



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









Cover photos, clockwise from top right:

Bay Aging volunteer Sheila Butler delivers Meals on Wheels with assistance from her granddaughters Holland and Hadassah Smith.

Ribbon-cutting at Daffodil Gardens II on June 15, 2023. From left: Betty Hauch, Daffodil Gardens resident and member of the Chesapeake Bay Housing, Inc. Board of Directors; Kathy Vesley, Bay Aging President & CEO; former Bay Aging Board Director Ron Saunders (representing Gloucester County), Bay Aging Board Directors Bruce Craig (representing Northumberland County), Cynthia Talcott (representing Richmond County), Lynda Smith (representing Mathews County), and Stanley Clarke (representing Essex County); Joshua Gemerek, Bay Aging Senior Vice President, Housing; Dr. JJ Orth, Abingdon District Supervisor for Gloucester County.

A Bay Transit Express van awaits a client. Riders book their rides using an app on their phone and pay just \$1 for trips within microtransit service areas.



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 Board of Directors and our Advisory Councils. 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/.

Rathy Vesley, President & CEO
Bay Aging
PO Box 610
Urbanna, VA 23175
(804) 758-2386
www.bayaging.org

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

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This document was approved by the Bay Aging Board of Directors on May 22, 2025.

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BAY AGING Community Needs Assessment

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.

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 521 valid responses, held a focus group with state and local community leaders, and analyzed root causes of poverty in the community. Staff relied primarily on the 2023 5-Year American Community Survey for demographic data.

Key Findings

Analysis of demographic data and survey results reinforced certain findings from previous assessments and staff's lived experience, such as the advanced age of the residents of Bay Aging's service area and the region's continuing challenges with lack of affordable housing.

The process also yielded new information, for example, a remarkably positive view of law enforcement in the community but a concerning decline in satisfaction with quality of life, particularly among minority populations. 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. Four of the five oldest counties in Virginia, as measured by median age, are in Bay Aging's service area. 34.4% of the region's population is age 60 or older, compared to 22.6% for Virginia and 23.3% in the U.S. The area has relatively small average household size and, as compared to Virginia, fewer households with children and more households that include one or more older adults. 16.8% of households in the 10-county region consist of a person age 65 or older who lives alone.

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 five of 10 counties. As compared to Virginia, local households are more likely to have access to a vehicle and less likely to own a computer or have a broadband internet subscription.

Median house value and median monthly housing costs are lower in the Middle Peninsula and Northern Neck than Virginia, but in four of 10 counties, homeowners are cost-burdened (defined as housing costs being equal to or greater than 30% of household income) at higher rates than the state. Renters in six of 10 counties are cost-burdened at higher rates than Virginia. Relative to the state and U.S., Bay Aging's service area has a small proportion of households who rent and few multi-unit residential structures. The percentage of mobile homes is high, with some counties in the region having double and triple the state's prevalence of mobile homes.

The health of area residents is mediocre, as scored by the University of Wisconsin's County Health Rankings & Roadmaps, and local counties with greater racial diversity tend to have lower scores. Life expectancy in the 10 counties of the Middle Peninsula and Northern Neck ranges from 73 to 76.4 years, below the Virginia average of 77.6 years.

The infographic on page vi illustrates 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 more than 500 participants. The survey consists of 35 questions (Appendix C); key results follow:

Social issues of greatest concern:

- Housing instability and homelessness
- Poverty
- Systemic racism
- > Loneliness and social isolation

Top health needs in the community:

- Affordable health services
- Health care assistance for older adults.
- Transportation to access health services
- Increased number of providers
- Mental/behavioral health services

Inadequate community resources to age in place:

- > Affordable home health care options
- Housing repairs/modifications for older adults
- > Transportation
- Affordable housing

Unmet needs for children and youth:

- Youth centers
- Financial skills training
- Substance use prevention and treatment
- > Employment opportunities for teens

Most important factors contributing to high quality of life:

- Affordable housing
- Low crime/safe neighborhoods
- Availability of health care services
- Reliable internet/Wi-Fi service
- Clean, healthy environment
- Jobs with adequate wages

The survey found that 29% of respondents self-identify as a caregiver for an older adult or person with disabilities or chronic conditions, with higher rates for minority populations.

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. The focus group expressed greater concern than the public about cyber crime and also ranked caregiver support and respite services as a higher priority.

Root Causes of Poverty

The poverty rate in the Middle Peninsula and Northern Neck in 2023 was 10.2%, slightly higher than Virginia's poverty rate of 9.9%. Counties in the region with the highest poverty rates are King & Queen (18.5%), Essex (15.5%), Westmoreland (13.8%), and Lancaster (13.1%). The poverty rate for the Black/African American population is nearly double that of Whites.

Staff analyzed survey results and demographic data to identify root causes of poverty in the region. Lack of affordable housing and a shortage of jobs paying living wages are leading concerns.

Community Resources

Bay Aging provides transportation, housing, and healthy living services to over 36,000 people annually, including more than 22,000 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 contributed to the 2025 update of Bay Aging's Community Action Plan and will inform the development of Bay Aging's next strategic plan.



OUR MISSION

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

OUR VISION

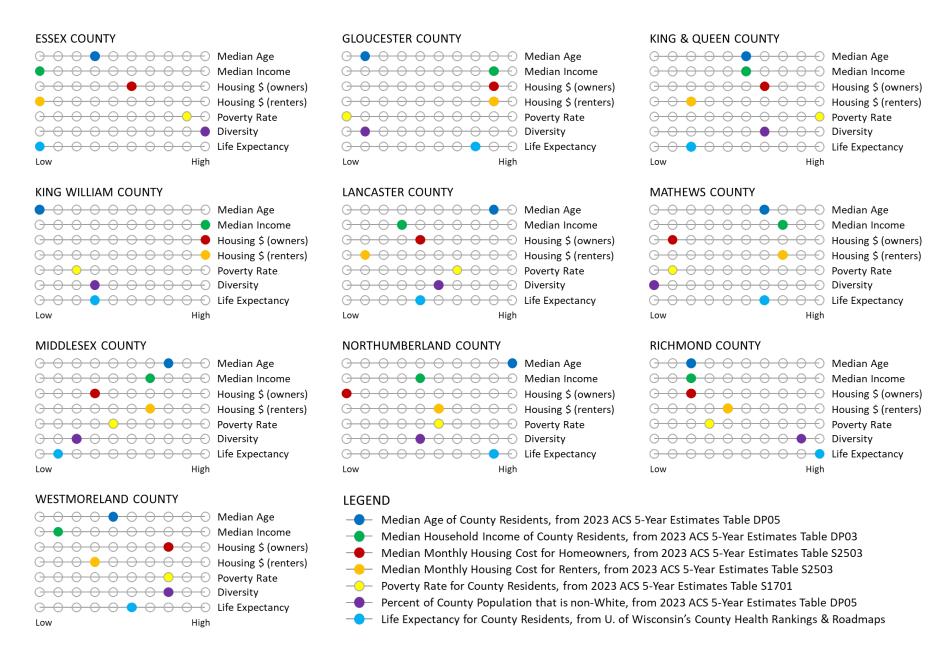
Every person in our service area will have a CHOICE and range of services that will assist them to remain independent in their chosen home.

SERVICES & INFORMATION 1-800-493-0238

www.bayaging.org www.facebook.com/BayAgingVA www.instagram.com/bayagingva

TRANSPORTATION 1-877-869-6046

www.baytransit.org www.facebook.com/BayTransitVA



County Rankings in the Middle Peninsula and Northern Neck

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

Figure 1 Bay Aging's Programs and Services

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 36,000 people annually. Figure 1 provides an overview of 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 (see Figure 2). Bay Aging's transit division also serves Charles City and New Kent. Bay Aging's advocacy services and insurance counseling also serve the Peninsula region, with the Ombudsman service area extending south to the North Carolina border. Care coordination and transitional care are offered statewide through the VAAACares® network. Veteran Directed Care serves veterans in:

- Maryland
- North Carolina
- Pennsylvania
- Puerto Rico
- South Carolina
- U.S. Virgin Islands
- Virginia
- Washington DC
- West Virginia

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,

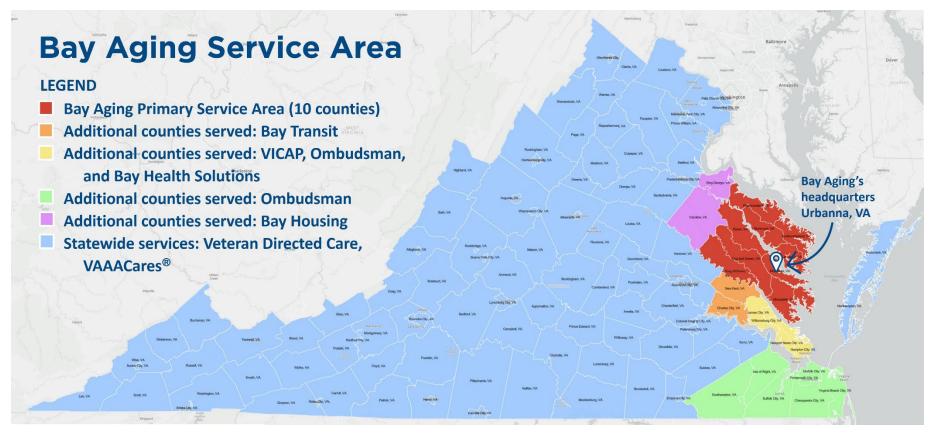


Figure 2 Bay Aging's Service Area

Northumberland, Richmond, and Westmoreland. Thrive Virginia serves King & Queen and King William.

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." 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.²

A community needs assessment serves as a first step in developing an agency-wide strategic plan, so Bay Aging included all 10 counties comprising its primary service area in the 2024-2025 assessment process described in this document.

¹ Virginia Community Action Partnership, "Virginia's Statewide Community Action Association," https://www.vacap.org/who-we-are/, retrieved March 31, 2025.

² National Association for State Community Services Programs, Checklist for Monitoring Community Needs Assessments for State CSBG Offices (May 2017), 5.

Demographic Profile

Geography, Population and Density

Bay Aging's primary service area covers two planning districts and 2,635 square miles, of which 609 square miles is water. The 10-county region fronts the Chesapeake Bay and is bounded by the Potomac River to the north and the York River to the south. The Rappahannock River runs between the Northern Neck and the Middle Peninsula, with bridges connecting the peninsulas located in White Stone (VA-3) and Tappahannock (US 360). The area is predominantly rural, although based on commuting patterns, the U.S. Office of Management and Budget defines King & Queen and King William as part of the Richmond Metropolitan Statistical Area,

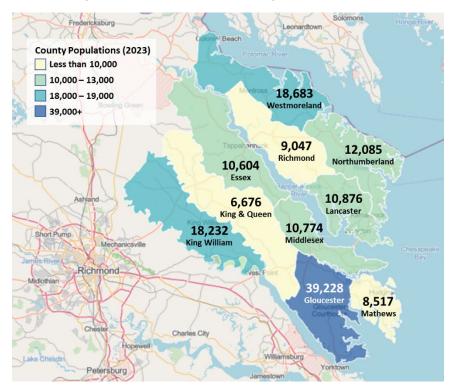


Figure 3 County Populations

County	Total Population 2023	Age 60+ Population	People per Square Mile	Percent Female	Group Quarters Pop.
Essex	10,604	3,492	41.2	54.5%	120
Gloucester	39,228	11,261	180.1	50.2%	278
King & Queen	6,676	2,051	21.2	49.6%	0
King William	18,232	4,509	66.6	50.8%	77
Lancaster	10,876	5,306	81.6	52.4%	265
Mathews	8,517	3,446	99.1	50.6%	138
Middlesex	10,774	4,632	82.7	50.5%	419
Northumberland	12,085	5,957	63.1	52.9%	0
Richmond	9,047	2,486	47.2	43.7%	1,626
Westmoreland	18,683	6,712	81.5	52.1%	119
10-County Service Area	144,722	49,852	71.4	50.8%	3,042
Virginia	8,657,499	1,960,030	219.3	50.6%	236,388
United States	332.4 m	77.3 m	94.1	50.5%	8.1 m

Figure 4 Population, Density, and Gender Source: 2023 ACS 5-Year Estimates, Tables DP5 and B26001

and Mathews and Gloucester as part of the Virginia Beach-Norfolk Combined Statistical Area.

Total population of the 10-county service area is estimated at 144,722 for 2023 (see Figure 3). Gloucester is the most populous of the ten counties, accounting for over a quarter of the region's population. Gloucester has 180 people per square mile; the other nine counties in Bay Aging's service area each have fewer than 100 people per square mile, with King & Queen at just 21 people per square mile (Figure 4).

Women outnumber men in most counties of the Middle Peninsula and Northern Neck, averaging 50.8% of the

population – slightly higher than the U.S. average of 50.5%. Richmond County is a notable exception, at 43.7% female; the low percentage is because over 1,100 male inmates are housed at the Haynesville Correctional Center. The Northern Neck Regional Jail, with a capacity of 460, is also located in Richmond. 18% of Richmond's population lives in group quarters, defined as correctional facilities, nursing facilities, student housing, and other group settings (this category also includes juvenile facilities and military quarters, but the region has none of those). All other counties in Bay Aging's service area have no more than 4% of their population living in group quarters (see Figure 4). Middlesex's group quarters population includes about 150 people in nursing facilities and about 150 inmates at the Middle Peninsula Regional Security Center. Gloucester has more than 160 people in nursing facilities, and over 200 Lancaster residents live in nursing facilities. The 3,000+ people living in group quarters across Bay Aging's service area are included in the Census's population count and tables describing age, race, and ethnicity. For some other tables, such as poverty rates, the Census uses subcategories that exclude some or all people living in group quarters.

Age

The population of Bay Aging's primary service area is relatively old. Median age in the 10-county region is 48.7, compared to 38.8 in Virginia and 38.7 for the U.S. (see Figure 5). Four of the five oldest counties in Virginia are served by Bay Aging. Northumberland is the oldest of Virginia's 133 counties, with a median age of 59.5, and Lancaster places second with a median age of 59.1. Among the U.S.'s 3,200+ counties, Northumberland has the 12th highest median age and Lancaster ranks 16th.

Figure 5 shows the percentages of residents who fall into the age categories of *Under Age 18, Age 18-64*, and *Age 65 and*

Over. In the U.S., 16.8% of people are age 65 or older; 25.6% of Bay Aging's 10-county region is age 65 or over. 40% of Lancaster's residents are age 65 or older.

County	Median Age	Rank in VA	Under Age 18	Age 18 to 64	Age 65 & Over	Age 60 & Over	Age 85 & Over
Essex	47.1	33	18.0%	58.4%	23.6%	32.9%	2.4%
Gloucester	44.6	56	20.0%	59.6%	20.3%	28.7%	2.6%
King & Queen	49.0	16	17.8%	58.6%	23.6%	30.7%	1.4%
King William	40.5	83	23.0%	60.5%	16.5%	24.7%	2.0%
Lancaster	59.1	2	14.7%	45.3%	40.0%	48.8%	5.8%
Mathews	53.8	5	15.6%	52.1%	32.3%	40.5%	3.1%
Middlesex	55.5	4	15.9%	50.6%	33.5%	43.0%	3.8%
Northumberland	59.5	1	14.8%	47.3%	37.9%	49.3%	3.7%
Richmond	46.1	42	17.6%	62.2%	20.2%	27.5%	2.1%
Westmoreland	48.0	25	18.2%	55.4%	26.4%	35.9%	2.9%
10-County Service Area	48.7 estimated		18.4%	56.0%	25.6%	34.4%	2.9%
Virginia	38.8		21.9%	61.8%	16.3%	22.6%	1.7%
United States	38.7		22.2%	61.0%	16.8%	23.3%	1.9%

Figure 5 Median Age and Age Distribution Source: 2023 ACS 5-Year Estimates, Tables DP5 and B01002

Because some Area Agency on Aging services such as Meals on Wheels are limited to people age 60 and up, Figures 4 and 5 include data for that cohort. 34.4% of the region's population is age 60 or older, compared to 23.3% of the U.S. Also of note is the percentage of people age 85 and older, which averages 1.9% in the U.S. and is 5.8% in Lancaster. This group is most likely to need services to help them age in place.

Population pyramids are a helpful tool for visualizing age and sex distribution in a region. Figures 6 and 7 contain population

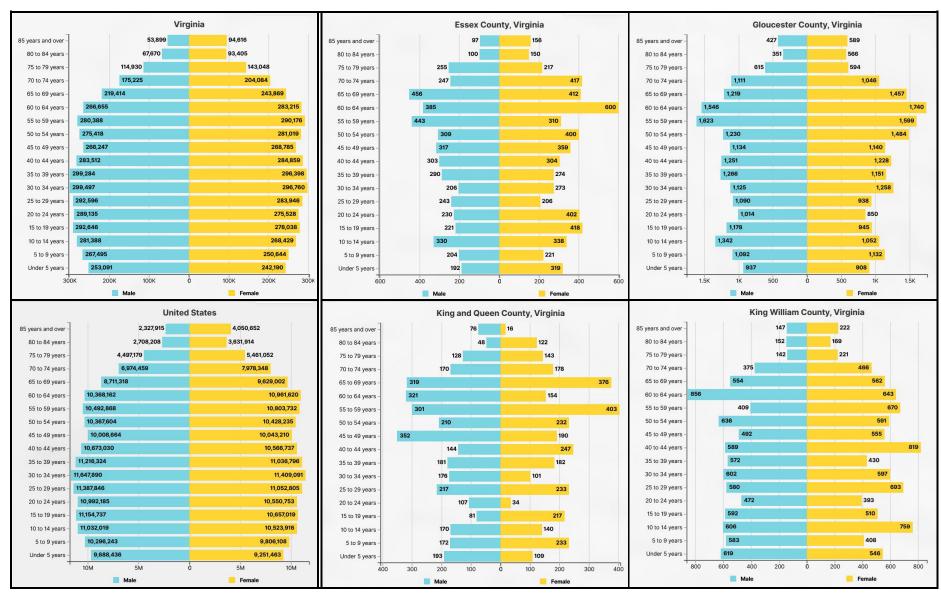


Figure 6 Population Pyramids: Virginia, U.S., and the Counties of Essex, Gloucester, King & Queen, and King William Source: 2023 ACS 5-Year Estimates, Table S0101

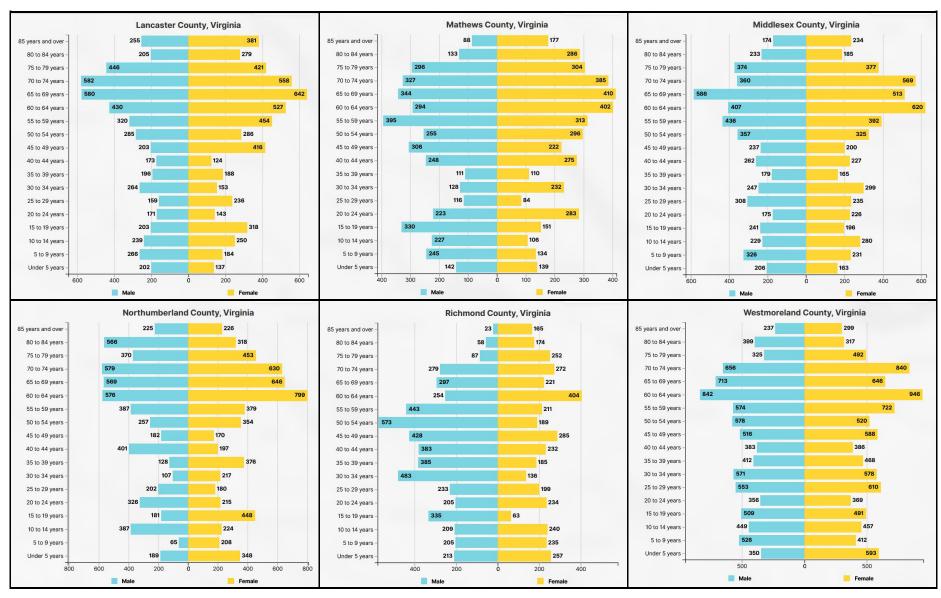


Figure 7 Population Pyramids: Lancaster, Mathews, Middlesex, Northumberland, Richmond, and Westmoreland Counties Source: 2023 ACS 5-Year Estimates, Table S0101

pyramids for Virginia, the U.S., and the 10 counties in Bay Aging's primary service area. Each pyramid shows age in 5-year increments, with *Under 5 Years* at the bottom of the pyramid and 85 Years and Over at the top. Males are shown in blue and females in yellow. The shape of a population pyramid typically narrows at the top, particularly for the age groups beyond life expectancy. A narrowing base may indicate declining fertility and a shrinking population. Bulges and indentations in a population pyramid can result from past changes in the birth rate, the death rate, or migration.



Figure 8 Arts & crafts at a Bay Aging Active Lifestyle Center for adults age 60 and older

The population pyramids for Virginia and the U.S. in Figure 6 are similarly shaped, with indentations for the age 40-54 cohorts that primarily represent Gen X, a generation that is smaller than the Baby Boomers and Millennials. The age groups younger

than 30 trend smaller and smaller with the transition from Millennials to Gen Z and Gen Alpha.

County population pyramids tend to be more irregular, with bars jutting out here and there, because they represent smaller populations. Comparing their general shape to Virginia, King William in Figure 6 stands out as being quite rectangular, with the youngest age cohorts maintaining size rather than shrinking. King William is the youngest county in the 10-county region, with 23% of its population under age 18. The other counties in Figure 6 – Essex, Gloucester, and King & Queen – are noticeably top-heavy compared to Virginia, with the widest bars representing younger Baby Boomers and Gen X.

Figure 7 depicts population pyramids for the other six counties in Bay Aging's service area. Lancaster, Mathews, Middlesex, Northumberland, and Westmoreland are all top-heavy due to their older population. Richmond is unusual in its lopsided gender balance, with disproportionate numbers of males in the 30-59 age cohorts. Richmond's substantial group quarters population, referenced in Figure 4, includes a predominantly male correctional facility population that skews the county's male-female ratio.

Population Growth

In recent decades, population growth in Bay Aging's primary service area has not kept pace with Virginia's rapid growth. Projections suggest that the region will continue to lag behind Virginia in the coming years. Figure 9 shows decennial Census populations from 2000 through 2020 together with the Weldon Cooper Center's projections for 2030-2050.³ In each decade,

³ University of Virginia Weldon Cooper Center for Public Service. "Virginia Population Projections," (2023), https://coopercenter.org/virginia-population-projections

Total	Census	Census	Census	WCC	WCC	WCC
Population	2000	2010	2020	2030 Prj	2040 Prj	2050 Prj
Essex	9,989	11,151	10,599	9,903	10,057	10,362
Gloucester	34,780	36,858	38,711	39,983	41,329	43,295
King & Queen	6,630	6,945	6,608	6,181	6,079	6,068
King William	13,146	15,935	17,810	19,403	21,414	23,746
Lancaster	11,567	11,391	10,919	10,297	9,826	9,502
Mathews	9,207	8,978	8,533	7,972	7,522	7,185
Middlesex	9,932	10,959	10,625	10,143	10,335	10,682
Northumberland	12,259	12,330	11,839	11,185	10,813	10,603
Richmond	8,809	9,254	8,923	8,469	8,400	8,457
Westmoreland	16,718	17,454	18,477	19,220	19,804	20,683
10 Counties	133,037	141,255	143,044	142,756	145,579	150,583
10-yr Growth	-	6.2%	1.3%	-0.2%	2.0%	3.4%
Virginia	7078515	8001024	8631393	9129002	9759371	10535810
10-yr Growth		13.0%	7.9%	5.8%	6.9%	8.0%

Figure 9 Population Estimates and Projections 2000-2050 Source: Census and Weldon Cooper Center

Age 60+	Census	Census	Census	WCC	WCC	WCC
Population	2000	2010	2020	2030 Prj	2040 Prj	2050 Prj
Essex	2,235	2,757	3,510	3,723	3,728	3,686
Gloucester	5,656	7,841	11,254	13,544	13,654	14,461
King & Queen	1,415	1,685	2,240	2,377	2,303	2,260
King William	2,050	2,890	4,293	5,227	5,365	5,698
Lancaster	4,130	4,590	5,293	5,316	4,824	4,676
Mathews	2,650	3,071	3,468	3,495	3,127	2,864
Middlesex	2,896	3,755	4,443	4,562	4,289	4,384
Northumberland	4,243	4,934	5,662	5,686	5,163	4,868
Richmond	1,985	2,200	2,457	2,623	2,517	2,527
Westmoreland	4,241	4,991	6,524	7,226	6,968	7,225
10 Counties	31,501	38,714	49,144	53,779	51,938	52,649
10-yr Growth		22.9%	26.9%	9.4%	-3.4%	1.4%
Virginia	1065502	1419306	1944703	2265230	2339201	2451913
10-yr Growth		33.2%	37.0%	16.5%	3.3%	4.8%

Figure 10 Estimates and Projections of the Age 60+ Population 2000-2050 Source: Census and Weldon Cooper Center

Percent	Census	Census	Census	WCC	WCC	WCC
Age 60+	2000	2010	2020	2030 Prj	2040 Prj	2050 Prj
Essex	22.4%	24.7%	33.1%	37.6%	37.1%	35.6%
Gloucester	16.3%	21.3%	29.1%	33.9%	33.0%	33.4%
King & Queen	21.3%	24.3%	33.9%	38.5%	37.9%	37.2%
King William	15.6%	18.1%	24.1%	26.9%	25.1%	24.0%
Lancaster	35.7%	40.3%	48.5%	51.6%	49.1%	49.2%
Mathews	28.8%	34.2%	40.6%	43.8%	41.6%	39.9%
Middlesex	29.2%	34.3%	41.8%	45.0%	41.5%	41.0%
Northumberland	34.6%	40.0%	47.8%	50.8%	47.7%	45.9%
Richmond	22.5%	23.8%	27.5%	31.0%	30.0%	29.9%
Westmoreland	25.4%	28.6%	35.3%	37.6%	35.2%	34.9%
10 Counties	23.7%	27.4%	34.4%	37.7%	35.7%	35.0%
Virginia	15.1%	17.7%	22.5%	24.8%	24.0%	23.3%

Figure 11 Percentage of Population Age 60 & Older 2000-2050 Source: Census and Weldon Cooper Center

the state's growth outstripped the region's. Overall, Virginia's population is projected to increase by 49% from 2000 to 2050, while the Middle Peninsula/Northern Neck region is projected to increase by 13%.

In both Virginia and the region, the 60-and-up age group has grown faster than the overall population and is expected to continue to do so through 2030 (see Figure 10). In Bay Aging's 10-county service area, the number and percentage of people age 60 and over is projected to peak sometime around 2030, with declines expected by 2040 (see Figures 10 and 11). While Virginia's proportion of people age 60 and older is also projected to peak around 2030, the number of people age 60+ in Virginia will continue to expand through 2050 but will not grow as quickly in 2030-2050 as the 0-59 age group.

Figures 12 offers a visual representation of the population data shown in Figure 9. The ten counties in Bay Aging's service area fall into three categories:

- Population increases by more than 20% from 2000 to 2050: Gloucester, King William, Westmoreland
- Population is relatively stagnant from 2000 to 2050, changing by less than 10%: Essex, King & Queen, Middlesex, Richmond
- Population decreases by more than 10% from 2000 to 2050: Lancaster, Mathews, Northumberland

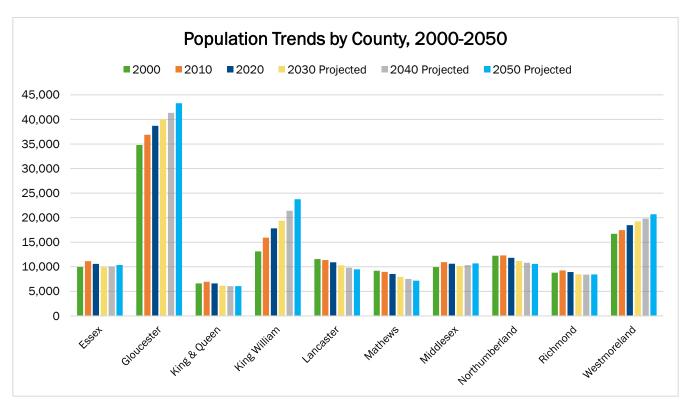


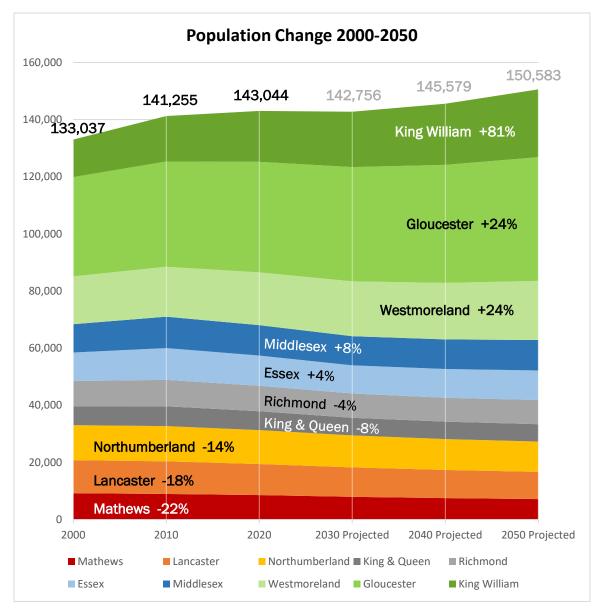
Figure 12 Population Trends - Source: Census and Weldon Cooper Center

A stacked graph helps visualize how differing growth rates across counties impact the region. Figure 13 depicts county populations with the fastest growing county, King William, at the top and Mathews, with the largest decline, at the bottom.

