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Message from Local Health Director

Our health district is unique in that we support urban, suburban and rural communities. What works for one locality does not always work in another. This is why the surveys we take and the feedback we get from each community is vital.

We now have a better understanding of the health status of the Powhatan community we serve. Since we've been working together with our community partners to learn more, we've begun to establish a starting point for how we can collectivity develop a Community Health Improvement Plan. Creating this plan will lead to the action on which we can all agree: better ways to protect the health and promote the wellbeing of all people in our community. I support my team and am very pleased to share with you what we learned.



Best regards,

gifthen as not

Alexander Samuel, MD, MPH Health Director

Chesterfield Health District

(Chesterfield, Colonial Heights & Powhatan)

Executive Summary

Overview

The 2024 Powhatan County Community Health Assessment (CHA) was developed by a group of community partners. Bon Secours, The Drexell-Morell Center, Goochland/Powhatan CSB, Powhatan County Public Library, Powhatan Department of Social Services, Powhatan Coalition of Churches, Powhatan County Parks and Recreation, Senior Connections, The Willow Collaborative, and community members comprised the CHA Steering Committee. The 2024 CHA is designed to collect and analyze data to enable evidence-based goal setting and decision making for Powhatan County and its residents.

Methodology

The CHA Steering Committee used a modified format of the Mobilizing for Action through Planning and Partnerships (MAPP) process. The MAPP process is a proven systematic framework for identifying community health needs to prioritize the voice of community residents and stakeholders. The process involved data collection through a community survey, focus groups, interviews, and data analysis.

Reviewing Secondary Data

The community health data reviewed explores existing population-level data, or secondary data, to define the health status of the county and provide key findings to residents and stakeholders. The CHA Steering Committee obtained data from many sources at the local, state, and national levels.



A review of the existing secondary data highlighted three topics of concern:



Community Input

A community survey and focus groups also contributed to our understanding of the community's health and quality of life. The survey was conducted over the span of two months, from August through September, and captured the input of 406 community members. This collection of data directly from people who live, work, worship, and play in Powhatan is known as *primary data*.

Top health and social concerns for the County's residents				
Health Challenges: Social Challenges:				
1. Stress 1. Financial insecurity				
2. Mental health problems	2. Housing-related problems			
3. Overweight/obesity 3. Lack of walkable neighborhood				

Focus groups allowed us to get more detailed information regarding residents' perceptions of both strengths and challenges or concerns that they had for Powhatan:

Strengths and Assets:	Concerns:
1. Available community resources	1. Transportation
2. Sense of community	2. Economic barriers
3. Outdoor spaces, cleanliness	3. Access to food
	4. Housing

Top Health Priorities

Through secondary data review, and the feedback and prioritization from residents, the health assessment has identified two health focus areas for decisionmakers to prioritize to improve health and wellness for all.

- Mental Health
- Financial Insecurity

Conclusion

The 2024 Community Health Assessment is a snapshot of the health and quality of life of Powhatan County residents. Community partners will use this assessment to guide the development of the Community Health Improvement Plan, the community's action plan to address the top health priorities and areas of need in the County.





Introduction

Health is not solely shaped by individual health behaviors and choices but is impacted significantly by the places and conditions in which people live. The conditions in the environment that affect a wide range of health and quality of life outcomes are known as the social determinants of health (SDOH). Among the social determinants of health are economic stability, education access and quality, healthcare access and quality, neighborhood and built environment, and social and community context. To improve the health and quality of life of Powhatan residents, we must first understand how health is being affected, and what SDOH are contributing to poor outcomes.

The CHA is designed to:

- 1. Collect and use data to educate and mobilize communities around health and social challenges.
- 2. Provide a foundation of data to be used for goal setting and decision making.

The Chesterfield Health District led the CHA in collaboration with strong community partners Bon Secours, The Drexell-Morell Center, Goochland/Powhatan CSB, Powhatan County Public Library, Powhatan Department of Social Services, Powhatan Coalition of Churches, Powhatan County Parks and Recreation, Senior Connections, The Willow Collaborative, and community members. This group is heretofore referred to as the CHA Steering Committee.

Data Collection Methods

Method	Time Collection Time Frame	Participants	Results
Secondary Data Analysis	December 2023- October 2024	N/A	Appendix A: Health Status, Behaviors, and Outcomes Worksheet
Community Health Survey	August 2024- September 2024	406 community members	Appendix B: Community Health Survey Results
Community Focus Groups	May 2024- September 2024	40 community members	Appendix C: Community Focus groups and Key Informant Results
Key Informant Interviews	January 2024- September 2024	16	Appendix C: Community Focus groups and Key Informant Results

Data Limitations

Data limitations are issues that can affect the quality and reliability of data. The following limitations of the current CHA cycle should be considered:

Timeliness of Secondary Data - Some of the available data is years old and may no longer be accurate.

Data Suppression - Data is suppressed in small communities to protect individual privacy and prevent the unintentional identification of people in public datasets. In some instances, data suppression can restrict the ability to identify health disparities.

Survey Representation - Survey results reflect an overrepresentation in certain demographic categories.

Focus Group Representation - Focus group results reflect an overrepresentation from the aging population.

Community Health Data Review

The 2024 Powhatan CHA process started with an in-depth review of Powhatan's existing health data. Data were obtained from many secondary sources at the local, state, and national levels to paint a picture of the community's health status and aid us in connecting the dots between health outcomes and the SDOH that may be at the root of those outcomes.

Comparisons are between Powhatan County and Virginia indicators, and achievements and gaps are identified for the County. An in-depth exploration of data can be found in Appendix A: Health Status, Behaviors, and Outcomes Worksheet, which includes all data sources and years.

In this section, we will focus solely on Powhatan County data outliers that are significantly better or worse than the Commonwealth of Virginia's outcomes, or data points that may have significant implications for the health of residents or future County planning.

Demographics

Demographics refer to the statistical characteristics of a population, such as age, gender, race, etc. The tracking of demographic trends can inform strategic planning and program development. See Appendix A for demographic data.

