BAY AGING
DIGNITY AT EVERY AGE

Community Needs Assessment 2022

OUR MISSION: To provide the programs and services people of all ages need to live independently in their communities.

May 2022

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Bay Aging thanks all who participated in our community needs assessment. We are grateful for the exceptional community response to our survey, and we appreciate the time and expertise shared by our focus group and our Board of Directors. We encourage organizations and local governments who serve the Middle Peninsula and Northern Neck to review this document, which is available online at https://bayaging.org/board-of-directors/.

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Executive Summary

Objectives

This report serves to meet the federal requirement that Bay Aging, a Community Services Block Grant Eligible Entity, conduct periodic community needs assessments. The insights gained from preparing this report set the direction for the work of Bay Aging's Community Action Program and serve as the foundation for Bay Aging's agency-wide strategic plan.

OUR MISSION: To provide the programs and services people of all ages need to live independently in their communities.

Scope

Bay Aging is both a Community Action Agency (CAA) and an Area Agency on Aging (AAA). Bay Aging's primary service area is the 10 counties of the Middle Peninsula and Northern Neck of eastern Virginia. Because the boundaries for CAAs and AAAs are not coterminous, Bay Aging's Community Action Program serves eight of these counties; two Middle Peninsula counties are served by an adjacent CAA. All 10 counties are included in this analysis.

Methodology

Bay Aging utilized four primary tools to assess the needs of the community. Staff undertook an extensive analysis of the region's demographics, conducted a public survey that garnered 486 responses, held a focus group with state and local community leaders, and analyzed root causes of poverty in the community. At the time this report was prepared, the only 2020 Decennial Census data available was the population count by race/ethnicity; staff therefore relied primarily on the American Community Survey for demographic data. The COVID-19 pandemic precluded in-person meetings, so Bay Aging devoted extra resources to distributing and advertising a survey; respondents could participate online or on paper. Bay Aging's focus group was conducted virtually via Zoom.

OUR VISION: Every person in our service area will have a CHOICE and range of services that will assist them to remain independent in their chosen home.

Key Findings

Analysis of demographic data and survey results reinforced some findings from previous assessments and staff's lived experience, such as the advanced age of the residents of Bay Aging's service area. The process also yielded some surprises, for example, the high percentage of residents who self-identified as caregivers. Highlights from the community needs assessment follow.

Demographics

Residents of the Middle Peninsula and Northern Neck are older than average, as compared to both Virginia and the U.S. For nine of 10 counties, median age ranks in the oldest quartile of counties nationwide. Four of the five oldest counties in Virginia are in Bay Aging's service area. The region has relatively small average household size, with many householders living alone. In percentage terms, as compared to Virginia, nine of 10 counties have fewer households with children and all 10 counties have more households containing one or more people age 60 and up.

Overall, the population of the Middle Peninsula and Northern Neck is less racially diverse than Virginia and is growing more slowly. There is considerable variation in composition and growth rates among the 10 counties, as detailed in the Demographic Profile section. Educational attainment is low throughout the region, with adults holding bachelor's and graduate degrees at lower rates than the state average. Median household income is lower than Virginia's in all 10 counties, and poverty is higher than the state rate in six of 10 counties.

Median house value and median monthly housing costs are lower in the Middle Peninsula and Northern Neck than Virginia, but in eight of 10 counties, homeowners are cost-burdened at a higher rate than the state. The region has a large proportion of vacant housing units; in some counties, vacancies are primarily seasonal/recreational but a few counties have many unoccupied older units that are not seasonal and risk falling into disrepair. Some counties in the region also have double and triple the state's prevalence of manufactured homes and non-traditional housing units.

The health of area residents is mediocre, as scored by the University of Wisconsin's County Health Rankings, and local counties with greater racial diversity tend to have lower scores.

The infographic on page vi illustrates key differences between counties with regard to age, income, housing costs, poverty, diversity, and life expectancy.

Community Survey

Response to Bay Aging's community needs assessment survey was exceptional, with three times as many participants as in 2018. Results appear in the Survey Results and County Profiles & Needs sections. The survey includes 29 questions (see Appendix D); below are results from three questions.

Social issues of greatest concern:

- Crime
- Poverty
- Drug or alcohol abuse
- Homelessness

Social issues not being adequately addressed in the community:

- Affordable housing
- Housing options for people/families facing homelessness
- Employment opportunities & job training
- Availability of mental/behavioral health services

Top health needs in the community:

- Health care assistance for seniors
- Affordable health services
- Access to healthy food options
- Health care options for uninsured/underinsured people

The survey found that 33% of respondents self-identify as a caregiver for an older adult or person with disabilities or chronic conditions. 31% of survey participants reported that issues with transportation regularly prevent them from doing what they need or want to do. Other concerns that surfaced repeatedly or in large proportions include:

- Inadequate number of providers of mental/behavioral health services
- Need for access to computers and technology, including internet
- Need for affordable home health care options to support aging in place
- Need for access to public transportation
- Lack of availability of living wage jobs

Focus Group

Participants in a focus group comprised of state and local community leaders responded to a subset of the community needs assessment survey questions. Results were similar to the public survey, with one notable exception – whereas crime was, by a large margin, the public's top social issue of greatest concern, not a single member of the focus group selected crime as a top issue. The focus group's leading social issues of concern are homelessness and poverty.

Root Causes of Poverty

The poverty rate in the Middle Peninsula and Northern Neck in 2019 was 11.6%, a full percentage point higher than Virginia's poverty rate (10.6%). Counties in the region with the highest poverty rates were Richmond (17.3%), Essex (16.8%), Westmoreland (14.9%), Northumberland (14.6%), and King & Queen (12.4%).

Bay Aging staff analyzed survey results and demographic data, particularly measurable indicators of poverty, to identify possible root causes of poverty in the Middle Peninsula and Northern Neck. Lack of affordable housing and a shortage of jobs paying living wages are leading concerns in most counties in the area.

Community Resources

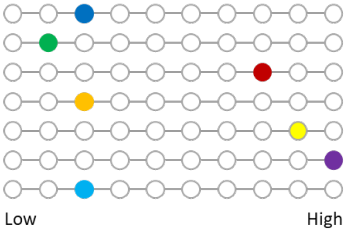
Bay Aging provides transportation, housing, and healthy living services to over 33,000 people annually, including approximately 28,000 residents of the Middle Peninsula and Northern Neck. Bay Aging proudly partners with many government agencies, non-profits, and community-based organizations; client referrals to and from local organizations are an important aspect of Bay Aging's service to community members who seek assistance.

Conclusion

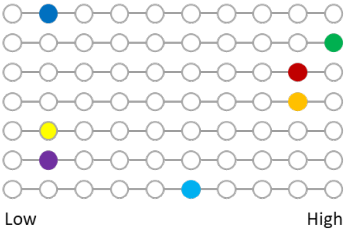
Conducting a community needs assessment has yielded valuable information that will enable Bay Aging to better meet clients' needs and more effectively work with local and state partners. These insights have already contributed to the 2022 update of Bay Aging's Community Action Plan, and will inform the development of Bay Aging's 2022 strategic plan.

COUNTY RANKINGS IN THE MIDDLE PENINSULA & NORTHERN NECK

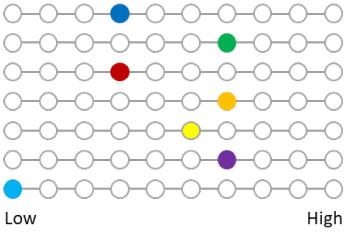
ESSEX COUNTY



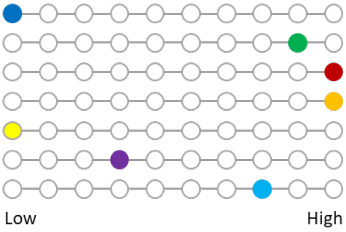
GLOUCESTER COUNTY



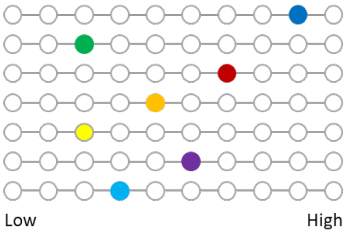
KING & QUEEN COUNTY



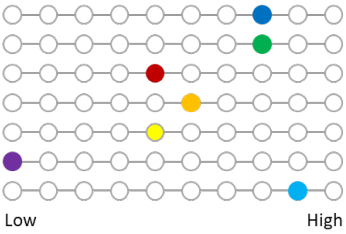
KING WILLIAM COUNTY



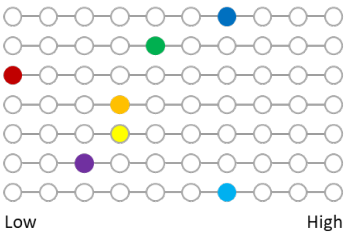
LANCASTER COUNTY



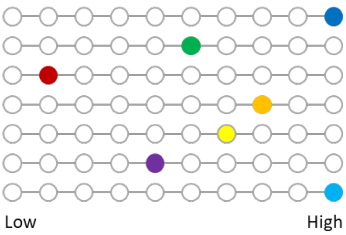
MATHEWS COUNTY



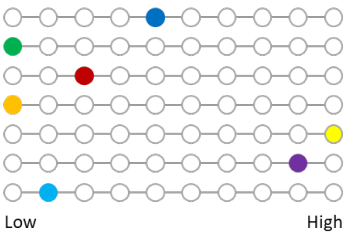
MIDDLESEX COUNTY



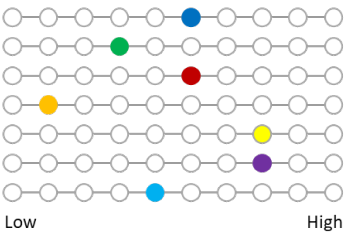
NORTHUMBERLAND COUNTY



RICHMOND COUNTY



WESTMORELAND COUNTY



LEGEND

- Median Age of County Residents, from U.S. Census Bureau's American Community Survey, Table B01002
- Median Household Income of County Residents, from U.S. Census Bureau's American Community Survey, Table S1901
- Median Monthly Housing Cost for Homeowners, from U.S. Census Bureau's American Community Survey, Table S2503
- Median Monthly Housing Cost for Renters, from U.S. Census Bureau's American Community Survey, Table S2503
- Poverty Rate for County Residents, from U.S. Census Bureau's American Community Survey, Table S1701
- Percent of County Population that is non-White, from U.S. Census Bureau's 2020 Decennial Census, Table P1
- Life Expectancy for County Residents, from University of Wisconsin's County Health Rankings & Roadmaps

Introduction

Bay Aging is a nonprofit 501(c)(3) headquartered in Urbanna, Virginia that is both a Community Action Agency (CAA) and an Area Agency on Aging (AAA). Originally established in 1978 under the name Northern Neck – Middle Peninsula Area Agency on Aging, Inc., the organization changed its name to Bay Aging in 2002. Bay Aging's mission is to provide the programs and services people of all ages need to live independently in their communities. Bay Aging's transportation, housing, and healthy living divisions serve over 33,000 people annually. Figure 1 provides an overview of services.

BAY AGING PROGRAMS AND SERVICES			
HEALTHY LIVING	HOUSING	TRANSPORTATION	ADMINISTRATION
Active Lifestyle Centers	Multi-Family:	Public Transportation	Administration
Adult Day Care	Service-enriched	Medicaid Transportation	Communication
Care Coordination	Senior Apartment	New Freedom Mobility	& Marketing
Caregiver Support	Communities	Management	Fiscal Operations
Companion Care	Housing Choice	MedCarry Non-Emergency	Grants &
Legal Aid	Voucher Program	Medical Transportation	Fundraising
Meals on Wheels	Single-Family:	Deviated Fixed Routes:	Human Resources
Ombudsman/Advocacy	Weatherization	The Rivah	Information
Options Counseling	Emergency Home Repair	(Tappahannock)	Technology
Personal Care	Housing Rehabilitation/	HiveXpress (Gloucester	
Retired & Senior	Reconstruction	Route 17 Corridor)	
Volunteer Program	Indoor Plumbing	Paper Trail (West Point)	
Senior Employment Training	Rehabilitation	Microtransit (Gloucester	
Transitional Care	Community Action	Courthouse)	
Veteran Directed Care	Program Partnership	Seasonal Trolleys	
VICAP Insurance Counseling	Development & Planning		

Figure 1 Bay Aging's Programs and Services

Bay Aging's primary service area is the 10 rural counties of eastern Virginia's Middle Peninsula and Northern Neck: Essex, Gloucester, King & Queen, King William, Lancaster, Mathews, Middlesex, Northumberland, Richmond, and Westmoreland (blue in Figure 2). Bay Aging's transit division also serves Charles City and New Kent, and Bay Aging's insurance counseling and advocacy service area extends south to the Peninsula region. Care coordination and care transitions are offered statewide through the VAAACares® network, and Veteran Directed Care is offered not only throughout Virginia, but also in Kansas, Maryland, Missouri, New Jersey, North Carolina, and South Carolina.

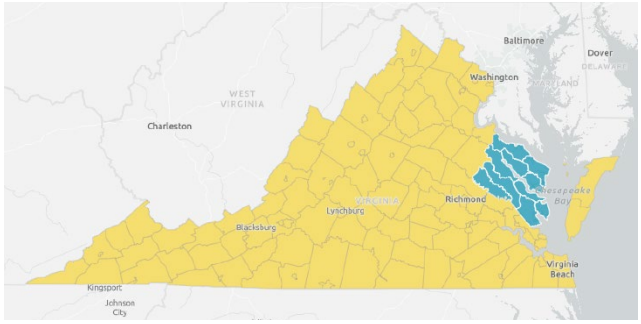


Figure 2 Bay Aging's Primary Service Area

Because the geographic boundaries for CAAs and AAAs are not coterminous, Bay Aging's Community Action team serves eight counties: Essex, Gloucester, Lancaster, Mathews, Middlesex, Northumberland, Richmond, and Westmoreland. The other two counties in Bay Aging's primary service area, King & Queen and King William, are served by Thrive Virginia.

Community Action traces its history to President Lyndon Johnson's War on Poverty and the Economic Opportunity Act of 1964. CAAs seek to reduce poverty through "locally-designed and delivered programs and services that are targeted to the specific needs of the community."[1] CAAs are federally funded in accordance with the Community Services Block Grant (CSBG) Act of 1981. As a CSBG Eligible Entity (CEE), Bay Aging is required to conduct periodic community needs assessments. According to the National Association for State Community Services Programs (NASCSP),

> "Community Needs Assessments are an integral part of a CEE's planning and are to be used to set the direction for their work… A community needs assessment establishes a profile of a community, noting both needs as well as community resources. CEEs conduct assessments to determine the needs in a community that can be addressed and the population that is most impacted by the need."[2]

Because a community needs assessment serves as a first step in developing an agency-wide strategic plan, Bay Aging included all 10 counties comprising its primary service area in the 2021-2022 assessment process described in this document.

Demographic Profile

Population, Density and Growth

Bay Aging's primary service area covers two planning districts and 2,635 square miles, of which 609 square miles is water; the region fronts the Chesapeake Bay and includes several rivers. Total population of the 10-county service area was 143,044 at the time of the 2020 Census. Gloucester is the most populous of the ten counties, accounting for over a quarter of the region's population (see Figure 3). King & Queen covers the greatest land area, 315 square miles, while Mathews is the smallest at 86 square miles. Gloucester is the most densely populated, with 178 people per square mile, and King & Queen is the least densely populated with 21 people per square mile.

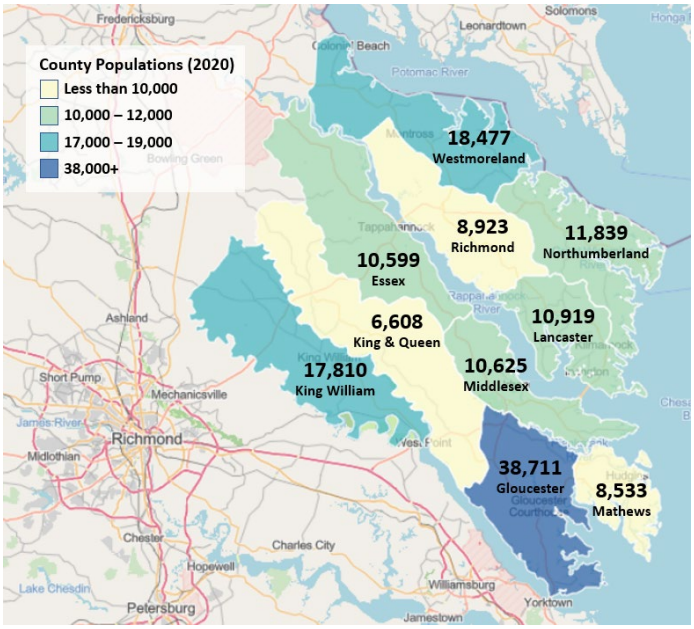


Figure 3 County Populations

Between 2010 and 2020, the population of the Commonwealth of Virginia grew 7.9%, slightly outpacing the overall U.S. growth rate of 7.4%. However, growth within Virginia was unevenly distributed, with five counties growing by more than

[1] Virginia Community Action Partnership, "Virginia's Statewide Community Action Association," https://www.vacap.org/who-we-are/, retrieved Feb. 23, 2022.

[2] NASCSP, *Checklist for Monitoring Community Needs Assessments for State CSBG Offices* (May 2017), 5.

20% while three counties lost over 12% of their residents. Figure 4 illustrates the geographic pattern;[3] growth was focused primarily in northern Virginia, with losses in southern and western Virginia. As a whole, Bay Aging's 10-county service area grew a modest 1.3% from 2010 to 2020, but individual county growth rates varied considerably. King William increased the most rapidly at 11.8%, and at the other extreme, Essex and Mathews lost 5% of their populations.

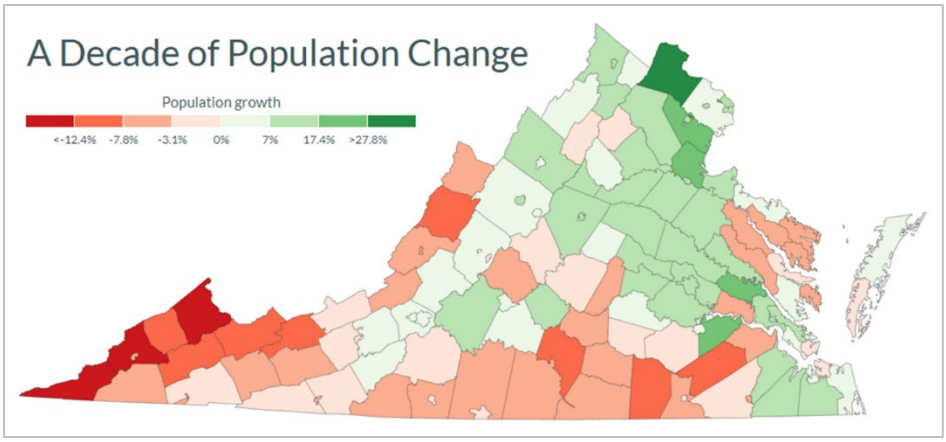


Figure 4 Population Growth from 2010 to 2020. Image from vpap.org.

Population projections from the Weldon Cooper Center for Public Service[4] suggest that uneven growth will continue. Figure 5 depicts population trends from 2000 to 2040 for Bay Aging's service area; only King William grows in every decade. Overall, population growth in the 10-county region is projected to slow from 1.3% for 2010-2020 to 1.2% for 2020-2030, then 0.7% for 2030-2040.

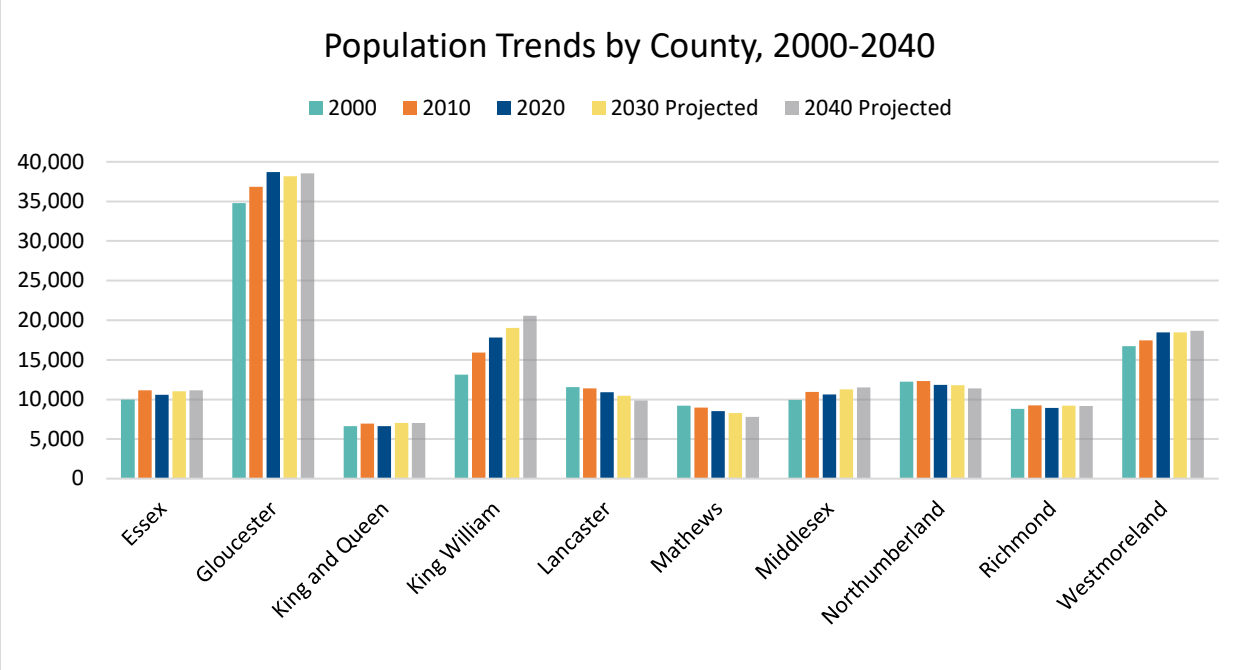


Figure 5 Population Trends, 2000-2040. Data for 2000-2020 from the decennial Census, 2030 and 2040 projections from the Weldon Cooper Center.

[3] The Virginia Public Access Project, "A Decade of Population Change," vpap.org, https://www.vpap.org/visuals/visual/population-change/, retrieved Feb. 25, 2022.

[4] University of Virginia Weldon Cooper Center, Demographics Research Group. "Virginia Population Projections," (2019), *https://demographics.coopercenter.org/virginia-population-projections*, retrieved Sept. 17, 2021.

Race and Ethnicity

Bay Aging's service area is racially less diverse than Virginia or the U.S., with a population that is 73.9% White. Mathews and Gloucester are least diverse, with minority populations of less than 17%. Essex is the most diverse at 43.8% non-White. Figure 6 details the racial and ethnic composition of the Middle Peninsula and Northern Neck, as well as Virginia and the U.S.[5] Bay Aging's service area has a larger percentage of Black/African American residents than the U.S., but slightly less than the Virginia average. A disproportionately small number of Asian people live in Bay Aging's service area – fewer than 1%, compared to 6% nationwide. The region's American Indian/Alaska Native population, numbering 0.6%, is concentrated in King William, home to the Pamunkey Indian Reservation and the Mattaponi Indian Reservation. The Upper Mattaponi Indian Tribe and the Rappahannock Tribe are also headquartered in the Middle Peninsula, but do not have state-recognized reservations.

County	White	Black or African American	American Indian & Alaska Native	Asian	Native Hawaiian & Other Pacific Islander	Other	Two or More Races	Hispanic or Latino Origin
Essex	56.2%	35.6%	0.8%	0.6%	0.0%	1.7%	5.2%	3.5%
Gloucester	83.7%	7.1%	0.4%	0.8%	0.1%	1.0%	6.9%	3.6%
King & Queen	67.9%	23.8%	1.4%	0.3%	0.0%	1.4%	5.1%	2.8%
King William	76.6%	14.6%	1.6%	0.7%	0.1%	1.3%	5.1%	2.7%
Lancaster	68.4%	27.0%	0.2%	0.7%	0.0%	0.5%	3.1%	1.1%
Mathews	85.5%	7.7%	0.2%	0.6%	0.2%	0.8%	5.0%	2.3%
Middlesex	79.2%	14.3%	0.3%	0.3%	0.0%	1.0%	4.9%	2.4%
Northumberland	70.7%	22.7%	0.2%	0.6%	0.0%	1.6%	4.1%	3.0%
Richmond	64.3%	27.3%	0.2%	0.5%	0.0%	3.1%	4.6%	6.7%
Westmoreland	64.6%	24.3%	0.4%	0.8%	0.1%	3.2%	6.6%	5.7%
10-County Service Area	73.9%	17.8%	0.6%	0.7%	0.1%	1.5%	5.5%	3.5%
Virginia	60.3%	18.6%	0.5%	7.1%	0.1%	5.2%	8.2%	10.5%
United States	61.6%	12.4%	1.1%	6.0%	0.2%	8.4%	10.2%	18.7%

Figure 6 Racial and Ethnic Composition of Bay Aging's Service Area

Ethnicity is tabulated separately from race since Hispanic/Latino people can be any race. The Middle Peninsula and Northern Neck have considerably fewer people of Hispanic/Latino origin than Virginia or the U.S. 10.5% of Virginians identify as Hispanic/Latino, compared to 18.7% nationally; only 3.5% of Bay Aging's service area is Hispanic/Latino. Richmond (6.7%) and Westmoreland (5.7%) have the highest percentages, but due to its large population, Gloucester (3.6%) has the greatest number of Hispanic/Latino people, with 1,410 of the 10-county total of 5,015. However, the Weldon Cooper Center cautions that the Census Bureau's new privacy protection method includes "noise" that distorts counts, especially for small geographies and racial/ethnic groups that comprise a small percentage of the population.[6]

[5] U.S. Census Bureau, 2020 Census, Tables P1 and P2, https://data.census.gov/cedsci/, retrieved Sept. 17, 2021.
[6] University of Virginia Weldon Cooper Center, Demographics Research Group, "Data Release for Virginia," *https://demographics.coopercenter.org/census2020*, retrieved Mar. 2, 2022.

Age

An oft-cited characteristic of the Middle Peninsula and Northern Neck is residents' older age. Northumberland (median age 58.9) is the 6th oldest county in the U.S. and Lancaster (57.3) places 15th. Together they are the oldest two contiguous counties in the country. All except one county in the region (King William) place in the oldest quartile of the nation's 3,220 counties.

Variation in median age within Virginia is vast, with three counties numbering among the U.S.'s 15 oldest, and three placing in the country's 10 youngest counties. Figure 7 shows median age for the 15 oldest and 10 youngest counties in the U.S., along with rankings for the 10 counties Bay Aging serves (color-coded blue). Four of the five oldest counties in Virginia are in Bay Aging's service area. Median age in the Middle Peninsula and Northern Neck ranges from 40.3 to 58.9, compared to 38.2 in Virginia and 38.1 nationwide.[7]

Approximately 48,600 residents of Bay Aging's service area are age 60 and up; this figure is projected to grow to 50,900 by 2030 and then decline to 47,400 by 2040.

County and County Equivalents Oldest and Youngest Counties & Bay Aging's Primary Service Area	**Median Age (2019)**	**Rank in VA**	**Rank in US**
Sumter County, Florida	67.4	--	1
Highland County, Virginia	60.9	1	2
Custer County, Colorado	59.7	--	3
Charlotte County, Florida	59.1	--	4
Wheeler County, Oregon	59	--	5
Northumberland County, Virginia	58.9	2	6
Ontonagon County, Michigan	58.6	--	7
Harding County, New Mexico	58.5	--	8
Jefferson County, Washington	58.3	--	9
Alcona County, Michigan	58.2	--	10
Catron County, New Mexico	58.1	--	11
Keweenaw County, Michigan	57.5	--	12
Kalawao County, Hawaii	57.4	--	13
Llano County, Texas	57.4	--	14
Lancaster County, Virginia	57.3	3	15
Mathews County, Virginia	54.5	4	46
Middlesex County, Virginia	53.9	5	56
Westmoreland County, Virginia	48.6	13	287
Richmond County, Virginia	47.3	21	398
King & Queen County, Virginia	46.7	31	461
Essex County, Virginia	46.3	37	521
Gloucester County, Virginia	44.9	53	733
King William County, Virginia	40.3	87	1949
Clay County, South Dakota	24.9	--	3211
Williamsburg city, Virginia	24.9	131	3212
Utah County, Utah	24.8	--	3213
Whitman County, Washington	24.7	--	3214
Chattahoochee County, Georgia	24.5	--	3215
Kusilvak Census Area, Alaska	24.1	--	3216
Todd County, South Dakota	23.8	--	3217
Madison County, Idaho	23.5	--	3218
Radford city, Virginia	23.4	132	3219
Lexington city, Virginia	22.3	133	3220

Figure 7 Median Age and Rank in Virginia and the U.S.

[7] U.S. Census Bureau, American Community Survey, Table B01002 Median Age by Sex, 2019: ACS 5-Year Estimates, https://data.census.gov/cedsci/table?q=median%20age&g=0100000US%240500000&tid=ACSDT5Y2019.B01002, retrieved Feb. 25, 2022.

Income

According to the Weldon Cooper Center, Virginia has more income inequality than any other state. Five of the U.S.'s 10 most affluent counties are in Virginia; Loudoun tops the list with median household income of $142,299 per year. In contrast, Emporia, Virginia has a median household income of $27,063.[8]

All 10 counties in the Middle Peninsula and Northern Neck fall within the second and third quartiles of income for Virginia's 133 counties, ranking from 35th to 85th. Figure 8 shows median household income in Bay Aging's service area, sorted from highest to lowest – Gloucester County leads with $70,537 and Richmond places last at $49,517. Figure 8 also includes the poverty rate and the percent of the population that is non-white.[9] The poverty rate tracks fairly closely with median income. Income appears to show some correlation with race; the two counties that are most predominantly White, Mathews and Gloucester, are among the three counties with the highest median income, while the two most diverse counties, Essex and Richmond, have the lowest median incomes. Income and poverty rates in this chart were observed prior to the COVID-19 pandemic, and therefore do not account for recent economic shifts caused by widespread shutdowns of businesses and schools.

County	Median Household Income (2019)	Poverty Rate (2019)	Population Percent Non-White (2020)
Gloucester	$70,537	8.8%	16.3%
King William	$66,987	8.4%	23.4%
Mathews	$64,237	11.4%	14.5%
King & Queen	$63,982	12.4%	32.1%
Northumberland	$62,632	14.6%	29.3%
Middlesex	$57,438	10.0%	20.8%
Westmoreland	$53,853	14.9%	35.4%
Lancaster	$53,711	9.8%	31.6%
Essex	$51,954	16.8%	43.8%
Richmond	$49,517	17.3%	35.7%
Virginia	$74,222	10.6%	39.7%
United States	$62,843	13.4%	38.4%

Figure 8 Median Household Income, Poverty & Diversity

Looking more closely at the issue of poverty, Table 1 in Appendix A details poverty rates by age, sex, race, ethnicity, and educational attainment. Mirroring the pattern of Virginia and the U.S., poverty in the Middle Peninsula and Northern Neck occurs at higher rates among people who are under age 35, non-white, and lack post-secondary education. More women than men are in poverty, though this was not the case in all counties in Bay Aging's service area. Some people who worked full-time year-round in 2019 nonetheless had incomes below the poverty line – 6% in Northumberland and over 3% in Westmoreland and Lancaster. These rates are likely to drop in the future, given the substantial increases in the minimum wage that took effect in 2021 and 2022, but the possibility of future shifts from full-time to part-time and reductions in part-time hours (whether initiated by employers or employees) could increase the number of part-time workers in poverty. Over 15% of part-time workers in Essex, Richmond and Westmoreland were below the poverty line in 2019.

[8] Dwayne Yancey, "The numbers we ought to be paying attention to," *Cardinal News*, Nov. 16, 2021, https://cardinalnews.org/2021/11/16/the-numbers-we-ought-to-be-paying-attention-to/.

[9] U.S. Census Bureau, American Community Survey, Table S1901 Income in the Past 12 Months, 2019: ACS 5-Year Estimates, https://data.census.gov/cedsci/table?q=Table%20S1901&tid=ACSST5Y2019.S1901; American Community Survey, Table S1701 Poverty Status in the Past 12 Months, 2019: ACS 5-Year Estimates, https://data.census.gov/cedsci/table?q=Table%20S1701&tid=ACSST5Y2019.S1701; 2020 Census, Table P1 Race.