Projections are estimates based on demographers' best guesses about a population's future birth rate, death rate, and migration patterns. Changes in technology and events like pandemics can lead to rapid shifts in one or more of these

components of population change. COVID-19, for example, prompted an increase in working remotely, which led to decentralization as many workers ceased being constrained by commuting in their choice of where to live. Demographer Hamilton Lombard of the Weldon Cooper Center notes that migration from metro areas into Virginia's rural counties in 2023 occurred at a rate that had not been seen since the 1970s.⁴ He cites Middlesex County as attracting large numbers of new residents in the wake of the pandemic, yet growing only

⁴ Hamilton Lombard, "Amid slow population growth, Virginia's demographic landscape is being transformed," *Weldon Cooper Center for Public Service*, January 29, 2024, https://www.coopercenter.org/research/amid-slow-population-growth-virginias-demographic-landscape-being-transformed



1% from 2020 to 2023 because during that timeframe there were 400 more deaths than births in Middlesex.

Low birth rates have led many rural hospitals, locally and elsewhere, to close their maternity units. Residents of the Middle Peninsula and Northern Neck must travel to Richmond city, Williamsburg, Mechanicsville or Fredericksburg for maternity services. This is not merely an inconvenience - a 2018 national study found that "women in rural areas are more likely to experience delays in prenatal care and have more pregnancy-related hospitalizations," and can suffer preterm births as a result of decreased care and the stress of traveling long distances to acquire care. 5 The Low Birth Weight map in Appendix A shows that Essex, Lancaster, and Northumberland score poorly relative to Virginia for low birth weight.

Hospitals cite high costs and low utilization as reasons for discontinuing maternity care, but a lack of obstetric services is not helpful in retaining or attracting young adults to aging counties that need more people to maintain their populations and tax base.

Figure 13 Population Change 2000-2050 - Source: Census and Weldon Cooper Center

⁵ Emily Shabacker, "A new state law could help nurse midwives alleviate Virginia's maternity care shortages. Will hospitals resist the change?" *Cardinal News*, March 31, 2025, https://cardinalnews.org/2025/03/31/a-new-state-law-could-help-nurse-midwives-alleviate-virginias-maternity-care-shortages-will-hospitals-resist-the-change/.

						American					
County	Total Population 2023	White	Black or African American	American Indian & Alaska Native	Asian	Native Hawaiian & Other Pacific Islander	Other	Two or More Races	Hispanic or Latino (of any race)	Indian & Alaska Native, alone or in combination	County Rank: Percent Non- white
Essex	10,604	55.9%	37.5%	0.1%	0.5%	0.1%	0.8%	5.1%	4.3%	1.3%	1
Gloucester	39,228	84.0%	8.1%	0.2%	0.8%	0.0%	0.6%	6.2%	4.0%	1.6%	9
King & Queen	6,676	66.8%	23.8%	0.2%	0.0%	0.0%	2.8%	6.4%	3.1%	1.3%	4
King William	18,232	78.6%	15.3%	0.8%	0.7%	0.1%	0.2%	4.4%	3.1%	2.7%	7
Lancaster	10,876	67.7%	27.8%	0.0%	0.5%	0.0%	1.1%	2.9%	1.6%	0.3%	5
Mathews	8,517	86.7%	8.4%	0.0%	0.0%	0.2%	0.8%	3.9%	2.6%	2.8%	10
Middlesex	10,774	79.3%	15.1%	0.1%	1.2%	0.1%	0.2%	3.9%	2.9%	1.3%	8
Northumberland	12,085	69.0%	19.6%	0.1%	4.2%	0.0%	0.6%	6.4%	3.3%	2.6%	6
Richmond	9,047	61.0%	27.9%	0.4%	0.0%	0.0%	2.7%	8.0%	7.2%	3.1%	2
Westmoreland	18,683	63.7%	24.0%	0.1%	1.1%	0.0%	3.9%	7.2%	6.2%	0.8%	3
10-County Service Area	144,722	73.8%	18.2%	0.2%	1.0%	0.04%	1.2%	5.6%	4.0%	1.7%	
Virginia	8,657,499	61.7%	18.7%	0.3%	6.9%	0.1%	4.1%	8.2%	10.7%	1.4%	
United States	332.4 m	63.4%	12.4%	0.9%	5.8%	0.2%	6.6%	10.7%	19.0%	2.2%	

Figure 14 Racial and Ethnic Composition of Bay Aging's Service Area Source: 2023 ACS 5-Year Estimates, Table DP5

Race and Ethnicity

Bay Aging's service area is racially less diverse than Virginia or the U.S., with a population that is 73.8% White. Mathews and Gloucester are least diverse, with minority populations of 13.3% and 16% respectively. Essex is the most diverse at 44.1% non-White. Figure 14 details the racial and ethnic composition of the Middle Peninsula and Northern Neck, as well as Virginia and the U.S. The proportion of people in the region who are Black or

African American, 18.2%, is about the same as Virginia, and nearly 50% higher than the U.S. overall (12.4%). Compared to both Virginia and the U.S., disproportionately few people who are Asian or Native Hawaiian & Other Pacific Islander live in the area. The figure of 4.2% Asian for Northumberland County is surprising, since the 2020 Census indicated 0.6% and the 2022 ACS 5-Year estimate was 0.9%. This could be an example of the Census Bureau's new privacy protection method, which



Figure 15 Upper Mattaponi Tribe Pow Wow



Figure 16 Pamunkey Indian Reservation Expo

the Weldon Cooper Center says introduces "noise" that can distort counts, especially for small geographies and racial or ethnic groups that comprise a small percentage of the population.⁶

The percentage of people in the 10-county area who identified their race as American Indian & Alaska Native also prompted a second look at the data. King William is 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. 2020 Census data showed 0.6% of the region's population as American Indian & Alaska Native, but the 2023 ACS 5-Year estimates yielded a figure of only 0.2%. With nine of 10 counties showing decreases of 50% or more, the change doesn't seem likely to be attributable to noise-inducing privacy protection adjustments.

It may be the case that some people who formerly identified as American Indian & Alaska Native now identify as Two or More Races; the column in Figure 14 titled American Indian & Alaska Native, Alone or in Combination, counts both people who identified as American Indian & Alaska Native or selected Two or More Races and subsequently indicated that one of the component races was American Indian & Alaska Native. This measurement yields 1.7% for Bay Aging's primary service area, compared to 1.4% for Virgina and 2.2% for the U.S., and shows four counties – Richmond, Mathews, King William, and Northumberland – where 2.6% or more of the population identifies as being American Indian & Alaska Native.

Bay Aging's 2023 Strategic Plan set an objective of building partnerships with local American Indian tribes. Over the past year, Bay Aging staff met with three of the four tribes in Bay Aging's service area and attended the Upper Mattaponi's Pow Wow (figure 15). Employees provided an Expo at the Pamunkey Indian Reservation (figure 16), and two members of the Pamunkey Tribe joined Bay Aging's Advisory Council.

⁶ University of Virginia Weldon Cooper Center, Demographics Research Group, "Data Release for Virginia," https://demographics.coopercenter.org/census2020, retrieved Mar. 2, 2022.

Education and Employment

Educational attainment is relatively low within Bay Aging's service area. Figure 17 shows education levels; in half the 10 counties of the Middle Peninsula and Northern Neck, 10% or more of adults age 25 and up did not graduate from high school. Only 77.1% of adults age 25+ in Richmond County completed high school; this figure is likely skewed by the large correctional facility population. For all 10 counties, the percentage of adults with a bachelor's or graduate/professional degree is lower than the Virginia average.⁷

In contrast, the percentage of adults age 25+ with associate degrees in Bay Aging's service area is 8.1%, higher than the state average of 7.8%. Rappahannock Community College (RCC) has campuses in Gloucester and Richmond, as well as a welding lab in Westmoreland and a four-classroom center in Lancaster. RCC has online options for some degrees, but the counties with the highest proportions of adults with associate degrees are the two counties where RCC's main campuses are located – Richmond and Gloucester.

	Population			Educational A	5+		Below Poverty: Adults 25+ for whom status is determined			
County	age 25 years and over	Less than 9th grade	9th to 12th grade, no diploma	High school graduate or higher	Some college, no degree	Associate degree	Bachelor's degree or higher	Graduate or professional degree	Less than high school graduate	Bachelor's degree or higher
Essex	7,729	5.2%	9.0%	85.7%	23.5%	5.3%	17.5%	6.4%	18.5%	5.4%
Gloucester	28,778	2.3%	6.5%	91.2%	23.9%	9.1%	25.9%	9.4%	19.0%	4.0%
King & Queen	5,220	3.0%	6.9%	90.0%	23.5%	8.4%	19.5%	5.1%	26.3%	2.2%
King William	12,744	1.6%	4.8%	93.6%	25.1%	7.5%	24.3%	6.1%	25.1%	3.6%
Lancaster	8,763	2.8%	10.2%	87.0%	15.7%	6.5%	37.4%	15.7%	29.3%	2.5%
Mathews	6,537	1.9%	6.8%	91.3%	22.0%	8.6%	30.1%	8.4%	28.4%	0.7%
Middlesex	8,501	2.8%	5.9%	91.3%	22.1%	7.4%	31.6%	10.5%	14.2%	3.7%
Northumberland	9,494	3.7%	5.9%	90.4%	20.4%	8.6%	33.9%	16.2%	32.0%	7.3%
Richmond	6,851	6.1%	16.9%	77.1%	12.2%	10.9%	17.4%	5.5%	16.0%	9.1%
Westmoreland	14,171	5.6%	10.3%	84.1%	16.2%	7.8%	19.7%	8.2%	23.2%	6.3%
10-County Service Area	108,788	3.3%	7.9%	88.8%	21.0%	8.1%	25.8%	9.3%	22.5%	4.4%
Virginia	5,958,915	3.6%	5.1%	91.3%	18.2%	7.8%	41.5%	18.1%	21.9%	3.3%
United States	228,434,661	4.7%	5.9%	89.4%	19.4%	8.8%	35.0%	13.7%	24.0%	4.4%

Figure 17 Educational Attainment - Source: 2023 ACS 5-Year Estimates, Table 1501

⁷ U.S. Census Bureau, 2023 ACS 5-Year Estimates, https://data.census.gov/cedsci/table?q=Table%20S1501, retrieved Apr. 2, 2025.

The final two columns of Figure 17 show the poverty rate for adults age 25 and older who did not complete high school, and for those with a bachelor's degree or higher. More detailed poverty statistics appear in Figure 24; this section juxtaposes education and poverty statistics to illustrate the importance of education. In all 10 counties, adults lacking a high school diploma (or equivalency) have double-digit poverty rates while the poverty rate across the region for adults with a bachelor's degree or higher is 4.4%.

Figure 18 describes the labor force in Bay Aging's 10-county service area. The civilian labor force is nearly 66,000 people and the military labor force numbers less than 900. Because of the large number of retirees, only 55% of the population age 16 and older is in the labor force. The unemployment rate is 4.8% across the region but much higher in Westmoreland (7.5%) and Lancaster (10%).8 The lowest unemployment rates are in Richmond and Gloucester, the counties where RCC's campuses are located.

County	Population 16 years and over	In labor force	Civilian labor force	Civilian Labor Force: Employed	Civilian Labor Force: not employed	Unemploy- ment Rate	Armed Forces	Worked from home	Commuted to work	Drove alone in an auto	Mean travel time to work (minutes)
Essex	8,910	50.4%	4,492	4,209	283	6.3%	0	480	4,093	75.4%	35.5
Gloucester	32,249	62.5%	19,618	18,967	651	3.3%	524	1,607	19,129	85.6%	34.6
King & Queen	5,635	62.0%	3,494	3,322	172	4.9%	0	363	3,229	77.9%	36.3
King William	14,449	68.8%	9,942	9,591	351	3.5%	0	1,123	9,472	79.2%	37.4
Lancaster	9,578	46.6%	4,438	3,994	444	10.0%	26	545	3,963	79.2%	24.7
Mathews	7,458	49.2%	3,663	3,445	218	6.0%	6	503	3,316	74.9%	34.2
Middlesex	9,252	50.0%	4,625	4,421	204	4.4%	0	884	4,351	70.4%	30.7
Northumberland	10,609	44.2%	4,566	4,395	171	3.7%	119	657	4,493	70.6%	34.2
Richmond	7,574	44.5%	3,363	3,267	96	2.9%	5	573	3,255	73.6%	29.7
Westmoreland	15,596	50.6%	7,700	7,119	581	7.5%	192	862	7,148	76.8%	41.6
10-County Service Area	121,310	55.0%	65,901	62,730	3,171	4.8%	872	7,597	62,449	78.8%	34.8
Virginia	6,980,834	65.6%	4,450,159	4,258,744	191,415	4.3%	130,751	699,959	4,308,387	69.2%	27.6
United States	267,393,519	63.5%	168,567,852	159,808,535	8,759,317	5.2%	1,287,774	21,267,373	157,645,183	70.2%	26.6

Figure 18 Labor Force - Source: 2023 ACS 5-Year Estimates, Table DP03

⁸ U.S. Census Bureau, 2023 ACS 5-Year Estimates, Table DP03, https://data.census.gov/table/ACSDP5Y2023.DP03?q=DP03, retrieved April 3, 2025.

Eleven percent of workers in Bay Aging's service area work from home, lower than the rates for Virginia (14%) and the U.S. (12%). For those in the area who commute, 78.8% drive alone – more than Virginia (69.2%) and the U.S. (70.2%). Mean travel time to work in the region is 34.8 minutes compared to 27.6 minutes for Virginia and 26.6 minutes for the U.S.

Challenges in accessing technology may contribute to the region's unemployment rate (4.8%) being higher than Virginia's (4.3%). The proportion of households in the 10-county region who do not have a computer is 9.8%, much higher than the state and national figure of 5.2% (see Figure 19). 19.3% of area households do not have a broadband internet subscription, nearly double Virginia's rate of 10.1%.9 Lack of broadband presents a barrier to both accessing education and working from home.

Residents of the Middle Peninsula and Northern Neck are less likely to lack access to a vehicle than the state or national population. Only 3.7% of households have no vehicles available, compared to 6% for Virginia and 8.3% for the U.S.¹⁰

Figure 20 shows which industries employ the area's civilian labor force. For all 10 counties, 'educational services and health care and social assistance' is the sector employing the most people, though at a regional rate slightly lower than the state and U.S.¹¹ Relative to Virginia, the area has larger proportions of people working in:

County	Total households	No computer	No broadband Internet subscription	No vehicles available
Essex	4,396	12.8%	21.8%	6.0%
Gloucester	15,111	5.4%	11.2%	2.2%
King & Queen	2,814	10.2%	26.4%	2.5%
King William	7,115	7.1%	22.7%	3.2%
Lancaster	5,468	16.5%	26.0%	4.2%
Mathews	3,767	8.6%	25.1%	2.1%
Middlesex	4,733	7.1%	18.1%	2.5%
Northumberland	5,436	9.9%	19.9%	3.8%
Richmond	2,931	17.7%	20.3%	7.7%
Westmoreland	8,029	13.5%	20.5%	5.5%
10-County Service Area	59,800	9.8%	19.3%	3.7%
Virginia	3,326,260	5.2%	10.1%	6.0%
United States	127,482,865	5.2%	10.3%	8.3%

Figure 19 Access to Technology and Vehicles Source: 2023 ACS 5-Year Estimates, Tables DP2 & DP4

- agriculture, forestry, fishing and hunting, and mining
- construction
- manufacturing
- wholesale trade
- retail trade
- transportation and warehousing and utilities
- other services

⁹ U.S. Census Bureau, 2023 ACS 5-Year Estimates, Table DP02 Selected Social Characteristics, https://data.census.gov/table/ACSDP5Y2023.DP02?q=DP02, retrieved April 4, 2025.

¹⁰ U.S. Census Bureau, 2023 ACS 5-Year Estimates, Table DP04 Selected Housing Characteristics, https://data.census.gov/table/ACSDP5Y2023.DP04?q=DP04, retrieved April 4, 2025.

¹¹ U.S. Census Bureau, 2023 ACS 5-Year Estimates, Table DP03 Selected Economic Characteristics, https://data.census.gov/table/ACSDP5Y2023.DP03?q=DP03, retrieved April 3, 2025.

Compared to Virginia, the region has lower percentages of people working in:

- information
- educational services and health care and social assistance
- public administration finance & insurance, real estate, rental & leasing
- arts, entertainment, recreation, accommodation, and food services
- professional, scientific & management, and administrative & waste management services

	c	Industry												
County	Civilian employed population age 16 years and over	Agriculture, forestry, fishing & hunting, and mining	Construction	Manufacturing	Wholesale trade	Retail trade	Transportation & warehousing, and utilities	Information	Finance & insurance, and real estate & rental & leasing	Professional, scientific, and management, and administrative & waste management services	Educational services and health care and social assistance	Arts, entertainment, recreation, and accommodation & food services	Other services, except public administration	Public administration
Essex	4,209	2.4%	7.7%	13.1%	1.9%	14.3%	8.4%	2.0%	6.9%	10.2%	18.2%	3.8%	5.5%	5.7%
Gloucester	18,967	2.5%	8.1%	10.5%	1.7%	12.0%	4.4%	1.1%	6.2%	7.6%	21.9%	9.2%	6.2%	8.6%
King & Queen	3,322	6.1%	12.7%	11.7%	1.7%	8.8%	8.2%	0.9%	2.3%	9.1%	23.1%	6.4%	2.2%	6.9%
King William	9,591	1.3%	12.9%	9.9%	3.2%	10.3%	7.6%	1.3%	6.0%	7.9%	21.1%	6.0%	5.2%	7.1%
Lancaster	3,994	1.4%	8.9%	8.5%	1.4%	10.3%	3.1%	1.4%	5.8%	12.1%	26.2%	7.2%	7.6%	6.1%
Mathews	3,445	0.3%	15.3%	9.6%	2.5%	10.6%	3.7%	1.2%	6.6%	8.9%	22.4%	9.6%	2.5%	6.9%
Middlesex	4,421	1.6%	8.7%	7.1%	3.2%	14.4%	4.9%	1.5%	6.3%	9.7%	23.6%	7.3%	5.3%	6.6%
Northumberland	4,395	4.3%	7.8%	6.7%	3.0%	7.3%	3.6%	2.4%	6.7%	11.2%	22.5%	13.4%	6.0%	5.1%
Richmond	3,267	3.6%	12.2%	10.6%	3.2%	8.8%	4.8%	0.9%	2.6%	8.4%	22.9%	4.9%	7.1%	9.9%
Westmoreland	7,119	3.8%	8.6%	2.6%	2.4%	13.9%	6.3%	0.3%	5.4%	15.5%	15.8%	7.6%	5.6%	12.2%
10-County Service Area	62,730	2.6%	9.8%	9.1%	2.3%	11.4%	5.5%	1.2%	5.8%	9.6%	21.4%	7.8%	5.6%	7.9%
Virginia	4,258,744	0.8%	6.5%	7.1%	1.7%	9.8%	4.8%	1.8%	6.5%	16.6%	22.2%	8.1%	5.2%	8.9%
United States	159,808,535	1.6%	6.9%	10.0%	2.3%	10.9%	5.9%	1.9%	6.7%	12.4%	23.4%	8.8%	4.7%	4.7%

Figure 20 Industry - Source: 2023 ACS 5-Year Estimates, Table DP03

Given its large geographic area and diverse character, there is considerable variation in types of employment within Bay Aging's service area. Looking beyond the leading industry in all 10 counties, educational services and health care and social assistance, King & Queen stands out as having 6.1% of its civilian labor force employed in the agriculture, forestry, fishing and hunting, and mining sector, while Northumberland has a remarkable 13.4% employed in arts, entertainment, recreation, accommodation, and food services and Westmoreland has 12.2% employed in public administration.

It is important to note that the data in Figure 20 is based on the residence of the worker, not the location of the job – for example, a person living in King & Queen might commute to King William for a job at WestRock's West Point paper mill. Large employers like Wood Preservers, Inc. (owned by Stella Jones) and Helena Agri-Enterprises, both located in Warsaw, may contribute to Richmond County's low unemployment rate but also attract workers from other counties.

Income

Figure 21 details income levels and types of earnings for the 10 counties in Bay Aging's service area, as well as Virginia and the U.S. Across all 10 counties, mean household income is \$94,472, compared to \$125,226 for Virginia and \$110,491 for the U.S.¹² Virginia is a state with considerable income inequality, with very high incomes in the northern part of the state.¹³ Loudoun County, Virginia, part of the Washington metropolitan area, regularly tops the list of wealthiest counties

in the U.S. The 2023 ACS 5-Year Estimates show Loudoun with a mean household income of \$209,947; the industry employing the largest share (29.6%) of Loudoun's civilian labor force is professional, scientific & management, and administrative & waste management services. In contrast, only 9.6% of employment in Bay Aging's 10-county service area is in this sector (Figure 20).

Within the Middle Peninsula and Northern Neck, three counties have mean household incomes exceeding \$100,000: Gloucester, Northumberland, and Mathews. The three counties with the lowest mean household incomes, below \$85,000, are Essex, Richmond, and Westmoreland (Figure 21).

Sources of income vary across the 10-county region, with older counties like Lancaster and Northumberland having smaller percentages of households with income earned from current employment and larger percentages of households with income from Social Security. Richmond and Westmoreland have the highest percentages of households receiving Supplemental Security Income, while Middlesex has the highest proportion of households with cash public assistance income. The counties with the highest percentages of households receiving Food Stamp/SNAP benefits are:

- Westmoreland 18.4%
- Essex 15.1%
- Richmond 14.5%
- King & Queen 13.3%

¹² U.S. Census Bureau, 2023 ACS 5-Year Estimates, Table DP03 Selected Economic Characteristics, https://data.census.gov/table/ACSDP5Y2023.DP03?q=DP03, retrieved April 3, 2025.

¹³ 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/.

Income Statistics	Essex	Glou- cester	King & Queen	King William	Lan- caster	Mathews	Middle- sex	Northum- berland	Rich- mond	West- moreland	10 Counties	Virginia	United States
Total households	4,396	15,111	2,814	7,115	5,468	3,767	4,733	5,436	2,931	8,029	59,800	3.3 m	127 m
Mean household income	\$75,330	\$103,122	\$88,368	\$97,561	\$98,274	\$100,156	\$92,227	\$101,818	\$79,207	\$84,744	\$94,472	\$125,226	\$110,491
% with earnings	62.5%	78.0%	77.9%	76.6%	59.1%	64.0%	63.0%	56.4%	67.7%	64.3%	68.6%	79.4%	77.6%
Mean earnings	\$79,408	\$97,490	\$87,319	\$100,368	\$97,850	\$91,659	\$88,867	\$86,705	\$85,013	\$90,406	\$92,874	\$125,287	\$112,516
% with Social Security (SS)	45.3%	37.5%	41.6%	31.5%	56.5%	52.3%	52.0%	59.6%	41.1%	46.1%	44.7%	29.7%	31.2%
Mean SS income	\$22,146	\$24,392	\$21,234	\$23,486	\$26,186	\$28,904	\$26,834	\$24,785	\$21,114	\$23,202	\$24,510	\$24,256	\$23,582
% with retirement income	32.8%	35.4%	32.7%	29.1%	36.5%	37.7%	39.1%	43.6%	35.1%	34.5%	35.5%	26.8%	24.2%
Mean retirement income	\$29,545	\$32,358	\$26,928	\$27,765	\$38,972	\$36,581	\$36,449	\$44,839	\$24,838	\$30,921	\$33,588	\$38,632	\$32,951
% w/Supplemental Security Income SSI	5.7%	4.4%	5.6%	4.7%	3.7%	2.8%	5.1%	4.7%	7.7%	8.3%	5.2%	4.1%	5.1%
Mean SSI	\$11,953	\$8,976	\$12,326	\$9,411	\$14,346	\$14,973	\$10,857	\$9,446	\$12,270	\$9,628	\$10,546	\$11,058	\$11,361
% w/cash public assistance income	1.5%	1.5%	2.1%	1.3%	1.2%	0.7%	2.8%	0.6%	1.3%	1.7%	1.5%	2.2%	2.7%
Mean cash public assistance income	\$1,285	\$3,458	\$2,577	\$6,397	\$4,397	\$5,985	\$3,382	\$1,775	\$1,935	\$1,440	\$3,234	\$4,053	\$4,420
% with Food Stamp/ SNAP benefits in past 12 months	15.1%	7.4%	13.3%	8.1%	10.9%	5.7%	11.3%	6.6%	14.5%	18.4%	10.6%	8.8%	11.8%
Per capita income	\$32,839	\$40,924	\$39,622	\$38,965	\$49,384	\$45,767	\$40,661	\$47,191	\$27,687	\$37,305	\$40,220	\$49,217	\$43,289
Median household income	\$56,481	\$83,689	\$72,851	\$85,212	\$67,169	\$75,487	\$74,154	\$69,500	\$64,184	\$59,766	\$73,120	\$90,974	\$78,538
Median earnings for male full-time, year-round workers	\$65,157	\$66,138	\$63,822	\$65,579	\$75,843	\$73,077	\$56,250	\$61,218	\$50,760	\$65,055		\$72,654	\$65,664
Median earnings for female full-time, year-round workers	\$49,478	\$50,766	\$50,167	\$52,360	\$42,455	\$58,083	\$47,600	\$51,324	\$56,875	\$48,725		\$58,743	\$53,445

Figure 21 Income Statistics - Source: 2023 ACS 5-Year Estimates, Table DP03

Alternative measures of income included in Figure 21 are median household income and per capita income. Like mean household income, both measures are lower for Bay Aging's 10-county service area than for Virginia and the U.S. Per capita income is helpful in illuminating the impact of household size on household income. Lancaster and Northumberland have many households consisting of one older adult and place at the top of rankings when income is measured per person rather than per household.

Median household income, which is measured as the income of the household that places in the middle of a ranked list, is often considered a good measure of the typical household. Median income eliminates the upward skewing effect that a small number of households with extreme wealth can have on a region's mean income. Median household income for the Middle Peninsula and Northern Neck is \$73,120, lower than Virginia (\$90,974) and the U.S. (\$78,538). King William and Gloucester have median incomes higher than that of the U.S.;

Essex, Westmoreland and Richmond remain at the bottom regardless of which measure of income is used.

A recent news item highlighted Virginia's gender pay gap as "one of the widest in the south" at \$14,918.¹⁴ The numbers cited in the Axios article are slightly different than the median earnings for full-time, year-round workers presented in Figure 21 because Axios uses 2023 ACS 1-Year estimates, which are not available for small geographies, and Figure 21 relies on 5-Year estimates. The 5-year estimates show a \$13,911 gap between men's and women's median earnings in Virginia. Within Bay Aging's 10-county service area, Lancaster has a huge pay gap of \$33,388, while the gender pay gap in Essex, Gloucester, and Westmoreland exceeds \$15,000. Richmond bucks the trend, with women earning \$6,115 more than men.

¹⁴ Karri Peifer, "Virginia women earn nearly \$15K less than men," Axios Richmond, April 8, 2025, https://www.axios.com/local/richmond/2025/04/08/virginia-gender-pay-gap-widens-2023.

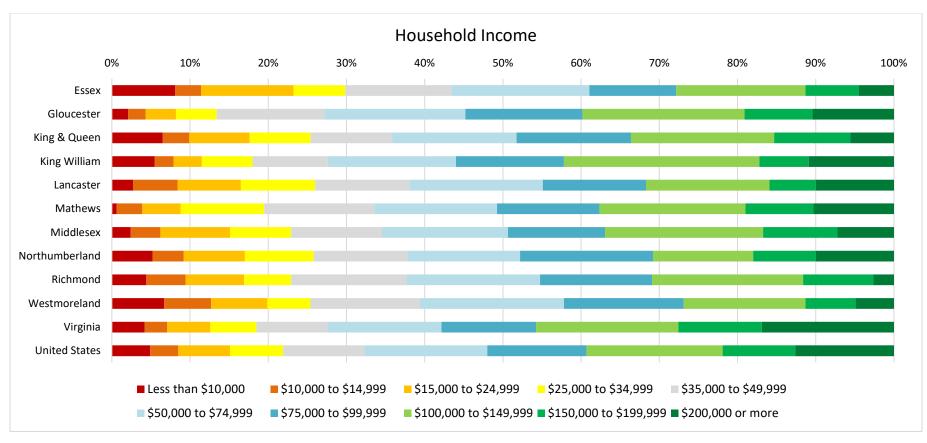


Figure 22 Income Distribution - Source: 2023 ACS 5-Year Estimates, Table DP03

Figure 22 uses color coding to visually depict household income distribution. For each geography, red represents the percentage of households whose annual income is less than \$10,000. Essex has the largest proportion, followed by King & Queen and Westmoreland. Mathews has the lowest percentage of households with income below \$10,000. Colors shift from orange to yellow as households reach annual incomes of up to \$34,999. Gray and blue represent middle income ranges, while shades of green represent households with incomes of

\$100,000 or more. King William has the largest proportion, 42%, of households in the region with six-figure incomes, not far below Virginia's 46%. However, 17% of Virginia's households have annual incomes of \$200,000 or more, which is attained by far fewer in the Middle Peninsula and Northern Neck. 11% of King William's households and 10% of households in Gloucester, Lancaster, Mathews, and Northumberland have household incomes of \$200,000 or more. Richmond, at 3%, has the smallest proportion of \$200,000+ households.

