# Greater Prince William Community Health Improvement Plan 2020 - 2024 •

**Brought to you by** COMMUNITY HEALTHCARE COALITION OF GREATER PRINCE WILLIAM

Serving Prince William County and the independent cities of Manassas and Manassas Park

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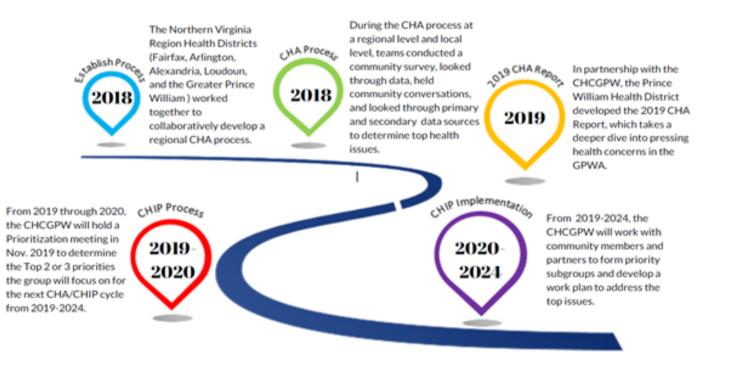


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# Introduction

In 2019, the Community Health Care Coalition (CHCGPW) used the framework of Mobilizing for Action through Planning and Partnerships (MAPP) to collectively develop a picture of the health of our community by utilizing methods to collect and analyze both qualitative and quantitative data. Using this framework, the community prioritized public health issues so that as a community under the coalition's leadership, can develop and implement strategies unique to our community to address these priority issues. The coalition will lead this effort using an equity lens in an effort to achieve health equity. This comprehensive community focused process provided the framework to go from the Community Health Assessment (CHA) to developing the Community Health Improvement Plan (CHIP).

The CHCGPW used assessments data form the MAPP process to identify the public health community concerns that will be addressed through a multisector involvement to implement strategies to affect change. The three priorities: Educational Opportunities, Neighborhood and Built Environment, and Communications and Marketing.



# A Message from the CHCGPW

In 2019 through early 2020, the Community Health Care Coalition of Greater Prince William (CHCGPW) engaged the community and lead the 2019 to 2024 Community Health Assessment (CHA) and planning for the Community Health Improvement Plan (CHIP). The coalition used the Mobilizing for Action through Planning and Partnerships (MAPP) to develop the CHA and begin to develop the CHIP. This process has several phases:

·Partnership development

Visioning

*·*Four assessments using qualitative, and quantitative methods to understandthe health of the community

·Identify public health issues

·Formulate goals and strategies

The CHCGPW is made up of community healthcare entities, foundations, educational entities, community members, non-profits, health insurance companies, community leaders, chamber, faith-based organizations, and members of governmental entities.

Vision: CHCGPW supports health equity, where all that live in the GPWA are thriving and have the opportunity to be healthy.

Mission: The Community Healthcare Coalition of Greater Prince William ("CHCGPW" or "the General Members") will work collectively to ensure all have the opportunity for health and wellbeing, utilizing limited resources most efficiently and effectively. We understand that we all share the responsibility of creating a healthy community where all can have an equal opportunity for health and well-being.

The goal of the CHCGPW is to improve the health of the residents of the Greater Prince William Area and jurisdictions served by the participating entities.

The purpose of the CHCGPW is to bring together a group of multidisciplinary agencies, entities, and stakeholders to identify and prioritize community health issues. This will be accomplished through periodically conducting community health needs assessments, and developing, implementing, and evaluating community health improvement plans. The Coalition will also be responsible for identifying ways to utilize limited resources efficiently and effectively to address these identified community public health issues of concern.

The CHIP focuses on three identified priority areas to improve the health and well-being for all those in the Greater Prince William Area. Many factors impact health besides access to quality healthcare. Our community prioritized Education, Neighborhood and Built Environment, and Communications and Advocacy.

We hope the community will join the coalition in our journey as we address the public health issues that impact the health of our community. We are so proud of the community's understanding that there is more to health than healthcare.



# Acknowledgements

The CHCGPW would like to acknowledge the participation of other community members, agencies, non-profits that are dedicated to making the Greater Prince William Area a healthier place to live, work and play.