Education and Employment

Educational attainment is relatively low within Bay Aging's service area. Figure 9 shows education levels; in half of the 10 counties of the Middle Peninsula and Northern Neck, fewer than 90% of adults age 25 and up graduated from high school. In all 10 counties, the percentages of adults with a bachelor's degree or graduate/professional degree are lower than the Virginia average.[10]

County	Educational Attainment, Adults Age 25+					Unemployment Rate for Civilian Labor Force, Age 16+
	Less than 9th Grade	9th-12th Grade, No Diploma	High School Graduate or Higher	Bachelor's Degree or Higher	Graduate or Professional Degree	
Essex	5.5%	11.7%	82.8%	16.2%	4.1%	6.8%
Gloucester	3.3%	7.6%	89.1%	24.0%	8.3%	3.1%
King & Queen	2.2%	7.2%	90.7%	25.8%	6.8%	3.0%
King William	2.5%	3.3%	94.2%	24.1%	7.2%	4.0%
Lancaster	3.9%	6.0%	90.2%	33.9%	16.6%	4.1%
Mathews	3.0%	5.2%	91.9%	29.1%	7.2%	4.4%
Middlesex	5.1%	7.1%	87.8%	26.9%	9.3%	5.5%
Northumberland	2.0%	5.8%	92.1%	32.6%	14.8%	4.6%
Richmond	6.5%	13.4%	80.1%	18.1%	6.6%	2.1%
Westmoreland	6.0%	10.2%	83.8%	18.3%	8.4%	6.2%
Virginia	3.9%	5.8%	90.3%	39.5%	17.2%	4.6%
United States	4.9%	6.6%	88.5%	32.9%	12.7%	5.3%

Figure 9 Educational Attainment and Unemployment Rate

Figure 9 also depicts the unemployment rate, as measured by the American Community Survey in 2015-2019 (prior to the COVID-19 pandemic). The three counties with unemployment rates above the U.S. average (Middlesex, Westmoreland, and Essex) number among the four counties with the fewest high school graduates in the region.[11]

Table 2 in Appendix A details the industries in which residents of the Middle Peninsula and Northern Neck are employed, based on government surveys conducted in 2015-2019. For all 10 counties, *'educational services and health care and social assistance'* is the sector employing the most people. *'Retail trade,' 'construction,' 'manufacturing,'* and *'professional, scientific, and management, and administrative and waste management services'* also employ large shares of the population. As compared to other counties in the area, Richmond has more residents employed in manufacturing and fewer in retail; job opportunities with large manufacturers in the town of Warsaw such as Wood Preservers (owned by Stella-Jones) and Helena Agri-Enterprises may explain why Richmond, despite having the fewest high school graduates, has the lowest unemployment rate in the region. King & Queen, with the second-lowest unemployment rate, has more than double the

[10] U.S. Census Bureau, American Community Survey, Table S1501 Educational Attainment, 2020: ACS 5-Year Estimates, https://data.census.gov/cedsci/table?q=Table%20S1501, retrieved Apr. 11, 2022.

[11] U.S. Census Bureau, American Community Survey, Table DP03 Selected Economic Characteristics, 2019: ACS 5-Year Estimates, https://data.census.gov/cedsci/table?q=Table%20DP03&tid=ACSDP5Y2019.DP03, retrieved Apr. 12, 2022.

percentage of residents engaged in *'agriculture, forestry, fishing and hunting, and mining'* compared to other counties in the area.

Acquiring training, degrees and jobs can be challenging for residents of the Middle Peninsula and Northern Neck due to a lack of resources in the region. Most counties in Bay Aging's service area score above 50 on the Center for Applied Research and Engagement Systems (CARES)' Education Opportunity Index, which considers educational factors from pre-school through post-secondary (as shown in Map 1 in Appendix B, King & Queen and Westmoreland have lower scores). However, there are few institutions of higher learning in the region – only Rappahannock Community College (RCC) is located within the 10-county area. In addition to RCC's Glenns (Gloucester) and Warsaw (Richmond) campuses shown on Map 2 in Appendix B, RCC has a welding lab in Montross (Westmoreland) and a four-classroom center in Kilmarnock (Lancaster). More options exist in Richmond, Hampton, Newport News, and Fredericksburg, not to mention Washington, D.C. and Virginia Beach, but these schools may not be accessible for students who rely on public transportation or share a vehicle. Furthermore, lack of broadband internet may hinder local students from pursuing online education.

Employment accessibility is poor in the region, particularly in the Northern Neck, as illustrated by Map 3 in Appendix B. Although there is a concentration of jobs across the state border in Maryland, the Potomac River presents a barrier to access. Other rivers in the region likewise hinder travel, with limited bridge crossings creating bottlenecks and causing circuitous commutes. Over a quarter of workers in Essex and Mathews travel an hour or more to get to work (see Map 4 in Appendix B).

Three counties in Bay Aging's service area are among the 10 Virginia counties with the largest percentages of workers who work from home: Westmoreland (9%), King & Queen (8%), and Northumberland (8%).[12] These statistics were gathered prior to the pandemic and have likely increased.

County	Percent of People with No Computer, by Age Group			Percent with a Computer but No Broadband			Households with No Vehicle
	Under 18	Age 18-64	65 & over	Under 18	Age 18-64	65 & over	
Essex	0.0%	8.0%	30.3%	26.4%	18.4%	17.5%	4.7%
Gloucester	1.5%	3.1%	17.6%	3.8%	5.2%	10.8%	2.4%
King & Queen	0.0%	5.6%	33.0%	21.1%	11.2%	32.0%	3.7%
King William	0.4%	2.0%	19.5%	8.8%	17.0%	21.9%	3.3%
Lancaster	2.7%	10.1%	19.0%	7.5%	12.5%	10.6%	5.6%
Mathews	0.0%	5.8%	14.8%	11.8%	16.5%	20.7%	1.1%
Middlesex	1.2%	4.9%	18.2%	8.8%	13.9%	15.3%	3.9%
Northumberland	1.2%	2.9%	17.2%	3.3%	8.2%	6.0%	4.6%
Richmond	0.0%	6.7%	34.3%	10.2%	11.5%	2.9%	5.9%
Westmoreland	3.4%	6.3%	20.9%	3.2%	9.3%	11.2%	5.0%

Figure 10 Access to Technology and Vehicles

Figure 10 examines access to education and employment from the standpoint of both mobility and technology. While only 1.1% of households in Mathews have no vehicle available, 5% or more have

[12] Lindley Estes, "Why does Charlotte County have third-highest rate of remote workers?" *Cardinal News*, Feb. 23, 2022, https://cardinalnews.org/2022/02/23/why-does-charlotte-county-have-third-highest-rate-of-remote-workers/.

no vehicle in Westmoreland, Lancaster, and Richmond. Ownership of a computer appears to be correlated with age. Among those under age 18, few live in households with no computer – only Westmoreland and Lancaster exceed 1.5%. For those age 18-64, between 2% and 10% live in households with no computer. Among people age 65 and over, 15–34% live in households with no computer. Richmond, King & Queen, and Essex have the most older adults lacking computer access.[13]

Completing homework, attending virtual meetings, and conducting telehealth appointments requires not only a computer, but good internet access. The percentage of computer owners reporting lack of broadband at home varies by age, but is highest in Essex, King & Queen, Mathews, King William, and Middlesex. A $7.2 million project to expand broadband in Mathews, Lancaster, and Middlesex began in March 2022 and is expected to continue through early 2023.[14] Grants announced by Governor Ralph Northam in December 2021 are expected to bring high-speed internet to 90% of Virginians by 2024.[15]

Health

The University of Wisconsin's County Health Rankings & Roadmaps program compiles and analyzes data to build models of health outcomes and health factors for every county in the U.S. Maps 5 and 6 in Appendix B illustrate health outcomes and health factors for the state of Virginia; counties and county equivalents are ranked from 1 to 133.

> "The overall rankings in health outcomes represent how healthy counties are within the state. The healthiest county in the state is ranked #1. The ranks are based on two types of measures: how long people live and how healthy people feel while alive. The overall rankings in health factors represent what influences the health of a county. They are an estimate of the future health of counties as compared to other counties within a state. The ranks are based on four types of measures: health behaviors, clinical care, social and economic, and physical environment factors."[16]

For both measures, counties in the northern part of Virginia tend to rank higher than counties in the south and west. Top scores are concentrated near Washington D.C. and along the Interstate 64 corridor from Virginia Beach through the cities of Richmond (which is distinct from Richmond County) and Charlottesville to Staunton. The counties with the highest scores for health outcomes are Arlington County, Loudoun County, Falls Church City and Fairfax County; these same localities, slightly reordered, also occupy the top four slots for health factors.

Figure 11 depicts health outcomes and health factors, together with the subcategories of which they are comprised, for the 10 counties of the Middle Peninsula and Northern Neck. Each category is

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[13] U.S. Census Bureau, American Community Survey, Table B08201 Household Size by Vehicles Available, 2020: ACS 5-Year Estimates, https://data.census.gov/cedsci/table?q=B08201&g=0100000US&tid=ACSDT5Y2020.B08201 and Table B28005 Age by Presence of a Computer and Types of Internet Subscription in Household, 2020: ACS 5-Year Estimates, https://data.census.gov/cedsci/table?q=Table%20B28005, retrieved Mar. 17, 2022.

[14] Michael Martz, "Construction begins to extend broadband in Caroline, three other counties," *Richmond Times-Dispatch*, Mar. 3, 2022, https://richmond.com/news/state-and-regional/govt-and-politics/construction-begins-to-extend-broadband-in-caroline-three-other-counties/article_d697f722-1eff-56b4-b7cc-90fc96b5e76f.html.

[15] Former Virginia Governor Ralph S. Northam, "Governor Northam Announces Virginia Deploys $2 Billion to Achieve Near-Universal Broadband," https://www.governor.virginia.gov/newsroom/all-releases/2021/december/headline-916304-en.html, retrieved Apr. 12, 2022.

[16] University of Wisconsin Population Health Institute, "County Health Rankings & Roadmaps," https://www.countyhealthrankings.org/app/virginia/2021/overview, retrieved Mar. 21, 2022.

expressed as a rank within the state, with the exception of life expectancy, which is expressed in years. Within Bay Aging's service area, life expectancy ranges from a high of 80.1 in Northumberland to a low of 75 in King & Queen (these estimates pre-date the COVID-19 pandemic). Length of life rank is based on life expectancy as well as other factors such as infant mortality; together with quality of life rank, this determines the health outcomes rank. None of the counties in the Middle Peninsula and Northern Neck place within the top quartile of the state's health outcomes rankings; King William ranks highest, at 42nd out of 133. Essex ranks near the bottom of the state, at 124th.

Health factors is based on four subcategories. Overall, the 10 counties in Bay Aging's service area perform better with regard to clinical care and physical environment than for health behaviors and social & economic factors. Mathews ranks in Virginia's top quartile for health factors, at 26th; Gloucester, 34th, just misses the first quartile. Westmoreland places lowest at 96th out of 133.

County	HEALTH OUTCOMES				HEALTH FACTORS				
	Life Expectancy (Years)	**Length of Life Rank**	**Quality of Life Rank**	**Health Outcomes Rank**	**Health Behaviors Rank**	**Clinical Care Rank**	**Social & Economic Factors**	**Physical Environment**	**Health Factors Rank**
Essex	75.9	119	124	**124**	89	48	100	51	**88**
Gloucester	77.1	59	45	**48**	50	25	35	62	**34**
King & Queen	75.0	114	100	**106**	115	86	49	91	**82**
King William	77.8	50	41	**42**	71	37	25	96	**40**
Lancaster	76.1	102	90	**100**	49	23	94	22	**61**
Mathews	78.9	51	51	**50**	31	16	41	12	**26**
Middlesex	77.7	80	64	**66**	59	32	75	46	**54**
Northumberland	80.1	30	88	**56**	40	36	107	49	**73**
Richmond	75.8	104	109	**105**	78	39	72	35	**68**
Westmoreland	77.0	84	92	**89**	74	113	99	60	**96**

Figure 11 Health Outcomes and Health Factors

The Centers for Disease Control uses an alternate ranking system to produce its Social Vulnerability Index, which considers factors such as poverty, lack of access to transportation, unemployment, disability, and crowded housing, to identify which communities may need support during natural and man-made disasters.[17] The Social Vulnerability Index is calculated for census tracts, which offers greater geographic specificity. As shown by Map 7 in Appendix B, within the Middle Peninsula and Northern Neck, the census tract containing Tappahannock (Essex) has the highest vulnerability score, 0.95 on a scale of 0 to 1. Colonial Beach in Westmoreland ranks second at 0.82. The northern portion of Gloucester has the lowest vulnerability in the region with an index of 0.13.[18]

[17] Agency for Toxic Substances and Disease Registry, "CDC/ATSDR Social Vulnerability Index," https://www.atsdr.cdc.gov/placeandhealth/svi/index.html, retrieved Mar. 22, 2022.
[18] Vpap.org, "Mapping Virginia's Vulnerable Areas," https://www.vpap.org/visuals/visual/virginia-social-vulnerability-index-2018/, retrieved Mar. 22, 2022.

Housing

There are 78,247 housing units in the Middle Peninsula and Northern Neck, of which 85% are single-unit structures. The median age of the housing stock is oldest in Mathews, Richmond, and Lancaster (see Figure 12). Mathews' and Lancaster's populations have declined in recent decades (see Figure 5), so not much new construction has been needed; less than 1% of the housing stock was built more recently than 2013. King William, with the fastest population growth in the region, has the youngest median house age due to new construction occurring to accommodate the growing number of residents – more than 6% of King William's housing stock was built since 2013.[19]

A different picture emerges in King & Queen and Northumberland; despite stagnant population growth, these two counties have fairly young median house ages and moderate rates of new construction, which suggests that older homes have been replaced with new structures. Replacement could be literal, with older units being demolished and new units built; another possibility is older units sitting vacant while new units are constructed. Figure 12 demonstrates that the vacancy rate is very high in all area counties except King William and Gloucester. However, vacancies occur for many different reasons, including renovation, seasonal use, being for rent or sale, and abandonment (structures which are dilapidated to the point of being open to the elements are not included in the Census's count of housing units or vacancies). In the Middle Peninsula and Northern Neck, many vacancies are seasonal and recreational housing units; if the vacancy rate is recalculated with seasonal and recreational vacancies excluded, then only Richmond, Northumberland, and King & Queen have rates considerably above the national average.[20]

County	Total Housing Units	Median Year Structure Built	Occupied Housing Units	Vacant Housing Units	Vacancy Rate	Vacant: Seasonal & Rec-reational	Vacancy Rate Not Including Seasonal & Recreational	Renter-occupied housing units	Manufactured homes & non-traditional housing units
Essex	5,876	1984	4,551	1,325	22.5%	742	9.9%	31.9%	14.0%
Gloucester	16,713	1986	14,792	1,921	11.5%	690	7.4%	20.0%	9.2%
King & Queen	3,508	1989	2,816	692	19.7%	259	12.3%	15.4%	14.9%
King William	7,107	1994	6,393	714	10.0%	152	7.9%	11.6%	3.0%
Lancaster	7,632	1979	5,287	2,345	30.7%	1,639	9.3%	24.2%	5.4%
Mathews	5,758	1975	3,881	1,877	32.6%	1,392	8.4%	16.3%	6.4%
Middlesex	7,352	1983	4,764	2,588	35.2%	2,045	7.4%	21.4%	12.4%
Northumberland	9,321	1987	5,686	3,635	39.0%	2,389	13.4%	10.6%	11.7%
Richmond	3,967	1978	2,939	1,028	25.9%	382	16.3%	35.8%	8.1%
Westmoreland	11,013	1982	7,910	3,103	28.2%	2,106	9.1%	26.1%	11.4%
Virginia	3.5 m	1982	3.2 m	353,667	10.0%	82,998	7.7%	33.3%	4.2%
United States	138.4 m	1978	122.4 m	16.1 m	11.6%	5.3 m	7.8%	35.6%	5.5%

Figure 12 Housing Stock and Occupancy

[19] U.S. Census Bureau, American Community Survey, Table B25002 Occupancy Status, 2020: ACS 5-Year Estimates, https://data.census.gov/cedsci/table?q=B25002 and Table B25035 Median Year Structure Built, 2020: ACS 5-Year Estimates, https://data.census.gov/cedsci/table?q=B25035 and Table DP04 Selected Housing Characteristics, 2020: ACS 5-Year Estimates, https://data.census.gov/cedsci/table?q=DP04.

[20] U.S. Census Bureau, American Community Survey, Table B25004 Vacancy Status, 2020: ACS 5-Year Estimates, https://data.census.gov/cedsci/table?q=B25004, retrieved Mar. 29, 2022.

Home ownership rates are high in Bay Aging's service area (see Figure 12). Statewide, one-third of households are renters; locally, only Essex and Richmond have comparable rates. Half of the counties in the Middle Peninsula and Northern Neck have 20% or fewer renter-occupied housing units. However, home ownership may not give all area homeowners the opportunity to build generational wealth; as detailed in Figure 12, all counties in the region except King William have higher percentages than the statewide average of manufactured homes and non-traditional housing units such as boats, RVs, and tents (boats, RVs, and tents which are used for recreational purposes and not as primary dwellings are not included in this category).[21] These types of homes typically have shorter lifespans and do not appreciate in value over time.

Figure 13 presents household size and composition data. All counties except King William have a smaller average household size than Virginia and the U.S. Seven of 10 counties have greater proportions of people living alone than the state and nation. All 10 counties have more households with at least one person age 60+ than the state average. Nine of 10 counties have fewer households with children than Virginia and the U.S. Rankings of these four measures yield patterns similar to, but not exactly the same as, median age (Figure 7), with the oldest counties having smaller household size, more householders living alone, more households with people age 60+ and fewer households with children.[22]

County	Total House-holds	Average House-hold Size	House-holder Living Alone	Households with One or More People Under 18 Years	Households with One or More People 60 Years and Over
Essex	4,551	2.37	32.3%	25.3%	50.2%
Gloucester	14,792	2.51	25.3%	24.6%	45.3%
King & Queen	2,816	2.49	30.2%	20.2%	49.1%
King William	6,393	2.65	21.4%	32.8%	40.0%
Lancaster	5,287	1.99	38.2%	14.4%	62.9%
Mathews	3,881	2.22	33.0%	21.9%	65.0%
Middlesex	4,764	2.16	33.2%	17.0%	62.4%
Northumberland	5,686	2.14	28.6%	18.3%	70.1%
Richmond	2,939	2.47	25.8%	22.4%	55.0%
Westmoreland	7,910	2.24	34.6%	23.2%	54.9%
Virginia	3.2 m	2.60	27.5%	31.3%	39.3%
United States	122.4 m	2.60	28.0%	30.7%	40.2%

Figure 13 Household Size and Composition

Although the Middle Peninsula and Northern Neck are rural, housing costs can be challenging, especially for renters. Figure 14 depicts housing costs for owners and renters; in addition to mortgage payments or rent, this figure includes utilities, insurance, taxes, and fees. Rates are highest in Gloucester and King William, which also have the highest median household incomes (Figure 8). In contrast, Essex and Lancaster have low median incomes but high monthly housing costs for homeowners.[23]

[21] U.S. Census Bureau, American Community Survey, Table S1101 Households and Families, 2020: ACS 5-Year Estimates, https://data.census.gov/cedsci/table?q=S1101, retrieved Apr. 12, 2022.
[22] U.S. Census Bureau, American Community Survey, Table S1101 Households and Families.
[23] U.S. Census Bureau, American Community Survey, Table S2503 Financial Characteristics, 2020: ACS 5-Year Estimates, https://data.census.gov/cedsci/table?q=S2503, retrieved Apr. 12, 2022.

In Virginia and the U.S., the median monthly housing cost is typically higher for owners than renters, but the reverse is true for six of the 10 counties in Bay Aging's service area. The gap between owners and renters is especially high in Northumberland, King & Queen, and Middlesex, with renters paying $138 - $260 per month more than owners, despite the older age of the rental housing stock.[24] A large proportion of both owners and renters in the Middle Peninsula and Northern Neck are "cost-burdened," traditionally defined as spending more than 30% of household income on housing.[25] The percentage of owners who are cost-burdened exceeds the Virginia average of 20.4% for eight of 10 local counties; only King William and Mathews have fewer cost-burdened homeowners than the state average. In all area counties except King William and King & Queen, more than 30% of renters are cost-burdened.

County	Median Monthly Housing Cost		Percent with Housing Costs ≥ 30% of Household Income		Median Year Structure Built		Median Value of Owner-Occupied Units
	Owner-Occupied	Renter-Occupied	Owner-Occupied	Renter-Occupied	Owner-Occupied	Renter-Occupied	
Essex	$981	$887	22.2%	49.0%	1990	1984	$196,500
Gloucester	$1,157	$1,045	21.5%	40.0%	1987	1982	$230,300
King & Queen	$796	$969	22.4%	16.6%	1992	1972	$207,400
King William	$1,173	$1,076	18.1%	18.9%	1994	1994	$205,800
Lancaster	$955	$903	22.0%	31.1%	1980	1978	$236,500
Mathews	$836	$931	18.3%	55.1%	1980	1982	$265,600
Middlesex	$750	$888	26.1%	33.1%	1989	1984	$265,500
Northumberland	$754	$1,014	22.0%	38.0%	1992	1985	$270,900
Richmond	$789	$842	23.3%	30.3%	1983	1970	$193,700
Westmoreland	$875	$884	24.9%	42.8%	1983	1986	$201,000
Virginia	$1,345	$1,257	20.4%	43.7%	1984	1981	$282,800
United States	$1,142	$1,096	21.9%	45.7%	1979	1977	$229,800

Figure 14 Housing Cost, Age, and Value

Median value of owner-occupied units varies considerably within the region, with a 40% difference between Northumberland and the adjacent county of Richmond. The five counties of the Northern Neck and Middle Peninsula which border the Chesapeake Bay have the highest median value; Northumberland is most expensive, at $270,900. Median values are lowest in Richmond and Essex, slightly below $200,000.[26]

Monthly housing costs do not necessarily correlate with house values, as illustrated by Figure 14. Homeowners who have paid off their mortgage may have low monthly housing costs despite living in an expensive home. This appears to be the case in Northumberland, which has the highest median

[24] U.S. Census Bureau, American Community Survey, Table B25037 Median Year Structure Built by Tenure, 2020: ACS 5-Year Estimates, https://data.census.gov/cedsci/table?q=B25037, retrieved Apr. 11, 2022.
[25] U. S. Department of Housing and Urban Development, "Rental Burdens: Rethinking Affordability Measures," *PD&R Edge*, https://www.huduser.gov/portal/pdredge/pdr_edge_featd_article_092214.html, retrieved Apr. 13, 2022.
[26] U.S. Census Bureau, American Community Survey, Table B25077 Median Value (Dollars), 2020: ACS 5-Year Estimates, https://data.census.gov/cedsci/table?q=B25077, retrieved Apr. 12, 2022.

house value but low monthly housing costs for owners (renters have much higher monthly costs). Over 50% of owner-occupied housing units in Northumberland have no mortgage (see Figure 15)[27]. Most counties in the Middle Peninsula and Northern Neck have higher percentages of homeowners with no mortgage than the Virginia or U.S. average. This is likely due to homeowner age; only King William and Gloucester, the youngest counties in the region, have rates comparable to Virginia.

County	Percent of Owner-Occupied Housing Units Without a Mortgage
Northumberland	50.2%
Middlesex	49.4%
Lancaster	46.9%
Mathews	46.3%
Westmoreland	44.5%
Essex	43.9%
Richmond	42.8%
King & Queen	41.9%
Gloucester	33.5%
King William	30.4%
Virginia	31.8%
United States	37.9%

Figure 15 Homeowners With No Mortgage

[27] U.S. Census Bureau, American Community Survey, Table DP04 Selected Housing Characteristics, 2020: ACS 5-Year Estimates, https://data.census.gov/cedsci/table?q=DP04, retrieved Apr. 14, 2022.

Survey Results

Methodology

As part of its community needs assessment process, Bay Aging conducted a survey from Nov. 8 - Dec. 15, 2021. Survey questions were based on the previous needs assessment survey, completed in 2018, with updates to increase inclusivity, improve clarity, enhance analysis, and accommodate changes in programs and services.

Figure 16 Newspaper advertisement for Bay Aging's community needs assessment survey

Because COVID-19 limited opportunities to apply other assessment tools such as community meetings, Bay Aging devoted more resources than usual to promoting and distributing the 2021 survey. Respondents could take the survey online via SurveyMonkey, or on paper. A QR code offered easy access to the survey by smart phone or tablet. The survey was promoted on social media, in newspaper ads, and on signs on buses. Staff distributed the survey electronically by email, and delivered 1,807 paper copies to local libraries, apartment communities, senior centers, transit facilities, and Meals on Wheels recipients. As an incentive, survey promotions enticed participants with the offer of $50 gift cards to be given away to five randomly chosen survey respondents. Efforts yielded a total of 486 completed surveys, more than three times as many as the 155 surveys received in 2018. Staff manually entered responses from 212 paper surveys into SurveyMonkey, where the data was combined with electronic responses from 274 participants.

Survey Demographics

Surveys were completed by residents of all 10 counties in Bay Aging's primary service area, as shown by Figure 17. The majority of respondents who selected "Other" wrote in James City County, the location of one of Bay Aging's service-enriched rental communities for older adults. Gloucester residents submitted the largest number of responses, but as illustrated by Figure 3, Gloucester has more than twice as many people as any

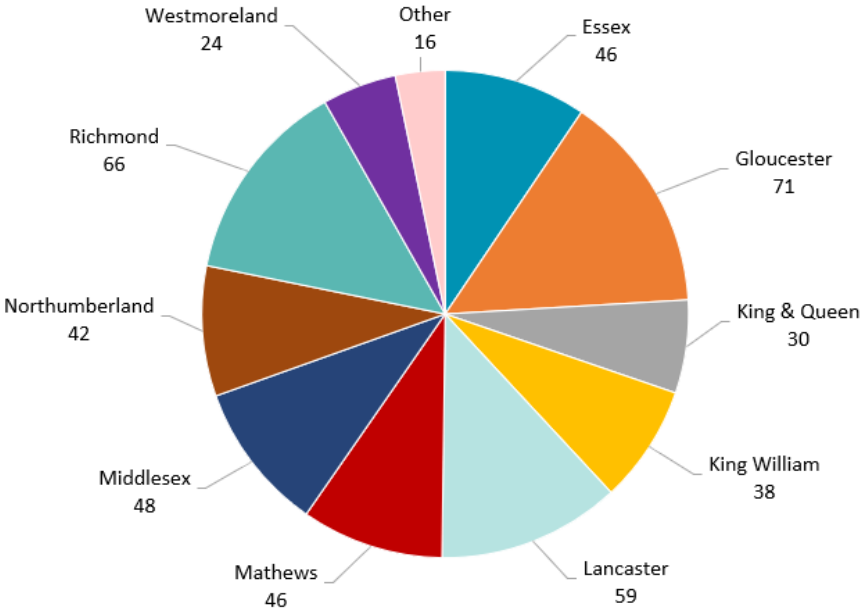


Figure 17 Where survey respondents live

of the other counties in the Middle Peninsula and Northern Neck. Figure 18 depicts the percent of each county's population that responded to the survey; this reveals that Gloucester, along with King William and Westmoreland, are underrepresented in the survey, while Richmond is quite overrepresented. Ideally, county representation would be more balanced, but the distribution of survey responses among counties is more even than in 2018.

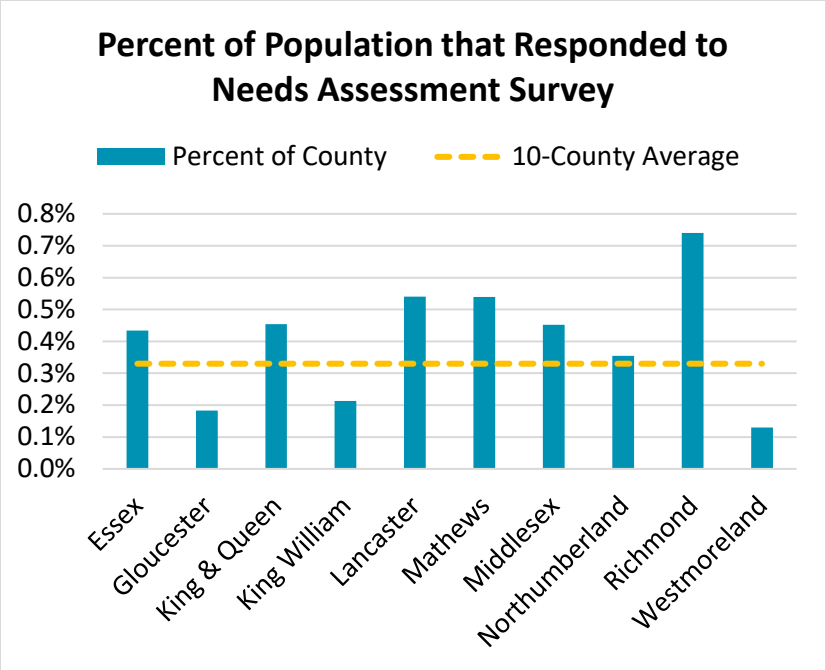


Figure 18 Representation of Counties in the Survey

Figure 19 shows survey participants' demographic characteristics. Although respondents' demographics do not exactly match the overall population's demographics, survey responses were more balanced and diverse in 2021 than in 2018 with regard to gender, age, and race (the 2018 survey did not ask for respondents' ethnicity). For example, 33% of survey respondents are male, as compared to 27% in 2018 (49% of the population is male).

The age brackets for the 2021 survey are different than the 2018 survey (brackets were adjusted to match the categories used by the Census) so an exact comparison is not possible, but it is clear that the 2021 age distribution is more balanced. In 2018 more than two-thirds of survey respondents were age 50-74, with people age 18-49 very underrepresented. The 2021 survey shows big gains in responses from younger people, especially age 18-34. However, age 65 and up continues to be overrepresented in the 2021 survey, with 41% of the responses. In comparison, 25% of the area's population is age 65 and older.

Participation by minorities increased dramatically in the 2021 survey. In 2018, 84.9% of survey respondents were White. 64.6% of participants in 2021 self-identify as White, compared to 73.9% of the region's population. Responses from people identifying as American Indian/Alaska Native, Asian, Black/African American and Native Hawaiian/Pacific Islander all exceeded their share of the population.

13.9% of 2021 survey participants self-identify as Hispanic/Latino, considerably more than the 2020 Decennial Census count of 3.5% for the region. However, the Census Bureau's post-enumeration analysis indicates an undercount for the Hispanic/Latino population. Undercounts were also detected for the American Indian/Alaska Native population living on reservations and the Black/African American population.[28]

[28] U.S. Census Bureau, "Census Bureau Releases Estimates of Undercount and Overcount in the 2020 Census," March 10, 2022. https://www.census.gov/newsroom/press-releases/2022/2020-census-estimates-of-undercount-and-overcount.html.

