The joint Community Health Needs Assessment report was completed in collaboration with Sentara Leigh Hospital and Leigh Orthopedic Surgery Center, which have the identical service areas of the Cities of Chesapeake, Norfolk, and Virginia Beach.

Appendices represent data and sources used in the Community Health Needs report.

Appendix A: Community Demographics

Demographics include geography, population change, age, gender, ethnicity, language, education, employment, poverty, and insurance.

Appendix B: Community Health Indicators

Indicators include county health rankings (health outcomes and health factors), mortality, hospitalizations, risk factors, maternal and infant, cancer, behavioral health, violent crimes and gun violence.

Appendix C: Community Health Needs Assessment Survey results

This includes the community health needs assessment survey and response results.

Appendix D: Community Focus Group results

This included the focus group demographics and brief summary of results.

Data Limitations

- The data presented represents a snapshot of the population, economic and leading health, and wellness issues in the service area.
- It includes primary data gathered from community surveys and secondary data from health and other sources.
- This information can be used as a guide for helping communities identify leading health issues in the service area.
- Other health issues, data and resources may be available that were not listed here that communities may wish to consider when establishing health priorities.

APPENDIX A: COMMUNITY DEMOGRAPHICS

Sentara Leigh Hospital Geography

2018 Population Density per Square Mile						
	State of Virginia Chesapeake Norfolk Virginia Be					
Population Density/Sq Mile	191	650.3	2,540.1	896.0		

Source: http://www.usa.com/rank/virginia-state--population-density--county-rank.htm

Population Change

2020-2040 Population Projections						
Demographics	State of Virginia	Total Service Area	Chesapeake	Norfolk	Virginia Beach	
Population estimates, April 2020	8,631,393	946,897	249,422	238,005	459,470	
Population, percent change - April 1, 2010 to April 1, 2020	7.3%	4.3%	10.9%	1.3%	3.9%	
Projected Population 2020 - 2030*	9,331,666	987,582	270,506	249,889	467,187	
Projected Population 2030 - 2040*	9,876,728	1,008,365	287,913	249,753	470,700	
Projected Population Change 2020 - 2030*	7.3%	4.1%	7.9%	4.8%	1.7%	
Projected Population Change 2030 - 2040*	5.8%	2.1%	6.4%	-0.1%	0.8%	

Source: US Census Bureau QuickFacts Table 2020 https://www.census.gov/quickfacts/fact/table/VA,US/PST045219

Produced by Demographics Research Group of the Weldon Cooper Center for Public Service, July 2019, http://demographics.coopercenter.org
Red-highlights decrease in population; Green=higher than State

Population by Sex

2020 Population by Sex						
	State of Virginia	Total Service Area	Chesapeake	Norfolk	Virginia Beach	
Female	4,390,275	474,632	127,455	113,766	233,411	
%	50.8%	50.1%	51.1%	47.8%	50.8%	
Male	4,251,999	472,265	121,967	124,239	226,059	
%	49.2%	49.9%	48.9%	52.2%	49.2%	

Source: US Census Bureau QuickFacts Table 2020 https://www.census.gov/quickfacts/fact/table/VA,US/PST045219

Population by Age

2020 Population by Age							
	Virginia	Total Service Area	Chesapeake	Norfolk	Virginia Beach		
Total Population	8,631,393	946,897	249,422	238,005	459,470		
Persons under 5 years, percent	5.9%	6.4%	6.3%	6.6%	6.3%		
Persons under 18 years, percent	21.8%	22.1%	24.2%	19.7%	22.3%		
Persons 19 - 64 years, percent	56.4%	58.7%	56.5%	62.8%	57.7%		
Persons 65 years and over, percent	15.9%	12.8%	13.0%	10.9%	13.7%		

Source: US Census Bureau QuickFacts Table 2020 https://www.census.gov/quickfacts/fact/table/VA,US/PST045219

Produced by Demographics Research Group of the Weldon Cooper Center for Public Service, July 2019, http://demographics.coopercenter.org

Aging Population

The Aging Population: Percent of Population Age 65+ by Age Class and Locality						
Population Projections	State of Virginia	Total Service Area	Chesapeake	Norfolk	Virginia Beach	
2020 Age 65-74	9.5%	8.2%	8.5%	7.0%	8.8%	
2020 Age 75-84	4.4%	3.5%	3.6%	2.7%	3.5%	
2020 Age 85+	1.7%	1.4%	1.3%	1.2%	1.5%	
2030 Age 65-74	10.4%	10.2%	11.0%	8.4%	10.8%	
2030 Age 75-84	6.1%	5.2%	5.2%	4.0%	5.9%	
2030 Age 85+	1.9%	1.5%	1.5%	1.0%	0.1%	
2040 Age 65-74	8.7%	8.4%	8.6%	7.2%	8.9%	
2040 Age 75-84	6.8%	6.4%	6.7%	4.8%	7.2%	
2040 Age 85+	2.5%	2.1%	2.0%	1.3%	0.1%	

Source: Produced by Demographics Research Group of the Weldon Cooper Center for Public Service, July 2019, http://demographics.coopercenter.org Green=highlights higher than State

Other Demographic Features

Other Descriptive Information	Virginia	Chesapeake	Norfolk	Virginia Beach
Veterans, 2015-2019	677,533	26,832	26,924	56,598
Veterans as a percent of population 2019	7.9%	10.8%	11.3%	12.3%
Owner-occupied housing unit rate, 2015-2019	66.3%	71.4%	43.4%	63.7%
Median value of owner-occupied housing units, 2015-2019	\$273,100	\$273,700	\$206,700	\$280,800
Foreign born persons, percent, 2015-2019	12.4%	5.9%	7.2%	9.4%
Language other than English spoken at home, percent of persons age 5 years+	16.3%	8.3%	10.4%	12.5%
Households with a computer, percent, 2015-2019	91.1%	94.3%	91.0%	95.0%
Households with a broadband Internet subscription, percent, 2015-2019	83.9%	89.9%	83.4%	89.9%
High school graduate or higher, percent of persons age 25 years+, 2015-2019	89.7%	92.1%	88.0%	93.5%
Bachelor's degree or higher, percent of persons age 25 years+, 2015-2019	38.8%	33.2%	28.8%	36.0%
With a disability, under age 65 years, percent, 2015-2019	8.0%	7.9%	10.1%	7.8%
Persons without health insurance, under age 65 years, percent	9.3%	8.3%	13.4%	8.8%
In civilian labor force, total, percent of population age 16 years+, 2015-2019	64.1%	61.9%	56.5%	64.4%
In civilian labor force, female, percent of population age 16 years+, 2015-2019	60.5%	59.8%	58.5%	62.7%
Median household income (in 2019 dollars), 2015-2019	\$74,222	\$78,640	\$51,590	\$76,610
Per capita income in past 12 months (in 2019 dollars), 2015- 2019	\$39,278	\$35,536	\$29,830	\$37,776

 $Source: US \ Census \ Bureau \ QuickFacts \ Table \ 2020 \\ \underline{https://www.census.gov/quickfacts/fact/table/VA, US/PST045219}$

Population by Race/Ethnicity

2020 Population by Race/Ethnicity							
Race/Ethnicity	State of Virginia	Total Service Area	Chesapeake	Norfolk	Virginia Beach		
White	69.4%	55.6%	61.1%	47.0%	66.3%		
Black or African American	19.9%	32.5%	30.0%	41.1%	19.0%		
American Indian and Alaska Native	0.5%	0.3%	0.2%	0.4%	0.3%		
Asian alone	6.9%	4.4%	3.2%	3.7%	6.7%		
Native Hawaiian and Other Pacific Islander	0.1%	0.1%	0.1%	0.1%	0.1%		
Two or More Races	3.2%	4.8%	4.0%	4.7%	5.6%		
Hispanic or Latino**	9.8%	7.6%	6.2%	8.0%	8.2%		
White alone, not Hispanic or Latino	61.2%	51.7%	57.4%	43.4%	61.7%		

Source: US Census Bureau QuickFacts Table 2020 https://www.census.gov/quickfacts/fact/table/VA,US/PST045219

Preferred Language

Limited English Speaking Households							
	State of Virginia	Total Service Area	Chesapeake	Norfolk	Virginia Beach		
	Viigiilia	Alta					
Other than English Spoken in Home*	16.3%	10.9%	8.3%	10.4%	12.5%		
Spanish Speaking: Speak English less than well**	2.9%	1.1%	0.7%	1.7%	1.1%		

Source: *US Census Bureau QuickFacts Table 2020 https://www.census.gov/quickfacts/fact/table/VA,US/PST045219;

Education Attainment

2020 Education Attainment						
	State of					
	Virginia	Chesapeake	Norfolk	Virginia Beach		
High school graduate or higher, percent of persons age 25						
years+, 2015-2019	89.7%	92.1%	88.0%	93.5%		
Bachelor's degree or higher, percent of persons age 25						
years+, 2015-2019	38.8%	33.2%	28.8%	36.0%		

Source: US Census Bureau QuickFacts Table 2020 https://www.census.gov/quickfacts/fact/table/VA,US/PST045219

Civilian Labor Force

2020 Civilian Labor Force							
State of Chesapeake Norfolk Virginia Be							
	Virginia	Спезареаке	NOTION	Virginia Deach			
In civilian labor force, total, percent of population age 16	64.1%	61.9%	56.5%	64.4%			
years+, 2015-2019	04.170	01.576	50.570	04.470			
In civilian labor force, female, percent of population age 16	CO F9/	FO 90/	EQ E0/	C2 70/			
years+, 2015-2019	60.5%	59.8%	58.5%	62.7%			

Source: US Census Bureau QuickFacts Table 2020 https://www.census.gov/quickfacts/fact/table/VA,US/PST045219

 $[\]ensuremath{^{**}}\xspace$ Hispanics may be of any race, so are included in applicable race categories

^{**}Virginia Department of Health Culturally and Linguistically Appropriate Health Care Services; US Census Bureau American Community Survey Five-Year Estimates, 2014 vintage; https://apps.vdh.virginia.gov/omhhe/clas/leppopulation/

Poverty

Poverty Prevalence 2020							
	State of Virginia	Total Service Area	Chesapeake	Norfolk	Virginia Beach		
Number of People (All Ages) Living in Poverty*	769,479	119,579	18,288	36,765	35,860		
Percent of People (All Ages) Living in Poverty in Locality*	9.2%	10.0%	7.6%	17.6%	8.1%		
Number of People (<18 years) Living in Poverty*	22,617	40,406	5,702	12,538	12,019		
Percent of People (<18 years) Living in Poverty in Locality*	12.2%	15.6%	9.7%	27.2%	12.4%		

Source: US Census Bureau, Small Area Income and Poverty Estimates (SAIPE). Estimates are for 2020

Poverty Status by Race

Poverty Status							
	State of Virginia	Chesapeake	Norfolk	Virginia Beach			
Black	18.6%	14.6%	28.2%	11.9%			
Hispanic	14.7%	16.8%	19.5%	10.7%			
American Indian	13.7%	1.7%	11.2%	17.4%			
Asian	7.4%	3.2%	13.8%	5.6%			
Pacific Islander	7.4%	3.5%	4.7%	5.9%			
White	8.8%	6.7%	12.5%	5.6%			

Source: US Census Bureau 2019: ACS 5-Year Estimates

Medicaid, FAMIS, & Medicare

Medicaid an	d FAMIS 2022/I	Medicare and Me	edicaid 65+ 2019)	
	State of Virginia	Total Service Area	Chesapeake	Norfolk	Virginia Beach
Medicaid Enrollment (Below 138% FPL)	626,398	67,048	16,579	26,118	29,639
Medicaid Percentage	7.2%	7.1%	6.6%	10.9%	6.4%
FAMIS (Below 138% FPL)	1,347,010	57,745	34,681	52,188	57,745
FAMIS Percentage	15.6%	15.3%	13.9%	21.9%	12.6%
Children Enrolled in Medicaid/FAMIS (Below	813,229	35,689	21,057	30,211	35,689
Children Enrolled in Medicaid/FAMIS Percent	9.4%	9.2%	8.4%	12.6%	7.7%
65+ Medicaid (Below 138% FPL)	83,149	2,697	1,700	3,161	2,697
65+ Medicaid Percentage	0.9%	0.8%	0.6%	1.3%	0.5%
65+ Medicare**	802,949	62,570	18,042	13,795	30,733
65+Medicare Percentage**	64.5%	53.4%	59.3%	53.2%	50.5%
65+ Medicare and Medicaid**	56,810	4,789	971	2,469	1,349
65+ Medicare and Medicaid Percentage**	4.6%	4.1%	3.2%	9.5%	2.2%
Persons in Poverty*	9.2%	10.2%	7.6%	17.6%	8.1%

