

**Fuquay Varina
Wake County**

**A Community Diagnosis including Secondary Data Analysis and
Qualitative Data Collection**

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1. EXECUTIVE SUMMARY

Located 15 miles southwest of Raleigh and only a 35 minute drive south of the Research Triangle Park (RTP), Fuquay-Varina, North Carolina, is a community in transition. In the midst of explosive growth, affecting population size, commerce, and access to limited resources, Fuquay-Varina aims to maintain its traditions and small-town feel.

The University of North Carolina (UNC) School of Public Health was asked to work with Wake County Human Service's Southern Regional Center to conduct a community diagnosis in the town of Fuquay-Varina. Six students from the University were commissioned to conduct the diagnosis over a 6-month period. Initially the community diagnosis was to be framed in the context of exploring factors related to school success. However, during the team's tenure in the community, both talking to residents and reviewing existing data relative to a number of topics, several other issues and factors important to the community emerged.

Community diagnosis is a process intended to gather information about the community, in the form of secondary data (existing statistics) and primary data (interviews with residents), which can help the community to better identify their assets and challenges in the direction of forging positive community change. A community diagnosis is very much grounded in the philosophy that a community's success in addressing its concerns is determined by a number of factors including its history, strength of community partnerships, problem solving mechanisms, and identified assets, to name a few.

The community diagnosis was implemented in two phases. Phase one included the collection of secondary data describing the overall health of Fuquay-Varina residents in terms of physical and mental health, social health, economics and growth, crime and safety, and education. During the second phase, the team conducted interviews with Fuquay-Varina

community members and service providers (physicians, social service providers, political officials, and clergy) to gain insight into the community and its inner workings from the viewpoint of those who live and work there. This document is the product of the community diagnosis and incorporates the information generated from interviews, as well as the secondary data from Phase I of the process. While the team did contribute to the shaping of the information provided in interviews, this document represents the voices of Fuquay-Varina residents on issues that are important to them.

The primary data collection process began by developing interview guides for service providers and community members of Fuquay-Varina. The team initially included in the guides topics that it felt might be important to explore. The service provider guide addressed questions pertaining to services/resources available (i.e. health care, recreation, religious), populations that use such services, and the strengths and weaknesses of the Fuquay-Varina community. The community member interview guide began with general questions pertaining to family, employment, and religious affiliation. Next, questions about community resources, health resources, changes that have occurred over time in Fuquay-Varina, and perceptions of Fuquay-Varina's future were posed.

Focus group interviews were conducted with children of varying ages. The focus group interview guide was comprised of six questions pertaining to the interviewees' perceptions of Fuquay-Varina, school pride, and social support.

After developing the interview guides, the team explored strategies to identify members of the community to interview. We began the interview process at the Southern Regional Center (SRC) of Fuquay-Varina. We were assisted by SRC staff in obtaining access to some primary and secondary data.

The team then identified key community members and service providers as possible interview candidates who could provide valuable information on the Fuquay-Varina community. Some team members attended the annual Heritage Festival in Fuquay-Varina where they met representatives of various civic organizations, some of whom were later contacted for interviews. The final question of each interview asked for suggestions of additional community members the team could contact, resulting in a continuous process of interviewing.

At the outset of the community diagnosis process, the team recognized the importance of collecting primary data that would adequately represent the various voices in Fuquay-Varina. The primary data sample includes members of the primary ethnic groups in Fuquay-Varina: whites, African Americans, and Latinos. The team attempted to gather data from members of different socioeconomic classes, though actual socioeconomic status is not known. The interviewees ranged in age from elementary school children to retired adults. Moreover, the team spoke with lifelong residents of Fuquay-Varina as well as new-comers. The team conducted forty individual interviews. Thirteen adults and eighteen youth were interviewed as Fuquay-Varina community members. Four interviewees represented both service providers and community members of Fuquay-Varina. Five individuals were interviewed as service providers only. The various backgrounds of the interviewees comprise an adequate representation of the residents of Fuquay-Varina given the time constraints of the community diagnosis process.

As the interview process came to a close, each team member reviewed interview transcripts and the team convened to discuss emerging themes. Eight major themes emerged from the findings. The eight themes were grouped together into six categories: growth, drugs, schools, health, diversity/race relations, and recreation.

Some barriers presented themselves during primary data collection. Due to the nature of the community diagnosis process, it was difficult to recruit persons living within the community who do not have an active voice in the community, in the traditional sense. By asking service providers and active members of civic organizations for their referrals it is likely that the majority of interviewees were similar, in a sense, to those who referred them- active in the community in some way. Therefore some marginalized populations may not have been adequately represented.

Other challenges surfaced in reaching the Latino community. Only two of the six team members were able to speak Spanish, which limited the team's access to the Latino population. The population of migrant farm workers was unattainable because of the season in which interviews were conducted. Fuquay-Varina has a history of tobacco farming; however, the team was also unable to reach the farming population.

The team encountered challenges in reaching youth. The team encountered some challenges while trying to work with the Wake County Public School System to gain access to school aged youth, but they were able to gain access to some youth through various civic organizations.

Despite these limitations, the team worked well with the community to gain insight into life in Fuquay-Varina. The community expressed concerns about a number of topics important to the town. One of the major issues we heard about during our work in Fuquay-Varina was the drug problem, though not in a negative sense. As we talked with the people of Fuquay-Varina over the past 6 months, we learned that the effort to combat neighborhood drug trade is something of which people are really proud. It brought in cooperation and interaction across groups, and it brought in faith and the strength of religious institutions in the community. It brought in a concern for the health and safety of people in the community, and a special concern

for the children who are not only threatened by unsafe neighborhoods, but who are also influenced by the things they see around them. Also, it brought in a sense of interest in using the local political system to achieve things the community really wants.

Several other salient issues emerged from primary data collection. Among these issues was the explosive growth that the community has experienced over the past few years. Of all the themes that surfaced in community interviews, concerns about growth were the most prominent and arguably evoked the most passion among respondents. In general, growth in Fuquay-Varina is characterized by: (1) an influx of new residents who work outside of Fuquay-Varina and have no prior ties to the community, (2) an increase in the number of Latino residents, and (3) an increase in the number of large-scale businesses entering the community, accompanied by the outward growth of these businesses away from downtown. Within this context, residents' concerns are: (1) the threat to the community's "small town" character, (2) the sustainability of businesses in downtown Fuquay-Varina, and (3) the limitations of resources (i.e., transportation, water and sewage, and housing) to accommodate large-scale growth.

The topic of education and schools also stimulated interest among interviewees. Even though specific questions were posed relative to schools, the topic was often mentioned generally in response to inquiry about the strengths of Fuquay-Varina. Many of the general statements about schools, especially elementary schools, were positive from both community members and service providers. Interview respondents also identified a number of needs of the school system in Fuquay-Varina. Regarding infrastructure, respondents consistently noted that there have been efforts underway to reduce class size, with a new elementary school in Holly Springs and the renovation of Lincoln Heights and Willow Springs Elementary Schools. However it is feared that rapid growth in the area will soon offset these efforts.

Churches and community partnerships are two strong forces in Fuquay-Varina, helping mobilize citizens and encouraging interaction. The growing number of community partnerships, whose names have been seemingly embedded in citizens' minds, address issues from drugs and crime to schools to sports.

Despite the obvious strength of community partnerships the community also expressed concerns about race relations, particularly the division of the community along racial lines. While residents noted that there was little conflict, they were careful to point out that there were no organized efforts to lessen the divide. The youth voice on this issue was particularly interesting in that overwhelmingly youth reported not feeling the impact of racial divide among their classmates, but noticing its impact among their parents and grandparents.

The main topics of interest in relation to health were the shortage of primary care physicians, as well as a perception of high teenage pregnancy rates. The latter was a concern of youth as well as of parents. Another issue that emerged, particularly among youth, was the lack of recreational activities for high school-aged children and adults.

This document provides merely a glimpse of life in Fuquay-Varina from the perspective of its members. It is obvious from interviews that Fuquay-Varina is a healthy and thriving community. It has natural leaders who are willing to devote time and effort to making it a great place to live. Within the community there is knowledge, energy, and interest in staying informed and connected. Even from the short time that this team spent in the community, it is evident that the town has a wealth of assets beginning with its rich history and traditions and extending to the strong commitment and diverse skills of its members. It is the sincere hope of the community diagnosis team that this document can serve as a resource for the community to mobilize itself towards addressing community concerns.

2. METHODOLOGY

This section will explain the method of data collection and analysis. Two types of data were collected: secondary data from existing sources and primary data from individual interviews and focus groups. The team used existing sources, such as the US Census and the State Center for Health Statistics, to collect data during the initial stages of the project. An additional informative source for our project was the Fuquay-Varina Chamber of Commerce.

The primary data collection process began by writing separate interview guides for service providers and community members of Fuquay-Varina. The team then identified important subject areas to explore. The service provider guide addressed questions pertaining to services/resources available (i.e. health care, recreation, religious); populations that use such services; and the strengths and weaknesses of the Fuquay-Varina community.

The community member interview guide began with general questions pertaining to the interviewee's family, employment, and religious affiliation. Next were questions about community resources, health resources, changes that have occurred over time in Fuquay-Varina, and perceptions of how Fuquay-Varina will be in the future. Those service providers who were also community members were usually asked questions from both interview guides.

Focus group interviews were conducted with children of varying ages. The focus group interview guide was comprised of six questions pertaining to the interviewees' perceptions of Fuquay-Varina, school pride, and social support. In order to generate discussion and allow for the participation of all of the focus group members, the number of questions asked was limited to those that were considered to be relatively straightforward. The size of the focus groups ranged from between two and six children.

After completing the interview guides and gaining approval from the University of North Carolina School of Public Health Institutional Review Board, the team explored ways to contact members of the community. The interview process began at the Southern Regional Center (SRC) of Fuquay-Varina where Deborah Cerrito, one of two team preceptors and a Public Health Educator at the SRC, assisted the team in obtaining access to other employees.

The team then identified key community members and service providers as possible interview candidates for providing valuable information on the Fuquay-Varina community: Chief of Police, Mayor and Mayor-elect, Town Commissioners and Planners, members of the clergy, and President of the Chamber of Commerce. At the annual Heritage Festival in Fuquay-Varina, team members met representatives of various civic organizations, some of whom were later contacted for an interview. The final question of each interview asked for suggestions of additional interview candidates, resulting in a continuous process of phone calls and interviews.

Each phone call began with a brief introduction of the community diagnosis process by a member of the team. If the person was interested in being interviewed, the next step was scheduling a time and place for the interview. A minimum of two team members attended each interview: one person was primarily responsible for asking the questions and facilitating discussion, the other for taking notes. Focus groups were often presided by more than two team members, in order to keep the discussion on track. Each interview and focus group conducted was tape-recorded with one exception. In that case the respondent preferred not to be recorded, meaning only written notes from the interview were taken.

At the outset of the community diagnosis process, the team recognized the importance of collecting primary data, which adequately represented the various voices in Fuquay-Varina. The primary data sample included members of the three primary ethnic groups in Fuquay-Varina:

whites, African Americans, and Latinos. The team successfully gathered representative members of different socioeconomic classes, and interviewees' ages ranged from elementary school children to retired adults. Moreover, the team spoke with lifelong residents of Fuquay-Varina as well as new members of the community. The total number of interviewees was forty individuals. Thirteen adults and eighteen youth were interviewed as Fuquay-Varina community members. Four interviewees represented both service providers and community members of Fuquay-Varina. Five individuals were interviewed as service providers only. The various backgrounds of the interviewees comprised an adequate representation of the residents of Fuquay-Varina given the time constraints of the community diagnosis process. Please refer to Appendix B for a complete description of interviewees.

As each interview was completed, the notetaker typed and distributed the notes taken during the interview or focus group. Usually an audiotape clarified interviewees' responses and captured their direct quotes for the note taker. Each group member then received the interview transcript via email and read them in order to familiarize themselves with the issues that surfaced.

Once the interview process came to a close, each team member read all available transcripts at the time and came together to discuss dominant themes. The team discovered eight major themes from the collective set of interview transcripts, which were grouped together into six categories. Each team member then reread all transcripts and identified statements according to theme, labeling each statement with an assigned code (e.g. Health Care was coded as HC). The significance of the themes was shown by the number of times the code appeared in the interview transcripts.

Some barriers presented themselves throughout the primary data collection process. Because of the nature of the community diagnosis project, recruiting members who do not have an active voice in the community was difficult. Referrals from service providers and active members of civic organizations also tended to be very much like themselves - active in the community in some way, preventing other marginalized populations from being adequately represented. Only two of the six team members were able to speak fluent or nearly fluent Spanish, limiting the team's access to the Latino population. The migrant farm worker population was unreachable because interviews were conducted in January and February, out of season. Despite Fuquay-Varina's resonant history of tobacco farming, the team did not reach this population as well. The team encountered much red tape while trying to work with the Wake County Public School System in gaining permission to interview school aged youth. Even though the team was unable to interview youth in schools, they successfully gained access to youth through the various civic organizations.

The secondary data collection process at the outset of the community diagnosis contained its own limitations. Because the most recent U.S. Census was in 1990, the Census data could not accurately show tremendous increase in the past decade. The team then turned to other data sources, such as the State Center for Health Statistics. Wake County data from 1998 was referenced; however, there was not enough data specific to Fuquay-Varina. Several topic-specific problems arose while researching secondary data, such as difficulty in obtaining mental health statistics and undefined crime data categories ("calls to service"). Lastly, data from these sources usually presented only two racial categories: "white" and "other." Not having specific racial/ethnic breakdowns hindered the accuracy of the information provided.

3. COMMUNITY DESCRIPTION

3.1 Geography

Located 15 miles southwest of Raleigh and only a 35 minute drive south of the Research Triangle Park (RTP), Fuquay-Varina, North Carolina, finds itself in the midst of explosive growth not seen since the initial popularity of the Fuquay Spring (Fuquay-Varina Area Chamber of Commerce, 1999d). Every aspect of the town has experienced this tremendous growth, especially in terms of population, housing units, and commerce. Along with this growth, though, Fuquay-Varina aims to maintain its historic landmarks and small-town feel, creating a balance between the old and new, big and small (Jones, 1999). Throughout its history, Fuquay-Varina has offered residents and newcomers something attractive, a reason to stay, and that likely represents the main theme behind its development.

Before exploring the town's many draws, its geographical boundaries need defining for the purposes of this document and the Community Diagnosis as a whole. Three official definitions will be used at various times. The first definition is the town's corporate limits, covering the smallest area at 118.14 square miles (Fuquay-Varina Area Chamber of Commerce, 1999a). Second is the ETJ or Extra-Territorial Jurisdiction, encompassing a one mile radius around the corporate limits and representing the jurisdictional control for Fuquay-Varina (T. Gardiner, personal communication, October 12, 1999). Third is the zip code, 27526, which extends well beyond the town even into parts of Holly Springs to the north and Harnett County to the south (T. Gardiner, personal communication, October 12, 1999). The population for each of these three areas reveals the growth spreading outwards from within the town. The Fuquay-Varina Area Chamber of Commerce estimates the population in the town limits as 7,581 as of 1998 (1999a). The ETJ adds another 3,640, and the entire zip code numbers approximately 22,483 (1999a).

Since 1960, the town population has more than doubled and is expected to grow 6% per year for single families until the year 2020. The zip code population has experienced a 4.5% growth rate this decade (1999a). So what about Fuquay-Varina has attracted the influx of people?

As far as Fuquay-Varina's geographic appeal in the present time, its afore-mentioned proximity to Raleigh and the RTP make Fuquay-Varina an enticing address for those working in the urban areas yet preferring seclusion from the hustle and bustle. Also, the climate is highly touted by the Fuquay-Varina Area Chamber of Commerce, with the mean annual temperature at 59.8 degrees Fahrenheit and an average annual rainfall of 44.6 inches (1999c). Three main thoroughfares converge into Main Street in the eastern part of town, all allowing direct access to urban areas or major interstates: state highway 55 from the northwest through Holly Springs, state highway 42 which runs east-west and roughly bisects the incorporated town, and US 401 which heads northeast into Raleigh. Routes 55 and 401, especially, draw increasing numbers of cars, which has led to a widening of US 401 and increased congestion along N.C. 55 (which has yet to be modified) from commuters of Research Triangle Park and Durham (Jones, 1999).

3.2 History

Dating back to Fuquay-Varina's founding, geographical factors played a key role in its drawing power as a residential and commercial area. By the turn of the century, the separate towns of Fuquay Springs and Varina were located at the junction of the Cape Fear, Northern, the Norfolk, and Southern Railroads, attracting industries who could use those rail lines (Lalley, 1994). For example, in 1908, W.H. Aiken, a Granville County native, opened the first tobacco warehouse in the area at that strategic junction of the two Fuquay and Varina rail lines (Lalley, 1994). With tobacco having always been a crop of primary importance in North Carolina, the development of the tobacco industry near Fuquay-Varina ensured a growing economy.

Of course, the most famous and crucial geographic factor for Fuquay-Varina's growth was the Fuquay Spring, creating a substantial tourism industry in the late 19th and early 20th centuries. Stephen Fuquay, great grandson of William Fuquay, first discovered the Fuquay Spring in the mid-19th century at what is now the corner of South Main and Spring streets, then sold the spring in 1860 to 10 men from Wake and Harnett Counties who formed the Chalybeate Spring Company (Lalley, 1994). The company was established to promote the spring as a tourist attraction, and as the spring grew in popularity, two new rail links were built from Fuquay and Varina to Durham even though the Fuquay Spring was known decades before the railroads (Lalley, 1994). By the 1890's, with the spring's popularity at its peak, tourists took "Moonlight Excursions" to the spring to drink the water for its supposed therapeutic properties. Barbecue stands, a dance pavilion, and a player piano were added as attractions at the spring site, and hotels and restaurants sprouted up to respond to the increased tourism (Carolina, 1993). Eventually, interest in the spring as a tourist site began to diminish in conjunction with the popularization of automobiles, which gave travelers increased access to competing tourist

attractions (Lalley, 1994). Ever since its discovery, the spring has flowed with one exception, in 1933, when the use of dynamite for sewer installation briefly disrupted the spring's flow (Carolina, 1993). Today, the spring still piques the curiosity of those who drink from it and believe in its medicinal properties. The spring's rich historical significance will continue to live in the stories of those who freely talk about being around when the tourist boom occurred.

The area saw booming economic growth for other reasons, albeit not as the entity of Fuquay-Varina known today. In the very beginning, separate towns of Fuquay Springs and Varina co-existed. Fuquay Springs was the main trade center for Southern Wake County and the surrounding areas of Johnston and Harnett Counties (Lalley, 1994). Ballentine Dairy was the first and oldest dairy in North Carolina until its closing several years ago, and Lillian Yater Parker Ballentine was credited for making the dairy a success after her husband's death in 1906 (Author, 1990). In 1895, Fuquay Springs saw its first drugstore and doctor 6 miles away from the spring. The town's name officially changed in 1902 from Sippihaw to Fuquay Springs in honor of Stephen Fuquay (Carolina, 1993). Then, in 1914, a pharmacy opened for business, and in 1927, US 401 was first paved through Fuquay (Carolina, 1993). This original routing of 401 down one of Fuquay's major streets pushed the growing town's size past that of neighboring Varina (Lalley, 1994). Fuquay became incorporated as a town in 1909, and the Bank of Fuquay was also established (Lalley, 1994). During the Depression in the 1920's and 1930's, Fuquay was one of only three cities in Wake County experiencing population growth, tripling in size. The population explosion was primarily because Fuquay was the only town in Southern or Western Wake County with a tobacco market, an industry which, as emphasized earlier, quickly reached prominence (Lalley, 1994).

The town of Varina was named after Virginia Avery, who used the pen name “Varina” when writing her future husband, James “Squire” Ballentine, who was away fighting for the Confederate Army in the Civil War. Ballentine made generous contributions to the Varina community in the late 1800s by establishing the first post office in his home and running a general store located across from the Fuquay Spring with his brother. Because of his influence within the community, Ballentine chose to name the town Varina (Lalley, 1994). Though established in 1899, the town of Varina was not incorporated until ten years thereafter (Lalley, 1994). Fuquay Springs and Varina finally merged in 1963 to form Fuquay-Varina, though long-time residents of both towns may still identify them as separate (Lalley, 1994). The two towns’ proximity to each other and use of the same railways for industry likely made the merger an ideal decision at the time.

3.3 Economy

Nowadays, Fuquay-Varina is a rapidly growing community with its population in the incorporated town limits expected to increase almost 5 times within the next 20 years (Fuquay-Varina Area Chamber of Commerce, 1999d). To accommodate this increase, new housing units are sprouting around the outskirts of town targeted to various income levels (Fuquay-Varina Area Chamber of Commerce, 1999d). The town projects adding more than 2,000 houses in the next five years, including 500 single-family units in Willow Creek, 140 townhouses at Old Honeycutt Road and Highway 55, and 199-lot Phillips Pointe off the Judd Road extension (Jones, 1999). There is active recruitment for development - both commercial and residential - by the Area Chamber of Commerce and town government, with incentives for builders such as a reduction in corporate taxes planned for next year. Strategically planned infrastructure development looks to keep pace with economic development using investments from existing

businesses, government, and the community, including a \$10 million bond issue recently approved for improvements in water and sewage systems (Fuquay-Varina Area Chamber of Commerce, 1999d).

As of 1997, Fuquay-Varina's chief industries include retail, professional services, and manufacturing, with chief occupations of labor, tradespeople, and administrative services (National Resource Directories, Inc., 1997). Recent industrial expansion projects include a \$30 million John Deere plant opened two years ago which made further plans to expand, and the current construction of Barker Plaza (of Bob Barker Company, Inc.), providing 20,000 square feet of office space downtown (Fuquay-Varina Area Chamber of Commerce, 1999c; Jones, 1999). As reported by the Chamber of Commerce, there are 18 local manufacturers and industries, which provide an estimated 2,900 jobs (Fuquay-Varina Area Chamber of Commerce, 1999c).

A new retail center is also under construction and is set to open by the end of 2000, with the largest tenant, Wal-Mart, expected to provide over 300 new jobs (Chamber Connection, 1999). Planned growth, including the construction of two professional office buildings and a medical facility, indicates a shift in the labor market is forthcoming (Fuquay-Varina Area Chamber of Commerce Website). The intention is for more people to both work and live in Fuquay-Varina, not just one or the other. Finally, tobacco has not been forgotten even in the midst of an apparent decline in usage: "The tobacco industry continues to play an important role in the economy and vitality of southern Wake county, and provides an annual reminder of our cultural and historical roots" (Hunt, 1999, p. 2).

With this vast history of development and current rapid expansion in mind, Fuquay-Varina has several challenges it must tackle to really show progress, rather than simply growing

uncontrollably. For example, even with its proud history as a “spring” town, Fuquay-Varina now ironically finds itself searching for new water sources, having already negotiated for a second pipeline with Harnett County from the Cape Fear River at Lillington (Eisley, 1999). Not to be forgotten are the kinds of changes that the town had never experienced until recently, such as the increase in Latinos and the sense that there are more elderly residents and families with young children. An effective first step towards addressing these issues seems to be the recent establishment of the Southern Regional Center (SRC) which provides a wide array of social, health, and economic services to southern Wake County and disseminates much of its information in both English and Spanish as well. As with every other town that grows, Fuquay-Varina is not immune to higher taxes, increased crime, and congested traffic. Because the town’s loyal residents are well-informed about these issues and growing pains, meeting the challenges that accompany growth and reaching developmental goals are easily within its grasp.

