Lincoln Heights Chatham County

A Community Diagnosis including Secondary Data Analysis and Qualitative Data Collection

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Mary Beth Bell, Meredith Grady, Jennifer Hudman and Alisa Simon Preceptor: Paula Alston, Chatham County Health Department Field Coordinator: Sandra Crouse Quinn, Ph.D.

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TABLE OF CONTENTS

EXECUTIVE SUMMARY	1
INTRODUCTION	5
METHODOLOGY	7
CHAPTER 1: GEOGRAPHY	12
CHAPTER 2: HISTORY	14
CHAPTER 3: ECONOMIC OUTLOOK	16
CHAPTER 4: COMMUNITY PROFILE	19
CHAPTER 5: HEALTH	27
CHAPTER 6: COMMUNITY ASSETS AND RESOURCES	48
CHAPTER 7: EDUCATION	55
CHAPTER 8: POLITICS AND GOVERNMENT	58
CHAPTER 9: IMMIGRATION	61
CHAPTER 10: CRIME AND SAFETY	70
CHAPTER 11: DRUGS	75
CHAPTER 12: HOUSING	82
CHAPTER 13: RECREATION	86
CHAPTER 14: A CHANGING CLIMATE	90
CONCLUSION	92
REFERENCES	95
APPENDICES APPENDIX A: INTERVIEW GUIDES APPENDIX B: INSTITUTIONAL REVIEW BOARD REPORT APPENDIX C: LIST OF INTERVIEWEES APPENDIX D: MAPS APPENDIX E: COMMUNITY FORUM REPORT	

LIST OF TABLES

TABLE 5.1: ADJUSTED DEATH RATE PER 100,000 POPULATION FOR LEADING CAUSES OF DEATH IN CHATHAM COUNTY AND NORTH CAROLINA, 1991-199528
TABLE 5.2: NUMBER OF DEATHS FOR LEADING CUASES OF MORTALITY IN CHATHAM COUNTY BY GENDER AND RACE –1995
TABLE 5.3: REPORTED VIOLENT CRIMES IN CHATHAM COUNTY, 1991-199539
TABLE 5.4: CLIENTS SERVED AT THE FAMILY VIOLENCE AND RAPE CRISIS CENTER, 1994-1996
TABLE 5.5: NUMBER OF HEALTHCARE PROVIDERS IN CHATHAM COUNTY, 199545
LIST OF FIGURES
FIGURE 4.1: AGE DISTRIBUTION IN YEARS
FIGURE 4.2: POPULATION BY RACE/ETHNICITY
FIGURE 4.3: FAMILIES BELOW THE POVERTY LEVEL
FIGURE 4.4: AFRICAN AMERICANS BELOW THE POVERTY LEVEL22
FIGURE 4.5: UNEMPLOYMENT RATE
FIGURE 4.6: EDUCATIONAL ATTAINMENT25
FIGURE 5.1: SILER CITY WIC ENROLLMENT, 1990-1996
LIST OF MAPS
MAP 1.1: CHATHAM COUNTY, NORTH CAROLINAAPPENDIX D
MAP 1.2: LINCOLN HEIGHTS BOUNDARIESAPPENDIX D

EXECUTIVE SUMMARY

This document is a result of a community diagnosis of Lincoln Heights, a community in Siler City, North Carolina. The diagnosis was completed by four graduate students from the Department of Health Behavior and Health Education, School of Public Health, The University of North Carolina at Chapel Hill.

Community diagnosis is a process to understand what it is like to live in a given community. The process involves examining the culture and functioning of a community, exploring its strengths and assets, and discovering issues of concern to the community members. To gain a better understanding of Lincoln Heights, the first part of the project involved gathering census data for the community, county, and state. Secondary data was collected on the neighborhood's economics, history, environment, housing, education, health concerns, and other social issues, and then compared to county and state figures.

There were limitations to these methods of data collection. Wherever possible, data was collected on a community or town level. However, most of the health and community profile data was available only on a county-wide basis or by block group and may not be representative of the Lincoln Heights community, a very small neighborhood within the county. Data that is representative of Chatham County, and not necessarily Lincoln Heights, is so identified in the community profile and health sections of the document. Limitations to collecting secondary data included a lack of current information, especially with regard to immigration statistics and demographic characteristics. Another problem encountered was the lack of identification of statistics for Latinos within the specified census race categories, resulting in difficulty in distinguishing various racial indicators.

To obtain a more accurate picture of the community, the second portion of the project focused on a qualitative assessment of community members' opinions on the quality of life in Lincoln Heights. Interviews contained personal background questions as well as questions about life in the Lincoln Heights community. Questions were asked about the strengths and weaknesses of the community to determine what issues could be addressed in the future. Service provider questions focused on the type of services provided as well as the provider's perspective on the competence of the Lincoln Heights community.

The interview process was approved by the University of North Carolina School of Public Health Institutional Review Board (IRB), which must approve all requests from School of Public Health students or faculty to conduct research on human subjects. Interviews began in November 1997 and concluded in January 1998. Members of the community diagnosis team interviewed 23 community members and eight service providers. In addition, 46 community members completed short surveys on two separate occasions, and two focus groups were held in the community. Interviews focused primarily on the strengths of the community, as well as issues of concern, including housing, recreation, substance abuse, and the growth of the Latino population in the neighborhood. The community diagnosis process concluded in February with a community forum. A comprehensive report on the Forum is included in Appendix E of this document.

Limitations in the qualitative data collection process included time constraints imposed by the IRB process. The "snowball" sampling process of obtaining referrals yielded a homogeneous group, and difficulties in gaining entree to other, less accessible, community members. These two things were a barrier to gaining the perspective of a more representative sample. Finally, building the trust necessary to gain full disclosure about sensitive issues in a

community is a long, ongoing process and takes more time than the community diagnosis process allows.

This document was produced to present back to the community the comprehensive findings of the team about the Lincoln Heights community. The first half of the document includes sections representing our secondary data collection and analysis. Chapters include: Geography, History, Economic Outlook, Community Profile, and Health. The second half contains a review of qualitative data collected from interviews and is divided into chapters representing the salient issues facing the community, including: Community Assets and Resources, Education, Politics and Government, Immigration, Crime and Safety, Drugs, Housing, Recreation, and A Changing Climate.

During the interview process, community members shared with us many of their views, experiences, and concerns about life in Lincoln Heights. Some of the strengths and challenges that were identified as most important to the community are:

Commitment to Community: Members of the community are very active in the community and committed to Lincoln Heights. They also belong to, and take pride in, several strong local associations and organizations. Their affiliation with church and religious organizations is an important part of their lives.

Family Ties: The Lincoln Heights neighborhood has an extensive history, with multiple generation families still living there. There are bonds and family ties that run deep in the community.

Community Involvement: The strengths of commitment and roots in Lincoln Heights have led to several successful endeavors and achievements.

Growth of Latino Population: Over the past several years, the size of the Latino population has grown significantly in Lincoln Heights. This growth has impacted community resources, schools, and community services, as well as introduced difficulties in communication due to a language barrier.

Housing: The community continues to experience a shortage of affordable housing and expressed concerns about the condition of some of the homes and trailers in the neighborhood.

Youth Recreation: Community members expressed concerns about a lack of recreation for the youth of the neighborhood.

Crime and Drugs: Substance abuse was also indicated as a problem, both with the use and sale of illegal drugs occurring within the neighborhood.

Future Directions and Conclusions

Although numerous issues still exist in Lincoln Heights, much has changed since the last community diagnosis was completed there in 1994. Concerned citizens from the neighborhood have worked hard to build a healthier community and throughout this document we have tried to highlight their successes. Two organizations in particular have impacted the quality of life for residents, the Lincoln Heights Improvement Association and the Chatham Alumni Advancement Association.

As was mentioned previously, the Lincoln Heights Improvement Association has played a vital role in the neighborhood by building Washington Park and also by demonstrating that a small group of concerned residents could affect change. The Chatham Alumni Advancement Association also showed that strength in numbers could work when they pressured the local government to give them part of the old Chatham Middle School for use as a cultural center. Both of these groups have proved themselves capable of taking on the issues that face the neighborhood, and winning. It is our hope that these groups will continue to thrive and that they will be able to use this document to steer their course of action in the future.

INTRODUCTION

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Community diagnosis is a process to understand what it is like to live in a given community. The process involves examining the culture and functioning of a community, exploring its strengths and assets, and discovering issues of concern to the community members.

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To obtain a more accurate picture of the community, the second portion of the project focused on a qualitative assessment of community members' opinions on the quality of life in Lincoln Heights. Interviews began in November 1997 and concluded in January 1998.

Members of the community diagnosis team interviewed community members and service providers. In addition, community members completed short surveys on two separate occasions, and two focus groups were held in the community. Interviews focused primarily on the strengths of the community as well as the issues of concern for the community, including housing, recreation, substance abuse, and the growth of the Latino population in the neighborhood. The community diagnosis process concluded in February with a community forum.

This document was produced to present back to the community the team's comprehensive findings about the Lincoln Heights community. The first half of the document includes sections

on secondary data collection and analysis. Chapters include: Geography, History, Economic Outlook, Community Profile, and Health. The second half contains a review of qualitative data collected from interviews and is divided into chapters representing the salient issues facing the community: Community Assets and Resources, Education, Politics and Government, Immigration, Crime and Safety, Drugs, Housing, Recreation, and A Changing Climate.

METHODOLOGY

This section defines the process of data collection and analysis for both the quantitative and qualitative portions of the document. In the quantitative data section, sources are identified and limitations of the data are explained. In the qualitative section, strategies for the development of interview protocol, data collection methods, and the data analysis process are discussed. Limitations of the process are also discussed.

Quantitative Data

Historical data was collected through personal communications, past community diagnosis documents, and a review of historical literature. Geographical data was compiled after a review of the Chatham County Registry of Deeds and neighborhood windshield tours. Data for the economic and community profile sections was collected from U.S. Census Bureau and county reports. Health data was collected from documents prepared for the Chatham County Health Department by Chatham County Health Improvement Project (CCHIP).

There were limitations to these methods of data collection. Wherever possible, data was collected on a community or town level. However, most of the health and community profile data was available only on a county-wide basis or by block group and may not be representative of the Lincoln Heights community, a very small neighborhood within the county. Data that is representative of Chatham County, and not necessarily Lincoln Heights, is so identified in the Community Profile and Health chapters of the document.

Qualitative Data

Interview Protocol

The team developed an interview guide comprised of open-ended questions intended to elicit opinions, ideas and experiences of Lincoln Heights community members (see Appendix A: Interview Guides). Topics included family structure, neighborhood dynamics, ethnic issues, elderly, youth, quality of life, health, available services, education, employment, and living conditions. A separate interview guide was prepared for service providers focusing on services and community issues (see Appendix A: Interview Guides). In some cases, service providers were also community members and answered both sets of questions. The interview guides were modified after the first few interviews to include a question asking what changes have been observed in the community in the last few years. A survey instrument was also developed for use at two focus groups held in the community in conjunction with other community events (see Appendix A: Interview Guides). This short survey solicited opinions about the strengths and issues facing the community.

The interview guide contained personal background questions as well as questions about life in the Lincoln Heights community. Questions were asked about the strengths and weaknesses of the community to determine what issues could be addressed in the future. Service provider questions focused on the type of services provided as well as the provider's perspective on the competence of the Lincoln Heights community.

Before the interview process could begin, approval to conduct research on human subjects was required by the University of North Carolina School of Public Health Institutional Review Board (IRB) (See Appendix B: Institutional Review Board Approval). An application was submitted outlining the research protocol for the interview process, including an explanation

of the methods to be used to obtain subjects for interviews and for labeling audiotapes and interview notes to ensure confidentiality. Included with the application was a fact sheet for dissemination to subjects outlining the purpose of the project and interview, a request for an interview, and the name and telephone numbers of three project-related contacts. Draft copies of the interview guides for community members and service providers were also included with the application. Upon approval of the application, the team was permitted to conduct interviews.

Data Collection

Our preceptor was instrumental in facilitating the initial interview process. We were provided names of prominent community members and appropriate service providers whom we contacted to arrange interviews. The team also contacted several town officials to request interviews. During each interview, we asked both residents and service providers for referrals while disclosing that we would notify any referred subjects of the source of the referral. The team obtained a number of referrals through this "snowball" sample process. Members of the team also attended church services with community members at several local churches, where we met other residents who were willing to be interviewed.

Interviews were scheduled via telephone contact. We introduced ourselves, revealed how their name had been obtained, and explained the community diagnosis process. We requested a one-hour interview to discuss their perspective on the Lincoln Heights community. Most requests for interviews were granted.

Interviews began with a reading of the fact sheet, in accordance with IRB regulations, which was then left with the person interviewed. Two team members attended each interview.

One team member asked questions while the other took notes and attended to the tape recorder.

Most interviews lasted approximately one hour.

Over a three-month period, 31 interviews were conducted (see Appendix C: List of Interviewees). Eight of these interviews were conducted with service providers, and 23 were with Lincoln Heights residents. We interviewed 13 male and ten female community members, 18 African American and five Latino. Five were between 20 and 39 years of age; ten were between 40 and 59; eight were between 60 and 79.

The overwhelming majority of interviews were conducted with middle-aged African American community members. Barriers to obtaining more interviews with the Latino segment of the community included the team's lack of proficiency with the Hispanic language, time constraints imposed in attempting to interview two separate populations of the community, and difficulty in coordinating schedules with bilingual service providers, Latino community members, and team members for the purpose of translating interviews. Assistance in this area was rendered from a bilingual classmate, who accompanied two members of the team one Saturday morning and conducted four informal interviews with Latino residents outside their homes. The remaining Latino interviewee spoke English and was interviewed directly.

Two short surveys were conducted in conjunction with community gatherings. The first was collected at a meeting of community members who are working together to preserve the old Chatham County Middle School, where 16 surveys were completed. The second survey was conducted at an African American church, where we made arrangements with the deacon to hold a focus group one Sunday afternoon after church services. Thirty surveys were completed, and seven church members remained to participate in the focus group discussion.

Limitations in the data collection process included time constraints imposed by the IRB process. As well, the Christmas holiday/winter break fell in the middle of the interview period

and encumbered our ability to schedule as well as conduct interviews from mid-December through January 5th. The "snowball" process of obtaining referrals yielded a homogeneous group, and resulted in difficulties in gaining entree to other, less accessible, community members. This may have been a barrier to gaining the perspective from a more representative sample. Finally, building a strong relationship with the community takes more time than the community diagnosis process allows that may have affected the level of disclosure from community members to the team.

Data Analysis

After all interviews were completed, the process of analyzing the data began. The data collected from surveys was quantified and reported in charts and displayed at the community forum. The charts listed the community strengths, weaknesses, and changes identified in the surveys, as well as the number of community members who listed each.

