Durham County

State of the County Health Report







Electronic copies of this report and other Durham County health reports are available at:

www.healthydurham.org

Printed January 2014

This report is a summary of health trends among county residents. It provides the most current data highlighting county demographics, leading causes of death, and the county's six health priorities. It also provides updates on emerging issues. Its purpose is to educate the community about the health of its citizens and to serve as a resource for grant writing, local policies, budgets, and programs.

Health priority areas

Identified by the 2011 Community Health Assessment

- ◆ Access to Medical and Dental Care
- ♦ HIV/STDs
- ♦ Obesity and Chronic Illness
- ◆Substance Abuse and Mental Health
- ◆Poverty
- ◆Education





Durham County Strategic Plan Health Goals

- Decrease health disparities within the community
- Strengthen the well-being of individuals and families through prevention and education
- Partner with community resources to increase access to health and wellness services

The Partnership for a Healthy Durham and the Durham County Department of Public Health are pleased to release the annual State of Durham County's Health Report for 2013.

The Partnership for a Healthy Durham is a coalition of local agencies and citizens dedicated to collaboratively improving the physical, mental, and social health and well-being of Durham residents. The Partnership links health organizations and citizens concerned with health to develop effective programs and use resources wisely.

During the triennial Community Health Assessment, the Partnership for a Healthy Durham leads the Durham community in identifying health priorities. The health priorities determined during the 2011 assessment are listed on the front of this document. The next community health assessment will be completed in December of 2014.

Once the health priorities are determined, the Partnership hosts committees dedicated to each health priority. The committees work together to identify efficiencies and create new initiatives. Accomplishments of the committees and other organizations working with the Partnership are noted in this document under "Progress".

Partnership meetings are open to the community and anyone may join at any time either by emailing the coordinator (Erika Samoff, esamoff@dconc.gov) or by coming to a meeting. The full schedule of committee meetings is available under the Calendar link at our website, www.healthydurham.org.

We hope you will use these data to learn about your community, to inform your conversations and actions, and to advocate for improvement.



Durham's Demographics and Health

The estimated 2012 population of Durham County is 279,641.1

Durham County Population¹

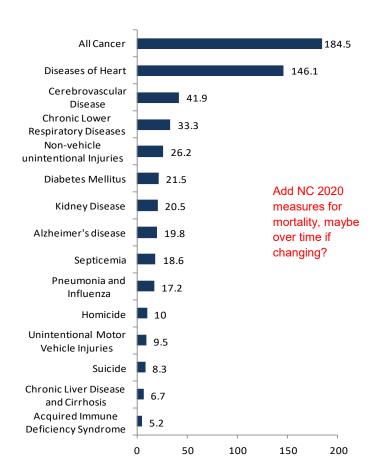
Gender	Number of residents	Percent of total population	
Male	133,566	48%	
Female	146,075	52%	
Race/Ethnicity			
White	151,321	54%	
Black or African American	108,974	39%	
American Indian	2,991	1%	
Asian	16,205	6% 3%	
Other race	8,340		
Hispanic (of any race)	37,511	13%	
Age			
<18	63,253	22%	
18-64	186,511	67%	
>64	29,877	11%	

Overall Health Indicators²

- 86% of Durham County residents reported being in excellent, very good, or good health in 2012.
- 81% of Durham County residents reported fewer than 3 poor physical health days in the past month.
- 77% of county residents reported fewer than 3 poor mental health days in the past month
- Life expectancy for someone born in Durham County in 2009-2011 was 79 years.

Leading Causes of Death, Durham County, 2007-2011³

Age-adjusted death rates per 100,000 population





Durham's Successes and Assets

Healthy NC 2020 Objectives

North Carolina has set 40 statewide health objectives with targets to reach by 2020. Durham County currently meets or exceeds 7 of the Healthy NC 2020 Targets.⁴