Poverty

Across Bay Aging's 10-county service area, 10.2% of people live below the poverty level, slightly higher than Virginia's rate of 9.9% but lower than the U.S. rate of 12.4%. Nearly half of the region's population in poverty lives below 50% of the poverty level. King & Queen, Essex, Westmoreland, and Lancaster have the highest poverty rates in the region, while Gloucester, King William, and Mathew have the lowest rates. ¹⁵ The map in Figure 23 shows the geographic pattern of area poverty rates.

Figure 24 details poverty statistics by age, gender, race, ethnicity, educational attainment, employment status and work experience. Poverty statistics exclude group quarters populations, such as correctional facilities and nursing facilities.

With the exception of Richmond, poverty rates are highest for people under age 18. Overall, poverty rates in the area are higher for women than men (but not in all counties). In most counties, poverty rates are higher for Black/African American people than for White people; overall, poverty rates in the Middle Peninsula and Northern Neck are 8.4% for Whites and nearly double, 16.7%, for those who are Black/African American. Other minority groups in the region have such small sample sizes that their poverty rates are subject to large margins of error and should be interpreted with caution.

As previously noted in the Education & Employment section, poverty rates tend to fall with increased education. Regionally, the gap between poverty rates for those with a high school diploma or equivalency, 9.8%, and those who did not complete high school, 22.5%, is substantial.

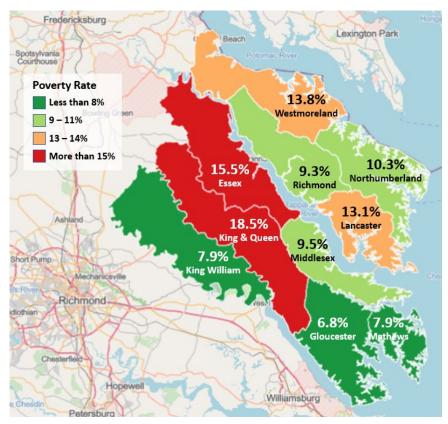


Figure 23 Poverty Rates Source: 2023 ACS 5-Year Estimates, Table S1701

Two counties in the region have high rates of poverty among full-time year-round workers. Lancaster has the largest proportion, 6.5%, and Richmond's rate is 3.8%. The Income section highlighted the large gender pay gap in Lancaster, and Figure 24 shows that the poverty rate for women in Lancaster is nearly double that of men. Further, the poverty rate in Lancaster for Blacks is nearly triple that of Whites. Outreach may be needed to assist a cohort of Black women working low-wage jobs.

¹⁵ U.S. Census Bureau, 2023 ACS 5-Year Estimates, Table 1701, https://data.census.gov/cedsci/table?q=Table%20S1701, retrieved Apr. 2, 2025.

Poverty Statistics	Essex	Glou- cester	King & Queen	King William	Lan- caster	Mathews	Middle- sex	Northum- berland	Rich- mond	West- moreland	10 Counties	Virginia	United States
Population for whom poverty status is determined	10,512	38,562	6,668	18,121	10,615	8,439	10,244	11,988	7,409	18,497	141,055	8,413,302	325 m
Population below poverty level	1,628	2,619	1,232	1,431	1,391	665	978	1,238	692	2,554	14,428	834,866	40 m
Percent below poverty level	15.5%	6.8%	18.5%	7.9%	13.1%	7.9%	9.5%	10.3%	9.3%	13.8%	10.2%	9.9%	12.4%
Below 50% of poverty level	671	1,416	742	856	248	341	435	510	305	1,350	6,874	415,552	19 m
Percent below poverty level by ag	e												
Under 18 years	27.1%	10.4%	43.2%	9.9%	21.3%	18.7%	12.1%	14.0%	2.3%	18.6%	15.1%	12.7%	16.3%
18 to 64 years	13.0%	6.4%	15.2%	7.0%	10.6%	6.5%	9.6%	10.5%	11.1%	14.0%	9.4%	9.4%	11.6%
60 years and over	10.9%	5.0%	9.1%	9.2%	12.4%	5.2%	7.4%	8.4%	10.6%	11.1%	8.5%	8.4%	10.6%
65 years and over	12.6%	4.6%	8.0%	8.5%	12.9%	4.8%	8.4%	8.8%	11.7%	10.3%	8.6%	8.3%	10.4%
Percent below poverty level by se	X												
Male	12.6%	5.3%	13.0%	8.4%	8.7%	10.8%	8.8%	10.2%	11.6%	14.0%	9.3%	8.8%	11.3%
Female	17.9%	8.3%	24.1%	7.4%	17.2%	5.0%	10.2%	10.4%	7.2%	13.6%	11.1%	11.0%	13.6%
Percent below poverty level by ra	ce and et	hnicity											
White	13.0%	6.0%	11.0%	7.1%	8.2%	6.4%	8.6%	11.8%	6.6%	13.2%	8.4%	7.9%	9.9%
Black or African American	20.7%	13.0%	28.7%	12.1%	24.5%	12.3%	8.3%	8.3%	21.0%	15.3%	16.7%	16.4%	21.3%
American Indian & Alaska Native	0.0%	0.0%	6.3%	11.2%	0.0%		0.0%	0.0%	0.0%	40.9%	7.8%	13.2%	21.8%
Asian	8.9%	0.0%		0.0%	0.0%		69.9%	3.5%	-	0.0%	8.5%	6.8%	9.9%
Native Hawaiian/Pacific Islander	0.0%			0.0%		0.0%	0.0%				0.0%	10.2%	17.2%
Other race	0.0%	8.4%	58.6%	0.0%	0.0%	20.6%	0.0%	0.0%	0.0%	9.0%	12.3%	16.3%	18.2%
Two or more races	7.6%	10.7%	41.4%	8.1%	23.4%	28.4%	13.9%	5.1%	1.2%	18.6%	13.4%	10.3%	14.7%
Hispanic or Latino origin	6.5%	0.9%	70.2%	28.3%	15.2%	1.8%	8.6%	0.0%	2.2%	9.9%	9.6%	13.2%	16.9%
Percent below poverty level by ed	lucationa	l attainm	ent, for p	opulation	age 25 y	ears and o	ver						
Less than high school graduate	18.5%	19.0%	26.3%	25.1%	29.3%	28.4%	14.2%	32.0%	16.0%	23.2%	22.5%	21.9%	24.0%
High school graduate/equivalency	16.0%	5.3%	12.4%	7.5%	14.0%	6.4%	12.9%	8.5%	11.9%	13.1%	9.8%	12.0%	14.0%
Some college, associate degree	10.9%	4.9%	11.8%	5.7%	12.5%	2.6%	10.5%	7.3%	7.8%	10.7%	7.5%	8.0%	9.6%
Bachelor's degree or higher	5.4%	4.0%	2.2%	3.6%	2.5%	0.7%	3.7%	7.3%	9.1%	6.3%	4.4%	3.3%	4.4%
Percent below poverty level by employment status, for civilian labor force age 16 years and over													
Employed	3.9%	1.7%	5.7%	2.8%	6.9%	2.3%	4.1%	3.7%	3.9%	4.5%	3.3%	4.6%	5.6%
Unemployed	57.6%	16.9%	31.4%	14.5%	7.9%	52.3%	33.8%	20.5%	60.4%	18.8%	25.2%	23.7%	27.3%
Percent below poverty level by work experience in past 12 months, for population age 16 and over													
Worked full-time, year-round	2.1%	0.8%	2.2%	0.9%	6.5%	1.7%	1.9%	1.7%	3.8%	1.9%	1.8%	1.9%	2.4%
Worked part-time or part-year	11.2%	4.8%	14.1%	10.8%	7.1%	9.3%	10.4%	9.9%	11.6%	14.3%	9.2%	13.6%	15.0%
Did not work	23.8%	13.6%	27.1%	17.6%	17.9%	10.3%	14.0%	13.9%	19.1%	20.1%	16.8%	17.8%	21.2%

Figure 24 Poverty Statistics - Source: 2023 ACS 5-Year Estimates, Table 1701

Housing

There are 78,456 housing units in the Middle Peninsula and Northern Neck (see Figure 25). The region has relatively few multi-unit structures; 86.4% of homes are single units, as compared to 72.6% for Virginia and 67.5% for the U.S. Essex, Lancaster, and Richmond have the most multi-unit structures, with 10 to 11% each – far less than Virginia's 23% and the U.S.'s 26.7%. ¹⁶

Typically multi-unit structures offer an opportunity for lower-priced housing; in Bay Aging's service area, mobile homes fill the gap. Across the region, 7.9% of housing units are mobile homes, compared to 4.4% in Virginia and 5.7% for the U.S. King & Queen has the highest percentage of mobile homes, 18.5%, followed by Essex with 13.6%.

For most counties in the Middle Peninsula and Northern Neck, the age of the housing stock is newer than Virginia and the U.S. The median year that structures were built is 1984 for Virginia and 1980 for the U.S.; in the region, only Richmond (1975), Mathews (1977), and Lancaster (1982) have housing older than Virginia's. King William's housing stock is the newest with a median year built of 1996.¹⁷ As noted in Figure 13, King William is the fastest-growing county in the area, thus new construction to accommodate their growing population results in a younger housing stock. Richmond, Mathews, and Lancaster, in contrast, have been losing population.

In some counties, housing stock age varies considerably for owner-occupied and renter-occupied units. In King & Queen, the median year built for rented units is 1967, 26 years older than the median for owner-occupied units (1993). Northumberland has a 10-year difference, and Essex's rental units are nine years older than owner-occupied units. For both Virginia and the U.S., the difference is two years. King William reverses the pattern with rental units whose median age is four years newer than owner-occupied units.

The proportion of rental units in the Middle Peninsula and Northern Neck is low – only 18.9% of the region's 59,800 occupied housing units are renter-occupied. Virginia and the U.S. have much higher proportions, 32.8% and 35% respectively. Fewer than 15% of Northumberland, King William, Middlesex, and Mathews' homes are renter-occupied. Essex (31.1%) and Richmond (29.5%) have the largest proportions of renters.

Measures of household size and composition reflect the population characteristics discussed in the Age and Population Growth sections. Average household size in Bay Aging's 10-county service area is 2.37 people, lower than Virginia (2.53) and the U.S. (2.54). Lancaster has the smallest average household size, 1.94, and Gloucester has the largest with 2.58 people per household.¹⁸

¹⁶ U.S. Census Bureau, 2023 ACS 5-Year Estimates, Table DP04 Selected Housing Characteristics, https://data.census.gov/table/ACSDP5Y2023.DP04?q=DP04, retrieved April 4, 2025.

¹⁷ U.S. Census Bureau, 2023 ACS 5-Year Estimates, Table B25037 Median Year Structure Built by Tenure, https://data.census.gov/table/ACSDT5Y2023.B25037?q=b25037, retrieved April 18, 2025.

¹⁸ U.S. Census Bureau, 2023 ACS 5-Year Estimates, Table S1101 Households and Families, https://data.census.gov/table/ACSST5Y2023.S1101?q=s1101, retrieved April 18, 2025.

Housing Statistics	Essex	Glou-	King &	King	Lan-	Mathews	Middle-	North-	Rich-	West-	10	Virginia	United
		cester	Queen	William	caster		sex	umberland	mond	moreland	Counties	_	States
Total housing units	5,785	17,204	3,485	7,605	7,483	5,486	7,140	9,009	3,959	11,300	78,456	3.65 m	142.3 m
Units in structure	1		ı					1				1	
1 unit	76.0%	83.9%	80.5%	94.6%	86.0%	93.3%	86.5%	88.9%	80.7%	89.0%	86.4%	72.6%	67.5%
2-9 units	7.2%	5.7%	1.0%	1.1%	7.7%	2.5%	4.4%	2.7%	5.6%	2.2%	4.2%	9.0%	12.3%
10+ units	3.2%	1.0%	0.0%	1.7%	2.4%	0.4%	0.4%	0.6%	4.8%	0.9%	1.4%	14.0%	14.4%
Mobile home	13.6%	9.2%	18.5%	2.5%	4.0%	3.8%	8.7%	7.7%	8.8%	7.6%	7.9%	4.4%	5.7%
Boat, RV, van, etc.	0.0%	0.2%	0.0%	0.1%	0.0%	0.0%	0.0%	0.2%	0.0%	0.3%	0.1%	0.0%	0.1%
Age of structure													
Median year structure built	1985	1988	1990	1996	1982	1977	1987	1991	1975	1987		1984	1980
Owner-occupied units	1988	1989	1993	1996	1982	1980	1988	1992	1976	1987	-	1985	1981
Renter-occupied units	1979	1982	1967	2000	1982	1973	1984	1982	1970	1986	-	1983	1979
Occupied housing units	Occupied housing units												
Percent of units occupied	76.0%	87.8%	80.7%	93.6%	73.1%	68.7%	66.3%	60.3%	74.0%	71.1%	76.2%	91.0%	89.6%
Total households	4,396	15,111	2,814	7,115	5,468	3,767	4,733	5,436	2,931	8,029	59,800	3.33 m	127.5 m
Owner-occupied units	68.9%	79.8%	77.4%	88.8%	79.8%	85.6%	85.7%	89.3%	70.5%	79.1%	81.1%	67.2%	65.0%
Average household size	2.38	2.58	2.37	2.55	1.94	2.22	2.19	2.22	2.53	2.31	2.37	2.53	2.54
Households with one or	25.6%	25.9%	23.0%	32.9%	17.1%	19.9%	18.9%	15.7%	24.0%	23.4%	23.5%	30.6%	29.9%
more people under age 18	25.0%	25.9%	23.0%	32.9%	17.170	19.9%	16.9%	15.7%	24.0%	23.4%	23.5%	30.0%	29.9%
Households with one or	52.6%	49.5%	54.5%	43.8%	66.4%	60.4%	63.9%	72.4%	58.1%	56.0%	56.0%	40.3%	41.4%
more people 60 years & up	32.076	49.570	34.370	43.670	00.476	00.470	03.576	72.470	JO.170	30.076	30.076	40.37	41.4/0
Households with one or	40.2%	37.2%	43.0%	31.0%	57.6%	51.0%	52.6%	59.7%	42.6%	43.6%	44.1%	30.3%	31.3%
more people 65 years & up													
Householder living alone	35.8%	24.8%	25.6%	23.7%	38.8%	32.3%	30.4%	32.2%	27.1%	36.2%	30.0%	28.2%	28.5%
Living alone and 65 years+	17.2%	10.9%	15.5%	12.5%	26.2%	23.5%	20.1%	19.3%	20.4%	17.8%	16.8%	11.2%	11.6%
Lacking complete plumbing	0.2%	0.0%	0.0%	0.3%	0.6%	0.8%	0.3%	0.5%	1.8%	0.6%	0.4%	0.3%	0.4%
Vacant housing units													
Total vacant units	1,389	2,093	671	490	2,015	1,719	2,407	3,573	1,028	3,271	18,656	328,524	14.85 m
For rent	3.7%	11.0%	7.5%	0.4%	4.8%	0.0%	4.6%	3.4%	12.0%	4.0%	4.9%	17.4%	17.5%
Rented, not occupied	0.5%	0.8%	0.0%	0.0%	2.1%	0.0%	0.8%	0.0%	0.0%	0.9%	0.6%	5.1%	3.6%
For sale only	7.8%	11.5%	0.0%	17.8%	7.2%	2.2%	5.1%	2.5%	3.8%	2.6%	5.1%	6.2%	5.7%
Sold, not occupied	3.8%	0.0%	3.3%	0.0%	3.0%	6.2%	0.2%	6.1%	1.5%	1.7%	2.9%	4.6%	4.1%
Seasonal & recreational use	57.3%	42.0%	44.0%	21.2%	63.8%	72.8%	72.9%	72.1%	38.7%	59.6%	60.5%	23.1%	32.7%
Other vacant	26.9%	34.7%	45.3%	60.6%	19.1%	18.7%	16.5%	15.9%	44.1%	31.2%	26.0%	43.6%	36.4%

Figure 25 Housing Statistics – Source: 2023 ACS 5-Year Estimates, Tables DP04, B25037, B25004 and S1101

Every county in Bay Aging's 10-county service area except King William has a smaller percentage of households with one or more people under age 18 than Virginia (30.6%) and the U.S. (29.9%). Across the region, 23.5% of households have at least one child; Northumberland has the fewest households with children (15.7%) and King William has the most (32.9%). Conversely, the region has a larger percentage of households with one or more people age 60 and up (56%) than Virgina (40.3%) and the U.S. (41.4%). Northumberland has the highest proportion of households with older adults (72.4%) and King William has the lowest (43.8%). These measures are based on households and differ from the statistics presented in the Age section, which count individual people.

The proportion of householders living alone has risen to 28.2% in Virginia and 28.5% for the U.S. Thirty percent of Middle Peninsula and Northern Neck households consist of one person, with the highest rates of living alone occurring in Lancaster (38.8%), Westmoreland (36.2%), and Essex (35.8%). King William has the fewest one-person households at 23.7%. While adults of any age may live alone, it commonly occurs during young adulthood, prior to starting families, and in later life after people become empty-nesters and/or are widowed. Across the 10-county service area, 16.8% of occupied housing units are home to a person age 65 or older who lives alone. Lancaster has the highest proportion of homes occupied by one older adult, 26.2%, followed by Mathews at 23.5%. Gloucester has the lowest proportion at 10.9%.

The percentage of occupied housing units that lack complete plumbing facilities is 0.4% in the region, which is the same rate as the U.S. and just above Virginia's rate of 0.3%. The counties with the highest proportion of homes lacking complete plumbing are Richmond (1.8%), Mathews (0.8%), Lancaster (0.6%), and Westmoreland (0.6%). A growing issue for older adults that is not captured in these statistics is homes whose plumbing is complete but not accessible. Bay Aging's Single-Family Housing department offers programs to address plumbing problems; because funding is insufficient to meet the need, in FY2024 and FY2025 Bay Aging's leadership and Board of Directors allocated "special funds" earned from fee-forservice contracts to projects including plumbing and ramp construction to reduce the waiting list for home modifications that support aging in place.

Most counties in the Middle Peninsula and Northern Neck have much larger percentages of vacant units than Virginia (9%) and the U.S. (10.4%). Across the region, 23.8% of housing units are vacant. Northumberland (39.7%), Middlesex (33.7%), and Mathews (31.3%) have the most vacancies, and for all three of these counties, 72 to 73% of vacancies can be attributed to seasonal/recreational use. Hing William is the sole county in the region with fewer vacancies (6.4%) than the Virginia average. It should be noted that structures which are dilapidated to the point of being open to the elements, a common sight in Bay Aging's service area, are not included in the Census's count of housing units or vacancies.

¹⁹ U.S. Census Bureau, 2023 ACS 5-Year Estimates, Table B25004 Vacancy Status, https://data.census.gov/table/ACSDT5Y2023.B25004?q=b25004, retrieved April 18, 2025.

Although the Middle Peninsula and Northern Neck are rural, housing costs can be challenging. Figure 26 depicts median household income for owner-occupied and renter-occupied housing units; in every county, income is higher for owners than renters. On average, the median income of households that own their home is 81% more than households that rent.

Figure 26 also shows housing costs for owners and renters. Housing costs include mortgage payments or rent, utilities, insurance, taxes, and fees. For six of 10 counties, housing costs are higher for renters than owners. In Gloucester and King William, median housing costs for both owners and renters exceed \$1,100 per month.²⁰

Many residents of the Middle Peninsula and Northern Neck are "cost-burdened," defined as spending more than 30% of household income on housing. The percentage of homeowners who are cost-burdened varies from 16.4% in Mathews to 25.9% in Westmoreland, averaging 20.6% across the region – slightly higher than the Virginia average of

Financial Characteristics		lousehold ome		Monthly g Costs	Percent wi Costs ≥ Househo	Median Value of Owner-	
for Occupied Housing Units	Owner- Occupied	Renter- Occupied	Owner- Occupied	Renter- Occupied	Owner- Occupied	Renter- Occupied	Occupied Homes
Essex	\$61,823	\$44,112	\$942	\$967	19.3%	45.2%	\$228,600
Gloucester	\$94,495	\$52,279	\$1,294	\$1,144	19.4%	39.1%	\$289,200
King & Queen	\$85,375	\$49,857	\$1,083	\$982	21.3%	28.4%	\$240,900
King William	\$91,667	\$41,172	\$1,329	\$1,246	19.7%	41.7%	\$276,500
Lancaster	\$82,576	\$45,718	\$917	\$978	21.5%	48.4%	\$307,600
Mathews	\$81,271	\$41,061	\$823	\$1,108	16.4%	27.1%	\$348,800
Middlesex	\$80,380	\$36,925	\$905	\$1,071	19.2%	40.2%	\$299,800
Northumberland	\$72,344	\$55,641	\$810	\$1,053	22.0%	20.3%	\$333,100
Richmond	\$74,669	\$55,029	\$858	\$1,011	18.9%	22.9%	\$214,200
Westmoreland	\$71,504	\$32,030	\$1,087	\$991	25.9%	45.9%	\$244,000
10-County Service Area	\$82,473 estimated	\$45,642 estimated	\$1,075 estimated	\$1,061 estimated	20.6%	38.6%	\$283,376 estimated
Virginia	\$111,554	\$58,638	\$1,523	\$1,514	20.0%	44.7%	\$360,700
United States	\$97,352	\$51,393	\$1,331	\$1,348	22.1%	46.8%	\$303,400

Figure 26 Financial Characteristics for Owner- and Renter-Occupied Housing Units Source: 2023 ACS 5-Year Estimates, Tables S2503 and DP04

20%. Median home values for owner-occupied homes (which relates to mortgage costs, a major component of housing costs) in the 10-county region average \$283,376, much lower than Virginia's \$360,700,²² but homeowners' household incomes are also lower in the region (\$82,473) than Virginia (\$111,554).

²⁰ U.S. Census Bureau, 2023 ACS 5-Year Estimates, Table S2503 Financial Characteristics, https://data.census.gov/table/ACSST5Y2023.S2503?q=s2503, retrieved April 18, 2025.

²¹ 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.

²² U.S. Census Bureau, 2023 ACS 5-Year Estimates, Table DP04 Selected Housing Characteristics, https://data.census.gov/table/ACSDP5Y2023.DP04?q=DP04, retrieved April 4, 2025.

Across Virginia, 44.7% of renters are cost-burdened. In the Middle Peninsula and Northern Neck, counties split into two groups. In these four counties, 20-29% of renters are cost-burdened:

- Northumberland 20.3%
- Richmond 22.9%
- Mathews 27.1%
- King & Queen 28.4%

In these six counties, more than 39% of renters are costburdened:

- Gloucester 39.1%
- Middlesex 40.2%
- King William 41.7%
- Essex 45.2%
- Westmoreland 45.9%
- Lancaster 48.4%

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. ²³ Figure 28 depicts their 2025 map of Population Health and Well-being in Virginia, which is based on factors measuring length of life and quality of life. Figure 29 is their map of 2025 Community Conditions in Virginia, as measured by an index comprised of measures of health behaviors, clinical care, and social, economic, and environmental factors. For both maps, 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. Within the Middle Peninsula and Northern Neck region, Essex scores poorly while Mathews, Gloucester, and King William score fairly well.

County	Life Expectancy (years)	Rank in Region	Life Expectancy Black/ African American	Life Expectancy Non- Hispanic White	Gap in Life Expectancy for Blacks/ African Americans
Essex	73.0	10	69.9	74.5	-4.7
Gloucester	76.1	3	69.3	76.2	-6.9
King & Queen	73.7	8			
King William	75.2	7	70.6	75.7	-5.1
Lancaster	75.3	6	70.3	76.9	-6.6
Mathews	75.8	4			
Middlesex	73.5	9			
Northumberland	76.2	2	72.4	76.3	-3.9
Richmond	76.4	1	75.5	76.2	-0.8
Westmoreland	75.3	5	73.5	75.2	-1.6

Figure 27 Life Expectancy
Source: County Health Rankings & Roadmaps

A component of the Population Health and Well-being index is life expectancy. Figure 27 compares life expectancy for the ten counties in Bay Aging's primary service area; Richmond places first with 76.4 and Essex is last at 73. All counties fall short of Virginia's average of 77.6. Life expectancy for non-Hispanic

²³ University of Wisconsin Population Health Institute, "County Health Rankings & Roadmaps," https://www.countyhealthrankings.org/health-data, retrieved Apr. 8, 2025.



2025 Population Health and Well-being - Virginia

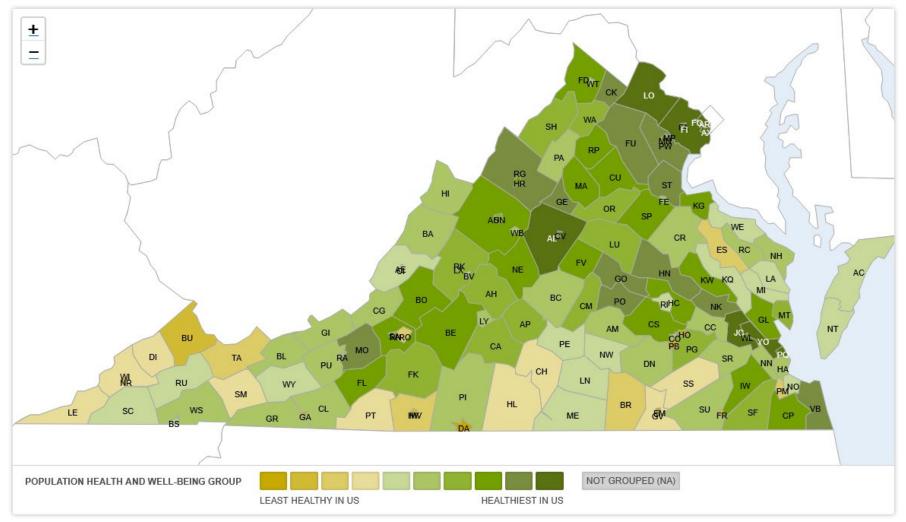


Figure 28 Population Health and Well-being

Source: 2025 County Health Rankings & Roadmaps, https://www.countyhealthrankings.org/health-data/virginia?year=2025



2025 Community Conditions - Virginia

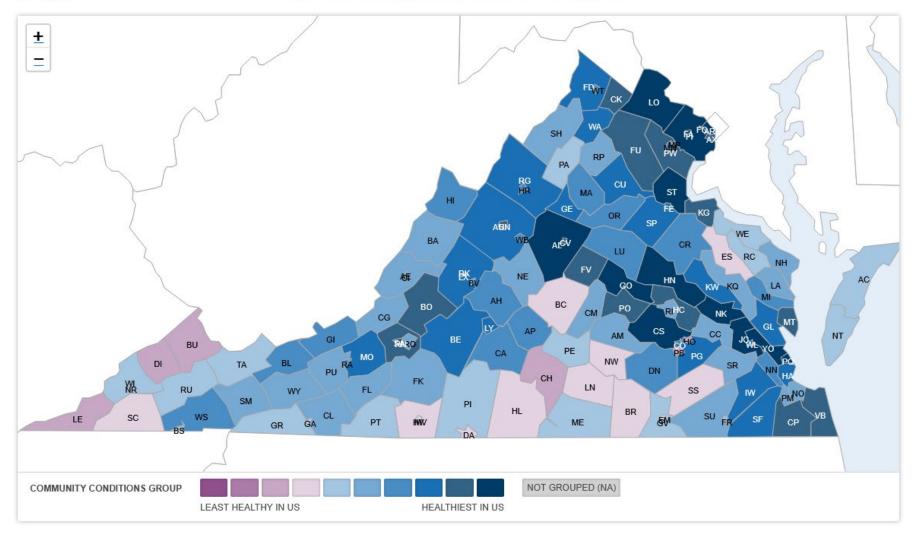


Figure 29 Community Conditions

Source: 2025 County Health Rankings & Roadmaps, https://www.countyhealthrankings.org/health-data/virginia?year=2025

Whites exceeds that of Blacks in all counties for which data is available, with a gap ranging from less than a year in Richmond to more than 6 years in Gloucester and Lancaster.

Additional statewide maps from County Health Rankings & Roadmaps and other sources appear in Appendix A:

- Life expectancy
- Poor or Fair Health
- Poor Mental Health Days
- Low Birth Weight
- Physical Inactivity
- Adult Smoking
- Excessive Drinking
- Adult Obesity
- Diabetes Prevalence
- Alzheimer's Dementia
- Injury Deaths
- Uninsured (under age 65)
- Medicaid Enrollment
- Access to Exercise Opportunities

The Middle Peninsula and Northern Neck have high rates of disability compared to Virginia and the U.S. Figure 30 shows that the region's disability rate is 16.7% and ranges from 12.6% in King William to 20.3% in Mathews. In comparison, Virginia's rate is 12.2% and the U.S. rate is 13%. Rates are slightly higher for women, though not in all counties.

In Virginia and the U.S., disability prevalence is lower among the White population than the Black/African American population, but the opposite occurs in Bay Aging's service area; 17.4% of

the White population has a disability, compared to 15.1% of the Black/African American population. This outcome likely relates to the White population's longer life expectancy – the disability rate in the region for people age 75 and older is 44.4%, compared to 23% for people age 65 to 74.

Due to small sample sizes, the disability rates for other minority groups and the population under age 5 have large margins of error, especially at the county level, and should be interpreted with caution.