### **Prince William Health District**

Alison Ansher, MD, MPH,

Sarah Fenno

Joya Patel

All PWHD employees and Medical Reserve Corps volunteers who participated in our surveying efforts and community events



## **Community Members & Partners**

Canek Aguirre, Anthem Lee Hopkins, CASA de Virginia Tammy Rowland, Freedom Center **Rebecca Sutter, George Mason University** Judy Merring, Community Member Salwa Ahmad, Community Member Mary Catherine Hunnicutt, Greater Prince William Community Health Center Jose Pedro Guallar, HOLA Prince William Rachel Lynch, MPH, Inova Brittany Giles Cantrell, Kaiser Permanente Pat Victorson, NAMI Prince William McIntyre-Hall, Ondrea, Northern Virginia **Family Service** Kim Golanski, Novant UVA Health System Erin Matthew Thomas, Potomac Health Foundation Susie Lee, Potomac Health Foundation Sally Wood, PWC Parks and Recreation Seth Hendler-Voss, PWC Parks and Recreation Heather Martinsen, PWC Community Services LeNelle Mozell, PWC Community Services Angie Mendez, PWC Community Services

Elijah Johnson, PWC Government Mark Meye, Greater Prince William Community Health Center

# **Prioritization**

More than 60 community members gathered to review the findings of the Greater Prince William Area Community Health Assessment (CHA) and reviewed qualitative and quantitative data pertaining to the ten top public health issues identified by the community. The participants broke up into smaller groups based upon the priority they felt was most important, brainstormed and developed a presentation to convince the rest of the community members that their public health issue needed to be addressed. Part of their presentation had to address the feasibility, potential impact, and who would benefit. Participants learned about these top ten health issues, and the local conditions and disparities that impacts each one. Each participant cast votes to select the top priority areas. The three priority areas chosen were Educational Opportunities, Neighborhood and Built Environment, and Communications and Marketing. Feasibility requires other interested community partners collaborating by committing time, resources and expertise to help move the needle in a positive direction. Impact is determined by who will be positively impacted, and does it advance equity.

# **CHIP Priorities**

- Educational Opportunities
- Neighborhood & Built Environment
- Communications & Marketing

#### GREATER PRINCE WILLIAM AREA

# Educational Opportunies



## Why Education Matters to Health:

People who have more education live longer and healthier lives than those who have fewer years of schooling. Levels of education have a direct impact on income, skills, and opportunities that people have to lead healthier lives in their communities. Measures include levels of schooling, on-time graduation rates, and enrollment in post-secondary education programs.

The home environment, socioeconomic status, and other factors can create stress, cause illness, and deprive individuals and families of resources for success and optimal health. For example, access to high-quality early childhood programs has been linked to school readiness, achievement, success, and broader well-being over a person's lifetime.

Having access to education and vocational training increases the likelihood of employment that provides health-promoting benefits such as insurance, paid leave, and retirement as opposed to high-risk occupations with fewer benefits. A person's income can affect their ability to purchase healthy foods, exercise regularly, establish social networks, and pay for health services, transportation, and safe housing which directly impacts access to resources for good health and well-being. Additionally, people with more education are more likely to understand their health needs and engage in behaviors to maintain optimal health.

## **Quick Stats in Greater Prince William Area:**

Educational opportunities ranked 4th as a quality of life concern for survey respondents. The Forces of Change discussion identified the lack of alternative secondary education and other educational opportunities in our community.

Hispanic/Latino students had lower on-time graduation rates compared to their white counterparts, as well as a lower percentage receiving an advanced studies diploma (*Virginia Department of Education*, 2017-2018 estimates).

The percentage of 3rd grade students proficient in math and reading are below the state averages in Manassas City and Manassas Park City (*Virginia Department of Education, 2017-2018 estimates*). The percentage of 8th grade students proficient in math and reading are below in the state averages in Manassas City (*Virginia Department of Education, 2017-2018 estimates*).

Educational attainment varies based on race/ethnicity. For example, in Prince William County the percent of individuals with a high school degree or higher in whites was 95.8%, blacks was 93.7%, and Hispanics/Latinos was 66.1%. (U.S. Census Bureau, American Community Survey, 2013-2017 5-year estimates).

Manassas City and Manassas Park City show an increase in the student-to-teacher ratio in comparison to prior years (*National Center for Education Statistics*, 2016-2017 estimates).

