

# 2023 DURHAM COUNTY COMUNIDAD LATINA COMMUNITY HEALTH ASSESSMENT SURVEY REPORT



Results of the 2023 Comunidad Latina Community Health Assessment survey are contained within this document.



## Survey Purpose, Methods, Data Collection, and Results of the 2023 Durham County Comunidad Latina Community Health Assessment Survey

Durham County Department of Public Health (DCoDPH), the Partnership for a Healthy Durham, and Duke Health extends their gratitude to the Hispanic and Latino residents of Durham County for participating in the Comunidad Latina survey in addition to the many local organizations that allowed DCoDPH staff to attend their events. These partners include La Semilla, El Centro, Durham Green Flea Market, the Immaculate Conception Catholic Church, the Venezuelan Cultural Association of North Carolina, and LATIN-19. The data collected in this survey helps provide information to public health leadership to make important decisions about the health and well-being of Durham County residents that identify as Hispanic or Latino. The data is also used to apply for grants that government agencies and local organizations can use to enact change in the community. By going to Hispanic and Latino centered events from February 24 – April 2 2023, DCoDPH was able to survey people of all backgrounds that identify as Hispanic or Latino. This opportunity allows DCoDPH to meet people where they are at and to see what resources are needed to better serve this community.



### Purpose of the Comunidad Latina Community Health Assessment Survey

The Durham County Community Health Assessment Comunidad Latina survey has been conducted every three years since 2013. This is a voluntary survey that DCoDPH continues conducting to ensure all voices of Durham County are being heard and represented. In previous years, volunteers have gone door-to-door to randomly selected homes in Durham County to interview residents. In 2023, due to

bilingual volunteer shortages and limited time, DCoDPH elected to hire contractors through the North Carolina Alliance of Public Health Agencies (NCAPHA) that were bilingual and therefore better suited to conduct the interviews for this survey. These contractors are all local and tied to the Durham County community in many ways, their passion and enthusiasm to reach out to the Hispanic and Latino population was very valuable and encouraged people to open up and discuss how they really felt about their community – the good and bad. Instead of going door-to-door, contractors attended Hispanic and Latino events around the county. These events included food drives, church services, flea market shoppers, and health fairs. This was advantageous for many reasons:

- Contractors were able to talk to people in their native or preferred language.
- DCoDPH was able to locate and learn more about Hispanic and Latino events through partners familiar with the community.
- One-on-one conversations were detailed and helpful and easy to communicate as opposed to filling out a paper survey.
- Meeting people at local events helped reach people that wouldn't necessarily be captured in traditional survey methods.

## Survey Development

The 2023 Durham Latina Community Health Assessment Comunidad Latina survey process involved partners from El Centro, El Futuro, LATIN-19, Duke Health, and the Partnership for a Healthy Durham. Each organization reviewed the survey and added any suggestions or clarifications to make sure it was culturally appropriate and translatable into Spanish. The 2023 survey was modeled closely after the 2019 Comunidad Latina survey to maintain consistency. **Though the results are not comparable to previous surveys due to the different methodologies**, the results from the 2023 assessment provide invaluable data that can be used to benefit the Hispanic and Latino population in Durham County.

This year, an additional eight question survey regarding individual's experience with COVID-19 was added.

DCoDPH staff tested the survey in the lobby of the Durham County Department of Public Health and its COVID-19 vaccine clinic. To ensure an equitable approach, people of all backgrounds and cultures were asked to participate.

## Sampling Methods

This survey was conducted at several Hispanic and Latino events in Durham County. DCoDPH staff researched local events and organizations that could participate in survey administration. DCoDPH reached out to several organizations. While attending events, contractors approached individuals either in their cars or while walking around.

## Survey Administration

DCoDPH hired seven contractors to administer the surveys. Contractors experienced more success when they spoke Spanish. As part of the survey, incentive bags were given to participants. These incentives included a tote bag, an insulated lunch bag, COVID-19 tests, and a personal hand sanitizer as well as several flyers and brochures advertising the many resources available in Durham County.

Contractors used tablets to record surveys electronically at the beginning and end of the survey process. Other surveys were collected using paper and were later entered into Qualtrics online by the contractors. In 2023, there was an option to complete the survey online. Contractors handed out flyers that included a Quick Response (QR) code to take the survey online on the participant's own time if the person was not able to complete the survey at the event.

## Results

A total of 176 surveys were collected. This is 88% of the desired sample size of 200 which is a powerful sample. Eight surveys were collected through the online survey link. Six surveys were completed by going door-to-door in the Fall of 2022. However, due to low bilingual volunteer sign ups, the Comunidad Latina survey could not be completed using the door-to-door method during the Fall of 2022.

When the sample size was large enough, (>10 responses) data was analyzed by gender and age.

Due to the difference in sampling methods (door-to-door vs attending community events), previous Comunidad Latina survey results are not comparable to the 2023 results.

### Access to Care

- 41.9% of survey participants reported having a lapse in health insurance or coverage within the last 12 months. Those under 50 were more likely to have a lapse in health coverage.
- 20.8% of survey participants reported having difficulty getting the healthcare they needed in the last 12 months. The most common reason was cost and not having health coverage.

### Personal Health

- 34.3% of survey participants reported they'd rate their health as fair or poor.
- The top three stressors are work, finances, and parenting/childcare.
- 49.4% of survey participants reported always or usually getting the social and/or emotional support they need.

### Discrimination

- 33.1% of survey participants reported being upset because of how they were treated based on their race/ethnicity.
- The most common types of discrimination experienced include language or English proficiency, racism, and physical appearance.

### Physical Activity

- Walking is the most common form of exercise (55.7%) followed by dancing.
- 22.2% of survey respondents reported not exercising regularly.

### Nutrition

- 29.2% of survey respondents reported cutting or skipping meals some of the time because they were worried they wouldn't have enough money to buy more.
- The main reason survey respondents reported not eating healthy was the cost of food.

### Tobacco use

- 7.1% of survey respondents reported smoking cigarettes some days.
- 43.8% of survey respondents reported not being exposed to secondhand smoke.

### Household

- 44.6% of survey respondents reported living in Durham for less than 11 years.
- 21.9% of survey respondents reported owning their home.
- Nearly half of all participants reported their health was impacted by their housing in a good way.

### Community Improvement

- The common people, places, or things that make Durham County a good place to live include the neighborhood is quiet, safe, and having good neighbors.
- The top three issues affecting quality of life include drug and alcohol abuse, violent crime, and theft.

### Emergency Preparedness

- The most common place to evacuate to is a friend or family member's home.
- 58% of survey participants reported they would leave if asked to do so.

### COVID-19 experience

- 83.2% of survey respondents reported getting at least one dose of the COVID-19 vaccine.
- 37.2% of survey respondents reported their mental health worsened since March 2020.

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## Introduction and Methods:

The Community Health Assessment is done in partnership with Durham County Department of Public Health (DCoDPH), the Partnership for a Healthy Durham, and Duke Health. This assessment results in a comprehensive document that provides information to state and local organizations public health leadership, and to community residents. This document covers a variety of health topics asked in the survey including access to care, personal health, discrimination, physical health, nutrition, tobacco and more. This document contains data that is gathered directly from community members either by attending Hispanic and Latino events around Durham County or online.

The Community Health Assessment is a requirement for local health department accreditation as well as Duke Health for the Affordable Health Act. This assessment has been conducted every three years since 2010. Durham County has over a decade of data including pre- and post-COVID-19 pandemic data. The 2023 survey is particularly interesting as it provides the first primary source of data for the Community Health Assessment regarding the COVID-19 pandemic.

The purpose of this report is to provide the data to make informative and evidence-based decisions for Durham County residents, to apply for grants to initiate change, and to provide a platform for Durham County residents to have their voices heard on the health and wellbeing of themselves and their community.

The Comunidad Latina survey has been conducted every three years since 2013. This is an additional survey not required for accreditation or the Affordable Health Act. This survey is specific to the Hispanic and Latino population of Durham County. As of July 1, 2022, this population makes up 13.9% of all Durham County residents. Historically, this survey has been conducted by using a scientific sampling method, CASPER two-stage cluster sampling. In 2023, the survey was conducted differently and not concurrently with the County-wide Community Health Assessment survey as had been done in previous years. In 2023, a convenience sample was gathered by going to Hispanic and Latino events throughout Durham County from February 24, 2023 – April 2, 2023. In 2023, bilingual and Spanish speaking contractors from NCAPHA were hired to conduct surveys in Spanish.

### Survey development

Internal Durham County Department of Public Health partners that helped develop the survey include the Health Education and Community Transformation, Environmental Health, and Nutrition at DCoDPH. External partners included LATIN-19, El Centro Hispano, El Futuro, LGBTQ Center of Durham, Duke Health, and the Partnership for a Healthy Durham. Partners were provided the survey and asked to revise and/or add any questions. Due to the length of the survey, not all new questions could be added. To be as consistent as possible with previous surveys, questions that appeared across multiple surveys were prioritized. Several drafts of the survey were reviewed by all partners and the survey was finalized in June 2022.

Once the survey was finalized, the DCoDPH and an intern began testing the survey with the public. An equitable approach was used by finding a neutral location to reach people of all backgrounds and cultures. Survey testing was conducted in the lobby of the Durham County Department of Public Health as well as in the COVID-19 vaccine clinic in the same location. The epidemiologist and an intern

approached people of a variety of backgrounds to test the survey. Amazon and Walmart gift cards were offered as compensation for the survey tester's time. The demographics of those that were surveyed were tracked to ensure a representative sample was collected. Feedback on the survey were taken into account to improve the survey prior to administering the survey.

To be eligible to take the survey, the participant must be 18 years or older, identify as Hispanic or Latino and live in Durham County.

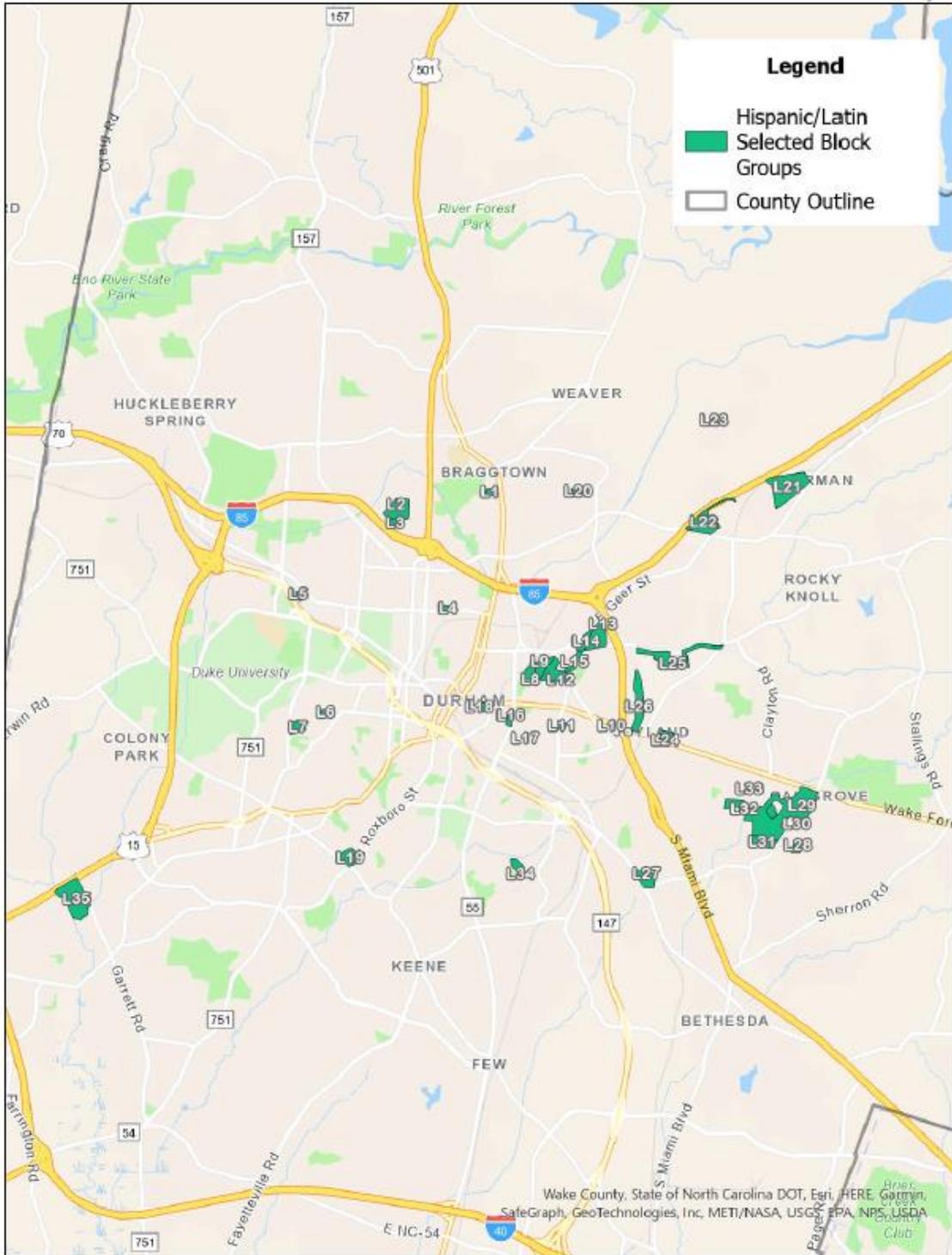
### Survey sampling methods

As in previous years, DCoDPH used the two-stage cluster sampling method to collect survey responses. In 2022, 35 census blocks (clusters) were randomly selected within Durham County limits for both the County-wide and Comunidad Latina survey samples. Within each cluster, seven homes were randomly selected. These are known as selected homes. Randomly selecting the census tracts and homes ensures obtaining a scientific sample. The goal for the Comunidad Latina survey was to collect 245 surveys. A sample of 80% of the sample size is considered powerful.

To select the homes, DCoDPH partnered with the North Carolina Institute of Public Health (NCIPH). NCIPH utilized ArcGIS files and maps to randomly select census blocks for both surveys. DCoDPH's data scientist created maps with the addresses of the selected homes and a detailed image of the neighborhood. This was used for tracking at which homes a survey was completed.

DCoDPH originally intended to conduct the Comunidad Latina survey concurrently with the County-wide survey in the Fall of 2022. However, due to low bilingual and Spanish speaker sign ups, DCoDPH decided to post-pone the Comunidad Latina survey until the Winter of 2023. During the Fall of 2022, six Comunidad Latina surveys were collected by going door-to-door.

DCoDPH decided to change sampling methods and instead of going door-to-door, staff would go to local events in Durham County that have high populations of Hispanics and Latinos. To identify events, DCoDPH partnered with El Centro Hispano, LATIN-19, Duke Health, La Semilla, the Immaculate Conception Catholic Church, and the Venezuelan Cultural Association of North Carolina. The types of events attended included, church services, food drives, COVID-19 vaccinations, health fairs, and flea markets.



## Survey Administration

DCoDPH decided to hire bilingual and Spanish speaking contractors through the North Carolina Alliance of Public Health Agencies (NCAPHA). Seven contractors were hired and trained.

Beginning February 24, 2023, the contractors attended local events put on by Hispanic or Latino organizations in the community and administered surveys. A new method in 2023 was introduced where contractors gave the participant a flyer that contained a Quick Response (QR) code that would take them to the survey on their phone if they did not have time to complete the survey in person.

Incentive bags containing an insulated lunch bag, personal hand sanitizer, 4 COVID-19 tests, and pamphlets and flyers containing information on community services and programs were offered to residents who completed the survey. Spanish and English incentive bags were available.

Survey administration finished on April 2, 2023.

## Data analysis

Data was suppressed if there were fewer than 10 responses.

The epidemiologist analyzed the data using SAS 9.4. Survey data was not weighted due to the sampling method used. Quantitative data was analyzed using raw frequencies of responses. Qualitative data was analyzed, and responses were grouped into categories. For example, for the question that asks, 'how does your current housing impact your health' responses were grouped into categories such as the home is in a good location, or they are dealing with poor housing conditions. For questions where more than one response could be selected, the raw frequencies of each response were divided by the total number of surveys collected (176).

Data could not be disaggregated by race due to low sample size. The majority of survey participants identified as an 'other' race than the options listed (Asian, American Indian or Alaskan Native, Black or African American, Native Hawaiian or other Pacific Islander, and white).

Due to the different methodologies used in previous years, the data in the 2023 survey is not comparable to previous years.

## Survey results

A total of 176 surveys were completed. Six surveys were gathered in Fall 2022 by going door-to-door, eight surveys were finished online, and 162 surveys were given in person. Of all surveys, 17 were conducted in English.

## Limitations

There is a significant limitation of this survey. Only 71.8% of the original sample size (245) was obtained. There are several explanations for this. First, the Comunidad Latina could not initially be completed in the Fall of 2022 due to low volunteer sign ups. Second, there were some events attended that did not yield a high number of surveys due to attendees not living in Durham County, or just a small number of people attended the event. Third, many organizations informed DCoDPH that the Winter is slower than usual regarding the number of events held.

## Reasons for inequities

Inequities are evident in this report including educational, employment, health, and ethnic inequities.

The Hispanic and Latino population in the United States faces many barriers to achieve health and wellbeing including lack of immigration services, poor healthcare, lower educational attainment, and limited employment opportunities restricted to low wage occupations. The events attended by DCoDPH staff provided services for low-income families such as food drives and health fairs. This resulted in a larger sample size of Durham County residents with inequitable access to resources than in previous surveys. The services offered at these events are also more likely to attract undocumented community members that need assistance to adjusting to life in Durham County. This demographic is historically marginalized and left with fewer resources than white Americans.

One of the largest inequities evident in this survey is the prevalence in lower levels of educational attainment. In the 2023 Comunidad Latina survey, 40.5% of all survey participants reported receiving less than a 9<sup>th</sup> grade education. In many South American countries, mandatory education ends at age 15, or 13 in Colombia. The question is based on US educational systems which do not directly translate to Central or South American educational systems. Even in the US, Hispanic and Latinos face systemic barriers to education including lack of access to preschool, and little diversity among teachers.

