

**DURHAM COUNTY
DEPARTMENT OF
PUBLIC HEALTH
ANNUAL REPORT 2018**

Durham’s vitality is built upon the health of our residents and the capacity of our community to foster and enhance the well-being of every citizen.

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Leadership Team

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Public Health Director

Joanne Pierce, MA, MPH
Deputy Public Health Director

Tara Blackley, MA, MPH, MBA
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Arlene Seña, MD, MPH
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Mel Downey-Piper, MPH, CHES
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Michele Easterling, MPH, RD, LDN
Nutrition Director

James Harris Jr., MA, PhD
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Marcia Johnson, MPA
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Environmental Health Director

Hattie Wood, RN, MSN, MHA
Community Health and Nursing Director

Katie Mallette, MLS (ASCP)CM
Allied Health Director

Board of Health

F. Vincent Allison, III
Chairman-Dentist Position

Stephen Dederick, RPh, MS
Vice-Chair-Pharmacist Position

Brenda Howerton
Durham County Board of County Commissioners Liaison

Mary Ann Fuchs, DNP, RN, NEA-BC FAAN
Nurse Position

Teme Levbarg, PhD, MSW
Public Member At-Large

Arthur Feguson, BS
Public Member At-Large

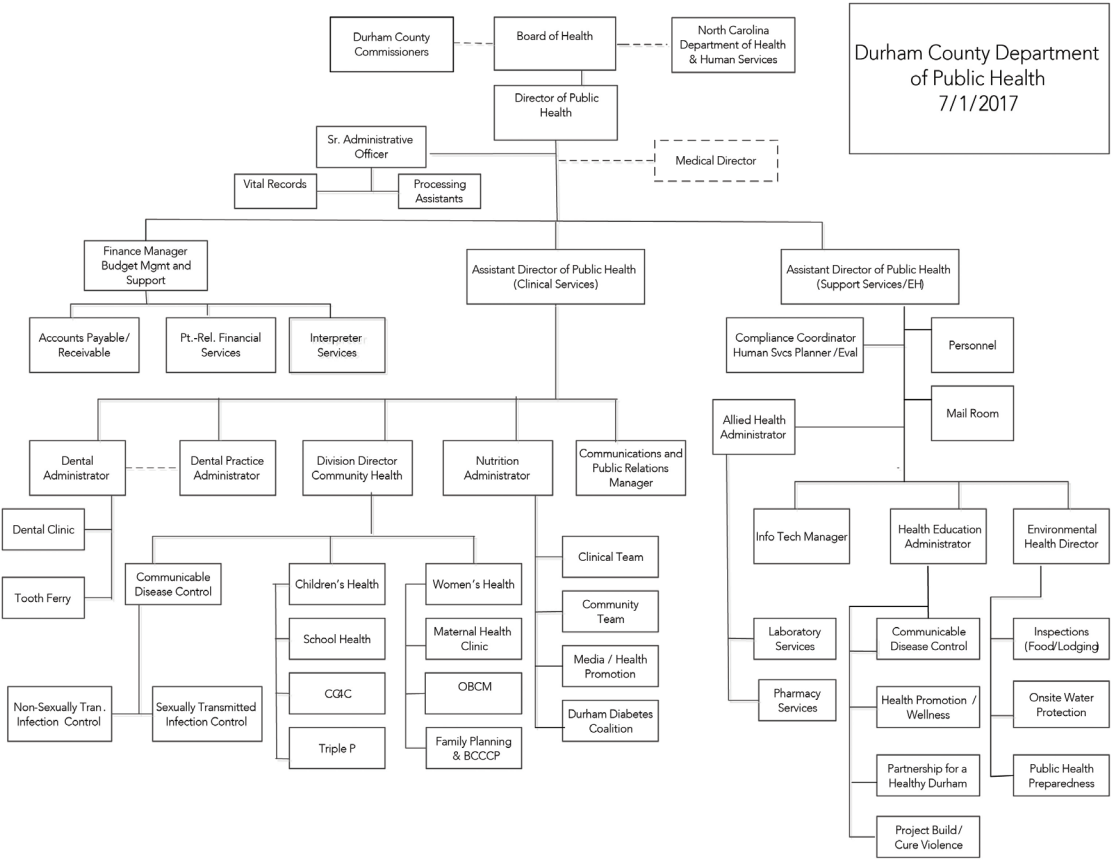
Mary Braithwaite,MD
Physician Position

Rosemary Jackson, MD, MPH
Public Member At-Large

A. Spencer Curtis, MPH
Engineer Position

James Miller, DVM
Veterinarian Position

Robert Rosenstein OD
Optometrist Position



Health Directors Message

I am pleased to share the Durham County Department of Public Health (DCoDPH) annual report. This report provides an overview of the DCoDPH programs and services that protect and promote the health of our residents. It also highlights the important public health issues and trends, which help to guide the work of the health department.

