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WARNING: DEMOGRAPHIC HEADWINDS AHEAD

James H. Johnson, Jr., Ph.D.
William Rand Kenan, Jr. Distinguished Professor
Kenan-Flagler Business School
UNC-Chapel Hill



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ABSTRACT

Knowledge of our changing demography can serve as both foundation and frame for how to achieve greater social, economic, environmental, and health equity in North Carolina. After describing how disruptive demographics are transforming the our state, this essay highlights a set of equity issues undergirding our shifting demography and concludes with a set of tools and strategies to make North Carolina a place where equity, inclusion, and belonging is the new normal.

INTRODUCTION

Shifts in our demography are dramatically transforming the social, economic, and political fabric of our nation, our state, and all of our local communities (Johnson and Parnell, 2019). Knowledge of our changing demography, I believe, can serve as both foundation and frame for our continued deliberations regarding how to achieve greater social, economic, environmental, ad health equity in the state of North Carolina.

My aspirational goal, in making this presentation, is to contribute to the shaping of the recommendations ultimately forwarded to Governor Cooper in early December. I therefore shall first, briefly describe how disruptive demographics are transforming our great state; then highlight a set of equity issues undergirding our shifting demography; and conclude with a set of proposed equity tools I believe are worthy of consideration in our deliberations moving forward.

¹ Invited Remarks, The Andrea Harris Social, Economic, Environmental, and Health Equity Task Force, September 2, 2020.

THE STATE AS A MIGRATION MAGNET

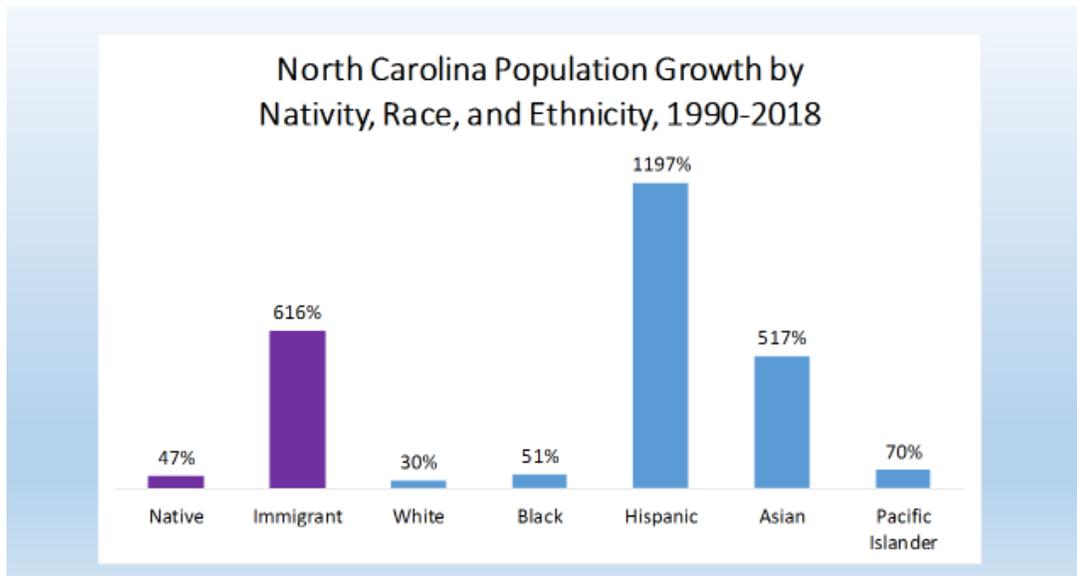
North Carolina is one of the nation’s most attractive migration destinations. In 2017, an average of 194 newcomers arrived in the state each day. As a popular migration destination, the state’s population grew more rapidly than the nation’s and the South’s population between 2010 and 2019, increasing by 932,000 in absolute numbers (Table 1). Combined with a net population increase of 2.1 million during the preceding decade, North Carolina’s population has grown by almost 3 million since 2000. The state also has become more diverse with immigrants and people of color driving much of the growth dating back to the 1990s (Figures 1).

Table 1: Absolute & Percent Population Change, 2010-2019

Area	2019 Population	Absolute Population Change, 2010-2019	Percent Population Change, 2010-2019
United States	328,239,523	19,481,418	6.3
Northeast	55,982,803	664,360	1.2
Midwest	68,329,004	1,399,279	2.1
South	125,580,448	11,017,418	9.6
West	78,347,268	6,400,361	8.9
North Carolina	10,488,084	952,333	10.0