Mathews stands out as having unusually high disability rates for people age 5-17 (15.7%) and age 18-34 (21.8%). A report by the Virginia Board for People with Disabilities shows high disability prevalence in the southern and western portions of Mathews. ²⁴ Bay Aging supports their recommendations for broadband access and affordability, as well as telehealth accessibility and digital health literacy, to assist individuals with disabilities in accessing healthcare services.

Figure 31 details disability by types:

- Hearing difficulty
- Vision difficulty
- Cognitive difficulty
- Ambulatory difficulty
- Self-care difficulty
- Independent living difficulty

Some people have more than one disability, thus the percentages for the six disability types do not sum to the *Percent with a disability* percentages at the top of the chart.

²⁴ Virginia Board for People with Disabilities, "Geographic Disparities in Healthcare Access," page 49, https://vbpd.virginia.gov/wpcontent/uploads/2024/01/Assessment-of-Geographic-Disparities_Electronic.pdf, retrieved February 10, 2025.

Disability Status	Essex	Glou- cester	King & Queen	King William	Lan- caster	Mathews	Middle- sex	North- umberland	Rich- mond	West- moreland	10 Counties	Virginia	United States
Total civilian non- institutionalized population	10,530	38,479	6,676	18,164	10,601	8,439	10,433	11,966	7,428	18,427	141,143	8.4 m	327.4 m
With a disability	1,681	6,630	1,091	2,294	1,769	1,712	2,089	1,762	1,245	3,342	23,615	1.0 m	42.7 m
Percent with a disability	16.0%	17.2%	16.3%	12.6%	16.7%	20.3%	20.0%	14.7%	16.8%	18.1%	16.7%	12.2%	13.0%
Disability prevalence by sex													
Male	14.9%	16.0%	16.0%	12.7%	18.6%	22.6%	18.6%	13.8%	17.4%	16.9%	16.3%	12.0%	12.9%
Female	16.9%	18.4%	16.7%	12.6%	14.9%	18.0%	21.4%	15.6%	16.2%	19.2%	17.2%	12.5%	13.2%
Disability prevalence by race	and ethn	icity											
White alone	19.7%	17.6%	17.5%	13.1%	18.1%	18.3%	20.0%	15.4%	18.4%	19.4%	17.4%	13.0%	13.9%
Black or African American alone	11.4%	14.2%	15.7%	11.8%	14.8%	37.2%	19.9%	11.2%	15.8%	17.7%	15.1%	14.0%	14.5%
American Indian and Alaska Native alone		36.6%	12.5%	23.1%					54.3%		28.7%	14.8%	15.7%
Asian alone		9.7%		42.5%			15.0%	2.0%		6.2%	9.8%	6.9%	7.9%
Native Hawaiian and Other Pacific Islander alone												18.0%	12.7%
Some other race alone		9.2%	10.8%	2.9%	13.4%	20.6%	34.6%	8.6%			5.1%	7.7%	10.0%
Two or more races	13.2%	17.6%	8.7%	1.7%	6.8%	29.9%	22.0%	23.9%	8.0%	20.8%	16.0%	9.2%	10.9%
Hispanic or Latino (of any race)	8.5%	6.2%	10.6%	8.0%	21.6%	11.4%	5.6%	4.0%	6.5%	11.5%	8.4%	7.7%	9.9%
Disability prevalence by age													
Under 5 years			1.3%		3.2%				4.5%		0.5%	0.7%	0.7%
5 to 17 years	5.9%	7.7%		5.2%	3.2%	15.7%	8.5%	6.2%	7.9%	7.8%	7.0%	6.0%	6.1%
18 to 34 years	7.9%	6.7%	13.2%	6.9%	9.4%	21.8%	11.9%	10.0%	6.8%	6.0%	8.5%	7.2%	7.7%
35 to 64 years	20.3%	16.6%	15.9%	13.2%	13.7%	15.8%	20.0%	10.0%	14.6%	17.5%	15.9%	11.5%	12.4%
65 to 74 years	14.7%	31.5%	24.1%	20.1%	17.2%	11.0%	23.1%	17.4%	38.5%	24.3%	23.0%	22.4%	24.0%
75 years and over	38.6%	51.3%	45.4%	52.6%	38.5%	50.0%	40.1%	32.5%	35.3%	52.9%	44.4%	45.0%	46.5%

Figure 30 Disability Status Source: 2023 ACS 5-Year Estimates, Table S1810

Disability Tymas	Госом	Glou-	King &	King	Lan-	B.C. et le euro	Middle-	North-	Rich-	West-	10	Minelinia	United
Disability Types	Essex	cester	Queen	William	caster	Mathews	sex	umberland	mond	moreland	Counties	Virginia	States
With a disability	1,681	6,630	1,091	2,294	1,769	1,712	2,089	1,762	1,245	3,342	23,615	1.0 m	42.7 m
Percent with a disability	16.0%	17.2%	16.3%	12.6%	16.7%	20.3%	20.0%	14.7%	16.8%	18.10%	16.7%	12.2%	13.0%
With a hearing difficulty													
With a hearing difficulty	408	2,056	382	633	555	590	891	756	404	1,183	7,858	284,467	11.7 m
% with a hearing difficulty	3.9%	5.3%	5.7%	3.5%	5.2%	7.0%	8.5%	6.3%	5.4%	6.40%	5.6%	3.4%	3.6%
Under age 18				1	0.7%	7.6%	0.9%		1.3%		0.6%	0.5%	0.5%
Age 65+	9.8%	16.2%	14.1%	13.2%	11.1%	11.9%	12.7%	14.4%	18.7%	16.2%	14.1%	12.7%	13.5%
With a vision difficulty													
With a vision difficulty	268	1,287	235	239	379	153	412	384	226	374	3,957	190,451	7.9 m
% with a vision difficulty	2.5%	3.3%	3.5%	1.3%	3.6%	1.8%	3.9%	3.2%	3.0%	2.0%	2.8%	2.3%	2.4%
Under age 18		1.5%	0.3%								0.5%	0.8%	0.8%
Age 65+	2.0%	5.2%	1.5%	4.0%	6.2%	3.0%	5.7%	4.9%	6.1%	4.5%	4.6%	5.7%	6.0%
With a cognitive difficulty (age	e 5+)												
With a cognitive difficulty	492	2,791	291	903	503	665	814	524	471	975	8,429	393,268	16.8m
% with a cognitive difficulty	4.9%	7.6%	4.6%	5.3%	4.9%	8.2%	8.1%	4.6%	6.8%	5.6%	6.3%	5.0%	5.4%
Age 5-17	5.9%	5.2%	0.0%	3.4%	3.2%	15.0%	7.4%	6.2%	7.9%	7.0%	5.7%	4.7%	4.7%
Age 65+	1.9%	13.2%	4.3%	6.2%	3.5%	4.2%	6.2%	4.5%	11.5%	7.6%	7.1%	7.4%	8.0%
With an ambulatory difficulty	(age 5+)												
With an ambulatory difficulty	1,037	3,575	499	1,111	1,059	819	1,043	839	689	1,706	12,377	489,863	20.6 m
% with ambulatory difficulty	10.4%	9.8%	7.8%	6.5%	10.3%	10.0%	10.4%	7.3%	9.9%	9.8%	9.2%	6.2%	6.7%
Age 5-17		1.1%		1.8%	-	-	-		6.3%		1.0%	0.6%	0.6%
Age 65+	13.9%	24.2%	15.2%	18.7%	16.8%	16.2%	16.0%	14.3%	26.1%	21.7%	18.9%	19.6%	20.7%
With a self-care difficulty (age	5+)												
With a self-care difficulty	327	1,492	233	363	354	285	413	429	345	639	4,880	187,374	7.9 m
% with a self-care difficulty	3.3%	4.1%	3.7%	2.1%	3.4%	3.5%	4.1%	3.8%	5.0%	3.7%	3.6%	2.4%	2.6%
Age 5-17		0.4%		-	-	2.8%	-		7.9%	4.3%	1.2%	1.3%	1.1%
Age 65+	2.8%	12.1%	5.3%	4.1%	5.6%	2.6%	6.3%	6.7%	11.4%	7.4%	7.2%	6.9%	7.2%
With an independent living dif	With an independent living difficulty (age 18+)												
Independent living difficulty	654	2,546	311	889	676	462	824	598	408	1,050	8,418	352,934	14.9 m
% with ind. living difficulty	7.6%	8.3%	5.7%	6.4%	7.5%	6.5%	9.5%	5.9%	7.0%	7.0%	7.3%	5.4%	5.9%
Age 65+	7.5%	15.8%	7.7%	8.7%	9.3%	7.6%	11.6%	8.8%	15.6%	12.4%	11.2%	12.7%	13.3%

Figure 31 Disability Types – Source: 2023 ACS 5-Year Estimates, Table S1810

Survey Results

Methodology

As part of the community needs assessment process, Bay Aging conducted a community survey that launched October 1, 2024 and closed November 25, 2024. Survey questions were based on the previous needs assessment survey (completed in December 2021) with updates to improve clarity, increase inclusivity, enhance analysis, and accommodate changes in programs and services. Community members could take the survey on paper or online via SurveyMonkey. A QR code offered easy access to the survey by smart phone or tablet.

Bay Aging promoted the community needs assessment survey on social media, in newspaper ads (see Figure 32), and on signs on buses. Staff distributed the survey electronically by email, and delivered 1,800 paper copies to local libraries, apartment communities, senior centers, transit facilities, and Meals on Wheels recipients. As an incentive, survey promotions themed around the tagline "A penny for your thoughts? How about \$50?" enticed participants with the offer of \$50 gift cards to be given away to five randomly chosen survey respondents. Cindy Maultsby of Mathews (Figure 33) and four other participants were selected in the drawing held on December 2, 2024.

271 people responded to the survey electronically. Twelve of those respondents answered the first question by indicating that they were not familiar with the Middle Peninsula/Northern Neck region and lived elsewhere; the survey platform automatically ended the survey at that point for those respondents. Staff manually entered responses from 262 paper surveys into SurveyMonkey, yielding a total of 521 usable responses, 7% more than in 2021. Some participants did not answer every question, therefore the number of responses for individual survey questions typically ranged from 410 to 500.

Bay Aging staff are grateful for the Board of Directors' participation in the survey development and distribution process. Special thanks are due to Lynda Smith for her assistance with advertising and to Bruce Craig for his insights on improving the survey format.



Figure 32 Newspaper advertisement promoting the survey



Figure 33 Gift card winner Cindy Maultsby

Survey Demographics

91% of survey respondents are year-round residents of the Middle Peninsula or Northern Neck (Figure 34). 6% are seasonal residents, and 3% live elsewhere but have a connection to the region (for example, working in the area or being a caregiver for a family member who lives in the region). As described in the Survey Methodology section, survey respondents who live outside the region and described themselves as being unfamiliar with the Middle Peninsula and Northern Neck were precluded from answering additional survey questions.

The average survey respondent has lived in the region for more than 20.8 years (based on the lower ends of the ranges selected). The largest share of participants, 27%, have lived in the area for 40 or more years. 25% have lived in the region for fewer than 10 years (Figure 35). The total number of years survey respondents have lived in the Middle Peninsula or Northern Neck is at least 10,358 years.

10,358+ YEARS

OF RESIDENCE IN THE MIDDLE PENINSULA AND NORTHERN NECK

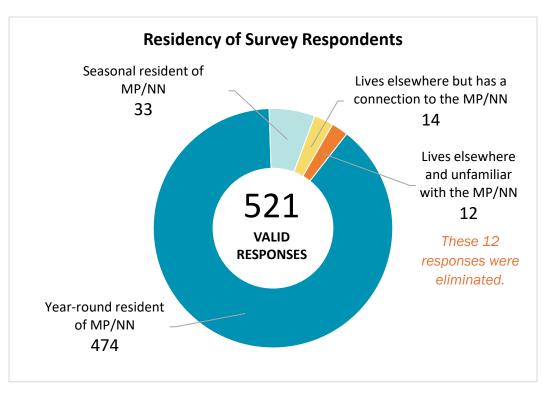


Figure 34 Survey Respondent Residency

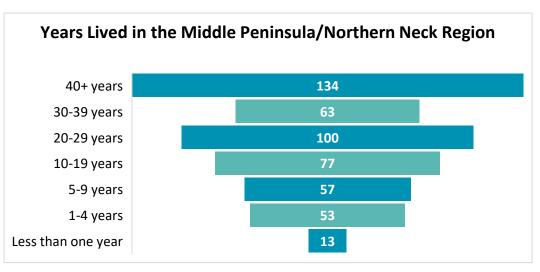


Figure 35 How Long Survey Respondents Have Lived Here

Surveys were completed by residents of all 10 counties in Bay Aging's primary service area, as shown in Figure 36. The 16 respondents who selected "Other" were given the opportunity to write in their county; responses were broadly distributed with no duplication except for two in Newport News and two in Portsmouth.

Gloucester residents submitted the largest number of responses, but as shown in Figure 4, Gloucester has more than twice the population of any of the other counties in the Middle Peninsula and Northern Neck so it's to be expected that Gloucester would generate the most responses.

Figure 37 depicts the percentage of each county's population that responded to the survey. The yellow dotted line represents the 0.35% of people across the region who participated, and the blue bars illustrate whether each county's rate of participation in percentage terms was above or below average. Viewed in this light, Gloucester's response rate is slightly below average. King William and Essex have the lowest rates of response, and both have lower representation than in Bay Aging's 2021 survey. Westmoreland is also quite underrepresented in the survey but improved compared to 2021. Middlesex is the most overrepresented county; Northumberland and Mathews also have strong response rates.

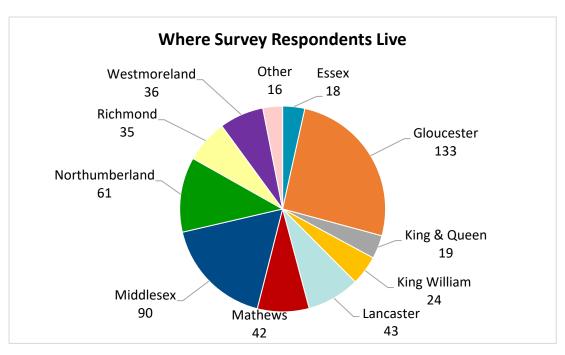


Figure 36 Survey Respondents by County

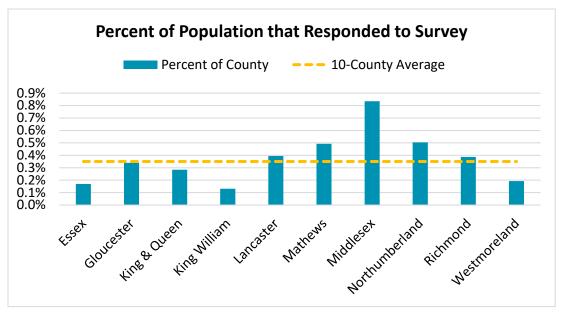


Figure 37 Survey Response Rate by County

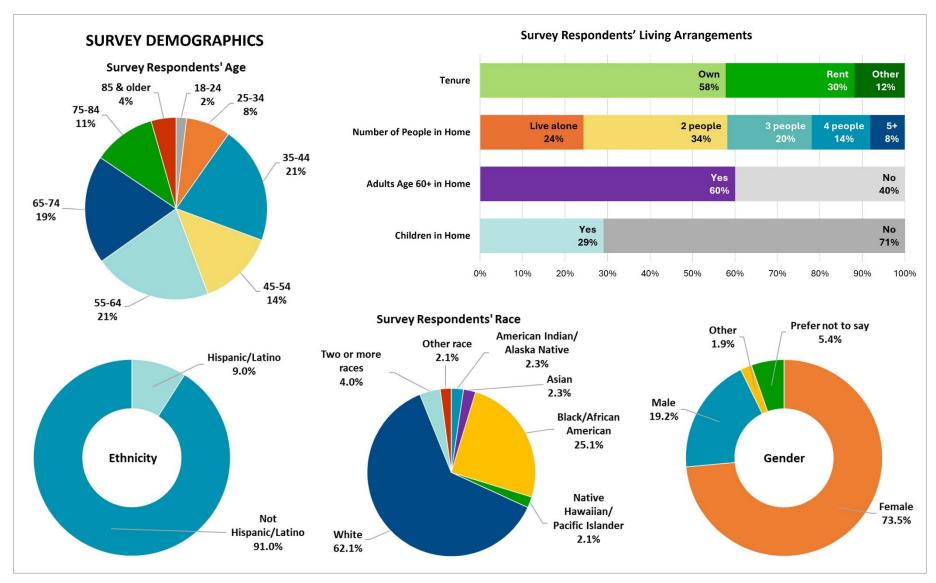


Figure 38 Survey Demographics

Figure 38 shows survey participants' demographic characteristics with regard to age, living arrangements, ethnicity, race, and gender. This information was collected to compare respondents' demographics to that of the region. Statistical significance requires not only a sufficient sample size, but also an unbiased sample - characteristics of survey participants should be representative of the local

population. A strong response from diverse members of the community is important to establish the community needs assessment survey as a valid tool for assessing community needs. Following is a a comparison of survey demographics with regional demographics:

- Age: 40% of survey respondents are age 55-74. For most of the U.S., this would not be representative of the population, but Bay Aging's service area is an older region. The population pyramids in Figures 6 and 7 illustrate the large proportion of people in this age group in the Middle Peninsula and Northern Neck.
- Homeownership: renters are over-represented in the survey. Fewer than 20% of households in the region are renters (Figure 25) and 30% of survey participants rent.
- Living alone: 30% of households in the Middle Peninsula/Northern Neck consist of one person. This figure is not directly comparable to the 24% of survey respondents who live alone, because the former counts households and the latter counts people. The American Community Survey consolidates household members' responses for questions about housing and households; that is not feasible for the community needs assessment survey, which does not record or track respondents' street addresses.
- Adults age 60+ in home: 56% of households in the region include at least one person age 60+. 60% of survey participants have at least one adult age 60+ in their home (these percentages are not exactly comparable, being households versus people).
- Children in home: 23.5% of households in the region include one or more children. 29% of survey

- participants have a child in their home (these percentages are not exactly comparable, being households versus people).
- Ethnicity: the Hispanic/Latino population appears to be over-represented in the survey. 4% of people in the region are Hispanic/Latino, whereas 9% of survey respondents identify as Hispanic/Latino. However, it is possible that regional estimates of the Hispanic/Latino population are low; new questions in the Census and American Community Survey about citizenship could discourage participation in official government surveys by some minority groups.
- Race: all minority groups except Two or more races are over-represented in the survey relative to the region (Figure 14). 62% of survey participants are White, whereas 74% of the Middle Peninsula/Northern Neck is White.
- Gender: Men are very under-represented in the survey.
 Only 19.2% of survey respondents identify as male,
 although 49.2% of the region's population is male.

Overall, vulnerable groups appear to be well represented in the community needs assessment survey. Given the 10-county region's population, a sample size of at least 320 is needed to achieve a 5% margin of error with 95% confidence. A sample size of 475 reduces the margin of error to 4%. However, typically not every respondent answers every question, so Bay Aging's team was pleased to exceed its goal of 500 surveys. It should be noted that filtering results by county increases the margin of error; as an example, Gloucester residents' 133 survey responses yield a margin of error of 8% given Gloucester's population.

Ideally the respondents to a survey would be randomly selected in order to avoid sampling bias. Random selection can be done telephonically or by mail, but both options require considerable time and/or money. This survey almost certainly 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. People who were familiar with Bay Aging might be more likely to take the survey, and the intent of the survey is to assess the community, not Bay Aging's customers. The survey therefore asked respondents if they had ever used Bay Aging's services. As shown in Figure 39, 56% of survey participants stated they had not. Those who self-identified as clients were asked about their satisfaction; 94.5% described themselves as *Very Satisfied* or *Satisfied* (Figure 40).

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 much 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. ²⁵ Second, weighting responses could complicate presentation of the survey results to non-

Have you ever used Bay Aging's services, including Bay Transit, Bay Housing, Bay Health and Bay Home Care?

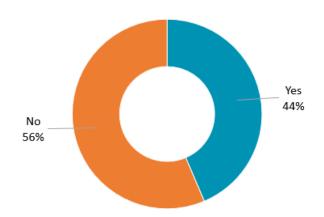


Figure 39 Use of Bay Aging's Services by Survey Respondents

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

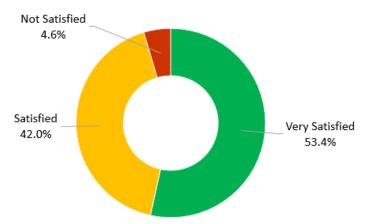


Figure 40 Customer Satisfaction

²⁵ 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/.

technical audiences such as local community groups by obscuring basic counts and percentages.

Survey design can also create bias. 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 questions in alphabetical order to avoid having their own conscious or subconscious biases impact the order of response options (the survey appears in Appendix C). 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.

Quality of Life

The community needs assessment survey asked respondents to describe their satisfaction with quality of life and several broad categories such as housing and transportation. Overall, 66.8% of participants responded that they are satisfied with quality of life, which is 6.6 percentage points lower than in 2021. The map in Figure 41 illustrates satisfaction with quality of life by county; rates vary from 85.5% in Northumberland to 46.2% in Essex.

Northumberland, King William, and King & Queen expressed higher rates of satisfaction in 2024 than in 2021; the other seven counties in Bay Aging's primary service area had declines in satisfaction with qualify of life. Essex had the largest decrease at 19.7 percentage points; Lancaster and Middlesex

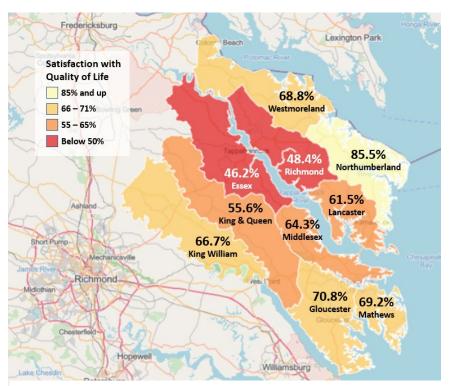


Figure 41 Satisfaction with Quality of Life

both saw decreases of 16.1 percentage points. The two counties with the lowest satisfaction rates, Essex and Richmond, also have the largest minority populations (in percentage terms). Segmenting the survey responses by race reveals that across the region, 72.4% of the White population is satisfied with quality of life, but only 50.3% of the minority population feels satisfied with quality of life. While both groups had drops in satisfaction from 2021 to 2024, the decline for minorities was 16 percentage points, four times larger than the 4 percentage-point decline for Whites.

Figure 42 shows survey respondents' satisfaction with 10 aspects of community life; as in 2021, *Quality of life here*

scored higher than all other categories. Retiring here and Raising children here again placed second and third, while Housing options available here and Economic opportunities available here placed at the bottom of satisfaction rankings.

However, across the board, participants were less satisfied in 2024 than in 2021 – every category has a larger proportion of dissatisfied respondents in 2024 than in 2021 (one category, Socialization opportunities, is new for 2024).

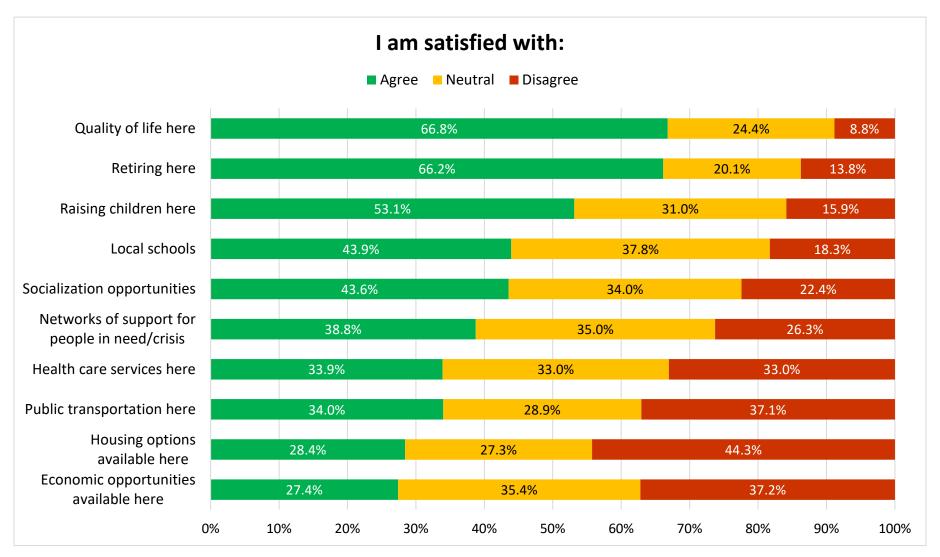


Figure 42 Satisfaction with Quality of Life

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 43 shows participants' responses, color-coded by first, second and third choice. Affordable housing received the most votes and received more than double the number of firstchoice votes as any other option. In 2021 Affordable housing had the most first-choice votes but fewer total votes than Availability of health care services and Clean, healthy environment.

As in 2021, Low crime/safe neighborhoods, Availability of health care services, and Clean, healthy environment rank near the top.

Reliable internet/Wi-Fi service ranks fourth on the list, compared to tenth in 2021.

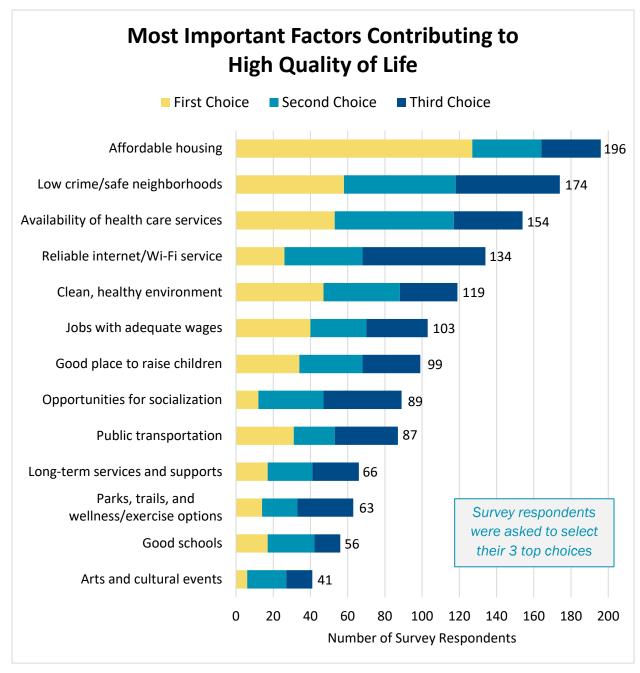


Figure 43 Factors Contributing to High Quality of Life

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	Low crime/safe neighborhoods	Availability of health care services		
Essex	Affordable housing	Public transportation*	Reliable internet/Wi-Fi service*		
Gloucester	Affordable housing	Low crime/safe neighborhoods	Clean, healthy environment		
King & Queen	Affordable housing	Availability of health care services*	Reliable internet/Wi-Fi service*		
King William	Affordable housing	Reliable internet/Wi-Fi service*	Jobs with adequate wages*		
Lancaster	Affordable housing	Jobs with adequate wages	Availability of health care services		
Mathews	Affordable housing	Clean, healthy environment	Low crime/safe neighborhoods		
Middlesex	Affordable housing	Low crime/safe neighborhoods	Availability of health care services		
Northumberland	Clean, healthy environment	Availability of health care services	Affordable housing		
Richmond	Affordable housing	Low crime/safe neighborhoods	Reliable internet/Wi-Fi service		
Westmoreland *Denotes a tie	Affordable housing	Availability of health care services*	Low crime/safe neighborhoods*		

Figure 44 Factors Contributing to High Quality of Life, by County

Figure 44 shows first-choice votes for the most important factors contributing to high quality of life, by county. Blue text indicates that a county's choices are included in the region's top three choices; orange text highlights where counties selected options not included in the region's top three picks. It is important to keep in mind that sample sizes for some counties are small (Figure 37).

County results illustrate the dominance of affordable housing as a leading concern across the region – survey respondents from every county except Northumberland selected *Affordable housing* as their top choice (in Northumberland, *Affordable housing* ranks third). There is more diversity among counties' second and third choices; all fall within the region's top six picks except for Essex's choice of *Public transportation*, which ranks ninth in the region.

Social Issues

Because some respondents to the 2021 community needs assessment survey wrote in *Word of Mouth* in response to where they usually get information about the community, that option was added to the 2024 survey and garnered more votes than any other choice (Figure 45). *Social Media* ranks second, overtaking *Newspapers* which ranked first in the 2021 survey. *Email* dropped in popularity relative to 2021, and *Radio* and *TV/Local Cable* continued to place at the bottom.

Newspaper retained a first-place ranking only in Mathews but remains an importance source of news in the region. 44% of survey respondents selected Newspaper (participants could choose more than one option); in comparison, a national survey by the Pew Research Center in 2024 indicated that 26% of U.S. adults "often or sometimes get news in print." ²⁶

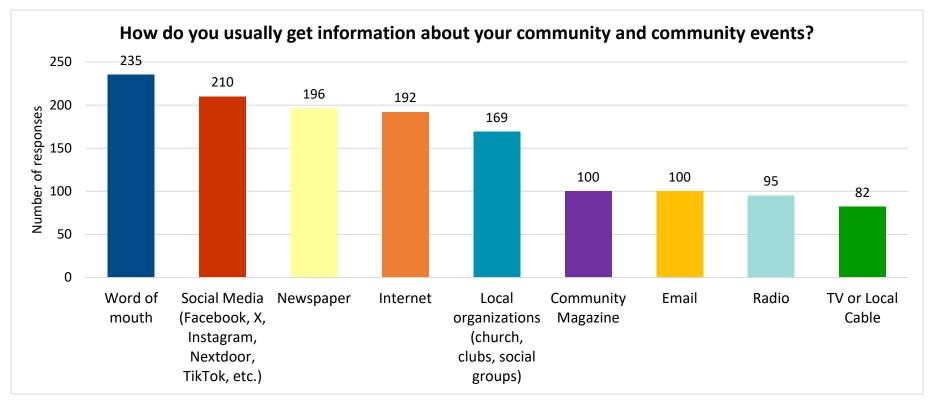


Figure 45 Sources of Information

²⁶ Pew Research Center, "News Platform Fact Sheet," Sept. 17, 2024, https://www.pewresearch.org/journalism/fact-sheet/news-platform-fact-sheet/.

