

EXECUTIVE SUMMARY

The State of North Carolina requires that all Local Health Departments submit a comprehensive Community Health Assessment (CHA) every four years and a State of the County Health Report (SOTCH) in each of the interim years. This requirement also applies to all local Healthy Carolinians Partnerships. Durham's 2003 Community Health Assessment, along with recent SOTCH Reports for Durham, can be viewed at www.healthydurham.org.

As in 2003, this assessment has been a truly collaborative effort. It was led by the Coordinator of the vibrant *Partnership for a Healthy Durham* and involved many members of the Partnership.

The goal of Durham's 2007 Community Health Assessment was **to provide, in one location, a compilation of valid and reliable information about the health of the Durham community**. We have strived to do this in ways that will make it easy for members of the Durham Community to access and understand the information.

As in the 2003 assessment, the *Evans & Stoddart Field Model* was used to provide an organizing framework for the information presented in this document. The model, shown in visual form at the beginning of each section of the full document, comprises the following major health domains:

- Health
- Well-Being
- Disease Prevalence
- Health Care
- Prosperity
- Physical Environment
- Social Environment
- Individual Behaviors/Risks and
- Genetic endowment.

As was the case with Durham's 2003 Community Health Assessment:

- Genetic endowment was dropped from the model because data relating to this domain, while highly relevant to health, are not available.
- The Health domain and the Well-being domain have been collapsed together into one section of the document.

SOURCES

Information provided in this year's Community Health Assessment came from:

1. Results from *the 2007 Durham County Health Assessment Survey* – a random telephone survey of 700 residents of Durham County;
2. Results from the 2007 *Behavioral Risk Factor Surveillance Survey* for Durham County – a random phone survey of 400 residents;
3. Preliminary results from the *Youth Risk Behavior Survey (YRBS)* – a survey of 484 Middle School students and 392 High School students attending Durham Public Schools;
4. Results from a series of *Community Listening Sessions* in which more than 70 individuals from different parts of Durham participated;
5. The Report of an *Action-Oriented Community Diagnosis* undertaken in the communities served by Lincoln Community Health Center;
6. The North Carolina State Center for Health Statistics and

7. Agencies and organizations in Durham County.

Since this was the first YRBS survey for Durham County, it will not be possible to define trends in risk behavior of Durham's youth until the next survey is conducted. It is also very important to note that the results of the Durham YRBS that are presented in this 2007 Community Health Assessment are based only on a preliminary analysis of the survey results.

For much of the data about Durham County in the 2007 Assessment, comparisons are made between Durham County and other NC counties of similar size and demographics. These were Forsyth, Guilford and Mecklenburg counties. Comparisons were also made with the State of North Carolina.

KEY FINDINGS

1. Health Function and Well-Being

Main findings in the twin domains of health and well-being are:

- In 2007, 40% of Durham's population rated their well-being as *high* – compared with 31% in 2003.
- 28.6% of those who have attended college rate their health as excellent – whereas only 15% of residents of Durham who have not attended college rate their health as *excellent*.
- 30% of those who identify themselves as Caucasian rate their health as *excellent* – whereas only 17% of Durham's minorities rate their health as *excellent*.
- The percentage of people in Durham who state that they have a problem for which they have taken prescription medication for at least three months in a row has increased from 44% in 2003 to 53% in 2007.
- Durham has a lower percentage of deaths due to motor vehicle crashes than for the State of North Carolina overall (9.2% for 0-19 year-olds in Durham, compared with 16% statewide - and 13.6% for 20-39 year-olds in Durham, compared with 20% statewide).

However:

- Durham has a significant intentional injury problem. For 0-19 year-olds homicide caused 11.3% of deaths in Durham - compared with 4.7% statewide; and for 20-39 year-olds homicides caused 20.6% of deaths - compared with 10.7% statewide.
- In 2007, 32% of Latino students in Durham Public Middle Schools and High Schools reported that they had attempted to commit suicide during the past year (compared with 15% of other students).
- The percentage of Latinos who rate their well-being as *high* has not increased since 2003.
- After declining for several years, the reported bicycle crash rate in Durham has increased for each of the last three years – to the extent that Durham now higher than the NC rate.

