Dinwiddie County
Focus Group Report:

Exploring Health & Human Services
from a Community Perspective

October 2011
Introduction

In the spring of 2011, The Cameron Foundation (the Foundation) identified the need to gather information concerning the availability of health and human services resources and associated needs in two of the rural counties in its service area: Dinwiddie and Sussex. Dinwiddie County ("the County"), immediately southwest of the City of Petersburg, was chosen to be assessed first. While quantitative information is available through the Foundation’s 2008 Health Needs Assessment and other sources, specific information detailing the County’s resources and needs from the perspective of area residents and leadership has not been available.

It was determined that the best way to gather this information efficiently and in a timely manner was through conducting four focus groups in each locality. The following groups were identified as representing a cross-section of community leadership and key stakeholders:

- **Health and Human Services Organizations** – e.g., representatives from the health department, social services department, community health center, home visitation programs, senior programs
- **Business** – e.g., small and large business, Dinwiddie County Chamber, economic development, transportation representatives, higher education
- **Education and Youth Services** – e.g., public school, day care, recreation and parks, 4H, youth programs
- **Faith and Civic Organizations** – e.g., places of worship located in the County or serving residents of the County and local volunteer groups

The Foundation’s lead staff person on this project was Valerie Liggins, Program Officer responsible for its initiatives in the areas of Health and Human Services, and its consultant was Karen Cameron, a health care professional with more than twenty years of experience in qualitative and quantitative market research, including performing community needs assessments in the Foundation’s service area and other communities. Valerie and Karen worked with County governmental leadership and other sources to identify eight to fifteen individuals for each group and contact them relative to their availability to attend a focus group. Because of the rural nature of Dinwiddie, it was often difficult, particularly initially, to identify enough organizations who serve the County’s residents to ensure a representative group.

Total actual participation ranged from five educational/youth representatives to fourteen health and human services representatives. The business group had six participants. The three focus groups were held on consecutive days from May 16-18. Of significance is the fact that 99% of those who responded that they would attend, participated in the focus groups. The one individual who couldn’t attend had to cancel due to an office emergency. This level of participation signifies the commitment to and perceived importance of this gathering to those agreeing to participate. A short anonymous demographic survey of the 25 participants was
conducted prior to each focus group and a summary of those findings is presented in the following section of this report.

After several unsuccessful attempts to schedule a convenient date and time for the fourth focus group, faith and civic organizations, Foundation staff asked identified representatives if they would be willing to answer the focus group questions via an interview with the project’s consultant. Only four faith and civic representatives (two each) responded to staff’s inquiry and only three of those responded to the consultant’s requests for a telephone interview. We have learned that part of the difficulty in getting participation appears to be that many of the area’s clergy members live outside Dinwiddie and/or have other jobs which limit their available time. Another reason is that there does not appear to be a strong civic community in Dinwiddie, perhaps because many residents work outside the County or because the County is geographically dispersed and there is no formal organizing structure for civic involvement. Therefore, the information presented under Faith/Civic in the report is the findings from interviews with two area clergy and one civic representative. A demographic survey was not done of these representatives since anonymity would be difficult.

The following section presents the results from the demographic survey of the twenty five focus group participants. The addition of the three faith/civic representatives resulted in a total of twenty eight stakeholders who participated in this assessment.
Focus Group Demographics

Almost a quarter of the participants were male and three-quarters were female, which is to be expected since those working in the educational and health and human service fields are largely female.

As shown in the chart below, the participants were racially diverse, even more so than the general population of the County. None of the participants indicated that they were of Hispanic origin.

As illustrated by the following, the largest percentage of participants was 50-59 years of age. However, all age groups were represented with the exception of those less than 30 years of age, likely reflecting the career achievement generally needed to represent an organization.
The majority of participants were employed full-time and three-quarters were physically located in the County.

As illustrated below, those working in the County generally had significant tenure.

All but one participant was employed full time or retired and generally were in leadership positions. As a result, they all reported having health insurance. Moreover, only two individuals had a family member who didn’t have health insurance. This consideration could impact their personal knowledge of the needs of those without health insurance and any associated access issues. It is important to note that many of the participants have worked directly with uninsured County residents, which may have provided them with greater insight into these clients’ needs relative to paying for health care.
Only 14 (56%) of the 25 participants **lived in the County**, reflecting a situation seen in many rural communities. Among the possible reasons for this low residency level is that organizational leaders may have settled into a neighboring, more urban area earlier in their careers because of the perceived advantages available relative to their, or their spouse’s, careers or their children’s education. Nevertheless, as shown in the following chart, the vast majority of those participants who lived in Dinwiddie had been in the County for twenty or more years.
Needs Assessment Focus Group Summary

The following charts encompass the questions that were asked at each focus group (or during individual interviews in the case of the faith/civic group) and a summary of the comments that were made. Note that it is impossible to capture the exact number of people who had a particular response or agreed with a response given by another participant during a focus group. However, an attempt was made to quantify the relative mention of an opinion, shown in parentheses, so that the findings could reflect the support for a particular viewpoint. At the end of each chart, an overview summarizes the opinions offered relative to the question across all groups and what they indicate for the community as a whole.