4. COMMUNITY PROFILE

In order to establish a community profile of Fuquay-Varina, North Carolina, data has been collected from a variety of sources. These include, but are not limited to, the 1990 U.S. Census, the Sourcebook of Zip Code Demographics, the Fuquay-Varina Chamber of Commerce, the Wake County Planning Department, and the Wake County Public School System. Wake County and North Carolina data have been used in some areas for comparative purposes.

4.1 Demographics

In 1990, the U.S. Census data identified 16,749 residents in Fuquay-Varina's zip code area (27526). According to the Fuquay-Varina Chamber of Commerce, the estimated population as of 1998 for the Fuquay-Varina zip code area was 22,483. The estimated population of the corporate limits of the town was 7,581 (Fuquay-Varina Area Chamber of Commerce, 1999). Population growth is a major concern among town leaders in Fuquay-Varina. Between 1990 and 1998, the town of Fuquay-Varina grew approximately twice as fast as Wake County (Table 4.1).

Table 4.1 Population Growth in Fuquay-Varina and Wake County, 1990-1998.

	1990	1998	%Change
Fuquay-Varina	4,448	7,581	70.4%
Wake-County	426,301	574,828	34.80%

Sources: Wake County Planning Department, 1998/99
Fuquay-Varina Area Chamber of Commerce, 1999.

4.1.1 Race and Age

The Fuquay-Varina zip code area and Wake County are relatively similar in terms of racial makeup, except that Wake County has a slightly higher proportion of minorities. Fuquay-Varina and Wake County are experiencing similar changes in the proportions of all races in the population, excluding Latinos, for whom the Fuquay-Varina zip code area had a greater percentage increase between 1990 and 1998 (Table 4.2).

Table 4.2 Race-Based Population Percentages in Fuquay-Varina Zip Code 27526 (1990 & 1998) and Wake County (1990 & 1997).

	White		Black		Latino		Other	
	1990	1997/98	1990	1997/98	1990	1997/98	1990	1997/98
Fuquay-Varina	80.5	77.5	18.2	20.3	1.6	3.3	0.2	0.3
Wake County	77.2	75.5	20.3	21.0	1.6	2.3	2.3	3.3

Note. The most recent population statistics for Fuquay-Varina are from 1998, while the most recent statistics for Wake County are from 1997.

Sources: Wake County Planning Department, 1998/99.
Sourcebook of Zip Code Demographics, 1998.

The median (50th percentile) age of residents in the Fuquay-Varina zip code area as of 1998 was 33.8 years (Sourcebook of Zip Code Demographics, 1998). According to the Wake County Planning Department, 64.63% of the county’s population was between the ages of 20 and 64 in 1997. However, for the Fuquay-Varina zip code area in 1998, the estimated percentage of the population between the ages of 20 and 64 was 59.8% (Fuquay-Varina Area Chamber of Commerce, 1999). Thus, compared to Wake County, the Fuquay-Varina zip code area has larger proportions of young and old people. Large concentrations of young and old people suggest that Fuquay-Varina may benefit from planning and infrastructure development in the areas of health and social services.

4.1.2 Households

There were 5,851 households in Fuquay-Varina at the time of the 1990 U.S. Census, with an average household size of 2.68 persons. From 1990 to 1998, the number of households and families in the zip code area have increased at a similar rate (4.7% and 4.4% respectively), and the average household size has remained relatively constant (Table 4.3). Currently, according to the Fuquay-Varina Area Chamber of Commerce, single families are increasing at the rate of 6% per year, while multi-family homes are increasing at the rate of 10% per year (1999).

Table 4.3 Growth in Number of Households and Families in Fuquay-Varina Zip Code Area between 1990 and 1998.

Year	Number of Households	Number of Families	Average Household Size
1990	5851	4430	2.68
1998	8538	6328	2.61

Note. Annual rate of change was 4.7% in 1990 and 4.4% in 1998.

Source: Fuquay-Varina Area Chamber of Commerce, 1999.

4.2 Education

Since education as a resource can become a source of power for individuals as well as communities, any community profile requires an evaluation of educational systems and opportunities. Across North Carolina, the ABC statewide accountability program, having become a major focus of school districts, brings national recognition to the state for its efforts to quantify student performance and student growth accurately.

4.2.1 School System

Wake County Public School System (WCPSS) serves over 89,000 students in grades K-12. Fuquay-Varina is served by WCPSS, as are Raleigh (the county seat), Apex, Cary, Garner, Holly Springs, Knightdale, Morrisville, Rolesville, Wake Forest, and Zebulon. In 1997-98, Wake County Public Schools operated 106 schools: 69 elementary schools, 20 middle schools, 13 high schools, and 4 alternative schools. It is the second largest school system in North Carolina, and the 33rd largest in the U.S (WCPSS, 1998).

Rapid growth has become a major issue throughout Wake County. The school system projects serving approximately 101,000 students by 2001. While new schools are currently being built, a recent bond referendum to fund additional construction failed, causing anxiety among some community members over what might happen without enough school space (WCPSS, 1998).

Fuquay-Varina has three elementary schools, a middle school, and a high school. All are traditional schools (not magnet, charter, or alternative). The majority of students in Fuquay-Varina attend a "base school" assigned by the school district depending on geographical residence. However, some students are assigned to different schools for accommodating special needs (WCPSS, 1998). In terms of growth, Fuquay-Varina schools, including Fuquay-Varina Elementary, Lincoln Heights Elementary, and Willow Springs Elementary, Fuquay-Varina Middle, and Fuquay-Varina High Schools, experienced growth ranging from -6.4% (Fuquay-Varina Elementary) to 19% (Lincoln Heights Elementary) from 1998-99 to 1999-2000 (WCPSS, 1999). In 1998, however, Lincoln Heights Elementary was slated for new classroom, administration, and ready-to-learn center additions, according to the Wake County Public School System Phase III A/ III B Building Program (WCPSS, 1997). According to the same plan, Fuquay-Varina Middle School and Fuquay-Varina High School were to undergo renovations in 1999, with the high school set to receive new classrooms and improved science, technology, art, home economics, and exceptional children facilities (WCPSS, 1997).

4.2.2 Student Performance

Standardized testing serves as the primary means for evaluating student performance and educational growth. Ultimately, schools receive a grade or rating, known as the school report card, from the state as a part of the ABC statewide accountability program each spring. The school report card is based on test scores with respect to goals set for each school each year. The End of Grade Tests or End of Course Tests (for high school courses), the 4th, 7th, and 10th grade writing tests, and the Scholastic Assessment Test (SAT) performance of those who take the test are the instruments used to evaluate and compare overall school performance (WCPSS, 1998).

Tables 4.4 through 4.10 demonstrate the test results at the elementary, middle and high school levels for students in the Fuquay-Varina area compared with Wake County and the State.

Elementary School Results

Table 4.4 Composite End-of-Grade Test Results in Reading and Math, May 1999: Percent of Students Achieving 3 and 4 for 1998 and 1999.

Elementary School	3 rd Grade				4 th Grade				5 th Grade			
	Reading		Math		Reading		Math		Reading		Math	
	1998	1999	1998	1999	1998	1999	1998	1999	1998	1999	1998	1999
Fuquay-Varina	62.9	64.9	62.9	56.5	77.8	70.1	82.3	81.0	82.1	81.5	86.2	82.7
Lincoln Heights	70.5	63.9	46.7	57.5	66.2	76.9	78.9	75.9	79.3	84.6	81.0	87.9
Willow Springs	75.4	76.0	68.5	65.9	68.7	68.7	79.7	78.8	82.5	88.9	85.7	93.9
Wake County	79.3	80.4	75.4	77.1	80.8	80.8	84.1	88.1	84.3	84.8	84.0	87.0

Note. Students attaining scores of 3 or 4 are considered at or above grade level.
Source: Wake County Public School System, 1999.

Table 4.5 Composite Writing Results for 4th Grade Writing Test, May 1999: Percent of Students Achieving 2.5 or greater.

Elementary School	1998	1999
Fuquay-Varina	62.9	49.2
Lincoln Heights	67.1	65.8
Willow Springs	63.3	55.8
Wake County	64.8	61.8
North Carolina	51.7	55.2

Note. Scores of 2.5 or greater out of 4 are considered passing.
Source: Wake County Public School System, 1999.

Middle School Results

Table 4.6 Composite End-of-Grade Test Results in Reading and Math, May 1999: Percent of Students Achieving 3 and 4 for 1998 and 1999.

Middle School	6th Grade				7th Grade				8th Grade			
	Reading		Math		Reading		Math		Reading		Math	
	1998	1999	1998	1999	1998	1999	1998	1999	1998	1999	1998	1999
Fuquay-Varina	69.7	70.8	77.6	82.4	74.9	79.9	76.5	80.2	79.5	79.1	73.5	76.8
Wake County	78.8	80.7	82.7	84.8	80.5	84.9	83.7	87.3	86.4	87.1	83.2	83.8

Source: Wake County Public School System, 1999.

Table 4.7 Composite Writing Results for 7th Grade Writing Test, May 1999: Percent of Students Achieving 2.5 or greater.

Middle School	1998	1999
Fuquay-Varina	34.7	75.0
Wake County	60.6	73.1
North Carolina	62.5	70.4

**Note. Scores of 2.5 or greater out of 4 are considered passing.*

Source: Wake County Public School System, 1999.

High School Results

Table 4.8 State-Mandated End-of-Course Tests, Average Scale Scores, May 1999.

High School	Algebra I		Biology		English I		ELP		US History	
	1998	1999	1998	1999	1998	1999	1998	1999	1998	1999
Fuquay-Varina	57.7	57.9	57.4	56.4	53.1	54.2	55.5	54.1	57.7	58.2
Wake County	60.8	61.4	59.8	58.3	56.4	56.7	57.0	56.5	59.7	59.5
North Carolina	57.1	N/A	56.2	N/A	53.6	N/A	54.7	N/A	56.3	N/A

**Note. Average scores based on 100 point scale.*

Source: Wake County Public School System, 1999.

Table 4.9 English II (10th Grade) Writing Test, May 1999.

High School	1998	1999
Fuquay-Varina	59.3	62.2
Wake County	53.1	69.1
North Carolina	46.5	57.7

**Note. Scores of 3 or greater out of 4 are considered passing. Percentages shown are for students with passing scores.*

Source: Wake County Public School System, 1999.

Table 4.10 1996-1999 Scholastic Assessment Test (SAT) Results.

High School	1998/99		1997/98		1996/97	
	% Participation	Score	% Participation	Score	% Participation	Score
Fuquay-Varina	62	990	54.4	978	68.8	991
Wake County	76.3	1059	75.6	1052	73.6	1047
North Carolina	61	986	62	982	59	978
United States	43	1016	43	1017	42	1016

**Note. % Participation is the percent of students taking the test. Score is out of a possible 1600 points.*

Source: Wake County Public School System, 1999.

The test results from 1998 and 1999 demonstrate that overall, Fuquay-Varina's students performed about the same or slightly below Wake County as a whole on grade-level tests. While there are clearly some problem areas, the data show that Fuquay-Varina's five main schools are achieving at least the expected growth standard as set by the State Board of Education. This is evident from the ABC report card ratings each school received in the spring of 1998 (Table 4.11).

Table 4.11 1998/99 NC ABCs Status of Schools Which Serve Fuquay-Varina Students.

School	Status
Fuquay-Varina Elementary	Expected Growth
Lincoln Heights Elementary	Exemplary Growth
Willow Springs Elementary	Exemplary Growth
Fuquay-Varina Middle School	Expected Growth
Fuquay-Varina High School	Exemplary Growth

Source: Wake County Public School System, 1999.

In the consideration of student performance in Wake County, it is important to note the increasing number of students whose first language is not English, and whose English proficiency is limited. As of October 1999, there were 86 English as a Second Language (ESL) students enrolled at Willow Springs Elementary School which serves the Fuquay-Varina area's elementary ESL students, 43 ESL students enrolled at North Garner Middle School, which serves Fuquay-Varina as a middle school ESL site, and 46 ESL students at Garner High School, the ESL base for Fuquay-Varina's high school students (T. Hart, personal communication, October 14, 1999). According to district policy, students do not have to take state-mandated tests for the first two years they are enrolled in WCPSS if their language proficiency level is low. After the grace period, though, students do have to take all grade-level, state-mandated tests, and their scores are considered in schools' composite scores (T. Hart, personal communication, October 14, 1999). The academic, social, and emotional needs of these students and their families pose new challenges for this growing school system.

A more traditional problem evident in Fuquay-Varina is significant disparity between test scores of white students and black students (Table 4.12). It will be important to pursue a better understanding of why the drastic differences exist. An examination of scores by socioeconomic

status may provide a relevant contrast or context within which to examine disparity by race. However, in the data which is currently available, such a breakdown does not exist.

Table 4.12 State-Mandated End-of-Course Tests, Percent Scoring Level III or IV by Race, May 1999.

Fuquay-Varina High School	Algebra I		Biology		English I		ELP		US History	
	White	Black	White	Black	White	Black	White	Black	White	Black
1998	72% (212)	45% (75)	73% (322)	34% (87)	69% (296)	30% (80)	78% (324)	40% (85)	66% (224)	26% (66)
1997	64% (227)	41% (70)	75% (328)	24% (95)	75% (296)	31% (96)	76% (327)	35% (96)	66% (205)	28% (58)

Source: Wake County Public School System, 1999.

The dropout rate at Fuquay-Varina High School for 1996-97 was 4.4%. At Garner High School, the school which serves ESL students, the dropout rate was 5.2% for 1996-97. Twelve percent of the students at Fuquay-Varina High School receive free or reduced lunch (WCPSS, 1999).

4.2.3 Educational Level of Community

Educational attainment data for Fuquay-Varina zip code area from the 1990 U.S. Census shows that the majority of residents 18 and over have a high school diploma or some college (Table 4.13). A more recent estimate from the Chamber of Commerce suggests that approximately 17% of Fuquay-Varina residents over 18 have a bachelor's or graduate degree. (Fuquay-Varina Area Chamber of Commerce, 1999c). Given that Wake County Public Schools reported that 84% of its 4,000 graduates in 1997 planned to pursue postsecondary education, plus the fact that Fuquay-Varina's town leaders are focusing on professional development within the town, we can expect to see a shift in the future towards higher educational attainment (WCPSS, 1998).

Table 4.13 Educational Attainment of Persons 18 years and over.

Educational Attainment	n =	% persons 18 and over
Less than 9 th Grade	1244	10.1%
9 th -12 th Grade, no diploma	1954	15.9%
High School Graduate (includes equivalency)	3771	30.7%
Some College, no degree	2293	18.7%
Associate Degree	1178	9.6%
Bachelor's Degree	1427	11.6%
Graduate or Professional Degree	421	3.4%

Source: United States Census, 1990.

4.3 Income

Income levels, poverty status, and employment often help paint a picture of what life is like in a community. These indicators may offer insight into the balance of power in the community, as well as the overall quality of life there.

The mean (average) income in Fuquay-Varina in 1998 was \$61,529, and the median (50th percentile) annual household income was \$48,948. The median income is projected to increase to \$51,125 by 2003. In 1998, 26.5% of households reported incomes of \$25,000 or less. However, 35.3% had incomes ranging from \$25,000 to \$49,000, and 32.9% have incomes from \$50,000 to \$99,999 (Fuquay-Varina Area Chamber of Commerce, 1999b).

4.3.1 Poverty Status

According to the 1990 U.S. Census, 1,454 people were living in poverty in Fuquay-Varina. Of these, 343 were under the age of 12. There were 98 two-parent families and 135 single-parent families with children living in poverty. The number of white residents living in poverty was 781 (21.8% of total white population in 1990), while the number of black people living in poverty was 595 (73.5% of total black population in 1990). However, in 1990, black people made up 18.2% of the overall population, while white people made up 80.5% (1990 U.S. Census). Also,

at the time of the census, 32.7% of older adults were considered to be living in poverty. These statistics suggest that populations of minorities (in general), children, young families, and the elderly should be carefully examined in the health section in evaluating their access to health care and the services they need.

4.3.2 Employment

According to 1998 Chamber of Commerce data, the unemployment rate in Fuquay-Varina was 1.8%. As of 1995, 5,719 people were thought to be employed within the town limits. By 2005, the Chamber of Commerce predicts that over 7,000 people will be employed in town, and by 2025, that figure is expected to top 17,000. At present, chief occupations include labor, tradesmanship, and administrative services. However, with the approval of over 367,000 square feet of commercial, office, and instructional building space to be constructed, Fuquay-Varina is likely to experience a shift in its labor market (Fuquay-Varina Area Chamber of Commerce, 1999).

One aspect of employment which may not emerge in the data is the influx of Latino migrant farmworkers and laborers. Due to language barriers, immigration regulations, and frequent use of temporary or shared housing, it is difficult to ascertain how much this actually affects the labor market. However, given the increasing numbers of Latino children in the school system and the increasing amount of media attention given to the issue, we can surmise that the presence of Latino workers is significantly impacting the community.

5. HEALTH PROFILE

Health and the influences on health are multi-faceted. In this section we will examine various indicators and influences on the health of the community of Fuquay-Varina, which include morbidity (disease and disability) and mortality (death); birth and pregnancy outcomes; and aspects of social health, school health, and quality of life.

Throughout this section, where data specific to Fuquay-Varina were not available, inferences will be made based upon county and state level data. The Fuquay-Varina zip code area and Wake County are relatively similar in terms of racial makeup, except that Wake County has a slightly higher proportion of minorities overall and Fuquay-Varina a higher proportion of Latinos. With respect to age, in Wake County, 64.6% of the population is aged 20-64 compared to 59.8% in Fuquay-Varina (Fuquay-Varina Area Chamber of Commerce, 1999c).

5.1. Morbidity and Mortality

In this section, morbidity and mortality data for Wake County and North Carolina are reported as rate per 100,000 persons, whereas data for Fuquay-Varina are reported as frequencies and percentages. Therefore, our ability to make true comparisons between the town and the other two levels is accordingly limited. Furthermore, our primary data source, the North Carolina Center for Health Statistics, categorizes statistics by race in two categories- white and minority. Thus, we are unable to extract implications for specific minority groups, such as African-Americans, Latinos, and Asians.

5.1.1 Morbidity

The reported communicable diseases are categorized into three sections: sexually transmitted diseases (STDs), childhood diseases, and other diseases.

Sexually Transmitted Diseases

Of the reported STDs in Fuquay-Varina, gonorrhea was reported most frequently, followed by chlamydia in 1998. In fact, gonorrhea and chlamydia cases accounted for 80% of all the communicable diseases reported in the area. This pattern is notable at the state and county levels as well (Table 5.1). At the state and county levels for all ages, minority males had the highest overall rates of reported STDs, with the exception of chlamydia, for which minority women had the highest rate. Among white males and females, gonorrhea and chlamydia rates were the highest of all STD infections. For persons under twenty, the highest rate of STD infection was found for chlamydia in minority women 15-19 years of age (Table 5.2). Other rates among this group mimic those of the general population. No new cases of Acquired Immunodeficiency Syndrome (AIDS) were reported for 1998 in Fuquay-Varina. Similarly, there were no new reported cases of AIDS at the county level among the less-than-twenty-years-old group.

Table 5.1 Rates of selected STDs and AIDS for all age groups by race and sex, per 100,000 people, Wake County and North Carolina, 1998

Disease	All Races		White Males		White Females		Minority Males		Minority Females	
	NC	Wake	NC	Wake	NC	Wake	NC	Wake	NC	Wake
Gonorrhea	254.6	281	39	39.5	58.4	47.3	1057.9	1371.9	764.4	800
Chlamydia	294	278.3	36.1	20.2	197.5	151.4	297.9	232.4	1326.3	1527.3
Syphilis	28.2	21.4	6.1	5	7.3	4.9	104.9	95.5	88.2	58.5
AIDS	10.4	13.6	6.4	8.7	0.7	0.4	47.9	63.7	18.1	25.7

Source: North Carolina Center for Health Statistics, 1998

Table 5.2 Rates of selected STDs and AIDS per 100,000 among youth 10-19 years of age by race and sex, Wake County and North Carolina, 1998

Disease	Age group	All Races		White Males		White Females		Minority Males		Minority Females	
		NC	Wake	NC	Wake	NC	Wake	NC	Wake	NC	Wake
Gonorrhea	10-14	59	40	3.4	...	20.7	...	45.6	...	290.5	294
	15-19	1052	897.8	87.6	77.5	359	241.4	2316.5	2632.1	3708.9	3082.7
Chlamydia	10-14	111.1	101.4	2.8	7.2	82.8	44.9	18.2	38.7	525.3	268.4
	15-19	1868.2	1684.9	95.3	49.3	1556.9	1064.9	800.7	732.2	7882.6	8310.8
Syphilis	10-14	2.2	2.4	...	...	0.6	...	2.6	17.3	10.6	...
	15-19	26.2	10.3	2.2	...	12.3	7.1	48.9	19.8	83.2	36.1
AIDS	10-14	0.2	...	...	...	...	...	1.3	...	...	...
	15-19	1	...	1.1	...	...	...	2.7	...	1.3	...

Source: North Carolina Center for Health Statistics, 1998

Note. ... Indicates no reported cases, or rate is not significant

Childhood Diseases Preventable by Immunization

Immunizations are a relatively safe, effective, and cost-effective disease prevention measure. Currently, the recommended vaccination schedule in the United States for infants and children includes four doses of diphtheria-pertussis-tetanus (DPT) vaccine; three doses each of polio, *Haemophilus influenzae* type b (Hib) and hepatitis B vaccines; and one dose each of vaccine against measles-mumps-rubella (MMR) and chicken pox by two years of age (<http://www.cdc.gov/nip/pdf/child-schedule.pdf>, 1999). Vaccination coverage rates are available only at the national and state levels.

As demonstrated in Table 5.3, immunization coverage rates are higher in North Carolina than in the United States overall. The comparative incidence of whooping cough rates in the United States (2.9), North Carolina (1.5), and Wake County (1.6) in 1998 demonstrate the implications of high vaccination coverage. In Fuquay-Varina, no childhood vaccine-preventable diseases were reported in 1998.

Table 5.3 Up-to-date immunization coverage for selected vaccines in children aged 19-35 months, United States and North Carolina, National Immunization Survey 1997

	DPT/DT	Polio	Measles (MMR/MR)	Hib	Complete series
United States	81 %	91 %	91 %	93 %	76 %
North Carolina	84 %	96 %	94 %	95 %	80 %

Source: CDC, National Immunization Program, <http://www.cdc.gov/epo/mmwr/preview/mmwrhtml/0053832.htm>

Other Diseases

Other cases of communicable diseases reported in Fuquay-Varina in 1998 were as follows: salmonellosis (n=5), hepatitis A (n=3), viral meningitis (n=2), tuberculosis (n=2), food borne disease (n=1), and hepatitis B carrier (n=1). At the county and state levels, minority males had the highest rates of communicable disease, followed by minority females. Viral meningitis was reported at a significantly higher rate for Wake County than for the State, and in both cases, minority males and minority females had the highest rates for these diseases. Overall tuberculosis (TB) rates were comparable for the county (7.1) and state levels (6.6). At the county level, the minority male rate was the highest (22.3), followed by the minority female rate (21.4). Among white males and females, the TB rates in Wake County were 4.1 and 1.3, respectively. Similarly, the minority male rate of TB was the highest at the state level (25.4), followed by the minority female rate (10.5), white males (4.7) and white females (1.6). The highest rate of Hepatitis A was reported among white males at both the county and state levels, with the overall rate at the county level being somewhat higher than at the state level.