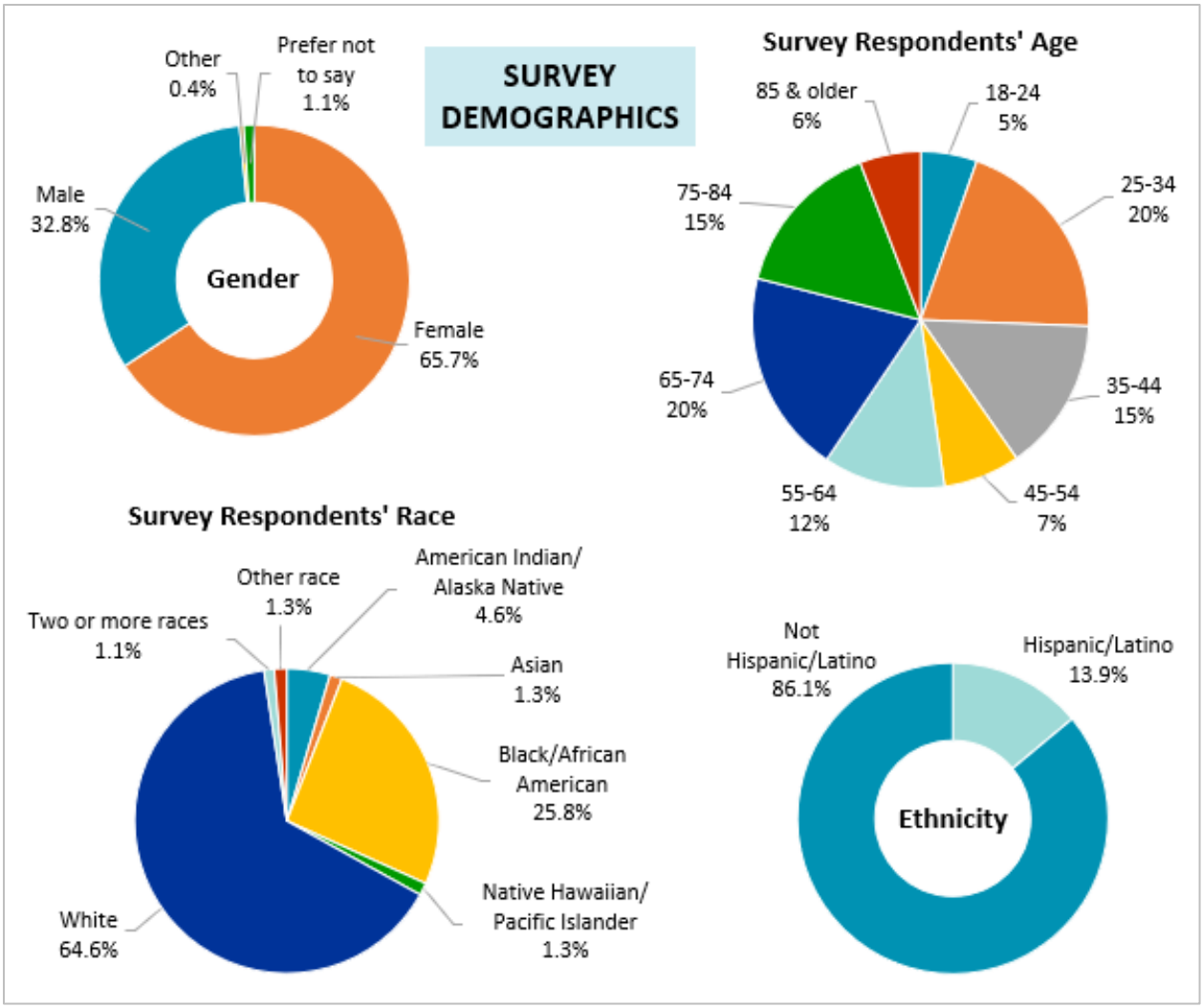


Figure 19 Survey Respondents' Demographic Characteristics

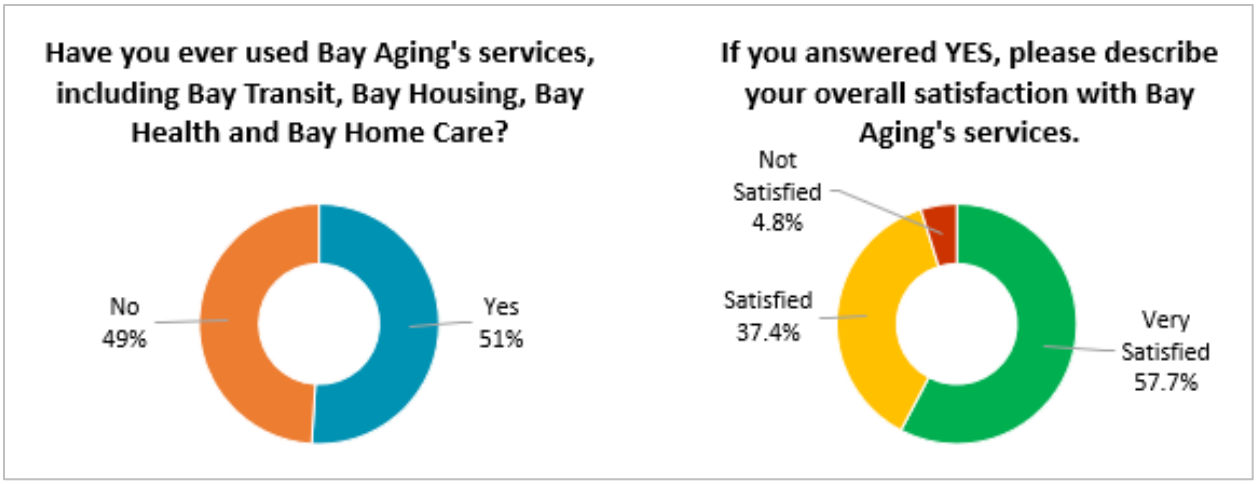


Figure 20 Survey Respondents' Use of Bay Aging Services

Because the survey is a community needs assessment, not a customer satisfaction survey, Bay Aging sought to gather opinions from not only clients but also community members who may be unfamiliar with Bay Aging. When asked if they had ever used Bay Aging's services, 49% of survey participants said *No* (see Figure 20). To maximize the usefulness of an anonymous interaction with customers, those who answered affirmatively were asked to describe their satisfaction with Bay Aging's services: 57.7% were *Very Satisfied*, 37.4% were *Satisfied*, and 4.8% were *Not Satisfied*. Reasons for dissatisfaction included having to wait a long time for the bus, and Bay Aging's homelessness assistance staff not being available 24 hours a day.

The strong response from diverse members of the community is important in establishing the 2021 community needs assessment survey as a valid tool for assessing community needs - statistical significance requires a sufficient sample size and an unbiased sample. For Bay Aging's 10-county service area population of 143,044, a sample size of 450 (not all of the 486 survey respondents answered every question) yields a 5% margin of error with 95% confidence. When disaggregating to individual counties, the margin of error becomes much larger – for example, 59 survey respondents from Lancaster (population 10,919) yields a 13% margin of error with 95% confidence.

Sampling bias is more difficult to assess. This survey includes some degree of self-selection bias because participants voluntarily chose whether or not to participate, and those who completed the survey may be systematically different than those who did not take the survey. Participation by a large number of people who are not Bay Aging clients is a reassuring sign that the survey audience is broad, as is the submission of sizeable numbers of both online and paper surveys.

Comparison of the demographics of survey respondents with the total population reveals that the survey sample is not perfectly representative of the population; for example, women were more likely than men to take the survey. It is possible to weight survey responses to account for differences in response rates by gender, age, race, and other factors, but staff decided against this procedure for two reasons. First, studies of weighting indicate that even elaborate weighting adjustments do not remove most of the bias, and occasionally make bias worse.[29] Second, weighting responses could complicate presentation of the survey results to non-technical audiences such as local community groups by obscuring basic counts and percentages.

Survey design can also create bias. For example, the order in which response options are presented to participants is important – the primacy effect suggests that respondents tend to choose options closer to the beginning of a written list. Staff therefore listed responses for the more subjective survey questions in alphabetical order rather than allowing their own conscious or subconscious bias to impact the order of response options (the survey appears in Appendix D). Staff elected not to produce multiple versions of the survey with response options in different orders, as doing so would have created challenges for data entry of paper surveys, and possibly increased the likelihood of data entry errors. For ease of viewing survey results, bar charts have response options sorted not in the order they appeared, but according to how many votes they received.

[29] Andrew Mercer, Arnold Lau and Courtney Kennedy, "For Weighting Online Opt-In Samples, What Matters Most?" *Pew Research Center*, Jan. 26, 2018, https://www.pewresearch.org/methods/2018/01/26/for-weighting-online-opt-in-samples-what-matters-most/.

Survey Results: Quality of Life

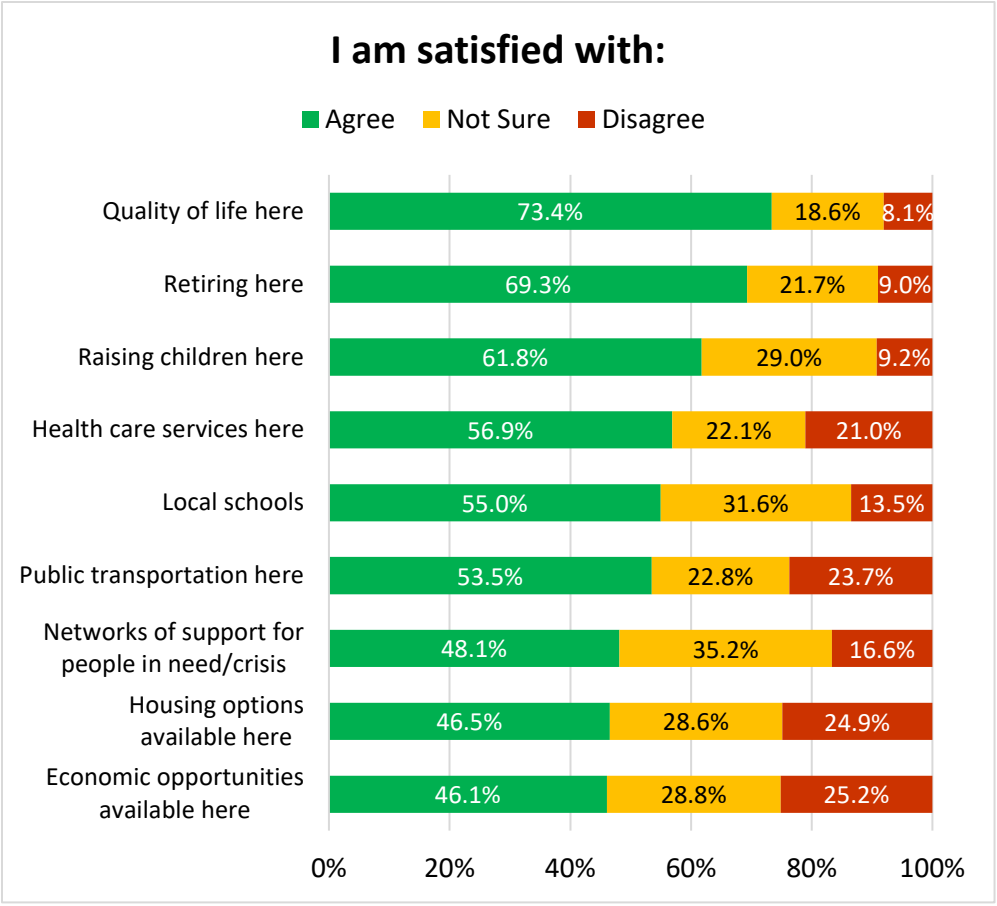


Figure 21 Survey Results: Participants' Satisfaction Rates

Figure 21 displays survey participants' level of satisfaction with several broad categories. Respondents were most satisfied with *quality of life here, retiring here,* and *raising children here*. *Economic opportunities available here* and *housing options available here* ranked at the bottom.

Despite placing last, *economic opportunities available here* showed considerable improvement over time; only 11.7% of respondents expressed satisfaction with economic opportunities in 2018, compared to 46.1% in 2021. *Health care services here* also showed improvement, with satisfaction increasing from 44.1% of participants in 2018 to 56.9% in 2021.

Overall, 73.4% of participants agreed that they are satisfied with *quality of life here*, but responses varied by county, ranging from 82.1% in Gloucester to 55.2% in King & Queen (see Figure 22). Reasons for satisfaction are no doubt multi-faceted; without attributing causality, it is notable that King & Queen ranks last in the region on the CARES Education Opportunity Index (see Map 1 in Appendix B) and also has the shortest life expectancy (see Figure 11).

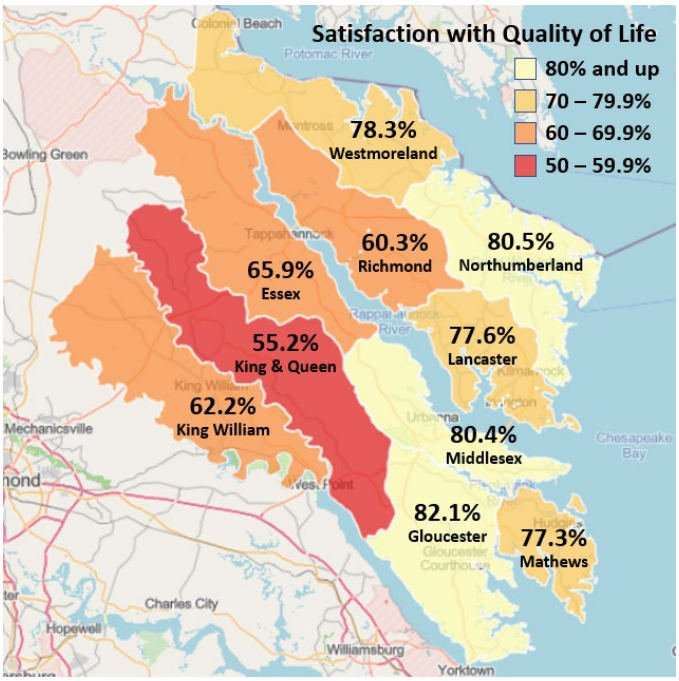


Figure 22 Satisfaction with Quality of Life, by County

The next survey question asked respondents to choose the most important factors contributing to high quality of life. Respondents were directed to vote for their three top choices and rank them from one to three. Figure 23 shows participants' responses, color-coded by first, second and third choice; the most popular choices are *availability of health care services*, *clean healthy environment*, and *affordable housing*. Another way to look at the results for this question is to consider only respondents' first choice votes; using that method, the same choices place in the top three, but affordable housing moves into first place (as illustrated by the yellow bars in Figure 23). Table 3 in Appendix A shows first-choice votes by county; variation among counties is highlighted in Tables 3-10 by using orange text for categories that place in the top three for some counties but are not in the top three for the 10-county region as a whole.

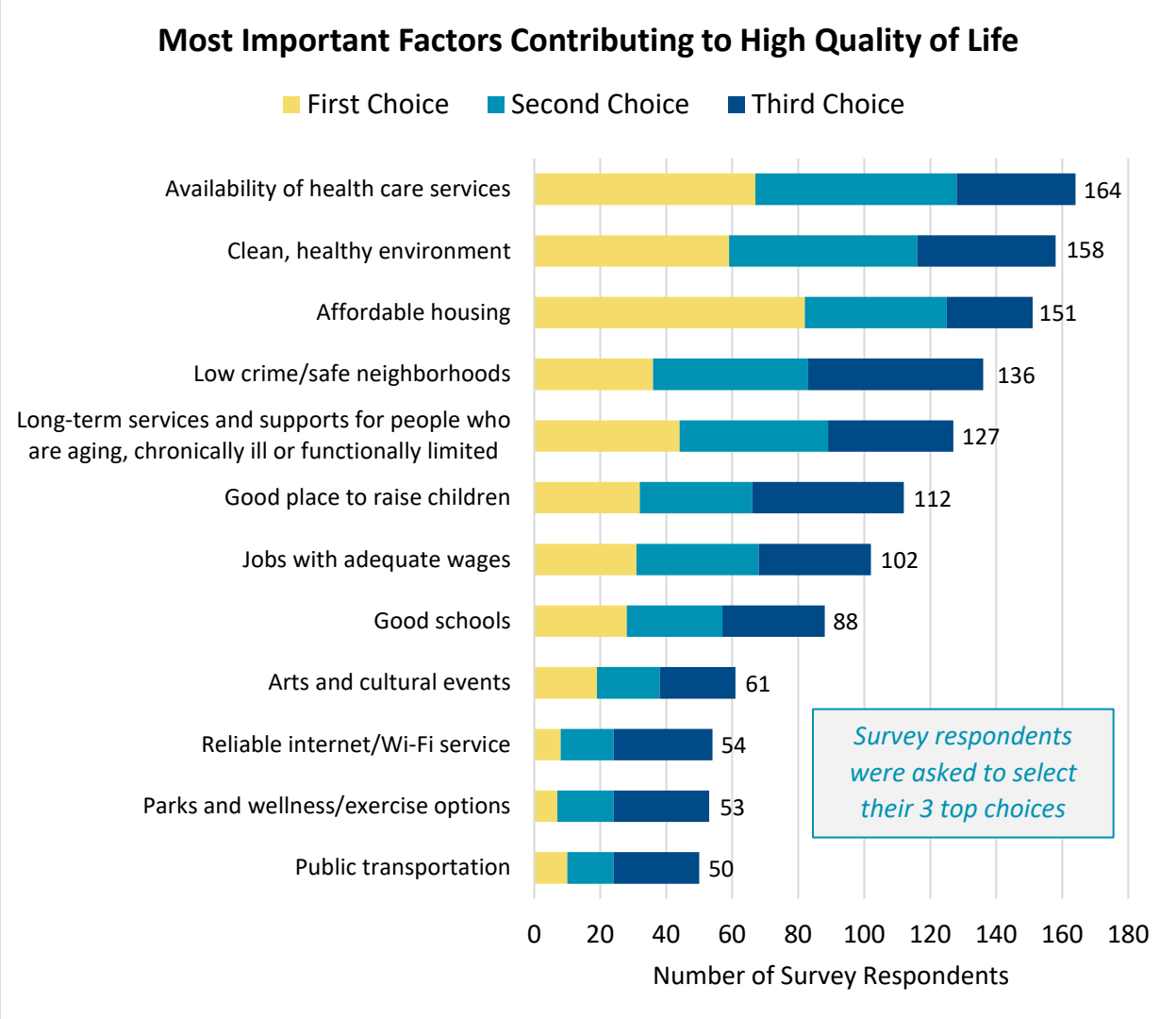


Figure 23 Survey Results: Factors Contributing to High Quality of Life

Survey Results: Health

Survey participants indicated that the community's top health needs are *health care assistance for seniors, affordable health services,* and *access to healthy food options*. Figure 24 illustrates survey results for the region, and Table 4 in Appendix A presents results by county. For all 10 counties, *affordable health services* placed among the top three choices.

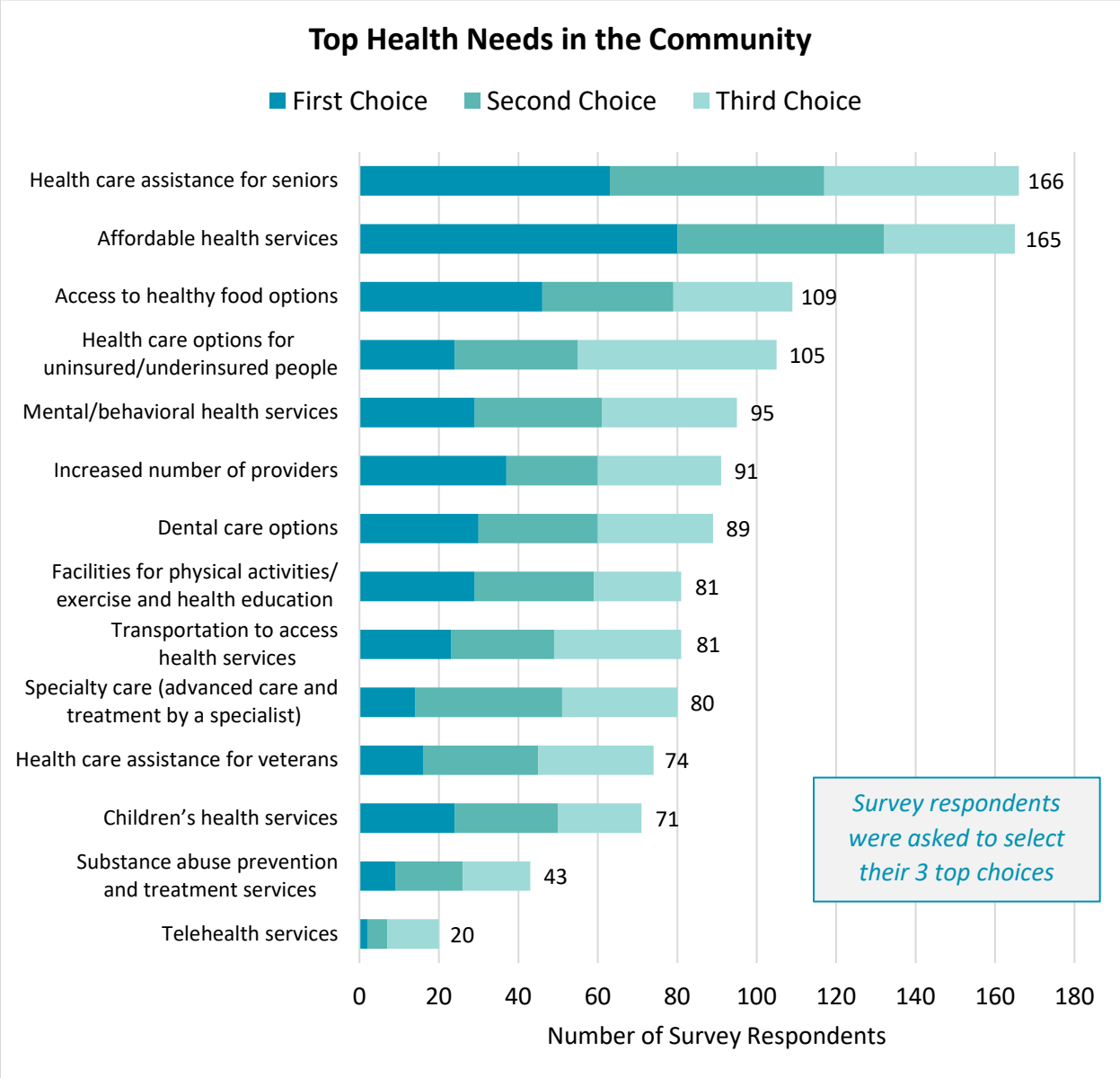


Figure 24 Survey Results: Top Health Needs

Narrowing the focus to mental/behavioral health, survey results indicate that the region does not have enough providers. Figure 25 shows that respondents' top responses for gaps in mental/behavioral health services in the community are *adequate number of providers, affordable mental/behavioral health services,* and *resources to find services*. Table 5 in Appendix A attests to widespread agreement throughout the Middle Peninsula and Northern Neck – in all 10 counties, *adequate number of providers* received the most first-choice votes (tied for first in King William).

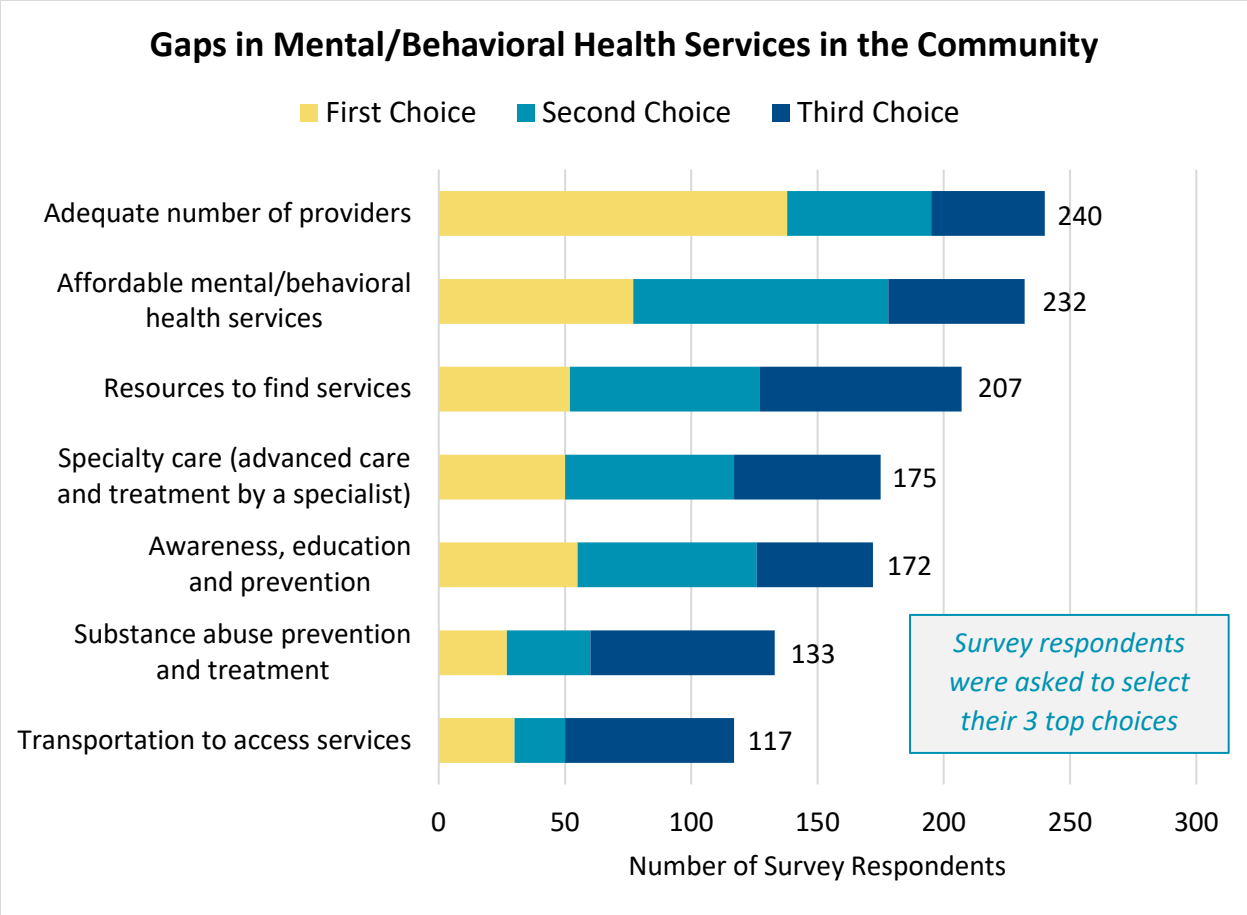


Figure 25 Survey Results: Gaps in Mental/Behavioral Health Services

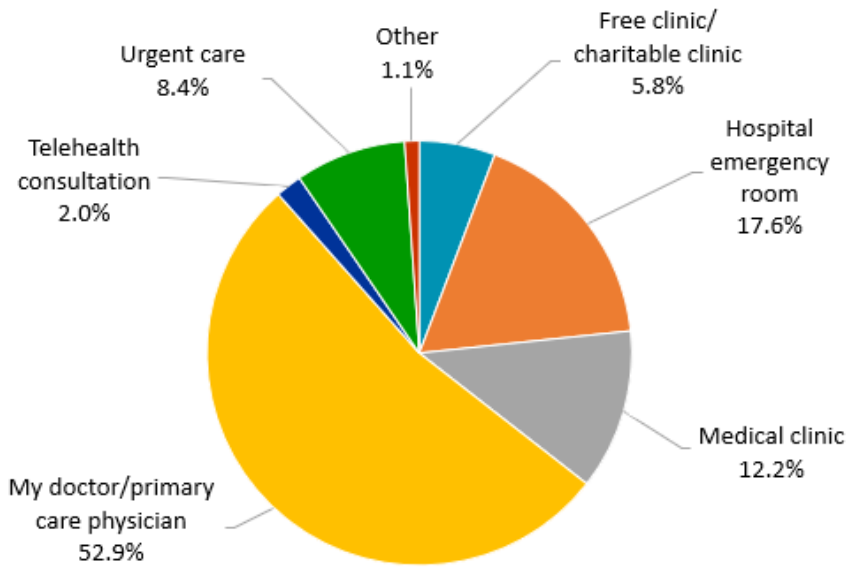


Figure 26 Where do you go most often when you are sick?

When asked about the one place they go most often when sick, more than half of survey participants selected *my doctor/primary care physician,* as shown by Figure 26. 17.6% of respondents chose *hospital emergency room* and 12.2% picked *medical clinic*. Choice of *hospital emergency room* (typically the most expensive option) varied considerably by county, ranging from 24.6% in Lancaster and 23.8% in Essex to 10% in Northumberland and 9.5% in Westmoreland.

Survey Results: Social Issues

Survey respondents indicate that *crime* is their social issue of greatest concern, followed by *poverty* and *drug or alcohol abuse* (see Figure 27). Though child abuse ranks 8th out of 12 when summing first, second, and third choice votes, child abuse ranks 2nd when counting only first-choice votes. Disaggregating by county, Table 6 in Appendix A confirms widespread anxiety about crime, which places among the top three concerns for every county except Westmoreland.

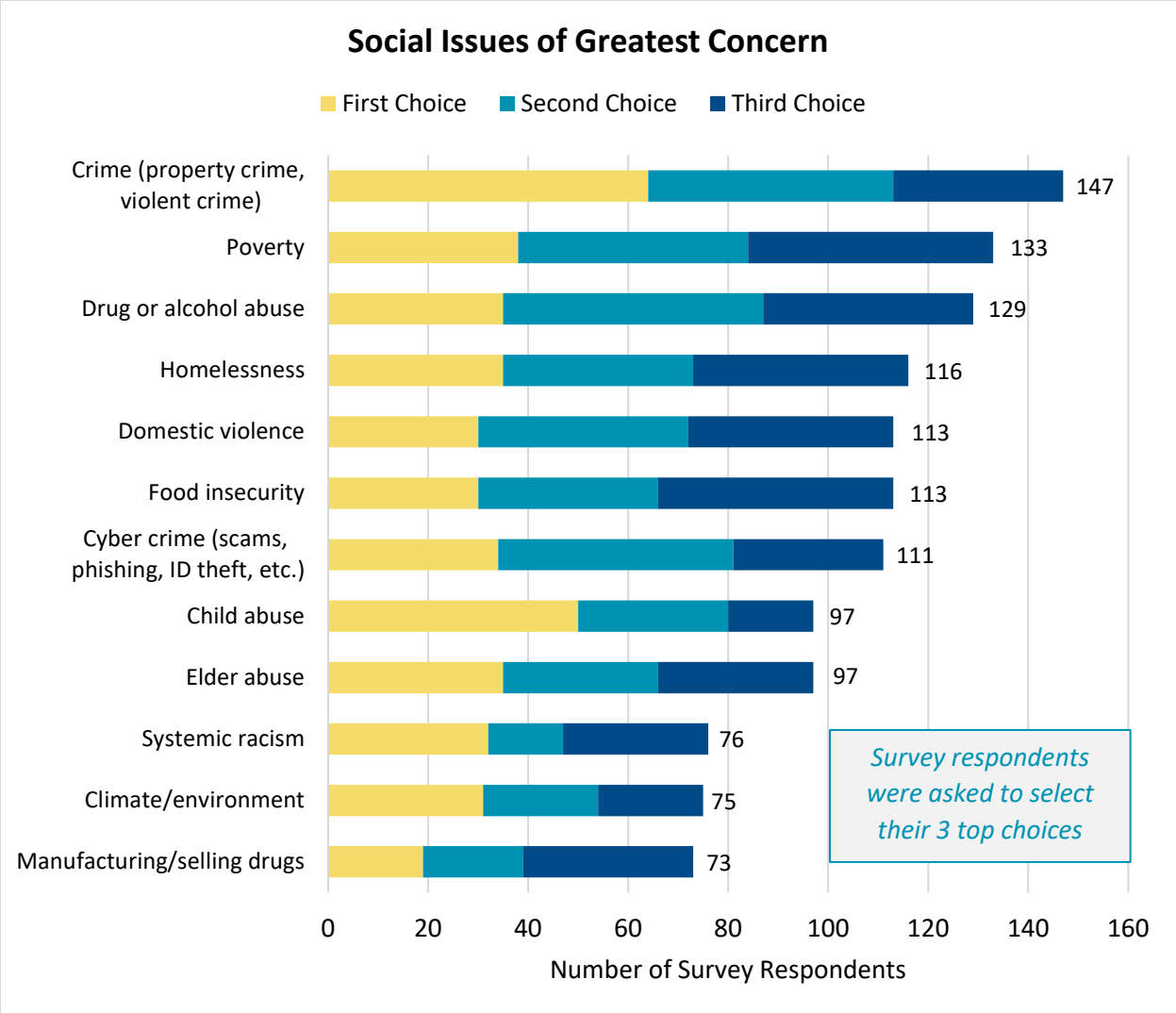


Figure 27 Survey Results: Social Issues of Concern

FBI statistics demonstrate that crime rates are relatively low in the Middle Peninsula and Northern Neck. In 2018, the national property crime rate was 2,199.5 per 100,000. Rates within the region ranged from a low of 298.7 in Richmond to a high of 1,309.3 in Middlesex, far below the Virginia average of 1,665.8. The national violent crime rate in 2018 was 380.6 per 100,000, while Virginia's rate was 200. Essex slightly exceeded the Virginia average, at 201.5; King William had the lowest rate in the region, 35.4.[30] Map 8 in Appendix B illustrates local crime rates.

[30] Blake Rumuly and Shonel Sen, "Crime and Police Data in Virginia," *Stat Chat,* Sept. 14, 2020, https://statchatva.org/2020/09/14/crime-and-police-data-in-virginia/#more-12038.

Survey participants view *affordable housing* as the leading social issue not being adequately addressed in the community. *Housing options for people/families facing homelessness* and *employment opportunities & job training* were also top contenders, though when considering only first-choice votes, *availability of mental/behavioral health services* and *affordable child care* moved into second and third place (see Figure 28).

