BLACK CHARLOTTEANS AGENDA

Dear Public Servant:

We are pleased to present to you the **Black Charlotteans Agenda ("the Agenda")**. This Agenda was created utilizing data and lived experience of thousands of Black Charlotteans who have given feedback, so you can represent Black Charlotteans' needs and interests with real information and intention.

In this Agenda, you will find data and information about Black Charlotteans' needs and requests for action. Through community-led town halls, phone banking, and social media calls to action, residents shared stories of resilience, frustration, and hope. They shared concerns regarding leadership's investment of their tax dollars into companies and plans more than people. They spoke of systems that are hard to navigate, resources they are unaware of and/or seem out of reach, and institutions that often make decisions about communities instead of with communities.

Black Charlotteans also offered solutions, practical and achievable steps that can strengthen trust and improve lives through visible, meaningful, and long-lasting change.

Indeed, the priorities contained in this Agenda are directly from your constituents and have a significant impact on the lives of Black residents. There were 31 priorities formulated. Of the 31 priorities, the following are the top three:

1. **Housing & Displacement;**
2. **Education & Training; and**
3. **Healthcare Access**

This Agenda provides details of each priority and outlines solutions organized into actions that can be initiated now, continued over the next year, and evolve into long-term collaborative reform.

This is not yet another study or report. This is a roadmap for change and progress to achieve better results for Black Charlotteans.

BACKGROUND & COMMUNITY PROCESS

The Black Charlotteans Issue Survey and accompanying Town Hall Series represent a citywide effort to document the priorities, lived experiences, and policy demands of Charlotte's Black residents.

Developed through nine months of community collaboration — including six months of active implementation and three months of planning — this effort was led by For The Struggle, Inc. in partnership with local organizations, faith leaders, educators, and residents who believe that real change begins with the people most affected. Over the past six months, For The Struggle and numerous community partners have worked collectively to ensure the process of collecting information to formulate this Agenda was data-informed and people-centered.

Through a combination of surveys, community outreach events, neighborhood-based listening sessions, and social media, we engaged more than 4,500 Charlotte residents — including youth, elders, educators, entrepreneurs, community leaders, and everyday residents.

Teenagers in For The Struggle's SaluteU Program played an intricate role in supporting outreach and discussions during Town Halls. They led their own community session and participated in the facilitation of others. Accordingly, this Agenda indeed reflects the voices of Black children and adult residents of Charlotte.

BACKGROUND & COMMUNITY PROCESS

This Agenda was made possible through partnership with organizations such as the Beloved Community Center, Black Voters Matter, The Charlotte Observer, Democracy North Carolina, First Baptist Church West, Hoskins Avenue Baptist Church, the Queen City Chapter of the National Coalition of 100 Black Women, SEAC Village, and dozens of civic, faith, and neighborhood leaders who opened their doors and shared their insights.
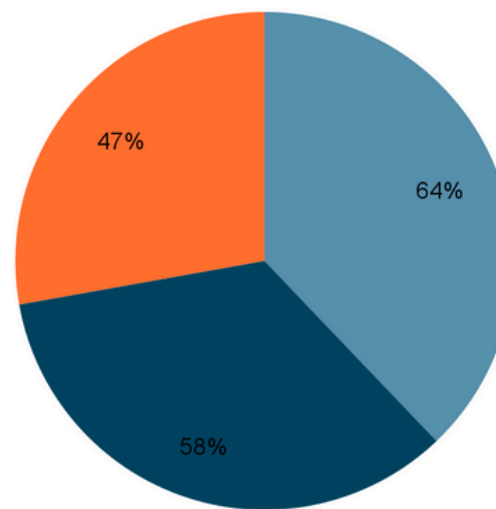
Of those who participated, 50% identified as women and 27% as men. Participants represent residents from more than a dozen ZIP codes across Charlotte, including (in order from most represented to least represented) 28216, 28269, 28208, 28214, 28215, 28262, 28212, 28273, and 28213.

The largest group of participants were residents between the ages of 35 and 54, reflecting a cross-section of working adults, parents, and community leaders. Each priority theme included in this Agenda — Housing & Displacement, Education & Youth Opportunities, and Healthcare Access — reflects both quantitative data from surveys and qualitative insights from community conversations.

Top Issues Noted by Black Charlotteans

* Percentages reflect the share of respondents who selected each issue as a top priority. Because participants could identify more than one concern, totals exceed 100%.

For example, 64% of respondents named housing and displacement as their top concern, followed by 58% who prioritized education and youth opportunities, while 47% emphasized healthcare access, particularly in relation to behavioral health, maternal health, and trusted, community-based care.