Many programs and resources in Durham County that aim to promote health and well-being are described in the Assessment. The newly-formed Injury Prevention Working Group of *The Partnership for a Healthy Durham* is:

- Exploring ways to collect accurate 'baseline' data about injuries;
- Developing mechanisms for improved communication and information-sharing between the many agencies and organizations in Durham County that play a role in injury prevention;
- Identifying best practices in injury prevention;

2. Disease

Main findings in the disease domain are:

- The downward trend in heart disease rates is continuing among all segments of the population.
- 29% of people in Durham have been told by their health care provider that their blood cholesterol rate is high - compared with 36.3% statewide.

However:

- For most of the leading causes of death the rates are much higher for minorities than for the general population. This is particularly true for minority males.
- In 2006, 30 infants in Durham died before reaching their first birthday. Of these 22 were minorities. The minority infant mortality rate for Durham County is 12.6 deaths per 1,000 live births - compared to the rate for the overall Durham population of 7.2 deaths per 1,000 live births.
- The rate of low birthweight babies for minorities in Durham County is 128.5 per 1,000 live births compared with 88.7 per 1,000 live births for the overall Durham population.
- Cancer is the leading cause of death in Durham County.
- 1,114 people in Durham County were living with HIV/AIDS in 2005. Of the 111 new infections that year, 55 were African-American males and 25 were African-American females.
- In 2005 (the latest year for which data is available) the most common mode of infection for transmission of HIV was “men having sex with men” (MSM).
- Age-adjusted rates of prostate cancer is increasing.
- The percentage of people reporting a history of cardio-vascular disease (CVD) increased at a faster rate in Durham than in any of the comparison counties.
- In 2007, African-American students in middle schools in Durham County reported much higher asthma rates (27.5%) than the rest of the school population (15.4%).
- 8,457 clients were seen by *The Durham Center* in 2006. This was a 13% increase over the previous year.

Many programs and resources in Durham County that aim to prevent disease are described in the Assessment. The Infant Mortality Working Group of *The Partnership for a Healthy Durham* has established support groups for women in several Durham neighborhoods and initiated fatherhood education.

3. Health Care

Main findings in the health care domain are:

- In 2007, 79% of the total Durham population rated their health care as very good, compared with 72% in 2003.
- In 2007, 80% of African-Americans in Durham rated their health care as very good, compared with 73% in 2003.
- When compared with all of the comparison counties, and the rest of North Carolina, Durham has a very large number of health workers, especially physicians (67.1 physicians per 10,000 - compared with 20.8 per 10,000 population statewide).

However:

- Estimates of the number of uninsured adults under the age of 65 in Durham County lie between 13% and 26%.
- In 2006, 78% of the patients served by Lincoln Community Health Center were uninsured - compared with an average rate of 51.2% for similar Health Centers statewide.
- 82% of people served by Lincoln Community Health Center live below the federal poverty level – compared with a statewide average of 54%.

- Factors associated with being uninsured in Durham include being a minority, male, under the age of 45, less educated, or living in a household with an income of less than \$50,000. In 2007, 72% of Latinos reported having no insurance coverage.
- The percentage of adults in Durham who are employed for wages but without any health insurance increased from 15% in 2004 to 27% in 2006.
- College students who participated in the listening sessions expressed concerns about lack of health insurance coverage during the period between college and starting a full-time job.
- 28% of Latinos stated that they had to forego seeing a doctor because of the cost.

Many programs and resources in Durham County that focus on health care are described in the Assessment. Also, the Health Access Working Group of the *Partnership for a Healthy Durham* has:

- Participated in the development of *Project Access* – a program to increase access to specialty care for uninsured individuals, especially Lincoln Community Health Center patients (to be started by June 2008).
- Participated in the development of a *health plan for uninsured patients* in Durham County who wish to purchase a modified basic health plan.
- Sponsored monthly *learning sessions* where the Access to Care Committee members (primarily community-based healthcare leaders in Durham) acquire new information about local, state, or federal healthcare services and programs (i.e. home health and hospice services).
- Published a monthly article about healthcare in Durham in the *Herald-Sun* newspaper.
- Created a “glossary” of health access terminology and a brochure describing options for basic medical services for the uninsured.

