



# Community Health Action Plan 2018

*Designed to address Community Health Assessment priorities*

**County:** Durham    **Partnership, if applicable:** Partnership for a Healthy Durham    **Period Covered:** 2015-2018

### LOCAL PRIORITY ISSUE

- Priority issue: Obesity and Chronic Illness
- Was this issue identified as a priority in your county's most recent CHA?  Yes  No

### LOCAL COMMUNITY OBJECTIVE Please check one: New Ongoing (was addressed in previous Action Plan)

- By (year): 2018
- Objective (specific, measurable, achievable, realistic, time-lined change in health status of population):
  - Increase the percentage of adults getting recommended amount of physical activity from 52.2% to 55%
  - Increase the percentage of adults who report they consume fruits and vegetables five or more times per day from 19% to 22%
  - Decrease the percentage of adults who smoke from 15% to 14.5%
  - Decrease the percentage of adults with diabetes from 8.0% to 7.5%
- Original Baseline: Physical activity: 52.2%; Fruits and vegetables: 19%; Adults who smoke: 15%; Diabetes: 8.0%
- Date and source of original baseline data: 2014 Durham County Community Health Assessment <http://www.healthydurham.org/docs/file/about/CHA%20Final%20Document.pdf>
- Updated information (For continuing objective only):
- Date and source of updated information:

### POPULATION(S)

- Describe the local population(s) at risk for health problems related to this local community objective (At risk populations are members of a particular group that are likely to, or have the potential to acquire a certain health conditions. Examples of at risk populations include racial/ethnic disparities, gender, age, income, insurance status or geographical location.
  - Minorities and lower income populations are at higher risk for being overweight or obese (BRFSS, 2013)
- Total number of persons in the local disparity population(s) (include data and source of data):
  - Population of Durham County is 276,494; minorities comprise 51.1% or 137,648 (2012 U.S. Census)
- Number you plan to reach with the interventions in this action plan:
  - We estimate 10% of the population of Durham County, approximately 27,000 people over the course of three years

**HEALTHY NC 2020 FOCUS AREA ADDRESSED** At a minimum, two out of the three local priority issues must have a corresponding Healthy North Carolina 2020 focus area that align with your local community objective Please check **one of the following 13** Healthy NC 2020 focus area (if applicable):

- Check **one** Healthy NC 2020 focus area:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Tobacco Use                     | <input type="checkbox"/> Social Determinants of Health (Poverty, Education, Housing) | <input type="checkbox"/> Infectious Diseases/ Food-Borne Illness  |
| <input type="checkbox"/> Physical Activity and Nutrition | <input type="checkbox"/> Maternal and Infant Health                                  | <input checked="" type="checkbox"/> Chronic Disease (Diabetes, Colorectal Cancer, Cardiovascular Disease) |
| <input type="checkbox"/> Substance Abuse                 | <input type="checkbox"/> Injury  | <input type="checkbox"/> Cross-cutting (Life Expectancy, Uninsured, Adult Obesity)                        |
| <input type="checkbox"/> STDs/Unintended Pregnancy       | <input type="checkbox"/> Mental Health   |   |
| <input type="checkbox"/> Environmental Health            | <input type="checkbox"/> Oral Health   |   |

- **Resource for detailed information of HEALTHY NC 2020 Objective:**  
<http://publichealth.nc.gov/hnc2020/foesummary.htm>
  - Increase the percentage of adults getting the recommended amount of physical activity.
  - Increase the percentage of adults who report they consume fruits and vegetables five or more times per day.
  - Decrease the percentage of adults who are current smokers.
  - Reduce the cardiovascular disease mortality rate (per 100,000 population)
  - Decrease the percentage of adults with diabetes.
  
- **List county baseline data associated with the HEALTHY NC 2020 Objective listed above.** (Include data date and source. Some county-level data is available at <http://healthstats.publichealth.nc.gov/indicator/index/Alphabetical.html>):
  - Percentage of adults getting the recommended amount of physical activity: 52.2%
  - Percentage of adults who report they consume fruits and vegetables five or more times per day: 19%
  - Percentage of adults who are current smokers: 15%
  - Percentage of high school students who have smoked cigarettes in the past 30 days: 19%
  - Cardiovascular disease mortality rate (per 100,000 population): 199.1
  - Percentage of adults with diabetes: 8%

**RESEARCH REGARDING WHAT HAS WORKED ELSEWHERE\***

The Action Plans corresponding to Healthy NC 2020 focus areas must include at least two evidence-based strategies (EBS), or expand current EBS for new target populations if an EBS is already being used. (proven to effectively address this priority issue) that seem the most suitable for your community and/or target group. Or, if evidence-based interventions are already being used, expand the interventions into new target populations. \*Training and information are available from DPH. Contact your regional consultant about how to access them.