1. What is the best thing about living or working in Dinwiddie County?

### Business
- Rural location with great potential for development (4)
- Deep connection to the community and the extensive family roots some individuals have in the area; pride in their home (4)
- Richard Bland College has a great relationship with the local schools and recently developed a medical center on campus
- Area is good for growth and has good employers
- Land is available for development and the tax rate is good
- New health center is a major development and the new commercial growth that reduces travel time for shopping is desirable
- Easy to visit other areas for shopping and other needs

### Education and Youth
- Rural area with varied demographics (4)
- Good relationships among agencies and between the people in the community (4)
- Home with strong family ties (3)
- Considerate people with a willingness to grow and change Dinwiddie (2)
- Good public school system

### Faith and Civic
- Rural area (3), lots of potential

### Health and Human Services
- The area is home or feels like home and there are good family ties (9)
- Good area for strong community ties and support; a very welcoming community (6)
- Engaged public service (2)
- Quiet and nice area with friendly people (2)
- Rural area
Overview – Best Attributes of the County

As evidenced by the preceding chart, the most frequently mentioned “best” attribute of the county is its rural character, with several mentions about its potential for positive growth which many felt was not always possible in more isolated rural areas. Particularly the business community mentioned the resources that are available for business development; land, relatively low taxes, some new retail and service development and higher education nearby.

The good relationships between people and the cordial working relationships between organizations in the County are perceived as another positive attribute of living or working in Dinwiddie. It was noted that many of the people in the County have strong community and family ties to the area. Generally, residents were viewed as friendly and welcoming to others but some noted that the extensive ties can make new people feel as if they are an “outsider.”
2. What is the worst thing about living or working in Dinwiddie County?

<table>
<thead>
<tr>
<th>Category</th>
<th>Problems</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Business</strong></td>
<td>- Required to travel outside of the County to get major retail goods (4)</td>
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<tr>
<td></td>
<td>- Health care is lacking in the area and often individuals have to travel outside of the area for their needs; lack of specialty care (4)</td>
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<tr>
<td><strong>Education and Youth</strong></td>
<td>- Impact of recession and budget decisions on county employees (3)</td>
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<tr>
<td></td>
<td>- Most counties have given raises or a bonus except Dinwiddie</td>
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<tr>
<td></td>
<td>- Have not had a raise in about 4 years but the taxes have risen and land investment can have very high taxes</td>
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<td></td>
<td>- Have had to pay more for health care and this has hurt staff retention</td>
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<td></td>
<td>- Budget cuts for county programs</td>
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<tr>
<td></td>
<td>- Not enough for people to do (lack of nature trails and other activities)</td>
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<tr>
<td></td>
<td>- Should have more activities and nicer facilities for youth (lack of activities places more stress on parents)</td>
</tr>
<tr>
<td><strong>Faith and Civic</strong></td>
<td>- Limited businesses for job opportunities</td>
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<tr>
<td></td>
<td>- Lack of available retail and other services</td>
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<td></td>
<td>- The proportion of taxes, relative to the level of services received</td>
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<tr>
<td><strong>Health and Human</strong></td>
<td>- Lack of transportation with an expansive county with activities separated by significant distance; makes it hard to find work and activities for youth (2)</td>
</tr>
<tr>
<td><strong>Services</strong></td>
<td>- Area can be too well connected and people can get to know each other too well; hard for public service employees to deal with clients outside the office, especially if they have an adversarial role</td>
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<tr>
<td></td>
<td>- Lack of commercial business and resources for locals; have to leave the community for some things</td>
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<tr>
<td></td>
<td>- Taxes are too high</td>
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<tr>
<td></td>
<td>- Medical and dental facilities are limited</td>
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</tbody>
</table>
Overview – Worse Attributes of County

All groups except for the education/youth group cited the limited retail and other businesses to provide employment and from which to purchase goods and services (including health care) as one of the “worst” things about Dinwiddie County. Limited transportation and other issues around having such a large and dispersed geographic area were often brought up in context of other “worse” attributes.

The education/youth group cited the lack of raises for county employees for an extended period of time and increased benefit cost resulting in a concern about retention, as well as cuts in county programs. Interestingly, a member or two of the faith/civic and health/human services groups noted high taxes as a negative attribute of living in the County. These opposing viewpoints illustrate the competing needs of growing rural communities. County revenue largely tied to property taxes, often paid by long-term residents with extensive property holdings, cannot keep up with the competing needs that growing rural communities have such as education and public needs brought by a growing residential population, particularly in the absence of substantial commercial development.
### 3. What do you think are the greatest needs of children and youth in the County?

