

Goochland County, Virginia

Community Health Assessment 2018-2019

"An active, engaged, and safe community where all Goochland residents have opportunities to access the resources necessary to live fulfilling and healthy lives"



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IN COOPERATION WITH THE STATE DEPARTMENT OF HEALTH

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New Kent County

Dear Reader,

I am pleased to present the 2018-2019 Goochland County Community Health Assessment (CHA) on behalf of the Chickahominy Health District and the Goochland County CHA Steering Committee. We thank you for your interest in this report, which presents a comprehensive assessment of the community's health and includes input from those who call Goochland County home. The purpose of the assessment process was to bring together community partners and residents to identify the top health-related priorities within the County. Ultimately, our goal is to work together, strategically, to address the most important issues in order to improve the health of everyone who lives, works, and plays here in Goochland County.

This project would not have been possible without the outstanding participation and support from Goochland County leadership, community volunteers, dedicated partners, and the CHA Steering Committee members, who met monthly to work on this assessment. I would especially like to acknowledge the dedicated work of Caitlin Hodge, Population Health Manager at the Chickahominy Health District, who served as the facilitator of the CHA Steering Committee, and Taylor Paschal, CHA Planner at the Chickahominy Health District, who was the chief composer of this report.

This Community Health Assessment is the initial phase of an ongoing process to evaluate and improve the health of Goochland County community members. Our hope is that this report initiates dialogue, informs decisions, and inspires coordinated action that will promote health and wellness for all. After reading this report, please consider joining us in addressing the identified health priority issues as we begin the Community Health Improvement Plan in 2019.

Sincerely,

Thomas G. Franck, MD, MPH

Director, Chickahominy Health District





Executive Summary

The Community Health Assessment (CHA) for Goochland County is the initial phase of a process to evaluate and improve the health outcomes and opportunities of the whole community. This document is intended to serve as a guide for those seeking to improve community health and make impactful change in Goochland County. Quantitative data was collected and analyzed to better understand the issues and barriers influencing the population's health. Additionally, multiple activities were conducted to add context, perspective, and real-life examples of health determinants from the community. These activities included: Community Listening Sessions to learn the importance of health-related topics from the perspective of community members; a Forces of Change Assessment with County leadership to identify factors influencing health in the community currently and in the future; Windshield Surveys to observe the built environment, resources, and services within each of the County's five districts; Root Cause Tree analyses to explore conditions that may contribute to local health disparities; and multi-voting to select health priorities with the CHA Steering Committee by defining, categorizing, and selecting health indicators most relevant to the health and well-being of the community.

The health assessment identified many strengths in Goochland County including a strong spirit of community volunteerism (civic and social involvement along with donations of time and resources); a rural and quiet atmosphere; a great location that provides easy access to nature, green-space, and parks as well as proximity to suburbs and cities; a high-achieving public school system; an active faith community; low crime rates; and a sense of safety and security.

The health assessment also uncovered areas that would benefit from focused action in order to improve community health and promote health equity. Health equity means that everyone in the community has the opportunity to attain their highest level of health; inequities are created when barriers prevent individuals or subpopulations from reaching their full potential. These focus areas include limited access to affordable and high-speed internet; a scarcity of local mental health care providers; above average rates of prostate and colorectal cancer (when compared to Virginia state rates); limited transportation options for those without a personal vehicle; and limited affordable housing options in the County. Developing strategies for breaking down barriers to health equity will be the focus during the Community Health Improvement Plan, and will require the collaboration of diverse community members, organizations, and leaders.

Purpose

Improving **population health** through collaborative efforts is an essential part of improving the overall **health** of Virginians. The National Association of County & City Health Officials (NACCHO) defines a **community health assessment (CHA)** as a process that uses **quantitative** and **qualitative** methods to systematically collect and analyze data to understand health within a specific community. A CHA report informs decision-making, prioritizes health problems, and lays the ground work for developing, implementing, and evaluating a **community health improvement plan (CHIP)** (Definitions of Community Health Assessments, 2017). The needs of a community continuously change and require improved strategies; Figure 1 illustrates the cyclical nature of the CHA/CHIP process.

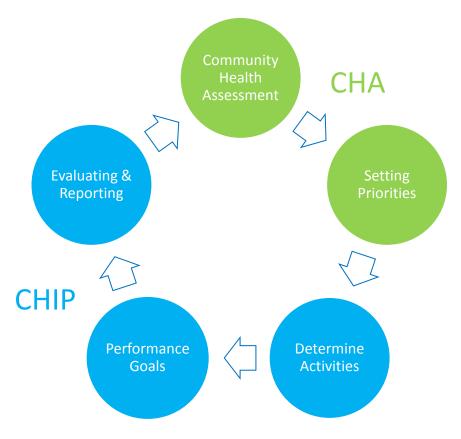


FIGURE 1. CHA/CHIP PROCESS

Broad and diverse community engagement and multi-sector collaborations are key elements of an effective CHA/CHIP process. For this reason, a CHA Steering Committee comprised of community members and leaders was formed to provide insights and guidance based on their experiences in Goochland County. Committee members reviewed data to identify community assets and issues and determine ways to engage the public during the process. Please see in Appendix A, the CHA/CHIP Action Plan for Goochland County.

The CHA process identifies **health disparities** and associated barriers to good health, while also highlighting unified goals to improve community health. A truly successful CHA/CHIP process will result in systematic changes in the community leading to improved opportunities for all people to achieve their best health.

A vision statement can be used to describe the desired state of a community and provide direction towards a long-term goal. In the beginning of the process, the CHA Steering Committee engaged in an activity that identified key terms used to create their vision statement. The key terms were drawn from answers to three questions: 1) What are the characteristics of a healthy community? 2) Five years from now, what would we want our local news to say about the health of our community? 3) What does health equity look like for Goochland County residents? Below is the resulting vision statement:

An active, engaged, and safe community where all Goochland residents have opportunities to access the resources necessary to live fulfilling and healthy lives.

Background

The National Quality Forum defines population health as the distribution of **health outcomes** and disparities in a group (NQF, 2016). For this Community Health Assessment (CHA), the population has been defined as Goochland County community members. Subpopulations are groups of individuals who are smaller parts of the population and can be grouped by age, occupations, interests, zip codes, race/ethnicity, etc. (NQF, 2016). The term community health is often used interchangeably with population health and can be given many definitions. For the purpose of this CHA, community health relates to the power of relationships and the interconnectedness of people, organizations, and systems within Goochland County. Between 2011 and 2015, the Census Bureau's American Community Survey estimated that Goochland County's population was 21,721 people with a population growth of 29.1% since 2000 (U.S. Census Bureau American Community Survey, 2015). The majority, 78.8%, of the population identifies as White followed by 17.8% of the population who identifies as Black or African American. The largest age group in the population is the group over 65 years of age, 18.5%, in Goochland County. There are nearly as many Males, 49.4%, as there are Females, 50.6%, within the population and about 97% of community members live in rural areas (Community Commons, 2019).

Addressing health issues at the root cause often has a greater impact on the community by preventing or postponing poor health for more people when compared to medical **interventions** (NQF, 2016). Research has shown that public health prevention systems prove to be a good investment of public dollars. Communities That Care, a public health prevention system, sought to prevent the onset of adolescent health and behavioral problems such as cigarette smoking, alcohol use, delinquency, and health-risking sexual activity and yielded a benefit-cost ratio of \$5.30 per \$1.00 invested. Communities That Care exemplifies how working on health improvements at the root of the problem may be more effective than waiting to address health issues later on, which is often when people need medical care (M.R. Kuklinski et al., 2012).

Beyond the benefits of cost-effectiveness of population health prevention systems, following the basic guidelines for good health can prevent and postpone far more deaths compared to treatment and intervention (Kottke & Pronk, 2013). The basic guidelines for good health include, but are not limited to, eating 5 fruits and vegetables per day, not smoking or being exposed to second hand smoke, and getting 150 minutes of physical activity per week. Policies, programs, and resources that provide all community members with opportunities and support to achieve these guidelines for good health could result in a healthier County, where more residents have a better quality of life and there are fewer health disparities. Health is not simply determined by individual choices – there are many additional **determinants of health**: access to social and economic opportunities; availability of resources and support in the home, neighborhoods, and communities; quality of schooling; safety in the workplace and neighborhoods; cleanliness of water, food and air; the nature of social interactions and relationship ("Social Determinants of Health", n.d.).

In 2016, the Virginia Department of Health released *Virginia's Plan for Well-Being*, an action plan for the creation and sustainability of conditions that support the health of all Virginians. This plan continues to serve as a road map for community health improvement throughout the state until 2020. *Virginia's Plan for Well-Being* focuses on four aims: Health Connected Communities, Strong Start for Children, Preventative

Action, and System of Health Care ("Virginia's Plan for Well-Being", 2016). Additionally, under the U.S. Department of Health and Human Services' Office of Disease Prevention and Health Promotions, *Healthy People 2020* was developed as a national resource to promote health and prevent **disease**, based on data from 2010. *Healthy People 2020* established the following objectives and goals for improving the health of Americans: (1) increase public awareness and understanding of the determinants of health, disease, and **disability**, and the opportunities for progress in these categories, (2) provide measurable goals that are applicable nationally, state-wide, and locally, (3) engage several sectors to take actions in strengthening policies and improving evidence and knowledge-based practices, and (4) identify the critical needs for research, evaluation, and data collection in the Unites States every ten years, as *Healthy People* releases new objectives for improving the health of Americans ("Healthy People 2020", n.d.). With the intersection of **benchmarks** and goals for the nation's health (*Healthy People 2020*), the action plan for improving the state's health (*Virginia's Plan for Well-Being*), and the support of Goochland County community members and key stakeholders, the time was right to begin the **assessment** and improvement process at the local level in Goochland County to make a meaningful impact through the community's connections and partnerships.

The Chickahominy Health District's Population Health Manager, Caitlin Hodge, served as the planner and facilitator of the CHA process. A CHA Steering Committee was formed to navigate the process and represent government agencies, local non-profit organizations, a local free clinic (GoochlandCares), places of worship, the public school system, and the local college, among others. The Chickahominy Health District would like to acknowledge Taylor Paschal for her work drafting and editing this report, as well as, Mesa Willis, Kate Marling, and Brittany Lewis, who focused their internship experiences on the analysis of this report's qualitative data. A list of the CHA Steering Committee members is included below. This list includes those who attended and contributed to at least one of the eight official meetings.

Alan Crouch J. Sargeant Reynolds Community College	Jennifer Waggener Goochland County Public Schools	Kent Duffey Goochland County Public Schools
Beth Moore Habitat for Humanity	Jessica Kronberg Goochland County Parks & Recreation	Kimberly Jefferson Goochland County Department of Social Services
Carol Dunlap		·
GoochlandCares	JoAnn Hunter	Lisa Sollot
Carolyn McKann Virginia Prescription Monitoring Program	Goochland County Planning & Community Development	Chickahominy Health District Lisa Melton Community Member
Eddie Ferguson Goochland County Fire & EMS	Joanna Cirillo Chickahominy Health District	Mills Jones Goochland County
Elizabeth Anne Brockett Goochland-Powhatan Community Services Board	Kelly Lindquist Goochland Family YMCA	Office of Children's Services Nancy Burton Luck Stone Corporation

Nancy Davis

Chickahominy Health District

Paul Drumwright

Goochland County Administrator's Office

Penny Jordan

Senior Connections

Robin Pentecost

Goochland-Powhatan Community Services Board

Sally Graham

GoochlandCares

Cheryl Sims

Concord Fellowship Baptist

Church & New-Life Community Outreach

Sara Morris

Senior Connections

Tom Franck

Chickahominy Health District

Wendy Hobbs

Community Member

The tools used to facilitate the CHA process were drawn from the National Quality Forum's Improving Population Health by Working with Communities: Action Guide 3.0 and the National Association of County & City Officials' (NACCHO) Mobilizing for Action through Planning and Partnerships. The Goochland County CHA Steering Committee began meeting monthly in March 2018 and held its last meeting in November 2018. A meeting was not held in September 2018. Committee members completed an evaluation of the meetings' facilitation and activities every other meeting. The activities for each CHA Steering Committee meeting are described in Appendix B.

Health Rankings and Scores

There are many outlets in the public and private sector that provide health rankings and scores at the County level. For the purposes of this CHA, County Health Rankings & Roadmaps, Virginia Department of Health's Health Opportunities Index, and AARP's livability index were used to highlight focus areas in Goochland County. In 2018, County Heath Rankings & Roadmaps, a Robert Wood Johnson Foundation Program, ranked Goochland County 14th out of 133 jurisdictions in Virginia on its health outcomes (with 1 being the best possible ranking) (Health Rankings, 2018). This ranking is considered a snapshot of the community's health outcomes by taking into account data related to length of life (ranked 35th) and quality of life (ranked 4th). For its health factors, Goochland County received an even higher ranking of 10th out of 133 jurisdictions. Health factors include data related to health behaviors (ranked 19th), clinical care (ranked 3rd), social and economic factors (ranked 10th), and physical environment (ranked 64th) (Health Rankings, 2018). The County Health Rankings Model, Figure 2, visualizes the health factors that influence health outcomes (Health Rankings, 2018).

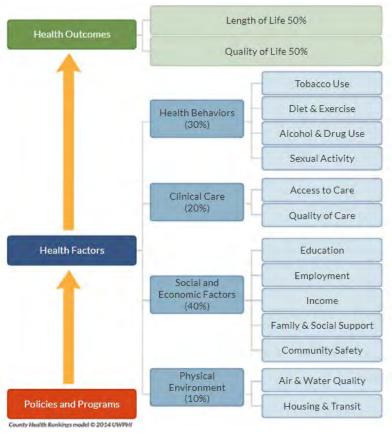


FIGURE 2. COUNTY HEALTH RANKINGS MODEL

Areas of strength in Goochland County that contributed to the rank of 10th for health factors included, but are not limited to: percentage of ninth-grade cohort that graduate in four years (93% in Goochland compared to Virginia's average of 86%), number of reported violent crime offenses per 100,000 population (75 in

Goochland compared to Virginia's average number of 194), percentage of population under age 65 without health insurance (5% in Goochland compared to Virginia's average of 10%), and number of newly diagnosed chlamydia cases per 100,000 population (314.6 in Goochland compared to Virginia's average of 424.5) (Health Rankings, 2018). Areas that need improvement include, but are not limited to: percentage of driving deaths with alcohol involvement (52% in Goochland compared to Virginia's average of 31%), ratio of the population to mental health providers (1,420 people for everyone 1 mental health provider in Goochland compared to Virginia's average of 680 people for everyone 1 mental health care provider), and the percentage of the workforce that drives alone to work (86% in Goochland compared to Virginia's average of 77%) (Health Rankings, 2018).

Another way to rank the health of communities was developed by the Virginia Department of Health's (VDH) Office of Minority Health and Health Equity. They launched an interactive online mapping tool of community health influences called the **Health Opportunities Index (HOI).** The HOI consists of 13 **indicators** based on literature reviews of the social determinants of health, which are grouped into four profiles: Economic, Consumer, Community Environmental, and Wellness Disparity (Virginia HOI, n.d.). Goochland County's overall HOI is 56 out of 134 (when calculated in 2017 based on 2015 data) (see Appendix C for a diagram illustrating Goochland's scores) (Virginia HOI, n.d.). A score closer to 1 means there is a greater opportunity to be healthy in the community, whereas a score closer to 134 means the community has fewer opportunities to be healthy. The four profiles with a description of the data used to calculate them, and Goochland County's corresponding score, are listed below. The profiles illustrate that Goochland County provides the greatest opportunities to be healthy related to Consumer Opportunity Profile measures and fewest opportunities to be healthy related to Wellness Disparity Profile measures. Please see the Health Opportunities Index Profile presentation in Appendix C. The HOI is updated by VDH every two years with the next update scheduled for the summer of 2019.

- Economic Opportunity Profile = 91/134
 - Measure of economic opportunities available within a community and accounts for employment accessibility, income inequality, and job participation (Virginia HOI, n.d.)
- Consumer Opportunity Profile = 5/134
 - Measure of consumer resources available within a community and accounts for affordability (income spent on housing and transportation), education, food accessibility, and the Towsend Material Deprivation Index (Virginia HOI, n.d.)
- Community Environmental Profile = 86/134
 - Measure of the natural, built, and social environment and accounts for air quality, population churning, population-weighted density, and walkability (Virginia HOI, n.d.)
- Wellness Disparity Profile = 123/134
 - Measure of the disparate access to health services within a community and accounts for access to care and the segregation index (includes measures of both community diversity and the distance between communities with different racial or ethnic profiles) (Virginia HOI, n.d.)

The American Association of Retired Persons (AARP) has developed a Livability Index, as seen in Appendix E, that rates the overall livability of a selected County on a scale from 0 to 100, with 100 being the best possible score (AARP, n.d.). Communities are scored by comparing them to each other, making the average

community score 50 (AARP, n.d.). Goochland County's total Livability Index score is 43, therefore, by AARP's scoring criteria, this score is below average compared to other counties (AARP, n.d.). The seven categories that contributed to the total score are: housing (31), neighborhood (40), transportation (28), environment (40), health (52), engagement (60), and opportunity (50) (AARP, n.d.). Goochland County scored the highest in the category of engagement, which takes into account civic and social involvement; including but not limited to opportunities for civic involvement and voting rates. The County scored the lowest in the category of transportation, which takes into account the safety and convenience of transportation options; including but not limited to the frequency of local transit service, ADA-accessible stations/vehicles, household transportation costs, and the fatal crash rate per year (AARP, n.d.). The Livability Index was designed to be an interactive online tool, which pulls from multiple data sources.

Community Assets

One of the activities in the first meeting of the CHA Steering Committee was to identify the strengths and community resources available throughout Goochland County. This was accomplished by splitting into groups to brainstorm and write lists of all organizations, resources, people, and places that contribute to making Goochland County a healthy place to live, work, and play. The asset lists were then categorized by six dimensions of wellness: social/spiritual, mental/emotional, physical, environmental/neighborhood, education/occupation, and economic. The six dimensions are defined, as follows:

Social/Spiritual: Opportunities to connect with other people and establish/maintain positive relationships with family, friends, community members and co-workers. Having a personal way (or group of people) to help establish a sense of peace and harmony in our lives and develop congruency between values and actions (Wellness, 2014).

Mental/Emotional: Assistance with coping related to the challenges life can bring. The ability to acknowledge and share feelings of anger, fear, sadness or stress; hope, love, joy and happiness in a productive manner. Emotional wellness encompasses optimism, self-esteem, and self-acceptance (Wellness, 2014).

Physical: Encompasses a variety of behaviors/access to services that are good for your body including adequate exercise, proper nutrition and abstaining from potentially harmful behaviors such as drug and alcohol abuse. It includes identifying/seeking care for symptoms of disease, getting regular medical checkups, and protecting yourself from injuries and harm (Seven Dimensions of Wellness, n.d.).

Environmental/Neighborhood: Services that improve/maintain the quality of the air, water, and the land that surrounds us. Opportunities to make positive impacts on the quality of our environment, be it our homes or communities, as well as the safety/security of the places you spend your time (Seven Dimensions of Wellness, n.d.).

Education/Occupation: Getting personal fulfillment from our jobs or career fields while still maintaining balance in our lives. Opportunities to open our minds to new ideas and experiences that can be applied to personal decisions and community betterment. The desire to learn new concepts, improve skills and seek challenges in pursuit of lifelong learning (Wellness, 2014).

Economic: A financially well person is aware of their financial state and budgets, saves and manages finances in order to achieve realistic goals; has opportunities and skills to obtain a steady income that provides a sense of security and independence (Student Wellness Center, 2018).

The committee members identified 52 assets; each asset could be placed in multiple dimensions of wellness. Placement in the dimensions of wellness was based on the asset's mission, programs, and/or perceived current community impact rather than quality of impact. Multiple revisions were made to the asset list and the last draft was agreed upon by the CHA Steering Committee using an online survey. To see a full listing of the assets and how they were categorized, please refer to Appendix F.

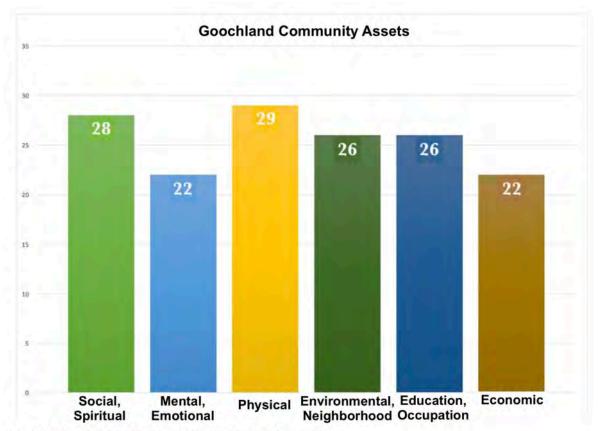


FIGURE 3. NUMBER OF ASSETS FOR EACH DIMENSION OF WELLNESS

While Goochland County community assets contribute to all dimensions of wellness relatively similarly, Figure 3, Number of Assets for Each Dimension of Wellness, illustrates that the dimensions of physical wellness (29) and social/spiritual wellness (28) have the greatest number of assets. The dimensions of mental/emotional (22) and economic (22) have the lowest number of community assets in Goochland County. Without hypothesizing quality, it appears as though all dimensions of wellness have resources to provide support for members of the community.

The Cooperative Extension Office, local government, and the public school system were identified as assets that contribute to all six dimensions of wellness in Goochland County. Identifying community assets allowed the CHA Steering Committee to determine which types of resources are currently prioritized in the community and which types may need to be expanded within Goochland County. The community assets list and presentation are living documents that should be updated annually. Following the identification of community assets, the CHA Steering Committee reviewed quantitative data related to a number of factors impacting community health in Goochland County. These data are in the following section of the report.

Quantitative Data Review

During the first CHA Steering Committee meeting, committee members participated in an activity to highlight potential health information that could be explored as part of the quantitative data review of Goochland County. Committee members were given a chart of demographic, socioeconomic, physical environment, health behavior, health outcomes, and health care metrics (created and recommended for use by the **CDC**) to choose from; they could also add to the chart other topics/information for review during the CHA process. The quantitative data chosen by the committee members are described below.

Demographics

Population Size & Characteristics

Between 2011 and 2015, it is estimated that 21,721 people live in the 281.42 square mile area of Goochland County, which is a 29.1% increase in population size since 2000 (U.S. Census Bureau American Community Survey, 2015). This is greater than the increase seen in Virginia (13.0%) and the United States (9.8%) during that same time period (U.S. Census Bureau Decennial Census, 2010). Population density per square mile can be seen in Figure 4. Shifts in population size over time can impact the utilization and availability of community resources. Although there is population growth, the latest data shows that Goochland County is nearly 97% rural.

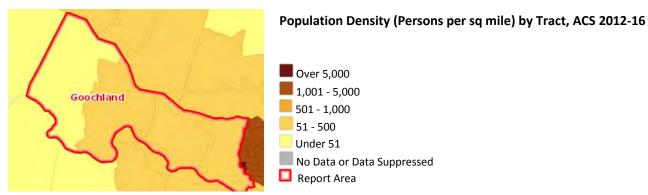


FIGURE 4. POPULATION DENSITY

Race & Ethnicity

The majority, 78.8%, of people living in Goochland County identified as White. Those who identified as Black or African American alone represented 17.8% of the County. Those who identified as having two or more races represented 1.7% of the population; and even fewer residents identified as being Asian alone (1.3%) in Goochland County (Community Commons, 2018).

Age & Gender Identity

As of 2015, less than 4% of Goochland County's population consisted of persons under 5 years of age compared to Virginia (6.2%) and the United States (6.3%). Children, between 5 and 17 years of age, made up 15.7% while young adults, between 18 and 24 years of age, made up only 6.0% of the County's population.

Adults 25 through 34 were 8.4% and adults 35 through 44 years of age were 12.0% of the County's population. Higher than what is seen in Virginia and the United States, 17.9% of the County's population consisted of persons 45 to 54 years of age and 17.2% of persons 55 to 64 years of age, respectively. Adults over 65 years of age made up the largest group, 18.5%, of the Goochland County population. The median age in Goochland County, 47.2 years of age, is nearly 10 years older than the median age in Virginia, 37.8 years of age, and the United States, 37.7 years of age. According to the Greater Richmond Age Wave Coalition, older adults represent the fastest growing segment of the United States population and by 2030, the number of people in the Greater Richmond Area age 65 and older and those age 85 and older will more than triple (Greater Richmond Age Wave, n.d.). There are nearly as many males, 49.4%, as there are females, 50.6%, across all ages of community members (Community Commons, 2018). Data used in this report related to gender were limited to male or female, which excluded a broader range of gender identities. The U.S. Census Bureau and U.S. Bureau of Labor released a report in April 2018 describing research completed with focus groups to explore the feasibility of adding sexual orientation and gender identity questions to the Current Population Survey, but no conclusions have been made related to including a range of gender identities as answer choices on future surveys (Holzberg et al., 2018).

Veteran Status

Veteran status is defined as the population age 18 and older that served, but is not currently serving, on active duty in the U.S. Army, Navy, Air Force, Marine Corps, or the Coast Guard, or that served in the U.S. Merchant Marine during World War II. **Veterans** are a multifaceted population with a distinct culture and need from health care professionals. Veterans experience mental health disorders, substance use disorders, post-traumatic stress, and traumatic brain **injury** at disproportionate rates compared to civilians. A community must promote civilian transition and meet the complex needs of the veteran population (Olenick et al., 2015). According to the U.S. Census Bureau, from 2013 to 2017 there were 1,580 veterans residing in Goochland County, which represents about 7% of the County's population. In the state of Virginia, there are over 688,000 veterans, which represents about 8% of the State's population (U.S. Census Bureau, n.d.). Among veterans in Goochland County, 95.4% are male and 54.8% are 65 years of age or older (American Community Survey, 2016).

Households & Housing

The term family household means any housing unit in which the householder is living with one or more individuals related to him or her by birth, marriage, or adoption. There were 8,148 total households, including 6,316 family households, in Goochland County between 2012 and 2016. Visualized in Figure 5, nearly 27% of total households consist of families with children, under 18 years of age. The percentage of single-parent households dropped from 23.4% to 17.6% between 2012 and 2016 (American Community Survey, 2016).

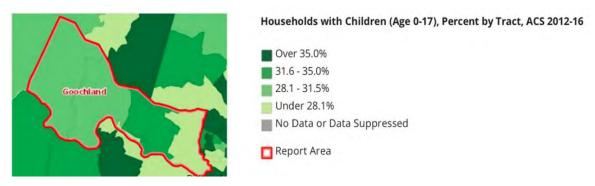


FIGURE 5. HOUSEHOLDS WITH CHILDREN

Socioeconomic Factors

Median Family Income

This **indicator** reports median family income based on the latest 5-year American Community Survey estimates. Family income includes the incomes of all family members age 15 and older. As shown in Figure 6, the median family income for Goochland County (\$96,111) is greater than Virginia (\$80,068) and the United States (\$67,871). Households who identify as Asian report the highest median family income (\$156,842) compared to White households (\$104,510). Households who identify as Black or African American had the lowest median family income (\$51,023) (American Community Survey, 2016).