Evidence-Based Intervention	Source	Level of change	Intervention goal	Intended population	Implementation venue(s)	Resources required
<b>Improve access to outdoor recreational facilities</b>	Recommended Community Strategies and Measurements to Prevent Obesity in the United States". Morbidity and Mortality Weekly Report. 58, no. RR-7 (2009)	___ Individual/ interpersonal behavior ___ Organizational/ Policy X Environmental change	The Community Guide found in a comprehensive review of 108 studies that access to facilities and programs for recreation near their homes, and time spent outdoors correlated positively with increased physical activity among children and adolescents.	Children and Adolescents	Neighborhoods, communities	Funding, space,
<b>Enhance infrastructure supporting walking and biking</b>	Recommended Community Strategies and Measurements to Prevent Obesity in the United States". Morbidity and Mortality Weekly Report. 58, no. RR-7 (2009)	___ Individual/ interpersonal behavior X Organizational/ Policy X Environmental change	The Community Guide reports sufficient evidence that street-scale urban design and land use policies that support walking and biking are effective in increasing levels of physical activity.	Children, Adolescents Adults	Neighborhoods, communities	Funding, infrastructure, cost, prioritization by local government
<b>Stanford University Chronic Disease Self Management program</b>	<a href="http://patienteducation.stanford.edu/programs/cdsmp.html">http://patienteducation.stanford.edu/programs/cdsmp.html</a> <a href="http://patienteducation.stanford.edu/programs/diabetesenq.html">http://patienteducation.stanford.edu/programs/diabetesenq.html</a>	X Individual/ interpersonal behavior ___ Organizational/ Policy ___ Environmental change	Subjects who took the Program, when compared to those who did not,	Adults	Neighborhoods, community organizations, health care setting, faith-based	Trained facilitators, space, funding to attend training and

<p><b>(CDSMP) and Diabetes Self Management Program (DSMP)</b></p> <p><b>American Diabetes Association Recognized Diabetes Self Management Education</b></p>			<p>demonstrated significant improvements in exercise, cognitive symptom management, communication with physicians, self-reported general health, health distress, fatigue, disability, and social/role activities limitations. They also spent fewer days in the hospital, and there was also a trend toward fewer outpatient visits and hospitalizations. These data yield a cost to savings ratio of approximately 1:4. Many of these results persist for as long as three years.</p>			<p>purchase materials</p>
<p><b>Stanford University Chronic Pain Management Program (CPSMP)</b></p>	<p><a href="http://patienteducation.stanford.edu/programs/cpsmp.html">http://patienteducation.stanford.edu/programs/cpsmp.html</a></p>	<p>X Individual/ interpersonal behavior        ___ Organizational/ Policy        ___ Environmental change</p>	<p>The research studies found that, on average, people who have participated in the CPSMP have more vitality or energy, less pain, less dependence on others, improved mental health, are more involved in everyday activities, and are</p>	<p>Adults</p>	<p>Neighborhoods, community organizations, health care setting, faith-based</p>	<p>Trained facilitators, space, funding to attend training and purchase materials</p>

			<p>more satisfied with their lives compared to those who have not taken the program.</p> <p>Evaluation of the program found it to be beneficial for participants in terms of coping skills, education, and overall quality of life. To date, the program has been delivered to hundreds of individuals with chronic pain.</p>			
<p><b>A Matter of Balance, fall prevention program</b></p>	<p><a href="http://www.ncoa.org/improve-health/center-for-healthy-aging/a-matter-of-balance.html">http://www.ncoa.org/improve-health/center-for-healthy-aging/a-matter-of-balance.html</a></p> <p><a href="http://www.cdc.gov/pcd/issues/2012/11_0057.htm">http://www.cdc.gov/pcd/issues/2012/11_0057.htm</a></p>	<p>X Individual/ interpersonal behavior</p> <p>___ Organizational/ Policy</p> <p>___ Environmental change</p>	<p>Participants significantly changed their attitudes about falling after completing the program. Self-confidence in their ability to control falls and manage fear of falling also increased. Other studies that assessed these outcomes in controlled settings and in community-based settings found similar results. Furthermore, change in a person's attitude toward sense of control over falls can lead to</p>	<p>Adults</p>	<p>Neighborhoods, community organizations, health care setting, faith-based</p>	<p>Trained facilitators, space, funding to attend training and purchase materials</p>