Source: American Community Survey

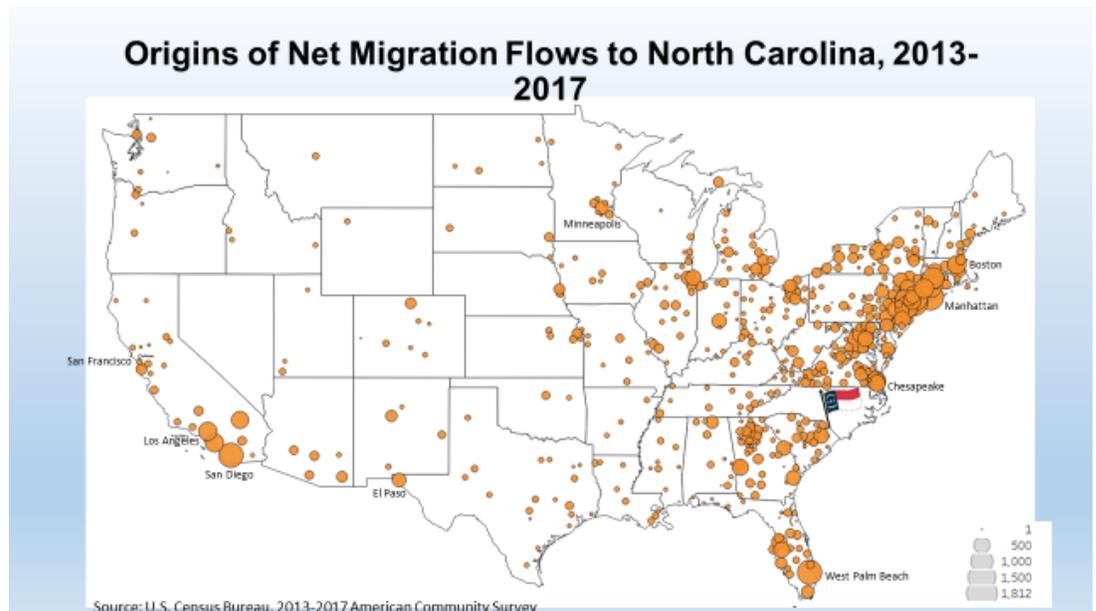
Figure 1



Source: Census 1990 and American Community Survey, 2018.

Recent transplants have relocated to North Carolina from small, medium, and large-sized towns and cities in every region and nearly every state in the nation (Figure 2). In 2017, for example, 41 snowbirds from New York State arrived in North Carolina on a daily basis. Between 10 and 25 newcomers arrived daily from Ohio, Pennsylvania, Connecticut, Georgia, Massachusetts, New Jersey, California and Florida. And from one-to-five migrants arrived each day from another 20 states plus the District of Columbia (see Johnson, 2020).

Figure 2

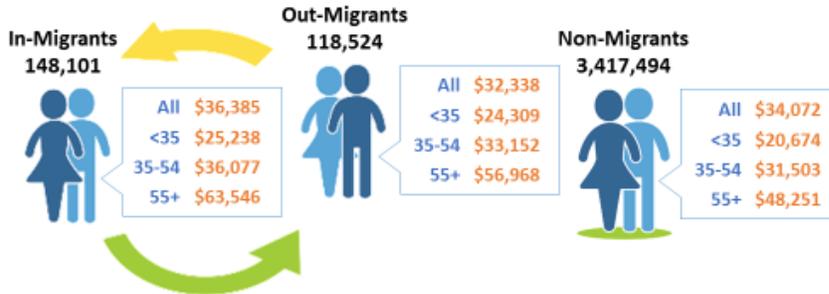


Source: U.S. Census Bureau, 2013-2017 American Community Survey

Moreover, recent transplants have increased our aggregate consumer purchasing power and, in the process, created a migration dividend by boosting state tax revenue. As Figure 3 shows, newcomers (in-migrants) on average have higher median per capita adjusted gross incomes than both people who left the state (out-migrants) and long-term residents (non-migrants). Newcomers 55 and over brought the greatest migration dividend to the state. In 2017-2018, their median per-capita adjusted gross income (\$63,546) was \$7,000 higher than the median per-capita adjusted gross income of those leaving the state (\$56,968) and \$15,000 higher than the median per capita adjusted gross income of non-movers (\$48,251).

Figure 3

Per Capita Adjusted Gross Income (AGI) of North Carolina In-Migrants, Out-Migrants and Non-Migrants by Age, 2017-2018



Source: IRS, Statistics of Income Division, Individual Master File, December 2019

Source: IRS Statistics of Income Division, Individual Master File December 2019

Unfortunately, North Carolina’s migration dividend has not benefitted all of the state’s residents and communities. In fact, as Figure 4 reveals, two counties—Wake and Mecklenburg—captured 42 percent of the state’s net population growth between 2010 and 2019. Ten counties captured 75 percent and twenty-three counties captured 95 percent of the net growth since 2010. In other words, the state’s growth has been highly concentrated, creating a landscape of demographic winners and losers.

Figure 4

North Carolina’s Growth Magnets, 2010-2019

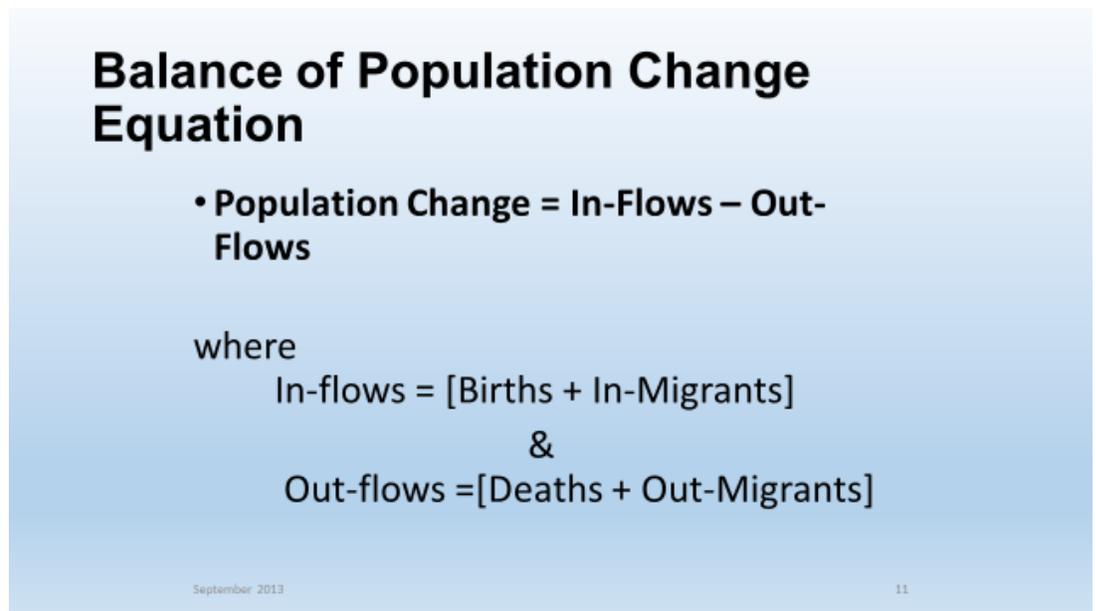
County	Count	Percent of Growth (Net Growth: 952,333)
Wake	210,709	42%
Mecklenburg	190,692	
Durham	51,487	75%
Guilford	48,720	
Johnston	40,461	
Union	38,332	
Cabarrus	38,332	
Brunswick	35,391	
New Hanover	31,790	
Forsyth	31,657	
Buncombe	22,861	
Iredell	22,342	
Harnett	21,285	
Onslow	20,137	
Gaston	18,431	
Alamance	18,354	
Cumberland	16,078	
Orange	14,783	
Moore	12,630	
Pitt	12,566	
Chatham	10,983	
Pender	10,864	
Henderson	10,698	