Healthy NC 2020 Objective		Durham	NC
Reduce the percentage of women who smoke during pregnancy (2009)	6.8%	5.4%	10.2%
Reduce the percentage of traffic crashes that are alcohol related (2011)	4.7%	3.9%	5.1%
Reduce suicide rate (per 100,000 population, 2007-2011)	8.3	8.3	12.1
Increase the percentage of children aged 1-5 years enrolled in Medicaid who receive any dental service during the previous 12 months (2011)	56.4%	58.1%	51.7%
Decrease the percentage of adults who had permanent teeth removed due to tooth decay or gum disease (2010)	38.4%	37.7%	46.7%
Reduce the unintentional poisoning mortality rate (per 100,000 population, 2007-2011)	9.9	7.7	10.8
Decrease the percentage of adults with diabetes (2012)	8.6%	8%	10.4%

Infant Mortality and Teen Births^{4,5}

- Durham's infant mortality rate (per 1,000 live births) continued to decrease, from 7.0 in 2010 to 6.7 in 2013. The Healthy 2020 goal is 6.3.
- However, a gap between infant mortality among African Americans and Whites in Durham continues to exist; infant mortality among African Americans (14.3 per 100,000) was 2.75 times that among Whites (5.2 per 100,000).
- Durham's teen pregnancy rate also continued to decrease, from 69 per 100,000 in 2009 to 45 per 100,000 in 2012.

New Initiatives

Environmental changes to support positive health choices

The Healthy Mile Trail program uses sidewalk stencils to identify one mile walking trails in neighborhoods. These permanent markers support physical activity in a way that's cost-effective and close to home.

The Healthy Aisle program changes what is stocked on checkout aisle shelves, to make purchases of unhealthy food more difficult and purchases of healthy snacks easier.

Collaborations with the Veggie Van (which offers a CSA from the Human Services Building), and the Durham Farmers Market (to support accepting EBT (food assistance cards)) make local, fresh vegetables available to more members of the community.

Coordinated rollout for the Affordable Care Act

Project Access of Durham County, Lincoln Community Health Center, and the Partnership for a Healthy Durham have worked together to coordinate outreach and education efforts on the Affordable Care Act and Health Insurance Marketplace. These efforts and work with the League of Women Voters, Durham CAN, and other organizations have ensured that the county has had a coordinated plan to support enrollment in Health Insurance Marketplace insurance plans.

Expanded access to chronic disease screening and care

Screening for Hepatitis C virus is being offered at the Durham County Department of Public Health onsite and at the Durham County Detention Center, TROSA, and other settings. This program has tested over 1,700 people and linked more than 50 people testing positive to medical care at Duke University or the University of North Carolina.

The Durham Diabetes Coalition is working to offer support to those diagnosed with type 2 diabetes and those who have type 2 diabetes but aren't yet diagnosed. The coalition is a partnership of health and community organizations, with the goal of reducing death and injury for people living with type 2 diabetes by connecting patients to resources and providing home visits to a subset of patients with barriers to self-management.

Expanded access to dental care

To expand access to low-cost dental care for adults, Project Access of Durham County and the Department of Public Health partnered to conduct a pilot project to provide uninsured adult patients with donated dental care. Patients were referred by Project Access, screened at the Department of Public Health by volunteer dentists, and referred to community dentists who provided dental care at no cost. This project will be expanded in 2014.











Access to Healthcare

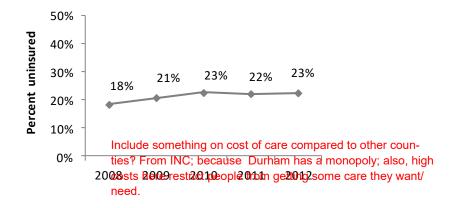
Healthy NC 2020 Goal: Reduce the percentage of non-elderly uninsured individuals to 8%.

Progress

- In October of 2013, the Access to Care committee published a series of 4 articles on Affordable Care Act implementation in the Durham Herald-Sun. The committee also published a brochure on the Health Insurance Marketplace which has been widely distributed. Finally, the committee, with leadership from Project Access of Durham County and Lincoln Community Health Center, convened a workgroup to coordinate education efforts.
- The Access to Care committee revised, updated, and printed brochures detailing sources of medical care and transportation for the uninsured and underinsured. More than 5,000 brochures have been distributed.
- The Access to Care committee held a forum on coordinating services and housing for medically vulnerable residents who are too sick for shelter or streets but too well for the hospital. The forum focused on six areas: respite care, identification of homeless individuals in the hospital setting, embedding a homeless specialist within the hospital, creating an **Emergency Department homeless** outreach worker, creating a case management and support team for targeted clients, and targeted permanent supportive housing. Based on interest from the forum, the committee developed a pilot project to provide respite care (see Poverty page 14 for more details).