5.1.2 Mortality

Overall, chronic illnesses such as diseases of the heart were the primary cause of death among all groups in Fuquay-Varina in 1998, followed by a form of cancer (malignant neoplasms) and cerebrovascular disease (for example, stroke). There were no deaths from AIDS or homicide in Fuquay-Varina (Table 5.4).

Table 5.4 Leading causes of death by race and sex in the Fuquay-Varina zip code area, 1998

Cause of Death	White Females	Minority Females	White Males	Minority Males	Total
Diseases of Heart	6	5	7	2	20
Malignant neoplasms	2	2	4	3	11
Cerebrovascular disease	4	4	0	1	9
Respiratory disease	2	1	1	0	4
Diabetes	1	2	0	1	4
Kidney disease	1	1	2	0	4
Unintentional injuries	0	1	2	0	3
Pneumonia & influenza	2	1	0	0	3
Chronic liver disease/Cirrhosis	1	1	0	0	2
Septicemia (blood-poisoning)	1	0	0	1	2
Anemias	1	0	0	0	1
Congenital anomalies	0	0	1	0	1
Hernia abdominal cavity	0	0	1	0	1
Hypertension	1	0	0	0	1
All other causes	9	2	2	2	15
Total	31	20	20	10	81

Source: North Carolina Center for Health Statistics, 1998

Fuquay-Varina reflects similarly to Wake County and North Carolina, in that the primary causes of death among both sex and race/ethnic groups were chronic diseases (diseases of the heart, cancer and cerebrovascular diseases). However, the overall rates for these causes of death differed greatly between Wake County and North Carolina, as shown in Table 5.5.

Table 5.5 Selected mortality rates per 100,000 for chronic disease in North Carolina and Wake County

	Diseases of the Heart	Cancer	Cerebrovascular disease
North Carolina	257.6	203.1	72
Wake County	140.6	132.2	45.9

Source: North Carolina Center for Health Statistics, 1998

In Wake County and in North Carolina, there are important differences in mortality rates between whites and minorities. Minority males and females showed significantly higher mortality rates for AIDS and homicide in 1998. In Wake County, the rates for homicide were 14.3 per 100,000 in minority males and minority females. This compares with 5 and 1.3 (both per 100,000) for white males and females, respectively. In North Carolina, the homicide rates were as follows (all per 100,000): 36.5 among minority males, 8.4 among minority females, 7.2 among white males and 2.4 among white females.

In the State, minorities face a higher risk of death due to AIDS than whites. In Wake County, mortality rates for AIDS (per 100,000) were 30.2 and 8.6 among minority males and females, respectively, compared with 4.1 for white males and 0 for white females. In the State, rates (per 100,000) were 26.8 in minority males, 11.5 in minority females, 2.9 in white males, and 0.4 in white females.

As shown in Table 5.6, the highest mortality rate among the 15-19 year old age group for both the County and the State was due to injuries. Minority males were found to have the highest rate of death due to injury, followed by white males, white females and minority females, respectively. Deaths from injury among the 10-14 year old age group were also significant when compared to deaths from other causes in that age group. Similar to deaths by injury, deaths from homicide were highest among the 15-19 year old age group at the county and state levels. Compared to the overall mortality rates (per 100,000) for AIDS, 5.7 for North Carolina and 5.9 for Wake County, AIDS deaths among children were low.

Table 5.6 Mortality rates for selected causes by sex, race and age group, per 100,000 in North Carolina and Wake County, 1998

Cause of death	Age Group	All races		White females		White males		Minority females		Minority males	
		NC	Wake	NC	Wake	NC	Wake	NC	Wake	NC	Wake
Diseases of the heart	5-9	0.2	...	0.6	...	...	...	...	...	...	...
	10-14	2.4	5.3	2.4	7.5	2.2	...	1.3	...	3.9	19.4
	15-19	2.8	...	2.3	...	2.2	...	...	...	8.2	...
Cancer	5-9	2.1	2.4	1.7	...	2.2	...	2.4	16.7	2.3	...
	10-14	3	...	1.2	...	5	...	2.7	...	2.6	...
	15-19	2.6	2.6	1.8	...	2.8	...	2.7	18	4.1	...
Injuries	10-14	11.8	5.3	8.9	...	14	14.4	8	...	16.9	...
	15-19	48.4	48.9	37.4	28.4	64.9	63.4	17.3	18	65.3	99
Suicide	10-14	2.6	...	2.4	...	4.5	...	...	...	1.3	...
	15-19	7	...	2.3	...	10.5	...	2.7	...	13.6	...
Homicide	5-9	1.1	...	0.6	...	0.5	...	1.2	...	3.5	...
	10-14	0.6	...	0.6	...	...	...	1.3	...	1.3	...
	15-19	9.6	5.1	2.3	...	4.4	7	9.3	...	39.4	19.8
AIDS	5-9	0.2	...	...	...	...	...	...	...	1.2	...
	15-19	0.2	...	...	...	...	...	1.3	...	...	...

Source: North Carolina Center for Health Statistics, 1998

Note. ... Indicates no reported cases, or rate is not significant

A gender-race disparity is seen in the morbidity and mortality data overall. Further investigation is warranted to address these disparities.

5.2 Births and Pregnancy Outcomes

According to the North Carolina Center for Health Statistics, in 1998, there were 9,031 births to women residing in Wake County, accounting for 8.1% of all North Carolina resident births. At the state and county levels, roughly three-quarters of births were to whites and the remaining one-quarter were to minorities (North Carolina Center for Health Statistics, 1998). Fuquay-Varina resident births represented 2% (n=170) of all Wake County resident births; 75.3% (n=128) of births were to whites and 24.7% (n=42) to minorities (North Carolina Center for Health Statistics, 1998).

Teen pregnancy rates in North Carolina in 1997 reflected a 13% percent decline from 6 years ago (CDC, 1999). The Wake County rate is 59.7 per 1,000 teenagers. In Fuquay-Varina, there were 16 births to young women ages 15-19, accounting for 9.4% of all resident births. Abortion rates are unavailable for Fuquay-Varina; however, according to the most recent data (1997), 26.9% of pregnant females ages 15-19 in Wake County terminated a pregnancy.

Infant health and pregnancy-related indicators in Fuquay-Varina were similar to those of Wake County. For example, 87.2% (n=7873) of women in Wake County initiated prenatal care during the first trimester of pregnancy compared to 87.1% (n=148) of women in Fuquay-Varina (North Carolina Center for Health Statistics, 1998). Moreover, more than 99% (n=8962) of women in the County and all women in Fuquay-Varina received some prenatal care. There were no significant differences between races in initiation of prenatal care (North Carolina Center for Health Statistics, 1998).

A number of high-risk behaviors, such as alcohol consumption and smoking during pregnancy, contribute to poor birth outcomes. Unfortunately both of these behaviors are under-reported in birth certificate data; so, it is difficult to obtain a true picture of the impact of these behaviors on pregnancy outcomes. Out of 170 live births to women in Wake County, 8.2% (n=14) of women reported smoking during pregnancy compared to 6.4% (n=575) countywide (North Carolina Center for Health Statistics, 1998). No women in Fuquay-Varina reported smoking during pregnancy and 1.1% (n=1) reported alcohol consumption during pregnancy (North Carolina Center for Health Statistics, 1998).

Birth outcomes can be an indicator of the health of communities. Outcomes such as low birthweight (<2500 grams) and premature delivery (delivery at <36 weeks gestation) are associated with high infant morbidity and infant mortality (death before age 1). Data for singular

years can be less stable than rates calculated over several years; so birth outcome data will be presented for five-year intervals when available. The overall infant mortality rate in North Carolina for the years 1994-1998 was 9.4 infant deaths per 1,000 deliveries compared to 8.5 in Wake County (North Carolina Center for Health Statistics, 1998). The rate for whites in North Carolina and Wake County were 6.3 and 6.4, respectively, and were 16.3 for minorities at the state and county levels in 1998 (North Carolina Center for Health Statistics, 1998). United States rates are presented by ethnic group and were 7.2 per 1,000 overall, 6.1 for whites, 14.0 for blacks, and 6.0 for Hispanics (CDC, 1999). An obvious racial disparity exists at the national, state, and county levels for infant mortality, as well as for low birth weight. In 1998, 7.8% (n=9870) of all North Carolina resident births were low birth weight babies (North Carolina Center for Health Statistics, 1998). Of these babies, 56.5% (n=5578) were born to whites and 43.5% (n=4292) to minorities. Data on premature delivery were not available at the county, state or national levels.

5.3 Child Abuse and Neglect

The Child Protective Services (CPS) division of Wake County Human Services handles reports of child abuse and neglect for the county. An examination of countywide data allows us to get some idea of the trends in reports of abuse and neglect (J. Ray, personal communication, November 18, 1999). In this section, we will define children as people of ages 0-18.

According to CPS, most cases of abuse or neglect are reported by school staff, mental health providers and County case-workers (J. Ray, personal communication, November 18, 1999). There were 3,491 reported cases of child abuse or neglect involving 7,588 children in Wake County during the 1998-99 school year. Of these, 469 cases were substantiated by investigators. In comparison, there were 2,691 reported cases involving 5,891 children, and 497 substantiated

cases during the 1997-98 school year. In 1997-98, 49 out of 497 cases were abuse, 2 out of 497 were dependency cases, and 446 out of 497 were neglect (J. Ray, personal communication, November 18, 1999). The Fuquay-Varina Police Department reported that they investigated approximately 12 child abuse cases in 1999 (G. McNeill, personal communication, April 20, 2000).

5.4 School Health

School nurses serve students enrolled in Wake County Public Schools, but they are employees of Wake County Human Services. Each school nurse serves 3 to 4 schools; therefore, schools do not have a nurse everyday. Data are available for 21 schools in the Southern Regional area of Wake County, including Fuquay-Varina, for the 1997-1998 school year.

Health support services include screenings, counseling, services for children with chronic diseases, and health consultations with parents, teachers, and other school staff. Some common topics addressed with students included family planning (n=85), hygiene (n=110), nutrition (n=100), pregnancy (n=172), sexually transmitted disease (n=47), substance abuse (n=11), and "other" topics (n=4400). The most common screening services provided were vision rescreens (n=2350), health assessments of special problems (n=4352), and student health history reviews (n=2093) (Wake County Human Services, 1998).

Nurses addressed AIDS, health promotion, first aid, chronic disease, the nurse's role, and other topics through health education to school staff. Health education to parents occurred less frequently than to staff and students. The majority of education provided to parents was on the topic of the nurse's role, with 3,749 parents receiving this information. Nurses made 113 home visits (Wake County Human Services, 1998).

School health reports provide information on the number and qualifications of nursing staff serving each school; school health policies; medication administration (meds) and provision of services breakdown; and incidence of various types of illness, injury, or emergency occurring in each school (Table 5.7).

Table 5.7 Health needs and incidents addressed by school nurses, 1998-99

Health Need/ Incident	Fuquay-Varina Elem.	Lincoln Heights Elem.	Willow Springs Elem.	Holly Springs Elem.
Total # of students	887	480	682	800
Attention deficit disorder/ hyperactive disorder	45	18	36	45
Asthma	23	28	29	18
Injury requiring care	7	1	8	n/a
Invasive Procedures	4	0	0	7
Chronic Illness	69	30	48	82
Long Term Meds.	45	20	34	55
Short Term Meds.	14	10	15	20
PRN Meds. (e.g. asthma)	23	8	34	25
Health Ed. Programs	23	10	17	36

Source: End of Year Report: School Health Nursing and Program Summary, 1999

5.4.1 Pilot program linking student health and student performance

Wake County Human Services and Wake County Public Schools have joined forces to create the Partnership for School Success, a pilot project that has two phases. One focuses on learning from research-based models and the other involves a realignment of resources (Partnership for School Success: School Age Committee, 1999). The school district has set a goal to have 95% of students performing at or above grade level by 2003. In 1997-1998, 18% of students were performing below grade level. The Partnership has dedicated itself to improving the educational outcomes of students as well as impacting poverty and improving the mental, physical, and behavioral health of children and families (Partnership for School Success: School Age

Committee, 1999). Ultimately, the committee seeks to form a partnership between human services and the public school system, which will serve families and students on multiple levels, representing a new and more holistic approach to improving school success.

5.5 Health Resources

In Wake County in 1997, there was one primary care physician for every 1,101 residents; one primary care physician plus extender (nurse practitioner or physician assistant) for every 1,989 residents, one registered nurse for every 99 residents; and one dentist for every 1,746 residents (North Carolina Center for Health Statistics, 1997). There was a ratio of 419 people for every hospital bed, and the hospital use rate was 87% of capacity (North Carolina Center for Health Statistics, 1997). In comparison, the most recent data (1995) for North Carolina show there was one primary care physician for every 467 people and a nurse for every 122 people in the state (North Carolina Center for Health Statistics, 1997).

In 1997, 8.8% of the Wake County population was Medicaid-eligible (low-income eligibility-based insurance), and the Medicaid spending per capita was \$276.00 (North Carolina Center for Health Statistics, 1997). Of children ages 0-4, 20.9% of Wake County children used the County health department in 1997 for child health, child service coordination, or other services (North Carolina Center for Health Statistics, 1997).

Various health insurance data were available for the State, although the most recent year varied by the type of data. Approximately 16% (n=1,160,000) of North Carolinians were without health insurance in 1996 (North Carolina Center for Health Statistics, 1997). In 1997, approximately 14.6% (n=1,070,000) of the population was enrolled in a Health Maintenance Organization (North Carolina Center for Health Statistics, 1997). In 1995, approximately 1,025,000 received Medicare Insurance (for people ages 65 and over), with each recipient

receiving an average of \$3,943. Another 1,130,000 were receiving Medicaid at an average of \$3,255 per recipient (North Carolina Center for Health Statistics, 1997).

5.5.1 Health and Community Services/Facilities

Based upon a phone conversation with the Wake County Emergency Medical Services (EMS), a local volunteer rescue squad and Wake County Emergency Medical Services both serve Fuquay-Varina locally. Four acute care hospitals are available in Wake County, three in Raleigh and one in Cary. The hospitals in Raleigh include Wake Medical Center (with trauma services), Rex Hospital, and Raleigh Community Hospital; Western Wake Hospital is in Cary (anonymous personal communication, December 3, 1999).

WakeMed has a rehabilitation facility in Fuquay-Varina to help with the, “treatment of patients recovering from stroke, head/spinal cord injuries, brain injuries, arthritis, and neuromuscular disorders” (WakeMed, 1999). This facility serves over 1,200 patients a year (WakeMed, 1999).

The Southern Regional Center (SRC) in Fuquay-Varina is a regional branch of Wake County Human Services and a pilot site for future facilities in Wake County. Health services include mental health and substance abuse treatment, provision of school health personnel, clinics for women’s and children’s health, HIV/STD testing, maternity care, environmental health, crisis intervention, and economic assistance through Medicaid insurance (Southern Regional Center, 1999). Other services available include job search and work permits, food stamp case management, revenue collections, and registration of deeds for marriage licenses and title searches. Bilingual (Spanish/English) staff is also at the facility to serve the needs of those who do not speak English as their first language.

The Fuquay-Varina Community Center is run by the Parks, Recreation, and Cultural Resources Department, and provides instructional classes for all ages in a wide variety of health and wellness areas, such as physical fitness, arts and crafts, dance, emergency rescue techniques, and martial arts (Town of Fuquay-Varina, 1999).

The Pine Acres Community Center serves a part of the town which is primarily African-American. Services include an after-school program that focuses on learning, Meals on Wheels and elder daycare. This Center is also a community-meeting place.

5.6 Mental health and substance abuse

Mental health and substance abuse are topics of concern for many communities nationwide. It is estimated that 99,000 persons in North Carolina have severe and persistent mental illness (North Carolina Division of Mental Health, Developmental Disabilities, and Substance Abuse Services [MH/DD/SAS], 1999). The state has a long history of caring for those suffering with mental illness and is able to provide statewide community-based care as well as inpatient care. Most communities in the state have broad-based coalitions in place to address concerns about substance abuse (North Carolina Division of MH/DD/SAS, 1999).

The North Carolina Division of the MH/DD/SAS (1999) claimed to have made notable advances in mental health services available for children. For example, the Willie M. Program in North Carolina serves more than 1,600 children and adolescents with violent behavior and/or serious emotional, mental or neurological disabilities. The proportion of children served by the program in the state has increased from 59.4 per 100,000 youth population in 1982 to 84.7 per 100,000 in 1997. The average age of the clients is 14.5 years old. Eighty percent of them are males and slightly more than half of them are African-American. However, the North Carolina Division of MH/DD/SAS (1999) notes that fifteen percent or more of children served in their

area programs have unmet mental health needs. Furthermore, they estimate up to 100,000 children who require professional interventions in North Carolina are unserved .

Locally, the Wake County Public School System offers psychological services to its students. The school system employs 46.5 psychologists, including a crisis intervention specialist and a behaviorally/emotionally handicapped specialist (WCPSS, 1997).

The results of the Center for Disease Control's Youth Risk Behavior Survey may be used to gain insight into substance abuse and other high-risk behaviors involving teens, including suicide attempts. According to the 1997 national survey, in which 16,262 questionnaires were completed by students in 151 schools, male students were generally more likely than females to use smokeless tobacco (9.0% compared to 4.0%, respectively), alcohol (7.2% compared to 3.6%, respectively), and marijuana (9.0% compared to 4.1%, respectively). Males were also more likely than females to acquire illegal drugs on school property (37.4% compared to 24.7%, respectively) (CDC, 1998). Hispanic students were, overall, more likely than white students to be involved with alcohol use (8.2% compared to 4.8%, respectively), marijuana use (10.4% compared to 5.8%, respectively), or acquiring illegal drugs on school property (41.1% compared to 31.0%, respectively) (CDC, 1998). A clear gender and race disparity is evident at the national level for suicidal ideation and tobacco and drug involvement on school property. Among high school students in North Carolina, the prevalence or rate of use and/or abuse of all substances included in the survey was higher among males than females. However, females showed higher rates of suicidal ideations and behaviors than did males (CDC, 1998).

According to the same survey, 35.8% of high-school students in North Carolina reported current cigarette use, 42.7% reported current alcohol use, 22.9% reported episodic heavy drinking, and 24.9% reported current marijuana use. Current use is defined as using the

substance at least once within the 30 days prior to the study, and episodic heavy drinking is defined as at least five drinks on one occasion within the 30 days prior to the study (CDC, 1998)

5.7 Crime

The total criminal offenses in Fuquay-Varina for 1999 as of October 1999 were 1194 (Fuquay-Varina Police Department, 1999). The most common offenses were criminal damage (n=166, 13.9%), and larceny (n=395, 33.1%) (Fuquay-Varina Police Department, 1999). There were 45 arrests on drug charges in Fuquay-Varina in 1999 (G. McNeill, personal communication, April 20, 2000). There were 325 arrests on file for the year, as of October 1999. The overwhelming majority of the arrests were adult males (249, 76.6% of total arrests). Male to female arrests occur at a ratio of approximately 4:1 (Fuquay-Varina Police Department, 1999).

Juvenile crime statistics for Wake County and North Carolina were available for 1997 and 1998. Total juvenile (under age 18) arrests in Wake County in 1997 were 3,427 compared to 3,261 in 1998, a decrease of 4.8%. In the State, juvenile arrests totaled 58,340 in 1997 and 57,670 in 1998, a decrease of 1.1% (NC State Gov, 1998). The percentage of State juvenile arrests that were in Wake County for the years 1997 and 1998 were 5.6% and 5.7%, respectively (NC State Gov, 1998). As of October 1999, Fuquay-Varina had not had any juvenile arrests for the year (Fuquay-Varina Police Department, 1999).

Table 5.8 Top 3 most common juvenile arrests in Wake County in 1997 and 1998

Juvenile arrest category	# of juvenile arrests in Wake Co. for each category		# of juvenile arrests in each category as a percent of total Wake Co. juvenile arrests	
	1997	1998	1997	1998
Larceny	550	537	16.0	16.4
Drugs (possession/intent to sell)	430	398	12.5	12.2
Simple assault	333	390	9.7	12.0
Total	3,427	3,261	38.2	40.6

Source: Crime in North Carolina - 1998, NC State Gov.

The top 3 most common juvenile arrests statewide in 1998 were the same as those for the County: larceny (17.5%), drug possession/intent to sell (7.7%), and simple assault (14.1%) (NC State Gov, 1998). In comparing Wake County percentages to the State in 1998, the difference in juvenile drug arrests was greatest among the top 3 categories. In 1998, the top 3 criminal offenses among adults were driving while intoxicated (DWI), drug possession/intent to sell, and simple assault.

5.8 Conclusion

In this section, we have presented information on several salient aspects of health, including morbidity and mortality, birth and pregnancy outcomes, child abuse and neglect, school health, health resources, crime, mental health and substance abuse. There are similarities and differences in the health of Fuquay-Varina when comparing the town to the county, state, and nation. For both morbidity and mortality at the county and state levels, a general disparity was evident between minorities and whites. Similarly, this difference is also noted at the national, state, and county levels for infant mortality and low birth weight. Consistently higher rates of STD's at the county and state levels, particularly gonorrhea and chlamydia, were noted when compared to other communicable diseases.

Regarding child abuse and neglect in Wake County, between the 1997-98 school year and the 1998-99 school year, there was an increase in the number of reported cases of abuse and neglect. However there was a reduction in the number of substantiated cases. The health resources data show that most people had health insurance in 1996 and hospital facilities were adequate to serve the population size.

For any health-related intervention in Fuquay-Varina, it would be wise to first consider the comparisons and contrasts discussed in order to strategically tailor the program according to the town's specific needs.

6. CHAPTERS ACCORDING TO MAJOR THEMES AND ISSUES

6.1 Growth

The issue of growth in Fuquay-Varina runs very deep for its residents. Of all the themes emerging from community interviews, growth concerns were the most prominent and arguably evoked the most passion among respondents. These concerns, whether positive or negative, carry some measure of validity, as the town's population has risen almost 75% since the 1990 census. The Latino community has seen an even more pronounced growth, having doubled in size over the past decade.

For one resident, the issue of growth was as simple as economics. He contended, "Growth is always healthy...it means economically the area is going to boom." For other residents, issues surrounding growth were not so straightforward. Overall, the heart of the issue is the community's desire to grow culturally and economically, while at the same time maintaining the village character that makes Fuquay-Varina a special place to live.

In general, growth in Fuquay-Varina is characterized by: (1) an influx of new residents who work outside of Fuquay-Varina and have no prior ties to the community, (2) an increase in the number of Latino residents, and (3) an increase in the number of large-scale businesses entering the community, accompanied by the outward growth of these businesses away from downtown. Within this context, residents' concerns are: (1) the threat to the community's "small town" character, (2) the sustainability of businesses in downtown Fuquay-Varina, and (3) the limitations of resources (i.e., transportation, water and sewage, and housing) to accommodate large-scale growth.

6.1.1 Small Town Fuquay-Varina and the “Cary Syndrome”

Residents are very protective of what they call the “small town” feel of traditional Fuquay-Varina. In this context, they described their community as one where “people know their neighbors” and speak to passers-by. In talking with community members, they were obviously desperate to maintain their village character, particularly in light of the recent growth trend.

