

What balance of social programs and economic development initiatives are necessary for
community wellbeing and resilience in the Appalachian region of North Carolina?: A
comparative case study

by

Caitlyn Murray

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Approved by:

Leah Hamilton, PhD, Assistant Professor, Appalachian State University, Thesis Director

Kathryn Holten, PhD, Vice President of Philanthropic Development, Brevard College,

Second Reader

Jefford Vahlbusch, PhD, Dean, The Honors College

Abstract

In working to address growing inequality in the United States, the current federal administration favors implementation of economic development initiatives and mitigation of social programs. There has been a significant focus in recent years on the relationship between social and economic investment and studies continue to demonstrate that the concepts are interrelated. Community wellbeing and resilience are becoming critical to measuring the outcomes of social and economic initiatives and redefining how progress is measured. Appalachia is a vulnerable region and is especially at risk of receiving cuts to federal aid for social programs and community development. Comparative case studies of two communities were conducted by collecting available data and reports related to measures of community wellbeing and resilience, social services, and economic development and interviews were executed in the communities with social service and economic development professionals.

The aim of this research was to begin to develop an understanding of the balance of social programs and economic development initiatives necessary for community wellbeing and resilience through the lens of Transylvania County and Buncombe County, located in the Appalachian region of North Carolina. Both areas are located in the mountains of western North Carolina, have eclectic cultures, and have very similar issues even given their size difference. The assessments of and interviews in each community illustrated similar themes including affordable housing, access to transportation, and adequate living wage. In terms of the proportions of social programs and economic development initiatives which best contribute to community wellbeing and resilience in the communities studied, balance is not

quantifiable. Collaboration of social programs and economic development are key to solving common issues in Appalachia and fostering community wellbeing and resilience.

What balance of social programs and economic development initiatives are necessary for community wellbeing and resilience in the Appalachian region of North Carolina?:

A comparative case study

1. Introduction

1.1 Background

Income inequality and globalization are significant issues facing Americans. Income inequality is on the rise in the United States and is defined by the unequal growth of average income for the lower-to-middle and upper socioeconomic classes. From 1979-2007, the highest income levels grew much more rapidly than lower and middle income levels. These trends have created a disparity between earnings of the rich and the poor and dismantled the middle class (Rezvani & Pirouz, 2013). However, other industrialized countries such as the United Kingdom and Canada are not experiencing the same discrepancy in income as the United States (Rezvani & Pirouz, 2013). Rezvani and Pirouz (2013) outline “institutional and market forces” as two factor groups which contribute to income inequality in the United States. Market forces refer to issues such as globalization and advances in technology; institutional forces refer to effects such as declining labor unions and an inadequate national minimum wage. Globalization is an especially significant factor given the elimination and redistribution of middle income jobs to developing countries because of reduced costs and increased profits (Rezvani & Pirouz, 2013).

The consequences of income inequality can include reduced opportunities, limited upward mobility, and lower quality of life (Rezvani & Pirouz, 2013). Jiang and Probst (2017) note that the social consequences of income inequality have been studied extensively and

include “damaging effects” in the fields of health, education, and other aspects of well-being. In their own study, Jiang and Probst found that effects such as job insecurity and burnout may not only be caused but exacerbated by income inequality (Jiang & Probst, 2017).

In working to address growing inequality in the United States, the current federal administration favors implementation of economic development initiatives and mitigation of social programs. The economy and jobs were a prominent issue during the 2016 United States presidential election, and problems related to globalization such as job loss and outsourcing were identified as significant by voters. Economic development was especially important to Republicans and Midwestern American voters, who largely voted to elect Republican Donald Trump, the current president of the United States (Blendon et al., 2017). In their May 2017 article, Blendon et al. projected that Trump was likely to pay attention to issues related to economic development during his term because of the significance to his constituents. In contrast, the probability of “adoption of generous social policies” decreases with federal Republican control (Brown & Best, 2017). Cutbacks to social programs have already been a focus of the current federal administration. In an article by Palmedo et al. (2017), the authors asserted that schools and public health programs, the pillars of wellness and education in the United States, will be most at-risk under the current U.S. administration. With policies to reduce food benefits and cut health programs already being implemented, they also advocated for responses to counter the possible negative effects on communities.

The Appalachian region of the United States may be especially at risk of receiving cuts to federal aid for social programs and economic development as evidenced by the proposed national budget for 2018 (U.S. Office of Management and Budget, 2017). Many of

these programs are provided by the Appalachian Regional Commission (ARC), which has funded job creation and community programs in Appalachia since 1965. The ARC may be eliminated under the current budget proposal (U.S. Office of Management and Budget, 2017).

The Appalachian mountains are a 200,000 square-mile expanse from the base of New York to the tip of Mississippi and include 13 states (Cooke-Jackson & Hansen, 2008). Residents of Appalachia are often the generationally poor who live in communities riddled with social problems and extremely limited resources. As the income gap in the United States continues to widen, those in the Appalachian mountains are particularly vulnerable to previously described effects of income inequality such as lower quality of life. Residents of the Appalachian region have historically been stereotyped as “ignorant, lazy, uneducated, and incestuous” (Cooke-Jackson & Hansen, 2008) and portrayed negatively in the media. By allowing representations of them as “rednecks” and “hillbillies”, their marginalization continues to be disregarded (Cooke-Jackson & Hansen, 2008) and may be used as political justification for cuts to social services and education (Batteau, 1979).

1.2 Social and Economic Investment

There has been a significant focus in recent years on the relationship between social program spending and investment in economic development incentives such as tax credits for businesses (Ahn & Kim, 2015). Studies continue to demonstrate that the concepts are interrelated: investment in social well-being has potential effects on economic growth and vice versa. Still, findings have been mixed: in terms of social spending, some studies have found that investment produces positive economic growth, while others provide evidence that

social investment results in economic problems such as increased unemployment. Ahn and Kim (2015) reflected these mixed findings in their own study. They aimed to provide evidence on the economic performance of traditional social spending compared to investment focused on social services. A larger welfare state reflective of traditional social spending, such as cash assistance and direct provision of services, resulted in increased unemployment. However, investment with a larger focus on social services such as education and job training had positive economic growth outcomes (Ahn & Kim, 2015).