			improvement in everyday function and engagement in low-impact physical activity, enhancing quality of life			
<b>Healthy Checkout Aisle Projects</b> in West Virginia Foodland Stores and Wal-Marts (Part of Change the Future West Virginia)	<p>WVa Gazette, 10/8/11; e-mails and phone conversation with Amy Berner, Mid Ohio Valley Health Department; Trust for America's Health: West Virginia and the New Prevention Fund: An Investment in the Future Health of America</p> <p>Also, see: Healthy Checkout Aisle projects in Schnucks stores: Evansville Courier and Press, 1/31/12; Family Fresh Market, New Richmond, WI, candy-free checkout aisle project New Richmond (WI) News, 10/21/11</p>	<p>___ Individual/ interpersonal behavior ___ Organizational/ Policy X Environmental change</p>	<p>Participating Wal-Mart stores stock fresh fruits, vegetables and snacks which meet the WV Standards for School Nutrition and also carry activity-based seasonal toys, and strategically placed merchandising redistribution showcases reasonably priced toys and items to promote physical activity and healthy snacks and fruits in cereal and sweetened beverage product aisles. Reported successes inside the stores show marked increases in sales of these items and a maintenance of those increased sales.</p>	<p>Children, Adolescents Adults</p>	<p>Grocery stores</p>	<p>Space, supplies such as additional shelving, cooperation from store management, staff time</p>
<b>Baltimore Healthy Corner Stores, Philadelphia Corner Store</b>	<p><a href="http://centertrt.org/content/docs/Intervention_Documents/Intervention_Templates/Baltimore_Healthy_Stores_template.pdf">http://centertrt.org/content/docs/Intervention_Documents/Intervention_Templates/Baltimore_Healthy_Stores_template.pdf</a></p> <p><a href="http://www.dccentralkitchen.org/healthycorners/">http://www.dccentralkitchen.org/healthycorners/</a></p>	<p>___ Individual/ interpersonal behavior X Organizational/ Policy X Environmental change</p>	<p>Stores work with local government and nonprofit agencies to improve selection</p>	<p>Children, Adolescents Adults</p>	<p>Convenient stores</p>	<p>Space, supplies such as additional shelving,</p>

<b>Project and DC Central Kitchen Health Corner initiatives</b>	<a href="http://thefoodtrust.org/">http://thefoodtrust.org/</a>		and marketing of healthy foods.			cooperation from store management, staff time
<b>Kids Take a Stand: Healthy Option:</b> South Shasta (CA) HEAC (Healthy Eating Active Communities) Initiative	<a href="http://www.californiaconvergence.org/sites/default/files/ShastaCounty_Wal-Mart.pdf">http://www.californiaconvergence.org/sites/default/files/ShastaCounty_Wal-Mart.pdf</a>	___ Individual/ interpersonal behavior X Organizational/ Policy X Environmental change	Based on customer surveys, pilot stands placed near checkout were so successful that pilot surveys were discontinued. Two healthy checkout aisles have been stocked with healthier than expected foods—trail mix, granola bars, dried cranberries, diced peaches, and animal crackers. Sales of these items have more than doubled, and Wal-Mart has difficulty keeping the stand stocked.	Children, Adolescents	Grocery stores	Space, supplies such as additional shelving, cooperation from store management, staff time
<b>Point of Decision Prompts</b>	<a href="http://www.thecommunityguide.org/pa/Physical-Activity.pdf">http://www.thecommunityguide.org/pa/Physical-Activity.pdf</a>	___ Individual/ interpersonal behavior ___ Organizational/ Policy X Environmental change	Signs placed in stairwells increased the percentage of people taking stairs vs. elevator/escalator by 54%. Signs are more effective among obese vs. non-obese people, esp. when signs	Adults	Workplaces, healthcare settings,	Materials such as signage

			indicate help with weight loss.			
<b>Double Up Food Bucks</b>	<a href="http://www.doubleupfoodbucks.org/">http://www.doubleupfoodbucks.org/</a>	<input type="checkbox"/> Individual/ interpersonal behavior <input checked="" type="checkbox"/> Organizational/ Policy <input type="checkbox"/> Environmental change	SNAP benefits are doubled up to \$10 at farmers markets, mobile markets and some grocery stores to increase access to healthy foods.	Adults	Farmers Markets	Funds, marketing, adequate amount of produce available
<b>Freshstart</b>	<a href="http://www.acsworkplacesolutions.com/freshstart.asp">http://www.acsworkplacesolutions.com/freshstart.asp</a>	<input checked="" type="checkbox"/> Individual/ interpersonal behavior <input type="checkbox"/> Organizational/ Policy <input type="checkbox"/> Environmental change	Freshstart incorporates the most current guidelines for tobacco cessation support into four face-to-face group support sessions. The Freshstart evidence-based approach is geared to help participants increase their motivation to quit, learn effective approaches for quitting and guide them in making a successful quit attempt.	Adults	Community organizations, healthcare settings, neighborhoods	Trained facilitators, space, funding to attend training and purchase materials
<b>QuitSmart</b>	<a href="http://www.quitsmart.com/">http://www.quitsmart.com/</a>	<input checked="" type="checkbox"/> Individual/ interpersonal behavior <input type="checkbox"/> Organizational/ Policy <input type="checkbox"/> Environmental change	QuitSmart is available in a self-help stop smoking kit and, in many communities, as a three-session quit smoking class that utilizes the kit plus personalized coaching. Quit Smart combines several powerful	Adults	Community organizations, healthcare settings, neighborhoods	Trained facilitators, space, funding to attend training and purchase materials



			treatment elements — including hypnosis, medication recommendations and a patented simulated cigarette — to produce a potent stop-smoking treatment. The program was developed by Dr. Robert Shipley, founder of the Duke Medical Center Stop Smoking Clinic.			
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(Insert rows as needed)

**WHAT INTERVENTIONS ARE ALREADY ADDRESSING THIS ISSUE IN YOUR COMMUNITY?**

Are any interventions/organizations currently addressing this issue? Yes  No  If so, please list below.