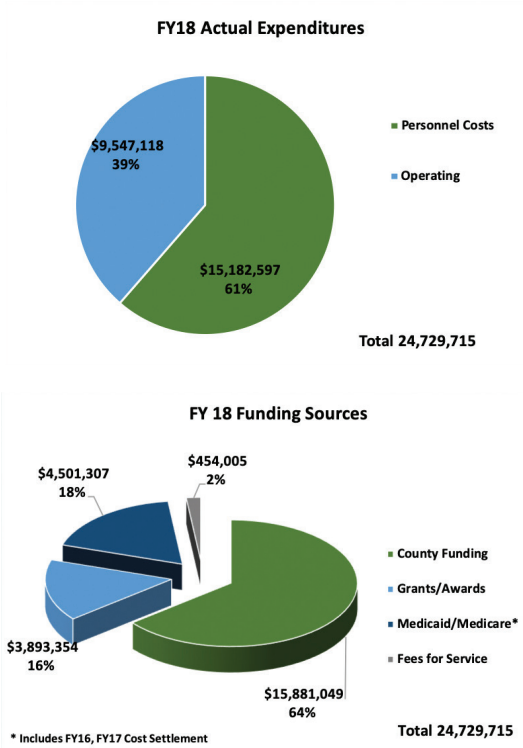
DCoDPH uses the 10 Essential Public Health Services as a framework to guide our core functions and better serve the community. These functions are our responsibility to Durham County residents. Throughout this annual report, examples of how we are working to meet those responsibilities and improve the health and well-being of the community.

Gayle B. Harris

Financials

Actuals	
Expenditures FY 18	FY18
Personnel Costs	\$15,182,597
Operating	\$9,547,118
Capital	\$-
	24,729,715

Funding Sources FY 18	
County Funding	\$15,881,049
Grants/Awards	\$3,893,354
Medicaid/Medicare*	\$4,501,307
Fees for Service	\$454,005
	24,729,715



Programs and Services

Services
Birth Control
Cervical Cancer Screenings
Chronic Disease, Diabetes and Chronic Pain Self-Management
Communicable Disease Control
County Jail Health
Dental
Emergency Contraception
Environmental Health Inspections
Family Planning
Health Education
Immunizations (Vaccinations)
Mammograms & Breast Exams
Nutrition Counseling & Therapy
Pap Smears
Postpartum Examinations
Pregnancy Tests
Prenatal Care
Rabies Prevention
Refugee Health
Restaurant Complaints
Smoking/Tobacco Cessation
STD Testing & Treatment
Tuberculosis (TB) Control
Webinars
Youth Dental Cleanings & Extractions
Youth On-site Dental Screenings

Programs
Autism Spectrum Disorders Dental Clinic
Bull City United
Care Coordination for Children (CC4C)
Support Groups (diabetes, former smokers)
DINE for Life in the Community
Durham County Health Ministry Network
FreshStart Smoking Cessation Program
Junior Iron Chef Durham
Obstetrics Care Management (OBCM)
Partnership for A Healthy Durham
Positive Parenting Program (Triple P)
Project BUILD
School Health Program
Vital Records

Who We Served

Gender	
Male	3,691
Female	7,674
Unknown	7
Total Patients	11,372
Ethnicity	
Hispanic/Latino	4,411
Not Hispanic/Latino	6,707
Unknown	254
Total Patients	11,372
Race	
White	1,541
Black or African American	5,435
Asian	588
American Indian or Alaska Native	25
Native Hawaiian or Other Pacific Islander	22
Multi-Racial	819
Unknown	2,942
Total Patients	11,372
Insurer	
Self Pay	6,856
Medicare	19
Medicaid	4,037
Other Insurance	460
Total Patient	11,372
Age Group	
00-04 Years	1,061
5 to 14	727
15 to 24	2,732
25-34	3,616
35-44	1,843
45-54	810
55-64	450
65 and older	133
Total Patients	11,372

Allied Health (Laboratory and Pharmacy)

Staff

3 Laboratory Assistants, 3 Laboratory Technicians, 1.6 Pharmacists, 1 Pharmacy Technician, 2 Processing Assistants, 1 Laboratory Supervisor, 1 Pharmacy Manager, 1 Allied Health Division Director

Strategic Community Partnerships

- Laboratory Provides STI Testing for Orange County Health Department
- DCoDPH Goal 2: Health and Well-being for All

The Laboratory began providing STI testing for Orange County patients in October 2017. This has reduced patient wait time from collection to results, which leads to quicker treatment. The Laboratory tested 671 specimens in FY17-18.

