



## 2025 COMMUNITY NEEDS ASSESSMENT



Approved by  
Skyline CAP Board of Directors  
November 18, 2025

## Table of Contents

Board of Directors Approval .....	1
Executive Summary .....	2
Acknowledgements .....	3
Introduction.....	4
Methodology .....	4
Agency Overview .....	5
Target Population .....	5
Service Area .....	5
Skyline CAP Programs .....	6
Head Start.....	6
Healthy Families .....	6
Housing.....	6
Project Discovery.....	6
Demographic Data .....	7
Population Trends .....	7
Population Growth by County .....	7
Population Growth by Age .....	8
Key Racial and Ethnic Trends in the U.S. ....	10
Population Estimates by Race .....	10
Population Estimates by Hispanic Ethnicity .....	10
Household Income.....	11
Federal Poverty Level .....	11
Living Wage .....	12
Poverty - All Ages.....	13
Financial Health .....	17
What It Takes to Raise a Family.....	19
Housing.....	20
Fair Market Rent.....	21
Affordable Rent .....	22
Housing Units .....	23
Evictions.....	23

Homelessness .....	24
Aging in Place.....	25
Education.....	27
Early Childhood Education .....	27
High School Graduation and Drop-Out Rates.....	30
Educational Attainment.....	31
Health & Wellbeing .....	32
Health Outcomes and Access .....	32
Food Security and Nutrition .....	35
Economic/Infrastructure .....	39
Employment by Industry .....	39
Unemployment.....	40
Transportation.....	40
Broadband Access .....	41
Children & Youth .....	43
Child Care.....	43
Healthy Families .....	44
Foster Care .....	44
Conclusion .....	46
Community Resources.....	48
Appendices .....	50
Appendix A: Demographic Data Tables .....	50
Appendix B: Surveys .....	65
Appendix C: Skyline CAP Client Demographics .....	97
References .....	100

## Board of Directors Approval

This Community Needs Assessment was formally reviewed and approved by the Skyline CAP, Inc. Board of Directors on November 18, 2025. The Board's approval affirms that the assessment accurately represents the needs of low-income individuals and families within Skyline CAP's service area and will guide future strategic planning and resource allocation.

### Skyline CAP Board of Directors

**OFFICERS** | **Rebecca Phillips**, President  
**Russell (Rusty) Burwell**, Vice President  
**Frank Berry**, Treasurer  
**Kerri Banks**, Secretary

**BOARD** | **Cassandra Baker**  
**MEMBERS** | **Kate Duvall**  
**Christine Inscoe**  
**Anne Jewett**  
**David Minor**  
**Sky Muller**  
**Kathryn Thomas**  
**Kelly Thornton**  
**Alisha Vines**  
**Peter Work**

## Executive Summary

The 2025 Community Needs Assessment conducted by Skyline Community Action Partnership (Skyline CAP) provides a comprehensive analysis of the conditions driving poverty across Greene, Madison, and Orange counties. Using both quantitative data and community input from survey responses, focus groups, and stakeholder interviews, the assessment identifies the most pressing needs facing low-income households in the region.

Findings consistently highlight four priority areas:

- **Affordable Housing** – Rising rents, limited supply, and long waitlists leave many families cost-burdened and at risk of eviction.
- **Child Care** – A shortage of affordable, quality child care—especially for infants and during nontraditional hours—creates barriers to employment and financial stability.
- **Food Security** – Many families rely heavily on food pantries and charitable resources, underscoring the need for more sustainable solutions to hunger.
- **Transportation** – Limited and costly options restrict access to jobs, healthcare, and essential services, particularly in rural communities.

These interconnected challenges undermine economic mobility and community well-being. Skyline CAP will use these findings to guide strategic planning, strengthen partnerships, and direct resources where they are most needed. By amplifying community voices and addressing systemic barriers, Skyline CAP remains committed to fostering equity, opportunity, and resilience so that every resident has the chance to thrive.

## Acknowledgements

Skyline CAP, Inc. extends its sincere appreciation to all those who contributed to the development of this Community Needs Assessment. The insights and collaboration of our community partners, staff, and residents were invaluable in identifying needs, priorities, and opportunities across the region.

### Community Needs Assessment Taskforce

The Community Needs Assessment Taskforce guided the design, data collection, and review of this report. Their diverse perspectives ensured that the findings reflect the lived experiences and priorities of individuals and families throughout Skyline CAP's seven-county service area.

#### Taskforce Members

- Kerri Banks, Teacher, Madison County Public Schools
- Christine Inscoe, Infant & Toddler Connection, Encompass Community Supports
- Anne Jewett, Associate Professor, The University of Virginia
- Beckie Phillips, Retired Educator, Orange County Public Schools
- Peter Work, Retired Attorney

#### Skyline CAP Staff Contributors

The following staff members served on the Community Needs Assessment Taskforce and contributed to planning, community outreach, data analysis, and report development and production:

- Simon Fiscus, Executive Director
- Peggy Hobbs, Marketing & Resource Development Manager

Skyline CAP also acknowledges the contributions of community partners, local agencies, clients, residents, and staff who shared their time and perspectives through surveys, interviews, and focus groups. Their input was essential in identifying strengths, needs, and opportunities across the region.

## Introduction

Skyline CAP, incorporated in 1990, is a nonprofit Community Action Agency (CAA) designated by the Governor of Virginia and approved by the localities it serves to provide resources that address poverty. The agency offers education and housing programs that empower families and individuals to achieve self-sufficiency. Skyline CAP serves Greene, Madison, and Orange counties, with select programs extending to Fauquier, Page, Rappahannock, and Warren counties.

Regular community needs assessments allow Skyline CAP to identify the causes and conditions of poverty, evaluate available resources, and pinpoint gaps in services. These assessments ensure that programs are responsive to community needs, guide strategic planning, and provide valuable insights for stakeholders.

Skyline CAP applied Results-Oriented Management & Accountability (ROMA) principles, using data-driven methods to identify needs. The assessment incorporates both qualitative and quantitative data collected through surveys, focus groups, interviews, and secondary research, with clients, community members, staff, and partners providing input on the most pressing needs in their communities. Findings from this process will inform program development, goal setting, and accountability in serving low-income individuals and families.

## Methodology

Skyline CAP utilized a combination of primary and secondary data sources to complete this assessment, ensuring a comprehensive understanding of community needs.

**Primary Data Collection:** Surveys were distributed to community partners, members, and clients to capture informed opinions on the community's most pressing needs. Survey questions focused on eight key areas of concern: housing, transportation, child care, food security, education, employment, physical/mental health, and financial health. Surveys were distributed via email, social media, and paper copies through local partners to maximize participation. A total of 179 responses were received, including 122 from community members and 57 from partners.

To supplement survey data, Skyline CAP conducted a focus group and key informant interviews with community partners who engage daily with low-income residents. These discussions provided nuanced insights into local challenges, barriers to access, and opportunities for service improvement.

**Secondary Data Collection:** Secondary data was gathered from a variety of reputable sources, including U.S. Census Bureau and American Community Survey data, labor statistics, public health records, school reports, and other local, state, and federal databases. This information provided a broader context for understanding demographic trends, socioeconomic conditions, and service gaps in the communities served.

The Marketing & Resource Development Manager collected and analyzed primary and secondary data for the assessment, working closely with the Executive Director and incorporating input from program managers to draft the initial report. The Community Needs Assessment Taskforce, a group representing diverse perspectives across the agency and community, then reviewed the draft, confirmed the top priorities identified based on the findings, and submitted a final version to the Board of Directors for approval.

For 35 years, Skyline Community Action Partnership (Skyline CAP) has been providing resources to combat poverty in the counties of Greene, Madison, Orange and beyond. Our programs strengthen the counties we serve by providing people and families with access to education, housing and economic opportunities.

As a community action agency, Skyline focuses on supporting income-eligible individuals and households as defined annually by the Federal Poverty Level (FPL) Guidelines. However, we recognize that community needs extend beyond those classified as low-income. As a result, Skyline offers programs that are not exclusively tied to the FPL. For instance, our housing programs are designed to assist individuals and families identified by the U.S. Department of Housing and Urban Development (HUD) as low-income, including those earning 50 to 80 percent of the Area Median Income (AMI). By addressing broader community needs and enhancing economic vitality holistically, Skyline's efforts benefit everyone.

Skyline CAP is the designated community action agency providing comprehensive services for low-income families in our primary service area of Greene, Madison and Orange counties. Additional services are also provided in surrounding counties, as shown below.



\*Services discontinued September 2025



## Skyline CAP Programs

### Head Start

Skyline CAP's Head Start program offers high-quality preschool education that nurtures the whole child, fostering growth in language and literacy, cognitive skills, social-emotional development, and general knowledge. By preparing children for kindergarten and beyond, Head Start sets the foundation for a lifetime of learning and success, while actively engaging families in their child's educational journey.

Skyline CAP currently operates seven (7) Head Start classrooms: two (2) located in Greene County, two (2) in Madison County, one (1) in Page County, and two (2) in Warren County. Two (2) classrooms previously operated in Shenandoah County and one (1) in Page County were shut prior to the start of the 2025 school year to redirect funding to other priorities. The Head Start program in Orange County is operated separately by Orange County Public Schools.

### Healthy Families

Healthy Families is a nationally accredited home visitation program dedicated to supporting parents in building strong, nurturing relationships with their children. Through personalized guidance and resources, the program empowers families to create a safe and stable home environment, promoting healthy development and positive lifelong outcomes for children.

Skyline CAP offers its Healthy Families program in the counties of Fauquier, Madison, Orange and Rappahannock.

### Housing

Skyline CAP's housing initiatives address critical needs by providing services that ensure safe, stable, and affordable housing. These include group and one-on-one housing counseling, affordable housing options, rent assistance, and emergency home repairs. By addressing barriers to housing stability, Skyline helps families achieve security and build a foundation for a better future.

Housing services are offered primarily in Greene, Madison, and Orange counties. In addition, Housing Choice Voucher holders reside in surrounding counties, including Albemarle, Culpeper, Fauquier, Fluvanna, and Louisa, as well as the cities of Charlottesville and Fredericksburg.

### Project Discovery

Skyline's Project Discovery program provides educational outreach to public school students in Madison County that focuses on helping students overcome issues that might otherwise prevent them from graduating from high school. In addition, students are provided with resources and opportunities to explore options for life after high school. Alongside visits to colleges, universities, and trade schools, Skyline CAP uses an evidence-based curriculum designed to support the unique needs of the students enrolled in the program.

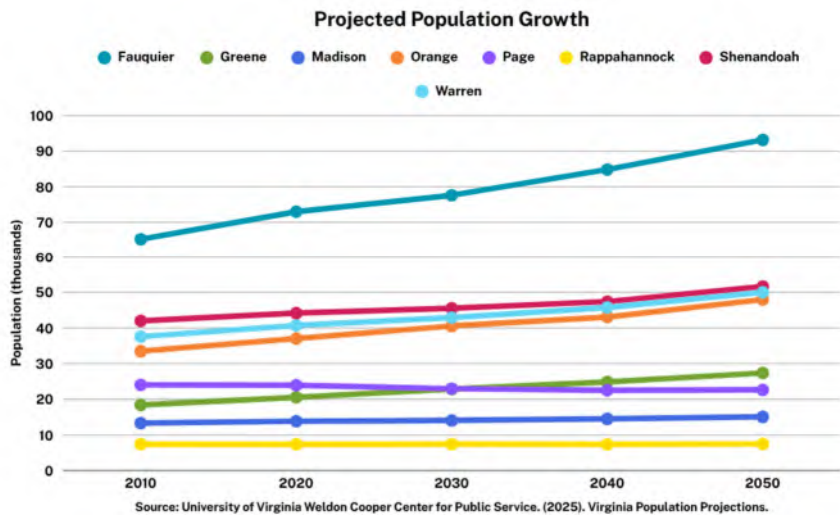
## Demographic Data

### Population Trends

The total population across the eight counties served by Skyline CAP is projected to grow by 21% between 2020 and 2050, increasing from 262,626 to 317,462 residents. This pace of growth is slightly faster than Virginia as a whole, which is projected to see a 20% increase over the same period. These projections are based on demographic forecasts developed by the University of Virginia's Weldon Cooper Center for Public Service, a leading authority on population trends and analysis in the Commonwealth.

### Population Growth by County

Among individual counties, **Greene County** is projected to see the fastest growth, with its population rising by 33% from 20,552 in 2020 to 27,366 in 2050. Much of this increase reflects the county's proximity to Charlottesville and its role in meeting the region's growing housing demand. **Orange County** follows with a 30% increase (37,051 to 47,995), while **Fauquier County** is also expected to expand significantly, adding more than 20,000 residents for a 28% increase (72,972 to 93,171). **Warren County**, with a projected 23% growth rate, will also outpace the statewide average, while **Shenandoah County** is projected to grow more modestly at 17%, from 44,186 to 51,666 residents.



In contrast, several counties are expected to experience much slower growth—or even decline. **Madison County** is projected to see only a modest 9% increase, rising from 13,837 in 2020 to 15,064 in 2050. **Rappahannock County** will remain nearly flat, with just 2% growth (7,348 to 7,467). Meanwhile, **Page County** is the only locality projected to lose population, declining by 5% from 23,933 in 2020 to 22,637 in 2050.

#### Key Takeaways:

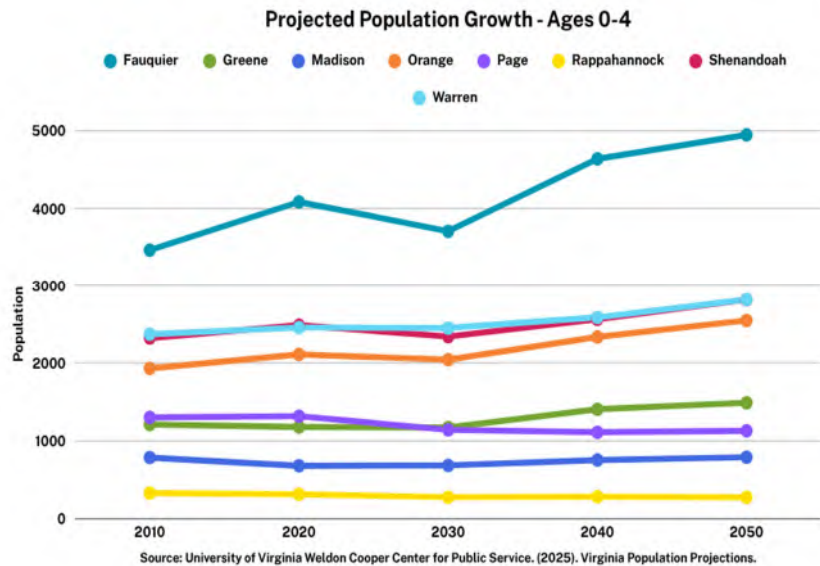
- **High-growth areas:** Greene, Orange, Fauquier, and Warren Counties will experience above-average growth, signaling potential needs for expanded housing, education, transportation, and community services.
- **Slow or declining growth areas:** Madison, Rappahannock, and Page Counties may face challenges tied to aging populations, outmigration, and sustaining community resources.
- **Regional comparison:** Overall service area growth (21%) slightly outpaces Virginia's statewide rate (20%), suggesting that Skyline CAP's region will remain a growing and dynamic part of the Commonwealth.

## Population Growth by Age

The population across the eight-county Skyline CAP service area is projected to grow unevenly by age group, with the most significant increases occurring among older adults. These shifts highlight important implications for education, workforce development, health care, and senior services.

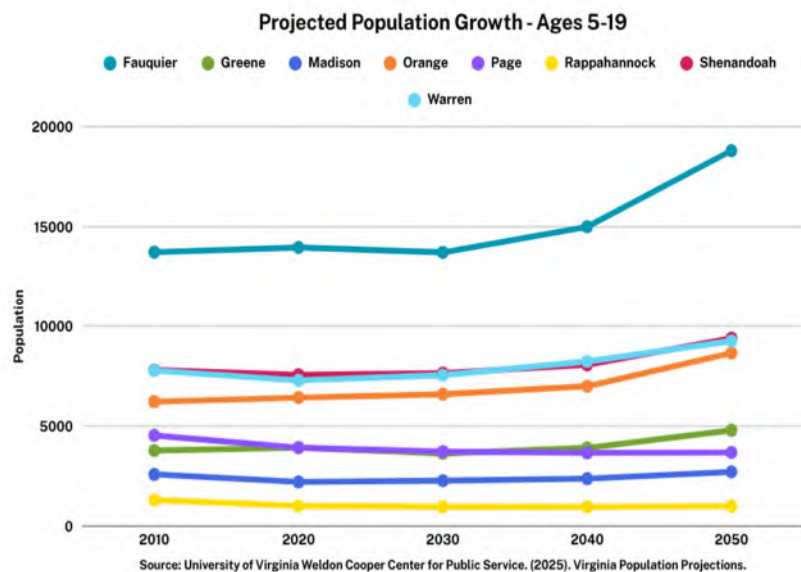
### Ages 0–4 (Preschool-age children)

- Overall growth is modest: 7% from 2010–2020 and a projected 15% increase by 2050.
- Some counties show decline or stagnation (e.g., Page -14%, Rappahannock -12% by 2050).
- Greene and Orange Counties show stronger growth (+26% and +21%, respectively).
- Implication: The number of young children is relatively stable, with pockets of growth, suggesting steady but not expanding demand for early childhood education and Head Start programs.



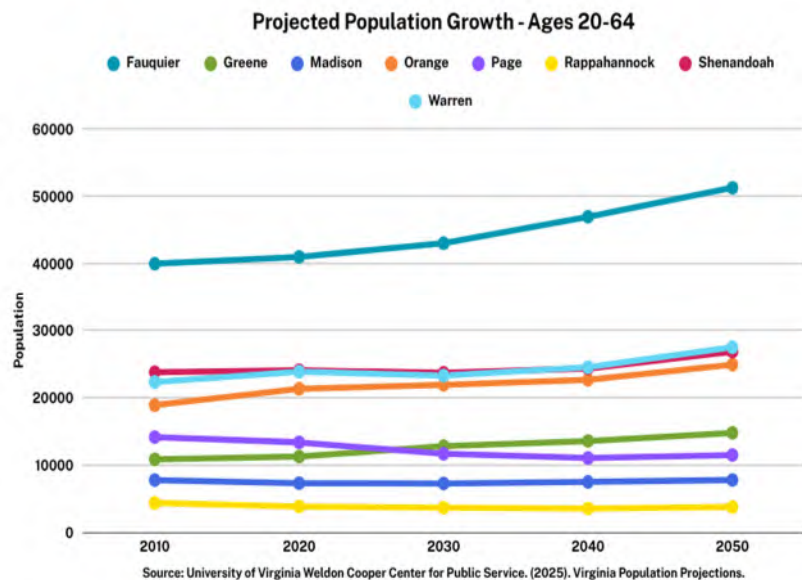
### Ages 5–19 (School-age children and youth)

- The region saw a 3% decline from 2010–2020 but is projected to grow 26% by 2050.
- Growth is strongest in Fauquier (+35%) and Orange (+35%); declines continue in Page (-6%) and Rappahannock (-1%).
- Implication: School systems will face uneven enrollment trends, with some counties requiring expanded capacity and others experiencing contraction. Youth-focused programs will need to be tailored to local conditions.



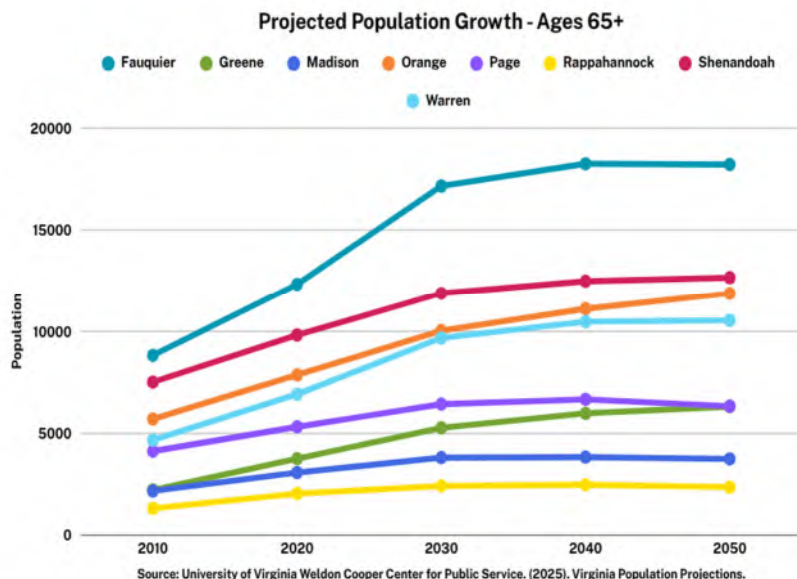
### Ages 20–64 (Working-age adults)

- Slow growth to date (+5% from 2010–2020) but projected to rise 15% by 2050.
- Notable growth in Greene (+31%), Fauquier (+25%), and Orange (+17%).
- Declines in Page (-14%) and Rappahannock (-2%) indicate long-term workforce challenges in those areas.
- Implication: Workforce development efforts will be critical, particularly in counties losing working-age residents. Housing and transportation policies may also influence retention.



### Ages 65+ (Older adults and seniors)

- The fastest-growing group: 40% increase from 2010–2020 and projected 41% growth from 2020–2050.
- Growth is especially strong in Greene (+68%), Warren (+52%), and Orange (+51%).
- Even counties with slower growth show substantial increases, reflecting national aging trends.
- Implication: Rising demand for health care, home care, senior housing, transportation, and caregiver support. This demographic shift will reshape service priorities across the region.



### Implications for Community Services

The projected population growth across much of the Skyline CAP service area signals an increasing demand for community services, especially in rapidly expanding areas like Greene, Fauquier, and Orange Counties. Growth in younger populations here will drive needs for child care, Head Start, schools, and youth programs.

In contrast, counties experiencing slow growth or decline—particularly Page, Rappahannock, and Madison—will need to prioritize services tailored to an aging population. For example, in Madison County the elderly population increased 41% between 2010 and 2020 and is projected to grow another 22% by 2050, even as overall population growth remains modest.

Across the region, the aging trend raises key concerns, including:

- Rising demand for healthcare services and providers
- Affordable, age-friendly housing and home repair programs
- Expanded assisted living and nursing home options
- Supportive services such as transportation, meal delivery, in-home care, and social engagement programs

Together, these shifts highlight the need for balanced planning: expanding early childhood and youth programs in high-growth counties while simultaneously strengthening senior services and healthcare infrastructure in areas with slower growth but rapidly aging populations.

### Key Racial and Ethnic Trends in the U.S.

Understanding the racial and ethnic makeup of communities is essential for identifying disparities, tailoring services, and ensuring equitable access to resources. Within Skyline CAP's overall service area, all counties are predominantly white, with limited racial and ethnic diversity. Counties with higher Hispanic/Latino populations, such as Fauquier, may benefit from bilingual services and culturally tailored outreach programs. Healthy Families supports this need with bilingual materials distributed to Hispanic and Latino families.

### Population Estimates by Race

	Population	American Indian	Asian	Black/African American	Pacific Islander	White	Two or More Races	Hispanic / Latino
<b>Fauquier</b>	75,165	1.4%	2.8%	9.5%	0.3%	89.3%	3.2%	13.2%
<b>Greene</b>	21,301	1.3%	2.9%	9.9%	0.2%	88.9%	3.2%	7.7%
<b>Madison</b>	14,128	1.2%	1.4%	10.5%	0.1%	89.6%	2.8%	4.3%
<b>Orange</b>	38,574	1.4%	2.2%	15%	0.3%	84.7%	3.4%	7.4%
<b>Page</b>	23,741	0.9%	1%	3.6%	0.1%	96.4%	1.9%	2.7%
<b>Rappahannock</b>	7,414	1.4%	1.9%	5.4%	0.2%	93.6%	2.5%	5.1%
<b>Shenandoah</b>	45,228	1.3%	1.6%	4.8%	0.2%	94.4%	2.2%	9.6%
<b>Warren</b>	41,843	1.5%	2.3%	7.3%	0.2%	91.9%	3.1%	7.9%

Source: U.S. Census Bureau, 2023 Population Estimates. Data formatted and posted at <http://demographics.coopercenter.org> by the UVA Weldon Cooper Center, Demographics Research Group.

According to the U.S. Census Bureau and research from organizations like the Pew Research Center, by the year 2050, the non-Hispanic White population is expected to decline as a percentage of the total population, potentially making up less than 50% of the U.S. population for the first time. The Hispanic/Latino population is projected to grow significantly, potentially reaching around 25-30% of the total population.

Asian and multi-race populations are also anticipated to grow while the Black/African American population is expected to remain relatively stable at around 13-15%.

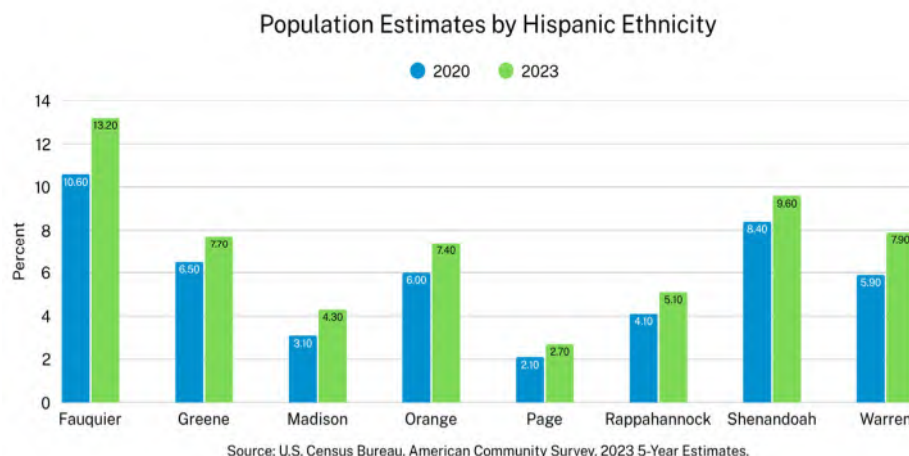
### Population Estimates by Hispanic Ethnicity

Between 2020 and 2023, the ethnic population within Skyline CAP's service area—covering Fauquier, Page, Rappahannock, Shenandoah, and Warren counties—grew significantly, reflecting a pattern of increasing diversity across the region.



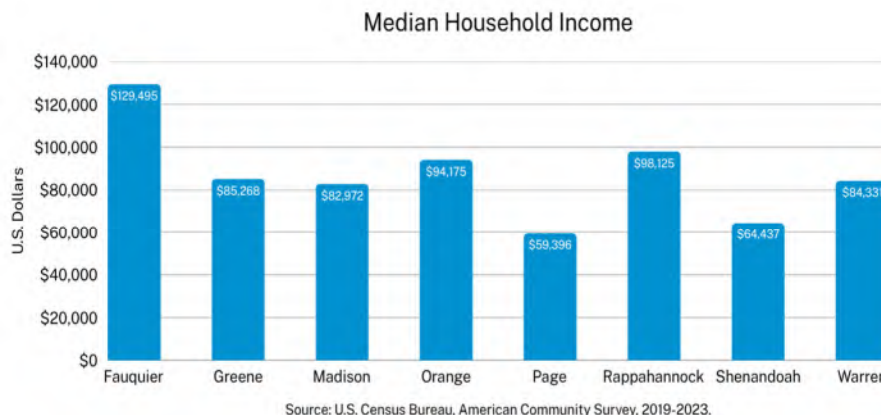
Combined, these counties saw their ethnic population rise from approximately 14,666 in 2020 to 18,614 in 2023, an increase of 26.9 percent. Fauquier and Warren counties accounted for much of this growth, together contributing over 60 percent of the regional increase. Shenandoah County also expanded, though at a slower relative rate, while Page and

Rappahannock experienced steady but smaller gains. Overall, the data indicate that Skyline CAP's service area is becoming more ethnically diverse, with both larger and smaller counties showing meaningful increases. This trend suggests continued diversification of the population base, underscoring the importance of culturally responsive community services and targeted outreach within the region.



## Household Income

Household income growth has been relatively stagnant for many low- and middle-income families over the past few decades, with real wage growth often failing to keep pace with inflation and rising costs of living. While high-income households have seen significant gains, lower-income families have faced slower wage increases, making it harder to build wealth and achieve economic mobility.



For low-income families, economic mobility is closely tied to factors such as access to quality education, job opportunities, and affordable housing. Wage stagnation, rising housing costs, and limited access to credit can make homeownership and wealth-building more difficult. Policies that promote fair wages, financial literacy, and access to affordable housing can help improve economic mobility for these families.

## Federal Poverty Level

The Federal Poverty Level (FPL) is the most widely used income measure for determining eligibility for government programs and benefits. Updated each year by the U.S. Department of Health and Human Services, the FPL sets uniform thresholds across multiple agencies. For example:

- Households earning up to 133% of the FPL may qualify for the Supplemental Nutrition Assistance Program (SNAP).
- The Affordable Care Act uses FPL guidelines to determine eligibility for health insurance subsidies.

### HHS Federal Poverty Guidelines – 2025

Household Size	100%	130%	200%
1	\$15,650	\$20,815	\$31,300
2	21,150	28,130	42,300
3	26,650	35,445	53,300
4	32,150	42,760	64,300
5	37,650	50,075	75,300
6	43,150	57,390	86,300
7	48,650	64,705	97,300

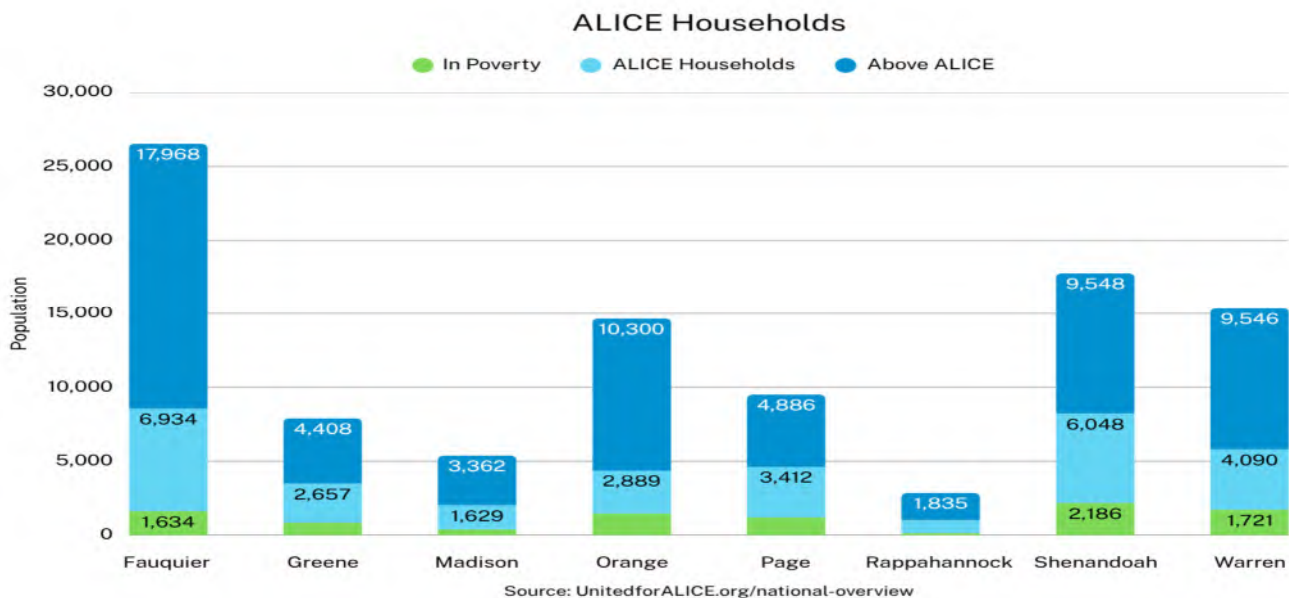
Source: U.S. Depart. of Health and Human Services. Office of the Assistant Secretary for Planning and Evaluation.

- Free and reduced-price school meals, as well as housing programs such as HUD’s Housing Choice Voucher Program, are also tied to FPL benchmarks.

While the FPL provides a standardized tool for determining program eligibility, it has serious limitations as a measure of financial hardship. Developed in the 1960s, the formula assumes food makes up one-third of a family’s budget—an outdated model given today’s higher costs for housing, child care, healthcare, and transportation. The FPL also fails to adjust for regional differences in the cost of living, leaving many struggling families underrepresented in official poverty data.

To capture this broader reality, researchers and community organizations use the ALICE framework—**A**sset **L**imited, **I**ncome **C**onstrained, **E**mployed. ALICE households earn above the official poverty line but still cannot meet the cost of basic needs in their communities. They are often working, sometimes at multiple jobs, yet remain one unexpected expense away from crisis because they lack savings or financial cushions. Unlike the FPL, ALICE measures reflect the true cost of living at the local level, showing that many families ineligible for assistance programs still face persistent financial insecurity.

### ALICE Households in Skyline CAP’s Service Area



The chart above reveals that at least one third of the households in the counties served by Skyline CAP are struggling to make ends meet – in some cases the number is closer to half.

For Skyline CAP’s clientele, the gap between FPL and ALICE is especially significant. Among households seeking services, 49.45% reported incomes at or below the FPL.

Addressing the needs of both groups requires more than safety-net programs. Expanded workforce training and employment supports are essential to help families move toward self-sufficiency. On-the-job training, apprenticeships, and targeted skill-building initiatives, paired with practical services such as resume writing, job search assistance, and interview preparation, can strengthen pathways to higher-paying jobs and greater financial resilience.

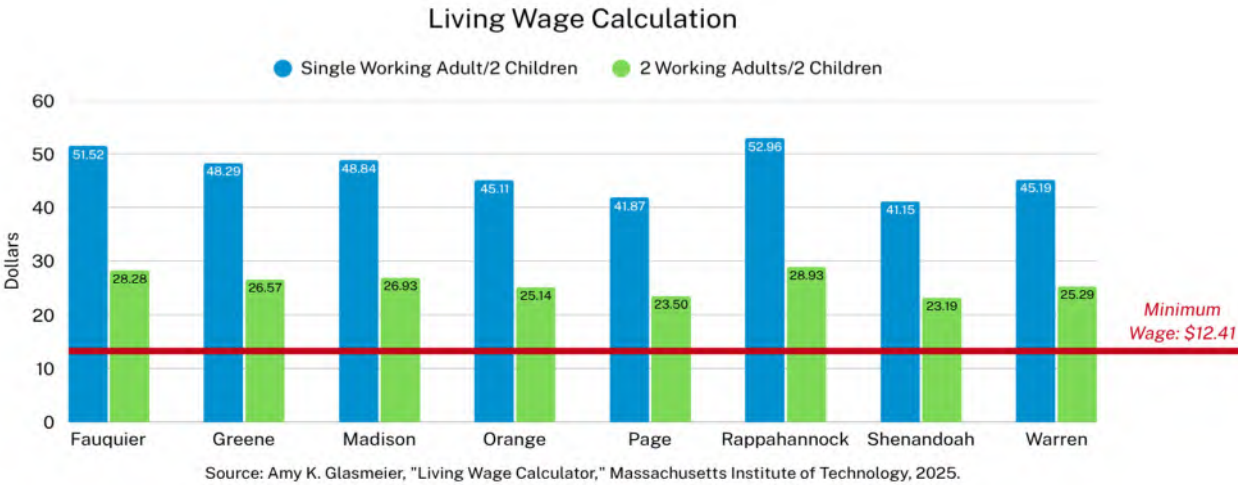
### Living Wage

A living wage is the minimum income necessary for a worker to meet their basic needs without relying on public assistance. These needs typically include housing, food, healthcare, transportation, child care, taxes and other

essentials. Unlike the minimum wage, which is often set by law and may not reflect actual living costs, the living wage is calculated based on the cost of living in a specific geographic area

The MIT Living Wage Calculator is a widely used online tool developed by Dr. Amy K. Glasmeier at the Massachusetts Institute of Technology. It is designed to estimate the minimum income a full-time worker needs to earn to meet basic living expenses without public or private assistance, based on their location and family composition. The living wage is the hourly rate that an individual in a household must earn to support themselves and/or their family, working full-time, or 2080 hours per year.

