



2020 Community Needs Assessment Report

Adopted by the Thrive Virginia Board of Directors June 17, 2020

This Community Needs Assessment Report addresses the service areas of Caroline County, Charles City County, Hanover County, King George County, King and Queen County, King William County, New Kent County, Spotsylvania County, Stafford County, and the City of Fredericksburg.

www.thriveva.org

Introduction

Thrive Virginia is a 501c3 non-profit that was founded in 1970 as part of the Economic Opportunity Act to fight poverty. For the past fifty years, Thrive Virginia has supported the well-being of families to ensure that all area residents can reach their full potential and contribute to their communities. By maximizing the well-being of all, Thrive Virginia helps our communities thrive.

Thrive Virginia employs a whole-family approach which identifies the risk factors that undermine a family's overall well-being; we then work with families to solve problems, access resources, and sharpen existing skills. Thrive Virginia focuses on early childhood development, access to post-secondary education opportunities, economic asset growth, optimal health and well-being, and social capital.

Poverty in the United States is far-reaching and damaging. Evidence has shown that the neighborhoods we live in shape our health, our prosperity, and our children's educational success. As one of 1,100 Community Action Agencies within the National Community Action Network, Thrive Virginia continues to be responsive to critical community challenges and ever-changing needs.

The 2020 Community Needs Assessment Report is one tool in helping our organization respond to these challenges and ever-changing needs. Community indicators are critical components of any effort to understand how our communities are progressing in particular areas. In this report, you will find quantitative and qualitative data for Thrive Virginia's footprint.

Four components make up the quantitative data section of the report: basic needs, health and well-being, education and employment, and financial well-being. By zeroing in on these specific areas and the data behind them, Thrive Virginia can address systemic problems to provide everyone with a clear path to success.

Thrive Virginia's tripartite Board of Directors is comprised of sixteen volunteers from three categories: elected officials, private industry, and persons with experience living in poverty. Our directors care for our service area because it is their home.

On behalf of Thrive Virginia's Board of Directors, we would like to thank the numerous community partners who assisted in this community needs assessment process.

Caroline County Department of Social Services
Caroline County Library
Central Rappahannock Regional Library - Salem Church Branch
Charles City County Civic League
Charles City County Department of Social Services
Charles City County Public Library
Charles City Regional Health Services
Charles City County Public Schools
Chickahominy Health District
Cornerstone Support Services
Emmaus Baptist Church
Fredericksburg Regional Food Bank
Gilfield Baptist Church
Hanover County Department of Social Services
Henrico Area Mental Health & Developmental Services

King & Queen County Department of Social Services
King George County Department of Social Services
King William County Department of Social Services
L. E. Smoot Memorial Library
Lebanon Baptist Church
Little Elam Baptist Church
New Kent County Department of Social Services
Pamunkey Regional Library
Parrish Hill Baptist Church
Rappahannock Area Community Services Board
Rappahannock Health District
Rappahannock Community College
Stafford County Department of Social Services
Virginia Affordable Housing Management Corporation
Virginia Workforce Center
West Point Christian Church

Thrive Virginia

Our Vision, Mission, and Core Values

Our Vision:

Community residents are empowered to reach their full potential.

Our Mission:

We collaborate with community-based partners to create pathways to self-sufficiency for individuals and families within our diverse service area.

Beliefs, Values, and Guiding Principles:

We treat everyone with dignity and respect.

We are committed to serving and advocating for families and individuals in need.

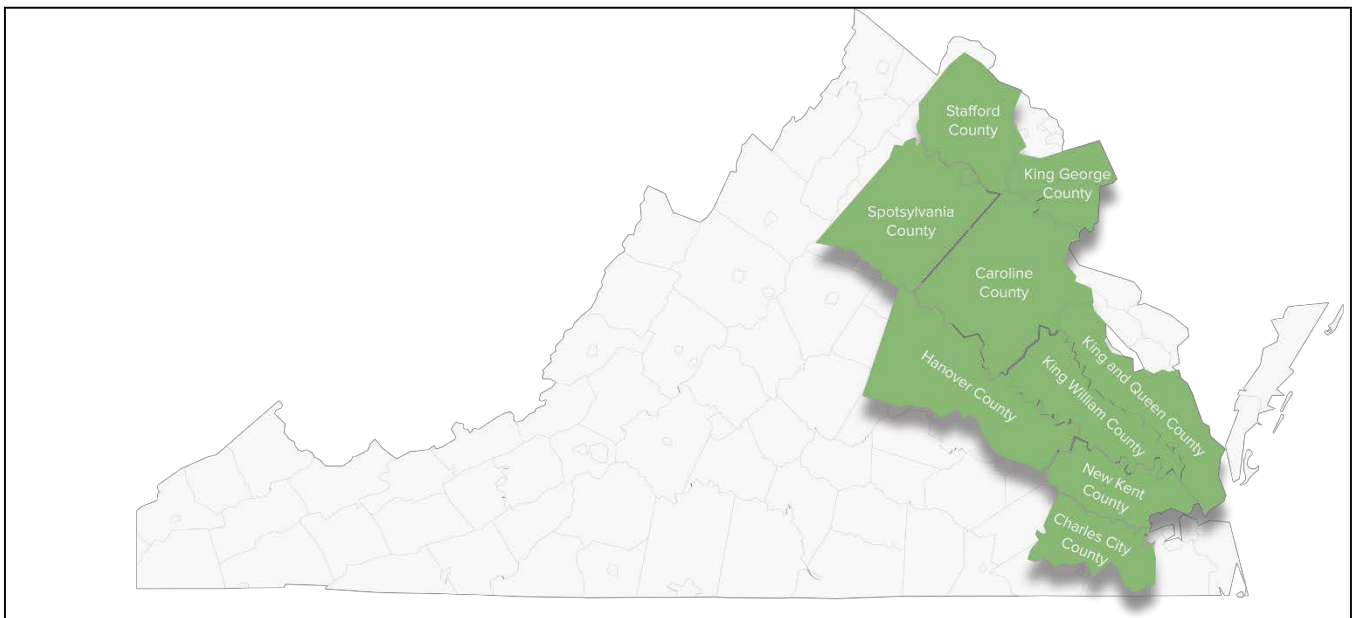
We work with community partners and collaborators to strengthen families and other support systems for all populations who need our services. We promote self-determination and access to economic opportunity.

We conduct our business with strong ethical values. These values include honesty, respect, trust, responsibility, fairness, and cultural competency.

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Thrive Virginia's Service Area



Community Profile

Thrive Virginia's footprint covers approximately 2,000 square miles and is home to 509,050 individuals. Forty percent of our service area is considered rural, according to the United States Census.

Demographics:

Notable demographic characteristics for the Thrive Virginia service area consist of the following:

- In general, Thrive Virginia's service area has more households with a high income and fewer families with a low household income than Virginia and the United States.
- Persons aged 45 to 54 make up the most significant percentage of Thrive Virginia's service area at fifteen percent.
- Racial demographics are as follows:
 - 74% White
 - 16% Black or African American
 - 2% Asian
 - 4% Two or More Race
 - 3% Other
- Seven percent of the population is Hispanic or Latino.
- Twenty percent of households are single-parent households.
- Ten percent of the population is disabled.
- Fourteen percent of the population are veterans.

Thrive Virginia's service area is more rural and less urban than the Virginia and United States averages. Three counties in the service area are considered 100% rural: Charles City, King and Queen, and New Kent.

Age and race rates are very similar to that of Virginia and the United States. The service area has an overall lower percentage of Hispanic or Latino residents than the Virginia or United States averages.

The City of Fredericksburg has the highest percentage of single-parent households, while New Kent and Hanover have the lowest. The Thrive Virginia service area has a lower rate of single-parent families than Virginia or the United States.

Charles City has the highest rate of disability, while Stafford has the lowest. The Thrive Virginia service area has a slightly lower rate of disability than Virginia or the United States.

Stafford has the highest rate of veterans at almost 20%. The Thrive Virginia service area has an overall higher rate of veterans than Virginia or the United States.

Poverty Trends:

Notable poverty-related characteristics for the Thrive Virginia service area consist of the following:

- 34,762 people live in poverty.
- 12,818 children live in poverty.
- An estimated 1,527 people are homeless.
- 40,724 people are food insecure.
- 30,902 students are eligible for the Free and Reduced Lunch Program.

- 5,855 people do not have access to a vehicle, and only 5,634 people use public transportation.

The City of Fredericksburg and King and Queen County have the highest rates of poverty, while Stafford County has the lowest.

King and Queen County has the highest child poverty rate with more than one in three children living in poverty. The City of Fredericksburg has the highest rate of food insecurity, while Hanover, Stafford, and New Kent have the lowest.

The City of Fredericksburg has the highest rate of students eligible for the Free and Reduced Lunch Program. The Thrive Virginia service area has an overall lower eligibility rate than Virginia as a whole.

Most rural communities have little, if any, reliable and affordable access to public transportation. This lack of transportation has implications for employment opportunities as well as access to grocery stores and healthcare. Individuals living in the Thrive Virginia service area are half as likely to use public transportation for their commute as other Virginians.

King and Queen County experiences a greater need than the Virginia average across eight of the ten poverty indicators, while Caroline, Charles City, and the City of Fredericksburg experience a greater need than Virginia across seven of the ten poverty indicators.

Economic Trends:

Economic Asset Poverty identifies households that do not have sufficient net worth to live above the Federal Poverty Level for three months if they lost their source of income. This measure of net worth includes both savings and assets, such as a home, car, or business. Households in asset poverty are economically vulnerable and frequently impacted by unexpected costs such as a health emergency, car trouble, or lapse in employment.

Within Thrive Virginia's service area, the City of Fredericksburg has the most significant percentage of residents living in asset poverty at 29%. King and Queen has the highest rate of residents living below 200% of the Federal Poverty Level.

Cost-burdened households spend more than 30% of their income on housing costs. Families that must pay such a large portion of their income on housing often have a hard time affording necessities such as healthcare and food. Further, these households are more vulnerable to falling behind in housing payments in the case of an emergency which could lead to eviction or repossession of their home.

Twenty-seven percent or 47,623 households within Thrive Virginia's service area are considered cost-burdened families. The service area has eviction rates well over the United States rate but lower than the Virginia rate.

Unemployment levels influenced by outside factors such as international and national economic trends also serve as an indicator of the economic strength of a community. Within Thrive Virginia's service area, Caroline, Charles City, the City of Fredericksburg, and Spotsylvania all experience higher unemployment rates than Virginia.

See the Quantitative Section of this Report for more detailed data.

Key Findings

Within Thrive Virginia's service area, data revealed the following top needs for each of the components within the quantitative section of the report.

Basic Needs: Public Transportation

Health and Well-Being: Primary Care Physician Access

Education and Employment: Higher Education Attainment

Financial Well-Being: Unbanked

It is essential to look at the root causes for each of these indicators and work with key stakeholders and community leaders to discover strategies to address these needs. As a community action agency, part of Thrive Virginia's role is to facilitate discussions with community partners and present recommendations that address critical needs.

Public Transportation:

A lower population density in rural areas often leads to lower ridership for fixed transit routes and a smaller tax base to fund maintenance and repair of transportation systems. The lack of investment in infrastructure in rural communities, coupled with the increasing use of rural roads over time, has also affected transportation safety.

When addressing the transportation issue, it is important to remember that rural communities frequently face challenges related to fragmentation and duplication of services among different programs. Coordination of services is critical, as is an efficient use of limited resources.

Primary Care Physician Access:

Experts from the Association of American Medical Colleges (AAMC) agree that the physician shortage is worsening because of population growth and longer life expectancy.

The AAMC has gathered recommendations from various experts to address this challenge. These recommendations include:

- An increase in nurse practitioners and physician assistants
- A mapping tool that highlights areas of need so that medical students can decide where to begin their careers.
- Expanding VISA access to doctors who choose to stay in the United States and work in medically underserved areas.

The AAMC notes that the industry will need to be agile in its approach to solving this problem.

Higher Education Attainment:

Achievement gaps are caused by multiple, varied, and interconnected factors. When education data is disaggregated, a consistent pattern emerges: race, culture, ethnicity, language, and economic status continue to be powerful predictors of school success. Students who differ from the mainstream

population (white, middle-class, and English speaking) are most vulnerable to being underserved by our nation's schools.

In areas where the racially diverse, poor, and other marginalized students are successful, the focus has been on the core elements of quality schooling. These core elements include leaders who are collaborative, courageous, and visionary; teachers who are skilled, passionate, and culturally competent; and students who are challenged, engaged, and culturally affirmed.

Unbanked:

According to a 2015 Federal Deposit Insurance Corporation (FDIC) survey, people are unbanked for various reasons including:

- Insufficient funds to open or maintain an account.
- Concerns about privacy and trust.
- High and unpredictable banking fees.
- ID, credit, or former bank account problems.
- Inadequate products or services provided by banks.
- Inconvenient locations or hours of local branches.

The same study provided several ways to improve access to mainstream bank accounts. They include:

- Developing products and services for households with unstable incomes.
- Offering more ways to use smartphones for banking.
- Providing more multi-functional ATMs.
- Placing more bank outlets in grocery and other retail stores.
- Bringing privately held savings into the banking system.

Comprehensive Plans

Each locality within Thrive Virginia's service area has a comprehensive plan, a document which guides its community development over a certain period of time. These plans contain specific goals and strategies to encourage the development of the economy, infrastructure, and resources within the community. What follows are only a few highlights about how local governments are seeking to meet the top needs identified by Thrive Virginia; however, each locality's most recent comprehensive plan is publicly available on its official website and contains far more detail on priorities and efforts.

Caroline County lists responsible economic development as one of the key goals in its 2030 Comprehensive Plan. As part of this effort, they have sought to partner with local schools such as the University of Mary Washington and Germanna Community College, as well as local businesses, to develop a highly-educated base of residents to meet employment needs within the county.

Charles City County identifies transportation as a key community need in encouraging both quality-of-life improvements and economic development within the county. Their plan involves developing a diverse set of transportation options within the county, potentially including ride-sharing options, a public transit system such as a bus route, and improved pathways for biking and walking.

Hanover County lists several quality-of-life priorities in its comprehensive plan. One of these priorities is to improve the health status of individuals within the county, especially those who are at-risk or who

have special needs. Life-long learning is also a listed priority, with suggestions to ensure diverse and high-quality opportunities for education and career development within the county.

King and Queen County identifies transportation as a key area where development would encourage both economic growth and improved quality-of-life for residents. One proposed measure is the development of a business center, which could both serve as a hub for public transit stops and carpooling, and could provide telework space for residents without home internet access.

King George County lists education as one of its major areas for development. The comprehensive plan suggests fostering partnerships with regional institutes of higher learning, such as Rappahannock Community College and the University of Mary Washington, to strengthen their local satellite sites. This would allow residents to seek higher education while remaining in the county.

King William County includes the development of social welfare and health services as a key part of its plan. Specifically, the comprehensive plan proposes to work with community groups and local non-profits to improve access to healthcare. The ultimate goal is to create a strong base of local healthcare providers and to ensure that residents have easy access to pharmacies and clinics.

New Kent County lists the development of a realistic mass transit system as a key priority. Possible options include the development of a bus service (with stops within the county, Richmond, and Williamsburg) and local ride-sharing options, as well as improved infrastructure for and awareness of Bay Transit's services. The plan also suggests improving pedestrian access within the county.

Stafford County identifies a strong and diverse range of transportation options, both for people and for products, as a key community need. The county's proposed role is to offer incentives to encourage proposals to improve the transportation infrastructure; possible ideas would be better commuter parking and ride-share options, as well as mass transit such as bus or rail systems.

Spotsylvania County includes the improvement of transportation infrastructure as a key part of their plan. Specifically, they would like to manage congestion within the county by encouraging carpooling and improving already-existing bus services. In addition, Spotsylvania lists safety measures for pedestrians and cyclists, and accessibility for the elderly and those with disabilities, as priorities.

The City of Fredericksburg lists improved transportation infrastructure as a strategy for economic progress and neighborhood improvement. The plan notes that transportation should be safe and effective and that residents should have access to multiple options. Transportation should be accessible within both commercial areas and neighborhoods, especially those targeted at elderly or disabled persons.

Methodology

The methodology for the 2020 Community Needs Assessment Report consisted of collecting both quantitative and qualitative data.

The quantitative data can be found on pages 10 to 71. The data is sorted into population demographics and four major components that help shape human development: basic needs, health and well-being, education and employment, and financial well-being. Data reported in the four component areas was collected through various federal, state, and university documents and evaluated for its relevancy to this report. It is important to note that the best data currently available was used for each indicator. While much of the data is very recent, some indicators required the use of data that is several years old at the time of this report. Population demographic data was collected using the United States Census Bureau, ACS 5-Year Estimates 2013-2017, and Decennial Census 2010.

The qualitative data was collected through a community needs survey which can be found at www.thriveva.org. Please see pages 77 to 85. The survey asked participants to answer a series of questions related to demographic data, housing, transportation, finances, employment, education, nutrition and health, children, emotional support, and relationship safety. The purpose of the survey was to help Thrive Virginia better understand the resources and needs of individuals and families residing in our service area. Over 1,000 surveys were distributed to more than 40 sites. The survey was also available online and promoted through various media methods and multiple community partners. The survey concluded in April 2020. Two hundred twenty-seven surveys were collected.

In April 2020, survey data was analyzed, and the top emerging needs were determined using the Nominal Group Process. The 2020 Community Needs Assessment Report is available on Thrive Virginia's website, and hard copies were sent to elected officials serving in the agency's footprint as well as to key community stakeholders.

This report is a useful tool for Thrive Virginia's future strategic planning process.

Quantitative Data Overview

The compiled quantitative data for Thrive Virginia's service area is organized into five sections: Demographics, Basic Needs, Health and Well-being, Education and Employment, and Financial Wellness. Indicators were selected by the Strategic Planning Committee to measure and understand how our communities are progressing in particular areas.

Sources for this data can be found on page 71. The sources are highly credible and were the most current at the time of publication.

Demographics

An overview of Thrive Virginia's demographics can be found in the Community Profile on page 4 of the report.

Basic Needs

Many area residents who lack steady income, stable housing, or access to healthy food are faced with challenges to everyday living. These residents live on the edge of financial disaster, where a sudden job loss or health crisis could be devastating.

Thrive Virginia assists these community members through our Emergency Financial Assistance Program, our Homelessness Prevention Program, and by supporting local feeding programs.

Health and Well-being:

Health has been defined as a state of physical, mental, and spiritual well-being, and is a key determinant of one's quality of life and functional abilities. A certain level of health is essential for individuals to succeed in all stages of life, and community health is essential for community success as well.

Thrive Virginia assists service area residents with their health and well-being through our Healthy Families Program and our Domestic Violence and Sexual Assault Advocacy and Prevention Program.

Education and Employment:

Without a stable job and sustainable income, area residents struggle to maintain financial stability and provide a safe and healthy living environment for their families.

Thrive Virginia assists service area residents with becoming college-ready and obtaining employment through our Project Discovery Program.

Financial Wellness:

Decisions regarding money can limit or expand opportunities in life. Setting financial goals and making good monetary decisions are key to improving financial security.

Thrive Virginia assists service area residents with achieving financial wellness through our Housing/Financial Counseling program. A HUD-certified counselor works one-on-one with customers and provides group education classes that cover important financial well-being topics.

Population Density

Population density is measured in persons per square mile of land. Population densities at either extreme come with their challenges for a community; too high of a density can indicate overcrowding, while individuals living in very low-density areas may have to travel far to access basic services.

Table 1.1: Population per Square Mile

	Total Population	Land Area	Pop. Per Square Mile
Caroline County	29889	527.51	56.66
Charles City County	7022	182.82	38.41
Fredericksburg City	28135	10.44	2694.92
Hanover County	103218	468.54	220.30
King & Queen County	7052	315.14	22.38
King George County	25564	179.64	142.31
King William County	16329	273.94	59.61
New Kent County	20523	209.73	97.85
Spotsylvania County	130159	401.50	324.18
Stafford County	141159	268.96	524.83
<i>TVA Service Area</i>	<i>509050</i>	<i>2838.22</i>	<i>179.36</i>
<i>Virginia</i>	<i>8365952</i>	<i>39490.09</i>	<i>211.85</i>
<i>United States</i>	<i>321004407</i>	<i>3531905.43</i>	<i>90.89</i>
Sources: US Census Bureau, ACS 5-Year Estimates 2013-17; US Census Bureau, Decennial Census 2010			

Key Findings

Fredericksburg has the highest population density, while Charles City has the lowest. Thrive Virginia's service area has a population density higher than the United States average, but lower than Virginia's.

Demographics

Urban and Rural

Urban areas are determined by measuring development levels and population density. All areas that are not urban are classified as rural. The lack of development in rural areas often makes it more difficult for residents to access resources.

Table 1.2: Urban and Rural Population

	Total Population	Urban	Rural	% Urban	% Rural
Caroline County	28545	6165	22380	21.60	78.40
Charles City County	7256	0	7256	0.00	100.00
Fredericksburg City	24286	24003	283	98.83	1.17
Hanover County	99863	60831	39032	60.91	39.09
King & Queen County	6945	0	6945	0.00	100.00
King George County	23584	6323	17261	26.81	73.19
King William County	15935	2675	13260	16.79	83.21
New Kent County	18429	0	18429	0.00	100.00
Spotsylvania County	122397	82829	39568	67.67	32.33
Stafford County	128961	103485	25476	80.25	19.75
<i>TVA Service Area</i>	<i>476201</i>	<i>286311</i>	<i>189890</i>	<i>60.12</i>	<i>39.88</i>
<i>Virginia</i>	<i>8001024</i>	<i>6037094</i>	<i>1963930</i>	<i>75.45</i>	<i>24.55</i>
<i>United States</i>	<i>308745538</i>	<i>249253271</i>	<i>59492267</i>	<i>80.73</i>	<i>19.27</i>
Source: US Census Bureau, Decennial Census 2010					

Key Findings

Three counties in the Thrive Virginia service area are 100% rural: Charles City, King & Queen, and New Kent. The City of Fredericksburg is the most urban at more than 98%. Thrive Virginia's service area is more rural and less urban than the Virginia or United States averages.