<b>Intervention</b>	<b>Lead Agency</b>	<b>Progress to Date</b> (include any process/outcome measures, barriers to implementation)
<b>American Tobacco Trail / bikes on buses</b>	Triangle Rails to Trails; City of Durham, Town of Cary, Wake County; DATA; Triangle Transit	40 miles of covered RR tracks suitable for walking, biking and other modes of self-transit; all buses can hold at least two bikes
<b>Classes, open gyms, etc.</b>	Durham Parks and Recreation, 3 YMCAs, JCC, Healing with CAARE, Inc.	Parks and Recreation: 69 parks with 1,800 acres, 23 miles of accessible trails and greenways, 188 miles of planned trails and greenways; DPR has: 11 program sites with seven gymnasiums, five dance studios, five pools, three fitness facilities and two indoor walking tracks  Healing with CAARE offers free classes including yoga and Zumba.
<b>Eat Smart, Move More Durham Map; Bike Pedestrian map</b>	Partnership for a Healthy Durham; City of Durham - Transportation	Paper copies (English and Spanish) show citizens opportunities to eat smart and move more; online version is also available
<b>Health Resource Guides (Health Care, Diabetes, Food Resource Guide)</b>	Durham Health Innovations, Partnership for a Healthy Durham	Health Care Guide / Medical Options/Transportation are complete (updated as needed), Diabetes and Food Resource guides are drafted. Update in progress.
<b>Chronic Disease / Diabetes classes</b>	Durham County Department of Public Health, Cooperative Extension, Healing with CAARE, Inc.	Classes are offered periodically; contingent upon space to hold the program series
<b>Fall Prevention classes</b>	Durham County Department of Public Health, Durham Center for Senior Life, Lyon Park, Healing with CAARE, Inc.	Matter of Balance offered at least twice
<b>Chronic Pain classes</b>	Durham County Department of Public Health; Duke Division of Community Health	Offered periodically and available more frequently upon request
<b>SEEDS produce offered at Durham Farmers' Market; gardening skills taught to children and teens</b>	SEEDS (South Eastern Efforts Developing Sustainable Spaces, Inc.) <a href="http://www.seedsnc.org/index.html">http://www.seedsnc.org/index.html</a>	SEEDS has been in Durham since 1994. They have added new programs every couple of years.
<b>Community Gardens</b>	Bountiful Backyards <a href="http://www.bountifulbackyards.com/node/6">http://www.bountifulbackyards.com/node/6</a> , Cooperative Extension, SEEDS, Parks and Recreation, Inter-Faith Food Shuttle, City of Durham Neighborhood Improvement Services	A cooperative and community based enterprise that works with individuals, neighborhoods, groups, schools, and communities to create abundant, low-maintenance and beautiful edible gardens.
<b>Corner Store Initiatives</b>	DCoDPH, Farmer Foodshare, Veggie Van Durham TRY	DCoDPH leads a corner store initiative that includes a group of community stakeholders. Activities include reducing the number of alcohol/cigarette ads, increasing onsite marketing of healthy items, providing technical assistance in increasing the inventory of healthy items including fresh produce.
<b>Increasing access to healthy foods, including fresh fruits/vegetables in Durham Public Schools; Fresh produce/fruit/ snacks in DPS; Backpack program</b>	DPS Child Nutrition Services; Food Shuttle; DPS Hub Farm; other agencies	DPS has USDA grants for fruit and vegetable snacks in 12 elementary schools. Fresh fruit delivered every Wednesday to a few schools. Backpack program is in select elementary and middle schools. DPS is working on increasing the number of fresh fruit/vegetables in menus, focusing on local, NC grown. Durham Public Schools has a teaching, or Hub, farm.