Conversely, studies have indicated that investment in economic development incentives can have a positive impact on wellbeing and therefore reduce the need for social programs and services. “The link between economic development and population health is well established” and the prevalence of small businesses has been shown to lead to outcomes such as increased median household income and reduced poverty and income inequality (Blanchard et al., 2012). Physical health has also been defined as an indicator of community wellbeing (Kim et al., 2015). Blanchard et al. (2012) aimed to discover if a culture of entrepreneurship produced by small business concentration impacts the health of the population in a community. Their findings corresponded with previous studies indicating that cultivation of entrepreneurship has increased wellbeing outcomes for communities (Blanchard et al., 2012).

1.3 Community Wellbeing and Resilience

Community Wellbeing

The parameters of ‘community’ have long been contested. While there is a plethora of literature on community, community wellbeing, and community resilience, there is no

absolute conclusion (Sharifi, 2016). In an article in *Rural Society*, McCrea et al. (2014) identify the link between community wellbeing and resilience. They describe community wellbeing as a state enhanced by community resilience, especially in response to rapid change experienced by communities. According to Cox et al. (2010), community wellbeing “encompasses the broad range of economic, social, environmental, cultural, and governance goals and priorities identified as of greatest importance by a particular community, population group, or society”. It has also been defined as a state of ideal quality of life among individuals and communities (Miles et al., 2008). Community wellbeing is becoming critical in redefining how progress is measured (Cox et al., 2010), and yet it is inherently subjective (Miles et al., 2008) given that factors most significant to wellbeing are arbitrary unless put into the context of a community with unique issues and values (Cox et al., 2010). Additionally, varying parameters of community wellbeing are the result of a variety of roles held by experts creating community wellbeing systems. Still, governments are becoming increasingly interested in both wellbeing and communities, and they must be able to assess before they work to “enhance” community wellbeing (Kim et al., 2015).

A study by Kim et al. (2015) aimed to address this subjectivity by analyzing 51 community wellbeing systems, including frameworks, scales, and indexes, to find the most frequently-used measurements and determine the relative importance of community wellbeing indicators. First, a broad definition of community wellbeing measurement systems was determined to include any system that measures a “collective level of comprehensive wellbeing or quality of life”. The systems were chosen from literature found in three databases; approximately half of the systems aggregated indicators and the other half

reported the results of all indicators in the system. Most systems were created by experts and public officials, while only nine systems involved input from citizens, likely due to the complexity of gathering objective data from participants and analyzing it to create a comprehensive assessment framework.

Kim et al. (2015) began by identifying the major domains and factors of community wellbeing based on the 51 identified community wellbeing systems (see Table 1). Although not comprehensive, it was necessary to provide a list of community wellbeing factors in order to determine the relevant importance of each factor.

Table 1: Factors of wellbeing presented in the survey

Factors	Domain
Household income, employment, lifelong education, leisure, physical health	Socioeconomic
Green spaces, transportation network, air quality, energy supply	Environmental
Local community participation, social services, local public administration, public safety	Political

Experts, public officials, and citizens were surveyed separately for their perspective on the most important community wellbeing factors under the three domains. Answers were assigned weight to test how each group ranked each factor and determine the relative importance of each factor. Researchers noted that respondents seemed to rank factors relevant to their own personal lives as highest priority. The study found the indicators cited as most critical to wellbeing from the list of factors based on the 51 community wellbeing systems studied were physical health, household income, and employment (Kim et al., 2015).

Community Resilience

Similar to community wellbeing, the criticality of community resilience is becoming increasingly recognized by governments, and yet definition and measurement is challenging due to its abstract and multidimensional nature (Steiner & Markantoni, 2014). Resilience is defined as the capacity of a community to adapt to change (Steiner & Markantoni, 2014) and their ability to “absorb” adversity and continue to function. Communities are always surrounded by change in their economic and social surroundings (Steiner & Markantoni, 2014). In cases of natural disaster such as wildfire, resilience is critical when the effects are often environmental, social, and economic (Kulig & Botey, 2016). Not surprisingly, Steiner and Markantoni (2014) describe environmental, social, and economic capital as essential for community resilience. Still, a more structured model of community resilience is needed to measure resilience objectively and to discover what makes some communities more resilient than others (Steiner & Markantoni, 2014). Measurement of community resilience has been recognized as necessary to reduce negative effects of disaster and other challenges (Sharifi, 2016).

Although a number of community resilience assessment systems have been developed, many tools are inadequate in providing comprehensive evaluation. In a 2015 report, the National Research Council (Brose, 2015) called for the development of numerical assessments in order to objectively measure and form policy which supports community resilience. In reviewing existing assessment tools, the National Research Council “identified four critical dimensions” of a comprehensive approach to measuring resilience, including

vulnerable populations, critical and environmental infrastructure, social factors such as education and social capital, and built infrastructure (Brose, 2015).

Given the importance of community wellbeing and resilience, the interconnected nature of social and economic investment, and the current political climate regarding economic development and social programs, the aim of this research was to begin to develop an understanding of the best combination of economic development initiatives and social programs for community wellness and resilience through the lens of Transylvania County and Buncombe County, located in the Appalachian region of North Carolina.

1.4 Transylvania and Buncombe County

Transylvania and Buncombe County were chosen for a comparative study because they are representative of Appalachia in many of their regional issues, strengths, and qualities. Transylvania County and Buncombe County are both located in the mountains of western North Carolina. Transylvania County is located approximately halfway between Asheville, North Carolina and Greenville, South Carolina and Brevard is the county seat. Residents in the county have access to Pisgah National Forest, Dupont State Forest, and Gorges State Park as well as over 250 waterfalls located in the county. Buncombe County's county seat is Asheville and is known for its vibrant arts scene and historic architecture. Transylvania and Buncombe County rely heavily on tourism and outdoor programs because of their location in the Appalachian mountains and each have a dynamic downtown culture. Each county also has issues representative of Appalachia, including poverty, shortage of job opportunities (Hall, 2014), low wages for skilled workers (Bollinger, 2011), and lack of adequate housing and transportation (Allen & Roberto, 2014).

