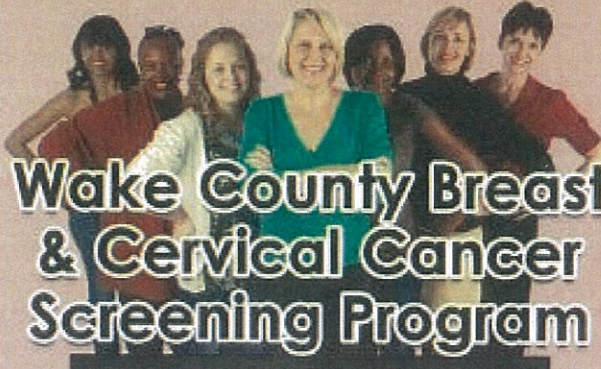


一、Wake County 的 WISEWOMAN 宣傳單張



## Wake County Breast & Cervical Cancer Screening Program

**You may qualify for a FREE Screening!**

**If you:**


- Don't have health insurance, (including Medicaid or Medicare);
- Are between the ages of 40-64 and have not had a cervical exam (pap test) in the last 5 years;
- Are between the ages of 50-64 and have not had an annual mammogram;
- Are low-income (below 250% of the federal poverty level)

**Call TODAY to see if you are eligible for a FREE clinic appointment.**

Women are also eligible for a **FREE** heart health screening through the **WISEWOMAN** Project

**For more information contact:**  
Elizabeth Spender-Smith, MAEd  
WiseWoman Coordinator  
919-250-3990

**(En Español)**  
Josie Jones 919-250-3821



## NC WISEWOMAN CLINICAL VALUES

### Abnormal Screening Values

The following are considered "Abnormal Values"

- $\geq 120$  systolic blood pressure
- $\geq 80$  diastolic blood pressure
- $\geq 200$  mg/dL total cholesterol
- $< 40$  mg/dL HDL-C
- $\geq 100$  mg/dL fasting blood glucose *or*  $\geq 5.7$  Hgb A1C  
According to the American Diabetic Association (ADA):
  - 70-99 mg/dl is *Normal*
  - 100-125 mg/dl fasting blood glucose is referred to as *impaired blood glucose*
  - $\geq 126$  mg/dl fasting blood glucose is *indicative of diabetes*
- BMI  $\geq 25$

These values are considered abnormal but do not require medical evaluation for purposes of the WISEWOMAN Project.

### Abnormal Values Requiring a Medical Referral

- $\geq 140$  mmHG systolic blood pressure
- $\geq 90$  mmHg diastolic blood pressure
- $\geq 240$  Fasting Total Cholesterol
- $\geq 126$  Fasting Blood Glucose (FBS) *or*  $\geq 6.5$  Hgb A1C ( $> 7.0$  if diabetic)
- $< 40$  mg/dl Fasting HDL accompanied by an abnormal total cholesterol

These are considered disease-level values. Patients with any of these values should receive a medical referral within 30 days if they are not already under the care of a primary physician who is managing these concerns.

### CDC Alert Values

- $> 180$  mmHg Systolic blood pressure
- $> 110$  mmHg Diastolic blood pressure
- $< 50$  or  $> 250$  mg/dL blood glucose (regardless of fasting status)


Patients with these alert screening values must be seen by a healthcare provider for medical evaluation immediately or within one week (or documentation should reflect why this did not happen).



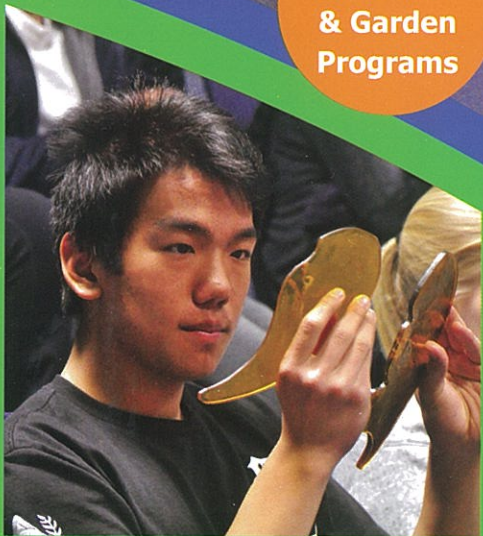

## 二、Poe Center 衛教活動宣傳單張

# PoeCenter™

The Alice Aycock Poe Center for Health Education



*Ask About*  
**NEW**  
Kitchen  
& Garden  
Programs



## Plan a Program with Poe Today

# ABOUT POE

UNIQUE

INTERACTIVE

## Why

Educate and empower North Carolina children, youth, and their families to make choices for a healthy lifestyle.

## Who

- Pre-Kindergarten - High School Youth
- Public, Private, and Charter Schools
- Community and Faith-Based Organizations
- Parents, Guardians, and Caregivers
- Education and Healthcare Professionals
- Adults who work with youth



## What

Expert health educators offer over **50** interactive programs for children, teens, and adults. **Classes align with the NC Department of Public Instruction Healthful Living and Science Essential Standards.**

- Nutrition and Physical Activity
- General Health and Body Systems
- Substance Use Prevention
- Family Life and Adolescent Development
- Dental Health
- Bullying Prevention and Healthy Relationships
- Parent and Family Programs



[poehealth.org](http://poehealth.org)



# EXPERIENCE POE

EFFECTIVE

RELEVANT

## Come To Us

The Poe Center is a unique field trip destination featuring museum-quality exhibits designed for hands-on learning.

- **Themed Teaching Theaters**  
Make learning fun with interactive technology.
- **GrowWELL Garden**  
Learn how to plant, harvest, and more in our teaching garden.
- **CookWELL Kitchen**  
Learn about nutrition, knife skills, food preparation, and more.
- **Cranium Connection\***  
Go inside our giant head to learn about the wonders of the brain.
- **WakeMed's PlayWELL Park\***  
Put learning into action at our on-site playground.

*\*Enjoy these attractions at NO additional charge.*

## We'll Come To You

### "Poe-on-the-Go"

Bring any of our programs directly to your school or organization.



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*Ask About*

**NO-COST PROGRAMS**

Nutrition & Physical Activity

*\*for schools with 50% or reduced lunch*

Substance Use Prevention

*\*Select programs in Wake and Johnston Counties*

**SCHEDULE YOUR PROGRAM**

**866.402.4799**

# SUPPORT POE

FUN

S.T.E.M.

## Sample Schedule

10:45 a.m. - 11:15 a.m.  
Brain & Chompin'

11:15 a.m. - 11:45 a.m.  
Brain Connection

11:45 a.m. - Noon  
BrainBusters

Noon - 1 p.m.  
BrainWELL Park

## Give

Generous gifts from donors keep admission prices low so more people may access our programs. **\$25 will send one child to Poe.** Give monthly and help sustain year-round health education programming. Go to [poehealth.org](http://poehealth.org) to make a gift.

## Volunteer

From the garden to the board room, the time, talents, and energy of volunteers is critical to our success. Call us or go online to find your fit with Poe.

## Lead

Poe offers unique opportunities for Wake County youth to enhance their leadership skills through involvement in community-wide health initiatives.

Welcome to  
my brain.

### Book TWO to Save!

Two programs for  
\$11\* per student

One program for  
\$7\* per student

\*minimum of 25 students.  
Other stipulations and  
rates may apply.



CALL OR GO ONLINE

[info@poehealth.org](mailto:info@poehealth.org)



# WHY POE?

Proudly served over ONE MILLION North Carolinians since 1991.

"I'm going to try to not just be a bystander, but stand up for people, and I will also not be a bully!"

-5th grader

"I learned about the different body systems. I learned about spines, the nervous system, and the brain. I learned how to be safe while playing sports and how to eat healthy."

- 3rd grader

"I like bringing my class to Poe because my students get great programs and can play on the playground in one convenient location. It's an affordable and manageable field trip."

- 5th grade teacher

Programs align with NC DPI Healthful Living & Science Essential Standards.

The Poe Center is the **only** dedicated center for health education in North Carolina.

**87% of children** demonstrate positive changes in behavior 6 weeks after Poe programs.



Located in the heart of Raleigh, NC off of I-440 at Poole Road, the Poe Center is a convenient destination for a day of learning.

**FIND POE**



# Poe & Grow Garden

## The Poe Center's ONLINE Teaching Garden

The Poe & Grow Garden will guide you through gardening basics for each season. Links to helpful resources connect you to lessons, funding opportunities, recipes, and more. Go to [www.poehealth.org](http://www.poehealth.org).

From nutrition to physical activity to environmental science, school gardens are effective learning tools for health and science education. Use the interactive Poe & Grow Garden to integrate garden education into your classroom.

Over 20 hotspots to explore!

2224 Sunnybrook Rd. Raleigh, NC 27610 | [poehealth.org](http://poehealth.org) | 866-402-4799 | [info@poehealth.org](mailto:info@poehealth.org)

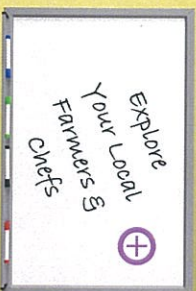
Nutrition and Physical Activity | General Health | Family Life  
Substance Use Prevention | Dental Health | Bullying Prevention





# CookWELL Kitchen

The Poe Center's ONLINE Teaching Kitchen



In addition to developing healthy life skills, cooking education is an effective hands-on method to teach nutrition, math, reading, and science. Use the [online CookWELL Kitchen](https://www.poehealth.org) to integrate cooking into your classroom.



Over 15 hotspots  
to explore!

224 Sunnybrook Rd. Raleigh, NC 27610 | [poehealth.org](https://poehealth.org) | 866-402-4799 | [info@poehealth.org](mailto:info@poehealth.org)

Follow us:



This material was funded by the USDA's Supplemental Nutrition Assistance Program -- SNAP  
This institution is an equal opportunity provider.



Visit the online CookWELL Kitchen to learn more about basic kitchen skills, safety, recipes, and more.  
[Go to www.poehealth.org.](https://www.poehealth.org)



# Play at Poe



## WakeMed's PlayWELL Park

Make learning active at the Poe Center's one-of-a-kind nutrition and body-system themed playground!

### Features

**Physical-Activity Tree House:** Scale the rib rise, climb the nerve net, and slide through giant arteries.

**Nutri-Climb:** Make healthy food choices to master the wall.

**Zip Line:** Zip between two giant ears.

**Pedal Posts:** Pedal your arms and legs for strong bones and muscles.

**Healthy Choices Maze:** Make wise decisions with each twist and turn to reach the end.

**Lickety Split:** Protect your peepers with giant sunglasses before taking a trip down the tongue slide.

**Adventure Climb:** Work those bones and muscles as you make your way through the obstacle course.

**Little Free Library:** Take a book, leave a book, read a book.

**Sun Shades:** Take a break or have a picnic in the shade.

### Play More!

Kids need 60 minutes of physical activity each day:



Push-ups, Climbing,  
Monkey Bars



Running,  
Biking, Dancing



Jumping Jacks,  
Hopscotch, Walking

### Park Hours

Monday - Friday  
8:30 a.m. - 5 p.m.  
Closed on Holidays.



*PlayWELL Park is  
wheelchair accessible.*

Nutrition & Physical Activity | General Health | Family Life | Substance Use Prevention | Dental Health | Bullying Prevention

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**PoeCenter**  
The Alice Aycock Poe Center for Health Education



# Grow at Poe



## GrowWELL Gardens

Get active with nutrition in Poe's GrowWELL Gardens.

### Teaching Garden

The Poe Center's garden programs teach the fundamentals of planting and maintaining a seasonal edible garden. Go to [www.poehealth.org](http://www.poehealth.org) to plan a program.

- Accessible raised planters with seasonal crops
- Pollinator Garden
- Composting Education
- Educational Mural

### Sharing Garden

Nestled in **PlayWELL Park**, the Poe Center's sharing garden features beds of seasonal herbs, fruits, and veggies which are available for tasting and sharing. Stimulate the senses in the sensory garden.