Key Highlights

Trichomonas vaginalis Testing

- DCoDPH Goal 2: Health and Well-being for All
- In September 2017, the Laboratory began offering Trichomonas vaginalis Testing using the Hologic Panther System. This is a qualitative assay for the detection of Trichomonas vaginalis, a sexual transmitted infection. The test delivers results in 7-10 business days, or less, and can provide confirmation of a Trichomonas diagnosis which may not have been detected with our current testing method. Since the launch, we have tested 1245 specimens.

Medication Drop Box – Project Pill Drop

- DCoDPH Goal 2: Health and Well-being for All
- DCoDPH Goal 4: Environmental Stewardship

The Pharmacy installed a Medication Drop Box in the lobby of the HHS building in March 2018. Community members can safely dispose of unused and expired medications including OTC and Rx medications, patches, and ointments. It is anticipated that the service will reduce prescription drug abuse from unused/ expired medications left in medicine cabinets.

Safe Syringe Program – Most Notable

- DCoDPH Goal 2: Health and Well-being for All
 - DCoDPH Goal 3: Safe and Secure Community
- Public Health launched the Safe Syringe Program on April 2, 2018, based on guidance and program requirements from the NC Division of Public Health. This program is designed to address and alleviate the spread of HIV and other STIs in our communities

and provide a safe and secure option for needle disposal. DCoDPH provides a fixed-site location at the Pharmacy and mobile-site locations though Health Education Outreach and Bull City United. Participants are provided with access to HIV and Hepatitis C testing as well as mental health and substance use care. All SSP services are anonymous and provided free of charge.

Stats and Metrics

- Total lab tests = 26,787
- Total STI (CT/GC) tests performed = 10,471
- Total pharmacy prescriptions filled = 39,143
- Total wellness clinic prescriptions filled = 2,288
- Prescriptions filled accurately = 100%
- Total number of FREE Naloxone distributed = 196
- Total number of SSP kits distributed = 26

Notable Info

The Pharmacy has FREE Naloxone kits available to the public (DCoDPH Goal 2: Health and Well-being for All). Naloxone is a medication used to assist a person experiencing an opiate-related overdose. No registration is required. Come to the Pharmacy for you free kit or call 919.560.7632 for more information. People who may benefit from a Naloxone kit include:

- People at risk of experiencing an opiate-related overdose
- Family and friends of a person at risk for experiencing an opiate-related overdose
- People in the position to assist a person at risk of experiencing an opiate-related overdose

Additional Info

- The Laboratory is CLIA-accredited and operates under all regulations and standards of the Clinical Laboratory Improvement Amendments of 1988. The Lab is inspected every 2 years and must prove compliance in all areas in order to maintain accreditation. The most recent inspection occurred in March 2017.
- The Pharmacy holds a NC Board of Pharmacy permit and all personnel are licensed by the Board to operate under the standards and laws of practice determined and enforced by the Board. Personnel are required to renew their licenses annually.

Dental Services

Staff

4 Dental Assistants, 2 Dental Hygienists, 1 Dentist Practice Administrator, 2 Processing Assistants/Interpreters, 1 Tooth Ferry Coordinator, 1 Division Director.

Community Partnerships

Head Start, Durham Public Schools, University of North Carolina School of Pediatric Dentistry.

Number of people served

5,400 appointments; 2,484 patients; 7,424 children screened; serving 27+ patients a day.

Additions/Changes to Programs and Services

In accordance with the Department's Strategic Plan (Goal 2: Health and Well-being for All) the Division has begun working more closely with Head Start, providing opportunities for mandated dental evaluations. To reduce barriers to access services, the clinic has begun treating children from Head Start families in the clinic. The Division is revamping its Special Needs clinic to reach more children, engaging with the ASNC (Autism Society of North Carolina-Durham Chapter) to promote available dental services.

