

**An Assessment of
Regional Well Being:
Second Edition**

2007

**Prepared For
United Way of Central Virginia**

**Prepared By
Thomas W. Seaman Ph. D.
The Center for Community Development and Social Justice
Lynchburg College
Lynchburg, Virginia**

February 2008

Executive Summary

The process that results in an annual Assessment of Regional Well Being is the latest effort to produce the “big picture” assessment needed by United Way and other community decision-makers. The primary underlying premise of this process is that the “big picture” assessment should be based on the best empirical or hard data available and not on opinions. By identifying, collecting, and organizing the best hard data available the “big picture” of the well being of the citizens of Central Virginia can be produced. By repeating the process each year changes and trends can be identified and addressed.

The First Edition of An Assessment of Regional Well Being was guided by United Way of America’s State of Caring Index. This model identifies thirty-seven empirical measures of community well being that fall within the six Community Impact Areas. The model calls for gathering the needed data on each of the thirty-seven indicators and using a complicated formula to combine the measures into a single score of statewide well being. While the State of Caring Index process provided a good starting place, it did not work satisfactorily in Central Virginia. The shortcomings included indicators for which data are not available for Central Virginia and its cities and counties and indicators that are only useful in very large metropolitan areas. In addition, the State of Caring Index did not include some measures of community well being that are key in places like Central Virginia.

In addition to gathering and making available empirical data from each of the six Community Impact Areas, six workshops were convened between July and December 2006 to review the data. Invitees to the workshops included nonprofit agency personnel, public agency staff, related for profit representatives, and community leaders.

At the final December 2006 workshop attendees were asked to identify and rank the most important issues found in the data and/or discussed at the workshops. The issue that emerged at the top of the list was the need for all Central Virginia youth to have the knowledge and skills to succeed in the workplace. To follow up on this community wide outcome of the 2006 assessment process United Way of Central Virginia agreed to convene a forum for all key players needed to address this issue. This initiative remains on going.

This Second Edition of An Assessment of Regional Well Being was built on the experience and lessons learned from the First Edition. Indicators for which data are not available

in Central Virginia have been dropped and indicators believed to be keys to getting the “big picture” have been added. Challenges remain. Data on some key indicators are simply not available. For example, good data on mental health is unavailable. Two of the six Community Impact Areas used by United Way of America were dropped from the 2007 process ---- Voluntarism/Charity/Civic Engagement and Natural Environment. They were dropped because they have not been areas traditionally funded by United Way of Central Virginia. However, dropping them from the Assessment does not mean they are of no interest. Rather, it was recognized that the issues within these areas fall across all the community impact areas and need to be considered in the context of every problem and service aimed at the problem.

Four workshops were convened that focused on topics that emerged from the 2006 workshops as in need of additional attention. The topics were (1) Mental Health: Assessment and Treatment, (2) The Growing Elderly Population: Challenges and Opportunities, (3) The Growing Hispanic Population: Challenges and Opportunities, and (4) Alcohol and Drugs: Use, Abuse, and Treatment.

In the report that follows the data on key indicators in each of the Central Virginia Community Impact Areas will be presented and analyzed and the workshop notes will be presented. This will be followed by a summary of trends, highlights, and low lights and a sketch of the big picture.

Below is a summary of the key 2007 findings organized by community impact areas.

Successful Children and Youth

- With the exception of Lynchburg, the dropout rates fall below the State rate. Lynchburg, while still with the highest rates in the region, has dramatically reduced its rate over the past three years.
- According to the 2000 US Census, 25% of Central Virginia adults did not complete high school. This is higher than both the State and national percentages.
- Per pupil school expenditures in all regional school divisions continue to lag behind the State average. Within the region, Lynchburg spends the most per pupil and Bedford County/City the least.

- The student/teacher ratios in regional schools in both primary and secondary schools are close to the State ratios.
- Performance on the English Standards of Learning exam for 2006/07 shows that only Appomattox exceeded the State average for all students. In all divisions, black students lag behind white students. A trend that has persisted for years.
- Performance on the Math Standards of Learning exam for 2006/07 shows that again only Appomattox exceeded the State average for all students. In all divisions, black students again lag behind white students. A trend that has persisted for years.
- Performance on the Science Standards of Learning exam for 2006/07 shows that only Lynchburg failed to reach or exceed the State average for all students. In all divisions, black students again lag behind white students. A trend that has persisted for years.
- Central Virginia children go to school. The attendance percentages for all school divisions within the region in 2006/07 were at 94% or 95%. There was no significant difference between whites, blacks, or Hispanics. The 2006/07 data continue a long established trend.

Strengthening Families and Individuals

- Median household income within the region lags behind the State median in all jurisdictions. Within the region there is considerable variation with Bedford County having the highest median and Bedford City the lowest. These income patterns have been the trend for many years.
- The number and percentage of the Central Virginia population living below the poverty line increased between 2004 and 2005 in all areas except Amherst. Bedford City showed the greatest increase. The overall trend in poverty in Central Virginia over the past six years has been a gradual but significant increase.
- The unemployment rate in Virginia and Central Virginia in the lowest it has been in years. Interestingly, Central Virginia unemployment still exceeds the State rate. How can the employment numbers look so good and yet the rate of poverty continues to grow?
- Homeownership in Central Virginia is high. Bedford County has the highest ownership rate at nearly 87% while Lynchburg in the lowest at 58%.

- The most recent data on personal bankruptcy is dated (2004) but the trend in the decade of 2000's has been for large numbers of Central Virginians to declare bankruptcy.
- The number and percent of female headed households in Central Virginia is high --- about 20% of all households. Most of these households are not receiving TANF or welfare. They make up a large portion of the working poor.
- While about 20% of all Central Virginia adults live in poverty. The vast majority of them --- 95% --- do not receive welfare. They make up much of the working poor.
- While Central Virginia's Hispanic population is still small there is a clear trend upward. Every indication is that this pattern will continue.

Healthy and Independent Living Throughout Life

- According to dated information, approximately 12 out of every 100 people in Central Virginia have no type of health insurance. Current numbers will not be available until after the 2010 US Census.
- Over the past 30 years infant mortality in Central Virginia has sharply declined --- a success story.
- The rates of infant mortality for black infants are 4 to 5 times greater than for white infants ---- not a success story.
- In 2006 the rates of many forms of serious illness among people in Central Virginia were significantly higher than the State rates. This is a trend that has existed for years. We do not appear to be a healthy population.
- Central Virginians appear to commit suicide at about the same rate as the rest of Virginia.
- Among pregnant women in Central Virginia in 2006 12% did not receive first trimester care. There has been a trend up in this percentage over recent years.
- In 2006 the data indicate that the percentage of low birth weight babies dropped dramatically. Is there a problem with the data or did something substantive occur? Further investigation is needed.
- Among the most predictable findings in this report are the projections of the large numbers of senior citizens that will emerge in the near future. The aging of the baby boomers. Will we be ready?

People in Crisis Receiving Help

- In 2005 the rates of violent crime in Central Virginia inched up. Lynchburg showed the largest increase and only Appomattox showed a decline. Compared to the rest of the State, rates of violent crime remain low.
- In 2005 the rates of property crime in Central Virginia were mixed. Amherst, Appomattox, Bedford County, and Campbell rates were up. In Bedford City and Lynchburg rates of property crime were down. Compared to the rest of the State, rates of property crime remain low.
- In Central Virginia overall, the number of abused and neglected has been on the decline for 3 or 4 years. It is not clear what might account for this trend.
- The huge numbers on the use and abuse on alcohol among the people of Central Virginia are startling ---- especially among teens and young adults.
- The numbers are equally startling for the use and abuse of illicit drugs --- again, especially among teens and young adults.
- In Central Virginia the vast majority who are experiencing dependency on alcohol and/or drugs are not receiving needed treatment. The consequences of these untreated conditions reach into every facet of life.
- Serious psychological disorders are common among Virginia adults. About 1 in 10 experiences these problems annually and the trend is up. The problems are especially acute among 18-25 year olds ---- about 2 in 10 and the trend is also up.
- In 2006 the Central Virginia homeless population moved up after a slight decline in 2005. By far the greatest increase was among those with serious mental illness.

Table of Contents

	Page
Executive Summary.....	1
I. Introduction	7
II. Community Impact Areas	9
A. Successful Children and Youth	9
B. Strengthening Families and Individuals	19
C. Healthy and Independent Living Throughout Life	28
D. People in Crisis Receiving Help.....	36
III. Workshops	44
A. The Growing Elderly Population: Challenges and Opportunities.....	44
B. Mental Health: Assessment and Treatment	45
C. The Growing Hispanic Population: Challenges and Opportunities	48
D. Alcohol and Drugs: Use, Abuse, and Treatment.....	50
IV. Summary: Trends, Highlights, and Lowlights	52

I. Introduction

Producing the First Edition of An Assessment of Regional Well Being was a learning process for all involved. The Assessment was initiated by United Way of Central Virginia staff and volunteers as a means to empirically identify trends and changes in the Central Virginia population that are or could be addressed with United Way funds. Every year the United Way decision-makers struggle with the allocation of funds. The needs and requests always exceed the money available. Which agencies should get an increase? Which agencies, if any, should get a decrease? Are there agencies that are not currently funded that should be funded? Are there specific problems or segments of the population that are not being adequately addressed? These are just a few of the questions decision-makers must attempt to answer.

The desire of these decision-makers has always been to make well-informed decisions. To equip themselves with as much reliable information as possible and use it as a basis for the decisions made. Information is gathered from many sources. Sources include but have not been limited to United Way staff meetings with agency directors, formal reports from funded agencies, and annual assessments of funded agencies by United Way volunteer committees. While these sources are important, they do not provide the decision-makers with an overall assessment of issues, problems, or trends in Central Virginia. They do not provide a systematic assessment of the “big picture” and how it changes from year to year. To provide the “big picture” United Way of Central Virginia has employed a number of strategies over the years. These strategies have included citizen sample surveys, interviews with business and civic leaders, and interviews with key individuals who work in the service areas. For a number of reasons none of the strategies have proven satisfactory.

The process that results in an annual Assessment of Regional Well Being is the latest effort to produce the “big picture” assessment needed by decision-makers. The primary underlying premise of this process is that the “big picture” assessment should be based on the best empirical or hard data available and not on opinions. By identifying, collecting, and organizing the best hard data available the “big picture” of the well being of the citizens of Central Virginia can be produced. By repeating the process each year changes and trends can be identified and addressed.

The First Edition of An Assessment of Regional Well Being was guided by United Way of America's State of Caring Index. This model identifies thirty-seven empirical measures of community well being that fall within the six Community Impact Areas. The model calls for gathering the needed data on each of the thirty-seven indicators and using a complicated formula to combine the measures into a single score of statewide well being. While the State of Caring Index process provided a good starting place, it did not work satisfactorily in Central Virginia. The shortcomings included indicators for which data are not available for Central Virginia and its cities and counties and indicators that are only useful in very large metropolitan areas. In addition, the State of Caring Index did not include some measures of community well being that are key in places like Central Virginia.

In addition to gathering and making available empirical data from each of the six Community Impact Areas, six workshops were convened between July and December 2006 to review the data. Invitees to the workshops included nonprofit agency personnel, public agency staff, related for profit representatives, and community leaders.

At the final December 2006 workshop attendees were asked to identify and rank the most important issues found in the data and/or discussed at the workshops. The issue that emerged at the top of the list was the need for all Central Virginia youth to have the knowledge and skills to succeed in the adult workplace. To follow up on this community wide outcome of the 2006 assessment process United Way of Central Virginia agreed to convene a forum for all key players needed to address this issue. This initiative remains on going.

This Second Edition of An Assessment of Regional Well Being was built on the experience and lessons learned from the First Edition. Indicators for which data are not available in Central Virginia have been dropped and indicators believed to be keys to getting the "big picture" have been added. Challenges remain. Data on some key indicators are simply not available. For example, good data on mental health is unavailable. Two of the six Community Impact Areas used by United Way of America were dropped from the 2007 process ---- Voluntarism/Charity/Civic Engagement and Natural Environment. They were dropped because they have not been areas traditionally funded by United Way of Central Virginia. However, dropping them from the Assessment does not mean they are of no interest. Rather, it was recognized that the issues within these areas fall across all the community impact areas and need to be considered in the context of every problem and service aimed at the problem.