#### **Educational Measures in Greater Prince William Area:**

Percent Of Individuals with a Bachelor's

11.68

Virginia

#### **On-time Graduation**

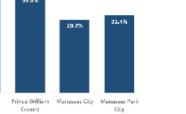


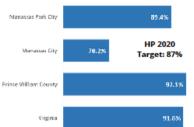






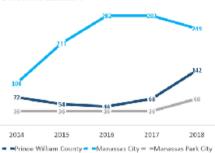


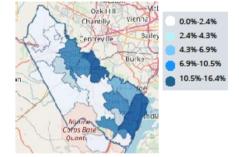




4-Year-Olds Served by the Virginia Preschool Initiative







#### Resources:

- Virginia Department of Education: http://www.doe.virginia.gov/statistics\_reports/index.shtml
- U.S. Census Bureau, American FactFinder: https://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml
- BeHealthyBeHappy Dashboard: http://www.behealthybehappyprincewilliam.com/
   Annie E. Casey Foundation, Kids Count Data Center: https://datacenter.kidscount.org/
- Voices for Virginia's Children: https://vakids.org/







#### Why Neighborhood & Built Environment Matters to Health:

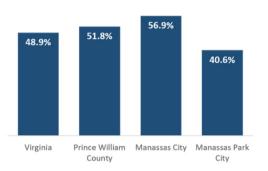
This category describes the conditions where community members live, work, learn, and play. Measures include rates of racial segregation, access to grocery stores, availability of public transit, and cost and quality of housing.

Community conditions can create either opportunities or barriers to living a healthy life. Clean, safe neighborhoods with ample green space, complete sidewalks, and low crime rates support physical activity. Alternately, a high density of fast-food restaurants, easy access to alcohol and tobacco products, and a lack of public transportation can encourage unhealthy habits. In addition, an individual's health is greatly shaped by their housing quality, cost, stability, and safety. For example, poor quality housing with issues such as lead paint, mold, and pests can trigger asthma flare-ups, particularly in children. The high cost of housing is also a major issue in Northern Virginia, and individuals or families who pay substantially higher portions of their income on housing are forced to make difficult decisions on healthy lifestyle choices and medical care.

#### **Quick Stats in Greater Prince William Area:**

- Housing that is affordable was the number one quality of life concern for survey respondents across all demographics.
- The Forces of Change discussion highlighted the effect of housing on health, specifically focusing on the need for access to affordable and safe housing, senior housing, workforce housing, and homeless services.
- In Prince William County, 51.8% of renters spend 30% or more of household income on rent, 56.9% in Manassas City, and 40.6% in Manassas Park City (U.S. Census Bureau, American Community Survey, 2013-2017 5-year estimates).
- In the Prince William Health District, 32.2% of individuals indicated they were worried or stressed about having enough money for their rent/mortgage in the past 12 months (*Virginia Behavioral Risk Factor Surveillance Survey, 2014 estimates*).
- The Northern Virginia region is known for long commutes to work, with a mean commute time of 33.2 minutes. In Prince William County, the mean commute time to work is 39.1 minutes, 34.1 minutes in Manassas City, and 37.3 minutes in Manassas Park City (U.S. Census Bureau, American Community Survey, 2013-2017 5-year estimates).
- The Greater Prince William Area rates highly in the Food Environment Index, which combines two measures of food access: the percentage of the population that is low-income and has low access to a grocery store, and the percentage of the population that did not have access to a reliable source of food during the past year. However, there are pockets in the community (such as children and people 65+ years old) that have low access to a grocery store, especially in Manassas Park City (U.S. Department of Agriculture, Food Environment Atlas, 2015 estimates).

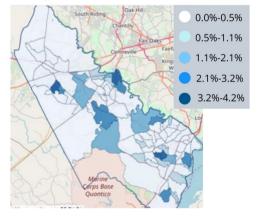
Community Healthcare Coalition of Greater Prince William



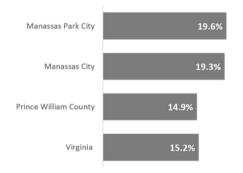
#### Neighborhood & Built Environment Measures in Greater Prince William Area:

Renters Spending 30% or More of Household Income on Rent

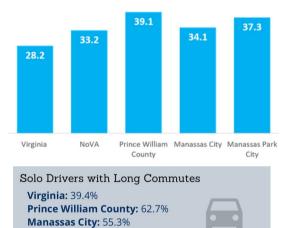
# Households with No Car and Low Access to a Grocery Store



Severe Housing Problems



Mean Travel Time to Work (in minutes)



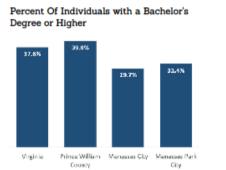
Manassas Park City: 59.0%

#### **Resources:**

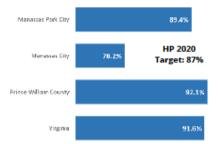
- Virginia Department of Housing and Development: https://www.hud.gov/states/virginia
- U.S. Census Bureau, American FactFinder: https://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml
- BeHealthyBeHappy Dashboard: http://www.behealthybehappyprincewilliam.com/
- County Health Rankings: https://www.countyhealthrankings.org/
- Feeding America: https://www.feedingamerica.org/
- VA BRFSS: http://www.vdh.virginia.gov/brfss/data/
- U.S. EPA: https://www.epa.gov/
- Urban Institute: https://www.urban.org/