Source: American Community Survey

GEOGRAPHIC EQUITY ISSUES

To fully understand the state's demographic landscape—and by extension where equity interventions are most needed, it is informative to view the state through the lens of the balance of population change equation (Figure 5). For any community, according to this demographic accounting model, population change is a function of in-flows and out-flows.

Figure 5



In-flows are the product of births and in-migration. Out-flows are the product of deaths and out-migration. The dynamic interactions among these four demographic processes—births, deaths, in-migration, and out-migration—generate a six-fold typology of possible community level demographic experiences. As Table 2 shows, three highlight population growth experiences. The other three highlight population decline experiences.

Table 2

Typology of Communities

Demographic Experience	Drivers
Balanced Growth	G R ■ Births > deaths and in-migration > out-migration. Positive Total Change
Migration Magnets	O W ■ Deaths > births but population loss is averted because in-migration > out-migration. Positive Total Change
	T H ■ Out-migration > in-migration but this population loss is offset by births > deaths. Positive Total Change
Biologically Declining	D E C ■ In-migration > out-migration but net migration not substantial enough to offset deaths > births. Negative Total Change
Emptying Out	L I ■ Births > deaths but out-migration > in-migration, resulting in net population loss. Negative Total Change
Dying	N E ■ Deaths > births and out-migration > in-migration, resulting in population loss. Negative Total Change

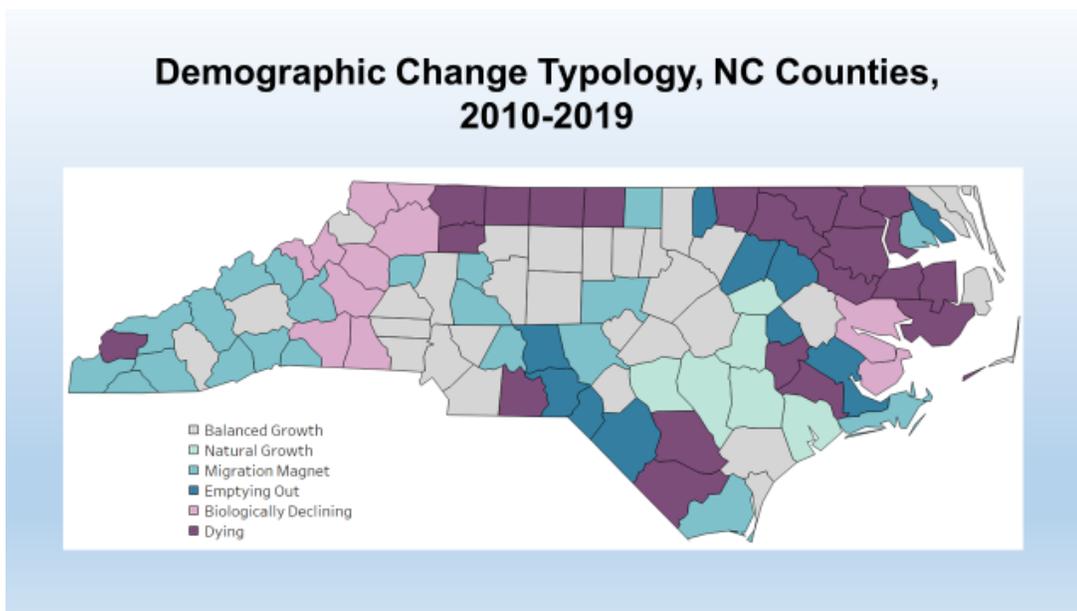
September 2013

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Source: compiled by author.

Applying this model at the county level reveals that 57 of North Carolina’s 100 counties experienced population growth between 2010 and 2019. The remaining 43 counties experienced population decline (Figure 6).

Figure 6



Source: American Community Survey

Thirty counties experienced balanced growth. In these counties, which are the major beneficiaries of the state's migration dividend, in-migration exceeded out migration and births exceeded deaths. These are mainly metropolitan counties in the state's urban crescent, extending from Johnston County in the east along the I-40/I-85 corridor to Mecklenburg County in the southwest.

Six counties—mainly with military installations (Cumberland, Onslow, and Wayne) and/or an influx of Hispanics with above replacement level fertility (Duplin, Sampson and Wilson)—grew solely as function of natural population increase. In these natural growth counties, out-migration exceeded in-migration but an excess of births over deaths was sufficient to offset population loss through migration due to military deployments in all likelihood.

Twenty-one counties were migration magnets. In these counties deaths exceeded births, but net migration of mainly retirees offset the natural population loss through excess deaths. Brunswick, Henderson, Moore, and Chatham counties are the most notable migration magnets in this group.

Most troubling are the 22 counties that are literally dying demographically. These counties are located throughout the state with notable concentrations in the northeast, southeast, and the mountains. In these counties, deaths exceeded births and out-migration exceeded in-migration. There are too few working age, taxpaying adults to support the elderly population in these communities, which is disproportionately female because men die younger (Johnson and Lian, 2018; Johnson and Parnell, 2016).

