

Wendell

Wake County, North Carolina

A Community Diagnosis including Secondary Data Analysis and Qualitative Data Collection

May 6, 1999

Ann Daniels Melissa Klein Katherine Ornstein Margaret Ostafin

Preceptor:
Lechelle Wardell, MPH
Wake County Human Services

Field Coordinator: Sandra Crouse Quinn, Ph.D.

Completed during 1998-1999 in partial fulfillment of requirements for HBHE 240 and 241
Department of Health Behavior and Health Education School of Public Health
University of North Carolina at Chapel Hill



TABLE OF CONTENTS

Acknowledgements	1
Executive Summary	2
Methodology	7
Secondary Data Analysis	12
Chapter 1: Geography, History, and Economic Profile	13
Geography	13
History	
Economic Profile	17
Chapter 2: Community Profile	19
Population	20
Housing and Households	
Educational Attainment	
Economics	25
Chapter 3: Health	27
Mortality and Leading Causes of Death	27
Cancer Mortality and Morbidity	
Morbidity	
Sexually Transmitted Infections.	
Maternal and Child Health	
Crime	35
Health Insurance	37
Medical Care	37
Wake County Human Services	
Mental Health and Substance Abuse.	
Access to Medical Care	
Services for Seniors.	
Recreation	
Environmental Health	
U.S. 64 Bypass.	
Water and Sewer Services	
Environmental Issues	
Conclusion	48

Qualitative Data Collection	49
Chapters According to Major Themes:	
Chapter 4: The Community of Wendell	50
Chapter 5: Growth	55
Chapter 6: Services	59
Chapter 7: Traffic	63
Chapter 8: Transportation	66
Chapter 9: Seniors	68
Chapter 10: Housing	70
Chapter 11: Latinos	73
Conclusion	77
References	80
Appendices	
Maps	
Interview Guides	1.1
Fact Sheet	1.1
List of Interviewees	1.1
List of Interview Codes	
Wendell Jingle and Advertising Article	1.1
Forum Newspaper Coverage	
Forum Report and Materials	Appendix H

LIST OF FIGURES

Figure 2.1.	Proportion of Population by Age Distribution.	21
Figure 2.2.	Percentage of Population over age 25 with an Associate Degree or Higher	25
LIST OF	TABLES	
Table 2.1	Population Distribution by Race	22
Table 2.2	Racial Breakdown of Persons Below Poverty Level	26
Table 3.1	Mortality Rates 1996 (Per 1,000)	28
Table 3.2	Leading Causes of Death for Wake County and North Carolina, 1997 (Per 100,000)	29
Table 3.3	1993-1997 Age-Adjusted Cancer Mortality Rates for Wendell, Wake County and North Carolina (Per 100,000)	30
Table 3.4	1991-1995 Age-Adjusted Cancer Incidence Rates for Wendell, Wake	
	County and North Carolina (Per 100,000)	30
Table 3.5	Actual Cases and Case Rates Infected with Reportable Communicable	
	Disease for Wake County, North Carolina, and Wendell Reported, 199	7
	(Per 100,000)	32
Table 3.6	STD Cases and Rates for Wendell, Wake County and, North Carolina,	
	1997 (Per 100,000)	33
Table 3.7	Percent of Infants Affected Out of All Live Births	34
Table 3.8	Adult Arrests by Offense in Wendell, 1997	36
Table 3.9	Crime Index Rate in Wake County and North Carolina, 1996 and 1997	,
	(Per 100, 000)	37

Table 3.10	Unduplicated Counts of Zebulon Clinic Clients by Month and Servi	ce for
	January to December 1998	40

ACKNOWLEDGEMENTS

This document would not have been possible without the help of many individuals. The Wendell Community Diagnosis team would like to thank the following people for their assistance with this project:

- ◆ Sandra Crouse Quinn, our professor, and Lechelle Wardell, our preceptor, for their helpful advice and suggestions.
- Many thanks to the residents of Wendell who agreed to be interviewed for this profile. We appreciate you willingness to meet with us and share your experiences, ideas, and concerns about the community. We are grateful that you invited us into your homes, offices, and your lives. Thank you for your stories.
- ◆ The service providers who took the time to interview with us. You provided valuable information as well as access to the community.
- ◆ The Forum Planning Committee and those community members who us assisted with advertising. Your suggestions and ideas helped us plan a forum that, we hope, was fun and informative.
- ◆ The Eastern Wake Senior Center for their kindness and generosity in hosting the Community Forum.
- And, finally we would like to thank the all the residents of Wendell for making us feel welcome in their town. This document is dedicated to the community of Wendell, North Carolina.

EXECUTIVE SUMMARY

Wendell, North Carolina is a rural town of 3,946 people located 12 miles east of Raleigh (Wendell Chamber of Commerce, 1999). This document is intended to serve as a comprehensive community resource for the town of Wendell. It was created by graduate students in the Department of Health Behavior and Health Education at the School of Public Health, University of North Carolina at Chapel Hill with the support of Wake County Human Services.

This document identifies the strengths, assets, and challenges that affect the community of Wendell. It is the product of a year-long Community Diagnosis project. A community diagnosis:

...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. A good diagnosis suggests what it is like to live in a community, what the important health problems in a community are, what interventions are most likely to be efficacious, and how the program would be best evaluated (Steuart, G.W. and Kark, S. L., 1962).

As we began to work in Wendell, we discovered that "Wendell" is defined in different ways. The U.S. Bureau of the Census classifies Wendell by the zip code - 27591. The town government identifies Wendell as its incorporated two square mile area. Residents' opinions on the definition of Wendell also vary. While some consider other small towns that share the Wendell zip code, like Riley Hill and Lizard Lick, to be part of Wendell, others see them as separate entities.

For the purpose of this document, we are focusing on the incorporated town of Wendell.

This decision was made because of limited time and resources for the project. Moreover, since

Wendell's population makeup is different than other areas which share its' zip code, it would

have been difficult to speak with enough residents to document, and do justice to, all perspectives that exist in the area.

In order to get a complete picture of Wendell, it is imperative to look beyond official data and statistics and talk with the people who live in the town. Hence, this document includes information from a variety of sources and represents many viewpoints. The first phase of the community diagnosis occurred in the fall of 1998. Secondary data, which included population and health statistics as well as economic indicators, were gathered from local, state, and national health and service agencies. Local newspapers and town documents were also useful sources. Whenever possible, information was collected on Wendell, Wake County, and North Carolina for comparison purposes. The second phase was primary data collection, which occurred during the fall of 1998 and the spring of 1999. Primary data collection involved obtaining information from interviews with community members and service providers. In the final phase of this process a forum was held in Wendell, in which both quantitative and qualitative information was presented to community residents.

The collection of secondary data was an important part of this project. Potential limitations, however, exist with any data set. For example, federal, state, and local agencies may not be able to update their statistics each year. Potential users of this document are therefore encouraged to look for the most current information available. This is especially relevant to Wendell which is situated in an area that has experienced significant growth in population and industry during the 1990s. Although the views of community members interviewed are faithfully recorded in the document, we could not speak to everyone in Wendell.

As we began to work with the community, we realized that many communities exist within the larger one of Wendell. Individuals spoke about belonging to several communities at

once creating multiple ties among Wendell residents. Town leaders are church members, parents, and belong to service organizations; church leaders are former Town Council members and business owners; community members head volunteer organizations and work in local businesses. These overlapping networks help to create a strong community with a deep sense of pride.

Many of the most salient issues for Wendell residents were brought to light during our interviews. Community members were eager to talk about their town, its strengths, and the issues it currently faces. Community pride is strong in Wendell, and it is one of the town's greatest assets.

A reflection of this pride is the deep commitment to the town's current and future success. Residents are involved in numerous social service clubs, which are extremely active and are assets to the community. There is also a strong commitment to faith in Wendell. Church programs and outreach work serve to unite the community and provide for citizens in need. Community members also take pride in downtown Wendell's distinction as a nationally recognized historical landmark and strive to create a balance between the unique feeling that comes from small town life and the recent growth in the area.

Wendell, like Wake County, has grown tremendously during the past several years and will probably continue to do so. A primary concern related to growth for Wendell is traffic. The construction of the U.S. 64 Bypass was identified as a priority in both primary and secondary data collection. The overburdened U.S. Highway 64 affects commuting time, access to services, and overall convenience for residents. It also has a significant impact on the growth of the area and, consequently, the quality of life for all. Residents and providers voiced a concern that

further delay in the construction of the Bypass may ultimately have a negative impact on the growth of the entire eastern Wake region.

Population growth challenges the full incorporation of new citizens into community life. Wendell, Wake County, and North Carolina are popular destinations not only for people from the U. S., but from other countries as well. Residents of Wendell also face the challenge of how best to assist an emerging Latino population who struggles with a language barrier.

Industrial growth in the area will affect Wendell for years to come. There is much debate about the type of business and industry Wendell should attract, as well as how best to accomplish this. A primary reason for attracting businesses to the area is to increase the town's tax base, which will reduce the tax burden on residents. Any discussion about attracting new business must also include services, medical and otherwise. The community will need to offer convenient services to its residents that are comparable to those of neighboring towns in eastern Wake County.

As a promotional effort, local business owners, with the assistance of the town government, created an advertising campaign. A commercial and jingle were written (See Appendix F) and began playing on a local television and radio stations in the spring of 1999. This is a significant step for a town of its size.

Looking to the future, Wendell seems to be standing on firm ground. A steady, but not overwhelming growth rate, coupled with low unemployment and increased economic possibilities, create a stable foundation from which to confront future challenges.

We hope that the information presented in the following chapters will be a tool to assist with decision making for the present and future. It is also hoped that the data presented will provide pertinent information to facilitate frank and open discussion among town leaders and

community members as they continue to strive to make Wendell the "home of progress and opportunity."

METHODOLOGY

The following section describes the methods used to gather information about the town of Wendell. It explains the process of examining secondary data, developing interview questions, contacting and interviewing participants, and analyzing data. The methodological limitations of data collection are also discussed.

SECONDARY DATA

The accumulation of available information sources is known as secondary data collection. Several sources were used to describe the demographics of the town including the 1990 U.S. Census, city planning documents and historical documents, as well as information from the Chamber of Commerce, health departments, and newspapers. Additionally, information was gathered through extensive library and Internet searches, as well as numerous phone calls and informal interviews with experts.

Although secondary data provide substantial information for an overview of a community, it also has several inherent limitations. First, one of the main data sources was the 1990 U.S. Census. Because this information is 10 years old, it may no longer be accurate and changes in the population have certainly had a major impact on the community in the past several years. In addition, since information is not always available at the community level, as is the case with some health related statistics, inferences were made based on county and/or state data.

PRIMARY DATA

To get a more complete understanding of the community, it was necessary to use other methods to gather information. Primary data, such as personal interviews, provided the opportunity to get a first hand account of the important issues and concerns in the community.

Interview Guide

The questions used in the interview guide emerged from team brainstorming sessions and graduate students' guides used in previous years. The team developed two separate interview guides - one for community members and one for service providers (See Appendix B). The University of North Carolina, School of Public Health Institutional Review Board (IRB) approved both interview guides. The IRB also approved a fact sheet describing the purpose of the project for distribution to participants (See Appendix C).

The community member interview guide consisted of 15 open-ended questions covering topics such as community strengths, issues and concerns, availability of services, community involvement, and changes in the community. The service provider interview guide consisted of questions that dealt primarily with the organization or agency and the services that they provide to the community. Individuals that fell into the service provider category included local government officials, health care workers, local merchants, church leaders and others.

The interview guide provided a checklist of items that the team felt were important to address with each participant, but still allowed flexibility to facilitate conversation and build rapport. Since the interviews were not highly structured, team members could tailor questions during interviews and probes to gain more insight into specific topics.

Data Collection

Between November 1998 and February 1999, a total of 38 interviews were conducted (20 community members, 18 service providers). In some cases, service providers were also long time community residents. Although many service providers are also Wendell residents, they have by nature of their positions a different perspective on the town. Of the community members interviewed, 16 were Caucasian, three were African American, and one was Latino. Of the service providers interviewed, 15 were Caucasian, two were African American, and one was Latino (See Appendix D).

We began by interviewing service providers and asked them to provide us with the names of any individuals they knew who might agree to be interviewed for our project. In turn, we asked those individuals to do the same. This method is known as the snowball technique and was used to identify most interviewees. We also met some interviewees at town meetings, church services, and other functions in the community.

Each participant was initially contacted by telephone to set up the interview. Interviews were conducted at the participant's home or workplace depending on which was convenient for that individual. A team member confirmed interviews one day prior to the actual interview.

Two team members attended each interview. One served as the primary interviewer while the other took detailed notes. The note taker also had the opportunity to ask relevant questions to elucidate an interesting comment or topic.

The interviewing process for community members and service providers was identical. At each interview, the interviewer provided a brief description of the community diagnosis project and an outline of the interview. Interviewers discussed confidentiality issues and asked for permission to tape record the session. Participants were shown the Stop button on the tape

recorder and asked to turn it off if they felt they did not want something to be recorded. The interviewers explained that the sessions were taped so they could be referred to for clarification of information missed during note taking. All tapes will be destroyed after the completion of the project so as to ensure confidentiality to all participants.

Interviewees received a fact sheet explaining the process. It also provided a contact number for the interviewee to use to ask questions after the interview. Each interview lasted about 30-45 minutes. At the end, participants were asked to provide the names of any individuals they knew who might agree to be interviewed for the project. The team wrote thank you notes to all interview participants 1-2 days after each interview.

Data Coding and Analysis

The note takers typed all interview notes and kept them in a project file drawer. Once the majority of interviews were completed, a codebook, capturing central ideas, concepts, and themes was developed. Codes were usually abbreviations or simple words that described common themes that emerged from the interviews (See Appendix E). Each team member read through and coded the interviews she took notes for and compiled a list of codes. Later, a final list was compiled based on team members' input. Each piece of information collected was then re-coded by at least two team members. If a discrepancy existed, a third reader was asked to decide the code. Once coding was completed, a database was created using Microsoft ACCESS 97 software. This allowed interview data to be organized for simplified retrieval and sorting for writing later chapters.

Methodological Limitations

Several factors may have affected the quality of the information obtained during our qualitative data collection. First, our interview sample was not chosen randomly and therefore may not represent the entire community. Most names of potential interviewees were suggested to us by those interviewed. As a result, many participants were connected to each other in some way. Secondly, certain pockets of the population, such as Latinos and African Americans may be underrepresented in this document. In addition, individuals may not have felt comfortable expressing their true opinions on sensitive issues, which many have led to some important information being missed during this process. For these reasons, some viewpoints and opinions may not be represented by the information in this document.

SECONDARY DATA ANALYSIS

CHAPTER 1: GEOGRAPHY, HISTORY, AND ECONOMIC PROFILE

GEOGRAPHY

The town of Wendell is located in eastern Wake County, 12 miles east of Raleigh in central North Carolina. Its neighboring towns include Knightdale, approximately four miles to the west, and Zebulon, approximately two miles to the north. The most direct route to Wendell from Raleigh is via U.S. Highway 64 that leads to U.S. 64 Business. This highway runs through the center of Wendell and on to Zebulon. In 1998 the portion of U.S. 64 Business that runs through Wendell was renamed Wendell Boulevard from Wilson Avenue.

Wendell's corporate limit covers two square miles. On the east side of Wendell, the Little River runs north-south; on the west side of town, Buffalo Creek runs north-south and flows into Lake Wendell, located south of Wendell in Johnston County. The 34-acre Wendell Park, located on the west side of town, is the future site of the Wendell Community Center. A Wake County regional park has been proposed to be located just northwest of the town's limit. The Wendell Country Club, covering 126-acres of land, is located two miles west of the town's corporate limits.