Please reach out to Sarah Fenno for any questions or data needs: Sarah.Fenno@vdh.virginia.gov

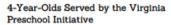




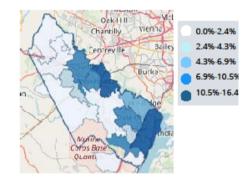
#### **Educational Measures in Greater Prince William Area:**



**On-time Graduation** 



Poverty Status by School Enrollment



#### Prince William County = Manassas City = Manassas Park City

2015

72

2014

**Resources:** 

2018

- Virginia Department of Education: http://www.doe.virginia.gov/statistics\_reports/index.shtml
   U.S. Census Bureau, American FactFinder: https://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml
- BeHealthyBeHappy Dashboard: http://www.behealthybehappyprincewilliam.com/

2017

- Annie E. Casey Foundation, Kids Count Data Center: https://datacenter.kidscount.org/
- Voices for Virginia's Children: https://vakids.org/

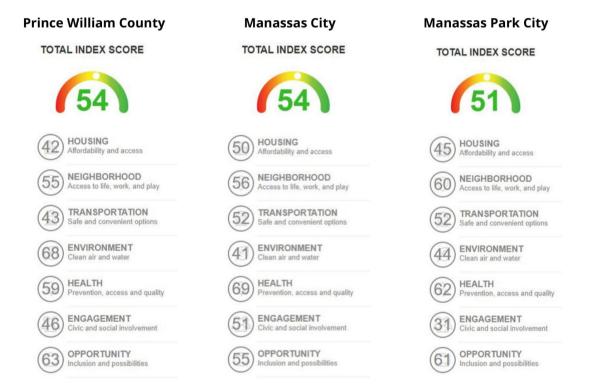
2016



#### Aging Measures in Greater Prince William Area:

#### AARP LIVABILITY INDEX

This score rates the overall livability of a selected neighborhood, city, county, or state on a scale from 0 to 100. It is based on the average score of seven livability categories—housing, neighborhood, transportation, environment, health, engagement, and opportunity—which also range from 0 to 100. We score communities by comparing them to one another, so the average community gets a score of 50, while above-average communities score higher and below-average communities score lower.

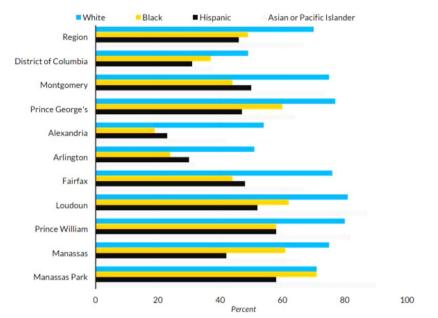


#### Dig deeper into the data! Check out the AARP Livability Index and explore what makes a community livable!

https://livabilityindex.aarp.org/

Community Healthcare Coalition of Greater Prince William

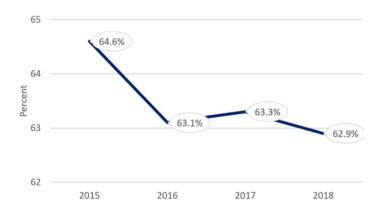




#### SDoH Measures in Greater Prince William Area:

Homeownership Rates by Race/Ethnicity

#### Homeownership Rates for the DC-VA-MD-WV Statistical Area: 2015 to 2018



#### **Prince William County**

74% owner-occupied units\$394,800 median value of owner-occupied housing units

#### **Manassas City**

65% owner-occupied units

**\$313,100** median value of owneroccupied housing units

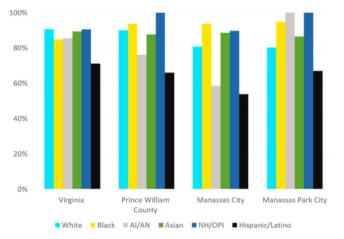
#### **Manassas Park City**

66% owner-occupied units

**\$281,500** median value of owner-occupied housing units



Community Healthcare Coalition of Greater Prince William



#### **SDoH Measures in Greater Prince William Area:**

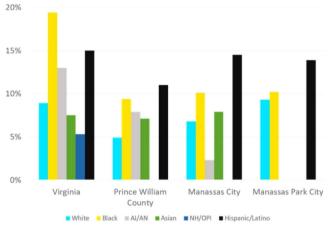
High School Graduate or Higher by Race/Ethnicity

# Q

#### Looking for more data?

For more information about demographics in Greater Prince William Area, please refer to **Appendix B** of the Community Health Assessment.