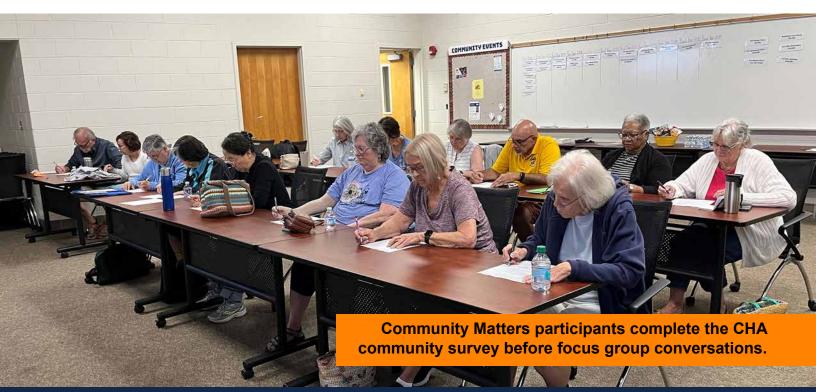
Data of note: Powhatan County is an aging community. By 2033 the 55+ age group is projected to make up 42.6% of the entire population².

of the population are aged 55 or older, compared to Virginia's 29%¹

35%

Community Health Implications

Powhatan's aging population will increase the prevalence of chronic disease in the community. This growth will also result in a greater demand for aging services of all kinds: recreational and social programs, healthcare services, and senior living services. Future planning should consider this.



Health Status

Health status is a general term that refers to a community's physical and mental health. The CHA committee reviewed data indicators related to disease and injury, heath behaviors, and mortality.

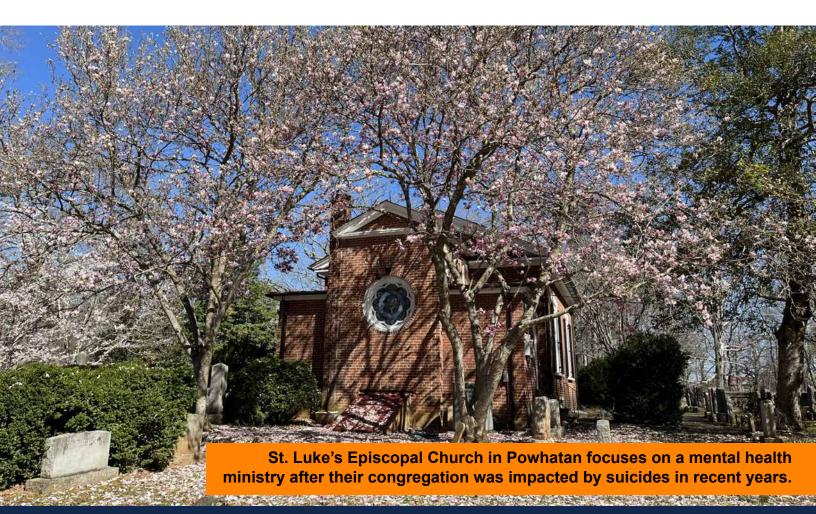
Data of Note: In Powhatan County, motor vehicle (MV) injury and death, mental health, and substance use outcomes are worse than the state.

Community Health Implications

Notably, the most prominent health issues

		Powhatan	VA	
	Five-year average rate of			
	death due to drug overdose	27.7	24.1	
Substance	of all substances			
Use	Rate of hospitalizations with	92.88	89.92	
036	drug overdose	92.00	09.92	
	% binge drinking in past 30	17.4%	15.8%	
	days		13.070	
Motor	Rate of motor vehicle crash	tor vehicle crash		
Vehicle	deaths involving alcohol	4.0	1.6	
Injury &	Rate of motor vehicle injuries	42%	30%	
Death	requiring hospitalization	44 /0	30 /0	
	Motor vehicle mortality rate	22.2	12.1	
Mental	Suicide Mortality Rate	21.8	14.2	
Health	Ratio of population to mental	1,850:1	410:1	
пеанн	health providers	1,000.1	410.1	

in Powhatan are interconnected. As mental health worsens, so do substance use and substance-involved motor vehicle accidents. Efforts to understand and address the root cause of poor mental health will likely improve all outcomes.



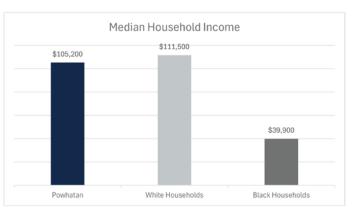
Economic Stability

Economic stability refers to the ability of people to access the resources they need to live a healthy life. It is inextricably connected to physical and mental health. Economic stability can include factors like:

- Median household income
- Poverty
- Unemployment

Powhatan County has lower rates of poverty (4.5%) and unemployment (2.5%) than Virginia (10%, 2.9%) and displays a significantly higher median household income (\$105,200) than Virginia (\$85,800).

Data of Note: The high median household income does not paint the full picture of economic stability for the County. 25% of Powhatan residents can't afford essentials, despite being employed and living



U.S. Census Bureau Small Area Income and Poverty Estimates (2022); American Community Survey, five-year estimates (2018-2022)

above the poverty threshold³, and the data depicts significant racial disparities in household income.

"The median household income statistic makes people think we don't need help.

We're all here with legitimate needs."

-Focus group participant

Community Health Implications

We are unable to disaggregate much of the health data by race for Powhatan County, but we can expect that the health outcomes for Black residents are affected by income disparity. Programs that provide the skills to improve economic stability, help people pay for food, housing, health care, and education should meet the needs of those at greater risk of poor outcomes. The overall economic development of the County would provide greater job opportunities, but careful consideration should be paid to the types of businesses and trades that are brought in. Higher-paying skilled trades for which people can be trained will improve individual economic stability at a faster rate than lower paying retail or fast-food jobs. More affordable housing options would reduce financial strain for many.

"My mother is employed in Richmond. There aren't many opportunities that pay well here. She has an hour commute to work. It can cause a strain when my mother gets home at like 10:00 at night."

-Teen and young adult focus group participant

Did you know?

Powhatan County's 2025 Housing Study identified that low income residents, renters, seniors, and first time home buyers do not have access to satisfactory housing options.





On 4/3/2025, the median asking price for a home in Powhatan was \$819,990. With a high of \$1.795 Million and low of \$315,900, housing is no longer available for lower or middle-income families.

Education Access and Quality

People with higher levels of education have better health outcomes. The CHA Committee reviewed data related to educational attainment, graduation and dropout rates, preschool enrollment, and school spending. Powhatan County performs better than Virginia, on average, across all educational outcomes.