It is estimated that there are 47,620 uninsured Durham residents. Uninsured adults (18-64) make up around 20% of the Durham adult population; this is considered a "midhigh" proportion of uninsured adults (as defined by the North Carolina Institute of Medicine).

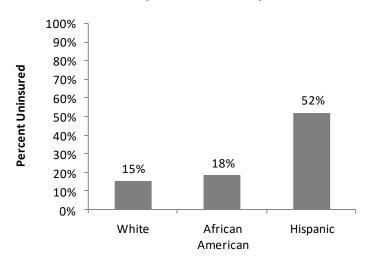
Percent of Adults that are Uninsured, Durham County⁶



Hispanic

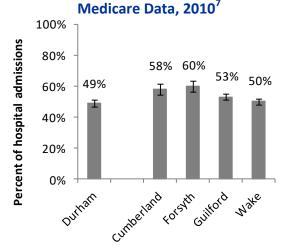
Durham County residents are much less likely to have health insurance than White or African American residents. The demographic characteristics of the uninsured population in Durham have remained similar over the

Percent of Adults who are Uninsured by Race/ Ethnicity, Durham County, 2012⁶



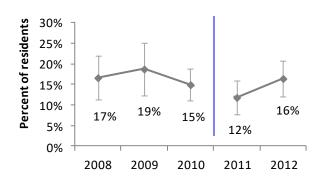
Even for insured residents, health care may be difficult to access. Access to outpatient care is measured by the proportion of hospital visits that would have been prevented by adequate outpatient (ambulatory) care. The best data available come from the Medicare system. The proportion of preventable Medicare hospital stays in Durham County is high, but lower than or comparable to peer counties.

Percent of hospital admissions preventable by outpatient (ambulatory) care



In 2012, 16% of Durham residents reported that they could not see a doctor when needed because of the cost. This is comparable to the North Carolina figure, 19%.

Percent of residents not seeing a doctor because of cost, Durham County²

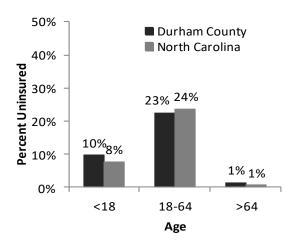


*Because of changes in BRFSS data collection in 2011, data from 2011 and later are not comparable to previous years.

Concerns

- Without Medicaid expansion, an estimated 19,000 adults in Durham County who were anticipated to be covered by Medicaid may remain uninsured. Expected decreases in federal funds for community health centers and hospitals may make it more difficult for uninsured people to access health care.
- County residents with very low income not covered by Medicaid and undocumented immigrants will remain uninsured.
- In 2012 there were an estimated 6,082 uninsured children (<18) and an estimated 410 uninsured older adults (>64) in Durham. The proportion of children uninsured is considered "high" (as defined by the North Carolina Institute of Medicine). The proportion uninsured in Durham in 2012 is similar to that in North Carolina.

Uninsured Status by Age and Residency, 2012⁶



- Enrollment in Affordable Care Act
 Marketplace plans is expected to reduce
 the number of uninsured adults.
- It is not known whether enough healthcare providers are available to serve the newly insured.

HIV and Other Sexually Transmitted Infections

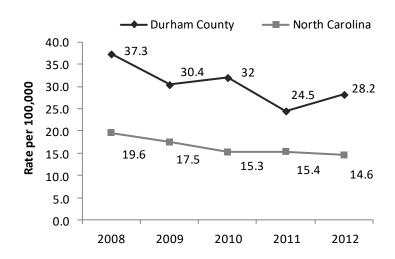
Healthy NC 2020 Goal: Reduce the rate of new HIV infection diagnoses to 22.2 per 100,000