Income

Table 1.3: Total Households by Annual Income

	Less than \$20,000	\$20,000 to \$29,999	\$30,000 to \$39,999	\$40,000 to \$49,999	\$50,000 to \$59,999	\$60,000 to \$74,999	\$75,000 to \$99,999	\$100,000 to \$149,999	\$150,000 or more
Caroline County	1243	789	1109	1128	1012	1224	1807	1618	885
Charles City County	543	264	233	302	195	384	428	360	190
Fredericksburg city	1668	882	979	1043	894	778	1402	1233	1540
Hanover County	2930	2092	2524	2729	2670	3756	5726	8608	7173
King & Queen County	521	177	272	408	182	313	436	355	147
King George County	608	469	519	774	437	979	1539	1964	1683
King William County	540	424	508	456	601	879	1074	1130	467
New Kent County	473	510	439	587	585	944	1239	1553	1225
Spotsylvania County	3251	2602	2753	3171	3071	4951	6563	8760	8157
Stafford County	2346	1738	2279	2560	3100	4080	5817	10273	13152
<i>TVA Service Area</i>	<i>14123</i>	<i>9947</i>	<i>11615</i>	<i>13158</i>	<i>12747</i>	<i>18288</i>	<i>26031</i>	<i>35854</i>	<i>34619</i>
<i>Virginia</i>	<i>406765</i>	<i>243641</i>	<i>246505</i>	<i>241061</i>	<i>229174</i>	<i>301961</i>	<i>398836</i>	<i>509334</i>	<i>528359</i>
<i>United States</i>	<i>19437545</i>	<i>11529727</i>	<i>11044064</i>	<i>10079715</i>	<i>9181800</i>	<i>11818514</i>	<i>14636046</i>	<i>16701857</i>	<i>14396653</i>
	Less than \$20,000 %	\$20,000 to \$29,999 %	\$30,000 to \$39,999 %	\$40,000 to \$49,999 %	\$50,000 to \$59,999 %	\$60,000 to \$74,999 %	\$75,000 to \$99,999 %	\$100,000 to \$149,999 %	\$150,000 or more %
Caroline County	11.49	7.30	10.25	10.43	9.36	11.32	16.71	14.96	8.18
Charles City County	18.73	9.11	8.04	10.42	6.73	13.25	14.76	12.42	6.55
Fredericksburg city	16.01	8.47	9.40	10.01	8.58	7.47	13.46	11.83	14.78
Hanover County	7.67	5.48	6.61	7.14	6.99	9.83	14.99	22.53	18.77
King & Queen County	18.53	6.30	9.68	14.51	6.47	11.13	15.51	12.63	5.23
King George County	6.78	5.23	5.78	8.63	4.87	10.91	17.15	21.89	18.76
King William County	8.88	6.97	8.36	7.50	9.89	14.46	17.67	18.59	7.68
New Kent County	6.26	6.75	5.81	7.77	7.74	12.50	16.40	20.56	16.21
Spotsylvania County	7.51	6.01	6.36	7.33	7.10	11.44	15.16	20.24	18.85
Stafford County	5.17	3.83	5.03	5.65	6.84	9.00	12.83	22.66	29.00
<i>TVA Service Area</i>	<i>8.01</i>	<i>5.64</i>	<i>6.59</i>	<i>7.46</i>	<i>7.23</i>	<i>10.37</i>	<i>14.76</i>	<i>20.33</i>	<i>19.63</i>
<i>Virginia</i>	<i>13.10</i>	<i>7.85</i>	<i>7.94</i>	<i>7.76</i>	<i>7.38</i>	<i>9.72</i>	<i>12.84</i>	<i>16.40</i>	<i>17.01</i>
<i>United States</i>	<i>16.36</i>	<i>9.70</i>	<i>9.29</i>	<i>8.48</i>	<i>7.73</i>	<i>9.95</i>	<i>12.32</i>	<i>14.06</i>	<i>12.12</i>

Source: US Census Bureau, ACS 5-Year Estimates 2013-17

Key Findings

In general, the Thrive Virginia service area has more households with a high household income and fewer households with a low household income than Virginia or the United States.

Demographics

Population by Age

Table 1.4: Total Population by Age

	Under 5	5 to 14	15 to 17	18 to 24	25 to 34	35 to 44	45 to 54	55 to 64	65+
Caroline County	2052	3801	1039	2595	3663	3982	4172	3986	4599
Charles City County	289	630	212	473	688	694	1202	1288	1546
Fredericksburg City	1949	3093	808	5551	4463	3693	2925	2693	2960
Hanover County	5114	13642	4653	9235	9752	12815	16336	15145	16526
King & Queen County	367	808	174	524	689	951	917	1085	1537
King George County	1617	3836	1141	2178	3024	3582	3902	3188	3096
King William County	999	2144	660	1218	2062	2008	2540	2277	2421
New Kent County	1091	2351	808	1515	2342	2622	3365	3169	3260
Spotsylvania County	8149	18958	6050	11340	16122	17025	19905	16123	16487
Stafford County	8981	21451	7114	14058	18478	19472	22552	15796	13257
<i>TVA Service Area</i>	<i>30608</i>	<i>70714</i>	<i>22659</i>	<i>48687</i>	<i>61283</i>	<i>66844</i>	<i>77816</i>	<i>64750</i>	<i>65689</i>
<i>Virginia</i>	<i>509922</i>	<i>1041702</i>	<i>314650</i>	<i>818913</i>	<i>1162784</i>	<i>1096763</i>	<i>1171473</i>	<i>1061878</i>	<i>1187867</i>
<i>United States</i>	<i>19853515</i>	<i>41158233</i>	<i>12589531</i>	<i>31131484</i>	<i>44044173</i>	<i>40656419</i>	<i>43091143</i>	<i>40747520</i>	<i>47732389</i>
	Under 5 %	5 to 14 %	15 to 17 %	18 to 24 %	25 to 34 %	35 to 44 %	45 to 54 %	55 to 64 %	65+ %
Caroline County	6.9	12.7	3.5	8.7	12.3	13.3	14.0	13.3	15.4
Charles City County	4.1	9.0	3.0	6.7	9.8	9.9	17.1	18.4	22.0
Fredericksburg City	6.9	11.0	2.9	19.7	15.9	13.1	10.4	9.6	10.5
Hanover County	5.0	13.2	4.5	8.9	9.4	12.4	15.8	14.7	16.0
King & Queen County	5.2	11.5	2.5	7.4	9.8	13.5	13.0	15.4	21.8
King George County	6.3	15.0	4.5	8.5	11.8	14.0	15.3	12.5	12.1
King William County	6.1	13.1	4.0	7.5	12.6	12.3	15.6	14.0	14.8
New Kent County	5.3	11.5	3.9	7.4	11.4	12.8	16.4	15.5	15.9
Spotsylvania County	6.3	14.6	4.6	8.7	12.4	13.1	15.3	12.4	12.7
Stafford County	6.4	15.2	5.0	10.0	13.1	13.8	16.0	11.2	9.4
<i>TVA Service Area</i>	<i>6.0</i>	<i>13.9</i>	<i>4.5</i>	<i>9.6</i>	<i>12.0</i>	<i>13.1</i>	<i>15.3</i>	<i>12.7</i>	<i>12.9</i>
<i>Virginia</i>	<i>6.1</i>	<i>12.5</i>	<i>3.8</i>	<i>9.8</i>	<i>13.9</i>	<i>13.1</i>	<i>14.0</i>	<i>12.6</i>	<i>14.2</i>
<i>United States</i>	<i>6.2</i>	<i>12.8</i>	<i>3.9</i>	<i>9.7</i>	<i>13.7</i>	<i>12.7</i>	<i>13.4</i>	<i>12.7</i>	<i>14.9</i>

Source: US Census Bureau, ACS 5-Year Estimates 2013-17

Key Findings

The age distribution of Thrive Virginia's service area is very similar to that of Virginia and the United States.

Population by Race

Table 1.5: Total Population by Race

	White	Black or African American	American Indian & Alaskan Native	Asian	Native Hawaiian & Other Pacific Islander	Some Other Race	Two or More Races
Caroline County	19775	8599	109	286	0	393	727
Charles City County	3009	3245	461	67	0	14	226
Fredericksburg City	18127	6326	37	669	34	1151	1791
Hanover County	89541	9477	170	1560	82	305	2083
King & Queen County	4811	1840	43	0	0	10	348
King George County	19784	4199	62	272	17	166	1064
King William County	12503	3007	129	180	0	55	455
New Kent County	16768	2340	185	203	0	113	914
Spotsylvania County	94968	20643	567	3408	119	5788	4666
Stafford County	97462	23940	382	4436	112	7329	7498
<i>TVA Service Area</i>	<i>376748</i>	<i>83616</i>	<i>2145</i>	<i>11081</i>	<i>364</i>	<i>15324</i>	<i>19772</i>
<i>Virginia</i>	<i>5720209</i>	<i>1605447</i>	<i>22499</i>	<i>520119</i>	<i>5469</i>	<i>200265</i>	<i>291944</i>
<i>United States</i>	<i>234370202</i>	<i>40610815</i>	<i>2632102</i>	<i>17186320</i>	<i>570116</i>	<i>15553808</i>	<i>10081044</i>
	White %	Black or African American %	Alaskan Native & American Indian %	Asian %	Native Hawaiian & Other Pacific Islander %	Some Other Race %	Two or More Races %
Caroline County	66.2	28.8	0.4	1.0	0.0	1.3	2.4
Charles City County	42.9	46.2	6.6	1.0	0.0	0.2	3.2
Fredericksburg City	64.4	22.5	0.1	2.4	0.1	4.1	6.4
Hanover County	86.7	9.2	0.2	1.5	0.1	0.3	2.0
King & Queen County	68.2	26.1	0.6	0.0	0.0	0.1	4.9
King George County	77.4	16.4	0.2	1.1	0.1	0.6	4.2
King William County	76.6	18.4	0.8	1.1	0.0	0.3	2.8
New Kent County	81.7	11.4	0.9	1.0	0.0	0.6	4.5
Spotsylvania County	73.0	15.9	0.4	2.6	0.1	4.4	3.6
Stafford County	69.0	17.0	0.3	3.1	0.1	5.2	5.3
<i>TVA Service Area</i>	<i>74.0</i>	<i>16.4</i>	<i>0.4</i>	<i>2.2</i>	<i>0.1</i>	<i>3.0</i>	<i>3.9</i>
<i>Virginia</i>	<i>68.4</i>	<i>19.2</i>	<i>0.3</i>	<i>6.2</i>	<i>0.1</i>	<i>2.4</i>	<i>3.5</i>
<i>United States</i>	<i>73.0</i>	<i>12.7</i>	<i>0.8</i>	<i>5.4</i>	<i>0.2</i>	<i>4.8</i>	<i>3.1</i>

Source: US Census Bureau, ACS 5-Year Estimates 2013-17

Key Findings

The race distribution of Thrive Virginia's service area is very similar to that of Virginia and the United States.

Demographics

Ethnicity

Ethnically Latino or Hispanic individuals are of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin. Ethnicity is a separate category from race; people who are Hispanic or Latino may be of any race.

Table 1.6: Total Population by Ethnicity

	Total Population	Hispanic or Latino	% Hispanic or Latino
Caroline County	29889	1288	4.3
Charles City County	7022	126	1.8
Fredericksburg City	28135	3007	10.7
Hanover County	103218	2886	2.8
King & Queen County	7052	225	3.2
King George County	25564	1188	4.6
King William County	16329	129	0.8
New Kent County	20523	598	2.9
Spotsylvania County	130159	11706	9.0
Stafford County	141159	16515	11.7
<i>TVA Service Area</i>	<i>509050</i>	<i>37668</i>	<i>7.4</i>
<i>Virginia</i>	<i>8365952</i>	<i>749458</i>	<i>9.0</i>
<i>United States</i>	<i>321004407</i>	<i>56510571</i>	<i>17.6</i>
Source: US Census Bureau, ACS 5-Year Estimates 2013-17			

Key Findings

King William has the lowest rate of Hispanic ethnicity at less than 1%, while Stafford and Fredericksburg have the highest at over 10%. The Thrive Virginia service area has an overall lower percentage of Hispanic residents than the Virginia or United States average.

Single-Parent Households

Single-parent households are typically less financially stable than two-parent households, and all members of the household are at risk for poorer health outcomes. Single parents and their children face higher rates of mental illness, smoking, excessive drinking, and early mortality.

Table 1.7: Single Parent Households

	Total Family Households	Single-Parent	% Single-Parent
Caroline County	7730	2304	29.81
Charles City County	1890	541	28.62
Fredericksburg City	5701	2016	35.36
Hanover County	28949	4791	16.55
King & Queen County	1862	470	25.24
King George County	6713	1285	19.14
King William County	4839	1072	22.15
New Kent County	5942	933	15.70
Spotsylvania County	33291	6904	20.74
Stafford County	36991	7153	19.34
<i>TVA Service Area</i>	<i>133908</i>	<i>27469</i>	<i>20.51</i>
<i>Virginia</i>	<i>2078081</i>	<i>507380</i>	<i>24.42</i>
<i>United States</i>	<i>78298703</i>	<i>20839351</i>	<i>26.62</i>
Source: US Census Bureau, ACS 5-Year Estimates 2013-17			

Key Findings

Fredericksburg has the highest percentage of single-parent households, while New Kent and Hanover have the lowest. Thrive Virginia's service area has a lower percentage of single-parent households than Virginia or the United States.

Demographics

Disability

Individuals with disabilities are a uniquely vulnerable population. They often require targeted healthcare services and can face higher rates of social isolation. Further, high rates of disability in a community can be indicative of larger issues like environmental dangers, the presence of hazardous industries, or inadequate access to healthcare.

Table 1.8: Disability Status

	Total Population	Disabled	% Disabled
Caroline County	27795	3443	12.4
Charles City County	7009	1153	16.5
Fredericksburg City	27936	2849	10.2
Hanover County	102592	9879	9.6
King & Queen County	7052	832	11.8
King George County	25132	2557	10.2
King William County	16276	1628	10.0
New Kent County	19979	2040	10.2
Spotsylvania County	129423	14737	11.4
Stafford County	135615	11760	8.7
<i>TVA Service Area</i>	<i>498809</i>	<i>50878</i>	<i>10.2</i>
<i>Virginia</i>	<i>8153221</i>	<i>936175</i>	<i>11.5</i>
<i>United States</i>	<i>316027641</i>	<i>39792082</i>	<i>12.6</i>
Source: US Census Bureau, ACS 5-Year Estimates 2013-17			

Key Findings

Charles City has the highest rate of disability, while Stafford has the lowest. Thrive Virginia's service area has a slightly lower rate of disability than Virginia or the United States.

Veterans

Veterans and their families often have more needs than the rest of the population. Veterans may return home from war with physical disabilities or mental illnesses such as PTSD. They also face higher rates of drug addiction, alcohol abuse, and homelessness. Furthermore, veterans in some areas face a shortage of healthcare providers trained in treating their unique conditions.

Table 1.9: Veteran Status

	Total Population 18+	Veterans	% Veterans
Caroline County	21433	2862	13.4
Charles City County	5878	606	10.3
Fredericksburg City	22168	2087	9.4
Hanover County	79678	7072	8.9
King & Queen County	5703	648	11.4
King George County	18645	3386	18.2
King William County	12526	1165	9.3
New Kent County	16254	1816	11.2
Spotsylvania County	96599	13854	14.3
Stafford County	99842	19860	19.9
<i>TVA Service Area</i>	<i>378726</i>	<i>53356</i>	<i>14.1</i>
<i>Virginia</i>	<i>6388866</i>	<i>688536</i>	<i>10.8</i>
<i>United States</i>	<i>246379319</i>	<i>18939219</i>	<i>7.7</i>
Source: US Census Bureau, ACS 5-Year Estimates 2013-17			

Key Findings

Stafford has the highest rate of Veterans at almost 20%, while Hanover, Fredericksburg, and King William have the lowest at under 10%. Thrive Virginia's service area has an overall higher rate of Veterans than Virginia or the United States.

Basic Needs

Poverty

The Federal Poverty Level indicates how much income a household requires to sustain a basic standard of living; households with an income below this level are in poverty. Federal Poverty Level guidelines are used to determine access to many benefits and assistance programs such as SNAP, CHIP, and Medicaid. Individuals living in poverty often have trouble meeting their basic needs such as housing and healthcare.

Table 2.1: Population Living Below Federal Poverty Level

	Total Population	Below Poverty Level	% Below Poverty Level
Caroline County	27713	3300	11.9
Charles City County	6994	923	13.2
Fredericksburg City	25588	4169	16.3
Hanover County	101303	5832	5.8
King & Queen County	7052	1100	15.6
King George County	25348	1449	5.7
King William County	16258	1775	10.9
New Kent County	19899	1017	5.1
Spotsylvania County	129250	10296	8.0
Stafford County	137222	6517	4.7
<i>TVA Service Area</i>	<i>496627</i>	<i>36378</i>	<i>7.3</i>
<i>Virginia</i>	<i>8116130</i>	<i>906838</i>	<i>11.2</i>
<i>United States</i>	<i>313048563</i>	<i>45650345</i>	<i>14.6</i>

Source: US Census Bureau, ACS 5-Year Estimates 2013-17

Key Findings

Fredericksburg and King & Queen have the highest rates of poverty, while Stafford has the lowest. The Thrive Virginia's service area poverty rate is precisely half that of the United States average.

Child Poverty

Poverty is particularly challenging for families with children due to the high cost of childcare, education, clothing, and regular health check-ups. Living in poverty can affect children's educational outcomes and health throughout childhood and beyond.

Table 2.2: Children Living Below Federal Poverty Level

	Total Population Under 18	Below Poverty Level	% Below Poverty Level
Caroline County	6770	1337	19.7
Charles City County	1103	255	23.1
Fredericksburg City	5795	1159	20.0
Hanover County	23090	1927	8.3
King & Queen County	1349	476	35.3
King George County	6551	536	8.2
King William County	3785	938	24.8
New Kent County	4143	297	7.2
Spotsylvania County	32581	3518	10.8
Stafford County	36912	2360	6.4
<i>TVA Service Area</i>	<i>122079</i>	<i>12803</i>	<i>10.5</i>
<i>Virginia</i>	<i>1838741</i>	<i>273962</i>	<i>14.9</i>
<i>United States</i>	<i>72430017</i>	<i>14710485</i>	<i>20.3</i>
Source: US Census Bureau, ACS 5-Year Estimates 2013-17			

Key Findings

King & Queen has the highest child poverty rate, with more than one in three children living in poverty. Stafford has the lowest rate. Thrive Virginia's service area has a child poverty rate only half that of the United States average; however, one in ten children in the service area is still living in poverty.

Basic Needs

Homelessness

The U.S Department of Housing and Urban Development measures homelessness through point-in-time counts conducted by local Continuums of Care. Because each Continuum covers multiple counties, the data below is not an exact reflection of the Thrive Virginia service area, but the best estimate. Unsheltered homeless persons often face health and safety challenges and have more difficulty accessing resources.

Table 2.3: Homelessness and Shelter Status

	Total Homeless Persons	Unsheltered	% Unsheltered
VA-500: Richmond/Henrico, Chesterfield, Hanover Counties	609	104	17.08
VA-514: Fredericksburg/Spotsylvania, Stafford Counties	200	36	18.00
VA-521: Virginia Balance of State	718	165	22.98
<i>TVA Service Area (estimated)</i>	<i>1527</i>	<i>305</i>	<i>19.97</i>
<i>Virginia</i>	<i>5975</i>	<i>915</i>	<i>15.31</i>
<i>United States</i>	<i>552830</i>	<i>194467</i>	<i>35.18</i>
Source: US HUD, Continuums of Care Program, Point-In-Time Count 2018			

Key Findings

According to this estimated measure, Thrive Virginia's service area has a lower rate of unsheltered homeless persons than the United States, but a higher rate than Virginia.

Food Insecurity

Families who are food insecure are unable to provide enough healthy, nutritious food for the household consistently. Feeding America's measure of food insecurity takes into account levels of poverty, which may force families to choose between food and other necessities, as well as the cost of obtaining nutritious foods.

Table 2.4: Food Insecurity Rate

	Total Population	Food Insecure	% Food Insecure
Caroline County	29889	3380	11.3
Charles City County	7022	990	14.1
Fredericksburg City	28135	4200	14.9
Hanover County	103218	6810	6.6
King & Queen County	7052	850	12.1
King George County	25564	2070	8.1
King William County	16329	1530	9.4
New Kent County	20523	1420	6.9
Spotsylvania County	130159	10010	7.7
Stafford County	141159	8820	6.3
<i>TVA Service Area</i>	<i>509050</i>	<i>40080</i>	<i>7.9</i>
<i>Virginia</i>	<i>8470020</i>	<i>863390</i>	<i>10.2</i>
<i>United States</i>	<i>321004407</i>	<i>40044000</i>	<i>12.5</i>

Source: Feeding America, Map the Meal Gap 2017

Key Findings

Fredericksburg has the highest rate of food insecurity, while Hanover, Stafford, and New Kent have the lowest. Thrive Virginia's service area has a lower rate of food insecurity than both Virginia and the United States.

Basic Needs

Food Access

The USDA's measure of food access recognizes two major factors: the distance to the closest supermarket or grocery store, and access to transportation within a community. Families who live in low-access areas, or food deserts, often depend on unhealthy sources such as fast-food restaurants and convenience stores. Typically, this food is heavily processed and nutritionally imbalanced, leading to an increased risk of health issues.

Table 2.5: Access to Grocery Stores and Supermarkets

	Total Population	Low Access	% Low Access
Caroline County	28545	1369	4.80
Charles City County	7256	167	2.30
Fredericksburg City	24286	2115	8.71
Hanover County	99863	21763	21.79
King & Queen County	6945	537	7.74
King William County	15935	1742	10.93
New Kent County	18429	0	0.00
Spotsylvania County	122397	28676	23.43
Stafford County	128961	33223	25.76
<i>TVA Service Area</i>	<i>452617</i>	<i>89592</i>	<i>19.79</i>
Source: USDA, Economic Research Service, Food Environment Atlas 2015			

Key Findings

Stafford has the highest rate of low food access, with almost one-quarter of the population having low food access. 0% of the population in New Kent is classified as having low food access.

SNAP Participation

SNAP, or the Supplemental Nutrition Assistance Program, is sometimes colloquially known as food stamps. This program provides families with monthly funds that can be used to purchase most types of food. It typically excludes restricted substances like alcohol and tobacco as well as prepared foods.

Table 2.6: Households Receiving SNAP Benefits

	Total Households	Receiving SNAP	% Receiving SNAP
Caroline County	10815	1246	11.5
Charles City County	2899	289	10.0
Fredericksburg City	10419	1506	14.5
Hanover County	38208	1668	4.4
King & Queen County	2811	307	10.9
King George County	8972	802	8.9
King William County	6079	382	6.3
New Kent County	7555	576	7.6
Spotsylvania County	43279	3164	7.3
Stafford County	45345	2038	4.5
<i>TVA Service Area</i>	<i>176382</i>	<i>11978</i>	<i>6.8</i>
<i>Virginia</i>	<i>3105636</i>	<i>282296</i>	<i>9.1</i>
<i>United States</i>	<i>118825921</i>	<i>15029498</i>	<i>12.6</i>
Source: US Census Bureau, ACS 5-Year Estimates 2013-17			

Key Findings

Fredericksburg has the highest SNAP participation rate, while Hanover and Stafford have the lowest. The Thrive Virginia service area has an overall lower rate of SNAP participation than both Virginia and the United States.

Basic Needs

Free and Reduced Lunch Program

The National School Lunch Program provides meals to students during the school day. Students from low-income families are eligible for reduced-price and free meals so they receive at least one nutritious meal each school day. In addition to suffering negative health consequences, food insecure students have poorer academic outcomes and more behavioral challenges in school.

Table 2.7: Free and Reduced Lunch Program Eligibility

	Total Students	Eligible	% Eligible
Caroline County Public Schools	4230	2174	51.39
Charles City County Public Schools	717	394	54.95
Fredericksburg City Public Schools	3737	2489	66.60
Hanover County Public Schools	18180	3804	20.92
King & Queen County Public Schools	650	421	64.77
King George County Public Schools	4327	1500	34.67
King William County Public Schools	2219	677	30.51
New Kent County Public Schools	3325	810	24.36
Spotsylvania County Public Schools	23560	9161	38.88
Stafford County Public Schools	29132	9023	30.97
West Point Public Schools	813	253	31.12
<i>TVA Service Area</i>	<i>90890</i>	<i>30706</i>	<i>33.78</i>
<i>Virginia</i>	<i>1288216</i>	<i>579104</i>	<i>44.95</i>

Source: VA DOE, Office of School Nutrition Programs, National School Lunch Program Reduced Price Eligibility 2018-19

Key Findings

Fredericksburg has the highest rate of students eligible for reduced lunches, with roughly 2/3 of students eligible. Hanover has the lowest rate. Thrive Virginia's service area has an overall lower eligibility rate than Virginia as a whole.

Motor Vehicle Access

Access to a motor vehicle is a basic necessity for many individuals, especially those living in rural areas where there is limited access to public transportation. The lack of a reliable vehicle can make it challenging to undertake even the most basic tasks such as grocery shopping or commuting to work.

Table 2.8: Households with No Motor Vehicle

	Total Households	No Motor Vehicle	% No Vehicle
Caroline County	10815	668	6.18
Charles City County	2899	131	4.52
Fredericksburg City	10419	861	8.26
Hanover County	38208	1174	3.07
King & Queen County	2811	78	2.77
King George County	8972	343	3.82
King William County	6079	138	2.27
New Kent County	7555	173	2.29
Spotsylvania County	43279	1391	3.21
Stafford County	45345	894	1.97
<i>TVA Service Area</i>	<i>176382</i>	<i>5851</i>	3.32
<i>Virginia</i>	<i>3105636</i>	<i>195311</i>	6.29
<i>United States</i>	<i>118825921</i>	<i>10468418</i>	8.81
Source: US Census Bureau, ACS 5-Year Estimates 2013-17			

Key Findings

Fredericksburg has the highest percentage of households without a motor vehicle, while Stafford has the lowest. The Thrive Virginia service area has an overall lower rate of households with no motor vehicle than the Virginia or United States average.