Powhatan County spends four times more on school funding per pupil than Virginia.⁴

Neighborhood and Built Environment

This refers to the connection between where a person lives—housing, neighborhood, and environment—and their health and well-being. It includes a consideration of:



Access to transportation



Walkability



Access to recreational spaces



Safety



Housing affordability and quality



Commuting patterns

Community members agree:

Housing related problems and lack of walkable neighborhoods were identified as the second and third greatest community challenges.

Data of Note: Powhatan residents have less access to opportunities for physical activity and spend more time in vehicles to commute to work than Virginians on average. Walkability refers to the ease and attractiveness of an area for walking, encompassing factors like sidewalk presence, connectivity, and the availability of destinations within walking distances. Walkability scores across the County range from 0 to 38, indicating that all neighborhoods are car dependent and may be unsafe for pedestrians traveling on foot.

"I live in a part of Powhatan with no sidewalks, and the cars speed on the roads and make it dangerous to walk."

-Teen and young adult focus group participant

Community Health Implications

The data suggests significant car dependency for Powhatan residents. Car dependency can lead to social isolation and mental health challenges, higher household expenses and economic strain, a decline in small businesses, and increased congestion and motor vehicle accidents.

High-density housing is currently allowed in Powhatan Village, and with the introduction of the new "Powhatan Zone" bus route, which serves the village, efforts to expand public transportation are in motion. This area should continue to be developed as Powhatan's County seat, providing a growing central location for connection, opportunities for physical activities, and economic growth. Housing for affordability and aging adults should be prioritized, and the walkability of this area should be upheld and expanded upon.

Did you know?

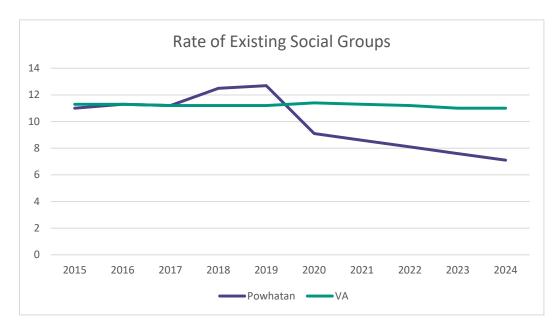
In 2025, Powhatan Parks and Recreation adopted a new Trail Master Plan, which outlines the County's plan to develop trails that improve the connectivity of the County and create a more walkable, bikeable community.



Social and Community Context

Social and community context refers to key issues such as cohesion within a community, civic participation, discrimination, conditions in the workplace, and incarceration. People's interactions with and connectedness to family, friends, neighbors, co-workers, and others in their networks can affect their health and well-being.

Data of Note: Across most social and community context data indicators, Powhatan sees better outcomes than the State. Powhatan has higher voter turnout, less violent crime, and lower social vulnerability than Virginia, on average. However, in recent years, there has been a drop in social associations, a key indicator of community connectedness and cohesion. This drop is likely attributed to the social isolation of the COVID-19 pandemic but has persisted beyond the social distancing protocols of that time. Over that same time frame there has been an increase in the number of hospital admissions related to stress and anxiety.



"I'm a physician in the County, and I hear about isolation all the time. It's because the children are working and they can't help, and the elderly person is living alone or with a very sick spouse."

-Focus group participant

Community Health Implications

Social isolation is associated with greater risk of cardiovascular disease, dementia, stroke, depression, anxiety, and premature death.⁵ Older adults, a growing demographic in Powhatan County, are at higher risk of social isolation and loneliness. Strengthening social infrastructure by designing the built environment to promote social connection, establishing social connection programs, and investing in local institutions that bring people together, such as libraries, parks and recreation facilities improves health outcomes.⁵

"In some small communities, people are tight, you know your neighbor. Lately Powhatan has seen a lot of growth, people are moving from other states and aren't connected...when you have a lot of transition, isolation comes up, whether you're rural or not."

-Robin, Goochland-Powhatan Community Services Board

Health Care Access and Quality

The healthcare system significantly impacts health outcomes by influencing access to care, quality of care, and addressing social determinants of health, ultimately affecting population health and well-being. Those that face barriers that prevent or limit their access to health care services face an increased risk of poor health outcomes.

Data of Note: In Powhatan, the ratio of population to primary care providers, mental health providers, and dentists is significantly higher than the same ratios for the State. Powhatan County has been identified by the Health Resources and Services Administration (HRSA) as a Medically Underserved Area for mental health services.

		Powhatan	VA
Primary Care Physicians	Ratio of population to primary care physicians.	1,830:1	1,340:1
Dentists	Ratio of population to dentists.	2,420:1	1,330:1
Mental Health Providers	Ratio of population to mental health providers	1,850:1	410:1

See Appendix A for data sources.

Community Health Implications

Community members facing high population to provider ratios often face long wait times for care and therefore delay needed medical care. However, Powhatan does not have the high rate of avoidable hospitalizations, nor does it have significantly worse physical health outcomes compared to the State. Where we do see worse outcomes in Powhatan is around mental health indicators. Those data points, taken into consideration alongside the high ratio of population to mental health providers, indicates a significant need for an influx of mental health services to the area.

"There aren't any hospitals or urgent cares. That's a really long drive when you're in pain now. We had to call the ambulance because my mom's blood sugar was acting up, and they took her to St. Mary's and that's really far."

-Teen and Young Adult Focus Group Participant

Community Input Data Review

Community members were encouraged to participate in the Community Health Assessment through surveys, focus groups, and interviews. Community members' experience of living in Powhatan is key to identifying the health concerns that most impact residents' day-to-day life and the social issues that may contribute to or exacerbate health issues.

Focus Group and Interview Findings

56

residents gave their input in interviews or focus groups. The following themes were brought up most often.