Upon seeing its impact on the neighboring towns of Apex and Cary, residents adamantly opposed widespread, uncontrolled growth, which they perceived in these communities as rampant growth at the expense of community character, or as the authors call it, the “Cary Syndrome.” One resident summed up the sentiments of most respondents by commenting about Fuquay-Varina: “It’s a nice quiet little town, and we don’t want it to turn into another Cary.”

Residents also mentioned not wanting to become a “bedroom” community to Raleigh and Research Triangle Park, where people working in these neighboring cities move to Fuquay-Varina, attracted to lower real estate prices and taxes, but invest little in the community. Even one newcomer echoed this concern of long-time residents. He spoke candidly about the value of the distinct character of the Fuquay-Varina community and how other newcomers do not have an appreciation for this character. He had this to say about newcomers’ lack of appreciation for the character of Fuquay-Varina: “...it’s fast being diluted...there are a lot of people moving here that don’t care about that...”

While residents find the notion of becoming like Cary worrisome, many confidently believe that Fuquay-Varina has not yet reached the point of no return. The community, aware of the sacrifices that come with widespread growth, are determined not to surrender to the “Cary Syndrome.” A long time resident critical of growth in other communities warned of similar threats to Fuquay-Varina:

Look at other communities and see how they're growing. Except for Wake Forest, all is homogenous. In Fuquay-Varina, we're not at that point...we're on the brink of losing a lot of what gives us our identity.

6.1.2 Fuquay-Varina Rush Hour

In talking with residents, some already felt one of the more common growing pains of a population boom-increased traffic. Several times residents mentioned concerns about increased traffic on Highway 42, the main entrance to Fuquay-Varina. In sharing her thoughts on the community's recent traffic woes, one resident joked, "When did Fuquay-Varina get a rush hour?"

Repercussions of this increased traffic affect downtown where residents noted an increase in the number of large transfer trucks traveling through Main Street. On any given day, one might notice several trucks passing through downtown in less than a 15-minute period. Residents argued this nuisance further deteriorates downtown by disrupting pedestrian traffic, thereby discouraging shopping and leisure. One resident spoke passionately about his discontent with the situation:

...[the Main Street truck traffic] isn't conducive to village character...it's not right...the trucks come in at 45 mph in a 25 mph zone. They don't need to be down here; it's something people need to speak out on...

Recent concerns such as these prompted residents to fight in preserving downtown Fuquay-Varina. The city now participates in the "Main Street Project" as part of a national effort to revitalize the downtown businesses in communities all over the United States. A few residents felt strongly that the town should construct an overpass to divert traffic away from downtown. One of these residents noted, "...we voiced to lower the speed limits and preserve character; now

we're voicing the need for a bypass. We're probably the only town in Wake County that doesn't have a bypass." While no consensus exists on this issue, residents are in discussion about how to best address a new bypass.

6.1.3 Business and Economic Growth in Fuquay-Varina

Questions about new businesses moving into Fuquay-Varina revealed mixed emotions. Some residents applauded the economic growth and convenience larger businesses bring to the community. One benefit of increased business is increased employment, about which one resident remarked, "There is a job for everyone in Fuquay-Varina."

On the other hand, some mentioned the coming of big business with dread. One resident sarcastically said this about the entrance of a Wal-Mart Department Store currently under construction, "Wal-Mart is coming...Whoopie!"

A recent newspaper article published in the *Raleigh News and Observer* discussed Wal-Mart's entrance into the community in relation to the potential threat posed to "mom- and-pop" stores in the downtown area. The author reminded readers of the value of shopping at small, family-owned businesses as he reminisced about a father and son visiting a small hardware together. He saw the presence of large franchises like Wal-Mart in small towns as a threat to the village character and family-centered culture of communities like Fuquay-Varina.

The Chamber of Commerce estimates some 42 businesses are now seeking entrance into the town of Fuquay-Varina. With growth occurring at this rate, the community must strike a balance between maintaining "small town" character and continued growth.

6.1.4 Limited Resources

Regardless of residents' stances on growth in Fuquay-Varina, they realistically viewed the issues that inevitably must be addressed. Even residents who felt good about growth in Fuquay-

Varina were concerned about limited resources in the community, such as decent, affordable housing, water and sewage, and schools. Concerns about affordable housing for the poor also emerged several times in interviews.

Service providers and community members also mentioned concerns about a dwindling water supply. While there are no immediate shortages, they expressed the need for addressing this issue in response to growth projections and predicted future needs.

As the town of Fuquay-Varina grows, so does the number of students enrolled in schools. Increased class size directly results from the growing population. One service provider expressed frustration about the perpetual problem of inadequate classroom space.

Opinions about growth in Fuquay-Varina varied widely, but overall, residents remained cautiously optimistic. However divided Fuquay-Varina residents were about the benefits and/or detriments of growth, all recognized that this growth is not unique and happens in communities all over the country. The community seems to be focusing in on a number of key issues that will be important in deciding how well it remains intact as it continues to grow larger in terms of population, economics, and ethnic diversity.

The Fuquay-Varina government made efforts to follow a comprehensive growth plan, which they developed in anticipation of the necessity to strategically plan and execute the growth plan in the town. This issue came up in almost all of the interviews and obviously resided solidly on the hearts and minds of Fuquay-Varina residents. Residents were keenly aware of the high stakes involved in accomplishing managed growth, as one resident put it:

...the planning that happens in our community in the next 5 years is gonna be so important. In the past you could make a mistake and it didn't hurt...there is not as much room for error now-more than ever. We're changing more rapidly

now...it's real important that we make good decisions now because our town is changing so much.

Another resident summed up well the challenges and realities of growth in Fuquay-Varina by saying, "I think it's [Fuquay-Varina] growing as carefully as they can, trying to plan for growth...not to let it explode and get out of hand...but...that is a very difficult thing to do, no matter how much you plan..."

6.1.5 Youth Voice

The youth of Fuquay-Varina had differing perspectives on town growth. Elementary and middle school children thought that the size and character of Fuquay-Varina was "just right." They also noted that parents work close by, schools are near, and people all know each other: "Everybody is helpful," remarked one student. Youth did not see traffic as problematic, though most interviewed were not of driving age. Consequently, they had no first-hand knowledge of the frustration cited by many adult community members. High school students thought that Fuquay-Varina was too small: "you don't have anything to do," complained one high school girl. In general, youth of all ages in Fuquay-Varina were excited and curious to see what rapid growth will bring to Fuquay-Varina and did not see the negative effects of such growth.

6.2 Race Relations

One of the areas addressed in the context of the formal interview process was race relations, framed in the question, “How do different ethnic groups interact?” Respondents addressed race in the context of multiple other questions as well. Generally, the responses ranged from “great” by a community leader, to individuals expressing concerns about segregation and racially based community decisions. Most, however, expressed that while not seeing overt problems, they wanted improvement in relationships between different ethnic groups. One community leader said, “There’s no real conflict, but there’s no real effort.” A Latino community member said while there are not that many problems between the different people, there is not much integration either. This individual added that whites, blacks, and Latinos tend to keep to themselves. An African American community member commented that the interaction between ethnic groups is “good, but still it’s always improvement. You know, that’s both sides.....it’s probably got to be more communication.” Along similar lines, a community leader said that, “That’s a challenge for Fuquay, I think it’s getting better, but that is a challenge...”

Population growth in the community has been accompanied by a greater diversity of ethnic groups in the area, and overall, the comments on these ethnic changes were favorable. An African American community leader seemed to indicate a lessening of racial problems in this context:

...race was a big problem. That is not the problem now. To a certain extent I think we have more of a variety of people in the community now from all different ethnic groups and it has enriched the community...

Furthermore, a white community leader noted that Fuquay-Varina is becoming multi-cultural and it is a positive thing. “It’s a strength, not a weakness,” he said. Similarly, one of the

community members interviewed said, “Fuquay is getting a lot of different cultures now....diversity of people is improving the community.”

6.2.1 Latino population

During the course of interviews, respondents acknowledged the large influx of Latinos into the Fuquay-Varina area. A community leader verified this with statistics demonstrating the doubling of the Latino population since 1990. The secondary data in Part I show that between 1990 and 1997/1998, the Latino population increased from 1.6% to 3.3% of the total population (Wake County Planning Department, 1998-99). Another service provider mentioned the need for planning in the community for the Latino population with respect to expansion and home buying.

According to a Latino service provider in the community, most of the local Latino population is from Mexico, with fewer people from Guatemala, El Salvador, Ecuador, Puerto Rico. He said that the cultural and language differences between nationalities vary considerably and went on to discuss how some groups tend to have broken family relations. Especially with illegal immigration, men often come alone, leaving wives and children behind. They feel isolated and rejected by Americans and will have extramarital relations with women here. When the families finally come from Mexico, the family relationship is broken, not only because of the extramarital relations, but also because of the time and distance apart as well. If the parents have no bonds, the children consequently have no bonds with the parents. In addition to emphasizing the loneliness of immigration, this service provider emphasized problems with the use of alcohol and drugs as well.

In two separate interviews with people outside the Latino community, one Latino and one white service provider, respondents related that the Latino community tends to congregate with themselves. The white service provider added that he does not blame them for this and said that

it is probably because of the language barrier. However, the Latino service provider felt that there's no sense of community among the Mexican immigrants; but perhaps there may be a sense of community among some other nationalities.

Several respondents viewed the language barrier as a problem, and some went further to say that they and others would have to learn Spanish. Interviews revealed that provisions are in place for an interpreter in at least two places of public service, and the Chamber of Commerce offers Spanish for interested businesses and employees. Furthermore, English as a second language (ESL) is offered at the elementary school, middle school, and high school levels for Spanish speaking residents, according to secondary data gathered.

A variety of responses from the interviews dealt with the town's acceptance of the Latino community. One service provider who has extensive contact with the Latino community said that the town has really accepted the Latino community more than the other towns and has made them feel welcome. One community leader related that he had not heard any volatile sentiment against Latinos. A Latino service provider said that some townspeople are willing to help this group of people, but that others reject Latinos, leading to problems with distribution of resources and economics. An African American service provider felt that the Latino population is not accepted in the same way that African Americans were not accepted, so they stay amongst themselves.

A number of townspeople expressed a need for the town to do more to reach out to the Latino population. At least three community members thought the town has not done enough to increase cultural awareness and understanding and should reach out more. One reason for the lack of communication, according to an African American community member, was that the Latino population tends to be Catholic, while the African American population tends to be

Baptist or Methodist. However, this same community member noted that the African American community would welcome the Latino community “with open arms,” if there were an opportunity to do so.

The Latino community has some migrant workers but others live here year round, according to a service provider. At least two other community members echoed this idea that the Latino population has moved beyond migrant worker status to being in business for themselves. Other types of work done by Latinos include construction, carpentry, masonry, carpet laying, and landscape maintenance, according to a Latino service provider. He added that the Latino women tend to work in restaurants.

A number of community members expressed that the Latino people work very hard or at least do not seem to be “freeloading.” However, two service providers (one white, one Latino) related that illegal resident problems emerge with hiring these individuals. One went on to say this creates resentment from other groups, while the other noted that it is unfortunate that the illegal Latinos cannot contribute, given the labor shortage in Wake County.

In the course of interviews, little was said about the Latino population in schools. A service provider did note that Latinos in elementary schools are “doing well,” and that “Parentscope,” which aims to get parents involved in prevention of school failure, primarily works with the Latino population. A Latino service provider expressed a desire for schools to have a translator.

According to a white service provider, Latinos are very vulnerable to crime; they do not put their money in banks and do not have phones to call anybody for help. Furthermore, a Latino community member said that teens just hang around which could be a big problem, especially among the young (Latino) men who live in the trailer park. He said the trailer park is a dangerous place and would not go there.

Several of those interviewed wanted changes in the future for relations with the Latino population. For example, an African American pastor wanted a joining of fellowships with the Latino population and a specific outreach to this population. Another African American community member wanted more Latino involvement in city government, while a Latino community member was interested in integration among children, even though he did not think there would be much integration among adults. He added that integrated participation in sports among children of all races is a good place to start sharing and for others to learn the Latino customs.

6.2.2 African American and White Relations

A number of people who discussed relations between African Americans and whites had lived in Fuquay-Varina all or most of their lives. Two such African Americans noted a problem with segregation. One saw it as a lessening problem with the greater ethnic diversity in the area. The other, while acknowledging the changes, still saw Fuquay-Varina as a segregated community and thought this is disturbing more people. He later added that nothing has changed in the African American community area, except one sidewalk, when talking about the supposed equal distribution of federal funds. He asked, “Where is the money is going? Are there two separate Fuquays?” The problem is “taxation without representation,” he said. A white service provider reinforced this concern, stating that in the past there were street improvements or other improvements, which were culturally or racially-based. He gave the same example of sidewalks not being extended.

A white community leader affirmed the concern about segregation in the community: “...the town is definitely divided...the white side of town, the black side of town, the railroad tracks in between...it’s classic.” However, he added that, “I think there are lots of good efforts underway.

There are a lot of people in leadership positions really concerned...about bridging that...making that connection.” In fact, another white community service provider noted that the Rotary Club tried inviting more African Americans into the organization but was “unsuccessful” and added that there is “not a great deal of cooperation between groups themselves.”

The secondary data in Part I supports that the disparity accompanying segregation in Fuquay-Varina by noting that in 1990, 21.8% of the total white population lived in poverty. At the same time, 73.5% of the total African American population was living in poverty (1990 U.S. Census).

Respondents also raised a concern about the separation between African American and white churches. An African American pastor said:

There are still barriers but we’re trying to work together....The older churches are 98% white,...so if we went there you could feel the tension; but overall, when there is a need in the community, the churches come together.

A community leader added that, “There’s a large faith community here...both sides of the tracks.” Despite the separation, the African American pastor expressed a desire to merge and create fellowship among African Americans, whites, and Latinos. Furthermore, he did not express resentment against whites:

I learned not to blame my white sisters and brothers for my troubles. It’s not their fault.... I needed to understand that my life/destiny didn’t depend on somebody else’s actions. It depended on me. That’s what changed me/turned me around.

Another African American community member expressed a similar sentiment in saying, “We are all put here to help one another. If we’re held back it’s on our own. If we work our cans off, we can be anything we want.”

A number of interviewees expressed a favorable attitude toward African American involvement in community leadership and/or a desire for integration. The previously quoted African American community member wanted to see African Americans open up businesses, provide jobs and have a sense of ownership in the community, and gain a voice and presence in all aspects of the community, including the economy. Furthermore, he wanted more African Americans in city government and teaching positions. A number of white community members mentioned that having two African American town board members was a positive thing by demonstrating concern for the whole community, regardless of race.

An African American community leader addressed a concern about attempts to integrate schools by busing African American children. She said, “The best way to integrate the schools is to have integrated neighborhoods.” However, she commented that every time efforts begin to integrate neighborhoods, there is a flight. Still, she said, “We can’t legislate the heart.”

A number of respondents said that they would like to see Fuquay-Varina integrated as a whole. One African American community member said that he would like Fuquay-Varina to become such a place that, “when you come into the community, not to be able to tell one side from the other.”

One example of such a change took place as a result of the efforts to eliminate illicit drug activity in Fuquay-Varina. A community leader explained:

This side of town has an issue with changing in the last ten years... landlords have come in...kind of really let this side of town go downhill...to the dismay of the long time people...who really have that sense of pride...that’s a big issue.

However, a number of respondents additionally noted that the problem does not affect only one particular area. A white community leader said that the “problem is everywhere...not particular

to a certain neighborhood, group of people, (or) income bracket.” A drug task force was established which “brought races together,” noted a community leader. Another noted, “I think in the past six months to a year there has been a large effect in the drug situation to bring people together.” He said, “the drug situation could be a blessing in disguise.”

6.2.3 Youth Voice

Middle school and high school students freely offered their opinions and insight of race relations in Fuquay-Varina. Overall, racial segregation between whites, blacks, and Latinos was not a problem with which the youth of Fuquay-Varina identified. When asked about race issues, one middle school student responded, “Most people I see get along. Some are racists - whites not liking blacks, blacks not liking whites. But this doesn’t happen a lot.” Another student agreed and further stated race is only an issue with adults, and she “only sees adults that don’t like each other.” In the middle school it was noted that students are integrated, and every one sits together in the lunch room.

A high school student agreed that race was not an issue for her and her peers. She thought it was because of Fuquay-Varina’s size and the fact that everyone knows one another. A white high school student stated:

...Older people don’t speak when I am with my black friends. [Older people] can’t get it out of their heads that there is no more White-White or Black-Black; that everybody is just trying to get along.

There was no mention of racial problems with the Latino population, but students noticed a barrier to interacting due to language and that Latinos “keep to themselves because they don’t speak English.”

6.3 Schools

In the course of the interview process, respondents were asked about their perceptions of the educational system in Fuquay-Varina. Education and schools were mentioned frequently in response to questions about the strengths and weaknesses of Fuquay-Varina. Many of the general statements about schools, especially elementary schools, were positive from both community members and service providers. For example, “Schools are really good here” and “...we’ve got a fantastic school system.” The schools in Fuquay-Varina were also commended as part of Wake County Public Schools, with one respondent stating, “I feel it [Wake County] has about the best school district in the State of North Carolina...” Another community member echoed this sentiment: “Wake County is a good system, we have everything every other Wake County school has.” Praise was most consistent with respect to elementary schools.

In contrast, there were also concerns raised about the quality of the schools, such as “I hate to say this, but I feel we have not kept up with the rest of the County.” Concerns were most often stated with regard to the middle and high school levels, where several community members mentioned discipline problems with the schoolchildren. One community member expressed this concern by stating, “Fuquay Middle seems to have more problems than any other schools around in this area.” Several other interviewees acknowledged this perspective, but felt that it was not deserved:

...I think there’s a perception that it’s not good in the middle and high school...I think the middle school is good, I think it gets a bad rap, it could be better but it’s good. Same with the high school...

We have some of the finest school systems that really don’t get a fair shake as far as the community reactions.

1998 and 1999 end of grade test scores at the elementary, middle, and high school levels demonstrate that overall, Fuquay-Varina's students performed at about the same level or slightly below Wake County as a whole. However, students are achieving at least the expected growth standard as set by the State Board of Education (WCPSS, 1998).

As with the schools, respondents expressed satisfaction with the teachers and staff, describing them as motivated and caring. As one community member stated, "They've got teachers that want to be there." Another respondent echoed this sentiment by saying, "I think the staffs at all the schools—they really care about the kids." Another community member, however, felt that the schools need "fresh blood," that communication between teachers, parents and children was inadequate, and disciplinary actions were meted out inequitably between the different races/ethnicities.

6.3.1 Needs/Improvements

Interview respondents also identified a number of needs for Fuquay-Varina schools. Regarding infrastructure, they consistently noted efforts underway to reduce class size, with a new elementary school in Holly Springs and the renovation of Lincoln Heights and Willow Springs Elementary Schools. However they feared that rapid growth in the area will soon offset these efforts. A community member stated:

I do worry about keeping up with the growth, especially the school systems. We always have schools that are way overcrowded before they're built, we can never get ahead of the curve on that...we're just not able to support the growth the way we should.

Regarding growth and infrastructure, another community member said, "The school system badly needs to be expanded with additional resources and hiring talented teachers." A final

infrastructure need identified by two community members was more computers and Internet access, especially in the High School, which reportedly had only six computers in the lab. No mention was made as to whether this need is being addressed.

As stated previously, discipline was identified as a problem in the middle and high schools. Several respondents attributed this to the lack of parental involvement, especially at the middle and high school levels. Another respondent highlighted the dropout rate in Fuquay-Varina, which is higher than other areas of the county and comprised mostly of white, middle class males. The reason why there are more dropouts in Fuquay-Varina is not known.

Regarding the younger children, a number of respondents mentioned that there was a Headstart program in the area, and that children from lower economic levels could be provided breakfast and free health screenings. However, the lack of access to adequate and affordable preschool was mentioned as a problem: "...I hear a lot of people complaining that some kids are not getting prepared to go to school...if they can get the basic training before they get there, it makes it a little bit easier." Another community member expressed similar concerns in relation to Fuquay-Varina's test scores, which are lower than the County: "we don't have top test scores, but that to me is not an indicator totally because you have to look at what they start with."

6.3.2 Schools and the Community

Respondents consistently felt that one of the strengths of Fuquay-Varina and its schools was the overall community support for schools, evidenced in the following statements: "we've been able to keep the character of a small school," and "it's [school is] still community oriented." Several organizations in the community give active support to the schools such as the Education Foundation, the Rotary Club, the Woman's and Jr. Woman's Club, the Chamber of Commerce

and area businesses. Pine Acres Community Center was also commended for its work to support students.

Children's sports activities in schools were also mentioned positively. One community member whose child plays a school sport mentioned, "...basketball ..has caused the families to come together and do things together such as volunteer to support the team and the school. Schools are a focal point for that." This was echoed by another respondent: "sports have been a salvation for many kids which encourages education." The sentiment, however, was not unanimous, as voiced by another interviewee: "there is so much emphasis put on sports, just think about what we could do if we put that emphasis on academics."

6.3.3 Youth Voice

The youth of Fuquay-Varina expressed a range of opinions pertaining to the schools in Fuquay-Varina. Elementary school students in general liked school, felt safe, and were proud of their school: "People [teachers] help me if I need it." High school aged youth also reported feeling safe at school and having access to good teachers: "school is safe, good teachers... you can stay after school to get help from students or teachers," stated one student. Another commented, "I've never felt threatened [at school]."

A focus group conducted with middle school students revealed varying opinions on safety and school pride, depending on which school the youth attended:

I'm proud of my school. We have a lot of good kids and good teachers.

I am proud of my school. In elementary, I didn't like school. Now I like middle school. It's more interesting, and we have good teachers.

I'm not proud of my school. They found a dead body last week near the school. We had a fire and a pipe bomb at the beginning of the year.

I'm not proud of it [school] right now... we had three bomb threats last week..

Most students expressed a measure of school pride and social support, stating that they felt they could trust teachers and guidance counselors and turn to these individuals when in need. However, several of the youth interviewed were concerned about confidentiality in the schools. One high school student remarked, “Teachers gossip like students do.” When asked who she talks to about problems, one high school student replied, “a counselor, but you have to schedule and appointment... it’s not confidential- won’t keep a secret. They should keep a secret.” A middle school student added, “some students can trust teachers, other students cannot.”

In general, youth felt as though students got along at school: “gangs are not real gangs, they don’t kill anyone,” and “[people] don’t pick on people because everyone knows each other.” In contrast, one middle school student reported on average seeing three fights a day at school, “mainly over stupid stuff” (which later was defined as girls and boys fighting over each other, or someone accidentally stepping on someone’s foot). In general, the atmosphere across school settings remains satisfactory, yet necessary improvements are recognized by staff, parents, and students alike.

6.4 Recreation and Entertainment

In responding to questions about the future, many of those interviewed expressed a need for more entertainment and recreation activities for people of all ages. Many community members and service providers expressed frustration at having to go to Cary or Raleigh for entertainment activities. They thought that Fuquay-Varina should attract more business from not only its own community members, but also those from outside the town. The community's views were consistent with the Chamber of Commerce's "Pulse," which keeps track of business opportunities in Fuquay-Varina as determined by residents and developers (Fuquay-Varina Area chamber of Commerce, 1999a). Some of the items listed that were mentioned include restaurants, a movie theater, a YMCA and children's recreation. Also mentioned in the interviews were a bowling alley, a bookstore, parks and cultural arts facilities. As one community member stated, "[Fuquay-Varina] needs to be a place people come to shop, eat, [and be] entertained."