Progress

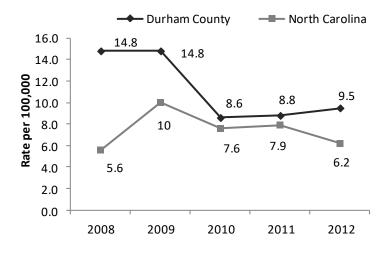
- Testing for HIV and other sexually transmitted infections was offered in many settings, including local universities, Lincoln Community Health Center, the Durham County Jail, and at local collaborating organizations. A national testing day was held at Walgreens locations.
- Expanded hepatitis C screening was offered in many settings where HIV testing was also offered.
- The HIV/STI Committee
 recognized World AIDS Day with
 a celebration, speakers, a
 fashion show, HIV and sexually
 transmitted disease testing, and
 communication via the press.
- An article describing the value of syringes retaining less fluid ("low dead-space syringes") for prevention of disease transmission, was published by the HIV/STI Committee in the Durham Herald-Sun. This article followed an article on the same topic published in late 2012 in the Durham News.

Although HIV rates have dropped over the past 5 years, Durham County's rates remain higher than the state average. Syphilis case rates follow a similar pattern.

HIV Case Rates, Durham County and North Carolina⁸

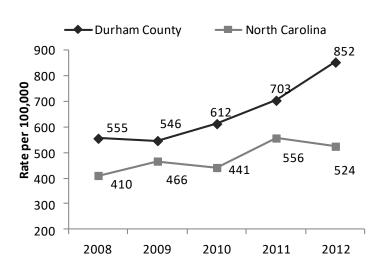


Early Syphilis Case Rates, Durham County and North Carolina⁸

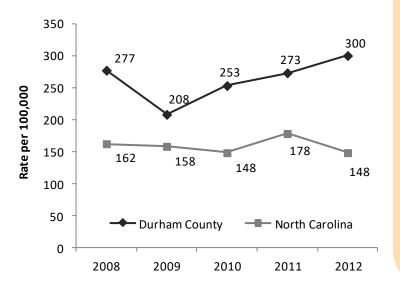


Chlamydia case rates are rising in Durham County.
Gonorrhea rates have risen since 2009, but are similar to the 2008 number.

Chlamydia Case Rates, Durham County and North Carolina⁸



Gonorrhea Case Rates, Durham County and North Carolina⁸



Concerns

- Durham has the 3rd highest rate of HIV cases in North Carolina (up from 4th in 2011).
- Rates of HIV and early syphilis have remained approximately level since 2010, following a decrease prior to 2010.

- As providers move to more sensitive nucleic acid testing for chlamydia and gonorrhea, the numbers of cases detected rise. This may account for some of the increase in cases seen. However, the increase may also be due to true increases in prevalence of these diseases.
- With a reduction in staff focusing on syphilis at the state level, syphilis case rates may increase.
- Some strains of gonorrhea are resistant to common antibiotics. These strains may be present in Durham County. Funding for staff focusing on gonorrhea will increase in 2014.

Obesity and Chronic Illness

Healthy NC 2020 Goals:

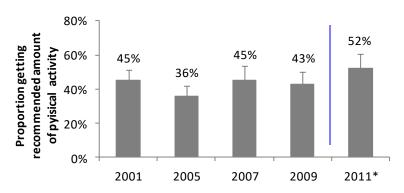
Increase the percentage of adults getting the recommended amount of physical activity to 60.6% Increase the percentage of adults consuming fruits and vegetables five or more times per day to 29.3% Decrease the percentage of adults with diabetes to 8.6%

Progress

- Environmental interventions,
 which change the setting s
 where people make
 decisions, make healthy
 choices easier. A second
 Healthy Mile Trail was
 established in North East
 Central Durham. A third
 Healthy Mile Trail is in
 development. A Healthy
 Check-out Aisle was installed
 at Los Primos grocery store.
- Five Bull City PlayStreets events were held.
- New questions to create baseline measurements of population walking and biking were included for the 2014 Community Health Assessment.
- ahealthierdurham.com was launched to support physical activity in Durham. It will allow posting of events by many organizations and capture minutes exercised and weight lost by the Durham Community.
- Read about the Durham
 Diabetes Coalition on page 5.

The proportion of Durham County residents getting the recommended amount of physical activity has increased.

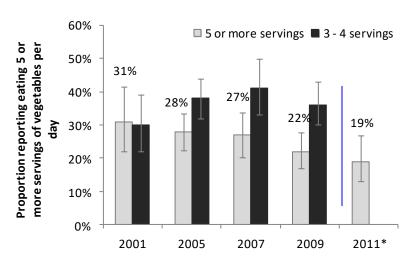
Physical Activity, Durham County²



The proportion of Durham County residents eating 5 or more servings per day of fruits and vegetables has decreased.