The chart below provides living wage estimates for households with one or two working adults and zero to three children. In households with two working adults, all hourly values reflect what one working adult requires to earn to meet their families’ basic needs, assuming the other adult also earns the same.

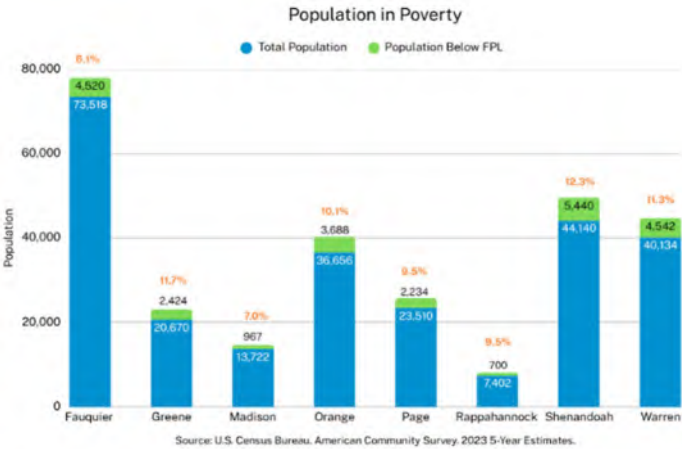


Implementing a living wage would help reduce poverty, improve health outcomes, and promote economic stability within communities. It is a key indicator of economic well-being and is often used to assess whether employment opportunities in a region are sufficient to support a decent standard of living.

Poverty - All Ages

In our service area, 24,515 individuals (9.7%) live at or below 100% of the Federal Poverty Level, slightly below the state average of 9.9%. Among them, 7,474 are children, while 3,691 are adults aged 65 and older. Poverty disproportionately affects women, with 10.8% of females living in poverty compared to 8.6% of males.

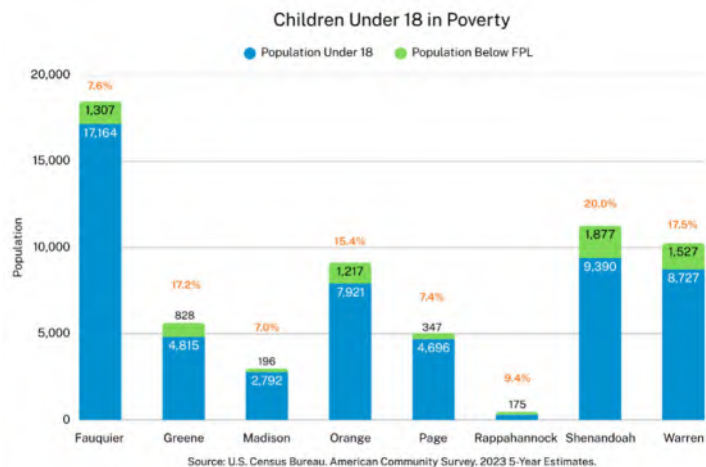
Poverty shapes nearly every aspect of daily life. Those living in poverty face persistent barriers to meeting basic needs, including stable housing, adequate nutrition, and access to healthcare. Limited employment opportunities and low wages contribute to ongoing financial instability, while the absence of benefits such as health insurance and paid leave further compounds economic vulnerability. Many individuals in poverty also experience restricted access to



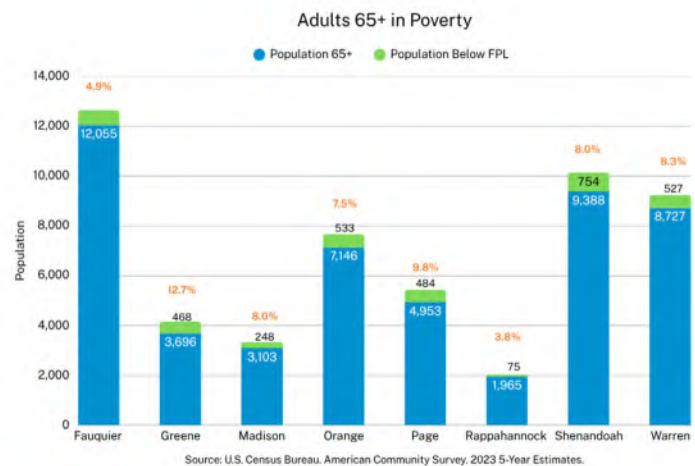


quality education and job training, which in turn limits opportunities for upward mobility and reinforces the cycle of poverty. Beyond material hardship, poverty often brings emotional and social challenges such as stress, isolation, and stigma, which can have lasting effects on mental health and community engagement. Structural inequalities—including disparities based on race, gender, and geography—further intensify these challenges for marginalized populations.

Children under the age of 18 who live in poverty are particularly vulnerable. Economic hardship during childhood can have lifelong consequences, affecting physical health, education, and emotional development. Children in low-income households often face food insecurity, inadequate healthcare, and limited access to high-quality early learning opportunities. Housing instability and lack of academic support can hinder school performance, while exposure to stress and adverse experiences may lead to long-term behavioral and mental health issues. The effects of childhood poverty frequently extend into adulthood, perpetuating an intergenerational cycle of disadvantage that is difficult to break without targeted interventions.

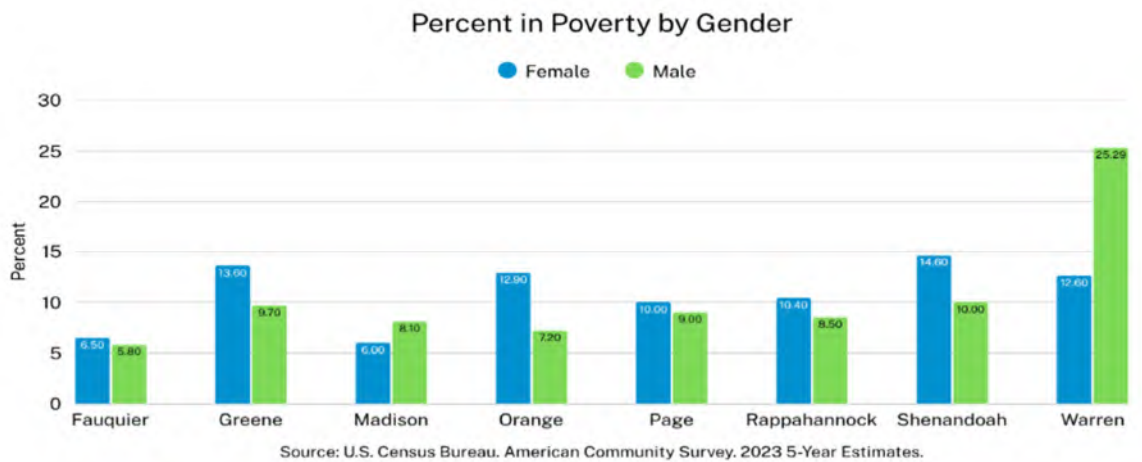


Older adults aged 65 and over living in poverty also face unique and compounding challenges. Many seniors rely on fixed incomes that do not keep pace with the rising cost of living, leaving little room for unexpected expenses such as medical bills or home repairs. Limited financial resources can force difficult choices between essentials like food, medication, and utilities. Health issues become more prevalent with age, yet access to affordable healthcare, transportation, and supportive services remains limited for many. Housing insecurity and social isolation are also significant concerns, particularly for seniors living alone or without strong family support networks. These factors increase vulnerability and reduce quality of life among older adults living in poverty.



## Poverty by Gender

Poverty in the community affects individuals differently based on gender. Across the region, women experience higher rates of poverty than men, reflecting national trends related to wage gaps, employment disparities, and caregiving responsibilities. Female-headed households, in particular, face a greater risk of economic hardship due to lower median incomes and limited access to affordable child care. Men also experience poverty, though at slightly lower rates, often linked to unemployment or underemployment in certain industries. Understanding these gender disparities is critical for designing programs that effectively support families and promote economic stability.



### Poverty by Race

Overall poverty varies a lot across Skyline CAP’s overall service area, from very low in Fauquier to noticeably higher in Warren. Because these counties are Majority-White, most people who are in poverty in absolute numbers are White – but where sample sizes allow, Black and Hispanic residents tend to have higher within-group poverty rates. At the rate level (percent of that racial group in poverty), national and state ACS analyses show higher poverty rates for Black and Hispanic people than for non-Hispanic Whites – so even if the largest number of people in poverty is White, the risk of poverty is often higher for people of color.

	White	Black / African American	Am. Indian / Alaska Native	Asian	Native Hawaiian / Other Pacific Islander	Some Other Race Alone	Two or More Races
<b>Fauquier</b>	6.2%	4.0%	12.6%	0.9%	0.0%	15.8%	6.3%
<b>Greene</b>	7.6%	38.4%	0.0%	5.1%	0.0%	48.7%	15.3%
<b>Madison</b>	6.7%	7.5%	0.0%	0.0%	0.0%	6.2%	11.3%
<b>Orange</b>	8.8%	21.5%	0.0%	4.6%	0.0%	0.0%	11.1%
<b>Page</b>	9.6%	16.2%	40.0%	37.8%	0.0%	7.5%	1.7%
<b>Rappahannock</b>	7.8%	48.6%	33.3%	0.0%	0.0%	5.5%	0.0%
<b>Shenandoah</b>	11.8%	36.3%	28.1%	2.6%	0.0%	23.6%	5.7%
<b>Warren</b>	11.1%	12.6%	0.0%	45.9%	0.0%	10.0%	6.5%

Source: U.S. Census Bureau, American Community Survey, 2023 5-Year Estimates. Table S1701.

In the table above, “Some Other Race Alone” refers to people in the U.S. Census who self-identify with a specific racial or ethnic group not included in the standard census categories and who do not report any other race or ethnicity. This category includes many individuals of Hispanic or Latino origin, as well as those with other specified racial identities, such as Middle Eastern or North African individuals, or those identifying as biracial or multiracial.

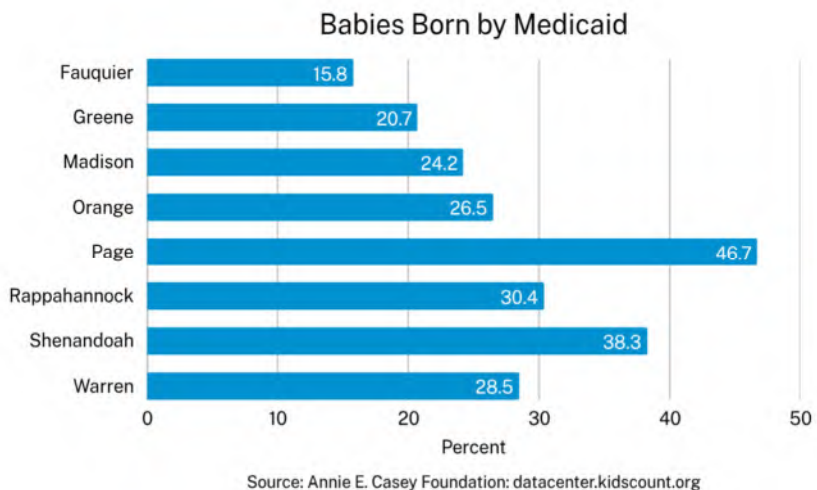
### Newborns in Poverty

Medicaid covers nearly half of all births in the U.S., ensuring that prenatal, delivery, and postnatal care are accessible to mothers who might not be able to afford private insurance. Medicaid also covers infant care for at least the first year of life. Studies show that Medicaid- covered births contribute to better maternal and infant

health outcomes compared to those without insurance. However, disparities in healthcare access, provider availability, and quality of care can still exist.

Anticipated cuts to Medicaid will have serious and far-reaching implications for maternal and infant health outcomes across the U.S., including reversing the progress made in reducing racial and ethnic disparities in

maternal and infant health outcomes, increasing maternal and infant mortality, especially in rural areas which are more likely to experience limited to no access to obstetric providers.



## Financial Health

Financial health remains a significant challenge for low-income households, as many struggle to cover basic necessities such as housing, food, and healthcare, leaving little room for savings or emergency funds. Limited access to affordable financial services often forces individuals to rely on high-interest loans, payday lenders, or other costly alternatives, further deepening financial instability. Additionally, strict eligibility requirements for public assistance programs can create barriers to building savings, as accumulating even a modest financial cushion may result in a reduction or loss of benefits. Without opportunities for financial literacy, asset-building programs, or livable wages, many families find themselves trapped in a cycle of economic hardship with little ability to plan for the future. Addressing these challenges requires a multi-faceted approach, including increased access to financial education, fair banking services, and policies that support long-term financial stability for low-income individuals and families.

A report from the Urban Institute indicates that 58% of families with children are financially insecure, meaning they lack adequate income to cover necessities and save for emergencies and retirement. According to a 2023 report by the Federal Reserve, 31% of adults could not cover three months of expenses by any means in the event of a job loss or similar financial setback. A 2025 survey found that 42% of Americans don't have an emergency savings fund, and nearly 40% couldn't cover a \$1,000 emergency expense with cash. Skyline CAP's survey asked respondents how they would pay for a sudden emergency expense of \$500. Thirty-five percent responded that they would put the expense on a credit card making payments over time, 24% would cover the expense from cash or money from checking/savings, 16% would ask family or friends for help, and nearly 12% said they didn't know how they would cover a sudden expense of \$500.

A key step toward financial health is establishing savings and banking. As shown in the table below, nearly 5% of the population in each county within our service area is either unbanked or underbanked. Underbanked individuals have a bank account but also depend on alternative financial services such as money orders, check-cashing services, and payday loans. This reliance exposes them to excessive fees, high finance charges, and predatory lenders who often target low-income individuals, those with limited financial education, and people in urgent need of cash.

### Estimates of Household Wealth and Financial Access

	Asset Poverty Rate	Liquid Asset Poverty Rate	Households with Zero Net Worth	Unbanked Households	Underbanked Households
Fauquier	12%	21%	8%	4%	12%
Greene	17%	15%	7%	4%	10%
Madison	24%	14%	4%	6%	11%
Orange	14%	27%	10%	4%	13%
Page	19%	36%	11%	4%	13%
Rappahannock	11%	18%	7%	4%	8%
Shenandoah	18%	33%	11%	4%	13%
Warren	17%	24%	8%	5%	11%
Virginia	19%	22%	13%	2%	8%

Source: Prosperity Now Scorecard, January 2020.

The **Asset Poverty Rate** measures the percentage of households that lack enough net worth (total assets minus total liabilities) to subsist at the poverty level for three months in the absence of income. In other words, if a household lost its income, could it survive for three months at the federal poverty line using its savings and assets? A household in asset poverty is financially vulnerable even if it has income above the poverty level. It highlights the lack of a financial cushion for emergencies or income shocks.

The **Liquid Asset Poverty Rate** measures the share of households that do not have enough liquid assets — such as cash, savings, checking accounts, or easily accessible investments — to cover three months of basic expenses at the poverty level. This metric focuses specifically on readily available resources (excluding illiquid assets like homes or cars). A household may not be “asset poor” overall but still be liquid asset poor if most of its wealth is tied up in illiquid assets.

**Households with Zero Net Worth** represents the percentage of households whose total debts equal or exceed their total assets — resulting in zero or negative net worth. Such households have no accumulated wealth and may face significant financial instability. It is a more absolute measure of wealth deprivation than asset poverty.

**Unbanked Households** do not have a checking or savings account at an insured financial institution (such as a bank or credit union). These households often rely on costly alternative financial services (e.g., check cashers, payday lenders). Unbanked households have limited access to credit, savings tools, and financial stability.

**Underbanked Households** have a checking or savings account but still used alternative financial services such as payday loans, rent-to-own, or check cashing within the past 12 months. This indicates partial access to the formal financial system but continued reliance on high-cost alternatives. It often reflects barriers such as high fees, mistrust, or lack of suitable products.

This data matters because a high asset poverty rate suggests that many people are one emergency away from financial crisis. It reflects economic inequality and financial stability more effectively than income alone. It can inform policies on savings incentives, financial literacy, and social safety nets.

The current administration’s plan to help families establish savings accounts for children – specifically the newly enacted “Trump Accounts” (also called “MAGA Accounts”), aims to give children a financial head start by introducing them to the power of compounding wealth early. Trump accounts are tax-advantaged investment accounts established for children who are U.S. citizens and born between January 1, 2025, and December 31, 2028. Each eligible newborn receives a one-time \$1,000 federal deposit.

To address financial health in our community, Skyline CAP has launched a series of financial literacy counseling sessions. These sessions cover essential topics such as creating a sustainable budget, setting financial goals, building savings, managing debt, and understanding credit reports and credit repair.

## What It Takes to Raise a Family

Many families face a significant gap between their income and essential living expenses, leaving them financially strained and vulnerable to predatory lenders, such as payday loan providers. Without sufficient earnings to cover necessities, families often struggle to achieve financial stability.

The Economic Policy Institute (EPI) provides a Family Budget Calculator that estimates the income required for families to achieve a modest yet adequate standard of living in different regions across the United States. Unlike the federal poverty threshold—which applies a single national benchmark—the EPI calculator accounts for local variations in the cost of living and incorporates a comprehensive range of household expenses. As a result, it offers a more realistic and location-specific measure of what it truly takes to support a family's basic needs.

In FY25, Skyline CAP served more single parent households than any other type; therefore, the chart to the right calculates income based on one adult and two children in our primary service area of Greene, Madison, and Orange counties. Since the last time this information was calculated in 2018, the income needed to attain a modest standard of living has increased 37% in Skyline CAP's service area.

### Average Monthly Costs for Single Parent with Two Children



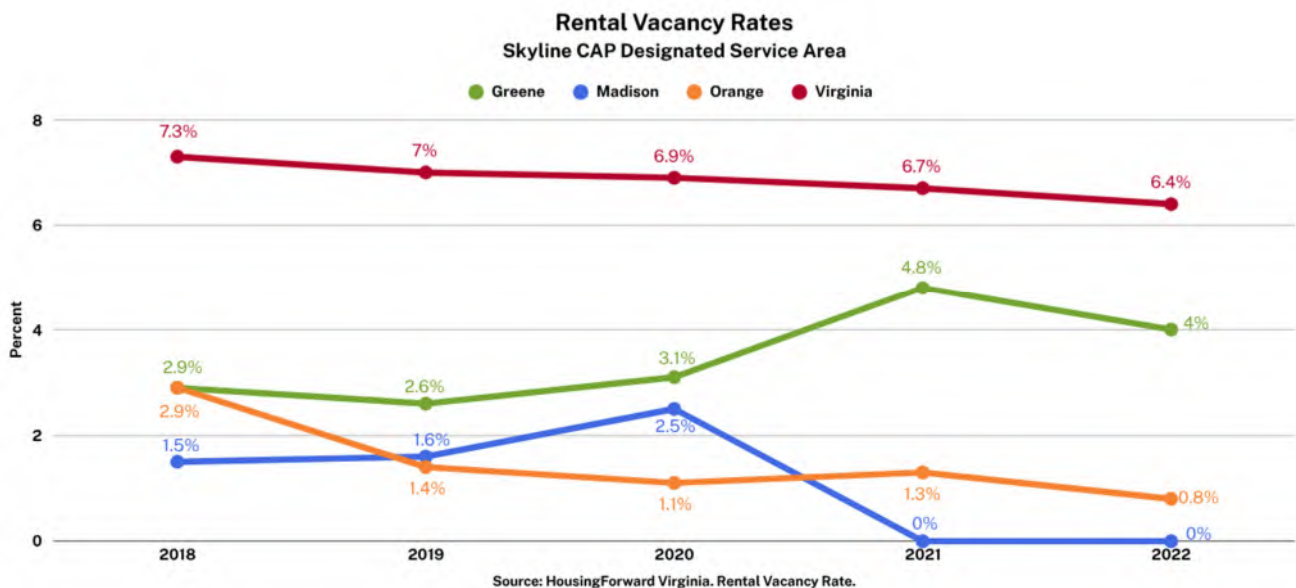
**Source:** Economic Policy Institute Family Budget Calculator, January 2025. Budget component data are in 2024 dollars.



## Housing

Access to affordable and stable housing remains a fundamental need in our community and continues to rank as a top concern among survey respondents and focus group participants. For many low-income residents, the challenge extends beyond affordability to securing housing that is truly safe—structurally sound, healthy to live in, and free from physical or social threats. Focus group participants emphasized that rental properties often go without necessary maintenance, with some landlords telling tenants to move if they are unhappy rather than addressing repairs. One participant recounted the experience of a renter whose home’s well ran dry, leaving the household without access to water. Despite repeated requests, the landlord delayed making necessary repairs. In response, the tenant withheld rent in an effort to compel action. Instead of addressing the issue, the landlord initiated eviction proceedings. Because Virginia law does not permit tenants to legally withhold rent—even in cases involving health and safety concerns—the renter was left without protection or recourse.

Rising rental costs, limited availability of affordable units, and long waiting lists for federal assistance programs continue to exacerbate the housing crisis. The National Low Income Housing Coalition (2024) reports that “improvements in the economy and small declines in rent have not addressed the needs of low-income people, who continue to struggle to find affordable, decent, and accessible housing. These needs stem from a longstanding, systemic shortage of affordable housing for the lowest-income households”. According to the *Virginia Housing Alliance’s 2024 Virginia Housing Landscape* report, there are only 54 affordable rental units available for every 100 households earning 50% of area median income (AMI) or less, and just 30 units for every 100 households earning 30% or less of AMI (Virginia Housing Alliance, 2024).



This shortage has led to a substantial number of low-income Virginians being housing cost-burdened. As of 2019, approximately 63% of low-income Virginians were housing cost burdened, meaning they spent more than 30% of their income on housing expenses. This issue particularly affects individuals in essential occupations with relatively low salaries, such as home health aides, teaching assistants, bus drivers, and social workers.

Cost-Burdened Households

The significance of this problem is profound. Housing cost burdens constrain household budgets, making it difficult for families to afford other necessities and increasing the likelihood of eviction. Severely cost-burdened households, those spending more than 50% of their income on housing, are more likely to sacrifice essentials like healthy food and healthcare to meet housing costs. This financial strain can lead to unstable housing situations, including a higher risk of eviction.

Addressing housing affordability is crucial for the well-being of low-income families and the overall health of the economy. Skyline CAP administers the Housing Choice Voucher Program (HCVP), commonly known as Section 8, a federally funded initiative administered by the U.S. Department of Housing and Urban Development (HUD). It helps low-income families, the elderly, and people with disabilities afford safe and decent housing in the private market by subsidizing a portion of their rent. However, demand for vouchers far exceeds supply and serves only a fraction of those eligible due to limited federal funding.

Within the Skyline CAP service area, affordable housing is scarce, and some landlords refuse to accept vouchers, further limiting housing options for participants. To address this problem, Skyline CAP has heightened focus on acquiring rental properties to lease to low-income families. Since 2021, the agency completed construction on two new single-family homes in Greene County, acquired a 5-unit apartment building in Madison, transforming an open space to create a sixth efficiency apartment, and purchased a number of mobile homes. In all, the agency has nearly tripled the number of rental properties it owns in the last three years.

Fair Market Rent

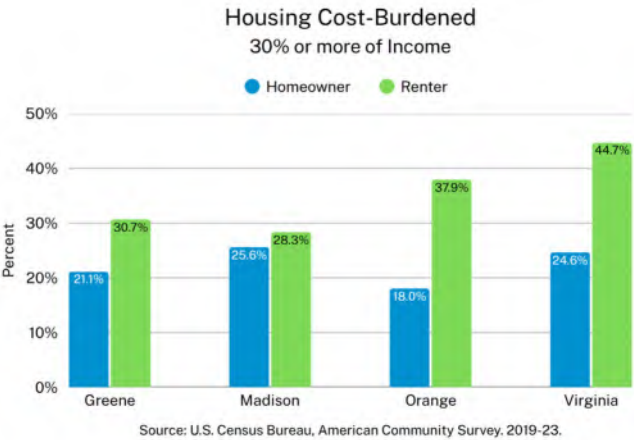
The U.S. Department of Housing and Urban Development (HUD) annually determines Fair Market Rents (FMRs) to establish payment standards for various housing assistance programs. FMRs represent the 40th percentile of gross rents for standard quality units within a metropolitan area or nonmetropolitan county.

Fair Market Rent

County	Efficiency	One-Bedroom	Two-Bedroom	Three-Bedroom	Four-Bedroom
Greene	\$1,404	\$1,487	\$1,729	\$2,155	\$2,621
Madison	907	913	1,096	1,361	1,609
Orange	899	905	1,117	1,565	1,783

Source: HUD User, Office of Policy Development and Research, FY2025 Fair Market Rent Documentation System.

The chart below reflects FY2025 FMRs compared to pre-COVID (2019) rents within Skyline CAP’s designated service area (Greene, Madison, and Orange counties).



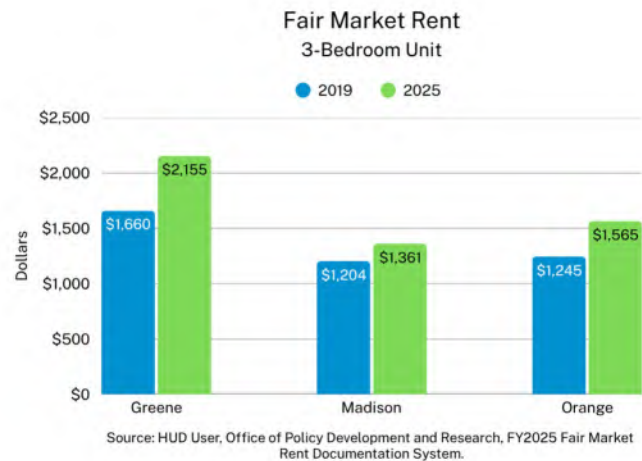


Fair Market Rent – 3-Bedroom Unit - 2019 v. 2025

The data indicates a substantial rise in fair market rents across all three counties, with Greene County showing the most significant increases overall. All three counties are experiencing the highest increase in the cost of efficiency units: Greene County – 65%; Madison County – 40%; and Orange County – 56%.

Affordable Rent

Affordable rent is defined as housing costs—including rent and utilities—that do not exceed 30% of a household’s total income. Using this guideline, the table below outlines the hourly wage required to afford a two-bedroom home at fair market rent (FMR). These figures assume a full-time work schedule of 40 hours per week for 52 weeks per year.



2-Bedroom Affordability

	Housing Wage	Fair Market Rent	Annual Income Needed	Estimated Mean Renter Wage	Affordable Rent
Greene	\$33.25	\$1,729	\$69,160	\$17.59	\$915
Madison	21.08	1,096	43,840	13.18	685
Orange	21.48	1,117	44,680	13.84	720
Virginia	33.64	1,749	62,967	23.66	1,230

Source: National Low Income Housing Coalition. Out of Reach. 2025. Retrieved from <https://nlihc.org/oor/state/va>

The estimated mean renter wage represents the average hourly earnings of all renters in the area. By applying the 30% affordability rule to this wage, we can determine the maximum affordable rent per household.

For example, a single mother with one child in Greene County working full-time and earning the current minimum wage of \$12.41 per hour should ideally spend no more than \$643 per month on housing. However, with the fair market rent for a two-bedroom home set at \$1,729, securing affordable housing is nearly impossible. Additionally, because her income exceeds the Federal Poverty Level (FPL), she does not qualify for assistance, leaving her in a financial gap where she struggles to cover basic living expenses.

To further illustrate housing affordability challenges, the table below provides data for the three-county service area, including affordability calculations for those earning the state minimum wage.

2-Bedroom Affordability Working at Minimum Wage (\$12.41)

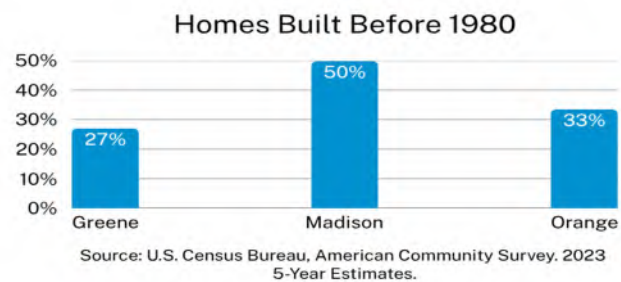
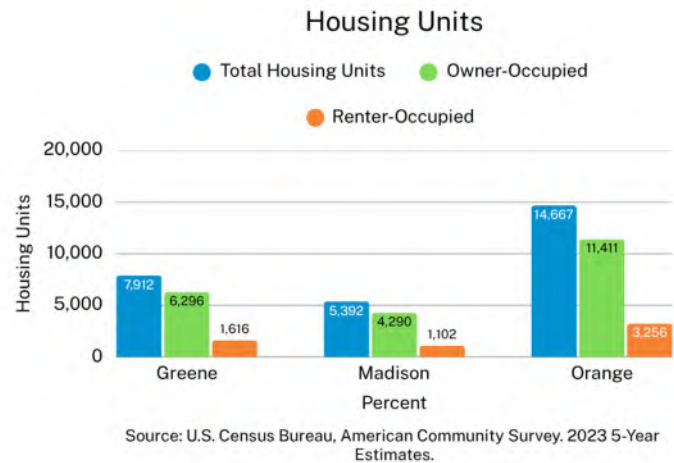
	Fair Market Rent	Number of Hours Needed Each Week to Afford*	# of Jobs
Greene County	\$1,729	107	2.6
Madison County	\$1,096	68	1.7
Orange County	\$1,117	69	1.7

\*without being cost burdened

### Housing Units

Homeownership rates tend to be higher in rural areas compared to urban areas. This is partly due to lower housing costs, more available land, and fewer rental options. This is the case for Skyline CAP’s service area.

New housing starts in Greene and Orange counties have increased in recent years. Greene County is part of the greater Charlottesville housing market which has seen increased demand due to regional growth and proximity to employment hubs and is experiencing steady new housing development. Likewise, Orange County is also experiencing significant new housing development with multiple developers contributing to growth. In contrast, Madison County’s slower pace of new construction limits housing availability especially for low- to moderate-income families. In addition, with fewer housing starts, Madison County’s housing stock remains older than that of Greene and Orange counties where growth is more significant.



### Residential Building Permits by Year

	Greene County		Madison County		Orange County	
	Single-Family	Multi-Family	Single-Family	Multi-Family	Single-Family	Multi-Family
2023	143	120	53	0	422	0
2022	113	0	61	0	241	0
2021	108	0	76	0	261	0
2020	75	200	42	0	202	2
2019	117	53	61	0	229	24

Source:  
U.S.  
Census

Bureau. Building Permits Survey: State map visualization. U.S. Department of Commerce.

### Evictions

Evictions are a critical issue impacting housing stability and economic security in many communities, including those served by Skyline CAP. They can result from factors such as rising rental costs, job loss, unexpected financial hardship, or lack of access to legal resources. Evictions disproportionately affect low-income households, leading to housing insecurity, homelessness, and negative health and educational outcomes for affected families.

Rising housing costs have significantly contributed to increased eviction rates across the United States. Between 2000 and 2013, the percentage of U.S. renters who were severely cost-burdened—spending more than 50% of

their income on rent—nearly doubled, reaching 26.5%. This financial strain makes it challenging for many households to meet rental obligations, leading to higher eviction rates.

In 2023, landlords filed nearly 1.1 million eviction cases, an increase of over 100,000 from the previous year and more than 500,000 compared to 2021. Notably, eviction filings in 2023 surpassed pre-pandemic levels in most cities tracked by the Eviction Lab.

The disparity between rising rents and stagnant wages exacerbates this issue. This growing gap leaves many renters vulnerable to eviction due to financial instability.

The COVID-19 pandemic further intensified housing instability. As pandemic-related protections expired, many cities experienced record eviction filings, driven by escalating housing prices.

Certain groups face a heightened risk of eviction, particularly low-income women—especially women of color—domestic violence survivors, and families with children. The consequences of eviction extend far beyond losing a home. Families often lose their possessions, and the resulting stress can affect job performance, increasing financial instability. For children, eviction is particularly traumatic, as home represents both physical and emotional security. Losing this stability can lead to mental and physical health challenges, as well as academic struggles.

The most recent data on evictions in our service area is 2018 when the eviction rate was reported to be 5.5%, less than half the rate of the state of Virginia but on par with the nation overall.

Evictions					
	Renter Occupied Households	Eviction Filings	Evictions	Eviction Filing Rate	Eviction Rate
Greene	1,555	64	42	4.12%	2.7%
Madison	1,222	21	11	1.72%	0.9%
Orange	3,363	170	82	5.06%	2.44%
Virginia	1,012,175	146,534	51,821	14.48%	5.12%

Source: Eviction Lab. 2018

### Homelessness

Homelessness is a critical issue that affects individuals and families across our communities. According to the Virginia Housing Alliance, the rise in homelessness in Virginia is caused by several factors: a shortage of affordable housing approximating 300,000 homes in the state overall; a rise in households that are cost-burdened, with 1 in 3 spending more than a third of their income on housing – and 1 in 7 spending 50% or more on housing; and a significant wage gap revealing that a worker must earn twice the Virginia minimum wage to afford a modest 2-bedroom rental.

To effectively address this challenge, it is important to understand how homelessness is defined by key federal agencies: the U.S. Department of Housing and Urban Development (HUD) and the U.S. Department of Education (DOE). Each agency’s definition serves a distinct purpose, reflecting different aspects of housing instability. Understanding these definitions helps identify those in need and ensures that services are accessible to individuals and families facing housing insecurity.