Source: Virginia Medicaid Department of Medical Assistance Services; (As of January 15, 2022) https://www.dmas.virginia.gov/data;

^{*}US Census Bureau QuickFacts Table 2020; (2020 Small Area Income and Poverty Estimates (SAIPE));

^{**} Centers for Medicare & Medicaid Services 2019; Mapping Medicare Data;

⁻⁻ Suppressed data; FEP: Federal poverty level; FAMIS: Family Access to Medical Insurance Security

APPENDIX B: COMMUNITY HEALTH INDICATORS

2021 County Health Rankings

2021 County Health Rankings: Virginia						
Health Outcomes Health Factors						
Chesapeake City	36	32				
Norfolk City	99	90				
Virginia Beach City	24	19				

2021 County Health Rankings: Virginia					
Chesapeake Norfolk Virginia Be					
Length of Life	33	95	16		
Quality of Life	38	97	33		
Health Behaviors	37	94	33		
Clinical Care	29	72	34		
Social & Economic Factors	38	98	18		
Physical Environment	87	23	19		

Source: County Health Rankings 2021, Rankings Data & Documentation

Access to Health Services

Access to Health Services					
State of Virginia Chesapeake Norfolk Virginia Beach					
Preventable Hopital Stays Rate, 2018*	4,269	4,769	5,148	4,487	
Preventable Hopital Stays Rate, Black population 2018*	5,992	6,075	6,675	6,387	
Preventable Hopital Stays Rate, White population 2018*	4,011	4,405	4,364	4,221	
Uninsured %, 2018	12%	10%	15%	11%	

Source: County Health Rankings 2021, Overview:

Red=highlights higher than state; * Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees.

Length of Life

Length of Life					
State of Virginia Chesapeake Norfolk Virginia Beach					
Life expectancy (Average number of years a person can expect to live)	79.5	78.6	75.4	80.5	
Age-Adjusted Death Rate	320	336	485	293	
Premature age-adjusted mortality (number of deaths among residents under age 75 per 100,000)	95,342	2,727	3,371	4,377	

Length of Life: African American					
State of Virginia Chesapeake Norfolk Virginia Beach					
Life expectancy (Average number of years a person can expect to live)	76.5	78	73	78	
Age-Adjusted Death Rate	444	394	638	375	

Source: County Health Rankings 2021, Overview

Red=highlights worse than state

Hospitalization Rates

Age-Adjusted Hospitalization Rates, per 10,000 2018-2020						
	State of Virginia	Chesapeake	Norfolk	Virginia Beach		
Type 2 Diabetes	14.9	21.3	28.1	13.6		
Uncontrolled Diabetes	3.3	6.7	6.3	3.2		
Heart Attack	25.4	27.4	28.1	27.3		
Heart Failure	51.8	52.5	73.9	44.2		
Hypertension	4.6	7.4	8.1	4.3		
Substance Use	7.2	10.3	13	7.7		
Adoles cent Suicide/Self-Inflicted Injury (age 10-17)	40.4	60.9	89.3	81.6		
Adult Mental Health	49.5	52.9	55.1	46.3		
Adult Suicide/Self-Inflicted Injury	41	47.9	50	47.2		

Source: Greater Hampton Roads Community Indicators <u>Dashboard</u>;

Red=highlights higher than state

Emergency Department Behavioral Health Visits

SLH Emergency Department Behavioral Health Visits, Top 4 Diagnosis, 2021						
	Behavioral Health (Patient Frequency)	Suicidal Ideations	Anxiety Disorder	Bipolar Disorder	Major Depressive Disorder	
Adults, 18+	1820	23.0%	4.2%	2.9%	7.8%	
Youth, 0-17	125	34.4%	1.6%	1.6%	8.8%	

 $Source: Source: Sentara\ Leigh\ Hospital\ Emergency\ Department\ encounters,\ 2021;$

Quality of Life (Lifestyle, Mental Health, Substance Use, Medical and Mental Health Providers)

	Quality of Life			
	State of Virginia	Chesapeake	Norfolk	Virginia Beach
Food Insecure (2018)	10%	9%	14%	8%
Limited Access to Healthy Foods (2015)	4%	5%	8%	3%
Physical Inactivity (2017)	22%	24%	23%	20%
Access to Exercise Opportunities (2019)	82%	93%	93%	98%
Adults with Obesity (2017)	31%	35%	35%	28%
Excessive Drinking (2018)	18%	18%	19%	21%
Adult Smoking (2018)	15%	17%	21%	18%
Poor or fair health (2018)	17%	16%	20%	16%
Average poor physical health days (2018)	3.5	3.5	4.5	3.6
Frequent physical distress (2018)	11%	11%	13%	11%
Diabetes prevalence (2017)	11%	11%	12%	10%
Number of HIV cases (2018)	23,081	570	1,829	1,110
Primary Care Physicians (2018)	6,428	197	247	329
Primary Care Physician ratio (2018)	1325:1	1232:1	988:1	1368:1
Dentists (2018)	6,057	128	220	348
Dentists ratio (2018)	1409:1	1913:1	1103:1	1293:1
Violent Crime rate per 100,000 (2015-2019)	207	423	603	152
Firearm Fatalities rate per 100,000 (2015-2019)	12	14	20	12
Average Poor mental health days (2018)	4.0	4.0	4.8	4.3
Frequent mental distress (2018)	12%	13%	15%	13%
Mental Health Providers (2020)	16,061	298	536	832
Mental Health Provider ratio (2020)	531:1	822:1	453:1	541:1

Source: County Health Rankings 2021, Overview

Red=highlights higher than state, Green=highlights better than state

^{*}Patient Frequency includes multiple visits

COVID-19

COVID-19, 2020-2022						
	State of Virginia	Chesapeake	Norfolk	Virginia Beach		
COVID-19 deaths, 2020	5,766	136	120	159		
Total cases (March 2021-April 2022)	1,669,750*	30,177	25,711	55,742		
Rates per 100,000 (March 2021-April 2022)	-	12,217	10,589	12,353		
Total deaths (March 2021-April 2022)	19,714*	198	218	426		
Rates per 100,000 (March 2021-April 2022)	-	80.2	89.8	94		
Vaccinations (Single Dose) November 2021-April 2022	81.4%	87.8%	90.9%	87.1%		
Fully Vaccinated, November 2021-April 2022	72.7%	80.0%	85.2%	80.1%		
Booster/Third Dose, November 2021-April 2022	32.0%	34.6%	26.1%	35.9%		

Source: Virginia Department of Health, COVID-19 Data in Virginia, <u>Dashboard</u>;

Maternal Health

Births, Birthweight and Infant Death by Locality of Residence 2019						
	State of Virginia	Total Service Area	Chesapeake	Norfolk	Virginia Beach	
Total Births to Residents	97,434	11,741	2,944	3,339	5,458	
Total Teen Births Below Age 18	824	89	21	44	24	
Teen Births Ages 18 - 19	2,798	353	84	145	124	
Non-Marital Births	34,196 / 35.1%	4,305 / 36.6%	1,058 / 35.9%	1,556 / 46.6%	1,691 /31%	
Low Birthweight Births / percent of total births	8,162 / 8.4%	1,144 / 9.7%	287 / 9.7%	382 /11.4%	475 / 8.7%	
Very Low Birthweight Births / percent of total births	1,436 / 1.5%	201 / 1.7%	43 / 1.5%	68 / 2%	90 / 1.6%	
Total Infant Deaths / Rate per 1,000 Births	570 / 5.9%	69 / 5.9%	14 / 4.8%	22 / 6.6%	33 / 6%	

Source: Virginia Department of Health Division of Health statistics

Alzheimer's Disease and Dementia Prevalence

2017 Alzheimer's Disease and Dementia Prevalence					
	State of Virginia	Chesapeake	Norfolk	Virginia Beach	
Less than 65 years (%)	3.9%	4.2%	3.7%	4.8%	
Less than 65 years (#)	5,026	134	138	242	
65+ (%)	11.1%	11.8%	13.1%	11.1%	
65+ (#)	100,034	2,677	2,259	5,189	

Source: Alzheimer's Association, Virginia Alzheimer's <u>facts;</u> Virginia Alzheimer's Commission, <u>AlzPossible Initiative;</u>

Red=highlights higher than state

Medicare Chronic Conditions

Medicare Primary Chronic Conditions, 2020				
	State of Virginia	Chesapeake	Norfolk	Virginia Beach
Hypertension	55%	62%	59%	58%
Diabetes	27%	31%	30%	28%
Kidney Disease	25%	27%	27%	25%
Ischemic Heart Disease	24%	24%	22%	22%
Heart Failure	13%	15%	15%	14%
Alzheimer's, Dementia	10%	10%	11%	10%
Obstructive Pulmonary Disease	9%	11%	12%	11%
Cancer (Colorectal, Breast, Prostate, Lung)	8%	10%	9%	10%

Source: Centers for Medicare & Medicaid Services 2019; Mapping Medicare Data;

Red=highlights higher than state

^{*}Totals August 27, 2020, through April 1, 2022; -rates unavailable

Cancer

Cancer Incidence Rate: Annual Average Count / Rate Per 100,000, Age-adjusted 2014-2018					
		State of Virginia	Chesapeake	Norfolk	Virginia Beach
Breast (Female)	Prevalence Rate	126.4	149.3	134.9	146.3
	Average Annual Count	6,464	209	160	384
Prostate	Prevalence Rate	98	112.2	116.8	103.5
	Average Annual Count	4,783	143	122	242
Lung and Bronchus	Prevalence Rate	54.8	61.0	77.4	60.9
	Average Annual Count	5,422	152	170	292
Colon & Rectum	Prevalence Rate	35.0	35.5	38.1	33.8
	Average Annual Count	3,357	83	84	161
All Sites	Prevalence Rate	411	448.8	469.6	460.7
	Average Annual Count	40,096	1,147	1,045	2,235
Trend: Falling	Trend: F	Rising	Trends co	mpare to previous 5	-year period

Virginia Incidence Rates by Race, 2014-2018 Annual Average Count / Rate Per 100,000, Age-adjusted 2014-2018					
State of Virginia		Prostate	Breast (Female)	Lung and Bronchus	Colon and Rectum
White	Prevalence Rate	82.9	129.2	56.8	34.5
	Average Annual Count	3,020	4,652	4,198	2,398
Black (includes Hispanic)	Prevalence Rate	161.1	132.9	57.3	39.9
	Average Annual Count	1,318	1,276	969	677
Hispanic	Prevalence Rate	65.7	78.7	22.5	23.0
	Average Annual Count	110	198	72	97
Asian	Prevalence Rate	49.3	77.0	26.3	22.3
	Average Annual Count	110	248	129	117
Trend: Falling	Trend: F	tising	Trends co	mpare to previous 5	-year period

Cancer Death Rate: Annual Average Count / Rate Per 100,000, Age-adjusted 2015-2019					
		State of Virginia	Chesapeake	Norfolk	Virginia Beach
Breast (Female)	Prevalence Rate	20.9	24.2	24.3	21.7
	Average Annual Count	1,129	35	31	59
Prostate	Prevalence Rate	19.7	24.4	32.0	22.2
	Average Annual Count	768	22	27	41
Lung and Bronchus	Prevalence Rate	37.1	41.9	46.8	36.1
	Average Annual Count	3,720	103.0	105	175
Colon & Rectum	Prevalence Rate	13.4	14.9	15.2	12.1
	Average Annual Count	1,310	37	34	59
All Sites	Prevalence Rate	152	165.1	175.6	151.8
	Average Annual Count	15,046	409	10	738
Trend: Falling	Trend: I	Rising	Trends co	mpare to previous 5	-year period

