2025 CHA: Stafford

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 Stafford 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 Stafford County.

Identified Community Health Strengths for Stafford County:

Health outcomes: In general, chronic disease rates are lower among Stafford residents than the Virginia average, with the exception of high blood pressure, high cholesterol, and obesity. These low rates of disease also translate into generally positive long term health outcomes, with lower rates of hospitalizations and a greater life expectancy among Stafford residents compared to other PD16 localities and the state as a whole.

Health Outcomes	State of Virginia	RAHD (PD16)				
		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%**
Chronic Obstructive Pulmonary Disease*	6.00%	7.40%	7.20%	6.30%	6.00%	**4.90%**
Coronary Heart Disease	5.40%	6.10%	6.10%	5.60%	5.40%	**5.00%**
Current Asthma	10.00%	11.00%	10.70%	10.20%	10.20%	**9.90%**
Depression	23.00%	24.90%	24.40%	23.30%	23.40%	**21.90%**
Diabetes	11.40%	12.40%	12.90%	10.90%	11.60%	**11.00%**

	Virginia	Caroline County	Fredericksburg City	King George County	Spotsylvania County	Stafford County
High Blood Pressure *	31.50%	33.20%	32.40%	32.20%	32.30%	**31.80%**
High Cholesterol	32.80%	31.90%	30.70%	31.60%	34.00%	**33.20%**
Obesity	35.30%	41.60%	38.20%	35.20%	38.30%	**37.00%**
Stroke[1]	3.00%	3.60%	3.50%	3.00%	2.90%	**2.60%**
Alzheimer's Disease (65+)[2]	11.7%	12.9%	12.0%	11.3%	11.1%	**10.5%**

				RAHD (PD16)		
Hospitalizations Rate (per 100,000 population)[3]	Virginia	Caroline County	Fredericksburg City	King George County	Spotsylvania County	Stafford County
Asthma	619.52	845.76	735.79	675.65	780.79	**585.02**
Diabetes	2,114.24	3,233.96	2,539.67	2,625.91	2,475.28	**1,799.07**
Hypertension	4,360.69	6,519.77	5,164.11	5,251.82	5,295.09	**3,866.72**
Stroke	263.13	372.65	261.09	277.56	263.63	**199.68**

				RAHD (PD16)		
Life Expectancy[4]	Virginia	Caroline County	Fredericksburg City	King George County	Spotsylvania County	Stafford County
Overall	78.1	75.7	74.5	78.2	78.8	**79.4**
Asian, non-Hispanic	*	*	*	*	88.6	**86.9**
Black/African American, non-Hispanic	*	75.9	70.9	76.6	79.3	**77.2**
Hispanic	*	80.5	81.1	83.0	83.1	**83.4**
White, non-Hispanic	*	74.9	75.2	78.0	77.9	**79.3**

* Data are unavailable

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. Stafford County rates well among many SDOH data points, with good access to motor vehicles, lower poverty rates, and lower rates of food insecurity. It should be noted that though Stafford performs well overall on

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[1] CDC BRFSS, 2022. Accessed via the PLACES Data Portal
[2] Dhana et al., Alzheimer's & Dementia, 2023.
[3] Virginia Department of Health, VDH - Virginia Cancer Registry, 2016-2020.
[4] National Center for Health Statistics - Natality and Mortality Files; Census Population Estimates Program, 2019-2021.

social determinants of health, there are still significant disparities that exist, such as the more than 8,400 Stafford residents 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%	23.85%	25.96%	**23.65%**
Income Inequality [GINI Index][5]	0.4724	0.4114	0.4579	0.3861	0.4049	**0.3752**
Social Vulnerability Index[6]	0.39	0.40	0.76	0.05	0.27	**0.24**
Food Insecurity [7]	11.1%	9.8%	14.5%	8.6%	8.8%	**7.3%**

Identified Community Health Needs for Stafford County:

Access to Healthcare: Compared to state and national averages, there are fewer physicians, dentists and mental health providers in Stafford relative to the population. For mental health providers and dentists, these ratios have improved since the 2022 CHA, but the population per primary care physician has increased.

Indicator[8]	United States	Virginia	RAHD (PD16)				
			Caroline County	Fredericksburg City	King George County	Spotsylvania County	Stafford County
Uninsured (%)	10%	8%	9%	10%	6%	8%	**6%**
Primary Care Physicians (population per provider)	1,330	1,340	10,440	570	4,580	2,080	**3,830**
Dentists (population per provider)	1,360	1,330	3,990	490	2,140	2,220	**2,820**

[5] U.S. Census Bureau, American Community Survey, 2018-22.
[6] Centers for Disease Control and Prevention and the National Center for Health Statistics, CDC – GRASP, 2022.
[7] Feeding America: Map the Meal Gap, 2022.
[8] County Health Rankings & Roadmaps - Compare Counties (various sources).

Mental Health Providers (population per provider)	320	410	2,130	120	1,390	870	**960**

Built Environment: The built environment refers to the human-made structures and features in a community. During community conversations and focus groups, residents were asked how interactions with their built environment impact community members health. Many in the more rural areas of the county reported having difficulty accessing the services they need. Residents living in housing communities with their own resources, such as community and recreation centers, have positive reactions and know what is available within their immediate community, though they did express the desire for more spaces and activities for youth as well as expanded public transportation options and access to sidewalks.

In the secondary data, Stafford has the second highest percentage of the population that drives alone and has a long commute (over 30 minutes) to work, which lays the groundwork for potential isolation and sedentary lifestyles. Stafford also has the highest average daily air pollution in PD16. On a more positive note when it comes to the built environment, Stafford has higher than state average rates on the food environment index, which considers proximity to grocery stores, the availability of healthy food options, food prices, access to food assistance programs, and dietary quality indicators.