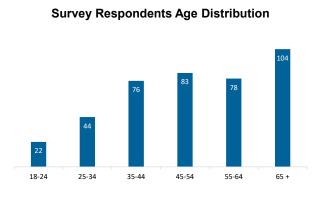
Themes	Factors consistently highlighted
Lack of transportation	 Senior populations and lower income families impacted Effect on access to food, healthcare, and higher-paying jobs
Financial insecurity	 Senior populations living on fixed income Cost of living increases Lack of local job opportunities
Inaccessible food	Affordability Limited food sources
Unaffordable housing	 Lack of affordable housing stock, it's effect on demographics Limited options for seniors Need for assistance with home improvement costs

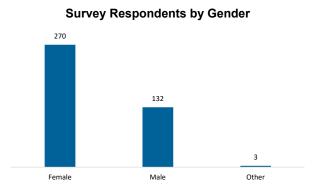
Survey Findings

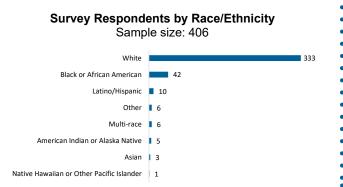
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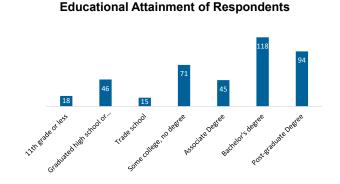
Powhatan residents gave their survey input

Demographics of Residents Reached



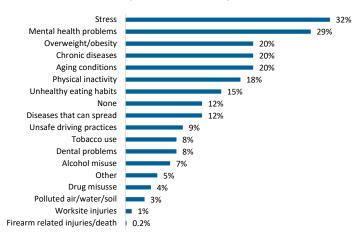




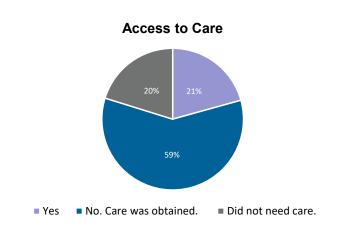


What are the top health challenges impacting you, your family, or people you live with?

Top Health Challenges

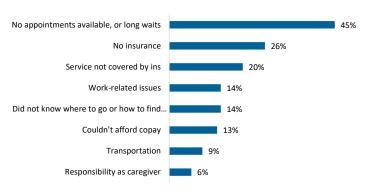


During the past 12 months, was there a time when you or someone you live with needed or wanted medical, mental, behavioral, or dental care, but could not get it?



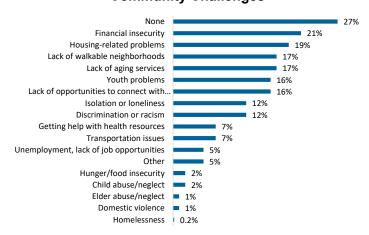
If yes, what was the reason? Pick all that apply.

Access Barriers



What are the top community challenges impacting you, your family, or people you live with?

Community Challenges



Community Focus Groups and Key Informant Results

Subtopics and excerpts from conversation regarding the top 5 challenges mentioned

Transportation

Senior populations are significantly impacted, affecting sense of independence Effect on food access (See food access)

Challenges getting to healthcare services

"If something could be done to stretch further out into the community, that would help. Diabetic care psychiatric care, Endocrinology, Rheumatologist, Neurology...so many of these resources require a long drive to care."

Lower income families often have one car per family

Effect on access to higher paying job opportunities (See economic barriers)

"A lot of jobs in Powhatan are on the lower pay scale, so you're going to have to drive to get to the city." "Moving out on my own is way far out in the future. I can't find work and don't have a car."

Economic barriers

Senior population living on fixed income

"The median household income statistic makes people think we don't need help. We're all here with legitimate needs."

Cost of living increases

Lack of local job opportunities (See transportation)

"What's the solution? I believe more businesses would offer a variety of goods and services and job opportunities and help share the tax burden of the residents."

"My mom used to work in Chesterfield driving a school bus and they paid more, but we're far away from Chesterfield and she couldn't do the commute every day. So, she works in Powhatan and makes less now."

Impact on the family system

"Employment-wise, my mother is employed in Richmond. There aren't many opportunities that pay well here. She has an hour commute to work. It can cause a strain when my mother gets home at like 10 at night."
"...at least one if not both adults are running off somewhere to work to get the money to pay for that house, and the kids, I think get left out a little."

Access to food

Affordability

"Access to food is a significant thing. People tend to buy cheaper foods, which tend to be less healthy."

"I would love to have a resource for my diabetic patients to access food/vegetables at a discounted price. I often hear 'I can't afford this, Dr. Joseph, I can't afford to eat healthily."

Limited food sources, fast-food and restaurant options

Transportation challenges (see Transportation)

"They need a vehicle for food drop-offs because a lot of people are stuck without transportation."

Nutrition education

Housing

Affordability

Effect on demographics

"Lack of affordable housing for single people and young married couples. They are moving out because they can't afford housing prices in county."

"Families who might return to county are not moving back because they can't afford housing."

Senior housing, affordability of senior options

"I'm looking for assisted living and there's nothing in Powhatan. 10 years ago, my mother had to go to Westchester, and it hasn't changed."

Housing conditions, home improvement cost assistance

"People with mold, etc. and there's no one to help them."

Substance Use

Causes: stress, anxiety, depression, lack of things to do/isolation Lack of education on the impact of SUD, need for schools to do more

"I've heard there's a big problem with vaping there (Powhatan high). Kids have access to vapes and drugs in general. It's easily accessible. Younger kids are getting it from seniors, seniors are getting it from older kids who have already graduated. I know so many people first-hand that have been caught up in vaping and weed and they can't stop because they've been doing it since they were kids, because it's in schools."

Alcohol, drugs, vaping

"Largest growing meeting group is NA- up to 50 people per meeting. Saturday night AA meeting is the largest meeting- sometimes exceeds 100 people per meeting. I think that tells you something about the health needs of the community."

"I have seen a lot of people struggle with addiction. My brother passed away in 2020 of an overdose. My sister works at Subway and she has to ask people to leave often because their causing a disturbance because they're on drugs. I think people don't necessarily see people like that because they do a good job of making sure those people aren't in public spaces, instead of trying to tackle the problem."



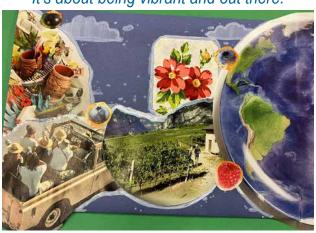
Capturing Youth Voice

Powhatan Library's Teen Advisory Board participated in discussion around the social determinants of health and how they impact health in Powhatan.

Social Determinants of Health Discussion Themes				
Neighborhood and Built Environment	-Clean environment -Great park systems and trails, but lack of sidewalks makes it dangerous to walk elsewhere -Access to food is limited without transportation			
Education Access and Quality	-Lack of quality alternative schooling			
Social and Community Context	-Homeschooling can be isolating, the library is an important place for social connection -Public community spaces like the Y and Library are important			
Economic Stability	-Lack of well-paying employment opportunities in Powhatan, many work in Chesterfield -Parents commute to Richmond, reduces time for families to be together, adds stress			
Healthcare Access and Quality	-Hard to find providers that accept Medicaid, long waits -Lack of hospitals and urgent care can feel scary in an emergency -Must commute to Richmond to see specialists			



"It's about being vibrant and out there."