Two in five survey participants reported having a lapse in healthcare insurance or coverage in the past 12 months. The most common reason cited was immigration status. In addition, one in three survey participants reported their health status as fair or poor. Many survey participants (20.8%) struggled with finding healthcare either by not being able to pay for the visit, not having insurance, and not being able to get an appointment. Language and cultural differences often prevent Hispanic and Latino people from getting care which leads to poor health outcomes. Many inequities and barriers were worsened by the COVID-19 pandemic. Throughout the pandemic, a large portion of essential workers identify as Hispanic or Latino. In addition, Hispanics and Latinos experienced much higher rates of hospitalization and death due to COVID-19 than white Americans. In Durham County,

Three out of four survey participants report renting their home. Lack of affordable housing came up in several responses on the 2023 Comunidad Latina survey. In the US, Hispanics and Latinos make up 21% of renter households with incomes at or below the poverty line. In 2019, 52% of Hispanic households were estimated to pay more than 30% of their income on housing compared to 42% of non-Hispanic white households. Housing insecurity is known to be linked to poorer health outcomes. Low-income households are more likely to be financially strained to pay for medical needs. The Hispanic and Latino populations are more at risk for chronic illnesses such as diabetes and obesity due to mistrust of the medical system, structural racism in the healthcare system and within healthcare providers, and lack of insurance.

These are just a few examples of how systemic racism prevents the Hispanic and Latino population from accessing equitable healthcare, employment, income, education, and more. Durham County is committed to eliminating racial and ethnic inequities.

## What makes Durham County great?

The Durham County Department of Public Health strives to incorporate equity into its outreach and programs.

When asked, ‘what people, places, or things make Durham County a great place to live’, most survey respondents mentioned their neighbors and that their neighborhoods were quiet and safe. In addition, nearly half of the survey participants reported that their housing impacts their health in a good way.

DCoDPH acknowledges that there are many areas for improvement which is why the question ‘what can be done to better support you’ is asked. Responses to that question include, increasing security and decreasing violence, access to better healthcare, and more services for the Hispanic and Latino community. Conducting these surveys allows Durham County government to understand the challenges and areas of improvement within the community. This report is studied by Durham County government, elected officials, and external organizations to find data that will influence change in the county.

Demographic	2023 Durham County Comunidad Latina Community Health Assessment Survey results
Median Age	42
<b>Gender</b>	
Man	42.6%
Woman	57.4%
<b>Education</b>	
Less than 9 <sup>th</sup> grade	40.5%
9-12 <sup>th</sup> grade, no diploma	19.1%
High school graduate or equivalent	16.7%
Some college, no degree	-
Associate's degree	-
Bachelor's degree	-
Graduate or professional degree	6.6%
<b>Employment status</b>	
Disabled	
Employed full-time	46.6%
Employed part-time	9.7%
Homemaker	22.2%
Retired	-
Self-employed	-
Student	-
Unemployed	8.5%

**Table 1:** Demographic information of the 2023 Durham County Community Health Assessment.

Since the Hispanic and Latino sample was collected at events specific to that population, the results can only be extrapolated to Hispanics and Latinos attending these events. The results cannot be generalized to all Hispanics and Latinos living in Durham County.

## Resources:

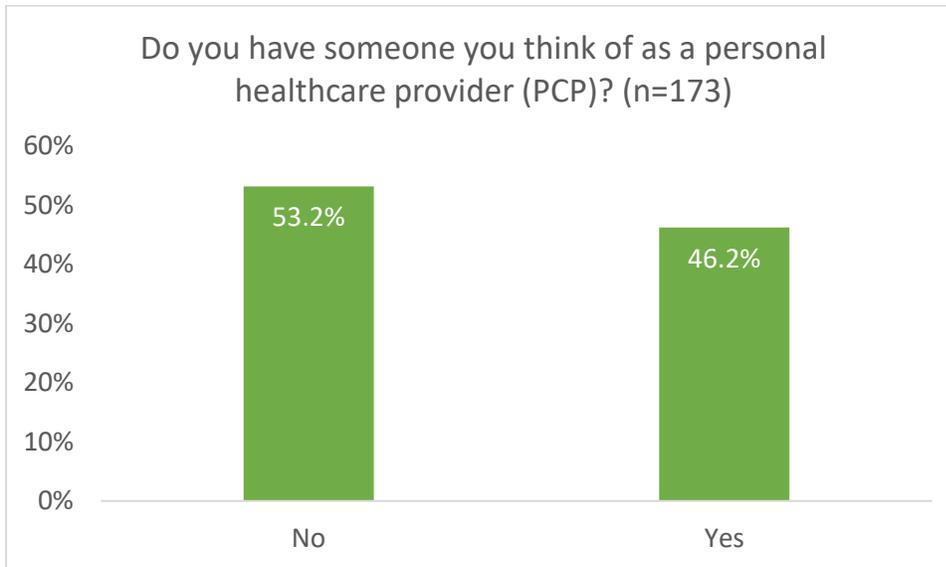
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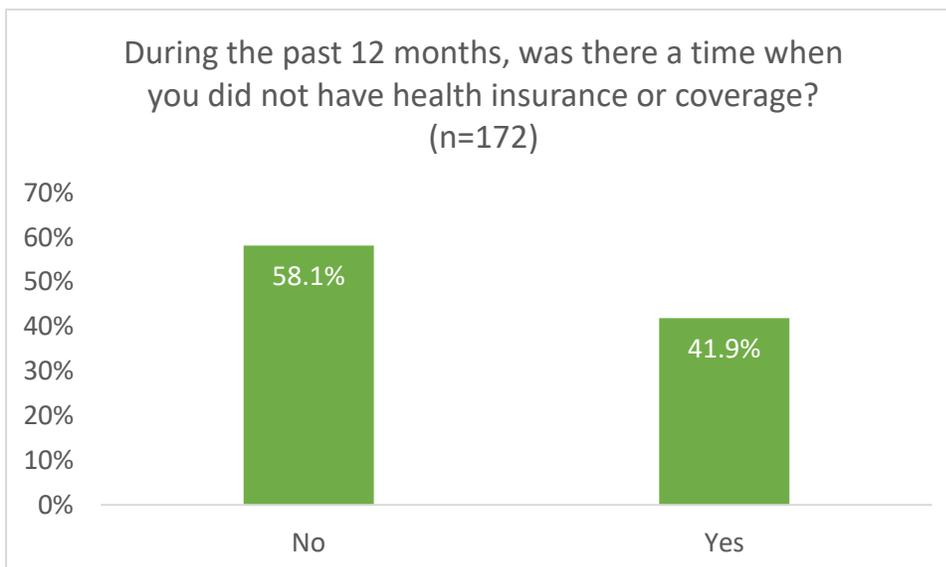
## Access to Care:

**Q1: Do you have one person you think of as a personal doctor or healthcare provider (PCP)?**



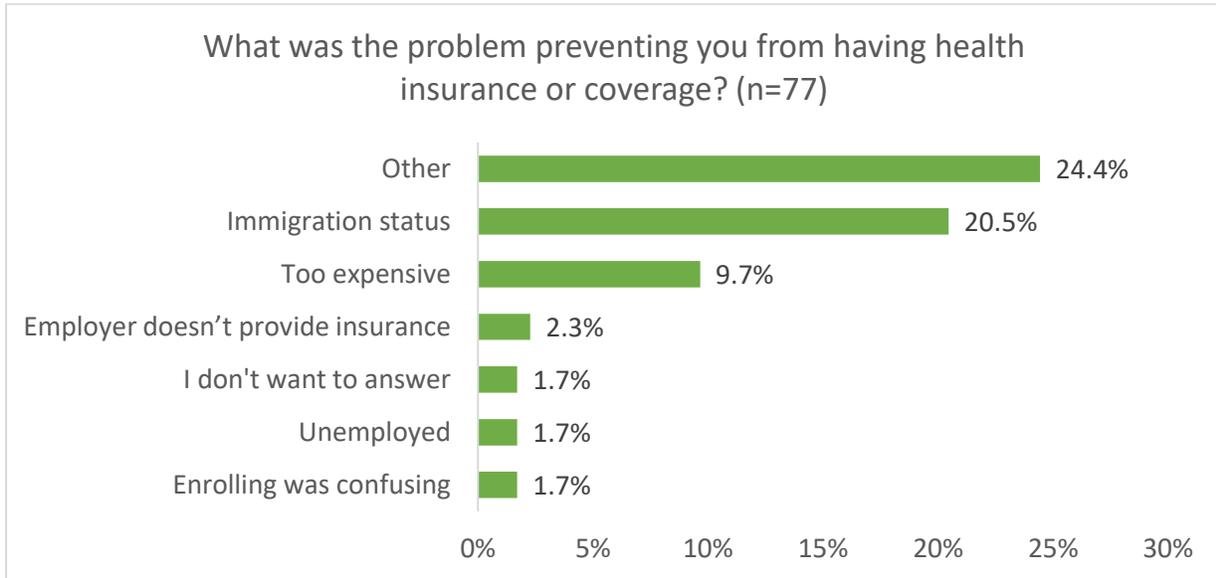
Interpretation: Over half of the survey participants (53.2%) reported not having someone they consider a personal healthcare provider (PCP).

**Q2: During the past 12 months, was there a time when you did not have health insurance or coverage?**



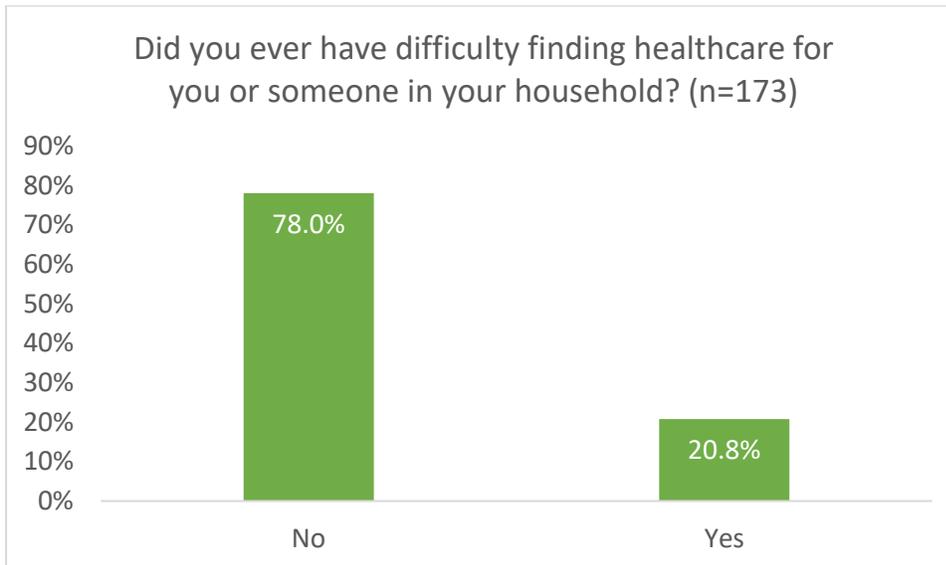
Interpretation: Over half of the survey participants (58.1%) reported not having a lapse in health insurance or coverage in the past year. Females (26.6%) are more likely to have a lapse in health insurance or coverage than men (15.4%).

**Q3: Since you had reported having a lapse in health insurance or coverage in the past year, what prevented you from having health insurance or coverage?**



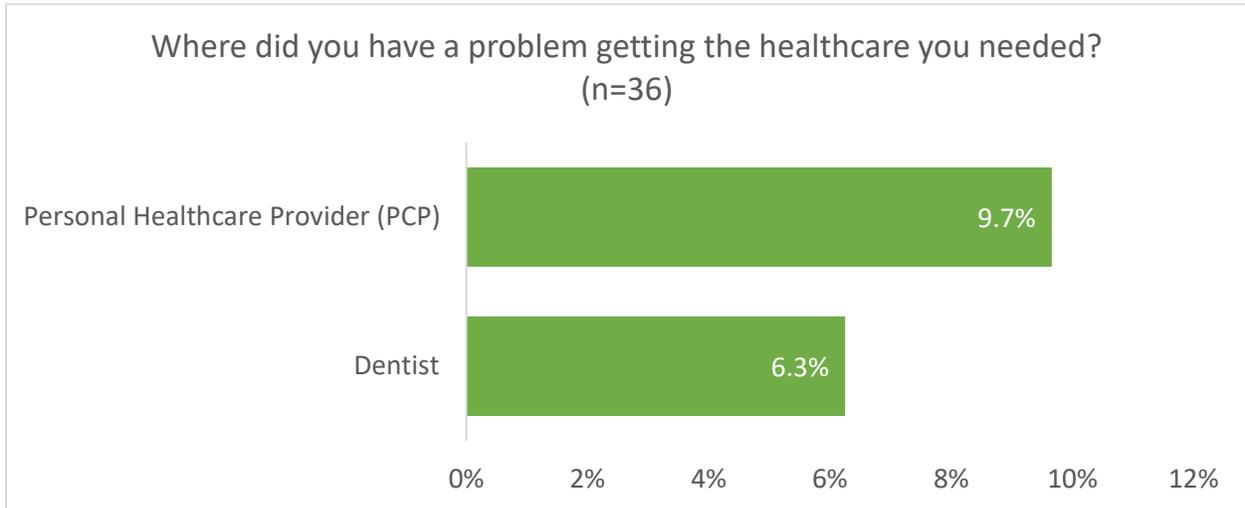
Interpretation: The most common reason people had a lapse in health insurance or coverage in the past year was immigration status (20.5%) followed by the cost being too high (9.7%). Some other reasons include not applying for coverage, not going to the doctor, it's too time consuming, and having a lack of information to apply.

**Q4: In the past 12 months, did you have a problem getting the healthcare you needed for you or for someone in your household from any type of healthcare provider, dentist, or pharmacy?**



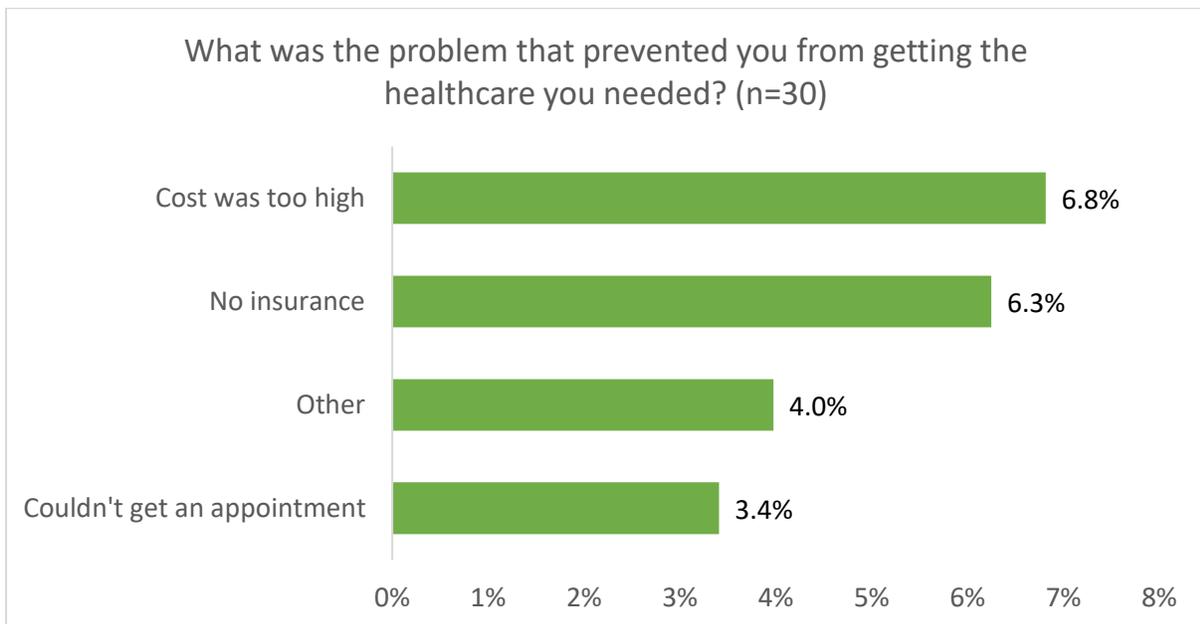
Interpretation: Most of the survey respondents (78%) reported not having any difficulty getting healthcare in the past year.

**Q5: Since you reported having difficulty getting healthcare, what type of provider did you or someone in your household have trouble getting healthcare from?**



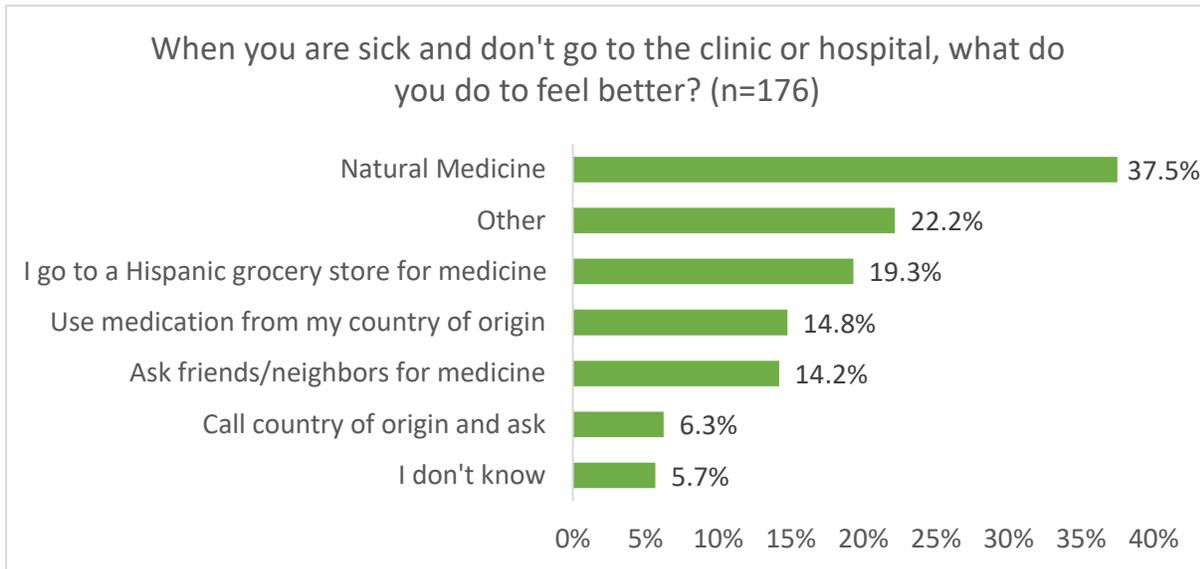
Interpretation: The most common type of provider survey participants had difficulty getting care from was a personal healthcare provider (PCP) (9.7%) followed by the dentist (6.3%). Some other locations survey participants had difficulty getting healthcare include specialists such as orthopedist and otolaryngologist.