## Garden More!

Experience the benefits of gardening:



Nutritious fruits and vegetables for a healthy diet



Great source of physical activity



Improves mood



Nutrition & Physical Activity | General Health | Family Life | Substance Use Prevention | Dental Health | Bullying Prevention

This material was funded by the USDA's Supplemental Nutrition Assistance Program -- SNAP.  
This institution is an equal opportunity provider.

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866-402-4799 | [info@poehealth.org](mailto:info@poehealth.org) | [www.poehealth.org](http://www.poehealth.org)

**PoeCenter**  
The Alice Aycock Poe Center for Health Education









# Support Poe



Nutrition & Physical Activity | General Health | Family Life | Substance Use Prevention | Dental Health | Bullying Prevention

## Invest in a healthier North Carolina with a gift to the Poe Center.

-  **Family Life:** Adolescents who participate in comprehensive sexuality-education programs have lower rates of unintended pregnancies and sexually transmitted infections.<sup>1</sup>
-  **Nutrition & Physical Activity:** Children who participate in nutrition education programs increase their daily fruit and vegetable consumption.<sup>2</sup>
-  **General Health:** Learning to properly wash hands is one of the most effective ways children can avoid getting sick and spreading germs to others.<sup>3</sup>
-  **Substance Use Prevention:** Students who participate in substance use prevention programs demonstrate a significant decrease in rates of substance use compared to peers who did not participate.<sup>4</sup>
-  **Dental Health:** 13% of kindergarten students in North Carolina have untreated tooth decay.<sup>5</sup>
-  **Bullying Prevention:** 44% of students who are bullied say it's because of how they look. A positive school climate is critical for bullying prevention.<sup>6</sup>

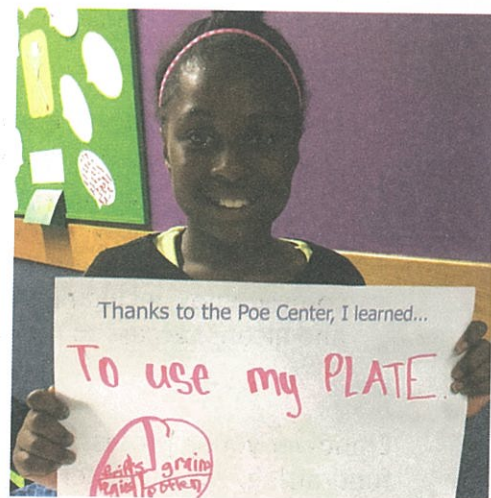


Make It Monthly.  
Make A Difference.

**\$25** will bring a child to Poe.

**\$250** will bring an entire class.

Give monthly and help sustain year-round health education programming.



**87%** of participants report positive changes in behavior 6+ weeks after a program with the Poe Center.

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The Alice Aycock Poe Center for Health Education



# Support Poe



Nutrition & Physical Activity | General Health | Family Life | Substance Use Prevention | Dental Health | Bullying Prevention

## Volunteer for a healthier North Carolina.



### Individuals

Help us with events and daily operations. Volunteers fill important roles on a daily basis.



### Groups

Plan a day or afternoon of community service with your organization or business. Groups are always helpful in accomplishing the big jobs: mailings, painting, landscaping, etc.



### Youth Leadership

- **Teen Health Advisory Council:** Work with educators and representatives to learn about teen health issues and advocate for healthier communities.
- **LEAP Youth Empowerment Advocates:** Work with schools, peers, and community leaders to advocate for safe and drug-free communities, including merchant education to reduce tobacco and alcohol access to minors.



### Poe Young Professionals

Empower young professional leaders to make a difference through fundraising, volunteer service, and social networking.



### Board of Directors/Board Committees

Lend your professional expertise. Leaders in a wide range of industries from around the state are critical to the strategic success of the Poe Center.



Contact us to find your fit with the Poe Center.



"Volunteering at Poe has given me an experience I can't forget. It's given me the opportunity to work, the skills to balance out priorities, and the ability think on my feet, which I can use anywhere."

-Jade, Volunteer

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The Alice Aycok Poe Center for Health Education



# Learn at Poe



Nutrition & Physical Activity | General Health | Family Life | Substance Use Prevention | Dental Health | Bullying Prevention

Part museum, part lab, part theater, part playground, and part roadshow, the Poe Center is offering a **NEW** range of learning experiences to actively engage students of **all ages** in a variety of **health and life science topics**.

## ON-SITE Come to us!

Engage with museum-quality exhibits, interactive technology, and hands-on learning.

- **Seven Themed Teaching Theaters** - Larger-than-life props and engaging activities create an immersive experience for participants.
- **Cranium Connection** - Explore the wonders of the brain in Poe's giant head and independent learning centers.
- **NEW GrowWELL Garden** - Grow fruits and vegetables while learning about plants, the garden ecosystem, and environmental science.
- **NEW CookWELL Kitchen** - Create healthy snacks and meals while learning about food science and kitchen skills.
- **WakeMed's PlayWELL Park** - Put learning into action at Poe's body-systems themed playground.

## OFF-SITE We'll come to you!

Bring any of our programs directly to your school or organization.

Enthusiastic Educators | Dynamic Presentations | Fun Props  
Activities for Different Learning Styles

## ONLINE We're just a click away!

Visit one of Poe's beautifully designed and highly interactive online exhibits. Each site features dozens of informative hotspots covering a wide-range of health-science topics:

Poe & Grow Garden | Online CookWELL Kitchen | Health History Mural  
Prescription Medicine Safety Toolkit | Curriculum Pathways Lessons

## Hands On. Minds On.



87% of participants report making positive behavior changes 6+ weeks after a program with the Poe Center.



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**PoeCenter**  
The Alice Aycock Poe Center for Health Education



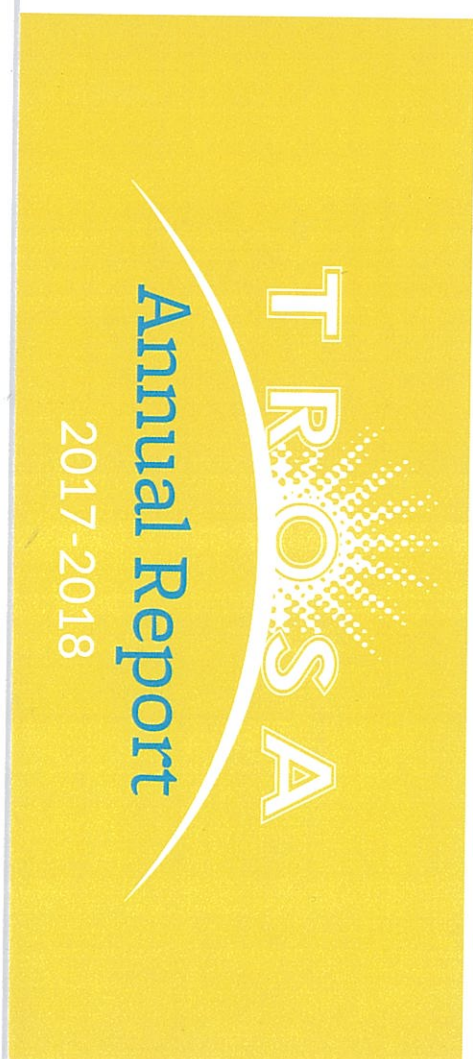
# Program “Quick List”

The Poe Center offers over 50 interactive programs for children, teens, and adults. Programs align with the NC Department of Public Instruction's **Healthful Living and Science Essential Standards**. All programs can be adapted for any age group and tailored to correspond with a specific curriculum. Programs are subject to changes. Go to [poehealth.org](http://poehealth.org) for a complete list.

	Prek	K – 1 <sup>st</sup>	2 <sup>nd</sup> – 3 <sup>rd</sup>	4 <sup>th</sup> – 5 <sup>th</sup>	Middle	High	Adult
Nutrition & Physical Activity	Food Friends	Healthy Habits	Fantastic Foods	Food for Thought	Mission Nutrition	Wellness Works	Healthy POEtential
	Grow It, Try It, Like It (PK-K)	Play Hard, Stay Fit	FITT for Life	Media Smart Youth			
		Growing Healthy Kids (1 <sup>st</sup> - 2 <sup>nd</sup> )					
			Fitness is Fun (K – 5 <sup>th</sup> )				
			Menus, Muscles & More (3 <sup>rd</sup> - 5 <sup>th</sup> )				
			Wholesome Routines (3 <sup>rd</sup> - 5 <sup>th</sup> )				
GrowWELL Garden Programs				Season Explorers			
	Growing Healthy Kids (Prek - 1 <sup>st</sup> )	Seymour's Bug Safari			Eat the Rainbow		
		Plant Parts Detectives			Produce and Parts		
					Muffin Mystery		
CookWELL Kitchen Programs					Knife Skills and Safety		
					Poe Cooking Challenge		
General Health	My Body, My Buddy	Safety Smart	Bones Muscles & Joints	Decisions... Decisions...	Body Machine		
		GermBusters	Summertime Safety	Mission POE-ssible			
Dental Health	Happy Teeth	Super Smiles	Clean & Chompin'				
	Sherriff Tuffy Tooth						
Bullying Prevention	Bully Free Friends	Friend Power	Don't Stand By: Be a H.E.R.O.	The Alphabet of Anti-Bullying			Bullying Uncovered
Substance Use Prevention			Choices & Consequences (5 <sup>th</sup> )	For the Health Of It!	In the Know	Drugs Uncovered	
			It's Up 2 U! (3 <sup>rd</sup> – 5 <sup>th</sup> )		The Science of Addiction (10 <sup>th</sup> - 12 <sup>th</sup> )	#YouthCulture	
Family Life					Understanding Opioids		
					Puberty Detectives (4 <sup>th</sup> )	Reproduction: Healthy Responsibility	Parents Matter!
					Puzzled by Puberty (5 <sup>th</sup> )		
					Facts of Life (7 <sup>th</sup> )		
					MythBusters (8 <sup>th</sup> - 12 <sup>th</sup> )		
					Healthy Relationships 101 (8 <sup>th</sup> - 12 <sup>th</sup> )		
					Girl Talk 2		
					Girl Talk (4 <sup>th</sup> - 7 <sup>th</sup> )		



### 三、三角洲藥物濫用者住宿式治療中心(TROSA)宣傳資料





# Thank you for your support

Dear Friends,

## Thank you for supporting TROSA.

Together, over the past year, we provided comprehensive recovery services to nearly 500 men and women each day—all at no cost to those we serve. Our daily care includes housing, food, clothing, health services, vocational training, counseling, education advancement opportunities, continuing care for our graduates, and so much more.

While we help men and women overcome addictions to all substances, opioids remain the most-reported primary drug of addiction for our residents, and this mirrors what our nation is experiencing. According to a new report, *Facing Addiction in America: The Surgeon General's Spotlight on Opioids*, in 2017 the United States lost more than 131 lives to opioid overdose deaths each day.

As the need grows, so does our response. And thanks to your generous support, this past year has been a time of transformative growth here at TROSA. In November 2017, we opened our

new Comprehensive Care Center. Funded thanks to an outpouring of generosity from public and private donors, the Care Center enhances the vital services we bring to our residents.

This past year also saw us move forward in the planning stages of expanding to a second location in the Triad region of North Carolina, and we look forward to sharing our plans with you soon.

Thank you for taking the time to read about the highlights of our year. Your generous contributions make all these achievements possible.

Continued thanks,

*Kevin McDonald*

**Kevin McDonald**  
TROSA Founder, President, & CEO

*Greg Britz*

**Greg Britz**  
Chair, TROSA Board of Directors

## 2017-2018 Board of Directors

Greg Britz - Chair  
Catherine Gilliss - Vice Chair  
Tom Allin  
David Freed

Dan Glaser  
Wendy Kuran  
Fran Mauney  
Kevin McDonald

Prue Meehan  
Joyce Mitchell-Antoine  
Miles R. Palmer  
Garrett Putman

Amir H. Rezvani  
Ernest C. Roessler  
Gail Roper  
Lao Rubert

Matt Springer  
T. Stran Summers  
Tad vanDusen  
Jonathan Woodall

**A year of success...  
thanks to you!**

2017-2018 was another successful year for TROSA thanks to your generosity and support.