The complete report can be found on our **data dashboard**! BeHealthyBeHappyPrinceWilliam.com



#### Below Poverty Level by Race/Ethnicity

Note: For some race categories, the value was 0.0%.

#### **Resources:**

- Urban Institute: https://www.urban.org/
- U.S. Census Bureau, American FactFinder: https://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml
- Census Reporter: censusreporter.org
- BeHealthyBeHappy Dashboard: http://www.behealthybehappyprincewilliam.com/
- County Health Rankings: https://www.countyhealthrankings.org/

Please reach out to Sarah Fenno for any questions or data needs: Sarah.Fenno@vdh.virginia.gov





#### Vision:

The Community Healthcare Coalition of Greater Prince William (CHCGPW) supports health equity, where all that live in the Greater Prince William Area are thriving and have the opportunity to be healthy.

#### **Mission:**

CHCGPW will work collectively to ensure all have the opportunity for health and well-being. utilizing limited resources most efficiently and effectively. We understand that we all share the responsibility of creating a healthy community where all can have an equal opportunity for health and well-being.

#### **Goals and Purpose:**

The goal of the CHCGPW is to collectively improve the health of the residents of the Greater Prince William Area and jurisdictions served by the participating entities.

The purpose of the CHCGPW is to bring together a group of multidisciplinary agencies, entities, and stakeholders to identify and prioritize community health issues. This will be accomplished through periodically conducting community health needs assessments, and developing, implementing, and evaluating community health improvement plans. The Coalition will also be responsible for identifying ways to utilize limited resources efficiently and effectively to address these identified community public health issues of concern.

#### Finding a Brand for Our Coalition:

- Deliver our message clearly and effectively
- Confirm our credibility as a coalition in the community
- Connect with our intended audiences
- Motivate our intended audiences
- Create an audience following and loyalty

We need an agreed upon look and personality, font, colors, and frequency and methods communication.

Community Healthcare Coalition of Greater Prince William



#### **Core Communications:**

We need consistent, timely, and relevant communications about our work and strategies for impact in the community.

- Who will be responsible for this?
- What platforms do we want to use?
- Frequency of communications?
- What do we want the content to look like?
- What is the purpose of the communications?
- How will communications get approved before distribution?

**Communication Channels** 

- Electronic communications (emails, newsletters)
- Social media (Facebook, Twitter, etc)
- Online webinars
- In-person meetings, events, conferences
- Press or media coverage
- Paid media (advertisements, etc)
- Other methods

#### **Outreach in the Community:**

Community Outreach Plan

- Define goals and objectives
- Identify your targets
- Create your message
- Package your message
- Distribute your message
- Evaluate your plan

How will we measure our impact throughout all this?

#### What is Our Role in Advocacy:

- What is our plan for advocacy?
- How will we chose what issues we support?
- How will we sustain our efforts?
- How will we measure our impact?
- Etc.



Community Healthcare Coalition of Greater Prince William

# What is Next?

The Community Health Improvement Plan (CHIP) is a living document and changes will be made to this document based on updates that occur during the implementation of the chosen public health initiatives over the next five years. The chosen priorities, Educational Opportunities, Neighborhood and Built Environment, and Communications and Marketing. The development of strategies, goals, objectives, and action steps of each priority will take into consideration, feasibility, impact and equity.



# **List of Appendices**

Appendix A: CHCGPW CHIP Timeline

<u>Appendix B: Going from CHA to CHIP</u> <u>Highlights from the 2019 Community Health Assessment</u>

Appendix C: CHIP Prioritization Activity

Appendix D: Heading from the CHA to the CHIP January 2020

Appendix E: CHIP Workgroup ToolKit

<u>Appendix F: CHIP Priorities Alignment with Other Plans throughout Greater</u> <u>Prince William Area and the State</u>

**Appendix G: Action Plan** 

All appendices can be found at **BeHealthyBeHappyPrinceWilliam.com** 

# Community Health Improvement Plan Data Update July 2023

# Educational Opportunities



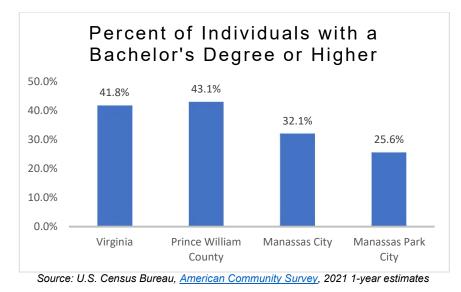
## Updated Stats in the Greater Prince William Area:

