

**THE LEAGUE OF WOMEN VOTERS OF MOORE COUNTY**

**SPECIAL REPORT**

# **A PORTRAIT OF POVERTY**



***The Impact Of Poverty On Children  
Up To 18 Years Of Age In  
Moore County, North Carolina***





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**SPECIAL REPORT**

**A PORTRAIT OF POVERTY**

**THE IMPACT OF POVERTY ON CHILDREN UP TO 18 YEARS OF AGE  
MOORE COUNTY, NORTH CAROLINA**

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# INTRODUCTION



## INTRODUCTION

**What is the plight of low income children in Moore County?** Several members of the Moore County League of Women Voters asked this question and began this study in 2005 over concern that 20.5% of Moore County's children lived in families below the Federal poverty guidelines. Two members of the Committee had participated in another League study: *Children at Risk: A Survey and Analysis of Representative Agencies and Facilities serving at risk Children from birth to eight years of age*, published January, 1997. The results were favorably received by the many agencies identified in the report, more cooperation among them was evident in subsequent years, and the lack of one resource, dental care for poor children, was established. Now, more than a decade later, we are exploring a different focus: the child in poverty.

The images of poverty are many:

- Poorly clothed children lacking good nutrition, housed in sub-standard dwellings
- Children unable to concentrate on learning in school
- Children without a vision of a better future — a sense of hopelessness.

**What impact does poverty have on these children and on our society? Does it lead to a “poverty of spirit”?** In searching for answers we reviewed the status of poor children's health, the many social services that seek to ameliorate their situations, the effectiveness of juvenile justice for those children in trouble, and the importance of education — at all levels — to overcome some of the problems of poverty.

The faces of poverty in Moore County are varied: a pre-school child in Head Start tries desperately to learn, but has to miss many days because the parent has no transportation. A 10 year old child must supervise younger siblings and be the “mother” because the parent (often single) is working two or three jobs or sinks into the despair of substance abuse. A woman who is a victim of domestic abuse or spouse abandonment finds herself and her children suddenly impoverished. A pregnant young teenager, ignorant of proper nutrition or prenatal care, produces a baby with cognitive brain damage — another child potentially destined for poverty.

**Is poverty circumstantial or is there a culture of poverty?** Marion Crain and Arne L. Kalleberg, professors at the University of North Carolina, describe two views of poverty in their introduction to the book *Ending Poverty in America*.<sup>1</sup> The first view is cultural: it assumes that poor persons have inadequate skills, poor motivation to work, an inability to form stable families and a mindset of failure that is perpetuated through generations. In other words, it is their fault if they are poor!

The other view assumes that poverty is a structural failure of Capitalism: too many low-wage, low-skilled jobs, lack of vocational training, poor schools, and residential segregation that confines the poor to rundown neighborhoods and public projects. This perpetuates a sense of hopelessness. It is the fault of society, of an economy that increasingly divides the rich and poor.

Neither view of poverty is completely valid. There are some cultural aspects to poverty, and an economy that fluctuates between inflation and recession particularly affects the poor. Subsistence is especially critical at a time when costs of food, fuel and housing have accelerated, and unemployment has risen due to industrial and business downsizing. Many families who were managing to subsist now find themselves struggling and falling below the poverty guidelines.

The Federal Government defines income poverty levels: \$22,050 a year for a family of four in 2009. Most governmental programs base recipients' qualifications on this criterion, but we have also researched the "working poor" who do not qualify for many programs, work diligently, but never rise out of the bottom level of society.

The Committee members conducted more than thirty interviews with professionals who have the responsibility for working with children in poverty. We have researched the most recently available statistics, the funding of governmental and non-profit agencies and met with individuals who have experienced the problems of poverty. This is not a comprehensive study nor is it a survey, but a portrait of poverty in our county: the impact on children and consideration of what we, the citizens and residents of Moore County, can do to challenge the problems of poverty.

Whatever the causes, we know that poverty affects everyone, rich and poor, in its effect on the economy, in the maintenance of a permanent underclass and waste of human potential.

**If our Moore County low income residents, trapped in a poor situation, display a "poverty of spirit," how can we help generate a "spirit of hopefulness"?**

**It begins with our children. As stated by Author David K. Shipler: "The more we invest in children, the less we will have to invest later in prisons."<sup>2</sup>**

#### ENDNOTES

1. John Edwards, Marion Crain, Arne L. Kalleberg, eds. *Ending Poverty in America* (New York, The New Press, 2007), 4-5
2. *Ibid.*, "Connecting the Dots," 20.

# **THE EFFECT OF JUVENILE JUSTICE ON POOR AND VULNERABLE CHILDREN**



## THE EFFECT OF JUVENILE JUSTICE ON POOR AND VULNERABLE CHILDREN

The 2008 juvenile crime rate in Moore County amounted to 42.75 per 1000 children or 42 individuals, ages 6 to 15, who were admitted to detention centers. This was the fourth highest rate in the nineteen county Piedmont Region and higher than the state average of 31.52 according to the Annual Report of the North Carolina Department of Juvenile Justice and Delinquency Prevention.<sup>1</sup> The crimes in most cases were due to breaking and entering, stealing or the use and sale of illegal drugs such as marijuana, cocaine, methamphetamine and prescription medications. Why is juvenile criminal activity at a high rate and what happens to those children who face the court system?

Many crimes are committed because of drug activity. A teen may justify: why should I work for minimum wage at a fast food restaurant when I can earn \$500 a day selling drugs? Some, not many, Hispanics, frequently undocumented, traffic in drugs and are the “suppliers.” One incident in Moore County, described by a law enforcement official, involved a trailer loaded with drugs that was raided by an alert Sheriff’s Department. One arrested Hispanic stated that he was required by the “coyote” that financed his illegal travel to the United States to “work” at the trailer one day a week sorting drugs in order to repay his debt. He had come from Raleigh. Illegal immigrants are referred to Immigration and Customs Enforcement (ICE) and transported to Charlotte where they are usually deported unless they are guilty of serious crimes. In those cases, they will be tried and incarcerated. Although no children or youths were involved in this particular criminal activity, the confiscated drugs were destined for distribution and possible sale to young people throughout Moore County.

**Justice is not equal for everyone.** The child from an affluent family may obtain the best attorneys to plead his/her case. The poor child is dependent upon the system to provide legal defense. Some states have compulsory pro bono legal assistance for civil cases, but North Carolina does not. To address this situation, Chief Justice Sarah Parker chaired the Equal Access to Justice Commission. It was established in 2005 by a North Carolina Supreme Court Order. Its Mission: to expand civil legal representation for people of low income and modest means.

The plan to support the Commission’s action is sponsored by the Interest on Lawyers’ Trust Accounts (IOLTA). Banks’ interest from Trust Accounts is diverted to the IOLTA program that in turn dispenses grants for legal services and volunteer lawyer programs for the indigent. Until 2008 this program was voluntary. It was not effective. Nearly 20% of the legal needs of poor people in North Carolina were unmet. The North Carolina Supreme Court ordered the State Bar on October 11, 2007, to implement a *mandatory* IOLTA program for lawyers in the state effective January 1, 2008. Lawyers were required

to be in compliance effective June 30, 2008.

The nationwide financial crisis in the fall of 2008 impacted IOLTA's anticipated reserve fund. Most of its revenue was gained from real estate transactions and bank interest which had plummeted. Although the addition of new trust accounts has kept the fund from insolvency, it is doubtful that many new grants will be awarded in 2010 to the civil legal services that serve the poor. <sup>2</sup>

**What is a juvenile crime?** In North Carolina a youth between the ages of 6 to 17 may be charged with status/undisciplined offenses, such as skipping school or running away. A youth between 6 to 15 may be charged with misdemeanors and felonies, but a youth 16 and older with these same charges will be tried in adult court. North Carolina is one of only three states in the country that charges 16 and 17 year old youths as adults with criminal offenses and the only state that denies them the ability to return to juvenile court. Minor misdemeanors include simple assault, drug possession, disorderly conduct and carrying a weapon. More serious misdemeanors cover violations such as breaking and entering, robbery and forgery. Violent class felonies include sexual offenses, murder and drug trafficking.

The sentences for these offenses are varied. They may be as simple as community service, counseling, substance abuse treatment or electronic monitoring. Serious offenses may require commitment to a Youth Development Center. There are five state-wide Centers. Samarkand Manor in Moore County is an all -female center with 36 beds. Despite the State Legislature's attempt to close this center in July, 2009, funding was continued for the 2009-2010 fiscal year. Samarkand, one of the older facilities, may not survive beyond July, 2010, as the North Carolina Department of Juvenile Justice and Delinquency Prevention plans to replace many of the Centers. A new facility in Chatham County housing 32 females was dedicated in April, 2008.

The Youth Developmental Centers provide long term education, treatment and rehabilitation for youths who have committed a crime and have been referred by the court system. Statistics for 2008 state that three juveniles from Moore County were placed in one of the Centers compared to one in 2007 and two in 2006. Altogether 55 out of 104 juveniles with "complaints approved for court" were sentenced in 2007. Three juveniles were convicted of violent crimes. <sup>3</sup>

Juveniles accused of crimes in Moore County must be transported to Fayetteville or Black Mountain as there is no facility for them in the Moore County Detention Center. Only offenders 16 and over will be incarcerated here. The cost to hold inmates is \$60 to \$80 per day; costs are undefined for transportation by a Sheriff's Deputy to a juvenile detention facility.

**Crime is not always a clear-cut action.** There is a thin line between a school offense and a criminal act. Children can be charged criminally if they respond physically to a teacher, such as grabbing a book from his/her hand. If a teacher or principal grabs a child aggressively, and the child responds with pushing or even hitting, the child may be charged with a criminal act even if no injury was sustained. Parents should be notified, but too often there is a lack of communication between the schools and the child's home. Many disciplinary forms that are sent home with the student possibly never get to the parent.

Nationally, the interpretation of juvenile crime is a serious problem. In September, 2007, The Southern Poverty Law Center established an initiative, "School-to-Prison Reform Project." The Project addresses the situation of school children "being pushed out of schools and into juvenile lock-ups for minor misconduct that in an earlier era would have warranted counseling or a trip to the principal's office rather than a court appearance." Through legal action, community activism and lobbying, the Project aims: ". . . to ensure that students get the services—both in school and in the juvenile justice system—that can make the difference between incarceration and graduation."<sup>4</sup> Initially, the SPLC concentrated on the New Orleans area where children of color were particularly disadvantaged. SPLC expects to expand the Project across the country to work with education, disability rights and juvenile justice advocacy groups so that "all children, including children with disabilities and children of color, receive the education they deserve and are guaranteed under federal law."<sup>5</sup> As the program is new, there has been no evaluation published of its progress.