At our 3rd annual BBQ & Friends fundraiser, we raised a record amount of revenue: over \$80,000!

An award-winning year for TROSA! Thanks to everyone who voted for us in these local awards:



**Indy Week:**  
Best Charitable Group  
Best Nonprofit in Durham County  
Best Landscape Company  
Best Moving Company  
Best Furniture Store  
Best Home Furnishing Store

**Durham Magazine:**  
Best Landscaper  
Best Thrift Shop



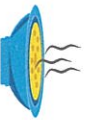
## How TROSA serves

In 2017-2018, TROSA served **925** men and women. On average, we served **472** residents each day.

We coordinated **8,777** medical appointments.



We cooked and served **516,471** meals.



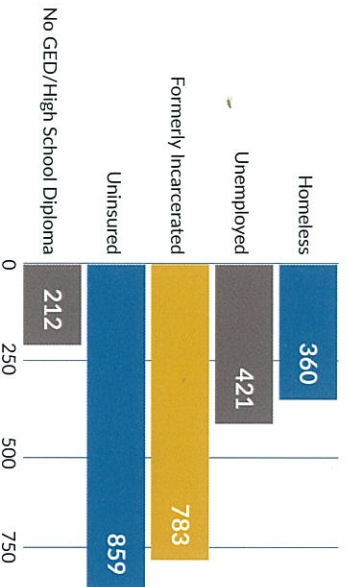
We prepared **99** men and women to earn their GED.



**100%** of TROSA graduates had employment upon leaving the program.



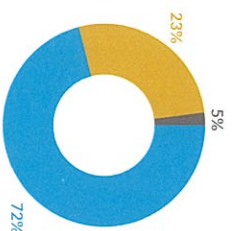
TROSA serves our most vulnerable citizens. Here's a snapshot of our 2017-2018 resident population **before** they came to TROSA:



**Inspiring Numbers!** One year after graduation, **90%** of graduates report staying sober and having employment.

## An investment that saves lives

\*Percentages reflect TROSA's 2017-2018 fiscal year



### REVENUE

72% Earned revenue: **Social enterprises** & donated goods and services  
23% Philanthropic support, government grants & contracts  
5% Other

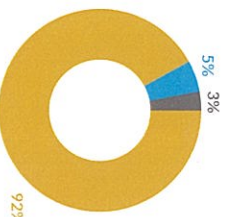
### What are TROSA's Social Enterprises?

- TROSA Moving and Storage
- TROSA Lawn Care
- TROSA Thrift Store
- TROSA's Holiday Tree Lots

Managed and operated by residents and graduates of our program, these provide much more than earned revenue. They also serve as invaluable vocational training for our residents that help to build job and life skills, such as teamwork.



TROSA tree lot



### EXPENSES

92% Program services  
5% Administration  
3% Fundraising

Last year, it cost about \$17.6M to keep TROSA open for the year, providing 24-hour services to our clients.



## TROSA welcomes graduates to staff positions

70% of TROSA's staff are graduates of residential recovery programs, and most have graduated from TROSA. In 2017-2018, TROSA welcomed two graduates as staff members: John, Residential House Manager in our Men's Program, and Daniel, Construction Field Operations Manager.

As TROSA continues to grow and our staff needs increase, we look to our TROSA graduates to lead the way as role models for all of our residents, providing a unique, personal perspective on what it means to struggle with—and overcome—addiction.

### Spotlight on new TROSA graduate staff member: John

John, from Greensboro, went through a long-term program for his alcohol use disorder in the 1990s. He met his wife at that program, and both were clean and sober for many years until his wife developed hepatitis C and cirrhosis of the liver—the sad legacy of prior drug use. She passed away in 2014, and John turned to pain pills and alcohol to cope with the pain of losing her. He realized that was not the legacy she would have wanted for him, and that he needed help. John turned to TROSA to start over, to help him regain his sobriety, and to counsel him in his grief.

Being at TROSA helped John figure out what gives him purpose—mentoring the new TROSA residents. When he graduated from the program, he applied to be Staff-in-Training, a competitive structured internship for graduates with the goal of becoming a staff member. In September 2017, he was hired as Residential House Manager in the Men's Program. John is a role model to many here at TROSA, and we are proud to give him the opportunity to let his talents shine.

**“Helping others is what makes me happy,” says John.**





## NEWS & EVENTS

### TROSA opens new Comprehensive Care Center thanks to successful capital campaign

Thanks to the generosity of our supporters, TROSA completed its first-ever capital campaign and opened our new 10,000 square foot Comprehensive Care Center on November 1, 2017. The modern building adds examination rooms, private counseling rooms, and expanded classroom space. This building fully integrates our Health Services and Intake department under one roof. Last year, our Intake office received an average of 80 calls a day. With demand for TROSA increasing, integrating our departments was critical to serving the needs of future and current residents.

Our great thanks to the General Assembly of North Carolina; to our building partners CT Wilson Construction, Coulter Jewell Thames, and MHAworks; and to our lead donors Peter J. and Prudence F. Meehan, Oak Foundation, Blue Cross and Blue Shield of North Carolina, and Duke Health. For more information about the Comprehensive Care Center, please visit [www.trosainc.org/comprehensive-care-center](http://www.trosainc.org/comprehensive-care-center)



### Donate & Learn More

Visit: [www.trosainc.org/donate](http://www.trosainc.org/donate)  
Email: [development@trosainc.org](mailto:development@trosainc.org)  
Call: 919-419-1059

### TROSA is expanding to the Triad

Due to the growing need for our unique recovery services, TROSA announced plans to open a second campus in the Triad, which includes Forsyth and Guilford counties. TROSA Triad is projected to open in 2019. It will be a smaller campus, with plans to serve a daily average of 200 residents within its first three years of operation. We look forward to sharing more in the coming year!



### Celebrating 25 Years

In 1994, TROSA opened its doors to serve its first 13 residents. In 2019, we will celebrate TROSA's 25th anniversary—25 years of helping individuals on the path to recovery. We absolutely could not have reached this milestone without dedicated supporters like you. To stay updated with anniversary happenings throughout the year, please sign up for our e-newsletter at [www.bit.ly/TROSA-News](http://www.bit.ly/TROSA-News).



*Why the Triad? The need for TROSA grows: Forsyth and Guilford counties have been 2 of TROSA's top 5 most-served counties.*





## Ways to Support TROSA

### What is TROSA?

TROSA is an innovative, multi-year residential program that empowers substance abusers to be productive, recovering individuals by providing comprehensive treatment, work-based vocational training, education, and continuing care. TROSA's services are provided entirely free of charge.

### TROSA Provides...

- Group and Individual Counseling
- Vocational Training & Education Opportunities
- Access to Health Care
- Food, Housing, and Clothing
- Continuing Care and Transitional Services

### As a Donor, You'll Receive...

- Monthly e-Newsletters
- Annual Reports
- Early notification about TROSA events

### How Can I Make a Gift?

Online: [www.trosainc.org/donate](http://www.trosainc.org/donate)

By Mail: TROSA Development  
1820 James Street Durham, NC 27707

Donation questions?  
Email [development@trosainc.org](mailto:development@trosainc.org)



## Use TROSA's Businesses and Refer a Friend

### TROSA Moving and Storage



Interstate & Local Moves  
Climate-Controlled Storage

*Voted Best Movers  
by the Herald-Sun and  
INDY Week*

Call Today for a Quote!  
**(919) 419-1059**

### TROSA Lawn Care

Professional Lawn Care  
Residential & Commercial Properties

*Voted Best Lawn Care  
by the Herald-Sun and  
INDY Week*

Call Today for an Estimate!  
**(919) 419-1059**

### TROSA Thrift Store & Frame Shop

Quality Used Goods  
Custom Picture Framing

3500 North Roxboro Street, Durham  
Open Tuesday - Sunday | (919) 220-6119





四、108 年 8 月 26 日中午場公開論壇海報

2019 DUKE HEALTH FORUM

# From Cure to Care

In the Pursuit of Population Health & Wellbeing



Monday, August 26, 12:00-1:15 pm

GREAT HALL, TRENT SEMANS CENTER, DUKE UNIVERSITY

Lunch provided to registered attendees. <http://jhfc.duke.edu/pomp/HealthForum2019>



PANELISTS:



**Lisa Piercey, MD, MBA, FAAP**  
*Commissioner*  
Tennessee Department of Health



**Li-Chiung Su, PhD**  
*Deputy Minister*  
Taiwan Ministry of Health and Welfare



**Karen Smith, MD, MPH**  
*Former Director*  
California Department of Public Health



**John Wiesman, DrPH, MPH**  
*Secretary*  
Washington State Department of Health

MODERATOR:



**Christopher Koller**  
*President*  
Milbank Memorial Fund

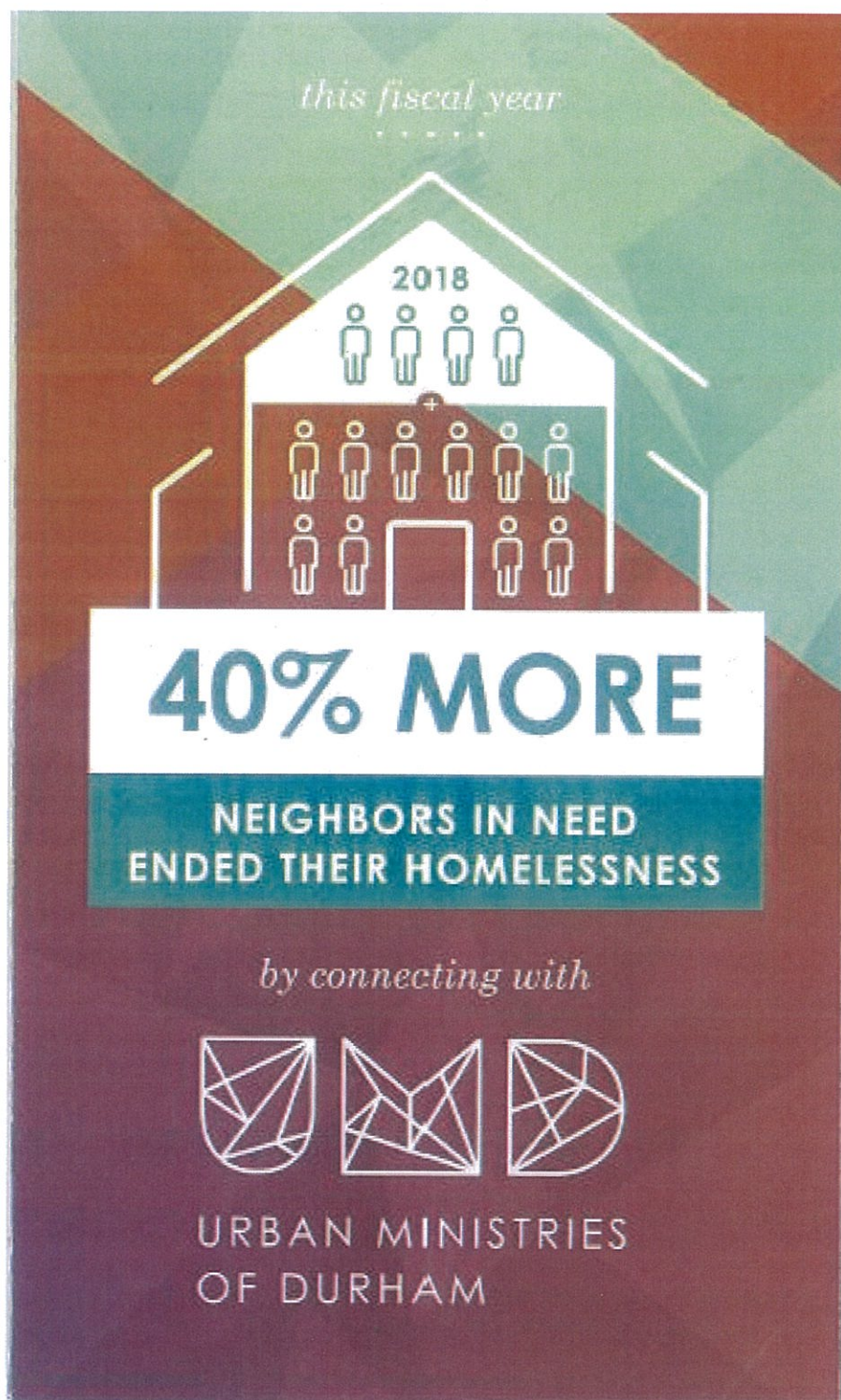
*Presented by* DUKE POLICY & ORGANIZATIONAL MANAGEMENT PROGRAM

Co-Sponsored by Duke Center for International & Global Studies, Dept. of Community & Family Medicine, Bass Connections, Dept. of Population Health Sciences, Duke Cancer Institute, and John Hope Franklin Center for Interdisciplinary & International Studies

The lunch forum is free and open to the public. Parking is available at Duke Medicine Circle Garage on Trent Drive.