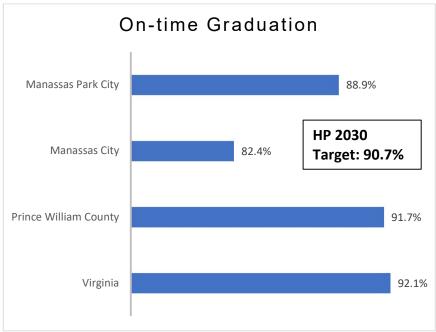
- Hispanic/Latino students had lower on-time graduation rates in 2022 in Manassas City, Manassas Park, and Prince William County compared to their white counterparts, as well as a lower percentage receiving an advanced studies diploma where both standard credits and verified credits were completed (*Virginia Department of Education*, 2021-2022 estimates).
- The percentage of 3rd grade students proficient in math and reading are below the state averages in Manassas City and Manassas Park City (*Virginia Department of Education, 2021-2022 estimates*).
- The percentage of 8th grade students proficient in math and reading are below the state averages in Manassas City and Manassas Park City (*Virginia Department of Education, 2021-2022 estimates*).
- Educational attainment varies based on race/ethnicity. For example, in 2021 in Prince William County the percent of individuals with a high school degree or higher in whites was 96.6%, Blacks was 94.5%, and Hispanics/Latinos was 70.3%. (U.S. Census Bureau, American Community Survey, 2017-2021 5-year estimates).
- Manassas City, Manassas Park City, and Prince William County reported an increase in the student-to-teacher ratio during the 2021-2022 school year compared to the 2020-2021 school year (*National Center for Education Statistics, 2020-2022 estimates*).

# Educational Opportunities

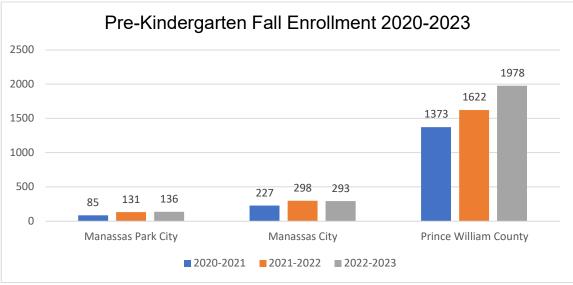


### Updated Educational Measures in the Greater Prince William Area:

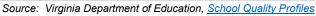


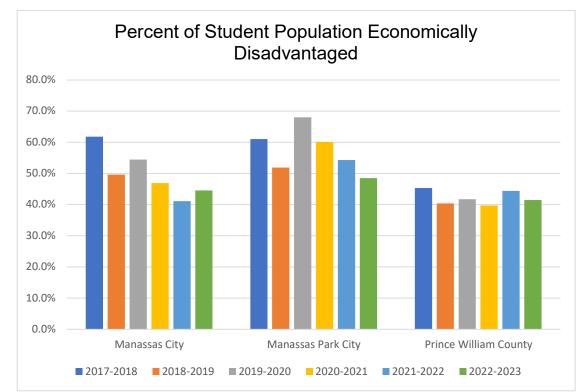


Source: U.S. Census Bureau, American Community Survey, 2021 1-year estimates



Updated Educational Measures in the Greater Prince William Area:





NOTE: Economically disadvantaged students include those who are eligible for Free/Reduced Meals, receive TANF, or are eligible for Medicaid. Source: Virginia Department of Education, 2017-2023 estimates



## Updated Stats in the Greater Prince William Area:

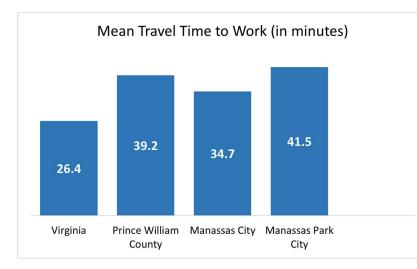
- In Prince William County, 46.6% of renters spend 30% or more of household income on rent, 51.6% in Manassas City, and 59.0% in Manassas Park City (U.S. Census Bureau, American Community Survey, 2017-2021 5-year estimates).
- The Northern Virginia region is known for long commutes to work. In Prince William County, the mean commute time to work is 39.2 minutes, 34.7 minutes in Manassas City, and 41.5 minutes in Manassas Park City (U.S. Census Bureau, American Community Survey, 2017-2021 5-year estimates).
- The food insecurity rate in Prince William County is 4.5%, 4.7% in Manassas City, and 4.7% in Manassas Park (*Feeding America*, 2021).