<b>Mobile Markets</b>	IFFS (Interfaith Food Shuttle), Veggie Van, Grocers on Wheels, Farmer Foodshare	Mobile markets that distribute fresh produce in areas that would otherwise lack access. Nutrition education often provided. IFFS offers free produce. Veggie Van sells at wholesale prices.
<b>Farmers Markets</b>	Durham Farmer's Market; South Durham Farmer's Market; Duke Farmers' Market	Downtown, Duke, Southpoint. Durham Farmers' Market and South Durham Farmers' Market accept and double SNAP benefits (Double Bucks). DCoDPH is assisting to advertise this program.
<b>Bull City Play Streets</b>	City of Durham Neighborhood Improvement Services	2009-10: 1 Bull City Open Streets, partnered with Parks and Recreation 2010 -11: 3 Bull City Open Streets, expanded to neighborhoods 2014 - 2015 became Bull City Play Streets; held a few events in 2014 and more planned in 2015
<b>Safe Routes to School</b>	DPS, BPAC, Regional safe routes to school office, American Tobacco Trail Watch Volunteer Group	Currently 12 schools participating in the safe routes to school program.
<b>Eat Smart, Move More, Weigh Less</b>	Durham Parks and Recreation, Durham County Department of Public Health, Cooperative Extension	Implemented
<b>Inter-local Agreements</b>	Durham Parks and Recreation and Durham Public Schools	Joint use agreement to use one another's facilities at no charge
<b>Nutrition Education in Durham school and community</b>	DINE Program, Nutrition Division, Durham County Department of Public Health	The DINE program is Durham County's SNAP Nutrition Education and Obesity Prevention program. DINE Nutritionists provide many different classes, food preparation demonstrations, and tasting opportunities related to healthy eating and physical activity. Adequate fruit and vegetable intake is a common theme in these sessions. Provides consultation to improve the nutrition and physical activity environments of childcare centers. Quarterly newsletter on healthy eating, increase physical activity, and food safety sent to households participating in the SNAP program.
<b>Duke Healthy Lifestyles Clinic; Durham Healthy Weight Collaborative; Bull City Fit</b>	Duke Healthy Lifestyles Clinic, Bull City Fit	The clinic sees 400 new Durham families every year. The focus is on childhood obesity, but they provide education for the family as a unit. Families receive monthly counseling from a physician, dietician, physical therapist and mental health provider. All of these patients are linked into the Active programs.  The Durham Healthy Weight Collaborative is a Phase II funded project sponsored through NICHQ and funded by HRSA and the RWJF. The goal is to address childhood obesity across health care, school, and public health sectors. Funding is through June 2012
<b>Durham Board of Health Smoking Rule and Cessation Classes</b>	Durham County Department of Public Health	Smoking ordinance put in effect in 2013. Signage and compliance efforts underway. Evidence-based smoking cessation classes taught throughout the community.
<b>Durham Diabetes Coalition (DDC) project, funded by Bristol Myers Squibb foundation</b>	Durham County Department of Public Health, Duke University Medical Center, Lincoln Community Health Center, University of Michigan, and many community partners.	The DDC project addresses diabetes prevention and control in Durham County with overall goals of 1) improving population-level diabetes management, health outcomes, and quality of life for diagnosed and undiagnosed adults living with Type 2 diabetes and 2) reduce disparities in diabetes management, health outcomes, and quality of live for adults living with diabetes. Multi-disciplinary staff and community partners address diabetes in Durham County through population-based and home-care interventions.

*(Insert rows as needed)*

**WHAT RELEVANT COMMUNITY STRENGTHS AND ASSETS MIGHT HELP ADDRESS THIS PRIORITY ISSUE?**

Community, neighborhood, and/or demographic group	Individual, civic group, organization, business, facility, etc. connected to this group	How this asset might help (existing program/resource, access to target population, staff/venue/financial support, evaluation, etc.)
Partnership for a Healthy Durham Obesity and Chronic Illness (OCI) committee	Child Care Service Association, City of Durham, Cooperative Extension, Duke Division of Community Health, Duke Medicine, The Duke Cancer Institute, Office of Health Equity and Disparities, Durham City Government, Durham County Government, Durham County Department of Public Health, Durham County Social Services, Durham Parks and Recreation, Durham Public Schools, Durham Public Works, Durham Social Services, East Durham Children's Initiative, i9 Sports, Inter-Faith Food Shuttle, John Avery Boys and Girls Clubs, Lincoln Community Health Center, Playworks Durham, YMCA of the Triangle	Coalition meets monthly to improve physical activity and nutrition among Durham County residents and implement action plan.
Strong city and volunteer groups promoting self-transit	BPAC, Rails to Trails, Durham Bike Co-op, Clean Energy Durham, Safe Kids Durham, Bike Durham, American Tobacco Trail Watch Volunteer Group, Durham Open Space and Trails Commission (DOST), Recreation Advisory Commission	Holds bike repair workshops, events that promote biking and walking, labeling bike paths, increasing driver awareness of cyclists
City and volunteer groups promoting wellness and service	Partnership for a Healthy Durham OCI Committee, Junior League, Lion's Club, Girls on the Run, Volunteer Center	Elbow grease to put down the Healthy Mile markers, volunteers to man the Bull City Play Streets and Fitness Day events
Durham Public Schools	Music departments, athletic departments, Student Health Advisory Council (both adult and student); Hub Farm, Wellness Councils, Bike Durham, Student Nutrition Services	Runs a teaching farm to teach about nutrition, environmental stewardship, farming, and increase physical activity. Working to improve school breakfast, lunch and snack nutrition standards, increase fruit and vegetable access/consumption and increase access use of local foods. Coordinate wellness programs for students and staff.
Groups focused on policy change	City and County Government; Board of Education; Board of Health; Durham Farm and Food Network (food policy council) Durham CAN, Farmland Advisory Board, BPAC, Southern Coalition for Social Justice, Recreation Advisory Commission	Expertise in policy; ability to make policy changes that promote health; access to funding