Team members organized their notes from interviews and the focus group and read them to identify themes or key issues that appeared. The team then developed a coding system based on these key issues, and each team member coded their own and another member's notes, which were then compared for inter-rater reliability. Coded information was then compiled from all interviews according to the chosen themes. These themes are explored in the qualitative sections of the document, offering a "bird's eye view" of the Lincoln Heights community.

CHAPTER ONE: GEOGRAPHY

Lincoln Heights is located in the northern section of Siler City, Matthews Township,
Chatham County, North Carolina (See Appendix D: Maps). This small residential neighborhood
runs from North Avenue at its eastern boundary to Greensboro Avenue at its western boundary,
with 15th Street on the northeast border and Marsh Street on the northwest. The neighborhood
crosses Route 64 and encompasses Martin Luther King Boulevard as well as the streets between
Route 64 and Seventh Street to the south (See Appendix D: Maps).

Lincoln Heights is divided into two distinct areas with two types of housing -- site-built homes and mobile homes. The site-built homes are occupied primarily by the neighborhood's African American population. There are approximately 200 site-built homes, mostly one-story bungalows of wood or brick construction on small city lots. Front porches, traditionally a meeting place for neighbors in both southern and African American communities, are common. Many houses were built around the 1950s; some date back to the 1930s and earlier. There has been very little new construction in the past 15 years, although several lots are presently under residential development. Most properties are in good condition; others are in need of varying degrees of repair. The streets throughout this part of the neighborhood are paved. The neighborhood is serviced by the town's water and sewer systems.

Most of the neighborhood's Latino population resides in the 50-plus mobile homes in Lincoln Heights, most of which are located on one 10-acre parcel of land. Unmarked dirt roads provide poor access to these mobile homes, most of which are old and not in good condition.

There are no retail or service-oriented businesses found in Lincoln Heights, although it is a short drive to grocery stores, restaurants, schools, and shopping areas in Siler City. Located within the neighborhood are five churches, two cemeteries, two children's parks, a neighborhood

improvement center, a school, and an automobile junkyard. There are a notable number of vacant lots, some of which are owned by the city.

CHAPTER TWO: HISTORY

The early history of Chatham County and its transition from a rural area to a more urban and industrialized one have been well documented¹. We chose to focus on the recent and more salient aspects of history that have helped foster the development of the African American community in Lincoln Heights. In addition, we wanted to reflect on the recent emergence of a Latino population within the neighborhood because, as we shall see in future sections of this document, this new demographic group has significantly impacted the community.

According to a search of the Chatham County Registry of Deeds, much of the land now known as Lincoln Heights, was once owned by a small number of landowners including the Sears, Clapp, McDougle, and Dixon families. The property was subdivided in the 1920s into tiny building lots. In the 1950s, these lots were sold for ten dollars to African Americans in the neighborhood. The neighborhood was officially named Lincoln Heights in the 1930s by a local resident who was president of a now defunct neighborhood group. Naming the neighborhood was one aspect of a larger campaign to bring the community together in order to improve the living conditions of those living there (Personal Communication, November 1997).

The residents of Lincoln Heights, in addition to feeling a part of the history of Chatham County and Siler City, have an immediate sense of history and community cohesion that comes from multiple generations having lived in the neighborhood. Some of the areas throughout Lincoln Heights have multigenerational members of the same family living in close proximity to

¹ Up until the mid-1770's Chatham County was considered a part of Orange County. When the residents decided to secede in 1771 (Chatham County: 1771-1971, Hadley, 1976), the borders of what we know call Chatham County were formed. It took another 100 years for Siler City to be established in the county. Siler City' growth can be traced to the development of the railroad that passed through Matthews Crossroads. It was from this small railroad town that Siler City developed (The Town of Siler City 1887-1987: A History of the Towns Centennial Anniversary on March 7 of 1987, Hadley, 1987; Land Development Potential Study, Chatham County, N. C., North Carolina Department of Local Affairs. Division of Community Planning, 1970). More historical information can be found in previous Community Diagnosis documents including the 1993 document entitled *Lincoln Heights: A Siler City Community* written by Bors et al. and *The Latinos of Siler City*, written in 1996 by Levin et. al..

each other. In addition, many of the neighborhood streets have been named after long time residents who still have family living in the area.

There is an attempt in Lincoln Heights now to preserve some of the unique history of the neighborhood through an effort to keep the Chatham Middle School, which is located in the neighborhood, as a cultural center for African Americans (Personal Communication, September 1997). The school officially closed earlier this year (1997), although it is still being used as an alternative school for children with special needs. Many of the residents of Lincoln Heights attended that school before desegregation and want to maintain it as a symbol of their common history.

The Latino community in Lincoln Heights is relatively new. The first Latinos moved to Chatham County, and in particular to Siler City, in the middle to late 1980's. They were attracted to the area by the promise of jobs. Their numbers have continued to grow in Siler City with many of the new immigrants settling in Lincoln Heights in houses and trailers formerly occupied by African American members of the neighborhood. This has impacted the population characteristics as well as the sense of community of the predominantly African American neighborhood (Levin et al, 1997 and Bors et al, 1993).

CHAPTER THREE: ECONOMIC OUTLOOK

The majority of the economic data available focuses on Chatham County and Siler City, although where possible, specific information on Lincoln Heights has been included. In many cases, the state, county, and even city economic data are not specific enough to accurately reflect the true status of the Lincoln Heights community.

More than 46% of Chatham County residents travel to neighboring counties for employment. However, 15% of Siler City residents commute outside of the county to work. Thirty-one percent of Chatham County workers are employed in professional and other services, and only 27.6% in manufacturing, while Siler City residents are primarily employed in manufacturing (41.4%), professional and other services (19.8%), and wholesale and retail trade (16.5%). Major local employers are found in Siler City's strong manufacturing base, which ranges from furniture manufacturers to meat and poultry processing plants. Many of these jobs employ unskilled laborers at low pay. The largest employers include Collins & Aikman (upholstery fabrics, 650 employees), Glendale Hosiery (hosiery, 700 employees), Townsends, Inc. (poultry, 1,050 employees), and Mid State Farms (poultry, 612 employees). (Research Triangle Region Statistical Data File, 1996.)

Sources of employment for Lincoln Heights residents differ from the county data. While 44% of Lincoln Heights residents work in manufacturing, an estimated 17.3% are employed in agriculture and another 13.4% work in retail (Levin et al, 1994). Lincoln Heights, which has the largest African American population in Siler City and a growing Latino population, reflects the economic disparity between its residents and the more affluent areas of Siler City.

The Latino population is growing rapidly in Chatham County; it is estimated that 3,000 Latinos now live in Siler City alone. Many of these residents have come to Siler City because of

the availability of employment opportunities requiring little skill, mainly in the poultry processing plants. A 1994 telephone survey of major Siler City manufacturers determined that fully one-third of the workforce in Siler City were Latino workers (Levin et al, 1994).

The plants in Siler City continue to attract a large Latino population because, although work is difficult and the conditions dangerous, it is considerably better than in their native countries and the wages are higher. Manufacturers are employing an increasing number of Latinos willing to work for low wages. The African American community has historically held these jobs in Siler City, and this has caused some friction between the two populations. This situation will be addressed in later sections of this document.

Chatham County was ranked sixteenth in the state in gross farm income in 1994, with farm income of \$115.3 million. Agribusiness (food, fiber, and forestry industry) accounted for 31% of the total Chatham County income in 1994. Three of the top ten poultry companies in the world conduct business in Chatham including three processing plants, four hatcheries, and three feed mills. Land in farms (acres) decreased by 3.6% from 961 in 1987 to 926 in 1992 (Chatham County, North Carolina Statistical Abstract, 1997).

The average annual value per farm acre increased 30.6% from 1,275 in 1987 to 1,666 in 1992. The average annual value of farm products per farm also increased significantly from \$160,661 in 1987 to \$200,210 in 1992, an increase of 24.6%. It is important to note that while the total value per acre and total value of farm products increased, over the past twenty years harvested crop land decreased 17%. A substantial percentage (17.8%) of Lincoln Heights residents are now employed in agriculture. These jobs should remain stable as long as the value of farm products remains lucrative. Should this change, it may become more economically

advantageous for farmers to sell land rather than remain in business, resulting in a loss of agricultural jobs.

Non-residential construction value in Chatham County during 1996 was \$15.8 million, nearly double the previous year's value of \$8.8 million. Residential activity, measured by the number of permits issued, jumped from 60.4% of total construction in 1991 to 89.5% in 1992 and remained close to that rate for the next three years. It then decreased in 1996 to 73.8%, for a value of \$65.7 million, with a total construction value of \$81 million that year (Chatham County, North Carolina Statistical Abstract, 1997). In contrast, construction in Lincoln Heights has been nearly stagnant, with only a few residential homes under construction in the last five years.

As development expands throughout the area, Siler City will continue to enjoy exceptionally low unemployment rates (currently 3.2%) and employment opportunities in construction and manufacturing will increase, though in the form of low-paying jobs. As this trend continues, Lincoln Heights will also benefit from Chatham County's consistently strong economic base.

CHAPTER FOUR: COMMUNITY PROFILE

Lincoln Heights, as determined from windshield tours, visits, and conversations with community members, is predominantly an African American neighborhood with a growing Latino population. The 1990 U.S. Census² data for Lincoln Heights was obtained from U.S. Census Track 204, Block Group 2. A map of Siler City, with the dividing lines of the block group represented, shows that the entirety of Lincoln Heights is included within the boundary of Block Group 2. However, also within Block Group 2 is a large area north of Lincoln Heights, which appears to be more rural and sparsely populated. The data include 639 Whites in the block group, most probably living in the area north of Lincoln Heights and not within the neighborhood's boundaries. Therefore, this section will not include breakdowns by race/ethnicity for Whites since they are not representative of the observed makeup of the community. However, when totals for the community are discussed, that analysis will include the data on Whites.

Similarly, data for Latinos is limited from the 1990 U.S. Census and appears to be largely inaccurate and outdated. For the purposes of this analysis, the separate category³ from the Census for Hispanics is used whenever possible in assessing totals for the community. However, in some cases, data appeared to be more accurate and was only available for the "Other" category. In those instances, that is what will be used for comparison. Given these inconsistencies, most of the comparison in this section will be for totals at the community, county and state levels, and comparisons by race/ethnicity will typically examine only the

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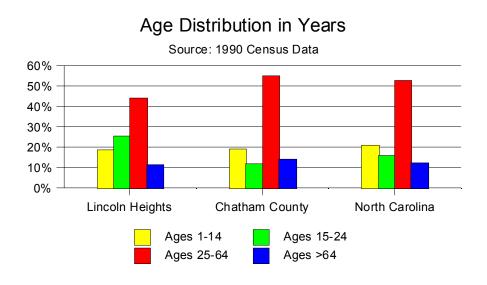
² Unless otherwise noted, all data presented in this section was calculated using the 1990 U.S. Census data for Block Group 2, Chatham County, and the state of North Carolina.

³ Data broken down by race for the census falls into five categories: White; Black; American Indian, Eskimo or Aleut; Asian or Pacific Islander; and Other. Other refers to all persons exclusive of the aforementioned categories, in addition to those with write-in responses such as mixed, interracial, multiracial, multiethnic, Wesort and Spanish/Hispanic. The Census treats people of Mexican, Cuban, and Puerto-Rican descent as a separate category. Persons who write in origins from Spain and other Latin and South American countries are considered Other race (U.S. Census, 1993).

African American population. Hopefully, primary data collection will present a more accurate picture of the growing Latino population in our community.

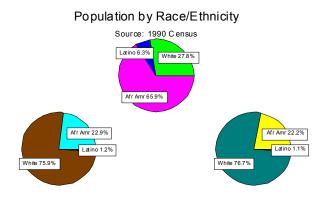
Population Distribution by Sex and Age

The sex distribution for the state, Chatham County, and Lincoln Heights are very similar. Across all areas, women outnumber men and the typical division is approximately 49% male and 51% female. However, Lincoln Heights differs from the state and county regarding age distributions (Figure 4.1). The largest difference is seen among the 15-24 age group. This group comprises 26% of Lincoln Heights, but only 12% and 16% of the total population for the county and state, respectively. As will be seen when discussing education, a smaller percentage of Lincoln Heights residents attend college, which could explain the higher proportion of persons aged 15-24 within the community. The implications of this fact are a larger population in Lincoln Heights in search of employment and more persons living in each household than in the county or state. These particular statistics will be examined more thoroughly later in this section.



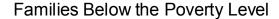
Population Distribution by Race

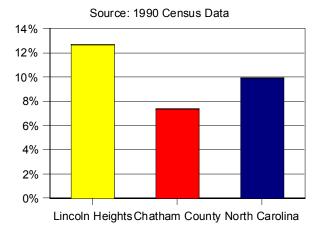
The race distribution for Lincoln Heights differs dramatically from the county and state (Figure 4.2). According to the census data, 66% of Lincoln Heights residents are African American as opposed to about 23% for the county and in the state. However, the population distribution by race/ethnicity states that the community is 28% White and 6% Latino. Given what is known about Lincoln Heights, the Latino population is substantially larger and the White population is significantly smaller than the Census data indicate. The data also show that the county and state report a Latino population of only 1%, compared to a Latino population of 6% for Lincoln Heights. However, is it estimated that currently 38% of Siler City residents are Latino (Chatham County Community Health Improvement Project, 1997).



Income, Poverty Level, and Employment

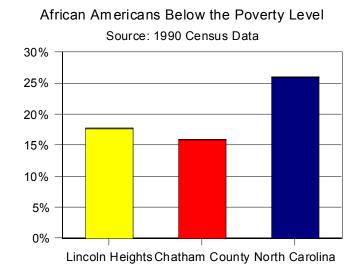
The median family income for Lincoln Heights is \$30,288. Although this is less than income at the county (\$32,201) and state level (\$31,548), the difference is not particularly significant and shows that the community has a similar income to the surrounding areas. However, a greater percentage of families in Lincoln Heights fall below the poverty level (13%), than in the county (7%) and state (10%) (Figure 4.3).



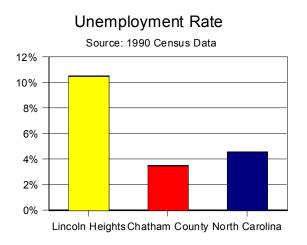


When analyzing persons below the poverty level by race/ethnicity, 18% of African Americans in Lincoln Heights are below the poverty level (Figure 4.4). Although this number is higher that the county percentage of 16%, both the county and Lincoln Heights have less African Americans below the poverty level than the state, in which one quarter (26%) of African Americans are below the poverty level. The Census data reports that 0% of Latinos in Lincoln Heights are below the poverty level, but no generalizations should be based upon that statistic.