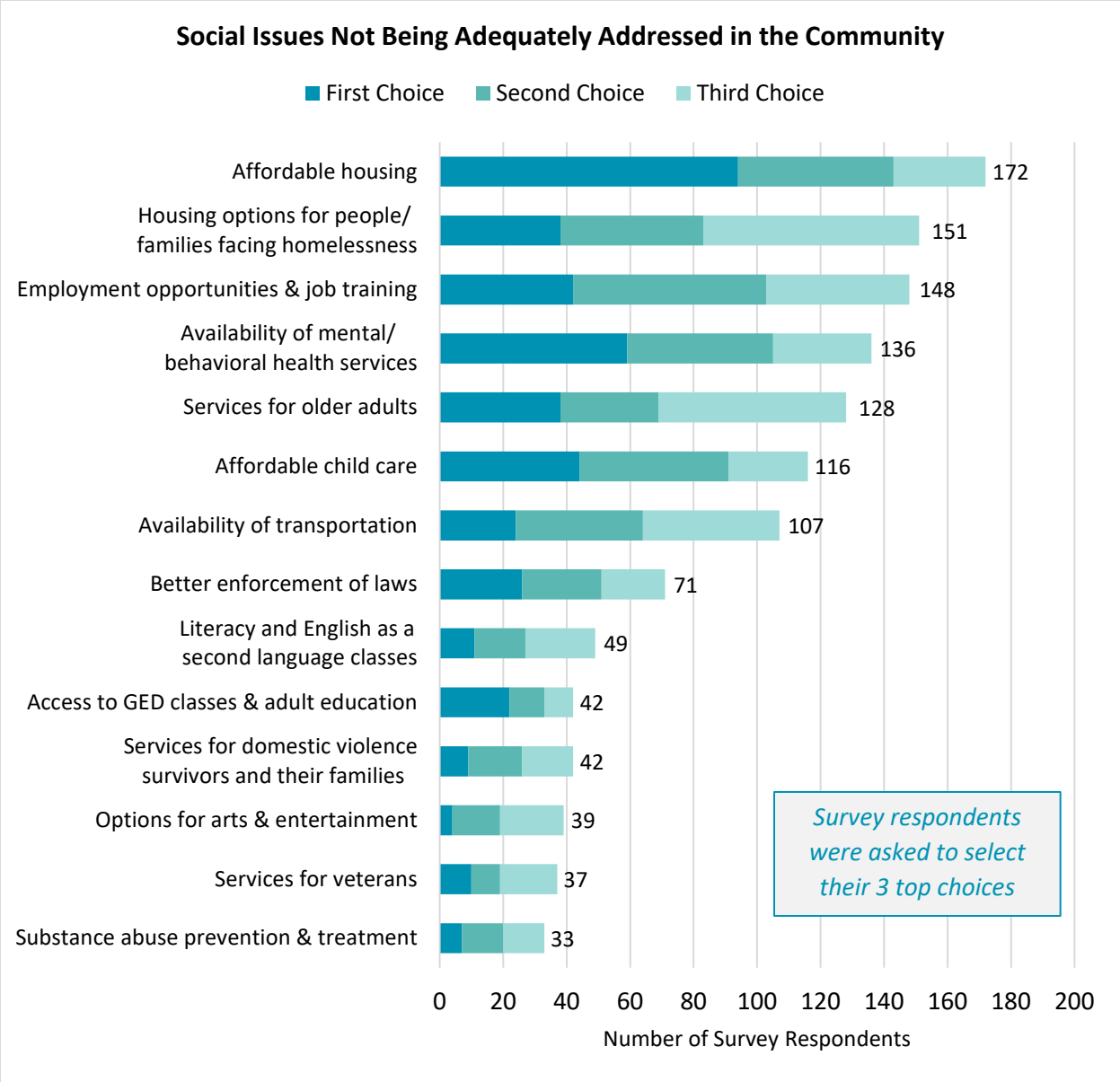


Figure 28 Survey Results: Social Issues Not Being Adequately Addressed

Table 7 in Appendix A shows that *affordable housing* received the most first-choice votes in eight of 10 counties; only King William residents did not cite affordable housing among their top three social issues not being adequately addressed in the community. This result accords with Figure 14, which indicates that King William owners and renters are among the least cost-burdened in the region, with relatively few residents spending more than 30% of household income on housing costs.

Newspapers are the most popular source from which survey respondents get information about their community and community events, followed by *internet, social media*, and *email* (see Figure 29).

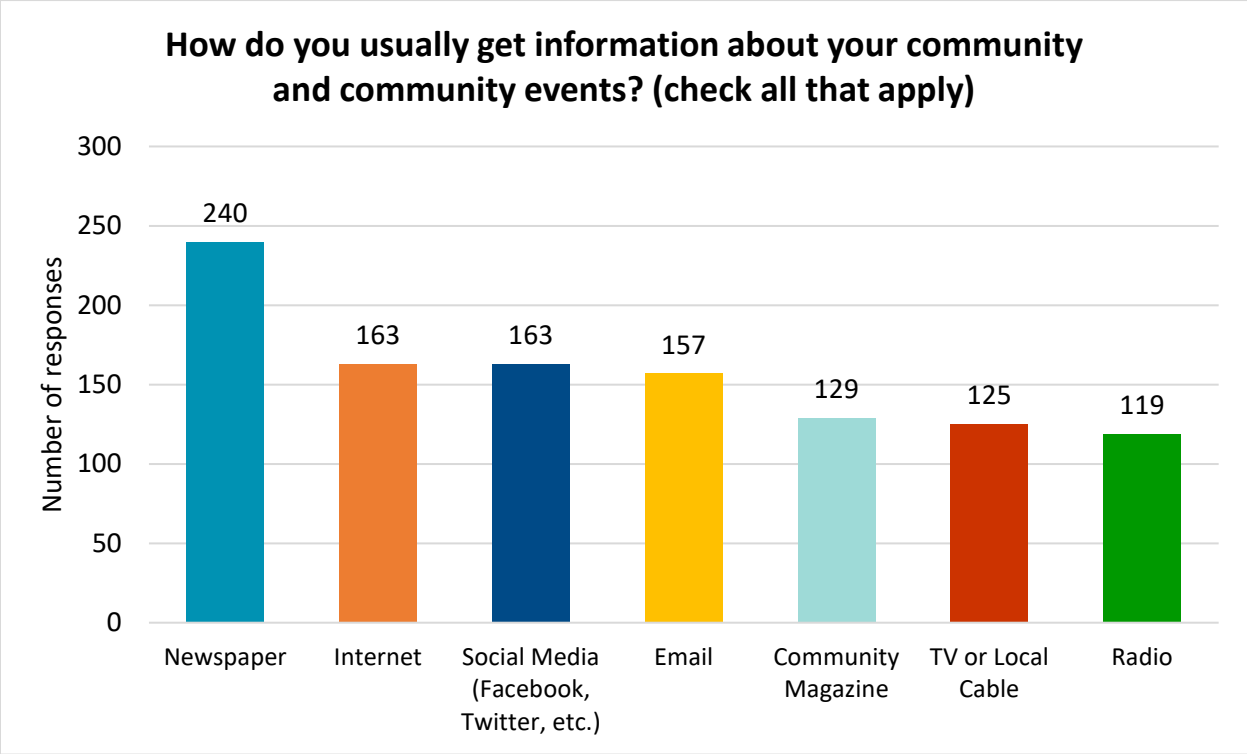


Figure 29 Survey Results: How Respondents Get Information

Preferred methods of news consumption may be correlated with age; for two of the three counties with the fewest people over age 65, digital methods topped newspapers – internet placed first in King William and email led in Richmond (see Figure 30). Social media outpaced newspapers in Westmoreland, which has slightly more seniors than the regional average.

In response to survey results for how constituents get information, Bay Aging launched an email newsletter, *Bay Currents*, in February 2022. In an effort to maximize outreach to all community members, Bay Aging continues to expand its social media presence and submits press releases and paid advertisements to local newspapers regularly.

County	Top Information Source	Percent Over Age 65 (2019)
Northumberland	Newspaper	37.5%
Lancaster	Newspaper	36.7%
Middlesex	Newspaper	32.0%
Mathews	Newspaper	31.5%
Westmoreland	Social media	25.6%
Essex	Newspaper	23.7%
King & Queen	Newspaper	23.6%
Richmond	Email	21.1%
Gloucester	Newspaper	19.6%
King William	Internet	16.3%
10-County Service Area	Newspaper	25.0%

Figure 30 Top Information Source, by County

Survey Results: Children & Youth

Survey participants rated how well the community meets the needs of children and youth for a dozen categories, using a Likert scale. As Figure 31 illustrates, the categories with the largest proportion of Excellent and Good responses are *quality education*, *access to health care services*, and *recreational and physical exercise opportunities*. Categories with the fewest Excellent and Good responses include *access to mental/behavioral health services*, *needs of children with disabilities*, *parent support and training*, and *violence and bullying prevention. Access to mental/behavioral health services* received the greatest number of Poor ratings.

African American survey respondents are less satisfied than White participants with how well the community meets the needs of children and youth. For every category listed in Figure 31, African American participants gave fewer Excellent and more Poor ratings than Whites. *Volunteer opportunities for teens* has the most Poor ratings by African Americans at 32%; in comparison, 13% of White respondents rate *Volunteer opportunities for teens* as Poor.

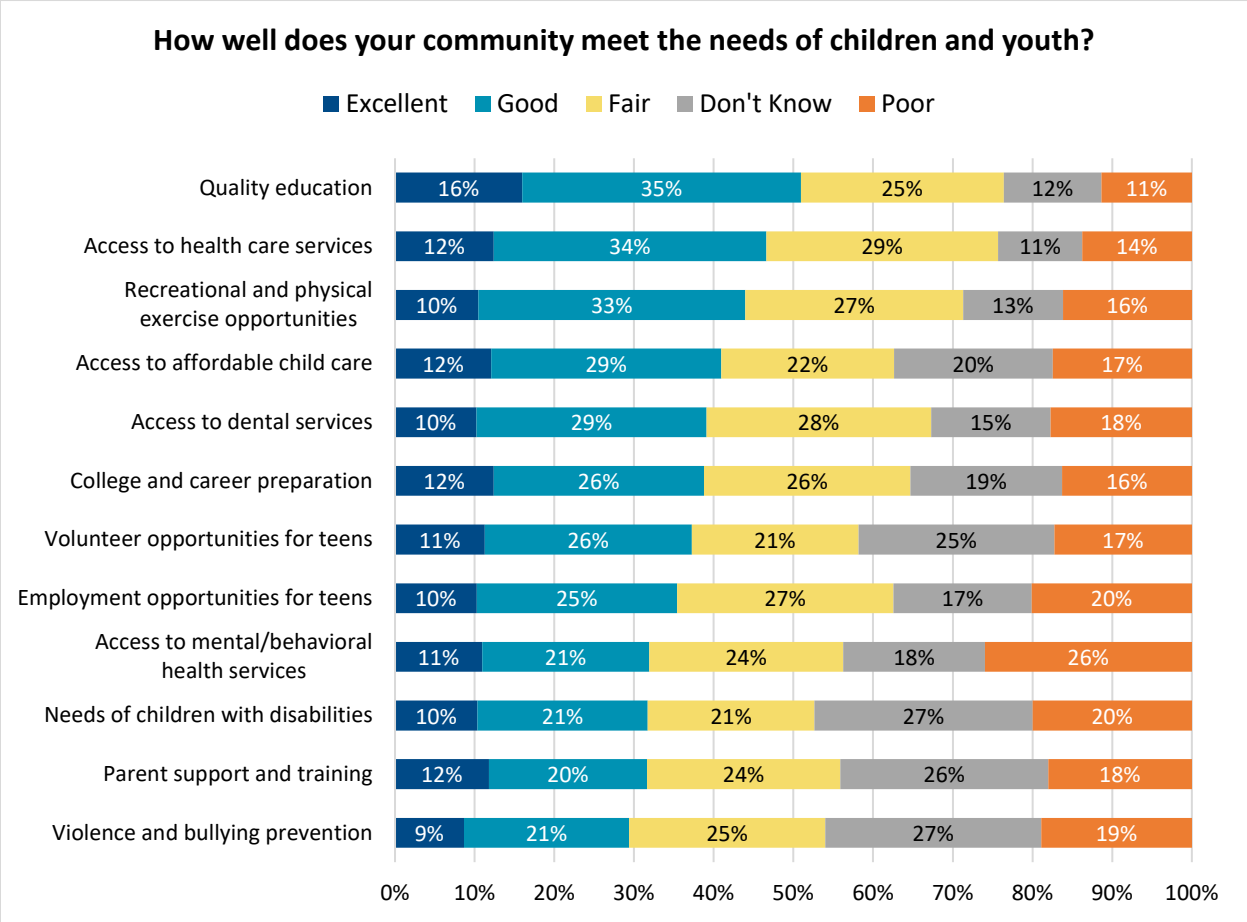


Figure 31 Survey Results: Meeting the Needs of Children and Youth

When asked about unmet needs, survey respondents selected *access to computers and technology, including internet* as the top unmet need for children and youth in the community. *Access to higher education and vocational training* and *appropriate services for youth with physical and developmental disabilities* placed second and third (see Figure 32). It is likely that the COVID-19 pandemic influenced these results – the survey took place in late 2021, after families had

experienced more than a year of school closures and remote learning. A direct comparison to the 2018 survey is not possible since the same question was not asked, but 52% of survey participants rated access to computers and technology (for all ages) as Excellent or Good in 2018.

Table 8 in Appendix A shows results by county; survey participants in eight of 10 counties selected *access to computers and technology, including internet* as the top unmet need. Eight of 10 counties also chose *access to higher education and vocational training* as one of their top three unmet needs. Only Gloucester placed neither of these options in the top three; their top unmet need was *after school programs*.

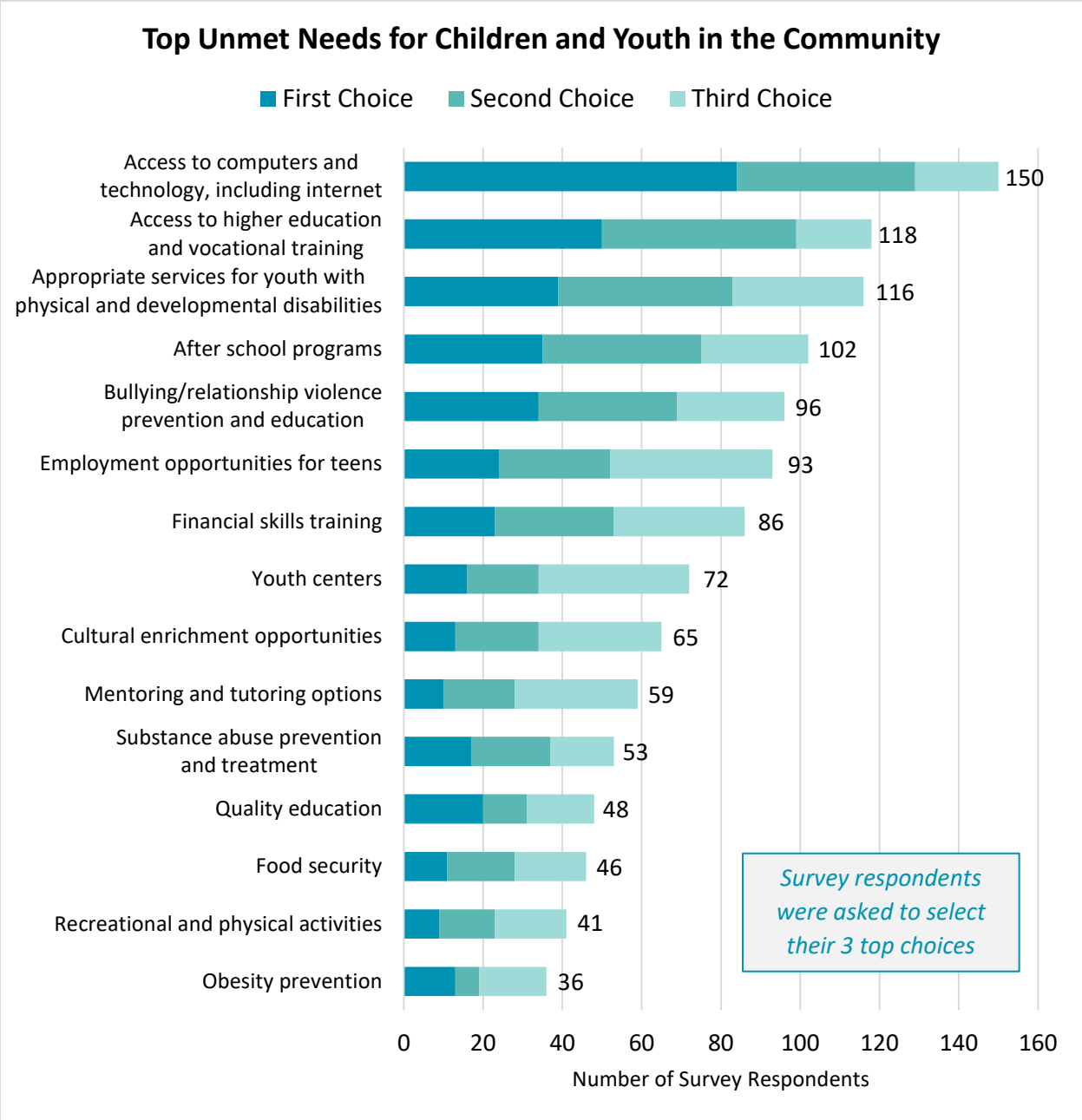


Figure 32 Survey Results: Unmet Needs for Children and Youth

Survey Results: Aging & Caregiving

By a large margin, survey participants *selected affordable home health care options including personal care, chore services, pharmacy pick-ups, chronic condition care management* as the largest gap in ensuring older adults can age in place. As illustrated by Figure 33, *housing repairs/modifications for seniors to live in safe housing conditions* and *assisted living options* were next. *Adult day care* also received many first-choice votes. In contrast to previous questions, *mental/behavioral health services including substance abuse counseling* placed at the bottom.

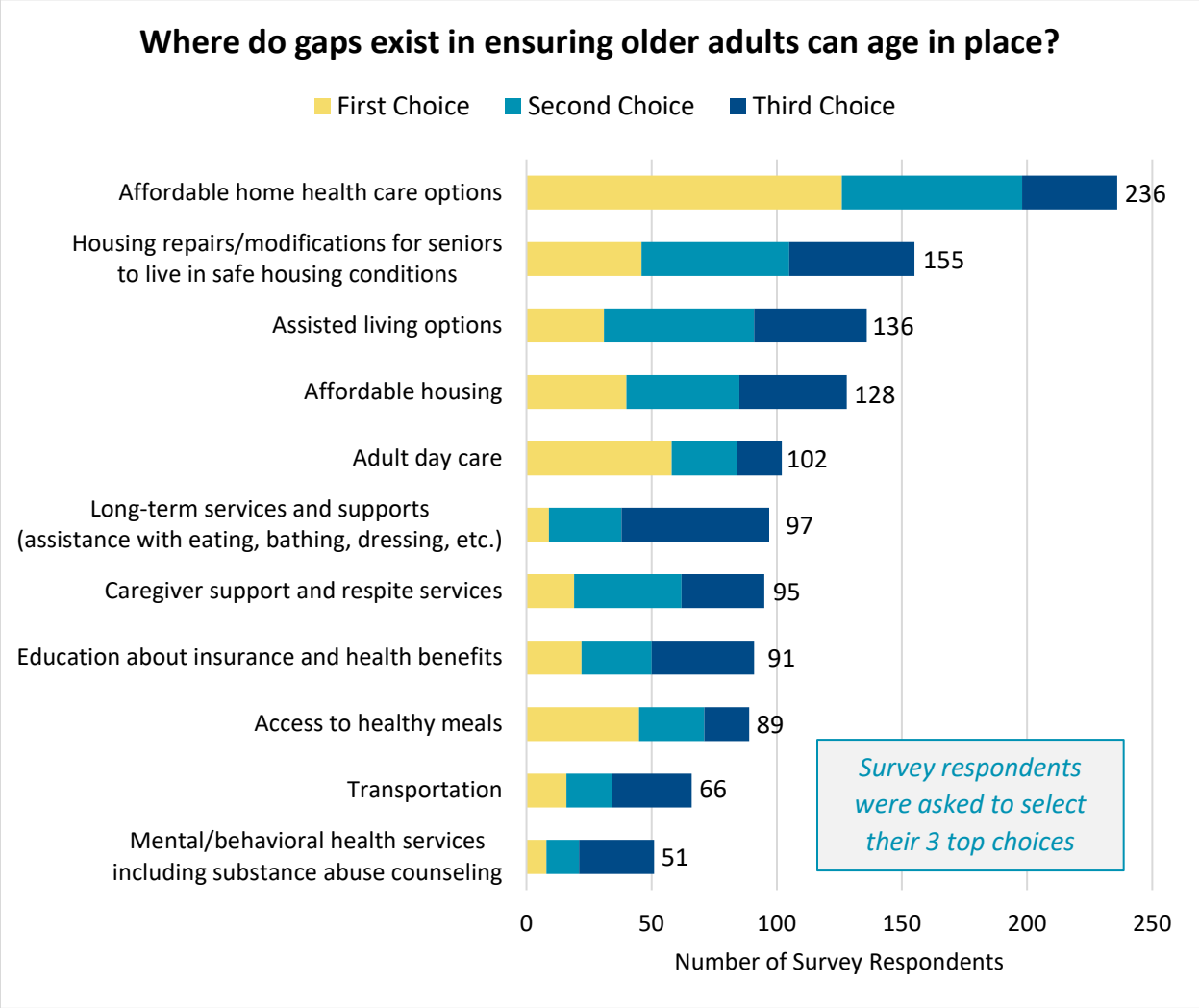


Figure 33 Survey Results: Gaps in Ensuring Older Adults Can Age in Place

Looking at the results by county, Table 9 in Appendix A shows that survey respondents in eight of 10 counties chose *affordable home health care options* as the primary gap in ensuring older adults can age in place. The prevalence of *adult day care*, which appears in the top three for eight of 10 counties, surprised Bay Aging staff because Bay Aging recently discontinued operating an adult day care facility in Essex due to lack of clients.

Across the Middle Peninsula and Northern Neck, more than 80% of survey participants hope to remain in their current residence as they get older (see Figure 34). The percentage of people hoping to age in place did not vary a great deal within the region, ranging from 73.9% in Middlesex to 86.4% in Mathews.

Participants who stated that they hope to remain in their current residence as they get older were asked what services would help them do so; as shown in Figure 35, the most popular responses were *assistance with household chores and errands*, *home repairs/modifications to increase accessibility and safety*, *and transportation to places like stores, pharmacies, and doctors' offices*.

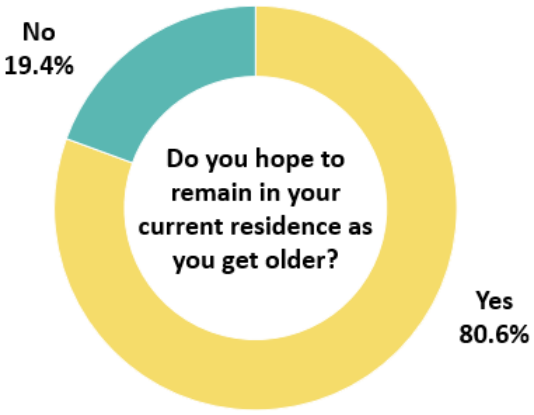


Figure 34 Aging in Place

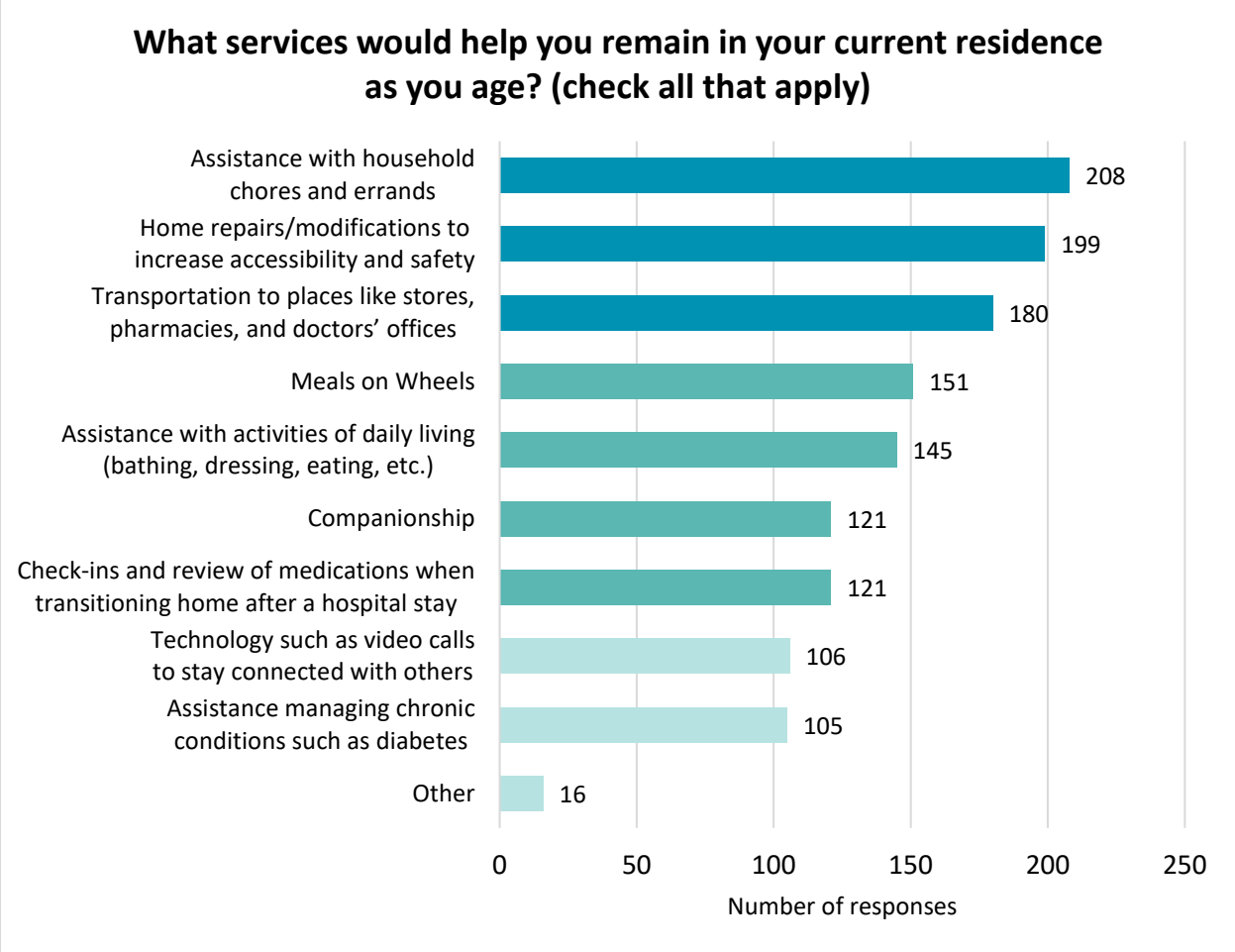


Figure 35 Survey Results: Services that Enable Aging in Place

An unexpectedly large number of survey respondents self-identify as caregivers for an older adult or person with disabilities or chronic conditions. As shown in Figure 36, 33% of participants indicated that they are caregivers. Percentages vary from 26.3% in Northumberland to 48.8% in Essex. Reported rates are higher for minority survey respondents (41%) than Whites (28%). In comparison, a 2020 study by AARP found that 21% of American adults are unpaid caregivers.[31]

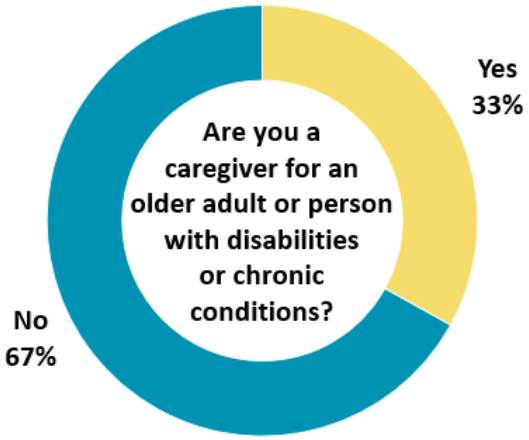


Figure 36 Caregiver Status

Survey participants who self-identified as caregivers were asked a follow-up question to ascertain what services they need. As shown in Figure 37, *adult day care* and *caregiver support groups* top the list of services that caregivers need and are unable to access. *Caregiver counseling services and in-home personal care* tied for third place. Bay Aging launched a caregiver counseling service in partnership with the Benjamin Rose Institute on Aging shortly before the survey took place; in response to the survey results, Bay Aging has created online and in-person caregiver support groups. Staff continue to seek to overcome labor shortages to enable expansion of in-home personal care services.

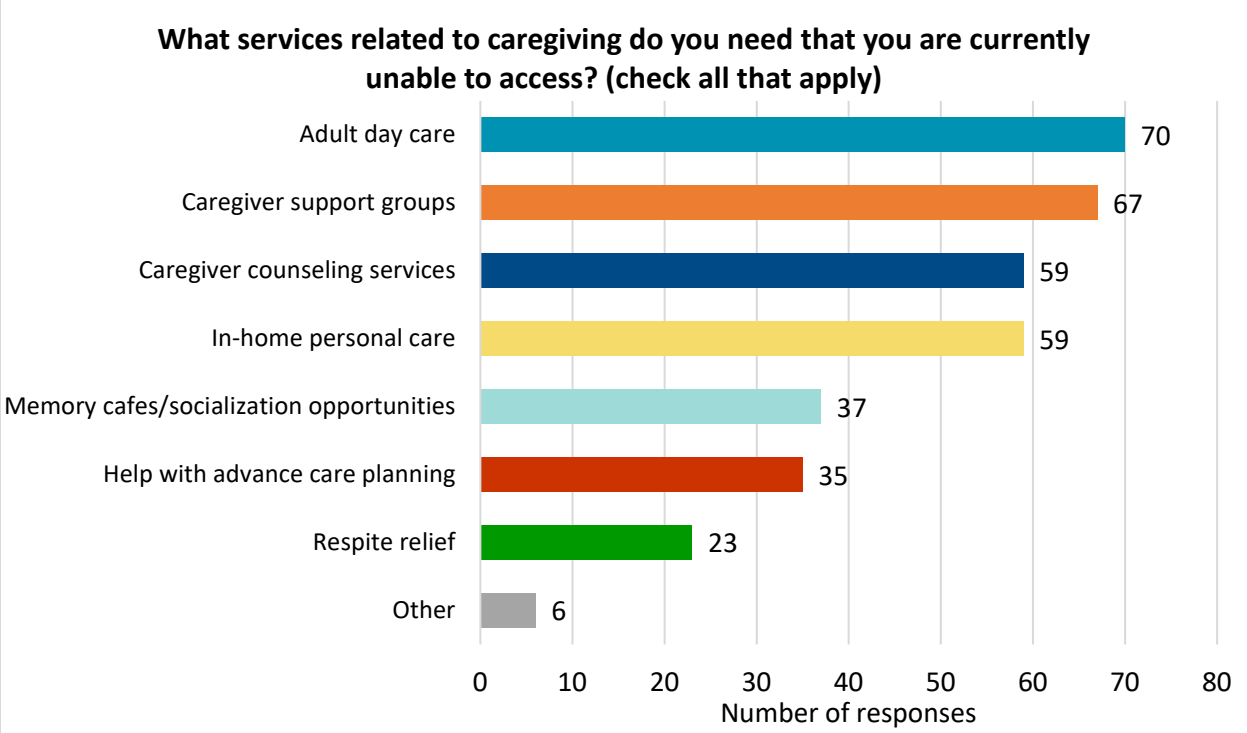


Figure 37 Survey Results: Services that Caregivers Need and Cannot Access

[31] Deborah Schoch, "1 in 5 Americans Now Provide Unpaid Family Care," AARP, June 18, 2020, https://www.aarp.org/caregiving/basics/info-2020/unpaid-family-caregivers-report.html.

Survey Results: Housing, Transportation & Economic Security

Survey respondents view *affordable housing for older adults* as their community's greatest need with regard to housing (see Figure 38). *Assistance with property repair/maintenance* and *housing assistance for low-income families* placed second and third. Table 10 in Appendix A demonstrates the consistency of survey responses for housing needs; nine of 10 counties selected *affordable housing for older adults* and *assistance with property repair/ maintenance* as their top two options. Northumberland bucks the trend with its top choice of *affordable workforce housing.*

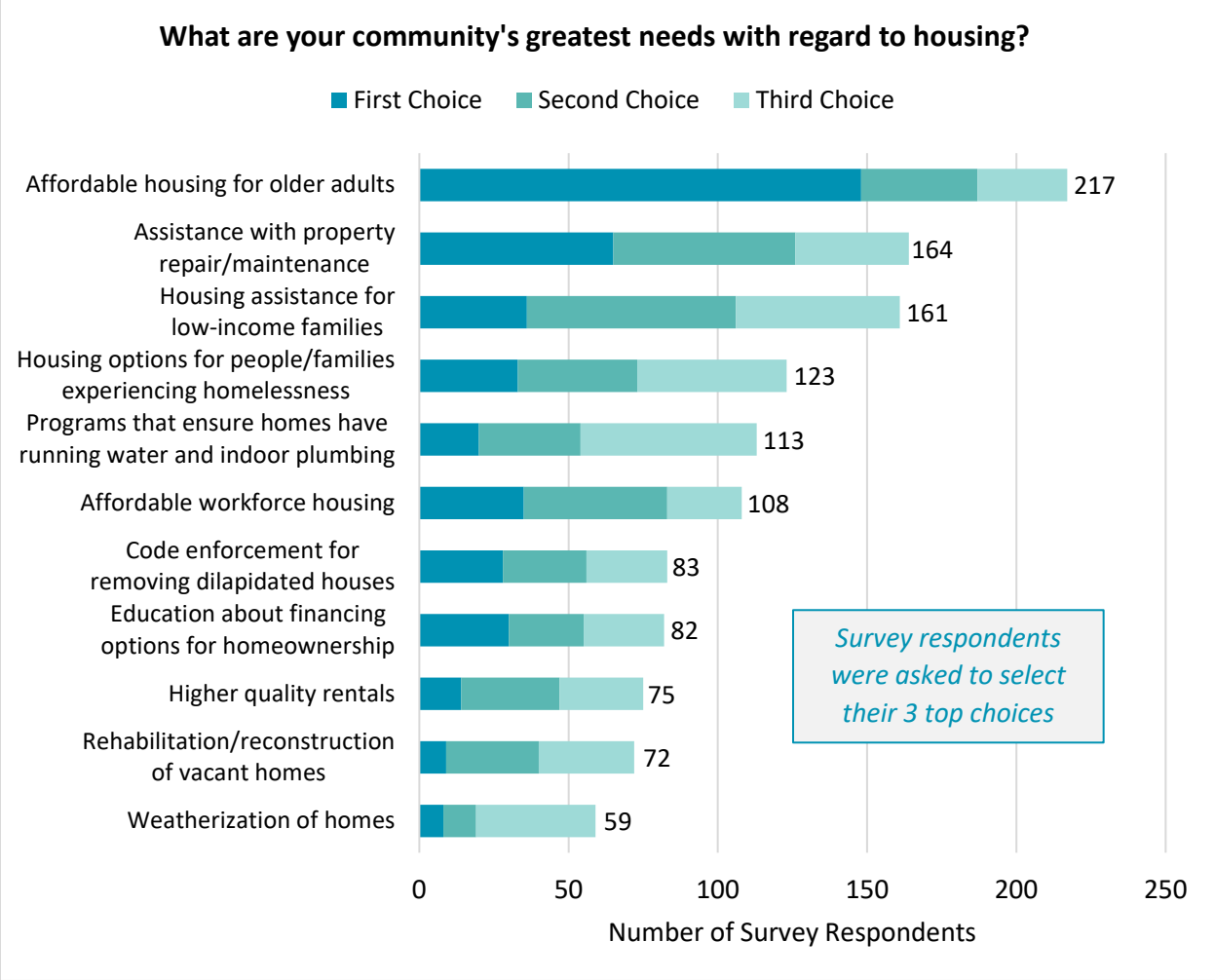


Figure 38 Survey Results: Housing Needs

As discussed in the Housing section of the Demographic Profile, the Middle Peninsula and Northern Neck have many vacant housing units, some in poor condition. Causes of vacancy vary considerably by county; approximately three-quarters of the vacant units in Mathews and Middlesex are vacation homes. Disregarding seasonal/recreational vacancies, Richmond, Northumberland, and King & Queen's vacancy rates remain well above the state average.[32] Nonetheless, *code enforcement for removing dilapidated houses* and *rehabilitation/reconstruction of vacant homes* placed in the bottom half of housing needs.