	Goochland County	Virginia	United States	Median Family Income
Total Family Household	\$6,310	\$2,067,942	\$77,608,829	
Average Family Income	\$140,863	\$105,488	\$90,960	0 20000
Median Family Income	\$96,111	\$80,068	\$67,871	Goochland County, VA (96,111) Virginia (80,068)
CLIDE 6 MEDIAN FAMILY	INCOME			United States (67,871)

FIGURE 6. MEDIAN FAMILY INCOME

Population Below 100% of the Federal Poverty Level

Poverty is considered a key driver of health status. In Goochland County, 5.7% or 1,163 individuals are living in households with income below the Federal Poverty Level (FPL) (American Community Survey, 2015). This indicator is relevant because poverty creates barriers to accessing health services, healthy food, and other resources. The percent of the population living in poverty in Goochland County is low (5.7%) compared to Virginia (11.5%) and the United States (15.5%).

Children in Poverty

The effects of poverty on a community can also be measured by the number of people under age 18 living in a household whose income is below the poverty level. The U.S. Census Bureau defines poverty with a set of money income thresholds that vary by family size and composition. Children in poverty captures an upstream measure of poverty that assesses both current and future health risks (U.S. Census Bureau, n.d.).

Children in poverty may experience lasting effects on academic achievement, health, and income into adulthood. In 2013, the percentage of people under age 18 living in poverty in Goochland County was ten percent, which is 385 children. This is less than the 16 percent of people under age 18 living in poverty throughout Virginia that same year (County Health Rankings, 2015).

Population Below 200% of the Federal Poverty Level

Families who earn more than the federal poverty level may still be eligible for federal agency assistance and program participation (MPH@GW, 2018). According to the American Community Survey as of 2016, there are 3,353 community members at or below 200% of the Federal Poverty Level in Goochland County. This accounts for 16.2% of the County population (Community Commons, 2019). As seen in Figure 7, the most western district of Goochland has the highest percentage of population living at or below 200% of the Federal Poverty Level.

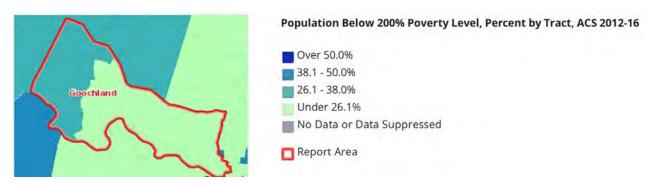


FIGURE 7. POPULATION BELOW 200% POVERTY LEVEL

Crime

For the purposes of this report, crimes include murder, manslaughter, kidnapping, forcible sex offenses, robbery, aggravated assault, simple assault, arson, extortion, burglary, larceny, motor vehicle theft, counterfeiting, fraud, embezzlement, stolen property, vandalism, drug offenses, non-forcible sex offences, pornography, gambling, prostitution, bribery and weapon law violations (Virginia Department of State Police, 2016). According to United Way of Greater Richmond and Petersburg: Indicators of Community Strength, 2017-2018, Goochland County has a low crime incident rate per 1,000 residents compared to the regional and state rates. As seen in Figure 8, Goochland County has seen a fluctuating, yet decreasing crime incident rate between 2010 and 2016, ranging from 18.9 to 23.3 (VA Dept. of State Police, 2016).

Goochland	Region*	Virginia
23.3	61.3	53.6
18.9	55.0	55.2
21.4	55.8	46.8
	23.3 18.9	23.3 61.3 18.9 55.0

FIGURE 8. CRIME INCIDENT RATE

^{*}GREATER RICHMOND AND PETERSBURG REGION INCLUDES CHARLES CITY, CHESTERFIELD, COLONIAL HEIGHTS, DINWIDDIE, GOOCHLAND, HANOVER, HENRICO, NEW KENT, PETERSBURG, POWHATAN, AND RICHMOND

Child Abuse & Neglect

Child abuse and neglect is a component of **Adverse Childhood Experiences (ACEs).** ACEs, including abuse, neglect and family dysfunction, has been proven to inhibit healthy brain development in children and to have long-term and long-lasting ramifications for individuals and families—ramifications that impact the entire community. The effects of ACEs touch all health and human services systems and the effects prevail across the lifespan (Virginia Department of Social Services, 2016). For the purposes of this report, the rate of child abuse and neglect indicates the prevalence of ACEs and respective effects on the community. According to the United Way of Greater Richmond and Petersburg: Indicators of Community Strength, 2017-2018, Goochland County's rate of child abuse and neglect (and number of cases) per 1,000 children under age 18 has been decreasing between 2012 and 2016, as seen in Figure 9. In 2016, the rate (1.0) and number of cases (4) found in Goochland County is lower than that found throughout the region and the state (VA DSS, 2016).

Year	Goochland Rate (# of cases)	Region* Rate (# of cases)	Virginia
2012	1.9 (8)	1.2 (313)	2.2 (4,031)
2014	1.9 (8)	1.2 (289)	2.2 (4,180)
2016	1.0 (4)	1.3 (316)	2.1 (3,967)

Figure 9. Child Abuse & Neglect Rate

PALS-K Benchmarks

PALS-K stands for Phonological Awareness Literacy Screening for Kindergarten. Fall PALS-K benchmarks help schools identify kindergarten students who are performing below developmentally appropriate levels on fundamental literacy skills and need additional instruction (PALS Office, 2016). According to the United Way of Greater Richmond and Petersburg: Indicators of Community Strength, 2017-2018, Goochland County has had higher percentages of kindergarteners meeting fall PALS-K benchmarks compared to the region and Virginia, visualized as Figure 10. Goochland County, the region, and the state have all seen a decrease in the percentage of kindergarteners meeting fall PALS-K benchmarks between 2013 and 2016 (PALS Office, 2016).

Year	Goochland (%)	Region (%) *	Virginia (%)
2013	91.8%	86.7%	87.5%
2014	88.0%	85.8%	87.1%
2015	86.9%	85.0%	86.2%
2016	86.0%	84.6%	85.4%

FIGURE 10. PERCENT OF KINDERGARTENERS MEETING FALL PALS-K BENCHMARKS

^{*}GREATER RICHMOND AND PETERSBURG REGION INCLUDES CHARLES CITY, CHESTERFIELD, COLONIAL HEIGHTS, DINWIDDIE, GOOCHLAND, HANOVER, HENRICO, NEW KENT, PETERSBURG, POWHATAN, AND RICHMOND

^{*}GREATER RICHMOND AND PETERSBURG REGION INCLUDES CHARLES CITY, CHESTERFIELD, COLONIAL HEIGHTS, DINWIDDIE, GOOCHLAND, HANOVER, HENRICO, NEW KENT, PETERSBURG, POWHATAN, AND RICHMOND

High School Graduation Rate

Visualized in Figure 11, 88.8% of students in Goochland County are receiving their high school diploma within four years (National Center for Education Statistics, 2009). This is greater than the Healthy People 2020 target of 82.4%. This indicator is relevant because research suggests education is one the strongest predictors of health (Community Commons, 2019). Within Goochland County there are 1,612 persons aged 25 and older without a high school diploma (or equivalency) or higher. This represents 10.0% of the total population aged 25 and older compared to Virginia (11.7%) and the United States (13.4%) (American Community Survey, 2015).

	Goochland County	Virginia	United States	On-Time Graduation Rate
Average Freshman Base Enrollment	206	101,607	4,024,345	
Estimated Number of Diplomas Issued	183	79,651	3,039,015	0 100%
On-Time Graduation Rate	88.8	78.4	75.5	Goochland County, VA (88.8%) Virginia (78.4%)
FIGURE 11. ON-TIME GRADUA	ATION RATE			United States (75.5%)

Unemployment

The labor force, defined as the number of community members over the age of 18 who are able to work, in Goochland County is 11,098 as of 2018. The unemployment rate defines the percentage of adults over the age of 18 who are able to work and seeking employment. With an unemployment rate of 3.0%, 332 community members who are able to work were unemployed as of August 2018. Figure 12 shows that Goochland County has a lower unemployment rate than Virginia (3.1%) and the United States (4.0%) (Community Commons, 2019).

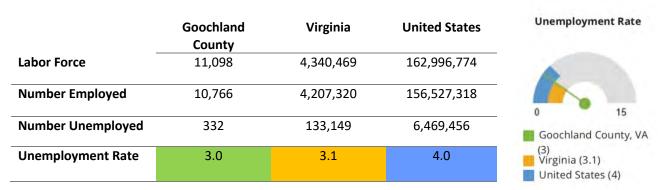


FIGURE 12. UNEMPLOYMENT RATE METER

Population with a Disability

This indicator reports the percentage of the total population with a disability. In 2015, 11.7% of the Goochland County population lived with a disability, which is similar to the percentage in Virginia (11.2%), but lower than the percentage in the United States (12.4%). As shown in Figure 13, there is a higher density of population, 15.1 to 18.0%, with a disability residing in the most western part of Goochland County.



FIGURE 13. DISABLED POPULATION

Disabled Population, Percent by Tract, ACS 2012-16

Over 18.0%

12.1 - 15.0% Under 12.1%

No Data or Data Suppressed

Report Area

Physical Environment

Air Quality-Ozone

Air quality is a relevant health indicator as poor air quality contributes to respiratory issues and overall poor health. Air quality can be measured as a percentage of days per year with ozone (O3) levels above the National Ambient Air Quality (NAAQ) Standard of 75 parts per billion (ppb). Visualized in Figure 14, Goochland County had 0.6 (0.24%) days that exceeded the emission standard of 75 ppb in the year 2012. This is lower than state-level (0.76%) and national-level (1.2%) indicating good air quality in Goochland County. The most eastern part of Goochland County had a higher percentage of days above the NAAQ Standard compared to the rest of the County.

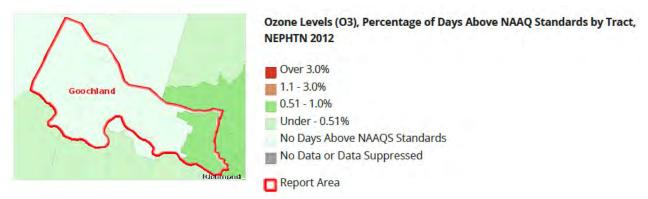


FIGURE 14. OZONE LEVELS (O3)

Air Quality-Particulate Matter

Air quality can also be measured as a percentage of days with particulate matter 2.5 levels above the NAAQ Standard of 35 micrograms per cubic meter per year. In Goochland County, 0% of days exceeded the emission standard based on particulate matter compared to Virginia (0.08%) and the United States (0.10%). This also indicates good air quality in Goochland County.

Water Quality- County System

Water quality is measured by the number or presence of drinking water violations, which are self-reported (Health Rankings, 2017). With only two values: yes or no, a "yes" indicates that at least one community drinking water system in the County received at least one health-based drinking water violation during the

specified timeframe; a "no" indicates that there were no health-based drinking water violations in any community drinking water system during the timeframe. In 2016, Goochland County had no drinking water violations (Health Rankings, 2017).

Water Quality-Well Water

The Virginia Household Water Quality Program provides affordable water testing and education to community members who rely on wells, springs or cisterns for their household water supply. The program is voluntary and there is a testing fee. According to the Virginia Cooperative Extension, drilled wells are the most common water system reported in Goochland County between 2010 and 2016. Household water quality is influenced by contaminants and treatment. Common contaminants found from samples in Goochland County include total coliform bacteria, low sodium, lead, copper, iron, and manganese. In Appendix G, a bar chart visualizes the percentages of contaminants found in household water supply samples taken in Goochland County. Total coliform bacteria was found in 42% of the samples, which is an indicator of surface water entering wells and possibly other types of bacteria present. Water system treatment can take many forms including, but not limited to: sediment filters, softeners, and iron removal. In Goochland County, 56.0% of water testing participants reported having a treatment installed with sediment filters most commonly used (VA Cooperative Extension, 2018).

Food Access

According to the U.S. Department of Agriculture, Economic Research Service, Food Access Research Atlas, 2015, 10.1% of the Goochland County population lives in an area with low food access, also known as a food desert. A food desert is defined as a low-income census tract where a substantial number of residents has limited access to a supermarket or large grocery store that offers a variety of food items (Feeding America, 2014). The percentage of Goochland County residents in a low food access area is less than that seen in Virginia (20.4%) and the United States (22.4%). While the Goochland County percentage (10.1%) is low, it is important to look at the geographic distribution of food access in the County. Food access is a relevant indicator because it highlights subpopulations and geographies that are potentially facing **food insecurity** (Community Commons, 2019). The census tracts that is considered to have the highest percentage of population living in a food desert is illustrated in Figure 15. Fifty percent or more of the population living in the most western part of Goochland County has limited food access. It is important to note that the data available for this indicator is from 2015; since then, new grocery stores and food markets may have been built in the area.



FIGURE 15. LOW FOOD ACCESS

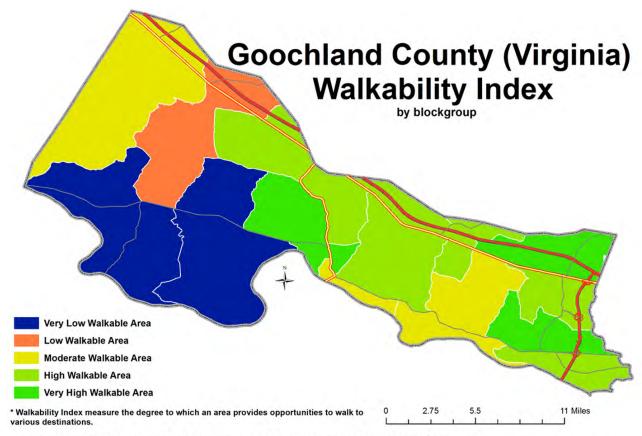
Housing-Substandard or Sever Housing Problems

Owner and renter-occupied housing units with at least one of the following conditions is considered substandard housing: 1) lacking complete plumbing facilities, 2) lacking complete kitchen facilities, 3) selected monthly owner costs as a percentage of household income greater than 30%, and/or 4) gross rent as a percentage of household income greater than 30% (Community Commons, 2019). This criterion is used to identify homes where the quality of living could be considered substandard due to low-quality housing and the lack of basic necessities. Figure 16 uses data from the U.S. Census Bureau American Community Survey, 2012-2016, to compare Goochland County with Virginia and the United States. In the County, there were 21.0% of housing units with one or more substandard conditions, which is lower than the percentage in Virginia (31.2%) and the United States (33.8%). Severe Housing Problems is a metric used by County Health Rankings to capture issues beyond substandard conditions. Severe Housing Problems include incomplete kitchen facilities, incomplete plumbing facilities, severe overcrowding (more than 1.5 persons per room), and/ or severe cost burden (monthly housing costs that exceed 50% of monthly household income). Between 2010 and 2014, 12% of Goochland households met this definition of Severe Housing Problems compared to 15% of households in the state of Virginia during the same timeframe (County Health Rankings, n.d.). Housing that is affordable, stable and safe can lead to better health outcomes because it limits exposure to environmental toxins, alleviates crowding, and makes more resources available to pay for health care and healthy foods (Magbool et al., 2015).

Total Occupied Housing Units	Goochland County 8,177	Virginia 3,090,178	United States 117,716,237	Percent Occupied Housing Units with One or More Substandard Conditions
Occupied Housing Units with	1,714	962,468	39,729,263	Conditions
One or More Substandard				
Conditions				
Percent Occupied Housing	21.0%	31.2%	33.8%	
Units with One or More				0 50%
Substandard Conditions				Goochland County, VA
FIGURE 16. PERCENT OCCUPIED HOUS	SING UNITS WITH ONE OR	More Substan	NDARD CONDITIONS	(20.96%) Virginia (31.15%) United States (33.75%)

Walkability

A **walkability** index serves as a measurement and visualization of the proximity and connectivity between destinations. While the term refers to walking specifically, characteristics of walkable areas support other forms of transportation include cycling. The Virginia Department of Health Office of Health Equity created the Goochland County Walkability Index by blockgroup, as shown in Figure 17, based on the components of density, diversity, and connectivity. The southwest corner of Goochland County is considered a "very low walkable area," whereas areas within the central and eastern blockgroups are considered "high to very high walkable areas."



Density - Higher levels of employment are observed in areas with higher development of urban industry. Thus, a nearby population is expected to work at these industries. These industries/jobs are easily accessible by walking, as they are expected to be close to residential areas. Diversity - A multifunctional environment is expected to reduce travel times between origin and destination, and to improve proximity, which in turn promotes physically active means of transportation.

Connectivity - A high connectivity is expected to ease the transportation and travel between places, as a well-connected network is expected to offer shorter and many alternate routes, which in turn affects walkability positively.

FIGURE 17. WALKABILITY INDEX

Transportation

Transportation can affect a person's access to many essentials including, but not limited to food, health care services, employment, education, and social settings. There is no public transportation in Goochland County; therefore, personal vehicles are the predominant mode of transportation. According to County Health Rankings, 2012 to 2016, 86% of the Goochland County workforce drives alone to work compared to 77% throughout Virginia. Among workers who commute in their car alone the percentage that commute for more than 30 minutes is 48% in Goochland County and 39% in Virginia, respectively (County Health Rankings, n.d.). There are several transportation options offered to County residents (some are specifically for older adults and those with mobility impairments), including but not limited to: Acti Kare In-Home Care, Alliance Specialty Transport, Brooks LLC, Capital Area Partnership Uplifting People (CAP-UP), Dependacare Transportation, and Goochland Cares.

Internet Access

Internet Access is a relevant health indicator as poor access or no access to broadband internet service is a barrier to participation in digital communication and mobile health technologies (Bresnick, 2017). The Virginia Broadband Availability Map and Integrated Broadband Planning and Analysis Toolbox, Figure 18,

displays the underserved and unserved areas throughout Goochland County and neighboring communities, as of 2017 (Center for Geospatial Information Technology, n.d.). The red shading indicates unserved areas below or equal to 10 Mbps download and 1 Mbps upload. The yellow shading indicates underserved areas greater than 10 Mbps download and 1 Mbps upload and less than 25 Mbps download and 3 Mbps upload. Mbps, Megabits per second, is a unit of measurement for bandwidth, data transfer speed, and network transmissions. As Mbps increases, the quality and speed of internet service increases.



FIGURE 18. VIRGINIA BROADBAND AVAILABILITY MAP, 2017

Social Connectedness

According to the Corporation for National and Community Service, social connectedness refers to the extent to which Goochland County residents eat dinner with household members, see or hear from friends and family, talk with neighbors, and do favors for neighbors. On a scale from 0 to 2 (with higher values being better), Goochland averages 0.80 compared to the national average, 0.98 (Corporation for National and Community Service, 2011). Social connectedness supports overall well-being and can also influence health, directly and indirectly. A high perception of social connectedness has been associated with lower blood pressure rates, better immune responses, and lower levels of stress hormones (Wilder, 2012). Additionally, Lochner et al. found that higher levels of trust between residents are associated with lower mortality rates (2003). Indirectly, social connectedness promotes healthy social norms, connects residents with local services, provide emotional support, and increase health literacy within social networks (Kim et al., 2006). In contrast, social isolation indicates risk for poor health and reduced quality of life. According to the United Way of Grater Richmond and Petersburg: Indicators of Community Strength, 2017-2018, older adults who live alone can be at risk for social isolation and reduced quality of life, if there are co-existing conditions such as poverty, lack of transportation, illness, disease or disability. People who are socially isolated are more likely to suffer from depression and anxiety as well (United Way, 2018). Based on data from the U.S. Census Bureau, there has been a decrease in the percentage of adults, 65 years of age and older, living alone in the County. As seen in Figure 19, the percentage of older adults living alone in Goochland County is lower than that seen throughout the region and the state, but the number of older adults living alone has increased due to the population growth.

Year(s)	Goochland Percent (# of cases)	Region* Percent (# of cases)	Virginia Percent (# of cases)
2000	19.8% (410)	28.4% (30,438)	27.6% (318,320)
2006-2010	18.0% (584)	28.1% (36,151)	26.7% (260,682)
2011-2015	15.3% (616)	28.9% (42,521)	26.1% (287,060)

Figure 19. Social Isolation: Older Adults (65+) Living Alone

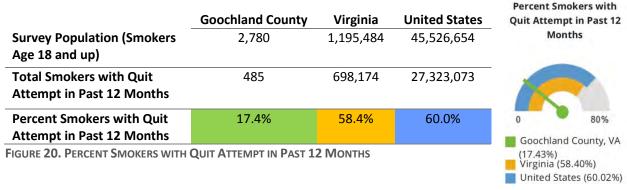
Recreation

Recreational facilities and parks support a healthy lifestyle by providing a safe place for physical activity and community events. Goochland County has several public and private facilities that support recreation, for example: Goochland Sports Complex, Hidden Rock Park, Leakes Mill Park, Matthews Park, Reynolds Recreation Complex, Tucker Park at Maidens Crossing, Central High School Cultural and Educational Complex, and the Goochland Family YMCA.

Health Behaviors

Tobacco - Current Smokers & Quit Attempts

In Goochland County, an estimated 2,780 adults age 18 years and older self-report smoking cigarettes some days or every day, according to CDC's Behavioral Risk Factor Surveillance System, 2011-2012 (Community Commons, 2019). Tobacco use is linked to cancer and cardiovascular disease, which are leading causes of death among Americans (Community Commons, 2019). As shown in Figure 20, an estimated 17.4% of adult smokers in Goochland County attempted to quit smoking for at least 1 day in the past year, which is significantly lower than the percent who attempted quitting in Virginia (58.4%) and the United States (60.0%). While the use of ecigarettes and vaping are behaviors of interest, this data was unavailable at the County level.



Physical Inactivity

According to the CDC's National Center for Chronic Disease Prevention and Health Promotion, 2013, within Goochland County, 19.9% of adults aged 20 years and older self-reported no leisure time physical activity

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based on the question: "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?" Physical inactivity can contribute to many health issues including obesity and poor cardiovascular health. As illustrated in Figure 21, Goochland County has a lower percentage of the population who report no leisure time physical activity than compared to Virginia (21.0%) and the United States (21.8%) (Community Commons, 2019).

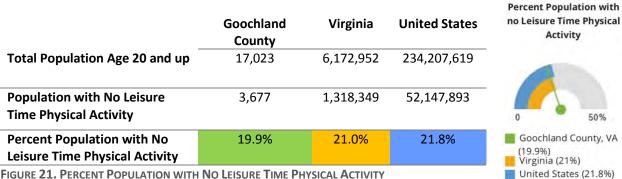
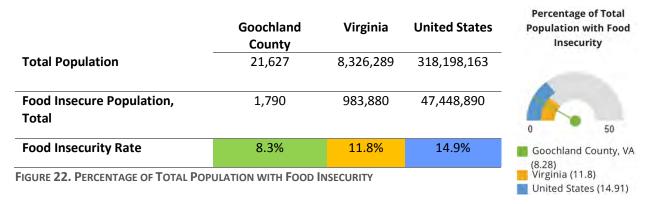


FIGURE 21. PERCENT POPULATION WITH NO LEISURE TIME PHYSICAL ACTIVITY

Food Insecurity-Rate

This indicator is an estimated percentage of the population that experience food insecurity at some point during the report year. Food insecurity can be defined as the household-level economic and social condition of limited or uncertain access to adequate food (Feeding America, 2014). In 2014, Feeding America reports that there were 1,790 food insecure people in Goochland County, which is 8.3% of the population. This is lower than the food insecurity rate seen at the state-level (11.8%) and the national-level (14.9%), as seen in Figure 22 (Community Commons, 2019).



Food Insecurity-Children

Among the population that experience food insecurity, children are especially vulnerable to the effects of limited or uncertain access to adequate food. The child food insecurity rate estimates the percentage of the population under the age of 18 that experience food insecurity at some point during the report year (Feeding America, 2014). Feeding America reports that there were 530 food insecure children in Goochland County, which is 12.3% of the population, in 2014. This is lower than the child food insecurity rate seen at the state-level (16.7%) and the national-level (23.5%) (Community Commons, 2019).

Food Insecurity-Population Ineligible for Assistance

Measuring food insecurity among the population ineligible for assistance refers to the estimated percentage of the total population and the population under the age of 18 that experienced food insecurity at some point during the report year, but are ineligible for state or federal nutrition assistance programs. Assistance eligibility is determined by household income relative to the maximum income-to-poverty ratio for assistance programs including, but not limited to **Supplemental Nutrition Assistance Programs (SNAP), Supplemental Nutrition Program for Women, Infants and Children (WIC),** school meals, Commodity Supplemental Food Program (CSFP) and The Emergency Food Assistance Program (TEFAP). In Goochland County, 56.0% of the food insecure population and 47.0% of the food insecure children were ineligible for assistance in 2014. These percentages are higher than what is seen in Virginia and the United States (Community Commons, 2019).

Alcohol Consumption

Based on the CDC's Behavioral Risk Factor Surveillance System (BRFSS) Health Indicators Warehouse, 2006-2012, 13.9% of adults ages 18 years and older self-reported drinking excessively in Goochland County. This is lower than what is reported in Virginia (15.9%) and the United States (16.4%), as seen in Figure 23. According to BRFSS, excessive drinking, also known as heavy alcohol consumption, is defined as more than two drinks per day on average for men and more than one drink per day on average for women. This indicator is relevant because heavy alcohol consumption is associated with health issues like cirrhosis, some cancers, and untreated mental health issues (Community Commons, 2019). The effects of alcohol in a community can also be measured by the number of driving deaths with alcohol involvement. According to County Health Rankings, there were 9 alcohol-impaired driving deaths out of 25 total driving deaths, 36%, in Goochland County between 2009 and 2013 compared to 31% throughout the state of Virginia (County Health Rankings, 2015). In correspondence with the Goochland County Office of Children's Services Director, the Children's Services Act reported that 12 juveniles, individuals under the age of 18, went before the Court on alcohol charges during the 2018 fiscal year.

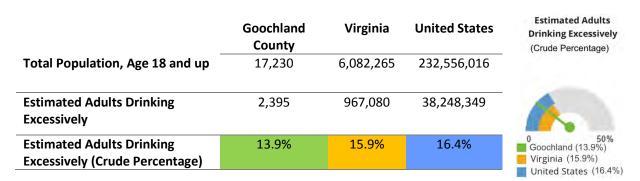


FIGURE 23. ESTIMATED ADULTS DRINKING EXCESSIVELY (CRUDE PERCENTAGE)

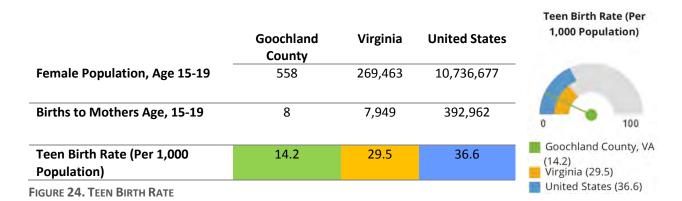
Pride Survey

In 2018, a Pride Survey Questionnaire was distributed to students attending Goochland High School. The survey asked a series of questions focused on perceptions and behaviors related to drugs and alcohol. As seen in Appendix H, there has been a downward trend in reported drug and alcohol use among high school students between 2007 and 2018. With the exception of marijuana use, Goochland County ranks lower than the national average for student reporting the use of drugs and alcohol when examining the data across grade levels. There

has been a significant decrease in the percentage of students who reportedly smoked all or part of a cigarette in the past 30 days, dropping from 45.4% to 14.4% among 12th graders between 2007 and 2018. Unlike other self-reported substance use, e-cigarette use among high school students has increased. Perception of substance (tobacco, alcohol, marijuana, and prescription drug) availability is an important indicator, as students who perceive substances as fairly easy or easy to obtain are more likely to seek out the substances. Between 2007 and 2018 across all substances, the student perception of availability has decreased. For more detailed information on the survey results and a list of current school-based support and resources, see Appendix H.

