

MECKLENBURG COUNTY LATINO COMMUNITY NEEDS ASSESSMENT

**Prepared by
the UNC Charlotte Urban Institute**

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EXECUTIVE SUMMARY

During the past 15 years, Mecklenburg County has emerged on the national and international scene as a highly desirable place for Latino migrants. Long accustomed to native-born White and African-American newcomers, by 2004, Mecklenburg County was also home to 66,043 Latino residents, an 887 percent increase since 1990. Currently, Latinos are the fastest growing ethnic group in Mecklenburg County, comprising nearly 9 percent of the county's population.

In a community where a diversified service economy has propelled Charlotte-Mecklenburg to the status as one of the fastest growing urban areas in the United States; and Charlotte as one of the wealthiest cities in the nation, Latino newcomers play an important role in the economic sustainability of this community.

This report was undertaken for the purpose of assessing the community service needs of Mecklenburg County's Latino residents; and from this perspective, offers recommendations to public and private service providers. The research methodology for this study was multi-faceted and carried out over 11 months. Nearly 500 Mecklenburg County Latinos provided information and ideas, 231 service providing agencies and organizations participated; and local, state, and federal data sources were used in the analyses.

Key Contextual Findings

- Most Mecklenburg County Latinos are foreign born (68.2 percent) and not U.S. citizens (57.9 percent).
- Most Mecklenburg County Latinos are a young, working-aged population. Specifically, 61 percent were male and 33 percent were males aged 18–34 in 2000.
- Most Latinos in Mecklenburg County have less than a high school diploma and are employed in low average-wage jobs. Among persons +25 years, 48.7 percent have less than a high school education. Median Latino household income, as reported by the 2000 Census, was \$39,265, or 77.6 percent of the countywide median income.
- While the proportion of Latino males is large, more families are moving to Mecklenburg County. For example, 12.6 percent of Charlotte-Mecklenburg Schools (CMS) students are Latino. Latino student enrollment in CMS tripled between 2000–2005.
- Compared to other Mecklenburg County residents, Latinos suffer economic disadvantage at higher rates. For example, 22.5 percent of Hispanics live in poverty and 34.9 percent live in crowded conditions.

- The majority of Mecklenburg County Latino residents live in three suburban areas in Charlotte and Mecklenburg County. Charlotte’s Eastside has 14,783 Hispanics. This was 13 percent of the total Eastside area population in 2000. Southwest Charlotte is home to 9,674 Latinos or 14.2 percent of the total Southwest population. North Charlotte has 5,995 Latino residents representing 15.9 percent of the total population in the area.

Key Survey Findings

A bilingual telephone survey was undertaken to measure Latino community attitudes and perceptions surrounding life in Mecklenburg County and service provision. Among the important findings regarding community livability and need are:

- Latinos in Mecklenburg County are very satisfied with Mecklenburg County as a place to live
 - 50 percent “highly satisfied”
 - 27 percent “somewhat satisfied”
 - 9 percent “dissatisfied”
- Mecklenburg County Latinos are very satisfied with their neighborhoods
 - 49 percent “highly satisfied”
 - 24 percent “somewhat satisfied”
 - 17 percent “dissatisfied”
- Mecklenburg County Latinos are split on the issue of local discrimination
 - 35 percent “less discrimination than other places in the U.S.”
 - 37 percent “same amount of discrimination”
 - 20 percent “more discrimination”

Greatest Needs for Mecklenburg County’s Latino Residents

From the telephone survey and 3 focus groups with low income Hispanic residents, the research identified the most critical needs facing Mecklenburg County’s Latino community. The top 6 needs identified (in order of importance) are:

- Increased employment opportunities.
- Bilingual and culturally aware services.
- Affordable and accessible health care.
- Accessible English as a Second Language (ESL) classes and other educational opportunities.
- Better public transportation.
- Changes in immigration laws and residency status.

Greatest Challenges or Barriers Facing Mecklenburg County's Latinos

When Latinos responded to questions about the difficulties or challenges of living in Mecklenburg County, a variety of individually-centered and group-oriented issues were offered. Among these topics, the highest ranking challenges or barriers (in order of importance) are:

- Inadequate English language skills.
- Discrimination/anti-immigrant attitudes.
- Immigration, specially undocumented status.
- Lack of education/literacy.
- Lack of Spanish language service providers.
- Cost and access to healthcare services.
- Well paying jobs.
- Access to transportation and transportation coverage.

Greatest Challenges or Barriers: The Service Provider Perspective

In addition to querying Latinos about the difficulties surrounding service provision, public and private service providers in Mecklenburg County were asked about the challenges or barriers that they encountered. This information was collected via a mailed survey questionnaire and also through key informant interviews with leaders from a sample of service organizations.

Broadly, the major difficulties facing service providers seeking to assist Latino clients fall into 7 main categories. Not listed in rank order, they are:

- Language and cultural awareness barriers among staff and volunteers.
- Ineffective dissemination of information about service provision and the proper use of services.
- Inadequate funding to meet the growing need for services.
- Accessibility. A spatial mismatch exists between where services are available and where people live.
- Diversity within the Latino community creates special challenges. Differences in class, language, and national origin among Mecklenburg County's Latinos mean that a simple solution for serving all clients does not always work most effectively.
- Mecklenburg County's Latino population is changing rapidly. New demographic trends, such as family reunification; higher than average birth rates; and greater direct migration from foreign countries (as opposed to via another U.S. gateway),

translate into different types of service needs. For service providers, these changes are sometimes unexpected and necessitate redefining missions and programs.

- **Coordination.** There is a need for better communication between service providers to avoid duplication and to insure better deployment of resources to meet service gaps.

Based upon the survey findings and key informant interviews, the following recommendations are reported.

- Expand language-training opportunities for both service providers and immigrants themselves.
- Increase cultural competency training for service providers that takes into account the diversity of the Latino community.
- Implement systematic follow-up and monitoring of outreach initiatives (Is information received? Is it understood? Is it acted upon?).
- Design better coordination and communication between service providers to minimize overlap and competition.
- Bring service delivery to the community. Successful outreach includes physically going into the Latino community to service clients in their places of residence (neighborhoods, apartment complexes); worship (faith institutions); or education (schools).

Spatial Mismatch

One key measure of service provision is accessibility. Simply stated, are the locations of service providers positioned so that clients, especially low-income users, are able to use the service? If potential users are unable to get to a service point because of distance, cost, or time, then a “spatial mismatch” exists.

A spatial mismatch analysis was carried out around 231 public and private service organizations and the 3 main Hispanic residential districts in Mecklenburg County. This analysis found that:

- Center City Charlotte has the greatest concentration of Latino-oriented services in Mecklenburg County, yet that area has few Hispanic residents. While the configuration of local roads and highways, and the availability of Charlotte Area Transit System (CATS) service to Center City, does make service provision in this area accessible to suburban residents, transit cost and travel time, especially from outlying residential areas, discourages utilization.

- Latinos living in Eastside Charlotte are best served in terms of all categories of public and non-governmental services. CATS transit coverage further enhances service accessibility to this area.
- Among Latino residential areas, North Charlotte is the least provisioned with service options.
- The most outlying suburban areas in all three Hispanic residential clusters are consistently underserved. CATS coverage is absent or marginal.

Summary Study Recommendations

As Mecklenburg County moves toward the Vision 2015 goal of “celebrating diversity and promoting equality of opportunity for all,” recognizing and supporting the growing Latino community are critical steps. In this regard, efforts to meet the community service needs of this population are integral to acceptance and receptivity. Accordingly, this study recommends the following actions.

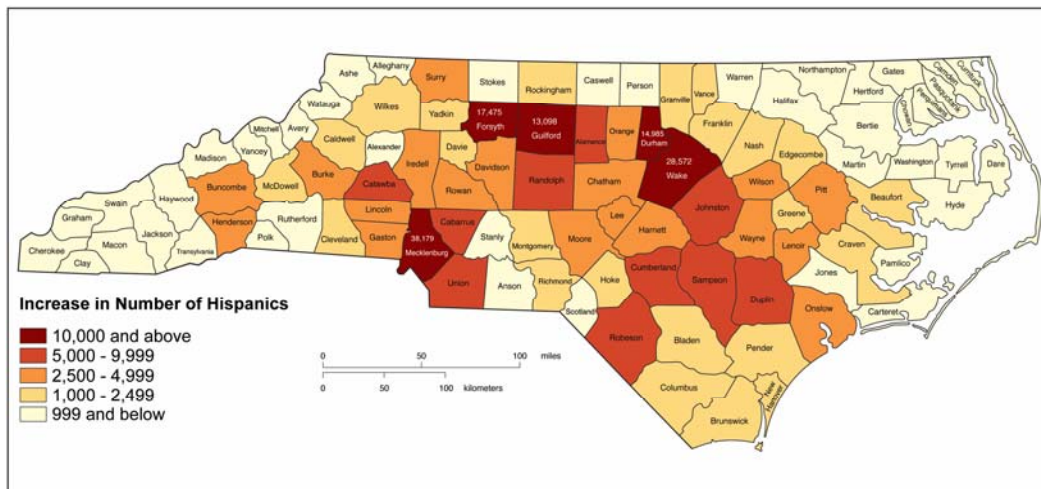
- Service providers should invest in personnel and training that increases Spanish fluency and cultural competency within their agencies.
- Adult language and literacy programming for Mecklenburg County Latinos are critical service provision needs and should be expanded.
- Location of public services should be positioned to increase accessibility for Mecklenburg County Latinos.
- Public information strategies to inform, educate and help integrate Mecklenburg County Latinos need upgrading and inter-organizational coordination. Dissemination strategies need to be evaluated regularly to assure that information is reaching target audiences.
- More low cost healthcare alternatives need to be provided and made accessible to the Latino community. Healthcare initiatives should also focus on providing a continuum of care.
- Public and private service providers need to coordinate and collaborate to better address service needs, funding shortages and avoid overlap and competition between service initiatives.
- Strategic planning to prepare for on-going demographic changes in Mecklenburg County’s Latino community needs to occur now.

I. INTRODUCTION AND METHODOLOGY

In 2005, the Latin American Coalition, Charlotte’s largest non-profit Latino-focused service and advocacy organization, approached the James S. and John L. Knight Foundation about funding a Latino Community Needs Assessment for Mecklenburg County¹. According to Census-based statistics, the Latino population in Mecklenburg County had risen from less than 6,000 in 1990 to 44,871 in 2000 to more than 66,000 in 2005 (Figure 1). In its day-to-day service and advocacy work, the Coalition struggled to meet the needs of this burgeoning and transitioning population. While agency staff possessed anecdotal information about the needs of the community they served, a systematic study had never been undertaken to research and prioritize these needs. Furthermore, the Coalition recognized the pressing need to identify and evaluate pre-existing service structures and give consideration to how future service provision—both theirs and across the city more broadly—could better meet the needs of the County’s Latino community as it continues to grow and transition.

Aware that their role as a community service-based organization did not provide the resources or research expertise necessary to undertake a comprehensive needs assessment, the Latin American Coalition partnered with the UNC Charlotte Urban Institute to develop a research plan and execute the study and assessment. Subsequently, the Institute put together a research team that included Jana Harrison, Senior Associate Director, Christian Friend, Director of the Institute’s Community Research and Services division and Dr. Owen Furuseth and Dr. Heather Smith, professors of geography who have conducted previous research on immigration and settlement patterns in Mecklenburg County and elsewhere.

Figure 1. Statewide Increase in Hispanic Population, 1990–2000



Source: U.S. Census Bureau, Census of Population 2000; North Carolina Atlas Revisited, <http://www.ncatlasrevisited.org/homefrm.html>.

¹ While the U.S. Census of Population and other government sources use the identifier Hispanic for persons of Latin American ancestry, the term Latino is the preferred descriptor among persons in this community. In this report, we use these terms interchangeably.

The James S. and John L. Knight Foundation generously agreed to provide the funding for this project. Both the Latin American Coalition and UNC Charlotte are grateful for this support. As the following pages detail, the project utilized a multi-layered and mixed method research approach to answer the questions posed by the Coalition about the needs of Mecklenburg's Latino community and about the adequacy of current and future service provision to meet those needs.

When the project began in the Fall of 2005, the impact of Mecklenburg County's burgeoning Latino in-migration was emerging as a growing public policy issue.² The debate around the costs and benefits associated with migrant settlement in the city, particularly undocumented immigration, has been amplified over the course of this project. Questions around the economic benefits provided by undocumented workers versus the costs associated with undocumented immigration have resonated at the national, state, and local levels. Clearly, however, the costs of services associated with undocumented and other immigrants are most visible at the local scale and fall disproportionately on local governments and their constituencies. For example, non-professional or day-labor service industries, where many Latinos find employment, do not generally provide health insurance. So when healthcare is necessary, the high costs often exceed the ability to pay. In turn, this has implications for both the worker, who may forgo treatment altogether, and publicly-funded health care providers. Similarly, research shows that most children of Hispanic parents in the U.S. attend public schools. As a result, public school systems struggle to meet the linguistic, acculturation and academic needs of children that may not have had early childhood development opportunities. In North Carolina, public sector healthcare and education costs are born largely by the County government and as a consequence, by County taxpayers.

Across the U.S., rhetoric advocating local policies seeking to limit access to public benefits for undocumented residents is increasingly common. This discourse is popular because it appeals to the American sense of fair play and respect for the law. However, in practice, such policies are unlikely to affect long term international migration and settlement patterns. There is little empirical evidence to support the supposition that access to public benefits attracts Latinos to a state or locale. In fact, despite operating one of the weakest state-funded public benefit programs for immigrants, over the last decade and a half, North Carolina ranked second in the nation as having the fastest growing Hispanic population. Most researchers agree that cities and metro areas absorbing high rates of new Latino migrants, like Mecklenburg County, are communities with strong economies, good job markets and low housing costs. These areas are also magnets for non-Latino domestic immigrants. In other words, what attracts Latino immigrants—documented or undocumented—to cities like Charlotte are precisely the same conditions and opportunities that draw migrants coming from other U.S. destinations and other global regions. There is also evidence that a mutually reinforcing relationship exists between cities with expanding service-based economies and growing immigrant populations. Indeed, some argue that one cannot exist without the other.

² While much of the report focuses on the immigrant population, which accounts for the majority of Latinos in Mecklenburg County, it is important to recognize that the Latino community is diverse in terms of place of birth, length of residency and citizenship.

While acknowledging the merits of arguments on both sides of the immigration debate, this study's recommendations are not framed in terms of entitlement, but rather in terms of existing circumstances. The study recognizes that the Latino community now comprises more than 10 percent of the County's population and is expected to grow. The well-being of Mecklenburg County is dependent on the well-being of all its constituent groups. The County cannot achieve its Vision 2015 goal of "celebrating diversity and promoting equality of opportunity for all," without seeking to address the needs of all racial and ethnic groups that reside within the County's jurisdiction.

Needs Assessment Methodology

The path to developing this report and the preparation of the study recommendations was multi-faceted and carried out over an 11-month period. The quantitative data that went into the analyses and findings were drawn from published federal, state, and local sources. In turn, this information was augmented and brought together using a variety of qualitative data collection methods, most of which were focused on gathering information and the impressions of community residents. At the center of this entire process were the experiences and opinions of Mecklenburg County's Hispanic community and the service providers and organizations that work to meet their needs.

The multiple layers of information were collected in stages such that each new data piece informed the issues and questions that subsequently were added to the research. The following listing details the data collection and analytical methods and tools used to prepare this study.

- *Latino Community Profile*
Using federal data sources, supplemented by local government information, a geographic and demographic profile of Mecklenburg County's Latino community was prepared. The statistical information contained in this database was geo-coded and converted into structures that could be used in other parts of the study.
- *Telephone Survey of Latinos*
A bi-lingual telephone survey targeting Latino residents of Charlotte and Mecklenburg County was carried out. The statistically valid sample measured community attitudes and perceptions surrounding local quality of life and community service provision. The survey findings were compiled, analyzed and then utilized as part of the larger study.
- *Focus Groups*
Working with the Latin American Coalition, the research team organized and carried out three focus groups with lower income Latino residents. Spanish language and culturally sensitive facilitators and scribes conducted the meetings. The focus group sessions examined Latino settlement-related needs, expectations, and attitudes regarding local quality of life. The focus group findings informed the research process.

- *Mail Survey of Service Providers*
Public agencies and private organizations offering services to the Latino community were sent a questionnaire designed to assess their service activities to the community and experiences working with Hispanics. Slightly more than 30 percent of the organizations responded. The survey findings were tabulated and analyzed. The information was incorporated into other research activities.
- *Compilation of Service Providers*
Researchers gathered a comprehensive listing of public and private service providers offering resources to the Hispanic community. Following a multi-stage vetting of the list, 231 organizations were identified that directly serve or have adjusted their practices to serve the city's growing Latino community. Organizationally, these services are broadly grouped into six categories. These are advocacy, economic development and personal finance, education, health, housing, and public safety.
- *Spatial Mismatch*
Using the Community Profile and Service Provider listing, the research team examined the local availability of services to Charlotte's Hispanic community. The key question framing these analyses was how well-positioned critical service facilities were for meeting the needs of Latinos across the city. The results of these analyses have been particularly useful for gauging the adequacy of critical community infrastructure.
- *Key Informant Interviews*
Over 40 respondents were interviewed and surveyed by the research team. The informants included leaders in the Latino community, public and private service providers, and organizational leaders within the community, business and political leaders, and media representatives. The interviews were structured, but flexible enough to permit open discussion. All discussions were tape-recorded and then transcribed and processed using content analysis methods. These data were incorporated into the larger research process.

II. LATINO IMMIGRATION AND SETTLEMENT

New Mecklenburg County Neighbors

For most of its history, Charlotte and Mecklenburg County's community relations have been framed by traditional southern bi-racial constructs: African-American and Anglo-American. Over the course of the 1990s, the county experienced a rapid and substantial influx of Latino migrants (Figure 2).

Figure 2. Percentage of Hispanic Residents in Mecklenburg County Census Tracts, 1990, 2000, 2005



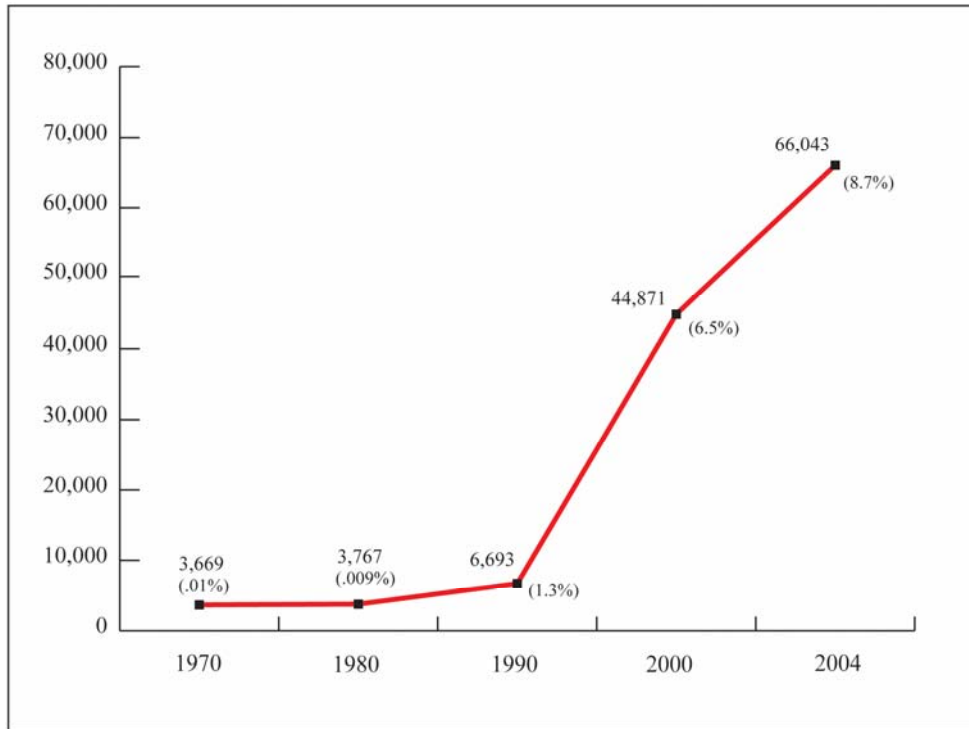
Source: U.S. Census Bureau, Census of Population, 1990–2000; Claritas 2005 Hispanic Population Estimates.

The absolute increase in Latinos in Charlotte-Mecklenburg was unprecedented for a community with little experience dealing with a large number of international migrants (Figure 3). Indeed, the Director of the Pew Hispanic Center, Roberto Suro, has observed that the speed of Charlotte's influx makes this experience unique in the United States³. Charlotte-Mecklenburg is ranked as America's fourth fastest growing 'Hispanic Hypergrowth' metro area. Hispanics represent the largest new ethnic group in Mecklenburg County during the last decade and comprise almost one-fourth of all new residents.

³ Suro, Roberto, "The New Latino South: Understanding Immigration in Context", keynote address at The Changing Face of the New South: Latinos in the Greater Charlotte Region Conference, UNC Charlotte, April 24, 2006.

The most recent U.S. Census estimate for Mecklenburg County’s Hispanic population is 66,043. However, Latino community leaders and key service providers support a real population approaching 100,000.

**Figure 3. Mecklenburg County’s Hispanic Population Change, 1970–2004
(Proportion of Total Population)**



Source: U.S. Census Bureau, Census of Population.

Why Mecklenburg County, Why Now?

The 2000 Census revealed that the American South had become the second largest home to Hispanics (after the Southwest) with 6.9 million residents living in 13 states and the District of Columbia. Within this regional context, North Carolina’s agricultural and processing industries, prospering urban economies, entrepreneurial spirit, and high quality of life made it an attractive immigrant destination. Charlotte’s allure was further enhanced by dependable wages, formal and informal employment recruitment, and receptive workplaces which attracted documented and undocumented workers from rural America, traditional U.S. immigrant gateway cities, and Latin America.

Indeed, Charlotte’s service-oriented economy has been fueled and sustained by its new immigrants. In critical employment sectors, Latinos have filled thousands of lower paying jobs that undergird our economic competitiveness (Table 1). The estimated economic

impact of these workers on the Charlotte metropolitan economy is \$1.9 billion (2004), and includes 16,900 new jobs created by their economic activity⁴.

Table 1. Leading Occupations of Mecklenburg County’s Hispanic Population

Construction Workers-----	18,424
Carpenters -----	10,526
Janitors and Building Cleaners -----	7,577
Painters, Construction and Maintenance -----	5,752
Industrial Truck and Tractor Operators-----	5,750
Retail Salespersons-----	4,494
Pressers, Textiles, Garment and Related Materials -----	3,206
Maids and Housekeepers -----	2,689

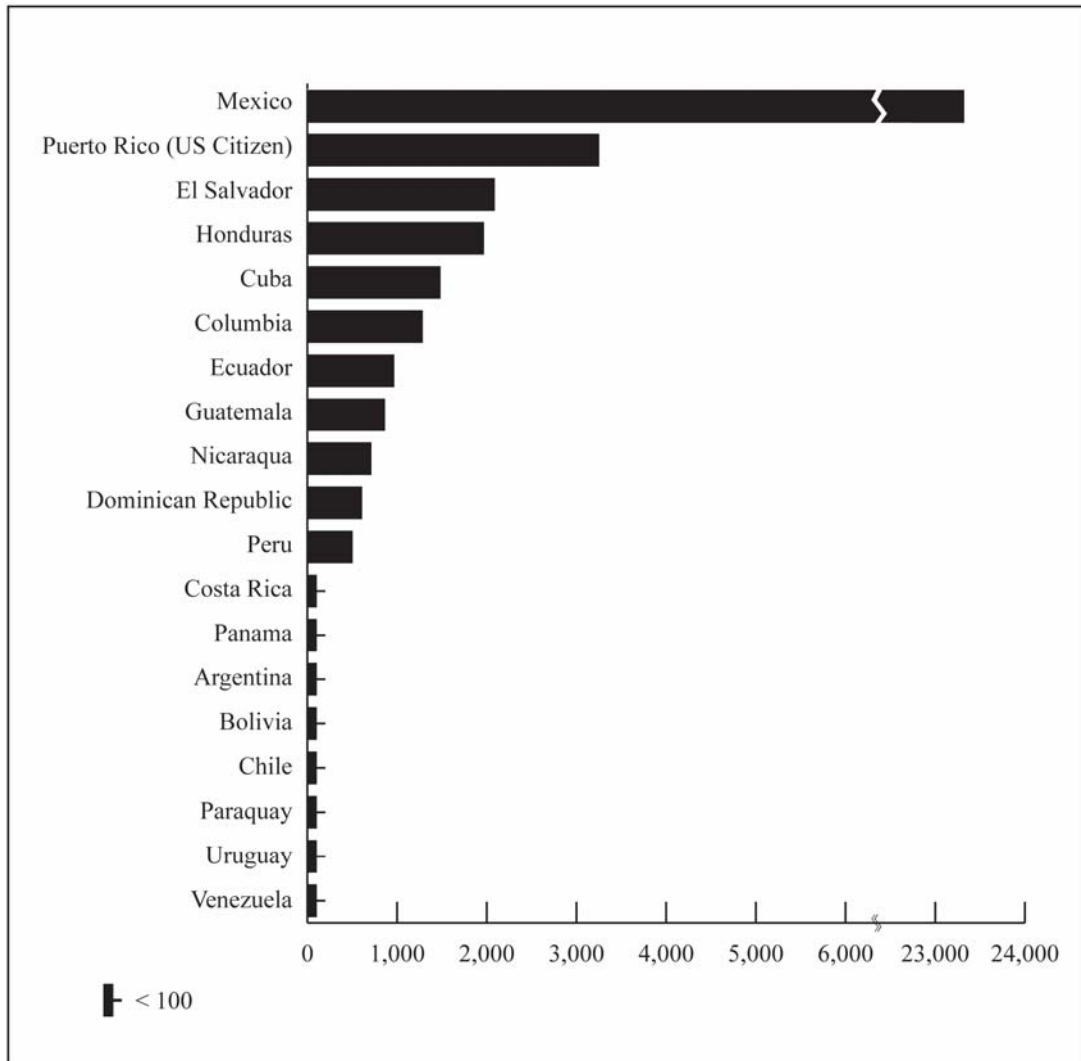
Source: U.S. Bureau of Labor Statistics, Current Population Survey, March 2005 Supplement.

Who are the New Mecklenburg County Neighborhoods?

Hispanics have long been a part of Mecklenburg County’s population, but were a small relatively homogenous group until the 1990s. During the last census decade, their economic status and demographic profile changed dramatically. The new Latino immigrant was far more likely to have native or indigenous ancestry and come from rural Mexico or Central America (Figure 4).

⁴ Kasarda, John and Johnson, James, “The Economic Impact of the Hispanic Population on the State of North Carolina,” Kenan-Flagler Business School, UNC Chapel Hill, Chapel Hill, NC, 2006.

Figure 4. National Origin of Mecklenburg County's Hispanic Population



Source: U.S. Census Bureau, Census of Population 2000, File 4 (SF4).

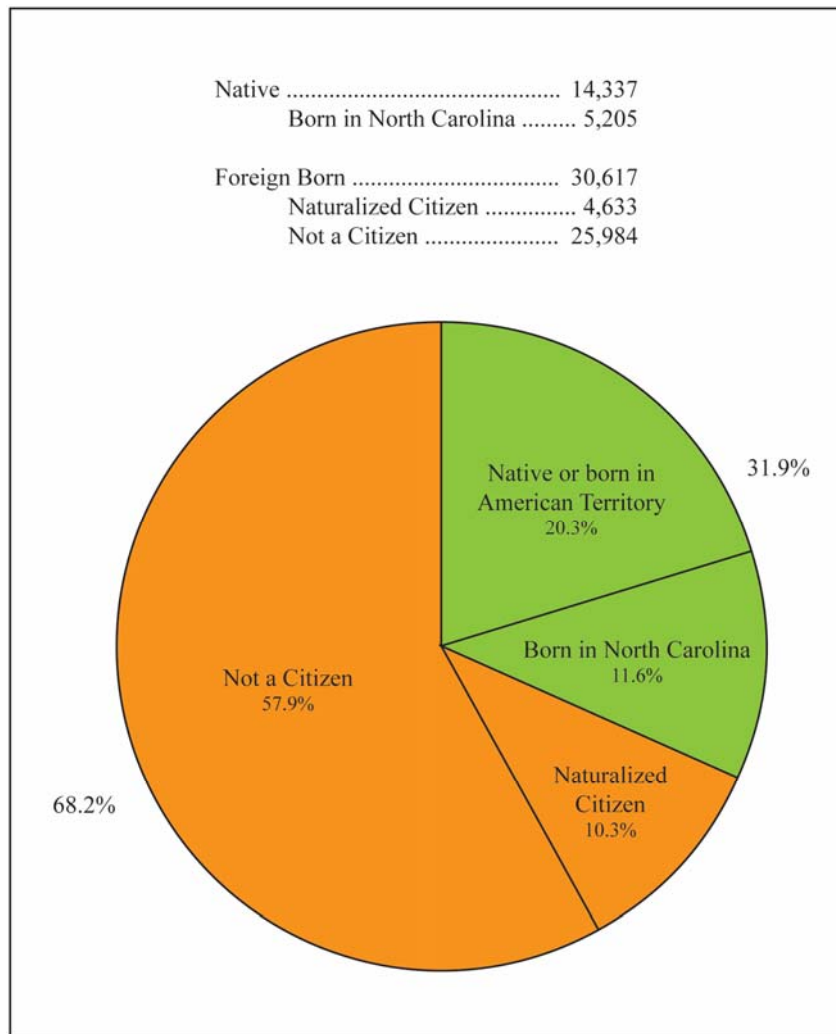
As Mecklenburg County's reputation as a desirable place to live has grown, Latinos are attracted from other regions, notably the Southwest, as well as other parts of the South. Among the nearly 12,800 U.S.-born Latinos in Mecklenburg County, 40.1 percent were born in North Carolina and 21.6 percent were born in other southern states (Figure 5).

Nonetheless, Charlotte-Mecklenburg's foreign born and non-citizen Latinos dominated the last decennial census count. In 2000, 68.2 percent were born outside the United States and among the non-natives, nearly 85 percent did not have U.S. citizenship.