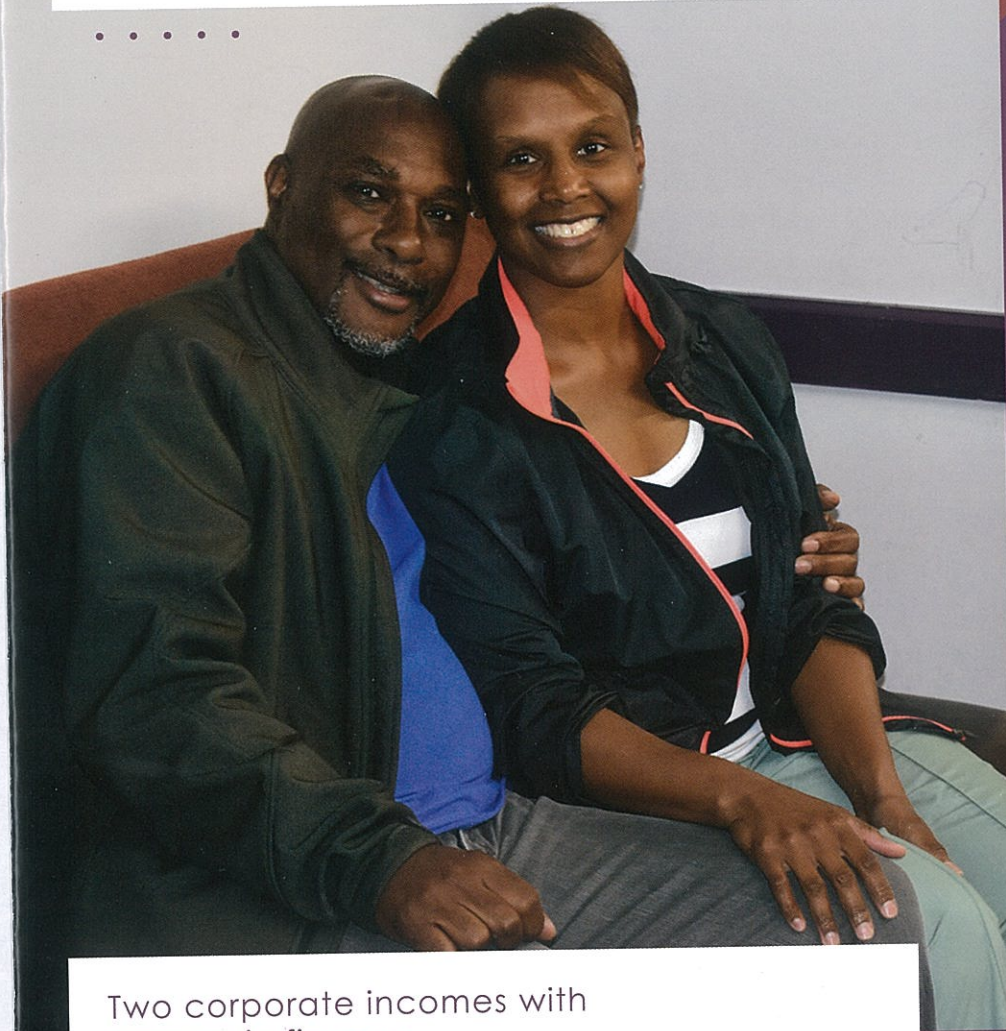
五、北卡州德罕市聯合援助與收容所(UMD)單張及 KPI 指標





## A REVERSAL OF FORTUNE THIS TIME, IN THE RIGHT DIRECTION

.....



Two corporate incomes with  
careers in finance.

A home with a car in the garage.

Hours spent volunteering at local charities,  
mentoring members of a church youth group  
and sitting on the school board.

.....

Could you see yourself in this picture?

Now, look again. Only this time, a few months  
have passed. And you're homeless.

**It happened to Tracy and Vekekia Prince.**





## FOOD, SHELTER AND A FUTURE

The story of Tracy and Vekeia Prince demonstrates that we are all just one or two bad breaks away from homelessness. Happily, their journey also confirms that there is help, hope and a way forward for those in need, thanks to Urban Ministries of Durham – and caring individuals like you.

Durham's renaissance over the past 15 years has transformed our community into a boom town for many. Today, we consistently rank as a top-ten destination for entrepreneurs, foodies and retirees. However, the flip side of this success is that many longtime residents – already trapped in multi-generational poverty – are being displaced by gentrification.

Durham County leads the state of North Carolina with an average of 900 evictions per month. On any given night, some 350 people are experiencing homelessness in our community, with many more living on the brink. Neighbors are sleeping in cars, camping in the woods and huddling in downtown doorways. This includes children, who make up 14% of Durham's homeless population. This is unacceptable. With prosperity comes a special obligation to ensure that no one is left behind.

Your generous investment says to those we serve, "You are valued and a better life awaits you – if you commit to do what it takes." This past year, you enabled UMD to provide 54,378 nights of shelter and helped 243 homeless individuals exit into permanent housing, a 40% increase from Fiscal Year 2016-17. As you read through this annual report, you'll see additional statistics that capture the impact of your investment, but it's stories like the Prince's that make these numbers come alive.

This year, we are working to meet the needs of nearly 6,000 neighbors, including 925 individuals who will stay in our shelter. We want to help at least 275 people exit homelessness but realize this is an ambitious goal, especially since clients are having to wait longer and longer to move out due to a shortage of affordable housing. We are collaborating with partners such as the Durham Housing Authority and Durham Congregations in Action to find creative solutions for some, but broader action is needed. With your support, we will continue to work closely with public and private partners to create an environment where everyone in Durham can obtain an affordable place to live.

**Thank you for being with us – and your neighbors in need – every step of the way.**

*Sincerely,*

*Sheldon Mitchell, executive director*



## MISSION

Urban Ministries of Durham connects with the community offering food, shelter and a future to neighbors in need.

## THIS FISCAL YEAR

JULY 1, 2017 - JUNE 30, 2018



.....

# 54,378

**Nights of shelter**  
were provided to  
homeless neighbors



.....

# 792

Homeless neighbors  
were **provided**  
**with shelter**

## CORE VALUES

**Respect:** We believe in the inherent dignity and value of all people and believe no one's basic human needs should go unmet.

**Collaborate:** We believe in working with homeless neighbors to create a better future.



community to end homelessness and fight poverty by  
need.



# 243

People **ended  
their homelessness**  
by connecting with UMD

.....



## 248,028

**Meals were served**  
to hungry neighbors in  
the community café



## 500+

Households per month  
**received groceries  
and clothing**

**Collaboration:** We work in concert  
with many other organizations to end  
homelessness and extreme poverty.

**Accountability:** Each person owns  
the successes and setbacks that  
result from their choices.



# THANK YOU

.....

to all the caring people and organizations who made financial gifts to improve 5,792 lives in FY 2017-18. Unless you asked to remain anonymous, your generosity has been acknowledged on

## UMD'S DONOR WALL OF NAMES AT

<http://tinyurl.com/UMDgivers>

**4,166** *volunteers donated* **26,748**  
*hours to end homelessness and fight poverty last fiscal year*

## REVENUES

### BY SOURCE

Foundations	• • •	\$913,302
Individuals	• • •	\$572,971
Government	• • •	\$564,998
Special Events	• • •	\$126,819
Communities of Faith	• • •	\$123,018
Workplace Giving & Other	• • •	\$113,922
Business, Civic & Community Groups	• • •	\$75,147
Memorials/Honoraria	• • •	\$61,417
In-Kind Donations	• • •	\$1,440,517

## EXPENSES

### BY CATEGORY

Community Shelter	• • •	\$1,736,410
Community Café	• • •	\$934,199
Food Pantry & Clothing Closet	• • •	\$493,738
Community Outreach & Enrichment	• • •	\$67,877
Management & General	• • •	\$293,936
Fundraising & Development	• • •	\$281,043



.....

A job loss and a medical emergency were all it took to cast the Princes out of the middle class, through cracks every step of the way down and into homelessness. It could happen to anyone.

A self-described warrior, Tracy is a 57-year-old Gulf War veteran. After nearly a decade in the army, he built a successful career in mortgage lending, where he met Vekekia at an Autism Awareness volunteer event through their employer, Chase Bank. United by their deep faith and commitment to each other, "Kee" and Tracy ran a tight ship. Life was shaping up to be pretty comfortable for the Princes five years into their marriage.

Because they had no children at home, they felt free to relocate to "write a new chapter." But shortly after moving, Tracy's company was acquired and downsized, leaving him suddenly unemployed. A bad break became a full-blown nightmare when Kee heard the words: "Honey, I'm not feeling so good."

A trip to the ER revealed that Tracy had suffered a stroke. While the damage was not permanent, he needed time to recover. Because they were between jobs, they had no health insurance. Instead of hitting the pavement to find work and housing, the Princes were suddenly drowning in debt. Looking back at how quickly events spiraled out of their control, Kee says, "We were like Job in the Bible. 'Where did [we] err?'"

When Veterans Affairs suggested they seek help at Urban Ministries of Durham, the Princes were stunned. They had never needed financial assistance before. They said, "We're used to helping." But their car had been repossessed, and their money had run out. Once they were here, Tracy and Kee realized they were no different than anyone else at UMD. "We never imagined needing food stamps or having to wear secondhand clothes. But now, we were in need."

In addition to food and shelter, the Princes were connected to resources to help them get back on their feet. Tracy obtained benefits from the Durham VA and Department of Social Services, and was able to begin preparing to re-enter the workforce through StepUp Durham and NC Works. Recently, he was hired by Amazon. With help from Dress for Success, Kee was able to quickly secure work in her now chosen field as a pharmacy tech, after landing three job interviews in one week!

Through our rapid-rehousing program, the Princes are on track to move into permanent housing in less than 30 days. For them, "this is good transitional housing." UMD has given them the chance to get their life back. And generous donors have allowed them to do so free of charge, ultimately benefiting us all.

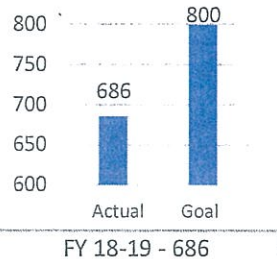
"We're going to land on our feet and continue to serve as we have always done."

*Thank you for giving the Princes and others in need the tools and time to rebuild their lives. And for many others, the resources to build a life with stability and purpose for the very first time.*



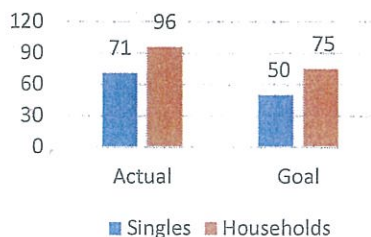
# UMD Shelter KPI July 2018 - June 2019

## Number of People Sheltered



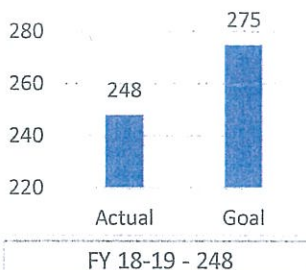
The number of persons in shelter at the beginning of each month, plus the total number of new persons who entered during the month.

