Siler City, North Carolina
Chatham County

An Action-Oriented Community Diagnosis:
Findings and Next Steps of Action

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Catherine Aspden, Melissa Barrett, Molly Grabow, Nate Pleasant,
Bree Raburn
Preceptors: Dorothy Cilenti of the Chatham County Health Department and
Rev. Mary Jackson of Voices for Action
Instructors: Geni Eng, DrPH and Karen Moore, MPH

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Table of Contents

List of Appendices :

**Appendix I.   Community Member and Service Provider Interview Guides
                   with Fact Sheets**
Appendix II. Agencies & Organizations Working in Siler City
**Appendix III. Summary of Community Member and Service Provider Views
                   Regarding Access to Medical and Preventive Care in Siler City**
Appendix IV. History of Community Research
Appendix V. Flier Advertising the Siler City Community Forum
**Appendix VI. Packet Distributed at the Siler City Community Forum,
                   Including Agenda and Summary of Findings**

Executive Summary

This document is the final report on an action-oriented community diagnosis (AOCD) of Siler City, North Carolina. The AOCD was conducted by a team of five graduate students from the University of North Carolina-Chapel Hill School of Public Health between October of 2003 and May of 2004. The assessment was aimed at identifying the strengths and needs of the Siler City community according to service providers and community members.

To better understand Siler City, our team first examined secondary data about Siler City's history, demographics, economics, education, and health outcomes. After being approved by the School of Public Health's Institutional Review Board (IRB), we conducted qualitative, key informant interviews with service providers and community members to listen to assets and concerns important to them. Because several assessments have been conducted in Siler City in recent years, we asked interviewees about their general concerns and then asked about issues that had been identified as salient in previous years to learn about how these issues had changed since the previous assessments.

In total, we conducted 14 service provider interviews and 15 community member interviews. After analyzing secondary and primary data, our team organized the results into themes. Identified themes included lack of affordable and well-maintained housing, prevalence of crime, lack of good jobs, lack of recreation, lack of transportation, improving relationships between different community groups, lack of access to health care, emerging health concerns, and the controversial role of research in the community. Service providers and community members held similar views on most of these issues.

Once themes were identified, we held a Community Forum on April 26, 2004, to present the findings to the service providers and community members of Siler City. The forum was well-

attended by community members and service providers of Siler City and focused on discussion of priority issues and development of action steps. It is our hope that this document will be of use to those concerned about the health and quality of life of people living in Siler City.

I. Introduction

During the 2003-2004 school year, our team of public health students from the University of North Carolina at Chapel Hill School of Public Health conducted an action-oriented community diagnosis (AOCD) of Siler City, North Carolina. The goal of an AOCD is to assess the needs and strengths of a community and then to work with community members and service providers to identify priority issues and action steps that will effect change. Guy Steuart contended that "community diagnosis is not the same as a needs assessment…. The diagnosis is much broader and aims to understand many facets of a community including culture, values and norms, leadership and power structure, means of communication, helping patterns, important community institutions, and history" (Steckler, 1993).

The following is a brief description of the methodology used for data collection and analysis during this AOCD, an introduction to the Siler City community, summaries of secondary and primary data, and our team's conclusions and recommendations for Siler City.

II. Research Methodology

This AOCD used a variety of research methods, including the collection of secondary data, field research through observation and participation in community meetings and events, and qualitative, in-depth interviews with service providers and community members. After all data collection and analysis were complete, a forum was organized to present the findings of the

assessment to residents and service providers, to facilitate dialogue on the findings, and to develop action steps to move the residents and service providers towards shared goals.

Secondary Data Collection

We gathered secondary data on Siler City during the course of the assessment, from October 2003 through April 2004. Reports on previous community assessments conducted by students of UNC School of Public Health in Siler City were reviewed, as well as 2000 census data and other county health assessment findings such as the results of the Healthy Chatham Community Assessment published in February 2004. We also read newspaper articles and website content regarding Siler City.

Exploring the Community

In order to become familiar with Siler City, we explored the town and participated in events and meetings. Initially, we conducted windshield tours of Siler City to observe the infrastructure of the town as well as who lives where and in what conditions. We also attended various community events and meetings such as a celebration of Rev. Martin Luther King Jr. Day, meetings of the Voices for Action group (a Grassroots Leadership Initiative), meetings of Chatham Communities in Action (CCIA), meetings of the Chatham Cares Network, and a meeting of the Siler City Rotary club. In addition, we were invited to participate in a neighborhood clean-up and cook-out in the Lincoln Heights neighborhood of Siler City organized by Voices for Action. By participating in these events and meetings, we were introduced to residents and service providers and began to get a sense of the issues and successes of Siler City through listening to and dialoging with the attendees. We kept detailed field notes of these events and interactions, which served as important additional sources of data for the assessment and have been included in this report.

Although the collection and analysis of secondary data gave us an orientation to the strengths of Siler City as well as issues of past concern to residents and service providers, the heart of the community diagnosis process is to conduct qualitative, in-depth interviews with residents of and service providers for a given community. Through this collection of primary data, the residents of Siler City were given a space within which to voice issues of current concern to them. In addition, their perspectives on positive change that has occurred in Siler City on issues raised in numerous previous assessments was ascertained, as well as on areas they feel have not experienced positive change since the last assessments were performed. Respondents were also asked about Siler City's strengths, especially with regard to the community's capacity to mobilize for social change. Interviews with service providers working in Siler City were conducted in order to gather their perspectives on changes that have occurred in Siler City since 2000 as well as on current challenges to and assets of the town.

Primary Data Collection

We began the process of primary data collection by drafting interview and focus group discussion guides in October of 2003 as part of our application to UNC's Institutional Review Board (IRB) for review of research involving human subjects. IRB approval was sought to ensure the project upheld public health ethical standards with regard to the protection of the subjects of the research. We drew upon the instruments constructed for prior community diagnoses to draft these interview guides. In addition, we drafted fact sheets for residents and service providers that were given to interview respondents to gain their verbal informed consent to participate. These materials were submitted to the IRB in October 2003 and official IRB approval of the project was granted to the team in February 2004.

Once the IRB proposal was submitted, we dialogued with our preceptors regarding the

vision of the project and the questions included in the discussion guides. Then we pre-tested the interview guides with two individuals who are both service providers and residents of Siler City in December 2003 and January 2004. The pre-tests took about one and a half hours each, and based on the pre-test we revised the wording of some questions, added some new questions, and changed the question order in the guides. See Appendix I for the community member and servic provider interview guides and fact sheets.

Feelings of Over-assessment

Early on in our conversations with both service providers and residents of Siler City, it became clear that both service providers and community members felt over-assessed, especially by student teams from the UNC School of Public Health. Individuals expressed not only a personal exhaustion with the number of times they were asked to participate in research studies, but also reported that there are strong feelings of suspicion and distrust of assessments and research within the African-American and Latino communities of Siler City. In order to respond to these concerns while still completing the assessment process, we had numerous conversations with our preceptors and decided that this assessment would build off prior assessments and that we would collaborate closely with community activists and our preceptors in conducting interviews with community members. They felt it was acceptable for us to interview service providers, although the interview guide was updated to revisit issues raised in the 2000 Siler City AOCD rather than asking more general questions about Siler City's strengths and challenges as had been planned.

Interview Procedures & Data Analysis

Each interview was conducted by two team members, one serving as the interviewer and one taking notes. Interviews averaged about 70 minutes and were tape-recorded to ensure

responses were completely and accurately captured. After the interview was completed, the team members who were at the interview discussed the session. The note-taking team member gave the interviewer feedback regarding how to improve their interviewing skills. Team members transcribed tapes verbatim. Once transcriptions were prepared, they were then read through and coded by one team member who had been present at the interview and one who had not. Coded text was then gathered into identified themes, and team members wrote up summaries of the findings.

Sampling Strategy

We aimed to interview service providers and residents of Siler City who are considered key informants: people in a community who know the opinions, ideas and feelings of many other residents or service providers in that community and have a good sense of the 'goings-on.' We spoke with our preceptors and other individuals familiar with Siler City to get an initial list of service providers to contact, and then used a snowball sampling approach to locate others for interviews. We asked each person we interviewed who else we should speak with about Siler City, and those who were mentioned frequently were highly prioritized for contacting. While we contacted service providers directly, respondents were asked to contact community members before we contacted them, in order to gain their permission for the team to approach them. Once permission was granted, we contacted them to schedule the interview.

Limitations

Unfortunately, we faced significant limitations that did not allow this assessment to be as truly community-based and participatory as we had hoped. The residents of Siler City lacked a feeling of ownership of the process, perhaps because the team was invited to conduct the assessment by the Health Department and not by community members themselves. Time

constraints at the beginning of the process meant we were unable to get community member input in the design of the assessment and the interview guides from the start. Although we attempted to get input from residents, service providers, and preceptors on the assessment throughout the process, this lack of ownership combined with the copious amounts of social change work already being conducted in Siler City prevented people from engaging with the research as much as we had envisioned. In addition, the referral sampling procedure used during the assessment meant that only those connected with service providers and active community residents were contacted for interviews. We may not have reached those residents who are not connected with services and organizations but may have a better idea of what is occurring in the community. Finally, because of limited time for the project, the team is unable to follow through with the action steps and is not able to give as much back to the community as we would like.

III. An Introduction to Siler City

Siler City spans over 4 square miles and is located in western Chatham County, North Carolina (Town of Siler City, 2001). Siler City is the largest town in Chatham County, but Pittsboro located to the east is the county seat (Chatham County Government, 2004). The two closest cities of 10,000 people or more are Asheboro and Sanford, each located within 20 miles of Siler City. According to the 2000 US Census, 6,966 people live in Siler City (U.S. Census Bureau, 2004).

The first settlers began making their home in Chatham County in the 1750's, including the Siler family, arriving in 1750. The opening of a railroad through western Chatham County in 1884, running between Sanford and Greensboro, instigated the formation of the town (Hadley, 1986). On March 7, 1887, the town of Siler City became incorporated, growing to a population

of 254 people in 1890 (Hadley, 1986). Lumber mills, furniture factories, grain mills, and a yarn plant set the early industrial base for the town. In the era from 1937 through after World War II, Siler City grew as an industrial center as branch plants of companies based elsewhere opened and local companies, such as the poultry and meat processing plants, expanded (Hadley, 1986).

The first public high school in Siler City was built in 1923 and remained in use until one of the current high schools, Jordan Matthews High School, was built in 1956. The Chatham County Hospital opened in December of 1937 with 21 beds and the new Chatham Hospital was built in 1950 (Hadley, 1986). As was mentioned in the 2000 AOCD, the first church in the city, Corinth A.M.E. Zion, was organized in 1884. Today, religion continues to be central to the lives of many residents, as Siler City is home to about 50 churches, with the largest percentage (30%) being Baptist (Burritt el at., 2000).

When the team was asked to conduct the AOCD in Siler City in October 2003, one of our central questions became whether or not this town could be considered a community. As Heller (1989) advises us, the term community can be used in at least three ways: to refer to a certain locality such as a neighborhood or town, to refer to a relational group or community of people who have formed relationships with each other through common interests or other unifying qualities, and to refer to collective political power.

Siler City as a whole, as a geographically defined locality, meets the first of these uses of the term community, although residents often referred to their own neighborhoods as their communities as well. The second definition, however, it is not as clear. In talking with African-American and Latino residents of Siler City, they tended to use the term community to refer to their own racial or ethnic group. The team perceived that it is only within racial and ethnic groups that residents experience a shared history with other residents, as well as shared values

and helping relationships. We believe, then, that racial or ethnic identities are actually the primary units of identity in Siler City, or the "natural groupings that people form for themselves to organize their relationships and identity with other people" (Steckler et al., 1993). However, both African-American and Latino residents spoke of a growing feeling of shared history and experience between the two groups, indicating perhaps a growing sense of shared identity. It appears from this that Siler City may be becoming one community, as a "community is formed when multiple units of identity extend and interlock themselves to one another" (Steckler et al., 1993, p. S11).

Finally, residents spoke about how the African-American and Latino communities of Siler City are beginning to work together to gain political power or work for other changes in the town. Both service providers and residents spoke of all groups becoming more familiar with the new Latino culture. These groups may be coming together for collective power and acting as units of solution, defined as "the aggregate of two or more units of identity that must pool their resources, mediate with the wider society for additional resources, or do both" (Steckler et al., 1993, p. S11). In all of these senses, then, Siler City can be considered a place consisting of many communities, working towards becoming one community.

IV. Results by Theme

Twenty-nine individuals were interviewed during this assessment, including fifteen community members and fourteen service providers. The individuals interviewed are of diverse racial backgrounds: we interviewed eleven White people, ten African-American people, seven Latino people, and one Asian-American person. This section will present community members' and service providers' perspectives on positive things happening these days in Siler City as well

as the community's top concerns at present which were housing, crime, and jobs. We will also present findings on the four issues that were prioritized in prior assessments that we checked in with respondents about, including the need for recreation, community ties and language barriers, and access to health care. Finally, we will present two other issues that arose in this assessment, which are lack of transportation and the controversial role of research in Siler City.

