



BE HEALTHY BE HAPPY

Community Healthcare Coalition Greater Prince William



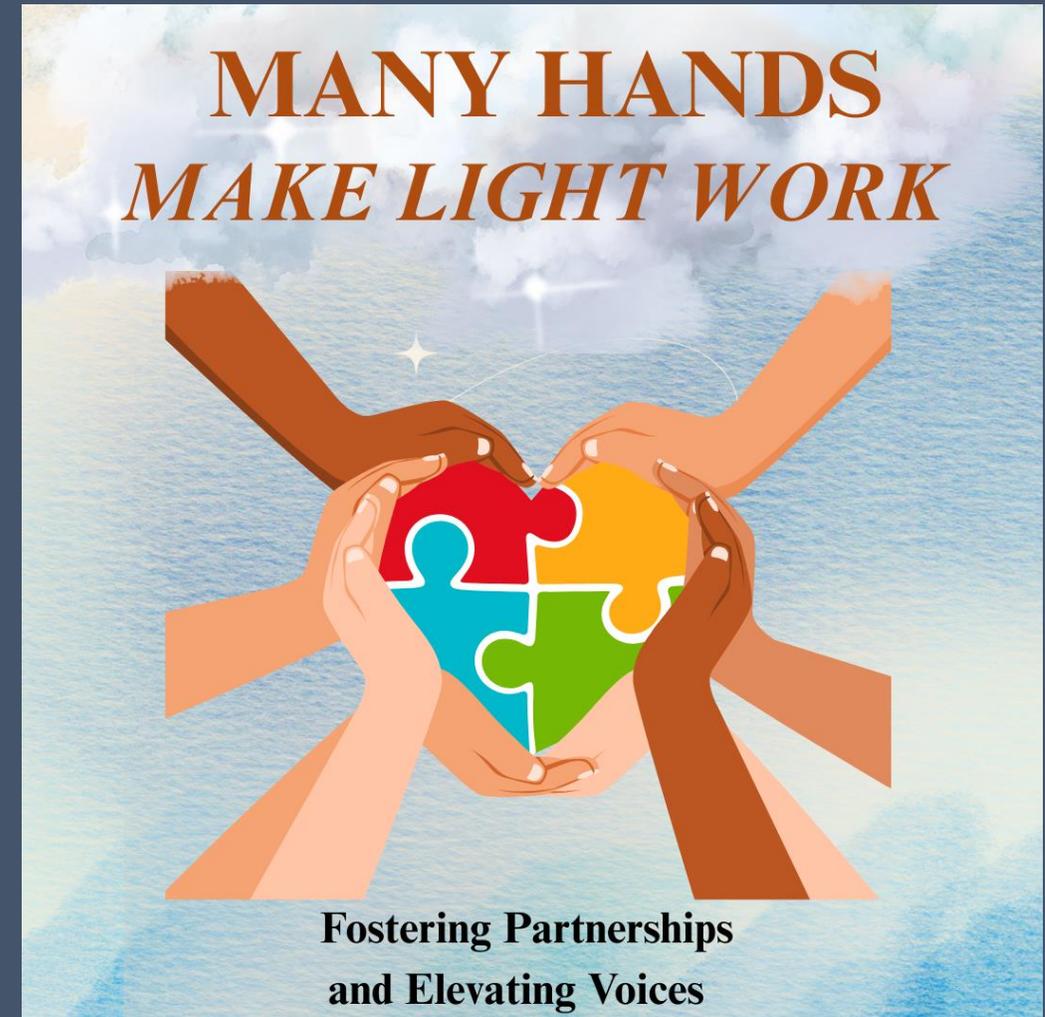
Community Health Improvement Planning (CHIP) Meeting

March 2, 2026



**BE HEALTHY
BE HAPPY**

Community Healthcare Coalition Greater Prince William



Please use your phone to access the QR code to track your meeting participation

CHIP Mtg Sign-In Form





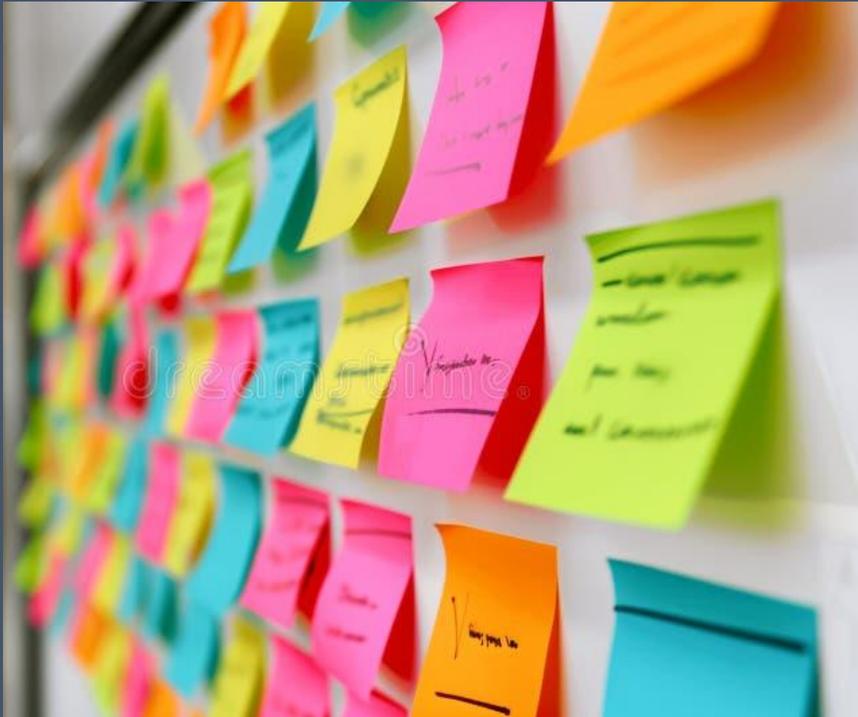
Welcome & Opening Remarks

Ondrea McIntyre-Hall, Coalition Co-Chair

Kaiser Permanente Mid-Atlantic Region

What made you curious enough to attend this meeting?

Data Walk (until 10:15am)



Community Profile

Greater Prince William (population 544,222 residents) includes Prince William County (484,625) and the cities of Manassas (42,674) and Manassas Park (16,923).¹ The area has seen substantial growth over the past 25 years, with population estimates projecting an almost 20% increase from 2025 to 2035.²

Greater Prince William is more diverse than Virginia overall.³

Area	White	Black	Hispanic	Asian
Manassas Park	42.3%	11.4%	43.8%	11.4%
Manassas	36.8%	12.8%	43.8%	7.3%
Prince William	41.8%	20.8%	23.7%	8.8%
Virginia	61.7%	19.8%	10.7%	4.8%

Cultural and Linguistic Needs
While English is the primary language spoken in the area, 35% of the population reported speaking a different language, with 27% of residents born outside of the United States.⁴ In there were more than 20 different home languages on record for area's school systems, with most common being Spanish, Urdu, Dari, Arabic, and Farsi.⁵ Sentara had 35,390 requests an interpreter in 2024, with 88% of those being for Spanish speaking services.⁶

People Living with Disabilities
Although the area has a lower percentage of people living with a disability compared to Virginia overall (8.8% vs 12.3%, respectively), data show that more Black residents in Manassas P (33.5%) are living with a disability compared to other races and ethnicities.⁷ On average, 3 Veterans living in Greater Prince William reported living with one or more disabling conditions between 2020 and 2024.⁸

According to the 2020 U.S. Census, Prince William County ranked the most diverse county in Virginia and the 10th most diverse county in the United States.⁹

Community Insight

1,990
Total survey responses

Community Health Assessment Survey
Of the total survey responses 1,658 Prince William County, Manassas City, and Manassas Park residents responded to the survey in English, Spanish, or Dari.

You saw big health challenges facing our communities—and we can work together to address them! We asked:

- What are the biggest **HEALTH CONCERNS** in the community where you live?
- Which **BEHAVIORS** need to be addressed in the community where you live?
- What would **most IMPROVE** health in the community where you live?

Overall top 3 most selected responses

- Mental health
- Chronic conditions
- Dental problems
- Eating unhealthy foods
- Lack of exercise
- Driving while drunk or high
- Access to healthcare services
- Affordable housing
- Access to dental care

Additional topics stood out among demographic groups by race/ethnicity and age ranges.

- Aging-related concerns
- Health differences by race/ethnicity
- Diseases that can spread
- Violence and crime in the community
- Isolation or loneliness
- Domestic violence
- Bullying
- Alcohol misuse
- Mental health services
- Affordable healthy food

Race/Ethnicity
We heard from a diverse range of racial and ethnic groups

Race/Ethnicity	Percentage
Hispanic/Latino	31.4%
Asian	27.0%
Black	8.2%
Additional groups*	19.3%
Not Shared	10.7%

Age
We heard from people ages 15 to 75+

Age Group	Percentage
Age 25-44	38.8%
Age 45-64	25.4%
Age 65+	14.9%
Age 15-24	9.2%
Not Shared	10.6%

*Additional groups include those with Spanish 10% of responses, and 10% of responses were in a language other than English, which were not reported in this chart.



CHIP Process Overview

Dr. Diane Anderson, Coalition Co-Chair

Prince William Health District

What is the CHA?

Community Health Assessment

To learn about the health of
Greater Prince William



CHA Survey Responses (n=1,990)

“What are the biggest **HEALTH CONCERNS** in the community where you live?”

“Which **BEHAVIORS** need to be addressed in the community where you live?”

“What would **most IMPROVE health** in the community where you live?”

Overall top 3 most selected



Mental health



Chronic conditions



Dental problems



Eating unhealthy foods



Lack of exercise



Driving while drunk or high



Access to healthcare services



Affordable housing



Access to dental care

Top 3 CHA Priority Health Issues



Improve access to behavioral health services



Expand resources to manage chronic conditions



Address social determinants of health

Residents call for **coordinated action** to address persistent barriers to health and well-being.



Lasting health improvements require more than reporting problems -- they require **multi-sector partnerships**.

Ensure we structure this Coalition CHIP to partner with existing GPW coalitions, committees, and action plans. Avoid duplication.