"If you have a good community and a good support system and good, nice people around you there is room to grow, and they let you grow, and they don't get offended by that"

"People over here in the car...they're observing trash and gross stuff- they're pointing out the gross qualities in the bad and taking notice to it...in a 'we need to change that' kind of way...they're not turning away."

Prioritization of Needs

To identify the community's greatest challenges, the CHA steering committee compared data across the three sources: the existing health outcomes data, the survey results, and the results of community conversations. Based on these findings, the priorities have been identified as:



Mental health



Financial insecurity

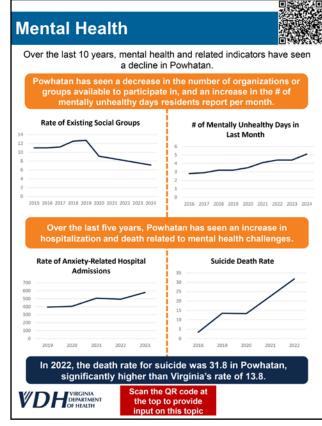
Mental Health

Mental health was the issue that stood out most prominently in the initial review of the health outcomes data. It was one of the three initial health challenges presented to community members during the CHA data walks, where community members were presented with the assessment's initial findings. The true impact of this challenge on the community was reinforced by survey results, with 61% of respondents identifying either "mental health" or "stress" as the health issue most impacting them and their family members.

Focus group and interview participants identified negative self-perceptions derived from comparison to media personas; everyday work, family, and economic stressors; increased social isolation related to the COVID-19 pandemic; and lack of mental and emotional coping skills as contributing to worsening mental health outcomes. Poor mental health outcomes are closely tied to substance use and poorer health outcomes, overall. This issue may be compounded by the lack of mental health providers, as Powhatan is designated as a medically underserved area for mental health.

"Access for mental healthcare in Virginia is difficult and seems even more difficult in Powhatan...I spend 80% of my visits addressing mental health issues, and find that I'm extremely frustrated when I don't have other resources, like psychologists or psychiatrists, to reach out to, and that's BEFORE we can move on to the medical issues that I'm trained to treat."

-Dr. Joseph, Bon Secours



Mental health data poster presented during the CHA data walks.

Financial Insecurity

Financial insecurity was not flagged during the initial review of existing community data but was discussed significantly in focus groups and interviews and was identified as the greatest community social challenge through survey input. Despite the County's higher than average median household income, community stakeholders spoke frequently of "hidden populations"- Powhatan residents that are struggling to get by on a day-to-day basis. Financial insecurity was also identified as a contributor to stress and mental health challenges, and a barrier to accessing food, transportation, and housing.

A piece of the conversation around financial insecurity often returned to a lack of educational opportunities in the community to improve financial management skills in addition to other important life skills. Individuals may lack the skills and education necessary to feel empowered and resilient, which prevents proactive behaviors and contributes to learned helplessness.



"One of the largest needs in Powhatan is education...people don't understand the resources available to them."

-Dr. Joseph, Bon Secours

A Review of Other Current Needs Assessments: How Do Our Results Compare?

During the timeframe that the VDH health assessment was being conducted, two other organizations were also collecting Powhatan-centric data for their own needs assessments: the Powhatan Community Action Agency and Bons Secours. A review of the findings for these two assessments shows significant similarities:

1777 ROINIL	WDH VIRGINIA DEPARTMENT OF HEALTH Chesterfield Health District	Bon Secours
Powhatan Community Action Agency	VDH Powhatan CHA	Bon Secours Powhatan Findings
Financial Management	Financial Insecurity	Financial hardship
Mental Health Care	Mental Health	Mental Health
Housing		
Transportation		

Next Steps



The results of the Community Health Assessment inform the next step of this cycle:





The Community Health Improvement Plan (CHIP).

The Chesterfield Health District will work with local Powhatan stakeholders to identify initiatives that work to address the challenges of poor mental health and financial insecurity in the community. The initiatives with the greatest potential to address the priority needs will be further developed into plans, identifying needed partners as well as potential funding streams. These plans will be presented to stakeholders and local governmental leaders to gain the buy-in and collaboration of these groups. In partnership with Powhatan County and the approved strategic plan, local stakeholders will move health priorities forward.

Stay up to date on all CHIP activities and learn about getting involved by visiting ChesterfieldVA.health and clicking on Reports.



Appendix A: Health Status, Behaviors, and Outcomes

Accessible Excel chart available online in PDF format.

Category	Indicator	Measure	Powhatan	VA	Source/Year
	Population	Population Count	31,489	8,683,619	ACS 2018-2022
	Sex	Male	52.50%	49.50%	ACS 2018-2022
		Female	47.50%	50.50%	ACS 2018-2022
	Age	<18	18%	21.80%	ACS 2018-2022
		18-24	6.70%	9.60%	ACS 2018-2022
		25-34	10.90%	13.60%	ACS 2018-2022
		35-44	13.80%	13.30%	ACS 2018-2022
		45-54	15.10%	12.90%	ACS 2018-2022
		55-64	16.20%	13%	ACS 2018-2022
		65+	19.30%	16%	ACS 2018-2022
	Race	White	84.80%	60.40%	ACS 2018-2022
		Black/African American	8.30%	18.60%	ACS 2018-2022
		Asian American	0.60%	7.10%	ACS 2018-2022
Demographics		American Indian/Alaskan Native	0.20%	46%	ACS 2018-2022
		Native Hawaiian/Pacific Islander	0.10%	8%	ACS 2018-2022
		Other	0.90%	5.20%	ACS 2018-2022
		Multiple Race	5.20%	8.20%	ACS 2018-2022
	Ethnicity	Hispanic/Latino	2.50%	10%	ACS 2018-2022
		Non-Hispanic/ Latino	97.50%	90%	ACS 2018-2022
	Foreign Born	Foreign Born	2.17%	12.55%	ACS 2017
	Limited English proficiency	Limited English proficiency	1.00%	6%	Census 2020
	Households with Children	Households with Children	30.47%	30.73%	ACS 2018-2022
	Population with any disability	Population with any disability	11.74%	12.11%	ACS 2017-21
	Veteran status	Veteran status	10.3%	9.2%	ACS 2017-21