By grounding these priorities in both community voice and verified local data (sources include: City of Charlotte, Mecklenburg County, Charlotte-Mecklenburg Schools, QCityMetro, The Charlotte Observer, WFAE, and Axios Charlotte), this Agenda positions Black Charlotteans not merely as stakeholders, but as co-authors of Charlotte's future.

METHODOLOGY & DATA INTEGRITY

Data from the Black Charlotteans Issues Survey (276 online responses) and the phone banking survey (195 recorded responses) were coded and analyzed alongside detailed notes and transcripts from three community town halls (125 attendees).

Five hundred ninety-six residents provided recorded responses through written or digital data collection. The qualitative data — including direct quotes, town hall transcripts, and thematic analysis — were used to contextualize the numbers and elevate the lived experiences behind them. This mixed-methods approach ensures that every recommendation in this document is grounded in what residents said in the room, online, and on the phone.

COMMUNITY DATA SNAPSHOT

More than 1,100 Black Charlotte residents participated in the Black Charlotteans Issue Survey, phone banking, and town hall series.

Of these, 596 residents provided recorded responses through written or digital data collection, which form the basis of this Agenda's findings.

Participant Demographics
Gender Breakdown | Women: 50% | Men: 27% | Other / Prefer not to say: 23%

Age Range	Percent of Participants
18–24	8%
25–34	19%
35–44	23%
45–54	25%
55–64	15%
65+	10%

COMMUNITY DATA SNAPSHOT

Top ZIP Codes Represented

28216 • 28269 • 28208 • 28214 • 28215 • 28262 • 28212 • 28273 • 28213

What Matters Most

When asked to identify their top priorities, participants named five consistent areas across all forms of engagement:

Priority Area	% of Respondents Selecting as Top Concern*
Housing & Displacement	64%
Education & Youth Opportunities	58%
Healthcare Access	47%
Economic Mobility	39%
Community Voice & Trust in Leadership	32%

* Percentages reflect the share of respondents who selected each issue as a top priority. Because participants could identify more than one concern, totals exceed 100%.

THE PRIORITIES

Each elected body, the Charlotte-Mecklenburg School Board, the Mecklenburg County Commission, and the Charlotte City Council, has a unique role in addressing the priorities. For each, the Agenda identifies three levels of action:

- Immediate Actions that can be implemented now to provide visible, short-term relief.
- Near-Term Actions achievable within 6 to 12 months that build on existing programs and partnerships.
- Structural/Collaborative Actions that require partnership across government and community, including joint advocacy in Raleigh, to create long-lasting policy and power.

These recommendations represent more than a list of issues. They form a community mandate — rooted in both data and dignity — to make Charlotte a city where Black residents can not only survive, but thrive.

PRIORITY 1: HOUSING & DISPLACEMENT
Recommendations for Charlotte City Council

The lack of housing stability remains the single most urgent issue identified by participants across the Black Charlotteans Issue Survey and Town Hall Series. Sixty-four percent of participants named housing and displacement as their top concern, describing a crisis defined by rising rental and purchasing costs, inaccessible resources, corporate ownership, development and growth at the expense of residents, and limited protection for both tenants and long-term homeowners.

Residents noted that Charlotte's definition of 'affordable housing' remains out of reach for most working families. Several cited $17/hour as the minimum income needed to survive in the city — a figure consistent with recent living-wage data for Mecklenburg County.[1]

Participants described a cycle where rental costs increase without upgrades, property taxes rise faster than wages, and programs designed to help are too fragmented, confusing, or depleted to make an impact.

Many shared personal experiences of landlords exploiting loopholes, inaccessible programs like House Charlotte and 211, and corporate developers displacing historically Black neighborhoods for new construction.

Across every town hall, the same message was clear: people are not looking for charity — they are asking for fairness, enforcement, and a system that keeps them rooted where they are established and call home.

[1] *Source: Massachusetts Institute of Technology (MIT) Living Wage Calculator, 2024. Mecklenburg County, NC. A living wage for a single adult with no children is estimated at $17.12/hour. For a single adult with one child it is estimated to be $36.80/hour. These findings are consistent with data from the North Carolina Justice Center and United Way of Central Carolinas on cost-of-living thresholds in the Charlotte region.*

PRIORITY 1: HOUSING & DISPLACEMENT
Recommendations for Charlotte City Council

1 Immediate – Housing Stability Network

What It Looks Like:

Create a Housing Stability Network that integrates Right-to-Counsel, Tenant Education, and Community Navigators into a single coordinated system to prevent displacement before it occurs.

This approach addresses the full lifecycle of housing instability — from early prevention to emergency response — by connecting residents to information, legal protection, and meaningful assistance in one place.