Virginia Death Rates by Race, 2015-2019 Annual Average Count / Rate Per 100,000, Age-adjusted 2014-2018					
State of Virginia		Prostate	Breast (Female)	Lung and Bronchus	Colon and Rectum
White	Prevalence Rate	17.4	20.3	39.0	13.0
	Average Annual Count	527	797	2,930	936
Black (includes Hispanic)	Prevalence Rate	37.5	28.0	38.6	18.1
	Average Annual Count	215	274	651	302
Hispanic	Prevalence Rate	10.3	10.2	11.9	6.9
	Average Annual Count	11	25	37	27
Asian	Prevalence Rate	9.3	10.1	18.4	8.6
	Average Annual Count	15	32	89	42
Trend: Falling	Trend: F	Rising	Trends co	mpare to previous 5	-year period

Source: NIH National Cancer Institute, 2014-2018 Incident Rate Report for Virginia, Cancer Profile; 2014-2018 Mortality Rate Report for Virginia, Cancer Profile

Diabetes

	Diabetes			
	State of Virginia	Chesapeake	Virginia Beach	Norfolk
Adults 20+ with Diabetes	8.5%	10.4%	8.9%	10.5%
Age-Adjusted Death Rate due to Diabetes*	22.0	28.4	18.0	35.0
Age-Adjusted Hospitalization Rate due to Diabetes**	20.7	28	19.7	37.6
Age-Adjusted Hospitalization Rate due to Long-Term Complications of Diabetes **	9	11.5	7.6	14.9
Age-Adjusted Hospitalization Rate due to Short-Term Complications of Diabetes **	8.3	9.9	8.9	16.5
Age-Adjusted Hospitalization Rate due to Type 2 Diabetes**	14.9	21.3	13.6	28.1
Age-Adjusted Hospitalization Rate due to Uncontrolled Diabetes**	3.3	6.7	3.2	6.3
Diabetes: Medicare Population, 2018	27.4%	32.7%	29.0%	31.5%
Diabetic Monitoring: Medicare Population, 2015	87.6%	88.0%	86.9%	83.0%

Data Source: Greater Hampton Roads Indicators <u>Dashboard</u>;

Mental Health Providers

Virginia Mental Health Providers Race/Ethnicity 2020						
	Virginia	Licensed Clinical Psychologis	Licensed Clinical Social Worker	Licensed Professional Counselor		
	2020 Census	2020 Virginia Department of Health Professions Reports				
White	60.3%	82%	79%	76%		
Black	18.6%	7%	14%	16%		
Hispanic	10.5%	4%	3%	4%		
Asian	7.1%	4%	2%	1%		
Other	5.8%	1%	1%	1%		
2+	8.2%	2%	2%	2%		

Source: Virginia Health Care Foundation, <u>Assessment of the Capacity of Virginia's Licensed Behavioral Health Workforce</u>, 2022

^{*}Deaths per 100,000 population; **Deaths per 10,000 population

APPENDIX C: COMMUNITY HEALTH NEEDS ASSESSMENT SURVEY RESULTS

The survey was conducted with a broad-based group of community stakeholders and community members in Eastern Shore, Middle Peninsula, Peninsula, South Hampton Roads, Western Tidewater, and Northern East region of North Carolina. Surveys were available online and in English and Spanish by paper submission. The survey asked participants details about themselves, such as gender, race, diversity, equity, and inclusion (DEI), income, zip code and how COVID-19 impacted the health and access to care, as well as their opinion about important health concerns in the community for adults and for children:

- What is important to the health of adults and children?
- What should be added or improved in the community to help families be healthy?
- What are most important health concerns for adults and children?
- What makes it difficult to access healthcare services for adults and children?

The surveys were made available to the public from December 1, 2021 – February 28, 2022, in paper format and electronically using SurveyMonkey. A community stakeholder list of 1,892 unduplicated stakeholders was used to email the survey to request participation and included representatives from public health, education, social services, business, local government, and local civic organizations, among others. Feedback was received throughout the survey period on the age, gender, race/ethnicity, and language of survey respondents to assist in promoting the surveys to various community members.

Community Survey

Let Your Voice Be Heard

This brief survey is being conducted jointly by Bon Secours Hampton Roads, Children's Hospital of The King's Daughters, Riverside Health System, Sentara Healthcare and the Hampton and Peninsula Health Districts. The survey will take 5-10 minutes to complete, and the results will help us identify community health risks for us to prioritize. It will also help us find possible ways to affect change. We thankyou for sharing your thoughts about your community.

1.	Are you taking this survey as a community member or are you a professional working in community health, public health, medical, behavioral health services, social services or other community-based organization or business?
	□ I am a community member answering for myself and my family
	☐ I am responding on behalf of a community organization or business

2. Below is a list of Virginia and North Carolina communities. In which locality listed below do you live?

Virginia					
☐ AccomackCounty, VA	☐ Middlesex County, VA				
☐ Charles City County, VA	☐ Nelson County, VA				
☐ Charlottesville (City of), VA	☐ New Kent County, VA				
☐ Chesapeake (City of), VA	☐ Newport News (City of), VA				
☐ Dumfries (Town of), VA	☐ Norfolk (City of), VA				
☐ Fluvanna County, VA	☐ Northampton County, VA				
☐ Franklin (City of), VA	☐ Poquoson (City of), VA				
☐ Gloucester County, VA	☐ Portsmouth (City of), VA				
☐ Greene County, VA	☐ Prince William County, VA				
☐ Hampton (City of), VA	☐ Quantico (City of), VA				

☐ Isle of Wight County, VA	☐ Southampton County, VA
☐ James City County, VA	☐ Suffolk (City of), VA
☐ King and Queen County, VA	☐ Stafford County, VA
☐ King William County, VA	☐ Surry County, VA
Lancaster County, VA	☐ Sussex County, VA
☐ Lorton (City of), VA	☐ Virginia Beach (City of), VA
☐ Louisa County, V	☐ Williamsburg (City of), VA
☐ Mathews County, VA	☐ York County, VA
North (Carolina
☐ Albemarle County, NC	☐ Dare County, NC
☐ Bertie County, NC	☐ Gates County, NC
☐ Camden County, NC	☐ Hertford County, NC
☐ Chowan County, NC	☐ Pasquotank County, NC
☐ Currituck County, NC	☐ Perquimans County, NC
· · · · · · · · · · · · · · · · · · ·	

Stakeholder Specific Survey Questions

3. Please select from the list below the type of employer or organization you most identify with as you complete this survey.

State, local or regional health departments	Members of the medically underserved, low-income and minority populations or organizations representing medically underserved, low-income and minority populations
Health care consumers and consumer advocates	Nonprofit and community-based organizations
Academic experts	Local government officials
Local school districts	Health care providers and community health centers
Health insurance and managed care organizations	Private businesses
Labor and workforce representatives	Military Representatives
Civic Organizations	

4.	Please share your organization's name and position.
We	are asking for contact information ONLY to assure completeness of your survey response or for follow-up
ane	estions. Your response will not be used in any publication or public presentation of the survey results.

without your permission.	
Organization	
My Role in Organization_	

5. Please check the **TOP 3** items below that you feel are important to the health of BOTH the adults AND children you serve.

Important to Your Health	Adults	Children
Access to Fresh Food		
Annual Checkups (Physicals, Well-Child Visits)		
Awareness & Understanding of Health Issues and New Treatments		
Exercise		
Health Screenings (mammograms, colonoscopies, vision exams,		
cholesterol checks, etc.)		
Healthy Eating		

Immunizations (Flu, T dap, Shingles, MMR, COVID-19, etc.)			
Parenting Support / Education			
Relationship with Primary Care Provider or Pediatrician			
Social Connections in the Community			
(Church, Social Clubs, Athletics Groups)			
Stress Relief Activities / Mindfulness			
6. Please check the TOP 3 areas you would like to see a	added or improved i	n your communi	ty to keep BOTH
the adults AND children you serve healthy.			
☐ Access to Mental Health Providers in Schools (Pre-K -	☐ Access to Comr	nunity Health Ed	ucation (such as
12)	Nutrition Educa	ation, Support for	r Individuals who
	Care for those	with Dementia, e	tc.)
☐ Access to Internet and Technology	☐ Affordable Chil	dcare	
☐ Accessible Communities (Transportation, Parks,	☐ Access to Parer	nting Education a	nd Support
Sidewalks, Community Spaces)	Programs		
☐ Employment Opportunities / Workforce	☐ Safe Communit	ies (Transportati	on, Parks, Sidewalks,
Development	Community Spa	aces)	
☐ Healthy Food Access (Fresh Foods, Community	☐ Public Safety Se	ervices (Police, Fi	re, EMT)
Gardens, Farmers' Markets, EBT, WIC)			
☐ Quality of Education (Pre K - 12)	☐ Environment (A	ir & Water Quali	ity)
☐ Safe and Affordable Housing			
7. If someone you serve were to experience any of the access community assistance?	below situations, w	ould you know h	now to help them
		V	A1 -
Community Support		Yes	No
Community Support Addiction to Alcohol, Gambling, Narcotics, etc.		Yes	No
Addiction to Alcohol, Gambling, Narcotics, etc.	Breath. Slurred		
Addiction to Alcohol, Gambling, Narcotics, etc. Emergency Medical Situation (Chest Pain, Shortness of	Breath, Slurred		
Addiction to Alcohol, Gambling, Narcotics, etc. Emergency Medical Situation (Chest Pain, Shortness of Speech, Head Injury)	Breath, Slurred		
Addiction to Alcohol, Gambling, Narcotics, etc. Emergency Medical Situation (Chest Pain, Shortness of	Breath, Slurred		
Addiction to Alcohol, Gambling, Narcotics, etc. Emergency Medical Situation (Chest Pain, Shortness of Speech, Head Injury) Housing Needs (Rent, Homeless, Eviction) Lack of Food			
Addiction to Alcohol, Gambling, Narcotics, etc. Emergency Medical Situation (Chest Pain, Shortness of Speech, Head Injury) Housing Needs (Rent, Homeless, Eviction) Lack of Food Mental Health Crisis (Suicidal Thoughts or Threatening			
Addiction to Alcohol, Gambling, Narcotics, etc. Emergency Medical Situation (Chest Pain, Shortness of Speech, Head Injury) Housing Needs (Rent, Homeless, Eviction) Lack of Food	to Harm Others)		
Addiction to Alcohol, Gambling, Narcotics, etc. Emergency Medical Situation (Chest Pain, Shortness of Speech, Head Injury) Housing Needs (Rent, Homeless, Eviction) Lack of Food Mental Health Crisis (Suicidal Thoughts or Threatening Unable to Afford Prescription Medications	to Harm Others)	ant health concern	as for BOTH the
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Addiction to Alcohol, Gambling, Narcotics, etc. Emergency Medical Situation (Chest Pain, Shortness of Speech, Head Injury) Housing Needs (Rent, Homeless, Eviction) Lack of Food Mental Health Crisis (Suicidal Thoughts or Threatening Unable to Afford Prescription Medications Urgent Medical Situation (Broken Bone, Cut that Needs 8. Of the health issues listed below, please checkthe Tadults AND children you serve in your community.	to Harm Others)	ant health concern	as for BOTH the
Addiction to Alcohol, Gambling, Narcotics, etc. Emergency Medical Situation (Chest Pain, Shortness of Speech, Head Injury) Housing Needs (Rent, Homeless, Eviction) Lack of Food Mental Health Crisis (Suicidal Thoughts or Threatening Unable to Afford Prescription Medications Urgent Medical Situation (Broken Bone, Cut that Needs 8. Of the health issues listed below, please checkthe Tadults AND children you serve in your community. Important Health Concerns	to Harm Others) s Stitches) OP 3 most importai	ant health concern	as for BOTH the Children
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Addiction to Alcohol, Gambling, Narcotics, etc. Emergency Medical Situation (Chest Pain, Shortness of Speech, Head Injury) Housing Needs (Rent, Homeless, Eviction) Lack of Food Mental Health Crisis (Suicidal Thoughts or Threatening Unable to Afford Prescription Medications Urgent Medical Situation (Broken Bone, Cut that Needs 8. Of the health issues listed below, please check the Tadults AND children you serve in your community. Important Health Concerns Alzheimer's and Dementia Care Behavioral / Mental Health (Anxiety, Depression, Bullyi Suicide)	to Harm Others) s Stitches) OP 3 most importai	ant health concern	as for BOTH the Children
Addiction to Alcohol, Gambling, Narcotics, etc. Emergency Medical Situation (Chest Pain, Shortness of Speech, Head Injury) Housing Needs (Rent, Homeless, Eviction) Lack of Food Mental Health Crisis (Suicidal Thoughts or Threatening Unable to Afford Prescription Medications Urgent Medical Situation (Broken Bone, Cut that Needs 8. Of the health issues listed below, please checkthe Tadults AND children you serve in your community. Important Health Concerns Alzheimer's and Dementia Care Behavioral / Mental Health (Anxiety, Depression, Bullyi Suicide) Cancer	to Harm Others) s Stitches) OP 3 most importai	ant health concern	children
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Addiction to Alcohol, Gambling, Narcotics, etc. Emergency Medical Situation (Chest Pain, Shortness of Speech, Head Injury) Housing Needs (Rent, Homeless, Eviction) Lack of Food Mental Health Crisis (Suicidal Thoughts or Threatening Unable to Afford Prescription Medications Urgent Medical Situation (Broken Bone, Cut that Needs 8. Of the health issues listed below, please check the Tadults AND children you serve in your community. Important Health Concerns Alzheimer's and Dementia Care Behavioral / Mental Health (Anxiety, Depression, Bullyi Suicide) Cancer COVID-19 Diabetes	to Harm Others) s Stitches) OP 3 most importai	ht health concern	children
Addiction to Alcohol, Gambling, Narcotics, etc. Emergency Medical Situation (Chest Pain, Shortness of Speech, Head Injury) Housing Needs (Rent, Homeless, Eviction) Lack of Food Mental Health Crisis (Suicidal Thoughts or Threatening Unable to Afford Prescription Medications Urgent Medical Situation (Broken Bone, Cut that Needs 8. Of the health issues listed below, please check the Tadults AND children you serve in your community. Important Health Concerns Alzheimer's and Dementia Care Behavioral / Mental Health (Anxiety, Depression, Bullyi Suicide) Cancer COVID-19 Diabetes Heart Conditions	to Harm Others) s Stitches) OP 3 most importan	ant health concern	Children