Basic Needs

Public Transportation Access

When public transportation is accessible and well-designed, it comes with myriad benefits; it is often less expensive than driving, in addition to being more environmentally friendly. However, most rural communities have little, if any, reliable and affordable access to public transportation. Access to public transit has implications for employment opportunities, as well as access to necessities such as grocery stores and healthcare.

Table 2.9: Workers Using Public Transportation for Work Commute

	Total Workers 16+	Using Public Trans.	% Using Public Trans.
Caroline County	14541	45	0.31
Charles City County	3282	24	0.73
Fredericksburg City	14543	642	4.41
Hanover County	53617	159	0.30
King & Queen County	3109	7	0.23
King George County	12599	178	1.41
King William County	8205	36	0.44
New Kent County	10149	13	0.13
Spotsylvania County	63812	1600	2.51
Stafford County	70925	2930	4.13
<i>TVA Service Area</i>	<i>254782</i>	<i>5634</i>	<i>2.21</i>
<i>Virginia</i>	<i>4115810</i>	<i>182233</i>	<i>4.43</i>
<i>United States</i>	<i>148432042</i>	<i>7607907</i>	<i>5.13</i>

Source: US Census Bureau, ACS 5-Year Estimates 2013-17

Key Findings

Fredericksburg and Stafford residents have the highest rate of access to public transportation, while New Kent has the lowest. Those living in Thrive Virginia's service area are only half as likely as Virginia residents to use public transit for their commute.

Commute Length

Workers with extended commutes often face higher stress and poorer health outcomes. Commuters have less time to spend with family members, exercise, prepare healthy meals, and engage in leisure activities. Further, extended commutes have a negative impact on the environment and can be indicative of a lack of available, desirable jobs in a community.

Table 2.10: Workers with Work Commute 30 Minutes or More

	Total Workers 16+	Long Commute	% Long Commute
Caroline County	14121	7899	55.94
Charles City County	3178	1993	62.71
Fredericksburg City	13442	4536	33.74
Hanover County	49929	18299	36.65
King & Queen County	2932	1690	57.64
King George County	12106	6286	51.92
King William County	7890	5495	69.65
New Kent County	9591	5935	61.88
Spotsylvania County	60979	31321	51.36
Stafford County	66865	39351	58.85
<i>TVA Service Area</i>	<i>241033</i>	<i>122805</i>	<i>50.95</i>
<i>Virginia</i>	<i>3918322</i>	<i>1622882</i>	<i>41.42</i>
<i>United States</i>	<i>141404632</i>	<i>53023804</i>	<i>37.50</i>

Source: US Census Bureau, ACS 5-Year Estimates 2013-17

Key Findings

Fredericksburg and Hanover have the lowest percentages of workers with a commute longer than 30 minutes; in the rest of the Thrive Virginia service area, over half of the workers have a long commute. King William has the highest rate, with nearly 70% of workers commuting over 30 minutes.

Basic Needs

Violent Crime

Violent crimes involve force or threat of force. Virginia State Police includes murder and non-negligent manslaughter, aggravated assault, forcible sex offenses, and robbery in the category of violent crime. Violent crime rates offer one measure of how safe a community is for its residents.

Table 2.11: Violent Crime Arrests across Total Population

	Total Population	Arrests	Arrests per 1,000 Pop.
Caroline County Sheriff Office	29126	18	0.62
Charles City County Sheriff's Office	7017	4	0.57
Fredericksburg Police Department	28387	51	1.80
Hanover County Sheriff's Office	99561	70	0.70
King & Queen County Sheriff's Office	6940	12	1.73
King George County Sheriff Office	25863	17	0.66
King William Sheriff Office	13604	5	0.37
New Kent Sheriff's Office	22462	14	0.62
Spotsylvania County Sheriff's Office	133441	110	0.82
Stafford County Sheriff's Office	149110	138	0.93
West Point Police Department	3312	1	0.30
<i>TVA Service Area</i>	<i>518823</i>	<i>440</i>	<i>0.85</i>
<i>Virginia</i>	<i>8517685</i>	<i>7790</i>	<i>0.91</i>
Source: VA Dept of State Police, Crime in Virginia Report 2018			

Key Findings

West Point and King William have the lowest violent crime rates, while Fredericksburg and King & Queen have the highest. The overall Thrive Virginia service area violent crime rate is slightly lower than the Virginia average.

	Caroline	Charles City	Fredericksburg	Hanover	King & Queen	King George	King William	New Kent	Spotsylvania	Stafford
Pop. Poverty [†]	12	13	16	6	16	6	11	5	8	5
Child Poverty [†]	20	23	20	8	35	8	25	7	11	6
Food Insecure [†]	11	14	15	7	12	8	9	7	8	6
Low Food Access ^{*†}	5	2	9	22	8	N/A	11	0	23	26
SNAP [†]	12	10	15	4	11	9	6	8	7	5
Free/Reduced Lunch [†]	51	55	67	21	65	35	31	24	39	31
Motor Vehicle [†]	6	5	8	3	3	4	2	2	3	2
Public Transportation [†]	0.3	0.7	4.4	0.3	0.2	1.4	0.4	0.1	2.5	4.1
Commute Time [†]	56	63	34	37	58	52	70	62	51	59
Violent Crime [‡]	0.6	0.6	1.8	0.7	1.7	0.7	0.4	0.6	0.8	0.9

* Indicates that TVA Service Area totals were used for comparison due to Virginia totals being unavailable

[†] Indicates data given as a percentage of the population

[‡] Indicates data given as a ratio to population

	= Locality with a lesser need than the Virginia average
	= Locality with a similar need to the Virginia average
	= Locality with a greater need than the Virginia average
	= Data unavailable for this locality

Healthcare Coverage

Uninsured individuals often have much poorer health outcomes than those who are insured. They are less likely to receive preventative care and to seek attention when an illness or injury initially occurs, leaving them more likely to suffer serious health problems. Further, any serious medical issue can result in high costs for the uninsured; these costs put many people in medical debt, damaging their long-term financial security and stability, and jeopardizing access to future care.

Table 3.1: Population with No Health Insurance Coverage

	Total Population	Uninsured	% Uninsured
Caroline County	27795	2389	8.6
Charles City County	7009	702	10.0
Fredericksburg City	27936	3005	10.8
Hanover County	102592	5759	5.6
King & Queen County	7052	825	11.7
King George County	25132	1890	7.5
King William County	16276	1103	6.8
New Kent County	19979	1092	5.5
Spotsylvania County	129423	11748	9.1
Stafford County	135615	10380	7.7
<i>TVA Service Area</i>	<i>498809</i>	<i>38893</i>	<i>7.8</i>
<i>Virginia</i>	<i>8153221</i>	<i>810412</i>	<i>9.9</i>
<i>United States</i>	<i>316027641</i>	<i>33177146</i>	<i>10.5</i>

Source: US Census Bureau, ACS 5-Year Estimates 2013-17

Key Findings

King & Queen has the highest rate of uninsured residents, while Hanover and New Kent have the lowest. The Thrive Virginia service area has a lower rate of uninsured residents than both Virginia and the United States.

Hospitalizations

Hospital discharge rates measure how many people are hospitalized for serious health concerns. Discharge rates include all patients who are hospitalized for at least one night, including those who pass away, but typically do not include patients who are discharged the same day. This rate can be used to measure the health of a population but can also indicate how accessible hospitals are to a community.

Table 3.2: Hospital Discharge Rate

	Total Population	Hospital Discharges	Discharges per 1,000 Pop.
Caroline County	29704	3638	122.5
Charles City County	7253	895	123.4
Fredericksburg City	27025	3490	129.1
Hanover County	105210	10145	96.4
King & Queen County	7156	892	124.7
King George County	24724	2501	101.1
King William County	16333	1763	107.9
New Kent County	20895	1996	95.5
Spotsylvania County	129668	14384	110.9
Stafford County	141915	12430	87.6
<i>TVA Service Area</i>	<i>509883</i>	<i>52134</i>	<i>102.2</i>
<i>Virginia</i>	<i>8411808</i>	<i>801561</i>	<i>95.3</i>
Source: William and Mary, Schroeder Center, Inpatient Hospital Utilization Data Analysis 2016			

Key Findings

Fredericksburg has the highest hospital discharge rate, while Stafford has the lowest. The Thrive Virginia service area has a higher rate of hospital discharges than Virginia.

Teenage Pregnancy

Teen mothers are less likely to receive adequate prenatal care and more likely to face complications and negative outcomes during birth. Furthermore, teen mothers typically attain lower levels of education, are more likely to experience poverty, and often face health issues such as obesity and depression throughout their lives.

Table 3.3: Teenage Birth Rate

	Total Female Population Ages 10 to 19	Teenage Pregnancies	Teenage Pregnancies per 1,000 Females Ages 10 to 19
Caroline County	1739	25	14.4
Charles City County	296	4	13.5
Fredericksburg City	2253	38	16.9
Hanover County	7152	35	4.9
King & Queen County	340	5	14.7
King George County	1815	18	9.9
King William County	1004	8	8.0
New Kent County	1195	7	5.9
Spotsylvania County	9322	74	7.9
Stafford County	10968	70	6.4
<i>TVA Service Area</i>	<i>36084</i>	<i>284</i>	<i>7.9</i>
<i>Virginia</i>	<i>522266</i>	<i>5306</i>	<i>10.2</i>

Source: VA Dept of Health, Division of Health Statistics, Statistical Reports 2017

Key Findings

Fredericksburg has the highest teenage birth rate, while Hanover has the lowest. Thrive Virginia's service area has a lower teenage birth rate than Virginia as a whole.

Prenatal Care

Women who receive prenatal care during the first trimester tend to have healthier pregnancies. This early access to care allows for an early assessment of any risk factors for pregnancy. Further, it allows for earlier conversations around parental education which encourages healthy pregnancy behaviors and healthy parenting after the birth.

Table 3.4: Parents Receiving Prenatal Care in the First Trimester

	Total Births	Receiving Care	% Receiving Care
Caroline County	384	323	84.1
Charles City County	53	50	94.3
Fredericksburg City	413	333	80.6
Hanover County	942	832	88.3
King & Queen County	63	55	87.3
King George County	299	250	83.6
King William County	209	184	88.0
New Kent County	217	198	91.2
Spotsylvania County	1560	1324	84.9
Stafford County	1699	1456	85.7
<i>TVA Service Area</i>	<i>5839</i>	<i>5005</i>	<i>85.7</i>
<i>Virginia</i>	<i>102243</i>	<i>82321</i>	<i>80.5</i>

Source: VA Dept of Health, Division of Health Statistics, Virginia Health Statistics Annual Report 2016

Key Findings

Charles City has the highest access to prenatal care, while Fredericksburg has the lowest. The Thrive Virginia service area has a higher rate of mothers receiving prenatal care in the first trimester than Virginia.

Birth Weight

The Virginia Department of Health defines low birth weight as under 2500 grams and very low weight as under 1500 grams. Children born at a low weight have higher mortality rates and a higher likelihood of developmental and health issues throughout their lives; those born at a very low weight are also more likely to suffer from chronic health conditions.

Table 3.5: Low Birth Weight Rate

	Total Live Births	Low Weight	Very Low Weight	% Low Weight	% Very Low Weight
Caroline County	340	26	4	7.65	1.18
Charles City County	50	6	5	12.00	10.00
Fredericksburg City	421	33	6	7.84	1.43
Hanover County	941	65	14	6.91	1.49
King & Queen County	62	6	1	9.68	1.61
King George County	286	21	5	7.34	1.75
King William County	196	9	2	4.59	1.02
New Kent County	224	22	6	9.82	2.68
Spotsylvania County	1494	100	23	6.69	1.54
Stafford County	1732	113	20	6.52	1.15
<i>TVA Service Area</i>	<i>5746</i>	<i>401</i>	<i>86</i>	<i>6.98</i>	<i>1.50</i>
<i>Virginia</i>	<i>99655</i>	<i>8351</i>	<i>1538</i>	<i>8.38</i>	<i>1.54</i>

Source: VA Dept of Health, Division of Health Statistics, Statistical Reports 2017

Key Findings

Charles City has the highest rate of low weight and very low weight births; one in ten births is classified as very low weight. King William has the lowest rate of low and very low weight births. Thrive Virginia's service area has an overall lower rate of low weight and very low weight births than the Virginia average.

Infant Mortality

Infant mortality rates are an indicator of infant health; this rate tends to be linked to prenatal care and education, as well as both maternal and child health. Infant mortality tends to be particularly high in vulnerable populations, such as low-income and racial minority families

Table 3.6: Infant Mortality Rate

	Total Live Births	Infant Deaths	Deaths per 1,000 Live Births
Caroline County	340	0	0.0
Charles City County	50	2	40.0
Fredericksburg City	421	4	9.5
Hanover County	941	2	2.1
King & Queen County	62	1	16.1
King George County	286	1	3.5
King William County	196	3	15.3
New Kent County	224	2	8.9
Spotsylvania County	1494	12	8.0
Stafford County	1732	7	4.0
<i>TVA Service Area</i>	<i>5746</i>	<i>34</i>	<i>5.9</i>
<i>Virginia</i>	<i>99655</i>	<i>524</i>	<i>5.3</i>
Source: VA Dept of Health, Division of Health Statistics, Statistical Reports 2017			

Key Findings

Caroline has the lowest infant mortality rate, with no infant deaths recorded in 2017. Charles City has the highest infant mortality rate. Thrive Virginia's service area has a slightly higher infant mortality rate than Virginia.

Health and Well-being

Mortality

Mortality is a measure of the overall health in a community or region; variation in mortality rates can be linked to a range of factors, such as the age make-up of a population, access to healthcare, environmental risks, or income levels.

Table 3.7: Mortality Rate

	Total Population	Deaths	Deaths per 1,000 Pop.
Caroline County	30461	294	9.7
Charles City County	7004	91	13.0
Fredericksburg City	28360	205	7.2
Hanover County	105923	948	8.9
King & Queen County	7003	87	12.4
King George County	26337	183	6.9
King William County	16708	140	8.4
New Kent County	21682	168	7.7
Spotsylvania County	133033	939	7.1
Stafford County	146649	766	5.2
<i>TVA Service Area</i>	<i>523160</i>	<i>3821</i>	<i>7.3</i>
<i>Virginia</i>	<i>8470020</i>	<i>65217</i>	<i>7.7</i>

Source: VA Dept of Health, Division of Health Statistics, Statistical Reports 2017

Key Findings

Charles City has the highest mortality rate, while Stafford has the lowest. The Thrive Virginia service area has a slightly lower mortality rate than Virginia.

Cardiovascular Disease Mortality

Cardiovascular disease is often linked to a variety of lifestyle and health factors. It is more common among individuals who (a) are obese, (b) have diabetes or high cholesterol, (c) lack access to healthy foods and exercise opportunities, and (d) smoke or drink excessively. Many of these risk factors are preventable with sufficient access to healthcare and basic needs.

Table 3.8: Cardiovascular Disease Death Rate

	Total Population	Deaths from CVD	CVD Deaths per 100,000 Pop.
Caroline County	30178	54	178.9
Charles City County	7071	20	282.8
Fredericksburg City	28297	26	91.9
Hanover County	104392	211	202.1
King & Queen County	7159	28	391.1
King George County	25984	27	103.9
King William County	16334	38	232.6
New Kent County	21147	28	132.4
Spotsylvania County	132010	194	147.0
Stafford County	144361	145	100.4
<i>TVA Service Area</i>	<i>516933</i>	<i>771</i>	<i>149.1</i>
<i>Virginia</i>	<i>8411808</i>	<i>13777</i>	<i>163.8</i>
Source: VA Dept of Health, Division of Health Statistics, Virginia Health Statistics Annual Report 2016			

Key Findings

King & Queen has the highest rate of deaths from heart disease, while Fredericksburg has the lowest. Thrive Virginia's service area has a lower rate of heart disease deaths than Virginia.

Suicide Death Mortality

Suicide mortality is one indicator of mental health in a population. Suicide deaths are one example of ‘deaths of despair’—deaths associated with the mental health challenges that stem from long-term poverty and a lack of opportunity. Further, low access to mental health care and the stigma associated with mental illnesses mean that depression and suicidal thoughts often go unrecognized, unacknowledged, and untreated.

Table 3.9: Suicide Death Rate

	Total Population	Deaths from Suicide	Suicide Deaths per 100,000 Pop
Caroline County	30178	7	23.2
Fredericksburg City	28297	1	3.5
Hanover County	104392	12	11.5
King & Queen County	7159	1	14.0
King George County	25984	7	26.9
King William County	16334	5	30.6
New Kent County	21147	5	23.6
Spotsylvania County	132010	26	19.7
Stafford County	144361	15	10.4
<i>TVA Service Area</i>	<i>509862</i>	<i>79</i>	<i>15.5</i>
<i>Virginia</i>	<i>8411808</i>	<i>1132</i>	<i>13.5</i>

Source: VA Dept of Health, Division of Health Statistics, Virginia Health Statistics Annual Report 2016

Key Findings

King William has the highest suicide death rate, while Fredericksburg has the lowest. Thrive Virginia’s service area has a slightly higher suicide death rate than the Virginia average.

Opioid Overdose Mortality

The opioid crisis is a significant concern across the country right now. The ‘deaths from opioid overdose’ category only includes immediate deaths from opioid toxicity; this number does not take into account the deadly effects of long-term opioid abuse, accidents tied to opioids, and other deaths that ultimately stem from the crisis. Further, drug overdoses are an example of ‘deaths of despair’- deaths that arise from the mental health challenges associated with long-term poverty and lack of opportunity.

Table 3.10: Opioid Overdose Death Rate

	Deaths from Opioid Overdose	Opioid Deaths per 100,000 Pop
Caroline County	9	29.2
Charles City	1	14.4
Fredericksburg City	15	51.5
Hanover County	20	18.6
King & Queen County	2	28.4
King George County	8	30.1
King William County	3	17.7
New Kent County	3	13.4
Spotsylvania County	32	23.8
Stafford County	17	11.3
<i>Virginia</i>	<i>1215</i>	<i>14.3</i>

Source: VA Dept of Health, Office of the Chief Medical Examiner, Fatal Drug Overdose Report 2018

Key Findings

Fredericksburg has the highest opioid overdose death rate at over 51 deaths per 100,000 residents, while Stafford has the lowest at 11.3 deaths per 100,000 residents.

Adult Obesity

Obesity is a risk factor for many serious health problems, including cardiovascular disease and diabetes. High rates of obesity can be indicative of broader health issues in a community, such as lack of access to healthy foods and spaces for physical activity.

Table 3.11: Age-Adjusted Obesity Rate

	Age-adjusted Adults 20+ with Obesity	% with Obesity
Caroline County	9250	41.2
Charles City County	1981	34.0
Fredericksburg City	6558	31.8
Hanover County	24074	30.5
King & Queen County	2943	53.1
King George County	5639	29.8
King William County	3442	27.4
New Kent County	5373	32.4
Spotsylvania County	30767	31.7
Stafford County	35255	34.3
Source: US CDC, US Diabetes Surveillance System, Diabetes Atlas 2016		

Key Findings

King & Queen has the highest adult obesity rate at over 50%, while King William and King George have the lowest at under 30%.

Adult Diabetes

Diabetes prevalence is linked to environmental factors such as quality of diet and physical activity. Nutritious food and recreational opportunities are often less accessible to vulnerable populations such as low-income families. Those living in food deserts, working more than 40 hours a week, or living in unsafe neighborhoods often have fewer opportunities to eat healthy foods or pursue exercise; all of these factors can lead to a higher prevalence of diabetes.

Table: 3.12: Age-Adjusted Diabetes Rate

	Age-adjusted Adults 20+ with Diabetes	% with Diabetes
Caroline County	2983	11.8
Charles City County	1019	13.9
Fredericksburg City	2254	11.6
Hanover County	9738	10.5
King & Queen County	714	9.9
King George County	2492	12.4
King William County	1888	13.7
New Kent County	1478	7.5
Spotsylvania County	10720	10.3
Stafford County	7489	7.3

Source: US CDC, US Diabetes Surveillance System, Diabetes Atlas 2016

Key Findings

King William and Charles City have the highest adult diabetes rates, while New Kent and Stafford have the lowest.

Health and Well-being

Primary Care Access

Individuals living in regions with an insufficient number of primary care providers often experience poorer health outcomes. A higher rate of primary care providers is correlated with higher rates of routine check-ups and preventative care. Individuals who regularly see a primary provider often have lower overall healthcare costs since issues are identified and treated before they reach a crisis point.

Table 3.13: Access to Primary Care Providers

	Total Population	Primary Care Physicians	PCPs Per 100,000 Pop.
Caroline County	30461	5	16.41
Charles City County	7004	1	14.28
Fredericksburg City	28360	37	130.47
Hanover County	105923	75	70.81
King & Queen County	7003	3	42.84
King George County	26337	7	26.58
King William County	16708	5	29.93
New Kent County	21682	7	32.28
Spotsylvania County	133033	78	58.63
Stafford County	146649	46	31.37
<i>TVA Service Area</i>	<i>523160</i>	<i>264</i>	<i>50.46</i>
<i>Virginia</i>	<i>8470020</i>	<i>6423</i>	<i>75.83</i>

Source: University of Wisconsin, Population Health Institute, County Health Rankings 2019

Key Findings

Fredericksburg has the highest concentration of primary care physicians, while Caroline and Charles City have the lowest. The Thrive Virginia service area has less access to primary care providers than Virginia on average.

Dental Care Access

A lack of primary dental care can often lead to serious health problems and costly medical bills. Individuals living in regions with an insufficient number of dentists are more likely to experience infection and tooth loss which can be prevented by regular cleanings and check-ups.

Table 3.14: Access to Dentists

	Total Population	Dentists	Dentists Per 100,000 Pop.
Caroline County	30461	7	22.98
Charles City County	7004	2	28.56
Fredericksburg City	28360	59	208.04
Hanover County	105923	65	61.37
King George County	26337	12	45.56
King William County	16708	6	35.91
New Kent County	21682	5	23.06
Spotsylvania County	133033	58	43.60
Stafford County	146649	51	34.78
<i>TVA Service Area</i>	<i>516157</i>	<i>265</i>	<i>51.34</i>
<i>Virginia</i>	<i>8470020</i>	<i>5749</i>	<i>67.87</i>
Source: University of Wisconsin, Population Health Institute, County Health Rankings 2019			

Key Findings

Fredericksburg has the highest concentration of dentists, while Caroline and New Kent have the lowest. The Thrive Virginia service area has less overall access to dentists than Virginia's average.

Health and Well-being

Mental Health Care Access

A lack of community mental health providers can leave clients with long wait times for an appointment or lengthy travel times to see a doctor. Treatment for mental health problems often requires frequent appointments, making the scarcity of providers even more burdensome.

Table 3.15: Access to Mental Health Providers

	Total Population	Mental Health Providers	MHPs Per 100,000 Pop.
Caroline County	30461	8	26.26
Charles City County	7004	1	14.28
Fredericksburg City	28360	165	581.81
Hanover County	105923	144	135.95
King George County	26337	12	45.56
King William County	16708	9	53.87
New Kent County	21682	22	101.47
Spotsylvania County	133033	88	66.15
Stafford County	146649	105	71.6
<i>TVA Service Area</i>	<i>516157</i>	<i>554</i>	<i>107.33</i>
<i>Virginia</i>	<i>8470020</i>	<i>13494</i>	<i>159.31</i>
Source: University of Wisconsin, Population Health Institute, County Health Rankings 2019			

Key Findings

Fredericksburg has the highest concentration of mental health care providers, while Charles City has the lowest. Thrive Virginia's service area has overall lower access to mental healthcare providers than Virginia.