The Network should include:

- Right-to-Counsel representation for tenants facing eviction, foreclosure, or unsafe housing conditions.
- Tenant education workshops that teach residents about leases, landlord accountability, and fair-housing rights.
- Housing and health navigators drawn from trusted community organizations (e.g. Block Love CLT, Freedom Fighting Missionaries, Leah's Hopes & Dreams, West Side Community Land Trust, and For The Struggle) to provide warm handoffs to housing-related issues such as rental assistance and mortgage/property tax assistance, as well as healthcare access and navigation and assistance with obtaining gainful employment.
- A 24-hour intake line and shared referral database connecting City, County, and nonprofit partners.

This system ensures that residents can access help before eviction filings, during crises, and after displacement — without needing to "know someone on the inside."

Next Steps: City and County leaders should jointly fund a pilot Housing Stability Network serving three high-displacement corridors. The program should track dollars spent as well as outcomes such as evictions prevented, residents rehoused, and emergency funds distributed.

PRIORITY 1: HOUSING & DISPLACEMENT
Recommendations for Charlotte City Council

What Residents Said

- "People just need someone to help them before they lose everything." (Town Hall 3)

- "The help is out there, but you have to know the right person to call — and most people don't." (Town Hall 2)

- "Programs say they exist, but when you get there, they don't have anything." (Town Hall 1)

2 Near-Term – Anti-Displacement Guarantees in Development Projects

What It Looks Like:

Require that all major development and transit projects include enforceable anti-displacement and right-to-return provisions co-designed with affected residents before approval.
These protections ensure that residents displaced by redevelopment — especially seniors, renters, and long-time homeowners in historically Black neighborhoods — have both the option and the means to return home once new projects are completed.

To prevent displacement patterns, including those seen in the Earle Village redevelopment (where only 12% of families were able to return), City Council should establish community-led accountability mechanisms to monitor these commitments from planning through occupancy.

Anti-displacement guarantees should be a condition of rezoning or incentive approval, including:

- **Right-to-return clauses and temporary relocation stipends** for displaced households.

- **Affordable housing set-asides** tied to Charlotte's actual living-wage standard ($17/hour).

- **Displacement Impact Assessments** before major projects break ground — identifying risk corridors and mitigation strategies early.

- **Resident Advisory Panels** with representation from the affected ZIP codes to review and track compliance alongside staff.

Grounding in Practice: Cities such as Portland, OR, Austin, TX, and Somerville, MA have implemented similar anti-displacement frameworks that require community benefit agreements, relocation assistance, and "no net loss" housing provisions for large-scale projects. These examples demonstrate that with clear standards and community oversight, anti-displacement guarantees can be both enforceable and effective.

PRIORITY 1: HOUSING & DISPLACEMENT
Recommendations for Charlotte City Council

2 Near-Term – Anti-Displacement Guarantees in Development Projects

Next Steps: City Council should adopt a formal Anti-Displacement Review Process for all major development and transit projects. This process must include both a Displacement Impact Assessment and a Community Accountability Review before approval.

Rather than being co-governed by institutional actors, this process should be community-led with government participation. A Resident Accountability Council, composed primarily of residents from impacted ZIP codes, supported by trusted grassroots organizations, would review proposed projects, track compliance with right-to-return provisions, and issue public recommendations prior to any Council vote.

City staff and developers would serve in supporting roles: providing data, responding to findings, and demonstrating how community feedback shaped project design. To maintain transparency, the City should publish an annual Anti-Displacement Accountability Report detailing relocation outcomes, affordable housing replacements, and community benefit metrics verified by the Resident Council.

Community Mandate: With Us, Not For Us

Neighborhood leadership: Hidden Valley Community Association and West Boulevard Neighborhood Coalition have publicly supported enforceable anti-displacement standards and right-to-return provisions.

What residents asked for: "With us, not for us" was a consistent theme across town halls—calling for co-governance, not one-way consultation.

What this Agenda advances: Concrete mechanisms that increase resident access to government (co-design of project conditions, displacement impact assessments before approval, public reporting of relocations/returns, and clear enforcement triggers).

