

STATE OF THE COUNTY HEALTH REPORT

DURHAM COUNTY 2024



Public Health



Partnership for a
Healthy Durham



DukeHealth

Priorities and Demographics

This report is an update on data from the 2023 Community Health Assessment (CHA) and the county's top five health priorities.

1. Affordable Housing
2. Access to Healthcare and Health Insurance
3. Community Safety and Wellbeing
4. Mental Health
5. Physical Activity, Nutrition, and Food Access

Its purpose is to provide the community with information on the health of its residents and to assist with grant writing, local policies, budgets, and programs.

1,146 People per square mile



Photo courtesy of Discover Durham

Durham County Population by Age Groups, 2019-2023

	Age 0-4	Age 5-17	Age 18-24	Age 25-34	Age 35-44	Age 45-54	Age 55-64	Age 65+
Durham County, NC	19.81K	46.54K	34.65K	59.2K	47.04K	38.92K	37K	46.24K

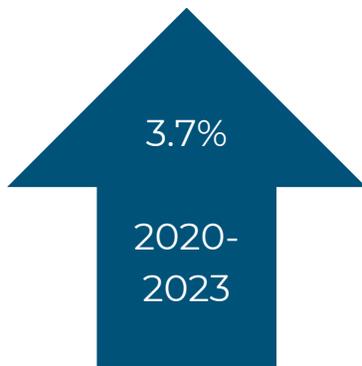
Source: NC Data Portal • Created with Datawrapper

Durham County Population by Race and Ethnicity, 2019-2023

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Report Area	White	Black	Asian	American Indian or Alaska Native	Native Hawaiian or Pacific Islander	Some Other Race	Multiple Races	Hispanic or Latino
Durham County, NC	45.5%	33.1%	5.2%	0.5%	0.1%	7.1%	8.6%	15.3%
North Carolina	63.3%	20.6%	3.2%	1.1%	0.1%	4.8%	7.1%	11.0%
United States	63.4%	12.4%	5.8%	0.9%	0.2%	6.6%		19.0%

Source: NC Data Portal • Created with Datawrapper



329,405

Total Population



Photo courtesy of Discover Durham

Durham, known as the “Bull City” and “City of Medicine” is recognized for its history, arts, restaurants, parks and trails, education, and healthcare. Rich in culture, diversity, and civic engagement, Durham continues to honor its history while it embraces innovation.

Goals and Successes

Durham County Government **Healthy and Inclusive Community**: The efforts highlighted in this report align with the Durham County Government **Strategic Goal**: Supporting equitable and inclusive health and well-being for all.

Goal HI 2: Increase equitable outcomes through County operations and services

Goal HI 3: Expand and provide services that support residents across their entire lifespan

Objectives 2a: collaborate with community stakeholders to increase equitable experiences, including enhancement of language access and County accessibility
3a: Partner with community stakeholders to raise awareness of available services

Emerging Issues

Durham residents vote to improve transportation infrastructure through bond referendums.

In November 2024, Durham residents voted to approve two bonds to improve streets, sidewalks, and parks. The Parks and Recreation bond, which received 72% of approval votes, and Streets and Sidewalks bond, which received 75% of votes, total in up to \$200 million. These funds will be used to improve the city's transportation network, enhance various infrastructure projects, and develop public spaces.

The total number of unsheltered people in Durham has doubled since 2020.

The total number of unsheltered people in Durham, meaning those sleeping in cars, on the street, or in the woods, is up by 123% since 2020. The unsheltered count increased by another 9% from 2023 to 2024, with 158 unsheltered people during the Point in Time Count. The number of homeless children increased by 58% and families increased by 31%. Homelessness disproportionately impacts Black or African Americans in Durham due to systemic issues that cause poverty, barriers to resources, and limited opportunities to obtain generational wealth. During Durham's Point in Time Count, 285 of the 415 people were Black or African American, 89 were white, and 30 were Hispanic or Latine.

New Initiatives

Durham takes action to reduce drug overdoses and substance misuse.

Durham County is receiving \$11.6 million in Opioid Resettlement funds over an 18-year period. Durham County hosted nearly 70 community members for a discussion on the Opioid Settlement funds in June of 2024. The top three strategies identified were evidence-based addiction treatment, evidence-based recovery support services, and recovery support housing. Durham County Department of Public Health installed two Naloxone vending machines. They provide Naloxone, an over-the-counter drug used to reverse overdoses, free of charge. The machines are at Durham County Detention Center and Durham County Human Services Building.

Publix grocery store is coming to North Durham.

A Publix grocery store, along with shops, restaurants, townhomes, a park, and walking paths are being built at the intersection of Guess and Latta roads. A developer said that the goal is to give neighbors in the community what they asked for which includes “strong pedestrian connections” and more of a retail village feel than a strip center.

Duke Health is to use \$50 million gift to transform cancer treatment.

Duke Health received an anonymous donation of \$50 million, the largest donation in its history. The money will be used to build a cancer treatment facility that will use proton beam therapy. Proton therapy is “a more precise form of radiation that minimizes side effects compared to conventional methods”. It reduces the amount of radiation to normal tissue surrounding the cancerous cells. The Duke Proton Center is expected to open by 2029 and treat 800 patients each year.