Teen Births

This indicator reports the rate of total births to women age of 15-19 per 1,000 female population age 15-19. Teen pregnancy rates can be used as a social determinant of health as high rates of teen pregnancy may indicate the **prevalence** of unsafe sex practices. Hypertension, premature birth, low birthweight, and sexually transmitted diseases are health risks associated with teen pregnancy (CDC, n.d.). In Goochland County the teen birth rate was 14.2 in 2012, which is low compared to the state-level (29.5) and national-level (36.6) (Community Commons, 2019).



Immunizations

As of 2014, the Behavioral Risk Factor Surveillance Survey (BRFSS) reports that adults over the age of 18 in Goochland County have higher rates of immunizations when compared to Virginia overall. The percentage of adults who have received a tetanus shot since 2005 was 65.8% in Goochland County and 62.1% in Virginia. Thirty-five percent (35.0%) of adults in Goochland County have received a pneumonia shot compared to 30.7% throughout Virginia. Lastly, 48.8% of adults had a seasonal flu vaccine within the year, which is higher than Virginia (43.5%) (Community Commons, 2019).

HIV Screening

This indicator reports the percentage of adults, age 18 to 70, who self-report that they have never been screened for the human immunodeficiency virus, HIV. This indicator is relevant because engaging in preventive behaviors allows for early detection and treatment of health problems. People with HIV who are aware of their status can get treatment, reducing HIV-related illness and lowering the risk of transmitting HIV to others (CDC, 2019). In Goochland County, 58.1% of adults reported that they have never been screened for HIV which is similar to the percent in Virginia (57.6%) and the United States (62.8%), as seen in Figure 25 (Community Commons, 2019).

_	Goochland County	Virginia	United States	Percent Adults Never Screened for HIV
Survey Population, Age 18 and up	18,488	5,566,223	214,984,421	
Total Adults Never Screened for HIV	10,742	3,205,323	134,999,025	0 100%
Percent of Adults Never Screened for HIV	58.1%	57.6%	62.8%	Goochland County, VA (58.10%)
FIGURE 25. PERCENT ADULTS NEVER SCRE	ENED FOR HIV			Virginia (57.59%)United States (62.79%)

Dental Care Utilization

This indicator reports the percentage of adults over the age of 18 who self-report that they have not visited a dentist, dental hygienist or dental clinic within the past year. Dental care utilization can highlight a lack of access to preventive care, lack of health knowledge, insufficient provider outreach, and social barriers preventing utilization of services (Community Commons, 2019). According to the BRFSS, 2006-2010, the percent of adults with no dental exams in Goochland County (6.5%). This is low compared to the percent of adults with no dental exams in Virginia (24.4%) and the United States (30.2%) (Community Commons, 2019).

Health Status and Outcomes

In alignment with national and state data, the leading causes of death seen in Goochland County are cancer, heart disease, and stroke (VDH, 2013). This section will include **incidence** and mortality rates of cancer, heart disease, and stroke among other health status and outcome information.

Overweight & Obesity

Weight is an indicator of potential health issues. In Goochland County, 44.9% of adults age 18 and older self-report an overweight status, having a Body Mass Index (BMI) between 25.0 and 30.0. Additionally, 27.6% of adults age 20 and older self-report an obese status, having a BMI greater than 30.0, in Goochland County. While the percentage of individuals with a BMI greater than 30 in Goochland County, 27.6%, is in line with what is seen at state and national levels, the percentage of individuals with a BMI between 25-30 in Goochland County (44.9%) is higher than what is seen throughout Virginia (35.2%) and the United States (35.8%) (Community Commons, 2019).

Diabetes

Diabetes management is a relevant indicator because engaging in preventive behaviors allows for early detection and treatment of health problems among community members. Among Medicare Enrollees in Goochland County, 88.6% with diabetes had received a hemoglobin A1c test by a health care professional during an annual exam. A hemoglobin A1c test is a blood test which measures blood sugar levels. The percentage of patients tested in Goochland County is slightly higher than what is seen throughout Virginia (87.1%) and the United States (85.2%) (Community Commons, 2019).

High Blood Pressure

According to the CDC's Health Indicators Warehouse, U.S. Department of Health and Human Services, 2006 to 2012, 2,533 adults age 18 and older in Goochland County have been told by a doctor that they have high blood pressure or hypertension. The percentage of adults in Goochland County who have ever been told that they have high blood pressure or hypertension (14.7%) is lower that what is seen throughout Virginia (27.7%) and the United States (28.2%) (Community Commons, 2019).

Cancer Incidence

Cancer incidence rates are relevant because cancer is a leading cause of death across the Country. It is important to note that incidence rates can be influenced by the percentage of community members with health insurance, since having insurance can lead to more cancer screenings being performed.

Breast Cancer

This indicator reports the age-adjusted incidence rate (cases per 100,000 population per year) of females with breast cancer. According to State Cancer Profiles, 2009 to 2013, the breast cancer incidence rate was 99.7 compared to that seen in Virginia (125.5) and in the United States (123.4) (Community Commons, 2019).

Colon and Rectum Cancer

This indicator reports the age-adjusted incidence rate (cases per 100,000 population per year) of males and females with colon and rectum cancer. According to State Cancer Profiles, 2009 to 2013, the cancer incidence rate was 48.6 compared to that seen in Virginia (37.5) and in the United States (40.6) (Community Commons, 2019).

Lung Cancer

This indicator reports the age-adjusted incidence rate (cases per 100,000 population per year) of males and females with lung cancer. According to State Cancer Profiles, 2009 to 2013, the cancer incidence rate was 66.3 compared to that seen in Virginia (62.1) and in the United States (62.6) (Community Commons, 2019).

Prostate Cancer

This indicator reports the age-adjusted incidence rate (cases per 100,000 population per year) of males with prostate cancer. According to State Cancer Profiles, 2009 to 2013, the cancer incidence rate was 151.7 compared to that seen in Virginia (116.5) and in the United States (123.4) (Community Commons, 2019).

Cancer Mortality

This indicator reports the death rate of cancer (per 100,000 population per year) in Goochland County adjusted to the U.S. standard population age groups. Based on data from the CDC National Vital Statistics System, there is an age-adjusted death rate of 162.7 per 100,000 population for cancer in Goochland County, which is similar to that seen in Virginia (160.7) and the United States (160.9), shown in Figure 26 (Community Commons, 2019). Cancer mortality rates by gender and race can also be found in Figure 26; they show that cancer death rates are higher among males and people who identify as African American/ Black.

	Goochland County	Virginia	United States
Total Population	21,966	8,313,472	318,689,254
Average Annual Deaths, 2010- 2014	51	14,686	590,634
Age-Adjusted Death Rate (per 100,000 population)	162.7	160.7	160.9

Cancer Mortality, Age-Adjusted Death Rate (Per 100,000 Pop.)



Cancer Mortality by Gender

Location	Male	Female
Goochland	218.0	114.7
Virginia	193.3	137,4
United States	192.6	137,8

Cancer Mortality by Race

Location	White	Black
Goochland	152.0	206.6
Virginia	161.5	189.4
United States	165.7	190.0

FIGURE 26. CANCER MORTALITY, AGE-ADJUSTED DEATH RATES

Heart Disease Mortality

According to CDC, National Vital Statistics System, there were an estimated 140.7 deaths due to heart disease per 100,000 population in Goochland County between 2012-2016. This shows an improvement since 2011-2015 when the heart disease mortality rate in the County was 163.4. This updated rate is also lower than the state rate, 155.3, and national rate, 168.2, as seen in Figure 27 (Community Commons, 2019). Figure 27 also includes heart disease mortality rates by gender and race, which shows rates are higher among males and people who identify as African American/Black.

	Goochland County	Virginia	United States
Total Population	21,966	8,313,472	318,689,254
Average Annual Deaths, 2010- 2014	40	13,825	618,853
Age-Adjusted Death Rate (per 100,000 population)	140.7	155.3	168.2

Heart Disease Mortality, Age-Adjusted Death Rate (Per 100,000 Pop.)



Heart Disease Mortality by Gender

Location	Male	Female
Goochland	158.3	121.8
Virginia	194.8	124.1
United States	212.1	133.1

Heart Disease Mortality by Race

Location	White	Black
Goochland	131.0	190.0
Virginia	154.7	188.7
United States	170.9	212.6

FIGURE 27. HEART DISEASE MORTALITY, AGE-ADJUSTED DEATH RATES

Stroke Mortality

Based on CDC data, between 2010 and 2014, the age-adjusted death rate of cerebrovascular disease (stroke) was 49.7 per 100,000 population in Goochland County. As shown below in Figure 28, this is greater than the Healthy People 2020 target of less than or equal to 33.8, and above the rates seen in Virginia (39.4) and the United States (37.3) (Community Commons, 2019). The age-adjusted stroke mortality rate (per 100,000 population per year) by gender in Goochland County is also in Figure 28, which shows stroke death rates are higher among females. Stroke death rates by race were not available at the County level.

	Goochland County	Virginia	United States	Stroke Mortality, Age Adjusted Death Rate
Total Population	21,966	8,313,472	318,689,254	(Per 100,000 Pop.)
Average Annual Deaths, 2010- 2014	11	3,361	134,618	
Age-Adjusted Death Rate (per 100,000 population)	39.2	38.5	36.9	0 100 Goochland County, V
Healthy People 2020 Target			<=33.8	(39.2) Virginia (38.47) United States (36.9)

Stroke Mortality by Gender

Location	Male	Female
Goochland	35.5	40.5
Virginia	38.3	37.8
United States	37.2	36.0

FIGURE 28. STROKE MORTALITY, AGE-ADJUSTED DEATH RATES

Infant Mortality

Infant Mortality is a health indicator that reports the death rate of infants less than one year of age per 1,000 births. This indicator is relevant, as high rates of infant mortality indicate the existence of broader issues pertaining to access to care and maternal and child health. In Virginia, common causes of infant mortality include premature/low birth weight, birth defects, sudden infant death syndrome (SIDS), maternal pregnancy complications, and respiratory distress syndrome (RDS) (March of Dimes, 2018). The **infant mortality rate** has fluctuated in Goochland County, with a rate of zero in 2016 followed by an increasing to 12.8 in 2017, which is above the 2017 rate in Virginia (5.9) and the United States (5.8) (CDC, 2019).

Depression

The burden of mental illness in the United States is among the highest of all diseases, and mental disorders are among the most common causes of disability. According to *Healthy People* there is an association between mental health disorders—most commonly depression—and the risk, occurrence, management, progression, and outcome of serious chronic diseases and health conditions (Healthy People, n.d.). It is important for a community to identify the current mental health needs in order to address and prevent future mental and physical health outcomes. Among the Medicare Fee-for-Service Beneficiaries in Goochland County, 315 of the total 2,527 beneficiaries had depression. The percent of beneficiaries with depression in Goochland County (12.5%) is less than what is seen throughout Virginia (15.2%) and the United States (16.7%) (Community Commons, 2019).

Sexually Transmitted Infections

According to the U.S. Department of Health and Human Services' Office on Women's Health, sexually transmitted infections (STIs), also known as sexually transmitted diseases (STDs), are infections passed from one person to another through sexual contact (Office on Women's Health, n.d.). This indicator is relevant because the presence of an STI is a measure of poor health status and indicates the prevalence of unsafe sex practices. The CDC's National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2014, indicates that the rate of chlamydia cases per 100,000 population was 337.6 in Goochland County. This is lower than what is seen throughout Virginia (435.8) and the United States (456.1) (Community Commons, 2019). HIV, human immunodeficiency virus, is a life-threatening communicable disease that disproportionately affects minority populations and may also indicate the prevalence of unsafe sex practices. In Goochland County, the HIV prevalence rate per 100,000 population was 339.5 compared to that of Virginia (314.5) and the United States (353.2) (Community Commons, 2019).

Premature Death

This indicator reports Years of Potential Life Lost (YPLL) before the age of 75 per 100,000 population for all causes of death, age-adjusted. YPLL measures **premature death** and is calculated by subtracting the age of death from the 75-year benchmark (Community Commons, 2019). YPLL provides insight on the overall health status of a community. The Goochland County YPLL rate is low (4,823) compared to the state-level (6,295) and national-level (6,588), which indicates that the overall health status of the county is good and more people are living to age 75 and beyond in the County (County Health Rankings, 2017).

Unintentional Injury Mortality

According to the National Safety Council, unintentional injuries are the leading cause of death among people ages 1 to 44. Unintentional injuries and accidents can be caused by errors and mistakes; however, motor vehicle crashes and drowning consistently rank as top causes of unintentional deaths (NSC, 2019). According to the CDC, the rate of death due to unintentional injury (accident) per 100,000 population among residents was 41.1 in Goochland County, between 2012 and 2016. As seen in Figure 29, the County's rate is higher than what is reported in Virginia (37.7) and similar to what is reported in the United States (41.9) (Community Commons, 2019).

	Goochland County	Virginia	United States	Unintentional Injury (Accident) Mortality, Age-Adjusted Death Rate
Total Population	21,966	8,313,472	318,689,254	(Per 100,000 Pop.)
Average Annual Deaths	9	3,224	140,444	
Age-Adjusted Death Rate (per 100,000 population)	41.1	37.7	41.9	0 100
Healthy People 2020 Target			<=36.0	Goochland County, VA (41.1)
FIGURE 29. UNINTENTIONAL INJURY (ACCIDENT) MORTALITY				Virginia (37.67) United States (41.9)

Overdose Deaths

According to the Virginia Department of Health, in 2016, the mortality rate for all ages due to prescription opioid overdoses was 4.4 per 100,000 population in Goochland County, compared to a rate of 5.5 in the state of Virginia. The rate of Emergency Department (ED) visits due to opioid overdoses increased from 49.4 to 75.0 per 100,000 population in Goochland County between 2015 and 2016, which is lower than the 2016 rate in Virginia of 103.5. The age group of 25 to 44 has been most impacted by overdose deaths and ED opioid overdose visits in Goochland County (VA Dept. of Health, 2016).

Life Expectancy

According to Virginia Department of Health Vital Statistics captured between 2007 and 2013, the life **expectancy** at birth in years varies per census tract in Goochland County. As shown below in Figure 30, the average life expectancy ranges from 74.2 to 81.6 depending on geographic location within the County. This indicator is visualized with median household (family) income, which varies in correlation to the average life expectancy per census tract. Goochland County life expectancy at birth is similar to that seen in Virginia (79.7) and nationally (76.1).

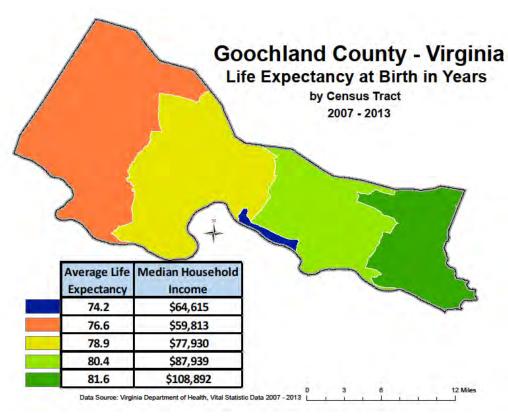


FIGURE 30. LIFE EXPECTANCY AT BIRTH IN YEARS

Health Care and Community Resources

Health Insurance

The lack of health insurance is considered a key driver of health status as a primary barrier to health care access including regular primary care, specialty care, and other health services. This indicator reports the percentage of the total population (non-institutionalized) without health insurance coverage. In Goochland County, 6.7% of the total population is uninsured, which is less than the percentage seen at state-level (11.8%) and the national-level (12.1%), as shown in Figure 31 (Community Commons, 2019).

	Goochland County	Virginia	United States	Percent Population Age 18-64 Without Medical
Total Population, Age 18-64	12,922	5,122,920	194,808,251	Insurance
Population with Medical Insurance	12,054	4,516,309	171,274,851	
Percent Population With	93.28%	88.16%	87.92%	0 50%
Medical Insurance				Goochland County, VA
Population Without Medical	868	606,611	23,533,400	(6.72%) Virginia (11.84%)
Insurance				United States (12.08%)
Percent Population Without	6.7%	11.8%	12.1%	The state of the s
Medical Insurance				

FIGURE 31. PERCENT POPULATION AGE 18-64 WITHOUT MEDICAL INSURANCE

Primary Care Providers

Access to primary care providers is an important health indicator as rates of **morbidity** and mortality can be reduced if residents can easily access health screenings, routine testing, and vaccinations. Doctors classified as "primary care physicians" by the American Medical Association include: General Family Medicine MDs and DOs, General Practice MDs and DOs, General Internal Medicine MDs and General Pediatrics MDs. According to the U.S. Department of Health and Human Services' Health Resources and Services Administration, Area Health Resource File, 2014, there were 91.2 primary care physicians per 100,000 population in Goochland County, which is above the rate in Virginia (86.0) and the United States (87.8), as seen in Figure 32 (Community Commons, 2019).

	Goochland County	Virginia	United States	Primary Care Physicians, Rate per 100,000 Pop.
Total Population, 2014	21,936	8,326,289	318,857,056	
Primary Care Physicians, 2014	20	7,164	279,871	
				0 300
Primary Care Physicians, Rate	91.2	86.0	87.8	Goochland County, VA
per 100,000 Population				(91.17) Virginia (86)
FIGURE 32. PRIMARY CARE PHYSICIANS R	ATE			United States (87.8)

36

Mental Health Providers

This indicator reports the rate of mental health providers per 100,000 population. Mental health care providers include: psychiatrist, psychologists, clinical social workers, and counselors who specialize in mental health care. The University of Wisconsin Population Health Institute, County Health Rankings for 2016 found that there were only 72.9 mental health care providers per 100,000 population in Goochland County (Community Commons, 2019). This is fewer than the rate of providers found in Virginia (147.0) and the United States (202.8), as shown in Figure 33. Factors that affect access to mental health care exist at different points in the system, including long waiting times for outpatient appointments. The allocation of resources as well as the quality of these mental health services may be unevenly distributed across different geographical areas, and inequalities in the provision of services may occur. This can have consequences for certain groups, including people living in rural areas (National Collaborating Centre for Mental Health, 2011).

	Goochland County	Virginia	United States	Mental Health Care Provider Rate (Per
Total Population	21,936	8,270,641	317,105,555	100,000 Population)
Number of Mental Health Providers	16	12,162	643,219	
Ratio of Mental Health Providers to Population (1 Provider per X Persons)	1,371	680	493	0 250 Goochland County, V
Primary Care Physicians, Rate per 100,000 Population	72.9	147.0	202.8	(72.9) Virginia (147) United States (202.8)

FIGURE 33. MENTAL HEALTH CARE PROVIDER RATE

Dentists

This indicator reports the number of dentists per 100,000 population, and it includes all dentists qualified as having a doctorate in dental surgery or dental medicine who are licensed by the state to practice dentistry and who are practicing within the scope of that license. According to the U.S. Department of Health and Human Services' Health Resources and Services Administration, Area Health Resource File, 2015, Goochland County had 31.5 dentists per 100,000 population in 2015 (Community Commons, 2019). This is less than half of the rate in Virginia (65.2) and the United States (65.6), as shown in Figure 34. Having fewer dentists conveniently located in the County could pose a barrier because residents may have to travel to nearby cities or towns to

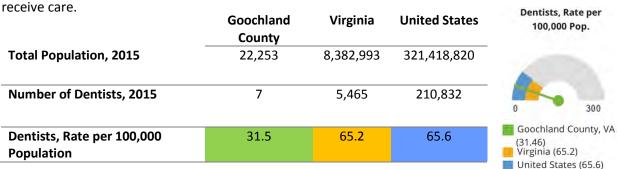


FIGURE 34. DENTISTS, RATE PER 100,000 POPULATION

Preventable Hospital Events

Preventable hospital events are the discharge rate (per 1,000 Medicare enrollees) for ambulatory care sensitive (ACS) conditions. ACS conditions include pneumonia, dehydration, asthma, diabetes, and other conditions which could have been prevented if adequate primary care resources were available and accessed by the patients. This indicator is relevant because analysis of ACS discharges can demonstrate a possible "return on investment" from interventions that reduce hospital admissions (i.e. uninsured or **Medicaid** patients) through better access to primary care resources. According to Dartmouth College Institute for Health Policy and Clinical Practices' Dartmouth Atlas of Health Care, 2014, Goochland County had a low ACS discharge rate (34.7) compared to Virginia (43.6) and the United States (49.9) which indicates the use of primary care resources available to community members (Community Commons, 2019).

Benefit Programs

Goochland County residents can apply for income-based benefit programs through the Goochland County Department of Social Services. Provided by the Goochland Community Action Program (CAP) 2017 Community Health Needs Assessment, Figure 35 displays the number of individuals and households served through the Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families Program (TANF) and Medicaid, a medical assistance program. According to Virginia Department of Health, the Goochland Women, Infants, and Children (WIC) program served a year-to-date average of 108 participants (VA Department of Health, 2019).

State of Virginia Fiscal Year	SNAP Individuals Served (Households Served)	TANF Individuals Served (Households Served)	Medicaid Individuals Served (Households Served)	Received SNAP, TANF, and/or Medicaid Individuals Served
2010	1,734 (794)	222 (81)	1,710 (1,101)	2,415
2011	1,946 (902)	265 (94)	1,846 (1,166)	2,642
2012	1,931 (918)	230 (79)	1,847 (1,154)	2,624
2013	1,969 (950)	178 (66)	1,930 (1,186)	2,686
2014	1,959 (942)	121 (47)	1,965 (1,211)	2,733
2015	1,859 (884)	127 (49)	2,153 (1,310)	2,847

FIGURE 35. GOOCHLAND COUNTY BENEFITS PROGRAM

Family Planning Surveys

Aimed to assess knowledge about family planning and Health Department clincial services, Chickahominy Health District nursing staff drafted a survey to be taken by women receiving services with the Goochland County Health Department's WIC program and Goochland Cares. Shown in Appendix I, the survey consisted of 9 questions available in English and Spanish. In total, 34 community members completed the survey. Surveys were distributed and collected at Goochland Cares by Chickahominy Health District Staff in October 2018 and at the Goochland County Health Department (WIC program) in July 2018. Gift cards with a \$10 value were used as a participation incentive, lending to self-selected participation rather than random sampling. While self-selected participation without the collection of personal information protects the anonymity of participants, it limits the ability to screen by gender identity and age.

The survey results identified a gap in long-acting reversible birth control (LARC) knowledge. The survey team recommends further examination through focus groups and updating information on the Chickahominy Health District's Virginia Department of Health website.

Quantitative Data Summary

The Steering Committee reviewed the quantitative data provided in this section to better understand the health of the community. The quantitative data represents the current information available from reputable sources during the CHA process in 2018. Much of the information was collected using tools and visuals created by Community Commons, which is a resource developed by the nonprofit organization: The Institute for People, Place, & Possibility (IP3). The review uncovered areas that would benefit from focused action in order to improve community health and promote health equity including: limited access to affordable and high-speed internet; the low rate of mental health care providers located locally compared to Virginia; above average incidents rates for some types of cancer (when compared to Virginia rates); and the presence of substandard housing units in the County. The Steering Committee noted the differences between the five census tracts within Goochland County related to life expectancy, health opportunity index (HOI) scores, and income levels. The quantitative data revealed that Goochland County's areas of strength include a high rate of on-time high school graduation, a high rate of immunizations among adults, and fewer premature deaths when compared to Virginia.

Qualitative Data Review

Following review of quantitative data, the CHA Steering Committee reviewed qualitative data on health topics in Goochland County to gain a better understand of beliefs, perspectives and attitudes in the community.

Forces of Change Assessment

The Forces of Change Assessment (FOCA) is part of the Mobilization for Action through Planning and Partnerships (MAPP) process and is a recommended component when completing a comprehensive **CHA**. The FOCA attempts to identify current and potential factors/events (e.g., legislation, population changes, technology, economic shifts, etc.) that directly or indirectly affect the health of the community. By identifying and understanding the factors and events that lead to significant changes, the community can prepare to mitigate potential threats and be ready to take advantage of opportunities to improve the community's health and well-being.

The health district conducted the FOCA with 11 Goochland County leaders during a 3-hour brainstorming and discussion session on October 25, 2018. Please see the presentation, Appendix J, which was used to facilitate the meeting. County leaders included members of the Board of Supervisors, Community Development, Children's Services, Public Schools, Social Services, Parks & Recreation, County Administration, Community Services Board, and the Health Department. The FOCA focused on the following questions:

- 1) What has occurred recently (5 years) that may impact the health of the community?
- 2) What may occur in the next 5-10 years that impacts the health of the community?
- 3) What forces are occurring locally, regionally, statewide, and nationally that could impact the health of the community?

Answers to the questions were categorized under eight determinants of health: economic, education, social & cultural context, science & technology, health care, legislation & policies, environmental hazards, and neighborhood & built environment. The forces and their corresponding categories are detailed in a determinants chart that can be found in Appendix J. The most frequently referenced forces under each determinant of health are highlighted in yellow in the chart. In addition to the determinants of health categorization, at the end of the meeting, all participants completed a written worksheet where they selected and explained their top three forces of change priorities based on the discussion and information shared. The most common responses were:

<u>Economic growth</u> - associated with population growth, increase in businesses, increase in residential developments, and job opportunities.

<u>Health care access</u> - related to new resources in the community, specifically mental health services/providers, special needs of the aging population, and Medicaid expansion.

<u>Internet access/broadband expansion</u> – expansion can level the playing field and make a variety of resources accessible (connect people with medical providers, jobs, services, & information), provide the ability to work from home, assist with educational opportunities/students' homework, and attract businesses.

Community Listening Sessions

In order to obtain input directly from community members, the CHA Steering Committee decided to hold Community Listening Sessions based on the AARP Roadmap to Livability Community Listening Session Tool Kit. Community Listening Sessions were conducted in multiple locations in Goochland County with the goal of hearing from members of the community directly regarding health, safety, community assets, resources, transportation, and potential improvements to their community. Session locations included: Jerusalem Baptist Church, the Goochland Family YMCA, Goochland Public Library, Goochland Cares (two sessions), and Goochland Sports Complex.

Locations for the sessions were selected by the CHA Steering Committee members. The sessions were promoted through flyers displayed at the location as well as information posted on the County's official webpage and Facebook page. An announcement was placed in the Goochland Gazette to further garner participants for the December 17, 2018 session that was held in the evening. Ideally 5-15 participants would attend each of these sessions to ensure that participants would have the opportunity to make their voices heard while keeping the session length to one hour. Each of the six sessions held in Goochland had between 2-18 participants. The specific demographics of participants (age, gender, and ethnicity) were not collected to protect anonymity. The sessions were conducted in Goochland County between October and December 2018. There were 46 participants in total from all sessions.

Participants in the sessions were given a handout with six open-ended questions and were asked to express their thoughts, experiences, and observations. Their responses were captured in hand-written notes and compiled for assessment, found in Appendix L.