*(Insert rows as needed)*

INTERVENTIONS: SETTING, & TIMEFRAME	LEVEL OF INTERVENTION CHANGE	COMMUNITY PARTNERS' Roles and Responsibilities	PLAN HOW YOU WILL EVALUATE EFFECTIVENESS
<p><b>Intervention:</b> Increasing access to healthy foods including fruits, vegetables, and locally produced food for lower income populations through initiatives such as but not limited to:</p> <ol style="list-style-type: none"> <li>1. Support and expand Durham's Double Bucks Program.</li> <li>2. Support mobile markets and stores that sell produce in neighborhoods that would otherwise lack access through promotion, grant writing, technical assistance, etc.</li> </ol> <p>Intervention:  <input type="checkbox"/> new <input checked="" type="checkbox"/> ongoing <input type="checkbox"/> completed</p> <p>Setting: 1. Convenience stores  2. Grocery stores 3. Farmers Markets 4. Mobile markets</p> <p>Target population: SNAP recipients and other low income Durham residents. Grocers on Wheels, a mobile market that OCI, is targeting a new population for Double Bucks, seniors living in community housing sites.</p> <p>Start Date – End Date (mm/yy): (07/15-ongoing)</p> <p>Targets health disparities: X Y <input type="checkbox"/> N</p>	<p>X Individual/ interpersonal behavior</p> <p><input type="checkbox"/> Organizational/ Policy</p> <p>X Environmental change</p> <p>*Note: This intervention fits both individual and environmental changes, but is not duplicated in these sections.</p>	<p>Lead Agency: Durham County Department of Public Health (DCODPH)  Role: Coordination/ Organization</p> <p>Target population representative:  Role:</p> <p><b>Partner agencies:</b>  Partnership for a Healthy Durham, OCI Committee and Communication Committee will assist with outreach, program evaluation, grant writing, kick off events, communication, promotion and marketing efforts, nutrition education, and technical assistance.</p> <p>Farmers markets will double SNAP benefits up to \$10 and promote this Double Bucks Program.</p> <p>Mobile markets will sell healthy products including fruits and vegetables in neighborhoods that would otherwise lack access and may work towards doubling SNAP benefits up to \$10 when used to purchase healthy items.</p> <p>Convenience/grocery stores may become partners if they decide to run Double Bucks Programs. They would be responsible for data collection, reports, and providing store space for advertising/marketing/nutrition education, and for training staff on program components.</p> <p>Include how you're marketing the intervention:</p>	<ol style="list-style-type: none"> <li>1. <b>Expected outcomes: Explain how this will help reach the local community objective</b> (what evidence do you have that this intervention will get you there?) <ol style="list-style-type: none"> <li>a. Increase in marketing and programming should translate into an increase in sales of healthy foods. Increase in sale of healthy food should translate into an increase in consumption of healthy food.</li> </ol> </li> <li>2. <b>Anticipated barriers:</b> Any potential cultural, political, financial or administrative barriers? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N  If yes, explain how intervention will be adapted:  Increased access to healthy foods does not always equate to increased consumption if the target community does not accept the food, want the food or know how to cook the food/know the importance of eating the food. DCoDPH and other partners such as Veggie Van and the Cooperative Extension have been working to educate and increase efficacy around cooking and healthy eating. Recipes used are adapted to best reach the target population whenever possible.</li> <li>3. <b>List anticipated project staff:</b> Leah Williams (DCoDPH), Kelly Warnock (DCoDPH), Jenny Elander (Durham Farmers' Market), Demetrius Hunter (Grocers on Wheels), Casey Horvitz (Veggie Van)</li> <li>4. <b>Does project staff need additional training?</b> <input type="checkbox"/> Y <input checked="" type="checkbox"/> X <input type="checkbox"/> N  If yes, list training plan:</li> <li>5. <b>Quantify what you will do</b> (# classes &amp; participants, policy change, built environment change, etc.) <ol style="list-style-type: none"> <li>a. Project staff will assist with the expansion of double bucks to at least one more site in Durham County, which can include a mobile market, farm stand, farmers' market, grocery store or convenience store.</li> <li>b. Project staff will assist with identifying grants, grant writing and local advocacy work to ensure Durham's Double Bucks maintains funding. Identify and write at least one grant annually to fund Double Bucks.</li> <li>c. Project staff and the Partnership for a Healthy</li> </ol> </li> </ol>