Reflecting a conventional 'trailblazer' immigration model, the 2000 Census offered a narrow image of the typical Hispanic immigrant. This person was young and male. Slightly more than 61 percent of Latinos were men, and 53.3 percent of this group was aged 18 through 34.

The post-2000 picture of Mecklenburg County’s Latino migrants reflects a maturing immigration process with strong evidence of family unification and more balanced age structures. The Charlotte-Mecklenburg School (CMS) system, for example, reported a tripling in Latino student enrollment from 2000 to 2005. Currently, 12.57 percent of CMS students are Hispanic.

Figure 5. Citizenship Status of Mecklenburg County’s Latino Population

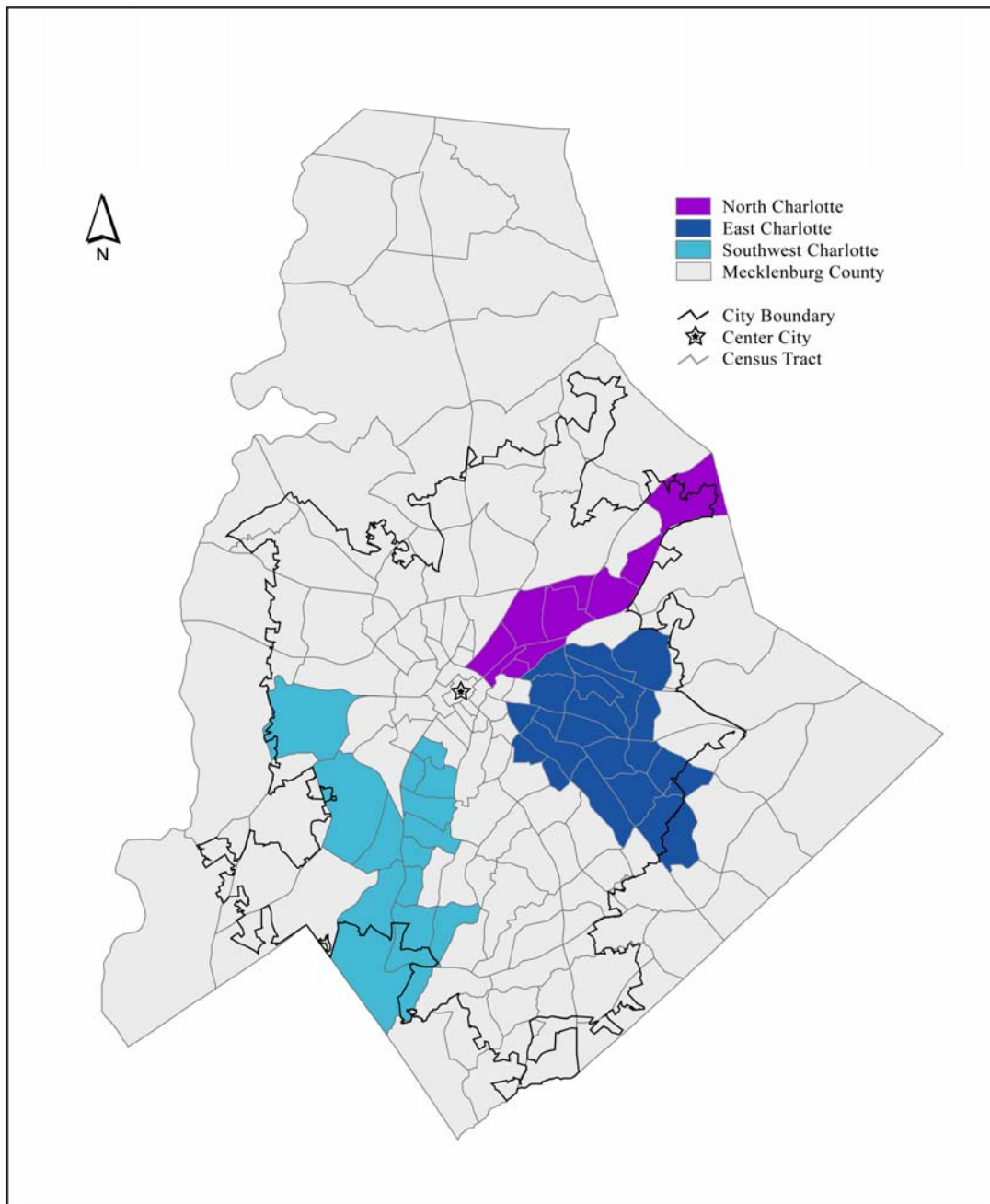


Source: U.S. Census Bureau, Census of Population 2000, File 3 (SF3).

Mecklenburg County’s Latino Clusters

Unlike earlier immigrants arriving in traditional gateway cities in the northeast and west coast, Mecklenburg County’s new Latino residents are bypassing central city neighborhoods and moving into Charlotte’s older ‘middle’ suburbs. Attracted by housing availability and value, plus easy access to work sites, the U.S. Census 2000 found that 68 percent of Mecklenburg County’s Hispanics reside in three suburban clusters (Figure 6).

Figure 6. Mecklenburg County Hispanic Settlement Clusters 2000⁵



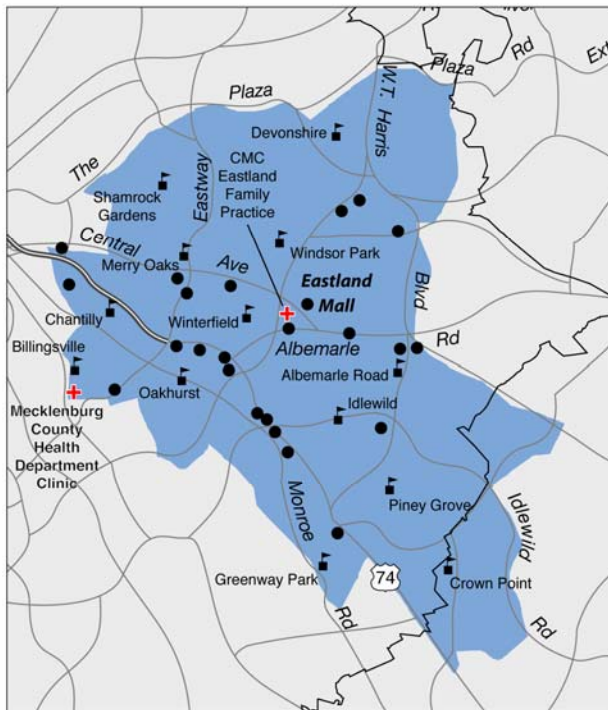
Source: U.S. Census Bureau, Census of Population 2000, Summary File 1 (SF1).

⁵ Clusters are comprised of contiguous Census tracts that have above average Latino representation and that expand out from a centralized core of Hispanic residential concentration. These clusters have been reviewed for accuracy by Latino community leaders.

Eastside

Charlotte’s Eastside is home to the largest number of Mecklenburg County’s Hispanic residents (Figure 7). Among Latino residents, it is predominantly Mexican (62 percent), but only 13 percent of the Eastside residents are Hispanics. Thriving Latino-oriented business and service sectors are anchored in small shopping districts lining roadways throughout the area. In turn, these attract Latinos and non-Latinos from across the city, other parts of Mecklenburg County, and the region. Growing Latino student enrollments in schools serving this area indicate an expanding family-structured Latino residential community in the Eastside.

Figure 7. Eastside Cluster



Latino Population	14,783
Proportion Latino	13.0%
Mexican Ancestry	62.4%
Central American Ancestry	11.8%
South American Ancestry	3.7%
Proportion Foreign-Born	73.1%
Proportion Not Citizen	64.5%
Proportion Male	76.0%
Householders	
Male/Female Distribution	64.6% / 35.4%
Speak English 'not well' or 'not at all'	52.1%

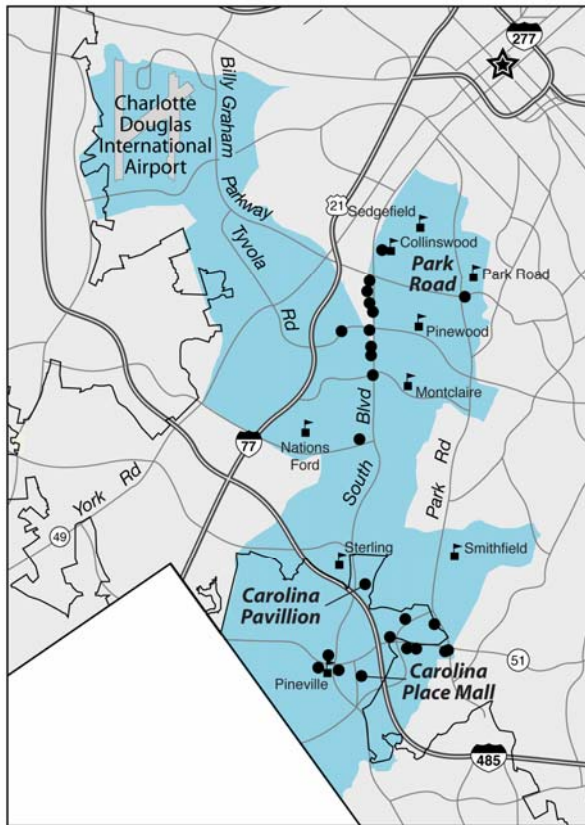
Source: U.S. Census Bureau, Census of Population 2000, Summary File 3 (SF3).

- CMS Elementary Schools
- + Public medical facilities
- Shopping centers

Southwest Charlotte

Southwest Charlotte is home to the county's second largest and oldest Latino residential district (Figure 8). It is the most diverse Hispanic community with large numbers of Central Americans and South Americans, along with Mexicans. Mirroring the Eastside developmental trajectory, Latino-oriented businesses and entrepreneurs serve a growing local and regional Latino and non-Latino market. The increasing Hispanic school enrollments in the Charlotte-Mecklenburg School campuses serving this area also offer evidence of growing family settlement in the Southwest.

Figure 8. Southwest Cluster



Latino Population	9,678
Proportion Latino	14.2%
Mexican Ancestry	48.7%
Central American Ancestry	18.9%
South American Ancestry	9.7%
Proportion Foreign-Born	72.8%
Proportion Not Citizen	61.5%
Proportion Male	74.9%
Householders	
Male/Female Distribution	62.2% / 37.8%
Speak English 'not well' or 'not at all'	43.5%

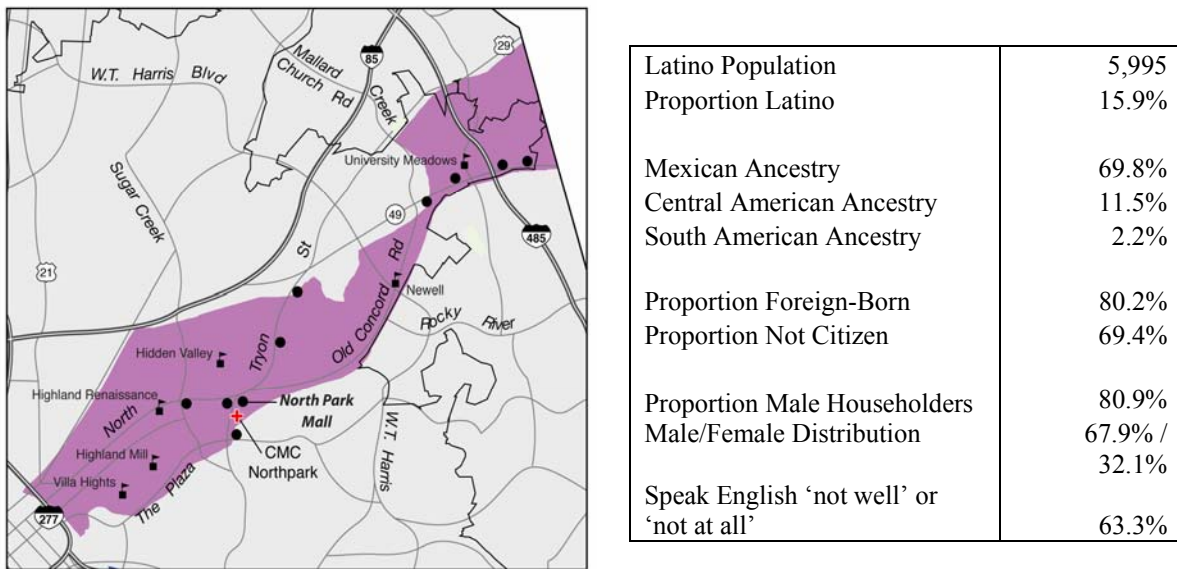
Source: U.S. Census Bureau, Census of Population 2000, Summary File 3 (SF3).

- CMS Elementary Schools
- ✚ Public medical facilities
- Shopping centers

North Charlotte

The Latino settlement cluster in North Charlotte is incipient and is the least stable immigrant community in the County (Figure 9). This smallest Latino residential district is overwhelmingly Mexican and is the most impoverished. It has the highest concentration of newly arrived, international immigrants. Family-structured households are less in evidence. Tensions between long time African-American residents, who are a majority of the population in the North Charlotte cluster, and their new Latino neighbors are on the rise. Immigrant-centered crime and victimization, as well as other indicators of social distress, are increasing in the North Charlotte immigrant community.

Figure 9. North Charlotte Cluster



Source: U.S. Census Bureau, Census of Population 2000, Summary File 3 (SF3).

- CMS Elementary Schools
- + Public medical facilities
- Shopping centers

Latino Well-Being

Charlotte-Mecklenburg is an affluent community. Indeed, Charlotte ranks sixth among America’s largest 100 cities in terms of the proportion of high income households.⁶ Slightly more than 25 percent of Charlotte’s households earn over \$79,356 annually. During the last two decades of the twentieth century, Charlotte’s high income population shift accelerated. It was the fourth fastest growing large American city in terms of affluent residents.

Latino residents have helped to build and sustain the success of Charlotte and Mecklenburg County’s prosperous service-oriented economy. But, as a group, they occupy the lowest rungs of the economic ladder (Table 2). Many Latinos in this community live on the economic margins, and receive few of the economic benefits that they have helped to create.

Table 2. Indices of Latino Economic Well-Being

Median Household Income, 1999 Dollars (Percentage of Countywide Median)	\$39,265 77.6%
Latinos Living in Poverty	22.5%
Latino Children Living in Poverty	24.6%
Latino Home Ownership Rate	25.7%
Latinos Experiencing Housing Stress ⁷	
- renters	35.4%
- owners	31.0%
Latino Households Living in Crowded Conditions	34.9%
Latino Households Without a Motor Vehicle	12.5%

Source: U.S. Census Bureau, Census of Population 2000, Summary File 3 (SF3).

This portrait of Mecklenburg County’s Latino community offers insight into the social, demographic, and economic characteristics of this population. Whether they have moved to this county from another state or from a foreign country, Hispanics face the dual challenge of navigating a new environment and finding their place within it. This process is made even more difficult by the language, educational, and cultural differences between

⁶ Berube, Alan and Tiffany, Thacher, “The Shape of the Curve: Household Income Distribution in U.S. Cities, 1979-1999,” The Brookings Institution, Washington, DC, 2004.

⁷ Housing stress is defined as rent or mortgage payments in excess of 30% of occupant’s income.

most Latinos in Mecklenburg County and longer-term residents. The following sections of this report present primary research about the issues and challenges surrounding community service provision and receptivity for Mecklenburg County's Latino population.

III. TELEPHONE SURVEY RESULTS

Telephone Survey Methodology

The UNC Charlotte Urban Institute conducted a telephone survey of Hispanic adults 18 years of age or older living in Mecklenburg County. To qualify to participate in the survey, a person had to reside in Mecklenburg County and had to identify him or herself as being of Latino origin or descent. Latino origin or descent was defined as Mexican, Puerto Rican, Cuban, Central American, South American or some other Spanish-speaking background. UNC Charlotte students employed by the Institute conducted the interviewing. Eighty-one percent of the surveys were administered in Spanish. Most of the interviewers were bilingual. The survey period extended from January to March 2006. Interviews were conducted Monday through Friday, 1 p.m. to 9 p.m., with the majority of interviews occurring between 5 p.m. and 9 p.m.

Over 400 adults were surveyed. Two different sampling methods were used. A random digit dial sample of residential telephone numbers from telephone exchanges serving 55 census tracts with high concentrations of Latinos was utilized for half the survey (200 completed interviews). In addition, a county-wide random sample of listed telephone numbers belonging to persons with Hispanic surnames comprised the other half of the sample (207 completed interviews). In both cases, the telephone numbers were purchased from a private survey sampling firm. The random sampling framework ensured that each household telephone within a specified geography had an equal possibility of being called.

The demographic profiles of the two samples were not statistically different. Thus, in this report, survey responses are reported for all persons who completed the telephone survey. Where differences were apparent between the sample groups, it is noted in the text.

Two significant differences existed between the total sample and Charlotte-Mecklenburg's Latino population at large. First, the telephone survey population was disproportionately representative of married females with children. Sixty percent of those surveyed were female and 65 percent of those surveyed were married. Two thirds (67 percent) of those participating in this telephone survey had children under the age of 18. In contrast, U.S. Census data indicates that approximately two-thirds of the Hispanic population in Mecklenburg County is male. These men tend to be young and single. The average age of a Hispanic male in Mecklenburg County is 27.3 years.⁸

Second, the survey disproportionately reflected the views of homeowners. Forty-one percent of those surveyed owned their own homes. Census estimates indicate that only 28 percent of Mecklenburg County's Latino population are homeowners. This over-representation of homeowners is skewed towards the views of individuals who are less transient members of the community.

In order to compensate for these sampling biases, the survey responses were weighted to more accurately reflect the officially counted Latino population in Mecklenburg County.

⁸ Claritas, 2005 Estimates.

The survey results presented in this chapter are weighted to adjust for biases in gender, marital status, and home-ownership.

Survey Population Characteristics⁹

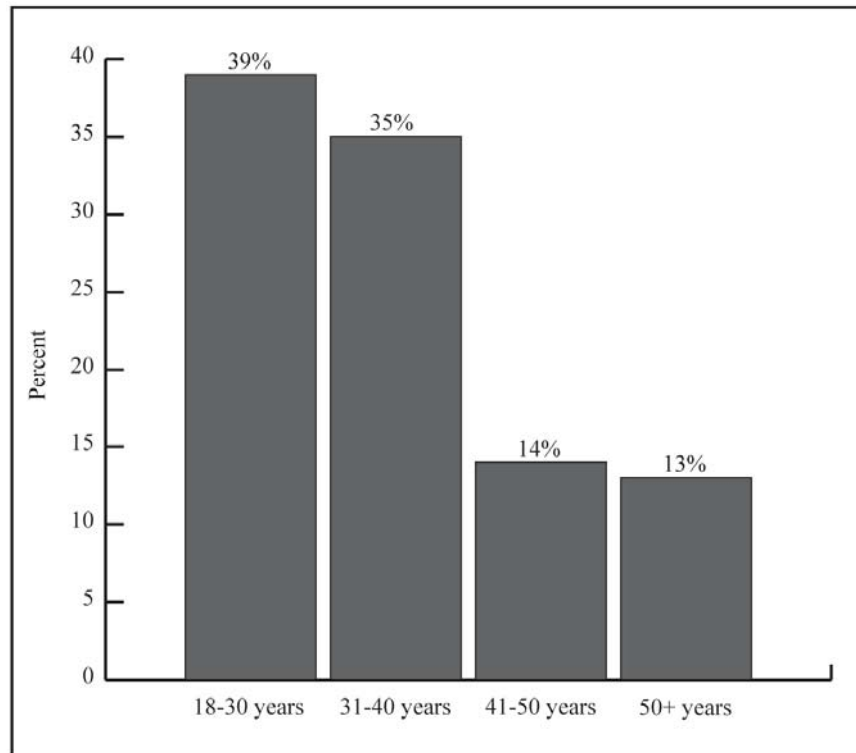
Gender

The survey sample was 59 percent female and 41 percent male. As noted above, census data estimate that only 39 percent of the Latino population in Mecklenburg County is female.

Age

This survey reflected the younger age demographic of the Latino population in Mecklenburg County (Figure 10). Census data estimate that 58 percent of the adult Hispanic population in Mecklenburg County is under age 35.¹⁰

Figure 10. Age of Respondents



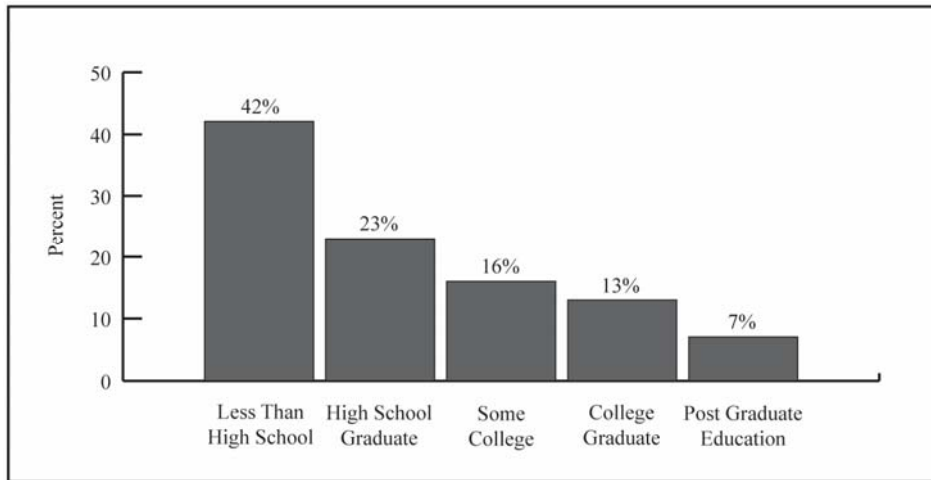
⁹ Survey population characteristics reflect unweighted data.

¹⁰ Claritas, 2005 Estimates.

Education

Estimates derived from U.S. Census data show that 66 percent of the Hispanic population in Mecklenburg County has a high school education or less. Similarly, nearly two-thirds (65 percent) of survey participants said that they had a high school diploma or less (Figure 11).

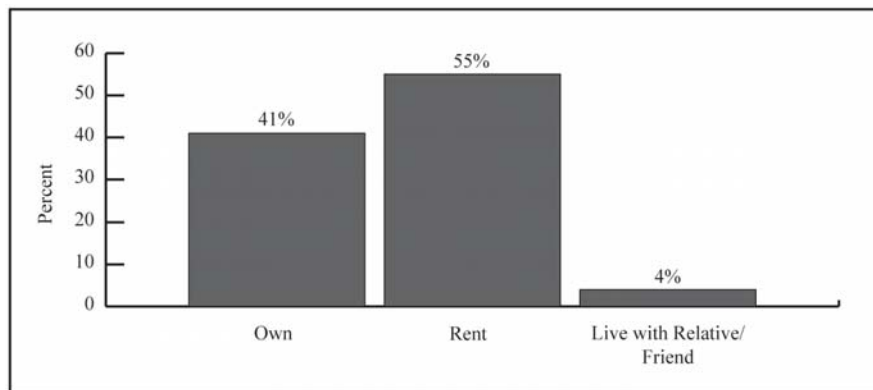
Figure 11. Education of Respondents



Home Ownership

Estimates from Census data reflect that among Hispanic households, 72 percent rent their homes and 28 percent own their homes.¹¹ The survey sample reflected a much higher level of home ownership (Figure 12). Over forty percent (41 percent) said they owned their home. Since the survey under-represents the more transient Latino population, i.e. young, single males and over-represents families with children, it is not surprising that home ownership levels would be higher.

Figure 12. Respondents Who Own vs. Rent



¹¹ Claritas, 2005 Estimates.

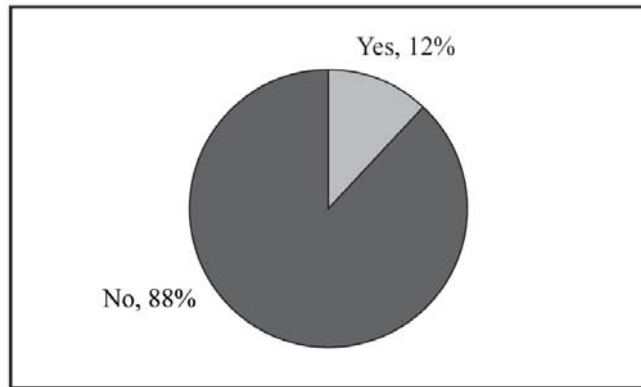
Marital Status

As noted above, almost two-thirds (65 percent) of the participants in this survey reported that they were married. In contrast, U.S. Census data from the 2004 American Community show that only 48 percent of the Hispanic population in Mecklenburg County is married. Twenty-two percent of those surveyed had never been married, as compared to 40 percent of the actual Latino population in Mecklenburg County.

Born in the United States

The vast majority of survey respondents were not native-born citizens of the United States (Figure 13). Eighty-eight percent of those polled were born in a foreign country.

Figure 13. Respondents Born in the United States



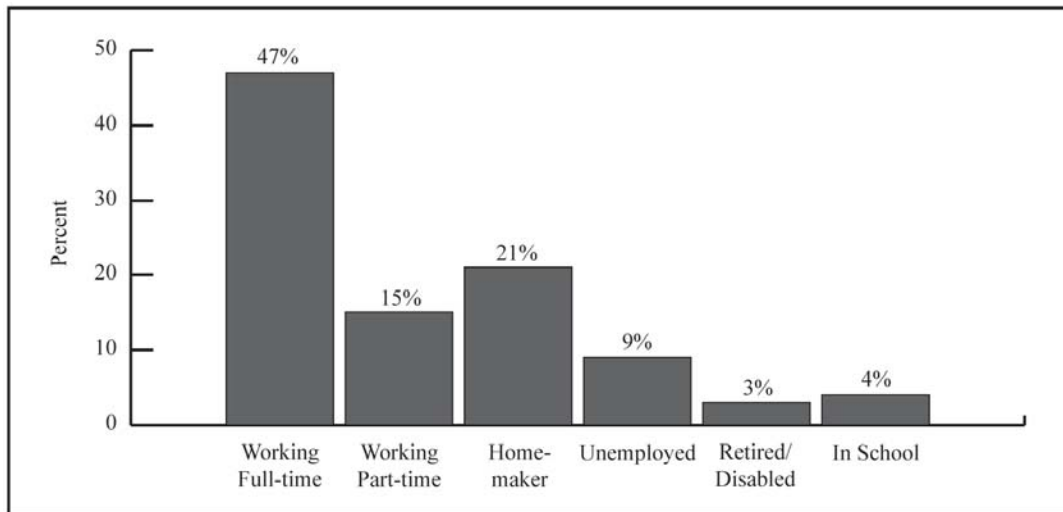
Point of Origin

Prior to living in Mecklenburg County, 62 percent of respondents lived elsewhere in the United States. The remaining 38 percent immigrated to Mecklenburg County directly from another country. Twenty percent came from Mexico; 9 percent immigrated from Central America; 7 percent came from South America; and the remaining 2 percent were from Cuba and the Dominican Republic.

Employment Status

Because the survey included a disproportionately high number of married females, it also included a high number of homemakers (21 percent) (Figure 14). Almost half of those surveyed indicated that they had full-time jobs and an additional 15 percent were working part-time. Nine percent were unemployed (double the overall unemployment rate for Mecklenburg County for this time period).

Figure 14. Respondents' Employment Category



Profession

Survey participants who were employed were asked to provide their job title and a brief description of their job duties. Of those who were employed (62 percent),

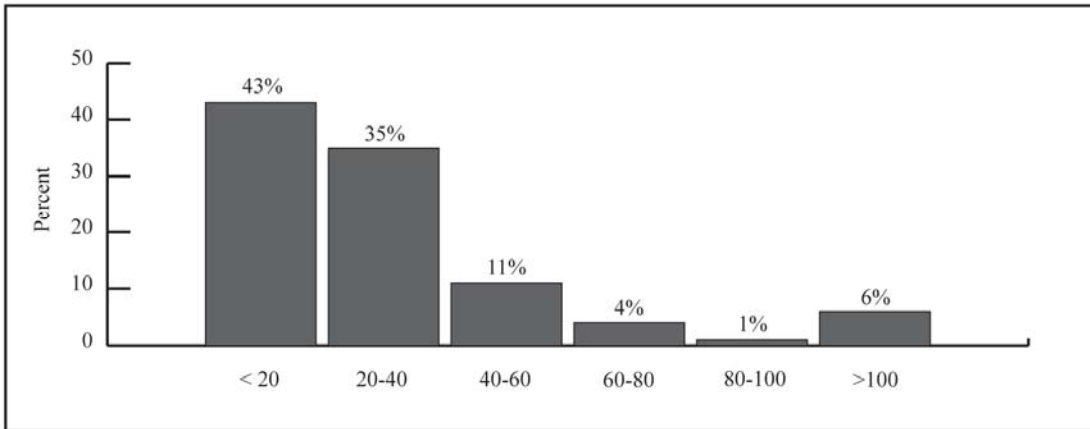
- 19% worked in construction or related trades;
- 17% worked in factories, packing, warehousing or trucking;
- 17% were professionals, managers, or self-employed;
- 13% were employed in cleaning, housekeeping or maintenance;
- 10% worked in food service or restaurants (cooks, wait staff, etc.)
- 6% worked in sales or customer service;
- 5% were employed in landscaping;
- 4% were office workers (receptionists, administrative assistants, etc.);
- 4% replied that they were “supervisors” but were not more specific;
- 3% were in education (K-12 and higher education); and
- 3% provided childcare.¹²

Income

Survey respondents tended to live in lower income households (Figure 15). Forty-three percent of those answering this survey said that they had household incomes of less than \$20,000 per year. Seventy-eight percent had incomes of less than \$40,000 per year. Cross-tabulation analyses show a positive relationship between higher income and home ownership. However, almost a quarter of those surveyed with annual household incomes of less than \$40,000 said they owned their own home. This finding implies that many families are experiencing housing stress and is reiterated in the key informant interviews in Chapter VII. Families doubling up and financial overextension are avenues to home ownership that may not be sustainable over the long run.

¹² Total is 101 percent due to rounding of percentages.