Below are the questions discussed during each session:

- 1. How do you define a healthy community?
- 2. What services or features are missing in your community that would improve quality of life?
- 3. How do you currently get around your community?
- 4. How would you recommend making changes to your community and where would you start?
- 5. What do you love about your community?
- 6. Do you feel safe in your community? Why or why not?

There were five main themes according to participants' responses: transportation, internet access, social life, environment (traffic, wildlife, water, air), and improvement of and/or access to state and local programs. Each of these five themes were discussed during the sessions. Transportation concerns were mentioned 39 times with all comments touching on the lack of public transportation, especially in the most rural areas of the County. Internet access and the lack of high-speed internet was mentioned seven times with comments touching on how the lack of access leads to individuals and/or businesses being at a disadvantage. Social life concerns came up 16 times with a call for more community events (in easy to get to locations) as well as a more inclusive information, particularly for those who speak English as a second language.

Environmental concerns came up 17 times ranging from concerns about the traffic (aggressive drivers and speeding), road conditions (potholes and debris), sidewalk repairs, well water testing, wildlife and bike safety. Comments regarding improvements or access to state and local programs came up 48 times and touched on a wide range of concerns, including: the need for more information about services offered (in multiple languages), County leaders advocating for affordable housing, internet access, services for transporting people with disabilities, increase in primary care providers and in-home care, advocates for the elderly during doctor's appointments, simple and easy access to information regarding policies and regulations about land ownership, and more food/store options throughout the County. Overall many participants stated that a healthy community is a place where people are taken care of, where they can get transportation to the places they need to go, and have access to the necessary resources. A word cloud, Figure 36, visualizes the words most commonly used to describe Goochland County and answer the questions prompted during the community listening sessions.



FIGURE 36. COMMUNITY LISTENING SESSIONS WORD CLOUD

Windshield Surveys

Forty-one volunteers from Goochland County participated in a windshield survey activity as an opportunity to identify resources, assets and areas for further investigation. Training was provided to volunteers prior to them conducting the windshield surveys. The participants were asked to make observations from their vehicle with a partner(s). They were asked to drive around one of five districts and take notes based on the questions given to them prior to the drive. Additionally, participants stopped and took pictures, when safe to do so. Their goal was to examine the nature and condition of housing, **infrastructure**, businesses and facilities,

public spaces, traffic, road conditions, and environment. To read the windshield survey instructions, see Appendix M. Eighteen surveys were submitted with their observations and pictures; these surveys were conducted between May and July of 2018. The volunteers could choose their group members and districts to survey. Goochland Cares, the Goochland Family YMCA, Chickahominy Healthy District Medical Reserve Corps, local churches, and the Goochland CHA steering committee were represented by volunteer participants.

Participants were given eighteen questions about the community to use as a survey guide. The questions were:

- 1. History: Is this an established neighborhood or new? Is there a specific history associated with this area that you know of?
- 2. Demographics: Who lives in the community? Age? Families?
- 3. Race & Ethnicity: Are there specific ethnic shops/restaurants? Do particular groups seem to live in a certain area?
- 4. Values & Beliefs: Are there places of worship? Do you see advertisements for support groups/types of care?
- 5. Physical Environment: How does the community look? How much usable green space is there? Environmental concerns (air, water, trash)?
- 6. Health & Social Services: Do you see social services, hospitals, clinics and other health-related resources? How easy are they to get to? Is there evidence of any health problems such as drug abuse, mental illness, chronic or communicable diseases?
- 7. Economy: Is it a thriving community or does it feel rundown? Are there places of employment, stores, businesses? Are there supermarkets, pharmacies, and other stores that provide necessities?
- 8. Housing: What is the condition of housing in the area you're surveying? Are houses and/or apartments maintained or in need of repairs? Do neighborhoods have names? Are there sub-communities?
- 9. Transportation & Safety: How do most people get around? Are there buses, personal cars, transit for those with a physical disability, taxis, bicycles? Do you see sidewalks and trails? Is there a Neighborhood Watch? Where are police and fire stations nearby?
- 10. Politics & Government: Are there signs or indicators of political activity? Do you know the governmental jurisdiction of the community (a town or city)? Is there a Town Council or Board of Supervisors?
- 11. Community Connectedness: Are there common areas/public spaces where people gather? Are there service clubs Lions, Elks, Masons, etc.? Other organizations focused on interests like gardening, sports, or leisure activities?
- 12. Education: Are there schools in the area? How do they look? Are there libraries with internet access? Is there access to multiple levels of education within the community?
- 13. Recreation: Where do children play? Are parks used by a variety of people? Are they well taken care of? Are pets allowed?
- 14. What is the overall 'feel' of the community? Outstanding assets? Biggest challenges?
- 15. What is the most striking thing about the community? What is most unexpected?
- 16. Could a family find everything they need on a day-to- day basis within this district?
- 17. If not, how far would they have to travel to find such services?
- 18. How does the picture(s) provide opportunities for us to improve life in your community?

Windshield Survey Responses

Upon review, the eighteen surveys and pictures revealed several takeaways. Goochland is a predominately rural area with many beautiful farms and hidden history. Due to its rural geography, isolated pockets of stores and businesses are scattered throughout the community. A personal vehicle is a necessity for most in the community since it can be up to a 45-minute commute to certain stores from some districts in Goochland. Alternative transportation options would be beneficial for many in this County, especially for the elderly and those unable to drive themselves. The community is a mix of older homes as well as some newly developed neighborhoods. The majority of homes are single family homes and there are few apartment options. Demographically the area is predominately White and African American with some Hispanic, Latino, and Asian ethnic groups. The community is made up of families and older adults. There are several denominations of faith represented throughout the County. There are parks as well as green open space, which are often well maintained. Community events tend to revolve around churches and schools. There is only one library in the County. In terms of health services, volunteers observed some clinics and doctor's offices with a few pharmacies and dentist's offices. These resources vary throughout the districts and may require some driving to get there. Due to its rural nature, there are limited sidewalks and bike lanes. Schools look to be in good physical condition, but locations may make it difficult for families who commute to more than one school.

Root Cause Tree

The Goochland CHA Steering Committee completed Root Cause Tree analyses. The committee was provided with quantitative health data for Goochland County and split into five small groups to focus on a topic of their choosing. Infant mortality, food insecurity, weight issues, smoking, and emergency room visits were identified as issues each group wanted to explore by considering potential root causes of the health issues. It is important to note that the contributing factors and root causes listed throughout the analyses are the product of brainstorming efforts by the committee; the connections are not proven correlations or all-encompassing. Below is a summary of each of the root cause diagrams that was developed. Please view the diagrams in Appendix N.

Infant Mortality

The infant mortality data presented to the group signified a potential issue with increasing infant mortality rates between 2014 and 2017. The fact that Goochland County is rural community was identified as a potential contributing factor that connects to limited access to public transportation, health care, and internet. All of these could contribute to limited prenatal care and/or postpartum care as well as pediatric care. Another potential contributing factor relates to cultural or social trends including some pregnant women's desire for care to be more "natural." This trend could lead to a distrust of hospitals, a desire to remain in the comfort of the home during labor/delivery, and a way to find alternatives to the expenses associated with hospital care. Depending on the location in the County, having at home births could result in longer travel times to a hospital, if complications arise. Due to increasing costs of living, among many other factors, more women may be pursuing full-time careers to increase their household income. This can lead women to wait to have children until they are older, which may increase the **risk factors** for both

mother and child. Regardless of career or income, most pregnant women may have to work during their entire pregnancy and not be able to take maternity leave, which in turn can affect the health of both mother and child. Leading causes of infant mortality in the United States are birth defects, preterm birth, SIDS, pregnancy complications, and injuries (CDC, 2019).

Food Insecurity

Based on data in the quantitative section of this report, it appears that there is a high percentage of the County population that is ineligible for government assistance programs, but reports being food insecure. Potential reasons for this high percentage include limited funding/donations or programs that address food insecurity, inability to drive due to disability, lack of a personal vehicle, lack of public transportation, lack of internet access, illness or conditions not accounted for by assistance services, and a lack of employment options and/or low salaries. Within these contributing factors, there are regulations or limits, such as: rigid eligibility criteria, underemployment or unemployment, and limited access to information or alternative food resources. Grocery stores may be a long distance away from some residents' homes, which means they are spending more time and money than those who live in urban or suburban areas to get to the stores. Rural areas may have higher prices for certain products, and though they might have farmers markets, these options could be more expensive. Options like food pantries are offered by organizations such as Goochland Cares, but statistics on utilization of their programs are not yet available (GoochlandCares, n.d.).

Weight Issues

A high percentage of adults in Goochland County are overweight based on their self-reported Body Mass Index (BMI). Some of the potential causes of this have been identified as presence of food deserts in certain areas, limited transportation options, unsafe roads for cyclists/pedestrians, and alcohol consumption. These factors may stem from unhealthy foods being inexpensive and accessible, a culture of unhealthy food habits/preferences (fried foods, etc.), lack of safe areas to exercise, low interest in exercise due to lack of time or job related physical demands, lack of recreations activities for adults, and high calorie alcohol consumption. Other factors impacting weight and physical activity include medications and disabilities.

Smoking

Based on data presented in the quantitative section of this report, people who smoke cigarettes in the County are less likely to attempt to quit smoking. Potential contributing factors include: smoking to relieve stress, believing that negative health impacts or risks (like cancer) will not happen to them, their health insurance does not cover the tools/medication or programs needed to help them quit, their employers do not discourage smoking, and their social environment does not discourage smoking. Smoking is an addiction and there may be limited affordable options for quitting as well as limited social pressure to stop. The data on smoking does not take into account those who use electronic cigarettes or other nicotine delivery products.

ER Visits

The increase in opioid related emergency room visits between 2015 and 2016 led the committee to consider potential contributing factors, including: the desire to relieve stress or anxiety, marketing from drug companies, over-prescribing of pain medications, lack of patient education regarding accidiction, increase

of urgent care options, lack of mental health care providers, and the lack of access to alternative pain management. All these factors revolve around either too much access to opioids or a lack of access to alternatives.

Qualitative Data Summary

The qualitative data identified many strengths in the community including a strong spirit of volunteerism (and willingness to donate time and resources); easy access to rural areas, nature, and parks as well as nearby cities; a high-achieving public school system; an active faith community; and a sense of safety due to low crime rates. The qualitative data reinforced some of the issues identified in the quantitative data review that require focused action: transportation options, affordable housing options, limited high speed internet, and access to mental health care providers.

Qualitative Data Limitations

Limitations were encountered while collecting qualitative data for the CHA. The Community Listening Sessions overall attendance was low; therefore, the feedback does not capture an inclusive picture of the community's thoughts and perspectives. Demographic information was not collected during the sessions in order to protect the anonymity of participants, so the diversity of participants is unknown. Future assessments would benefit from more participants of diverse educational backgrounds, ages, occupations, location of residency within the County, race and gender identity, and socioeconomic status. Also, to ensure a wider participation, sessions should be offered in additional languages, like Spanish. To increase overall attendance holding these sessions throughout the year, instead of towards the end of the year, may increase participation.

The Forces of Change Assessment intentionally targeted the opinions of Goochland County leaders. Capturing the perspective of key stakeholders is a valuable component of a Community Health Assessment. Leadership takes many forms in a community and in some scenarios, leadership spans beyond government positions. The process would benefit from capturing the input from the many forms of leadership found in Goochland County.

The Windshield Survey activity bridges community member opinion and observation by asking participants to note what they see and what they know in response to a list of questions. Though the Windshield Surveys provide a large amount of data, both visual and written, not every question was answered by every participant across each district. While parameters were in place to send multiple groups to each district, increased participation and required answers for each question could improve future data collection.

Health Priorities

Multi-Voting Process

The multi-voting process is recommended for use by MAPP when completing a comprehensive CHA. It is typically used when a long list of health issues must be narrowed down to only a few priorities and it relies on the overall favor of the group rather than individual opinion (NACCHO, 2019). The Goochland CHA Steering Committee members used this process of voting to narrow down of list of 14 health indicators to five. A sub-committee of CHA members created the list of 14 health indicator categories and each category's associated topics/definitions. Figure 37 shows the list used during the first round of voting.

Health Indicator Categories	Definitions
Maternal & Child Health	including, but not limited to: prenatal care/family planning, infant mortality, low birth weight, teen pregnancies, family composition
Injury	including, but not limited to: motor vehicle injury, motor vehicle mortality, vehicle-pedestrian accidents, motor vehicle crashes, seatbelt use, older adult falls, drowning's, poisonings/overdoses
Crime/Violence	including, but not limited to: domestic violence, child abuse & neglect, violent crime rate: murder, kidnapping, robbery, arson, fraud, sex offences, etc.)
Substance Use	including, but not limited to: alcohol consumption, cigarettes/tobacco products use & quit attempts, prescription drug abuse, opioid overdoses, marijuana, PRIDE survey - schools
Chronic Disease	including, but not limited to: cancer rates, cancer screening rates, heart disease, stroke, high blood pressure, overweight and obesity, diabetes, leading causes of death
Access to Care	including but not limited to: health insurance coverage, Medicaid, home health agencies, hospital utilization/ER visits, number & location of hospitals/clinics - including access to specialists: mental health, dental, etc.), preventable hospitalizations, disability resources, transportation options, internet access
Mental Health	including, but not limited to: access to care, resources for all ages (children and adults), suicide rates/suicide prevention, disabilities (mental/developmental), substance abuse, social isolation, depression
Communicable Diseases	including, but not limited to: STDs, AIDS/HIV, Hepatitis C, immunizations
Physical Activity & Nutrition	including, but not limited to: affordable recreation opportunities, fruit & vegetable consumption, food deserts, food insecurity, self-reported physical inactivity, access to food assistance programs
Economic Stability	including, but not limited to: population living in poverty, median income, employment status, major employers in the area, homelessness, housing (owners, renters, costs, substandard), cost of living, age-restricted communities, mixed income neighborhoods, Gini Index -income inequality, transportation options/cost of a personal vehicle, internet access

Education	including, but not limited to: high school graduation rates, education inequity, special programs, early childhood interventions, preschool, higher education, PALS-K benchmarks
Social Support & Involvement	including, but not limited to: marital status, single parent homes, grandparents raising grandchildren, social isolation/living alone, resources for veterans, places of worship, resources for immigrants - foreign born population, language spoken at home, English as a second language, social opportunities for all ages
Environmental Quality	including, but not limited to: air quality, water quality, septic systems & wells (private and public), lead exposure, chemical runoff/groundwater pollution, infrastructure/buildings, parks/green space, internet access/broadband coverage, rural/farm land
Transportation	including, but not limited to: traffic/roads, infrastructure, walkability/bike-ability, transportation options, commuting patterns, motor vehicle mortality, vehicle-pedestrian accidents, motor vehicle crashes, access to care and resources

FIGURE 37. HEALTH INDICATOR CATEGORY LIST

Voting Outcomes

Committee members were asked to star their top 10 from the list of 14; the results of that vote were tallied by the facilitator. Based on the number of votes received, the top 10 categories were:

- Access to care (15 votes)
- Mental health (15 votes)
- Economic stability (15 votes)
- Social support & involvement (14 votes)
- Substance abuse (13 votes)
- Physical activity & nutrition (11 votes)
- Education (11 votes)
- Environmental quality (11 votes)
- Transportation (11 votes)
- Crime/violence (10 votes)

These 10 categories were then narrowed down once again to identify the top five health indicator priorities. A new sheet of categories and definitions was distributed to the CHA Steering Committee members. Round two voting identified the top five health indicator categories as:

- Access to care (12 votes)
- Transportation (12 votes)
- Economic stability (12 votes)
- Environmental quality (10 votes)
- Mental health (9 votes)

The committee narrowed this list down to the top three priorities after further review of the CHA quantitative and qualitative sections as part of the kick-off of the Community Health Improvement Plan in 2019. The top three health indicator categories are below and will serve as the primary focus areas of the improvement plan; see Figure 38.

- Access to care (13 votes)
- Transportation (12 votes)
- Economic Stability (11 votes)

Goochland County
Community Health Assessment (CHA)
2018-2019

OPPORTUNITIES FOR GOOD HEALTH

Access to Care



The mental health care provider rate, 75 per 100,000 population, in Goochland County is lower than that seen throughout Virginia and the United States.

Transportation



During community listening sessions "transportation options" was the most common answer when community members were asked: What services or features are missing in your community that would improve quality of life?

Economic Stability



Affordable housing makes more household resources available to pay for other needs like care and healthy foods, and limits exposure to environmental toxins; in Goochland County, 21% of housing units have one or more substandard living conditions.

VISIT
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FOR THE FULL CHA REPORT



FIGURE 38. OPPORTUNITIES FOR GOOD HEALTH

Conclusion

The CHA informs the next phase of this cyclical process - the Community Health Improvement Plan (CHIP), which began for Goochland County in March 2019. The CHIP will be action-oriented with measurable goals and objectives. It will involve planning and implementing programs, policies, and/or activities over the next five years (2019-2023) to provide or connect resources and tools that can positively impact the community's well-being. In order to successfully address the top three priorities, access to care, transportation, and economic stability, involvement from diverse community partners and leaders is essential.

To learn more about this report or to inquire about being part of the Goochland County CHIP process, please email Caitlin Hodge with the Chickahominy Health District: Caitlin.Hodge@vdh.virginia.gov.

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Glossary

ACEs

Adverse Childhood Experiences (ACEs) describes all types of abuse, neglect, and other potentially traumatic experiences that occur to people under the age of 18.

Assessment

The regular collection, analysis and sharing of information about health conditions, risks and resources in a community.

Benchmarks

Benchmarks are points of reference or a standard against which measurements can be compared (similar to a baseline).

CDC

The Centers for Disease Control and Prevention (CDC) is part of the U.S. Department of Health and Human Services. It provides federal leadership and funding in the prevention and control of diseases.

Community Health Assessment (CHA)

Community health assessment calls for regularly and systematically collecting, analyzing, and making available information on the health of a community, including statistics on health status, community health needs, epidemiologic and other studies of health problems.

Community Health Improvement Plan (CHIP)

Focuses on the combined effects of individual and community, physical and social environments, and the policies and interventions used to promote health, prevent disease, and ensure access to quality health care.

(Social) Determinants of health

Direct causes and risk factors which, based on scientific evidence or theory, are thought to influence directly the level of a specific health problem.

Disability

Having a physical or mental impairment that substantially limits one or more major life activities.

Disease

A state of dysfunction of organs or organ systems that can result in diminished quality of life.

Food insecurity

The household-level economic and social condition of limited or uncertain access to adequate food.

Health

The state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity.

Health disparities

Population-specific differences in the presence of disease, health outcomes, or access to health care.

Health equity

All members within the population have the opportunity to attain their highest level of health.

Health indicator

A health indicator is a measure that reflects, or indicates, the state of health in a defined population, such as the infant mortality rate.

Health Opportunities Index (HOI)

A way to rank the health of communities developed by the Virginia Department of Health's (VDH) Office of Minority Health and Health Equity. The HOI consists of 13 indicators based on literature reviews of the social determinants of health, which are grouped into four profiles: Economic, Consumer, Community Environmental, and Wellness Disparity.

Health outcomes

Health outcomes are changes in health that result from measures or specific health care investments or interventions.

Health status

The current state of a given population using a variety of indices, including morbidity, mortality, and available health resources.

Incidence

The number of new cases of an event in a defined population, occurring within a specified period of time.

Infant mortality rate

The number of live-born infants who die before their first birthday per 1,000 live births.

Infrastructure

The human, organizational, information and fiscal resources that enables performance of core functions and essential services in the community.

Injury

Injuries can be classified by the intent or purposefulness of occurrence in two categories, intentional and unintentional injuries. Intentional injuries are ones that are purposely inflicted and often associated with violence. These include child abuse, domestic violence, sexual assault, aggravated assault, homicide, and suicide. Unintentional injuries include only those injuries that occur without intent of harm and are not purposely inflicted.

Intervention

Used in public health to describe a program or policy designed to have an effect on a health problem.

Life expectancy

Average expected length of life for a group of people, of a particular age, chosen at a particular time.

Medicaid

A government assistance program that provides health insurance coverage. The program is administered by states, according to federal requirements. The program is funded jointly by states and the federal government.

Morbidity

A measure of disease incidence or prevalence in a given population, location or other grouping of interest.

Mortality

A measure of deaths in a given population, location or other grouping of interest.

Premature death

Death that occurs before the average age of death in a certain population.

Prevalence

The number of cases of a disease, infected people or people with some other attribute present during a particular interval of time.

Population health

Approach to health that aims to improve the health of an entire population.

(Federal) Poverty level

A set of money income thresholds that vary by family size and composition, adjusted for inflation, as set by the Office of Management and Budget's Statistical Policy Directive 14. The two main levels used to indicate poverty measure the population living below 100% Federal Poverty Level and 200% Federal Poverty Level.

Qualitative data

Data collected often by open-ended inquiry methods that includes insights into perceptions, values, opinions, and community norms.

Quantitative data

Data that can be measured numerically.

Risk factors

Social, economic, biological status, behaviors or environments associated with increased susceptibility to disease.

SNAP

Supplemental Nutrition Assistance Program, formerly known as "Food Stamps".

TANF

Temporary Assistance for Needy Families Program.

Veterans

The population age 18 and older that served, but is not currently serving, on active duty in the U.S. Army, Navy, Air Force, Marine Corps, or the Coast Guard, or that served in the U.S. Merchant Marine during World War II.

Walkability

Walkability is a measure of how friendly/ safe an area is to walking.

WIC

Supplemental Nutrition Program for Women, Infants, and Children.

Appendix

A. Goochland CHA Action Plan

Action Steps	Estimated Timeline
Complete Community Health Assessment	
 Research & gather data on health indicators for Goochland County; connect with community leaders, stakeholders, organizations Plan for the Windshield Survey 	Nov. 2017- Feb. 2018
 Develop invitee list for CHA Steering Committee; send save the dates/invitations by mid-Feb.; plan qualitative data projects 	
Start Steering Committee meetings; orient committee to the CHA/CHIP process; vision statement; asset listing	March 2018 – July 2018
 Discuss family planning survey for the Goochland WIC & Goochland Cares 	
 Review quantitative data for health indicators in small groups – identify issues for root cause tree analysis 	Aug. 2018 – Oct. 2018
 Collect& organize Windshield Survey results; creating an interactive 'asset mapping' survey in REDCap for the Steering Committee to finalize 	
 Review additional data; Forces of Change Assessment (FOCA) with County-wide Senior Leadership; brainstorm Community Listening Session locations 	
 Begin Community Listening Session; begin setting priorities (multi-voting technique); complete outline & start drafting the CHA report; CHIP process overview/timeline 	Nov. 2018 – Feb. 2019

Complete Community Health Improvement Plan	
Recruit members for the CHIP Steering Committee (some will continue from CHA; others will be new); review report and discuss priority issues; select evidence-based program/policies/projects (literature review); develop objectives & strategies; determine metrics to capture	March 2019 - July 2019
Sustain Collaborative CHIP	
Write CHIP report and implement Community Health Improvement Plan; monitor & evaluate results and share outcomes	Aug 2019 – on (length depends project scope, partnerships, and funding)

B. Goochland County CHA Activity Timeline

March 20th

- 1) Orient committee to project, roles, and assessment process
- 2) Overview of recent assessments completed for the community
- 3) Asset listing to identify strengths

April 17th

- 1) Discuss & create a shared Vision Statement
- 2) Windshield Survey overview
- 3) Overview of Goochland health ranking information/resources
- 4) Dimensions of wellness & assets

May 15th

- 1) Finalize our Vision Statement
- 2) In small groups, review quantitative data
 - a. Identify topics/issues that require more information and/or are an important area of need in the community

June 19th

- 1) "5 Whys" to create root cause trees
- 2) Review additional quantitative data (Environment indicators) and Q&A with Health District's Environmental Health Manager

July 17th

- 1) Root Cause Trees analyses
- 2) Windshield Survey updates
- 3) United Way Health Indicator Report
- 4) Ideas for collecting additional qualitative data from the community (ex/ Community Listening Sessions)
- 5) Asset Listing document & online survey

August 21st

- 1) Assets Listing outcomes
- 2) Windshield Survey results
- 3) Forces of Change Activity (FOCA) will hold with County Senior Leadership
- 4) Family Planning Assessment survey overview

October 16th

- 1) Presentation of PRIDE survey results
- 2) Setting priorities (multi-voting process)
- 3) CHA report outline
- 4) Community Listening Sessions updates
- 5) Overview of CHIP process & next steps

November 20th

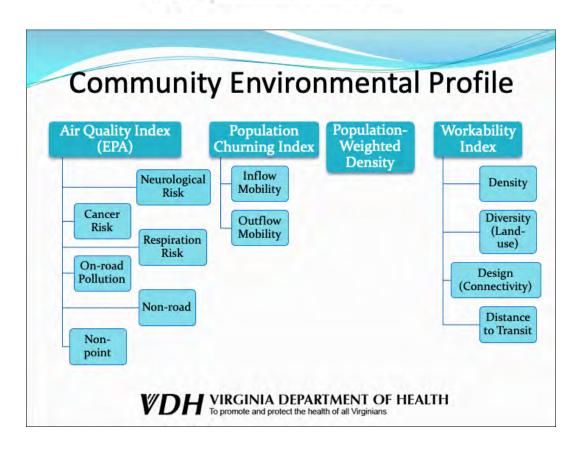
- 1) Share FOCA results
- 2) Presentation on RSAAC prescriber interviewers
- 3) Cooperative Extension well water testing and Situation Analysis
- 4) Setting Priorities (multi-voting) continued

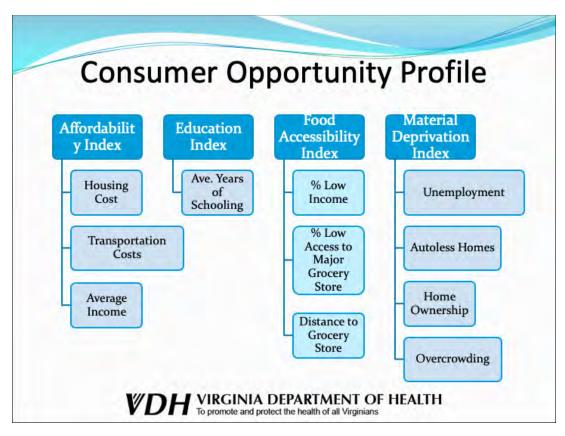
C. Virginia Health Opportunities Index (HOI) Profiles

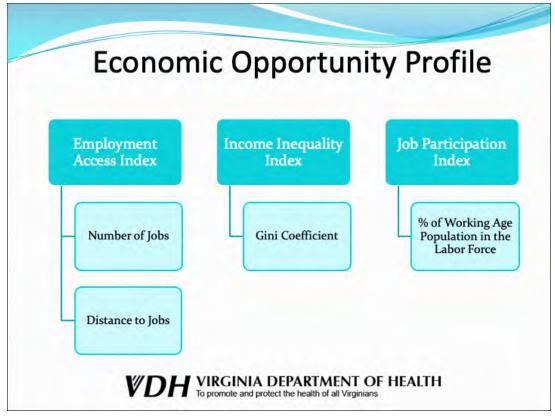
Virginia Health Opportunities Index (HOI) Profiles

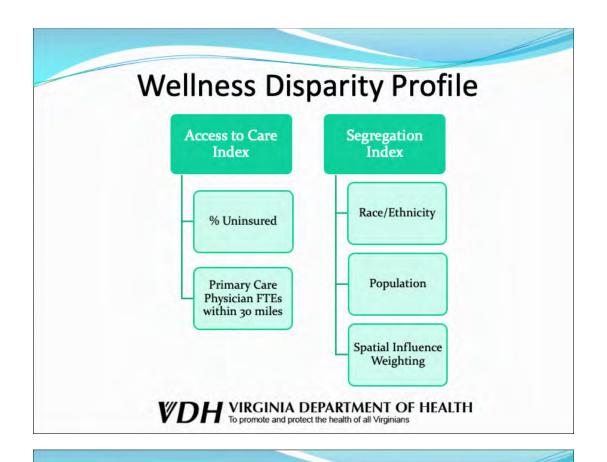
Virginia Department of Health Office of Health Equity Rexford Anson-Dwamena, MPH Epidemiologist Sr. / Spatial Analyst (GIS)











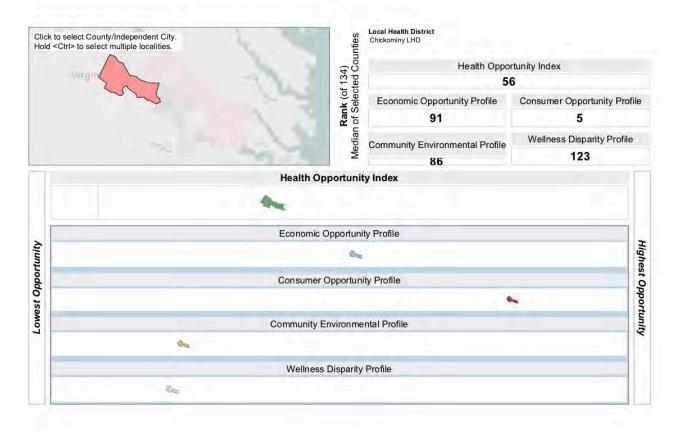
Virginia HOI

For more information and to use the Virginia HOI mapping tool, please visit:

www.vdh.virginia.gov/health-equity/virginia-healthopportunity-index-hoi/



D. Virginia HOI: Goochland County Ranking



E. AARP Livability Index



Public Policy Institute Inquiry. Analysis. Solutions.