However, the proportion of residents eating 3 or 4 servings per day has remained steady.

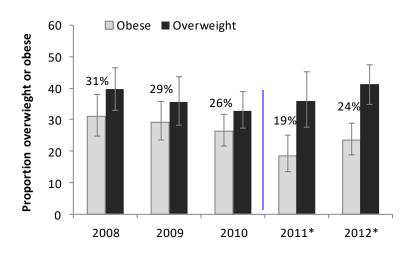
Consumption of fruit and vegetables, Durham County²



^{*}Because of changes in BRFSS data collection in 2011, data from 2011 and later are not comparable to previous years.

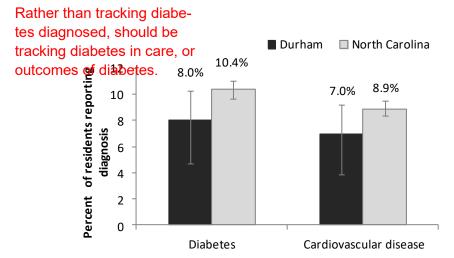
The proportion of Durham County residents who are obese has remained level since 2008. The proportion who are overweight (41% in 2012) has also been level since 2008.

Obese and Overweight Adults, Durham County²



The proportion of Durham County residents reporting that they have been diagnosed with cardiovascular disease (including heart attack, coronary heart disease, or stroke) and diabetes (not during pregnancy) has also been level, at 6-8%, since 2008. This is comparable to the state figure.

Adults with Diabetes and Cardiovascular Disease²



Concerns

 Despite local efforts, the proportion of adults who are overweight or obese has not altered significantly over the past 5 years.

- Obesity is linked to poverty; people with lower socioeconomic status are more likely to be obese.
- The 2011 Community Health
 Assessment identified a desire
 for exercise opportunities that
 are low-cost and located in
 neighborhoods. Making
 exercise available locally and
 cheaply may help reduce
 obesity in Durham County.



Substance Abuse and Mental Health

Healthy NC 2020 Goals:

Reduce the percentage of high school students who consumed alcohol within the past 30 days to 35% Reduce the suicide rate to 8.3 per 100,000

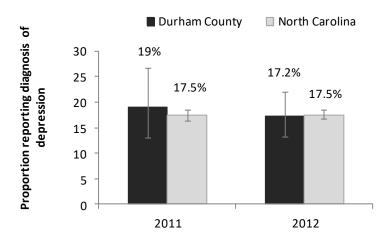
Progress

- The 2013 Recovery Celebration, coordinated by the Criminal Justice Resource Center, linked recovery from substance addiction and mental illness to exercise, nutrition, and chronic disease prevention. In addition to testimonials and celebratory presentations, the event offered health screenings, healthy cooking demonstrations, and physical activity breaks. Durham TRY and other organizations provided education and tools.
- The Durham Teen Center,
 Durham Gun Safety Team, and
 Partnership for a Healthy
 Durham joined to present a full day suicide prevention and gun safety training to teen youth leaders from across the state at the 2013 North Carolina Teen
 Summit.
- Efforts to streamline mental health care for children are producing valuable discussion between medical care providers, Durham Public Schools, and other agencies; see more on page 16.

In 2012, 17% of Durham County residents reported that they had been diagnosed with a depressive disorder.

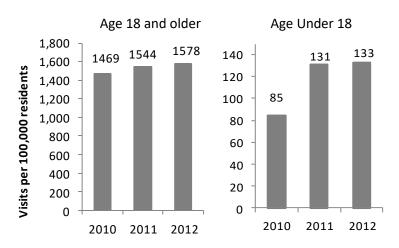
This was comparable to the North Carolina figure.

Report of diagnosis with a depressive disorder²



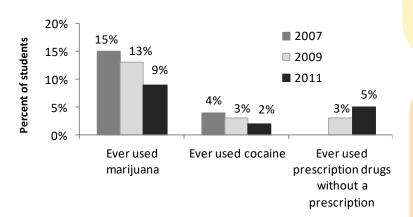
The number of substance use-related visits to the emergency department per 100,000 population appears to be increasing slightly since 2010.