		<p>Store signage, earned media, online advertising through social media like Facebook, flyers, posters, internal communication and word of mouth through partner organizations.</p>	<p>Durham Communications committee will assist with marketing and communication to ensure Durham's Double Bucks, mobile markets and other healthy food access programs are well utilized. Efforts will be evaluated through surveys to determine where/how new customers heard about the program.</p> <p>d. Project staff will assist the farmers' markets with creating and executing a thorough evaluation plan for the Double Bucks program to determine the effectiveness of the program's marketing campaigns and if the effects on participants intake of fruits and vegetables and shopping behaviors.</p> <p><b>6. List how agency will monitor intervention activities and feedback from participants/stakeholders</b> (is intervention being delivered as intended? How are staff receiving feedback throughout the intervention?)  Intervention activities will be monitored annually through at least one method- participant surveys, interviews, customer counts and repeat customer counts. Feedback will be used to better tailor the program to the target population.</p> <p><b>7. Evaluation:</b>  Are you using an existing evaluation? <input checked="" type="checkbox"/>Y <input type="checkbox"/>N  If no, please provide plan for evaluating intervention impact:</p> <p>We will adapt the Fair Food Network evaluation to meet the needs of our target population and program constraints.</p>
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<p><b>Intervention:</b> Promote and market partner agency's workshops and programs that aim to reduce and manage chronic disease and obesity.</p> <p>Intervention:  <input type="checkbox"/> new <input checked="" type="checkbox"/> ongoing <input type="checkbox"/> completed</p> <p>Setting: Durham</p> <p>Target population: Adult residents of Durham that are in the contemplating, preparing to, or currently acting on changing health behaviors. Center of Balance is reaching a new population for OCI, specifically targeting seniors in Durham County.</p> <p>Start Date – End Date (mm/yy): (07/15-ongoing)</p> <p>Targets health disparities: X Y <input type="checkbox"/> N</p>	<p>X Individual/ interpersonal behavior</p> <p><input type="checkbox"/> Organizational/ Policy</p> <p><input type="checkbox"/> Environmental change</p>	<p>Lead Agency: Will vary and coincide with which partner agency is providing the workshop or program.</p> <p>Role: Coordination/ Organization</p> <p>Target population representative:</p> <p>Role: _____</p> <p><b>Partner agencies:</b> The Partnership for a Healthy Durham OCI and Communications committees will assist local agencies with their communication strategies. OCI will also provide technical assistance with identifying populations of need/locations for workshops.</p> <p>The Durham County Department of Public Health, NC Cooperative Extension, YMCA, Durham Parks and Recreation, Lincoln Community Health Clinic, Healing with CAARE, El Centro Hispano, Durham Health Innovations, Duke Health System, Duke University and other organizations throughout will provide low cost or free workshops and programming aimed at reducing obesity and chronic disease rates in Durham County. Workshops include but are not limited to chronic disease self-management classes, diabetes self-management classes, smoking cessation classes, Eat Smart Move More classes, grocery store tours and cooking demonstrations</p> <p>Include how you're marketing the intervention:</p> <p>Flyers, websites, local media, Facebook, Twitter, emails, internal communication, posters,</p>	<ol style="list-style-type: none"> <li>1. <b>Expected outcomes: Explain how this will help reach the local community objective</b> (what evidence do you have that this intervention will get you there?)       <ol style="list-style-type: none"> <li>a. Increased visibility and awareness of health promotion efforts and activities</li> <li>b. Increased participation on the part of Durham residents in healthy eating and exercise activities and initiatives.</li> <li>c. Increased collaboration on the part of Durham organizations</li> </ol> </li> <li>2. <b>Anticipated barriers:</b> Any potential cultural, political, financial or administrative barriers? <input type="checkbox"/> Y <input checked="" type="checkbox"/> X <input type="checkbox"/> N If yes, explain how intervention will be adapted:</li> <li>3. <b>List anticipated project staff:</b> Willa Robinson Allen, Tyrone Hall, Michael Scott, Chasity Newkirk and other nutrition and health education staff at DCoDPH. YMCA staff, Parks and Recreation staff and Cooperative Extension staff.</li> <li>4. <b>Does project staff need additional training?</b> <input type="checkbox"/> Y <input checked="" type="checkbox"/> X <input type="checkbox"/> N If yes, list training plan:</li> <li>5. <b>Quantify what you will do</b> (# classes &amp; participants, policy change, built environment change, etc.)       <ol style="list-style-type: none"> <li>a. Project staff will enlist five collaborations or committees with access to networks of Durham citizens to promote healthy eating and exercise efforts, enlist participation, and disseminate information.</li> <li>b. Project staff will develop an evaluation plan to measure increased resource access and participation.</li> </ol> </li> <li>6. <b>List how agency will monitor intervention activities and feedback from participants/stakeholders</b> (is intervention being delivered as intended? How are staff receiving feedback throughout the intervention?) We will gauge opinion through participant surveys and feedback through conversations with partners and participants.</li> </ol>