Driving through Wendell, one notices older houses, new subdivisions, many single family homes, and numerous churches. Different types of housing are scattered throughout the town and there is no clear distinction between neighborhoods. Wendell has a relatively large downtown area for its size featuring a variety of specialty shops. This area, which began to grow with the arrival of the Raleigh-Pamlico Railroad in 1906 (later the Norfolk-Southern Railroad), was developed with a traditional grid street pattern. The railroad tracks, still a central feature of the town, divide Wendell into northern and southern regions.

The appearance of the town is a priority for Wendell residents and this is clearly reflected in the town's upkeep. In 1970 Wendell won the Capital Area Development Association Award for the beautification of its central business district (Ledford, n.d.). In 1983 Wendell achieved the status of Tree City USA, in recognition of the town's efforts to promote conservation and beautification (Wendell Planning Department, 1997). The town recently received a \$30,000 grant from the Department of Transportation (DOT) to plant trees and flowers in the median of U.S. 64 Business (Height, 1998b). Additionally, the town plans to encourage the development of more greenways along streams and flood ways for recreation and run off. Plans also include expanding the sidewalk system (Wendell Planning Department, 1997).

HISTORY

Wendell was named in honor of the poet, Oliver Wendell Holmes, by schoolmaster Mr. Mallie Mae Griffin circa 1890. The town originally consisted of a few houses and the one-room Rhodes School House. In 1891 the schoolhouse was renamed the Wendell Preparatory School and a post office was opened ("Wendell Historical Beginnings," 1974; "School Plays Key Role," 1978).

Wendell was incorporated as a town on March 6, 1903. The town's growth accelerated with the addition of the Raleigh-Pamlico Railroad three years later, which attracted new businesses and residents. Proximity to the railroad helped Wendell establish its first industries – cotton and lumber. Land cleared from the lumber industry, coupled with tobacco crop destruction from Granville Wilt, a crop disease, prompted many farmers to relocate to Wendell. In the early 20th century, the Wendell Leaf Market became the first tobacco market in Wake County, and tobacco replaced lumber as the town's economic focal point ("Wendell's Economy," 1978; Ledford, n.d.).

The town's first bank opened in 1904. The first Parent Teacher Association (PTA) in Wake County was established in Wendell in 1911. The first women's social/service club was founded in 1917, followed by a garden club in 1926 (Joseph, 1978). Other service organizations were inaugurated in later years, establishing the tradition of community involvement that continues today. *The Wendell Clarion*, the town's first newspaper, began in 1911 and changed names several times before becoming *The Gold Leaf Farmer* circa 1920. The town's infrastructure also improved during the early 1900's with the installation of electrical power in 1913, and water and sewage facilities in 1920. The streets were paved from 1924 to 1926. In

1934 Wendell became one of the first towns in Wake County to appoint a town manager (Ledford, n.d.).

The Great Depression in the 1930s did not have a severe impact on Wendell as only a few businesses went bankrupt. The town made a rapid recovery during the 1940s and manufacturing, primarily textiles, slowly replaced tobacco as the town's dominant industry (Ledford, n.d.). Despite this shift, the importance of tobacco in Wendell's history is highly valued, and celebrated by events such as the annual Bright Leaf Festival in October.

In September 1998 the business district along Main Street, south of the railroad tracks to Third Street, was added to the National Register of Historic Places (Height, 1998a). The National Register of Historic Places is the official list of the Nation's cultural resources deemed worthy of preservation. The National Park Service under the Secretary of the Interior administers this prestigious designation (National Park Service, 1998).

ECONOMIC PROFILE

The growth of industry in Wake County has brought many people to the Triangle area, which has led to growth in Wendell. Wendell is often viewed as a "bedroom community" since many residents work in Raleigh, Research Triangle Park (RTP), and neighboring areas.

According to the 1990 U.S. Census, the average commute time for Wendell residents was 23.6 minutes.

There are several large industries located in the area which provide employment. The top five local employers are: Siemens Corporation (700 employees), an electrical components manufacturer; Micro Measurements Group (400 employees), a stress gauges manufacturer; Mortex Apparel, Inc. (260 employees), a textile manufacturer; Cotton Exchange (150 employees), a textile manufacturer; and Toll Manufacturing (45 employees), a custom packing manufacturer (Wendell Planning Department, 1997). Most of these businesses are located just outside of the town limits along U.S. 64 Business. Other major employers include Glaxo-Wellcome Inc., a pharmaceutical company, in Zebulon, and Square D Company, an electronics company that manufactures and tests automated assembly lines, in Knightdale. Additionally, there are many small locally owned family businesses in Wendell.

The three main sources of employment in Wendell are service related – including health, education, business, entertainment, and personal services (28%); retail and wholesale trade (21%); and manufacturing (19%). Agriculture employs the lowest percentage (2%) of workers in Wendell (U.S. Census Bureau, 1990).

The Wendell 2010 Comprehensive Development Plan, written in 1997, is a reflection of Wendell's prudent planning for its future. The Plan's economic goals include encouraging responsible business growth, supporting existing businesses, and encouraging industrial growth.

By observing the more rapid growth that has occurred in other eastern Wake towns such as Zebulon, Wendell is able to carefully plan ahead. One of the strategies of the development plan is the re-establishment of the Economic Development Committee created by the Wendell Board of Commissioners in 1993 to promote business in the area. Other strategies include increasing the skilled labor force, supporting small business development, encouraging outdoor dining in the downtown area, and providing municipal incentives for industries. The development of small industry in Wendell is necessary to financially support the growing needs of the town while keeping property taxes low. The town has prepared for growth by placing a high priority on the upgrade of its water and sewage systems (I. Fuller, personal communication, November 19, 1998).

CHAPTER 2: COMMUNITY PROFILE

This section will examine and compare data on population, education, economics, and unemployment for Wendell, Wake County, and North Carolina. This information is intended to give an overview of Wendell and its residents. It is important to note that much of the data come from the 1990 U.S. Census, and therefore may not reflect the most current figures. It will be necessary to revisit census data when the 2000 Census becomes available. Also, census data is gathered by zip code, and the Wendell zip code, 27591, covers areas outside of the town limit. Since information is not always available at the community level, as is the case with some health related statistics, inferences were made based on county and/or state data.

Throughout this document, we will refer to those with cultural and ethnic roots in Latin America, South America, and Mexico as Latino. However, the North Carolina State Office of Planning uses the term Hispanic. As of 1998, the U.S. Census Bureau uses both terms, and the 2000 U.S. Census will include Latino in the racial/ethnic categories. Since the Latino population is growing throughout North Carolina, it is difficult to track with great accuracy. There are several reasons for the lack of accurate information: the absence of a Latino racial category in the 1990 Census, a large influx of Latinos since the last census, illegal residence by some Latinos, as well as a possible mistrust of governmental agencies.

Estimates of the Latino population in North Carolina vary greatly. In 1996 the Safe Christian Action Committee estimated the population at 261,000, while the state Health Department estimated the population at 230,000. In 1997 the U.S. Census Bureau estimated the Latino population to be 149,500 (Luginbuhl, 1998).

POPULATION

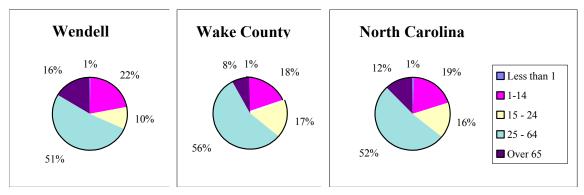
In 1990 the population of Wendell, North Carolina was 2,805. One of 12 municipalities in Wake County, Wendell accounted for 6% of the county population of 423,380 (U.S. Bureau of the Census, 1990). By 1996, Wendell's population grew to 3,556, an increase of 26.7% (North Carolina Office of State Planning, 1997). This increase mirrored Wake County's growth of 27.3% from 423,380 to 539,187 during the same time. North Carolina's population increased only 10.4 % from 1990 (6,628,637) to 1996 (7,323,085) (North Carolina Office of State Planning, 1997). From 1990 to 1996, all 12 municipalities in Wake County experienced rapid population growth. Wendell, with an increase of 26.7%, ranked 9th in growth of the 12 municipalities. The 1997 population estimate for Wendell is 3,946 (Wendell Chamber of Commerce, 1997).

The population distribution of Wendell by gender is 48% female and 52% male. This is almost identical to Wake County, which is 49% female and 51% male, and North Carolina, which is 48% female and 52% male (U.S. Bureau of the Census, 1990). The age distribution, however, varies significantly from that of the county and state in three of five age categories: under age one, 15-24, and over 65 (Figure 2.1). For those under age one, the population percentages are 0.5 % for Wendell, 1.27% for the county, and 1.2% for the state. In the 15-24 age group, percentages are 9.55% for Wendell, 16.55% for the county and 15.67% for the state. These data may suggest that not only are fewer children being born to Wendell residents, but that once residents reach young adulthood they are leaving the community.

In contrast, the proportion of community residents who are over age 65 is much larger in Wendell than at the county and state level. Wendell counts 16.26% of its population in this age group, whereas percentages for the county and state are 7.84% and 12.11%, respectively. A

continued increase in the number of older citizens and a decrease, or leveling off, of younger citizens may indicate a need to re-evaluate community services. In the future, additional services may need to be directed to an older, larger segment of the population supported by a younger, smaller segment of the population.

Figure 2.1. Proportion of Population by Age Distribution



Source: U.S. Bureau of the Census. (1990). <u>1990 U.S. Census Data</u>. [On-line]. Available: http://venus.census.gov/cdrom/lookup.

According to the 1990 U.S. Census, Wendell's racial make up is 87.5% Caucasian, 12% African American, and 0.5% Other, which includes Native American, Aleutian, Asian or Pacific Islander, and Latino. As seen in Table 2.1, these data differ from the racial make up of both the county and state. Caucasians in the county and state comprise a smaller percentage of residents than in Wendell with 76.5% and 75.6%, respectively. However, African Americans represent a larger proportion of the county and state in comparison to Wendell, with 21% and 22%, respectively. The Other category is also larger at the county and state level with 2.7% and 2.4% of the population, respectively. These data indicate that there is greater minority representation in Wake County and North Carolina than in Wendell.

Table 2.1

Population Distribution by Race

	Wendell		Wake County		North Carolina	
Caucasian	2,457	87.5%	324,011	76.5%	5,011,24	75.6%
African American	335	12%	88,057	21%	1,455,34	22%
Other	13	0.5%	11,312	2.6%	162,049	2.4%
Total	2,805	100%	423,380	100%	6,628,63	100%

Source: U.S. Bureau of the Census. (1990). 1990 U.S. Census Data. [On-line]. Available: http://venus.census.gov/cdrom/lookup.

As noted earlier, it has been difficult to track the Latino population in Wendell and North Carolina with great accuracy. The growth in Wake County, however, is clear. In Wake County, the Latino population was 5,413, the fourth largest concentration following Cumberland, Onslow, and Mecklenburg Counties, according to estimates from the North Carolina Office of State Planning. The number of births in the Latino population increased annually from 1990 to 1997 in Wake County and throughout North Carolina. In the county, there were 108 births to Latinos in 1990 and 568 in 1997, an increase of 426%. In the state, there were 1,752 births in 1990 and 6,917 in 1997, an increase of 295% (North Carolina Office of State Planning, 1997).

HOUSING AND HOUSEHOLDS

In 1993 the average price of a house in Wake County was \$97,200 (North Carolina Department of Labor and Triangle Council of Government, 1998). In 1998 the average price had increased to \$154,329. The average price of a house in Wendell in 1998 was much lower ranging from \$90,000 to \$130,000. These prices reflect the cost of single family homes.

Because Wendell is considered a rural area, first time buyers and those who have not owned a home in the past two years can take advantage of the Rural Housing Development Loan. This loan does not require a down payment on the purchase of a house. To qualify, a two-person household can have an income ranging from \$29,950 to \$46,650. In Wendell, first time

homeowners tend to be young couples who have just graduated from high school or college, and who work in blue-collar professions (Underhill Realty, personal communication, October 11, 1998 and United Realty, personal communication, October 13, 1998). Forty-one permits for new houses were issued within the two square mile incorporated limits of Wendell in 1996 (Wendell Planning Department, 1997).

In addition to single family units, a total of 255 multi-family units exist within the Wendell city limit. Thirty-three percent of these units are occupied by senior citizens and are located in the Robinwood Retirement Community (Wendell Planning Department, 1997). There is also an apartment complex in town, Crestfield, whose residents are disabled (40%) and elderly (60%) (Crestfield Apartments, personal communication, October 27, 1998). The remainder of the multi-family units is in two complexes - Hampton Downs and Maple Court. No new apartment complexes have been built within the incorporated town in the past few years (Wendell Planning Department, 1997). However, there are several new subdivisions being built in the Wendell area (Wendell Forum, personal communication, March 16, 1999).

Wendell participates in the Community Development Block Grant Program (CDBG), which is part of Wake County's Housing and Community Revitalization Program. The CDBG provides money to individuals with low and moderate incomes for home renovations and improvements. Federal funds are also used for town water and sewer installation and road paving (Wendell Planning Department, 1997).

The U.S. Census reports that 57% of the households in Wendell are comprised of married couples. This is slightly higher than Wake County (53.4%) and comparable to North Carolina (56.6%). Of these households, 50.2% have children under 18 years of age. Single males head 2.5% of households in Wendell compared to 10.6% of households headed by single females.

EDUCATIONAL ATTAINMENT

Zebulon Middle School and East Wake High School, located in Wendell, are the middle and high schools for residents of Wendell, Knightdale, and Zebulon. The dropout rates for the county and state show a decrease from the 1995-96 to the 1996-97 school year. For grades 7-12, the rates for the county were 3.37% (95-96) and 2.76% (96-97). For the state, the rates dropped from 3.78% to 3.71% (North Carolina Public Schools Infoweb, 1998).

The overall level of educational attainment in Wendell is lower than in Wake County. Ten percent of Wendell residents, over age 18, have less than a ninth grade education, compared to only 5% of Wake County residents in the same age bracket. Twenty-three percent of Wendell residents, over age 18, have an associate degree or higher compared to 39% in the county (U.S. Bureau of the Census, 1990).

The U. S. Bureau of the Census provides a breakdown by race and education, but only for adults over age 25. In Wendell, 16.8% of adults over age 25 hold an associate degree or higher. This percentage is lower than that of the county (28.2%), but higher than the state (15.5%). Of Caucasian residents, over age 25, 17.3% have an associate degree or higher. This is lower than the county (38.8%) and state (19.3%). Of African American residents in the same age bracket, 11.2% have an associate degree or higher as compared to 18.3% for the county, and 9.5% for the state (Figure 2.2). Because education is strongly valued in this country and is linked to both a higher income and a higher standard of living, it is important to address key issues that might hinder individuals from pursuing higher education.

Percentage of Population that Have Completed College 45% 40% 35% 30% Caucasian 25% 20% African American 15% 10% 5% 0% Wendell Wake County North Carolina

Figure 2.2. Percentage of Population over age 25 with an Associate Degree or Higher

Source: U.S. Bureau of the Census. (1990). <u>1990 U.S. Census Data</u>. [On-line]. Available: http://venus.census.gov/cdrom/lookup.

ECONOMICS

In 1990 the median family income in Wendell was \$37,948 (U.S. Bureau of the Census, 1990). This figure is 14% lower than that of Wake County (\$44,302) but 20% higher than that of North Carolina (\$31,548). By 1995, Wake County's median income rose to \$50,700 and North Carolina's rose to \$39,100 (North Carolina Child Advocacy Institute, 1995). Based on the relationship of Wendell's median family income to that of the county and state in 1990, it is highly probable that the median family income of Wendell also increased from 1990 to 1995.