Many children who are accused of misdemeanors have mental health or learning disabilities. A Moore County professional who works with the problems of school children related an example of a special needs child who was punished for "acting out." He was assigned a "time out." However, the "time out" was confinement in a very odorous isolated bathroom off the school's gymnasium. He was terrified. When the mother discovered what had happened, she protested. Unfortunately, she received very little attention from school officials until the National Association for the Advancement of Colored People (NAACP) entered as an advocate. Perhaps the mother did not receive enough information about the child's problems in school or perhaps the teacher was overwhelmed and lacked support from her/his superiors. Undoubtedly, the school acted inappropriately with a special needs child who happened to be African-American.

**Race matters.** The Annie E. Casey Foundation is sponsoring guides and toolkits for organizations to "assess policies and practices that contribute inequitable outcomes for children, families, and communities." One "toolkit" addresses the "issues of inequity

surrounding juvenile justice.” The fact that “race matters” was also acknowledged by the General Assembly when it passed the North Carolina Racial Justice Act in March 2009. Capital punishment decreed by judgements “sought or obtained on the basis of race” will be forbidden. There is no doubt that racial disparity affects many aspects of children’s lives.

The truant child, the one who steals or is caught with drugs, enters the court system. Only recently, the state established a Family Court in Moore County. The judge follows each child through various cases, such as custody, child support, providing a continuity of decisions. Initially, a child who is apprehended for committing a crime is taken before a juvenile court counselor who determines probable cause and whether there is enough evidence to proceed further. If the counselor decides affirmatively, the perpetrator will be held over, assigned bail and put on the docket for court appearance.

The status of justice for children in Moore County falls into several categories. According to the former Clerk of Court, the following statistics apply to 2007: 394 juvenile cases, 31 dependency cases (put into foster care), 58 cases of neglect (children taken out of home for a period of time), 15 abuse cases, sexual or physical, 22 termination of parental rights (child put up for adoption). For those children who were incarcerated, recidivism has increased to as much as 75% after age 18, according to the Sheriff’s Department. They may be the second or third generation of convicted law breakers. This is a very serious trend.

For many former prisoners, recidivism occurs within three years. Nationally, 67% of them are re-arrested within three years of their incarceration. As a current long term prisoner observed, “when people leave prison, they’re given money for bus fare and told ‘Good Luck’<sup>6</sup>. Surely the State should take more responsibility for the released prisoner. Without some direction and financial support, many probationers fall into the same patterns of live that they pursued before they were sentenced.

Some of the reasons for the increase of juvenile delinquency may be documented with statistics. State-wide, 61% of youth who were sentenced had serious problems in school, 42% were in need of substance abuse treatment, 37% had a prior conviction and 23% had a history of running away from home. Furthermore, 7 in 10 youth had mental health needs, 4 in 10 had a parent or sibling with a criminal history and 3 in 10 lived in a home with a history of domestic violence.<sup>7</sup>

Law enforcement officials in Moore County cite the lack of family structure, parents working several jobs, leaving children on their own after school as major causes of delinquency. Unsupervised children, watching violent movies, television programs and internet games, develop aggressive perceptions of life and disdain for education. As they

fall behind in school, they become more receptive to illegal activities, and they develop an attitude of hopelessness.

Education is the key to surmounting or eliminating criminal behavior in children.

The Sheriff presented a successful example: A career criminal, in prison for ten years, took advantage of the educational programs available. He became a lawyer and is a law abiding, contributing citizen today. Although in prison, he developed a sense of “hope.” Only by instilling this sense of hopefulness in our Moore County children will we be able to reverse the trend of lawlessness. Otherwise, we may lament, as did Dean James B. Ewers, Jr. of Miami University: “Would a survey show that more jails than schools are being built across the country?”<sup>8</sup>

#### **ENDNOTES**

1. Page 8. Juvenile crime rate is defined as the number of complaints received by the court services offices per 1000 youth ages 6 to 15 years old.
2. *North Carolina Lawyers Weekly*, February 9, 2009
3. Action for Children, CLIKS (Community Level Information on Kids), 13-14.
4. Southern Poverty Law Center, *New Project Seeks Justice for Vulnerable Children*, January 20, 2008.
5. *Ibid.* SPLC Launches ‘School to Prison Reform Project’ to Help At-Risk Children get Special Education Services, Avoid Incarceration, March 13, 2008.
6. Curtis Stephen, “Beyond Bars,” *The Crisis*, Spring, 2008, 36.
7. North Carolina Department of Juvenile Justice and Delinquency Prevention, *Annual Report*. Raleigh, April 1, 2009.
8. James B. Ewers, Jr., Associate Dean for Student Affairs and Director of Community Partnerships, Miami University, Middletown, Ohio. “A Message from the Old School,” *The Crisis*, Spring, 2008, 12-14.



# **THE LURE OF GANGS**



## THE LURE OF GANGS

Gang activity has a presence in Moore County. It is not a serious problem as yet, but children as young as those in middle schools are exposed to the symbols, the threats, the bravado of older students. Vulnerable children from economically disadvantaged or dysfunctional families sometimes fall prey to gang recruiters who offer a sense of “security” or substitute family. Although some children from middle and upper income families respond to the enticement of gang leaders, many are poor. “Poverty is a significant indicator of criminal/delinquent behavior,” stated 19D District Attorney Maureen Krueger based on her comprehensive experience in the court system. Young people tend to “connect” — to “hang out” and socialize, but unfortunately some disaffected youths may join a group that is criminally directed: a gang.

A gang is defined by the North Carolina Street Gang Suppression Act of 2008: “a group of three or more persons. . .participating in a pattern of criminal street gang activity.” The wayward child, a first offender, is given a “second chance” providing he or she does not continue illegal activities. A youth 15 years or older who is convicted of a misdemeanor in association with a criminal street gang could have the offense increased from a Class A1 misdemeanor to a Class I felony. This does not necessarily result in prison time, but the first offender may be placed on probation for not less than one year. The Act has been criticized by some North Carolina District Attorneys for not being strong enough, but many others acknowledge that the bill is a first step towards curtailing gang activity. However, a non-profit coordinator noted that laws “will not curb criminal activity unless coupled with efforts to address issues such as poverty that drive young people to gangs.”<sup>1</sup>

Organized gang activity has increased over the last five years in the nation as well as in North Carolina including the MS13, an international gang known for violent crime and drug trafficking. Moore County is not immune to these cultural shifts. At least nine criminal street gangs have some presence in the county. These include the Bloods, the Crips, Sur 13 Surenos, Two Nations and the Latin Kings among others. Previously, gang information was not available or shared among agencies, but the establishment of the Moore County Gang Prevention Task Force filled the gap . During 2009 the Task Force developed a network among agencies to collect and share information. This was an important step towards assessing the extent of gang activity in Moore County. Most importantly, a preliminary assessment confirmed a relationship between poverty and gangs.

The North Carolina General Assembly acknowledged the need to develop community based non-institutional alternatives by passing General Statute 143B-543 emphasizing prevention of crime and serving court involved youth through the establishment of local Councils. Councils are funded by the state with a match of funds from the county. In order to receive funding, a county Board of Commissioners must appoint a Juvenile Crime Prevention Council that would include the school superintendent, the

local sheriff, the district attorney and the social services director among many other representatives of the community. The Council's mission: To galvanize community leaders and to reduce and prevent juvenile crime. After a planning process, the Council prioritizes community risk factors for youths and determines the services needed to address those problem areas. Despite major state and local budget cuts in 2009, Moore County applied for and received a Federal grant to complete a gang assessment in addition to funding organizations that serve at risk young people such as Moore Youth Service, Communities in Schools, Moore Buddies and Moore Family Services. Future state and local budget cuts are anticipated which will have an impact on the program.

North Carolina established another means of identifying gang activity: GangNET. The General Assembly appropriated funds in the 2006-07 session to create a criminal justice gang intelligence database with information from local law enforcement and correctional organizations. Moore County is a participant and cooperates with the Lee County Gang Task Force. Communication throughout the counties helps to consolidate information. It "will greatly enhance law enforcement's ability to identify gang members and activities and provide a standardized base of information for the (Governor's) Crime Commission to more accurately answer limited questions on the aggregate activities of gangs in communities across the state."<sup>2</sup>

At a Community Forum on Gang Awareness, October 21, 2009, Mike Kimbrell, Chair of the Gang Prevention Task Force, stated that gang membership usually involved drug use and crimes, such as robberies, to pay for the drugs. Children may be recruited in any neighborhood, from any ethnic background, social or economic level. Surveys have shown that even young children in sixth grade have succumbed to drug use. One organization, Drug Free Moore County, directed by Darlene David, is dedicated: "To increase awareness, disseminate information, and garner support in order to facilitate the prevention, intervention and treatment of substance abuse in Moore County." This includes programs in the schools that present drug/alcohol information.

Moore County Schools maintains a Special Police Force headed by Chief Sammy McNeill. The Force was the only agency in North Carolina to be awarded the National Exemplary School Safety Award by the School Safety Advocacy Council. One recent program—the Gang Resistance Education and Training (GREAT)—was among a number of categories that were evaluated. A Resource Officer conducts a 13-week program "that shows students an alternative to being a part of a gang. The Program teaches about consequences of actions and making the right decisions."<sup>3</sup> This is a very important resource for students who may be susceptible to criminal gang influences.

After school activities are also important for directing appropriate behavior. The free community based After School Youth Center sponsored by the National Association for the Advancement of Colored People (NAACP) in the Southern Pines Housing Authorities Apartments represents one example of the several organized activities that are available in the county. Attendance includes children from the neighborhood

as well as some from other areas. From 3:45 to 5:00 P.M. children may participate in sports, learn computer skills, improve mathematics knowledge and writing effectiveness or complete class projects. Parent volunteers are welcome which reinforces the communication within families, and most importantly, builds self confidence in children. “Students are learning how to respect each other, team play, and have a one on one experience with behavior,” noted O’Linda Gillis, President of the Moore County NAACP. This is an important step towards deflecting the attraction of gang membership and directing children towards productive adulthood.