Internal Communications

Give Kids a Smile (1st Friday of February) and Back to School Smiles (last week of August) are free clinic events.

How are we helping community?

In following the Department's Strategic Plan, to improve the quality of life through preventative, behavioral, and physical care services, the Dental team provides comprehensive oral health care to children 0-20 and OB patients who are low income and without a dental home. We create awareness in the community by educating as to the importance of preventing and controlling dental diseases and promoting dental health. Our team intervenes at the earliest opportunity to treat dental diseases which is critical for the overall well-being of the patient.

Environmental Health

Inspections	3,343
Lead Invest./Visits	7
Swimming Pool Insp./Visits	605
Well Program Evaluations/visits	202
Onsite program evaluation/visits	797
Water Samples	152
Total	5,106



Community Health

School Health

Public Health School Nurses (School Nurses) are leaders and advocates for students’ health and wellness in Durham Public Schools (DPS). School Nurses practice care coordination and case manage students with physical, behavioral and mental health chronic illnesses to promote, create and maintain healthy school environments for all DPS students.

School Nurse assessments during the 2018-2019 school year resulted in 12, 815 students returning to class to complete the school day instead of going home and missing instructional time in the classroom. School Nurses also managed chronic illnesses and conditions; i.e., 2,155 students diagnosed with asthma, 1,298 students with severe allergies and 12,480 students who visited with nurses’ offices for illness or who were recovering from illness during the school day.

School nurses are an integral component of the school community and function as health safety partners in the school environment.

Triple P

Triple P is a public health approach to parenting available to all parents in our community. It is a multi-level parenting and family support program designed to prevent behavioral, emotional and developmental problems in children.

This evidenced-based program provides parents with the skills, knowledge and confidence to raise healthy children and build stronger family relationships.

Triple P does not tell parents how to parent; rather, it gives parents simple and practical strategies they can adapt to fit their own values, beliefs and needs.

Triple P Coordinators are expected to carefully recruit and select practitioners who are champions in their communities that serve caregivers and families with children 0-18.

As of 2017, 220 practitioners from 42 agencies were recruited to participate in the multilevel parenting program and provided with intensive 2-3 day trainings. 1585 children were served in 2017. Caregiver Satisfaction

Questionnaires (CSQs) are provided to families to provide an anonymous critique and feedback of the service. CSQ’s provided in 2017 suggest that caregivers were satisfied with the service and saw a change in both their children’s behavior and their perception of this behavior with an overall satisfaction score of 6/7. A quote from a CSQ echo’s this sentiment “(This is a) Great program, helps you to gain confidence. Helps you to improve.”

What is CC4C?

CC4C is a care management service for children ages 0-5 years, that may need added services or support.

Some examples include:

- Medical support (health needs)
- Linkage to resources (community and other available resources or services)
- Assistance in meeting the child’s treatment plan as provided by the primary care clinician or specialist
- Parent/ family education regarding health and social needs
- Assistance in setting child centered goals and meeting those goals
- Helping families overcome obstacles in meeting the child’s needs, and minimizing the impact of adverse life events.

The target population for this program include:

- Children with special health care needs
- Children who have experienced adverse life events or toxic stress
- Children who have been in the neonatal intensive care unit.

CC4C Care Managers registered nurses or social workers who work closely with the child’s primary care clinical, regardless of insurance coverage; CC4C care management is also a service provided by Medicaid (if applicable) as part of the child’s benefits.

CC4C Care managers may be employed by the local health department or local CCNC network. CC4C Care managers can meet with the patient and family in the home, community, medical provider’s office and by phone.

In 2017, 5,858 children between the ages of birth to five were engaged in the

CC4C program. In providing support and connecting families to valuable community resources, care managers diligently obtained 21,127 child and family related contacts.

Maternal Health and Family Planning

The Maternal Health and Family Planning Clinics partnered to offer postpartum appointments at 4 weeks post-delivery, compared to 6-8 weeks post-delivery in previous years. Postpartum appointments were previously only done in the Family Planning Clinic, however the Maternal Health Clinic saw 187 clients during 2018.

The Centering Pregnancy program for group prenatal care in the Maternal Health Clinic reached capacity of 24 active groups by the end of 2018. Benefits of Centering Pregnancy include reduced c-section rates, increased reported patient satisfaction, increased reported readiness for labor, increased rates of breastfeeding, and reduced rates of low birth weight.