Figure 4.4



Lincoln Heights community members in 1990, had an unemployment rate of 11%, more than double the county (4%) and state (6%) unemployment levels (Figure 4.5). As was discussed in the economic section of this document, Siler City has a strong manufacturing base with numerous local employers. However, the Lincoln Heights community may not be benefiting from Siler City's growing job opportunities, even though as noted earlier, Lincoln Heights has a lower percentage of African Americans below the poverty level than the state.



Composition of Households

When analyzing numbers of persons in households⁴ across Lincoln Heights, Chatham County and the state, Lincoln Heights has the highest percentages of households with four or more persons. Thirty percent of households in the community are comprised of 4-5 persons as compared to about 21% at the state and county levels. Lincoln Heights also has a significantly smaller percentage of 2-person households (23%) compared to 36% and 34% at the county and state level, respectively.

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⁴ A household is defined as "all persons who occupy a housing unit... The occupants may be a single family, one person living alone, two or more families living together, or any other group of related or unrelated persons who share living arrangements" (U.S. Census, 1993).

Ten percent of households in Lincoln Heights are categorized as "male/female householder, no wife/husband present, with own children under 18 years." This is typically referred to as a single-parent household. The percentage of single-parent households for the county and state is smaller, around 7%. It is also notable that of the 82 single-parent households recognized in Lincoln Heights, all are headed by women. There is more variance seen in the county and state, although a large majority (around 85%) of these households are also headed by women.

Home Ownership

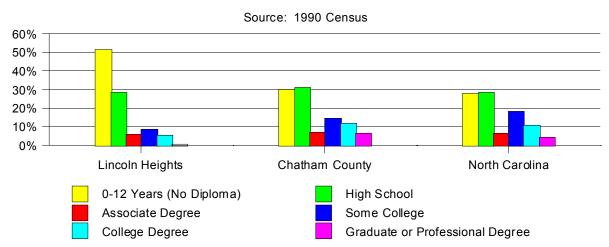
The number of persons renting or owning homes does not vary drastically across the three comparison populations. Lincoln Heights has a larger proportion of residents who rent their homes than Chatham County or the state. Thirty-nine percent of Lincoln Heights residents rent their homes, compared to 23% for the county and 32% for the state. Although it is not represented in the Census data, the Latino population in Lincoln Heights largely resides in rented trailer homes on a large, one-owner plot of land.

Sixty-five percent of African Americans in the Lincoln Heights community own their homes as opposed to renting. This statistic differs from the state and county data. While 73% of African Americans in Chatham County own their homes, only 50% do at the state level. From this data, we could assess that a substantial majority of African Americans in Lincoln Heights have significant roots in their community, more so than at the state level. This sense of community in Lincoln Heights will be addressed in later sections of this document.

Education

As a whole, the Lincoln Heights community is less educated than the county and state. Fifty-two percent of the community above the age of 25 have no high school diploma, which is in sharp contrast to the county (30%) and state (28%) (Figure 4.6). However, the percentages of those with only high school diplomas are almost the same across the three comparison populations (around 30%). Regarding post-secondary education, there is a notable difference between Lincoln Heights and both the county and state. Only 9% of Lincoln Heights residents have attended any college and only 5% are college graduates. Those percentages are almost doubled at the county and state level, with more persons attending college and obtaining degrees.





By race/ethnicity, the African Americans in Lincoln Heights do not vary drastically in educational attainment from the county and state. In fact, Lincoln Heights has an almost equal percentage of African Americans with high school diplomas as the county and state (around 30%). Similarly, five percent of African Americans in Lincoln Heights have college degrees as

compared to 6% for the county and 7% for the state. According to the Census data, all (100%) of the Latinos in Lincoln Heights have less than a high school education.

Summary

The secondary data presented in this section provides some conflicting ideas about the socio-demographics of Lincoln Heights. As a whole, the community is poorer and less educated with fewer persons employed than Chatham County or North Carolina. However, when specifically examining the African American population, a different theme emerges. The socio-economic status and education levels of the African Americans in Lincoln Heights are not much lower than in the county and state.

It is difficult to draw many conclusions given the challenges of data collection for the Latinos in Lincoln Heights and the inflated area that the block group for Lincoln Heights encompasses. Primary data collection and interviews will yield further information. In addition, they will reveal more of the true identity of the Lincoln Heights community and the persons that comprise it, as well as help to answer the questions raised by the data in this section.

CHAPTER FIVE: HEALTH

This chapter examines the health indicators in Chatham County and North Carolina, including leading causes of death with age, race and gender specific data where possible, and leading causes of morbidity. Unless otherwise indicated, all rates are per 100,000 population. Environmental health issues, availability of health services, barriers to accessing services, and transportation issues related to access to care are also addressed. Finally, indicators of social health, including substance abuse, violence and crime, domestic violence, child abuse and child sexual abuse, and poverty are discussed.

Where relevant, comparisons are made with the Healthy People Year 2000 goals as established by the U.S. Public Health Service in 1987 (North Carolina Department of Environment, Health, and Natural Resources [DEHNR], 1997). Where possible, health information specifically regarding Siler City and/or Lincoln Heights is highlighted. This section is not an all-inclusive summary of the health of Chatham County. We have focused only on subjects that are especially relevant to Lincoln Heights or represent marked changes in Chatham County in recent years.

Unless otherwise cited, the data presented in the Health Section of this document are derived from the document, "The Health of Chatham 1996-1997." This report of the Chatham Community Health Improvement Project (CCHIP) was prepared by the Center for Public Health Practice, School of Public Health, University of North Carolina at Chapel Hill. The CHHIP report also includes the findings of a random telephone survey of 403 Chatham County residents who were asked specific and general health and behavior-related questions. The survey was performed by the North Carolina Behavioral Risk Factor Survey System (BRFSS) in October and November of 1996. Within this section, the survey will be referred to as the BRFSS survey.

Mortality and Morbidity

Chronic Diseases

One-half of the leading causes of death in Chatham County are chronic diseases including heart disease, cancer, cerebrovascular disease, chronic obstructive pulmonary diseases, and diabetes (Table 5.1). Some factors that contribute to chronic disease are an unhealthy environment, little or no access to quality health care, family history of chronic disease, and lifestyles or behaviors that promote ill health.

Table 5.1: Adjusted Death Rate per 100,000 Population for Leading Causes of Death in Chatham County and North Carolina, 1991-1995

CAUSE OF DEATH	CHATHAM	NORTH	YEAR 2000	
	COUNTY	CAROLINA	OBJECTIVE	
Heart Disease	192.1	222.7	248.9	
Cancer	173.3	178.0	204.7	
Unintentional Injury	48.9	40.9	29.3	
(Overall)				
Stroke	47.6	54.6	62.4	
COPD*	26.2	30.8	25.5	
Pneumonia/Influenza	22.2	23.6	-	
Diabetes	21.4	19.3	20.3	
Homicide	13.6	11.8	7.2	
Suicide	13.3	11.9	10.5	
Septecemia	6.9	7.1	-	

*Chronic Obstructive Pulmonary Disease

Sources: The Health of Chatham 1996-1997, DEHNR, 1997

Heart disease was the leading cause of death in Chatham County and North Carolina and the leading cause of hospitalization in Chatham County from 1991-1995. In the county, the Non-White mortality rate from heart disease was 266.3 and 307.2 for Whites. Cardiovascular mortality rates for men were 1.5 times higher than for women. Elevated blood cholesterol is a major risk factor for heart disease and can be identified through cholesterol screening. Nearly 60% of Chatham residents indicated in the BRFSS survey that they had received a cholesterol

test within the past two years, while 30% indicated that they had never had a cholesterol test.

The second leading cause of death in Chatham County was cancer (all types combined). Lung cancer was the most common cause of cancer-related death in the county, with 30 deaths in 1995 (State Center for Health Statistics [SCHS], 1995). Chatham's death rate of 35.1 from breast cancer was higher than both the state rate of 28.3 and the Year 2000 goal of 20.6. There were ten breast cancer-related deaths in 1995 in Chatham County, eight White women and two Non-White women.

Sixty-five new cases of cancer were reported in 1995 in Siler City (29 male and 36 female; 49 White and 16 African American). There were also 33 deaths from cancer in Chatham County in 1995 (17 male and 16 female; 24 White and nine African American).

The fifth leading cause of death in Chatham from 1991-1995 was chronic obstructive pulmonary disease (COPD), or chronic lung conditions such as emphysema, asthma, and chronic bronchitis. The leading cause of COPD is exposure to tobacco smoke. Last year, 17 people died in Chatham County from COPD (Table 5.2).

The seventh leading cause of death in the county was diabetes, with 12 cases in 1995 resulting in death. Diabetes is more prevalent among African Americans, Latinos, and Native Americans than among Whites. However, the prevalence of this disease is not easy to measure; approximately one-half of the people who have diabetes are unaware of their condition.

Other Causes

The third leading cause of death in Chatham County from 1991-1995 was unintentional injury; including motor vehicle accidents, fire, falls, burns, drowning, and occupational accidents. There were 28 deaths in this category in Chatham County in 1995, which had an adjusted death rate almost double that of the Year 2000 goal.

Table 5.2: Number of Deaths for Leading Causes of Mortality in Chatham County by Gender and Race - 1995

		White	White	Non-White	Non-White
Cause	Total	Males	Females	Males	Females
Cancer, All Types	103	40	39	14	10
Ischaemic Heart	90	39	31	10	10
Disease					
Diseases of the					
Respiratory System	43	23	12	3	5
Cerebrovascular	31	10	14	3	4
Disease					
Injury and Poisoning	28	13	4	8	3
COPD*	17	10	3	2	2
Diseases of the					
Nervous System	13	8	4	0	1
Diseases of the					
Digestive System	13	4	5	2	2
Infectious and					
Parasitic Diseases	12	8	1	1	2
Diabetes	12	7	3	0	2
Homicide	5	2	0	3	0

^{*}Chronic Obstructive Pulmonary Disease

Source: North Carolina State Center for Health Statistics (SCHS)

Infectious Diseases

Infectious diseases include AIDS, sexually transmitted diseases, tuberculosis and rubella. There were 12 deaths in Chatham County in 1995 as a result of infectious diseases. Overall infectious diseases have not been a significant problem in Chatham County, although recent outbreaks are requiring increased attention.

The incidence of tuberculosis in Chatham County has been lower than in the state during the last five years. In 1995, the incidence rate for tuberculosis in Chatham County was 2.3; in North Carolina it was 7.2. However, with the growing Latino population, Chatham County is beginning to see a re-emergence of tuberculosis as a health problem.

Until 1996, rubella was rare in North Carolina, with only one case in 1994 and six in

1995. In 1996, Chatham County experienced one of the worst outbreaks of rubella for any county of its size in the nation, with 62 of the 85 cases in North Carolina occurring within the county. This prompted the Chatham County Health Department to work with local industry to prevent and control the disease. Many businesses began to require proof of rubella immunization and referred new employees to the Chatham County Health Department.

In 1995, Chatham County recorded three AIDS-related deaths, all White males, for a mortality rate of 7.0, while North Carolina's AIDS mortality rate was 13.8. In Lincoln Heights, both prostitution and illegal drug use have been identified as concerns by residents. These high-risk behaviors may result in higher HIV rates in future years.

While rates of hospitalization for infectious diseases are similar at the county and state level, incidence of sexually transmitted diseases have been of great concern to Chatham County health officials. In the early 1990s, both Chatham County and North Carolina saw a significant increase in incidence of chlamydia, gonorrhea, and syphilis. In 1995, through an intensive effort on the part of both state and local officials to reverse this trend through identification and treatment of syphilis cases, the incidence rates for all sexually transmitted diseases fell to their lowest in three years. In Chatham County in 1995, the incidence rate for gonorrhea was 153.8, significantly lower than the state's rate of 233. However, the incidence rate for teens in the county during the same time was 866.

Environmental Health

Water, Sewer, and Air

The Rocky River and Jordan Lake Impoundment are the two major water sources for Lincoln Heights and the rest of Siler City. Water quality is adequate and Lincoln Heights

residents do not have any barriers to water access. However, Chatham County's production of phosphorous from manure may exceed plant uptake and contribute to phosphorous deposits in waterways, which could eventually negatively affect the water sources for the city.

In Chatham County, 70% of the soil was considered either marginally suitable or unsuitable for waste disposal systems. As a result, from 1989-1993, 202 permits for sewage disposal systems were denied. However, Lincoln Heights is served by the Siler City sewer system and septic tanks or alternative waste management systems are most commonly installed.

Air quality diminished dramatically in Chatham County between 1985, with particulates measuring 752 tons, and 1990, with measurements as high as 2,294 tons. Increases in sulfur dioxides, nitrogen oxides, hydrocarbons, and carbon monoxide were indicated. The large concentration of industry in the county such as the pulp and paper plant, chemical plants, furniture and textile mills, and power plants in Siler City, as well as the coal fire burning plant in Chatham County contribute significantly to the problem of poor air quality (Bors et al, 1993).

Rabies

In 1995, only one case of rabies was identified in Chatham County and in 1996, six cases were identified. A striking increase has been seen recently and 70 cases of rabies were reported in Chatham County between January and April of 1997, resulting in 26 potential human exposures. The variety of animals that have contracted rabies has also increased, with cases found among raccoons, skunks, foxes, bats, and a dog. The Department of Health's animal control program responds to calls pertaining to animal bites and strays and operates an animal shelter in efforts to control rabies exposures.

Lead

Lead poisoning is a health hazard for children who may be exposed to lead paint in older

homes and schools. The North Carolina State Laboratory has been offering blood analysis at no charge since 1994, resulting in an increase in lead testing of children under age two to detect exposure early, as corrective action is more successful at an earlier age.

Maternal and Child Health

Chatham County appears to be doing quite well in terms of reproductive health until, as has been seen with many other categories of health, the data are broken down by race.

Reproductive health problems are more prevalent for the Non-Whites of the county. This is particularly important to Lincoln Heights because the demographics of the neighborhood include a substantial number of African Americans and Latinos.

Pregnancy Rates and Live Births

From 1985 through 1995, the general pregnancy rate in Chatham County was slightly lower than or equal to the state. In 1995, for example, the pregnancy rate in Chatham County was 73.1 compared to a rate of 80.1 for the state. In terms of teenage pregnancy, Chatham County's 1995 rate for pregnancy among Non-White teenagers (107.4) is significantly lower than the North Carolina average (134.2). Among Whites, however, the teenage pregnancy rate for Chatham County (74.2) is slightly higher than the State average (72.4). The county remains, far above the Year 2000 goal of teenage pregnancy rates of 63.0 for White teenagers and 86.7 for Non-White. It is important to note that unlike in other counties across North Carolina, there are no school programs in the county for teenage mothers or fathers. In addition, there are no daycare centers specifically targeted at caring for children of teenage parents still enrolled in school.

