



## 2025 CHA: King George County

### Executive Summary:

Assessing and monitoring population health is a core public health function. To meet this need and comply with IRS and public health accreditation standards, Mary Washington Healthcare (MWHC) and the Rappahannock Area Health District (RAHD) conduct a Community Health Assessment (CHA) every three years across Planning District 16 (PD16) and MWHC's broader service area. This report summarizes key findings from the most recent CHA for King George County, highlighting priority health needs and community strengths to guide future public health planning and interventions.

The CHA identifies priority health issues and available community resources to address them. Building on the 2022 CHA, this report draws from a range of data sources, including focus groups, surveys, state and national health data, and 2024 MWHC inpatient screening data on social determinants of health, to provide a comprehensive view of health needs in King George County.

### Identified Community Health Strengths for King George County:

**Social Determinants of Health:** Social Determinants of Health (SDOH) are non-medical factors that influence a person's health, such as economic stability, education, housing, transportation, and access to healthy foods. King George County rates well among many SDOH data points, with lower poverty rates and lower rates of food insecurity. It should be noted that although King George performs well overall on SDOH indicators, significant disparities exist, such as the more than 500 children living below the federal poverty level.

Indicator	Virginia	RAHD (PD16)				
		Caroline County	Fredericksburg City	King George County	Spotsylvania County	Stafford County
Households with No Motor Vehicle (%)	6.07%	5.01%	9.24%	1.78%	3.09%	1.92%
Population Below 100% FPL (%)	9.98%	11.57%	18.03%	6.93%	7.35%	5.38%
Children in Poverty (% < Age 18)	12.81%	18.23%	31.61%	8.52%	10.22%	6.42%

Cost-burdened Households (%) [Housing is 30% or more of total household income]	30.51%	24.55%	33.19%	<b>23.85%</b>	25.96%	23.65%
Income Inequality [GINI Index] <sup>1</sup>	0.4724	0.4114	0.4579	<b>0.3861</b>	0.4049	0.3752
Social Vulnerability Index <sup>2</sup>	0.39	0.40	0.76	<b>0.05</b>	0.27	0.24
Food Insecurity <sup>3</sup>	11.1%	9.8%	14.5%	<b>8.6%</b>	8.8%	7.3%

**Insured Rates:** Uninsured percentages across the PD16 localities are roughly consistent with U.S. and Virginia figures, but the uninsured population is lower than the state average in King George.

RAHD (PD16)							
Indicator <sup>4</sup>	United States	Virginia	Caroline County	Fredericksburg City	King George County	Spotsylvania County	Stafford County
Uninsured (%)	10%	8%	9%	10%	<b>6%</b>	8%	6%

**Interconnectedness and Collaboration:** Residents of King George who participated in community conversations and focus groups noted their local food pantries, libraries, and Department of Social Services as strengths within the community. Senior participants in these conversations also praised the King George County Sheriff's Office for providing information to keep seniors safe from scams and other technology-related criminal activities. Additionally, social groups and faith-based organizations throughout the county offer opportunities for residents to participate in a variety of activities, as well as help provide transportation to doctor's appointments or for other needs. Residents did note that these individual efforts act as a band-aid to help those in need, and that long-term solutions are still desired.

### Identified Community Health Needs for King George County:

**Healthcare and Medical Resources:** King George continues to see high ratios of population to primary care physicians, dentists and mental health providers. During focus groups and community conversations, King George residents were very vocal about the need for more primary care and specialist providers to be available without having to drive to Fredericksburg, Northern Virginia, or Maryland to receive care.

RAHD (PD16)							
Indicator <sup>4</sup>	United States	Virginia	Caroline County	Fredericksburg City	King George County	Spotsylvania County	Stafford County
Primary Care Physicians (population per provider)	1,330	1,340	10,440	570	<b>4,580</b>	2,080	3,830

<sup>1</sup> U.S. Census Bureau, American Community Survey, 2018-22.

<sup>2</sup> Centers for Disease Control and Prevention and the National Center for Health Statistics, CDC – GRASP, 2022.

<sup>3</sup> Feeding America: Map the Meal Gap, 2022.

<sup>4</sup> County Health Rankings & Roadmaps - Compare Counties (various sources).