Child Abuse and Neglect

Virginia Child Protective Services defines a valid referral as any alleged report that simply meets the definition of child abuse and neglect; some of these referrals will not result in a full investigation. Children who experience abuse and neglect may face developmental issues and are left with long-lasting physical, mental, and emotional traumas.

Table 3.16: Child Abuse Rates

	Total Population Under 18	Valid Referrals	Valid Referrals per 1,000 Pop.
Caroline County	6892	112	16.25
Charles City County	1131	29	25.64
Fredericksburg City	5850	202	34.53
Hanover County	23409	154	6.58
King & Queen County	1349	63	46.70
King George County	6594	154	23.35
King William County	3803	54	14.20
New Kent County	4250	93	21.88
Spotsylvania County	33157	543	16.38
Stafford County	37546	570	15.18
<i>TVA Service Area</i>	<i>123981</i>	<i>1974</i>	<i>15.92</i>
Sources: VA DSS, Child Protective Services, 2017-18; US Census Bureau, ACS 5-Year Estimates 2013-17			

Key Findings

King & Queen has the highest rate of valid referrals for child abuse, at over three times the Thrive Virginia service area average. Hanover has the lowest rate.

Health and Well-being

Adult Abuse and Neglect

Adult Protective Services handles reports of abuse, neglect, and exploitation of disabled adults and the elderly. According to the Virginia Department of Social Services, many cases of abuse of the disabled and elderly go unreported because this population tends to be socially isolated. People with disabilities are more likely to experience physical and sexual abuse both in childhood and as adults. In contrast, elderly adults are often vulnerable to neglect and financial exploitation by their caregivers.

Table 3.17: Adult Abuse Rates

	Total Population 18+	APS Reports	Reports per 1,000 Pop.
Caroline County	22997	112	4.87
Charles City County	5891	9	1.53
Fredericksburg City	22285	137	6.15
Hanover County	79809	311	3.90
King & Queen County	5703	21	3.68
King George County	18970	8	0.42
King William County	12526	27	2.16
New Kent County	16273	41	2.52
Spotsylvania County	97002	299	3.08
Stafford County	103613	202	1.95
<i>TVA Service Area</i>	<i>385069</i>	<i>1167</i>	<i>3.03</i>
<i>Virginia</i>	<i>6499678</i>	<i>31436</i>	<i>4.84</i>
Sources: VA DARS, Adult Protective Services, Annual Report 2017-18			

Key Findings

King George has the lowest rate of APS reports, while Fredericksburg has the highest. Thrive Virginia's service area has an overall lower rate of APS reports than the Virginia average.

Domestic Violence and Sexual Assault Indicators

Domestic and sexual violence often have lasting effects on physical, mental, and emotional well-being. Also, survivors of these types of violence often face social stigma and situational instability. Hotlines provide a vital venue for survivors to seek help, while services like counseling and court accompaniment can assist them in processing trauma associated with violence.

Table 3.18: DV/SA Services and Engagement

	Population	Participants in Education	Total Hotline Calls	Total DV Calls	Total SV Calls
Caroline County	29889	242	101	67	21
Charles City County	7022	187	33	7	2
Fredericksburg City	28135	1553	620	304	83
Hanover County	103218	1094	1366	1241	267
King & Queen County	7052	274	32	17	4
King George County	25564	1501	83	35	22
King William County	16329	463	162	53	10
New Kent County	20523	1037	118	51	9
Spotsylvania County	130159	5337	433	272	82
Stafford County	141159	2010	456	292	89
<i>TVA Service Area</i>	<i>509050</i>	<i>13698</i>	<i>3404</i>	<i>2339</i>	<i>589</i>
	Total clients receiving services	Reporting missed time from work and/or loss of income	Requesting protective orders	Court accompaniments	Counseling sessions
Caroline County	120	65	12	70	998
Charles City County	74	24	3	4	472
Fredericksburg City	263	123	25	50	1958
Hanover County	332	135	120	284	3499
King & Queen County	47	4	0	1	313
King George County	162	42	18	79	585
King William County	113	48	13	13	630
New Kent County	151	51	12	45	662
Spotsylvania County	629	376	67	305	3998
Stafford County	609	350	41	408	4056
West Point	22	2	0	0	73
<i>TVA Service Area</i>	<i>2522</i>	<i>1220</i>	<i>311</i>	<i>1259</i>	<i>17244</i>

Source: VAData, FY19

Health and Well-being

Domestic Violence and Sexual Assault Shelter Access

Shelters are a vital resource for ensuring that survivors have a safe place to go when leaving a violent or abusive situation. However, these shelters often require significant resources to maintain their services, and there may not always be sufficient space for everyone who could benefit. The number of requests when shelters are full provides one measure of the level of need for new or expanded shelters in our service area.

Table 3.19: Shelter Requests

	People in emergency shelter	Total nights of shelter provided	Total requests when shelter full
Caroline County	16	593	0
Charles City County	6	362	0
Fredericksburg City	54	1351	1
Hanover County	25	610	13
King & Queen County	0	0	1
King George County	6	749	0
King William County	8	30	0
New Kent County	5	163	0
Spotsylvania County	97	2956	1
Stafford County	108	3039	1
West Point	2	8	0
<i>TVA Service Area</i>	<i>327</i>	<i>9861</i>	<i>17</i>

*Many counties in our service area do not have a designated shelter for survivors of domestic or sexual violence. In these counties, alternative housing such as hotel rooms are often offered in emergencies; as such, there would be no recorded requests when a shelter is full. The lack of requests does not indicate a lack of need, but rather a different type of need.

Sources: VADData, FY19

Key Findings

Hanover County has the most requests when shelters are full. However, many counties in the Thrive Virginia service area do not report any requests when shelters are full.

Domestic Violence and Sexual Assault Emergency Financial Assistance

Lack of adequate financial resources can be a significant obstacle to leaving a domestic violence situation, so financial assistance is a vital part of domestic violence programs. The term ‘basic needs assistance’ includes rent, utilities, and groceries. By making these resources available, programs can increase the chances that survivors will leave abusive relationships permanently.

Table 3.20: Emergency Financial Assistance*

	Total clients receiving services	Total receiving emergency transportation assistance	Total receiving basic needs assistance	% Receiving Emergency Transportation and/or Basic Needs Assistance
Charles City County	113	8	35	38.05
King & Queen County	47	7	17	51.06
King William County	22	3	6	40.91
New Kent County	74	4	15	25.68
West Point	151	11	28	25.83
<i>TVA Service Area</i>	<i>407</i>	<i>33</i>	<i>101</i>	<i>32.92</i>
*Due to variation in reporting methods, this table reflects only clients served by Project Hope at Thrive Virginia, not the entire base of VADData participants.				
Sources: VADData, FY19				

Key Findings

King & Queen has the highest percentage of clients receiving these types of financial assistance, while New Kent and West Point have the lowest.

Health and Well-being

	Caroline	Charles City	Fredericks- burg	Hanover	King & Queen	King George	King William	New Kent	Spotsylvania	Stafford
Uninsured [†]	9	10	11	6	12	8	7	6	9	8
Hospital [‡]	123	123	129	96	125	101	108	96	111	88
Teen Births [†]	14	14	17	5	15	10	8	6	8	6
Prenatal [†]	84	94	81	88	87	84	88	91	85	86
Low Birth Weight [†]	8	12	8	7	10	7	5	10	7	7
Infant Mortality [†]	0	40	10	2	16	4	15	9	8	4
Mortality [†]	10	13	7	9	12	7	8	8	7	5
CVD Deaths [‡]	179	283	92	202	391	104	233	132	147	100
Suicide Deaths [‡]	23	N/A	4	12	14	27	31	24	20	10
Opioid Deaths [‡]	29	14	52	19	28	30	18	13	24	11
PCP Access [‡]	16	14	130	71	43	27	30	32	59	31
Dentist Access [‡]	23	29	208	61	N/A	46	36	23	44	35
MHP Access [‡]	26	14	582	136	N/A	46	54	101	66	72
Child Abuse ^{*‡}	16	26	35	7	47	23	14	22	16	15
Adult Abuse [†]	5	2	6	4	4	0	2	3	3	2

* Indicates that TVA Service Area totals were used for comparison due to Virginia totals being unavailable

[†] Indicates data given as a percentage of the population

[‡] Indicates data given as a ratio to population

	= Locality with a lesser need than the Virginia average
	= Locality with a similar need to the Virginia average
	= Locality with a greater need than the Virginia average
	= Data unavailable for this locality

Educational Attainment

Table 4.1: Educational Attainment

	Less than HS Diploma	HS Diploma or Equivalent	Some College, No Degree	Associate's Degree	Bachelor's Degree	Graduate or Professional Degree
Caroline County	3371	7521	4117	1486	2748	1159
Charles City County	1184	2181	1039	323	432	259
Fredericksburg City	1461	3832	3369	888	4053	3131
Hanover County	5045	18467	14497	5799	17767	8999
King & Queen County	753	2169	882	398	583	394
King George County	1048	4561	3908	1534	3632	2109
King William County	1173	4204	2684	1103	1554	590
New Kent County	1090	5031	3563	1111	2467	1496
Spotsylvania County	8636	26106	18389	6447	16280	9804
Stafford County	5634	20020	21303	7967	20410	14221
<i>TVA Service Area</i>	<i>29395</i>	<i>94092</i>	<i>73751</i>	<i>27056</i>	<i>69926</i>	<i>42162</i>
<i>Virginia</i>	<i>623937</i>	<i>1378738</i>	<i>1117556</i>	<i>427037</i>	<i>1220919</i>	<i>912578</i>
<i>United States</i>	<i>27437114</i>	<i>59093612</i>	<i>44935834</i>	<i>17917481</i>	<i>41377068</i>	<i>25510535</i>
	% Less than HS Diploma	% HS Diploma or Equivalent	% Some College, No Degree	% Associate's Degree	% Bachelor's Degree	% Graduate or Professional Degree
Caroline County	16.5	36.9	20.2	7.3	13.5	5.7
Charles City County	21.9	40.3	19.2	6.0	8.0	4.8
Fredericksburg City	8.7	22.9	20.1	5.3	24.2	18.7
Hanover County	7.1	26.2	20.5	8.2	25.2	12.8
King & Queen County	14.5	41.9	17.0	7.7	11.3	7.6
King George County	6.2	27.2	23.3	9.1	21.6	12.6
King William County	10.4	37.2	23.7	9.8	13.7	5.2
New Kent County	7.4	34.1	24.1	7.5	16.7	10.1
Spotsylvania County	10.1	30.5	21.5	7.5	19.0	11.4
Stafford County	6.3	22.4	23.8	8.9	22.8	15.9
<i>TVA Service Area</i>	<i>8.7</i>	<i>28.0</i>	<i>21.9</i>	<i>8.0</i>	<i>20.8</i>	<i>12.5</i>
<i>Virginia</i>	<i>11.0</i>	<i>24.3</i>	<i>19.7</i>	<i>7.5</i>	<i>21.5</i>	<i>16.1</i>
<i>United States</i>	<i>12.7</i>	<i>27.3</i>	<i>20.8</i>	<i>8.3</i>	<i>19.1</i>	<i>11.8</i>

Source: US Census Bureau, ACS 5-Year Estimates 2013-17

Key Findings

Thrive Virginia's service area has average educational attainment levels similar to those of Virginia and the United States as a whole.

Education and Employment

High School Graduation

High school graduates typically have increased financial well-being throughout their lives; a diploma allows for extended employment opportunities and education options which lead to lower poverty rates for graduates. Further, this heightened financial stability contributes to better average health outcomes.

Table 4.2: Graduation Rate

	Total Cohort	% On-Time Graduation
Caroline County Public Schools	301	93.0
Charles City County Public Schools	42	100.0
Fredericksburg City Public Schools	266	84.2
Hanover County Public Schools	1484	95.0
King & Queen County Public Schools	34	94.1
King George County Public Schools	305	94.1
King William County Public Schools	173	94.8
New Kent County Public Schools	241	90.9
Spotsylvania County Public Schools	1915	93.2
Stafford County Public Schools	2377	93.9
West Point Public Schools	65	96.9
<i>Virginia</i>	<i>98413</i>	<i>91.5</i>
Source: VA DOE, Virginia Cohort Reports Class of 2019		

Key Findings

Charles City has a 100% on-time graduation rate as of 2019. Fredericksburg has the lowest on-time graduation rate at under 85%. However, every locality aside from Fredericksburg and New Kent have on-time graduation rates above the Virginia average of 91.5%.

High School Dropout

Students who do not complete high school typically have less stability in their employment and lower levels of financial success. Many jobs list a high school diploma as a minimum requirement, and a diploma is necessary for pursuing most forms of higher education. Also, the lack of financial stability associated with dropping out of high school often leads to poorer health outcomes.

Table 4.3: Drop Out Rate		
	Total Cohort	% Dropouts
Caroline County Public Schools	301	4.0
Charles City County Public Schools	42	0.0
Fredericksburg City Public Schools	266	11.3
Hanover County Public Schools	1484	2.4
King & Queen County Public Schools	34	0.0
King George County Public Schools	305	3.0
King William County Public Schools	173	2.9
New Kent County Public Schools	241	3.7
Spotsylvania County Public Schools	1915	3.9
Stafford County Public Schools	2377	4.3
West Point Public Schools	65	1.5
<i>Virginia</i>	<i>98413</i>	<i>5.6</i>
Source: VA DOE, Virginia Cohort Reports Class of 2019		

Key Findings

Fredericksburg has the highest high school drop-out rate at over 10%; however, it is the only locality in the Thrive Virginia service area with a higher drop-out rate than the Virginia average of 5.6%. Charles City and King & Queen both have a 0% drop-out rate for their Class of 2019 cohort.

Education and Employment

FAFSA Completion

The FAFSA, or the Free Application for Federal Student Aid, is a standardized application that determines a student's eligibility for federal student aid programs. Students who complete the FAFSA are more likely to enroll in higher education since financial aid makes college more affordable.

Table 4.4: FAFSA Completion Rate

	Total Cohort	FAFSA Completed	% FAFSA Completed
Caroline County Public Schools	301	132	43.85
Charles City County Public Schools	42	24	57.14
Fredericksburg City Public Schools	266	136	51.13
Hanover County Public Schools	1484	913	61.52
King & Queen County Public Schools	34	23	67.65
King George County Public Schools	305	168	55.08
King William County Public Schools	173	81	46.82
New Kent County Public Schools	241	120	49.79
Spotsylvania County Public Schools	1915	1078	56.29
Stafford County Public Schools	2377	1361	58.52
West Point Public Schools	65	40	61.54
<i>TVA Service Area</i>	<i>7203</i>	<i>4076</i>	<i>56.59</i>
Sources: US DOE, Office of Federal Student Aid, FAFSA Application Volume Reports 2019-20; VA DOE, Virginia Cohort Reports Class of 2019			

Key Findings

King & Queen has the highest FAFSA completion rate, while Caroline has the lowest. On average, more than half of the students in Thrive Virginia's service area complete the FAFSA.

Higher Education Enrollment

The higher education enrollment indicator shows how many students in the most recent graduating class are enrolled in any institute of higher learning within 16 months of their high school graduation. Individuals who attend college have greater career stability and better health outcomes than those who do not.

Table 4.5: Higher Education Enrollment of Graduating Class

	Total Students	Enrolled	% Enrolled
Caroline County Public Schools	242	106	44
Charles City County Public Schools	44	20	45
Fredericksburg City Public Schools	207	123	59
Hanover County Public Schools	1406	991	70
King & Queen County Public Schools	27	9	33
King George County Public Schools	302	170	56
King William County Public Schools	146	70	48
New Kent County Public Schools	226	125	55
Spotsylvania County Public Schools	1673	1067	64
Stafford County Public Schools	2252	1540	68
West Point Public Schools	69	50	72
<i>TVA Service Area</i>	<i>6594</i>	<i>4271</i>	<i>65</i>
<i>Virginia</i>	<i>85899</i>	<i>57725</i>	<i>67</i>
Source: VA DOE, State Fiscal Stabilization Fund Indicator Report 2018 Cohort			

Key Findings

Hanover and West Point have the highest rate of higher education enrollment, while King & Queen has the lowest, with only one-third of graduates enrolled within 16 months of graduation. The Thrive Virginia's service area has a slightly lower rate of higher education enrollment than Virginia.

Education and Employment

Chronic Absenteeism

In Virginia, a student who receives a court referral after seven unexcused absences is considered truant. Students with excessive absences often struggle to keep up with their studies and fail to graduate on time. Absenteeism can be indicative of struggles in many areas of a student's life.

Table 4.6: Truancy Rate

	Total Students	Truancy	% Truant
Caroline County Public Schools	4214	30	0.71
Fredericksburg City Public Schools	3710	48	1.29
Hanover County Public Schools	17727	34	0.19
King & Queen County Public Schools	829	3	0.36
King George County Public Schools	4477	17	0.38
King William County Public Schools	2227	11	0.49
New Kent County Public Schools	3307	5	0.15
Spotsylvania County Public Schools	23683	334	1.41
Stafford County Public Schools	29485	376	1.28
West Point Public Schools	813	1	0.12
<i>TVA Service Area</i>	<i>90472</i>	<i>859</i>	<i>0.95</i>
<i>Virginia</i>	<i>1290513</i>	<i>14326</i>	<i>1.11</i>
Sources: VA DOE, Fall Membership Reports 2018-19; VA DOE, School Climate Reports 2018-19			

Key Findings

Spotsylvania has the highest absenteeism rate, while West Point and New Kent have the lowest. Thrive Virginia's service area has an overall lower absenteeism rate than the Virginia average.

Student Discipline

Student suspensions and expulsions are associated with problems in and out of school. Students who experience these disciplinary outcomes display more behavioral issues and academic struggles than other students. Students who are suspended or expelled are also less likely to complete high school.

Table 4.7: Suspension and Expulsion Rate

	Expulsions	Long-Term Suspensions	Short-Term Suspensions	% Students Suspended or Expelled*
Caroline County Public Schools	0	<	317	7.52
Charles City County Public Schools	0	<	44	6.95
Fredericksburg City Public Schools	0	0	355	9.57
Hanover County Public Schools	0	<	506	2.85
King George County Public Schools	0	<	222	4.96
King William County Public Schools	<	0	205	9.21
King & Queen County Public Schools	0	0	58	7.00
New Kent County Public Schools	0	<	150	4.54
Spotsylvania County Public Schools	<	113	1063	4.97
Stafford County Public Schools	<	70	1774	6.30
West Point Public Schools	0	0	36	4.43
<i>TVA Service Area*</i>	<i>0</i>	<i>183</i>	<i>4730</i>	<i>5.41</i>
< Indicates suppressed results for identity protection				
*Results exclude data that have been suppressed for identity protection				
Source: VA DOE, Safe Schools Information Resource, Student Disciplinary Outcome Report 2018-19				

Key Findings

According to this estimated measure, Fredericksburg has the highest student discipline rate, while Hanover has the lowest. On average, about 1 in 20 students in the Thrive Virginia's service area is suspended or expelled yearly.

Education and Employment

Juvenile Crime

The Juvenile Crime indicator includes Group A arrests which are the most severe offenses. Group A crimes include arson, assault, bribery, burglary, counterfeiting, destruction of property, drug offenses, embezzlement, extortion, fraud, gambling, homicide, kidnapping, larceny, motor vehicle theft, pornography, prostitution, robbery, sex offenses, and weapon law violations.

Table 4.8: Juvenile Crime Rate

	Total Population	Juvenile Arrests	Arrests per 1000 Pop.
Caroline County Sheriff Office	29126	2	0.07
Charles City County Sheriff's Office	7017	2	0.29
Fredericksburg Police Department	28387	6	0.21
Hanover County Sheriff's Office	99561	183	1.84
King & Queen County Sheriff's Office	6940	4	0.58
King George County Sheriff Office	25863	3	0.12
King William Sheriff Office	13604	15	1.10
New Kent Sheriff's Office	22462	15	0.67
Spotsylvania County Sheriff's Office	133441	22	0.16
Stafford County Sheriff's Office	149110	42	0.28
West Point Police Department	3312	0	0.00
<i>TVA Service Area</i>	<i>518823</i>	<i>294</i>	<i>0.57</i>
<i>Virginia</i>	<i>8517685</i>	<i>10277</i>	<i>1.21</i>
Source: VA Dept of State Police, Crime in Virginia Report 2018			

Key Findings

West Point has the lowest juvenile crime rate, with no juvenile arrests made in 2018. Hanover has the highest rate. Thrive Virginia's service area has an overall lower juvenile crime rate than Virginia.

Labor Market Participation

Labor market participation measures how many working-age adults are actually employed, whereas the unemployment rate only measures the number of adults *actively seeking* jobs (not the number of adults without employment).

Table 4.9: Labor Market Participation Rate

	Total Population 25 to 64	% Labor Force Participation
Caroline County	15803	78.1
Charles City County	3872	75.4
Fredericksburg City	13774	84.0
Hanover County	54048	84.4
King & Queen County	3642	76.7
King George County	13696	81.5
King William County	8887	83.4
New Kent County	11498	79.4
Spotsylvania County	69175	80.6
Stafford County	76298	80.6
<i>Virginia</i>	<i>4492898</i>	<i>79.8</i>
<i>United States</i>	<i>168539255</i>	<i>77.5</i>

Source: US Census Bureau, ACS 5-Year Estimates 2013-17

Key Findings

Fredericksburg and Hanover have the highest labor market participation rate. Charles City and King & Queen have the lowest; however, every other locality in the Thrive Virginia's service area has a higher labor market participation rate than the United States average.

Education and Employment

	Caroline	Charles City	Fredericksburg	Hanover	King & Queen	King George	King William	New Kent	Spotsylvania	Stafford	West Point
Graduation [†]	93	100	84	95	94	94	95	91	93	94	97
Drop Out [†]	4	0	11	2	0	3	3	4	4	4	2
FAFSA ^{*†}	44	57	51	62	68	55	47	50	56	59	62
Higher Ed [†]	44	45	59	70	33	56	48	55	64	68	72
Absenteeism [†]	0.7	N/A	1.3	0.2	0.4	0.4	0.5	0.2	1.4	1.3	0.1
Suspensions and Expulsions ^{*†}	8	7	10	3	5	9	7	5	5	6	4
Juvenile Crime [‡]	0.1	0.3	0.2	1.8	0.6	0.1	1.1	0.7	0.2	0.3	0.0
Labor Market [†]	78	75	84	84	77	82	83	79	81	81	N/A

* Indicates that TVA Service Area totals were used for comparison due to Virginia totals being unavailable

[†] Indicates data given as a percentage of the population

[‡] Indicates data given as a ratio to population

	= Locality with a lesser need than the Virginia average
	= Locality with a similar need to the Virginia average
	= Locality with a greater need than the Virginia average
	= Data unavailable for this locality

Low-Income

The Federal Poverty Level establish a base poverty line; however, individuals living above 100% of the Federal Poverty Level (but below 200% of the Federal Poverty Level) can still be economically vulnerable because an incident such as a sudden health problem, temporary unemployment, or automobile accident could be financially devastating. They can also face challenges in accessing resources, as many aid programs use the Federal Poverty Level as their criteria, thus limiting the assistance available to this vulnerable population.

Table 5.1: Population Living Below 200% of Federal Poverty Threshold

	Total Population	# Living Below 200% of Poverty	% Living Below 200% of Poverty
Caroline County	27713	7941	28.65
Charles City County	6994	2169	31.01
Fredericksburg City	25588	7627	29.81
Hanover County	101303	14847	14.66
King & Queen County	7052	2933	41.59
King George County	25348	4959	19.56
King William County	16258	3788	23.30
New Kent County	19899	2328	11.70
Spotsylvania County	129250	26742	20.69
Stafford County	137222	20992	15.30
<i>TVA Service Area</i>	<i>496627</i>	<i>94326</i>	<i>18.99</i>
<i>Virginia</i>	<i>8116130</i>	<i>2111589</i>	<i>26.02</i>
<i>United States</i>	<i>313048563</i>	<i>102523670</i>	<i>32.75</i>
Source: US Census Bureau, ACS 5-Year Estimates 2013-17			

Key Findings

King & Queen has the highest rate of residents living below 200% of the Federal Poverty Level, while New Kent has the lowest. The Thrive Virginia service area has a lower rate of residents living below 200% of the Federal Poverty Level than Virginia or the United States.