Many Positive Things are Happening in Siler City

The community members and service providers interviewed cited strengths of Siler City that they feel are positive attributes of the town. Several community members and service providers expressed excitement about the new Art Incubator project enriching the cultural base of Siler City and revitalizing the downtown area by providing support for small businesses. Other individuals mentioned positive changes occurring in domestic violence prevention through the work of groups such as Coalition for Family Peace. Overall, both community members and service providers perceived an abundance of resource groups and support organizations operating in Siler City (see Appendix II for a partial listing of such organizations working in Siler City). The health department has several successful programs, especially concerning diabetes and asthma. Residents have become increasingly involved in grassroots organizations such as Voices for Action, which has organized neighborhood clean-ups and is beginning the grant-writing process to take steps towards addressing issues of concern in the community.

Many service providers noted improvements in bilingual staff in the clinics in an effort to lessen the language barriers. In reference to the bilingual services offered in Siler City, one service provider responded, "In comparison to other counties, I think Chatham County is light years ahead...just everything done by the Hispanic Liaison, the Coalition for Family Peace, the amount of interpreters at the health department—I've never seen that anywhere." Churches

have also begun initiatives to allow opportunities for the different groups in Siler City to interact and continue to strive for positive change regarding community ties.

Lack of Quality and Affordable Housing

While it did not appear in the 2000 assessment, most community members and one service provider in Siler City cited lack of affordable housing and prevalence of deteriorating housing as major concerns in the town. Multiple residents noted that rent is very expensive, and that the few homes that are available for renting are in poor condition. One community member declared, "Housing is bad. They're too expensive and they're not houses, they're like caves. Horrible conditions." Several people also mentioned being concerned other living condition issues such as the water quality in the city limits of Siler City.

Numerous individuals maintained that little is being done to provide adequate housing suitable to the needs of Siler City residents. One man who grew up in Siler City commented that "housing has gotten bad and no one's doing anything about it." Another resident summed up his opinion of the housing situation by saying, "I could take some old pictures of these houses 30 years ago, and nothing has changed, although they sure looked better 30 years ago."

Several individuals felt that the homes currently being built in Siler City do not match the needs of the majority of residents. One community member expressed her frustration with the incongruity by stating, "So the issue becomes who are you going to put in there? We have a lot of houses going up, houses that we were told we weren't qualified for, and so now you're building more houses that cost even more money than the ones we were trying to get way back when, so who's going to be able to afford them?"

High Rates of Crime

Another concern mentioned mainly by community members is the perception of high

rates of crime in Siler City. While Siler City comprises less than forty percent of the population of Chatham County, the majority of the county's crime occurs there (NC State Information, 2004). Many individuals commented on the problems of drug use and prostitution within the area. One community member declared, "I guess the biggest change in the last twenty years is the drugs that have invaded this town. This is a small town, but it is one of the most saturated towns you'll see." Another resident stated, "We get a paper weekly, and there's probably only one paper a month that doesn't have stuff about prostitution. It's a big problem and no one is doing anything about it." These problems also influence community health. A worker at the health department stated that "We're seeing a lot of drugs in all the populations, prostitution, which you think, well Siler City doesn't have that, but we do. We're seeing an increase in our HIV population, I think because of the drugs and prostitution." Also, during casual conversations with members of the community, team members heard about negative interactions between some Siler City residents and police department officials.

Lack of Good Jobs

Both residents and service providers shared the same concern about the lack of well-paying jobs within Siler City and the impact that unemployment has upon other aspects of individual and community well-being. One service provider suggested that the lack of job opportunities underlies many of the other issues affecting people in Siler City:

> Good paying jobs are key to the health of any community. If people can't work nearby, have a good job in a reasonable distance to their home, there comes a point where this is no longer a good place to live and the quality of life starts to deteriorate. So I think the key for the survival of Siler City, as it is for any community, is that you've got to have good paying jobs for the people who are living here and the people who are moving here. And if you have that, it takes care of an awful lot of woes.

Sources of employment have not changed significantly since the last AOCD conducted in 2000. The greatest percentage (37.6%) of jobs in Chatham County are held in the manufacturing sector,

with the services (16.5%), retail (13.5%), and the government (13%) sectors also serving as major sources of employment (Chatham Economic Development Corporation, 2004). The main manufacturing employers are Townsends, Inc., and Goldkist, Inc., both poultry processing plants. Siler City is also responsible for nearly a third of Chatham County's retail sales (Chatham Economic Development Corporation, 2004). When driving through town, we noticed mainly manufacturing plants, factories, and Wal-Mart as potential places of employment.

Several community members stated that many of those living in Siler City work in locations outside Chatham County. During 2002, about 5,000 more workers commuted out of Chatham County than commuted into the county for work (Chatham Economic Development Corporation, 2004). A longtime native of Siler City remarked, "Of course we have the chicken plants that employ a lot of people, but out of town you have higher wages and better benefits packages."

Many of those who live and work in Siler City attributed the lack of job opportunities to the continued reluctance of a few influential individuals to encourage the growth of the town. One Siler City resident asserted, "A lot of people around here, especially the higher-ups, are comparing us to places like Cary. They don't want us to be another Cary. I would like to see us progress more from where we are." This frustration with the lack of economic growth reverberated throughout many interviews. One service provider mentioned, "I think we might need more industry for jobs and for our economy. And to have that you have to have the town or the county be willing to give and take a little bit to get industry in. I think sometimes they do that, sometimes they don't. But we definitely need a new job market here." Numerous individuals remarked that the economic expansion and employment opportunities in business and industry have not kept pace with the large population growth in Siler City. A service provider

stated, "Most of the people who have jobs, it's outside [Siler City]. It's the people who want to work here who don't."

Many people were also concerned about the impact that this limited job market has upon the youth of Siler City. Both community members and service providers felt that young people growing up in Siler City see little future in staying and working in Chatham County. One mother commented, "I think the young people, you know when they go to college, they're probably trying to get away from their family but also there are not a lot of job opportunities for college grads to come back to."

Need for Recreation

Lack of recreational opportunities was identified as a theme during the 2000 Siler City AOCD, and the majority of community members and service providers interviewed felt that this is still an issue, although community members were much more specific about their concerns and the changes that they would like to see. Both community members and service providers mentioned some recreational opportunities in the town, such as Bray Park and the addition of new walking trails in various areas of the city. Some service providers are aware of the Pedometer Program at the health department to get people walking. An oft-noted positive change is the soccer leagues in Siler City, in which many of the Hispanic community members participate. Several service providers brought up the Art Incubator as an opportunity for artistic recreation, and also pointed out some local festivities, such as the Chicken Festival and Fiesta Latina. Community members mentioned that many area churches are also beginning initiatives to get their members involved in physical activity by building walking trails and starting leagues. However, in other areas of recreation, there was a general consensus by community members that people have to leave Siler City to go to neighboring communities for activities. One

community member stated, "We are losing a lot of money. I eat out of town, shop out of town." Some recreational resources that were mentioned as lacking include a skateboarding park, high-end shopping, coffee shops, and movie theatres.

Recreation for the youth of Siler City was mentioned as a concern from both service providers and community members, although community members gave more concrete examples of recreation they would like to see for youth. One community member said, "There aren't a lot of places for kids to play around here." One service provider noted, "Kids and adults have nowhere, at least nowhere affordable and not really anywhere to go that isn't affordable, to go get exercise." The Parks and Recreation Department has some events for children, and the schools have some athletic programs, but opportunities for children to be physically active are still lacking. One community member asserted, "I think that there would be a lot less teen pregnancy, a lot less young people getting in trouble if they were encouraged to develop non-traditional activities," such as dance and art. The development of a cultural arts center and summer camps were two suggestions for providing more opportunities for this type of activity.

Most service providers and community members felt that access to and availability of recreational activities for all age groups in Siler City is limited, especially for those who lack transportation. While attending various events in the city, we observed few people walking in the downtown area of the city. Service providers and community members mentioned a few of the recreational activities in which residents participate, including soccer and basketball, but suggested that such activities would have higher rates of resident participation if transportation around town was easier.

Service providers and community members addressed the potential opening of a YMCA in Siler City as a solution to the desire for more recreational opportunities. The push for a

YMCA has been underway for about 10 years in Siler City, but has recently been gaining more momentum as a group of residents has formed a committee to address this issue, so we were interested in what people are currently thinking about this idea. In some interviews, we asked people's opinions about a YMCA, and some people we interviewed brought it up themselves. Many community members and service members stated that a YMCA would be a great idea, and several suggested that it may help break down some of the barriers between groups by enabling them to intermingle at the same place. "I think it would help our community be a little closer together if there was a common place that all groups could go to that would be non-threatening," stated one resident service provider. Many community members also thought that a facility such as a YMCA would be good to keep kids active and out of trouble and provide a place for them to go after school, a place where "kids can go and do stuff that's important to their development."

Although most thought it was a good idea in theory, service providers and community members also mentioned that in reality, a YMCA may not be feasible for a variety of reasons, including the potentially prohibitive cost of membership for residents and a lack of funding. Others wondered if a town the size of Siler City could sustain a YMCA. One service provider questioned whether residents would actually engage in such recreational activities if given the opportunity, wondering, "If you build it, will they come?" Another common barrier often cited was the lack of availability of transportation to get people to the YMCA. Some methods brought up to address these issues include providing scholarships for memberships, especially for children, having membership fees on a sliding scale, operating under the Y in Asheboro while the Y in Siler City gets started, or starting with a small storefront Y. Many community members and service providers agreed that some type of recreational facility would be an asset to the community.

Relationships Among Some Groups Are Improving, But Work Remains

Siler City has experienced a massive influx of Hispanic residents from other states and other countries such as Mexico in recent years, the majority of whom work in the chicken processing plants and other industries in the town. The Hispanic population in the town has grown from 3% in 1990 to 39% in 2000, with underreporting likely due to undocumented immigrants' limited participation in the census because of fears of deportation (Census, 2000). Many service providers and Latino residents now estimate that Latinos comprise more than 50% of the population of Siler City. This rapid change and the town's reaction to it have drawn a great deal of media attention in recent years. This issue arose during the last AOCD conducted in Siler City in 2000 and was prioritized and discussed at the forum in March 2000. Community members and service providers who had attended the forum left with some concrete action steps they wanted to take to build better ties among the various groups living in Siler City. During interviews and through secondary data collection, we aimed to determine whether positive changes had occurred since the last assessment in this area, and where work remains.

Tensions existed between groups in Siler City during the 2000 assessment, as an anti-immigrant rally was staged by David Duke, a former member of the Klu Klux Klan, and many White and African-American parents started pulling their children out of Siler City Elementary School because of its growing Latino population. Recently, Siler City again received national attention over the issue of community ties and tensions when "The Divide," a PBS documentary on Siler City focusing on these events, aired nationally in September 2003.

Although community members and service providers mentioned the Duke rally and "The Divide" documentary in interviews during this assessment when citing negative aspects of the relationships between African-Americans, Whites and Latinos in Siler City today, most

mentioned that there had been some positive changes occurring in the past four years. Many community members mentioned that churches are sponsoring activities that are bringing people together, as are agencies such as the health department. Many community members and service providers cited the health department's Dismantling Racism initiative as a very positive change to try to better the relationships among groups in Siler City. The Chicken Festival and the new Walmart were cited as events and places where people can mingle with members of other groups. A community group, Chatham Communities in Action (CCIA), had organized a multicultural festival a few years ago that reportedly had good turn-out.

In general, African-American and White service providers and community members interviewed seemed to feel there is a growing acceptance of the Latino population today in Siler City, both within the community and within their own agencies. People cited examples of individuals learning more about Latino culture, and appreciating the new foods and language to which they are being introduced. People also mentioned that the Latinos are settling in Siler City now, buying homes and staying rather than moving between Siler City and their hometowns as migrant laborers, increasing many residents' perceptions that they seem to have become more invested in the town. A few African-American community members interviewed reported very positive interactions with their new Latino neighbors and overall positive feelings about the group. These growing relationships have been aided by the gradual easing of the language barrier that had arisen as a prioritized area of concern in the last assessment and has seen positive change since then. Both community members and service providers reported that residents are starting to see that the town is being revitalized by the Latinos and are seeing the beauty in the town's diversity.

Service providers differed from community members with regard to their perceptions of

the town leadership's effectiveness in fostering better relationships among the various groups living in the town. While service providers did not talk much about the issue, African-American community members in particular mentioned feeling that people think the town is still divided, stemming partly from the fact that "no one takes the time to get to know each other" and that there are many new residents in the town, which makes some long-time residents feel like the town has lost some of its pride and neighborly character. From our conversations with community members, it appeared that people felt that the churches in Siler City are still somewhat segregated, and that some people thought that neighborhoods may be intentionally kept segregated. People also remarked that they found themselves socializing most often with members of their same racial and ethnic groups for recreational and other activities. African-American residents commented that "people are stuck in their image of Siler City as a small town and of how relationships should be." One African-American resident also commented that there are deep scars and wounds, and it will take a lot to get people to collaborate.

Many Factors Limit Siler City Residents' Access to Health Care

One of the priority areas emerging out of the 2003 Healthy Chatham assessment of Chatham County was access to health care, particularly with regard to health insurance coverage and affordability of care. Only roughly 38% of residents are currently insured, down from 43% in 1998 (State Surveillance Statistics). During the assessment, we asked specifically about these issues, exploring people's concerns about access to care in Siler City and solutions they see being enacted to address these complex issues. One particular solution on which we probed was the idea of a free clinic, which has recently been proposed as a potential solution by the Chatham County Health Department. In addition to the following summary, further quotes and themes regarding access to care can be found in Appendix III.