Dentists (population per provider)	1,360	1,330	3,990	490	2,140	2,220	2,820
Mental Health Providers (population per provider)	320	410	2,130	120	1,390	870	960

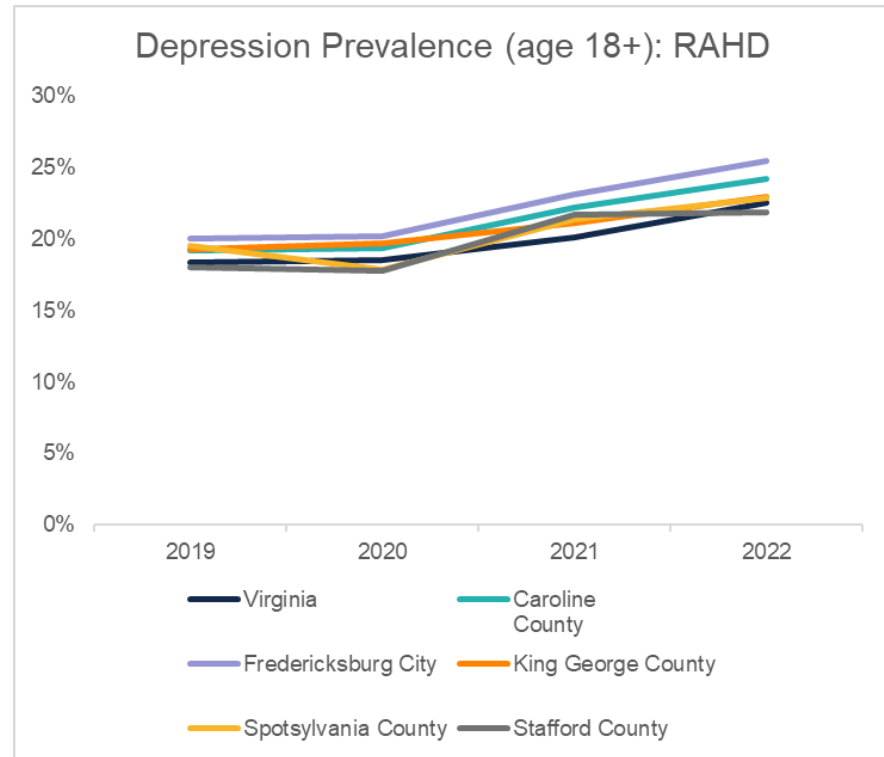
**Mental Health:** Mental health was a top need identified among survey respondents, and this was also reflected in the secondary data for King George County. The rate of King George adults reporting poor mental health and frequent mental distress was higher than both United States and Virginia rates. Additionally, depression rates increased from about 20% in 2019 to over 25% in 2022. Deaths by suicide rates in King George remain very high, at more than twice the rate of Virginia overall and higher than all other PD16 localities.

			RAHD (PD16)				
Indicator <sup>5</sup>	United States	Virginia	Caroline County	Fredericksburg City	King George County	Spotsylvania County	Stafford County
Adults with Poor Mental Health [Age-Adjusted] (%)	16.40%	17.20%	18.80%	18.80%	17.50%	17.60%	16.60%
Adults with Frequent Mental Distress [Crude] (%)	15.80%	16.50%	17.80%	20.30%	16.90%	16.90%	16.50%
Adults with Poor or Fair Health [Age-Adjusted] (%)	17.00%	16.00%	18.60%	18.60%	15.80%	15.40%	14.60%
Adults with Poor Physical Health Days [Age-Adjusted] (%)	12.00%	11.80%	13.60%	13.40%	11.80%	11.70%	10.80%

			RAHD (PD16)				
Indicator <sup>6</sup>	Year	Virginia	Caroline County	Fredericksburg City	King George County	Spotsylvania County	Stafford County
2023 Suicide Death Rates (per 100,000)	2023	14.3	21.9	17.4	32.3	15.0	11.0

<sup>5</sup> Centers for Disease Control and Prevention (CDC) - Behavioral Risk Factor Surveillance System (BRFSS), 2022.

<sup>6</sup> Virginia Department of Health, 2024.



**Chronic Disease Prevalence:** Unhealthy eating habits and insufficient physical activity were identified as key health behaviors to address in PD16 as a whole. These lifestyle factors are strongly associated with an increased prevalence of chronic health disease. King George consistently reports higher-than-average rates of several chronic diseases compared to the state, with particularly concerning trends in cancer, chronic obstructive pulmonary disease, coronary heart disease, current asthma, depression, and high blood pressure. Over the past five years, these conditions have shown a steady increase in prevalence.

		RAHD (PD16)				
Health Outcomes	State of Virginia	Caroline County	Fredericksburg City	King George County	Spotsylvania County	Stafford County
Cancer	7.00%	6.70%	6.90%	7.30%	7.20%	7.00%
Chronic Kidney Disease	2.70%	2.90%	2.80%	2.70%	2.70%	2.60%

<sup>7</sup> Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2022 .