Financial Well-being

Low-Income Children

Children are especially vulnerable to the effects of poverty; those in low-income households are more likely to struggle academically and to face health issues throughout childhood and into their adult lives. Further, families with children are often more economically vulnerable due to the high cost of childcare, education, and healthcare.

Table 5.2: Children Living Below 200% of the Federal Poverty Level

	Total Population Under 18	Below 200% Poverty	% Below 200% Poverty
Caroline County	6770	2793	41.26
Charles City County	1103	499	45.24
Fredericksburg City	5795	2486	42.90
Hanover County	23090	4208	18.22
King & Queen County	1349	1005	74.50
King George County	6551	1762	26.90
King William County	3785	1403	37.07
New Kent County	4143	680	16.41
Spotsylvania County	32581	9148	28.08
Stafford County	36912	7650	20.72
<i>TVA Service Area</i>	<i>122079</i>	<i>31634</i>	<i>25.91</i>
<i>Virginia</i>	<i>1838741</i>	<i>610867</i>	<i>33.22</i>
<i>United States</i>	<i>72430017</i>	<i>30595652</i>	<i>42.24</i>
Source: US Census Bureau, ACS 5-Year Estimates 2013-17			

Key Findings

King & Queen has the highest rate of economically vulnerable children, with almost ¾ of children living below 200% of the Federal Poverty Level. Thrive Virginia's service area has lower rates of children living below 200% of the Federal Poverty Level than Virginia or the United States; however, over one in four children in the region falls below this poverty level.

Asset Poverty

Asset poverty identifies households that do not have sufficient net worth to live above the Federal Poverty Level for three months if they lost a source of income. This measure of net worth includes both savings and assets, such as a home, car, or business. Households in asset poverty are economically vulnerable and could be heavily impacted by unexpected costs such as a health emergency, car repair, or lapse in employment.

Table 5.3: Asset Poverty Rate

	Total Population	% Asset Poverty
Caroline County	29889	25.0
Charles City County	7022	27.6
Fredericksburg City	28135	29.1
Hanover County	103218	15.9
King & Queen County	7052	20.2
King George County	25564	18.2
King William County	16329	21.1
New Kent County	20523	16.9
Spotsylvania County	130159	19.7
Stafford County	141159	19.9
West Point	3316	13.2
<i>Virginia</i>	<i>8470020</i>	<i>21.4</i>
<i>United States</i>	<i>N/A</i>	<i>25.3</i>
Source: Prosperity Now Scorecard, Financial Assets, and Income, Local Outcome Reports 2017		

Key Findings

Fredericksburg and Charles City have the highest rates of asset poverty, while West Point has the lowest.

Cost-Burdened Households

Cost-burdened households spend more than 30% of their income on housing costs. Families who must pay such a large portion of their income on housing have a harder time affording necessities such as healthcare and food. Further, these households are more vulnerable to falling behind in housing payments in the case of an emergency which could lead to eviction or repossession of their home.

Table 5.4: Cost-Burdened Households

	Total Households	Cost-burdened	% Cost-burdened
Caroline County	10815	2874	26.57
Charles City County	2899	776	26.77
Fredericksburg City	10419	3991	38.31
Hanover County	38208	8370	21.91
King & Queen County	2811	577	20.53
King George County	8972	2348	26.17
King William County	6079	1412	23.23
New Kent County	7555	1627	21.54
Spotsylvania County	43279	12542	28.98
Stafford County	45345	12228	26.97
<i>TVA Service Area</i>	<i>176382</i>	<i>46745</i>	<i>26.50</i>
<i>Virginia</i>	<i>3105636</i>	<i>942435</i>	<i>30.35</i>
<i>United States</i>	<i>118825921</i>	<i>38077292</i>	<i>32.04</i>

Source: US Census Bureau, ACS 5-Year Estimates 2013-17

Key Findings

Fredericksburg has the highest rate of cost-burdened households, while New Kent, Hanover, and King & Queen have the lowest rates. The Thrive Virginia service area has a lower rate of cost-burdened families than both Virginia and the United States.

Evictions

In addition to the immediate loss of housing, eviction can have significant long-term effects on households. Housing insecurity causes instability in schooling and employment; possessions are often lost or thrown away while individuals search for new housing, and the court record that comes with eviction makes it harder to find new housing. Further, eviction can have a negative impact on social connections as families are forced out of their communities and can contribute to poor mental health.

Table 5.5: Eviction Rate

	Total Renter Households	Evictions	Evictions per 100 Renter Homes
Caroline County	2304	113	4.90
Charles City County	561	15	2.67
Fredericksburg City	7221	281	3.89
Hanover County	7294	195	2.67
King & Queen County	656	22	3.35
King George County	2064	84	4.07
King William County	1189	37	3.11
New Kent County	988	27	2.73
Spotsylvania County	9792	548	5.60
Stafford County	10796	527	4.88
West Point	402	9	2.16
<i>TVA Service Area</i>	<i>43267</i>	<i>1858</i>	<i>4.29</i>
<i>Virginia</i>	<i>1012175</i>	<i>51821</i>	<i>5.12</i>
<i>United States</i>	<i>38372860</i>	<i>898479</i>	<i>2.34</i>

Source: Princeton University, The Eviction Lab 2016

Key Findings

Spotsylvania has the highest rate of evictions. Charles City, Hanover, and West Point have the lowest eviction rates. The Thrive Virginia service area has eviction rates above the United States average but below the Virginia average.

Financial Well-being

Underbanked and Unbanked Households

Unbanked households have neither a savings account nor a checking account. In contrast, underbanked households do have a checking and/or savings account, but still have to use alternative services such as payday loans and money orders to meet their financial needs. It is more challenging to save money without a bank account; further, unbanked and underbanked households often have to pay significant fees for routine actions like cashing a paycheck.

Table 5.6: Underbanked and Unbanked Households

	Total Households	% Underbanked	% Unbanked
Caroline County	10815	18.5	6.2
Charles City County	2899	20.2	7.1
Fredericksburg City	10419	18.5	10.7
Hanover County	38208	13.9	3.1
King & Queen County	2811	23.4	6.9
King George County	8972	21.3	4.9
King William County	6079	16.3	3.7
New Kent County	7555	15.0	3.5
Spotsylvania County	43279	16.2	4.9
Stafford County	45345	17.4	4.0
West Point	1318	14.5	2.5
<i>Virginia</i>	<i>N/A</i>	<i>20.6</i>	<i>3.0</i>
<i>United States</i>	<i>N/A</i>	<i>18.7</i>	<i>6.5</i>

Source: Prosperity Now Scorecard, Financial Assets, and Income, Local Outcome Reports 2017

Key Findings

King & Queen and Fredericksburg have the highest rate of underbanked and unbanked households, respectively. West Point has the lowest rate of both unbanked and underbanked households.

Unemployment

Unemployment levels are heavily influenced by outside factors such as international and national economic trends; however, they also serve as an indication of the economic strength of a community. Higher unemployment often means less access to desirable jobs, while lower unemployment suggests the presence of thriving industries.

Table 5.7: Unemployment Rate

	Total Labor Force	Unemployed	% Unemployed
Caroline County	15467	513	3.3
Charles City County	3814	137	3.6
Fredericksburg City	14063	507	3.6
Hanover County	59906	1528	2.6
King & Queen County	4025	113	2.8
King George County	13374	361	2.7
King William County	9274	245	2.6
New Kent County	12402	325	2.6
Spotsylvania County	68007	2101	3.1
Stafford County	71890	2071	2.9
<i>TVA Service Area</i>	<i>272222</i>	<i>7901</i>	<i>2.9</i>
<i>Virginia</i>	<i>4442939</i>	<i>129817</i>	<i>2.9</i>
Source: US Dept of Labor, Bureau of Labor Statistics, Local Area Unemployment Statistics June 2019			

Key Findings

Unemployment rates are relatively stable across Thrive Virginia's service area, and the Thrive Virginia service area rate is identical to the Virginia average.

Financial Well-being

	Caroline	Charles City	Fredericksburg	Hanover	King & Queen	King George	King William	New Kent	Spotsylvania	Stafford	West Point
Pop. Poverty [†]	29	31	30	15	42	20	23	12	21	15	N/A
Child Poverty [†]	41	45	43	18	75	27	37	16	28	21	N/A
Asset Poverty [†]	25	28	29	16	20	18	21	17	20	20	13
Cost-Burdened [†]	27	27	38	22	21	26	23	22	29	27	N/A
Eviction [‡]	5	3	4	3	3	4	3	3	6	5	2
Unbanked [†]	6	7	11	3	7	5	4	4	5	4	3
Underbanked [†]	19	20	19	14	23	21	16	15	16	17	15
Unemployment [†]	3	4	4	3	3	3	3	3	3	3	N/A

[†] Indicates data given as a percentage of the population

[‡] Indicates data given as a ratio to population

	= Locality with a lesser need than the Virginia average
	= Locality with a similar need to the Virginia average
	= Locality with a greater need than the Virginia average
	= Data unavailable for this locality

Quantitative Data Sources

- College of William and Mary, Schroeder Center for Health Policy, Inpatient Hospital Utilization in the Commonwealth of Virginia Data Analysis 2016
- Feeding America, Map the Meal Gap 2017
- Princeton University, The Eviction Lab 2016
- Prosperity Now Scorecard, Financial Assets and Income 2017
- United States Census Bureau, American Communities Survey 5-Year Estimates 2013-17
- United States Census Bureau, Decennial Census 2010
- United States Centers for Disease Control and Prevention, United States Diabetes Surveillance System, Diabetes Atlas 2016
- United States Department of Agriculture, Economic Research Service, Food Environment Atlas 2015
- United States Department of Education, Office of Federal Student Aid, FAFSA Application Volume Reports 2019-20
- United States Department of Housing and Urban Development, Continuum of Care Program, Point-In-Time Count 2018
- United States Department of Labor, Bureau of Labor Statistics, Local Area Unemployment Statistics June 2019
- The University of Wisconsin, Population Health Institute, County Health Rankings 2019
- Virginia Department of Aging and Rehabilitative Services, Adult Protective Services, Annual Report 2017-18
- Virginia Department of Education, Fall Membership Reports 2018-19
- Virginia Department of Education, Office of School Nutrition Programs, National School Lunch Program Free and Reduced-Price Eligibility Reports 2018-19
- Virginia Department of Education, Safe Schools Information Resource, Student Disciplinary Outcome Report 2018-19
- Virginia Department of Education, School Climate Reports 2018-19
- Virginia Department of Education, State Fiscal Stabilization Fund Indicator Report 2018 Cohort
- Virginia Department of Education, Virginia Cohort Reports Class of 2019
- Virginia Department of Health, Division of Health Statistics, Statistical Reports 2017
- Virginia Department of Health, Division of Health Statistics, Virginia Health Statistics Annual Report 2016
- Virginia Department of Health, Office of the Chief Medical Examiner, Fatal Drug Overdose Report 2018
- Virginia Department of Social Services, Child Protective Services 2017-18
- Virginia Department of State Police, Crime in Virginia Report 2018
- Virginia Sexual and Domestic Action Alliance, VAData, the Fiscal Year 2019 Reports

Financial Well-being

Copy of Survey Tool

By completing this survey, you will help Quin Rivers understand the resources and needs of individuals and families in our service area. You will be asked questions about education, employment, housing, healthcare, and other basic needs. This survey will take approximately 10-15 minutes. There is no risk in participating and no penalty for choosing not to participate.

Section 1: Demographic Information

1. Please select where you live:

<input type="checkbox"/> Caroline County	<input type="checkbox"/> King & Queen County	<input type="checkbox"/> Spotsylvania County
<input type="checkbox"/> Charles City County	<input type="checkbox"/> King George County	<input type="checkbox"/> Stafford County
<input type="checkbox"/> City of Fredericksburg	<input type="checkbox"/> King William County	<input type="checkbox"/> Town of West Point
<input type="checkbox"/> Hanover County	<input type="checkbox"/> New Kent County	<input type="checkbox"/> Other (please specify): _____
2. Please select your age group:

<input type="checkbox"/> 18-24	<input type="checkbox"/> 25-34	<input type="checkbox"/> 35-44	<input type="checkbox"/> 45-54	<input type="checkbox"/> 55-64	<input type="checkbox"/> 65-84	<input type="checkbox"/> 85+
--------------------------------	--------------------------------	--------------------------------	--------------------------------	--------------------------------	--------------------------------	------------------------------
3. Please select your race/ethnicity:

<input type="checkbox"/> White	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Asian	<input type="checkbox"/> Multiple
<input type="checkbox"/> Black	<input type="checkbox"/> Latino	<input type="checkbox"/> Native American	<input type="checkbox"/> Other
4. Please select your gender:

<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Non-binary	<input type="checkbox"/> Other (please specify): _____
-------------------------------	---------------------------------	-------------------------------------	--
5. Please select your sexual orientation:

<input type="checkbox"/> Straight/heterosexual	<input type="checkbox"/> Lesbian	<input type="checkbox"/> Pansexual	<input type="checkbox"/> Other (please specify): _____
<input type="checkbox"/> Gay	<input type="checkbox"/> Bisexual	<input type="checkbox"/> Asexual	
6. Please select your marital status:

<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Living with partner	<input type="checkbox"/> Other (please specify): _____
<input type="checkbox"/> Single	<input type="checkbox"/> Divorced	<input type="checkbox"/> Widowed	
7. Please select your annual household income:

<input type="checkbox"/> Less than \$12,490	<input type="checkbox"/> \$21,330-\$25,749	<input type="checkbox"/> \$34,590-\$39,009
<input type="checkbox"/> \$12,490-\$16,909	<input type="checkbox"/> \$25,750-\$30,169	<input type="checkbox"/> \$39,010-\$43,429
<input type="checkbox"/> \$16,910-\$21,329	<input type="checkbox"/> \$30,170-\$34,589	<input type="checkbox"/> \$43,430 or More
8. Please select the number of people in your household:

<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9+
----------------------------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------	-----------------------------

Section 2: Housing and Transportation

1. What is your housing status?

<input type="checkbox"/> Own	<input type="checkbox"/> Group home/halfway house	<input type="checkbox"/> Other (please specify): _____
<input type="checkbox"/> Rent	<input type="checkbox"/> Assisted living/nursing care	
<input type="checkbox"/> Homeless	<input type="checkbox"/> Staying with friends/family	
2. Would your access to housing be improved by any of the following? (Check all that apply.)

<input type="checkbox"/> Utility assistance	<input type="checkbox"/> Medical accommodations	<input type="checkbox"/> General repairs
<input type="checkbox"/> Neighborhood safety	<input type="checkbox"/> Mortgage or rent assistance	<input type="checkbox"/> None
<input type="checkbox"/> Home/renter insurance	<input type="checkbox"/> Furniture or household goods	<input type="checkbox"/> Other (please specify): _____
3. Do you have reliable telephone and internet access?

<input type="checkbox"/> Yes, both	<input type="checkbox"/> Only internet	<input type="checkbox"/> Only phone	<input type="checkbox"/> No, neither
------------------------------------	--	-------------------------------------	--------------------------------------

4. Where do you typically access the internet? (Check all that apply.)
☐ Home ☐ School ☐ Friend or family member's home ☐ Other (please specify): _____
☐ Work ☐ Library ☐ I do not have internet access
5. Would your access to transportation be improved by any of the following? (Check all that apply.)
☐ Gas assistance ☐ Personal vehicle access ☐ None
☐ Auto insurance ☐ Public transportation access ☐ Other (please specify): _____
☐ Auto repairs ☐ Vehicle inspection/registration
☐ Child safety seat(s) ☐ Disability accessible transportation
6. Have you ever lost a job or been unable to accept a job because of transportation issues?
☐ Yes ☐ No

Section 3: Finances

1. What types of income do you receive? (Check all that apply.)
☐ TANF ☐ Student grants/loans ☐ Employer wages
☐ SSI/SSDI ☐ Pension or retirement ☐ None
☐ Child support ☐ Unemployment benefits ☐ Other (please specify): _____
2. Do you or a household member receive any of these types of assistance? (Check all that apply.)
☐ CHIP ☐ TANF ☐ Medicaid/Medicare ☐ None of the above
☐ SNAP ☐ WIC ☐ Housing (Section 8) ☐ Other (please specify): _____
3. What monthly bills do you have? (Check all that apply.)
☐ Child support ☐ Television ☐ Food ☐ Car/transportation
☐ Credit cards ☐ Gasoline ☐ Loans ☐ Mortgage/rent
☐ Child care ☐ Internet ☐ Utilities ☐ None
☐ Insurance ☐ Medical ☐ Phone ☐ Other (please specify): _____
4. How would you describe the amount of debt your household currently has?
☐ No debt ☐ Acceptable amount of debt ☐ A bit too much debt ☐ Far too much debt
5. Would any of the following improve your household finances? (Check all that apply.)
☐ Budgeting assistance ☐ Creating a bank account ☐ None
☐ Paying off past-due bills ☐ Improving credit score ☐ Other (please specify): _____
☐ Accessing benefits ☐ Achieving a living wage*
- *A "living wage" means you don't need help from social services or government programs.*

Section 4: Employment and Education

1. What is your employment status?
☐ Full-time ☐ Part-time ☐ Retired ☐ Seasonal/temporary ☐ Not employed
2. If you are not employed, are you currently looking for work?
☐ Yes ☐ No ☐ Not applicable
3. If you are not employed, what is the primary reason? (Check all that apply.)
☐ Drug/alcohol problem ☐ Lack transportation ☐ Fleeing domestic or sexual abuse
☐ LGBTQ+ discrimination ☐ Language barrier ☐ Do not want to work
☐ Mental health problem ☐ Disability ☐ Not applicable
☐ Criminal Background ☐ Lack childcare ☐ Other (please specify): _____

Financial Well-being

4. Would any of the following improve your employment options? (Check all that apply)
- | | | |
|--|--|--|
| <input type="checkbox"/> Career/job training | <input type="checkbox"/> Interview training | <input type="checkbox"/> Other (please specify): _____ |
| <input type="checkbox"/> Job search strategies | <input type="checkbox"/> Resume-writing training | <input type="checkbox"/> None |
5. What is your highest level of education?
- | | | |
|---|---|---|
| <input type="checkbox"/> I didn't attend school | <input type="checkbox"/> Associate's degree | <input type="checkbox"/> Master's degree |
| <input type="checkbox"/> Some high school or less | <input type="checkbox"/> Trade school | <input type="checkbox"/> Professional certification |
| <input type="checkbox"/> High school diploma or GED | <input type="checkbox"/> Bachelor's degree | <input type="checkbox"/> Doctoral degree |
6. Would your family benefit from any of the following educational services? (Check all that apply.)
- | | | |
|---|---|--|
| <input type="checkbox"/> Schoolwork assistance | <input type="checkbox"/> Technology skills | <input type="checkbox"/> GED classes |
| <input type="checkbox"/> English language classes | <input type="checkbox"/> Reading assistance | <input type="checkbox"/> None |
| <input type="checkbox"/> Special needs education | <input type="checkbox"/> Tuition assistance | <input type="checkbox"/> Other (please specify): _____ |

Section 5: Nutrition and Health

1. Which resources are needed to improve nutrition in your area? (Check all that apply.)
- | | | |
|--|--|---|
| <input type="checkbox"/> Transportation to grocers | <input type="checkbox"/> Nutrition education | <input type="checkbox"/> Nutrition does not need improved |
| <input type="checkbox"/> Food pantries/assistance | <input type="checkbox"/> SNAP/access to SNAP | <input type="checkbox"/> Other (please specify): _____ |
| <input type="checkbox"/> Healthy food access | <input type="checkbox"/> Money for food | |
2. Which resources are needed to improve health care in your area? (Check all that apply.)
- | | | |
|---|---|---|
| <input type="checkbox"/> Doctors accepting Medicaid | <input type="checkbox"/> Clinics or specialists | <input type="checkbox"/> Health care does not need improved |
| <input type="checkbox"/> Hospital/emergency rooms | <input type="checkbox"/> Money for care | <input type="checkbox"/> Other (please specify): _____ |
| <input type="checkbox"/> Transportation to doctors | <input type="checkbox"/> Insurance coverage | |
3. Do you have health insurance or other health care coverage, such as Medicaid?
- ☐ Yes ☐ No
4. Where do you go for health care? (Check all that apply.)
- | | | |
|---|---|--|
| <input type="checkbox"/> Physician's office | <input type="checkbox"/> Urgent care clinic | <input type="checkbox"/> I do not receive health care |
| <input type="checkbox"/> Free clinic | <input type="checkbox"/> Emergency room | <input type="checkbox"/> Other (please specify): _____ |
5. If you choose not to receive healthcare, what is the primary reason? (Check all that apply.)
- | | | |
|--|---|--|
| <input type="checkbox"/> Fear of doctors/health issues | <input type="checkbox"/> Cultural/religious beliefs | <input type="checkbox"/> Not applicable |
| <input type="checkbox"/> Unsure how to find doctors | <input type="checkbox"/> Language barriers | <input type="checkbox"/> Other (please specify): _____ |
6. Would your health be improved by access to any of the following? (Check all that apply.)
- | | | |
|--|--|--|
| <input type="checkbox"/> Maternity care | <input type="checkbox"/> Disability care | <input type="checkbox"/> Medical equipment/prosthesis |
| <input type="checkbox"/> Pediatric care | <input type="checkbox"/> Dental care | <input type="checkbox"/> Substance abuse treatment |
| <input type="checkbox"/> Mental health care | <input type="checkbox"/> Hearing care | <input type="checkbox"/> None of the above |
| <input type="checkbox"/> Prescription medication | <input type="checkbox"/> Eye/vision care | <input type="checkbox"/> Other (please specify): _____ |

Section 6: Children*

*If you are not the parent or guardian of a child under 18, please skip to Section 7.

1. What types of childcare services do you currently use? (Check all that apply.)
- | | | |
|---|--|--|
| <input type="checkbox"/> Care by parent in your home | <input type="checkbox"/> School-based care | <input type="checkbox"/> Other (please specify): _____ |
| <input type="checkbox"/> Care in a home by relative | <input type="checkbox"/> Daycare center | |
| <input type="checkbox"/> Care in a home by non-relative | <input type="checkbox"/> None of the above | |

2. What type of child care do you need? (Check all that apply.)

- | | | |
|--|--|--|
| <input type="checkbox"/> Full time care | <input type="checkbox"/> Evening care | <input type="checkbox"/> Extended care (12+ hours) |
| <input type="checkbox"/> After-school care | <input type="checkbox"/> Sick child care | <input type="checkbox"/> None of the above |
| <input type="checkbox"/> Drop-in care | <input type="checkbox"/> Overnight care | <input type="checkbox"/> Other (please specify): _____ |

3. Would any of the following improve your access to childcare? (Check all that apply.)

- | | | |
|---|--|--|
| <input type="checkbox"/> Care for special needs | <input type="checkbox"/> Affordable care | <input type="checkbox"/> Other (please specify): _____ |
| <input type="checkbox"/> Transportation to/from care | <input type="checkbox"/> Quality care | |
| <input type="checkbox"/> Care to match work schedules | <input type="checkbox"/> None of the above | |

Section 7: Support and Relationship Safety

For questions 1-12, indicate how often each type of support is available to you.