The U.S. Department of Housing and Urban Development (HUD) defines homelessness based on four primary categories:

1. **Literally Homeless:** Individuals or families who lack a fixed, regular, and adequate nighttime residence, including those living in shelters, transitional housing, or places not meant for human habitation (e.g., cars, parks, abandoned buildings).
2. **Imminent Risk of Homelessness:** Individuals or families who will lose their primary nighttime residence within 14 days and have no other housing options or support networks to secure permanent housing.
3. **Homeless under Other Federal Statutes:** Unaccompanied youth and families with children who have experienced long-term housing instability and lack permanent housing.
4. **Fleeing or Attempting to Flee Domestic Violence:** Individuals or families escaping domestic violence, sexual assault, stalking, or other dangerous conditions and lack alternative safe housing options.

The Foothills Housing Network collects Point-In-Time (PIT) data for Madison and Orange counties, while the Charlottesville Continuum of Care (CoC) gathers data for Greene County. The most recent PIT count conducted in 2024 showed 16 adults and 3 children in Madison and 14 adults and 11 children in Orange County as unsheltered. Greene County's data was combined with the overall Charlottesville CoC total (213), and we were unable to attain it as a separate figure.

The U.S. Department of Education (DOE) adopts a broader definition of homelessness to ensure that children and youth experiencing housing instability have access to educational services. Under the McKinney-Vento Homeless Assistance Act, homeless children and youth include those who:

- Share housing with others due to loss of housing, economic hardship, or similar reasons (commonly referred to as being "doubled-up").
- Live in motels, hotels, trailer parks, or campgrounds due to lack of alternative housing options.
- Stay in shelters, transitional housing, or awaiting foster care placement.
- Reside in public or private places not designed for regular sleeping accommodations (e.g., cars, parks, abandoned buildings, bus stations).
- Are migratory children in similar housing situations.

During the 2024–2025 school year, the Virginia Department of Education identified 28 students experiencing homelessness in both Greene and Orange counties, and 24 students in Madison County. Student homelessness can have serious impacts on educational outcomes and overall stability, making access to safe and consistent housing critical for these children and their families.

## Aging in Place

An increasing number of seniors in the United States are choosing to age in place—a trend that reflects a strong desire for independence and familiarity. According to the U.S. Centers for Disease Control and Prevention (CDC), aging in place means "the ability to live in one's own home and community safely, independently, and comfortably, regardless of age, income, or ability level." AARP's 2021 Home and Community Preferences Survey found that 77% of adults aged 50 and older want to remain in their homes for the long term, a sentiment that has remained stable for over a decade. The University of Michigan's National Poll on Healthy Aging in 2020 revealed that 88% of adults aged 50 to 80 indicated that aging in place is important to them. However, only 34% felt their homes had the necessary features to facilitate this, and just 15% had given significant consideration to

the modifications needed to support aging in place. AARP's 2024 report states that over half (51%) of adults aged 50 and older acknowledged the need for a home that supports independent aging. Nearly half anticipated requiring home modifications, such as installing grab bars (72%), enhancing entryways (71%), and upgrading kitchens (39%), to accommodate aging in place.

Aging in place is crucial for seniors as it provides a sense of control over daily routines, activities, and decision-making, which significantly enhances their quality of life and overall well-being. This, in turn, positively impacts their physical health. Beyond practicality, there is a deep emotional connection to one's home, which serves as a place of refuge, comfort, and familiarity. Conversely, the transition to a care facility can carry an emotional burden, often leading to feelings of loss, anxiety, and even depression. Furthermore, remaining at home may reduce exposure to bacterial and viral infections, a concern that is heightened in communal living environments such as assisted living and nursing facilities.

While there are costs associated with aging in place, such as home modifications, repairs, and potential in-home care services, these expenses are typically lower than the costs of residing in a long-term care facility. Investing in home modifications, such as grab bars, wheelchair ramps, and improved lighting, can significantly improve safety and accessibility, allowing seniors to maintain their independence longer.

Demographic trends in our service area highlight the increasing need to support aging in place. Between 2010 and 2020, the 65+ population grew substantially: by 69% in Greene County, 41% in Madison County, and 38% in Orange County. Projections through 2050 indicate continued growth, with the 65+ demographic expected to increase by 68% in Greene County, 51% in Orange County, and 22% in Madison County. These shifts underscore the importance of developing policies, programs, and resources to support the aging population, ensuring that seniors have the necessary services to remain safely in their homes and communities.

As the senior population continues to grow, it should be anticipated that Skyline CAP's Emergency Home Repair Program will be more in demand. In addition, it is imperative to expand community-based services, enhance healthcare access, and promote affordable home modifications. By prioritizing these efforts, we can support the well-being and independence of our aging residents, allowing them to age in place with dignity and security.

## Education

Education is a key determinant of community well-being, economic mobility, and long-term stability. Access to high-quality early childhood education helps close developmental gaps before school entry, while strong K–12 outcomes, including high school graduation, directly shape workforce readiness and future earnings. For adults, educational attainment and workforce development are vital to breaking cycles of poverty and supporting regional growth.

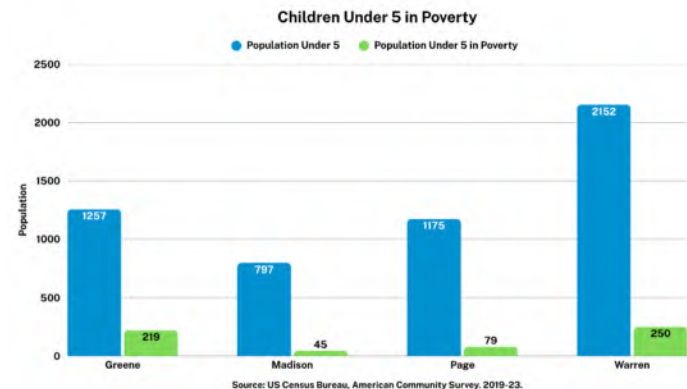
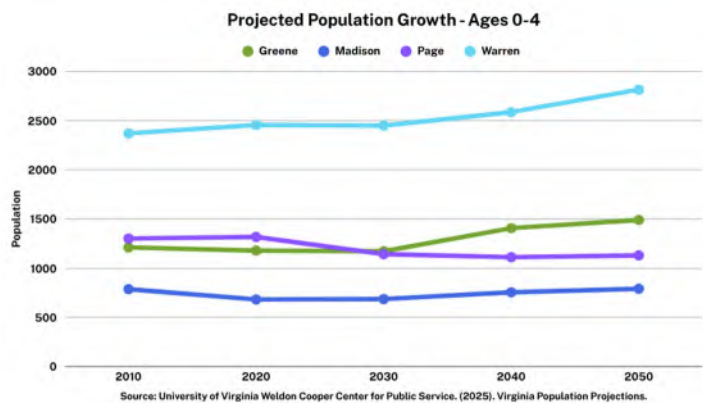
Growing counties like Greene and Warren face increasing demand for early education and K–12 resources, while rural counties such as Madison and Page continue to confront barriers of distance and economic hardship. Strategic investment across all educational stages—from preschool readiness to postsecondary pathways—will be essential to ensuring that residents of all ages have the skills, support, and opportunities to thrive.

### Early Childhood Education

Early childhood is a period of rapid brain development when the foundations for language, social-emotional growth, problem-solving, and self-regulation are formed. For children experiencing economic hardship, access to high-quality early childhood education (ECE) is one of the most effective strategies for closing gaps in development and school readiness.

Across the region served by Skyline CAP’s Head Start program, changing population patterns and high poverty rates among children under age five highlight both shifting demands and persistent vulnerabilities for young children and their families. Research consistently demonstrates that early intervention matters: a 2019 University of Michigan study found that Head Start participants were 12% less likely to live in poverty and 29% less likely to rely on public assistance as adults.

Children who begin school behind must “catch up,” and schools often lack the capacity to fully close these gaps. For economically vulnerable families, access to early education is not a luxury—it is a critical support that promotes equity, readiness, and long-term well-being.



**County-Level Context**

**Greene County**

Greene County is projected to experience the highest growth among the counties served by Skyline CAP’s Head Start program, with a 26% increase in children ages 0–4 between 2020 and 2050. This expansion will increase demand for early childhood education and developmental support. Strengthening and potentially expanding Head Start capacity will be critical to ensure equitable access and prevent widening readiness gaps.

**Madison County**

Madison County is expected to see a 16% increase in young children by 2050. Its rural geography presents access challenges for families, particularly those with limited transportation or financial resources. Continued outreach and engagement will be essential to connect all eligible families with quality early learning opportunities.

**Page County**

Page County is projected to experience a 14% decline in its 0–4 population over the next three decades. While this may lessen overall demand, population decline often correlates with increased concentrations of economic hardship. Head Start remains essential in Page County to ensure that vulnerable children continue to receive comprehensive early learning support.

**Warren County**

Warren County is projected to grow by 15% in its 0–4 population by 2050. The combination of a large existing child population and continued growth signals a need for increased early learning capacity—particularly comprehensive programs like Head Start that integrate health, nutrition, and family support.

**Virginia Preschool Initiative (VPI)**

The partnership between the Virginia Preschool Initiative (VPI) and Head Start continues to shape early childhood education across Madison, Greene, and Orange Counties, serving about 57% of income-eligible four-year-olds. While both aim to promote school readiness and equitable access, differing funding, eligibility, and reporting systems create coordination challenges. VPI focuses on academic readiness, while Head Start offers a comprehensive model integrating education, health, and family engagement.

Through collaboration with local schools, Skyline CAP has supported shared training, curriculum planning, and coordinated enrollment, improving kindergarten readiness in literacy and social-emotional skills. Yet staffing shortages, transportation barriers, and waitlists—especially in rural areas—continue to limit access. As Virginia moves toward a Unified Early Childhood System, opportunities exist to streamline oversight and expand services. The VPI–Head Start partnership highlights both progress and persistent fragmentation, underscoring the need for sustained collaboration and equitable funding to ensure all children enter school ready to succeed.

**Early Childhood Education Participation**

The following table shows the number of children enrolled in publicly funded early childhood programs, including Mixed Delivery, Head Start, the Virginia Preschool Initiative (VPI), and the Child Care Subsidy Program (CCSP). Enrollment varies across counties, reflecting differences in capacity, resources, and demand.

**Table 33: Early Childhood Education Participation**



County	Mixed Delivery	Head Start	VA Preschool Initiative (VPI)	Child Care Subsidy (CCSP)	Total
Greene	0	36	41	30	107
Madison	0	36	26	15	77
Page	20	36	100	20	176
Warren	0	37	112	54	203

Source: ReadyRegions ECCE Supply/Demand Dashboard

Participation data show that while Head Start provides a consistent foundation across the region, total enrollment in publicly funded programs varies significantly. Growth counties such as Greene and Warren will require additional early learning infrastructure, while rural counties like Madison and Page must focus on equitable access and outreach.

### Early Childhood Education for Children with Disabilities

A substantial number of young children under age five in the Skyline CAP service area are identified with disabilities and require specialized supports. As shown in Table 34, the estimated number of children under age five with disabilities ranges from 78 in Madison County to 239 in Warren County, with 3- and 4-year-olds ranging from 31 to 96 respectively. Within Skyline CAP's Head Start program, nearly 15% of enrolled children received disability services and individualized supports last year.

**Table 34: Children Under 5 with Disabilities**

	Estimated Population Under 5 with disabilities	Estimated 3- and 4-Year-Olds with Disabilities
Greene	127	51
Madison	78	31
Page	148	59
Warren	239	96

Source: U.S. Census Bureau. Quick Facts. July 1, 2024, estimates.

These data highlight the importance of inclusive early education and early intervention partnerships. Collaboration among school divisions, early intervention agencies, and family support programs remains critical to ensuring that all children, including those with disabilities, can access the supports needed for success.

### Kindergarten Readiness

As children transition from early childhood education to formal schooling, their readiness for kindergarten sets the foundation for long-term academic and life success. In Virginia, the Virginia Kindergarten Readiness Program (VKRP) assesses readiness across four critical domains: literacy, mathematics, self-regulation, and social skills.

The most recent kindergarten readiness data available for the Skyline CAP service area (Table 35) indicate varying levels of preparedness among entering students between 2022 and 2023. While the statewide readiness rate remained relatively stable—59.6% in 2022 and 60.0% in 2023—county-level trends show notable

**Table 35: Kindergarten Readiness**

County	2022	2023
Greene	55.8%	50.8%
Madison	55.3%	62.6%
Page	67.1%	59.2%
Warren	54.0%	63.0%
Virginia	59.6%	60.0%

Source: ReadyRegions ECCE Supply/Demand Dashboard

fluctuations. Greene County experienced a decline from 55.8% to 50.8%, suggesting potential challenges in early learning access or developmental supports. In contrast, Madison County demonstrated improvement from



55.3% to 62.6%, and Warren County increased from 54.0% to 63.0%, both surpassing the state average in 2023. Page County, though previously the highest-performing locality, declined from 67.1% to 59.2%, aligning more closely with the statewide figure. These data highlight the dynamic nature of early learning outcomes and underscore the importance of maintaining consistent, high-quality early childhood education and family engagement strategies to promote school readiness across all counties.

Growth in the 0–4 population in Greene and Warren means more children will soon enter kindergarten, making early readiness efforts essential. In more rural or economically challenged areas such as Madison and Page, readiness disparities may persist without targeted supports. Strengthening early learning quality and coordination through Head Start and community partnerships is vital for equitable outcomes.

**Early Head Start (EHS)**

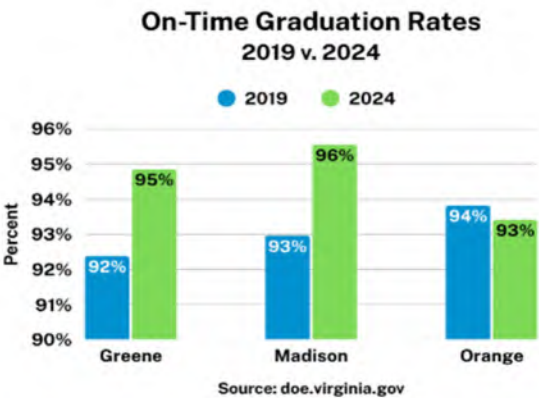
Early Head Start currently operates only in Orange County, serving about 48 infants and toddlers each year. The absence of EHS programs in Madison and Greene Counties leaves an estimated 170 eligible children under age three without comparable supports. Across the region, 41% of children under three live below 200% of the federal poverty level, and both counties have limited childcare capacity—fewer than 30 licensed slots per 100 children, compared to the state average of 44.

Expanding EHS faces challenges in funding, staffing, and rural access, but also clear opportunities. Skyline CAP could build on its Head Start infrastructure and partner with schools and local agencies to pilot small-scale or shared-service programs. Orange County’s success—where over 85% of children meet developmental milestones by age three—demonstrates the potential impact. Strengthening partnerships and pursuing targeted funding could help establish a more equitable early learning network across the region.

**High School Graduation and Drop-Out Rates**

Educational outcomes at the secondary level directly impact long-term stability and economic mobility. Students who do not complete high school face higher unemployment rates, lower lifetime earnings, and increased reliance on public assistance. They also experience poorer health outcomes and reduced life satisfaction.

Ensuring high school completion is therefore critical to workforce readiness and community prosperity. A well-educated population contributes to higher tax revenues, stronger civic engagement, and reduced social service dependency.

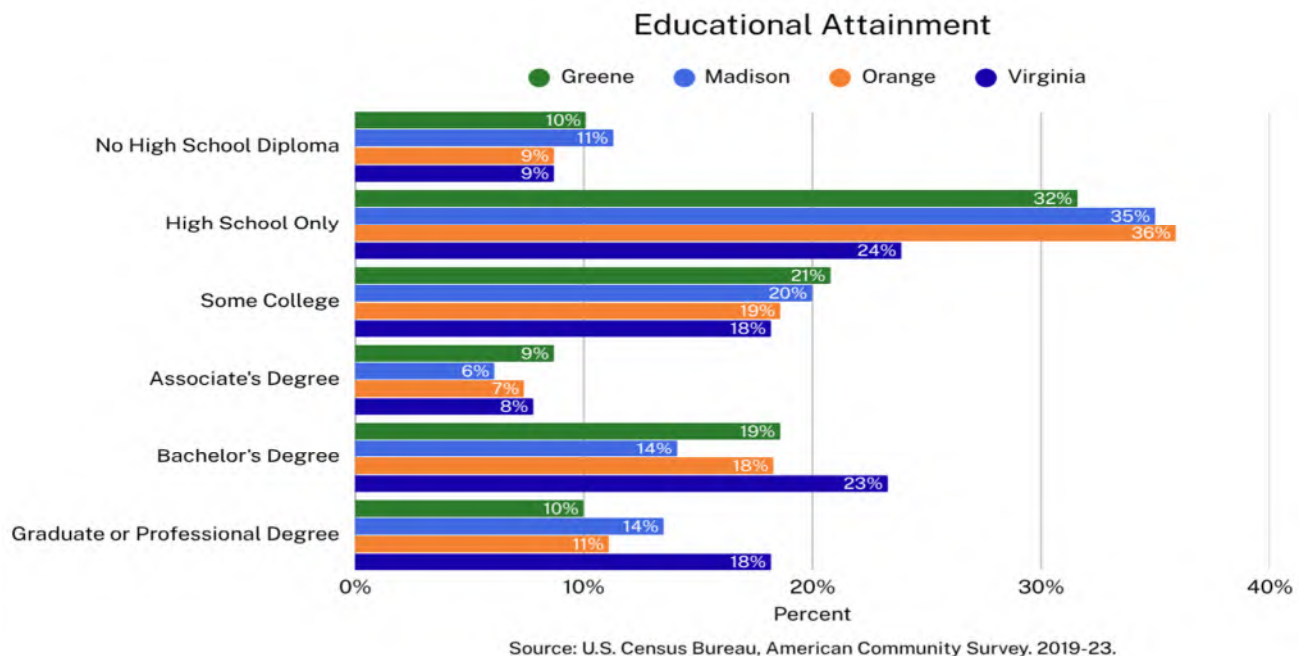


Skyline CAP’s Project Discovery program addresses barriers to high school completion by supporting middle and high school students—particularly in Madison County—through mentoring, academic guidance, and exposure to postsecondary pathways. The program helps students explore colleges, universities, and technical schools, empowering them to make informed decisions about their futures and achieve long-term success.

## Educational Attainment

Education continues to be a central factor in quality of life and community advancement. Higher educational attainment is linked to improved health outcomes, higher civic participation, and greater economic stability.

Expanding workforce training and adult education programs—including on-the-job training, apprenticeships, and skill-building initiatives—can increase employment opportunities and economic mobility. Additional supports such as résumé development, interview preparation, and job placement services are also key to improving outcomes for unemployed and underemployed individuals.



Among all households seeking services and assistance from Skyline CAP, nearly half, or 49.45% had incomes at or below the federal poverty level. To support both unemployed and underemployed individuals in securing meaningful employment and increasing earnings, expanded workforce training programs are essential. These could include on-the-job training, apprenticeships, and skill-building initiatives. Additionally, providing assistance with resume writing, interview techniques, job searches, and job placement services would further enhance employment opportunities for those in need.

### Overall Implications for the Region

Education at every level—early childhood, K–12, and adult learning—is interconnected and essential to community well-being. The region’s data point to three overarching priorities:

1. Expand access to high-quality early learning and inclusive education.
2. Strengthen pathways from high school to postsecondary training and employment.
3. Invest in adult education and workforce development to reduce poverty and enhance regional resilience.

By addressing these priorities holistically, Skyline CAP and its partners can help ensure that residents across all four counties—regardless of income, geography, or circumstance—have the opportunity to learn, grow, and succeed.

# Health & Wellbeing

Population health and wellbeing refers to the overall physical, mental, and social health status of individuals and families within a community. Understanding local health trends and the conditions that shape them is essential to identifying needs, targeting services, and building stronger communities.

## Health Outcomes and Access

Residents in Skyline CAP’s primarily rural service area face a range of health challenges, including higher rates of chronic conditions such as heart disease, obesity, and diabetes. Health disparities are particularly pronounced among low-income individuals, older adults, and people with disabilities. Access to medical care—including primary care, dental services, and behavioral health care—is limited, especially in Madison and Greene counties.

## Health Insurance

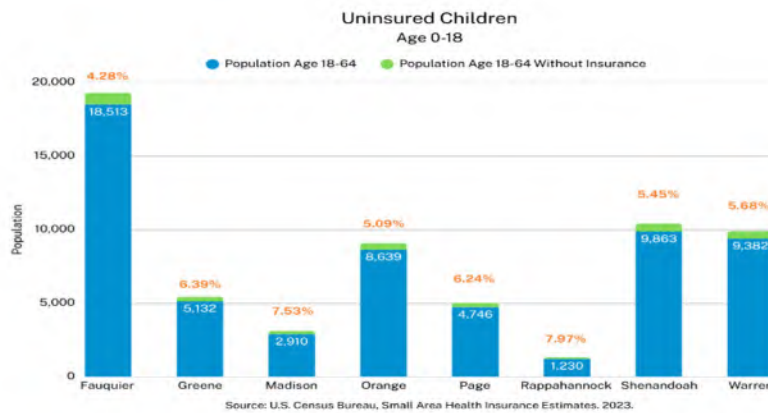
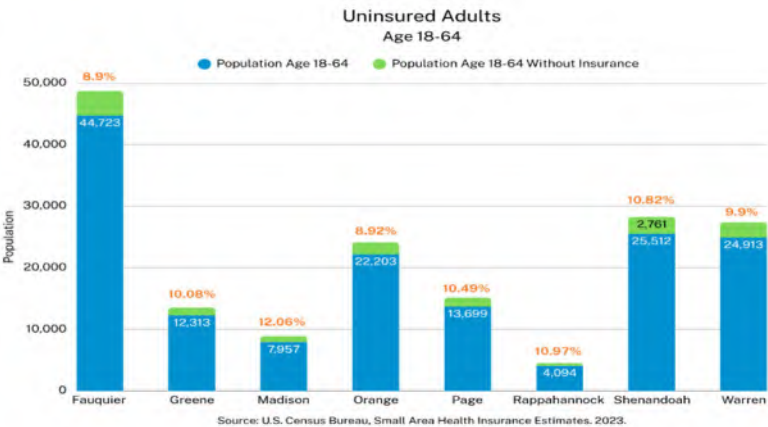
Approximately 10% of residents in the service area do not have health insurance, and even among those who are insured, more than 20% of survey respondents reported that out-of-pocket costs make medical care unaffordable. Additionally, nearly one-quarter of respondents indicated difficulty finding a doctor or securing timely appointments, highlighting significant barriers to accessing care.

Low-income individuals and families in Skyline CAP’s service area have access to a range of free and low-cost health, dental, and behavioral health resources that collectively serve as the region’s safety net. The Greene Care Clinic provides free primary care for uninsured adults with incomes below 300% of the federal poverty level, while the Orange County Free Clinic offers comprehensive primary and preventive care, medication assistance, and mental health counseling for uninsured and underinsured residents. The Madison Free Clinic

## Health Care Access

Location	Primary Care	Mental Health	Dentists
Fauquier	2,570:1	720:1	1,790:1
Greene	3,520:1	680:1	7,100:1
Madison	7,000:1	2,380:1	2,830:1
Orange	1,900:1	1,150:1	2,970:1
Page	3,390:1	1,580:1	5,940:1
Rappahannock	3,750:1	930:1	3,710:1
Shenandoah	2,650:1	1,260:1	3,230:1
Warren	2,300:1	1,320:1	1,310:1
Virginia	1,320:1	350:1	1,310:1
United States	1,310:1	290:1	1,340:1

Source: County Health Rankings & Roadmaps (University of Wisconsin Population Health Institute, 2025).



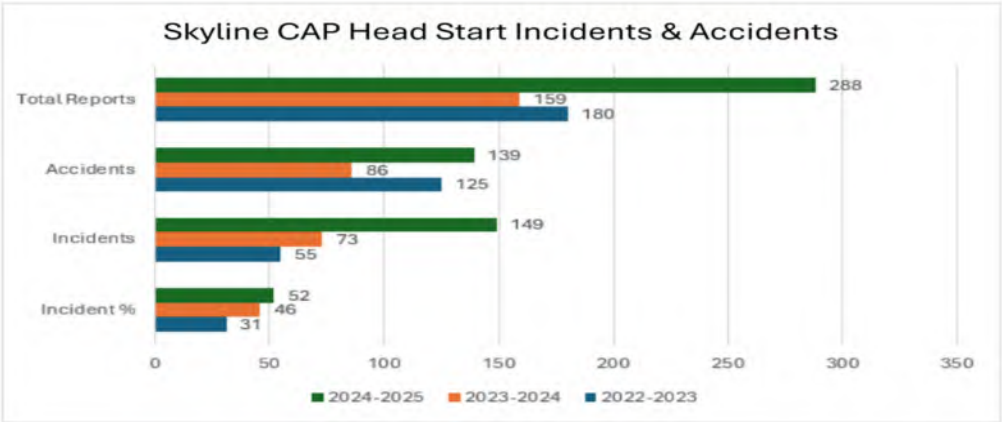
provides similar services, including chronic disease management, limited dental and vision care, and referrals to specialty providers. Dental needs across the region are further supported by the Piedmont Regional Dental Clinic (PRDC) in Orange County, which offers affordable, comprehensive dental services—including cleanings, fillings, extractions, and emergency care—to Medicaid patients and uninsured residents through its sliding-scale Affordable Care Program. Skyline CAP collaborates with these clinics and agencies through programs like Head Start and Healthy Families, connecting residents to medical, dental, and mental health resources.

For many families, a lack of reliable transportation further restricts access to care. Limited transportation opportunities in Skyline’s service area, particularly as it concerns access to medical appointments, was a primary topic of discussion during the Madison County focus group. While there are organizations that provide transportation, they struggle to find drivers, with several assumptions made as to the reason for this: fuel expenses, liability for drivers, gender issues (men being reluctant to transport women and vice versa), changes in the mindset of younger generations who don’t volunteer as much, and people waiting until later to retire resulting in less free time during the day to volunteer.

A few solutions were discussed, including telemedicine which is, unfortunately, impeded by spotty internet in the County. Indeed, Madison EMS received a grant from UVA for an i-STAT device to provide diagnostic results, but the devices work primarily along the Route 29 corridor. Group telemedicine has been explored by the Department of Social Services, but HIPAA regulations presented significant barriers. One solution that is helping is Community Paramedicine, an approach to healthcare where paramedics, trained in emergency medical services, provide care and services outside of traditional emergency settings, often in the patient's home. These paramedics work in expanded roles, connecting patients with primary care, social services, and other support systems. The goal is to improve access to healthcare, particularly for underserved populations, reduce hospital re-admissions, and lower healthcare costs.

**Mental and Behavioral Health**

Mental health is a growing concern across the region. Nearly 25% of the community partners responding to our survey felt that mental illness is an issue contributing to economic insecurity for families in the community. Skyline CAP’s Head Start program has



experienced a marked increase in behavioral and social-emotional concerns among enrolled children in the program. Incident counts (e.g., behavior-related events) have steadily increased year over year, surging from 55 (2022-2023) to 149 (2024-2025) – a 171% increase over two years. The proportion of incidents to total reports rose from 31% to 52%, indicating that more reports are related to challenging behavior rather than unintentional accidents.

Shortages of mental health professionals and long wait times for treatment contribute to unmet needs. Rates of anxiety, depression, and substance use disorders have increased, particularly since the COVID-19 pandemic.

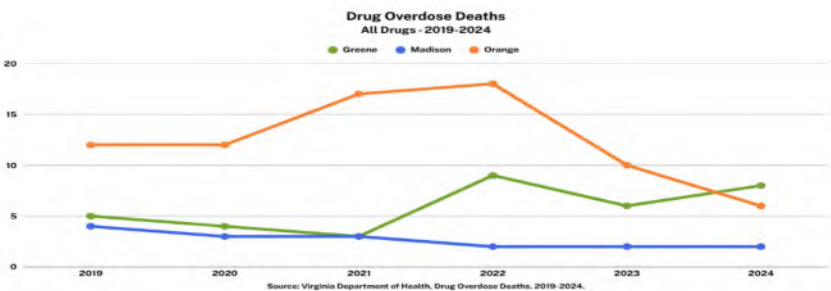
Youth mental health needs are also increasing, often going unaddressed due to affordability, stigma, or lack of access to appropriate care.

Addressing mental health in the workplace—especially in low-wage sectors—is both a public health and economic imperative. Poor mental health significantly impacts employees’ ability to thrive at work, with especially serious consequences for low-wage workers. Mental health challenges can lead to reduced productivity, increased absenteeism, and a higher likelihood of job turnover—factors that are financially and emotionally burdensome for workers already facing economic insecurity. Low-wage employees often lack access to employer-sponsored health benefits, paid leave, or workplace mental health resources, making it harder to seek care or take time off to recover. The stress of living paycheck to paycheck, combined with limited support systems, can exacerbate conditions like anxiety and depression. As a result, poor mental health not only undermines individual well-being but also contributes to long-term employment instability and economic hardship, reinforcing cycles of poverty and reducing workforce resilience.

Behavioral health and substance use services are available through two regional Community Services Boards (CSBs): Region Ten CSB serves Greene County, while the Rappahannock-Rapidan CSB covers Madison and Orange Counties. These agencies provide outpatient counseling, case management, psychiatric care, and substance use treatment programs for residents regardless of insurance status or ability to pay. Additional supports include local initiatives such as Orange County’s Epidemic Intelligence Council (EpIC), which coordinates opioid prevention and recovery resources, and community-based organizations like NAMI Virginia, which offers peer support and education.

Substance Abuse

Drug overdose deaths continue to represent a serious public health crisis, with opioids—particularly fentanyl—driving the majority of fatalities. In 2023, there were 2,463 overdose deaths in Virginia, marking a slight 1% decline from the record high of 2,622 deaths in 2021. However, opioids were involved in nearly 85% of those cases,



and fentanyl accounted for almost 80% of overdose fatalities. Despite these concerning figures, Virginia saw one of the steepest declines in overdose deaths across the U.S. in 2024, dropping more than 40% which is attributed to widespread naloxone access, fentanyl test strips, and harm reduction initiatives.

Within Skyline CAP’s service area, all three counties face public health concerns around drug overdoses, particularly involving opioids.

All-Drug Death Count, 2019-2024

	2024*		2023		2022		2021		2020		2019	
	All	Opioid	All	Opioid	All	Opioid	All	Opioid	All	Opioid	All	Opioid
Greene	8	4	6	4	9	6	3	1	4	4	5	4
Madison	3	1	2	2	2	0	3	3	3	3	4	4
Orange	6	5	10	9	18	15	17	14	12	12	12	10
Virginia	1,403	1,066	2,463	2,058	2,490	2,102	2,622	2,225	2,216	1,875	1,546	1,266

Source: Virginia Department of Health, Drug Overdose Deaths. 2019-2024.

Social Determinants of Health



Health outcomes are deeply influenced by non-medical factors such as income, housing, education, and access to transportation.

- **Affordable housing** remains out of reach for many residents, contributing to instability and homelessness. This was the top concern of the people who responded to the survey at 43.14%.
- **Food insecurity** affects a significant number of families, who rely on food pantries and school-based meal programs. This was also identified as a top need in the communities we serve, coming in at 23.53% of the respondents to our survey and barely ahead of transportation.
- **Child care** was the second highest concern among families responding to the survey at 39.22%, with many needing after-school and summer care. This issue was identified as a reason for work challenges, with 17.65% responding that the lack of child care during the hours needed was a problem for them.
- **Transportation barriers** are common and continue to limit access to healthcare, employment, and services. More than 20% of respondents indicated transportation is a top concern facing them.

### Health-Related Community Strengths and Challenges

Despite the challenges, each county in Skyline CAP's service area benefits from engaged local agencies, community health coalitions, and grassroots organizations working to support resident wellbeing. Mobile clinics, public health outreach, and harm reduction efforts have improved access to some services. However, rural isolation, provider shortages, and limited coordination between systems remain significant barriers.

### Food Security and Nutrition

Food insecurity remains a significant challenge across the U.S., with 13.5% of households experiencing uncertainty about their ability to access enough food in 2023, according to the U.S. Department of Agriculture's Economic Research Service. This marks an increase from 12.8% in 2022, signaling a growing need for food assistance. Among these households, 5.1% faced very low food security, meaning they experienced disruptions in their eating patterns and reduced food intake due to financial constraints. Responses to Skyline CAP's Needs Assessment Survey confirm this with concerns about access to food coming in as one of the top three concerns among low-income households.

Feeding America reports that food insecurity affects every county in the nation, including those served by Skyline CAP. Their *Map the Meal Gap* analysis provides the following estimates for food insecurity in our service area:

County	Food Insecure Population	Food Insecurity Rate	% Above SNAP Threshold	% Below SNAP Threshold	Average Meal Cost
Fauquier	6,890	9.3%	54%	46%	\$3.98
Greene	2,520	12.1%	43%	58%	\$3.51
Madison	1,430	10.3%	23%	77%	\$3.51
Orange	4,420	11.9%	51%	49%	\$3.57
Page	3,280	13.8%	20%	80%	\$3.40
Rappahannock	830	11.2%	30%	70%	\$3.72
Shenandoah	6,220	13.9%	25%	75%	\$3.48
Warren	5,180	12.6%	30%	70%	\$3.79
Virginia	1,050,300	12.1%	39%	61%	\$3.64

Source: Feeding America. *Map the Meal Gap*. 2023.

A critical concern is the number of food-insecure households that do not qualify for the Supplemental Nutrition Assistance Program (SNAP). In Greene and Orange counties, nearly half of food-insecure individuals fall above

the SNAP eligibility threshold, leaving them reliant on charitable food assistance to meet their basic needs. Moreover, even among those eligible for SNAP, not all are enrolled, highlighting the need to protect and strengthen federal nutrition programs while also increasing outreach efforts to boost participation.

### **Local Resources Addressing Hunger**

Skyline CAP's service area is home to many organizations dedicated to promoting nourishment and supporting the overall health of individuals and families. These programs provide a range of services—from mobile food pantries to home deliveries—that ensure access to fresh, wholesome, and shelf-stable foods. By fostering consistent access to nutritious meals, these efforts strengthen the foundation for healthier lives and more resilient communities. Continued collaboration and investment—through both federal and local initiatives—are essential to sustain and expand these programs. Enhancing nutrition education, broadening outreach, and deepening community partnerships will be key to ensuring that everyone in our region can thrive through reliable access to nourishing food.

### **Food Insecurity and Poverty**

Food insecurity and poverty are closely linked, but they are not the same thing. Poverty refers to a lack of financial resources to meet basic needs, while food insecurity means a lack of consistent access to enough food for an active, healthy life. Here's how they are related:

1. **Low Income Limits Food Access** – Families in poverty often struggle to afford nutritious food, leading to food insecurity.
2. **Trade-offs Between Essentials** – Households facing financial hardship may have to choose between paying for food, rent, utilities, or medical expenses.
3. **Impact on Nutrition** – Food-insecure families may rely on cheaper, less nutritious food, increasing health risks like obesity and diabetes.
4. **Cyclical Relationship** – Food insecurity can worsen poverty by affecting health, education, and job stability, making it harder to escape economic hardship.
5. **Government Assistance Helps** – Programs like SNAP, WIC, and free school meals help reduce food insecurity but don't always eliminate it entirely.