### Updated Neighborhood & Built Environment Measures in Greater Prince William:



Source: U.S. Census Bureau, <u>American Community Survey</u>, 2017-2021 5-year estimates



Source: U.S. Census Bureau, <u>American Community Survey</u>, 2017-2021 5-year estimates

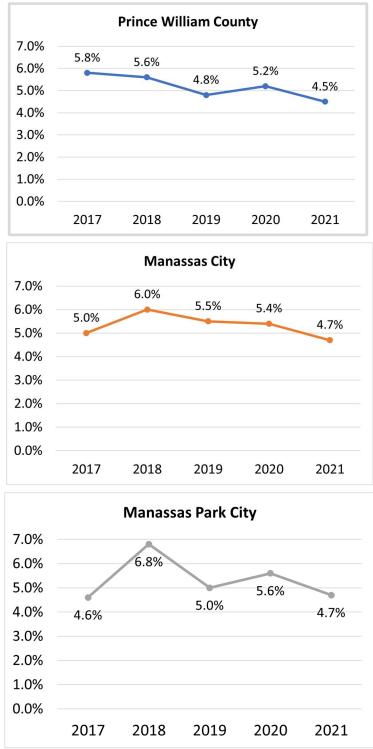
### Solo Drivers with Long Commutes

Virginia: 41% Prince William County: 65% Manassas City: 54% Manassas Park City: 61%



#### Updated Neighborhood & Built Environment Measures in Greater Prince William:

Figure 1. Food Insecurity Rate, Greater Prince William Area



Source: Feeding America, 2021

### Aging Measures in the Greater Prince William Area:

#### AARP LIVABILITY INDEX

This score rates the overall livability of a selected neighborhood, city, county, or state on a scale from 0 to 100. It is based on the average score of seven livability categories – housing, neighborhood, transportation, environment health, engagement, and opportunity – which also range from 0 to 100. We score communities by comparing them to one another, so the average community gets a score of 50, while above-average communities score higher and below-average communities score lower.

Ma	anassas Park City	Manassas City	Prince William County	
Overall Score	· 58 ···	59 10	55 10	
ff Housing	47	50	42	
<b>Q</b> Neighborhood	60	62	55	
🚔 Transportation	n 53	53	43	
🔩 Environment	61	57	65	
🔁 Health	73	74	58	
🤽 Engagement	53	70	56	
🔗 Opportunity	60	48	63	

# Dig deeper into the data! Check out the AARP Livability index and explore what makes a community livable!

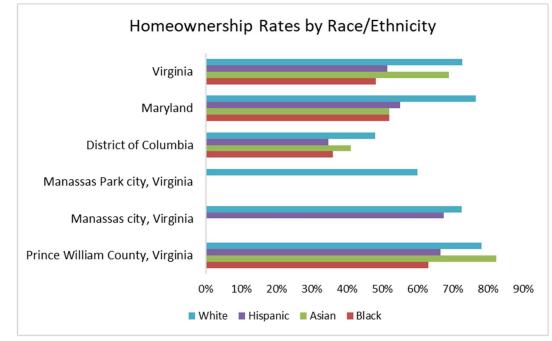
https://livabilityindex.aarp.org/

#### **Social Determinant Impact**

As mentioned previously in the Community Heath Assessment (CHA), "Health depends on good education, income, housing, transportation, safety, and other living conditions" (page 15). A 2021 study conducted by Prince William Health District and Centers for Disease Control regarding of the impact of COVID-19 in the Hispanic and Latino communities, clearly demonstrates the intersection of Social Determinants and their impacts on the community's health. Primary Data indicated that various social determinants of health such as living conditions, economic contributors, and occupation were large contributors to the disproportionation rates of COVID-19 among Hispanic or Latino persons in the greater Prince William Area. Hispanic and Latino survey respondents reported average household sizes of 5.6 compared to the Virginia average of 2.6, this inturn reduced ability to socially distance and contributed to the elevated COVID -19 infection rates for this specific population. Additionally, nearly 81% of respondents reported having household members employed as essential service providers or other public facing/service-oriented positions which required them to continue to work outside of the home throughout the pandemic. This evidenced that economic stability and occupation are two additional social determinants that contributed to the Hispanic and Latino Prince William area community members accounting for 55% of COVID-19 cases while only representing 25-30% of the overall population.