Hospitals have closed or risk closing. There are not enough senior care facilities to accommodate demand, and patients with serious ailments must travel long distances for health care (Gujral and Basu, 2019; Ellison, 2018; Radcliffe, 2017; Miller, et. al., 2020)). Moreover, it is a major challenge for health care facilities in these communities to recruit and retain health professionals. Moreover, leveraging tele-health services is difficult, if not impossible, due to the lack of access to broadband bandwidth sufficient to support the service.

Only slightly less concerning are the 11 counties that are experiencing biological decline. In these counties, in-migration exceeds out-migration, but the influx of newcomers is not sufficient to offset population loss due to natural causes, that is, more deaths than births. The counties are dispersed in both the east (Pamlico and Beaufort) and especially the west (Mitchell, Wilkes, Avery, Alleghany, Caldwell, Rutherford, Cleveland, Ashe and Burke). Although relatively small, these counties also are attracting retirees.

The final group of declining counties are emptying out demographically. In these 10 counties, births exceed deaths, but out-migration is much greater than in-migration and natural growth combined, resulting in population loss. Most of these counties are located in eastern North Carolina (Edgecombe, Greene, Nash Pasquotank, Craven and Robeson).

Warning: Demographic Headwinds Ahead

We urgently need strategies to reduce the outflow of existing residents, to attract new talent, and to ensure adequate access to essential services like health care for the existing residents of these declining counties, especially those that are dying. In addition to one or more physical ailments, many older adults in these counties suffer from loneliness and isolation, conditions that are health wise the equivalent of smoking fifteen cigarettes a day (Morin, 2018).

DEMOGRAPHIC EQUITY CONCERNS

In addition to the geographic inequities that undergird demographic patterns in our state, at least five noteworthy demographic subgroups require urgent attention if we are serious about making North Carolina a more inclusive and equitable place to live, work, play, and start and maintain sustainable businesses. Table 3 identifies these subgroups.

Table 3: Equity Concerns

•	African American Older Adults
•	Working Poor
•	Less than College Educated
•	Youth Experiencing a Triple Whammy of Geographic Disadvantages
•	Minority Males in Higher Education

Source: compiled by author.

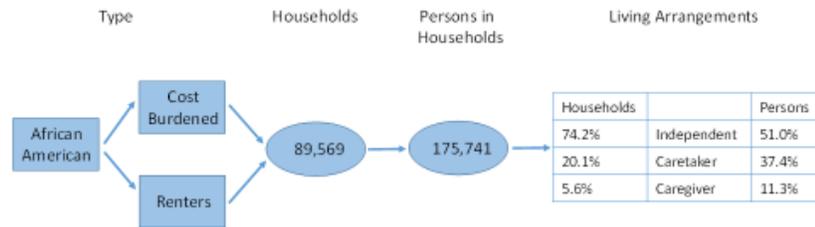
VULNERABLE AFRICAN AMERICAN OLDER ADULTS

African American older adults who face major aging-in-place challenges are the first group. Due to a historical legacy of discrimination in education, housing, and employment, the poverty rate for African American older adults is more than twice as high as the poverty rate for all older adults and three times as high as the poverty rate for non-Hispanic white older adults (Johnson and Lian, 2018). Moreover, reflective of disparate treatment they have endured, African Americans are more likely to experience disability earlier and, therefore, have shorter years of active life expectancy than whites (Friedman and Spillman, 2016).

Research defines the most vulnerable as households in which there is at least one African American 65 or older and where the head of household is either a renter or a person financially burdened by excessive monthly housing cost, irrespective of whether they own or rent their dwelling unit (Johnson and Lian, 2018). In North Carolina, as Figure 7 shows, there are 89,569 such households with 175,741 inhabitants.

Figure 7

**Households with Greatest Barriers to Aging in Place,
North Carolina, 2011-2015**



Source: American Community Survey PUMS, 2011-2015

Because people of color are more likely to occupy multigenerational households than Whites, the living arrangements of African American older adults are diverse. In North Carolina, three distinct living arrangements are commonplace.

The majority of the state’s vulnerable African American older adults live independently in one generation, single person or married-couple households (74 percent) (Figure 7). That their median household income is \$15,000 is more than ample evidence of their plight (see Johnson and Lian, 2018).

The second largest group are elderly African American single parents or married couples who are supporting their own adult child (two-generation households); their own adult child and a grandchild or some other relative (three-generation households); or a grandchild where neither biological parent of the grandchild is present (missing generation households). These are caretaker households (Figure 7). The elderly African American household heads are assuming caretaking responsibilities on a median household income of \$25,000 (Johnson and Lian, 2018).

Non-elderly caregivers head the third group of North Carolina households where a vulnerable African American older adult is present (Figure 7). The household heads are mostly married couples in their late forties or early fifties with modest household incomes (median \$39,000) who are taking care of an older adult parent or parent-in-law (two-generation households); or supporting their own biological child and an older adult parent or parent-in-law (three-generation household) (Johnson and Lian, 2018).