Community members and service providers had similar views about who lacks access to care and why. Both groups said that residents lack health insurance for several reasons, including that they may earn too much money or may not be legal residents in the country, disqualifying them from Medicaid, or that they may not earn enough money to afford other health insurance plans. Or, as pointed out by both groups, some work and have insurance but cannot afford the co-payments and deductibles required for doctor's visits and medications. While they shared similar perspectives on why some are uninsured, service providers highlighted financial constraints of the health department and other agencies who have difficulty providing services to indigent patients, while community members more often described personal dilemmas associated with obtaining care. A common situation mentioned by community members was that of parents struggling to afford care for their families:

> It's a balancing act. Do I take the kids for a physical or do I just take them when it's an emergency? And you're praying the whole time that no emergency arises because you have no money for an emergency. So now you've got bills when the emergency arises on top of bills you can't pay for, and if you've got more than one child, wow, those bills are piling up… and you end up talking to the credit bureau.

One provider remarked, "The health department never makes enough to maintain our budget…. We have to rely on the county to fill in on some of the gap from the state…. They do bill [for services], but most people zero-pay because they don't make enough money." The large influx of Latino patients has further strained the finances of the health department and other agencies, which are mandated to meet their budget and charge for certain services. Both groups also mentioned that residents sometimes must leave the city in order to obtain specialty care, including obstetrics and mental health services, and must often travel as far as Greensboro or Chapel Hill.

Service providers and community members differed in their views on residents' knowledge about various organizations that provide health care services to residents. While

service providers mentioned that they felt that most were aware, community members commented that some residents are unaware of insurance and medical care that are available and affordable to them. We spoke with several residents who had lived in Siler City for over ten years and had no idea that transportation services to the hospital existed, reflecting a lack of awareness. Many service providers stated that their services were available to everyone in the city, but that often only certain segments of the population use the service, but did not elaborate as to why. This lack of awareness could result from residents' inability to speak English and thereby learn about available options, or could result from agencies not being clear or aggressive in marketing their services to potential clients. In reference to a dental bus service in Siler City, one resident commented,

> My fear is that not everyone accesses it because of the title. People tend to think that only Latinos use it, but everyone can…. Is it a hindrance for you to let people know that it's not just for Latinos?… If it serves more than one population, why isn't that known?

A common viewpoint held by both community members and service providers is that lack of transportation is a major barrier to accessing medical care for all populations, but especially for Latinos and the elderly. One Latino resident recounted the following situation arising from lack of transportation, "I've heard recently that people have [walked] to the clinic with their kids, and last week it was raining. And a girl got more sick than she was at first because she couldn't drive because she didn't have her license. The husband was working, and she had to walk." Our team noticed during trips to Siler City that most of the health care agencies and clinics are located close to each other in one area near Chatham Hospital. We remarked that most residents would probably need to travel to this area for any type of care, and that it is an inconvenient location for residents without cars as it is not centrally located.

Mainly community members but a few service providers brought up another factor that was seen as inhibiting residents' access to medical care: a history of misunderstandings and

negative experiences between patients and the medical establishment. Community members recounted many incidents of poor patient-provider communication as well as discrimination in health care settings, resulting in patients receiving inadequate care and then feeling reluctant to seek care in the future. As one community member stated of service in a clinic, "When someone says I have insurance, their whole attitude changes. Then they're nice to you." Service providers also cited distrust between patients and providers resulting from poor treatment and discrimination in the health care establishment. One provider stated, "I've seen it in the medical community, this stereotyping, especially in the private sector…." These misunderstandings and negative experiences have led many residents to grow distrustful of Chatham Hospital and other organizations in town and therefore to travel to surrounding areas for care. Service providers cited a major asset combating this barrier in town, which is the Dismantling Racism Initiative at the Chatham County Health Department, a program that was developed to address racism in organizational policies and health department workers and to increase their cultural sensitivity to patients. Many providers expressed pride in the program, although one was distressed by the amount of racism that has been uncovered in the process.

Both service providers and community members mentioned that cultural differences also often stand between residents and medical care. Many community members mentioned that some people traditionally do not go to the doctor unless they are sick, which limits the amount of preventive care they receive and can result in complex medical conditions which require more expensive treatment. One community member described, "There was not a lot of folks going to the doctor. You know, if you broke something or was near dead, you went. But other than that, you grow up with this…. I have insurance and everything, but I just don't go." Service providers echoed this perception about the Siler City community: "we do not go to the doctor unless we're

sick…it's just too much of a hassle to go and have preventive care when you have to work 12 hours a day and you have kids to take care of and a home to take care of."

Many community members and service providers mentioned that often residents rely on home remedies and social networks for treatment and advice instead of consulting doctors, especially for African-American and Latino residents who cannot or do not access medical care. An African-American community member described the following as a strategy of some Siler City residents: "Oh, I rub in this or that and I'll get better."

Certain issues limiting access to care were seen as pertaining specifically to the Latino population. Inability to understand English limits some residents' awareness of available services and understanding of medical direction. Even when interpreters are available, they are often Siler City residents themselves and may know the patient, who may then be less willing to disclose private health information. One Latina community member described, "We have only two or three counselors who speak Spanish, but the population is really big and we need to have more. Some go to the ones who speak only English, but they don't always have interpreters, or the person is from Siler City so the person's not really going to talk."

The use of aliases by Latino residents was seen by service providers as not only a barrier to accessing insurance and care but also a health risk for patients whose records might be confused with someone else's. Another factor impacting this population is the fear and risk surrounding undocumented workers accessing care or applying for services. Many workers apply for insurance under an "alias" or second name, which can limit the services available to themselves and their often documented children.

Although barriers still exist that prohibit the Latino population from accessing medical care, advances in this area were mentioned by many community members and service providers

as real assets in Siler City. Several mentioned that the extensive bilingual services offered by the new Piedmont Health Services clinic are extremely beneficial to the Latino community. One community member stated that Spanish-speakers from other areas in the county "just go to Siler City. They have more interpreters." Also, the employment of bilingual providers and staff by the health department and other health agencies and the prioritization of outreach to the Latino community in Siler City were listed as positive changes by community members from all ethnic backgrounds. During visits to various clinics in town, we noticed that the variety of Spanish print materials often exceeded the English in waiting rooms.

When asked about a free clinic as a possible solution to Siler City residents' problems accessing medical care, both service providers and community members tended to state an opinion about the idea and to offer suggestions for characteristics of a useful and sustainable free clinic in Siler City. Many community members thought that a free clinic would be helpful to the community, but stressed that factors such as location, transportation, and hours of operation would greatly enhance or inhibit usage. One community member said of a possible free clinic, "It's like anything else… it has to be accessible. I'm not going to drive 10, 12 miles even if it is free…. The problem is that there's no transportation, and without it, getting even a mile is a problem." These sentiments were echoed by service providers. Services considered important by community members to be offered at a free clinic were those that would increase availability of affordable prescription drugs and reduce teen pregnancy and STD infections.

Service providers were much more likely than community members to qualify their agreement by stipulating the limitations and necessities of a free clinic approach. Many service providers expressed concern with a free clinic providing yet another "band-aid" solution to residents with complex medical problems. One stated, "I've served at a few free clinics, and I

think they're very patchwork, band-aid; I don't think they're sustainable long-term." Another

added that a case-manager approach could enable a free clinic to provide more comprehensive

care:

> Less of the doctor medical model and more of the case management model…. You're not going to go in when your toe hurts and the doctor gives you something for the toe and doesn't bother with anything else…. The nurse case management model [is] broader based and more able to take are of the greater need of the patient and perhaps connect these people and have other services as adjuncts.

Although service providers agreed that a free clinic might be good for Siler City, they

expressed reservations that it would not be sustainable due to lack of consistent financial and

human resources, especially due to the large expected patient volume. Some providers also felt

that services of a free clinic may be replicating inexpensive services offered by existing agencies

such as the Piedmont Health Service and the Health Department.

Emerging Health Concerns

In the past ten years and since the last community diagnosis was conducted in 2000,

various key health indicators have suggested that Chatham County residents have become

healthier, although some groups have become healthier than others. A lower percentage of

mothers in the county have given birth to low birth weight babies, opposite of the overall state

trend, and more are receiving prenatal care (State Surveillance Statistics, 2001). Teen pregnancy

rates and age-adjusted heart disease death rates have decreased in recent years (State

Surveillance Statistics, 2001). However, diabetes death rates have increased, and rates of Type 2

Diabetes have increased, suggesting that there may be more diabetes- related health concerns

(State Surveillance Statistics, 2001).

The leading causes of death in Chatham County from 1999-2001 were heart disease,

cancer, and stroke (Chatham County Board of Health, 2004). Substance abuse has also come up

in secondary data as a concern, as 1 in 3 injury deaths and 1 in 17 motor vehicle crashes involve

alcohol or other drugs (Chatham County Board of Health, 2002). In recent years, sexually transmitted diseases have also become an issue in need of monitoring; while HIV, gonorrhea, and Hepatitis B rates are below the state average, syphilis rates are above the state average (Chatham County Board of Health, 2002).

When asked about major health issues in Siler City, many people interviewed, especially community members, brought up diabetes as a main concern associated with all groups of people living in Siler City. One community member stated, "there's a lot of people with diabetes," and related the prevalence of the disease to lifestyles of high stress, poor diets, and lack of physical activity. Several community members are aware of programming implemented by the Chatham County Health Department to address diabetes but say that a lot of people with diabetes still do not know what to do about it. The main concern of a couple of community members is reaching people who are not exercising or following healthy diets. "The hard part is reaching the people who do need the help." If those people can be reached, an additional challenge is getting them to make necessary changes in their lifestyle, such as monitoring their diet more closely. Therefore, the health concerns of diabetes, obesity, and heart disease are intertwined, with many people not seeking care or taking the necessary steps for prevention.

Another major concern to the community members and service providers of Siler City is the increasing prevalence of HIV/AIDS. One community member stated, "Now we have an influx of HIV positive people." A service provider commented that many people are not getting tested because they do not want to know their status, and the young people are not seeing HIV as serious a disease as it was seen in the past because people with HIV are living longer these days. There are also concerns about people who are infected with HIV being able to get the care and medications that they need. Both community members and service providers noted that current

resources do exist in Siler City to address the rise of HIV, such as the Chatham Social Health

Council and programming at the health department. As a team, we became very aware of the

numerous services in Siler City directed at these health concerns.

Furthermore, both community members and service providers noted limited mental

health and substance abuse services. Health concerns such as depression and substance abuse

are often related to other stressful life situations that end up perpetuating each other. One service

provider commented:

> There is a silent majority out there that is mentally ill. And nobody, including the state, wants to address this issue as an issue…[many people] are in a sense afraid of the mentally ill, and kind of sweeping under the rug what impact that is going to have in the community. I think if we want to be a healthy Chatham community, we need to start looking at the mental health of a person.

Lack of Public Transportation

Siler City spans over 4 square miles and contains over 30 miles of streets (Town of Siler

City, 2001). With a geographically large city, residents rely on private transportation to get

around within the city and to nearby towns. The public transportation system is minimal. There

is no bus system within town or to any of the nearby cities.   Chatham Transit Network provides

a van service that can be used for a minimal fee that is sometimes covered by Medicaid.

Residents living within two and a half miles of routine stops can schedule transportation to

doctor's appointments, stores, or other destinations. Some service providers, such as the Council

on Aging, contract with Chatham Transit, while other health care providers, such as the Health

Department, offer their own transportation through services like the dental van. Because public

transportation is limited, residents often rely on friends or family for transportation. We also

heard through conversations with community members that some people pay others to drive

them around when needed. On several occasions, we observed people in several health clinics

waiting for rides after their medical appointments.

Since the last community diagnosis four years ago in Siler City, the lack of public transportation has come up as an even stronger concern with community members and service providers. Both groups have shared views that public transportation is a huge issue for Siler City residents, as Chatham Transit does not cover rural areas, can cost as much as $50 to go to nearby cities like Chapel Hill, and requires 48-hour notice for service. Both groups mentioned their desire to see increased public transportation.

Community members and service providers mentioned that this lack of public transportation greatly impacts women because their husbands often take the car to commute to work. The elderly and children are other specific populations impacted by this issue, which affects many daily life activities. People without transportation, interviewees mentioned, cannot buy groceries, wash clothes, or commute to work. Thus, residents who lack reliable private transportation are often unable to look for jobs or work outside the city. We heard several community members mention that some people did not want to work in their current jobs, but could not leave because they were unable to commute to other potential jobs.

Both service providers and community members alike mentioned that this lack of public transportation also affects recreation, especially for youth. Because many parents work during the afternoon, they are unable to transport their children to after-school activities, and hence their children are unable to engage in recreational activities. Several community members also mentioned that the lack of public transportation makes it difficult for residents to get to movie theatres or shopping malls in nearby cities.

In addition to not being able to access recreation, those lacking transportation have difficulty accessing health care. One provider stated that transportation is a "major issue to any kind of service in this county." Those without their own transportation either do not access care

frequently or rely on others for transportation, sometimes scheduling services but not being able to show up for appointments. Transportation was also mentioned as a concern for those requiring specialist care offered only in Chapel Hill or Raleigh. Several service providers mentioned that residents requiring specialist care in Chapel Hill face great difficulties relying on Chatham Transit's schedule, which can require having to take off a whole day of work. Regarding the potential development of a free clinic, one service provider stated, "A free clinic is nice, but even then, how will people get there?"