Low Birth Weight and Infant Mortality

According to the North Carolina Child Advocacy Institute's Children's Index, babies who weigh five and one-half pounds or less at birth are "40 times more likely to die in the first month of life and five times more likely to die before their first birthday than other babies" (North Carolina Child Advocacy Institute, 1994). In addition, low birth weight babies more often suffer from health complications and require expensive medical treatment. From 1985 to 1992, the rate of low birth weight babies born in Chatham County (7.1) was lower than the state (8.1). However, there is a disparity among Whites and Non-Whites both in the state and in Chatham County. In 1995 the rate of low birth weight babies for Whites in Chatham County was 6.5 compared to 12.5 for Non-Whites that same year.

Chatham County has a significantly lower infant mortality rate, which is measured as the proportion of babies who die within their first year (North Carolina Child Advocacy Institute, 1994, pg. 8), than the state. While this rate has been decreasing significantly over the last ten years, the most recent data available show Non-White babies dying at a rate 15 times higher than that of White babies. In 1995, the rate of infant deaths for Whites in Chatham County was 2.3 while the rate for Non-Whites was 28.6. The Non-White infant mortality rate is far above the Year 2000 goal of 8.7 infant deaths per 1,000 Non-White births.

Abortion

Over the past ten years, the general abortion rate for Chatham County (17.1) has been consistently lower than the North Carolina rate (21.0). The abortion rates for teenagers, however, are much higher in Chatham County than in the state. In the year 1994-1995, the abortion rate for teenagers ages 15-19 in Chatham County was 31.7 compared to 29.4 for the state. This is particularly interesting given that there is not a single health care provider in the county who performs abortions.

Prenatal Care

The purpose of prenatal care is to "identify risk factors that may create problems for the pregnant women or the newborn, and to administer care to reduce the effect of those risks" (CCHIP, p. 62). The number of Non-Whites in Chatham County receiving inadequate or no prenatal care (16.2) is significantly larger than the number of Whites in the county receiving similar care (2.6).

Children and Youth

Many necessary adolescent health services including substance abuse education, family planning services and prenatal care are available in Siler City through the Siler City Public Health Department. As previously indicated, however, there are no abortion providers or childbirth delivery sites in the county.

Chatham County ranks fourteenth in the state in terms of number of children living in poverty (12%) and thirteenth in the state in terms of number of children receiving Aid to Families with Dependent Children (AFDC) benefits (8%). In response to these and other problems facing the children of Chatham County, the Chatham County Partnership for Children was formed to administer funds directed at improving the lives of youth in the county. This coalition of people from throughout Chatham County supports programs such as The KIDSSCOPE/preschool mental health outreach program offered by the Community Mental Health Center and The Surrogate Fathers Program offered by Save Our Brothers, Inc.

Mental Health

Over the last six years, the Orange-Person-Chatham Mental Health, Developmental

Disability and Substance Abuse Authority (OPC) has seen an increase in the number of people

seeking mental health care. The majority of people seeking help from OPC do so because of serious mental illness (31% in 1996), substance abuse (15% in 1996), or behavioral disorders (14% in 1996). More White adults have been served by OPC than any other racial group, with a slight majority of clients being male.

Unfortunately, these numbers do not necessarily accurately reflect the number of people affected by mental health disorders because many people never request help. It is difficult, therefore, to have an accurate picture of the mental health status of residents of Lincoln Heights.

The suicide rate for Chatham County is 12% higher than the North Carolina rate. The adjusted suicide rate for Chatham County for the years 1991-1995 is 13.3 while the North Carolina rate is 11.9. Suicide is the eighth leading cause of death in Chatham County (Table 5.1). Of the two suicides in the county in 1995, one was in the 15-19 year old range, and the other was in the 25-34 year old range. This is comparable to the overall picture of suicide in North Carolina where suicide is declining for all age groups except among adolescents where it is increasing.

Dental Health

Dental health is often overlooked as a health need, which results in the collection of few dental health statistics. Because of this, it is difficult to estimate the numbers of people not receiving adequate dental care. Two separate focus groups among Latino women conducted by CCHIP have highlighted the need for dental care for Latino women and their families. In addition, a 1996 survey administered by students from UNC Medical School found that only 14% of Latino adults and 5% of Latino children in Chatham County had ever seen a dentist. The participants from the focus groups stated that dental care was too expensive and that it was not

accessible. This is exacerbated by the lack of dentists in North Carolina who accept payment from Medicaid for dental work. Only 21% of the dentists practicing in the state had seen a new Medicaid patient in the last six months of 1996.

The problem of inadequate dental care is most likely a problem with other residents of Chatham County and Lincoln Heights as many of these people are the "working poor" who work full-time, but do not receive insurance benefits nor adequate income to afford dental care.

Aging

Many services are available to seniors in the County such as a diabetes self-monitoring station run by Joint Orange Chatham Community Action (JOCCA) in Siler City and an active county-wide Council on Aging. However, many needs have yet to be met. Seventeen percent of the seniors in Chatham County are living in poverty. The Council on Aging has stated that many of the county's senior citizens live on limited incomes of between \$300-\$600 per month which is often not enough to pay for food, heat and medications so that something must be neglected. In addition, there is a need for expanded assisted living programs and in-home service aides.

Indicators of Social Health

Lifestyles and Behaviors

Regular physical activity, good nutrition, and avoiding or changing unhealthy behaviors all contribute to the good health of a community. The Year 2000 goal is to reduce the number of people who engage in no leisure-time physical activity to 15%. In 1996, nearly 70% of the 403 Chatham County residents surveyed reported being inactive or performing irregular physical activity. Of the total sample surveyed, 17% reported that they do not have an adequate place to

exercise or participate in physical activity.

According to the BRFSS survey, Chatham residents consume more fruits and vegetables a day than do North Carolinians on average. Many survey respondents, however, indicated that they would like to know more about nutrition, healthy lifestyle and preventing diabetes, heart disease, and cancer. The percentage of people who are overweight has increased in North Carolina from 1990 to 1995. Of those surveyed in Chatham County, 60% are attempting to lose weight, while only 35% are reporting the combined use of exercise and diet to do so.

Smoking and the use of tobacco products contribute to more than 400,000 deaths each year in the United States and caused increased risk of disease (DEHNR, 1997). Of the 403 Chatham County residents surveyed, nearly 30% are current smokers, twice the Year 2000 goal of 15%. Of these, 22% indicated that they have no access to a smoking cessation program.

Substance Abuse

Chatham County residents have ranked use of drugs and alcohol as a leading public concern. Unfortunately, specific data on the influence of drugs and alcohol in Chatham County is incomplete. From what is known, however, substance abuse is an important public health issue. While the actual numbers of substance abuse reported deaths are low -- only five alcohol-induced deaths and no drug-induced deaths were reported in 1995 -- this data must be reviewed critically. It is likely that deaths are under-reported because substance abuse may cause organ damage failure and therefore, deaths may be attributed to organ failure and not substance abuse.

The number of arrests reported in Chatham County for DWI (driving while intoxicated) were 1,200, which is higher than the average county arrests of 1,000 found throughout the state. Even more alarming is the fact that in 1995, alcohol-related traffic deaths in Chatham County, totaling approximately 19 deaths, were nearly double the state rate of only ten deaths. While the

Chatham County Sheriff's Department has reported that there is an increasing influence of alcohol with an additional 100-150 DWI arrests each year since 1993.

There is little data collected on substance abuse in Chatham County beyond arrest records. Arrests for possession or sale of drugs, mainly marijuana and crack cocaine, more than tripled between 1993-1995 with 22, 57, and 68 arrests, respectively. While the numbers are relatively small, drug activity is increasing in greater proportion (a 13% increase since 1990) to the growth of Chatham County's population (Chatham County, North Carolina Statistical Abstract, 1997).

Violent Crime

Crime and violence are problems of national concern and Chatham County residents are not alone in being concerned about violence in their community. Nearly 15% of Chatham residents surveyed by telephone reported their neighborhoods to be slightly safe or not at all safe. Violent crimes increased from the early 1990s and peaked in 1993. As seen from Table 5.3, aggravated assaults accounted for the greatest proportion of violent crime in Chatham County.

Table 5.3: Reported Violent Crimes in Chatham County, 1991-1995

Category of Crime	1991	1992	1993	1994	1995
Aggravated Assault	88	97	190	129	110
Murder	2	3	7	3	4
Rape	2	2	5	14	4
Robberies	16	20	13	23	44

Category of Crime	1991	1992	1993	1994	1995
Violent Crime	Total: 108	Total: 122	Total: 215	Total: 169	Total: 162

Source: Chatham County Sheriff's Office, 1996, Agency Profile, 1991-1995, and Crime in NC, 1991-1995.

Homicide and Firearms

Homicide was the ninth leading cause of death in Chatham County and the leading cause of death for persons aged 25-34 between 1991 and 1995. There were five homicides by firearms in Chatham County in 1995, two were White males and the remaining three were African American males. After motor vehicles, firearms were the second leading cause of injury and death among children.

Domestic Violence

Domestic abuse is historically very difficult to measure. As seen in Table 5.4, the number of batterers has risen significantly in Chatham County, but this may due to more cases being reported. Nevertheless, violence, and especially violence against women and children, is prevalent in the United States. Battering is the single major cause of injury to women in the country and it affects women of all cultures, occupations, income levels, ages, and races.

Table 5.4: Clients Served at the Family Violence and Rape Crisis Center, 1994-1996

Clients Served	Description of Group	1994	1995	1996 (through August)
New Domestic		264	306	203
Violence Clients				
Children of New		250	306	203
Victims				
Continuing		561	728	472
Domestic				
Violence Clients				

Reported		98	142	134
Number of				
Batterers				
Women seeking	New	53	54	36
Shelter	Continuing	32	46	33
	Total	85	100	69
	Total Nights	2,057	2,935	1,881
Children seeking	New	49	75	40
Shelter	Continuing	35	51	27
	Total	84	126	67

Source: Family Violence and Rape Crisis Center, 9/96

The Family Violence and Rape Crisis Services in Chatham County has reported a 14% per year increase of new women seeking assistance for assault, and an approximate 23% increase in women continuing to seek assistance from their program. Nearly 50% of victims are White, 30% are African American, and 5% are Latino. Not surprisingly, 99% of assault victims were female.

Child Abuse

Chatham County ranks thirty-ninth in the state in terms of number of number of child abuse cases reported to the Department of Social Services. In 1995, 727 children in the county received child abuse and neglect protective services. During the 1980s, reports on child sexual abuse began to rise steadily. It is the most common criminal act involving children. In response to this trend, the Chatham County Child Victim Services (CCCVS) program was begun in the County's District Attorney's office in 1994. Of the more than 700 cases of abuse reported each year, about 80 are specifically related to child sexual abuse. CCCVS reports that the number of child sexual abuse cases rivals statistics reported in urban areas.

Poverty

It has already been reported earlier in this document that the 1990 census data reveals that 841 families are living in poverty in Chatham County. It is estimated that this figure will rise to

982 by the Year 2000. In 1995, 4,518 persons living in Chatham County (11%) were struggling below the poverty line. Today's minimum wage of \$4.75 yields an annual income 28% below the poverty line for a family of three. In order for these families to stay above the poverty level, they must earn an hourly wage of at least \$10.95. Unfortunately, according to the BRFSS survey, of 319 occupations in North Carolina, 211 had average wages below this level.

Welfare Reform

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996, better known as the welfare reform law, will have major repercussions for underserved populations in Chatham County and throughout the U.S. Especially relevant to Lincoln Heights, and other areas of North Carolina with large immigrant populations, is the new legislation affecting legal immigrants.

Since August 1997, all new legal immigrants have been eliminated from the AFDC program (now known as TANF, Temporary Assistance for Needy Families). Legal immigrants are now ineligible for other benefits such as Medicaid and Food Stamps. Moreover, able-bodied persons ages 18-50 who have participated in the Food Stamp program for at least three months during the last five years will be eliminated from continued assistance. These new laws are expected to have a major impact in Chatham County, which has an increasing immigrant population. In 1995, 950 Chatham County cases were seen monthly in AFDC and an estimated 2,184 cases were seen monthly in the Food Stamp program.

Usage of Services

The proportion of Chatham residents using social support programs is quite low considering the number of citizens living in poverty. For example, less than 1,000 persons

receive AFDC, Food Stamps, and low-income energy assistance each month. Medicaid participation is higher, with 2,000 encounters and 3,000 monthly payments reported, but these figures represent one-fourth to one-half of residents under the federal poverty guidelines. Given the new welfare legislation, it is likely that even fewer residents will be able to take advantage of the health and welfare services offered in the county. It is noteworthy that the percentage of repeat visits by families seeking assistance from the Chatham Outreach Alliance, a non-profit food pantry, is the highest since the program began in 1988. In 1992, 261 families received assistance and 55 families (21%) had received prior assistance, while in 1996, 303 families received assistance and 109 families (36%) had received prior assistance. This indicates that some families in Chatham are now experiencing longer periods of economic distress.

Women, Infants, and Children (WIC) Supplemental Nutrition Program

This federal program is designed to support the nourishment, growth, development, and health status of children between the ages of 0-5, and pregnant and breastfeeding women.

Services include health screening, food vouchers, and nutrition education. There are two sites for the WIC program; one is administered by Piedmont Health Services in Moncure and a Siler City site, which recently moved from the Family Resource Center to the Siler City clinic of the Chatham County Health Department (Figure 5.1).

Enrollment participation in the Siler City WIC program substantially increased in 1996, which may be attributed to the change of location to the health department. The number of women under 20 years of age and Latino participants have increased at both the Siler City and Moncure sites. Interestingly, the number of African American women has increased slightly, but the number of African American infants and children has decreased at both sites. A similar decrease has not been seen in the Latino or White infants and children.

Access To Health Care

Approximately 15% of Chatham County residents, or 6,342 people, have no health insurance, and 36% are at risk for inadequate coverage due to having no insurance for part of the year or being underinsured (North Carolina Health Care Reform Commission, 1996). Of Chatham County's poor, 60% are at risk for inadequate coverage (North Carolina Health Care Reform Commission, 1996). In 1995, there were 4,840 people in the county considered Medicaid eligible (Cecil G. Sheps Center For Health Services Research, 1995). There are no statistics concerning the number of Latinos with health insurance in the county, but the Chatham County health department estimates that at least half of this recently immigrated population does not have adequate health coverage.

Chatham Hospital is the only hospital located within the county and has only 68 beds.