**How does a parent determine that a child is becoming involved in a gang?** Gangs have particular “codes.” They may involve certain sports clothes with team logos that have no relationship to the area but signify a specific gang message. Unusual jewelry, especially beads, tattoos, certain colors, and, especially, hand manipulations form a special means of communication among gang members. The signs may be subtle, and the gang member may appear to be a “regular” person while leading a double life. He or she may appear to be a well behaved individual in public or at home, but secretly belong to a gang. Most likely, the child is involved with drug use.

Parental awareness and involvement in their children’s activities are the best means of **preventing** gang enticement. Once a child is involved in gang activities, community **intervention** by the many dedicated agencies may be needed. As a community we need to ameliorate the conditions of families in poverty as much as possible for this is a breeding ground for gang membership. **Suppression** of the gangs remains the goal of all concerned citizens. **Prevention, intervention, suppression** — these are the means to combat criminal gangs in Moore County.<sup>4</sup>

#### ENDNOTES

1. *The News and Observer*, July 19, 2008.
2. *Gangs in North Carolina: A 2009 Report to the General Assembly, March 2009; Highlights of the 2007 National Youth Gang Survey*, U.S. Department of Justice, April, 2009.
3. Moore County Schools, *Perspective*, December 2009.
4. District Attorney Maureen Krueger, Statement, Moore County Gang Prevention Task Force Community Forum. October 21, 2009.



# **THE STATE OF POOR CHILDREN'S HEALTH**



## THE STATE OF POOR CHILDREN'S HEALTH

### **Are poor children in Moore County less healthy than more affluent children? How do we compare with other communities, the nation and the state as a whole?**

We know that, nationally, poverty's impact is felt mostly by children and many develop health problems that escalate in adulthood to chronic diseases such as diabetes, obesity, heart disease and asthma. "If the results of poverty are left to run loose, the economic consequence to everybody, to all Americans and all taxpayers, will be substantial" according to a recent study.<sup>1</sup> On the other hand, if we address the health needs of poor children in their first five years, we reduce the incidence of debilitating adult illnesses and reduce the amount it will cost society to treat the patients.

The Moore County Health Department serves children from birth through seven years of age. Five hundred sixty seven received care in 2006. One of the primary missions of the Department is: "to provide and/or foster dynamic public health programs" especially for children's special services, immunizations which are free in North Carolina up to the age of 18, maternity care, nutrition and other supportive programs that affect the well being of children. A pediatric clinic is held one day a month with a professional from Raleigh. Audiologists provided by the state test all children at birth in the hospital for hearing problems. If a problem is discerned, a follow-up is arranged within four weeks. Four social workers are assigned 75 children each. Counselors also visit homes as child service coordinators to follow up on social issues.

According to the Health Department Director, Robert Wittman, Moore County is "resource rich" for poor children and no one should be without assistance. The following will explore the programs available to children in families below the 2008 Federal poverty guidelines of \$22,050 for a family of four and indicate the barriers to their accessing help.

**A healthy start for newborns is essential.** The Health Department has collaborated with First Health Moore Regional Hospital in a program, designated Moore GreatBeginnings, to visit newborns in their homes within five days of leaving the hospital. A registered nurse visits the home if the mother is agreeable. She makes a physical assessment of the infant and reviews the child's environment. She counsels the family on care and feeding, sudden infant death syndrome prevention, growth, immunizations and informs the parent about all the community resources available. According to Connie Christopher, RN, Associate Director of First Health Home Health Services: "By addressing these issues early and offering referrals to appropriate social, health, and community resources, we can make a difference for the child."<sup>2</sup> Follow up visits are made in three and in six months. Formerly, 24% of babies in Moore County did not receive health services within the first week after leaving the hospital compared to only 12% at the state level.

The Great Beginnings program was instituted in August 2007. Sherri Thomas, RN, Coordinator of the program, reported 251 visits in fiscal year July 1-June 30, 2007-08. During fiscal year 2008-09 the number of families served increased to 334. Partners for Families

and Children funds the program through North Carolina's Smart Start.

**Infant mortality is also a serious concern.** In 1988 North Carolina had the worst infant mortality rate in the United States: 12.6 per 1000 live births compared to the 10.0 average for the country. This was improved somewhat by 1998 when North Carolina's rate was 9.3 compared to the national rate of 7.1. However, Moore County's rate for 1998 was 13.6, 43% higher than the state. Moreover, the rate for minority babies was 44.4 compared to 4.1 for white babies which demonstrates a wide social divide.<sup>3</sup>

Moore County statistics for 2007 cite eleven infant deaths or 10.8 rate per 1000 live births. Infant mortality in Moore County decreased in 2008 to a rate of 6.9 or seven deaths. Again, the rates per 1000 live births for white babies, 6.2, compared to 10.4 for minorities, show a continuing racial and economic disparity.

The birth of a healthy newborn depends on the health and prenatal care of the mother. The Health Department offers counseling for high and low risk pregnancies, case management, educational classes and laboratory services. The patient's eligibility is determined by a sliding scale fee according to income. All Moore County residents, regardless of immigration status, may receive help. This is mandated by the Federal government.<sup>5</sup> **The service is there, but what if the prospective client does not seek help or is unaware that help is available?**

**The pregnant woman may be just a child herself.** One hundred forty seven girls between the ages of 15 to 19 became pregnant in 2006. Thirty nine were repeat pregnancies. During 2007 forty-six girls between the ages of 15 to 17 became pregnant a rate of 31.5 per 1000 population. Significantly, the rate for white girls was 24.3 while the rate for minority girls was 51.6.

**What happens to these girls?** Eleven of the 46 pregnancies in 2007 were aborted. As far as we know, there is no abortion provider in Moore County, so the girl who wishes to terminate a pregnancy must journey elsewhere. She may, however, receive counseling at the Life Care Pregnancy Center. Various methods of termination are discussed in order for the girl or woman to "make an informed decision."

It is doubtful if many of these very young teens and pre-teens sought prenatal help. In fact they may not have been aware of their pregnancies. In one example told to the Committee, a teen aged girl was a passenger in a car driven by another teenager. As they drove around the Pinehurst Traffic Circle, the girl suddenly exclaimed that she felt ill and needed to go to the Moore Regional Emergency Room. There she gave birth to a full term baby. She claimed she had no knowledge that she was pregnant. Her mother who was notified was shocked. We may wonder how this could happen.

Parental sex education may be lacking, the child may be ignorant of sexuality and become the target of a predator. Until 2009 North Carolina law did not allow sex education to be taught in the public schools. Even the subject of abstinence was not taught in Moore County Schools. First Health attempted to address this omission by sponsoring

three forums in February, 2008, entitled: Helping Adolescents Survive Adolescence, Positive Parenting for Teen Pregnancy Prevention, funded with a \$12,000 grant from Healthy Carolinians.

Although informing the public is important, the passage of the Healthy Youth Act by the North Carolina General Assembly in 2009 introduced a significantly new educational program. All public schools will be required to offer two programs in grades 7 to 9—one for sexual abstinence until marriage and one an abstinence-based comprehensive sexuality education program. Parents may choose which program their children may attend. North Carolina ranks ninth in the nation for the highest numbers of teen pregnancy costing the state a substantial amount per year. This legislation is a positive step towards addressing the problem.

Many teens are the second and third generations of teen age pregnancy according to some service providers although there is no recorded data to support it. Many pregnancies are the result of the breakdown of the family, parents working two to three jobs to support their family, ten and eleven-year-olds acting as the “mother.” Too often, a pregnancy is a way out for a young teen to escape an unsatisfactory home life. Unfortunately, she trades one bad situation for another.

Most of the pregnant teens and pre-teens came from low income families, but even those who came from middle income families with health insurance found themselves bereft. Pregnant teens are not covered by insurance. There are no maternity homes in Moore County where a teen can reside during her pregnancy, and since her parents or guardians cannot provide health insurance, the teen is forced to apply to Medicaid for her delivery. A teen may go to court to be emancipated from her parents, decide to cohabit with the child’s father or find a place by herself. Most often, the living conditions in dilapidated trailers and substandard housing, are very deplorable. **These teen aged mothers are the NEW POOR of Moore County.**

The Moore County Cooperative Extension provides a program for these young women that offers individual and group support, parenting education and life skills. They are also given academic support with encouragement to stay in school, get a high school diploma and be able to enter the work force to support their children. This program entitled Teens as Parents (TAPS) was established in 2004. Partners for Children and Families funded the program with an \$18,000 grant.

A smoking mother is an obvious danger to the fetus and later to the infant after birth. In Moore County the percentage of birth mothers in 2006 who smoked was 12.7% for white mothers and 50% for minority mothers. Not only will this affect the health of the child at birth but a continuing level of second hand smoke in the home could be detrimental. FirstHealth has established a program, HomeFree, to provide quit-tobacco assistance in the home of FirstHealth Home Care patients, especially children. The program is funded by three grants from the Kate B. Reynolds Charitable Trust and the American Legacy Foundation.<sup>7</sup>

Good nutrition is necessary for a healthy mother and child. The Federal government funds the Woman's, Infants and Children (WIC) program to provide basic nutrition at low cost to pregnant women and children up to the age of five. The participants must be income eligible: 185% of the Federal Poverty Guideline. Undocumented immigrants are not eligible.

The Federal Food Stamp Program supplies poor families with basic food through a rather complicated income eligibility system. Average monthly benefits for a family of four are \$542 for the period through September 30, 2008.<sup>8</sup> Participants are given an electronic card, much like an ATM card, to use for nutritious purchases in designated food stores. Again, undocumented immigrants are not eligible.

**What happens to the child who goes to school hungry?** Perhaps the parent is unable or unwilling to provide the child with breakfast. All school children have access to breakfast which is funded by the Federal Government. The School Breakfast Program was established by Congress in 1975 as a permanent entitlement program. Is it successful? The Food Research and Action Center reports that "students who eat school breakfast increase their math and reading scores as well as improve their speed and memory in cognitive tests." Surely the results validate the program.

A child from a poverty level family also has access to free or reduced lunch at school. This program was established by the National School Lunch Act in 1946. Eligibility is based on the family size and income. For example, a child from a family of four with an income of \$38,203 qualifies for reduced fee lunch. Free lunches are available for children from families of four below \$26,845.<sup>9</sup> For fiscal year 2007 48.5% of children in Moore County were enrolled in the free or reduced price lunch program.