Four workshops were convened that focused on topics that emerged from the 2006 workshops as in need of additional attention. The topics were (1) Mental Health: Assessment and Treatment, (2) The Growing Elderly Population: Challenges and Opportunities, (3) The Growing Hispanic Population: Challenges and Opportunities, and (4) Alcohol and Drugs: Use, Abuse, and Treatment.

In the report that follows the data on key indicators in each of the Central Virginia Community Impact Areas will be presented and analyzed and the workshop notes will be presented. This will be followed by a summary of trends, highlights, and low lights and a sketch of the big picture.

II. Community Impact Areas

For many years United Way of Central Virginia (UWCV) has divided the community, and its needs and programs, into “Community Impact Areas” (CIA). The four CIA are Successful Children and Youth, Strengthening Families and Individuals, Healthy and Independent Living Throughout Life, and People in Crisis Receiving Help. The data in this report will be organized around the four Community Impact Areas.

A. Successful Children and Youth

The programs in this community impact area are intended to create opportunities for children and youth to develop into productive, healthy adults. The outcome goal: every child should be provided a healthy, safe environment and the opportunity to develop to his or her full potential,

Many of the empirical indicators of the success of children and youth fall in the area of educational opportunities and school achievement. Key indicators and current data are presented below. Other important areas for successful children and youth are health, economic well being, family stability, and safety. These will be presented under other Community Impact Areas.

A1. Percentage of Teens Who Dropped Out of School*

	Year					
	2005-06	2004-05	2003-04	2002-03	2001-02	2000-01
Central Virginia						
Amherst County	1.24	0.18	0.00	0.64	1.68	2.48
Appomattox County	1.50	1.53	1.87	1.92	3.63	1.62
Bedford County	1.26	1.11	0.78	1.22	1.16	1.34
Campbell County	1.82	1.29	0.91	1.75	1.05	1.76
Lynchburg City	2.68	5.68	9.31	8.60	2.12	0.91

Virginia 1.88 1.85 2.05 2.18 2.02 2.46

*Source: Virginia Department of Education

Analysis: The annual dropout percentage is the number of students who leave school divided by the total enrollment in grades 7-12 in September of each year. The percentage of teens that drop out of school each year is an insightful indicator of failures in family, school, and/or community as well as a likely forecast of problems to come such as crime, unemployment, and welfare dependency. In 2005/06 Central Virginia as a whole, with the exception of Lynchburg, have dropout percentages below the State percentages --- a positive. This pattern has existed of many years. In addition, the overall trend, with exceptions, has been declining percentages. The most obvious and troubling numbers in the above data are the Lynchburg numbers. The 2005/06 percentages do show a significant decrease since 2003/04 and 2004/05 but the number still remains above the State percentage.

A2. Percentage of Adults Who Completed High School or Higher Education*

	Year 2000
Central Virginia	74.4
Amherst County	70.6
Appomattox County	70.7
Bedford City	70.9
Bedford County	80.1
Campbell County	73.4
Lynchburg City	78.0
Virginia	81.5
United States	80.4

*Source: 2000 US Census

Analysis: Among the citizens of Central Virginia, the number of adults with a high school education or more ranges between 7 to 8 out of 10. Bedford County is highest at 8 of 10 adults while Bedford City is lowest at 7 of 10 adults. While the regional numbers are in line with State and national numbers there is some reason for concern. Twenty to thirty percent of the adult population has less than a high school education. This statistic signals possible problems with adult literacy, a poorly educated labor force, unemployment, welfare dependency, and other problems.

A3. Public School Expenditure Per Pupil*

	2005-06	2004-05	2003-04	2002-03	2001-02	2000-01
Amherst County	8,477	7,873	7,258	6,882	6,802	6,910
Appomattox County	7,950	7,636	6,948	6,645	7,160	6,669
Bedford County	7,864	7,255	6,559	7,197	6,529	6,152
Campbell County	8,048	7,549	7,023	6,777	6,606	7,273
Lynchburg City	9,240	8,602	8,220	7,882	7,701	7,374

Virginia 9,755 9,202 8,552 8,182 7,836 7,647
 *Source: Virginia Department of Education

Analysis: The dollars spent per student for operational expenses is often viewed as a measure of quality. No Central Virginia school division spends as much as the State average. Lynchburg spends the most and Bedford the least. This has been a long standing pattern. Over the years each division has made inflationary increases but little more.

A4. Pupil/Teacher Ratios in Public Elementary and Secondary Schools*

	Grades K-7			Grades 8-12		
	2005/06	2004/05	2003/04	2005/06	2004/05	2003/04
Central Virginia						
Amherst County	12.5	12.3	12.7	9.8	10.0	10.3
Appomattox County	12.8	12.1	12.1	10.4	10.2	10.2
Bedford County	14.3	15.0	15.8	9.9	10.1	10.5
Campbell County	17.9	18.2	18.5	8.3	8.2	7.9
Lynchburg City	11.1	10.5	10.6	11.2	11.4	11.9
Virginia	12.6	12.7	13.1	11.2	11.2	11.2

*Source: Virginia Department of Education

Analysis: Another widely accepted indicator of quality public education is the ratio between students and teachers. Presumably, the lower the ratio, the higher the quality of instruction (all else being equal). The data above indicate that regional ratios for both K-7 and 8-12 grades are close to the State ratios. In addition, there is little variation within the region from one school division to another. The obvious exception to this generalization is in Campbell County with by far the highest ratio for K-7 and the lowest ratio for grades 8-12. This appears to be a long standing pattern for Campbell County. Further investigation is required in order to account for this deviation from the general pattern.

A5. Standards of Learning English Test: Percentage Passing*

Central Virginia	2006-07			
	All	White	Black	Hispanic
Amherst	83%	86%	74%	86%
Appomattox	91%	94%	84%	**
Bedford	84%	85%	70%	84%
Campbell	84%	86%	77%	78%
Lynchburg	84%	94%	76%	89%

Virginia	85%	90%	76%	72%
-----------------	-----	-----	-----	-----

2005-06

Central Virginia	All	White	Black	Hispanic
Amherst	83%	87%	72%	84%
Appomattox	83%	88%	73%	**
Bedford	84%	86%	65%	84%
Campbell	83%	85%	72%	88%
Lynchburg	84%	94%	76%	89%

Virginia	84%	89%	73%	76%
-----------------	-----	-----	-----	-----

2004-05

Central Virginia	All	White	Black	Hispanic
Amherst	80%	85%	69%	72%
Appomattox	83%	90%	69%	50%
Bedford	60%	82%	58%	73%
Campbell	79%	81%	68%	91%
Lynchburg	80%	92%	69%	93%

Virginia	81%	87%	70%	73%
-----------------	-----	-----	-----	-----

*Source: Virginia Department of Education

** Too few students for a meaningful percentage

Analysis: The Standards of Learning exam scores are increasingly becoming the measures of success for Virginia schools and school children. A review of the English exam scores for 2006/07 reveals a number of interesting observations. Appomattox County is the only school division to score above the State passing percentage for all students. Among white students, only Appomattox and Lynchburg are above the State passing percentage. Among black students, Amherst and Bedford fall below the State average. Among Hispanic students, all divisions are at or above the State passing percentage. Overall, the gap between white and black students continues to be substantial. Among Hispanic, for whom English is often a second language, students did surprisingly well.

A6. Standards of Learning Math Test: Percentage Passing*

	2006-07			
	All	White	Black	Hispanic
Amherst County	77	81	64	85
Appomattox County	84	88	75	**
Bedford County	78	80	62	78
Campbell County	79	82	65	75
Lynchburg City	76	89	65	79
Virginia	80	85	68	70
	2005-06			
	All	White	Black	Hispanic
Amherst County	75	78	66	92
Appomattox County	77	82	65	**
Bedford County	76	78	56	78
Campbell County	75	77	65	75
Lynchburg City	72	85	59	79
Virginia	76	81	62	70
	2004-05			
	All	White	Black	Hispanic
Amherst County	86	90	78	95
Appomattox County	84	88	74	**
Bedford County	82	84	62	84
Campbell County	81	84	68	89
Lynchburg City	81	91	70	88
Virginia	84	89	73	77

*Source: Virginia Department of Education

**Too few students for meaningful percentages

Analysis: A review of the math scores for 2006-07 indicates that for all students only Appomattox County scored higher than the state average. For white students, Appomattox and Lynchburg exceeded the state average. For black students, only Appomattox exceeded the state average. Hispanic students in all divisions exceeded the state average. As was the case with the English exam, whites and Hispanics did substantially better than blacks. A review of the math score the last three years indicates that Central Virginia students as a group are losing ground.

A7. Standards of Learning Science Test: Percentage Passing*

	2006-07			
	All	White	Black	Hispanic
Amherst County	89	93	79	91
Appomattox County	92	97	80	**
Bedford County	88	90	69	82
Campbell County	88	91	78	85
Lynchburg City	86	96	76	93

Virginia	88	93	77	78
			2005-06	
	All	White	Black	Hispanic
Amherst County	85	89	74	92
Appomattox County	88	92	78	**
Bedford County	89	91	68	85
Campbell County	86	89	75	87
Lynchburg City	84	95	73	93
Virginia	85	91	73	74
			2004-05	
	All	White	Black	Hispanic
Amherst County	83	88	72	90
Appomattox County	87	92	73	**
Bedford County	86	88	65	82
Campbell County	82	86	69	90
Lynchburg City	84	96	71	92
Virginia	84	91	72	73

*Source: Virginia Department of Education

**Too few students for meaningful percentages

Analysis: The science exam passing percentages reveal patterns similar to the other tests. Overall, regional passing percentages are close to the State at 84%. Again, whites did significantly better than blacks in every division. The big surprise in these scores is among the Hispanic students. Hispanic students in all divisions did substantially better than Hispanics across the State. In Appomattox County where Hispanics did poorly in English and math, 100% passed the science exam.

A8. Public School Attendance Percentages*

			2006-07	
	All	White	Black	Hispanic
Amherst County	95	95	96	96
Appomattox County	94	94	94	91
Bedford County	95	95	95	95
Campbell County	95	95	95	94
Lynchburg City	94	95	94	94
Virginia	95	95	95	95
			2005-06	
	All	White	Black	Hispanic
Amherst County	95	95	95	95
Appomattox County	94	94	94	95
Bedford County	95	95	95	95
Campbell County	95	94	95	94
Lynchburg City	95	95	95	95
Virginia	95	95	95	95

	2004-05			
	All	White	Black	Hispanic
Amherst County	95	95	96	95
Appomattox County	95	95	95	**
Bedford County	95	95	96	94
Campbell County	95	95	95	94
Lynchburg City	95	95	94	95
Virginia	95	95	95	95

*Source: Virginia Department of Education

**Too few students for meaningful percentages

Analysis: Year after year Central Virginia's children go to school. On any given day, approximately 95% of all children are in school. This percentage does not vary from jurisdiction to jurisdiction or from year to year. The same 95% attendance also holds true for the state as a whole.

A9. Child Day Care Capacity and Ranking in Virginia*

	2007	2006	2005
Amherst County	29%/33 rd	25%/47 th	24%/49 th
Appomattox County	18%/77 th	17%/77 th	17%/75 th
Bedford City	11%/107 th	11%/105 th	11%/108 th
Bedford County	48%/11 th	56%/6 th	53%/9 th
Campbell County	27%/41 st	26%/44 th	26%/39 th
Lynchburg City	38%/19 th	35%/21 st	35%/20 th
Virginia	26%	26%	25%

*Source: Virginia Kids Count 2007. The data include only licensed facilities and religious facilities exempt from license requirements.

Analysis: Day care capacity is defined as the number of day care slots per 100 children ages 0 to 12. The higher the percentage, the proportionately more slots are available. The higher the proportionate number of slots, the higher the county or city is ranked. Included in the data are all facilities regulated or licensed by the Virginia Department of Social Services including licensed day care centers, licensed family day homes, and church facilities. The data reveal that in most jurisdictions day care capacity has remained relatively constant from year to year. The exception to this trend is Bedford County where capacity declined in 2007. At the same time, Bedford County has by far the highest capacity and the highest rank within the region.