## Length of Stay



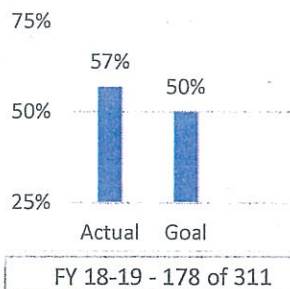
This measure requires calculating the average number of days from entry into shelter to exit to any destination each month. To calculate the average, add together the total number of days that each individual/household who exited that month from date of shelter entry to date of exit. Then, divide this sum by the total number of households who exited each month.

## Exits to Permanent Housing



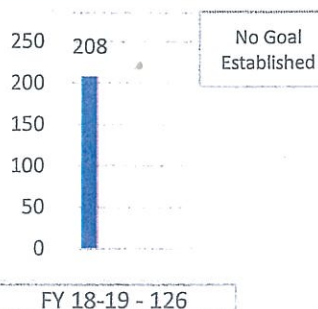
During each month, enter the total number of households exiting to a permanent housing destination. Permanent housing may include private, unsubsidized housing; subsidized housing; permanent supportive housing; or housing shared with friends or family in a sustainable living situation (one that should not be categorized as "temporary"). Permanent housing does not include shelter, a transitional housing program, jail or prison, or a treatment facility.

## Households Diverted from Shelter



The number of households diverted from shelter by helping them identify immediate alternate housing arrangements by providing counseling, connecting them with services and financial assistance to help them maintain and/or return to permanent housing.

## Residents Employed



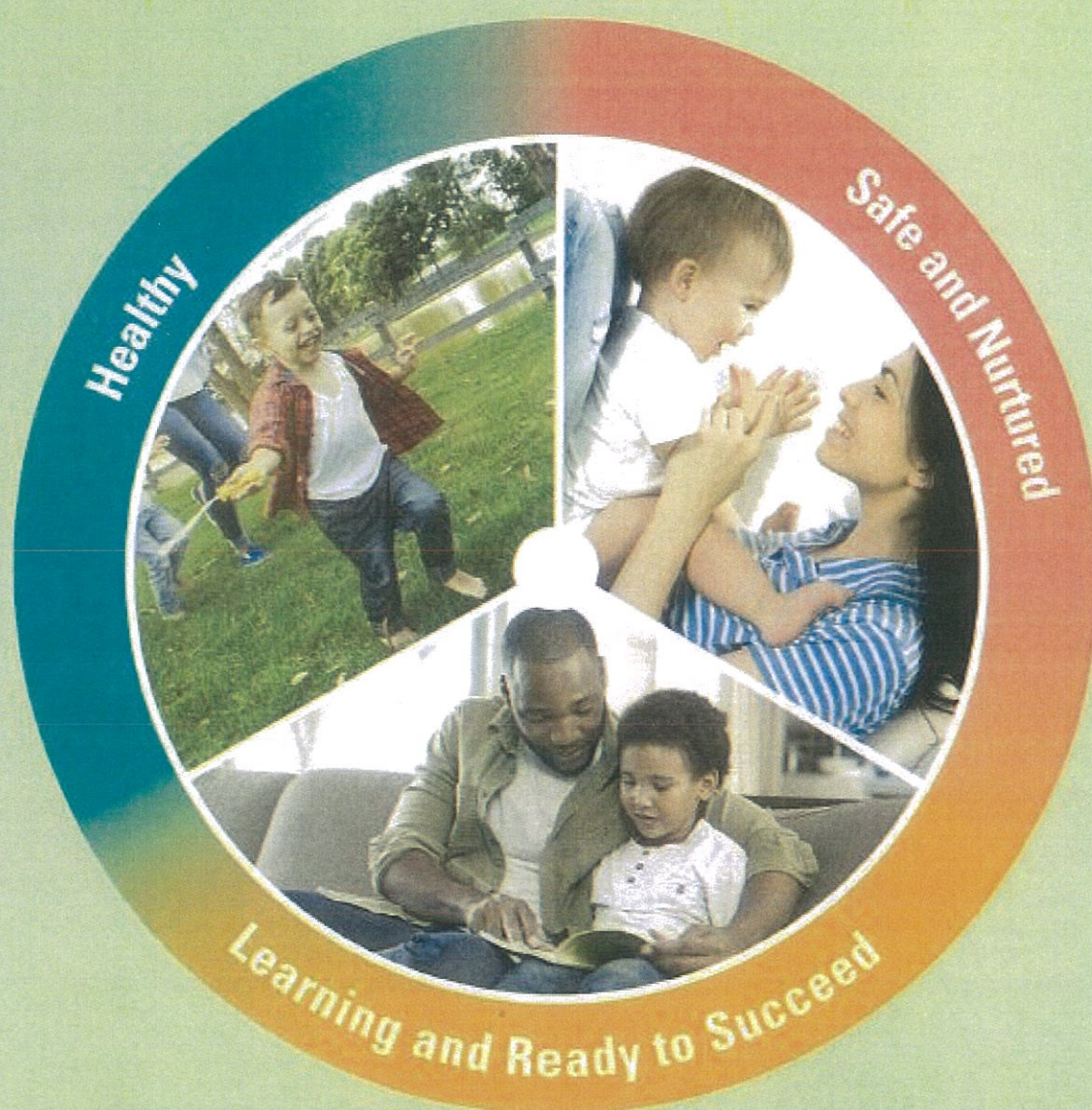
During each month, the total number of residents participating in workforce development who obtained part-time or full-time employment.



六、北卡州早期兒童行動計畫執行成果

NORTH CAROLINA EARLY CHILDHOOD ACTION PLAN  
**Executive Summary**

FEBRUARY 2019



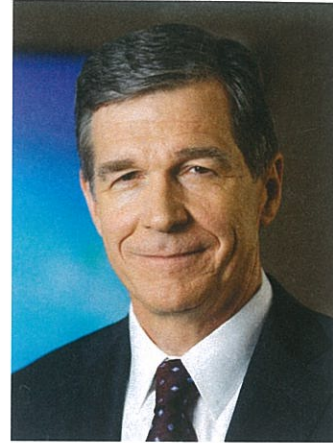




North Carolina's future depends on our children today. We know that the foundation for future learning, health and well-being is built during early childhood. When we commit to giving every child a strong foundation in their first years of life, we create healthy and vibrant communities for all of us.

Our state has been a national leader in advancing opportunities for young children, including founding Smart Start, the first statewide early childhood public-private partnership in the country, and implementing one of the highest quality pre-k programs in the country. We are, and should continue to be, proud of these accomplishments.

But our work is far from done. Too many of our young children face barriers that can hold them back from achieving everything they can. Too many experience hunger on a daily basis, or abuse and neglect at home. Too many are already behind on their reading levels by third grade. Too many babies die before their first birthday. We have a shared responsibility to take on racial and other disparities that impact young children's well-being. We must do more to provide families and communities across our state with better supports, tools and choices so that every child in North Carolina has the opportunity to succeed.



When I issued Executive Order 49 in the summer of 2018, I challenged our state's Department of Health and Human Services and the Early Childhood Advisory Council to spearhead the development of a statewide plan for achieving better outcomes for young children's health, safety, well-being, and learning success.

With the input of over a thousand North Carolinians, the Early Childhood Action Plan lays out a bold vision and roadmap for how we can create change for our young children by 2025.

I know we can reach these goals, but we can only get there if we do it together. Right now, today - whether you are a parent or grandparent, a small business owner, an educator, a pediatrician, a law enforcement officer, an elected official, or just someone who wants to make a difference for young children - I am asking you to take action for our young children.

My goals as Governor are to help all North Carolinians be better educated, healthier, and have more money in their pockets so that they can live more abundant, purposeful lives. There is no better place to start than at the beginning, by committing to our young children.

Thank you for all you do and will do for our children and our great state. Together, we will reach our goals.

Governor Roy Cooper



# Our Vision for NC's Children

**Vision Statement: All North Carolina children will get a healthy start and develop to their full potential in safe and nurturing families, schools and communities.**

By 2025, all North Carolina young children from birth to age eight will be:

1. **Healthy:** Children are healthy at birth and thrive in environments that support their optimal health and well-being.
2. **Safe and Nurtured:** Children grow confident, resilient, and independent in safe, stable, and nurturing families, schools, and communities.
3. **Learning and Ready to Succeed:** Children experience the conditions they need to build strong brain architecture and skills that support their success in school and life.





# Guiding Principles

Our fundamental beliefs to be used throughout the development and implementation of the Early Childhood Action Plan.

## 1. Children and families are at the center of our work.

North Carolina's early childhood systems serve children in the contexts of families and communities. Child development is a dynamic, interactive process that is not predetermined; it occurs in the context of relationships and communities. We know it is possible, and essential, to build resilience and healthy development by creating positive and protective factors in young children's lives, including strong relationships between children and caring adults.

## 2. Brain and developmental science are fundamental.

Brains are built through children's earliest experiences and through the environments around them. During a child's first eight years of life, brain architecture is forming a foundation for all future learning, behavior, and health. While positive experiences and environments can set up a child on a stronger life-long path, traumatic experiences or environments during those formative years can have long-lasting, detrimental impact.

## 3. Alleviate inequity to ensure that all of North Carolina's children can reach their fullest potential.

North Carolina is committed to equity of opportunity for all children by confronting disparities through strategic commitments across the state. Child outcomes that vary disproportionately across race, ethnicity, socioeconomic status, physical and developmental ability, and geography must be recognized in order to identify and implement strategic interventions.

## 4. Build upon existing strengths and partnerships in early childhood systems.

North Carolina has a rich history of innovation in early childhood. The Early Childhood Action Plan builds upon existing efforts and promotes diverse participation, cross-sector collaboration, and partnerships with families and organizations that have worked to improve child and family outcomes.

## 5. Set bold priorities and achievable goals for North Carolina's young children.

We must commit to a prioritized set of areas to tackle for our state's children, knowing that the process of prioritizing makes accomplishing outcomes more feasible. Not only must we prioritize, but we must hold ourselves accountable with measurable and achievable goals for each priority, because without accountability, we may not see the changes our children deserve.

## 6. Track progress toward all goals, ensuring transparency, accountability, and good stewardship of resources.

We will report on the outcomes of our work and use data to continuously improve our efforts to ensure cost-effective strategies that result in the highest impact for children. Effective early childhood interventions can yield significant positive returns on investment to communities through better outcomes in education, health, social behaviors, and employment.



# 2025 Goals At-A-Glance

**Goal 1: Healthy Babies**

Babies across North Carolina from all backgrounds will have a healthy start in their first year of life.

**Goal 2: Preventive Health Services**

Babies, toddlers, young children, and their families will have regular, ongoing access to high-quality health services.

**Goal 3: Food Security**

Babies, toddlers, young children and their families across North Carolina will have access to enough healthy food every day.

**Goal 4: Safe and Secure Housing**

Babies, toddlers, young children and their families across North Carolina will have access to safe, secure and affordable housing.

**Goal 5: Safe and Nurturing Relationships**

Babies, toddlers and young children across North Carolina will grow up with safe and nurturing family and caregiver relationships.

**Goal 6: Permanent Families for Children in Foster Care**

Babies, toddlers and young children in foster care will grow up in stable, consistent and nurturing families, whether that is with the child's birth family or through an adoptive family.

**Goal 7: Social-Emotional Health and Resilience**

Babies, toddlers and young children across North Carolina will express, recognize and manage their emotions in a healthy way, especially under stress.

**Goal 8: High-Quality Early Learning**

Babies, toddlers and young children across North Carolina will have access to high-quality opportunities to engage in early learning.

**Goal 9: On Track for School Success**

Young children across North Carolina will enter kindergarten on track for reaching their developmental goals.

**Goal 10: Reading at Grade Level**

Young children across North Carolina will read on grade-level in elementary school, with a particular focus on African American, American Indian and Hispanic children who face the greatest systemic barriers to reading success.