Figure 46 shows survey participants' social issues of greatest concern. In 2021, respondents' leading concern was Crime, followed by Poverty. For the 2024 survey, Poverty remains the second greatest concern, but Crime falls to midway down the list. Housing instability and homelessness moves into first place. Systemic racism, formerly placing near the bottom, is the third greatest social concern. Loneliness & social isolation, a new option that staff added in response to the Surgeon General's Advisory on loneliness and its negative impact on health, 27 places fourth.

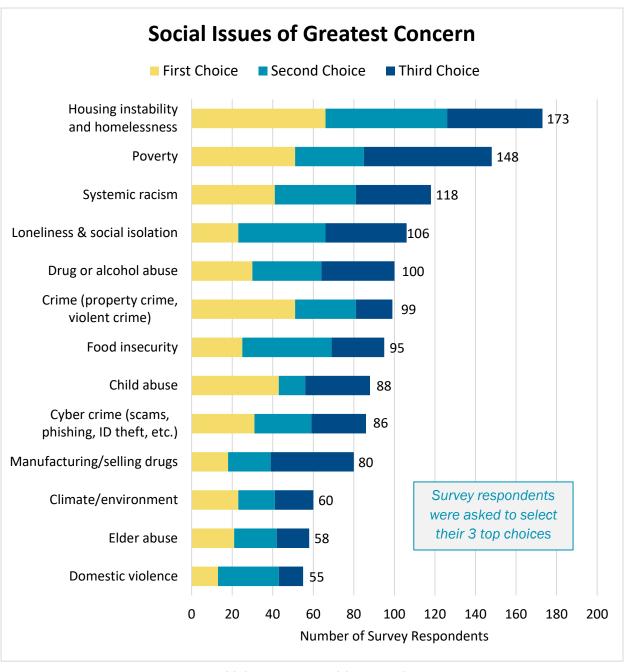


Figure 46 Social Issues of Greatest Concern

²⁷ Office of the Surgeon General, "Our Epidemic of Loneliness and Isolation," 2023, SurgeonGeneral.gov/Connection.

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	Housing instability and homelessness	Poverty*	Crime (property crime, violent crime)*
Essex	Crime (property crime, violent crime)	Poverty*	Elder abuse*
Gloucester	Housing instability and homelessness	Child abuse	Cyber crime (scams, phishing, ID theft, etc.)
King & Queen	Poverty	Housing instability and homelessness*	Cyber crime (scams, phishing, ID theft, etc.)*
King William	Poverty*	Systemic racism*	Child abuse*
Lancaster	Poverty	Systemic racism	Crime (property crime, violent crime)
Mathews	Systemic racism*	Child abuse*	Housing instability and homelessness
Middlesex	Housing instability and homelessness	Poverty	Systemic racism
Northumberland	Housing instability and homelessness	Poverty*	Loneliness and social isolation*
Richmond	Housing instability and homelessness	Poverty	Crime (property crime, violent crime)
Westmoreland *Denotes a tie	Crime (property crime, violent crime)	Systemic racism	Elder abuse

Figure 47 Social Issues of Greatest Concern, by County

If only first-choice votes are considered, *Housing instability and homelessness* ranks as survey respondents' greatest social concern, while *Poverty* and *Crime* tie for second place. Figure 47 shows first-choice votes for greatest social concerns, by county. Blue text indicates that a county's choices are included in the region's top three choices; orange text highlights where counties selected options not included in the region's top three picks. It is important to keep in mind that sample sizes for some counties are small (Figure 37).

Figure 48 illustrates how survey participants feel their community performs in addressing social issues. Categories are

sorted with the largest percentages of Excellent plus Good at the top of the chart. Engagement of law enforcement ranks first, followed by Access to GED classes and adult education and Options for arts and entertainment. The categories at the bottom are Housing options for people/families facing homelessness, Affordable housing, and Affordable child care.

The wording of this survey question is different than in 2021 and thus not exactly comparable, but in 2021 respondents also expressed dissatisfaction with how their community addressed affordable housing and homelessness.

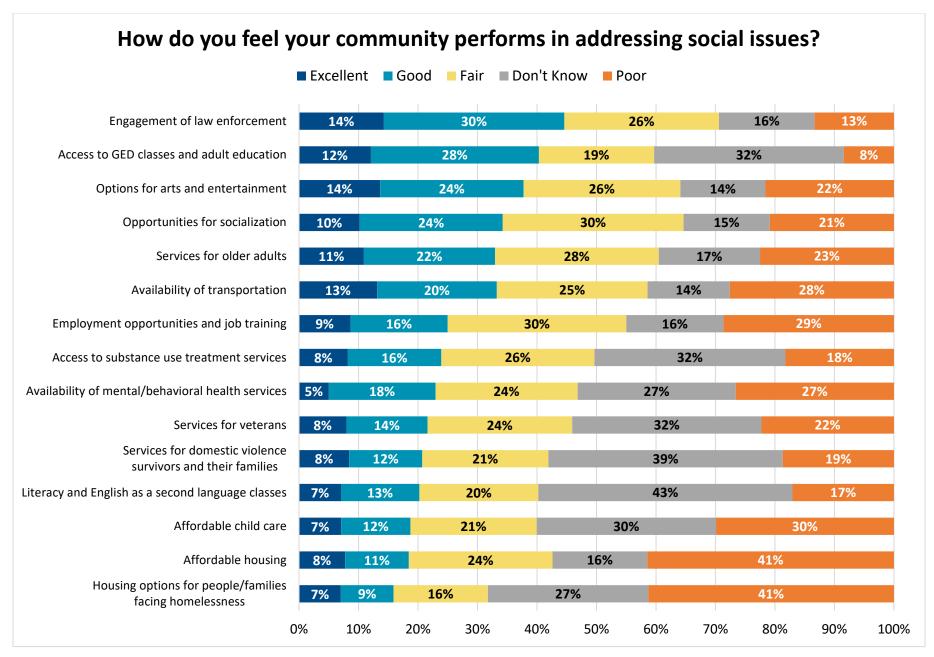


Figure 48 How the Community Performs in Addressing Social Issues

Economic Security and Financial Stability

Survey respondents represent a variety of employment statuses. As shown in Figure 49, 41% describe themselves as working full-time, 15.9% work part-time, 5.2% are looking for a job, and 37.9% do not work.

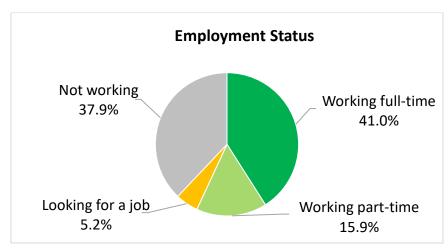


Figure 49 Work Status

In lieu of asking survey participants about their income, which might be considered an invasion of privacy, both the 2021 and 2024 community needs assessment surveys inquired how difficult it is to cover expenses and pay bills in a typical month (Figure 50). Given high inflation in the months preceding the 2024 survey, staff expected that the percentage of people stating that they found it difficult to pay their bills would increase. Indeed, the percentage for *Difficult* increased from 15.5% in 2021 to 24.5% in 2024. However, the percentage of survey respondents stating that it is *Easy* to pay their bills also increased, from 27.5% in 2021 to 33.8% in 2024. The group in the middle, *Moderate*, shrank from 57.1% in 2021 to 41.7% in 2024. Growing income inequality is a concern.

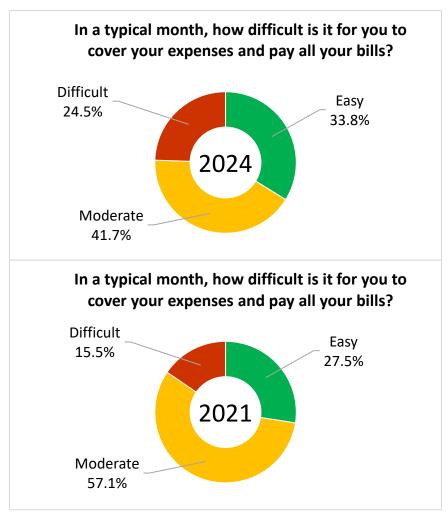


Figure 50 Difficulty of Paying Bills

The counties in which the largest proportion of survey participants reported difficulty in paying their bills in 2024 are Lancaster (39.5%), Richmond (37%), Essex (35.7%), and King William (35%). The fewest respondents reporting difficulty in paying their bills represent Northumberland and King & Queen, both at 17.6%.

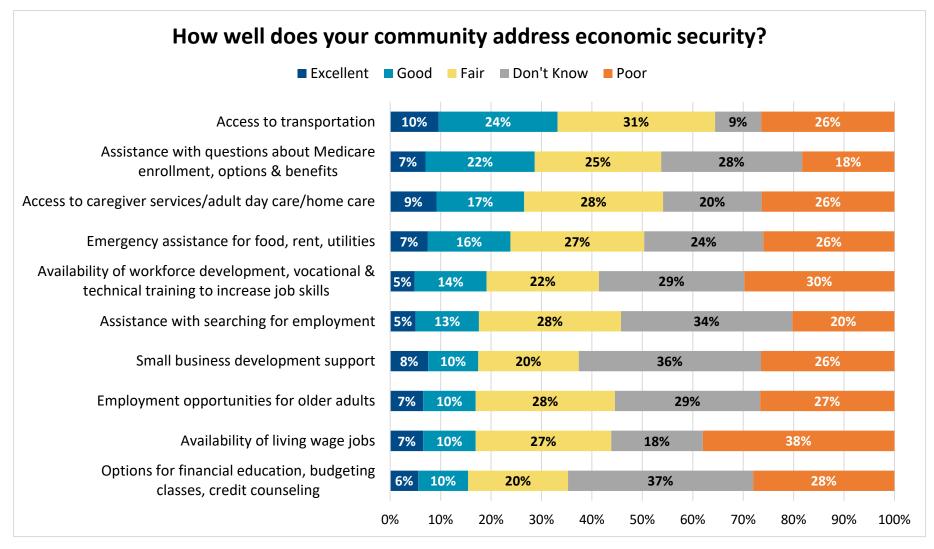


Figure 51 How the Community Addresses Economic Security

Figure 51 portrays survey respondents' views on how well their community addresses economic security. Categories are sorted with those that garnered the most *Excellent* or *Good* responses at the top. Access to transportation ranks first, followed by Assistance with questions about Medicare enrollment, options

& benefits. The top four categories for 2024 also placed in the top four in 2021, in a slightly different order. However, it is notable that the proportion of participants selecting *Poor* increased from 2021 to 2024 for every category, often by as much as 10 percentage points.

Figure 52 reinforces the decline in satisfaction expressed by survey respondents. The chart compares responses from the 2018, 2021, and 2024 surveys; in some cases, bars are missing because not all the current categories were listed in past surveys. Categories marked with asterisks had minor changes in wording.

For every category except Small business development support, the percentage of participants choosing Excellent or Good increased from 2018 to 2021. However, 2024 (represented by yellow bars) saw a decrease in the proportion of people expressing satisfaction with services and situations related to economic security; for every category, satisfaction dropped below 2021 levels.

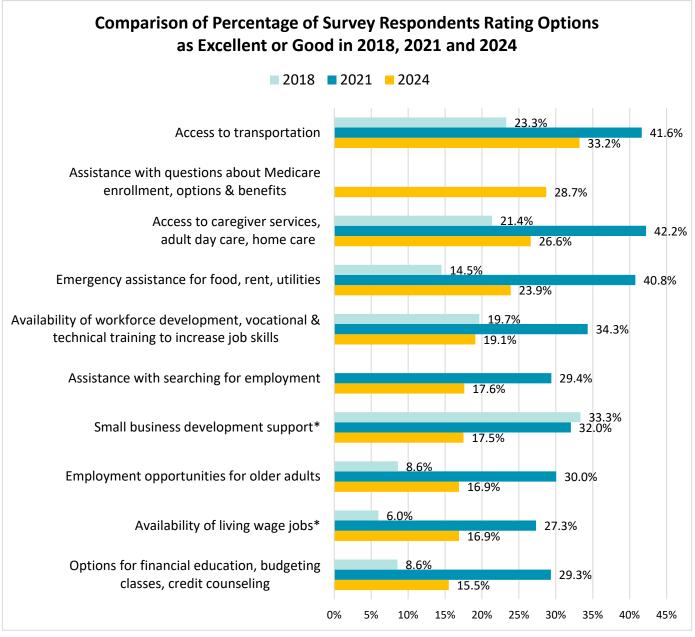


Figure 52 Positive Ratings of Economic Security

Housing

Two-thirds of survey respondents rate *Affordable housing for older adults* as a high priority (Figure 53). This category also ranked first in 2021. Participants demonstrated greater

concern than in the past about addressing a lack of indoor plumbing, and continued to show concern about homelessness and assistance for low-income families.

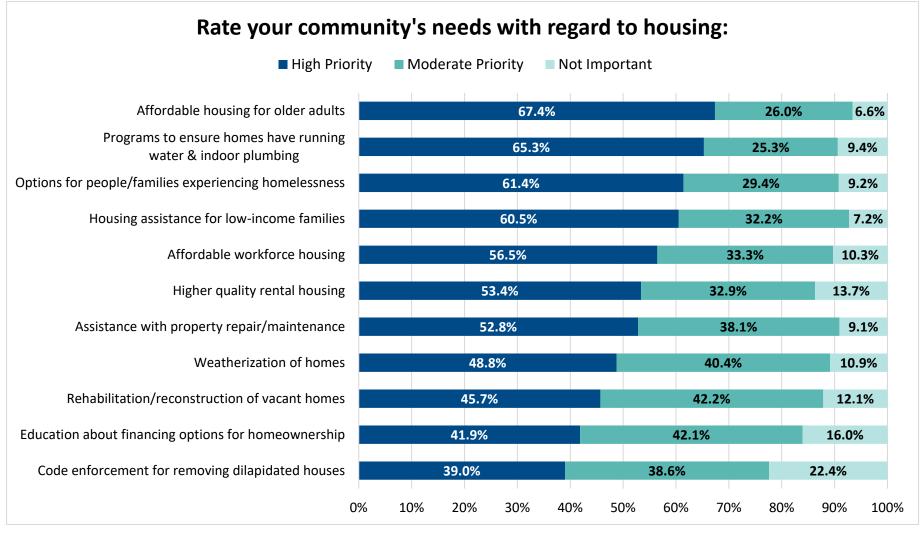


Figure 53 Housing Needs

Lack of affordable housing is not a new problem in the Middle Peninsula and Northern Neck, and Bay Aging has spent decades not only assisting people through programs such as the Housing Choice Voucher Program and Homeless Solutions, but also increasing the supply of affordable housing by building service-enriched rental communities for older adults. Bay Aging manages 10 U.S. Department of Housing and Urban Development Section 202 apartment complexes, which have income restrictions and are limited to households with at least one member age 62 or older.

Since the prior community needs assessment survey in 2021, Bay Aging completed the construction of its eleventh apartment community and also acquired its first workforce housing community:

- Daffodil Gardens II: this 40-unit Low-Income Housing Tax Credit property in Gloucester held its grand opening on June 15, 2023. Occupancy is limited to families whose head of household is at least 55 years old and income limits apply.
- Mercer Place: Bay Aging assumed ownership and management of this 16-unit rental community in Kilmarnock in March 2022.
 Preference is offered to Lancaster County teachers.



Mercer Place, a workforce apartment community



Ribbon-cutting at Daffodil Gardens II in Gloucester



Daffodil Gardens II, a service-enriched apartment community

Transportation

The Middle Peninsula and Northern Neck are highly dependent on cars as a means of transportation. 73.9% of survey respondents state that they usually drive when travelling to work, shopping, medical appointments, and social activities (Figure 54). 6.7% ride with a household member, and 5.8% get a ride from friends or family members they don't live with. 8.7% contact a transportation provider such as Bay Transit, while 2.9% walk or ride a bicycle.

The 2% of survey participants who stated that they do not have access to transportation and often cannot get where they want to go were asked a follow-up question about what barriers prevent them from using Bay Transit. The most common responses were not knowing how to schedule a ride with Bay Transit, and uncertainty as to whether Bay Transit can accommodate wheelchairs (Figure 55). Additional marketing is needed to raise awareness of Bay Transit's services, so that members of the public will be aware that:

- Bay Transit's vehicles are accessible
- Scheduling a ride is easy and doesn't require a lot of planning
- Rides are inexpensive, typically \$1 or
 \$2 depending on the service

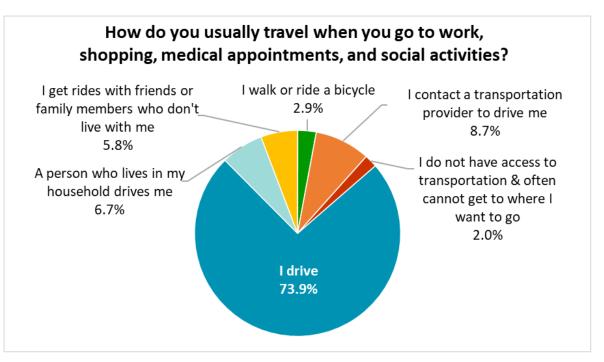


Figure 54 Means of Transportation

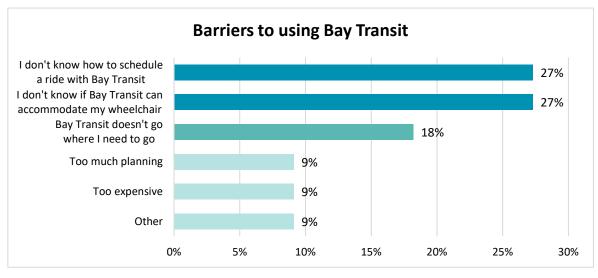


Figure 55 Barriers to using Bay Transit

In response to comments on the 2021 survey, new categories were added to the list of transportation options for respondents to evaluate in 2024. Three of the new items garnered the largest shares of votes for Important: Increase access to transportation for people with disabilities and special needs, Improve maintenance of local roads and bridges, and Expand transportation to specialized medical services outside the Middle Peninsula/ Northern Neck.

Access to ridesharing or carpooling services and Access to a bike route system remained the least popular choices.

As it relates to transportation, what is most important to you? • Important • Nice to Have • Not Important

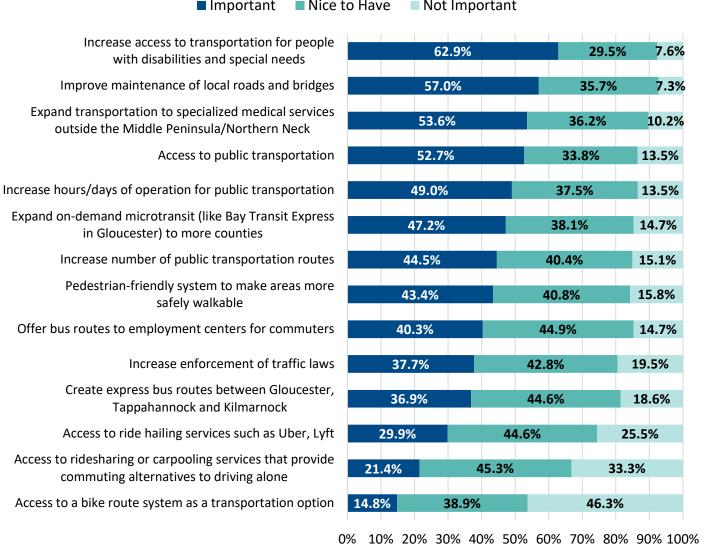


Figure 56 Transportation Preferences

The unique challenges of transportation in a rural area figured prominently in Bay Aging's 2021 community needs assessment survey. Several new initiatives were subsequently implemented:

- Bay Transit collaborated with VCU Health Tappahannock Hospital in Essex County to improve access to the hospital for transportation-disadvantaged patients, employees, and volunteers. Financial support from VCU Health facilitated expanded service hours (effective March 1, 2024) and construction of a bus shelter.
- In December 2024, Bay Transit launched a microtransit service in West Point, Eltham and parts of King & Queen County. Riders can schedule trips on their phone and be picked up in minutes.
- When bus fares were reimplemented following a pause during COVID, Bay Transit resumed a partnership with the Rappahannock Community College Educational Foundation that allows RCC students to travel to and from RCC's four regional sites for free via Bay Transit.
- Awareness of the need for non-emergency medical transportation to facilities outside Bay Transit's service area prompted Bay Aging to allocate more funding to New Freedom Mobility Management. The extra funds come in part from Art in Transit, a collaboration with the Rappahannock Art League in Lancaster County that raises money with an annual art contest sponsored by local businesses. Beginning in FY2024, Bay Aging further supplemented New Freedom funding with revenue from contracts with MCOs.

During development of the Bon Secours 2025 Community Health Needs Assessment, Bon Secours identified transportation as an important social need impacting health. A discussion between Bon Secours and Bay Aging resulted in providing Bay Transit brochures to case managers at Bon Secours Rappahannock General Hospital in Lancaster County.



Ribbon-cutting for the Bay Transit bus shelter at VCU Health
Tappahannock Hospital in Essex County



Postcard for the Bay Transit Express Paper Trail (microtransit serving West Point, Eltham, and part of King & Queen County)

Health

Affordable health services places first on the list of survey respondents' top health needs (Figure 57), followed by Health care assistance for older adults. The same categories ranked in the top two, in the opposite order, in 2021. Transportation to access health services ranks third, much higher on the 2024 list than in 2021. Telehealth services ranked last in 2021, with just 20 votes; it remains near the bottom in 2024 but garnered 57 votes.

If only first-choice votes are considered, Affordable health services remains survey respondents' top health need, while Access to healthy food options moves into second place, ahead of Health care assistance for older adults.

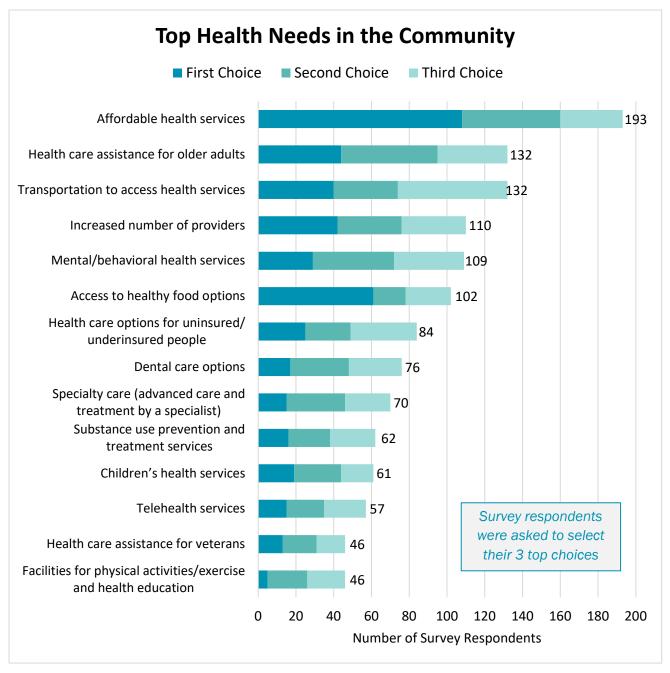


Figure 57 Top Health Needs

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	Access to healthy food options	Health care assistance for older adults
Essex	Transportation to access health services*	Health care assistance for older adults*	Access to healthy food options*
Gloucester	Affordable health services	Access to healthy food options	Health care assistance for older adults
King & Queen	Health care assistance for older adults	Affordable health services	Increased number of providers
King William	Affordable health services*	Substance use prevention & treatment services*	Transportation to access health services
Lancaster	Affordable health services	Increased number of providers	Access to healthy food options
Mathews	Affordable health services	Health care assistance for older adults*	Access to healthy food options*
Middlesex	Affordable health services	Mental/behavioral health services*	Access to healthy food options*
Northumberland	Affordable health services	Increased number of providers	Access to healthy food options
Richmond	Transportation to access health services	Affordable health services	Mental/behavioral health services
Westmoreland *Denotes a tie	Affordable health services	Transportation to access health services*	Access to healthy food options*

Figure 58 Top Health Needs, by County

Figure 58 shows first-choice votes for top health needs, by county. Blue text indicates that a county's choices are included in the region's top three choices; orange text highlights where counties selected options not included in the region's top three picks. It is important to keep in mind that sample sizes for some counties are small (Figure 37).

Affordable health services places first in seven of 10 counties, and Access to healthy food options appears among the top three choices for seven counties. Most counties' choices are among the region's top six picks; an exception is Substance use prevention & treatment services, which ties for first for King William but ranks tenth for the region.

Narrowing the focus to mental/behavioral health. which ranked fifth on the list of top health needs for both 2021 and 2024, Figure 59 shows survey participants' ratings for several aspects of mental/behavioral health. For every category, at least 20% of respondents selected Poor. Only Transportation to access services was viewed as Excellent or Good by at least 30% of participants.

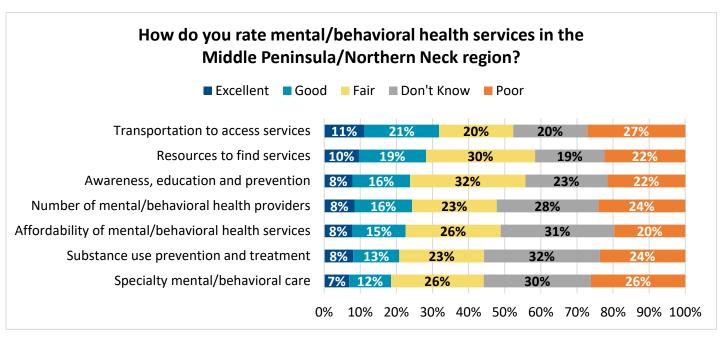


Figure 59 Mental/behavioral health services

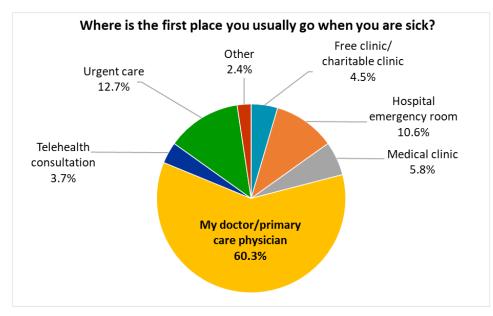


Figure 60 Use of Medical Facilities when Sick

Figure 60 shows survey respondents' choices for the place they usually go when sick. *My doctor/primary care physician* rose from 52.9% in 2021 to 60.3% in 2024 and is by far the most common selection. *Urgent care* and *Telehealth consultation* have smaller shares but increased at faster rates relative to 2021.

The percentage of people choosing *Hospital emergency room* dropped from 17.6% in 2021 to 10.6% in 2024, which suggests good progress in avoiding unnecessary emergency department visits. However, while only 5.7% of White survey respondents selected *Hospital emergency room*, 19.1% of minority participants chose *Hospital emergency room*. The proportion of respondents selecting *Medical clinic* and *Free clinic/charitable clinic* also decreased from 2021 to 2024.

Caregiving

The unexpectedly large number of survey respondents who self-identified in 2021 as caregivers for an older adult or a person with disabilities or chronic conditions contributed to the launch of Bay Aging's Caregiver Support program. Demand for caregiver support proved to be larger than expected, which led to the program tripling its staff. In 2024, 29% of survey participants indicated that they are caregivers (Figure 61); in comparison, an AARP study found that 21% of American adults are unpaid caregivers. Reported rates are higher for minority survey respondents (38.1%) than Whites (22.6%).

Survey participants who self-identify as caregivers were asked a follow-up question to ascertain what services they need and are unable to access. As shown in Figure 62, the most-needed services are *In-home personal care*, *respite relief*, and *caregiver support groups*. In 2021, the leading response was *Adult day care*, which ranks sixth in 2024.

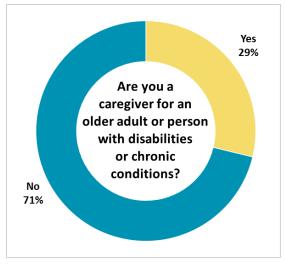


Figure 61 Caregiver Status

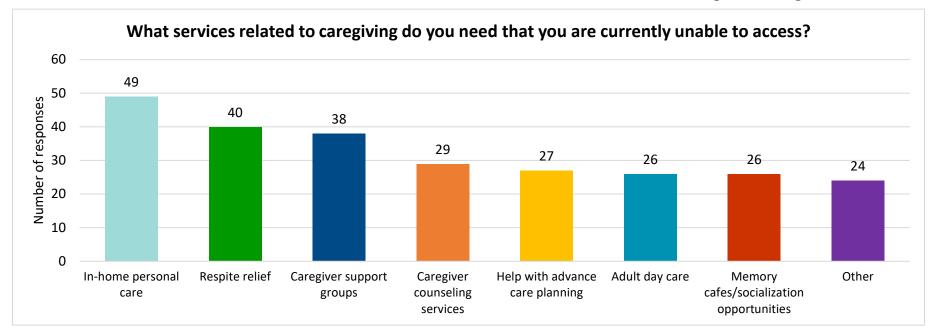


Figure 62 Access to Caregiver Support Services

²⁸ 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.