If not addressed, these contributors can compound and multiply impacts to health and wellness. Factors can overlap, for example: lower education level can result in limited occupational opportunities, which then could contribute to lower income and limited housing affordability. When considering this in the Prince William Area's Hispanic and Latino population, 60.9% of survey respondents reported education level "less than high school" compared to the overall Prince William community's "high school completion" average of 84.3%. This factor was potentially a contributor to the high percentage of respondents reporting working in the construction or restaurant industries. These industries required them to work outside of their homes throughout the COVID-19 pandemic, placing them at higher risk for COVID-19 exposure. Additionally, to support better economic stability, larger household sizes and shared living spaces contributed to limitations in social distancing in this community. As discussed, these overlapping factors resulted in large impacts to the health of this population. The collection of this primary data illustrates that Social Determinants of Health are crucial to determining the health and wellness of a community. As a community, education was selected as one of the primary priority areas for this Community Health Improvement Plan.

Davlantes, E., Tippins, A., Espinosa, C., Lofgren, H., Leonard, S., Solis, M., Young, A., Sockwell, D., & Ansher, A. (2022). Mitigating SARS-CoV-2 Transmission in Hispanic and Latino Communities-Prince William Health District, Virginia, June 2020. Journal of racial and ethnic health disparities, 9(2), 390–398. <u>https://doi.org/10.1007/s40615-021-00968-y</u>



## Updated SDoH Measures in the Greater Prince William Area:

Note: Due to population size and suppression rules, for some localities certain metrics are not available.

Source: U.S. Census Bureau, American Community Survey, 2017-2021 5-year estimates

## **Prince William County**

**73.9%** owner-occupied units **\$408,900** median value of owneroccupied housing units

### **Manassas Park City**

**61.4%** owner-occupied units **\$330,200** median value of owner-occupied housing units

### **Manassas City**

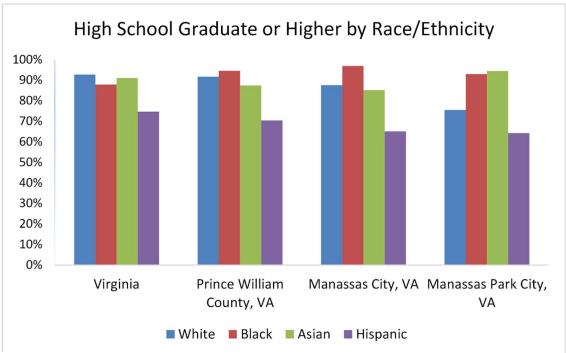
**70.8%** owner-occupied units **\$356,500** median value of owneroccupied housing units

Source: U.S. Census Bureau, American Community Survey, 2017-2021 5-year estimates

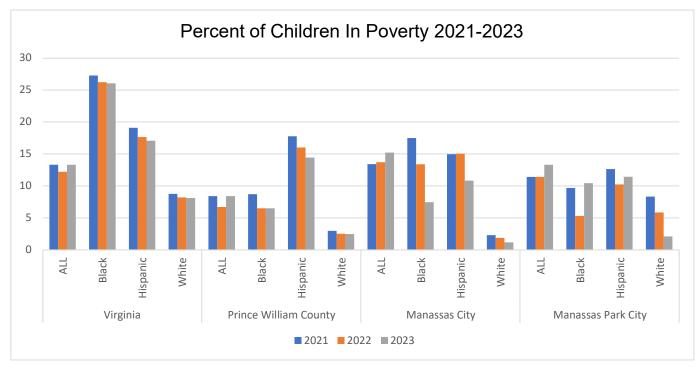
Homeownership for the DC-VA-MD Area: 2018-2021								
	2018	2019	2020	2021				
District of	41.8%	41.6%	42.5%	41.5%				
Columbia								
Maryland	66.8%	66.9%	67.1%	67.3%				
Virginia	66.2%	66.3%	66.7%	66.6%				
Prince William	73.2%	73.3%	73.1%	73.9%				
County Manassas	65.1%	66.1%	69.3%	70.8%				
City	03.170	00.170	05.570	70.870				
Manassas Park City	65.8%	65.9%	60.7%	61.4%				

## Updated SDoH Measures in the Greater Prince William Area:

Source: U.S. Census Bureau, American Community Survey, 2017-2021 5-year estimates



Source: U.S. Census Bureau, American Community Survey, 2017-2021 5-year estimates



## Updated SDoH Measures in the Greater Prince William Area:

Source: RWJF County Health Rankings, 2023.



# Report prepared by

 PRINCE WILLIAM HEALTH DISTRICT

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