# Roxboro Person County

A Community Diagnosis including Secondary Data Analysis and Qualitative Data Collection

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#### EXECUTIVE SUMMARY

A group of six, first year Masters students from the School of Public Health at the University of North Carolina at Chapel Hill, Department of Health Behavior and Health Education (HBHE) conducted a community diagnosis of the city of Roxboro. A Community Diagnosis involves working with a community in order to discover its strengths and assess areas that may need future attention. Information about the community is compiled through a review of previously gathered data and by talking with residents and service providers about what it is like to live in their community. This is a seven-month process, which is a requirement of Masters students in the HBHE Department at the University of North Carolina at Chapel Hill.

The Community Diagnosis process initially focused on collecting and summarizing pre-existing data also called secondary data. Sources of secondary data include but are not limited to census data, maps, previously existing documents and newspapers. Each of these sources provided a broader understanding of life in Roxboro. This information also allowed the community diagnosis team to define and describe the geography (location), history, economy, health status and sociodemographic characteristics of Roxboro.

Although these data sources are extensive, there are some notable limitations. For example, the most recent data available are from 1990 and therefore do not reflect current changes within the county, city and state. Another limitation is that the most current data for Roxboro does not include the increased population and demographic information from newly annexed land in July 1998 (The Courier Times, 1998).

After the pre-existing data were compiled and summarized, the qualitative data collection process began and consisted of interviewing community members and service providers. Qualitative data collection was essential in compiling a complete picture of what life is like in Roxboro. Separate interview guides were created for community members and service providers. In total, 36 interviews were completed: twenty-one community members and fifteen service providers. Through these interviews and our continuous presence in Roxboro, we became more familiar with the community and the residents. Community members also became more comfortable and welcoming of us.

Located in Person County, Roxboro is an area of approximately 6.45 square miles in the Northern Piedmont. The city is both urban and rural with a population of 7,332 residents that is relatively evenly distributed among African Americans and Caucasians. There is a long history and lineage of the residents. Many families are descendents of those who have lived in Roxboro for hundreds of years. However, the city has also attracted many newcomers.

Community members and service providers described Roxboro as a community of many strengths. For example, Roxboro is a safe, small, close-knit, quiet and friendly community; it is a good place to raise your family and flee from the chaos of a larger city. The residents of Roxboro are friendly, warm, down-to-earth individuals who care about their neighbors. One community member

summed it up by saying "I wouldn't be anywhere else, I wouldn't live anywhere else."

Community members and service providers also expressed some concerns about Roxboro. Suggested areas of improvement included recreation, health services, transportation and Latino services.

In February of 1999, with the help of the community and sponsors, the student team held a community forum in which the strengths and concerns of community members and service providers were presented to the community. The purpose of this meeting was to summarize what the team had found through both pre-existing data and interviews. It was also an opportunity for community members and services providers to further develop relationships, and to discuss common goals and future directions. Health and recreation were major areas of concern expressed by those who attended the forum.

#### <u>METHODOLOGY</u>

This section of the document will describe the process of data collection, both quantitative and qualitative. The first phase of data collection involved gathering secondary data from maps, census data and health statistics. The second phase of data collection involved interviews with both community members and service providers to gain an understanding of residents' perceptions of life in Roxboro. Limitations for each source of data will also be presented in this section.

#### Quantitative Data

<u>Sources.</u> Secondary data was gathered from a variety of sources, including local, state and federal government offices, local newspapers (<u>The Courier Times</u>) and the Roxboro Chamber of Commerce. Government sources consulted were the 1990 U.S Census, the Department of Commerce (U.S. and North Carolina), the Department of Environmental Health and Natural Resources, the State Data Center and the State Center for Health Statistics. Information was collected through the World Wide Web, Log Into North Carolina (LINC) and phone interviews with agency staff.

Limitations. The majority of the secondary data were available at the city level. However, some statistics were only collected at the county level. Therefore, some of the quantitative data may not be fully representative of the City of Roxboro. Another limitation is that in some cases the most current data available is from 1990. These data are nine years old and therefore, do not reflect the current changes occurring within the county, city and state.

#### <u>Qualitative Data</u>

<u>Procedure.</u> Before qualitative data was collected, interview guides were developed. These guides consisted of questions designed to elicit interviewees' perceptions about life in Roxboro. Two different interview guides were created: one for service providers and one for community members. A service provider was defined as an employee of an agency that provides social and health services to individuals in Roxboro. A community member was defined as someone living in Roxboro.

Questions contained in both the community member and service provider interview guides were based on guides used in previous community diagnoses (See Appendix A). The community member interview guide consisted of fortyseven questions concerning various aspects of life in Roxboro: individuals and their families, social issues, health, economy, recreation, safety, transportation, community change and future hopes. The service provider interview guide consisted of twenty-four questions that primarily focused on services provided by each agency. Interviewees were asked to provide an overview of issues concerning services such as utilization, barriers and unmet service needs. They were also asked about the strengths and needs of the community. The University of North Carolina School of Public Health Institutional Review Board (IRB) approved both interview guides, granting permission to interview human subjects over the age of eighteen (See Appendix D). Each interviewee gave consent for us to interview them and tape-record them. They were also informed that their information was to remain confidential.

Although it was not possible to interview every community member and service provider in Roxboro, attempts were made to interview an accurate representation of the population. Our first interviews were with community members Carol Thomas, our preceptor, recommended we contact. Additional names of potential participants were elicited by asking interviewees for recommendations of other individuals who would be helpful in contributing information about Roxboro. The majority of people interviewed were contacted in this fashion, but other procedures were also used. For example, members of the team spent time in local gas stations, restaurants, churches and the public library recruiting people to interview.

Upon completion of half of our total interviews, we realized that the majority of the people interviewed were white males and females over the age of forty. Because approximately fifty percent of the population of Roxboro is African American, attempts were made to recruit a more diverse sample.

Two members of the team were present at each interview. One person led the interview while the other took notes. Before interviews began, the team member conducting the interview explained the community diagnosis process to the interviewee. Then issues of confidentiality were explained. With participants' permission, each interview was tape recorded to ensure a comprehensive record of all information solicited. Each interviewee had the option of either not answering any question or stopping the tape recorder. Interviews most frequently occurred in the public library or places of employment, and less often in homes and churches. Interview of community members on average ran for an hour and a half. Service provider interviews on average lasted for 45 minutes. Upon completion, each interview was assigned a formal interview number (F.I. 1, F. I. 2, etc). This process designated each interviewees' responses and ensured confidentiality.

A total of thirty-six interviews were completed: fifteen service providers and twenty-one community members. As a team, we decided to end the interviewing process when similar responses were repeatedly obtained, thus reflecting consistency of thoughts and beliefs of Roxboro residents and service providers.

Upon completion of the interviews, the analysis and coding process began. Analysis consisted of three parts. First, team members read through the notes taken at each interview looking for common themes. Second, based on consensus among team members, a list of themes was generated. Third, interview responses were coded according to themes. In order to maintain the context of each response, specific questions from the interview guide were included with the themes. The themes were community strengths, transportation, recreation, health, commuters, location, the Hispanic community, progressivism and racial tensions.

Limitations. In creating the interview guide, we selected questions that would generate information that we were interested in obtaining from

participants. The information may reflect our own perceptions of problem areas rather than community members most significant concerns.

The method used to recruit participants is another potential source of bias. We did not intend to interview a completely representative sample of the community. The use of personal recommendations from one interviewee leading us to another may have kept us within only a few segments of the Roxboro population. Therefore, some perceptions may be over or under represented in the data. In addition, it is possible that we did not obtain complete and true opinions of interviewees due to the desire to give socially appropriate responses. Despite these possible limitations, we feel that we captured an accurate representation of perceptions of the residents of Roxboro.

#### **INTRODUCTION**

The first part of a community diagnosis involves reviewing quantitative data from secondary data sources such as state, county and local agencies. The objective of this process is to provide an overview of the community including geographical, economic and historical characteristics, sociodemographic information, morbidity and mortality statistics, environmental health statistics and health resources available to the residents of Roxboro. When possible, data will be reported at the city level. Because some data is only collected at the county level, Person County data will be used in many cases. Overall, Roxboro seems to be fairly representative of the county as a whole, and therefore, Person County data is a good approximation of Roxboro data. Although this may not be the case in all circumstances, information obtained from interviews with community members and service providers in Roxboro will be used to supplement the data reviewed in this section of the document.

### **GEOGRAPHY, HISTORY AND ECONOMICS**

#### <u>Geography</u>

Roxboro is located thirty miles north of Durham on Highway 501. As the county seat of Person County, Roxboro is the center of government and is the only incorporated city in the county. Located in the northern most part of the Piedmont, Person County borders Caswell, Orange, Durham and Granville Counties as well as the state of Virginia. For the purposes of this document, the community of Roxboro will be defined geographically.

The topography of Roxboro is unique in that it has ridges that are less narrow and sharp than the rest of the Piedmont. In addition, the gullies and ditches, which are representative of the Piedmont, are less abrupt in Roxboro (Roxboro Area Chamber of Commerce, 1998).

Roxboro is approximately 6.45 square miles, 3,982 acres, (Courier-Times, 1998) and its boundaries are: Cavel-Chub Lake Road to the North, Bessie Daniels Road to the South, Chub Lake Road to the West and Alansville Road to the East (Roxboro Area Chamber of Commerce, 1998). In the outlying areas of the city, there are several substantial water reserves such as Chub Lake and Water Works Lake, which are approximately 5 miles from the city's boundaries.

The outlying areas of Roxboro are mostly rural and residential, comprised of tobacco and corn farmland. There are also prefabricated home sales lots interspersed with rolling farmland and undeveloped fields in these areas. When entering the city of Roxboro, it appears divided into three distinct categories: commercial, industrial and residential. The more urbanized areas are equally divided between industrial and commercial business. Interestingly, small one-family units surround the two main industrial areas of Roxboro. The more commercialized areas are located on Highway 501, a four-way undivided highway that contains an array of business such as restaurants and shops.

The historic downtown and Main Street are in sharp contrast to the urbanized sections around the 501 Highway. Unlike other parts of the city, there is only one stop light present on Main Street. Some of the prominent features of downtown are large refurbished homes, Cole's Pharmacy, the Chamber of Commerce, the Person County Courthouse, the Person County Historic Museum and the original Kirby Theatre. This area is currently undergoing a revitalization process in order to restore the quaint and secure village atmosphere of the original community (Roxboro Chamber of Commerce, 1998).

#### <u>History</u>

As early as 1740, settlers of English, Irish and Scottish heritage began to inhabit an area of North Carolina now known as Person County (Wright, 1974). Person County was formed from half of Caswell County on February 1, 1792 and was named for a Revolutionary War Patriot, General Thomas Person (Wright, 1974).

The development of Roxboro occurred as a direct result of a decision to move the seat of Person County to a centralized location. The county courthouse was erected in the center of Person County on December 11, 1792. This location became known as Roxboro (Wright, 1974). Several legends exist

regarding how the town received its name. A common legend is that the earlier Scottish settlers in the county found the landscape very similar to their native land of Roxborough Shire (Wright, 1974).

Roxboro became incorporated in 1854-55 by the General Assembly of the State of North Carolina (Wright, 1974). The decade preceding the Civil War marked the beginning of prosperity for Roxboro. Roxboro began to develop into a thriving town with a population of nearly 400 people, five retail shops and two churches (Wright, 1974). Tobacco was a leading cash crop and the town benefited from the establishment of two tobacco factories (Wright, 1974).

Following the Civil War in the 1870's, new businesses emerged including small mills and tobacco factories (Wright, 1974). The desire to expand business was the force behind establishing rail transportation in Roxboro. This movement was led by J.A. Long, who is considered the builder of modern Roxboro (Wright, 1974). Soon after the completion of the railroad in 1890, J. A. Long built a tobacco warehouse. Two months later, People's Bank opened and Long became the bank president (Wright, 1974). Between 1883-1893, Roxboro's population tripled to 1200 people. The town's growth brought new business including two hotels, three wagon manufactories, five physicians and two drug stores (Wright, 1974).

By the turn of the century, many of Roxboro's residents were employed in the local factories and mills. In 1923, J.A. Long's son had drawn additional businesses to Roxboro including a textile mill called the Baker Company. The Baker Company later merged with Collins and Aikman and is now solely referred to as Collins and Aikman. It continues to be a prominent industry in Person County today (Roxboro Chamber of Commerce, 1998). In the early years of the factories, the lives of the workers were greatly influenced by the owners of the plants. Mills sponsored baseball teams for their employees and it became the center of social life for the employees' families. Factories owned large areas of housing where the workers lived. The company enforced a moral code of behavior on their workers' families. If family members deviated from the accepted values, the worker was fired and his or her family was asked to move (B. Oakley, personal communication, September 12, 1998). Through the years, the companies have gradually had less direct impact on their workers' lives.

As Roxboro approaches the millennium, it maintains a mixture of industry and agriculture coupled with "small town living" (Roxboro Area Chamber of Commerce, 1998). The people of Roxboro take great pride in the history of their town and in its development over the years.

#### **Economic Outlook**

<u>Employment.</u> Employment statistics were obtained from the U.S. Department of Commerce, Bureau of the Census (1990). The population of Roxboro is 7332 with a total labor force of 3634 people. In 1990, 47% of Roxboro residents were employed and of these workers 52%, were male. Unemployment in Roxboro was at 6%.

In Roxboro, employment is divided into three categories: nonmanufacturing, manufacturing and agriculture. In 1990, 57.7% of jobs were in non-manufacturing, 39.5% in manufacturing and 2.8% in agriculture (U.S. Department of Commerce, Bureau of the Census, 1990).

<u>Non-Manufacturing.</u> Roxboro residents are primarily employed in nonmanufacturing which includes construction, finance/insurance/real estate, government, services, wholesale trade, retail trade and transportation/communication/public utilities. The breakdown of employees in each division is listed in Table 1.

 Table 1. Percent of Employed Population Working in Each Sector in Roxboro in

 1990.

Employment Sector	% of Roxboro Employed
Manufacturing	39.5% (N= 1,348)
Non-manufacturing	57.7% total (N= 1,970)
Mining	0.4%
Construction	6.0%
Financial/Insurance/Real estate	2.0%
Government	4.9%
Services	22.4%
Wholesale trade	2.0%
Retail trade	14.0%
Transport/Commun/Public Utilities	6.0%
Agriculture	2.8% (N= 97)

Source: U.S. Department of Commerce, Bureau of the Census (1990). Census of Population and Housing.

Manufacturing. Manufacturing is a large component of the Roxboro economy, and includes both durable and non-durable goods. Of the 10 largest manufacturing employers in Person County, 9 are located in Roxboro with each company employing between 200 and 1500 people (see Table 2). Table 2. Largest Manufacturing Employers in Roxboro in 1996.