While there are a number of commonalities in the counties, they also provide a contrast to one another. Geographically, Buncombe County (660 square miles) is nearly twice as large as Transylvania County (381 square miles). The population in Buncombe County, identified as 247,336 in 2015, was almost eight times the 32,928 people residing in Transylvania County in 2015. Additionally, the urban and rural dynamics of the counties differ. The majority of residents in Transylvania County, approximately 60%, live in rural areas while 76% of Buncombe County residents live in urban areas. Buncombe County seems to be attracting younger people: the median age of residents was 41 with ages 0-19 and 65+ composing the largest portions of the population. Transylvania County had a median age of 50 with ages 0-19 and 65+ composing almost half of the total population according to the 2010 census (AccessNC, 2017).

2. Methodology

Two case studies were conducted on the influence of social programs and economic development initiatives on community wellbeing and resilience in two communities, Transylvania County and Buncombe County, located in the Appalachian region of North Carolina. Available data and county reports related to proxy measures of community wellbeing and resilience, social services, and economic development were collected for Transylvania and Buncombe County. Utilizing a purposive sampling method (Rubin & Babbie, 2008), four interviews were executed in the communities with one professional responsible for economic development and one professional in the field of social programs in each county, although the social programs interview in Transylvania County and the economic development interview in Buncombe County included two professionals. The

professionals in the field of economic development were located in the county seats, Brevard and Asheville, and professionals in the field of social programs were employed with the county's Department of Social Services. These interviews were conducted with the intention of receiving their first-hand perspective of the balance of social programs and economic development initiatives related to overall community wellbeing and resilience.

A standard open-ended interview approach was employed to “ensure that all interviews were conducted in a consistent, thorough manner - with a minimum of interviewer effect and biases” and questions were written prior to the interview exactly as they were asked to the professionals. The questions focused on uncovering strengths and weaknesses, influence of social programs and economic development initiatives, and balance of social programs and economic development initiatives on community wellbeing and resilience from the perspective of the professionals. See the Appendix for the full interview guide.

Prior to conducting interviews, this research project was reviewed by the Institutional Review Board (IRB) at Appalachian State University and it was determined on August 30, 2017 that the project (#18-0027) did not require approval by the IRB because of its designation as NHSR (Not Human Subjects Research). Interviews were conducted from September 9, 2017 to October 12, 2017. Prior to conducting each interview, the professionals were given a consent form to obtain permission to record interviews with the understanding that names would be anonymized and that direct quotations from recordings and/or transcripts would not be published except with explicit permission from the professional. Each interview was recorded using a tape recorder for accuracy, then transcribed. Summaries

of each interview written in the results section are a reflection of the professional's perceptions in their work with social programs and economic development initiatives.

Analysis

Community wellbeing and resilience, social programs, and economic development were assessed using available data and reports and information was compared between counties. An analysis of the interviews was performed using focused coding (Charmaz, 2006, p. 57) based in finding emerging themes from the interviews. Focused coding allowed for the synthesis and explanation of larger segments of data and the analysis of common perceptions between professionals within the same field from different countries and professionals from the same counties, in addition to finding themes consistent among all professionals that were interviewed. Comparisons between counties were made based on the common perceptions identified through coding. Additionally, comparisons were made between secondary quantitative and qualitative data: proxy measures were compared to emergent themes from the interviews to determine if the collected data illustrates some of the same assertions made in the interviews. Finally, conclusions and potential implications were explored based on analysis.

3. Measurements

Community Wellbeing

Based on the study of 51 community wellbeing measurement systems by Kim et al. (2015), physical health, household income, and employment were used as proxy measures for community wellbeing. Statistics for household income and employment in each county were obtained from demographic profiles published by AccessNC which provide community

demographics for counties in North Carolina. Information on physical health in each county came from the most recent Community Health Assessment (CHA) and Executive Summary for Transylvania County and Buncombe County which were summarized based based on significant findings.

Community Resilience

The National Research Council (Brose, 2015) determined four dimensions critical to a comprehensive assessment of community resilience and recognized measurements of those dimensions. Measurements of each dimension listed in the article by Brose & the National Research Council (2015) were used as proxy measures of community resilience in the counties. Each component used as a proxy measure was chosen based on relevancy to the Appalachian region and the correlating focuses of the research including community wellbeing, social programs, and economic development. The final dimension critical to community resilience in the report by Brose and the National Research Council (2015) is built infrastructure; as this refers to the ability for communities to withstand the impacts of disasters such as community structures meeting building codes and findings would not be entirely relevant to the balance of social programs and economic development, this component was not assessed. For the dimension of vulnerable populations, health issues were measured using the Community Health Assessments from each county because physical health was also used as a proxy measure for community wellbeing. Availability of transportation was examined as a measurement of the critical and environmental infrastructure dimension because lack of adequate transportation is a widespread issue in Appalachia (Allen & Roberto, 2014). Each county's most recently available Community

Transportation Service Plan (CTSP) and Executive Summary were summarized for significant findings and objectives relevant to access to transportation. Education level, specifically educational attainment of residents, was considered for the social factor dimension in each county because of the traditionally low education levels in Appalachia (Hall, 2014). As stated previously, a number of the proxy measures for community resilience overlap with community wellbeing factors including physical health, income, and employment and serve to additionally demonstrate the interconnectedness of community wellbeing and resilience.

Social Programs

Statistics from The Transylvania County Department of Social Services Annual Report (Transylvania County Social Services, 2014) and the Buncombe County Health and Human Services Annual Report (Buncombe County Health and Human Services, 2017) were examined to gain an objective understanding of the resources in the county. The 2013-2014 Department of Social Services Annual Report was the most recent available report for Transylvania County and the 2016-2017 Health and Human Services Annual Report was the most recent available report for Buncombe County.

Economic Development

In order to gain an understanding of economic development in the county, the County Economic Status from the Appalachian Regional Commission (ARC) was included as a proxy measure. The ARC uses “an index-based county economic classification system to identify and monitor the economic status of Appalachian counties” (Appalachian Regional Commission, 2017) through a comparison of each county’s average unemployment rate,

income, and poverty rate. Income and unemployment rate were used as proxy measures of community wellbeing by Kim et al. (2015), and poverty rate was also included in Table 2 and Table 4 in order to quantify all factors which determine County Economic Status. County Economic Status is important as its own measure because it interprets the economic indicators, classifies the county into an economic status, and compares each county with other counties in Appalachia.