Clients with positive pregnancy tests in Family Planning who desire to continue into obstetric care are now being screened and scheduled by FP nurses, decreasing wait times for these clients and facilitating early entry into prenatal care. In Maternal Health, nurse work flow was reorganized to share the check in process for clients, which has decreased wait time for both clients and medical providers.

The Family Planning Clinic demonstrated increased use of Quick Start (200+ clients) and long-acting reversible contraceptives (172 implants, 194 IUDs). Quick Start was introduced at the end of 2017, and proved to be an effective avenue to engage patients throughout 2018. Implant insertion increased 19% and IUD insertion increased 23% compared to 2017. Reliable access to these methods enhances clients’ ability to time and plan pregnancies.

OB Case Management completed Adverse Childhood Experiences pilot The pilot was conducted by OBCMs during July-Aug 2018 to test incorporation of an ACEs screening in the Maternal Health Clinic. This included compilation of a client resource list related to needs identified from the screening.

Since September 2018, Durham County OBCMs have provided services to Person County clients during a staff shortage at the Person County Health Department.

Durham County’s Breast and Cervical Cancer Control Program met it’s target of women served during both fiscal year 2017-2018 and fiscal year 2018-2019. A total of 72 women were screened for breast and/or cervical cancer during each fiscal year.

Communicable Disease Program

The Communicable Disease Program conducted 9 outbreak investigations during calendar year 2018, the majority of which were related to Influenza illness in long-term care facilities.

The STI Clinic provided services during 6,181 visits, including 2,672 full screening exams and 2,039 testing only visits. The number of testing only visits increased by 8% compared to 2017. The STI Clinic referred 69 clients at risk for acquiring HIV to Lincoln Primary Care, UNC Hospitals, and Duke Infectious Disease Clinic for Pre-exposure Prophylaxis (PrEP).

The Tuberculosis Clinic provided evaluation, treatment and case management for 9 Durham county residents with active TB in 2018. The Clinic also screened, tested and offered preventive treatment to 87 contacts of the 7 active cases of pulmonary TB. The TB clinic provided assessment services for 14 additional cases of suspected TB cases referred by community providers. The TB clinic provided medication and evaluation services to 119 clients TB with latent tuberculosis infection.

The Immunization Program administered 5,033 immunizations to 2,330 clients in 2018. Outreach activities providing immunizations to the community included partnerships with Urban Ministries, Open Table, Durham Rescue Mission and Head Start.

Refugee Health Clinic

The Refugee Health Clinic provided medical screening, vaccinations and referrals for 125 refugees in 2018.

Durham Knows Campaign

Durham Knows is a social media public health campaign promoting the idea that everyone in Durham should know their HIV status. Starting in October 2017, Durham Knows transitioned from the Get Tested. Stay Safe. motto to Knowing Is Sexy. The new focus includes messaging that helps to normalize sexual health as part of overall health. This includes information on Hepatitis C and pre-exposure prophylaxis or PrEP, a pill that taken once a day that can help prevent HIV.

The campaign is a partnership between many organizations including the Durham County Department of Public Health, 2beatHIV, Duke Health, El Centro Hispano, Lincoln Community Health Center, North Carolina Central University, Triangle Empowerment Center and the UNC Division of Infectious Disease. North Carolina Central University's Criminal Justice Institute has provided three years of funding to help the campaign carry out activities.



This year Durham Knows took part in 17 outreach events which reached just over 1000 people. Highlights include the Love, Hip Hop and HIV event at Beyu Café where a panel of local artists and professionals discussed the relationship between Hip Hop and sexual health within the African-American community. Durham Knows also partnered with NCCU and the NC Office of Minority Health to host documentary screenings of Wilhemina's War followed by a discussion on the film. In June

2018, Durham Knows partnered to hold a PrEP summit with local stakeholders. The purpose was to identify ways to inform the community about PrEP and ensure more access to the medicine. Durham Knows worked with Durham County Department of Public Health HIV/STI testing team on several events such as National HIV Testing Day. About 287 HIV/STI tests were done at four outreach events.

Durham Knows social media continues to grow. Between 2017 and 2018, its Facebook audience reach more than doubled and Twitter chats reached more than 12,000 individuals. The campaign also ran ads on WNCU radio and on NCCU buses.

Funding for Durham Knows will end in September 2018, but the Durham County Department of Public Health and partners are committed to continue the campaign.