Figure 15. Respondents' Annual Income
(\$1,000)

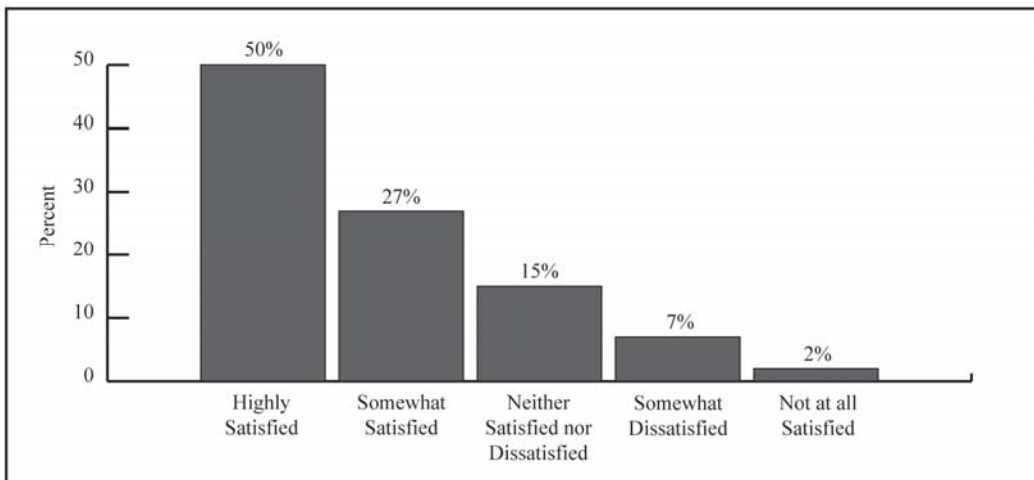


Survey Findings¹³

Satisfaction with Mecklenburg County as a Place to Live

The survey shows that the Latino community is largely satisfied with Mecklenburg County as a place to live (Figure 16). Indeed, over three-fourths of the respondents were either ‘highly satisfied’ or ‘somewhat satisfied’ with living in Mecklenburg County. The corollary is that few Latinos, less the 10 percent, were dissatisfied with their lives in Mecklenburg County. This strong appreciation for Mecklenburg quality of life may be viewed as a contributor to the growing attractiveness of this community to Hispanic immigrants.

Figure 16. Respondents' Satisfaction with Mecklenburg County



¹³ Survey findings have been weighted to more accurately reflect the officially counted Latino population in Mecklenburg County.

Discrimination

Respondents were also queried about their perceptions of discrimination in Mecklenburg County. In this matter, survey participants were split. About a third (35 percent) felt that there was less discrimination than other places in the U.S. A similar percentage, 37 percent, thought there was about the same amount of discrimination as other places. And 20 percent said there was more discrimination here than they experienced in other places in the country. Four percent replied that “it depends.” And 5 percent had not lived anywhere else in the U.S. and had no basis for comparison. The less-than-positive response to this question is in sharp contrast to the earlier quality of life findings and may reflect the changing climate towards immigrants locally.

Greatest Needs

Following questions about satisfaction and discrimination, survey respondents were asked, “What do you believe are the greatest needs of the Hispanic/Latino residents of Mecklenburg County?” The responses in order of frequency are listed in Table 3. Percentages exceed 100 percent because respondents were allowed to give multiple answers. Only those responses that were given by at least ten individuals are included in the table.

Table 3. Greatest Needs of Respondents
(arranged in order of frequency of response)

Greatest Needs of Latino Residents	Percentage of Respondents
Jobs/Better Employment	40%
Education (other than ESL)	13%
Healthcare	13%
Drivers Licenses/Identification	11%
English as a Second Language (ESL) classes	10%
Changes in Immigration Laws/Residency Status	10%
Bilingual/Bicultural Professional Services	9%
Translators/Interpreters	9%
Security/More police	7%
Civil Rights/Equality	6%
Money	4%
Transportation	3%
Medical Insurance	2%

Beyond the descriptive results, cross-tabulations within the survey findings exposed relational patterns. For example, respondents with children were more likely than others to suggest that the community needed ESL classes (14 percent of those with children gave this answer, as opposed to only 5 percent without children). Also, people with children were more likely to emphasize the need for better employment opportunities (44 percent as opposed to 34 percent of those without children). As would be expected, the unemployed were also significantly more likely to give this response (67 percent). In addition, respondents who had some higher education were more likely to say that education

(beyond ESL) was one of the Latino community’s greatest needs. Thirty-two percent of respondents who had some college education or more gave this response, as compared to 8 percent of those with a high school diploma or less.

Greatest Challenge/Barrier

Respondents were also asked, “What is the greatest challenge/barrier for the Hispanic/Latino residents of Mecklenburg County?” Respondents were only allowed to give a single answer to this question (Table 4). The overwhelming answer was language differences or language barriers (37 percent). A second strong response focused around socially constructed prejudice or discrimination and the legal challenges affecting the undocumented immigrant. Broadly speaking, the two issues are increasingly linked in the current political debate over illegal immigration. If combined, nearly one-third of the respondents cited this “community acceptability” issue.

In a similar fashion, the next three ranked challenges are also tied together around economic status. Poor employment options and educational preparation for the job market are affiliated social markers. They, in turn, handicap a person’s income earning capability. Combined together, these economically-centered barriers represented 16 percent of the respondents’ greatest challenges.

Table 4. Respondents’ Greatest Challenge/Barrier¹⁴
(arranged in order of importance)

Greatest Challenge Barrier	Percentage
Language Differences/Barriers	37%
Discrimination/Anti-Immigrant Movement	16%
Immigration Laws/Undocumented Status/Eligibility for Work Visas	16%
Lack of Work/Good Paying Jobs	7%
Lack of Education	5%
Low Income/Little Money	4%
Cultural Differences	3%

Service Utilization

Respondents were next asked about a series of public service agencies. First, they were queried if they had used any service provided by these agencies. If they answered in the affirmative, respondents were then asked to rate the quality of the services they received. The service organizations included in the survey, listed in Table 5, were representative of public and non-profit organizations with Latino-oriented or community-wide service missions. The most widely used agency was the Mecklenburg County Health Department (51 percent), followed by Charlotte-Mecklenburg Schools (46 percent), Charlotte-Mecklenburg Police Department (36 percent) and Mecklenburg Department of Social Services (34 percent).

¹⁴ This table includes answers given by at least 3% of the survey population.

Overall, the respondents who had obtained services or information from these agencies were satisfied with the quality of service they received. The findings presented in Table 5 illustrate these results. Please note that the number of respondents answering quality of service questions is much lower than the survey population as a whole. This is because only those people who had direct experience with an agency were asked to rate the service. As such, the survey also revealed a degree of non-use or non-familiarity with these services among the polled sample.

Table 5. Respondents' Assessment of Public/Social Service Agencies and Quality of Service
(arranged in frequency of usage)

Agency/Organization	% Using Services	Quality of Service				
		Very Good	Good	Neutral	Bad	Very Bad
Mecklenburg County Health Department	51% (n=227)	35%	48%	15%	2%	1%
Charlotte-Mecklenburg Schools	46% (n=204)	36%	45%	13%	3%	2%
Charlotte-Mecklenburg Police Department	36% (n=160)	41%	32%	20%	3%	4%
Mecklenburg County Department of Social Services	34% (n=154)	28%	42%	21%	4%	5%
Latin American Coalition	16% (n=69)	48%	32%	11%	9%	0%
Mi Casa Su Casa	14% (n=61)	51%	43%	5%	0%	1%
The Salvation Army	12% (n=54)	40%	52%	5%	2%	0%
Goodwill Industries	12% (n=54)	26%	65%	9%	1%	0%
Crisis Assistance Ministries	7% (n=30)	56%	31%	7%	4%	1%
International House	7% (n=29)	36%	55%	4%	0%	6%
United Way	6% (n=26)	27%	69%	4%	0%	0%
Latin American Chamber of Commerce	4% (n=18)	45%	17%	15%	23%	0%

Services Needed

The entire survey population was also asked “are there services you need, but cannot find?” Fourteen percent of respondents said “yes.” Those respondents were then asked to name the services they needed. The most frequently cited answers implicated healthcare issues. Of those who responded that they needed services, 45 percent needed access to medical care or assistance with obtaining health insurance. In particular, survey participants stressed (1) difficulty finding a doctor, clinic or hospital (especially Spanish speaking); (2) difficulty finding affordable health insurance or qualifying for Medicaid; and (3) difficulty paying for medical bills/expenses.

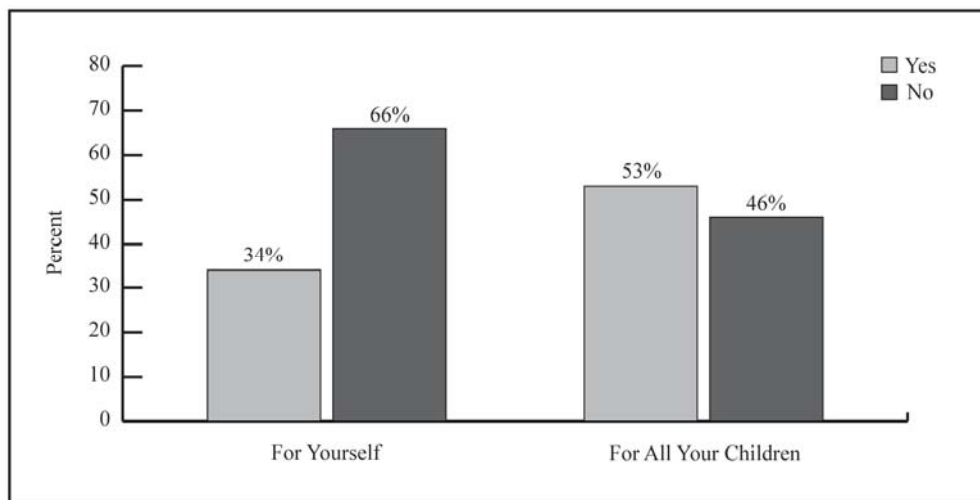
In addition to healthcare, other needed services are listed below, in order of frequency:

- Employment
- Social Services (WIC, food stamps, disability services)
- Childcare/Youth Services
- Assistance with Overcoming Language Barriers
- Education
- Legal Services
- Transportation
- Immigration Assistance

Healthcare

When respondents were asked whether they saw a doctor regularly, 61 percent said no, confirming a need for greater access to medical care. Respondents were also queried about whether they had health insurance for themselves and for their children (Figure 17). Two-thirds of those surveyed (66 percent) did not have health insurance for themselves; 41 percent did not have health insurance for their children; and 5 percent had health insurance for some of their children but not for all.

Figure 17. Respondents’ Health Insurance Coverage Status



Neighborhoods

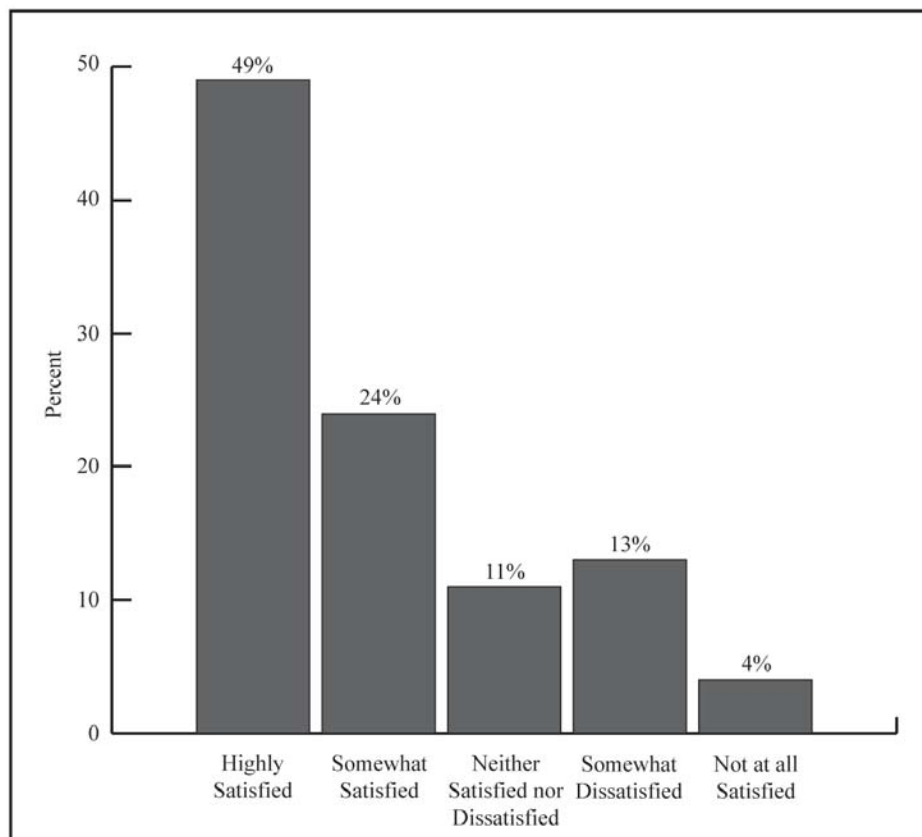
As noted earlier, the vast majority of survey respondents were immigrants. Almost two-thirds of the survey population (64 percent) had lived in the United States ten years or less. Twenty-nine percent had lived in the United States five years or less.

Virtually all respondents were relatively new to Mecklenburg County. Ninety percent of those surveyed had lived here ten years or less, and 53 percent had lived in Mecklenburg County for five years or less.

Because this population is relatively new to the area, it is likely to be highly mobile within the housing market. Forty-two percent of those surveyed had lived at their current address for a year or less. Sixty-two percent had been in their current residence two years or less. Ninety-one percent had lived in their house or apartment five years or less.

In spite of the short duration of tenancy, most respondents indicated that they were satisfied with their neighborhoods. In fact, nearly three-quarters of all persons were satisfied with their neighborhood (Figure 18). Conversely, only 17 percent expressed a measure of dissatisfaction. A comparison between the satisfaction levels for Mecklenburg County versus neighborhood finds lower quality of life (satisfaction) at the smaller scale. But, taken together, the overall findings are strongly positive.

Figure 18. Respondents' Satisfaction with Neighborhood



The majority of respondents (70 percent) also indicated that they felt safe in their neighborhood. Thirteen percent said that they only “sometimes” felt safe in their neighborhoods, and 17 percent said they felt unsafe. As might be expected, responses to the questions about neighborhood satisfaction and feeling safe in the neighborhood were positively correlated. In particular, those who said they did not feel safe were significantly more likely to say that they were dissatisfied with their neighborhood as a place to live (47 percent of those who felt unsafe were dissatisfied, as opposed to 6 percent of those for whom safety was not an issue).

This report has highlighted that, according to Census-based statistics, a majority of Mecklenburg County’s Latino’s live in three broad neighborhood districts. However, most respondents in the survey indicated that they did not live in predominantly Hispanic or Latino neighborhoods. Just over a quarter of the population (29 percent) described their neighborhoods as “all or mostly Hispanic or Latino residents.” Another quarter (25 percent) indicated that their neighborhoods were mixed with some Hispanic/Latino residents. The plurality (46 percent) said there were few Hispanic or Latino residents in their neighborhood.¹⁵ Indeed, although this report has categorized the North, East, and Southwest clusters as Hispanic districts, the ethno-racial backgrounds of all three are still minority Hispanic. No one neighborhood exceeds 16 percent Latino residents.

Respondents were also asked why they chose to live in or move to their current neighborhood. Not surprisingly, economic housing market factors were the most critical determinant of housing choice. Community quality of life measures were also important considerations. Listed below are the most frequently cited reasons.

- The quality of the house or apartment (18%).
- Price/the cost of rent or mortgage (14%).
- Family or friends lived in the neighborhood (13%).
- Close to work (12%).
- Quiet/peaceful/calm (12%).
- Liked the location (6%).
- Safety/security (4%).
- Schools (3%).
- Didn’t have any other options/availability (3%).
- Close to stores and businesses (3%).
- Knew that other Latinos lived in the area (2%).

Children

Over half (57 percent) of the survey population had children under 18. Of these, 71 percent had at least one school-age child. Twenty-nine percent had younger children only.

¹⁵ In spite of using two different sampling methods, there were no striking statistical differences in responses between the two sample populations.

Overall, survey results showed that 90 percent of school-age children attended school. Seven percent of those with school age children reported that at least one of their children was not enrolled.

These respondents overwhelmingly sent their children to public school. Ninety-four percent said their children attended Charlotte-Mecklenburg Schools. Five percent sent their children to private or religious schools and 1 percent of the households sent some children to public school and others to private school.

IV. FOCUS GROUPS

Background and Methods

The previous chapter highlights the key findings of the telephone survey of Latinos in Mecklenburg County. While the survey captures the perspective of a large sample, this method of data collection has several shortcomings.

First, one of the known drawbacks of telephone surveys is non-coverage bias. Non-coverage bias means that telephone surveys do not reach households without a working telephone. In the North Carolina, approximately 3 percent of all households do not have a working telephone and of these households a very high proportion fall below official poverty lines. As a consequence, poor households are commonly under-represented in telephone polls.

Second, the sampling procedures used in this survey (Random Digit Dialing and listed sample public opinion polling) did not reach households which rely solely on cellular or mobile phones for communication. Estimates of cellular-only households range nationally between 6 percent and 7 percent with residents in these households skewing towards the young, single, and childless—characteristics that parallel a significant proportion of Charlotte-Mecklenburg’s Latino population.¹⁶

Third, drawing from anecdotal evidence and research conducted among immigrant communities in other North American cities, Latino community leaders and study researchers believed that undocumented persons would be less likely to respond to a telephone survey.

Recognizing the shortfalls of telephone survey research, the research team also conducted focus groups. The focus group method involves an organized discussion with a small group of individuals to gain shared insight into everyday life and experiences. In this study, the technique was used to gather information about issues of service access and experience from low-income Latinos—those persons likely to have been under-represented in the telephone survey. With the assistance of the Latin American Coalition, three Spanish-language focus groups were carried out by a trained, bicultural facilitator. Participants were provided with a gift card worth \$20 as an incentive.

Thirty people participated in the focus groups, which lasted between 75 and 105 minutes each. Of these participants, half (15) were from Mexico. Five were from Columbia. Three were natives of El Salvador. Two were from Honduras. One person came from Bolivia, Guatemala, and Peru respectively. One person said simply “South American” and another “Central American.”

In each focus group, the participants were asked the same set of questions. These questions centered around the experiences and challenges facing new Latino residents of

¹⁶ <http://www.dc-aapor.org/documents/spc05albaghal.pdf>; <http://poq.oxfordjournals.org/cgi/content/abstract/70/1/88>

Mecklenburg County. Specific questions about the availability of and accessibility to public services were presented. After structured questions and follow-up discussion, focus group participants were given the chance to raise issues or concerns that had not been presented.

The following sections present a summary of the focus group findings.

Greatest Needs

Focus group participants were asked: “Based on your experience and that of your Latino friends and neighbors, what are three greatest needs you have as you try to make a life in Charlotte?”

In all three groups, the need for information or a better understanding of how the city/county/country works was mentioned. More specifically, participants felt they were lacking in both local knowledge (i.e. civics, basic rights, roles and responsibilities of various organizations), as well as information about cultural expectations, (i.e. accepted norms and practices). In addition, all three groups cited inadequate public transportation. The greatest concern around transportation was related to the provision of services for getting to work. Similarly, all three groups reported the need for affordable healthcare.

In two of the focus groups, better educational opportunities and childcare resources were identified as critically needed services.

In open discussions, various participants also raised the following issues:

- representation for Latinos in local and state government,
- improved security for children in schools and neighborhoods,
- the need to learn English,
- recreational activities, and
- access to parks and information about parks.

Greatest Problems

Focus group participants were also asked: “Based on your experience and that of your friends and neighbors, what are the three greatest problems you face here in Charlotte?”

The most frequently named problem was discrimination. In particular, participants discussed their inability to obtain adequate service from service providers (such as Medicaid or DMV) even when they were qualified to receive the services. In other cases, participants shared examples of mistreatment, especially the exploitation of newcomers by others in the Latino community. Two of the focus groups thought that a lack of well paying jobs in Mecklenburg was a great problem. Equally critical was the lack of documentation for many within the community.

Focus group members recounted other concerns that reiterated core themes that surfaced throughout this study. These included:

- lack of affordable healthcare,
- lack of service providers that address primary needs,
- language barriers (specifically as related to seeking employment),
- lack of education/literacy, and
- lack of transportation or poor public transportation.

Most Helpful Services

After discussing challenges, focus group members were queried about services. Specifically, participants were asked which services in Charlotte-Mecklenburg helped them or their families the most.

All three focus groups acknowledged Charlotte-Mecklenburg Schools as providing helpful services that they utilized. Two of the groups named the Mecklenburg County Health Department and the Latin American Coalition as important service resources. It should be noted that because the focus group participants were drawn from Latin American Coalition clients and the focus groups were held at the Latin American Coalition offices, the reference of the Latin American Coalition as a helpful service provider was an expected outcome. With that said, independent key informant interviews also highlighted the Coalition as an important resource for the Latino community. Finally, participants also listed the following as important sources of assistance: Spanish language newspapers and Spanish language radio; friends and family; the Department of Motor Vehicles (DMV); Mecklenburg County Department of Social Services; and Charlotte Area Transit System (CATS).

Services That Make Life More Difficult

After the discussion of positive service experiences, focus group discussions turned to poorly provided services. In this regard, the groups were asked: “Are there any services that make your life more difficult?”

Given the previous exchanges about the usage of public services and Latino needs and problems, the responses that emerged paralleled earlier themes. The most frequently mentioned response was the poor public transportation system. The second most frequently recounted concern was North Carolina’s tough requirements for Medicaid. In particular, some individuals offered that persons and families who had moved to North Carolina from other states were able to qualify for Medicaid insurance in those states but could not qualify here.

In addition to transportation and Medicaid, a variety of disparate challenges were voiced by individuals or small numbers of focus group participants. These ranged from specific examples of hostility or discrimination to public policy linked issues. Among the listed problems were:

- the lack of low cost daycare for children under three years of age,
- the hostile environment in the state,
- mistreatment by DMV employees,
- a lack of Spanish-speaking healthcare providers,
- the high cost of prescription medicines,
- the feeling that Central Piedmont Community College markets to the Latino community, but many do not “qualify” for programs or assistance, and
- discrimination from social service providers.

Additional Services

A final category of service-related questioning was oriented around the need for new or expanded services to Latinos. This area was explored using the question: “What additional services does Charlotte need to help make you and your family’s daily life easier?”

In the resulting discussion, all three focus groups offered that there was a need for more parks and recreation alternatives, particularly activities and facilities for families. In a different direction, two of the groups felt there was a shortage of Latino serving advocacy and referral services. Two focus groups also said they would like to see increased local or regional Spanish language television programming. In the opinion of focus group participants, wider availability of Spanish language television would offer better dissemination of critical information and could convey that information more easily and accessibly to new Hispanic residents in Mecklenburg County.

Beyond the widely shared service needs, individual focus group members offered other ideas surrounding service needs. These additional topics included:

- subsidized daycare,
- bilingual healthcare providers,
- affordable prescription drugs,
- English as a Second Language (ESL) education, and
- life skills training.

Other Important Issues

The focus group sessions concluded by asking participants for additional topics that were not covered by the earlier prompts. Specifically, the groups were asked: “Before we end today, are there other important issues that we have not addressed in our discussions today?”

Several themes arose during this concluding discussion. The most common response was a strong feeling that the Latino community needs to be more united and more proactive in its advocacy endeavors. Individual participant comments around this topic included:

- We need to create a circle of support in which Latinos help Latinos.
- People are taking advantage of people who “do not know”. As a result, when agencies are doing good work, people don’t participate.
- Not until we [Latinos] need the help do we participate in organizations.
- When a Latino organization exists, a person feels protected, feels that the organization advocates for the people.

Several participants also felt that the Latino community needed to aspire to higher levels of success and achievement. This sentiment was expressed in comments like the following:

- Latinos focus so much on working that we don’t focus on getting ahead.
- People become complacent, they are able to get food, housing, transportation and they settle for that.

Not unexpectedly, given the participants and the relevance that immigration reform has to the broader Latino community, the topic of undocumented immigration was cited as important. One person said that since the immigration debate seemed to be “going nowhere, most people feel like they are on standby.” Another stated that immigration reform would help many people avoid fear and an inferiority complex. For undocumented workers that are already here, it appeared to participants that this population was stuck without viable alternatives to move ahead with their lives.

Finally, several other topics were also shared as belonging to the other important issues category. These included:

- Distrust from other racial groups, especially African-Americans. Focus group participants mentioned that some African-Americans express that they have been displaced and Latinos feel their rejection.
- The need for ESL classes in the evening.
- Feeling that they are not safe on the streets of their neighborhoods. Several participants said they feel safe during the day, but not at night.

The focus group discussions provided valuable insight into the way in which current service provision structures in Charlotte-Mecklenburg are being accessed and experienced by members of the Latino community. In addition to supporting many of the findings of the telephone survey, such as prioritizing language and discrimination as barriers to service access, the focus groups also shed light onto additional issues not captured in other components of the study. Specifically, the focus groups highlighted the demand from Latinos themselves for more and clearer information about cultural expectations and norms, about the need for better dissemination of practical day-to-day information and the importance of being able to access details about local civics, basic rights and responsibilities as well as the role and commission of agencies and service providers.

V. MAIL SURVEY OF SERVICE PROVIDERS

As part of this needs assessment, the UNC Charlotte Urban Institute also conducted a mail survey of organizations that provide services, information, or assistance to Latino residents of Mecklenburg County. The original service provider list was compiled by the Latin American Coalition. Institute staff then augmented the list through Internet searches, by auditing the local yellow pages, and by reviewing Spanish language newspapers. The purpose of the survey was to gather data from these organizations on: the types of services offered; the extent to which these services are offered to Latino clients; the barriers to providing services to Latinos; and the degree to which Latinos are represented within the organization. Two hundred and forty-eight questionnaires were sent out. Seventy-seven surveys were returned for a response rate of 31 percent. Organizations that returned the questionnaire were mostly from local non-profits, but some government agencies and educational institutions responded as well.

Among the seventy-seven organizations that participated in this survey, ninety-seven percent indicated that their organization or agency provided services or programs used by Latinos. Most organizations reported that they provided more than one program or service for, or frequently utilized by, the Latino community. These services and programs included:

Table 6. Services and Programs ¹⁷

Service/Program	Percentage of Respondents
Child Education/Enrichment Programs	17%
Healthcare (including prevention, treatment and Medicaid programs)	13%
Substance Abuse Programs	11%
Language Programs (e.g. Spanish, ESL)	8%
Emergency Food, Shelter, Clothing	8%
Housing	6%
Services for Persons with Disabilities	6%
Family Support and Education (e.g. parenting classes)	5%
Information and Advocacy	5%
Recreation/Festivals/Art	3%
Mental Health	3%
Job Training	2%
Legal Services	2%
Senior Services	2%
Respite Care	2%
Other	9%

Of the services provided, 54 percent were targeted specifically to the Latino population; 46 percent were not. For three-quarters of the services or programs, respondents indicated that the number of Latinos using the service or program had increased over the last year.

¹⁷ Total exceeds 100% due to rounding.

Employees/Volunteers

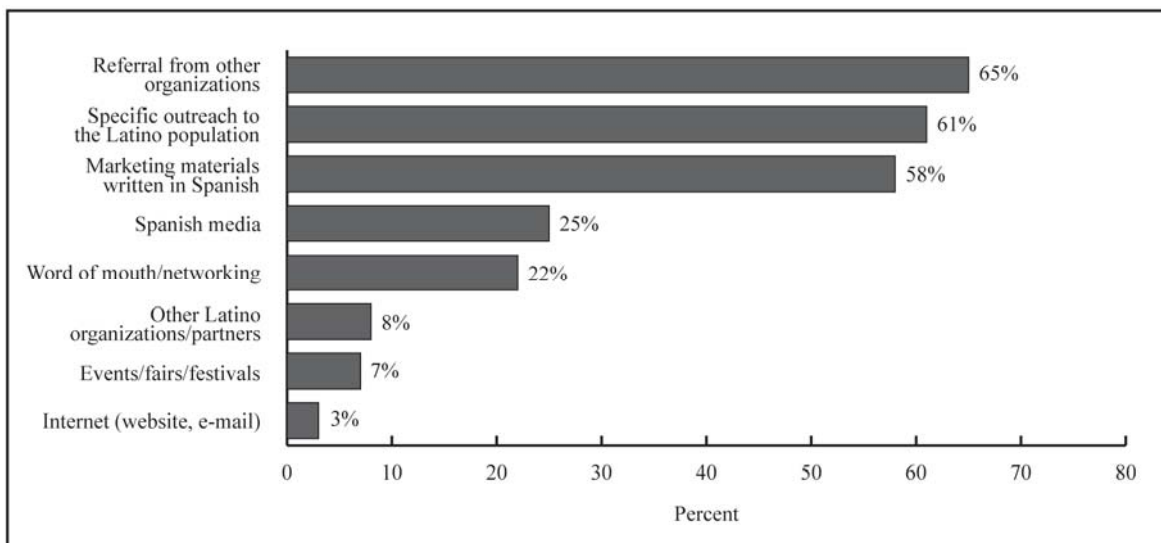
The vast majority of the organizations had at least one person on staff who spoke Spanish as a first or second language. Sixteen percent indicated that they employed no Spanish speaking staff. Of those organizations that had a board of directors or board of advisors (n=69), more than half said that they had Hispanic/Latino representation on their board (55 percent).

When asked “what, if any,” training do your employees need in order to effectively meet the needs of your organization’s Latino clientele, the three most frequently cited answers were Spanish language training (53 percent of organizations), followed by cultural competency (34 percent) and diversity training (11 percent). Secondary training needs included training on legal issues such as tenant rights, labor rights, civil rights, and immigration law (10 percent), as well as assistance with outreach, recruitment and marketing to the Latino community (8 percent).¹⁸

Outreach

With regard to outreach, respondents were asked, “How is the Latino population informed about your organization’s services and programs?” Four possible responses were printed on the questionnaire: (1) referral from other organizations; (2) marketing materials written in Spanish; (3) specific outreach to the Latino populations; and (4) other (please specify). Between half and two-thirds of the organizations said they used referral, Spanish language marketing materials and targeted outreach efforts to reach the Latino community. In addition, 81 percent of those answering this question gave an “other” response. The “other” responses provided by at least two organizations are detailed on the bar chart below and are shaded orange.

Figure 19. Outreach



¹⁸ Respondents provided multiple answers, so the total exceeds 100 percent.