In 1990 the Federal Poverty Level for a family of four with two adults and two children was \$13,254. For a family of one adult and three children, it was \$13,301. In 1990 7% of families in Wendell lived below the poverty level, as compared to 5% of families in Wake County and 10% of families across the state. In Wendell, 52% of persons living below the poverty level are Caucasian. This is almost identical to the county (49%), and the state (51%).

Of those living below the poverty level in Wendell, 42% are African American, whereas 46% in the county and 45% in the state are African American (Table 2.2).

Table 2.2

Racial Breakdown of Persons Below Poverty Level

	Wendell	Wake County	North Carolina
Caucasian	52%	49%	51%
African American	42%	46%	45%
Other	6%	5%	4%
Total Population	1198	34,249	829,858

Source: U.S. Bureau of the Census. (1990). 1990 U.S. Census Data. [On-line]. Available: http://venus.census.gov/cdrom/lookup.

The proportion of children, those under age 18, living in poverty increases steadily as one moves from the community to the state level. In Wendell, 21.8% of those living below the poverty level are under age 18, in the county the proportion increases to 26.7%, and in the state the proportion increases yet again to 32.9%.

As of October 1998, the unemployment rate in Wake County was 1.6%. This is much lower than the state rate of 3.6% and the national rate of 4.6% (Employment Security Commission of North Carolina, 1998). The recent growth of the Triangle area contributes to low unemployment in the county. Although unemployment rates are not available on the community level, it is reasonable to believe that Wendell would also have a low rate.

CHAPTER 3: HEALTH

This section will examine the health status of the Wendell community. It is important to realize that the health of a community is not merely reflected by its mortality and morbidity statistics. It is a function of several additional components such as crime, environmental issues, and social services available to the community. A comprehensive view of these factors provides a broader understanding of a community's health. This section aims to incorporate these various dimensions into an assessment of Wendell's current health status, within the constraints of using secondary data.

MORTALITY AND LEADING CAUSES OF DEATH

The mortality rates for Wake County and North Carolina differ significantly (Table 3.1). In 1996 the mortality rate in Wake County was 5.6 per 1,000 persons compared to 9.0 per 1,000 persons in North Carolina. This trend is also evidenced in the age specific rates, the rates by race/ethnicity, as well as the rates for males and females. The relatively high density of health care facilities, as well as higher individual incomes, in Wake County compared to other counties in North Carolina may contribute to lower mortality rates. The mortality rate for females is significantly lower than that of males in both the state and the county. Additionally, the mortality rate is lower for Caucasians than minorities.

Table 3.1

Mortality Rates 1996 (Per 1,000)

	1	Wake Count	y	North Carolina			
	Total	Caucasian	Minority	Total	Caucasian	Minority	
Total	5.6	5.3	6.4	9.0	9.1	9	
Males	5.8	5.1	6.8	9.5	9.3	10.1	
Females	5.5	5.5	6	8.6	8.8	8	
00-04 years	1.9	1.4	3.2	2.2	1.8	3.2	
05-14 years	0.2	0.1	0.4	0.3	0.2	0.3	
15-24 years	0.6	0.6	0.6	1.0	0.8	1.3	
25-34 years	1.0	0.7	2	1.3	1	2.3	
35-44 years	1.6	1.1	3.6	2.4	1.8	4.3	
45-54 years	3.2	2.7	5.3	5.0	4.1	8.6	
55-64 years	9.7	8.8	14	12.1	10.8	18.4	
65 and over	47.4	44.8	59.2	50.9	49.1	59.5	

Source: State Center for Health Statistics. (1997). North Carolina Vital Statistics, Volume II – 1996. Raleigh, NC: Department of Health and Human Services.

In 1997 the leading causes of death in Wendell were heart disease, cancer, cerebrovascular disease (stroke), and chronic obstructive pulmonary disease (COPD), respectively (North Carolina Department of Health and Human Services [DHHS], 1998). Due to the extremely low number of deaths, it is not possible to calculate rates from these raw data. The four leading causes of death in Wendell are identical to those in both Wake County and North Carolina (Table 3.2). Consistent with the mortality data, the rates for death by specific cause are significantly lower in the county than in the state. Of the leading causes of death listed in Table 3.2, the only rate that is equal for the state and the county is for Acquired Immunodeficiency Syndrome (AIDS), with 6.3 cases per 100,000 persons in the county and 6.5 cases per 100,000 persons in the state (DHHS, 1998). Cancer and heart disease are serious health issues for North Carolinians, accounting for 53% of all deaths in the state in 1995 (Eastern North Carolina Health Care Atlas, 1997).

Table 3.2

Leading Causes of Death for Wake County and North Carolina, 1997 (Per 100,000)

Cause of Death	Wake County	North Carolina
heart disease	142.2	259.2
cancer	129.1	203.9
cerebrovascular disease	43.1	70.2
COPD	23.3	42.31
pneumonia & influenza	17.3	33.1
diabetes mellitus	17.4	24.7
injuries	13.6	20.3
auto injury	13.1	20.2
suicide	7.5	12.3
nephritis	5.4	9.3
homicide	6.1	9
chronic liver disease	*	8.9
septicemia	5.2	8.8
origin in perinatal period	*	7.2
AIDS	6.3	6.5

^{*} data not available

Source: [Mortality Data: 1997—North Carolina and Wake County]

[Electronic data tape]. (1998). Raleigh, NC: State Center for

Health Statistics [Producer and Distributor].

CANCER MORTALITY AND MORBIDITY

Cancer incidence and mortality rates for Wendell, Wake County, and North Carolina are summarized in Tables 3.3 and 3.4 and are based on data from the North Carolina Central Cancer Registry. The county and state cancer rates are based on population estimates from the North Carolina Office of State Planning. The rates for Wendell are based on the 1990 U.S. Census. It is important to note that the rates for female breast cancer and prostate cancer are based on the total population and not adjusted by sex. For example, the prostate cancer incidence is 53.6 per 100,000 persons in Wendell. The rate would appear much higher if it were calculated only among males in the population.

The cancer mortality rate in Wendell is similar to that of the state but higher than the county rate. Wendell's mortality rate due to bronchus and lung cancer is 26% higher than the rate in the county and 13% higher than the state (Table 3.3).

Table 3.3

1993-1997 Age-Adjusted Cancer Mortality Rates for Wendell, Wake County and North Carolina (Per 100,000)

	Wendell		Wake (Wake County		North Carolina	
	Deaths	Rate	Deaths	Rate	Deaths	Rate	
Cancer Mortality	121	172	3520	160.1	75067	173.4	
lung/bronchus	42	61.8	951	45.3	22413	53.5	
female breast	8	11.4	310	13.2	5860	13.6	
prostate	9	11.2	218	10.1	5009	10.6	
colon/rectum	10	14.8	337	14.9	7430	16.6	

Source: [Central Cancer Registry Data: 1997--North Carolina, Wake County, and Wendell]. [Electronic data tape]. (1998). Raleigh, NC: State Center for Health Statistics [Producer and Distributor].

The cumulative cancer incidence rate for Wendell from 1991-1995 is lower than that of Wake County, but almost the same as that of North Carolina (Table 3.4). There is a higher incidence of bronchus and lung cancer in Wendell compared to both the county and the state. The incidence of female breast cancer is 28% lower in Wendell than in Wake County.

Table 3.4

1991-1995 Age-Adjusted Cancer Incidence Rates for Wendell, Wake County and North Carolina (Per 100,000)

	Wendell		Wake County		North Carolina	
	Cases	Rate	Cases	Rate	Cases	Rate
Cancer Incidence	248	375.2	8,730	423.7	147,991	371.9
lung/bronchus	43	67.8	1,214	63.4	24,182	61.8
female breast	34	52.6	1,614	73.1	24,340	61.8
prostate	32	53.6	1,325	70.7	22,324	55.3
colon/rectum	28	42.2	869	43.4	16,915	41.5

Source: [Central Cancer Registry Data: 1997--North Carolina, Wake County, and Wendell]. [Electronic data tape]. (1998). Raleigh, NC: State Center for Health Statistics [Producer and Distributor].

Because of Wendell's small size, annual cancer incidence rates cannot be calculated on the community level. However, data on the number of cases of specific types of cancers that occur each year are available through the state's Central Cancer Registry. In 1996 and 1997 there were more cases of breast cancer (28) diagnosed in Wendell than any other type of cancer, followed by cases of bronchus/lung cancer (21). Data are also available on the number of cancer deaths that occurred in Wendell. In 1997 over one third of all cancer deaths reported in Wendell were attributed to bronchus and lung cancer. More deaths have occurred in Wendell annually due to bronchus/lung cancer than any other types of cancer since 1992. Colon and rectum cancer, followed by prostate cancer, account for the next highest number of cancer deaths since 1992 (North Carolina Central Cancer Registry, 1998).

MORBIDITY

Table 3.5 compares the prevalence rates of the eight leading communicable diseases in 1997 for North Carolina, excluding sexually transmitted infections (STIs) which will be discussed separately. The number of cases that were reported in Wendell in 1997 are also included in the table when data were available. The data show little difference in prevalence between the county and state except in two cases: non-gonococcal urethritis (NGU) and viral meningitis. Both of these rates are much higher in Wake County and indicate that an outbreak in the area skewed the prevalence rate compared to that of the state. Again, it is not possible to calculate rates for Wendell to use for comparison due to the extremely low number of cases.

Actual Cases and Case Rates Infected with Reportable Communicable Disease for Wake County, North Carolina, and Wendell Reported, 1997 (Per 100,000)

Reportable Communicable Diseases									
Disease	Wake C	County	North C	Wendell					
	Actual Cases Rate		Actual Cases	Rate	Actual Cases				
NGU	1259	226.1	6798	91.5	*				
salmonellosis	108	19.4	1225	18.5	4				
hepatitis B carrier	52	9.3	636	8.5	*				
campylobacteria	31	5.6	529	7.1	1				
tuberculosis	42	7.5	462	6.2	2				
shigellosis	23	4.1	387	5.2	*				
viral meningitis	96	17.2	285	3.8	3				
e. coli	2	.9	*	*	1				

^{*} data not available

Source: [Morbidity Data: 1997—North Carolina, Wake County and Wendell] [Electronic data tape]. (1998). Raleigh, NC: State Center for Health Statistics [Producer and Distributor].

SEXUALLY TRANSMITTED INFECTIONS (STIS)

Healthy Carolinians 2000: The Report of the Governor's Task Force on Health

Objectives for the State serves as an outline of objectives to be used to improve the health status of North Carolinians. A primary goal of Healthy Carolinians 2000 is to reduce the number of people who contract sexually transmitted infections and to identify and provide treatment to a higher percentage of those infected with the Human Immunodeficiency Virus (HIV). Special targets include reducing the number of STIs in persons age 15-24 by at least 30% and increasing the percentage of STI patients and intravenous drug users who are screened for HIV to 90% (Healthy Carolinians 2000, 1992).

Currently, North Carolina uses a confidential HIV testing system that requires individuals to supply their name and address. Effective May 1, 1997, the North Carolina Supreme Court made the decision to end anonymous HIV testing in the state ("High Court Affirms," 1997). Anonymous testing uses a method in which individuals are assigned numbers with which to

access test results. Prior to that ruling, in September 1991, the number of sites offering anonymous testing in North Carolina decreased from 100 to 18 ("Testing for HIV," 1998).

STI prevalence data indicate differences in morbidity for Wake County and North Carolina (Table 3.6). The county has a lower rate of gonorrhea and syphilis than the state. In 1997, the rate of chlamydia infection, the leading communicable STI, was almost the same between county and state, as was the rate of HIV infection. Both the county and state had a rate of 15 per 100,000 cases of HIV infection with 85 cases reported in Wake County and 1,102 cases reported in North Carolina. The AIDS rate in North Carolina was 11 compared to 14 cases per 100,000 persons in Wake County. This elevated rate of AIDS in Wake County may be due in part to the advanced medical care facilities available in the county that would bring more people to the area for treatment.

Table 3.6

<u>STD Cases and Rates for Wendell, Wake County and, North Carolina 1997</u>
(Per 100,000)

	Chlamydia		Gonorrhea		Syphilis		HIV		AIDS	
	# cases rate		# cases	rate	# cases	rate	# cases	rate	# cases	rate
Wendell	28	*	29	*	8	*	*	*	*	*
Wake	1370	246	1040	187	140	25	85	15	79	14
NC	17108	230	16888	227	2342	32	1102	15	837	11

*data not available

Source: [STD Data: 1997—North Carolina, Wake County and Wendell]. [Electronic data tape]. (1998). Raleigh, NC: State Center for Health Statistics [Producer and Distributor].

While there are data available on the number of STI cases occurring in Wendell in 1997 (Table 3.6), infection rates for these diseases cannot be computed accurately due to the extremely low number of cases reported. While the rates are not available for Wendell, there is no indication that these rates differ from either that of the county or state.

MATERNAL AND CHILD HEALTH

Birth data is not available for Wendell, therefore this information must be estimated based on data collected for Wake County and North Carolina as a whole. In 1995 the birth rate in Wake County was 57.1 per 1,000 persons as compared to 61.5 per 1,000 persons in North Carolina. The abortion rate in Wake County was 22.8 per 1,000 persons as compared to 18.1 per 1,000 persons in North Carolina. These data indicate that there are more abortions performed and fewer births in Wake County than in the state (DHHS, 1995). In 1996 the total number of pregnancies in Wake County was 11,630, resulting in a rate of 82.9 per 1,000 persons. Of these, 1,159 were teen pregnancies (ages 15-19), resulting in a teen pregnancy rate of 63.0 per 1,000 persons (University of North Carolina-Chapel Hill, Sheps Center for Health Services Research, 1997).

Table 3.7

Percent of Infants Affected Out Of All Live Births

	Wake County	North Carolina
low birth weight	7.5%	8.7%
late or no prenatal care	10.6%	16.5%
mother smoked	7.6%	15.9%
C-section	19.3%	21.9%

Source: State Center for Health Statistics. (1998). NC Online Pocket Guide.

[On-line]. Available: http://www.sch.state.nc.us/SCHS/profiles/profile 2.cfm/.

Table 3.7 shows a comparison of data on pregnancy health indicators in Wake County and North Carolina. These data indicate that babies born in Wake County are less likely to be of low birth weight, to be born to mothers who had late or no prenatal care, to have a mother who smoked during pregnancy, or to have been delivered through cesarean section (C-section) than the average baby born in North Carolina. While these data are not available on the town level, it

is likely that Wendell's rates would mirror those of Wake County because Wendell residents utilize the same health care services.

North Carolina has had one of the highest infant mortality rates in the country for several years. A primary goal of <u>Healthy Carolinians 2000</u> is to reduce the total infant mortality rate by 30% and the minority infant mortality rate by 40% (Healthy Carolinians 2000, 1992). The 1996 infant mortality rate for Wake County was 7.5 deaths per 1000 live births, which is significantly lower than the North Carolina rate of 9.2 deaths per 1000 live births. The rate in Wake County is very close to the rate (7.4 per 1,000) of the <u>Healthy Carolinians 2000</u> objective (State Center for Health Statistics, 1997). The county's rate is significantly different for Caucasians compared to minorities. The infant mortality rate for minorities is more than double that of Caucasians with a rate of 12.3 compared to 5.7 per 1,000 live births (University of North Carolina-Chapel Hill, Sheps Center for Health Services Research, 1997).

CRIME

The Wendell Police Department is located in Town Hall. It is comprised of 12 patrol officers, four dispatchers, one community police officer, and a K-9 unit. The community officer is responsible for handling juvenile and sexual assault cases in Wendell (Wendell Police Department, personal communication, November 16, 1998).