A number of respondents also expressed a need for activities specifically for the elderly. A community member expressed, "Fuquay's got a lot of old people and they don't have anything to do." Another suggested a facility for seniors "to learn crafts, work with daycare centers so they can read to kids, etc." A further suggestion was made for classes or seminars available for the elderly.

Regarding recreation and athletics, many community members expressed satisfaction with the town's recreation system. The recreation department offers courses geared for adults and sports activities for children. However, community members identified a need for additional facilities, for example, "they [the town parks and recreation department] have a fantastic program....they are on overload—more kids than they can serve, less facilities."

Community members also mentioned the lack of a swimming pool that is accessible to all, a YMCA, and sports fields available for adult leagues, such as soccer. They also mentioned that while there are many activities for young children, there is very little available for adolescents. Several community members felt that the lack of activities available for this age group may lead to undesirable behavior:

There are activities for young kids—soccer, football. There is a regular soccer league for kids, but not for teens. Teens just hang around and this can be a big problem...

For the youth, there are a lot of community activities, community track, soccer, basketball, football. Some fall through the cracks, so you see drugs.

Youth recreation activities, such as soccer, basketball and football were seen by many as a good opportunity for parental involvement and an opportunity for children and parents from diverse races and ethnicities to interact. As mentioned by a community member “Little league [is] one of the very best projects that goes on in the town. They provide baseball, soccer, basketball. It brings all of the kids together.” Another respondent echoed this by saying sports activities were a good place to improve integration and acceptance among children of all races and ethnicities.

6.4.1 Youth Voice

When asked to express one of the greatest needs of Fuquay-Varina, an adult community member responded, “Middle schoolers need something to do.” Another community member cited the lack of activity for youths as a major social problem of Fuquay-Varina. Others held the opinion that juvenile crime was on the rise due to a lack of structured activities for youth. When

asked about recreation opportunities available to them, Fuquay-Varina youth gave similar responses: “There’s not much to do,” exclaimed a female middle school student.

Primary data revealed a racial gap in the number of activities in which adolescents were involved. Many African American youth responded that there was nothing to do in Fuquay-Varina, saying that after school, they go home to do homework and then watch television. These same individuals described weekend activity as going to a friend's house or to the movies in Raleigh. When asked what she prefers to do on the weekend, an African American high school student responded, “get out of Fuquay!”

In contrast, white youth of middle school age were asked about after school activities and described various recreation opportunities such as horseback riding, tutoring, church activities, motor cross, piano and dance classes. Extensive participation in both local and regional sports was reported: swim team, softball, tennis, gymnastics, and soccer. Their weekends comprised many of the same activities.

The focus group data suggests that a significant difference in the number of activities in which adolescents are involved depends upon their racial background. Data to support or refute these claims was unavailable.

6.5 Religion and Community Partnerships

Churches and community partnerships are two strong forces in Fuquay-Varina, helping mobilize citizens and encouraging interaction socially, spiritually, and actively. On just about every street sits a church, appealing to people of every age, ethnicity, income level, and social status. The growing number of community partnerships, whose names have been seemingly embedded in citizens' minds, address issues from drugs and crime to schools to sports.

Several community members noted how churches in Fuquay-Varina seem to attract almost every citizen in town. One man stated, "I don't know many people that don't go to church" while another community member claimed half-jokingly that, "There are more churches than anything else." The Fuquay-Varina Area Chamber of Commerce lists 33 churches in its 1999-2000 Membership Directory (p. 13). One pastor believed that churches offer a sanctuary from citizens' "personal problems," causing the overwhelming membership numbers, continued growth, and building expansion: "People in general are looking somewhere they can grab hold on hope because everything is failing." Churches in Fuquay-Varina, then, offer more than just places for social gathering.

The influence of churches, though, extends beyond just numbers, with many citizens describing churches as close knit. The following set of comments from various community members attests to this close association, each interviewee describing in their own words how churches have had an impact on the town:

There is a connection between the faith community and the rest of the community.

Fuquay has a strong sense of church community.

I think the whole town is...a very religious place to be.

There is an ecumenical process here that I am really, really proud of.

This sampling of comments from both community members and service providers places churches' influence in a very strong and positive light.

In spite of recognizing the large numbers of citizens who attend church, there are those who felt to a much lesser extent that churches have room for improvement in their capacity for serving the community. Some town members and service providers even listed "faith" or "spirituality" when asked about Fuquay-Varina's biggest issues, much like education or traffic. In terms of the larger multi-church community, one church worker commented that, "there's a ministerial association ... It's not as active as I would like to see it," which may point to a lack of interaction/ communication among churches. Another community member echoed this sentiment: "A lot of the churches don't necessarily interact with one another." One service provider in particular saw this same lack of interaction but remained hopeful that it would be addressed in the near future as growth necessitates cooperation: "We just know we want to work together, but don't know what it will look like."

The barrier to such church interaction that was mentioned most often was actually a physical barrier (posing a mental barrier as well), expressed as "the tracks." A couple of community members specifically described that "the tracks" seem to divide churches into these two sides, which may now be part of the town's psyche: "there's a large faith community here...both sides of the tracks..." and, "Churches 'on both sides' need to do more in the community." One pastor mentioned feeling "tension" in his personal experience visiting churches: "The older churches are 98% white, not used to the 'new wine' concept, so if we went there, you could feel the tension, but overall, when there is a need in the community, the churches come together." It seems the churches will cooperate when necessary, but the norm still appears to be two church communities separated by "tracks."

At first glance, Fuquay-Varina does not seem to lack its share of strong community partnerships, which draw specific groups from the community to work towards a common goal. One service provider who works closely with several community partnerships stated that, “We’ve just been blessed with support...without these partnerships, we would not be able to fly.” Some partnerships were recognized as more successful than others, although interviewees acknowledged that those deemed less successful might not have been in place long enough to justify a thorough evaluation.

Certain partnerships and organizations were frequently mentioned as the most successful, including: the Education Foundation, which one community member praised thusly: “...they really do support the schools and do things for the schools, so I think there is good support here”; the Rotary Club, which another community member described as, “very involved,” especially through their annual golf tournament that raises considerable funds for education; the Pine Acres Community Center, whose education program, among several other programs, is itself a result of partnerships with the schools, Rotary Club, Civitan Club, Education Foundation, and several churches; and sports/recreational leagues for children, positively assessed by two community members: “Little league – one of the very best projects that goes on in the town” and, “They have a fantastic program...more kids than they can serve.” One important attribute of all these partnerships is how they have targeted different areas such as education, recreation, crime and safety, and elderly/youth services.

The one partnership most universally praised by the interviewees was the Citizens Against Drugs task force, begun in the fall of 1999 when town citizens acknowledged the severity of the drug problem in Fuquay-Varina during a Town Board meeting. Through subsequent funding by the town government, the task force was formed. Both community members and service

providers were well aware of its existence and effectiveness in chipping away at the drug presence. Perhaps most noteworthy about the task force was that people lauded its ability to bring the different parts of the community together, unmistakably showing Fuquay-Varina's competency for community-based and community-directed problem solving. Through activities such as awareness workshops and neighborhood marches, the various segments of town – businesses, citizens, service providers, and youth – came together to show their strength and unity towards eliminating drugs. The following is a sampling of comments from community members and service providers who spoke highly of the task force:

The new Citizens Against Drugs – it's really a community wide effort and very inclusive.

It's already been successful in that a lot of drug traffic has moved...that's an example of community really working together.

I think in the past 6 months there has been a large effect in the drug situation to bring people together.

The town has wrapped its arms around the drug issue.

One community member even went so far as to say the “drug situation could be a blessing in disguise” in bringing the community together. Another community member believed that the seriousness and urgency of the drug issue contributed to the task force's effectiveness: “People had to wait until it got really bad, then they wanted to come out and have a say.” More than any of the other partnerships, the Citizens Against Drugs task force seems suitable as a model for future community endeavors.

Interviewees recognized several other partnerships, although to a lesser degree. The Growth Management Plan resulted from a town-sponsored focus group of 25 citizens who formed

“vision statements” addressing traffic, housing, “greenways,” etc. and which one service provider claimed, “though it hasn’t yet been acted upon ...people can refer to it and say, ‘we did this,’” as one example of community organizing. For the Latino population, St. Bernadette’s Catholic Church’s conducts Spanish language services and provides food and clothing ministries. The recently formed Community Development Corporation (CDC) project to unite citizens, landowners, and county officials in renovating a former all-African-American school into a neighborhood center also garnered positive mention. Two community members stated about the CDC that: “they’re real active over there” and “it’s going to be an outstanding project.” Citizens also showed awareness of Family Aid, which one service provider knew was, “supported by local churches, private donations,” as a partnership but based at the SRC to aid low or no income families. Other groups mentioned more in passing but visible to community members are the Lion’s Club, Jaycees, Woman’s Club, and Jr. Woman’s Club.

One community member sent a word of caution for the town by stating that “If nobody ever says anything...then there’s no reason to fix something,” showing the importance for Fuquay-Varina citizens to voice their concerns and needs when the situation arises or risks stagnation. There is little reason to doubt that type of outcome, though, when so many interviewees expressed a hopeful attitude similar to this community member: “If we work our cans off, we can be anything we want.” The number of churches and community partnerships around Fuquay-Varina and their involvement in proactive endeavors proves that Fuquay-Varina is well on its way to success. As Fuquay-Varina works towards community competence in addressing all of its major issues, the past and present examples serve as reference points for future progress.

6.6 Safety: Drugs

One of the major issues we heard about during our work in Fuquay-Varina was the drug problem. While we have found little data to substantiate the severity and prevalence of the problem, it has clearly been a major issue in the town, and it is one which has sparked major interest and effort on the part of community members. Based on input from several community members about the specific details of the drug problem and action which has surrounded it, we believe that the following is an accurate summary of what has transpired.

- Since at least 1994, a store across from the Consolidated School, which sells beer, has been a hangout for people who have nothing to do. This may have been where the drug trade started.
- Two or three years ago, community members who lived around the Consolidated School started to feel vulnerable and organized a community watch. They gathered support within the neighborhood first, and then they invited the town police to come to their meetings at Pine Acres Community Center.
- The community watch group petitioned for a police substation to be located in the neighborhood. They got the substation, but for a long time it went unstaffed, so it virtually served no purpose.
- Eventually, the area around N. West Street, Jones Street, and Lawrence Street became a drug selling area, and it began to draw attention because of the openness surrounding what was going on. The News and Observer began referring to the area as an "open air market." An extensive article in the News and Observer this fall exposed the fear and anxiety people in the neighborhood were feeling.

- Within the past year, community members decided to take even more aggressive action, and they formed a Citizens Against Drugs Task Force. The group organized and went to a town board meeting to inform the town of the problem and to ask for the town's support.
- Finally, people decided to join forces. The police, town board, and Wake County Human Services joined the effort, as did many neighborhood and civic groups. Also, local churches joined the effort by participating in an interfaith prayer week.
- The town board also allocated \$15,000 to the Citizens Against Drugs (CAD) Task Force, which they could use for activities related to addressing the problem.
- In December of 1999, the CAD Task Force contracted with Bill Riddick of Student Health Services at the University of North Carolina to come in and conduct a workshop for townspeople. Under Mr. Riddick's leadership and through the efforts of the task force members, a solidarity march and day-long workshop were held. Participants included people from all over town, black and white, town commissioners, and the mayor.
- According to many people, including youth from the neighborhood, the drug trade has all but ceased at this point.

As we have talked with the people of Fuquay-Varina over the past 6 months, we have learned that the effort to combat neighborhood drug trade is a major source of community pride. It has brought in cooperation and interaction across groups. It has brought in faith and the strength of religious institutions in the community. It has brought in a concern for the health and safety of people in the community, and a special concern for the children who are not only threatened by unsafe neighborhoods, but who are also influenced by the things they see around them. Also, the effort seems to have brought in a sense of interest in using the local political system to achieve things the community really wants.

Dialogue about the drug problem, which had infected a particular neighborhood, did not emerge in response to a single question in our interview guides; rather it came out within the context of many different questions. For example, people spoke of the drug problem in Fuquay-Varina when we asked about interaction among racial and ethnic groups. One man commented, "I think the past six months to a year, there has been a large effect in the drug situation to bring people together...(the) drug situation could be a blessing in disguise" in terms of community involvement. Another community member explained that the task force had brought the races together and that he saw that as a good thing. He said, "It's a problem all over town; it's a problem in any town," speaking of the drug problem, and he went on to say that maybe in this case the drug issue could be a catalyst for more work together across racial lines.

Other community members spoke of the drug problem in response to questions about social problems or issues in Fuquay-Varina. One man said that selling marijuana was a major social problem among young men in Fuquay-Varina. Another man said that drugs had been the primary social problem, but that he thought drugs had "been cut drastically," and that he thought the problem could be removed completely. He also believed the community thought it wasn't their problem until citizens came to the town meeting and told the board about it. Finally, another community member cited "breaking and entering related to the drug problem," as the main social problem, but he continued by saying that he is not afraid to let his children go wherever they want to go.

Many community members brought up the drug problem in response to questions about the types of projects Fuquay-Varina residents have worked on together. One community member said,

The new Citizens Against Drugs- it's really a community wide effort and very inclusive. It's already been successful in that a lot of drug traffic has moved, there's an officer assigned there now, a hotline. That's an example of a community really working together.

Another community member described the drug problem by saying that it is "not particular to a certain neighborhood, group of people, or income bracket." He talked about all of the different organizations coming together, including churches, civic groups, neighborhoods, and schools, and he stated that this was "an example of good coming from bad." One community member recalled the projects Fuquay-Varina residents had worked on as drug awareness, walks against drugs, education and community awareness from the standpoint of unity of faith, and the crime rate. One man from the community said, "The town has wrapped it's arms around the drug issue...I see good things happening, but not overnight."

Finally, one resident framed the drug problem from the perspective of drug usage. He talked about the loneliness of immigration and the prevalence of alcohol and drug usage among immigrants who are trying to live in a new place.

Data we do have on arrests for drug possession with intent to distribute are juvenile data for Wake County. In the years 1997 and 1998, drug possession with intent to distribute was the second leading cause of arrests in Wake County for juveniles (Crime in North Carolina- 1998, NC State Government). In 1997, there were 430 juvenile arrests on this charge, and in 1998, there were 398. These constituted 12.5 % and 12.2% of juvenile arrests in Wake County respectively by years. As of October 1999, Fuquay-Varina had not had any juvenile arrests for the year (Fuquay-Varina Police Department, 1999). Drug possession with intent to distribute is not one of the major causes of adult arrest in Fuquay-Varina. In 1999 the top two causes of arrest

were criminal damage (n=166, 13.9%), and larceny (n=395, 33.1%) (Fuquay-Varina Police Department, 1999).

With regard to the safety of the community, people overwhelmingly expressed enthusiasm for the way community members have addressed the open selling of drugs, which quickly became a major threat to some residents. The efforts made by people already, and the steps which the Task Force is still working on are prime examples of how communities can pool their resources to improve the quality of life for all.

6.7 Safety: Crime

Overall, crime was not perceived as a major issue among residents of Fuquay-Varina. In fact, many people pointed to the low crime rates as a positive aspect of living in Fuquay-Varina. Some people related crime to the drug trade, commenting that there was some crime as a result of or in relation to it. Statistics we gathered from the Fuquay-Varina Police Department support the belief that crime is relatively low.

According to the Fuquay-Varina Police Department, total criminal offenses for the year 1999, as of October 1999 numbered 1,194. Common offenses or reasons for calls to police included calls for service (n= 192; 16% of calls), criminal damage (n= 166; 13.9% of calls), and larceny (n= 395; 33.1% of calls). There have been two shootings in Fuquay-Varina in the past year (Fuquay-Varina Police Department, 1999).

In speaking about crime, one community member said, "Crime is not very high in Fuquay. You hear of some break-ins, but crime is not very high." Another community member said, "Fuquay-Varina is tranquil, a small town with no assault." One service provider stated, "I think overall Fuquay is very safe...just kids being unsupervised, riding through the streets at night on their bikes. I don't think there's an issue of somebody getting them...it's them getting hurt."

One woman in the community described violence as the number one health problem in society today. However, she spoke broadly about this, saying, "I don't think Fuquay itself has a big violence problem, but don't we all. That has got to be resolved."

Among service providers in Fuquay-Varina, perspectives were similar to those of community members with regard to crime. One service provider talked about the speed of traffic through downtown as a major safety issue, especially for pedestrians, but he did not mention crime as a

problem in relation to safety. Another service provider said that she feels safe where she lives now, but that she had previously lived in an apartment where she did not feel safe.

One service provider talked extensively about services provided by and through the police department. He described some of the auxiliary services of the police department as giving talks in the school system, providing a school resource officer for the high school, providing a juvenile prevention officer in the middle school, appointing an officer to serve as a business liaison officer for downtown businesses, and working with the Citizens Against Drugs Task Force, as well as the Community Watch and Safe Watch programs. The Community Watch program provides a forum for neighbors to keep informal watch on each other's houses and report any suspicious activity they see. The Safe Watch program is a county-wide program which involves all city and town workers in keeping watch on the neighborhoods and parts of town they serve each day. If they see suspicious activity, they have a number to call and report it to the Fuquay-Varina Police immediately. According to the service provider, the Wake County Sheriff's Department also provides services in Fuquay-Varina, such as traffic patrol. In terms of needs the police department is working to meet, the service provider we spoke with said that there are efforts underway to learn more about school violence. They are learning about bombs, as well as other topics.

The two shootings which have occurred in Fuquay-Varina in the past year are troubling, because this kind of crime is not common in the community. However, none of the community members we interviewed brought up the shootings. Furthermore, it is believed that both of the shootings were personal in nature, and not random acts of violence.

There was no mention of abuse and neglect, which are common threats to safety in a community. Perhaps this was because there was not a question which directly asked about it in

the interview guide. Since abuse and neglect are often not talked about openly in society, it is not surprising that none of the interviewees spoke about them. We know according to Child Protective Services of Wake County that most cases of abuse or neglect are reported by school staff, mental health providers and County case-workers (J. Ray, personal communication, November 18, 1999). There were 3,491 reported cases of child abuse or neglect involving 7,588 children in Wake County during the 1998-99 school year. Of these, 469 cases were substantiated by investigators. However, we do not have a sense of what percentage or number of cases represented Fuquay-Varina.

Though residents did not identify crime as one of their major concerns at present, they appeared to value safety highly, and were interested in community crime and safety issues. Again, people seemed pleased to note the efforts toward eliminating drugs in order to illustrate how community members themselves came together and rallied support for safe and crime-free neighborhoods.

6.8 Health

We asked Fuquay-Varina residents and service providers to describe the main health problems of people in their community. The most common response was that there was a shortage of health care services, specifically, primary care physicians. Overwhelmingly, people identified this as a major problem in the community, as opposed to any specific cause of morbidity or mortality. The data bear this out, as they demonstrate that Fuquay-Varina compares fairly consistently with Wake County, whose rates are lower than the state as a whole on most morbidity and mortality indicators. Furthermore, the data show that Wake County may be considerably less endowed with health care providers than the state as a whole.

According to the North Carolina Center for Health Statistics, Wake County had the following allocations of health care providers in 1997: one primary care physician for every 1,101 residents; one primary care physician plus extender (nurse practitioner or physician assistant) for every 1,989 residents, one registered nurse for every 99 residents; and one dentist for every 1,746 residents (1997). There was a ratio of 419 people for every hospital bed, and the hospital use rate was 87% of capacity (North Carolina Center for Health Statistics, 1997). In comparison, the most recent data for North Carolina (1995) showed there was a primary care physician for every 467 people and a nurse for every 122 people in the state (North Carolina Center for Health Statistics, 1997). Thus, the shortage of doctors alluded to by Fuquay-Varina residents appears to be plausible.

There are two Emergency Medical Service (EMS) providers which serve Fuquay-Varina—Wake County EMS and a local volunteer service. There are four acute care hospitals in Wake County, but there are none in Fuquay-Varina. The hospitals include Western Wake Medical Center in Cary and Wake Medical Center, Raleigh Community Hospital, and Rex Hospital, all in

Raleigh. Community members frequently spoke of the fact that Fuquay-Varina used to have its own hospital, but that it had closed in recent years. They seemed satisfied with the quality of service available at the regional hospitals, but were disappointed not to have one in town. One community member said, "We lost our little hospital," and then he explained that Cary had a nice new hospital, but that it was a blow to the town of Fuquay-Varina to lose their local hospital. Another community member praised the pediatric emergency room at Western Wake Medical Center, describing the treatment his children received for viral meningitis. And yet another community member added, "It would be nice to have a hospital here," after which he explained that the one that had been there was now a service center for the elderly.

In speaking about the shortage of medical resources, one man said, "We need to get another doctor or two," while a woman from the community said, "We don't have enough doctors...we definitely are lacking when it comes to providers for Medicaid." Another community member expressed that he thought there was a shortage of doctors, saying, "Doctors aren't taking patients...they're booked." One person also framed the main health problem as "the distance to get health care," and noted a special need for transportation to health practitioners for the elderly.

A significant portion of people interviewed expressed frustration in regard to the shortage of physicians. Many made comments about the community's ability to support more physicians, saying that they didn't understand why physicians wouldn't want to come into the area. One community member thought that perhaps physicians do not come into Fuquay-Varina because they believe that many patients (community members) are accustomed to going to Raleigh or Cary for care. Another community member, however, pointed out that Fuquay-Varina is "getting more medical type people" already, mentioning the kidney dialysis center that will open and a physical therapy practice.

During primary data collection (December 1999 to March 2000), an office of two primary care physicians closed due to financial problems of the company which was managing the office, Cardinal Healthcare. Media coverage of the potential closing of the office, and in the end, the actual decision to close, sparked conversation in several interviews. One community member commented that he was a patient of one of the doctors, and that if it closed, he didn't know who he would see, especially since he was a member of an Health Maintenance Organization (HMO) which sometimes limits provider choices. Another community member said he was aware of the potential closing of an office, adding, "I hate to see that."

A member of the Chamber of Commerce also pointed to lack of medical care and lack of public health care resources as the primary health problem in the community. Like many other community members, he spoke of the closing of a doctor's office in the area and expressed frustration at the role of HMO's in making doctors' practices less profitable for them. On a positive note, he spoke of some recent developments, such as the opening of Rapid Response Urgent Care, an emergency care operation, which moved in from Garner last year. He described their reception as having been very positive and talked about how their services had been badly needed. He also cited increasing efforts to recruit more medical care into the community as a top goal of the Chamber of Commerce.

The most positive sentiment reflected in residents' comments about health care and availability of services was the outpouring of support for the Southern Regional Center (SRC), a satellite service center run by Wake County Human Services. The SRC serves Southern Wake County and provides an array of services, including mental health and substance abuse treatment, provision of school health personnel, clinics for women's and children's health, HIV/STD testing, maternity care, environmental health, crisis intervention, and economic

assistance through Medicaid insurance (Southern Regional Center, 1999). Other services available include job search and work permits, food stamp case management, revenue collections, and registration of deeds for marriage licenses and title searches. Bilingual (Spanish/English) staff members are available to serve the needs of those who do not speak English as their first language. Most services are provided on a sliding scale fee schedule, such that clients pay for services on the basis of income. Medicare and Medicaid are also accepted there (Southern Regional Center, 1999).

About the SRC, one community member said, "The SRC is one of the real positive things here, " while another said, "Now that we have the Southern Regional (Center), it's a little better...people used to have to go to Raleigh for everything." A service provider also spoke of the regional focus of the SRC, and how important it is that services are coming to the people, especially since public transportation is not widely available or accessible.