<table>
<thead>
<tr>
<th>Business</th>
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</thead>
<tbody>
<tr>
<td>▪ Limited activities, particularly affordable and accessible ones (6)</td>
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<tr>
<td>- Recreation department does not allow after-hours access to the community center anymore, which restricts library times and limits activities for children</td>
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<tr>
<td>- Nothing constructive for children to do</td>
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<tr>
<td>- No movie theaters or other cultural activities; limited activities for non-athletic children</td>
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<tr>
<td>- Transportation is not available to bring students to activities</td>
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<tr>
<td>- Available programs for children are costly and there is no YMCA in the area</td>
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<tr>
<td>- Children are not independent and need help to find things to do</td>
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<tr>
<td>▪ Youth need training on job skills, personal finance, and life skills (this needs to be offered to all youth, not just those interested in business) (4)</td>
</tr>
<tr>
<td>▪ Needs to be more availability and emphasis of vocational training</td>
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<tr>
<td>▪ Need help with writing and math skills</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Education and Youth</th>
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</thead>
<tbody>
<tr>
<td>▪ Transportation (5)</td>
</tr>
<tr>
<td>▪ Affordable and accessible activities in the community (5)</td>
</tr>
<tr>
<td>- Available facilities with adequate amenities</td>
</tr>
<tr>
<td>- Difficult to access the recreation center because of hours and transportation</td>
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<tr>
<td>- More lighting on the sports fields to provide more flexible hours</td>
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<tr>
<td>- Programs that are available are not always affordable</td>
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<tr>
<td>- A scholarship fund to help families pay for youth activities</td>
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<tr>
<td>▪ Establish/expand early childhood education programs (2)</td>
</tr>
<tr>
<td>- Head Start cannot accommodate all the children that could join the program (space/funding issue)</td>
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<tr>
<td>- Public preschool programs are needed; children are not ready for public school</td>
</tr>
<tr>
<td>▪ Limited childcare options</td>
</tr>
<tr>
<td>▪ Not enough job opportunities in the area</td>
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<thead>
<tr>
<th>Faith and Civic</th>
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</thead>
<tbody>
<tr>
<td>▪ Recreation services and access (3)</td>
</tr>
<tr>
<td>- Community center that affords multiple recreational and educational activities</td>
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<tr>
<td><strong>More recreational opportunities that are free</strong></td>
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<td>-----------------------------------------------</td>
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<tr>
<td>- Need quality daycare and summer camps (2)</td>
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<tr>
<td>- Need an afterschool program option not affiliated with the school system</td>
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<tr>
<td>- Responsible and involved parents and mentors</td>
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<tr>
<td>- Money management skills; financial literacy</td>
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<table>
<thead>
<tr>
<th><strong>Health and Human Services</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>- Transportation (2)</td>
</tr>
<tr>
<td>- More afterschool activities</td>
</tr>
<tr>
<td>- Summer programs</td>
</tr>
<tr>
<td>- No programs for children with special interests</td>
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<tr>
<td>- Mental health and substance abuse help; lack of providers for this care</td>
</tr>
<tr>
<td>- Lack of essential items (running water, food, housing, etc.) is a barrier to good parenting</td>
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</tbody>
</table>

**Overview – Greatest Needs of Children and Youth**

Overwhelmingly, the greatest needs for children and youth residing in the County identified by all four groups are affordable and accessible activities, including activities after school and during the summer, as well as transportation to get them to those activities. The dispersed geographic area and parents who often work outside the County reduce children’s access to activities, in addition to the fact that there is no comprehensive community center (a facility or facilities with an indoor gym, swimming, and varied enrichment activities). The limited hours of, and lack of transportation (except by private vehicle) to the current recreational center in the north end of the County was specifically noted by the business and educational groups, as was the need for youth employment training and opportunities. The faith and health and human services groups see a need for behavioral health and other supports for parents.

Like many traditionally rural communities which are growing as a result of greater job opportunities in neighboring areas, focus group members cited significant growth of school age children in Dinwiddie in the recent past as well as families with greater expectations relative to the availability of community supports. While the County has invested in schools and a new sports park, the infrastructure and funding for youth and family support activities is perceived to lag behind the growth.
4. What are the greatest needs of working age people living in the County?

| Business        | ▪ Afterschool activities for children and daycare (limited sick childcare as well) (6)  
|                 | ▪ Jobs skills training  
|                 | ▪ Substance abuse help for casual users  
|                 | ▪ More job availability needed with competitive salaries  
|                 | ▪ Transportation (a Park-n-Ride to take employees to Richmond) |
| Education and Youth | ▪ Job skills training, job availability, aid in applying for job opportunities (training for electronic applications) (2)  
|                 | ▪ Higher wages and more employment opportunities  
|                 | ▪ Childcare is lacking  
|                 | ▪ Transportation  
|                 | ▪ Limited bus route with poor times of service |
| Faith and Civic | ▪ Employment opportunities needed in the County (2)  
|                 | ▪ Parenting education (2)  
|                 | ▪ Paternal support for single mothers with children  
|                 | ▪ Support groups (e.g., domestic violence, recovery, teenage pregnancy, etc.)  
|                 | ▪ Daycare/afterschool care (need to participate in activities)  
|                 | ▪ Internet access  
|                 | ▪ Retail in the County  
|                 | ▪ Money management/financial literacy |
| Health and Human Services | ▪ Cost of childcare is very high and there are limited options for care (3)  
|                 | - Southern end of Dinwiddie needs childcare options  
|                 | ▪ Employment training and support (3)  
|                 | - Significant number of job turnover because of unacceptable behavior  
|                 | - Transportation limits job options  
|                 | - Limited education, a lack of jobs, and poor job skills are preventing people from getting new employment  
|                 | ▪ Housing  
|                 | ▪ Medical care, particularly care for pregnant women, dental, geriatric care and mental health needs  
|                 | ▪ Difficulty paying for basic needs |
Overview – Greatest Needs of Working Age Adults