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		Communications committee	<p><b>7. Evaluation:</b>  Are you using an existing evaluation? <input checked="" type="checkbox"/>_X_ <input type="checkbox"/>_Y_ <input type="checkbox"/>_N_</p> <p>If no, please provide plan for evaluating intervention impact:</p> <p>Many healthy lifestyle, smoking cessation and chronic illness disease management curriculums have evaluation components/surveys. When an existing evaluation is not available, one will be created based on existing models.</p>
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<p><b>Intervention:</b> Increase access to physical activity through policy, environmental and system changes that increase the walkability of neighborhoods such as but not limited to:</p> <ol style="list-style-type: none"> <li>1. Healthy Mile Walking trails/walk your city signage</li> <li>2. Promoting bike and pedestrian policies such as complete streets throughout Durham County</li> </ol> <p>Intervention:  <input type="checkbox"/> new <input checked="" type="checkbox"/> ongoing <input type="checkbox"/> completed</p> <p>Setting: Durham Park and Recreation facilities, community centers, neighborhoods</p> <p>Target population: Durham residents with a focus on low income neighborhoods and neighborhoods that currently lack access/opportunities for physical activity. A new aim is to work with the business community on at least one new Healthy Mile Trail/Walk Your City sign routes. The business community would be a new population.</p> <p>Start Date – End Date (mm/yy): (07/15-ongoing)</p> <p>Targets health disparities: X Y <input type="checkbox"/> N</p>	<p>X Individual/ interpersonal behavior</p> <p><input type="checkbox"/> Organizational/ Policy</p> <p>X Environmental change</p>	<p>Lead Agency: Durham County Department of Public Health (DCODPH)/ OCI Committee  Role: Coordination/ Organization</p> <p>Target population representative:</p> <p>Walking group leaders at East Durham Children’s Initiative and the Historic Stokesdale Community</p> <p>Role: Provide feedback on program and community needs, bridge to the community, help maintain the Healthy Mile Trail</p> <p><b>Partner agencies:</b>  County Commissioners, Durham Parks and Recreation, NC Department of Transportation, Safe Routes to School regional office, Bike Durham, Bike Co-op, Durham Open Space and Trails Commission, Durham City/County Planning Department</p> <p>Include how you’re marketing the intervention:</p> <p>Brochure: flyers, posters, Partnership website, short videos on the Healthy Mile Trails, word of mouth through partner agencies, working with lay health advisors and community leaders,</p>	<ol style="list-style-type: none"> <li>1. <b>Expected outcomes: Explain how this will help reach the local community objective</b> (what evidence do you have that this intervention will get you there?) <ol style="list-style-type: none"> <li>a. Create 6 new healthy mile trails/walk your city sign routes.</li> <li>b. Durham County will adopt a complete streets policy.</li> <li>c. Durham residents’ access to and levels of physical activity will increase.</li> <li>d. Aid in education of residents on pedestrian/bicycle/automobile issues to increase safety in preparation for a Complete Streets policy.</li> </ol> </li> <li>2. <b>Anticipated barriers:</b> Any potential cultural, political, financial or administrative barriers? <input type="checkbox"/> X <input type="checkbox"/> Y <input type="checkbox"/> N  If yes, explain how intervention will be adapted:  Funding will be sought for Healthy Mile Trail signage. Project staff will work with the community to advocate for the Complete Streets policy.</li> <li>3. <b>List anticipated project staff:</b> Jen McDuffie (Durham Bicycle and Pedestrian Advisory Council), Perry Whitted (resident), residents in target neighborhoods, Annette Smith (Durham Parks and Recreation)</li> <li>4. <b>Does project staff need additional training?</b> <input type="checkbox"/> Y <input checked="" type="checkbox"/> X <input type="checkbox"/> N  If yes, list training plan:</li> <li>5. <b>Quantify what you will do</b> (# classes &amp; participants, policy change, built environment change, etc.) <ol style="list-style-type: none"> <li>a. Project staff will create and promote two Healthy Mile Trails or Walk Your City sign routes per year.</li> <li>b. Project staff will create and implement an evaluation plan. Use feedback to improve program and marketing/promotion/programming around the trails/walks.</li> <li>c. Support partner agency’s Complete Streets initiatives by writing letters of support and help with promotion and marketing. Distribute Watch for Me, NC and other materials throughout Durham at community events.</li> </ol> </li> </ol>
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*(Insert rows as needed)*