One service provider talked about the SRC and its significance as a service-providing agency for Latino community members, many of whom are recent immigrants. She said that many Latinos go to the SRC on Thursday nights for the Open Door clinic. While the wait can be long (it is first come, first serve), doctors provide services on a sliding scale at a time which is convenient for those who work during the day. She also spoke of a dentist who used to provide dental services on Friday nights during the summer at the Catholic Church. However, she said that the dentist now works through the SRC because there is more room for people to wait comfortably. According to this service provider, there is high demand for the dentist's services.

A Latino community member described the SRC as an asset to the community, but said that more services were needed. He suggested that the majority of the medical care available at the SRC is for pregnant women, and that you have to go to Raleigh to the main human services

center for walk-in services. He pointed out that transportation and language are a problem for many people, and he said that he takes a day off from work when his family needs to go to the clinic so that he can take them. Others mentioned transportation as a barrier as well. While some offered the TRACS (Transit for Rural Access to Community Services) system as a source of transportation, it has recently discontinued service due to costs (D. Williams, personal communication, April 2000). The TRACS system was previously supported by the towns it served, Fuquay-Varina, Holly Springs, Apex, and Cary; Wake County Human Services; and Laidlaw Transit Services (D. Williams, personal communication, April 2000)

In addition to the SRC, another major development in Fuquay-Varina is a new dialysis center, which will serve the regional area. According to both service providers and community members, this is a project which is viewed quite favorably, and for which the need is great. One community member also spoke enthusiastically about the prospects of a new pediatrician opening an office in Fuquay-Varina.

While the shortage of primary care physicians was the main health problem people discussed, some other issues did surface. If they didn't respond with "shortage of physicians," people mentioned a variety of things in response to the question, "What are the main health problems in your community?" One man said, "Your basic health problems I think, like myself, I'm diabetic." One woman simply said, "smoking," and then laughed. Several people talked about cancer and heart disease, while one woman said, "I just don't think we have any major health problems. I don't think we should now that we are in the next century." One man spoke of the flu as a health problem and also suggested that more information was needed on TB (tuberculosis). One service provider who works with children talked about health issues which affect "our kids who live in poverty." She described lack of dental care, lack of access and knowledge with

regard to nutrition, and low rates of immunizations. However, she did say that immunization rates had improved in recent years, as nurses have been able to administer them at school or at children's homes.

People mentioned two environmental health concerns: the nuclear power plant located in Holly Springs and contaminated wells. In terms of the nuclear power plant, the resident said that while it has been there for fifteen years, it is still a concern. He said that Fuquay-Varina is in the red zone, and that people need to have more knowledge about what that means. He indicated that more literature and education were needed. This same resident said that the city checks the water monthly and sends out a report to citizens, which he considered a positive. Another resident, though, said that there were, "a couple water issues in small areas...contaminated wells."

In terms of major health indicators, the people's sentiments and opinions were very consistent with available data. Fuquay-Varina has a smaller percentage of people who are between the ages of 20 and 64 (59.8%) than does Wake County (64.6%), which means that they have larger percentages of youth and elderly residents than some other parts of the county (Fuquay-Varina Area Chamber of Commerce, 1999a). This may substantiate the expressed concern of residents for services for the elderly, and it also may account for the fact that the SRC primarily provides services for mothers and children and the elderly. Since these groups make up a relatively large portion of the population, then more services for them may be warranted.

Fuquay-Varina had no new cases of AIDS in 1998, nor did it have any cases of childhood vaccine-preventable diseases (North Carolina Center for Health Statistics, 1998). The prevalence rates of communicable disease infection such as sexually transmitted diseases, vaccine-preventable diseases, and hepatitis A and B in Wake County were similar to rates throughout the state. One major concern, however, is the significantly higher prevalence of the majority of

communicable diseases among minorities compared to whites (North Carolina Center for Health Statistics, 1998). As the people's comments reflected, the major causes of death in Fuquay-Varina in 1998 were chronic diseases, including diseases of the heart, cancer (malignant neoplasms), and cerebrovascular disease (stroke). There were no deaths from AIDS or homicide in Fuquay-Varina in 1998 (North Carolina Center for Health Statistics, 1998).

The health condition of the people of Fuquay-Varina does not seem to be a major concern of town residents. However, the shortage of health care professionals, including general practitioners (primary care), as well as specialists, and the lack of a hospital seem to be significant concerns of people. Though the Chamber of Commerce is working to address the issue by recruiting physicians, no other efforts to address the problem have surfaced in the context of our interviews.

6.8.1 Youth Voice

Health concerns of youth in Fuquay-Varina varied considerably by age and grade level, with more concerns and more serious problems being reported as students got older. Elementary school students offered no concerns, though no direct questions concerning health were asked of them. Two middle school students reported seeing no drugs or cigarette smoking at school. However, both commented that they know some students do smoke, just not at school. These girls reported being aware of one teen pregnancy this school year.

High school students perceived that an astonishing fifty percent of students smoke cigarettes and/or marijuana. Prevalence of underage drinking, however, was perceived as low as was other drug use. Students were concerned with the incidence of teen pregnancy and abortions in Fuquay-Varina. Some high school students are rumored to have had as many as four abortions. One adult community member stated that teen pregnancy and abortion is a “hush hush” issue in

the community, later stating that abortion is “almost like an epidemic... abortion as a means of birth control.” There is no data to support or refute the abortion rate in Fuquay-Varina, however in 1998, sixteen births were reported in Fuquay-Varina by women aged nineteen and younger. This accounted for 9.4% of all resident births.

The state of North Carolina and Wake County have a strict school policy requiring that teachers promote and discuss only abstinence as a means of birth control. Therefore, youth do not receive comprehensive sex education as part of school health classes. Teens report that sex education and discussion of other methods of birth control are major needs in schools. While it is possible for individual counties within the state to overturn the abstinence only policy, there has been no significant effort to address this issue in Wake County.

7. DISCUSSION AND RECOMMENDATIONS

The Social Ecological Model perspective is often used to conceptualize or think about the different levels of society which influence the way we think and operate, from the grassroots level up to the governmental level. The following is a list of decreasing scope of the various levels according to the Social Ecological Model: larger macro levels (governmental policies and laws), community level (ie. neighborhood), organizations level (ie. church, school, business), group level (ie. the youth), dyad level (ie. a husband and wife), and individual level (one person). For each theme previously discussed, factors influencing these issues will be described (determinants); and strategic levels of society to influence positive change for each theme will be suggested, with specific examples of possible interventions.

7.1 Growth

Both the secondary and primary data indicated that growth in Fuquay-Varina is a central issue facing the community. At the society/policy level, infrastructure demands such as roads and water resources exceed the current capacity. In addition, positive and negative aspects exist for commercial and population growth as well as with business and residential zoning.

At the community level, several changes in town culture have taken place, namely northerners moving into the area, the emergence of a bedroom community of Research Triangle Park employees, and ethnic/racial changes resulting from the increase in the Latino population. The population and cultural changes, to some extent, compromised the small town feel of Fuquay-Varina in which people tend to know their neighbors. At the same time, this growth affords more opportunities, warranting cautious optimism on the part of community members.

Possible interventions include re-igniting support for the Community Advisory Board, which produced a growth plan but did not use it. With all the cultural changes taking place in Fuquay-

Varina, securing more diverse representation on community planning committees and organizations seems necessary along with a wider scope of focus for interventions among growing sectors of the community.

7.2 Race Relations

On the policy level concerns from more than one source arose about allocation of resources in the community based on socioeconomic status and/or race, namely improvements in sidewalks in selected areas of town. Similarly, there is a lack of communication and sense of community between racial and ethnic groups at the community level, including a language barrier with the Latino population and a history of traditional employment roles divided according to race and ethnicity.

Improving race relations in Fuquay-Varina could include working with existing community organizations to facilitate collaboration across races and ethnic groups, using the drug task force as a model of different races joining forces to combat the drug problem effectively. The Western Wake Family Services offers financial assistance through ecumenical efforts on the part of local churches and exemplifies an already existing point of possible intervention to bring various races and ethnic groups together. The annual Heritage Festival could provide an atmosphere for promoting cultural diversity by providing a format where different ethnic groups could share various aspects of their culture. Finally, the already existent youth relationships across races could serve to bring the races together. In the context of athletic participation, for example, through cultivating these friendships, the parents may also build relationships with each other.

7.3 Schools

Some policy level issues emerging from the data included sex education, teenage pregnancy and abortion; overcrowding in schools; and inadequate technological equipment management

and provision in the schools. Because the public school system is part of the larger Wake County School System, these policy issues would need to be addressed at the county level. However, community level determinants also exist such as the language barrier between school staff, parents/guardians, and students; parental involvement; and inadequate day care.

Organizations such as Head Start, the Educational Foundation, the Parent Teacher-Student Association, and the Chamber Education Committee serve as organizational level assets already in place that could provide a platform for intervening in Fuquay-Varina's schools. For example, the Educational Foundation's apparently diminishing momentum could be recharged to provide Spanish education or additional computers in the local schools. Although one local teacher already mentioned the Educational Foundation as a strength, further efforts toward building stronger community and school ties should be nurtured.

7.4 Recreation and Entertainment

Several times during the interview process, respondents discussed a lack of entertainment facilities and recreation activities for adolescents and the elderly in Fuquay-Varina. These findings were concurred with the Chamber of Commerce's survey of community members. Yet the Fuquay-Varina Athletic Association is reportedly one of the largest on the east coast. At an organizational level, the schools, Chamber of Commerce, and Town Department of Parks and Recreation could assess the needs for further opportunities and offer programs as desired.

7.5 Religion and Community Partnerships

Church involvement, a prominent aspect of life in the community, provides a convenient context to observe the sense of community as well as to intervene. Organizationally speaking, the Western Wake Family Services, which ecumenically provides financial aid, also has an annual inter-faith service. This relationship seems appropriate for intervening because a

relationship already exists between churches. Fostering these relationships could build powerful bonds across denominations and across various races as well.

The Community Against Drugs task force has repeatedly been hailed as a shining example of community partnerships, largely because of the community – wide effort free from race or other class distinctions. The community embraced the issue as a whole and made quite a positive impact on the situation. Maintaining and strengthening the partnerships between the various groups that formed this organization would help the community continue this positive momentum. Voicing concerns to the town government, a critical component of the formation of the Citizens Against Drugs task force, should continue to be encouraged. The forming of organizations for every pressing issue would not be advisable, however, as the community would then run the risk of diluting the citizens' interests.

7.6 Safety: Crime and Drugs

Although crime was generally not thought of as a major concern in Fuquay-Varina, crime in trailer parks where Latino men live was discussed as a concern. At the community level, Crime Watch could be instituted, while at the organizational level, churches could interact more with the Latino community to build relationships with them.

In a certain area of the community, the presence of abandoned houses invited drug trading and trafficking to occur. The drug problem grew and the town fear mixed with complacency in the community. Now, though, the Community Development Corporation is revitalizing this area by tearing down condemned houses and a school renewing the area with a Housing and Urban Development (federal) block grant, an example of a community level intervention being implemented now. A community level program educating parents about how to tell whether your kids are using drugs could also be useful and pertinent as an intervention at this level.

7.7 Health

The shortage of primary care and specialist physicians was repeatedly noted in interviews, partly due to the difficulty in attracting them to the area and also due to some physicians' health insurance requirements, causing them to leave the area. One possible recommendation is the use of comprehensive recruitment packages, which highlight Fuquay-Varina's character, opportunity for growth, and family-oriented community.

7.8 Conclusions

Overall, there is strong congruence between the secondary data in Part One and the primary data gathered from interviews in Part Two. Moreover, the community members tend to agree with providers and officials on most issues. An exception is the issue on how to accommodate growth in the area. It was reported in one interview that the committee which planned for growth is not going by these very plans, or else businesses such as Wal-Mart would not be here. Another exception is the discussion of the quality of schools. While some claim that the schools, particularly the middle schools and high schools, are good and meet expected growth standards, the standardized test scores fall below the county's test scores as a whole. Lastly, one service provider claims that the Fuquay-Varina Athletic Association offers one of the largest recreation programs in the entire east coast; but a number of interviewees noted a lack of recreational opportunities for young people in the area. These incongruences are minor when compared to the many consistencies between primary and secondary data, as well as between community members and service providers.

A number of units of identity have been identified, including groups of people from various racial and ethnic backgrounds, recognized leadership positions, churches, and partnerships

between a number of organizations. The table in this section describes some enabling factors for finding solutions to overcome barriers between units of identity as well as units of solution.

The geographical definition of Fuquay-Varina's community was previously defined in the Geography section of Part One, but this community may define themselves in ways besides geographic boundaries. While acknowledging themselves as a growing community where people do not necessarily know their neighbors, they quickly note its historical perspective, with its lingering friendly, small town feel. It is a town in transition, facing tension between two forces of impact – its past and its future. Most view this dynamic era of Fuquay-Varina with cautious optimism, in which they not only enjoy the benefits of positive changes but also want to preserve its unique and treasured features.

Broadly speaking, Fuquay-Varina is seen as a highly competent community, given its many assets and demonstration of community competence. Despite areas in need of improvement, its strong leaders from the grassroots level up to recognized leaders in the community have a passionate and nurturing attitude toward the community. These leaders' strong sense of ownership and vision to see Fuquay-Varina thrive and prosper in the midst of tremendous growth assures refusing to concede to any threats to the cherished sense of community. Thus, Fuquay-Varina demonstrates an array of competencies within its community that effect powerful change. The rich heritage of Fuquay-Varina's sense of community, along with the continuous promotion of community, will be foundational to Fuquay-Varina's successful development in years to come.

Table 7.1 Summary Table of Determinants and Interventions at Relevant Social Ecological Levels for Each Theme

Theme	Social Ecological Level	Determinants	Interventions
Growth	Society/Policy	<ul style="list-style-type: none"> ▪ Increased demands on infrastructure ▪ Re-zoning issues with population and commercial growth 	<ul style="list-style-type: none"> ▪ Re-ignite support for the Community Advisory Board, which did produce a growth plan, but did not use.
	Community	<ul style="list-style-type: none"> ▪ Northerners moving into the area ▪ Emergence of bedroom community of RTP employees ▪ Ethnic/racial changes with increased Latino population ▪ Compromise of small town feel ▪ Increased opportunities from growth 	<ul style="list-style-type: none"> ▪ Secure more diverse representation on community planning committees and organizations ▪ Wider scope of focus for interventions among growing sectors of the community
Race Relations	Society/Policy	<ul style="list-style-type: none"> ▪ Allocation of resources 	<ul style="list-style-type: none"> ▪ Equitable distribution of resources between racial and ethnic groups
	Community	<ul style="list-style-type: none"> ▪ Lack of communication and sense of community between racial and ethnic groups ▪ Language barrier with the Latino population ▪ History of traditional employment roles divided according to race and ethnicity 	<ul style="list-style-type: none"> ▪ Facilitate collaboration across races and ethnic groups, using drug task force as a model ▪ Strengthen existing interracial efforts ▪ Annual Heritage Festival to provide format in which different cultures can share their diversity ▪ Encourage already existing relationships between races among the youth, ie in athletic participation
Schools	Society/Policy	<ul style="list-style-type: none"> ▪ Sex education, teenage pregnancy and abortion ▪ Overcrowding ▪ Inadequate technological equipment management and provision 	<ul style="list-style-type: none"> ▪ Difficult to intervene since schools are part of the larger Wake County School System
	Organizational Level	<ul style="list-style-type: none"> ▪ Language barrier between school staff, parents/guardians, and students ▪ Parental involvement ▪ Inadequate day care 	<ul style="list-style-type: none"> ▪ Head Start, Parent Teacher Student Association, Chamber Education Committee could work toward strengthening school/community ties. ▪ Educational Foundation could provide Spanish education and additional computers in schools

Theme	Social Ecological Level	Determinants	Interventions
Recreation	Organizational Level	<ul style="list-style-type: none"> ▪ Community Center offers courses ▪ No YMCA, theater, or certain types of eateries ▪ Certain minorities, middle school students, and elderly people do not have same access to recreation opportunities as others, or they are not available ▪ Good sports leagues ▪ Inadequate field capacity 	<ul style="list-style-type: none"> ▪ Access to recreational opportunities for people of all ages and try to fill in the gaps of opportunities.
Religion	Organizational level	<ul style="list-style-type: none"> ▪ Interfaith service once a year to unite church community 	<ul style="list-style-type: none"> ▪ Foster increased contacts between these various churches (from different ethnic groups and different denominations to create strong bonds between them.
	Community level	<ul style="list-style-type: none"> ▪ Almost everyone (white and African American) goes to church ▪ St. Bernadette's reaches out to Latino population ▪ Some churches offer after school programs ▪ Church community is divided by "the tracks" 	<ul style="list-style-type: none"> ▪ Same as above
Community Partnerships	Organizational level	<ul style="list-style-type: none"> ▪ Community Against Drugs task force - successful ▪ Community Development Corporation (CDC) partnership receiving positive attention ▪ Educational Foundation deemed important, though loss of momentum 	<ul style="list-style-type: none"> ▪ Maintain existing organizations and strengthen partnerships between them ▪ Perhaps do not form organizations for every problem in order to minimize the risk of diluting citizens' interests ▪ Continue to voice concerns to the town government and partnerships
Safety – Crime	Policy/Society	<ul style="list-style-type: none"> ▪ Not enough police presence in some areas of town (substation but not staffed initially) 	<ul style="list-style-type: none"> ▪ Police substation adequately staffed, hiring of more officers ▪ More protection in Latino neighborhoods ▪ Train officers in Spanish, communication skills

Theme	Social Ecological Level	Determinants	Interventions
Safety – Crime cont'd	Community	<ul style="list-style-type: none"> ▪ Crime more prevalent in trailer parks where Latino men live ▪ Kids don't have anything to do, young people nothing to do, leads to crime (according to some people) ▪ Infiltration of drugs has led to some crime 	<ul style="list-style-type: none"> ▪ Crime Watch in Latino neighborhoods
	Organizational	<ul style="list-style-type: none"> ▪ Safe Watch - city workers have number to call if they see suspicious activity ▪ Schools - character education, police in school (SRO's) and conducting educational programs 	<ul style="list-style-type: none"> ▪ Involve churches in engaging with Latinos
Safety - Drugs	Policy/Society	<ul style="list-style-type: none"> ▪ Pre-dawn drug sweep on Nov. 10, 1999 ▪ Drugs against the law, but enforcement up until that time ▪ Police sub-station ▪ Town board made commitment to help, gave money 	
	Organizational	<ul style="list-style-type: none"> ▪ Police Dept joined effort to stop drug activity. 	
	Community	<ul style="list-style-type: none"> ▪ Abandoned houses allowed for trade to happen ▪ High dropout rates ▪ People didn't think it was their problem if it wasn't in their neighborhood ▪ Complacency ▪ Fear of speaking out 	<ul style="list-style-type: none"> ▪ Housing and Urban Development block grant – Community Development Corporation - community revitalization zone ▪ Community forum on housing ▪ Formed Citizens Against Drugs Task Force, built bridges with other formal and informal organizations ▪ Programs to educate parents about how to tell if your kids are using drugs ▪ Pine Acres Comm. Center as haven for kids during problem
Health	Community	<ul style="list-style-type: none"> ▪ Shortage of primary care and specialist physicians 	<ul style="list-style-type: none"> ▪ Comprehensive recruitment packages to attract physicians to Fuquay-Varina highlighting the city's character, opportunity for growth, and family-oriented community

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APPENDIX A:
IRB Protocols and Informed Consent

RESEARCH PROTOCOL INFORMATION-Adult Community Members and Service Providers

A. Purpose and rationale:

The purpose of this research project is to understand the strengths and weakness of, and to help identify future directions for, the Fuquay-Varina community in Wake County, NC. Community leaders, community members, and those who provide services to the community will be interviewed to obtain information. Results of the interviews will then be summarized and made available to community members.

B. Description of human subjects:

The human subjects for this study include the community leaders and members of the Fuquay-Varina community in Wake County, NC. Only members of this community and those who provide services to the community will be asked to participate in the study. Only individuals who are over 18 years of age who agree to participate will be interviewed. Minority status and sex are not relevant factors in selecting participants.

C. Methods of recruitment:

Community leaders and service providers to the community will be contacted about their availability and interest to participate in this study. Other community members will be identified by community leaders and service providers. Community members recruited in this manner will be informed how their names were obtained, and that they are under no obligation to participate in the interview. Once identified, subjects will be contacted to request an interview. Pearl Friedberg, Susan Haws, Megan Raspa, Felicia Solomon, Debbie Wood and David Yum will recruit interviewees. It is anticipated that a total of about 25 community leaders and members and about 15 service providers will be contacted for interviews.

D. Research Protocol:

Community leaders and service providers will be asked similar, yet slightly different questions during the interviews (see attached protocols). Pearl Friedberg, Susan Haws, Megan Raspa, Felicia Solomon, Debbie Wood and David Yum will conduct interviews. Responses will be kept confidential and interviewees will remain anonymous; however general identifiers such as age, sex, race and number of years residing in the Fuquay-Varina community may be used when summarizing data.

E. Compensation and costs:

Interviewees will not be compensated nor given inducements for their participation. The only costs to participants will be the time spent in interviews. These interviews are expected to last 30-40 minutes.

F. Risks to subjects:

Physical, psychological and social risks should be negligible. Interviews will focus primarily on the strengths, weaknesses and directions for development of the Fuquay-Varina community. Results will be summarized and made available to the community leaders, members and service providers.

G. Confidentiality of data:

Names and personal identifiers of all persons contacted for interviews will be kept confidential. A description of the person will be provided instead (i.e. white, middle-aged female has resided in the community for 10 years) in preparing the document. However, if a service provider does not care to remain anonymous and grants permission for use of his or her name, researchers may choose to use these names. Regardless, all community members will remain anonymous.

Audio taping is preferred for all interviews. Permission will be secured from the interviewee prior to taping, and interviewee will be informed of their right to turn off the tape recorder. Cassette tapes will be recycled or destroyed after their use for this class is complete.

H. Benefits:

A written summary of the strengths and weaknesses of, and suggested future directions for the Fuquay-Varina community will be made available to the community leaders, community members and service providers.

I. Procedures for obtaining informed consent:

The consent form will be read aloud to each participant, who will then be asked if they have any questions. After making certain all questions have been answered, researchers will proceed to ask interview questions. Permission for audio taping will also be secured prior to taping.

J. Public release of data:

Researchers do not plan to release collected data. The purpose of this project is to fulfill course requirements for HBHE 240/241: Community Diagnosis.

RESEARCH PROTOCOL INFORMATION-Youth

A. Purpose and rationale:

The purpose of this research project is to understand the strengths and weakness of, and to help identify future directions for, the Fuquay-Varina community in Wake County, NC.

Community members will be interviewed in a focus group setting to obtain information. Results of the interviews will then be summarized and made available to community members.

B. Description of human subjects:

The human subjects for this study range in age from 10-18 years old. Because subjects include persons under the age of 18, informed consent will be obtained from a parent or legal guardian prior to participation in the focus group. It is the intention to obtain a representative sample of the population of the Fuquay-Varina community in Wake County, NC. Every attempt will be made to include a stratified sample based on age (within the youth community) race, gender and socioeconomic status in recruiting subjects.