4. Results

4.1 Transylvania County

Community Health Assessment

According to the Executive Summary located in the 2015 Transylvania County Community Health Assessment (Transylvania County Public Health, 2016) published on March 7, 2016, overall assets to the county include its “natural environment and location, its people, sense of community, and access to health care”. Issues that need to be addressed include “employment and the economy, housing, education, transportation, health care, community and culture, and social services”.

Regarding health outcomes, Transylvania County has a lower mortality rate than North Carolina averages for every cause of death except “unintentional non-motor vehicle injuries, suicide, and liver disease” which are closely related to the issues of mental health and substance abuse. Substance abuse is the first health priority for the county, especially related to medication and drug overdose and alcohol abuse. Mental health is the second priority and is related to substance abuse and “a lack of necessary mental health treatment and counseling options in the county, especially for those who have low income or no

insurance”. More than 16% of county residents reported having seven or more days of poor mental health in the past month. The third priority is Nutrition, Physical Activity, and Weight because excess weight puts individuals at risk for a number of health conditions. Issues related to this priority in the county include access to affordable produce and number of children who qualify for free or reduced lunch, and/or struggle with food insecurity. Only $\frac{1}{3}$ of residents have access to affordable produce, 58% of students enrolled in Transylvania County Schools qualify for free or reduced lunch, and 29% of children struggle with food insecurity in Transylvania County. Only $\frac{1}{3}$ of residents reported the recommended amount of daily activity despite the availability of recreational opportunities in the county.

At-risk populations identified in the assessment (Transylvania Public Health, 2016b) include underserved individuals and families that do not have access to healthcare, individuals who are likely to have or have the potential of getting certain health conditions including people who are overweight or obese and those who take prescription drugs, and vulnerable populations such as military veterans and those living in poverty. Elements of a healthy community were identified as “healthcare, facilities for physical activity, social services and support, health-focused attitude, employment, economic development, education, and a safe and healthy environment”.

Community Transportation Services Plan & Executive Summary

The Transylvania County Transportation System, TRANSPORT, provides public transportation to residents in the community for medical trips and is “primarily used by seniors, Medicaid clients, persons with disabilities and clients of various human service programs” (Transylvania County Transportation System, 2011). The Community

Transportation Service Plan aims to evaluate the current public transportation system, assess for needs, and ultimately deliver services more effectively. The plan is required by the North Carolina Department of Transportation to receive state and federal funding. The system currently has seven vans and provides “12 in-county vehicle runs per day”. “TRANSPORT averages between 150 and 175 passenger trips per day, with services available Monday through Friday, 6:00 AM to 6:00 PM”. The number of passengers has increased 14 percent in the last 3 years. Less than half of respondents in the county were aware of the services, but a majority of passengers were satisfied with the system. Since 2000, Transylvania County has seen an increase in the population that is 60 or older, living in poverty, and living with a disability. The system generally doesn’t serve areas removed from the Brevard and Rosman population centers, although those outside centers are probably in need of transportation and this restricts mobility in those areas.

Table 2: Community Wellbeing & Resilience: Proxy Measures

Community Wellbeing & Resilience Proxy Measures	Transylvania County	National Averages
Unemployment Rate	4.0% (June 2017)	4.1% (October 2017)
Median Family Income	\$52,298 (2015)	\$56,516 (2015)
Poverty Rate	12.6% (2015)	13.5% (2015)
Educational Attainment:		
At Least High School Graduate	88.5% (2015)	88% (2015)
At Least Bachelor’s Degree	29.7% (2015)	33% (2015)

The unemployment rate in Transylvania county is slightly lower than the national average and the poverty rate is 0.9% lower than the national average, but the median family income is approximately \$4,200 lower than the national median family income. In regard to educational attainment, the percentage of residents in Transylvania County with at least a high school degree is slightly higher than the national average, but the percentage of individuals in the county with at least a Bachelor's Degree is 3.3% lower than the national average.

Table 3: Social Programs

Below are statistics regarding the amount of social services provided in Transylvania County for 2014 (Transylvania County Social Services, 2014).

Transylvania County Social Services	
Medicaid	4,440 individuals or households
Medically necessary trips through Medicaid Transportation Program	11,010 trips
Food and nutrition services	2,782 households
Work First	59 families
Child support enforcement	931 children/\$1,585,692
Crisis situations addressed	939 crisis situations
Child care subsidy provided	247 children/\$845,757
Special Assistance In-Home Program	28 adults served
Reports of child abuse/neglect assessed	371 reports
Children served by foster care	55 children
Children successfully returned to a parent	18 children
Adoptive families assisted with state and federal funds	74 families

Economic Development

The Appalachian Regional Commission identifies the County Economic Status for Transylvania County as Transitional. Transitional counties are those transitioning between strong and weak economies and they make up the largest economic status designation among counties in Appalachia. Transitional counties rank between the worst 25 percent and the best 25 percent of the nation's counties (Appalachian Regional Commission, 2017).

Interview: Social Programs

According to professionals in the field of social services in Transylvania County, the largest strength of the county is the abundant amount of resources given the population. For example, it is not common for a community with a population under 40,000 to have a homeless shelter, a domestic violence shelter, and a children's shelter. The professionals also specified there is an outpouring of volunteer efforts and an excess of food resources in Transylvania County. On the third Thursday of every month the Department of Social Services holds a round-table meeting in order to allow organizations to collaborate. The professionals expressed that the copious amount of organizations dedicated to social programs in a small community and their willingness to collaborate and coordinate services makes a positive impact in the lives of county residents in need.

The largest weaknesses identified were the decline of the middle class, lack of transportation, and increased cost of housing in the county. One professional noted that although the community continues to grow economically, rental and property prices continue to rise, which negatively affects the residents in the community. Although there is a plethora of available social programs, many residents do not actively seek services. Although

economic development initiatives and social programs do not always directly intersect, the collaboration of organizations allows for coordination of services and is still a large strength for both economic development and social needs.