**What happens to the child who has little or no food over the week-end? Even worse, what if the food is unpalatable?** This may result from parental disability, substance abuse or neglect. One hundred seventy substantiated cases of child abuse and neglect in Moore County were reported in 2007.<sup>10</sup> Neglect can appear in many forms. For example, a service provider reported a situation in a home that she visited to investigate the school absenteeism of one child. The provider was invited into the kitchen where the evening meal was being prepared. She noticed that all the pots, plates and glasses had lids or other coverings. She thought this strange until she looked up at the ceiling. It was covered with cockroaches. The home was a rental, had no water and no electricity. The father had been accused of domestic abuse and the mother was a user of illegal substances — a very unpleasant home environment.

In order to meet the need of these children from marginal homes, Linda Hubbard, Director of the Moore County Schools Volunteer Program, established the Backpack Pals program in 2005 with start up funds from St. Joseph of the Pines and the Moore County Family Trust. Now many local businesses and organizations donate funds and volunteers.<sup>11</sup>

In cooperation with the Sandhills Food Bank, Linda supervises the packing of non-perishable foods in non-distinguishable backpacks for the child to take home on Friday af-

ternoon. The distribution of more than 400 backpacks ensures that no child needs to go hungry between Friday and his/her return to school on Monday.

The Backpacks are returned on Monday morning, and sometimes they have to be discarded because they are infested with lice. Many children do not have the facilities for cleanliness, nor the parental supervision for preventing chronic infestation of lice. Treatment can be costly. Untreated infestation can cause hair to fall out among other medical problems. In some cases, FirstHealth gives assistance.

One example of the Backpack program's success is a boy who misbehaved in class and was inattentive. Shortly after he participated in the Backpack program, his behavior was immensely improved and he began to learn. He was not hungry any more!

Unfortunately, poor diet habits are difficult to overcome and often result in obesity and overweight. In the years 2004-2006 North Carolina ranked fifth in the country for the highest rate of overweight youth, ages 10 to 17. The percentage of overweight children, 2 to 4 years, in Moore County in 2006 was: 12.1%. The percentage was even more significant for children 5 to 11 years: 23.9%.<sup>12</sup> The latest statistics for 2007 show 17.3% of Moore County children between the ages of 2 and 18 were overweight. Obesity in childhood establishes a trend for adulthood which may result in many chronic diseases such as diabetes, kidney and heart failure. Obesity is one of the most serious conditions that many in poverty face due to poor dietary choices, the increasing cost of basic, good, nutritious food and lack of exercise.

First Health of the Carolinas was awarded a \$360,000 grant in January 2010 from the Robert Wood Johnson Foundation entitled "Healthy Kids, Healthy Communities." The grant will be used to establish programs to combat the increase of childhood obesity in the region. Local task forces will be assigned to develop policies and environments to encourage healthy eating and to provide opportunities for physical activity among children. The program will concentrate on areas with a high number of free and reduced school lunch recipients such as Aberdeen, Robbins and Southern Pines. These are long range goals requiring years of administration before results may be ascertained, but the grant is an important step towards addressing the problem of childhood obesity.

**Children need medical attention.** The United States is one of the wealthiest nations in the world, yet 9,069,000 of our children do not have health insurance. In North Carolina 275,000 children are uninsured. Sixty per cent of these children are from minorities: 26% are African-American, 25% are Hispanic, 9% are other races. According to the Children's Defense Fund, April 2006, this lack of health coverage suggests that uninsured children are "more likely to have unmet medical needs and suffer higher rates of infant mortality, asthma, lead poisoning, and obesity." One government program that addresses this need is Medicaid.

Medicaid, a federally and state funded entitlement, is a safety net for many poor families. Passed in 1965 as Title XIX of the Social Security Act, Medicaid provided medical assistance for the nation's poor. However, low income is only one test for eligibility and

the States have the responsibility for establishing their criteria. Children under the age of six and pregnant women qualify if their family's income is 133 percent of the Federal poverty level. Among the services provided are prenatal care, hospitalization, physician visits, prescription drugs, early, periodic screening, diagnostic and treatment services for children under age 21. In recent years the cost of Medicaid has accelerated due to population growth and legislation in the late 1980s that expanded Medicaid to more low-income pregnant women and poor children. Indeed Medicaid may be the only source of medical assistance for a very poor child.

Preventive health services are as important as medical assistance. North Carolina established the Health Check Program in 1993 to "improve Medicaid-enrolled children's access to preventive health services." Participants are "eligible to receive comprehensive well child check ups, immunizations, vision, hearing and dental screening services on a regular basis throughout childhood." Not all eligible children take advantage of this program although the participation ratio has increased from 61.1% in 2002-03, 64.4% in 2003-04 to 66.2% in 2004-05, the last available statistics. Most importantly, the child will be provided with transportation, if necessary, to medical appointments by the Department of Social Services. This helps to maintain good health among the poor.

**The child of poverty may access many programs, but what of the child in a working family that does not qualify for Medicaid yet cannot afford health insurance premiums? These are the "working poor."** To address this gap of health assistance, the State Children's Health Insurance Program (SCHIP) was passed by Congress under the Balanced Budget Act of 1997. North Carolina adopted Health Choice as its version of the legislation. The Federal government funds 75% and the state 25% of the program.

A child qualifies for Health Choice if he/she is uninsured, ineligible for Medicaid, and has a family income that is equal to or less than 200% of the Federal poverty guidelines. An approved child may receive comprehensive benefits including primary and preventive services, prescription drugs, therapy, vision, hearing and dental services among others. There are enrollment fees and co-payments determined by an income sliding scale. Unfortunately, many eligible families are not aware of the program and, nationally, at least 30 percent of eligible children have not enrolled. Although 113,000 North Carolina children are covered by Health Choice, there are still many children without any insurance. In Moore County 11.5% of children are without health insurance. An ill child without an established medical provider or medical insurance often visits the hospital's Emergency Room. This impacts the total services dispensed to the whole population. The communication gap between services and parents/guardians needs to be narrowed.

Health Choice is an important factor in the health of North Carolina's, and Moore County's, children. Since SCHIP is not an entitlement, but a defined budgetary program, the increase in population and rising costs have pressured the program. Congress expanded SCHIP by passing legislation in 2009 to include children in families earning 300% of poverty level income (\$63,600 for a family of four). With rising food and fuel prices, many

children of the working poor will be impacted. **Does a parent have to choose between putting food on the table or taking a sick child to the doctor?**

**Dental health is as important as physical health to a growing child.** A previous League of Women Voters study found in 1997 that no dentists in Moore County would treat low income children on Medicaid. They were transported, by necessity, to Sanford for treatment. FirstHealth, a not-for-profit corporation, recognized this need and established the FirstHealth Dental Care Centers to serve the dental needs of low income children up to age 18. Since the Centers opened in October 1998, over 16,000 children have been treated. Directed by Dr. Sharon Harrell, DDS, MPH, FAGD, and supported by other dental professionals, the Centers are important facilities for children in Moore County.

Children qualify if their families' incomes are less than 200% of poverty guidelines, are on Medicaid, have Health Choice or are uninsured. The uninsured represent 7% of the total treated. They pay \$35 per visit. However, if they are unable to pay, a plan will be developed. Referrals are received from the Moore County School nurses, Department of Social Services, Head Start and flyers distributed throughout the area. A Kids in Crisis program is sponsored by the Moore Regional Hospital Foundation's Children's CARE Fund. Children in need are referred through the Moore County school nurses to the dental clinics. In 2006 the John W. Roffe and Marjorie A. Roffe Endowment donated \$25,000 to this cause.

The Dental Centers have been very successful in preventing tooth decay. In 1996-97, 30% of kindergarten children in Moore County had untreated decay; in 2005-06 that was reduced to 22%. The application of dental sealants to prevent decay was increased from 38% in 1996-97 to 59% in 2005-06. Even more important is nutritional counseling to promote good dental health.

Mothers are cautioned to avoid putting an infant to sleep with a formula bottle in its mouth. The sugar content in the formula erodes the teeth. The Center cited one example of a four year old girl who had cavities in all of her teeth from this practice. She had to be transported to Fayetteville where a pediatric dentist had to anaesthetize her and treat the whole mouth. This traumatic experience could have been avoided by a knowledgeable mother. Education is as important as treatment.

The Dental Centers targeted children needing services in rural northern Moore County by sponsoring six "Smart Start" Saturdays. This provided dental care for children up to five years of age who had Medicaid or Health Choice. The clinics were funded with grants from North Carolina Smart Start and the Moore County Partners for Children and Families.

A grant from the North Carolina Health & Wellness Trust Fund in 2009 awarded the Dental Centers \$180,000 over three years. This will enable the Centers to expand hours of service and to train providers to educate their patients about the dangers of overweight and obesity. Currently, 1000 children visit the clinics each month. The extended hours will enable the dental professionals to serve an additional 100 patients. In addition two other private facilities, Moore County Dental Care Center and Periodontist Dr. Armin Abron, treat indigent children. The facilities are available for maintaining good dental health for

poor children providing they access them.

**Is there cooperation among all these institutions and groups that provide health services to children in poverty?** When the League of Women Voters published *Children at Risk* in 1997, it concluded that: “Insufficient communication with parents and among service agencies appears a major factor in the dispensing of services.” Is this true today? Some of the providers that we interviewed claimed there was a good deal of cooperation and sharing of problems with one another. Other providers felt there was still a lot of “turf” protection among the agencies serving the poor. One factor stands out: FirstHealth initiated and sponsored services and programs that it sponsored and shared with the Moore County Health Department.

FirstHealth is required to provide “charity care” to maintain its tax-exempt status, but it goes beyond those requirements because its management concluded that “it is the right thing to do.” One significant program was Community Outreach funded in 2002 by the Health Resources and Services Administration of the United States Department of Health and Human Resources. This Healthy Communities Access Program grant enabled FirstHealth to place three community outreach coordinators under the aegis of MooreHealth to “help people in need to access health and social service resources.” Director Robert Wittman of the Health Department lauded the service: “The recent growth in Hispanic immigrant community has nearly overwhelmed the resources of some of our smaller towns, and this program gives us an additional resource to help meet the great health and social service needs of that population in particular.”<sup>14</sup>

What can we conclude about the state of poor children’s health in Moore County? The school nurse is an important contact for children with health problems. Are there enough nurses? FirstHealth provides six nurses for 22 schools under contract with the Moore County Schools. One nurse was stationed full time at Pinecrest High School which had an increase in special needs students. One nurse speaks Spanish. This does not seem adequate for a school population of nearly 13,000, or one nurse for 2166 students. The North Carolina Department of Health and Human Services stated in 2007 that one nurse for 750 students is an ideal ratio.