Life Expectancy, Leading Causes of Death, and Infant Mortality

Life Expectancy

Life expectancy has decreased across all of the demographics available over the past decade. The Other Non-Hispanic population and Hispanic population have the highest life expectancy with 86.6 and 84.5 years respectively. Life expectancy decreased most in the Hispanic and American-Indian/Alaskan populations by 5.8 and 5.2 years respectively between 2014 and 2022.

Life Expectancy by Sex 2020-2022, Durham County and North Carolina

Report Area	Life Expectancy for Male	Life Expectancy for Female	Average Life Expectancy
Durham County, NC	76.5	81.7	79.2
North Carolina	73.3	79.1	76.2

Table: Durham County Public Health • Source: NC Data Portal • Created with Datawrapper

Life Expectancy by Race and Ethnicity, North Carolina

Race	Year (2018-2020)	Year (2019-2021)	Year (2019-2022)
Hispanic	86.9	85.1	84.5
Non-Hispanic American-Indian/Alaska	73.9	72.4	70.5
Non-Hispanic Black	74.4	73.0	72.2
Non-Hispanic White	77.9	76.9	76.4
Other Non-Hispanic	88.2	87.1	86.6

Table: Durham County Public Health • Source: NC Data Portal • Created with Datawrapper

Leading Causes of Death

Cancer remains the leading cause of death among Durham residents. Following cancer is diseases of the heart, accidents, cerebrovascular diseases (stroke, brain aneurysm), and Alzheimer’s disease. When looking specifically at Black or African Americans and men, diabetes is the fifth leading cause of death, differing from the fifth leading cause for the population overall, Alzheimer’s disease.

Infant Mortality

Infant Mortality in Durham County, 2018-2022

	Durham Total deaths	Durham Total rate (per 100,000)	NC Total Rate (per 100,000)
Resident Infant Death Rates	123.0	6.0	6.8
Infant death rates Black or African America	69.0	11.4	12.6
Infant death rates white	22.0	2.8	4.8
Infant death rates Hispanic or Latino	22.0	4.6	5.3

Table: Durham County Public Health • Source: NCDHHS • Created with Datawrapper

Infant mortality is the death of a baby before they reach one year of life. This rate is important in measuring the overall health of communities. The infant mortality rate remained steady in 2018-2022 compared to 2017-2021 in Durham County. There are still significantly higher infant mortality rates in Black or African American babies than other groups. Systemic issues related to discrimination, racism, and barriers to accessing healthcare and other resources contribute to this inequity.

Changes in Data: Affordable Housing

Healthy NC 2030 Indicator: Severe Housing Problem

Desired Result: Improve Housing Quality

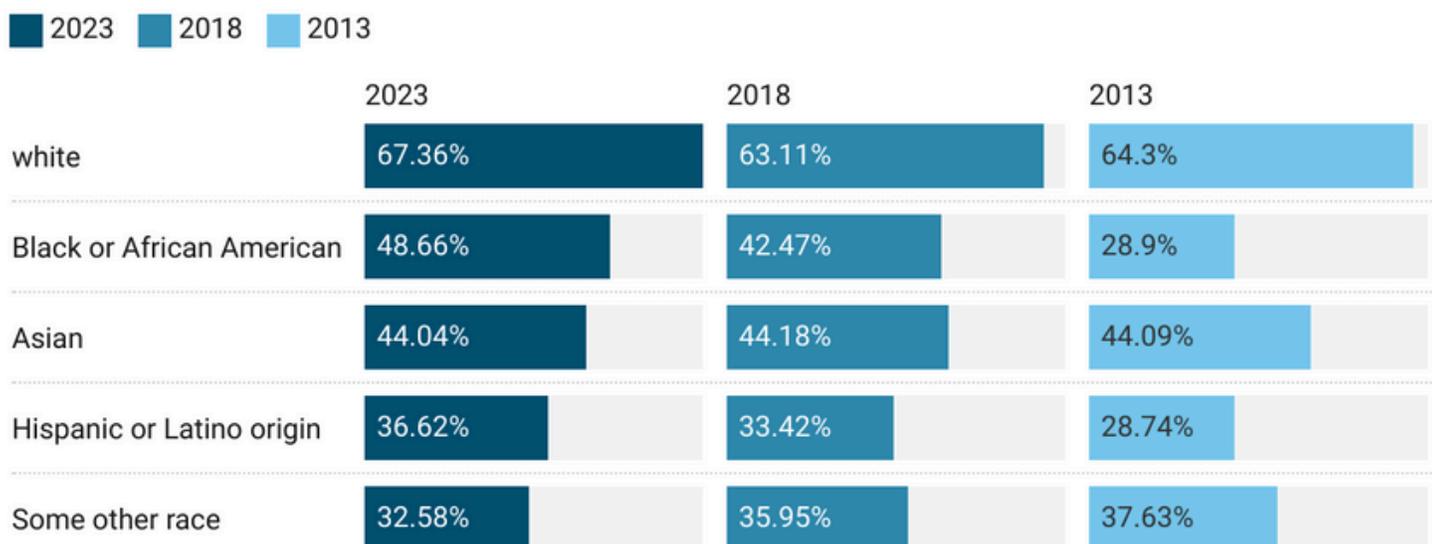
2030 Goal: 14%

All people in Durham County, particularly those who are experiencing disadvantage due to rising costs and lack of high quality affordable housing, live in safe, accessible housing.