While Chatham County is surrounded by hospitals in other nearby counties (for example, UNC

in Chapel Hill and Moses Cone in Greensboro), this has implications for residents without transportation. Last year, Chatham County was chosen as a health professional shortage area by the North Carolina Health Care Reform Commission. The ratio of health professionals to the population of the county was one primary care provider to every 3,691 people. In addition, residents of Chatham County have limited access to mental health, dental health, obstetrics, inhome care, quality nursing home care and service aides along with many other types of health care (Table 5.5). In addition, Chatham County has no in-county obstetrics specialist, and women must be transported out of the county for labor and delivery.

Table 5.5: Number of Health Care Providers in Chatham County, 1995

Health Care Providers	Number in Chatham
Primary Care Physicians	19
Family Practice Physicians	8
Internal Medicine	9
Physicians	
OB/GYN Physicians	0
Pediatric Physicians	2
Registered Nurses	169
Dentists	10
Optometrists	3
Psychologists	4

Source: Cecil G. Sheps Center for Health Services Research, University of North Carolina at Chapel Hill, 1995

In the BRFSS Survey, Chatham County residents identified the following as barriers that prevent them from getting needed health care:

- Transportation difficulties: There is no public transportation in Chatham County, and most health care facilities are located outside of Siler City, necessitating travel;
- High cost of health care coupled with inadequate resources (poverty and lack of insurance);
- Language barriers: Chatham County's Latino population has a great deal of trouble communicating their needs to health care providers;

- Lack of understanding of the health care system: Many immigrants are not aware of the
 intricacies of this country's health care system as their native countries provided health care
 to them at little or no cost;
- Inconvenient hours of operation: Many clinics do not have evening or weekend hours,
 forcing working people to choose between going to work or going to the doctor;
- Need for specific programs and services: Among the health care needs identified by Chatham County residents were access to obstetrical services, drug and alcohol treatment programs, dental health, parenting skills, cardiac rehabilitation centers. In addition, residents indicated the need for recreational and social centers for teens and after-hours urgent care;
- Lack of information about available services;
- Lack of coordination between providers, primary, and specialty providers.

Future Steps

The Chatham Community Health Improvement Project (CCHIP) in Chatham County, funded by the Kellogg Foundation, was established in May of 1996 as a partnership between the Chatham County Health Department, Chatham Hospitals, UNC Hospitals, the Community-Based Public Health Initiative, and many other state and county committees and organizations. CCHIP has been working to identify and target key health issues for Chatham County. Numerous focus groups and interviews with residents from all parts of the county were conducted in which individuals were asked to voice their concerns related to health and quality of life in Chatham County.

Then, CCHIP held a community retreat in March of 1997 to identify priority health issues. The retreat provided a forum for the development of initial action plans to address the identified health priorities. The priority health issues for Chatham County, as identified by CCHIP, are substance abuse, sexually transmitted diseases, housing, rabies, social and recreational opportunities, and education.

CCHIP has now become a "Healthy Chatham Coalition" to continue the community health improvement process. The coalition will oversee action planning, implementation, coordination, communication, and evaluations of the overall health improvement process. In addition, six groups with private and public leadership will be developed to address each of the six priority health issues.

CHAPTER SIX: COMMUNITY ASSETS AND RESOURCES

For the most part, the residents we interviewed did not speak about existing community resources. This was probably due to the types of questions that we asked as well as community member's perception of the kind of information we wanted. The following is primarily a discussion of organizations mentioned to us through interviews although, where applicable, we mention other available services and resources in the county.

Organizations that Foster Community Pride and Collaboration

Many of the African American community members we interviewed mentioned organizations that helped instill pride in the African American community, including the neighborhood churches and the National Association for the Advancement of Colored People (NAACP). The NAACP is considered an important organization by community members. When describing it, one resident said it "keeps us focused on pride we have as African American people."

In addition to fostering pride within the African American community, there has been an attempt by some to bridge the gap between African Americans and Latinos in Siler City. One such program is Joining Hands, a collaboration of organizations including: the Chatham County Cultural Agricultural Extension Agency, the Chatham County Schools, and Smart Start. Joining Hands celebrates cultural diversity by organizing workshops for African Americans and Latinos that focus on dispelling stereotypes and working on ways for the two groups to become closer.

Neighborhood-based Organizations

Many people spoke of organizations located in the neighborhood that focus on the health and well being of adolescents, such as Save Our Students and the TeenWorks Center. Save Our Students is an after-school tutoring program located at the old Chatham Middle School, that one community member called a "successful program." TeenWorks is also located at the school and is a new program that offers intensive pregnancy prevention education as well as after-school activities for children from Siler City. Many community members mentioned another resource located in the neighborhood, the Joint Orange Chatham Community Action Center (JOCCA). Many Lincoln Heights residents were instrumental in the creation of JOCCA and feel great pride in the role it plays in the community, offering health and other services for senior citizens and serves as a meeting place for groups of residents.

Organizations that Work Primarily with Latinos

Many social service agencies have begun reaching out to the growing Latino population while other new agencies have emerged to work primarily with this population. The organization we heard most about was Helping Hands, which "provides services to people at poultry plants, and those who used to work at those plants." According to one of the staff members at Helping Hands, the agency works with "mostly Latinos, (but) some African Americans." Among other things, Helping Hands assists workers with unemployment and Social Security claims and provides information concerning occupational safety. In addition, the Hispanic Liaison and the Family Resource Center each serve Latinos in the county in numerous ways including translation assistance.

Another resource mentioned by many community members is English as a Second Language classes taught through the Central Carolina Community College. Many of the African American community members that we spoke to expressed a desire for classes teaching Spanish as a second language, saying "it would help, especially in communities like that (like Lincoln Heights), to better understand the culture. We can teach about the culture, but the language tells more."

Health Services

The community members that we interviewed seemed content with the quality and accessibility of health care services and expressed no real health-related concerns. They have access to many preventive health services through the Siler City branch of the Chatham County Public Health Department and can access primary care through the Chatham Hospital. In addition, residents can receive primary care through the Moncure Health Center, which offers services to low-income residents of the county.

In addition to primary care, many agencies in the county offer services for the prevention and treatment of substance abuse. School-based substance abuse prevention is sponsored through the D.A.R.E and C.A.R.E programs in all Chatham County elementary and middle schools as well as through an educational program sponsored by the school system. Counseling services are offered through the school system and by agencies such as the Chatham Counseling Center located in Siler City. In addition, a new counseling center called All Counties Family Service recently opened in Siler City. Residents can also access help for substance abuse through Narcotics Anonymous and Alcoholics Anonymous each located within the city.

Transportation

Most community members we interviewed agreed that transportation was not a problem for the residents of Lincoln Heights, even though no public or assisted transportation system exists. For the most part residents said that people in Siler City have their own cars or rely on friends and family members to drive them around.

Church

The four churches in the neighborhood play an important part in most Lincoln Heights resident's lives. All of the community members we spoke with felt a strong tie to one of the churches and saw it as a cornerstone of the neighborhood. One resident said, "The black community (historically) has had three institutions they could always depend on . . . the black family, the black church, and the black schools." Many residents said that the church was a place where "Black history (is) celebrated" and that they were important places for disseminating information and provided a space for community members to meet. In addition, many residents expressed that the pastors were leaders and had influence in the community. When speaking about the role of the clergy in the neighborhood, one resident said, "The minister has the freest voice in the community. As a minister, he has to take the lead."

Community Ties

When describing the strengths of Lincoln Heights, many African American community members mentioned that the neighborhood had a "small-town feeling" and that "everyone knows each other." One reason for the community cohesiveness is that there are "lots of kin people" living in the neighborhood. Community members explained the tight-knit feeling among

residents by saying, "(There are) lots of connecting families. People grew up here and respect each other" and "Everybody knows everybody, everybody knows your family, everybody knows your background." Another person said:

The strengths of living here in Lincoln Heights, I would say that, perhaps it's the closeness of the families. Not the family itself, but I mean the connecting families, the extended family of the community.

According to some community members, the benefit of living in the neighborhood is that "People help each other here."

Community Commitment

One of the many strengths of the residents of Lincoln Heights is their pride in and commitment to the neighborhood. One measure of this commitment is the extent to which community members have dedicated time and energy to the improvement of neighborhood life. One service provider said of Lincoln Heights residents, "The community has a commitment to make things happen." There are many examples of this in the neighborhood, including the joint police-community clean-up of the path and the trailer park.

Two of the most impressive accomplishments of Lincoln Heights residents have come from the work done by the Lincoln Heights Improvement Association and the Chatham Alumni Advancement Association. The Lincoln Heights Improvement Association was instrumental in identifying recreation as a need in the community working to help build Washington Park. The Chatham Alumni Advancement Association, comprised of students who attended the African American school before integration, including many Lincoln Heights residents, was responsible for accessing part of the former school building as a center for community activities. There are several organizations already housed in the school, including the TeenWorks Center (see

Recreation) and it is hoped that the school will be a site for an expanded number of cultural and educational activities for the community.

Most of the residents that we interviewed agreed that the Lincoln Heights Improvement Association and the Chatham Alumni Advancement Association have achieved "significant accomplishments." When describing the activities of these two organizations, one community member said proudly, "Community members are coming together." One resident was particularly excited about the community obtaining the school because, "When integration came ... they simply closed the Black schools. Many Black schools are simply rotting and falling down, deteriorating." He viewed acquiring the school as a success because it will benefit the neighborhood and because it will preserve a part of African American culture and history. Besides the physical accomplishments of building the park and accessing the school, these organizations have changed the neighborhood's relationship with the town. According to one service provider, "The park is the first time that the town and the community partnered together on anything." According to him, that partnership has helped "the community develop the capacity to do things."

The one complaint that we heard about the two organizations was that "a lot of the same people in the Lincoln Heights Improvement Association are also in the Chatham Alumni Advancement Association." Some residents thought that these two projects did not include a "total community effort" while others appeared worried that the same group of residents were stretching themselves thin and that one project would "siphon off some of the energy" from the other. Some residents expressed a need to include a larger number of community members to continue the momentum of the groups.

Together, the accomplishments of the Lincoln Heights Improvement Association and the Chatham Alumni Advancement Association, the dedication to local churches and the closeness of the residents, have bolstered the pride community members have in the neighborhood. Many residents expressed a desire for the continuation and expansion of these and other aspects of community life in Lincoln Heights that add to community cohesion and work to strengthen resident's commitment to the neighborhood.

CHAPTER SEVEN: EDUCATION

"There are no major problems with the schools and education received there."

Although we asked questions regarding education, most community members had little to say about the education system and the schools, and most community members are satisfied with the local schools. Community members said "pretty good education" is available and that the schools do "fairly well in serving youth." However, one resident felt that "there's lots of room for improvement. The quality is not what I would like to see."

Some residents expressed that any shortcomings in education were not the fault of the school system or teachers. "No matter what the teacher is trying to teach you, if you are not interested, it is not going to do you any good anyway," expressed one person. Another resident stated, "Any child that comes out of school and has not learned, it is their own fault. It's the parent's fault and the child's fault if they fall behind."

Another issue raised was the shrinking numbers of minority teachers in the schools. One community member expressed that, "the administration is replacing Black retirees with Whites." The views were similar in 1993, when a concern was raised about a lack of role models for the African American children in the schools. It was stated then that "we do not have Black teachers in the proportion we should have."

The Changing School

"Why should our kids have to learn their language?"

Many community members have concerns about the large increase of Latinos in the school system. According to a recent article in the local newspaper, at Siler City Elementary School this year, 27% of the students are Latino, representing a rapid increase over the past five

years. One school official estimated that 50% of the Siler City kindergarten class last year was Latino. The growth of the Latino population is "not as big as a problem in the high school," said one community member. For the most part, "there are less of them (Latinos) enrolled at the high school" and "they can speak English." The schools are responding by hiring more English as a Second Language (ESL) teachers. In addition, Jordan Matthews High School currently offers an ESL class for Latinos.

Some residents see a benefit in the growth of Latinos in the schools. One community member stated that his granddaughter in kindergarten was learning Spanish through her interaction with Latino youth at school. Similarly, one teacher at the Siler City elementary school recently stated:

It's true that time is spent trying to communicate. However, these children are gaining by having a culturally diverse class. They're not being slighted. They are learning things that they might not otherwise learn.

Adult Education

It was estimated by an official at Jordan Matthews High School that approximately "Forty-five percent of students go on to a college of some sort." One community member stated, "Young people are encouraged to go to college and not come back here." In fact, according to 1990 census data, only 9% of Lincoln Heights residents have attended any college and only 5% are college graduates.

For those not continuing on to college, or for community members seeking additional education, the Siler City branch of the Central Carolina Community College (CCCC) offers classes including basic academic skills for adults, preparation for a Graduate Equivalence Diploma or high school diploma, and ESL classes. In 1993, about one-third of the CCCC

students were Latino and as the numbers of Latinos in the area increases, the CCCC must continue to find ways to serve this diverse and growing population.

CHAPTER EIGHT: POLITICS AND GOVERNMENT

Although local government plays a large part in the quality of people's lives, very few Lincoln Heights residents or service providers commented about the Siler City or Chatham County government. One reason may be that the residents are basically satisfied with their local government and limit their decision making to voting every four years for their District Commissioner. Lincoln Heights and Chatham County as a whole have high percentages of active voters. Also, political activism is undertaken mostly by a minority of older and long-term residents of Lincoln Heights who have a history of community action. This may be due to the deeper emotional ties they have to the neighborhood.

The town and county governments are quite similar, but serve different functions. Siler City provides recreation, water and sewer services, police protection, fire services, and trash collection to the Lincoln Heights neighborhood. The county is responsible for other necessary functions such as public health and safety, social services, and schools. A new health department was recently opened in Siler City, which has provided much needed health services to lower income county residents. In the past, the town has been a contributor to finding ways to ease the housing shortage in Lincoln Heights.

The structure of the Town Board was changed in the late 1980s to accommodate concerns about a lack of minority representation on the Board. Lincoln Heights was divided into two districts separated by Martin Luther King, Jr. Boulevard. The Board grew from five White council members, to seven council members, including two African American members from Lincoln Heights. These two current council members have been very active leaders in the community and serve as role models for other residents.

Lincoln Heights residents and council members have been active in the past in responding to the needs of community members. A few years ago, residents were concerned about the water quality of approximately thirty homes just beyond the town limits. In addition, council members have actively served to improve the availability of housing and have worked with the town planner on obtaining funds from federal block grants for more housing. Other concerns addressed include sanitation concerns at the trailer park and drainage problems.

The building of Washington Park was a catalyst in bringing residents and government officials closer together. The park was funded by private and community funds and supported with matching funds from the town. A service provider said:

One of the really great things that has happened is that the relationship between the town officials, town manager, the commissioners, and the community, has changed. The park is the first time that the town and the community partnered together on anything. It was the first time that the community's voice was asserted in a positive way, not demanding, but saying, "Okay, we're doing this together.' Since that time, they (the town) do not think of anything about that park without talking to community people. The new town manager has been really very responsive and supportive.