Why it's feasible: These measures mirror national best practices (relocation assistance, right-to-return, CBAs, displacement impact reviews) already used in peer cities.
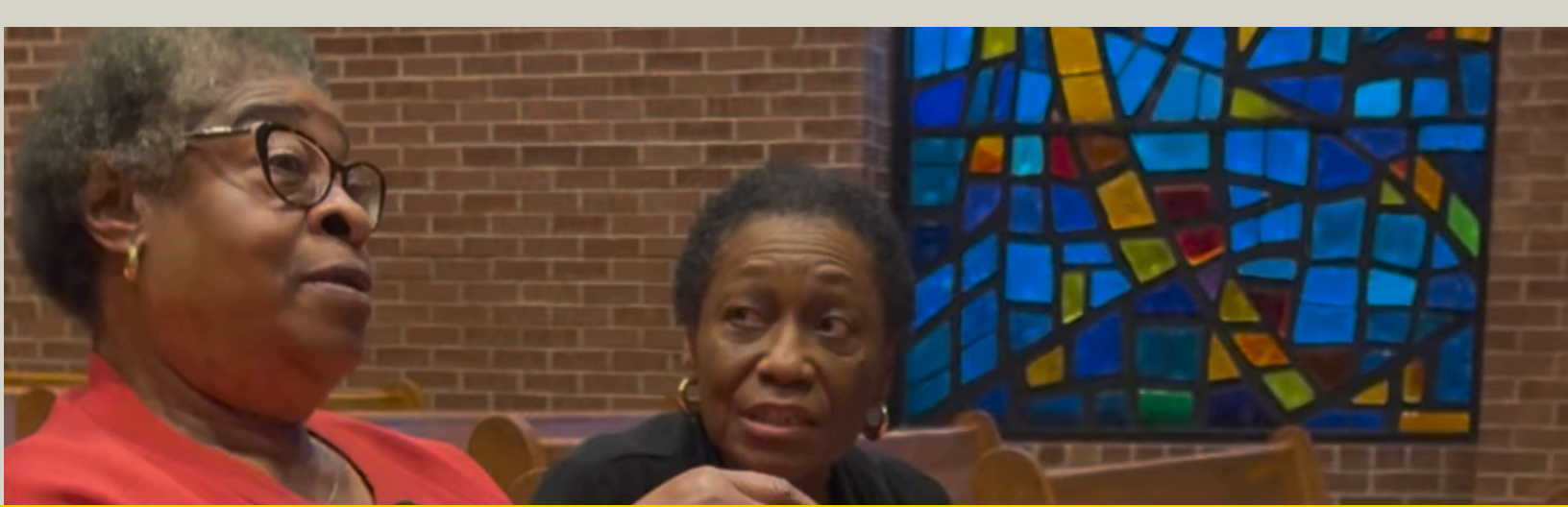
PRIORITY 1: HOUSING & DISPLACEMENT
Recommendations for Charlotte City Council

Why Community Leadership Matters

Charlotte has seen what happens when redevelopment proceeds for residents instead of with them.

- During the 1990s Earle Village redevelopment, families were promised the right to return to new mixed-income housing.
- Of the 400 households displaced, only 44 — roughly 12 percent — came back once construction was complete.
- The number of affordable units was cut nearly in half.

This history underscores a simple truth repeated throughout the town halls: "With us, not for us." The proposed Anti-Displacement Guarantees directly responds to that call by putting residents and neighborhood leaders in governing roles, helping shape, approve, and monitor anti-displacement measures from start to finish.

What Residents Said:
- "If you're going to build it, make sure we can stay here to see it." (Town Hall 3)

- "The city keeps approving new buildings, but we're the ones being moved out." (Town Hall 1)

- "Property reassessments make it impossible for older people to stay in the homes they already paid for." (Town Hall 1)
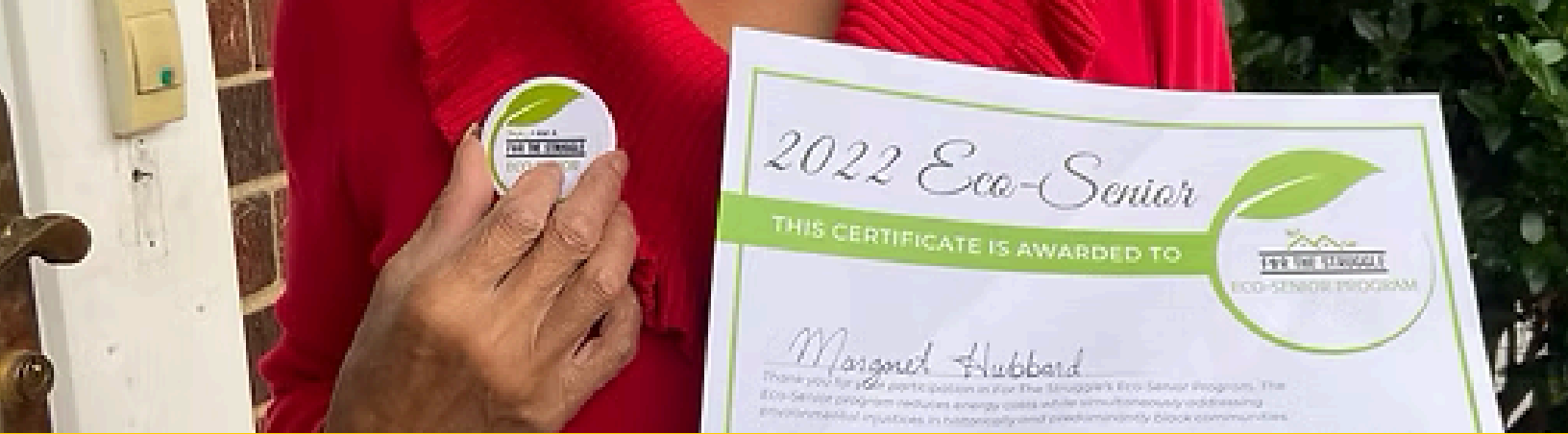
PRIORITY 1: HOUSING & DISPLACEMENT
Recommendations for Charlotte City Council