Every group identified affordable childcare and afterschool activities for children and youth as a significant need of working-age (those 18-64 years) adults, as well as employment training and support and more employment opportunities in the County. All groups except the faith group mentioned transportation as a need, particularly relative to having employment options. One suggestion was to have a Park-n-Ride for those commuting to Richmond.

The mention of specific health-related services differed by group but most evolved around behavioral health needs. The business group identified the need for substance abuse services; the faith group noted the need for support groups; while the health group identified a range of services from dental to obstetrics to specialized care for older adults, as well as mental health care.
5. What are the greatest needs of older adults in the County?

| Business                           | Transportation is limited for individuals who no longer drive, who have no family, or have limited family support.  
|                                   | Activities in the area are not spread equally over Dinwiddie.  
|                                   | Meals-On-Wheels program.  
| Education and Youth                | Need adult care options other than nursing homes (home health, etc.) and activities for older adults in the area.  
|                                   | - Daycare and home services.  
|                                   | Transportation.  
|                                   | Senior advocates.  
|                                   | Facilities for use by older adults.  
| Faith and Civic                   | Money – many on fixed incomes with limited disposable income (2).  
|                                   | Health care resources and information (lack of providers or adequate staffing of nursing care facilities) (2).  
|                                   | Night driving assistance and driving education class (get insurance discount for participating).  
|                                   | Senior housing and support services (can build in-law suites).  
| Health and Human Services         | Housing (2).  
|                                   | - A central elderly independent living supportive housing option.  
|                                   | Directed support for the aging population not available or provided by the County.  
|                                   | Transportation.  
|                                   | Limited options for adult daycare.  
|                                   | Senior advocates.  
|                                   | Geriatric specialists.  
|                                   | Home care options for bed-ridden adults and for adults unwilling to leave their homes.  
|                                   | Lack of food and limited food delivery.  

Overview – Greatest Needs of Older Adults

The greatest needs of older adults included a range of issues, but few were mentioned across groups. The exception was the need for transportation options, with one suggestion being that a driver education program be offered for older adults. Housing needs, particularly more accessible and affordable home care options and supportive housing, were mentioned by all groups except the business group. Two of the groups specifically mentioned the need for adult daycare. Supportive services of one form or the other, such as senior advocates and food delivery, were mentioned by all groups.

Affordable care options and transportation are routinely identified as needs of older adults in most communities but the geographic distances and the lack of population density in rural areas often makes the development of viable solutions difficult.
6. What do you think are the greatest health-related needs in the County? Are there particular subgroups in the County that have these needs?

| Business | Accessible health care providers (6)  
| - There are extensive waits to get care  
| - Limited female doctors  
| - Lack of specialty providers  
| - Hospital services are outside of the County  
| - Need an urgent care or primary care clinic in the underserved area of the County  
| - Limited pediatric services  
| - Pregnancy care requires travel outside of the County  
| - EMS services is located far from most Dinwiddie County  
| - Difficult to get health insurance coverage  
| - Limited dental care |

| Education and Youth | Dental care  
| Primary health care services  
| Care for the elderly  
| Teen pregnancy is an issue in the area  
| Residents need advocate to help fill out paperwork and navigate the process  
| Mental health needs across the board  
| Substance abuse help for youth and working adults |

| Faith and Civic | Transportation to get older adults to medical appointments  
| Prescription drug assistance for older adults  
| Health insurance for working age adults  
| More family practice physicians in the County  
| Nutritional needs (dietician, particularly for low income)  
| Recreational activities for children and youth  
| Sub-standard housing |

| Health and Human Services | Urgent care center  
| Extended hours from providers in the area  
| Mental health for all age groups  
| Geriatric care  
| Home care for the elderly  
| Dental care for all ages |
Overview – Greatest Health Related Needs

When asked about the greatest health-related needs in the County, all groups noted the need for accessible health care providers, with the type of provider sometimes differing from group to group. Nevertheless, the business group was the most concerned about this need, as well as obstetrical and pediatric care, probably reflecting the needs of their employees. The need for urgent and/or primary care services (such as a Patient First or a physician’s office with extended hours) had wide support. Mental health care for all age groups was mentioned as a need by both the education and health groups, as well as dental care providers, which was also supported by the business group. While the need for geriatric care was expressed by both the education and health groups, help with the cost of prescription drugs by the elderly was viewed as a significant need by the faith community.