Substance use-related visits to the Emergency Department (source: NC DETECT)⁹

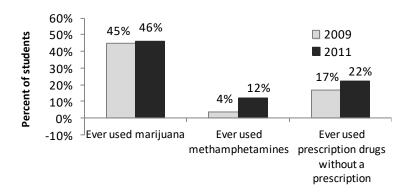


- The proportion of high school students consuming alcohol in the past 30 days was 36% in 2011.
- The proportion of high school students who smoked cigarettes in the past 30 days was 16% in 2011.
- Reported drug use among Durham County youth in middle school is decreasing, with the exception of prescription drug use. Reported drug use among Durham County youth in high school may be

Reported drug use, Middle School¹⁰



Reported drug use, High School¹⁰



The Durham County age-adjusted suicide rate for 2007-2011 was 8.3 suicides per 100,000 population.

Concerns

- Prescription drug use may be increasing among students.
- Substance use-related visits to the emergency department are increasing.
- State data show that only a small proportion of those needing treatment for mental health and substance abuse receive it. The mental health and substance abuse treatment services available are not adequate to meet the need.

Emerging Issues

 Prescriptions of opioid medications have increased in North Carolina. Emergency department visits for drug overdose are correlated with increased opioid medication sales. Substance abuse-related emergency department visits are increasing in Durham County, and this increase may be related to opioid use.



Could include snap

back to 2007

benefits—if possible,

Poverty

Healthy NC 2020 Goals:

Decrease the percentage of individuals living in poverty to 12.5%

Decrease the percentage of people spending more than 30% of their income on rental housing to 36.1%

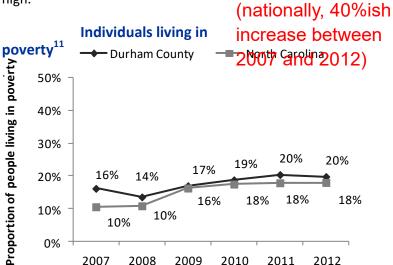
Progress

- The Partnership for a Healthy Durham has worked through our Access to Care committee and with End Poverty Durham, and Durham Health Initiatives (DHI) in 2013 to address poverty in Durham.
- End Poverty Durham has created and raised funds in 2013 to implement the REAL Durham Initiative, using evidencebased Circles methods, to lift families out of poverty.
- DHI has created a committee focusing on linking Spanish-speaking county residents with needed services. The Partnership, DHI and community volunteers worked together to add a random sample of Hispanic/Latino community residents to the community health assessment survey performed in 2013.
- The Access to Care Committee created a pilot project to provide short-term medical respite housing for medically vulnerable homeless county residents (called Hospital to Home for the Homeless). In addition to short-term medical respite housing, the project will provide participants with connection to medical and mental health care, nurse care manager services, benefits acquisition and housing planning/ placement.

The proportion of Durham County residents living in poverty remains high.

0%

2007



An income below the poverty level is most common among African American and Hispanic/Latino county residents.

2008

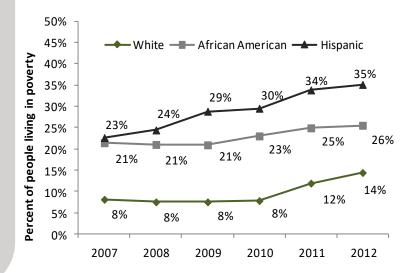
Individuals living in poverty by race/ethnicity, **Durham County**¹²

2009

2010

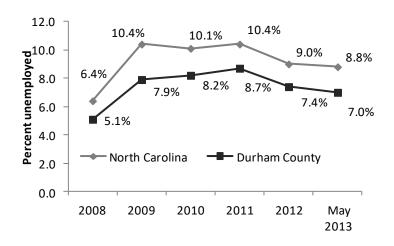
2011

2012



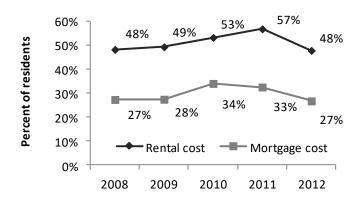
Although the proportion of county residents living in poverty is not decreasing, the Durham County unemployment rate is falling.