3 Structural/Collaborative – City–County–Community Housing Compact

What It Looks Like:

Form a Resident-Led Housing Stability Compact to unify Charlotte's fragmented housing ecosystem under one coordinated system, governed by community members with lived experience of housing instability, displacement, or homelessness. Unlike current institutional efforts driven primarily by corporate and nonprofit leadership, this Compact would be community-powered and co-designed from the ground up. The City and County would serve as resource partners, aligning funding and data, while residents drive priorities, oversee accountability, and define success measures.

The Compact would bring together:

- **Resident Delegates:** selected from ZIP codes most impacted by displacement and housing insecurity (e.g., 28208, 28216, 28205, 28212).

- **Grassroots Housing Partners:** including land trusts, legal aid providers, neighborhood associations, faith-based coalitions, and non-profits that are on the ground and located in impacted communities.

- **Government Representatives:** including an elected official from each governing body, as well as public servants from the City's Housing & Neighborhood Services and Mecklenburg County Community Support Services departments who will serve in a facilitative role rather than as chair or lead.

3 Structural/Collaborative – City–County–Community Housing Compact

Together, the Compact would:

- Align eviction prevention, rental support, and affordable housing programs into a single, accessible navigation network.

- Identify and address service duplication by coordinating data across City, County, and nonprofit systems.

- Establish transparent criteria for funding, prioritizing resident-led and Black-led organizations already serving high-need corridors.

- Lead a joint advocacy agenda in Raleigh — developed and presented with residents, not on their behalf — focused on:
  - Funding for legal service providers to protect renters from unlawful evictions.
  - Stronger tenant protections and accountability for corporate landlords.
  - Post-eviction record relief for residents rebuilding stability.
  - Expanded behavioral and preventive health coverage under Medicaid to reduce homelessness linked to untreated illness.

3 Structural/Collaborative – City–County–Community Housing Compact

Next Steps: Appoint a Resident-Led Steering Council to guide the formation of the Compact, ensuring at least 50% of members are directly impacted residents.

- The Council should meet quarterly to review coordination progress, track equity outcomes, and issue public reports.

- Government and institutional partners should provide technical support, data sharing, and administrative staffing, but may not chair the body or control the agenda.

- Launch a public-facing Housing Stability Dashboard — co-managed by residents — to track funding, outcomes, and accountability across agencies.

What Residents Said:

- "Our housing help is siloed. We need one coordinated system that actually works." (Town Hall 3)

- "We want you to go to Raleigh with us, not for us." (Town Hall 3)

- "People shouldn't have to know someone inside the system just to get help." (Town Hall 2)

PRIORITY 1: HOUSING & DISPLACEMENT
Recommendations for Charlotte City Council

HOW THIS DIFFERS FROM EXISTING INITIATIVES

Charlotte's A Home for All framework laid an important foundation by aligning major institutions, funders, and nonprofits to address homelessness and housing instability.

However, residents made clear that coordination without shared power leaves critical gaps — especially in trust, access, equity, and accountability.

The Resident-Led Housing Stability Compact strengthens and extends this work by shifting who leads and how decisions are made.

A Home for All	Resident-Led Housing Stability Compact
Led by institutional partners (health systems, corporate leaders, nonprofits)	Governed by residents with lived experience and grassroots housing leaders
Focused on system alignment and funding coordination	Focused on co-governance, transparency, and lived-experience accountability
Decisions made by appointed executives and technical experts	Decisions made through a Resident Steering Council with 50%+ directly impacted members
Operates primarily through organizational collaboration	Operates through community power-sharing — residents define priorities, monitor outcomes, and shape advocacy
Success measured by system performance (units, funding, services delivered)	Success measured by community impact (stability, access, right-to-return, reduced displacement)

In short, A Home for All organizes the system. The Resident-Led Housing Stability Compact humanizes it — ensuring that Charlotte's housing future is designed with us, not for us.

Summary

Residents envision a Charlotte where housing stability is the norm, not the exception — where people can stay in their homes, access help easily, and share the benefits of growth.

The Housing Stability Network, paired with anti-displacement guarantees and coordinated governance, offers a roadmap for protecting Charlotte's legacy neighborhoods and keeping Black Charlotteans rooted in place.