[32] U.S. Census Bureau, American Community Survey, Table B25002 Occupancy Status, and Table B25004 Vacancy Status, 2020: ACS 5-Year Estimates, https://data.census.gov/cedsci/, retrieved Mar. 29, 2022.

Both the 2018 and 2021 surveys asked participants if "issues with transportation regularly prevent you from doing what you need or want to do." In 2018, 9% replied *Yes*. More than three times as many, 31.1%, responded *Yes* in 2021 (Figure 39). The follow-up question, "If you answered YES, please explain the transportation barriers you are experiencing," reveals that in 2018, participants' comments primarily referred to the need to travel long distances to access services. In 2021, a few respondents mentioned distance but many cited dissatisfaction with traffic jams and road conditions. Some referenced difficulty in scheduling rides with transportation services; several expressed a desire to have service available in the evenings and on weekends. Some stated they did not own a car or were unable to drive. Comments are listed in full in Appendix C.

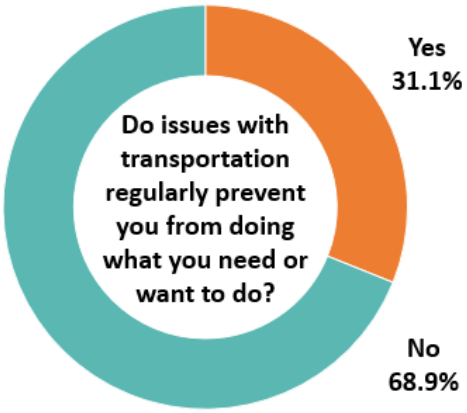


Figure 39 Transportation Challenges

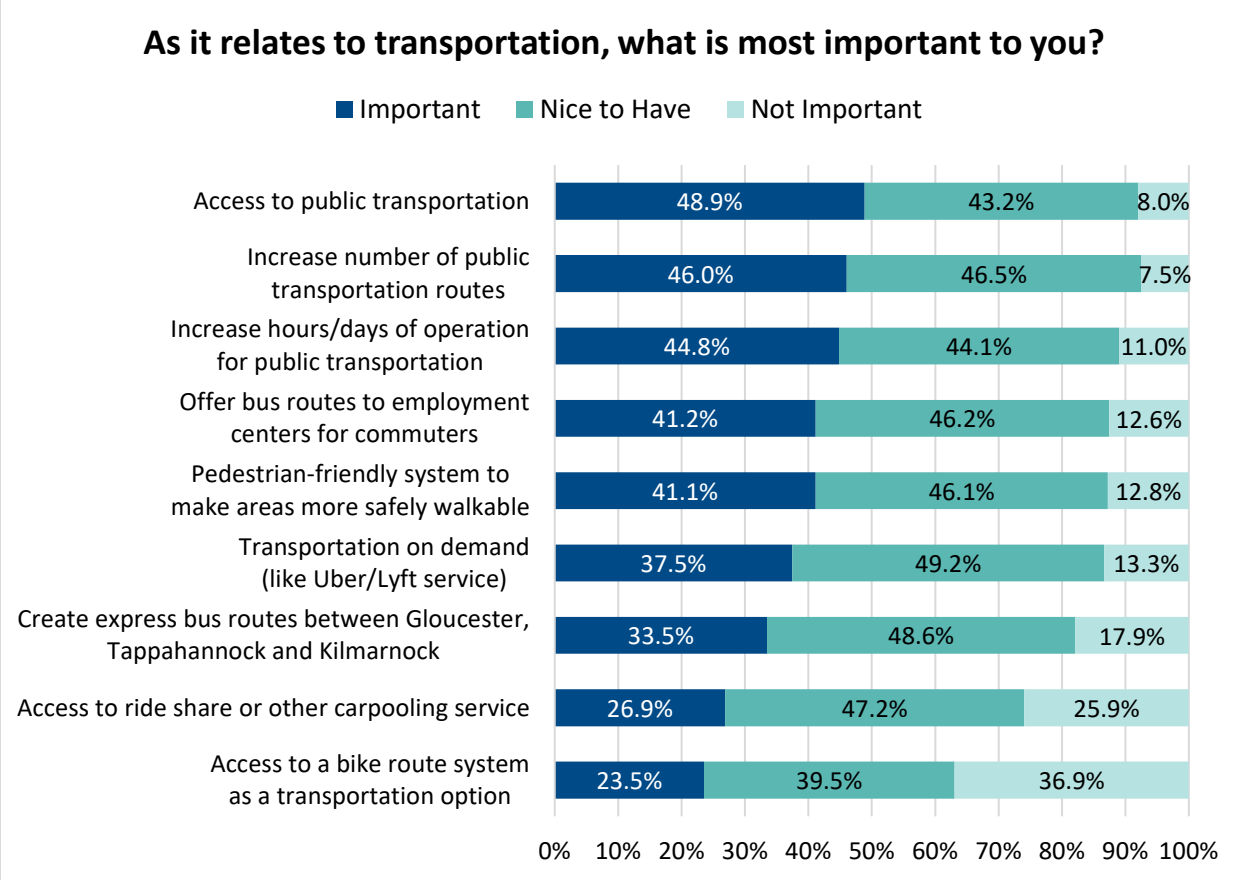


Figure 40 Survey Results: Transportation Preferences

As shown by Figure 40, nearly half of survey respondents consider *access to public transportation* important, and only 8% view it as not important. 46% think it is important to *increase the number of public transportation routes*, and 44.8% feel that *increasing hours/days of operation for public transportation* is important. *Access to ride share or other carpooling service* and *access to a bike*

route system as a transportation option were less popular, with 25.9% and 36.9% of participants, respectively, considering them not important.

Survey respondents were not asked to state their income, this being a question that can make participants uncomfortable and lead to failure to complete a survey. Instead, the survey asked, "In a typical month, how difficult is it for you to cover your expenses and pay all your bills?" As shown by Figure 41, 27% of respondents chose *Easy*, 57% selected *Moderate*, and 15% said *Difficult*. For comparison, the poverty rate in Bay Aging's service area is 11.6%.

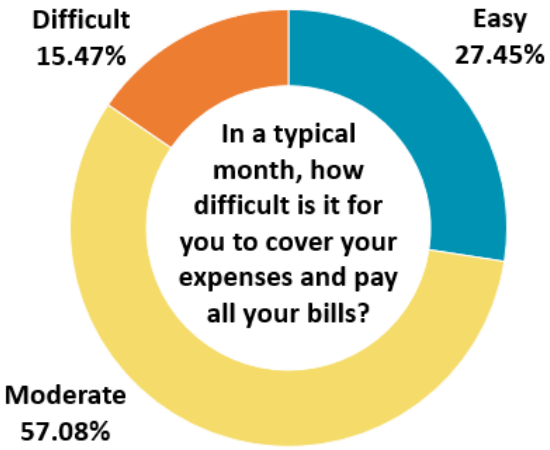


Figure 41 Ease of Paying Bills

Disaggregating survey results by county, more than 21% of participants from Gloucester, Essex, and Richmond indicated that it is difficult for them to pay their bills. Essex and Richmond have the lowest median incomes and highest poverty rates in the Middle Peninsula and Northern Neck (see Figure 8), so it is not surprising that a greater proportion of their residents would have difficulty covering their expenses. Gloucester, in contrast, has the highest median income and second-lowest poverty rate in the region, so it is puzzling that Gloucester has the highest percentage, 25.4%, of participants reporting difficulty paying their bills. One explanation may be that as compared to most counties in the region, fewer homeowners in Gloucester have paid off their mortgage (Figure 15). Another

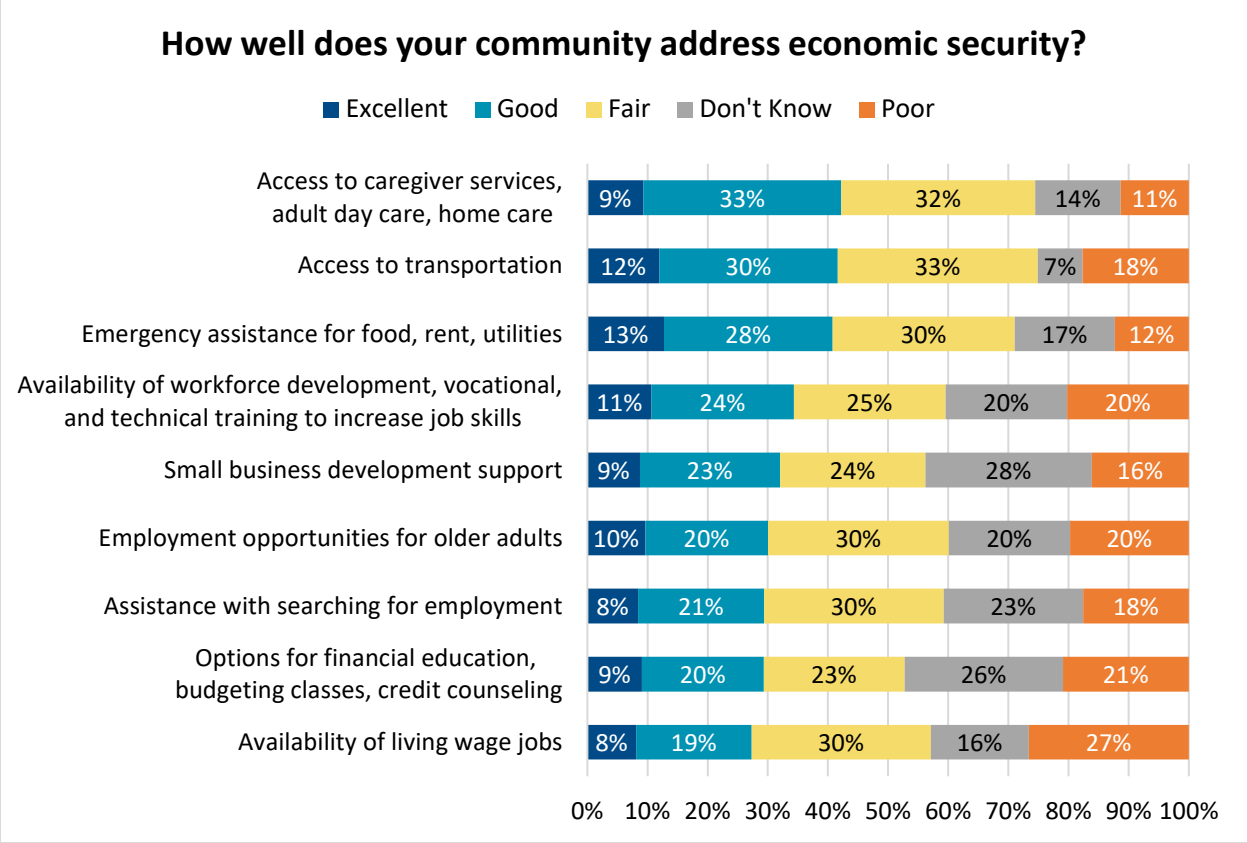


Figure 42 Economic Security

possibility is that while county income and poverty statistics were collected before the pandemic, survey participants may have responded based on temporary COVID-related financial situations.

Survey results for the question "In a typical month, how difficult is it for you to cover your expenses and pay all your bills?" were filtered by age and race to further explore community members' economic stability. While 33% of adults age 65 and up report that covering expenses is easy, compared to 24% of adults age 18-64, nearly the same proportion of both groups find it difficult to cover expenses: 15% of adults age 65 and older, and 16% of adults age 18-64. 24% of American Indian/Alaska Native participants indicate that it is difficult for them to pay their bills, compared to 20% of African Americans and 14% of Whites. Too few survey participants from other races responded to this question to report their results.

Survey respondents used a Likert scale to rate nine aspects of how well their community addresses economic security. As illustrated by Figure 42, more than 40% of participants described *access to caregiver services, adult day care & home care*, *access to transportation*, and *emergency assistance for food, rent & utilities* as Excellent or Good. Fewer than 30% rated *assistance with searching for employment*, *options for financial education, budgeting classes & credit counseling*, and *availability of living wage jobs* as Excellent or Good.

These ratings seem rather low compared to the satisfaction rates expressed by survey participants in Figure 21, but show considerable improvement compared to the 2018 survey. Figure 43 shows the percentage of respondents who rated economic security options as Excellent or Good in 2018 and 2021. For all categories except *small business development support*, positive ratings increased from 2018 to 2021. The decline in positive ratings for *small business development support* is small; however, African American survey participants in

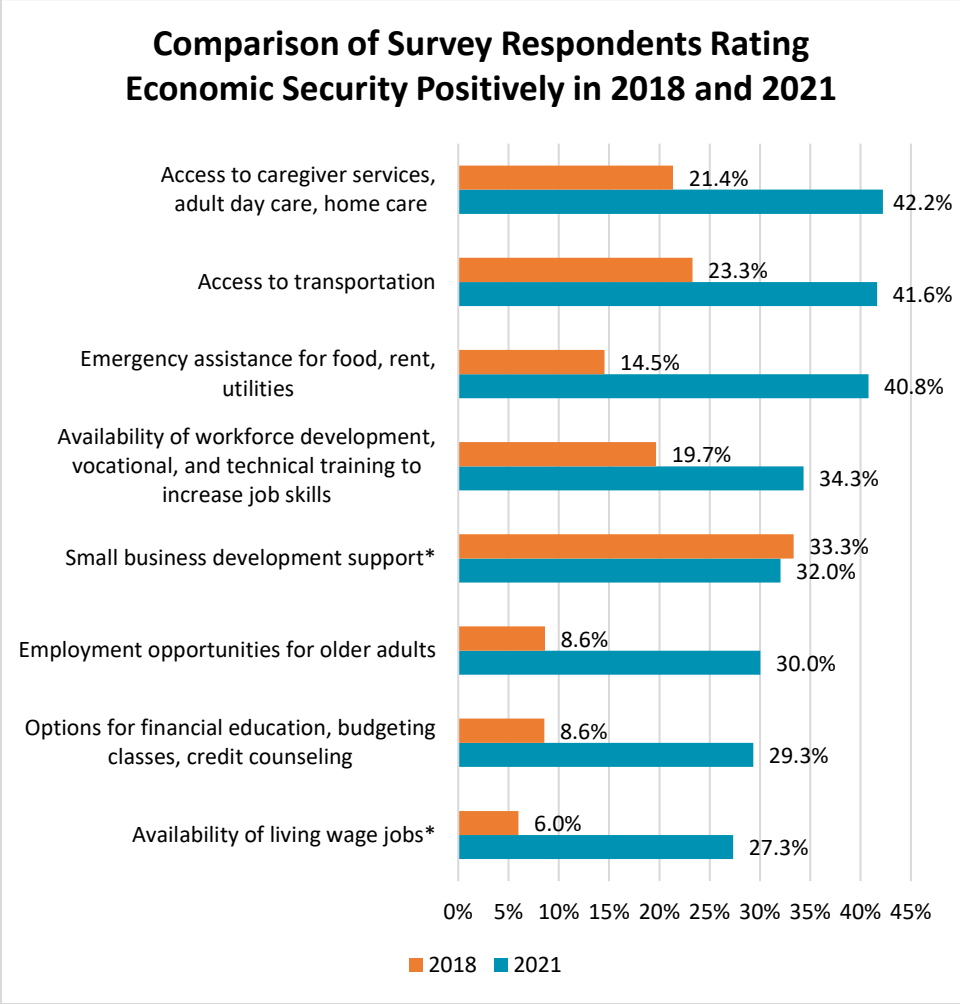


Figure 43 Changing Views on Economic Security

2021 were less satisfied than others with *small business development support*, with 19.8% giving positive ratings compared to 32% overall.

Despite improvement since 2018, *availability of living wage jobs* was rated as Poor by over a quarter of 2021 survey respondents (see Figure 42). Disaggregating by location, in most counties 22 – 26% of participants rated *availability of living wage jobs* as Poor. Rates were higher for three counties: Northumberland, 28%; Westmoreland, 33%; and Lancaster, 40%. As discussed in the Demographic Profile, Table 1 in Appendix A shows that these three counties have the highest percentages of people working full-time whose incomes fall below the poverty level.

*The two categories in Figure 43 marked with asterisks had minor changes in wording; the 2018 survey described these categories as *small business development is encouraged* and *availability of well-paying jobs*. *Assistance with searching for employment* was not included in the 2018 survey.

Focus Group

Methodology

Due to the COVID-19 pandemic, Bay Aging was unable to conduct in-person focus groups as part of the community needs assessment process. Instead, staff conducted a presentation and focus group discussion via Zoom during the January 13, 2022 joint meeting of four Bay Aging advisory councils: Bay Transit Advisory Board, No Wrong Door Advisory Council, Retired and Senior Volunteer Program Advisory Council, and Senior Employment/Title V Advisory Council. Members of the advisory councils are community leaders involved primarily in health, education, and social services.

Bay Aging staff presented an overview of the purpose of the community needs assessment, as well as highlights of the survey conducted Nov. 8 – Dec. 15. Staff then sought input from attendees via three Zoom polls, and guided discussion of the results. The Zoom polls borrowed questions from the public survey previously distributed throughout Bay Aging's service area, but due to limitations of Zoom, only 10 possible responses per question could be listed. For each question, staff retained the 10 most popular choices from public survey and eliminated the least popular options.

Feedback

This section seeks to capture both the Zoom poll results and the focus group's informal, spontaneous discussion following the reveal of each Zoom poll's results.

When the focus group was asked what they believe to be the top health need in the community (see Figure 44), healthcare options for uninsured/underinsured people was the most popular choice, with 38% of the vote. Although guidelines have been expanded for more people to qualify for Medicaid, there are still many who fall through the cracks because of income and/or age guidelines. Others may not be able to afford the premium for Marketplace coverage and therefore have inadequate insurance coverage.

Figure 44 Focus Group - First Zoom Poll

Transportation to access health services was picked by 15% of the respondents as the top health need. Bay Aging's service area is rural, so health services are limited and specialists are few and far between; accessing health care may require traveling out of town.

Health care assistance for seniors tied for second place with 15% of the vote. Although older adults have options such as Medicare and other government programs, many have difficulty paying their medical bills.

Affordable health services, dental care options, an increased number of providers, and mental/behavioral health services each received 8% of the participants' votes. Recently Medicaid expanded its services to include dental coverage for

adults ages 21–64 in Virginia. This was a wonderful idea, but it came with a downside - some dental providers are not eager to participate with state Medicaid programs due to low reimbursement rates, slow claims processing, and delayed payments, and have chosen to not accept Medicaid patients.

Next, the focus group was asked to name the social issue of most concern in their community (Figure 45). Homelessness was the top concern with 36% of the vote, followed by poverty at 29%. Systemic racism and drug/alcohol abuse were next, with 14% each. Climate/environment was selected by 7% of respondents. In stark contrast to the public survey, for which crime was the leading response, no one in the focus group selected crime. Members of the focus group concurred that crime rates in the region are quite low, and indicated that sometimes perceptions differ from reality.

Last, the group was asked to choose which social issue is not being adequately addressed in the community (Figure 46). Responses were very focused, with 57% choosing housing options for people/families facing homelessness and 36% selecting affordable housing. 7% voted for mental/behavioral health services. These results reinforced the importance of homelessness and mental/behavioral health services, which also received votes in prior questions.

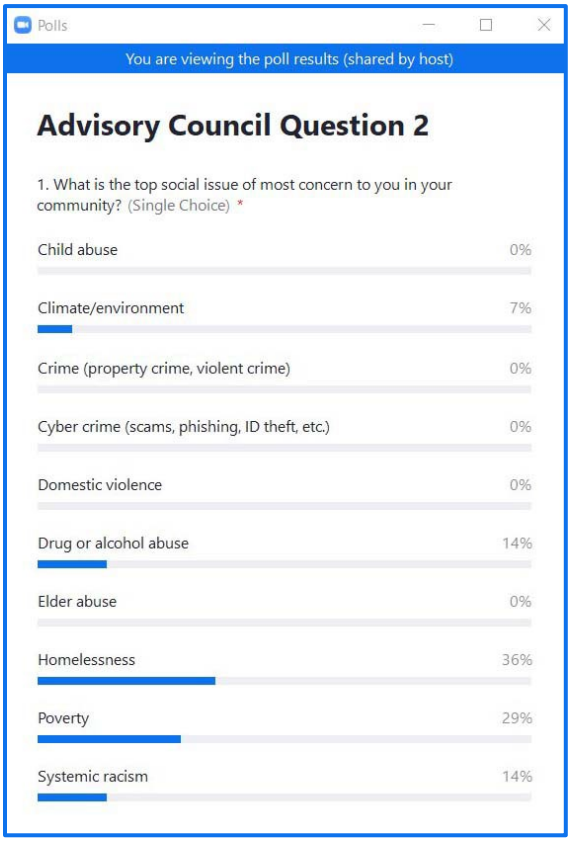


Figure 45 Focus Group - Second Zoom Poll

Figure 46 Focus Group - Third Zoom Poll

Root Causes of Poverty

The poverty rate in the Middle Peninsula and Northern Neck in 2019 was 11.6%, a full percentage point higher than Virginia's poverty rate of 10.6% but lower than the national poverty rate of 13.4%. Counties in the region with the highest poverty rates were Richmond (17.3%), Essex (16.8%), Westmoreland (14.9%), and Northumberland (14.6%). As shown in Figure 47, these four counties are clustered together in the northern part of Bay Aging's service area. Three of these four counties (Essex, Richmond, and Westmoreland) have the highest minority populations in Bay Aging's service area (see Figure 8).

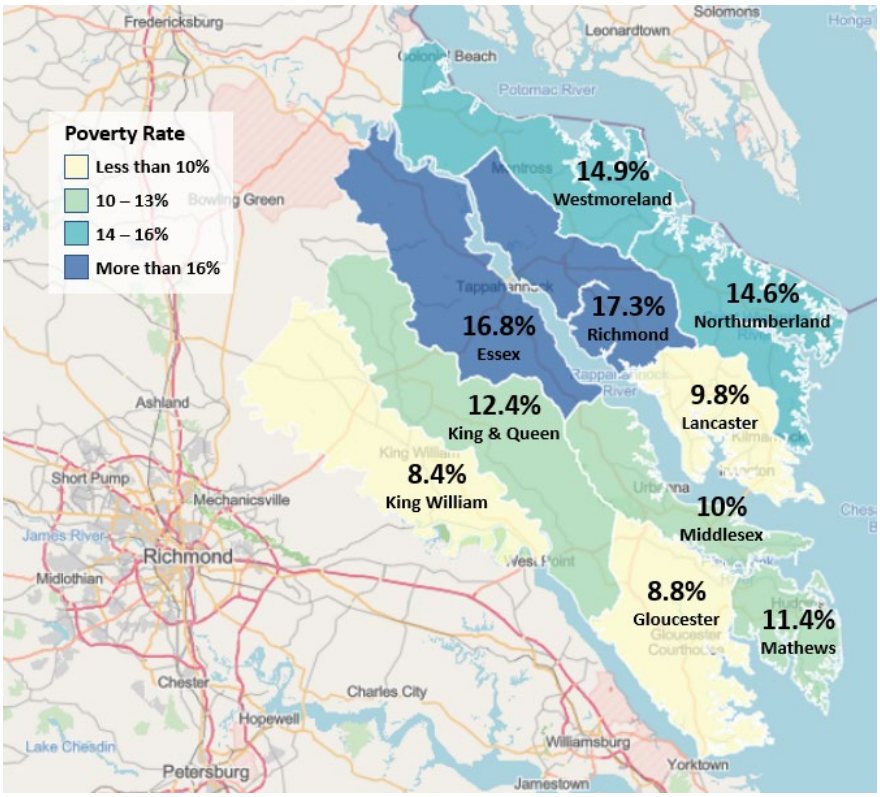


Figure 47 Poverty Rates in the Middle Peninsula and Northern Neck

The National Association for State Community Services Programs (NASCSP) defines *causes of poverty* as "a negative factor that creates or fosters barriers to self-sufficiency and/or reduces access to resources in communities in which low-income individuals live," and *conditions of poverty* as "a negative environmental, safety, health and/or economic condition that may reduce investment or growth in communities where low-income individuals live."[33] NASCSP recommends the use of techniques such as The Five Whys to determine the causes and conditions of poverty; this process involves identifying a problem and asking "why" five times to reach a root cause(s).

Figure 48 depicts a Five Whys analysis of the root causes of poverty. This analysis focuses on four situations contributing to poverty; there are many other causes and conditions. Figure 48 proposes possible root causes for people who are unemployed, are unable to join the labor force due to child care responsibilities, are employed in low-paying jobs, and have insufficient resources in retirement. The first three situations yield root causes of *lack of training opportunities*, *child care is too expensive*, and *lack of public transit in rural area*. The fourth, retirees with insufficient resources, loops back to the issue of having low-paying jobs. Poverty is often cyclical, persisting through generations and communities; the family that cannot afford child care and relies on a single income may be unable to send their children to college due to the transportation barrier, and later in life their limited resources in retirement may prevent them from assisting their grandchildren with the

[33] NASCSP, *Checklist for Monitoring Community Needs Assessments for State CSBG Offices* (May 2017), 11.

cost of training or education. If they lack the resources to become homeowners, they may be unable to build intergenerational wealth to pass on to their children.

Figure 48 Root Cause of Poverty Analysis: The Five Whys

The poverty rates established by the federal government are updated for inflation, but do not vary geographically. Rates therefore may not reflect the impact of local issues such as lack of affordable housing on a region's economic well-being. Participants in Bay Aging's community needs assessment survey repeatedly cited affordable housing as a problem for the Middle Peninsula and Northern Neck. Survey respondents also indicated widespread lack of satisfaction with the availability of living wage jobs in the region.

Community Resources

As described in the Introduction and detailed in Figure 1, Bay Aging provides transportation, housing, and healthy living services. During fiscal year 2021 (Oct. 1, 2020 – Sept. 30, 2021), Bay Aging served 33,383 people, including 28,216 residents of the Middle Peninsula and Northern Neck (see Figure 49). Services delivered include more than 208,000 meals, over 109,000 rides, and more than 71,000 hours of care services.

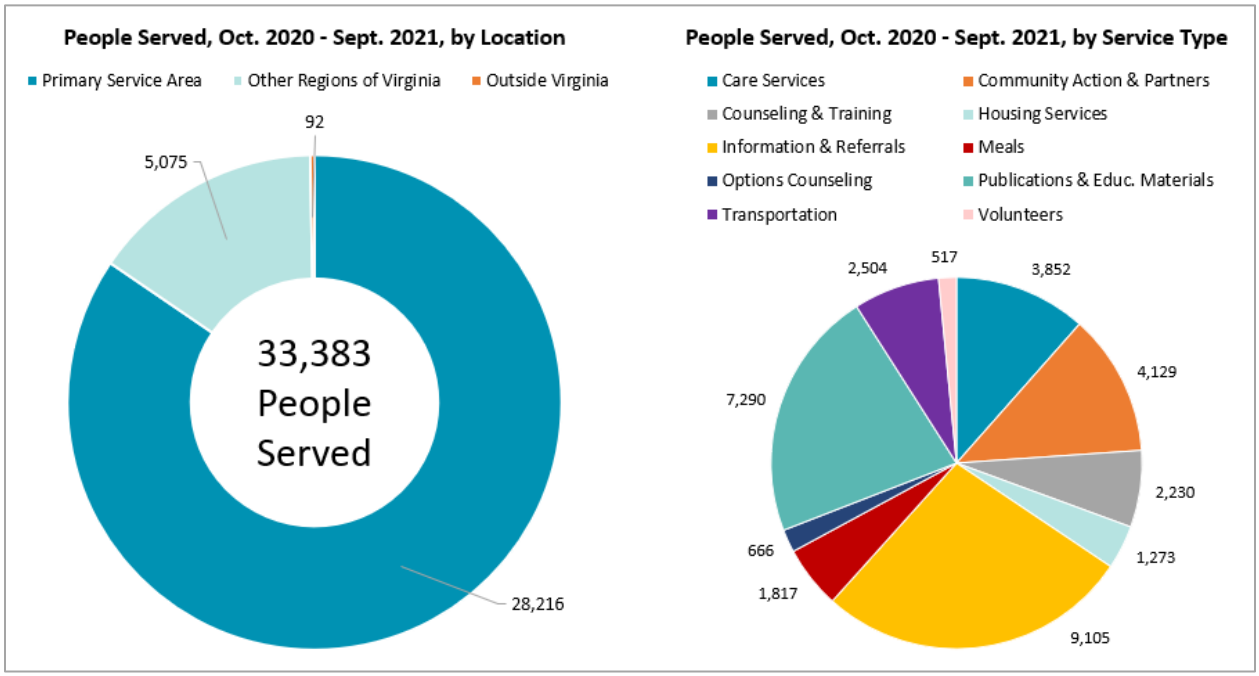


Figure 49 People Served by Bay Aging, Oct. 2020 - Sept. 2021

Bay Aging proudly partners with many government agencies, non-profits, and community-based organizations in the Middle Peninsula and Northern Neck. Client referrals to and from local organizations are an important aspect of Bay Aging's service to community members who seek assistance.

Following is a list of organizations serving the Middle Peninsula and Northern Neck:

211 Virginia Community Engagement
Adult Literacy on the Middle Peninsula
Avalon Center
Bacon Street
Bay Aging
Bay Rivers Telehealth Alliance
Bethel UMC
Bon Secours Mercy Health
Boys and Girls Club of the Northern Neck
Boys and Girls Club of Virginia Peninsula
Colonial Beach Redevelopment Housing Authority
Department of Rehabilitative Services

Dominion Virginia Power
Essex County Department of Social Services
Fredericksburg Area HIV/AIDS Support Services (FAHASS)
Gloucester County Department of Social Services
Gloucester Housing Partnership
Gloucester United Emergency Shelter Team (GUEST)
Hanover & King William Habitat for Humanity
Healthy Harvest Food Bank
Housing Opportunities Made Equal of Virginia Inc. (HOME)
Insight Enterprises, Inc.
Job Assistance Center, Inc.
King and Queen County Department of Social Services
King William County Department of Social Services
Lancaster County Department of Social Services
Legal Aid Works
Mathews County Department of Social Services
McGuire- Homeless Veterans Team
Middlesex County Department of Social Services
Middlesex Peninsula Northern Neck Community Services Board (MPNNCSB)
Middle Peninsula Planning District Commission (MP-PDC)
Natasha House
National Alliance of Mental Illness (NAMI) Mid-Tidewater
Northern Neck Middlesex Free Health Clinic
Northern Neck Peninsula Housing Coalition
Northern Neck Planning District Commission (NNPDC)
Northumberland County Department of Social Services
Peninsula Agency on Aging
Rappahannock Community College
Richmond County Department of Social Services
Riverside Health System
Rural Infant Services Program
Salvation Army (Essex County)
Salvation Army (Gloucester County)
Samaritan Group
The Haven
The Jesse Ball DuPont Fund
Three Rivers Health District – Virginia Department of Health
Three Rivers Healthy Families
VA Community Employment Coordinator
Virginia Commonwealth University Health
Virginia Commonwealth University Health - Tappahannock Hospital
Virginia Cooperative Extension
Walter Reed Convalescent and Rehabilitation Center – Virginia Health Services
Westmoreland County Department of Social Services
Westmoreland County Health Department
YMCA of the Virginia Peninsula

County Profiles & Needs

This section recaps highlights from the Demographic Profile for each county. Rather than restating every dollar amount and rate, the purpose here is to consider how each county compares with other counties in the Middle Peninsula and Northern Neck – for example, higher income versus lower income – and how these comparisons relate to results from the community needs assessment survey. See Figure 50 for a visual representation of key county demographics. As noted in the Survey Results section, disaggregated survey results are less statistically significant than overall results, due to smaller sample sizes; survey results for individual counties should therefore be used with caution.