Health Education & Chronic Care Initiative

The Transformation in Ten initiative continued this year. The program hired a Community Health Worker (CHW) specific to 10.01 Census Tract (Block Groups 2 & 3). CHW participated in planning committees and a program representative for Y.E. Smith Playstreets (May 2018), East Durham Children's Initiative Family Olympics (June 2018), and Community Improvement Grant projects (ongoing). CHW also acted as a member of the Health Task Force under the T2 Initiative.

The Formerly Incarcerated Transitions (FIT) Program made a number of gains this year. In addition to enrolling new patients a number of community partnerships were established. The program now receives referrals from Orange and Wake Correctional Facilities; and is in the process of establishing a relationship with the Durham County Detention Center. Each of these partnerships affords the CHW the opportunity to go into each facility to make connections with detainees prior to their release. This has proven to be beneficial to enrollment and retention. The program served over 34 formerly incarcerated community members living with chronic illnesses; not to include those served through prison in-reach.

The Chronic Care Initiative utilized most of the year to establish and re-establish referral sources. As a result, the program currently receives regular referrals from the DCoDPH and the Duke LATCH program. Community Health Workers have also reengaged with a number of former Durham Diabetes Coalition program participants. Over 90 program participants received some level of intervention this year.

Public interactions through Chronic Disease prevention programs	813 programs 8401 interactions
Gun locks distributed in the Durham community	700
Hands Only CPR	24 trainings
Hands Only CPR trained	249 community members
Webinars	93 webinars 439 participants
Condoms Distributed	27,975
Individuals tested for HIV	2,233; 13 identified
IUDs and implants inserted to reduce unintended pregnancies	456
Students received human growth and development and reproductive health and safety education	7,633
Mediations done to interrupt or prevent violence	170

"One thing that I enjoy most about my job is working closely with community members and celebrating their accomplished goals while managing their chronic conditions. I do not see myself as their "teacher" but more as a part of their support system providing them helpful health information and cheering them on along the way."

Chelsea Hawkins

Nutrition

Description of Division

The Nutrition Division provides services to Durham County residents to assist them in learning about and putting into practice eating and exercise behaviors that lead to disease prevention and optimal health. Services are provided at Health Department clinics, in Durham Public Schools, in child care settings and at community sites. Services also include working on changes to improve the nutrition and physical activity environments for children and adults living in Durham County, so that the healthy choice becomes the easy choice. All nutrition services are provided by Registered Dietitians who are licensed by the North Carolina Board of Dietetics/ Nutrition. The Chronic Care Initiative (CCI) and the Formerly Incarcerated Transition (FIT) programs focus on assisting residents who reside in Durham County and with disease self-management education and access to care resource navigation.

Demographics of Who We Serve

The Nutrition Clinic provides nutrition counselling to Durham residents. The Nutrition Division's DINE program provides nutrition education to residents who are eligible for the Supplemental Nutrition Assistance Program (SNAP/EBT, formerly known as food stamps). There are 18,901 households and 32,787 individuals who receive SNAP in Durham County (nearly 11% of Durham's population). DINE's target population is children, parents, women of childbearing years, and seniors. DINE focuses its services in childcare facilities, schools, community centers, grocery stores, and medical clinics.

The FIT program focuses on adults who reside in Durham County and have a history of incarceration and are living with a chronic disease.

The CCI program focuses primarily on low income adults who reside in Durham County and are living with Chronic Disease.

How We Are Helping Our Community

The DINE program, funded by USDA's SNAP Education Program and Durham County, is provided by the Durham County Department of Public Health. In FY17-18 DINE:

- Facilitated over 20 policy, systems and environmental changes in 10 elementary schools to improve the nutrition and physical activity environments for over 5800 students.
- Reached over 8,400 Durham Public School students during 1800 nutrition lessons in 270 classrooms.
- Helped students improved eating behaviors as reported by parents (85% of the students' parents report that their children are more willing to eat healthy foods after receiving DINE nutrition education).
- Facilitated 66 policy, systems and environmental changes in 12 childcare facilities and 4 partner agencies improving the nutrition and physical activity environments for over 500 children.
- Provided nutrition workshops to over 1100 adults.
- The Nutrition Clinic provides nutrition education empowering individuals to make informed, sound health choices. In FY17-18, the Nutrition Clinic:
Provided 3,779 nutrition contacts to include medical nutrition therapy counseling sessions, diabetes self-management education, consults, and group nutrition education sessions.
- With 94% of clients seen for nutrition services had a positive outcome at follow-up visit.