Concerns about health insurance coverage were expressed by both the business and faith groups. Lack of and/or the high cost of health insurance is a national issue but is of even greater concern to small businesses and their employees. Most businesses in rural areas are likely to have a greater representation of small employers for which health insurance is particularly costly.
7. What do you think would be effective in meeting or assisting in meeting health-related needs?

<table>
<thead>
<tr>
<th>Business</th>
<th>Education and Youth</th>
<th>Faith and Civic</th>
<th>Health and Human Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>▪ Stronger collaboration between the County and the school system</td>
<td>▪ Coordinate recreation center youth programs with adult job/financial skills training to reduce transportation needs</td>
<td>▪ Recreational opportunities, particularly for children (2)</td>
<td>▪ Coordinate health and human resource gatherings to spread knowledge and resources (communication and networking) (2)</td>
</tr>
<tr>
<td>▪ Additional physicians and dentists</td>
<td>▪ Develop more daycare provisions</td>
<td>- Churches could establish summer camps</td>
<td>▪ Provide public opinions for these focus groups to the County</td>
</tr>
<tr>
<td>▪ Improve transportation by increasing hours and routes for bus system</td>
<td>▪ Provide more opportunities for family activities</td>
<td>- No charge for participation</td>
<td>▪ Develop a resource directory for both agencies/organizations and for the general public</td>
</tr>
<tr>
<td>▪ Rotate specialties through the County (possibly using the space opening near the medical center)</td>
<td>▪ Festivals and involvement by social organizations in the area</td>
<td>▪ Incentives (including capital to refurbish) for people to provide services</td>
<td>▪ Improve the educational level and work on the culture of the area to reduce suspicion of services and increase their use</td>
</tr>
<tr>
<td>▪ Partner with hospitals to expand services into the area</td>
<td></td>
<td>▪ Support volunteer organizations to help people in need</td>
<td>▪ Patient advocate</td>
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<tr>
<td>▪ Add new facilities</td>
<td></td>
<td>(particularly housing and utilities), such as Ruritans and BOP (Beautiful Older People) program</td>
<td>▪ Car donations</td>
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<tr>
<td>▪ Expand the Dinwiddie Medical Center</td>
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<td>▪ Transitional living (affordable housing) for people coming from institutions (mental health, prison, etc.)</td>
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<td></td>
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<td>▪ Employment assistance</td>
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<td></td>
<td>▪ Programs to assist fathers in supporting their children without incarcerating them</td>
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Overview – Effective Ways to Meet Health Care Needs

While a range of ideas and options were presented relative to what would be most effective in meeting the identified health care needs, the areas of greatest support appears to be:

- Greater coordination and collaboration between service providers, county governmental entities, and faith-based and other organizations;
- Increase education of county residents regarding available resources and improve interaction of residents, potentially through community events; and
- Support development of additional resources, i.e., more health care and daycare providers, community center and recreational facilities.

The faith group was particularly interested in partnering to develop a comprehensive community center or two and community events to provide needed services while building community cohesiveness. The education group took a more holistic view of the health care needs of the community. This group felt there was a need to expand recreational activities and to include whole family learning opportunities. For example, while children were involved in team sports practices or other activities, financial literacy or jobs skills programs could be offered to the parents. The business group highlighted opportunities to work with providers outside the County to rotate specialists or bring needed services. The health group specifically advocated for the education of the community about the County’s needs, resources, and gaps. Overall, a need was noted for new facilities or expansion of facilities to meet the needs identified.
8. What are the biggest barriers or gaps to meeting these health-related needs?

| Business                          | Funding is an issue  
|                                  | The area and the governing body have a reputation of being against change, but this perception is changing and there is more interest in growth  
|                                  | The infrastructure is not present to attract new people or new services to the area (5)  
|                                  | The lack of space and people are a limit to growth in the area  
|                                  | Lack of hotels and restaurants  
|                                  | Lack of public utilities development; the water lines limit growth extensively  
|                                  | The area and the governing body have a reputation of being against change, but this perception is changing and there is more interest in growth  
|                                  | The lack of space and people are a limit to growth in the area  
|                                  | Lack of hotels and restaurants  
|                                  | Lack of public utilities development; the water lines limit growth extensively  

| Education and Youth              | Funding  
|                                  | Uninvolved community members (2)  
|                                  | Uninvolved parents  
|                                  | Transportation  
|                                  | Physicians don’t want to come to the country to practice  
|                                  | Churches don’t always work together, thereby offering less to the community  
|                                  | Need more skilled volunteers who will be consistent  
|                                  | Facilities and operational resources  

| Health and Human Services        | Education on what services are available and how to use them  
|                                  | Lack of trust in the system (afraid that asking for help will cause them to lose what they currently have)  

Overview – Biggest Barriers to Meeting Health Care Needs

A range of barriers or gaps to meeting health-related needs were mentioned, often reflecting the perspectives of the individual groups. For example, the business group cited the lack of infrastructure to attract new people or services, such as public utilities and commercial businesses. The education and faith groups identified barriers as being uninvolved community members or not having enough skilled volunteers. This may be because no formal outreach or structure to recruit and place volunteers exists, with the exception of the part-time grant-funded volunteer coordinator at Social Services. Participants explicitly mentioned the lack of funding for needed services and initiatives and the impact of limited structure or limited trust (relative to both physical and human capital) to support change, as other existing barriers to meeting health care needs.