Affordable housing is again the top health issue in Durham County, the same as what was identified in the 2017 Community Health Assessment process. Housing is the foundation of a healthy life. Research shows that homelessness is associated with increased mortality and shortened lifespan.

While there are still significant disparities, the first chart below shows a nearly 20% increase in Black or African American home ownership, about an 8% increase in Hispanic or Latine home ownership, and a nearly 3% increase for white home ownership over the last decade.

Owner Occupied Housing Units in Durham County

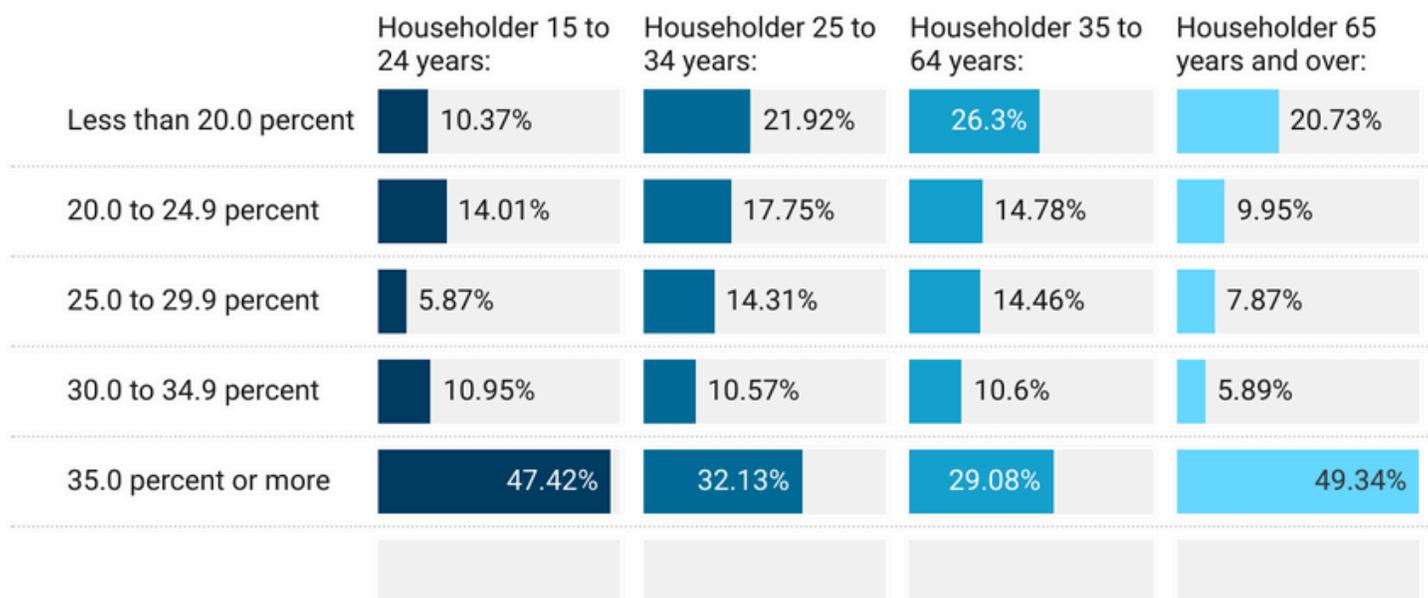


5-year estimates used in the above graph, Native American/ American Indians, two or more races and Alaskan Native data has been suppressed due to low counts.

Chart: Durham County Department of Public Health • Source: U.S. Census Bureau • Created with Datawrapper

The second chart below shows that a large portion of Durham residents are housing cost burdened with about 18% of renters considered housing cost burdened while about 45% of homeowners are considered housing cost burdened (>30% of income). Householders over the age of 65 are disproportionately impacted by severe housing cost burden (>35% of income) at 49% compared to 29% of householders 25 to 34 years old. Housing cost burden can lead to increased levels of stress and emotional strain. When a significant portion of income is used for housing costs, it is more difficult to afford other necessities such as utilities and bills, doctors visits, and transportation.

% Of Income Renters used on Housing by Age



Percent of Income

Chart: Durham County Public Health • Source: ACS • Created with Datawrapper

Why are there inequities?

Populations of color have experienced systemic racism, presenting major barriers to obtaining home ownership. Historic policies such as “redlining”, a federal mortgage policy that guided federal mortgage lending decisions, of the 1930’s and into the 1960’s, continue to impact disparities in home ownership which contributes to gaps in generational wealth and quality of housing. Older adults often experience a decrease in income after retirement, making it more difficult to keep up with rising housing costs.

Progress Made

The Partnership for a Healthy Durham Health and Housing committee has strategically worked to increase the understanding of the intersection between health and housing. In 2024, the committee hosted a series of multisectoral meetings to address the state of health and housing in Durham. The group identified a comprehensive list of organizations and natural community resources that aid in the health of a community and housing. They have created a resource bank of organizations that provide services for healthy housing conditions, share funding opportunities for work supporting healthy housing conditions, connect the organizations doing complimentary work, and are developing an advocacy agenda to improve relationships between landlords and tenants, specifically focusing on people with disabilities.

