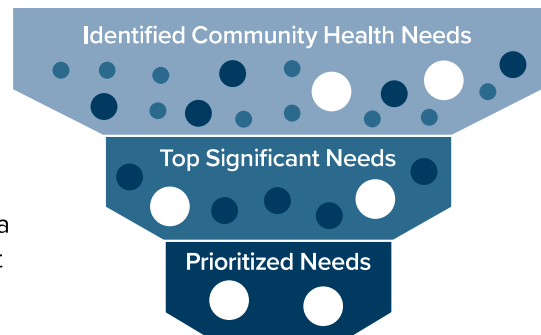
Identified Significant Needs

Even with the progress and support in the community, challenges remain. While local programs and services have helped improve health, there are still gaps in care and unmet needs. This section looks at the biggest health concerns found in this assessment and areas where more support is needed to help the community stay healthy.

The health needs identified in this CHNA cover a variety of factors, including health outcomes, social drivers, and health behaviors, which are all closely connected.

Health outcomes are the measurable results of a community’s overall health, such as rates of chronic diseases, infant deaths, or life expectancy. These outcomes are greatly influenced by the **social drivers of health** like income, education, employment, and access to healthcare. These factors can either help or hurt a person’s ability to stay healthy. **Health behaviors**, like physical activity, diet, smoking, and substance use, also affect health outcomes. These behaviors are often shaped by the social environment, such as community norms, available resources, and socioeconomic status.

There are many health needs within a community, which can make it difficult to know where to focus efforts. This is why community input is so important during the CHNA process. It helps guide our organization and the broader community in prioritizing the most important issues to address. For a health need to be considered significant, it should reflect a pressing concern for the community, align with public health priorities, and be supported by data. Additionally, using secondary data helps identify the root causes of health disparities within the significant need, which allows us to develop targeted solutions to improve health outcomes.



Top Health Concerns in Davie County

The following needs, listed below in alphabetical order, represent the significant health needs of the community based on the information gathered through the assessment process.

Areas of Opportunity Found Through the Assessment	
Access to Care	<ul style="list-style-type: none"> • Medical debt • Cost of care • Delayed care/unmet need
Behavioral Health: Mental Health & Substance Use	<ul style="list-style-type: none"> • Drug overdose mortality • Alcohol-impaired driving death rate • Limited mental health resources • Suicide and self-injury ED visit rate • Opioid-related ED visit rate
Chronic Disease & Prevention	<ul style="list-style-type: none"> • Mortality rates higher than state and national rates for: <ul style="list-style-type: none"> » Alzheimer’s, cancer, chronic lower respiratory disease, COVID-19, diabetes, heart disease, and stroke • Stroke hospitalization rate • Heart attack hospitalization rate • COVID-19 ED visit rate
Maternal & Child Health	<ul style="list-style-type: none"> • Infant and maternal mortality • Preterm births and Low birth weight • Post neonatal mortality • Teen pregnancy rate
Social Drivers of Health	<ul style="list-style-type: none"> • Food insecurity • Very low food access

The following pages summarize the top identified needs – also known as significant needs - from the CHNA process.

Why is this important? Access to care means having the ability to obtain affordable, relevant health services and wellness programs that raise the quality of life for everyone. It includes local options for basic health care like screening and prevention services and having access to health care providers when urgent health care needs arise.

Significant Need Reasoning

Medical debt is a significant issue in the United States, with the national average standing at 5.0%. In North Carolina, the average medical debt is slightly higher at 8.5%, with **Davie County experiencing an even greater average of 8.7%**.

The United States has 29.5 family medicine providers per capita (providers per 100,000 residents), while North Carolina has a higher rate of 30.8. **Davie County has a lower rate of 25.8 family medicine providers** per capita compared to the state and national averages.

Key Findings

- Davie County has 70.6 dentists per capita, significantly lower than the state average of 105.9 and the national average of 113.7.
- Of survey respondents in Davie County 19.6% reported delaying care.

Contributing Factors

Access to care is not equal for everyone because many people face barriers like lack of insurance, high costs, or limited coverage. Others live far from clinics or don't have reliable transportation. Long wait times, limited providers, and language challenges also make care harder for some people to get.