While many of these barriers are not unusual for rural communities, other rural areas have very actively involved community members and volunteers. Some of this has been fostered by active volunteer recognition (e.g., an annual dinner, recognition at Supervisors’ meetings) and publicity about volunteer opportunities by the County government.
9. What initiatives are currently underway to meet other human service needs in the County? What are the biggest barriers to meeting these needs?

<table>
<thead>
<tr>
<th>Category</th>
<th>Initiatives</th>
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<tbody>
<tr>
<td>Business</td>
<td>Dinwiddie Medical Center</td>
</tr>
</tbody>
</table>
| Education and Youth          | Integrating new members of the community into the area can be challenging at times (2)  
                               | Most of the large land owners do not have children  
                               | Not everyone wants to further develop the community  
                               | Limited hours for the recreation center  
                               | Health fair  
                               | Dinwiddie Medical Center                                                                                                                                 |
| Faith and Civic              | Some volunteer nurses and EMS and other volunteers assist with health care and housing support (to modify for handicapped access) to church members, but there are no formal programs (2)  
                               | Volunteer transportation assistance created liability concerns  
                               | School facilities are new  
                               | Recently constructed sports facility  
                               | Medical training/CPR initiative through Olive Branch Baptist  
                               | Used to have “community day” which had wide participation; gave away food, clothes, shoes, etc.; had health screenings, IRS assistance and food was served  
                               | Initiative to combat vandalism but didn’t see specific results                                                                                                                                 |
| Health and Human Services    | County programs in place to help people with basic needs, employment, and health care but people are not always willing to accept help  
                               | Volunteer coordination (part-time) through a Cameron grant  
                               | Need facilities space for senior activities and education training  
                               | Accessible transportation is needed  
                               | Need to advertise social group activities better and decrease exclusivity                                                                                                                                 |

Overview –Current Initiatives to Meet Community Needs

The most frequently cited initiatives involved new facilities in the County such as:

- Dinwiddie Medical Center (a federally qualified health center which received federal money to build a new facility)
- The Sports Park
- Schools

There is support for expanding the hours and uses of the County’s current facilities and transportation resources to meet the needs of the community. In particular, the recreation
center’s limited hours was frequently mentioned as a concern. Greater use of volunteers to work at the center with paid staff was one suggestion to expand the hours.

One initiative that was mentioned by the health group that has been particularly successful has been a part-time volunteer coordinator at Social Services (funded through a Cameron Foundation grant). There was strong support for making that job full-time and recruiting volunteers for all organizations in the County. While a formal program does not exist, the faith group noted that some nurses, EMS staff, and other volunteers assist with health care and housing support for church members, including modifying homes for handicapped access. The schools offer an annual health fair and would welcome broader support from church groups and other community organizations. At least one of the churches used to have “community day” which had wide participation – the church gave away food, clothes, shoes, etc; health screenings and tax assistance was provided and food was served, but it was discontinued due to the impact of the recession on the church’s resources.

As with many rural communities, transportation continues to be a barrier in this community. Focus group participants indicated attempts have been made by the County to address transportation challenges in the community through a cooperative venture, but most participants were unclear of the specifics of this initiative.
### 10. What role could or should The Cameron Foundation play in meeting priority health-related needs?

| **Business** | - Provide resources to develop capacity  
- Expand charter bus services in the area for group events; partner with the County government to provide transportation  
- Start small and build into something larger  
- Work with the school system to find sustainable funding  
- Work with the school system (3rd through 8th grade) to get afterschool activities and childcare programs in place (emphasis on financial and job skills programs is advised)  
- Increase access to specialists and primary care physicians  
- Provide adult literacy programs |
| **Education and Youth** | - Currently do a good job allowing grantees to network among each other; more opportunities to communicate ideas and share resources would be desirable (2)  
- Funding for all the noted needs  
- Support a volunteer coordinator position for the community  
- Could offer grants in smaller amounts for more basic needs (like a scholarship program for parents looking for youth programs or a mini educational program type grant)  
- Help the Dinwiddie area understand the needs of the people  
- Develop daycare providers |
| **Faith and Civic** | - Promote collaborations between non-profits, including churches (3)  
  - Formalize a committee to coordinate benefits between organizations  
  - Convene area churches to formalize a non-profit for the community, use pro bono legal  
  - Provide education and forum for the collaboration  
  - Funding for initiatives  
- Address needs that other organizations can’t meet  
- Encourage churches to refer physicians and nurses to start businesses  
  - Provide capital for facilities  
  - Scholarships for area students  
- Support development of a comprehensive community center in the County – public swimming, courts, afterschool programs, etc. |
| **Health and Human Services** | - Develop a general guide to sharing resources and connections in the community to inspire communication  
- Have a volunteer coordinator grant through the foundation |
Overview – The Role of The Cameron Foundation

The Cameron Foundation currently is seen as taking a role in supporting and convening interaction among potential grantees to encourage partnership and collaboration on initiatives that are brought to its attention.