Aging in Place

A large majority of survey respondents hope to remain in their current residence as they get older (Figure 63). The 82.9% of participants who wish to age in place were subsequently asked what services would help them do so; the top three choices are *Home repairs/modifications to increase accessibility and safety, Transportation to places like stores, pharmacies, and doctors' offices,* and *Assistance with household chores and errands* (Figure 64). The same three options ranked at the top in 2021, differently ordered. In both years, survey participants were least concerned about *Technology such as video calls* and *Assistance managing chronic conditions*.

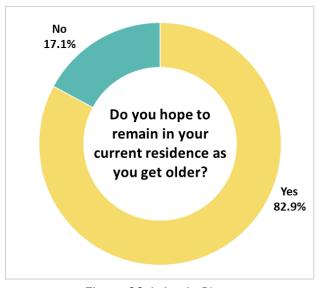


Figure 63 Aging in Place

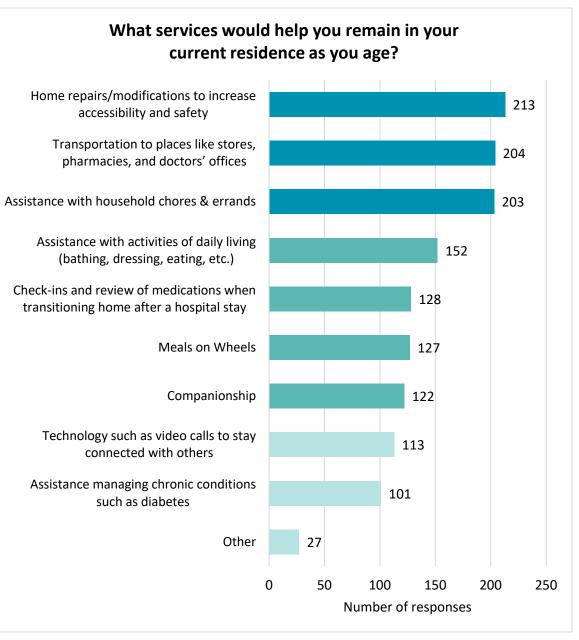


Figure 64 Services to Enable Aging in Place

Survey respondents identified Affordable home health care options and Housing repairs/modifications for older adults as the top two areas with inadequate community resources to enable aging in place (Figure 65). The same two responses ranked at the top in 2021. Transportation, which placed near the bottom in 2021, moves into third place for 2024. Adult day care received many fewer votes in 2024 than in 2021.

If only first-choice votes are counted, Affordable home health care options remains the top concern but Affordable housing ranks second and Access to healthy meals places third.

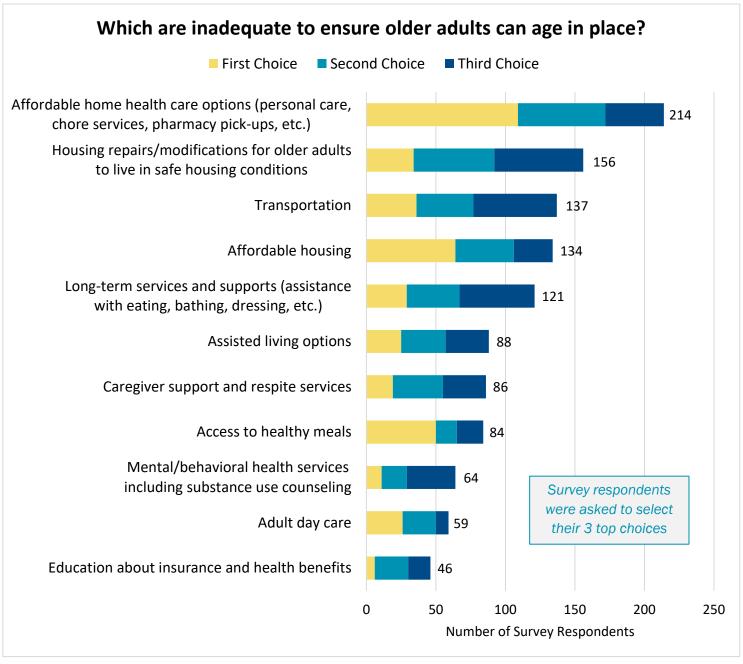


Figure 65 Inadequate Community Resources to Enable Aging in Place

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	Affordable housing	Access to healthy meals
Essex	Long-term services and supports*	Adult day care*	Affordable home health care options
Gloucester	Affordable home health care options	Affordable housing	Access to healthy meals
King & Queen	Affordable home health care options	Transportation	Long-term services and supports
King William	Transportation	Affordable home health care options*	Housing repairs/modifications for older adults to live in safe housing conditions*
Lancaster	Affordable home health care options	Affordable housing	Assisted living options
Mathews	Affordable home health care options*	Affordable housing*	Access to healthy meals
Middlesex	Affordable home health care options	Affordable housing	Housing repairs/modifications for older adults to live in safe housing conditions
Northumberland	Affordable home health care options	Transportation*	Long-term services and supports*
Richmond	Affordable home health care options*	Housing repairs/modifications for older adults to live in safe housing conditions*	Affordable housing*
Westmoreland *Denotes a tie	Affordable home health care options*	Access to healthy meals*	Transportation

Figure 66 Inadequate Community Resources to Enable Aging in Place, by County

Figure 66 shows first-choice votes for gaps in ensuring older adults can age in place, by county. Blue text indicates that a county's choices are included in the region's top three choices; orange text highlights where counties selected options not included in the region's top three picks. It is important to keep in mind that sample sizes for some counties are small (Figure 37).

Affordable home health care options ranks first in eight of 10 counties, and Affordable housing ranks in the top three for five counties. Access to healthy meals, Transportation, Long-term services and supports, and Housing repairs/modifications for older adults to live in safe housing conditions rank in the top three for three counties. Adult day care ties for first in Essex but ranks low in the region.

Children and Youth

Figure 67 shows survey respondents' views on how well the community meets the needs of children and youth. Participants expressed greatest satisfaction with *Quality education*, *Recreation & physical exercise opportunities*, and *Access to*

healthcare services. The same categories ranked at the top in 2021, differently ordered. Participants gave the fewest ratings of Excellent or Good for meeting Needs of children with disabilities and Violence and bullying prevention.

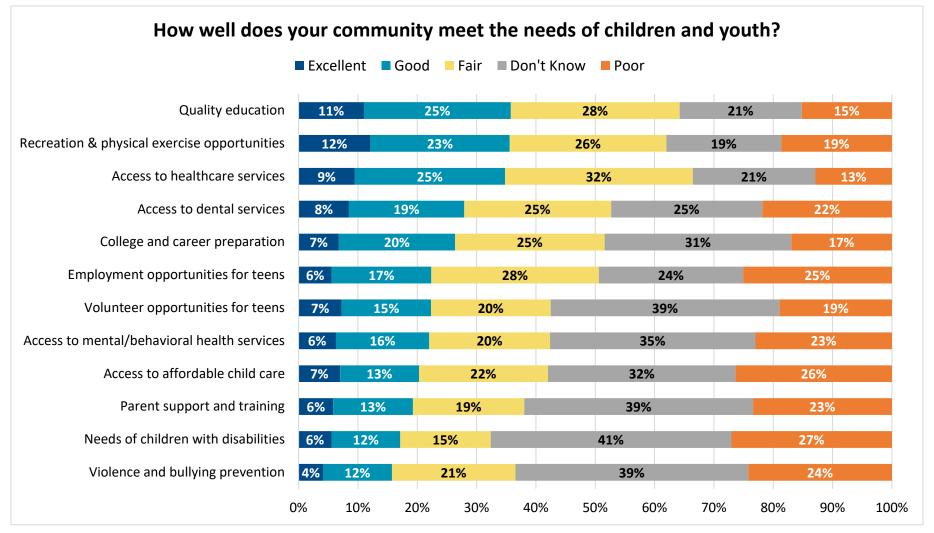


Figure 67 Meeting the Needs of Children and Youth

Survey participants' responses to the top unmet needs for children and youth are quite different for 2024 than in 2021. The categories with the most votes in 2024 are Youth centers. Financial skills training, and Substance use prevention and treatment. All of these ranked in the middle or toward the bottom in 2021, when Access to computers and technology was the top choice by a large margin. The shift in views on unmet needs likely reflects improvements in local broadband access as well as changing priorities after the restrictions of the pandemic passed. However, Access to computers and technology continues to receive the most first-choice votes. with Youth Centers and Quality education tying for second.

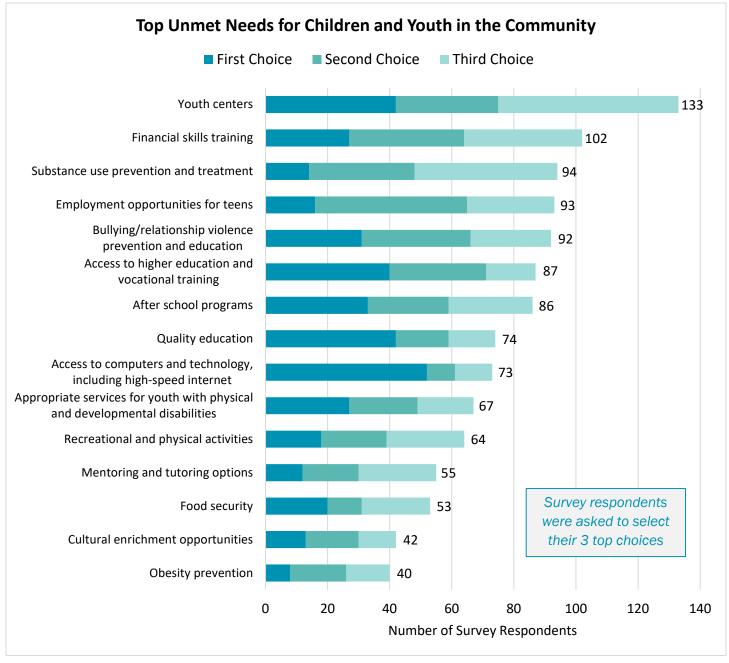


Figure 68 Unmet Needs for Children and Youth

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 high-speed internet	Youth centers*	Quality education*		
Essex	Access to computers and technology, including high-speed internet*	Bullying/relationship violence prevention and education*	Obesity prevention*		
Gloucester	Access to computers and technology, including high-speed internet	Youth centers	After school programs		
King & Queen	Quality education	Access to computers and technology, including high-speed internet	Youth centers		
King William	Access to computers and technology, including high-speed internet	Bullying/relationship violence prevention and education	Youth centers		
Lancaster	Quality education*	Youth centers*	Financial skills training		
Mathews	Youth centers	After school programs	Financial skills training		
Middlesex	Access to higher education and vocational training	Access to computers and technology, including high-speed internet	Bullying/relationship violence prevention and education		
Northumberland	Quality education	Access to higher education and vocational training*	Access to computers and technology, including high-speed internet*		
Richmond	Financial skills training	After school programs	Youth centers		
Westmoreland *Denotes a tie	Access to computers and technology, including high-speed internet	Access to higher education and vocational training	Quality education		

Figure 69 Unmet Needs for Children and Youth, by County

Figure 69 shows first-choice votes for top unmet needs for children and youth in the community, by county. Blue text indicates that a county's choices are included in the region's top three choices; orange text highlights where counties selected options not included in the region's top three picks. It is important to keep in mind that sample sizes for some counties are small (Figure 37).

In addition to the region's top picks of Access to computers and technology, Youth Centers, and Quality education, options selected by multiple counties include Access to higher education and vocational training, Financial skills training, After school programs, and Bullying/relationship violence prevention and education. Only Essex identified Obesity prevention as a top-ranking unmet need; diabetes is problematic in Essex, as shown by the Diabetes Prevalence map in Appendix A.

Survey Respondent Comments

The community needs assessment survey concluded by thanking respondents and inviting them to add open-ended comments.

Appendix B lists all the comments received. If comments included names of staff or clients, the names were removed; aside from this redaction, remarks appear verbatim.

The word cloud in Figure 70 captures participants' comments, with frequently-used words appearing in larger font.



Figure 70 Word Cloud of Survey Respondents' Feedback -Generated 5/1/25 by https://www.wordclouds.com/

Focus Group

Methodology

Bay Aging staff conducted a focus group discussion during the January 9, 2025 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

1. What is the social issue of most concern to you in your community? (Single Choice) 0% 0% Child abuse 0% Climate/environment Crime (property crime, violent crime) 13% Cyber crime (scams, phishing, ID theft, etc.) 0% 7% Drug or alcohol use 60% Food insecurity Housing instability and homelessness 13% 7% Loneliness and social isolation 0% Poverty Systemic racism

Figure 71 Focus Group Poll: Social Issues of Most Concern

community leaders involved primarily in health, education, and social services.

During the virtual meeting, staff sought input from attendees via three Zoom polls and guided discussion of the results. The Zoom polls used questions from the public community needs assessment 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 the public survey results and eliminated the least popular options.

Feedback

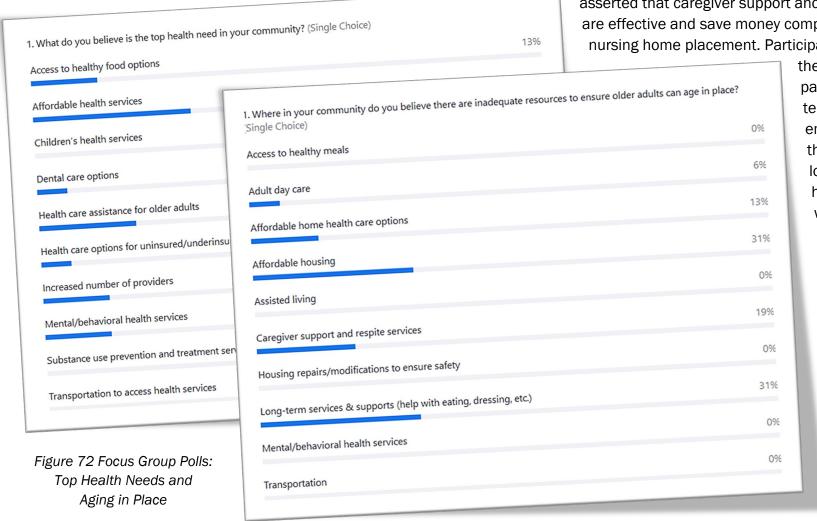
This section seeks to capture both the Zoom poll results and the focus group's informal, spontaneous discussion following the reveal of each Zoom poll's results. Mirroring the community needs assessment survey, Advisory Council members' top choice for the social issue of most concern is Housing instability and homelessness (Figure 71). However, whereas the community's next choices are Poverty and Crime (Figure 47), Advisory Council members selected Cyber crime and Loneliness and social isolation. Members chatted about the importance of affordable housing and discussed the connection of poverty to other issues.

Advisory Council members' choices for top health needs in the community are similar to the public survey results, with Affordable health services and Health care assistance for older adults garnering the most votes (Figure 72). The focus group talked about the importance of food and the impact of good

nutrition on health. Advisory Council members selected Affordable housing and Long-term services & supports as the top two areas with inadequate resources to ensure that older adults can age in place (Figure 72). Caregiver support and respite services ranked third, much higher than in the public

survey. Multiple members of the focus group asserted that caregiver support and health aides are effective and save money compared to nursing home placement. Participants discussed

> the challenge of paying for longterm care and empathized with the plight of lower-income homeowners who did not consult a financial planner and learn too late that their home could be sold to reimburse Medicaid for long-term care rather than going to family members.



Root Causes of Poverty

As detailed in the Poverty section of the Demographic Profile and illustrated in Figures 23 and 24, the poverty rate in the Middle Peninsula and Northern Neck is 10.2%, slightly higher than Virginia's rate of 9.9% but lower than the U.S. rate of 12.4%. Nearly half of the region's population in poverty lives below 50% of the poverty level.

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." ²⁹ 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 73 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 73 proposes possible root causes for people who are unemployed,



Figure 73 Root Cause of Poverty Analysis: The Five Whys

unable to join the labor force due to child care responsibilities, employed in low-paying jobs, or 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*

²⁹ NASCSP, Checklist for Monitoring Community Needs Assessments for State CSBG Offices (May 2017), 11.

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 thus relies on a single income may be unable to send their children to college due to lack of savings and the transportation barrier, and later in life their limited resources in retirement may prevent them from assisting their grandchildren with the 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.

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 expressed concern about economic security, as illustrated in Figures 52 and 53, with 38% of participants rating the availability of living wage jobs as poor. Overall satisfaction with quality of life diminished from 2021 to 2024, especially among minority populations.

Community Resources

As described in the Introduction and detailed in Figure 1, Bay Aging provides transportation, housing, and healthy living services. During fiscal year 2024 (Oct. 1, 2023 – Sept. 30, 2024), Bay Aging served 36,181 people, including 22,738 residents of the Middle Peninsula and Northern Neck (see Figure 74). In total, services delivered include more than 191,000 meals, over 131,000 rides, and more than 1.5 million hours of care services.

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
- Addy's Colors
- 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)

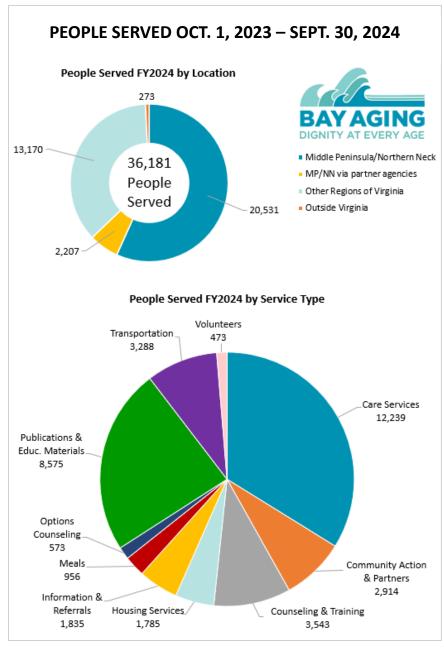


Figure 74 People Served by Bay Aging in FY2024

- 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.
- Jubilee of Churches
- 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)
- Salvation Army (Richmond County)
- Samaritan Group
- The Haven
- The Jesse Ball DuPont Fund
- Three Rivers Health District Virginia Department of Health
- Three Rivers Healthy Families
- United Ministries of Westmoreland
- 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 and Survey Results for each county. See Figure 75 for a visual representation comparing key county demographics. 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 10,604 in 2023, down from 11,151 in 2010. The population is projected to decline to approximately 9,900 people in 2030 before rebounding to about 10,360 in 2050. Median age in Essex is 47.1, slightly younger than average for the Middle Peninsula and Northern Neck. 18% of residents are under age 18 and 32.9% are age 60 or older. Essex has the largest minority population in the region, 44.1%.

Educational attainment in Essex is low; high school graduation rates are the third lowest in the region at 85.7% and only 17.5% of adults have a bachelor's degree. The unemployment rate is third highest in the area and the proportion of households lacking access to a vehicle is second highest in the region. Median household income is the lowest in the Middle Peninsula and Northern Neck, and the poverty rate, 15.5%, is second highest in the area. Median value of owner-occupied homes is second lowest in the region. 19.3% of homeowners are cost-burdened, slightly less than the 10-county average, but 45.2% of renters are cost-burdened – third highest. 13.6% of housing units are mobile homes, second highest in the area.

Essex scores poorly on County Health Rankings for both Community Conditions and Population Health & Well-being. Life expectancy is 73 years, the shortest in the Middle Peninsula and Northern Neck. Essex has the highest percentage of survey respondents who say the place they typically go when sick is a hospital emergency room. 37.5% of survey participants self-identify as a caregiver - second highest in the area. 46.2% of survey respondents report feeling satisfied with qualify of life – an alarming drop of 19.7 percentage points since 2021, and the lowest level of satisfaction among counties in the region.

The community needs assessment survey found that Essex respondents' top **social issues** of greatest concern are:

- Crime
- Poverty
- Elder abuse

Top **health** needs are:

- > Transportation to access health services
- > Health care assistance for older adults
- Access to healthy food options

Top needs to enable **aging in place** are:

- Long-term services and supports
- Adult day care
- Affordable home health care options

Top unmet needs for children and youth are:

- Access to computers and technology
- Bullying/relationship violence prevention and education
- Obesity prevention

- Affordable housing
- > Public transportation
- Reliable internet/Wi-Fi service

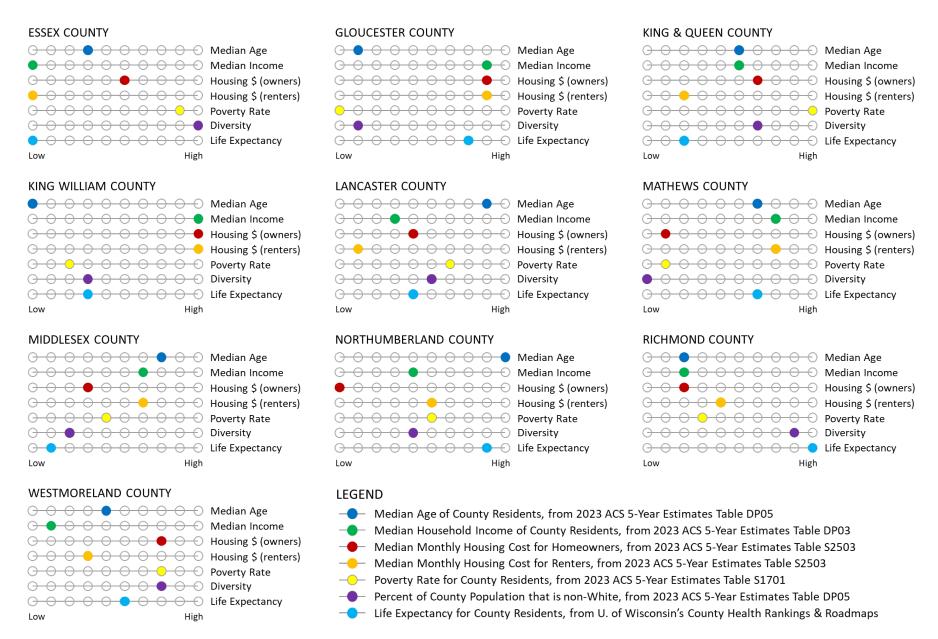


Figure 75 County Rankings in the Middle Peninsula and Northern Neck

Gloucester County

Gloucester is the most densely populated county in Bay Aging's 10-county service area, accounting for over a quarter of the region's population with 39,228 people in 2023. Steady growth is projected to continue, with an increase in population of 24% from 2000 to 2050. Median age in Gloucester is 44.6, second youngest in the region. 20% of residents are under age 18 and 28.7% are age 60 or older. Gloucester has the largest median household size in the region, 2.58 people per household. Gloucester is the second least diverse county in the area, with 84% of the population being White. Life expectancy is third highest in the Middle Peninsula and Northern Neck.

Educational attainment is about average for the region in terms of the percentage of residents with a bachelor's or graduate degree, but Gloucester has the second highest proportion of adults with an associate degree, 9.1%, and is the site of one of Rappahannock Community College's campuses. Gloucester has the smallest proportion of residents in the region who lack a computer or broadband internet.

Median household income in Gloucester is the second highest in the 10-county area. The unemployment rate is second lowest, and the poverty rate is the lowest in the region. Gloucester is the only county in the area for which community needs assessment survey participants reported a substantial decline from 2021 to 2024 in the proportion of residents who find it difficult to pay their bills.

Despite these economic advantages, Gloucester residents nonetheless face some financial challenges. The gender pay gap for full-time, year-round workers exceeds \$15,000 annually. Median monthly housing costs are second highest in the region

for both owners and renters. 19.4% of Gloucester homeowners are cost-burdened (slightly below the regional average) and 39.1% of renters are cost-burdened (slightly above the regional rate). Survey participants who live in Gloucester reported the second highest rates of satisfaction with quality of life, but the rate declined 11.3 percentage points from 2021 to 2024.

The community needs assessment survey found that Gloucester respondents' top **social issues** of greatest concern are:

- Housing instability and homelessness
- Child abuse
- Cyber crime

Top **health** needs are:

- Affordable health services.
- Access to health food options
- Health care assistance for older adults

Top needs to enable **aging in place** are:

- Affordable home health care options
- Affordable housing
- Access to healthy meals

Top unmet needs for **children and youth** are:

- Access to computers and technology
- Youth centers
- After school programs

- Affordable housing
- > Low crime/safe neighborhoods
- Clean, healthy environment

King & Queen County

King & Queen County has the largest land area and the smallest population in the Middle Peninsula and Northern Neck. There were 6,676 residents in 2023, and the population is projected to decline to just over 6,050 by 2050.

Among the 10 counties in Bay Aging's service area, King & Queen ranks in the middle in terms of median age (49), median income (\$72,851), and diversity (66.8% White and 23.8% Black/African American). 17.8% of King & Queen residents are under age 18, and 30.7% are age 60 or older.

Educational attainment lags behind the regional average with regard to the percentage of adults with bachelor's or graduate degrees. 6.1% of King & Queen's civilian employed population works in the agriculture, forestry, fishing, hunting, and mining sector, considerably higher than any other county in the area.

King & Queen has the largest proportion of households in the Middle Peninsula and Northern Neck who lack broadband internet, 26.4%. 13.3% of King & Queen households receive Food Stamp/SNAP benefits. The poverty rate, 18.5%, is the highest in the region. Nonetheless, survey respondents residing in King & Queen reported the lowest rate in the region (tied with Northumberland) of finding it difficult to pay their bills.

21.3% of homeowners are cost-burdened, slightly above the regional rate of 20.6%, while 28.4% of renters are cost-burdened – much lower than the regional rate of 38.6%. 18.5% of houses in King & Queen are mobile homes, compared to 7.9% for the 10-county area.

Despite some economic challenges, King & Queen is one of only three local counties whose ratings for quality of life improved from 2021 to 2024. Across the 10-county region, satisfaction with quality of life dropped by 6.6 percentage points but survey participants in King & Queen indicated an increase in satisfaction of 0.4 percentage points. King & Queen's ranking for satisfaction with quality of life nonetheless is lower than average, placing eighth out of 10.

The community needs assessment survey found that King & Queen respondents' top **social issues** of greatest concern are:

- Poverty
- ➤ Housing instability and homelessness
- Cyber crime

Top **health** needs are:

- Health care assistance for older adults
- > Affordable health services
- > Increased number of providers

Top needs to enable **aging in place** are:

- > Affordable home health care options
- > Transportation
- Long-term services and supports

Top unmet needs for children and youth are:

- Quality education
- Access to computers and technology
- Youth centers

- Affordable housing
- Availability of health care services
- Reliable internet/Wi-Fi service

King William County

King William is the youngest and fastest-growing county in the Middle Peninsula and Northern Neck. King William's population was 13,146 in 2000, grew to 18,232 in 2023, and is projected to exceed 23,700 in 2050. Median age is 40.5. 23% of residents are under age 18 and 24.7% are age 60 or older.

King William is home to the Pamunkey Indian Reservation and the Mattaponi Indian Reservation. 2.7% of county residents identify as American Indian/Alaska Native (alone or in combination with another race). Diversity is slightly less than average for Bay Aging's service area, with 78.6% of the population identifying as White.

Compared to the 10-county region, slightly fewer adults in King William have a bachelor's degree. However, the percentage graduating high school is the highest in the area. Median household income is the highest in the region, the unemployment rate is more than a percentage point lower than the regional average, and the poverty rate is third lowest in the area.

The housing stock in King William is the newest in the region, with a median year built of 1996 for owner-occupied units and 2000 for renter-occupied units. Median monthly housing costs are the highest in the 10-county area. Because median income is also high, only 19.7% of homeowners are cost-burdened but 41.7% of renters are cost-burdened. 35% of survey respondents residing in King William indicate that they find it difficult to pay bills, much higher than the regional rate of 24.5% and 20.7 percentage points higher than King William survey participants reported in 2021.

66.7% of survey participants in King William are satisfied with quality of life, up 4.5 percentage points from 2021. King William ranks fifth of 10 for satisfaction with quality of life.

The community needs assessment survey found that King William respondents' top **social issues** of greatest concern are:

- Poverty
- Systemic racism
- Child abuse

Top **health** needs are:

- Affordable health services
- > Substance use prevention & treatment services
- Transportation to access health services

Top needs to enable aging in place are:

- > Transportation
- > Affordable home health care options
- Housing repairs/modification for older adults

Top unmet needs for children and youth are:

- Access to computers and technology
- Bullying/relationship violence prevention & education
- Youth centers

- Affordable housing
- Reliable internet/Wi-Fi service
- Jobs with adequate wages

Lancaster County

Lancaster's population was 11,567 in 2000, dropped to 10,876 in 2023, and is projected to decline to about 9,500 in 2050 for a decrease of 18% over 50 years. Median age is 59.1, second highest in the state as well as the Middle Peninsula and Northern Neck, and more than 20 years older than Virginia's median age of 38.8. 14.7% of Lancaster's residents are under the age of 18 (the fewest in the area) and 48.8% are age 60 or older. 5.8% are age 85 or older, double the proportion for the 10-county region. Two-thirds of Lancaster's population is White, slightly below the regional average of 73.8%.

Lancaster has the highest percentage of adults with a bachelor's degree, 37.4%, but ranks below average in the region for the proportion of people completing high school (87%). 26% of households do not have broadband internet, compared to 19.3% in the 10-county region.