Prevention Coalition of Greater Prince William	PW Chamber of Commerce <ul style="list-style-type: none">• Health and Wellness Committee• Not-for-Profit Council	Evidence-Based Decision Making (EBDM) Group
Comprehensive Opioid Action Team (COAT)	Light of Hope Alliance, Don Bosco Center	Greater Prince William Trails Coalition
Greater Prince William Food Council	Prince William County Community Foundation	PW Office of Community Safety <ul style="list-style-type: none">• Community Mobilization Network
Kaiser, Sentara, UVA Health community benefit plans	INOVA Fair Oaks Action Committee	PWC Strategic Plan Goals/Metrics Workgroups

Today's Agenda: CHIP Workgroups

Health Communication

Behavioral Health

Maternal and Child Health

Coalition Votes on Potential 4th Workgroup

Coalition Vote to Determine Potential 4th Workgroup

Vote with 1 sticky note for the top priority.



Write down the sub-priority



4 Meeting Break-out Groups: Opportunities to address [CHIP Workgroup Topic]?

1. Who is currently doing this work?

- Brief elevator pitches from community partners
- Strengths/assets (Office of Community Safety data)
- Existing/upcoming efforts

2. What gaps should be addressed?

- What is needed?

3. Who needs to be involved/invited for this [CHIP Workgroup Topic]?

4. Volunteers to co-lead this CHIP Workgroup?

CHIP Workgroup Structure

1. Co-Leads
2. Issue statements
3. Root cause analysis
4. Goals
5. Strategies
 - Tactics/activities

Community Health Improvement Plan: Goals, Outcomes, Strategies, and Objectives

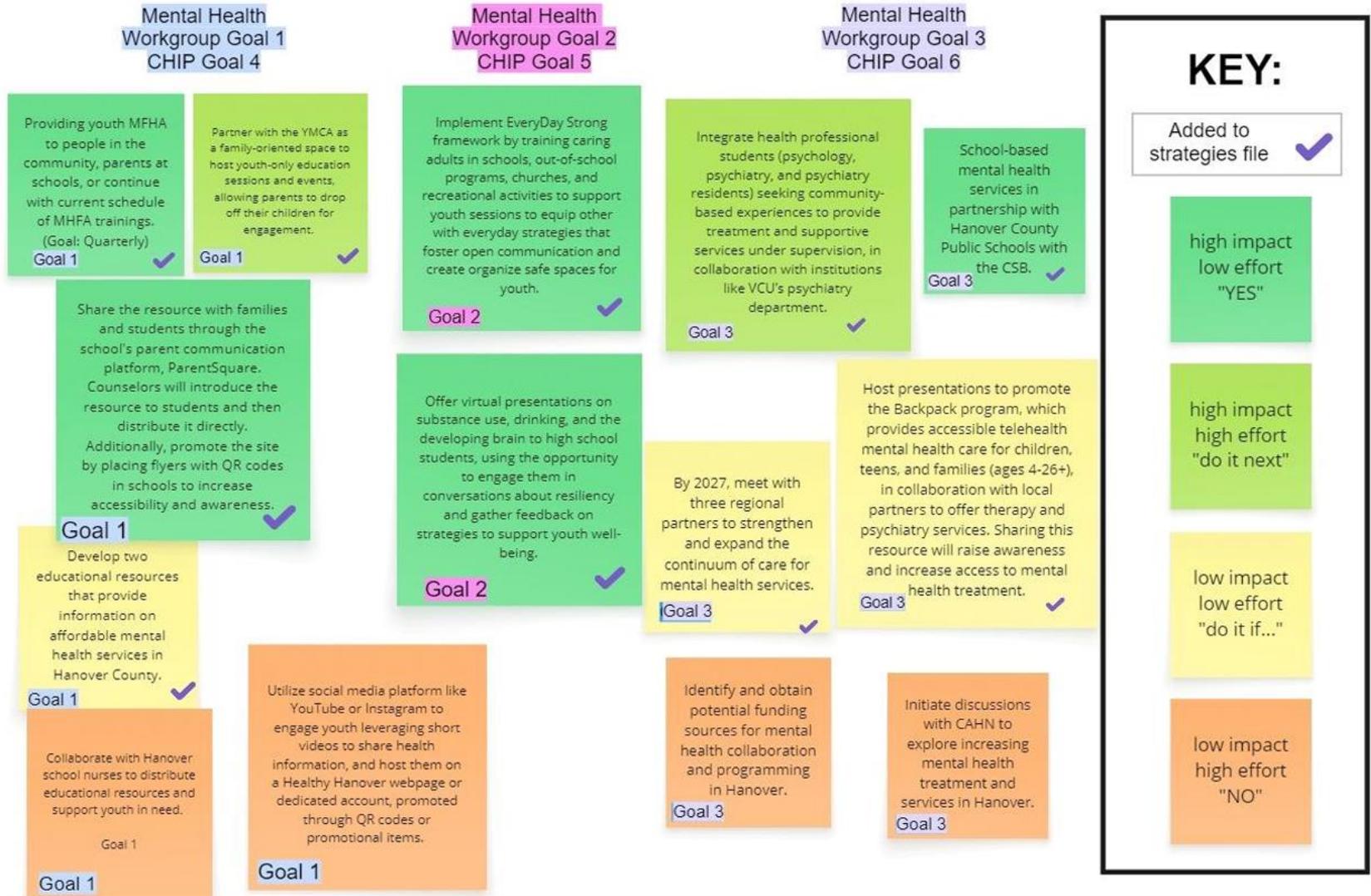
Priority Area: Behavioral Health

Goal 1.1: Increase access to behavioral health services, including treatment and recovery.

Outcomes	Strategies (listed in order of anticipated date of completion)	Indicators
<ol style="list-style-type: none"> 1. Reduced rates of suicide and suicide attempts. 2. Increased access to care for individuals experiencing behavioral health crises. 	<ul style="list-style-type: none"> • By December 2025, the Fredericksburg Fire Department (FFD) will establish a trained Peer Support Team supporting members of the FFD and their families with behavioral health and other support and resources for the foreseeable future. • By December 2026, NAMI (National Association on Mental Illness) Rappahannock will establish at least 1 youth peer-led support group. • By June 2026, the PD16 Suicide Prevention Coalition will create a community toolkit with national and local resources. • By March 2027, the Rappahannock Area Community Services Board (RACSB) will open its Crisis Receiving Center. • By June 2028, Crisis Response Protocols for Caroline County Public Schools staff will be created and implemented. 	<ol style="list-style-type: none"> 1. Decrease in suicide death rates per 100,000 <i>2025 CHA Data (p. 44):</i> <ul style="list-style-type: none"> • <i>Caroline: 21.9</i> • <i>Fredericksburg: 17.4</i> • <i>King George: 32.3</i> • <i>Spotsylvania: 15.0</i> • <i>Stafford: 11.0</i> <i>(Source: Virginia Department of Health)</i> 2. Decrease in self-harm hospitalization rate per 100,000 <i>2025 CHA Data (p. 24):</i> <ul style="list-style-type: none"> • <i>PD16: 28.5</i> <i>(Source: Virginia Department of Health)</i>

CHIP Workgroup Strategy Ranking

Appendix B – Youth Mental Health Impact/Effort Matrix Results

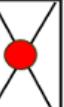


Overall CHIP Workgroup Scorecards

Legend for Scorecards

This legend serves as a key to help interpret and understand the scorecards for each health priority's strategies.

	Completed
	In Progress
	No Update/No Progress

Healthcare Access and Quality Scorecard 					
Goal 1: To improve access to preventive health services, including primary care, telehealth, health screenings, vaccinations, health education, and dental services in Charles City County.		Q3, 2024 Status	Q4, 2024 Status	Q1, 2025 Status	Q2, 2025 Status
Objective 1.1	Strategy 1.1.1: By March 31, 2025, Charles City County Fire/EMS will determine if they are able to establish a paramedicine program to improve access to preventive services and address the needs of rural residents more efficiently.				
	Strategy 1.1.2: By March 31, 2025, the Charles City Health Department will be "relaunched" to the community with an open-house, list of services, and updated facility features.				
Objective 1.2	Strategy 1.2.1: By December 31, 2025, Central Virginia Health Services (CVHS) will conduct an assessment of available school-based dental programs/models to determine the feasibility of implementation within the Charles City Public Schools.				
Goal 2: To build trust among Charles City County community members by sharing clear, easily accessible information widely through culturally sensitive education, engagement, and outreach.		Q3, 2024 Status	Q4, 2024 Status	Q1, 2025 Status	Q2, 2025 Status
Objective 2.1	Strategy 2.1.1: By June 30, 2028, Charles City County Department of Social Services will host two Community Resource Fairs to offer a variety of preventive services, increase awareness of services available, and coordinate mobile health units at least every other year in Charles City County.				
	Strategy 2.1.2: By June 30, 2025, the Prevention Multidisciplinary Team (MDT) will develop an online directory, as well as a paper copy for the community and partner organizations to use for health-related referrals.				
Goal 3: To enhance cross organization care coordination efforts by developing and strengthening partnerships between healthcare and community organizations to address social determinants of health and improve health outcomes.		Q3, 2024 Status	Q4, 2024 Status	Q1, 2025 Status	Q2, 2025 Status
Objective 3.1	Strategy 3.1.1: By June 30, 2025, Charles City County will re-establish a coalition focused on top health issues to improve health across the continuum in Charles City County.				
	Strategy 3.1.2: By September 30, 2024, Chickahominy Health District and CVHS will meet to explore how the Community Health Workers could partner to improve care coordination and address social determinants of health.				
Objective 3.2	Strategy 3.2.1: By December 31, 2024, Chickahominy Health District will meet with local and regional animal shelters to discuss promoting pet fostering programs/outreach to enhance the social wellness for older adults. THIS STRATEGY HAS BEEN REMOVED AND BEING PLACED INTO THE NEW KENT CHIP.				