PRIORITY 2: EDUCATION & YOUTH OPPORTUNITY
Recommendations for Charlotte-Mecklenburg School Board

Black Charlotteans have marked education as a primary issue for which we seek change. 58% of Black Charlotteans who participated named education as a priority. Residents repeatedly voiced concern that the educational system is not meeting the basic academic, emotional, or cultural needs of their children — particularly as it pertains to serving Black students.

Many noted that too many students are promoted without mastering core reading and math skills, while others described the system as fragmented and difficult for parents to navigate. Parents indicated they often feel blamed for systemic challenges, while teachers described being under-resourced, overworked, and unsupported in trying to close gaps on their own.

Participants request three categories of change:

1. **Immediate** action to accelerate literacy and comprehension;
2. **Near-Term** investment in trades and real-world learning; and
3. **Structural Collaboration** that centers community voice in curriculum and access decisions.

PRIORITY 2: EDUCATION & YOUTH OPPORTUNITY
Recommendations for Charlotte-Mecklenburg School Board

1 Immediate – Literacy & Comprehension Acceleration Initiative

What It Looks Like:

Launch a districtwide literacy and comprehension initiative that pairs evidence-based reading and phonics instruction with embedded math tutoring and wraparound services. Such services include, but are not limited to, guaranteed after-school transportation, meal access, and family engagement sessions that help parents reinforce learning at home.

This effort should prioritize CMS elementary and middle schools with the largest reading and math performance gaps and build upon existing community partnerships with organizations such as churches, nonprofits, and local colleges that already offer tutoring and mentoring. Elementary and middle schools with the lowest performance ratings should be required to participate.

Funding should also be deployed in an equitable fashion to address cultural needs by recruiting and training Black and bilingual tutors, ensuring students see themselves reflected in their educators.

Next Steps: The Board should convene a working session with CMS leadership, PTA councils, and community learning partners to design a pilot in at least three schools before expanding districtwide.

What Residents Said:

- "Too many students are being promoted without demonstrating mastery."

- "After-school programs don't help if students have no way to get there or get home after the program."

- "Help comes too late, too far away, or without the support (like transportation) that make it usable."

(Town Halls 1 & 3)

2 Near-Term – Trades and Apprenticeship Fairs

What It Looks Like:

Host an annual Trade & Apprenticeship Fair at every high school to connect students with local employers, unions, technical colleges, and Black-owned small businesses offering on-the-job training.

The fairs should highlight career pathways that do not require a four-year degree — including construction, energy, information technology, beauty and wellness, health care, and entrepreneurship.

Residents stressed that young people need to see clear routes to stable, respected work and that the City, County, and CMS should jointly promote these opportunities through social media, guidance counselors, and youth programs.

Next Steps: CMS can partner with the City's Youth Employment Program, Central Piedmont Community College, the Urban League, and the North Carolina Department of Commerce to identify partners, secure transportation, and develop metrics to track participation and placement outcomes.

What Residents Said:

- "Not everyone needs to go to college." *(Town Hall 1)*

- "We need to bring back the trades — and the pride that came with them." *(Town Hall 2)*

3 Structural / Collaborative – Community-Led Curriculum & Access Table

What It Looks Like:

Establish a permanent, community-led Education Access and Curriculum Table composed of parents, students, teachers, and local cultural organizations to co-design:

- Culturally relevant curriculum standards, including Black history and character education.
- Equity in access to enrichment, such as field trips, arts programs, and extracurricular activities to ensure cost is never a barrier.
- Family access standards, including translation services, digital equity support, and transparent communication channels between schools and caregivers.

This table should meet quarterly and issue an annual "State of Education Equity" report to the public, CMS leadership, the School Board, and County Commissioners.

If state-level approvals are required to advance a culturally responsive curriculum, the Board should travel to Raleigh with residents, teachers, and students to advocate together — demonstrating a model of shared accountability and partnership.

Next Steps: Invite interested families, educators, and community groups to participate in education design sessions that will help shape the final recommendations for the Access and Curriculum Table's structure and priorities.

What Residents Said:

- "We don't want a seat just to listen — we want a seat to shape what our kids learn."

- "Parents are blamed for kids not being prepared, but we don't even know what's available."

- "Folks don't know what they don't know." (Town Halls 1 & 3)

Summary

Residents want a school system that ensures all children receive and achieve the basics, values culture, and prepares youth for their lives after high school.

These recommendations combine community insights with practical steps that CMS and the School Board can implement immediately — while laying the groundwork for shared power and sustained collaboration in shaping the future of education for Black Charlotteans.

PRIORITY 3: HEALTHCARE ACCESS
Recommendations for Mecklenburg County Commission

Forty-seven percent of participants identified healthcare access — including behavioral and maternal health — as one of their top priorities for change. Across all three Town Halls and the Black Charlotteans Issue Survey, participants described a healthcare system that feels confusing, inaccessible, and untrustworthy, especially for Black residents navigating mental health care, maternal care, and chronic illness.