The Dental Centers have been successful in reducing poor children’s tooth decay, but 41% still remain untreated with dental sealants and 22% of children entering kindergarten still have tooth decay. More parents need to be informed of the availability of this benefit.

Hispanic children who are undocumented do not qualify for nutrition programs although they may access the Food Bank. With the disappearance of some industries in Moore County, many Hispanic households have lower paying jobs and find it difficult to survive. Many are family oriented, proud residents, wary of seeking assistance and perhaps exposing their immigration status. Will these nutrition-deprived children become adults with chronic health problems that will, by necessity, be added to the growing population served by the Health Department? Will they overburden First Health’s Emergency services?

Statistically, Moore County’s minority population is disadvantaged with higher infant mor-

tality, higher teen pregnancy and lower average income. The disparity of North Carolina's children who were in excellent/very good health was documented by the Child and Adolescent Health Measurement Initiative: Hispanics ranked 55.7%, African-Americans 81.1% and white 89.7%. This revealed that nearly one half of Hispanics and one fifth of African-Americans ranked good or below satisfactory health — a matter of concern to everyone.

There is still “insufficient communication with parents” as noted in the League’s previous study. **Educating the parents about available services is the key to improving children’s health.**

**The state of poor children’s health in Moore County is good, but it could be better.**

#### ENDNOTES

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# **THE ROLE OF SOCIAL SERVICES FOR LOW INCOME CHILDREN**



## THE ROLE OF SOCIAL SERVICES FOR LOW INCOME CHILDREN

**The Moore County Department of Social Services is the hub administering many of the social programs that impact the children of low income families.** Its mission is “To promote quality of life, dignity, and respect for all citizens of Moore County through excellence in social and economic service provision, community education, and resource development.” Among the programs affecting children that DSS administers are: Work First, Foster Care and Adoption, Income Maintenance, Child Care Subsidies and housing options. DSS is the main resource of subsistence for many of the county’s poor residents.

Family assistance was changed drastically in 1996 by passage of the Personal Responsibility and Work Opportunity Act. Termed the “Temporary Assistance for Needy Families” (TANF), this legislation replaced the former Aid to Families with Dependent Children (AFDC). Each state was required to establish its version of this law. North Carolina’s Welfare Reform Bill, termed “Work First,” was passed into law in 1997. This sweeping welfare reform required aid recipients who applied for Work First in North Carolina to find employment or participate in “countable” work activities within 24 months. Goals focused on getting all families off welfare. Instead of receiving cash assistance families would be guided into meaningful employment through counseling, educational training and child care assistance. Most of all, Work First helps dependent families achieve self-sufficiency.

A family’s eligibility for the various Work First programs is determined by need and circumstances. After assessment DSS employees advise the families of the services available such as “employment activities, child care, transportation, substance abuse, domestic violence counseling and treatment, housing assistance, food stamp benefits, etc.”<sup>1</sup> The families are referred to the appropriate agency.

The success of Work First is based on the cooperation of other agencies. The Job Readiness classes at Sandhills Community College prepare students for employment; the homeless and poorly housed are referred to the Sandhills Community Action Program for housing assistance; victims of domestic violence are referred to Friend to Friend which maintains a women’s and children’s shelter; clients with no transportation means are referred to Family Promise. Among other services, this agency assists clients in obtaining donated cars. Between 2002 and 2006 twenty-three Work First clients obtained vehicles through the Wheels to Work Program. Other agencies, such as the Sandhills Coalition for Human Care, the Cooperative Extension and the Health Department, cooperate with Work First to “strengthen families, emphasize prevention and early intervention” in the lives of the families needing assistance. Undocumented immigrants are not eligible, but their children born in the United States may receive benefits.

How successful is the program? Work First started with 850 clients in 1995-96. There were 160 clients in the program in 2008 rising to 233 in June 2009. Many have located jobs in the health care field, local industries, retail outlets, etc. After a client leaves the Work First program, he/she may still receive Medicaid, child daycare, food stamps and child support services. Work First has been effective in getting individuals off the welfare rolls, but it

has increased the cost of Medicaid. Actually the program costs more to operate. Funding is primarily from the county with some federal funds depending on the particular program.

**Does Work First assist families to become more self-sufficient?** This is difficult to measure. However, Moore County's Work First Program surpassed all state goals. The state's goal for staying off welfare after going to work was 90%. Moore County's outcome was 93%.

**Child abuse is a repugnant reality of our society.** DSS' Work First and Child Protection Service units monitor all children who are involved in these programs. The main goal is the safety of the child. The Work First staff will "offer any appropriate services available to ensure the safety and well being of the child and the family."<sup>2</sup> Child abuse or neglect appears in many forms. At one end of the spectrum are beatings or sexual assault. Other less dramatic manifestations, but just as serious, are inadequate food and shelter, lack of medical treatment, filthy homes with children playing in animal feces and young children left alone for long periods of time. Do these symptoms relate specifically to families in poverty? Not necessarily, but poverty impacts a family negatively. According to Social Worker Supervisor, Ann Thomas: "Poverty is not abuse or neglect. If the community would step in and help when poverty is the issue, there wouldn't be so many problems."<sup>3</sup>

**How rampant are child abuse cases in Moore County?** There were 866 child abuse and neglect reports that were investigated in 2007. Of those 170 were substantiated. More disturbing are the statistics for the percentage of children in Moore County who were maltreated within six months after the first abuse report: 13.9% in 2007. What happens to these children? Unfortunately, in many cases the child must be removed from the family by DSS and placed in foster care.

One hundred fourteen children were placed in foster care in Moore County in 2005. This compares with 65 placements in 2008 — an increase of 11%. Many of these children, 54.6% in 2008, were returned to their parents or guardians, and only 3% reentered foster care within twelve months after being reunited.<sup>5</sup> 14.3% of these children exited foster care to adoption.

Family abuse is often a criminal activity requiring a mother and children to leave their home and seek shelter. Friend to Friend, a non-profit organization, offers help to all persons affected by domestic violence and sexual abuse. Directed by Jackie Hamm, the agency provides a 24 hour crisis line, necessary shelter in Haven House, a home concealed in an isolated area, and counseling sessions for victims of violence. Ms. Hamm also works with DSS to educate students in Moore County schools about how to deal with anger and abusive relationships through the Child Assault Prevention Program.

All domestic violence victims are homeless. Usually one partner is escaping violence by leaving the home or is thrown out by the other spouse. Frequently, Protective Orders are required for various reasons including stalking as well as abuse. Some of the examples are horrendous: A man killed his wife with a baseball bat while his children watched; a man threw his children out of the door and then burned the house down. During the 2007-08

fiscal year, there were 341 new domestic violence cases in Moore County and 42 sexual assaults. Two thousand callers were serviced on the Crisis Line. In addition, Friend to Friend prepared 150 restraining orders. Ethnically, the abuse victims were Caucasian, 113, African Americans, 103, Hispanic, 21, Native Americans, 7, and Asian, 2. Not all victims are female. Seventy nine men required Protective Orders for their safety.

Poverty does not define domestic abuse, but the stress of trying to manage a household with little funds often produces outbursts of anger and violence. In these cases, children are the real victims.

Friend to Friend's yearly budget is \$320,000. One half comes from the state and one half is contributed by local government and from donations. The Food Budget is high as 7000 meals were served 2007. Much help is received from the Food Bank, but as basic commodities have risen dramatically in price over the past few years, Friend to Friend needs more funding.

**Subsidized day care is essential for children of Work First participants, income eligible families or in foster care.** DSS determines eligibility according to the limits published by the North Carolina Department of Health and Human Services. Children must be citizens or legal residents. Although the client selects the day care facility, DSS investigates and gives its approval before the selection is validated. Unfortunately, there are not enough child care openings to serve all children who qualify.

**What if the working poor parent does not qualify for subsidized child care?** Child Care Connections, a private, non-profit child care resource and referral agency has provided services since 1989 to "promote quality, affordable child care to support parents, providers and the community." This gives parents the option to seek approved child care facilities that are appropriate for their budget.

Where does a family go for emergency needs? Perhaps their utilities bills have not been paid, the rent is long overdue and there are very few funds for adequate food and clothing. How does a child feel going to school in soiled and ragged clothing, and more important, hungry? Sandhills/Moore Coalition for Human Care fills a need for these desperate parents and children. Volunteers screen and verify the client's requirements. If needed, a volunteer will negotiate payment plans with the client's immediate creditors, dispense food vouchers and aid the family in selecting needed clothing. A total of 5012 clients were served in 2007, supported by over 70 religious institutions in the area. With a little caring help, counseling, the dispensing of basic food, clothing and sometimes cash assistance, a family, and especially children, are given a boost to repair their financial situation. **The Coalition's goal: Feed the spirit as well as feed the body.**

The homeless are even more desperate. At the end of 2009 the Moore County Schools reported 85 homeless students from 49 families. Most of the homeless are single mothers with children who have had to leave their present homes, sometimes because of lack of funds to pay rent or domestic conflict with relatives. 80% percent are African-Americans with an average age of 22. Family Promise of Moore County, formerly the Sandhills Inter-

faith Hospitality Network, partners with thirteen area religious institutions that provide one week of nightly shelter. Family Promise counsels the parent during the day, helps with employment opportunities and affordable housing, and takes the children to school. As mentioned above, Family Promise assists the family with transportation needs by sponsoring the Wheels to Work program.

This much-needed faith based organization is directed by Susan Bellew. When asked, typically, what puts a mother and child into a homeless situation, she replied: a **“poverty of spirit.”** This became one of the themes of our report. This may very well be the key to generational and situational poverty: the inability to gather one’s inner strength towards solving problems.

Temporary housing fills the immediate needs of families, but they are challenged to find a permanent, or satisfactory, home. The Sandhills Community Action Agency, directed by Nezzie Smith, provides much needed assistance to low income persons. The Agencies are the outgrowth of the Economic Opportunity Act enacted by Congress in 1964 with the goal to “assist the low-income to overcome obstacles on the road to self sufficiency.” One of the greatest obstacles is housing.