Essex County

Essex's population was 10,599 in 2020 and is projected to grow 5% to 11,171 by 2040. Essex is the 3rd youngest county in the Middle Peninsula and Northern Neck, with a median age of 46.3, and has the 2nd highest percentage of households with children. 23.7% of residents are age 65 or over. Essex has the largest minority population in the region, 43.8%.

Educational attainment is low – Essex has the smallest percentages of residents with bachelor's or graduate degrees. The unemployment rate is the highest in the region. Median household income is 2nd lowest, and the poverty rate is 2nd highest. Median home value in Essex is 2nd lowest in the area, but monthly housing costs for homeowners are 3rd highest. Essex has the 2nd highest proportion of renters, and the 2nd highest percentage of manufactured homes/non-traditional housing units. Essex scores poorly on County Health Rankings for both health outcomes and health factors, and has the 2nd highest percentage of survey respondents who say the place they typically go when sick is a hospital emergency room. Nearly half of survey participants from Essex self-identify as a caregiver for an older adult or person with disabilities or chronic conditions, more than any other county in the region. Survey respondents' satisfaction with quality of life ranks 7th out of 10.

The community needs assessment survey found that Essex participants' top **social issues** not being adequately addressed by the community are:

- Affordable housing
- Availability of mental/behavioral health services
- Services for older adults

With regard to **economic security**, residents are most dissatisfied with:

- Availability of living wage jobs
- Emergency assistance for food, rent & utilities
- Options for financial education, budgeting classes, credit counseling

Top **health** needs are:

- Health care assistance for seniors
- Affordable health services
- Access to healthy food options
- Dental care options
- Health care options for uninsured/underinsured people
- Adequate number of providers of mental/behavioral health services

Top **housing** needs are:

- Affordable housing for older adults
- Assistance with property repair/maintenance

- Education about financing options for homeownership
- Housing assistance for low-income families

Most important **transportation** needs are:

- Expand transportation to specialized medical services outside the Middle Peninsula and Northern Neck
- Access to public transportation
- Increase access to transportation for people with disabilities and special needs

Gloucester County

Following two decades of rapid growth, Gloucester's population reached 38,711 in 2020 but is projected to decline half a percent to 38,530 by 2040. Gloucester accounts for over a quarter of the Middle Peninsula and Northern Neck's population and is the most densely populated. Gloucester is the 2nd youngest county in the region, with a median age of 44.9. 19.6% of residents are age 65 and over. Gloucester is the 2nd least diverse county, with a minority population of 16.3%.

Although educational attainment is slightly lower than average, Gloucester has the highest median income and the 2nd lowest poverty rate. The unemployment rate is 3rd lowest, and few households lack access to a vehicle. Median home values are about average for the region, but monthly housing costs are 2nd highest for both owners and renters. Gloucester ranks 2nd highest for both health outcomes and health factors. Survey respondents from Gloucester expressed the highest rate of satisfaction with quality of life, but also report the highest rate of experiencing difficulty in covering monthly expenses.

The community needs assessment survey found that Gloucester participants' top **social issues** not being adequately addressed by the community are:

- Affordable housing
- Housing options for people/families facing homelessness
- Services for older adults

With regard to **economic security**, residents are most dissatisfied with:

- Availability of living wage jobs
- Options for financial education, budgeting classes, credit counseling
- Access to transportation

Top **health** needs are:

- Affordable health services
- Health care assistance for seniors
- Access to healthy food options
- Adequate number of providers of mental/behavioral health services

Top **housing** needs are:

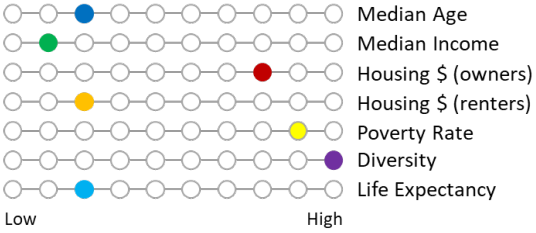
- Affordable housing for older adults
- Assistance with property repair/maintenance
- Affordable workforce housing
- Housing options for people/families facing homelessness

Most important **transportation** needs are:

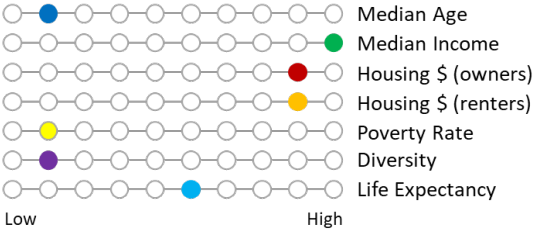
- Increase access to transportation for people with disabilities and special needs
- Increase number of public transportation routes
- Access to public transportation

FIGURE 50 COUNTY RANKINGS IN THE MIDDLE PENINSULA & NORTHERN NECK

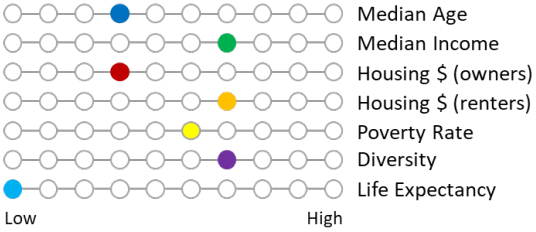
ESSEX COUNTY



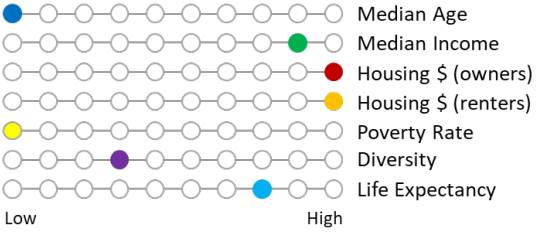
GLOUCESTER COUNTY



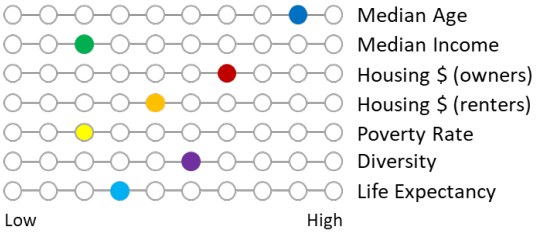
KING & QUEEN COUNTY



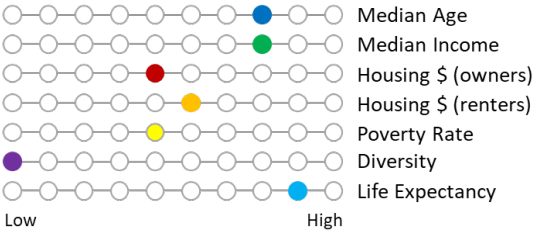
KING WILLIAM COUNTY



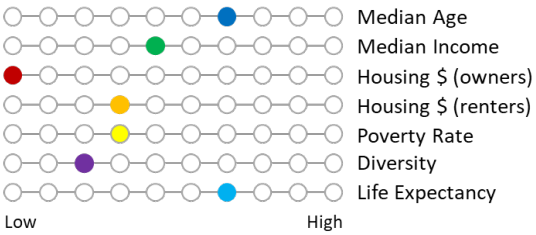
LANCASTER COUNTY



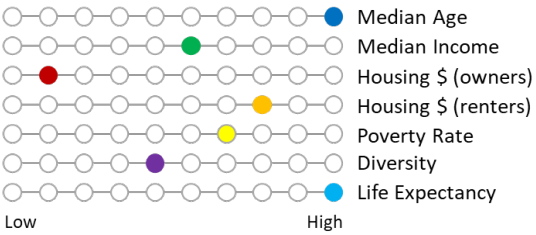
MATHEWS COUNTY



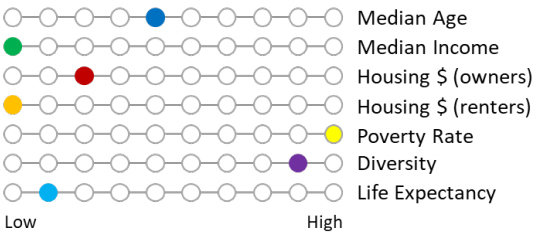
MIDDLESEX COUNTY



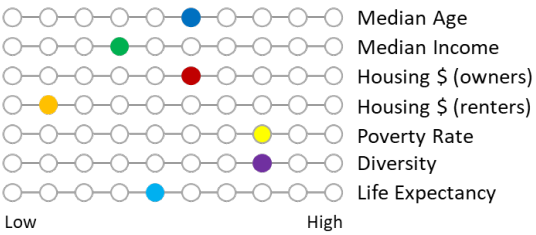
NORTHUMBERLAND COUNTY



RICHMOND COUNTY



WESTMORELAND COUNTY



LEGEND

- Median Age of County Residents, from U.S. Census Bureau's American Community Survey, Table B01002
- Median Household Income of County Residents, from U.S. Census Bureau's American Community Survey, Table S1901
- Median Monthly Housing Cost for Homeowners, from U.S. Census Bureau's American Community Survey, Table S2503
- Median Monthly Housing Cost for Renters, from U.S. Census Bureau's American Community Survey, Table S2503
- Poverty Rate for County Residents, from U.S. Census Bureau's American Community Survey, Table S1701
- Percent of County Population that is non-White, from U.S. Census Bureau's 2020 Decennial Census, Table P1
- Life Expectancy for County Residents, from University of Wisconsin's County Health Rankings & Roadmaps

King & Queen County

King & Queen's population was 6,608 in 2020 and is projected to grow 6% to 7,024 by 2040. With both the largest land area and the fewest people, King & Queen has the lowest population density in the Middle Peninsula and Northern Neck. King & Queen is the 4th youngest county in the region, with a median age of 46.7. 23.6% of residents are age 65 and over. Just under a third of King & Queen's population is non-White, 4th highest in the area.

For many measures, including educational attainment, median income, poverty, and median house value, King & Queen places in the middle of the pack. King & Queen has a lot of vacant homes (not primarily due to seasonal use) and the highest percentage of manufactured homes/non-traditional housing units. Health outcomes are 2nd lowest in the region, and health factors are 3rd lowest. Life expectancy is the lowest in the area. King & Queen has the 2nd lowest unemployment rate, and more than double the percentage of residents employed in agriculture/forestry/fishing/mining. Survey respondents from King & Queen expressed the lowest rate of satisfaction with quality of life.

The community needs assessment survey found that King & Queen participants' top **social issues** not being adequately addressed by the community are:

- Affordable housing
- Affordable child care
- Availability of transportation

With regard to **economic security**, residents are most dissatisfied with:

- Access to transportation
- Options for financial education, budgeting classes, credit counseling
- Availability of workforce development, vocational & technical training to increase job skills

Top **health** needs are:

- Health care assistance for seniors
- Affordable health services
- Facilities for physical activities/exercise and health education
- Adequate number of providers of mental/behavioral health services

Top **housing** needs are:

- Affordable housing for older adults
- Assistance with property repair/maintenance
- Affordable workforce housing

Most important **transportation** needs are:

- Increase access to transportation for people with disabilities and special needs
- Increase hours/days of operation for public transportation
- Access to public transportation
- Expand transportation to specialized medical services outside the Middle Peninsula and Northern Neck

King William County

King William is the fastest-growing county in the Middle Peninsula and Northern Neck. Population grew 36% from 13,136 in 2000 to 17,810 in 2020 and is projected to increase 16% to 20,576 by 2040. King William has the youngest residents, with a median age of 40.3, and the largest average household size. 16.3% of the population is age 65 and up. Minorities comprise 23.4% of the population, 4th lowest in the region.

King William has the highest percentage of people who completed high school, the 2nd highest median household income, and the lowest poverty rate. Unemployment is slightly lower than average. The housing stock in King William is the newest in the area and includes the fewest manufactured homes/non-traditional housing units. Median monthly housing costs are the highest, but the percentage of residents who are cost-burdened is low. King William has the highest health outcomes rank in the region. Over 45% of survey participants from King William self-identify as a caregiver for an older adult or person with disabilities or chronic conditions, 2nd highest in Bay Aging's service area. Survey respondents' satisfaction with quality of life ranks 8th out of 10.

The community needs assessment survey found that King William participants' top **social issues** not being adequately addressed by the community are:

- Affordable child care
- Availability of mental/behavioral health services
- Better enforcement of laws

With regard to **economic security**, residents are most dissatisfied with:

- Assistance with searching for employment
- Availability of living wage jobs
- Access to transportation

Top **health** needs are:

- Affordable health services
- Dental care options
- Access to healthy food options
- Health care assistance for seniors
- Adequate number of providers of mental/behavioral health services

Top **housing** needs are:

- Affordable housing for older adults
- Assistance with property repair/maintenance
- Education about financing options for homeownership
- Programs that ensure homes have running water and indoor plumbing

Most important **transportation** needs are:

- Expand transportation to specialized medical services outside the Middle Peninsula and Northern Neck
- Increase access to transportation for people with disabilities and special needs
- Increase hours/days of operation for public transportation

Lancaster County

Lancaster's population has steadily declined in recent decades and is projected to shrink 10% from 10,919 in 2020 to 9,871 by 2040. Lancaster is the 2nd oldest county in the Middle Peninsula and Northern Neck, and 15th oldest in the country, with a median age of 57.3. Lancaster has the fewest households with children, and 36.7% of residents are age 65 and up. Minorities comprise 31.6% of the population, slightly above average for the area. Lancaster has the smallest percentage of Hispanic residents in the region.

Educational attainment in Lancaster is high - residents have the highest rate of completing bachelor's degrees and graduate degrees. However, Lancaster has the highest percentage of younger adults with no computer and the 2nd highest percentage of children who do not have a computer. Median household income is 3rd lowest in the region; this ranking is in part because Lancaster's household size is the smallest, with 38.2% of householders living alone. The poverty rate is 3rd lowest. The housing stock is older and over 20% of housing units are seasonally occupied. Lancaster has the 2nd highest percentage of households with no vehicle, and the highest proportion of survey respondents who say that the place they go most often when sick is a hospital emergency room. Survey participants' satisfaction with quality of life ranks 5th out of 10.

The community needs assessment survey found that Lancaster participants' top **social issues** not being adequately addressed by the community are:

- Affordable housing
- Employment opportunities and job training
- Availability of mental/behavioral health services

With regard to **economic security**, residents are most dissatisfied with:

- Availability of living wage jobs
- Availability of workforce development, vocational & technical training to increase job skills
- Assistance with searching for employment
- Employment opportunities for older adults
- Options for financial education, budgeting classes, credit counseling

Top **health** needs are:

- Affordable health services
- Access to healthy food options
- Increased number of providers
- Adequate number of providers of mental/behavioral health services

Top **housing** needs are:

- Affordable housing for older adults
- Assistance with property repair/maintenance
- Affordable workforce housing
- Housing assistance for low-income families

Most important **transportation** needs are:

- Access to public transportation
- Expand transportation to specialized medical services outside the Middle Peninsula and Northern Neck
- Increase access to transportation for people with disabilities and special needs
- Pedestrian-friendly system to make areas more safely walkable

Mathews County

Mathews has the smallest land area of the counties in the Middle Peninsula and Northern Neck, and Is surrounded by water on three of four sides. Following two decades of decline, the population was 8,533 in 2020 (2nd smallest in the region) and is projected to shrink 9% to 7,796 by 2040. Mathews is the 3rd oldest county in the area, with a median age of 54.5. 31.5% of the population is age 65 and older. Mathews' population is the least diverse, at 85.5% White.

The percentage of Mathews residents who completed high school is 3rd highest in the region. Median household income is 3rd highest and the poverty rate is average. Mathews' housing stock is the oldest, with nearly a quarter of housing units for seasonal use. Median home value is 2nd highest and median monthly housing costs are average; few homeowners are cost-burdened but Mathews has the highest percentage of renters who are cost-burdened. Mathews has the fewest households lacking access to a vehicle and over a quarter of workers commute an hour or more. Mathews has the highest health factors rank in the region, and the 2nd longest life expectancy. Survey participants from Mathews report the lowest rate of experiencing difficulty in covering monthly expenses, and rank 6th out of 10 for satisfaction with quality of life.

The community needs assessment survey found that Mathews participants' top **social issues** not being adequately addressed by the community are:

- Availability of mental/behavioral health services
- Availability of transportation
- Affordable child care
- Affordable housing

With regard to **economic security**, residents are most dissatisfied with:

- Availability of workforce development, vocational & technical training to increase job skills
- Employment opportunities for older adults
- Availability of living wage jobs
- Options for financial education, budgeting classes, credit counseling

Top **health** needs are:

- Health care assistance for seniors
- Affordable health services
- Access to healthy food options
- Adequate number of providers of mental/behavioral health services

Top **housing** needs are:

- Affordable housing for older adults
- Assistance with property repair/maintenance
- Code enforcement for removing dilapidated houses

Most important **transportation** needs are:

- Access to public transportation
- Increase access to transportation for people with disabilities and special needs
- Increase hours/days of operation for public transportation

Middlesex County

Middlesex's population was 10,625 in 2020 and is projected to grow 8% to 11,515 by 2040. Median age is 53.9, 4th highest in the Middle Peninsula and Northern Neck. 32% of residents are age 65 and older. Middlesex has the 2nd fewest households with children. Middlesex is the 3rd least diverse county, with a minority population of 20.8%.

Middlesex has a substantial percentage of residents who did not complete high school, but also has the 3rd highest percentage of residents with graduate degrees. For several measures including median income, poverty, and health rankings, Middlesex places in the middle range. However, the unemployment rate is 3rd highest in the region. Middlesex has the 3rd highest median house value but the lowest median monthly housing cost. This likely results from nearly half of homeowners not having a mortgage, since Middlesex also has the highest percentage of homeowners who are cost-burdened, 26.1%. Over a quarter of housing units are for seasonal use. Life expectancy is 4th highest in the region. Survey participants from Middlesex report the 3rd highest satisfaction with quality of life.

The community needs assessment survey found that Middlesex participants' top **social issues** not being adequately addressed by the community are:

- Affordable housing
- Housing options for people/families facing homelessness
- Access to GED classes and adult education

With regard to **economic security**, residents are most dissatisfied with:

- Access to transportation
- Assistance with searching for employment
- Availability of living wage jobs
- Options for financial education, budgeting classes, credit counseling

Top **health** needs are:

- Access to healthy food options
- Increased number of providers
- Affordable health services
- Health care assistance for veterans
- Adequate number of providers of mental/behavioral health services

Top **housing** needs are:

- Affordable housing for older adults
- Assistance with property repair/maintenance
- Code enforcement for removing dilapidated houses

Most important **transportation** needs are:

- Increase access to transportation for people with disabilities and special needs
- Expand transportation to specialized medical services outside the Middle Peninsula and Northern Neck
- Access to public transportation
- Transportation on demand (like Uber/Lyft service)

Northumberland County

Northumberland's population declined slightly from 2000 to 2020 and is projected to shrink 4% from 11,839 in 2020 to 11,393 by 2040. Northumberland is the oldest county in the Middle Peninsula and Northern Neck, and the 6th oldest county in the U.S., with a median age of 58.9. 37.5% of residents are age 65 or older, and 70.1% of households include at least one person who is age 60 and up. Minorities comprise 29.3% of Northumberland's population, about average for the area. Compared to other counties in the region, Northumberland places in the middle range with regard to median income, poverty, unemployment, and health rankings. Educational attainment is high, with the 2nd highest percentages of residents with bachelor's and graduate degrees. Northumberland has the highest median home value, the largest percentage of homeowners who have no mortgage, and the smallest percentage of residents who are renters. Northumberland has the highest vacancy rate in the region, 39%, with large numbers of both seasonal housing units and other types of vacancies. Residents have the highest life expectancy in the area. Survey participants from Northumberland report the 2nd lowest rate of difficulty in meeting monthly expenses and the 2nd highest satisfaction with quality of life.

The community needs assessment survey found that Northumberland participants' top **social issues** not being adequately addressed by the community are:

- Affordable housing
- Availability of mental/behavioral health services
- Employment opportunities and job training

With regard to **economic security**, residents are most dissatisfied with:

- Availability of living wage jobs
- Access to transportation
- Employment opportunities for older adults

Top **health** needs are:

- Increased number of providers
- Affordable health services
- Health care assistance for seniors
- Health care options for uninsured/underinsured people
- Transportation to access health services
- Adequate number of providers of mental/behavioral health services

Top **housing** needs are:

- Affordable workforce housing
- Affordable housing for older adults
- Housing assistance for low-income families

Most important **transportation** needs are:

- Access to public transportation
- Increase access to transportation for people with disabilities and special needs
- Increase hours/days of operation for public transportation
- Offer bus routes to employment centers for commuters
- Transportation on demand (like Uber/Lyft service)

Richmond County

Richmond's population was 8,923 in 2020 and is projected to grow 3% to 9,157 by 2040. Richmond is slightly younger than average, ranking 6th out of 10 in the Middle Peninsula and Northern Neck with a median age of 47.3. 21.1% of residents are age 65 and up. Richmond is diverse, with the 2nd highest non-White population, 35.7%, and the largest percentage of Hispanic residents.

Richmond has the lowest percentage of residents who completed high school, and the 2nd fewest with bachelor's or graduate degrees. Richmond has the lowest median household income, the highest poverty rate, and the largest percentage of households with no vehicle. Nonetheless, the unemployment rate is the lowest in the region. More workers are employed in the manufacturing sector than in any other county in the area. Richmond has the 2nd oldest housing stock, the lowest median house value, the most vacancies that are not due to seasonal use, and the highest proportion of renters. Richmond has the 3rd worst health outcomes rank and the 2nd shortest life expectancy. Survey participants from Richmond report the 2nd highest rate of experiencing difficulty in covering monthly expenses and rank 9th out of 10 for satisfaction with quality of life.

The community needs assessment survey found that Richmond participants' top **social issues** not being adequately addressed by the community are:

- Affordable housing
- Services for older adults
- Affordable child care
- Availability of mental/behavioral health services

With regard to **economic security**, residents are most dissatisfied with:

- Employment opportunities for older adults
- Availability of living wage jobs
- Options for financial education, budgeting classes, credit counseling

Top **health** needs are:

- Health care assistance for seniors
- Affordable health services
- Dental care options
- Adequate number of providers of mental/behavioral health services

Top **housing** needs are:

- Affordable housing for older adults
- Assistance with property repair/maintenance
- Housing assistance for low-income families

Most important **transportation** needs are:

- Expand transportation to specialized medical services outside the Middle Peninsula and Northern Neck
- Increase access to transportation for people with disabilities and special needs
- Access to public transportation
- Increase number of public transportation routes

Westmoreland County

Following two decades of rapid growth, Westmoreland is currently the 2nd most populous county in the Middle Peninsula and Northern Neck. However, the 2020 population of 18,477 is projected to grow less than 1% to 18,649 by 2040, which would result in Westmoreland falling to 3rd place behind Gloucester and King William. Westmoreland is the 5th oldest county in the region, with a median age of 48.6. 25.6% of residents are age 65 and older. Westmoreland has the 3rd highest non-White population, 35.4%, and the 2nd highest percentage of Hispanic residents.

Westmoreland has the largest percentage of children who lack a computer, the 3rd fewest adult residents who completed high school, and the 3rd fewest adults with a bachelor's degree. Prior to the pandemic, a higher percentage of residents worked from home than in any other county in the region. Westmoreland has the 2nd highest unemployment rate, the 4th lowest median income, the 3rd highest poverty rate, and the 3rd highest percentage of households without a vehicle. Median house value is 3rd lowest. Westmoreland has the 2nd highest percentage of householders who live alone and the 3rd most renters. Westmoreland's health factors rank is the worst in the region. Life expectancy is slightly below average. Survey participants from Westmoreland rank 4th out of 10 for satisfaction with quality of life.

The community needs assessment survey found that Westmoreland participants' top **social issues** not being adequately addressed by the community are:

- Affordable housing
- Employment opportunities and job training
- Better enforcement of laws

With regard to **economic security**, residents are most dissatisfied with:

- Availability of living wage jobs
- Availability of workforce development, vocational, and technical training to increase job skills
- Employment opportunities for older adults
- Options for financial education, budgeting classes, credit counseling
- Small business development support

Top **health** needs are:

- Affordable health services
- Mental/behavioral health services
- Increased number of providers
- Adequate number of providers of mental/behavioral health services

Top **housing** needs are:

- Assistance with property repair/maintenance
- Affordable housing for older adults
- Housing options for people/families experiencing homelessness

Most important **transportation** needs are:

- Increase number of public transportation routes
- Increase hours/days of operation for public transportation
- Increase access to transportation for people with disabilities and special needs

Conclusion

This report serves to meet the federal requirement that Bay Aging, a Community Services Block Grant Eligible Entity, conduct periodic community needs assessments. The insights gained from preparing this report set the direction for the work of Bay Aging's Community Action Program and serve as the foundation for Bay Aging's agency-wide strategic plan.

Conducting a community needs assessment has yielded valuable information that will enable Bay Aging to better meet clients' needs and more effectively work with local and state partners. These insights have already contributed to the 2022 update of Bay Aging's Community Action Plan, and will inform the development of Bay Aging's 2022 strategic plan.

Bay Aging staff who contributed to the development, distribution, and analysis of the community needs assessment survey draw the names of five lucky survey respondents who received $50 gift cards as a thank-you for participating. Pictured, from left: Hyena Rose, SCSEP Assistant Manager; Saidah Israel, Community Action Program Manager; Janice Burse, Housing Programs Support Specialist; Kathy Vesley, President & CEO; Randolph Logan III, Housing Project Manager; Michelle Seldon, Community Action Program Manager; Julie Northcott-Wilson, Statistician. Not pictured: Pat Frere, Director of Planning, Development and Single-Family Housing.

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Appendix A

Appendix A contains tables referenced in the Demographic Profile and Survey Results sections of the Community Needs Assessment report.

Percent below poverty level	Essex	Gloucester	King & Queen	King William	Lancaster	Mathews	Middlesex	North-umberland	Richmond	West-moreland	Virginia	United States
Population for whom poverty status is determined	16.8%	8.8%	12.4%	8.4%	9.8%	11.4%	10.0%	14.6%	17.3%	14.9%	10.6%	13.4%
AGE												
Under 5 years	25.3%	14.4%	23.1%	11.8%	30.2%	24.3%	17.5%	29.2%	23.6%	14.1%	15.0%	20.3%
5 to 17 years	25.4%	13.3%	19.1%	19.6%	8.9%	19.2%	6.6%	29.9%	29.9%	21.2%	13.5%	17.9%
18 to 34 years	23.4%	8.0%	6.5%	8.7%	14.9%	17.4%	12.7%	29.4%	21.6%	17.0%	14.0%	16.3%
35 to 64 years	13.9%	8.1%	11.2%	5.0%	9.3%	12.2%	10.9%	11.9%	11.6%	14.8%	7.9%	10.5%
60 years and over	10.2%	6.9%	14.4%	4.0%	7.3%	8.0%	10.7%	7.8%	10.4%	11.6%	7.7%	9.6%
65 years and over	9.0%	6.1%	12.2%	3.5%	6.4%	3.2%	8.1%	6.5%	14.1%	10.3%	7.5%	9.3%
SEX												
Male	14.8%	6.2%	13.0%	7.4%	6.5%	12.8%	7.3%	15.3%	17.7%	13.0%	9.5%	12.2%
Female	18.5%	11.2%	11.9%	9.4%	12.7%	10.0%	12.6%	14.0%	16.9%	16.8%	11.6%	14.6%
RACE, HISPANIC/LATINO ORIGIN												
White alone	14.3%	7.7%	5.6%	5.3%	8.1%	8.4%	7.4%	11.2%	11.2%	13.1%	8.5%	11.1%
Black or African American alone	20.7%	16.7%	23.7%	20.8%	13.5%	41.0%	16.7%	21.5%	22.9%	21.5%	17.6%	23.0%
Two or more races	16.9%	23.4%	32.7%	26.8%	36.0%	15.9%	36.3%	46.6%	78.3%	4.1%	12.7%	16.7%
Hispanic or Latino origin (of any race)	0.0%	1.0%	23.0%	27.1%	0.0%	0.0%	31.0%	57.5%	0.4%	15.4%	14.0%	19.6%
EDUCATIONAL ATTAINMENT												
Population 25 years and over	14.8%	7.4%	10.9%	5.6%	8.2%	9.5%	10.1%	11.3%	14.0%	13.8%	8.3%	10.7%
Less than high school graduate	24.7%	20.3%	19.4%	12.0%	24.7%	16.3%	20.8%	18.2%	14.9%	27.8%	21.6%	24.9%
High school graduate (includes equivalency)	18.0%	7.1%	14.6%	7.3%	9.2%	17.1%	6.8%	17.4%	14.8%	17.2%	11.8%	13.5%
Some college, associate's degree	8.8%	6.7%	6.9%	3.2%	6.9%	2.3%	9.4%	7.2%	12.8%	8.8%	7.8%	9.6%
Bachelor's degree or higher	7.2%	3.0%	5.7%	4.7%	3.7%	7.1%	9.8%	6.4%	13.5%	4.9%	3.2%	4.3%
WORK EXPERIENCE												
Population 16 years and over	14.7%	7.7%	10.8%	5.6%	9.2%	10.3%	10.3%	12.2%	14.1%	13.6%	9.7%	12.0%
Worked full-time, year-round in the past 12 months	2.9%	0.7%	0.8%	1.4%	3.3%	0.8%	1.6%	6.0%	1.6%	3.9%	1.9%	2.7%
Worked part-time or part-year in the past 12 months	20.1%	9.5%	9.1%	8.1%	11.3%	14.0%	11.7%	9.7%	16.7%	15.5%	14.5%	16.3%
Did not work	25.3%	15.2%	21.9%	10.4%	12.4%	15.1%	16.1%	17.2%	25.9%	21.9%	18.1%	21.4%

Table 1 Poverty Rates

U.S. Census Bureau, American Community Survey, Table S1701 Poverty Status in the Past 12 Months, 2019: ACS 5-Year Estimates, https://data.census.gov/cedsci/table?q=Table%20S1701&tid=ACSST5Y2019.S1701, retrieved Feb. 28, 2022.

Industry	Essex	Gloucester	King & Queen	King William	Lancaster	Mathews	Middlesex	North-umberland	Richmond	West-moreland	Virginia	United States
Agriculture, forestry, fishing and hunting, and mining	1.8%	2.1%	5.3%	1.7%	1.7%	0.0%	2.5%	1.8%	1.4%	2.4%	0.9%	1.8%
Construction	9.2%	8.1%	11.9%	12.2%	7.3%	16.1%	8.1%	11.0%	9.8%	12.4%	6.6%	6.6%
Manufacturing	12.9%	11.2%	10.4%	9.3%	8.5%	12.9%	10.8%	3.7%	16.9%	5.5%	7.1%	10.1%
Wholesale trade	1.5%	2.0%	1.8%	3.9%	1.9%	2.2%	2.8%	1.6%	1.4%	1.9%	1.8%	2.6%
Retail trade	15.5%	14.3%	7.4%	12.4%	11.3%	11.9%	13.7%	9.7%	7.2%	11.5%	10.4%	11.2%
Transportation and warehousing, and utilities	7.4%	5.3%	5.0%	6.6%	3.8%	3.5%	6.2%	4.5%	4.0%	4.9%	4.4%	5.4%
Information	0.8%	1.4%	0.2%	1.4%	1.1%	0.4%	1.2%	2.8%	1.9%	2.0%	1.9%	2.0%
Finance and insurance, and real estate and rental and leasing	8.9%	4.0%	4.7%	6.0%	6.9%	6.3%	4.4%	7.0%	5.5%	5.1%	6.3%	6.6%
Professional, scientific, and management, and administrative and waste management services	7.6%	10.2%	10.2%	9.4%	9.5%	7.1%	10.0%	12.0%	9.3%	12.9%	15.5%	11.6%
Educational services, and health care and social assistance	18.2%	19.6%	23.0%	24.5%	24.3%	22.9%	18.7%	27.1%	26.3%	15.6%	22.2%	23.1%
Arts, entertainment, and recreation, and accommodation and food services	6.7%	10.1%	5.4%	3.8%	8.2%	7.8%	8.4%	6.0%	5.3%	5.4%	8.9%	9.7%
Other services, except public administration	3.8%	4.1%	6.6%	4.8%	5.9%	4.9%	7.3%	7.2%	3.8%	7.8%	5.3%	4.9%
Public administration	5.7%	7.8%	8.0%	4.0%	9.7%	4.1%	6.0%	5.3%	7.0%	12.8%	8.8%	4.6%

Table 2 How the Civilian Labor Force is Employed

U.S. Census Bureau, American Community Survey, Table DP03 Selected Economic Characteristics, 2019: ACS 5-Year Estimates, https://data.census.gov/cedsci/table?q=employment&g=0100000US&tid=ACSDP5Y2019.DP03, retrieved Apr. 12, 2022.