In Transylvania County, the Department of Social Services will receive a grant to create a skill-building program for county residents. The year-long program will include 20-25 participants and may provide funds for child care and transportation while also offering opportunities for skill-building. By helping participants to overcome barriers, the ultimate aim is for each person to obtain a job paying a living wage. Both professionals asserted that economic development initiatives and social programs merge at the concepts of affordable housing and a living wage. In the county, issues related to these concepts include the development of expensive housing, which supports an unaffordable market; the outrageous cost of childcare in the county; and lack of access to transportation. For example, if job opportunities are outside the county, transportation may act as a barrier, even if an individual gains the skills to obtain a job with a living wage. This is why the described skill-building program aims to address multiple barriers. The professionals expressed that in a community with copious resources, initiative is lacking in terms of building more affordable housing. Similarly, the food resources in the county are mostly concentrated in Brevard, and strategies to transport this food are only beginning to take shape.

Interview: Economic Development

According to a professional at Heart of Brevard, an economic development organization in Transylvania County, the organization is a main street program focused on the preservation of historic downtown Brevard in order to promote economic growth and

community. Heart of Brevard aims to promote Brevard as a crossroads for exceptional outdoor recreation and a center for the arts. It is a 501c3 organization but is funded mostly through taxes. When the organization began there was 50% occupancy in the downtown area and now there is a waiting list to move businesses to the area. According to this respondent, many strengths and weaknesses of Brevard are two sides of the same issue. While the county boasts extensive natural resources which allow for innovative development, there is a high demand for the county because of the beauty but limited area for development. These factors raise prices of housing and living, and it becomes hard to develop a workforce if you can't live and work in the same place. Operating seasonally is also a strength and weakness in that tourists help keep the economy strong but only so much money can be made during peak season and other parts of the year are stagnant. For example, the Walmart, located in Pisgah Forest next to the entrance of Pisgah National Forest, is really only built for full capacity during the summer and early fall and then sits mostly empty for the rest of the year. The professional with Heart of Brevard estimated that the occupancy of hotels, bed and breakfasts, etc. is 90% during the tourist season and 65% during the off season. Additionally, they noted that Air B & B has affected the development of new hotels and also affects the buying market as people consider if they can rent out a room when they are buying homes. This drives up cost of housing for short term and long term rentals in combination with limited land.

Still, people are interested in living in Brevard and there is an optimism and energy of entrepreneurship; consequently, business owners want to stay there over time and grow their ventures. While the county used to be focused on manufacturing plants, the current economic

development is more innovative and includes small start-ups and businesses that continue to thrive in downtown Brevard. The professional noted that there must be multiple industries supporting the economy for success, yet Brevard seems to have an increasing reliance on tourism and outdoor business, which may put the economy at risk. For example, if gas and/or commodity prices increase, those industries could be negatively impacted.

Another concern is that the downtown area is being preserved mostly for tourists. To keep the area thriving people must live in downtown Brevard, but it is much less expensive to live outside the downtown area. During the last census, downtown Brevard was the only area in the county to see property values rise. There is a balance necessary to keep the area attractive for both tourists and residents of the county. In the context of economic development initiatives, between the businesses and government, the downtown area in Brevard is the largest employer in the county. The professional expressed that the number of jobs lost when the main manufacturing plant in the county closed down was about the same as the total number of people living in Brevard, and yet the area has, for the most part, held together. In speculating why, the professional described how similar areas went after more industry and did not experience success, and conversely Brevard may have benefitted from pursuing tourism after losing the plant. By focusing on experience as part of the product, Brevard continues to thrive and bring in new people.

Related to balance of economic development initiatives and social programs, Heart of Brevard aims to act as a first-line of defense for creating jobs and helping build small businesses in the line of programs in place for those in need. By working to employ people and grow the economy, the hope is that need is mitigated, at least in Brevard's small pocket

of the world. They also noted in terms of balance that there are around 160 nonprofits in Brevard and while most of them are not focused on economic development, many of the tax dollars go to the organizations focused on economic development, which makes it difficult to quantify the balance.

4.2 Buncombe County

Community Health Assessment

According to the Executive Summary located in the 2015 Buncombe County Community Health Assessment (Buncombe County Health and Human Services, 2016), length of life and quality of life measures were the focus for health outcomes in Buncombe County. Mortality rate in Buncombe County is lower than the average mortality rate in North Carolina, but worse than the “best performing communities across the country”. Quality of life was examined as “physical and mental health over time”. Only 14% of Buncombe County residents rated their physical health as poor as compared to 18% in North Carolina overall but the number of those who rated their mental health as poor was far higher than the North Carolina average. Populations at-risk identified in Buncombe County include the “aging population, those impacted by health disparities, those impacted by adverse childhood experiences including domestic violence and child abuse and neglect, and homeless population subgroups such as veterans and those impacted by mental illness and domestic violence”. Similar to Transylvania County, Buncombe County identified the top ten health issues and then broke down the health priorities into two focuses. The first priority is physical activity, nutrition, and overall health, with focuses on “obesity prevention and improved management of chronic diseases” because 50% of adults and 33% of children in

Buncombe County were identified as either overweight or obese and there has been a large increase in diabetes mortality. The second priority is “safe, stable and nurturing relationships and environments” for all children, with focuses on intimate partner violence, substance abuse, and infant mortality. Recently, 5 out of 8 homicides in Buncombe County were the result of intimate partner violence in addition to an increase in number of calls to the IPV hotline. In terms of substance abuse, increased rates of heroin related overdoses, especially among the homeless and mentally ill, continue to be an issue in Buncombe County. Finally, infant mortality is often used to monitor “women’s health, health equity, and poverty”, and because there was an increase in infant mortality rate in Buncombe County, the county moved forward with a community initiative to provide resources for women to address poverty and health care.