Many shared frustration over long wait times, denied appointments, and a lack of culturally competent care. Others described the exhaustion of trying to find providers who accept Medicaid or offer services without hidden costs.

Residents want a system that meets people where they are, both literally and emotionally, through trusted messengers, mobile services, and community-rooted providers who understand their lived experiences as Black Charlotteans.

1 Immediate – Community Health Navigator Program

What It Looks Like:

Launch a Community Health Navigator Program that places trained navigators within high-need ZIP codes to help residents access care, insurance, and preventive services.

Unlike existing programs such as Mecklenburg County's Community Health Worker Initiative, navigators should be recruited *from within the community* — including nonprofit organizations that are active in communities and have their trust, barbers, hair stylists, faith leaders, social workers, and neighborhood advocates. For purposes of this initiative, navigators should not be individuals who work for medical institutions that have no existing ties or relationships in communities served. Navigators should be trained to:

- Assist with appointment scheduling, transportation, and insurance enrollment.
- Provide warm handoffs to clinics, mental health providers, and social service agencies.
- Help residents navigate billing, Medicaid renewals, and follow-up care.

This approach builds on successful national models like Durham's Community Health Workers initiative but adapts it to the unique needs of Black Charlotteans.

What Residents Said:

- "It's too hard to figure out where to go or who takes what insurance." (Town Hall 1)

- "We need somebody from the community who knows how to talk to people." (Town Hall 3)

- "I don't trust calling a number and getting bounced around. I want someone who can walk me through it." (Town Hall 2)

PRIORITY 3: HEALTHCARE ACCESS
Recommendations for Mecklenburg County Commission

1 Immediate – Community Health Navigator Program

Next Steps: Mecklenburg County Public Health should identify priority health corridors for the Community Health Navigator pilot and begin with the ZIP codes most represented in this study and most affected by documented health inequities.

Based on the combined findings from the Black Charlotteans Issue Survey, Town Hall participation data, and the County's 2024 State of the County Health Report, the highest-need areas include 28208, 28216, 28205, and 28212.

These ZIP codes emerged repeatedly across datasets as communities experiencing:
- Limited access to healthcare facilities and providers;
- Higher rates of chronic and behavioral health challenges;
- Transportation and language barriers; and
- Economic displacement that compounds health risks.

Each of these ZIP codes also had strong resident participation in the survey and town halls, ensuring that the recommended investments are grounded in both quantitative data and lived experience. Public Health should partner with grassroots organizations already working in these corridors to recruit and train 10–15 community health navigators within the next fiscal year, tracking data on referrals, service uptake, and outcomes to demonstrate impact and secure long-term funding. These must be paid positions. Data on referrals and service uptake should be tracked to demonstrate impact and secure long-term funding.

2 Near-Term – Mobile, Holistic, and Sliding-Scale Clinics

What It Looks Like:

Expand mobile and sliding-scale clinics with a comprehensive focus on behavioral health, maternal health, chronic disease prevention, and holistic wellness.

Residents emphasized the need for clinics that operate within neighborhoods, not just near hospitals or Uptown, and with evening and weekend hours that accommodate working families.

Participants also expressed a strong desire for integrative and culturally rooted health options that teach prevention, holistic wellness, healing, and self-care through lifestyle change and community support.

These clinics should include:

- Behavioral and trauma-informed care integrated with physical health checkups.

- Maternal care units offering prenatal education, doula support, and postpartum counseling.

- Nutrition and lifestyle education programs led by integrative health coaches who can help residents build sustainable habits — including cooking demonstrations, culturally rooted meal planning, and fitness or stress-reduction classes that reflect Black wellness traditions.

- Access to culturally competent providers who understand and respect holistic approaches, including herbal, spiritual, and natural medicine, and can guide residents in safely combining these with traditional care.

- Partnerships with faith institutions, recreation centers, community gardens, and schools to serve as rotating clinic and wellness sites.

- Mobile pharmacy, telehealth, and wellness coaching components to ensure continuity of care for residents without transportation.

- Expanded hours beyond Monday through Friday, 8 a.m. to 5 p.m.

2 Near-Term – Mobile, Holistic, and Sliding-Scale Clinics

These expanded clinics would provide access as well as both clinical and preventive care to meet immediate medical needs while also helping residents prevent and manage disease through education, nutrition, and community healing practices.

Next Steps:

- The County should expand contracts with Atrium Health, Novant, Black-led wellness providers, and community-based health collectives to deploy mobile care teams with expanded hours of operation that include culturally competent nurses, doulas, integrative health coaches, and behavioral health specialists who can provide trauma-informed care. Increased access to these services is imperative.