## GOAL 1: HEALTHY BABIES

**Babies across North Carolina from all backgrounds will have a healthy start in their first year of life.**

Every North Carolina baby deserves to have a healthy start. Unfortunately, too many babies in our state face great challenges at birth, such as preterm birth and low birth weight.

Infant mortality can be used as a measure of child, family and community health. It is a rate of infant death, but is also used more broadly to indicate societal health, poverty levels, racial disparities, and the availability and quality of health services in a community.<sup>1</sup>

In North Carolina, stark disparities in infant mortality exist. For example, African American infant deaths persistently occur at over double the rate of white infant deaths.<sup>2</sup> The North Carolina Early Childhood Action plan focuses specifically on reducing this disparity, recognizing that overall birth outcomes for children will then also improve.

### OUR SHARED RESPONSIBILITY

Decrease disparities in infant mortality, thereby improving overall birth outcomes for all children.

### BY THE NUMBERS

- NC has the 11th highest infant mortality rate in the country.<sup>3</sup>
- The African American infant mortality rate in NC is over twice as high as the white infant mortality rate.<sup>2</sup>





## GOAL 2: PREVENTIVE HEALTH SERVICES

**Babies, toddlers, young children, and their families will have regular, ongoing access to high-quality health services.**

Timely health check-ups are essential to support the optimal health and well-being of babies, toddlers and young children across North Carolina. During well-child visits, healthcare professionals provide preventive care, such as immunizations, lead screenings, and developmental and social-emotional screenings, to identify possible health concerns as early as possible. Parents also have a chance to talk about their concerns, get information, guidance and advice about their child's health and development, and get connected to the right services for their child.

The North Carolina Early Childhood Action Plan focuses on timely well-child check-ups, and also includes other important indicators of children's health. For example, access to health insurance for children and families is critical to ensure that children receive the healthcare they need. Other services, including oral healthcare, lead screenings and immunizations, are important ways of protecting children from potential harmful environmental exposures and disease.

### OUR SHARED RESPONSIBILITY

Increase the percentage of young children who get timely check-ups.

### BY THE NUMBERS

- Nearly one third of children ages 3-6-years-old enrolled in NC Medicaid or Health Choice do not receive on time well-child visits.<sup>4</sup>
- Almost 20% of NC heads of household with young children do not have health insurance.<sup>5</sup>





## GOAL 3: FOOD SECURITY

**Babies, toddlers, young children and their families across North Carolina will have access to enough healthy food every day.**

Today, too many North Carolina children do not know if there will be enough food for them every day, or do not get enough quality, nutritious food. Food insecurity puts young children at risk for negative health, developmental, behavioral and academic outcomes.<sup>6-9</sup> Food insecurity also puts young children's parents and other caregivers at risk for poor physical and mental health, and can lead to family conflict.<sup>10, 11</sup>

The North Carolina Early Childhood Action Plan focuses on decreasing child food insecurity, but also includes measures that address overall healthy nutrition, like child obesity and the percent of young children who receive supplemental food and nutrition services.

### OUR SHARED RESPONSIBILITY

Decrease rates of food insecurity among young children.

### BY THE NUMBERS

- Over 1 in 5 children across North Carolina face hunger.<sup>12</sup>



## 2025 TARGETS AT-A-GLANCE: HEALTHY

### Goal 1: Healthy Babies

**2025 TARGET:** By 2025, decrease the statewide infant mortality disparity ratio from 2.5 to 1.92, according to data provided by the State Center for Health Statistics.

### Goal 2: Preventive Healthcare

**2025 TARGET:** By 2025, increase the percentage of North Carolina's young children enrolled in Medicaid and Health Choice who receive regular well-child visits as part of a healthcare delivery process that provides comprehensive, patient-centered, accessible, quality care as recommended for certain age groups, according to data provided through NC Medicaid and HEDIS measures.

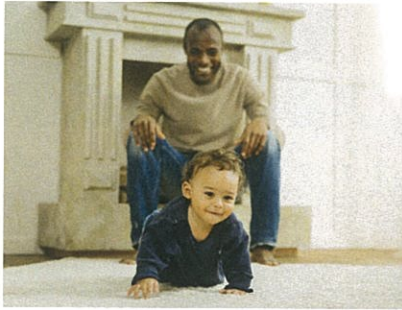
- For children ages 0-15 months, increase from 63.9% to 68.7%.
- For children ages 3-6 years, increase from 69.8% to 78.5%.

### Goal 3: Food Security

**2025 TARGET:** By 2025, decrease the percentage of children living across North Carolina in food insecure homes from 20.9% to 17.5% according to data provided by Feeding America.







## GOAL 4: SAFE AND SECURE HOUSING

**Babies, toddlers, young children and their families across North Carolina will have access to safe, secure and affordable housing.**

Too many children across North Carolina do not have a safe and stable place to sleep at night. Some families may be living in shelters, in their cars, or temporarily living with friends or relatives. Unstable housing is stressful, especially for families with young children.<sup>13</sup> This puts these children at a higher risk for poor physical health, and mental health and behavioral problems.<sup>14-16</sup> They are also at risk for delayed language and literacy skills, attention difficulties, and poor self-regulation.<sup>15, 17, 18</sup> They may also struggle in school with relationships with their classmates and their teachers.<sup>19</sup>

Children living in unsafe or unstable conditions also often face greater challenges at home and in their communities, such as family and neighborhood violence, maltreatment, food insecurity, chronic illness, and lack of proper healthcare.<sup>20-22</sup> They may face unhealthy home environments that expose them to things such as lead, pests, poor ventilation, or mold, that could lead to health problems such as asthma, or physical dangers that could lead to injury. Further, caregivers of young children who experience homelessness often report poor health, signs of maternal depression or other mental illness, putting them at risk for low confidence in parenting and using harsh parenting practices.<sup>23</sup>

The North Carolina Early Childhood Action Plan focuses on decreasing rates of homelessness for all young children across the state, and particularly among those children participating in high-quality early learning programs. There are also other measures in the plan that focus on safe living environments, such as reducing emergency care for asthma and tracking elevated blood lead levels, both of which may be caused by harmful environmental exposure.

### OUR SHARED RESPONSIBILITY

Decrease the number of young children experiencing homelessness.

### BY THE NUMBERS

- Over 26,000 NC children under age 6 are homeless, or roughly 1 in 28.<sup>24</sup>





## GOAL 5: SAFE AND NURTURING RELATIONSHIPS

**Babies, toddlers and young children across North Carolina will grow up with safe and nurturing family and caregiver relationships.**

Strong, positive relationships between children and their caregivers is a key ingredient for healthy brain development. When young children face severe adversity, such as abuse, neglect or witnessing violence, the structure and function of their brain and bodies can change. For some children, the level of stress produced by severe adversity causes their bodies to respond by staying set on high-alert, which can result in long-term health consequences.<sup>25</sup> Caregivers play an active role in shielding children from feeling overwhelming amounts of stress.

Child maltreatment is defined as abuse and neglect of a child under the age of 18 by a parent, guardian or caregiver. While child maltreatment occurs within families from all economic backgrounds, it is more common among children in low-income families.<sup>26</sup> Factors that can contribute to child maltreatment include the presence of adults who face substance use disorders, mental illness (notably maternal depression) and intimate partner violence.<sup>27</sup>

The North Carolina Early Childhood Action Plan focuses on reducing rates of child maltreatment as the primary measure of safe and nurturing relationships. When focusing on this measure, it is critical to note the limitations of child maltreatment data, including that minority populations are disproportionately reported, investigated and substantiated for cases of maltreatment.

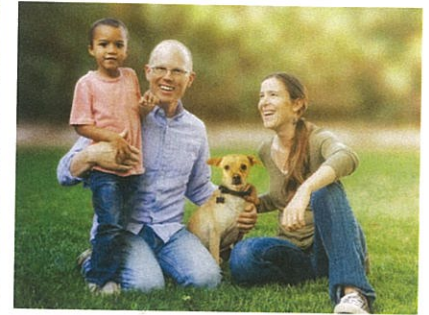
### OUR SHARED RESPONSIBILITY

Reduce the number of children who experience abuse or neglect.

### BY THE NUMBERS

- Children under age 4 make up over half of substantiated child maltreatment cases.<sup>28</sup>





## GOAL 6: PERMANENT FAMILIES FOR CHILDREN IN FOSTER CARE

**Babies, toddlers and young children in foster care will grow up in stable, consistent and nurturing families, whether that is with the child's birth family or through an adoptive family.**

Young children need safe, permanent homes with nurturing and secure relationships with adults for healthy growth and development.<sup>29</sup> For children who must be placed in foster care, being removed from their home and placed in a foster home may be stressful.

North Carolina is committed to ensuring that all children in foster care across the state grow up in a home environment with safe and nurturing family relationships, whether that is with the child's birth family or through an adoptive family. Right now, too many of North Carolina's children in foster care spend hundreds of days in the foster care system before being placed in a permanent home.

In order to reach North Carolina's commitment to stronger, lasting relationships for children in the foster care system, the Early Childhood Action Plan focuses on decreasing the number of days it takes for a child in the foster care system to be reunified with his or her family, if appropriate, or decreasing the number of days it takes for a child in the foster care system to be adopted, if reunification is not appropriate.

### OUR SHARED RESPONSIBILITY

Decrease the number of days young children spend in foster care.

### BY THE NUMBERS

- More than half of 4- and 5-year-olds in NC's foster care system spent over 1,000 days in foster care before being adopted.<sup>30</sup>





## GOAL 7: SOCIAL-EMOTIONAL HEALTH AND RESILIENCE

**Babies, toddlers and young children across North Carolina will express, recognize and manage their emotions in a healthy way, especially under stress.**

Social-emotional skills, such as the ability to recognize and manage one's emotions and the ability to understand the emotions of others, provide a foundation for building trusting relationships that are important at home, school and the work place. For example, skills like cooperation and helpfulness have been linked to positive outcomes later in life such as having a job, being physically and mentally well, and being less criminally involved.<sup>31, 32</sup>

The importance of social-emotional health and resilience for young children is becoming increasingly recognized nationwide. Currently, we do not have a strong statewide data source on young children's social-emotional health and resilience. North Carolina has an opportunity to be a national leader in developing the ability to track social emotional well-being for young children at a state level. The state has already begun work to identify appropriate data sources that would allow for this to be tracked.

### OUR SHARED RESPONSIBILITY

Become a national leader in developing a statewide measure of social-emotional health and resilience, and make steady progress on improving children's social-emotional health and resilience.

### BY THE NUMBERS

- Data not yet available. Promising data sources include the Survey of Well-being of Young Children (SWYC), and select indicators on the National Survey of Children's Health (NSCH).



## 2025 TARGETS AT-A-GLANCE: SAFE AND NURTURED

### Goal 4: Safe and Secure Housing

#### 2025 TARGET:

Part 1) By 2025, decrease the percentage of children across North Carolina under age six experiencing homelessness by 10% from 26,198 to 23,578, according to data from the Administration for Children and Families (ACF).

Part 2) By 2025, decrease the number of children in kindergarten through third grade enrolled in NC public schools who are experiencing homelessness by 10%, from 9,970 to 8,973, according to data provided by the NC Department of Public Instruction (NCDPI).



### Goal 5: Safe and Nurturing Relationships

**2025 TARGET:** By 2025, decrease by 10% the rate of children in North Carolina who are substantiated victims of maltreatment\*\*

- For children ages 0-3 years, reduce from 20.1 to 18.1 per 1,000 children
- For children ages 4-5 years, reduce from 14.5 to 13.1 per 1,000 children
- For children ages 6-8 years, reduce from 13.4 to 12.1 per 1,000 children

All data for this target is provided by the Division of Social Services Central Registry and NC FAST.

- For children aged 4-5 years, decrease the median number of days from 390 days to 351 days
- For children aged 6-8 years, decrease the median number of days from 371 to 334

Part 2) Adoption: By 2025, decrease the number of days it takes for a child in the foster care system to be adopted, if reunification is not appropriate.