Chronic Obstructive Pulmonary Disease*	6.00%	7.40%	7.20%	<b>6.30%</b>	6.00%	4.90%
Coronary Heart Disease	5.40%	6.10%	6.10%	<b>5.60%</b>	5.40%	5.00%
Current Asthma	10.00%	11.00%	10.70%	<b>10.20%</b>	10.20%	9.90%
Depression	23.00%	24.90%	24.40%	<b>23.30%</b>	23.40%	21.90%
Diabetes	11.40%	12.40%	12.90%	<b>10.90%</b>	11.60%	11.00%
High Blood Pressure *	31.50%	33.20%	32.40%	<b>32.20%</b>	32.30%	31.80%
High Cholesterol	32.80%	31.90%	30.70%	<b>31.60%</b>	34.00%	33.20%
Obesity	35.30%	41.60%	38.20%	<b>35.20%</b>	38.30%	37.00%
Stroke <sup>8</sup>	3.00%	3.60%	3.50%	<b>3.00%</b>	2.90%	2.60%
Alzheimer's Disease (65+) <sup>9</sup>	11.7%	12.9%	12.0%	<b>11.3%</b>	11.1%	10.5%

### MWHC Social Determinants of Health Screening Data:

In addition to the secondary data available for SDOH, MWHC screens its adult inpatients for five key social determinants of health including food insecurity, housing instability, interpersonal safety, utilities, and transportation. This initiative enhances MWHC's ability to understand and address the social factors impacting patient health, allowing for more tailored interventions. The collected data also offers valuable, real-time, insight into broader community needs, supporting more informed public health planning and resource allocation. The 2025 CHA reflected data for MWHC inpatients captured during the 2024 calendar year.

<sup>8</sup> CDC BRFSS, 2022. Accessed via the PLACES Data Portal.

<sup>9</sup> Dhana et al. Alzheimer's & Dementia, 2023.