Barriers

Finally, organizations were also queried about barriers they face as they try to provide service to the Mecklenburg’s Latino community. Specifically, they were asked “what barriers, if any, exist that prevent your organization from meeting the needs of the Latino population?” The most common responses were the language barrier, lack of funding, and the need for more bilingual and culturally competent staff/volunteers.

Table 7. Barriers

Barriers	Percentage of Respondents
Language Barrier	31%
Lack of Funding	26%
Lack of Bilingual, Culturally Competent Staff/Volunteers	18%
Absence of Trust from/within the Latino Community	5%
Lack of Space/Facilities	4%
Lack of documentation among clients/Immigration laws	4%

In sum, the findings of the mail survey reinforce findings from the telephone survey and focus groups. Service providers are increasingly called upon to serve the growing Latino population. To do so, they need more staff and volunteers that are bilingual and culturally competent. And they need assistance with effective communication and public relations strategies. Dissemination of information has to overcome the triple challenge of language, culture, and increasingly a climate of fear and distrust.

VI. SPATIAL MISMATCH

Earlier portions of this study have reported on the aggregate need for services to Mecklenburg County's growing Hispanic community. The adequate provision of public and community resources is, however, best measured along two dimensions. The first metric is a capacity measurement. This is to say, are there sufficient language proficient and culturally sensitive service providers with available resources to meet the needs of the Latino community? Previously offered analyses and findings in this report have focused on such capacity issues and challenges.

A second dimension of service provision is accessibility. Simply stated, are the locations of service providers and their distribution networks geographically accessible to clients? The notion of geographic access describes distance, transportation, and mobility factors that influence people's ability to use services when and where they are needed.¹⁹ Distance is a critical attribute affecting both the choice to use a service and the intensity of utilization. In turn, economic disadvantage and short length of residence in a community may compound the effects of travel time and cost.

Mecklenburg County's new Hispanic residents fit the profile of users likely to be adversely affected by a condition labeled spatial mismatch. As utilized in the community planning literature, this term refers to a statistical measure of separation between the home residence of service users and the location of service provision sites. Spatial mismatch is rarely intentional and most commonly develops as a result of shifts over time in the residential locations of clients, matched by the permanence of public service facilities and service centers. Communities like Mecklenburg County that experience rapid population growth and changes in population character and geography are at risk of significant spatial mismatch.

In evaluating the service provision spatial mismatch for Latinos in Mecklenburg County, geographic information systems (GIS) technology was used to measure accessibility. A spatial statistical tool called kernel estimation²⁰ calculated the accessibility for all 231 Latino servicing public and private organizations in Mecklenburg County, represented in this study's Latino service provider inventory (Appendix A). As mentioned in the Introduction to this report, these service organizations were broken down into six categories: advocacy, economic development and personal finance, education, health services, housing services, and public safety.

In carrying out the spatial mismatch analysis, a 2-mile radius around each service provider's address was calculated. This distance is a standard measure for accessibility for neighborhood-based services. Following the GIS coding of all service providers, service density values were calculated based upon the geographical coverage of services. The analysis included a cumulative accessibility measure for all services, as well as, an

¹⁹ McLafferty, Sara and Grady, Sue, "Immigration and Geographic Access to Prenatal Clinics in Brooklyn, NY: A Geographic Information Systems Analysis", *American Journal of Public Health*, April 2005.

²⁰ Bailey, T. and Gatrell, A., *Interactive Spatial Data Analysis*, Addison Wesley Longman Ltd., Essex, England, 1999.

individual assessment for each category of services. These results are presented in Figures 20 through 26.

In developing the framework for the spatial mismatch, the research team utilized only those services that had been determined to be Latino-oriented or Latino-friendly as measured primarily by Spanish language accessibility (See Appendix A). In cases where service providers are large countywide agencies, with multiple locations or facilities, general services are available to Hispanics at all service locations, but Latinos requiring language or culturally sensitive assistance are often directed to the central office or to Latino-specific sites or programs. For this reason, only the central office and/or the location of specific Latino-centered services were used for the spatial mismatch analysis. Organizations meeting these criteria included Charlotte-Mecklenburg Police Department, Charlotte-Mecklenburg Library System, and Charlotte-Mecklenburg School System.

One obvious mitigating variable for the spatial mismatch analysis is mobility enhancement. The availability of a low cost and accessible public transit service will stretch the service radius for locations and increase potential service usage. Consequently, Charlotte Area Transit System (CATS) bus routes were added to the analysis. Specifically, CATS bus stops were included as another part of the GIS mapping. Although bus services are not a perfect solution to spatial mismatch, they do offer some assistance to lower income, transit-dependent populations.

The cumulative service accessibility analysis for the 231 Mecklenburg County public and private service providers is presented on Figure 20. The higher the density value, the greater the concentration of services in that area. A review of this map shows the highest concentration of service providers around center city, with wedges of significantly above average service provision extending to the northwest and east of downtown.

The three residential clusters containing most of Mecklenburg County's Latinos are superimposed on the service clusters in Figure 20 and all other figures displaying these analyses. A review of the analytical findings correlated with the Latino housing geography shows a concentration of service provision in the Eastside Hispanic area with a more serious spatial mismatch in Southwest Charlotte and North Charlotte. Sizable portions of the Southwest district have "no services" and the most suburban portions of North Charlotte also have "no services". Moreover, large portions of all three clusters exhibit only "average" or "below average" accessibility to services that have been identified as important to processes of integration and acculturation for the Latino community.²¹

Public transit services, represented by the distribution of CATS bus stops, offers enhanced accessibility to underserved portions of Southwest Charlotte, especially along the South Boulevard corridor. But, the underserved portions of North Charlotte do not receive the same level of bus services. Among the three Latino residential districts, Eastside Charlotte is best serviced by CATS.

²¹ We should stress that service codings ("no services," "below average," etc.) refer only to those services included in the study and reflected on Appendix A, and not all services offered across the county.

Figure 20. Accessibility to All Latino-Oriented Services

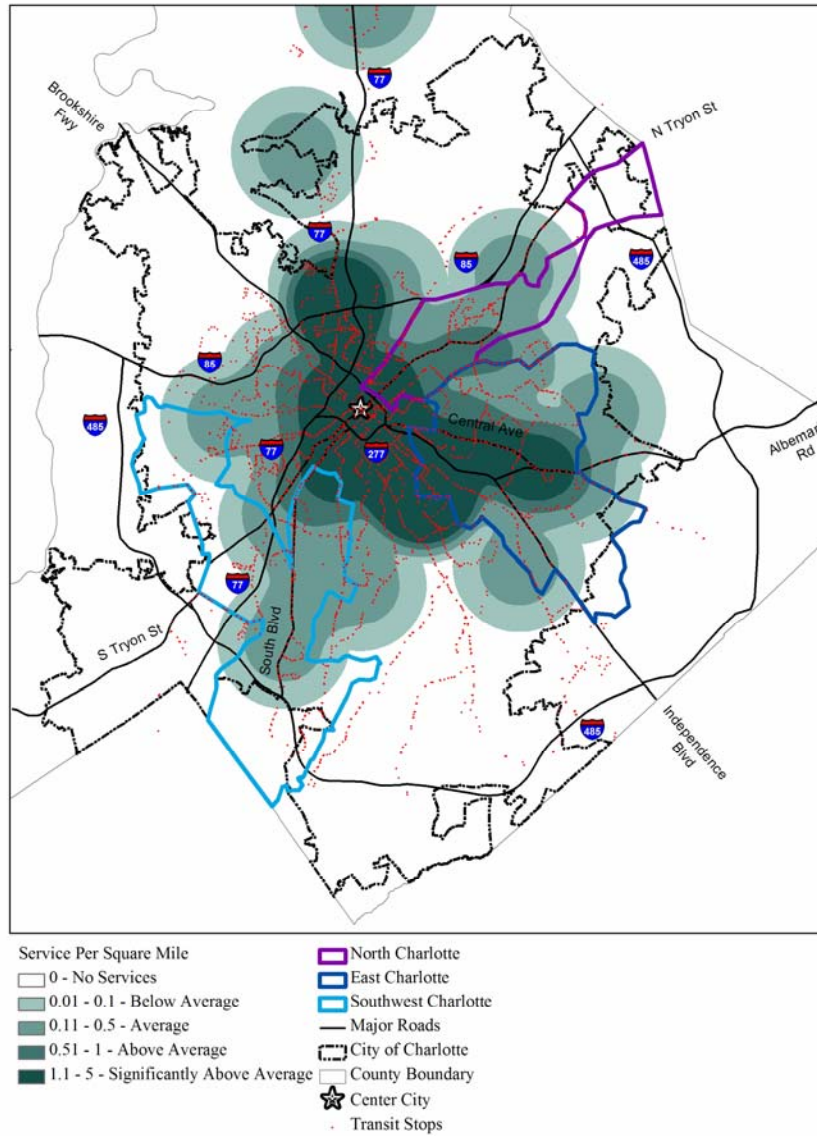
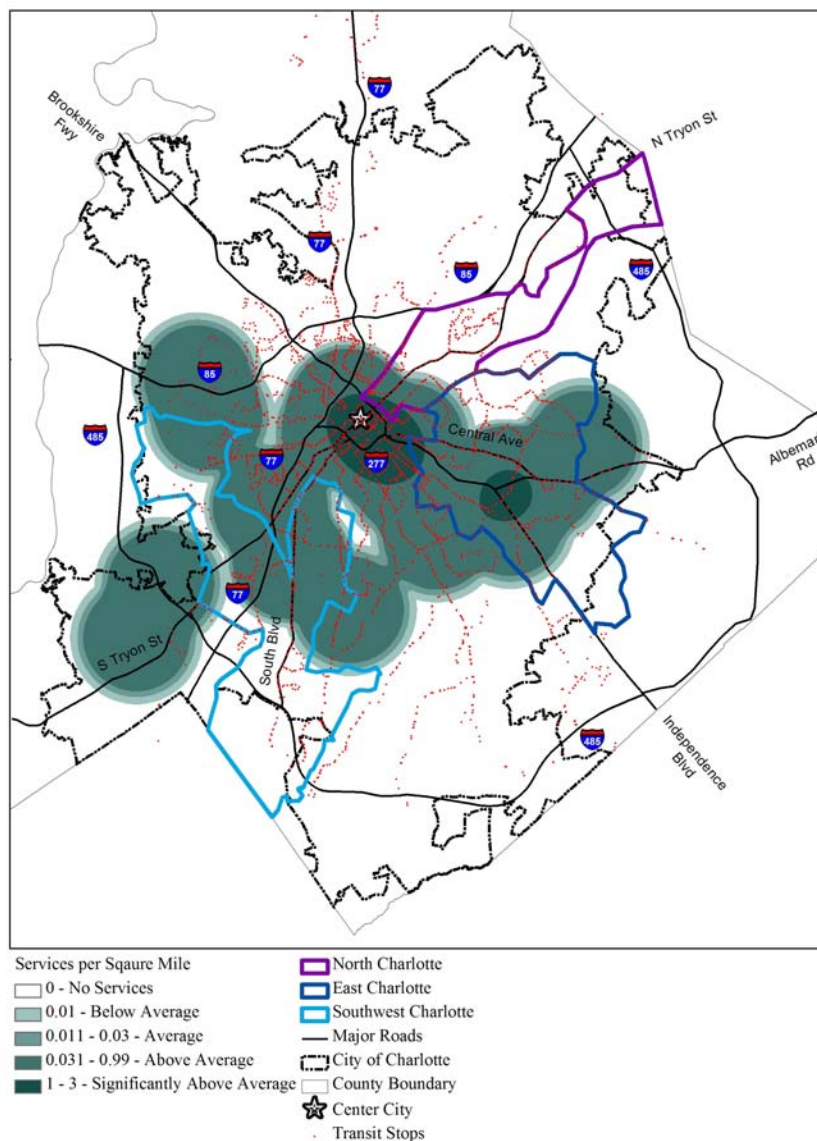
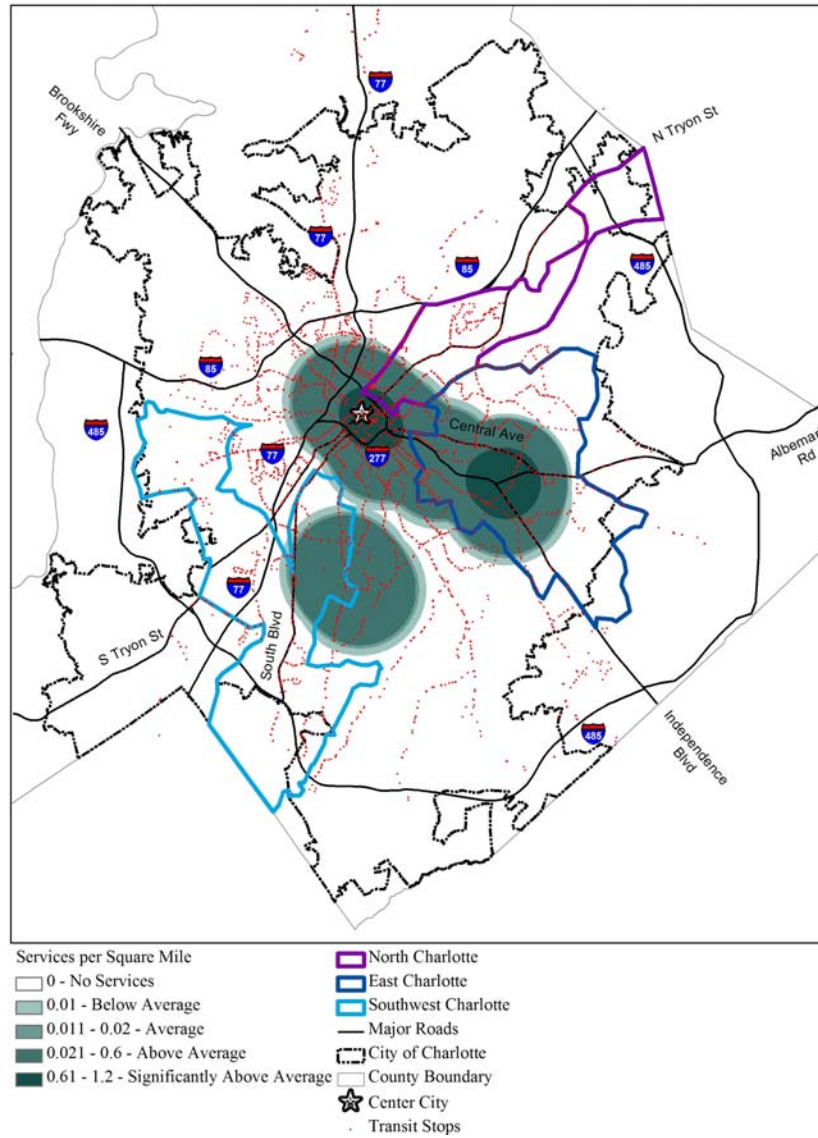


Figure 21. Accessibility of Latino-Oriented Advocacy Services



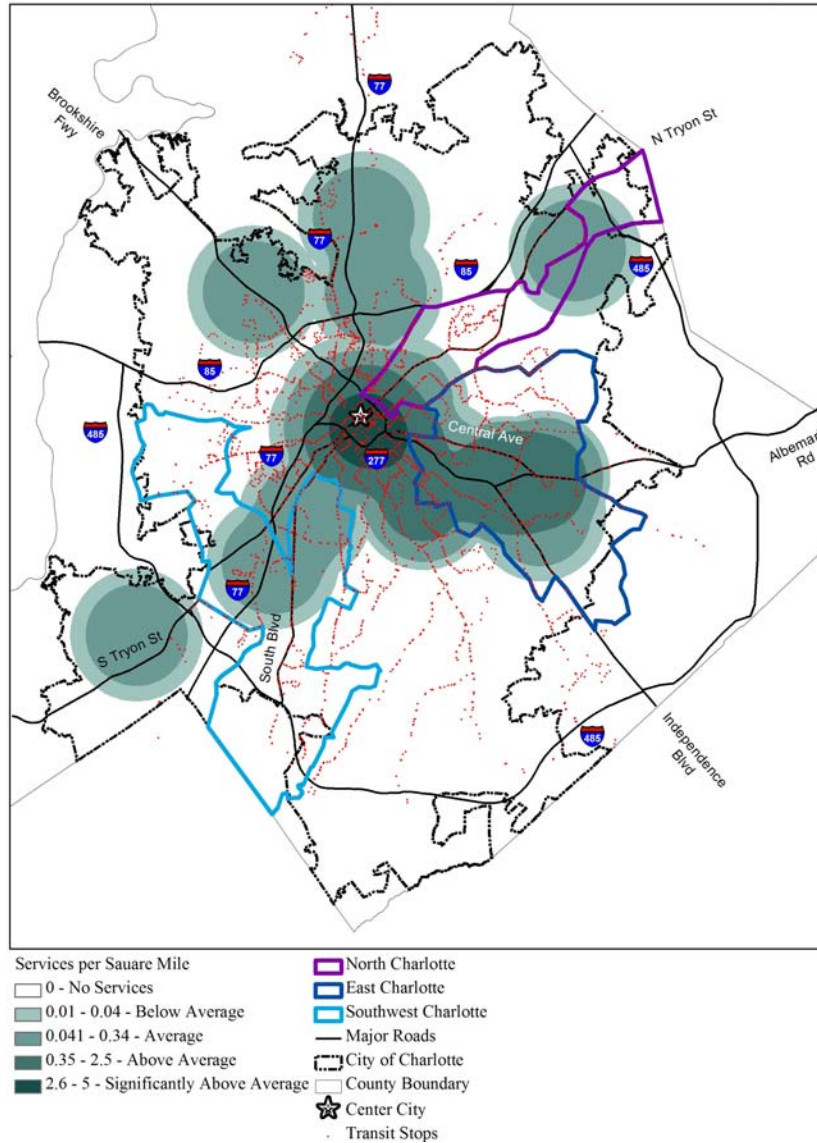
As seen above in Figure 21, the highest concentration of organizations providing advocacy services for Mecklenburg County’s Latinos is centered around center city Charlotte and in the Eastland Mall area of Eastside Charlotte. In sharp contrast, most Latino neighborhoods in North Charlotte have “no services,” while large portions of Southwest Charlotte are poorly served or have an absence of advocacy services. CATS bus services in Southwest Charlotte mitigate the limited service areas in the southern portion of this community. Bus service along North Tryon offers enhanced access to Latinos living near this main transit line. However, CATS service is geographically limited elsewhere in North Charlotte. Ironically, some areas of Mecklenburg County with “average” or “above average” service provision are located outside of the primary residential communities of Mecklenburg County’s Latino population. Among Mecklenburg County’s Latino neighborhoods, North Charlotte demonstrates the most severe spatial mismatch.

Figure 22. Accessibility of Latino-Oriented Economic Development and Personal Finance Services



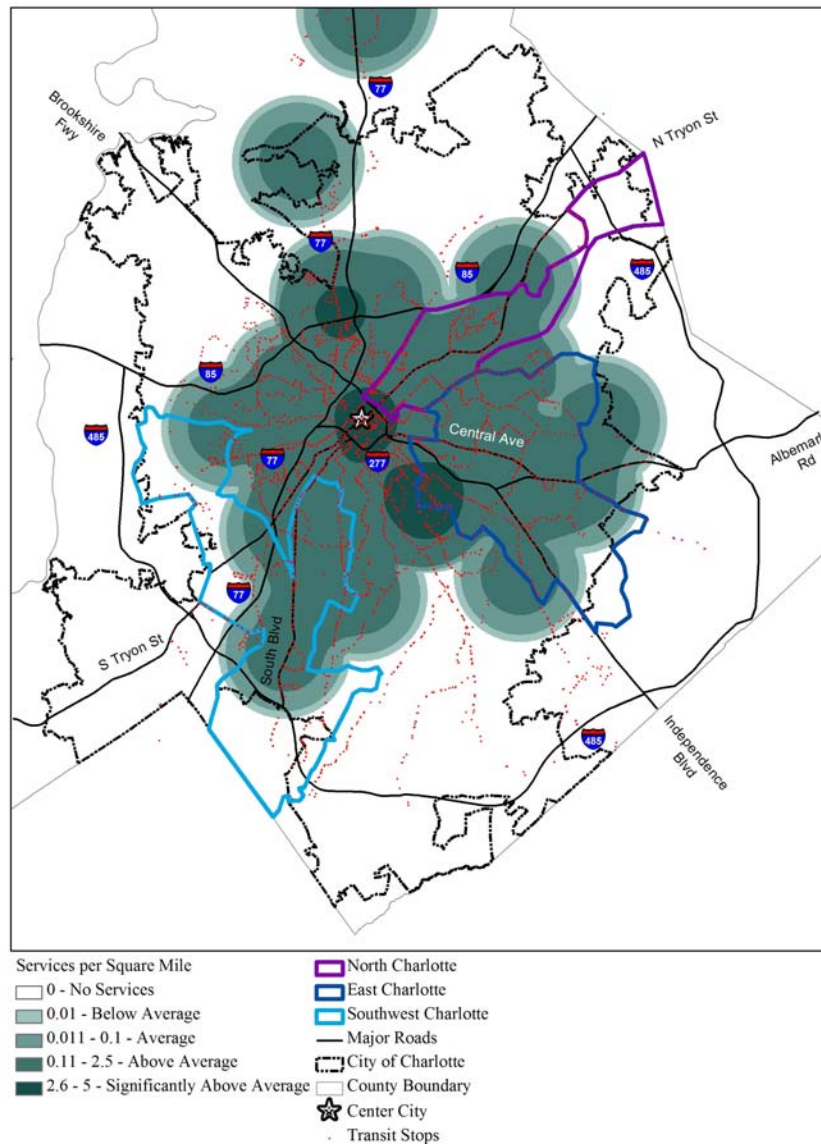
The distribution of organizations providing economic development and personal finance services to Hispanic residents in Mecklenburg County is heavily concentrated in two small areas: Center City Charlotte and the Eastland area of Eastside Charlotte. There is a lower concentration of services in the northern section of Southwest Charlotte (Figure 22). North Charlotte is largely unserved, as are the southern and western portions of Southwest Charlotte, and the eastern and northeastern parts of Eastside Charlotte. Significant portions of all three residential districts have “no services” in this category. CATS bus service effectively services the Eastside, but fails to provide mobility links to Latinos seeking these services who live in North Charlotte or the western section of Southwest Charlotte.

Figure 23. Accessibility of Latino-Oriented Education Services



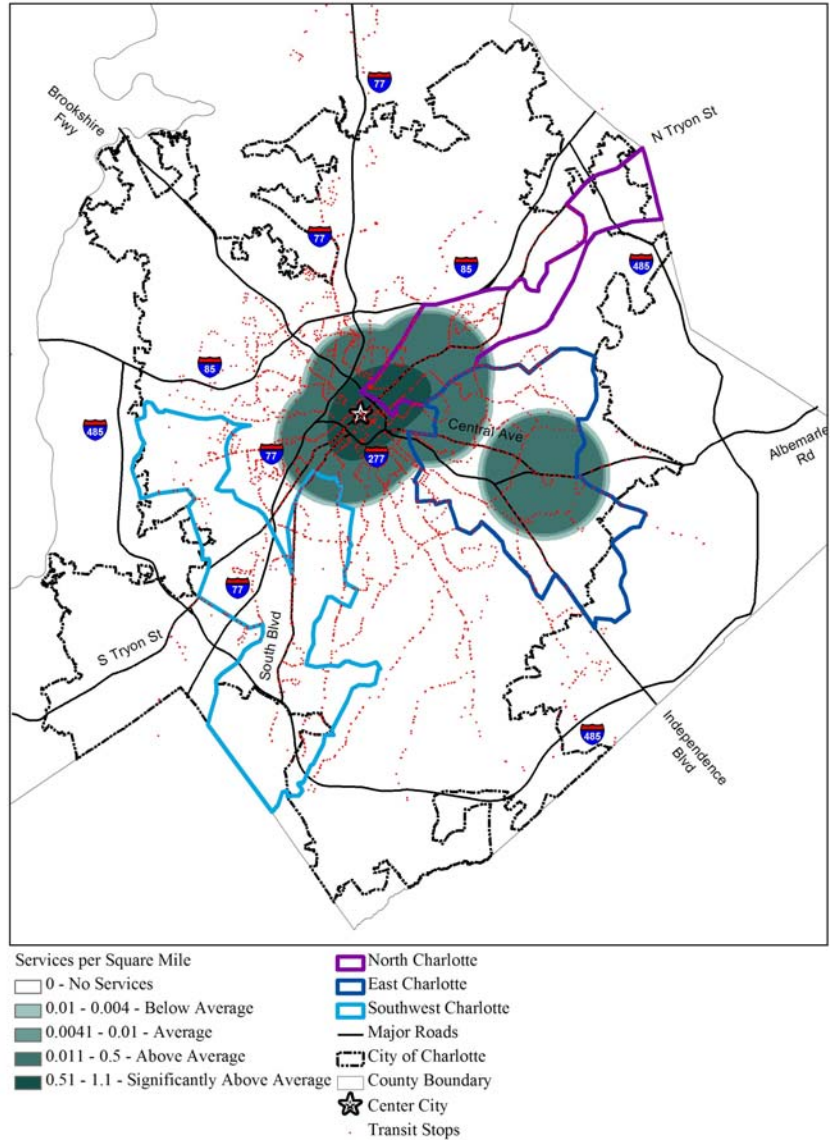
Compared to the two previous service provision categories, Latino-oriented educational services are more widely distributed across the community. As shown on Figure 23, Center City Charlotte and the area just southeast of Center City have the heaviest concentration of service. Another area of “average” service provision is isolated in suburban North Charlotte. Suburban areas, outside of the three Latino residential concentrations, North, Northwest, and Southwest of Charlotte reflect “average” levels of service provision. To a degree, public transit mitigates the spatial mismatch in education service access, but the western portion of Southwest Charlotte and middle portion of North Charlotte remain underserved.

Figure 24. Accessibility of Latino-Oriented Health Services



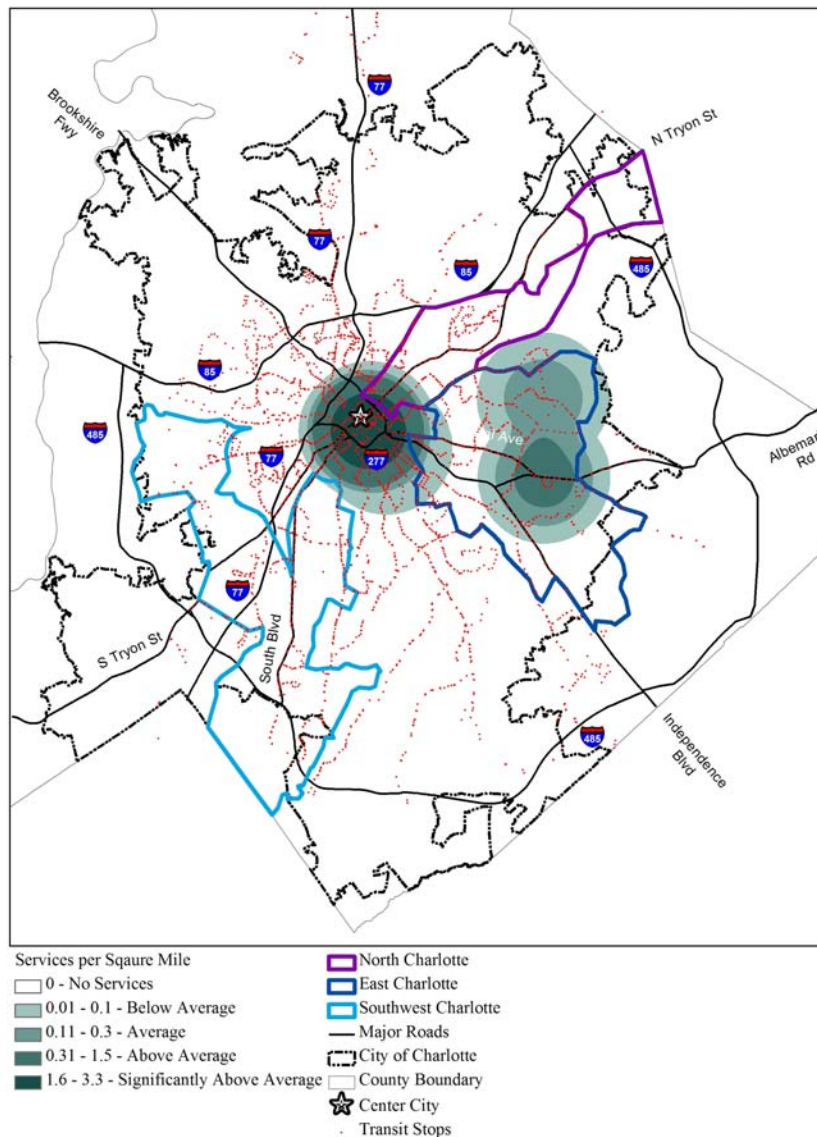
As is the case with educational services, health-related service organizations are widely dispersed across the existing Latino neighborhoods (Figure 24). As has been the pattern with all service providers, the greatest concentration of services are in the Center City and the neighborhoods immediately adjacent to downtown Charlotte. Other “significantly above average” service levels are shown southeast and northwest of downtown. Large sections of all three Hispanic residential communities have “average” or “above average” healthcare services. Areas with the lowest provision of health services, including “no services,” tended to be the neighborhoods in the most suburban locations in Mecklenburg County. These areas are also less provisioned by CATS public transit services. Consequently, suburbanizing Latinos face the greatest accessibility barrier (spatial mismatch) around health services.

Figure 25. Accessibility of Latino-Oriented Housing Services



As seen in Figure 25, there is a sharp concentration of Latino-oriented housing services in two areas of Mecklenburg County. Consequently, Hispanic neighborhoods located near downtown Charlotte are best served by this category of services. To a lesser extent, the Eastside neighborhoods around Eastland have adequate (“average” and “above average”) services. But the concentration of services in these two areas leaves the remainder of the three Latino residential communities with “no services”. Public transit offers some accessibility opportunities to mitigate the limited distribution of services. However, large swaths of North Charlotte and suburban portions of Southwest Charlotte and Eastside Charlotte have limited CATS service. Overall, for Mecklenburg County Hispanics, the distribution of housing services displays one of the most serious spatial mismatches among all categories of services.