- For children aged 0-3 years, decrease the median number of days from 822 to 730
- For children aged 4-5 years, decrease the median number of days from 1,006 to 730
- For children aged 6-8 years, decrease the median number of days from 988 to 730

All data for this target is provided by the Division of Social Services, Child Placement and Payment System (CPPS) and NC FAST.

### Goal 6: Permanent Families for Children in Foster Care

#### 2025 TARGET:

Part 1) Reunification: By 2025, decrease the number of days it takes for a child in the foster care system to be reunified with his or her family, if appropriate.

- For children aged 0-3 years, decrease the median number of days from 371 to 334

### Goal 7: Social-Emotional Health and Resilience

**2025 TARGET:** By 2025, North Carolina will have a reliable, statewide measure of young children's social-emotional health and resilience at the population level.

\* In setting this target, we acknowledge that current counts are likely to be an underestimation of homelessness among young children and that rates could increase as identification methods improve.

\*\* In setting this target, it is critical to note the limitations of these data, including that minority populations are disproportionately reported, investigated, and substantiated for cases of maltreatment.





## GOAL 8: HIGH-QUALITY EARLY LEARNING

**Babies, toddlers and young children across North Carolina will have access to high-quality opportunities to engage in early learning.**

High-quality early care and education programs help prepare children physically, academically, socially and emotionally. While children from all backgrounds can benefit from attending high-quality and affordable child care and education programs, children facing challenges related to poverty, disabilities or limited English proficiency often benefit the most from these programs.<sup>33</sup> A growing amount of evidence shows that high-quality child care programs help better prepare children become more on-track for school success, which supports them in becoming healthy, successful adults.<sup>34, 35</sup> Research also shows that employers benefit when employees' children are in quality child care arrangements.<sup>36</sup> When parents know their children are provided quality care that fosters healthy development, they are more productive and focused on work.

There is broad demand for high-quality early learning programs across the state. The North Carolina Early Childhood Action Plan focuses on two measures of families' access to child care programs: rates of eligible families enrolled in NC Pre-K and affordability of child care programs. Affordability is defined based on the percent of a family's income spent on child care. The plan also highlights other important measures centering around access to high-quality early learning, such as enrollment in Head Start, receiving child care subsidy and enrollment in high-quality programs, and higher education among early learning teachers.

### OUR SHARED RESPONSIBILITY

**Increase the percentage of eligible children enrolled in NC Pre-K and child care subsidy, and decrease the percentage of income families spend on high-quality child care and early learning programs.**

### BY THE NUMBERS

- Less than half of eligible children, approximately 30,000, are enrolled in NC Pre-K.<sup>37</sup>
- Nearly 12% of an NC family's income is devoted to infant care.<sup>37, 38</sup>
- Roughly one in five eligible children under age five, approximately 46,000, receive child care subsidy in NC.<sup>37</sup>





## GOAL 9: ON TRACK FOR SCHOOL SUCCESS

**Young children across North Carolina will enter kindergarten on track for reaching their developmental goals.**

A child's developmental progress at kindergarten entry has been linked to success in school and into adulthood.<sup>31, 39, 40</sup> Assessments of children's ongoing development, before they get to kindergarten, facilitates referrals and services to address identified needs. The North Carolina Early Childhood Action Plan focuses on increasing the percent of children across North Carolina who enter kindergarten at a level typical for their age group. In addition to the Kindergarten Entry Assessment (KEA), other forms of developmental screening, and appropriate supports for identified needs, are also important. Measures addressing these areas are included as secondary areas of focus.

### OUR SHARED RESPONSIBILITY

Increase the percentage of North Carolina's children who enter kindergarten on-track for reaching their developmental goals.

### BY THE NUMBERS

- Over 70% of children ages 0-3-years-old enrolled in NC Medicaid receive a developmental screening.<sup>41</sup>
- Kindergarten Entry Assessment (KEA) data is not yet available.\*

\* The North Carolina Department of Public Instruction (NCDPI) administers the KEA and is working to provide state-level reporting.





## GOAL 10: READING AT GRADE LEVEL

**Young children across North Carolina will read on grade-level in elementary school, with a particular focus on African American, American Indian and Hispanic children who face the greatest systemic barriers to reading success.**

Reading at grade-level in third grade is linked to children's early success in school, graduating ready for college or a career after high school, and becoming productive adults.<sup>42</sup> Beyond third grade, time in the classroom is less and less devoted to the fundamentals of learning to read, so learning to read well early is important for young children.<sup>43</sup> It is often said that a child learns to read until third grade and then reads to learn after third grade. Across North Carolina and the country, there are significant differences in reading achievement by race and ethnicity because of systemic factors that hold students back from being able to reach their full potential.<sup>44</sup>

The North Carolina Early Childhood Action Plan uses two data sources to measure reading proficiency. The first is North Carolina's end of grade tests (EOGs), which are administered to all public school students in third grade and above. The second is the National Assessment of Educational Progress (NAEP). The NAEP measures reading proficiency based on a sample of 4th grade students in each state so we can compare North Carolina's scores to others across the country.

### OUR SHARED RESPONSIBILITY

**Increase the percentage of children reading at or above proficiency in third grade.**

### BY THE NUMBERS

- Less than half, 45%, of North Carolina third graders read above proficiency on state EOGs.<sup>45</sup>
- Less than 40% of North Carolina fourth graders read proficiently on the NAEP.<sup>46</sup>



## 2025 TARGETS AT-A-GLANCE: LEARNING AND READY TO SUCCEED

### Goal 8: High-Quality Early Learning

#### 2025 TARGET:

Part 1) By 2025, increase the percentage of income-eligible children enrolled in NC Pre-K statewide from 47% to 75%.

Part 2) By 2025, decrease the percent of family income spent on child care, according to data provided by Child Care Aware America:

- Infant Care: Decrease from 11.6% to 7.0%
- Toddler Care: Decrease from 10.5% to 7.0%
- Four-Year-Olds: Decrease from 10.0% to 7.0%



### Goal 9: On Track for School Success

**2025 TARGET:** By 2025, increase the percentage of children across North Carolina who enter kindergarten at a level typical for their age group, according to the five domains of the NCDPI Kindergarten Entry Assessment (KEA).\*



### Goal 10: Reading at Grade Level

**2025 TARGET:** By 2025, increase the percentage of children across the state achieving high levels of reading proficiency according to the following measures:

Part 1) Increase the percentage of students reading above proficiency from 45.8% to 61.8% for third through eighth grade students on statewide end of grade tests (EOGs), consistent with the state's Every Student Succeeds Act (ESSA) Plan 2025 reading proficiency benchmark.

Part 2) Increase reading proficiency from 39% to 43% according to the fourth grade National Assessment of Educational Progress (NAEP).



\* The North Carolina Department of Public Instruction (NCDPI) administers the KEA and is working to provide state-level reporting.



## COMMITTING TO ACTION: Strategies for All of Us

As North Carolinians, we all have a role in improving the health, safety and well-being of young children from birth through age eight. Whether you are a parent, a health care provider, a policymaker, a business leader, a teacher or anyone else who is committed to our state's future, right now each of us can commit to actions that will create a better future for young children, their families and all of us.

Public and private partners across the state have come together to create an initial list of strategies that will help North Carolina move the needle on that vision and the 10 Early Childhood Action Plan goals by 2025.

### Healthy: Children are healthy at birth and thrive in environments that support their optimal health and well-being.



North Carolinians can support young children's healthy growth and development by:

- Closing the insurance coverage gap to ensure more families have regular access to physical, mental and oral health services.
- Increasing access to healthcare providers, including pediatricians, OB/GYNs, oral health providers and pediatric specialists, particularly in rural areas.
- Making it easier for young women to visit a primary care provider more regularly, which can help support healthy future pregnancies.
- Promoting referrals to and participation in early intervention services for infants and young children with developmental delays and disabilities, and their families.
- Making it easier for eligible families to enroll in supplemental food and nutrition benefits programs, especially during times of disaster and recovery.

- Promoting opportunities for young children to access breakfast and after-school meals during the traditional school year, as well as opportunities to receive meals on weekends and school breaks.
- Promoting exercise and healthy eating habits for young children in early care and learning programs, kindergarten through third grade classrooms, and at home with their families.



North Carolinians can create healthy environments for young children by:

- Encouraging breastfeeding-friendly policies and services in local communities.
- Increasing children's access to safe, clean drinking water and indoor and outdoor air.
- Reducing exposure to toxic substances, such as lead.
- Making more safe and affordable housing and transportation available for low-income families with young children.



### Safe and Nurtured: Children grow confident, resilient and independent in safe, stable and nurturing families, schools and communities.



North Carolinians can support safe, stable and nurturing families by:

- Promoting evidence-based home visiting and parent education programs.
- Providing better care for mothers facing depression.
- Providing increased access to research-based mental health services to children and adults who need them.
- Improving the process for getting children who are in the foster care system into permanent families.
- Investing in family-centered systems like the Smart Start network.



North Carolinians can support safe, stable and nurturing schools and communities by:

- Hiring more staff in supportive roles such as school counselors, social workers and school nurses.
- Training professionals who work with young children on best practices in mental health and resilience, including doctors, teachers, law enforcement and others.
- Eliminating or minimizing the use of suspension and expulsion in birth through third grade classrooms.
- Promoting family-friendly work places, such as paid sick leave, paid parental leave and reliable work schedules.
- Increasing wages and promoting tax policies for working families that support a high quality of life.
- Promoting access to higher education to improve young parents' ability to increase his or her income.

### Learning and Ready to Succeed: Children experience the conditions they need to build strong brain architecture and skills that support their success in school and life.



North Carolinians can support making high-quality early learning available to more families by:

- Increasing access to NC Pre-K, 4- and 5-star early learning programs, and other high-quality early childhood programs.
- Increasing funding for child care subsidy for eligible families.
- Increasing access to high-quality education programs and improving wages to attract, recruit and retain highly-qualified birth through third grade teachers.
- Making transitions between preschool and kindergarten easier for children, families and teachers.
- Increasing access to high-quality early childhood programs for children who are homeless, in foster care, and from immigrant families.
- Providing greater access to high-quality early learning programs and ongoing classroom supports for young children with disabilities and other special healthcare needs.



**Building Racial and Cultural Equity: Barriers along lines of race, ethnicity and other factors can limit a young child's access to opportunities.**



North Carolinians can help build racial and cultural equity by:

- Giving families and youth of color a seat at the table in program and policy design and implementation.
- Promoting learning environments for young children that are free from systemic racism and implicit bias.
- Training leaders who support young children and families in racial equity and cultural competence, including training on implicit bias, cultural variations in communication and interaction, adverse childhood experiences (ACEs), building resiliency, and child development.
- Using diagnostic and assessment tools in education and healthcare that are free of linguistic, racial and cultural bias.
- Hiring a diverse workforce of child- and family-facing providers across sectors, e.g. healthcare, education, law enforcement, ensuring more racial, ethnic, and geographic representation.



***What other strategies can we add? Where can you take action now?*** Visit [www.ncdhhs.gov/early-childhood](http://www.ncdhhs.gov/early-childhood) to commit to take action today!



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NC Early Childhood Foundation





AUGUST 2019

# Cancer Care Durham



*When a diagnosis of brain tumor changed the trajectory of Tim McKenna's life, he embraced a new path and a new way to look at life. He says his story isn't over yet.*

## Forced To Change, Tim McKenna Became The Change

Ready for change after working several years in New England as an English literature and history teacher, in 2014 Tim McKenna moved to Durham, North Carolina. After settling in, he even changed careers, signing on to increase his salary as a field agent for a local insurance agency.

Although the move and the career change were plenty to navigate, McKenna's world was turned completely upside-down when in 2015 he was diagnosed with a brain tumor.

"My life changed forever," said McKenna, 36, who was quickly scheduled for surgery to remove a grade 2 malignant astrocytoma. "It was the beginning of what would become a very different journey from the path I envisioned."

Although the surgery was a success, he experienced some initial side effects. To his dismay, McKenna was forced to resign from his new job as his memory had been affected.

Never a couch potato, McKenna began volunteering with the Duke Cancer Patient Support Program (DCPSP), becoming a docent at Duke Cancer Center in Durham and, a year later, joining DCI's Oncology Patient Advisory Council (OPAC).