Successful Children and Youth: United Way Supported Agencies and Programs

United Way of Central Virginia is currently funding 12 agencies providing 18 programs that fall within the community solution area of Successful Children and Youth. These are programs that create opportunities for our children and youth to develop into productive, healthy adults. In 2006-07 United Way spent \$714,538 or 32.6% of its total budget in this service area. In 2007-08 the amount spent was or % of the total budget. Below is a listing of the currently funded agencies and programs, the allocated funds for 2006-07 and 2007-08, and the percentage change if any.

Alliance for Families and Children

Partners in Prevention: to bring about a reduction in the use of alcohol, tobacco and other drugs, as well as a reduction in youth violence and out-of-wedlock pregnancies through educational information, programs, training and awareness events. United Way Funding: 2007-08: \$30,000 and 2006-07: \$26,077. A 15% increase.

American Red Cross – Historic Virginia Chapter

Youth Services: Safe Haven provides tutor time Monday –Friday, other activities such as Family night, health and safety training, drug education. Provide daily snacks and dinner one night a week. Serves mainly at-risk youth ages 5-16 at Raintree Facility (housing development). United Way Funding: 2007-08: \$5,000 and 2006-07: \$5,042. No meaningful change.

Boy Scouts

Scout Reach: provides scouting for at risk, low income youth in urban and rural settings. Challenges include locating and training positive role models for leadership, finding funding for uniforms, activities and summer camp programs, providing transportation for youth to attend meetings. United Way Funding: 2007-08: \$40,000 and 2006-07: \$59,519. A 33% decrease.

YMCA of Central Virginia

Child Day Care: a year round state licensed program serving infants thorough 18 years of age. The Center provides daycare/preschool, before & after school, extended day, delayed openings, early dismissal, all day fun days, inclement weather and summer child care. It also

provides scholarships/financial aid to families who qualify. Approximately 40% of families receive financial aid. Provides USDA approved snack in morning and afternoon. Success By 6 certified. United Way Funding: 2007-08: \$68,000 and 2006-07: \$66,047. A 3% increase.

Outreach: activities and week-end events for low income, at-risk youth and families at no cost. Program emphasizes leadership development, healthy lifestyles, social skills, academic tutoring and positive recreation. Children picked up from inner city schools and homes. United Way Funding: 2007-08: \$7,000 and 2006-07: \$5,295. A 32% increase.

Mary Bethune Academy

Child Care/Nutrition: affordable day care for children ages 2 to 5. A significant number come from single parent households primarily headed by mother. The program has curriculum in place as well as activities and outings outside classroom. It provides breakfast and lunch as well as snack. A 15 passenger vehicle is available to transport inner city children. Bethune asks for funding for child care and nutrition. The program is Success By 6 certified. United Way Funding: 2007-08: \$150,000 and 2006-07: \$149,290. No meaningful change.

Bedford YMCA

Child Care: the largest childcare provider in Bedford County. The program provides before and after school during school year on school sites and all day childcare in the summer months at the YMCA and various schools. It serves youth ages 5-12. Money needed to provide financial assistance. United Way Funding: 2007-08: \$28,775 and 2006-07: \$24,649. A 17% increase

Preschool: serves ages 2 1/2 – 5. It is a 6:30 a.m.-6:00 p.m. program and employs the High Reach Learning curriculum. Children are in swim program 2 days a week, music program 1 day a week, field trips. Financial aid is given to families that qualify. It is Success By 6 certified. United Way Funding: 2007-08: \$7,500 and 2006-07: \$10,083. A 26% decrease.

Salvation Army

Noah's Ark: serves infants to 5 years from 6:30 a.m. to 5:30 p.m. Offers before and after school supervision when school is not in session including holidays, bad weather days and other school closings. The program accepts children with developmental delays as well as physical, emotional and behavioral challenges. There is a waiting list for infant through 2 years. Breakfast,

lunch and snacks are provided. Success By 6 certified. United Way Funding: 2006-07: \$45,000 and 2006-07: \$40,839. A 10% increase.

Youth Development: Serves youth in grades 1-12. Weekly structured programs that are age and gender specific. Activities provided to develop physical, mental and social skills. Young people earn badges. The program includes a summer day camp for children ages 6-12. Summer day camp is an 8-10 week program and includes swimming, skating, crafts and character building lessons and experiences. Also includes a residential camp at no expense to the child. Salvation Army sent 32 to various residential camps in 2004. United Way Funding: 2007-08: \$20,000 and 2006 -07: \$41,876. A decrease of 52%.

Big Brothers/Big Sisters

Big Brothers/Big Sisters; pairs adult role model with at-risk children ages 6-18. Initial eligibility for boys is 6-12 and girls 6-14. Once matched the child is able to remain in program to age 18 or completion of high school. The program provides one on one adult attention towards improving academic, personal and social competencies of each child. United Way Funding: 2007-08: \$102,000 and 2006-07: \$103,442. No meaningful change.

Big Buddy: The program pairs adult volunteer with child ages 6-12 for an hour a week. It works with child on school grounds. The goal of the program is moderate improvements in academic performance, attitude towards school, behavior, self esteem and relationships with others. United Way Funding: 2007-08: \$20,000 and 2006-07: \$15,125. An increase of 32%.

CASA

CASA: Abused and neglected children are placed in a safe, permanent home in an expedient manner. Each child is monitored to see that court's orders are followed and that child remains physically and emotionally safe. United Way Funding: 2007-08: \$60,265 and 2006-07: \$59,539. No meaningful change.

LynCAG

Head Start: pre-school program located at 12 sites. The program addresses educational, social, emotional, nutritional, psychological and health needs of children and families. All

students are assessed and independent development plans are developed. Parents are encouraged to participate in activities. The program enrolls four hundred and fifty-three 3 and 4 year old children. A minimum of 10% of children are disabled. Ninety percent of the children must be from low-income families. Students are enrolled through an application process. United Way Funding: 2007-08: \$31,000 and 2006-07: \$29,634. An increase of about 5%.

Project Discovery: focuses on preventing high school students from dropping out of school by encouraging academic excellence and promoting higher education for low-income and potentially first generation college students. Provided services to 67 high school youth and had 15 graduate from high school with 11 students enrolled to attend post-secondary institutions. Students attend weekly after school meetings to learn study techniques, prepared for SAT's, had guest speakers and educational videos. United Way Funding: 2007-08: \$0 and 2006-07 - \$2,550. The program is not currently funded by United Way.

YWCA

Youth Development: at risk teen girls at Heritage, E C Glass and 1 at Jefferson Forest. Education oriented mentoring program. Focus includes completion of high school, planning for future education or vocation, esteem building, job training, job placement, personal and social development, drug abuse prevention, life skills and decision making. United Way Funding: 2007-08: \$10,400 and 2006-07: \$10,083. No meaningful change.

Piedmont Community Impact Organization

Camp Philadelphia: summer community outreach program to provide at-risk and disadvantaged youth tools to become well rounded and productive citizens. Program operates for 6 weeks for youth ages 6-15 years. Youth participate in recreational, social and cultural activities with positive role models as one to one mentors. Well balanced meals and snack are provided. United Way Funding: 2007-08: \$4,076 and 2006-07: \$5,956 --- a decrease of 32%.

B. Strengthening Families and Individuals

The programs in this community impact area are intended to develop skills for family and individual stability. The outcome goal: families and individuals are to have access to services that enable them to live independently and self-sufficiently.

Many of the empirical indicators of the strong families and individuals fall in the area of economic and employment characteristics. Key indicators and current data are presented in tables below.

B1. Central Virginia Median Household Income (\$)*

	2005	2004	2003	2002	2001
Central Virginia					
Amherst County	40,673	38,891	37,465	37,051	37,133
Appomattox County	39,199	38,080	36,859	36,542	36,577
Bedford City	32,143	31,754	30,605	31,210	31,432
Bedford County	49,812	48,518	47,143	45,724	44,881
Campbell County	40,230	40,054	38,527	37,373	37,198
Lynchburg City	35,213	32,997	31,877	31,230	31,988
Virginia	54,207	51,141	50,028	48,224	48,130
United States	46,242	44,334	43,318	42,409	42,228

*Source: US Census Bureau

Analysis: Bedford County continues to lead the region in median household income and Bedford City continues to rank lowest in the region. No Central Virginia county or city reaches the State average median household income. In the most recent data available Lynchburg shows the year-to-year largest gain with a 6.7% increase from 2004 to 2005.

B2. Number and Percentage of Central Virginia Population Living Below the Poverty Line*

		2005	2004	2003	2002	2001	2000
Central Virginia							
Amherst County	#	3,615	3,447	3,388	3,542	3,146	3,317
	%	12.0	12.6	11.1	11.6	10.4	10.7
Appomattox County	#	1,660	1,649	1,716	1,668	1,522	1,586
	%	12.1	11.8	12.4	12.2	11.1	11.4
Bedford City	#	1,134	881	927	920	903	1,160
	%	20.3	15.1	15.8	15.4	15.1	19.7
Bedford County	#	5,040	5,068	5,147	4,581	4,109	4,529
	%	7.8	7.7	8.0	7.3	6.7	7.1
Campbell County	#	5,770	5,792	5,953	5,502	4,873	5,480
	%	11.2	11.1	10.8	10.8	9.6	10.6
Lynchburg City	#	11,145	10,524	10,221	10,764	9,167	10,353
	%	19.2	17.8	17.5	18.3	15.7	15.9
Virginia	%	10.0	9.5	9.9	9.6	8.8	8.9
United States	%	13.3	12.7	12.5	12.1	11.7	11.3

***Source:** US Census Bureau

Analysis: The region's cities --- Lynchburg and Bedford --- continue to have the largest proportion of its citizens living in poverty. Twenty percent or 1 in 5 regional city residents are poor. Bedford County continues to have by far the smallest proportion of its citizens in poverty with 7.8% in 2005. Only Bedford County has a poverty percentage lower than the State average. The overall regional trend between 2000 and 2005 has been a gradual but significant increase in the number and percentage of citizens living in poverty.

B3. Percentage of Adults Unemployment*

	Sept 2007	2006	2005	2004	2003
Central Virginia					
Amherst County	2.9	3.1	3.9	4.4	4.9
Appomattox County	4.1	3.6	4.5	4.4	5.5
Bedford City	3.8	3.7	4.4	4.6	4.7
Bedford County	2.6	2.9	3.1	3.6	4.0
Campbell County	3.0	3.2	3.8	4.2	4.9
Lynchburg City	3.3	3.6	4.4	5.0	5.6
Virginia	2.8	3.0	3.5	3.7	4.1
United States	4.5	4.6	5.1	5.5	6.0

***Source:** Virginia Employment Commission

Analysis: The September 2007 unemployment statistics present a very healthy employment picture for Central Virginia and the State as a whole. Appomattox County lags a bit behind the other jurisdictions. This is a pattern of at least recent history that continues. Central Virginia jurisdictions have avoided the employment down turns that have fallen on nearby areas Danville and Martinsville. The low unemployment percentages and the comparatively high poverty percentages reported in **B2** seem contradictory. Nearly everyone is employed and yet poverty is high. One logical explanation is that many workers do not earn a living wage.

B4. Regional Homeownership Rates*

	2000
Central Virginia	
Amherst County	78.1
Appomattox County	81.1
Bedford City	60.3
Bedford County	86.6
Campbell County	77.3
Lynchburg City	58.5
Virginia	68.1
United States	67.4

***Source:** US Census Bureau

Analysis: While the most recent available data are from 2000, this is another one of those variables that does not change dramatically from year to year. It is safe to assume that the 2007 percentages would look much like the 2000 percentages. The media has given a great deal of attention to the 2007 “subprime” mortgage crisis and the growing number of home foreclosures across the nation. Local banks have reported that most of them did not get into the “subprime” market and consequently Central Virginia foreclosures have not spiked as in other regions. Overall observations: all of the counties are well above the State and national ownership percentages. Both cities are below the State and nation.

These data allow us to determine the percentage of the populations that are renters. The issues and problems associated with renting are quite different than the issues associated with owning. Cities here and across the nation have higher percentages of renters than counties. Approximately 40% of Bedford and Lynchburg City residents rent.

B5. Number of Non-Business Bankruptcies*

	2004	2003	2002	2001	2000
Central Virginia					
Amherst County	246	280	264	261	169
Appomattox County	112	126	127	94	82
Bedford City	128	151	165	126	120
Bedford County	388	360	375	357	253
Campbell County	402	454	451	422	288
Lynchburg City	531	569	561	475	407

***Source:** Federal Reserve Bank of Richmond

Analysis: Non-business bankruptcies typically mean personal bankruptcy. The numbers can be used as an indicator of the economic health of individuals and families. Within the region the number of personal bankruptcies is generally proportionate to the population of the jurisdiction. The trend from 2000 through 2003 was generally up --- more bankruptcies each year. 2004 reflects a general drop in the numbers with only Bedford County showing an increase.