Figure 26. Accessibility of Latino-Oriented Public Safety Services²²



Mirroring the previous analysis findings, public safety services are geographically concentrated in two areas (Figure 26). Center City Charlotte and Eastside Charlotte are best provisioned, with large areas rated “significantly above average” or “above average” for public safety. In contrast, large areas in North Charlotte, Southwest Charlotte, and even Eastside Charlotte have recorded “no services”. CATS has helped to increase accessibility. However, the most suburban portion of all three districts were not assisted by public transit.

²² As explained previously, the services represented in this analysis reflect only those oriented toward or linguistically accessible to the Latino community. As such, individual CMPD police stations are not included. See Appendix A for included sites.

Taken together, the individual results of the spatial mismatch analysis offer several critical insights into the accessibility of services for Mecklenburg County's Latinos. The essential findings include the following:

- Center City Charlotte has the greatest concentration of Latino-oriented services in Mecklenburg County, yet that area has few Hispanic residents. While the configuration of local roads and highways, and the availability of CATS public transit service to Center City, does make service provision in this area accessible to suburban residents, transit cost and travel time, especially from outlying residential areas, discourages utilization.
- Latinos living in Eastside Charlotte are best served in terms of all categories of public and non-governmental services. This residential district has the highest concentration of service sites. Albeit at varying levels, all six categories of service are represented in East Charlotte. CATS transit coverage further enhances service accessibility to this area.
- Among Latino residential areas, North Charlotte is the least provisioned with service options. While public transit mitigates against service isolation for some portions of this area, many neighborhoods still lack convenient access to services or service representation altogether.
- The most outlying suburban areas in all three residential clusters are consistently underserved. In some categories, service facilities are simply not located in these areas. CATS coverage is absent or marginal. Latinos living at the greatest distance from Center City are most at risk of service provision isolation.
- Of the six service categories analyzed, Healthcare, Advocacy, and Educational services are located at service points that best serve the distribution of Mecklenburg County's Latino population.
- Conversely, of the six categories analyzed, Housing, Public Safety, and Economic Development services are the least effectively located to serve Latinos in Mecklenburg County.
- Finally, CATS public transit provides some assistance to increasing community access to service providers. But service coverage and location favor limited geographical areas in Mecklenburg County.

VII. KEY INFORMANT INTERVIEWS

During the Fall of 2005 and early Spring of 2006, members of the research team conducted over 40 one-on-one and small group interviews with various key informants drawn from both the Latino and non-Latino communities across Mecklenburg County. Interviewees included community leaders, public, private and non-profit service providers, as well as representatives from business, political and media organizations. A snowball sampling method was utilized in which a small set of primary key informants including key Latino leaders and service providers were identified and interviewed first. Subsequently, each interviewee was asked to identify 2 or 3 other individuals whose work or point of view would be an asset to the study. While the initial target sample size was 20, this methodology yielded over 40 people whose perspective was seen as critical to include in this analysis.

The interviews themselves were structured. This means that all people were asked the same set of questions. The interview design did, however, provide opportunity for open dialogue at various points throughout the hour-long interview session. The questions focused on the identification of needs for the Latino community, barriers to meeting those needs, and the challenges of new Hispanic settlement and adjustment in Mecklenburg County. All interviews were tape-recorded and transcribed and then analyzed using a basic content analysis methodology. To ensure the anonymity of our informants, direct quotations cited in this report are not attributed to individuals or to their specific service or leadership role.

Overall, the interviews offered strong confirmation of the settlement experiences and prioritization of needs that have been outlined in previous sections of this report. Specifically, five main themes emerged from these interviews: communication, accessibility, diversity, transition, and coordination. These themes both reaffirm findings in other components of the study and shed additional light onto some of the complexities of settlement and adjustment processes of both immigrants and the societies and communities that receive them as newcomers.

Communication

“Language is something that has to be overcome but learning a second language is very difficult and requires time and opportunity and neither are available to (the Latino) population or at least to the population that we are seeing here in Charlotte that is growing. (This) is the population that’s working ten, twelve hours a day and even on weekends.”

Communication, especially in the form of Spanish language acquisition and usage by service providers and English language acquisition and usage among new Latino residents was by far the most critical need identified by interview respondents. Service providers spoke about the difficulties of providing service to, or identifying the needs and expectations of, the Latino community when few or no staff members could speak Spanish.

Similar challenges occur for the person seeking service when he/she cannot communicate in English.

The interviews illuminated a common call for the need for language training and for staff—especially in reception, front-line service or information dissemination positions—to be fully bilingual in Spanish and English.

Several interviewees emphasized the importance of presenting Hispanic clients with written materials in both English and Spanish, noting that this approach provides an invaluable opportunity for self-taught language acquisition. These materials also need to be immediately accessible to clients, up-to-date and regularly distributed.

In addition to the importance of hiring and retaining staff skilled in both verbal and written Spanish, a common refrain throughout the interviews was that simple interpretation of information or translation of materials was insufficient to ensure effective communication and thorough comprehension.

“We dealt with (the language barrier) specifically in that we had a company that the city used to translate information and then we found out that the information wasn’t simple enough. It wasn’t basic enough, it was too intellectual, on a different level than the people we were trying to target. So then we put it down to a third grade level because a lot of the Latinos that we were targeting ...they can’t read or write English or Spanish.”

An important part of the comprehension problem is that a high proportion of the adult Latinos settling in Mecklenburg County have only limited formal education and are functionally illiterate in their own native tongue. As a consequence, even when English language materials are translated into Spanish, their content cannot be fully accessed and understood by Spanish speakers who cannot read or write. Moreover, interviewees noted that information and/or instructions were often written and then translated at a level of linguistic sophistication that went beyond the literacy capabilities of many people seeking service. As the above quote indicates, adjusting language levels to take into account limited education and literacy is critical in assuring that translation and interpretation efforts are successful.

Although less frequently mentioned in the interviews, it is important to point out that in Mecklenburg County’s diasporic Latino community, Spanish is not necessarily a shared language. As a growing proportion of migrants to Mecklenburg move from rural and/or isolated indigenous districts across Latin America, the use of native languages or dialects is increasingly frequent. At least one interviewee also mentioned that although the size of Mecklenburg County’s Hispanic population migrating from Brazil is small, Portuguese is also a prominent Latino language.

Communication, the interviewees pointed out, is about more than just language. It is also about understanding, about ensuring comprehension.

“Language is a big issue, obviously ... but a lot of times we will just translate language, but not content, or idea ... it is just translated and some things get lost in translation.”

Another interviewee explains that while some of her Latino clients appear to be able to read and speak basic English *“many haven’t learned enough English to really understand the words.”* This of course, becomes especially critical when providers are dispensing medical information, personal finance, or personal safety instructions.

A corollary issue is the manner in which the information is conveyed. One respondent commented that while many businesses and agencies are proactive in reaching out to the Latino community, translating materials and advertising in Spanish is not necessarily the most effective way to achieve this goal.

“... a lot of people just say well we’ll just do advertisement on the radio, we’ll do this and that. Good, but most of the advertisement and most of the way people know information is through word of mouth. So even if they spend billions of dollars in radio spots and even translating pamphlets and stuff in the language, if the community doesn’t know first-hand from a neighbor, from a sister, a good friend or somebody from this or that agency that this program is good, they’re not going to do it because they are fearful. They want to make sure that what they’re doing is something they’re certain they can accomplish.”

Another component of effective communication is cultural competency. Beyond simply speaking Spanish, it is important that service providers be able to interpret or understand culturally distinct responses or situations that may affect the delivery of service or conveyance of information to an individual, household or group.

“The other part of (communication)” notes one of the interviewees, *“is how we communicate. It could be as simple as in how we present ourselves that could be misunderstood. Some of that is cultural and some of it is just that we don’t see things in the same way, and we think we’re doing something in the appropriate way, but they may view it as something else. I see this a lot ... there’s miscommunication, a great deal between the community and our service providers.”*

Effective service, then, is increasingly about understanding the cultural differences that lead to miscommunication and misunderstanding, and adjusting service provision practices accordingly. One respondent explained that an understanding of gender dynamics in Latino households is critical to gaining access to the community.

“If it’s a household with a male, husband or live-in it doesn’t matter, you basically don’t come in by talking with the woman. You come in talking to the male and if you can’t establish contact with that male, then you are not going to get anywhere, because you are not going to be able to get into the home ... it’s a very male-dominated kind of society”.

To reach the broader Latino community, the same interviewee also suggested establishing contact with an elderly female already identified as a leader or advisor.

“If you can establish contact with an elderly citizen ... an older woman that handles all of the business and helps with business decisions and things like that, kind of an advisor, then if you can make her understand, then you’ve pretty much got that community pocket, you’ve got them and raised their understanding.”

While this particular strategy may or may not be appropriate for all service providers and for all Latino communities, the point remains that understanding the subtle dynamics that come with a client’s cultural background is an important element to successful service provision.

Appearances and perception also matter. An interviewee explained that when her agency stopped arriving for site visits in an officially marked car, the frequency with which staff were invited into homes to tell Latino households about potential health hazards increased. This anecdote is supported by interviews with police officers who speak about their challenges reaching the Latino community because of a culturally ingrained wariness of the police or other authority figures based on people’s interactions with law enforcement in their countries of origin. Communication improved among these constituencies for example, when some police officers serving Mecklenburg County’s Latino community stopped wearing uniforms.

Finally, poor dissemination of information and materials was highlighted in the interviews as something that impeded effective communication between service providers and the Latino community. The translation of written materials, the hiring of Spanish-speaking personnel, sensitivity to cultural issues are all important avenues through which to address the communication challenges. However, unless there is some degree of certainty that the information actually reaches the intended population and has been fully understood, then these efforts can easily fall short of their potential. Interviewees stressed that more attention needs to be paid to whether translated materials, distributed to parents of school children, for example, are actually being read and acted upon; whether the leaflets an agency has paid thousands of dollars to translate are actually being picked up, read and fully understood by Latino clients; or whether staff trained in cultural competency and Spanish language are placed in situations that can best take advantage of their skill sets and expertise. Evaluating the success and effectiveness of communication improvement initiatives, especially dissemination efforts, was a repeated recommendation among our key information interviewees.

Accessibility

Within Mecklenburg County’s Latino community, there is a high degree of reliance on CATS public transit or shared private transportation. As the previous spatial mismatch analysis indicates, services tailored or targeted to meet the needs of the Latino community are not always located in the areas in which the population concentrates residentially. Indeed, some areas within the three primary Hispanic residential districts are notably underserved according to the mismatch methodology. Thus, for many Mecklenburg County Latinos, going to work or accessing services requires lengthy and complicated bus rides across the county.

“This community doesn’t even have a regular bus that comes in, they have one of those little shuttle buses that they can catch ...but it goes to Eastland Mall then they have to transfer again, and then they go downtown and transfer again. They could be riding all day long just to get to the doctor’s office.”

The challenges of depending on public transit in a county where the bus system is poorly integrated and unevenly distributed across city space, are further compounded for those who are unfamiliar with the city’s geography, or have limited English capacity and may not be able to read street signs or understand a driver’s call about where a bus is stopping or being re-routed. One respondent explains,

“Transportation is a barrier (to service access) too because they can’t ask how to get off at a certain place if they can’t speak English. They can’t speak the language and the driver might not speak Spanish – so it all goes back to language.”

The issue of accessibility is not just about the mismatch between where people live and where services are located or about the challenges of public transit reliance, there can also be issues of accessibility once a person reaches a service provider location. For example, several interviewees pointed out that while many service providers did have Spanish-speaking staff, sometimes that staff member was not easily accessible to the public. In terms of accessibility, it matters whether a Spanish-speaking employee is the front-line provider or part of the reception staff, or the off-site site manager or CEO. A comment from an interviewee in the healthcare field illustrates this point.

“Our services have gotten better as far as providing bilingual people to make appointments. I would say about two years ago that was non-existent. So when our clients called to make an appointment they would immediately face that barrier.”

Beyond the availability of Spanish-speaking staff in organizations or agencies, there is also the manner in which the person seeking service is received. The way in which a client is welcomed into an office or situation is a critical and often overlooked component of accessibility. Sometimes, interviewees reported, front-line or reception staff act as gatekeepers to service provision. Beyond their ability to speak both English and Spanish, does front-line staff convey full and accurate information? Do they treat Latino, Anglo and African-American clientele equally or differently? Are they supportive and helpful or angry and dismissive when someone doesn’t have the correct paperwork or cannot show proof of citizenship or service eligibility?

A final point raised in the interviews with regard to accessibility was about the totality of service access or the continuity of care. This challenge was mentioned most frequently in regard to the provision of medical services where there exists an over reliance on emergency care and/or lack of access to primary care physicians. This situation often means that treatment for an illness or ailment is limited to an initial visit without necessary follow-up by a specialist or pharmacist. For many Latinos, this is a function of lack of access to healthcare, an inability to pay the fees incurred, or a poor understanding of the healthcare system.

One of our respondents explains,

“What continues to be an issue is medical care. Children with chronic illnesses such as asthma... they don’t have continuity of care. They may go to the free clinic, they may go to an urgent care clinic, they go to the E.R. ... and I think they know that the E.R. is not the best place to go to get care but there’s no other choices ... and so we have children ...they’re having a hard time breathing and are unable to participate in the activities at school. Mom has the pump that she got in the Emergency Room a couple of months ago, but when (the School Nurse says the child) needs to go back because he is wheezing too much and not getting better, the mom says I can’t afford it, I can’t take him back. This is because it involves a chest X-ray. I don’t think it is the parents’ fault. I think the parents recognize the need to go but there’s just so few options for them, because of their finances, because of their immigrant status and yeah, because what’s available— limited resources.”

Another respondent sees this issue from a different perspective,

“We have grave issues about continuity of care, medical care. I know that there are certain physicians ... when they find out that we are looking to get services for a child and there is no English in the home, they have backed out of offering services, and that infuriates me.”

Diversity

“The other thing I see in the Hispanic community is [that it in] itself is very divided ... a good example here in Charlotte is that [in] certain apartment complexes, you will see a certain nationality there be it Central American, Salvadoran, Guatemalan, even a certain part of Mexico in one apartment complex or one building ... they kind of cluster together.”

As noted earlier in this report, Mecklenburg County’s Latino population is diverse in terms of its national ancestry. While it is true that the vast majority of Hispanics in Mecklenburg County are of Mexican descent, this fact has, according to our interview respondents, obscured the many other national heritages that also comprise the core of the county’s Latino population. A lack of awareness of the community’s diversity has led to a failure to recognize the different reasons for and experiences of migration as well as the different ways in which various groups of Latinos settle into and contribute to Mecklenburg County society. As our interviews clearly revealed, the experience of the Central American migrant fleeing civil war is very different from the Mexican migrant leaving her/his country of birth to escape dwindling opportunity and dire poverty. And these reasons for migration are equally different from the South American migrant fleeing a threat of persecution or imprisonment for political beliefs. Because such differences play a powerful role in the manner in which individuals or groups integrate and assimilate, they therefore, have important implications for service provision and access.

Our interviewees pointed out, for example, very different perceptions and attitudes toward the police and the rules of law based upon the class and place of origin of the Latino

immigrant. In particular, men coming from rural areas in Mexico, or Central America, or urban barrio (slums) districts were perceived to be very cautious or even fearful of encounters with police. Their experiences with law enforcement in their home country created a legacy of mistrust and exploitation that has extended to Charlotte despite efforts on the part of the Charlotte-Mecklenburg Police Department to change perceptions and build trust.

Different perspectives and experiences about healthcare were also cited in our interviews as connected to different national and intra-national backgrounds of Mecklenburg County Latinos. For those coming from more rural or indigenous contexts, skepticism of formal westernized medicine was occasionally cited by interviewees as an obstacle to accessing available healthcare services.

There are, of course, also significant class-based differences within Charlotte's Latino community.

“Well, the first challenge that we are seeing right now is making sure that the community at large understands that not everybody's the same. It's like any other community in the general population, not everybody's the same. There are professionals that are contributing as well as people that are not doing the right thing, breaking the law. So that is a challenge, to portray that it's not just ... “Latinos do this or that or the other”. Understand that there are different levels of education, professionalism, success, as well as lower class, middle class and upper class. People just tend to bundle us in one package, and it's not right.”

A common refrain among the interviews when addressing issues of intra-Latino diversity was that while many wished to see greater sensitivity about the differences within the Latino community, at this stage of settlement and in this political context, common needs—especially Spanish language training for service providers and English-language training for migrants—had to be addressed first. This was seen as a critical component of ensuring that people's basic needs—health, safety, education—are met.

Transition

“Mecklenburg County is not ready for the boom that we are having. I see in Mecklenburg County what I saw 15 years ago in Houston, Texas. There is a lack of services everywhere—jails, hospitals, schools, public services and it's because, I mean we're getting people from everywhere—Los Angeles, Florida, New York, there are tons of people who are coming every single day here, looking for a better life, looking for better salaries, and looking for a nice and quiet place to live, which is Charlotte, North Carolina.”

As earlier sections of this report have detailed, the growth of Charlotte-Mecklenburg's Latino population has been rapid and substantial. As such, it is not surprising that local service providers are experiencing significant challenges identifying, prioritizing and meeting the range of needs presented by Latino newcomers.

While the pace and scale of Latino settlement in the county are perhaps the greatest factors in these challenges, interviewees' also highlighted demographic shifts within the Latino population. A growing number of women and children have begun to seek assistance from many of the service agencies and organizations interviewed in this study. Some respondents spoke anecdotally about the growing number of undocumented clients and a growing number of Hispanics coming directly from foreign countries rather than from other places within the U.S. The implications of these transitions are many, particularly when we consider that a large number of the newest arrivals are coming with limited resources and are struggling with the challenges of both post-migration adjustment and poverty. When Mecklenburg County's service providers first recognized (most often in the early 1990s) that a growing component of their clientele was Latino, they also noticed that a significant proportion of this group was single men who had come to Charlotte after having spent some time in another U.S. location – most often from Texas or other southwestern U.S. states. As a consequence, many of these men were already familiar with the types of the services available in American cities and comfortable navigating their daily and working lives with limited outside assistance. Beyond this, the initial service structures that were put into place in Charlotte-Mecklenburg to meet Latino needs were often designed with this male, single and childless population in mind. As the Latino population in the county has grown and matured, an increasing number of women and children are now seeking assistance from providers whose structures and programs are not targeted to their specific needs. Moreover, as direct migration and poverty become increasingly common characteristics of Mecklenburg's newest Latino arrivals, the range and depth of assistance required to start lives anew in this city has also increased.

“A vast majority of the (newcomer Latino population) comes from Northern Mexico or Central America and a lot of folks come from rural areas ... a lot of these individuals have completed primary school, but a lot don't have anything beyond that so ... the socioeconomic level that they came from and that they have here is a handicap for them because they are less equipped to navigate the system...it takes many years to get a step above survival...there are such large numbers of people that end up living in poverty ... and then (we start) to get into the ones that decide to bring families, they have children, and what the impact of poverty is on those families in need versus the individual workers that come here... it is a deep impact because of what it represents ... people come already with poverty and they live in poverty here”

As the introductory section of this report has already addressed, the national debate around immigration, coupled with local challenges and opportunities that flow from increased Latino settlement has had palpable effects on the community climate. While the earliest interviews conducted for this research often addressed the fact that compared to traditional gateway cities in California and Texas, Mecklenburg County was viewed as a more receptive and welcoming place to migrants seeking work and opportunity for their broader lives and families. Over the course of the interview process, the respondents began to speak more frequently about the transition of the Charlotte region from a once welcoming place to an increasingly hostile one.

Coordination

“I think that we are, as a city, we’re starting to embrace other cultures a little bit more, a little bit better. But, sometimes when you’re coming at people from every direction...and you are closing in on them. I think we need to consolidate our information and stop reinventing the wheel.”

The need for better communication and coordination among various service providers was a final and consistent theme throughout the interviews. In particular, there was a common perception that while many agencies across the city and county were trying to implement changes and re-design programs to meet the needs of their Latino constituencies more effectively, there remains a lack of coordination between these efforts. This situation, in turn, translates into replication for some services and an absence of other services.

“There are Latino community agencies working with this (needs and barriers); however, I think that there is duplication of services. I don’t think that any Latino agency or any agency that provides services to the Latino community has done any survey to try and find the need itself. I can list five different agencies right now and if you call them, all of them provide, in a way, the same type of services, with a variation that may be one or two different services, but in general they do the same thing. And maybe that’s not what we need. What we need is maybe new agencies that provide other types of services ...”

Ultimately, what many in the service provision community called for was better communication among agencies so that there could be better information flow about what was being provided, by whom and where.

“Truly my dream would be to have all the agencies sit down at one table so that they can coordinate their efforts, coordinate their finances. Everybody, and here this might be a myth, but from my perspective, everybody’s off doing their own thing. And if we could truly just sit down around a table and say, look here’s the pie and this what needs to be done for these families ... let’s discuss how we can provide a continuum of services so we’re not overlapping one another, we’re not letting some families fall through the cracks. We just need a coordination of services and I think we’d be much more productive if we did it together. Much more productive and much more fiscally responsible and much more efficient.”

Recommendations

In summary, the following recommendations surfaced from the key informant interviews.

- Expand language-training opportunities for both service providers and immigrants themselves.
- Increase cultural competency training for service providers that takes into account the diversity of the Latino community.

- Implement systematic follow-up and monitoring of outreach initiatives (Is information received? Is it understood? Is it acted upon?).
- Design better coordination and communication between service providers to minimize overlap and competition.
- Bring service delivery to the community. Successful outreach includes physically going into the Latino community to service clients in their places of residence (neighborhoods, apartment complexes); worship (faith institutions); or education (schools).

VIII. CONCLUSION

The findings of this study illustrate that the needs of the Latino community are both specific and universal. The specific needs revolve primarily around issues of culture and language. Since many of the Latino residents of Mecklenburg County are foreign-born immigrants, they often need assistance overcoming linguistic and cultural barriers, especially if they are newly arrived to Mecklenburg County, North Carolina, or the U.S. However, the Latino community also has a variety of more universal needs that it holds in common with other minority and low-income communities. The need for better employment, transportation, and healthcare alternatives are not unique to this demographic group; these challenges disproportionately affect all low-income populations.

Of all the needs outlined in this report, five rose to the top as clear priorities: language; cross-cultural competency; healthcare access; improved transportation and accessible service location; and better communication and coordination between service providers. It is important to note that these issues were identified by both Latino community members and service providers. Moreover, these needs were consistently cited during all phases of the research process.

Among all of the issues identified, one critical need stood ahead of all the others. This was the lack of functional bilingualism on the part of many Latinos in Charlotte-Mecklenburg, as well as on the part of front line staff in service agencies. The absence of language skills creates a wide range of service provision and settlement adjustment problems. These include tension between service providers and clients; a lack of accessibility to initial and continued assistance; and incomplete and ineffective service provision. Countywide improvements in the quality and availability of English as a Second Language (ESL) classes are clearly necessary, but learner preparation, the location and timing of classes, and childcare are obstacles to participation. People who are not functionally literate in Spanish will have a more difficult time learning English. A lack of transportation can preclude participation in ESL classes, particularly if the classes are a great distance away. Employed Latinos must take classes in their limited spare time (evenings and weekends), so scheduling is a critical issue. And many parents have childcare responsibilities that make it difficult for them to take classes regardless of the time of day or week the class might be offered. Initiatives to expand ESL opportunities should take these issues into consideration.

Functional bilingual capabilities are not just important for the Latino community. Such capabilities are also assets for service providers. Telephone survey participants, key informants and focus group members all cited a need for more front-line bilingual, bicultural staff at service agencies. Similarly, agencies that responded to the mail survey indicated that they recognized the need for more bilingual staff and volunteers. Such employees improve efficiency, accuracy, and quality of service.

A second broad area of need is cross-cultural training for both service providers and Latino newcomers. While Latinos in the telephone survey indicated that they were generally satisfied with services received at public agencies, focus group participants and key

informants gave a more nuanced perspective. Indeed, although the community might be generally satisfied with overall service provision, the general feeling was that cultural competency could be enhanced. A basic understanding of cultural and social differences between peoples from different countries might be a good beginning. For example, if cross-cultural training were provided, reception staff might know that a woman from Guatemala who walked in the door may speak a language other than Spanish. In fact, approximately 45 percent of Guatemala's population is Mayan and, in turn, speaks one of twenty-one Mayan languages/dialects, and is likely illiterate. The literacy rate among Mayan women in Guatemala is estimated at 30 percent, while the literacy rate for all Guatemalan women is 63 percent.²³ In this case, cultural competence might not solve the communication problem, but would allow staff to find appropriate resources.

A corollary is that Latino newcomers also require cross-cultural training. This is critical to providing them with information about the American and Mecklenburg County contexts in which they are building post-migration lives. Such cross-cultural training could occur in the following ways (among others): free classes, workshops or distribution of materials that detail, in easily understood terms, the expectations of community citizenship; neighborliness and adherence to the law; suggestions about how to become involved in community initiatives or avoid exploitation of unscrupulous landlords or service providers; information about how to find housing, a doctor or legal services; instructions about how to register children in school, access necessary immunizations and use car seats; and information about the role of police, health care workers and schools in American society.

Many service agencies in Mecklenburg County already provide this type of information and guidance, but do so on an informal basis or focus efforts only on their specific service area. Newly developed or realigned programs should attempt to consolidate cross-cultural training in a way that makes the information provided more comprehensive and focused on the newcomer settlement and acculturation process. For example, a single workshop about life in Charlotte could provide basic instructions about how to access a doctor, register for school, search for safe housing, and relate to police officers and neighbors. Such an approach would likely have a significant impact on the ease and success with which newcomers settle and integrate into Charlotte society.

A third critical need is lack of access to healthcare. Many within the Latino community neither qualify for, nor can afford, health insurance. As such, they do not have a primary care physician; do not receive preventative care; and tend to visit a doctor, urgent care, free clinic, or emergency room only in situations of extreme duress. In the current debate over immigration and policy reform, one consistent message is that undocumented persons cannot receive public services, especially expensive assistance like health care.

“Federal law generally prohibits legal immigrants from enrolling in Medicaid or the State Children’s Health Insurance Program (SCHIP) for the first five years that they reside in the United States. Undocumented immigrants are

²³ CIA World Factbook, www.cia.gov/cia/publications/factbook; United Nations Statistics Division, www.unstats.un.org

generally ineligible for Medicaid or SCHIP regardless of their length of residency in the United States.”²⁴

In the United States, the average annual expenditure per consumer for healthcare was \$2,350 in 2002, the latest year for which data is available. For Hispanics, the amount was far lower at \$1,366.²⁵ Yet this sum, which is per person, is beyond the means of many Latino households in Mecklenburg County. Thus, most immigrants rely solely on emergency Medicaid, which only assures that emergency medical problems will be screened and stabilized. It does not provide for longer term treatment or care.

Beyond harming the patient or potential patient, the lack of access to primary healthcare also has negative consequences for the wider community, Latino and non-Latino alike. Illnesses may not be treated until they become acute and, in the process, treatment becomes more costly and burdensome to the healthcare system. Untreated medical conditions cause absenteeism at work and school and may interfere with productivity and learning—something that was emphasized repeatedly in key informant interviews with educators. Contagion can also become a greater public health issue since Latinos and others who do not have regular contact with health care providers may not recognize that they or their children have highly communicable illnesses such as influenza, chicken pox, or even tuberculosis.

A fourth concern is related to the lack of public transportation options and the location of services. The spatial mismatch (between where many Latinos live and where services are available) creates barriers to effective service provision and access. As noted in the key informant interview section of this report, the Latino community is more reliant than average on public transit and shared private transportation. Since the density of public transit routes in Mecklenburg County declines as one moves away from the center city towards the suburbs, those living on the East side of the county beyond Sharon Amity or W.T. Harris Blvd or those in outer suburbs like Pineville or Mint Hill are challenged to access the bus system. In such cases, community-based service alternatives might be a means to overcoming geographic barriers. Satellite offices in the community would not only overcome spatial mismatch challenges, but over time may increase the level of trust between a service agency and its Latino clientele by becoming a part of the community fabric.

Finally, the findings of this study show that considerable value could be added by coordination of services across agencies. Government agencies and non-profits need to know more about what one another is doing and should learn from each others’ successes and failures. Dissemination strategies that work for one organization may work well for another. Programming mistakes can be a “lesson learned” not just for a single organization,

²⁴ Staiti, A., Hurley, R., and Katz, A., *Stretching the Safety Net To Serve Undocumented Immigrants: Community Responses To Health Needs*, <http://www.rwjf.org/files/research/Issue%20Brief%20No%20%20104%20Final.pdf>

²⁵ U.S. Bureau of Labor Statistics, *Consumer Expenditure Survey*, annual. From: *Statistical Abstract of the United States: 2004—2005*. Statistics for 2002, the latest year available.

but for all. A formal network of community service providers that meets regularly and incorporates Latinos and non-Latinos alike could serve as an effective community of practice. This community would incorporate people and agencies that have a common interest in meeting the needs of Mecklenburg's Latino community collaborate over an extended period to share ideas, find solutions, and build innovations. Such a network should take a longer term, strategic perspective, including how to address gaps in service, how to avoid duplication of efforts, and how to leverage resources. In addition, the network should be purposeful in including not just recognized Latino and non-Latino service providers and community leaders, but also representatives of the population that is to be served (i.e. new immigrants and low-income families).

In sum, this study makes the following recommendations:

- Service providers should invest in personnel and training that increases Spanish fluency and cultural competency within their agencies.
- Adult language and literacy programming for Mecklenburg County Latinos are critical service provision needs and should be expanded.
- Location of public services should be positioned to increase accessibility for Mecklenburg County Latinos.
- Public information strategies to inform, educate and help integrate Mecklenburg County Latinos need upgrading and inter-organizational coordination. Dissemination strategies need to be evaluated regularly to assure that information is reaching target audiences.
- More low cost healthcare alternatives need to be provided and made accessible to the Latino community. Health care initiatives should also focus on providing a continuum of care.
- Public and private service providers need to coordinate and collaborate to better address service needs, funding shortages and avoid overlap and competition between service initiatives.
- Strategic planning to prepare for on-going demographic change in Mecklenburg County's Latino community needs to occur now.