The City of Durham Neighborhood Improvement Services completed 7,380 housing inspections and performed 10 neighborhood preservation remediations. The office also completed 205 community building/beautification projects in fiscal year 2024 (July 1, 2023-June 30, 2024). “The Durham Down Payment Assistance Program relaunched in July 2023. As part of this relaunch, eligible homebuyers may receive up to \$80,000 for down payment and closing costs assistance. Funds will be provided as a forgivable loan with a 0% interest rate and a 15-year term. Loans will be made on a first-come, first-served basis until \$5.7 million in available program funding is depleted”

Changes in Data: Access to Healthcare and Health Insurance

Healthy NC 2030 Indicator: Uninsured

Desired Result: Decreased Uninsured Population 2030 Goal: 8%

Healthy NC 2030 Indicator: Primary Care Workforce

Desired Result: Increase the primary care workforce

2030 Goal: 100 counties 1:1,500

Uninsured and underinsured people in Durham County have access to quality healthcare coverage and have an established primary care home equipped to address health-related social needs.

Access to healthcare and health insurance was identified as the second highest health priority again in the 2023 Community Health Assessment process. Accessing quality healthcare is imperative to health, preventing and managing disease, and achieving health equity. Health care is most often obtained by health insurance, leaving those without health insurance most vulnerable to negative health outcomes and making preventative care less accessible. Preventive care and treatment are far less expensive and less harmful than emergency care.

In 2022, 10.59% of the population under the age of 65 were uninsured in Durham County, a decrease from 14% in 2019. As a result of Medicaid expansion, nearly 16,000 Durham County residents have enrolled in Medicaid since November of 2023. There are major disparities in insured populations particularly with Hispanic and Latine residents compared to Black or African American, Asian, and white populations in North Carolina (NC). As seen in the chart below, about 27% of the Hispanic or Latine population is uninsured while about 8% of the white population is uninsured. Durham's ratio of primary care providers to residents remains better than the state average with 1:427 for Durham County compared to 1:976 for NC in 2022.

Uninsured Population Under Age 65 by Race and Ethnicity, 2022

■ North Carolina ■ United States

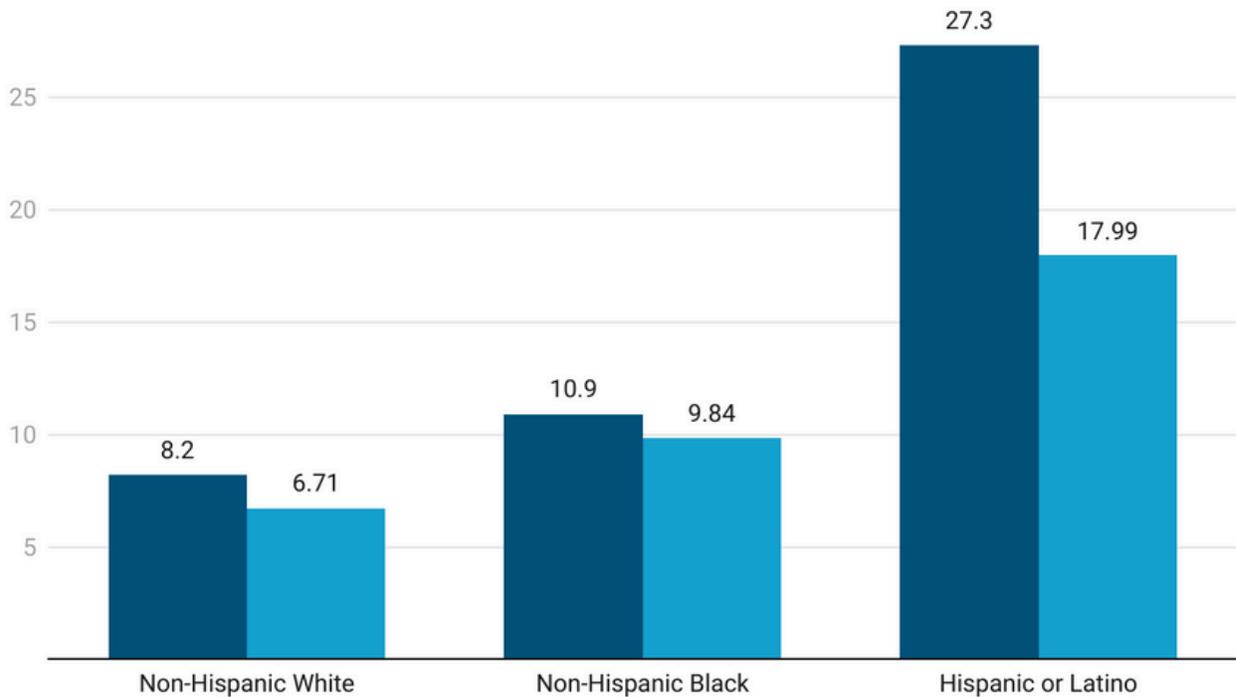


Chart: Durham County Public Health • Source: US Census Bureau, Small Area Health Insurance Estimates. 2022. Show more details • Created with Datawrapper

Insured Population, 2022

	Total Population (For Whom Insurance Status is Determined)	Population with Health Insurance	Percentage with Private Insurance	Percentage with Public Insurance
Durham County, NC	319,748	283,203	79.8%	31.52%
North Carolina	10,256,318	9,178,860	75.3%	39.06%
United States	326,147,510	297,832,418	74.0%	39.28%

Table: Durham County Public Health • Source: NC Data Portal • Created with Datawrapper

Why are there inequities?