While poverty is a major driver of food insecurity, factors like food deserts, unemployment, and unexpected financial crises also contribute. Community Partners responding to the Skyline CAP CNA survey noted a general lack of knowledge about available food resources. This is an area that could be improved.

Family Advocates with Skyline CAP Head Start work with parents of children enrolled in the program to help them identify easy, nutritional and inexpensive meals as well as resources where they can access food. In Madison County, Skyline CAP Head Start works with the Virginia Cooperative Extension in Madison to provide hands-on nutrition and cooking classes that teach essential skills for preparing healthy meals at home.

### **SNAP**

The Supplemental Nutrition Assistance Program (SNAP) is a U.S. federal program that provides financial assistance to low-income individuals and families to purchase food. It is the largest anti-hunger program in the country and is administered by the U.S. Department of Agriculture (USDA) through state agencies.

Key Features of SNAP:

- **Electronic Benefit Transfer (EBT) Card** – Recipients receive funds on an EBT card, which can be used like a debit card to buy eligible food items at authorized retailers.
- **Eligibility Requirements** – Based on income, household size, and expenses. Households must meet both gross and net income limits.
- **Eligible Purchases** – SNAP benefits can be used to buy fruits, vegetables, meat, dairy, bread, and other food staples but cannot be used for alcohol, tobacco, hot/prepared foods, or non-food items.
- **Supports Children and Families** – Many SNAP recipients are children, seniors, and people with disabilities, helping them access essential nutrition.
- **Economic Impact** – SNAP benefits also boost local economies, as every dollar spent generates economic activity in grocery stores and markets.

### Households with Food Stamps/SNAP Benefits

	Households Receiving SNAP	Households Receiving SNAP Percent
<b>Fauquier</b>	1,342	5.11%
<b>Greene</b>	780	9.86%
<b>Madison</b>	424	7.86%
<b>Orange</b>	1,080	7.36%
<b>Page</b>	1,145	12.04%
<b>Rappahannock</b>	161	5.63%
<b>Shenandoah</b>	1,975	11.11%
<b>Warren</b>	1,556	10.13%

Source: U.S. Census Bureau. American Community Survey. 2023: 5-Year Estimates Data Profiles. Table S2201.

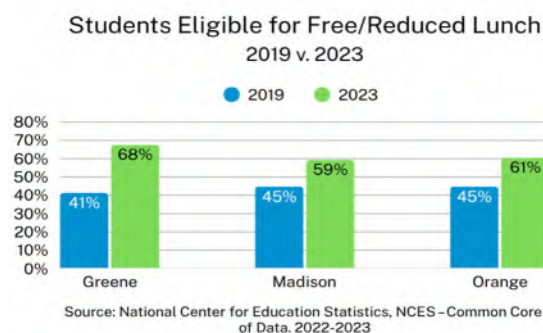
The current administration’s efforts to reduce SNAP benefits – a combination of significant funding reductions, stricter eligibility and work requirements, shrinking benefit value, reduced oversight support, and shifting financial burdens -- threaten to undermine SNAP’s role as a safety net—risking increased food insecurity, especially among vulnerable families and children.

### School Lunch Program

The National School Lunch Program (NSLP) is a federally assisted meal program in the U.S. that provides nutritionally balanced, low-cost, or free lunches to millions of children in public and nonprofit private schools, as well as residential child care institutions. It is administered by the U.S. Department of Agriculture (USDA) and has been in place since 1946.

Hunger has a significant negative impact on a student's ability to learn, including:

- **Cognitive Functioning:** Hunger impairs concentration, memory, and problem-solving skills, making it harder for students to absorb and retain information.
- **Energy and Focus:** Without proper nutrition, students often feel fatigued, leading to reduced attention spans and difficulty staying engaged in lessons.
- **Behavior and Emotional Regulation:** Hunger can cause irritability, anxiety, and increased stress, which may result in behavioral issues or difficulty interacting with peers and teachers.





- **Academic Performance:** Studies show that students who experience food insecurity often have lower test scores, higher rates of absenteeism, and decreased overall academic achievement.
- **Physical Health:** Malnutrition weakens the immune system, leading to more illnesses and missed school days, further disrupting learning.
- **Long-Term Effects:** Chronic hunger can have lasting consequences, including lower graduation rates and reduced career opportunities in adulthood.

Programs like school breakfast and lunch initiatives help mitigate these issues by ensuring students have access to the nutrition they need to succeed.

Public schools in Skyline CAP's service area currently offer free breakfast and lunch to all students through the Community Eligibility Provision (CEP). The Community Eligibility Provision (CEP) began in the 2011–2012 school year as part of a pilot program in several states under the Healthy, Hunger-Free Kids Act of 2010. It was then expanded nationwide in the 2014–2015 school year, allowing any eligible school district in the U.S. to participate.

The CEP allows schools and school districts with high percentages of low-income students to provide free breakfast and lunch to all students, without requiring families to submit individual meal applications. Eligibility is based on the Identified Student Percentage (ISP) — the share of students who are directly certified for free meals through participation in other assistance programs such as SNAP (Supplemental Nutrition Assistance Program) and TANF (Temporary Assistance for Needy Families). Schools can participate if their ISP is at least 40%.

Skyline CAP Head Start provides a healthy breakfast and lunch each day to children enrolled in its program.

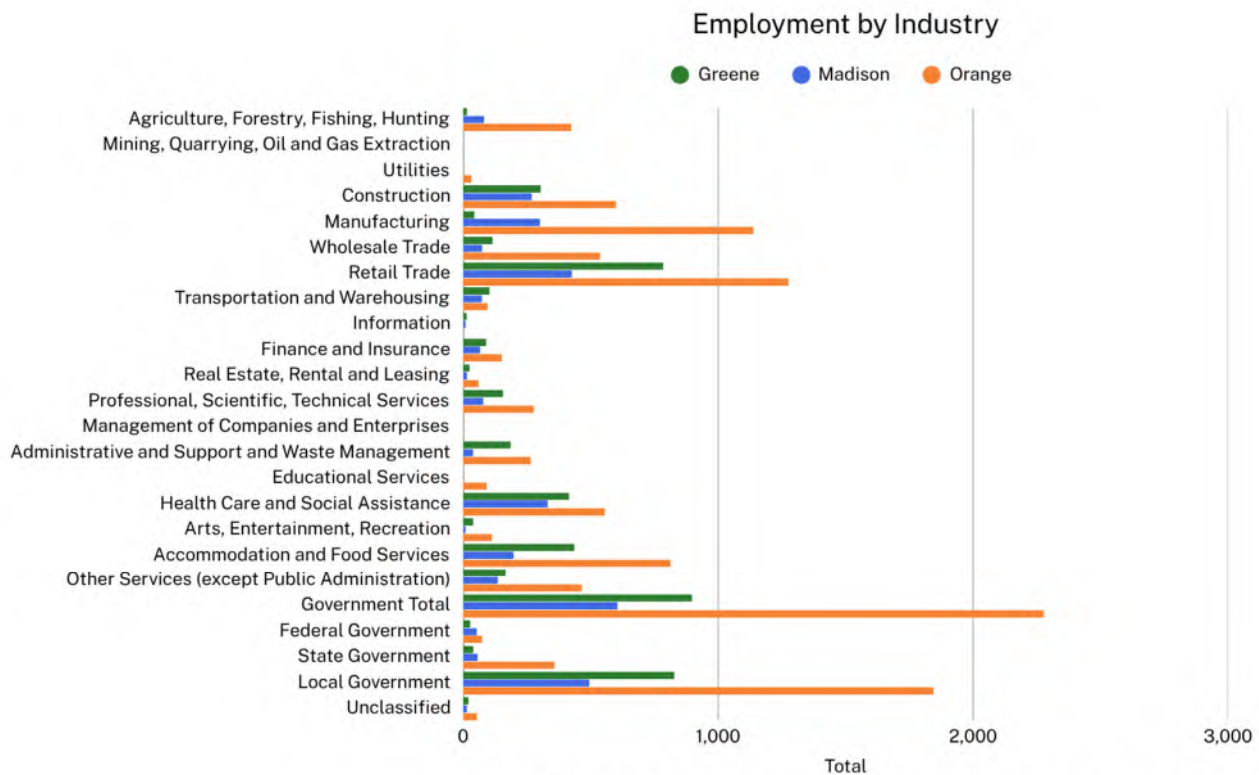
## Economic/Infrastructure

### Employment by Industry

Skyline CAP's service area—Greene, Madison, and Orange Counties—continues to experience a stable but limited local employment base, with most residents commuting outside their home counties for work. The region's rural and small-community character shapes both the opportunities and constraints of its labor market. Employment is concentrated in a few core sectors:

- Education and Health Services
- Retail Trade and Accommodation/Food Services
- Local Government and Public Administration
- Construction and Light Manufacturing

Most employers are small businesses, with fewer than 10 employees, limiting opportunities for wage advancement and benefits. Wage data show significant variation by sector, with construction and manufacturing offering the highest average weekly wages, while retail and service jobs remain near or below living-wage levels. Across the broader Piedmont region, the mean hourly wage is approximately \$32.70, with a median of \$24.38, but local averages are typically lower.

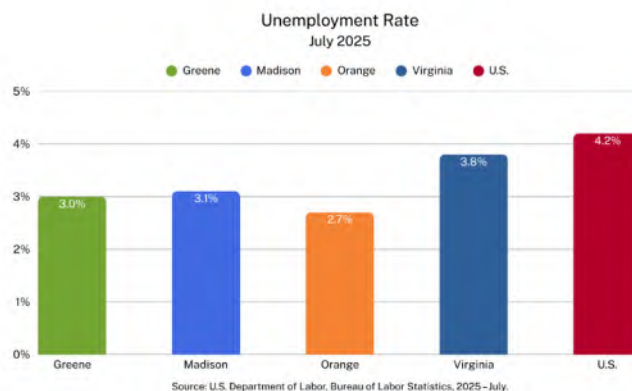


Source: Virginia Works, Economic Information & Analytics, Quarterly Census of Employment and Wages (QCEW), 1st Quarter 2025.

## Unemployment

Unemployment rates remain low across all three counties, typically between 2.5% and 3.2% (2024–2025 averages), signaling a tight labor market rather than widespread joblessness.

These figures indicate that the local counties served by Skyline CAP are experiencing more favorable employment conditions compared to the broader state and national landscapes. The lower unemployment rates in these counties suggest a robust local economy with ample employment opportunities.



## Transportation

Transportation in rural communities poses significant challenges, particularly for low-income residents who rely heavily on personal vehicles. The high costs of car ownership—including fuel, insurance, and maintenance—place significant strain on limited household budgets, and fluctuating gas prices disproportionately affect those who must travel long distances for work, healthcare, and essential services. Seniors and individuals with disabilities face additional mobility barriers due to limited specialized transportation options.

In Skyline CAP’s 2025 Community Needs Assessment survey, 22% of respondents identified transportation as a top issue for their household. Among these, 8% reported being unable to afford a vehicle, and 10% cited difficulty paying for repairs or maintenance. Transportation concerns also surfaced prominently in focus group discussions, particularly in relation to accessing medical care and prescription services.

Rural counties such as Greene, Madison, and Orange typically lack robust public transportation systems, making it difficult for residents without personal vehicles to reach jobs, healthcare providers, and social services. Rideshare services such as Uber and Lyft have limited availability in these areas and, when accessible, are often prohibitively expensive.

A few regional programs help fill these critical gaps. The Partnership for Accessible Transportation Help (PATH)—operated by the Thomas Jefferson Planning District Commission and serving Virginia’s Region 10, including Greene County—offers free transportation information and referral services, focusing on older adults and individuals with disabilities who cannot drive. In Madison and Orange Counties, Encompass Community Supports (ECS) (formerly Rappahannock-Rapidan Community Services) provides a comprehensive transportation program that includes senior center shuttles, non-emergency medical transportation, and mobility assistance to support residents’ independence.

Despite these supports, the high and rising cost of transportation remains a major barrier to economic stability. According to the American Automobile Association (AAA), the average annual cost of owning and operating a vehicle reached \$11,600 in 2025, a 40% increase since 2015. With few public transit options, most residents must rely on personal vehicles. For example, the average one-way commute in Orange County is 38.5 minutes, and households own roughly two vehicles each.

## Vehicle Access by County, 2025

County	Total Households	HH with no vehicle	Percent
Greene	7,912	227	2.87
Madison	5,392	166	3.07
Orange	14,667	599	4.08

Source: U.S. Census Bureau. American Community Survey. 2023 5-Year Estimates. Table B08201

## Commuting Patterns

Commuting patterns within Skyline CAP's service area demonstrate that far more residents travel outside their home county for work than those who both live and work locally. This pattern reflects limited employment opportunities within county borders and reinforces the importance of reliable personal transportation for economic participation.

The prevalence of out-commuting highlights the dependence on personal vehicles: thousands of residents must travel across county lines daily for employment, often to Charlottesville, Culpeper, or Fredericksburg. For low-income families, these long commutes translate into higher fuel consumption, greater vehicle wear and tear, and increased financial stress.

For families who do own vehicles—particularly older, less fuel-efficient models—ongoing expenses for fuel, insurance, and repairs consume a disproportionate share of household income. Without affordable, dependable transportation alternatives, many households in Skyline CAP's service area must make difficult tradeoffs between maintaining mobility and meeting basic needs such as housing, food, and healthcare.

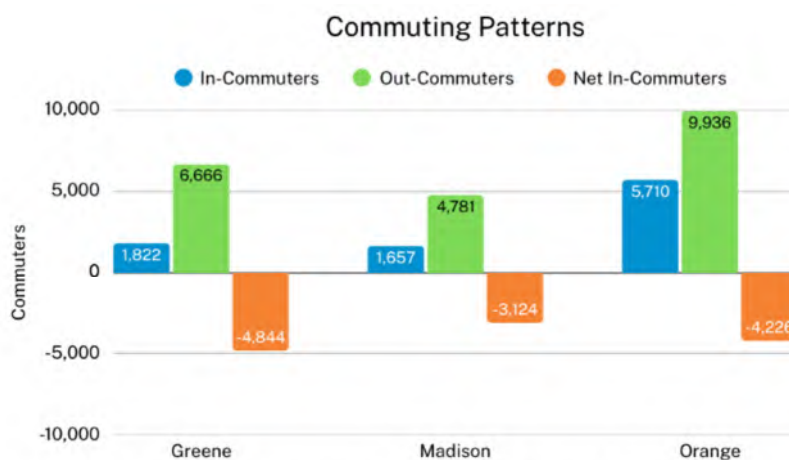
Addressing transportation affordability and accessibility is therefore essential to improving economic mobility, workforce participation, and overall quality of life across Greene, Madison, and Orange Counties.

Potential solutions and improvements include:

- Expansion of on-demand transit services tailored to rural needs.
- Increased funding for community-based transportation programs.
- Partnerships with local businesses and healthcare providers to support transportation assistance.
- Enhancing volunteer driver programs to help seniors and disabled residents.

## Broadband Access

Reliable, high-speed internet is increasingly essential for education, healthcare, business, and everyday life. However, many rural communities—including Greene, Madison, and Orange counties—continue to face persistent barriers to broadband access.



Source: Virginia Employment Commission. Virginia Community Profiles. Jan. 22, 2025.

Due to low population density and challenging terrain such as mountains and forests, it is often cost-prohibitive for internet service providers (ISPs) to invest in broadband infrastructure in these areas. As a result, many communities remain underserved or unserved, relying on outdated technologies like DSL or satellite, which offer significantly slower speeds than modern cable or fiber-optic networks. Even in areas where broadband is technically available, actual speeds often fall below the Federal Communications Commission's (FCC) minimum standard for high-speed internet (25 Mbps download / 3 Mbps upload). Furthermore, limited ISP competition contributes to high costs, making broadband unaffordable for many households and deepening the digital divide.

Despite these challenges, local governments and regional partners have launched several initiatives to expand broadband access and improve digital equity. The following highlights current efforts and ongoing challenges in Greene, Madison, and Orange counties:

- Greene County is actively working to expand broadband access through the Regional Internet Service Expansion (RISE) project, led by Firefly Fiber Broadband. To support this effort, the county contributed \$2.6 million toward a 2023 Virginia Telecommunication Initiative (VATI) grant and an additional \$80,000 toward the 2024 VATI grant. The project aims to deliver gigabit-speed fiber internet to over 5,825 currently underserved locations within the next two years.
- Broadband expansion in Madison County is progressing through two major initiatives. The RISE project, similar to Greene's, includes Madison as part of a regional plan to reach more than 36,000 locations across multiple counties. However, a parallel project by Brightspeed has encountered significant delays. The company has failed to meet key project milestones and provide timely updates, prompting county officials to consider reallocating Brightspeed's service areas to Firefly in order to maintain momentum and ensure timely delivery of services.
- Orange County has established the Orange County Broadband Authority, operating under the name FiberLync, to lead its broadband efforts. Recognizing the limitations of private-sector investment in rural infrastructure, FiberLync leverages existing assets—such as dark fiber and multi-tenant towers—to lower deployment costs and attract ISPs. This innovative, public-private approach aims to provide affordable, reliable broadband access to unserved and underserved residents and businesses across the county.

# Children & Youth

## Child Care

Access to quality, affordable child care remains a significant challenge across Virginia and is particularly acute within Skyline CAP’s service area of Greene, Madison, and Orange Counties. Families and providers alike are struggling within a system that no longer meets community needs. In Skyline CAP’s 2025 Community Needs Assessment survey, affordable child care ranked as the second highest concern, cited by 39.22% of respondents, while 34% reported that affordable care is simply not available in their communities.

### Child Care Facilities in Skyline CAP’s Service Area

Location	Total Child Care Centers		Licensed Centers		Serves Age 5 and Under		Full-Time		Newborn Care	Accepts Subsidies
	Centers	Capacity	Centers	Capacity	Centers	Capacity	Centers	Capacity	Centers	Centers
Greene	7	639	6	579	5	340	5	340	1	5
Madison	5	336	2	160	5	318	5	336	2	2
Orange	20	838	15	715	16	440	17	744	10	13

Source: Virginia Department of Social Services. Child care facility search.

Across Greene, Madison, and Orange Counties, the shortage of licensed, high-quality child care providers has created widespread barriers for working families. Existing centers often maintain long waiting lists, especially for infants and toddlers, and many do not accommodate non-traditional work schedules. In rural areas, transportation challenges further limit access, while the few licensed providers that remain frequently operate at or near capacity. These shortages not only affect family stability but also hinder local workforce participation, as parents—particularly mothers—are often forced to reduce work hours or leave employment altogether.

For many parents, the cost of child care rivals or exceeds expenses such as housing or college tuition, forcing difficult choices between work and family. Securing care—especially for infants or during nontraditional hours—is increasingly challenging, and long waitlists, transportation barriers, and concerns about quality further limit access.

### Cost of Care in Skyline CAP’s Service Area – Full-Time Center-Based (average)

Age	Average Weekly Cost Per Child	Annual Child Care Cost Per Child
Infant	\$331	\$17,212
Toddler	\$293	\$15,236
2 Years	\$273	\$14,196
3 Years	\$254	\$13,208
4 Years	\$243	\$12,636
5 Years	\$243	\$12,636

Note: Data collected by the author via phone interviews with representatives of five (5) licensed child care centers.

The cost of child care in the region remains prohibitive for many families, often rivaling housing or college tuition costs. One key stakeholder, an instructional assistant in the local school system, shared that despite steady employment, she cannot afford to enroll her child in a licensed daycare program. Her income is slightly above the eligibility threshold for Head Start, leaving her without access to public early education support. She also noted that most licensed providers within commuting distance, particularly near Charlottesville, maintain lengthy waitlists, forcing her to rely on an unlicensed caregiver instead of a structured early learning environment.

When asked about the broader impact of the child care shortage, she observed that children entering kindergarten often lack foundational literacy and social skills, which she believes is a direct reflection of limited



access to quality early learning experiences. This insight underscores the urgent need to expand affordable, licensed child care options and to strengthen early education pathways for families across the Skyline CAP service area.

Providers, meanwhile, face their own uphill battle. Most operate on razor-thin margins, with staff earning some of the lowest wages in any sector. Strict licensing standards and regulatory requirements are necessary for safety but drive costs higher. Many child care centers cannot afford to accept public subsidies due to low reimbursement rates, and fluctuating enrollment makes it hard to stay afloat.

At the heart of the crisis is a broken economic model: parents can't afford to pay more, and providers can't afford to charge less.

In 2024, Virginia lawmakers attempted to address this dilemma with legislation to encourage employer support. House Bill 1216 proposed a pilot program offering state matching funds to employers who helped cover their employees' child care costs. However, the bill stalled in committee, and although the House included funding for the program in its proposed budget, it was removed in the final budget agreement.

With the failure to advance this initiative, Virginia lost a key opportunity to involve employers in easing the child care burden. Advocates say systemic solutions—including public investment, policy reform, and innovative partnerships—are still urgently needed to ensure child care is accessible, sustainable, and supportive of both working families and the providers who serve them.

## Healthy Families

The Healthy Families program plays a critical role in promoting child development and family stability across Skyline CAP's service area through voluntary, evidence-based home visiting for expectant parents and families with young children. Operating in Fauquier, Madison, Orange and Rappahannock, the program supports positive parenting, child health, and early attachment, helping to reduce risk factors for child maltreatment and strengthen family functioning. However, program capacity remains limited due to funding and staffing constraints, and its absence in Greene County creates a notable service gap in early intervention and family support. Families in Greene often rely on fragmented resources that lack the intensive, relationship-based follow-up Healthy Families provides, despite rising rates of child poverty and housing instability. The program's preventive approach aligns closely with Skyline CAP's mission, offering a strong platform for early intervention and family empowerment. Opportunities exist to expand or replicate Healthy Families in Greene County through partnerships with local social services, healthcare providers, and early childhood organizations, supported by data-driven funding proposals and regional grant collaboration. Strengthening workforce capacity, improving interagency coordination, and expanding geographic coverage would help ensure all families in Skyline CAP's region have equitable access to early support systems that foster healthy, resilient children.

## Foster Care

Virginia has taken meaningful steps—legislative, fiscal, and procedural—to strengthen its foster care system. Reforms in recent years have aimed to improve permanency outcomes, expand kinship care, and support the workforce. However, enduring challenges persist: too few kinship placements, high caseworker turnover, limited respite support for foster families, and a high proportion of youth aging out of care without permanent homes. Sustained investment, strong oversight, and continued community engagement are essential to ensure that current reform efforts translate into meaningful and lasting improvements for children and families.

## Language and Cultural Barriers

Non-English-speaking families face additional and often invisible barriers within the foster care system. These challenges can delay reunification, increase trauma for children, and contribute to systemic inequities. Language barriers affect nearly every stage of the process— from initial contact with child welfare agencies to court proceedings and service delivery—ultimately leading to poorer outcomes for both children and families.

Many local Departments of Social Services (DSS) struggle to secure qualified interpreters for court hearings, home visits, and service referrals. Critical documents such as case plans, court notices, and medical records are often available only in English. Misunderstandings rooted in language and cultural differences can result in inaccurate perceptions of neglect or noncompliance. Some families may also hesitate to communicate openly with caseworkers due to fear of deportation, stigma, or confusion about the legal process.

Furthermore, non-English-speaking parents frequently experience delays in accessing required services such as parenting classes, counseling, or substance use treatment if those programs are offered only in English. These delays can prolong the time children spend in foster care or even result in unnecessary terminations of parental rights.

## Local Data and Initiatives

As of early 2025, more than 100 children were in the foster care system within Skyline CAP's service area. Localities continue to implement targeted programs aimed at prevention, reunification, and long-term stability:

- **Greene County** offers intensive family services through its *Foster Care Prevention & Family Preservation* program to help avoid placement or shorten the duration of care. The county reports a reunification rate of approximately 61%, outpacing many localities across Virginia.
- **Madison County** benefits from the expansion of *Piedmont Court Appointed Special Advocates (CASA)*, which has increased access to court-appointed advocates and transitional support for youth.
- **Orange County** recently saw *Piedmont CASA* expand into the area, adding capacity for 50–80 new youth advocacy cases annually. The county also operates *Fostering Futures*, a program that supports aged-out youth through age 21, providing extended services and stability during the transition to adulthood.

All three counties benefit from active partnerships with *CASA* and ongoing foster parent recruitment efforts. However, significant needs remain, including the limited availability of bilingual foster homes, shortages in local placements, and uneven access to kinship care. Addressing these gaps—particularly for linguistically diverse families—will be key to ensuring that all children in the region have equitable opportunities for safety, stability, and belonging.

# Conclusion

The 2025 Skyline CAP Community Needs Assessment provides a vital roadmap for understanding the conditions driving poverty across Greene, Madison, and Orange counties. It highlights an urgent call to action and underscores the need for coordinated strategies that strengthen families, expand opportunity, and build resilient communities.

Four critical priorities consistently rose to the forefront through data analysis and community input:

- **Affordable Housing** – Rising rents, limited availability, and long waitlists for assistance programs leave many families cost-burdened, precariously housed, or facing eviction. The lack of safe, affordable housing undermines both stability and economic mobility.
- **Child Care** – Families struggle to secure affordable, high-quality care—particularly for infants and during nontraditional hours. These challenges not only affect child development but also limit parents’ ability to work, advance in their careers, and achieve financial independence.
- **Food Security** – Thousands of households, including many who do not qualify for federal assistance, rely heavily on food pantries and other charitable resources. This growing demand points to the urgent need for more sustainable and coordinated strategies to combat hunger.
- **Transportation** – Limited and costly transportation options, particularly in rural areas, hinder access to jobs, healthcare, and essential services. For many residents, the absence of reliable transit remains a major barrier to self-sufficiency.

Using the Results Oriented Management and Accountability (ROMA) framework, Skyline CAP categorized the impact of community needs across three levels: Family, Community, and Agency. This approach helps illustrate how challenges affect households directly, influence broader community conditions, and inform agency practices and strategies.

The four critical priorities identified in this assessment—Affordable Housing, Child Care, Food Security, and Transportation—primarily affect families while also reflecting larger systemic or community-level challenges. The following table summarizes the ROMA alignment of each priority:

Priority	Primary ROMA Level	Secondary ROMA Level
Affordable Housing	Family	Community
Child Care	Family	Community
Food Security	Family	Community
Transportation	Community	Family

**Explanation:**

- Affordable Housing, Child Care, and Food Security primarily impact families by influencing stability, child development, and access to basic needs. However, they also represent community-level issues that require systemic solutions, such as policy change, resource coordination, and infrastructure improvements.
- Transportation is primarily a community-level challenge, particularly in rural areas, as limited transit affects access to employment, healthcare, and essential services. Its secondary impact is felt by families who face barriers to self-sufficiency and opportunity.

This ROMA-based framework provides a clear lens for understanding both the immediate and broader implications of Skyline CAP's community priorities, guiding strategic planning and program development.

Taken together, these findings paint a clear picture of the complex, interconnected challenges facing low-income families in the region. Addressing them will require innovative solutions, strategic investment, and strong partnerships across sectors. Skyline CAP remains committed to leading this work—amplifying community voices, driving collaboration, and advancing equity so that every resident has the opportunity to thrive.

## Community Resources

### Social Services

- Fauquier County Department of Social Services
- Greene County Department of Social Services
- Madison County Department of Social Services
- Orange County Department of Social Services
- Rappahannock County Department of Social Services
- Page County Department of Social Services
- Warren County Department of Social Services

### Emergency Services

- Choices, Inc.
- Culpeper Housing and Shelter Services
- Madison Emergency Services Association (MESA)
- Fauquier Family Shelter Services
- Greene Alliance of Church / Community Efforts (GRACE)
- House of Hope
- Neighbors in Need Ministries
- SAFE (Services to Abused Families)
- Shelter for Help in Emergency – Charlottesville

### Health/Medical

- Encompass Community Supports (formerly Rappahannock-Rapidan Community Services Board)
- Greene Care Clinic
- Greene County Health Department
- Fauquier Free Clinic
- Health Connect America
- Madison Free Clinic
- Madison County Health Department
- Mental Health Association of Fauquier County
- Orange County Free Clinic
- Orange County Health Department
- Paul Stefan Home
- Piedmont Regional Dental Clinic
- Region Ten Community Services Board
- THRIVE Pregnancy Center
- Page County Health Department
- Warren County Health Department

## **Food Resources**

- Blue Ridge Area Food Bank
- Etlan Community Church Food Pantry
- Madison Emergency Services Association (MESA)
- Feeding Greene
- Fauquier Community Food Bank
- Fauquier FISH
- Love Outreach Food Pantry (Orange)
- Madison United for Nutrition & Community Health (MUNCH)
- Orange Mobile Food Pantry
- Reva Mobile Food Pantry
- Page One of Shenandoah and Luray
- Single Stop Food Pantries

## **Housing**

- Albemarle Housing Improvement (AHIP)
- Foothills Housing Network
- Greene County Habitat for Humanity
- Habitat for Humanity of Greater Charlottesville
- Virginia Housing Association (VHA)
- Shenandoah Alliance for Shelter

## **Regional Coalitions**

- Aging Together
- Heroes Bridge
- Regional Transportation Collaborative (RTC) Mobility Center
- Virginia Department of Rehabilitative Services



## Appendices

### Appendix A: Demographic Data Tables

**Table 1: Population Growth by County**

County	2010	2020	2030	2040	2050	Percentage of Growth 2050 over 2020
<b>Total Area</b>	243,388	262,626	275,956	292,310	317,462	21%
<b>Fauquier</b>	65,203	72,972	77,588	84,812	93,171	28%
<b>Greene</b>	18,403	20,552	22,887	24,876	27,366	33%
<b>Madison</b>	13,308	13,837	14,060	14,496	15,064	9%
<b>Orange</b>	33,481	37,051	40,559	43,056	47,995	30%
<b>Page</b>	24,042	23,933	22,984	22,507	22,637	-5%
<b>Rappahannock</b>	7,373	7,348	7,401	7,329	7,467	2%
<b>Shenandoah</b>	41,993	44,186	45,531	47,420	51,666	17%
<b>Warren</b>	37,575	40,727	42,916	45,774	50,046	23%

Source: University of Virginia Weldon Cooper Center for Public Service. (2025). Virginia Population Projections. Retrieved from <https://coopercenter.org/virginia-population-projections>

**Table 2: Population Growth by Age (0-4)**

County	2010	2020	2030	2040	2050	2050 v 2020
<b>Total Area</b>	15,729	16,651	15,851	17,720	18,866	13%
<b>Fauquier</b>	3,463	4,084	3,707	4,639	4,948	21%
<b>Greene</b>	1,211	1,179	1,172	1,407	1,491	26%
<b>Madison</b>	787	682	686	755	791	16%
<b>Orange</b>	1,931	2,111	2,043	2,335	2,548	21%
<b>Page</b>	1,302	1,318	1,143	1,112	1,130	-14%
<b>Rappahannock</b>	332	315	279	284	277	-12%
<b>Shenandoah</b>	2,322	2,486	2,341	2,561	2,815	13%
<b>Warren</b>	2,371	2,456	2,450	2,587	2,816	15%

Source: University of Virginia Weldon Cooper Center for Public Service. (2025). Virginia Population Projections. Retrieved from <https://coopercenter.org/virginia-population-projections>

**Table 3: Population Growth by Age (5-19)**

County	2010	2020	2030	2040	2050	2050 v 2020
<b>Total Area</b>	63,458	62,957	61,955	66,903	77,137	23%
<b>Fauquier</b>	13,728	13,964	13,719	14,996	18,791	35%
<b>Greene</b>	3,779	3,923	3,631	3,912	4,789	22%
<b>Madison</b>	2,588	2,212	2,276	2,372	2,714	23%
<b>Orange</b>	6,219	6,423	6,590	6,990	8,649	35%
<b>Page</b>	4,534	3,924	3,726	3,666	3,683	-6%
<b>Rappahannock</b>	1,306	1,015	974	964	1,005	-1%
<b>Shenandoah</b>	7,796	7,565	7,646	8,056	9,393	24%
<b>Warren</b>	7,779	7,280	7,541	8,226	9,247	27%

Source: University of Virginia Weldon Cooper Center for Public Service. (2025). Virginia Population Projections. Retrieved from <https://coopercenter.org/virginia-population-projections>

**Table 4: Population Growth by Age (20-64)**

County	2010	2020	2030	2040	2050	2050 v 2020
<b>Total Area</b>	202,601	208,991	209,304	221,061	245,407	17%
<b>Fauquier</b>	36,964	40,983	43,005	46,932	51,224	25%
<b>Greene</b>	10,867	11,276	12,817	13,583	14,779	31%
<b>Madison</b>	7,792	7,343	7,293	7,538	7,812	6%
<b>Orange</b>	18,885	21,303	21,899	22,625	24,888	17%
<b>Page</b>	14,156	13,376	11,689	11,068	11,500	-14%
<b>Rappahannock</b>	4,418	3,886	3,727	3,602	3,822	-2%
<b>Shenandoah</b>	23,761	24,040	23,665	24,319	26,798	11%
<b>Warren</b>	22,300	23,827	23,255	24,493	27,446	15%

Source: University of Virginia Weldon Cooper Center for Public Service. (2025). Virginia Population Projections. Retrieved from <https://coopercenter.org/virginia-population-projections>

**Table 5: Population Growth by Age (65+)**

County	2010	2020	2030	2040	2050	2050 v 2020
<b>Total Area</b>	36,528	51,101	66,653	71,248	72,016	41%
<b>Fauquier</b>	8,816	12,330	17,157	18,246	18,208	48%
<b>Greene</b>	2,224	3,753	5,266	5,974	6,306	68%
<b>Madison</b>	2,175	3,075	3,806	3,832	3,746	22%
<b>Orange</b>	5,695	7,858	10,027	11,106	11,871	51%
<b>Page</b>	4,124	5,315	6,426	6,661	6,324	19%
<b>Rappahannock</b>	1,320	2,044	2,422	2,479	2,363	16%
<b>Shenandoah</b>	7,506	9,814	11,880	12,484	12,660	29%
<b>Warren</b>	4,668	6,912	9,670	10,468	10,537	52%

Source: University of Virginia Weldon Cooper Center for Public Service. (2025). Virginia Population Projections. Retrieved from <https://coopercenter.org/virginia-population-projections>

**Table 6: Population by Race**

County	Population	American Indian	Asian	Black/African American	Pacific Islander	White	Two or More Races	Hispanic / Latino
Fauquier	75,165	1.4%	2.8%	9.5%	0.3%	89.3%	3.2%	13.2%
Greene	21,301	1.3%	2.9%	9.9%	0.2%	88.9%	3.2%	7.7%
Madison	14,128	1.2%	1.4%	10.5%	0.1%	89.6%	2.8%	4.3%
Orange	38,574	1.4%	2.2%	15%	0.3%	84.7%	3.4%	7.4%
Page	23,741	0.9%	1%	3.6%	0.1%	96.4%	1.9%	2.7%
Rappahannock	7,414	1.4%	1.9%	5.4%	0.2%	93.6%	2.5%	5.1%
Shenandoah	45,228	1.3%	1.6%	4.8%	0.2%	94.4%	2.2%	9.6%
Warren	41,843	1.5%	2.3%	7.3%	0.2%	91.9%	3.1%	7.9%

Source: U.S. Census Bureau, 2023 Population Estimates. Data formatted and posted at <http://demographics.coopercenter.org> by the UVA Weldon Cooper Center, Demographics Research Group.