This nonprofit, nonpartisan organization advocates on behalf of low-income and elderly citizens. It is one of 36 throughout the state that provides direct human services leading families to self-sufficiency and independence of public programs. The Community Action Agency’s mission aims at assisting clients to obtain equal access to opportunities leading to economic sufficiency. With this purpose as a goal, the Program administers the Federal Housing and Urban Development’s Section 8 Housing program, transitional housing, weatherization for homes, transitional housing for homeless mothers and their children as well as an emergency shelter in Aberdeen.

During 2006, 112 families with children (261 minors) were assisted with rent subsidies. There are more applicants than open places or vouchers. The three counties (Moore, Richmond, Montgomery) served by the Agency are allowed 567 vouchers per year. Since there are many more applicants who need or want rental assistance than there are places available, there is a waiting list.

Applicants must be citizens or permanent residents, provide evidence of no felony charges for the past five years and must be employed either part time for 20 hours per week or full time for 30 hours. Eligibility is determined by an income formula. Each child represents a \$480 deduction; a handicapped adult, \$400. The gross income is determined by the median family income which is set by HUD for the county. In Moore County this is \$56,300. From this amount, deductions are made based on 30% of median, very low income or low income. The final income figure determines the subsidy amount, and the applicant searches for his/her own rental. Mostly, the recipients find suitable housing and settle in Aberdeen, Southern Pines or Pine Bluff where there are low income housing units and transportation is easier than in the rural areas. Four families in the program were located in Robbins, ten are in Carthage, three in Pinehurst, a few in Vass and Cameron. None of

the families was Hispanic.

Public housing is also available under a different Section 8 Program. This is administered by the Southern Pines Housing Authority.

Are there problems with Section 8 housing? Although the landlord may inspect the property with a written notice, some residents do not maintain the premises, and some have bad credit. The Community Action Program has only one inspector and visits all the properties once a year, but this is not sufficient for targeting problems.

A major difficulty is helping people find employment. Transportation is lacking in many cases. Community Action aims at helping a family become self-sufficient within five years. This may be accomplished through the Program's policy of setting aside a percentage of the subsidy in an escrow account that can grow and be presented to the resident at some future point.

An example of Community Action's success is the story of Lisa, a young woman in her 20's with four children, one of whom was mentally ill. She was escaping an abusive situation and was a drug user. With the encouragement of the Community Action Agency and acceptance into the Section 8 Program, she managed to "get clean," obtain a General Educational Development (GED) certificate, attend UNC-Pembroke and be awarded a degree. She now works in a program for drug abusers. After five years of productive employment, Lisa managed to qualify for a Habitat for Humanity home. Her Community Action escrow amount totaled \$26,000, and this enabled her to buy her home. Five other Program "graduates" have Habitat homes.

Working parents who aim for self-sufficiency may be candidates for an affordable Habitat for Humanity house. Families who qualify must be ambitious. They are required to attend 12 home ownership classes, get counseling on finances and work with the neighborhood homeowners' associations. Most importantly, they must participate in the building of the home with 300 hours of "sweat equity." Sixteen families were Habitat partners in 2008. Undoubtedly, home ownership builds self-sufficiency and sets an example for low income children to improve the quality of their lives.

**Ultimately, income maintenance is the lifeline of a family. What is the minimum income for a family to subsist in Moore County?** The North Carolina Justice Center produced an analysis that documented the income requirements. Our typical four person family — two adults, two children — requires an annual income of \$40,965 to meet a basic budget in Moore County. This necessitates a total hourly wage of \$19.69.<sup>6</sup> Since there are few jobs that pay this, the adults in the family must hold three or more jobs at minimum wages (\$7.25 in North Carolina). And, if they cannot, they must turn to Social Services for help.

DSS investigates, verifies information and qualifies applicants. The federal Temporary Assistance for Needy Families (TANF) Block Grant provides employment assistance and cash support on a temporary basis until the family can become independent. As much as this

service is needed, the Deficit Reduction Act of 2006 reduced federal funding. Budgeted funds decreased 8% from 2000 to 2007.

**Has welfare been reformed?** If it had been, there would be no poor people. However, we are fortunate in Moore County that our social services administrators are competent, experienced and compassionate individuals who place the needs of their clients foremost. Many of the agencies are understaffed due to limited funding. Especially, DSS needs more social workers and a social work supervisor so that case loads can be reduced. A worker may have as many as 725 Medicaid children's cases to supervise.

Although Work First has been successful in reducing welfare, we have more people on Medicaid as a result. We have more working poor who earn too much to access some of the programs and too little to live adequately. Basic costs of food, gasoline and heating fuel have risen dramatically since 2006. All these factors impact our poor children.

As some service providers remarked, more and younger children are involved with substance abuse. This, combined with increasing domestic conflict in the home, higher prices for basic needs and tightening social services budgets, militates against the emotional, social and educational growth of the poor child.

With limited funding our dedicated social administrators struggle to meet clients' needs, especially children's, but they are committed to their goal of attaining self-sufficiency for their clients. Difficult as this is in our present economy, they are succeeding in many cases. They need our support.

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# **EDUCATION: KEY TO SURVIVAL**



## EDUCATION: KEY TO SURVIVAL

**Poverty in Moore County is an increasing problem. What are the effects on our educational system? Almost without exception every professional interviewed for this study said that “education was the key” to helping children escape eventually from the impact of poverty.**

There are many ways that children can become educated. We tend to think of education as the process of going to school and learning a certain prescribed curriculum in a structured system. We expect that young people graduating from this school system will be prepared to be useful and productive citizens in our communities. For many of us this has been our experience.

The education of a child begins from the moment the child enters the world. In our many interviews, we heard how institutional poverty has a culture with different standards that are acceptable within that culture. This culture is passed down from generation to generation. Hopelessness is ingrained from early childhood.

An example of this culture of poverty, and the wrong kind of education, is the father who took his children to WalMart and taught them to steal. First they grabbed small items, then they graduated to larger ones. This becomes an accepted way of life for some of the children of poverty: committing a crime is not shameful, but getting caught is.

These young people may become targets for drug sellers. More seriously, they may be recruited by gang members who provide an elusive promise of a “family.” This is not the kind of education that benefits our children or our society.

Yes, education is the key to helping children break the cycles of poverty, but education of the right sort, and the earlier the better.

Head Start and Early Head Start provide the right sort of education for children from families who fall below the federal poverty guidelines. Project Head Start was initiated by President Lyndon B. Johnson in 1965 with the intent of helping low-income children to be better prepared for school. Its broader goal aimed at “meeting the emotional, social, health, nutritional and psychological needs of three and four year olds and their families.” Eventually legislators recognized that these goals could not be met unless children from birth to three years and pregnant mothers also could be assisted. Consequently, Congress enacted the 1994 Head Start Reauthorization Act that expanded the age spectrum to include low income children from birth to four years.

Moore County maintains five Head Start facilities: Carthage, Taylortown, Aberdeen, Vass and Southern Pines. The quality of each facility is rated by the State’s Division of Child Development by a system of stars — one to five. Southern Pines rates five stars. Typically, children arrive each day at 8:30 and leave at 2:30. They receive both breakfasts and lunches, are required to brush their teeth after each meal and to wash their hands frequently. The facility maintains an open door to parents, provides workshops, and has a new “Fatherhood program,” a “buddy” program with breakfasts for the four to five year

old children. There is a monthly parent meeting. Home visits are accomplished once a year by a family manager and twice a year by a teacher. These are not spontaneous visits but are planned in advance. This ensures a monitoring of the program's success with the child and the family.

A pilot program has been sponsored by one of the Moore County Kiwanis Clubs for Head Start children in Aberdeen. There are indications that if children listen to music, sing and attempt to play an instrument at an early age, they will have a better comprehension of reading and mathematics. This interesting concept is being monitored by Dr. David Brunton, a well-known pediatrician and community leader in Moore County.

Early Head Start is conducted at the Aberdeen facility serving 16 students. Four are infants, 4 are pre-toddlers and 8 are toddlers. There is a wait list. In addition there is a pre-natal program for pregnant women and a GED program. All the Head Start and Early Head Start spaces were filled in 2006 with a waiting list of 200 children.

There is a need for a Head Start Program in Robbins because of the growing Hispanic community, many of whom are below the poverty guideline. Presently, Head Start has 15% Hispanic children county wide. Since Head Start is a federally funded program, undocumented children may not be served. This reveals a wide gap in the pre-school education of many Moore County residents.

Head Start teachers are not highly paid. Salaries range from \$8.50 an hour to \$10.50 an hour with various credentials required. Sandhills Community College offers an Early Childhood Degree which satisfies many of the requirements. Some parents are inspired to begin a teaching career. The Head Start staff encourages them.

Sadly, Head Start programs throughout the United States are in jeopardy due to the decline of funding since 2002. Head Start programs experienced an 11% decline in inflation-adjusted funding between 2002 and 2008 that has impacted the services they provide. In addition, the federal government imposed new regulations in the Improving Head Start for School Readiness Act of 2007. Unfunded mandates requiring Head Start teachers to have a baccalaureate degree by September 30, 2013, threaten to devastate the programs. Many high quality, experienced teachers do not have the financial means to pursue further education.

**What is the impact for North Carolina?** According to the National Head Start Association, "Programs have reduced staff, staff training, family service staff, transportation, supplies, field trips, parent involvement initiatives, teaching materials and consultant services; have increased caseloads of remaining family service staff; and have eliminated extended day services. The rising costs of benefits have forced programs to cut health benefits and freeze salaries."<sup>1</sup> An important key to survival for children is being compromised. The value of the Head Start program was expressed by one of the administrators: "**Public schools say that they can tell immediately if a child has taken part in the Head Start Program.**" We need to educate our legislators.

Another pre-school concept, Smart Start, was created in North Carolina. Dr. David Bruton, former head of the state's Department of Health and Human Services, initiated Smart Start along with Governor Jim Hunt in 1993. The Program's mission: "To ensure that every child in our state will arrive at school healthy and prepared for success." Children are provided medical assistance from birth to four years. As Dr. Bruton pointed out, this is the most important age for later development. A child's head size is 75% of adult size at birth but reaches full size at four years. Not just children from poor families, but all children of working parents who need quality child care are eligible for this program. Especially, this is important for the "working poor."

Partners for Children and Families administers Smart Start in Moore County. The agency allocates funding among many programs in the county that deal with children from birth to five years of age. Primarily, funds are provided for licensed child care including support for a parent who wishes to attend college and support for child care centers and staff. A Board of Directors, with input from the Director, Terry Reynolds, determines the needs in the county and decides where the funds from the state, currently \$1,500,000, will be placed. The Board is composed of twenty members from many of the services in Moore County, such as DSS, Cooperative Extension, Head Start, Sandhills Coalition, Moore County Schools, and the Health Department. The various agencies cooperate well with one another.