It should be kept in mind that the numbers from year to year are not the same individuals repeating bankruptcy but different people each year. If we add up all of the regional bankruptcies between 2000 and 2004 the five-year total is 10,748. This is a substantial portion of the regional adult population.

B6. Number and Percentage of Female-Headed Households with Children and Temporary Assistance to Needy Children (TANF)*

Female-Headed Households	On TANF Aug 2007	Percentage on TANF
---------------------------------	-------------------------	---------------------------

Amherst County	839	82	9.8
Appomattox County	331	82	25.0
Bedford County/City	1,262	196	16.0
Campbell County	1,327	265	20.0
Lynchburg City	2,466	485	20.0
	Female-Headed Households	On TANF Aug 2006	Percentage on TANF
Amherst County	839	79	9.4
Appomattox County	331	69	21.0
Bedford County/City	1,262	208	16.0
Campbell County	1,327	245	18.0
Lynchburg City	2,466	535	22.0
	Female-Headed Households	On TANF Nov 2005	Percentage on TANF
Amherst County	839	104	12.4
Appomattox County	331	88	26.5
Bedford County/City	1,262	190	15.0
Campbell County	1,327	273	20.6
Lynchburg City	2,466	554	22.5

*Source: US Census Bureau and Virginia Department of Social Services

**Based on 2000 US Census

Analysis: Nearly all TANF or welfare recipients are single mothers with one or more children. The above data present the number of such families within each jurisdiction, the most recent count of TANF families, and the percentage of female-headed households currently receiving TANF benefits.

Lynchburg has by far the greatest number of female-headed families (2,466) and the largest TANF population (485). Perhaps the most revealing insight in the data is that the vast majority of female-headed families are not receiving welfare benefits. Even in Lynchburg where the numbers are highest, less than one in four female-headed families are on welfare. The regional trend in recent years has been a declining number of TANF families. The 2005 number of 1,209 families has declined in 2007 to 1,110. The largest decline has been in Lynchburg.

B7. Number and Percentage of Adults in Poverty Receiving TANF*

	Adults in Poverty**	Adults on TANF Aug 2007	Percentage of Adult Poor on TANF
Amherst County	2,173	82	3.8
Appomattox County	1,124	82	7.3
Bedford County/City	4,208	196	4.6
Campbell County	3,949	265	6.7
Lynchburg City	6,678	485	7.3
	Adults in Poverty**	Adults on TANF Aug 2006	Percentage of Adult Poor on TANF
Amherst County	2,173	79	3.6
Appomattox County	1,124	69	6.1
Bedford County/City	4,208	208	5.0
Campbell County	3,949	245	6.2

Lynchburg City	6,678	535	8.0
	Adults in	Adults on TANF	Percentage of Adult
	Poverty**	Nov 2005	Poor on TANF
Amherst County	2,173	104	4.7
Appomattox County	1,124	88	7.8
Bedford County/City	4,208	190	4.5
Campbell County	3,949	273	6.9
Lynchburg City	6,678	554	8.3

*Source: US Census Bureau and Virginia Department of Social Services

**Based on 2000 US Census

Analysis: Table **B7** presents the actual number of adults living below the poverty line according to the 2000 US Census, the most recent count of adults receiving TANF, and the percentage of adults in poverty on TANF. Clearly, Lynchburg has the greatest number of poor adults (6,678) with Bedford City/County second (4,208).

Between Nov 2005 and Aug 2007 the number of adults receiving TANF benefits dropped from 1,209 to 1,110. A decline of more than 8%.

What this table also reveals is that the vast majority of poor adults within the region are not receiving TANF benefits. Even in Lynchburg where poverty is most acute, more than 9 out of 10 poor adults are not on TANF. These data should dispel the myth that poor people are living on welfare. The vast majority of poor within the region are making it or not making it without welfare.

B8. The Hispanic Population of Central Virginia*

	Number of Hispanics: 1990	Percentage of Population: 1990
Amherst County	231	0.80
Appomattox County	32	0.24
Bedford City	53	0.87
Bedford County	177	0.39
Campbell County	216	0.45
Lynchburg City	463	0.70
Central Virginia	1,183	0.57
Virginia	160,288	2.59
	Number of Hispanics: 2000	Percentage of Population: 2000
Amherst County	306	0.96
Appomattox County	65	0.47
Bedford City	56	0.89
Bedford County	449	0.74
Campbell County	423	0.83
Lynchburg City	878	1.34
Central Virginia	2,177	0.95
Virginia	329,540	4.65
	Number of Hispanics: 2006	Percentage of Population: 2006
Amherst County	389	1.21

Appomattox County	94	0.67
Bedford City	51	0.82
Bedford County	598	0.90
Campbell County	570	1.08
Lynchburg City	1,083	2.02
Central Virginia	2,785	1.17
Virginia	479,530	6.27

*Source: US Census Bureau

Analysis:

- Between 1990 and 2006 the Virginia Hispanic population has grown from 160,288 to 479,530. An increase of 300%.
- Between 1990 and 2006 the Central Virginia Hispanic population has grown from 1,183 to 2,785. An increase of 235%.
- In 1990 Hispanics made up only .57% of the Central Virginia population. By 2006 they made up 1.17%
- In 2006 the largest concentration of Hispanics in terms of both numbers and percent is in Lynchburg with 1,083 making up 2.02% of the population.
- Lynchburg is also experiencing the fastest growth of Hispanics with an increase of 23% between 2000 and 2006.
- Bedford City is experiencing the slowest growth of Hispanics with an increase of 10% between 2000 and 2006.

Strengthening Families and Individuals: United Way Supported Agencies and Programs

Below is the list of agencies and programs in the area of “Strengthening Families and Individuals” funded by United Way and the allocations for 2006-07 and 2007-08.

Alliance for Families and Children

Ways to Work: A micro loan program for small loans for purchase or repair of automobile or other needs related to maintaining or improving employment. Loans are distributed from a restricted loan pool. Restricted loan pool serves as a monetary backing against possibility of defaulted loans. Funds can be used to purchase used car (up to \$4,000), car repair (up to \$750), Mortgage & child care costs related to employment (up to \$850), Housing & other related needs (up to \$500), medical and dental care (\$500). The program provides financial counseling,

financial literacy, debt management, credit improvement, budgeting and basic money & banking education. United Way funding in 2007-08: \$16,000 and 2006-07: \$16,000. No change.

Parent and Family Center: Trains childcare providers & addresses childcare issues so parents can receive quality referrals. Coordinates trainings and Quality Childcare Standards for Success By 6. Provides parents with a list of childcare providers that will best meet the needs of the parent. Recruits additional providers and provides technical assistance on how to become a childcare provider including how to begin the business. United Way funding in 2007-08: \$27,500 and 2006-07: \$27,500. No change.

Healthy Families: A family support program to help first time parents get families off to healthy start. The program employs the home visiting model of intervention. Service period 3-5 years. Clients recruited through health departments, Va. Baptist Hospital and private providers. 16-item risk indicator screening worksheet is provided for families during pregnancy or immediately after birth of first child. United Way funding in 2007-08: \$47,700 and 2006-07: \$52,500. A decrease of 10%.

Individual and Family Counseling: The program provides affordable face-to-face counseling to individuals and families. Also provides crisis intervention with a 24 hour pager. See need for more intensive services and began a pilot to offer home based counseling services. Typically a client can be seen within 2 weeks of initial phone call. The program works with Medicaid recipients. It is the only counseling program on the bus line that accepts sliding scale for those who are not severely mentally ill. It offers prevention courses for families experiencing divorce, custody and/or visitation disputes. Also has anger management class. United Way funding in 2007-08: \$100,000 and 2006-07: \$100,000. No change.

Child Abuse Prevention: Provides educational parenting courses at varying lengths and intensity levels. It employs professionally designed curriculum. Educate parents on appropriate, positive parenting practices. ABC Nurturing Program designed specifically for parents and their children who are preparing to enter kindergarten. Parents learn nurturing skills and ways to encourage child's success through positive communication and life skills. Fatherhood Program

allows fathers the opportunity to learn more about being involved with children and to learn positive parenting practices. United Way funding in 2007-08: \$30,000 and 2006-07: \$30,000. No change.

Teen Parent: Pregnant teens receive early and appropriate prenatal, delivery and post natal care. Home visitation, school programs, computer skills, and parenting skills are taught. United Way funding in 2007-08: \$59,000 and 2006-07: \$59,000. No change.

Children's Home Society

Birth Parent/Pregnancy Counseling: Provides casework counseling regarding issues faced during an unintended pregnancy or crisis in parenting. Counseling is offered to both sexes and significant others (grandparents, siblings, etc) if appropriate. Want to enable clients to make informed choices about their own and baby's future. Also provide temporary foster care for parents. A number of these children have special needs. United Way funding in 2007-08: \$4,500 and 2006-07: \$6,000. A decrease of 25%.

Lynchburg Community Action Group

Virginia Cares: provides pre-release and post-release services to parolees and their families as a measure against further criminal involvement and recidivism. It is a unique program dealing with the multiple problems of the ex-prisoner, the correctional system and the community. United Way funding in 2007-08: \$8,500 and 2006-07: \$8,240. No meaningful change.

Mental Health Association

Education Program: offers a wide range of services to the community to increase recognition of the signs and symptoms of mental illness in an effort to promote mental health and wellness while decreasing the occurrence and stigma of mental illness. United Way funding in 2007-08: \$53,000 and 2006-07: \$53,000. No change.

Virginia Legal Aid

Housing Improvement: Program helps low-income people to receive legal counseling, avoid homelessness and improve housing conditions. Attorneys use building codes, landlord/tenant laws, and consumer protection laws to prevent unjust evictions and foreclosures, and force the repair of hazardous conditions. United Way funding in 2007-08: \$49,594 and 2006-07: \$49,594. No change.

New Land Jobs

Employment Services: Include assessment/orientation, referrals, resume preparation, prior employment verification, interview skill building, job search assistance, job readiness training, job counseling/placement and retention. Computer training courses are also offered. United Way funding in 2007-08: \$58,079 and 2006-07: \$53,000. An increase of nearly 10%.

Salvation Army

Hope House: a transitional housing facility for women and children providing shelter for up to 90 days. This allows them time to re-evaluate the circumstances that made them homeless and to receive referrals to community resources. United Way funding in 2007-08: \$20,000 and 2006-07: \$20,000 ---no change.

YWCA

Residential Housing; provides permanent housing to women. Open to single women over age of 18. Must work or have some form of income. Rent is \$55 per week or \$238 a month. Residents have an average income of \$781. Rent is just over government recommended amount of 30% of income spent on housing. Provide 24 hour on site staff and resident advisors United Way funding in 2007-08: \$25,000 and 2006-07: \$26,000 --- a decrease of 4%.

Transitional Housing: housing for women between a shelter and permanent housing. United Way funding in 2007-08: \$22,840 and 2006-07: \$20,000 --- an increase of 14%.

Altavista/Campbell County Habitat for Humanity

Housing: provides safe, decent affordable housing for a minimum of 2-4 families per year. Works with families to ensure their continuing ability to successfully maintain their homes and care for themselves and their families. United Way funding in 2007-08: \$6,062 and 2006-07 funding was \$7,336 --- a decrease of 21%.

C. Healthy and Independent Living Throughout Life

The programs in this community impact area are intended to provide access to quality, affordable health care and to prevent the early institutionalization of older adults and citizens with disabilities and/or mental illness. The outcome goals: families and individuals will have access to health and mental health education and to preventive and primary care and senior adults and persons with disabilities will have access to services that help them live as independently as possible as secure, active, contributing members of society.

Many of the empirical indicators of the healthy and independent living throughout life fall in the area of physical and mental health. Key indicators and current data are presented in tables below.