Unemployment Rate, Durham County¹³



Housing is considered "affordable" when housing costs are not more than 30% of household income. Half or more of Durham County residents renting their homes are paying more than 30% of their income in rent. Among those who own homes, a smaller percent spends more than 30% of their income on housing (mortgage costs). The proportion spending more than 30% of their income on housing has fallen slightly but is still high.

Percent spending >30% of income on housing, Durham County¹⁴





People with higher incomes, more years of education, and a healthy and safe environment have better health outcomes.

Concerns

The poverty rate continues to rise

- In 2012 (one-year estimate),
 19.8% of Durham County
 residents lived in poverty.
- 37% of Durham residents have an income below 200% of the Federal Poverty Level

The number of homeless individuals increased in 2013

 759 individuals were identified as homeless in the 2013 Point in Time count (up from 698 in 2012)

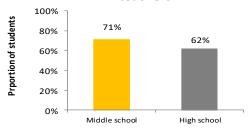
Education

Healthy NC 2020 Goal: Increase the four-year high school graduation rate to 94.6%

Progress

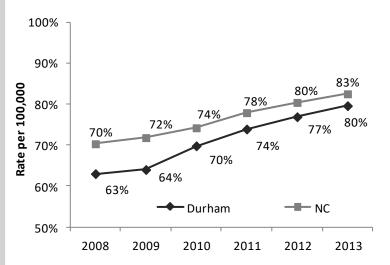
- The graduation rate in Durham continues to improve.
- The Durham Public Schools
 Family Academy is a
 collaboration between the
 schools and community
 organization and agencies. It
 offers information about
 connecting with schools,
 personal and professional
 development for families,
 healthy living, and physical and
 emotional development.
- Duke Medicine, with collaboration from Durham
 Public Schools, has created the Integrated Pediatric Mental
 Health Collaborative. The goal of this collaboration is to improve the integration of pediatric mental health care for children in Durham.
- Students in middle and high school report that "their teachers really care about them and give them a lot of encouragement".

Percent of students reporting caring teachers¹⁰



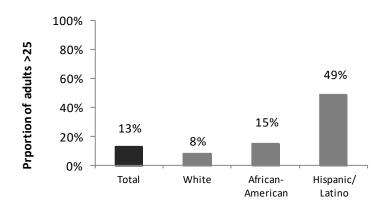
Durham's 4-year graduation rate continues to improve; the gap between Durham and state graduation rates continues to narrow.

High school graduation rates, Durham County¹⁵



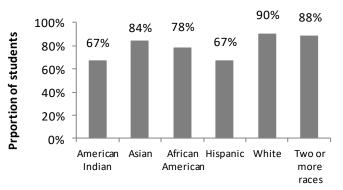
Among adults (>25), 13% have no high school diploma. The proportion with no high school diploma differs by race/ethnicity (below) and by poverty level; lower income is associated with lower educational attainment. It is likely that poverty accounts for much of the difference by race/ethnicity.

Percent of adults with no high school diploma by race/ethnicity, Durham County, 2013¹⁶

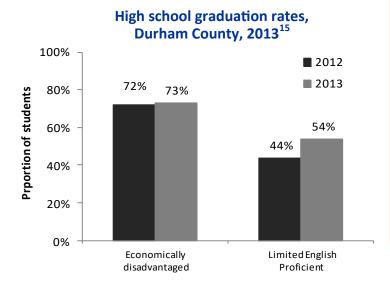


Graduation rates varied by race, poverty, and English proficiency. Graduation rates for all groups increased in 2013, including for African Americans (from 74% in 2012 to 78% in 2013) and Hispanics (from 64% in 2012 to 67% in 2013.)





- Some of the variation in graduation by race/ethnicity is likely to be caused by poverty and language skills. Students from economically disadvantaged backgrounds and those with limited English proficiency were less likely to graduate in 4 years.
- Graduation rates for students with limited English proficiency increased in 2013.





Concerns

- Although the graduation rate for students with limited English proficiency have improved in recent years, graduation rates for these students are lower than their Durham counterparts.
- Adult African Americans and Hispanics are least likely to have a high school diploma.

- With ongoing immigration in Durham County comes the challenge of ensuring educational attainment for students with limited English proficiency.
- Similarly, providing educational support for adult residents with limited English proficiency is challenging.
- Cuts to education funding may impact Durham County's successful efforts to improve graduation rates.