			RAHD (PD16)				
Indicator	**United States**	**Virginia**	**Caroline County**	**Fredericksburg City**	**King George County**	**Spotsylvania County**	**Stafford County**
Food Environment Index[9]	9.1	9.0	9.3	8.2	9.6	9.1	**9.5**
Access to Exercise Opportunities (%)[10]	80%	84%	59%	100%	69%	84%	**83%**
Average Daily Air Pollution (PM2.5)[11]	7.4	7.3	7.9	7.9	7.7	8.0	**8.1**
Drive Alone to Work (%)[12]	72%	71%	77%	65%	78%	73%	**67%**
Drives Alone & Long Commute (%)[13]	36%	40%	64%	40%	51%	50%	**54%**

Obesity: Obesity rates among adults in PD16 and across the state have continued to rise over the last several years, and Stafford has had the largest increase in PD16 localities with an increase from 30.9% of adults in 2018 to 37.6% in 2022. This is a meaningful increase to see in a few years. As obesity is a significant risk factor for many chronic diseases, this may be tied to changes in other health outcomes in the future among Stafford residents.

	RAHD (PD16)

[9] USDA Food Environment Atlas; Map the Meal Gap from Feeding America (2019 & 2020).
[10] ArcGIS Business Analyst and ArcGIS Online; YMCA; US Census TIGER/Line Shapefiles (2023, 2022, & 2020).
[11] Environmental Public Health Tracking Network (2019).
[12] American Community Survey, 5-year estimates (2018-2022).
[13] American Community Survey, 5-year estimates (2018-2022).

Indicator[14]	Year	Virginia	Caroline County	Fredericksburg City	King George County	Spotsylvania County	Stafford County
Obesity - Adults 18+(%)	2018	31.1%	37.6%	31.2%	31.5%	34.7%	**30.90%**
	2019	31.9%	35.1%	32.3%	34.7%	33.4%	**33.00%**
	2020	33.1%	39.4%	32.0%	36.5%	35.1%	**36.90%**
	2021	34.4%	38.0%	34.0%	36.8%	36.3%	**38.00%**
	2022	35.1%	42.3%	36.2%	35.7%	38.6%	**37.60%**

[14] Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2022 .

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.

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

The map on page 6 provides a visual representation of SDOH needs across Stafford 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 211 had the highest overall rate of positive SDOH screening for one or more SDOH needs, followed by 107, 108 and 212.
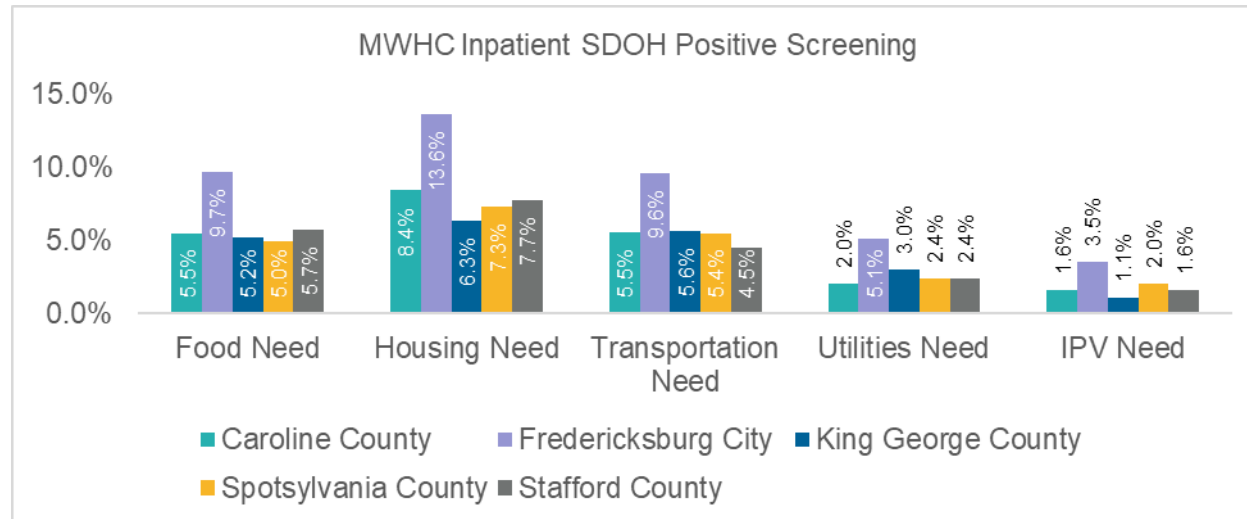
The screening data reveals notable variation in SDOH needs within Stafford County. Positive screenings for housing needs were the most prevalent identified need among Stafford adult inpatients with a rate of 7.7%. This is followed by food needs at 5.7% and transportation at 4.5%. Utilities and interpersonal violence positive screenings are at 2.4% and 1.6% respectively.

Conclusion and Next Steps: This document highlights strengths and health challenges facing Stafford County. While the community benefits from encouraging rates for social determinant health needs overall, hospitalization rates for chronic conditions, and the highest life expectancy in the planning district, significant issues persist, including access to healthcare and medical resources, built environment and obesity rates. It is also worth noting that while percentages of the population faced with a variety of health conditions and social determinant of health concerns may be lower than the state average on several factors, the size of the population in Stafford County is large and indicates these conditions are still affecting a large number of people. 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 Stafford 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.