Rank in Size	Manufacturer	Established	Employment
1	Collins & Aikman Corp	1904	1500
2	Crown Crafts Inc	1984	1000
3	Eaton Corporation	1964	450
4	Dailight Corporation	1938	300
5	Fleetwood Homes of NC	1986	300

6	Wolverine Tube Inc	1994	105
7	Loxcreen Company, Inc.	1968	250
8	Georgia-Pacific Corp	1994	200
9	AmeriMark/Alsco Building Products	1959	200

Source: North Carolina Department of Commerce (1997). Person County Profile. Available: Internet: www.opsl.state.nc.us/econscan

#### Agriculture.

Statistically, agriculture is a small component of the economy of Roxboro. According to the 1992 Census of Agriculture, there are 267 farms in Roxboro. Most of these farms are small, consisting of 1 to 49 acres. However, there are also 62 farms that harvest 50 to 499 acres of cropland, and three that harvest 500 acres or more. Tobacco is the most widely grown crop and is found on 187 farms in Roxboro. Of the population in Roxboro, 150 people claim farming as their principle occupation.

<u>Minority Workers.</u> Statistics describing the minority population in Roxboro are from the 1990 Decennial Census (U.S. Department of Commerce, Bureau of the Census, 1990). Roxboro has a large number of African-Americans, comprising 42% of the population of Roxboro and 39% of the labor force. In contrast, the other minority populations of Roxboro are very small. American Indians, Eskimos, and Aleuts represent 2.3% of the labor force and there were no Asian or Pacific Islanders in the labor force in 1990. Although Roxboro residents report that there is a Latino population of migrant farm workers, the census has been unable to capture this population due to their transience. There is no data to indicate whether or not minority populations are concentrated in specific areas of employment.

<u>Growth.</u> Information pertaining to economic growth was obtained from the Roxboro Chamber of Commerce and the individual companies. Roxboro is experiencing significant growth. GKN Automotives (1993, 400 employees), Georgia Pacific (1994, 200 employees), Louisiana Pacific (1995, 111 employees) and Wolverine Tube (1994, 105 employees) have all built plants in Roxboro in the last 5 years. In 1997, Eaton Corporation expanded its operations in Roxboro. Fleetwood Homes has recently built a new facility in Roxboro, but the company has not set a date for its opening.

#### Conclusion

Over the years, Roxboro has evolved from a small mill town into an industrialized city. With economic growth, employment opportunities in Roxboro have increased and diversified. Roxboro has also increased in square footage with the recent annexation of land. Attempts are being made to recapture and maintain the original small town atmosphere of the historic downtown area through revitalization.

#### COMMUNITY PROFILE FROM SECONDARY DATA

#### <u>Overview</u>

Certain sociodemographic characteristics help define a community. Factors such as gender, race, income, education, employment, family structure and housing provide valuable insights into a community's composition. The 1990 U.S. Census provides a breakdown of this statistical information allowing comparisons of Roxboro to Person County and the state of North Carolina. These statistics are known as secondary data. Due to limitations of the secondary data, it is difficult to draw exact conclusions for the city of Roxboro.

#### Limitations of the secondary data

There are several main limitations that were encountered by using data from the U.S. Census. The first limitation is that the most current data available is from 1990. These data are nine years old and therefore do not reflect the current changes occurring within the county, city and state. Some of the data at the city, county and state level are as recent as 1998. However, this data is not available across all categories and was therefore not used for this document. Comparisons are more meaningful by using the U.S. Census 1990 data.

Another limitation is that the most current data for Roxboro does not include

the increased population and demographics from newly annexed land in July 1998

(Courier-Times, 1998). The annexation may change the data in either direction. Per capita income, poverty levels, education levels, unemployment and race categories may either have increased or decreased due to the additional citizens of Roxboro.

The inability to include the migrant Latino population due to their seasonal employment is the final limitation of the secondary data. This is problematic because there is a lack of census data representation of Latinos in Roxboro, Person County and North Carolina who would have contributed to the employment rates, poverty rates, educational levels and seasonal income of these areas.

#### Census data and analysis

The data presented within this document are the most representative data available for comparing Roxboro, Person County and North Carolina. Additionally, since Roxboro is an incorporated city, there is a greater depth of information available on the city level than if Roxboro were an unincorporated town. For the purposes of this document, the term African-American will be utilized in the text instead of the term Black. The U.S. Census uses the term Black and therefore, it is presented within the tables of this document.

Table 3. Population by Age, 1990.

Age	Roxboro	Person County	North Carolina
0-4	498	1,996	456,336
	6.8%	6.6%	4.6%
5-15	937	4,509	969,071
	12.8%	14.9%	15.0%
16-20	556	2,189	524 444
10-20		-	524,114
	7.6%	7.3%	8.1%
21-24	450	1,433	425,622
	6.1%	4.7%	6.6%
25-54	2,741	12,848	2,865,605
	37.4%	42.6%	44.3%
55-64	714	2,930	585,832
	9.7%	9.7%	9.1%
	4.400		
65+	1,436	4,275	802,057
	19.6%	14.2%	12.4%
TOTAL	7 000	20.400	C COO CO7
	7,332	30,180	6,628,637

### Source: U.S. Census, 1990

Table 3 shows that Roxboro has a larger percentage of residents over the age of 65 than Person County and North Carolina. Both Roxboro and Person County have a higher percentage of people in the 0 - 4 age group than North Carolina. Therefore, Roxboro has a larger elderly group and also a larger 0 - 4 years old population.

Race	Roxboro	Person County	North Carolina
White	4,167	20,740	5,008,491
	56.8%	68.7%	75.4%
Black	3,097	9,106	1,456,323
	42.2%	30.2%	22.0%
American Indian,	41	181	80,155
Eskimo, Aleut	0.6%	0.6%	1.2%
Asian Pacific	12	15	52,166
Islander	0.2%	0.0%	0.8%
Other	15	138	31,502
	0.2%	0.5%	0.6%

Source: U.S. Census , 1990

Table 4 shows that Roxboro has a greater proportion of African-American residents than both Person County and North Carolina. African-Americans comprise 22.0% of North Carolina's population, while 42.2% of Roxboro's population is African-American. Across all categories, Whites comprise the majority of the population. In comparison to Person County and North Carolina, Roxboro's population breakdown is more evenly distributed between Whites and African-Americans.

Sex	Roxboro	Person County	North Carolina
Female	3,998	15,748	3,414,347
	54.5%	52.2%	51.5%
Male	3,334	14,432	3,214,290
	45.5%	47.8%	48.5%

Source: U.S. Census, 1990

There is a slightly higher proportion of females than males in Roxboro (Table 5). This is consistent with the gender ratio of Person County and North Carolina.

Race	Roxboro	Person County	North Carolina
White	\$11,967	\$12,797	\$14,450
Black	\$6,585	\$7,487	\$7,926
American Indian, Eskimo, Aleut	\$9,977	\$9,486	\$8,097
Asian Pacific Islander	\$0.00	\$0.00	\$11,127
Other	\$0.00	\$5,362	\$7,974

Table 6. Per Capita Income by Race/Ethnicity, 1990.

Source: U.S. Census, 1990

Table 6 reveals that in Roxboro, Whites have almost twice the per capita income of African-Americans. This is true for both Person County and North Carolina. African-Americans in Roxboro have less per capita income than African-Americans in both Person County and North Carolina. Also, Whites in Roxboro and Person County have lower per capita incomes than the state. American Indians, Eskimos and Aleuts have a higher per capita income in Roxboro then those in Person County and North Carolina.

Table 7. Persons Below the Poverty Level by Race/Ethnicity, 1990.

_		_	
Race	Roxboro	Person County	North Carolina

453	1,320	419,479
11.53%	6.44%	8.38%
1,070	2,499	377,109
35.57%	27.91%	25.89%
0	22	19,613
0.00%	.07%	24.47%
0	0	7,213
0.00%	0.00%	13.83%
0	15	6,444
0.00%	.05%	20.46%
	11.53% 1,070 35.57% 0 0.00% 0 0.00% 0	11.53%       6.44%         1,070       2,499         35.57%       27.91%         0       22         0.00%       .07%         0       0         0.00%       15

Source: 1990 U.S Census

Roxboro has a larger proportion of Whites and African-Americans in poverty than Person County and North Carolina (Table 7).

## Table 8. Percentage of Households that Own and Rent Homes, 1990.

Own or Rent	Roxboro*	Person County**	North Carolina
Own	1,589	8,284	1,711,882
	49.7%	66.0%	68.0%
Rent	1,431	3,139	805,144
	44.8%	25.0%	32.0%

Source: 1990 U.S. Census \*- Roxboro does not have complete occupancy of housing units, resulting in less than 100% own or rent. \*\*-Person County does not have complete occupancy of housing units, resulting in less than 100% own or rent in Person County.

Table 8 reveals that more residents in Roxboro own their homes than rent

them. This is also true for Person County and North Carolina.

Table 9. Number and Percent of Persons Medicaid Eligible, 1996.

	Roxboro	Person County	North Carolina
Medicaid	Data not	5,637	638,340
Eligibility	Available	18.7%	9.6%

Source: State Data Center, 1996

The proportion of Person County's population eligible for Medicaid is 18.7% in contrast to the state where it is 9.6% (Table 9). Data for Roxboro is unavailable for comparison.

Race	Roxboro	Person County	North Carolina
White	86	428	94,814
	2.06%	2.06%	1.89%
Black	133	315	62,586
	4.29%	3.46%	4.30%
American Indian,	0	0	3,420
Eskimo, Aleut	0.00%	0.00%	4.27%
Asian Pacific	0	0	1,400
Islander	0.00%	0.00%	2.68 %
Other	0	0	861
	0.00%	0.0%	2.73%

## Table 10. Unemployment Rates by Race, 1990.

Source: 1990 U.S. Census

Table 10 indicates that the unemployment rates for Whites in Roxboro and Person County are exactly the same, and these rates are higher than that of North Carolina. Unemployment rates for African-Americans are very similar in Roxboro and North Carolina. These rates are higher than that of Person County.

Education Level	Roxboro	Person County	North Carolina
Less than 9 <sup>th</sup> Grade	993	3,398	539,974
	17.6%	14.9%	12.7%
9 <sup>th</sup> – 12 <sup>th</sup> Grade	1,329	4,913	737,773
	23.5%	21.6%	17.3%
High School or GED	1,855	7,998	1,232,868
	32.8%	35.1%	29%
Some College	755	3,103	713,713
	13.4%	13.6%	16.8%
Associate's Degree	310	1,757	290,117
	5.5%	7.7%	6.8%
Bachelor's Degree	295	1,194	510,003
	5.2%	5.2%	12%
Graduate or	116	419	229,046
Professional Degree	2.1%	1.8%	5.4%
	5,653	22,782	4,253,494

Table 11. Educational Levels of Persons 18 or Older, 1990.

Source: 1990 U.S. Census

Table 11 shows that in comparison to the state, Roxboro and Person County have a higher proportion of high school graduates. In comparison to Person County and North Carolina, Roxboro has a greater percentage of people with less than a high school education. Roxboro has two times less the proportion of graduate or professional degree holders than the state and this percentage is slightly higher than that of Person County. Roxboro and Person County have the same percentage of people with bachelor degrees; this is approximately two and a half times less than the state.

## Table 12. Dropout Rates, 1995-1996.

	Roxboro	Person County	North Carolina
Dropout rates	3.36%	3.36%	3.45%
Courses, Dublic Schools of North Coroling, 1007			

Source: Public Schools of North Carolina, 1997

The public high school in Roxboro serves approximately 1,527 students. Because this is the only public high school in Person County, it is difficult to differentiate the drop out rate for those students who live in the city of Roxboro from those who live in other parts of Person County. Therefore, public school dropout rates are synonymous for Person County and Roxboro. As shown in Table 12, dropout rates for Roxboro, Person County and North Carolina are very similar.

Household	Roxboro	Person County	North Carolina
Married couple family; with			
children	533	3,136	667,611
	25.8%	36%	34.8%
Married couple family;			
without children	746	3,471	756,595
	36.1%	39.4%	39.4%
Male householder; no wife:			
with children	61	218	39,752
	2.9%	2.5%	2.1%
Male householder; no wife;			
without children	59	198	38,219
	2.8%	2.2%	2.0%
Female householder; no			
husband; with children	373	939	201,917
	18.0%	10.7%	10.5%
Female householder; No			
husband; without children	206	608	107,959

Table 13. Heads of Households and Presence of Children Under 18, 1990.

	10%	6.9%	5.6%
Non-family households	91	245	108,014
-	4.4%	2.8%	5.6%
	2069	8,815	1,920,067
TOTAL			

Source: 1990 U.S. Census

Table 13 shows that the majority of households are married without children in Roxboro, Person County and North Carolina. Person County and North Carolina have the same percentage of married households without children, while Roxboro is slightly lower. In Roxboro, there is a higher number of female householders with and without children in comparison to male householders with and without children. This is also true at both the county and state level.

#### <u>Conclusion</u>

While there are limitations to the available secondary data for Roxboro, Person County and North Carolina, these limitations do not negate the usefulness of the data and several conclusions can be drawn. Compared to Person County and North Carolina as a whole, Roxboro has a lower per capita income, a greater percentage of persons below the poverty line, higher unemployment rates for African-Americans and a higher percentage of female headed households. However, the unemployment rates for Roxboro, Person County and North Carolina are similar.

### HEALTH SECTION Overview

There are a number of factors that affect the health of a community. Mortality and morbidity rates in a population are good measures of the incidence and prevalence of death and disease. Social health, including crime and violence, and environmental health are also good indicators of the health of a community. Data presented in this section are reflective of Person County unless otherwise stated. There are little data available for the city of Roxboro. However, Person County data are representative of Roxboro with regard to health issues.

### <u>Mortality</u>

The total age-adjusted death rates for 1992 to 1996 in Person County and North Carolina are 8.7 and 8.5 per 1,000 respectively (State Center for Health Statistics, 1996a). The leading causes of death in both Person County and North Carolina are listed in Table 14. Mortality rates for heart disease, respiratory cancer, stroke, unintentional injuries, liver disease and suicide are higher in Person County than for North Carolina.

The Governor's Task Force on Health Objectives for the Year 2000 developed a list of objectives to "improve health status and prevent premature death and disability" among individuals and communities in North Carolina (North Carolina Governor's Task Force on Health Objectives for the Year 2000, 1992, p.1). The objectives relevant to mortality are listed in Table 14. Person County's death rates exceed the objectives for the following causes: heart disease, stroke, suicide and chronic obstructive pulmonary disease (COPD). Person County has

achieved the Healthy Carolinian 2000 objectives for deaths due to cancer,

diabetes and motor vehicular injuries.

Table 14. Leading Causes of Mortality for County and State for 1992-1996 (Death rates per 100,000 persons).