C1. Estimated Number and Percentage of Residents with Health Insurance By Type and County*

		2000	
	Insured	Uninsured	Percent Uninsured
Amherst County	26,913	3,570	11.7
Appomattox County	12,114	1,614	11.8
Bedford City	5,182	673	11.5
Bedford County	55,707	5,229	8.6
Campbell County	45,033	5,623	11.1
Lynchburg City	50,917	7,774	13.2
	Private	Government	Uninsured
Central Virginia			
Number	127,509	68,357	24,483
Percentage	57.8	31.0	11.2

*Source: US Census Bureau and Virginia Department of Medical Assistance Services

Analysis: This is another one of those slow changing variables so 2000 census data are probably still generally valid. One in ten individuals in Central Virginia has no health insurance, six in ten have private insurance, and three in ten are insured by the government --- Medicare and Medicaid. Research has shown that the uninsured are typically found among the working poor. Many of the three in ten uninsured are likely to go without needed health services, take advantage of “free” services, or create a financial

burden on health systems and on themselves. Lynchburg has the greatest percentage on uninsured at 13.2% while Bedford County has the smallest percentage at 8.6%.

C2. Long-Term Infant Mortality Rates*

	2004-06	1999-03	1995-99	1990-94	1985-89	1980-84	1975-79
Central Virginia	6.9	6.5	8.6	9.5	9.7	12.5	15.9

*Source: Virginia Department of Health

Analysis: The infant mortality rate is the number of deaths per 1,000 live births during the first year of life. The above data are clear evidence that over the last thirty years the overall infant mortality rate has declined dramatically. A factor in this decline no doubt includes more pregnant women receiving prenatal care.

C3. Rates of Infant Mortality by Race*

	2006	2005	2004	2003	2002	2001
Central Virginia						
Total	8.9	8.2	6.8	8.0	5.4	3.1
Whites	5.4	4.9	4.1	5.6	2.5	3.1
Blacks	18.1	21.7	17.5	11.7	15.6	12.3
Virginia						
Total	7.1	7.4	7.4	7.6	7.3	7.4

*Source: Virginia Department of Health

Analysis: These most recent numbers on infant mortality for the region by race show that the overall decline in infant mortality is dramatically uneven between whites and blacks. In most years, the rate of infant mortality is many times higher among black infants than among white infants. This difference, no doubt related to the higher rates of poverty among black women, deserves attention and investigation.

C4. Rates* of Teen Pregnancy in Central Virginia**

	2006	2005	2004	2003	2002	2001
Amherst County	17	17	21	18	N/A	16
Appomattox County	N/A	27	N/A	N/A	N/A	N/A
Bedford City	N/A	N/A	N/A	N/A	N/A	N/A
Bedford County	8	11	9	13	19	10
Campbell County	15	19	16	20	22	21
Lynchburg City	36	37	29	33	40	39
Virginia	17	16	18	17	19	21

*Teen pregnancy rate is the number of pregnancies per 1,000 teenaged girls

**Source: Virginia Department of Health

Analysis: The rates of teen pregnancy for Central Virginia counties and cities have remained fairly

consistent and high from year to years. In most cases, above the State average. However, there is considerable variation from one jurisdiction to another. Bedford County clearly has the lowest rates and Lynchburg has far higher rates than the other jurisdictions. Why the data for Appomattox and Bedford City are missing is not clear.

C5. Rates* of Serious Illness in Central Virginia Compared to Virginia**

	Central Virginia			Virginia		
	2006	2005	2004	2006	2005	2004
Heart diseases	246.3	213.2	245.1	182.2	186.7	185.7
Malignant neoplasms	236.7	218.6	209.0	179.9	182.7	174.3
Cerebrovascular diseases	65.1	70.5	76.1	46.0	48.0	49.3
Lower respiratory diseases	46.3	52.8	46.4	35.1	38.3	35.5
Pneumonia/influenza	20.0	17.3	24.5	16.7	19.3	18.8
Diabetes	25.9	22.4	31.0	21.3	21.6	20.8

*The number of illnesses per 100,000 people in the population

**Source: Virginia Department of Health

Analysis: Over the past three years the rates of serious illness among the Central Virginia population continues to significantly exceed the State rates in nearly every category of illness. What could account for this startling fact? Are we an older population? Are there significant lifestyle differences among Central Virginia people? Further investigation is clearly needed.

C6. Numbers and Rates* of Suicide in Central Virginia**

	2006	2005	2004	2003	2002	2001
Central Virginia						
Number	28	33	23	22	32	34
Rate	11.7	13.9	9.9	9.5	13.9	14.9
Virginia						
Number	869	860	805	797	792	787
Rate	11.4	11.4	10.8	10.8	10.9	10.9

*The number of suicides per 100,000 people in the population

**Source: Virginia Department of Health

Analysis: The number and rate of suicide for 2006 shows a slight reduction over 2005. The change is too small to know if a trend is in the making. The Central Virginia rate remains above the State rate.

C7. Number and Percentage of Female-Headed Households with Children*

	Total Households	Female-Headed Households	Percentage of Total
Central Virginia			
Amherst County	11,941	839	7.0
Appomattox County	5,322	331	6.2
Bedford City	2,519	274	10.9
Bedford County	23,838	988	4.1

Campbell County	20,639	1,327	6.4
Lynchburg City	25,477	2,466	9.7
Virginia	2,699,173	186,591	6.9

*Source: US Census Bureau

Analysis: While the reasons are debatable, research clearly shows that within female headed households with children a whole range of problems are concentrated --- poverty, unmet health needs, poor school performance, juvenile delinquency, unemployment, welfare dependency, and others. The number and percentage of such families becomes a predictor of these problems. The above census data shows that in Central Virginia this type of family is most often found in the cities where approximately one in ten families are female headed. Within the region, the percentages fluctuate significantly with a high of 10.9% in Bedford City and a low of 4.1% in Bedford County.

C8. Number and Percentage of Pregnant Women Receiving First Trimester Care in Central Virginia*

	2006	2005	2004
Central Virginia			
Number	2,379	2,415	2,341
Percentage	88.2	89.7	93.0
Virginia			
Number	88,867	88,408	88,054
Percentage	83.5	84.6	84.8

*Source: Virginia Department of Health

Analysis: In Central Virginia from 2004 through 2006 there has been a noticeable drop in the percentage of pregnant women receiving first trimester care. In 2006 nearly 12% did not receive first trimester care. During this same period of time the State percentages have remained nearly unchanged. This increase in the percentage of Central Virginia pregnant women failing to receive first trimester care raises a flag and needs addition investigation.

C9. Numbers and Percentage of Low-Birth-Weight Births*

	2006		2005		2004	
	Number	Percentage	Number	Percentage	Number	Percentage
Amherst County	10	3.1	30	9.1	16	5.4
Appomattox County	6	3.7	8	5.7	7	4.8
Bedford City	2	2.9	2	2.8	4	7.5
Bedford County	12	1.8	55	8.6	43	7.0
Campbell County	10	1.9	39	6.9	43	7.5
Lynchburg City	20	2.1	85	9.0	88	10.6
Central Virginia	60	2.2	219	8.1	201	8.0

Virginia	1,852	1.7	8,594	8.2	8,674	8.4
-----------------	-------	-----	-------	-----	-------	-----

***Source:** Virginia Department of Health

Analysis: A review of the data on the number and percentage of low birth-weight babies born in Central Virginia between 2004 and 2006 shows dramatic improvement for 2006. The 2005 Central Virginia percentage of low weight births was 8.1%. For 2006 the percentage improved to 2.2%. The State numbers for the same period of time also show dramatic improvement. This may be a case of if it looks too good to be true it probably is. The 2006 data needs to be investigated.

C10. Central Virginia's Aging Population: Trends Over the Past Sixteen Years*

	1990 Population		
	Total	65+	85+
Amherst County	28,578	3,355	280
Appomattox County	12,298	1,811	207
Bedford City	6,073	1,508	203
Bedford County	45,656	5,566	359
Campbell County	45,572	5,431	351
Lynchburg City	66,049	10,895	1,301
Central Virginia	206,226	28,566	2,701
Virginia	6,187,358	662,604	58,385
	2000 Population		
	Total	65+	85+
Amherst County	32,139	4,714	426
Appomattox County	13,885	2,025	218
Bedford City	6,282	1,422	244
Bedford County	61,194	7,738	683
Campbell County	51,295	7,879	609
Lynchburg City	64,108	10,760	1,768
Central Virginia	228,903	34,538	3,948
Virginia	7,187,734	792,333	87,291
	2006 Population**		
	Total	65+	85+
Amherst County	32,019	4,714	426
Appomattox County	14,100	2,213	199
Bedford City	6,091	1,159	194
Bedford County	65,033	8,693	689
Campbell County	52,016	7,873	658
Lynchburg City	68,758	10,799	1,451
Central Virginia	238,017	34,451	3,617

***Source:** US Census Bureau

**Estimated

Analysis: Between 1990 and 2006 Central Virginia’s total population grew by 31,791 or 15.4%. The 65 and older population grew by 6,885 or 24.5%. Clearly the proportion and number of older citizens has grown rapidly. However, as will be seen in the next table, past growth of older citizens is simply a sign of much more to come in the near future.

C11. Central Virginia’s Aging Population: Projections into the Near Future*

	2010	2020	2030
Central Virginia			
Total	243,276	258,139	273,522
65+	37,980	49,195	57,705
85+	5,265	5,735	6,956

***Source:** Virginia Employment Commission

Analysis: These numbers are the best available estimates of the growth that can be expected in the number of older citizens in the near future. Central Virginia’s total population can be expected to grow by about 6% every ten years. However, the aging of the Baby Boomers will create much greater growth among older citizens. Between 2010 (just two years away) and 2020, the number of persons 65 and older will grow by 29%. Between 2020 and 2030 the number of persons 85 and older will increase by 21%. Clearly, there is a very large increase in the numbers of senior citizens on the near horizon. Seniors bring with them a range of challenges for the community. Will Central Virginia be ready?

Healthy and Independent Living Throughout Life: United Way Supported Agencies and Programs

Below is the list of agencies and programs in the area of “Healthy and Independent Living Throughout Life” funded by United Way and the allocations for 2006-07 and 2007-08.

Adult Care Center

Adult Care: This program provides quality day care services to health impaired or disabled adults. Services include personal care, health monitoring, medication administration, exercise, music, crafts, reminiscence, and pet therapy. There are active intergenerational programs with preschools, schools, colleges, etc. Offers respite for caregivers. The 2007-08 allocation is \$55,000. The 2006-07 allocation was \$55,000. No change.

Area Agency on Aging

Congregate Meals: This program provides meals to persons 60 years of age and older and to their spouse and/or disabled dependents regardless of age. It provides daytime support, nutritionally balanced meal, activities, exercise, health education, nutrition, socialization, health screenings and life management education. Participants must be independent in activities of daily living or be accompanied by someone who can assist them. The 2007-08 allocation is \$11,450. The 2006-07 allocation was \$4,000. An increase of 286%.

Homemaker: This program enables older adults to live in their own home. It provides assistance to older adults for normal household tasks such as cleaning bathroom, laundry vacuuming, changing beds, cleaning kitchen. Serve persons age 60 or older who have been accessed by case manager as needing services to remain independent in home. Yearly in-depth reassessment and bi-annual review is done for all clients. The 2007-08 allocation is \$10,542. The 2006-07 allocation was \$5,000. An increase of 105%.

Medical Access/Transportation: This program provides access through free or low cost transportation to affordable health care for low income elderly and disabled individuals. Transportation is also provided to the grocery store, social service, drug store and other necessary appointments. These are door-to-door services that mean agency staff will enter home and help client to vehicle and help them into doctor's office and sometimes stay during the appointment if needed. No other provider does this service. The 2007-08 allocation is \$38,053. The 2006-07 allocation was \$29,500. An increase of 29%.

Meals on Wheels

Meal Delivery is provided to frail elderly and younger disabled shut-ins by providing them with a balanced, nutritious meal (lunch) five days a week. The 2007-08 allocation is \$49,500. The 2006-07 allocation was \$49,000. No change.

American Red Cross – Historic Virginia Chapter

Blood Services: This program informs, promotes and recruits volunteers to fulfill the local area need for blood and blood product donation. The 2007-08 allocation is \$31,059. The 2006-07 allocation was \$31,059. No change.

Free Clinic

Medical: Comprehensive primary and chronic medical care is offered to adult patients between the ages of 18-65. Specialty services are also available. The 2007-08 allocation is 40,000. The 2006-07 allocation was \$42,562. A 6% decrease.