A concern that came up mainly from Latino service providers and community members was that of the recent state laws requiring proof of citizenship in order to obtain a driver's license and its affects on the transportation issue. Several suggested that these transportation concerns will only worsen as fewer drivers' licenses are issued to Latino residents.

Neither community members nor service providers mentioned any positive change in this area in the past four years. Instead, a few service providers mentioned that transportation problems had worsened with budget cuts that forced organizations to cut back on transportation services that they had once provided. Other service providers mentioned that their organizations had recently looked into addressing transportation barriers for residents, but were unable to act because they lacked funds.

Controversial Role of Research in the Community

In the past seven years, at least seven community diagnoses and needs assessments have been conducted in Siler City (see Appendix IV for a summary of recent community assessments conducted in Siler City). Every four years, the county health department is mandated by state law to assess the health of residents by conducting a county assessment. Assessments have also been initiated by individual organizations examining the needs for potential services. For example, in

2000 a UNC School of Public Health student group was precepted by a service provider interested in establishing a school-based health clinic.

A new theme that emerged during conversations with both service providers and community members was that of over-assessment of Siler City by organizations whose members include few, if any, Siler City community members, such as UNC public health graduate student groups and Chatham County Health Department assessment teams. Several community members and service providers we requested interviews with refused or hesitated to be interviewed because of feelings of over-assessment. Both service providers and community members shared a common view of being over-assessed and felt that action had not resulted from past assessments.

For the most part, service providers and community members shared the same view that not much positive change had resulted from assessments, although one service provider mentioned that following an assessment in 1996, various organizations in Chatham County did receive funding from the state to address the prioritized issues.

Both service providers and community members alike shared their concerns that they were being asked the same questions, and yet no action nor benefits for the community were resulting from the assessments. One service provider stated, "You've got to have physical property produced, physical services provided as a benefit of it, otherwise what's the use of going through it?" Another service provider described her reaction as "Oh, here's another one. What's going to be different this time?" Several community members also echoed this concern, mentioning that time was taken out of their busy days to answer questions, yet nothing came out of it. "It's always the same. You come in here and do interviews and you ask about us but then you leave. What happens to us? What do you leave us with?" Several service providers

questioned the benefit of past assessments to residents, stating, "It's not helpful," and "If the institution can assist beyond a piece of paper, then there is the possibility that they can be of some help." This concern also resonated with community members, as one said, "And with people in the community, we already know about most of the problems, but we just don't have the resources to do anything about it."

Community members and service providers shared the same views on the roles of outside researchers. A few service providers questioned the role of outside researchers in conducting research, making comments including, "Change always happens better within a community, and it is difficult for outsiders to create and influence change." We had several conversations with community members that illustrated this view; several community members asked us why we were there in Siler City. In response to these questions, the team expressed their wish that the process could have been more community-owned, but hoped the project would still be useful to residents and service providers working to make positive changes in Siler City.

V. The Community Forum

The culmination of the AOCD in Siler City was a Community Forum, held on Monday, April 26, 2004 at First Missionary Baptist Church. Throughout the process, we asked people we interviewed if they had any suggestions for the forum, and also relied upon our Planning Committee, which consisted mainly of people associated with the Health Department. Members of Voices for Action were instrumental in guiding us in our forum plans, especially by helping us find a location to hold the forum.

We invited all of the people involved in the process to the forum as well as town officials and people knowledgeable about some of the topics of discussion, and hoped that they would

spread the word to their friends and colleagues. To advertise the forum, we sent invitations, gave people fliers in both English and Spanish and put an announcement in the *Chatham Record* (see Appendix V for English and Spanish fliers). We hoped for a good representation at the forum of all the people living and working in Siler City.

The forum began at 6:00 p.m. with the attendees signing in and choosing the issue they wanted to discuss in the small group sessions. Then we invited them to have dinner, mingle with each other, and read quotes from interviews that were displayed on the walls. Simultaneous translation services were made available by the health department for Spanish speakers in order to enable the full participation of all attendees. Thirty-three people were in attendance at the forum, with a good mix of community members and service providers as well as representation from all of the racial and ethnic groups in Siler City. The program began with a welcome, followed by opening remarks by our preceptors, Dorothy Cilenti and Rev. Mary Jackson, and an overview of the AOCD process. Following this, an overview of the findings was provided and participants were encouraged to follow along with the handouts in English and Spanish that provided a summary of the main findings (see Appendix VI). At this point, we broke into small groups for an in-depth discussion on the six main themes of the assessment that had been prioritized in conversations with planning committee members. Those themes were 1) need for recreation, 2) lack of affordable housing, 3) lack of transportation, 4) lack of access to health care, 5) diabetes health concerns, and 6) the role of research in the community.

Small Group Report: Need for Recreation

The recreation small group consisted of five participants concerned about this issue in Siler City. Student team member Molly Grabow facilitated the group using the Force Field Analysis technique, during which participants assess the current situation, set a goal for change,

and then identify and prioritize the forces that help or hinder the realization of this goal. Out of this discussion, participants try to come up with concrete action steps to take away from the discussion that they can use to work toward change in this area. One action step that emerged from this discussion was that a participant volunteered to investigate whether the Parks and Recreation Department had an Advisory Board, as members of the group stated they would like to be able to voice their concerns about the maintenance of the parks and their suggestions to get better utilization of the parks. The group exchanged email addresses to be able to continue the discussion at a later time because they all felt this issue was extremely important.

The group also discussed the progress in the effort to bring a YMCA to Siler City, and one group member explained that an assessment of the feasibility of Siler City as a location for a YMCA is coming soon. Group members were encouraged to come to the meetings about the YMCA. The group also felt that an important action step could be to write letters to the newspaper to hold public officials accountable for attending or not attending community events. They felt it is important that the officials hear the concerns of the community members, as well as acknowledge the good that is happening.

Small Group Report: Lack of Quality and Affordable Housing

Student team member Nate Pleasant facilitated the small group discussion about housing by using Force Field Analysis. Some of the action steps that came out of this session included the initiation of discussion with landlords concerning rent cost and possible rent standardization. The group also stated that they would like to contact the Housing Authority to learn more about the guidelines for housing and renting in Siler City. It would have been helpful to have a member from the Housing Authority or Economic Development department present at the small group to answer some questions about housing that were brought up by the participants.

Small Group Report: Lack of transportation

Student team member Melissa Barrett facilitated the group focusing on the lack of transportation using Force Field Analysis. Two employees of Chatham Transit were present in this group as well as seven women involved in a group called *Las Mujeres Mejorando el Futuro* (Women for a Better Future), who have been working on increasing access to transportation for those in the Hispanic community. Through this discussion, the Chatham Transit employees were able to inform the women about their services and the women were able to express that they had been previously unaware of those services. By coming together, the group named several action steps including investigating the possibility of a representative from *Las Mujeres Mejorando el Futuro* joining the board of Chatham Transit, riding along to learn the shuttle's route, and discussing issues further with the employees of Chatham Transit. Another action step mentioned was the development of a questionnaire to distribute to employees at the chicken plants to assess their desire for a route servicing the plants. This action step was suggested when the Chatham Transit representatives clarified that if seven people are interested in a route, it is possible to plan new shuttle routes. One of the *Las Mujeres Mejorando el Futuro* members reported back to the large group in Spanish, which seemed to break down some of the language barriers faced by the town because it showed that language does not have to interfere with the exchange of ideas.

Small Group Report: Many Residents of Siler City Lack Access to Health Care

Student team member Catherine Aspden facilitated a small group focused on increasing affordable medical and preventative health care in Siler City. The group discussed the possibility of having a free clinic with volunteer staff in Siler City. Group members stressed that whatever action steps are taken towards this issue, the churches should be involved to increase awareness of new services. For example, the ministries of health could talk to people about

prevention services to increase awareness of these activities. Another action step that emerged was to increase the capacity of all providers in Siler City to provide affordable preventive and medical care and medications. During this small group's report back of action steps to the other groups, other attendees brought up issues of undocumented workers accessing care. The conversation that ensued between health department representatives and community members clarified the health department's policy regarding identification they require for accessing services and the available sources of identification for children born outside of the U.S.

Small Group Report: Diabetes Health Concerns

The team thought it was important to get community members and service providers involved with facilitation, so we asked Jean Vukoson of the Health Department to guide the small group on diabetes, as she is already doing some work around this issue. Vukoson is familiar with the Force Field technique and thought that this would be the best method to guide the discussion. This discussion honed in on the goal of integrating diabetes risk factor messages in Siler City. The group members decided that Lay Health Advisors would be instrumental in carrying out action steps that would have the most impact in increasing awareness of diabetes risk factors in the community. Another step they wanted to take was to begin a continuous media campaign about diet, exercise, and other risk factor for diabetes, and some group members signed up to begin working on the campaign. They also suggested putting coupons in the newspaper for McDonald's salads or other more nutritious foods. Finally, the group expressed the desire to meet with the local medical community to give them the skills and tools to increase their discussion with patients about diabetes, but also realized that this may be the hardest of their action steps.

Small Group Report: Controversial Role of Research in the Community

The team felt that this was one topic that needed to be presented by a member of the community, as it was about the increased presence of UNC student teams and other researchers in Siler City. Therefore, we asked a leader in the Latino community, Adolfo Aguilar, to facilitate a discussion on the amount of research in Siler City in partnership with student team member Bree Raburn. The discussion began with a quote from a community member about the feeling of over-assessment and then Aguilar asked questions about how the group members felt about the issue. Discussion then moved towards some possible action steps. One possible action step was to ask graduate students to follow up with their AOCD communities during the second year of their Master's program, instead of leaving after doing only an assessment. By doing this, the student groups would be able to give the community members something more substantial in return for their efforts. The group also discussed having a Siler City IRB or some central body to regulate the amount of research done in Siler City. To address the topic of community member and individual responsibilities for action steps, one group member volunteered to take the completed AOCD document to the commissioners to make sure that officials are aware of the results of the assessment. Community members may also try to look at specific topics from the document one at a time. For example, Voices for Action is interested in using the information from the document when they write grants for funding to address certain issues raised during the assessment.

Outcomes of the Forum

After the small group discussions, the participants reported their action steps back to the large group. People were able to have some of their questions answered and achieved a good

exchange of information, which we felt was one of the most positive outcomes of the forum.

Many community members became aware of some of the transportation options in Siler City and

prepared to continue taking steps to making transportation more accessible to everyone. The

forum provided the space for people to become better aware of the abundant resources within the

community, as well as a chance for service providers and community members to discuss what

they are already doing to address the issues of concern. We were pleased by the participation of

all groups of Siler City, and that members of the Hispanic community were present and active in

the discussion. The use of simultaneous translation was very beneficial to facilitate discussion

across languages. Concrete action steps were made at this forum, and participants volunteered to

ensure that certain steps were taken. We know that the tradition of activism will continue and

hope that some of the connections made and action steps generated at the forum will build upon

the work that is already being done in this community.

VI. Recommendations and Conclusions

Our recommendations for Siler City follow from the analysis of data and the action steps

identified at the community forum. Some issues lent themselves to specific suggestions for

certain groups in the community, while others were best encapsulated by broader

recommendations to be worked on by the community as a whole.

1) Researchers should be responsive to feelings of over-assessment and share their findings
with the community

Research and assessment teams entering Siler City should be cognizant of the potential

effects of their studies prior to their commencement. Community members perceive that many

projects done by agencies as well as student groups in Siler City have shown little or no effect

upon those participating. We heard many times that participants in these studies never receive

any information regarding the findings or conclusions of the projects. The reoccurrence of these

types of studies has caused community members and service providers in Siler City to feel over-

assessed and to view future assessments very cynically and to consider halting their participation.

In conducting qualitative assessments in Siler City, researchers need to make their intentions

clear to the participants upfront in the process, as well as specify the ways in which the data will

be used. More community involvement at the outset of such community-focused assessments

will make the endeavors more successful for both participants and researchers.

2) Siler City should provide more recreational opportunities for community members

The possibility of establishing a YMCA in Siler City has long been a topic of interest

among residents and service providers. The current group of individuals working to assess the

need for and feasibility of a YMCA in Siler City should make sure that people in the county

understand the costs associated with membership to such an association. In addition to looking

into organized sports opportunities, it is also important for Siler City to foster cultural and

academic-based programs for youth during the summer. A potential summer recreational

opportunity for youth could be a summer arts program sponsored by the Arts Incubator, Inc.

This mentoring program would allow youth in Siler City to develop their creative, artistic talents

and provide an alternative to sports endeavors.

3) Siler City town leaders should work to bring different groups together

The community ties between various groups in Siler City seem to have improved since

the previous AOCD in 2000, and there is strong support for the Dismantling Racism Initiative,

which we understand may be expanding to various agencies in addition to the health department.

It is important for town leaders to work to encourage individuals from different racial and

cultural backgrounds to interact and foster healthy relationships as neighbors. A specific event such the revival of a Fourth of July festival in Siler City could be a place where different races and cultures can come together as a larger group and socialize. A limiting factor to community ties which many businesses and services are dealing with is that of an existing language barrier. It is crucial that services within Chatham County be accessible to Spanish-speaking residents through adequate informative materials and resource personnel such as bilingual employees.

