



Public Health

Durham Joins Together Taskforce Meeting Report

Committee	Education and Prevention
Committee Chair or Co-Chairs	Dr. Wanda Boone, TRY Paula Harrington, Oxford Houses
Date	CURRENT

Committee members

TRY Coalition Members: Maame Amoako, Duke Medical School Student, Mindy Solie, District 3 Facilitator, Nancy Rosales, TRY CHW, CT Facilitator, Ashley Bass Mitchell, Alliance, Andre Hinton, Durham Police Department, Nathalia Rosales, LIFT Facilitator, Angie Mejia, TRY Youth Facilitator, Jordyn Burton, TRY Youth Mentor, Carlotta Dunnigan, Parent, Dedreanna Freeman, City Council, Catherine Myer, Family Advocate, NCCU/Bridge, Faye Calhoun, NCCU/Bridge, Patricia Murray, Skywriter, Harold Chestnut, City-Wide PAC, Earl Boone Pastor, Harlan Crenshaw, Sheriff's Office, Sharon Mullen, Durham Committee on the Affairs of Black People, Judith Johnson Hostler, ADCNC, Jason Southworth, Carolina Behavioral Healthcare, Kyle Smith, Insight NC, Latoria Dowdy TRY CT Facilitator, Florine Moore, TRY CT Facilitator, Francelia Burwell, TRY CT Facilitator Pamela Joyner, NCDPS, Shaneeka Lawrence TRY CT Facilitator, Sonya Terry, Durham Public Schools, William Felton, NCDPS, Zion Tankard, District 3 Facilitator, Dr. Kendrick Kennedy, Duke ED, Joseph Featherstone, DCIA, Stan Branch, CHW/Whole Health Peer Support, Brian Harris, CHW/Whole Health Peer Support, Alicia Johnson, DPH Ambassador, Representatives from AACT+, DCABP, Durham CAN and NAACP, GDBCC

ADDRESSING OVERDOSE, SUBSTANCE USE, MENTAL HEALTH AND VIOLENCE

COMMUNITY VALUES:

CO-DEVELOPING AND CO-CREATING SOLUTIONS TO CHALLENGES IN THE COMMUNITY

Resources: No funding has been discussed or offered for this work.

IN RESPONSE TO THE OPIOID EPIDEMIC

- Identified alternatives to prescription medications to prevent pain.
- Developed talking points on the impact of the Opioid Epidemic on all populations and diverse groups. (K-12 to young adults to seniors)
- Risks and Prevention

IN RESPONSE TO VIOLENCE

- Identified use data where and why violence occurs.
- Shared data with community and developed – what to do
- Identified the trajectory from bullying, interpersonal/dating, elder abuse
- Examined and shared Geo-maps, types of crime, time of day and who is or is not committing crime

YOUTH MENTAL HEALTH

IN RESPONSE TO SUICIDE AMONG BLACK MIDDLE AND HIGH SCHOOL STUDENTS

- LIFT Coalition 9-17, 18-24: Address* Ruminations, Cutting and Self harm, Increase Resilience, Life Skills, using Peer to Peer techniques.
- Youth and Young adult create spoken word, music, art, dance, video etc
- Shared hotlines
- Referral to treatment
- Change Your Words. Change Your World 16 and up*

YOUTH SUBSTANCE USE

IN RESPONSE TO VAPING AND MARIJUANA – Other substances are down!

- As above with mentored step down
- Health facts regarding use

YOUTH, YOUNG ADULT AND ADULT

HIGH RISK ALCOHOL CONSUMPTION

- Shared information: What is alcohol?
- Identified and communicated dangers, physical, behavioral
- TRY Good Neighbor Business Network – Geo-Maps identifying purchase and density issues
- (violence, chronic disease, deaths)

IN RESPONSE TO FAMILY (CAREGIVER/CHILD) MENTAL HEALTH

Coping Together (family connectedness) developed in Kenya and adapted for Durham, NC 95% success rate



CONTINUED

TRY COALITION MEETING: WHY TRY Roots, Restoration, and Resilience (RRR)?

RRR is a fair and equitable approach centered in policy, advances the community led development of pathways to equitable policies, builds peoples' skills, confidence, and sense of power and enhances trust, social cohesion, and a community's sense of their combined power.

- Learn why power and self-advocacy are important to the prevention field?
- Explore the use a GIS overlay or comparison?
- Tower, the Grass-tops and the Grassroots.

This model facilitates the policy change necessary to implement structural interventions.

- Community outcomes are based on co-led communities building and channeling their power.
- A community with skills, confidence, trust, social cohesion, and a sense of their individual and combined power is more likely to develop, sustain, and grow an organized base.
- The community acts together through equitable structures to set agendas, shift public discourse, influence who makes decisions, and cultivate ongoing relationships of mutual accountability with decision makers.

UPDATE: CONTINUING

TRY YOUTH – LIVING IN FUTURE TENSE (LIFT) COALITION

Youth face stressful situations and challenges. It takes resilience skills training, safe environments and reliable healthy relationships to empower youth to engage successfully in life. We at TRY are committed to continuing to listen, learn from and support youth on their journey.