- Barriers & Challenges:
 - » Cost of Care
 - » Lack of transportation
 - » Lack of insurance
 - » Provider/clinic availability
 - » Waitlists/long wait times
- Primary care providers per capita (providers per 100,000 residents)
 - » Davie County: 42.1
 - » North Carolina: 83.9
 - » United States: 90.8



HIGHLIGHTED DISPARITIES

Mental health providers per capita*	
Davie County	167.1
North Carolina	632.3
United States	689.6

(*providers per 100,000 residents)

Uninsured Rates	
Davie County	10.0%
Non-Hispanic Black	17.1%
Hispanic or Latino	25.3%
Two or more races	12.6%

Even if a person has Medicaid, it is hard to find a provider. Also, people are not trusting of the providers located in this area.
 – Survey participant, Davie County

Behavioral Health: Mental Health and Substance Use

SIGNIFICANT NEED

Why is this important? Behavioral Health is the state of wellbeing relating to mental, social, and emotional behaviors and actions. It is an umbrella term that includes mental health (i.e., well-being, mental distress, mental health conditions), suicidal thoughts or suicide attempts, and/or substance use, or substance use disorders. ([CDC, 2025](#))

Significant Need Reasoning

In ages 20-39 years, suicide was the second leading cause of death in Davie County. (County Health Rankings and Roadmaps, 2025)

Drug overdose mortality in Davie County is higher than the state and national averages.

The emergency department visit rate for suicide and self-injury in Davie County is 82.6 per 100,000 residents, higher than the North Carolina rate of 70.8.

Key Findings

- Almost 27% of survey respondents in Davie County reported needing but not receiving mental health treatment. While this average is lower than the state's average of 35.7%, it speaks to an unmet need in mental health care.
- The rate of drug overdose emergency department visits in North Carolina is 161.8 per 100,000 people. In Davie County, the rate is significantly higher at 188.3, indicating a localized increase in drug-related health emergencies.
- Alcohol-impaired driving deaths in Davie County are significantly higher than both the national and state averages, with a rate of 34.4 deaths per 100,000 residents compared to 26.3 and 24.6, respectively.

Contributing Factors

Mental health is shaped by a wide range of factors, including genetics, stress, sleep, nutrition, trauma, and economic challenges. Because these influences differ from person to person, everyone's mental health journey is unique. While there are programs and services designed to foster resilience and support recovery, access to these resources is not equal for everyone. This is especially true for treatment and support related to drug and alcohol use, which can be particularly difficult to obtain for individuals living with low income or in communities with limited resources.

- Barriers & Challenges:
 - » Lack of culturally competent providers
 - » Cost of care
 - » Lack of awareness of services
 - » Stigma
 - » Concern for repercussions
 - » Lack of insurance



HIGHLIGHTED DISPARITIES

Survey respondents who needed but did not receive mental health treatment

- 26.6%** Davie County
- 100%** Asian
- 76.2%** Hispanic or Latino
- 43.4%** Non-Hispanic Black

Survey respondents who use e-cigarettes

- 17.48%** Davie County
- 5.06%** North Carolina

Opioid-related ED Visit Rate*

- 180.4** Davie County
 - 160.5** North Carolina
- (*per 100,000 residents)

Stigma is also a contributing factor. Several individuals with substance use disorders and/or severe and persistent mental illness have shared that they perceived being treated as 'less than' by providers.

– Key Informant Interview Participant, Davie County

Why is this important? Chronic Diseases are long-term health problems that often develop slowly from genetic, environmental, and lifestyle factors. Some common ones are heart disease, diabetes, cancer, and asthma. These diseases can make daily life harder and often need ongoing medical care. Over half of Americans have at least one chronic disease.

Significant Need Reasoning

Davie County has higher mortality rates than the state and national averages for **cancer, heart disease, and chronic lower respiratory disease**. These three are also the top three leading causes of death in Davie County. (County Health Rankings and Roadmaps, 2025)

Obesity rates in Davie County **are higher** than both the state and national averages at 34% of adults.

Key Findings

- Of the population in Davie County, 66.7% have access to exercise opportunities. While this is more than half of the population, the data shows Davie County lags the state average of 77.97% and the national average of 84.45%.
- The data shows that Davie County has a significantly lower green space proximity rate of 38.17% of adults, compared to 54.66% in North Carolina and 44.94% in the United States.
- The stroke hospitalization in Davie County is 159.2 per 100,000 residents, compared to a lower rate of 144.6 in North Carolina.