			Healthy Carolinian's
Health Indicators	County	State	2000 Objective
Heart Disease	261.1	258.8	248.9
Total Cancer	193.0	199.2	204.7
Cancer – Trachea, Bronchus, and Lung	70.1	60.2	
Cancer – Female Breast	24.8	27.5	
Cancer - Prostate	29.0	37.6	
Cerebrovascular Disease	88.0	66.3	62.4
Pneumonia and Influenza	29.5	29.9	
Chronic Obstructive Pulmonary Disease	30.6	37.2	25.5
Diabetes	19.6	22.2	20.3
Motor Vehicle Injuries	24.6	20.5	29.6
Injuries – Other	26.0	20.1	
Chronic Liver Disease and Cirrhosis	13.2	9.4	
Nephritis and Nephrosis	7.8	8.4	
Atherosclerosis	6.3	5.3	
AIDS	5.4	12.1	
Homicide	5.0	11.2	
Suicide	17.2	12.4	10.6

#### Source: State Center for Health Statistics, 1996b

Age-specific death rates for Person County and North Carolina are shown in Table 15. For children and teenagers, mortality rates due to unintentional injuries are higher in Person County than in North Carolina. Heart disease, cancer, and suicide death rates for persons aged 20 to 39 are higher for the county than for North Carolina. Mortality rates due to motor vehicle injuries, liver disease and suicide for Person County residents between the ages of 40 and 64 are higher than the state's average. Breast cancer mortality rates in Person County are well above the state average range for those in the 65 to 84 age group, and stroke rates are above average for both the 65-84 year olds and

those over 85.

Table 15. Age-Specific Death Rates Per 100,000 Persons by Selected Causes, 1991-1995.

1991-1995.	0	
Health Indicators	County	State Average Range
Less than 20	0.44	
Total Cancer	2.41	2.5-3.8
Injuries - Other	24.10	6.2-9.3
Motor Vehicle Injuries	16.87	11.5-17.2
Suicide	0.00	2.8-4.2
20 – 39		
Heart Disease	15.04	9.4-14.1
Total Cancer	25.74	12.1-18.1
Injuries - Other	10.75	10.6-15.9
Motor Vehicle Injuries	25.79	20.7-31.0
Suicide	25.79	11.8-17.7
AIDS	12.90	17.4-26.1
40-64		
Heart Disease	166.53	148.5-222.8
Total Cancer	259.79	177.1-265.7
Female Breast Cancer	55.68	37.7-56.5
Cerebrovascular Disease	24.42	25.9-38.8
Chronic Obstructive Pulmonary Disease	11.10	16.8-25.1
Diabetes	11.10	16.8-25.1
Injuries - Other	17.76	13.9-20.8
Motor Vehicle Injuries	24.42	13.8-20.7
Chronic Liver Disease and Cirrhosis	24.42	15.3-23.0
Suicide	22.20	12.1-18.2
65-84		
Heart Disease	1383.04	1070.4-1605.6
Total Cancer	1011.25	836.2-1254.3
Female Breast Cancer	148.00	89.3-133.9
Cerebrovascular Disease	416.40	262.7-394.1
Pneumonia and Influenza	128.89	105.0-157.5
Chronic Obstructive Pulmonary Disease	208.20	184.4-276.6
Diabetes	104.10	92.5-138.7
Over 85		
Heart Disease	5577.87	4630.7-6946.1
Total Cancer	1070.95	1344.4-2016.6
Cerebrovascular Disease	2900.49	1540.3-2310.5
Pneumonia and Influenza	892.46	819.7-1229.6
Chronic Obstructive Pulmonary Disease	401.61	334.3-501.5
Diabetes	223.11	196.9-295.3
Source: Person County Health Department, 199		

Source: Person County Health Department, 1998a

Note. Bold numbers represent county rates above state average range.

As shown in Table 16, males have higher stroke and COPD mortality rates than females in Person County. White males have the highest death rate due to motor vehicle injuries and suicide. Minority males have the highest mortality rates due to heart disease, cancer, pneumonia and liver disease. Non-motor vehicle injuries are higher for white females and minority males. The minority female breast cancer mortality rate is twice as high as the rate of white female breast cancer.

 Table 16. Age-Adjusted Death Rates in Person County per 100,000 Persons for Selected

 Causes by Sex and Race, 1991-1995.

	White	White	Minority	Minority
Health Indicators	Males	Females	Males	Females
Heart Disease	191.7	93.1	238.7	119.0
Total Cancer	73.6	106.3	205.7	127.8
Female Breast Cancer		20.8		42.0
Cerebrovascular Disease	50.6	27.2	51.5	34.2
Pneumonia and Influenza	17.4	5.9	24.7	14.9
Chronic Obstructive Pulmonary Disease	32.7	9.5	32.0	4.9
Diabetes	9.6	4.4	20.8	18.0
Injuries - Other	27.5	12.7	38.8	0.7
Motor Vehicle Injuries	32.7	9.4	21.1	25.1
Chronic Liver Disease and Cirrhosis	12.6	2.3	17.4	4.3
Nephritis and Nephrosis	6.3	1.1	10.1	6.1
Suicide	41.0	3.7	5.4	6.7
Septicemia	6.4	7.6	3.8	7.3

Source: Person County Health Department, 1998a

## Morbidity

Disease rates in Person County are below the state average range for the following communicable diseases: AIDS, Tuberculosis, Syphilis, Hepatitis A, Hepatitis B, Pertussis, and Salmonellosis (see Table 17). Total gonorrhea rates for Person County are within the average range for North Carolina, but exceed the Healthy Carolinian objective of no more than 225 cases per 100,000 people (North Carolina Governor's Task Force on Health Objectives for the Year 2000,

1992). However, the incidence rate of gonorrhea for minorities in Person County is below both the state average range and the Healthy Carolinian objective of no more than 1300 cases per 100,00 people (North Carolina Governor's Task Force on Health Objectives for the Year 2000, 1992). The rate of Lyme Disease in Person County is considerably higher than the rate for North Carolina. However, this is most likely due to more screening and diagnosis of the disease in Person County and is therefore considered a strength rather than a source of concern (Person County Health Department, 1998a).

Health Indicators	County	State Average Range
AIDS <sup>a</sup>	6.4	9.24 - 13.86
Tuberculosis <sup>a</sup>	5.15	6.68 - 10.02
Gonorrhea <sup>b</sup>	346.29	290.70 - 436.29
Gonorrhea in Minorities <sup>b</sup>	1021.54	1067.79-1601.69
Syphilis Rate <sup>b</sup>	3.18	17.87 - 26.81
Syphilis in Minorities <sup>b</sup>	10.39	67.47-101.21
Hepatitis A Rate <sup>c</sup>	0.64	1.51 - 2.27
Hepatitis B Rate <sup>c</sup>	3.19	3.83 - 5.75
Lyme Disease Rate <sup>c</sup>	3.83	0.86 - 1.30
Pertussis Rate <sup>c</sup>	0.64	1.62 - 2.42
Salmonellosis Rate <sup>c</sup>	11.5	13.33 - 19.99

Table 17. Communicable Disease Case Rates per 100,000.

**Source: Person County Health Department, 1998a** <u>Note</u>. <sup>a</sup> = 1991-1995. <sup>b</sup> = 1993-1995. <sup>c</sup> = 1992-1996; bold numbers represent county rates above state average range.

Incidence rates for chronic diseases in Person County are not available for all common illnesses. Disease rates that are available will be presented in this document along with the most common reasons for hospital admission. Although total cancer rates in Person County are below the state average, the county has a higher rate of both breast cancer and prostate cancer (see Table 18). The incidence rate of diabetes in Person County is within the average range for North

Carolina; this is true across gender, race and all age groups (Person County Health Department, 1998a).

	County		State	
	Incidence	Rate	Incidence	Rate
All Cancer	442	385.2	81,288	355.2
Female Breast Cancer	84	133.7	13,328	106.8
Prostate Cancer	69	142.3	12,492	131.2

*Table 18. Age-Adjusted Cancer Incidence and Incidence Rate per 100,000, 1990-1992.* 

Source: State Center for Health Statistics, 1995

#### **Health Services**

The city of Roxboro provides a variety of health services to its residents. These services are available for all of Person County while the majority of services are located within the city of Roxboro. The main health service providers for Roxboro and Person County are: the Person County Memorial Hospital, the Person County Health Department, the Rescue Squad, Person Family Medical Center and Person Counseling Center. The location of Person County is beneficial to its residents' health because of its close proximity to Duke Medical Center in Durham County. The people of Person County, including the residents of Roxboro, are on average within 25 minutes of Duke Medical Center and its available medical resources.

<u>Hospital Services</u>. The Person County Hospital, which is located in Roxboro, provides medical care to Person County, Northern Caswell County and Northern Durham County (Hospital Administrator R. Cabonar, personal communication, October 21, 1998). The hospital opened its doors in 1950 as a memorial for soldiers from Person County who were killed in action during World War I and II. The hospital has a total of 110 beds, 50 acute care beds and 60 long-term care beds yielding a bed to person ratio of 1:750. This is a larger ratio than the state which has a bed to person ratio of 1:321 (Person County Health Department, 1998a).

Recently, the hospital has undergone some substantive personnel changes. For the ten years prior to 1997, Quorum Health Group managed the hospital. In 1997, the hospital board re-evaluated the hospital's mission and sought out a regional non-profit managerial team. Duke Medical Center was awarded the managerial contract for Person County Memorial Hospital and now employs the hospital administrator and the chief executive officer (R. Cabonar, personal communication, October 21, 1998). This managerial contract has allowed these two hospitals to develop a working relationship. Specialists from Duke Medical Center work two times a week at Person County Memorial Hospital so residents can obtain a diverse array of medical attention without traveling outside of their community.

The Person County Memorial Hospital provides various acute, inpatient and outpatient medical care. These services include pediatrics, psychiatry, mammography testing, chemotherapy treatment, occupational and physical therapy, speech pathology, respiratory therapy and radiology. In addition to these services, the hospital has three operating rooms, a full laboratory and pharmacy, seven bays in the emergency room, six intensive care beds, six obstetric beds, a mobile unit for Magnetic Resonance Imaging and one trauma room.

The Person County Memorial Hospital serves many different populations. In 1997, approximately 35-40% of hospital patients were Medicare recipients (R. Cabonar, personal communication, October 21, 1998). Approximately 1,000 people per month utilized the emergency room services (R. Cabonar, personal communication, October 21, 1998). In addition, the hospital works in cooperation with the Person County schools to create work experience opportunities for high school students within the hospital. Furthermore, Person County Memorial Hospital hosts a monthly program for the community called "Health Night Out." This program presents various health topics like nutrition and stress management. The sessions are led by a health care provider and are promoted by the local newspaper.

Health Department Services. The Person County Health Department is located in Roxboro. This facility offers various preventive health care services as well as health promotion and education. These services include: family planning, pregnancy testing, immunizations, home health and hospice, maternity programs, child health programs, a teen clinic, dental health programs, adult health programs, women's health programs, communicable disease programs, including testing for sexually transmitted diseases and vital statistics registration. The Board of Health plays an important role in the work of the Health Department. This board, along with input from the community, makes recommendations to the County Commissioners about what the Health Department should focus on (Board of Health Chair B. Tillet, personal communication, October 28, 1998). A current priority within the Health Department is developing an HIV Task Force and the Smart Start program targeting children's health from 0-5 years of age (R. Cabonar, personal communication, October 21, 1998).

The Woman's Health Program offers income eligible women between the ages of 50-64 free or low cost mammograms, Pap smears, breast exams, lab work, referrals and follow-up care. As a component of the Women's Health Program, cancer screenings are available through the Breast and Cervical Cancer Program. Through this program, 210 women were screened for cancer in 1997 (L. Creson, personal communication, October 26, 1998). These services target women who are not yet eligible for benefits of Medicare due to age requirements.

The Dental Health Program began in April 1998 for children ages 0 - 21 years old. The Health Department was able to build an on-site dental health clinic through a grant funded by Smart Start. The clinic is a fully equipped, three-chair facility, operated and staffed 3 and 1/2 days per week. The State of North Carolina also provides dental screening for Caswell and Person County elementary schools. Many referrals are sent to the Person County Health Department's Dental Health Program. Within the first 6 months of operation, 110 children have been seen (Person County Health Department , 1998b). Medicaid covered the majority of these visits (see Table 19).

Table 19. Dental Health Program Visits, April-September, 1998.

Total Dental Visits	Medicaid Dental Visits	Non Medicaid Visits		
110	83	27		
Source: Person County Health Department, 1998b				

<u>Primary Care Services</u>. The Person Family Medical Center (PFMC) provides many primary care services such as: pediatrics, adolescent and women's health services and adult medicine including geriatrics. PFMC is a state funded, Federal Qualified Health Center with an indigent program supplying free medical prescriptions to patients. In addition, there is a reduced payment program to cover doctor visits for those patients who qualify (J. Daye, personal communication, October 28, 1998). "Nursing home care, hospital care, and home visits/house-calls are provided by the physicians, who are fellowship-trained in the areas of geriatrics, faculty development and public health" (Person County Health Department, 1998a, p 7).

<u>Barriers to Accessing Health Care.</u> The City of Roxboro is faced with several barriers to accessing health care. There is no public transportation in Person County or Roxboro. Therefore, it is difficult for residents without transportation to visit the Person County Health Department and/or Person County Memorial Hospital. To access the available services, a free shuttling service has been made available since 1983 through Kerr Area Regional Transit Services (KARTS) which serves approximately 500 people per day in the Kerr region (KARTS Public Transit System, personal communication, November 30, 1998). In the spring of 1997, a survey was placed in the Courier Times, a local newspaper. There were 479 respondents. One of the questions in the survey asked, "What keeps people from getting adequate health care?" Responses to this question, ranked from the highest to lowest, were:

- 1. Money problems
- 2. Long waits for available services
- 3. Transportation services
- 4. Poor services offered
- 5. Hours that services are available (Person County Health Department, 1998a).

The Person County Health Department regularly compiles its own Community Diagnosis to identify and assess the constraints of the community's health resources. The 1998 Community Diagnosis mentions that transportation continues to be a barrier for residents of Roxboro. Although the Health Department has not addressed the transportation barrier, efforts are being made to extend the hours of certain services. No other barriers are being addressed at this time.

North Carolina has a provider to population ratio of 1:548 while Person County has a ratio of 1:1,630 (Cecil G. Sheps Center for Health Services Research, 1996). However, this does not necessarily translate into a higher patient load, as many people may go outside of the county to receive health care. Table 20 lists specific types of health care providers to person ranges for the state and rates for the county level. Ranges are used for the North Carolina level to illustrate the variable number of health care providers in the state as reported by the Person County Community Diagnosis.

Table 20. Number of Providers to Population, 1995.

Providers	North Carolina	Person County
Primary Care Physicians	1:1,088-1,632	1:3,571
Primary Care Physicians plus Extenders	1:886-1,328	1:2,927
Registered Nurses	1:100-150	1:272
Dentists	1:2,026-3,040	1:3,571

Source: Person County Community Diagnosis, 1998a

Emergency Services. Emergency safety and medical services are also available in Roxboro. The Roxboro Fire Department provides emergency safety to Roxboro. Included in their area of response is a 5-mile radius in all directions from Roxboro (Chief J. Gentry, personal communication, October 29, 1998). The fire department also responds to any location within Person County for structural and building fires (J. Gentry, personal communication, October 29, 1998). There are 20 fire fighters with 6 people on duty 24 hours a day (J. Gentry, personal communication, October 29, 1998). There are 20 fire fighters with 5 people on duty 24 hours a day. The area of response is Person County with the furthest location being 12 minutes away (3<sup>rd</sup> in command G. Davis, personal communication, October 29, 1998). There are 25 volunteers shared between the fire department and the rescue squad (J. Gentry, personal communication, October 29, 1998).