**Table 7: Population by Ethnicity**

County	Census April 1, 2020			Population Estimate July 1, 2023			April 1, 2020 – July 1, 2023	
	Total Population	Hispanic or Latino Population		Total Population	Hispanic or Latino Population		Change in Hispanic or Latino Population	
Fauquier	72,694	7,764	10.6%	75,165	9,948	13.2%	2,184	28.1%
Greene	20,554	1,327	6.5%	21,301	1,644	7.7%	317	23.9%
Madison	13,841	426	3.1%	14,128	601	4.3%	175	41.1%
Orange	36,186	2,154	6.0%	38,574	2,843	7.4%	689	32.0%
Page	23,709	507	2.1%	23,741	646	2.7%	139	27.4%
Rappahannock	7,349	300	4.1%	7,414	377	5.1%	77	25.7%
Shenandoah	44,190	3,702	8.4%	45,228	4,323	9.6%	621	16.8%
Warren	40,721	2,393	5.9%	41,843	3,320	7.9%	927	38.7%

Source: U.S. Census Bureau, 2023 Population Estimates. Data formatted and posted at <http://demographics.coopercenter.org> by the UVA Weldon Cooper Center, Demographics Research Group.

**Table 8: Population – Veterans**

County	Total Population Age 18+	Total Veterans	Veterans, Percent of Total Population
Fauquier	56,588	5,691	10.06%
Greene	15,941	1,589	9.97%
Madison	11,127	744	6.69%
Orange	29,175	3,041	10.42%
Page	19,010	1,571	8.26%
Rappahannock	6,102	573	9.39%
Shenandoah	34,996	3,420	9.77%
Warren	32,224	2,958	9.18%
Virginia	6,632,763	637,971	9.62%

Source: U.S. Census Bureau, American Community Survey. 2019-23.

**Table 9: HHS Federal Poverty Guidelines – 2025**

Household Size	100%	130%	200%
1	\$ 15,650	\$ 20,815	\$ 31,300
2	21,150	28,130	42,300
3	26,650	35,445	53,300
4	32,150	42,760	64,300
5	37,650	50,075	75,300
6	43,150	57,390	86,300
7	48,650	64,705	97,300
8	54,150	72,020	108,300

Source: U.S. Department of Health and Human Services. Office of the Assistant Secretary for Planning and Evaluation. HHS Poverty Guidelines for 2025. Retrieved from <https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines>

**Table 10: Median Household Income**

County	HH Income	Per Capita Income	Poverty
Fauquier	\$129,495	\$55,863.58	6.1
Greene	85,268	41,540.51	8.9
Madison	82,972	40,021.96	10.1
Orange	4,175	45,020.04	8.0
Page	59,396	31,006.03	14.2
Rappahannock	98,125	57,136.15	9.0
Shenandoah	64,437	35,359.87	9.9
Warren	84,331	39,833.96	9.3

Source: U.S. Census Bureau, American Community Survey. 2018-23.

**Table 11: Average Annual Pay**

	2024	2023	2022	2021	2020	2019
Greene	43,718	42,229	40,779	39,272	37,353	35,974
Madison	50,151	47,203	43,971	41,415	39,975	36,802
Orange	49,188	48,397	45,959	44,380	41,868	38,834

Source: Bureau of Labor Statistics. Quarterly Census of Employment and Wages. NAICS-based data files. County high-level. 2019-2024.

**Table 12: ALICE Households in Skyline CAP's Service Area**

County	In Poverty	ALICE Households	Above ALICE
Fauquier	1,634	6,934	17,698
Greene	847	2,657	4,408
Madison	401	1,629	3,362
Orange	1,478	2,889	10,300
Page	1,211	3,412	4,886
Rappahannock	151	875	1,835
Shenandoah	2,186	6,048	9,548
Warren	1,721	4,090	9,546

Source: [UnitedforALICE.org/national-overview](https://unitedforalice.org/national-overview)

**Table 13: Living Wage Calculations**

# of Children	1 ADULTS				2 ADULTS (1 WORKING)				2 ADULTS (BOTH WORKING)			
	0	1	2	3	0	1	2	3	0	1	2	3
Fauquier	27.47	41.97	51.52	64.36	35.76	42.87	47.04	53.70	17.81	23.71	28.28	33.85
Greene	25.48	40.05	48.29	60.94	33.68	40.72	44.46	50.64	16.77	22.50	26.57	31.94
Madison	22.50	38.64	48.84	61.37	30.47	37.39	41.35	46.46	15.16	21.93	26.93	32.25
Orange	21.76	36.35	45.11	58.91	29.52	36.42	40.23	46.58	14.69	20.69	25.14	30.97
Page	19.61	33.71	41.87	52.24	27.21	32.97	36.52	41.00	13.54	19.19	23.50	27.74
Shenandoah	19.76	34.16	41.15	52.25	27.93	34.92	38.56	44.04	13.89	19.47	23.19	27.78
Warren	22.84	37.21	45.19	58.07	30.78	38.57	42.58	49.10	15.32	21.25	25.29	30.65

Source: Amy K. Glasmeier, "Living Wage Calculator," Massachusetts Institute of Technology, 2025. Accessed on February 10, 2025 from <https://livingwage.mit.edu/states/51/locations>.

**Table 14: Population in Poverty**

	Total Population	Population Below FPL	Percentage
Fauquier	73,518	4,520	6.1%
Greene	20,670	2,424	11.7%
Madison	13,722	967	7.0%
Orange	36,656	3,688	10.1%
Page	23,510	2,234	9.5%
Rappahannock	7,402	700	9.5%
Shenandoah	44,140	5,440	12.3%
Warren	40,134	4,542	11.3%

Source: U.S. Census Bureau. American Community Survey. 2023 5-Year Estimates. Table S1701

**Table 15: Children Under Age 18 in Poverty**

	<b>Total Population</b>	<b>Population Below FPL</b>	<b>Percentage</b>
<b>Fauquier</b>	55,812	7,474	12.7%
<b>Greene</b>	4,815	828	17.2%
<b>Madison</b>	2,792	196	7.0%
<b>Orange</b>	7,921	1,217	15.4%
<b>Page</b>	4,696	347	7.4%
<b>Rappahannock</b>	307	175	9.4%
<b>Shenandoah</b>	9,390	1,877	20.0%
<b>Warren</b>	8,727	1,527	17.5%

Source: U.S. Census Bureau. American Community Survey. 2023 5-Year Estimates. Table S1701

**Table 16: Adults Age 65+ in Poverty**

	<b>Adults Over 65</b>	<b>Adults 65+ Below FPL</b>	<b>Percentage</b>
<b>Fauquier</b>	73,518	602	4.9%
<b>Greene</b>	3,768	468	12.4%
<b>Madison</b>	3,046	248	8.1%
<b>Orange</b>	7,322	533	7.3%
<b>Page</b>	5,059	484	9.6%
<b>Rappahannock</b>	966	75	3.8%
<b>Shenandoah</b>	9,471	754	8.0%
<b>Warren</b>	6,617	527	8.0%

Source: U.S. Census Bureau. American Community Survey. 2023 5-Year Estimates. Table S1701

**Table 17: Poverty by Gender**

	<b>Female Population</b>	<b>Females Below FPL</b>	<b>Percentage</b>	<b>Male Population</b>	<b>Males Below FPL</b>	<b>Percentage</b>
<b>Fauquier</b>	36,880	2,396	6.5%	36,638	2,124	5.8%
<b>Greene</b>	10,766	1,459	13.6%	9,904	965	9.7%
<b>Madison</b>	7,050	425	6.0%	6,672	542	8.1%
<b>Orange</b>	18,423	2,380	12.9%	18,233	1,308	7.2%
<b>Page</b>	11,756	1,173	10.0%	11,754	1,061	9.0%
<b>Rappahannock</b>	614	377	10.4%	788	323	8.5%
<b>Shenandoah</b>	22,352	3,267	14.6%	21,788	2,173	10.0%
<b>Warren</b>	19,690	2,484	12.6%	20,044	2,058	10.1%

Source: U.S. Census Bureau. American Community Survey. 2023 5-Year Estimates. Table S1701

**Table 18: Poverty by Race**

	White	Black / African American	Am. Indian / Alaska Native	Asian	Native Hawaiian / Other Pacific Islander	Some Other Race Alone	Two or More Races
<b>Fauquier</b>	6.2%	4.0%	12.6%	0.9%	0.0%	15.8%	6.3%
<b>Greene</b>	7.6%	38.4%	0.0%	5.1%	0.0%	48.7%	15.3%
<b>Madison</b>	6.7%	7.5%	0.0%	0.0%	0.0%	6.2%	11.3%
<b>Orange</b>	8.8%	21.5%	0.0%	4.6%	0.0%	0.0%	11.1%
<b>Page</b>	9.6%	16.2%	40.0%	37.8%	0.0%	7.5%	1.7%
<b>Rappahannock</b>	7.8%	48.6%	33.3%	0.0%	0.0%	5.5%	0.0%
<b>Shenandoah</b>	11.8%	36.3%	28.1%	2.6%	0.0%	23.6%	5.7%
<b>Warren</b>	11.1%	12.6%	0.0%	45.9%	0.0%	10.0%	6.5%

Source: U.S. Census Bureau. American Community Survey. 2023 5-Year Estimates. Table S1701.

**Table 19: Babies Born by Medicaid as Payment Source**

Babies Born by Medicaid as Payment Source				
Location	2020		2022	
	Number	Percent	Number	Percent
<b>Fauquier</b>	155	21.7	134	15.8
<b>Greene</b>	57	23.4	59	20.7
<b>Madison</b>	37	29.4%	30	24.2
<b>Orange</b>	120	30.5	149	26.5
<b>Page</b>	75	32.5	63	46.7
<b>Rappahannock</b>	10	20.8	17	30.4
<b>Shenandoah</b>	194	37.5	150	38.3
<b>Warren</b>	152	33.9	151	28.5

Source: Annie E. Casey Foundation: [datacenter.kidscount.org](https://datacenter.kidscount.org)

**Table 20: Estimates of Household Wealth and Financial Access**

	Asset Poverty Rate	Liquid Asset Poverty Rate	Households with Zero Net Worth	Unbanked Households	Underbanked Households
<b>Fauquier</b>	12%	21%	8%	4%	12%
<b>Greene</b>	17%	15%	7%	4%	10%
<b>Madison</b>	24%	14%	4%	6%	11%
<b>Orange</b>	14%	27%	10%	4%	13%
<b>Page</b>	19%	36%	11%	4%	13%
<b>Rappahannock</b>	11%	18%	7%	4%	8%
<b>Shenandoah</b>	18%	33%	11%	4%	13%
<b>Warren</b>	17%	24%	8%	5%	11%

Source: Prosperity Now Scorecard, January 2020.



**Table 21: Monthly Family Budget Calculator – 1 Adult, 2 Children**

	Greene Co.	Madison Co.	Orange Co.
<b>Housing</b>	\$1,674	\$1,040	\$1,187
<b>Food</b>	698	698	727
<b>Child Care</b>	1,449	1,839	1,615
<b>Transportation</b>	1,737	1,578	1,69
<b>Health Care</b>	801	854	793
<b>Other Necessities</b>	798	585	644
<b>Taxes</b>	1,410	1,181	1,209
<b>Monthly Total</b>	<b>8,568</b>	<b>7,775</b>	<b>7,871</b>
<b>Median Household Income</b>	7,106	6,405	6,895
<b>Deficit</b>	(1,462)	(1,370)	(976)

Sources: Economic Policy Institute Family Budget Calculator, January 2025. U.S. Census Bureau. Small Area Income and Poverty Estimate. 2023.

**Table 22: Rental Vacancy Rates**

County	2018	2019	2020	2021	2022
Greene	2.9	2.6	3.1	4.8	4.0
Madison	1.5	1.6	2.5	0.0	0.0
Orange	2.9	1.4	1.1	1.3	0.8

Source: HousingForward Virginia. Rental Vacancy Rate. Retrieved from <https://housingforwardva.org/applications/sourcebook/rental-vacancy/>

**Table 23: Cost Burdened Households**

Area	Total Housing Units	Owner-Occupied with Mortgage	Owner Occupied with Mortgage – Cost-Burdened	%	Occupied – Paying Rent	Renter Paying 30% or More of Income	%
Greene	7,912	4,112	868	21.11	1,616	496	30.69
Madison	5,392	2,562	656	25.60	1,102	312	28.31
Orange	14,667	7,900	1,425	18.04	3,256	1,235	37.93
Virginia	3,326,260	1,503,837	370,540	24.64	1,091,768	488,400	44.73

Source: U.S. Census, American Community Survey, 2019-23.

**Table 24: Fair Market Rent – FY2025**

County	Efficiency	1-Bedroom	2-Bedroom	3-Bedroom	4-Bedroom
Greene County	\$1,404	\$1,487	\$1,729	\$2,155	\$2,621
Madison County	907	913	1,096	1,361	1,609
Orange County	899	905	1,117	1,565	1,783

Source: HUD User, Office of Policy Development and Research, FY2025 Fair Market Rent Documentation System. Retrieved from <https://www.huduser.gov/portal/datasets/fmr.html>

**Table 25: Fair Market Rent – 2019 / 2025**

	Efficiency			1-Bedroom			2-Bedroom			3-Bedroom			4-Bedroom		
	2019	2025	%	2019	2025	%	2019	2025	%	2019	2025	%	2019	2025	%
<b>Greene</b>	851	1,404	65%	1,146	1,487	30%	1,325	1,729	30%	1,660	2,155	30%	2,013	2,621	30%
<b>Madison</b>	646	907	40%	774	913	18%	961	1,096	14%	1,204	1,361	13%	1,245	1,565	26%
<b>Orange</b>	578	899	56%	747	905	21%	861	1,117	30%	1,245	1,565	26%	1,425	1,783	25%

Source: HUD User, Office of Policy Development and Research, FY2025 Fair Market Rent Documentation System. Retrieved from <https://www.huduser.gov/portal/datasets/fmr.html>

**Table 26: 2-Bedroom Affordability**

	Housing Wage	Fair Market Rent	Annual Income Needed	Estimated Mean Renter Wage	Affordable Rent
<b>Greene</b>	\$32.27	\$1,678	\$67,120	\$17.23	\$896
<b>Madison</b>	20.00	1,040	41,600	12.11	630
<b>Orange</b>	22.83	1,187	47,480	13.46	700

Source: National Low Income Housing Coalition. Out of Reach. 2024. Retrieved from <https://nlihc.org/oor/state/va>

**Table 27: 2-Bedroom Affordability at Minimum Wage (\$12.41)**

	Fair Market Rent	Number of Hours Needed Each Week to Afford*	# of Jobs
<b>Greene</b>	\$1,678	104.1	2.6
<b>Madison</b>	\$1,040	64.51	1.61
<b>Orange</b>	\$1,187	73.63	1.8

\*without being cost burdened

**Table 28: Housing Units**

Area	Total Occupied	Owner-Occupied	%	Renter Occupied	%	Total Vacant	%
<b>Greene</b>	7,912	6,296	79.6	1,616	20.4	775	8.9
<b>Madison</b>	5,392	4,290	79.6	1,102	20.4	718	11.8
<b>Orange</b>	14,667	114,711	77.8	3,256	22.2	1,228	7.7

Source: US Census Bureau, American Community Survey. 2023 5-Year Estimates. Table DP04.

**Table 29: Residential Building Permits**

	Greene County		Madison County		Orange County	
	Single-Family	Multi-Family	Single-Family	Multi-Family	Single-Family	Multi-Family
<b>2023</b>	143	120	53	0	422	0
<b>2022</b>	113	0	61	0	241	0
<b>2021</b>	108	0	76	0	261	0
<b>2020</b>	75	200	42	0	202	2
<b>2019</b>	117	53	61	0	229	24

Source: <https://www.census.gov/construction/bps/visualizations/statemap/index.html>

**Table 30: Evictions**

	Renter Occupied Households	Eviction Filings	Evictions	Eviction Filing Rate	Eviction Rate
Greene	1,555	64	42	4.12%	2.7%
Madison	1,222	21	11	1.72%	0.9%
Orange	3,363	170	82	5.06%	2.44%
Virginia	1,012,175	146,534	51,821	14.48%	5.12%

Source: Eviction Lab. 2018

**Table 31: Graduation and Drop-Out Rates**

4-Year On-Time Graduation Rate		
	2019	2024
Greene	92.38	94.85
Madison	92.97	95.56
Orange	93.82	93.41

Source: doe.virginia.gov

Drop-Out Rate		
	2019	2024
Greene	1.79	5.15
Madison	3.13	1.48
Orange	3.76	3.59

**Table 32: Children Under 5 in Poverty**

County	Population Under 5	Population Under 5 in Poverty	Poverty Rate
Greene	1,257	219	17.4%
Madison	797	45	5.6%
Page	1,175	79	11.6%
Warren	2,152	250	13.4%

Source: U.S. Census Bureau. American Community Survey. 2019-23.

**Table 33: Early Childhood Education Participation**

County	Mixed Delivery	Head Start	VA Preschool Initiative (VPI)	Child Care Subsidy (CCSP)	Total
Greene	0	36	41	30	107
Madison	0	36	26	15	77
Page	20	36	100	20	176
Warren	0	37	112	54	203

Source: ReadyRegions ECCE Supply/Demand Dashboard

**Table 34: Children Under 5 with Disabilities**

County	Estimated Population Under 5 with Disabilities	Estimated 3- and 4-Year-Olds with Disabilities
Greene	127	51
Madison	78	31
Page	148	59
Warren	239	96

Source: U.S. Census Bureau. Quick Facts. July 1, 2024 estimates.

**Table 35: Kindergarten Readiness**

County	2022	2023
Greene	55.8%	50.8%
Madison	55.3%	62.6%
Page	67.1%	59.2%
Warren	54.0%	63.0%
Virginia	59.6%	60.0%

Source: ReadyRegions, ECCE Supply/Demand Dashboard

**Table 36: Health Care Access**

	Greene	Madison	Orange	Virginia	United States
Primary Care	4,190:1	13,940:1	2,190:1	1,340:1	1,330:1
Mental Health	850:1	2,350:1	1,290:1	380:1	300:1
Dentists	7,040:1	2,800:1	3,170:1	1,330:1	1,360:1
Uninsured	9%	9%	9%	8%	10%

Source: County Health Rankings & Roadmaps (University of Wisconsin Population Health Institute, 2024)

**Table 37: Uninsured Adults**

Location	Population Age 18-64	Percentage of Total without Insurance
Fauquier	44,723	8.90%
Greene	12,313	10.08%
Madison	7,957	12.06%
Orange	22,203	8.92%
Page	13,699	10.49%
Rappahannock	4,094	10.97%
Shenandoah	25,512	10.82%
Warren	24,913	9.90%
Virginia	5,160,779	8.60%
United States	197,624,923	11.02%

Source: U.S. Census Bureau, Small Area Health Insurance Estimates. 2023.

**Table 38: Uninsured Children**

Location	Population Age 0-18	Percentage of Total without Insurance
Fauquier	18,513	4.28%
Greene	5,132	6.39%
Madison	2,910	7.53%
Orange	8,639	5.09%
Page	4,746	6.24%
Rappahannock	1,230	7.97%
Shenandoah	9,863	5.45%
Warren	9,382	5.68%
Virginia	5,160,779	8.60%
United States	197,624,923	11.02%

Source: U.S. Census Bureau, Small Area Health Insurance Estimates. 2023.

**Table 39: Population with Any Disability**

	Total Population	Population with Any Disability	Population with Any Disability, Percent
<b>Fauquier</b>	73,637	7,101	9.64%
<b>Greene</b>	20,671	2,843	13.75%
<b>Madison</b>	13,794	1,872	13.57%
<b>Orange</b>	36,600	5,539	15.13%
<b>Page</b>	23,512	4,418	18.79%
<b>Rappahannock</b>	7,402	931	12.58%
<b>Shenandoah</b>	44,214	7,482	16.92%
<b>Warren</b>	40,713	6,034	14.82%
<b>Virginia</b>	8,429,141	1,032,353	12.25%

Source: U.S. Census Bureau, American Community Survey. 2019-23.

**Table 40: Population with Any Disability by Age Group**

	Under Age 18		Age 18-64		Age 65+	
	Population with Any Disability	Percentage	Population with Any Disability	Percentage	Population with Any Disability	Percentage
<b>Fauquier</b>	735	4.24%	2,889	6.54%	3,477	28.58%
<b>Greene</b>	410	8.43%	1,303	10.82%	1,130	29.99%
<b>Madison</b>	160	5.73%	1,061	13.34%	651	21.37%
<b>Orange</b>	575	7.23%	2,687	12.60%	2,277	31.10%
<b>Page</b>	231	4.90%	2,171	15.81%	2,016	39.85%
<b>Rappahannock</b>	22	1.68%	435	10.54%	474	24.11%
<b>Shenandoah</b>	700	7.33%	3,609	14.32%	3,173	33.50%
<b>Warren</b>	608	6.85%	2,698	10.70%	2,728	41.23%
<b>Virginia</b>	86646	4.58%	513,773	9.96%	431,934	31.34%

Source: U.S. Census Bureau, American Community Survey. 2019-23.

**Table 41: All Drug / Opioid Deaths**

	2024*		2023		2022		2021		2020		2019	
	All	Opioid	All	Opioid	All	Opioid	All	Opioid	All	Opioid	All	Opioid
<b>Greene</b>	8	4	6	4	9	6	3	1	4	4	5	4
<b>Madison</b>	2	1	2	2	2	0	3	3	3	3	4	4
<b>Orange</b>	6	5	10	9	18	15	17	14	12	12	12	10

Source: Virginia Department of Health, Drug Overdose Deaths. 2019-2024.

**Table 42: Food Insecurity**

County	Food Insecure Population	Food Insecurity Rate	% Above SNAP Threshold	% Below SNAP Threshold	Average Meal Cost
<b>Fauquier</b>	6,890	9.3%	54%	46%	\$3.98
<b>Greene</b>	2,520	12.1%	43%	58%	\$3.51
<b>Madison</b>	1,430	10.3%	23%	77%	\$3.51
<b>Orange</b>	4,420	11.9%	51%	49%	\$3.57
<b>Page</b>	3,280	13.8%	20%	80%	\$3.40
<b>Rappahannock</b>	830	11.2%	30%	70%	\$3.72
<b>Shenandoah</b>	6,220	13.9%	25%	75%	\$3.48
<b>Warren</b>	5,180	12.6%	30%	70%	\$3.79
<b>Virginia</b>	1,050,300	12.1%	39%	61%	\$3.64

Source: Feeding America. Map the Meal Gap. 2023.

**Table 43: Households with SNAP Benefits in Past 12 Months**

	Households Receiving SNAP	Households Receiving SNAP Percent
<b>Fauquier</b>	1,342	5.11%
<b>Greene</b>	780	9.86%
<b>Madison</b>	424	7.86%
<b>Orange</b>	1,080	7.36%
<b>Page</b>	1,145	12.04%
<b>Rappahannock</b>	161	5.63%
<b>Shenandoah</b>	1,975	11.11%
<b>Warren</b>	1,556	10.13%

Source: U.S. Census Bureau. American Community Survey. 2023: 5-Year Estimates Data Profiles

**Table 44: Students Eligible for Free or Reduced Lunch – 2019 / 2023**

	2019	2023
<b>Greene</b>	41.3%	67.6%
<b>Madison</b>	44.7%	59.3%
<b>Orange</b>	44.7%	60.5%

Source: National Center for Education Statistics, NCES – Common Core of Data. 2022-2023

**Table 45: Unemployment**

County	Unemployment Rate
Green	3.0%
Madison	3.1%
Orange	2.7%
Virginia	3.8%

Source: U.S. Department of Labor, Bureau of Labor Statistics, July 2025.

**Table 46: Houses with No Vehicle Available**

County	Total Households	Households with no vehicle	Percent
Greene	7,912	227	2.87
Madison	5,392	166	3.07
Orange	14,667	599	4.08

Source: U.S. Census Bureau. American Community Survey. 2023 5-Year Estimates. Table B08201

**Table 47: Commuting Patterns**

	Greene	Madison	Orange
People who live and work in the area	1,203	1,450	3,547
In-Commuters	1,822	1,657	5,710
Out-Commuters	6,666	4,781	9,936
Net In-Commuters	-4,844	-3,124	-4,226

Source: Virginia Employment Commission. Virginia Community Profiles. Jan. 22, 2025. Retrieved from <https://virginiaworks.com/Community-Profiles>

**Table 48: Child Care Facilities**

Location	Total Child Care Centers		Licensed Centers		Serves Age 5 and Under		Full-Time		Newborn Care	Accepts Subsidies
	Centers	Capacity	Centers	Capacity	Centers	Capacity	Centers	Capacity	Centers	Centers
Greene	7	639	6	579	5	340	5	340	1	5
Madison	5	336	2	160	5	318	5	336	2	2
Orange	20	838	15	715	16	440	17	744	10	13

Source: Virginia Department of Social Services. Child care facility search.

**Table 49: Cost of Child Care in Skyline CAP's Service Area – Full-Time Center-Based (average)**

Age	Average Weekly Cost Per Child	Annual Child Care Cost Per Child
Infant	\$331	\$17,212
Toddler	\$293	\$15,236
2 Years	\$273	\$14,196
3 Years	\$254	\$13,208
4 Years	\$243	\$12,636
5 Years	\$243	\$12,636

Note: Data collected by the author via phone interviews with representatives of five (5) licensed child care centers.



**Table 50: Average Number of Children in Foster Care Per Month**

County	Age 5 and Under	Age 6-17
Fauquier	9	18
Greene	6	24
Madison	9	13
Orange	9	23
Page	8	20
Rappahannock	1	2
Shenandoah	3	16
Warren	19	23

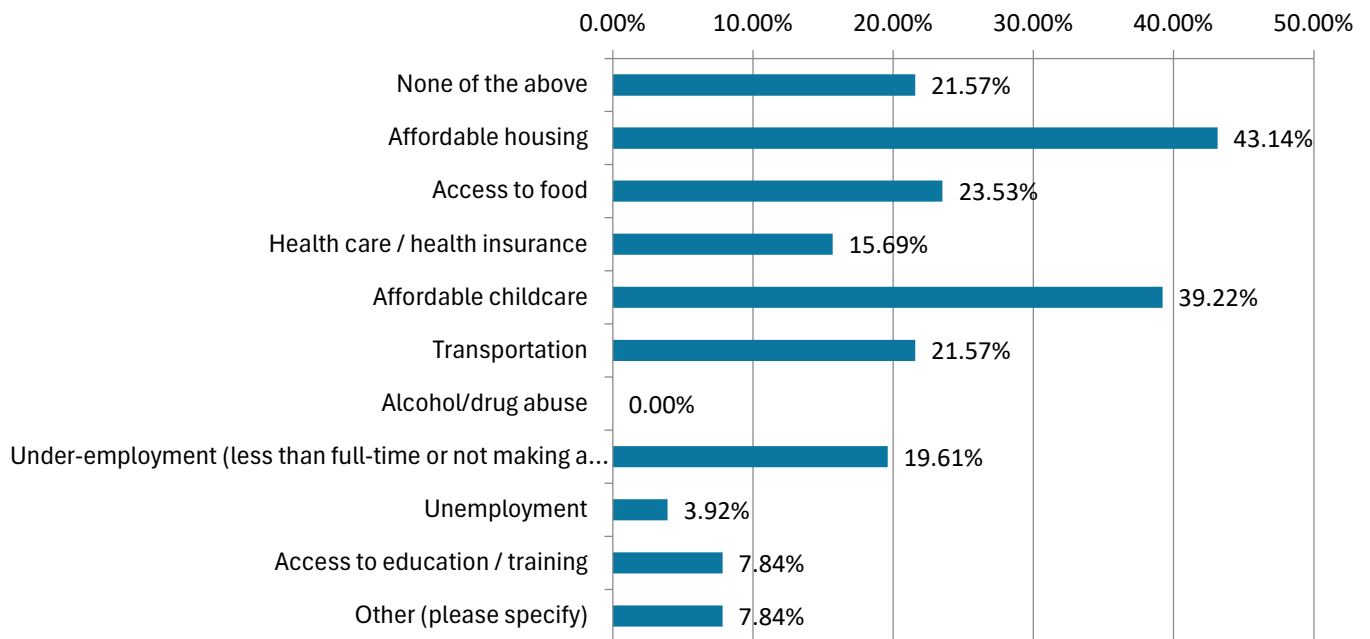
Source: Virginia Department of Social Services. (2025). Foster care monthly snapshot: Children in foster care in Virginia (2025).

## Appendix B: Surveys

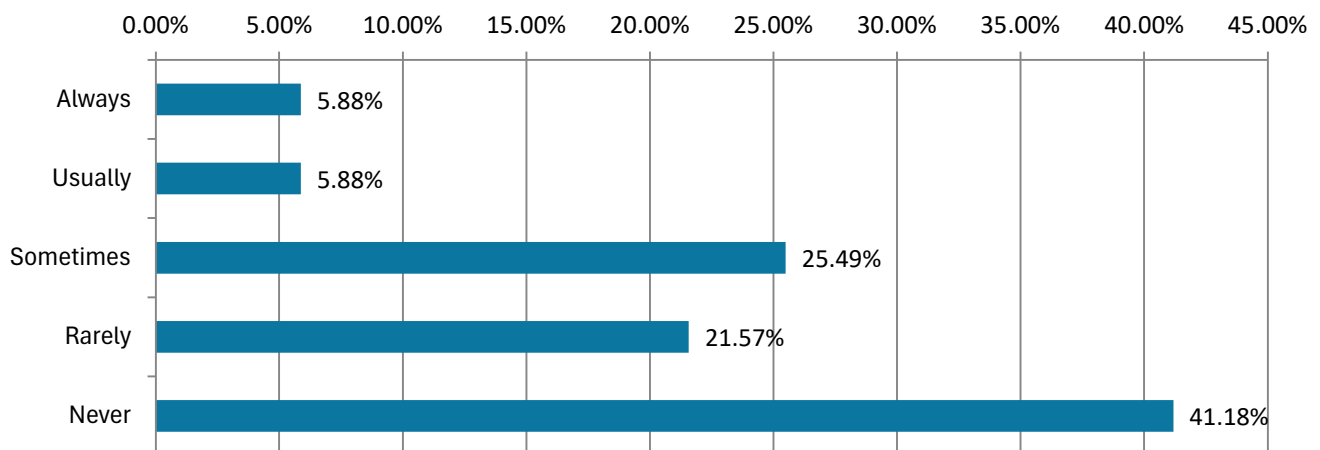
### Community Needs Survey Results – Community

To better understand local needs and priorities, Skyline CAP distributed a 25-question survey to clients and community members through email, social media, and with the valuable support of community partners who encouraged their clients to participate. A total of 122 responses were collected, providing meaningful insights that are illustrated in the graphs that follow.

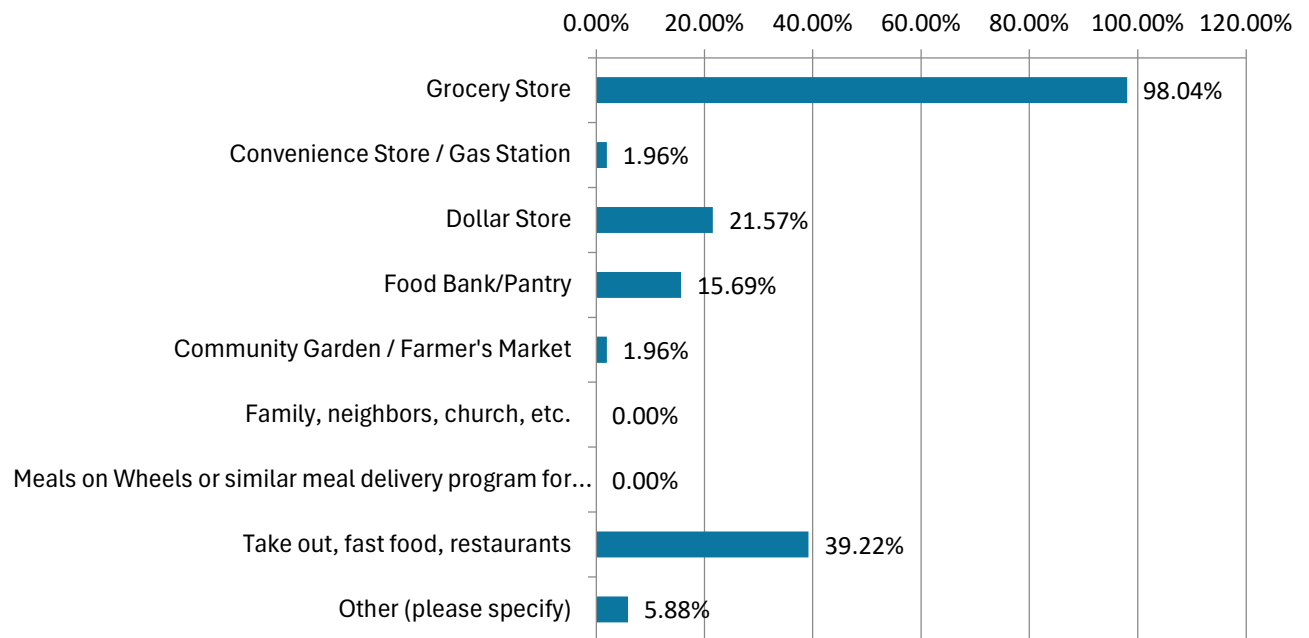
#### 1. What are the TOP THREE issues facing you and your family right now?