Because of residents' older age, only 59.1% of households in Lancaster have income from current earnings. 56.5% of households receive Social Security income. Median household income is below average for the region at \$67,169 but household size is the smallest in the area at 1.94 people; per capita income is the highest in the region at \$49,384. However, the poverty rate ranks fourth highest in the 10-county area and the poverty rate for full-time year-round workers is 6.5%. There is a gender pay gap of more than \$33,000 for full-time workers' median earnings. Survey respondents who reside in Lancaster had the highest rate, 39.5%, of reporting difficulty paying their bills. In 2021, only 12.1% stated that paying bills was difficult.

Although Lancaster's median monthly housing costs for renteroccupied units are second lowest in the region, 48.4% of renters are cost-burdened. Only 21.5% of homeowners are cost-burdened, slightly above the regional rate of 20.6%. 26.2% of households are comprised of a person age 65+ who lives alone.

Lancaster is one of three counties (along with Middlesex and Essex) for which survey participants indicated a decline of more than 16 percentage points in satisfaction with quality of life from 2021 to 2024. Lancaster ranks seventh of 10 in the region for quality of life.

The community needs assessment survey found that Lancaster respondents' top **social issues** of greatest concern are:

- Poverty
- Systemic racism
- Crime

Top **health** needs are:

- > Affordable health services
- Increased number of providers
- Access to healthy food options

Top needs to enable **aging in place** are:

- Affordable home health care options
- Affordable housing
- > Assisted living options

Top unmet needs for children and youth are:

- Quality education
- Youth centers
- Financial skills training

- > Affordable housing
- Jobs with adequate wages
- Availability of health care services

Mathews County

Of the 10 counties in Bay Aging's service area, half are projected to decrease in population from 2000 to 2050. Mathews has the largest projected population decline: 22% over 50 years. Mathews' population was 9,207 in 2000, dropped to 8,517 in 2023, and is estimated to fall below 7,200 by 2050.

Median age in Mathews is 53.8, fifth oldest in Virginia. 15.6% of Mathews residents are under age 18 and 40.5% are age 60 or older. Disability rates for children age 5-17 and adults age 18-34 are more than double the regional average.

Mathews is the least racially diverse county in the Middle Peninsula and Northern Neck; 86.7% of the population is White and 8.4% is Black/African American. However, investigation of sub-levels of American Community Survey race data shows that Mathews has the second largest proportion, 2.8%, of residents who identify as having some American Indian/Alaska Native heritage (alone or in combination with other races).

30.1% of adults in Mathews have a bachelor's degree or higher, compared to 25.8% for the 10-county region. Disproportionate numbers of Mathews' population work in the construction industry. Median household income is third highest in the area, the poverty rate is second lowest, and Mathews has the lowest proportion of households with income below \$10,000. However, the gender pay gap for full-time year-round workers is nearly \$15,000 and the unemployment rate is more than a percentage point higher than the regional average.

Mathews' housing stock is the second oldest in the region, with a median year built of 1980 for owner-occupied units and 1973 for renter-occupied units. Nearly a quarter of households consist of a person age 65 or older who lives alone. Median monthly housing costs for homeowners are second lowest in the area, and only 16.4% of homeowners are cost-burdened. Median monthly housing costs for renters are third highest in the region, with 27.1% of renters being cost-burdened. More than 1,700 of Mathews' 5,486 housing units are vacant, primarily for seasonal and recreational use.

The community needs assessment survey found that Mathews respondents' top **social issues** of greatest concern are:

- Systemic racism
- Child abuse
- Housing instability and homelessness

Top **health** needs are:

- Affordable health services
- Health care assistance for older adults
- Access to healthy food options

Top needs to enable aging in place are:

- > Affordable home health care options
- Affordable housing
- Access to healthy meals

Top unmet needs for **children and youth** are:

- Youth centers
- > After school programs
- Financial skills training

- > Affordable housing
- > Clean, healthy environment
- Low crime/safe neighborhoods

Middlesex County

Middlesex County's population was 9,932 in 2000, grew to 10,774 in 2023, and is projected to hover between 10,100 and 10,700 during the next three decades. What might appear to be small ups and downs conceals a busy real estate market; as detailed on page 9, in recent years large numbers of people have moved to Middlesex but population growth from migration was mostly offset by the county's death rate exceeding its birth rate. Middlesex is the fourth oldest county in Virginia (and third oldest in the Middle Peninsula/Northern Neck region) with a median age of 55.5. 15.9% of Middlesex residents are under age 18 and 43% are age 60 and older.

Middlesex is less diverse than the 10-county area, with a population that is 79.3% White. Educational attainment is relatively high, with 31.6% of adults having a bachelor's degree and 10.5% having a graduate degree. The proportion of households lacking a computer is 7.1% compared to 9.8% for the region.

Median income in Middlesex is slightly above the regional average. The unemployment rate and the poverty rate are slightly below prevailing rates. Although only 22.2% of survey respondents residing in Middlesex report difficulty in paying their bills – lower than the regional proportion of 24.5% - the percentage reporting difficulty paying bills in Middlesex rose 9.4 percentage points from 2021 to 2024.

Median monthly housing costs for owner-occupied units in Middlesex are lower than the regional average. 19.2% of homeowners in Middlesex are cost-burdened, which ranks third lowest in the 10-county area. Median monthly housing costs for renter-occupied units are higher than the regional average,

resulting in 40.2% of rental households in Middlesex being costburdened. More than 2,400 of Middlesex's 7,140 housing units are vacant, primarily for seasonal and recreational use.

Survey participants from Middlesex reported a decline in satisfaction with quality of life from 2021 to 2024 of 16.1 percentage points. Middlesex ranked third of 10 in 2021 with a satisfaction rate of 80.4% and placed sixth in 2024 with a satisfaction rate of 64.3%.

The community needs assessment survey found that Middlesex respondents' top **social issues** of greatest concern are:

- Housing instability and homelessness
- Poverty
- Systemic racism

Top **health** needs are:

- Affordable health services
- Mental/behavioral health services
- Access to healthy food options

Top needs to enable **aging in place** are:

- Affordable home health care options
- Affordable housing
- ➤ Housing repairs/modification for older adults

Top unmet needs for children and youth are:

- > Access to higher education and vocational training
- > Access to computers and technology
- Bullying/relationship violence prevention and education

- > Affordable housing
- Low crime/safe neighborhoods
- Availability of health care services

Northumberland County

Northumberland is the oldest of Virginia's 133 counties, with a median age of 59.5, and ranks 12th oldest among the U.S.'s 3,200+ counties. 14.8% of Northumberland's residents are under age 18 and 49.3% are age 60 or older. Although Lancaster has the lowest percentage of *people* under age 18, Northumberland has the lowest percentage of *households* with children (15.7%) in the 10-county region as well as the highest proportion of households with persons age 60 and up (72.4%).

Northumberland's population was 12,259 in 2000, decreased to 12,085 in 2023, and is projected to drop to about 10,600 by 2050, which represents a 14% decline over 50 years.

Northumberland is slightly less diverse than the Middle Peninsula and Northern Neck, with 69% of the population identifying as White and 19.6% as Black/African American.

Educational attainment in Northumberland is strong. 16.2% of adults hold a graduate degree, the highest proportion in the region. 33.9% of adults have a bachelor's, second highest in the area. Median income is lower than the regional average, but average household size is small; per capita income is second highest at \$47,191 compared to \$40,220 for the region. The unemployment rate is more than a percentage point lower than the 10-county average. Compared to the region, a high proportion of residents work in the sector arts, entertainment, recreation, accommodation and food services.

Median monthly housing costs for Northumberland homeowners are the lowest in the region, which could be due to an older population having more households that have paid off their mortgage. Despite low housing costs, 22% of Northumberland homeowners are cost-burdened. Median

monthly housing costs for renters are average for the area and 20.3% of renter households are cost-burdened. Nearly 40% of Northumberland's 9,009 housing units are vacant, primarily for seasonal and recreational use.

Survey respondents in Northumberland reported the highest rate of satisfaction with quality of life at 85.5%, up 5 points from 2021. Northumberland participants tied with King & Queen for the lowest rate of difficulty with paying their bills.

The community needs assessment survey found that Northumberland respondents' top **social issues** of greatest concern are:

- Housing instability and homelessness
- Poverty
- Loneliness and social isolation

Top **health** needs are:

- Affordable health services
- > Increased number of providers
- Access to healthy food options

Top needs to enable **aging in place** are:

- > Affordable home health care options
- > Transportation
- Long-term services and supports

Top unmet needs for **children and youth** are:

- Quality education
- > Access to higher education and vocational training
- Access to computers and technology

- Clean, healthy environment
- Availability of health care services
- Affordable housing

Richmond County

Richmond County, which is distinct from and 50 miles northeast of Virginia's capital city Richmond, had a population of 8,809 in 2000 and numbered 9,047 in 2023. Richmond's population is projected to diminish to about 8,450 by 2050, a 4% decline over 50 years. When studying Richmond's demographics it is important to be aware of the large group quarters population; in 2023, 18% of county residents lived in correctional facilities, nursing homes, and other group settings. Over 1,100 male inmates are housed at the Haynesville Correctional Center, which skews the county's gender balance and likely impacts Census data for educational attainment. People living in group quarters are not included in Census data for income and poverty.

Richmond is the third youngest county in the Middle Peninsula and Northern Neck, with a median age of 46.1. 17.6% of residents are under age 18 and 27.5% are age 60 or older. Richmond is relatively diverse, with a population that is 61% White and 27.9% Black/African American. Although only 0.4% describe their race solely as American Indian/Alaska Native, including people who report their race to the Census as *Two or More Races* and subsequently select American Indian/Alaska Native as a component yields 3.1% of Richmond's population identifying as American Indian/Alaska Native, highest in the region. 7.2% of Richmond residents identify as Hispanic/Latino, also highest in the region.

Educational attainment in Richmond is poor, with 22.9% of adults not completing high school. 17.4% of adults have a bachelor's degree, the fewest in the 10-county area.

Nonetheless, the unemployment rate is the lowest in the Middle Peninsula and Northern Neck. This could be in part because an

impressive 10.9% of adults have an associate degree; Rappahannock Community College has a campus in Richmond offering many workforce development options. Compared to the region, Richmond residents are employed in larger percentages in the construction and manufacturing sectors. 17.7% of households do not have a computer, highest in the region. 7.7% of households have no vehicles available, also the highest rate in the 10-county area.

Median income in Richmond is the third lowest in the area but the poverty rate is lower than the regional average. Median monthly housing costs are lower than average for both homeowners and renters in Richmond, resulting in 18.9% of homeowners being cost-burdened and 22.9% of renter households being cost-burdened. Richmond's housing stock is the oldest in the Middle Peninsula and Northern Neck, with a median year built of 1975. Richmond has the highest percentage, 1.8%, of housing units lacking complete plumbing.

Survey respondents who reside in Richmond report the second highest rate of difficulty paying bills, 37% compared to 24.5% for the region and 15.1 percentage points higher than in 2021. Survey participants also report a decrease in satisfaction with quality of life, dropping 11.9 percentage points from 60.3% satisfaction in 2021 to 48.4% in 2024. Richmond placed second lowest in the 10-county area for satisfaction with quality of life in both 2021 and 2024.

The community needs assessment survey found that Richmond respondents' top **social issues** of greatest concern are:

- ➤ Housing instability and homelessness
- Poverty
- Crime

Top **health** needs are:

- > Transportation to access health services
- > Affordable health services
- Mental/behavioral health services

Top needs to enable aging in place are:

- > Affordable home health care options
- Housing repairs/modification for older adults
- Affordable housing

Top unmet needs for **children and youth** are:

- > Financial skills training
- After school programs
- Youth centers

Most important factors contributing to **high quality of life** are:

- Affordable housing
- Low crime/safe neighborhoods
- Reliable internet/Wi-Fi service

Westmoreland County

Westmoreland is one of three rapidly growing counties in the Middle Peninsula and Northern Neck. Westmoreland's population was 16,718 in 2000, grew to 18,683 in 2023, and is projected to reach nearly 20,700 by 2050, a 24% increase over five decades.

Median age in Westmoreland is 48, slightly younger than the median age for the region but 9.2 years older than Virginia's median age.18.2% of Westmoreland residents are under age 18 and 35.9% are age 60 or older. The county's population is more diverse than the 10-county area: 63.7% White, 24% Black/African American, and 1.1% Asian. 6.2% of residents identify as Hispanic/Latino, second highest in the region. 36.2%

of Westmoreland's residents live alone, second highest in the area, but unlike the region, fewer than half of Westmoreland's one-person householders are age 65+.

Educational attainment is relatively low in Westmoreland, with 15.9% of adults lacking a high school diploma or GED compared to 11.2% in the Middle Peninsula and Northern Neck. 19.7% of adults in Westmoreland have a bachelor's degree, compared to 25.8% for the region.

Median household income in Westmoreland is \$59,766, second lowest in the 10-county area. The unemployment rate is the second highest in the region at 7.5%. Although educational services, health care, and social assistance is, by a small margin, the sector employing the largest share of people in Westmoreland at 15.8%, the proportion is far lower than the regional average of 21.4%. Industries employing high proportions of Westmoreland residents relative to the region include public administration and professional, scientific, management and administrative & waste management services.

18.4% of households in Westmoreland received Food Stamp/SNAP benefits during 2023, the highest proportion in the Middle Peninsula and Northern Neck. The poverty rate in Westmoreland is 13.8% compared to 10.2% for the region, and the gender pay gap for full-time, year-round workers in Westmoreland exceeds \$16,300.

Median monthly housing costs in Westmoreland are the third highest in the 10-county area for owner-occupied units, but below the regional average for renter-occupied units. 25.9% of Westmoreland homeowners are cost-burdened, the highest proportion in the region. 45.9% of renters are cost-burdened,

the second-highest proportion in the Middle Peninsula and Northern Neck.

29% of survey respondents residing in Westmoreland report difficulty paying their bills, up from 9.5% in 2021. Participants also report a decline in satisfaction with quality of life, dropping from 78.3% in 2021 to 68.8% in 2024. With seven of 10 counties experiencing a decrease in satisfaction, Westmoreland continues to rank fourth for satisfaction with quality of life.

The community needs assessment survey found that Westmoreland respondents' top **social issues** of greatest concern are:

- Crime
- Systemic racism
- Elder abuse

Top **health** needs are:

- Affordable health services
- > Transportation to access health services
- > Access to healthy food options

Top needs to enable aging in place are:

- > Affordable home health care options
- Access to healthy meals
- > Transportation

Top unmet needs for children and youth are:

- Access to computers and technology
- Access to higher education and vocational training
- Quality education

Most important factors contributing to **high quality of life** are:

- Affordable housing
- Availability of health care services
- Low crime/safe neighborhoods

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 2025 update of Bay Aging's Community Action Plan, and will inform the development of Bay Aging's next strategic plan.

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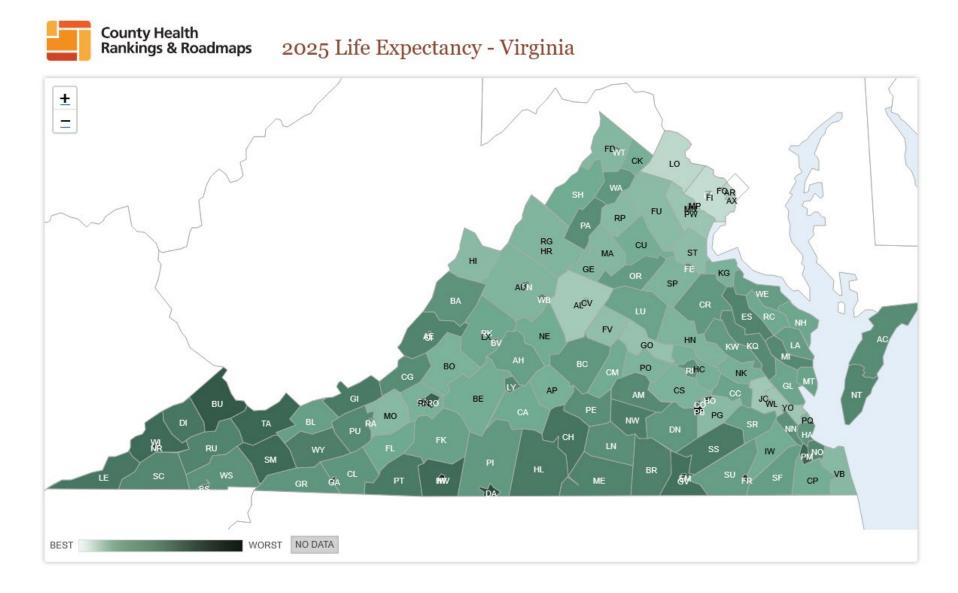
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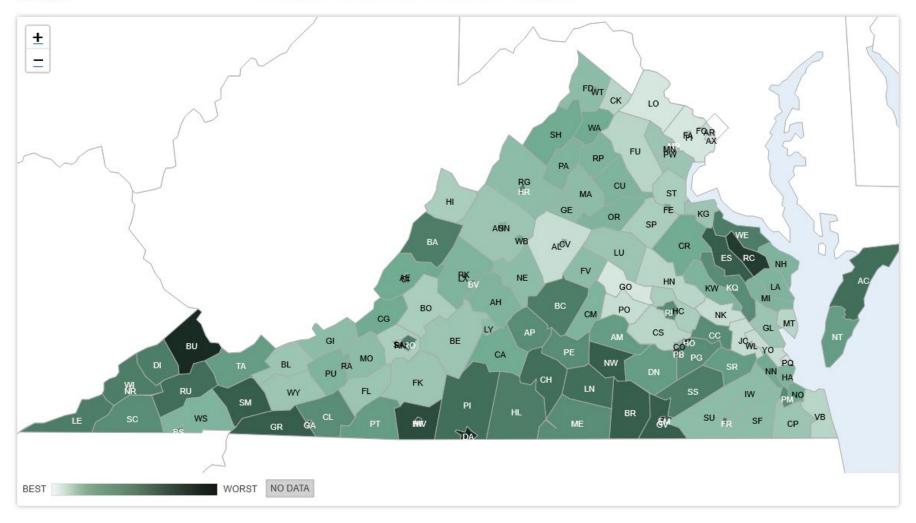
Appendix A

Following are maps illustrating health conditions and environmental factors. Unless otherwise noted, maps are from the University of Wisconsin's 2025 County Health Rankings & Roadmaps, https://www.countyhealthrankings.org/health-data/virginia?year=2025.



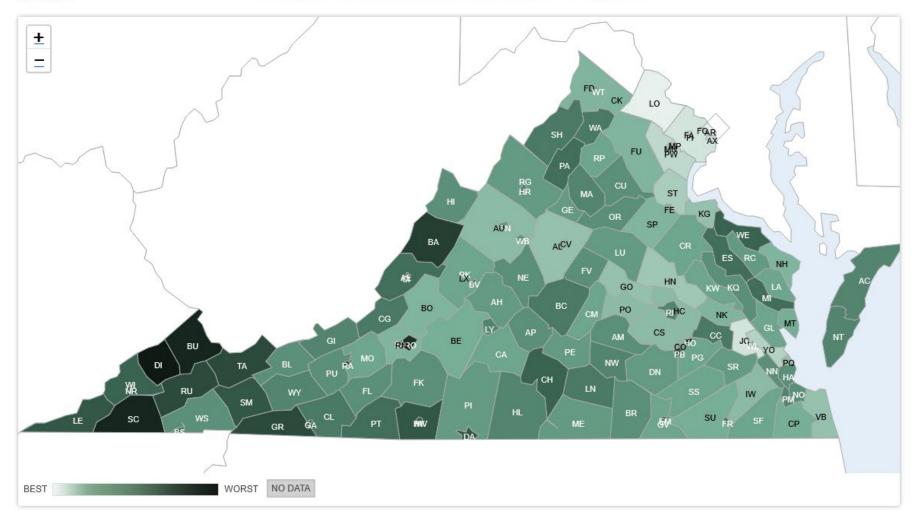


2025 Poor or Fair Health - Virginia



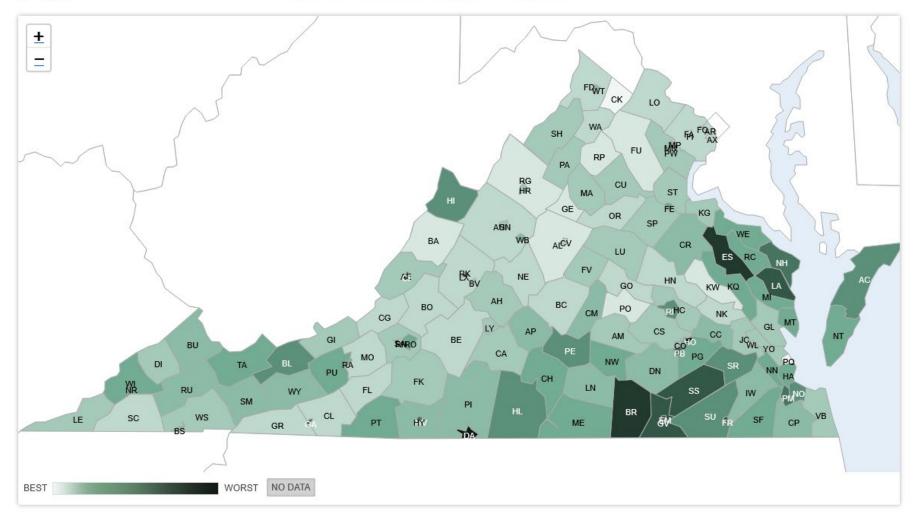


2025 Poor Mental Health Days - Virginia



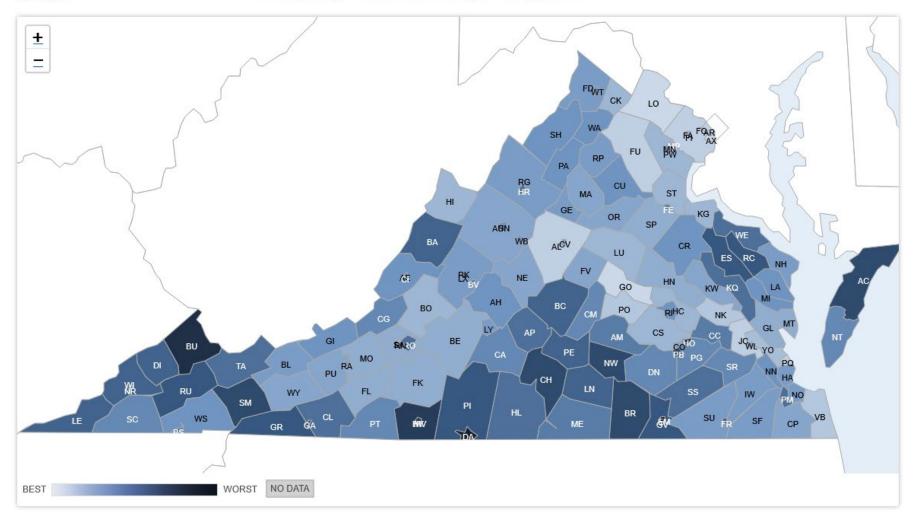


2025 Low Birth Weight - Virginia



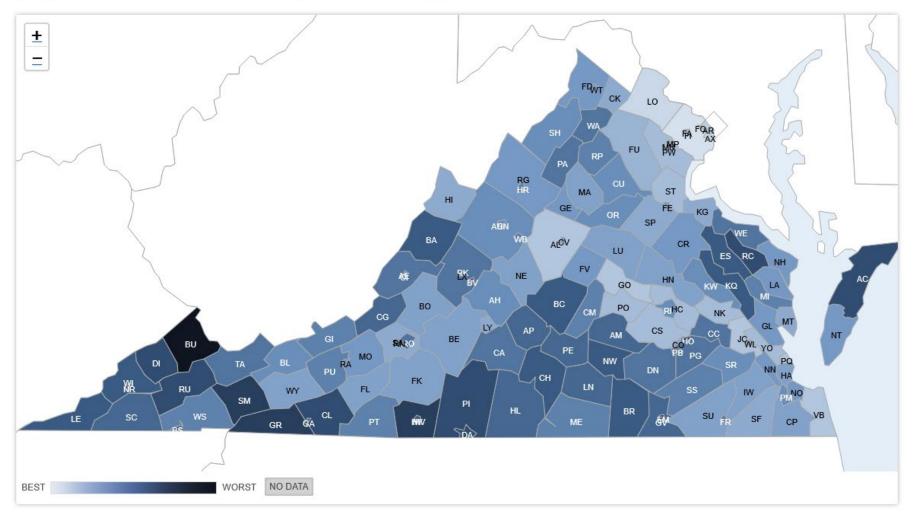


2025 Physical Inactivity - Virginia



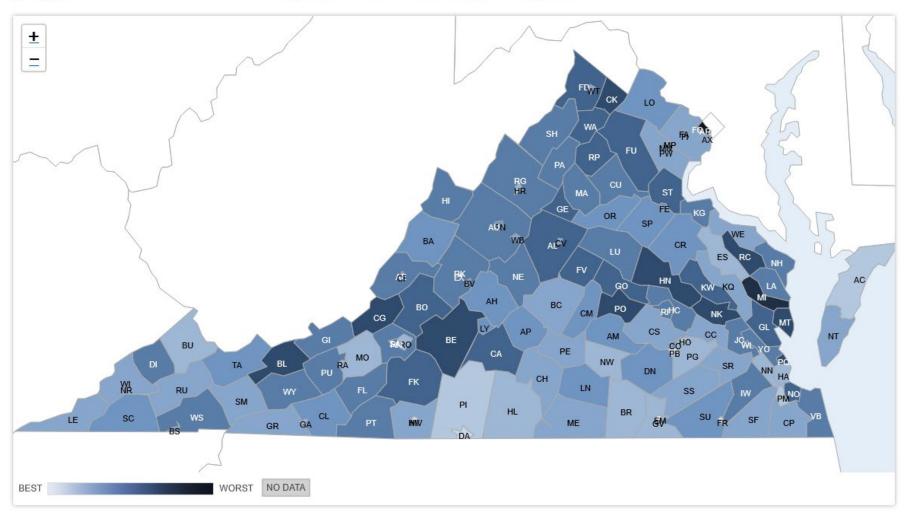


2025 Adult Smoking - Virginia



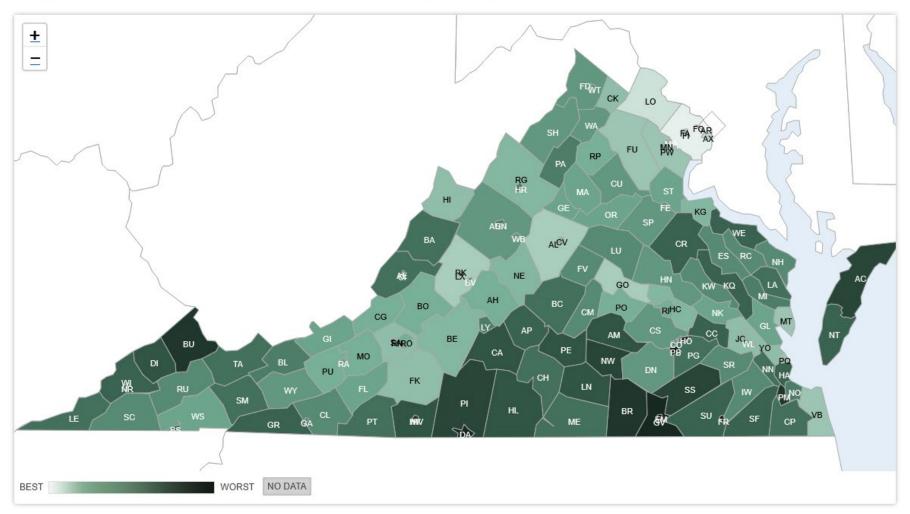


2025 Excessive Drinking - Virginia



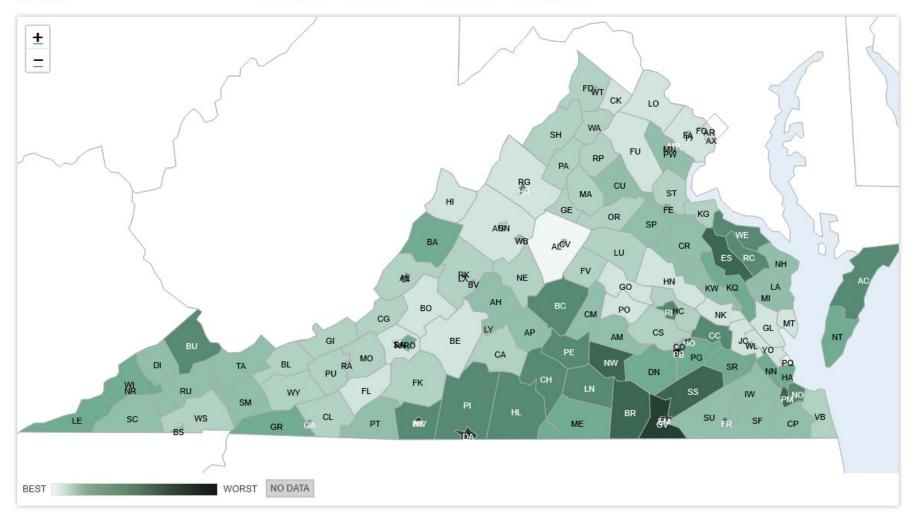


2025 Adult Obesity - Virginia

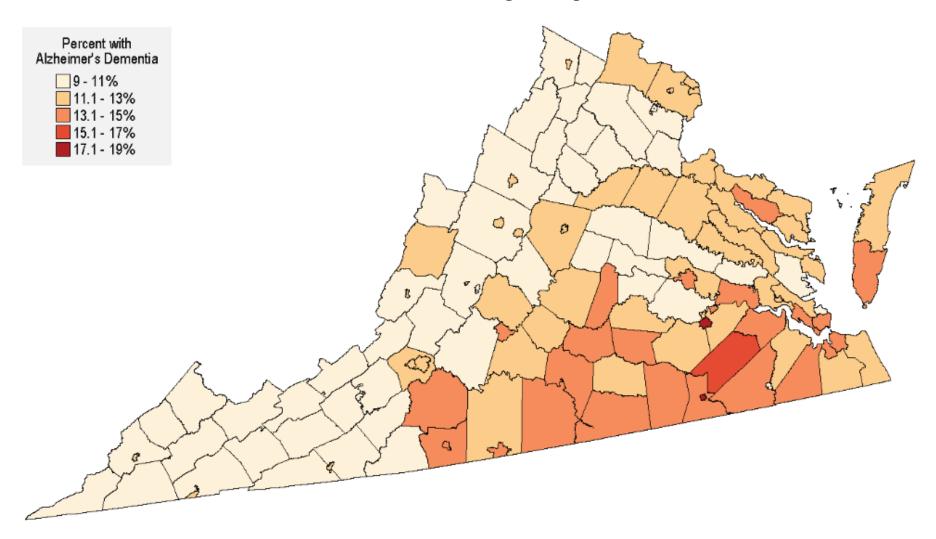




2025 Diabetes Prevalence - Virginia



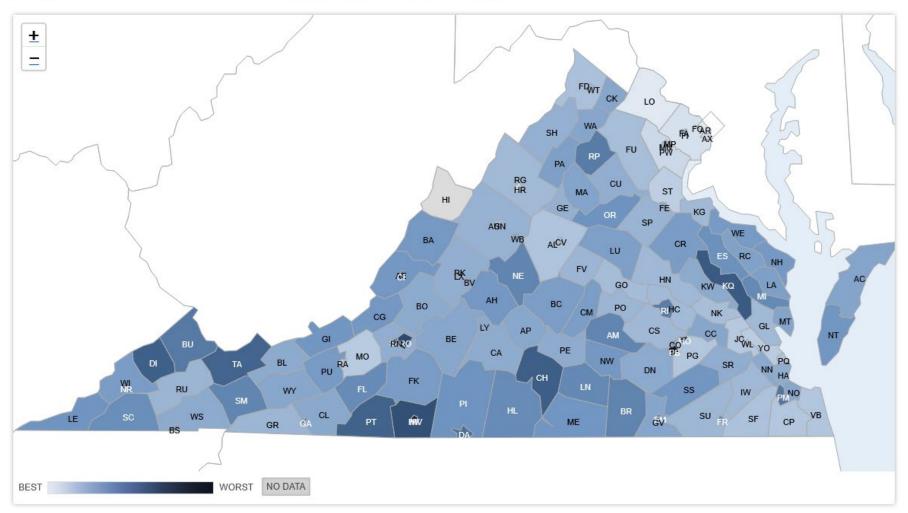
Alzheimer's Dementia in Virginia for Age 65+



Data Source: Alzheimer's Association, "Virginia," County-Level Alzheimer's Prevalence, https://www.alz.org/professionals/public-health/state-overview/virginia, accessed May 1, 2025. Based on data from Dhana et al., Alzheimer's & Dementia, 2023.