4) Siler City town leaders should make housing improvement a priority

It is imperative that the town leadership examine the problems in Siler City of deteriorating houses and rental properties as well as the lack of affordable housing. An active approach to a system regulating the standards of rental properties and rent control would be essential to the improvement of the quality of housing in Siler City. The town leaders should make it a point to see that housing is developed that suits the needs and financial requirements of the majority of its workers and residents. While this issue is further complicated by factors such as financing and zoning, it would be important to have an economic development committee look at the effects of affordable housing upon economic growth for Siler City.

5) Existing transportation services should be made more accessible, especially for the Latino population

The need for better transportation services in Chatham County influences many other factors such as health and recreation. In its endeavor to improve transportation in the area, Siler City should look at the successes and failures of other towns that have dealt with similar issues regarding expanding transportation services. In order to meet the changing needs of the growing population in the area, Chatham Transit must be willing to offer new routes and work with the Latina group that attended the forum. One recommendation for improving the transportation

services in Siler City is for Chatham Transit to modify its brochure so that it is more user-friendly and informative regarding cost and specific directions for accessing service. It is also crucial that the bilingual staff at Chatham Transit act in positions of initial contact for those with limited English language proficiency to answer their questions about service times, routes, and other information.

6) Siler City residents' access to healthcare should be improved

In order to increase Siler City residents' ability to access medical and preventive health care, many health care agencies and the health department should take into consideration the issues of cultural, language, financial, legal, and transportation barriers to care that were described by both service providers and community members in this assessment. Language was seen as becoming less of a barrier for Spanish-speaking residents in Siler City due to recent efforts of many clinics to increase their bilingual staff and providers. Similar efforts should continue, especially at Chatham Hospital, which was mentioned as lacking bilingual signage. Cultural barriers to health care are major issues for certain populations in Siler City, and existing organizations could effectively prevent serious health conditions by intensifying outreach to populations who rely on home remedies and avoid going to the doctor until they are sick.

7) A free clinic should build off existing health infrastructure and take community members' suggestions into consideration

Further services need to be made available for poor, uninsured, and undocumented residents of Siler City, as many noted that current services are overburdened. If the health department chooses to do this in the form of a free clinic, it should take into consideration the many recommendations made by community members and service providers that the clinic be centrally located, have hours of operation that accommodate a range of work schedules, avoid

"band-aid" solutions to medical problems, have bilingual services, and enforce some sort of eligibility criteria. Most of all, the health department should consider drawing from existing organizations such as Piedmont Health Services, the Health Department itself, and area churches in the establishment of a free clinic for volunteer, space, and decision-making resources.

In conclusion, our team is inspired by the great work being done in Siler City already to address many of the aforementioned issues. The part of the community we grew to know in Siler City demonstrated that it proactively identifies and mobilizes around its needs and appreciates its wealth of assets. We hope that this document will aid in the acquisition of resources to bolster work that is currently being done to address needs in Siler City, and serve as a reference for future Siler City residents to understand how the community saw its strengths and needs in 2004.

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Appendices

Community Member Interview Guide

Thank you for giving us the opportunity to talk with you. Before we begin, I would like to go over some information to make sure you understand what we are doing. Here is a copy for you to follow along as I review the information.
[READ FROM FACT SHEET]
Do you agree to participate in this session? [GET VERBAL AGREEMENT]
Do you agree to have this session tape recorded? [GET VERBAL AGREEMENT]
Okay, let's begin. [TURN ON TAPE RECORDER]

Let's start by first talking about you for a few minutes so we can understand your perspective on Siler City

1. You

- How long have you lived in Siler City?
- What area of Siler City do you live in?
- Are you currently working?   Probe: If so, where?
- What groups do you belong to?   What role do you play in each group?

2. Your Community

- When you think of your community in Siler City, who or where do you think of?
- What is your community happy about these days? What are some positive developments happening in your community?
- What are your community's top concerns these days?

Okay, now we'd like to jump right in to talking about issues that have come up in past assessments and conversations with community members and service providers.

3. Recreation

In an assessment conducted four years ago, community members highlighted the lack of opportunities for recreation in Siler City, especially for youth.

- Do you feel this is still an issue for Siler City?
- What have been the positive changes in recreational opportunities in Siler City in the past 4 years, if any? What groups or individuals have been involved with these changes?

- What is still lacking in Siler City with regard to recreational opportunities? Why haven't these changes been made?
- We've heard people express interest in bringing a YMCA to Siler City. Is this a feasible and practical goal for Siler City? What has stood in the way of bringing a YMCA to Siler City?

4. Community Ties

Now let's turn to issues around community ties. There's been a lot of media coverage and a lot of feedback coming out of assessments that there's tension between groups in Siler Ctiy.

- How do you think Siler City's doing today on fostering stronger ties between different groups?
- What positive changes have occurred in the past four years on this issue? What groups or individuals have been involved with these changes?
  - What hasn't changed in the past four years?
  - What changes do you still wish to see? Why haven't these changes happened?

5. Language Barriers

One barrier to community ties coming out in the last assessment was language barriers between groups.

- What positive changes have occurred in the past four years on this issue?
- What groups or individuals have been involved with these changes?
- What hasn't changed in the past four years?
  - What changes do you still wish to see? Why haven't these changes happened?

6. Access to Care & Prevention

Access to care came out of the Healthy Chatham assessment as an emerging health priority, especially with regard to health insurance coverage and affordability of health care.

- Who doesn't have access to care? Probe on groups.
- What don't they have access to? Mental health services? Prescription drugs? Specialist care? Dental care?
- Why don't they have access? Transportation? Insurance coverage? Affordability of care? Language barriers?
- What is needed for them to have access?
- How do doctors and medical staff in Siler City understand the needs of Siler City residents?

- What do you see as health issues in Siler City?
  Probe: Issues that you, your family, or people you know have had to deal with
- What health services are not being used?
  Probe: Why do you think that is?
- What health services are needed or wanted in Siler City?
- One of the possible solutions to access issues has been the creation of a free clinic or a free pharmacy in Siler City. Would you or people you know use a free clinic? Is this a good idea for Siler City?

7. New Issues and Community Capacity

- Are there any issues that have arisen in the past four years that we haven't touched on that are impacting or will impact quality of life in Siler City?
- What is SC's capacity to address these challenges?
- How do community members participate in creating changes in SC?
- Do you feel that you have a voice in what happens in SC?

8. Past Research and Future Directions

Lots of past research, community members have the feeling of being over-assessed without it leading to action.

- What do you think has stood in the way of positive changes coming out of past research processes?
- How do you think research institutions can work more effectively in the community in SC to implement changes to benefit SC?

Knowing that people are feeling over-assessed, we feel our responsibility lies in making this a beneficial process for people and groups in SC. In the past, the culmination of the process has been a community forum that brought service providers, community members and town officials together to dialog on the finding and to discuss action steps.

- What would you like to see as the culmination of this process? What type of event would be useful or enjoyable for you? What about for other community members? Would you be interested in helping create such an event/process? How could the momentum for action from such an event be carried forward afterwards?

7. Referrals

- Who else do you think we should talk with about Siler City?
- Would you be willing to ask permission for us to contact them?

8. Additional Information

- Is there anything else you would like to share with us about Siler City?
- Do you have any questions for us?

Thank you for sharing your perspectives on SC. Now we want to gather some

information about your background, to make sure that we talk to people from all kinds of

different groups and so that when we put all the responses together we can see if a

particular group of people brings up any specific issues.

9. Demographic Information

- Gender [silent code]
- What is your age (or age range)?
- How do you identify in terms of race or ethnicity?
- What country were you born in?
- What languages other than English do you speak, if any? Probe: Which language do you speak most often?
- What is the highest level of education you've completed?
- What is your professional training for your position?
- Would you consider yourself to have a high income, a middle income or a low income?

[Turn off tape recorder.]

10. Closing

- Thank you for your participation. Your opinions are really appreciated.
- So that we can send you an invitation to the Community Forum, we'd like you to fill out this mailing slip.
- You don't have to give us this information, but it will just be used to send you an invitation and will not be linked to the information gathered from this interview.

[GIVE MAILING SLIP TO PARTICIPANT.]

Community Member Fact Sheet

WHAT IS THE STUDY ABOUT?
You are invited to participate in this research study, which is a community assessment of the Siler City community. The purpose of the study is to better understand the lives of the residents of Siler City. You are being asked to participate because we want to gain your prospective on Siler City's strengths and weaknesses.
Our names are Bree Raburn, Nathaniel Pleasant, Melissa Barrett, Molly Grabow, and Catherine Aspden. We are a five-person team from the UNC School of Public Health that is conducting the study as part of our class requirement. If you have any questions, please contact Catherine Aspden, Graduate Student Contact, or Karen Moore, Faculty Advisor, whose contact information is included at the end of this form.

WHAT WILL I BE ASKED TO DO?
You will be asked a series of questions. There are no wrong answers, just different opinions. We are looking for different points of view, so just say whatever is on your mind. If you don't feel comfortable answering a question or don't have an opinion, just let us know. We are interested in your perspective as a service provider/community member in Siler City, so please keep that perspective in mind during the discussion.
We estimate that it will take 45 minutes to 1 hour of your time to complete the interview. Your participation in the interview will be one-time only.
During this discussion we are going to record what is said on paper. If you have no objections, we will also tape record the discussion to make sure we do not miss anything. Only our 5 group members will listen to the tape. Afterwards, the tape will be erased. You can ask for the recorder to be turned off at any time during the discussion. We ask that you talk in a voice at least as loud as mine.

WHAT ARE THE RISKS AND BENEFITS OF MY PARTICIPATION?
You are not likely to experience any risks by participating in this study. Although you may not experience any direct benefits, your participation may be beneficial to community improvement efforts. Your decision whether or not to participate in this study will not affect your relationship with UNC or any of its affiliations. Your decision whether or not to participate will not affect services provided to you.

ARE THERE ANY COSTS?
There will be no costs for participating except for your time.

WILL I BE PAID?
You will not be paid for your participation in this interview.
 SUBJECT'S RIGHTS AND CONFIDENTIALITY:

If you agree to participate in this interview you have the right to withdraw your consent or stop your participation at any time without penalty. You have the right to refuse to answer particular questions. You may ask that the recording be stopped at any time. To protect your privacy, your replies will remain anonymous. Your name will not be linked in any way with what you have said in this interview. The only people who have access to the data are the community assessment team and faculty advisor. Identifying information such as your age, ethnicity, sex, and number of years residing in or working in Siler City may be obtained throughout the interview. This information will only be used for summarizing data and will not be linked to any statement you have made. The audiotapes will be stored in a secure file cabinet at the UNC School of Public Health. The tapes will be erased after data has been summarized. If you wish to be contacted for participation in a community forum, we will collect your name and address on a form separate from your interview data.

SAMPLE QUESTIONS For your information, below are sample questions from the interview:
   • What do you like best about Siler City?
   • How has Siler City changed in the last five years?
   • What are some of the problems in Siler City?

If you wish to withdraw from the study or have questions, contact:

Catherine Aspden, Graduate Student Contact (919) 966-5542
Karen Moore, Faculty Advisor
UNC School of Public Health (919) 966-0057
307 Rosenau Hall, CB #7400
Chapel Hill, NC 27599-7400

This study has been reviewed and approved by the School of Public Health Institutional Review Board on Research Involving Human Subjects. If you have any questions about your rights as a study participant, or are dissatisfied at any time with any aspect of this study, you may contact-anonymously, if you wish-the School of Public Health Institutional Review Board, University of North Carolina at Chapel Hill, CB #7400, Chapel Hill, NC 27599-7400, or by phone (919)966-3012. You may call collect.

AGREEMENT STATEMENTS:
   1. Do you have any questions?
   2. Do you understand what I will ask you to do?
   3. Do you agree to participate?
   4. Do you agree to have this interview tape recorded?
This fact sheet is for you to keep in your records.

Service Provider Interview Guide

Thank you for giving us the opportunity to talk with you. Before we begin, I would like to go over some information to make sure you understand what we are doing. Here is a copy for you to follow along as I review the information.
[READ FROM FACT SHEET, ASK FOR CONSENT]

Okay, let's begin. [TURN ON TAPE RECORDER]

Let's start by first talking about you and your organization so we can understand your perspective on Siler City

1. Organizational Information

1. Do you live in Siler City? If so, what area do you live in?
Probe if applicable: How long have you lived there (in SC & in that area)?
What is the full/official name of your organization?
2. Just briefly, what types of services does your organization provide to residents of Siler City?
3. What is your job title?
4. What is your role in your organization?
5. How long have you been with this organization?
6. How long have you been in your current position?
7. Which groups of residents in Siler City do you aim to serve?
8. Which groups of residents do you find that end up serving?

Okay, now we'd like to jump right in to talking about issues that have come up in past assessments and conversations with community members and service providers.

2. Recreation

In an assessment conducted four years ago, community members highlighted the lack of opportunities for recreation in Siler City, especially for youth.

1. Do you feel this is still an issue for Siler City?
2. What have been the positive changes in recreational opportunities in Siler City in the past four years, if any?
        What groups or individuals have been involved with these changes?
3. What is still lacking in Siler City with regard to recreational opportunities?
        Why haven't these changes been made?

4. We've heard people express interest in bringing a YMCA to Siler City. Is this a feasible and practical goal for Siler City? What has stood in the way of bringing a YMCA to Siler City?

3. Community Ties

Now let's turn to issues around community ties. There's been a lot of media coverage and a lot of feedback coming out of assessments that there's tension between groups in Siler City.