Data Notes

- The census category "Hispanic" includes all individuals in the county who identify themselves as Hispanic. This category includes rich and poor, citizens and non-citizens, and Spanish-speaking, English-speaking, and bilingual individuals.
- Lines protruding from the top and bottom of bars in charts indicate certainty—we could say that we have 95% certainty that the true measurement lies within the bars. Longer lines mean that we are less certain about the exact number, usually because the survey that gives us the number only sampled a small number of county residents.
- In general, American Community Survey 1-year estimates are provided. In some cases, because of data instability, 3-year estimates are used. This is noted in the data source note.

Data Sources

Photo credits: Cover: Farmer's Market markschuelerphoto.com and Durham Convention and Visitors Bureau; Durham Skyline Downtown, Chris Barron and Durham Convention and Visitors Bureau; Page 3, top: Dan Hacker Photography/Durham Convention and Visitors Bureau; Page 3, bottom: Steward Waller and Durham Convention and Visitors Bureau.

- 1 US Census Bureau. 2012 American Community Survey 1-Year Estimates, Table DP05: 2012 Demographic and Housing Estimates. American FactFinder. http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml. Accessed November 5, 2013.
- 2 Centers for Disease Control and Prevention. Behavioral Risk Factor Surveillance Survey Results. North Carolina State Center for Health Statistics. http://www.schs.state.nc.us/data/brfss/survey.htm. Accessed November 18, 2013.
- 3 North Carolina State Center for Health Statistics. 2011 County Health Data Book. http://www.schs.state.nc.us/schs/data/databook/. Accessed November 12, 2013.
- 4 North Carolina State Center for Health Statistics. HealthStats—Healthy North Carolina 2020 Categorized Index. http://healthstats.publichealth.nc.gov/indicator/index/Categorized.html?CategorizedIndexName=1. Accessed November 10, 2013.
- 5 Adolescent Pregnancy Prevention Campaign of North Carolina. http://www.appcnc.org/data. Accessed November 12, 2013.
- 6 US Census Bureau. 2012 American Community Survey 1-Year Estimates, Table S2701: Health Insurance Coverage Status. http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml. Accessed November 3, 2013.
- 7 University of Wisconsin Population Health Institute. County Health Rankings—Durham County. http://www.countyhealthrankings.org/app#/north-carolina/2013/durham/county/outcomes/overall/snapshot/by-rank. Accessed November 1, 2013.
- 8 North Carolina Department of Health and Human Services. 2012 HIV/STD Surveillance Report. http://epi.publichealth.nc.gov/cd/stds/figures/std12rpt.pdf. Accessed November 18, 2013.
- 9 Duke Center for Child and Family Policy. Substance Use and Abuse in Durham County. https://childandfamilypolicy.duke.edu/pdfs/pubpres/2013_Substance_Use_Abuse_Durham_County.pdf. Accessed November 16, 2013.
- 10 Partnership for a Healthy Durham. 2011 Durham Youth Risk Behavior Survey results. http://www.healthydurham.org/index.php?page=health_recent Accessed November 15, 2013.
- 11 US Census Bureau. 2012 American Community Survey 1-Year Estimates. Table DP03, Selected Economic Characteristics. http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml. Accessed November 2, 2013.
- 12 US Census Bureau. 2012 American Community Survey 3-Year Estimates. Table S1701, Poverty Status in the Past 12 Months. http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml. Accessed November 2, 2013.
- 13 North Carolina Employment Security Commission. Local Area Unemployment Statistics. http://esesc23.esc.state.nc.us/d4/LausSelection.aspx. Accessed November 20, 2013.
- 14 US Census Bureau. 2012 American Community Survey 1-Year Estimates. Table DP04, Selected Housing Characteristics. http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml. Accessed November 2, 2013.
- 15 North Carolina Department of Instruction. Cohort Graduation Rates. http://www.dpi.state.nc.us/accountability/reporting/cohortgradrate. Accessed November 6, 2013.
- 16 US Census Bureau. 2012 American Community Survey 1-Year Estimates. Table S1501, Educational Attainment. http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml. Accessed November 11, 2013.