Category	Indicator	Measure	Powhatan	VA	Source/Year
	ALICE	Households that are Asset Limited, Income Constrained, Employed (ALICE)	25%	28%	United Way 2021
Basic Needs	Findhelp	Most Common search terms in Findhelp	Utilities & Housing		Findhelp Counts 23-24
	2-1-1	Top 2-1-1 requests in Powhatan County	Housing & utilities		211 Counts 23-24
	Life Expectancy	Average number of years a person can expect to live.	78.7	78.1	CDC 2019-2021
	Premature Death	Years of potential life lost before age 75 per 100,000 population	7,200	7,300	NCHS 2019-2021
Health Status	Self-Reported Fair/Poor Health Status	The proportion who reported either "Fair" or "Poor" health	13%	14%	CDC BRFSS 2021
	Mentally Unhealthy Days	Average number of mentally unhealthy days reported in past 30 days	5.1	4.9	BRFSS 2021
	Frequent Mental Distress	Percentage of adults reporting 14 or more days of poor mental health per month (age-adjusted)	16%	15%	BRFSS 2021
	Physically Unhealthy Days	Average number of physically unhealthy days reported in past 30 days	3.3	3.2	BRFSS 2021
	Frequent Physical Distress	Percentage of adults reporting 14 or more days of poor physical health per month	10%	10%	BRFSS 2021
	Disability	Percentage of individuals with a disability	11.7%	12.1%	ACS 2018-2022



Category	Indicator	Measure	Powhatan	VA	Source/Year
	Heart Disease Prevalence	Percentage of adults who have ever been diagnosed with coronary heart disease	6.00%	5.52%	BRFSS 2021
	Diabetes Prevalence	Percentage of adults aged 20 and older with diagnosed diabetes	8%	10%	BRFSS 2021
	Low Birthweight	Percentage of live births with low birthweight (<2,500 grams)	6%	8%	NCHS 2016- -2022
	Cancer Incidence	Age-adjusted rate of new cancer cases	8%	6.82%	BRFSS 2021
	Obesity Prevalence	Age-adjusted prevalence of obesity among adults aged 18 years and older	34%	34%	BRFSS 2021
	STI Infection Rate	"Number of newly diagnosed chlamydia cases per 100,000 population"	195.9	467.6	NCHHSTP 2021
	HIV Infection Rate	"Number of people aged 13 years and older living with a diagnosis of HIV infection per 100,000 population"	228	334	BRFSS 2021
	Covid Local Risk Index	Number of deaths due to COVID-19 per 100,000 population (rate)	24.8	19	CDC 2022
	COPD Prevalence	Adults Age 18+ with COPD	5.9	6	BRFSS 2022
	Hospitalizations	Avoidable Hospitalization rate	563.48	850	VDH 2020
		Hospitalization for All Injuries	431.21	386.95	VDH 2020
Disease/Injury		Nonfatal Overdose Hospitalization Rate	86.2	86.4	VDH 2021
Discuse/injury		Nondrug Poisoning Hospitalizations	9.95	5.26	VDH 2020
		Hospitalization for Asthma	424.57	626.73	VDH 2020
		Hospitalization for Diabetes	1837.6	2237.19	VDH 2020
		Motor vehicle related injury hospitalizations	66.34	37.94	VDH 2020
		Self–harm and Suicide-related ED Visits, Ages 5 Years and Over	509.9	680.9	VDH 2021
		Low birthweight	7%	8.5%	VDH 2022
	Maternal and Child Health	Pre-term birth rates	9%	9.6%	VDH 2022
	Offind Ficality	Smoking during pregnancy	2.4%	3.2%	VDH 2022
		New Early Syphilis Diagnoses (rate)	0	17.9	VDH 2022
		Early, Non-Primary Non-Secondary Syphilis per 100k	0	9.1	CDC 2022
		Primary and Secondary Syphilis (rate per 100k)	0	10.8	CDC 2022
	STIs	Ghonorrhea rate	22.2	154.7	CDC 2022
		Chlamydia incidence	155.6	469.7	CDC 2022
		New HIV/Aids infections	250.6	331.4	CDC 2020

Category	Indicator	Measure	Powhatan	VA	Source/Year
	Mammography	Age-adjusted prevalence of mammography use among women aged 50–74 years	74.80%	78.20%	BRFSS 2021
	Colorectal Cancer Screening	Age-adjusted prevalence of colorectal cancer screening among adults aged 50–75 years	75%	74.60%	BRFSS 2021
Health	Cervical Cancer Screening	Females Age 21-65 with Cervical Cancer Screening Test	85.10%	84.30%	BRFSS 2020
Behaviors	Alcohol Use	Adults aged ≥18 years who report having five or more drinks (men) or four or more drinks (women) on an occasion in the past 30 days	17.40%	15.83%	BRFSS 2021
	Oral Health: Dental Visits	Prevalence of dental visit among adults aged 18 years and older	71.00%	68.60%	BRFSS 2020
	Teen Pregnancy Rate	Number of pregnancies per 1,000 female population ages 15-19.	8.5	15.6	VDH 2022
	Leading Cause of Premature Death	Leading cause of death under 75	Cancer	Heart Disease	CDC Wonder
	Infant Mortality Rate	Number of infant deaths per 1,000 live births in the specified population	7.87	5.75	VDH 2018-20
	Heart Disease Mortality Rate	Age-adjusted number of deaths from heart disease per 100,000 people	171.38	174.96	VDH 2022
	Suicide Mortality Rate	Number of deaths due to suicide per 100,000 population	21.8	14.2	VDH 2023
	Maternal Mortality Rate	Number of maternal deaths per 100,000 live births	0	47.94	Va Vital Stats 2018-20
	COVID Mortality Rate	Number of deaths due to COVID-19 per 100,000 population	229.54	277.85	Cares 2022
	Lung Disease Mortality Rate	Number of deaths due to lung disease per 100,000 population	36.9	34.6	CDC 2016-20
Mortality	All-Cancer Mortality Rate	Age-adjusted mortality rate from all cancer per 100,000 people	129.04	154.16	VDH 2022
	Unintentional Injury Mortality Rate	Number of deaths due to injury per 100,000 population.	75	72	NCHS 2017- 2021
	Motor Vehicle Mortality Rate	Number of motor vehicle crash deaths per 100,000 population	22.2	12.1	VDH 2022
	Alcohol-impaired	Rate of motorvehicle crash deaths involving alcohol	5.3	2.3	US DOT 16- 20
	Driving Deaths	% of motor vehicle crash deaths involved alcohol.	42%	30%	FARS 2017- 2021
	Overdose death rate	Number of drug poisoning deaths per 100,000 population.	26.5	26.1	VDH 2023
	Liver and Cirrhosis Mortality Rate	Number of deaths due to chronic liver disease and cirrhosis per 100,000 population.	10.3	9.9	CDC 2016-20
	Stroke Mortality rate	Number of deaths due to stroke per 100,000 population.	29.6	38.6	CDC 2016-20