Contributing Factors

Many chronic diseases can be prevented with healthy habits. People with more money, education, and support tend to live longer and avoid these conditions. Without these resources, people often have worse health and shorter lives. For some, eating healthy or staying active is tough because of limited access to good food, busy schedules, or mental health struggles. Things like working multiple jobs or not having stable housing also make it harder to stay healthy. It's important to understand that making healthy choices isn't always easy – and it's not equal for everyone.

- Barriers & Challenges:
 - » Access to exercise opportunities
 - » Green space proximity
 - » Food insecurity
 - » Provider availability



HIGHLIGHTED DISPARITIES

Cancer Mortality (2019-2023)*

240.9 Davie County
258.4 Non-Hispanic White
365.0 Non-Hispanic Black

COVID-19 Mortality*

70.5 Davie County
45.5 North Carolina
48.9 United States

Heart attack hospitalization rate*

203.5 Davie County
139.3 North Carolina

COVID-19 ED Visit rate*

512.2 Davie County
617.8 Hispanic or Latino
1,196.2 Non-Hispanic Black

(*per 100,000 residents)

Why is this important? Maternal and child health focuses on the health and well-being of women during pregnancy, childbirth, and the postpartum period, as well as the health of infants and children. It encompasses access to quality prenatal care, safe delivery services, and early childhood health interventions to reduce disparities and improve long-term outcomes for families.

Maternal and infant health is important as it shows how well a community supports families during pregnancy and early childhood. Healthy moms and babies lead to stronger, healthier communities. When the data highlights disparities, it can point to bigger issues in healthcare access and focusing on this need improves care and outcomes for everyone.

Significant Need Reasoning

Preterm births in Davie County are higher than both the state and national averages. The county's preterm birth rate is 11.5%, compared to North Carolina's 10.8% and the United States' 10.3%.

The infant mortality rate for Davie County is 7.1 deaths per 1,000 live births, while the state rate is 6.7 and the national rate is 5.5.

Davie County has 15 OB-GYN physicians per 100,000 females ages 15-64, compared to 37 in North Carolina.

Key Findings

- The rate of low birth weight in Davie County is 9.8%, which is higher than the state average of 9.4% and significantly above the national average of 8.5%.
- Davie County's teen pregnancy rate is 21 pregnancies per 1,000 female teens, compared to a teen pregnancy rate of 16.1 for North Carolina.
- In Davie County, the post neonatal mortality rate is 3.5 deaths per 1,000 live births. This rate is higher than North Carolina's at 2.3.

Contributing Factors

Maternal and infant health issues are shaped by a complex interplay of social, economic, and systemic factors. Sometimes it is hard to find doctors or get appointments, especially if people do not have transportation or insurance. All these things together can make it tough for moms and babies to be healthy.

- **Barriers & Challenges:**
 - » Provider availability
 - » Lack of awareness/education
 - » Racial disparities
 - » Unmet medical needs

HIGHLIGHTED DISPARITIES

	Fetal mortality rate*	Infant mortality rate*
Davie County	6.4	7.4
Non-Hispanic White	5.7	5.1
Non-Hispanic Black	13.7	27.8
Hispanic or Latino	8.2	–
Two or more races	–	52.6

(*per 1,000 live births)

“ We have unacceptably high infant mortality rates, particularly for black infants. Key Informant Interview, Stakeholder participant ”

Why is this important? Economic stability and reliable transportation enable access to medical care, nutritious food, safe housing and employment – all of which directly influence physical and mental well-being. Food security, a key driver, refers to consistent access to affordable, nutritious food—essential for preventing chronic disease and supporting overall well-being. Without these resources, individuals often delay care, experience higher rates of chronic illness, and face greater health disparities. Together they shape the foundation for equitable and sustainable health outcomes.

Significant Need Reasoning

In Davie County, 10.3% of households receive SNAP benefits, compared to 12.5% in North Carolina.

14.2% of residents of Davie County experience food insecurity. This rate is only slightly lower than the national rate of 14.5%.

Key Findings

- The data indicates that Davie County has a very low food access rate of 32.3%, which is significantly higher than the state average of 22.5% and the national average of 21.2%.
- Of survey respondents, 85.1% reported food costs being too expensive as the main reason they struggle to get fresh fruits and vegetables in Davie County.