4. Prosperity

Main findings in the prosperity domain are:

- In 2005 Durham had median and household family incomes that are higher than for NC overall.
- The unemployment rate in Durham has gradually declined since 2002.
- Home ownership rates in Durham County increased from 55% to 71% between 2003 and 2007. Home ownership rates among African Americans increased from 42% to 63% during the same period and home ownership rates among Latinos increased from 13% to 27% during the same period.

However:

- There is a disparity between ‘wages earned’ and ‘per capita income’ in Durham County – suggesting that many of those earning higher wages may not be residents in the County.
- Latino participants in the listening sessions described how the ability to earn adequate incomes, or to pay for health insurance, is often affected by difficulty in obtaining identification documents.
- The 2007 ‘point in time’ count of the homeless found 539 homeless persons in Durham County.

Many programs and resources in Durham County that focus on increasing prosperity are described in the Assessment.

5. Physical Environment

Main findings in the physical environment domain are:

- In 2007, 40% of Durham’s population described their home as an excellent place to live in – compared with 32% in 2003. 30% of African Americans in Durham described their home as an excellent place to live in – compared to 29% in 2003 and 21% of Durham’s

Latino population described their home as an excellent place to live in (compared with only 10% in 2003).

- Lead screenings are increasing for children in Durham, and the number of children testing positive for lead exposure is decreasing.
- Participants in listening sessions expressed high levels of satisfaction with Durham's transportation system.

However:

- Greenhouse gas emissions in Durham County, especially emissions from mobile sources (cars and trucks) have increased substantially since 1998.
- Durham ranks 42 out of 66 NC counties that release cancer-causing substances into air and water (meaning that 41 other counties had higher risks of cancer from pollution).
- Durham had the seventh highest health risks from criteria air pollutants among 25 NC counties.
- Durham has the second worst added cancer risk from hazardous air pollutants in NC.
- 7.43% of Durham's surface water have impaired or threatened uses due to low water quality standards.

Many programs and resources in Durham County that focus on changing the physical environment are described in the Assessment.

6. Social Environment

Main findings in the social environment domain are:

- The great diversity of Durham is reflected in the fact that Durham became a 'Majority-Minority' County in 2005 – when Durham was approximately 48.4% Caucasian, 37.2% African-American, 11% Latino, 4% Asian, 8.4% other and 2% multi-racial.
- According to 2005 census projections, 16.8% of Durham residents over five years old spoke a language other than English when at home.
- Durham has a higher rate of “non-family households” than all the comparison counties and NC as a whole.
- The number of cases of child abuse that were confirmed by the Department of Social Services has dropped from approximately 23 per 1,000 children in 2000 to 7 per 1,000 children in 2006.
- The percentage of Caucasian students in Durham Public Middle Schools and High Schools who reported in 2007 that a parent or family member has talked with them about sex was less than for other students – and Caucasian students who have engaged in sexual activity reported lower rates of condom use than other students.

However:

- After dropping each year from 1997, Durham's violent crime rate increased in 2006.
- In 2004–2005, there were 2,160 domestic violence hotline calls and 1,558 domestic violence clients in Durham County. 26% of the domestic violence clients were Caucasian, 46% were African-American, 20% were Latino, and 98% were women.
- Almost 46% of students in Durham's schools qualified for free or reduced lunches in 2006, meaning that they live with families with low incomes.
- Participants in several of the listening sessions expressed strong concern about gang activity in several Durham neighborhoods.
- 72.5% of Durham's overall population feels safe walking in their neighborhood during the day (compared with only 45% of Latinos) and 42% of people in Durham feel safe walking in their neighborhood during the night (compared with only 20% of Latinos).