We would be remiss not to recognize that these recommendations come at a time of a growing reluctance to provide publicly-funded services to undocumented immigrants. However, as emphasized in other sections of this report, Charlotte-Mecklenburg's Latino population is on a trajectory of continued growth and change. Given the region's strong economic growth and rising prominence as a destination of choice for both foreign-born and domestic migrants, population growth is a certainty. Recognizing and meeting the needs of Mecklenburg County's Latino population in an effective and comprehensive

fashion is critical to our community's continued prosperity and emergence as a world class city.

AFTERWARD

“Asamblea de la Gente”: Reaction and Response to the Study

Following the analyses and preparation of this report, the Latin American Coalition organized and hosted a community-wide meeting. The event was held on Saturday, June 3, 2006, at the Eastern Hills Baptist Church. This facility is located on Albemarle Road in Eastside Charlotte.

The purpose of the Asamblea de la Gente was to share the research findings with the Latino community; solicit individual and collective responses to the study, especially its conclusions and recommendations; and, to continue the discussions and dialogue around the needs and aspirations of Mecklenburg County’s Latino residents.

As part of the program, attendees were invited to participate in Spanish-language small group discussions. In each of these settings, participants were asked to comment on a service provision issue that affected the lives and quality of life for Mecklenburg County’s Latino community. Positives and negatives, suggestions for improvements, and day-to-day experiences, were all a part of the lively discussions. In accordance with the themes contained in this report, the individual group sessions were focused on advocacy (life as an immigrant and immigration); business start-up; employment; education; health; housing; and, public safety.

In every discussion group, a native Spanish-speaking facilitator guided the process and notes were posted on flip charts and later transcribed. Because of the free form structure of the groups and differences in leadership style, the prepared notes of the conversations follow differing formats. For example, some notes are organized around specific questions and individual responses, while others are reduced to bulleted phrases. Although these format differences make direct comparability between discussion groups impossible, this issue does not take away from the content or the accuracy of this information. The ideas and narratives offered by these individuals reflect the larger voice of the Latino community.

Life As An Immigrant

The best about being an immigrant:

- One is not alone.
- [be able to] spread knowledge about our culture.
- [be able to] show our humanity.
- Work opportunities (less pay, but there are opportunities).
- Bilingualism.
- Education for children.
- [be able to] show our capabilities.

The worst about being an immigrant:

- Work for less money even though one is qualified [lack of documentation].

- Discrimination by others and by our own people.
- Having to compete against other Hispanics (Mexicans, Colombians, Costa Ricans, etc.
- Feeling insecure, economic instability, etc.
- Lack of identity (we all become “Mexicans” to others).
- Problems with youth: use of drugs to avoid racial problems.
- Lack of motivation.
- Discrimination in the schools on the part of educators and teachers.
- Stereotypes.

Taking care of elderly in the family:

- Americans—coldness; nursing homes.
- Latinos stay at home; moral obligation; sociable; difficult to send an elderly person to a nursing home.

Differences in educating/raising children in the U.S.:

- Baby-sitters and day-cares are not used by Latinos (preferable to not use).
- Desire to pass on the culture of one’s home country.
- Belief that the teacher should educate the child.
- Responsibilities.
- Americans: independent.
- Latinos: family ties.

Culture shock:

- Language barrier.
- Accepting.
- Lack of affection/aggressiveness.
- Not being able to work professionally.
- Not having familiarity or love.

Immigration Issues

What immigration benefits are the most important for you to have—short-term benefits (such as a work permit) or long-term benefits?

- Long-term for permanent security.
- Become an integrated part of society.
- To eventually obtain citizenship.
- Visit family.
- With a work permit there is a difference between being able to get a job and being able to obtain job growth—when compared to being a legal permanent resident.
- Citizenship allows one to petition and obtain residency for other family members.
- Citizenship allows one to vote and have direct participation.
- All this having been said, a simple work permit still helps one out tremendously.

Would you accept a temporary work permit if it came with the condition to leave the country several years after accepting it?

- No, because it would be beginning something and then having to cut short the effort.
- It depends on the expectations of each person.
- Things change and the one who starts with short-term intentions may later on decide he or she wants to stay.

Who do you go to with immigration questions?

- Immigration attorneys (but they are generally expensive).
- Other Latinos in general.
- Legal service organizations that are not for profit.
- Internet, books.
- People do not know in general who offers legal services.
- Latino services companies (to save money); take advantage of the community.
- Referrals given by social workers, religious leaders, trustworthy organizations.

How do you find out about immigration laws that impact you?

- Media—Hispanic newspapers, TV, internet, radio, friends, books (TV, internet and books considered more reliable sources).
- Sometimes there are contradictions in the information.
- Compare between the different media in different languages and on the Internet.
- Other ways to get more details: listening to debates in English and Spanish, go to representative organizations to get more information.

Do you know how to find an immigration attorney?

- There are different sources but cost keeps people from using services.
- Lack of assurance that the attorney can help keeps one from investing money in the process.

Do you know how to determine whether an attorney is licensed? How to determine whether an attorney specializes in immigration law?

- Internet.
- Lawyers associations (bars, lawyer referral service).
- One must first know how the system works.
- Go to community organizations for general information.
- Telephone book.
- Personal recommendations.

Has anyone other than an attorney helped you with your immigration papers? How did you find the person? What was the experience like?

- Family members.
- Many people go to for-profit Latino service providers (they trust them because they speak Spanish).
- The Latino community is confused about what it means to be a “notary” in the U.S.
- People don’t know who is qualified and/or authorized to offer services.
- Many do not trust attorneys or others because they have been taken advantage of.

- Trust should be based on moral values and professional ethics.

What are some of the difficulties associated with a lack of documentation or immigration status?

- Insecurity, risk of deportation.
- No access to education.
- Not being able to travel to the exterior/visit family members.
- Not being able to count on basic services (health, etc.).
- Not being able to exercise one's profession.
- Lack of opportunity for professional growth.
- Lower salaries.
- Risk of family division.
- Young people feel anxiety/fear- their motivation is impacted. They feel frustrated.
- Adults also suffer anxiety, depression, and frustration.
- Leads to physical and psychological deterioration.
- Addictions.
- Lack of acceptance from U.S. nationals and others.
- Latino community isolates itself.

On obtaining legal status, how would your life change?

- Personal and social growth for both personal and social well-being.
- Be able to help better this country.
- Be able to participate in the political and governmental processes.
- Be able to help grow fiscal base of the country by means of one's taxes, investments, etc.
- Have more fair and transparent options that we can use throughout our lives.
- To be able to buy properties paying less interest.
- Access to credit.
- Equality and access to education.

Business Start-Up Issues

- Important information to know before opening a business.
- Complete market analysis/product research before opening a business.
- Know the rules (laws that regulate the type of business).
- Know how to look for information.
 - Specialists, bank, Latin American Coalition.
 - Take a preparatory course.
 - Visit government offices to obtain licenses and permits.
- Need for capital to invest in the business.
- Selling products that abuse the public trust.
- A place to exhibit products.
- Barriers to having a business.
 - Capital.
 - Knowledge.
 - Market analysis.

- Starting a business in something that one enjoys.
- Credit (one must establish lines of credit).
- Start building a credit history.
- The “Loncheras” (lunch-mobiles).
 - Some are operated with permits, others are not.
- Obtain permits for operating a business (fines for operating without permits).
- Cultural to assume the risk of operating without permits.
- Language barriers keep one from learning what one needs to know.
- Having to pay to learn English is an excuse for not learning the language.
- Awareness-raising campaigns by Latino organizations.
- Advice from professionals when you are ready to open a business.
 - Banks.
 - Latin American Coalition.
 - Other organizations.

Employment Issues

- Standard resources.
- Clear regulations are communicated.
- Have employment manual.
- Good upward mobility.
- Understanding of family illnesses (some cultural challenges).
- Family Leave Act.
- Published minimum wage.
- Sick leave.
- Sometimes one does not know what benefits are being provided.
- Limitations in workplace because of English (it is difficult to move up).
- Family comes first; work is good, but time management between both is a challenge.
- Public transportation is an obstacle for employment. Charlotte is not ready for mobility.
- One comes to U.S. to work for children’s future.
- Family well-being determines (for Latinos) workplace and employment decisions.
- Race relation issues increase at the lower levels of workplace. Ignorance is a big factor.
- Minority status is not a motivation for Latinos as it is for other minorities (possible socialist approach).
- Not clear on overtime; sometimes not interested.
- Danger of breaking up positive and good family dynamics with workplace interaction in the U.S. (gender bias, cultural issues, machismo).
- Available information in workplace manuals might not be explained to and understood by Latinos.
- Do not have knowledge of benefits about insurance and they are made to resign. Not enough support by their own Latino liaisons.
- Knowledge about Latino organizations, Joblink, and employment support, but not much knowledge about anything else.

- Latinos do not read the Spanish information available.
- Lack of direct and better proactive outreach from the organizations.
- Lack of infrastructure for support.
- Lack of in-culture information and communication.
- [One] finds mistreatment for Latinos mainly in healthcare issues (medical services).
- Lack of knowledge about rights regarding discrimination.

Opportunities for improvement:

- Organizations that support Latinos in our region should collaborate and coordinate their efforts to inform people about employment laws and opportunities.
- Provide procedure that is standardized for undocumented workers.
- Latinos need to be more proactive in going out to get information.
- Provide information to American companies (i.e. cross-cultural training) about how to work with Latinos.
- American companies do not understand issues.
- Need to be realistic.
- Use churches as allies to share information.

Education Issues

Have you signed up a child for public school? What was good about the experience?

What was difficult?

- Lack of knowledge about the school system.
- Brochure about each school.
- Lack of orientation for parents about the schools.
- Experience both positive and negative (more negative than positive for immigrants).
- Possibilities.
- Language is a barrier.
- More bilingual personnel.

What resources does your child need to be successful in school? Are those resources available? Do you know where to get them?

- Emotional health.
 - stable.
 - safe.
 - not given in CMS schools.
- More activities to develop skills, i.e. dances.
- Parents to get more involved to know what programs are offered.
- Coalition to expand programs for schools.
- Teachers that really speak Spanish and know Latino culture.
- Parents need to be oriented because schools in their home countries are very different from schools here.

What one thing would help your child be more successful in school?

- Value the education of children to the same extent as work is valued.

- Not only economic support but also support the development of children at an educational level (especially on the part of fathers).
- A program to raise consciousness of the parents of the family:
 - issues relevant for both parents.
 - issues specific to mothers and fathers separately.

Are you planning for your child to continue on to higher education? If no, why not? What things might impede your child from continuing on to higher education?

- People do have plans for college and university.
- We need to adopt resources for the future.
- TPS (temporary protected status)/immigration status/cost plus high numbers of drop-outs.

Have you ever taken a course at an institution of higher learning in the Charlotte area? If yes, would you do it again? What was difficult/easy about the process? What (if anything) is keeping you from pursuing those opportunities?

- For residents it is easier than for undocumented individuals.
- Cost.
- Community college is accessible, much more difficult for university.

What educational opportunities would you like to pursue as an adult? (GED, computer classes, language courses, continuing education, occupational skills, college degree?)

- There is interest in continuing adult education.
- social work, computers, design.

Have you ever been to a public library? What was helpful/difficult about the experience?

- Yes, many have been to the public library.
- There are books to read to children in Spanish.
- They need more bilingual staff.
- Need more materials in Spanish and computers for children where they can do their homework and other projects.
- Need to differentiate between those who use computers for personal entertainment and those working on school work.
- Adult computer classes.
- A manual with information about programs and resources that there are in the libraries.

Health Issues

- Medical insurance through employment is very expensive, complicated, and not very efficient.
- Without insurance, prepayment for services (prenatal care, hospitalization) required in Florida. Prepayment used to not be permitted in North Carolina; referral to Carolinas Medical Center and Health Department (approximately \$1,000.00 for check-up for two children).
- Lack of information about sliding scales services and services in general.

- Hospital visits are more expensive than visiting a private practice.
- 14 years ago there were no services, today the situation is similar.
- There is a lack of bicultural or bilingual service providers.
- Discomfort during the intake or initial interview stemming from questions regarding one's ability to pay for services (insurance, etc.).
- Language barrier keeps one from obtaining the best service (loss of credit).
- Latinos take advantage of other Latinos that don't speak English (with medical insurance, etc.).
- Some do not seek medical care for fear of the monetary cost.
- Lack of service: lack of personalized service, poor service.
- Doctor must be chosen according to the network of one's insurance plan.
- Providers chosen from the Medicaid list of providers.
- Referrals.
- Doctor may be chosen based on ability to speak Spanish.
- Ability to pay.
- Often services are paid for in cash.
- Medical services are very limited (dental, vision, general care).
- Doctors that know Latino culture.
- To be able to feel trust and rapport.
- Healthy lives:
 - Exercise (not much in the Hispanic community).
 - We should learn from Anglos to eat healthier.
 - Be an example to children (in exercising, eating well, etc.).
 - Latinos oblige their children to eat exaggerated portions of food.
- Activities/Physical Fitness in the area:
 - There are enough parks and activities, but there is no support or information for them to be taken advantage of.
 - Lack of time to be able to use available services (Parks & Recreation, etc.).
 - Educate Latino population about activities.
- Mental Health:
 - [Latinos] do not receive mental health services.
 - Lack of awareness about services.
 - Failure in services of Medicaid (systemically) (they do not take patients; over populated).
 - Discrimination (even among Hispanics).

Housing Issues

- Homeownership:
 - Easy process because now more information is available in Spanish.
 - Before starting process, homeowners checked with neighbors and in newspapers for information.
- I would buy a house if...
 - Money.
 - Credit.

- Legal status (don't want to lose the house if I leave the country, or unsure of projected stay in country).
- Age.
- Reasons for moving:
 - ...to move into a house, because of work or family, cost of living, better options for children, weather preferences, better schools, better resources.
 - To find housing within budget generally an easy process, though deposit may be a challenge and lack of credit history a challenge. It is important for people to research neighborhoods before moving in.
- Landlord issues:
 - ID required to prove legal status.
 - Complaining up the chain of authority until problem is fixed.
 - Problems with upkeep and repairs- when threatened with calling the media, problems are fixed.
- Suggestion:
 - A community organization to assist with housing and placement, and/or a community list of housing that is immigrant-friendly.
 - Need to educate immigrants and landlords so that immigrants can learn about standards and expectations and vice versa. Some immigrants abuse apartments, giving a bad reputation to all.
- Neighbors:
 - Noise level - can't dance or it will bother the neighbors.
 - Pets.
 - Lack of parking - hard to have visitors.
 - On positive side, when one introduces oneself to neighbors, good relations may result.
 - One person in group received a ticket from police because a neighbor called on him complaining about noise (music/dog).
- Neighborhood for kids:
 - Quiet, safe.
 - No traffic.
 - More spaces/playgrounds needed for kids and youth.
 - Charlotte needs recreation areas for teens, meeting areas (there are programs for youth but they cost money).
- Safety:
 - Assaults increasing. African-American assaults a concern. Safety in schools needs to be a priority.
- Privacy:
 - No privacy, culture is different; people get mad about things more easily.

- Frequent bad news in community gives immigrants a bad name. “Climate of prosecution.”
- Aspirations and dreams with regard to housing:
 - Resolve legal status so one can consider buying a home and establishing a life here.
 - Purchase a building, live on the bottom and have a youth cultural center on the top.
 - Buy a home here, then return to home country and retire on the beach.
 - Stay here to give children more opportunities.
 - Live in place with opportunities to work and enjoy life.
 - Live in a big house with a studio for a band.

Public Safety Issues

What is safety?

- Trust.
- People/the general public.
- Laws.
- God.
- Police.
- Friends.
- Leaders at all levels.
- Document security (against fraud).
- To feel safe within the community.
- Physical safety.
- Self-esteem and trust in oneself.
- Immigration status.
- For children at school.

What preventative measures do you take for your own safety and the safety of your family?

- Be informed.
- Telephone numbers.
- “Tips.”
- Strategies.
- Parents designate guardians for minor children (in cases of emergency or accident) both locally and in country of origin.
- Get to know one’s neighbors well.
- Communication with churches or attending church.
- Have identification documents and travel documents up-to-date.

Watching children:

- At home:
 - Use the internet to instruct.
 - Manual (future).

- Alarms.
- Chemical storage.
- Precautions with electrical devices and fire.
- Outside the home:
 - Use libraries to instruct.
 - Neighbors (behavior).
 - Family advice and counsel.
 - Involve children in constructive activities.
 - Personal notifications on hand.
 - Dog as a guard.

What is the biggest safety risk in your home, neighborhood, school, work place, etc.?

- Natural disasters.
- Work place—emergency exits and emergency plan, knowledge of emergency strategies, weapons and violence.
- School—weapons, violence.
- Neighborhood—racism, divisions among the Latino community (because of race, ethnicity), gangs.
- Home—fire, chemicals, cleaning agents.
- Public places—leaving children unattended in cars, theft in parking lots or at ATMs, emergency announcements or signage, sidewalk maintenance.
- Health—abuse, mistreatment, venereal diseases, high blood pressure, people who do not want or are not able to go for medical services.

Experiences with public law enforcement:

- Reporting ID theft is not considered an emergency.
- Police response—good experience.
- Bilingual services are very helpful.
- Current immigration situation makes that one does not call the police unless it's a life or death situation.
- Police sometimes say one thing and do another.

Have you ever felt to be in danger before in Charlotte?

- Divorce case—false accusations, threats.
- Use service and legal organizations to get help.
- ID theft and theft of bank information.
- Some people do not seek help out of fear or lack of knowledge.

Domestic violence:

- Women, men, children are all victims.
- Charlotte offers resources; they are not sufficiently taken advantage of by victims.
- Lack of education to parents of families and children, community organizations should educate.
- Threats—bodily, verbal, sexual assault (response is often to ignore it to a point).

Discrimination:

- at work, in hospitals, banks, businesses, use of Spanish language at job site.

Do you carry a weapon or know someone who does?

- No—keep it at home.
- Gangsters.
- Blades, pistols, bats, Mace, rifles.
- Many adults have them for self defense.
- Some have permits and others do not.
- Not everyone who has a weapon has it due to delinquency; for some it is cultural.

APPENDIX A.

LATINO SERVICE INVENTORY

APPENDIX A. LATINO SERVICE INVENTORY

An ancillary component of the Latino Community Needs Assessment was the development of a services inventory that recorded the nature, location and accessibility of service providers. Rather than an omnibus listing, this inventory was restricted to organizations and agencies that were either oriented to serving Mecklenburg's Latino community or had incorporated into their service delivery regular Spanish language translation and interpretation that was immediately accessible to those seeking assistance or information.

These service opportunities were compiled through a multi-layer collection process. This started with the services that were identified through the telephone, survey and interview stages of this study, followed by subsequent analyses of Spanish language directories and newspapers and lists developed independently by agencies such as the Latin American Coalition and Mayor's International Task Force. Finally, entries in this inventory were telephoned and asked to confirm the nature of their service; their primary service location; whether or not they had Spanish speaking staff immediately accessible to their clientele; and whether or not they regularly translated English language materials distributed to the public and/or their clients into Spanish. While this list is certainly not wholly comprehensive of all services available to the city's Latino community, it does capture a substantial proportion of those in Mecklenburg County that tangibly seek to meet Latino needs. Most importantly, it is structured to include those services that are most accessible in terms of linguistic communication and are rooted in the public and not-for profit sectors. In whole and in part, this inventory was used as the basis for the mail survey and spatial mismatch components of the study.

Advocacy

Caminando en las Carolinas WSOC-TV/WAXN-TV	1100 S Mint St		Charlotte	NC	28203	(704) 347-5885
Charlotte Mecklenburg Community Relations Committee	600 East 4th St		Charlotte	NC	28202	(704) 336-2424
Children's Law Center	601 East 5th St		Charlotte	NC	28202	(704) 331-9474
Council for Children, Inc.	601 East 5th St		Charlotte	NC	28202	(704) 372-7961
El Progreso Hispano	1101 Tyvola Rd	Suite 105	Charlotte	NC	28217	(704) 529-6728
Gay - Lesbian Community Center	1401 Central Ave		Charlotte	NC	28202	(704) 333-0144
Guardian ad Litem	720 East 4th St	Suite 202	Charlotte	NC	28202	(704) 417-1853
Hispanic Voter Coalition	6337 Park South Dr		Charlotte	NC	28210	(704) 554-0132
Honorary Consul of Nicaragua	5205 Monroe Rd	Suite C	Charlotte	NC	28205	(704) 537-1230
Honorary Consulate Guatemala	201 S Dotger Ave		Charlotte	NC	28207	(704) 333-5958
Honorary Mexican Consulate	4424 Taggart Creek Rd	P.O. Box 196	Charlotte	NC	28208	(704) 394-2190
Iglesia Bautista Hispana de Hickory Grove	7424 E W.T. Harris Blvd		Charlotte	NC	28227	(704) 531-4060
Immigrant Advocacy Project	322 Hawthorne St		Charlotte	NC	28204	(704) 333-8099
International House	322 Hawthorne St		Charlotte	NC	28204	(704) 333-8099
<i>Latin American Council of Charlotte</i>	322 Hawthorne Ln	International House	Charlotte	NC	28204	(704) 432-6970
La Casa del Ecuatoriano	1101 Tyvola Rd		Charlotte	NC	28217	(704) 586-0463
La Casa Latino Americana de las Carolinas, Inc	100 Belmont-Mt Holly Rd	Belmont Abbey College	Charlotte	NC	28217	(704) 825-6812
La Noticia	6101 Idlewild Rd	Suite 328	Charlotte	NC	28212	(704) 568-6966
Latin American Coalition	4949 B-Albemarle Rd		Charlotte	NC	28212	(704) 531-3848
<i>Immigration and Consumer Rights Program</i>	4949 B-Albemarle Rd		Charlotte	NC	28212	(704) 531-2848
<i>Labor Rights Program</i>	4949 B-Albemarle Rd		Charlotte	NC	28212	(704) 531-2848
Legal Aid of North Carolina	1431 Elizabeth Ave		Charlotte	NC	28204	(704) 971-2621
Legal Services of Southern Piedmont	1431 Elizabeth Ave		Charlotte	NC	28204	(704) 376-1600
Mi Casa Su Casa	6030 Albemarle Rd		Charlotte	NC	28212	(704) 536-9845
National Conference for Community and Justice (NCCJ)	740 West 5th St		Charlotte	NC	28204	(704) 334-0053
North Carolina Community Action	11709 Fruehauf Dr		Charlotte	NC	28273	(704) 568-6088
Our Lady of Guadalupe Catholic Church	6212 Tuckaseegee Rd		Charlotte	NC	28214	(704) 391-6594
Que Pasa	4425 Randolph Rd	Suite 100	Charlotte	NC	28211	(704) 319-5044 ext 214
The Urban League of Central Carolinas	740 West 5th St		Charlotte	NC	28202	(704) 373-2256
Time Warner Cable-Univision	3140 W Arrowood Rd		Charlotte	NC	28273	(704) 378-2952

Trial Court Administrator Office of the 26th District	800 E 4th St	Suite 311	Charlotte	NC	28202	(704) 417-1858
WBZK 980 AM "Amanecer en America"	4321 Stewart Andrew Blvd	Suite E	Charlotte	NC	28217	(704) 665-8240
WKRE 1060 La Maquina Musical	4801 E Independence Blvd		Charlotte	NC	28212	(704) 537-9767
WNOW 1030 AM "Digalo Sin Miedo"	4321 Stewart Andrew Blvd	Suite E	Charlotte	NC	28217	(704) 665-9355

Economic Development and Personal Finance

B.R.I.D.G.E. Jobs Program	800 Briar Creek Rd	Suite FF405	Charlotte	NC	28206	(704) 377-5371
Better Business Bureau, Consumer Foundation	5200 Park Rd	Suite 202	Charlotte	NC	28209	(704) 545-8597 ext 207
Charlotte Metro Credit Union	718 Central Ave		Charlotte	NC	28204	(704) 375-0183
Charlotte Saves, Inc.	5960 Fairview Rd	Suite 200	Charlotte	NC	28210	(704) 556-1260
Cooperative Latina	4801 East Independence Blvd		Charlotte	NC	28212	(704) 531-0201
Latin American Coalition	4949 B-Albemarle Rd		Charlotte	NC	28212	(704) 531-3848
<i>Diversity and Cultural Sensitivity Training</i>	4949 B-Albemarle Rd		Charlotte	NC	28212	(704) 531-2848
<i>Housing and Financial Literacy Counseling Program</i>	4949 B-Albemarle Rd		Charlotte	NC	28212	(704) 531-2848
<i>Job Bank</i>	4949 B-Albemarle Rd		Charlotte	NC	28212	(704) 531-2848
Latin American Chamber of Commerce of Charlotte	124 E. Independence Blvd	Suite 205	Charlotte	NC	28204	(704) 321-0910
Public Library of Charlotte and Mecklenburg County	310 N Tryon St		Charlotte	NC	28202	(704) 336-2725
<i>Small Business Information Center</i>	310 N. Tryon St.		Charlotte	NC	28202	(704) 432-0505
The Urban League of Central Carolinas	740 West 5th St		Charlotte	NC	28202	(704) 373.2256

Education

Ballet Folklorico "Las Americas"	11709 Fruehauf Dr		Charlotte	NC	28273	(704) 542-6839
Big Brothers Big Sisters of Greater Charlotte	740 West 5th St		Charlotte	NC	28202	(704) 377-3963 ext 32
Boy Scouts of America, Mecklenburg County Council	1410 East 7th St		Charlotte	NC	28204	(704) 342-9327
Bravo Bilingual Service	1100 South Mint St	Suite 107	Charlotte	NC	28203	(704) 365-2685
Central Piedmont Community College	1325 East 7th St		Charlotte	NC	28204	(704) 330-6172
Charlotte Mecklenburg Schools	701 E Second St		Charlotte	NC	28202	(980) 343-3000
<i>Bright Beginnings</i>	701 E Second St		Charlotte	NC	28202	(980) 343-3000
<i>ESL</i>	701 E Second St		Charlotte	NC	28202	(980) 343-3000
<i>More for 4</i>	701 E Second St		Charlotte	NC	28202	(980) 343-3000
<i>New Horizons</i>	701 E Second St		Charlotte	NC	28202	(980) 343-3000

<i>Tutoring</i>	701 E Second St		Charlotte	NC	28202	(980) 343-3000
<i>Smith Academy of International Languages</i>	600 Tyvola Rd		Charlotte	NC	28210	(980) 343-5815
<i>Collinswood Language Academy</i>	4000 Applegate Rd		Charlotte	NC	28209	(980) 343-5820
Charlotte-Mecklenburg Schools Second Language	700 East Stonewall St		Charlotte	NC	28202	(704) 343-6975
Communities in Schools of Charlotte-Mecklenburg	601 East 5th St	Suite 200	Charlotte	NC	28202	(704) 335-0601
County Jail - "Adelante" Program	5235 Spector Dr		Charlotte	NC	28269	(704) 496-4140
CPC Adult ESL Programs	1201 Elizabeth Avenue		Charlotte	NC	28235	(704) 330-6041
Latin American Coalition	4949 B-Albemarle Rd		Charlotte	NC	28212	(704) 531-3848
<i>Cultural Heritage</i>	4949 B-Albemarle Rd		Charlotte	NC	28212	(704) 531-2848
<i>English as a Second Language Classes</i>	4949 B-Albemarle Rd		Charlotte	NC	28212	(704) 531-2848
<i>Latin American Festival</i>	4949 B-Albemarle Rd		Charlotte	NC	28212	(704) 531-2848
<i>Latino Youth Group</i>	4949 B-Albemarle Rd		Charlotte	NC	28212	(704) 531-2848
<i>Mentor-Tutor Program</i>	4949 B-Albemarle Rd		Charlotte	NC	28212	(704) 531-2848
<i>Tertulias</i>	4949 B-Albemarle Rd		Charlotte	NC	28212	(704) 531-2848
Girl Scouts, Hornets' Nest Council	7007 Idlewild Rd		Charlotte	NC	28212	(704) 731-6500
H.E.L.P.	800 Briar Creek Rd		Charlotte	NC	28205	(704) 377-5371
Intercultural Outreach Programs, UNCC	9201 University City Blvd		Charlotte	NC	28223	(704) 687-3059
International House	322 Hawthorne St		Charlotte	NC	28204	(704) 333-8099
<i>Citizenship Classes</i>	322 Hawthorne St		Charlotte	NC	28202	(704) 333-8099
<i>English Tutor Program</i>	322 Hawthorne St		Charlotte	NC	28204	(704) 333-8099
Latin American Women's Association	PO Box 471854	P.O. Box 414	Charlotte	NC	28247	(704) 552-1003
Mayor's International Cabinet	600 East 4th St		Charlotte	NC	28202	(704) 336-2174
Mayor's Mentoring Alliance	600 E Trade St		Charlotte	NC	28202	(704) 377-1100
Mecklenburg County Dept. of Social Services	301 Billingsley Rd		Charlotte	NC	28211	(704) 353-0676
<i>"Just 1 Call"</i>	301 Billingsley Rd		Charlotte	NC	28211	(704) 432-1111
<i>Reach Out and Read</i>	301 Billingsley Rd		Charlotte	NC	28211	(704) 712-0011
Mecklenburg County Parks and Recreation Department	5841 Brookshire Blvd		Charlotte	NC	28216	(704) 336-3854
Mint Museum	2730 Randolph Rd		Charlotte	NC	28207	(704) 337-2031
Mi Casa Su Casa	6030 Albemarle Rd		Charlotte	NC	28212	(704) 536-9845
<i>Parent Education Classes</i>	6030 Albemarle Rd		Charlotte	NC	28212	(704) 536-9845
<i>Spanish Literacy Classes</i>	6030 Albemarle Rd		Charlotte	NC	28212	(704) 536-9845
<i>ESL Classes</i>	6030 Albemarle Rd		Charlotte	NC	28212	(704) 536-9845
Project Head Start	700 Parkwood Ave		Charlotte	NC	28205	(704) 371-7420
Public Library of Charlotte and Mecklenburg County	310 N Tryon St		Charlotte	NC	28202	(704) 336-2725
<i>Amigos de la biblioteca</i>	310 N Tryon St		Charlotte	NC	28202	(704) 336-7747
<i>Connections That Count, Conexiones Que Cuentan</i>	310 N Tryon St		Charlotte	NC	28202	(704) 336-6234