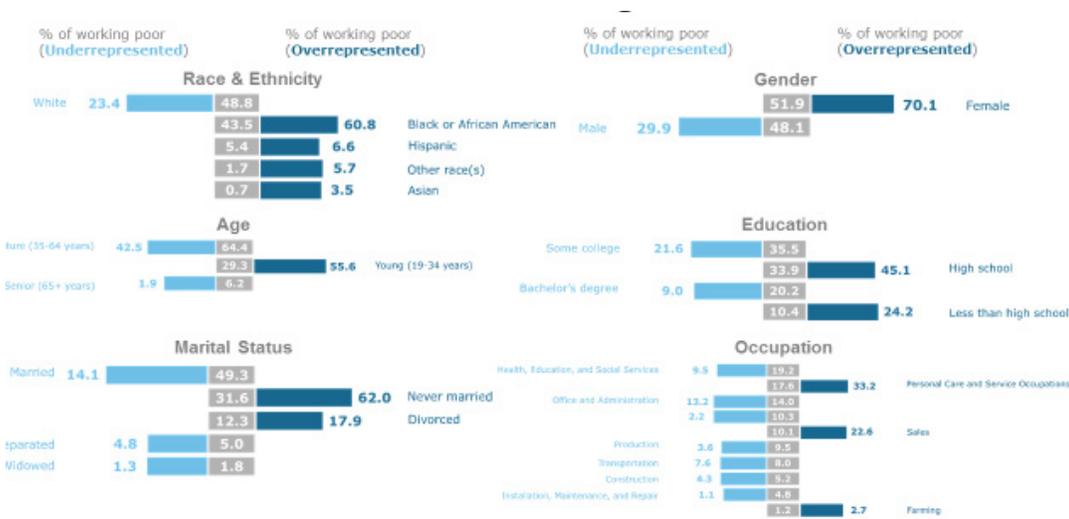
Across these living arrangements, most of the African American older adults have at least one age-related disability and may very well be responsible, in some instances, for the care of a disabled adult biological child or grandchild. The majority live in renter-occupied housing, and among those who live in owner-occupied housing, only a small percentage own their homes outright. The typical dwelling unit is 40 years old and a substantial share of the African American older adults have lived in the current dwelling unit for twenty years or longer (Johnson and Lian, 2018).

THE WORKING POOR

The second group in North Carolina that raises equity concerns is the state’s working poor—people who work every day but do not earn enough to cover basic necessities. A profile of the working poor in two counties—one rural and the other urban—illustrates the equity issue.

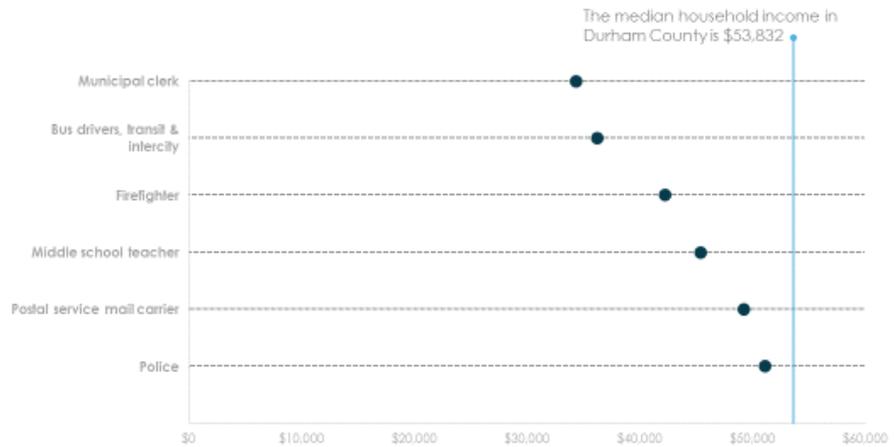
In rural Edgecombe County, people of color (Blacks, Hispanics, Asians, etc.), women, and those 19-34 years of age, with a high school degree or less, never married or divorced, and working in personal care and service occupations, sales, and farming are over- represented among the working poor population (Figure 8). Durham County — an urban community — has a similar working poor profile (see Johnson, McDaniel, and Parnell, 2019). However, as Figure 9 reveals, there also are some civil servants in Durham County — police, firefighters, and emergency personnel, as well as public school teachers — who are employed full-time in jobs that do not pay them enough to cover basic necessities. These individuals cannot afford to live in the community that they have been hired to protect and serve.

Figure 8: Edgecombe County Profile of the Working Poor, 2017



Source: compiled by author from American Community Survey.

Figure 9: Median Household Income of Selected Civil Servants, Durham County, 2017



Source: Compiled by author from American Community Survey

In both counties, stressful personal and family life circumstances, including in some instances structured homelessness (meaning the individuals are couch surfers in the homes of family and friends or they rent hotel rooms on a weekly basis), force the working poor to take moonlighting part-time jobs to make ends meet. Making matters worse, the working poor are often caregivers of young and/or older family members. These stressful life events not only affect their own health and socio-emotional wellbeing; they also put additional pressures on the N.C. healthcare system — especially urgent care units and hospital emergency rooms.

THE LESS THAN COLLEGE EDUCATED

The less than college educated, 25-44 year-old population is a third group that raises equity concerns (Case and Deaton, 2020; MacGillis and Propublica, 2016). Reportedly not benefitting from economic growth, lacking access to health care, and suffering from debilitating pain due to disabilities typically observed later in life among older adults (Chira, 2016a,b; Graham, 2017), research asserts this population nationally is experiencing a demographic depression (Kristof, 2020).

Supporting this assessment, a high rate of “deaths of despair” in this population -- suicides and alcohol- and drug-induced deaths -- contributed to a decline in U.S. life expectancy in three of the last four years (Koller, 2019; Kristof, 2020; Case and Deaton, 2020). Elaborating on the magnitude of the problem, one-writer notes:

In 2017 alone, there were 158,000 deaths of despair in the U.S., the equivalent of ‘three fully loaded Boeing 737 MAX jets falling out of the sky every day for a year (Karma (2020).

Warning: Demographic Headwinds Ahead

In 2018, roughly one quarter of North Carolina’s total population was 25-44 years old (2,627,416). Slightly over a third of those ages, 25-44 (35% or 921,949) had less than a college education (Figure 10). This population is predominantly White (69%) and disproportionately male (58%). However, compared to their representation in the total 25-44 population, Blacks (males and females) and American Indians (males) are slightly over-represented among those with less than a college education in North Carolina.