Due to the low number of arrests in Wendell, rates for arrests by offense cannot be computed. Instead of comparing the number of crimes that occur in the town to the county and state, this section will examine the nature of the crimes dealt with in Wendell. The raw numbers of adult arrests in Wendell in 1996 and 1997 per offense are shown in Table 3.8. These data indicate that the highest incidence of arrests in Wendell for adults is due to driving while intoxicated (DWI) with 27 arrests in 1996 and 37 arrests in 1997. Fourteen drug-related arrests

occurred in 1997 compared to 30 in 1996, a decrease of over 50%. Decreasing drug use is a goal of the Wendell Police Department. Recently, the town purchased a canine specially trained to search for drugs. The purchase was made with funds from a grant from the North Carolina Department of Crime Control and Public Safety and the town's drug seizure money (Height, 1998d).

Table 3.8

Adult Arrests by Offense in Wendell, 1997

Arrest	1996	1997	Arrest	1996	1997
(Offense Part II)			(Offense Part I)		
simple assault	7	12	murder	0	0
forgery/counterfeiting	3	6	manslaughter	0	0
fraud	0	1	forcible rape	0	0
stolen property	0	2	robbery	0	1
drugs	30	14	aggravated assault	2	2
gambling	0	0	burglary	2	1
offenses against	1	0	larceny	4	4
family					
DWI	27	37	motor vehicle theft	0	0
disorderly conduct	1	1	arson	0	0
all other offenses	20	21			
total	89	94	total	8	8

Source: State Bureau of Investigation. (1998). <u>Crime in NC 1997: Uniform Crime Report.</u> Raleigh, NC: Department of Justice.

According to the State Bureau of Investigation's report, *Crime in North Carolina 1997*, the Wake County crime rate increased by 1% from 1996 to 1997, while the North Carolina rate decreased by 1%. Table 3.9 shows the arrest rate per 100,000 persons for Wake County and North Carolina. While most offenses occur at a significantly lower rate in Wake County than in North Carolina, the rape rate in the county equals that of the state. Additionally, the murder rate in Wake County in 1997 was greater than that of North Carolina (North Carolina Department of Justice [DOJ], 1998).

Table 3.9

<u>Crime Index Rate in Wake County and North Carolina, 1996 and 1997 (Per 100, 000)</u>

		violent	property	murder	rape	robbery	aggravated assault	burglary	larceny	motor vehicle	arson	total
							assauit			theft		
Wake	1996	278	2979	7	26	47	198	1035	1657	287	38	3257
	1997	331	2962	11	32	58	230	1081	1667	214	34	3293
NC	1996	602.9	5047	8.8	32	168.4	393.7	1374.3	3328.9	343.8	38	5649.9
	1997	618.9	4972.4	8.4	32.3	176.2	402	1372.2	3264	336.1	36.4	5591.3

Source: State Bureau of Investigation. (1998). <u>Crime in NC 1997: Uniform Crime Report.</u> Raleigh, NC: Department of Justice.

HEALTH INSURANCE

At 74%, Wake County has the highest percentage of its population covered by private health insurance compared to other counties in the state. Five and a half percent of the county receives Medicaid compared to 10.2% in North Carolina. For those living below the poverty level, 26.3% in Wake County are covered by private insurance compared to 15.6% at the state level. Additionally, only 12.5% of the population in Wake County does not have health insurance compared to 14.3% in the state. However, there are still over 12,000 people in Wake County with no insurance coverage (The North Carolina Health Planning Commission, 1995).

In October 1998 a children's health insurance program called "North Carolina Health Choice for Children" was initiated. The program will use federal and state funds to provide health insurance to the 71,000 children who currently do not have health insurance. These families have incomes that are too high to qualify for Medicaid, yet too low to afford private coverage (North Carolina Department of Health and Human Services, 1998).

MEDICAL CARE

Wendell has two physicians and three dentists to serve 3,946 residents ("Eye on Eastern Wake," 1998). Therefore, there are 0.5 physicians per 1,000 residents in Wendell as compared

to 2.1 physicians per 1,000 residents in Wake County. Of the physicians in Wake County, 43% are classified as primary care givers, which include family practice, general practice, internal medicine, pediatrics, and obstetrics/gynecology (University of North Carolina-Chapel Hill, Sheps Center for Health Services Research, 1997). Both physicians in Wendell are in family practice. One of the physicians also employs a nurse practitioner (Office of Dr. Ralph Brashear, personal communication, October 28, 1998).

The closest medical facility to Wendell is the Eastern Wake Hospital Skilled Nursing Facility, a division of Wake Med. This facility is located in Zebulon and has two divisions, nursing and an outpatient service clinic that serve mostly elderly patients. The nursing facility has 13 beds, which are used for orthopedic rehabilitation. The clinic also has a full lab for blood work as well as x-ray and electrocardiogram (EKG) capability. Specialists, including a urologist and orthopedist, are available periodically. However, for all other procedures Wendell residents must travel to Raleigh (Eastern Wake Hospital Nursing Facility, personal communication, October 27, 1998).

The lack of emergency care is a concern for residents of Wendell. The closest urgent care facility is a primary care physician's office located in Knightdale (Knightdale Primary Care, personal communication, November 2, 1998). For emergency care, residents must travel to one of Raleigh's three hospitals, Raleigh Community Hospital (230 beds), Rex Healthcare (394 beds), or Wake Medical Center (560 beds) (Research Triangle Regional Partnership Data File, 1998).

WAKE COUNTY HUMAN SERVICES (WCHS)

Wake County Human Services, based in Raleigh, is the government agency that provides services to the residents of Wake County. In June 1996 a law gave authorization for the creation

of one agency from six separate departments: Child Support, Health, Housing, Job Training, Mental Health, and Social Services. The Human Services Board, composed of 25 members, works directly with the Commissioners, County Manager, and Human Services Director (Wake County Human Services, 1998b).

In 1999 Wake County Human Services will break ground on the Eastern Wake Regional Center, to be located in Zebulon. The Center is being built in response to the recent growth of the area. A report, assessing the eastern region of Wake County, found that the increasing cost of living in Raleigh is forcing people with low incomes to move to the periphery of the county. This has increased the number of people who need to access services in towns such as Wendell, and its neighbors Knightdale and Zebulon. In order to assess the needs of the community, in fall 1998 WCHS held focus groups and conducted key informant interviews with community members and leaders in the three towns (Blue, 1998). The center will provide services currently available through WCHS, as well as services for mental health, substance abuse, and child abuse (L. Wardell, personal communication, November 3, 1998).

The closest area clinic, The Eastern Wake County Human Services Center, run by WCHS, is located approximately 2 miles from Wendell in Zebulon. Table 3.10 shows the number of clients, by service provided, who accessed care at the clinic in 1998. The center provides services primarily for women and children including immunizations, prenatal care, well child-care, WIC services, nutrition, and women's health services. In addition, the center provides testing and treatment for all sexually transmitted infections as well as HIV testing and counseling. Other follow-up services are available only in Raleigh (D. Jackson, personal communication, October 28, 1998). The majority of patients seen at the Eastern Wake Center have either Medicaid or are uninsured. The center employs a sliding scale index for fees. To

access other services provided by WCHS, such as migrant health services, dental services, mammograms, Medicaid and Medicare, Aid to Families with Dependent Children (AFDC), and Food Stamps, Wendell residents must travel to Raleigh.

Table 3.10

<u>Unduplicated Counts of Zebulon Clinic Clients by Month and Service for January to December 1998</u>

	Child	Health	Women's	Prenatal	STIs	WIC	Migrant	Flu	Total
	Health	Check	Health						
January	163	34	71	58	*	*	*	*	326
February	194	47	77	53	*	*	*	*	371
March	192	48	116	65	4	*	*	*	425
April	145	37	79	55	5	*	*	*	321
May	102	30	77	58	4	*	*	*	271
June	179	63	129	55	4	*	*	*	430
July	114	37	84	66	1	30	*	*	332
August	120	50	88	41	4	41	99	*	443
September	175	66	89	48	1	20	127	*	526
October	121	41	98	84	1	29	0	134	508
November	131	37	94	57	5	20	0	21	365
December	95	45	64		5	24	0	2	235
Total	1731	535	1066	640	34	164	226	157	4553

^{*} no visits

Source: D. Jackson, personal communication. (1999). Zebulon, NC: Zebulon Health Clinic.

MENTAL HEALTH AND SUBSTANCE ABUSE

The closest mental health and substance abuse service agency for Wendell residents is the Alcohol Treatment Center (ATC) in Raleigh. ATC is the division of WCHS, which provides treatment to all Wake County residents with mental health and/or substance abuse problems. An individual in need of these services must first be evaluated at Emergency Evaluation Services, which is part of ATC (R. Zelno, personal communication, November 24, 1998). The Emergency Evaluation Service is open year round and serves approximately 25 people per day: 40% for

substance abuse and 60% for mental illness (R. Nickel, personal communication, November 30, 1998).

Emergency mental health patients in need of inpatient services are referred to either Dorothea Dix Hospital or Holly Hill Charter. Emergency substance abuse cases may be admitted to the ATC, which has 34 inpatient beds for detoxification and subsequent treatment. Although the primary diagnosis for admittance to the ATC must be substance abuse, patients are also treated for secondary psychiatric problems. The ATC admits approximately 900 patients a year (R. Nickel, personal communication, November 30, 1998).

Non-emergency cases are referred to a physician's care or to one of the ATC satellite clinics. The closest satellite clinic to Wendell is in Raleigh. The ATC provides ongoing support groups and outpatient services for chemically dependent individuals and their family members (Wake County Human Services – ATC, 1998a). An intensive outpatient treatment program is held during business hours for those who do not need hospitalization, but still need assistance establishing sobriety (R. Zelno, personal communication, November 24, 1998). Holly Hill Charter provides an intensive outpatient treatment program (during business hours), the Chemical Dependency Intensive Outpatient Program (four nights a week) and individual therapy (Holly Hill Charter, personal communication, November 24, 1998). Dorothea Dix Hospital, a public psychiatric facility, offers outpatient service programs provided by WCHS (Dorothea Dix Hospital, personal communication, November 30, 1998). Although there are no Alcoholics Anonymous (AA) meetings in Wendell, residents can travel to the neighboring towns of Zebulon and Knightdale to attend meetings (A.A., personal communication, November 24, 1998).

ACCESS TO MEDICAL CARE

As mentioned earlier, residents must travel outside Wendell for many services. This problem is compounded by a lack of convenient transportation. Triangle Transit Authority (TTA) provides both a buspool and a vanpool service. There are two buspool routes from Wendell to Raleigh. However, they both leave before 7:00 a.m. and return after 5:00 p.m., compelling residents to spend the entire day in Raleigh. The cost is \$4.00 for a round trip ticket. The TTA vanpool route travels from Zebulon to downtown Raleigh. There are several drawbacks to this service. First, Wendell residents must get to Zebulon in order to use it. Second, the fare is \$35.90 per month. Lastly, the vanpool travels only once a day, leaving Zebulon at 7:30 a.m. and returning at 4:30 p.m. (Triangle Transit Authority Ridesharing, 1988). The lack of convenient public transportation from Wendell to Raleigh means that residents must look for alternative sources of transportation such as personal transport, or those provided by family and/or friends.

SERVICES FOR SENIORS

The Eastern Wake Senior Center and two residential communities for senior citizens, Robinwood Retirement Community and Rose Terrace, are located in Wendell. As discussed earlier, 456 people, or 16.26 % of the population, in Wendell are over age 65.

The Eastern Wake Senior Center is operated by the Council on Aging of Wake County (Wendell Planning Department, 1997). The Center was built as a result of a community fund raising effort, which continues today. The center offers two programs: the Total Life Center and the Senior Center. The Total Life Center serves adults over age 18 with mental or physical disabilities who live with their families or in group homes. It also provides daily activities and

meals for these individuals. The Total Life Center serves about 15 people a day and is open approximately 22 days a month (S. Bucci, personal communication, October 28, 1998).

Transportation for the Total Life Center program is provided by Wake County Coordinated Transportation (WCCT). Fees for the program are usually covered by the Community Alternative Program (CAP), Department of Social Services (DSS), private funds, or a small center respite fund (S. Bucci, personal communication, October 28, 1998).

Those involved with the Senior Center program are over age 65 and live independently. The Senior Center program serves nearly 55 people a day, and like the Total Life Center is open approximately 22 days a month (S. Bucci, personal communication, October 28, 1998). Services include health and wellness education, arts and crafts, and continuing education classes. All activities are free unless there is a project that requires special materials.

The Senior Center also serves as a nutrition center and manages the Meals on Wheels program for Zebulon and Wendell. Through the program, meals are delivered directly to participants' homes or are provided at the Senior Center. Seniors can utilize transportation provided by WCCT to access the nutrition program, and can partake in the day's activities (S. Landis, personal communication, October 30, 1998).

The Robinwood Retirement Community has 84 one-and two-bedroom apartments and serves disabled and handicapped persons age 62 and older. The facility provides services and activities such as a library, hairdresser, crafts, and social activities. Since Robinwood is not a nursing home, state regulations do not require physicians or nurses to be on staff (Krueger, 1998a). Therefore, most residents travel to Raleigh for medical services. In addition, Robinwood does not provide transportation for its residents (Robinwood Retirement Community, personal communication, October 21, 1998).

Rose Terrace Personal Care is a 100-bed, assisted living facility. The home offers personal care such as meals, bathing, and assistance with dressing and daily activities. Like Robinwood, Rose Terrace is not a nursing home so it does not have physicians or nurses on staff. However, it does provide residents with transportation to medical facilities (Rose Terrace Personal Care, personal communication, October 21 and November 5, 1998).

In October 1998 Rose Terrace was barred by the state from accepting new applicants. In early November 1998 the state threatened to revoke the facility's operating license because of violations of state regulations in health care, food service, and drug management (Jones, 1998a). Greenbriar Corporation, a Texas based firm, operated the Wendell home until November 1998, when its lease was sold to another corporation.

RECREATION

Wendell has one park facility, Wendell Park, which is located at the end of West Third Street. The park has 34 acres which house tennis courts, softball and baseballs fields, picnic and playground areas, as well as a concession area. The town rents additional gymnasium space from Wendell Elementary School, East Wake High School, and Hephzibah Baptist Church, at a cost of approximately \$5,000 per fiscal year. Wendell also has two swimming pools and a golf course (Wendell Planning Department, 1997).

In October 1998 the Wendell Town Board approved preliminary plans for a new community center to be built in Wendell Park. The 18,000 square foot center will have a basketball court, three large activity rooms, a stage, a weight room, locker rooms, a kitchen, three offices for the Parks and Recreation staff, and a substation for the Wendell Police Department. Construction began in April 1999 and is scheduled to be completed by fall 1999. It is estimated the project will cost \$1 million (Height, 1998c).

ENVIRONMENTAL HEALTH

U.S. 64 Bypass

Rapid population growth, both in Wendell and Wake County, has affected the environment. In eastern Wake County, growth has led to increasingly heavy traffic on U.S. 64. In 1998 about 60,000 cars traveled the highway every day, fully 1/3 more than it was built to handle. Since 1980 the mayors of Wendell, Zebulon, and Knightdale have lobbied for the construction of an 11-mile Highway U.S. 64 Bypass. In September 1998 they came together to discuss the issue, agreeing that heavy traffic discouraged the growth of homes and businesses in the area. The construction holdup is the result of both delayed federal approval of the plan and lack of funding. Federal approval requires a study on the environmental impact of the U.S. 64 Bypass, which was completed in April 1998. It also requires a long-range transportation plan that projects transportation patterns in the area ahead 20 years, which has yet to be completed. The Capital Area Metropolitan Planning Organization estimates an update will be available in March 2000, with another to follow in May 2000. The projected cost of the bypass is \$231 million, an amount the North Carolina DOT officials say they do not have (Jones, 1998a).