<i>Programs for Adults in Spanish</i>	310 N Tryon St		Charlotte	NC	28202	(704) 432-1573
Right Moves for Youth, Inc.	1031 S. Caldwell St.	Suite 102	Charlotte	NC	28204	(704) 377-4425
Safe Kids Charlotte Mecklenburg (Mecklenburg EMS Agency)	4525 Statesville Rd		Charlotte	NC	28269	(704) 943-6000
Smart Start of Mecklenburg County	601 E. 5th Street		Charlotte	NC	28202	(704) 377-6588
United Way Referral Service	301 Brevard St		Charlotte	NC	28202	(704) 372-7170

Health

Ada Jenkins Center	212 Gamble St.		Davidson	NC	28036	(704) 896-0471
Alcoholics Anonymous	1623 N Tryon St		Charlotte	NC	28206	(704) 372.2406
Alexander Youth Network	6220 Thermal Rd		Charlotte	NC	28211	(704) 944-6090
American Cancer Society	6000 Fairview Rd	Suite 200	Charlotte	NC	28210	(704) 552-6147
American Diabetes Association--Central NC	222 S Church St	Suite 336-M	Charlotte	NC	28202	1-888-DIABETES x 3263
American Lung Association of NC	5315 Greenbrook Dr		Charlotte	NC	28205	1-800-586-4872
American Red Cross, Greater Carolinas Chapter	2425 Park Road	P.O. Box 365	Charlotte	NC	28203	(704) 376-1661
Area Mental Health	249 Billingsley Rd		Charlotte	NC	28211	(704) 336-6449
Behavioral Health Center-CMC	501 Billingsley Rd		Charlotte	NC	28211	(704) 358-2800
BELLAS (Breastfeeding Encouragement Learning Liaison and Support)	249 Billingsley Rd		Charlotte	NC	28211	(704) 336-6449
BELLAS (Breastfeeding Encouragement Learning Liaison and Support)	2845 Beatties Ford Rd		Charlotte	NC	28216	(704) 336-6449
Carolinas HealthCare System	1000 Blythe Blvd	P.O. Box 328	Charlotte	NC	28203	(704) 355-2000
Catholic Social Services	1123 S Church St.		Charlotte	NC	28203	(704) 370-3277
Center for Maternity and Infant Health	3601 Central Ave		Charlotte	NC	28205	(704) 536-9845
Central Care Clinic	3007 Central Ave		Charlotte	NC	28205	(704) 567-8218
Centro de Salud Betesda	133 Stetson Dr		Charlotte	NC	28262	(704) 596-5606
Charlotte Community Health	349 Billingsley Rd		Charlotte	NC	28211	(704) 316-6563
Charlotte Speech and Hearing Center	210 E Woodlawn Rd		Charlotte	NC	28202	(704) 523-8027
Chemical Dependency Center of Charlotte Mecklenburg	100 Billingsley Road		Charlotte	NC	28211	(704) 376-7447
Child Care Resources, Inc.	4601 Park Rd		Charlotte	NC	28209	(704) 376-6697
CMC Biddle Point	1801 Rozzelles Ferry Rd		Charlotte	NC	28216	(704) 446-9987
CMC Eastland Clinic	5516 Central Ave		Charlotte	NC	28212	(704) 446-1100
CMC Myers Park	1350 South Kings Drive		Charlotte	NC	28207	(704) 446-1422
CMC North Park Clinic	251 Eastway Dr		Charlotte	NC	28213	(704) 446-9991

CMC North Park Dental Care	Beatties Ford Rd	P.O. Box 32861	Charlotte	NC		(704) 355-2165
Community Health Clinic	3040 Eastway Drive		Charlotte	NC	28205	(704) 316-6561
Community Health Service	2704 Baltimore Ave		Charlotte	NC	28203	(704) 375-0172
Community Health Services	1401 7th St		Charlotte	NC	28204	(704) 248-3715
Community Link, Programs of Travelers Aid Society	910 N Alexander St		Charlotte	NC	28206	(704) 334-7288
Crisis Assistance Ministry	500 Sprat St		Charlotte	NC	28206	(704) 371-3001
Dental Clinical Services	2845 Beatties Ford Rd		Charlotte	NC	28211	(704) 336-6449
Dental Health Care	1601 Rozzelles Ferry Rd		Charlotte	NC	28208	(704) 350-7300
Developmental Disabilities Services through Area Mental Heal	3500 Ellington Street		Charlotte	NC	28211	(704) 336-8214
Energy Committed to Offenders	904 Pecan Ave		Charlotte	NC	28205	(704) 374-0762
Family Planning Clinic	249 Billingsley Rd		Charlotte	NC	28211	(704) 336-6449
Family Planning Clinic	2845 Beatties Ford Rd		Charlotte	NC	28261	(704) 336-6449
Family Reproductive Center	700 Hebron St		Charlotte	NC	28273	(704) 551-0808
Fighting Back Program	2845 Beatties Ford Rd		Charlotte	NC	28261	(704) 336-4634
First Foundation Clinic	4938 Central Ave		Charlotte	NC	28205	(704) 567-0465
Florence Crittenton Services	1300 Blythe Blvd	P.O. Box 363	Charlotte	NC	28236	(704) 372-4663
Gaffney Health Services	8825 E W.T. Harris	Suite 106	Charlotte	NC	28227	(704) 566-6332
Goodwill Industries of the Southern Piedmont	2122 Freedom Dr		Charlotte	NC	28208	(704) 372-3434
Harvest Kitchen	1800 Brewton Dr		Charlotte	NC	28206	(704) 333-4280
Hispanic Baptist Church "The Voice of Hope"	7122 Robinson Church Rd		Charlotte	NC	28215	(704) 537-7133
Hope Haven, Inc.	3815 N Tryon St		Charlotte	NC	28206	(704) 372-8809
Hospice at Charlotte	1420 E 7th St		Charlotte	NC	28204	(704) 335-3578
Immunization Program	249 Billingsley Rd		Charlotte	NC	28211	(704) 336-6449
Immunization Program	2845 Beatties Ford Rd		Charlotte	NC	28216	(704) 336-6449
Lead Poisoning Prevention Program	2845 Beatties Ford Rd		Charlotte	NC	28216	(704) 336-6449
Lifespan	601 N Graham		Charlotte	NC	28202	(704) 333-7107
Loaves and Fishes		P.O. Box 112	Charlotte	NC	28220	704-523-4333
<i>Loaves and Fishes (Pantry Location - ADA Jenkins Center)</i>	212 Gamble St		Davidson	NC	28036	
<i>Loaves and Fishes (Pantry Location - Calvary United Methodist)</i>	512 West Blvd		Charlotte	NC	28203	
<i>Loaves and Fishes (Pantry Location - First Presbyterian Church)</i>	200 W Trade St		Charlotte	NC	28202	
<i>Loaves and Fishes (Pantry Location - Holy Comforter Episcopal)</i>	2701 Park Rd		Charlotte	NC	28209	
<i>Loaves and Fishes (Pantry Location - Huntersville United Methodist Church)</i>	233 Ranson Dr		Huntersville	NC	28078	

<i>Loaves and Fishes (Pantry Location - Mi Casa Su Casa)</i>	6030 Albemarle Rd		Charlotte	NC	28212	
<i>Loaves and Fishes (Pantry Location - Mt. Carmel Baptist Church)</i>	3201 Tuckaseegee Rd		Charlotte	NC	28208	
<i>Loaves and Fishes (Pantry Location - New Emmanuel Congregation)</i>	3546 Beatties Ford Rd		Charlotte	NC	28216	
<i>Loaves and Fishes (Pantry Location - Plaza United Methodist)</i>	5600 The Plaza		Charlotte	NC	28215	
<i>Loaves and Fishes (Pantry Location - St. Andrews Episcopal)</i>	3601 Central Ave		Charlotte	NC	28205	
<i>Loaves and Fishes (Pantry Location - St. Giles Presbyterian)</i>	2027 Emerywood Dr		Charlotte	NC	28210	
<i>Loaves and Fishes (Pantry Location - Statesville Ave. Presbyterian)</i>	3435 Nevins Rd		Charlotte	NC	28206	
Male's Place	249 Billingsley Rd		Charlotte	NC	28211	(704) 336-6423
Mammography	2845 Beatties Ford Rd		Charlotte	NC	28216	(704) 336-6449
Maternity Care Coordination	249 Billingsley Rd		Charlotte	NC	28211	(704) 336-6449
Maternity Care Coordination	2845 Beatties Ford Rd		Charlotte	NC	28216	(704) 336-6449
McLeod Addictive Disease Center	145 Remount Rd		Charlotte	NC	28203	(704) 332-9001
Mecklenburg Area Mental Health	3726 Latrobe Dr.		Charlotte	NC	28211	(704) 336-6404
Mecklenburg County Dept. of Social Services	301 Billingsley Rd		Charlotte	NC	28211	(704) 353-0676
<i>Senior Nutrition, DSS (Centralized Intake)</i>	301 Billingsley Rd		Charlotte	NC	28211	(704) 336-4812
Mental Health Association of Central Carolinas	3701 Latrobe Dr.	Suite 140	Charlotte	NC	28211	(704) 365-3454
Metrolina AIDS Project	127 Scalybark Rd	P.O. Box 326	Charlotte	NC	28209	(704) 333-1435
Metrolina Association for the Blind	704 Louise Ave		Charlotte	NC	28204	(704) 372-3870
Mi Casa Su Casa	6030 Albemarle Rd		Charlotte	NC	28212	(704) 536-9845
<i>Maternity and Infant Health</i>	6030 Albemarle Rd		Charlotte	NC	28212	(704) 536-9845
<i>Pre-Natal Classes</i>	6030 Albemarle Rd		Charlotte	NC	28212	(704) 536-9845
<i>Loaves and Fishes (Pantry Location)</i>	6030 Albemarle Rd		Charlotte	NC	28212	(704) 536-9845
Physicians Reach Out	601 East 5th St	Suite 501	Charlotte	NC	28202	(704) 371-4740
Planned Parenthood	4822 Albemarle Rd	Suite 103	Charlotte	NC	28205	(704) 536-7233
Pregnancy Care Center	1311 Morehead Ave		Charlotte	NC	28204	(704) 716-3643
Presbyterian Hospital	100 N Tryon St		Charlotte	NC	28202	(704) 384-7085
Program Confianza (Mecklenburg County Women's Commission)	700 N Tryon St	Hal Marshall Building	Charlotte	NC	28202	(704) 432-6970
RAIN-Regional AIDS Interfaith Network	P.O. Box 37190		Charlotte	NC	28237	(704) 372-7246
Safety and Health Council	900 Baxter St	Suite 100	Charlotte	NC	28204	(704) 334-7242
Saint Andrews Episcopal Church	3601 Central Ave		Charlotte	NC	28205	(704) 537-0370

Second Harvest Food Bank of Metrolina	500-B Spratt St		Charlotte	NC	28206	(704) 376-1785
Sexually Transmitted Disease Control Clinic	249 Billingsley Rd		Charlotte	NC	28211	(704) 336-6449
Sexually Transmitted Disease Control Clinic	2845 Beatties Ford Rd		Charlotte	NC	28216	(704) 336-6449
Smart Start	249 Billingsley Rd		Charlotte	NC	28211	(704) 336-6449
Smart Start	2845 Beatties Ford Rd		Charlotte	NC	28216	(704) 336-6449
Solomon House Hispanic Outreach	200 S Main St		Huntersville	NC	28078	(704) 875-7727
Strengthening Families Program	100 Billingsley Rd		Charlotte	NC	28211	(704) 376-7447
Substance Abuse Chemical	429 Billingsley Rd		Charlotte	NC	28211	(704) 336-3067
Substance Abuse Counseling	1801 N Tryon St		Charlotte	NC	28206	(704) 777-0970
Teen Health Connection	251 Eastway Dr		Charlotte	NC	28205	(704) 921-6024
The ARC of Mecklenburg	2824 N Davidson		Charlotte	NC	28205	(704) 332-4535
The Carolina Poison Center	4400 Golf Acres Drive		Charlotte	NC	28202	(800) 222-1222
The Relatives, Inc.	1100 East Boulevard		Charlotte	NC	28203	(704) 377-0602
Tuberculosis (TB) Control and Treatment Services	2845 Beatties Ford Rd		Charlotte	NC	28216	(704) 336-6449
United Family Services	601 East 5th St		Charlotte	NC	28202	(704) 332-9034
Women, Infants and Children (WIC) Program	249 Billingsley Rd		Charlotte	NC	28211	(704) 336-6449
Women, Infants and Children (WIC) Program	2845 Beatties Ford Rd		Charlotte	NC	28216	(704) 336-6449
Women's Health Program	249 Billingsley Rd		Charlotte	NC	28211	(704) 336-6449
Women's Health Program	2845 Beatties Ford Rd		Charlotte	NC	28216	(704) 336-644
YMCA of Greater Charlotte, Inc	500 E Morehead St	Suite 300	Charlotte	NC	28202	(704) 716-6200

Housing

Charlotte Apartment Association	711 E Morehead St		Charlotte	NC	28202	(704) 334-9511
Charlotte Housing Authority	1301 South Blvd		Charlotte	NC	28203	(704) 353-0906
Charlotte Emergency Housing	2410 The Plaza	P.O. Box 937	Charlotte	NC	28205	(704) 335-5488
Fair Housing Testing Program	600 E. Trade St		Charlotte	NC	28202	(704) 432-2724
Habitat for Humanity	516 E. 35th Street	PO Box 34397	Charlotte	NC	28205	(704) 376-2054
Mi Casa Su Casa	6030 Albemarle Rd		Charlotte	NC	28212	(704) 536-9845
Salvation Army Emergency Assistance Program	534 Spratt St		Charlotte	NC	28206	(704) 348-2560
Uptown Shelter	1210 N Tryon St		Charlotte	NC	28206	(704) 334-3187 x111
Urban Ministry Center	945 N College St		Charlotte	NC	28206	(704) 347-0278

Public Safety

Battered Women's Shelter	P.O. Box 220		Charlotte	NC	28222	(704) 332-2513
Charlotte Mecklenburg Police Department Family Services Bureau	608 East 5th St		Charlotte	NC	28202	(704) 336-2811
Charlotte-Mecklenburg Police Department	601 E Trade St		Charlotte	NC	28202	(704) 332-9857
<i>Crime Prevention</i>	601 E Trade St		Charlotte	NC	28202	(704) 336-2310
<i>Crime Stopper</i>	601 E Trade St		Charlotte	NC	28202	(704) 336-7517
<i>Gang Intelligence Unit</i>	601 E Trade St		Charlotte	NC	28202	(704) 336-2260
<i>Gang of One</i>	601 E Trade St		Charlotte	NC	28202	(704) 432-4264
<i>International Relations Unit</i>	601 E Trade St		Charlotte	NC	28202	(704) 336-7651
Domestic Violence	720 East 4th St		Charlotte	NC	28202	(704) 336-4126
Domestic Violent Court Services	720 East 4th St		Charlotte	NC	28202	(704) 336-4126
DSS - Child Protection Services	720 East 4th St		Charlotte	NC	2820	(704) 336-2131
Family Center, Inc	1516 Elizabeth Ave		Charlotte	NC	28235	(704) 376-7180
Mi Casa Su Casa	6030 Albemarle Rd		Charlotte	NC	28212	(704) 536-9845
<i>Hispanic/Latino Crime Prevention Task Force</i>	6030 Albemarle Rd		Charlotte	NC	28212	(704) 536-9845
Rape Crisis Assistance	601 East 4th St	Suite 400	Charlotte	NC	28202	(704) 375-9900
Rape Crisis Recovery Foundation	2709 Milton Rd, Suite 2	P.O. Box 561	Charlotte	NC	28256	(704) 493-3088
Sherriff's Office	700 East 4th St		Charlotte	NC	28202	(704) 336-8635
Victim Assistance & Rape Crisis	601 East 5th St	Suite 400	Charlotte	NC	28202	(704) 332-9034

APPENDIX B.

**KEY INFORMANTS INTERVIEWED FOR LATIN AMERICAN COALITION
NEEDS ASSESSMENT PROJECT**

APPENDIX B. KEY INFORMANTS

Listed below are 41 Mecklenburg County community leaders and service providers who were interviewed as a part of the Latino Needs Assessment Project between September 2005 and March 2006. While not every county leader or service provider was included in this process, the individuals participating in this component of the research are broadly representative of local leadership and organizational capacity. Additionally, three other informants interviewed earlier by the research team for a related research project have had their narratives included in the research findings.

Fall 2005 and Spring 2006 Interviews

Carolina Abello, Latino Treatment Supervisor, Chemical Dependency Center of Mecklenburg County

Diego Anselmo, Captain Steel Creek Division and formerly of the International Relations Unit, Charlotte-Mecklenburg Police Department

Men Tchaas Ari, Limited English Proficiency Coordinator, Mecklenburg County Department of Social Services

Alan D. Becker, Publisher, Que Pasa Charlotte

Anne Brinkley, Principal, Hidden Valley Elementary School

Rebecca Brown, Psychologist, Specialized Behavioral Support, Exceptional Children's Program, Charlotte Mecklenburg Schools

Eugene Buccelli, Senior Vice President of Operations, Urban League of Central Carolinas

Natalie Burman, United Way of Central Carolinas

Mary Burnett, Principal, Winterfield Elementary School

Maura Chavez, Interpreter Manager, North Carolina State, Civil Court Administration

Hilda Diaz, School Nurse, Montclair Elementary School

Michael Dulin, Director of Evidence Based Medicine, Carolinas Medical Center and Physician, Eastland Family Practice

Antoinette Ellison, Assistant to the Principal, Hidden Valley Elementary School

Gina Esquivel, Community Advocate

Haydee Garcia, Our Lady of Guadalupe Catholic Church

Adriana Galvez-Taylor, Co-founder, Hispanic Outreach Task Force

Jose Gamez, Assistant Professor, College of Architecture, UNC Charlotte

Hilda Gurdian, Publisher, La Noticia

Jose Hernandez-Paris, Charlotte Mecklenburg Schools, Diversity Office

Dawn Hill, City of Charlotte, Lead Hazard Reduction Program

Susana Hinsel, Client Services Coordinator, International House

Carol Hughes, Executive Director, Crisis Assistance Ministries

Rachel Lynch, Director of Housing and Financial Education, Latin American Coalition

Carlos Martinez, Outreach Coordinator, Mecklenburg County Mental Health

Carmen Mendoza, Field Services Support Group, and formerly of International Relations Units, Charlotte-Mecklenburg Police Department

Angeles Ortega-Moore, Executive Director, Latin American Coalition

Anne Pendelton, School Psychologist, Montclair Elementary School

Lindelley Rajo, Social Worker, Mecklenburg County Women's Commission

Allana Rae-Ramkissoo, Assistant Principal, Our Lady of Assumption Catholic School

Manuel Rey, Vice President for People's Bank, Director Banco de la Gente

Sergio Rocha, Caldwell Banker United Realtors

Elisa Rodriguez, Latin American Chamber of Commerce

Mayra Rodriguez, HIV/STD Prevention Specialist, Mecklenburg County Health Department

Karina Romero, Our Lady of Guadalupe Catholic Church

Linda Rushing, Grades 1-2 Literacy Facilitator, Montclair Elementary School

Mary Sturge, Principal Montclair Elementary School

Teresa Villamarin, Hispanic Service Outreach and Social Worker, Catholic Social Services (Program Esperanza)

Pam Warren, Counsellor, Social Worker, Montclair Elementary School

Gloria Weinstein, Grades 3-5 Literacy Facilitator, Montclair Elementary School

April Whitton, School Social Worker, Montclair Elementary School

Alicia Williams, Bilingual Outreach Coordinator, Public Library of Charlotte and Mecklenburg County

Earlier Interviews

Christina Breen Bolling, Staff Writer, Charlotte Observer²⁶

Wayne Cooper, Honorary Mexican Counsel, President and CEO Telecom USA¹⁹

Chris Couch, Sergeant, International Relations Unit, Charlotte-Mecklenburg Police Department¹⁹

²⁶ Interview conducted in Fall 2004.

APPENDIX C.

KEY INFORMANT INTERVIEW QUESTIONS

APPENDIX C. KEY INFORMANT INTERVIEW QUESTIONS

Name:

Title:

Organization:

1. What do you believe are the greatest needs of the Hispanic/Latino communities in Mecklenburg County?
2. What are the greatest barriers/challenges facing these communities?
3. Who is working to address these barriers/challenges? And what strategies are being employed?
4. Can you speak about the reasons for and consequences of high poverty rates among the Hispanic/Latino communities in Mecklenburg County?
5. How is your organization helping to meet the needs of the Hispanic/Latino communities in Mecklenburg County?
6. What sorts of challenges has your organization encountered in this work?
7. What currently provided services have the most positive impact on the Hispanic/Latino communities in Mecklenburg County?
8. Are there any services that have a negative impact on the Hispanic/Latino communities?
9. Can you identify any needed services for the Hispanic/Latino communities that are currently lacking in Mecklenburg County?
10. Can you recommend someone else who we might talk to about the needs of Mecklenburg County's Hispanic/Latino communities?
11. In addition to people like yourself, we are particularly interested in speaking to persons who are on the "front line" in dealing with the county's Hispanic/Latino communities? Can you identify someone we might interview who works hands-on, and has face-to-face contact, with community members on a daily basis?
12. Did you have any additional thoughts you would like to share before we end the interview?

APPENDIX D.

**ENGLISH LANGUAGE AND SPANISH LANGUAGE QUESTIONNAIRES FOR
TELEPHONE SURVEY**

2006 Latin American Coalition Needs Assessment Project Telephone Survey

SAY HELLO IN THE LANGUAGE IN WHICH THE PERSON ANSWERS THE PHONE

LANGUAGE SELECTION: "Do you prefer English or usted prefiere Espanol?"

1. English
2. Spanish (**CTRL + S**)

INTRODUCTION: This is _____ with UNC Charlotte's Urban Institute. This month we are partnering with the Latin American Coalition to conduct research on public opinion in Mecklenburg County and we'd appreciate your help and cooperation. This research will ultimately be used to create better services and improve the existing services that help Latino citizens, their families, neighbors and children."

Is this a home telephone? _____ ► (IF NO, SAY, "I'm sorry, I have the wrong number.")

Qualifier1: Is your household located in Mecklenburg County?

- | | |
|------------------------|---|
| 1. Yes | (CONTINUE WITH SURVEY) |
| 2. No | (SAY: "Thank you for your help. At this time, we are surveying Mecklenburg County residents only.") |
| 3. Don't know/ refused | (SAY: "Thank you for your help. At this time, we are surveying Mecklenburg County residents only.") |
-

RESPONDENT SELECTION: Because this is a scientific survey, I need to speak with a specific person in this household. I will need to ask you a few questions to determine who we need to speak with.

How many adults 18 years of age or older live in the household who are of Latino origin or descent. That is Mexican, Puerto Rican, Cuban, Central American, South American or some other Spanish speaking background? _____

(If ANS = 0, SAY: "Thank you for your help. At this time we are surveying Hispanic/Latino residents of Mecklenburg County only.")

Of those adults, how many are men? _____

Of those adults, how many are women? _____

The person we would like to speak with is: _____ [RANDOMLY SELECTED BASED ON NUMBER OF MEN AND WOMEN IN THE HOUSEHOLD.]

- | | |
|------------------------|---------------------------|
| 1. Oldest Male | 9. Oldest Female |
| 2. Second Oldest Male | 10. Second Oldest Female |
| 3. Third Oldest Male | 11. Third Oldest Female |
| 4. Fourth Oldest Male | 12. Fourth Oldest Female |
| 5. Fifth Oldest Male | 13. Fifth Oldest Female |
| 6. Sixth Oldest Male | 14. Sixth Oldest Female |
| 7. Seventh Oldest Male | 15. Seventh Oldest Female |
| 8. Eight Oldest Male | 16. Eighth Oldest Female |

(IF PERSON DIFFERENT FROM PERSON WHO ANSWERED PHONE, REINTRODUCE.)

Before we begin, this interview will take approximately 12 minutes. The interview may be monitored for quality assurance purposes, but all information obtained in this study will be confidential.

1. **[INTERVIEWER: DO NOT READ THIS QUESTION TO THE RS.]** Is the respondent...
1. Male
 2. Female

My first questions are about Mecklenburg County.

2. On a scale of 1 to 5 with 1 being Highly Satisfied and 5 being Not At All Satisfied, how satisfied are you with Mecklenburg County as a place to live? **(INTERVIEWER: READ 1-5 IF NECCESARY.)**
1. Highly Satisfied
 2. Somewhat Satisfied
 3. Neither Satisfied nor Dissatisfied
 4. Somewhat Dissatisfied
 5. Not At All Satisfied
 6. Don't Know
 7. Refused
3. In terms of the level of discrimination against Hispanics/Latinos, do you believe that in Charlotte-Mecklenburg there is: **(INTERVIEWER: READ 1-3)**
1. Less discrimination than other places in the US
 2. About the same amount of discrimination as other places in the US
 3. More discrimination than other places in the US
 4. It depends
 5. I have not lived anywhere else in the US
 6. Don't know
 7. Refused

My next questions are about the needs of the Hispanic/Latino communities in Mecklenburg County.

4. What do you believe are the greatest needs of the Hispanic/Latino residents of Mecklenburg County? **(INTERVIEWER: DO NOT READ ANSWERS. SELECT UP TO THREE RESPONSES. PROBE WITH "ANYTHING ELSE?")**
- | | |
|---|------------------------------|
| 1. Bi-lingual/Bi-cultural professional services | 11. Money |
| 2. Changes in immigration laws/Residency status | 12. Other Education |
| 3. Civil Rights/Equality | 13. Physical Health Care |
| 4. Dental Care | 14. Substance Abuse Services |
| 5. Drivers Licenses/Identification | 15. Translators/Interpreters |
| 6. English as a Second Language (ESL) classes | 16. Unity/Community Pride |
| 7. Food/Nutrition | 17. Other1 (specify) _____ |
| 8. Housing | 18. Other2 (specify) _____ |
| 9. Jobs | 19. Other3 (specify) _____ |
| 10. Mental Health Care | 20. Don't Know/Refused |

5. What is the greatest challenge/barrier for the Hispanic/Latino residents of Mecklenburg County?
(INTERVIEWER: DO NOT READ ANSWERS. SELECT ONE RESPONSE.)

1. Anti-immigrant movement
2. Cultural differences
3. Discrimination
4. Immigration Laws/Undocumented Status
5. Inability to access available resources
6. Lack of community understanding
7. Lack of education
8. Lack of knowledge about available resources
9. Lack of trust for government and community agencies
10. Language differences
11. Low-income/Little money
12. Transportation
13. Other (specify) _____
14. DK/Refused

For the next part of the survey, please tell me which of the following services you have used to help address your needs or the needs of your family.

6.

	Yes	No	DK/RF
a). The Charlotte-Mecklenburg Police Department?	1	2	3
b). The Mecklenburg County Department of Social Services?	1	2	3
c). The Charlotte-Mecklenburg School System?	1	2	3
d). The Mecklenburg County Health Department?	1	2	3
e). The Latin American Coalition?	1	2	3
f). International House?	1	2	3
g). Mi Casa, Su Casa?	1	2	3
h). Crisis Assistance Ministries?	1	2	3
i). The Salvation Army?	1	2	3
j). Goodwill Industries?	1	2	3
k). The United Way?		1	2
l). Latin American Chamber of Commerce?	1	2	3

7. For those services you have used (said yes to in questions 6-17), how would you rate the quality of the services you have received? **(INTERVIEWER: READ 1-5)**

1. Very Good
2. Good
3. Neither Good/Nor Bad
4. Bad
5. Very Bad
6. Don't Know
7. Refused

8. Are there services that you have needed but have been unable to find?

1. Yes
2. No **GO TO Q10**
3. DK/Refused **GO TO Q10**

9. Can you tell me what services those were?

1. _____
2. _____
3. _____
97. Don't Know
999. Refused

My next questions are about your neighborhood specifically.

10. On a scale of 1 to 5 with 1 being Highly Satisfied and 5 being Not At All Satisfied, how satisfied are you with your neighborhood as a place to live? **(INTERVIEWER: READ 1-5 IF NECESSARY.)**
1. Highly Satisfied
 2. Somewhat Satisfied
 3. Neither Satisfied nor Dissatisfied
 4. Somewhat Dissatisfied
 5. Not At All Satisfied
 6. Don't Know
 7. Refused
11. Would you say that your neighborhood has? **(INTERVIEWER: READ 1-4)**
1. All Hispanic/Latino residents
 2. Mostly Hispanic/Latino residents
 3. Some Hispanic/Latino residents
 4. Few Hispanic/Latino residents
 5. Don't Know
 6. Refused
12. Why did you choose to live in/move to your current neighborhood? **(INTERVIEWER: DO NOT READ ANSWERS. SELECT ONE RESPONSE.)**
1. I had family or friends who lived here
 2. I knew that other Hispanic/Latinos lived in the area
 3. The price of rent/mortgages
 4. The quality of the house/apartment
 5. Close to stores and business
 6. Close to work
 7. Close to public transportation
 8. Other (specify) _____
13. Do you feel safe in your neighborhood? **(INTERVIEWER: READ 1 & 2.)**
1. Yes
 2. No
 3. Sometimes
 4. Don't Know/Refused

My next questions are about health care.

14. Do you have a doctor that you see regularly at their office or clinic? Not in the emergency room or Urgent Care Center.
1. Yes
 2. No
 3. Don't Know
 4. Refused
15. Do you have health insurance for yourself?
1. Yes
 2. No
 3. Don't Know
 4. Refused

My final questions are about you and your family.

16. Were you born in the United States?
1. Yes
 2. No
 3. Refused

17. How many years have you lived in the United States?
 1. _____ (less than one year=1)
 999. Refused
18. How many years have you lived in Mecklenburg County?
 1. _____ (less than one year=1)
 999. Refused
19. How many years have you lived in your current house or apartment?
 1. _____ (less than one year=1)
 999. Refused
20. Where did you most recently live prior to moving to Charlotte-Mecklenburg?

[**INTERVIEWER:** Try to get as detailed information as possible: city, state, And country if applicable. Type in **97** in each field that that rs replies dk.
 Type in **99** in each field that the rs replies refused.
 Type **1** in the city field if the rs was born in charlotte.
 Type **98** in the Country field if = United States.]