1. How do you think Siler City's doing today on fostering stronger ties between different groups?
2. What positive changes have occurred in the past four years on this issue?
   What groups or individuals have been involved with these positive changes?
3. What hasn't changed in the past four years?
4. What changes do you still wish to see?
   Why haven't these changes happened?

4. Language Barriers

One barrier to community ties coming out the last assessment is language barriers between groups.

1. What positive changes have occurred in the past four years on this issue?
2. What groups or individuals have been involved with these positive changes?
3. What hasn't changed in the past four years?
4. What changes do you still wish to see?
   Why haven't these changes happened?

5. Access to Care & Prevention

Access to care came out of the Healthy Chatham assessment as an emerging health priority, especially with regard to health insurance coverage and affordability of health care.

5. Who doesn't have access to care? Probe on groups
6. What they don't have access to?
   Mental health services? Prescription drugs? Specialist care? Dental care?
7. Why don't they have access?
   Transportation? Insurance coverage? Affordability of care? Are language barriers an issue?
8. What is needed for them to have access? What could facilitate this? What would be barriers to increasing access?

One of the possible solutions to access issues has been the creation of a free clinic or a free pharmacy in SC? What problems might arise from this approach? How would this approach be beneficial? How would a free clinic be sustainable?

6. New Issues & Community Capacity

1. Are there any issues that have arisen in the past four years that we haven't touched on that are impacting or will impact quality of life in Siler City?
2. What is SC's capacity to address these challenges?
3. How do community members participate in creating change in SC?
4. How does your organization allow for community participation in decision-making? Informal/formal mechanisms?
5. How do you feel that Siler City is doing in terms of coordination of efforts between groups?

7. Past Research & Future Directions

Lots of past research, community members have the feeling of being over-assessed without it leading to action.

1. What do you think has stood in the way of positive changes coming out of past research processes?
2. How do you think research institutions can work more effectively in the community in SC to implement changes to benefit Siler City?

Knowing that people are feeling over-assessed, we feel our responsibility to making this a beneficial process for people and groups in SC. In the past, the culmination of the process has been a community forum that brought service providers, community members and town officials together to dialog on the findings and to discuss action steps.

3. What would like to see as the culmination of this process? What type of event would be useful to you/your organization? What about for community members? Would you be interested in helping create such an event/process? How would the momentum for action from such an event be carried forward afterwards? (New groups? Coalition of existing groups? Who will do the work?)

7. Referrals

• Who else do you think we should talk with about Siler City?
• Would you be willing to ask permission for us to contact them?

[GIVE PARTICIPANT REFERRAL FORM AND EXPLAIN.]

• What specific organizations or groups do you think we should talk to?

8. Additional information

• Is there anything else you would like to share with us about Siler City?
• Does your agency have any literature such as annual reports or funding applications that we can either look at or have copies of?
• Do you have any questions for us?

Thank you for sharing your perspectives on Siler City. Now we want to gather some information about your background, to make sure that we talk to people from all kinds of different groups and so that when we put all the responses together we can see if a particular group of people brings up any specific issues.

9. Demographic Information

• GENDER [SILENT CODE]
• What is your age (or age range)?
• How do you identify in terms of race or ethnicity?
• What country were you born in?
• What languages other than English do you speak, if any?
        Probe: Which language do you speak most often?
    • What is the highest level of education you've completed?
• What is your professional training for your position?
• Would you consider yourself to have a high income, a middle income or a low income?
 [TURN OFF TAPE RECORDER.]

10. Closing

• Thank you for your participation. Your opinions are really appreciated.
• So that we can send you an invitation to the Community Forum, we'd like you to fill out this mailing slip.
• You don't have to give us this information, but it will just be used to send you an invitation and will not be linked to the information gathered from this interview.

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Our names are Bree Raburn, Nathaniel Pleasant, Melissa Barrett, Molly Grabow, and Catherine Aspden. We are both part of a 5 person team from the UNC School of Public Health that is conducting the study as part of our class requirement. If you have any questions, please contact Catherine Aspden, Graduate Student Contact, or Karen Moore, Faculty Advisor, whose contact information is included at the end of this form.

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WHAT ARE THE RISKS AND BENEFITS OF MY PARTICIPATION?
You are not likely to experience any risks by participating in this study. Possible risks could include negative impacts on employment, political career, and relationships with other community members. If negative comments about the community service providers or certain groups become public, we will attempt to minimize these risks by protecting the confidentiality of your statements, specifically by not revealing your name or identifying characteristics. Although you may not experience any direct benefits, your participation may be beneficial to community improvement efforts. Your decision whether or not to participate in this study will not affect your relationship with UNC or any of its affiliations. Your decision whether or not to participate will not affect your job.

ARE THERE ANY COSTS?
There will be no costs for participating except for your time.

WILL I BE PAID?
You will not be paid for your participation in this interview.

SUBJECT'S RIGHTS AND CONFIDENTIALITY:
If you agree to participate in this interview you have the right to withdraw your consent or stop your participation at any time without penalty. You have the right to refuse to answer particular questions. You may ask that the recording be stopped at any time.
To protect your privacy, your replies will remain anonymous. Your name will not be linked in any way with what you have said in this interview. The only people who have access to the data are the community assessment team and faculty advisor.
Identifying information such as your age, ethnicity, sex, and number of years residing in or working in Siler City may be obtained throughout the interview. This information will only be used for summarizing data and will not be linked to any statement you have made.
The audiotapes will be stored in a secure file cabinet at the UNC School of Public Health. The tapes will be erased after data has been summarized.
Every effort will be taken to protect the identity of the participants in the study. However, there is no guarantee that the information cannot be obtained by legal process or court order. You will not be identified in any report or publication of this study or its results.
If you wish to be contacted for participation in a community forum, we will collect your name and address on a form separate from your interview data.

SAMPLE QUESTIONS For your information, below are sample questions from the interview:
   • What are some of the best things about Siler City?
   • What types of services does your organization provide to residents of Siler City?
   • What do you think are some of the greatest needs of people in Siler City?

If you wish to withdraw from the study or have questions, contact:

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Karen Moore, Faculty Advisor
UNC School of Public Health (919) 966-0057
307 Rosenau Hall, CB #7400
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AGREEMENT STATEMENTS:
   1. Do you have any questions?

2. Do you understand what I will ask you to do?
3. Do you agree to participate?
4. Do you agree to have this interview tape recorded?

This fact sheet is for you to keep in your records.

Appendix II. Agencies & Organizations Working in Siler City

AGENCY/ ORGANIZATION	Description of Purpose and Programs
Central Carolina Community College	To advance the lifelong educational development of adults in the community.
	English as a Second Language Classes for adults whose native language is not English. No fees charged.
Chatham Communities In Action	Established in 1992 and originally funded by the W.K. Kellogg Foundation; A partnership consisting of representatives of the local health department, community-based organizations, neighborhood groups, churches, and the University of North Carolina School of Public Health dedicated to improving the health and well-being of Chatham County residents.
Chatham County Affordable Housing Coalition / Empowerment, Inc.	Helps families find affordable housing and provides homebuyer education and financial management counseling.
Chatham County Council on Aging	Provides a variety of services to older adults; services include: information and assistance, in-home aide service, home delivered meals, medical transportation, and support groups. Prevention and wellness services include: fitness and exercise, senior games and health screenings. Lunch time meals are served at the senior centers (transportation provided). Travelers club trips are available as well as educational opportunities from the Central Carolina Community College. Special events occur throughout the year (chocolate cake bake off, Taste of Chatham, Celebrate Senior Citizens, etc.).
Chatham County Department of Parks and Recreation	To expand and enhance existing recreation opportunities provided to the residents of Chatham County.
Chatham County Health Department	To create a healthy environment that includes the physical, spiritual, emotional, and mental well-being of the community.
	General Clinic Provides free child and adult immunizations, HIV, TB, and pregnancy testing, blood pressure and blood pressure checks, flu shots, and other routine services. Sliding scale fee; Medicaid accepted

Children's Resource Van Provides services for children ages 0-5 for immunizations, physicals, screenings, and parent education. Operated by Chatham County Health Dept. Fees charged: sliding scale based on income; medicare, Medicaid, and most private insurance accepted.

Community Health Promotion and Advocacy Provides educational programs to community groups and organizations. The Diabetes Self-Monitoring and Screening Center provides instruction and support for newly diagnosed diabetics for monitoring and controlling of blood sugar. Trained Community Diabetes Advocates are available to provide support to diabetics and their family members by telephone or home visits. The LIGHT Way Program provides programs and workshops in health education, nutrition, and exercise. Chatham County Health Dept. No fees charged.

TeenWorks Teen Center An after-school teen center for teens between the ages of 11 and 18. Provides many educational, recreational, and informational programs and workshops, with a special focus on life skills education and adolescent pregnancy prevention.

Family Planning / Maternity Clinic Provides complete physical examinations, birth control, counseling, screening and treatment for STDs; comprehensive services include counseling, referrals, and follow-up. Fees charged: Sliding scale, Medicaid accepted. |
Chatham Social Health Council	Founded in 1991, Chatham Social Health Council is a community based nonprofit organization dedicated to providing HIV and sexually transmitted disease (STD) prevention education and advocacy. The council uses locations such as churches, barbers and beautician shops, Latino groceries (tiendas), ESL classes, and factories as venues to provide skills-building educational sessions on HIV/AIDS and STD infection epidemiology and prevention methods to promote the adoption of safer-sex practices. The Council also provides HIV/AIDS and STD educational and sensitivity training to local service providers, businesses, and community groups.
Chatham Trades	A community rehabilitation program providing employment and training services to adults with disabilities. Fees charged: sliding scale for individuals transported to and from program
Chatham Transit	Helps residents with transportation needs and provides transportation services to numerous human service agencies. Medical transportation can also be provided to cities such as Chapel Hill, Raleigh, Winston-Salem, and Greenville.
	Offers childcare referrals, childcare subsidy to eligible families, information about starting a childcare program, and

Child Care Networks	technical assistance to improve childcare quality. In 1994, established a Latino Program which offers the same childcare resource and referral services to Chatham County's Spanish-speaking population as are available to the English-speaking population. Prior to the establishment of the Latino Program, Spanish-speaking parents in Chatham County were often unable to have full access to licensed childcare programs due to language differences. The Latino Program employs two full-time bilingual, bicultural staff members.
Coalition for Family Peace	The goals of the Coalition for Family Peace are to offer education and awareness to the general public about domestic violence, offer assistance for victims and their family members and provide outreach to the community to break the cycle. Client services include: information and referral, crisis counseling, court advocacy, victim's support groups, children's support groups, case management, and emotional support. Other services include: community education and awareness, professional training and consultation, culturally specific outreach to the Latino and African-American communities. No fees for services; minimal fees for training.
Early Intervention and Family Services of Chatham County	**Family Support Network** Provides support, education, and resource referral to families of children with special needs. A monthly support group is available. Early Intervention and Family Services of Chatham County. No fees charged. **Respite** Provides home-based companion sitter services to any person with developmental disabilities. Fees charged: based on income.
Healthy Chatham	Founded in 1997; funded by the KB Reynolds Foundation and Chatham County; Focuses on community involvement in addressing broadly defined health issues that were identified in a yearlong community assessment; Hopes to address key health issues in the county through community-based approaches and collaboration with local organizations, community members, and local government. Healthy Chatham has established workgroups to address various priorities of focus: physical inactivity, unintended injuries, obesity, family/domestic violence/child abuse, tobacco and indoor air quality, affordable and available child care, alcohol and other drug use, infant mortality, and housing.
Hispanic Liaison of Chatham County/ El Vinculo Hispano	Provides a variety of services to the Latino population including: general assistance and advocacy with housing, financial/consumer issues, driver's licenses and IDs; translating and interpreting services; referrals and information about services available in the community; emergency assistance; educational life skills workshops. Fees depend on services and ability to pay; most services free.
Joint Orange Chatham Community Action Agency Inc. (JOCCA)	A community-based organization which was incorporated in 1965 on a foundation of citizen participation dedicated to serving low-income residents of Orange and Chatham Counties. Helps people move from welfare to gainful employment and economic self-sufficiency. JOCCA also provides intervention services to youth to help reduce school suspensions and reduce court referrals.
United Way of Chatham County	Seeks to increase the financial and human resources available for providing human care services to residents of Chatham County. Provides funding and other forms of assistance to local human service programs and special projects; Community served: 31% Siler City 43% Pittsboro; Currently funds 21 local agencies serving over 17,000 county residents.
Voices for Action	A training program designed to enhance leadership skills of community members so that they may provide leadership and advocacy within their community to create positive change. The training provides skill enhancement in four core leadership areas: health promotion, advocacy, organizing, and social justice.