The potential role for the Foundation in meeting health and human services needs in the County are to:

➢ Facilitate opportunities for greater collaboration between and among non-profit and faith-based organizations in the County;
➢ Provide resources to develop capacity, such as supporting a full-time volunteer coordinator for the County; and
➢ Support the development of a comprehensive community center and afterschool educational and recreational programs.

Funding initiatives and/or assisting in the development of sustainable funding for identified needs, such as transportation, scholarships (for education and activity participation), health care provider recruitment, and adult literacy (including financial literacy) were also mentioned as possible roles for the Foundation.

The faith community representatives were particularly interested in the Foundation facilitating the development of a faith-based non-profit collaborative to address needs that are currently not being met by other organizations in the community, such as programs for youth and a community center. Both the education and health groups were very supportive of a full-time volunteer coordinator for the County to build sustainable capacity to address community needs. The business community cited the opportunity for the Foundation to work with the school system to develop needed programs, such as afterschool and other educational programs, with daycare program development also being noted by the education group. Finally, both the business and faith groups see a role for the Foundation in recruiting and/or providing capital to attract health care providers to the County.
11. What other organizations/entities should be involved in addressing priority health-related needs and what role should they play?

<table>
<thead>
<tr>
<th>Business</th>
<th>Did not have time to address this question</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education and Youth</td>
<td>Board of Supervisors</td>
</tr>
<tr>
<td></td>
<td>Chamber of Commerce</td>
</tr>
<tr>
<td></td>
<td>School Board</td>
</tr>
<tr>
<td></td>
<td>Church groups and other social organizations</td>
</tr>
<tr>
<td>Faith and Civic</td>
<td>Greek organizations and social clubs from Virginia State University – student and faculty support for initiatives (including southern end of the County)</td>
</tr>
<tr>
<td></td>
<td>Richard Bland College and community colleges – student and faculty support</td>
</tr>
<tr>
<td></td>
<td>Faith organizations – provide holistic approach to needs, source of referrals</td>
</tr>
<tr>
<td></td>
<td>Board of Supervisors – leadership</td>
</tr>
<tr>
<td></td>
<td>Chamber of Commerce – success and growth of business</td>
</tr>
<tr>
<td></td>
<td>Judicial system – know needs and appropriately place those convicted and released (e.g., facilities with mental health supports or work training)</td>
</tr>
<tr>
<td></td>
<td>School system – provide facilities (make available for youth programs); keep technical center open</td>
</tr>
<tr>
<td>Health and Human Services</td>
<td>County Administrator’s office</td>
</tr>
<tr>
<td></td>
<td>Sheriff’s Department</td>
</tr>
<tr>
<td></td>
<td>4-H group</td>
</tr>
</tbody>
</table>

Overview – Role of Other Organizations

Only three of the groups had time to address which other organizations/entities should be involved in addressing priority needs. Those that were cited and the role they should play generally are:

- County government officials (Board of Supervisors and/or County administration) – leadership and some financial support
- Chamber of Commerce – professional skills and employment development
- Educational representatives – students and faculty for skilled volunteer help, facilities, leadership by institutional leaders
All of the groups who addressed this question noted the need for County government to be involved, as a critical path to successful change. The Chamber of Commerce, schools and churches were also seen as playing a role by the education and faith communities and the area of criminal justice was cited by both the faith and health groups. Specifically mentioned was the County Sheriff’s Department, churches, and social organizations providing information about the residents’ needs and assisting in appropriately coordinating resources. The faith group identified area colleges as being able to provide student and faculty volunteers who can assist with addressing County needs.
### 12. Is there any other information or input that you think would be helpful to this assessment?

<table>
<thead>
<tr>
<th>Business</th>
<th>▪ There are opportunities to expand and develop the use of the sports complex (parks and recreation dept.)</th>
</tr>
</thead>
</table>
| Education and Youth | ▪ Need summer programs  
                      ▪ Head Start may need financial assistance  
                      ▪ More connected community that uses different groups to develop opportunities for the community  
                      ▪ No affordable housing communities in the area |
| Faith and Civic   | ▪ Big need for activities to meet the diverse and dispersed geographical areas of the County  
                      ▪ Hold an educational and discussion forum with area clergy, including information on how to apply for 501(c)(3) status  
                      ▪ Often pastors feel that they've told government, etc. about needs and nothing gets done  
                      ▪ Dinwiddie and vicinity churches – have been organized by Olive Branch Baptist Church on Boydton Plank Rd. |
| Health and Human Services | ▪ Get a Care-a-Van to come into Dinwiddie  
                                ▪ Telemedicine program  
                                ▪ Reduce the stigma against accepting help and enrolling in programs  
                                ▪ County sponsored adult daycare  
                                ▪ Education class on how to stretch your food stamp dollar and education on nutrition  
                                ▪ Education on household cleaning |

**Overview – Additional Information**

Most of the additional information provided by participants included specific needs or ideas to meet needs previously mentioned, reflecting some of the energy developed around possibilities for the County’s future.
Summary

The Foundation’s 2008 community Health Needs Assessment found that Dinwiddie had the greatest percentage of residents 45-64 years of age of all localities within the Foundation’s service area and a high percentage of adults not participating in physical activity. In addition, the County had a high percentage of both children and individuals living in poverty, resulting in a large percentage of children receiving free or reduced price lunches. The data reinforces the comments from the focus groups that note the need for accessible and affordable recreational and enrichment activities, particularly for children and youth, and employment assistance for their families.