Indicate how often you have access to someone who:

- | | | | | | |
|----------------------------------|--------------------------------|------------------------------------|--------------------------------|---|---------------------------------|
| 1. Understands your problems. | <input type="checkbox"/> Never | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Often | <input type="checkbox"/> Most of the time | <input type="checkbox"/> Always |
| 2. Shows you love and affection. | <input type="checkbox"/> Never | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Often | <input type="checkbox"/> Most of the time | <input type="checkbox"/> Always |
| 3. Gives you good advice. | <input type="checkbox"/> Never | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Often | <input type="checkbox"/> Most of the time | <input type="checkbox"/> Always |
| 4. Makes you feel valued. | <input type="checkbox"/> Never | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Often | <input type="checkbox"/> Most of the time | <input type="checkbox"/> Always |

Indicate how often you have access to someone you can:

- | | | | | | |
|--|--------------------------------|------------------------------------|--------------------------------|---|---------------------------------|
| 5. Count on when you need to talk. | <input type="checkbox"/> Never | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Often | <input type="checkbox"/> Most of the time | <input type="checkbox"/> Always |
| 6. Share your most private worries and fears with. | <input type="checkbox"/> Never | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Often | <input type="checkbox"/> Most of the time | <input type="checkbox"/> Always |
| 7. Have a good time with. | <input type="checkbox"/> Never | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Often | <input type="checkbox"/> Most of the time | <input type="checkbox"/> Always |
| 8. Do fun things with when you are upset. | <input type="checkbox"/> Never | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Often | <input type="checkbox"/> Most of the time | <input type="checkbox"/> Always |

Imagine you are ill, injured, or otherwise unable to care for yourself. Indicate how often you have access to someone who would:

- | | | | | | |
|--|--------------------------------|------------------------------------|--------------------------------|---|---------------------------------|
| 9. Help you if you were confined to bed. | <input type="checkbox"/> Never | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Often | <input type="checkbox"/> Most of the time | <input type="checkbox"/> Always |
| 10. Take you to the doctor. | <input type="checkbox"/> Never | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Often | <input type="checkbox"/> Most of the time | <input type="checkbox"/> Always |
| 11. Prepare your meals. | <input type="checkbox"/> Never | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Often | <input type="checkbox"/> Most of the time | <input type="checkbox"/> Always |
| 12. Help with daily chores. | <input type="checkbox"/> Never | <input type="checkbox"/> Sometimes | <input type="checkbox"/> Often | <input type="checkbox"/> Most of the time | <input type="checkbox"/> Always |

Financial Well-being

For questions 13-18, if you have a romantic partner, indicate how often each of the following statements is true.

13. I feel safe in my home.
___Never _Sometimes _Often _Most of the time _Always _Not applicable
14. I feel comfortable being alone with my partner.
___Never _Sometimes _Often _Most of the time _Always _Not applicable
15. My partner allows me to have a voice in household decisions.
___Never _Sometimes _Often _Most of the time _Always _Not applicable
16. My partner gives me space to do things I enjoy.
___Never _Sometimes _Often _Most of the time _Always _Not applicable
17. My partner is willing to adapt to my needs and expectations.
___Never _Sometimes _Often _Most of the time _Always _Not applicable
18. My partner builds me up and supports me.
___Never _Sometimes _Often _Most of the time _Always _Not applicable

Section 8: Evaluation

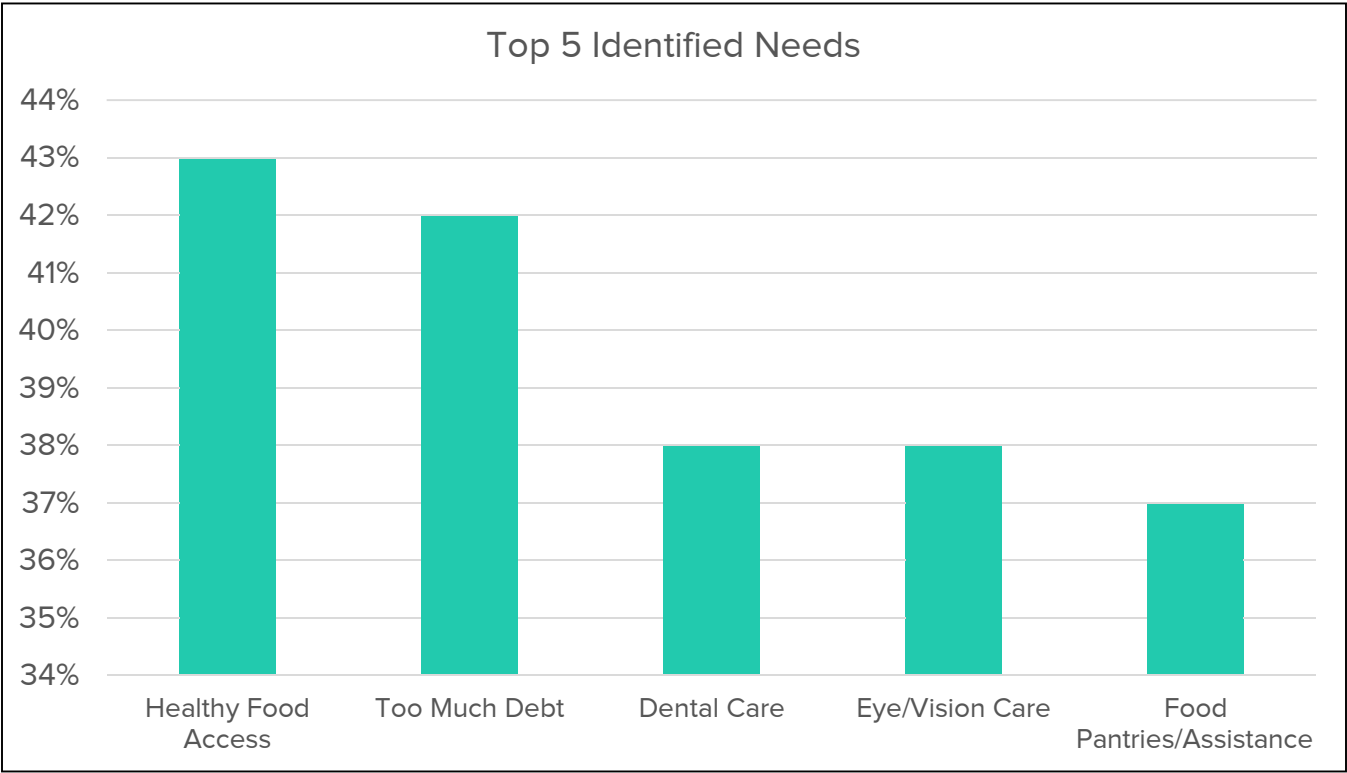
1. If you would like to draw our attention to any community issues which have not been addressed in this survey, please do so here.

2. Do you know how to access community organizations which can provide assistance if you need help?
___Yes _No _Unsure
3. How did you receive this survey?
___Email ___Facebook
___Round-Table. If so, where? _____ _Agency. If so, where? _____
___Community Event. If so, where? _____ _Other (please specify): _____
4. **If you would be interested in participating in a round-table to further discuss these issues, please provide your information below. Note—this information will NOT be used to link your identity to your responses above. It will only be used for contact about future round-table events.**
Name: _____
Email Address: _____ Phone Number: _____
Preferred form of contact: _Call _Text _Email

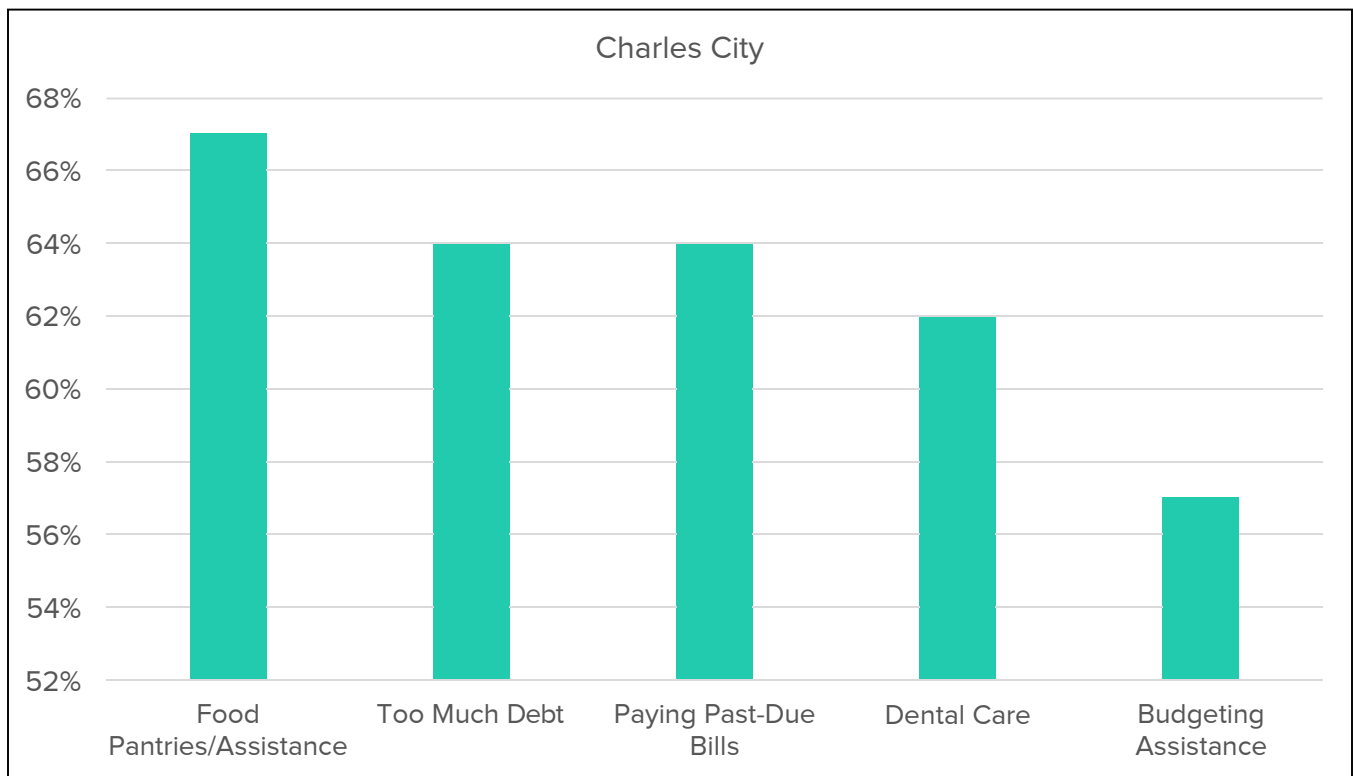
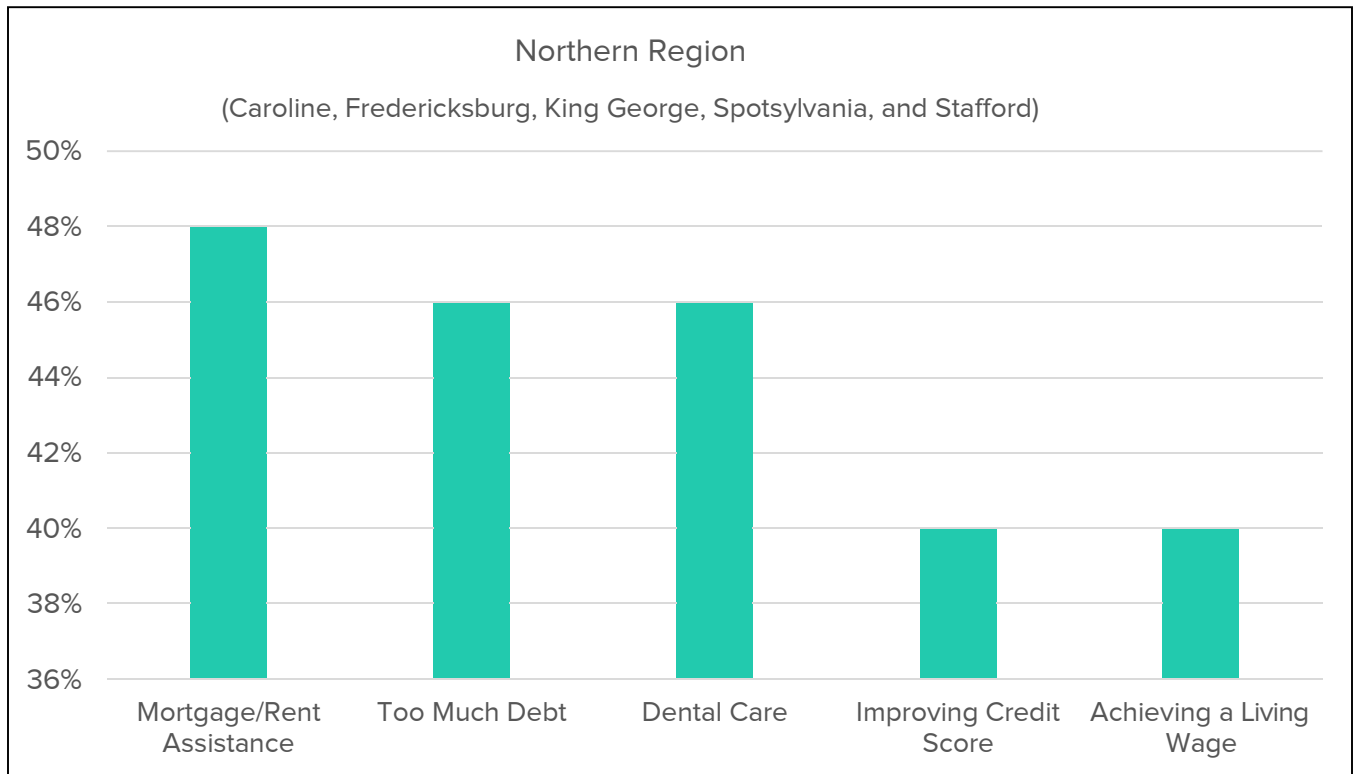
Thank you for completing this survey!

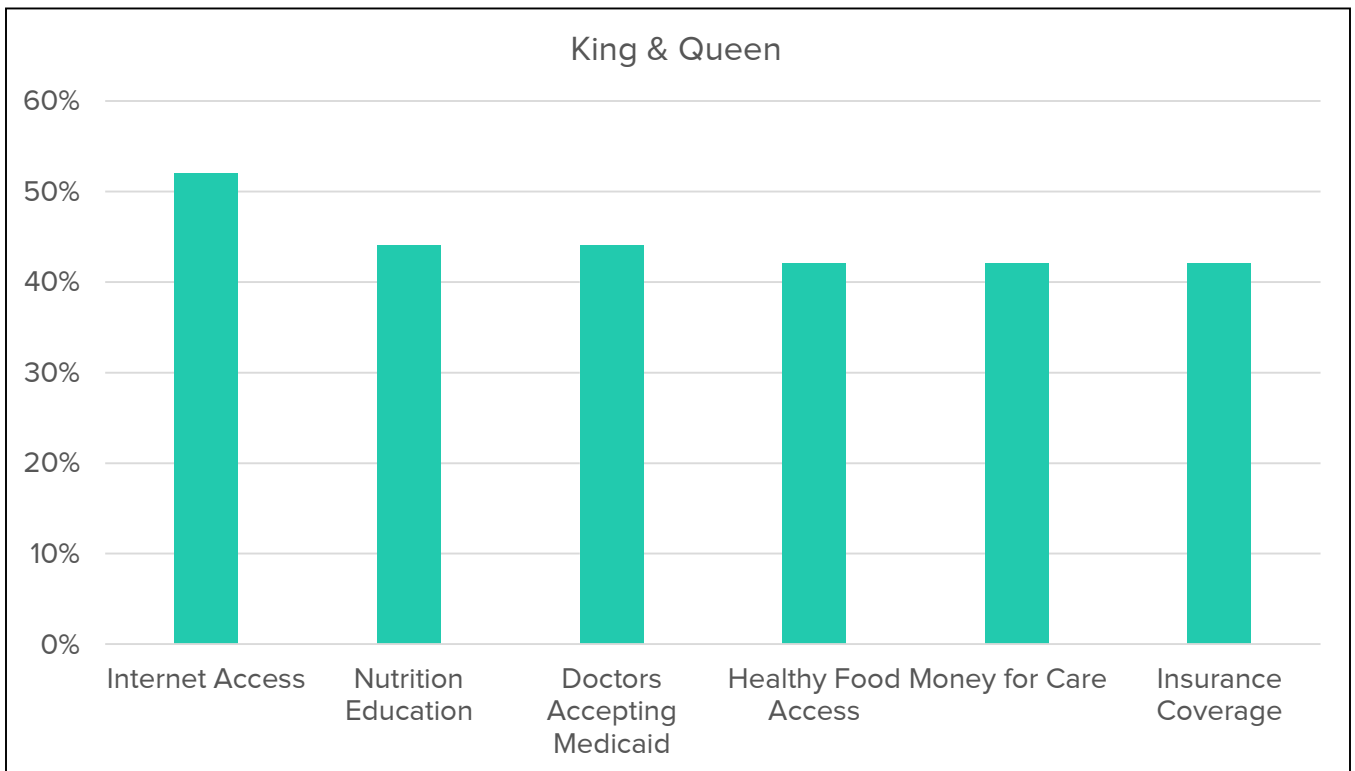
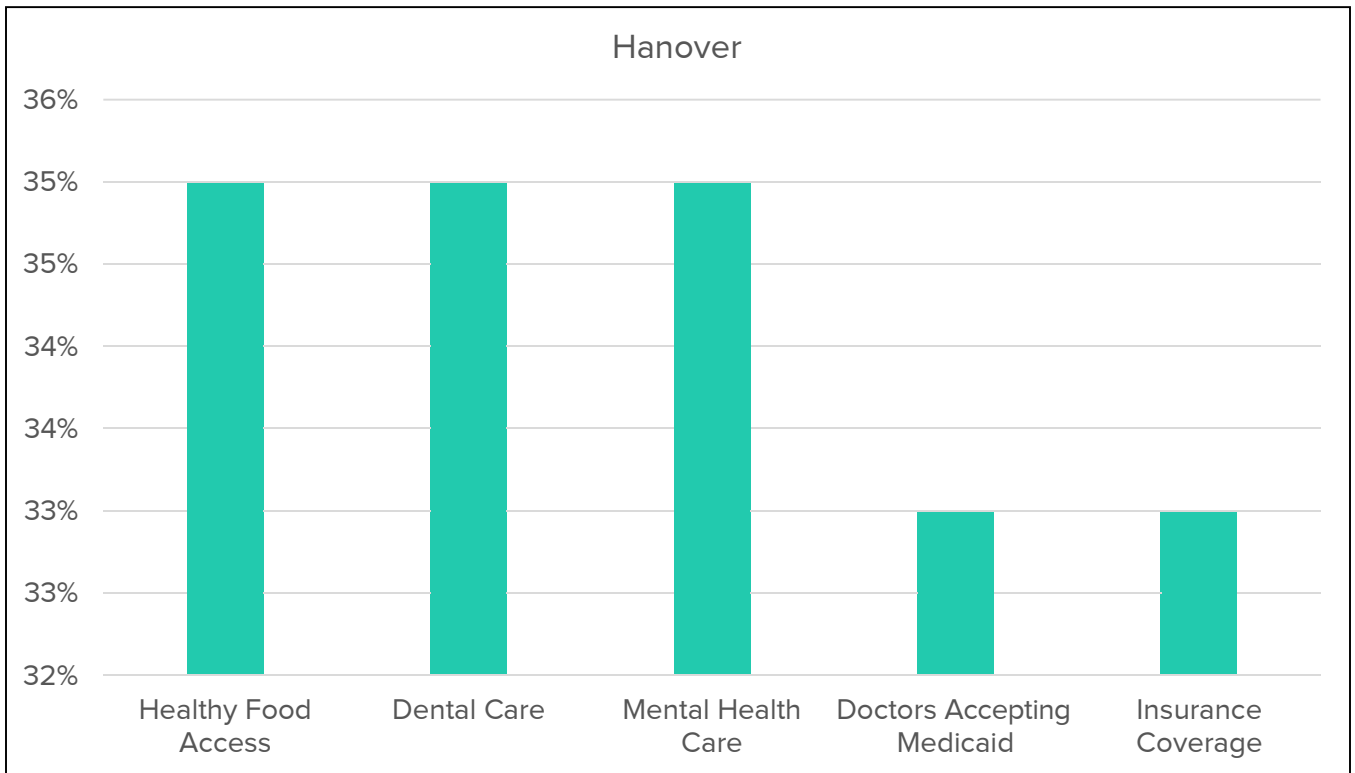
If you have questions about this survey, Quin Rivers can be reached by phone at (804) 966-8786.

Qualitative Survey Data

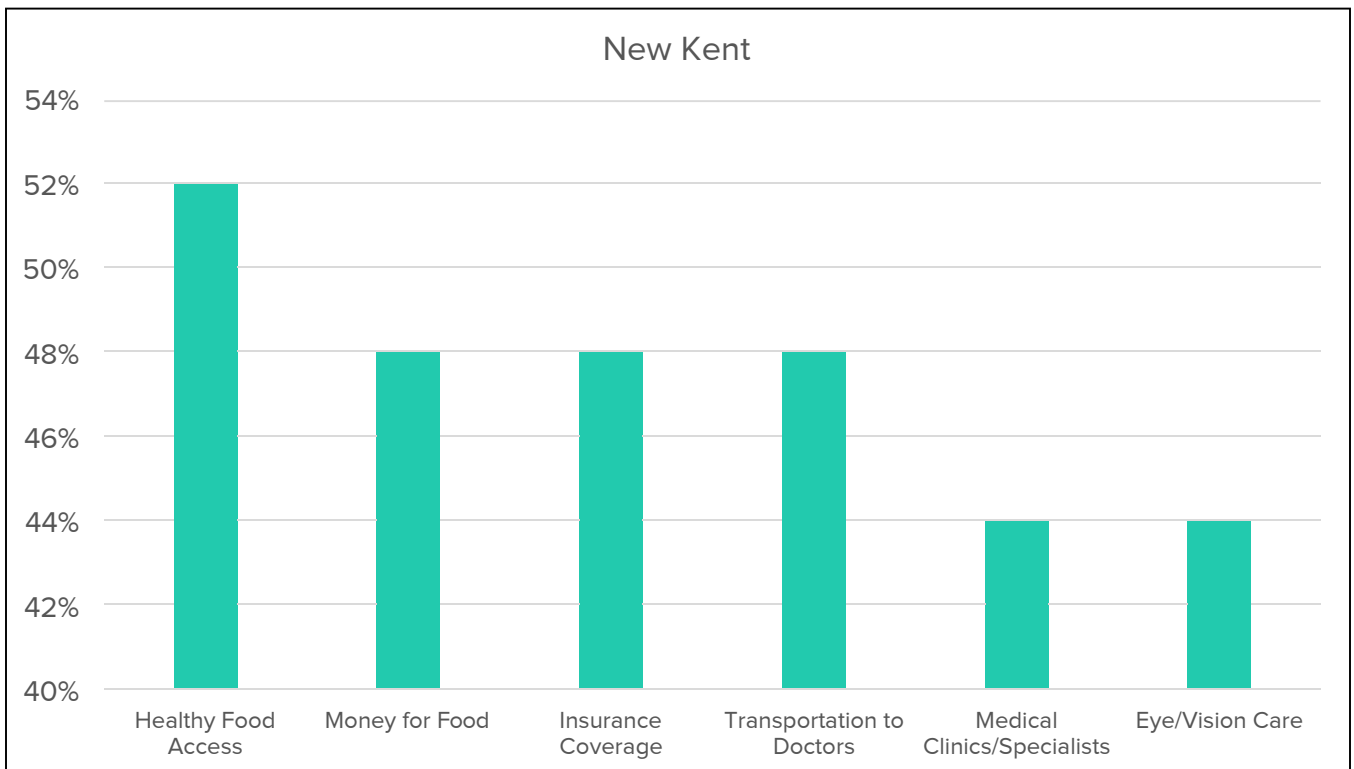
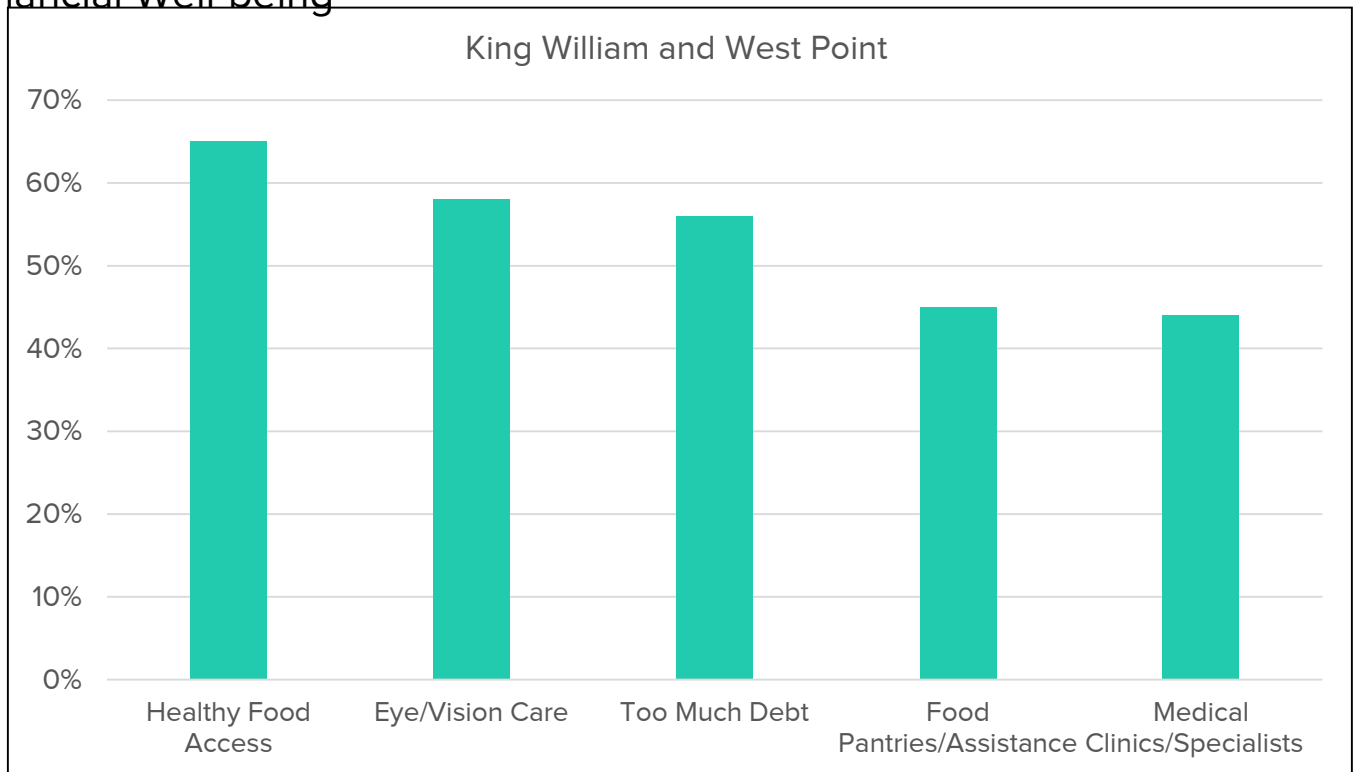