Table 1: Health and Community Service Organizations in Siler City

	Community Member views	**Service Provider views**
Which people cannot access medical and preventive care in Siler City	**Poor:** "Everyone who's poor doesn't have care. All races." "Just maybe you're eligible for Health Check, but if you and your spouse make just one dime over then you're not eligible anymore." **Uninsured:** "If you don't have insurance, no one wants to see you." **Undocumented residents**: "You can't go to the doctor if you have insurance under another name, especially for a woman who's having a baby. She can't go to the hospital with another name and have a baby with another name. So a lot of times to not get in trouble they don't even buy insurance."	**Poor**: "The lowest on the scale… can get help. That doesn't necessarily mean it's adequate or sufficient but they have ways, because they can be funded through Medicaid or SSI or whatever. So we're talking about the working communities that may not have, particularly for their older population, transportation, extra kind of support services." **Uninsured:** "He could have been sent to outpatient and stayed at home and gotten services there for much cheaper, but no one would take him because he had no insurance. So he was in the hospital for 3 weeks, and ended up with a $47,000 bill." **Undocumented residents**: " Our biggest problem is for Latinos who weren't born here. A huge number of our residents."
What serves as a barrier to accessing quality medical	**Doctor-patient communication:** "The older population tends not to ask questions, about how much of what to take when for how long… A lot of times people don't understand what they say, because they use this terminology that we don't understand…. If you don't	**Doctor-patient communication:** "Doctors are given… these samples, and they will help you out. And this woman said, I never knew that! That's the kind of thing that they're afraid to ask. They're also very poor reporters about their physical health."

and preventive care in Siler City	ask they think you don't care or that you whatever, you do this and that be it."	
	Undocumented status: "Some people are afraid because they don't have the right papers."	**Undocumented status**: "Another barrier is the Hispanics using 2 names because they're, the majority, aren't legal…. We don't care about that,… but the problem we've been seeing over the last several years is people using the same name and SS#, and we have a chart with that name and there are 2 people using that name that come to our clinic." "With prenatal care they have a baby who has the real family name and not the fake name that's listed on the work papers. So then it's the system's fault because they won't accept this new name."
	Residents unaware of services: "If it serves more than one population, why isn't that known?" "I think for kids, they don't have Medicaid, and they don't know if they can have that kind of help sometimes…. Most of the people don't know what they can do or how they can find help."	**Residents unaware of services**: "Besides the uninsured, there are also people who can't figure out how to access the system."
	Transportation: "You're forced to have transportation—there is no way to get around unless you have transportation." "I don't think [Chatham Transit] turns anyone down for service but they just gotta know what to do and how to do it."	**Transportation:** "You have to schedule [Chatham Transit]. So if you can't schedule your sickness, you're out of luck if you don't have a car." "I think there are people who fall in the cracks. People who don't qualify for Medicare and Medicaid… People who work every day and can't afford insurance."
	Distrust of medical establishment: "I think they put just enough medicine in there to make you feel better but not enough to cure you."	**Distrust of medical establishment**: "Some of them

"There are a lot of people taking 10, 15 medicines and they don't need all of that…. When you're hurt, you call the doctor, and instead of taking away the ones you already have, they give you more."

use antiquated methods to treat diabetes."

"The doctors know they won't get paid full price… So you know, you got a Medicaid patient and yeah, we checked your blood pressure and you're doing fine."

Financial concerns for clients:
"It's a sad state that we're in, because you know, you really want to go to the doctor… make sure you is healthy, but you know that you don't have insurance, so what do you do?"
"People gotta choose do I eat or do I get my medicine."
"If you have cars and houses and resources and all of that, it's hard for you to get that kind of insurance to pay for medications."

Financial concerns for clients:
"People just do without their medication if they have to…. A month's medication of most anti-anxieties is over $100."

Language and culture barriers:
"There are services but people don't look for help because of language barriers…. They should be able to understand Spanish and have materials in Spanish."
"Some go to the [counselors] who speak only English but they don't always have interpreters, or the [interpreter] is from Siler City so the person's not really going to talk."

Language and culture barriers:
"I have to look at their culture and how they would perceive my treatment plan…. If they don't understand you or understand why, when they're not used to being treated for a cold."
"Many of the Hispanic population I am trying to reach is not literate in their own language, so a printed brochure is possibly wasted."
"We have a health system in which immigrants don't go to the doctor unless they're sick. It's another exposure to them and it's costly."
"We have a lot of immigrants folks who are young… and their health needs aren't challenging at this point so they don't buy insurance because they don't think they need it."

Discrimination: "When someone

"There's a real problem with

	says I have insurance, their whole attitude changes. And then they're nice to you."	health providers not being bilingual."
		Discrimination: "I think [Chatham Hospital… has] alienated a lot of Latinos; a lot of them prefer to go to UNC for their care. And I think that UNC has alienated a lot of their patients. So I think we keep treating unsatisfied patients back and forth, but it floors me that there are no bilingual signs at Chatham Hospital."
	Services are full: "We're in a population where the dentists already have their clients already have their clients set up. They don't take new ones and they don't take Medicaid. So you know, they're already filled to the brim." "We can't go to the community health center, it's packed."	**Financial concerns for health care agencies**: "We do have more 0%ers who don't pay, and that is a strain on our budget." "Many of them cannot pay, even if they are working at a company that offers them a co-pay for health insurance, they can't afford it." "If they do have the money to go to the clinic, they don't have the money to pay for the prescriptions."
What services are inaccessible in Siler City	**Mental health services:** "Every time [women] ask, they say that a therapist is going to be too expensive." "We have only 2 or 3 counselors who speak Spanish but the population is real big and we need to have more." **Dental care:** "There's a lot of people around here… who need to get something done with their teeth."	**Mental health services:** "If we had discovered that she was bipolar before she got into drugs this could have helped." "There are almost no mental health services around for people here. And we have only one psychiatrist who volunteers for us a few months a year, but no one full time."
What do	**Home remedies**: "A lot of older people don't know what to do, or	**Home remedies:** "Oh, I rubbed in this or that and I'll get better….

residents do to cope with inability to access care	just use home remedies."	God gave me this and I don't want to have it cut and I want to live the earth like this." "They have lots of lay health people who treat by herbs, and medicine in Mexico is very cheap and you can get it OTC."
	Wait until it gets bad: "There was a lot of folks not going to the doctor. You know if you broke something or was near dead you know you went…. So you grow up on this, and I have a problem today going to the doctor. I have insurance and everything, but I just don't go." **Go to Chapel Hill:** "If I was to get sick I would either have to bear through it or end up going to Chapel Hill for care…. I'd rather go to Chapel Hill where it's state funded so they have things the Chatham Hospital doesn't have. Even an intern is better than no doctor at all."	**Wait until it gets bad:** "People who work every day and can't afford insurance… If they get sick, they don't go to the doctor unless it gets really bad and then they're in the hospital." "People go in and out of the ER at UNC, where they basically get their care."
Ideas about a free clinic in Siler City	**Useful characteristics:** "If you have a free clinic, you've got to bring the greatest good. Sometimes just a dental appointment can make a lot of difference." "It has to be accessible. I'm not going to drive 10, 12 miles even if it's free." "What good would a free clinic be to address insurance if you can't afford the medication?" "We have some people who are retired and who would maybe like to take people to things like that. We have people who are dedicated to things like that. They take them to the doctor if it's needed." "I would like to see a clinic at day and night. Many people work and	**Useful characteristics:** "Helping folks with their drug costs." "They have to be below a certain wage rate or you'd have the entire population of Siler City coming through your doors…. Can they get timely and appropriate care in a timely fashion and not have a 6 hour delay every time they come there." "A free clinic would allow service providers to get to know clients and problems in the community and grow awareness of what's going on, which I think can actually be very helpful." "Transportation is a major problem for a free clinic."

they can't get there during the daytime." **Free clinic is a good idea:** "All of that would help. It would be a start." "I think a clinic would be something we'd be very happy to have." "It'd cut down on so many children being born and everything, because everything would be included."	**Might replicate existing services:** "People think that the health department is all free anyway, you go there and get free care. **Financial Sustainability**: "If that would be possible, then everybody could come and get free care, I mean you'd have a booming business but boy, you'd be in the hole real quick." **Personnel Sustainability**: "One of the challenges would be getting people to staff it…. Everyone wants to help. But sometimes it's the same people who want to help, and they can get burned out." **Partnership:** "If they had the clinic there [at Piedmont Health Services], it would make it a whole lot more attractive. I think that if both agencies [Piedmont and the Health Department] get on the same page and they figure out a way to do it jointly, I think it could be a great asset for the community." "I've always envisioned that you could do something through the churches." **Concern of being 'band-aid'**: "The doctor who wants to know more than just that your breathing's not good. Wants to know more of your history and what's going on. I think with a free clinic like that, the chances are you're going to get people to come back."

		"The free clinic is like a band-aid. Maybe we need to look at what we have in place and increase the resources."
What is going well in Siler City	**Bilingual staff at clinics**: "Usually people just go to Siler City [for care]. They have more interpreters." "When I came here there were no bilingual people at the health centers or at the hospital so we couldn't communicate with them. But 8 years ago I started seeing a lot of change and a lot of people being helped." **Specific services**: "We have Siler City Community Health Center. It's good for the community, they can get medicine for a good price." "Hispanic Liaison…" "I thought this was a really good program—a minister of health program."	**Bilingual staff at clinics**: "We have foreign interpreters in our agency that we have hired over the years which is a great benefit for us." **Inoculations:** "I think when it comes to our children, inoculations and things, I think they're doing real well." **Dismantling racism:** "We've had cultural diversity workshops…. Our department is very proactive in that." Bilingual providers: "I credit a lot of our health care providers with getting interpreters." **Piedmont Health Services:** "Piedmont Health Services. This program was designed with the conditions of Siler City in mind—large, changing immigrant population with little access to a doctor. This is a great thing to happen to Siler City."

Appendix IV. History of Community Research

Group conducting assessment	Prioritizations resulting from findings
Chatham County Health Improvement Project (1997) on Siler City	substance abuse, sexually transmitted diseases, housing, rabies, inadequate social and recreational opportunities, and health education
UNC School of Public Health (1998) on Lincoln Heights	Growth of Latino population, community ties, lack of youth recreation, commitment to community, community involvement, housing, drug abuse
UNC School of Public Health (1999) on Jordan Grove	Affordable housing; recreation for youth and adults, housing conditions, affordability of medications, home health care, water, sewage, and trash collection Reduce racial tension between groups
UNC School of Public Health (1999) on Stockyard Road	Plumbing, improved housing, crime, safety, lack of economic opportunities, transportation
UNC School of Public Health (2000)- Maternal and Child Health	Spanish translation services, underutilization of preventative health care services, lack of youth recreation, substance abuse, school-based health clinics, gang activity, sex education, child care
UNC School of Public Health (2000) HBHE	Area growth, language barriers, cultural changes, lack of youth recreation, sex education, gang activity, substance abuse, school-based health clinic
Chatham County Board of Health with Healthy Chatham	physical inactivity, contaminated drinking water, unintentional injuries, family violence, quality child care, substance abuse, safety, maternal and child education, obesity, indoor air pollution, drug abuse, unsafe sex/ unintended pregnancy

Appendix V: Flier Advertising the Siler City Community Forum

(Available in hard copy only)

Siler City Community Assessment Summary Results

Methods: *From 2003-2004, a UNC School of Public Health Student Team interviewed and spoke with residents and people who provide services to residents in Siler City. Here is a brief summary of findings from talking to community members and service providers.*

Recreation

Both Community members and service providers noted limited recreation opportunities in Siler City, especially for youth. Many also noted positive changes with this issue in the past four years, including an increase in the number of soccer leagues, Parks and Recreation department events, and church initiatives to promote physical activity. Both community members and service providers believe that the town could still benefit from having more recreation opportunities. Several service providers mentioned the potential building of a YMCA to improve recreation options.

"I would like to see us progress more from where we are because we are losing a lot of money. I eat out of town, shop out of town."

- Community Member

"Kids and adults have nowhere, at least nowhere affordable and not really anywhere to go that isn't affordable, to go get exercise."

-Service Provider

"I think it would help our community be a little closer together if there was a common place that all groups could go to that would be non-threatening," (Regarding a YMCA)

-Community Member

Housing

Both service providers and community members in Siler City cited a lack of affordable housing and deteriorating housing conditions as major concerns in the community. Numerous individuals maintained that little is being done to provide adequate housing suitable to the needs of Siler City residents. Several of those interviewed felt that the homes that are being built in Siler City don't match the current needs of the majority of residents.

"I could take some old pictures of these houses 30 years ago, and nothing has changed, although they sure looked better 30 years ago."

-Community Member

"So the issue becomes who are you going to put in there? We have a lot of houses going up, houses that we were told we weren't qualified for, and so now you're building more houses that cost even more money than the ones we were trying to get way back when, so who's going to be able to afford them?"

-Community Member

Crime

Many individuals commented on the problems of drug use and prostitution within the area, mentioning that crime in the area has increased.

"I guess the biggest change in the last twenty years is the drugs that have invaded this town. This is a small town, but it is one of the most saturated towns you'll see."

<div align="right">-Service Provider</div>

"We're seeing a lot of drugs in all the populations, prostitution, which you think, well Siler City doesn't have that, but we do. We're seeing an increase in our HIV population, I think because of the drugs and prostitution."

<div align="right">-Community Member</div>

Jobs

Both residents and service providers expressed concern about the lack of well-paying jobs within Siler City and the impact that unemployment has upon other aspects of individual and community well-being. Several community members stated that many of those living in Siler City work in locations outside Chatham County. Many people were also concerned about the impact that this limited job market has upon the youth of Siler City. Both community members and service providers felt that young people growing up in Siler City saw little future in staying and working in Chatham County.

"Good paying jobs are key to the health of any community. If people can't work nearby, have a good job in a reasonable distance to their home, there comes a point where this is no longer a good place to live and the quality of life starts to deteriorate. So I think the key for the survival of Siler City, as it is for any community, is that you've got to have good paying jobs for the people who are

living here and the people who are moving here. And if you have that, it takes care of an awful lot of woes."