Not only did the issue strengthen the relationship between the town and the community, it also helped strengthen bonds within the community. The Lincoln Heights Improvement Association, which was formed to organize community efforts around the building of Washington Park, was successful in achieving its aim to get the park built. As a result, it has been recognized by government officials as one of the strongest community groups in Siler City.

While the voting representation and relations with government officials has improved for African Americans, the rapidly growing Latino population does not have any representation or relationship with local government. Very few Latinos are registered to vote in Siler City. This may be due, in part, to their reluctance to formally identify themselves and their addresses because of their immigration status. Some community members think that government officials

would be more effective if they considered the needs of all members of the community, rather than serving the needs of a small minority. Residents stated that, while many government officials do not make an effort to communicate with African American residents, even fewer acknowledge the need for working with Latinos. One community member responded to the problem this way:

A few years ago, a task force was made up of commissioners and social service workers, but nobody on the task force was Latino. Well, you decided what you think they need without having a Latino on the Board to tell you. So it's kind of like they sit there and make decisions for everybody.

It is hoped that the Lincoln Heights community can build upon the successes of its past. Much has already been done, but issues remain to be resolved. The political activism that helped restructure the Town Council must continue to help ensure a better and brighter future for residents. A few key community associations have taken a strong lead in voicing the concerns of the neighborhood. Participation is needed in these groups, by new and continuing members, to keep that voice from falling silent.

CHAPTER NINE: IMMIGRATION

"I really don't think the community was prepared to receive the influx, the number of persons who came and are coming into the community. You see, there are several barriers that stand in their way; for example, the language, the cultural practices, the value of the home. This type of thing makes it difficult to adjust. Of course, I think the community is adjusting to it (the influx of Latinos), but it takes time to do so."

The Latino population in Siler City, as well as in Lincoln Heights, has exploded in the past few years, according to one service provider. The 1990 census data reflected that 6.3% of the Siler City population was Latino; current estimates indicate that approximately 38% of the city are Latino.

This new population brings its own culture, language, and values to the area. One service provider indicated that tension does exist between the two populations as a result of these differences. This service provider also indicated that, while African Americans' perceptions of Latinos may or may not be fact-based, "Latinos also come to this country with their news media perceptions of African Americans and they don't try to bridge that, either." As explained, the problem is exacerbated by social service agencies that create special programs for Latinos in order to meet their needs, which also suggests a competition for services.

Employment

The primary reason Latinos have given for migrating to America is for employment opportunities. One Latino community member expressed, "It's all about working." The opportunity to earn relatively large salaries, in comparison to their wages in Mexico, drives them to work long hours, leaving little time for leisure activity. Many Latinos send a portion of their wages to help support their families still in Mexico.

Most of the Latinos who have immigrated to the Siler City area are young males, many of whom work in chicken plants, mills, and fast food eateries; jobs previously held primarily by African Americans. One community resident indicated that Latinos often accept lower wages for these positions, which gains them an advantage for job placement in these positions. This has led to some resentment from African Americans. However, while there has been a perceived competition for these jobs, in reality, many African Americans have, for the most part, moved into better jobs and no longer wish to work in these low-paying, labor-intensive positions.

Most Latino women stay at home during the day to take care of the children. However, domestic violence, prenatal care, and childcare classes are offered at a nearby location for Latino women and some women take advantage of these classes. Some Latino women do work during the evening, and childcare is provided to them by neighbors or other family members.

During the community forum, one of the small groups discussed the issue of Latinos in Lincoln Heights. They suggested that the fault lies with the business owners who are taking advantage of a work force with few alternatives, rather than the Latinos who are taking these jobs. Residents believe that the business owners should be encouraged to treat all employees with fairness and to respect the employment and minimum wage regulations.

The Latino population has made strides in the business community since arriving in Siler City. While there are still very few Black-owned businesses in this traditionally African American community, Latino business are cropping up around the area. One service provider put it this way, "There are always those natural tensions, the tensions that happen because, although you look at Lincoln Heights, you don't see a lot of African American businesses, but you see Latino businesses."

Housing

"The Hispanics are grabbing up everything in the neighborhood."

"Many of them come from countries in which conditions are poorer, so that the conditions that they get here seem to be so much improved from what they had, and I don't know how they could be, in the trailer park."

As Latinos move to the Siler City area, the need for affordable housing increases. There is a perceived competition for housing between African Americans, who have traditionally inhabited low-income housing, and Latinos, who seek affordable housing as they migrate to the area.

Located at the northeastern edge of the Lincoln Heights neighborhood, the trailer park has traditionally provided the most affordable place to live in the neighborhood. The park is comprised of older mobile homes, many in poor condition. The homes do not have lawns and the children must play in dirt yards or on the dirt roads running through the park.

The influx of Latinos to the neighborhood has produced a recent shift in the demography of the trailer park. While the park was previously inhabited by African Americans, it is now primarily occupied by Latinos. While the park's living conditions were never ideal when the park population was African American, each home was then inhabited by just one family. Now, numerous Latino families often share one trailer, with upwards of ten to fifteen people sometimes inhabiting one small trailer. These crowded living conditions have resulted in a lack of available trash receptacles, leading to littered areas around the park, as well as extremely rundown housing conditions, as a result of stretching housing resources past their intended limit.

Language

Many of the adult Latinos living in the Lincoln Heights area do not speak English, and

few, if any, African Americans speak Spanish. This has proven to be a significant barrier in communicating between members of the different populations, although some of the children are learning each other's language in school and in play.

We asked service providers and community members about how the language barrier affected the relationship between African Americans and Latinos in Lincoln Heights. We received mixed responses to this question. Some African Americans believe that Latinos merely pretend not to understand English. Some felt that they had no reason to learn another language and that the Latinos should learn English in order to communicate with them. Others expressed a desire to see Spanish classes offered in a community environment in which people were encouraged to learn. One community member stated, "We hope a time will come when the Spanish language can be spoken by the Black community."

A number of service providers indicated that the African American community would benefit by being receptive to the idea of learning the language and culture of their neighbors.

One African American service provider felt that Spanish should be taught as a second language to Americans, stating:

Don't you think it would improve our relationship quite a bit? All over the country, it would change our framework. I'm not saying Latinos should not have facility in English, but I'm saying it would help, especially in communities like that, to better understand the culture. We can teach about the culture, but the language tells more.

Another service provider stated, "(The language barrier) is the greatest barrier that you have.

African Americans, like most Americans, have been brainwashed to believe that everybody ought to speak English and 'I shouldn't make any effort to learn any other language'."

One service provider voiced a desire to see both African American and Latino communities make an effort to learn the language and culture of the other, stating, "If I'm not

interested in learning Spanish, and they are not interested in learning English, nobody is going to get anywhere."

Race Relations

Lincoln Heights, once an almost exclusively African American community, is now estimated by some residents to contain an almost equal percentage of Latinos and African Americans, and a small percentage of Whites. One person said:

Now you will find that most of them, when they move into a city or town, move into the black community rather than disperse themselves over the city. Maybe it's easier to be accepted. Having had many of the problems that they have, then perhaps the black community is a little more understanding, a little more receptive. I'm not sure, but that could be a reason.

African Americans and Latinos in the community have minimal contact with one another. This is due, some feel, to the language barrier and to each group not being comfortable with the other. A common perception some African Americans have of their Latino neighbors is that the Latinos keep to themselves and prefer not to associate with their African American neighbors, in spite of efforts on the part of the African American community to involve them in community activities. One service provider stated:

For instance, when the community started with the park, they felt, well, we're raising money to do this park, the Latinos are coming out using this park, they ought to somehow contribute, they ought to be a part. The Latinos would have nothing to do with it.

The same service provider believes that the Latino population may not feel vested in the community, and therefore, may be reluctant to make an effort to become part of the community. He said:

The other thing that is very important, at least in my philosophy, you don't have a Latino community. You have a new population with no real history or investment in the community at this point, because a lot of them think they are going back, even if they are never going back, the focal point at this time is to make money, send money home, support, whatever.

African American residents who spoke about race relations between themselves and Latinos indicated that relations have improved between the two groups in the past few years. One community member stated, "In the beginning, there was a lot of anger, but now, we're seeing that Latinos are coming from the same place Black people were coming from." A need for tolerance and understanding of their new neighbors was also voiced by a number of people. One resident said, "We've got to put ourselves out there and go to them, because as Blacks, we've been there." Another agreed, saying, "Actions speak louder than words."

Many African Americans view Latinos positively, noting their willingness to work hard and their commitment to family values. One community member stated, "African Americans do not work together like they (Latinos) do." Another agreed, saying, "We can learn from them, too."

There is some evidence that the two populations are making efforts to come together in the community. A primarily African American vacation bible school held a picnic and invited the Rock Creek Ministry, where many Latinos go to worship. A number of Latinos attended the picnic, and this event was successful in bringing the two populations together for a common event. On another occasion, the Chatham Alumni Advancement Association held a back-to-school cookout, to which everyone in the neighborhood was invited. Latinos and African Americans both attended the cookout.

Another effort to bring the community together involved collaboration among the

Chatham County School Department, Chatham County Agricultural Extension Agency and Smart Start, in a project called "Joining Hands". The purpose of the project was to get the community together to enlighten both African American and Latino community members about each other's culture. The premise was, "We all have these hang-ups, but you don't know about them until you get together." Cultural similarities and differences were discussed in an effort to dispel myths each culture believes about the other. The bilingual seminar, held at Joint Orange-Chatham Community Action (JOCCA), a community action organization located in Lincoln Heights, brought more than 60 community members, with equal numbers of African Americans and Latinos in attendance.

The African American church has also been suggested as a resource for reaching out to the Latino population. One community member stated, "The Black community has always used our church. We need to go to the churches" to seek help in bringing the community together.

Another member indicated:

If we are going to have to live here together, we might as well become totally integrated on jobs, in the community, in the parks, even church. If we are going to live together then anyone ought to be free and feel free to become a part of whatever is offered in the community if they so desire.

Although the community is taking steps to move forward to build cohesion between the two populations, the community is still divided. One community member noted, "With events where something is being translated both ways, the Latinos are sitting here, the African American sitting there. A separate thing is still going on." As another community aptly stated, "Race relations - we're working on it, but it's going to take a long time."

Community Efforts

Some members of the Latino community have learned to take advantage of the services

offered to them by organizations such as Helping Hands, which was initially developed to assist Latinos working in the chicken plants with comprehension of employment regulations and legal documents. The organization has expanded to help this population with other matters as well. One woman told us she turns to the staff at Helping Hands when she has problems she needs help in resolving.

The Latino community has made an effort to reach out to local government. Latino community members raised money to improve a soccer field at a local park and donated the money to the city's recreation department. They use the field regularly for recreational and leisure activities and clean the area at the end of each day's activities, removing all litter and debris

Since August of 1996, the county manager has been spearheading a human relations commission to look at issues affecting Chatham County, including cultural understanding. Part of the progress made by efforts such as this includes a recent hiring of three ESL teachers and four assistants for the Chatham County School Department. Another indication that progress is being made in this area is the formation of an Intercultural Choir at St. Bart's Church in Pittsboro.

Conclusion

"Latinos are part of our neighborhood. They are there, make the best of it."

The influx of Latinos to the Lincoln Heights neighborhood has brought with it different challenges for each population. Some African Americans have realized, however, that Latinos are now facing many of the same problems they themselves faced in the not-so-distant past, and are still facing, to some extent. Changes in employment practices, housing, politics, and education are needed to foster and sustain a changing environment for all the residents of

Lincoln Heights.

CHAPTER TEN: CRIME AND SAFETY

"There used to be crime in this neighborhood, fighting, shooting, but not anymore."

Interviews with community residents revealed mixed feelings about the level of crime in Lincoln Heights. For the most part, community members think that crime has lessened over the past few years. Residents stated that "the crime rate is definitely improving" and that many of the "bad things" such as violent crime, murder, and drug dealing have decreased. Much of the lessened crime was noted by residents as occurring over the past few years. The data supports the feelings of residents. It was reported that violent crimes in Chatham County were fewer in 1995 than in the previous two years. One person stated, "Two years ago, crime was really high. But today the crime is not as great. I don't see the robberies I used to."

Types of Crime

Many of the crimes committed in Lincoln Heights include the use and sale of illegal substances, prostitution, robbery, and gang activity. Residents are aware that drugs and prostitution exist in Lincoln Heights and many community members are also aware of the specific areas or houses where drug use and prostitution take place. A wooded area in the neighborhood recognizable to most community members as "the path" or "the bridge" was frequently noted to be an area where much of the illegal activity takes place. The "path and bridge" are discussed more fully in the Drugs section of this document.

In September of 1997, more than 50 community members participated in a clean—up of the "path" that was littered with trash, bottles, debris, and drug paraphernalia. It was hoped that clearing the area and exposing the hideouts would reduce the illegal activities occurring there. It is felt among community residents that the clean—up and other efforts have reduced the amount

of crime. Some community members stated, "The bridge is not the problem it once was" and "Crime lessened after we got rid of some the drugs, since drugs and crime go hand in hand." Community members are aware that "the bridge and path" are not the only spots in town where illegal activities take place and one person said, "This town is a unit and we need to target more areas the same way in Siler City."

There has also been some gang activity noted in Lincoln Heights involving African American and Latino youth. Gang-related graffiti has been spotted in the neighborhood and there is evidence of a gang called the "Horsemen." It was suggested that gangs might be convening at the Washington Avenue Park in the Lincoln Heights neighborhood. Community residents have responded by setting curfews for the park and adding more lights at the park. In addition, the Siler City Police Department currently employs a detective who is a gang expert.

Although there has been no violence or crime directly linked to gang activity in the neighborhood, there was rumor of a drive-by shooting at Jordan Matthews High School scheduled to take place on the last day of school in the spring of 1997. In response to the rumor, community members and police became involved and subsequently no violence occurred on that day, and there have been no incidents since.

The trailer park, where the majority of the neighborhood's Latino residents reside, was identified by many African Americans as an area where crime takes place in Lincoln Heights.

One person said:

I would say that probably the most problems in Lincoln Heights come from the trailer park and the Hispanics. Not to label people as troublemakers, but their culture is different. They seem to want to do things the way it was done at home and that is creating some problems for us. We have a problem solving criminal activity in that area simply because they are not going to tell you. They take care of their own problems.

Many African American residents said they would not go to the trailer park. One African American resident said, "When I have gone to pick up people for church, I'm afraid -- I'm afraid I'm going to have to duck." "Shootings" were noted by some residents as a problem within the trailer park. Another crime problem in the trailer park is the incidence of Latinos being robbed, usually by African Americans. It was stated that, "Many Latinos are not using the banking and checking systems and they cash their checks on the way home from work and have a lot of cash on them, and they have been robbed." However, the Siler City police claimed that the majority of crimes in the trailer park typically occur between the Latino residents residing there.