Most Important Factors Contributing to High Quality of Life

*Categories in **blue** are in the top three for the 10-county service area as a whole, categories in **orange** are in the top three for some counties but not the entire region*

Locality	Category with the Most First Choice Votes	Category with the Second-Most First Choice Votes	Category with the Third-Most First Choice Votes
10-County Service Area	Affordable housing	Availability of health care services	Clean, healthy environment
Essex	Long-term services and supports	Affordable housing*	Availability of health care services*
Gloucester	Affordable housing	Availability of health care services*	Clean, healthy environment*
King & Queen	Affordable housing	Availability of health care services*	Low crime/safe neighborhoods*
King William	Availability of health care services	Affordable housing	Clean, healthy environment
Lancaster	Clean, healthy environment	Availability of health care services	Arts and cultural events,* Good place to raise children*
Mathews	Availability of health care services	Affordable housing	Clean, healthy environment,* Low crime/safe neighborhoods*
Middlesex	Affordable housing	Clean, healthy environment	Good schools,* Jobs with adequate wages*
Northumberland	Clean, healthy environment	Availability of health care services	Public transportation
Richmond	Long-term services and supports	Affordable housing	Arts and cultural events,* Availability of health care services,* Low crime/safe neighborhoods*
Westmoreland	Affordable housing*	Jobs with adequate wages*	Reliable internet/Wi-Fi service

**Asterisks denote a tie*

Table 3 Most Important Factors Contributing to High Quality of Life, by County

Top Health Needs in the Community

*Categories in **blue** are in the top three for the 10-county service area as a whole, categories in **orange** are in the top three for some counties but not the entire region*

Locality	Category with the Most First Choice Votes	Category with the Second-Most First Choice Votes	Category with the Third-Most First Choice Votes
10-County Service Area	Affordable health services	Health care assistance for seniors	Access to healthy food options
Essex	Health care assistance for seniors	Affordable health services	Access to healthy food options,* Dental care options,* Health care options for uninsured/underinsured people*
Gloucester	Affordable health services	Health care assistance for seniors	Access to healthy food options
King & Queen	Health care assistance for seniors	Affordable health services	Facilities for physical activities/exercise and health education
King William	Affordable health services	Dental care options	Access to healthy food options,* Health care assistance for seniors*
Lancaster	Affordable health services	Access to healthy food options*	Increased number of providers*
Mathews	Health care assistance for seniors	Affordable health services	Access to healthy food options
Middlesex	Access to healthy food options	Increased number of providers	Affordable health services,* Health care assistance for veterans*
Northumberland	Increased number of providers	Affordable health services	Health care assistance for seniors,* Health care options for uninsured/underinsured people,* Transportation to access health services*
Richmond	Health care assistance for seniors	Affordable health services	Dental care options
Westmoreland	Affordable health services	Mental/behavioral health services	Increased number of providers

**Asterisks denote a tie*

Table 4 Top Health Needs, by County

Gaps in Mental/Behavioral Health Services in the Community

*Categories in **blue** are in the top three for the 10-county service area as a whole, categories in **orange** are in the top three for some counties but not the entire region*

Locality	Category with the Most First Choice Votes	Category with the Second-Most First Choice Votes	Category with the Third-Most First Choice Votes
10-County Service Area	Adequate number of providers	Affordable mental/behavioral health services	Awareness, education & prevention
Essex	Adequate number of providers	Specialty care (advanced care and treatment by a specialist)	Affordable mental/behavioral health services,* Resources to find services*
Gloucester	Adequate number of providers	Affordable mental/behavioral health services*	Awareness, education & prevention*
King & Queen	Adequate number of providers	Affordable mental/behavioral health services*	Resources to find services*
King William	Adequate number of providers*	Affordable mental/behavioral health services*	Awareness, education & prevention
Lancaster	Adequate number of providers	Affordable mental/behavioral health services	Resources to find services,* Specialty care (advanced care and treatment by a specialist)*
Mathews	Adequate number of providers	Awareness, education & prevention	Affordable mental/behavioral health services
Middlesex	Adequate number of providers	Affordable mental/behavioral health services*	Awareness, education & prevention*
Northumberland	Adequate number of providers	Awareness, education & prevention	Specialty care (advanced care and treatment by a specialist)
Richmond	Adequate number of providers	Affordable mental/behavioral health services	Specialty care (advanced care and treatment by a specialist)
Westmoreland	Adequate number of providers	Substance abuse prevention & treatment	Affordable mental/behavioral health services

**Asterisks denote a tie*

Table 5 Gaps in Mental/Behavioral Health Services, By County

Social Issues of Greatest Concern

*Categories in **blue** are in the top three for the 10-county service area as a whole, categories in **orange** are in the top three for some counties but not the entire region*

Locality	Category with the Most First Choice Votes	Category with the Second-Most First Choice Votes	Category with the Third-Most First Choice Votes
10-County Service Area	Crime (property crime, violent crime)	Child abuse	Poverty
Essex	Elder abuse	Child abuse*	Crime (property crime, violent crime)*
Gloucester	Crime (property crime, violent crime)	Child abuse	Homelessness
King & Queen	Crime (property crime, violent crime)	Child abuse*	Poverty*
King William	Food insecurity	Climate/environment*	Crime (property crime, violent crime),* Domestic violence*
Lancaster	Climate/environment*	Crime (property crime, violent crime)*	Systemic racism
Mathews	Child abuse	Crime (property crime, violent crime)*	Cyber crime (scams, phishing, ID theft, etc.)*
Middlesex	Child abuse*	Crime (property crime, violent crime)*	Climate/environment,* Domestic violence,* Poverty*
Northumberland	Crime (property crime, violent crime)	Food insecurity	Homelessness
Richmond	Systemic racism	Crime (property crime, violent crime)	Elder abuse
Westmoreland	Drug or alcohol abuse*	Poverty*	Cyber crime (scams, phishing, ID theft, etc.),* Domestic violence,* Homelessness*

**Asterisks denote a tie*

Table 6 Social Issues of Greatest Concern, by County

Social Issues Not Being Adequately Addressed in the Community

*Categories in **blue** are in the top three for the 10-county service area as a whole, categories in **orange** are in the top three for some counties but not the entire region*

Locality	Category with the Most First Choice Votes	Category with the Second-Most First Choice Votes	Category with the Third-Most First Choice Votes
10-County Service Area	Affordable housing	Availability of mental/ behavioral health services	Affordable child care
Essex	Affordable housing*	Availability of mental/behavioral health services*	Services for older adults
Gloucester	Affordable housing	Housing options for people/families facing homelessness*	Services for older adults*
King & Queen	Affordable housing	Affordable child care*	Availability of transportation*
King William	Affordable child care*	Availability of mental/behavioral health services*	Better enforcement of laws*
Lancaster	Affordable housing	Employment opportunities and job training	Availability of mental/behavioral health services
Mathews	Availability of mental/behavioral health services	Availability of transportation	Affordable child care,* Affordable housing*
Middlesex	Affordable housing*	Housing options for people/families facing homelessness*	Access to GED classes and adult education
Northumberland	Affordable housing	Availability of mental/behavioral health services*	Employment opportunities and job training*
Richmond	Affordable housing	Services for older adults	Affordable child care,* Availability of mental/behavioral health services*
Westmoreland	Affordable housing*	Employment opportunities and job training*	Better enforcement of laws

**Asterisks denote a tie*

Table 7 Social Issues Not Being Adequately Addressed, by County

Top Unmet Needs for Children and Youth in the Community

*Categories in **blue** are in the top three for the 10-county service area as a whole, categories in **orange** are in the top three for some counties but not the entire region*

Locality	Category with the Most First Choice Votes	Category with the Second-Most First Choice Votes	Category with the Third-Most First Choice Votes
10-County Service Area	Access to computers and technology, including internet	Access to higher education and vocational training	Appropriate services for youth with physical and developmental disabilities
Essex	Appropriate services for youth with physical and developmental disabilities	Access to computers and technology, including internet	Access to higher education and vocational training,* After school programs,* Bullying/ relationship violence prevention & education*
Gloucester	After school programs	Bullying/relationship violence prevention & education	Appropriate services for youth with physical and developmental disabilities
King & Queen	Access to computers and technology, including internet	Access to higher education and vocational training*	Appropriate services for youth with physical and developmental disabilities*
King William	Access to computers and technology, including internet	Access to higher education and vocational training*	Bullying/relationship violence prevention & education*
Lancaster	Access to computers and technology, including internet	Access to higher education and vocational training	Employment opportunities for teens
Mathews	Access to computers and technology, including internet	Access to higher education and vocational training*	After school programs*
Middlesex	Access to computers and technology, including internet	After school programs	Bullying/relationship violence prevention & education,* Financial skills training,* Substance abuse prevention & treatment*
Northumberland	Access to computers and technology, including internet	Access to higher education and vocational training*	Financial skills training*
Richmond	Access to computers and technology, including internet	Access to higher education and vocational training*	Appropriate services for youth with physical and developmental disabilities*
Westmoreland	Access to computers and technology, including internet	Employment opportunities for teens	After school programs,* Bullying/relationship violence prevention & education,* Financial skills training,* Quality education*

**Asterisks denote a tie*

Table 8 Unmet Needs for Children and Youth, by County

Gaps in Ensuring Older Adults Can Age in Place

*Categories in **blue** are in the top three for the 10-county service area as a whole, categories in **orange** are in the top three for some counties but not the entire region*

Locality	Category with the Most First Choice Votes	Category with the Second-Most First Choice Votes	Category with the Third-Most First Choice Votes
10-County Service Area	Affordable home health care options including personal care, chore services, pharmacy pick-ups, chronic condition care management	Adult day care	Housing repairs/modifications for seniors to live in safe housing conditions
Essex	Affordable home health care options	Housing repairs/modifications for seniors to live in safe housing conditions	Access to healthy meals,* Adult day care,* Assisted living options*
Gloucester	Affordable home health care options	Access to healthy meals	Adult day care,* Affordable housing*
King & Queen	Adult day care	Affordable home health care options	Affordable housing
King William	Affordable home health care options	Access to healthy meals	Assisted living options
Lancaster	Affordable home health care options	Access to healthy meals	Adult day care,* Assisted living options*
Mathews	Affordable home health care options	Adult day care	Access to healthy meals,* Assisted living options*
Middlesex	Affordable home health care options	Housing repairs/modifications for seniors to live in safe housing conditions	Access to healthy meals
Northumberland	Affordable home health care options	Adult day care*	Caregiver support & respite services,* Transportation*
Richmond	Adult day care	Housing repairs/modifications for seniors to live in safe housing conditions	Affordable home health care options
Westmoreland	Affordable home health care options	Access to healthy meals*	Housing repairs/modifications for seniors to live in safe housing conditions*

**Asterisks denote a tie*

Table 9 Gaps in Ensuring Older Adults Can Age in Place, by County

What are your community's greatest needs with regard to housing?

*Categories in **blue** are in the top three for the 10-county service area as a whole, categories in **orange** are in the top three for some counties but not the entire region*

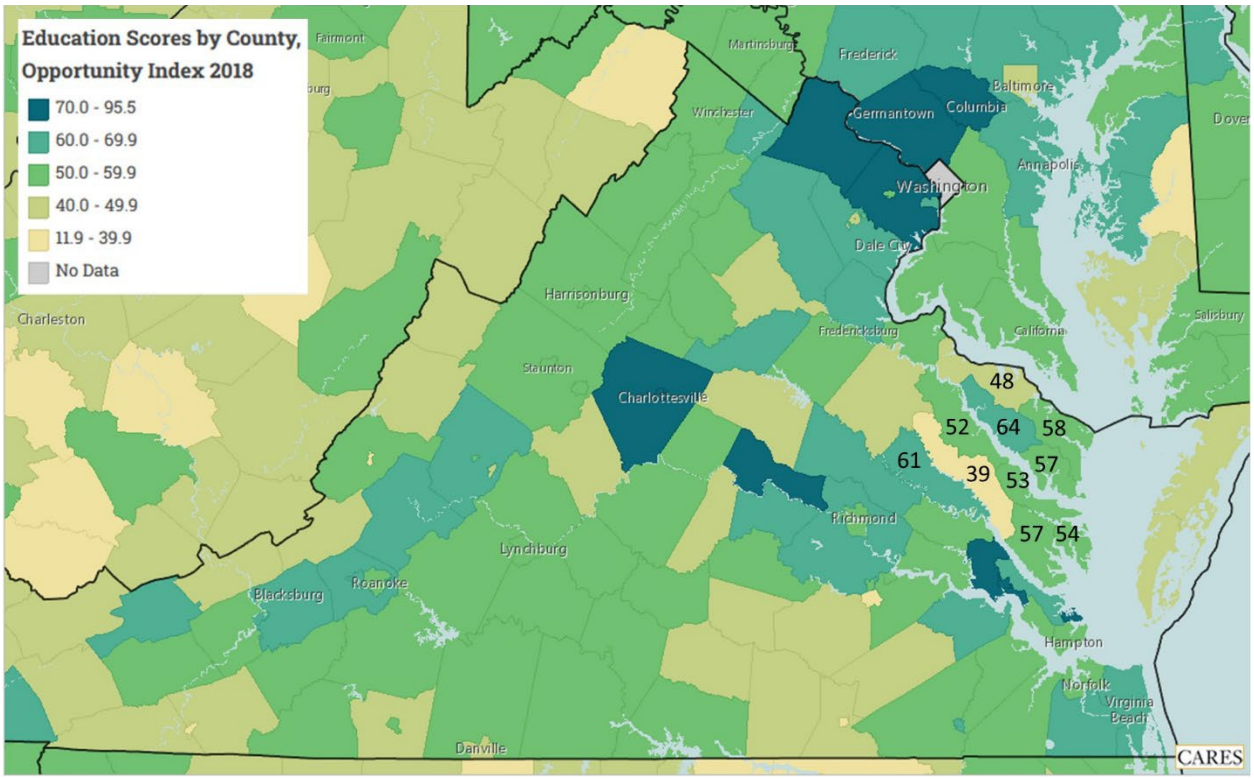
Locality	Category with the Most First Choice Votes	Category with the Second-Most First Choice Votes	Category with the Third-Most First Choice Votes
10-County Service Area	Affordable housing for older adults	Assistance with property repair/maintenance	Housing assistance for low-income families
Essex	Affordable housing for older adults	Assistance with property repair/maintenance	Education about financing options for homeownership,* Housing assistance for low-income families*
Gloucester	Affordable housing for older adults	Assistance with property repair/maintenance	Affordable workforce housing,* Housing options for people/families experiencing homelessness*
King & Queen	Affordable housing for older adults	Assistance with property repair/maintenance	Affordable workforce housing
King William	Affordable housing for older adults	Assistance with property repair/maintenance	Education about financing options for homeownership,* Programs that ensure homes have running water and indoor plumbing*
Lancaster	Affordable housing for older adults	Assistance with property repair/maintenance	Affordable workforce housing,* Housing assistance for low-income families*
Mathews	Affordable housing for older adults	Assistance with property repair/maintenance*	Code enforcement for removing dilapidated houses*
Middlesex	Affordable housing for older adults	Assistance with property repair/maintenance	Code enforcement for removing dilapidated houses
Northumberland	Affordable workforce housing	Affordable housing for older adults*	Housing assistance for low-income families*
Richmond	Affordable housing for older adults	Assistance with property repair/maintenance	Housing assistance for low-income families
Westmoreland	Assistance with property repair/maintenance	Affordable housing for older adults	Housing options for people/families experiencing homelessness

**Asterisks denote a tie*

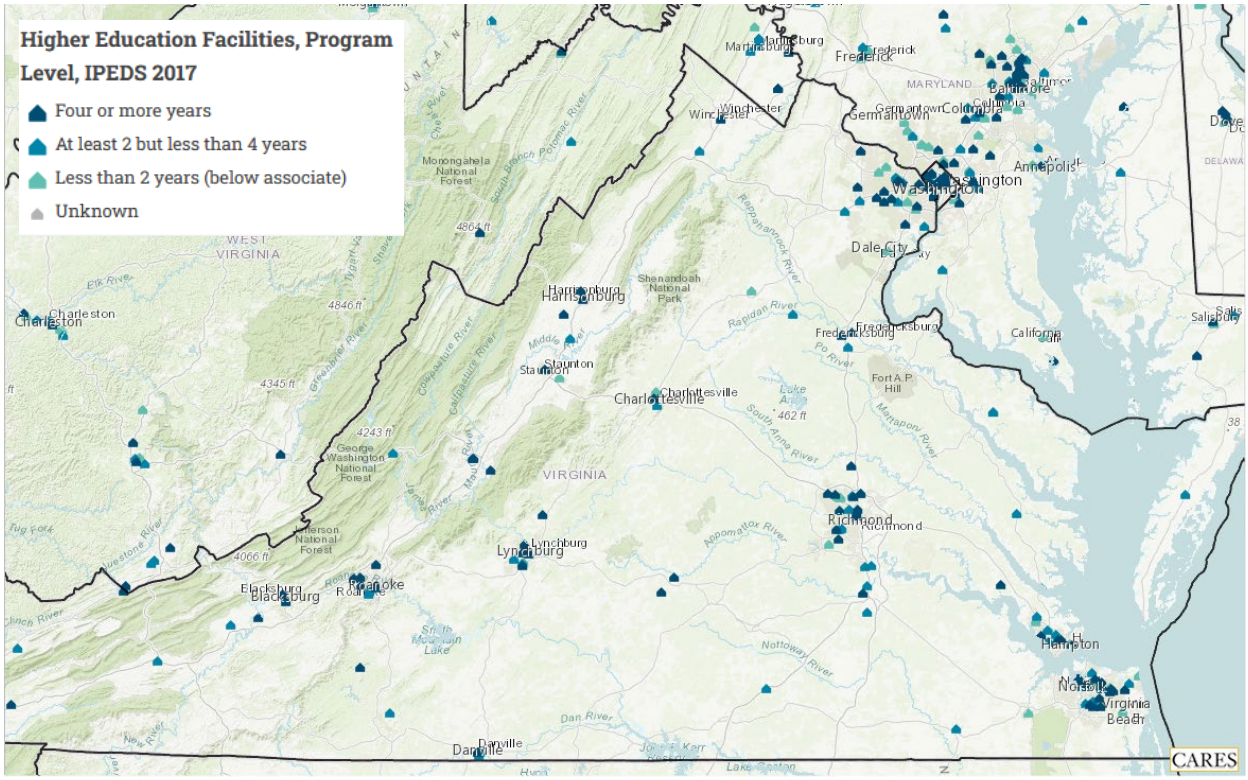
Table 10 Housing Needs, by County

Appendix B

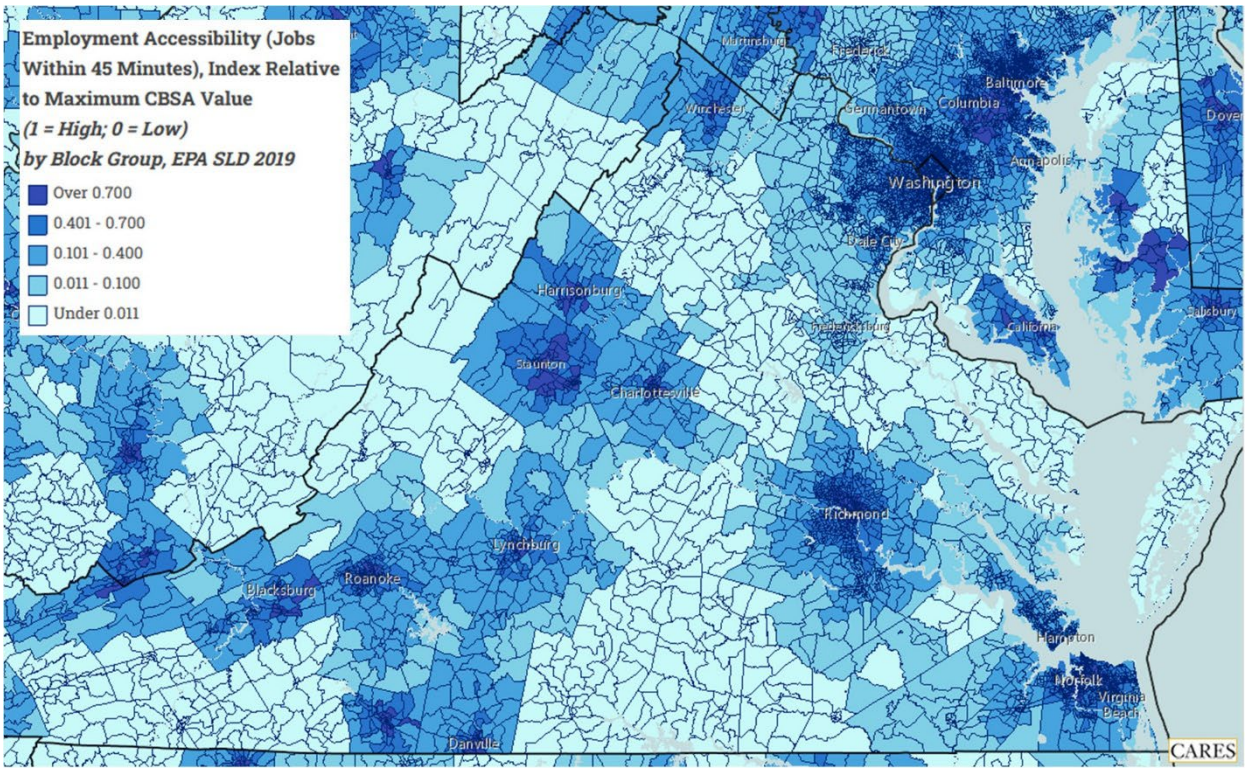
Appendix B contains maps referenced in the Demographic Profile and Survey Results sections of the Community Needs Assessment report.



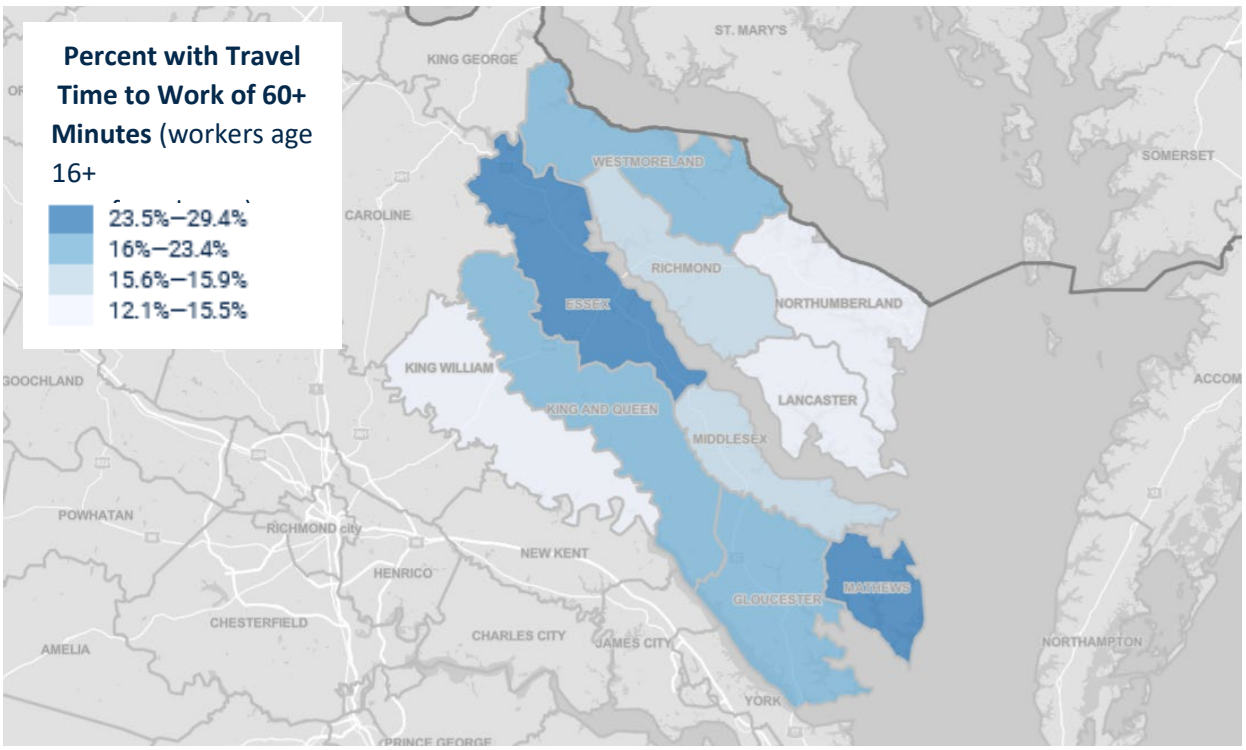
Map 1 Education Opportunity Index. Image from CARES HQ, https://careshq.org/map-room/?ids=28029, retrieved March 9, 2022.



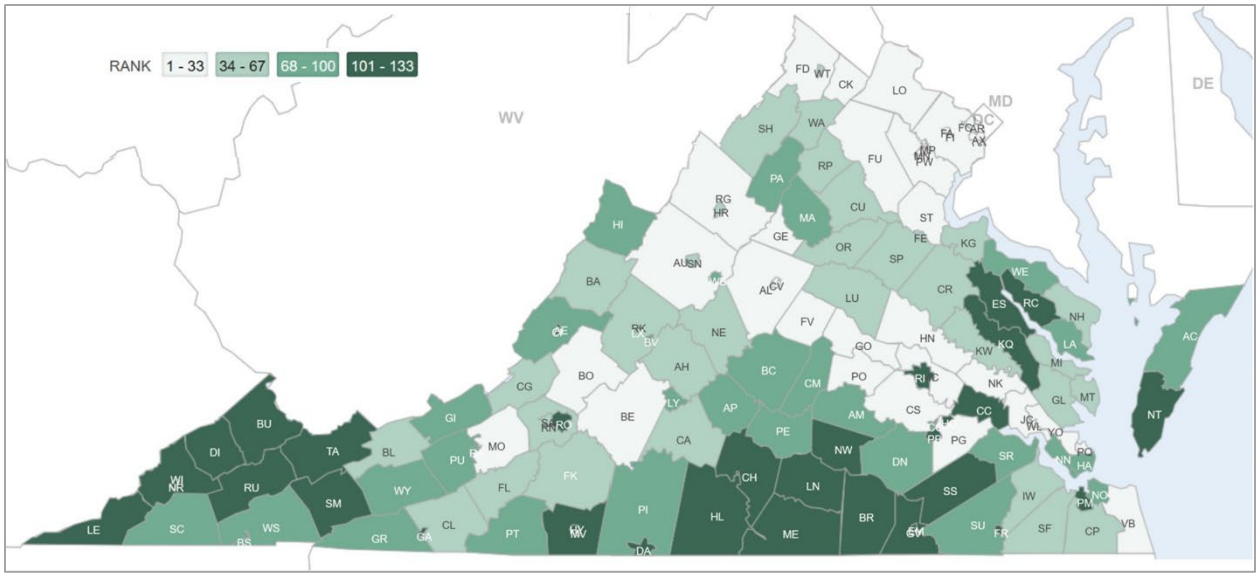
Map 2 Higher Education Facilities. Image from CARES HQ, https://careshq.org/map-room/?ids=25258, retrieved March 8, 2022.



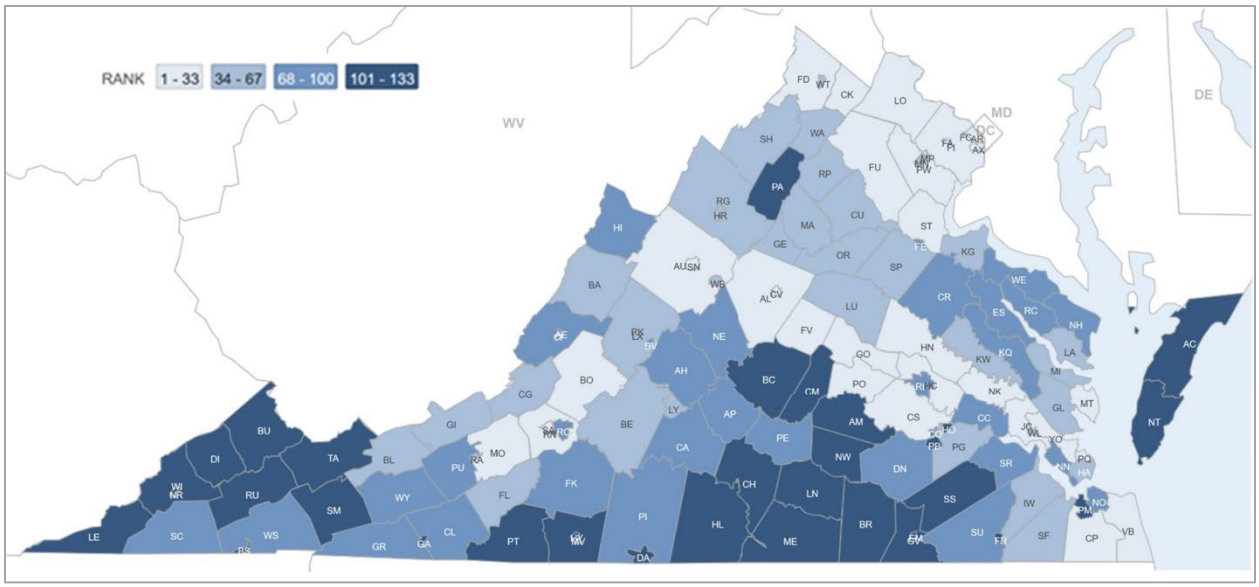
Map 3 Employment Accessibility Index. Image from CARES HQ, https://careshq.org/map-room/?ids=39821, retrieved March 9, 2022.



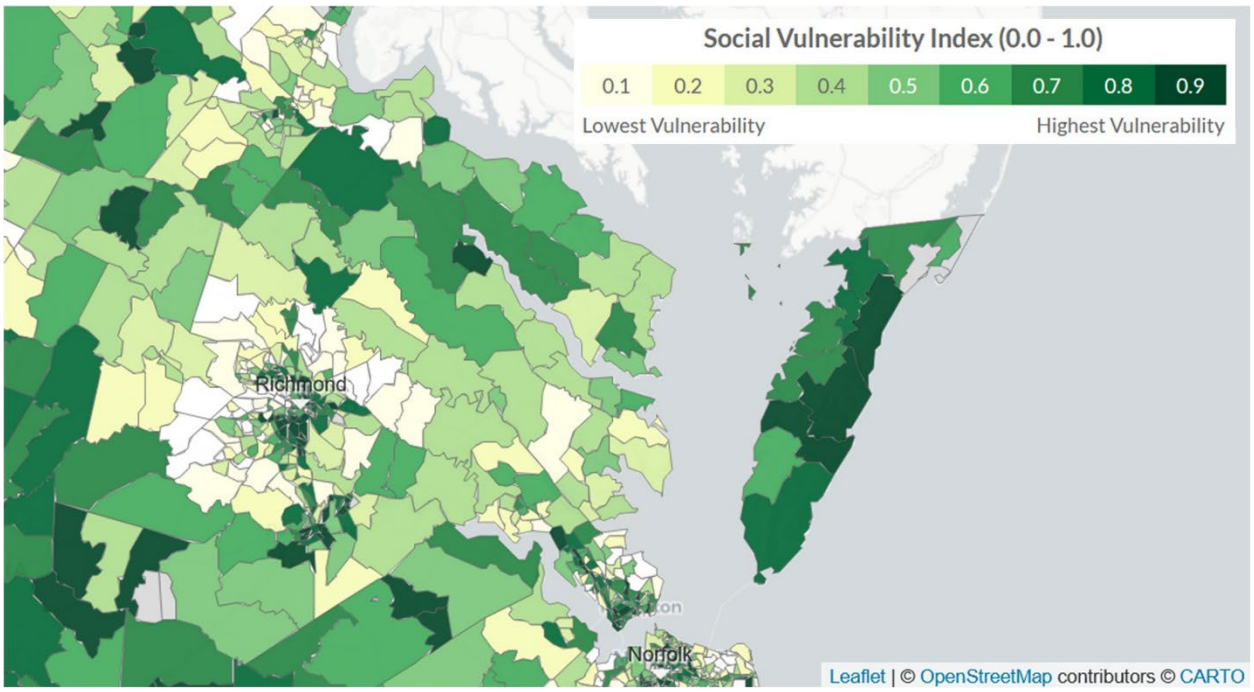
Map 4 Workers Commuting 60 or More Minutes. Image from American Community Survey, Table S0801 Commuting Characteristics by Sex, 2020: ACS 5-Year Estimates, retrieved March 17, 2022.