State officials hope federal funds will cover 80% of the cost (Jones, 1998a). However, funding remains a problem. A transportation summit on October 7, 1998 revealed that funds originally designated for road widening and bypass projects have been diverted to other projects. Moneys from the Highway Trust Fund, established in 1989, have gone to assist in the purchase of the Century Center and to the Department of Crime Control and Public Safety for the North Carolina Highway Patrol (Colvard, 1998). To further hinder construction, the DOT decided to postpone right-of-way purchases until the year 2000, delaying construction until the year 2003 (Paik, 1998).

Community members are well aware that this delay will have a significant impact on the Wendell area and may contribute to eastern Wake County's slow growth in comparison to areas west of Raleigh. In their continuing effort, in March 1999, the Wendell Town Board passed a resolution requesting that the DOT speed up construction on the U.S. 64 Bypass. The towns of Zebulon and Knightdale have already approved similar resolutions. The resolution points out that the DOT has been planning to construct the bypass for 12 years, and that congestion on U.S. 64 is "unacceptable." Also noted in the resolution is the impact the U.S. 64 has on all of eastern North Carolina, not just eastern Wake County. The bypass is "essential for the continued economic vitality and further economic development of eastern North Carolina" (Height, 1999e).

Although these resolutions may not have an immediate impact, Wendell Mayor Lucius Jones said, "They can't hurt...you never know -every little bit helps" (Height, 1999e). The continued delay of the U.S. 64 Bypass will have an effect on the community's future.

Water and Sewer Services

Wendell and the other 11 municipalities in Wake County have taken a proactive stance in the development of their water and sewer services. In December 1996 the Wake County Water and Sewer Task Force was established to ensure that all of Wake County can extend water and sewer service in a manner that keeps pace with the region's growth. Four alternatives for a water and sewer master plan were presented to the Task Force board members by an independent consultant in November 1997. After review and the conducting of economic feasibility studies by each of the municipalities, the board voted on August 5, 1998 to adopt alternative D, which will provide one water and sewer utility system for the entire county. Alternative C, which splits Wake County into two "utility groups," east and west, was adopted as an interim measure

because it will take several years to a create a single utility (Wake County Planning Services, 1998).

Wendell's Town Manager, Ira Fuller, reiterated the importance of this issue to Wendell, stating that access to appropriate water and sewer facilities was the first item about which prospective businesses inquired. In order to offer better water and sewer service, in March 1999 the Town Board approved a grant proposal to apply for funds made available under federal and state safe water drinking acts. The funds, if received, will be used to construct additional water lines, repair the existing water treatment facility, and replace one of Wendell's elevated storage tanks (Height, 1999e).

Environmental Issues

In December 1997 Wake County combined several departments that deal with environmental health issues into the Environmental Services Department. The reason for the change was to be more effective in dealing with increasingly complex environmental issues (Wake County Government North Carolina, 1997). The new department is responsible for urban and rural water quality, storm water, environmental education and information, public facilities, solid waste, and air quality.

At the time this document was written, Wendell businesses did not face problems concerning environmental pollutants. Of the 16 businesses in Wendell registered with the Environmental Protection Agency (EPA), one is permitted to discharge into the water, two have toxin releases reported, eight handle hazardous waste, and five have air release reports. Two businesses, PhotoChemical Systems and Woolfolk Chemical Works, have archived Superfund reports, meaning they are inactive sites (United States Environmental Protection Agency, 1998).

CONCLUSION

In this examination of the factors that influence Wendell's health, several key issues stand out. Clearly, the economic growth that has occurred within the past decade in Wake County has contributed to the high standard of living in Wendell. This is reflected by the low morbidity, mortality, and unemployment rates for the community. However, the community faces some health concerns. The lack of easy access to physicians and medical care facilities remains a challenge. The building of the Eastern Wake County Regional Center is one response to these concerns, however, providers in Wendell and the surrounding area must continue to assess the health care situation in order to make improvements.

Another major issue facing the town is the construction of the U.S. 64 Bypass. This affects commuting time to work, access to services, and overall convenience for residents. These factors have a significant impact on the growth of the area and, consequently, the quality of life for all Wendell residents.

More insight into the health care needs of the residents of Wendell was gained by conducting interviews, which are described in the following chapters.

QUALITATIVE DATA COLLECTION

CHAPTER 4: THE COMMUNITY OF WENDELL

"You can go downtown and everyone says hello."
- Resident

A strong sense of community serves to enhance the quality of life for all residents of a town. During interviews with Wendell residents, people spoke very positively about the community. We asked them what it is like to live in Wendell, what the strengths of Wendell are, and what they would tell someone who was considering moving to Wendell. Clearly, there is agreement among residents and service providers about the friendliness, familiarity, and support that exists within the Wendell community. One resident reported, "Everyone knows everyone because the town is so small" and another said, "If you want to be part of a community and want to be involved and want to feel safe, this is the place to live."

One service provider stated, "There are three facets of the Wendell community-education, church and family." This focus on the church and the family is an important part of the cohesiveness of the community. Many residents reported that Wendell is "a great place to raise a family" and residents with children repeatedly praised the school system.

There are many churches located in Wendell; one resident reported, "There are more churches per capita in Wendell than other areas." Interviews revealed that the church is an integral part of life in Wendell and is a mechanism for individuals to become involved in their community. Additionally, community members said, "church leaders were the community leaders." Residents reported that "Church is the main way to get involved." For example, Hephzibah Baptist Church, one of the town's largest churches "is working with the city and other local churches to provide housing and food for families of participants in the Special Olympics." Some residents expressed their concern that churches were the dominant means for socialization in town stating that, "If you don't belong to a church, you don't have a lot."

Residents did not feel that the plethora of churches of varying denominations divided Wendell into separate communities. One resident stated that, "There is much collaboration among all of the churches in Wendell" which serves to benefit all members of the community. Several residents and service providers praised the work done by the Council of Churches, a collaboration among the different churches in the community. One member of the Council said, "The Council of Churches has been playing a role in bridging cultural gaps." Additionally, several community members lauded the work done by the Council:

The Council of Churches holds non-denominational services every fifth Sunday for all of the churches...the Council of Churches has worked with Habitat for Humanity to build four houses. The Food Pantry was opened through the Council of Churches...there is collaboration through several churches.

In addition to churches, numerous civic organizations and community programs were mentioned as integral parts of Wendell's community. These include the Women's Club, the Ladies' Auxiliary Group, the Lions and Rotary Clubs, two Garden Clubs and the Senior Center. Wendell's many organizations and clubs help community members become involved in civic affairs and assist residents in getting to know their neighbors.

Many residents and providers shared with us incidents in which the community worked together in times of need. Residents felt that this community support or "community sharing" was what they appreciated most about the town. As one community member stated, "The community trusts each other and looks out for each other." One resident said, "When someone dies, the town comes together to mourn," while someone else pointed out that "When there is a sickness everyone in the town pulls together." Residents spoke of local businesses and organizations assisting the community in times of crisis. Many community members spoke of how the community came together to provide relief for one another after Hurricane Fran in 1996, and expressed pride in this effort. One resident said "Several local industries donated supplies

and the auxiliary Fire Department fed 1,000 people per day." Additionally, residents appreciate that the community sponsors festivals which involve the whole town, such as the annual Gold Leaf Festival held in October. Residents believe these activities "pull people together" and that "they are well attended and well done."

Many residents described Wendell's downtown area as an asset and an integral part of the community. Several community members said that this is a place where people congregate and that "You can go downtown and everyone says hello." The recent renovations to the downtown have helped to "maintain its small town atmosphere," with which many residents were pleased. Small business owners told us that they know their customers well. "They come in and chat," one proprietor said of her customers. Many of the shops downtown are family-owned businesses and have been in Wendell for many years. One long time resident stated that this "speaks a lot for the community."

Several community members talked about the changing community makeup with so many new residents moving into the community. One service provider elaborated on why he thought so many people were moving to Wendell:

People are moving to Wendell by choice...there are other choices in Wake County. It's a clean, friendly, financially sound town. There are fair tax rates and a strong sense of community pride.

A community member stated that "People come because of family ties.... They know someone who lives here... good housing and jobs." Most residents stated that they felt the town welcomed outsiders and that newcomers had little trouble assimilating, although both residents and providers felt that there was "little interaction" between the Latino population and the rest of Wendell (See Chapter 12 - Latinos). Some residents were concerned about the population dynamics and young people moving away to bigger cities. One community member stated,

"People grow up and leave...young people are not encouraged to come back. It's a town for the very young and for the very old." While some residents talked about the changing population, others felt that things remain the same. One resident told us, "It's amazing how the number of people who have lived here have not moved away. There is a good number of people who have stayed here."

As Wendell's population and size continue to grow and change, the town's sense of community is challenged. Resident opinion on the effects of growth varies from those that do not seem to recognize change in the town as a whole to those that see a decline in community involvement. Long-time Wendell residents frequently stated in interviews that "The town has not changed a lot." One long time resident said, "It was all a big happy family- it still sort of is." Others felt that the small town sense of community is changing in Wendell. "You used to know your neighbors, now that's going to change." Some people described Wendell as "a bedroom community for commuters to Raleigh." Residents expressed their wish to have those newcomers who work in Raleigh become more involved:

We need to increase community participation in community events... help people to get to know their neighbors. There are suburbanites who want to escape and isolate themselves by not interacting with other people in the town.

In general, perspectives on community participation and involvement in town government varied. Some felt that community members were very involved with community issues. Many residents felt that their concerns about the town were heard. One person pointed out, "Individuals work with the town on projects to address issues." Indeed, our interviews revealed that there are many venues for residents to voice their opinions and to become active in town politics. These include the Wendell Community Coalition, the Town Council, and various committees such as the Economic Development Board, and the School Advisory Committee. In

contrast, one resident remarked, "People are not proactive in the community," and a service provider stated that it is difficult to get community members involved:

The Community Coalition has been difficult to do. There is a relatively low crime rate. When things are going well people don't want to do too much... we can't get people to the table.

Service providers expressed a desire to hear from community members who were not normally involved in the decision making process. All town officials felt that it would be to everyone's benefit if more segments of the community became involved.

Wendell residents and service providers are aware of the challenges they face as a result of growth and a changing population. They are also aware of the tradition of community support and involvement that is characteristic of Wendell. In general, residents are overwhelmingly pleased with their community. As one resident stated, "Wendell is an ideal community," and while it has challenges to face in the future, for many of its residents it will continue to be a great place to live.

CHAPTER 5: GROWTH

"Oh gosh, it's doubled in size!"

- Resident

North Carolina has experienced dramatic growth in the past few years. The amount of growth varies among the counties and towns within the state. According to some residents and town officials, the eastern part of Wake County is not growing as fast as the western portion of the county. It is, however, predicted to eventually catch up. As one service provider mentioned, "The growth came from Raleigh, spreading to Knightdale...and now Wendell." It is clear that Wendell has experienced substantial growth – though to a lesser degree than its neighboring towns. Few of the residents or service providers we interviewed hesitated to mention the growth that has come to Wendell.

The "most notable changes in Wendell have taken place in the building of subdivisions and new schools," according to several residents and providers (See Chapter 11 - Housing).

One service provider stated, "I think that we are going to grow more residentially. We are kind of off the beaten path – industry would probably be a little harder."

Another example of change evoked by growth can be seen in the police department, which has hired several new officers and established a K-9 unit. The fire department has also grown. Twenty years ago, they received approximately 25 calls per year; in 1998, it increased to 700. Other changes pertain to businesses. In the past, businesses were all local - "everyone who ran a business had a tie to Wendell." Many older family businesses are being taken over by the children of those families to uphold the town's strong tradition. Conversely, there are many new storeowners who are from out of town.

In 1996 Wendell ranked 9th in growth of the 12 county municipalities (North Carolina Office of State Planning, 1997). Wendell's slower growth rate may be due to citizens' differing

attitudes and to its location "off the beaten path." Based on information gathered during interviews with community members and service providers, it is apparent that there is varying opinion on growth in Wendell. Some people would like Wendell to grow more, specifically, to see new businesses and services available. Others would like for the town to retain its small town "village-like atmosphere," characteristic of few towns today. Several residents told us that the reason they originally moved to Wendell was because of its small town charm, and they hope it remains that way.

There is disagreement among those who want new industry in Wendell and those who do not. Some claim that the town should be more open to bringing in new business and industry for economic development. The fact that new industry would increase the town's tax base is the most common rationale for proposing such changes. Increasing industry in Wendell would result in lower taxes incurred by citizens as well as providing jobs, hence, "It could help on both sides." Only those who live within the city limits pay taxes to the town of Wendell. Some residents mentioned that many citizens chose to live outside the city limits due to the lower tax rate. According to a service provider, the current property tax is not sufficient to pay for yard waste and community services, and new businesses in the area would support these and other services.

Residents who approve of new industry would like to see companies that would be "positive" for Wendell, "not businesses of smoke and noise." One reason for bringing in new industry was to encourage local job development. "We have the people and resources here, why not use them?" was one resident's comment. These supporters often cited transportation issues as the reason for wanting more local stores and services (See Chapter 9 – Transportation).

Growth in Wendell has resulted in a change in the population composition. One longtime resident told us that he once knew everyone in town, but now he only knows about half the people he greets on the street. He said, "Years ago, the population was 1,600. Now the population is 3,700 to 3,800." "With all the growth, you don't know who is moving in," was another citizen's perspective. Town officials estimate a 5-6% population increase each year since the 1990 U.S. Census.

Many fear that Wendell will become part of the "urban sprawl" that is characteristic of other metropolitan areas. "It is amazing to me how much is heading this way," remarked one citizen. "[We] may have Raleigh coming out here," said another. Some mentioned that they did not foresee Wendell becoming another Knightdale with strip malls because, "Geographically we are unique – you have to go to us." The overwhelming growth of towns such as Cary and Knightdale has resulted in awareness and precautions for making changes in Wendell. In light of this, the view that there should be "controlled or managed growth" was emphasized. One citizen stated, "If it's going to grow, we need to prepare. We need to think of how we want to zone things, how we want to grow. We need to plan for it now."

Planning means anticipating the challenges that come with the expansion of a town.

Observing growth in nearby towns, specifically Garner, Knightdale and Zebulon, has provided Wendell administrators with time to prepare. The town administration is currently focusing on expanding the infrastructure for water and sewage services in order to accommodate new businesses. They received a grant and have applied for a low interest loan to handle this issue. Some predict the town will continue to grow at a faster pace because of the availability of land and the improved sewage system. A land use plan has also been developed by the Wendell Planning Department. As an additional response to the population growth, the town is building an indoor recreation facility with a \$250,000 state grant.

Furthermore, endeavors to promote Wendell as a location for business and a place to live include a \$50,000 advertising campaign, which began in January 1999. Advertisements are aired on both radio and television and include the town jingle, *That's Why There's Wendell* (See Appendix F).

Growth in all of Wake County's cities and towns is inevitable. As one service provider mentioned, "There is nothing you can do to stop it." The fact that Wendell residents and local officials are cognizant of this has helped them to monitor their town's growth to maintain its unique charm.

CHAPTER 6: SERVICES

"We have the basic needs here, but not the extras."

- Resident

An issue of importance to many Wendell residents was availability of services. During our interviews, we asked community members to talk about the services that were available to them in Wendell and those that were needed. This included medical, social, legal, and recreational services. Residents varied in their responses. Some felt that they really did not need any additional services in Wendell. As one community member stated, "You can pretty much find what you want downtown." However, most people felt that there were some services from which the town could benefit. One resident stated simply, "We have the basic needs here, but not the extras."