The Buncombe County Community Health Assessment (2016) noted health behaviors, social and economic factors, clinical care, the physical environment, and community resources as key elements of a healthy community. The assessment also noted that “by looking at identified community strengths and social issues that determine our health, we see how important it is to work with our partners” in areas such as economic development and education. Community partners noted the largest influences on health and adequate healthcare included “housing, access to healthy/affordable food, transportation, employment, income, family and social support, and access to early care and education”. From a survey of 300 residents, more residents of Buncombe County rated their “health status as good to excellent as compared to regional and state comparisons”. They also

identified assets to the county as the “vibrant” community, location in the mountains, and “caring, creative, friendly, and optimistic people”.

Community Transportation Services Plan & Executive Summary

The Buncombe County Community Transportation Services Plan (2015) is a five-year plan for transportation in the county and is required to receive federal funding for transportation and assesses current transportation as well as needs for future transportation initiatives. Mountain Mobility meets the needs for human service agencies’ transportation by providing ridesharing services to those in need of transportation assistance. According to surveyed passengers, the transportation system provides clean and safe mobility and has “talented and caring” staff”. The system is mostly funded by grants which take pressure off local funds. Still “there is a clear need for a transit service throughout Buncombe County”. The demand of public transportation is growing and is expected to continue to increase because of the rise in population, especially in the elderly community. The largest issues with Mountain Mobility and transportation in Buncombe County in general is timeliness of pickups, lengthy travel times, and the need for service in rural parts of the county where transportation is a huge issue. Some objectives stated in the plan include conducting a feasibility study for new potential routes, enhanced coordination with surrounding counties, and continued public outreach.

Table 4: Community Wellbeing and Resilience Proxy Measures

Community Resilience Proxy Measures	Buncombe County	National Averages
Unemployment Rate	3.2% (June 2017)	4.1% (October 2017)
Median Family Income	\$58,388 (2015)	\$56,516 (2015)
Poverty Rate	15.9% (2015)	13.5% (2015)

Educational Attainment:		
At Least High School Graduate	89.7% (2015)	88% (2015)
At Least Bachelor's Degree	35.9% (2015)	33% (2015)

The unemployment rate in Buncombe County is lower than the national average by 0.9% and the median family income is approximately \$1,900 higher than the national median family income, but the poverty rate is 2.4% higher than the national average. In regard to educational attainment, the percentage of residents in Buncombe County with at least a high school degree is higher than the national average by 1.7% and the percentage of individuals in the county with at least a Bachelor's Degree is 2.9% higher than the national average.

Table 5: Social Programs

Below are statistics regarding the amount of social services provided in Buncombe County for 2016 (Buncombe County Health and Human Services, 2016).

Buncombe County Social Services	
Medicaid	33,457 families and children and 14,298 elderly and disabled adults
WIC	4469 per month
Domestic violence incidents	3437 incidents
Food and nutrition services	17630 households
Work First	415 recipients
Child support enforcement	10,136 children/\$13,587,076
Child care subsidy provided	1589 children per month/\$8,995,180
Adult Day Care	30 per month
Reports of child abuse/neglect assessed	2,618 reports

Reports of adult abuse/neglect assessed	1,127 reports
Children served by foster care	325 children
Average number of licensed foster homes	83 families per month

Economic Development

The Appalachian Regional Commission identifies the County Economic Status for Buncombe County as Transitional. Transitional counties are those transitioning between strong and weak economies and they make up the largest economic status designation among counties in Appalachia. Transitional counties rank between the worst 25 percent and the best 25 percent of the nation's counties (Appalachian Regional Commission, 2017).

Interview: Social Programs

According to a professional in the field of social services in Buncombe County, the county's strengths include a resource-rich community with a very robust provider system, a large number of nonprofits, and a collaborative relationship between organizations. Buncombe County is known for being innovative in social programs, health, and economic development, and in the past 30 years, regardless of the political affiliation of the state and federal administration, the county commissioners have understood the need to support the community through services, non-profits, private organizations, and a competitive grant process. As far as weaknesses, Asheville, the county seat, is surrounded by fairly rural counties which struggle to access services. Additionally, practitioners in social services must respond with culture in mind because there is a distinct cultural difference between the eclectic urban center of Buncombe County and the rural outskirts with Appalachian mountain

culture. Transportation in Buncombe County is a problem especially in rural areas and in regard to housing, people who work in Asheville often can't afford to live where they work.

Downtown Asheville is very expensive to live in and has an outrageously expensive rental and buying market, and while there is a plethora of jobs in Asheville, many do not pay a living wage. They describe Asheville as having a booming economy with created communities that are very expensive and upper-end; as an example, the professional gave T.C. Roberson High School as the school is surrounded by very expensive communities. The professional then noted that right behind the baseball field is a dilapidated trailer park, demonstrating that even in the most affluent parts of Asheville, there are pockets of poverty. Many of those people are the working poor not being paid a living wage, and there is a fallacy that working poor are receiving large welfare resources, when in reality many of the working poor who are eligible for services don't actively seek services because of personal values. In finding solutions to this, there are programs currently being implemented which are working to train and place people in high-paying jobs. Plant and industry jobs used to be a large part of the economy, and they're beginning to come back and are well-paying but need skilled workers. The professional also noted that economically, you must have different ways for people to make money so that people are not forced into poverty should one industry decline.

In regard to wellbeing and resilience related to social programs, they noted that emotional and economic wellbeing and resilience are inherently interconnected and must be recognized for economic initiatives to be sustainable. As far as economic development and social programs, striking a balance must include working for a living wage on both sides

because many issues stem from inability to afford to live in Asheville based on current pay. Additionally, the impact of not being able to afford to survive impacts emotional wellbeing. The professional gave an example using ACES, or adverse childhood experiences, to demonstrate that when poverty is present, there may be a higher ACE score and compounded effects of adverse childhood experiences. Additionally, after the decline of plant and industry jobs, there was a visible crash of both economic and emotional well-being and at the same time an increase in drinking and substance abuse in Buncombe County

Interview: Economic Development

One professional with the Asheville Chamber of Commerce began by explaining that communities have either success or death spirals. In a death spiral, talented individuals continue to leave a community because of its lack of opportunity throughout generations, and ultimately the workforce that is left cannot support a healthy economy. Conversely, Asheville is attractive to successful people, and they often move to Asheville because of the area and in turn aid in the growth of the local economy. In-migration is a great strength of the community. Another professional expressed a strength of the community as political diversity which facilitates different viewpoints. While in-migration and tourism are generally strengths, infrastructure may not be able to keep up, land shortage may make it difficult to bring in new businesses, and as more people move to Asheville, the qualities which make the community attractive may become diluted as more people discover the area. While the county is the driver for the region of western North Carolina and the community continues to grow, an insufficient amount of talent and skill makes sourcing for talent from other counties necessary to sustain the growth.