C. Methods of recruitment:

Youth will be identified by school staff, community leaders and service providers. Once identified, subjects will be contacted to request their participation in a focus group. Youth who are recruited in this manner will be informed how their names were obtained, and that they are under no obligation to participate in the focus group. A written consent form will be sent home with youth under 18 describing the nature and purpose of the focus groups and will require a parent or guardian's signature before proceeding. The parent or guardian will be requested to make special arrangements for transportation if necessary. All subjects will have the details of the study explained to them prior to obtaining focus group consent and will be able to refuse participation at any time. Subject recruitment and focus groups will be conducted by Pearl Friedberg, Susan Haws, Megan Raspa, Felicia Solomon, Debbie Wood and David Yum. It is anticipated that a total of about 20-30 youth will participate in the focus groups.

D. Research Protocol:

Youth subjects will be asked questions based on the attached interview guide. Focus groups may be tape-recorded, however participants can request that a focus group not be taped or may stop the recorder at any time during the focus group. Pearl Friedberg, Susan Haws, Megan Raspa, Felicia Solomon, Debbie Wood and David Yum will conduct the focus groups. Responses will be kept confidential and interviewees will remain anonymous; however general identifiers such as age, sex, race and number of years residing in the Fuquay-Varina community may be used when summarizing data.

E. Compensation and costs:

Interviewees will not be compensated nor given inducements for their participation. The only costs to participants will be the time spent in interviews. These focus groups are expected to last 45-60 minutes. Light refreshments may be provided.

F. Risks to subjects:

Physical, psychological and social risks should be negligible. Focus groups will concentrate primarily on personal beliefs about the various aspects of growing up in the Fuquay-Varina community. Results will be summarized and made available to the community leaders, members and service providers.

G. Confidentiality of data:

Names and personal identifiers of all persons contacted for focus groups will be kept confidential. A description of the person will be provided instead (i.e. white, adolescent female) in preparing the document. All community members will remain anonymous.

Audio taping is preferred for all interviews. Permission will be secured from the participant and from the parent or guardian prior to taping. Cassette tapes will be recycled or destroyed after their use for this class is complete.

H. Benefits:

A written summary of the strengths and weaknesses of, and suggested future directions for the Fuquay-Varina community will be made available to the community leaders, community members and service providers.

I. Procedures for obtaining informed consent:

The consent form will be read aloud to each participant, who will then be asked if they have any questions. Participants under the age of 18 will be required to return a consent form signed by a parent or legal guardian to one of the interviewers before proceeding with the focus group. Once parental consent has been given, participants under 18 years of age will be given an assent form describing the interview process and asking if the youth have any questions. After making certain all questions have been answered, researchers will document that informed parental consent was obtained.

J. Public release of data:

Researchers do not plan to release collected data. The purpose of this project is to fulfill course requirements for HBHE 240/241: Community Diagnosis.

Consent Letter for Individual Interviews

October 25, 1999

We are graduate students in the UNC Chapel Hill School of Public Health in the department of Health Behavior and Health Education. One of our degree requirements is that we conduct a community diagnosis. A community diagnosis is a type of research project in which we assess the strengths and weaknesses of, and help identify future directions for a community. The community to which we have been assigned is Fuquay-Varina.

We will be conducting interviews with individuals who reside, work or attend church in the Fuquay-Varina community. We will also be interviewing service providers for their input into the assets and needs of those in Fuquay-Varina. After conducting these interviews, we will summarize our findings about the strengths and weaknesses of the community, and present them (both written and verbally) to Fuquay-Varina community members.

We would greatly appreciate your participation in our interviews, since you are very familiar with the Fuquay-Varina community, including its assets and needs. Participation in the interviews is entirely voluntary and you are not required to give your name or to reveal any personal information. You have the right to refuse to answer any question or stop the audio taping at any time without penalty. All information collected will remain confidential. This interview should last 30-40 minutes.

If you have questions or concerns about this project, or about your rights as a research participant, please do not hesitate to contact one of our project preceptors, our faculty advisor, or us. Our names and contact information are listed below.

Pearl Friedberg, UNC Graduate Student Contact	919-933-5608
Alan B. Muriera, Co-Preceptor Wake County Human Services	919-212-9312
Deborah Cerrito, Co-Preceptor Southern Regional Center Fuquay-Varina	919-557-1056
Sandra Quinn, Ph.D., Faculty Advisor UNC School of Public Health	919-966-3915

Thank you for your time. We appreciate your participation.

Pearl Friedberg,
Group contact for Susan Haws, Megan Raspa, Debbie Wood, Felicia Solomon and David Yum

Parent Consent Letter for Youth Focus Groups

October 21, 1999

Dear Parent or Guardian:

We are graduate students in the UNC Chapel Hill School of Public Health in the department of Health Behavior and Health Education. One of our degree requirements is that we conduct a community diagnosis. A community diagnosis is a type of research project in which we assess the strengths and weaknesses of, and help identify future directions for a community. The community to which we have been assigned is Fuquay-Varina.

We are interested in conducting focus group interviews with youth in the Fuquay-Varina community. The purpose of these focus groups is to get specific ideas and opinions about what growing up in Fuquay-Varina is really like. Questions ask about day-to-day issues that youth face, such as how they feel about the community, what activities they participate and what types of people have an influence in their lives. The Focus groups will be conducted at local schools, libraries and other community settings in Fuquay-Varina and should take about one hour of your child's time to complete. With your permission and theirs, we will take notes and use a tape recorder during the interview. The notes will be destroyed and the tapes erased at the end of this project in the spring of 2000. Everything your child says in the interview is strictly confidential and his/her name will not be associated with any of his/her answers. We will request that the participants in the focus groups follow a "no gossip" rule, that is, that the topics and information discussed during the focus group will not be discussed elsewhere by the participants. No risks of any nature are expected from this study. After conducting these focus groups, we will summarize our findings about the strengths and weaknesses of the community, and present them (both written and verbally) to Fuquay-Varina community members.

If we have permission for your son or daughter to participate in a focus group, please sign and date the statement below and have him/her return to _____ by _____. The focus group will take place at _____ on _____. We also ask that you make arrangements for transportation for your child. Your son or daughter will have the details explained to him/her prior to starting the focus group. Even if you give consent, your child has the right to refuse participation at any time during the focus group without repercussions. The person from whom we obtained your child's name will not know whether or not your child participated in this study. We hope you will allow your child to participate in an interview with us. The information they provide could help address concerns of all young people in Fuquay-Varina and benefit the community as a whole.

This project has been reviewed and approved by the UNC-Chapel Hill Institutional Review Board on Research Involving Human Subject, a board of researchers that makes sure studies are ethical. If you have questions or concerns about this project, or about your rights as a research participant, please do not hesitate to contact our faculty advisor or us. Collect calls will be accepted. Our names and contact information are listed below.

Pearl Friedberg, UNC Graduate Student Contact
Sandra Quinn, Ph.D., Faculty Advisor
UNC School of Public Health

919-933-5608

919-966-3915

Thank you for your time and consideration. Please keep this sheet for your records and return the attached consent form.

Consent Letter for Youth Focus Group

October 21, 1999

Dear Youth:

We are graduate students in the UNC Chapel Hill School of Public Health in the department of Health Behavior and Health Education. One of our assignments is to complete a community project in a team. We are conducting our project in Fuquay-Varina. To get information about Fuquay-Varina, we will be interviewing people who provide help and activities in the community as well as other community members, and doing focus group interviews with young people who live in Fuquay-Varina. We hope to use this information to understand the strengths and weaknesses of the community and to identify future goals for Fuquay-Varina.

We would like to get to know the youth of Fuquay-Varina by doing focus group interviews with young people. The reason for these focus groups is to get ideas and opinions about what growing up in Fuquay-Varina is really like. The questions ask about day-to-day concerns that all young people face. The interviews will be conducted at local schools, libraries and other public places in Fuquay-Varina and should take about one hour of your time to complete. With your and your parent or guardian's permission, we will take notes and use a tape recorder during the interview. The notes and tapes will be destroyed at the end of this project in the spring of 2000. Everything you say in the interview is private and your name will not be matched with any of your answers. We ask that you do not talk about what was said in the group to anybody. We do not think you will be taking any risks by helping us with this project.

If we have your permission to participate in a focus group, please sign and date the statement below and return it to _____ by _____. The focus group will take place at _____ on _____. You will have the details explained to you before you start the focus group. You have the right to refuse to stop participating at any time during the focus group. The adult who gave us your name will not know whether or not you chose to do the focus group. We hope you will decide to participate in the focus group. The information you provide could help people understand the concerns of all young people in Fuquay-Varina and benefit the community as a whole

This project has been reviewed and approved by the UNC-Chapel Hill Institutional Review Board on Research Involving Human Subject, a board of researchers that makes sure studies are ethical. If you have questions or concerns about this project, or about your rights as a research participant, please do not hesitate to contact one of our project preceptors, our faculty advisor, or us. Our names and contact information are listed below.

Pearl Friedberg, UNC Graduate Student Contact	919-933-5608
Susan Haws, UNC Graduate Student Contact	919-832-1264
Megan Raspa, UNC Graduate Student Contact	919-493-7296
Felicia Solomon, UNC Graduate Student Contact	919-408-3294
Debbie Wood, UNC Graduate Student Contact	919-969-8365
David Yum, UNC Graduate Student Contact	919-929-2248

Thank you for your time and consideration. Please keep this sheet for your records and return the attached consent form.

Parental Consent for Child to Participate in a Focus Group

Please have your child return this portion of the form to _____ at
_____ by _____, 1999.

I **DO** give my consent for you to conduct a focus group that includes (child's name)
_____ as part of the UNC-Chapel Hill School of Public Health's Community
Diagnosis in Fuquay-Varina.

Parent/Guardian Signature _____

Date _____

Youth Consent to Participate in a Focus Group

Please have your child return this portion of the form to _____ at
_____ by _____, 1999.

I (your name) _____ DO give my consent to participate in a focus
group interview as part of the UNC-Chapel Hill School of Public Health's Community Diagnosis
in Fuquay-Varina.

Youth's Signature _____

Date _____

APPENDIX B
Interview Guides and Table of Interviewees

Community Member Interview Guide

1. Opening

- *Thank you* for taking the time to meet with me/us. We recognize that your time is valuable and we appreciate your participation.
- We are *graduate students form UNC* School of Public Health. A requirement of our graduate program is that we work with a community in NC to conduct a community diagnosis. This means that we help the community to identify its strengths, weaknesses and future directions. Our community is Fuquay-Varina. The information we gather will be summarized and shared with the community. In addition, we will present our results to the community at a forum that will be held in the spring.
- The *purpose* of speaking with you today is to find out about your thoughts and experiences (having lived/having worked in/being familiar with) Fuquay-Varina. We are interested in your opinions. There are no right or wrong answers.
- *Time*: This interview should last 30-40 minutes. We would like to give you the opportunity to tell us as much as you would like, but (mention if you have limited time/ask if they do).

2. Confidentiality

- Your comments will remain confidential. We will be reporting summaries of the comments made by community members but will not identify who said what, nor will we identify the names of the individuals we interview.
- We would like to take notes and tape record this interview. Your input is important and we want to make sure that we accurately record what you tell us. Feel free to not respond to any question we ask, or hit the “Stop” button on the tape recorder at any time. After we are finished using the tapes for this class, the cassettes will be recycled or destroyed. Is this okay with you?

3. Ground Rules

- *Right to refuse*: if at any time while we are talking you don't want to answer a question, you do not feel comfortable, or you would like to end the interview, please feel free to let me/us know.

Do you have any questions about anything I have said so far?

4. Self and family

- How long have you lived in Fuquay-Varina?
- Who does your family consist of?
- If they have children:
 - What ages and grades are your children in?
 - **Where do they attend school?**
- What kind of work do you/family members do?
- Do you have any religious affiliation?

5. Assessment of Community

- If someone were considering moving to Fuquay-Varina, what would you tell them about the area to convince them to move here? Probe: what are other strengths or good things about Fuquay-Varina?
- How could Fuquay-Varina be improved? Probe: What other problems/areas for improvement does Fuquay-Varina have?
- Would you consider Fuquay-Varina to be a stagnant community or changing community? What makes you think this? **Is this something you would consider to be good or bad for Fuquay-Varina?**
- How would you feel about new growth in the area? Probe: **Is this something that you would consider to be good or bad for Fuquay-Varina?**
- How well would you say people know their neighbors?
- If you needed help for some reason, who would you turn to?
- **How do different ethnic groups interact?**

6. Community activities

- What organizations are in the Fuquay-Varina community?
- Who are the important people in the community for getting things done? Probe: Who are the formal/informal community leaders, etc.?
- What kinds of projects has Fuquay-Varina worked on together (in the past 5-10 years)? (How) were you involved in these efforts?
- What activities in the community are you involved in?
- **What groups of people are involved in community activities? Probe Are people from all age groups involved?**
- What religious services/activities are you involved in?
- How do religious activities fit into life in Fuquay-Varina?

7. Employment/Economics

- What types of work are most common?
- What do you think of these job opportunities?

8. Health and resources

- What are the main health problems of people in Fuquay-Varina?
- What are the main social problems found in Fuquay-Varina?
- What are some of the environmental health concerns in the community?
- What are some of the safety concerns?
- What health problems have you and your family had to deal with?
- What do most people do when they have health problems?
- Where do most people go to receive medical care?
- How do they get to these places? Probe: What services are provided for those who are unable to get to these places?
- What are some resources provided specifically for youth/elderly?
- What resources would you like to see in Fuquay-Varina?
- How do you feel about the educational system in Fuquay-Varina?

9. Changes over time

- Thinking about what we have discussed, how has Fuquay-Varina changed over the past 5 years? Probe: Is there anything different about Fuquay-Varina now that was not the case 5 years ago?
- What do you think about these changes? Probe: Are they something that you consider to be good or bad?

10. Perceptions of the future

- How do you think Fuquay-Varina will change over the next 5 years?
- What do you hope to see happen in Fuquay-Varina in the next 5 years?
- What are your plans for the future?

11. Closing

- Is there anything else I have not asked about that is important for me to know about Fuquay-Varina?
- Can you think of some other people in the Fuquay-Varina community who we should speak to about Fuquay-Varina?
- What did you think of our interview questions? (Ask for first few interviews only.)

Thank you again for your participation

Service Provider Interview Guide

1. Opening

- *Thank you* for taking the time to meet with me/us. We recognize that your time is valuable and we appreciate your participation.
- We are *graduate students form UNC* School of Public Health. A requirement of our graduate program is that we work with a community in NC to conduct a community diagnosis. This means that we help the community to identify its strengths, weaknesses and future directions. Our community is Fuquay-Varina. The information we gather will be summarized and shared with the community. In addition, we will present our results to the community at a forum that will be held in the spring.
- The *purpose* of speaking with you today is to find out about your thoughts and experiences (having lived/having worked in/being familiar with) Fuquay-Varina. We are interested in your opinions. There are no right or wrong answers.
- *Time*: This interview should last 30-40 minutes. We would like to give you the opportunity to tell us as much as you would like, but (mention if you have limited time/ask if they do).

2. Confidentiality

- Your comments will remain confidential. We will be reporting summaries of the comments made by community members but will not identify who said what, nor will we identify the names of the individuals we interview.
- We would like to take notes and tape record this interview. Your input is important and we want to make sure that we accurately record what you tell us. Feel free to not respond to any question we ask, or hit the “Stop” button on the tape recorder at any time. After we are finished using the tapes for this class, the cassettes will be recycled or destroyed. Is this okay with you?

3. Ground Rules

- *Right to refuse*: if at any time while we are talking you don't want to answer a question, you do not feel comfortable, or you would like to end the interview, please feel free to let me/us know.

Do you have any questions about anything I have said so far?

4. Overview of Services

- Could you please provide me/us with an overview of the services your agency provides?
- What is your source of funding?
- What services does your agency provide for the residents of Fuquay-Varina?
- What kind of contact do you have with residents of Fuquay-Varina? Probe: Which groups? How often?

- What special criteria must people meet in order to be eligible for your services?
- What Fuquay-Varina groups use your services most?
- What Fuquay-Varina groups tend to be most in need of your services?
- What barriers do you encounter in trying to reach Fuquay-Varina residents? (geographic, transportation, etc.)
- What other organizations provide similar services to Fuquay-Varina residents?
- How does your agency meet the cultural and language needs of the various groups of Fuquay-Varina?

5. Community

- What would you say are the strengths of the Fuquay-Varina community?
- What would you say are the greatest needs of the Fuquay-Varina community?
- What kinds of community projects have been undertaken in Fuquay-Varina during your time of working with community residents? Probe: How would you explain their success or lack thereof?
- If you were going to try to implement some type of community health project in Fuquay-Varina, who from the Fuquay-Varina community would you try to involve to ensure success?
- What community needs are not met by your agency or other organizations in the area?
- How is the community involved in determining the services that you provide?

6. General

- Is there anything else you can tell me/us about the Fuquay-Varina community?
- Is there anything else that you think I/we should know about?

7. Documents

- Does your agency have any documents (e.g. annual reports, funding applications, etc.) that we can either look at or have copies of?

8. Referrals

- Who else would you recommend that we talk to about the needs and assets of Fuquay-Varina? Probe: Would you be willing for us to mention your name when we contact them?

Thank you for your time.

Youth Focus Group Interview Guide

1. Describe something you think makes Fuquay-Varina a special place to live.
2. Who are some of the people who help the town the most? How do they help?
3. Are you proud of your school? Why or why not?
4. If you had a really hard homework assignment that you couldn't figure out, what would you do?
5. Besides going to school, what are some of the things you do during the week? What about places you go often?
6. What are some activities you do on the weekends? With whom do you do them?

Thank you for your time.

Interviewee List

#	Gender	Race/ Ethnicity	Age	Type of interview		Service provider	Community Member
				Individual	Focus Group		
1	F	White	Unknown		X		X
2	M	White	Unknown		X		X
3	M	White	< 50		X	X	X
4	F	White	> 50		X		X
5	M	White	< 50	X		X	X
6	F	African Amer.	> 50	X		X	X
7	F	White	Unknown	X			X
8	M	Latino	< 50	X		X	X
9	F	African Amer.	Unknown	X		X	
10	M	White	> 50	X		X	X
11	F	White	< 50	X			X
12	M	White	> 50	X			X
13	M	White	< 50	X		X	X
14	F	White	< 50	X			X
15	M	African Amer.	> 50	X			X
16	M	African Amer.	< 50	X			X
17	M	White	< 50	X		X	
18	F	White	Unknown	X		X	X
19	M	Latino	< 50	X			X
20	M	African Amer.	< 18		X		X
21	F	African Amer.	< 18		X		X
22	F	African Amer.	< 18		X		X
23	F	African Amer.	< 18		X		X
24	F	African Amer.	< 18		X		X
25	F	African Amer.	< 18		X		X
26	F	African Amer.	< 18		X		X
27	F	African Amer.	< 18		X		X
28	F	African Amer.	< 18		X		X
29	F	White	< 18		X		X
30	M	African Amer.	> 50	X		X	X
31	F	White	< 18		X		X
32	F	White	< 18		X		X
33	F	White	< 18		X		X
34	F	White	< 18		X		X
35	F	White	< 18		X		X
36	M	White	< 18		X		X
37	F	African Amer.	< 18		X		X
38	F	African Amer.	< 18		X		X
39	F	White	> 50	X		X	X
40	F	White	Unknown	X		X	X

APPENDIX C
Announcements and Promotional Material for Fuquay-Varina Community Forum

Forum Announcement Contact Letter for Interviewees

March 20, 2000

To Whom It May Concern:

Thank you in advance for helping us to inform the Fuquay-Varina community about our upcoming community forum. The forum will be held on **Thursday evening, March 30 from 7:00 to 9:00 p.m. at the Fuquay-Varina Middle School**. I am attaching a fact sheet, which will help you spread the word about this important and exciting event.

My team and I certainly hope you and other community members will make an effort to attend the forum. With a good showing from the community, we will be able to take significant steps toward addressing some of the issues Fuquay-Varina residents have spoken out about during our project. If you have any questions regarding the project or the forum, please do not hesitate to contact me. I may be reached at 832-1264, or by email at haws@email.unc.edu.

Thanks again for your efforts on our behalf.

Sincerely,

Susan W. Haws

Forum Announcement Contact Letter for Pastors

March 21, 2000

Dear

Thank you in advance for helping us to inform your congregants about our upcoming community forum. The forum will be held on **Thursday evening, March 30 from 7:00 to 9:00 p.m. at the Fuquay-Varina Middle School**. I am attaching a fact sheet, which will help you spread the word about this important and exciting event. In working with some members of the community to plan our forum, we have been informed that your advocacy of this event, along with that of your colleagues in other churches, could be the deciding factor in determining the level of community participation. While we know that your time is limited, we ask that you please consider making a verbal announcement during the Sunday services or at other times during the week. Also, we hope that you will be able to hang some of the flyers we are sending in high-traffic areas of the church and parish hall.

My team and I certainly hope you and other community members will make an effort to attend the forum. With a good showing from the community, we will be able to take significant steps toward addressing some of the issues Fuquay-Varina residents have spoken out about during our project. If you have any questions regarding the project or the forum, please do not hesitate to contact me. I may be reached at 832-1264, or by email at haws@email.unc.edu.

Thanks again for your efforts on our behalf.

Sincerely,

Susan W. Haws

Fuquay-Varina Community Forum
March 30, 2000
7:00- 9:00 p.m.
Fuquay-Varina Middle School

Fact Sheet:

- Over the past 6 months, a team of graduate students from the Department of Health Behavior and Health Education at the School of Public Health at UNC has been working on a project called a **community diagnosis** in Fuquay-Varina.
- The *purpose* of the project is to **gather information about the quality of life in Fuquay-Varina from a variety of sources.**
- A very important aspect of the community diagnosis process is find and listen to **the voices of people who accurately represent the community.** This includes people who live and work in Fuquay-Varina as well as town officials and service providers, such as ministers and health care workers. **We have interviewed over 40 community members.**
- The **community forum is the culminating event of the project.** At the forum, community members have a chance to hear some of the main ideas that have emerged from the study.
- Also, at the forum, community members will have a chance to **choose a topic or topics of interest to them, and meet in a small group to discuss ways the community could address the issue.**
- Issues include **growth, race relations, the Latino community, child care, health care, schools/education, and recreation.**
- **Child care** will be available at the forum.
- **Transportation** is available at three locations : **Pine Acres Community Center**, 6:00 p.m.; **Consolidated School** (corner of W. Jones & Lawrence), and a **location TBA** which will serve the Latino community.
- **Translation into Spanish** and participation in Spanish will be offered.
- **Refreshments will be served.**

Neighbors

Really good birthday cakes http://home.att.net/~davick/theocal

Start with really good cakes.
Hyphen Coffeehouse
135 S. Main St. F-V 567-0303



Cellular Plus
Loved Ones Treating? Get them a CELLULAR PHONE

SAVITA AUTHORIZED AGENT (formerly 3607) Security for them...Peace of mind for you!

CAROLINA-FREDDOM PLANS
FREDDOM 45 \$19.95 Month 45 minutes
Includes Call Waiting

NO LONG DISTANCE CHARGES
MANY EXCITING NEW PLANS!

1208 Laura Village Shopping Center ● Apex ● 363-9201

Many line of service and credit approval required for new customers. Carolina Freedom plan gives customers to use the Freedom plan. Prepaid minutes are subject to expiration. Funds are forfeited and no cash will be provided for any unused minutes. Minimum service charge for activation. \$19 activation fee applies. Service restrictions apply. See store for details. ©2000 Verizon Wireless. All rights reserved.