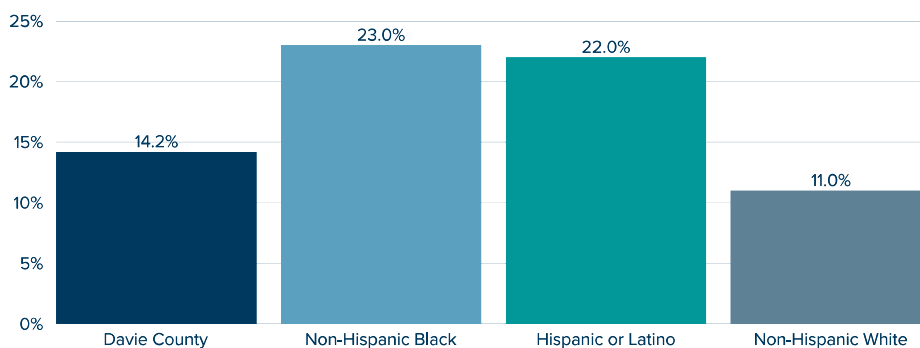
Contributing Factors

Having a job and access to a steady paycheck is connected to many benefits, as listed above. Food access is complicated as it ties back to resources including poverty, income, and community infrastructure.

- Barriers & Challenges
 - » Fruits and vegetables are too expensive
 - » Poor quality of food
 - » Lack of transportation
 - » SNAP eligible stores lack fresh produce
 - » Lack of availability of fresh food within a mile

HIGHLIGHTED DISPARITIES

Food Insecurity



Social determinants of health are a major problem for us. Affordable housing, food insecurity, lack of transportation, and many people unable to access healthcare due to financial problems.

Community Member, Survey Response

AREAS TO WATCH

We are closely monitoring emerging data indicators that may signal rising community concerns. While these issues have not yet reached priority status, continued tracking will help determine whether they warrant deeper analysis or targeted intervention in future assessments.



Disaster preparedness was asked for the first time in the survey and discovered that just over 31% of the service area does not feel prepared at all or not very prepared for a disaster.

PRIORITIZATION OF HEALTH-RELATED ISSUES

PRIORITY SETTING PROCESS

In August 2025, an ad hoc group of leaders from Davie Medical Center prioritized significant needs based on the criteria below.

Size/seriousness of the problem

Effectiveness of available interventions

Available resources to address the health issue

Health care system adequately situated to address the health issue

Meets a defined community need as identified through data

Potential for issue to impact other health and social issues

Ability to effectively address or impact health issue through collaboration

Significant Health Needs Selected

Using these criteria, Davie Medical Center prioritized these significant health needs to address in the 2026-2028 implementation strategy:



Access to Care



**Chronic Disease and Prevention:
Osteoporosis, Heart Disease,
Stroke and Cancer**



**Behavioral Health: Mental
Health and Substance Use**



HEALTH NEEDS NOT SELECTED

Social Drivers of Health: Food Security

Food Security was not selected as a priority for this assessment because it is currently being addressed by other established community partners through ongoing programs and initiatives. While food security remains an important need, the CHNA prioritization process focused on other pressing health needs in the county. Davie Medical Center remains dedicated to advancing regional collaborations and supporting initiatives that promote food security through joint efforts with community partners.

Maternal and Infant Health:

Maternal and Child Health raises significant concern in Davie County, with indicators such as preterm births, infant mortality, and maternal health disparities highlighting ongoing challenges. Despite its importance, this area was not selected as a top priority for the current CHNA cycle due to the presence of other pressing health needs that align more closely with available resources and community readiness. However, Davie Medical Center remains committed to supporting regional efforts and partnerships that address maternal and child health through collaborative initiatives.

APPROVAL OF COMMUNITY HEALTH NEEDS ASSESSMENT

The 2025 CHNA was presented to the Atrium Health Wake Forest Baptist Board, the authorizing body of the hospital. The board approved the report on May 7, 2026.

VEHICLE FOR COMMUNITY FEEDBACK

Community input is essential to the success and relevance of this Community Health Needs Assessment (CHNA). Residents, stakeholders, and organizations are encouraged to review the findings and share their feedback. Comments, suggestions, and questions can be submitted by using the email below. Feedback will be reviewed and considered in future planning efforts.