, VA Goochland County

What is Livability?

Livable communities have diverse features that satisfy the needs of people of all ages, incomes and abilities. Learn more about AARP's Livability Index at www.aarp.org/livabilityindex.



50 © OPPORTUNITY INCLUSION AND POSSIBILITIES

40 NEIGHBORHOOD

40 ACCESS TO LIFE, WORK, AND PLAY

40 ENVIRONMENT
CLEAN AIR AND WATER

Bottom
Third
0 - 33

Bottom
Third
Th

Learn how you can make your community more livable and raise your score, visit www.aarp.org/livabilityindex.

For policy research and analysis on livable communities, visit www.aarp.org/livablepolicy.

For general resources on livable communities, including AARP's Network of Age-Friendly Communities, visit

www.aarp.org/livable.

SAFE AND CONVENIENT OPTIONS



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31 housing AFFORDABILITY AND ACCESS

They say home is where the heart is—and the same holds true for the Livability Index. Housing is a central component of livability. Deciding where to live influences many of the topics the Index covers. We spend more time in our homes than anywhere else, so housing costs, choices, and accessibility are critical. Great communities provide housing opportunities for people of all ages, incomes, and abilities, allowing everyone to live in a quality neighborhood regardless of their circumstances.

Attribute Measure		Median US Neighborhood	Value
Housing accessibility Zero-step entrances	Percentage of housing units with zero- step entry: measured at the metro area scale, higher values are better.	43.6%	29.8%
Housing options Availability of multi- family housing	Percentage of housing units that are not single-family, detached homes: measured at the neighborhood scale, higher values are better.	17.8%	2.3%
Housing affordability Housing costs	Monthly housing costs: measured at the neighborhood scale, lower values are better. Monthly costs are capped at \$4,000.	\$989	\$1,283
Housing affordability Housing cost burden	Percentage of income devoted to monthly housing costs: measured at the neighborhood scale, lower values are better.	17.9%	20.8%
Housing affordability Availability of subsidized housing	Number of subsidized housing units per 10,000 people: measured at the neighborhood scale, higher values are better.	0	0
Policies			
Housing accessibility State and local inclusive des	ign laws	No Policy	0
Housing affordability State and local housing trust	A second	No Policy	0
Housing options State manufactured housing	protections	No Policy	0
Housing affordability State foreclosure prevention	and protection	No Policy	0
Comprehensive livability comm State and local plans to crea		No Policy	0
State and local plans to crea	te age-friendly communities		



40 NEIGHBORHOOD ACCESS TO LIFE, WORK, AND PLAY

What makes a neighborhood truly livable? Two important qualities are access and convenience. Compact neighborhoods make it easier for residents to reach the things they need most, from jobs to grocery stores to libraries. Nearby parks and places to buy healthy food help people make smart choices, and diverse, walkable neighborhoods with shops, restaurants, and movie theatres make local life interesting. Additionally, neighborhoods served by good access to more distant destinations via transit or automobile help residents connect to jobs, health care, and services throughout the greater community.

Attribute Measure		Median US Neighborhood	Value
Proximity to destinations Access to grocery stores and farmers' markets	Number of grocery stores and farmers' markets within a half-mile: measured at the neighborhood scale, higher values are better.	0.0	0.0
Proximity to destinations Access to parks	Number of parks within a half-mile: measured at the neighborhood scale, higher values are better.	0.0	0.0
Proximity to destinations Access to libraries	Number of libraries located within a half- mile: measured at the neighborhood scale, higher values are better.	0.0	0.0
Proximity to destinations Access to jobs by transit	Number of jobs accessible within a 45- minute transit commute: measured at the neighborhood scale, higher values are better.	0	C
Proximity to destinations Access to jobs by auto	Number of jobs accessible within a 45- minute automobile commute: measured at the neighborhood scale, higher values are better.	32,699	22,486
Mixed-use neighborhoods Diversity of destinations	Mix of jobs within a mile: measured at the neighborhood scale, higher values are better.	0.70	0.18
Compact neighborhoods Activity density	Combined number of jobs and people per square mile: measured at the neighborhood scale, higher values are better.	3,020	140
Personal safety Crime rate	Combined violent and property crimes per 10,000 people: measured at the county scale, lower values are better.	261	86
Neighborhood quality Vacancy rate	Percentage of vacant housing units: measured at the neighborhood scale, lower values are better.	8.8%	6.7%
Policies			
Mixed-use neighborhoods State and local TOD progra	ms	No Policy	- 0
Comprehensive livability com		No Policy	0



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28 E TRANSPORTATION SAFE AND CONVENIENT OPTIONS

How easily and safely we're able to get from one place to another has a major effect on our quality of life. Livable communities provide their residents with transportation options that connect people to social activities, economic opportunities, and medical care, and offer convenient, healthy, accessible, and low-cost alternatives to driving.

Attribute Measure		Median US Neighborhood	Value
Convenient transportation options Frequency of local transit service	Total number of buses and trains per hour in both directions for all stops within a quarter-mile: measured at the neighborhood scale, higher values are better.	0	0
 Accessible system design ADA-accessible stations and vehicles 	Percentage of transit stations and vehicles that are ADA-accessible: measured at the metro area scale, higher values are better.	87.6%	61.9%
Convenient transportation options Walk trips	Estimated walk trips per household per day: measured at the neighborhood scale, higher values are better.	0.73	0.50
 Convenient transportation options Congestion 	Estimated total hours that the average commuter spends in traffic each year: measured at the metro area scale, lower values are better. The largest 101 urbanized areas have comparable data across years, though indicated as incomparable.	25.4	0.0
Transportation costs Household transportation costs	Estimated household transportation costs: measured at the neighborhood scale, lower values are better.	\$13,086	\$15,476
Safe streets Speed limits	Average speed limit (MPH) on streets and highways: measured at the neighborhood scale, lower values are better.	28.0	36.5
Safe streets Crash rate	Annual average number of fatal crashes per 100,000 people: measured at the neighborhood scale, lower values are better.	6.8	17.5
Policies			
Safe streets State and local Complete Stre	eets policies	Policy in Place	
Convenient transportation optio State human services transport		No Policy	0
Convenient transportation optio State volunteer driver policies		No Policy	0
Comprehensive livability comm State and local plans to creat		No Policy	0



40



Good communities maintain a clean environment for their residents. Great communities enact policies to improve and protect the environment for generations to come. The Livability Index looks at air and water quality. It measures communities' actions to create resilience plans to prepare for emergencies and natural disasters, and it awards points to states that have policies promoting energy efficiency and that protect consumers from having their utilities cut off during extreme weather events.

Attribute Measure		Median US Neighborhood	Value
Water quality Drinking water quality	Percentage of the population getting water from public water systems with at least one health-based violation during the past year: measured at the county scale, lower values are better.	1.10%	10.74%
Air quality Regional air quality	Number of days per year when regional air quality is unhealthy for sensitive populations: measured at the county scale, lower values are better.	5.7	13.3
Air quality Near-roadway pollution	Percentage of the population living within 200 meters of a high-traffic road where more than 25,000 vehicles pass per day: measured at the neighborhood scale, lower values are better.	0.00%	2.16%
Air quality Local industrial pollution	Toxicity of airborne chemicals released from nearby industrial facilities: measured at the neighborhood scale from 0 to 311,000, lower values are better. Values shown are for display purposes and may appear in source data at different scales from year to year though metric change is calculated on re-scaled data for comparability.	0.00	0.00
Policies			
Resilience State utility disconnection po	olicies	No Policy	0
Resilience Local multi-hazard mitigation	n plans	Policy in Place	
Energy efficiency State energy efficiency score	ecard	No Policy	0
Comprehensive livability comm	nitment te age-friendly communities	No Policy	0



52 PREVENTION, ACCESS AND QUALITY

Community conditions influence health behaviors. Healthy communities have comprehensive smoke-free air laws, offer easy access to exercise opportunities, and have high-quality health care available. Because health is so deeply related to quality of life, many other categories of livability in this Index include metrics related to health. For example, access to healthy foods, jobs and education, number of walk trips, lower speed limits, social engagement measures, and air and water pollution are all related to health. Where you live matters.

Attribute Measure		Median US Neighborhood	Value
Healthy behaviors Smoking prevalence	Estimated smoking rate: measured at the county scale, lower values are better.	20.5%	18.7%
Healthy behaviors Obesity prevalence	Estimated obesity rate: measured at the county scale, lower values are better.	28.9%	27.6%
Healthy behaviors Access to exercise opportunities	Percentage of people who live within a half-mile of parks and within 1 mile of recreational facilities (3 miles for rural areas): measured at the county scale, higher values are better.	90.7%	65.5%
Access to health care Health care professional shortage areas	Severity of clinician shortage: measured at the health professional shortage area scale from 0 to 25, lower values are better. Read more about Health.	0	4
Quality of health care Preventable hospitalization rate	Number of hospital admissions for conditions that could be effectively treated through outpatient care per 1,000 patients: measured at the hospital service area scale, lower values are better.	48.5	38.0
Quality of health care Patient satisfaction	Percentage of patients who give area hospitals a rating of 9 or 10, with 10 indicating the highest level of satisfaction: measured at the hospital service area scale, higher values are better.	71.3%	73.7%
Policies			
Healthy behaviors State and Local Smoke-Free Laws		No Policy	0
Comprehensive livability commitment state and local plans to create age-friendly communities		No Policy	0



60 ENGAGEMENT CIVIC AND SOCIAL INVOLVEMENT

A livable community fosters interaction among residents. From social engagement to civic action to Internet access, residents' individual opportunities to connect and feel welcomed help lessen social isolation and strengthen the greater community. The Index explores and examines the different ways in which residents engage with and support their communities, and how they impact livability as a whole.

Attribute Measure	Median US Neighborhood	Value		
Internet a Broadbar speed	ccess nd cost and	Percentage of residents who have access to three or more wireline Internet service providers, and two or more providers that offer maximum download speeds of 50 megabits per second: measured at the neighborhood scale, higher values are better.	14.6%	0.0%
Civic enga Opportur involvem	ity for civic	Number of civic, social, religious, political, and business organizations per 10,000 people: measured at the county scale, higher values are better.	7.0	16.6
Civic enga Voting ra		Percentage of people ages 18 years or older who voted in the last presidential election: measured at the county scale, higher values are better. Voting rates are bounded at 30% and 85%.	55.6%	78.4%
	gagement volvement	Extent to which residents eat dinner with household members, see or hear from friends and family, talk with neighbors, and do favors for neighbors: measured at the metro area scale from 0 to 2, higher values are better.	0.98	0.80
Social end Cultural, entertain institutio	arts, and ment	Number of performing arts companies, museums, concert venues, sports stadiums, and movie theaters per 10,000 people: measured at the neighborhood scale, higher values are better.	0.1	0.3
Policies				
Internet Access State barriers to	o community	broadband	No Policy	0
Civic engageme Early, absentee		ate voting laws	No Policy	0
Equal rights Local human rights commissions			No Policy	0
Equal rights Local LGBT anti-discrimination laws			No Policy	0
Comprehensive livability commitment State and local plans to create age-friendly communities			No Policy	0



50 © OPPORTUNITY INCLUSION AND POSSIBILITIES

America was built on opportunity—and our nation's many thriving communities are no different. The degree to which a community embraces diversity and offers opportunities to residents of all ages and backgrounds is important to overall livability. Backed by a strong regional economy and fiscally healthy local governments, welcoming communities provide residents an equal chance to earn a living wage and improve their well-being, from jobs to education.

Attribute Measure			
Gini coefficient (the gap between rich and poor): measured at the county scale from 0 to 1, lower values are better.	0.46	0.51	
Number of jobs per person in the workforce: measured at the metro area scale, higher values are better. Jobs are capped at 1.0 job per person.	0.77	0.83	
Adjusted 4-year high school cohort graduation rate: measured at the school district scale, higher values are better.	87.0%	92.0%	
Age-group diversity of local population compared to the national population: measured at the neighborhood scale from 0 to 1, higher values are better.	0.86	0.82	
thiness	No Policy	0	
	No Policy	0	
y and Medical Leave Act	No Policy	\bigcirc	
nitment te age-friendly communities	No Policy		
	and poor): measured at the county scale from 0 to 1, lower values are better. Number of jobs per person in the workforce: measured at the metro area scale, higher values are better. Jobs are capped at 1.0 job per person. Adjusted 4-year high school cohort graduation rate: measured at the school district scale, higher values are better. Age-group diversity of local population compared to the national population: measured at the neighborhood scale	and poor): measured at the county scale from 0 to 1, lower values are better. Number of jobs per person in the workforce: measured at the metro area scale, higher values are better. Jobs are capped at 1.0 job per person. Adjusted 4-year high school cohort graduation rate: measured at the school district scale, higher values are better. Age-group diversity of local population compared to the national population: measured at the neighborhood scale from 0 to 1, higher values are better. No Policy thiness No Policy y and Medical Leave Act	



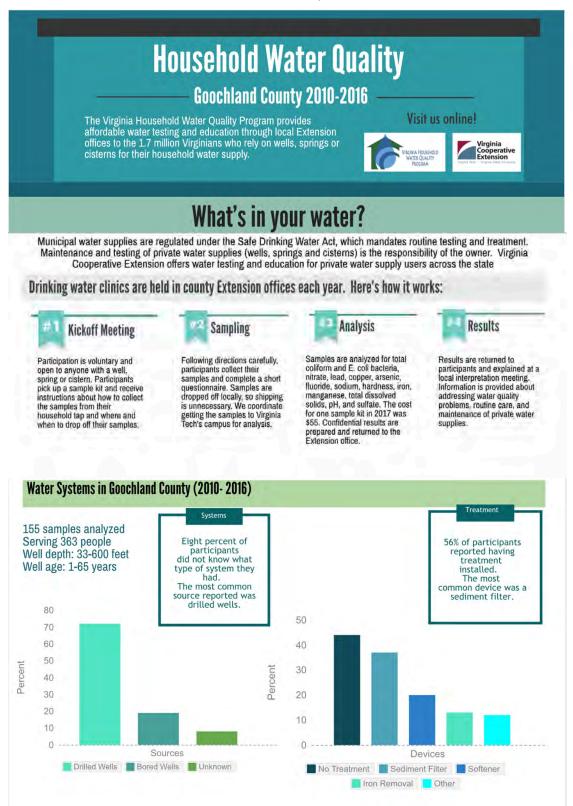
F. Goochland County Community Assets List

	Social, Spiritual	Mental, Emotional	Physical	Environmental, Neighborhood	Education, Occupation	Economic
Goochland YMCA	x		x		X	
Boy and Girl Scouts (including camp)	x	х	X	х	х	
Business Community (provide funding & volunteers)	x	X			X	X
Chamber of Commerce	x				x	X
Chiknegg Incubator Kitchen (cooking classes)	x		x			X
Churches, Church Associations, & Places of Worship	X	x		x		X
Clean Environment			х	x		
Community Action Program (Social Services provides emergency services, partners with schools, home repairs)		x	x	х	X	X
Community Partners	x				X	
Cooperative Extension Office	x	х	X	х	х	X
Day Cares (need more)	x	X	x		X	
Local Dentists			x		x	
<u>Domestic Violence</u> <u>Program</u>		х	х	X	х	
Engaged, Supportive Government (DSS, schools, CSB, Health Dept., Courts, CSA)	X	X	x	x	х	X

Family Treatment Court		х			X	
<u>Farmers' Markets</u>	х		х	x	X	
Farming/Agriculture	x	х		х	X	х
Feed More	х	х	х			
Fire & EMS			х	x		
Goochland Cares	х	х	х	x		х
Goochland CASA	х					
Goochland Christian Churches Association	X					
Goochland Pet Lovers	x	X	x			
Habitat for Humanity		x		x		x
Historical Society				х	х	
J Sargeant Reynolds Community College (GED/ESL)					x	X
James River	х		х	х		
Knight Bowles	х					
Large # of volunteers & opportunities to volunteer	х			х		X
Lions Club	x			х		
LL Bean River Recreation Classes	х		Х	х	x	x
Safe Community		х		х		
Meals on Wheels			х			х
MEDARVA			Х			

Mental Health Therapists (private counselors)		x				
Open Land/ Green Spaces			x	х		x
Pamunkey Library	x				x	
Parks & Recreation (places/programs; improved facilities, increase # of classes)	X		x	х	x	
Physicians			x			
Rotary	x			x		x
Rural Substance Abuse Awareness Coalition			X		х	
Public School System	x	х	x	x	х	x
Senior Connections	x	Х	x	x	х	
Sheriff's Office		X	x	x		
Social Services SNAP		X	x			
Women's Correctional Facilities (roadside cleanup, thoroughbred program, etc.)		x		x	x	
Supportive Boards of Supervisors				х		x
Supportive School Board					x	x
Wealth						x
West Creek			х			x
West View on the James	x	x	X		x	
Workforce Development					x	x

G. Household Water Quality (2010-2016)



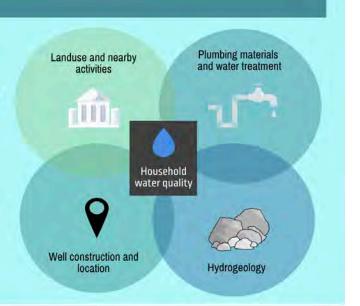
Where do contaminants come from?

Contaminants in water may be health-related (e.g., bacteria) or a nuisance (e.g., hardness causing scale) and can come from a variety of sources.

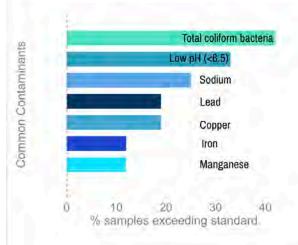
Some contaminants originate from geology, the sediment or rock where the water is stored. Others are a result of land usage or activities on the earth's surface, such as lawn fertilizer, animal waste, or chemical spills.

Proper construction of a well can protect household water quality by preventing surface water, which may carry many contaminants, from entering the groundwater supply. Wells should be constructed with proper casing, grout seal, and a sealed well cap. Contamination sources, such as livestock and septic systems should be at least 50 feet away from the well head.

Treatment devices and plumbing components can also influence water quality by adding contaminants or changing water chemistry.



Household water quality in Goochland County: Common Contaminants



The most common contaminants found in household water in Goochland County were total coliform bacteria, low pH, sodium, lead, copper, iron, and manganese.

Total coliform bacteria presence is an indication that surface water may be entering a well and other more harmful microorganisms may be present. Total coliform was found in 42% of the Goochland County samples.

Low pH (<6.5) can occur naturally in parts of Virginia geology. pH below 6.5 was found in 33% of samples. Although not a concern in itself, low pH can be a driver of how corrosive the water is. Once the water enters the house it can result in metals such as copper and lead leaching into the water from plumbing components that contain these metals, such as brass fittings or copper

pipes.
Sodium concentrations above recommended levels are most likely the result of water softeners, used to remove hardness. Sodium can have negative health effects in excess levels.

For more information about other common contaminants, please visit our Resources Page.

Special thanks to the residents of Goochland County who participated in the Virginia Household Water Quality Program drinking water clinics. Extension agents Rachel Grosse and Bob Whitehead, among other partners, were instrumental in the program's success.

Virginia Household Water Quality Program Email: wellwater@vt.edu Ph: 540-231-9058



www.wellwater.bse.vt.edu

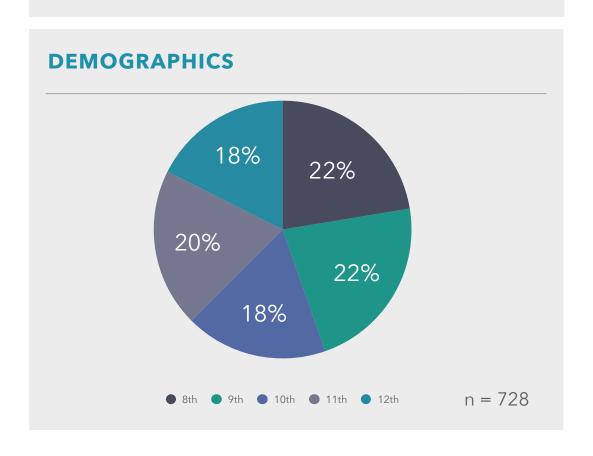
www.ext.vt.edu

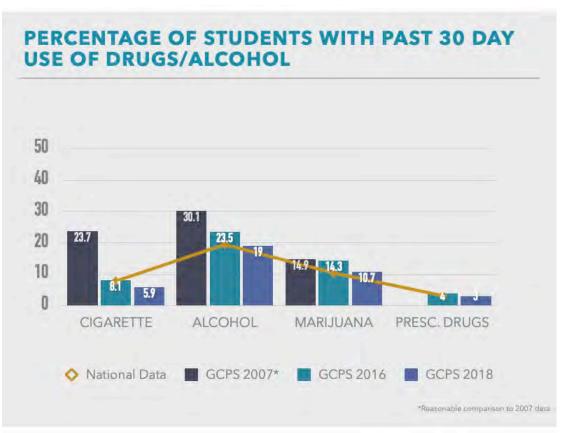
Virginia Cooponinine Evanission programs and employment see open to all implement of ligit, color, a challetts, genduic growine source, growine sources, growine returnscent of Coopening and Coopenin

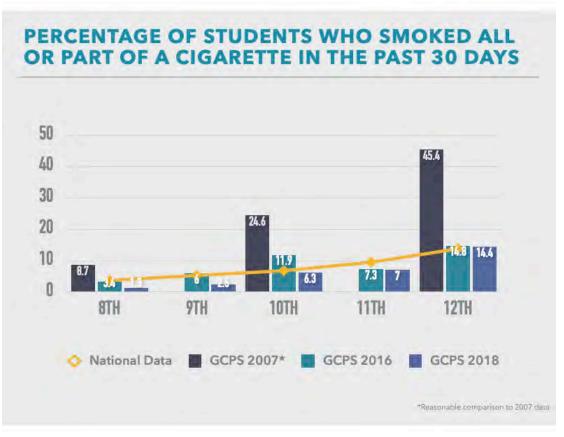
H.Pride Survey

PRIDE SURVEY QUESTIONNAIRE SUMMARY

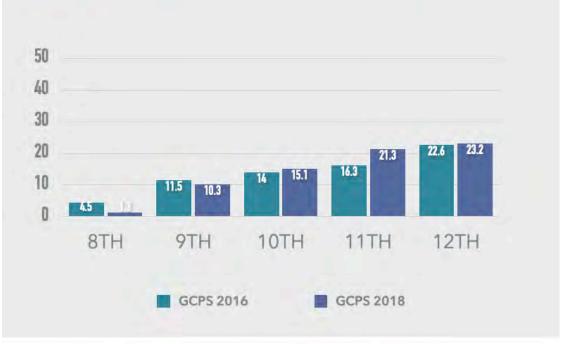
GOOCHLAND SCHOOLS





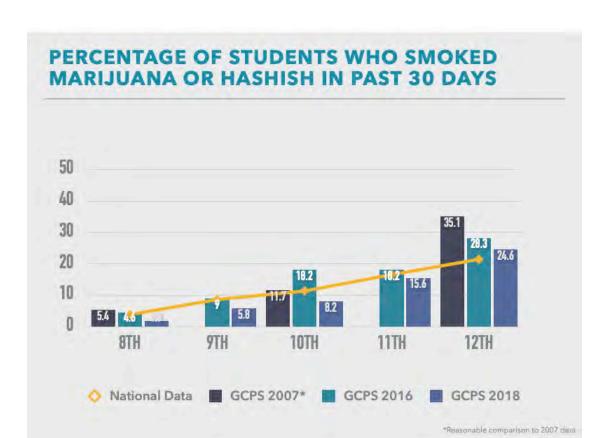


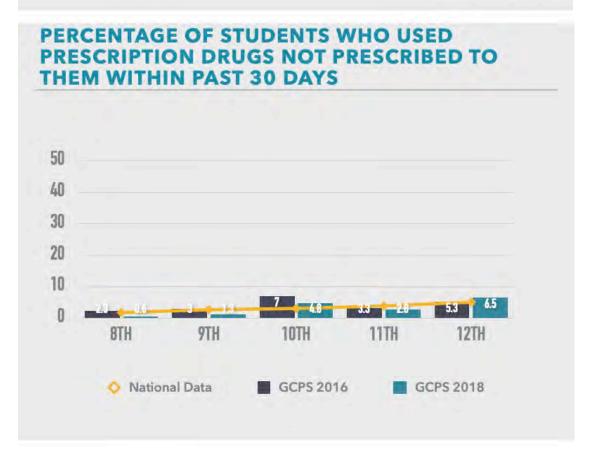


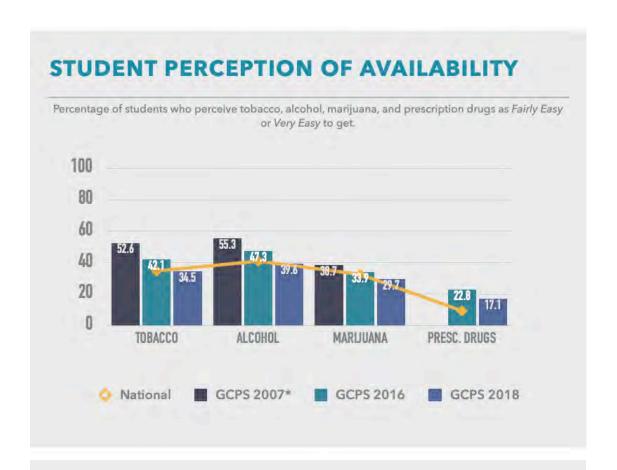


PERCENTAGE OF STUDENTS WHO DRANK ALCOHOL IN PAST 30 DAYS









STUDENT SUPPORTS/ RESOURCES

Increase academic and social competence

- ▶ Life Skills Training Grant
- D.A.R.E.
- ▶ Participation on the Rural Substance Abuse & Awareness Coalition (RSAAC)
- ▶ Health Education
- Staff & Community-Based Mentors
- ▶ Individual & Group Counseling
- ▶ Olweus Bullying Prevention Program
- Special Events/ Activities
- Medication Disposal Bags

NALOXONE IN SCHOOL CLINICS

CONSIDERATIONS

Pros Cons

- Cost
- Ease of administration
- Limited side effects/ risks associated with administration
- Availability (if needed in an emergency)

- Liability

I. Family Planning Surveys (English & Spanish)

Thank you for taking our survey! We would like to learn what you know about Family Planning and Health Department services, and how we can improve. The goals of the family planning services are to reduce surprise pregnancies, allow women to be able to wait between pregnancies, and improve women and children's health by assuring access to quality reproductive health services.

egna	ncies, all	ow women to be able to wait between pregnancies, and improve women and children's health by assuring access to quality reproductive health services.
1.	Do vou	feel like you are currently getting the family planning (FP) services you need?
	a.	Yes
	b.	No
2.	Do you	receive FP services at the health department?
	a.	Never
	b.	Used to, no longer
	c.	Yes, currently
3.	If not, w	hy not? (Circle as many as you'd like)
	a.	The hours are not good for me
	b.	I go to a private doctor
	c.	Wasn't aware of these services at the health department
	d.	Other (please specify) :
4.	What h	ours would be best for you (morning, afternoon, evening)?
	a.	
5.	Are you	aware of long-acting reversible birth control (LARC) methods (such as IUD or implant)?
	a.	Yes, very well
	b.	A little
	C.	No
6.	-	ou aware the health department offers the following services? Circle the services you were aware
	of:	
	a.	Pre-conception testing and treatment
	b.	Pap smear and breast exam
	C.	Long-acting reversible contraceptives
	d.	Natural family planning methods
	e.	Maternity care
	f.	Vaccination services
_	g.	STI (sexually transmitted infections) screening and treatment
7.		o you like about your doctor (if you see one) that the health department doesn't have?
0	a.	Please specify: ou aware you could come to the health department with or without insurance?
8.		ou aware you could come to the health department with or without insurance?
	a.	Yes
0	b.	No
9.		would you look to find out what services the HD provides? Website
	a.	website

b. Facebook

c. Other (please specify): _____

CHICKAHOMINY

HEALTH DISTRICT

¡Gracias por completar nuestra encuesta! Nos gustaría conocer qué sabe sobre los servicios del Departamento de Salud y Planificación Familiar, y cómo podemos mejorar. Los objetivos de los servicios de planificación familiar son reducir los embarazos sorpresivos, permitir que las mujeres puedan esperar entre embarazos y mejorar la salud de las mujeres y los niños al asegurar el acceso a servicios de salud reproductiva de calidad.