**Q6: What was the problem that prevented you or someone in your household from getting the necessary healthcare?**



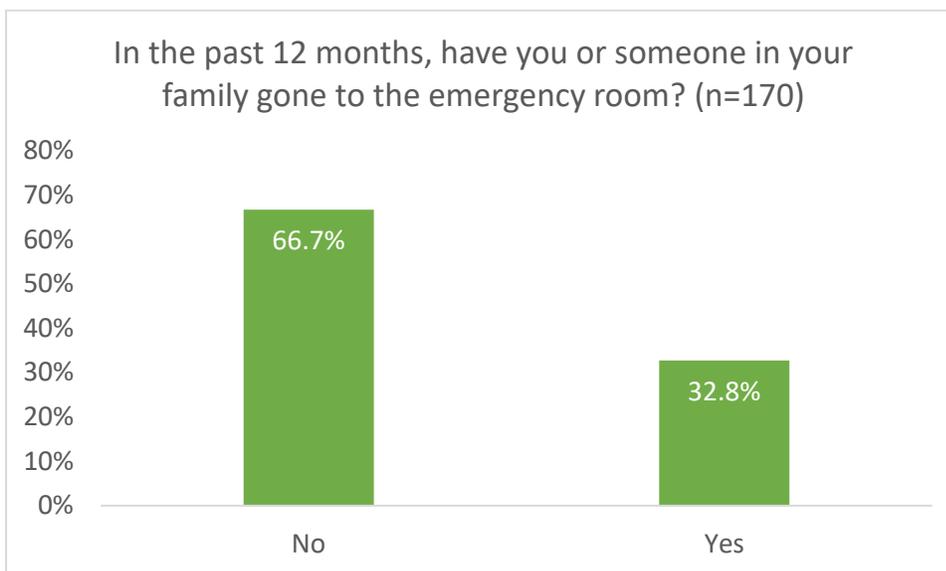
Interpretation: The most common barrier survey participants had to getting healthcare was the cost being too high (6.8%) followed by not having health insurance or coverage (6.3%). Some other reasons for having difficulty getting healthcare include immigration status, lack of medical specialists, no transportation, and doctor's office was too far away.

**Q7: When you are sick and don't want to go to the clinic or hospital, what do you do to feel better?**



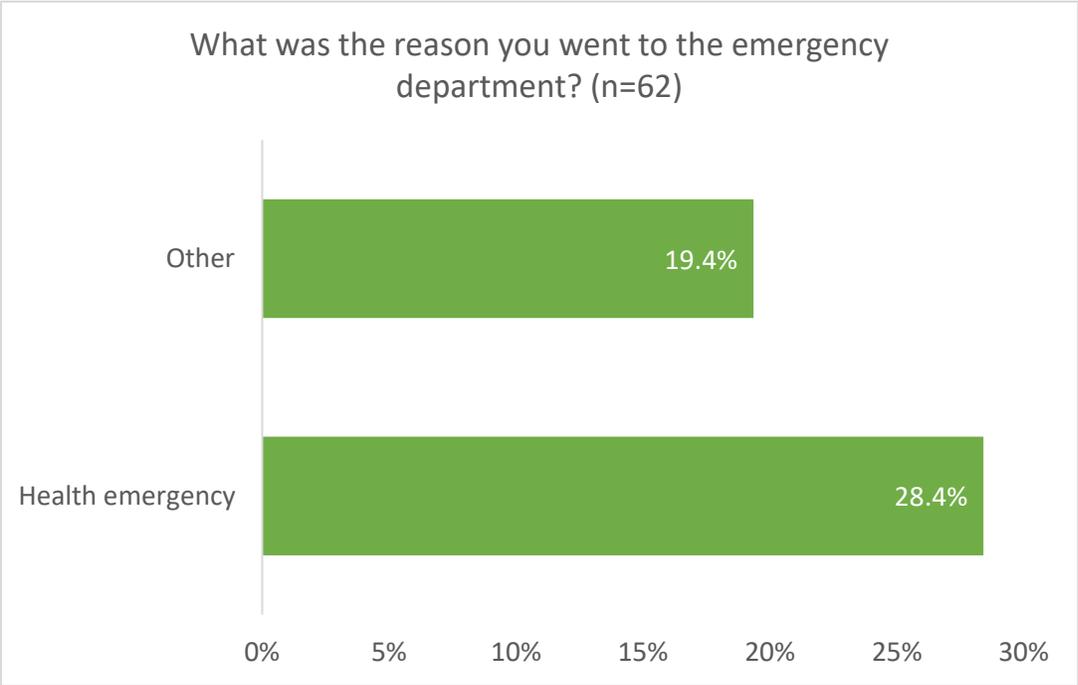
Interpretation: The most common way survey participants make themselves feel better without seeking professional healthcare providers is using natural medicine (37.5%) followed by going to a Hispanic or Latino grocery store for medicine (19.3%) and using medication from their country of origin (14.8%). Some other ways survey participants make themselves feel better include self-medicating and going to the doctor/pharmacy and taking over the counter pills such as acetaminophen.

**Q8: In the past 12 months, have you or someone in your family gone to the emergency room?**



Interpretation: Two-thirds of survey participants reported not going to the emergency room in the past 12 months. Females (21%) were more likely to go the emergency room than males (12%).

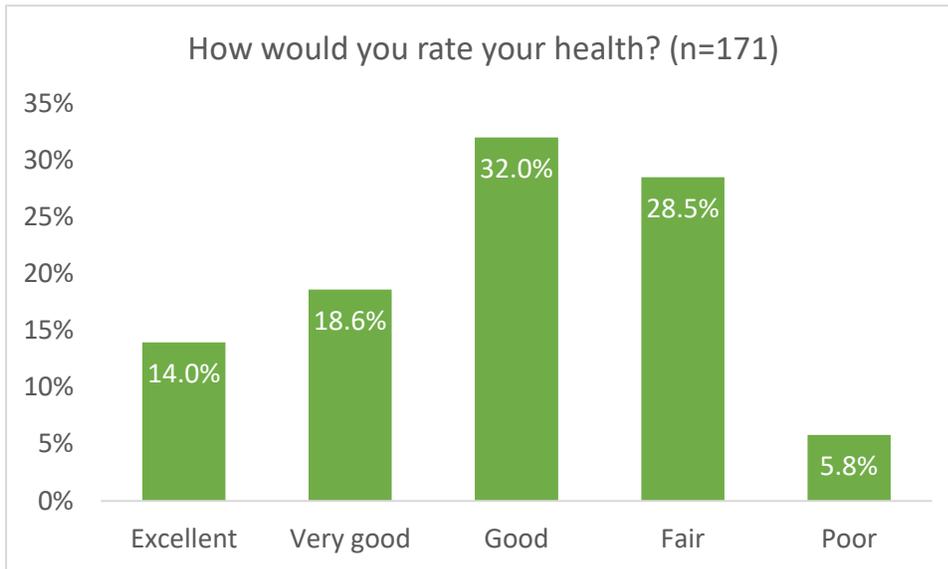
**Q9: Did you go to the emergency room for any of the following reasons?**



Interpretation: The vast majority of survey participants (28.4%) that went to the emergency room in the past 12 months for a health emergency.

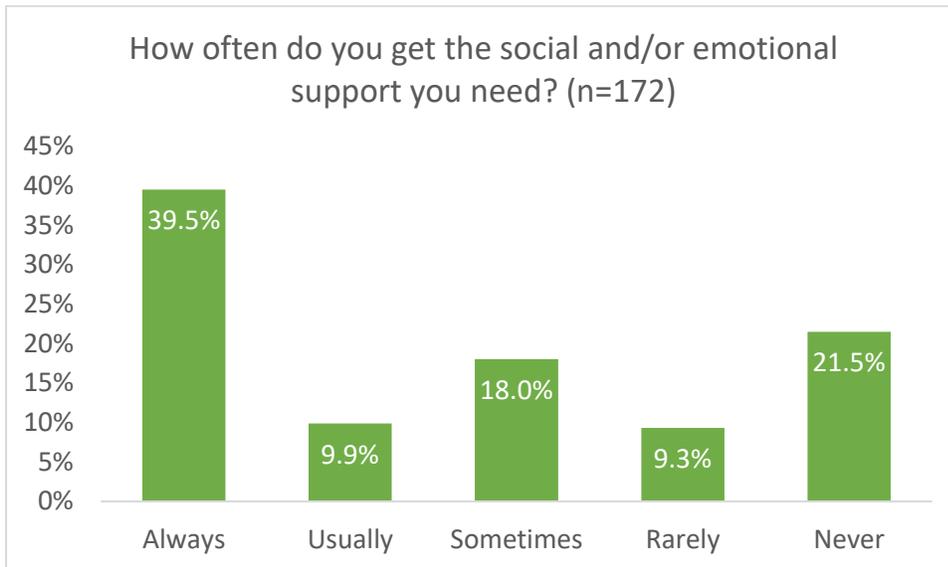
**Personal Health:**

**Q10: Would you say, in general, your health is excellent, very good, good, fair, or poor?**



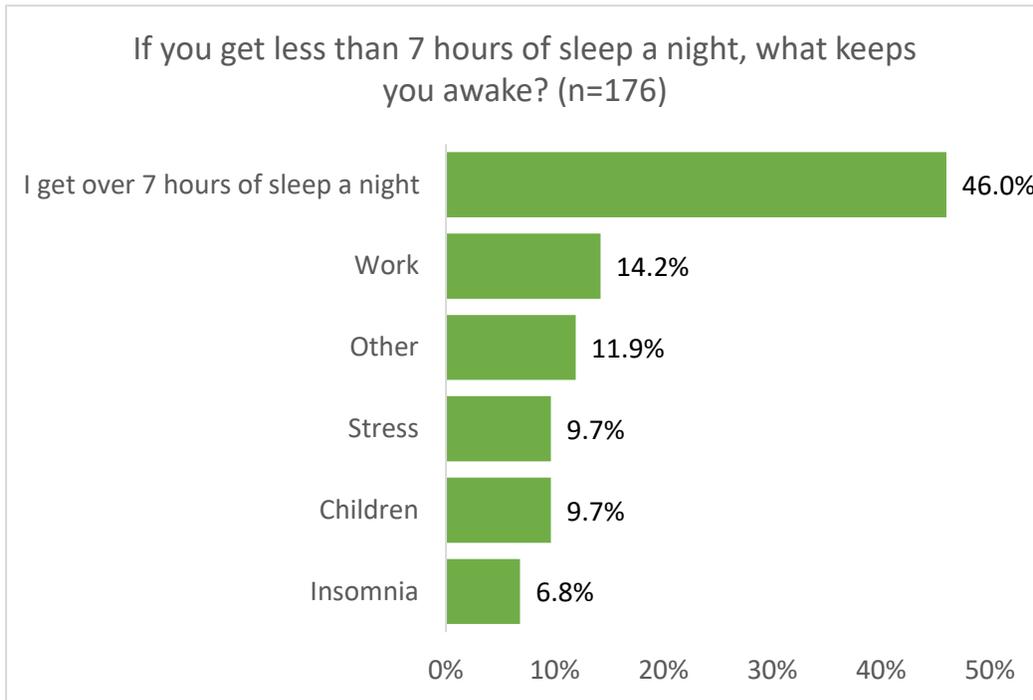
Interpretation: Most survey participants reported being in good health (32%) followed by having fair health (28.5%). Females (13%) are much more likely to have very good health than males (5.9%).

**Q11: How often do you get the social and/or emotional support you need?**



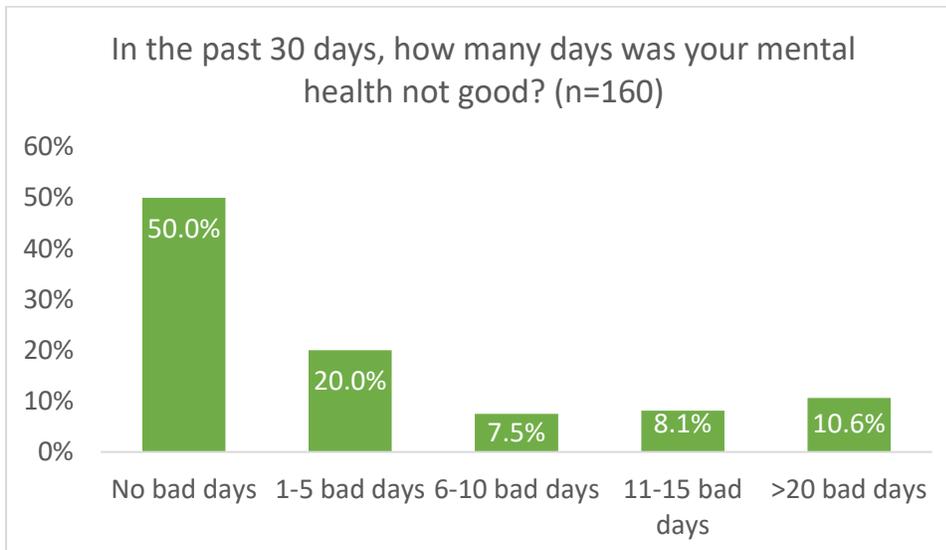
Interpretation: Most survey respondents reported always having the social and/or emotional support they need, however, one in five survey respondents reported never getting the social and/or emotional support they need.

**Q12: If you get less than 7 hours of sleep a night, what keeps you awake?**



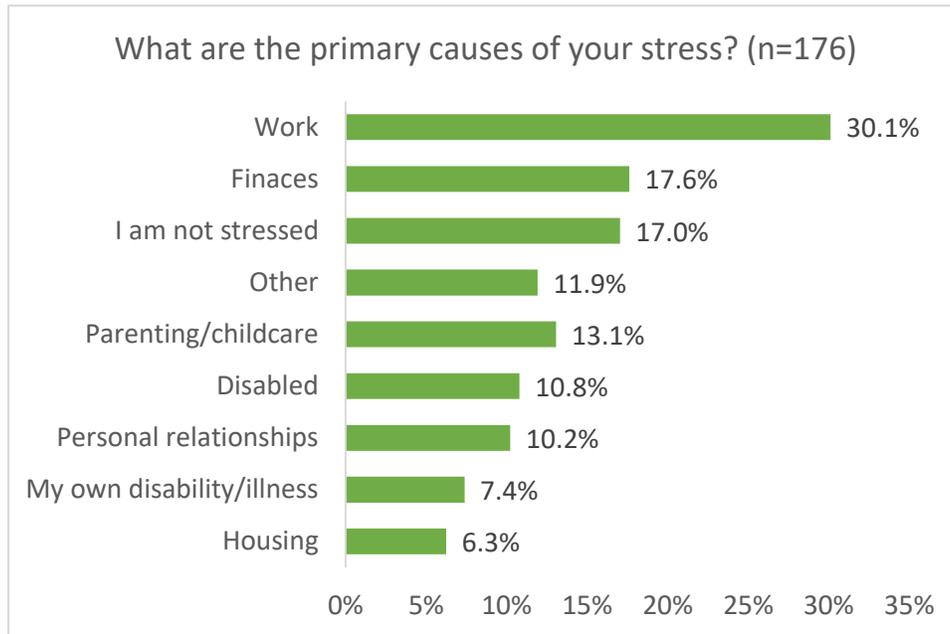
Interpretation: Nearly half of all survey participants reported getting at least 7 hours of sleep a night (46%). The most common reason people didn't get at least 7 hours of sleep a night was work (14.2%), stress (9.7%), and children (9.7%). Some other reasons that survey participants do not get at least 7 hours of sleep a night include anxiety or panic attacks, being pregnant, and cell phones and TV.

**Q13: Now thinking about your mental health, which can include stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?**



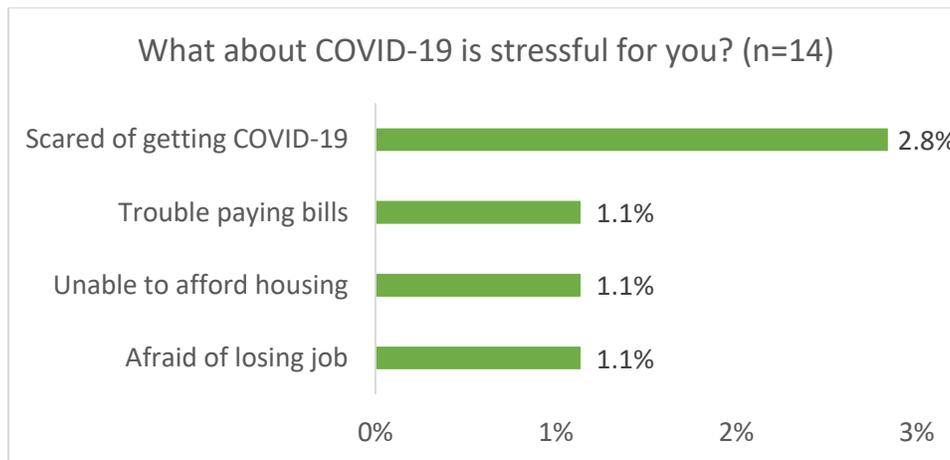
Interpretation: Half of the survey participants reported having no bad days in the past 30 days (50%). Having 1-5 bad days (20%) in the past 30 days was double of those having >20 bad days (10.6%).

**Q14: What are the primary causes of your stress?**



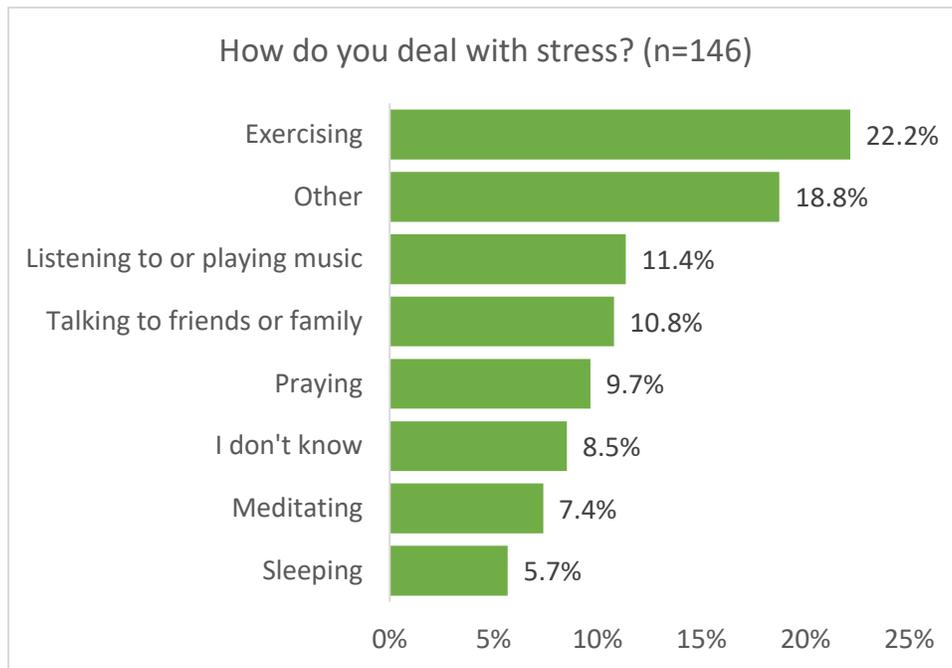
Interpretation: The most common causes of stress include work (30.1%), finances (17.6%), and parenting and childcare (13.1%). Those that reported not experiencing any stress accounted for 17% of survey participants. Some other reasons people reported being stressed about include isolation, emotional changes, and loss of a family member.