The group most impacted by disparities in accessing health care is Comunidad Latina. Lack of services being offered and little information about healthcare and health insurance being available in Spanish, immigration status, and having jobs that do not provide health insurance are major barriers. People of color are more likely to be paid lower wages than white workers, leading to issues affording the cost of healthcare. Further, lower waged jobs are less likely to offer employer-based insurance which is the largest source of insurance in North Carolina.

Progress Made

The Partnership Access to Care committee developed new Community Health Improvement Plans with the goals of increasing healthcare and health insurance access, advocating for a community health worker (CHW) workforce that has benefits and fair wages, and improving healthcare and health insurance literacy. They developed a new brochure for uninsured and underinsured Durham County residents, intentionally using more inclusive, plain language.

The Lincoln Community Health Center serves about 10% of Durham's population, with about 50% of their patients being uninsured. Durham County Department of Public Health provides many healthcare services such as the Tooth Ferry Mobile provided by the Dental Unit, Nutrition Clinic, Women's Health services, Sexually Transmitted Infection testing, and pharmacy.

Changes in Data: Community Safety and Wellbeing

Healthy NC 2030 Indicator: Adverse Childhood Experiences

Desired Result: Childhood Wellbeing 2030 Goal: 18%

Community Safety and Wellbeing was identified as the third top health priority in the 2023 Community Health Assessment process. This is a new health priority, replacing poverty. While violent crime is an aspect of Community Safety and Wellbeing, it also intersects with other health issues such as traffic and pedestrian safety and creating a community designed for mental well-being and connection. Direct and indirect experiences of violence are associated with negative health outcomes, can impact people’s perception of their communities, and compromise their overall sense of safety.

When compared to similar counties in NC, Durham’s crime index is the second highest, following Forsyth County. Of the crimes listed below, robbery, murder, and burglary are the most prevalent forms of crime in Durham. Social vulnerability refers to the factors that adversely impact communities that encounter threats and other community-level stressors such as poverty and lack of transportation. Durham’s social vulnerability index score is 0.69, higher than the average in NC and across the US.

2024 Crime Index for Durham and its comparable counties

The Total Crime Index provides an assessment of the relative risk of seven major crime types: murder, rape, robbery, assault, burglary, larceny, and motor vehicle theft. It is modeled using data from the FBI Uniform Crime Report and demographic data from the Census and AGS

County Name	Total 2024 Crime Index	2024 Assault Index	2024 Property Crime Index	2024 Robbery Index	2024 Motor Vehicle Theft Index	2024 Burglary Index	2024 Rape Index	2024 Personal Crime Index	2024 Larceny Index	2024 Murder Index
Buncombe	126	101	131	75	93	160	89	95	132	87
Durham	155	160	152	230	108	175	104	169	154	197
Forsyth	158	259	149	94	101	174	82	205	152	168
Guilford	142	167	140	160	110	165	67	156	139	205
Mecklenburg	153	168	152	183	116	139	68	161	160	146
New Hanover	123	103	126	94	76	176	106	102	124	126
Union	78	69	80	52	57	98	82	67	80	71

See Crime Indexes for more information.

Table: Durham County Population Health • Source: ESRI • Created with Datawrapper

Social Vulnerability Index, Durham, NC compared to NC and US, 2022

The degree to which a community exhibits certain social conditions, including high poverty, low percentage of vehicle access, or crowded households, may affect that community's ability to prevent human suffering and financial loss in the event of disaster. These factors describe a community's social vulnerability.

Report Area	Socioeconomic Theme Score	Household Composition Theme Score	People of Color Status Theme Score	Housing & Transportation Theme Score	Social Vulnerability Index Score
Durham County, NC	0.59	0.24	0.91	0.87	0.69
North Carolina	0.60	0.55	0.73	0.59	0.63
United States	0.54	0.47	0.72	0.63	0.58

Table: Durham County Public Health • Source: NC Data Portal • Created with Datawrapper

Progress Made

Durham County introduced a guaranteed income program, DCo Thrives, that provides cash assistance to low-income families in Durham. The program will provide payments to 125 individuals with a child under the age of 18. Durham's Early Childhood Action Plan recommended a Guaranteed Income pilot to support Durham's children and their families. The goal is "to ensure families with young children have economic security and opportunities for long-term economic prosperity". Participants will be randomly selected from applications submitted through Durham Children's Initiative.

Partners Against Crime (PAC) promotes collaboration between Durham residents, police officers, and government officials to identify sustainable solutions to issues with crime and quality of life. Each of Durham's five districts has its own PAC, comprised of volunteers. Examples of their work includes providing translation equipment so Spanish speaking residents can attend meetings, purchasing digital speed trailers to help enforce speed limits in neighborhoods, and installing motion detector lights for aging residents.

Changes in Data: Mental Health

Healthy NC Indicator: Suicide Rate

Desired Result: Improve access and treatment of mental health needs

Target: 11.1 per 100,000

All people in Durham County have access to quality, culturally affirming, and affordable mental health services and social emotional support.

Mental health was identified as the fourth top health priority again in the 2023 Community Health Assessment process. According to World Health Organization, “mental health is a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community”. There are individual, relationship, community, and societal risk and protective factors that contribute to mental health. The availability of mental health providers is a protective factor in the community although there are barriers to accessing services.