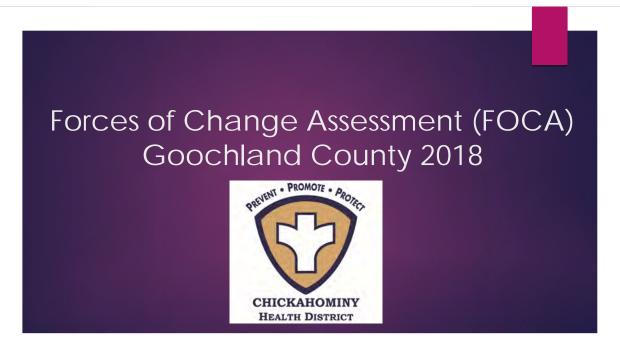
1.	¿Siente	que actualmente está recibiendo los servicios de planificación familiar que necesita?					
	a.	Sí					
	b.	No					
2.	Recibe	e servicios de PF en el departamento de salud?					
	a.	Nunca					
	b.	Los recibía antes, pero ya no					
	c.	Sí, actualmente					
3.	De no s	er así, ¿por qué no? (Encierre en un círculo todos los que quiera)					
	a.	Los horarios no son buenos para mí					
	b.	Voy a un médico privado					
	c.	No sabía de estos servicios en el departamento de salud					
	d.	Otro (especifique) :					
4.	¿Qué h	orario sería mejor para usted (mañana, tarde, noche)?					
	a.						
5.	¿Conoc	e los métodos anticonceptivos reversibles de acción prolongada (LARC) (como el DIU o el					
	implant	re)?					
	a.	Sí, muy bien					
	b.	Un poco					
	c.	No					
6.	Sabía que el departamento de salud ofrece los siguientes servicios? Encierre en un círculo los servicios de						
	los cual	es está enterada:					
	a.	Pruebas previas a la concepción y tratamiento					
	b.	Prueba de Papanicolaou y examen de los senos					
	c.	Anticonceptivos reversibles de acción prolongada					
	d.	Métodos naturales de planificación familiar					
	e.	Cuidado de maternidad					
	f.	Servicios de vacunación					
	g.	Detección y tratamiento de ITS (infecciones de transmisión sexual					
7.	¿Qué le	gusta de su médico (si ve uno) que el departamento de salud no tiene?					
	a.	Por favor especifique:que puede venir al departamento de salud con o sin seguro médico?					
8.	¿Sabía	que puede venir al departamento de salud con o sin seguro médico?					
	a.	Sí					
	b.	No					
9.	¿Dónde	e averiguaría cuáles son los servicios que ofrece el departamento de salud?					

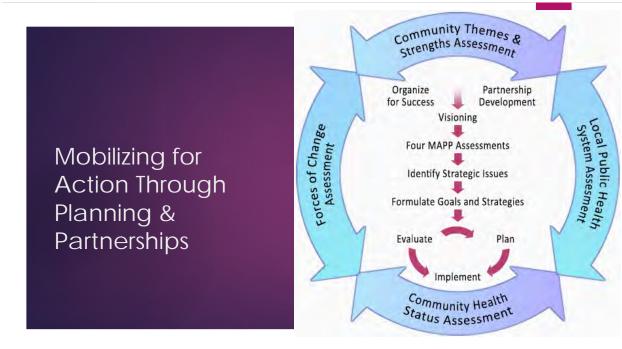
a. Sitio web b. Facebook

c. Otro (especifique): _____



J. Forces of Change Presentation





Agenda

Welcome & Introductions
Overview of the FOCA
Community Health Assessment Progress to Date
Determinants of Health
Identify Factors, Threats, & Opportunities – Group Activity
Prioritize Forces
Moving Forward

Forces of Change Assessment

- ▶ What is it?
 - ▶ A way to identify forces that are influencing (or will influence) the health and quality of life in the community
 - ▶ Part of our comprehensive Community Health Assessment
 - ▶ Attempts to answer the question: What threats or opportunities are generated by changes in the County?
 - ▶ We will sort the forces into 8 categories: economic, environmental hazards, neighborhood & built environment, legislation & policies, social & culture, science & technology, education, and health care

Today's Inspiration

Goochland County's Community Health Assessment (CHA) Steering Committee Vision Statement:

"An active, engaged, and safe community where all Goochland residents have opportunities to access the resources necessary to live fulfilling & healthy lives."

Community Health Assessment (CHA) Progress

Steering Committee Monthly Meetings (March - November 2018)

- ▶ Orientation to Process
- ▶ Identifying Assets
- ▶ Shared Vision
- ▶ Windshield Surveys
- ► Health Rankings
- ▶ Quantitative Data

Community Health Assessment (CHA) Progress

- ▶ Activities Continued...
 - ▶ "5 Why's" Root Cause Tree Analysis
 - ► Family Planning Survey
- ► In Progress
 - ► Community Listening Sessions
 - ▶ FOCA
 - ▶ Draft of the CHA Report

The Community Health Assessment leads to the Community Health Improvement Plan (CHIP) – specific strategies & action oriented

Determinants of Health



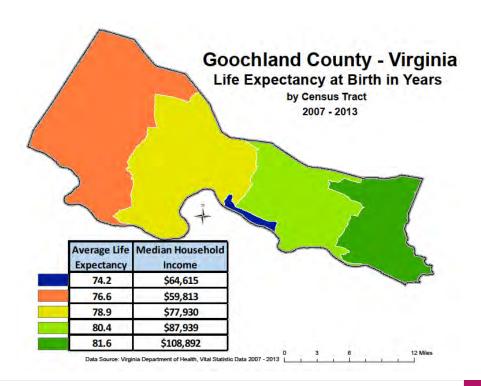
Zip Code Impacts Your Health

"Tale of Two Zip Codes" by Health Happens Here:

https://youtu.be/Eu7d0BMRt0o

County Health Rankings

- ▶ How does Goochland County rank?
 - ► http://www.countyhealthrankings.org/app/virginia/2018/rankings/goochland/county/outcomes/overall/snapshot
 - ▶ 14th out of 133 jurisdictions in Virginia for Health Outcomes
 - ▶ 10th out of 133 jurisdictions in Virginia for Health Factors
- ▶ Health Outcomes Map
- Health Factors Map
 - ▶ http://www.countyhealthrankings.org/app/virginia/2018/downloads



Forces of Change can be...

- ▶ Trends are patterns over time migration in and out of a community or a focus on development in one area of the community
- ► Factors are discrete elements large ethnic population, urban/rural settings, increase in funding/resources
- ► Events are one-time occurrences a hospital closure, a natural disaster, or passage of new legislation/regulations

How do we define threats and opportunities?

Your Thoughts

- ► For each question, write down your idea on the sticky notes provided
 - ▶ One idea per sticky note
 - ► Everyone's idea is worth including
 - ▶ Place your sticky note under the theme your idea best fits (large papers hung around the room)

Your Thoughts

What has occurred recently that may impact the health of the Goochland County community?

Your Thoughts

What may occur in the next 5 - 10 years that impacts the health of the community?

Your Thoughts

What forces are occurring...

- ► Locally?
- ► Regionally?
- ► Statewide?
- ▶ Nationally?

that may impact Goochland County's health?

Review the Forces of Change Identified

Take a few minutes to walk around and read each others' ideas

- ▶ What are the overarching themes?
- ▶ What is missing?
- ▶ Is there a certain group (or groups) of community members who may be impacted the most?

Opportunities & Threats

- What forces of change may pose an opportunity for Goochland County?
 - ▶ What is the benefit?
 - ▶ Who could benefit?
- ▶ What forces of change may pose a threat to Goochland County?
 - ▶ What is the harm?
 - ▶ Who could be harmed?

Barriers to Achieving the CHA Vision

What may occur or has occurred that would pose a barrier to achieving the CHA vision?

"An active, engaged, and safe community where all Goochland residents have opportunities to access the resources necessary to live fulfilling & healthy lives"

Is there a solution?

Prioritize

Which forces are most important to the health of the Goochland County community?

► On the worksheet provided, write down your top 3 & state why they are priorities for the community



Moving Forward

- ▶ How will information collected today be used?
 - ► A summary of the FOCA will be shared with you all & with the CHA Steering Committee members
 - ▶ FOCA will be incorporated in the CHA report
 - ▶ The Forces of Change themes & priorities, along with other projects/information collected during the CHA process, will be used to identify key issues, formulate goals & strategies (CHIP process)

Thank you!

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K. Goochland County's Forces of Change Assessment

Forces of Change Assessment				
Economic Forces *1	otal Number of Times Referenced			
Population growth	15			
Large aging population	10			
Rising housing costs & need for affordable housing	9			
New residential developments	7			
Increase in medical services	6			
Increase in new businesses	6			
New job opportunities	3			
Increase in revenue from residential taxes	2			
Low unemployment	1			
Environmental Hazards				
Fear of bio-solids being unsafe/bad smell	<mark>5</mark>			
Car accidents & increase in traffic	4			
Climate change and dangerous weather events	2			
Pressurized chorine tanks	1			
Relaxed federal environmental regulations	1			
Contamination of wells/drinking water	1			
Neighborhood & Built Environment				
Rising housing costs & need for affordable housing	9			
New residential developments	<mark>7</mark>			
Increasing and improving parks & trails	<mark>4</mark>			
Infrastructure improvements and renovations to roads	3			
Limited transportation access & options other than personal	3			
vehicles				
Food desert in western part of the County	2			
Legislation & Policies				
Medicaid expansion	9			
Election outcomes (at all levels of gov't)	<mark>6</mark>			
Re-zoning & higher density in specific areas	<mark>6</mark>			
Budget limitations & priorities (local and state)	4			
Affordable Care Act (ACA)	4			
Full-staffed emergency services	2			
Step VA implementation	1			
General Assembly response to rising tuition for private day	3			
education placements for children with disabilities				
Federal funding of defense, security, & disasters	1			
Social & Cultural Context				
Opioid crisis/substance abuse	<mark>11</mark>			
Large aging community	<mark>10</mark>			
Political climate (red v. blue)	4			
Parks & Rec programs for all ages	3			
Cannabis movement	2			
Trust/acceptance of services like Uber	2			
Desire to keep rural identity	1			

Need to build trust with sectors of the community	1
Culture of being proud/independent so those in need do not	1
ask for or accept assistance	
Science & Technology	
Improve internet access/broadband expansion	8
Telehealth/telemedicine	5
Further studies on the safety of bio-solids	5
Advances in medical technology	2
Electric and self-driving vehicles	1
New medications and drugs (e.g. synthetic opioids)	1
Education	
High ranking/achieving public schools	3
General Assembly response to rising tuition for private day	3
education placements for children with disabilities	_
Technical education & trade schools	2
New school to accommodate growing population	1
Homeschooling movement	1
Changes to programs offered at J. Sargent Reynolds	1
Community College	
Need for more health care education to increase local	1
workforce	
Health Care	
Opioid crisis/substance abuse	<mark>11</mark>
Large aging population	<mark>10</mark>
Medicaid expansion	9
Increase demand/focus on mental health services	7
Expansion of medical resources	6
Goochland Cares	6
Increase in public safety & Fire/EMS funding and personnel	6
Telehealth/telemedicine	5
West Creek Emergency Center	5
ACA	4
MedaRVA	3
Sheltering Arms	3
Continuing Care facilities	2
HCA (full service hospital) facility	1
YMCA's diabetes programs	1

^{*}Total Number of Times Referenced: This was calculated based on counting responses from the determinants of health activity where participants placed sticky notes under health categories in addition to the notes taken while discussing participants' answers to the three main questions of the FOCA. One force can be under multiple categories – for example, the force *Opioid crisis/substance abuse* is under the two categories: **Health Care** and **Social & Cultural Context** and this force was referenced 11 times total during the activity and discussion.

L. Community Listening Session Notes

Question One: How do you define a healthy community?

Session Notes 10.30.18: Jerusalem Baptist Church

- Family connections family trusts the family and depends on each other
- Taking care of each other & sense of community like this senior program that is part of this faith community- it helps to lift their spirits/decrease loneliness
- Environment free of hazards (like bio-solids with unknown risks to health)
- Access to resources

Session Notes 11.28.18: Goochland Cares

- A healthy community should not have hunting. It's unhealthy and ethically wrong (animal cruelty).
- Getting everything to meet daily needs. Access to stores.
- A community that provides physical, social, and spiritual resources. Access to stores, community
 resources and doctors. Social resources, especially in the rural setting. Spiritual no matter what
 religion. Support family relationships and activities.

Session Notes 11.28.18: The Y

- In terms of physical needs, medical services and access to resources.
- Infrastructure, safety, and response of services.
- Low crime rate.
- A desirable place to live that meets needs, active with people visibly involved in social activity and physical activity.
- Social interaction that addresses spectrum of wellness for all ages.
- Social interaction across location (Geography) addressing diversity/connectivity across smaller communities/neighborhoods.
- Inclusion and awareness of differences.
- Welcoming and collaborative.
- Faith and spiritual wellness.
- Engagement in continuous improvement.

Session Notes 12.5.18: Goochland Cares

- An environment where people can get outside and enjoy open spaces outdoor lifestyle that's peaceful and there is nature.
- Having access to care because getting/paying for health insurance can be difficult for some.
- People here are dedicated to making the community healthy so much volunteerism (ex/ Christmas Mother, CASA, Goochland Cares).
- People are willing to give their time and contribute money to make this a good place to live.

Session Notes 12.5.18: Goochland Library

- Transportation to activities (like to the YMCA) be provided for people who do not drive maybe the YMCA could provide a shuttle for adults without transportation
- Safer to walk (not safe in most of Goochland)
- Affordable places to workout (YMCA has a sliding scale, but people need more information about it)
- Parks & Rec that has more activities for adults kids use a lot of the facility so there isn't room for adults
- Expand pickle ball healthy activity for adults
- Have a place to swim (Parks & Rec should have a pool)

- Affordable rides to places like the grocery store, pharmacy, restaurants
- Link transportation to Richmond (some insurance will help with this for medical appointments, but not for other appointments/activities)

Session Notes 12.17.18: Goochland Sports Complex

- Physical health is the basis/minimum needed to do anything else without this, you can't really have a healthy community
- A sense of wellbeing
- Rural nature of the county, parks that we enjoy, farms, healthy environment
- Adding other cultural events (music/arts) can be held at the breweries and wineries that are becoming more popular
- Anything that entails wellbeing whether it's financial, spiritual, mental, physical, the whole being of a person

Common Key terms and Themes for Question One.

- Access to transportation
- Access/information about community services and resources
- Social/cultural events
- Healthy outdoor environment
- Physical health/wellbeing
- Faith and spiritual wellness

Question Two: What services or features are missing in your community that would improve quality of life?

Session Notes 10.30.18: Jerusalem Baptist Church

- Tax rates- even though tax rates are low the number of higher dollar housing being built in Goochland make assessments higher in turn making tax payments higher
 - Relates to a concern for potentially losing land that's been in their family these types of increases need to be controlled and examined
- How land division is affecting long-term property owners who are not allowed to divide parcels of family land. (e.g. 7.5 acres of land in Manakin only allows one house, couple would like to give each of their three children a 2.5 acre parcels) This would allow them to care for each other and obtain assistance from their adult children with transportation etc. (intergenerational care)
- Better regulations regarding bio-solids entering the County (causing a bad smell, increase in flies, fears related to its safety, etc.) and the community wishes they were given an opportunity to voice their concerns prior to these types of products being used
- Affordable internet access (those with access often can't afford it)

Session Notes 11.28.18: Goochland Cares

- There are services missing for kids. No recreational center for activities outside of school. Money seems to be used for the wrong resources- like the animal shelter.
- Hospital in Central Goochland. ER and/or Specialists.
- Low-income Housing
- Transportation and grocery stores.
- Ways to expand opportunities from the city into rural setting. Missing access and things like home
 visits based on location. Would like to see more CNA/PCAs to support aging population and youth. If
 they leave, they don't come back. Missing the workforce- driving students to stay and give back what
 they received.

Session Notes 11.28.18: The Y

- Adequate water and plumbing (even when given an opportunity and opt-out)
- Public transportation
- Medical resources (lack of specialists, mental health providers, substance abuse support)
- Housing (workforce, all ages, affordability, all income level, buying/renting)
- Choices in general and in providers, food/stores, limited opportunities. Pair that with lack of transportation and there's trouble. There are food deserts. Is this chalked up to nature of rural community?
- Balance in economic/commercial development.
- Internet Access (broadband improvement): job/school applications, effects all ages, affordability, "access to the world."

Session Notes 12.5.18: Goochland Cares

- Better internet is missing (high speed is hard to find outside of the Eastern part of the County) especially for businesses since they can't start or keep a business without high speed internet.
- More office spaces (maybe in the Eastern part) are needed for businesses that want to be in Goochland/support local jobs and improve income opportunities (this would support the tax base and keep people living & working in Goochland).
- ESL teacher experience made clear to me that there are not a lot of resources for people who speak Spanish (or other languages) so they aren't well connected to the community.
- Language barriers make it difficult to access resources and services, while also allowing for
 misinformation to spread in the Spanish-speaking community. These people need more contacts for
 help with navigating the community (can't just be the ESL teacher). Because so few staff speak
 Spanish, there can be a sense of fear/mistrust (also the current political climate is contributing).
- More staff need training in cultural competency and go out to see these families (more home visits) so they can better understand their lives – many live in extreme poverty, but it's hidden away from most of the community's view.
- I've encountered biases/community members not understanding why these folks "do not just learn English" many come from countries where they did not have a good education system, so they may have only reached a 2nd grade education, so that makes it so hard to learn a brand new language.
- These families also face barriers related to transportation (distance to places, do not have own vehicle, can't attend events).

Session Notes 12.5.18: Goochland Library

- Provide IDs (bracelets, necklaces) for people to wear who may need a responder to know their information during an emergency like a medical condition, allergies, etc.
- Transportation for people who want to work but cannot drive for example, Charlottesville had a bus that was only \$1.25 each way
- There are not enough local agencies who help people with disabilities getting back into the workforce
- Renters need more resources to help get things in their living spaces fixed (need an advocate to help them with the landlord)
- More affordable housing in Goochland County
- More patrols (Sherriff) for children crossing the street in different neighborhoods because people drive too fast
- More social/community events for adults like board games, card games, dances, cookouts, play Wii, bowling (Henrico Parks & Rec does a program like this for people with disabilities)

- Small adult homes that are nice (maybe for 2 roommates) for those with disabilities who want to live in the community/independently, but would like a roommate to share chores with and help each other
- Help with planning for continuing care after a family member is unable to do so (caregiver dies, is injured, becomes disabled)
- Advocate/help when going to doctor's appointments especially for those with memory loss because communication can be difficult

Session Notes 12.17.18: Goochland Sports Complex

- Aging population, particularly eastern end of the county, would be nice to have expanded primary care options and services for the older adults
- Bon Secours just opened an ER near the border of Henrico/Goochland but that's for emergencies
- Maybe Goochland could work with the big health systems in the area like Bon Secours, HCA, VCU, etc. to see if they will coordinate some services in the county (primary care clinics) most residents have to travel outside of the county for all types of care
- Goochland Cares provides transportation to some medical appointments even outside of the county, but that is only for their clients
- Losing some of the diversity of people/mix of all types of people from all walks of life in the county (dynamics are changing) - people who work in the county can't afford to live here, so now it's mostly upper-middle class without affordable housing
- Need places where the people who work here like teachers and deputies can afford to live
- Most developments being built are not affordable/ new housing isn't addressing this issue what is missing is a strategic initiative to address affordable housing in the county
- EMS services will need to develop/expand especially because of the aging population
- Expand services for example called rescue squad and they only has basic life support personnel available to dispatch, but it required Advanced Life Support (ALS) responders—there are not enough rescue personnel to have ALS support on every squad
- Both volunteers and paid persons staffing the fire stations county has hired enough paid firefighters that are trained and cover 3 stations 24/7, but it's difficult because of the lack of volunteer firefighters (some of the volunteers for Goochland do not live in the County)
- Goochland parents have raised kids who cannot afford to live in the county and had to move to Henrico to buy a home because there weren't affordable options here
- Broadband/internet access is an issue in Goochland "I would tell people to find out how you can be connected to the rest of the world before you move here." No having internet access causes problems for people trying to run businesses, families & if you do try to get a connection, right now it is extremely expensive with limited data and speed this is one of the only reasons I would leave the County the county needs to work on this
- More access to grocery stores and shopping- for example, Louisa put Dollar General right over line we don't have to become a "short pump," but we can have pockets of stores and shopping

Common Key terms and Themes for Question Two

- Affordable and high-speed internet access
- Access to more stores and shopping
- Growth in employment and commercial opportunities
- Affordable housing for purchase and rent
- More care options for the elderly (transport, medical services, in home care)
- More adult social events
- Transportation (to events, stores, appointments)
- Access/ information about services or protocol
- Cultural competency among community members and workers

Question Three: How do you currently get around your community?

Session Notes 10.30.18: Jerusalem Baptist Church

- Drive personal vehicle enjoy being independent, but know they may not be able to do this forever
- Rides from neighbors, family, friends
- Would like to not drive at night or in bad weather
- Would be more inclined to use a service like a shuttle bus (compared to an Uber) because they'd be part of a group/feel safer
- Henrico offers a program that provides rides on a bus for a Goochland resident to attend appointments
- Would be open to taking a group trip to Hidden Rock Park for a walk and picnic

Session Notes 11.28.18: Goochland Cares

- Drives a personal vehicle. No uber due to time and money. Would support public transportation
- Drives a personal vehicle. People would use public transportation like a bus or shuttle.
- Drives a personal vehicle. Walks around when at work (Goochland Cares). Sees people biking. Would support cost-effective transportation service.

Session Notes 11.28.18: The Y

- Everyone in the group drives a personal vehicle
- Walking is available for some around the central town area
- Recommend a shuttle, although wonder about use since Uber/Lyft services are inactive
- Elderly forced to move due to lack of driving/inability to drive later in life
- Senior Connections was mentioned, but there are limited options in the County
- Tough to bike on country roads

Session Notes 12.5.18: Goochland Cares

- I use a person vehicle do not see a public transportation/bus system coming to Goochland
- I provide transportation for my Mom who does not drive assume many others rely on rides from family members
- Mostly using a personal vehicle but the Latino/Hispanic community members likely would benefit from an affordable shuttle for trips across the County – many rely on rides from friends

Session Notes 12.5.18: Goochland Library

- Family provides rides
- Call or text a friend for a ride
- Drive my own car
- Few resources for rides if you are not a senior/older adult
- Family members who are caregivers do not get paid by insurance to give all the rides a person may need
- Uber is too expensive would like to visit a friend, but it's too expensive to take an Uber
- Charlottesville has Jaunt which helps with rides (ridejaunt.org)
- On weekends family members provide rides, so that's when I can do more
- Some residential facilities provide rides to their clients/patients, but if you live on your own, you do not have those rides, but you still need them

Session Notes 12.17.18: Goochland Sports Complex

- Drive own vehicle
- Used to jog and run around neighborhood near west creek but I've become too fearful of the rural roads and even more so of the wildlife (bears)
- Town of Goochland sidewalks need to be worked on because so many people run, walk through there or push strollers down the sidewalks and it is hard to do when they are in bad shape
- Enjoy walking around community/neighborhood because everyone is clustered together in my development
- Bike for recreation

Common Key terms and Themes for Question Three

- Most people drive their own vehicle
- Other main option is to get rides from family or friends
- Limited reliable, affordable transport
- Walking limited to the town due to lack of sidewalks in rural areas
- Lack of public transport

Question Four: How would you recommend making changes to your community and where would you start?