Violence in the Community		
Violence in the Home (domestic or child abuse, including sexual,		П
physical, emotional abuse and neglect)		
· , · .		
9. Please check the TOP 3 barriers that make it difficult for BOTH the a	adults AND children y	ou serve in your
community to access healthcare services.		
Top 3 Barriers for Healthcare Services	Adults	Children
Availability of services / Wait list for services		
Childcare		
Challenges accessing healthcare services	П	П
Cost of care		П
COVID-19 limitations on on-person appointments		
Don't have the technology to utilize telehealth options	П	П
Health insurance		
Language barrier	П	П
Location of services		
Transportation	П	П
Unable to get time off from work 10. We would like to ensure that everyone in our community receives ly whether there are personal factors that impact the care that adults or community receives.	high quality care. Plea	
Unable to get time off from work O. We would like to ensure that everyone in our community receives ly whether there are personal factors that impact the care that adults or coll that apply. All your answers will be kept confidential.	high quality care. Plea	
Unable to get time off from work O. We would like to ensure that everyone in our community receives leads the theorem of the care that adults or constitution or constitution of the care that adults or constitution	high quality care. Plea hildren you serve rec	eive. Please check Children
Unable to get time off from work O. We would like to ensure that everyone in our community receives leads there are personal factors that impact the care that adults or call that apply. All your answers will be kept confidential. Personal Factors Age	high quality care. Plea hildren you serve rec Adults	eive. Please check Children
Unable to get time off from work O. We would like to ensure that everyone in our community receives leads there are personal factors that impact the care that adults or could that apply. All your answers will be kept confidential. Personal Factors Age Race	high quality care. Plea hildren you serve rec Adults	Children
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Unable to get time off from work O. We would like to ensure that everyone in our community receives leads there are personal factors that impact the care that adults or call that apply. All your answers will be kept confidential. Personal Factors Age Race Ethnicity Immigration Status Language Sex	high quality care. Plea hildren you serve rec Adults	Children
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Unable to get time off from work O. We would like to ensure that everyone in our community receives lynether there are personal factors that impact the care that adults or cell that apply. All your answers will be kept confidential. Personal Factors Age Race Ethnicity Immigration Status Language Sex Gender Level of Education Intellectual Disabilities Physical Disabilities	high quality care. Plea hildren you serve rec Adults	Children
Unable to get time off from work O. We would like to ensure that everyone in our community receives lead there are personal factors that impact the care that adults or call that apply. All your answers will be kept confidential. Personal Factors Age Race Ethnicity Immigration Status Language Sex Gender Level of Education Intellectual Disabilities	high quality care. Plea hildren you serve rec Adults	Children
Unable to get time off from work 1.0. We would like to ensure that everyone in our community receives lead that apply. All your answers will be kept confidential. Personal Factors Age Race Ethnicity Immigration Status Language Sex Gender Level of Education Intellectual Disabilities Physical Disabilities Religious Beliefs Sexual Orientation	high quality care. Pleashildren you serve rec Adults	Children
Unable to get time off from work 1.0. We would like to ensure that everyone in our community receives lead there are personal factors that impact the care that adults or call that apply. All your answers will be kept confidential. Personal Factors Age Race Ethnicity Immigration Status Language Sex Gender Level of Education Intellectual Disabilities Physical Disabilities Religious Beliefs	high quality care. Pleashildren you serve rec	Children
Unable to get time off from work O. We would like to ensure that everyone in our community receives lead the there are personal factors that impact the care that adults or coll that apply. All your answers will be kept confidential. Personal Factors Age Race Ethnicity Immigration Status Language Sex Gender Level of Education Intellectual Disabilities Physical Disabilities Religious Beliefs Sexual Orientation Type of Health Insurance / Way I Pay for Health Services	high quality care. Pleashildren you serve rec	Children
Unable to get time off from work O. We would like to ensure that everyone in our community receives lead the there are personal factors that impact the care that adults or coll that apply. All your answers will be kept confidential. Personal Factors Age Race Ethnicity Immigration Status Language Sex Gender Level of Education Intellectual Disabilities Physical Disabilities Religious Beliefs Sexual Orientation Type of Health Insurance / Way I Pay for Health Services 1. Please indicate how satisfied you feel your organization is addressing the same and the	high quality care. Pleashildren you serve rec	Children
Unable to get time off from work 1.0. We would like to ensure that everyone in our community receives leave there are personal factors that impact the care that adults or coll that apply. All your answers will be kept confidential. Personal Factors Age Race Ethnicity Immigration Status Language Sex Gender Level of Education Intellectual Disabilities Physical Disabilities Religious Beliefs Sexual Orientation Type of Health Insurance / Way I Pay for Health Services 1. Please indicate how satisfied you feel your organization is addressing the satisfied of the	high quality care. Pleathildren you serve rec Adults Adults D D D D D D D D D D D D D D D D D D	Children

^{12.} Please share why you gave your organization the score that you did.

^{13.} From your perspective, how can we, as community stakeholders, best align resources to meet our community's needs?

Community Member Specific Survey Questions

 Please share your ZIP code. Please check the TOP 3 items below that you feel ar 	re importa	nt to the health of you and	d your fami	ly.
Important to Your Hea	alth		Adults	Children
Access to Fresh Food				
Annual Checkups (Physicals, Well-Child Visits)				
Awareness & Understanding of Health Issues and New	/Treatment	ts		
Exercise				
Health Screenings (mammograms, colonoscopies, visio	on exams, c	holesterol checks, etc.)		
Healthy Eating				
Immunizations (Flu, Tdap, Shingles, MMR, COVID-19, 6	etc.)			
Parenting Support / Education				
Relationship with Primary Care Provider or Pediatrician	n			
Social Connections in the Community (Church, Social C	Clubs, Athle	tics Groups)		
Stress Relief Activities / Mindfulness				
5. Please check the TOP 3 areas you would like to see a your family healthy.				
☐ Access to Mental Health Providers in Schools (Pre-K - 12)	Nu	cess to Community Health trition Education, Suppor re for those with Dement	t for Indivi	•
☐ Access to Internet and Technology		cess to Parenting Education ograms	on and Sup	port
 Accessible Communities (Transportation, Parks, Sidewalks, Community Spaces) 	□ Af	fordable Childcare		
 Employment Opportunities / Workforce Development 	□ En	vironment (Air & Water C	uality)	
 Healthy Food Access (Fresh Foods, Community Gardens, Farmers' Markets, EBT, WIC) 	□ Pu	blic Safety Services (Police	e, Fire, EMT	r)
☐ Quality of Education (Pre K - 12)	□ Sa ^t	fe Communities (Transpo	rtation, Par	ks,
, , ,		lewalks, Community Spac		•
☐ Safe and Affordable Housing				
6. Of the health issues listed below, please checkthe T AND children in your community.	TOP 3 mos	t important health concer		
Important Health Conc	cerns		Adults	Children
Alzheimer's and Dementia Care				
Behavioral / Mental Health (Anxiety, Depression, Bully	ing, Psycho	oses, Suicide)		
Cancer				
COVID-19				
Diabetes				
Heart Conditions				
Neurological Conditions				
Sexual & Reproductive Health Issues (STIs, Teen Pregna	iancy)			
Substance Use (Alcohol, Drugs, Tobacco)				

From the state of			
Violence in the Community			
Violence in the Home (domestic or child abuse, including sexual, physical, emotional abuse and neglect)			
7. If you or someone you know (18+) were to experience any of the below situations, would yo get community help?	u knov	v ho	ow to
Community Support	Yes	5	No
Addiction to Alcohol, Gambling, Narcotics, etc.			
Emergency Medical Situation (Chest Pain, Shortness of Breath, Slurred Speech, Head Injury)			
Housing Needs (Rent, Homeless, Eviction)			
Lack of Food			
Mental Health Crisis (Suicidal Thoughts or Threatening to Harm Others)			
Unable to Afford Prescription Medications			
Urgent Medical Situation (Broken Bone, Cut that Needs Stitches)			
8. If a child or adolescent you know (ages 0-18) were to experience any of the below situations how to get community help?	, would	d yc	u know
Community Support	Yes	S	No
Addiction to Alcohol, Gambling, Narcotics, etc.			
Emergency Medical Situation (Chest Pain, Shortness of Breath, Slurred Speech, Head Injury)			
Housing Needs (Rent, Homeless, Eviction)			
Lack of Food			
Mental Health Crisis (Suicidal Thoughts or Threatening to Harm Others)			
Unable to Afford Prescription Medications			
Urgent Medical Situation (Broken Bone, Cut that Needs Stitches)			
 Please check the TOP 3 barriers that make it difficult for the BOTH adults AND children (if ap home to access healthcare services. 	plicabl		
Top 3 Barriers for Healthcare Services	dults	Cl	nildren
Availability of services / Wait list for services			
Childcare			
Challenges accessing healthcare services			
Cost of care			
COVID-19 limitations on on-person appointments			
Don't have the technology to utilize telehealth options			
Health insurance			
Language barrier			
Location of services			
Transportation			
Unable to get time off from work			
10. We would like to ensure that everyone in our community receives high quality care. Please of there are personal factors that impact the care that adults or children in your family received that apply.			