As seen in the first chart below, the rate of mental health providers per 100,000 people in Durham is more than double the rate of North Carolina and nationally. The graph below shows deaths by suicide or drug/alcohol poisoning. Sadly, 703 Durham County residents died by deaths of despair 2018-2022. There is a decline from 11.9 per 100,000 in 2021 to 7.9 in 2022. While deaths of despair impact all communities, American Indian or Alaska Native and white residents are most impacted in Durham.

Deaths of Despair, Crude Rate (Per 100,000) by Race and Ethnicity 2018-2022

■ Durham County, NC
 ■ North Carolina
 ■ United States

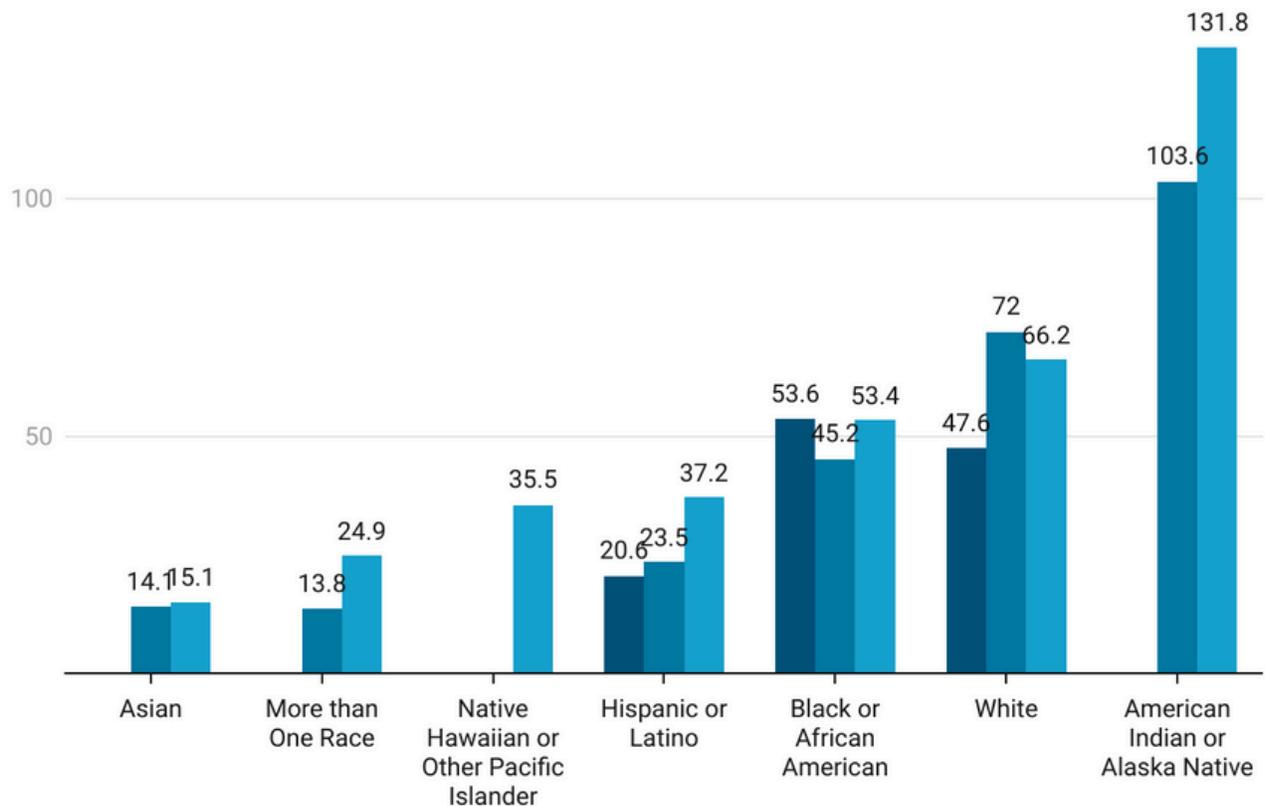


Chart: Durham County Public Health • Source: NC Data Portal • Created with Datawrapper

Access to Mental Health Providers, 2024

Report Area	Total Population (2020)	Number of Facilities	Number of Providers	Providers, Rate per 100,000 Population
Durham County, NC	324,833	286	2,489	766
North Carolina	10,439,388	5	32,100	307
United States	334,735,155	141	1,045,976	312

Table: Durham County Public Health • Source: NC Data Portal • Created with Datawrapper

Why are there inequities?

Much stigma around mental health and substance misuse still exists. Factors such as income inequality, lack of affordable housing, weathering due to racism and discrimination, and complex adverse childhood experiences contribute to inequities in mental health. Destigmatizing mental health treatment, supporting harm reduction strategies, and improving access and reducing barriers to proven treatment are strategies that can help reduce overdose.

Progress Made

The Partnership Mental Health committee developed community health improvement plans for 2024-2027. The goals include increasing access points for mental health supports and social-emotional support, reducing the stigma that exists around behavioral health, advocating for policy changes, and creating tools for navigating the current mental health system. Ninety-nine Durham County residents received Community Resiliency Model (CRM) training in 2024. The committee is now planning a mental health training series that will include CRM, Applied Suicide Intervention Skills Training, and Mental Health First Aid. Committee members are also updating the mental health resource brochure which will be available in English and Spanish digitally and in print.