<div align="right">-Service Provider</div>

"I think the young people, you know when they go to college, they're probably trying to get away from their family but also there are not a lot of job opportunities for college grads to come back to."

<div align="right">-Community Member</div>

Lack of Transportation

Both service providers and community members felt that there was a lack of public transportation in Siler City, and that this lack of transportation serves as a barrier to accessing recreation, health care, and employment opportunities, as well as performing daily life activities. A majority of service providers felt that this lack of public transportation disproportionately affected women, elderly, and children.

"Even if something existed, how would you get there, unless you have a car or your parents have enough money for you to have a car or you're old enough."

<div align="right">-Service Provider</div>

"If you don't have transportation, even getting a mile is a problem."

<div align="right">-Community Member</div>

Access to Care

Community members and service providers listed several reasons that people are unable to access medical care in Siler City. Many said that people can't afford insurance, and that even with insurance deductibles and co-payments are too expensive. Also, transportation was listed as a major barrier to seeking medical services for residents in Siler City. For the Latino population in particular, language differences and lack of documentation were brought up as major concerns. And finally, many community members and service providers described a lack of trust and communication between doctors and patients that keeps residents from getting the care they need. Piedmont Health Services and the hiring of bilingual staff at the health department and other clinics were listed as two positive changes in this area.

"I think everyone who's poor doesn't have care. All races. If you are poor, you don't have health insurance, you don't have care. If you don't have insurance, no one wants to see you…. When someone says I have insurance, their whole attitude changes. And then they're nice to you."

-Community Member

"There are two major issues in accessing [health] care as far as the Latino community is involved. One is that we do not go to the doctor unless we're sick… Second of all,… it's just too much of a hassle to go and have preventive care when you have to work 12 hours a day and you have kids to take care of and a home to take care of."

- Service Provider

Health Concerns

Community members and service providers alike mentioned programs brought into the community to address health concerns such as asthma and diabetes. However, the two groups felt that health concerns still exist in Siler City. Both service providers and community members felt that mental health and dental services were lacking in Siler City and wished that those services would be brought into the city. Both groups also mentioned that diabetes and HIV are becoming major health concerns.

"There is a silent majority out there that is mentally ill. And nobody including the state wants to address this issue as an issue...we are in a sense afraid of the mentally ill, and kind of sweeping under the rug what impact that is going to have in the community."

-Service Provider

"All these conditions, diabetes, high blood pressure, depression… you can't afford the medication so you can't do much about it."

-Community Member

Community Ties

Community members spoke of some positive changes in the relationships among African-Americans, Latinos and Whites in Siler City. Many people mentioned that churches and agencies are trying to bring the groups together, and African-American and Latino community members said that their communities have become more accepting of one another. The groups still live very separately, however, and African-Americans and Latinos both reported experiencing racism

and discrimination. Service providers mentioned that there are still tensions and divisions, but that people are trying to build bridges between the various groups.

"We've all been there. …The language barrier is the only thing that keeps us from connecting with the Hispanic population.…If the language barrier is ever broken, we'll all be one people."

– African-American Community Member

"Things are separate. We go to different churches, do different recreation, everything's different."

–African-American Community Member

"You can see it in the stores. When I speak to somebody and they hear my accent they don't want to speak to me."

–Latino Community Member

"I think that people have done a super job…. I think there's a lot of coalition building, and an emphasis on being inclusive."

– White Service Provider

Research in the Community

Both community members and service providers mentioned that several assessments have been conducted in and around Siler City in the past few years, and mentioned that little change had occurred following the assessments. Both service providers and community members suggested that no change resulted from assessments because the assessors have no money with which to create change.

"Here's what happens- year after year, groups come in and assess, do interviews, and get information about us- and then leave. But what do they leave for us? What do they do for us? Nothing."

-Community Member

"Siler City strikes me as a very competent community in a lot of ways in terms of problem solving. I mean there's a lot of work going on, there's a lot of people who care, who know their neighbors and who are actively working to make change in their own communities."

-Service Provider

The Final Document

A final report of all findings will be available at http://www.hsl.unc.edu/phpapers/phpapers.cfm in June 2004.

Questions/ comments? Please contact the Community Diagnosis Team at 919-966-6758 ext. 5

Forum Evaluation Form

Please tell us what you liked or disliked about the forum

Is there anything we should have done differently?

Las Resultas del Asesoramiento de la Comunidad de Siler City

Métodos: En este año pasado, unos estudiantes de UNC (en La Escuela de Salud Publico) tuvieron entrevistas con personas quienes viven en Siler City, y también con personas quienes dan servicios para personas quienes viven en Siler City. Aquí es un sumario de los resueltos.

Recreación

Los miembros de la comunidad y las personas que dan servicios decían que recreación es un problema para muchas personas, especialmente para los jóvenes. Unas hablan sobre unos cambios positivos, incluso ligas de fútbol, carreras de departamento de Parks and Recreation, y unas carreras con las iglesias. Por final, unas personas que dan servicios hablan sobre el YMCA.

"Quiero ver progreso aquí. En esta ciudad, estamos perdiendo mucho dinero. Yo no como en la ciudad, y también no compra en la ciudad."

-Miembro de la Comunidad

"Los jóvenes y los adultos, no tienen un lugar adonde puede tener los ejercicios. Aunque lo tendrás mucho dinero, no tiene un lugar para tener los ejercicios."

- Persona que da servicios

"Pienso que ayudara la comunidad si había un lugar adonde todos los grupos pueden ir sin las amenazas." (Sobre un YMCA)

-Miembro de la Comunidad

Las Casas

Los miembros de la comunidad y también las personas de dan servicios decían que las casas cuestan tan muchas, y también que son malos. Muchas personas dicen que nada esta hecho para mejorar las condiciones en las casas. O, dicen que casas nuevas están construidos, pero cuestan tan muchas.

"Con fotógrafos, puedo ver que en 1974 y ahora, las casas aquí son las mismas, pero aparecen muy mejor antes."

-Miembro de la Comunidad

"¿Así, quien va a vivir en estés casas nuevas? ¿Muchas casas están construidas, casas que hemos dicho que no puede comprar porque no tenemos dinero, y ahora tu estas construyendo casas que cuestan mas dinero que antes, así quien va a comprarlo?"

-Miembro de la Comunidad

Los Crimines

Muchas personas hablan sobre los problemas del uso de drogas y la prostitución en Siler City.

"Pienso que el cambio mas grande por el veinte anos pasado es el uso de las drogas- este es un ciudad pequeño, pero hay muchas drogas aquí"

-Persona que da servicios

"Hemos visto muchas drogas en todas las poblaciones, prostitución - pues, piensas que Siler City no tiene estés problemas, pero si, lo tiene. También hay mas personas con VIH, porque del uso de drogas y prostitución."

<div align="center">-Miembro de la Comunidad</div>

Los Trabajos

Los miembros de la comunidad y también las personas que dan servicios tuvieron asuntos que no hay muchos trabajos en Siler City que pagan mucho dinero. Unos miembros de la comunidad han dicho que algunas personas quienes viven en Siler City trabajan en otras ciudades, adonde el pago es mejor. Los miembros de la comunidad creyeron que los jóvenes no van a volver a Siler City después de salir la escuela secundaria.

"Los buen trabajos son muy importantes para la salud de cualquiera comunidad. Si la gente no puede trabajar acerca de sus casas, sus vidas van a empeorar. Así yo pienso que es muy importante en Siler City tener buen trabajos para los que viven aquí y también para los que quieren trasladarse aquí."

<div align="center">- Persona que da servicios</div>

"Pienso que los jóvenes, cuando van al colegio, ellos quieren salir sus familias pero también no hay muchos trabajos aquí."

<div align="center">- Miembro de la Comunidad</div>

La Falta de la transportación

Las personas que dan servicios y también los miembros de la comunidad sintieron que en Siler City no hay mucha transportación pública, y que este es una barrera para usar la recreación, servicios de salud, y también para sus trabajos. Una mayoridad de las personas que dan servicios pensaban que las

mujeres, los viejos, y los nov son mas afectados por este problema que otros grupos.

"¿Si tendrá un YMCA o un lugar adonde puede jugar, como va a ir allí? Necesita un coche o sus padres necesitan dinero para comprar un coche y necesita tener por lo menos dieciséis anos."

- Persona que da servicios

"Si no tiene transportación, es un problema viajar una milla."

-Miembro de la Comunidad

Acceso para Recibir los Servicios

Unos cambios positivos para mejorar el acceso para la gente en Siler City son Piedmont Health Services y también que muchos lugares ahora tienen personas bilingües. Los miembros de la comunidad y también las personas que dan servicios hablaron sobre las razones para por que unas personas no pueden recibir acceso servicios de salud en Siler City. Muchas personas no pueden comprar la segura porque cuesta tan mucho. También, unas personas dijeron que si no tienen sus transportaciones, es muy difícil ir a la clínica. Para la población Latino, las diferencias en la lengua y documentación son asuntos grandes. Y por final, unos miembros de la comunidad y las personas que dan servicios han descubierto unos problemas entre los doctores y los pacientes-que la confianza y la comunicación es un problema.

"Pienso que todo el población pobre tiene problemas con recibir servicios para mejorar su salud. El color de su piel no es importante. Si eres pobre, o no tienes segura, y no puede recibir los servicios. Y si no tienes la segura, no puedes ir al doctor- nadie quiere verte. Cuando yo voy al doctor y dijo que tengo la segura, su actitud cambia muchas. Y están simpáticos a mi."

"Hay dos problemas en el población Latino. Uno es que no vamos al doctor por recibir servicios preventivos. Solamente vamos al doctor cuando estamos enfermos. El dos es que es muy difícil ir al doctor cuando necesitas trabajar por doce horas y necesitas limpiar tu casa y todas."

- Persona que da servicios

Asuntos Con la Salud

Los miembros de la comunidad y personas que dan servicios hablaron sobre unos programas que han mejorado las saludes de personas diabéticas o quien tiene asma. Pero, los dos grupos todavía pensaron que hay asuntos de salud en esta comunidad. Las personas que dan servicios y también los miembros de la comunidad pensaron que no hay servicios en la ciudad para mejorar la salud mental, ni para los dientes. Y, dijeron que diabetes es un gran problema en el población.

"Muchas personas en este ciudad aparecen normal pero en realidad tienen problemas mentales. Y nadie quiere hacer nada sobre este problema. Tenemos miedos de personas con problemas mentales, pero si continuamos a esconderlo este problema, la comunidad va a tener muchas problemas."

-Persona que da servicios

"Con todas estés condiciones, el diabetes y el depresión- si no tiene el dinero para el medicación, no puede comprarlo, y su condición no va a mejorar."

-Miembro de la Comunidad

Los relaciones entre los grupos

Los miembros de la comunidad hablaron sobre cambios positivos entre los grupos en Siler City. Muchas personas dijeron que la ciudad esta ayudando mucho con mejorar las relaciones entre los Latinos y los Africana Americana, y así los dos grupos aceptan el otro más que antes. Pero, los dos grupos todavía han tenido problemas con racismo y con discriminación. Las personas que dan servicios también dijeron que existen problemas entre los dos grupos, pero los problemas están mejorando.

"Estábamos allí. La barrera del lengua es el solo división que van a presentirlos a conectar con la población Latino. Si un día todas hablan la misma lengua, serán un comunidad."

<div align="right">-Miembro de la Comunidad Africana Americano</div>

"Muchos cosas son muy esperados. Vamos a las iglesias otras, hacemos ejercicios diferentes- todas son diferentes."

<div align="right">-Miembro de la Comunidad Africana Americano</div>

"En las tiendas, puedes verlo. Cuando yo hablo con alguien y ellos se escuchan mi acento, ellos no mas quieren hablar conmigo."

<div align="right">-Miembro de la Comunidad Latino</div>

"Pienso que muchas personas han hecho un trabajo muy bien. Pienso que muchas grupos están trabajando juntos, y son inclusivos."

<div align="right">-Persona que da servicios</div>

Investigación en la Comunidad

Los miembros de la comunidad y también las personas que dan servicios han mencionado que entre 1997 y ahora, muchos asesoramientos fue completado, y la mayoría fue completado por estudiantes de UNC. Y, también, ellos dijeron que no hay muchas cambias en la comunidad después de los asesoramientos. Los miembros de la comunidad y también las personas que dan servicios enseñaron que muchos cambios no resultan después porque los que hacen los asesoramientos no tienen dinero.

"Cada ano, otro grupo viene a este comunidad y valora la comunidad. Personas en el grupo hablan con personas en la comunidad, hacen entrevistas, y después salen. ¿Pero   que recibe la comunidad? ¿Que hace el grupo para nosotros? Nada."

-Un miembro de la Comunidad

"La comunidad de Siler City tiene la competencia. En la ciudad hay muchas personas que están trabajando con unas problemas, y quien están trabajando para cambiar sus comunidades para el mejor."

-Persona que dan servicios

El Asesoramiento Final

Puede ver el asesoramiento final a
http://www.hsl.unc.edu/phpapers/phpapers.cfm   En Junio 2004.

Si tiente preguntas, por favor llamo el Community Diagnosis Team a 919-966-6758 Ext. 5

Forma de evaluación del Reunión

Por Favor, diga nos lo que le gustaba del reunión

¿Hay cosas que nosotros necesitaba hacer diferente?