CHIP Updated Timeline

Mar/Apr 2026

- Workgroups develop issue statements and goals
- Root cause analysis for each issue statement
- Each workgroup determines existing initiatives

May/June 2026

- Workgroups determine goals, objectives, strategies
- Full Draft CHIP report
- Steering Committee revisits Coalition charter & membership



Health Communication CHIP Workgroup

Dr. Diane Anderson, Coalition Co-Chair

Prince William Health District

Greater Prince William is more diverse than Virginia overall

2023 Racial and Ethnic Profile



Data Source: U.S. Census Bureau. American Community Survey (ACS). 2019-2023

According to the 2020 U.S. Census, Prince William County ranked the most diverse county in Virginia and the 10th most diverse county in the United States.



Virginia Department of Education Student Home Language on Record, Fall 2024, Number of Reported Students

	Greater Prince William	Manassas City	Manassas Park City	Prince William County
Spanish	31,948	4,774	2,094	25,080
Urdu	1,967	58	34	1,875
Dari	1,766	5	21	1,740
Arabic	1,608	101	38	1,469
Farsi	1,015	69	24	922

Data Source: Virginia Department of Education. (2024)

CHA Survey Responses (n=1,990)

➤ Of the total response surveys, 1,698 Prince William County, Manassas City, and Manassas Park residents responded to the survey in English, Spanish, or Dari.



Race/Ethnicity

We heard from a diverse range of racial and ethnic groups



Asian*
5.6%

*The survey had 11 race/ethnicity categories, including multi-race. Due to low responses in some categories, "Asian" includes those reporting South Asian and East/Southeast Asian.

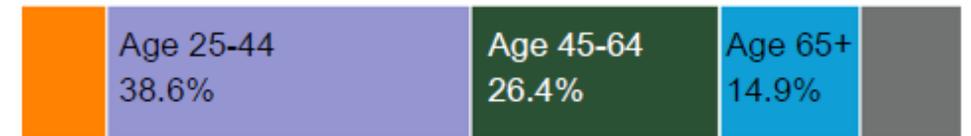
**Additional groups include those with fewer than 5% of responses, with the groups listed below. For a more detailed look at the data, please see Appendix C of the CHA.

- African
- American Indian/Alaska Native
- Another race/ethnicity not listed
- Middle Eastern/North African
- Multi Racial
- Native Hawaiian/Pacific Islander



Age

We heard from people ages 15 to 75+



Age 15-24
9.2%

Not Shared
10.8%

Languages spoken by people who took the survey

Do you see yours?

English

español

Cebuano
Bisayâ or Binisaya

دري
Dari

नेपाली
Nepali

Türkçe
Turkish

Tiếng Việt
Vietnamese

हिन्दी
Hindi

پښتو
Pashto

Twi

አማርኛ
Amharic

한국인
Korean

ਪੰਜਾਬੀ
Punjabi

Chinese
中国人

বাংলা
Bengali (Bangla)

اردو
Urdu

Catalan
Català

ትግርኛ
Tigrinya

Creole

فارسی
Farsi / Persian

සිංහල
Sinhala

Монгол
Mongolian

Française
French

Русский
Russian

Português
Portuguese

Kurdî
Kurdish

Sharing CHA Results Back: Guided Discussion



Community Health Worker, Inoussa Zabsonre, MPH



Accessibility matters



Co-creation builds and deepens trust



CHWs amplify connection and impact

Jeffress Trust Grant: Partners

- **Institute for Public Health Innovation (IPHI)** – Project management, coordination, CBPR leadership, training, evaluation.
- **Prince William Health District (PWHD)** – Epidemiology, data analysis, visualization, government linkage.
- **Edu-Futuro** – Bilingual outreach, participant incentives, culturally competent engagement.
- **NAMI Prince William (NAMI PW)** – Mental health outreach, Spanish-language education, stigma reduction.
- **Woodbridge Workers Committee (WWC)** – Trusted access to immigrant communities, site-based facilitation.
- **Office of Community Safety / Community Services** – Government bridge, service connections.
- **Literacy Volunteers of America**—Prince William – Trusted access to and engagement with English language learners

Jeffress Trust Grant = CHIP Strategy

Leverage Trusted Networks

- Partner with trusted community influencers, groups, and communication platforms like WhatsApp, social media, and broadcast channels (e.g., local radio/TV).

Community or Participatory Mapping

- Engage community members to collect and generate information using quantitative and qualitative mixed methods.
- Residents help identify where language barriers exist and co-create solutions.

Two-Way Communication

- Explore approaches for residents to share updates in real-time.
- Residents receive urgent updates and share evolving needs with the Coalition.

Another CHIP Strategy: Peer Navigators

- Literacy Volunteers of America—Prince William (LVA-PW) proposed idea:
 - Developing a modified Peer Support Navigator initiative
 - LVA-PW Monday Health Literacy Conversation class includes a consistent group of adult learners who are especially community-oriented and compassionate.
 - After recent lessons on CPR training and blood donation, several participants immediately stepped forward to take action.
- How might we intentionally support learners in becoming trusted messengers within their families, workplaces, and neighborhoods?
- Strong potential for cultivating ambassadors who can share accurate health information and connect others to resources.
- Once-a-month “backyard health conversation” — or perhaps a gathering at a local church or community center — hosted in an informal setting over coffee, with about 8–10 participants.
- Goal to create a relaxed, trusted space where neighbors can talk openly about health topics and learn about available local resources.



Behavioral Health CHIP Workgroup

Heather Martinsen and Wendy Hunt

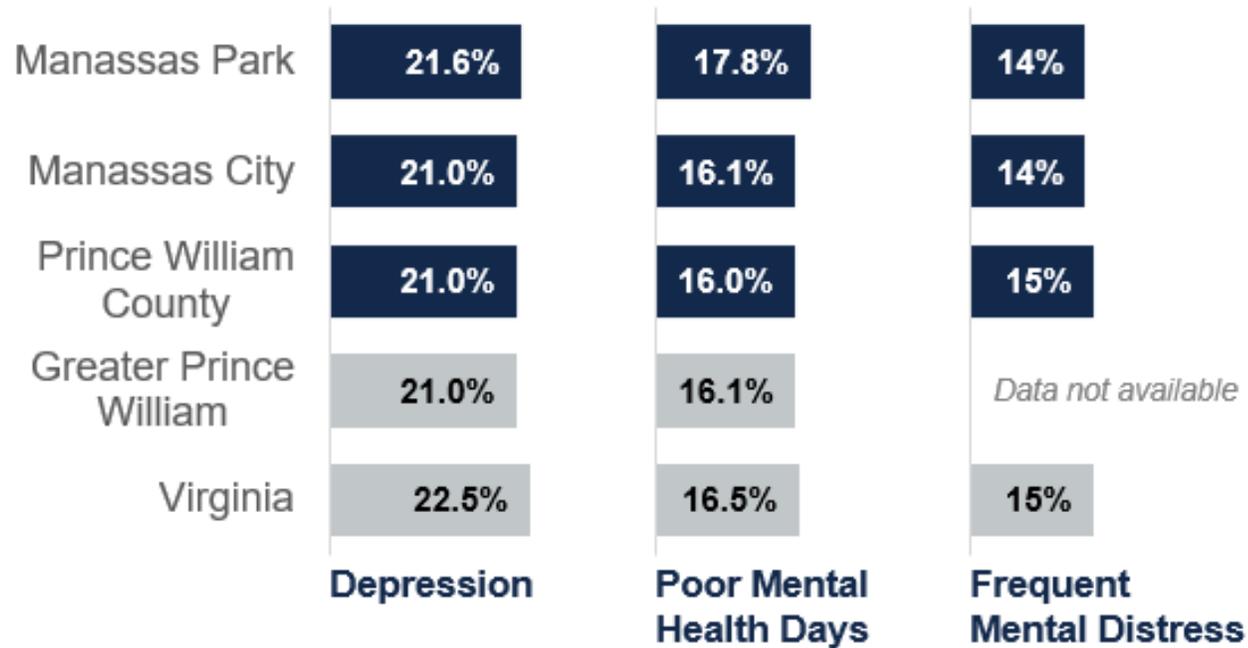
Community Services, Wellness and Prevention

Prevention Coalition of Greater Prince William

Mental and Behavioral Health

Just over one-fifth of the area's population (21%) reports depression, with 16% reporting poor mental health days.

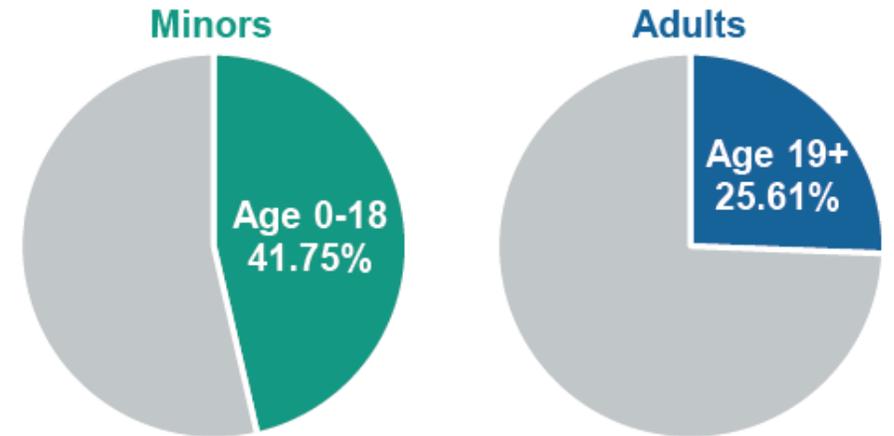
2019-2023 Mental Health, Age 18+



Data Source: [Virginia's Plan for Well-Being](#). Virginia Community Health Improvement Data Portal.

Suicidal ideation was the cause of a startling rate of emergency department visits for minors (41.75%) compared to adults (25.61%)

2024 SNVMC Emergency Department Behavioral Health Visits



SNVMC Emergency Department Behavioral Health Visits, Top 4 Diagnosis, 2024

	Behavioral Health (Patient Frequency)	Suicidal Ideation	Schizophrenia, unspecified	Brief Psychotic Disorder	Unspecified Psychosis
Youth, 0-18	400	41.75%	0.25%	1.25%	1.50%
Adults, 19+	1,691	25.61%	6.62%	4.55%	3.67%

Data Source: Sentara Health Behavioral Health Emergency Department Visits Summary. (2024)

What are the **BIGGEST** **HEALTH** **CONCERNS** in the community where you live?