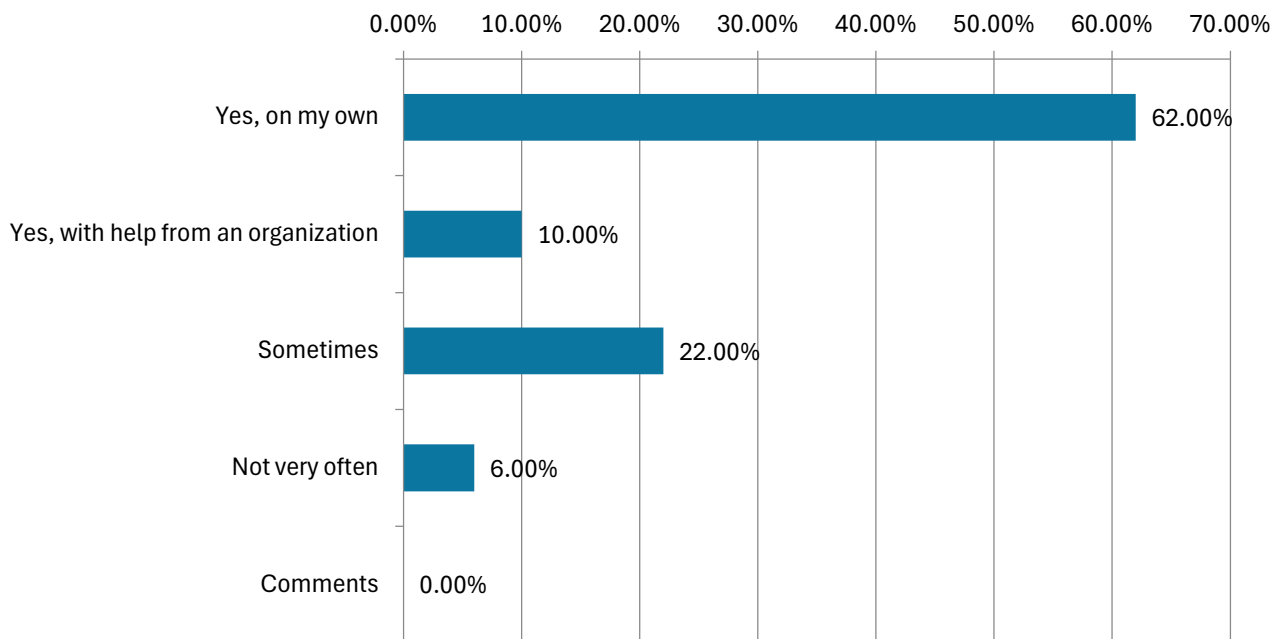
#### 2. In the last year, how often were you worried that your food would run out before you could get more?



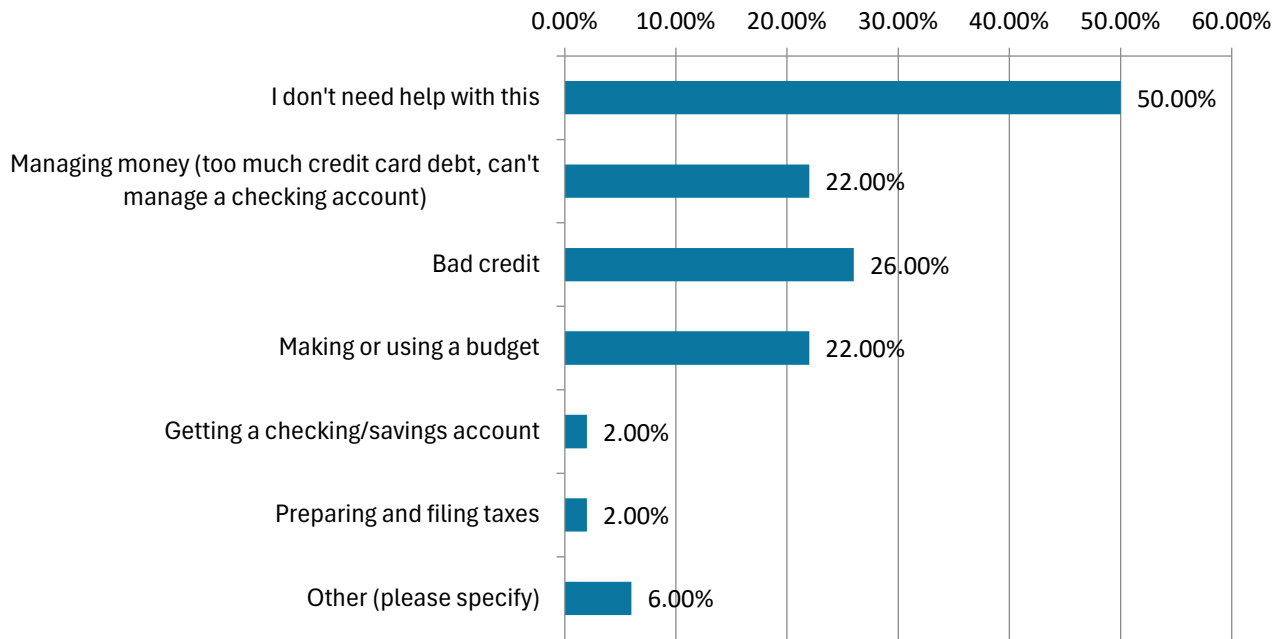
**3. What are the top two places where you get most of the food you eat at home?**



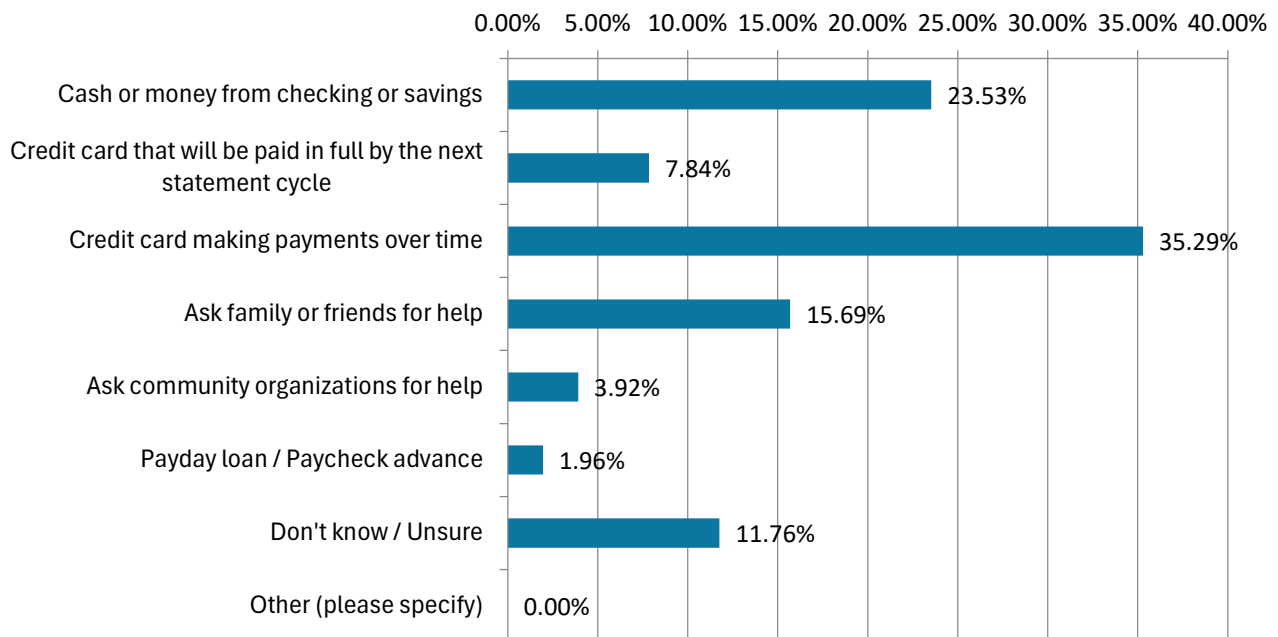
**4. Are you able to meet your basic needs every month?**



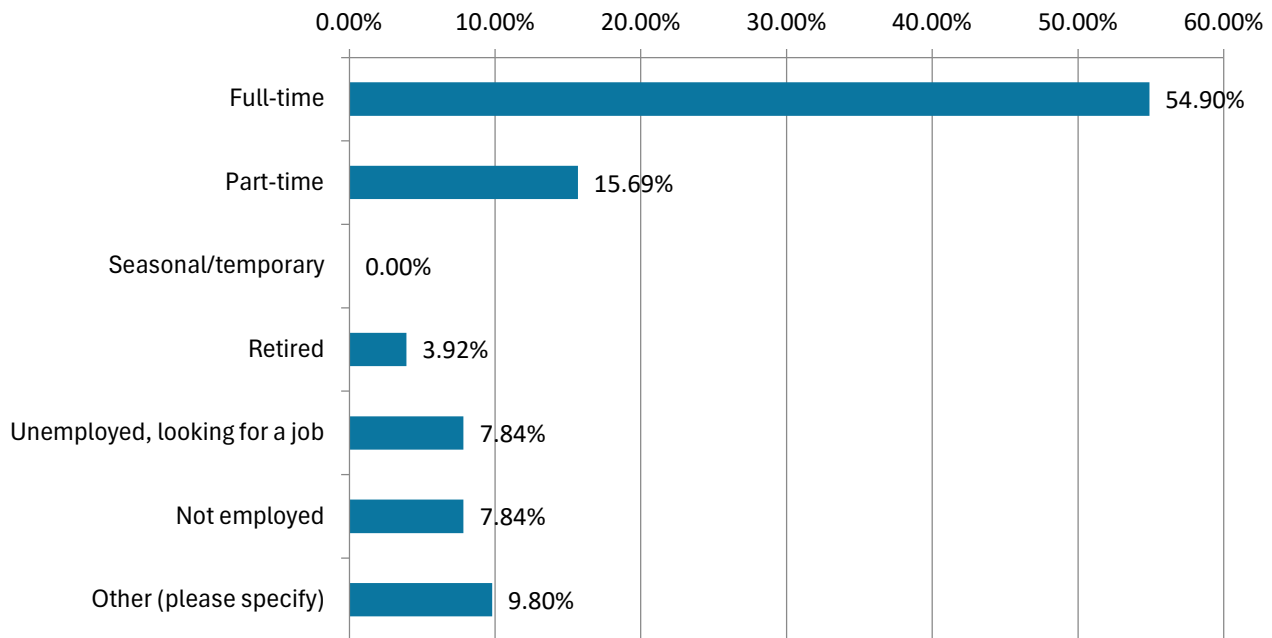
**5. Do you need help with any of the financial issues listed below?**



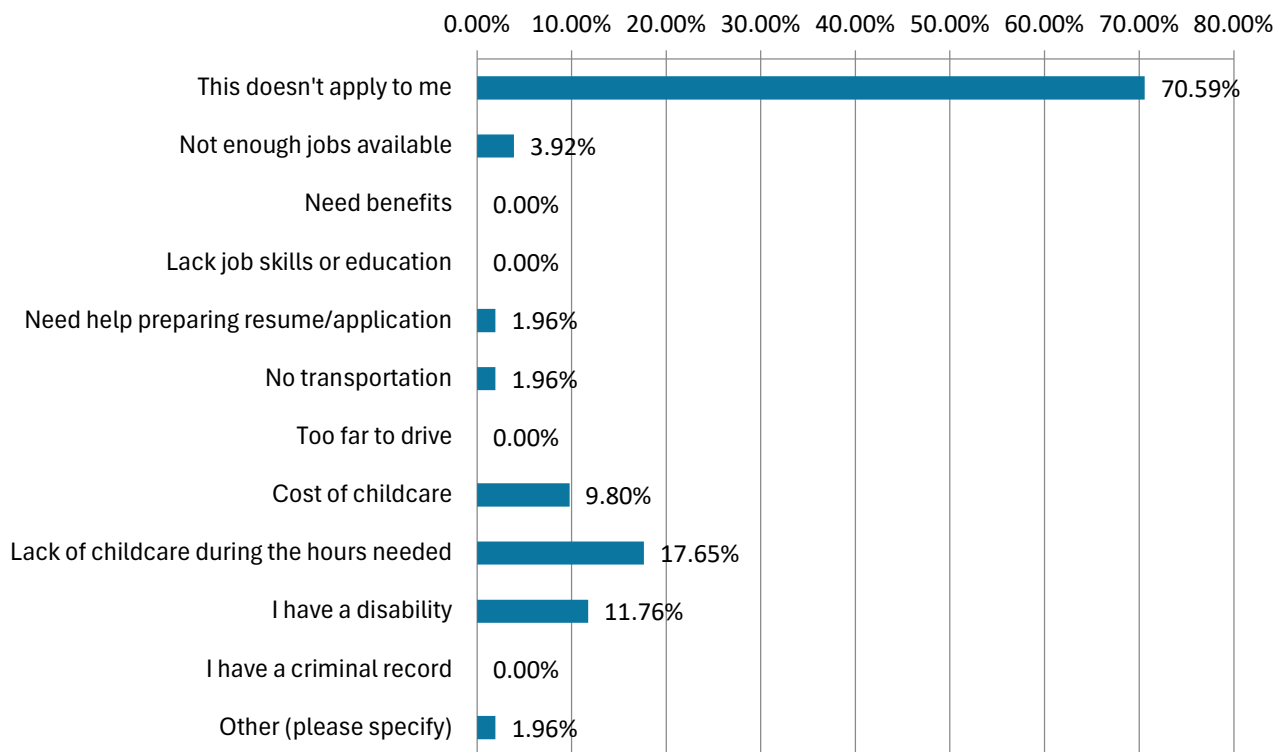
**6. If you had a sudden emergency expense of \$500, how would you pay for this expense?**



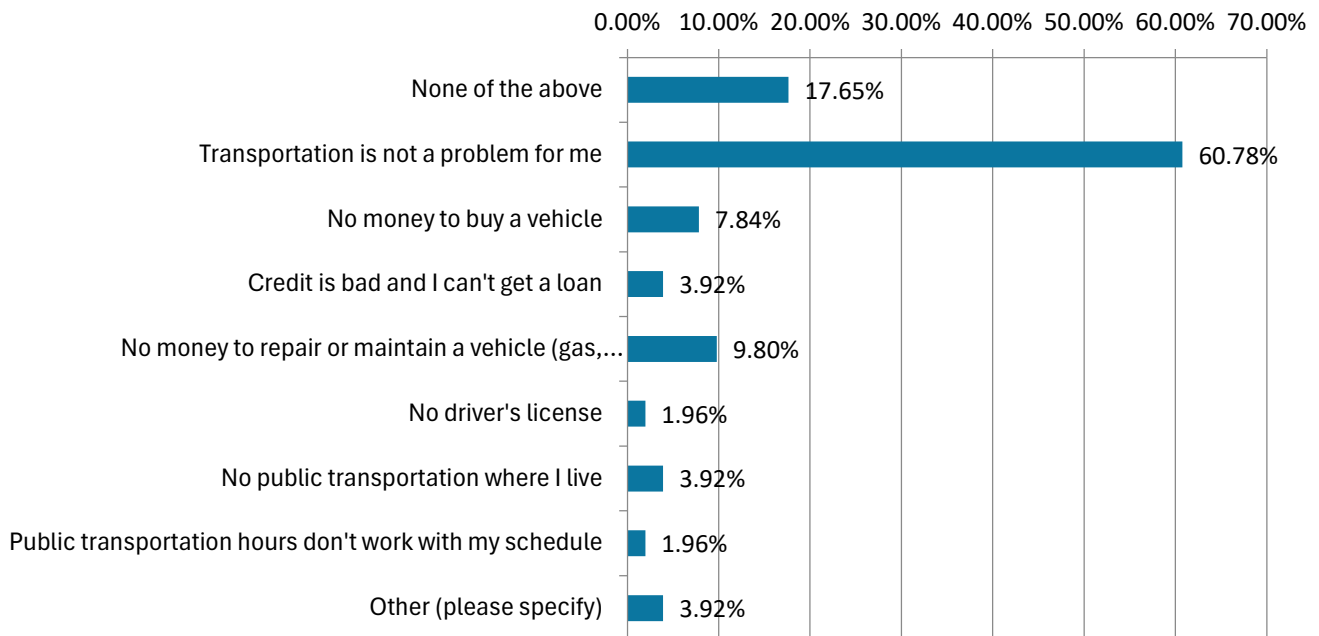
## 7. What is your work status?



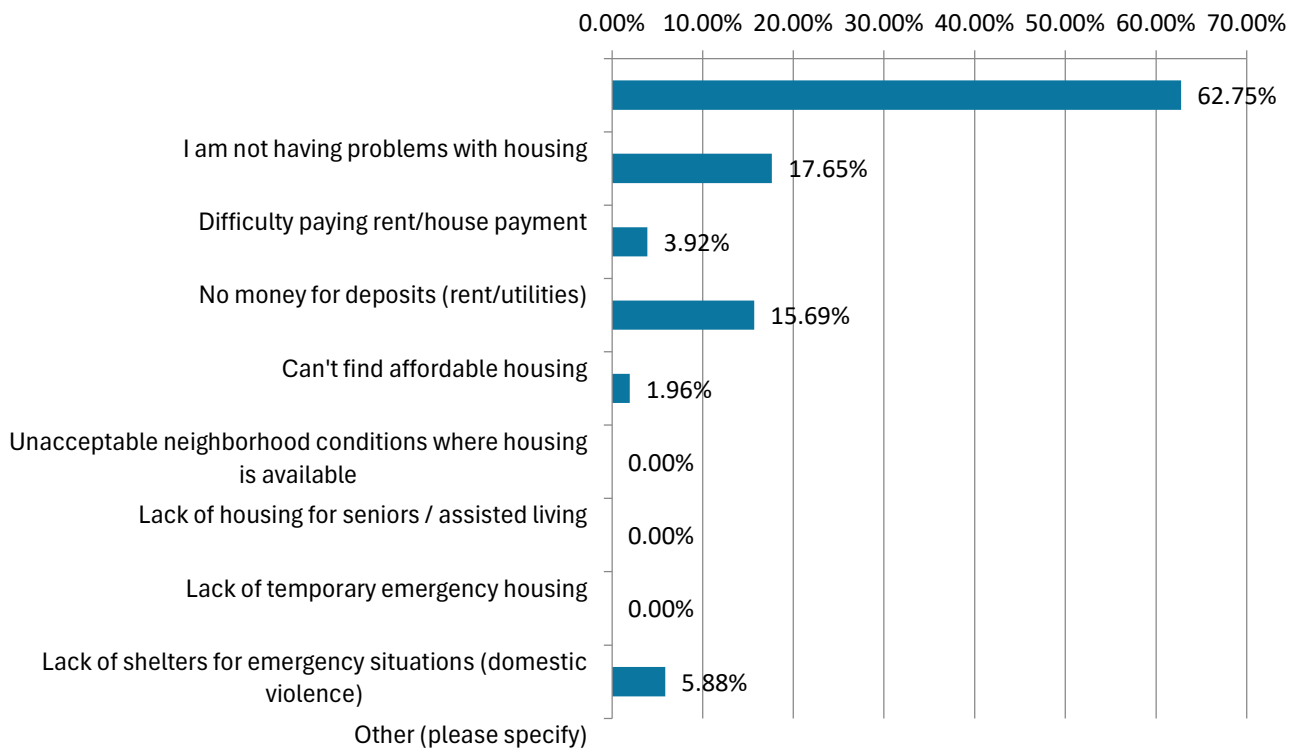
## 8. If you are having problems with employment, what issues are you experiencing?



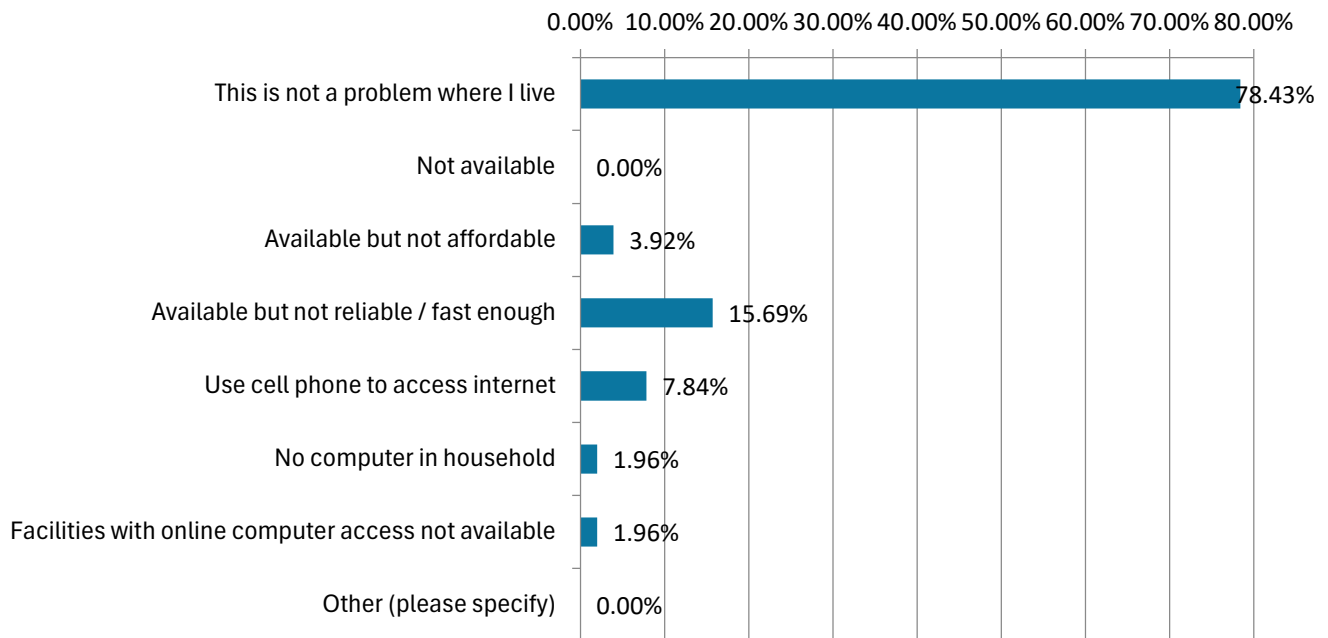
**9. If you are having problems with transportation, what are the reasons?**



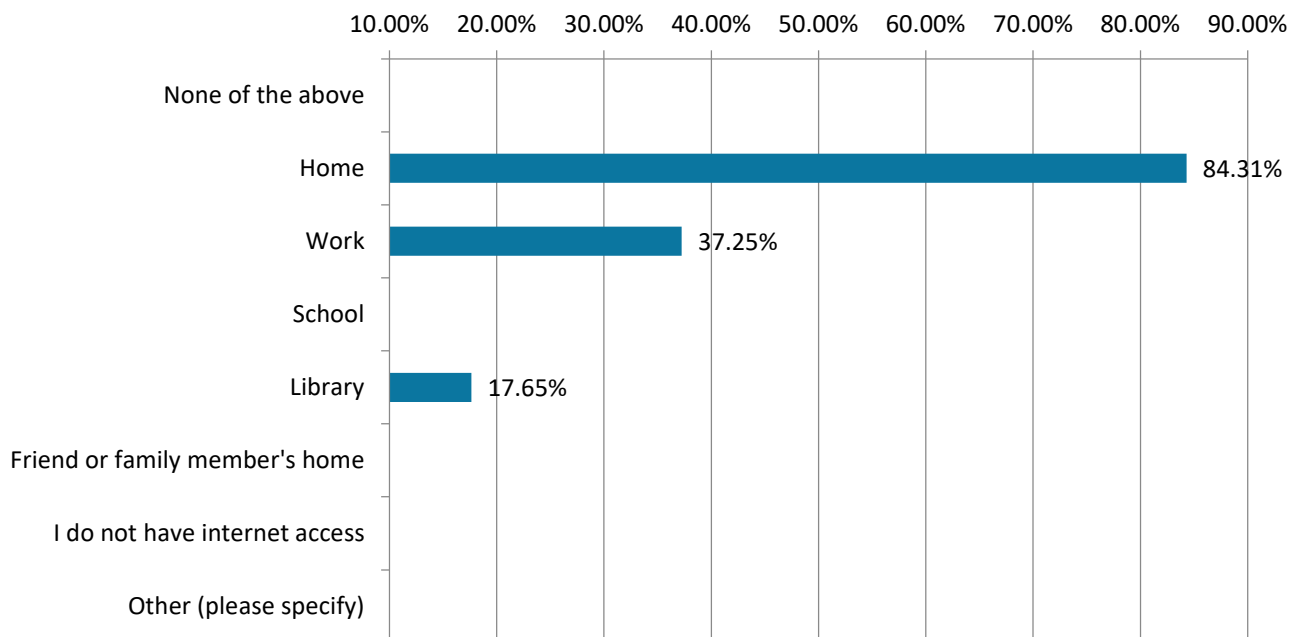
**10. If you are having problems with housing, what issues are you experiencing?**



**11. Internet access is a problem where I live because:**

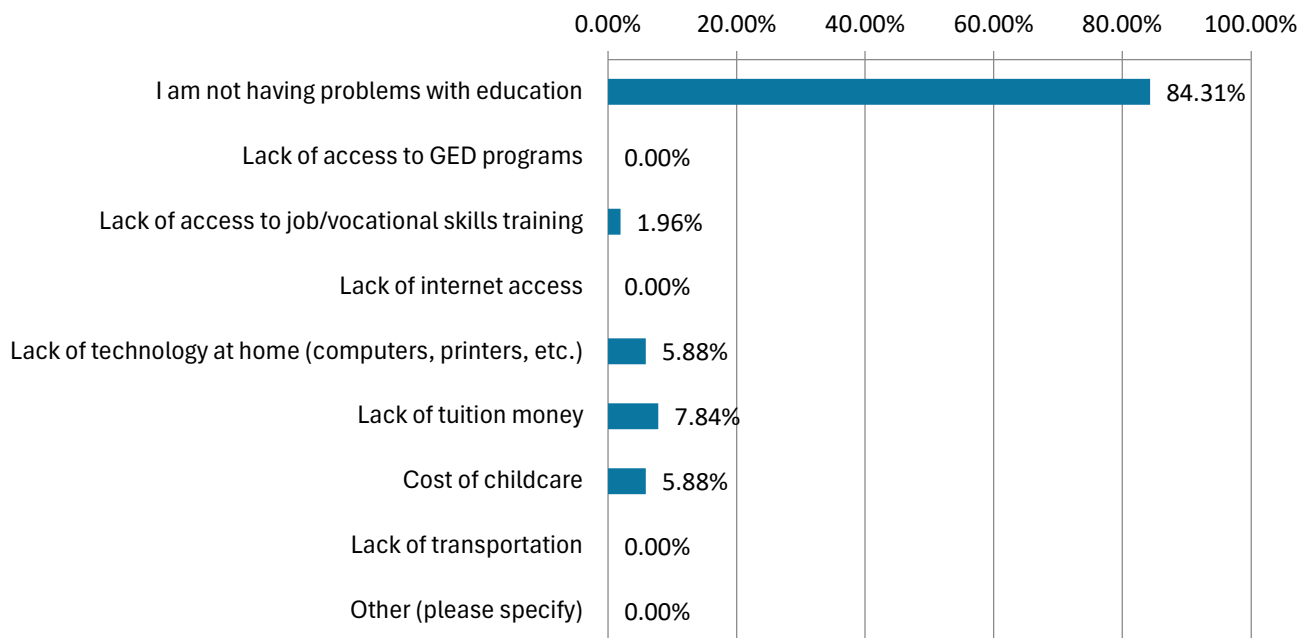


**12. Where do you usually access the internet?**

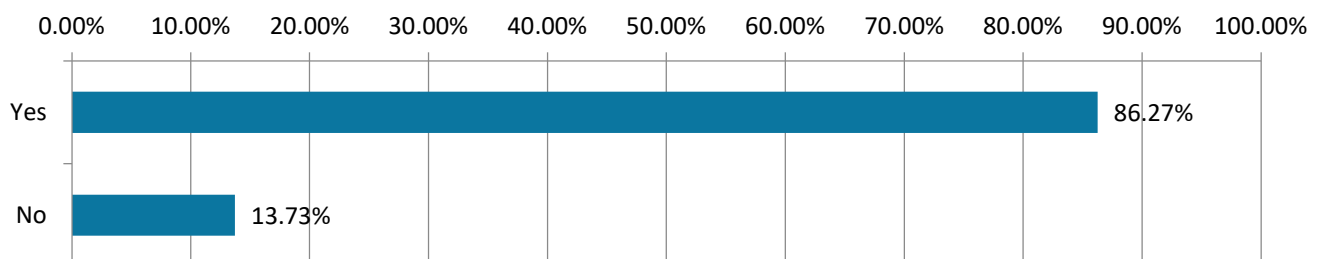




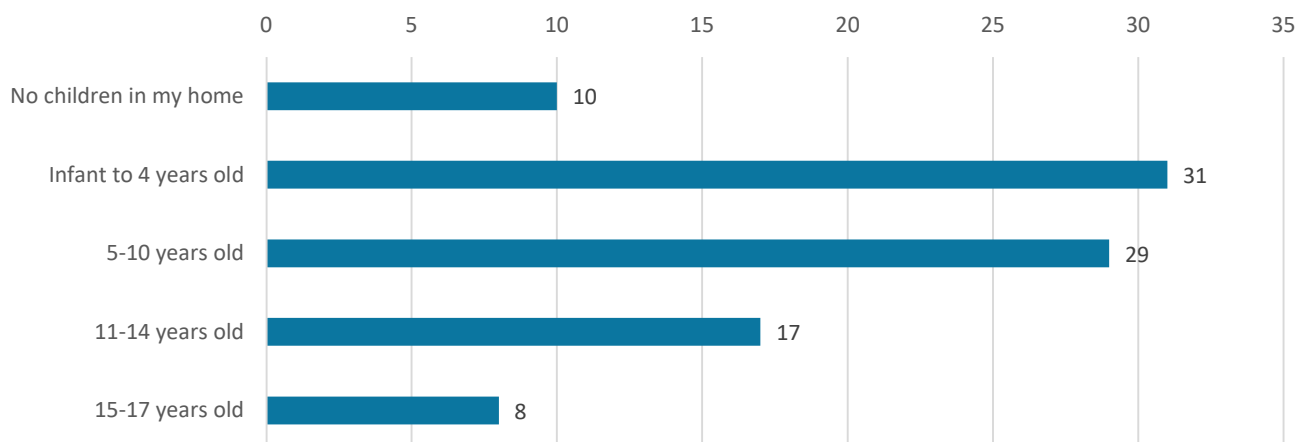
**13. If you are having problems with education, what issues are you experiencing?**



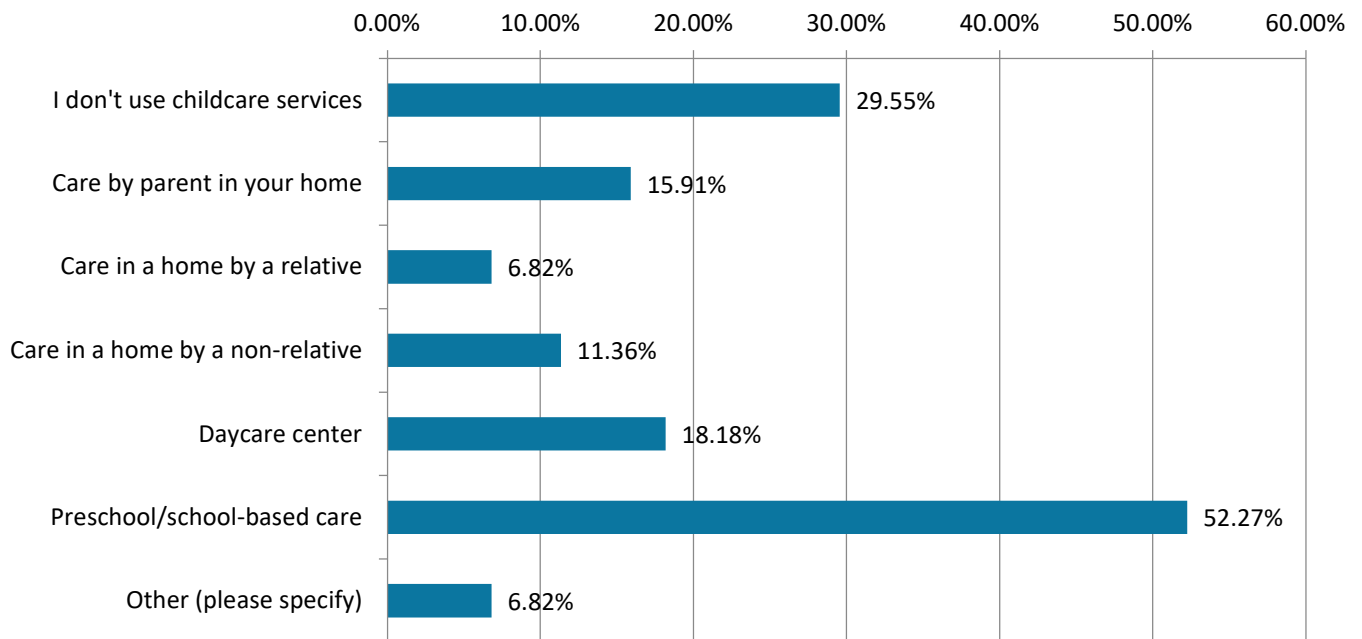
**14. Do you have children living in your household?**



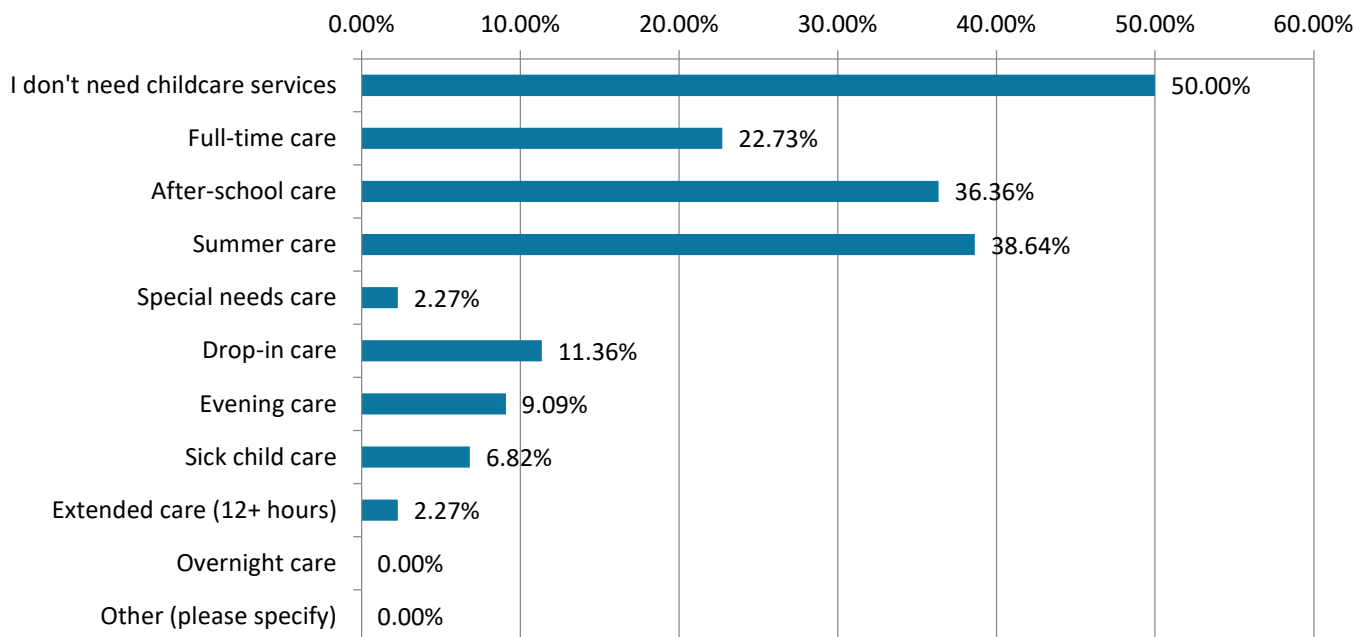
**15. How many children live in your household in the following age groups?**



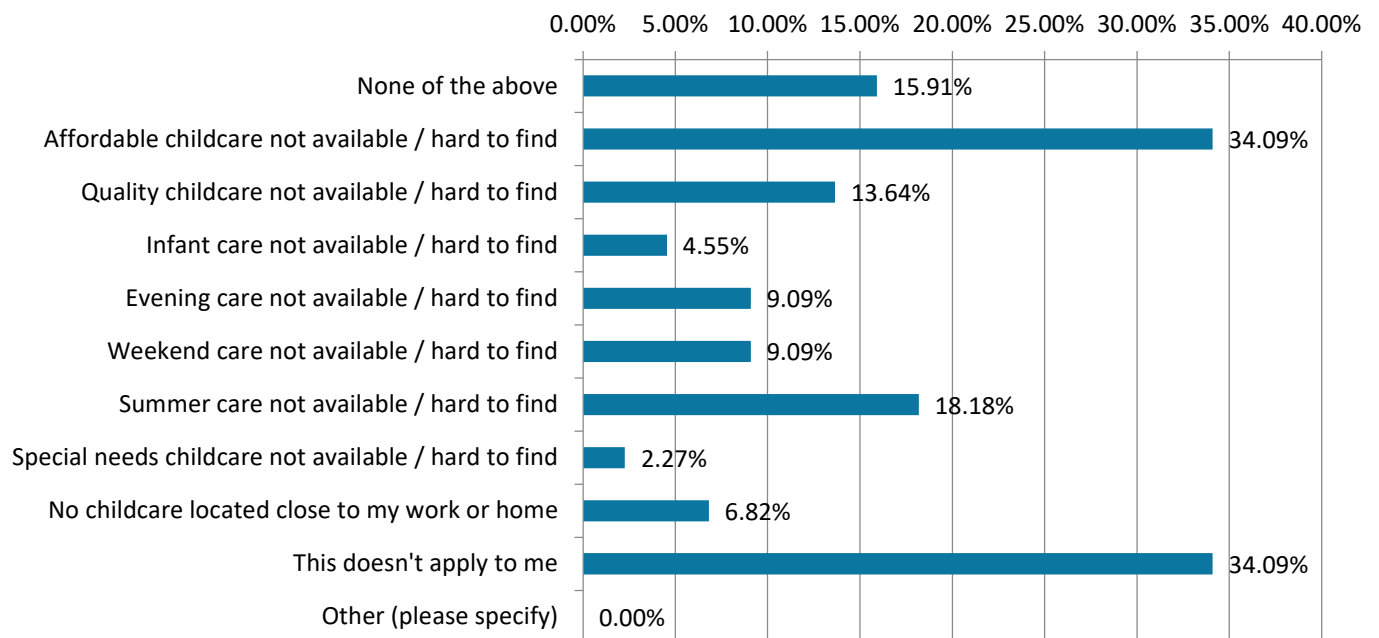
### 16. What types of child care services do you currently use?