Many people pointed out that Wendell has many useful services. One community member remarked, "The town has a lot to offer- the most modern library, Senior Center and Wendell Park." Wendell has excellent services for a town its size including a Helping Hands Mission, Habitat-for-Humanity, as well as a Meals-on-Wheels program. Churches also provide services to their members and to the community at large. In Wendell, churches have sponsored English as a Second Language (ESL) classes, food services for those in need, and day care services. Many community residents also stated that they were pleased with Wendell's Fire Department, Police Department, and Volunteer Rescue Squad. Additionally, the city government, administration and employees were praised repeatedly. One resident mentioned that the city government "goes out of their way to be helpful."

The tremendous growth of Wendell has influenced the range of services available to residents. One community member stated, "There are lots of services that are now available that did not exist before. The town has grown in services because people demand more services."

Several residents talked about the great benefit that the new community center, which is under construction and expected to be completed by fall 1999, will be to the town. "We are looking forward to having this civic center. We can go there to talk about a problem," said one resident.

While many residents were content with what Wendell has to offer in terms of services, many brought up several unmet needs in the community. The need for more local medical and social services came up most frequently in interviews. As discussed in the health section of this document, Wendell offers a range of medical services including two family practice physicians, one nurse practitioner, and three dentists. When asked about the adequacy of medical services in Wendell, one community member said, "There are doctors here and in Zebulon as well as dentists, but people still have to go to Raleigh for major things like x-rays and certain doctors." Several interviewees mentioned specialists that they would like to have in Wendell including an obstetrician/gynecologist, a pediatrician, a physical therapist, a urologist, and a podiatrist.

Residents and providers also discussed the need to have a comprehensive medical facility in town. Several community members and providers talked about this issue at the community forum expressing a desire to further explore the possibility of a satellite clinic in Wendell supported by a large hospital, such as Duke University Medical Center (See Appendix H – Community Forum Report). As one community member pointed out, this is a pressing need because "Without good medical services, Wendell will lose out on people moving into the community."

Access to medical services was also a concern for both residents and providers. One service provider stated that she would like to see "extended hours for the elderly and young families, as well as transportation to medical services." (See Chapter 9 - Transportation). Residents and providers also expressed the need to have social services. It was stated that "There's nothing for substance abuse in Wendell" and that "There needs to be a mental health/social support group."

Community members spoke of other services that they would like to see in Wendell for which they now have to travel to Zebulon, Knightdale, and Raleigh to access. Some items on a 'wish list' includes a Target or Lowe's, a department store, more restaurants, live entertainment, a shoe store, Weight Watchers, and more day care facilities. Several residents mentioned that there was little for young people to do in Wendell. One person stated, "Young people need to head to Raleigh for entertainment."

Interestingly, some residents mentioned that they did not mind traveling to access some services, and some thought that this was actually convenient. One community member pointed out, "Raleigh is so close that people can go to Raleigh to get services." In fact, many residents said that they prefer to "maintain the small town atmosphere" of Wendell by keeping services such as movie theaters in neighboring towns.

With the population growing, many residents expressed the need to have more convenient local services. The town, however, struggles with the issue of maintaining its quiet atmosphere while still improving the quality of life of its residents. One resident pointed out that there are practical issues surrounding increasing services in the town stating, "It would be nice to have other services but the question is, can such a small town support such services?" These

issues will be of increasing importance as Wendell continues to expand economically and to grow in population over the next few years.

CHAPTER 7: TRAFFIC

"When we came here in the 1940's there was a narrow two lane road from here to Raleigh, and now [Highway] 64 has to be dealt with."

- Resident

The population growth has generated an increase in traffic flow in Wendell, as well as throughout Wake County. The main arterial streets of Wendell include Highway 97, Highway 64, Poole Road, and Selma Road. According to a traffic count conducted in 1995, Highway 64 (west of the Highway 97 intersection) and Wendell Boulevard (just west of the Buffalo Street intersection) have the largest average daily flow of traffic in the town with over 11,000 vehicles per day (Wendell Planning Department, 1997).

Subsequently, the issue of traffic was brought up numerous times during our interviews. People shared their views about the traffic situation and often suggested possible improvements. Some residents talked about the effects of increased traffic in Wendell. For example, "There is a lot more traffic downtown and sometimes it is difficult to find a parking space." Any change in traffic patterns makes a significant difference on the quiet streets of Wendell. One service provider mentioned that several residents have asked officials to decrease the speed in neighborhoods. Radar checks, however, have found that the majority of the time people are not speeding- "It may just seem like that in quiet neighborhoods." In addition to lowering the speed limit, some expressed the need to widen Wendell Boulevard as a solution to the traffic in town.

The main entry point into Wendell from Raleigh is via U.S. Highway 64. Many spoke about "how awful" traffic is on U.S. 64, which carries "more than twice the traffic that it was designed for." One resident told us, "[Traffic] in Wake County is a major problem - the 64 is the biggest problem." Another resident reiterated the drawback of the traffic situation. "The traffic is terrible. In order to get to anything you take [Highway] 64. You can get hung up at certain

times of the day." Another added that coming into Wendell was worse than going to Raleigh. Many residents expressed concern that the traffic is hurting growth in Wendell stating, "If we need anything, we need highways."

Residents vary in how they handle the traffic situation. One resident mentioned that he is quite capable of getting around by knowing all the back roads. He stated, "There are 100 ways to get everywhere." For the large number of citizens who commute to Raleigh and neighboring towns for work, however, dealing with traffic is a daily event. One resident described having to leave home around 6:30 a.m. and return before 4:00 p.m. to beat the traffic. Another commuter said, "Raleigh is a nightmare in the morning."

To help ease congestion along roads to and from Wendell, the North Carolina

Department of Transportation (DOT) is planning to build an 11-mile, six lane U.S. 64 Bypass.

The road will allow residents to bypass U.S. 64 in order to get to the heavily traveled Raleigh beltline (I-440). The proposed Bypass will run north around Knightdale and then towards East Wake County High School, which is just west of Wendell ("You Can Get From Here," 1997).

Residents talked about the benefits that the building of the Bypass will bring. One resident said, "There has been some talk of a bypass being built to cut off some of the traffic. It'll help...It will alleviate a lot of congestion."

Most of the discussion about the Bypass centered around the issue of its delayed construction which is due to lack of funding. This has been a major topic of discussion among eastern Wake County town officials in recent years (Colvard, 1998; Height, 1999e; Jones, 1998a; Paik, 1998) (See Chapter 3, Page 45 - Environmental Health). One resident stated succinctly, "The Bypass bypassed Wendell!"

Many residents expressed discontent concerning the reallocation of funds originally designated for improving roads in eastern Wake County. One community member stated, "Since we are in eastern Wake County, we don't get the attention that the rest of Wake County gets." One service provider said, "We need more east-west connections to Raleigh. We do not have our own funding at this time. We rely heavily on the Department of Transportation (DOT) or Development [for funding]." Another provider stated the following about the allocation of funding for the construction of new roads in Wake County:

Finances are not allocated properly. There needs to be a method to raise transportation funds, such as a gasoline tax or a toll road. License plate fees also have also come up as an alternative. DOT planned to build a connector road by Marshburn Road and the Mortex plant, but DOT dropped the plan because they didn't have the money to do it.

It is uncertain what the future holds in terms of traffic in and around Wendell. Residents do feel that the local government is working hard to address the situation. As one resident stated, "The Mayor is doing everything he can. We need four lane roads – this will bring in people and business."

CHAPTER 8: TRANSPORTATION

"Without a car you're stuck."

- Resident

The issue of transportation frequently appeared as one of the most pressing needs for Wendell residents. Most of the people living in Wendell are required to travel to neighboring towns for service provider appointments, jobs, and shopping.

Only limited transportation services are currently available. While there are vans that travel to Raleigh once a day, there is neither public transportation, nor a regular bus line to Knightdale or Zebulon, where many service providers have offices. Also, seniors who have appointments at Wake Med can utilize transportation funded by Medicaid provided by Social Services (See Chapter 3 – Health: Access to Medical Care).

Clearly, limited transportation has a wide range of impacts on residents. For example, one vocational guidance counselor mentioned that while there are jobs available for people, many are unable to take or keep their jobs since they have limited means of transportation.

Another provider's concern was that some people were limited as to which areas they were able to seek employment in due to inadequate transportation. She stated, "Without transportation you don't work, or you work at Mortex and the Cotton Exchange. We need good public transportation... to bring Raleigh to Wendell and vice versa."

Another impact is that residents report difficulty getting to their healthcare appointments, which are primarily in Raleigh. Also, community members were concerned that "elderly people usually do not like to drive into a big city like Raleigh." One resident mentioned, "You have got a lot of seniors who need to go to the store, [and to] the doctor, and they do not have the transportation to get there." Many Wendell elders utilize the Meals on Wheels program at the Senior Center. The local school bus transports many seniors to the Senior Center to take part in

the Meals on Wheels program. Consequently, the amount of time that some seniors can spend at the Center is restricted.

Public transportation is also needed is to help alleviate the heavy traffic between Wendell and Raleigh (See Chapter 8 - Traffic). As one resident stated, "Public transportation from here to Raleigh is a priority now more than ever." In general, residents felt that public transportation, if used frequently, could help to decrease some of the traffic congestion created by daily commuters.

Clearly the issue of transportation needs to be examined closely. The need for public transportation was mentioned frequently by residents and providers. Public transportation could both ease traffic congestion as well as facilitate commuting for those residents who are employed outside of Wendell. Also, because the senior population in Wendell is large and predicted to increase per the national trend, a transportation system to better accommodate their needs will have to become more of a priority for the town.

CHAPTER 9: SENIORS

"We respect, cherish, honor, and provide for our senior adults."
- Service provider

As mentioned in the community profile (Chapter 2), an examination of the population of Wendell indicates that those age 65 and older constitute almost 17% of the population (1990 U.S. Census). Seniors are very active in the Wendell community, serving on various town boards and committees. In town, there is a senior center as well as a retirement and an assisted living community for senior citizens. Several residents and service providers mentioned issues related to the senior population. Additionally, we spoke to several seniors in our interviews.

Many residents praised the services provided by the Eastern Wake Senior Center for seniors in the area. One resident told us that "The senior citizen center has been a good asset to the community." Another resident said, "I have a neighbor that goes to the Senior Center. She leaves the house at 9:30 a.m. and comes back at 1 p.m. That's her life and I am glad she is so happy." Activities offered at the Senior Center include a weekly dance, ceramics, arts and crafts classes and exercise facilities. Additionally, the Meals-on-Wheels program provides lunch for everyone there. Residents also told us that Wendell seniors participate in the Senior Games in Raleigh and that there is a dance group comprised largely of Wendell seniors.

Some seniors we spoke to expressed the need to have more programs available for seniors. One woman said, "I wish that there were more activities...more classes." Another senior told us that there were not many things for seniors to do besides going to the Center. Several seniors said that they would like Senior Center activities to last all day instead of ending in the early afternoon. Service providers also expressed concern about the need for more services for seniors. This included recreational services as well as health-related services. One town official said, "There is lots of care available for seniors on many levels. However, with the

expanding senior population, another facility may be needed." This may prove to be challenging for the town as the Eastern Wake Senior Center is not yet paid for and is running a pledge drive for donations. One suggestion for increasing senior citizen involvement made at the community forum was to have seniors assist with child care in the town.

Residents told us that many seniors in the community do not like to drive in traffic or are not physically able to drive. As a result, many have difficulty getting to health care appointments and/or running errands due to a lack of convenient public transportation. This situation puts a burden on family members and friends who must be relied upon for transportation.

While Wendell already has an impressive amount of facilities for its seniors, they may need to be expanded in the future. The active role of seniors in the community has proved beneficial to seniors because their needs have been heard and can be addressed in the coming years.

CHAPTER 10: HOUSING

"[We] have a lot of starter homes and older homes, but not much in the middle."
- Resident

As mentioned in previous chapters, the population of Wendell is growing steadily as many people have moved into the town over the past several years. Housing was mentioned repeatedly during our interviews and three main themes emerged. These themes include the abundance of starter homes, the lack of variety in housing, and the lack of rental housing.

Because housing is less expensive in Wendell than in other areas in Wake County, more people can afford to buy their own homes. One resident told us, "The average price of a home in Wendell is \$86,000, whereas in the rest of Wake County it is \$200,000." Most of the new homes that are built are starter homes. These are typically low cost, single-family houses designed for those "just starting out." One resident commented, "A lot of young people (ages 20-35) are moving here since homes are cheaper." Similarly, a service provider noted that, "Right now, most home sales are to younger couples and some retirees from the north."

One reason that Wendell may be attracting families that are just starting out is that these individuals can take advantage of the Rural Homebuyers Loan. This loan is available to first time homeowners who live in a rural area, such as Wendell, and does not require a down payment. This provides the opportunity for individuals to buy a home that they might not otherwise be able to afford. One resident emphasized this point by stating, "Single moms earning \$22,000 to \$27,000 can afford to buy homes."

Residents had varied opinions on the "abundance of starter homes" in the community.

For instance, some felt that starter homes "attract new young families" to the area. Another sentiment was that starter homes are "bad for [the] long term" and that "residents in these types

of houses are more transient." As one resident told us, "There's a rapid turnover with these types of homes and there needs to be more upscale homes for them [residents] to move into in order for them [residents] to stay in Wendell." One concern is that once starter home occupants are ready to move to larger homes, they will leave because the town cannot accommodate their needs. A community member expressed this concern by saying, "Where will they go in 10 years when their income increases? [They will] have to go out of Wendell."

Many residents and providers feel that Wendell does not offer a variety of housing options. Consequently, individuals looking to move into larger and more expensive homes will have to move outside of the town limits. As one service provider told us, "People want to see more upscale housing. I don't know why there aren't any nicer homes in Wendell." Another resident pointed out, "We need to have more homes ranging from \$120,000-\$150,000 so people in starter homes have some place to move into."

Another area pertinent to the issue of housing is rental property. Those people who choose to rent, may find it difficult to do so because there is a paucity of rental housing in the area. One resident explained the situation by saying:

Rental housing is very limited here. A lot of people are looking for rentals in this area and there is not much. They are no longer building new public housing. They want landlords to offer subsidized homes for rental.

We were told that currently in Wendell, "There are three subdivisions of subsidized housing" and that, "They all have long waiting lists."

It is apparent that there is a need in town for more housing options for residents.

Building more housing is one solution offered by residents. Many residents pointed out,
however, that it is difficult to "find lots in town to build on." At the community forum, Wendell
residents and service providers discussed some of these housing issues in detail. Many agreed

that the town needs to build "more upscale housing" because there is an "overload of starter homes." In addition, more apartments need to be made available to support residents of different socioeconomic levels (See Appendix H – Forum Small Group Notes).

CHAPTER 11: LATINOS

"The Latinos came in to stay on the farms and now they are bringing their families."
- Resident

Although not reflected in secondary data, the Latino population in Wake County and North Carolina has grown tremendously in the past ten years. Even though we did not speak directly with any Latinos living in Wendell, we found ample evidence of the population increase during our interviews with community members and service providers. Latino service providers emphasized that immigrants in Wendell are from Mexico, Peru, Dominican Republic, Guatemala, Honduras, Columbia, Costa Rica, and Nicaragua. Although some issues discussed in this document may be the same for all Latino immigrants, these nations have separate histories and cultures which should be taken into account when working with this population.