**Q15: What about COVID-19 is stressful to you?**



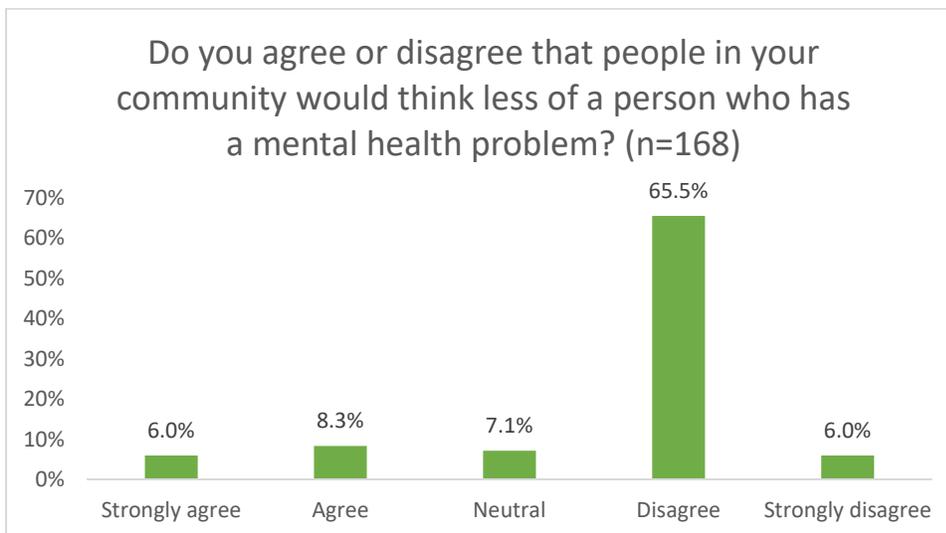
Interpretation: Most survey participants that reported being stressed about COVID-19 reported being afraid of getting COVID-19 (2.8%). This was followed by being afraid they'll lose their job (1.1%), being unable to afford housing (1.1%), and trouble paying bills (1.1%).

**Q16: How do you cope with stress?**



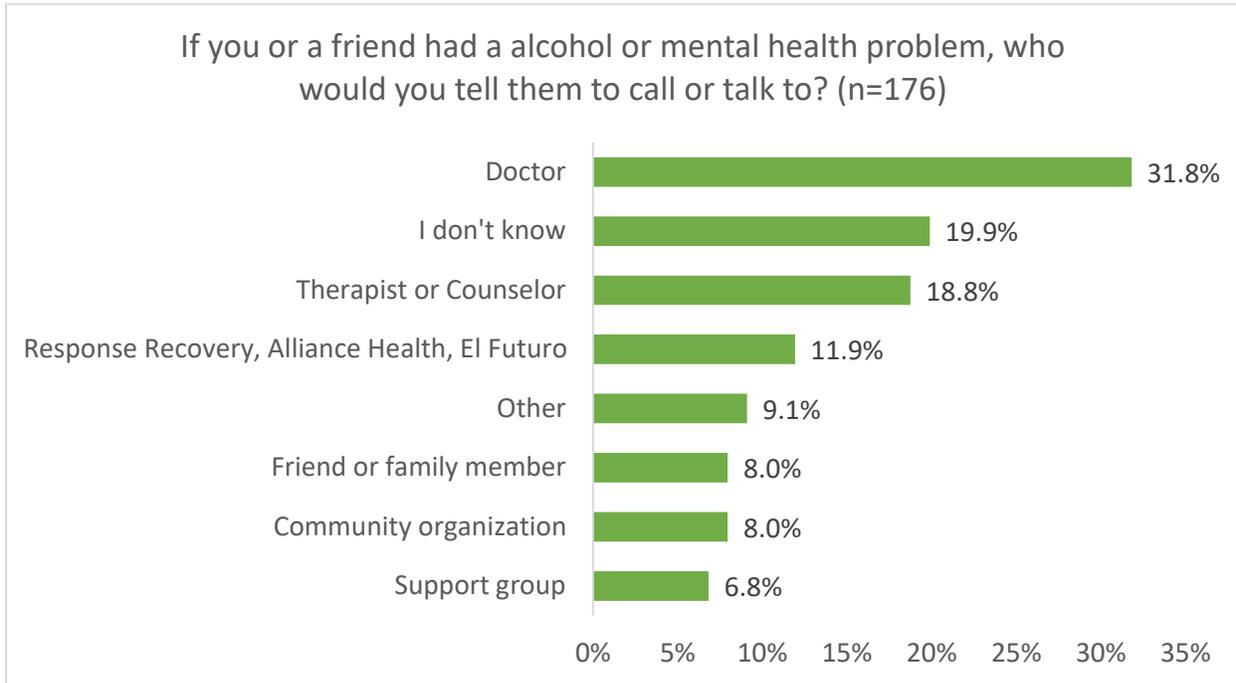
Interpretation: The most common way to cope with stress according to survey participants is to exercise (11.9%) followed by talking to friends or family (9.7%) and meditating (7.4%). Some other ways survey participants deal with stress include reading, calming oneself, yardwork, taking medication, and participating in church.

**Q17: To what extent do you agree or disagree that the statement that people in your community would think less of a person who has a mental health problem?**



Interpretation: The vast majority of survey respondents (65.6%) reported disagreeing that they think their community would think less of a person who has a mental health problem.

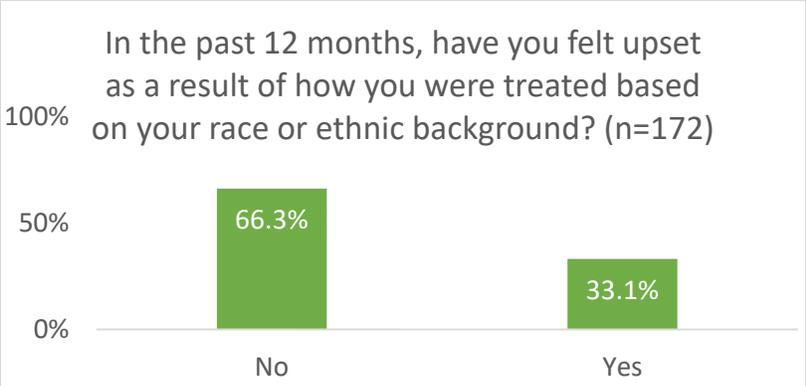
**Q18: If you or a friend or family member needed counseling for a mental health or drug or alcohol use problem, who would you tell them to talk to?**



Interpretation: Most often (31.8%), survey participants reported that they would refer their friend to a doctor if they were having a mental health problem followed by not knowing (19.9%) and a therapist or counselor (18.8%).

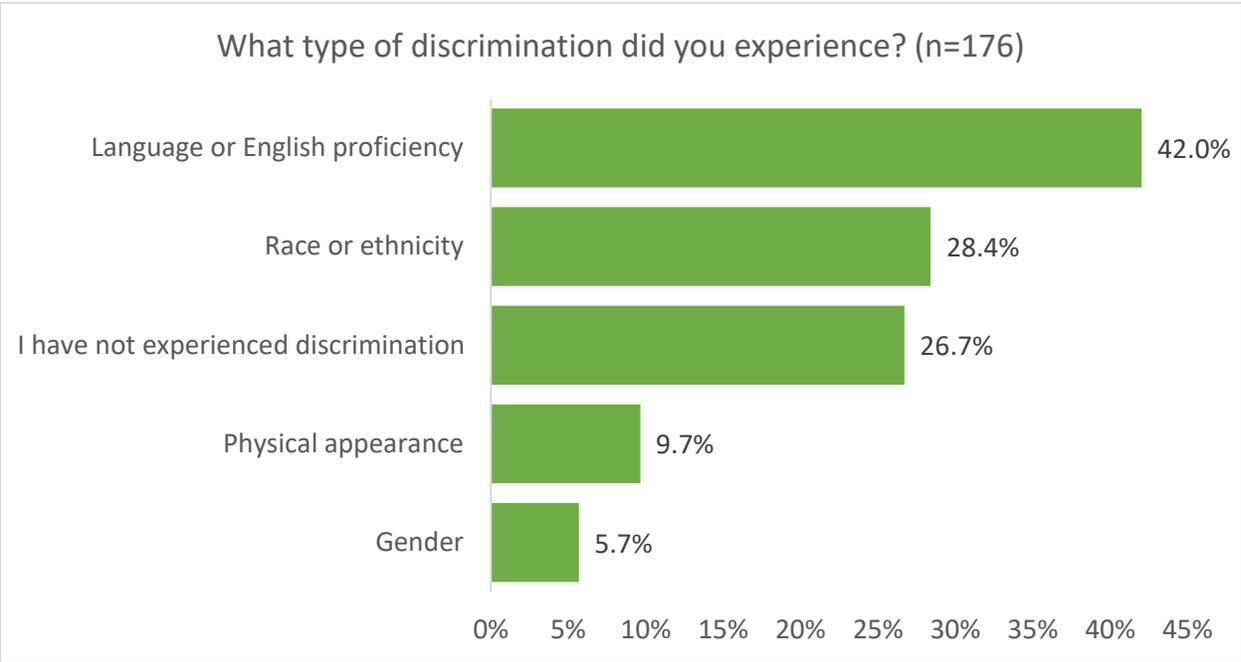
# Discrimination:

**Q19: During the past 12 months, have you felt upset as a result of how you were treated based on your race or ethnic background?**



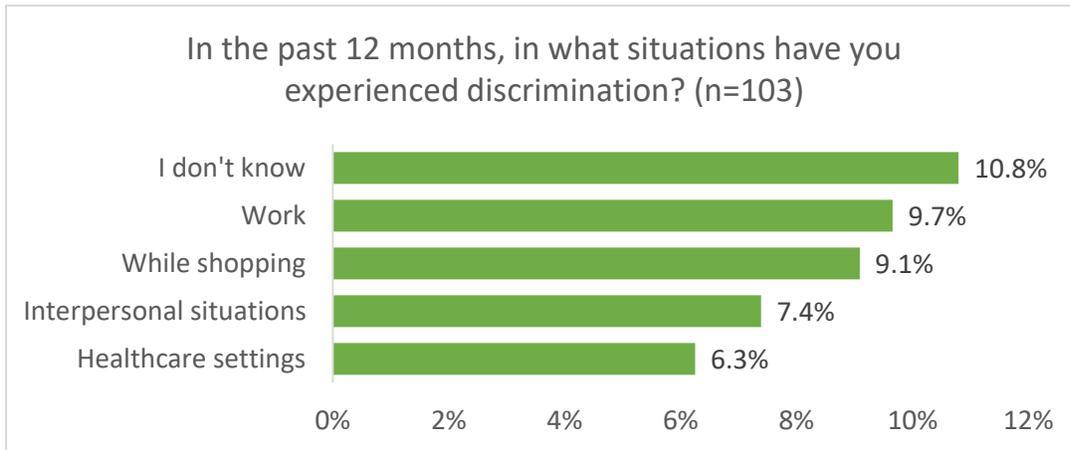
Interpretation: Approximately one in three (33.1%) survey participants reported being upset by how they were treated based on their race or ethnic background. Females (19.5%) were more likely to report feeling upset than males (14.2%).

**Q20: Discrimination (interpersonal or structural) can happen because of many reasons. Please choose which of these reasons you think may have contributed to the discrimination you experienced in the last 12 months.**



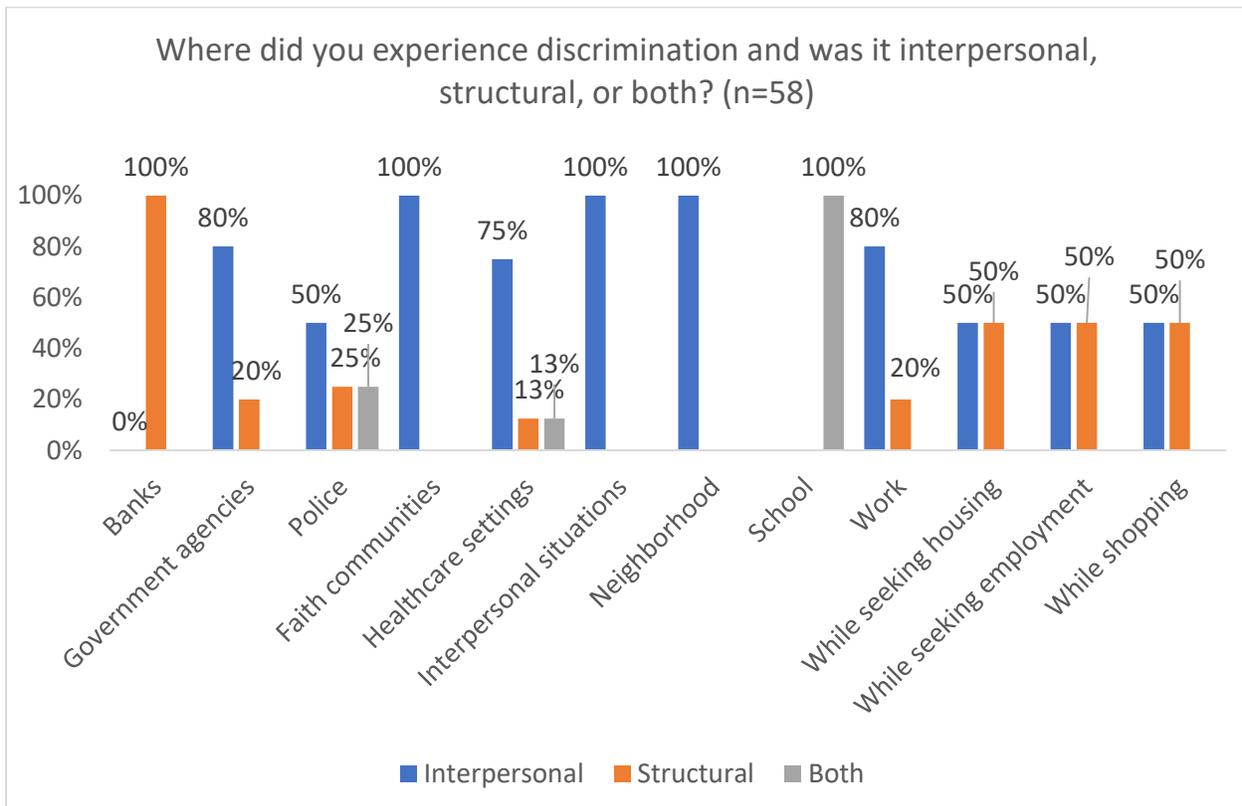
Interpretation: The most common type of discrimination experienced by survey participants is based on language or English proficiency (42%). Racism and discrimination based on ethnic background was next (28.4%) followed by physical appearance (9.7%). Over one in four survey participants reported not experiencing discrimination (26.7%).

**Q21: In the past 12 months, in what situations have you experienced discrimination?**



Interpretation: Several survey respondents did not know where they experienced discrimination in the past 12 months. The workplace (9.7%) was the most commonly known location followed by while out shopping (9.1%) and in interpersonal situations (7.4%).

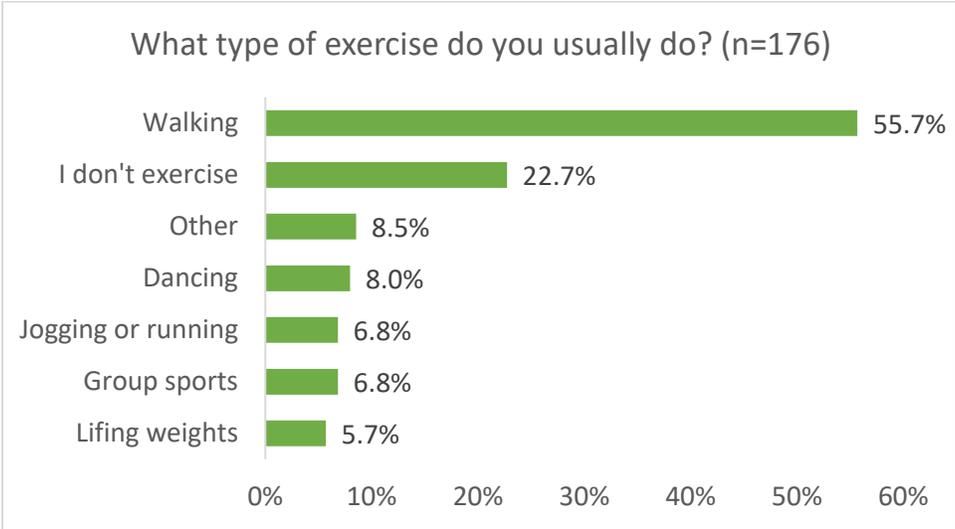
**Q21A: Was the discrimination you experienced interpersonal or structural?**



Interpretation: The discrimination experienced in faith communities, interpersonal situations, and neighborhoods was all interpersonal. Discrimination by banks was all structural. While seeking housing, employment, and while shopping was evenly divided by interpersonal and structural situations.