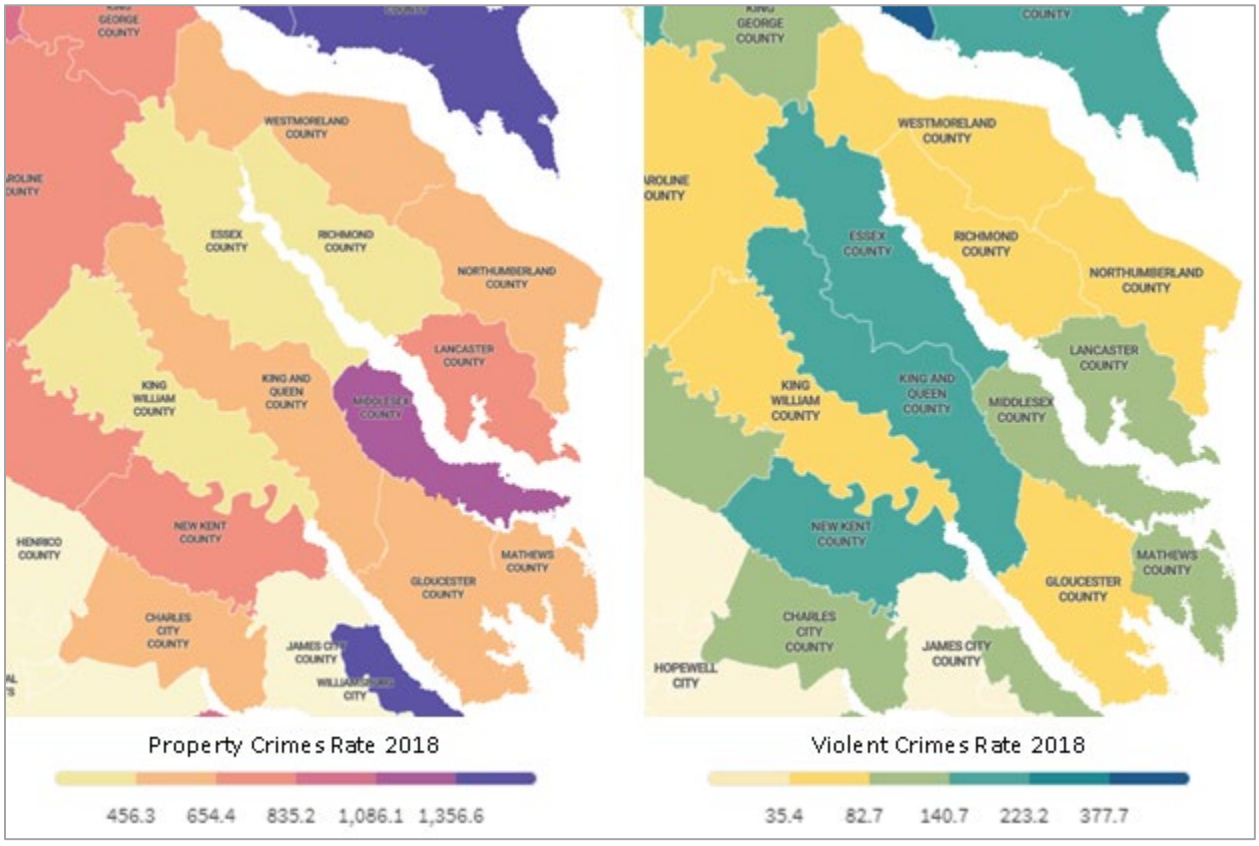
Map 5 Health Outcomes. Image from University of Wisconsin Population Health Institute, County Health Rankings & Roadmaps. https://www.countyhealthrankings.org/app/virginia/2021/overview, retrieved Mar. 21, 2022.



Map 6 Health Factors. University of Wisconsin Population Health Institute, County Health Rankings & Roadmaps. https://www.countyhealthrankings.org/app/virginia/2021/overview, retrieved Mar. 21, 2022.



Map 7 Social Vulnerability Index. Image from vpap.org, Mapping Virginia's Vulnerable Areas, https://www.vpap.org/visuals/visual/virginia-social-vulnerability-index-2018/, retrieved March 22, 2022.



Map 8 Crime Rates. Images from Social Explorer, https://www.socialexplorer.com/76dff1f4a8/view and https://www.socialexplorer.com/423288f7a7/view, retrieved March 28, 2022.

Appendix C

The tables below contain the open-ended responses received from people who participated in the 2021 Community Needs Assessment Survey. Comments are grouped according to topic and county, and appear verbatim.

Survey respondents who answered YES to the question, *'Do issues with transportation regularly prevent you from doing what you need or want to do?'* were asked to explain the transportation barriers they are experiencing.

Topic	Please explain the transportation barriers you are experiencing.	County
No car or don't drive	Don't have drivers licenses, also doesn't own a car. It's hard to get wherever you need to get.	Essex
	I have no convenient means of transportation	Essex
	Do not have a car, don't drive, my two sisters take me to the doctor appointment and shopping if I need to go.	Gloucester
	Don't drive - don't own a car	Gloucester
	Have glaucoma can not drive - need rides to and from Drs. - Medications Pick Up - Etc.	Gloucester
	I do not drive, family cannot always help. Brother past away 10/17/2021 / sister verry sick (termal) so I have hard time, ride to pick up meds, store, doctor	Gloucester
	No car and need to get license straight	Gloucester
	Do to medical problems I no longer drive. I need help getting around etc. walking, getting medicine, going for appointments, going our for a meal	Mathews
	Vision problems and I don't drive	Mathews
	I don't have a vehicle.	Middlesex
	No car.	Middlesex
	no car	Richmond
	Not able to drive, so have to pre-arrange transportation which can be difficult.	Westmoreland
Road condition	Too few signposts make it difficult to divide roads	Gloucester
	The road is rough	King & Queen
	The road surface is not well built and there is a lot of rubble	Lancaster
	The road is a bit narrow, making it difficult to get through when there are too many cars	Mathews
	The road surface is old and has many potholes	Northumberland
	There is a lot of garbage on the road that nobody cleans, which affects the traffic very much	Northumberland

Topic	Please explain the transportation barriers you are experiencing.	County
Scheduling issues	After giving appt time in advance cannot get PU or PU is very late on many occasions	Gloucester
	Bay Transit never picks me up on time. Sometimes they forget about picking us up. They don't help the seniors get on or off the bus.	Gloucester
	I don't get the recording at night. So I don't no what my time is for morning of evening pickup is.	Gloucester
	I'm told that if I'm to catch a ride to the Humane Society, I have to make a phone call - I'm post lingually deaf and the TTY is often too much of a hassle at odd times in my assist-living facitilty.	Gloucester
	Requesting a ride for the doctors appointments (in advance 5-7 days head - then on the day of appt getting told there is no ride available. Insurance paid rides are the same. Also, waiting extra hours for bus to return to you up to a 4-5 hr wait for them.	Gloucester
	Several times called Bay Transit with unavailable ride this city of Gloucester needs more transportation options.	Gloucester
	Sometimes I need to go somewhere and all in my family are at work or sick and I have to cancel. I would like to be able to call transportation and get there on the spur of the moment not days ahead.	Gloucester
	I use a scooter so most can not take me places. If the doctor want to see me that day because I am sick I have to tell him I can't come. It takes basicly 5 days to set up with WATA or Rides.	James City
	Always have to work around everyone else schedule and expensive	King & Queen
	There are so few buses that it takes almost half an hour to wait for one	King & Queen
	Even though we have Bay Transit and also a few other programs, the need to have to schedule rides days/ even weeks in advance is way to much.	Lancaster
	For Veterans at times getting to VA facilities when unable to drive. Sometimes when I have eye appointment it's very difficult to drive back. I had a ride a few years ago. The gentleman got me there 2 hrs late. He forgot to pick me up on time.	Middlesex
	One time left off for court and didn't come back, had to have someone come take me home. Or take a ride over the ? for a free ride.	Northumberland
	Area too spread out for ready access to public transportation . Also reliability!	Westmoreland

Topic	Please explain the transportation barriers you are experiencing.	County
Service area and hours	Weekends & evening transportation needed	Essex
	I need to go to Williamsburg for hearing but the antheum drivers won't take me	Gloucester
	I no longer can drive. Can't go out to shops or entertainment venues. Weekends there is no service	Gloucester
	Yes, I need rides outside of Gloucester for medical appointments. I drive around Gloucester but am not able to drive on major highways.	Gloucester
	I am still ale to drive to Dr. appointments but have trouble finding rides to appointments in Richmond (VCU doctors) which are vital to my health.	James City
	I would like to go to events that take place in the evening or in areas not in King + Queen and I am not able to do so.	King & Queen
	Access to transportation to medical needs that are not local; and a way to get to things after dark.	Lancaster
	Limited services	Lancaster
	Can't always be gets rides when need it and never available on weekends	Mathews
	Bus transportation to urban areas so I don't have to drive there. (commercial services)	Northumberland
Traffic	I often get stuck in traffic jams, which annoys me	Essex
	have to be very careful with old people, so the traffic is not very good	Essex
	Long traffic jams affect working hours	Essex
	闯红灯 (translation: running a red light)	Essex
	At work, taking care of the elderly, going out. The traffic is really inconvenient	Gloucester
	I often meet people who don't watch traffic	King William
	Long traffic jam affects the time to pick up children	King William
	Too crowded	King William
	Traffic jam at rush hour	Lancaster
	I often get stuck in traffic jam, which makes me lose much time	Mathews
	If the elderly with special conditions will be particularly inconvenient. The traffic is terrible	Richmond
	I'm often stuck in traffic and late	Richmond
	This is especially inconvenient for the physically impaired elderly, on busy roads	Richmond
	Traffic control	Richmond
	Traffic jams during rush hour	Richmond
	Traffic is not convenient, traffic jam	Westmoreland

Topic	Please explain the transportation barriers you are experiencing.	County
Other	It is very inconvenient to take care of the elderly	Essex
	Access to Uber or cabs	Gloucester
	Can cause a lot of trouble,	Gloucester
	There is no transport	Gloucester
	I became ill at the Walmart in Tappahannock. I was transported to the Tappahannock Hospital. I had no way to get back to my vehicle.	King & Queen
	Too much aging makes our vehicles particularly difficult to implement	King & Queen
	I can't walk. It's far from the bus stop	King William
	Will affect travel time, resulting in time delay	King William
	I'm a little far by bus	Lancaster
	Inconvenient travel, no transportation	Lancaster
	It is inconvenient to travel without a dedicated bus	Lancaster
	Distance.	Mathews
	Have to use a jazzy on power chair in order to leave home. Travel with an aide/companions.	Mathews
	I am not aware of all what transportation there is in the county. Not much publication of such	Mathews
	Failure to go to hospital in time	Middlesex
	I have Medicare, but I don't know if they would help me.	Middlesex
	no bike lanes and pedestrian walks for people.	Middlesex
	Some people are going shopping going out about 2 or 3 times per week while others are working, volunteering I don't get once a week	Middlesex
	Can't get to work.	Northumberland
	Having transportation to doctors and often important needs.	Northumberland
	It's hard to get a taxi where I live	Northumberland
	Not me personally but I work in the schools and library - Those who do not can not drive experience issues	Northumberland
	Since Bay Transit, things are MUCH better.	Richmond
	I often miss the bus	Richmond
	My clients aren't able to meet many of their goals because of lack of reliable transportation to their work or to daycare and so it makes it harder to support them in meeting their goals.	Richmond
	we need buses for transportation to and from doctors appointments and etc. we Septa Buses.	Richmond
	I often can't find the bus to the hospital	Westmoreland
	The transportation barriers for clients; providers are often out of the area, there is no reliable public transportation, and those with their own vehicles cannot afford repairs and gas. It prevents our agency from getting our clients the services they need, assisting in getting clients jobs and helping them maintain them, and getting families to and from medical and mental health services.	Westmoreland
	There are few dedicated bike routes	Westmoreland

At the end of the survey, respondents were invited to add comments. Please note that staff have reached out, if possible, to participants who indicated an urgent need related to health or safety.

Topic	Do you have additional comments you would like to add?	County
Compliments	Always thank you all for the service you provide.	Essex
	Bay Aging does a fantastic job assisting the communities, keep up the good work!	Essex
	Your entire staff is amazing and give the community hope for a brighter future. Angels on Earth if you ask me!!!	Essex
	Thanks!	Gloucester
	The entire staff I've had the pleasure of working with at Bay Aging have been truly caring helpful people and my family is grateful as we weather our hardships for such impeccable treatment.	Homeless
	Love what I hear about Bay Aging	Lancaster
	Thank You for All You Do!!	Lancaster
	Thank you for providing the opportunity for this input.	Lancaster
	I believe bay aging plans a critical role in the surrounding areas with assistance programs for the disabled, seniors and etc. Without bay aging I do believe the community would be desperate for assisntace for its seniors and people of need.	Mathews
	Quite Satisfied!	Mathews
	Excellent Service!	Middlesex
	I have a wonderful lady helping me. I think there should be more help more the older people.	Middlesex
	Thank you everyone?	Middlesex
	Thank you for all you donforbthe community.	Middlesex
	I think these survey options were very thorough. Kudos to BayAging for allowing for community input.	Westmoreland
	Thank you for your services.	Westmoreland
Health	Help w/ hearing aids + dental	James City County
	Hope the community more psychological service places	Lancaster
	Attracting more specialization heart services is very important.	Lancaster
Meals on Wheels	No so far so good. I enjoy the meals on wheels	Essex
	I am verry bleste to receve the help as new person this last year 1/2 for food mostly help will pay brother win his stage 4 cancer. The help no just him bus us to wondfull couple that bring our food	Gloucester
	You have a very good program with Meals on Wheels. Thanks for everything.	King & Queen
	I'm thankful for meals on wheels + the delivery people	Mathews
	I couldn't find where to obtain Meals on Wheels for an elderly neighbor.	Westmoreland
	Make more activities to get food	Westmoreland

Topic	Do you have additional comments you would like to add?	County
Housing	I would like to get in contact with someone who can help me build a walk-in shower, very important to me as I can only use the sink to bathe	Essex
	I'm so grateful to have an apartment at Parker View. Our manager and maintenance man are always prompt, helpful and kind. I could never afford even the least expensive place at this stage of life due to unforeseen circumstances. There is a feeling of safety and security here. There is also a lovely camaraderie with the residents. Angie's newsletter gives us valuable information and some fun puzzles. Thanks to Bay Aging and all the caring, really necessary services they provide.	James City
	IPR HOUSING PROGRAM	Lancaster
	It would be be nice for the insultion in side the roof took out and replaced and spary for mold	Mathews
	I would just like more information on weatherization. Also dental programs for seniors. For major work it cost me 7,000 dollars at the time it really set me back.	Middlesex
	Housing for people with disabilities under 62. More Bay Aging housing in other towns that don't have them. Mental health doctor's down here.	Northumberland
	In particular, Bay Housing has a long way to go with the homelessness case management services. They have no 24/7 hotline, no access to emergency homelessness services, and it is really hard to get in touch with the case managers when you need to. It is my hope that Bay Aging homelessness coordinators will become better at collaborating and communicating with other service providers and make the needs of the clients a priority.	Richmond
	Need assistance with sink water wont go down properly.	Richmond
	Financing better housing and maintenance	Richmond
Services for older adults	Add communities and a range of welfare programs that can specifically serve the elderly	Essex
	There is no affordable assisted living. I may need it + cannot pay $4,000 a month.	Gloucester
	Adult day care could be better	King & Queen
	Services for the elderly can offer more	King & Queen
	How can we position resource availability and access for our aging in place population.	Lancaster
	Hope to increase some elderly care services	Mathews
	I want to join a group that plays dominoes + cards. I'm 94 and alert to games.	Mathews
	Hopefully the community can provide better adult day care	Westmoreland
	I am a 70 year old woman (widow with no children) and looking to sell my home and find a place live in as I get older. Inthe middle financially too much for Medicad not enough for fancy assisted living places	Westmoreland
	The hope is to bring more benefits to the elderly	Westmoreland

Topic	Do you have additional comments you would like to add?	County
Trans-portation	all of these are nice to have and thank the lord for them. I go on Bay Transit	Gloucester
	Bay Transit work very hard to get you scheduled for pick up but if a worker is sick seems like there is no bus available or so many folks to get picked up hinders punctuality need more working buses or more employees	Gloucester
	had to wait at eye doctor office 1 hr and ride out of way home	Gloucester
	Had to wait over 2 hr to get back home	Gloucester
	I would like to get a recording at night so I no what's going on. I get concerned when I didn't get a response.	Gloucester
	Please BE ADVISED that I am INDIGENT. The free rides are quite useful for me. I walked the full two miles to the GHS Sod Exp in July and found that nothing was going on.	Gloucester
	My county is wonderful, I love living here, but public transit is so important and we have none.	King William
	I just wish there were bus routes in Kilmarnock. As well places to sit while your waiting on the bus!!!	Lancaster
	1) Bay Aging has been very helpful in the community 2) Year round Trolley service 3) It would be nice to have a community ctr. for seniors to gather.	Middlesex
	Better transportation availability with more hours of operation, Uber service for after hours transport from hospitals.	Middlesex
	Increase access to Uber and Lyft and add the ability for the county to pay for a portion of the ride if you need help with income. But NOT based on income because I always fall through the cracks.	Richmond
	Respondent added..."+Warsaw" to question number 16 answer 'Create express bus routes between Gloucester, Tappahannock, and Kilmarnock'	Richmond
	Yes transportation is a big issue in virginia	Richmond
	Yes, I would like to have transportation for Saturday. It will be great for a lot of people for shopping.	Richmond
	Excellent bus drivers, courteous, knowledgeable	Westmoreland
Youth services	Some places for children's services can be built in the community	Gloucester
	You can install some children's play facilities in the community, so that children can play happily in the community	King & Queen
	Something about the welfare of children going to school	King William
	Hope the community can help watch the children together	Lancaster

Topic	Do you have additional comments you would like to add?	County
Other	Desperately need help with my driveway. Rescue squad said they can't come in my drive.	Essex
	More benefits	Essex
	I hope it help people to live a better life and those people will be there when we need there services what ever it will be later on.	Gloucester
	Peace in the community.	Gloucester
	King & Queen County is in need of a central place for people to go to for help other than Social Services. The Social Services department does a good job helping the community. There are some people who do not qualify for services. These are the people we need to help. Some years ago I tried to start "The Center for King & Queen". The purpose of this center was to help those who could not get services anywhere else. I had businesses in the area willing to help those in need. Although we had established a board of directors, etc. the center did not happen. Please consider funding this center. I believe we need it now more than ever. I am willing now, as I was then, to work as a volunteer only.	King & Queen
	Add more benefits to those on lower incomes	King William
	Good. We need to improve the hygiene	King William
	It's pretty good	King William
	Adult clients can provide some good care	Lancaster
	I didn't realize that BA had BA Home Care. I will seek more info on this.	Lancaster
	Yes just would like to see more help & opportunity in our community and all around where things will not be a struggle for people & Better job, better pay , low housing, help for the poor & needy & to keep our community safe and clean & good health care to all and for low income familys, people, children, have business in our community like healthcare, dentists, eyecare, clothing stores, eating places like buffets, a mixture mall, discount stores, more activities places & things to go and do for adults & children, the price of things will get lower.	Lancaster
	I hope I can make some age-appropriate tools to assist people in sports	Mathews
	I enjoy living here, its great!	Middlesex
	You can optimize the environment in the community and plant more plants	Middlesex
	Consider opening a Bay Aging facility in Northumberland Co + Heathsville.	Northumberland
	High speed internet is needed, additional retailers, grocery store options, etc. As a newcomer to this area, I did not know of these provided services of the Bay Aging organization.	Northumberland
	Our community would benefit from an emphasis in improving the disintegration of the nuclear family, lack of importance of education, and lack of stable families.	Northumberland
	Need to increase employment	Richmond
	Some fitness facilities can be installed in the community	Richmond
	While I have not personally used Bay Aging services, I have worked with Bay Aging for over 24 years while working with Social Services in Westmoreland.	Westmoreland

Appendix D

Below is a copy of Bay Aging's 2021-2022 Community Needs Assessment Survey.

BAY AGING
DIGNITY AT EVERY AGE

Bay Aging is conducting a Community Needs Assessment and we invite you to participate by answering the questions below. Your opinion is important! Your confidential responses about the quality of life in your community will help us develop a strategic plan to distribute resources and address problem areas. Please return your completed survey by Dec. 15, 2021 – see return options below, or give your survey to any Bay Aging employee. To take the survey online, scan the QR code or visit https://www.surveymonkey.com/r/C9WVZ8Q. Questions? Call us at 804-758-2386.

1. What county do you live in? (choose one)
   - ☐ Essex
   - ☐ Gloucester
   - ☐ King and Queen
   - ☐ King William
   - ☐ Lancaster
   - ☐ Mathews
   - ☐ Middlesex
   - ☐ Northumberland
   - ☐ Richmond
   - ☐ Westmoreland
   - ☐ Other _____

2. How do you usually get information about your community and community events? (check all that apply)
   - ☐ Community Magazine
   - ☐ Email
   - ☐ Internet
   - ☐ Newspaper
   - ☐ Radio
   - ☐ Social Media (Facebook, Twitter, etc.)
   - ☐ TV or Local Cable

3. I am satisfied with:

	AGREE	NOT SURE	DISAGREE
Economic opportunities available here	☐	☐	☐
Health care services here	☐	☐	☐
Housing options available here	☐	☐	☐
Local schools	☐	☐	☐
Networks of support for people in need/crisis	☐	☐	☐
Public transportation here	☐	☐	☐
Quality of life here	☐	☐	☐
Raising children here	☐	☐	☐
Retiring here	☐	☐	☐

FIVE RANDOMLY CHOSEN SURVEY RESPONDENTS WILL RECEIVE $50 WALMART GIFT CARDS!

Survey Drop-Off Locations

You may drop off your completed survey at these Bay Aging offices, Mon.-Fri., 8:30 a.m.-4:30 p.m.

Gloucester	5959 Fiddlers Green Road
Montross	17111 Kings Highway
Urbanna	5306 Old Virginia Street
Warsaw	111 Commerce Parkway

Mailing Address

Be sure to mail early to arrive by Dec. 15

Bay Aging
Attn: Saidah Israel
PO Box 610
Urbanna, VA 23175-0610

Scan the QR Code to Take the Survey on Your Smart Phone

1

4. Choose the THREE MOST IMPORTANT factors that you believe contribute to high quality of life in your community with number 1 being the most important to you. (write the numbers 1, 2 and 3 beside your top choices)

___ Affordable housing
___ Arts and cultural events
___ Availability of health care services
___ Clean, healthy environment
___ Good place to raise children
___ Good schools
___ Jobs with adequate wages
___ Long-term services and supports (assistance with eating, bathing, dressing, etc.) for people who are aging, chronically ill or functionally limited
___ Low crime/safe neighborhoods
___ Parks and wellness/exercise options
___ Public transportation
___ Reliable internet/Wi-Fi service

5. What do you believe are the top THREE health needs in your community, with number 1 being the highest need. (write the numbers 1, 2 and 3 beside your choices)

___ Access to healthy food options
___ Affordable health services
___ Children's health services
___ Dental care options
___ Facilities for physical activities/exercise and health education
___ Health care assistance for seniors
___ Health care assistance for veterans
___ Health care options for uninsured/underinsured people
___ Increased number of providers
___ Mental/behavioral health services
___ Specialty care (advanced care and treatment by a specialist)
___ Substance abuse prevention and treatment services
___ Telehealth services
___ Transportation to access health services

6. In your opinion, where are the service gaps in mental/behavioral health services in your community? Choose your top THREE with number 1 being the largest gap. (write the numbers 1, 2 and 3 beside your choices)

___ Adequate number of providers
___ Affordable mental/behavioral health services
___ Awareness, education and prevention
___ Resources to find services
___ Specialty care (advanced care and treatment by a specialist)
___ Substance abuse prevention and treatment
___ Transportation to access services

Prefer to take this survey online? Visit https://www.surveymonkey.com/r/C9WVZ8Q or scan the QR code.

7. Where is the one place you go most often when you are sick? (choose one)

- ☐ Free clinic/charitable clinic
- ☐ Hospital emergency room
- ☐ Medical clinic
- ☐ My doctor/primary care physician
- ☐ Telehealth consultation
- ☐ Urgent care
- ☐ Other _____

8. What are the top THREE social issues of most concern to you in your community, with number 1 as your greatest concern. (write the numbers 1, 2 and 3 beside your choices)

- ___ Child abuse
- ___ Climate/environment
- ___ Crime (property crime, violent crime)
- ___ Cyber crime (scams, phishing, ID theft, etc.)
- ___ Domestic violence
- ___ Drug or alcohol abuse
- ___ Elder abuse
- ___ Food insecurity
- ___ Homelessness
- ___ Manufacturing/selling drugs
- ___ Poverty
- ___ Systemic racism

9. What social issues do you believe are not being adequately addressed in your community? Choose your top THREE with number 1 as the biggest gap in your community. (write the numbers 1, 2 and 3 beside your choices)

- ___ Access to GED classes and adult education
- ___ Affordable child care
- ___ Affordable housing
- ___ Availability of mental/behavioral health services
- ___ Availability of transportation
- ___ Better enforcement of laws
- ___ Employment opportunities and job training
- ___ Housing options for people/families facing homelessness
- ___ Literacy and English as a second language classes
- ___ Options for arts and entertainment
- ___ Services for domestic violence survivors and their families
- ___ Services for older adults
- ___ Services for veterans
- ___ Substance abuse prevention and treatment

10. In your opinion, how well does your community generally meet the needs of children and youth? Choose the one best response for each.

	EXCELLENT	GOOD	FAIR	POOR	DON'T KNOW
Access to affordable child care	☐	☐	☐	☐	☐
Access to dental services	☐	☐	☐	☐	☐
Access to health care services	☐	☐	☐	☐	☐
Access to mental/behavioral health services	☐	☐	☐	☐	☐
College and career preparation	☐	☐	☐	☐	☐
Employment opportunities for teens	☐	☐	☐	☐	☐
Needs of children with disabilities	☐	☐	☐	☐	☐
Parent support and training	☐	☐	☐	☐	☐
Quality education	☐	☐	☐	☐	☐
Recreational and physical exercise opportunities	☐	☐	☐	☐	☐
Violence and bullying prevention	☐	☐	☐	☐	☐
Volunteer opportunities for teens	☐	☐	☐	☐	☐

11. What do you believe are the top THREE unmet needs for children and youth in your community, with number 1 being the largest need in your community for this age group.

___ Access to computers and technology, including internet
___ Access to higher education and vocational training
___ After school programs
___ Appropriate services for youth with physical and developmental disabilities
___ Bullying/relationship violence prevention and education
___ Cultural enrichment opportunities
___ Employment opportunities for teens
___ Financial skills training
___ Food security
___ Mentoring and tutoring options
___ Obesity prevention
___ Quality education
___ Recreational and physical activities
___ Substance abuse prevention and treatment
___ Youth centers

12. Where in your community do you believe gaps exist in ensuring older adults can age in place? Choose your top THREE with number 1 being what you consider the largest gap in service in your community for older adults.

___ Access to healthy meals
___ Adult day care
___ Affordable home health care options including personal care, chore services, pharmacy pick-ups, chronic condition care management
___ Affordable housing
___ Assisted living options
___ Caregiver support and respite services
___ Education about insurance and health benefits
___ Housing repairs/modifications for seniors to live in safe housing conditions
___ Long-term services and supports (assistance with eating, bathing, dressing, etc.)
___ Mental/behavioral health services including substance abuse counseling
___ Transportation

13. What are your community's greatest needs with regard to housing? Choose your top THREE with number 1 being the most important.

___ Affordable housing for older adults
___ Affordable workforce housing
___ Assistance with property repair/maintenance
___ Code enforcement for removing dilapidated houses
___ Education about financing options for homeownership
___ Higher quality rentals
___ Housing assistance for low-income families
___ Housing options for people/families experiencing homelessness
___ Programs that ensure homes have running water and indoor plumbing
___ Rehabilitation/reconstruction of vacant homes
___ Weatherization of homes

14. Do issues with transportation regularly prevent you from doing what you need or want to do?

☐ Yes
☐ No

15. If you answered YES, please explain the transportation barriers you are experiencing. *(if you need more space, see page 8)*

_____

_____

_____

16. As it relates to transportation, what is most important to you? Choose your one best response for each statement.

	IMPORTANT	NICE TO HAVE	NOT IMPORTANT
Access to a bike route system as a transportation option	☐	☐	☐
Access to public transportation	☐	☐	☐
Access to ride share or other carpooling service	☐	☐	☐
Create express bus routes between Gloucester, Tappahannock and Kilmarnock	☐	☐	☐
Expand transportation to specialized medical services outside the Middle Peninsula and Northern Neck	☐	☐	☐
Increase access to transportation for people with disabilities and special needs	☐	☐	☐
Increase number of public transportation routes	☐	☐	☐
Increase hours/days of operation for public transportation	☐	☐	☐
Offer bus routes to employment centers for commuters	☐	☐	☐
Pedestrian-friendly system to make areas more safely walkable	☐	☐	☐
Transportation on demand (like Uber/Lyft service)	☐	☐	☐

17. In a typical month, how difficult is it for you to cover your expenses and pay all your bills? (choose one)

☐ Easy ☐ Moderate ☐ Difficult

18. How well do you believe your community addresses economic security? Choose your one best response for each statement.

	EXCELLENT	GOOD	FAIR	POOR	DON'T KNOW
Access to caregiver services/adult day care/home care	☐	☐	☐	☐	☐
Access to transportation	☐	☐	☐	☐	☐
Assistance with searching for employment	☐	☐	☐	☐	☐
Availability of living wage jobs	☐	☐	☐	☐	☐
Availability of workforce development, vocational, and technical training to increase job skills	☐	☐	☐	☐	☐
Emergency assistance for food, rent, utilities	☐	☐	☐	☐	☐
Employment opportunities for older adults	☐	☐	☐	☐	☐
Options for financial education, budgeting classes, credit counseling	☐	☐	☐	☐	☐
Small business development support	☐	☐	☐	☐	☐

19. Are you a caregiver for an older adult or a person with disabilities or chronic conditions?

☐ Yes ☐ No

20. If you answered YES, what services related to caregiving do you need that you are currently unable to access? (check all that apply)

☐ Adult day care
☐ Caregiver counseling services
☐ Caregiver support groups
☐ Help with advance care planning
☐ In-home personal care
☐ Memory cafes/socialization opportunities
☐ Respite relief
☐ Other _____

21. What is your age? (choose one)

☐ 18-24
☐ 25-34
☐ 35-44
☐ 45-54
☐ 55-64
☐ 65-74
☐ 75-84
☐ 85 and older

22. What is your gender? (choose one)

☐ Female
☐ Male
☐ Other
☐ Prefer not to say

23. How would you describe yourself? (choose one)

☐ American Indian/Alaska Native
☐ Black/African American
☐ White
☐ Two or more races
☐ Asian
☐ Native Hawaiian/Pacific Islander
☐ Other race _____

24. Are you of Hispanic or Latino origin? (choose one)

☐ Yes ☐ No

25. Do you hope to remain in your current residence as you get older?

☐ Yes ☐ No

26. If you answered YES, what services would help you remain in your current residence as you age? (check all that apply)

- ☐ Assistance with activities of daily living (bathing, dressing, eating, etc.)
- ☐ Assistance with household chores and errands
- ☐ Assistance managing chronic conditions such as diabetes
- ☐ Check-ins and review of medications when transitioning home after a hospital stay
- ☐ Companionship
- ☐ Home repairs/modifications to increase accessibility and safety
- ☐ Meals on Wheels
- ☐ Technology such as video calls to stay connected with others
- ☐ Transportation to places like stores, pharmacies, and doctors' offices
- ☐ Other _____

27. Have you ever used Bay Aging's services, including Bay Transit, Bay Housing, Bay Health and Bay Home Care? *(See page 8 to learn about what we do!)*

☐ Yes ☐ No

28. If you answered YES, please describe your overall satisfaction with Bay Aging's services.

☐ Very Satisfied ☐ Satisfied ☐ Not Satisfied

29. Thank you for sharing your time and knowledge with us! Your responses are critical to forming plans of action for delivering appropriate services in your community. Do you have additional comments you would like to add? *(write on the back if you need more space)*

_____

_____

_____

Five randomly chosen survey respondents will receive $50 Walmart gift cards!

The drawing will be held on December 17, 2021. If you would like to be entered for a chance to win a $50 Walmart gift card, please enter your contact information below. Employees of Bay Aging are not eligible to win.

Name _____

Address _____

Address2 _____

City/Town _____

State _____ Zip code _____

Email address _____

Phone number _____

See page 1 for information on how to return your completed survey.

Extra space for answers to questions 14b, 24, or other comments:

Bay Aging provides transportation, housing, and healthy living services for people of all ages, primarily in the 10 counties of Virginia's Middle Peninsula and Northern Neck. To learn more, visit www.bayaging.org or call us at 800-493-0238.

BAY HEALTH A DIVISION OF BAY AGING	▪ Active lifestyle centers ▪ Adult day care ▪ Care transitions and care coordination ▪ Home and personal care ▪ Insurance counseling ▪ Long-term care ombudsman ▪ Meals on Wheels ▪ Senior employment training ▪ Veteran Directed Care ▪ Volunteer opportunities
BAY HOUSING A DIVISION OF BAY AGING	▪ Homeless Solutions ▪ Housing Choice Voucher Program (Middle Peninsula) ▪ Indoor Plumbing Rehabilitation & Emergency Home Repair ▪ Service-enriched Apartment Communities for Older Adults ▪ Weatherization Assistance
BAY TRANSIT A DIVISION OF BAY AGING	▪ Public transportation for all people – no income or age restrictions (children under 12 years old must be accompanied by an adult) ▪ Service on demand and deviated fixed routes ▪ Micro-transit service (similar to Uber/Lyft) around the Gloucester Courthouse area ▪ Seasonal trolley service ▪ Call the Ride Line at 877-869-6046 to schedule your ride