Although, as one resident stated, "[The Latino population is] not as great here...

compared to other small towns," signs of an increasing Latino population in Wendell cannot be ignored. Many residents mentioned the increased visibility of this population. As one community member stated, Latinos are "no longer invisible." Church leaders at St. Eugene's Catholic Church said that the majority of Latinos are Catholic, and that the church is a very important part of their community life. At St. Eugene's, the only Catholic church in Wendell, the Latino population is highly visible. The priest at St. Eugene's said there were 600 Latinos at the 1998 Mass conducted in Spanish for Our Lady of Guadeloupe, an important Mexican holy day. This is remarkable considering that in 1992 only ten Latinos attended the Spanish Christmas Mass. Visibility is also enhanced by the new stores in Wendell catering to Latinos. A grocery store and a restaurant, both Latino owned and operated, opened in 1997. One long time Wendell business owner commented, "Eight to ten years ago, you were just seeing young men

coming in for [work], but now we see men with their wives and children." This points to not only the increase in the Latino population, but to the changing face of this population.

Emergency and social service providers frequently mentioned the increase in the Latino population and what it means for Wendell in terms of future services. Those who provide emergency services, including fire, police, and rescue departments, have noticed a significant change in the Latino population over the past several years. As one provider told us, "In the past five to seven years there has been an increase in the number of calls [made by Latinos], ...especially lately." A health provider stated that as of spring 1999, about 5% of the facility's clients were Latino, "but this number is going up every day because the Latino community is growing..."

The most immediate issue identified for the integration of the Latino population is overcoming the language barrier. Residents and service providers, both those who do and do not work with Latinos, talked about problems caused by the lack of a common language. We were told that "business [owners] and farmers understood the need for Spanish" because they are usually the first who come in to contact with recently arrived immigrants. Language is also a critical issue for emergency services. One provider spoke of callers who "don't speak English well enough to effectively communicate what is wrong, which is imperative for fire and rescue calls." Another important issue affected by the language barrier is documentation. Many Latinos do not have birth certificates because of different documents, it is often difficulty to get them translated. Also, correspondence from banks, credit card agencies, the Department of Motor Vehicles, insurance companies, landlords, and others are all written in English. Latinos are challenged to find trusted interpreters to assist them. There are very few interpreters that are

available to serve a large area, which includes Wendell, Zebulon, and Knightdale, as well as Selma, Wilson, Rocky Mount, Smithfield, and Wake Forest. Often mail in English simply goes unanswered.

Both English and Spanish speaking providers and residents are working to find a way to overcome the language barrier. One business owner says that since she does not speak Spanish, she "uses sign language to communicate with Latino customers." The Wendell Police Department has several officers on staff who speak some Spanish, and in the summer of 1999 an officer will travel to Mexico for a six month Spanish language program. Additionally, there are other providers and business owners who are learning to speak Spanish, and social service agencies are hiring Spanish speaking staff. A service provider mentioned that she would like to take Spanish classes in order to understand and better assist Latinos, because her organization "aims to help all." Latinos are also taking the initiative to learn English through classes offered at Johnson County Community College and St. Eugene's Catholic Church.

Another important issue for Latinos is the effect learning English will have from generation to generation. Latino children often learn English before their parents since they attend English speaking schools, and because children have an easier time acquiring language skills. Although this helps children to assimilate, providers mentioned two unintended results of this process. First, children, often at very young ages, have to become interpreters for their parents, which may be problematic with regard to medical or other sensitive issues. Second, this may create a "cultural divide between parents and children as children learn English and assimilate."

Many service providers who work with Latinos point out the need to create a sense of community among Latinos in the Wendell area. The priest at St. Eugene's hopes his church will

be an integral part of this community. He said, "In most places [in the Latino community] the church is the center of the community." He also stated that there is a great need for community, which is "more than a job and a house, [people] need friends, community involvement, [and] support. [They] need a place to come and feel they are with people with the same problems, dreams and issues…" Often these problems lead to isolation and depression, which in turn can lead to more serious issues like alcohol abuse. Providers point to the need for the creation of "outlets, relaxation and recreation," stating, "[there's] nothing now because of the language barrier." Creating community has begun to happen, as one resident expressed, "The restaurant has helped foster a sense of community for them."

As the town's population continues to grow it is essential that community members and providers work to assist all of Wendell's new residents to become part of the larger community.

CONCLUSION

This profile was conducted to learn more about Wendell's assets, dynamics, and service needs. The purpose of the document is to provide members of the town of Wendell and Wake County Human Services with resources and information to pursue future endeavors they deem appropriate. It will be available to the public at the Wendell Public Library and at Town Hall.

This document includes both primary and secondary data on the town of Wendell. It was during primary data collection, conducted between October 1998 and April 1999, that we were able to get a more comprehensive understanding of the town's main strengths, interests and concerns. The issues presented in Chapters 5-12 are those identified as priorities by Wendell residents and service providers in the area. This information came directly from the community members and service providers that we interviewed.

It was evident from the beginning of our project that the people of Wendell identify personally with their community. This contributes to their strong sense of pride in their community. Churches, civic organizations, local government, as well as informal community networks collaborate in an effort to meet the changing needs of the Wendell residents and the community at large.

The sense of community and commitment to service will assist the town in meeting future challenges. Many of the challenges identified by residents are not reflected in the secondary data section. Growth in the area is the most overarching of these, and includes traffic, transportation and service provision.

Although some members of the community are eager for growth, others long to retain the advantages of small town living. Balancing these opinions and views will require a dedicated

partnership on the part of elected leaders and community members. Provisions to handle increased traffic have been underway for several years. Concerns with services, especially transportation are closely related. In order to compete successfully with other towns in the area, Wendell must provide, or be convenient to, the variety of services required to meet the needs of its residents. In the past, Wendell has lost stores to neighboring communities with larger populations; it was felt that these towns would better sustain these stores. Convenient, low cost transportation will also present a challenge. Those residents without a car are at a severe disadvantage because they must rely on family and friends to be able to access some very basic services, like health care.

Wendell's commitment to community and service will inform and guide its endeavors to confront, and hopefully, resolve these issues. It is clear from the community forum, that the residents of Wendell have good suggestions and strong opinions about how best to confront these issues. It will be important to ensure open communication between town leaders and community members so that everyone can be heard. Wendell's leaders have much information to share, and want to do so. They invite and want community member input. A concerted effort by officials to get information to community members, coupled with an effort by residents to search out this information, will promote discussion and ensure the inclusion of all ideas.

A sense of community pride and a commitment to caring for all of its residents makes Wendell unique. These attributes have served the town of Wendell since its founding, and should continue to do so in the future.

We would like to thank the residents of Wendell for their generosity and support during the past several months. This project would not have been possible without their cooperation.

Residents gave their time, insight, and personal stories in an effort to show us "their Wendell,"

for which we are grateful. Therefore, it is the community who contributed most to the development of this document. It has been a challenging and exciting year - one in which we have learned a great deal and will not soon forget. As they say, "That's why there's Wendell."

REFERENCES

- Blue, K. (1998). <u>An Assessment of the Needs of the Eastern Region of Wake County</u>. Unpublished raw data.
- Cecil G. Sheps Center for Health Services Research. (1997). <u>North Carolina Health Professions 1997 Data Book</u>. Chapel Hill, NC: The University of North Carolina.
- Cecil G. Sheps Center for Health Services Research. (1997). North Carolina Health Professionals Data System: 1996 County Profiles. [On-line]. Available: http://www.shepscenter.unc.edu/data/nchpds/county/wake.htm.
- [Central Cancer Data: 1997--North Carolina, Wake County, and Wendell]. [Electronic data tape]. (1998). Raleigh, NC: State Center for Health Statistics [Producer and Distributor].
- Colvard, K. (1998, October 22). Highway funds not used on roads. <u>Gold Leaf Farmer</u>, pp. A1, A2.
- Eastern North Carolina's Mortality Summary. (1997). <u>Eastern North Carolina Health Care Atlas</u>. Greenville, NC: East Carolina University Center for Health Services Research and Development.
- Employment Security Commission of North Carolina. (1998). <u>Unemployment Rates</u>. [On-line]. Available: http://www.esc.state.nc.us/news/CTYRates.html.
- <u>Healthy Carolinians 2000: The Report of the Governor's Task Force on Health Objectives</u> for the Year 2000. (1992). Carrboro, NC: The Task Force.
 - Height, D. (1998a, September 17). Wendell has place in history. Gold Leaf Farmer, p.1.
- Height, D. (1998b, September 24). \$30,000 grant to spruce up medians. <u>Gold Leaf Farmer</u>, p.3.
- Height, D. (1998c, October 15). Community center plans OK'd. Gold Leaf Farmer, pp. A1, A3.
- Height, D. (1998d, November 12). Wendell police add 4-legged friend. Gold Leaf Farmer, pp. A1, A3.
- Height, D. (1999e, April 1). U. S. bypass needed for 'unacceptable' traffic congestion. Gold Leaf Farmer, p3.
- High court affirms rule ending anonymous testing in North Carolina. (1997). <u>AIDS</u> <u>Policy Law, 12(8), 4-5.</u>

- Jones, S. (1998a, December 18). Rose Terrace nursing assistant accused of spanking Wendell resident. <u>The News and Observer</u>. [On-line]. Available: http://www.news-observer.com/plweb-cgi/fastweb.
- Jones, S. (1998b, September 9). Mayors say East Wake needs U.S. 64 Bypass now. <u>The News and Observer</u>. [On-line]. Available: http://www.news-observer.com/plweb-cgi/fastweb.
 - Joseph, M.W. (1978, October 12). Club began in 1917. Gold Leaf Farmer, p. 23.
- Krueger, B. (1998a, October 19). Rules fall behind a changing reality. <u>The News and Observer</u>, pp. A1, A8-A9.
- Krueger, B. (1998b, November 3). Troubled rest homes leases in new hands. <u>The News and Observer.</u> [On-line]. Available: http://www.news-observer.com/plweb-cgi/fastweb.
 - Ledford, B. (n.d.). History of Wendell. Unpublished manuscript.
- Luginbuhl, J. (1998, October 19). As ranks swell, Hispanics enjoy stronger voice. <u>The Daily Tar Heel</u>, pp. A1, A8.
- Medical services here are the next best thing to house calls. Eye on Eastern Wake County 1998, p. 17.
- [Morbidity Data: 1997--North Carolina, Wake County, and Wendell]. [Electronic data tape]. (1998). Raleigh, NC: State Center for Health Statistics [Producer and Distributor].
- [Mortality Data: 1997--North Carolina, Wake County, and Wendell]. [Electronic data tape]. (1998). Raleigh, NC: State Center for Health Statistics [Producer and Distributor].
- National Park Service. (1998). <u>The National Register of Historic Places</u>. [On-line]. Available: http://www.cr.nps.gov/nr/bulletins/welbroch.html.
- North Carolina Child Advocacy Institute. (1995). [On-line]. Available: http://www.ncchild.org.
- North Carolina Department of Health and Human Services. (1998). <u>NC Health Choice for Children</u>. [On-line]. Available: http://www.state.nc.us/DHR/DMA/cpcont/.
- North Carolina Department of Labor and Triangle Council of Government. (1995). Resident Labor Force and Employment Estimates. [On-line]. Available: http://www.tjcog.dst.nc.us/TJCOG/trilabor.htm.
- North Carolina Office of State Planning. (1997). Office of State Planning. [On-line]. Available: http://www.ospl.state.nc.us/.

North Carolina Public Schools Infoweb. (1998). <u>Dropout Rates for 94-95 through 96-97</u>. [On-line]. Available: http://www.dpi.state.nc.us.

Paik, A. (1998, November 6). Triangle projects set back years. <u>The News and Observer</u>. [On-line]. Available: http://search.news-observer.com/plweb-cgi/fastweb.

Research Triangle Regional Partnership Data File. (1998). <u>Major Health Care Facilities in the Research Triangle Region</u>. Raleigh Durham International Airport, NC.

School plays key role. (1978, October 12). Gold Leaf Farmer, pp.12-13.

State Bureau of Investigation. (1998). <u>Crime in NC 1997: Uniform Crime Report.</u> Raleigh, NC: Department of Justice.

State Center for Health Statistics. (1997). North Carolina vital statistics, (Volume 2-1996). Raleigh, NC: Department of Health and Human Services.

State Center for Health Statistics. (1998). NC Online Pocket Guide. [On-line]. Available: http://www.sch.state.nc.us/SCHS/profiles/profile_2.cfm/.

[STD Data: 1997 -North Carolina, Wake County, and Wendell]. [Electronic data tape]. (1998). Raleigh, NC: State Center for Health Statistics [Producer and Distributor].

Steuart, G.W. & Kark, S.L. (1962). <u>A practice of social medicine: A South African team's experiences in different African communities</u>. Edinburgh, London: Livingstone.

Testing for HIV. (1998). <u>Research favors anonymous HIV testing</u>. [On-line]. Available: http://hivpositive.com/f-TestingHIV/f-Testing/1-anonymity.html.

Triangle Transit Authority. (1998). <u>Ridesharing</u>. [On-line]. Available: http://www.tta.dst.nc.us/TTA/ttac.htm.

United Sates Bureau of the Census. (1990). <u>1990 U.S. Census Data</u>. [On-line]. Available: http://www.venus.census.gov/cdrom/lookup.

United States Environmental Protection Agency. (1998). <u>Envirofacts Warehouse</u>. [Online]. Available: http://www.epa.gov:9966/envirodcd/owa/multisys_web.report.

Wake County Government North Carolina. (1998). <u>News Archives for December 1997</u>. [On-line]. Available: http://www.co.wake.nc.us/admin/ whatsnew/archives/ december1997.htm.

Wake County 1995 Health Report Card. (1998). The North Carolina Health Planning Commission.

Wake County Human Services. (1998a). <u>Alcohol Treatment Center.</u> [On-line]. Available: http://www.co.wake.nc.us/humnserv/Alcohol/atc.htm#Top.

Wake County Human Services. (1998b). What is Human Services? [On-line]. Available: http://www.co.wake.nc.us/humnserv/wahtis.htm#top.

Wake County Planning Services. (1998). <u>Wake County Water and Sewer Task Force</u>. [On-line]. Available: http://www.co.wake.nc.us/planning/w&s.htm.

Wendell. (1997). Eye on Eastern Wake County 1998, pp. 50-61.

Wendell Chamber of Commerce. (1999). <u>About the Town.</u> [On-line]. Available: http://www.triangle.citysearch.com/E/V/RDUNC/1001/77/521.

Wendell historical beginnings. (October, 1974). Wendell Harvest Special, p.12.

Wendell Planning Department. (1997). <u>Wendell 2010: Comprehensive Development</u> Plan.

Wendell's economy has changed during 75 years. (1978, October 12). <u>Gold Leaf Farmer</u>, pp. 3-4.

You can get from here to there; Eastern Wake is easy to find. (1997). Eye on Eastern Wake County 1998, p.13.

APPENDIX A: MAPS

APPENDIX B: INTERVIEW GUIDES

APPENDIX B: INTERVIEW GUIDES

COMMUNITY MEMBER INTERVIEW GUIDE

What is it like to live in Wendell?

What do you like most about living here?

What clubs, organizations and/or community groups are you involved in?

What are the strengths of the community?

Who would you consider to be community leaders?

What do you feel are some of the issues/concerns in the community?

In what ways have community members come together to address those issues/concerns?

What services do community members access in Wendell?

What services do community members access outside of Wendell?

Where do most people in Wendell work?

Where do most people in Wendell shop?

What other types of services do you think the community could benefit from?

In what ways has Wendell changed in the past years?

What do you see for the future of Wendell?

If someone considered moving here, what would you tell him/her about the Wendell?

Can you suggest other people we could talk with?

PROVIDER INTERVIEW GUIDE

What types of services does your organization provide?

How often do community members use your services?

What barriers do you encounter in trying to reach community members?

How does your organization meet the cultural and language needs of the community?

What other organizations do you collaborate with (in Wendell and/or Wake County)?