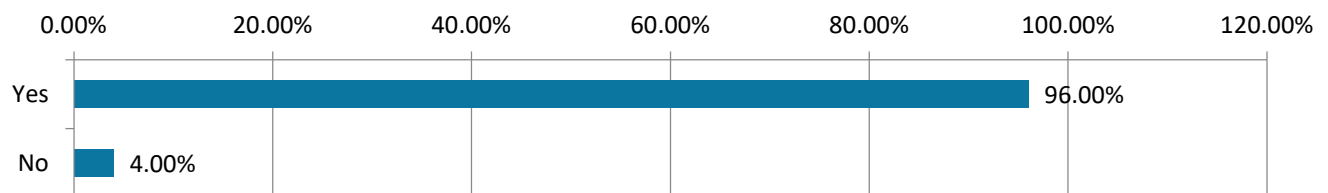
### 17. What type of child care do you need?



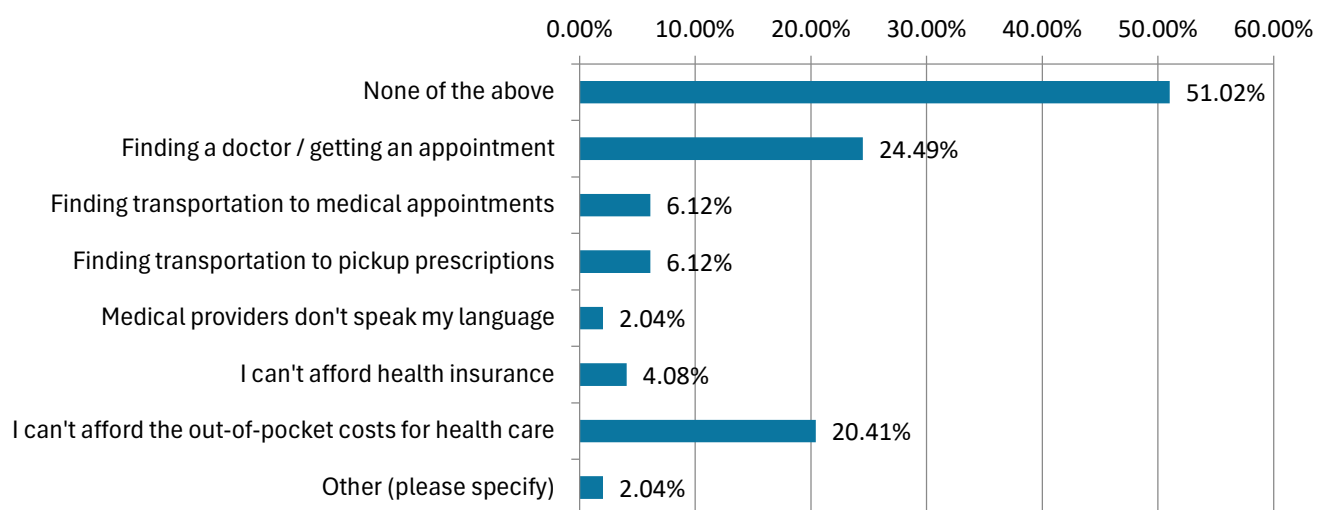
**18. In the past year, have you experienced any of the following problems related to child care?**



**19. Do you and your family have health insurance?**



**20. Do you face any of the following challenges when you try to get health care?**



**21. Where do you live? Where do you work?**

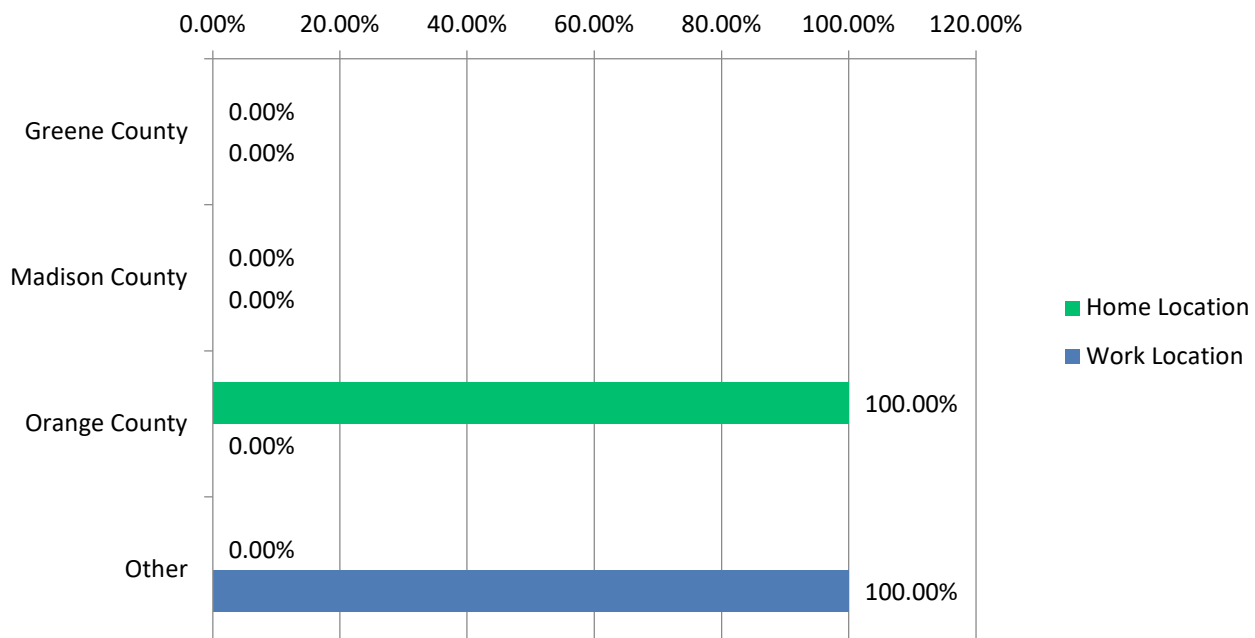
**NOTE: Respondents were asked to respond with their home location AND their work location. It is not clear if only Orange County residents responded, which is not likely, or if respondents did not understand how to respond (selecting one from each column).**

21. Where do you live? Where do you work?

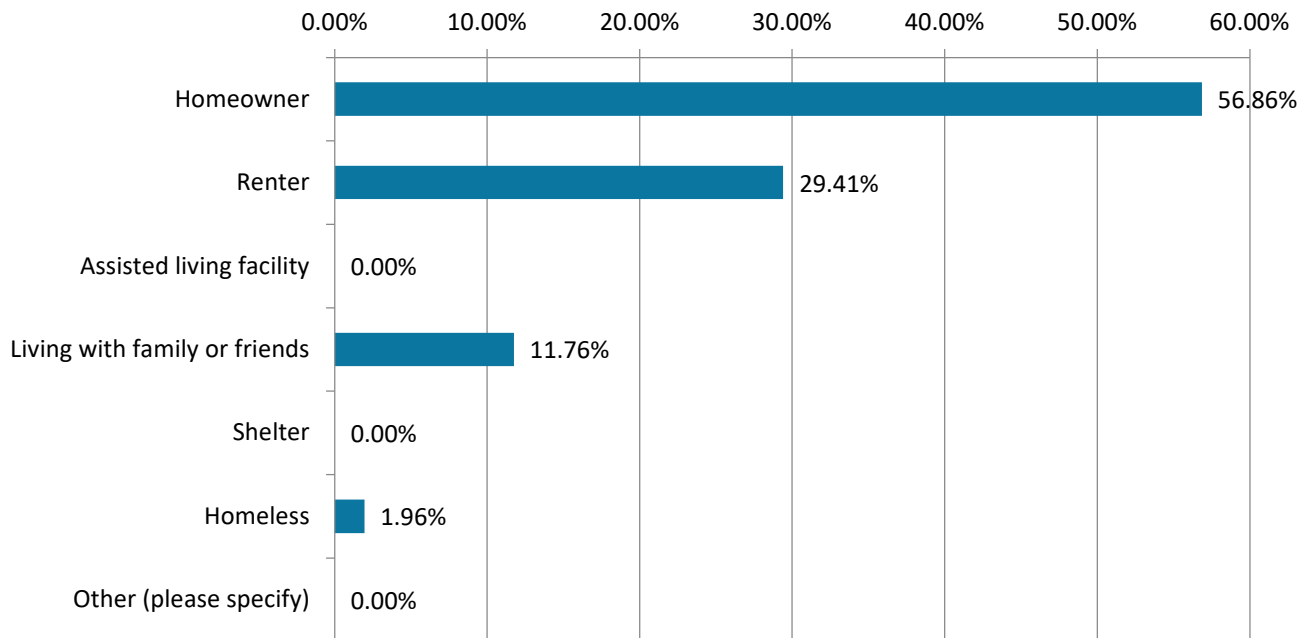
	Home Location	Work Location
Greene County	<input type="radio"/>	<input type="radio"/>
Madison County	<input type="radio"/>	<input type="radio"/>
Orange County	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>

If you selected "Other," please specify county.

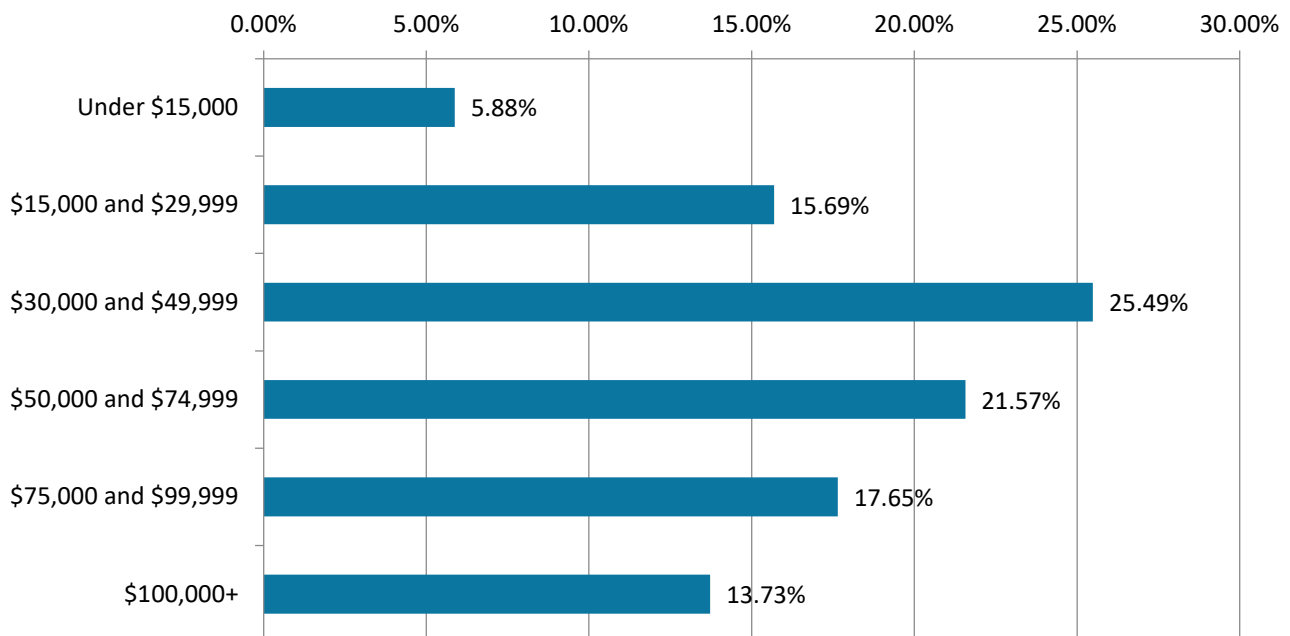
**Results are reflected in the graph below but the information is not useful for determining the geographic location of the respondents or their work commute.**



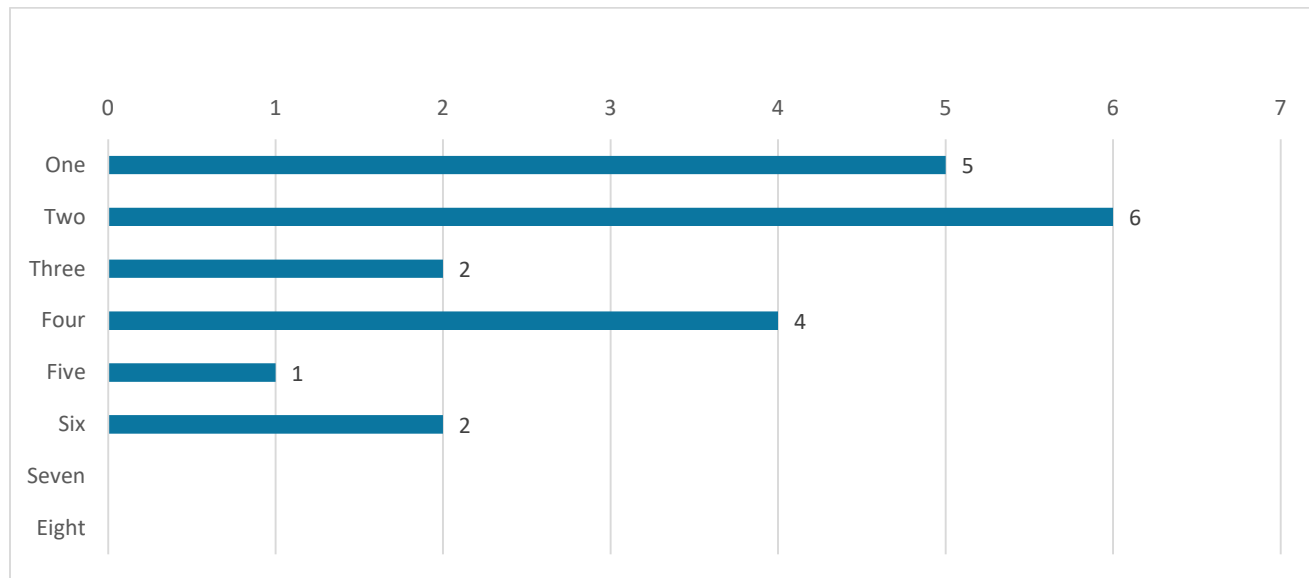
## 22. What is your current living situation?



## 23. What is your household income from all sources?



**24. Including yourself, how many people live in your household?**



**25. Please provide any additional information that might be helpful in understanding the needs in your community.**

**Note: Among all survey responses, the highest share (26%) highlighted the need for youth and child programs. Housing and home infrastructure accounted for 21% of responses, while infrastructure and connectivity improvements (such as internet access, utilities, and transportation) made up 18%. Another 18% of respondents identified public safety and support services as key concerns. Finally, 9% emphasized the importance of community development, resources, and expanded economic opportunities.**

1. Help with home repairs/maintenance.
2. My location is in an area without service for cable internet, cell signal, and even landline services are so expensive for a bad connection. I can only get satellite and they've been robbing me.
3. Speed
4. The lack of transportation to and from Head Start is a major barrier to improving my family's life. I know many other families in the same situation in our county. Why doesn't Head Start provide transportation?
5. There's many programs for veterans and for refugees or immigrants. There's not enough help for non-senior disabled.
6. We are not in need of financial assistance or housing assistance, just support and information to help our family.
7. Better jobs with benefits, places for our kids and to have fun, available internet,
8. We have paid "rent" for 10yrs yet homeownership isn't obtainable or we just don't qualify. Minority would love the privilege to own. It's outrageous that others can come to this country with nothing and be fortunate enough to have habitat for humanity assist them in getting one built while as a resident in VA almost my whole life just don't fit the bill. Thats not fair or equal.
9. Although I am 30K at the moment, I'm very concerned about the cost and availability of housing and healthcare for myself as I age. In addition, my adult children are struggling with being under employed, affordable housing, insurance, and healthcare.
10. Louisa needs everything there's nothing here to offer there residents but love it here.

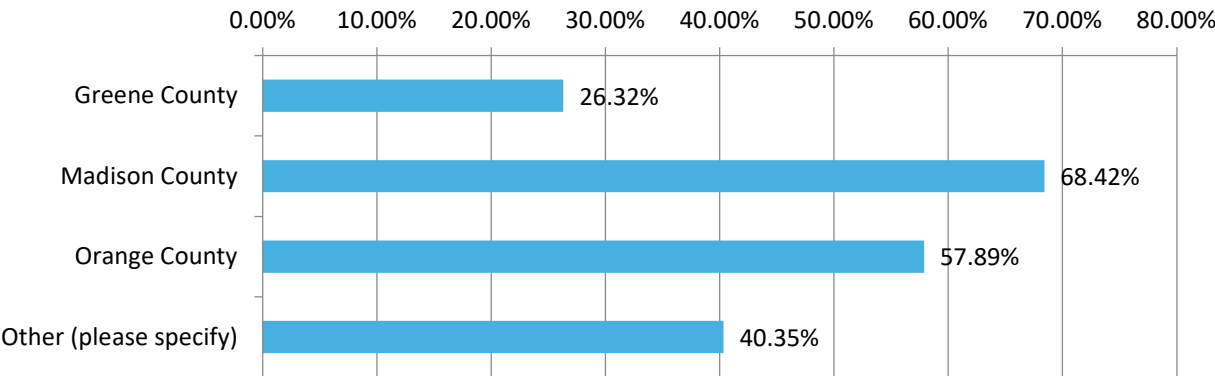
11. I am a single mother looking for help on a down payment for a safer environment for my kids as we live in an old farm house with no running water since nov of 2023.
12. Need more Spanish speaking professionals or services in this area.
13. Better living conditions are needed in Orange County. The Code Inspector needs to step up inspections to maintain property values. The county needs to invest in local jobs to sustain a livable wage. The county, in coordination with the Commonwealth, should improve roads and expand infrastructure where appropriate to sustain smart growth. Smart growth is key to a community that can represent rural and suburban interests. Impact fees based on housing developers could pay for improved infrastructure and new schools for the northwest end of the county. Can't do on the backs of the current property owners.
14. There needs to be sidewalks for people's safety.
15. Housing for single parents who have children that is affordable as well as activities for the children in town to do.
16. Mainly activities for my young grandchildren.
17. Need more activities for kids.
18. Rents and mortgages are too high.
19. Affordable child care and lack of public transportation are major barriers to employment and adult education in our county.
20. I have always had my own transportation—my vehicle broke down; it costs too much to fix it. I don't have the means to get another vehicle.
21. More activities for children. More grocery stores.
22. Wish there can be more affordable rent for bigger families.
23. More places where you can study English.
24. More child care options for before and after school
25. Summer programs for the children. There may be some but I am not aware of them.



Community Needs Survey Results – Community Partners

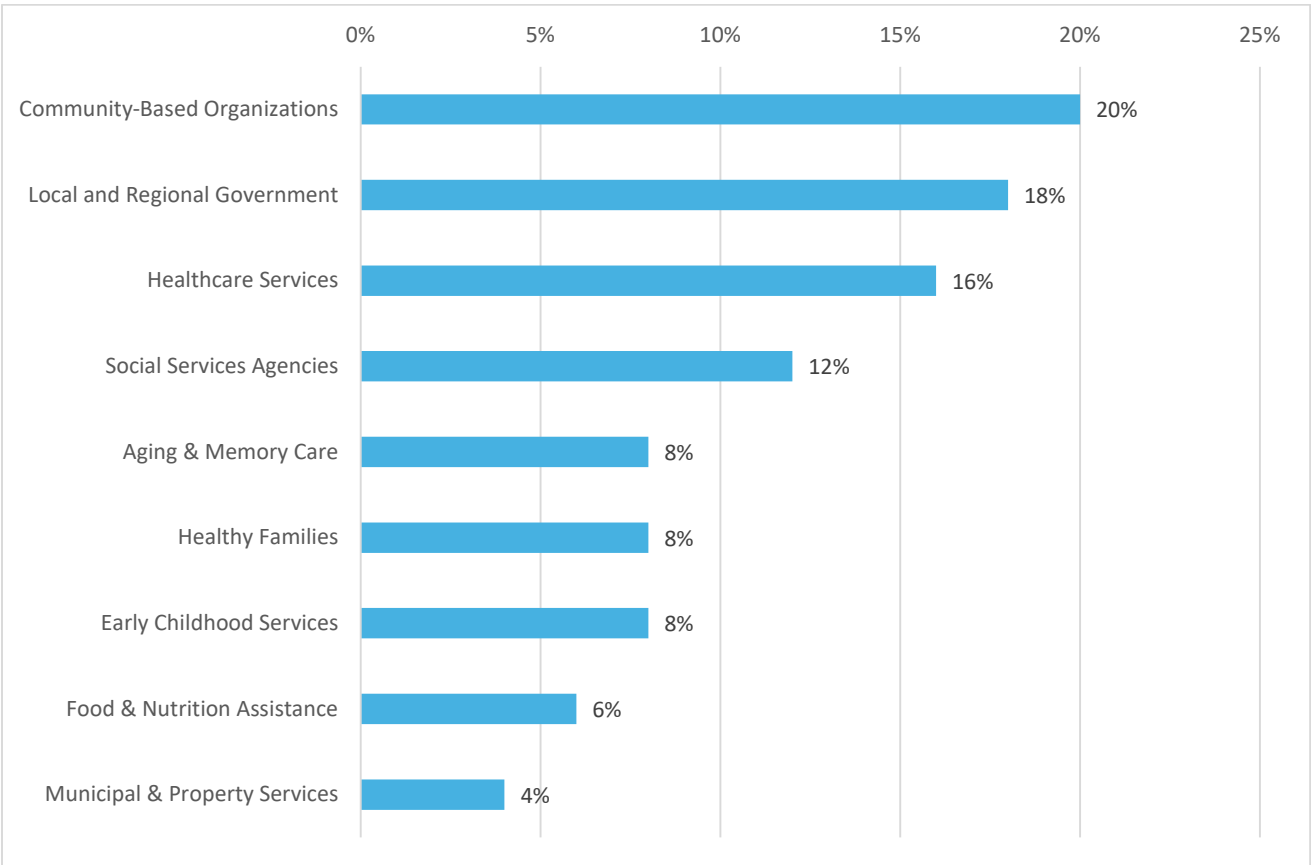
Skyline CAP distributed an 11-question survey to community partners to gather professional perspectives on local conditions, service gaps, and emerging challenges. The feedback from these partners complements resident input by validating key findings and highlighting available resources, helping to ensure the assessment is comprehensive, credible, and actionable.

1. Which of the following counties does your organization serve?



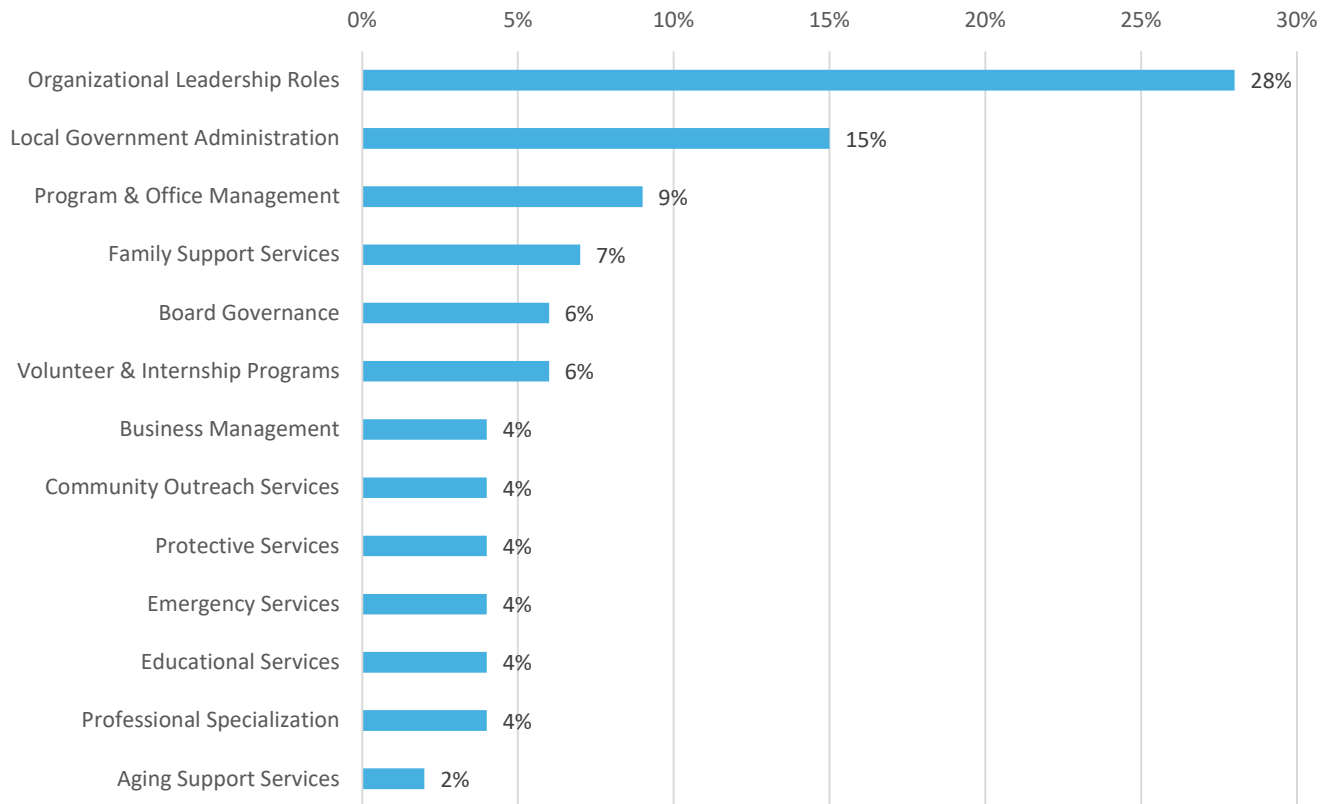
2. What is the name of the agency/organization you represent?

Note: results are grouped into type of agency/organization for analysis purposes.

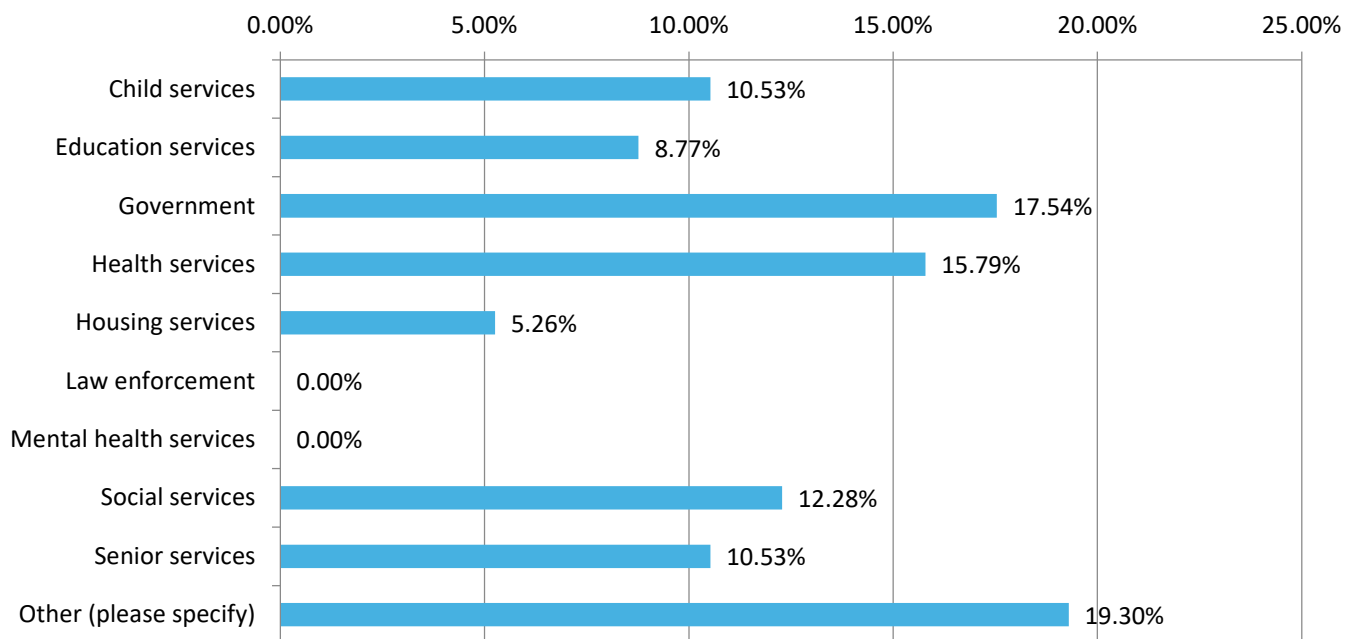


### 3. What is your role with this agency?

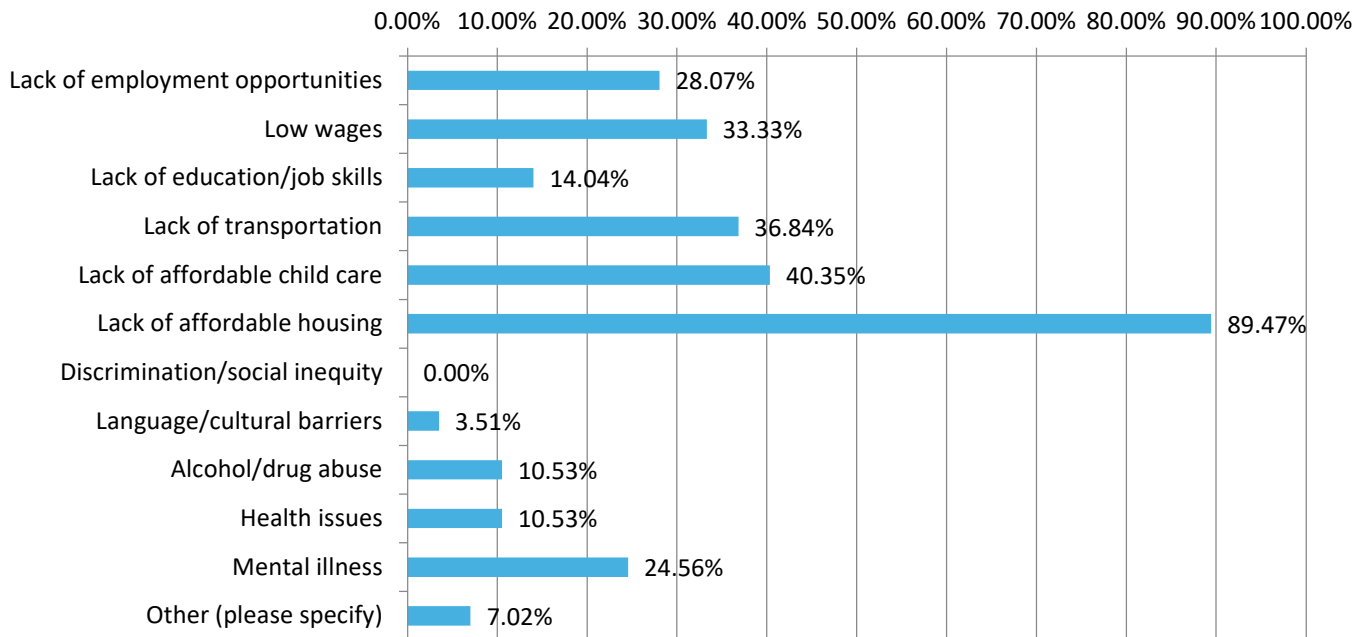
*Note: results are grouped by role for analysis purposes.*



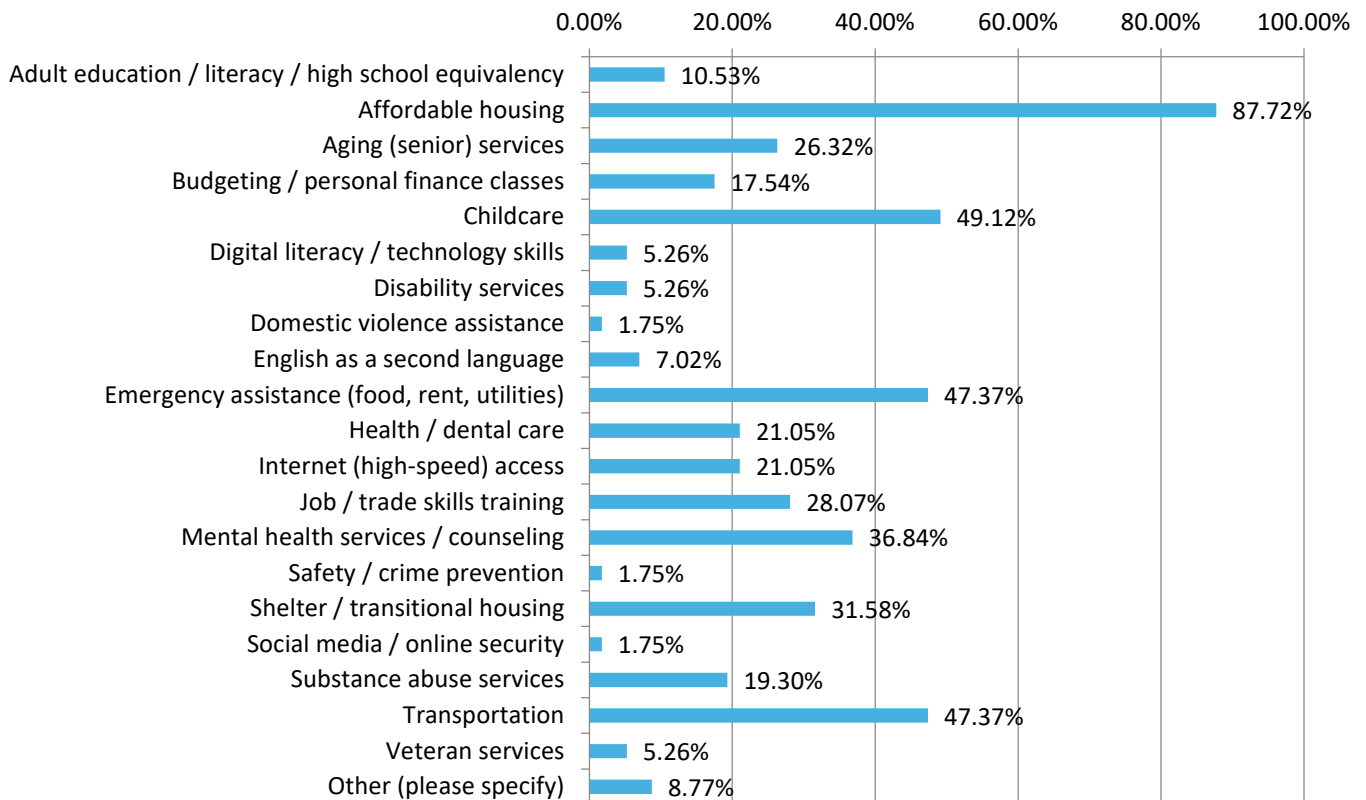
### 4. Which of the following best describes your service area?