Personal Factors

Age

Adults

Children

Page			
Race			
Ethnicity Leaving Status			
Immigration Status			
Language			
Sex			
Gender			
Level of Education			
Intellectual Disabilities			
Physical Disabilities			
Religious Beliefs			
Sexual Orientation			
Type of Health Insurance / Way I Pay for Health Services			
11. Which of the following do you consider to be a truste	d source of heal	th information?	
Trusted Resource			
Church			
Friends / Family (in person or via social media such as Tw	vitter, Facebook	, etc.)	
State / Local Government (Health Department, Governo	•	,	
Local Health System Website (Hospital, Free Clinics, etc.)	• • • • • • • • • • • • • • • • • • • •		
My Healthcare Provider (Doctor, Pediatrician, Physician A)	
My Military or VA Healthcare Provider (Doctor, Pediatric		-	
National Government (CDC, NIG, White House)	, ,	П	
National Healthcare Sources (Such as Web MD)		П	
Other (please specify)			П
Please tell us a little about yourself (OPTIONAL) 12. Gender Male	□ Female		
□ Nonbinary	□ Preferno	t to answer	
13. Race U White	☐ Black		
☐ American Indian/Alaska Native		tive Hawaiian/Other I	Pacific Islander
Some other Race	☐ Two or m		acific islander
14. Ethnicity Hispanic		anic or Latino	
	1 = 140 (1113)	01 244110	
15. Age (years)			
□ 0-17	□ 18-24		
□ 25-54	□ 55+		
16. Highest level of education completed			
Grade K-8		☐ Grade 9-12	_
	☐ High School Graduate Some College / No Degree Associates Degree ☐ Bachelor's Degree		
☐ Graduate Degree ☐ No Schooling Completed			Completed

17. Insurance

☐ Uninsured / Self Pay	☐ Medicaid
☐ Military (Tricare / VA Benefits)	☐ Indian Health Services
☐ Private Insurance (Individual, Exchange Plan, Emp	ployer If enrolled in more than one insurance type,
Sponsored) Medicare	please list them below:
8. Are you currently serving on active duty or as a Res	servist in the U.S. Armed Forces?
□ Yes	□ No
	•
. Are you a veteran of the U.S. Armed Forces?	
□ Yes	□ No
0. Are you a dependent of someone who serves in th	ne U.S. Armed Forces?
□ Yes	□ No
☐ Housing Own Rent Homeless	□ Foster
☐ Other (please specify)	
1. Live With:	
☐ Number of Adults in Home	☐ Number of Children
	<u> </u>
2. Live With: Age Range of Children	
0-4	□ 5-11
12-18	□ 19-21
There are no children within these age ranges living ir	n my home.
3. Primary Language(s) Spoken in Your Home?	
English	□ Spanish
American Sign Language (ASL)	☐ Arabic
Chinese	☐ Farsi / Persian German Gujarati
Haitian/ French Creole Hindi	☐ Japanese Korean
Mon-Khmer, Cambodian	Russian
Tagalog	☐ Vietnamese
Other - African Languages	Other - Pacific Island Languages
Other - Asian Languages	☐ Other - Indic Languages Other (please specify)
1 Please indicate how satisfied you feel your commu	unity is addressing diversity, equity and inclusion (DEI).
☐ Very satisfied	☐ Satisfied
□ Neither satisfied nor dissatisfied	☐ Dissatisfied
□ Very Dissatisfied	Dissutisfied
U Very Dissatisfied	
5. Did all of the ADULTS in your home get the COVID-	-19 vaccine?
All adults in my home are vaccinated	☐ Some adults in my home are vaccinated
None of the adults in my home are vaccinated	
and the state of t	1
you have children, please answer the following:	
6. Did the eligible CHILDREN (ages 5 and up) in your h	home get the COVID-19 vaccine?
All of the eligible children in my home are	☐ Some of the eligible children in my home are
vaccinated	vaccinated

	No, the eligible children in my home are not vaccinated		No children live in my home
27.	Do you plan to have your child(ren) get the COVID-1	9 vac	cine in the future?
	Yes		No
	Maybe		
28.	Please share your concerns about the COVID-19 vac	cine (:	select all that apply):
	I do not believe in vaccines in general		Fear of needles
	Worried it will be harmful or have side effects		With multiple vaccines, I do not know which is best
	I am not concerned about COVID-19, so I do not need a shot		I already had COVID-19, so I do not think it is necessary
	Worried about possible costs		Unclear how to get the shot / difficulty accessing Religious Objections
	Medical Condition		Other (please specify)

Characteristics of Survey Respondents

Stakeholders

Communities Served in N	/irginia	Total	Respondents: 1,673		
	Number of Respondents	Percent of Responses		Number of Respondents	Percent of Responses
AccomackCounty	99	5.93%	Nelson County	27	1.62%
Charles City County	59	3.54%	New Kent County	119	7.13%
Charlottesville (City of)	50	3.00%	Newport News (City of)	583	34.93%
Chesapeake (City of)	335	20.07%	Norfolk (City of)	461	27.62%
Dumfries (Town of)	33	1.97%	Northampton County	85	5.09%
Essex County	2	0.12%	Northumberland County	1	0.06%
Fluvanna County	29	1.74%	Poquoson (City of)	237	14.20%
Franklin (City of)	136	8.15%	Portsmouth (City of)	256	15.34%
GloucesterCounty	256	15.34%	Prince William County	65	3.89%
Greene County	26	1.56%	Quantico (City of)	31	1.86%
Hampton (City of)	511	30.62%	Richmond County	6	0.36%
Isle of Wight County	203	12.16%	Southampton County	113	6.77%
James City County	363	21.75%	Suffolk (City of)	305	18.27%
King and Queen County	90	5.39%	Stafford County	52	3.12%
King William County	73	4.36%	Surry County	91	5.45%
Lancaster County	64	3.83%	Sussex County	46	2.76%
Lorton (City of)	36	2.16%	Virginia Beach (City of)	417	24.93%
Louisa County	34	2.04%	Westmoreland County	1	0.06%
Mathews County	141	8.45%	Williamsburg (City of)	424	25.40%
Middlesex County	110	6.59%	York County	378	22.65%
Communities Served in I	North Carolina				
Albemarle County, NC	51	3.06%	Dare County, NC	46	2.76%
Bertie County, NC	30	1.80%	Gates County, NC	42	2.52%
Camden County, NC	39	2.34%	Hertford County, NC	37	2.22%
Chowan County, NC	33	1.98%	Pasquotank County, NC	44	2.64%
Currituck County, NC	63	3.77%	Perquimans County, NC	30	1.80%

Organizations Represented		
Addiction Recovery Consulting	Franklin Cooperative Ministry	Pulmonary Associates
Alzheimer's Association Southeastern Virginia Chapter	Gates County Schools	Rappahannock Area on Aging
American Heart Association	Gateway Early Childcare Center	Rhodes to Health
Aspire New Life, LLC	Girls on the Run Hampton Roads	Richmond Ambulance Authority
Bay Aging	Glascow Health Services, LLC	Rising Sun Baptist Church
Beaver Dam Baptist Church	Guided Care Services	Rita Welsh Adult Literacy Program DBA Literacy for Life
Behavioral Health Group	Hampton City Schools	Rivermont Schools
Beltone Ledford Audiology & Hearing Aid Center	Hampton Community Services	Riverside Behavioral Health
Benns Church preschool	Hampton Health District	Riverside Regional
Bethany Baptist Church	Hampton Roads Disability Board	Riverside Walter Reed Hospital
Blaney, Lachine & Wendell Family Dentistry	Hampton VA Medical Center	Sentara Healthcare
Bon Secours	Hampton WIC Program	Sentara Medical Group
Boys & Girls Clubs of Southeast Virginia	Health and Human Services	Sheetz Inc.
Brain Injury Association of Virginia	HELP Clinic	Smart Beginnings Western Tidewater
Center For Global Diplomacy	Impact Church Sono	Southampton County Dept. of Social Services
Chesapeake Court Services Unit	James City County	Southampton Medical Center
Chesapeake Juvenile Services	James City Service Authority	Southeastern Virginia Health System
Chesapeake Regional Medical Center	King & Queen Department of Social Services	SpiritWorks Foundation
Child Care Aware of Virginia	Lackey Clinic	St. Luke's United Method ist Church
Child Development Resources	Lakeside Center	Suffolk Department of Social Services
Children's Specialty Group	Langley AirForce Base	Suffolk Public Library
Children's Hospital of The King's Daughters		Temple of Peace Church
	Levy Dental Group	<u> </u>
Christopher Newport University	Lillibridge Healthcare Services, Inc.	The Children's Clinic LTD The Coard Foundation, Inc.
City of Hampton Department of Social Services	Louisa Bennitt, LCSW PLLC	· ·
City of Newport News City of Portsmouth	Magruder Elementary School	The Community Free Clinic of Newport News
· · · · · · · · · · · · · · · · · · ·	Master Center for Addiction Medicine Middle Peninsula Northern Neck CSB	The Parish Thrift Shop, Inc
Colonial Psychaiatric Associates CVS		Thelmarelous HealthCare Agency LLC
	Middle Peninsula Regional Adult & Career Education	Three Rivers Health District
Department for Aging and Rehabilitative Services	Millfield Baptist Church	Tower of Deliverance Fellowship Church
Department of Corrections	Montessori Children's House	Town Council
Department of Youth And Family Resources	MPNN Community Services Board	Town of West Point
Dignity for the Aged	New Morning Star Baptist Church	Town of Windsor
District 42 Franklin Probation and Parole Division of Child Support Enforcement	Newport News Office of Child Support	United Healthcare
	Newport News Public School System	Virginia Beach Community Development Corporation
Dominion Psychological Associates, LLC	Newport News Redevelopment and Housing Authority	Virginia Department of Health
Dominion Services for All People	Norfolk Health Department	Walsingham Academy
Eastern Shore Regional Jail	Norfolk Public Schools	Walter's Electrical Solutions LLC
Eastern Shore Rural Health System, Inc.	Olde Towne Medical and Dental Center	Warhill High School
ECPI School of Nursing	Optima Health	Western Tidewater Free Clinic
EVMS	PACE Program	Westmoreland County Public Schools
Families of Autistic Children in Tidewater	Pamela Cappetta, Ed.D., PC	Williams burg Baptist Church
Family Restoration Services	Pediatric Center PC	Williamsburg Regional Library
First Baptist Church Berkley	Peninsula Agency on Aging, Inc.	Williams burg-James City County Schools
Fleet and Family Support Centers	Piedmont Paint & Finish LLC	Willow Estates Assisted Living
Fly Family Therapy, Inc	Poquoson City Public Schools	YMCA
Foodbank of Southeastern Virginia and the Eastern Shore	Portsmouth Community Health Center	York County School Division
Franklin Baptist Church	Project Nana, Inc.	York/Williamsburg/Poquoson/James City Professional Fire Fighters, Paramedics and 911 Dispatchers

	Number of	Percent of
	Respondents	Responses
Type of employer	1,357	100%
State, local, or regional health departments	71	5.25%
Members of the medically underserved, low-income and minority populations or		
organizations representing medically underserved, low-income and minority	45	3.33%
populations		
Health care consumers and consumer advocates	34	2.51%
Nonprofit and community-based organizations	267	19.68%
Academic experts	17	1.26%

Local government officials	58	4.27%
Local school districts	84	6.21%
Health care providers and community health centers	595	43.85%
Health insurance and managed care organizations	17	1.26%
Private businesses	145	10.72%
Labor and workforce representatives	16	1.18%
Military Representatives	5	0.37%
Civic Organizations	3	0.22%
Addressing DEI in Community	996	
Very Satisfied	343	34.47%
Satisfied	387	38.86%
Neither Satisfied nor Dissatisfied	207	20.80%
Dissatisfied	44	4.42%
Very Dissatisfied	15	1.51%