Minority Diabetes Prevention Program

In FY17-18, The Nutrition Division conducted two Minority Diabetes Prevention Program (MDPP) series, one in English and one in Spanish. The MDPP program uses the CDC Prevent T2 curriculum and consists of 16 weekly sessions and then 6 monthly sessions. The program recommends 10 participants or less per each series to allow for team building and participant engagement. A 5 – 7% weight loss is an evidence-based recommendation for diabetes prevention and is a metric of success for the MDPP program. 90% of the Spanish speaking group lost weight at completion of the series with 50% reaching the desired weight loss of at least 5%. The series in English was finishing up at the end of the fiscal year with participants losing weight but final data was not available.

Harvest of the Month

In October 2017, DCoDPH, Durham Head Start (DHS) and Childcare Services Association (CCSA) collaborated together to create the Harvest of the Month program. Harvest of the Month is a well-rounded approach towards nutrition education for early childhood.

Children in Durham Head Start were provided fresh, seasonal fruits or vegetables each month through their caterer, CCSA. This fruit or vegetable was presented in 3-4 different ways throughout the month to encourage acceptance and intake. This particular fruit or vegetable was highlighted in a monthly newsletter, written by the DINE Nutritionist, and sent home to all parents on the back of the menu. The DINE Nutritionist developed monthly fun fact cards so teachers would feel comfortable reinforcing the fruit or vegetable in classroom lessons and activities. To strengthen and reinforce the Harvest of the Month program, DHS and DINE collaborated to install an 8-bed school garden at the DHS Seminary location. The project was partly funded by a grant from Duke's Latin American and Caribbean Studies program. This garden provided another avenue for nutrition education and exposure to fruits and vegetables. Lastly, all DHS classrooms were provided the USDAs gardening curriculum, entitled "Grow It, Try It, Like It," that includes fun, evidenced-based nutrition activities for preschool children. Harvest of the Month uses many avenues to teach children nutrition, increasing the likelihood that children will make positive behavior change around fruits and vegetables. Feedback from teachers and staff will be used to improve the program for FY19.

MyPlate Color Run

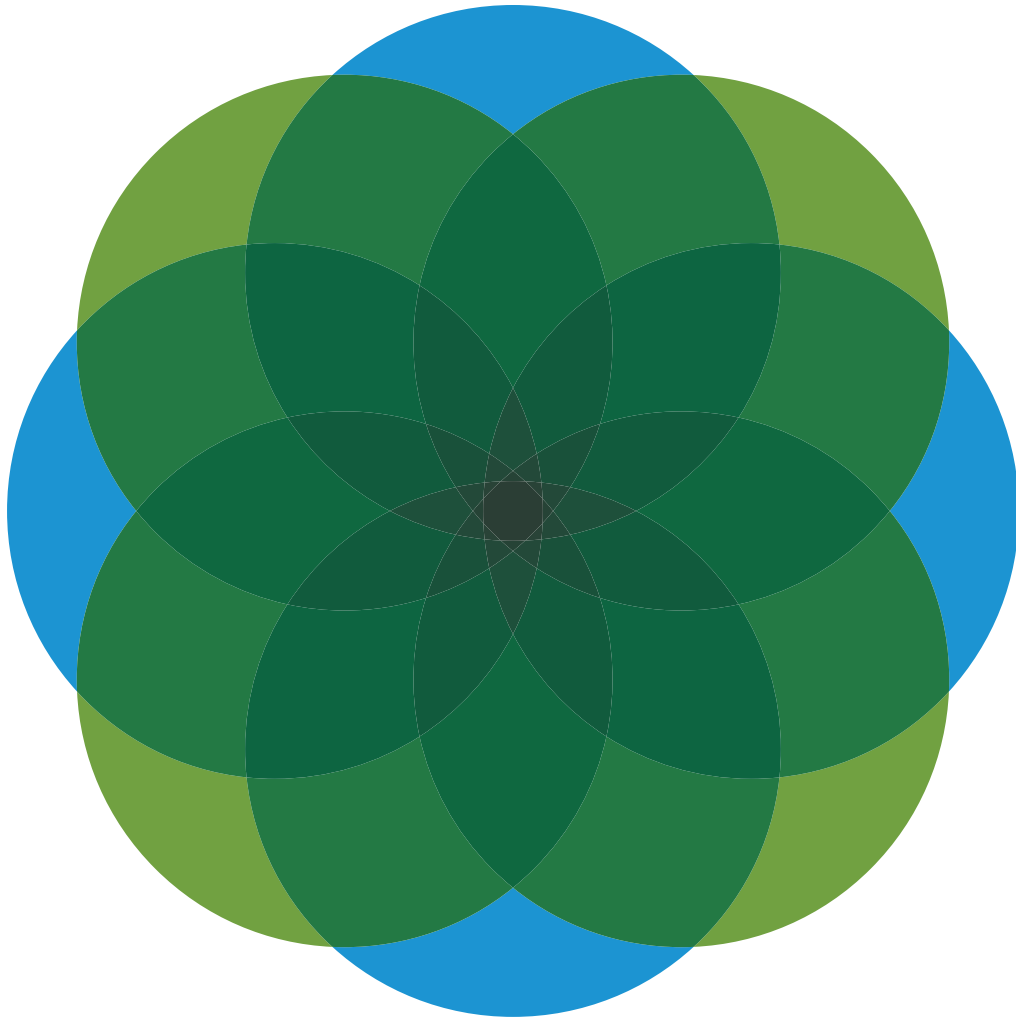
As the culmination of a month of nutrition education activities, the Nutrition Division's DINE school team coordinated DPS's first ever MyPlate Color Run at Spring Valley Elementary School. The Color Run was a partnership involving DINE, the Durham community and Spring Valley administration, staff, and PTA, and provided a fun way to combine healthy eating and physical activity in a single event for the whole family. Starting with a family Zumba class, participants moved on to Color Run stations, each focused on a different MyPlate food group. At each of the seven

