

# Community Social Vulnerability Insights

## Case Study: Roanoke County

Roanoke County in Virginia is comprised of 130 block groups with **76 high-risk block groups**. **58.5%** of Roanoke County block groups have high social vulnerability.

The high-risk block groups share the following **distribution of drivers**:

- 60.5% mental health access disparity
- 28.9% above average particulate matter in the air
- 23.7% high rates of poverty
- 19.7% low access to medical transport
- 9.2% low access to community services

Roanoke County – Social Vulnerability Drivers	Number of Block Groups (%)
Mental health disparity: Low concentration of behavioral health facilities	46 (60.5%)
Above average particulate matter contributing to air quality	22 (28.9%)
Low percentage of individuals with recent income above the poverty line	18 (23.7%)
Transportation disparity: Low concentration of medical transportation services	15 (19.7%)
Community health disparity: Low concentration of community services	7 (9.2%)
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### Community Health Needs Assessment: Top Needs

#### Mental Health:

- Access to mental/behavioral health services
- Access to substance use services
- Alcohol and drug use
- Mental health problems (general)

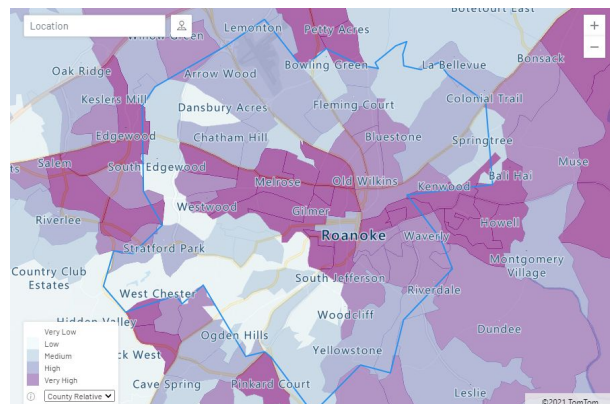
#### Socioeconomic Factors

- Poverty/low average household income
- Affordable/safe housing
- Transportation/transit system
- Lack of family/social support systems

#### Primary Care: Access to primary care

**COVID-19:** COVID-19 impact

Community needs line up well with the Community Health Needs Assessment (CHNA), but impact varies by block group, **indicating a need for a more granular action plan.**



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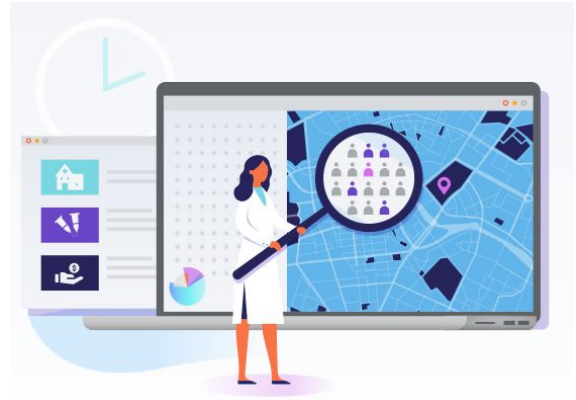
### Brookside/Plantation Court Area

Block Group ID: 511610302042

Neighborhood social vulnerability is a 5 (highest risk).

17% of the population is 17 years old or younger

26% of the population is 65 years old or older



#### Top Ten Risk Factors

1. Below median rate of preventative screening: Mammogram (50-74 years)
2. Mental health disparity: Low concentration of behavioral health services
3. Physical health disparity: Low concentration of rehabilitation and restorative services
4. Transportation disparity: Low concentration of medical transportation services
5. High prevalence of cancer (excluding skin cancer)
6. Home care disparity: Low concentration of home health services
7. Speech and language disparity: Low concentration of speech and language services
8. Acute care disparity: Low concentration of hospitals
9. Above average particulate matter contributing to air quality
10. Average percentage of individuals with recent

#### Granular Approach

- Low access to family therapist makes sense given the number of children and since there is a retirement and adult day care in the area. Family therapy for children caring for parents also makes sense as a need.
- Particular rehab service was respiratory therapist which makes sense given the air quality risk and age distribution
- Non-medical transportation being limited is a concern, but may be mitigated by services for the retirement home
- Despite having a number of hospitals in Roanoke they are all on the other side of the city meaning there may be delays in urgent/emergent situations
- Particulate air quality is likely related to traffic at the crossroads and is concerning near schools and elder care centers
- An average percentage of individuals above the poverty line means an average number of individuals below that poverty line which is a risk
- Mental health services, transportation and access programs, and air quality programs (especially indoor air quality at the school and elder care centers) are needed