### Social Health

The health of a community encompasses much more than formal medical care. Mental health services, church associations and social and civic organizations influence a community's health status beyond the care that medical centers provide. In terms of social support, the residents describe Roxboro as being a small town with caring and compassionate residents (L. Creson, personal

communication, October 26, 1998). Roxboro and Person County have rallied around community health issues in the recent past. An example of such cooperative efforts is the cancer fundraiser, *Relay for Life*. Participation in this event grows every year and is increasingly more successful at raising funds. The profit from the cancer research fundraiser totaled nearly \$200,000 in 1998 (R. Cabonar, personal communication, October 21, 1998).

As a social indicator of health, issues of mental well being are also of great concern to the residents of Roxboro. The Person Counseling Center, which is located in Roxboro, provides therapy and treatment for substance abuse and severe mental illness. The center works in collaboration with a court mandated program called the Treatment Alternative to Street Crime (TASC) which "provides liaison services between the Criminal Justice System and Substance Abuse Treatment and Educational Services" (Person Counseling Center, 1998). This program provides an alternative to prison, with case management services that provide job training and placement, medical services and education to approximately eight people per month in 1997 (P. Long, personal communication, November 30, 1998).

Several services meet the needs of the aging population in Roxboro. The Person County Council on Aging coordinates and strengthens services for older adults in the community and is funded by federal and state grants and by the United Way. The council advocates quality care and provides social, legal and educational programs for older adults. There are also several home health care agencies for people over the age of 60 that operate in Person County. The In Home Aide Services is another program funded by the United Way, which is administered through the Person County Council on Aging. This home care service provides meal preparation, housekeeping and personal hygiene care to older clients. Community Care Incorporated is another provider of home health care in Person County; however, its services are available to all people, regardless of income levels. For those in assisted living and nursing home settings, Circles Visiting Service Incorporated provides assistance and support for clients whose family members are unable to visit and care for the clients' needs. However, people with limited income may not utilize this service as it is only partially subsidized and covered by health insurance.

There are limited recreational and structured activities in Roxboro. Without a local community center, movie theater or mall, people may be more inclined to become involved in drug use and other deviant behaviors. In 1996, an estimated 3,196 residents of Person County were addicted to drugs and/or alcohol (Alcohol/Drug Council of North Carolina, 1996). Drug and alcohol addictions not only affect the persons who are addicted. This issue affects the addict's family and loved ones as well as the community as a whole. There were 1,584 Driving While Intoxicated (DWI) arrests per 100,000 in Person County during 1996, which is much higher than the state rate of 946 DWI arrests per 100,000 people (Alcohol/Drug Council of North Carolina, 1996).

There are several educational resources for children in Roxboro. The Head Start Program of Person County, which is staffed by community volunteers, offers mentoring and tutoring to children in need, working primarily through positive role modeling. In terms of formal education, the Children's Learning Center in Person County serves children, ages two to six, with special needs. The school offers developmental screening and assessment, schooling, limited transportation services and meals. The school encourages parental involvement in the learning process and provides parental support in the family's home. Income level and ability to pay determine tuition.

Social support is an important factor in the health of a community. Churches play an influential role in the lives of Roxboro residents. While church members traditionally have offered emotional and social support to each other, some churches are now also offering programs to its members to promote selfesteem, good health and community involvement. For example, in 1998 Bailey's African Methodist Episcopal Church sponsored a program called 'Woman Thou Art Whole', a one day empowerment workshop for African-American women in Roxboro.

There are also several civic clubs and organizations in Roxboro that provide social outlets for community members as well as services for the community. The Roxboro Jaycees is one of the largest organizations in Person County for young men and women. This civic organization is involved in many health, holiday and community social projects in Person County. Jaycees social and civic programs include: fair parking, adopt-a-highway program and a community haunted house.

There is strong leadership representing the needs and concerns of various groups of people in Roxboro (B. Tillet, personal communication, October 28,

1998). The community demonstrates a strong commitment to the health and well being of its residents. While Roxboro has a small town atmosphere, the residents value the diversity of services and organizations that keep community members healthy (B. Tillet, personal communication, October 28, 1998).

### **Crime and Violence**

There are many repercussions of crime and violence within a community. Not only must the community absorb monetary property losses but the community must also deal with the social and psychological effects of crime and violence. Residents' perceptions of their safety affect their mental health as well as their social interactions with others within their community. In addition, medical, law enforcement and emergency resources all feel the strain that crime has on a community.

There are many types of crime, each affecting the community differently. Violent crime seems to have the greatest psychological effect on a community. Violent crime is defined as incidents of aggravated assault, murder, robbery and forcible rape. Person County's violent crime rate is 396.7 incidents per 100,000 people, while North Carolina's rate is 618.9 per 100,000 people (State Bureau of Investigation, 1997). The Roxboro crime rate is significantly lower than North Carolina's crime rate as reported by Police Chief Terry Hill. However, like North Carolina, the rate of violent crime is on the rise in Person County. The violent crime rate in Person County increased from 314.2 per 100,000 in 1996 to the current rate of 396.7 per 100,000 (State Bureau of Investigation, 1997).

There were 70 violent crimes committed in Roxboro in 1996 and 69 violent crimes committed in 1997 (State Bureau of Investigation, 1997). There was a significant drop in the incidence of forcible rape in Roxboro while there was an increase in aggravated assaults (see Table 21). There has not been a reported murder in Roxboro in five years (T. Hill, personal communication, October 28, 1998).

Year	Murder	Forcible Rape	Robbery	Aggravated Assault
1996	0	8	14	48
1997	0	2	15	52

Source: State Bureau of Investigation, 1997

The other major crimes committed are classified as property crime. These include breaking and entering, larceny, motor vehicle theft and arson. Property crime decreased slightly at the state level, dropping from 5,047.0 incidents per 100,000 in 1996 to 4,972.4 per 100,000 in 1997. Similarly, Person County's property crime rate has decreased from 3,211.0 per 100,000 in 1996 to 2,820.3 per 100,000 in 1997 (State Bureau of Investigation, 1997). The City of Roxboro has also experienced a decrease in property crime. In 1996, there were 513 reported incidents, but this dropped in 1997 to 447 reported incidents (State Bureau of Investigation, 1997). The greatest change in property crime in Roxboro was a 23.9% decrease in the number of larcenies reported in 1997.

Overall, the number of crimes reported within Roxboro has decreased. This decrease may be attributed to the Roxboro Police Department's pro-active approach to crime. The police department acquired five new officers in 1998 to increase the total number of officers to 33 (T. Hill, personal communication, October 28, 1998). Also, police officers are encouraged to repeatedly patrol assigned areas. A "focus on the small crime" philosophy (T. Hill, personal communication, October 28, 1998) has been implemented by Police Chief Terry Hill. Small crime is not ignored, but is addressed in an aggressive manner, which may serve as a deterrent to more serious crime. In Roxboro there is also a focus on community policing. Therefore, officers take the initiative to ask citizens what they think the safety concerns are in their neighborhoods. Traditionally, community policing has also encompassed police sub-stations and community liaison officers. At this time, there are no police sub-stations due to the size of Roxboro and the central location of Roxboro City Police Department Headquarters (T. Hill, personal communication, November 30, 1998). Currently, there are no specific community liaison officers for Roxboro (T. Hill, personal communication, November 30, 1998). This pro-active, community-based approach to policing seems to be having a positive impact on reducing crime in Roxboro.

#### Environmental Health

Many environmental health problems are consequences of overpopulation and industrialization. Since Roxboro is neither over populated nor overindustrialized, the area does not suffer from major environmental health problems. There are minor problems associated with maintaining and monitoring the environmental health of Roxboro (W. Dunn, personal communication, October 30, 1998). Residents are concerned about two issues, the new landfill on HWY 158 East and the use of sludge as fertilizer by farmers in Roxboro. The Environmental Health Division of the Person County Health Department, located in Roxboro, takes a pro-active stance on environmental health issues.

The Environmental Health Division has many programs to ensure healthy living for residents of Person County. These services include the Food and Lodging Program, the On-site Sewage Disposal Program, the Private Water Supply Program, the Swimming Pool Program, and the Lead Investigation Program (Person County Health Department, 1998a).

The Food and Lodging Program consists of four main areas: plan review and permitting of new food and lodging facilities, inspection, education and complaint investigations. The inspections are performed on a wide variety of facilities in Roxboro (see Table 22). In the past, the Food and Lodging Program was also responsible for inspecting the migrant labor camps to monitor compliance with state and local regulations (The Courier Times, 1980). The responsibility for monitoring migrant housing has shifted to the Labor Department, although the Food and Lodging Program is still responsible for inspecting large food preparations for migrant populations. The largest migrant work force in the county is only 13 people, and therefore, does not require inspection and permitting by the Food and Lodging Program (W. Dunn, personal communication, October 30, 1998). However, the Environmental Health Division monitors the water supply and sewage disposal in the migrant labor camps.

Tuble 22. Type of Fuenity inspected	e y u
Type of Facility Inspected:	
Bed and Breakfast	
Daycare Center	
Food Stand	
Hospital	
Local Confinement/Jail	
Lodging	
Meat Market	
Migrant Labor Camp	
Residential Care	
Rest Home/Nursing Home	
Restaurant	
School/School Cafeteria	
Source: Person County Health Dena	rtmor

Table 22. Type of Facility Inspected by the Environmental Health Division.

Source: Person County Health Department, 1998a

The On-site Sewage Disposal Program was created to protect the quality of the groundwater and to prevent the spread of disease through the mixing of sewage wastes with water (Person County Health Department, 1998a). Septic tank installation permits are normally granted in Person County. The soil in Person County is generally suitable for septic tank installation (The Courier Times, 1980). In fact, 80% of the county is supported by septic tank systems (W. Dunn, personal communication, October 30, 1998). The other 20% of the county is unsuitable for a traditional system though it may be able to handle an alternative discharge system. There have been complaints to the Environmental Health Division that the system of inspection and granting permits is slow, inhibiting the progress of construction in the area (W. Dunn, personal communication, October 30, 1998). The Supervisor of the Environmental Health Division states that the department is understaffed, and is currently running 2-3 weeks behind on granting permits (W. Dunn, personal communication, October 30, 1998). The Environmental Health Division will grow with the addition of more staff by January, 1999. According to the Environmental Health Division, residents of Roxboro are concerned by this lack of bureaucratic timeliness, but are not concerned by the actual incidence of permits granted for septic systems.

Along with proper sewage disposal, the On-site Sewage Disposal Program also monitors the quality of the groundwater. In 1982, the CP&L plant located in Roxboro was fined \$36,702 by the state for having contributed to high selenium levels in Lake Hyco as a result of the coal burning that occurs at the four CP&L electricity generating plants that surround Lake Hyco (The Courier Times, 1982). During that time residents were advised by the State Health Department to only eat a few ounces of fish a week that were obtained from Lake Hyco (W. Dunn, personal communication, October 30, 1998). The latest reports indicate that the bacterium coliform in both Lake Hyco and Mayo Lake has returned to normal levels.

Agriculture can be a source of ground water pollution. Person County has a small farming community, which is diversified into wheat, corn, soybeans and tobacco. In addition, hogs, beef cattle and dairy farms exist in this area. Since 1988, only two calls have been received by the Environmental Health Division relative to nitrogen levels in the ground water as a result of run-off from hog farms (W. Dunn, personal communication, October 30, 1998). There have been no complaints in the last year concerning run-off pollution and contamination.

The Private Water Supply Program seeks to ensure the quality of water from water wells. Residents can submit water samples to be tested for contaminate as well as inorganic chemicals including both minerals and metals (see Tables 23 and 24). There is no limit on how often or how many water samples a resident can submit for testing. Every year, approximately 600 water samples are tested. Of these samples, approximately 180 are found to be positive for coliform bacteria, with about half of these resulting from fecal coliform (Person County Health Department, 1998a). All wells found positive with coliform bacteria are disinfected. The Environmental Health Division also inspects the wells that supply migrant housing, food stands, restaurants, schools, meat markets, ball parks and day care facilities. A few community water supply systems that support several mobile home parks and subdivisions are also inspected.

Inorganic Chemicals Tested
pH (acid and base levels)
Arsenic
Lead
Iron
Manganese
Copper
Zinc
Calcium
Magnesium
Chloride
Fluoride
Water hardness
Source: Person County Health Department, 1998a

 Table 23. Inorganic Chemicals Tested.

Table 24. Contaminates Found in the Analysis of Test Water Quality.Contaminates in Test WaterBacteriological contaminatesInorganic chemicalsPetroleumPesticidesMicrobiological contaminatesFluoride contaminates

Source: Person County Health Department, 1998a

The Lead Investigation Program monitors levels of lead in the residents of Person County. When a problem is detected, the program works with the resident to locate the source of contamination. In 1997, several cases of raised blood lead levels were investigated; two cases in children were confirmed (Person County Health Department, 1998a).

The Environmental Health Division has also performed other duties in the past such as: rabies control, insect and rodent control and investigations of complaints ranging from dog bites, pigeons and fly problems to odor from hog pens (The Courier Times, 1980). Although the Environmental Health Division still receives many complaints about various issues, the policy for responding to these complaints has changed. According to Will Dunn, Supervisor of the Environmental Health Division, the Division is no longer allowed to recommend herbicide, pesticide or fungicide to residents for infestation problems (W. Dunn, personal communication, October 30, 1998). Complaints of this nature are usually handled in conjunction with another department. For example, calls concerning plants or insects are referred to the Agriculture Department, an exterminator or an entomologist from Raleigh. Concern of a possible case of rabies is referred to a nurse from the Health Department and an Animal Shelter employee who work together to capture the animal and have it tested in Raleigh. However, rabies is not a common problem in Roxboro. In 1997, 25 cases of rabies were found in animals, and thus far in 1998 only one case has been reported (L. Brooks, personal communication, November 30, 1998). There have been no reported cases of humans contracting rabies in North Carolina since 1956 (L. Brooks, personal communication, November 30, 1998). Other complaints the division receives such as noise from a local industrial plant, chemical spills and air pollution are also referred to the main state government telephone system in Raleigh, where an operator assesses the problem and then directs the caller to the appropriate division of the State Health Department.

There has been no large pattern of complaints in any one area in the past year with the notable exceptions of the new landfill on HWY 158 East, and sludge (W. Dunn, personal communication, October 30, 1998). Residents are actively concerned about the potential for ground water contamination, especially those residents living within two to three miles of the landfill. The State is monitoring the landfill; currently no problems have been reported.

The other concern voiced by residents of Roxboro is the use of sludge. Sludge is the solid end product of sewage treatment, the last remains of human effluent. This material is provided free to farmers for use as fertilizer. The controversy over sludge centers around the concern that contaminates and heavy metals in the sludge could leak into the ground water table (W. Dunn, personal communication, October 30, 1998). This concern has a rational basis since 80% of Person County is on public water supply watersheds (W. Dunn, personal communication, October 30, 1998). However, research indicates that using sludge as fertilizer is a good way to dispose of it, and that this method works well if closely monitored (W. Dunn, personal communication, October 30, 1998). At one time, Person County had a local ordinance regulating the use of sludge; the State now controls the use of this material. The second issue concerning sludge is that there is no requirement to disclose a record of sludge use on property to a land buyer (W. Dunn, personal communication, October 30, 1998). Some residents feel that this information should be provided to the buyer on the deed of the land (W. Dunn, personal communication, October 30, 1998). Currently, there are no problems with the water supply as documented by water quality testing.