Health Concern	Count
Mental health (depression, anxiety)	835
Chronic conditions (cancer, diabetes)	727
Dental problems	522
Diseases that can spread (flu, tuberculosis)	477
Violence and crime in the community	433
Aging-related concerns (dementia, falls)	431
Health differences by race/ethnicity or income	373
Discrimination or racism	347
Substance use disorders (opioids, alcohol)	325
Food safety (at restaurants, food trucks)	271
Health of pregnant women and babies	263
Safe drinking water	207
Preventable injuries (car crashes, poisoning)	197
Mold, radon, or lead exposure in the home	107
Sexually transmitted infections (chlamydia)	81
Weather-related concerns (heat stroke)	78

**Which
BEHAVIORS
need to be
addressed in the
community
where you live?**

Behavior Type	Count
Eating unhealthy foods	547
Lack of exercise	486
Driving while drunk or high	452
Bullying (physical, verbal, online)	404
Isolation or loneliness	367
Alcohol misuse (excessive drinking)	365
Drug use / prescription drug misuse	354
Domestic violence	352
Technology addiction	340
Cannabis (marijuana) misuse	311
Drinking sugary beverages	286
Vaping / e-cigarette use	270
Not being up-to-date on vaccines	185
Elder abuse or neglect	167
Not safely storing guns	162
Tobacco use (cigarettes, cigars, snuff)	150
Gaming and online gambling	110
Unsafe sex	81

Existing Work to Inform Behavioral Health CHIP Workgroup

Heather Martinsen and Wendy Hunt

PRINCE WILLIAM
———— Community Services



Prevention Coalition
OF GREATER PRINCE WILLIAM



BREAK until 11am

Break-out Groups (until 11:20am): Opportunities to address [CHIP Workgroup Topic]?

1. Who is currently doing this work?

- Brief elevator pitches from community partners
- Strengths/assets (Office of Community Safety data)
- Existing/upcoming efforts

2. What gaps should be addressed?

- What is needed?

3. Who needs to be involved/invited for this [CHIP Workgroup Topic]?

4. Volunteers to co-lead this CHIP Workgroup?

Work Group Facilitator Report-Out

- Health Communication
- Behavioral Health



Maternal & Child Health CHIP Workgroup

Dr. Diane Anderson, Coalition Co-Chair

Prince William Health District



Maternal Health

More mothers in Greater Prince William had late or no prenatal care compared to Virginia.

12.2% Greater Prince William

5.1% Virginia

35.1% of live births in 2022 were to Medicaid eligible mothers.

35.1% Greater Prince William

33.8% Virginia



Data Source: Virginia Department of Health. [Maternal and Child Health Indicators](#). (2022)

MCH Vital Records Data Analysis

Excerpt from 1/13/2026 presentation

Dr. Diane Anderson and John Lincoln, Prince William Health District

bplace : Place Where Birth Occurred

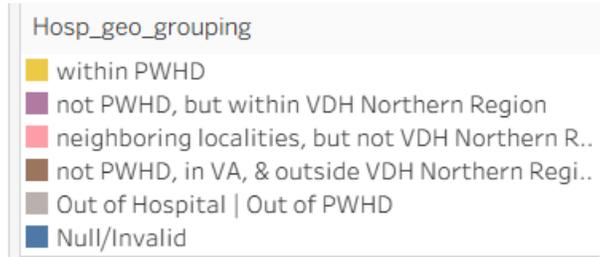
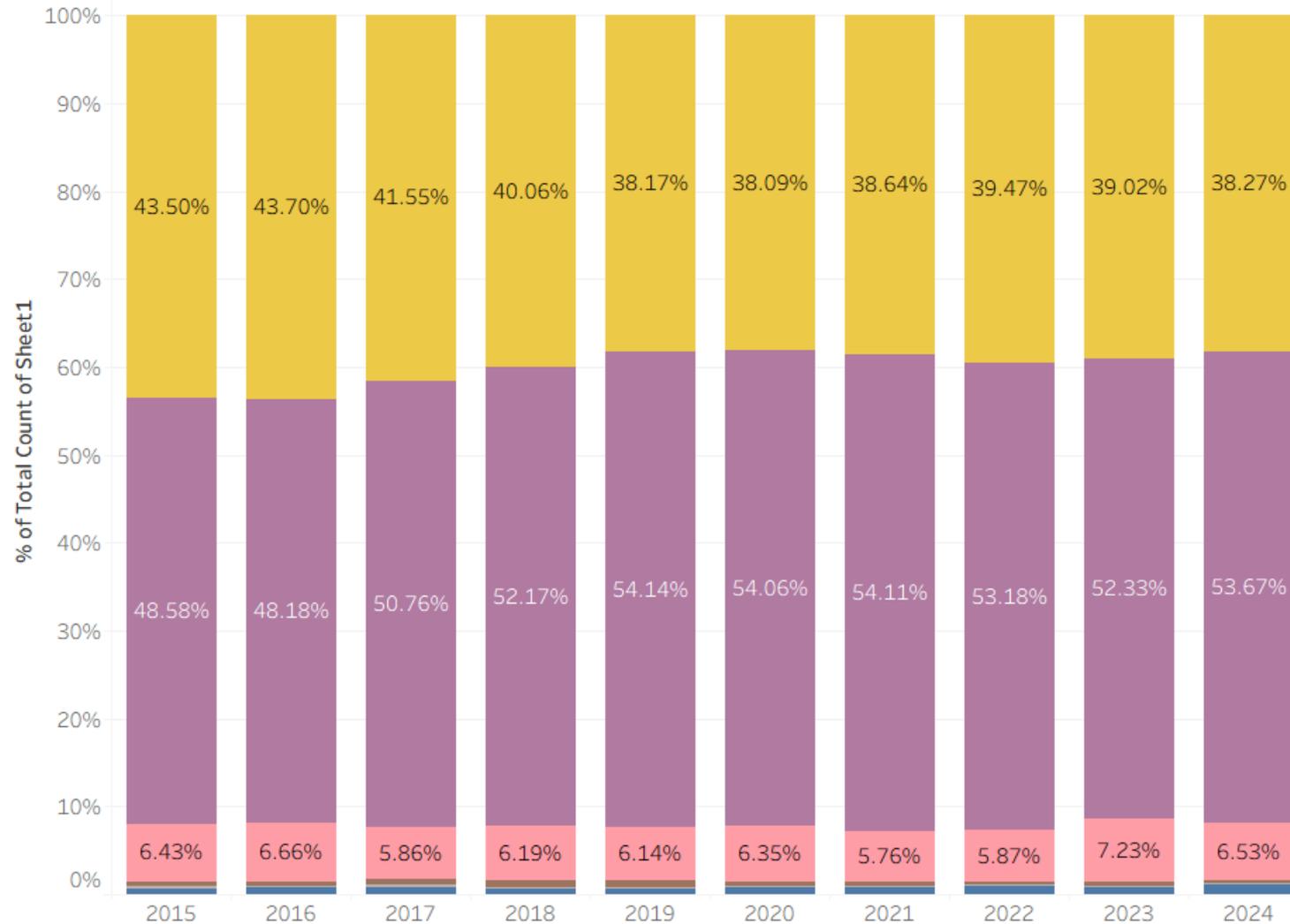
Geocode..	Bplace	Idob Yr									
		2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Manassas City	1 - Hosp	691	697	681	656	616	557	603	651	629	584
	2 - Birth Center	4	3	2			47	1	4	5	3
	3 - Home [intended]	3	3	3	6	3	5	5	6	3	2
	4 - Home [not intend..]	1	1		1		1				
	9 - Unknown				3						
	Total	699	704	686	666	619	610	609	661	637	589
Manassas Park City	1 - Hosp	263	274	280	263	303	234	274	238	263	246
	2 - Birth Center	1		1			24		2	1	2
	3 - Home [intended]	1			2		1				2
	4 - Home [not intend..]	1			1			1			
	5 - Home [unknown i..]							1			
	9 - Unknown						1				
Total	266	274	281	266	303	260	276	240	264	250	
Prince William County	1 - Hosp	6,444	6,393	6,235	6,104	6,018	5,715	5,942	6,092	5,764	5,816
	2 - Birth Center	25	14	21	14	10	163	15	31	43	25
	3 - Home [intended]	37	41	54	29	40	32	45	51	47	55
	4 - Home [not intend..]	8	11	3	10	7	9	8	7	12	11
	5 - Home [unknown i..]				1	2					2
	6 - Clinic/Dr Office	1					1				
	7 - Other	1				2	2	1	4	1	2
	9 - Unknown			1	22			1	1		
	Total	6,516	6,459	6,314	6,180	6,079	5,922	6,012	6,186	5,867	5,911
Grand Total	7,481	7,437	7,281	7,112	7,001	6,792	6,897	7,087	6,768	6,750	

Count of Sheet1 broken down by Idob Yr vs. Geocoded.County and Bplace. The view is filtered on Geocoded.County and Idob Yr. The Geocoded.County filter keeps Manassas City, Manassas Park City and Prince William County. The Idob Yr filter keeps 10 of 10 members.

Where are they giving birth?