The Holistic Empathy Assistance Response Team (HEART) provided 8,107 community team responses, 1,536 crisis call diversions, 2,546 co-responses with law enforcement, and 1,499 care navigation team responses. HEART responders reported feeling safe at the encounters. Examples of situations responded to include trespassing, mental health crisis, suicide threat, domestic violence and welfare checks.

Between November 2023 and October 2024, the 988 suicide prevention hotline received 2,452 calls from Durham County at a rate of 73.2 per 10,000 residents. In NC, 121,795 contacts were made with a 98% answer rate. Forty-five percent of contacts were from repeat callers and about 7% were referred to mobile crisis. The top reasons for people contacting 988 were interpersonal/family issues, depression, anxiety, threat to self, and daily support.

Changes in Data: Physical Activity, Nutrition, and Food Access

Healthy NC Indicator: Access to exercise opportunities
Desired Result: Increase physical activities Target: 92%

Healthy NC Indicator: Limited access to healthy food
Desired Result: Improve access to healthy food Target: 5%

All people in Durham County, particularly those who are historically marginalized or at or below median income level, have equitable access to affordable, healthy, and culturally appropriate food, and safe and accessible environments for physical activity.

Physical activity, nutrition, and food access has been the fifth top health priority in Durham County for over a decade. [MB1] Exercise is linked to many positive health outcomes. Communities that create spaces for physical activity have healthier people and decreased risk of obesity and other chronic conditions. Similarly, limited access to healthy foods has been linked to various chronic health conditions, such as obesity and type II diabetes (HNC 2030).

Most health indicators in Durham County related to this priority have improved and are better compared to North Carolina and the United States. Access to exercise opportunities in Durham County has increased from 86% in 2022 to 88% in 2023. The food index score, a measure combining access to healthy foods and food insecurity, has improved, from 7.7 out of 10 in 2019 to 8.0 out of 10 in 2021, showing that more residents have access to healthy foods and less are food insecure. Obesity rates have decreased from 34% in 2022 to 30% in 2023 and type II diabetes rates are down from 12.9% in 2019 to 11% in 2021, according to County Health Rankings.

Median Income in Durham County by Race and Ethnicity (in USD), 2019-2023

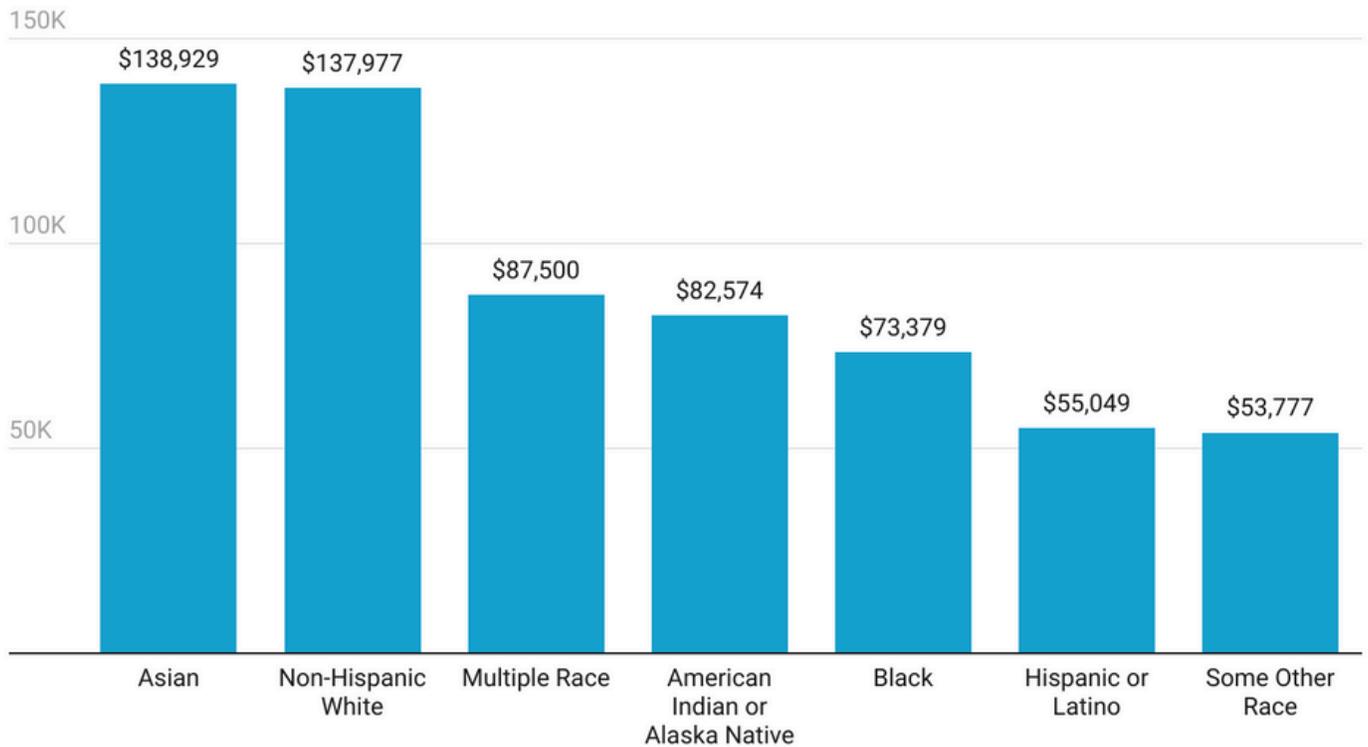


Chart: Durham County Public Health • Source: NC Data Portal • Created with Datawrapper