The quality of water in Roxboro seems to be acceptable (Environmental Health Division, personal communication, October 30, 1998). Since March of 1963, the water of Person County has been fluoridated by a system in Roxboro. However, the majority of homes in Roxboro have well water and therefore, do not received fluoridated water. This process of fluoridation provides protection against tooth decay, as recommended by the US Department of Health and Human Services (Centers for Disease Control, 1994).

Due to the presence of industry, there is some hazardous waste in Roxboro. There are two generators of hazardous waste in Person County, and between the years 1993 and 1994, their combined production of hazardous waste fell by 60.6% (see Table 25). Hazardous waste is not considered a problem in Person County (W. Dunn, personal communication, October 30, 1998).

 Table 25. Amount of Hazardous Waste Generated in Person County.

Person County	1993	1994		
Amount of Hazardous Waste Generated (lbs.)	453,946	274, 976		
Source: Modified from the 1994 Annual Report on Hazardous Waste in North Carolina				

There is no air pollution monitoring or control agency in Person County. Air pollution data comes from monitoring done by the state. The most recent comprehensive reports on ambient air quality trends in North Carolina include data on Person County from 1972-1988 (North Carolina Department of Environment, Health and Natural Resources, 1990). Of the seven criteria pollutants monitored, only two were increasing in Person County. The five air pollutants that display a downward trend are total suspended particulate, carbon monoxide, nitrogen dioxide, sulfur dioxide and lead. Of these pollutants, all show a statistically significant decrease in concentration except for nitrogen dioxide. All five pollutants are reported at levels below accepted standards.

In the 1972-1988 data, the two pollutants that were increasing in concentration were particulate matter with a diameter less than 10 micrometers (PM-10), and ozone. From 1986 to 1988, the mean concentration of PM-10 increased from 29 ug/m3 to 59.5 ug/m3 (Department of Environment, Health and Natural Resources, 1990). Despite this increase, these averages are still well within the acceptable standards. The rise in ozone was not found to be statistically significant for the 1976-1988 data. The most recent county specific data from the Raleigh air quality monitoring network indicates that all levels of contaminants (including PM-10) are below EPA guidelines, with the occasional exception of ozone (Person County Health Department, 1998a). The Environmental Health Division has data from the Division of Environmental Management in Raleigh that shows that smog produced in neighboring metropolitan areas such as Durham and Raleigh are the source of the excess ozone in Roxboro (Environmental Health Division, personal communication,

October 30, 1998). The Environmental Health Division considers the ambient air quality in Person County to be good.

The environmental health problems in Roxboro are not of major concern to the residents. There are some situations such as localized soil and water contamination or small chemical spills, which are normal and common for most Environmental Health Divisions. Roxboro is not over populated or over industrialized and has good air, soil and water quality (W. Dunn, personal communication, October 30, 1998). The Environmental Health Division is concerned about the high rate of growth in the area, and is pro-active in maintaining the good environmental health status in Roxboro through this period of growth.

#### <u>Summary</u>

The overall health of the city of Roxboro is good. There is an extraordinary number of health resources available to the residents of Roxboro. The Roxboro Police Department's pro-active approach to crime and violence helps to keep the crime rate relatively low, and the areas that the Environmental Health Division monitors have a good health status. While several civic groups and organizations exist, there appears to be a lack of recreational activities, particularly for the youth of Roxboro.

# **ROXBORO IN RELATION TO PERSON COUNTY**

A majority of the secondary data presented in this document is for Person

County, and not specifically Roxboro. This was appropriate for this community

because, as one community member said, "When you say Roxboro, I'm

answering for Person County because it's pretty much the same" (F.I. 17, 1998).

Another community member said "You can't say Roxboro without saying Person

County up here. Because everybody is intertwined" (F.I. 11, 1998).

And when asked specifically if Roxboro and Person County are one

community or several different communities, one community member responded:

Gosh. That's kind of tough. I think that it's essentially one. The county and the city live cheek by jowl cause what happens in Roxboro affects people in Person County and kind of vice versa. And if ever there could be a place where a combination of county and city governments could work, consolidation, this would probably be the place. Because we are so interrelated. But I think if you had to boil it down Personians consider themselves Roxboro people, and Roxboro consider themselves Personians. And it's if push came to shove, they would all band together (F.I. 10, 1998).

The residents of Person County who do not reside in Roxboro still see themselves as residents of Roxboro. This common attitude expressed by community members explains the interchangeable use of Person County to represent Roxboro.

### COMMUNITY STRENGTHS

During the interview process, many interviewees commented on the strengths of Roxboro. Many felt that the small town feel and friendly residents of Roxboro make it a nice place to live. When people were asked what is it like to live in Roxboro, one community member said, "It's close knit, like a family. It's quiet." (F.I. 36, 1999). One community member said, "[the people] are so friendly and they would greet you on the street if they didn't know you from Adam." (F.I. 24, 1998). Another person said, "people are very concerned about each other" (F.I. 19, 1998).

Community members also feel that Roxboro is a safe place to live. The Roxboro police department, under the command of Terry Hill works to keep crime at a low rate by patrolling different neighborhoods and being visible throughout the community. One community member said, "I feel safer and more secure here than if I were in a larger community." (F.I. 16, 1998). Others said, "it's a pretty safe place to be" (F.I. 19, 1998), and it is "bout as safe as you can find these days" (F.I. 14, 1998).

In addition to safety, some people expressed positive and negative aspects of living in Roxboro. Residents feel there are certain amenities missing in the community. One person said:

Well, in my opinion there are pluses and minuses to living here...You don't have the opportunities I think that you have in the larger city, I like cultural things like the arts. Just merely going to hear the symphony I must at least go to Durham. Luckily, I do have the Triangle right by me, which is nice. And that is what some people actually really love about the place is that it is away from the Triangle, but close enough that you can get to things that you need (F.I. 22, 1998). Another person said, "There are a lack of goods and services like international grocery products and ethnic foods" (F.I. 27, 1998). While Roxboro may not have all the products and services that people can readily access, "It has the feel of a small town atmosphere and still is accessible to cultural activities" (F.I. 16, 1998).

Another strength of Roxboro is the willingness of the people to come together to solve a problem or work on an issue that affects the community. Many different points of view were expressed about community decision making. One community member who is active in various causes and organizations said:

We listen, talk about the issue and state our position on the issues. We then come together and get a good cross-section of people to work on a problem. We try to get the opinion of everybody (F.I 32, 1999).

Another person said, "People see the difficulties and problems and because they have families and property here, they encourage each other and have desire to see changes" (F.I. 35, 1999).

Civic organizations and churches are also strong forces that bring people in the community together around a particular issue. One person said, "some problems are addressed through churches; through social and service organizations" (F.I. 27, 1998). Another person said, "churches hold Roxboro together and it is how people come together" (F.I. 15, 1998). Other people said, "people address problems pretty well here. When they see there is a problem they make a committee" (F.I. 22, 1998) and "you just get a group of people together and things get done" (F.I. 24, 1998). Both service providers and community members are proud of several projects that the community has worked on together. Highly successful projects include: *Relay for Life,* a fundraiser which raised nearly \$200,000 for cancer research; the Uptown Development project restoring and improving areas of downtown Roxboro; and *Personality* the fall festival.

The economy of Roxboro is also strength. Many people feel that the low cost of living (property value compared to Durham) and low taxes and business opportunities at various industries keep people in Roxboro and also attract newcomers. A community member said, "It's a quiet rural town that is growing economically" (F.I. 15, 1998). One community member who recently moved to Roxboro said:

Well, I think that we have a real competitive tax rate. Folks are moving here, buying homes and property and one of the first things that I found out was the really good tax base here (F.I. 11, 1998).

Another resident said, "The closeness of the community and the cost of living is low ...and the proximity to University of Chapel Hill and Durham and the tax rates are low" (F.I. 10, 1998). Another community member said:

The people are very enthusiastic, especially for getting new industry in the area. In one year, we got five new industries. Our unemployment rate went from 20% to a rate of 4.5% in about five years (F.I. 24, 1998).

Roxboro is also a great place to raise children. There is an excellent

public education system that serves all of Person County. When asked what

would you tell people about Roxboro to convince them to move here, one

community member said, "I would tell them about the educational system. We

have a good, strong and well-supported educational system" (F.I. 32, 1999).

Another person said:

[It is a] wonderful, family oriented, close-knit community...good place to raise children. There are good schools, good community spirit, and a uniqueness in the way people band together (F.I. 16, 1998).

In general, people seem to be very proud of Roxboro. There is a strong

sense of community and close ties to neighbors. Residents often spoke about the

friendly feel and safety they have from knowing everyone in the community.

When asked what holds Roxboro together, one person said:

[It is] the sense of community. I think that it has held us together all these years. Because Roxboro is on the way to no where, you have to want to come here to live here. You don't really go through Roxboro going anywhere else (F.I. 9, 1998).

## RECREATION

Community members expressed various views about the recreational opportunities available in Roxboro. While most expressed dissatisfaction, there were some individuals that had positive things to say about recreation. One person said:

There is always something going on in Roxboro. Roxboro is a small town, but there are various clubs and organizations that provide programs to which many people are invited (F.I. 15, 1998).

This sentiment was reiterated by another community member who stated, "We have good recreational activities if people will put them to good use. Things like boating, water skiing and swimming at Hyco Lake are available" (F.I. 12, 1998). Other recreational activities mentioned included a skating rink, a fitness center and social gatherings coordinated by local churches. A community member explained, "Church people have programs and people my age have fund-raisers and events with the church. That's what I think is fun" (F.I. 19, 1998).

According to other community members that we interviewed, recreational opportunities that currently exist in Roxboro are not adequate. One woman in the community suggested that adapting to life in Roxboro required some compromise. She stated:

You sacrifice a lot for a small town atmosphere-like recreation. You go out of Roxboro to do things for fun. There is no movie theater, bowling alley and public swimming pool (F.I. 16, 1998).

While community members noted what Roxboro has to offer, many also acknowledge that it does not satisfy everyone's tastes. One person expressed

this feeling when she said, "You don't have the opportunities I think you have in a larger city. I like culture things like the arts. Just merely going to the symphony, I must at least go to Durham" (F.I. 22, 1998). Another person stated, "They go elsewhere for fun. We do have good recreation opportunities but it doesn't serve all the people's needs. The county focuses on recreation that promotes health" (F.I. 32, 1999). Another community member stated a similar comment:

We don't have a movie theater, for example, here and haven't had one since I moved here. And the recreational activities aren't as good as they ought to be. And we have to work on that. And the fact is that the business community has a plan now to develop a movie theater and a bowling alley (F.I. 10, 1998).

The youth of Roxboro is particularly impacted negatively by recreational

opportunities. One recent high school graduate explained, "There really isn't

much for a teenager to do. They go to the movies and the mall in Durham. Most

end up hanging out in the [local] parking lot" (F.I. 36, 1999).

A service provider in the community added:

There are no recreational activities for the youth and the majority of the people. These issues spill over into health education and team leadership.

This place has massive needs. There are no movie theaters, no bowling alleys, no true outlets (F.I. 31, 1999).

Several community members expressed a desire for a community center

or a Young Men's Christian Association (YMCA) that would be available to all

residents. One resident commented:

There has been talk of a health or a sport center, but it has not gotten off the ground. There's some difference of opinion in that regard. Some of these things should come to the Black community because they don't have anything (F.I. 34, 1999). Community members expressed that there is a lack of awareness of activities that currently exist. This has led to a misperception about recreation opportunities in Roxboro. One resident explained:

I didn't know there was a family pool here for eight years. It was a quietly kept secret across from the hospital. A community pool. It was word of mouth but they keep it hush-hush because they don't want to open it to the public. I can understand the reasoning behind some of the things. They wanted to keep the pool clean and quiet. I know in Durham they have problems with people dropping off their kids and leaving them there. We don't want that here. I just feel it was a black and white issue because There are no blacks at this pool. I found that very unusual. From where I come from, it's no big deal. But I think that's one of the issues in getting a pool. They had blueprints, but it will never happen (F.I. 4, 1998).

The pool mentioned by the community member is privately owned. Presently, there are no public pools in Roxboro.

The Parks and Recreation Department of Person County attempts to meet the recreational needs of Roxboro. Within the county, there are a total of ten park sites. Adults can choose from a variety of activities such as aerobics, karate, canoeing, dance and self-defense. Those interested in acting can audition for the adult theater troupe known as the Village Players. For the elderly, there are often senior trips coordinated in conjunction with the Person County Council on Aging (Person County Parks and Recreation Department, personal communication, March 20, 1999).

For the youth of Roxboro there are a number of activities that Parks and Recreation Department sponsors. There is a youth theater known as Actors in the Making (AIM). It is open to all youth between grades two and twelve. Monthly meetings are held for this activity (Person County Parks and Recreation Department, personal communication, March 20, 1999). During the summer, there are baseball, softball, volleyball, soccer and tennis camps available. The fee for these camps during the summer is \$35.00 (Person County Parks and Recreation Department, personal communication, March 20, 1999). These activities are held at the Person High School Gymnasium and the Huck Sansbury Recreation Complex.

Person County Community Alternatives Department offers several programs to keep youth who have been identified as "at-risk" involved in meaningful activities. One component of the program is referred to as Guided Growth. Its objectives include educational programming and recreational opportunities. These activities are usually in conjunction with agencies such as the Person County Parks and Recreation Department, Boy Scouts and the Caswell County Youth Services Bureau (Person County Youth Alternatives Department, 1998).

Several community members expressed their hopes for the future regarding recreation. One resident said, "I hope to see the establishment of a recreational facility to serve the public" (F.I. 32, 1999). Another community member said:

I guess my wish would be to see some more shopping centers, some bowling alleys, some opportunities for families because it is a family town. We need more family-oriented opportunities (F.I. 22, 1998).

One woman summarized her thoughts on recreation by saying:

There was a priority for a health club here in the community. I think eventually something like that would benefit our community. But we don't have a facility per se to gather and expand our sports (F.I. 22, 1998).

While some recreational activities do exist in Roxboro, the residents feel they are limited to certain types of activities. They feel that these activities do not reflect a wide range of desired opportunities.

#### HEALTH SERVICES

During the interviews, residents expressed differing opinions about the health services in Roxboro. Most people felt that Roxboro has some valuable health resources. As one service provider said, "I would say the hospital is a strength in the community and it looks for ways to expand its services to better serve the community" (F.I. 24,1998). Another community member stated that, "yes, there are a lot of health services here, there is a health department" (F.I. 14, 1998).

Recently, several health care facilities have expanded their services. In 1998, the Person County Memorial Hospital began offering onsite chemotherapy treatments. Also, physicians from Duke Hospital commute to Person County Memorial Hospital two or three times per week to provide a number of specialty medical services to the residents of Roxboro (F. I. 1, 1998). Currently, the hospital has a seven-bed Emergency Department, six obstetrics beds, six intensive care beds, three operating rooms, a mobile MRI unit, speech pathology services and a part-time psychiatrist. As one community member stated, "We have one of the greatest hospitals in the area and I am real proud of what we have here" (F.I. 24, 1998).