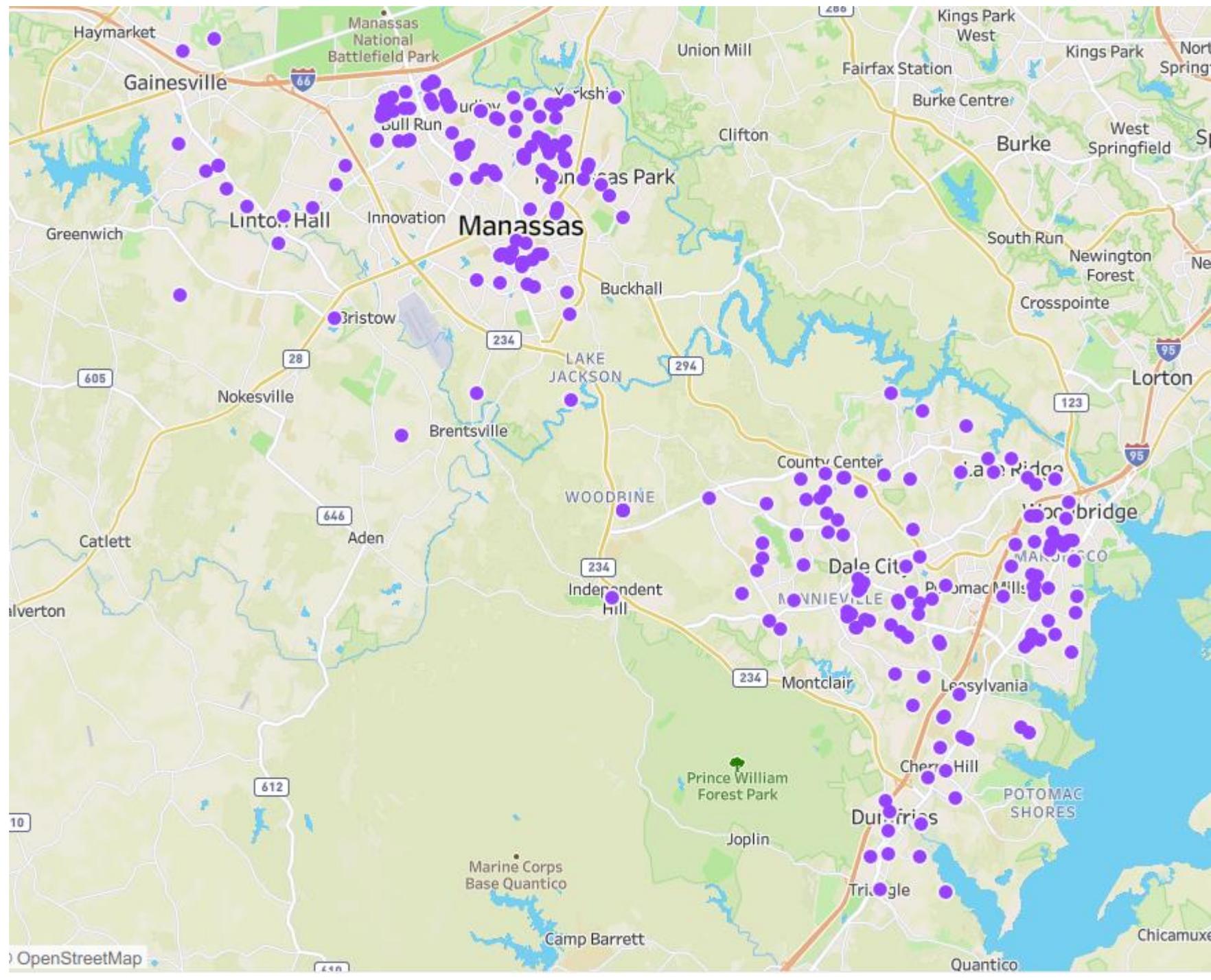
1. Type of location/setting (table)

- a. In our district, outside our district [in VDH northern region], outside our district and outside our region [in neighboring jurisdictions], outside of our district/region/neighbors, out of hospital