Community Members

Community Members Li	unity Members Living in Virginia		Respondents: 16,224		
	Number of	Percent of		Number of	Percent of
	Respondents	Responses		Respondents	Responses
AccomackCounty	51	0.31%	Nelson County	10	0.06%
Charles City County	26	0.16%	New Kent County	58	0.36%
Charlottesville (City of)	76	0.47%	Newport News (City of)	2,697	16.62%
Chesapeake (City of)	1,124	6.94%	Norfolk (City of)	684	4.22%
Dumfries (Town of)	8	0.05%	Northampton County	28	0.17%
Essex County	3	0.02%	Northumberland County	1	0.01%
Fluvanna County	19	0.12%	Poquoson (City of)	348	2.14%
Franklin (City of)	47	0.29%	Portsmouth (City of)	192	1.18%
Gloucester County	125	0.77%	Prince William County	63	0.39%
Greene County	12	0.07%	Quantico (City of)	1	0.01%
Hampton (City of)	2,139	13.18%	Richmond County	5	0.03%
Isle of Wight County	215	1.33%	Southampton County	69	0.43%
James City County	3,368	20.78%	Suffolk (City of)	345	2.13%
King and Queen County	9	0.06%	Stafford County	34	0.21%
King William County	18	0.11%	Surry County	23	0.14%
Lancaster County	17	0.10%	Sussex County	3	0.02%
Lorton (City of)	10	0.06%	Virginia Beach (City of)	1,799	11.09%
Louisa County	14	0.09%	Westmoreland County	0	0%
Mathews County	23	0.14%	Williamsburg (City of)	788	4.86%
Middlesex County	25	0.15%	York County	1,799	11.10%
Community Members Li	iving in North Ca	arolina		16,205	
Albemarle County, NC	7	0.04%	Dare County, NC	32	0.20%
Bertie County, NC	3	0.02%	Gates County, NC	22	0.14%
Camden County, NC	28	0.17%	Hertford County, NC	10	0.06%
Chowan County, NC	8	0.05%	Pasquotank County, NC	73	0.45%
Currituck County, NC	83	0.51%	Perquimans County, NC	16	1.80%

	Number of	Percent of		Number of	Percent of
	Respondents	Responses		Respondents	Responses
Gender	10,289		Age	10,222	
Female	7,278	70.74%	0-17	9	0.09%
Male	2,684	26.12%	18-24	149	1.46%
Non-Binary	56	0.54%	25-54	4,255	41.63%
Prefer not to answer	271	2.64%	55+	5,809	56.83%
Race	10,106		Ethnicity	9,496	
White	7,936	78.53%	Hispanic	346	3.64%
Black	1,476	14.61%	Not Hispanic or Latino	9,150	96.36%
American Indian/Alaska Native	50	0.50%			
Asian/Native Hawaiian/Other Pacific Islander	183	1.81%			
Some other Race	128	1.27%			
Two or More Races	333	3.30%			
Highest Level of Education	10,274		Insurance	10,210	
Grade K-8	14	0.14%	Private Insurance	5,210	51.03%
Grade 9-12	69	0.67%	Medicare	3,190	31.24%
High School Graduate	591	5.75%	Medicaid	555	5.44%
Some College/No Degree	1,828	17.79%	Military	1,098	10.75%
Associates Degree	1,050	10.22%	Indian Health Services	6	0.06%
Bachelor's Degree	3,254	31.67%			
Graduate Degree	3,460	33.72%	Uninsured/Self-pay	151	1.48%
No Schooling Completed	8	0.08%			
U.S. Armed Forces (Active	10,286		Veteran of U.S. Armed	10,280	
Duty/Reservist)			Forces		
Yes	62	0.60%	Yes	1,576	15.35%
No	10,224	99.40%	No	8,704	84.67%
Dependent of someone	Number of	Percent of	Home life	Number of	Average
who serves U.S. Armed	Respondents	Responses		Respondents	Number
Forces	10,264			9,988	
Yes	1,005	9.79%	Adults in Home	9,922	2
No	9,259	90.21%	Children in Home	7,531	1
	Number of	Percent of	Live With: Age Range of	Number of	Percent of
Housing	Respondents	Responses	Children	Respondents	Responses
	10,267			9,249	
Own	8,303	80.87%	0-4	1,506	16.31%
Rent	1685	16.41%	5-11	1,958	21.17%
Homeless	25	0.24%	12-18	1,774	19.18%
Foster	4	0.04%	19-21	556	6.1%
Other: Living with someone; in	250	2.44%	22-25	0	0%
process buying home; transitional housing; yacht; retirement community; college dorm; motel; renting to own; own in other state/rent in this			No children in this age range	5,087	55.00%
state;					

Primary Language(s) Spoken in Home	10,283		Primary Language(s) Spoken in Home		
English	10,203	99.22%	Korean	20	0.19%
Spanish	172	1.67%	Mon-Khmer, Cambodian	4	0.04%
American Sign Language	22	0.21%	Russian	15	0.15%
Arabic	20	0.19%	Tagalog	31	0.30%
Chinese	16	0.16%	Vietnamese	11	0.11%
Farsi/Persian	5	0.05%	Other-African Languages	8	0.08%
German	53	0.52%	Other-Airican Languages	٥	0.08%
Gujarati	7	0.07%	Other-Pacific Island Languages	3	0.03%
Haitian/French Creole	7	0.07%	Other-Asian Languages	21	0.20%
Hindi	12	0.12%	Other Indial anguages	2	0.030/
Japanese	15	0.15%	Other-Indic Languages	2	0.02%

Community Member Responses: Additional Questions

community member meeper					
Trusted Source of Health	10,392		Addressing DEI in	10,299	
Information			Community		
Church	1,078	10.39%	Very Satisfied	1,133	11.00%
Friends/Family	1,579	15.21%	Satisfied	2,803	27.22%
State/Local Government	5,082	48.90%	Neither Satisfied nor	4,613	44.79%
Local Health System	5,285	50.86%	Dissatisfied	4,013	44.7370
Healthcare Provider	9,563	92.02%	Dissatisfied	1,421	13.80%
Military/VA Healthcare	1,487	14.31%			
National Government	4,363	41.98%	Very Dissatisfied	329	3.20%
National Healthcare Sources	2,939	28.28%			

Community Member Responses: COVID-19 Specific Questions

Community Wember Respon	5C3. CO VID 133	ocuric Questic	/113		
Eligible Children Who Received COVID-19 Vaccine	9,946		Planning to Get COVID- 19 Vaccine for Children	1,564	
All of the eligible children in my home are vaccinated	2,418	24.31%	Yes	544	34.74%
Some of the eligible children in my home are vaccinated	248	2.50%	No	499	31.80%
I plan to get my children vaccinated when available	0	0%	Maybe	525	33.46%
No, the eligible children in my home are not vaccinated	1,072	10.78%			
No children live in my home	6,208	62.42%			
Concerns About COVID-19 Vaccine for Children	1,137		Concerns About COVID- 19 Vaccine for Children		
I do not believe in vaccines in general	41	3.61%	Worried about possible costs	19	1.67%
Fear of needles	61	5.36%	Medical Condition	147	12.93%
Worried it will be harmful or have side effects	910	80.04%	Unclear how to get the shot / difficulty accessing	55	4.84%

With multiple vaccines, I do not know which is best	130	11.43%	Religious Objections	111	9.76%
I am not concerned about COVID-19, so I do not need a shot	133	11.70%	I already had COVID-19, so I do not think it is necessary	219	19.26%
All Adults in Home Vaccinated-COVID-19	10,185		Unvaccinated Adults Plan to Get COVID-19 Vaccine	868	
All adults in my home are vaccinated	9,289	91.20%	Yes	73	8.41%
Some adults in my home are vaccinated	598	5.87%	No	506	58.29%
None of the adults in my home are vaccinated	298	2.93%	Maybe	289	33.29%
Concerns About COVID-19 Vaccine for Adults	687		Concerns About COVID- 19 Vaccine for Adults		
I do not believe in vaccines in general	63	9.17%	I already had COVID-19, so I do not think it is necessary	203	29.55%
Fear of needles	33	4.80%	Medical Condition	141	20.52%
Worried it will be harmful or have side effects	496	72.20%	Worried about possible costs	11	1.60%
With multiple vaccines, I do not know which is best	77	11.21%	Religious Objections	123	17.90%
I am not concerned about COVID-19, so I do not need a shot	132	19.21%	Unclear how to get the shot / difficulty accessing	11	1.60%

Community Member Responses: Economic Impact during National Pandemic, past 18 Months

	Number of	Percent of
	Respondents	Responses
My family's PHYSICAL health is	854	
Better	97	11.36%
Worse	214	25.06%
No Change	543	63.58%
My family's EMOTIONAL health is	849	
Better	74	8.72%
Worse	436	51.35%
No Change	339	39.93%
My family's FINANCES are	673	
Better	81	12.04%
Worse	290	43.09%
No Change	302	44.87%

Health of Community Per Survey Respondents

<u>Stakeholder Responses</u>: Items Important to the Health of Both Adults and Children

Adults	Number of Respondents
Health Screenings (mammograms, colonoscopies, vision exams, cholesterol checks,	402
etc.)	
Annual Checkups (Physicals, Well-Child Visits)	397
Access to Fresh Food	334
Awareness & Understanding of Health Issues	327
Immunizations (Flu, T dap, Shingles, MMR, COVID-19, etc.)	307
Healthy Eating	282
Exercise	239
Relationship with Primary Care Provider or Pediatrician	232
Stress Relief Activities/Mindfulness	226
Parenting Support/Education	209
Social Connections in the Community	188
Children	
Annual Checkups (Physicals, Well-Child Visits)	454
Access to Fresh Food	360
Immunizations (Flu, T dap, Shingles, MMR, COVID-19, etc.)	332
Healthy Eating	287
Exercise	234
Social Connections in the Community	197
Relationship with Primary Care Provider or Pediatrician	188
Parenting Support/Education	188
Awareness & Understanding of Health Issues	169
Stress Relief Activities/Mindfulness	165
Health Screenings	157

Stakeholder Responses: Areas to Add or Improve in Community to Keep Both Adults and Children Healthy

	Number of Respondents
Access to Mental Health Providers in Schools (Pre-K - 12)	456
Healthy Food Access (Fresh Foods, Community Gardens, Farmers' Markets, EBT, WIC)	321
Safe and Affordable Housing	316
Affordable Childcare	260
Access to Community Health Education (such as Nutrition Education, Support for Individuals who Care for those with Dementia, etc.)	208
Quality of Education (Pre K -12)	200
Employment Opportunities / Workforce Development	196
Safe Communities	165
Access to Parenting Education and Support Programs	160
Access to Internet and Technology	126
Public Safety Services	116
Accessible Communities	113
Environment (Air & Water Quality)	68

Stakeholder Responses: Most Important Health Concerns for Both Adults and Children

Adults	Number of Respondents
Behavioral / Mental Health (Anxiety, Depression, Psychoses, Suicide)	849

Substance Use (Narcotics, Alcohol)	499
COVID-19	380
Violence in the Home (domestic or child abuse, including sexual, physical, emotional abuse and neglect)	352
Diabetes	342
Alzheimer's and Dementia Care	296
Violence in the Community	288
Heart Conditions	211
Cancer	187
Sexual & Reproductive Health Issues	102
Neurological Conditions	98
Children	
Behavioral / Mental Health (Anxiety, Depression, Psychoses, Suicide)	812
Violence in the Home (domestic or child abuse, including sexual, physical, emotional abuse and neglect)	558
Violence in the Community	328
Substance Use (Narcotics, Alcohol)	312
COVID-19	308
Sexual & Reproductive Health Issues (STIs, Teen Pregnancy)	244
Diabetes	130
Cancer	66
Neurological Conditions	63
Heart Conditions	41
Alzheimer's and Dementia Care	21

<u>Stakeholder Responses</u>: Barriers for Both Adults and Children to Access Healthcare Services

Adults	Number of Respondents
Availability of services / Wait list for services	584
Cost of care	496
Health insurance	404
Transportation	363
Challenges accessing healthcare services	326
Unable to get time off from work	253
Childcare	240
Don't have the technology to utilize telehealth options	193
COVID-19 limitations on on-person appointments	140
Location of services	125
Language barrier	86
Children	•
Availability of services / Wait list for services	546
Cost of care	389
Transportation	304
Health insurance	303
Challenges accessing healthcare services	274
Childcare	216
Location of services	151
COVID-19 limitations on on-person appointments	146
Don't have the technology to utilize telehealth options	132
Unable to get time off from work	82
Language barrier	48

<u>Stakeholder Responses</u>: Top 5 Personal Factors Impacting Care That Adults and Children Receive

Adults	Number of Respondents	
Type of Health Insurance / Way I Pay for Health Services	672	
Level of Education	428	
Intellectual Disabilities	382	
Language	342	
Race	315	
Physical Disabilities	311	
Age	284	
Immigration Status	260	
Ethnicity	234	
Sexual Orientation	121	
Gender	95	
Religious Beliefs	87	
Sex	68	
Children		
Type of Health Insurance / Way I Pay for Health Services	449	
Intellectual Disabilities	274	
Language	236	
Race	228	
Immigration Status	205	
Physical Disabilities	190	
Level of Education	187	
Ethnicity	178	
Age	147	
Sexual Orientation	88	
Gender	60	
Religious Beliefs	57	
Sex	49	