Figure 10

Less Than College Education 25-44 Year Old Population in North Carolina, 2018

Race/Ethnicity	Percent Male	Total Population
All Races	 58%	921,949
White	 60%	636,818
Black	 55%	209,744
American Indian/Alaskan Native	 77%	39,584
Asian	 24%	20,877
Native Hawaiian/Pacific Islander	 0%	7,484
Two or more Races	 59%	7,443

Source: Current Population Survey, Annual Social and Economic Supplement, 2018

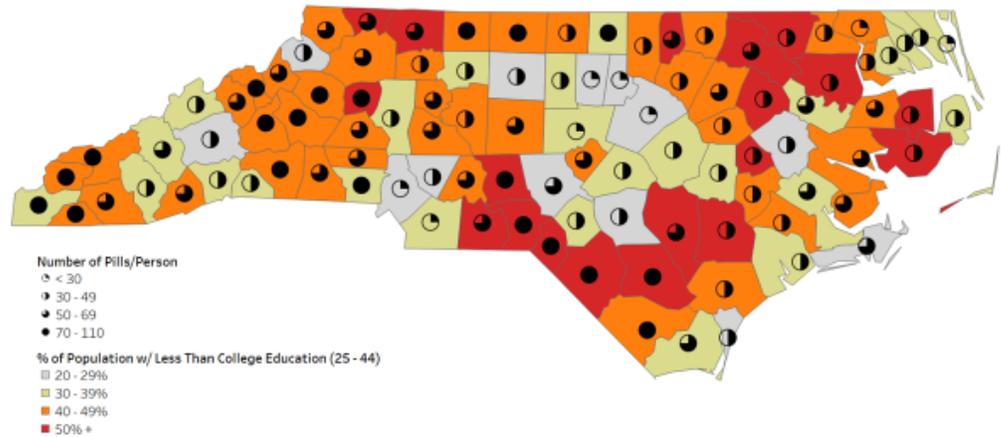
Source: Current Population Survey, Annual Social Economic Supplement, 2018

Race- and age-specific indicators of demographic depression among this age group in North Carolina are not available. However, data on the geographical distribution of less than college educated 25-44 year olds and the per capita distribution of opioid pills by county — one potential indicator of the magnitude of the problem—are available (Figure 11).

Figure 11

Opioid Pills Dispensed Per Capita by County, 2018

(The State: 43 Pills/Person)



Source: American Community Survey and The NC Opioid Data Dashboard

In 2018, 445 million opioid pills were dispensed in North Carolina —an average of 43 pills per person. At the county level, the number of pills dispensed per capita ranged from a low of less than 30 in metropolitan counties such as Durham, Mecklenburg, and Wake to a high of between 70 and 110 pills per capita in some of the state’s rural counties with a high concentration of less-than-college-educated residents (e.g., Rockingham, Gaston, and Roberson). The visual correlations in Figure 11 suggest there is a link between opioids drug use and the less than college educated in North Carolina.

The impact of opioids on individuals, families, and communities in our state has been devastating (FIGURE 12). In 2018, there were 1,718 overdose deaths, an average of five per day. Opioid-related hospital emergency department visits totaled 6,764, roughly 18 per day. In addition, there were 3,723 Naloxone Reversals, roughly ten per day.

Figure 12

North Carolina Opioid Statistics, 2018



Source: *The NC Opioid Data Dashboard*

Opioid-related casualties and other deaths of despair (suicide and alcohol-related) reduce the pool of potential talent to fill pressing labor needs in our economy moving forward. Moreover, those who die often leave behind orphaned children, which puts enormous pressure on extended families and the state's child welfare system (Johnson, Parnell, and Lian, 2019).

DISADVANTAGED YOUTH

The fourth group with serious equity concerns is the predominantly minority youth under age 18. They face a triple whammy of geographic disadvantages (Johnson, et. al., 2016). These young people are concentrated in counties and school districts where there is inadequate political (racial generation gap counties)² and/or financial support (minority-majority counties)³ for their education (whammy #1).⁴ They also live in hyper-segregated (whammy #2) and concentrated poverty (whammy #3) neighborhoods and communities (Figure 13).

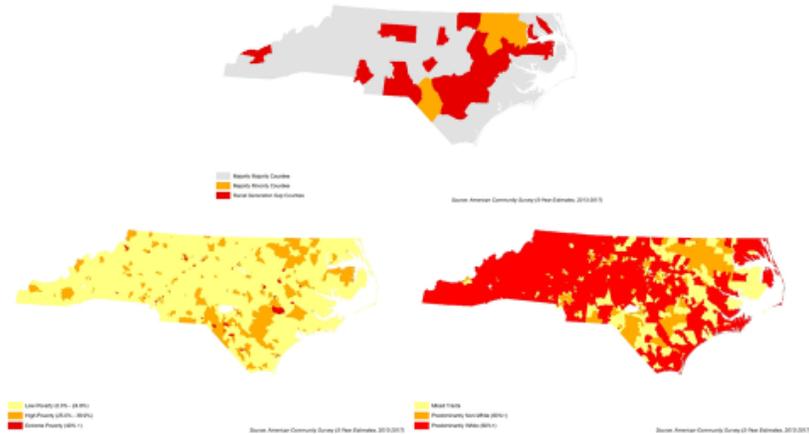
² In the counties, the adult, voting age population are predominantly, white aging empty nesters and the school population is predominantly non-White. In electoral matters, aging empty nesters typical vote their own self-interest (crime prevention, personal safety, retirement amenities) and oppose raising taxes to support schools and safety net program (Johnson, et. al., 2016).

³ In these counties, the adult, voting age population and the school-age population are both predominantly non-White. There is strong political support for public education but the financial resources are not there because these are low-wealth counties.

⁴ The remaining counties on the map are majority-majority counties. Both the adult, voting age population and the school age population are predominantly White. However, roughly one quarter of the school age population is non-White. Research shows that the non-white students in these counties and school districts are under-represented in the college preparatory tracks of the schools (Honors, Advanced Placement, and International Baccalaureate programs).