**Could Smart Start help break the cycle of poverty?** One important project focuses on encouraging parents to read to their young children. MotheRead and FatheRead demonstrate to parents the value of reading to their children and preparing them for future classroom attendance. Significantly, the reading program gets the attention of parents, establishes the value of learning and their role in guiding their children. Most importantly, it fosters a "**spirit of hopefulness.**"

**Is it the parents' responsibility to prepare their children for kindergarten readiness?** Not entirely. A new concept — the Ready Schools Task Force — states that it is the responsibility of the classroom and the teacher to be ready for the child. Funded by a grant from the W. K. Kellogg Foundation, the North Carolina State Board of Education has established guidelines and organized regional task forces to develop this program. Several representatives of the Partners for Children and Families attended one of these meetings that was held in Fayetteville early in 2008.

The premise of Ready Schools Task Force targets the changing technological world of the 21<sup>st</sup> century. Children use television and the internet as primary means of communication, spend more time inside than outside, spend more time in child care than with their families, are exposed to more dangers and threats than previous generations, but many instructors and curricula relate to past methods of teaching. The Ready School Kindergarten must be "an appropriate place for young children to learn through engaging and interactive experiences guided by trusted and nurturing adults. These adults also must provide challenging, yet achievable learning experiences for each individual child."<sup>2</sup> This

is a formidable task, but an exciting prospect. Initially, a Moore County task force was planned, but funding has yet to be authorized. We shall monitor their progress.

Individual school readiness and accomplishment vary throughout the county. Many children, especially those without language proficiency and those from low-income families, need extra-curricula attention. This is particularly evident in the northern rural part of Moore County. Immigrants, primarily from central Mexico and Guatemala, make up a significant and growing segment of the population. Their children have grown up in Spanish speaking households, some of the parents have literacy deficiencies, and some of the parents have lost the jobs that sustained them when the Purdue Chicken Processing Plant moved out of the area. Many of these are proud, industrious, family oriented immigrants who are trying to assimilate into society but lack the skills. Northern Moore Family Resource Center is an organization that concentrates on meeting the needs of these families as well as the Caucasian and African American families.

The Center is a nonprofit organization founded in 1994 “to encourage the development of strong families, healthy children, and caring communities by matching resources with needs in the Northern Moore County area.” Claire Ruggles, Director, manages an After School Program that teaches young children basic skills and the operation of computers. Older children are encouraged to mentor the younger ones. At the same time the Center sponsors a Circle of Parents program that teaches parenting skills to mothers of pre-school children. Additionally, the Center takes students to the Westmoore Center of Sandhills Community College for classes. Individuals are enabled to complete General Educational Development (GED) courses for a high school certificate and also to become proficient in the English language. This is an important program with many successful results.

Summer Camp is the flagship of the Center’s activities. In the summer of 2009 there were 200 children enrolled in the camp that was held in Robbins First Baptist Church for six weeks. Eight high school and college students were counselors who worked with Camp Director Brian Purvis, a middle school teacher. Ruggles stated that the camp was very successful in teaching cooperation among the children and increasing their skills. Ethnically, the attendees were African American, Hispanic, and Caucasian. 80% to 90% of the children were from families below the poverty line. Each segment of society provides a glimpse of poverty in northern Moore County. Here are a few profiles:

A Caucasian family lived in a house across from the Robbins town park with all the windows boarded up. Three children, ages 9, 11 and 13 from three different fathers played outdoors most of the time as they were locked out of the house while the mother and her boyfriend went fishing. The mother had employment, but she suffered from alcohol and drug abuse. The two younger children attended the Resource Summer Camp, but the nine year old’s attendance was curtailed when a neighbor claimed that he had carried a rifle and pointed it at her five year old child.

An African American family of five children attended Summer Camp in 2006; three of them, ages six, seven and ten, participated in 2007. They were very smart, athletic chil-

dren, but the ten year old played “tough guy” and was a difficult camper. Parents were not evident, but a grandmother and an uncle brought the children to Camp.

A Hispanic family faced destitution. The parents were illegal immigrants. The father arrived here three or four years before the wife and one child. Another child was born here. The mother was learning English and participating in the Center’s Circle of Parents. The father worked on a poultry farm, but he decided to seek a better job to support his family and find better housing than the dilapidated trailer they called home. He applied for a job at Fort Bragg which incurred an investigation into his immigrant status. He was deported. Now the rest of the family is stranded with no support system.

**What is the future for these children?** Summer Camp and the After School Program fill a void for them and may be influential in the direction of their lives. Funding sources for the Resource Center depend on application for grants usually for one year at a time. During 2008 the Center is operated under a \$86,500 grant from the North Carolina Department of Public Instruction that terminated on December 31, 2008. This was a critical crossroads for a much needed service. Fortunately, in July 2009 the Moore County Commissioners awarded \$20,000 seed funding for three years to Northern Moore in order to encourage private investors and foundations to contribute. The Director emphasized the need to continue their services to the children of northern Moore County. A child as young as one year old needs to be instilled with “hope.” Life’s impressions between the ages of one and four may well determine the future of a child.

**Mentoring is another facet of education.** This is especially critical for troubled youth who are referred by the court system to the Moore Buddies program directed by Chrisy Connelly. This is a non-profit agency whose motto is: **Give a child a chance.** The children may come from dysfunctional or single parent homes where no viable adult role model is present. Moore Buddies matches each child with an adult volunteer who spends four hours each week for a period of one year teaching life skills, attending cultural events, encouraging hobbies and acting as a stable, caring parental model with values which the child can emulate. This organization’s mission is unique in that it addresses a problem that most agencies serving families are unable to solve.

The Program covers three areas.

1. The Governor’s One on One program was established in 1982 by Governor Jim Hunt. It provides technical assistance, training, monitoring and funding for local staff who recruit, screen and match adult volunteers. In the fall of 2007, Moore Buddies served 17 children, ages 7 through 17. Eleven were Caucasian, six were African American. Of the 17, 11 were girls and six boys. Most came from economically deprived and single parent homes in Southern Pines or Aberdeen. Unfortunately, no mentors could be obtained for the Robbins area even though there is a need. Nine children, four Caucasian, five African Americans (five girls; five boys) were on a waiting list. Additional mentors were needed, but it is difficult to recruit individuals for a year long commitment. Governor’s One on One was not funded by the General Assembly in 2009. However, Moore

County has provided funds from the Juvenile Crime Prevention Partnership Grant. The program will continue in 2010.

2. The Youth Development Program is open to all children six to 17 years old who have particular needs such as conflict resolution, anger management or lack of social skills. The Program Manager counsels intensely six or seven children during one period of 12 weeks.
3. Academic Tutoring is conducted by Nancy Manning, a professional teacher and tutor.

Since transportation is a major problem for these clients, a Biker Buddy's program was instituted. The Southern Pines police department donates unclaimed bicycles, Carthage volunteers rehabilitate them and they are given to deserving children. Many times this is the only transportation available to poor teenagers.

**How successful is the Moore Buddies program?** A few examples demonstrate the scope of assistance:

Director Connelly visited a 16 year old boy's home who stated he had to sleep on the floor. When entering, she noted that the floor was concrete. The father was in prison and the mother was seriously ill, taking dialysis treatments several times a week. With Buddies' help, the boy is now in a mobile home, has a job, but needs to contribute much of his earnings to maintain his mother's household.

A Caucasian family of six lived in a single wide mobile home in the country. Previous to the Buddies' visit, the home had been raided as authorities suspected it was a meth lab. It was not, but the supposedly meth odor was caused by many cats urinating on the family's clothes. There were no shelves or chest of drawers, so clothes were scattered around. With Buddy's help, the mother of four children got a job at a local fast food franchise. The overweight 16 year old girl received a scholarship from a fitness club in Southern Pines for an exercise program. Another child, 10 years old, developed an interest in gardening and planted beans around the mobile home. Buddies' help restored hope for this family.

Not all cases are successes. One Hispanic child, 14 years old, was a runaway. His mother spoke no English. Eventually, he was referred to a Boy's Home where he is now.

Moore Buddies demonstrates the importance of dedicated volunteers who can help turn around a child heading for trouble or perpetuating a life of poverty. According to Director Connelly, **"Education and mentoring are the keys to breaking the cycle of poverty."**

Moore County Schools have the responsibility for educating all of our youth with the mission "to provide a safe learning environment where academics and integrity are expected from all. We challenge all students to reach their full learning potential and inspire them to become productive members of our society." This is an ambitious, but necessary, goal. Children come from diverse backgrounds, ethnically, financially, socially and intellectually. It is up to the teachers to meet all the needs of children entering kindergarten. Some children will be prepared, but what of the many hundreds of children that remain on the waiting lists of Head Start, Smart Start and subsidized day care? Or the children from families who did not seek pre-school enrollment because they were not aware of available

programs or did not see the value of them? The Schools recognize this deficiency and have established programs to meet these children's needs.

Diagnostic tests are given to all children when they register for school. Several remedial programs are in place to assist children with limited vocabulary, reading and social skills. Volunteers play an important role as tutors with such organizations as the Reading Council. The Schools also administer the state funded More at Four Pre-Kindergarten Program for unserved four year old pre-school children. However, there were only 52 slots available in 2009-10. In October 2009 150 children were on a waiting list. The hundreds of five-year-olds who enter kindergarten from limited backgrounds, low income families and without pre-school experiences may never catch up academically or socially. This may create behavior problems in the future and could develop a sense of hopelessness. In many cases, these children are potential school drop outs.

Drop out rates are difficult to define as a student may drop out for a time and then come back. Statistically, there were 181 Moore County dropouts for grades 9 through 12 in 2005-06. The cohort graduation rate for 2007 was 76%. **Why do these children drop out of school? Were they not motivated?** Was the school curriculum not directed towards their interests? Some of the professionals that we interviewed suggested that more vocational subjects, such as male barbering instruction, in the schools would help retain students.

Vocational training is now called Career Technical Education. This educational path focuses on preparing students for the workforce with readiness skills. Courses such as Agricultural Education, Health Occupation Education, Technology Education offer school-based, work-based, or community-based learning opportunities. Students are prepared to continue learning at the community college, the university or get a job.