Police Protection

"Community members started complaining, so naturally when the police department gets complaints they have to investigate."

"In the past Lincoln Heights was one of those areas where the police focused a lot of their attention, but now it has changed for the better."

Siler City has a police force of seventeen officers, although not all officers are on patrol at the same time. In 1994, a common concern of residents was the need for enhanced police coverage. Today, residents seem to be more pleased with the level of protection that they receive from police. A community member expressed, "Police are patrolling a lot more. That's been helpful." Some of positive things heard about the police were "more police presence" and "police have been helpful." The police have been active in patrolling the Washington Avenue Park and working to shut down a drug house in the neighborhood.

The police are also actively working with the Latinos to build trust. The police department is currently distributing a bilingual brochure about motor vehicle violations, a common problem among Latinos, that outlines the laws and what to expect if a person is pulled

over by the police. They are hoping this will eliminate some of the motor vehicle violations and lead to a better understanding of the procedure for routine traffic stops. The police also are conducting random traffic stops near the trailer park entrance to check for licenses and current vehicle tags and insurance.

However, some trailer park residents noted a lack of effort by police to patrol the area. In the summer, though, trailer park residents noted a higher police presence there. One community member said, "Police are good, but they don't really come to the trailer park, except during the summer. They drive around it." This could be because summertime is when the majority of the problems occur in the trailer park due to alcohol and noise complaints. In addition, not all Lincoln Heights residents are happy with the level of police protection. One person stated, "Police aren't as forceful as they used to be. Police are slacking off and playing possum."

Safety

"We heard gun shots. We were scared."

Community members have mixed opinions on the safety of Lincoln Heights. Most African Americans that we interviewed expressed that the trailer park was unsafe, but views were different when talking about their own particular street or section of the neighborhood. One community member expressed, "Right in the vicinity where I live, things are fine. Maybe in other parts of the neighborhood it might not be." The level of safety felt among residents also varied. "Lincoln Heights was safe in the 70s, but not now," said one community member, while another stated, "I feel safe in Lincoln Heights." One person said, "I used to walk alone at night in Lincoln Heights, but now I wouldn't feel safe." A recent telephone survey of Chatham

County residents revealed that 15% of respondents reported their neighborhoods to be only slightly safe or not safe at all.

For those who feel unsafe in the neighborhood, many link their fears to drug activity in the neighborhood. "Along with drug activity, safety becomes a problem," said a community resident. It was also suggested that town and city officials unfairly point to Lincoln Heights as an undesirable neighborhood that is unsafe. A community member stated, "If you were to ask the mayor or commissioners, they would tell you it is not safe. But ask me, I'll tell you it is safe."

In recent years, Lincoln Heights has benefited from an increased effort by the police department as well as a heightened awareness of crime among the community. Community members and police have begun to work together to combat crime and address safety concerns through efforts such as an informal neighborhood watch association. Hopefully, these efforts will lead to further reductions in crime and a greater sense of personal safety among Lincoln Heights residents.

CHAPTER ELEVEN: DRUGS

According to secondary data, arrests for the possession and sale of drugs, particularly marijuana and crack cocaine, more than tripled between 1993-1995 with 22, 57, and 68 arrests, respectively (Chatham County, North Carolina Statistical Abstract, 1997). Although most residents did not know the actual number of arrests, many felt drugs were a problem in Lincoln Heights. Opinion was mixed, however, as to whether the problem had increased or decreased over the last few years. Some residents said that the availability and use of drugs in the neighborhood is "not as bad as it used to be because it changed location" and that "there is not as much (drug) activity" as in the past. In addition, some residents viewed Lincoln Heights as split into two sections, with one side having more drug-related problems than the other. Most people agreed, however, that drugs were still a concern for people living in the neighborhood. Some residents said that the availability of drugs had profound effects on life in the neighborhood. They said things like, "It makes the community worse. You hear the ambulance and the police all the time," and "It's downgrading to the neighborhood."

The Bridge and Path

Each Lincoln Heights resident interviewed identified the bridge and path, known to some as "the bridge over troubled water," as the main area for drug activity in the neighborhood. A local service provider who works on preventing substance abuse said of the bridge, "(it is) one of the biggest drug dealing areas in the county." When speaking about the bridge and path, one community member said:

(it) makes me sad because I was born and raised here. Used to be I could walk to my grandmother's house and never feel afraid. Now I'd never walk through there. Even if there is no one on the bridge, you don't want to go on it because of the association of being on the bridge.

Other residents also spoke of avoiding the bridge out of fear or because of the connotation of being near it. They said things like, "When I'm going by the bridge, I'm not about to stop," and "We walk on the other side of the bridge," and "I'm not afraid to cross the bridge in the day, but at night I wouldn't."

When asked who uses the bridge for drug activity, community members agreed that "Some of the people . . . are from Lincoln Heights, others are from outside." There was some disagreement concerning the age of the people around the bridge. According to one service provider, "People who hang out there were residents, mid 30s, 40s - not high schoolers." A few community members disagreed, saying "Young people, teenagers, and young adults hang out there." Most community members however, thought that both adults and teenagers frequented the bridge. Although residents said that the bridge was racially mixed, they said that majority of people hanging out around the bridge were African American. When asked why African Americans choose to hang out around the bridge, one resident explained that there are few places for African Americans in Siler City to meet for either licit or illicit activities. He explained:

Whites can go anywhere they want to congregate, Blacks cannot. It's the only hangout. They cannot hang out in the parking lots of Roses or other areas without being run off. They are not run off on the bridge.

Another person said, "The high school age kids have nowhere to go but around the bridge and path" which exposes them to drug activity.

Neighborhood Clean-up

Last year, the residents of Lincoln Heights and the police department organized a neighborhood-wide clean-up of the bridge and path in an attempt to decrease the drug activity and discourage drug users and dealers from frequenting the area. According to residents, the clean-up effort worked. One person said, "The city cleaned out the path, so there's not as much activity there," while another reported, "(I) saw people there recently -- not the problem it used to be."

Other Areas of Drug Activity

Some community members also mentioned other areas of the neighborhood where drugs are bought and sold. A few community members mentioned the existence of drug houses, saying there were "people selling in their homes." Some residents spoke of specific houses and said that the police were trying to "shut them down." One person said that "the convenience store is a problem," pointing out that a lot of drug activity occurs there. Some community members stated they were afraid that the newly renovated Washington Park would become an area of drug activity. One resident said "I'm scared the park is going to be another drug haven." Others felt that drug dealing is already occurring in the park. One person said, "One of the church kids found a razor blade in the sand in the park. They find razor blades all the time." In addition, a service provider spoke of an incident where a "guy got his face shot off at Washington Park" in a drug-related incident.

Defining the Problem

According to a service provider who works in the schools to prevent adolescent substance use, teenagers with financial resources are often the ones using drugs while teenagers with less financial resources more often sell. He said, "I would be surprised if youngsters in Lincoln Heights used drugs . . . wouldn't surprise me if they were lots of youngsters dealing drugs." Some residents agreed, saying "There are a lot of kids selling here." Most people we spoke with agreed, however, that both "selling and doing" were problems for the people of the neighborhood.

Why the Problem Exists and What Can be Done

One service provider offered an explanation for the influx of drugs into Siler City. He believes that there are "way more drugs in Siler City than people using." He blamed this on the geographical location of Siler City, explaining that "Siler City sits on 421 and 64 (highways) . . . both go to the coast . . . any drugs coming in come through Siler City." Most of the residents we interviewed, however, did not believe that Siler City was any different than the rest of North Carolina in terms of the severity of the drug problem. Some people thought that the main problem was the availability of drugs, saying "The main source (of the problem) are the people bringing the drugs here." They went on to explain that "The richer people bring it in...the community," and that they were "not Black people" and were not from Lincoln Heights.

We were unable to ascertain from residents why they thought adults in the neighborhood used or sold drugs. This was due both to residents' focus on adolescent drug use and to our not probing further into the problem of adult substance abuse. The community members we interviewed offered many different explanations for why young people in Lincoln Heights use and sell drugs, but the most frequently mentioned reason was lack of recreation for teenagers in

the neighborhood. Community members said things like, "Number one reason (for the drug problem) -- young people don't have nothing to do," and "If young people don't have something to do, they'll find something, and that something is trouble." Adolescents explained why so many teenagers sell and use drugs by saying, "You live out in the country, no one lives around you, so you get bored," and "Ain't got nothing else to do."

As a solution to the problem, many residents suggested "having recreation and things for young people to do before they get hooked on drugs." Many community members mentioned the need for "an assembly place like a YMCA."

One service provider who works with adolescent substance users in Siler City disagreed that lack of recreation was responsible for the drug problem. He said:

Recreation is not the problem. People who say that don't understand addiction...I think parents are saying 'our kids won't do anything.' The problem is, how do you get these kids (that are selling and using drugs) interested in doing something besides selling and doing drugs?

According to him, the problem of substance abuse for Lincoln Heights adolescents is more a financial and economic problem. In other words, he believed that for the most part, the adolescents of Lincoln Heights were involved with selling rather than doing drugs. He said, "As long as kids see people with money driving around in Lexus' -- doesn't matter what family tells you, you want to sell." Some residents agreed, saying "A lot of kids think it's quick money. [They think] 'I can make more money than you do in a week'." Some community members offered solutions to combat the financial incentives of selling drugs such as, "Raise the minimum wage so young people want to work." An adolescent agreed, saying if adults want teenagers to stop using and selling drugs, they would have to "give them money."

Some residents explained that the drug problem exists in Lincoln Heights because older drug users are recruiting teenagers to sell. This, they argue, creates a cycle of users. Community

members said, "The adults give drugs to a young person to get him hooked. Then to support his habit, the youth has to sell," and "Adults are selling to children or having children sell for them." An adolescent we spoke with explained that teenagers use drugs because they see adults using. He said, "If they do it, they (teens) try to follow in their footsteps." One resident offered this solution:

One of the main things we are going to have to do is start turning in the people who are selling. We know who they are, but we don't want to turn them in because we know them. But that person will turn around and hook your son, daughter or grandkids.

Another person suggested using adult addicts as a deterrent for adolescent use. He suggested creating a "program so kids can see what drugs can do to you."

Residents who attended the community forum offered their ideas for solutions to tackle the problem of substance abuse in Lincoln Heights. Many community members argued for more community involvement to curtail substance availability in the neighborhood. One person suggested "cut down the trees and light up the area. If people can be seen then they won't want to do drugs there." Others suggested a joint community and police watch with residents recording the license plate numbers of cars that frequent the bridge or other known drug areas of the neighborhood. The police would then send a letter to the owners of the car alerting them that they had been seen in the neighborhood and suspected of participating in drug-related activity.

Other participants at the forum advocated for solutions to prevent adolescent drug use, including strengthening adolescents' ties with the church. One resident said that the community should "encourage people to attend church and Sunday school. They (teenagers) don't know a lot about religion. This might cut down on their activities." Another person suggested, "A curfew up to a certain age would be the best thing I could think of for school age children."

It is obvious from our interviews that substance abuse is a major concern for the residents of Lincoln Heights. As outlined above, the problem of substance abuse effects the neighborhood on many different levels and encompasses community members of all ages. Residents have already demonstrated a commitment to decreasing drug activity and seem ready to continue trying to remove drugs from the neighborhood.

CHAPTER TWELVE: HOUSING

Housing Shortage

"There is a housing need in this community."

Most community members and service providers we interviewed cited the shortage of affordable housing as a major problem in the Lincoln Heights neighborhood. While several houses are being built in the area, residents feel that there is a lack of affordable homes for rent. Some people said that housing has always been a problem, but that it has worsened. One service provider stated that "the town discourages low income housing, so anybody that might look at vacant land in Lincoln Heights as a way to build apartments or low- income housing can't get the approvals needed." Many African American and Latino families who cannot find affordable housing are forced to share homes or trailers. The increasing number of Latinos moving into the area has further worsened the housing shortage. Speaking about this issue, one service provider said:

You obviously have a competition for housing in Lincoln Heights. As the population increases with Latinos, they tend to gravitate toward housing which is primarily available for African Americans, low income housing. (There is) not much low-income housing in Chatham County.

In addition to racial factors, the lack of housing has been especially difficult for young people hoping to buy their first house and for single parents trying to provide for their families. Residents identified many factors that have contributed to the shortage of affordable housing in Lincoln Heights. One person reported that "a lack of income or a lack of good credit was a problem," while another said that "there is a lack of resources and services for those looking for affordable housing. Service providers who are supposed to know what's out there don't know." Some residents hinted that problems are partially due to racial inequality. They mentioned the economic disparity between Whites, African Americans, and Latinos and the unwillingness of

banks to lend money to minorities. A few residents also stated that Whites who have moved out of the neighborhood have been unwilling to sell their land or property to African American residents.

Some residents expressed deep emotional ties towards the community and feel a strong desire to remain in the neighborhood. Many older residents own their homes and have a lot of pride in the community and feel strong emotional ties to the area. One community member acknowledged the attachment that many residents have to the community by stating:

There isn't a great desire for people who live here to move away. They would rather stay here and be comfortable and have the advantages and have the privileges that everyone else has. They would say, 'I would rather stay here. This is where I grew up. This is where my family was raised. I was raised here.' But they need more housing.

Residents participating in a focus group at the community forum suggested several steps that could be taken by community members to improve housing conditions in Lincoln Heights. One participant suggested "doing a needs assessment or feasibility study to accurately assess the housing needs of the community." Another member suggested that people looking for low-income housing should work with service providers, but also research other possible options on their own that could be shared with other community residents. It was also recommended that residents organize and work more closely with the city to develop joint solutions to the housing shortage.

Housing Conditions

"Some of the houses are not in good shape, but for the most part, people keep the houses in decent shape around here."

Many community residents who were interviewed thought the conditions of most houses were quite good. While a handful of houses are in need of repair, the majority of homes are well-kept and residents take pride in their homes and yards. Residents reported that most homes have adequate water, sewer, heat, and air conditioning. One very noticeable difference in the housing conditions is the disparity between the houses owned or rented by African American residents and the trailers rented by Latinos. One community member said:

The perception of Siler City residents is that Lincoln Heights is a bad neighborhood. Do you know why? Part if it is the trailer park. Most people when you say Lincoln Heights think of the trailer park. They don't think of the rest of it. The trailer park gives it a bad name. The people who live there don't see it as a bad place. And it's not.

Trailer Park

"Cause they (Latinos) live 5-10 to a house/trailer. You see so many there and you wonder where all of them sleep."