Other challenges present in Asheville are lack of affordable housing and inadequate access to transportation. If an individual can't afford to live and work in the same place, they must live elsewhere and commute, yet the wage may only allow them to commute so far, demonstrating that the issue of transportation and housing are inherently interconnected. Solutions suggested by professionals included an extensive park and ride system to increase transportation opportunities with minimal cost and the development of more affordable housing. However, the land shortage means that this can only be carried out to the extent that land is available and illustrates that a park and ride system may be more a sustainable solution. One professional noted that in terms of affordable housing, affordable is subjective to amount of income earned, and therefore high paying jobs can also be a solution: this is the responsibility of the Asheville Chamber of Commerce. The issue of having enough job opportunities which provide a living wage is compounded when Asheville's geography and the in-migration of wealthy people is inserted into the equation, because land is limited and those individuals are likely not those who experience issues with transportation, housing, or jobs with insufficient wages.

In connecting social programs to Asheville Chamber of Commerce, the workforce can be, in many circumstances, a direct reflection of level of education in the community, and a weak workforce leads to economic challenges. One professional compares social programs and workforce to short term and long term crops. While it is important to invest in workforce as a short term "crop" which will yield value, it is also important to focus on long-term "crops", or social programs such as education and healthcare which can affect generations of the workforce. It may also be beneficial to incentivize companies to engage in

social programs such as child care for employees in a partnership, instead of regulatory, model. Economic development initiatives in the organization include attracting companies that create high wage jobs; creating a stronger tax base for infrastructure, education, social programs, etc. by ensuring companies are engaging in capital investment; and diversifying the economy in order to protect companies and employees from economic downturn. For example, the job of the Asheville Chamber of Commerce is to provide quality jobs, regardless of the manufacturer, and breweries are becoming a large part of the economy and culture of Asheville; they pay some of the best wages in the county and provide comprehensive healthcare to their employees. In terms of community, they also often provide a family-friendly atmosphere and a culture of community.

One professional indicated that social programs and economic develop initiatives are not mutually exclusive and at the heart of both is people: people must be taken care of and have jobs with living wages available to them. Additionally, economic development, specifically attracting new businesses and improving the work force, becomes significantly more difficult with rampant social problems. Similarly, innovation, at a higher level, is impossible without achieving basic needs such as safety, healthcare, and education. On the other hand, another professional expressed that balance doesn't equate to a single bucket of money from which funds are extracted. The impact of both economic development initiatives and social programs are expensive and difficult to quantify and a more mature matrix of the effects of both forces must be developed before conclusions are made. For example, they assert that New Belgium Brewery has more than likely raised children in the community out of poverty by providing living wages for employees but measuring the effects is far more

complex than simply assessing income as the impact may be generational. In a final point, the other professional noted that, overall, if there is more money in the economy, it tends to solve problems.

5. County Comparisons

Both counties had similar assets related to sense of community, friendly and creative people, and natural environment and location in the mountains. They also had comparable health priorities, including substance abuse, mental health, and nutrition, weight, and physical activity, although Buncombe County also focused on infant mortality and interpersonal violence. Their key elements for health included both economic development and social services. These were also identified as areas for improvement. Both counties rated well in terms of mortality and Buncombe County noted that more residents reported their physical health as good to excellent than regional or state averages, however, mental health was an issue noted in both county assessments.

Public transportation systems in Transylvania and Buncombe County seem to serve a large number of those in need given their resources. That being said, Transylvania County's TRANSPORT system is extremely limited in its ability to provide mobility for those who can't pay for a cab and/or do not own a car. Additionally, both Buncombe County and Transylvania County's systems do not adequately serve the people in rural parts of the counties where people are most in need of transportation, and improvements should be made to increase their mobility. The transportation plan for Buncombe County is more updated as it is four years more recent than Transylvania County's transportation plan. Still, Buncombe County seems to be serving more people in need given the population in the county through

Mountain Mobility than Transylvania County's TRANSPORT system, and they seem to be better placed to increase funding as they receive a large percentage of their funding from grants.

Table 2 and Table 4 show the proxy statistics for unemployment rate, income, poverty rate, percentage of individuals with at least a high school degree, and percentage of individuals with at least a Bachelor's Degree. Buncombe County had a lower unemployment rate than Transylvania County by 0.8% with the national average higher than both counties. Buncombe County also had a higher median income by approximately \$6,100 and the national average fell in between the two counties' statistics. However, Buncombe County had a higher poverty rate than Transylvania County by 3.3%. Those with at least a high school degree were very similar and close to the national average, although Buncombe County had a slightly higher percentage. Finally, the largest difference in county data was the percentage of residents with at least a bachelor's degree: Buncombe County's percentage was 6.2% higher than Transylvania County. The national average percentage of those with at least a Bachelor's Degree fell in between the two counties' percentages. Still, despite slight differences, the community wellbeing and resilience proxy measures overall indicated statistics close to the national average.

In analyzing the data from social services provided in Transylvania and Buncombe County, it is relevant to discuss population difference in order to determine differences in amount of services provided by social services. Buncombe County is approximately 7.5 times larger in population (247,336) than Transylvania County (32,928). Although the social service statistics examined in the annual reports are not all the same, it is relevant to discuss

those which are similar in order to gain an understanding of the magnitude of the programs in each county. Additionally, Buncombe County's data is more recent than Transylvania County's and is part of a larger Health and Human Services report versus the one-page Social Services Annual Report provided by Transylvania County Social Services. This is probably in part because of size difference in population and available resources.

Some measurements which establish difference in size and magnitude of service include number of people served through Medicaid, number of households receiving food and nutrition services, and number of reports of child abuse/neglect assessed. Table 6 shows statistics for both counties for these programs and the ratio of Buncombe County statistics to Transylvania County statistics.