Figure 13

The Triple Whammy of Geographic Disadvantage



Making matters worse, students in triple whammy communities often attend schools with aging and rapidly deteriorating infrastructure that pose a risk to their health and wellbeing. And more often than not, school-based supports — including access to nursing services — are insufficient to address the students’ physical and socio-emotional development needs, a situation exacerbated in some instances by elected officials’ refusal to expand Medicaid in their states (Kaiser Family Foundation, 2020).

Ensuring access to basic necessities and preventable medical care for these young people and addressing the racially disparate impact of disciplinary sanctions in schools serving these triple whammy communities is a strategic imperative. They are the next generation who will have to propel our state forward in a hyper-competitive and highly volatile global marketplace (Johnson, et.al, 2016).

Racially disparate disciplinary sanctions, in particular, contribute to dropping out of school, especially for Black and Latino males (Table 4 and Table 5). Failure to improve education- and life-outcomes for males of color, especially those living in triple whammy communities, has contributed to a major shift in the gender composition of higher education.

Table 4: Disciplinary Sanctions and Dropouts by Race/Ethnicity NC Public Schools, 2018-2019

Indicator	American Indian	Asian/Pacific Islander	Black	Hispanic	Mixed Race	White	Total
All students	1.2	3.6	25.0	18.5	4.4	47.3	1,421,281
In-School Suspension	1.0	1.4	45.8	13.6	5.3	32.9	238,175
Short-term Suspension	1.9	1.0	54.1	10.9	5.5	26.7	203,295
Long-Term Suspension	1.2	0.3	56.5	8.5	6.5	26.7	587
ALP as a Disciplinary Action*	1.3	1.2	64.6	12.7	5.2	15.0	4,354
Expulsion	0.0	0.0	65.2	8.7	4.3	21.7	23
Dropouts	1.8	1.1	29.8	24.8	5.0	37.3	9,475

Source: NCDPI Statistical Profile

Table 5: Unique Students Receiving Suspensions by Race/Ethnicity & Gender, NC Public Schools, 2018-2019

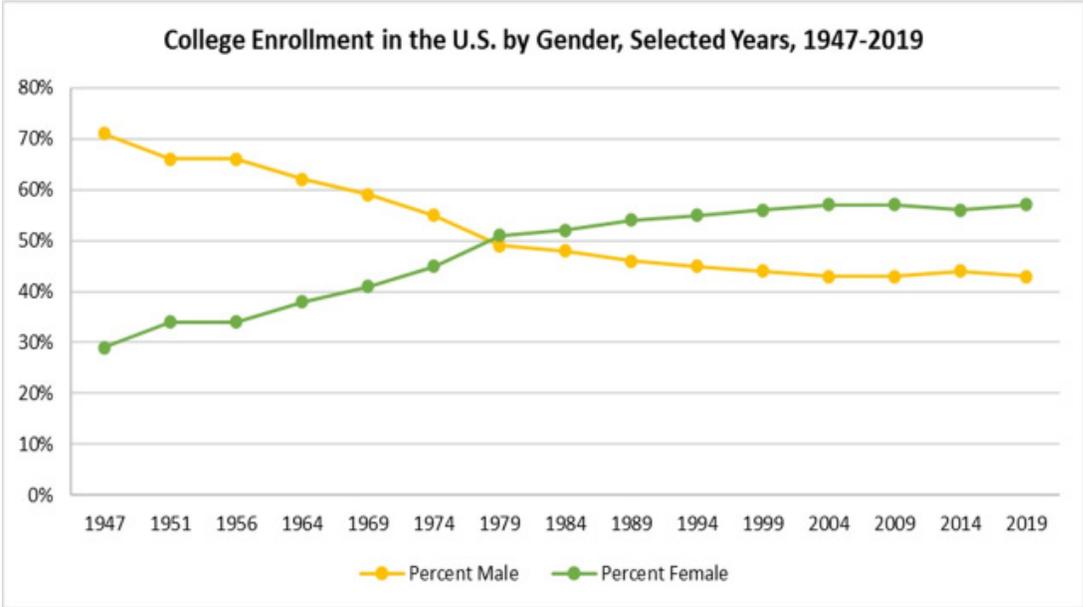
Gender	American Indian	Asian	Black	Hispanic	Mixed Race	White	Total
All Students	1.8%	1.1%	49.5%	12.4%	5.3%	29.8%	110,924
Male Students	1.8%	1.1%	46.6%	12.7%	5.3%	32.3%	77,912
Female Students	1.9%	0.9%	56.3%	11.9%	5.3%	23.7%	33,012

Source: NCDPI Statistical Profile

MINORITY MALES IN HIGHER EDUCATION

Across the U.S., the gender ratio in higher education has hovered around 60 percent female / 40 percent male since around 1979 (Figure 14). The fact that males in general are doing poorly in America today, plagued by education and skills mismatches, disabilities, and incarceration, is the primary reason for this shift from a historically male-dominated to a female-dominated higher education system (Lukas, 2016; Chira, 2016a,b; Graham, 2017). For students of color, the gender gap is wider than it is for all students (McBride, 2017).

Figure 14



Source: National Center for Education Statistics

In the UNC system, American Indian and Black student enrollment was 37 percent and 36 percent male, respectively, in 2019 (Figure 15). Males were similarly under-represented in enrollment in the UNC System’s Minority Serving Institutions (MSIs) and Historically Black Colleges and Universities (HBCUs)—hovering around 35 percent on these campuses (Figure 16).