<u>Community Member Responses</u>: Important to the Health of Both Adults and Children

Adults	Number of Respondents
Health Screenings (mammograms, colonoscopies, vision exams, cholesterol checks, etc.)	6,980
Annual Checkups (Physicals, Well-Child Visits)	6,403
Immunizations (Flu, Tdap, Shingles, MMR, COVID-19, etc.)	6,009
Exercise	4,767
Healthy Eating	4,351
Access to Fresh Food	4,289
Relationship with Primary Care Provider or Pediatrician	3,925
Awareness & Understanding of Health Issues	3,006
Stress Relief Activities / Mindfulness	2,409
Social Connections in the Community	2,156
Parenting Support / Education	1,430
Children	
Annual Checkups (Physicals, Well-Child Visits)	4,344
Immunizations (Flu, T dap, Shingles, MMR, COVID-19, etc.)	3 <i>,</i> 566
Access to Fresh Food	3,006
Healthy Eating	2,988
Exercise	2,738

Relationship with Primary Care Provider or Pediatrician	2,092
Health Screenings (mammograms, colonoscopies, vision exams, cholesterol checks, etc.)	1,868
Stress Relief Activities / Mindfulness	1,467
Awareness & Understanding of Health Issues	1,289
Social Connections in the Community	1,228
Parenting Support / Education	1,068

<u>Community Member Responses</u>: Areas to Add or Improve in Community to Keep Both Adults and Children Healthy

	Number of Respondents
Access to Mental Health Providers in Schools (Pre-K - 12)	4,133
Quality of Education (Pre-K-12)	3,694
Safe Communities (Transportation, Parks, Sidewalks, Community Spaces)	3,631
Healthy Food Access (Fresh Foods, Community Gardens, Farmers' Markets, EBT, WIC)	3,581
Safe and Affordable Housing	3,242
Environment (Air & Water Quality)	3,130
Affordable Childcare	3,023
Public Safety Services	3,003
Accessible Communities	2,440
Access to Community Health Education	2,202
Access to Internet and Technology	1,922
Employment Opportunities / Workforce Development	1,691
Access to Parenting Education and Support Programs	965

<u>Community Member Responses</u>: Most Important Health Concerns for Both Adults and Children

Adults	Number of Respondents	
Behavioral / Mental Health (Anxiety, Depression, Psychoses, Suicide)	6,838	
COVID-19	5,272	
Alzheimer's and Dementia Care	3,954	
Substance Use (Alcohol, Drugs, Tobacco)	3,863	
Violence in the Community	3,745	
Cancer	3,622	
Violence in the Home	2,798	
Diabetes	2,657	
Heart Conditions	2,600	
Neurological Conditions	1,389	
Sexual & Reproductive Health Issues	1,026	
Children		
Behavioral / Mental Health (Anxiety, Depression, Psychoses, Suicide)	7,740	
COVID-19	3,835	
Violence in the Home (domestic or child abuse, including sexual, physical, emotional abuse and neglect)	3,809	
Substance Use (Alcohol, Drugs, Tobacco)	3,738	
Violence in the Community	3,033	
Sexual & Reproductive Health Issues (STIs, Teen Pregnancy)	2,379	
Diabetes	1,148	
Cancer	1,139	
Neurological Conditions	703	
Heart Conditions	536	
Alzheimer's and Dementia Care	237	

<u>Community Member Responses</u>: Barriers for Both Adults and Children to Access Healthcare Services

Adults	Number of Respondents
Availability of services / Wait list for services	5,793
Cost of care	5,235
Health insurance	3,203
COVID-19 limitations on on-person appointments	2,967
Challenges accessing healthcare services	2,551
Unable to get time off from work	2,324
Location of services	1,588
Childcare	1,491
Transportation	1,217
Don't have the technology to utilize telehealth options	1,071
Language barrier	387
Children	
Availability of services / Wait list for services	3,433
Cost of care	3,192
Health insurance	1,856
COVID-19 limitations on on-person appointments	1,761
Childcare	1,711
Challenges accessing healthcare services	1,323
Location of services	950
Transportation	792
Unable to get time off from work	707
Don't have the technology to utilize telehealth options	551
Language barrier	199

<u>Community Member Responses</u>: Top 5 Personal Factors Impacting Care That Adults and Children Receive

Adults	Number of Respondents
Type of Health Insurance / Way I Pay for Health Services	4,066
Age	2,481
Physical Disabilities	1,516
Race	1,313
Level of Education	1,057
Intellectual Disabilities	1,038
Ethnicity	994
Gender	764
Immigration Status	657
Language	640
Sex	640
Sexual Orientation	528
Religious Beliefs	505
Children	
Type of Health Insurance / Way I Pay for Health Services	1,900
Intellectual Disabilities	701
Race	670
Age	637
Physical Disabilities	528
Ethnicity	510

Level of Education	445
Immigration Status	381
Language	332
Sexual Orientation	301
Gender	300
Sex	245
Religious Beliefs	241

APPENDIX D: COMMUNITY FOCUS GROUPS

Focus G	roup Demographics		
8 Total Focus Groups			
130	Total Participants		
	Female	Male	
Courad acadiciacanta (Courdouidentifical)	80	41	
Sex of participants (Gender identified)	Nonbinary	Prefer not to answer	
	1	8	
	17-30	31-40	
	10	29	
Annual of a salt desails	41-50	51-60	
Age range of participants	23	13	
	61+	Prefer not to answer	
	39	16	
	White	Black	
	65	29	
Dans (atherisity of mouticiness	Asian	Hispanic	
Race/ethnicity of participants	14	20	
	Native American	Prefer not to answer	
	1	1	

	Brief Su	mmary of Key Findings	
Topic: What are the most serious health problems in our community?			
		Findings	-
Anxiety and depression	COPD	High Blood Pressure	Sciatic nerve
Asthma	Dental health	Hypertension	Sexual Health
Cancer	Diabetes	Mental Health	Sickle Cell
Cardiovascular health	Health care expenses	Mold, environmental factors	Smoking and vaping
Chronic pain management	Heart Disease	Obesity	Substance Use
		Priority Focus	
PFAC	Mental Health needs seriou due to increased stressors (g wait lists. Increased since pandemic
EVMS	Mental health, present within the African American Community. Mental health, especially as it related to COVID-19 recovery. Asthma and RAD as a result of COVID		
LGBTQ+	Military: Social pressure, ca issues, it is about how you s respect, assumed uncapable maintain fake persona due Identity: pronouns, is creati the community, fragile line LGBTQ community. Self-haviolence, more prevalent in Sexual health Prone to less protection, let HIV PrEP, pre-exposure proneeding to use protection s	e of doing job well, always identified to military culture. ng hostile communications between for being correct when communicating tred: Internalizing, isolate and poison this LGBTQ community. ading to STDs, syphilis. Military community to reduce risk of getting HIV ince STDs can be cleared with other many community.	true. Leads to more mental health y gay makes person less powerful, less as being gay, Feeling of having to people, new identities confusing with g with people. Adds more stress to connections. Can lead to domestic nunity, less protection use. Utilizing is free and provides culture of not needications.
Veterans	Mental Health is huge. Lack of inpatient facilities, no open beds. Involuntary placement: lose control of where you/loved one goes, go to nearest, available facility. No mental health with medica/physicall health care in Virginia Beach.		
Filipino	Mental Health is large problem. Lack of providers, long wait lists, some providers turning patients away. Providers at capacity increase since pandemic. Stigma to getting help. Mental health awareness leading to less stigma among men.		
B.A.M.E (Black Asian, Minority, Ethnic)	Mental Health		
Atlantis Apartments	Mental Health, anxiety and	depression.	
	Mold, environmental conditions.		
	Mobility issues. Sciatic nerve problems.		
Sickle Cell.			

Topic: When considering Social		rhich of the following resonate with you ould be focusing on?	as a key social determinant that we
		Findings	
Access to food and healthy food	Financial concerns	Public Community Outreach	Understanding how to prepare
Access to services	Health behaviors	options	healthy food
Community Outreach options	Housing	Social Support	Violence
Education	Peer Counseling	Transportation	Workplace violence
		Discussions	
PFAC	Social support has been in	f healthy food. Transportation/access to npacted since COVID-19. Education cont able for preventative care vs. reactive ca	inues to be a barrier (specifically
EVMS	Education is needed, all levels, not just K-12. Health behaviors and education, need to focus on preventative care. Employment and lack of income.		
LGBTQ+	Education on sexual preference, need to be intentional with how you inform people. Higher socioeconomic standing, SDoH is not needed to fix, but mental health is needing to be addressed. Housing for low socioeconomic standing.		
Veterans	Mental Health leads to all problems under SDoH. No health insurance if not on Tricare.		
Filipino	Knowledge, food, behavior=outcomes. Unhealthy behaviors lead to obesity and diabetes. Need to educate and motivate to become healthy. Access to food, healthy food, Food pantry requests are continuing-food insecurity continuing. Seeing increase in heart conditions, disease heart attacks, open heart surgeries in younger men. Obesity is leading to heart conditions. Need knowledge and access to affordable food, nutrition. Decrease in healthcare for low-income and housing. Employment opportunities can help with getting affordable health insurance, but plans need to provide low deductibles otherwise continuing barriers to accessing healthcare.		
B.A.M.E (Black Asian, Minority, Ethnic)	Violence and workplace violences. Social support and public community outreach options are needed.		
Atlantis Apartments	Environment the resident Isolated, no social suppor	s live in. Residents dealing with depres t .	sion, anxiety, and unable to work.

Topic: Who has	the health problems? What	groups of individuals are most impacte	d by these problems?
Findings			
African Americans	Discharged military	Laryngectomees	Under insured
African American Women	Fixed income	Latinx	Uninsured
Aging populations	Gender dysphoria	Low socioeconomic status	Working class
Caregivers	Geriatrics	Low-income populations	Young adults
Chronic disease diagnosis	Homeless	Minorities	Youth
Disabled persons	Indigent	Under educated	
		Discussions	
PFAC	Low-income populations with single working parents. Homeless/transient populations. Older populations (Alzheimer's, dementia, sundowners). Extremely expensive for home assistance/care. Those with decreased social support. Persons battling mental health issues.		
EVMS	Those who continue to come in and out of the ED. Those with lack of resources that end up having substance abuse tendencies which can lead to mental health issues. Those at risk of losing house/employment.		
LGBTQ+	African American women trans-come from broken home, homelessness needs to be addressed. Feel limited in workforce, can only be seen as Social Worker. Each age group is different; youth: social context, 20's open about identity, but learning, 29-35 mental health. Religious households less accepting. Race/housing/ environment/need to be identified to better understand the groups at higher risks, and different risks. People who can never pass as straight. Gender dysphoria: mental health.		
Veterans	"90% of healthcare costs in last year of life" Discharged military personnel, shock coming back to civilian life.		
Filipino	Men, aged 35-50, with heart disease, who are obese. Younger groups, aged 18-25, increase in Mental Health. Could be due to increase awareness around self-care in this generation. Men, aged 45-55, increase in Mental Health. School-aged, increase in Mental Health		
B.A.M.E (Black Asian, Minority, Ethnic)	Low-income, uninsured, under educated populations. Older and elderly populations.		
Atlantis Apartments	Families facing violence. Seeing loved one killed by intruder and dealing with trauma and loss.		