Top Needs by County or Region





Financial Well-being



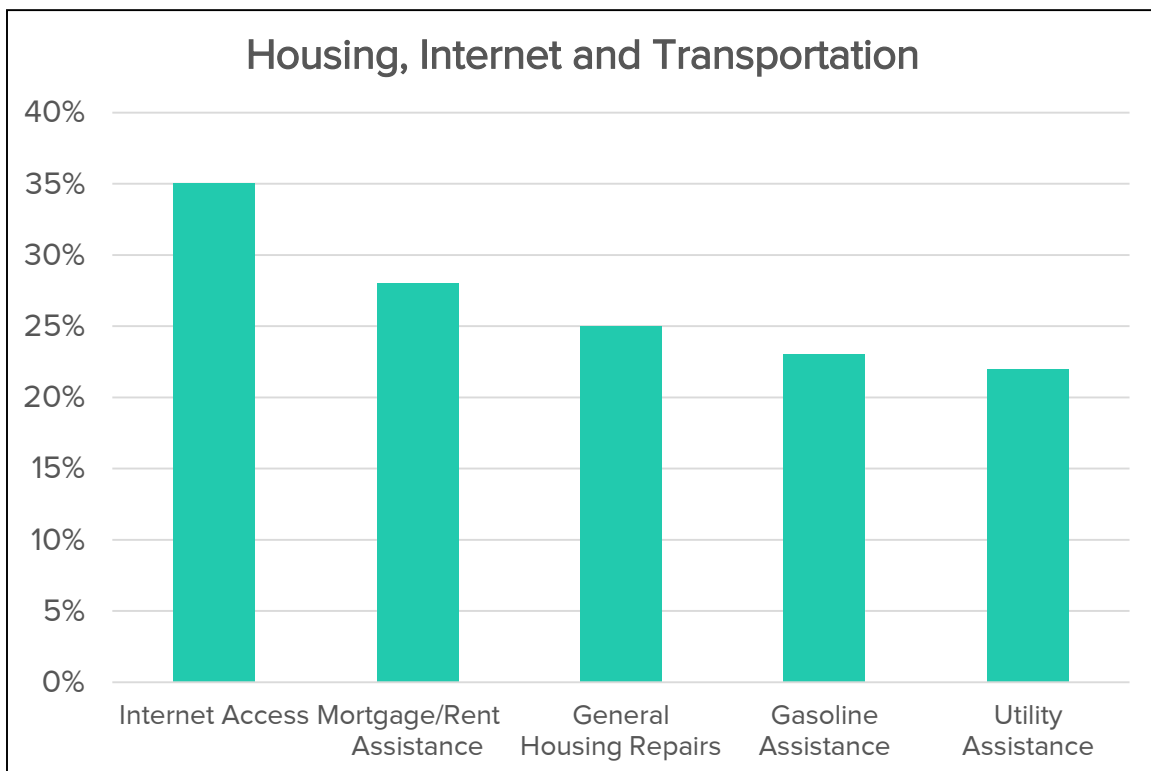
Housing, Internet & Transportation

“... Those living in poverty are being pushed to the outskirts of [my county] with no access to affordable housing, except trailer parks that are poorly run.”

“The lack of transportation for impoverished peoples in the community is rampant, and really [transportation is] non-existent.”

“The children of King and Queen County deserve to have their informational needs met through internet service.”

Transportation is a major challenge in rural counties. The lack of public transportation makes owning a personal vehicle, which can be costly, a necessity. In addition, there are few housing options, and the available rental properties are often high-cost and poorly maintained. As indicated by the selected quotes from survey participants and the most-selected needs listed below, basic housing and transportation are inaccessible for many low-income individuals. Internet access is also severely limited because many rural communities simply don't have providers. This lack of internet service can adversely affect many areas of life, from a child's ability to keep up with schoolwork to an adult's ability to effectively search for jobs.

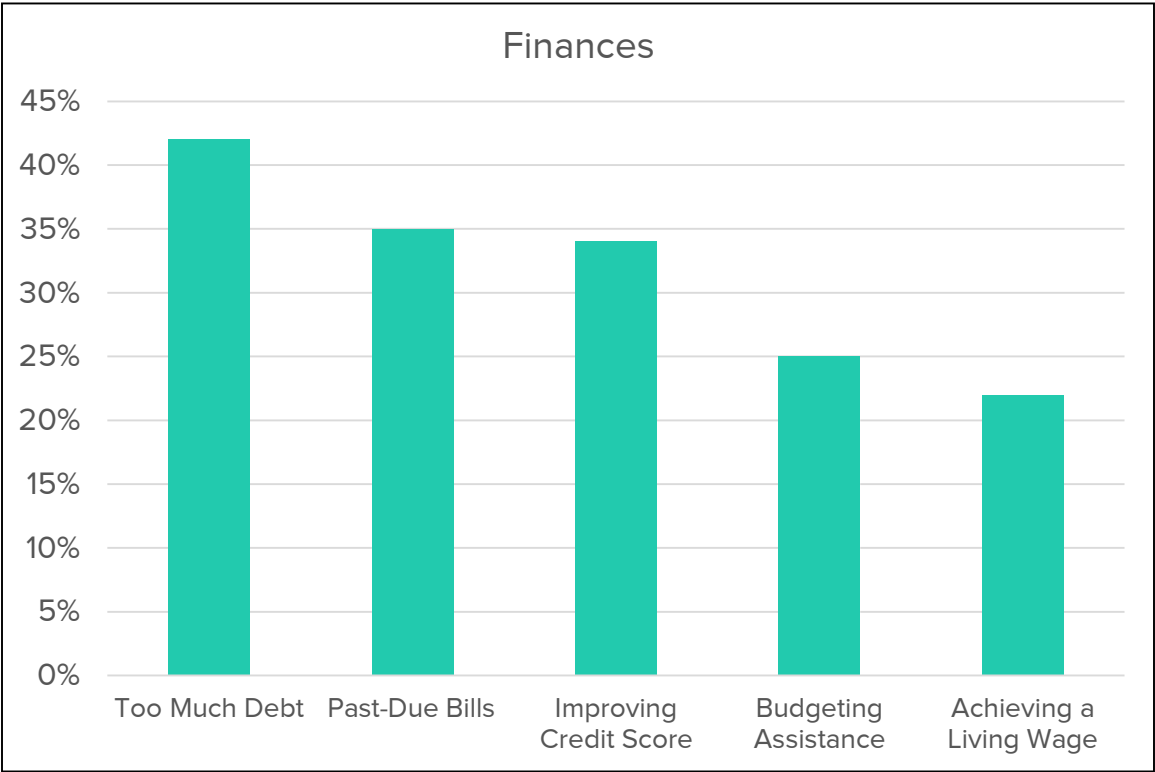


Finances

“Change the income criteria so that financially struggling working individuals can get help while working. Offer computer ... [and] budgeting classes publicly for FREE.”

“... [As an additional issue to draw attention to] all the restrictions that are placed on the programs to qualify for.”

For many families living in poverty, household finances are a perpetual game of catch-up. As indicated below, the burden of excessive debts and finding assistance in paying off bills are the two most-raised financial concerns from the survey. The third, improving credit score, is related since credit is negatively affected by missed payments, and poor credit can make it challenging to secure resources in the future. Further, as indicated by the quotes above, many families also struggle to access resources. Public benefits are often challenging to obtain and may impose eligibility requirements that do not reflect the realities of struggling families.



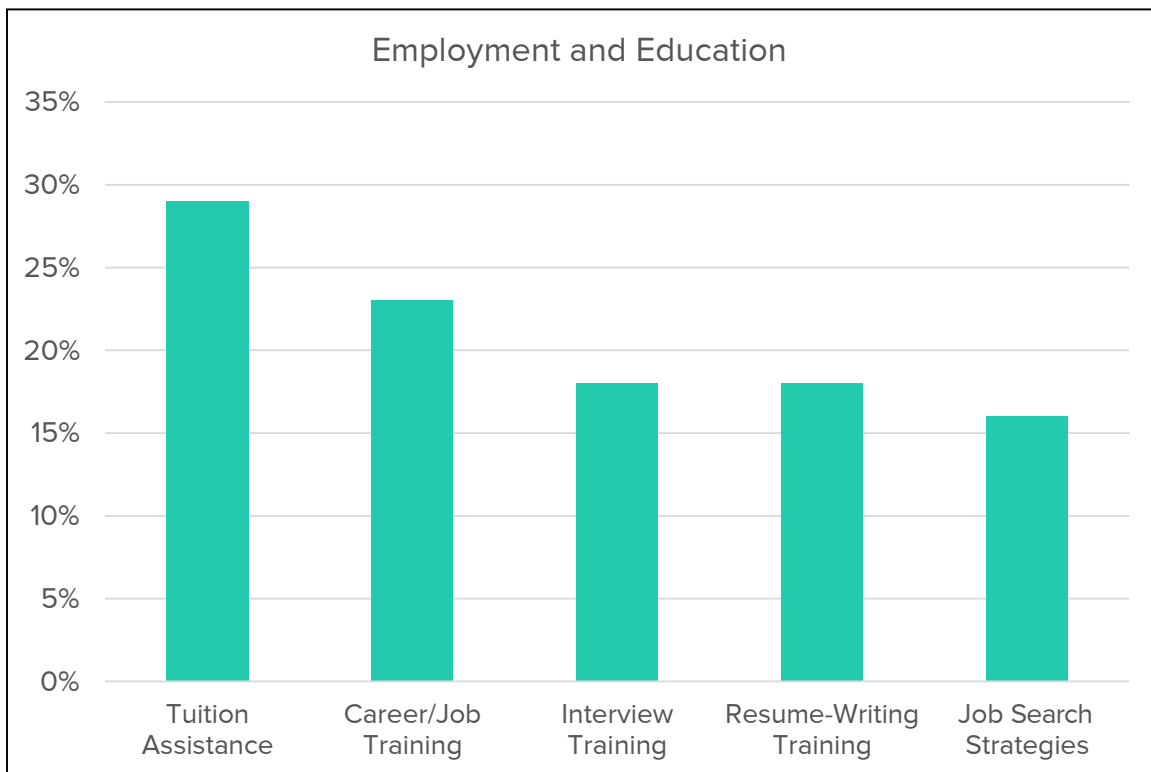
Employment & Education

“Employment within the community and self-sustaining wages.”

“Make a larger focus on sending people on assistance to trade schools to better themselves.”

Unsurprisingly, tuition assistance is the highest identified need for employment and education. Many entry-level jobs require a bachelor’s degree, but the cost of education is often prohibitive, especially for low-income families. Also, many younger parents are still managing their own educational debt which limits their options to assist their children. Every other identified need is related to employment—specifically, accessing the skills and strategies to gain employment.

Unemployment data from this section warrants a closer look. Nearly a quarter of the participants are not employed. Disability was the primary cause of unemployment, with 37% of unemployed respondents indicating it as the reason they do not work. The next most-common factor in unemployment was limited access to childcare (28%), followed by mental health problems and a lack of transportation (both 26%).

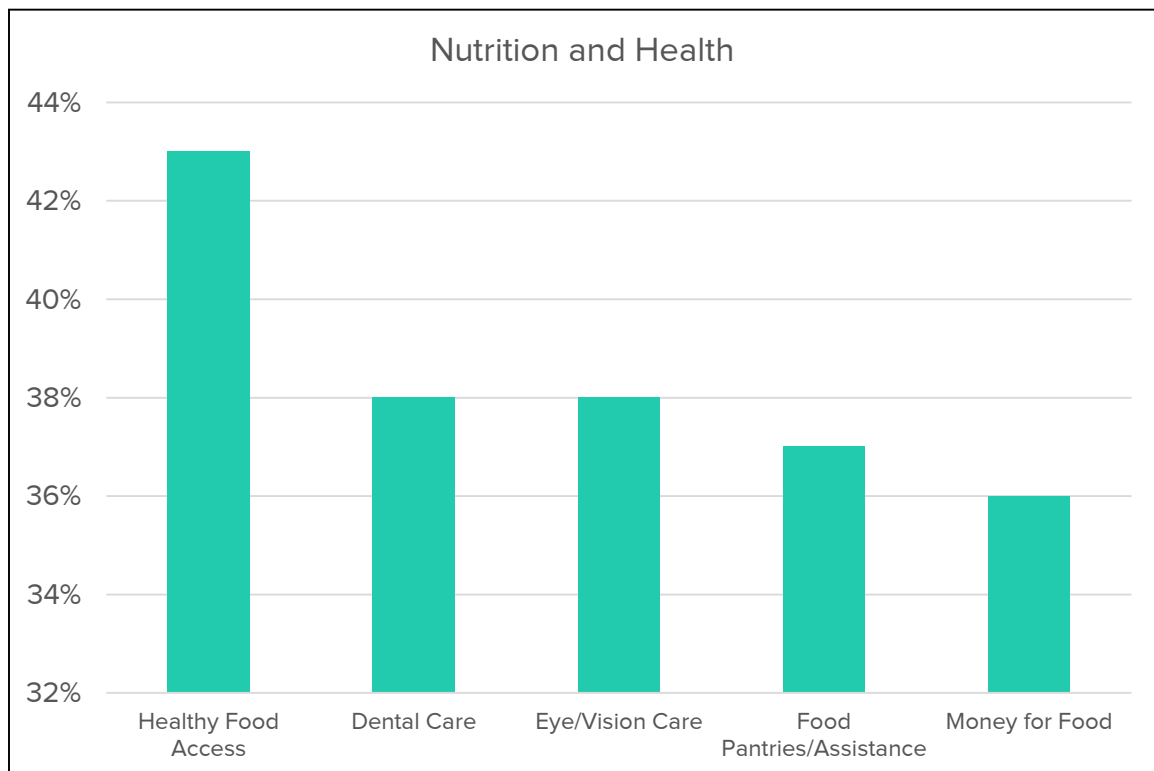


“Please help gain people access to health care.”

“Mental Health is a huge issue that needs to be addressed.”

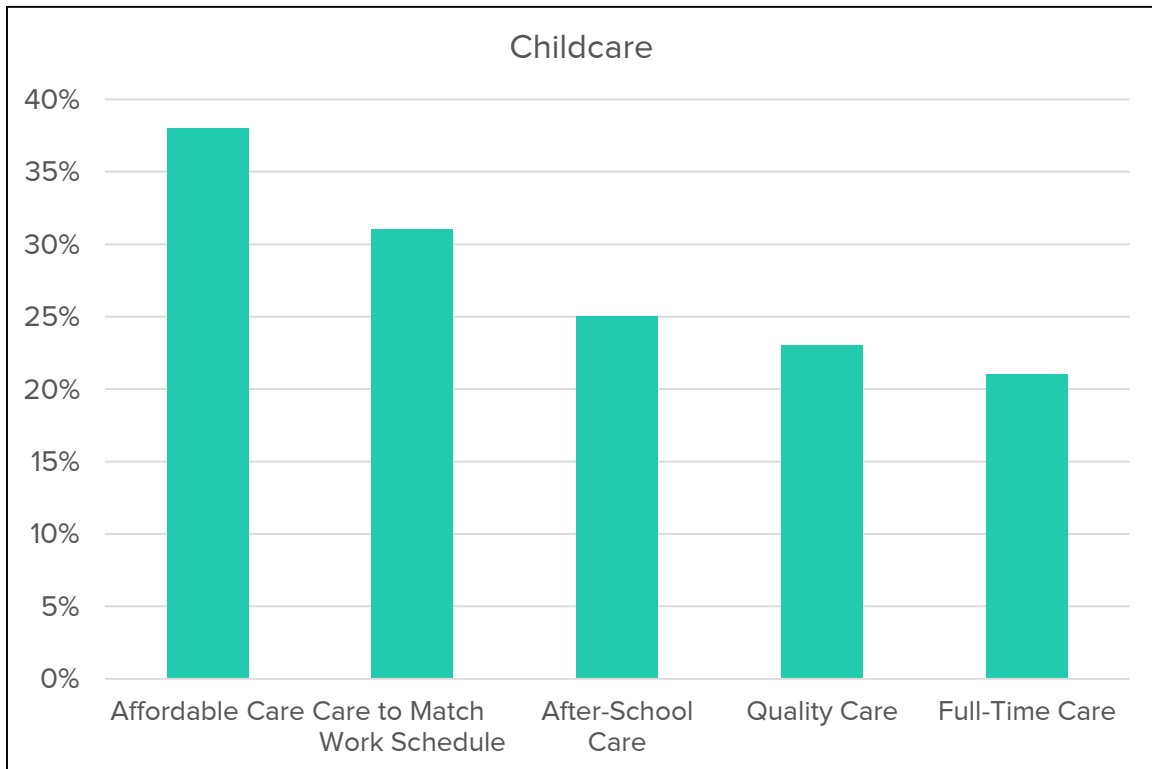
“[We need] Meal-Planning Assistance, Diabetes Education/Diet & Nutritional Planning, + Access (via transportation) to a gym and/or extracurricular and/or recreational activities.”

Over 40% of participants identified access to healthy food as the most important need in the Nutrition and Health category. Access to dental and vision care also scored high.



Childcare

While childcare impacts less of the population than the other topics explored in this survey, it is still a major concern for many living in the Thrive Virginia service area. Childcare costs are often astronomical—in many places, childcare can cost as much as rent, a price that makes it entirely unaffordable for many low-income families. These high costs are especially challenging for parents who work in industries such as service or food, where unpredictable hours are not always limited to the 9-5 workday, as evidenced by the survey results



A Message from the Executive Director

As we celebrate our 50th Anniversary, we reflect on transformations that have occurred during the last half-century. We continue to be responsive to critical community challenges and develop approaches, strategies, and partnerships to address these ever-changing needs.

As we embark on our next 50 years, we are enthusiastic about our bright future and igniting prosperity in our communities. We are implementing a Whole Family Approach to address family-level needs and create partnerships with other organizations to shore up gaps in services. We continue to work diligently and with passion for creating more pathways that will help our customers move from “crisis to thrive.”

On the following pages, you will find information about Thrive Virginia’s Customer Satisfaction record, Customer Service Data, and Agency Accomplishments. I hope this information helps you get to know Thrive Virginia a little better.

Together with Thrive Virginia's Board of Directors, I am pleased to share this comprehensive needs assessment report. We would also like to thank the many volunteers who helped to complete the report and to those who completed the Community Needs Survey.

Sincerely,

Lisa Gibson, MPA
Executive Director

Committee Leadership:

Dr. Napoleon Peoples, Chairman
Lynn Vogel, Vice-Chairman

Committee Members:

Reverend Vance Jones, Member, Thrive Virginia Board of Directors
Lisa Gibson, Staff, Executive Director
Gillian Barney, Staff, Associate Executive Director
Debbie Tomlinson, Staff, Grants Manager
Faith Brooks, Staff, Economic Services Manager
Angela Crawley, Staff, Early Childhood Education Manager
Chris Napier, Staff, Health and Education Manager
Kelsey Barnes, Staff, Senior Advocacy Coordinator
Alejandro Prince, Staff, Education Coordinator
Elizabeth Holt, Director, Charles City County Department of Social Services
Jon Martz, Director, New Kent County Department of Social Services
Betty Dougherty, Director, King and Queen County Department of Social Services
Melissa South, Community Services Board
Anne Danforth, Chickahominy Health District
Brooke Rossheim, M.D. & M.P.H., Director, Rappahannock Health District

***Special thanks to Sasha Bronder, AmeriCorps VISTA**

Customer Service Data

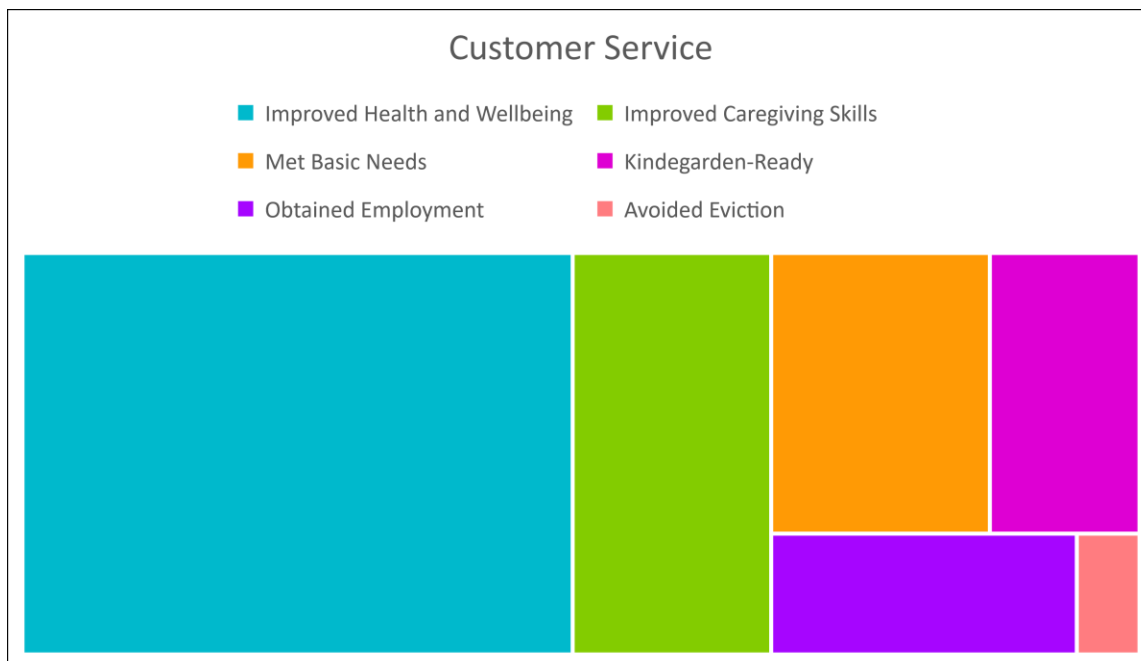
The following customer service data covers the period of July 1, 2018 – March 31, 2020. This report does not contain the fourth-quarter data for FY19 due to the Community Assessment Report completion deadline of July 1, 2020.