Category	Indicator	Measure	Powhatan	VA	Source/Year
	Housing Cost Burden	30% or more of household income spent on housing costs	15.51%	28.20%	ACS 2018-2022
	Severe Housing Cost Burden	50% or more of household income spent on housing costs	5%	12%	ACS 2018-2022
	Housing Cost Burden (Renters only)	30% or more of renter's household income spent on housing costs	32.6%	46.5%	ACS 2018-2022
	Severe Housing Cost Burden (Renters Only)	50% or more of renter's household income spent on housing costs	13%	23.3%	ACS 2018-2022
	Housing Insecurity/ Problems	Percentage of households with at least one of four housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing	6%	14%	HUD CHAS 2016-2020
	Home Owners	Housing units that are owner-occupied	91%	67%	ACS 2022
	Broadband Access	Percentage of households with broadband Internet connection	91%	89%	ACS 2018-2022
	Access to exercise	% of people live close to a park or recreation facility	60%		ArcGIS; YMCA; US Cen. 2020
	Air Quality	Average daily density of fine particulate matter in mg per cubic meter (PM 2.5)	8	7.3	CDC Tracking 2019
Neighborhood	Access to a Park	Percentage of population living within a half mile of a park	8.70%	55.20%	CDC 2020
and Built Environment		Mean travel time to work	32.9 mins	27.1 mins	ACS 2022
		Driving alone to work	78%	71%	ACS 2016-2020
	Commuting Patterns	Driving Alone- % that commute >30 minutes	61%%	40%	ACS 2018-2022
		Workers commuting by public transit	0.10%	3.40%	ACS 2017-21
		Workers who walk to work	0.20%	2.60%	ACS 2017-21
	Transportation	Occupied Housing Units with No Vehicles Available	1.60%	6.10%	ACS 2018-2022
	Transportation	Occupied Housing Units with One Vehicle Available	13.90%	30.30%	ACS 2018-2022
		Food Env. Index Score: Index of factors that contribute to a healthy food environment, from 0 (worst) to 10 (best)	9.8	9	USDA 2019, 2021
		Population who are low-income and do not live near a grocery store	1%	4%	2019 USDA
	Food	Liquor Stores rate per 100,000	9.89	5.55	CARES 2020
	Environment	SNAP Authorized food stores	3.65	7.35	
		Percent of households receiving SNAP	1.90%	9.90%	ACS 2019- 2023
		Fast food restaurants	39.56	79.79	
		Grocery stores	9.89	17.24	Cares 2020

Category	Indicator	Measure	Powhatan	VA	Source/Year
	Poverty	Total number of people in poverty	1,305 (4.5%)	836,686 (10.0%)	
	Children in Poverty	Percentage of all people under 18 years of age at or below the Federal Poverty Level	7%	13%	ACS 2018- 2022
	Living Wage	Hourly rate that an individual household must earn to support individual and their family	\$47.45	\$51.81	Living Wage Institute 2023
	Unemployment	Annual average unemployment rate of civilian noninstitutionalized population	2.50%	2.90%	LAUS 2022
Financial Security	Median Household Income	Income where half of households earn more and half of households earn less	\$105,200	\$85,800	ACS 2018- 2022
	Food Insecurity	Percentage of population who lack adequate access to food.	4.40%	8.10%	Feeding America 2021
	Child Food Insecurity	Food Insecurity among Child (<18 years) Population	1.40%	8.80%	Feeding America 2021
	Income Inequality	Ratio of household income at the 80th percentile to income at the 20th percentile	3.5	4.9	ACS 2018- 2022
	Median Value of Owner-Occupied Homes	Median value for owner-occupied housing units with a mortgage	\$356,500	\$339,800	ACS 2018- 2022
	Social Vulnerability	Social Vulnerability Score (social vulnerability of communities, at census tract level, within a specified county)	0	0.4	CDC- GRASP 2020
Social and	Violent Crime	Number of reported violent crime offenses per 100,000 population	73.0	207.0	CHR 2022
Community Context	Voter Turnout	Percentage of citizen population aged 18 or older who voted in the 2020 U.S. Presidential election.	83.40%	72%	MIT 2020
	Social Associations	Number of membership associations per 10,000 population	7.1	11	County Business 2021
	Access to Care: PCPs	Ratio of population to primary care providers	1,830:1	1,340:1	AHR File 2021
	Uninsured	% of persons aged 0–64 years uninsured	8%	8%	SAHIE 2021
Hoolthoore		% of persons aged under 19 uninsured	6%	7%	BRFSS 2021
Healthcare Access and Quality	Mental Health Providers	Ratio of populations to mental health providers	1,850:1	410:1	NPI Registry 2023
	Dentists	Ratio of population to dentists	2,420:1	1,330:1	AHR File 2022
	Preventable Hospitalizations	Rate of avoidable hospitalizations, per 100,000 population aged 18 and older	563.48	820.01	vdh.virginia. gov/epidemio logy/diis/2020