Gestational Diabetes with *Medicaid* as the Payer Type

for records with
the birth year
of
2024



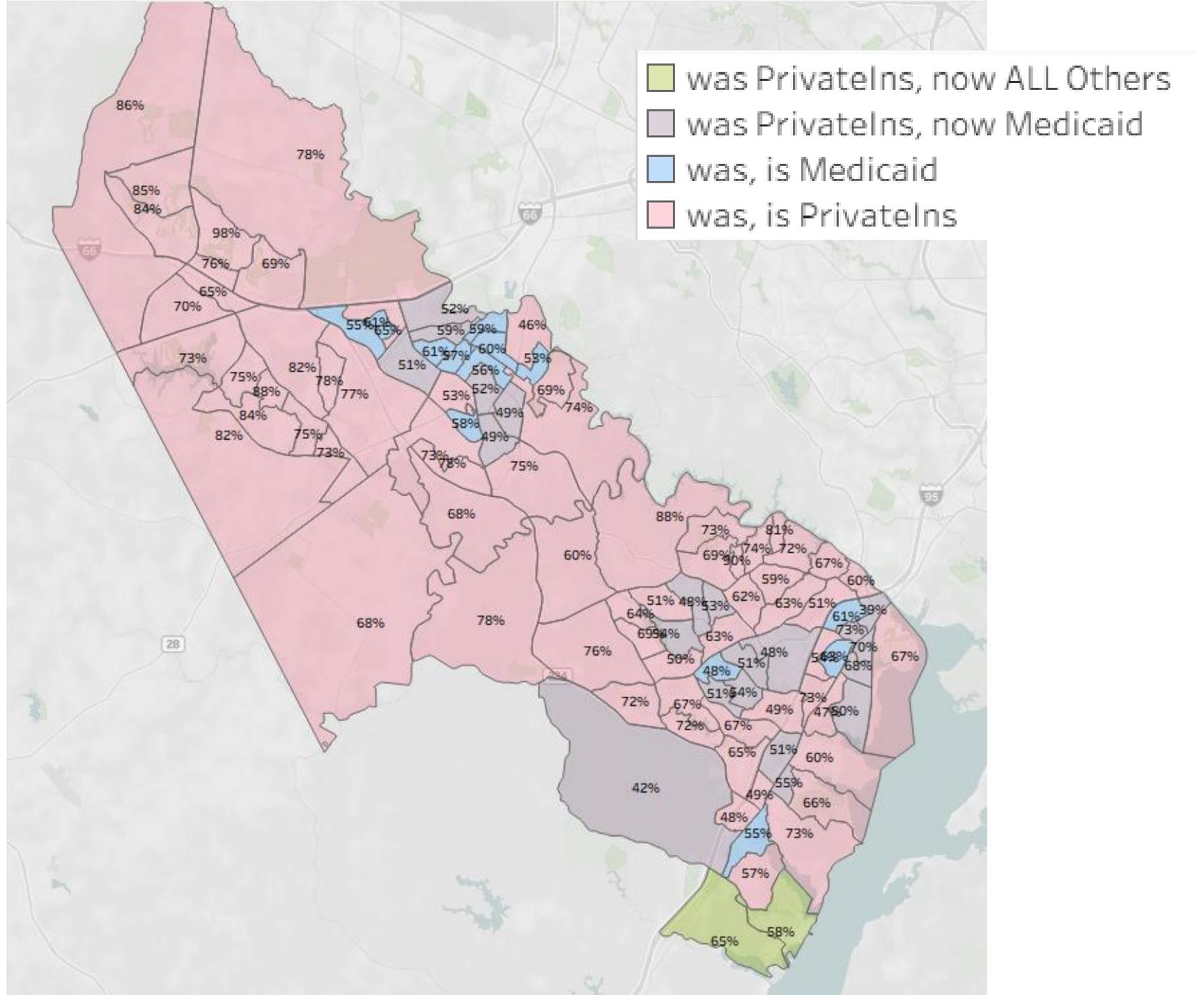
Largest Payer Type by Census Tract

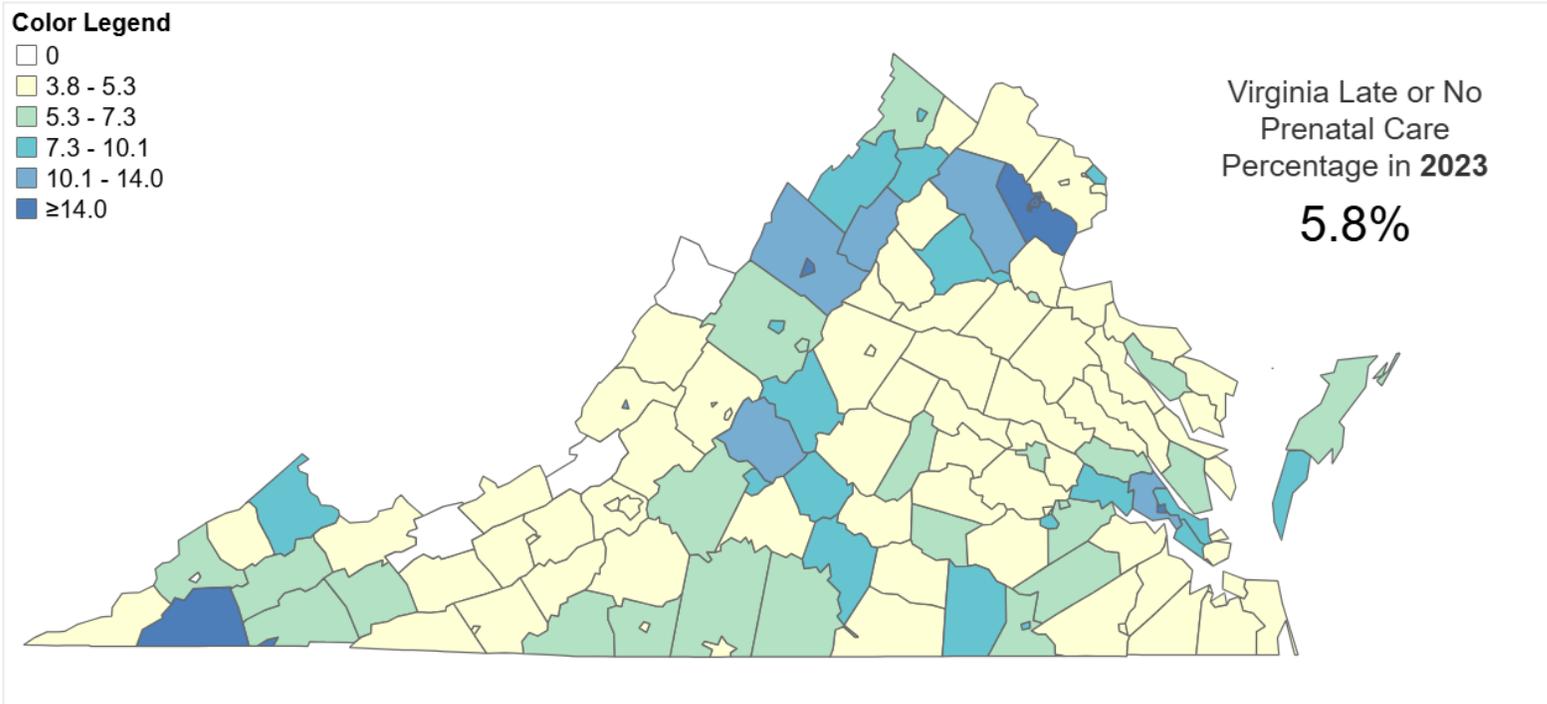
Census Tract

Comparing Payer Types between

2015 AND 2024

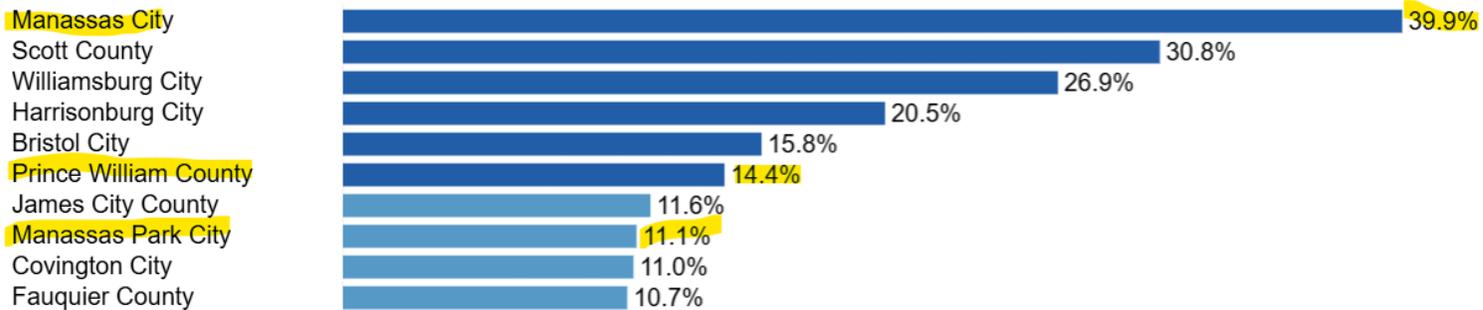
Showing 2024 Percentage of Payer Type by Census Tract for the Largest Payer Type for each of the specific Census Tracts

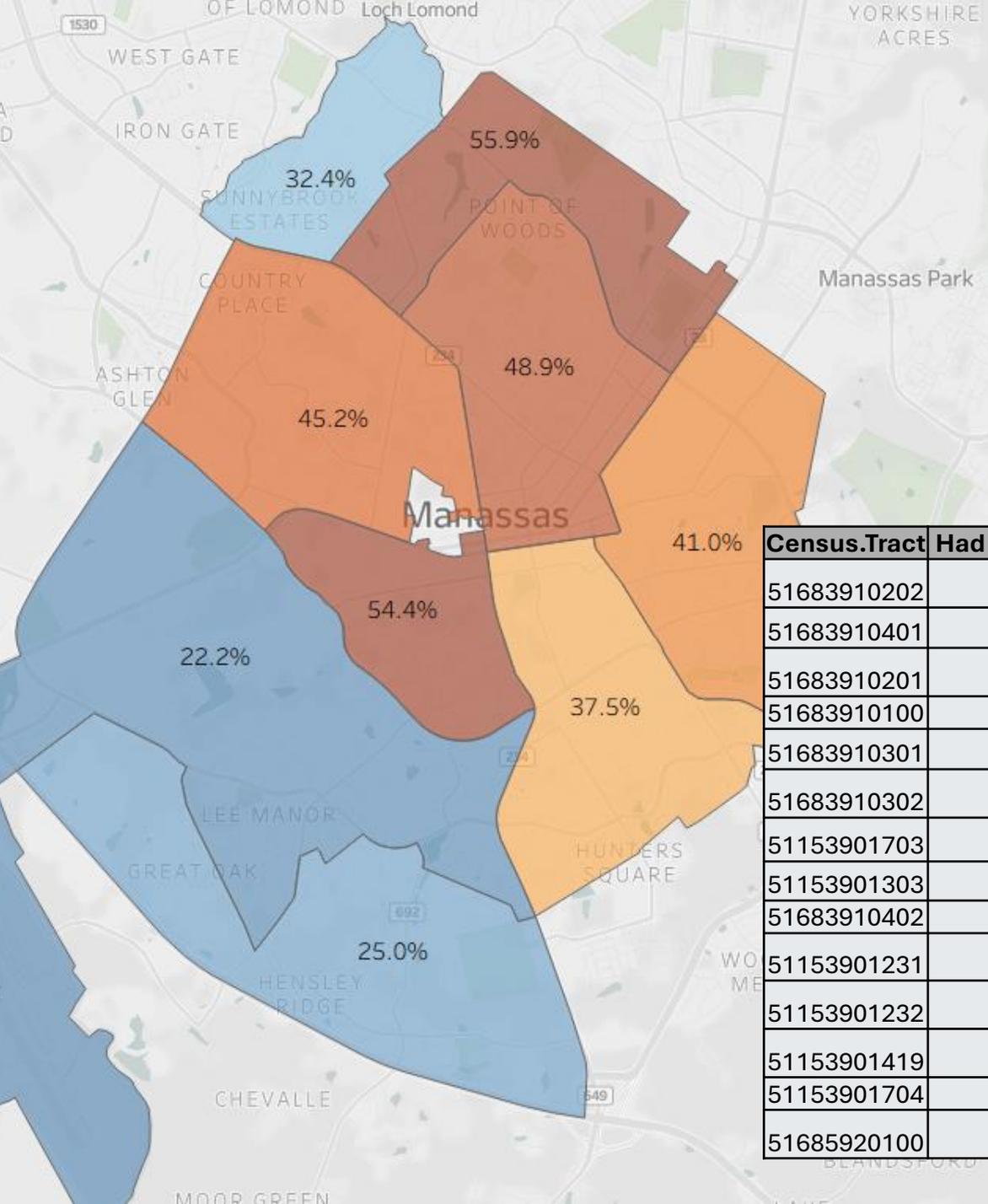




Late or No Prenatal Care by Locality in 2023

(Scroll to see other localities)





2023 birth records in Manassas City, With Hispanic as the Ethnicity/Race

Showing the Percent of No Prenatal Care by Census Tract

Census.Tract	Had Prenatal	No Prenatal	Grand Total	%	tract_description
51683910202	41	52	93	55.9%	Summer Lake, Stonewall Park, Liberia Mansion
51683910401	41	49	90	54.4%	Georgetown South; American Legion
51683910201	24	23	47	48.9%	Point of Woods; Manassas Shopping Center
51683910100	17	14	31	45.2%	Robnel, Country Place
51683910301	23	16	39	41.0%	Signal Hill Road; Euclid Ave
51683910302	30	18	48	37.5%	Manassas Museum; Hunter's Square [North]
51153901703	23	11	34	32.4%	Sunnybrook Estates; Westgate; Heritage Crossing
51153901303	3	1	4	25.0%	Great Oak; Country Roads; Bloom Hill; Hensley Ridge
51683910402	21	6	27	22.2%	Airport; Ratcliffe Trail; Lee Manor
51153901231	4		4	0.0%	Montyville Estates; Mockingbird Ridge; Occuquan Shores
51153901232	2		2	0.0%	Buckhall; Woodlawn Meadows; Raintree; Blandsford
51153901419	1		1	0.0%	Jackson Ridge; Paradise Point; Orchard Glen
51153901704	1		1	0.0%	Westgate; Iron Gate; Fairmont
51685920100	1		1	0.0%	Costello Park; Denver Drive; Cabbel Drive



Considerations for a 4th CHIP Workgroup

Dr. Diane Anderson, Coalition Co-Chair

Prince William Health District

Access to Care

Vote with 1 sticky note for the top priority.



Write down the sub-priority



CHA Survey Responses (n=1,990)

“What are the biggest **HEALTH CONCERNS** in the community where you live?”

“Which **BEHAVIORS** need to be addressed in the community where you live?”

“What would **most IMPROVE health** in the community where you live?”

Overall top 3 most selected



Mental health



Chronic conditions



Dental problems



Eating unhealthy foods



Lack of exercise



Driving while drunk or high



Access to healthcare services



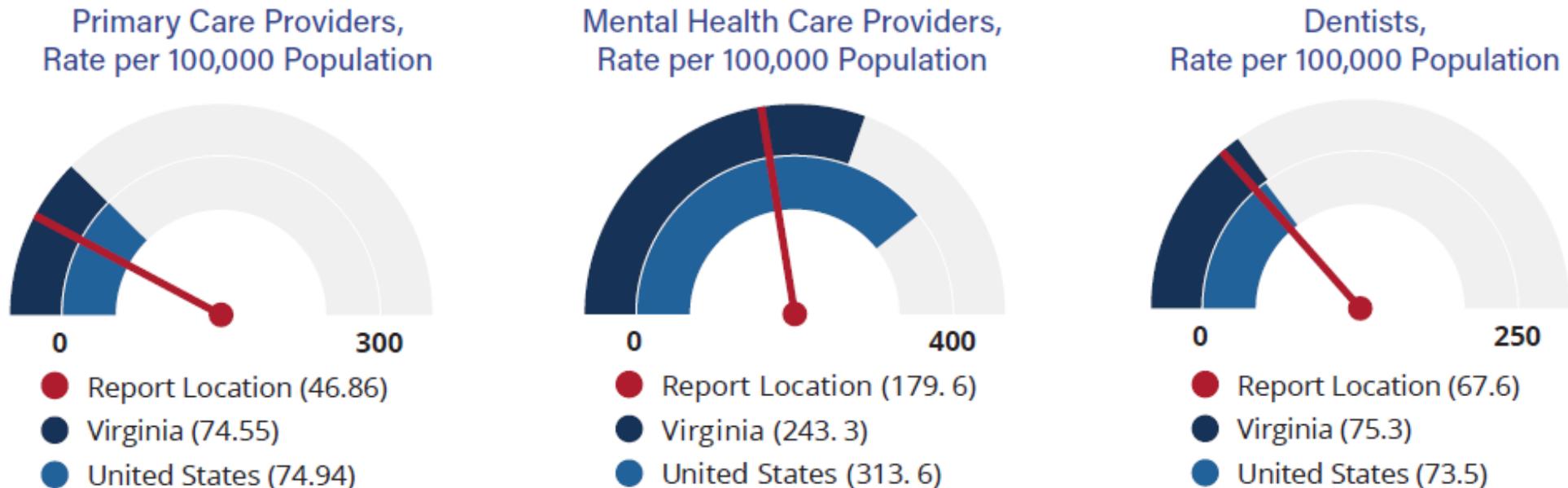
Affordable housing



Access to dental care

Greater Prince William has fewer primary care providers, mental health providers, and dentists per capita than Virginia