City _____
 State _____
 County _____

21. What is your nationality/country of origin? [**INTERVIEWER: IF NECCESARY YOU CAN SAY, "That is the country outside of the United States that you, your parents, grandparents or ancestors were born."** DO NOT READ LIST.]
- | | |
|----------------|----------------------------|
| 1. Mexico | 14. Paraguay |
| 2. Guatemala | 15. Dominican Republic |
| 3. El Salvador | 16. Puerto Rico |
| 4. Honduras | 17. Grenada |
| 5. Nicaragua | 18. Spain |
| 6. Costa Rica | 19. Peru |
| 7. Panama | 20. Cuba |
| 8. Columbia | 21. Multiple Nationalities |
| 9. Venezuela | 22. Other (specify) _____ |
| 10. Ecuador | 23. Refused |
| 11. Chile | |
| 12. Argentina | |
| 13. Uruguay | |

22. What is your age?
 _____ years old **GO TO Q23**
 999. Refused **GO TO Q22a**

22a. If you prefer not to give me your exact age, I will read a range of ages, and when I come to the range that includes your age, please indicate that to me. (**INTERVIEWER: Read 1-6**)

1. 18-24
2. 25-29
3. 30-39
4. 40-49
5. 50-59
6. 60-69
7. 70 or older

22. Do you own or rent your residence?
1. Own
 2. Rent
 3. Living at home with parents
 4. Living with other relative
 5. Living with friends or co-workers
 6. Other _____
 7. Refused
23. Last week, were you working full-time, part-time, going to school, a homemaker, unemployed, or retired?
- | | |
|----------------------|-----------------|
| 1. Working full-time | GO TO 25 |
| 2. Working part-time | GO TO 25 |
| 3. Unemployed | GO TO 28 |
| 4. Retired; disabled | GO TO 28 |
| 5. Homemaker | GO TO 28 |
| 6. In school | GO TO 28 |
| 7. Refused | GO TO 28 |
24. What is the title of your job and what are some of the main duties? **(INTERVIEWERS, THIS WILL BE CODED LATER. GET SPECIFIC INFORMATION e.g., if teacher, what level, elementary, university, etc.; if factory worker, what do they make)**
- a). Job Title _____
999. Refused
- b). Job Duties _____
999. Refused
25. How do you get to work?
1. Drive alone
 2. Carpool
 3. My employer picks me up
 4. Commercial van services
 5. Public bus
 6. Other (please specify) _____
 7. Refused
26. About how many hours a week do you work in the average work week?
1. _____
 999. Refused
27. Are you currently married, widowed, divorced, separated, or have you never been married?
- | | |
|------------------|-----------------|
| 1. Married | GO TO 29 |
| 2. Widowed | GO TO 30 |
| 3. Divorced | GO TO 30 |
| 4. Separated | GO TO 30 |
| 5. Never married | GO TO 30 |
| 6. Refused | GO TO 30 |
28. Does your spouse live here in the United States with you?
1. Yes
 2. No
 3. Refused

29. What is the highest grade of school or year of college that you actually finished and got credit for?

(INTERVIEWER: Read 1-6)

1. 0–8 years
2. 9–11 years
3. 12 years (high school graduate)
4. 13–15 years (some college)
5. 16 years (college graduate)
6. More than 16 year
7. Refused

30. Do you have children under the age of 18?

1. Yes
2. No **GO TO 37**
3. Refused **GO TO 37**

31. Do you have health insurance for your children under the age of 18?

1. Yes
2. No
3. For some but not all
4. Don't know
5. Refused

32. How many children do you have between the ages of 5 and 18 years old?

_____ child (s)
999. Refused **GO TO G37**

33. How many of your [insert Q33] children between the ages of 5 and 18 attend school?

_____ child (s)
999. Refused **GO TO G36**
[IF Q33 = Q34 GO TO Q36]

34. What are the ages of the children who do not go to school?

Child #1 _____ years old	Child #6 _____ years old
Child #2 _____ years old	Child #7 _____ years old
Child #3 _____ years old	Child #8 _____ years old
Child #4 _____ years old	Child #9 _____ years old
Child #5 _____ years old	Child #10 _____ years old

[IF Q34 = 0, GO TO Q37]

35. Do they attend public school, religious school, or private school?

1. Public
2. Private
3. Religious
4. A mix (e.g. some go to public some go to private)
5. Don't Know/Refused

36. Could you please tell me what your zip code is? _____

[INTERVIEWER: Enter 99999 for Refused/Don't know.]

37. How much total income did you and your family receive last year, not just from wages or salaries but from all sources—that is, before taxes or other deductions were made? We don't need the exact dollar figure. Could you just tell me which of these categories it falls in? **(READ 1-6)**
1. Less than \$20,000
 2. \$20,000 to \$39,999
 3. \$40,000 to \$59,999
 4. \$60,000 to \$79,999
 5. \$80,000 to \$99,999
 6. \$100,000 and over
 7. Refused

This completes our survey. Thank you very much for your help and cooperation. If you have any questions about this survey, please call the UNC Charlotte Urban Institute at 704.687.2363.

[Interviewer: Fill in your CATI ID number _____]

**2006 La Coalición Latinoamericana necesita un proyecto de evaluación
Encuesta telefónica**

**SALUDE EN EL IDIOMA EN QUE RESPONDE LA PERSONA QUE CONTESTA
EL TELÉFONO**

LANGUAGE SELECTION: “Do you prefer English? or ¿usted prefiere español?”

1. Inglés
2. Español (CTRL + S)

INTRODUCTION: Soy _____ del Instituto Urbano de Charlotte de la Universidad de Carolina del Norte. Este mes trabajaremos en forma conjunta con la Coalición Latinoamericana para realizar una investigación sobre la opinión pública en el condado de Mecklenburg y le estaríamos muy agradecidos si nos brinda su ayuda y colaboración. Una vez finalizada, la investigación se utilizará para crear mejores servicios y perfeccionar los servicios existentes que brindan ayuda a los ciudadanos latinos, a sus familias, vecinos y niños.

¿Es éste es un teléfono residencial? ———▶ (SI LA RESPUESTA ES NO, DIGA, “Lo siento, tengo el número equivocado”.)

Qualifier1: ¿Su casa se encuentra en el condado de Mecklenburg?

1. Sí (CONTINÚE CON LA ENCUESTA.)
2. No (DIGA: “Gracias por su ayuda. En este momento estamos encuestando a _____ residentes del condado de Mecklenburg solamente”.)
3. No sabe/se negó a responder (DIGA: “Gracias por su ayuda. En este momento estamos encuestando a _____ residentes del condado de Mecklenburg solamente”.)

RESPONDENT SELECTION: Como se trata de una encuesta científica, necesito hablar con una persona específica de esta casa. Tendré que hacerle algunas preguntas para determinar con quién tenemos que hablar.

¿Cuántos adultos de 18 años de edad o mayores viven en la casa sean de origen Latino como es mexicano, puertorriqueño, cubano, centroamericano, sudamericano o de algún otro país que habla español? _____

(If ANS = 0, DIGA: Gracias por su ayuda. En este momento estamos encuestando únicamente a residente hispanos o latinos del Condado de Mecklenburg”.)

De esos adultos, ¿cuántos son hombres? _____

De esos adultos, ¿cuántos son mujeres? _____

La persona con la que desearíamos hablar es el (la): _____ [RANDOMLY SELECTED BASED ON NUMBER OF MEN AND WOMEN IN THE HOUSEHOLD.]

- | | |
|------------------------|---------------------------|
| 1. Oldest Male | 9. Oldest Female |
| 2. Second Oldest Male | 10. Second Oldest Female |
| 3. Third Oldest Male | 11. Third Oldest Female |
| 4. Fourth Oldest Male | 12. Fourth Oldest Female |
| 5. Fifth Oldest Male | 13. Fifth Oldest Female |
| 6. Sixth Oldest Male | 14. Sixth Oldest Female |
| 7. Seventh Oldest Male | 15. Seventh Oldest Female |
| 8. Eighth Oldest Male | 16. Eighth Oldest Female |

(SI LA PERSONA A ENCUESTAR NO ES LA MISMA QUE CONTESTÓ EL TELÉFONO, VUELVA A PRESENTARSE)

Antes de comenzar, quería informarle que esta encuesta tomará unos 12 minutos. Es posible que esta conversación se monitoree a fin de asegurar la calidad, pero toda la información obtenida en este estudio se mantendrá confidencial.

38. **[INTERVIEWER: DO NOT READ THIS QUESTION TO THE RS.]** El encuestado es.....
1. Hombre
 2. Mujer

Mis primeras preguntas están relacionadas con el Condado de Mecklenburg.

39. En una escala del 1 al 5, donde 1 es muy satisfecho y 5 es insatisfecho, ¿qué tan satisfecho se siente con el condado de Mecklenburg como lugar de residencia? (**ENCUESTADOR: LEA DEL 1 AL 5 SI ES NECESARIO.**)
1. Muy satisfecho
 2. Un poco satisfecho
 3. Ni satisfecho ni insatisfecho
 4. Un poco insatisfecho
 5. Muy insatisfecho
 6. No sabe
 7. Se negó a responder

40. En cuanto al nivel de discriminación contra latinos o hispanos, ¿cuál cree usted que es la realidad en Charlotte-Mecklenburg? (**ENCUESTADOR: LEA DEL 1 AL 3.**)
1. Menos discriminación que en otros lugares de EE.UU.
 2. La misma discriminación que existe en otros lugares de EE.UU.
 3. Más discriminación que en otros lugares de EE.UU.
 4. Depende
 5. Nunca viví en otro lugar de EE.UU.
 6. No sabe
 7. Se negó a responder

Las siguientes preguntas están relacionadas con las necesidades de las comunidades hispanas o latinas del condado de Mecklenburg.

41. ¿Cuáles cree que son las mayores necesidades de los residentes hispanos o latinos del condado de Mecklenburg? (**ENCUESTADOR: NO LEA LAS RESPUESTAS. SELECCIONE HASTA TRES RESPUESTAS. PREGUNTE “¿ALGUNA OTRA COSA?”**)
1. Servicios profesionales bilingües y biculturales
 2. Cambios en las leyes de inmigración/condición de residencia
 3. Derechos civiles/igualdad
 4. Cuidado dental
 5. Licencias de conducir/identificación
 6. Clases de inglés como segundo idioma (ESL)
 7. Alimentos/nutrición
 8. Viviendas
 9. Trabajos
 10. Servicios de salud mental
 11. Dinero
 12. Otro tipo de educación

- 13. Atención médica
- 14. Servicios para tratar el abuso de sustancias
- 15. Traductores/intérpretes
- 16. Unidad/orgullo comunitario
- 17. Otro (especifique) _____
- 18. Otro (especifique) _____
- 19. Otro (especifique) _____
- 20. NS/Se negó a responder

42. ¿Cuál es el mayor desafío u obstáculo para los residentes hispanos o latinos del condado de Mecklenburg? (**ENCUESTADOR: NO LEA LAS RESPUESTAS. SELECCIONE UNA RESPUESTA.**)

- 1. Movimientos antiinmigratorios
- 2. Diferencias culturales
- 3. Discriminación
- 4. Leyes de inmigración/condición de indocumentado
- 5. Incapacidad de acceder a los recursos disponibles
- 6. Falta de comprensión en la comunidad
- 7. Falta de educación
- 8. Falta de conocimiento acerca de los recursos disponibles
- 9. Falta de confianza en el gobierno y las agencias comunitarias
- 10. Diferencias idiomáticas
- 11. Bajos ingresos/poco dinero
- 12. Medios de transporte
- 13. Otro (especifique) _____
- 14. NS/se negó a responder

Durante la próxima parte de la encuesta, me podría decir cuáles de los siguientes servicios ha utilizado para satisfacer sus necesidades o las necesidades de su familia.

¿Alguna vez ha Ud. contactado.....

	Yes	No
DK/RF		
43. a). ¿El Departamento de Policía de Charlotte-Mecklenburg?	1	2
3		
b). ¿El Departamento de Servicios Sociales del condado de Mecklenburg?	1	2
3		
c). ¿El sistema escolar de Charlotte-Mecklenburg?	1	2
3		
d). ¿El Departamento de Salud del condado de Mecklenburg?	1	2
3		
e). ¿La Coalición Latinoamericana?	1	2
3		
f). ¿International House?	1	2
3		
g). ¿Mi Casa, Su Casa ?	1	2
3		
h). ¿Ministerios de ayuda en casos de crisis?	1	2
3		
i). ¿El Ejército de Salvación?	1	2
3		

- j). ¿Industrias de crédito mercantil? 1 2
3
- k). ¿United Way? 1 2
3
- l). ¿La Cámara de Comercio Latinoamericana? 1 2
3
44. ¿Cómo calificaría la calidad de los servicios recibidos en (a los que respondió afirmativamente en las preguntas 6 a 17)? (**ENCUESTADOR: LEA DEL 1 AL 5.**)
1. Muy buena
 2. Buena
 3. Ni buena ni mala
 4. Mala
 5. Muy mala
 6. No sabe
 7. Se negó a responder
45. ¿Hay servicios que necesitó en algún momento pero que no pudo encontrar?
1. Sí
 2. No **VAYA A LA P10**
 3. NS/Se negó a responder **VAYA A LA P10**
46. ¿Me puede mencionar cuáles fueron esos servicios?
1. _____
 2. _____
 3. _____
 97. No sabe
 999. Se negó a responder
- Las siguientes preguntas se refieren específicamente a su vecindario.*
47. En una escala del 1 al 5, donde 1 es muy satisfecho y 5 es muy insatisfecho, ¿qué tan satisfecho se siente con su vecindario como lugar de residencia? (**ENCUESTADOR: LEA DEL 1 AL 5 SI ES NECESARIO.**)
1. Muy satisfecho
 2. Un poco satisfecho
 3. Ni satisfecho ni insatisfecho
 4. Un poco insatisfecho
 5. Insatisfecho
 6. No sabe
 7. Se negó a responder
48. ¿Cuál es la proporción de hispanos o latinos en su vecindario? (**ENCUESTADOR: LEA DEL 1 AL 4.**)
1. Todos los residentes son hispanos o latinos
 2. La mayoría de residentes son hispanos o latinos
 3. Algunos residentes son hispanos o latinos
 4. Muy pocos residentes son hispanos o latinos
 5. No sabe
 6. Se negó a responder

49. ¿Por qué decidió vivir en el vecindario donde reside actualmente? (**ENCUESTADOR: NO LEA LAS RESPUESTAS. SELECCIONE UNA RESPUESTA.**)

1. Tenía familiares o amigos que residían allí
2. Sabía que otros hispanos o latinos vivían en el área
3. El precio de la renta o los préstamos hipotecarios
4. La calidad de la casa o departamento
5. Cercanía a tiendas y comercios
6. Cercanía al trabajo
7. Cercanía al transporte público
8. Otro (especifique) _____

50. ¿Se siente seguro en su vecindario? (**ENCUESTADOR: LEA 1 Y 2.**)

1. Sí
2. No
3. A veces
4. No sabe/se negó a responder

Las siguientes preguntas están relacionadas con la atención médica.

51. ¿Visita periódicamente el consultorio o la clínica de un médico, que no sea la sala de emergencias ni el Centro de Atención Urgente?

1. Sí
2. No
3. No sabe
4. Se negó a responder

52. ¿Tiene seguro médico?

1. Sí
2. No
3. No sabe
4. Se negó a responder

Las últimas preguntas están relacionadas con usted y su familia.

53. ¿Usted nació en los Estados Unidos?

1. Sí
2. No
3. Se negó a responder

54. ¿Cuánto hace que reside en los Estados Unidos?

1. _____ (menos de un año=1)
999. Se negó a responder

55. ¿Cuánto hace que vive en el condado de Mecklenburg?

1. _____ (menos de un año=1)
999. Se negó a responder

56. ¿Hace cuánto que vive en su casa o departamento actual?

1. _____ (menos de un año=1)
999. Se negó a responder

57. ¿Dónde vivía antes de mudarse a Charlotte-Mecklenburg?

[**INTERVIEWER:** Try to get as detailed information as possible: city, state, And country if applicable. Type in **97** in each field that that rs replies dk.

Type in **99** in each field that the rs replies refused.

Type **1** in the city field if the rs was born in charlotte.

Type **98** in the Country field if = United States.]

City _____

State _____

County _____

58. ¿Cuál es su nacionalidad o país de origen? [**ENCUESTADOR: SI ES NECESARIO PUEDE DECIR: “Me refiero a un país fuera de los Estados Unidos donde nacieron usted, sus padres, abuelos o ancestros”. NO LEA DEL 1 AL 21.**]

- | | | | |
|----------------|---------------|--------------------------|------------------------------|
| 1. México | 7. Panamá | 13. Uruguay | 19. Perú |
| 2. Guatemala | 8. Colombia | 14. Paraguay | 20. Cuba |
| 3. El Salvador | 9. Venezuela | 15. República Dominicana | 21. Múltiples nacionalidades |
| 4. Honduras | 10. Ecuador | 16. Puerto Rico | 22. Otro |
| 5. Nicaragua | 11. Chile | 17. Granada | 23. Se negó a responder |
| 6. Costa Rica | 12. Argentina | 18. España | |

59. ¿Qué edad tiene?

1. _____ **VAYA A LA P23**
2. Se negó a responder

22a. Si prefiere no mencionar su edad exacta, puedo leerle un rango de edades y cuando llegue al rango que incluya su edad, me lo indica. (**ENCUESTADOR: Lea del 1 al 6.**)

3. Entre 18 y 24
4. Entre 25 y 29
5. Entre 30 y 39
6. Entre 40 y 49
7. Entre 50 y 59
8. Entre 60 y 69
9. 70 o mayor

60. ¿Usted es propietario o inquilino del lugar donde reside?

1. Propietario
2. Inquilino
3. Vivo con mis padres
4. Vivo con otros familiares
5. Vivo con amigos o compañeros de trabajo
6. Otro _____
7. Se negó a responder

61. La semana pasada, ¿trabajó a tiempo completo, a tiempo parcial, asistió a la escuela, se ocupó de su casa, estuvo desempleado o es jubilado?
1. Trabajó a tiempo completo **Vaya a la P25**
 2. Trabajó a tiempo parcial **Vaya a la P25**
 3. Desempleado **Vaya a la P28**
 4. Jubilado; discapacitado **Vaya a la P28**
 5. Ama de casa **Vaya a la P28**
 6. Asistió a la escuela **Vaya a la P28**
 7. Se negó a responder **Vaya a la P28**

62. ¿Qué puesto ocupa en su trabajo y cuáles son algunas de sus responsabilidades principales? **(ENCUESTADORE: ESTO SE CODIFICARÁ MÁS ADELANTE. OBTENGAN INFORMACIÓN ESPECÍFICA, por ejemplo, si es maestro, de qué nivel, primario, universitario, etc.; si trabaja en una fábrica, qué hace.)**

Cargo

999. Se negó a responder

Responsabilidades laborales

999. Se negó a responder

63. ¿Cómo llega al trabajo?
1. Conduce su vehículo solo
 2. Comparte el vehículo con otras personas
 3. Mi empleador me pasa a buscar
 4. Servicios de transporte comercial
 5. Transporte público
 6. Otro (especifique) _____
64. ¿Cuántas horas semanales trabaja aproximadamente en una semana de trabajo promedio?
1. _____
999. Se negó a responder
65. ¿Actualmente usted es casado, viudo, divorciado, separado o soltero?
1. Casado **Vaya a la P29**
 2. Viudo **Vaya a la P30**
 3. Divorciado **Vaya a la P30**
 4. Separado **Vaya a la P30**
 5. Soltero **Vaya a la P30**
 6. Se negó a responder **Vaya a la P30**
66. ¿Su cónyuge vive con usted en los Estados Unidos?
1. Sí
 2. No
 3. Se negó a responder
67. ¿Cuál es el último nivel escolar o año de enseñanza superior que completó y por el que obtuvo un diploma? **(ENCUESTADORE: Lea del 1 al 6.)**
1. 0 a 8 años
 2. 9 a 11 años

3. 12 años (graduado de escuela secundaria)
4. 13 a 15 años (algo de enseñanza superior)
5. 16 años (graduado de enseñanza superior)
6. Más de 16 años
7. Se negó a responder

68. ¿Tiene hijos menores de 18 años de edad?

1. Sí
2. No **VAYA A LA P37**
3. Se negó a responder **VAYA A LA P37**

69. ¿Tiene seguro médico para sus hijos menores de 18 años de edad?

1. Sí
2. No
3. Para algunos, pero no para todos
4. No sabe
5. Se negó a responder

70. ¿Cuántos hijos Ud. tiene entre las edades de 5 y 18 años? _____ hijo(s)

999. Se negó a responder **VAYA A LA P37**

71. ¿Cuántos de sus [insert 33] hijos entre las edades de 5 y 18 atienden a la escuela?

[Se negó a responder = 999]

1. _____ hijo(s)

999. Se negó a responder **VAYA A LA P36**

[IF Q33 = Q34 VAYA A LA Q36]

72. ¿Cuáles son las edades de los hijos que no van a la escuela?

Child #1 _____ years old	Child #6 _____ years old
Child #2 _____ years old	Child #7 _____ years old
Child #3 _____ years old	Child #8 _____ years old
Child #4 _____ years old	Child #9 _____ years old
Child #5 _____ years old	Child #10 _____ years old

[IF Q34 = 0, VAYA A LA Q37]

73. ¿Asisten a una escuela pública, religiosa o privada?

1. Pública
2. Privada
3. Religiosa
4. Una combinación (por ejemplo, algunos van a una escuela pública y otros a una privada)
5. No sabe/se negó a responder

74. ¿Me podría decir cuál es su código postal? _____

[ENCUESTADORE: Utilice 99999 si no sabe/se negó a responder.]

75. ¿Cuál fue el ingreso total suyo y de su familia el año pasado, no sólo proveniente de sueldos o salarios, sino de todas las fuentes de ingreso (es decir, ingresos antes de los impuestos u otras

deducciones realizadas)? No necesitamos una cifra exacta. ¿Me podría decir en cuál de las siguientes categorías está incluido su ingreso? **(ENCUESTADORE: LEA DEL 1 AL 6.)**

1. Menos de \$20,000
2. Entre \$20,000 y \$39,999
3. Entre \$40,000 y \$59,999
4. Entre \$60,000 y \$79,999
5. Entre \$80,000 y \$99,999
6. \$100,000 y más
7. Se negó a responder

Con esto finaliza nuestra encuesta. Muchas gracias por su ayuda y colaboración. Si tiene preguntas acerca de esta encuesta, llame al Instituto Urbano de Charlotte de la Universidad de North Carolina al 704.687.2363.

[Encuestador: complete su número de identificación de CATI _____]

APPENDIX E.

QUESTIONNAIRE MAILED TO SERVICE PROVIDERS

Latin American Coalition/UNC Charlotte Urban Institute Needs Assessment Project

Service and Program Providers Survey

By completing this survey you are assisting the UNC Charlotte Urban Institute in better understanding the needs of our growing Latino population as well as the needs of local service providers. Your participation in this survey is voluntary and confidential. The information provided will be combined with responses from all other participants and neither you nor your organization will be identified in any report prepared.

Services and Programs

1.) Does your organization provide services and/or programs that are used by Latinos (individuals from or having a heritage related to Latin America)?

- Yes (please continue with question #2)
 No (please skip to question #4)

2.) Complete the following table for each service and program your organization provides that are used by Latino clientele (attach additional sheets if necessary):

Briefly describe the service or program <u>used by</u> Latinos:	At what level is the service or program offered (ex. county, city, school district, faith congregation)?	Does the service or program specifically target the Latino population?	Approximately how many Latino clients use the service or program each <u>month</u> ?	In the last year the number of Latinos using this service or program have:
i)		YES / NO		DECREASED STAYED SAME INCREASED
ii)		YES / NO		DECREASED STAYED SAME INCREASED
iii)		YES / NO		DECREASED STAYED SAME INCREASED
iv)		YES / NO		DECREASED STAYED SAME INCREASED

CONTINUED ON OTHER SIDE

3.) How is the Latino population informed about your organization's services and programs (check all that apply)?

Marketing materials written in Spanish

Referral from other organizations

Specific outreach to the Latino population

Other, please describe _____

4.) If you do not provide services to Latinos or cannot meet the needs of Latino clientele, where do you refer them?

5.) What barriers, if any, exist that prevent your organization from meeting the needs of the Latino population?

6.) Do you want your services and/or programs included in a resource guide for the Latino community?

Yes (make sure you answer Question #9)

No

Employees

7.) What percentage of your employees speaks Spanish, as a primary language (_____), as a second or third language (_____)?

8.) (a) What, if any, training do your employees need in order to effectively meet the needs of your organization's Latino clientele?

(b) Where do or could your employees receive this training?

9.) Do you have an Advisory Board or a Board of Directors/Governors?

Yes (please continue with question #10)

No (skip to question #11)

10.) Do you have Hispanic/Latino representation on your board?

Yes

No

The following information is optional and will only be used if you wish to have your organization's services and programs listed in a resource guide for the Latino community. Nowhere in survey reports prepared and shared with stakeholders will the information you provide on this survey be used in conjunction with your name or the name of the organization.

11.) Organization Name: _____

Street Address: _____

City, State & Zip: _____

12.) Name of Person Completing Survey: _____

Thank you for your assistance!
Please return this survey by November 20, 2005 to:
UNC Charlotte Urban Institute
Community Research and Services
9201 University City Blvd.
Charlotte, NC 28223-0001

APPENDIX F.

LETTERS OF SUPPORT



SECRETARIA DE RELACIONES EXTERIORES
CONSULADO HONORARIO

190405

Consulado Honorario de Mexico

A 12 de Junio del 2006

Latin American Coalition

Dr. Jeffery Michael
UNC Charlotte Urban Institute, 9201
University City Blvd., Charlotte, NC 28223-00

Re: Latin American Coalition

Dr Michael

I commend the Latin American Coalition and the UNCC Urban Institute for conducting the "Needs Assessment for the Latino community in Mecklenburg County.

I have been the Honorary Consul of Mexico for the past 25 years and have seen the Latino community grow at a very fast pace. Many times in the past, we have not known what the 'needs' are of this very diverse group. We can never have too much information on this growing force. The Latino American Community is a very important part of the Economic growth of the Charlotte region. They are not only helping to build our community they are also fueling our economy by their tremendous purchasing power. They are contributing to the rich cultural diversity of the Charlotte area.

I look forward to continue working with Charlotte and the Latino community.

Please let me know how I can be of assistance to you.

Sincerely,



Wayne P. Cooper
Consul Honorario de Mexico
Charlotte, Carolina
DEL NORTE

444 TIGGERT CREEK RD SUITE 101 CHARLOTTE NC 28228



Alan Gordon
Immigration & Naturalization Law

1018 East Blvd., Suite 7
Charlotte, NC USA 28203
T 704 332 2555
F 704 377 1172
www.greencards.com

May 31, 2006

Angeles Ortega-Moore
Executive Director
Latin American Coalition
4949-B Albemarle Road
Charlotte, NC 28205

Dear Ms. Ortega-Moore,

Mayor Pat McCrory formed the Mayor's Immigration Study Commission in December 2005 to promote a reasoned discussion of immigration in our community. Our mission is to gather data and review current policies in Charlotte and Mecklenburg County focusing on our economy, healthcare, education systems and public safety. Based on our findings we will draft policy recommendations for our City Council, County Commission, and State and Federal elected officials.

The UNC-Charlotte Urban Institute's regional demographic information and Latino community needs assessment contains valuable information about our region and the growing Latino community. This study is a valuable resource to our Commission.

The task of gathering accurate information is a difficult one. I commend you on your efforts and contribution to our City.

Sincerely,

Alan S. Gordon, Esquire

Board Certified Immigration Specialist
Chairman, Mayor's Immigration Study Commission



STATE OF NORTH CAROLINA
OFFICE OF THE GOVERNOR
20301 MAIL SERVICE CENTER • RALEIGH, NC 27699-0301

MICHAEL F. EASLEY
GOVERNOR

June 8, 2006

Angeles Ortega-Moore
Executive Director
Latin American Coalition
4949-B Albemarle Road
Charlotte, NC 28205

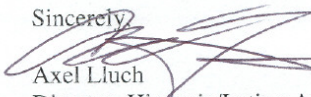
Dear Ms. Ortega-Moore:

As Director of Hispanic/Latino Affairs for the NC Office of the Governor, I want to praise the Latin American Coalition and the UNC Charlotte Urban Institute for conducting this Needs Assessment for the Latino community in Mecklenburg County, and to offer my thanks to the James S. and John L. Knight Foundation for its generous financial support of this timely study.

North Carolina's Latino community has grown dramatically in recent years. These new immigrants are making significant contributions to the state's workforce and enriching the diverse culture of Mecklenburg County, where the Latino population has grown by more than 900 % since 1990. Despite this rapid growth, until now there has never been a comprehensive and impartial analysis of the needs of Mecklenburg County's Latino community that could guide policy decisions and funding priorities of local, state officials, non-profit organizations and others working to serve this growing population.

I look forward to working with the leadership of the City of Charlotte and Mecklenburg County, as well as the Latin American Coalition, in exploring ways to collaborate in addressing the priorities identified in this report. On behalf of the State of North Carolina, I thank you for your strong commitment to our Latino community.

Sincerely,


Axel Lluch
Director, Hispanic/Latino Affairs
NC Office of the Governor



Mr. Jeffrey Michael
Director
UNC Charlotte Urban Institute
9201 University City Boulevard
Charlotte, NC 28223-001

Dear Mr. Michael

As Chair of the Latin American Chamber of Commerce of Charlotte, I want to congratulate the UNC-Urban Institute for conducting such a well researched and timely Needs Assessment for the Latino Community in Mecklenburg County. I will also like to acknowledge the Latin American Coalition for directing the generous financial support received from the John L. Knight Foundation for the benefit of our community.

The LACCC feels the valuable data provided in the study will enable us to continue providing more objective and focused support to our business community in the Charlotte Mecklenburg area. We look forward to presenting the study to our partner business organizations and to our growing membership base.

Again, our sincere congratulations to all involved and many thanks for your excellent work on behalf of our Latino Community.

Sincerely,

Elisa Rodriguez
Chair
Latin American Chamber of Commerce of Charlotte