Pharmacy: Services are available to adult patients between 18-65 years of age. The 2007-08 allocation is \$40,000. The 2006-07 allocation was \$42,561. A 6% decrease.

Dental: Basic dental services are offered to adult patients between the ages of 18-65. Patients can also be referred for specialty services. The 2007-08 allocation is \$34,000. The 2006-07 allocation was \$26,539. An increase of 28%.

Mental Health

Support Services: The services include mental health screenings, individual screening, consultation and referral and a conflict resolution program. Seminars, in-service trainings and resource information are also available. The 2007-08 allocation is \$10,500. The 2006-07 allocation was \$8,000. An increase of 31%.

The Arc

Camp Meadowlark: The program is four-week summer day camp program serving children and adults throughout the Central Virginia area who are not served through traditional camp programs because of mental and physical disabilities. The 2007-08 allocation is \$25,000. The 2006-07 allocation was \$25,000. No change.

Day Support Services: provides persons with disabilities individual and group activities to develop social and personal skills necessary for participants to live successfully in the

community. The 2007-08 allocation is \$78,000. The 2006-07 allocation was \$75,000. An increase of 4%.

Camp Child

Camp Child is a four-week summer camp for children 6-13 who have been identified with a specific learning disability. They offer exploratory activities and assist the children with academic skill maintenance. The 2007-08 allocation is \$17,500. The 2006-07 allocation was \$17,500. No change.

LSI – Lynchburg Sheltered Industries

Sheltered Employment: The program provides long-term employment to people with disabilities. For a few people this may be the training they need to enable them to live and work in the community. However, for most referrals LSI becomes their employer for the remainder of their working life. The 2007-08 allocation is \$24,000. The 2006-07 allocation was \$24,000. No change.

Sheltered Workshop of Altavista

Sheltered Employment: This program provides employment and training for challenged people. Each consumer has an individualized service plan with emphasis on skills that will help them function more independently and age appropriately whether they are able to assume their place in competitive employment, be involved in extended sheltered employment or remain in pre-vocational training. Funding for 2007-08 was \$5,095.

D. People in Crisis Receiving Help

The programs in this community impact area are intended to provide access to emergency services, programs that stabilize the physical and mental safety of citizens, and programs that provide for the basic needs of families and individuals in crisis. The outcome goals: to meet the basic needs of individuals and families experiencing hunger, emergency financial challenges, disasters, abuse and other crisis situations. Key indicators and current data are presented in tables below.

D1. Rates of Violent Crime in Central Virginia*

	2005	2004	2003
Amherst County	125.9	120.1	76.4
Appomattox County	56.7	122.8	64.9
Bedford City	332.3	359.3	444.2
Bedford County	95.8	90.1	78.2
Campbell County	144.5	139.8	145.5
Lynchburg City	394.7	371.0	411.1
Virginia	283.4	275.6	275.8

*Source: Uniform Crime Reports—FBI

Analysis: The violent crime rate is the number of reported violent crimes per 100,000 people in the population. The data above show that violent crime in Central Virginia is significantly below the State rates with the exceptions of Bedford and Lynchburg Cities. The 2005 rate for Appomattox County compared to 2004 shows a significant decline. Central Virginia as a whole is a relatively non-violent place to live.

D2. Rates of Property Crime in Central Virginia*

	2005	2004	2003
Amherst County	1,189.2	1,131.3	1,125.4
Appomattox County	857.3	707.8	1,045.4
Bedford City	2,579.5	3,373.9	3,474.0
Bedford County	1,145.1	1,084.0	1,113.9
Campbell County	1,622.6	1,241.2	1,174.2
Lynchburg City	3,643.6	3,813.8	3,670.7
Virginia	2,640.3	2,676.6	2,704.1

*Source: Uniform Crime Reports—FBI

Analysis: Property crime rates are the number of property crimes per 100,000 people in the population. In 2005 Amherst, Appomattox, Bedford County, and Campbell County showed a slight increase. Bedford and Lynchburg Cities showed a slight decrease. The general trend in property crime over three years has been a decline. Again, Central Virginia rates are significantly lower than State rates. Property is relatively safe in Central Virginia.

D3. Number and Rate of Reported Abused and Neglected Children*

	Jun 06—Jul 07		Jun 05—Jul 06		Jun 03—Jul 04**	
	Number	Rate	Number	Rate	Number	Rate
Amherst County	13	1.8	17	2.3	42	5.8
Appomattox County	15	4.6	22	6.9	20	6.2
Bedford City	4	2.9	12	8.6	13	8.6
Bedford County	40	2.7	61	4.2	46	3.2

Campbell County	81	6.6	144	11.8	107	8.9
Lynchburg City	113	7.7	108	7.5	121	8.4
Virginia	6,487	3.4	7,330	3.9	6,876	3.8

***Source:** Virginia Department of Social Services

**Jun 2004-Jul 05 was not available

Analysis: The most recent numbers and rates of abused and neglected children within Central Virginia show that Lynchburg and Campbell County have rates at twice the State rate. The other jurisdictions are at or near the State rate. The Lynchburg and Campbell County numbers are in need of additional investigation.

D4. Estimated Percentage of the Regional and State Population Using Alcohol in the Past Month By Age*

	12 – 17 years old	18 – 25 years old	26 or more years old
Region 3**	17.49	60.65	42.30
Virginia	16.59	62.58	52.63

***Source:** The National Surveys of Drug and Health 2002, 2003, 2004

Substance Abuse and Mental Health Services Administration

US Department of Health and Human Services

Note: The percentages are estimates based on the combined results of three annual surveys—2002, 2003, and 2004.

**Region 3 is the State Treatment Planning Area covering all of the southwest Virginia. Binge drinking is defined as 5 or more drinks in a short period of time.

Analysis: The above data indicate that in Central Virginia approximately 1 in 5 12-17 year olds are using alcohol. By ages 18-25 the number of users jumps to an astonishing 6 out of 10. For older citizens, alcohol use declines to about 4 in 10. The regional numbers are similar to the State numbers.

D5. Estimated Percentage of the Regional and State Population Engaged in Binge Drinking in the Past Month By Age*

	12 – 17 years old	18 – 25 years old	26 or more years old
Region 3**	12.26	45.63	18.62
Virginia	10.17	41.97	19.36

***Source:** The National Surveys of Drug and Health 2002, 2003, 2004

Substance Abuse and Mental Health Services Administration

US Department of Health and Human Services

Note: The percentages are estimates based on the combined results of three annual surveys—2002, 2003, and 2004.

**Region 3 is the State Treatment Planning Area covering all of the southwest Virginia. Binge

drinking is defined as 5 or more drinks in a short period of time.

Analysis: The numbers that engage in binge drinking are dangerously high in all age groups but especially among 18-25 year olds.

D6. Estimated Percentage of the Regional and State Population Experiencing Alcohol Dependency or Abuse in the Past Year By Age*

	12 – 17 years old	18 – 25 years old	26 or more years old
Region 3**	6.90	20.79	5.50
Virginia	5.65	17.75	5.95

***Source:** The National Surveys of Drug and Health 2002, 2003, 2004
Substance Abuse and Mental Health Services Administration
US Department of Health and Human Services

Note: The percentages are estimates based on the combined results of three annual surveys—2002, 2003, and 2004.

****Region 3** is the State Treatment Planning Area covering all of the southwest Virginia.

Analysis: The numbers for alcohol dependency and abuse indicate that people of all ages are at risk. Even among 12-17 year olds. Among 18-25 year olds dependency and abuse peak at 1 in 5 young persons.

D7. Estimated Percentage of the Regional and State Population in Need of But Not Receiving Treatment for Alcohol Dependency in the Past Year By Age*

	12 – 17 years old	18 – 25 years old	26 or more years old
Region 3**	6.53	19.18	5.21
Virginia	5.41	17.06	5.60

***Source:** The National Surveys of Drug and Health 2002, 2003, 2004
Substance Abuse and Mental Health Services Administration
US Department of Health and Human Services

Note: The percentages are estimates based on the combined results of three annual surveys—2002, 2003, and 2004.

****Region 3** is the State Treatment Planning Area covering all of the southwest Virginia. Binge drinking is defined as 5 or more drinks in a short period of time.

Analysis: When these numbers are compared with the numbers of those who are dependent on or abusing alcohol it is clear that the vast majority in need of treatment are not receiving it.

D8. Estimated Percentage of the Regional and State Population Experiencing Illicit Drug Dependency or Abuse in the Past Year By Age*

	12 – 17	18 – 25	26 or more
--	----------------	----------------	-------------------

	years old	years old	years old
Region 3**	5.19	9.37	1.67
Virginia	5.18	8.39	1.78

***Source:** The National Surveys of Drug and Health 2002, 2003, 2004
 Substance Abuse and Mental Health Services Administration
 US Department of Health and Human Services

Note: The percentages are estimates based on the combined results of three annual surveys—
 2002, 2003, 2004.

****Region 3** is the State Treatment Planning Area covering all of the southwest Virginia. Binge drinking is defined as 5 or more drinks in a short period of time.

Analysis: The number of persons with drug dependency or abuse is, like dependency on alcohol, most common among young people. Nearly 1 in 10 between the ages of 18-25 is experiencing drug dependency --- a startling number.

D9. Estimated Percentage of the Regional and State Population in Need of But Not Receiving Treatment for Illicit Drug Dependency in the Past Year By Age*

	12 – 17 years old	18 – 25 years old	26 or more years old
Region 3**	4.88	8.31	1.38
Virginia	4.91	7.56	1.40

***Source:** The National Surveys of Drug and Health 2002, 2003, 2004
 Substance Abuse and Mental Health Services Administration
 US Department of Health and Human Services

Note: The percentages are estimates based on the combined results of three annual surveys—
 2002, 2003, 2004.

****Region 3** is the State Treatment Planning Area covering all of the southwest Virginia. Binge drinking is defined as 5 or more drinks in a short period of time.

Analysis: As was the case with alcohol, those with drug dependency are generally not receiving treatment.

D10. Serious Psychological Disorders* in the Past Year Among Virginia Adults By Percentage of the Population**

Year	All Adults	18 – 25 years old	26 – Up
2004-05	10.77%	20.86%	9.10%
2003-04	8.79%	13.39%	8.04%
2002-03	8.09%	12.50%	7.37%
2001-02	8.22%	12.34%	8.35%
2000-01	7.62%	11.35%	7.01%

*A serious psychological disorder is defined as a diagnosable mental, behavioral, or emotional

disorder that resulted in an impairment that substantially interfered with one or more major life activities.

****Source:** Office of Applied Statistics. Substance Abuse and Mental Services Administration. US Department of Health and Human Services

Analysis: Mental health data on the regional level are not available. The data above reflect the entire State of Virginia. However, there is no good reason to suspect that Central Virginia. Serious psychological disorders are most common among 18-25 year olds with 2 of 10 experiencing the condition in the past year. For the rest of the adult population the disorders are present in about 1 in 10.

D11. The Number of Persons with Serious Psychological Disorders* in the Past Year Among Virginia Adults**

Year	All Adults	18 – 25 years old	26 – Up
2004-05	578,320	157,346	419,913
2003-04	472,000	101,000	371,000

*A serious psychological disorder is defined as a diagnosable mental, behavioral, or emotional disorder that resulted in an impairment that substantially interfered with one or more major life activities.

****Source:** Office of Applied Statistics. Substance Abuse and Mental Services Administration. US Department of Health and Human Services.

Analysis: These data present the actual numbers of adults dealing with serious psychological disorders. It is clear that these disorders affect a great many people. Central Virginia has its share.

D12. Homeless Population within Central Virginia*

	2006	2005	2004
Central Virginia			
Homeless individuals	224	146	156
Homeless families with children	27	14	25
Persons in families with children	65	46	69
Total homeless	289	192	225

Sub-populations (some persons are counted in more than one sub-populations)

	2006	2005	2004
Chronically homeless	59	39	27
Severely mentally ill	93	6	28
Chronic substance abusers	76	63	62
Veterans	6	11	21
Persons with HIV/AIDS	15	7	11
Victims of domestic violence	24	20	28
Under 18 years of age	105	50	7

Source: Annual Regional Continuum of Care Survey

Analysis: Measuring the number of homeless in any region is extremely difficult. Within Central Virginia a collective effort to measure this problem has been underway since 1997. The measuring technique used is a “point-in-time” survey that focuses on a single day during the year. By selecting a “typical day”, it is assumed that what is found on that day is likely to be found on any day of the year. In Central Virginia the survey is done in January.