Community forum planned in F-V

A Community Forum will be held Thursday, Mar. 30, from 7-9 p.m. at Fuquay-Varina Middle School. Residents of Fuquay-Varina are invited to come and discuss issues of concern including growth, recreation, school success, youth issues and community partnerships. The forum is sponsored by Wake County Human Services Southern Regional Center and the University of North Carolina School of Public Health.

Over the past six months, a team of graduate students from the Department of Health Behavior and Health Education at UNC has been working on a project called a community diagnosis in Fuquay-Varina. The purpose of the project is to gather information about the quality of life in Fuquay-Varina from a variety of sources.

A very important aspect of the community diagnosis process is to find and listen to the "voices of people who accurately represent the community." This includes people who live and work in Fuquay-Varina, as well as town officials and service providers. Students have interviewed over 40 community members as part of the project, and the community forum is the culminating event. At the forum, community members will have the chance to hear some of the main ideas that have emerged from the study.

Child care will be offered, and transportation will be available at the following locations: Pine Acres Community, 6 p.m.; Consolidated School at the corner of W. Jones and Lawrence streets; apartment complexes including Ashbeyok Manor, Bay Tree, Bradford Place, Fuquay-Manor I & II, Hillcrest Apartments, Oak Grove, and South Gate Village Apartments. The apartment pickups will occur between 6:15 and 6:45 p.m. All participants can expect rides home on a similar schedule following the forum.

Translation into Spanish and participation in Spanish will be offered. Refreshments will be served. For more information contact Deborah Cerrio at 557-1056.

Bryan Properties in Holly Springs receives awards for development

COMMUNITY CALENDAR

PHONE BOOK RECYCLING

Recycle your outdated telephone directory. Fuquay-Varina Directory recycling locations will be set up at the Southern Regional Center, 1216 Academy St. and at the Wake Forest Town Hall, 401 Elm St. The drop-off site for Holly Springs is the Town Hall, 128 S. Main St. The recycling program runs through April 14.

FROG FEVER

Learn the differences between frogs and toads and why they sing so feverishly at Crowder District Park on Wednesday, March 29, 1-2 p.m. or 2:30-3:30 p.m. For ages 3-5 years old, accompanied by an adult. Pre-registration required. Call 662-2850.

FVES CULTURAL ARTS PROGRAM

March 29 is the FVES Cultural Arts Program. The Tarradiddle Players (music and drama). They will perform for K-2 at 9:30 a.m.

Chamber of Commerce. The cost is \$5/plate. Plates will be sold 11 a.m.-1 p.m. The church is located at the corner of Center and Main Streets.

FUQUAY-VARINA FORUM

The Community of Fuquay-Varina holds the key. Come and discuss issues that concern you, such as growth, diversity, recreation, schools, healthcare, safety, community partnerships, and youth issues on Thursday, March 30, 7-9 p.m. at the Fuquay-Varina Middle School. Refreshments will be served, and free child care will be available. Transportation will be provided from the Pine Acres Community Center at 6 p.m. and from the Consolidated School (corner of W. Jones and Lawrence St.) at 6:15 p.m. For more information, please contact Deborah Cerrito at 557-1056 or Pearl Friedberg at 933-5608.

SOFTBALL TRYOUTS

a blood drive on Tuesday, April 4, 2-7 p.m. at Fuquay-Varina Elementary School, 6600 Johnson Pond Rd.

VOTER REGISTRATION DEADLINE

If you need to register to vote or update your name, address or party affiliation, now is the time. The registration deadline for the May Primary is April 7. Stop by any Wake County Public Library to obtain a mail-in application/update form or call the Board of Elections at 856-6240 for more information.

WILLOW SPRINGS ELEMENTARY SPRING FESTIVAL

Willow Springs Elementary School will host their Annual Spring Festival on Friday, April 7, 6-9 p.m., rain or shine. Admission is free. There will be carnival games, food, contests, entertainment, karaoke, raffles and more! To get to Willow Springs Elementary from Fuquay, take 401 toward Raleigh, take an Exit on Duitch Boulevard

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FUQUAY

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APPENDIX D
Fuquay-Varina Community Forum Report

Fuquay-Varina Community Forum
30 March 2000
Fuquay-Varina Middle School Auditorium

Forum Report:

As part of the community assessment process, the team of student investigators must present the findings of the research in the context of a community forum. The purpose of this type of meeting is to:

- Present the major findings of the Fuquay-Varina Community Assessment
- Offer an opportunity for discussion on the topics presented
- Begin to identify action steps that can be taken to address these issues

The assessment was conducted by the team of students from the School of Public Health of the University of North Carolina at Chapel Hill at the request of Wake County Human Services and the Southern Regional Center located in Fuquay-Varina. A community assessment is based on the foundation that there are many influences on quality of life, which in turn influence the health of the community as a whole and of the individuals within that community. The project uses a variety of means to determine both the strengths and areas that need strengthening in a community.

Fuquay-Varina's community forum was prepared in conjunction with a planning committee made up of several students from the team, the preceptors of the study and community members. Although four community members were invited, only two participated in the planning. The forum planning committee met twice before the forum was held in order to discuss the agenda for the forum, promotion of the forum, and the date and location. Also on the planning committee agenda was a discussion about the expectations for the forum.

The planning committee agreed to the date of 30 March 2000 and chose the middle school as a central and accessible location. The committee recommended promoting the forum with flyers, radio announcements, and announcements in the two local newspapers (The Independent and The Neighbor). They also suggested contacting churches so that details of the forum could either be announced at services or in the church programs. Student from the team contacted these groups and sent announcements to 33 churches, 5 radio stations and the 2 local newspapers. Flyers were produced in English and Spanish and sent to individuals interviewed during the community assessment, and the students then took flyers to local businesses in Fuquay-Varina. In addition, Wake County Human Services arranged for transportation from local apartment complexes and the Pine Acres Community Center to the forum. The flyer distribution, contact with previous interviewees, and translation of the presentation into Spanish all helped to include the Latino residents.

On Thursday March 30, 2000 from 7:00-9:00 pm, the Fuquay-Varina Community Forum was convened at the Fuquay-Varina Middle School Auditorium. The following is a summary of the major themes presented.

Presentation of Themes

Drugs: The first topic presented was drugs and the Citizens Against Drugs task force that was created as a result of the drug problem. This is an area demonstrating the strength of the Fuquay-Varina community, which came together to effectively combat the drug problem.

Growth: The next issue presented was growth. People think it is good to grow economically but want to keep the small town atmosphere and not be like Cary or Apex. Traffic has increased, which means more lanes are needed on some roads, and a bypass is needed to redirect trucks around the downtown area. There is an effort to revitalize the historic downtown business area

along with the town's comprehensive development plan. The growth has also had an impact on schools, making them overcrowded. Overall, there is a desire to grow carefully.

Diversity: There are concerns about selected improvements being done in a segregated manner, for which only some benefit. Community members expressed a need for improved communication across different ethnic groups. Ethnic diversity is seen as positive and enriching the community, as a strength not a weakness. The railroad tracks seem to separate White from Black churches. Some feel tension when visiting each other's churches, though the churches come together when there is a need. African American and White children mingle at school and think that ethnicity is more of an issue for their parents than for them.

Health: There is a shortage of primary-care physicians and a lack of Medicaid services - doctors' schedules are booked. People are very pleased with the SRC, but there are some concerns about access, that it is only by appointment. People would like more walk-in service. No unusual patterns of illness are seen – only the usual diseases, diabetes, stroke.

Many brought up teen pregnancy as a problem from several perspectives. Last year 16 births were to teenagers under 19 years old, or 9.4% of all resident births.

Schools: Schools were frequently mentioned during interviews, with some concerned about quality and not keeping up with the rest of Wake County, especially at the Middle and High Schools. Kids are not being prepared adequately to move to the next level. Community groups actively support students and school activities. Children have a good opinion at the elementary level. Most students feel safe, and trust their teachers, but not all feel that teachers keep confidences.

Small Group Discussions

Small group discussions of the themes presented above were incorporated a technique called Force-Field Analysis. This technique allows the group to first to define the present situation (what is the problem), identify a goal, and then discuss the forces that either help the present situation move toward the goal or hinder the achievement of that goal. After discussing these forces, the group identifies either a helping force that can be strengthened or a hindering force that can be weakened, and based on their choice, defines an action that can be taken. Following the small group discussions, the meeting was reconvened as a large group and a spokesperson from each small group presented a summary of their discussion.

Topic	Goal	Action step
Diversity	Having affordable housing in Fuquay-Varina	Strengthen collaborative efforts that are in progress now. Raise awareness of these efforts and opportunities.
Health	Shortage of Doctors in F-V	1)Have government and community leaders seek out doctors (what will attract them?) 2) Build support among citizens to improve access. Start by contacting F-V New Century group to get them involved in this issue.
Schools	Need to decrease class size	Lack of money prevents more teachers, with higher salaries and more classrooms. How to get more money?? Look to big business to support schools more. Solving class size will take time to address.
Growth	Goal is to be more friendly to walkers	Helping force would focus more attention on town policy to prompt action: evaluate gaps in plan that hinder walking.

Closing remarks

Thank you for coming tonight. Thank you for making us welcome in this community and letting us explore Fuquay-Varina. Our report will be available in May. We are passing out post-it notes and invite you to write one thing on it about how tonight went. Did you learn something? Please write one thing that you either think, feel, like or would do differently. Post it on the posters next to the sign in table.

Fuquay-Varina Community Forum

Goal: To work with members of the Fuquay-Varina community and the Wake County Southern Regional Center (SRC) to organize a community forum as a setting in which community members can discuss issues that are relevant to them and their community.

OBJECTIVES

To work with Fuquay-Varina residents and the SRC to organize a community forum to:

- I. Share with the community the findings of the Community Diagnosis (CD) Team primary and secondary data analysis.
Method: Presentation of findings using overheads
- II. Provide community members an opportunity to provide feedback to the CD team about the team's findings and their relevance to the Fuquay-Varina community.
Method: Question and Answer opportunity after presentation and small group exercise
- III. Facilitate an environment in which Fuquay-Varina residents can dialogue and exchange ideas relevant to issues that are important to the community, as indicated by CD interviews during the forum.
Method: Small group exercise
- IV. Build community competence to address community concerns by:
 - A. Emphasizing the resources and assets of the community to address community concerns and citing specific examples the community's previous success in addressing community concerns.
Method: Presenting interview data and secondary data in the context of the success of Fuquay-Varina in dealing with its drug problem, from an assets versus deficits approach
 - B. Conducting a small group exercise to demonstrate one approach for problem solving.
Method: Force Field Analysis small group exercise

Fuquay-Varina Community Forum Advisory Meeting

March 3, 2000

11:00 pm – 12:30 pm

AGENDA

- I. Welcome/Greetings
- II. Discussion of the Purpose of the Community Forum
 - A. What We Expect
 - B. What You Expect
- III. Planning
 - A. Date and Time
 - B. Location
 - C. Transportation
 - D. Format
- IV. Community Participation
 - Publicity*
 - 1. Contacting Churches
 - 2. Contacting Business
 - 3. Contacting the media (newspaper and radio)
 - 4. Contacting the PTA
 - Refreshments
 - 1. Donations
 - Translation
- V. Volunteer Resources for the day of the forum
 - A. Set up equipment (overhead projector, tables/chairs, registration table) at the forum location
 - B. Set up and Serve Refreshments
 - C. Set up and man Registration booth

Fuquay-Varina Community Forum Advisory Meeting II

March 14, 2000
7:00 pm –9:00 pm

AGENDA

- VI. Welcome/Greetings
- VII. **Review of Minutes from the First Advisory Meeting (03/03/2000)**

Discussion of the Purpose of the Community Forum

- C. What We Expect...
- D. What You Expect...

Scheduling of the Forum

- E. Date: Thursday, March 30, 2000
- F. Time: 7:00 pm – 9:00 pm
- G. Location: Fuquay-Varina Middle School

Community Participation

Insuring a true Community Voice

- 5. How can we get the most participation?
- 6. Barriers to attendance?
- 7. Are there key people the community that we need to invite?
- A. Publicity
 - 1. Contacting churches, businesses, media (newspaper/radio), PTA
 - 2. Locations to distribute flyers in person (post office, school, grocers?)
 - 3. Volunteers to distribute flyers
- B. Refreshments
 - 2. Donations
 - 3. Volunteers to set-up and serve food
- C. Youth
 - 1. Participation (child care/distributing flyers/registration at forum)
 - 2. Child Care Volunteers

Transportation

- 1. For whom might this be a barrier?
- 2. Volunteers to help with transportation

Volunteers to set up the day of the forum (overhead projector, tables/chairs, registration table)

Thank You for your Time and Great Ideas! See you at the Forum!

To Fuquay-Varina Residents:

Thank You for welcoming us into your community and for coming out to commit your time and voice to improving the lives of your family and your neighbors.

We wish to thank the following for donations of money/service:

Refreshments

Bob Barker

Floral Arrangements

Flowers on Broad Street

Child Care Volunteers

Nicole Howard, Terrika NeSmith, Tasha Smith

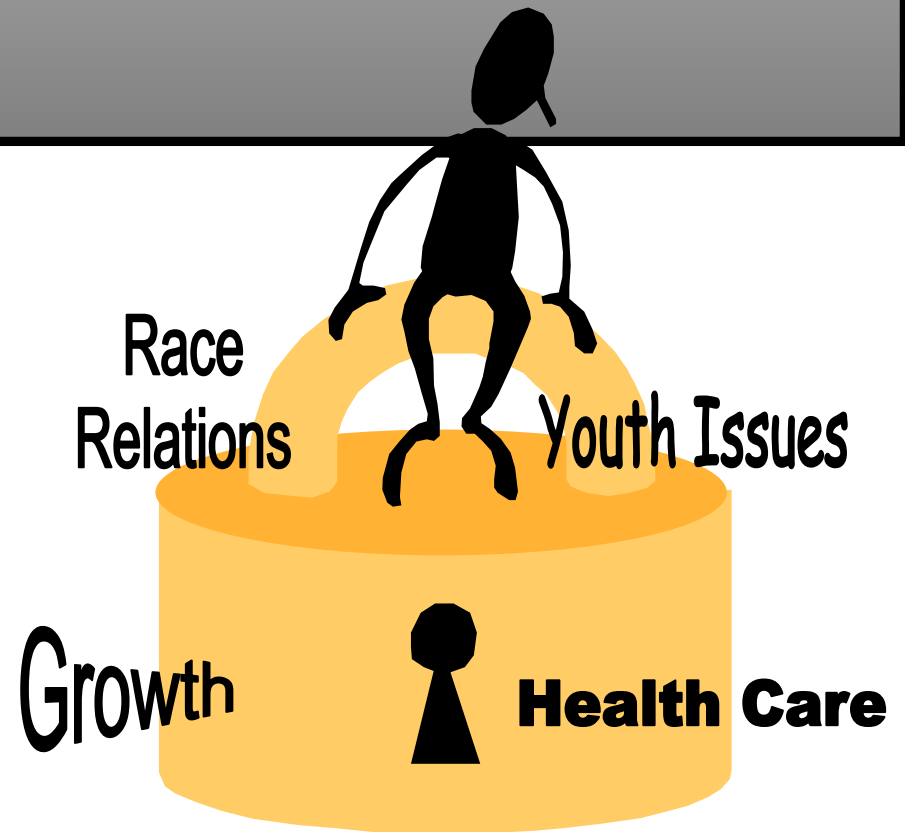
Fuquay-Varina High School Key Club

Equipment and Facilities

Roy Corpening and Fuquay-Varina Middle School

Special Thanks To:

***The Community of Fuquay-Varina Holds the Key
Working Together Towards Solutions***



Thursday, March 30, 2000
7:00 pm – 9:00 pm
Fuquay-Varina Middle School Auditorium

Sponsored by Wake County Department of Human Services and
University of North Carolina at Chapel Hill

Fuquay Varina Community Forum

AGENDA

7:00 – 7:10 pm	Check-in/Refreshments	Auditorium Lobby
7:10 – 7:30 pm	Fuquay-Varina Voices Susan Haws Felicia Solomon David Yum	Auditorium
7:30 – 7:35 pm	Overview of Small Group Activity Megan Raspa	
7:40 – 8:20 pm	Small Group Activity “Force Field Activity”	Classrooms*
8:25 – 8:45 pm	Group Reports Megan Raspa	Auditorium
8:45 – 9:00 pm	Wrap-Up Debbie Wood	Auditorium

Spanish Translation by Pearl Friedberg

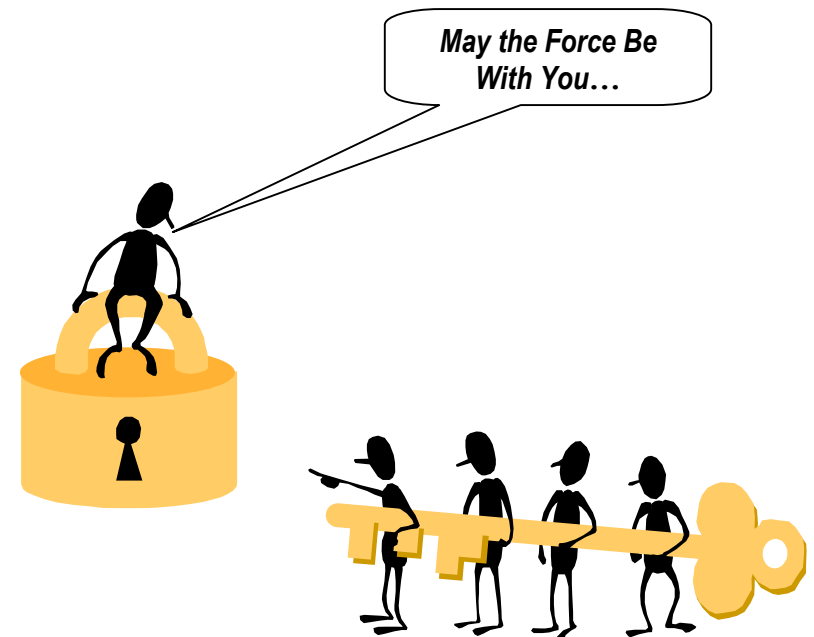
*Classrooms are located at the front entrance of the auditorium.

Small Group Topics

Group Leader Assignments

Topic	Group Leader
Growth	Felicia Solomon
Diversity	Debbie Wood
Health Care	Susan Haws
Schools	David Yum

Please refer to this list of topics to identify your “Group Leader” depending on



Forum Follow-up

Please fill out this form and place in the marked bowl outside the auditorium. Thank You.

Name:

Mr. Mrs. Miss _____

Mailing address:

Street/PO Box _____

City _____, NC Zip _____

Phone # _____

Please check one or both:

I would like to receive a copy of the minutes for this forum.

I would like to participate in future activities for the theme(s) I have checked below:

- Drugs Growth Diversity
 Schools Health

Forum Follow-up

Please fill out this form and place in the marked bowl outside the auditorium. Thank You.

Name:

Mr. Mrs. Miss _____

Mailing address:

Street/PO Box _____

City _____, NC Zip _____

Phone # _____

Please check one or both:

I would like to receive a copy of the minutes for this forum.

I would like to participate in future activities for the theme(s) I have checked below:

- Drugs Growth Diversity
 Schools Health

List of Forum Attendees Willing to Participate in Further Action

Name	Minutes	Drugs	Growth	Diversity	Schools	Health
Mrs. Lorraine Abels	X				X	
Mrs. Betty Rush	X			X		
Ms. Rosena West	X	X	X	X	X	X
Mrs. Martha Moore	X			X		
Mr. Kever Jackson Jr.	X					X
Mr. Nathaniel Titus	X					
Mr. Randy Senzig	X					
Mr. Nick Kanzler	X				X	
Mr. & Mrs. Jim & Shirley Hunsberger	X	X	X	X	X	X
Miss Joan Burton	X	X	X			
Mr. John Ellis	X		X			
Rev. Elaine Lilliston	X	X	X	X		
Mr. James A. Campbell	X				X	
Mr. William H. Harris	X					
Mrs. Dorothy Williams	X					
Mr. & Mrs. Matthew & Shannon Evans	X		X	X		

Written comments from forum participants (on post-it notes):

- Great job! Good understanding of the community. Small groups & methods used to address issues was great!!
- More meetings like this form of community.
- Celebrate the wonderful way the team has affirmed our super community!
- Positive community participation
- Housing that is being revitalized in Varina
- Great community input—Good facilitators
- Community communication & involvement
- Overall presentation was excellent. Good job presenting problems
- That our local gov't officials are truly interested in the environment & its effect on our quality of life
- I enjoyed Debbie's presentation informing the diversity session on assets, challenges and the goal. I will use this method :)
- "Good Job" Well organized and presented information on the needs of F.V.
- Community is growing & people are concerned that we proceed in the right direction
- The organization of the forum.
- Learned that there are a lot of people in town w/similar concerns & ideas
- Impressed by the information obtained from the community assessment and how it was presented
- A very good program!—too bad that more people weren't here for it

Community Forum

By Tammie Quick

Staff Writer (Fuquay-Varina Independent)

Last Thursday evening at Fuquay-Varina Middle School, a group of graduate students from the University of North Carolina's School of Public Health held a community forum.

The meeting was a chance for the group to present to the town their findings after a 6-month long assessment of the area. Their study concentrated on areas of strength as well as areas to be improved, all determined by the citizens who actually live in the community.

The team of students was invited by Wake County Human Services to conduct the assessment. A similar study by the same department at the university was done in 1996. Because the area is changing so rapidly, Wake County Human Services thought it was time for a follow-up to the previous findings.

The team conducted over 40 in-depth interviews with different people who live in the area. They started out in the obvious places, with town and community leaders. From there, they interviewed average citizens who don't hold any office. Over half of the people interviewed fit into the second category. Lastly they spoke with some youth of the area.

The areas that were concentrated on came from the citizens themselves, and they were growth, diversity, health care and schools. At the forum, around 50 citizens came to hear the results. Overall, the prevailing attitudes were positive. Although most people could find areas that needed improvement, almost everyone felt "good" about living in Fuquay-Varina.

After presenting their findings, the assessment team invited the forum participants to divide into smaller

discussion groups according to their interests. These groups then used a "force field activity" process to try and come up with concrete action steps to find solutions to some of their concerns.

The larger group reassembled later and a participant from each smaller group presented their findings. "The group reports went great," says Susan Haws, an assessment team member. "We had very diverse groups working together, and the people seemed excited to use a process to try to come to a solution."

Haws explains that the gist of such an assessment is that the team that conducts the study is made up of objective observers and listeners. "We strive to hear the voices of a representative sample," continues Haws, "we find lots of voices and get them to talk about the quality of life."

There were numerous businesses and groups in the community who served as liaisons to get the team going. Alan Muriera and Deborah Cerrito were the connections for the team at the Wake County Department of Human Services. Betty Rush and Wanda Denning were Forum Advisory Committee Members that often served as the team's connection with the community.

"Our hope is to get the people in the community talking about the issues, and we wanted to provide an opportunity to get all the parties to come together and work on these issues," says Haws.

A copy of their findings will be made available at the public library and the Chamber of Commerce. The community assessment team is tentatively scheduled to present a formal report at a future town board meeting as well.

Apparently from an outsider's point of view, things are going pretty well here. Haws says the entire team enjoyed very much getting to know the people in the town. "We really enjoyed the experience, and some of us are even thinking of moving there," she adds.