Please send an email to us at: CHNA@advocatehealth.org

This report can be viewed online at Atrium Health Wake Forest Baptist's Community Health Needs Assessment Report webpage via the following link:

[Needs Assessments and Implementation Reports | Atrium Health Wake Forest Baptist](#)

A copy of this report may also be requested by contacting the hospital's Community Health Department.

EVALUATION OF IMPACT FROM PREVIOUS CHNA

*Note: Because this report is a back-to-back cycle to align with the Central Carolina Community Collaborative, the numbers are for ten months as of October 2025.

Priority 1: Access to Care

- From January to October 2025, there were 397 Community Resource Hub searches within the three zip codes of Davie County. The community's utilization of the Community Resource Hub focused primarily on the following needs: diapers and baby products, food pantries, help paying for utilities, and help paying for healthcare.
- There were two new healthcare service access points established in 2025. The first was hiring an Atrium Health Faith Community Health Nurse in Cooleemee, and the second was establishing a connection with the Comprehensive Cancer Center for additional community cancer screenings.
- FaithHealth connectors and the Faith Community Health Nurse supported 171 individuals with medication access.

Priority 2: Chronic Disease and Prevention

- Through the work of the Faith Community Nurse, 39 individuals received education and screenings for hypertension in Cooleemee, NC.
- An Osteoporosis clinic was established, and non-oncology infusion services were newly added.
- More than 300 sports physicals were performed for students at no cost.
- The window of reporting and the delayed hiring of the Faith Community Nurse in Cooleemee affected the overall impact of this priority

Priority 3: Behavioral Health: Mental Health and Substance Use

- Through community efforts in FaithHealth, 212 community members were screened for mental health concerns and connected to appropriate resources.
- In 2025, the medical center supported 329 individuals through a drug take-back program and pharmacy event through the Senior Center's Senior Expo.

Priority 4: Social Drivers of Health: Food Security, Housing and Transportation

- The FaithHealth team supported community members in need of food through 257 referrals to community food pantries.
- FaithHealth Connectors served 79 residents with housing support by navigating local and state-level programs and connecting individuals to financial support.
- Through a partnership with The Last Mile, FaithHealth connectors assisted 1,130 individuals with healthcare-related transportation support.

APPENDICES

Appendix 1: Central Carolina Community Collaborative Survey

To view the Davie Medical Center Community Health Assessment report, which includes summaries of the community feedback, descriptions of the data collection methods and the members of the collaborative, along with the full survey reports, visit: <https://cccc.metop.io/community-health-reports-and-plans>

Appendix 2: Community Resources Available for Significant Needs

The resources under each significant need are not a complete list. For more community resources, please visit please visit the Atrium Health Community Resource Hub: <https://www.atriumhealthcommunityresourcehub.org>

Access to Care / Chronic Disease and Prevention

Organization	Website	Contact
A Store House for Jesus	www.astorehouseforjesus.org	336-753-8080
Davie Medical Center	www.wakehealth.edu/locations/hospitals/davie-medical-center	336-998-1300
Kintegra Family Medicine	www.kintegra.org	336-477-2233
Atrium Health Primary Care One Health Family Medical Center & Urgent Care	www.wakehealth.edu	336-716-7435

Substance Use

Organization	Website	Contact
Davie County Health Department	www.co.davie.nc.us	336-753-6750
Daymark Recovery Services	www.daymarkrecovery.org	336-751-5636
Kintegra Behavioral Health	www.kintegra.org	336-753-6440

Maternal & Child Health

Organization	Website	Contact
Davie County Health Department	www.co.davie.nc.us	336-753-6750
Davie Pregnancy Care Center	www.daviepregnancycare.org	336-753-4673

Mental Health

Organization	Website	Contact
CareNet Counseling	www.carenetnc.org	336-716-0800
Dragonfly House	www.thedragonflyhouse.com	336-753-6155
Kintegra Behavioral Health	www.kintegra.org	336-753-6440
Partners Behavioral Health Management	www.partnersbhm.org	877-864-1454

Mental Health

Organization	Website	Contact
A Storehouse for Jesus	www.astorehouseforjesus.org	336-753-8081
Family Promise of Davie County	www.familypromisedc.org	336-284-4200
The Episcopal Church of the Ascension at Fork-Our Daily Bread Food Pantry	www.ascensionfork.org	336-998-0857
The Last Mile Transportation Services	Not Applicable	336-529-2145

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Thank You

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