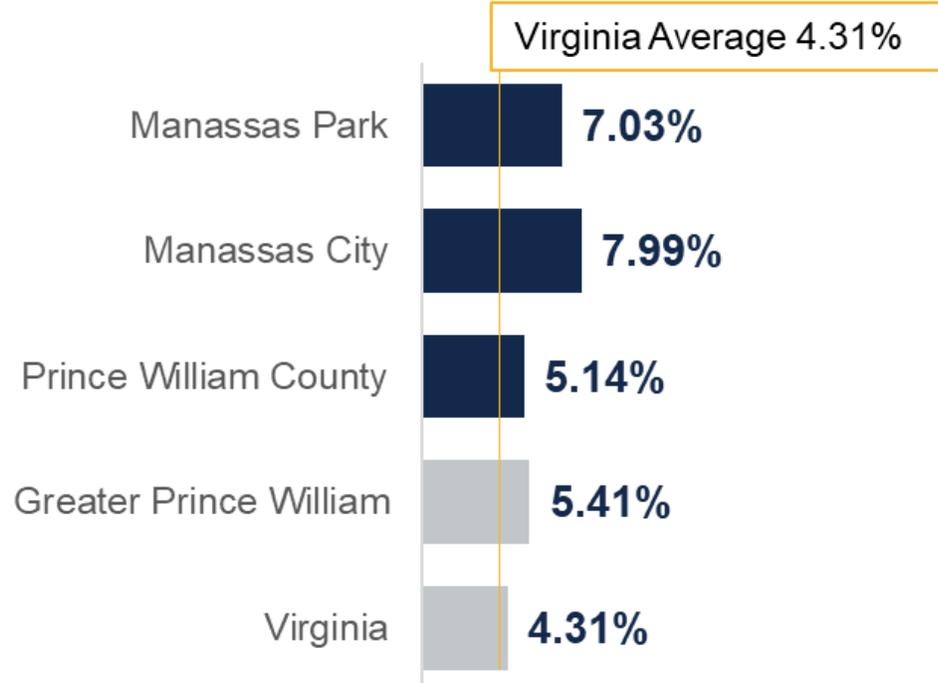
Access to Healthcare Providers, 2022 and 2023



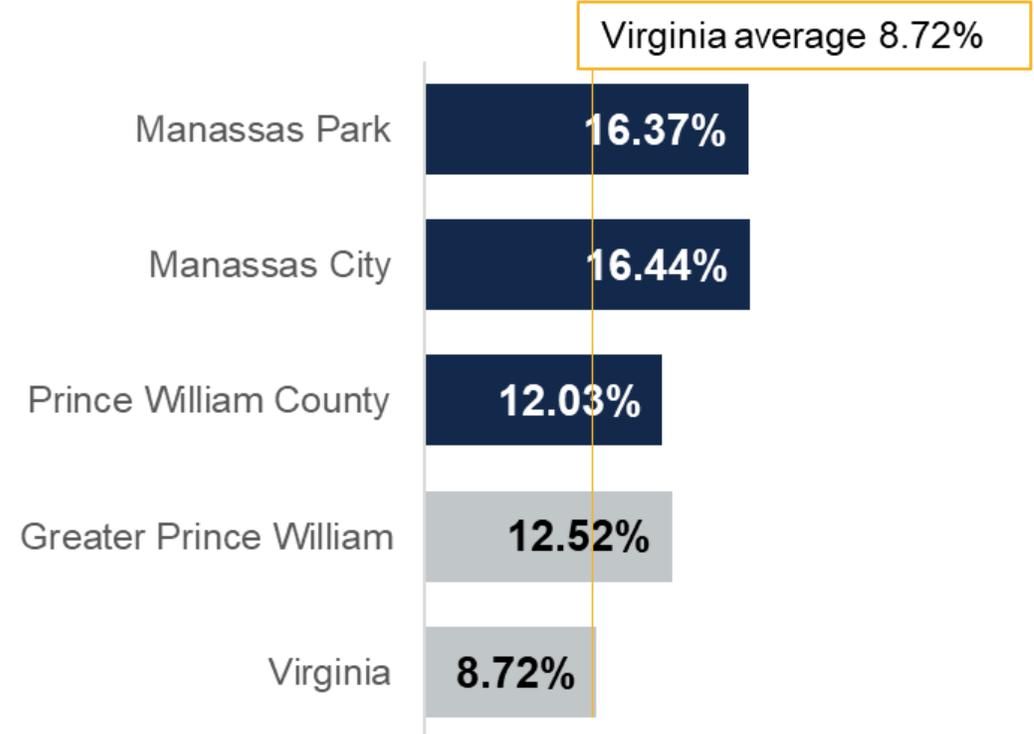
Data Source: [Virginia's Plan for Well-Being](#). Virginia Community Health Improvement Data Portal.

Greater Prince William has more uninsured children and adults compared to Virginia

Uninsured Children (ages 0-18) in Greater Prince William



Uninsured adults (ages 19+) in Greater Prince William



Disease Prevention

Vote with 1 sticky note for the top priority.



Write down the sub-priority



What are the **BIGGEST HEALTH CONCERNS** in the community where you live?

Rank	Overall Responses (n=1990)	Prince William County (n=1030)	City of Manassas (n=499)	City of Manassas Park (n=169)
1	Mental health (depression, anxiety)	Mental health (depression, anxiety)	Chronic conditions (cancer, diabetes)	Chronic conditions (cancer, diabetes)
2	Chronic conditions (cancer, diabetes)	Chronic conditions (cancer, diabetes)	Mental health (depression, anxiety)	Dental problems
3	Dental problems	Violence and crime in the community	Dental problems	Mental health (depression, anxiety)

**Which
BEHAVIORS
need to be
addressed in the
community
where you live?**

Behavior Type	Count
Eating unhealthy foods	547
Lack of exercise	486
Driving while drunk or high	452
Bullying (physical, verbal, online)	404
Isolation or loneliness	367
Alcohol misuse (excessive drinking)	365
Drug use / prescription drug misuse	354
Domestic violence	352
Technology addiction	340
Cannabis (marijuana) misuse	311
Drinking sugary beverages	286
Vaping / e-cigarette use	270
Not being up-to-date on vaccines	185
Elder abuse or neglect	167
Not safely storing guns	162
Tobacco use (cigarettes, cigars, snuff)	150
Gaming and online gambling	110
Unsafe sex	81

Health Status: Mortality & Chronic Disease

- cancer, heart disease, COVID-19, stroke, and chronic lower respiratory disease

Leading Causes of Death Overall, by Race/Ethnicity, 2021-2023			
White, Non-Hispanic	Black, Non-Hispanic	Asian, Non-Hispanic	Hispanic/Latino
Cancer	Cancer	Cancer	Cancer
Heart Disease	Heart Disease	Heart Disease	Heart Disease
COVID-19	Stroke	Stroke	COVID-19
Stroke	COVID-19	COVID-19	Unintentional Drug Overdose
Chronic Lower Respiratory Disease	Unintentional Drug Overdose	Diabetes	Stroke
Diabetes	Diabetes	Kidney Disease	Chronic Liver Disease
Unintentional Drug Overdose	Kidney Disease	Flu and Pneumonia	Motor Vehicle Accidents
Alzheimer's Disease	Motor Vehicle Accidents	Chronic Lower Respiratory Disease	Diabetes
Parkinson's Disease	Homicide	Suicide	Suicide
Kidney Disease	Chronic Lower Respiratory Diseases	Transport Accidents	Kidney Disease

BY AGE: What are the **BIGGEST HEALTH CONCERNS** in the community where you live?

Rank	Overall Responses (n=1990)	Age 15-24 (n=183)	Age 25-44 (n=769)	Age 45-64 (n=526)	Age 65-75+ (n=297)
1	Mental health (depression, anxiety)	Mental health (depression, anxiety)	Mental health (depression, anxiety)	Mental health (depression, anxiety)	Aging-related concerns (dementia, falls)
2	Chronic conditions (cancer, diabetes)	Diseases that can spread (flu, tuberculosis)	Chronic conditions (cancer, diabetes)	Chronic conditions (cancer, diabetes)	Mental health (depression, anxiety)
3	Dental problems	Chronic conditions (cancer, diabetes)	Dental problems	Violence and crime in the community	Chronic conditions (cancer, diabetes)



Sexually transmitted infections (STIs)

Area rates of gonorrhea increased from 2019 to 2023 though Virginia remained steady.

Syphilis incidence (per 100,000)

2019		2023
11.2	Greater Prince William	15.7
15.1	Virginia	20.7

Gonorrhea incidence (per 100,000)

2019		2023
85.4	Greater Prince William	132.7
159.8	Virginia	159.4

New HIV infections from 2019 to 2023 increased among women and youth.

 **29%** of new HIV infections from 2019 to 2023
female

 **53%** of new HIV infections from 2019 to 2023 **15-34** years old

Social Determinants of Health

Vote with 1 sticky note for the top priority.



Write down the sub-priority



BY AGE: What would MOST IMPROVE HEALTH in the community where you live?

Rank	Overall Responses (n=1990)	Age 15-24 (n=183)	Age 25-44 (n=769)	Age 45-64 (n=526)	Age 65-75+ (n=297)
1	Access to healthcare services	Access to healthcare services	Access to healthcare services	Access to healthcare services	Affordable housing
2	Affordable housing	Affordable housing	Affordable housing	Affordable housing	Mental health services
3	Access to dental care	Affordable healthy food	Access to dental care	Affordable healthy food	Access to healthcare services

What would MOST IMPROVE HEALTH in the community where you live?