We hope this data gives the reader an idea of who our customers are and how we provide services that achieve optimal outcomes.

In FY19, Thrive Virginia worked with 728 households and 1,460 individuals.

Some of the outcomes that our customers achieved include:

- 263 individuals improved their mental and behavioral health and well-being.
- 95 individuals improved their skills related to the adult role of parents/caregivers.
- 73 individuals were able to meet their basic needs.
- 50 children were ready for kindergarten.
- 44 adults obtained employment (up to a living wage).
- 9 individuals avoided eviction.



Customer Satisfaction Data

Each quarter, Thrive Virginia conducts customer satisfaction surveys; the results of this survey help us serve our customers better. The data below was collected from July 1, 2019, to March 31, 2020. This report did not contain fourth-quarter data for FY19 due to the Community Assessment Report completion deadline of July 1, 2020. It is important to note only customers who received direct services within a quarter received a survey.

During the period, 545 surveys were distributed and 38 were returned.

78% of respondents were very satisfied with how they were treated by the staff.

72% of respondents were very satisfied that they handle their daily challenges better because of the services they received.

77% of respondents were very satisfied with the level of services they received.



Anecdotally, one customer stated, “*My advocate is the most amazing person, and what y’all have done has changed my life! She is very knowledgeable, kind, and patient. She was essential in my process.*”

Agency Accomplishment

FY19

Outcomes and Results

The agency acquired and implemented empowOR, our new customer data system.

Improving Service and Systems

Four new staffing positions were added including Systems Administrator, part-time Grants Manager, part-time Human Resources Manager, and part-time Intake Specialist.

Striving for the Highest Standard

Thrive Virginia met 100% of Organizational Standards set forth by the Virginia Office of Volunteerism and Community Services as part of the Community Services Block Grant.

Healthy Generations

Thrive Virginia collaborated with Rappahannock Area Agency on Aging to provide economic opportunities to seniors through the Older Workers Employment Program.

AmeriCorps VISTA

For the third year in a row, Thrive Virginia was proud to be an approved AmeriCorps VISTA site.

Building Capacity

The newly formed Fund Development Committee developed a three-year Fund Development Plan designed to ensure the agency is well-positioned financially.

A Bright Future

The agency hosted three interns from Virginia Commonwealth University (VCU) to work with survivors of domestic violence and sexual assault.

Continuing Education

Staff and Board member training opportunities significantly increased in FY19; over 642 training hours were completed.

Making a Difference

Thrive Virginia's volunteers contributed 2,610 hours of service for a total financial, in-kind contribution of \$63,005.

Conclusion

The origins of the comprehensive Community Needs Assessment go back to President Lyndon B. Johnson and the “War on Poverty.” Every three years, following their own schedules, more than 1,000 Community Action Agencies (CAA’s), tasked by the federal government to serve as the anti-poverty agency in their local areas, conduct comprehensive Community Needs Assessments (CNA’s) to investigate the causes and effects of poverty in their communities.

To connect the dots unto the present day, the National Community Action Partnership explains the role of more than 1,000 Community Action Agencies across the country:

“The Community Action Agency’s assessment is unique within its community and state. It offers a focus on local conditions, analyzing the economic opportunities and barriers for all residents who are at risk of remaining or becoming economically insecure. It identifies existing and potential resources to expand opportunities. It prepares the CAA leadership to plan a multi-year strategy. For most CAAs, the comprehensive assessment will mean a change. It will require thinking about needs and resources in a more comprehensive framework. It will mean connecting the closely-related causes of poverty by collecting more data. It cannot be achieved by a survey of CAA customers’ satisfaction with the services they now receive, or by asking customers what services they need. It cannot be achieved by only updating economic and social data that are part of the CAA statistical profile. These approaches only assess a narrow “market,” not a whole “community.”

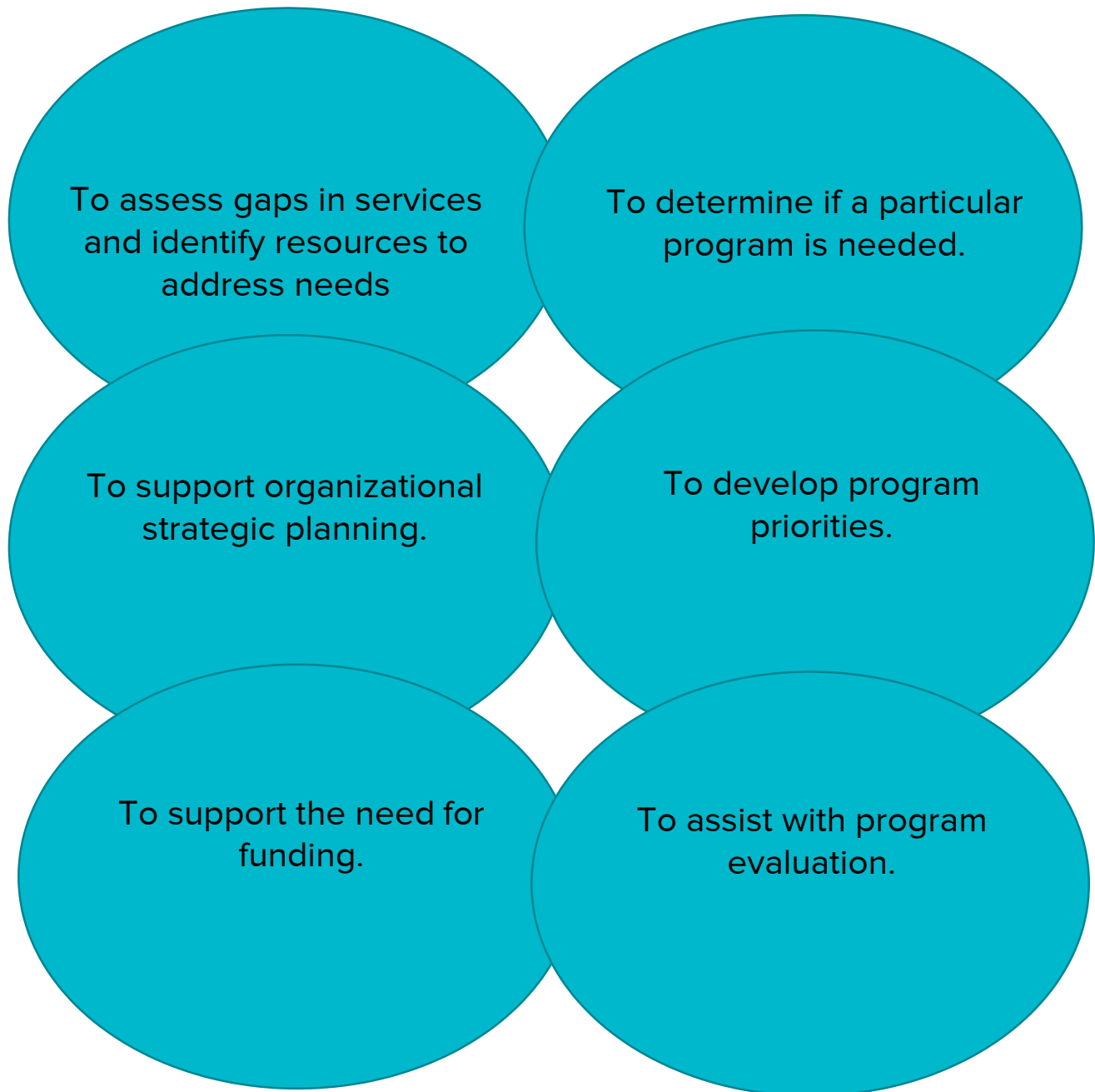
In 1994, the federal government introduced its management and accountability practice, known as Results Oriented Management and Accountability (ROMA). The 1994 amendment to the CSBG Act “specifically mentioned a requirement for CSBG-eligible entities to provide **outcome measures** to measure success in promoting three areas:”

- Self-sufficiency,
- Family stability, and
- Community revitalization.

ROMA consolidated the original six national goals into three:

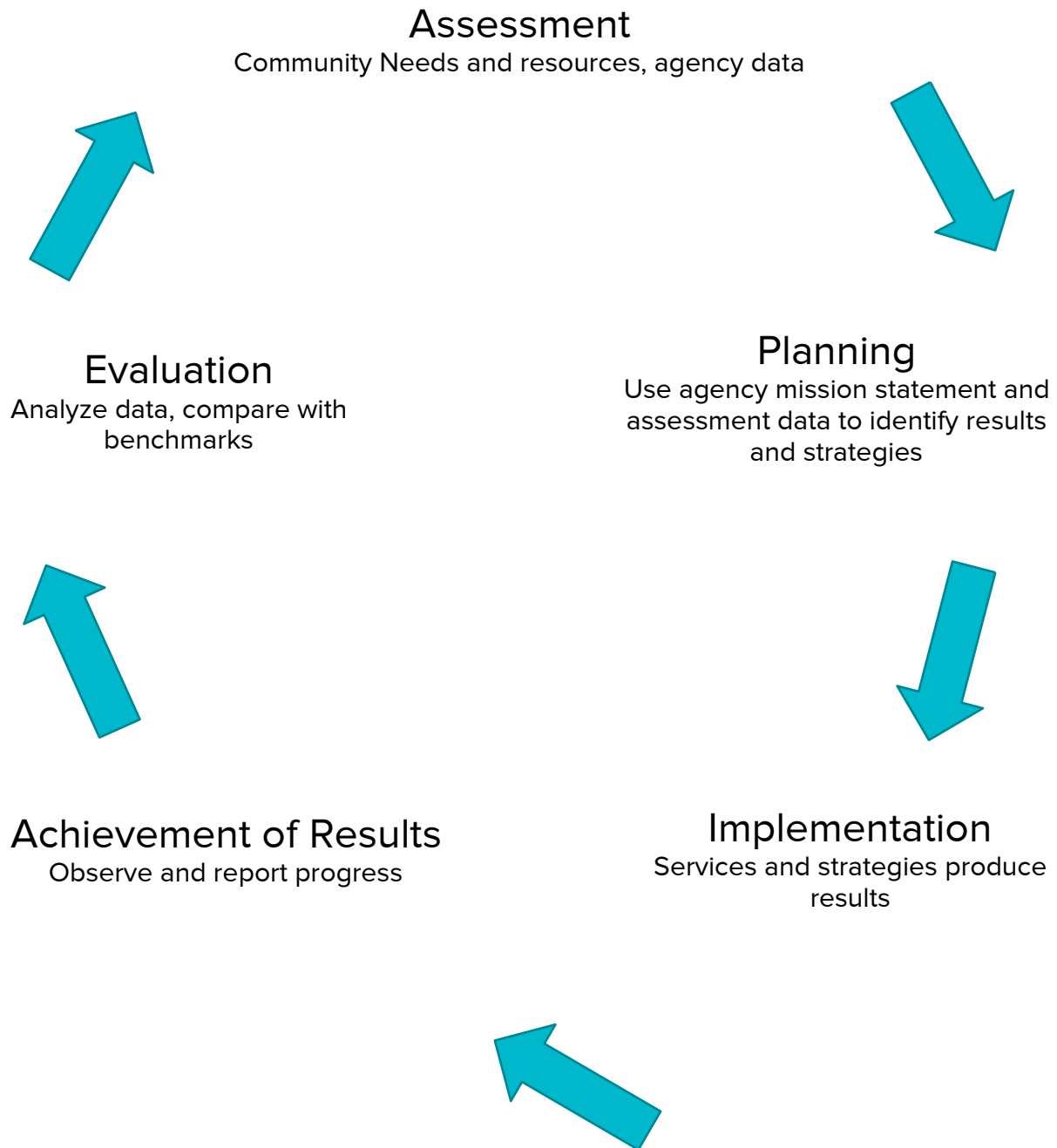
- Individuals and families with low income are stable and achieve economic security;
- Communities, where people with low incomes live, are healthy and offer economic opportunity;
- People with low incomes are engaged and active in building opportunities in communities.

Why We Conduct Needs Assessments

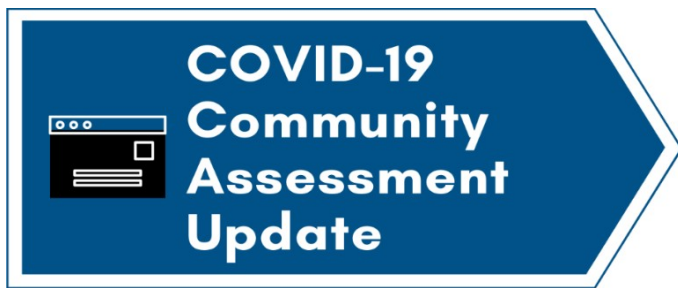


The Results Oriented Management and Accountability Cycle

The ROMA cycle involves particular core activities for eligible entities.



This Community Needs Assessment will be used by Thrive Virginia's leadership to complete planning, implementation, observation of results, and evaluation.



This update to the Thrive Virginia Community Needs Assessment was completed in June 2020 in response to the COVID-19 global pandemic.

Background

This Community Assessment Update is in response to a global health pandemic that has not only affected every community in the United States but has also led to the most significant economic disruption since the Great Depression. This assessment is an **initial** effort to capture **some** of the emerging needs in the community as well as to forecast how those needs may evolve over the coming weeks and months.

Because of the urgent and widespread needs affecting all sectors of the community, this Community Assessment update is intended to provide some **initial** information to describe the scope of this crisis on our community and to support the many different responses that will be required to address emerging, evolving needs. **It is likely that as needs evolve, some of those needs will not be captured in this update and therefore some necessary community responses may not connect to the needs identified in this document.**

The *community* assessed in this document, related to the below information, is defined as the following:

The Counties of Caroline, Charles City, Hanover, King George, King and Queen, King William, New Kent, Spotsylvania, Stafford, the City of Fredericksburg, and the Town of West Point.

The needs assessed will inform services to those affected by the crisis. It is significant to note that Congressional action will permit FY20 and special supplemental CSBG funding to serve families at or below 200% of the federal poverty level (as defined by the US Census Bureau).

The following table illustrates how the 200% eligibility standard will expand the number of local residents eligible for services:

	# below 125% (CSBG standard)	# below 200% (updated CARES standard)	Additional # eligible to be served (# below 200% - # below 125%)
Population in Service Area	46,966	94,326	47,360

Specific programs or strategies will target the demographic groups most affected. Given persons of color are being disproportionately affected by both the health crisis and by the resulting economic disruption, an equity lens must be used to view current and emergent needs related to this crisis.

I. National, State and Local public health crisis

State and local health authorities responded to the outbreak by placing restrictions on travel, business and recreation that have had a number of impacts on the community.

Financial Well-being

As a result of this unprecedented public health crisis, Thrive Virginia is updating its Community Assessment because there is currently a significant impact on the community, and a number of short-, intermediate- and longer-term impacts are expected.

II. Immediate impacts on the community

The immediate impacts of COVID-19 have been felt across all sectors of society. In particular, some of the greatest impacts relevant to the Community Action Network have been in the areas of health, education, employment, human services provision, and community resources. In this community, areas of highest vulnerability are in those communities with high population density, high uninsured rates and a high proportion of older residents.

Nationwide, early data suggest that the following groups have experienced disproportionately higher rates of infection and/or complications/death as a result the COVID-19 pandemic:

- Males
- Individuals 65+ years old
- People of color, particularly African Americans and Native Americans
- People with underlying health conditions (especially, lung disease, asthma, diabetes, cardiovascular disease, kidney disease, liver disease, severe obesity, and individuals with immunocompromised conditions)

The following outlines some of the critical areas of impact to the local community thus far:

- Health impacts:
 - Individuals over 65, especially those with underlying health conditions have been shown to be at particular risk for severe health implications from COVID-19. Those in congregate settings (e.g. nursing homes) are a particular concern in this community.
 - ☒ This applies to this community
 - ☐ This does NOT apply to this community
 - Community health resources will be stretched thin as resources devoted to those sick with COVID-19 will limit resources available to others. Limited Intensive Care and other hospital services in this community would mean others NOT directly affected by COVID might lack access to care.
 - ☒ This applies to this community
 - ☐ This does NOT apply to this community
 - Behavioral health resources will need to be available in new and increased ways to deal with the many different stressors/traumas caused by the pandemic, especially its impact over an extended time period. Issues such as domestic violence, elder abuse, child abuse, drug abuse, suicide and other indicators of behavioral health issues are a particular concern in this community.
 - ☒ This applies to this community
 - ☐ This does NOT apply to this community
 - Nutrition for school-aged children previously accessing free/reduced breakfast, lunch, and snacks is impacted as many are now removed from that food source due to school closures.
 - ☒ This applies to this community
 - ☐ This does NOT apply to this community
- Employment impacts:
 - Employment impacts of the pandemic have been immediate and profound. Anecdotal information as well as early data about unemployment claims from March and April confirm a significant

emerging need in the area of employment.¹ Local indicators show that national patterns of unemployment are being seen in this community.

- ☒ This applies to this community
- ☐ This does NOT apply to this community
- Individuals in the health care field are at high-risk of exposure to COVID-19 and are under tremendous stress due to additional work hours and challenging work conditions. In particular many of those workers with close, frequent contact with vulnerable individuals are lower-wage individuals.²
 - ☒ This applies to this community
 - ☐ This does NOT apply to this community
- Individuals in the educational field – especially teachers and assistants in Head Start and Early Head Start as well as other early childhood care settings – are working remotely due to school shutdowns. Lower-wage workers in these fields are more vulnerable to layoffs and/or may lack the technology resources in their home to work remotely.³
 - ☒ This applies to this community
 - ☐ This does NOT apply to this community
- Individuals in many sectors of the economy – but particularly the service sector, the retail sectors, gig economy, and others most affected by quarantine policies – are currently experiencing sudden and unexpected unemployment. Some are unaware of resources available to them and their families as they are experiencing unemployment for the first time.⁴
 - ☒ This applies to this community
 - ☐ This does NOT apply to this community
- Educational impacts:
 - Closings of public schools in the Community Assessment area are having an immediate impact on children’s education. Children with less access to resources (broadband internet, computers/tablets, technology expertise, language barriers, etc.) are most at-risk for suffering learning loss during a potentially protracted period of school closure.
 - ☒ This applies to this community
 - ☐ This does NOT apply to this community
 - Caregivers of school-age children must secure day care arrangements for their children or sacrifice employment to care for their children. These same caregivers are also expected to be primary teachers for their children during the period of the closure. Parents with limited resources face numerous challenges as a result of this situation and educational outcomes for their children will be affected.⁵
 - ☒ This applies to this community
 - ☐ This does NOT apply to this community
- Impacts on human services provision:

¹ <https://www.brookings.edu/blog/the-avenue/2020/05/13/what-weekly-unemployment-claims-reveal-about-the-local-impacts-of-the-covid-19-recession/>

² https://www.cdc.gov/mmwr/volumes/69/wr/mm6915e6.htm?s_cid=mm6915e6_x

³ <https://www.npr.org/2020/04/11/830856140/teaching-without-schools-grief-then-a-free-for-all>

⁴ <https://www.pewresearch.org/fact-tank/2020/03/27/young-workers-likely-to-be-hard-hit-as-covid-19-strikes-a-blow-to-restaurants-and-other-service-sector-jobs/>

⁵ <https://www.washingtonpost.com/education/2020/04/17/why-covid-19-will-explode-existing-academic-achievement-gaps/>

Financial Well-being

- Services to vulnerable populations are being curtailed or drastically changed. Some service providers are not operating, leaving gaps in services to the community. Other service providers have had to alter their service provision in significant ways, leaving some family needs unmet. Finally, for those service providers continuing to operate, the changed circumstances have required significant, immediate adaptations that will require additional resources to support over a longer period of time:
 - ☒ This applies to this community
 - ☐ This does NOT apply to this community
- Community resource impacts:
 - The impacts of COVID-19 on community resources are numerous and include a reduction in the availability of resources (access to group activities, commercial services), a scarcity of some resources (health care, food and emergency supplies) and/or needs for resources that have not previously been required in this community in any significant capacity.
 - ☒ This applies to this community
 - ☐ This does NOT apply to this community
 - The broad impacts of COVID-19 on this community have created an even more urgent need for coordination and collaboration of resources among the public sector, the public health sector, first responders, educators, the business community, the faith community and many others. Thrive Virginia plays an important role convening organizations, people and resources to support families.
 - ☒ This applies to this community
 - ☐ This does NOT apply to this community

III. Anticipated near- and long-term impacts

The needs above are already established through initial data and anecdotal reports from customers, staff, board members and community stakeholders. Based on these already-observed events, it is likely that there will be near-term (1-3 months) and longer-term (greater than 3 months) impacts that require immediate planning. A partial, but not complete, list of the anticipated impacts include:

- *Prolonged service disruptions:* The disruptions in service delivery to customers are expected to continue for a substantial time. This is likely to lead to ancillary challenges for customers that may become long-term issues. For example, learning loss⁶ and domestic violence/child abuse⁷ have become larger problems due to service disruptions.
 - ☒ This applies to this community
 - ☐ This does NOT apply to this community
- *Exacerbated housing issues:* Due to the immediate economic impact of the COVID-19 pandemic, renters face one or more months where they may lack the funds to pay rent; homeowners with a mortgage may miss mortgage payments.
 - ☒ This applies to this community
 - ☐ This does NOT apply to this community
- *Prolonged employment issues:* Sudden layoffs and other employment disruptions are being addressed by emergency response measures; however, it is anticipated that long-term recovery efforts will be required to help customers reconnect to the workforce, particularly those for whom employment assistance has not previously been required.⁸

⁶ <https://www.washingtonpost.com/education/2020/04/17/why-covid-19-will-explode-existing-academic-achievement-gaps/>

⁷ <https://www.samhsa.gov/sites/default/files/social-distancing-domestic-violence.pdf>

⁸ <https://www.brookings.edu/research/how-covid-19-will-change-the-nations-long-term-economic-trends-brookings-metro/>

- ☒ This applies to this community
 - ☐ This does NOT apply to this community
- *Prolonged agency capacity issues:* Policies limiting in-person staff/customer interactions may be in place for an extended period of time and agencies will need to maintain remote work and remote customer-interaction infrastructure to be responsive to these needs in a more sustainable capacity.
 - ☒ This applies to this community
 - ☐ This does NOT apply to this community
 - *Prolonged community resource/coordination issues:* The short-term community coordination needs cited in this Assessment are presumed to continue into the long-term. Current conditions may persist for an extended period; recovery efforts will require coordination; ongoing community preparedness to guard against a future outbreak will also require ongoing convening and new community readiness strategies based on what is shown to be effective during the current crisis.⁹
 - ☒ This applies to this community
 - ☐ This does NOT apply to this community

IV. Addressing Equity Implications

Though immediate data may not yet be easily obtained regarding the demographics of those most impacted by the COVID-19 epidemic, previous Community Assessments, as well as countless government and academic studies have established that structural racism, xenophobia, sexism, stigmatization and othering persist – and are often exacerbated – in times of crisis. Community Action recognizes the obligation to ensure that the barriers of structural race, gender, and other inequities are addressed during this time of crisis and beyond. Therefore, it is with this lens that communities are invited to use the equity lens and the question, “why”, to understand the specific needs of the diverse populations served.

⁹ <https://centerforcommunityinvestment.org/blog/reimagining-strategy-context-covid-19-crisis-triage-tool>