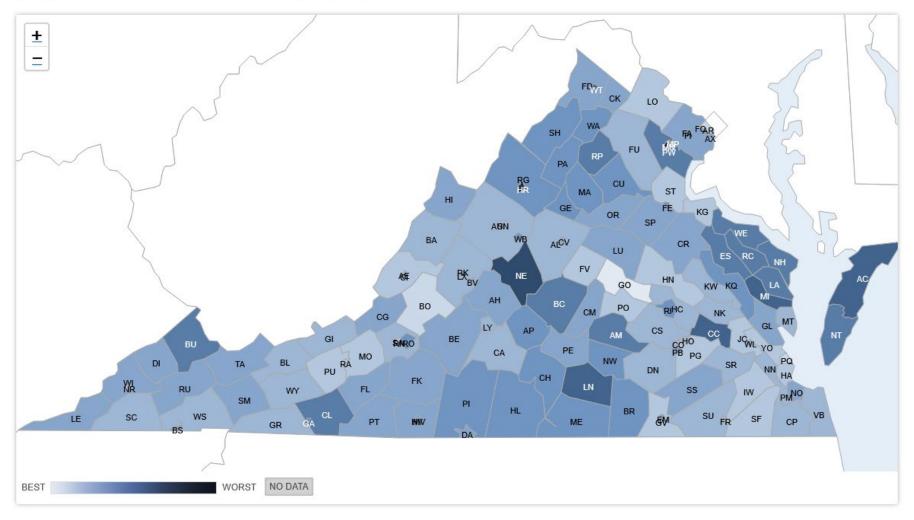


2025 Injury Deaths - Virginia



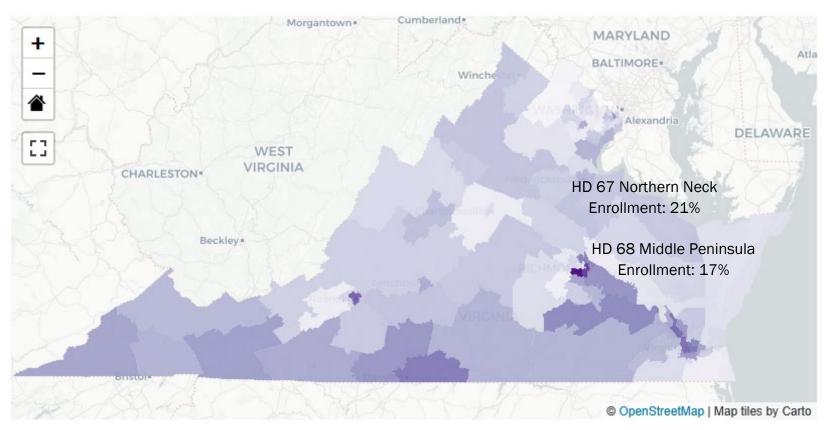


2025 Uninsured - Virginia



Medicaid/FAMIS Enrollment by Legislative District



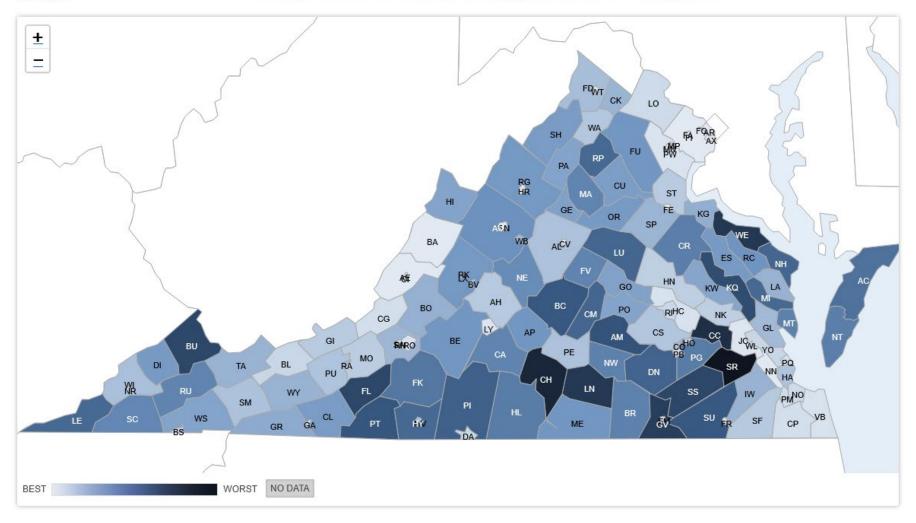


Data Source: The Virginia Public Access Project, April 30, 2025, https://www.vpap.org/visuals/visual/medicaid-enrollment-by-legislative-district/

Note: the boundaries for House Districts do not exactly match Bay Aging's service area, but due to small sample sizes, Virginia Medicaid suppresses county enrollment data for most of the counties in the Middle Peninsula and Northern Neck.



2025 Access to Exercise Opportunities - Virginia



Appendix B

The community needs assessment survey concluded by thanking respondents and inviting them to add open-ended comments. If comments included names of staff or clients, the names were removed; aside from this redaction, remarks appear verbatim below.

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?

Compliment

I would just like to say thank you for your help my family appreciates everything

Keep up the good services.

Thank you for all you do

Thank you for doing wht you do. Please bring adult day care and more programs ti Tappahannock / Essex County.

Bay Aging does a great job with helping the elderly

I appreciate what you all do.

I know about you and will reach out when I need you. I wonder how you make sure the elderly who don't have helpers know about Bay Aging services and are using them. Thank you for all you do.

I'm happy to be a part of this survey

Keep up the great work!

No not at moment, it all good!

Bay Aging is the best resource I have found, with a very caring staff. However, the isolation of the Northern Neck presents unique challenges.

Thank you for all that Bay Aging does. You all have been a good resource when I have needed help for family/friends. How do we get the word out more about Bay Aging? How can we help? One thought is for Bay Aging to do presentations to the financial institutions/grocery stores about programs/assistance offered so employees can share with their customers.

Thank you for all you do.

Thank you for everything you do.

Great service if setup by the people not for the people. Thank you.

We retired here 6 years ago and have not had the need to access services here, except for medical care in the Riverside system which we have found to be excellent.

Employment

Employment-Higher Pay

In order to better our community we need high quality jobs (no more dollar or vape stores), affordable child care, more doctors, Transportaion, for those who don't drive, and housing for single parents or those just entering the workforce. NO more vacation houses, or campgrounds. Long term affordable housing.

Not right now, except for most kids that graduate here do not return after college and starting a family no job opportunities as in the city and further away

Health

Affordable health care/insurance is a MAJOR need for folks that don't qualify for medicaid. Dental coverage is next to none. The cost of Ins and deductibles is impossible for most. You pay for a card saying to have ins.. but still pay \$\$\$\$ out of pocket and have to decide if you pay bills, take your meda or eat; not acceptable!

Housing

I appreciate Bay Aging helping me and other single moms out with housing and other opportunities very thankful

I live in Parker Run Apt and I'm very happy with my stay here!!!

My biggest concern with Bay Housing taking over homelessness services is that not only is there no emergency shelter service for people to be able to stay locally with their children, the case managment services for people who struggle with homelessness are inconsistent and don't provide individuals with what they need to sustain housing. There is a huge focus on the Middle Peninsula, where the Northern Neck is often completely forgotten. We need long term, sustainable housing options in the Northern Neck for individuals with disabilities and who have experienced trauma who have difficulty maintaining housing. We jobs with living wages in the Northern Neck. The schools need to be monitored for how they are providing homelessness services to children in the Northern Neck (often denying transportation for reasons that are typical of families struggling with the trauma of homelessness like missing the transportation). Often times folks are told that they need to move away from their jobs, childrens' schools, and social supports in order to go to a homeless shelter.

Everyone I have ever spoken to is very kind, courteous and well informed. Unfortunately, there is no housing available for elderly people.

Too many rules with no communication. I live in one of the housing units.

We need (myself and my husband) housing with 2 social security checks we are super limited to either rent or preferably buy if any contact by phone txt or leave a message 🕶 🕰 🕶

Yes Bay Aging needs more funding to help people with rent and

Gloucester is a good community we don't need anymore housing except for seniors

Grateful for my housing a pray we can remain here for a few more years until we can afford to buy!

If real estate taxes aren't reined in, older, retired adults will not be able to afford to live in NN/MP.

Safety

It is not safe for me to get and out of car.

Biking and skateboarding on sidewalks need to be enforced. They are dangerous to the elderly and children walking.

Services for Older Adults

Bay Aging is very much appreciated in our community by seniors.

Would like to see restaurants offer early bird specials or smaller senior portions of meals for those seniors on a budget.

I help my elderly parents that live in Tappahannock. Bay Aging has been a great resource however I see a lot of programs that are in person in kilmarnock or Gloucester. My parents will not participate in activities that are online. I just would like something closer for them to enjoy that understand caring for someone with memory care needs

Continuing to build community supports and resources as our population grows and our demographics change.

Was getting meals on wheels canceled, same stuff way too much salt for older folks with health issues. Drivers are GREAT!

I have had many medical issues and there seems to be a lack of some resources in the area for help. We moved from NY and there was much more help up there. My mom is older and about to move down here and we are hopeful things will improve to help her in her aging.

I think Bay Aging has been very helpful in dealing with issues concerning my elders. I do believe though there is a greater need for caregiving in regards to home care for those who shouldn't be alone or cannot afford to pay for such help. We need to find a way to close that gap.

I would love to see a senior center that is for active seniors. One that puts out a schedule ahead of time. One that models, the one in York county. The one we have here does not notify you in advance of activities. The crafts offered are ones that preschoolers would do. I would like to see an annual aging expo.

Older and disabled adults in Mathews County need help with transportation to and from medical appointments.

Senior meals could be better need day trip to go to place to eat out. and have picnics to enjoy, see museums to go to so we can enjoy ourselves

There are many elderly on my road who use wheel chairs, riding mowers, and other electric/motorized conveyances to go to the store. Gloucester needs safe trails for people in need.

This survey would have been better if there were places to explain your responses or provide more comment on every section. There are several services that Bay Aging provides that I was not aware of such as Bay Housing and Bay Health. I know that Bay Transit does a fantastic job because a few friends use the services and I see them on the road everywhere; however, the other services are less well known and the community could benefit from more advertisement. I no longer have living parents but as a caregiver for many years, I could have used more information when they were alive.

Transportation

I take the town bus here in West Point and the driver is so nice.

We have staff that utilize your services to get them to their job. Thank you for what you do! It's a true service to our community to help those without transportation to earn an income!

Increase in route hours would help a lot of working people who rely on your transportation service to get to and from work, which would open up how many hrs they could work, and if they get hired for work

Bay transit needs new operators, but the dispatchers are ok. Elderly mother was left for almost 2 hours after her appointment with no pickup and she didn't have her medication!!

Scheduling rides with Bay Transit can be different. Would love an easier process.

The scheduling could be better, but otherwise it's okay.

The transportation can be hit or miss. Sometimes I can get a ride and sometimes I can't! It's not very reliable. I see the signs for places that are centers for our older aging members of the community however I don't know to many people who have taken advantage of these services. This survey does have me thinking and doing more research into Bay Aging and the programs and what services are available in my community!

Bay Aging has given me a safe place to live. I do wish the bus ran at least on Saturday. It would give eldery the choice to get out on the weekends and enjoy activities that are only there on weekends.

Have used only Freedom Mobility which is a Bay Transit Program. Have not used any other Bay Aging benefits.

I HATE not having a ride to Williamsburg because shopping opportunities are limited, & son lives there!!!! I don't like not having a dentist my insurance will pay for in West Point, and that transportation is poor. I have had to hire a disability law center to fight VDOT over the poor sidewalks in town, and I LONG to move to Parker View Apartments!!!!

I think bay transit needs an improved system I have been struggling getting to work since summer and they have continuously messed up my schedule made me late for work. They need a system for people who have a recurring schedule like my schedule does not change but I still have to call and schedule when I can just call and cancel or reschedule my rides. Bay transit has brought some stress to life with last minute asking for rides and making to my locations on time.

It seems that improvements in health care options wax and wane in this area. It's fine when you're mobile to head to Richmond, Williamsburg or Fredericksburg for care - but higher level services and providers are needed w/in a 30 min trip of towns on the Neck

Like to see an opportunity to have Express in Mathews Va

More routes for transit and trolley

More routes to include Hanover area

Proper public transportation would really help the community! Young and old for medical appointments, getting to work. A simple (I know its more logicstics) up and down 17 would help tremendously!

Transportation, continued

Transportation for shift workers is needed

Transportation is minimal to non existent in Mathews County other than if someone has their own car, the timing of the available Bay transit does not afford someone who depends on that service to obtain and keep employment or get to where they need to go, creating a food desert

Upgrade the community's infrastructure (e.g. transportation, street lighting, utilities, etc.) and improve the accessibility and functionality of public Spaces to ensure that they are easily accessible to all residents, especially those with reduced mobility.

Would be nice to have transportation at least on Sat.!

Other

Several family members live here also and internet avability is a major problem for both young and old here

Easier process for people looking for assistance with well assistance.

With the demographic being mainly elderly I don't see opportunities for those younger then the retirement age.

You all need more employees and programs

My overall satisfaction is not satisfied about some things not all

A comprehensive communications system needs to be established and maintained. It is challenging to find out about various services and programs that would enrich our communities.

I would like to work with you on this project. I am a member of the K&Q DSS Advisory Board. Your questionaire needs work. You need to get info for this survey from people who need services to develop this kind of questionaire.

Would like to see increased time/services and resources for gifted children in public school system. At elementary level, they only receive 30 minutes per week of gifted instruction.

You have nothing for service animals. No dog park. No health provided for them at all.

Appendix C

Bay Aging conducted a 35-question survey to assess community needs in 2024. The survey launched October 1 and closed November 25. Community members could take the survey on paper or online via SurveyMonkey. The 9-page paper survey follows.



Newspaper ad promoting the survey



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 Nov. 15, 2024 - 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/6FVLRVQ. Questions? Call us at 804-758-2386.

 1. Do you live in Virginia's Middle Peninsula and Northern Neck (MP/NN) region? (choose one) ☐ Yes, I live in the MP/NN year-round ☐ Yes, I live in the MP/NN seasonally 	FIVE RAN RESPO \$50 W		
 No, I live somewhere else but I have a connection to the MP/NN region (work there, vacation there, family ties, lived there in the past, etc.) No, I live somewhere else and I am not 	Surve You may dr at these E 8 Gloucester		
familiar with the MP/NN region 2. If you are a resident of the Middle Peninsula or	Montross Urbanna Warsaw		
Northern Neck, how many years have you lived			
there? (choose one) Less than one year 1-4 years 5-9 years 10-19 years	Be sure to mail early to arrive by Nov. 15		
☐ 20-29 years ☐ 30-39 years ☐ 40 or more years	Scan the Q Take the St Your Smart		
3. What county do you live in? (choose one)			
 ☐ Essex ☐ Gloucester ☐ King and Queen ☐ King William ☐ Lancaster ☐ Mathews ☐ Middlesex ☐ Northumberland ☐ Richmond 	w		
☐ Westmoreland	Richmo		

☐ Other

DOMLY CHOSEN SURVEY NDENTS WILL RECEIVE ALMART GIFT CARDS!

ey Drop-Off Locations

op off your completed survey Bay Aging offices, Mon.-Fri., 3:30 a.m.-4:30 p.m.

5959 Fiddlers Green Road 112 Peach Grove Lane 5306 Old Virginia Street 111 Commerce Parkway

Mailing Address

Bay Aging

Attn: Rebekah Smith

PO Box 610

Urbanna, VA 23175-0610

R Code to urvey on **Phone**





QUALITY OF LIFE 4. In the Middle Peninsula/Northern Neck region, I am satisfied with: NOT **AGREE** NEUTRAL DISAGREE APPLICABLE Quality of life here 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 Raising children here Retiring here Socialization opportunities 5. 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 Prefer to take this Availability of health care services survey online? Scan the QR code! 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 Opportunities for socialization (civic organizations, churches, clubs, teams, groups) Parks, trails, and wellness/exercise options Public transportation Reliable internet/Wi-Fi service HOUSING 6. Rate your community's needs with regard to housing: NOT HIGH **MODERATE PRIORITY** PRIORITY 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 rental housing Housing assistance for low-income families

Options for people/families experiencing homelessness

Rehabilitation/reconstruction of vacant homes

Weatherization of homes

Programs to ensure homes have running water & indoor plumbing \, \Box

HEALTH

7. What do you believe are the top THREE head being the highest need. (write the numbers 1, 2 Access to healthy food options Affordable health services Children's health services Dental care options Facilities for physical activities/exerce Health care assistance for older add Health care assistance for veterans Health care options for uninsured/un Increased number of providers Mental/behavioral health services Specialty care (advanced care and Substance use prevention and treat Telehealth services Transportation to access health services	cise and health education ults inderinsured people treatment by a specialist) tment services
8. How do you rate mental/behavioral health seregion? Choose the one best response for each Number of mental/behavioral health provide Affordability of mental/behavioral health ser Awareness, education and prevention Resources to find services Specialty mental/behavioral care Substance use prevention and treatment Transportation to access services	h. DON'T EXCELLENT GOOD FAIR POOR KNOW ers
9. Where is the first place you usually go when Free clinic/charitable clinic Hospital emergency room Medical clinic My doctor/primary care physician Telehealth consultation Urgent care Other	you are sick? (choose one)
10. Are you a caregiver for an older adult or a p ☐ Yes	person with disabilities or chronic conditions? □ No
11. If you answered YES, what services related currently unable to access? (check all that apple ☐ Adult day care ☐ Caregiver counseling services ☐ Caregiver support groups ☐ Help with advance care planning	

SOCIAL ISSUES

12. 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	top cho	ices)
Child abuse Climate/environment					
Crime (property crime, violent crime)					
Cyber crime (scams, phishing, ID theft, etc.)					
Domestic violence					
Drug or alcohol use					
Elder abuse					
Food insecurity					
Housing instability and homelessness					
Loneliness and social isolation					
Manufacturing/selling drugs					
Poverty					
Systemic racism					
 ,					
13. How do you feel your community performs in addressing	the fo	ollowing	g socia	al issue	s?
Choose the one best response for each.					DON'T
		GOOD			
Access to GED classes and adult education					
Access to substance use treatment services					
Affordable child care					
Affordable housing					
Availability of mental/behavioral health services					
Availability of transportation					
Employment opportunities and job training					
Engagement of law enforcement					
Housing options for people/families facing homelessness					
Literacy and English as a second language classes					
Opportunities for socialization					
Options for arts and entertainment					
Services for domestic violence survivors and their families					
Services for older adults					
Services for veterans					
14. How do you usually get information about your commun	ity one	loomm	vunitv.	ovento')
14. How do you usually get information about your communic (check all that apply)	ity and	COIIII	iuriity	events	•
☐ Community magazine					
☐ Email					
☐ Internet					
☐ Local organizations (church, clubs, social groups)					
☐ Newspaper					
□ Radio					
☐ Social media (Facebook, X, Instagram, TikTok, Nextdoor, etc.)					
☐ TV or local cable					
☐ Word of mouth					

TRANSPORTATION			
15. How do you usually travel when you go to work, shopping, r	nedical ap _l	pointments,	, and social
activities in the Middle Peninsula/Northern Neck region? (choos	e one)		
☐ I drive			
☐ A person who lives in my household drives me			
☐ I get rides with friends or family members who don	't live with	me	
☐ I walk or ride a bicycle	d Ubor m	adical tran	apart
☐ I contact a transportation provider (Bay Transit, tax Medicaid transportation, etc.) to drive me	d, Ober, in	iedicai tran	sport,
☐ I do not have access to transportation and often ca	annot det t	o where I v	vant to go
	annot got t	0 111101011	rain to go
16. If you lack access to transportation, what barriers preven	t you from	using Bay	Transit to
travel in the Middle Peninsula/Northern Neck region? (check al	I that apply	')	
□ I am not familiar with Bay Transit			
☐ I don't know how to schedule a ride with Bay Trans			
☐ I don't know if Bay Transit can accommodate my v			
☐ Bay Transit's operating hours don't meet my needs	S		
☐ Too expensive			
☐ Too much planning☐ Other			
			· · · · · · · · · · · · · · · · · · ·
17. As it relates to transportation, what is most important to y	ou? Choo	se your on	e best
response for each statement.		NUOF	NOT
IMPO	ORTANT	NICE TO HAVE	NOT IMPORTANT
Access to a bike route system as a transportation option			
Access to public transportation			
Access to ride hailing services such as Uber/Lyft			
Access to ridesharing or carpooling services that			
provide commuting alternatives to driving alone			
Create express bus routes between Gloucester,			
Tappahannock and Kilmarnock			
Expand on-demand microtransit (like Bay Transit			
Express in Gloucester) to more counties			
Expand transportation to specialized medical services			
outside the Middle Peninsula and Northern Neck			
Improve maintenance of local roads and bridges			
Increase access to transportation for people with			
disabilities and special needs			
Increase enforcement of traffic laws			
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			

OLDER ADULTS	
18. Do you hope to remain in your current residence ☐ Yes ☐ No	as you get older?
19. If you answered YES, what services would help y you age? (check all that apply) Assistance with activities of daily living (bat Assistance with household chores and erral Assistance managing chronic conditions sure Check-ins and review of medications when Companionship Home repairs/modifications to increase accommodate means and means on Wheels Technology such as video calls to stay con Transportation to places like stores, pharm Other	thing, dressing, eating, etc.) ands uch as diabetes transitioning home after a hospital stay cessibility and safety nected with others
20. Where in your community do you believe there ar adults can age in place? Choose your top THREE wit greatest need in your community for older adults. (write the Access to healthy meals Adult day care Affordable home health care options include pharmacy pick-ups, chronic condition care Affordable housing Assisted living options Caregiver support and respite services Education about insurance and health ber Housing repairs/modifications for older ad Long-term services and supports (assistant Mental/behavioral health services including Transportation	th number 1 being what you consider the ne numbers 1, 2 and 3 beside your choices) ding personal care, chore services, a management nefits ults to live in safe housing conditions ince with eating, bathing, dressing, etc.)
CHILDREN & YOUTH 21. In your opinion, how well does your community go youth? Choose the one best response for each. Access to affordable child care Access to dental services Access to healthcare 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	enerally meet the needs of children and DON'T EXCELLENT GOOD FAIR POOR KNOW DON'T EXCELLENT GOOD FAIR FAIR POOR KNOW DON'T EXCELLENT GOOD FAIR FAIR FAIR FAIR FAIR FAIR FAIR FAIR

community, with number 1 b the numbers 1, 2 and 3 besides Access to compu	ters and technology, including education and vocational train	ommur high-sı	nity for	this ag	ge grou	
Appropriate servi Bullying/relations Cultural enrichme Employment opport Financial skills tra Food security Mentoring and tur Obesity prevention Quality education Recreational and	ces for youth with physical and hip violence prevention and ed ent opportunities ortunities for teens aining toring options			al disa	abilities	
ECONOMIC SECURITY AN	D FINANCIAL STABILITY					
23. In a typical month, how o	lifficult is it for you to cover you ☐ Moderate	•	nses aı)ifficult	nd pay	all you	ır bills?
24. Do you own or rent your ☐ Own	home? (choose one) □ Rent		Other			
•	us. (choose one) working and I am looking for a ed, going to school, SSDI, sta	•	me witl	n kids,	etc.)	
26. How well do you believe best response for each state	your community addresses ed	onomic	securi	ity? Cł	noose y	our one
Access to caregiver servi Access to transportation Assistance with searching	EXC ces/adult day care/home care g for employment	CELLENT	GOOD	FAIR	POOR	KNOW
options and benefits Availability of living wage	-					
technical training to in Emergency assistance for Employment opportunitie	r food, rent, utilities					
Options for financial educ credit counseling Small business developm	cation, budgeting classes,					

	ia vaur aga? (aba	2000 000		
	is your age? (cho 18-24 55-64	□ 25-34 □ 65-74	□ 35-44 □ 75-84	□ 45-54□ 85 and older
	is your gender? (Female	(choose one) □ Male	□ Other	☐ Prefer not to say
	would you descrik American Indian Black/African Ar White Two or more rac	nerican	☐ Ásian ☐ Native Hawa	niian/Pacific Islander
_	ou of Hispanic or Yes	Latino origin? (cho	ose one)	
31. How	• • •	luding yourself, live	•	noose one) 5 or more
	nere any children Yes	under age 18 living □ No	in your home? (c	hoose one)
	nere any adults a Yes	ge 60 or older (inclu □ No	ıding yourself) liviı	ng in your home?
Health ar		ay Aging's services re? (<i>See page 9 to l</i> □ No		ansit, Bay Housing, Bay ve do!)
•	answered YES, Very Satisfied	please describe you □ Satisfied		ion with Bay Aging's services. Not Satisfied
forming p	lans of action for	delivering appropria	ate services in you	esponses are critical to ur community. Do you have
The drav	ving will be held on	December 2, 2024. I	If you would like to l	re \$50 Walmart gift cards! be entered for a chance to win a r Aging are not eligible to win.
Name				
Email add	dress			
Phone nu	ımber			

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



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.



- Active lifestyle centers
- Adult day center scholarships available!
- Care transitions and care coordination
- Caregiver support and GUIDE Model services
- Home and personal care
- Insurance counseling
- Long-term care ombudsman
- Meals on Wheels
- Senior employment training
- Veteran Directed Care
- Volunteer opportunities



- Homeless Solutions
- Housing Choice Voucher Program
- Indoor Plumbing Rehabilitation & Emergency Home Repair
- Service-enriched Apartment Communities for Older Adults
- Weatherization Assistance



- 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 in the Middle Peninsula, Northern Neck, New Kent and Charles City Counties
- Microtransit service (similar to Uber/Lyft) in the Gloucester Courthouse to Gloucester Point area
- New Freedom Mobility Management for rides outside Bay Transit's usual service area and hours of operation
- Seasonal trolley service
- Call the Ride Line 877-869-6046 to schedule your ride

Subscribe to our e-newsletter for info on programs & events: www.eepurl.com/idrD91