While most houses are in adequate or excellent shape, the conditions of the trailer park and the surrounding area were cited by almost all interviewees as an on-going problem and a primary cause of the neighborhood's poor housing image. Overcrowding was identified as a major problem at the trailer park with as many as two or three families living in one single-family trailer. This has contributed greatly to the diminished living conditions and to the degree of excess trash throughout the trailer park. Several Latino residents who were interviewed mentioned a lack of attention given to their maintenance requests for improvements to the interior and exterior of the trailers.

The conditions of the trailer park have also bothered members of the African American community who feel the trailer park is negatively influencing the city's image of Lincoln

Heights. Several residents met with the African American owner of the trailer park to discuss their concerns and to request that the trailer park be cleaned up. Some residents have said that, although progress was made, not enough has been done to improve that part of the neighborhood.

Housing has been an area of concern for Lincoln Heights residents for a long time. In past years, there has been cooperation between community members and the local government on housing conditions and the housing shortage, but more needs to be done. It will be important for those dedicated to improving the housing situation in Lincoln Heights to organize a committed group of residents to assess the housing needs of the neighborhood and find ways to work with the town on developing creative solutions on this issue.

CHAPTER THIRTEEN: RECREATION

"Deep concern has always existed for growth, safety, recreation, and education of youth."

Residents expressed an almost unanimous concern about a lack of recreation for youth in Lincoln Heights. Given that 45% of Lincoln Heights residents were under the age of 24 in 1990, the need for youth recreation is warranted. "There's nothing for kids to do," and "Nothing for young people in the neighborhood," are a sampling of statements that convey the sentiment of the community. One community member stated, "I feel we have a serious problem of no place for them to go."

Existing Resources

"We need activities to keep kids off of the streets."

Two programs for youth, the TeenWorks Center and Save Our Students, are currently available to youth (See Community Assets and Resources). While Save our Students is primarily a tutoring program, the teen center offers supervised activities such as ping pong, video games, and movies for teens. TeenWorks, which opened in February of this year, provides pregnancy prevention education and other programs. Given that it is a new program, some community members are unaware of its existence, but there appears to be a strong interest and desire to continue to expand the teen center's services. One community member suggested that they "expand the activities and the horizon of the teen center."

In 1996, Lincoln Heights finished the first phase of development of Washington Park due to the hard work of community and local advocacy and private and public donations. The park, identified as a community need in a previous community diagnosis in 1993, is being used by residents and was cited as a positive step in addressing the lack of available recreation in Lincoln

Heights. One community member stated, "Washington Park has helped -- having access to another park in our close-knit neighborhood has helped." Another person said, "Washington Park is used constantly," while another stated, "Families are using the park for cookouts and other activities."

Lack of Recreation

"We started to solve the problem of lack of things for youth to do. With the park, at least they have somewhere to go. I know there are a lot of other things that could be done, but the problem is the space to do it and the resources to do it."

Community members agreed that while the park has helped in addressing recreation for the neighborhood, continuing efforts are needed. Residents stated, "The park hasn't totally solved the problem, but it has helped considerably," and "We started to solve the problem with the park. Other things could be done." It was also stated that, "there is nothing specially geared to high school kids." The Lincoln Heights community is concerned about the consequences of a lack of youth activities. One person said:

Because of the need and because of the lack of things for young people to do, then you get into the problem. You see, that brings on the problem. The problem, of course, they turn to other things such as drugs, alcohol, and illicit sex.

A few community members suggested, however, that it may be difficult to ever adequately provide recreation for youth without including them in the decision making process. One person stated, "I don't know what the youth want and I don't think they know what they want either."

Another suggested, "Maybe we need to survey the kids and find out what their needs are."

Adult Responsibilities

"We need structured things where they will be supervised. We need that if it is to be a strong community."

Many community members stressed a desire for more structured activities for the youth of the neighborhood. Residents said, "We need something constructive for them to do" and that "guided and constructed activities are needed." Another person said, "I'm not in favor of turning kids loose. They ought to be supervised."

There also was a need expressed for stronger parental guidance and mentoring of youth, including parental supervision at the park. One community member stated, "Adult supervision at the park would be helpful." Another resident said, "We'd love to see parents get involved at the park, not just send their kids down."

Residents also stated that a "mechanism was needed for mentoring our young people" and that youth need "people they can look up to, human to human, heart to heart." There was also a suggestion for parents to volunteer more time to the neighborhood's youth. "Parents need to be overused," said one person.

Community Suggestions

"In order for things to work, it has to come from within the community."

In 1993, Lincoln Heights community members identified the need for a community center or YMCA to address the recreation needs of the neighborhood's youth. Many community members still feel strongly today that an organization such as the YMCA is needed for the community. One resident said, "We need an assembly place like a YMCA." While others stated, "I think we need a YMCA," and "Maybe a YMCA would alleviate some of the guys hanging out on the street."

Although structured activities are currently offered by the Siler City Recreation

Department, residents said that cost and location were factors. Another issue identified was the lack of varied activities offered other than sports at the recreation department. "Not all kids want to play sports," said one community member, while another stated, "We need activities that all types and interests can engage in."

Community members are aware of the financial costs associated with expanding or adding additional recreational facilities for youth. One person said, "If Lincoln Heights had enough money, it would be important to continue expanding the park and finishing it." Another community member asked, "Would the citizens of Siler City be willing to pay a tax increase? Are we willing to sacrifice for the kids? What can we do now to help our children?" One resident stated, "If you don't have money, what are you going to do?"

Lincoln Heights has a familiarity and history with fund raising and community organizing around the issue of youth recreation. Finishing the Washington Park and providing additional support to the TeenWorks Center would be important steps in the right direction for Lincoln Heights. "You have to crawl before you can walk," stated one community member, when speaking about the issue of recreation in the community.

CHAPTER FOURTEEN: A CHANGING CLIMATE

"There has been a breakdown in the family structure. It is not as close within the immediate family as it once was (because) there are many more one-parent families now than there once was, and we have this new live-in situation, which doesn't really tie you to the family."

A significant number of African American community members spoke about a loss of family values and the need for parents to learn to take care of themselves so they can serve as role models for their children. Some are concerned about the problem of children having children, and they feel that, more than just activities, youth programs that imbue values are needed. Others are concerned that church membership among African Americans has decreased, resulting in fewer community members learning about values that are reinforced through church attendance.

Community members also voiced concerns that the climate of the neighborhood has changed, especially over the last two decades, to the detriment of the community:

The black community had three institutions they could always depend on, years ago - the black family, the black church, and the black schools. But when you take them out, your base is gone. You see, we've lost the black school and we're losing the family because there has been a breakdown of the family structure.

Others spoke of some of the negative impacts that integration has had on the African American community, such as the loss of leadership positions among black professionals.

Another is the lack of African American role models in the community. While many residents indicate a desire to see their children grow up and leave the area, this leads to a lack of role models. One community member explained the problem this way, stating:

The lack of doctors, say, Black doctors, in the community. There is not one. Not that others are not capable and receptive to patients. But it would be a role model to young people in the community if there were professionals, lawyers, for example, and doctors.

A number of residents indicated that they would move out of Lincoln Heights, if they

could, because they are unhappy with the way it has changed over the years. Lincoln Heights has historically been a mixed neighborhood of middle-class and lower-class community members, which one service provider feels is "one of its strengths and one of its beauties, that you can make it work in a climate in which economically mixed neighborhoods are not successful." This service provider fears that as Latinos continue to move into Lincoln Heights, the neighborhood may become poorer as the African American middle-class move away, which would hurt the community. One person said:

The fact that Lincoln Heights has middle class and poor people means the likelihood of understanding poor people is greater than if it was turned into an all poor neighborhood. We need to try to encourage this continuation that is a mixture of the people, particularly economically.

A sense of apathy regarding working on problems in the community was also discussed by some community members. One service provider noted, "What happens is that you get the same people working on things, and then they get tired." One community member agreed, saying that many African Americans believe, "What's the use, we tried this, we fought for this, you know, and it's going to come out the same way. My vote doesn't count."

It was suggested by one community member that changes for the better can be achieved in Lincoln Heights, "if we could just get people to come together. Everybody is set in their own ways and they accept things the way they are and don't want to see change. But everyone that joins the group, strengthens it."

CONCLUSION

The information included in the paper is a mixture of key themes that emerged from interviews and data collected from secondary sources. In the six months we spent in Lincoln Heights, we were able to interview 31 residents and service providers about life in the neighborhood. These people and many others from the neighborhood shared with us and from their words, we were able to begin to form a picture of the community. The residents of Lincoln Heights welcomed us into their lives and we hope that this document reflects their voices.

Lincoln Heights residents, like residents in most communities, have strong concerns about the issues of crime, substance abuse, and safety in the neighborhood. However, since the Community Diagnosis, four years ago, there has been an improved relationship between the community and the police department. While some residents do report drug abuse, crime, and a lack of safety, other residents commented on the improved police protection in Lincoln Heights.

The large influx of Latinos looking for employment in the manufacturing and construction industries in and around Siler City has had a major impact on the Lincoln Heights neighborhood. Housing conditions in the Lincoln Heights trailer park have worsened since Latinos moved there. While some residents have welcomed the diversity that these newcomers have brought to the community, others have been anxious and resentful of the resulting competition for housing and jobs. Greater tolerance is needed to foster an atmosphere of respect and good will between African Americans and Latinos.

There is an obvious division between the lifestyles led by African American and Latino residents. The language barrier has been difficult for both cultures and it has significantly hindered Latino resident's ability to integrate into the neighborhood. It has also been difficult for service providers and concerned African American residents to meet the needs of these new

residents. Local resources have been insufficient in handling this steadily increasing migration of workers. While some efforts have been made to bridge the gaps between these two cultures, much more remains to be done to cultivate a cooperative environment.

Affordable housing continues to be a major concern for residents, and not only because of the large number of Latinos moving to the area. Residents have reported that there are major obstacles in obtaining necessary permits to build housing. In the past, residents have worked more closely with the town to develop solutions to the housing needs of the community. These collaborative efforts must be renewed to find creative solutions to the housing shortage.

Problems facing youth were reported repeatedly in interviews with community members. A lack of recreation has been associated with youth violence and drug abuse. As a result of the previous Community Diagnosis, the Lincoln Heights Improvement Association was formed to bring community members together to address the lack of recreation opportunities for youth in Lincoln Heights. For the first time, community residents and the town were able to work together to successfully implement a plan of action. As a result the Washington Park was completed in 1997. The park provides a safe place for children and their families to spend time together. The advent of the TeenWorks Center has provided a place for teens to spend their time after school and educational programs are being offered on teen pregnancy and other social concerns. However, even though significant advances have been made in this area over the last few years, more needs to be done to support youth, especially older teens, in encouraging them to resist negative influences.

Although specific health problems were rarely mentioned by community residents, there continues to be a gap in services provided to the uninsured or under-insured. Teenage pregnancy has been identified as a health problem facing youth. Substance abuse continues to be a major

concern of Lincoln Heights residents. The opening of the Chatham County Health Department in Siler City has had a significant impact, but does not meet all of the needs of the community.

Although numerous issues still exist in Lincoln Heights, much has changed since the last community diagnosis was completed there in 1994. Concerned citizens from the neighborhood have worked hard to build a healthier community and throughout this document we have tried to highlight their successes. Two organizations in particular have impacted the quality of life for residents, the Lincoln Heights Improvement Association and the Chatham Alumni Advancement Association. As was mentioned previously, the Lincoln Heights Improvement Association has played a vital role in the neighborhood by building Washington Park but also by demonstrating that a small group of concerned residents could affect change. The Chatham Alumni Advancement Association also showed that strength in numbers could work when they pressured the local government to give them part of the old Chatham Middle School for use as a cultural center. Both of these groups have proved themselves capable of taking on the issues that face the neighborhood, and winning. It is our hope that these groups will continue to thrive and that they will be able to use this document to steer their course of action in the future.

REFERENCES

Chapter Two - History

Bors, P., Camlin, C., Colon, M., Michaels, C. (1993). *Lincoln Heights: A Siler City Community*. Department of Health Behavior and Health Education, School of Public Health, University of North Carolina, Chapel Hill, NC.

Levin, K., Rolon, L., Schlanger, K., Smith, M., Warkentin, J. (1994). *A Community Diagnosis of the Latino Community in Siler City*. Department of Health Behavior and Health Education, School of Public Health, University of North Carolina, Chapel Hill, NC.

Chapter Three - Economic Outlook

Chatham County Economic Development Commission (1997). *Chatham County, North Carolina Statistical Abstract.* pp. 4-15, Pittsboro, NC: Author.

Levin, K., Rolon, L., Schlanger, K., Smith, M., Warkentin, J. (1994). *A Community Diagnosis of the Latino Community in Siler City*. Department of Health Behavior and Health Education, School of Public Health, University of North Carolina, Chapel Hill, NC.

Research Triangle Regional Partnership (1996). *Research Triangle Region Statistical Data File*. p.16, RDU Airport, NC.

Chapter Four - Community Profile

Chatham County Community Health Improvement Project (1997). *The Health of Chatham County, 1996-1997*. Pittsboro, NC: Author.

United States Census Bureau. (1993). Census of Population and Housing: North Carolina. [Machine-readable data file.]

United States Census Bureau. (1990). Census of Population and Housing: North Carolina. [Machine-readable data file.]

Chapter Five- Health

Bors, P., Camlin, C., Colon, M., Michaels, C. (1993). *Lincoln Heights A Siler City Community*. Department of Health Behavior and Health Education, School of Public Health, University of North Carolina, Chapel Hill, NC.

Cecil G. Sheps Center. University of North Carolina at Chapel Hill. (1995). North Carolina Health Professions Data System, Chatham County 1995 Profile. Available: http://www.shepcenter.unc.edu/DATA/HEALTHDATA/94imr.html.

Chatham County Community Health Improvement Project. (1997). *The Health of Chatham County*, 1996-1997. Pittsboro, NC: Author.

Chatham County Economic Development Commission (1997). *Chatham County, North Carolina Statistical Abstract.* pp. 4-15, Pittsboro, NC: Author.

North Carolina Child Advocacy Institute (1994). Children's Index. Raleigh, NC: Author.

North Carolina Department of Environment, Health, and Natural Resources. State Center for Health Statistics (1997). *North Carolina's Health Report Card: Progress Toward the Healthy People 2000 Objective*. Raleigh, NC: Author.

North Carolina Department of Environment, Health, and Natural Resources. State Center for Health Statistics (1995). *County Health Databook*. Raleigh, NC: Author.

North Carolina Department of Environment, Health, and Natural Resources. State Center for Health Statistics (1995). *Detailed Mortality Statistics*. Raleigh, NC: Author.

North Carolina Health Care Reform Commission (1996). *Status Report: Current Health Care Marketplace. The Final Report*. NC: Author.