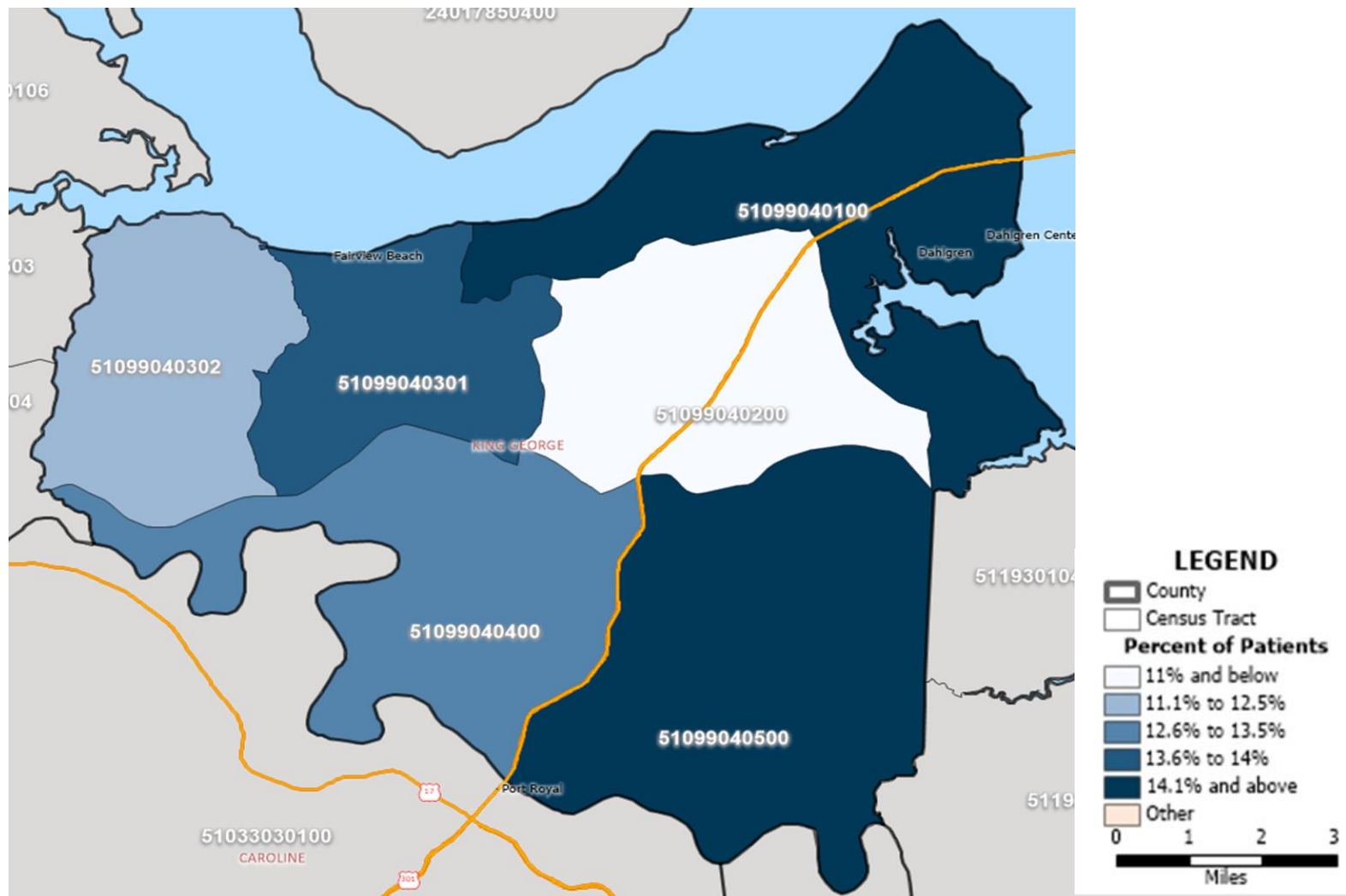
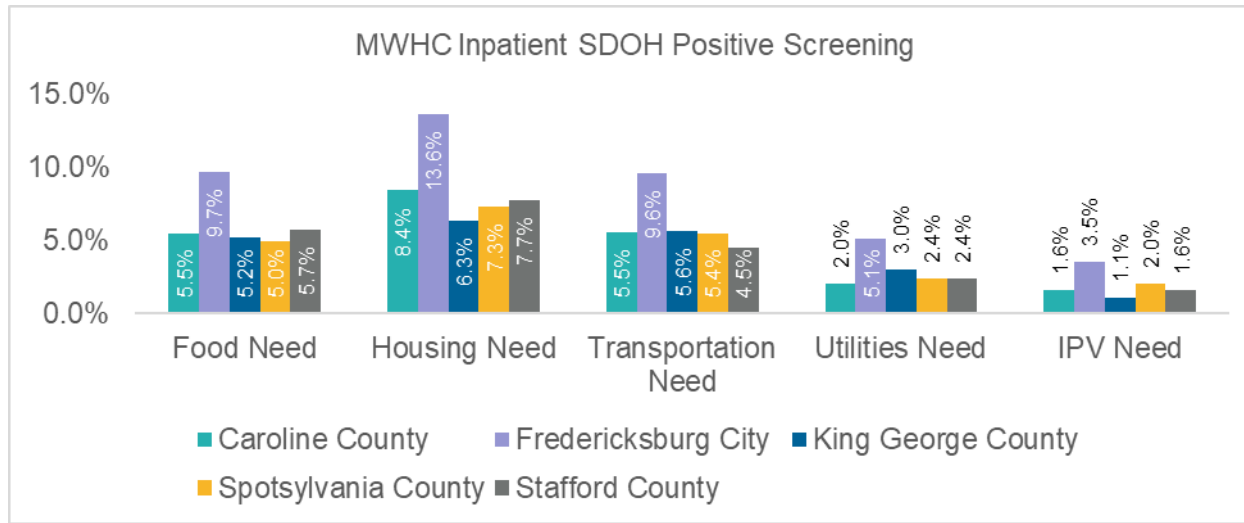


Figure1: Positive SDOH Screening Rates by Census Tract, King George (proportion of MWHC adult inpatients (18+) that screened positive for one or more SDOH needs)

This map provides a visual representation of SDOH needs within King George County. The darker shades of blue indicate census tracts with higher rates of positive SDOH screenings, highlighting areas with potentially greater social and economic challenges. Based on the screening data, census tracts 100 and 500 had the highest overall rate of positive SDOH screening for one or more SDOH needs.



The screening data reveals notable variation in SDOH needs across census tracts within King George County. Positive screenings for housing needs were most prevalent among King George adult inpatients with a rate of 13.6%, followed by transportation at 5.6% and food needs at 5.2%. Utilities needs were noted by 3.0% of King George inpatients, and interpersonal violence needs at 1.1%.

**Conclusion and Next Steps:** This document highlights both strengths and health challenges facing King George County. While the community benefits from encouraging rates for social determinant health needs overall, a low rate of uninsured residents and a strong sense of interconnectedness and collaboration, significant issues persist, including access to healthcare and medical resources, mental health concerns including high rates of depression and suicide, and less favorable than state rates of several chronic diseases. These challenges emphasize the need for focused, collaborative solutions. This assessment serves as a foundation for strategic planning aimed at advancing health equity and enhancing the well-being of all King George residents as we move into the Community Health Improvement Plan (CHIP) process. Though not all issues can be addressed through the CHIP, this report is intended to deepen understanding of health across the city and help organizations, local governments, businesses, and neighborhoods align resources to meet the community's most pressing needs.