Many health services offered at the Person County Health Department, Person Family Medical Center and through private physicians. To further expand health services in Roxboro, the Person County Health Department has opened an adolescent dental care clinic and the Person Family Medical Center has opened a dental facility. Similarly, the Breast and Cervical Cancer Screening Project sponsored by the Centers for Disease Control and Prevention is in its sixth year at the Person County Health Department. This program targets women 50-64 years of age who have no Medicare and Medicaid or have a limited income. This program was implemented to encourage women to be more proactive about breast and cervical cancer screenings and to help combat the rise of cancer in women of Person County.

Despite the services available in Roxboro, there has been concern expressed by community members that all health needs are not being met. Many community members stated that they could get general care in Roxboro but had to travel outside of Person County to get specialized health services such as psychiatric, obstetrics, gynecology, opthomology, respiratory and dermatological services. As one community member stated, for "general medical care, they go to the doctors here in Person County, but for anything serious they go to Duke or Durham Regional Hospital" (F.I. 11, 1998). Many community members related personal stories of traveling to nearby Duke Hospital or Durham Regional Hospital to seek care for themselves or their family members. As one community member stated, "For anything not like your regular doctor, you have to get out of the county for that stuff" (F.I. 22,1998). In the words of another community member, "it is O.K. to go to Person County if you are just a little sick, but if it is real serious you better go to Duke" (F.I. 10, 1998).

Other community members said that some residents might not know of all the services available in Roxboro. As one service provider said, "There is the issue of people not being aware of what services are available. It might be a simple issue of publicity, of advertisement" (F.I. 26,1998). Another community member expressed a similar view:

We have this hospital and the health department and so many people go south to Duke and Chapel Hill when we can give them everything right here. The Hospital is staffed by Duke Hospital even. People used to think of the Person Memorial Hospital as a Band-Aid hospital and so a lot of people were sent out of the area for care. If we were a Band-Aid hospital, we aren't anymore! We have all kinds of surgeons (F.I. 24, 1998).

Another reason services in Roxboro may not be utilized is that health care providers do not stay in Roxboro for extended periods of time. As one community member stated, "no doctor wants to come here because it is rural and they can't compete salary-wise with Chapel Hill and Durham" (F.I. 16). The high turnover of staff has also made continuity of care very difficult for some community members. As one person stated, "a huge turnover rate becomes a barrier to patient care because patients get the idea in their heads that there will always be a high turnover and will not come back for services" (F.I. 26, 1998).

Some community members cited other barriers to accessing health services in Roxboro. Several people said that their HMOs did not permit them to use doctors in Roxboro. One community member said, "The company I worked for went to an HMO, then I had to go to Durham to find a physician that was accepted by my HMO" (F.I. 11, 1998). Other people in the community stated that transportation is a barrier to accessing health care services. One health

professional said, "There is a large part of the community that has transportation

issues that could not make it into a doctor's office come hell or high water" (F.I.

26, 1998).

Another major health care issue is that preventive care services are underused. Many people in Roxboro can not afford annual check-ups and regular doctor's visits to assist in chronic illness prevention. Therefore, citizens tend to access health services only when they are currently ill. One health care provider stated:

There is a lack of understanding of the need to come in (to the doctor's office) other than when you are just sick. There needs to be more understanding of preventative health care. People will only come in when they are sick and won't keep their regular appointments (F.I. 31, 1999).

Because some citizens do not receive routine health care, some community members feel that non-emergency clients disproportionately utilize Emergency Department resources. Therefore, community members and service providers

expressed the need for an urgent care center in Roxboro.

Another concern of the citizens of Roxboro is that specific health needs of

the elderly, adolescents, and women are not being addressed. This sentiment is

best expressed by the words of one person in the community who said:

There is a big elderly population. It is an aging population in Roxboro so there are a lot of health issues like dementia, functional status change, and various other medical conditions that intensify with age. There are also a lot of adolescent health issues in this community and there is only one pediatrician. There does not seem to be a lot of attention to adolescent health, particularly suicide prevention, treatment of depression, prevention of teen pregnancy, things like that. Women's health is a big issue here. I don't think women are getting the routine stuff they need (F.I. 26, 1998).

A few service providers felt that the adult male population in Roxboro is currently underserved. They stated that male community members were not seeking regular health care or getting testicular cancer check-ups (F.I. 31,1999).

Overall, the community voiced many opinions about health services in Roxboro. Some community members feel that health services are adequate, while others feel that additional services are necessary to fulfill the needs of all community members in Roxboro. Further research is needed to explore whether services in Roxboro are inadequate and the reasons that certain services are underutilized.

#### **TRANSPORTATION**

Public transportation has emerged as a major concern of the citizens of Roxboro. During interviews, community members were asked if transportation was satisfactory in Roxboro. Several community members expressed that transportation was inadequate. One community member stated:

I would say yes and no [that transportation is adequate] because there are some people that do not have proper transportation to get back and forth to work at some of the industries and if we had some type of bus service it would help a great deal (F.I. 32, 1999).

Similarly, a service provider responded, "No [transportation is not adequate], we need a bus service, city buses. The city is growing. We used to have a train depot but it wasn't used for passengers, just packages" (F.I. 30, 1998).

Community members expressed concerns that the current transportation services have not met the needs of all within Roxboro. One person stated, "There are only two taxi cabs and KARTS. KARTS is stagnant and antiquated. They have not changed their routes in five years" (F.I. 16, 1998).

KARTS began operation in 1983. It consists of 14 passenger vehicles, including two with lifting equipment for the disabled (KARTS Public Transit System, personal communication, April 1, 1999). Depending upon the destination, travel within the city limits costs between \$3.40 and \$4.00. Several community members have expressed that this cost is prohibitive. There are set routes, including specific ones for Person Industries, Smart Start and Person County Senior Center. Trips are also available to UNC Hospitals and Duke University Medical Center five days a week for medical appointments (KARTS Public Transit System, personal communication, April 1, 1999). Individuals are required to call KARTS for a ride at least twenty-four hours in advance of a trip.

Although it provides a valuable service, some people expressed the inaccurate perception that KARTS serves only a limited population. A community member said, "I know there are programs for the elderly and mentally handicapped people. KARTS takes them to appointments they may have" (F.I. 22, 1998). Another person stated, "There's no transportation in Roxboro. [KARTS] is only for citizens of the U.S., [and] retired people-not migrants" (F.I. 35, 1999). However, proof of citizenship is not required; KARTS is available to anyone that requests the service. This misperception was expressed repeatedly in the interviews.

Lack of adequate transportation impedes access to health care services. According to one service provider:

One barrier is simple accessibility of services. A lot of patients in Roxboro,

a lot of people in Roxboro, don't have the transportation and can't really get to a clinic no matter where it is located. We find that we have got a lot of patients that need medical care in our target population but we are not able to get them into the center because of transportation problems (F.I. 26, 1998).

Many citizens stated that some form of public transportation system is needed to help alleviate problems such as access to health care and transit to and from work. One community member suggested, "We need some kind of bus or train system to get people to and from [Roxboro]" (F.I. 24, 1998).

#### COMMUTERS

Most of the community members that were interviewed stated that they regularly travel out of Roxboro for goods and services, recreation and work. One community member said, "I do shop outside of the county. I do most of my grocery shopping and so forth in Durham. For clothing, I [have] done a lot by mail order" (F.I.10, 1998). Another person said, "There is a net flux of 3000 people out of Roxboro every morning and 2000 coming in to work. It has a positive impact because it increases money in town" (F.I. 6, 1998). This community member further explained that the 2000 individuals who travel to Roxboro each morning spend money in Roxboro during the course of the workday. In addition, the 3000 residents that work outside of Roxboro bring part or all of their salary back into Roxboro. Other community members supported commuting only if those citizens continued to spend money in Roxboro and not other locations.

The majority of community members interviewed, however, did not believe that commuting impacts Roxboro positively. One person expressed:

They don't really spend their money here. They spend their money in the malls around [Research Triangle Park]. I know a lot of people after work buy their groceries down there (F.I. 11, 1998).

Another community member said, "Money is leaving the county because people eat and go see movies out of town" (F.I. 24, 1998).

The primary reason cited for commuting outside of Roxboro was the opportunity for a better paying job. Some community members expressed a desire to see this trend change. One person stated:

The average wages are lower here, but we also have lower taxes. Roxboro serves as a training system and then they go to work in Orange and Durham Counties (F.I. 16, 1998).

Another woman stated, "Roxboro should provide more jobs here so people don't have to travel" (F.I. 8, 1998).

The community members in Roxboro expressed various opinions about the effects of commuting to and from Roxboro for goods and services, recreation and work. Some residents feel that commuting helps the city economically, while others believe it has a negative impact. In general, most citizens feel they need to travel out of Roxboro regularly and would like to see Roxboro grow and expand to meet their needs locally.

#### HISPANIC COMMUNITY

In the recent past there has been an increase in the number of Hispanic people that either live in Roxboro full time or who move here for seasonal work. Many community members expressed concern about how this new community would impact Roxboro and how to address the cultural and language barriers that are present. As one community member stated, "The Hispanic population will grow and we need to look towards how to provide services for these individuals. We need to make them feel a part of the community" (F.I. 32, 1998).

Many organizations have already started implementing plans to better serve the Hispanic community because, as one community member stated, "Hispanics are least aware of how to access services" (F.I. 18, 1998). Some health services have printed brochures in Spanish. Person County Memorial Hospital has a list of volunteer interpreters that can be called if a Spanish speaker needs translation assistance. Some agencies such as the Roxboro Police Department and the Christian Help Center also have volunteer interpreters that can be called if situations arise concerning the Spanish speaking community. In most agencies that have interpreters, the volunteer interpreters are not on call 24 hours a day. If an interpreter is not available all the time, quality of care issues may arise for Spanish speakers.

Some service providers have taken Spanish language classes on their own time to fill the need for interpreters. Overall, there is a willingness to work with the Hispanic population, but the language barrier is a constant issue for providers. A member of the community summarized the situation by stating, "I think there is a language barrier in terms of serving the Hispanic community. Nobody here speaks Spanish and that is a big issue" (F.I. 26, 1998).

One service provider spoke of the unique adaptations that Spanish speakers are using to cope with the language barrier: "We are seeing more of a Hispanic population and they usually bring their own interpreter, who is usually one of their children" (F.I. 31, 1999).

Though certain changes are occurring to make services more accessible to the Hispanic community, many English speaking community members believe more needs to be done. As one community member said, "It has been hard to obtain local health care for the migrant population because of the language barrier" (F.I. 18, 1998). Another community member said that many Hispanics travel as far as Prospect Hill to receive medical and social services because the staff there is bilingual. Some community members and service providers in Roxboro suggested that a more integrated staff and a cultural diversity training could help to better serve the Hispanic population. As one person said, "We are talking about cultural differences and beliefs and how these affect the health of those that are culturally different" (F.I. 31, 1999).

Another community member expressed a similar perspective:

We don't serve as much of the Hispanic population as we should because there is a fairly large community in this area. Serving the Hispanic population is something that we are interested in doing (F.I.26, 1998).

Roxboro is looking to the future and trying to improve working and interacting with the Hispanic community. Many changes are being made to make access to services more convenient for Spanish speakers, but as many community members expressed, much more needs to be done. English speaking community members believe that as Roxboro expands, the number of Spanish speakers moving to Roxboro will continue to grow.

#### RACIAL ISSUES

Although not a major theme in the interviews, racial issues were discussed by three ethnically different community members: a Caucasian male, an African American male and a Latino male.

The Caucasian male stated that Roxboro is segregated geographically, because "people are worried that their property values will go down if African Americans live in their neighborhoods" (F.I. 27, 1998). He thought that the African American community is being placed at a disadvantage, and would like to see more opportunities for African Americans in Roxboro (F.I. 27, 1998).

The African-American male voiced the following opinion:

Sometimes you'll be at a stoplight and a white lady will look over and see you and lock her door. Or someone will drop their change on the counter so they don't have to touch your hand. It's not just white people, it's black people too. People are afraid of anything different (F.I. 19, 1998).

Although he has experienced racism in Roxboro, he stated that the situation is

changing:

[Things are changing] ... racially. I can remember times in this town you had to go to the bathroom in certain places – restaurants you had to go around back. Inter-racial relationships were kept secret. You couldn't ride down the boulevard with a white girl. Now people are saying 'to heck with race – it's just one race.' I like that. People are friendly here and speak to you. I see racism changing and I thank God for that. People are coming together more (F.I. 19, 1998).

The third person to comment on racism was a Latino man. He feels that the situation is improving in Roxboro, that there has been "...progress in communication with other peoples" (F.I. 35, 1999) and changes in attitudes between ethnic groups in Roxboro. In addition, he advocated that change occur through the strong religiosity of the community: "Encourage [others] to see [all of] us as one people. White people have [the] strong mentality that they are better, but [we] try to encourage the idea that God sees us [all] as the same" (F.I. 35, 1999).

Racism was mentioned as a concern during three interviews. However, these individuals seemed to feel that the situation is improving. Communication and attitudes towards different ethnic groups are also improving. Community members felt that Roxboro is changing to create an environment of greater tolerance and equality.

#### PROGRESSIVISM

Some community members felt that Roxboro is not as progressive as other surrounding communities. For example, Roxboro has just recently installed the Internet in the local public school system. In addition, Smart Start, a national program that is over twenty years old, has been present in Roxboro for only one year. Roxboro has been slow to accept these innovations. But, as one school teacher said, "Roxboro is changing, trying to come up on the times" (F.I. 9, 1998).

One reason for this lack of progressivism is "the current trend to ignore problems" (F.I. 4, 1998). As one community member stated, "Roxboro will wind up congested, unorganized and over-developed" (F.I. 4, 1998) if urban growth continues without guidance and planning. Despite this trend, there is change occurring in Roxboro. The community is aware of the need to stay informed of technological developments and new opportunities to improve the quality of life for the citizens of Roxboro.

#### **FUTURE HOPES**

During the interviews, residents of Roxboro expressed many future hopes for the City of Roxboro. These hopes fell into three categories: recreation, economic and community.

#### Recreation

Because recreational opportunities are limited in Roxboro, community members expressed many hopes for improvement in this area. A suggestion expressed by many community members is the desire to see "a movie theater and a bowling alley and something for the young folk" developed in Roxboro (F.I.28, 1998). One resident hoped that cultural activities would increase (F.I. 15, 1998). Another community member stated: "I guess my wish would be to see some shopping centers, some bowling alleys, some opportunities for families, because it is a family town, or county. We need more family oriented opportunities" (F.I. 22, 1998).

#### Economic

The residents of Roxboro are generally pleased with the economic progress of their town. One community member commented: "[I] hope we can establish and maintain the present economy. We are doing very well" (F.I. 16, 1998).

Although the economy is doing well, some residents said they hope that businesses and economic opportunities in Roxboro will expand. One community member suggested getting "more retail businesses downtown" (F.I. 28, 1998) and another suggested "more jobs, factories [and] companies" (F.I. 35, 1999).