Session Notes 10.30.18: Jerusalem Baptist Church

- More communication regarding programs and resources for example, affordable medications, services of Goochland Cares
- Traffic concerns regarding being able to walk in community (non-subdivisions)
- County sponsored Rideshare Van (doctors' appointments, grocery store, activities)
- Clearer explanation of services/regulations for individuals that land borders Hanover/Louisa/Henrico
 improved communication between counties
- More food options (including different restaurants)
- Offer a class or lessons on how to use their smart phones to look up services/connect with family and friends – phones are confusing
- Test their well water
- Important to find out what's already happening in the county (programs, services) and then plug into those activities instead of creating someone brand new
- Consider a program like the Sunday School Bus, which had been used in the past for picking up children for Sunday School, but it also gave rides for anyone who needed them

Session Notes 11.28.18: Goochland Cares

- Bigger, better recreation center for kids of all ages to have after school programs.
- More schools to accommodate population growth.
- Why not bring urgent care to central Goochland?
- Dynamics of black woman, there are still issues here.
- Need to narrow down on racism and need to talk about it.
- Used to work for Jewish Family Services and held a diversity workshop. We all use certain language
 within our own cultures, but have names we do not call others or names we don't want to be called
 by others.
- Breaking down ethnicities and assumptions we make, because we don't know the history of a black woman with a white grandfather or the history of a white woman. We make assumptions.
- Having conversations at the county agency level with someone who is comfortable with topic would be good! More mental health providers are needed.

Session Notes 11.28.18: The Y

- Internet access
- Public transportation
- Housing
- Leveling resources by addressing health equity (ex. providing age/size specific bikes rather than giving everyone an adult size bike)
- Development
- Transportation (ex. east vs. west Goochland).
- What do we want Goochland County to be? Native vs. new County members have to work together to find happy-medium. Desires change with age.

Session Notes 12.5.18: Goochland Cares

- Ask that leaders of the County be advocates for citizens especially when working with large companies (negotiating internet, electrical repairs, other utility providers).
- Would also make health screenings more accessible to the community.
- Another library closer to the Eastern side of the County would be helpful place to collaborate, socialize, learn (especially for kids).
- A space for co-working would be helpful provide opportunities to network.
- Continue to improve the translation services at the schools; training for staff, administrators, and the general public on cultural competencies and basic Spanish this helps people feel more welcomed.
- More home visits by the school will lead to a better understand of what people in poverty are dealing with/put yourself in their shoes (but I'm unsure of many peoples' desire to help the Latino/Hispanic communities)

Session Notes 12.5.18: Goochland Library

- More awareness of available resources (sports/physical activity, Virginia House, skill building services) so that there will be more participation; need to advertise mental health services & the Virginia House
- More local skill building providers
- Affordable housing to support workforce that provides these types of services (like skill building)
- Provide more opportunities to get out in the community for people with disabilities volunteer in the community
- More awareness in the community of mental illness, disabilities, and traumatic brain injuries (TBI) to lessen the stigma
- Fix the potholes in the roads; remove debris/tree limbs faster from the roads; roads are not well lit, so it's hard to drive at night on the narrow roads and avoid the potholes/debris
- Affordable medical alert/IDs for people to wear

Session Notes 12.17.18: Goochland Sports Complex

- Everything has a cost with it we'd have to identify what the financial impact is going to be and priorities things based on what we are hearing from the community
- Affordable housing is not going to be an easy task "Leaders have to make that a strategic effort and a priority in order to figure out how to make it happen"
- Broadband is part of essential life today & it seems that the county would have to be instrumental in figuring out how many people want to buy into a broadband provider; hard to imagine not being able to get on the internet every single day

- Expand EMS and primary care services as the county becomes more populated will be in great demand the hospital systems seem to be in expansion mode and seem to have enough money to build new buildings (like diagnostic centers, which would cut down on travel times)
- More opportunities to have people of different backgrounds and generations connecting find out
 we have a lot in common (ex/ younger folks connecting with retired folks, mentoring programs)

Common Key terms and Themes for Question Four

- Access to information about community (services/resources)
- Affordable housing
- Affordable and accessible internet
- A more accessible community for the disabled
- Public transport
- Better translation services (schools, businesses, services)
- Improve infrastructure (roads/water sources)

Question Five: What do you love about your community?

Session Notes 10.30.18: Jerusalem Baptist Church

- Family
- Reasonably Quiet
- Space (less density)

Session Notes 11.28.18: Goochland Cares

- Lack of opportunity
- Nothing like where she lived outside of Atlanta.
- Loves the small-town feeling, inclusive and connectedness
- It's quiet
- Loves the peace, quiet, slower-pace, space, ability to relax at night, quaint atmosphere.

Session Notes 11.28.18: The Y

- Growth and opportunities from great schooling, school system excellence
- Access to community resources (the Y, Goochland Cares, local government)
- It's a giving community (money, time, and engagement)
- Involved in voting
- It has a collaborative spirit among community partners
- There's creativity for problem solving specific to Goochland
- It's "unique." Everyone in the group loves the rural aesthetic, country nature and location.
- It's a "20-minute drive to multiple locations like Charlottesville and Richmond."

Session Notes 12.5.18: Goochland Cares

- Goochland feels like home moved away but came back because of the friendly people; it's clean with a lot of nature, it's peaceful, not too much traffic, is holding onto it's rural character with the farms; not too densely populated but close to places you'd like to go/things to do.
- Many amazing people who live here contribute to the community and take action to provide resources.
- So many retired people give back and are willing to donate their time/money.

Session Notes 12.5.18: Goochland Library

- People are friendly in the County
- Sherriff/law enforcement are nice and will talk to you/be helpful
- Had an experience where a Sherriff sat with me until an ambulance arrived
- Some neighbors are nice
- Staff and friends at the Virginia House are nice
- Like the parks and scenery
- Like Goochland Day, Field Day of the Past, community events like parades & pig races! Have more of these!
- Lots of nice volunteers at Goochland Cares; volunteering makes you feel good and is fun

Session Notes 12.17.18: Goochland Sports Complex

- Small town feel of Goochland kids grew up in county playing youth sports and the support of the people here love that close community feel
- Found a community made up of people of retirement age we take care of each other and look out for each other, do activities together
- Bike group and do most rides in Goochland

Common Key terms and Themes for Question Five

- Friendly people
- Rural/small town feel
- Spacious

Question Six: Do you feel safe in your community: Why or why not?

Session Notes 10.30.18: Jerusalem Baptist Church

- Yes, fairly low crime and feeling safe when they go to sleep at night
- Traffic issues do not make them feel safe
- Increase in wildlife roaming near homes (bears and deer), potentially due to being displaced by increased development/construction

Session Notes 11.28.18: Goochland Cares

- Feels safe, although doesn't go outside at night due to wildlife
- Yes, on both accounts of crime and beliefs.
- Personally, yes, I feel safe.
- News makes it seem unsafe, but tries to live life without fear.
- Is very cautious and locks doors, checks surroundings and combats fear with caution and awareness (especially as a woman).
- There are issues with police department: some are kind, others are not.
- The reality is that people see color.
- Biases and stereotypes exist.
- People with mental health issues are a safety concern.

Session Notes 11.28.18: The Y

- Lights, "I feel safe in the dark" vs. street lights due to pollution, effect on bird migration, space, rural location.
- I feel safe...but still lock my car, because it's rural, but anything can happen, as safe as anywhere else.

- It's an accepting community that respects individuals (there are exceptions, ex. given of family needing special resources).
- The effort for acceptance is there. "We live in a bubble." How will the bubble be influenced by things going on around us? How long can we maintain it? It depends on perspective.
- There is lack of access to safety nets and accessibility for those with disabilities and the aging community.
- The aging community wants to age in place.
- Still addressing domestic violence and child abuse.

Session Notes 12.5.18: Goochland Cares

- Yes, I feel safe in most of the Richmond area in general, Goochland services (like Fire, EMS, Rescue) are good/kind people.
- I think there is a mixture of new folks moving in and people who have generations from here, but it's still inclusive.
- I feel safe in terms of crime, but some people may feel like they are labeled "out of towners" when they move here my experience with my family building a home here was hard the neighbors got up in arms (unhappy with change or things that seem out of the "norm").

Session Notes 12.5.18: Goochland Library

- Yes, it's quiet and like the wild life
- Yes, compared to other places I've lived; less crime here than in the city
- Yes, connection with law enforcement they check on us and seeing their car makes me feel safe
- Yes, I feel safe at home with my family

Session Notes 12.17.18: Goochland Sports Complex

- Feel very safe because of the rural nature of the community you tend to feel that way Maybe it's a false reassurance, but I've never felt uncomfortable in any situation
- When on bike, some people are vocal about not liking bikers on country roads & that sometimes makes me feel unsafe people do not know the laws around sharing the roads with bikers
- Feel safe in the county, but wildlife is more of a concern maybe it's due to increased building/new developments
- More concerned about aggressive drivers than anything else

Common Key terms and Themes for Question Six

- General feeling of safety
- Crime not a major concern
- Concern about unsafe drivers and road hazards (deer)
- Wildlife concern on property
- Road conditions need improvement (sidewalks, potholes fixed)
- Pedestrian and bike accessibility

M. Windshield Surveys

Goochland County Community Health Assessment Windshield Survey 2018

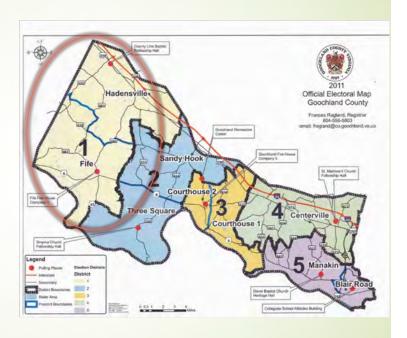
Windshield Survey

- Partners make observations from a vehicle using a survey guide
- Opportunity to learn about the community
 - Helps identify resources and needs
 - Identifies areas for further investigation
- Includes photos and descriptions from the point of view of community members
- Chance to highlight and compare different areas of the County
- A way to get a "feel" for the community

Background

- Volunteers trained: 55
- Total participants: 41
- Windshield surveys submitted: 18
- Timeframe: April 2018-July 2018
- Volunteers chose their partners and selected a part of the County to drive around (based on the 5 electoral districts)

District 1



History











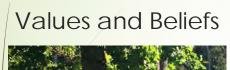
History



Hadensville Post Office and Trice Brothers Store Museum















Physical Environment





Economy





Rassawek Winery



Byrd Cellars Vineyard



Elk Island Winery

Economy



Convenience stores





Economy







New developments

Food Access



Local convenience store



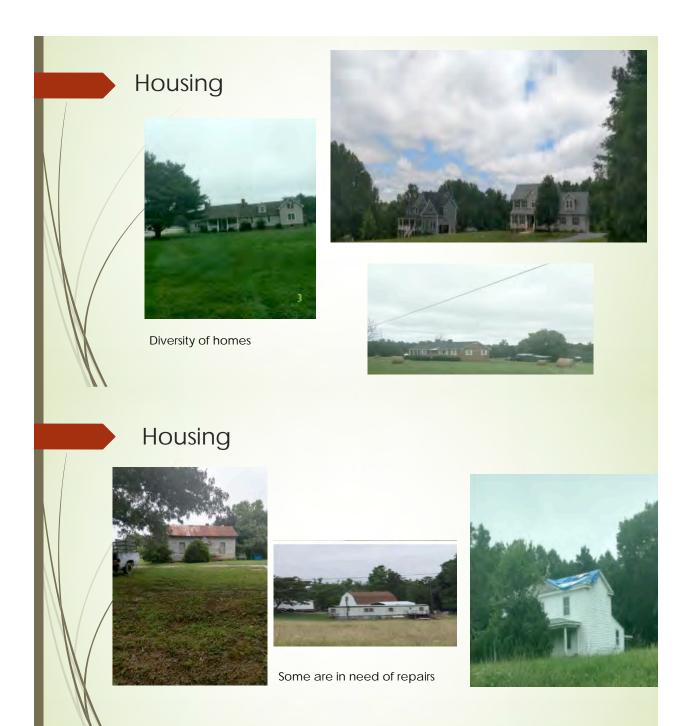
Many soda options for sale



Another convenience store next to a closed restaurant



Some produce sold



Safety





Fife Volunteer Fire Rescue Co. 4

Safety



New fire station in Hadensville



Local cell tower near fire station

Politics



Evidence of recent elections

Community Connectedness





Royal Virginian Golf Course

Community Connectedness





Goochland Drive-In Theater provides entertainment and jobs for locals & is a tourist attraction

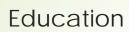
Community Connectedness



Hadensville Post office - flyers and community information



Community bulletin board





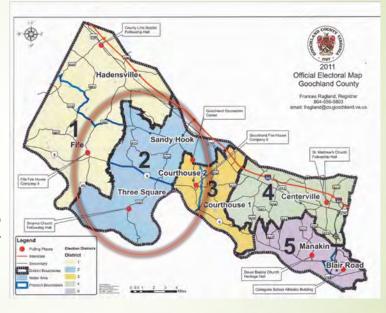


Byrd Elementary School

Recreation



Westview on the James



District 2

History



Example of a poorly maintained historic building (still in use as a business)



Old corner store and gas station - no longer in business

Physical Environment





Farms and Ranches

Economy



Fairly new Dollar General - only retail business in the area



Transportation

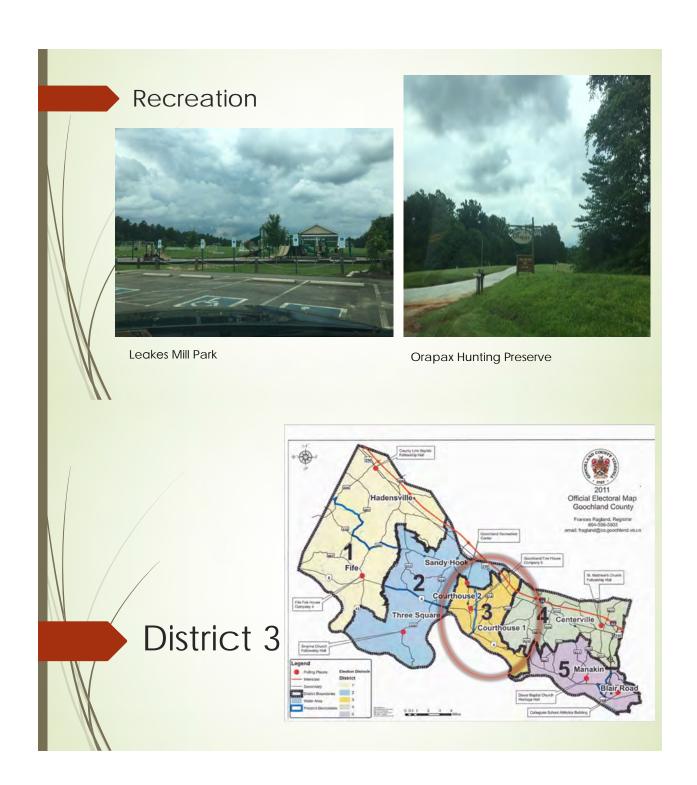


There are limited transportation options, however, Goochland Cares has a bus that takes clients to medical appointments

Community Connectedness



Gum Springs Post Office



History





Economy







Food Options





Locally owned restaurants and local produce

Transportation

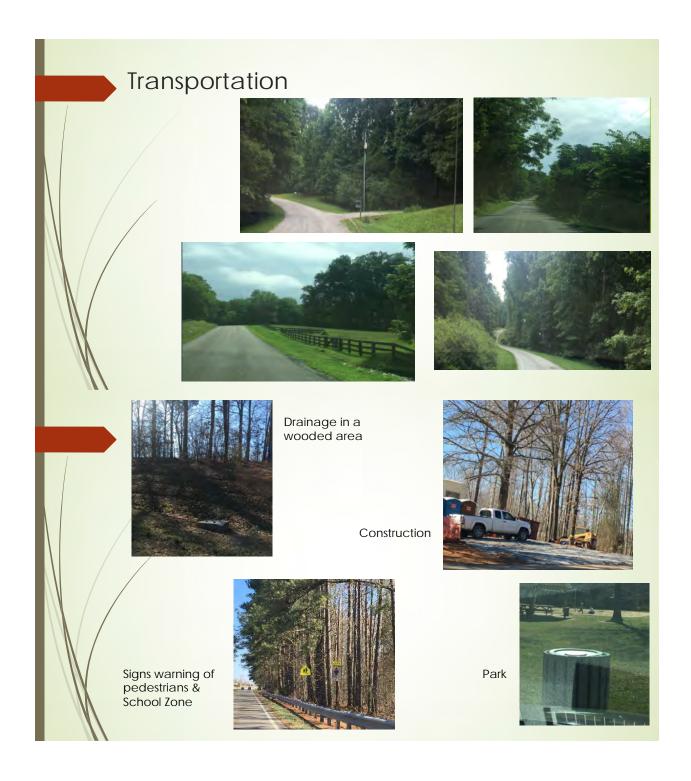








Most roads lack of sidewalks and wide shoulders - however, where there is sidewalk, it is used by pedestrians



Transportation





Signs for Court House, Camp Hilbert, Boy Scout Camps

Health Services





Housing









Safety



Community Connectedness





Masonic Lodge

Community Connectedness



Goochland County Branch Library





Reynolds Community College

Goochland High School



Goochland Technical School



Recreation









Tucker Park

Recreation



Boy Scout Camp



Camp Hilbert

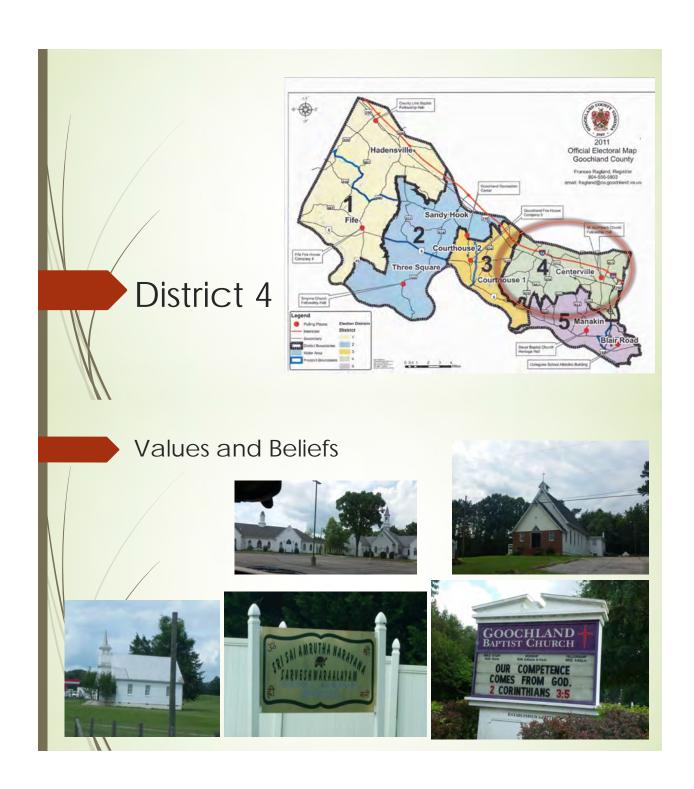
Recreation



Hidden Rock Park



Parks and Recreation Office



Physical Environment





Health Services



West Creek Emergency Center



Full service emergency department that operates as a campus of Henrico Doctors' Hospital

Economy





Locally owned businesses: Goochland Self Storage and Midnight Brewing

Economy



Large businesses offer employment opportunities





Food Access



Convenience, fast food



Full service grocery store

Transportation



Convenience store and gas station

Park & Ride allows for out-of-county employees to commute together





Food Access



Fresh produce/eggs & farmers' market





Economy



New community of 350+ homes to be built

Education



Adams International School



Randolph Elementary School



Salem Christian School

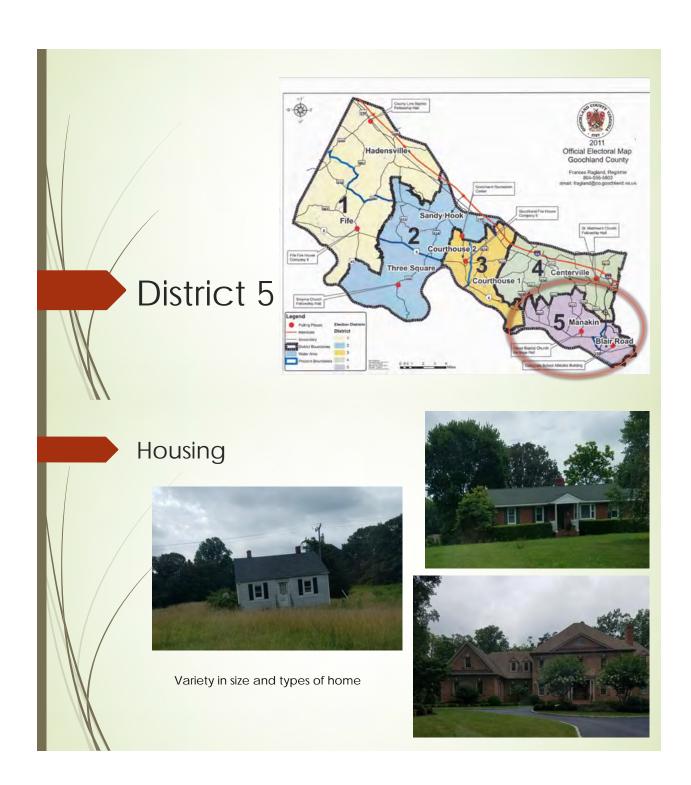
Recreation

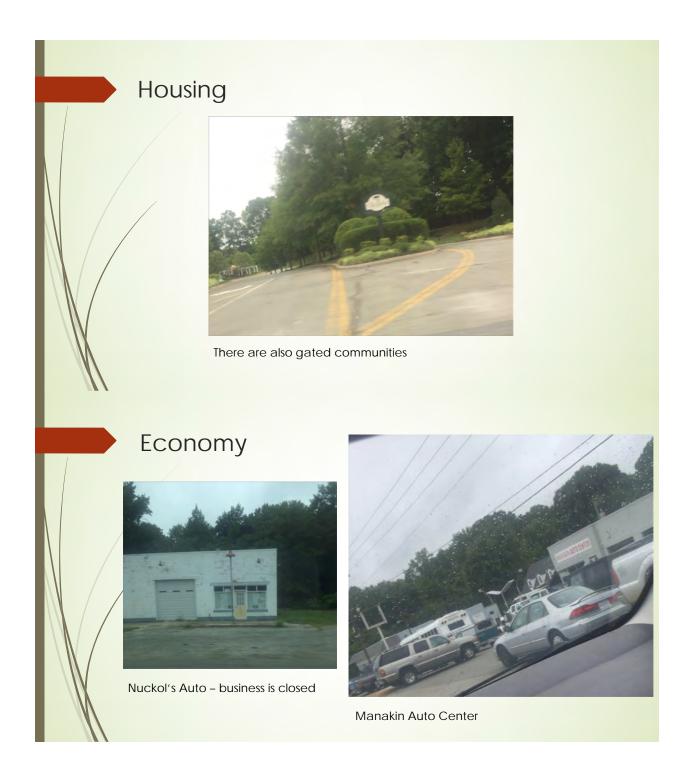


Golf course



Bogey's Sports Park





Economy



Citgo gas station

Safety



Fire Station

Health Services



Small physician's office

Thank you!

Thank you to volunteers representing Goochland Cares, the Goochland Family YMCA, Chickahominy Health District Medical Reserve Corps, local churches, and the Goochland CHA steering committee.

Special thank you to Mesa Willis, who interned with the Goochland Health Department and assisted in creating this presentation and the analysis of survey results!

Windshield Survey Responses per District
Please note, some survey responses have been paraphrased and/or revised for grammatical errors or to fit within the report tables. The responses below are examples from the 5 districts (not a comprehensive list of all responses).

District: 1	Summarized Survey Response
History: Is this an established neighborhood or new? Is there a specific history associated with this area that you know of?	Established rural area, older community with long established roots and history.
Demographics: Who lives in the community? Age? Families?	Mix of demographics in the area. Mostly family groups with older adults as well. Elementary school located in community.
Race & Ethnicity: Are there specific ethnic shops/ restaurants? Do particular groups seem to live in a certain area?	78% White, 1% Hispanic, 21.1% Black, 3.4% Asian. George Tavern Market, Demores Food Market/Liberty Gas, Frieda's Mexican Grill, Goochland Supermarket
Values & Beliefs: Are there places of worship? Do you see advertisements for support groups/types of care?	Mix of Baptist and Methodist churches predominantly. Some non-denominational churches noted.
Physical Environment: How does the community look? How much usable green space is there? Environmental concerns (air, water, trash)?	Lots of wide open space, farmland. One public park noted (Mathews Park), one former country club (Royal Virginia). Some trash noted at roadsides. No industry to contribute to air pollution. Waterways (creeks mainly) muddy and frothy due to heavy rain. Drainage ditches full of water.
Health & Social Services: Do you see social services, hospitals, clinics and other health-related resources? How easy are they to get to? Is there evidence of any health problems such as drug abuse, mental illness, chronic or communicable diseases?	One active physician's office noted. No clinics or other health related resources. Churches may offer social services under their auspices. Flyers noted in post office for support groups for domestic violence. Convenience and recycling center located within community.
Economy: Is it a thriving community or does it feel rundown? Are there places of employment, stores, businesses? Are there supermarkets, pharmacies, and other stores that provide necessities?	Quiet community, mostly commuter based with farms. Few employers noted in area. Two small convenience stores offering gasoline noted directly across from each other. Stores had few healthy food options, mostly soda, heavily processed foods, chips, sweets and on site prepared food (sandwiches, fried options). No pharmacies or supermarkets. Some home-based businesses (pressure washing, painting, construction, sewing). One sharpening and knife store.

Housing: What is the condition of housing in the area you're surveying? Are houses and/or apartments maintained or in need of repairs? Do neighborhoods have names? Are there sub-communities?	Housing was varying: brick ranches, mobile homes, larger two-story homes. Four newer named subdivisions offering larger homes on substantial lots. Main road features many older and abandoned homes next to new, well maintained homes.
Transportation & Safety: How do most people get around? Are there buses, personal cars, transit for those with a physical disability, taxis, bicycles? Do you see sidewalks and trails? Is there a Neighborhood Watch? Where are police and fire stations nearby?	People use private vehicles for transportation. No public transportation options. Some community-based services offered for medical transport available. No sidewalks. New large fire station noted with nearby cell towers and large backup generators for power outages.
Politics & Government: Are there signs or indicators of political activity? Do you know the governmental jurisdiction of the community (a town or city)? Is there a Town Council or Board of Supervisors?	Some political signs noted on properties. Area government is county-based board of supervisors.
Community Connectedness: Are there common areas/public spaces where people gather? Are there service clubs - Lions, Elks, Masons, etc.? Other organizations focused on interests like gardening, sports, or leisure activities?	No local service clubs noted during assessment. Some notices for events and clubs at Post Office. Park is new, so no sports fields noted for community sports activities. Evidence of local historical interest in restored Rosenwald School, museum in post office. Many flower and vegetable gardens noted. No public gardens.
Education: Are there schools in the area? How do they look? Are there libraries with internet access? Is there access to multiple levels of education within the community?	Byrd Elementary School, undergoing construction; Elk Hill School; one local community college.
Recreation: Where do children play? Are parks used by a variety of people? Are they well taken care of? Are pets allowed?	Local Hadensville has a new public park with playground and trails in excellent repair. Larger park farther from Hadensville (Leakes Mill) with sports fields, playground and trails.
What is the overall 'feel' of the community? Outstanding assets? Biggest challenges?	Outstanding assets; Beautiful-lots of green farmland, trees, natural resources; Challenges-places to eat and shop. A rural community of farms, cattle farms, small houses on private lots & trailers.