Food Security-Related Trends in Durham County, 2017-2022

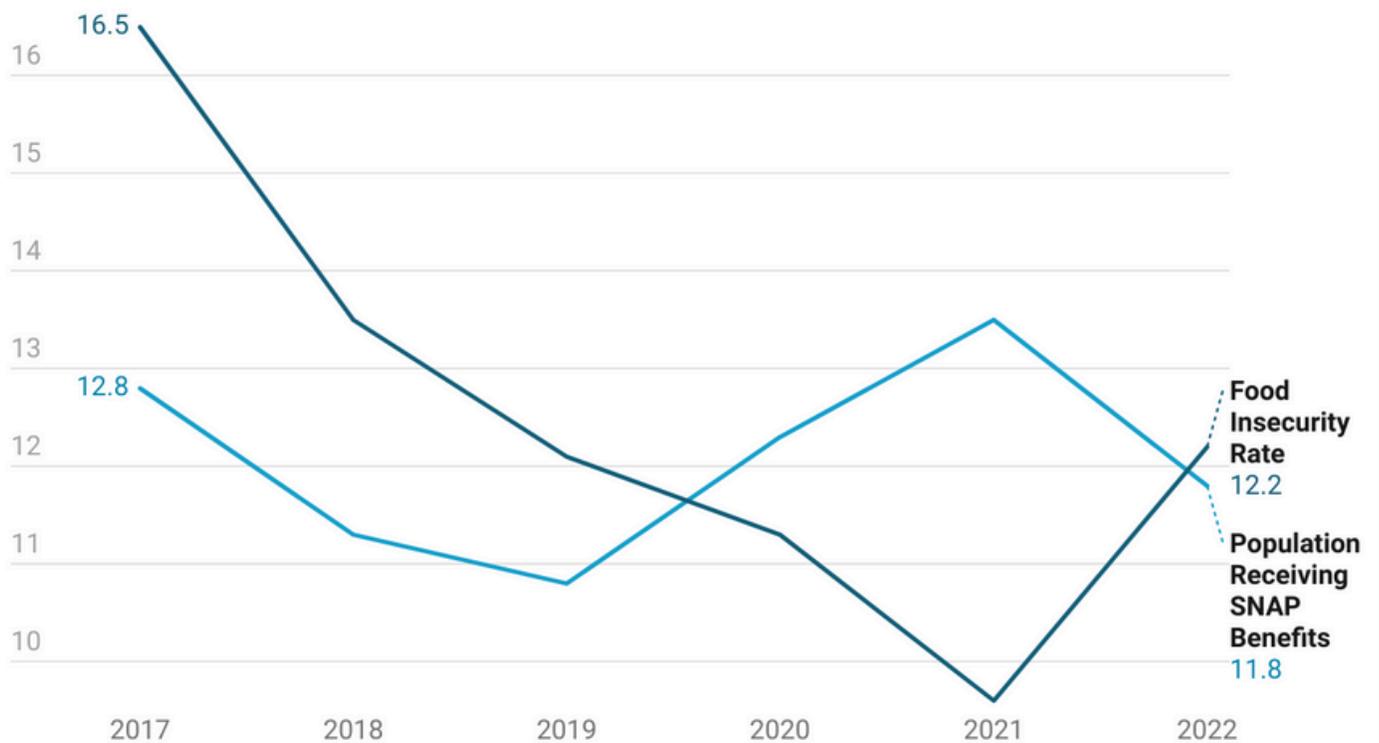


Chart: Durham County Public Health • Source: NC Data Portal • Created with Datawrapper

Why are there inequities?

There are financial, physical and social barriers that play into residents' abilities to be physically active and have access to healthy foods, including a lack of grocery stores within a safe distance from home, inadequate sidewalks and infrastructure and community safety. Residents with higher incomes have higher physical activity rates than those who don't make as much and, in Durham County, white households have a median household income over \$50,000 higher than both Black and Hispanic/Latine households. This pay disparity also plays a role in one's ability to purchase food in general but specifically healthy foods that tend to be more expensive.

Progress Made

The Physical Activity, Nutrition, and Food Access (PANFA) committee continues maintaining Healthy Mile Trails, supporting and sharing information about Double Bucks, and supporting Durham Public Schools in implementing free school meals for all students. The committee works to build capacity in the community by sponsoring grant writing classes and Racial Equity Institute training. They continue working towards language accessibility by translating meeting and resource documents. PANFA supported efforts to bring a vaping education program to Durham, reaching over 70 fifth grade Durham Public School students.

PANFA works to improve physical activity levels in youth by installing playground stencils in schools, parks and areas families with small children congregate, as well as exploring how to work better with Durham Parks and Recreation to improve parks in areas that are often disinvested. The committee collaborates with food distribution sites to identify policy, systems, and environmental changes to help families access and utilize healthy foods and reduce food waste. Other efforts in the community include Safe Routes to School, which has involved a partnership between Bike Durham and DPS, youth cooking education and classes led by the Kind Kitchen Group, and the use of American Rescue Plan Act (ARPA) funding for food initiatives by the Durham County Cooperative Extension.