#### Community

Along with the hope for "more recreational and cultural activities" (F.I. 15, 1998) and that Roxboro will "establish and maintain the present economy" (F.I. 16, 1998), residents also had specific hopes for their community. One community member wants "to see more doctors and families ... come to the area" (F.I. 1, 1998). Another community member hopes that Roxboro "...remains a fairly safe place to live.." and that there are "...less school drop-outs" (F.I. 15, 1998).

The residents of Roxboro have many hopes for the future. These hopes range from increased recreational opportunities to continued economic growth. In addition, the residents of Roxboro would like to see some specific improvements in their community, such as more health care practitioners in Roxboro.

#### **CONCLUSION**

Roxboro offers its residents a small town atmosphere combined with economic growth and opportunity. Community members have benefited from the recent influx of new industry into the area as well as the opportunities offered in nearby Durham and the Triangle area. Overall, people living in Roxboro enjoy a quiet country setting and a close-knit community.

Part of the community diagnoses process includes investigating how the people of Roxboro define their own community. Although this project was meant to encompass only the City of Roxboro rather than all of Person County, the residents we interviewed seemed to feel that their community included both Roxboro and Person County. Some people we interviewed told us that they live in Roxboro, yet their address is actually outside the city limits. Because most of the services available to residents of Person County are located within Roxboro, the service providers we interviewed also hesitated to talk about Roxboro without including Person County.

During the community member interviews, residents were asked what they would like to see happen in the future for Roxboro. During service provider interviews, providers were asked about areas that need improvement in health care and social services in Roxboro. The major themes that emerged from both these inquiries were presented at the community forum. Forum participants chose two of these issues, recreation and health services, for further discussion.

Many community members are concerned that Roxboro does not have adequate recreational opportunities, particularly for the youth. Several community

members mentioned that they would like to have a movie theatre or a bowling alley; others mentioned cultural activities. Currently, there is discussion about building a recreation center that would have athletic and entertainment facilities. This center was mentioned several times during the interviews, although people seemed unsure about whether it would actually be built. We recommend that community leaders consider following through with this project, since recreation was a concern of so many of the people we interviewed.

According to secondary data and service provider interviews, the health services in Roxboro have improved in recent years to provide a wider range of services. However, many community members reported that they have to go to Durham or Chapel Hill for any serious illness or to see a specialist. This topic was chosen for further discussion at the community forum. Many service providers expressed concern that residents do not use many of the services available in Roxboro and Person County. According to the service providers present at the forum, a major reason for this is that the residents have inaccurate perceptions about who the agencies serve and what services are provided. Providers believe that many residents think that the Health Department and Person Family Medical Center provide services for the indigent. In reality, these services are available to everyone in the community and are underutilized because of this misperception. One provider felt that this perception might be dispelled if community leaders and politicians used these services.

Some other topics presented at the community forum also concerned unmet health and social service needs in Roxboro. In interviews, many service providers expressed concern that services are not being adequately provided for certain populations in Roxboro such as the elderly, the Hispanic community and young single mothers. One of the major barriers to providing services to the elderly is the lack of transportation. There is currently no public transportation system and only two taxis. The transportation system that is available (KARTS) is not able to adequately address public transportation needs. The routes are outdated and have not been changed in five years.

Some service providers suggested that a greater effort to provide culturally sensitive services and an increase in Spanish speaking staff would improve services for the Hispanic community. During interviews, several providers expressed an interest in increasing the quality of services they provide to this population.

Unmet needs of women in Roxboro were not discussed at the forum, primarily because it was mentioned in only a small number of interviews. However, this issue has recently become more pressing due to the closing of the only women's shelter in Roxboro. We hope that service providers and community members will continue working to get this shelter reopened.

A few of the issues that arose in the interviews were not presented at the forum. One of these issues is the idea that Roxboro is not as progressive as surrounding communities. Roxboro has been slow in adopting innovations such as the Internet in the local public school system. However, the community is becoming more aware of the need to stay informed of technological advances and new opportunities to improve the quality of life for the citizens of Roxboro. One person said that Roxboro is changing and trying to come up with the times. We hope there will be a continued effort to change as new programs and innovations become available.

Racial issue were also brought up during the interviews but not discussed at the community forum. Although this issue was not pervasive, it was mentioned more than once. A few of the people we interviewed expressed that recreational opportunities for African Americans in Roxboro are inadequate. However, some of the people who mentioned racism in the interviews seemed to feel that the situation is improving. Communication and attitudes towards different ethnic groups are also improving. Some community members mentioned that Roxboro is changing to create an environment of greater tolerance and equality. One person suggested that the strong religiosity of the community could further promote change.

Most people we interviewed had very positive comments about life in Roxboro. The residents seem to enjoy the small town atmosphere and friendly neighbors. Community members feel that Roxboro is a close-knit community in which its residents are very concerned about each other. Also, it is a great place to raise a family, primarily because it is a safe community with a strong public education system. Community members are often willing to come together through their churches and civic organizations to work on community issues. In addition, Roxboro offers its residents a strong growing economy and a low cost of living. We hope that this document will be a useful resource in both maintaining the strengths of the community and addressing its needs. We hope it will be helpful in writing grant proposals for future projects as Roxboro continues to improve and maintain the quality of life for all its residents.

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### **APPENDICES**

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## APPENDICES

# APPENDIX A: INTERVIEW GUIDES

## **Community Member Interview Guide**

#### Opening

- Thank you for taking the time to me with us. We recognize that your time is valuable and we appreciate your participation.
- We are graduate students from the UNC-CH School of Public Health. A requirement of our graduate program is that we work with a community in North Carolina to conduct a community profile. This means that we help the community identify its strengths, weaknesses and future directions. Our community is Roxboro. The information we gather will be summarized and shared with Roxboro. In addition, we will present the results to Roxboro at a forum that will be held in the spring.
- The purpose of speaking with you today is to find out about your thoughts and experiences of working with the residents of Roxboro. We are interested in your opinions. There are no right or wrong answers!
- This interview should last 35 to 45 minutes. We would like to give you the opportunity to tell us as much as you would like, but (mention if you have a time limit or ask if they do).

#### Confidentiality

- Your comments will remain confidential. We will be reporting summaries of the comments made by the people of Roxboro but will not identify who or what they said. We will not identify the names of the people we interview.
- We would like to take notes and tape record this interview. Your input is important and we want to make sure that we accurately record what you tell us. Fell free not to respond to any of the questions we ask, or hit the "Stop" button on the tape recorder at any time. After we are finished using the tapes for this class, the cassette will be recycled or destroyed. Is this okay with you?
- Any time during this interview you have the right to refuse answering any or all questions.

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

#### 1. Information on the individual and their family

- How long have you lived in Roxboro?
- What brought you to Roxboro? Probe: Tell me about your family here in Roxboro. Probe: Who? How many?
- What kind of work do you do ? Probe: Where?
- 2. Roxboro as a community (note: actual pop of Roxboro= 7500)
- About how many people would you say live in Roxboro?
- Tell me what it is like to live in Roxboro.
- Is there one community or are there several different communities in Roxboro?

- Would you say Roxboro is defined by its geographic location (boundaries), by its social groups, or politics?
- If someone was thinking about moving to Roxboro, what would you tell them about Roxboro to convince them to move here? Probe: What are other strengths of Roxboro?
- What do you like most about living in Roxboro?
- Would you consider Roxboro a community that is changing or a community that is static? Probe: What makes you think this?
- How well would you say people know their neighbors?

#### 3. Social Issues

- What clubs, groups or organizations in Roxboro do you belong to?
- How have people in the past come together to solve problems in Roxboro? Probe: How do people rally around issues?
- In general, what would you say holds Roxboro together?
- What kinds of projects has Roxboro worked on together in the past 5-10 years?
- Leaders are people who get things done. They are elected or appointed officials, or members of the community. Could you list the leaders in Roxboro, either by name or by position?

#### 4. Health

- What do you believe are the major health concerns of Roxboro?
- Are there adequate health services in Roxboro for you and your family? Probe: Why, why not.
- Where do most people in Roxboro go to receive medical care?
- Where do you and your family go to receive medical care in Roxboro?
- We are interested in what services are provided to residents of Roxboro. Could you list any health, social or human services that you know of?
- What services, if any, do you and your family access outside of Roxboro?
- Do you feel there is adequate transportation in Roxboro?
- What is your perception of the health of the people in Roxboro? Probe: What is your reasoning for this?
- Are there any sanitation, water quality, or other environmental concerns in Roxboro?

#### 5. Economy

- What are the major economic opportunities in Roxboro? Probe: Where would you say most people work in Roxboro?
- What do you think of the economic opportunities in Roxboro? Probe: What is their impact on Roxboro?
- Are these opportunities growing or shrinking?
- We have heard that many people live in Roxboro but commute to work in other areas. How do you think this impacts Roxboro?
- Do you have to go outside of Roxboro to complete your shopping?
- 6. Recreational Activities
- What do the people of Roxboro do for fun?

- Where are these activities located?
- What is your opinion about the recreational opportunities in Roxboro? Probe: Do you find them satisfying or adequate?
- If you had a friend come to visit you in Roxboro, what sight would you take them to see in Roxboro?
- 7. Community Safety
- Do you feel that Roxboro is a safe community?
- Are there places in Roxboro that you do not feel safe? Probe for a list.
- What types of crime do you think are most common in Roxboro?

#### 8. Change

- Thinking back over the recent past, how do you believe that Roxboro has changed in the last 5 years?
- What do you think of these changes? Probe: Would you consider them positive or negative?

#### 9. The Future

- Five years from now, how do you think Roxboro will be different?
- What do you hope to see happen in Roxboro in the next five years?
- What are your plans for the future here in Roxboro? Probe: How do you see yourself fitting in to the future of Roxboro?

#### 10. Conclusion

- Is there anything else I have not asked you about that you think would be important for me to know about Roxboro? Probe: What are some of the concerns of Roxboro?
- Are there other people in Roxboro that you feel it would be important for us to talk to? Could I call them, and mention your name?
- Could I have an address for you, so that I can send you an invitation to the Community Forum we will be holding in Roxboro in February?

#### Thank you again for your participation!

#### Service Provider Interview Guide

#### <u>Opening</u>

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- We are graduate students from the UNC-CH School of Public Health. A requirement of our graduate program is that we work with a community in North Carolina to conduct a community profile. This means that we help the community identify its strengths, weaknesses and future directions. Our community is Roxboro. The information we gather will be summarized and shared with Roxboro. In addition, we will present the results to Roxboro at a forum that will be held in the spring.
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- Any time during this interview you have the right to refuse answering any or all questions.

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

#### 1. Overview/

- Could you provide me with an overview of the services your agency provides?
- What kind of contact do you have with the residents of Roxboro?
- What is your role in providing these services?

#### 2. Services

- What services does your agency provide for the residents or Roxboro?
- Who utilizes these services?
- What groups tend to be most in need of services?

- What special criteria must people meet in order to be eligible for your services?
- What groups tend to be the most difficult for your agency to reach? Probe: Why?
- What barriers do you encounter in trying to reach the residents of Roxboro?
- How does your organization meet the cultural and language needs of this population?
- What other agencies provide services to the residents of Roxboro?
- Your organization or other organizations in the area do not meet what community needs?
- How is the community involved in determining the services that you provide?

#### 3. Community

- What would you say are the strengths of Roxboro?
- What would you say are the greatest needs of Roxboro?
- What kinds of community projects have been attempted in Roxboro in the past 5 years?
- How successful were these projects? Probe: Why?
- Who would you say are the key community leaders in Roxboro?
- If you were going to try to do some type of community health project in Roxboro, who from the community would you try to involve ensuring success?

#### 4. Wrap Up

- Is there anything else you can tell me about Roxboro?
- Is there anything else that you think I should know about?
- Does your agency have any documents, such as annual reports and funding applications, that we can either have copies of or look at?
- Who else would you recommend that we talk to about Roxboro?
- Would you be willing for us to mention your name when we contact them?

#### Thank you for your time!

# **APPENDIX B:**

FACT SHEET ON ROXBORO

### Did You Know...

- □ 19.6% of Roxboro residents are over the age of 65.
- Dear The Person County Memorial Hospital opened its doors in 1950 as a memorial for soldiers from Person County who were killed during World Wars I & II.
- □ In 1998, a Dental Program for children up to age 21 opened at the Health Department.
- □ In 1996, there were 1,584 Driving While Intoxicated (DWI) arrests per 100,000 people in Person County.
- □ Person County crime rates are almost 50% lower than the state of North Carolina.
- The migrant work force in Person County is reported to be 13 people total.
- The majority of homes in Roxboro have well water. Therefore, they do not receive fluoride in the water which is known to protect against tooth decay.

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#### **Resource Fair Participating Organizations**

1) Person County Health Department 325 S. Morgan St. 597-2204

2) Person Family Medical Center 702 N. Main St. 599-9271

3) Person County Senior Center 121 A Depot St. 599-7484

4) Person County Memorial Hospital 615 Ridge Rd 599-2121

5) Educational Opportunity Center 208 S. Main St. 599-0257

6) Department of Social Services 303 S. Morgan St. 599-8361

> 7) Christian Help Center PO Box 1791 599-1240

> > 8) Safe Haven
> >  500 N. Main St.
> >  597-8699

9) Person County Youth Alternatives 304 S. Morgan St. 597-1746

10)Person County Partnership for Children 23 Reams Ave. PO Box 1791

## LIST OF INTERVIEWEES

## **APPENDIX C:**

599-1240

#### LIST OF INTERVIEWEES

#### **Community Members**

- 1. Female, Caucasian, adult (F.I. 4)
- 2. Male, Caucasian, adult (F.I. 6)
- 3. Female, African-American, adult (F.I. 8)
- 4. Female, Caucasian, adult (F.I. 9)
- 5. Male, Caucasian, adult (F.I. 10)
- 6. Male, Caucasian, senior (F.I. 11)
- 7. Female, Caucasian, senior (F.I. 12)
- 8. Male, Caucasian, senior (F.I. 13)
- 9. Female, Caucasian, senior (F.I. 14)
- 10. Female, African-American, senior (F.I. 15)
- 11. Female, Asian American, senior (F.I. 16)
- 12. Male, African-American, adult (F.I. 19)
- 13. Female, Caucasian, adult (F.I. 22)
- 14. Male, Caucasian, senior (F.I. 24)
- 15. Female, Caucasian, adult (F.I. 25)
- 16. Male, Caucasian, adult (F.I. 27)
- 17. Female, Caucasian, senior (F.I. 28)
- 18. Female, African-American, adult (F.I. 30)
- 19. Male, African-American, senior (F.I. 32)
- 20. Male, African-American, senior (F.I. 34)
- 21. Male, Hispanic, adult (F.I. 35)
- 22. Female, African-American, adult (F.I. 36)

#### Service Providers

- 1. Hospital Administrator of Person County Memorial Hospital. Male, Caucasian, adult (F.I. 1).
- 2. Health Educator at Person County Department of Health. Female, Caucasian, adult (F.I. 2).
- 3. Chairperson, Board of Health. Male, Caucasian, adult (F.I. 3).
- 4. Local official. Male, Caucasian, adult (F.I. 5).
- 5. Program Administrator at Youth Alternatives. African-American, adult (F.I. 7).
- 6. Director of Person County Senior Center. Male, Caucasian, adult (F.I. 17).
- 7. Nurse at the Person County Health Department. Female, Caucasian, adult (F.I. 18).
- 8. Director of Person County Environmental Health Department. Male, Caucasian, adult (F.I. 20).
- 9. Former Rescue Squad Chief of Person County Rescue Squad. Male, Caucasian, adult (F.I. 21).
- 10. Director, Housing of Urban Development. Female, African-American, adult (F.I. 23).
- 11. Medical Director, Person Family Medical Center. Female, Asian American, adult (F.I. 26).
- 12. Coordinator, Person County Volunteers. Female, Caucasian, adult (F.I. 29).
- 13. Director, Christian Help Center. Female, Native American, adult (F.I. 31).
- 14. Director, Safe Haven. Female, African-American, adult (F.I. 33).