Figure 15

Male Undergraduate Enrollment by Race/Ethnicity, UNC System, 2019

Race/Ethnicity	Percent Male	Total Enrollment
American Indian/Alaskan Native	 37.3%	1,680
Asian	 47.5%	8,437
Black or African American	 36.4%	39,921
Hispanic or Latino	 41.7%	14,648
Native Hawaiian/Pacific Islander	 47.3%	146
Nonresident Alien	 56.0%	3,204
2 or more races	 40.8%	8,158
White	 44.9%	104,264
Race/ethnicity Unknown	 46.4%	4,273

Source: UNC System Data Dashboard

Figure 16

UNC System Total Enrollment by Type of Institution & Gender, 2019

Type of Institution	Percent Male	Total Enrollment
UNC System	 42.5%	228,936
PWIs	 44.5%	143,508
MSIs	 35.3%	39,663
HBCUs	 34.8%	32,084

Source: UNC System Data Dashboard

Predictably, the gender disparity in enrollment predisposed a similar disparity in degrees awarded in the UNC System. Over the 5-year period between 2014-15 and 2018-19, the system awarded 45,260 more degrees to women (160,587) than to men (115,327) (Table 6). During this period, 15,233 more degrees were awarded to black women (30,394) than black men (15,161) (Table 7).

Table 6: Degrees Awarded by Gender, UNC System, 2014-2019

Year	Male	Female	Difference
2018-19	24,167	34,245	10,078
2017-18	23,513	32,797	9,284
2016-17	22,940	32,362	9,422
2015-16	22,682	30,979	8,297
2014-15	22,025	30,204	8,179
5-Year Total	115,327	160,587	45,260

Source: The UNC Data Dashboard

Table 7: Degrees Awarded to Blacks by Gender, UNC System, 2014-2019

Year	Male	Female	Difference
2018-19	3,225	6,453	3,288
2017-18	3,184	6,169	2,985
2016-17	2,961	6,186	3,225
2015-16	2,891	5,853	2,962
2014-15	2,900	5,733	2,833
5-Year Total	15,161	30,394	15,233

The gender ratio imbalance in college enrollment and degrees awarded, which originates in the K-12 education and criminal justice systems' disparate treatment of males of color, has enormous implications for marriage, family formation, and wealth accumulation in our state and the nation more generally. Simply put, due to gender disparities in higher education enrollment and graduation rates, the ratio of eligible marriageable males and eligible marriageable females is misaligned (Raspberry, 1985; Sawhill, 2015).

Moving forward, if the goal is to have stable, two-wage earner families and healthy communities that serve as crucibles for successful child development and wealth accumulation, we must devise strategies to address the so-called "wayward sons" problem in our state (Autor and Wasserman, 2013; Sherman, 2017; McBride, 2017). There are far too many black boys falling through the cracks of the K-12 education system, all too often ending up ensconced in the criminal justice system—the scarlet letter of un-employability (Cooper, 2018).

RECOMMENDED EQUITY & INCLUSION TOOLS

To address these geographic and demographic equity concerns, the state should develop a roadmap for inclusive and equitable development that:

- Offers incentives to encourage both primary and return migration to the state’s declining counties. Other states and communities are offering relocation expenses, tax credits, forgivable mortgages, student loan repayment, cash and land to attract talent (see Johnson, 2020). Given the pandemic-induced shift to remote work and the growing demand for more residential space to accommodate social distancing, this is the ideal time to pursue such a strategy, especially if done in tandem with build out of broadband infrastructure. Research suggests that millennials with young children and individuals with aging family members in these counties might find such incentives attractive (Johnson, 2020).
- Embraces recent proposals to establish a place-based visa program under which visas would be granted to communities that are struggling economically (Ozimek, Fikri, and Lettieri, 2019). Under one such proposal, “communities could request immigrants with skills in certain fields and applicants would be eligible for a green card after three years if they stay in the community, five if they move” (Thompson and Gamboa, 2020; Kenny, 2020). Such a program would not only enhance population growth in declining counties; it also would help rural health care systems address their unmet demand for skilled health professionals and leverage the entrepreneurial acumen of immigrants to grow local businesses and create jobs in other economic sectors as well.
- Ensures that all development and redevelopment activities align to the maximum extent possible with the triple bottom line principles of sustainability; that is, does no harm to the environment and natural resources, adheres to principle of social justice and, in the process, returns equitable shareholder/stakeholder value.
- Pursues a ‘new’ New deal style infrastructure development and redevelopment program that focuses on fixing not just roads, bridges, and broadband access issues. But, also, sick buildings—aging and structurally deteriorating houses, schools, and public venues that expose children and families to a host of environmental hazards (mold, mildew, asbestos, and lead) that suppress the immune system and create racially disparate vulnerabilities and outcomes to life-threatening events like the coronavirus pandemic (Johnson and Davis, 2020).
- Creates an inclusive supply chain management system that levels the playing field for historically underutilized businesses that aspire to access government contracts to fix deteriorating space and places in the state, especially in counties experiencing population decline (Johnson, 2019).

- Dismantles barriers to educational and economic participation that are the product of discriminatory policymaking, especially in the areas of crime and criminal justice, which disproportionately affect people of color in general, and black males in particular. Focus on eliminating barriers to occupational licensing, banning employment credit checks, expunging and sealing criminal records, driving privilege restoration, and abolishing Black and ethnic names discrimination in employment.
- Creates a mental wellness program for the population experiencing demographic depression.
- Continues to lobby for Medicaid expansion.
- Explores inclusionary zoning as a means to eliminate hyper-segregation and concentrated poverty (Tuller, 2018).
- Leverages social impact investing and the diverse set of financial tools to fund these initiatives, including federal, state, local, philanthropic, and private sources of capital—traditional as well as new sources that are emerging in response to the pandemic and the Black Lives Matter protest movement (Johnson and Bonds, 2020b).

If we utilize these tools and pursue these strategies with dogged tenacity, the state of North Carolina can become the envy of the nation as the place to live, work, play, and do business — a place where equity, inclusion, and belonging are the new normal.

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