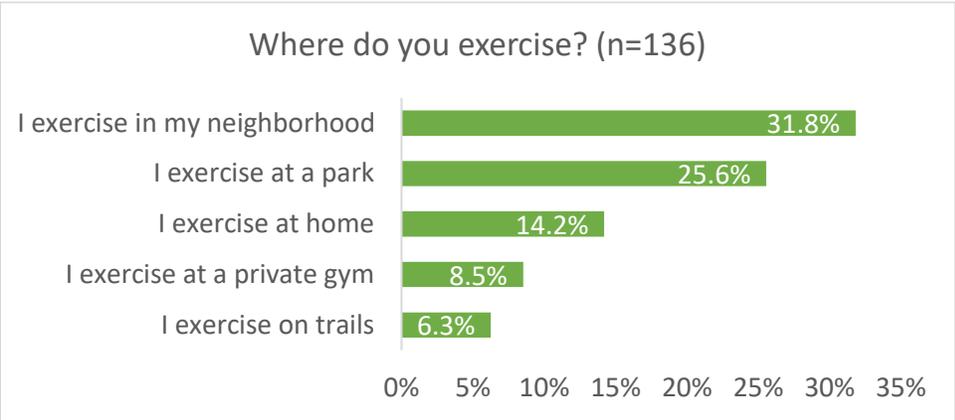
# Physical Health:

**Q22: What types of physical activity do you usually do?**



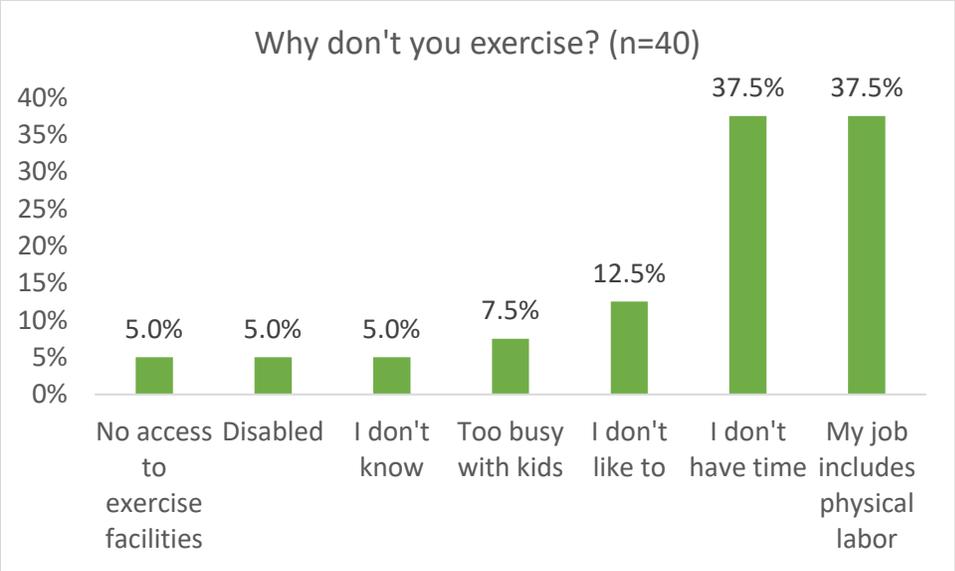
Interpretation: Over half the survey participants (55.7%) reported walking as their primary form of physical activity followed by dancing (8%) and group sports (6.8%). Nearly one in four survey participants reported not exercising at all. Some other forms of exercised mentioned were boxing, going to the gym (unspecified), and stairs.

**Q23: Where do you usually exercise or engage in physical activity?**



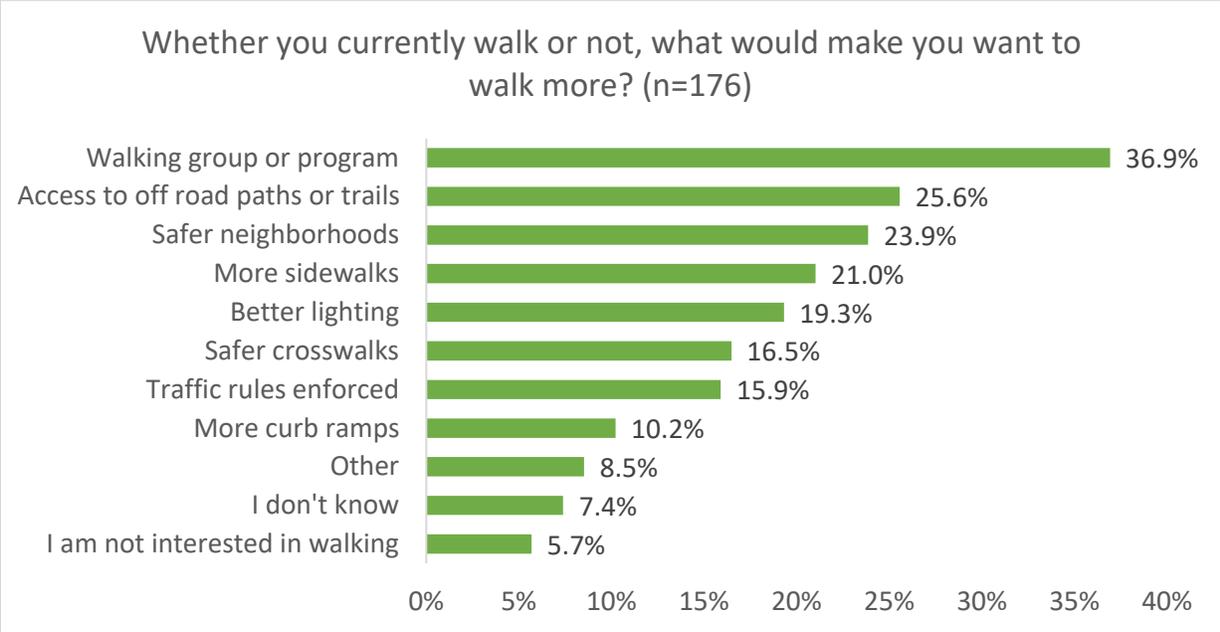
Interpretation: Most survey participants (31.8%) reported exercising in their neighborhood followed by at a park (25.6%) and at home (14.2%).

**Q24: Since you responded that you don't exercise, what are the reasons you don't exercise during a normal week?**



Interpretation: The most common reasons survey participants reported not exercising was not having time and having a job that includes physical labor.

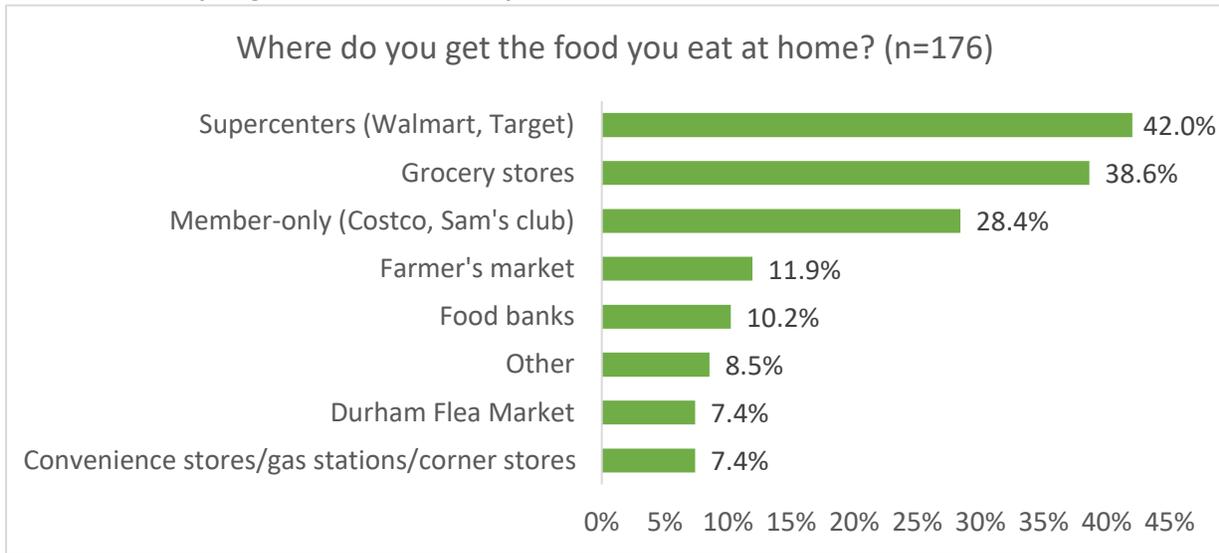
**Q25: Whether you currently walk or not, would any of the following make you want to walk more? This includes for fun, for exercise, to get to a destination, etc.**



Interpretation: The most common reason survey participants would walk more was being included in a walking group or program (36.9%) followed by access to off road paths or trails (25.6%). Some other reasons for motivating survey participants to walk more include wanting to improve their health and more parks.

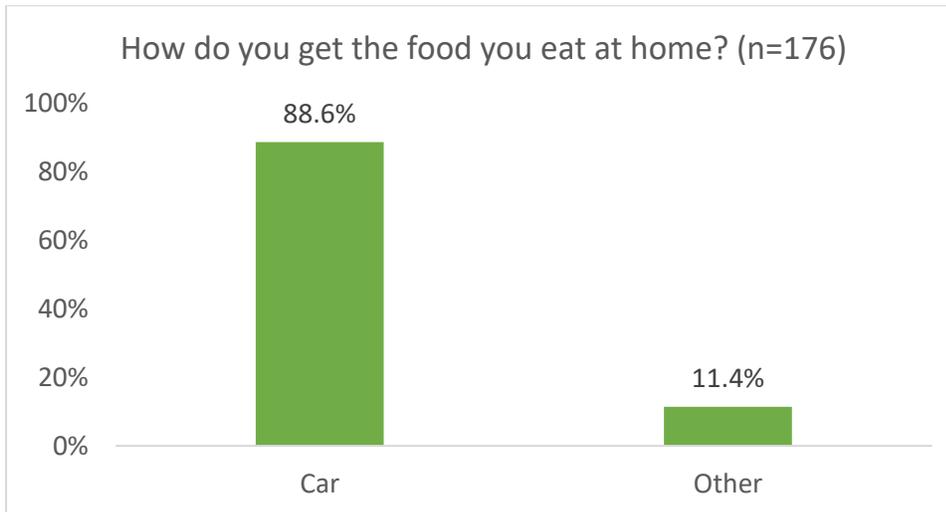
**Nutrition:**

**Q26: Where do you get most of the food you eat at home?**



Interpretation: The most common place survey participants shopped for food include supercenters such as Walmart or Target (42%) followed by grocery stores (38.6%). Other places include Hispanic and Mexican stores and Compare Foods.

**Q27: How do you usually get there?**



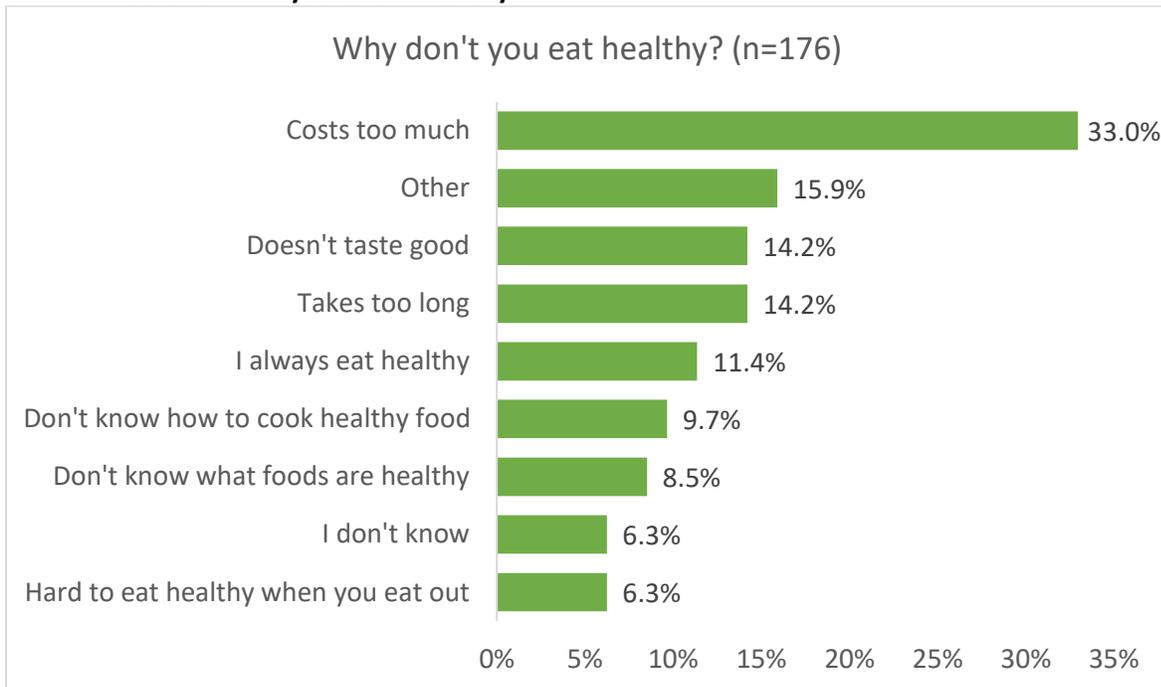
Interpretation: The vast majority of survey participants get their groceries by car (88.6%). Other forms of transportation included motorcycles, walking, bus, biking, and taking a taxi/Uber/Lyft.

**Q28: About how long does it take you to get there one-way?**



Interpretation: Most survey participants live within 10 minutes of a grocery store (47.3%). Nearly all survey participants live less than 21 minutes away from a grocery store.

**Q29: Most of us don't eat healthy all the time. When you aren't eating a healthy diet, what do you think makes it hard for you to eat healthy?**



Interpretation: The main reason survey participants reported not eating healthy all the time was the cost of healthy food being too high (33%). Other reasons included not wanting to break routine and their culture.

**Q30: During the past 7 days, how many times did you drink a can, bottle, or glass of a sugary drink (includes soda, sweet tea, fruit punch, lemonade, fruit drinks, and sports drinks). Please don't count diet drinks.**



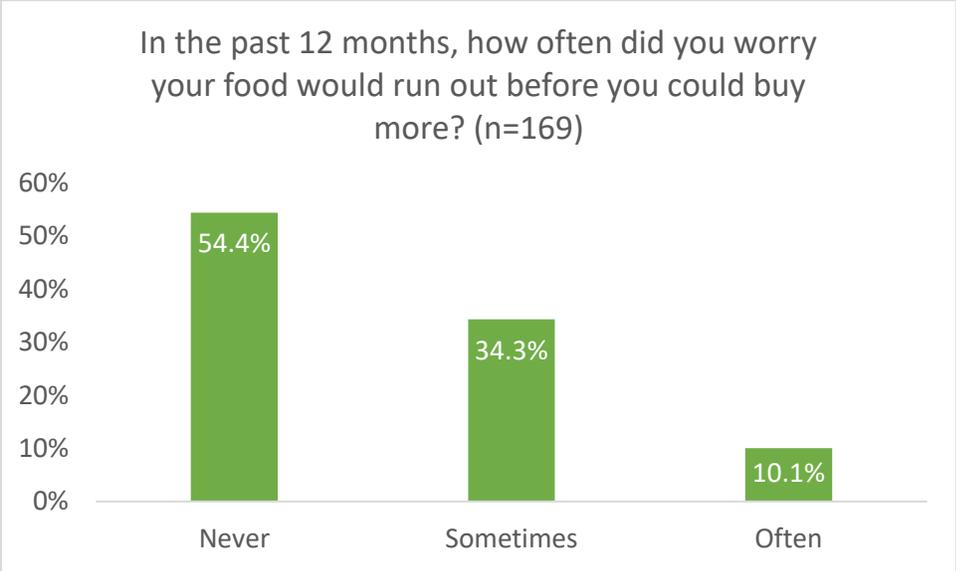
Interpretation: Half of the survey participants (50%) reported drinking a can of a sugary beverage 1-3 times per week. Meanwhile nearly one in four survey participants (23.8%) reported not having a sugary beverage within the past week.

**Q31: In the past 12 months, did you ever cut the size of your meals or skip meals because there wasn't enough money for food?**



Interpretation: Most survey participants reported not cutting the size or skipping meals (64.9%).

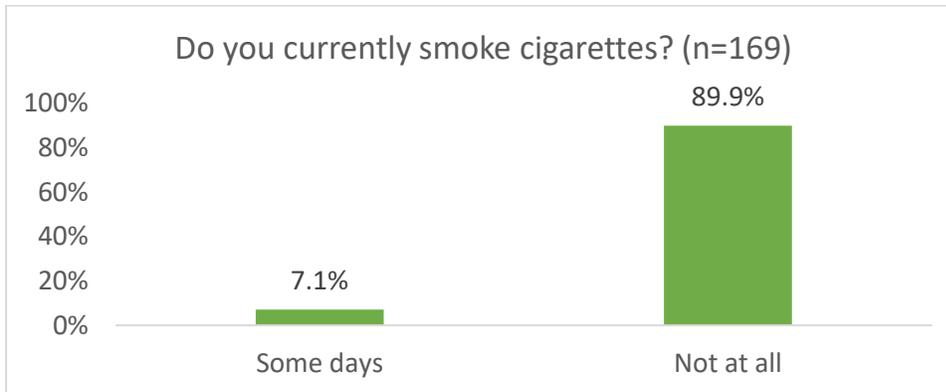
**Q32: In the past 12 months, I was worried whether our food would run out before we got money to buy more food.**



Interpretation: Nearly half (44.4%) of survey participants reported never worrying about whether or not their food would run out before they got money to buy more food.

## Tobacco:

### Q33: How often do you smoke cigarettes?



Interpretation: The vast majority of survey participants (89.9%) reported not smoking cigarettes at all.

### Q34: During the past 12 months, have you stopped smoking (e-cigarettes, herbal cigarettes, cigars, cigarillos, little cigars, pipes, bidis, kreteks, water pipes (hookah) or marijuana) for one day or longer because you were trying to quit smoking?

Data is too small to chart. Of those that reported smoking cigarettes, 75% of them reported trying to quit smoking.

### Q35: Do you now use e-cigarettes every day, some days, or not at all?

Data too small to disaggregate by every day and some days. Nearly all survey participants (97.5%) reported not using e-cigarettes.

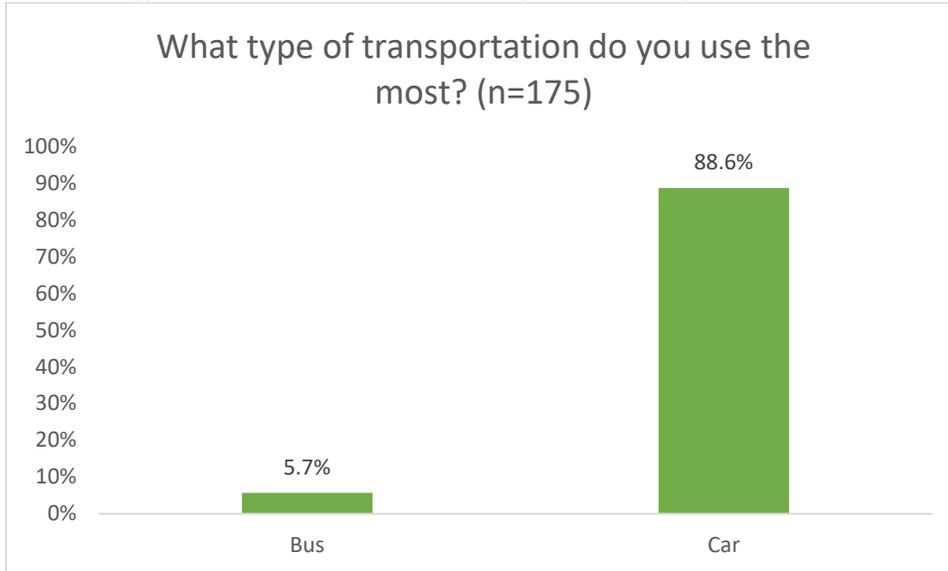
**Q36: Have you been exposed to secondhand smoke in Durham County in the past year at any of these places?**



Interpretation: Nearly half of all survey participants (43.8%) reported not being exposed to secondhand smoke. Those that were exposed reported being in the workplace (18.8%), on parks or trails (9.7%), and bus stops (7.4%).