Category	Indicator	Measure	Powhatan	VA	Source/Year
Education Access and Quality	Educational Attainment	Adults aged 25 and over with a high school diploma or equivalent.	92%	91%	ACS 2018-2022
	High-School Drop Out Rate	Percentage of public high schoolers who do not graduate	2.47%	5.38%	VDOE 2023
	Limited English Speaking Households	Percent "limited English speaking household" is one in which no member 14 years old and over (1) speaks only English or (2) speaks a non-English language and speaks English "very well."	0.00%	2.60%	ACS 2018-2022
	Preschool Enrollment	Populations three years and over enrolled in school	55.38%	45.80%	ACS 2018-2022
	Income Inequality - Gini Coefficient Index	The mean absolute difference between minority proportions weighted across all pairs of areal units, expressed as a proportion of the maximum weighted mean difference	0.372	0.4724	ACS 2018-2022
	Residential Segregation	Index of dissimilarity where higher values indicate greater residential segregation between non-White and White county residents	40	51	ACS 2018-2022
Systems of Power, Privilege, and Oppression	Eviction Rate	Percentage of evictions per 100 renter homes	6.46%		Legal Services Corporation Civil Court Data Initiative (Isc.gov)
	Voter Turnout	Percentage of citizen population aged 18 or older who voted in the 2020 U.S. Presidential election.	83.40%	72.00%	ACS 2016-2020
	Employment- Population Ratio	The proportion of the population that is employed	59.70%	61.00%	ACS 2018-2022



Appendix B: Community Health Survey Results

406 Powhatan residents gave their survey input.

Demographics of Residents Reached

Age Group	Count	Percent
18-24	22	5.4%
25-34	44	10.8%
35-44	76	18.7%
45-54	83	20.4%
55-64	78	19.2%
65 and over	104	25.6%

Gender	Count	Percent
Female	270	66.7%
Male	132	32.6%
Other	3	0.7%

Race & Ethnicity	Count	Percent
American Indian or Alaska Native	5	1.2%
Asian	3	0.7%
Black or African American	42	10.3%
Latino/Hispanic	10	2.5%
Multi-race	6	1.5%
Native Hawaiian or Other Pacific Islander	1	0.3%
Other	6	1.5%
White	333	82.0%
Total Responses	406	Х

Education	Count	Percent
11th grade or less	18	4.4%
Graduated high school or GED	46	11.3%
Trade school	15	3.7%
Some college, no degree	71	17.4%
Associate Degree	45	11.1%
Bachelor's degree	118	29.0%
Post-graduate Degree	94	23.1%
Total Responses	407	Х

What are the top health challenges impacting you, your family, or people you live with?

Health Challenges	Percent
Stress	32%
Mental health problems	29%
Overweight/obesity	20%
Chronic diseases	20%
Aging conditions	20%
Physical inactivity	18%
Unhealthy eating habits	15%
None	12%
Diseases that can spread	12%
Unsafe driving practices	9%
Tobacco use	8%
Dental problems	8%
Alcohol misuse	7%
Other	5%
Drug misusse	4%
Polluted air/water/soil	3%
Worksite injuries	1%
Firearm related injuries/death	0.2%

What are the top health challenges impacting you, your family, or people you live with?

Access to care	Count	Percent
Yes	84	20.7%
No. Care was obtained.	240	59.1%
Did not need care.	82	20.2%
Total Responses	406	Х

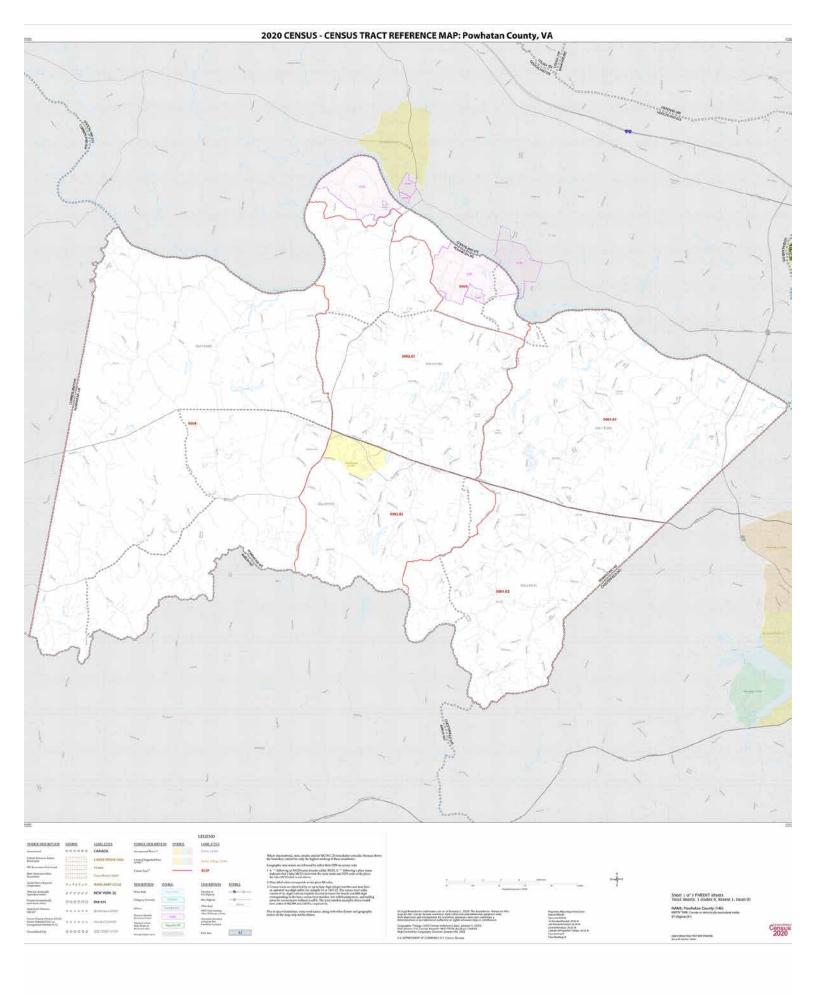
If yes, what was the reason? Pick all that apply.

Access Barriers	Count	Percent
No appointments available, or long waits	38	45%
No insurance	22	26%
Service not covered by ins	17	20%
Work-related issues	12	14%
Did not know where to go or how to find doctor	12	14%
Couldn't afford copay	11	13%
Transportation	8	9%
Responsibility as caregiver	5	6%
Total Responses	125	

What are the top community challenges impacting you, your family, or people you live with?

Community Challenges	Percent
None	27%
Financial insecurity	21%
Housing-related problems	19%
Lack of walkable neighborhoods	17%
Lack of aging services	17%
Youth problems	16%
Lack of opportunities to connect with community members	16%
Isolation or loneliness	12%
Discrimination or racism	12%
Getting help with health resources	7%
Transportation issues	7%
Unemployment, lack of job opportunities	5%
Other	5%
Hunger/food insecurity	2%
Child abuse/neglect	2%
Elder abuse/neglect	1%
Domestic violence	1%
Homelessness	0.2%





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