The data suggest that on any given day in 2003 the number of homeless within the region was 160, in 2004 the number was 225, and in 2005 the number was 192.

The sub-population data indicate that chronic substance abuse is the most common shared characteristic of the homeless. The data also suggest that a growing number of children are among the homeless population.

The Continuum of Care reports, the source of these data, also counts the emergency and transitional shelters available to the homeless within the region. The reports indicate that the number of emergency shelter beds is adequate but the transitional housing is inadequate and more is needed.

People in Crisis Receiving Help: United Way Supported Agencies and Programs

American Red Cross – Historic Virginia Chapter

Disaster Relief: This program provides immediate assistance to the victims of disaster. Training and educational materials are provided to the community at large. The 2007-08 allocation is \$58,424. The 2006-07 allocation was \$55,924. An increase of 4.5%.

Bedford Christian Ministries

Financial Aid: This program provides financial aid that helps pay rent, mortgage payment and emergency stays in hotel; assistance with electric bills and medical assistance. Also provides fuel assistance. The 2007-08 allocation is zero. The 2006-07 allocation was \$21,250.

Salvation Army

Financial Aid: This program allows individuals and families to maintain housing with all utilities and meet their basic need for food and clothing. Assistance includes food for the hungry, clothing, plus rental and utility payments. The 2007-08 allocation is \$39,000. The 2006-07 allocation was \$39,000. No change.

Emergency Shelter: This program provides short-term temporary housing and food to homeless men, women and children. The staff works individually with the clients to offer resources and referrals. The 2007-08 allocation is \$45,000. The 2006-07 allocation was \$45,000. No change.

LynCAG

Hand Up Lodge: His program provides shelter for individuals and families. Maximum capacity is for 28 individuals. Referrals are accepted but not required. Persons may stay at shelter for 60 days. Action plan developed for each client; assesses family and individual needs, defines Hand-Up Lodge guidelines, sets goals and objectives and outlines responsibilities. All are required to leave shelter every day for job search or active employment. Will accept individuals in substance abuse recovery but remain in recovery during stay. All except minor children are required to take action to secure permanent housing. The 2007-08 allocation is \$15,600. The 2006-07 allocation was \$14,000. An increase of 11%.

Housing Services: This program supports income-eligible families in resolving emergency or hazardous conditions related to their homes. The goal is to eliminate substandard living conditions, maintaining safe, affordable housing and avoiding eviction/foreclosure due to crisis. The 2007-08 allocation is \$24,400. The 2006-07 allocation was \$24,000. An increase of 2%.

YWCA

Family Violence Prevention Shelter: This program provides emergency shelter, a 32 bed facility to house women and children in crisis. A 24/7 full-service facility offering shelter, food and clothing for domestic violence victims for up to 30 days. Each client has a case worker, attends on-site support groups and has availability to court advocacy. Parenting classes are required and a 24-hour hotline is in service. The program offers Violence Intervention Program,

batter's intervention groups providing professional counseling and education to known batterers. The 2007-08 allocation is \$141,760. The 2006-07 allocation was \$141,000. No meaningful change.

Crisis Line

Crisis Line: This program provides immediate telephone intervention for people in acute emotional distress and may be a danger to themselves or others. The 2007-08 allocation is \$18,000. The 2006-07 allocation was \$18,000. No change.

Sexual Assault Response Program (SARP): This program works collaboratively with local organization to provide assistance to victims of sexual abuse and assault. Various victim services are available to promote healing and recovery. SARP also provides violence prevention programs to middle and high school aged youth and other high-risk populations. The 2007-08 allocation is \$20,000. The 2006-07 allocation was \$17,000. An increase of 18%.

DAWN

Financial Aid: This is an emergency assistance program that provides financial aid to assist with food, electric bills, fuel, rent and medications. Food assistance is given more than other assistance. Client must have cut-off notice for electric assistance and an eviction notice for rent assistance. The 2007-08 allocation was \$7,647. The 2006-07 allocation was \$9,253 --- a decrease of 21%.

III. Workshops

Relying on feedback from the 2006 workshops and a desire to delve more deeply into specific topic areas, four topics were selected for the 2007 workshops. Below the reader will find the recorder notes from each of the four.

The Growing Elderly Population; Challenges and Opportunities

September 11, 2007

Meeting Notes

- Central Virginia is promoted as a great place to retire; what are we doing to prepare for service delivery for the growing elderly population?
- United Way will work with the Belle Boone Beard Center on Aging at Lynchburg College to convene a meeting for further discussion on building capacity to address the needs of the elderly population.
- Resource/Service data needs to be available for the elderly and their caretakers.
- How do service providers work together to build capacity for service delivery?
- Intergenerational and sustainable approaches for service delivery need to be developed.

Healthy and Independent Individuals Throughout Life: Mental Health; Assessment and Treatment

October 9, 2007

Panelists

- Nancy Cottingham, Executive Director of Central Virginia Community Services
- Tom Prest, Executive Director of Alliance for Families and Children
- Elizabeth Webb, Executive Director Mental Health America of Central Virginia
- Brent McCraw, Centra Health, Director of Pathways Treatment Center

Tom Seaman

- Difficult to collect mental health data.
- Mental Health issues are shrouded in secrecy, stigma is attached and there is a lack of resources available.
- Serious psychological disorder is defined as a diagnosable mental, behavioral or emotional disorder and results in an impairment that substantially interfered with one or more major life activities.
- Central Virginia Data psychological disorders:
 - 2003-04 14,160
 - 2004-05 17,349
- Trend shows an increased % of people are suffering.
- Disproportionate % of 18-25 year olds are suffering from mental illness/psychological disorder condition.

Mental Health Continuum of Care (Nancy Cottingham)

- Chart is attached.
- Least restrictive; persons can receive treatment and do normal activities.
- Most restrictive; temporary detention order, mental hospital.
- Always want to help people in the least restrictive environment if possible.

Is there any good news in the mental health community in regard to both occurrence of problems and treatment?

- There are more services available in Central Virginia than some other communities.
- Psychiatric care is available.
- Therapists
- Ability to treat with new medicines.
- Centra Health supports mental health treatment to a degree that is not seen in some other communities.
- Treatment works.
- 2006 capacity study; over 48% of responses indicated they provide mental health services to individuals without insurance/ability to pay.
- Jail Diversion Alliance.
- Suicide Prevention Coalition.
- Johnson Health Center provides psychiatric care 2 days per month.
- Free Clinic provides meds help.
- Couples and Kids; nonprofit organization.
- Crisis Line – full time suicide prevention staff person.
- Not a lot of good news; more families and situations are getting worse.
- Resources are better; meds and technology.
- We have a two tiered system; information and technology are not always available to low income families.
- Increased awareness of mental health issues.
- Great reduction in stigma but we still have a long way to go.
- Effective treatment is available.
- New meds are available but they are expensive.
- There is a huge push for deinstitutionalization (shut down hospitals). Who will provide services for these individuals?
- Need to work together to make sure people with mental illness receive services.

Where are the gaps in the Continuum of Care in Central Virginia and what would it take to fill the gaps?

- Economics is a huge issue.
- The Medicaid reimbursement rate is too low.
- Insurance coverage is aggressively managed for mental health coverage. It is somewhat discriminatory on mental health treatment. Caps are set on the amount of mental health coverage.
- Programs in the state, similar to Pathways, are closing down due to economics.
- Child and Adolescent psychiatric programs are closing in Virginia due to economics.
- Not enough providers who accept Medicaid patients.
- Medicare will not reimburse licensed professional counselors for counseling for the elderly.
- Transportation, particularly in the counties.
- The wait time from hospital discharge until able to see psychiatrist and get meds is too long. Individual is often sick again.
- Not enough inpatient beds at state hospitals.
- Crisis Stabilization programs; need more options for individuals with no insurance.
- Services need to be provided where events occur.
- No one agency can change the situation; need to work together to provide services.
- There need to be more services for children and families.
- Services for the poor and working poor need to be provided as well as services for the elderly.
- Child and adolescent services are lacking.
- Parity; insurance coverage for mental health services needs to be improved.

- Substance Abuse treatment can't be isolated.
- Significant time is spent on case management and finding resources in the community.
- Affordable housing and employment opportunities are difficult to find for individuals with mental health issues.

In addition to the gaps are there other challenges facing mental health treatment providers in Central Virginia and how do we address these challenges?

- State beds are decreasing and this straps the private sector.
- Severity of illness is increasing.
- Lack of interest in mental health issues.
- Stigma attached to mental illness.
- Treatment of persons with mental illness by the media.
- Legislative advocacy for parity is lacking.
- Often a child has to be removed from the home in order to receive services.
- Lack of funding for services.
- Medicaid reimbursement is low and the bureaucracy of Medicaid is expensive.
- Loss of providers to deliver services. No school for social work.
- Rising health care costs.
- Relationship with physical mental disabilities needs to be evaluated.
- Virginia only funds Medicaid at 80% of the poverty level.

Are there any alarming trends in mental health in regard to both occurrence of problems and treatment in Central Virginia?

- Co-occurring mental and physical disabilities.
- State hospitals getting smaller and jails are getting larger.
- Suicides increasing particularly in adolescents.
- 1 in 4 individuals will deal with a mental illness.
- Elderly depression and suicide.
- Post Traumatic Stress for veterans.
- Severe multiple problems with families.
- Fewer hospital beds at Western State Hospital.
- Fewer beds for non forensic individuals.
- Concern that there is overcorrection following the Virginia Tech tragedy. Do not assume persons with mental illness are more like to commit crime or other violent activity.
- Family support is important. Policies need to be developed that support the family.

Questions/Comments

- Younger children are being diagnosed with severe illnesses.
- How much bias is shown for people who have money/insurance and those who do not at the hospital?
 - Financial screening is done. Referrals are made for services in the community.
 - Emergency Room has no economic bias.
- There is a gap between medicine prescribed and time when individual can get meds. It takes time to process through the pharmaceutical companies.
- There is a gap in services; individuals who can get help and those who just go to the emergency room to get help.
- Are we seeing a return of veterans in Central Virginia that need services and are there resources through the government?

- Veterans have to travel to Salem or Richmond.
- One session per month for veterans.
- EHS Support Services
 - Agency provides free group sessions for clients.
 - Medicaid funded.
- Is there an organization or a network of mental health professionals and is it effective?
 - Mental Health Consortium of Central Virginia (MHCCV).
 - Participation has decreased.
 - Intent is to identify services, eliminate duplication of services and to address challenges.
 - Participants concerned about funding; it's hard to play fairly and nicely.
 - True collaborative effort is needed.
 - Next meeting: November 16, Noon, Virginia Baptist Hospital, Craddock Auditorium.
- Who represents mental health agencies at the state level?
 - VACSB; Commissioner Reinhardt
 - VOCAL; represents consumers
 - Many agencies have lobbyists.
- Is anything being done to prevent suicides?
 - Mental Health awareness needs to be enhanced in the school systems.
- More psychiatrists are needed for Central Virginia.
- The Healthy Families program works with the entire family and provides early mental health intervention.
- Can a 12 week program for families be incorporated into programs/sites of Parks and Recreation?
- Funding priorities are confused about what agency is doing what.

What's Next

- Participate in the Mental Health Consortium.
- Decide where your agency fits on the Mental Health Continuum of Care and send that information to Joan Phelps, joan.phelps@unitedwaycv.org
- News article on Mental Health issues.
- Article/information on veteran needs.
- Educate legislators on mental health needs in our community.
- More community awareness needed.
- Need ongoing family support programs.

The Growing Hispanic Population: Challenges and Opportunities

November 8, 2007

Panelists

- Dr. Katherine Nichols; Central Virginia Health Department
- Jane Hubbell; James Madison University

Dr. Nichols

• Spanish Academy and Cultural Institute has courses available for specific areas of work such as medicine.

Lisa Zajur, Director

Spanish Academy & Cultural Institute

14241 Midlothian Turnpike, Suite # 128

Midlothian, VA 23113-6500

website: <http://spanishwithin.com/>

- The Asian population is also growing in Central Virginia.
- Virginia Hispanic Chamber of Commerce is a good resource. Phone: (804) 378-4099

E-mail: info@vahcc.com

- Health indicators are not broken out by ethnicity.
- Spanish women tend to have larger, less premature babies.
- Age distribution in Central Virginia
 - 25 and under – 47%
 - 25-64 – 46%
 - Over 65 – 6%
- Services are/will be needed for the younger population.
- 58% of the Hispanic population in Central Virginia is female.
- Central Virginia is welcoming to the Hispanic population.