Topic: What keeps people	from being healthy? What are the	barriers they face with taking care	of their health and accessing
	Fino	dings	
Access to doctor	Economic status	Lack of mental health providers	No insurance
Adequate housing	Education	Lack of resources	Poor diet
Affordable healthcare	Fear	Lack of social support	Race
Culture	Financial barriers	Loneliness	Time
Drugs	Food insecurity	Mistrust	Transportation
		ssions	
PFAC	Limited preventative care/ primar	y care. Limited urgent care/ free cl	inics/ wellness fairs or screenings.
SLH Employee. Friends and Family	ily Time, work life/balance. Money and time. Lack of transportation/financial aspect. Persuasion from		
	•	·	choices. Affordable insurance. Fear
	of doctors.	,	
EVMS	High costs of care/education. Reliance on ERs for primary care/no Primary Care Providers. Lack		
			ling/navigating healthcare systems
	with paperwork. Many are trying t	-	
	patients feeling as if they do not h		
	Lack of education as it relates to e	xercise. There is a cap on the numb	per of Medicare patients that
	practices can take. Too busy worki	ng to get their insurance. Too man	y life demands. Unexpected life
	challenges. Limited life expectance	ry and going in and out of the hosp	ital instead of utilizing hospice.
	Laryngectomees are subject to ma	d medical treatments.	
LGBTQ+	Stigma to receive mental health se	ervices, especially with African Am	erican trans populations. Stigma
	with male, law enforcement. Virt	ual care, some do not want to be in	n virtual environment. Some feel
	more secure in space when in-per	son. In-person make some uncom	fortable with being in room with
	mental health professional. Some	don't want to "be seen", prefer pl	none conversation. Fear of seeking
	care. No insurance, or insurance d	oesn't cover, pay is high. Need LG	BT available professionals.
Veterans	Busy schedules. Long wait times to	o see providers.	
Filipino	Lack of education and willingness to try. If they don't try, they can't fail. Availability of Mental Health		
	providers. Too difficult to be healthy, become physically active, eat healthy. Challenge with		
	motivation. Older Filipino's make sure everything happens for the family, takes care of everyone else		
	first. If working and taking care of family, healthcare comes last. Do not want negative health outcome		
	to impact family. If need help getting to healthcare, do not want to burden family with asking for		
	assistance. Will ignore health to keep family running smoothly. Sandwich generation-not always		
	available to help parents when try	ring to take care of own children. F	ear and anxiety about potential
	diagnosis.		
B.A.M.E (Black Asian, Minority,	Lack of understanding of resource	s that are available. Access to good	doctors and healthcare. Lack of
Ethnic)	health education. "What keeps pe	ople from being healthy is genera	education""some people don't
	know". African Americans, need health education and physical activity education to help with healthy		
	lifestyles. Utilizing ED, since not having a PCP monitoring. Education, organizations for community		
	outreach ended during pandemic, very much needed for elderly and African Americans, go into		
	communities where they live, face to face. Understanding of appropriate nutritional/personal care.		
	Patient not wanting to get treatment. Communication barriers, not being heard by physicians or		
	healthcare providers. Communication, itself, can be a barrier for elderly-"Sometimes they are		
	uneducated, they can't read or write and we're trying to educate them with current materials that are		
	written in a hand out and we're not bringing it down to their level""we don't do a good job giving		
	them the information in a way they can understand". Information needs to be adapted to the		
	population being served. Technology barriers-Need increased face to face availability, especially		
-	elderly to fully understand the information given.		
Atlantis Apartments	Not being seen by doctor due to a		
	receive care, or have money up front to pay for service, or have to go to ED and then unable to pay bills.		
	Certain conditions not seen at local facilities, no transportation to reach facilities able to care for		
	condition. PTSD from lived experience, crime and violence seen. Anxiety and depression. Loss of family		
	and social support. People are trying to survive, just get groceries. "Feel we were bad people with		
	others having to put us in our place	e. We are human beings. Work wi	th us as partners"

Topic: What is being done	in our community to imp	rove health and reduce barriers? What i	resources exist in the community?	
Findings				
Acute care	Flu clinics	Immunization clinics	Outreach organizations	
CHKD children services	Free clinics	LGBT Life Center	PACE program	
Church programs	Free N95s	Mobile mamo screening	Sports programs	
COVID-19 testing	Health Fairs	New VA facility	Telehealth	
		Discussions		
PFAC	Hospital level care is sufficient. COVID-19 testing and immunization clinics			
EVMS	EVMS HOPES and Street Health with student and patient navigators who are trying to bridge the gap between the hospital and the streets. Eots of resources at EVMS but better alignment and communication is needed. Local clinics in black and brown communities due to transportation and other barriers. Free head and neck cancer screenings. Unite Us, Aunt Bertha and Lost Chord Club. Development of nurse navigator programs for some specialties. Projects in place to create PDFs with maps, easier accessibility, and services that are provided. Online support webinars. Telehealth opportunities being held at Freemason Baptist Church.			
LGBTQ+	Community acceptance improving, public affection accepting.			
Veterans	CHKD-work with kids and families with chronic conditions.			
Filipino	Program offered to elderly-clinician makes home visits quarterly, part of health plan, provides screenings.			
B.A.M.E (Black Asian, Minority, Ethnic)	Hospital follow-up program to reduce barriers and virtual platforms.			
Atlantis Apartments	Sentara facilities offering programs to low-income. Local attorneys working with low-income.			

Topic: How has the COVID-19 pandemic worsened the health issues in our community?			
Findings			
Access to doctor	Free clinic closure	Scheduling wait lists	Wait times
Depression	Isolation	Substance Use, alcohol use	Weight issues
Food insecurity	Lack of resources		
	Discu	issions	
PFAC	Obesity- People becoming used to sedentary lifestyle, increase obesity. Financial ramifications (due to		
	job loss, changes in childcare, increased need for healthcare, increased need for cleaning supplies, etc.)		
ILH Employee, Friends and Family Delayed healthcare, primary care. Skipping doctors' appointments, check-ups. Putting off preventative			check-ups. Putting off preventative
	appointments. Fear of COVID, delay healthcare. Increase in health issues. Delay in procedures. Stress		
	and not as much exercise/physical activity with virtual work environments. Increase alcohol and drug		
	use. More behavioral related issues.		
EVMS	Mental health and the boarding n	umbers in ERs. Issues in nursing h	omes and assisted living facilities.
	Hesitation to seek care. Divide du	e to vaccine hesitancy. Waitlist for	r housing. Mental health concerns
	due to visitation. Lifting mask wea	aring and social distancing restricti	ons. Increased importance of
	telehealth and accessibility to tec	hnology. Delayed selective surger	ies that affect life quality. False
	hope due to loss of COVID-19 fund	ding. Faith based institutions close	ed due to COVID where resources
	were provided. Distrust in health	providers and government. Increa	sed violence and domestic disputes.
	<u> </u>	the hospitals are people were no	5 5
providers. Shelters and food pantries are overwhelmed because other non-profits closed.			ner non-profits closed.
LGBTQ+	Stonewall-sports group, large participation in Hampton Roads, attend social events, paused due to pandemic. Pride festival cancelled. More isolation, less events supporting community. Substance use-alcohol increase. Isolation increased negative social media.		
Veterans	Hospital regulations and guidelines. Wait times for providers and specialists. Disparity in care-COVID		
	guidelines for patients with COVID diagnosis. Procedures during COVID, some done, some not.		
	Different and inconsistant standards.		
Filipino	pino Reluctance to go to ED for illness, chronic disease, any emergency situations. Dealing with loss:		
	death. Loss of freedoms, not by choice. Loss was sudden and quick. Anxiety symptoms exacerbated.		
	Loss of gyms for those who used physical activity as outlet. Increase responsibilities with kids and		
	homeschooling, while working. EWe got a lot taken away from us and it wasn't our choice." "It wasn't		
	only loss of life, loss of XYZ, but a loss that people had to handle." "Lost a lot of what we were used to		
having, and it was sudden and it was quick." People becoming used to sedentary lifestyle			to sedentary lifestyle, increase
	obesity.		
B.A.M.E (Black Asian, Minority,	Loss of trust with community of healthcare, politically driven. Fear of seeking care/being exposed.		
Ethnic)	Exacerbated mental health, lack of appropriate resources. Mothers, lack of, knowledge of maternity		
	services, outside resources lacking. Difficulty assisting homeless population, finding safe shelter. Less		
	availability of home services due to staffing shortages. Resources and connections are key to the safety		
	nets. PCP offices were not accepting appointments that were needed for f/u and continued health		
	maintenance. Much of our commu	unity lacked the ability to participa	ite in telehealth appointments.
Atlantis Apartments	Isolation and depression. Free cli	nic closed and do not have resour	ces to get health services.

Topic: What more can	•	particularly for those individuals and g	roups most in need? Are there specific	
	оррониши	Findings		
Affordable Healthcare	Culture Conscious Care	Health Fairs and Events	Outreach Programs	
Better Access	Fundraisers	Mobile Clinic	Trauma Informed Care	
Church Programs	Health Education	Neighborhood Events	Wellness Education	
on an on the grains	incaren zadadran	Discussions	Weimess Eddodion	
PFAC	Meet neonle where they a		arriers). Capitalize on technology/social	
FIAC		tess, knowledge/educate & share avai		
SLH Employee, Friends and				
Family		Education for children on healthy choices. Focus on mental health issues provide resources. More affordable healthcare options for people who can't afford insurance or affordable options for elderly who are not yet of		
railily		en walking paths, outdoor exercise eq		
	= '	= :	ention. Provide more resources for non-	
	= '	= :		
	insured for screening exam	ns. Hosting community events that are	geared around child health habits.	
EVMS	Community champions who can help bridge the gap between community and healthcare. Alignment of healthcare systems, community organizations and grassroot stakeholders. Socialized medicine like Europe. Community service coordinators. More awareness of resources that are available. Developing educational materials for medical professionals, as well as for laryngectomee patients. Local clinics or nurse teams going into communities to support teaching health and examinations. Earlier understanding of health in the school systems. Further education for residents and medical students in the medical field who are seeing at risk patients. Educating youth. Assisting with families who have suffered a loss due to violence. Work to reduce wait in ERs. Non-profit and student at EVMS who is creating an online platform for medical students and residents that is focused specifically on human trafficking and trauma informed care and can be adjusted to focus on other needs. "There are explicit biases or unconscious biases that causes individuals to be at the place where it keeps them from being exposed or having access to care." "A lot of the patients we see have mental health concerns, which have led them to become homeless, which then consider, you know, they're			
LGBTQ+	resource. So many of our patients are higher risk of having mental health concerns or drug use disorders. And it's just kind of a spiral effect that they're not then able to get the social support to further hopefully, be able to care for themselves and they have no health insurance." https://www.redflags2freedom.org/ Increase social acceptance, help LGBT community, trans community have better employment opportunities, fair for everyone, education regarding laws and rights for employment. LGBT mental health professionals. LGBT employees, onsite to meet with patient when present with mental health, peer support, someone who can relate. Partner with LGBT Life Center. At events: tailored materials, targeted education. Diverse images			
	throughout hospital, marketing materials, LGBT couples in imaging. Training for staff. The way you information you will get back, make it engaging to increase meaningful response.			
Veterans	Other medications, such as ivermectin, not approved, should be available. Better access. Better insurance opportunities			
Filipino	Empathy, engagement, mentorship. Sharing stories. Communication with friends and families. Communicate when help is needed. Communicate how to get healthy.			
B.A.M.E (Black Asian, Minority, Ethnic)	Increase manpower/staffing within healthcare resources, home health sector, hospitals, PCP, mental health, community involvement. Increase education for community members: community health fairs, go into schools and share healthy lifestyle choices, combine the ideas and host health fairs at the middle and high schools. Plan to be a part of the fall activities at the beginning of the school year at local universities with a booth to reach young adults. Start early in age-appropriate ways- kids can discuss and motivate their families to make changes too. "I think we should really focus on educating people on 'the WHY' it's important to take care of themselves and take advantage of the things Sentara offers and will offer thru these programs." More education on resources to help care for elderly family members. Education for families to understand how to care for elderly family members. Provide names of PCPs that will be available without long waits. Partner with local colleges and universities to educate young adults on resources and preventative care. Middle school and high school. We miss a large part of our community that may not have the opportunity to attend college. Set expectations with community about healthcare interactions.			
Atlantis Apartments	work. Community events/Ninformational and supporti	Neighborhood events, safe place to ga ve. Health fairs where people live, wi	ducation, vision and appliances, dental, blood ather, BBQs, community-based activities, th health screenings, education, resources, children activities, healthy cooking classes,	