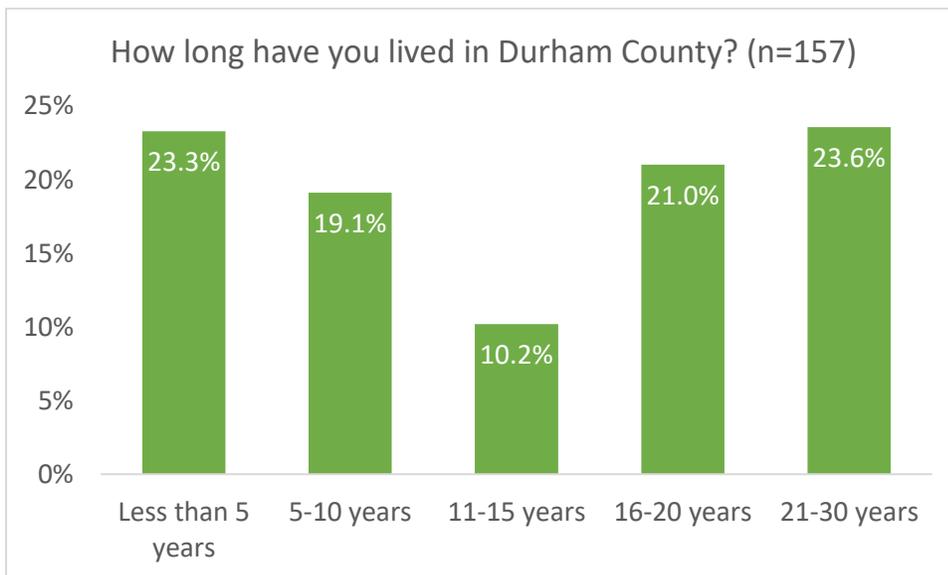
## Household:

**Q37: In a typical week, what kinds of transportation do you use the most?**



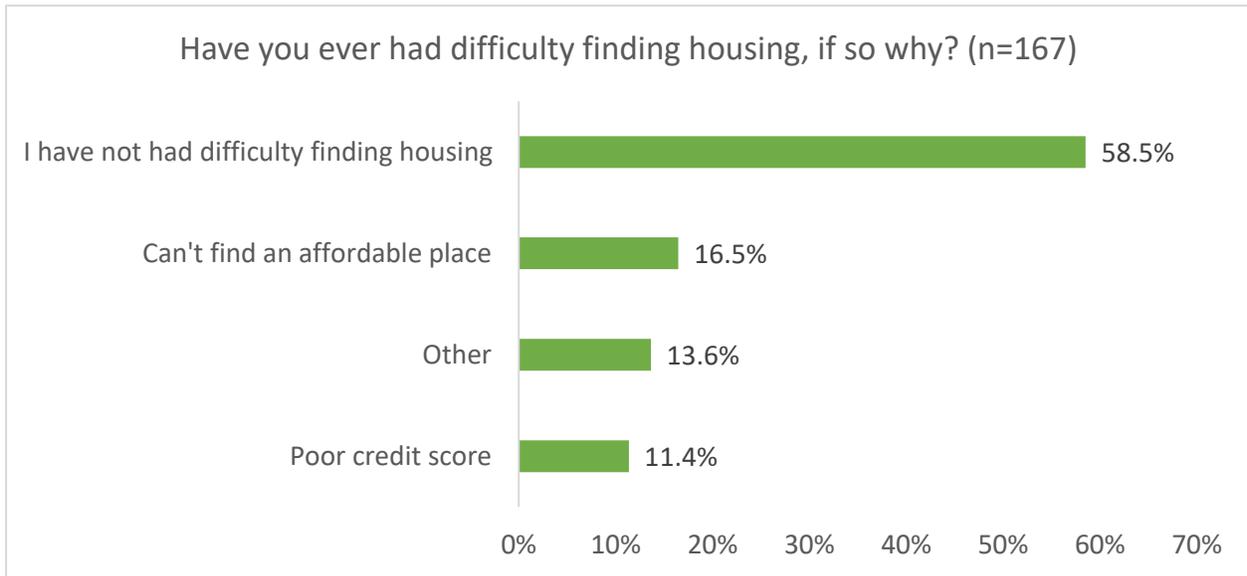
Interpretation: The vast majority of survey participants (88.6%) reported using a car as their primary mode of transportation followed by taking the bus (5.7%). Some other primary forms of transportation included biking, walking, an using a taxi, Uber, or Lyft.

**Q38: How long have you lived in Durham County?**



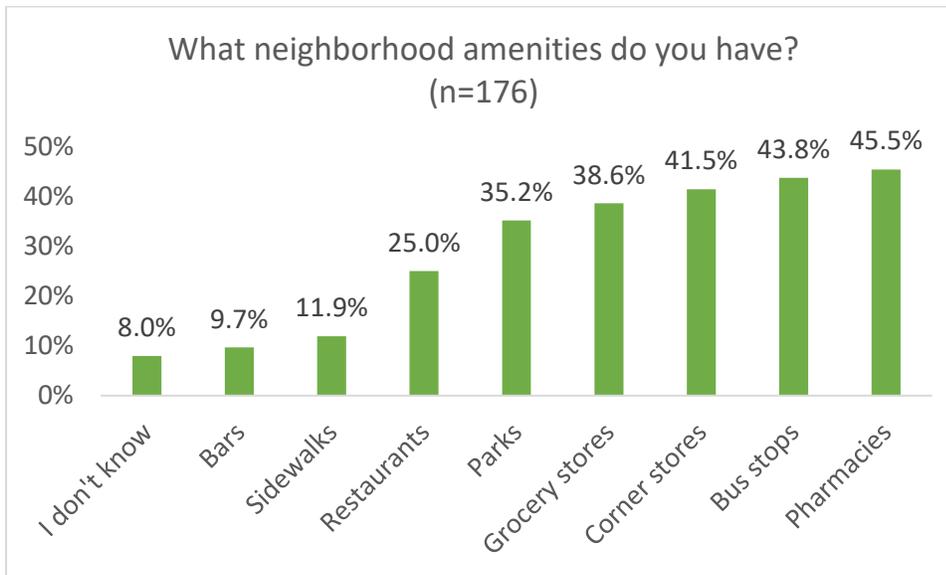
Interpretation: Over half of the survey participants (52.6%) reported living in Durham County for less than 16 years. Females (27.7%) are more likely to have lived in Durham for over 16 years than males (16.8%). Data was suppressed for those that lived in Durham for 6-10 years due to low sample size.

**Q39: Have you ever had difficulty finding a home? If so, why?**



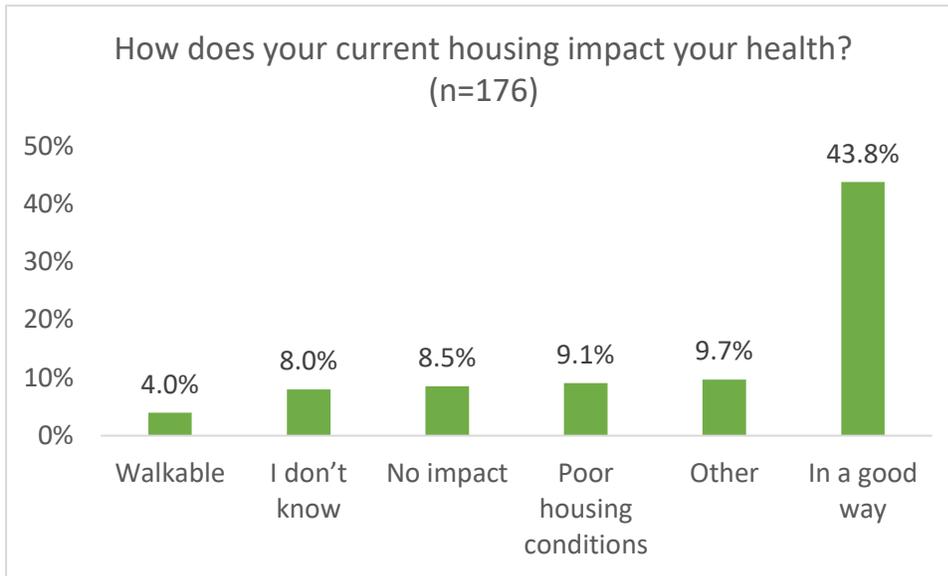
Interpretation: Over half of the survey participants (58.5%) reported not experiencing any difficulty finding housing. The main other reason survey participants had difficulty finding housing was immigration issues, lack of documentation and housing record.

**Q40: What resources are easily accessible in your neighborhood?**



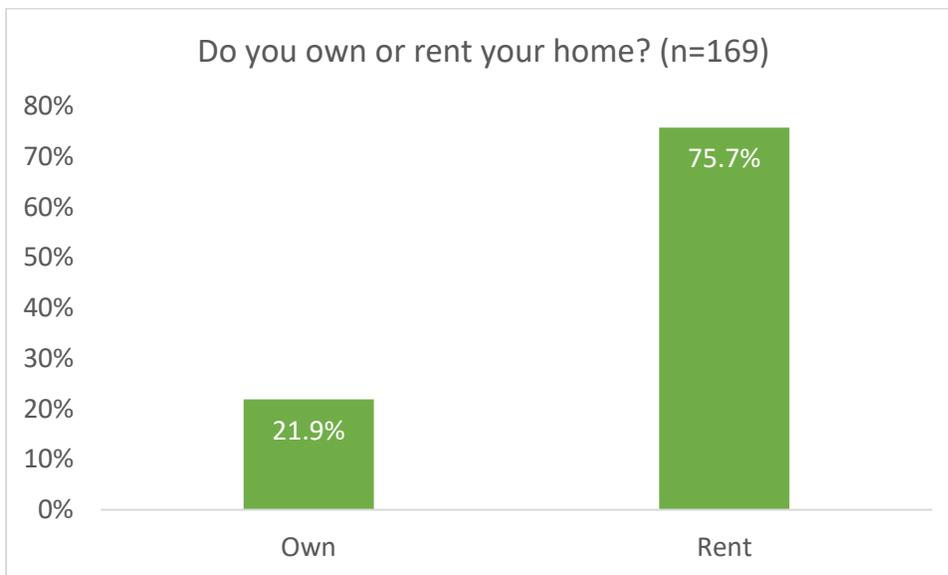
Interpretation: Several neighborhood amenities are available to many survey participants. Pharmacies (45.5%), bus stops (43.8%), and corner stores (41.5%) are the top three amenities reported. Some residents reported having all amenities while some reported not having any.

**Q41: How do you think your current housing impacts your health?**



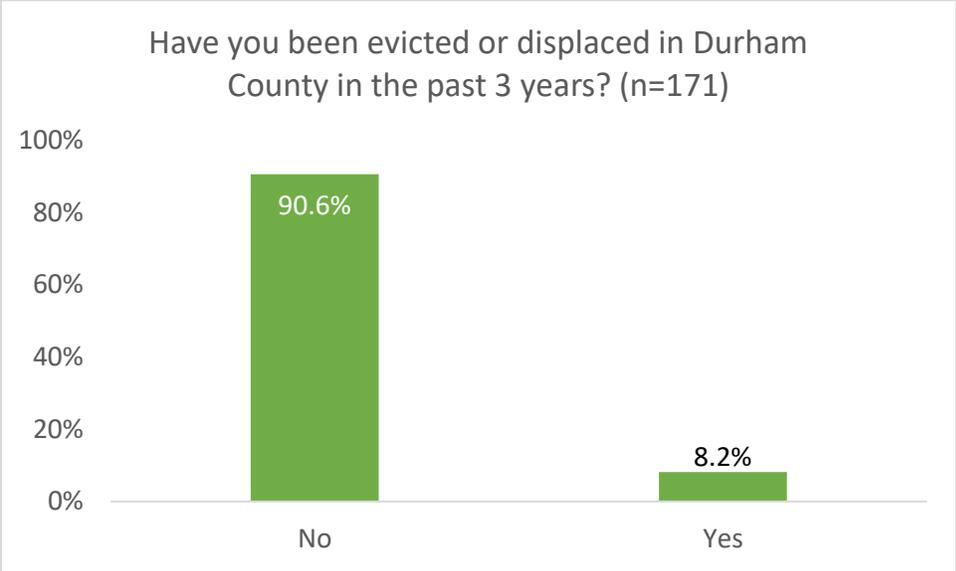
Interpretation: Most survey participants reported their current housing impacts their health in a good way. Some of the other ways housing impacted resident's health include housing being stressful and too much noise.

**Q42: Do you own or rent your home?**



Interpretation: Three in four survey participants (75.7%) reported renting their home.

**Q43: Have you or someone in your household been evicted or displaced while living in Durham County in the past three years?**



Interpretation: Nearly all survey participants reported not being evicted or displaced while living in Durham County in the past 3 years.

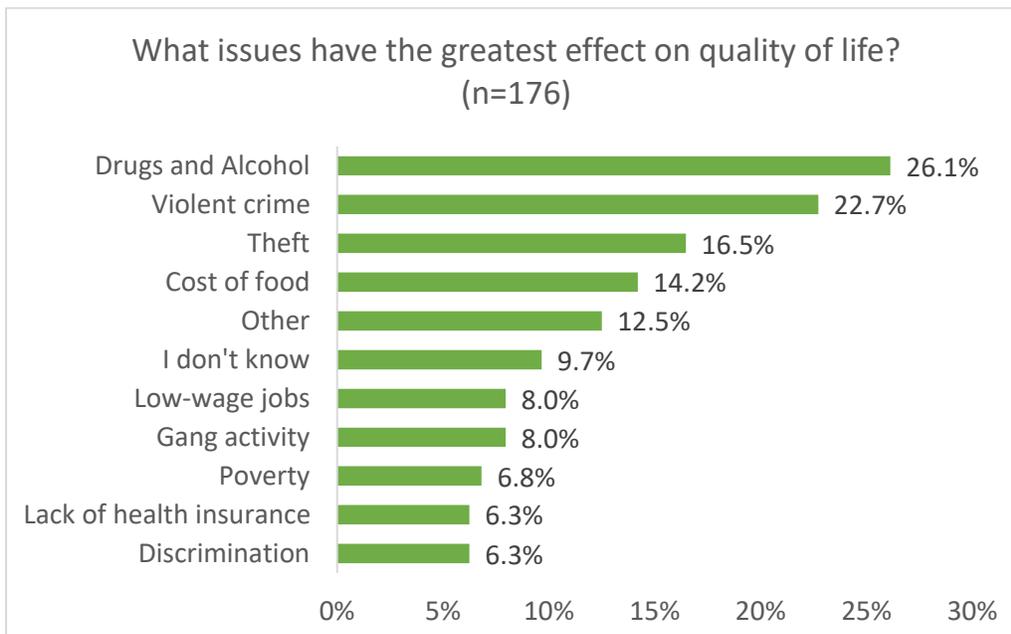
## Community Improvement:

**Q44: What people, places, or things, make your neighborhood a good place to live?**



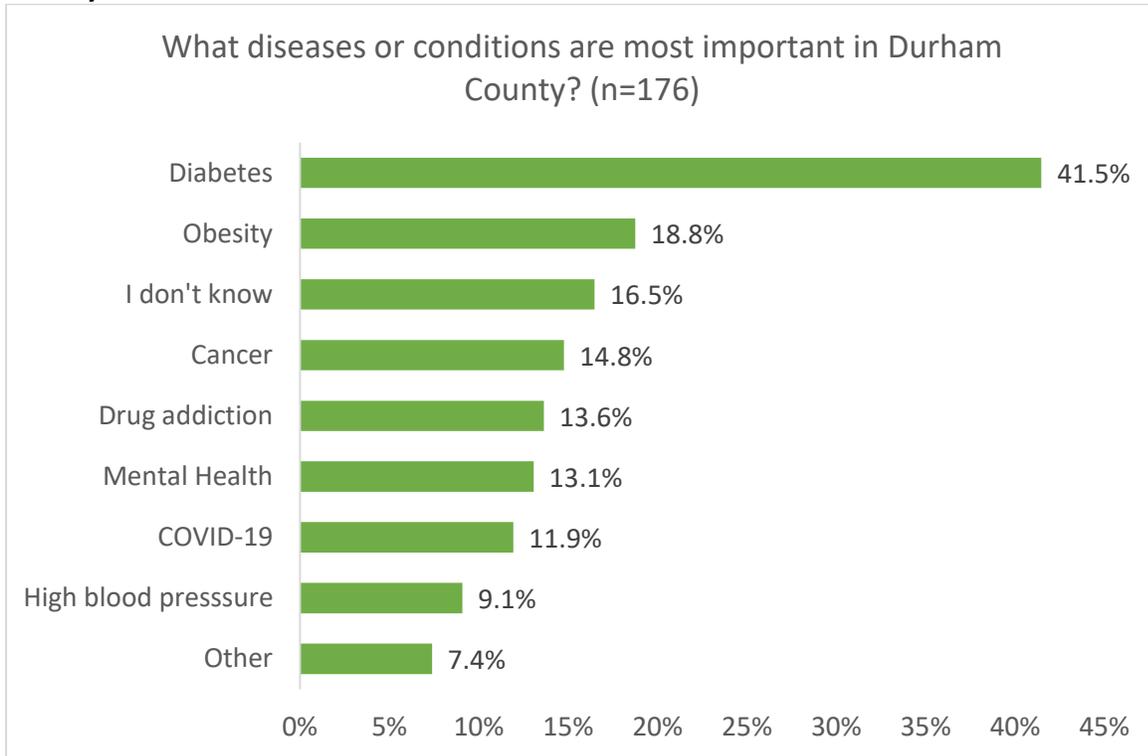
Interpretation: Most survey participants reported that their neighborhood is quiet (30.1%) and the neighbors are great (21%). Some other reasons survey participants reported their neighborhood being a good place to live included the greenery, kids present, and a higher population of Hispanics and Latinos.