"Tim's volunteer contributions make all the difference for patients being treated at Duke Cancer Center," said Mallori Thompson, manager of DCPSP. "His first-hand experience journeying cancer treatment enables him to extend an extra measure of compassion when assisting them."

Since his surgery, McKenna has been able to return to many of the activities he loved before cancer. He's back in the classroom, working as a substitute teacher four days a week. McKenna referees middle and high school soccer and teaches Kung Fu, something he did when he lived in Massachusetts.

For more information about the Duke Cancer Patient Support Program or volunteering, email at [cancersupport@duke.edu](mailto:cancersupport@duke.edu).



**Duke Cancer Institute**

[dukehealth.org](http://dukehealth.org)



Last year our  
volunteers dedicated almost  
20,000 hours of service.



Our Patient Resource Center offers information on cancer risk reduction, specific diseases, nutrition, treatment and side effects, coping strategies, children's care, palliative care and grief management.

For more  
information on our  
Patient Resource  
Center, call  
919.684.6955  
or visit  
[dukehealth.org/  
cancerresourcecenter](http://dukehealth.org/cancerresourcecenter).

## Education

### Options For Breast Reconstruction

**Patient Resource Center, 0 Level  
Tuesday, Aug. 20 :: 11 a.m. to Noon**

Danielle Sherman, R.N., C.P.S.N., leads this monthly informational class on breast reconstructive surgery after mastectomy. The class is small and private. However, it is open to anyone wanting more information regarding options at Duke.

### Exercise Consultations

**Patient Resource Center, Level 0  
Mondays :: 2 to 4 p.m.**

**Wednesdays :: 8:45 to 11:30 a.m.**

Complimentary exercise consultations are available in the Patient Resource Center on Mondays between 2 and 4 p.m. and Wednesdays between 8:45 a.m. and 11:30 a.m. Every third Monday of the month, consultations are held at Duke Health & Fitness. To inquire or to schedule an appointment, email at [stephanie.a.johnson@duke.edu](mailto:stephanie.a.johnson@duke.edu).

### Patient Navigation Services

**Patient Resource Center, 0 Level**

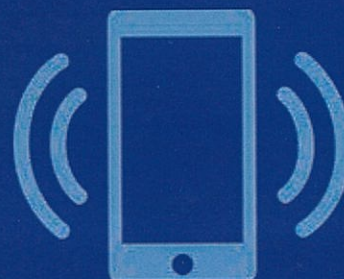
Patient navigators offer individualized assistance to patients, families and caregivers, helping them to overcome financial barriers, identify solutions to transportation and housing concerns and get access to resources, cancer education and interpreting services. For more information visit the Patient Resource Center between 9 a.m. and 4 p.m., Monday through Friday. To schedule an appointment, call 919.668.3882.

### FREE Legal Services

Duke Law offers free legal services to Duke patients (NC residents only). Services include assistance with legal documents, powers of attorney, living wills and HIPAA releases. Appointments required. To schedule an appointment, please call 919.613.7169.



## Medical Questions?



Need health advice or medical support? Our oncology triage phone services are available Monday through Friday, from 8 a.m. to 5 p.m. To speak to a Duke oncology nurse, call 919.668.6608.



# Support Groups

Our support groups are designed for patients and their families. For more information, please call 919.684.4497.

## General Cancer Support

Teer House

4019 N Roxboro Road, Durham

Thursday, Aug. 15, 5:30 to 7 p.m.

Patient and caregiver group is held separately. Dinner is provided.

Duke Cancer Center Cary Radiation Oncology

Thursday, Aug. 20, noon to 1:30 p.m.

Duke Cancer Center Raleigh

Thursday, Aug. 22, 5:30 to 7 p.m.

Lower Level, Classroom 1

## Prostate Cancer

Duke Cancer Center Raleigh

Monday, Aug. 8, 7-9 p.m.

Classroom 1, Level 0

Duke Cancer Center Durham

Monday, Aug. 26, 4-6 p.m. Conference Room, Level 0

Dinner is provided.

## Breast & GYN Cancers

Duke Women's Cancer Care Raleigh

Tuesday, Aug. 13, 5:30 to 7 p.m.

This group is for patients only.

## LGBTQ+ Cancer Support

Duke Cancer Center Durham

Cancer Patient Resource Room, Level 0

Wednesday, Aug. 28, 5:30 to 7 p.m.

This support group is for oncology patients and families. Dinner is provided.

## Art Therapy at Nasher

Nasher Museum of Art

2001 Campus Drive, Durham

Wednesday, Aug. 21, 2 to 4 p.m.

No art experience is needed. To register, call 919.668.4029.

# Kids Can!



KidsCan! is a program designed to support children and teens, ages 4 to 18, who have a parent or significant caregiver living with a diagnosis of cancer.

Kids and teen groups focus on issues such as understanding cancer, changes in the family life, feelings, self-care, memories, cooperation, love and family. A simultaneous group is also available for parents. The next KidsCan! Returning Monday, Sept. 9. Registration required.

To register, please call Jean Hartford Todd at 919.684.2913 or email at [jean.hartford.todd@duke.edu](mailto:jean.hartford.todd@duke.edu).

The Duke Cancer Patient Support Program provides services and resources to help support patients and their loved ones.

For a list of complimentary services, visit [dukehealth.org/cancersupport](http://dukehealth.org/cancersupport). To help ensure the continuation of these vital programs and services, please give at [gifts.edu/cancersupport](http://gifts.edu/cancersupport).

AUG.  
7

## Monthly Patient Resource Fair

Join us on the first Wednesday of each month in the Patient Resource Center (0 Level) from 1 to 3 p.m. for our Patient Resource Fair. Hosted by our Patient Navigation Program, the event is free for patients with cancer and their caregivers. Participants are introduced to nutritionists, exercise specialists, medical family therapists, clinical social workers, legal counselors, smoking cessation consultants, research specialists, patient navigators and community resources. Parking passes are available. For more information, call 919.668.3882.



# Rest, Renew, Relax

## Guided Meditation :: Quiet Room, 0 Level

Mondays :: 12:30 to 1 p.m.

Guided meditation promotes spiritual health and stress management and explores development of inner peace. For more information or to schedule family sessions, contact Chaplain Annette Olsen by email at [annette.olsen@duke.edu](mailto:annette.olsen@duke.edu) or call 919.684.3586.

## Tai Chi :: Quiet Room, 0 Level

Fridays (seated: 2 to 2:45 p.m. & standing: 3 to 3:45 p.m.)

Tai Chi is a holistic health practice that brings the mind and body together with slow, graceful, flowing movements performed in a meditative manner. Registration is not required. Drop-ins are welcome. For more information, email John Hillson, R.N., at [john.hillson@duke.edu](mailto:john.hillson@duke.edu).



## BELK BOUTIQUE

Cancer Care Products & Services

**Belk Boutique**  
919.613.1906

Open Monday through Friday, 9 a.m. to 4 p.m.  
Duke Cancer Center, 0 Level :: 919.613.1906

The boutique features a selection of retail and complimentary oncology self-image items. Private consultations are available.

Salon/Hair Services (hair and wig styling and clipper cuts):  
Aug. 5 and 13 :: 10 a.m. to 3 p.m.

Makeup Consultations: Aug. 14 :: 10 a.m. to 3 p.m.

## Caring House



Caring House is a non-profit providing comfortable, supportive and affordable housing for adult patients receiving treatment at Duke Cancer Center. Rooms are \$40 per night. Caring House is located at 2625 Pickett Road in Durham. For more information, visit [caringhouse.org](http://caringhouse.org).

## ACS Partners With Extended Stay America

The American Cancer Society is donating 50,000 rooms each year for the next two years. Of those 50,000 rooms nationwide, 10,000 are free, 20,000 are available at a reduced rate of \$19 per night and another 20,000 rooms are available at an ACS patient rate of 25 percent off market value. For more information or to reserve a room, call 800.ACS.2345.

## #LunchAndLearn, A Recipe for Knowledge



Join us weekly for #LunchAndLearn, our Facebook live panel discussions. Log onto [facebook.com/dukecancerinstitute](https://facebook.com/dukecancerinstitute) at when our world-renowned prostate and urologic cancer specialists speak on the latest advancements in science, medicine and survivorship. #LunchAndLearn is held at noon on weekdays. For notification of upcoming live panel discussions, like us on [facebook.com/dukecancerinstitute](https://facebook.com/dukecancerinstitute).

## Quit At Duke!

Duke Cancer Institute offers Quit At Duke, a smoking cessation program to help smokers who want to quit but who do not respond to standard methods. For more information or to schedule an appointment, visit [dukehealth.org/quit](http://dukehealth.org/quit) or call 919.613.QUIT (7848).





Like Us!

facebook.com/DukeCancerInstitute  
facebook.com/DukeCancerPatientsSupportProgram

# AUGUST

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p><b>5</b></p> <p>Hair Salon Services :: Page 4 Guided Meditation :: 12:30 pm Exercise Consultations :: Page 2</p>	<p><b>6</b></p>	<p><b>7</b></p> <p>Exercise Consultations :: Page 2 Patient Resource Fair :: Page 3</p>	<p><b>1</b></p>	<p><b>2</b></p> <p>Tai Chi :: 2 pm, Seated Tai Chi :: 3 pm, Standing</p>
<p><b>12</b></p> <p>Guided Meditation :: 12:30 pm Exercise Consultations :: Page 2</p>	<p><b>13</b></p> <p>Hair Salon Services :: Page 4 Breast &amp; GYN Cancers :: Page 3</p>	<p><b>14</b></p> <p>Makeup Services :: Page 4 Exercise Consultations :: Page 2</p>	<p><b>15</b></p> <p>Caregiver Support :: Page 3 General Support Durham :: Pg. 3</p>	<p><b>16</b></p> <p>Tai Chi :: 2 pm, Seated Tai Chi :: 3 pm, Standing</p>
<p><b>19</b></p> <p>Guided Meditation :: 12:30 pm Exercise Consultations :: Page 2</p>	<p><b>20</b></p> <p>Breast Reconstruction :: 11 am General Support Cary :: Page 3</p>	<p><b>21</b></p> <p>Exercise Consultations :: Page 2 Art Therapy :: Page 3</p>	<p><b>22</b></p> <p>General Support Raleigh:: Pg. 3</p>	<p><b>23</b></p> <p>Tai Chi :: 2 pm, Seated Tai Chi :: 3 pm, Standing</p>
<p><b>26</b></p> <p>Guided Meditation :: 12:30 pm Exercise Consultations :: Page 2 Prostate Cancer Durham :: Page 3</p>	<p><b>27</b></p>	<p><b>28</b></p> <p>Exercise Consultations :: Page 2 LGBTQ Support Group :: Page 3</p>	<p><b>29</b></p>	<p><b>30</b></p> <p>Tai Chi :: 2 pm, Seated Tai Chi :: 3 pm, Standing</p>



## KidsCan!

because they  
have a lot to say  
about cancer



### KidsCan!,

provided by the Duke Cancer Patient Support Program,  
is for families with children and teens who have a parent  
or caregiver diagnosed with cancer. For more information or to  
register, call **919.684.4497**.

## Quit At Duke

For information,  
call  
**919.613.QUIT**



Cancer survivors who smoke tend to have high-level  
nicotine dependence, high-level stress, low energy,  
and can have feelings of anxiety and depression. It is  
especially hard to quit smoking when faced with these  
challenges. Quit at Duke meets the specific challenges  
of cancer survivors who smoke. For information or to  
make an appointment, please call 919.613.QUIT.

## Those Who Can, Do!



Extending our deepest appreciation  
to our gracious and hard-working volunteers  
who have more heart than time.

 **Duke Cancer Institute**

Self-Image  
Boutiques  
**919.613.1906**



**Duke Cancer Center Durham**  
20 Medicine Circle, Durham

**Duke Cancer Center Raleigh**  
3404 Wake Forest Road, Raleigh

**Duke Women's Cancer Care Raleigh**  
4101 Macon Pond Road, Raleigh