What is the most striking thing about the community? What is most unexpected?	The beautiful rolling hills, farm land, greenery. Most homes are neatly kept & yards are cut and kept up. Others are old and in need of roof repair of roofs or entrances and windows needing sealing/ weatherproofing and some landscaping.
Could a family find everything they	Not regular basic humans needs. Plenty of place to get gas, fuel.
need on a day-to- day basis within	Mostly there are small grocery stores, auto-repair/parts
this district?	businesses and plenty of wineries.
If not, how far would they have to	For clothes they would have to go to Charlottesville, Short Pump
travel to find such services?	or Richmond. In the Goochland County it would take 30-60
	minutes on an average to get to these services. If they were
	clients of Goochland Cares they could receive services for food,
	clothing, dental and clinic for those who qualify for services which
	is approximately 30 minutes away. But most services for basic
	human needs is within 12-30 miles to the various locations.
How does the picture(s) provide	Offer public transport services to community members for
opportunities for us to improve life in	shopping, medical transport, YMCA and community
your community?	recreation. Major grocery store and restaurants.

District Two	Summarized Survey Response
History: Is this an established neighborhood or new? Is there a specific history associated with this area that you know of?	High Grove subdivision, an established community around 30 years old. Well-established community with 2-churches, funeral home, The Envoy Nursing Home and Central High School Cultural Center which was the African American High School for the County before integration. Westview on the James Camp: had cabins for campers and recreational activities and pool. Clover Forest Plantation: Bed and Breakfast. Georges Tavern: 3 convenience stores, and Brown's Parts Store. Route 45 South: nightclub building, which had been closed. There were no stores in that area. Fife-Hadensville Road: multiple churches, some small businesses, no convenience stores until Broad Street Road. Broad Street Road: auto business, new Hadensville Fire Station and Goochland Drive In. The local Golf Course has closed. Route 6: Elk Hill residential facility for troubled youths
Demographics: Who lives in the community? Age? Families?	Diverse and friendly families and older adults

	T
Race & Ethnicity: Are there specific ethnic shops/restaurants? Do particular groups seem to live in a certain area?	All neighborhoods were diverse. Off of Rock Castle Road observed several agricultural farms. The roads were country winding roads with no where to ride bicycles or walk safely. Residents must have transportation to get to anywhere they go. The region appears to have wealthy to poor residents. Mexican, Chinese, Italian restaurants
Values & Beliefs: Are there places of worship? Do you see advertisements for support groups/types of care?	Churches- around 10 churches spotted, a few American flags.
Physical Environment: How does the community look? How much usable green space is there? Environmental concerns (air, water, trash)?	Plenty of green space and wooden areas. Most private/residential property is a mixture of trees, lawn, and landscaping. The roads are long and winding with the majority of the landscape made up of wooden areas or overgrown meadows. A few small ponds. Many of the farms advertise that Bio-solids fertilizers are used.
Health & Social Services: Do you see social services, hospitals, clinics and other health-related resources? How easy are they to get to? Is there evidence of any health problems such as drug abuse, mental illness, chronic or communicable diseases?	There are no social services, hospitals, clinics or other health related resources. Residences have to travel to Goochland Courthouse for services. One private doctor's office-Bowles and Bowles and one nursing home.
Economy: Is it a thriving community or does it feel rundown? Are there places of employment, stores, businesses? Are there supermarkets, pharmacies, and other stores that provide necessities?	Other than farm lands, there were no job industries in the areas toured. However, there were a few small businesses there. No grocery stores or no drug stores in the areas toured. Small gas stations, a dollar general. These stores don't necessarily provide necessities for a healthy lifestyle. They do, however, provide cheaper options of necessities.
Housing: What is the condition of housing in the area you're surveying? Are houses and/or apartments maintained or in need of repairs? Do neighborhoods have names? Are there sub communities?	This area has a mix of historic farmhouses, small ranch or bungalow style homes, and large new construction homes. A majority of the historic farmhouses (1800s?) have been well maintained although some are in total disrepair. The small ranch style homes appear to be about 30-50 years old. They are a mix of brick, wood structure, and pre-fabricated. Many have small gardens, fenced areas for pets, livestock, boat and car storage, and play areas for children. Play structures, gyms, small clubhouses and forts in the woods were all seen in many of the homes outside of subdivisions. Multiple cars in the driveway, possibility of indicating that multi generates reside in one unit. The majority of the new construction (<20 years old) is in planned subdivisions. The homes in these subdivisions are well maintained (3,000-4,000+ sq ft.) Some lots lawns, others are wooded and private. Roads heavily wooded, with breaks for houses: many homes are street-front, but majority are set on private gravel lanes. Active farms and house ranches seen. There were many 'for sale' signs either in front of homes or at intersections. Only one 'for rent' sign was noticed and it was within a subdivision.
Transportation & Safety: How do most people get around? Are there	Everyone must get around on private transportation. No public or service transportation provided to those in need. No sidewalks or
most people get around! Are there	Service transportation provided to those in need, No sidewalks of

buses, personal cars, transit for those with a physical disability, taxis, bicycles? Do you see sidewalks and trails? Is there a Neighborhood Watch? Where are police and fire stations nearby?	trails in communities visited. Leake Park (Route 6 West) has walking trails, soccer fields, pavilions, restrooms and playground. The closest Fire Station to Rock Castle, and Route 45 is Fife Fire Station located off of Fife-Hadensville Road. No police stationed in the areas.
Politics & Government: Are there signs or indicators of political activity? Do you know the governmental jurisdiction of the community (a town or city)? Is there a Town Council or Board of Supervisors?	Lots of signs advocating for political activity and elections.
Community Connectedness: Are there common areas/public spaces where people gather? Are there service clubs - Lions, Elks, Masons, etc.? Other organizations focused on interests like gardening, sports, or leisure activities?	American Legion near the High School. Central High School, Cultural and Education Complex. One hunt club passed. One private hunting reserve passed. A number of private horse ranches and riding facilities.
Education: Are there schools in the area? How do they look? Are there libraries with internet access? Is there access to multiple levels of education within the community?	No schools located in this district, however, the high school, middle school, and two elementary schools are close by.
Recreation: Where do children play? Are parks used by a variety of people? Are they well taken care of? Are pets allowed?	A playground at a school, a recreation center, one park, Leakes Mill Park, soccer field, swings, a new playground, dogs allowed on a leash.
What is the overall 'feel' of the community? Outstanding assets? Biggest challenges?	Small town, very rural, affluent, still have opportunity for progress and growth.
What is the most striking thing about the community? What is most unexpected?	The beauty of the open fields in the farmlands was striking. The most unexpected was the Clover Forest Plantation Bed and Breakfast located off of Whittcamp Road. One must know about it and where it is to take advantage of the facility. The difference in building size and property upkeep. A lot of houses had a lot of cars, too.
Could a family find everything they need on a day-to- day basis within this district?	No - because there are no schools or grocery stores within this district.
If not, how far would they have to travel to find such services?	No, most families would have to travel about 15-20 miles for basic services such as grocery stores, libraries, schools, public services, etc. They would likely have to travel 30+ miles to access major health care facilities and large retail areas.
How does the picture(s) provide opportunities for us to improve life in your community?	The pictures simply show locations of gathering places unknown to many in the community in the western part of the county. They show the disparities that exist within the county.

District Three	Summarized Survey Responses

History: Is this an	Established, with some new residential. History, courthouse area in use
established neighborhood	since before white settlers arrived.
or new? Is there a specific	
history associated with this	
area that you know of?	
Demographics: Who lives	From what could be seen, it appears to be all ages, individuals, and families.
in the community? Age?	
Families?	
Race & Ethnicity: Are there	Chinese restaurants, Chef Lee, Yu's, Manakin Sabot, Bella Sicilia Italian
specific ethnic	Restaurant, Hickory Notch
shops/restaurants? Do	
particular groups seem to	
live in a certain area?	
Values & Beliefs: Are there	Many places of worship, mostly Christian. Did not see advertisements.
places of worship? Do you	
see advertisements for	
support groups/types of	
care?	
Physical Environment:	There was a lot of rural area, which had a substantial amount of green
How does the community	space. No real environmental concerns. Roads seemed to be well kept
look? How much usable	including 'Adopt-A-Road' signs along most main roads.
green space is there?	
Environmental concerns	
(air, water, trash)?	
Health & Social Services:	Social Services located at Goochland Admin. Building. West Creek Hospital.
Do you see social services,	Goochland Free Clinic and Family Services to improve lives of impoverished,
hospitals, clinics and other	elderly, and disabled. Programs of health care, find housing, and education.
health-related resources?	
How easy are they to get	
to? Is there evidence of any	
health problems such as	
drug abuse, mental illness,	
chronic or communicable	
diseases?	
Economy: Is it a thriving	The economy appears good. There are not too many businesses- maybe 1 or
community or does it feel	2 on River Rd W. There is a grocery store on Fairgrounds Rd, 2 pharmacies
rundown? Are there places	on Sandy Hook/Fairgrounds. Basic necessities are met in this area.
of employment, stores,	
businesses? Are there	
supermarkets, pharmacies,	
and other stores that	
provide necessities?	
Housing: What is the	Houses, no apartments. Good conditions overall. A couple houses could use
condition of housing in the	updates/repairs.
area you're surveying? Are	
houses and/or apartments	
maintained or in need of	
repairs? Do neighborhoods	
have names? Are there sub	
communities?	

Transportation & Safety:	Most people own their own vehicle. No sidewalks or trails unless going into
How do most people get	business area. Police department is about 15 to 20 minutes away and fire
around? Are there buses,	department is about 15 minutes away.
personal cars, transit for	
those with a physical	
disability, taxis, bicycles?	
Do you see sidewalks and	
trails? Is there a	
Neighborhood Watch?	
Where are police and fire	
stations nearby?	
Politics & Government: Are	No, we did not see any signs of political activity. Yes, it is a county
there signs or indicators of	government with a Board of Supervisors.
political activity? Do you	
know the governmental	
jurisdiction of the	
community (a town or	
city)? Is there a Town	
Council or Board of	
Supervisors?	
Community	Master gardeners at community college. Yes, Rotary, American Legion,
Connectedness: Are there	Goochland Library, YMCA, Dept of Parks and Recreation. park and trash
common areas/public	drop off, recreation center.
spaces where people	arop on, recreation center.
gather? Are there service	
clubs - Lions, Elks, Masons,	
etc.? Other organizations	
focused on interests like	
gardening, sports, or leisure	
activities?	
Education: Are there	Yes. Schools look great. All levels of schooling available in the community.
schools in the area? How	Goochland Middle, Elementary, High, and Reynolds Community College.
do they look? Are there	Goodmand Wildale, Elementary, riigh, and Reynolds community conege.
libraries with internet	
access? Is there access to	
multiple levels of education	
within the community?	
Recreation: Where do	Yes, Hidden Rock Park, Tucker Park have walking trails, Ball fields,
children play? Are parks	play/picnic area. Yes, pets.
used by a variety of	
people? Are they well taken	
care of? Are pets allowed?	Warrange with many and The Control of the Control o
What is the overall 'feel' of	Very open with many spaces. The most outstanding asset of Goochland
the community?	county is that it is a beautiful green county to go for a drive in. The biggest
Outstanding assets?	challenges are not having more groceries stores, public transportation, no
Biggest challenges?	affordable housing, no hospital, and jobs available.
What is the most striking	It strikes me how clean the community is. There is no evidence of dumping,
thing about the	the grass is mowed, everything is clean. It is neat but not 'sterile.'
community? What is most	
unexpected?	

Could a family find everything they need on a	Depends on your needs and how far you plan to drive.
day-to- day basis within	
this district?	
If not, how far would they	There is a Food Lion in the district but depending on where you are it still is
have to travel to find such	at least 10-15 minutes, if you have your own transportation. Otherwise, the
services?	30-45 minutes into either Short Pump, Richmond, or Zion Crossroads to
	Charlottesville.
How does the picture(s)	It shows a need. There is a need for more grocery stores, more affordable
provide opportunities for	housing, a hospital, public transportation, more parks (places for people to
us to improve life in your	gather or kids to play). While Goochland is a beautiful county it is lacking
community?	some serious things that would help some of it's residents greatly.

District: 4	Summarized Survey Responses
History: Is this an established neighborhood or new? Is there a specific history associated with this area that you know of?	There does not appear to be much history from an outsider's perspective. Most of the district is farmland with small shops and restaurants in pockets of the district.
Demographics: Who lives in the community? Age? Families?	It was hard to tell who lived in the area because we did not see many people outdoors. However, when taking into account the region's agricultural economy, it can be said that the wealthier land owners and their families are white and that Hispanics work on the land. The notion of undocumented immigrants is also prominent in this area due to the kind of work that is available in the district.
Race & Ethnicity: Are there specific ethnic shops/restaurants? Do particular groups seem to live in a certain area?	There was one Chinese restaurant spotted and one Hispanic store that is out of business. No particular groups clearly seem to live in a certain area, perhaps the wealthier neighborhoods with bigger houses have a greater concentration of Caucasians ('The Preserve'). Meantime it is known that Latinos work on farms along Pryor road.
Values & Beliefs: Are there places of worship? Do you see advertisements for support groups/types of care?	There are many places of worship but we did not see advertisements for support/ types of care. There were six churches spotted, including Goochland Baptist Church and Hope Church. Additionally, we saw a Hindu Temple and multiple cemeteries in the area. Most churches were of Baptist belief and isolated in the outskirts of farmland. However some of the churches belonged to other cultural groups, such as church that's Arabic.
Physical Environment: How does the community look? How much usable green space is there? Environmental concerns (air, water, trash)?	The area is characterized by large pockets of private farmland for the most part. There are many tree ranges which take away from usable green space. Most homes have plenty of open space and almost all lawns were well kept. There are no environmental concerns. The area is very clean and natural, limiting civilization to small pockets.
Health & Social Services: Do you see social services, hospitals, clinics and other health-related resources? How easy are they to get	Physician offices, dental offices and physical therapy office within a 1-mile radius. HCA emergency center, multiple medical specialists, outpatient surgery center, eye clinic with surgery center, imaging center within 2-3 miles in Short Pump. Also has emergency veterinary clinic and animal hospital in 1-mile radius. Fire and Rescue in 1-1.5 miles. 2 pet daycares and

to? Is there evidence of any health problems such as drug abuse, mental illness, chronic or communicable diseases?	kennels. Bundle of Care provides infant thru preschool care and after school care services is located in Centerville. Social Services is Goochland Cares approximately 13 miles from Centerville.
Economy: Is it a thriving community or does it feel rundown? Are there places of employment, stores, businesses? Are there supermarkets, pharmacies, and other stores that provide necessities?	There is not much business considering the area is dominated by agriculture. There are many family-run farms in the area which occupy a majority of the land. However, there are also several restaurants and services offered throughout the area. Some of these businesses include a barbershop, an industrial park, brewery, mechanic, markets, spa, Sunset Grill, Exon, McDonalds, Pickle Barrel, dance academy, cross fit gym, farmer's markets, Goochland Self Storage, Capital One and CarMax. There also very few supermarkets that provide necessities, and no pharmacy was spotted in the region. Most businesses are small and there aren't that many, so I wouldn't say the economy is thriving, however it does not feel rundown either.
Housing: What is the condition of housing in the area you're surveying? Are houses and/or apartments maintained or in need of repairs? Do neighborhoods have names? Are there sub communities?	The conditions for housing are good on average, however there are some homes that seem very small and rundown. For the most part, people live in houses with a lot of yard space. Some neighborhoods had a lot bigger homes such as in Hickory Havens and Temple Heights, while other neighborhoods like the one along Shallow Well Rd - are very low income. A heterogeneous mixture of wealth was also present in some areas, where huge houses were surrounded by small trailer homes.
Transportation & Safety: How do most people get around? Are there buses, personal cars, transit for those with a physical disability, taxis, bicycles? Do you see sidewalks and trails? Is there a Neighborhood Watch? Where are police and fire stations nearby?	The area is very spread out so transportation is a challenge. Most people drive cars to get around, but many also participate in the Park and Ride program. There are no sidewalks in the region and no taxis/busses to get around. Overall it appeared as there are few cars on the road at a time. The conditions of the roads were great, and the 280 highway interconnects the regions. Overall, the area seemed very safe and calm. As far as police and fire stations, two police officers were spotted along our route, as well as a volunteer rescue squad and a fire station.
Politics & Government: Are there signs or indicators of political activity? Do you know the governmental jurisdiction of the community (a town or city)? Is there a Town Council or Board of Supervisors?	Observed 1 political campaign sign Kinloch's common area and 1 at intersection near shopping center. Goochland has a Chamber of commerce and Board of Supervisors.
Community Connectedness: Are there common areas/public spaces where people gather? Are there service	There is a sense of isolation within the region because everyone lives on massive private plots of land. However, along our route, we saw a community garden where the community can gather. There are also two mini golf courses, as well as an actual golf course. Lastly, there is a brewery

clubs Lions Elks Masons	where people can gather for a drink. We could not identify any specific
clubs - Lions, Elks, Masons, etc.? Other organizations	organization that is focused on leisure activities.
focused on interests like	organization that is rocused on leisure activities.
gardening, sports, or leisure activities?	
	No public schools in Contonillo Dublic schools library, and community.
Education: Are there	No public schools in Centerville. Public schools, library, and community
schools in the area? How	college are in district 3 approximately 13 miles away.
do they look? Are there	
libraries with internet	
access? Is there access to	
multiple levels of education	
within the community?	
Recreation: Where do	There are no parks in this district. Most children play in their yard since
children play? Are parks	most homes have a vast amount of open space. Many houses had private
used by a variety of	swing sets or playgrounds in their yard. Besides playing in their yard, I can't
people? Are they well	imagine children have many other places to spend time outside. There are
taken care of? Are pets	two mini-golf courses, so that could prove to be a popular leisure activity.
allowed?	
What is the overall 'feel' of	The overall feel of the community can be described as a warm and inviting
the community?	area with plenty of farmland and nature. There are no outstanding assets
Outstanding assets?	besides that open land that is available. The biggest challenge seems to be
Biggest challenges?	transportation.
What is the most striking	The most striking thing about the community are the small pockets of
thing about the	commerce, where all the restaurants and shops are. This is because there
community? What is most	are very few areas like this and are relatively tucked away.
unexpected?	
Could a family find	I believe a family can find everything they need within this district, besides a
everything they need on a	pharmacy which they would need to travel around 15-20 minutes to get to
day-to- day basis within	Goochland Pharmacy.
this district?	,
If not, how far would they	NA
have to travel to find such	
services?	
How does the picture(s)	The pictures show how spread out the community is, and they could help in
provide opportunities for	potentially establishing a bus route between popular destinations in the
us to improve life in your	area.
community?	

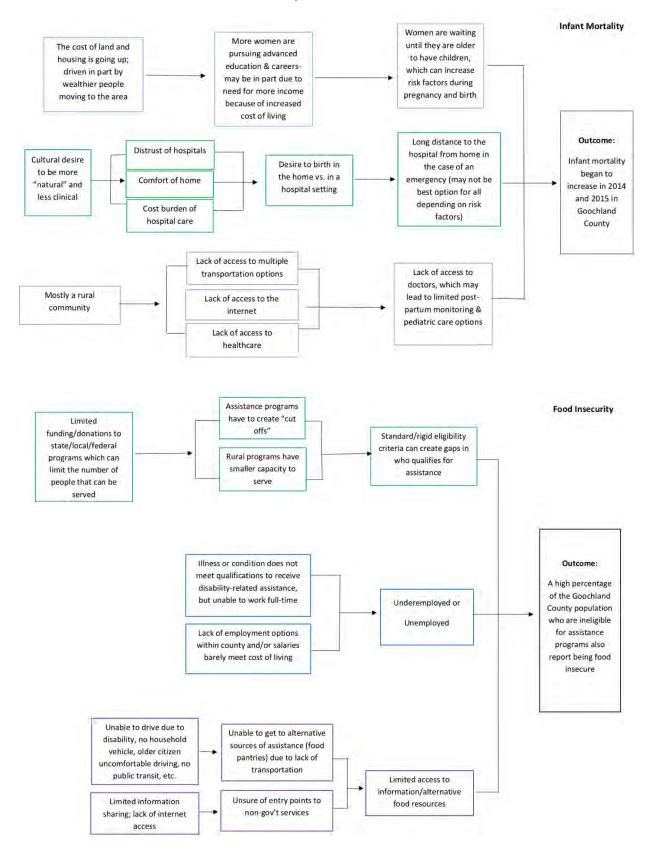
District: 5	Summarized Survey Responses
History: Is this an established neighborhood or new? Is there a specific history associated with this area that you know of?	Mix of both new and old neighborhoods, mostly established with parts of new construction.

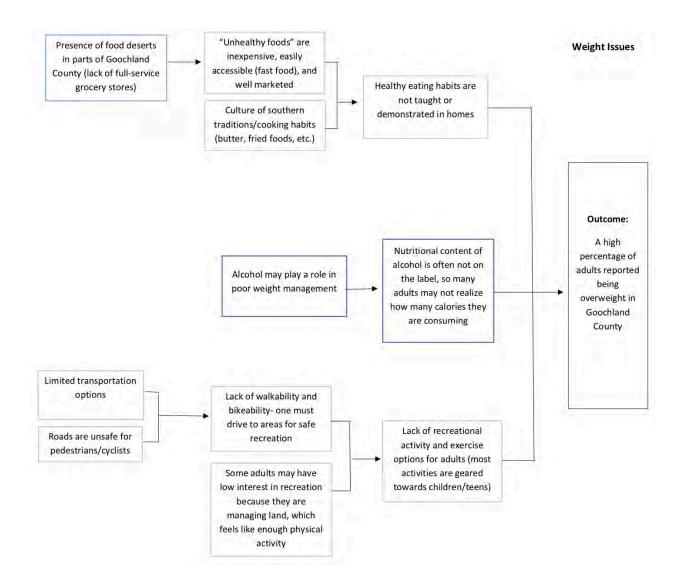
Demographics: Who lives	Mixed, small communities with friends and families close by.
in the community? Age?	
Families?	
Race & Ethnicity: Are there	Mixed
specific ethnic	
shops/restaurants? Do	
particular groups seem to	
live in a certain area?	
Values & Beliefs: Are there	Multiple places of worship for many religions.
places of worship? Do you	The state of the s
see advertisements for	
support groups/types of	
care?	
Physical Environment:	Mostly open farm land and a few towns.
How does the community	
look? How much usable	
green space is there?	
Environmental concerns	
(air, water, trash) ?	
Health & Social Services:	Yes, there are health and social service resources and they are spread out.
Do you see social services,	, '
hospitals, clinics and other	
health-related resources?	
How easy are they to get	
to? Is there evidence of any	
health problems such as	
drug abuse, mental illness,	
chronic or communicable	
diseases?	
Economy: Is it a thriving	Mixed, mostly farm land. Most communities felt new with some shops that
community or does it feel	are older.
rundown? Are there places	
of employment, stores,	
businesses? Are there	
supermarkets, pharmacies,	
and other stores that	
provide necessities?	
Housing: What is the	Mixed, some are rundown and/or small, some are new and/or large and
condition of housing in the	'expensive' looking
area you're surveying? Are	
houses and/or apartments	
maintained or in need of	
repairs? Do neighborhoods	
have names? Are there	
sub-communities?	
Transportation & Safety:	Personal cars or friend/family cars. Not a lot of public transportation aka
How do most people get	buses, taxis, sidewalks, or trails.
around? Are there buses,	
personal cars, transit for	
personal cars, transit for	I

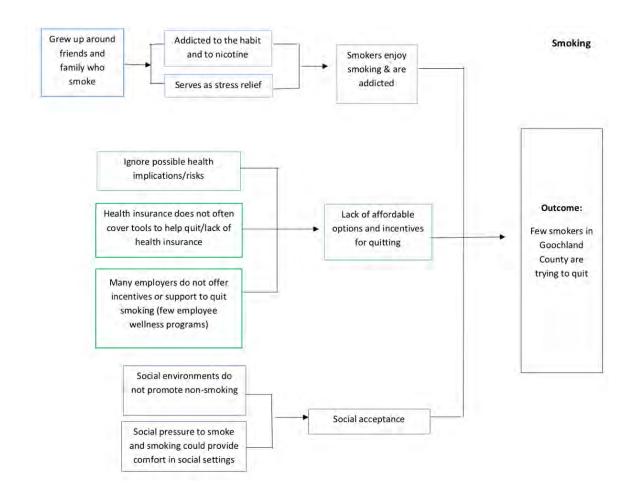
those with a physical	
disability, taxis, bicycles?	
Do you see sidewalks and	
trails? Is there a	
Neighborhood Watch?	
Where are police and fire	
stations nearby?	
Politics & Government: Are	Not that we could see- community spread out with small towns
there signs or indicators of	, ,
political activity? Do you	
know the governmental	
jurisdiction of the	
community (a town or	
city)? Is there a Town	
Council or Board of	
Supervisors?	
Community	A few country clubs.
Connectedness: Are there	
common areas/public	
spaces where people	
gather? Are there service	
clubs - Lions, Elks, Masons,	
etc.? Other organizations	
focused on interests like	
gardening, sports, or leisure	
activities?	There are schools in the area (alementary and day save)
Education: Are there schools in the area? How	There are schools in the area (elementary and day care).
do they look? Are there libraries with internet	
access? Is there access to	
multiple levels of education	
within the community?	Cab a de devi se ve e produce de
Recreation: Where do	Schools, day cares, and parks.
children play? Are parks	
used by a variety of	
people? Are they well taken	
care of? Are pets allowed?	NA .
What is the overall 'feel' of	NA
the community?	
Outstanding assets?	
Biggest challenges?	NA.
What is the most striking	NA
thing about the	
community? What is most	
unexpected?	
Could a family find	NA
everything they need on a	

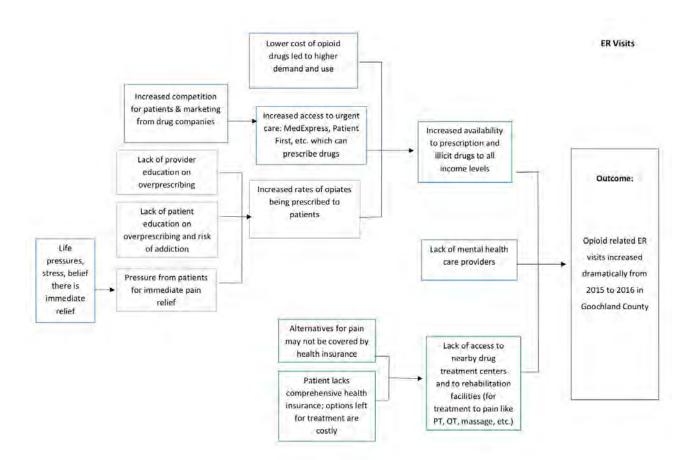
day-to- day basis within this district?	
If not, how far would they	NA
have to travel to find such	
services?	
How does the picture(s)	NA
provide opportunities for	
us to improve life in your	
community?	

N.Root Cause Tree Analyses











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