**Q45: What issues have the greatest effect on quality of life for you personally or your community in Durham County?**



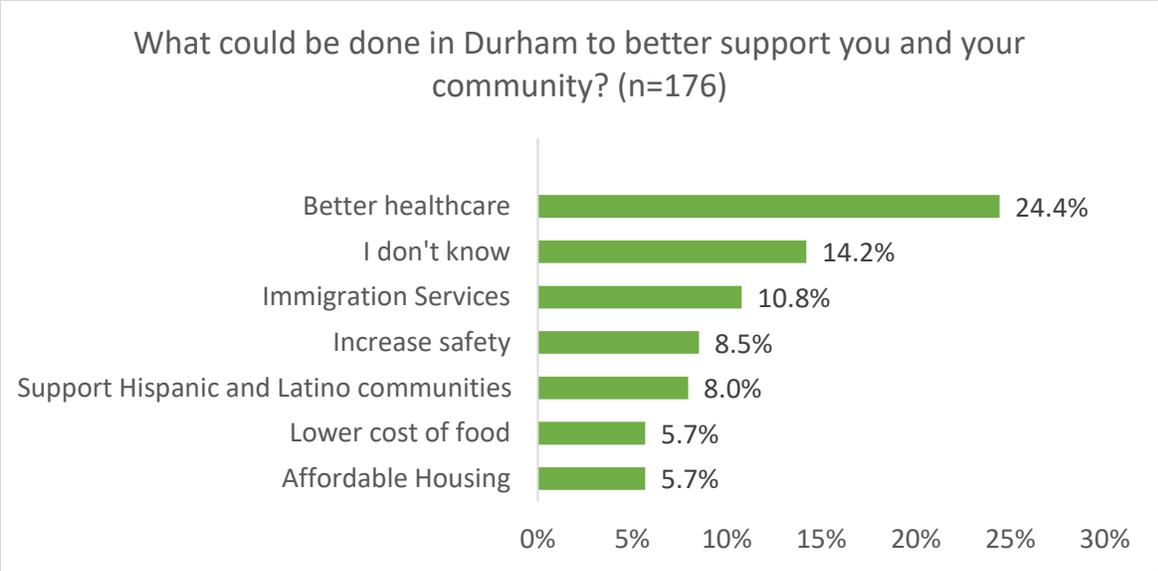
Interpretation: The most common issue mentioned by survey participants was drug and alcohol abuse (26.1%) followed by violent crime (22.7%) and theft (16.5%). Some other issues mentioned included delinquency and lack of recreation for youth.

**Q46: What are the most important health problems, that is, disease or conditions, in Durham County?**



Interpretation: The most common health problem reported by survey participants was diabetes (41.5%) followed by obesity (18.8%), and Cancer (14.8%). Some other issues mentioned included allergies, joint pain, and renal issues.

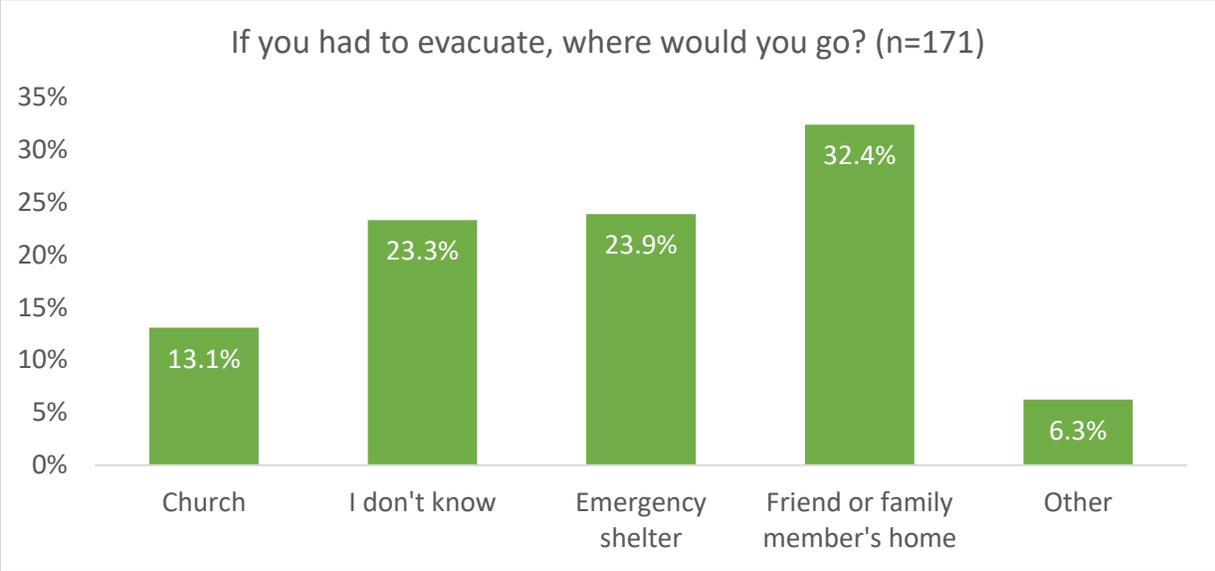
**Q47: What could be done in Durham to support you and your community?**



Interpretation: One in four (24.4%) of survey participants reported needing better healthcare followed by more immigration services (10.8%) and increasing safety (8.5%).

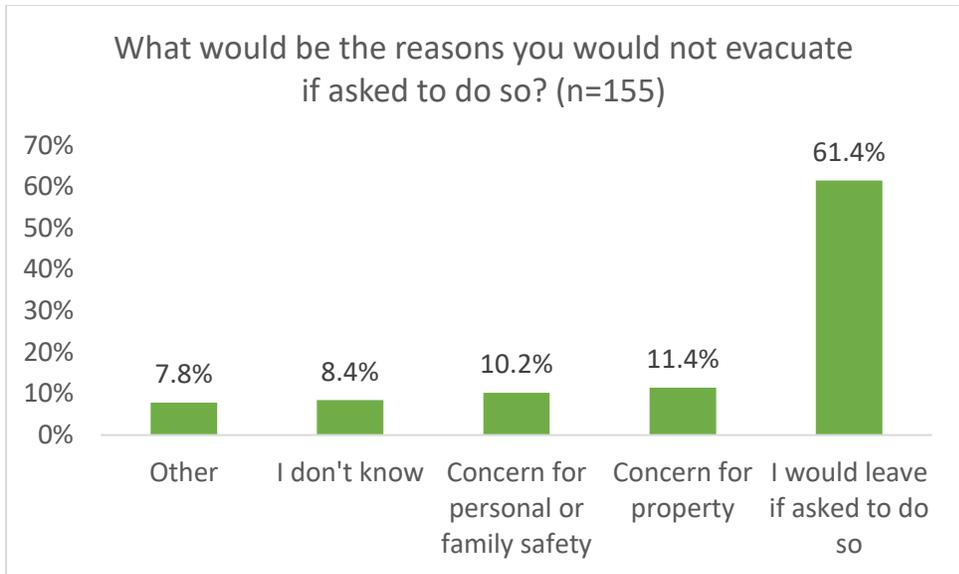
### Emergency Preparedness:

**Q48: If you couldn't remain in your home, where would you go in a community-wide emergency?**



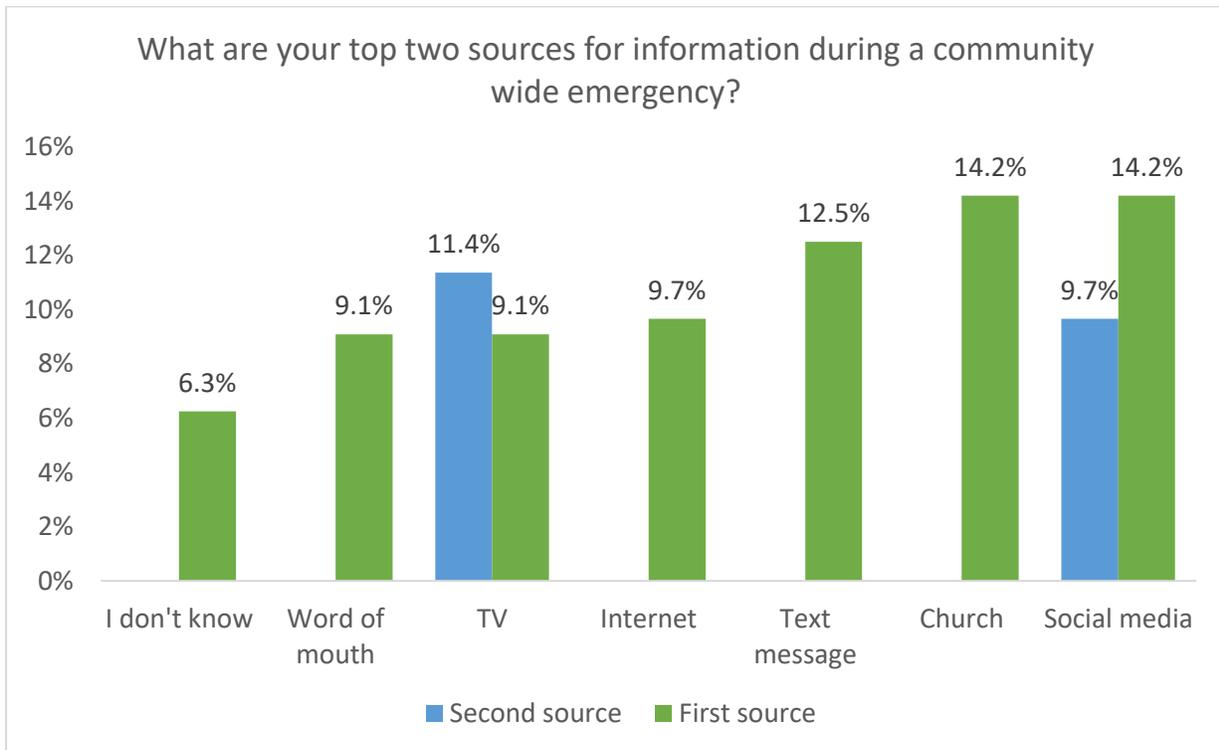
Interpretation: One in three (32.4%) survey participants reported they would go to a friend or family's house if they needed to evacuate. Some other places participants mentioned included their country of origin or out of state.

**Q49: What would be the main reason you might not evacuate or leave your home if asked to do so?**



Interpretation: Over half of the survey participants (61.4%) reported that they would leave if asked to do so. Concern for personal property (11.4%) was followed by concern for personal or family safety (10.2%). The most common other response was that participant didn't know where to go.

**Q50: Where would you go for information about a community disaster?**

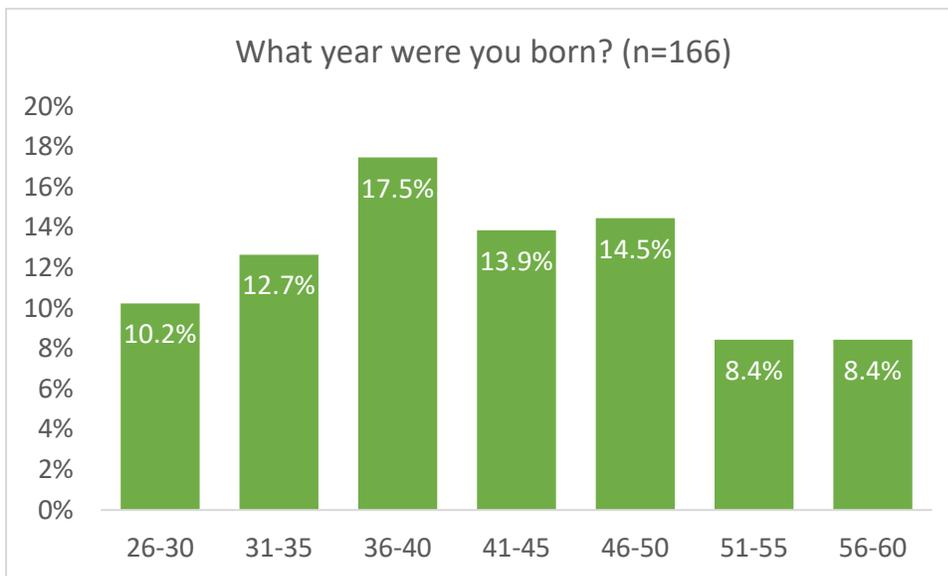


Interpretation: The primary first source of information on a community-wide emergency was social media (14.2%) followed by a church or place of worship (14.2%). The most common social media

platform participants reported using was Facebook. Not many participants mentioned a second source of information, but the TV was most common (11.4%).

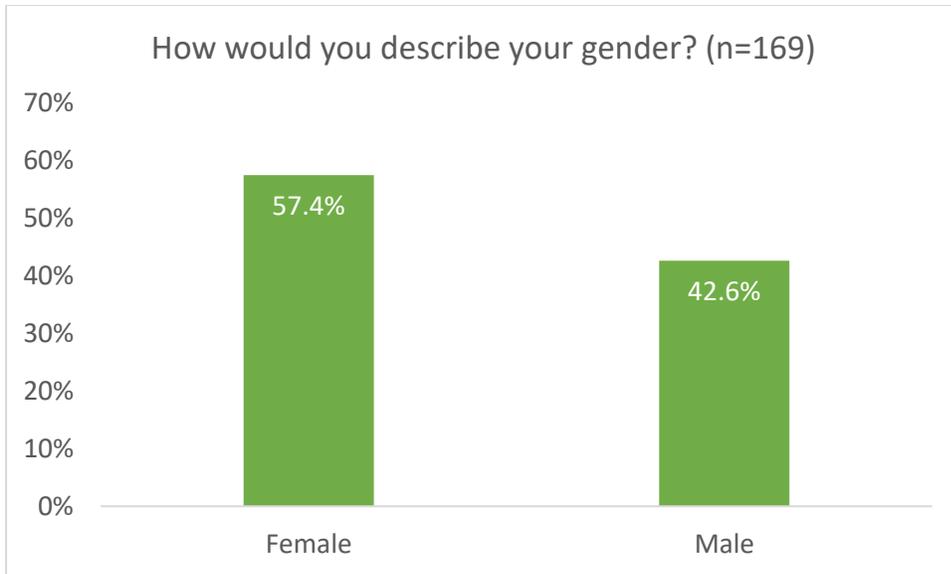
## Demographics:

**Q51: What year were you born?**



Interpretation: Most residents are under 46 years of age (54.3%).

**Q52: Describe your gender.**

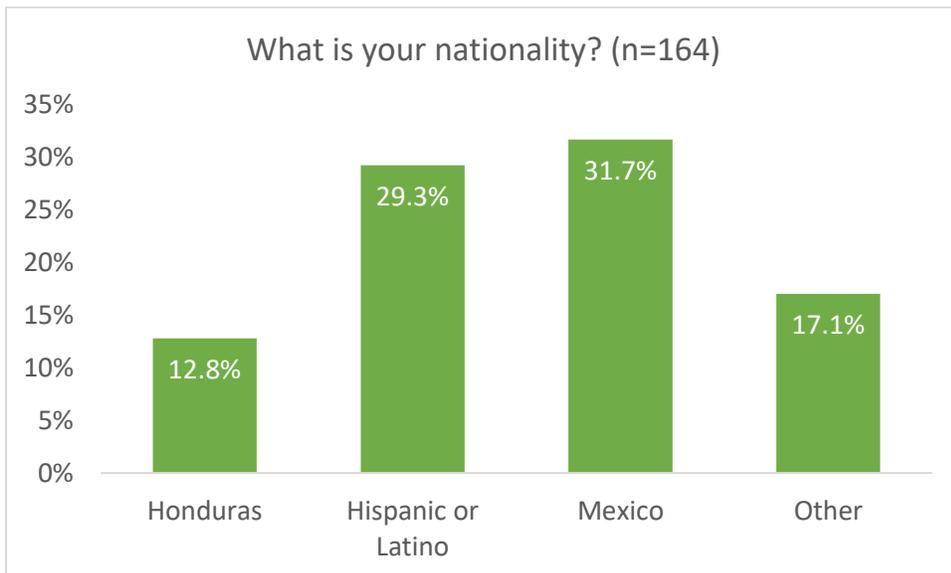


Interpretation: More females (57.4%) were surveyed than males (42.6%).

**Q53: How would you describe your sexual orientation?**

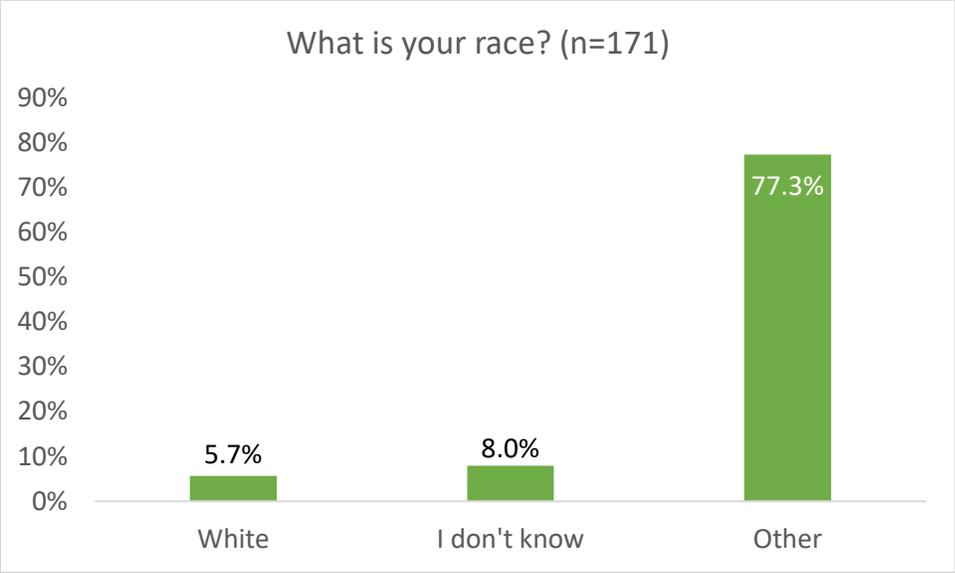
The vast majority of survey participants (90.9%) reported identifying as heterosexual or straight. Other sexual orientations were too small to disaggregate.

**Q54: What is your nationality?**



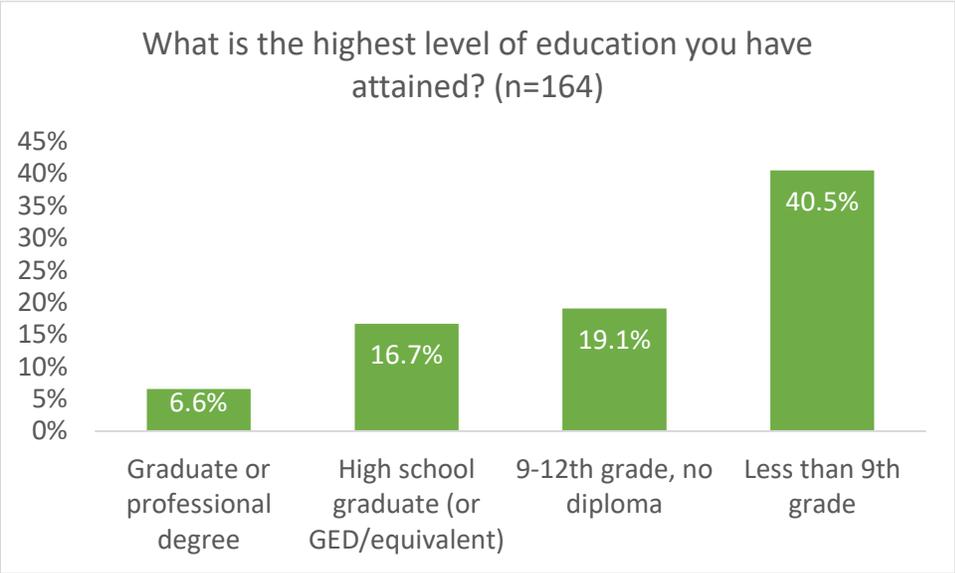
Interpretation: Nearly one in three (31.7%) of survey participants reported being from Mexico followed by Honduras (12.8%). Many participants reported their nationality as Hispanic or Latino (29.3%). Other nationalities were too small to disaggregate.