For those students who drop out of the Moore County Schools, there is still an opportunity to earn a General Educational Development (GED) certificate, an equivalent to the high school diploma. Two hundred sixty five students achieved this benchmark in 2006-07 at the Sandhills Community College. Fifty four% were Caucasian, 29.8% African-American and 3.7% Hispanic. These are young people who had a second chance and took it.

Moore County is fortunate to have many excellent programs that target the educational needs of low-income children. There are many dedicated teachers, providers and volunteers who are helping to ameliorate the problems of poverty and are dedicated to instilling a sense of hopefulness in the children that they serve. Unfortunately, there are not enough spaces in all the pre-school and mentoring programs. Cost cutting by governmental agencies for these very beneficial programs threatens to curtail attendance, and many more children will be the victims of society's unconcern. These are the children who may "fall through the cracks" and continue into another generation of poverty.

**Meeting the educational needs of poor children from birth to five years of age is crucial. Indeed it is their "key to survival" and the key to society's future.**

**ENDNOTES**

1. National Head Start Association, *Special Report: Reduced Funding Cripples Head Start from Reaching its Potential*, 12, 2008.
2. North Carolina State Board of Education, *The Power of K, North Carolina Position Statement on Kindergartens of the 21<sup>st</sup> Century*, 1, 2007.

# CONCLUSION



## CONCLUSION

**Poverty has a significant impact on children in Moore County especially from prenatal to five years of age. Many of these children start life with a poverty of spirit.** Children who live in a depressed environment think that it is normal since they have no comparison. This may establish a pattern of complacency and a spirit of hopelessness. If children are malnourished, do not have adequate medical care, live in a household of low expectations and have no pre-school educational experience, they may never catch up, socially or educationally, with their peers. Studies have demonstrated that the “detrimental effects of poverty are literally built into the architecture of children’s developing brains.”<sup>1</sup> Falling behind in school, they may turn to indifference or truancy and may drop out of school. Some may commit misdemeanors or felonies. Ultimately, some may end up as inmates in our prisons.

The service providers that interrelate with low-income families in Moore County aim at establishing self-sufficiency. Overall, the providers are dedicated, competent persons, but they are thwarted by large case loads, staff shortages, insufficient affordable housing and lack of transportation for their clients. Federal reductions of funding for Medicaid and Food Stamps further impact poor families.<sup>2</sup> Poor children’s health in Moore County is good, it could be better, but reduced services impact overall medical assistance to the low-income and working poor families.

**Poverty impacts almost every aspect of the economy.** Despite the many Federal, state and local reductions in programs, the costs to the public are still high for assistance to low income families. The many programs included in the Department of Social Services Budget for FY 2007-2008 totaled \$3,723,078, not necessarily including all administrative amounts.<sup>3</sup> Smart Start’s North Carolina State funding amounted to \$1,500,000. Housing assistance, including Federal Section 8 allocations, amounted to \$3,083,288.<sup>4</sup> These are but a few, but some of the largest, amounts spent on addressing the needs of poverty in Moore County. Unfortunately, they are not enough. We need to work towards eliminating the causes of poverty, not just treating the symptoms. That will require more attention and more funds to bring poor children from birth to five years old out of poverty.

**Education, especially pre-school, is indeed the key to poor children’s survival.** Many programs exist but a number of children remain on waiting lists and enter kindergarten unprepared and in competition with children who have experienced pre-school education. The poor child may never catch up.

The family is the core of a child’s life. If parents are working several jobs, impressionable children may be left at home alone, shifting for themselves and vulnerable to influences of poor role models. Many of these children develop attitudes of despair. They may become the next generation of poverty. **In today’s economy, the poor are getting poorer.**

**We, the concerned residents of Moore County, can try to attack the causes of poverty by:**

1. Acting on the conviction that every life is of equal value.
2. Helping to change negative public attitudes towards the poor.
3. Volunteering to mentor children. This can make the difference between a troubled life and hope for a future.
4. Being vigilant and ensuring that minorities have the same opportunities as everyone else especially for juvenile justice.
5. Being aware of legislation that affects the plight of poor children and voicing our opinions to our elected representatives.
6. Promoting programs, including funding, that target the causes and situations of child poverty.
7. Involving families in seeking their own solutions for overcoming the problems of poverty.

**Lastly, we need to inspire.** As stated by Marc Morial, President of the National Urban League, on July 2, 2007:

“Figure out a way to **push parents** in our communities toward honoring, lifting up and encouraging our children. This approach requires the help of community groups, faith-based groups, political and government leadership, as well as that of the private sector and philanthropy.”

**If we come together with this goal, we may be successful in helping children in poverty to aspire to a better life and to turn a “poverty of spirit” into a “spirit of hopefulness.”**

**ENDNOTES**

1. Action for Children, *Child Poverty in North Carolina: A Preventable Epidemic*, April, 2008.
2. *The News & Observer*, April 23, 2008.
3. *Moore County Budget Ordinance, FY 2007-2008*.
4. Sandhills Community Action Program, Inc., *Financial Statements, year ended June 30, 2005*.

# **A STORY OF PROMISE**



## A STORY OF PROMISE

THIS IS A TRUE STORY; ONLY THE NAME HAS BEEN CHANGED

Claudette, an attractive 46-year-old African-American woman, represents both the failures of our social system and the success of an individual who persevered in the face of adversity.

Claudette's early years in many ways established a pattern of failure. Although her extended family originated in South Carolina, some of them moved to New York and that is where Claudette was born. Her mother bore seven children, but she "gave" four of them away and Claudette was one of them. Moving to Moore County, North Carolina, she was raised by another, unrelated, woman who in Claudette's words "was not very pleasant" to her. The other member of the household was a cousin more than twenty years older than she although she considered him a "brother." She still has occasional contact with him. However, it is Claudette's teen years that were very difficult.

Claudette was raped, not once, but twice. Earlier, she was raped in New York and then later in Moore County. These experiences had a profoundly traumatic effect on her behavior. Living in a poor household, she had few clothes or amenities and it became a source of embarrassment to her. She began to "hang out" with other disassociated teenagers looking for a substitute family, and as she expressed, "I had a wild year."

Mostly, Claudette wanted someone to love her and someone she could love. She thought, "perhaps if I have a baby, I will have someone to love and cherish. I will not be alone." At the age of seventeen, she became pregnant and gave birth to a son which forced her to drop out of high school. As a single mother, poor and with no skills, she joined the many women like her in the social services system.

Claudette was different. She aspired to a better life for herself and her son. After many years of working at low paying, sometimes two jobs, she managed to get by. She had no automobile, so she had to walk from the Berkeley community in Moore County to the former Winn Dixie in Southern Pines. She felt harassed when she shopped in Moore County's major department store. A supervisory employee was always watching her. Despite her diligence, or perhaps because of it, social services took away her health insurance. She was making too much money! Yet she persevered and managed to keep her family together.

When she was 33 years old, Claudette gave birth to a daughter, and then another two years later. Now eleven and thirteen years old, they are a joy in her life. Although their father relocated to Texas, contributing rarely and little to the children's support, Claudette managed alone. This was due to many factors, and the most significant one was her realization that education was a key to broadening opportunities.

Claudette completed her GED and then enrolled in Sandhills Community College. She graduated Magna cum laude with an Associate Degree in Medical Technology. After many years of wanting to improve her circumstances and, most of all, to fulfill her ambition to study and learn, Claudette had achieved a milestone in her life.

Besides obtaining better employment, Claudette was fortunate to be selected for a Habitat for Humanity house. She and her daughters now enjoy the attributes of a family that has succeeded over the limitations of poverty. There are still problems. Finances are tight with young girls to support, but Claudette is determined to provide a role model for them and continue working to improve her life.

What was the turning point in Claudette's life? She attributes it to determination as well as "finding the Lord" and being "saved." This has been a significant event in her life. Claudette feels a closeness to God, and for once in her life does not feel completely alone. She has no relatives to comfort her, help her or love her, but she has a faith which fulfills that need. Even with limited funds, she tithes the church, giving back to the faith what she has received. She is indeed a role model, for her daughters, and for us. Articulate, ambitious and self-confident, Claudette is our vision for success out of the depths of poverty. She changed "***poverty of spirit***" to a "***spirit of hopefulness.***"

# APPENDIX



## APPENDIX A

### SELECT INDIVIDUALS AND SERVICE PROVIDERS INTERVIEWED

**Dr. David Bruton**, Former Secretary, North Carolina Health and Human Services

“**Claudette**,” survivor of poverty

**Family Promise of Moore County** (formerly Sandhills Interfaith Network)

Susan Bellew, Executive Director

**First Health Dental Clinics**

Dr. Sharon Harrell, Director

**First Health Home Care Services**

Barbara Bennett, Director Home Service and Nurses Program

Phyllis Magneson, Head, School Nurses

**Friend to Friend**

Jackie Thamm, Director

**Head Start**

Clara Core, County Administrator

Joyce Ray, Family Manager

**Law Enforcement**

Lane Carter, Moore County Sheriff

Janet Currie, Former Juvenile Probation Officer

Gerald Galloway, Former Southern Pines Police Chief

Catherine Graham, Former Clerk of Court

Maureen Krueger, 19D District Attorney

John Letteney, Southern Pines Police Chief

Ebbie Monroe, Former member North Carolina State Board of Education

**Moore Buddies**

Chris Connelly, Director

**Moore County Department of Social Services**

John Benton, Director

Beth Duncan, Former Director

**Moore County Health Department**

Robert Wittman, Director

**Moore County Schools**

Beverlee Beale, Executive Director for Curriculum  
Linda Hubbard, Coordinator for Volunteers  
Tina Kissell, Administrator for Student Services

**National Association for the Advancement of Colored People (NAACP)**

O'Linda W. Gillis, President, Moore County Chapter

**North Carolina Cooperative Extension**

Suzanne Clendenin, Teens as Parents Program Coordinator  
Linda Gore, Agent, 4H Program  
Karen Wicker, Area Agent, Family and Consumer Sciences

**Northern Moore Family Resource Center**

Claire Ruggles, Director

**Partners for Children and Families (Smart Start)**

Terry Reynolds, Director

**Sandhills Community Action**

Nezzie Smith, Director  
Prudence McCollum  
Charlotte Brown

**Sandhills Community College**

Kimberly Blue, Secretary, (Statistical data)  
Martha Bergman (General Educational Development data)

## APPENDIX B

### A SELECT LIST OF RESOURCES

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