Many programs and resources in Durham County that aim to improve the social environment are described in the full assessment. Also, the Substance Abuse Working Group of *The Partnership*

for a Healthy Durham has completed a comprehensive summary of substance abuse in Durham County. This report documents how substance abuse is a ‘crosscutting issue’ that affects almost every aspect of life in Durham. The Working Group is currently developing strategies to address (a) access to substance abuse services, (b) substance abuse in the social environment - including issues of access to alcohol and other substances, (c) substance abuse education (including a “tool-kit” of resources for parents on how to prevent substance abuse).

7. Individual Behaviors

Main findings in the domain of individual behavior are:

- The numbers of smokers in all population groups continues to decline (from 17.5% in 2003 to 14% in 2007).
- The people of Durham show strong support for additional taxes on cigarettes and prevention programs - with 48.7% saying they would support an additional tax of \$1.00 or more on a packet of cigarettes if the funds went to smoking prevention and cessation programs.
- 78% of residents of Durham County surveyed stated that they believed that they would increase their physical activity if their community had more accessible sidewalks or trails for walking or bicycling.
- The number of women over 40 in Durham County who have had a mammogram in the past two years increased from 80% to 88% between 2004 and 2006. This is the highest rate among all the comparison counties.
- The number of people in Durham County who have been screened for colorectal cancer increased from 58% to 74% from 2004 to 2006.
- In 2005, 27.5% of the Durham population consumed at least 5 fruits and vegetables daily compared with 22.5% for NC overall. The rates are lowest for those who did not attend college, minorities, males, and people in household earning less than \$50,000 / year.

However:

- Between 57-65% of people in Durham are overweight or obese and the numbers of obese people in Durham County, at all income levels, has increased substantially between 2003 and 2007 – especially among those who did not go to college.
- In 2006, 27% of the children (2 – 4 years old) enrolled in the *Women, Infants, Children Program* (WIC) in Durham County were overweight. The Durham rate has increased every year since 2002 (when the rate was 10%) and is also much higher than the 2006 rate of 15% for North Carolina overall.
- In 2005, only 36.3% of Durham County residents meet national recommendations for physical activity compared with 42.1% statewide. Rates are worse for those who did not attend college, minorities, and people in household earning less than \$50,000 / year.
- The rate of Latina teen pregnancies continues to be high (178 per 1,000 females aged 15-17 compared with 48 per 1,000 for the rest of Durham).

Many programs and resources in Durham County that focus on changing individual behaviors are described in the Assessment. Also, the *Obesity and Chronic Diseases Working Group* of the *Partnership for a Healthy Durham* has:

- Created a Durham County map, to be published online, that will show places for healthy food choices and exercise.
- Implemented a nutrition survey that is in the final stage of data collection.

The Working Group has also promoted and supported: collection of information on health behaviors of Latinos in Durham by El Centro Hispano; collection of BMI's and nutrition information in selected Durham Public Schools; positive changes in school food offerings in

Durham Public Schools; DINE for Life (the Durham County Health Department's Program serving 15 schools with over 50% of the student body eligible for Food Stamps); and the establishment by El Centro Hispano of a soccer academy (that has over 80 members) and a nutrition and diabetes education program that has already served 4,908 individuals in 2007).

Future plans of the Working Group include the development of multi-agency services for physical activity and nutrition improvement (targeting low-income Durham residents) and a worksite program focusing on healthy weight and nutrition for employees of Durham Public Schools.

CONCLUSION AND NEXT STEPS

The findings from this 2007 Community Health Assessment suggest that Durham is poised to become not only a *City of Medicine* but also a *Community of Health*. The work of the *Partnership for a Healthy Durham*, which is currently planning and implementing several far-reaching health initiatives, will be critical to bringing about this transition.

Several important issues that require further exploration were identified during the 2007 Community Health Assessment. They include:

- The mental health of Latino youth in Durham;
- The continuing increase in cancer rates and
- The possible relationship between gang activity, substance abuse and perceptions of safety in the City of Durham.

The next steps are to:

- Report to the many neighborhoods and organizations in Durham County in print and at public forums. This reporting will be coordinated by *The People's Clearing House* – a Committee of *The Partnership for a Healthy Durham*;
- Review/revise the priorities of the Partnership for a Healthy Durham in light of the assessment findings and
- Develop Action Plans to be submitted to the State of North Carolina by June 1, 2008.