**Q55: What is your race?**



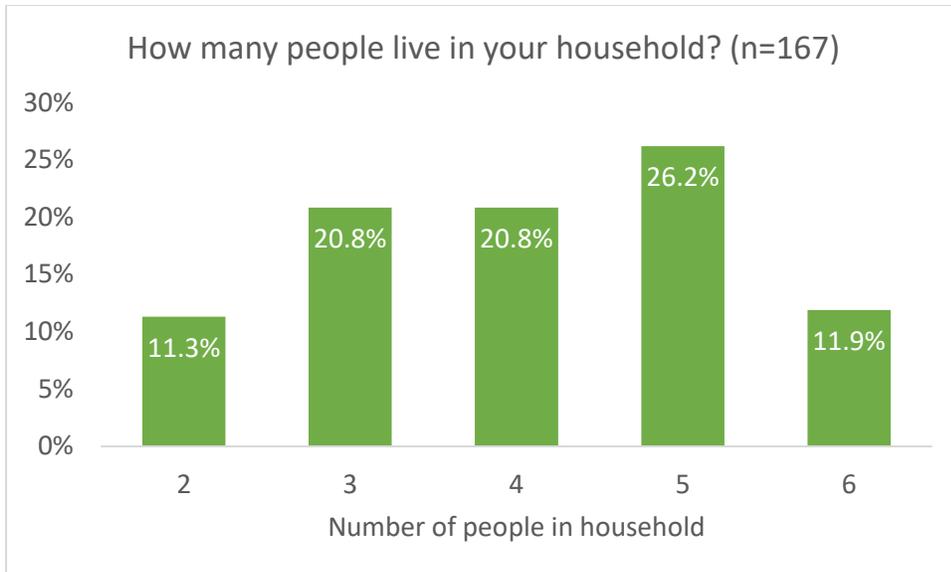
Interpretation: Most survey participants (77.3%) describe their race as 'other' out of the options provided (Asian, American Indian or Alaskan Native, Black or African American, Native Hawaiian or Other Pacific Islander, white). Other races were too small to disaggregate.

**Q56: What is the highest level of school, college, or vocational training that you have finished?**



Interpretation: Many survey participants reported not having any high school education (40.5%).

**Q57: Including yourself, how many people live in your household?**

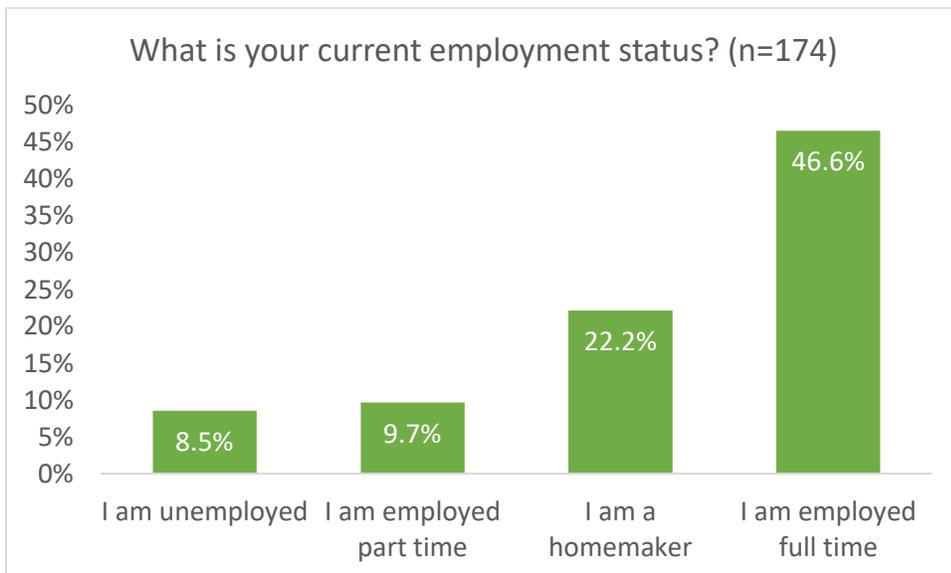


Interpretation: The majority of survey participants have at least four people in their household (58.9%).

**Q58: Is your household income greater than 200% of the Federal Poverty Line (FPL) for your household size?**

Data could not be collected for this question due to a technological issue with survey administration.

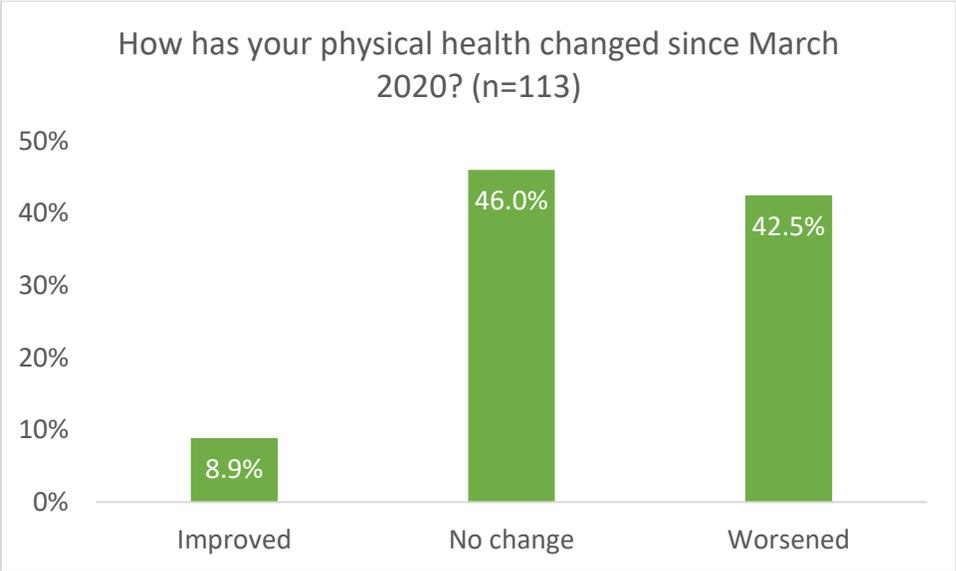
**Q59: What is your current employment status?**



Interpretation: Most survey participants reported being employed full time (46.6%) followed by being a homemaker (22.2%).

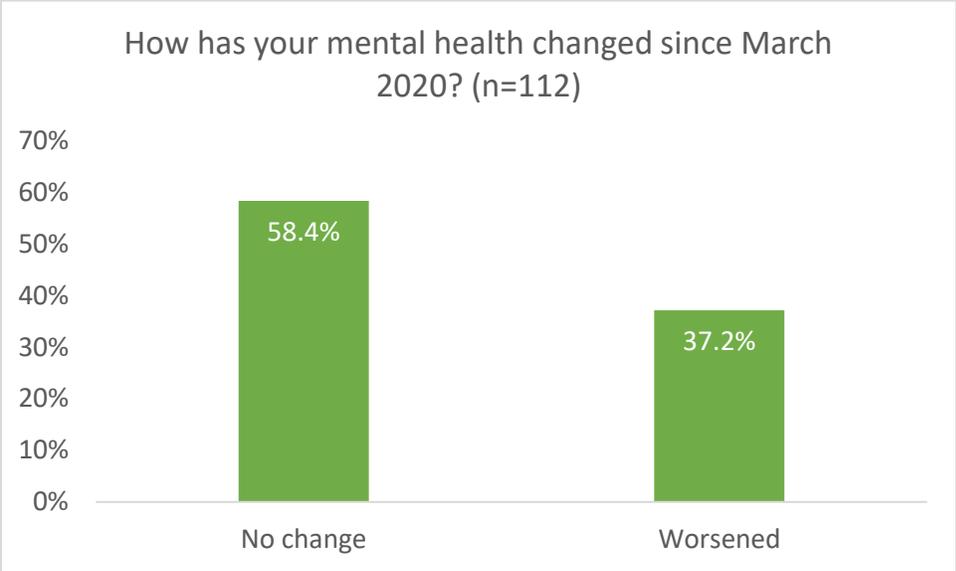
# COVID-19:

Q1: How has your physical health changed since March 2020?



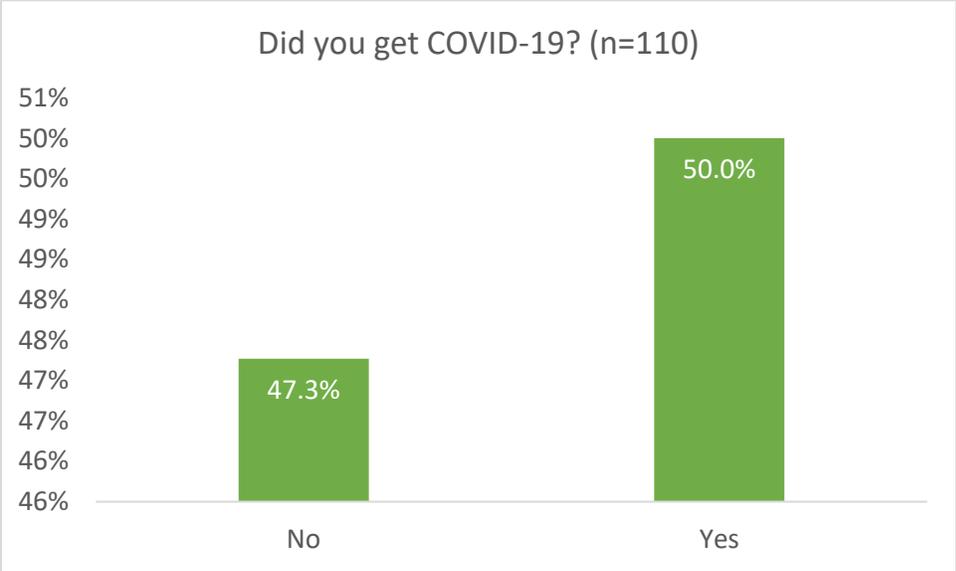
Interpretation: Nearly half of the survey participants (42.5%) reported their physical health worsening since March 2020. Only 8.9% reported their physical health improving.

**Q2: How has your mental health changed since March 2020?**



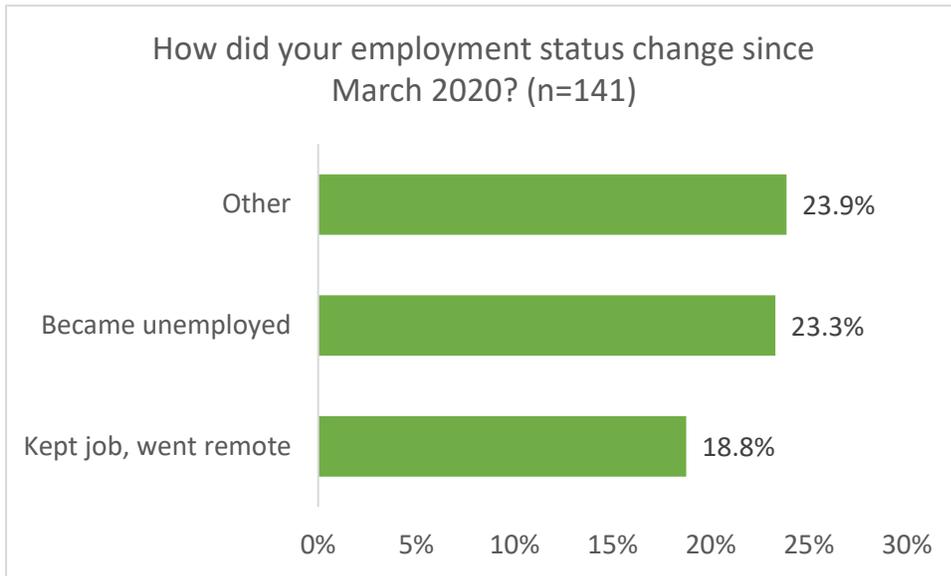
Interpretation: The number of those whose mental health improved was too small to disaggregate. Over one in three (37.2%) of survey participants reported their mental health worsened since March 2020.

**Q3: Did you get COVID-19?**



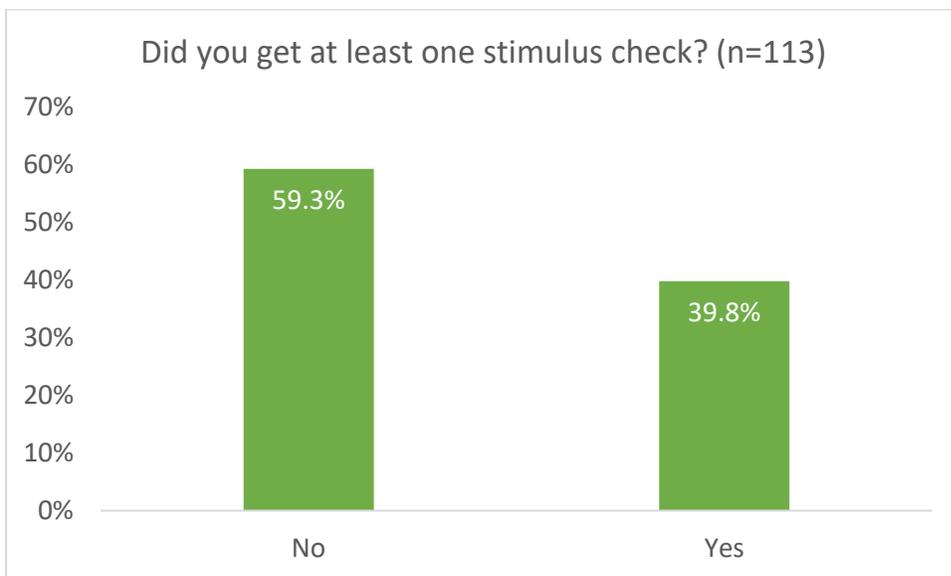
Interpretation: Half of the survey participants reported getting COVID-19. Females (33.6%) were twice as likely as males (16.4%) to get COVID-19.

**Q4: How has your employment status changed since March 2020?**



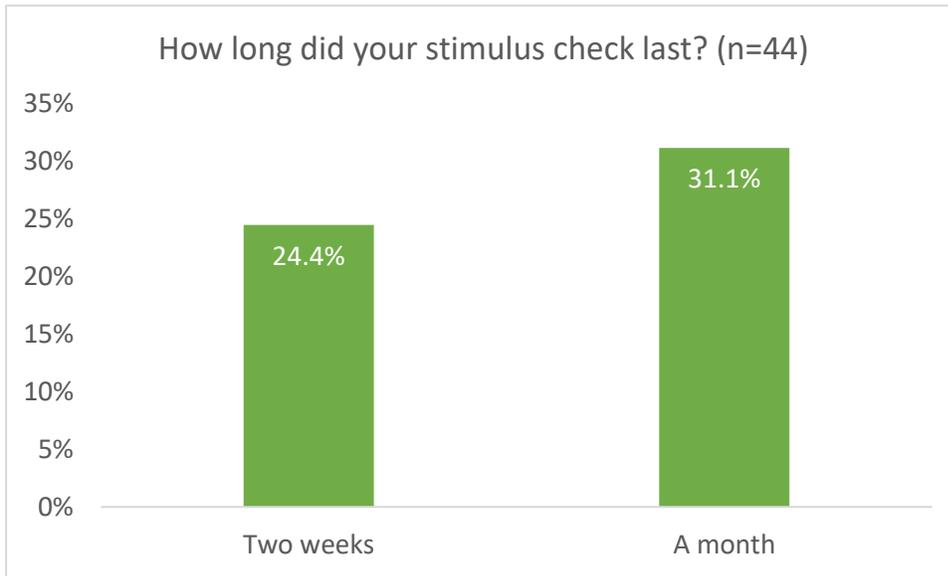
Interpretation: Nearly one in four (23.3%) of survey participants reported losing their job since March 2020. Some other employment statuses were remaining retired, being a student, and staying a homemaker.

**Q5: Did you receive at least one stimulus check?**



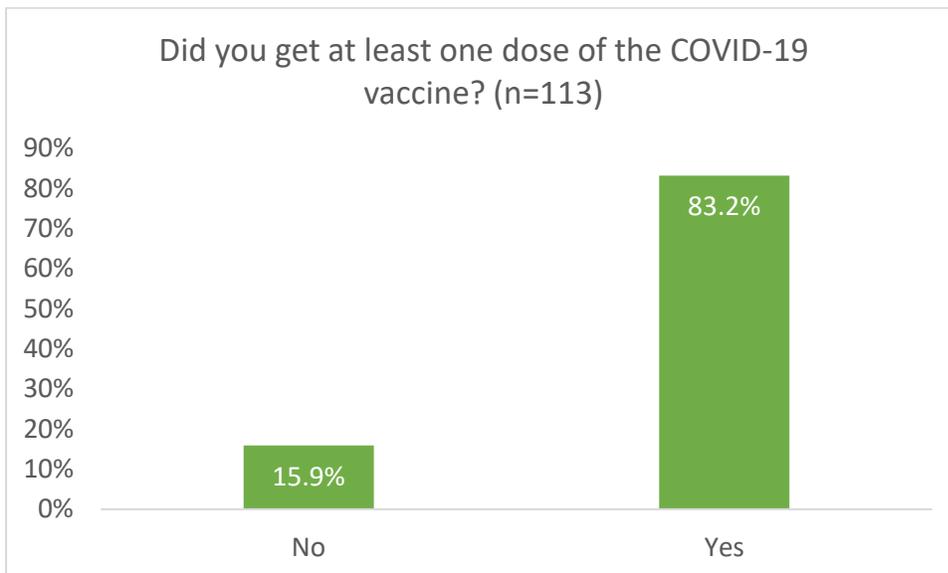
Interpretation: Less than half of the survey participants (39.8%) reported receiving at least one stimulus check.

**Q6: How long did your stimulus check last?**



Interpretation: Over half of survey participants that received a stimulus check made the stimulus check last for more than a month (51.1%).

**Q7: Did you get at least one dose of the COVID-19 vaccine?**



Interpretation: Most survey participants (83.2%) reported receiving at least one dose of the COVID-19 vaccine.