The assessment reported that Dinwiddie had the highest inpatient discharge rate for black persons and for those 65-74 years, when compared to the other localities in the Foundation’s service area. The County had the second highest age adjusted death rate due to diabetes and the highest percentage of adults having been diagnosed with diabetes. Dinwiddie also had a high overall age-adjusted death rate and death rates due to heart disease and cancer. Relative to health screenings, the County had the greatest percentage of women having not received a screening (PAP) test for cervical cancer and a large percentage of men over 50 not being screened for prostate cancer. The focus group participants identified the need for additional health care providers in the community, particularly primary care related physicians, a lack of which can contribute to high inpatient discharge rates and premature deaths due to chronic disease and inadequate screenings. In spite of the high discharge rate for black persons and the implications that it has relative to their access to community based care, it is interesting that there was not specific mention of the needs of black residents in the County during the focus group interviews. But, since black persons are disproportionately impacted by a poor economy, references to those with economic needs may be inclusive of those issues specifically impacting black residents. Moreover, references were made to the needs of those in the southern versus the northern end of the County which may reflect the differences in relative racial representation between those two areas.

The assessment also found that Dinwiddie had a large percentage of adults with no health insurance coverage, who were unable to receive health and dental care when needed (in spite of having an adequate percentage with dental insurance), and who were unable to receive needed mental health services. While the need for health insurance was cited only by the business and faith communities, almost universal coverage of children due to the children’s health insurance program (FAMIS in Virginia) and the broader eligibility to some public health care providers may mask this issue from educational and public health and human services providers. The lack of dental and mental health providers was cited by all the focus groups at
one time or the other. This is a problem that many rural communities have but some rural areas have instituted “best practices” relative to recruiting providers, such as funding the education of local youth or providing low interest loans to providers in return for a period of service in the community.

Dinwiddie County’s rural environment and strong community roots are the attributes that bring people here to live or work and keep native residents in the County. However, Dinwiddie’s rural, geographically dispersed topography is also seen as the biggest barrier to meeting the health and human service needs of its residents and establishing the physical and human infrastructure to meet those needs.

Part of the solution, based on the input from focus group participants, appears in developing mechanisms to bridge the geographic divide and meet the identified needs of County residents, including:

- **Community Organizational Development** - creating structured opportunities for collaboration and coordination between and within the faith, non-profit, business, and governmental sectors to develop and support priority initiatives;

- **Community Development** – supporting opportunities for County residents to volunteer their time and talents for community improvement and for children, youth and families to participate in educational, cultural and social activities. These may include:
  - A full-time volunteer recruiter/coordinator for the County
  - An annual community festival with information about resources, screenings, food, games, etc. that is well publicized and involves a variety of community organizations and volunteers
  - No or very low-cost recreational opportunities and summer activities in convenient locations
  - A community center(s) with extended after school hours providing a gym, indoor swimming, educational support, and traditional and non-traditional enrichment activities

- **Transportation** – examining how existing community resources (such as church vans, volunteers, school buses, Area Agency on Aging vehicles, and the area’s transportation service) and any new resources can be used effectively, particularly by children, youth and older adults, to get to activities, medical appointments, and other needs;
Health-related Services Development – supporting the development of:

- Increased supply of primary, specialty and urgent care providers;
- Mental health and dental services for all ages;
- Parenting support, including employment, financial and daycare supports; and
- Care options for older adults.

The Foundation is viewed as a potential resource to assist in helping with these identified needs by:

- Facilitating meetings of community organizations and providing content experts, as appropriate, to develop informal and formal collaborations to address needs;
- Funding and/or supporting the development of sustainable funding for initiatives to meet priority needs; and
- Providing or influencing leadership to promote greater cooperation and support in meeting community needs.

Other organizations/entities that should be involved in addressing priority needs and the role they should play generally were cited as:

- County government officials – leadership and some financial support
- Chamber of Commerce – professional skills and employment development
- Educational representatives – students and faculty for skilled volunteer help, facilities, leadership by institutional leaders
- Criminal justice, churches, etc. – know needs and can assist in appropriately meeting those needs

Dinwiddie County’s potential for constructive growth and development was noted by several of those who participated in this assessment. Addressing the County’s health and human services needs was identified as key to that growth and development. A big thank you is extended to those County residents and employees who have provided critical information and potential solutions for the County’s future and their willingness to actively participate in resulting initiatives.