Jane Hubbell (Harrisonburg, Virginia Perspective)

- Community coalitions to address service issues for the Hispanic population need to include the business community and government.
- Hispanic adults have little education. Translation of forms and documents into Spanish is not the best way to reach the adults. Many of the Hispanics cannot read Spanish. Oral presentations are better than written work.
- Hispanics tend to live the city because it has low income housing.
- In Take Center was created for persons of different ethnicity ... it provides an assessment, remedial programs and then moves individuals into mainstream services.
- Many companies employ bi-lingual staff.
- Hispanic Services Council was formed.
- Council included United Way agencies, Health Department, Schools, Parks and Recreation, government, businesses.
- Hispanic population often does not have any documentation to show who they are.
- Migration Education Program; <http://www.cj-network.org/lep.html>
 - Individuals go into the neighborhoods to work with Hispanics. They tend to be more trusting through this program.
- Sensitivity training was provided for agency staff and other Council members.
- Men of Character is a program that works with teen age Hispanic boys.
- Basic needs: learning to read and write, transportation, day care and legal issues.
- English as a Second Language is an important program; Literacy Agency provides these services.
- Functional Language training was provided for agency staff and other Council members.
- Hispanics are family oriented; little child or adult abuse.
- There are higher standards of eligibility in the emergency room for Hispanics.
- Medical Interpreters Program
<http://www.xculture.org/training/overview/interpreter/programs.html> (not sure if this is the one Jane referred to but it is a resource).
- Soccer fields are important (family oriented).
- Many Hispanics need permanent legal status. Agencies such as Legal Aid who receive federal funding are not permitted to help with this.
- Church is an avenue to teach about the services available.
- Hispanics jobs in Central Virginia tend to be; domestic help, construction, small businesses, landscaping

What's Next

- Cultural Sensitivity training for agency staff.

- Facilitate discussion between Chambers and businesses that employ the Hispanic population.
- Ads should be bi-lingual.
- Offer more English as a Second Language courses.
- Council of United Way Agencies explore facilitation the formation of a Hispanic Services Council.

Alcohol and Drugs: Use, Abuse, and Treatment

December 11, 2007

Panelists

- Amy Rugh, Counselor: Couples and Kids
- Susie Owen, Employee Assistance of Central Virginia
- Tamara Rosser, Executive Director, Lynchburg Youth and Prevention Services

Amy Rugh; Families

- 75-80% of families seen have some alcohol/drug problems.
- Some parents were raised by alcoholics and lack parenting skills.
- Counselors are treating youth but families are affected.
- Pregnancy is affected by the use of alcohol and drugs.
- Couples and Kids has a 13 week program/interactive session for parents.
- “Working poor” slip through the cracks when they need services.
- Denial by parents that there is a problem impacts the family/intergenerational issues.
- Alcohol/drug use is not part of the initial assessment but it does come out in later sessions.

Tamara Rosser; (Youth)

- Heroin is becoming popular again.
- Alcohol is readily available.
- Generations of substance abuse. Parents, Grandparents were never treated. It is a way of life.
- An economic resource; sell drugs for money.
- Parents turn blind eye to alcohol/drug abuse.
- Prevention dollars are decreasing.
- Smoking is becoming popular again.

Susie Owen; (Business)

- Alcohol/drug usage is a health and safety issue.
- Drug Testing; pre-employment, incident and/or random testing.
- New trend; companies are backing off pre-employment testing due to tight labor market. This puts companies at risk for accidents.
- Companies bend rules for some employees which may set themselves up for law suits.
- Abusers: submit 5 x more insurance claims.
late 3 x more than other employees.
use 3 x more sick benefits.
- Family members of abusers drive up health costs for emotional and physical issues.

1. How is alcohol and drug abuse currently manifesting itself in Central Virginia among youth, within the family, and in the workplace?
 - Selling drugs to make money (youth)
 - Self-medicating in youth & families
 - Sexual molestation issues. Parents ignore children and turn a blind eye.
 - Mental Health issues as a result of alcohol/drug abuse

2. What are the resources available in Central Virginia for treating alcohol and drug use, abuse, and the resulting consequences among youth, within the family, and in the workplace?
 - Adults have more access to resources than youth.
 - Families referred to CSB
 - No single point of entry
 - Private pay businesses are flourishing.
 - Youth – no inpatient treatment locally – few in state
 - Education resources are available
 - Good access to treatment locally
 - Treatment centers are closing nationally
 - Working poor fall through the cracks
 - Not enough resources locally
 - Prevention resources are not available

3. What are the most pressing unmet service/treatment needs?
 - Need more prevention services.
 - Prevention programs get decreased funding; hard to measure outcomes.
 - No inpatient services for youth
 - Need more education and preventive services at front end
 - Situations/ life changes – need updated
 - Families; who cares for the children? Possibility of losing job when seeking treatment.
 - Need support services for youth when they return to the community after in-patient treatment.

4. What are the obstacles to meeting the unmet needs?
 - Need more money
 - There is stigma attached to getting treatment.
 - Professionals shy away from dealing with it (not a great success rate)
 - Perception – Pot is not harmful
 - Confidentiality laws.
 - Media makes alcohol, smoking etc. look glamorous.

Questions / Comments

- Smoking back in Vogue – smoking bars
- Parents buying booze for underage – must be held accountable
- Is drug education provided in schools? What kind?
- Everyone has to take responsibility, including parents
- Will prescription drugs for kids (Ritalin etc.) have an impact as kids get older- culture of taking something to solve problems?

- Substance Abuse Treatment may not have good outcomes.
- Programs like DARE have little effectiveness
- There are good Treatment and education programs - need to explore and implement
- No information in survey on older adults – need to address.
 - Problem of the working poor getting worse
 - Need advocate to change attitudes & politicians
- Inconsistencies in the way youth are treated based on economics
- Programs with “Teeth” to rehabilitate. Drug Courts
- What to do –
 - Parental responsibility
 - Make services accessible
 - Opportunities other than drinking and drugging
 - Funding
- Office of Juvenile Justice; programs need evaluation component.
- Couples and Kids has a program for drug abusing/recovering parents and children; 6-10 dual child and parent sessions.
- Alliance has drug abuse prevention program for middle school students.
- Make services/programs available at sites such as recreation centers, Boys & Girls Club.
- Teen-agers need opportunity to do fun things without drugs and alcohol. May not be easy to provide. Use existing facilities to house events for children and youth.
- Gateway is at 96% capacity ... resources are not available for these men. They come from families with no role model, not loved or accepted.
- Resources are needed to get Dads back into the family.

IV. Summary: Trends, Highlights, and Lowlights

Successful Children and Youth

- With the exception of Lynchburg, the dropout rates fall below the State rate. Lynchburg, while still with the highest rates in the region, has dramatically reduced its rate over the past three years.
- According to the 2000 US Census, 25% of Central Virginia adults did not complete high school. This is higher than both the State and national percentages.
- Per pupil school expenditures in all regional school divisions continue to lag behind the State average. Within the region, Lynchburg spends the most per pupil and Bedford County/City the least.
- The student/teacher ratios in regional schools in both primary and secondary schools are close to the State ratios.

- Performance on the English Standards of Learning exam for 2006/07 shows that only Appomattox exceeded the State average for all students. In all divisions, black students lag behind white students. A trend that has persisted for years.
- Performance on the Math Standards of Learning exam for 2006/07 shows that again only Appomattox exceeded the State average for all students. In all divisions, black students again lag behind white students. A trend that has persisted for years.
- Performance on the Science Standards of Learning exam for 2006/07 shows that only Lynchburg failed to reach or exceed the State average for all students. In all divisions, black students again lag behind white students. A trend that has persisted for years.
- Central Virginia children go to school. The attendance percentages for all school divisions within the region in 2006/07 were at 94% or 95%. There was no significant difference between whites, blacks, or Hispanics. The 2006/07 data continue a long established trend.
- In 2007 local counties and cities were falling short of meeting the need for licensed day care. The greatest need is found in Bedford City where only 11% of the need is met. Bedford County leads the list by meeting 48% of the need. Large numbers of preschoolers of working parents are cared for somewhere but not in licensed centers or facilities exempt for religious reasons.

Strengthening Families and Individuals

- Median household income within the region lags behind the State median in all jurisdictions. Within the region there is considerable variation with Bedford County having the highest median and Bedford City the lowest. These income patterns have been the trend for many years.
- The number and percentage of the Central Virginia population living below the poverty line increased between 2004 and 2005 in all areas except Amherst. Bedford City showed the greatest increase. The overall trend in poverty in Central Virginia over the past six years has been a gradual but significant increase.
- The unemployment rate in Virginia and Central Virginia is the lowest it has been in years. Interestingly, Central Virginia unemployment still exceeds the State rate. How can the employment numbers look so good and yet the rate of poverty continues to grow?

- Homeownership in Central Virginia is high. Bedford County has the highest ownership rate at nearly 87% while Lynchburg in the lowest at 58%.
- The most recent data on personal bankruptcy is dated (2004) but the trend in the decade of 2000's has been for large numbers of Central Virginians to declare bankruptcy.
- The number and percent of female headed households in Central Virginia is high --- about 20% of all households. Most of these households are not receiving TANF or welfare. They make up a large portion of the working poor.
- While about 20% of all Central Virginia adults live in poverty. The vast majority of them --- 95% --- do not receive welfare. They make up much of the working poor.
- While Central Virginia's Hispanic population is still small there is a clear trend upward. Every indication is that this pattern will continue.

Healthy and Independent Living Throughout Life

- According to dated information, approximately 12 out of every 100 people in Central Virginia have no type of health insurance. Current numbers will not be available until after the 2010 US Census.
- Over the past 30 years infant mortality in Central Virginia has sharply declined --- a success story.
- The rates of infant mortality for black infants are 4 to 5 times greater than for white infants ---- not a success story.
- In 2006 the rates of many forms of serious illness among people in Central Virginia were significantly higher than the State rates. This is a trend that has existed for years. We do not appear to be a healthy population.
- Central Virginians appear to commit suicide at about the same rate as the rest of Virginia.
- Among pregnant women in Central Virginia in 2006 12% did not receive first trimester care. There has been a trend up in this percentage over recent years.

- In 2006 the data indicate that the percentage of low birth weight babies dropped dramatically. Is there a problem with the data or did something substantive occur? Further investigation is needed.
- Among the most predictable findings in this report are the projections of the large numbers of senior citizens that will emerge in the near future. The aging of the baby boomers. Will we be ready?
- Agencies, organizations, and companies that provide services for the elderly report that service capacity is already stretched. The Baby Boomers will dramatically increase the needs for services.
- The decade between 2010 and 2020 the Boomers will be in their 60's and 70's and facing issues associated with that age group ---- retirement income, housing, health care, etc.
- The decade between 2020 and 2030 the Boomers will be in the 70's and 80's and facing the additional end of life issues.

People in Crisis Receiving Help

- In 2005 the rates of violent crime in Central Virginia inched up. Lynchburg showed the largest increase and only Appomattox showed a decline. Compared to the rest of the State, rates of violent crime remain low.
- In 2005 the rates of property crime in Central Virginia were mixed. Amherst, Appomattox, Bedford County, and Campbell rates were up. In Bedford City and Lynchburg rates of property crime were down. Compared to the rest of the State, rates of property crime remain low.
- In Central Virginia overall, the number of abused and neglected has been on the decline for 3 or 4 years. It is not clear what might account for this trend.
- The huge numbers on the use and abuse on alcohol among the people of Central Virginia are startling ---- especially among teens and young adults.
- The numbers are equally startling for the use and abuse of illicit drugs --- again, especially among teens and young adults.

- In Central Virginia the vast majority who are experiencing dependency on alcohol and/or drugs are not receiving needed treatment. The consequences of these untreated conditions reach into every facet of life.
- Serious psychological disorders are common among Virginia adults. About 1 in 10 experiences these problems annually and the trend is up. The problems are especially acute among 18-25 year olds ---- about 2 in 10 and the trend is also up.
- In 2006 the Central Virginia homeless population moved up after a slight decline in 2005. By far the greatest increase was among those with serious mental illness.