stations—five food groups, a hydration station and a final stretching station—participants did activities such as the "Protein Power" obstacle course and "Popcorn Hop and Pop" grains hula-hoop course while learning a nutrition concept and tasting a food from the station's food group. While at each station, participants were sprinkled with color powder, much to their delight. After the Color Run, all moved to the cafeteria for a healthy dinner that incorporated all five food groups. This series of activities combined health and fun and brought together many different groups in pursuit of a common goal: healthy families.



Strategic Partnerships

- Autism Society of North Carolina
- Blue Cross Blue Shield of NC
- Building Opportunities and Overtures in Science and Technology
- Bull City Fit
- Buttons and Bows Learning Academy
- Carolina Outreach
- Carrboro Community Health Center
- Catholic Charities
- Center for Child & Family Health
- Chapel Hill Training-Outreach Project
- Chicken Hut
- Child Care Service Association
- City of Durham
- Cristo Vive Food Pantry
- Duke University
- Duke Cancer Institute
- Duke Children’s Primary Care
- Duke Perinatal Clinic
- Durham Center for Senior Life
- Durham County Library
- Durham Farmers’ Market
- Durham Housing Authority
- Durham Parks and Recreation
- Durham’s Partnership for Children
- Durham Public Schools
 - School Health Advisory Council
 - School Nutrition Services
 - Durham Public Schools Hub Farm
- Early Head Start
- East Durham Children Initiative
- East Durham Children’s Initiative LEAP Academy
- Emily K Center
- End Hunger Durham
- End Poverty Durham
- Farmer Foodshare
- Fayetteville Elementary School Food Pantry
- Feed My Sheep
- First Presbyterian Day School
- Food Lion
- Go NAP SACC
- Head Start
- Healing with CAARE
- Interfaith Food Shuttle
- JFK Towers
- Latino Health Roundtable
- Lincoln Community Health Center
- Little Faith Daycare Center
- Little People Day Care Center
- Local Access to Coordinated Healthcare (LATCH)
- Local Interagency Coordinating Council
- Meredith College
- National Certification Board for Diabetes Educators
- North Carolina Board of Nutrition and Dietetics
- North Carolina Central University
- North Carolina Cooperative Extension, Durham Branch
- North Carolina Diabetes Smart- Diabetes Education Recognition Program
- North Carolina State University, Center for Environmental Farming Systems
- Parkwood Elementary School Food Pantry
- Russell Memorial Child Development Center
- Senior CommUnity Care
- South Durham Farmers’ Market
- Student U
- Threshold
- University of North Carolina at Chapel Hill
- Wee Wisdom Preschool
- White Rock Child Development Center
- Women Infant Children Program (Durham)



Public Health



Durham County
Public Health
2018