# SUBMISSION TO INSTITUTIONAL REVIEW BOARD (IRB)

## **APPENDIX D:**

September 17, 1998

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

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

We would greatly appreciate your participation in our interviews, since you are very familiar with the Roxboro community, including its assets and needs. Participation in the interviews is entirely voluntary and you are not required to give your name or to reveal any personal information. You have the right to refuse to answer any question or stop the audio taping at any time without penalty. All information collected will remain confidential. This interview should last 35-45 minutes.

If you have questions or concerns about this project, or about your rights as a

research participant, please do not hesitate to contact one of us, our project

preceptor, or our faculty advisor. Our names and contact information are listed

below.

Anne L. Geissinger, UNC Graduate Student Contact	(919) 544-9338
Carol Thomas, Preceptor	
Person County Health Department, Roxboro NC	(336) 597-2204
Sandra Quinn, Ph.D., Faculty Advisor	
UNC School of Public Health	(919) 966-3915

Thank you for your time. We appreciate your participation!

Anne L. Geissinger Group Contact for Lara Shain, Natasha Blakeney, Hailey Maier, Jennifer Gierisch & Millie Becker

#### **RESEARCH PROTOCOL INFORMATION**

#### A. Purpose and rationale:

The purpose of this research project is to understand the strengths and

weaknesses of, and to help identify future directions for, the Roxboro community

in Person County, NC. Community leaders, community members, and those who

provide services to the community will be interviewed to obtain information.

Results of the interviews will then be summarized and made available to

community members.

#### B. <u>Description of human subjects</u>:

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

#### C. Methods of recruitment:

Community leaders and service providers to the community will be contacted about their availability and interest to participate in this study. Other community members will be identified by community leaders and service providers. Once identified, subjects will be contacted to request an interview. Anne L. Geissinger, Lara Shain, Natasha Blakeney, Hailey Maier, Jennifer Gierisch, and Millie Becker will recruit interviewees. It is anticipated that a total of about 25 community leaders and members and about 15 service providers will be contacted for interviews.

#### D. Research Protocol:

Community leaders and service providers will be asked similar, yet slightly different questions during the interviews (please refer to attached protocols). Anne L. Geissinger, Lara Shain, Natasha Blakeney, Hailey Maier, Jennifer Gierisch, and Millie Becker will conduct interviews. Responses will be kept confidential and interviewees will remain anonymous; however general identifiers

such as age, sex, race and number of years residing in the Roxboro community may be used when summarizing data.

#### E. Compensation and costs:

Interviewees will not be compensated nor given inducements for their participation. The only costs to participants will be the time spent in interviews. These interviews are expected to last 35-45 minutes.

#### F. Risks to subjects:

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

#### G. Confidentiality of data:

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

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

#### H. Benefits:

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

#### I. Procedures for obtaining informed consent:

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

#### J. Public release of data:

Researchers do not plan to release collected data. The purpose of this project is to fulfill course requirements for HBHE 240 and HBHE 241: Community Diagnosis. Data obtained from these interviews may also be used in HBHE 172: Program Planning.

#### **Community Member Interview Guide**

#### 1. Opening

*Thank you* for taking the time to meet with me/us. We recognize that your time is valuable and we appreciate your participation.

We are *graduate students from UNC* School of Public Health. A requirement of our graduate program is that we work with a community in NC to conduct a community diagnosis. This means that we help the community to identify its strengths, weaknesses, and future directions. Our community is Holly Springs. The information we gather will be summarized and shared with the community. In addition, we will present our results to the community at a forum that will be held in the spring.

*The purpose* of speaking with you today is to find out about your thoughts and experiences of (having lived/having worked in/being familiar with) Holly Springs. We are interested in your opinions. There are no right or wrong answers.

*Time:* This interview should last 30 to 40 minutes. We would like to give you the opportunity to tell us as much as you would like, but (mention if you have limited time/ask if they do).

#### 2. Confidentiality

Your comments will remain confidential. We will be reporting summaries of the

comments made by community members but will not identify who said what, nor

will we identify the names of the individuals we interview.

We would like to take notes and tape record this interview. Your input is important and we want to make sure that we accurately record what you tell us. Feel free to not respond to any question we ask, or hit the "Stop" button on the tape recorder at any time. After we are finished using the tapes for this class, the cassettes will be recycled or destroyed. Is this okay with you?

#### 3. Ground Rules

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

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

#### 4. Self and Family

How long have you lived in this area? Who does your family consist of? What kind of work do you/members of your family do? Where? What activities in the community are you involved in? Where do you attend church?

#### 5. <u>Geography of the Community</u>

We have been asked to work with the Holly Springs community. How would you define "Holly Springs?" (show map) About how many people would you say live in Holly Springs?

#### 6. Assessment of Community

If someone were considering moving to Holly Springs, what would you tell them about the area to convince them to move here? Probe: What are other strengths or good things about Holly Springs?

How could Holly Springs be improved? Probe: What other problems/areas of improvement does Holly Springs have?

Would you consider Holly Springs to be a stagnant community, or a changing community?

What makes you think this? Is this something that you would consider to be good or bad for Holly Springs?

How would you feel about new growth in the area? Probe: Is this something that you would consider to be good or bad for Holly Springs?

How well would you say people know their neighbors?

If you needed help for some reason, who would you turn to?

#### 7. Community Activities

What organizations are in the Holly Springs community?

Who are the important people in the community for getting things done? Probe: Who are the formal/informal community leaders, etc.

What kinds of projects has Holly Springs worked on together (in the past 5-1 0 years)? (How) were you involved in these efforts?

What groups of people are involved in community activities? Probe: Are people from all age groups involved? (Are young people - those under 30 - involved in community activities?)

#### 8. Employment/Economics

Where would you say that most people in Holly Springs work?

What do you think of these job opportunities? (Are they 64 good "jobs, "bad"

jobs, etc.?)

#### 9. <u>Health</u>

What health problems have you or your family had to deal with? What are the main health problems of people in Holly Springs? Where do you (and your family) get medical care?

What do most people do when they have health problems? (i.e., do they seek care?)

Where do most people in this community go to receive medical care? How do most people get to the (doctor, health dept, etc)? (i.e., what transportation is available?)

What kinds of human, social, or health services have you (or your family) used? Probe: What was it like?

Would you consider Holly Springs to be a healthy community? Probe: What makes it a healthy community? or why wouldn't you consider Holly Springs to be a healthy community?

#### 10. Changes Over Time

Thinking about all of these things we've discussed above: How has Holly Springs changed over the past 5 years? Probe: Is there anything different about Holly Springs now that was not the case 5 years ago?

What do you think about these changes? Probe: Are they something that you consider to be good or bad?

#### 11. Perceptions of the Future

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

#### 12. <u>Closing</u>

Is there anything else I have not asked about, that is important for me to know about Holly Springs?

Can you think of some other people in the Holly Springs community who we should speak to about Holly Springs?

What did you think of our interview questions? (Ask for first few interviews only.)

Thank you again for your participation!

#### Service Provider Interview Guide

#### 1. Opening

*ThankYou* for taking the time to meet with me/us. We recognize that your time is valuable and we appreciate Your participation.

We are *graduate students from UNC* School of Public Health. A requirement of our graduate program is that we work with a community in NC to conduct a community diagnosis. This means that we help the community to identify its strengths, weaknesses, and future directions. Our community is Holly Springs. The information we gather will be summarized and shared with the community. In addition, we will present our results to the community at a forum that will be held in the spring.

*The purpose* of speaking with you today is to find out about your thoughts and experiences of having worked with the residents of Holly Springs. We are interested in your opinions. There are no right or wrong answers.

*Time:* This interview should last 30 to 40 minutes. We would like to give you the opportunity to tell us as much as you would like, but (mention if you have limited time/ask if they do)

#### 2. Confidentiality

Your comments will remain confidential. We will be reporting summaries of the documents made by community members but will not identify who said what, nor will we identify the names of the individuals we interview.

We would like to take notes and tape record this interview. Your input is important and we want to make sure that we accurately record what you tell us. Feel free to not respond to any question we ask, or hit the "Stop" button on the tape recorder at any time. After we are finished using the tapes for this class, the cassettes will be recycled or destroyed. Is this okay with you?

#### 3. Ground Rules

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

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

#### 4. <u>Overview</u>

Could you please provide me with an overview of the services your agency provides?

What is your role in providing these services?

#### 5. <u>Services</u>

What services does your agency provide for the residents of Holly Springs? What groups tend to be the most in need of services? What groups tend to be the most difficult for your agency to reach? Why? What other agencies provide services to the residents of Holly Springs? Which of these is the most knowledgeable about?

#### 6. Community

What would you say are the strengths of the Holly Springs community? What would you say are the greatest needs of the Holly Springs community? What kinds of community projects have been attempted in Holly Springs in the past 5 years? How successful were they? Why? Who would you say are the key community leaders in Holly Springs? If you were going to try to do some type of community health project in Holly Springs, who from the Holly Springs community would you try to involve to ensure success?

#### 7. General

Is there anything else that you can tell me about the Holly Springs community? Is there anything else that you think I/we should know about?

#### 8. Documents

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

#### 9. Referrals

- Whom else would you recommend that we talk to about the needs and assets of Holly Springs?
- Would you be willing for us to mention your name when we contact them?

Thank you for your time!

## **APPENDIX E:**

## RECRUITMENT MATERIALS



February 7, 1999

Dear Friends,

We are a group of graduate students from UNC-Chapel Hill School of Public Health. We have been learning about the Roxboro community and interviewing residents since last fall. On Sunday February 21, 1999 we will be holding a community forum to **"Celebrate Roxboro**". The forum is scheduled from 12:30-3:00 p.m. at the County Offices Auditorium located on 304 South Morgan Street.

We hope that you will be able to join us and share your ideas as we recognize the strengths of the community and discuss Roxboro's future directions. A resource fair will be held during the first hour (12:30-1:30) followed by a brief presentation and community discussion. Representatives from the Person County Health Department, the Christian Help Center, Youth Alternatives and other agencies will be available to answer questions and distribute information. Free blood pressure checks will also be available along with several exciting door prizes.

As the church minister, we would appreciate it if you could inform your congregation about the forum during the next two weeks of worship so no one will miss out on this great opportunity to fellowship with the community.

We look forward to celebrating with you at this neighborly and lively affair.

Sincerely,

The Roxboro Community Profile Team School of Public Health University of North Carolina at Chapel Hill



### Sunday, February 21 12:30-3:00 PM

(12:30-1:30 Resource Fair and refreshments, Forum begins at 1:30) \*\*\*County Auditorium\*\*\*

> 304 S. Morgan Street (enter on Long Ave and Morgan St.)

Please join us for food and drinks, neighborly fun, and opportunities for the future of *Roxboro*.

### Come visit the resource fair!!

Person County Sealth Dept., Person Samily Medical Center, Safe Saven, Person County Youth Alternatives and more...

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# COMMUNITY FORUM AGENDA

## **APPENDIX F:**

### FORUM AGENDA

Welcome/Introduction

Icebreaker

**Secondary Data Presentation** 

**Highlight of Major Themes** 

**Small Group Discussion** 

Large Group Round Up

**Conclusion and Raffle** 

# APPENDIX G: COMMUNITY FORUM REPORT

#### FORUM REPORT

The Roxboro Forum was held on Sunday, February 21, 1999 at the County Auditorium in Roxboro, NC from 12:30 p.m. to 3:00 p.m. A resource fair represented by various health organizations was held at the beginning of the forum (12:30 p.m. to 1:30 p.m.) while a buffet lunch was served. A list of organizations attending the resource fair can be found in Table G-1.

A month prior to the forum, a planning committee was organized to address logistical concerns such as the date, time, location, format and advertising for the forum. Committee members also solicited funding sources for food, door prizes and sponsors. The committee consisted of UNC Public Health students, community members and service provides. Committee members included: Stoney Stonebreaker, Deborah Carter, William Dunn, Carol Thomas, Janet Clayton, Millie Becker, Natasha Blakeney and Jennifer Gierisch.

Table G-1: Resource Fair Participants.

Resource Fair Participants
Person County Health Department
Person Family Medical Center
Person County Memorial Hospital
Department of Social Services
Christian Help Center
Safe Haven
Person County Youth Alternatives
Person County Partnership for Children

Three weeks prior to the forum, Roxboro community members were notified of the meeting through an article in the Chamber of Commerce newsletter, an article in <u>The Courier Times</u> and flyers. The flyers were posted in business and storefront windows to promote the forum and the resource fair (see Appendix E). In addition, personal letters were sent to all individuals who were interviewed and church ministers were asked to announce the forum during their church services. Service providers who participated in the resource fair were also mailed flyers and asked to distribute them to promote the forum.

The forum agenda can be found in Appendix F. The forum began by thanking all audience members for attending and by having everyone present introduce themselves. Next, the purpose of the forum was explained followed by a description of how information about Roxboro was collected. With posters and overhead slides UNC-CH students then presented eight major themes found in the interviews. The themes presented were:

- Community Strengths
- Transportation
- Recreation
- Health
- Location
- Commuters
- Hispanic Community
- Future Hopes

Then, the community members chose two themes of particular interest to them (health and recreation) and broke into two different groups for discussion. After 20 minutes of discussion, the audience came back together and a member from each of the groups briefly reported to the audience what their group had discussed.

The health group addressed the lack of funds available for Public Health work in Roxboro. Health organizations would like the local government to support increased Public Health efforts by advertising available services and encouraging government employees to utilize health services available in Roxboro. Other issues addressed included: the lack of knowledge among the general population about services available in Roxboro, inaccurate perceptions of the Health Department and the use of health services only for emergencies, rather than preventive care.

The group that discussed recreation included County Commissioner Johnny Lunsford, who encouraged community members to speak with their commissioners about changes they would like to see occur in Roxboro. The focus of the group discussion was the hope of getting a recreational center that could host after school activities for children and a public pool that all Roxboro residents could use.

A UNC-CH student concluded this part of the meeting by suggesting that those who were present and interested organize a follow up meeting. The student suggested that one person from each group take a written list of interested community members' names so that an organized meeting could be held at a later date to continue discussion about either health or recreation concerns. At the end of the forum, the raffle prizes were distributed and people

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were thanked for their participation and help throughout the Community Diagnosis process.