What do you feel are the strengths of Wendell?

In your opinion, what areas in the community need improvement?

How would you suggest improvements be addressed?

How has Wendell changed in the past 5 years?

What do you see for the future of Wendell?

Can you think of any other community providers or community leaders who

you think we should speak to? Are there any documents that you think might be useful to us?

APPENDIX C: FACT SHEET

APPENDIX C: FACT SHEET FOR INTERVIEWEE

[DATE]

We are graduate students in the University of North Carolina - Chapel Hill, School of Public Health in the department of Health Behavior and Health Education. One of our degree requirements is to conduct a Community Diagnosis (CD), which is a type of research project. Through this project we will work with community members to gain an understanding of what life is like in Wendell. In addition, we are working closely with the Wendell youth team, four fellow students from our department who are focusing on the youth population in Wendell.

We will be conducting interviews with individuals who reside in the Wendell community. We will also be interviewing service providers for their input into the assets and needs of Wendell. After conducting these interviews, we will summarize our findings about the community and present them at a community forum.

Since you are familiar with the Wendell community, we would greatly appreciate your participation in our interviews. Participation in the interviews is entirely voluntary and you are not required to give your name or to reveal any personal information. You have the right to refuse to answer any question or stop the audio taping at any time. All information collected will remain confidential. This interview should last 30-40 minutes.

If you have questions or concerns about this project, or about your rights as a participant, please do not hesitate to contact the student contact, our project preceptor, or our faculty advisor. Our names and contact information are listed below. Feel free to call collect, if necessary.

Lechelle W. Wardell, MPH, Preceptor
Wake County Human Services, Raleigh NC

Sandra Quinn, Ph.D., Faculty Advisor

(919) 250-4554

UNC School of Public Health (919) 966-3915

Thank you for your time. We appreciate your participation!

Wendell Team: Ann Daniels (919) 933-1092, Melissa Klein (919) 960-2796, Margaret Ostafin (919) 968-8534, and Katherine Ornstein (919) 968-3789

Wendell Youth Team mentioned above: Nicole Angresano, Maria Hrywna, Anita Shankar and Carianne Tucker.

APPENDIX D: LIST OF INTERVIEW PARTICIPANTS

APPENDIX D: LIST OF INTERVIEW PARTICIPANTS

COMMUNITY MEMBERS

Female	Caucasian	20s
Female	Caucasian	20s
Female	Caucasian	30s
Female	Caucasian	30s
Female	Caucasian	40s
Female	Caucasian	40s
Female	African American	50s
Female	Caucasian	60s
Female	Caucasian	late 60s
Female	Caucasian	70s
Female	Caucasian	70s
Female	Caucasian	70s
Female	African American	late 70s
Male	Caucasian	late 30s
Male	Latino	early 40s
Male	African American	mid 40s
Male	Caucasian	40s
Male	Caucasian	late 50s
Male	Caucasian	early 70s
Male	Caucasian	70s
(13 female, 1	7 male) Tota	l=20

SERVICE PROVIDERS

Female	Caucasian	early 20s	
Female	Caucasian	30s	
Female	Caucasian	early 40s	
Female	Caucasian	40s	
Female	Caucasian	Caucasian late 40s	
Female	Caucasian	Caucasian 50s	
Female	Caucasian 60s		
Female	African America	n 60s	
Male	Latino	30s	
Male	Caucasian	early 30s	
Male	Caucasian	early 40s	
Male	Caucasian	40s	
Male	Caucasian	50s	
Male	Caucasian	50s	
Male	African America	n 50s	
Male	Caucasian	60s	
Male	Caucasian	60s	
Male	Caucasian	late 60s	
(8 female, 1	10 male) To	otal = 18	

APPENDIX E: LIST OF INTERVIEW CODES

APPENDIX D: LIST OF CODES

Code	Description	
BEDROOM	Bedroom community	
CC	Council of Churches	
COLLABORATE	Collaboration	
COMMUNITY	Community comments	
DOWNTOWN	Downtown	
FIRE	Comments about fire department	
FUT	Future of Wendell	
G	Growth	
GOVT	City government	
Н	Housing	
JOB	Jobs/employment	
LB	Latino-language barriers	
LG	Latino-growth	
LI	Latino-interactions/community	
LL	Latino-legal issues	
LSVCNEED	Latino-services needed	
MED	Medical services	
ORG	Organizations	
PERSONAL	Background/personal info	
POL	Police department	
POPG	Population growth	
POS	Positive comments	
REL	Religion	
RACE	Race, cultural diversity issues	
SAFE	Safety, crime, etc.	
SEN	Seniors	
SVCS	Services (excluding medical)	
TOWN	Definition of town	
TRAF	Traffic	
TRANS	Transportation	
UTIL	Utilities	

APPENDIX F: WENDELL JINGLE AND ADVERTISING ARTICLE

APPENDIX G: FORUM NEWSPAPER COVERAGE

APPENDIX H: FORUM REPORT AND AND MATERIALS FLIER PROGRAM SIGN IN SHEETS THEME SHEETS SMALL GROUP NOTES

APPENDIX H: COMMUNITY FORUM REPORT

A Forum Planning Committee, comprised of community members and service providers, was organized by the Community Diagnosis (CD) team to help plan the Forum. Five individuals, out of the nine invited, agreed to participate on the Committee. The Committee provided feedback on forum logistics, such as the time and location (March 16, 1999, 7:15 – 9:00 p.m. at the Wendell Senior Center), as well as advertising, agenda, activities, and name of the event, *What's on your mind Wendell?* UNC students held one meeting with Committee members and a subsequent meeting with four additional citizens who assisted with advertising via churches, civic organizations, and businesses. A reporter for the <u>Gold Leaf Farmer</u> attended the second meeting and wrote an article on the Forum.

Wake County Human Services provided pamphlets and display boards for a services table. The president of the Wendell Historical Society provided four enlarged photographs of Wendell from the early 1900's, which were displayed on a table. Wendell Town Hall provided large maps of the area, which were displayed on the walls. The walls were also decorated with 2-3 feet long posters of 'positive quotes' from Wendell residents during interviews. A local catering company donated food, beverages and floral decorations, and a new local bakery donated a "Celebrate Wendell" sheet cake. Four local businesses donated door prizes. A community member also provided a videotape of town advertisements and a cassette tape of the Wendell jingle, which were both played at the beginning of the event.

The Forum began with an introduction of team members and an overview of the evening's agenda. Next, the Senior Line dancers led by the Director of the Wendell Senior Center performed several dances. This was followed by a description of the Community Diagnosis purpose and process, as well as an overview of the team's activities in the community since September 1998. Next, a slide presentation with

secondary data and primary/qualitative data was shown. The main secondary data themes included population demographics by age, race, education, income, mortality, and crime in Wendell, Wake County and North Carolina. Color charts and graphs were used in the explanation of secondary data and comparisons were made between the town, county and state when possible. This was followed by a presentation of qualitative data, illustrated by interviewees' quotes. The themes presented were those that emerged as the most pertinent during interviews: community; general growth, population growth, and economic growth; housing; cultural diversity; services; a service 'wish list;' traffic; transportation; and the future.

Forum participants then divided into four small groups designated by color-coded nametags that were distributed at the beginning of the evening. Group members were instructed to select a facilitator and note taker, and were provided with topic sheets based on the qualitative data themes. This was followed by discussion of a theme (topic) decided by group consensus. Group members were instructed to identify specific challenges, propose possible solutions, and suggest subsequent action steps (see discussion guides in this appendix). The discussions lasted

approximately 25 minutes. The groups then came back together in the main meeting room and one representative from each group reported back to the larger group (see small group discussion notes).

The small group discussion provided a forum for discussion of issues selected by community members. Since these small groups were comprised of community members of varying ages, races, gender, and professions, it allowed for different perspectives in discussing issues and brainstorming solutions. The small groups also provided citizens with the opportunity to talk with people they may not know or see often.

After the group presentations, door prizes were awarded. The forum came to a close with team members thanking the Wendell community for its assistance and cooperation during the Community Diagnosis process.

Approximately 50 community members and service providers attended the forum.

Overall, both team members and those who attended were pleased with the event. It brought people together from a variety of backgrounds and perspectives. It also provided an opportunity to identify concerns, resources and assets of the Wendell community.



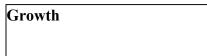
Cultural Diversity

"We need to get to know each other's culture, so that we can appreciate one another better."

- Introduce yourselves to the group.
- Designate a notetaker and a facilitator/spokesperson for the group.
- You will have about 25 minutes for discussion
- 1. In what ways has Wendell changed culturally in the last 5-10 years?
- 2. What attempts have been made to address the growing cultural diversity in Wendell? What have been the results?

- 3. Why are these cultural changes important issues to people living in and around Wendell?
- 4. Are there aspects of diversity that have not been addressed (i.e., language, religion, and lifestyle)? If so, what can be done to better address them?
- 5. What first steps should be taken to address the issues of cultural diversity?
- 6. Is there interest within the group to have further discussion concerning this issue after today? If so, when should the next meeting be and who will organize it?









"In terms of growth, there's nothing you can do to stop it."

- Introduce yourselves to the group.
- Designate a notetaker and a facilitator/spokesperson for the group.
- You will have about 25 minutes for discussion.
- 1. How has Wendell grown in the past 5-10 years, in terms of economics, industry, and population?
- 2. How has this growth affected the people of Wendell, and what changes has this brought to the town?
- 3. Are there any aspects of growth that have not had positive effects? If so, what are they?
- 4. How and in what capacity can community members vice their opinions concerning future growth in Wendell?
- 5. Is there interest within the group to further discuss this issue after today? If so, when should the next meeting be and who will organize it?



Housing

"There are too many starter homes, and we need more of a mix."

- Introduce yourselves to the group.
- Designate a notetaker and a facilitator/spokesperson for the group.
- You will have about 25 minutes for discussion.
- 1. What types of housing exist in Wendell (apartments, housing communities, starter homes, public housing, etc.)?
- 2. Is there adequate housing for residents of all socioeconomic levels?
- 3. How has the housing market changed in Wendell in the last 5-10 years?
- 4. What improvements could be made to housing in Wendell?
- 5. Who is responsible for, or able to, make these changes?
- 6. Is there interest within the group to further discuss this issue after today? If so, when should the next meeting be and who will organize it?



Services

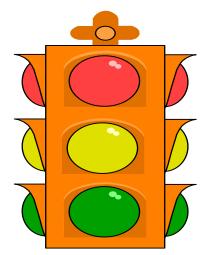


"We have the basic needs here, but not the extras."

- Introduce yourselves to the group.
- Designate a notetaker and a facilitator/spokesperson for the group.
- You will have about 25 minutes for discussion.
- 1. What are the health-services needed in Wendell?
- 2. What other services would be beneficial to Wendell?
- 3. Would you or someone you know use these services if they existed?
- 4. Of the areas mentioned, what do you think are top priorities for Wendell?
- 5. Is there interest within the group to further discuss this issue? If so, when should the next meeting be and who will organize it?

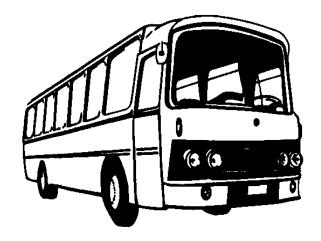


Traffic



"If we need anything, we need highways"

- Introduce yourselves to the group.
- Designate a notetaker and a facilitator/spokesperson for the group.
- You will have about 25 minutes for discussion.
- 1. Why is traffic an important issue to the people of Wendell?
- 2. What attempts have been made to address the traffic issue?
- 3. Who are the key people in the community who are involved?
- 4. How can community members get more involved?
- 5. Is there an interest within this group to have further discussions concerning this issue after today? If so, when should be next meeting be held, and who will organize it?



Transportation

"Transportation from here to Raleigh is a priority now more than ever"

- Introduce yourselves to the group.
- Designate a notetaker and a facilitator/spokesperson for the group.
- You will have about 25 minutes for discussion.
- 1. Why is transportation an important issue to people living in Wendell?
- 2. What attempts, if any, have been made to address the issue of transportation in Wendell?
- 3. What can be done to improve transportation to/from Wendell?
- 4. Who are the key people/organizations who should be involved in this effort?
- 5. What first steps can community members take to address this issue?
- 6. Is there interest within the group to further discuss this issue? If so, when should the next meeting be and who will organize it?

FORUM SMALL GROUP DISCUSSION NOTES

The following are notes taken by each of the groups during the small group discussion segment of the Wendell Forum. The forum was held on Tuesday, March 16 from 7:15-9:00 p.m. at the Eastern Wake Senior Center. Approximately 50 people attended the event.

These notes are comments that were made by community members and service providers to questions posed by the UNC CD team. The questions were made to elicit discussion about topics that were frequently mentioned in our community interviews. No changes in content have been made. The three issues that the groups chose to discuss are growth, housing, and services.

GROWTH

- 1. How has Wendell grown in the past 5-10 years, in terms of economics, industry, and population?
- 2. How has this growth affected the people of Wendell, and what changes has this brought to the town?
- 3. Are there any aspects of growth that have not had positive effects? If so, what are they?
- 4. How can community members voice their opinions concerning future growth in Wendell?
- Need industries coming into the area to help decrease taxes since so many people have fixed incomes.
- If we plan the growth instead of just letting it happen it will be better for the residents.
- Wendell already has a plan to place emphasis on where growth is to take place.
- We need a balance in growth between housing and industry and small business.
- There will be industrial growth in the near future. We need to choose the industries we want here. We need them for taxes.
- People come here to live because it is a nice community. Not crowded and impersonal. Good place to raise children/safe. Wendell has unique services. No empty store fronts.

Housing

- 1. What types of housing exist in Wendell (apartments, housing communities, starter homes, public housing, etc.)?
 - overload of starter homes, need more apartments

- 2. Is there adequate housing for residents of all socioeconomic levels?
 - not enough apartments
- 3. How has the housing market changed in Wendell in the last 5-10 years?
 - built more starter homes
 - bigger homes are outside the municipality because you get more for you money
- 4. What improvements could be made to housing in Wendell?
 - more upscale housing
- 5. Who is responsible for, or able to, make these changes?
 - need more cooperation from the Town, and more salesmanship

Comments:

• out of town people take advantage of our "town:" safe street, etc.

Comments on growth:

- need more land available for industry
- need to increase tax base
- annex more aggressively toward industry, offer more incentives to industries
- concern that businesses have left Wendell to go to other towns
- "Wendell can't stay the same."
- great potential on Wendell Blvd.
- need to improve roads
- more sewer and water, etc. (when this is developed where will people live?)

SERVICES

- 1. What are the health services needed in Wendell?
- 2. What other services would be beneficial to Wendell?
- 3. Would you or someone you know use these services if they existed?
- 4. Of the areas mentioned, what do you think are the top priorities for Wendell?

Services needed in the community: health, grocery, ABC Store

Health services needed:

- Doctors/Physicians
- Pharmacist
- Drug Store
- Podiatrist
- Medical facility to house these and others
- Need those oriented only to Wendell Not "Knightdale-Wendell-Zebulon" oriented
- A "Chain Store" is not always the answer

- Topic brought up at Economic Development Committee meeting as an upcoming issue that needs to be looked at.
- How to solve and who to contact?
- Build facility? "If you build it, will they come?"
- Contact East Carolina University NC State UNC Chapel Hill, acquire pledges for doctors to come.
- To address issues in the future, look at *Group of 100* in Zebulon, fund-raising group

Comments on (non-health) services:

- need more businesses such as restaurants
- need better highways
- Apartment/Condo complex

Others expressed an interest in having:

- A small appliance repair shop
- Sewing/fabric store
- Home delivery of food for the elderly
- Child care service that utilized elderly and retired people in the town

###