- By 2026, Mecklenburg County should fund at least two new neighborhood-based clinics that integrate preventive, clinical, and holistic wellness services. City partners can support through facility permits, communication, and transportation coordination.

What Residents Said:

- "If you can bring vaccines to the barbershop, you can bring mental health to the neighborhood." (Town Hall 3)

- "We shouldn't have to take three buses to see a doctor." (Town Hall 1)

- "Black women are still losing their babies because no one listens to them." (Town Hall 1)

- "We want to learn how to heal ourselves — how to eat, move, and live in a way that keeps us well." (Town Hall 3)

3 Structural/Collaborative – Neighborhood Healing Hubs

What It Looks Like:

While the Mobile and Holistic Clinics focus on bringing preventive and clinical care directly into neighborhoods, the Neighborhood Healing Hubs would provide ongoing, community-based spaces for emotional, spiritual, and collective healing to ensure residents have both access to care and space to recover.

Each Hub should include:

- Therapy and counseling spaces operated by licensed clinicians and Black-led practices.

- Peer-led healing circles addressing grief, stress, and trauma related to community violence, reentry, caregiving, and displacement.

- Wellness education programs focused on nutrition, movement, meditation, art, and stress reduction — blending clinical and cultural healing traditions.

- Integrative health coaching and holistic support to help residents learn sustainable wellness practices that align with their culture and daily lives.

- Partnerships with schools, reentry programs, and workforce centers to embed healing practices into everyday community life.

This model reflects what residents described as a need for "spaces to heal, not just talk." It acknowledges that healing happens not only in hospitals or clinics, but also through community connection, culture, and continuity of care.

What Residents Said:

- "We want places where we can talk and heal without judgment." (Town Hall 3)

- "Health care isn't just about a doctor — it's about community." *(Town Hall 2)*

- ""Mental health and safety go together. If people had help, there'd be less violence." (Town Hall 3)

3 Structural/Collaborative – Neighborhood Healing Hubs

Next Steps: The County should pilot two Neighborhood Healing Hubs — one on Charlotte's Westside (28208/28216) and one in East Charlotte (28212). The recommendation is based on both resident participation data and Mecklenburg County health equity indicators showing higher rates of preventable disease, behavioral health needs, and barriers to care in these ZIP codes.

The 28208/28216 corridor reflects historic displacement, aging housing stock, and concentrated poverty that impact long-term health outcomes. Meanwhile, 28212 represents one of Charlotte's most diverse and under-resourced areas where residents face language barriers and lack accessibility to neighborhood clinics.

Launching the pilot in these two communities ensures that the model is tested in areas with distinct yet interconnected challenges representing legacy Black neighborhoods and reflecting Charlotte's growing multicultural Black population.

These Hubs should be developed in partnership with Black-led mental health organizations, faith groups, and community-based nonprofits. They can also serve as training and certification sites for health navigators, peer counselors, and integrative wellness coaches to create a sustainable community-rooted workforce pipeline that reflects the culture and needs of Charlotte's Black residents.

Summary

This feedback reveals a community deeply invested in housing stability, education equity, and access to trusted healthcare. All feedback is united by a shared desire for systems that empower and truly serve Black Charlotteans.

■ COMMUNITY VOICE HIGHLIGHTS

"We keep hearing about affordable housing, but no one can tell us what affordable really means in Charlotte."
— Town Hall 1

"Landlords raise rent but never fix anything. If they're going to increase the rent, we should at least see upgrades."
— Town Hall 1

"Programs like 211 exist, but when you call, they don't have anything to give. The help is there on paper, but not in real life."
— Town Hall 1

"The same neighborhoods keep getting all the affordable housing. That's how you create segregation by affordability."
— Town Hall 2

"Teachers are trying, but they don't have what they need. Some of us are creating mentorship programs on our own time."
— Town Hall 2

"Our kids are being pushed through school without learning the basics. They need trades, not just tests."
— Town Hall 2

"The healthcare system is so confusing that people just give up. We need someone who can walk with us through it."
— Town Hall 3

"It shouldn't take months to see a therapist. We need mental health services in our neighborhoods, not just downtown."
— Town Hall 3

"People are tired of government showing up when it's time to vote. Show up when we need help, not just when you need something."
— Town Hall 3

A PATH FOWARD

To move from vision to action, Black Charlotteans request convening a Joint Policy Roundtable in early 2026, co-hosted by community representatives and the three elected bodies. The purpose:

- Review and refine the recommendations in this Agenda into measurable deliverables.
- Identify existing funding or policy tools for immediate implementation.
- Plan a Joint Trip to Raleigh to advocate together for shared state-level priorities.

If we build it together, we'll believe in it and fight for it . . . together.

Prepared by:

Black Charlotteans Town Hall Planning Team
For The Struggle, Inc. | Community Partners and Residents of Mecklenburg County