WHAT DOES SAFETY LOOK LIKE TO YOU? "Being able to Learn.", "Building relationships by getting to know others and their stories.", "Being able to be my authentic self.", "Feeling safe on the bus to school." "Good family influences and relationships." "We want allyship and safety with others who are different than us. **CONCERNS ABOUT GUN SAFETY** "We want to see more school security and take school threats more seriously." "Change the perception and culture around guns" "We want to feel safe around the people who are supposed to protect us. **SHARED THE FOLLOWING THOUGHTS ABOUT SCHOOL** "It would be nice to have more intentional work instead of busy work" "More time to catch up on work during the day." "Rethink the approach to education." "Help students learn the skills they are interested in, like carpentry or certifications." "Wellness Day in school for administration and students bond together

TRY YOUTH COMMUNITY - OVERDOSE PREVENTION

A risk factor for overdose is the change in tolerance due to not using or using less opioids The mental health effects of an overdose can involve anxiety, depression, and memory problems, while physical effects can include Toxic Brain Injury, liver damage, compromised cardiovascular health, and neurological consequences. Naloxone is a medication approved by the Food and Drug Administration (FDA) designed to rapidly reverse opioid overdose. It is an opioid antagonist—meaning that it binds to opioid receptors and can reverse and block the effects of other opioids, such as heroin, morphine, and oxycodone

When someone experiences an opioid overdose, naloxone can be administered to quickly restore normal breathing and prevent a potentially fatal outcome. Naloxone is an opioid antagonist, meaning that it counteracts the effects of opioids by binding to the opioid receptors in the brain and blocking their activation

UPDATE: CONTINUED INVOLVEMENT: ACCESS TO GUNS. ACCORDING TO THE YRBS SURVEY, "I CAN GET MY HANDS ON A GUN IN 10 MINUTES. TOPIC: GUN VIOLENCE - HEAL NCDHHS

TRY was selected to participate in HEAL, representing MAHEC in NC Region 4 to lead a team of Community Based Organizations with Community Health Workers to co-develop and implement strategies to prevent gun violence. Overall Approach: To develop and implement a community centered process to address violence as a public health crisis. The CBO/CHW team through civic participation, indirectly via advocates, or both, holds policy makers and institutions accountable for assisting to implement community solutions. The traditional focus on behaviors ignores both the history of different communities and the impact a particular challenge.

UPDATE: CREATED TALKING POINT FOR THE COMMUNITY RE: ALCOHOL

ALCOHOL CONTRIBUTABLE DEATH – MaryBeth Cox PhD, Charlton Fisher, NC Injury Prevention Branch In Durham, chronic death rate estimates were higher amongst white residents every year, except for two years, when compared to Black residents. In 2021, the chronic death rate estimate was 1.2 times higher for Black residents when compared to white residents. The steep increase from 2020 to 2021 for Black Durham

residents was due to an increase in deaths from alcoholic liver disease, liver cirrhosis, and other chronic causes of death. In North Carolina, chronic rate estimates were higher amongst white residents when compared to Black residents for the past ten years. In 2021, the chronic death rate was 1.4 times higher for white residents when compared to Black residents in North Carolina. Overall, chronic death rate estimates in Durham were lower than the statewide estimates for both Black and white residents. Additionally, white residents generally had higher rate estimates, both statewide and in Durham, when looking at this subset of chronic causes of alcohol-attributable death. However, in Durham the gap between Black and white residents was not as wide as the gap statewide. Also, in 2021 chronic rate estimates were higher among Black residents than white residents in Durham.

CONTINUING TO MONITOR COMPLIANCE THROUGH THE TRY GOOD NEIGHBOR NETWORK ALCOHOL OUTLET DENSITY - DURHAM COUNTY ALCOHOL RELATED CRIMES SURVEILLANCE

Community-level Efforts to Improve Health and Safety through the Regulation of Alcohol Retailers

Wanda Boone, MaryBeth Cox, Mike Fliss The death rate estimates increased among both white and Black residents in Durham County. For white residents, there was a 27% increase in the rate estimates over the past ten years. **However, for Black residents, there was a 101% increase in rate estimates over the past ten years.** The death rate estimates also increased among both white and Black residents in North Carolina. For white residents, there was a 57% increase in the rate estimates over the past ten years. **However, for Black residents, there was an 83% increase in the rate estimates over the past ten years.**

Overall, death rates were higher for white residents when compared to black residents statewide, while the opposite is true in Durham. In Durham, **Black residents have higher alcohol-attributable death rates when compared to white residents.** In addition, this disparity has widened significantly in Durham, while remaining relatively the same statewide. With the substantial increase in rate estimates for Black residents, both in Durham County and North Carolina, these findings can highlight **a disparity in alcohol-attributable deaths.** **These findings can be considered within the context of persisting health inequities, which, along with many other factors, could have contributed to the observed disparity.**

CONTINUING – THE RESOLUTION PASSED

TEEN VIOLENCE PREVENTION – COMMUNITY CONVERSATION

Teen Violence Prevention 3rd Tuesdays 6:00 PM

Introductions, Agenda: Moment of Silence Dr. Kendrick Kennedy, Assistant Professor Emergency Medicine Christian A. Pean, MD, MS is an Orthopedic Trauma Surgeon, Uzuri Holder, Manager Duke Violence Recovery Program, Data Review, Discussion, Comments from Youth, Parents and the Community. Find your place as a Champion of Change - Solutions

CONTINUING DISTRIBUTED NALOXONE TO THE COMMUNITY, NCCU AND ALL SROS IN MIDDLE AND HIGH SCHOOLS

FROM TRAUMA TO TRIUMPH: ACES TRAINING FOR HEALTH, WELLNESS AND PREVENTION

December 11, 2024

10am-11:00am

PRESENTER: Dr. Wanda Boone, CEO TRY & AHHH!

"This dynamic training session equips participants with the knowledge and tools to identify, understand, and address Adverse Childhood Experiences (ACEs). Participants will explore the profound impact of ACEs on long-term health and well-being, learn effective strategies for trauma-informed care, and engage in practical exercises to apply these principles in their work and life."

ACES TRAINING

CHILDREN IMPACTED BY VIOLENCE - BRAVE DURHAM

TRY COALITION

Kelly Sullivan, Wanda Boone, Jovonia Lewis

December 11, 2024

11:15am - 12noon