Table 6

Statistic	Transylvania County	Buncombe County	Ratio (Buncombe County: Transylvania County)
Population	32,928	247, 336	7.5 times larger
Medicaid	4,440	47,755	10.8 times larger
Food and Nutrition Services	2,782	17630	6.3 times larger
Child abuse/neglect reports	371	2618	7.1 times larger

Table 6 shows that Food and Nutrition Services and Child Abuse and Neglect reports assessed were similar given population size, although Transylvania County provided Food and Nutrition services to more households than Buncombe County given that the ratio is smaller than the population ratio. Medicaid, which was the largest program in both counties

based on statistics gathered, had many more people served in Buncombe County than Transylvania County based on population. Even with these calculations, Transylvania County is a small county and it was noted in the Community Health Assessment (Transylvania Public Health, 2016) that social services were an area or issue for improvement; for this reason, it must be noted that amount of services provided or number of people served may be more related to availability of resources than amount of need. Buncombe County more than likely has a larger pool of resources because of its urban center and larger population.

Economic County Status was identified as Transitional for both counties: this indicates that even though their statistics on unemployment, income, and poverty rate were different, they were similar enough in the past three years to be given the same economic status by the Appalachian Regional Commission in comparison with other counties in Appalachia.

Interviews

There were many clear commonalities between counties and the economic development and social program professionals. All economic development professionals noted an attractive culture of entrepreneurship that draws in-migration to both counties - more specifically, the county seats of Brevard and Asheville. The social program professionals and the professional at Heart of Brevard noted that the counties have an eclectic culture. In both cases, they noted the county seat has a different culture from surrounding districts within each county. All professionals in the Department of Social Services also expressed that Buncombe County and Transylvania County are resource-rich communities in terms of social

programs, especially in regard to non-profit collaboration. Community weaknesses in both counties addressed by all professionals included transportation, affordable housing, and the need for jobs which provide a living wage. Professionals noted the interconnected nature of these issues.

In terms of economic development initiatives, the economic development professionals interviewed identified their organizations as a first line of defense in working to create economic growth and increase employment which could in turn decrease the need for social programs. The Buncombe County DSS professional and all economic development professionals also discussed the importance of multiple industries: in the past, both Transylvania and Buncombe County were extremely reliant on manufacturing and when factories closed down, communities were negatively impacted. Now, both communities have expanded their industry to include outdoor programs and tourism, and yet this is also relied on heavily which could negatively affect the economy should one industry begin to decline.

Professionals suggested multiple solutions to the issues of rising housing prices and inadequate transportation, including price management to control rent for residents and more effective park and ride systems, however, all professionals suggested that living wages were the long-term solution to these issues and other social problems because, in conjunction with initiatives discussed above, people could afford to live in the communities where they work and be able to afford transportation as well. Perhaps the most profound conclusions common in all interviews were that economic initiatives and social programs are inherently connected, and living wage can be a solution on both sides. On the economic development side, it is

incredibly important to create jobs that pay a living wage while social programs can be beneficial in training skilled workers to fill those jobs.

6. Conclusion

The qualitative interviews presented in this study produced remarkably similar themes to those present in the existent quantitative measures. For example, the transportation services plan for each county expressed the need for more extensive programs to reach rural areas; this was also described in interviews with economic development and social service professionals. The community health assessments also reflected strengths and weaknesses described by professionals in the interviews. Additionally, social services and economic development were identified as key elements to a healthy population as well as issues to be addressed in the communities. Although Buncombe County has a population of nearly 215,000 more people than Transylvania County, the commonalities are clear. In regard to strengths, both areas are located in the mountains of western North Carolina, have eclectic cultures, and focus on the tourism industry, among other factors. Assessments of each community through proxy measures and interviews with professionals indicated similar main themes: increased cost of housing, lack of access to transportation, and inadequate living wage.

The original research question focused on exploring what balance of social programs and economic development initiatives foster community wellbeing and resilience. The concept of balance in terms of the interview questions and assessments focused on the discovery of the “correct” proportions of social and economic investment to contribute to the wellbeing and resilience of a community. However, proportional balance is not quantifiable

given the complexity of social programs, economic development, and community wellbeing and resilience. For example, one economic development professional expressed that balance does not equate to a single bucket of money from which funds are extracted, and the impact of social programs and economic development initiatives are expansive and difficult to quantify. This was exemplified in the interviews when themes such as lack of affordable housing and adequate living wage were expressed by all professionals interviewed. A more mature matrix of the effects of both forces must be developed before conclusions are made about balance of social programs and economic development initiatives in relation to community wellbeing and resilience.

In conclusion, the objectives and impact of social programs and economic development initiatives are inherently interconnected. For example, professionals asserted that social programs and economic development initiatives merge at the concepts of affordable housing and adequate living wage. Professionals also noted that economic development initiatives and programs may serve as a first line of defense in creating jobs and social programs act as a safety net. Programs such as the skillbuilding program proposed by Transylvania County Department of Social Services aim to provide services such as job training, child care, and transportation in order to help community residents earn jobs with a living wage. Another professional also noted that economically, you must have different ways for people to make money so that they are not forced into poverty should one industry decline, exemplifying the connection between economic development and social wellbeing. Collaboration was noted as a strength by professionals in both Transylvania and Buncombe

County. Therefore, collaboration of social programs and economic development initiatives is a key element to fostering community wellbeing and developing community resilience.

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Appendix

Interview Guide

1. What are the strengths and weaknesses of this community?
2. How have available social programs influenced this community?
3. How have available community economic development initiatives influenced this community?
4. Assuming a community has limited resources, what balance of economic development initiatives and social programs best support community wellbeing*?
5. Similarly, what balance of economic development initiatives and social programs best support community resilience**?

* Community wellbeing is defined as “a state of being with others and the natural environment that arises where human needs are met, where individuals and groups can act meaningfully to pursue their goals, and where they are satisfied with their way of life” (Armitage et al. 2012, p. 3).

** Community resilience is defined as “a process linking a set of adaptive capacities to a positive trajectory of functioning and adaptation after a disturbance” (Norris et al. 2008, p. 130).