Health Concern	Count
Access to healthcare services	762
Affordable housing	641
Access to dental care	535
Affordable healthy food	498
Mental health services	425
Affordable childcare	396
Programs for youth outside of school	266
Community health education programs	248
Alcohol/drug treatment programs	247
Community parks and gardens	247
Job training and business opportunities	247
Support for basic needs (food, clothing)	220
Transportation options (bus, train)	178
Support for people living with disabilities	177
Sidewalks, bike lanes, and crosswalks	175
Safety services (police, fire, rescue)	156
Programs for parents and caregivers	137
Language interpreter services	136
Access to online services (internet)	128

Community Conversations (n=151)



Health & Social Services

Healthcare Access



Mental Health Support

“People without health insurance do not go to the doctors for regular checkups or when they are sick. People are afraid to lose their job if they ask permission to go to the doctor...”



Basic Needs & Economic Stability

Employment, Sustainable Wages, Job Stability

“Prioritizing basic needs makes it difficult to focus on aspects of health beyond physical well-being...”



Education & Awareness

Multilingual Communication and in Easy to Find Locations

“We live in times right now where we have a lot of information, but we don’t know how to use it.”

Need for translated materials and multiple ways to conduct outreach

“We live in times right now where we have a lot of information, but we don’t know how to use it.”

Need bilingual staff, cultural competence

“We have Spanish translators. But we need Arabic, Urdu, Persian.”

Community Conversations (n=151)



Community
Connectedness &
Engagement

Community Partnerships

“PWC Public Libraries offer more than just reading – they foster a welcoming atmosphere where kindness + safety are always felt.”



Safety & Environmental
Concerns

Neighborhood Infrastructure &
Complete Streets



“I’d wait for a bus for 3 hours and in rain it’s bad.”



Power & Social Policy
Context

Opportunities for All to Participate
and Thrive

“A healthy place would be friendly & free from hate, with places / activities for all.”



Immigrants, seniors, people with disabilities face service barriers

“For those with a developmental disability, or multiple disabilities, can be hard to access transportation or mental health services.”

Push for fair services for all groups

“Many of our Veterans are suffering. People do not understand how disconnected they are from technology and the accommodations that they need.”

Local Data Sharing / Access

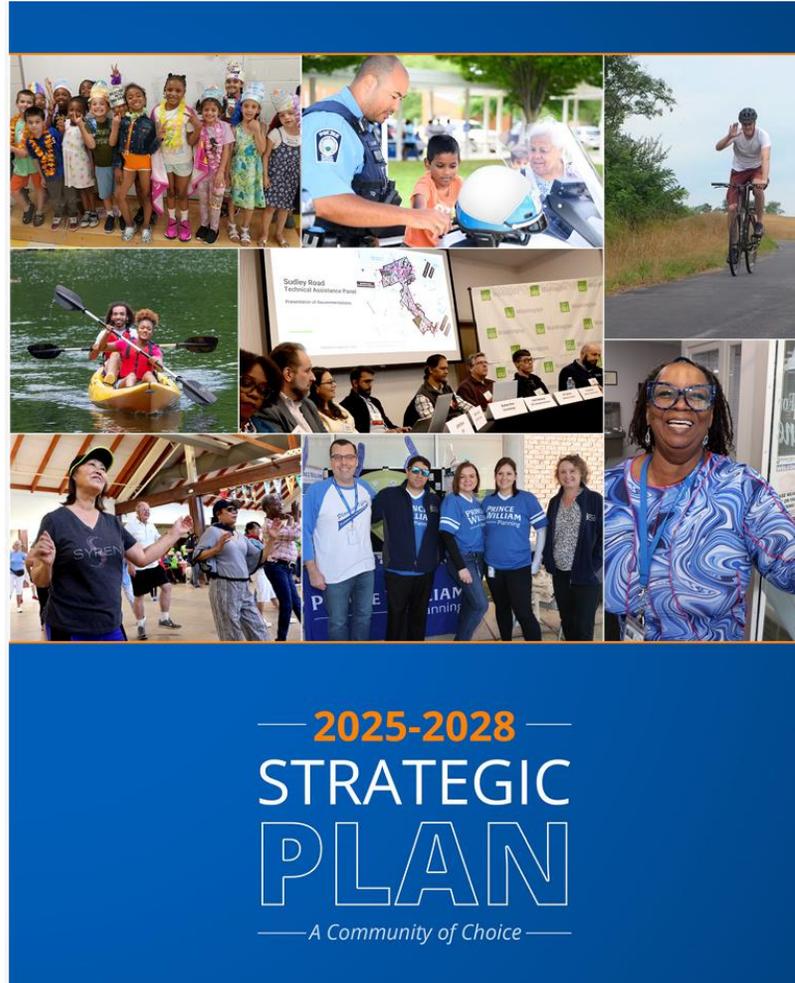
Vote with 1 sticky note for the top priority.



Write down the sub-priority



Prince William County Strategic Plan



Key Performance Indicators

Goal: Education

Goal: Environment

Goal: Government

Goal: Mobility

Goal: Quality of Life

Goal: Safe and Secure Community

Goal: Service Delivery

Goal: Smart Growth

Challenge for health-related and social service non-profits wishing to apply for Community Partner funding must link their applications to the PWC Strategic Plan Key Performance Indicators (KPI's).



The Competitive Community Partners Program is a grant opportunity for Non-Profit 501(c)3 Organizations that provide services or programs for the residents of Prince William County. Non-Profits interested in partnering with the County are encouraged to attend the training sessions and utilize the resources on this page to prepare for the annual application process.

FY2027 Competitive Community Partners Timeline

Event/Milestone	Date	Resources
Information Session Initial presentation about FY27 program basics, new initiatives, and timeline	February 5 at 3:00 PM	Video Presentation
Grant Application Process Opens New portal opens, accepting applications until April 24 at 5 PM for FY27 funding	February 25	Application Portal

Ensure we structure this Coalition CHIP to partner with existing GPW coalitions, committees, and action plans. Avoid duplication.

Prevention Coalition of Greater Prince William	PW Chamber of Commerce <ul style="list-style-type: none">• Health and Wellness Committee• Not-for-Profit Council	Evidence-Based Decision Making (EBDM) Group
Comprehensive Opioid Action Team (COAT)	Light of Hope Alliance, Don Bosco Center	Greater Prince William Trails Coalition
Greater Prince William Food Council	Prince William County Community Foundation	PW Office of Community Safety <ul style="list-style-type: none">• Community Mobilization Network
Kaiser, Sentara, UVA Health community benefit plans	INOVA Fair Oaks Action Committee	PWC Strategic Plan Goals/Metrics Workgroups

Coalition Vote to Determine Potential 4th Workgroup

Vote with 1 sticky note for the top priority.



Write down the sub-priority



Break-out Groups (until 12:15pm): Opportunities to address [CHIP Workgroup Topic]?

1. Who is currently doing this work?

- Brief elevator pitches from community partners
- Strengths/assets (Office of Community Safety data)
- Existing/upcoming efforts

2. What gaps should be addressed?

- What is needed?

3. Who needs to be involved/invited for this [CHIP Workgroup Topic]?

4. Volunteers to co-lead this CHIP Workgroup?

Work Group Facilitator Report-Out

- Maternal and Child Health
- 4th Workgroup Topic

Next Steps

- Coalition leadership will outline CHIP workgroup next steps and meeting notes
- Consider joining / leading a CHIP workgroup
- Share CHIP partnership opportunities

Coalition Member Updates & Networking



**BE HEALTHY
BE HAPPY**

Community Healthcare Coalition Greater Prince William

THE TOWN OF DUMFRIES &
COMMUNITY PARTNERS PRESENT



Community HEALTH FAIR



 Friday,
March 13, 2026

at the
Jeff Simpson Community Center
17757 Main Street
Dumfries, VA 22060

TIME: 9:00 AM - 3:00 PM



@officialtownofdumfries

The Town of Dumfries, in partnership with Evelyn Ancrum Support Systems Inc. (EAESSI) & the Inova Saville Cancer Screening & Prevention Center, invites you to a free Health Fair dedicated to empowering visitors with lifesaving knowledge & resources.

Stop by to access educational materials on breast, colon, cervical, & skin cancer, learn how to perform breast self-exams, & learn about the prevention and early detection of cancer. If eligible, free colon cancer screening kits will be available for uninsured patients.

Come take charge of your health—we hope to see you there!

Attendees under the age of 18 must be accompanied by a parent or guardian

THIS EVENT IS FREE
AND IS
OPEN TO THE
PUBLIC!



COUNCILMAN
RUSSELL YOUNG



For more information, contact us:
571-224-1140 or events@dumfriesva.gov

Get Free Screenings & Information



- Grip Strength Screening
- Blood Pressure/Heart Rate Screening
- A1C Testing
- Screening Education
- Colon Cancer Screening Kits
- Early Prevention Information
- BMI Screening

THANK YOU
TO OUR COMMUNITY PARTNERS!



Lowering the Barriers to Wellness

COMMUNITY RESOURCE FAIR

Saturday, March 28, 2026 | 11 a.m.-3 p.m.

ADAMS Center

12655 Vint Hill Road, Nokesville, Virginia 20181

Join Prince William Community Services at the ADAMS Center Gainesville to learn about local services and opportunities that can improve your health and well-being and foster a sense of belonging.

Workshops:

Mental Health 101 & Coping Strategies

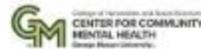
GMU Center for Community Mental Health

Ending the Silence

NAMI Prince William

No registration needed!

*Lunch and child care
are provided*



Greater Prince William Human Trafficking Taskforce Symposium

NEW LAWS & TRENDS

March 5, 10 a.m.-1 p.m.
Dr. A.J. Ferlazzo Building
Auditorium
Woodbridge

Hear from regional experts on emerging human trafficking trends, recent legislative updates and a trauma-informed, victim-centered response.



Scan the QR code to
learn more & register!

Who Should Attend:

Service providers, advocates, law enforcement, government partners and community stakeholders.