**5. Based on your professional experience, what are the top three issues or concerns contributing to economic insecurity for families in the community where you operate?**

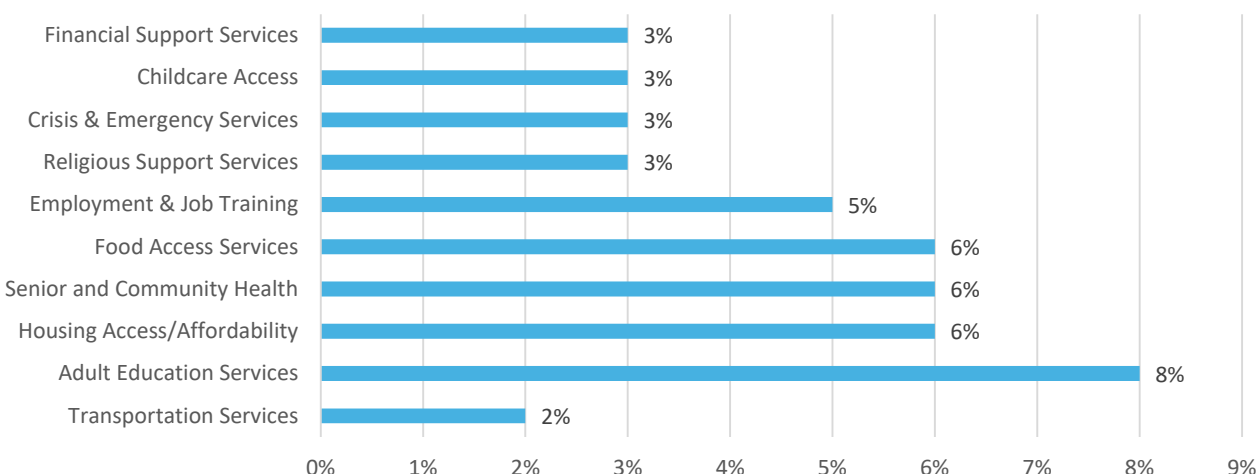


**6. Based on your professional experience, what are the TOP FIVE most pressing needs for families living in the community where you operate?**



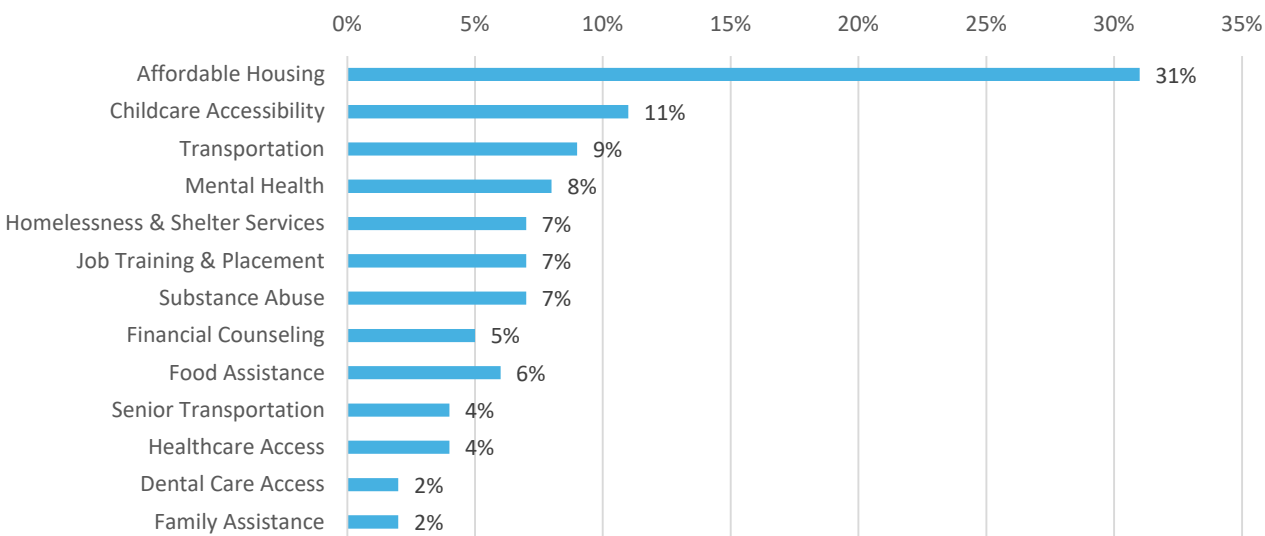
**7. What resources or services are present in the community but are underutilized? Why are they not widely used?**

*Note: The chart below reflects underutilized services identified, organized by theme for analysis purposes. The most common reason identified for why services are underutilized was a lack of community awareness, often attributed to limited marketing and outreach. In some cases, respondents also noted that stigma and transportation barriers may contribute to the underutilization of available services. Several respondents indicated that they are unsure of services that are underutilized and why.*



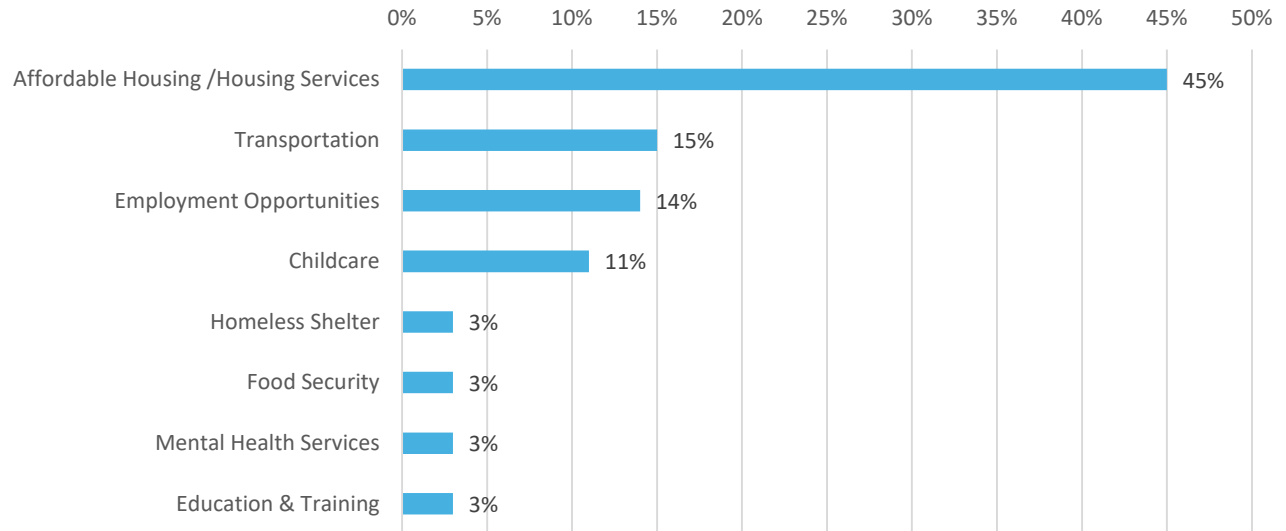
**8. What resources or services are not available or in short supply? What, if anything, is being done to address this?**

*Note: The chart below reflects resources/services that are not available or in short supply, organized by theme for analysis purposes.*

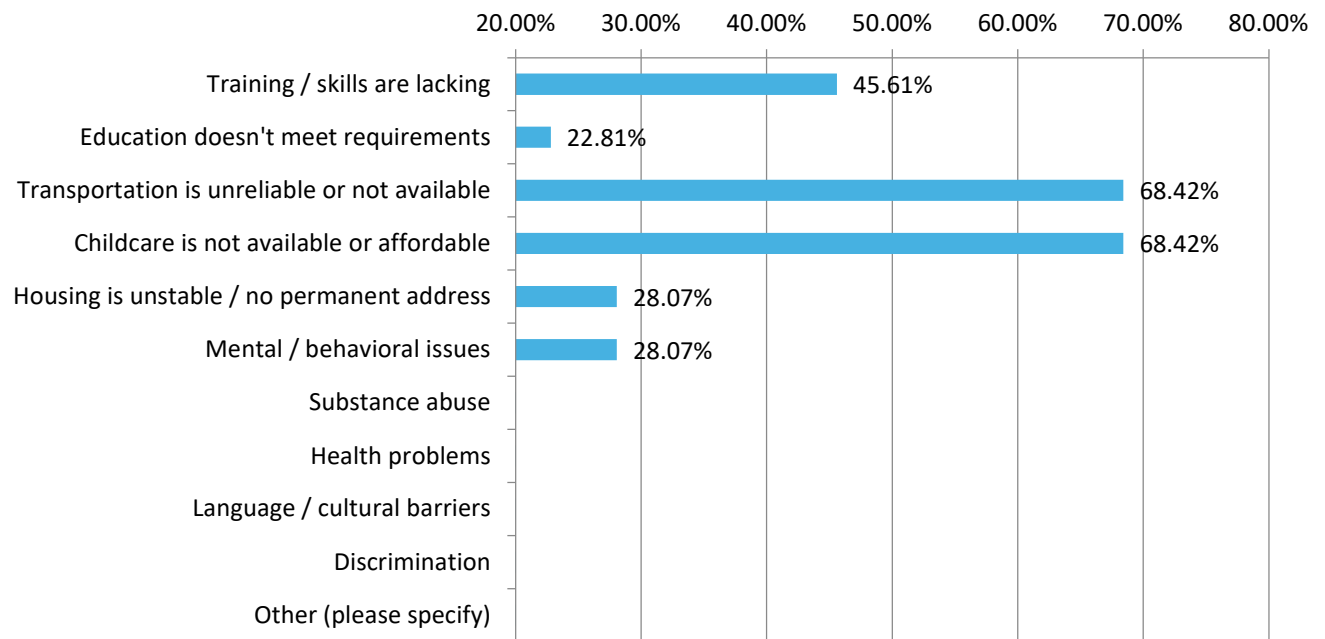


*Few respondents indicated whether anything is being done to address the issues, but common themes among those who responded included funding limitations, rural geography and infrastructure challenges (transportation), lack of coordination among agencies, insufficient staffing and volunteer support, policy and zoning barriers (housing), and limited public awareness or advocacy.*

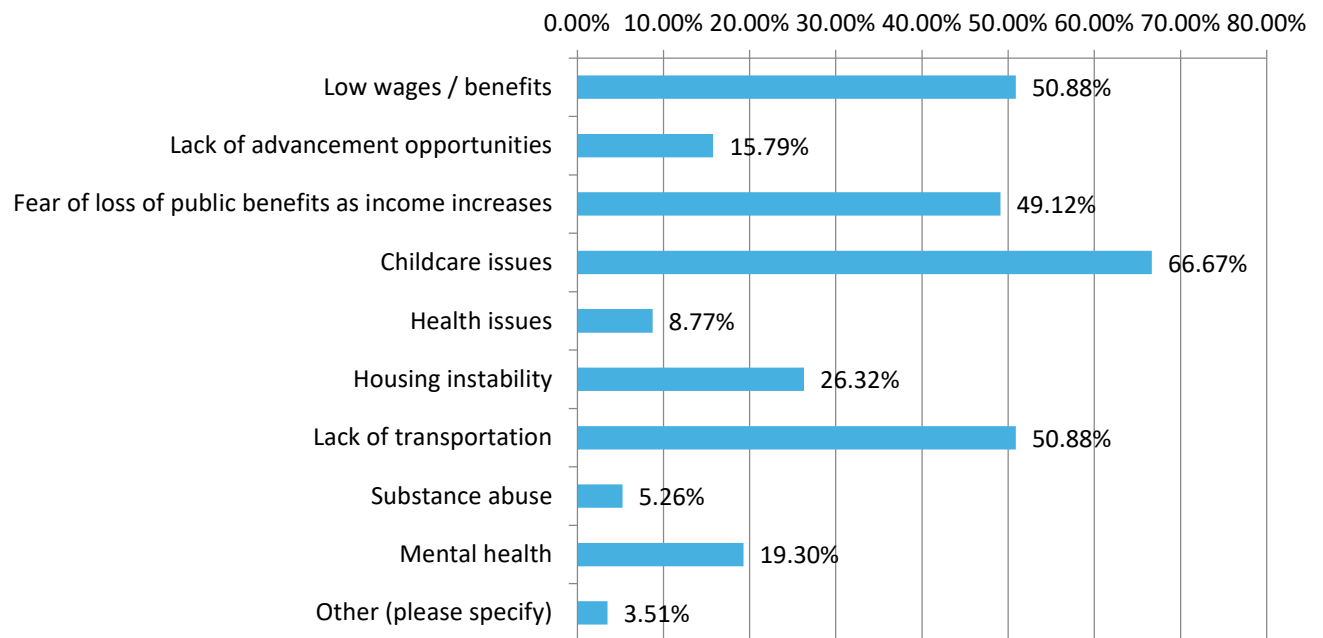
**9. What is the greatest UNMET need for low-income people in the community?**



**10. If jobs are available, what are the TOP THREE reasons making it difficult for people to obtain them?**



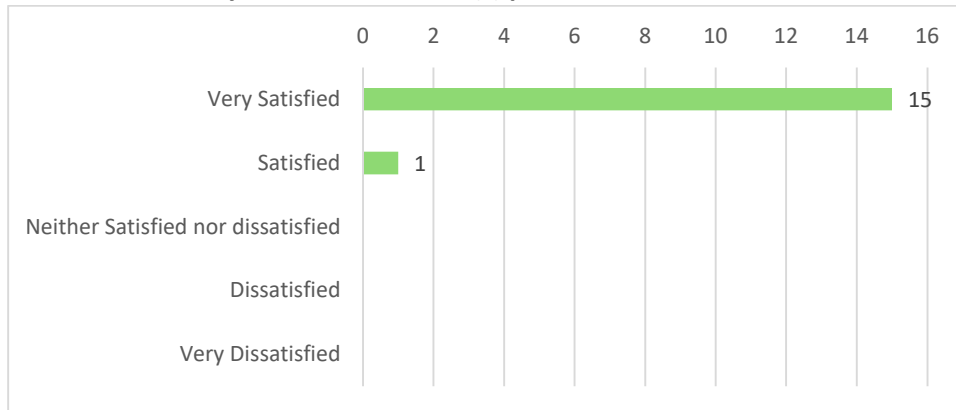
**11. For people who are working, what are the TOP THREE THINGS making it difficult for them to keep their jobs?**



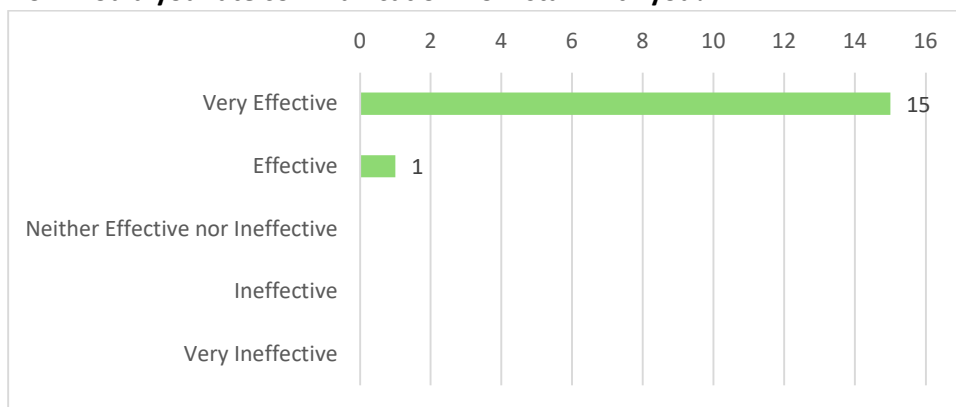
## Customer Satisfaction Survey Results – Head Start

Skyline CAP Head Start surveys parents at the end of each school year to gauge their satisfaction and identify areas for improvement. A total of 16 responses were received to the survey issued for FY25. The results are illustrated in the graphs below.

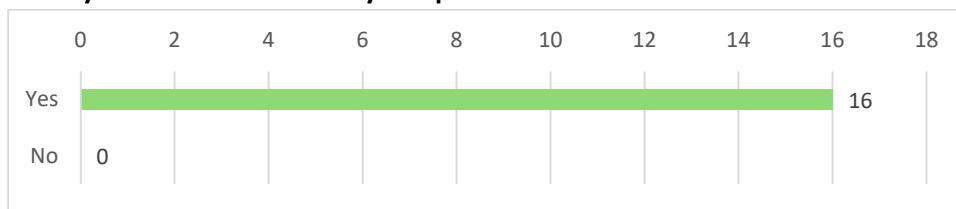
### 1. How satisfied are you with the service(s) provided?



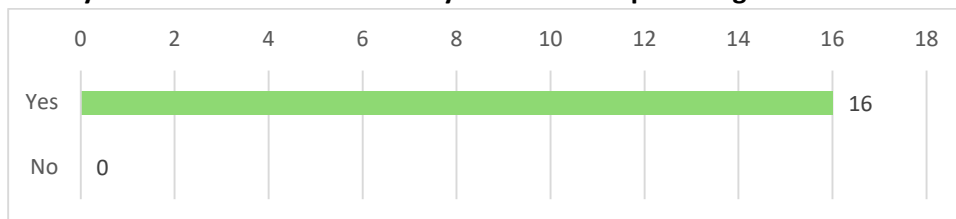
### 2. How would you rate communication from staff with you?



### 3. Were you satisfied with how your questions and concerns were addressed?

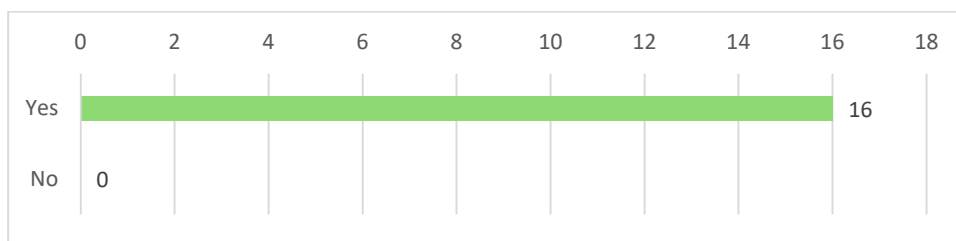


### 4. Were you satisfied with the courtesy of staff when providing services?

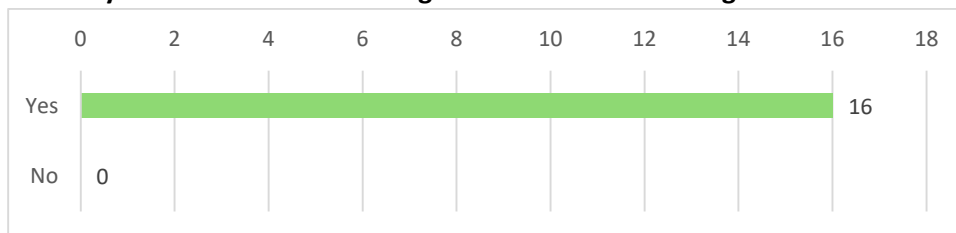


### 5. Were you satisfied with the level of welcome and respect you felt from Skyline CAP staff?

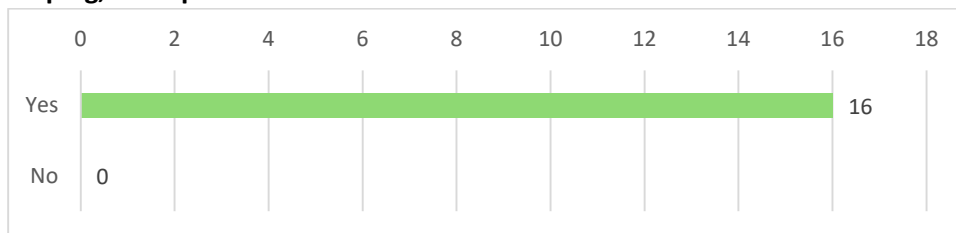




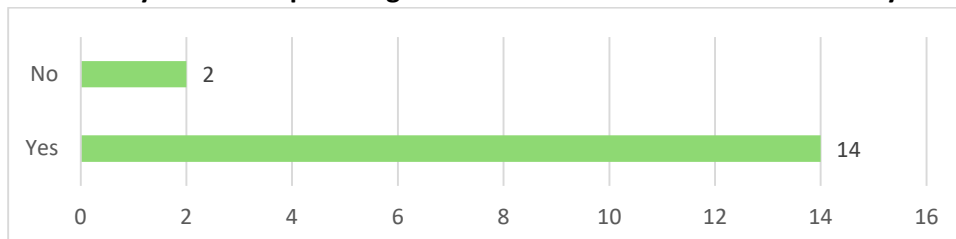
**6. Does Skyline demonstrate a strong commitment to meeting the needs of clients with disabilities?**



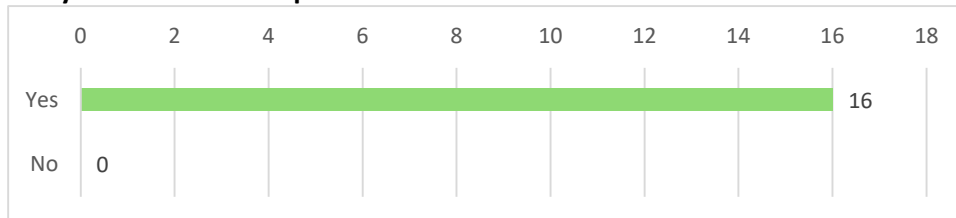
**7. Have you seen improvement in your child's growth and development, including independency, sharing, helping, and open communication?**



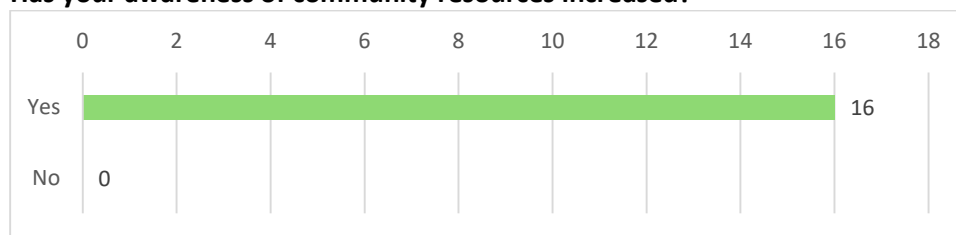
**8. Have family relationships strengthened as a result of resources shared by Head Start?**



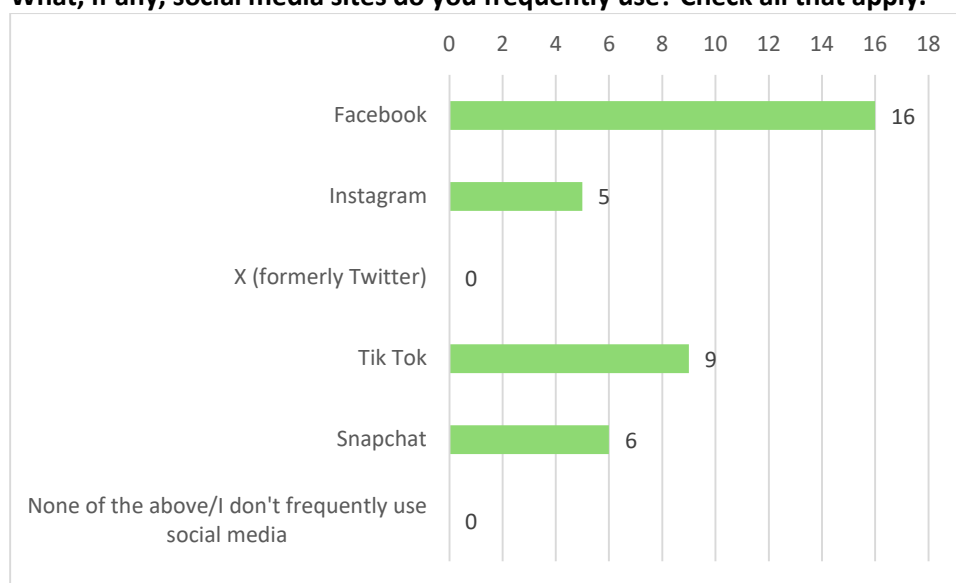
**9. Has your child made improvements in social skills and academics?**



**10. Has your awareness of community resources increased?**



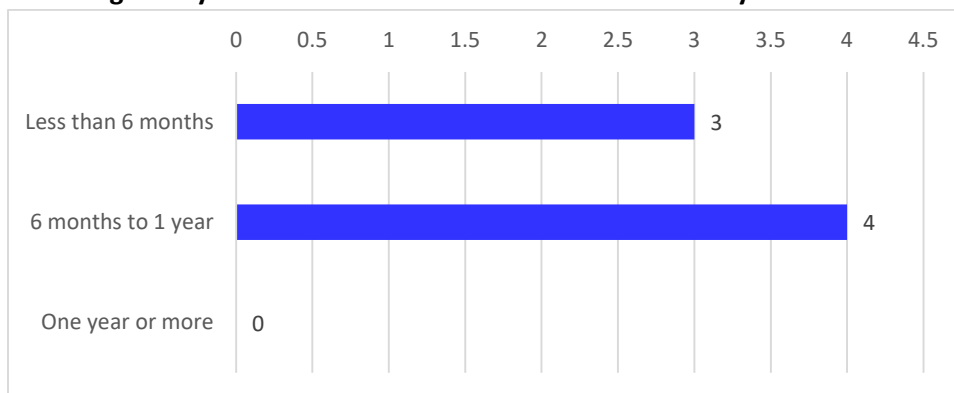
**11. What, if any, social media sites do you frequently use? Check all that apply.**



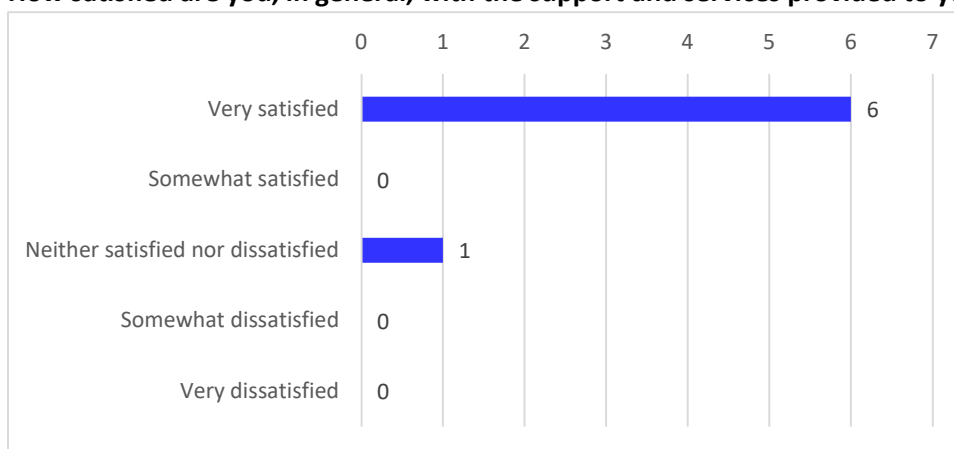
**Table 50: Customer Satisfaction Survey Results – Healthy Families**

Skyline CAP Healthy Families typically surveys its clients each year. The program last surveyed families in 2024. In total, seven (7) families responded to the survey. The results are illustrated in the graphs below.

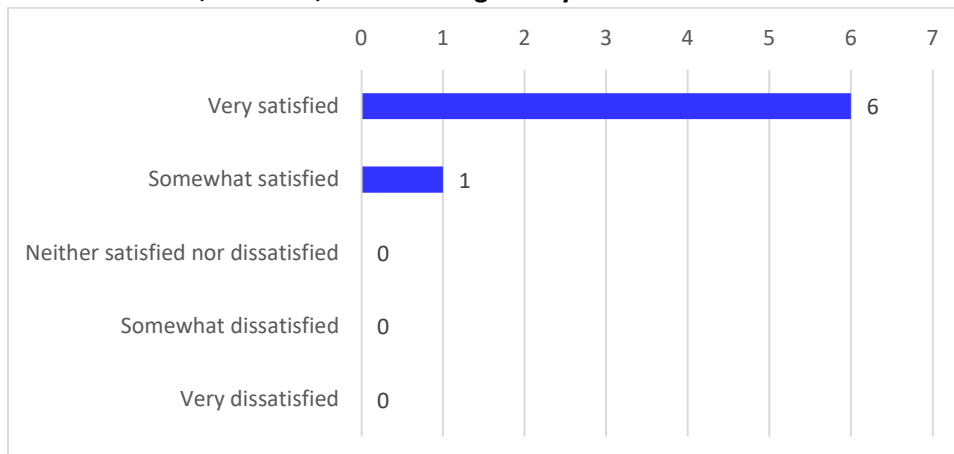
**1. How long have you worked with a home visitor from Healthy Families?**



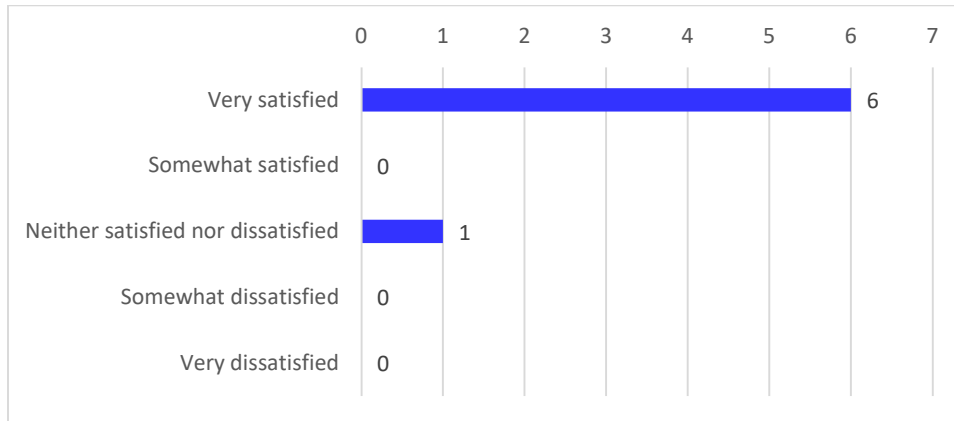
**2. How satisfied are you, in general, with the support and services provided to you by your home visitor?**



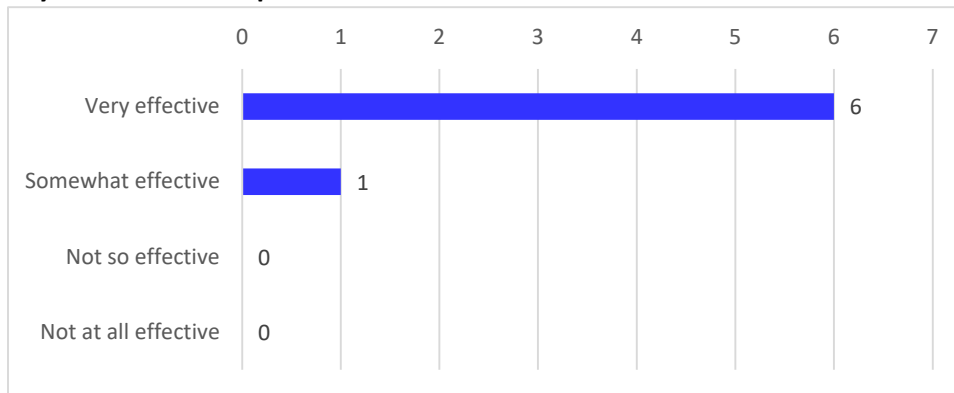
**3. How satisfied are you that your home visitor addresses topics and uses materials in ways that are understandable, relevant, and meaningful to you?**



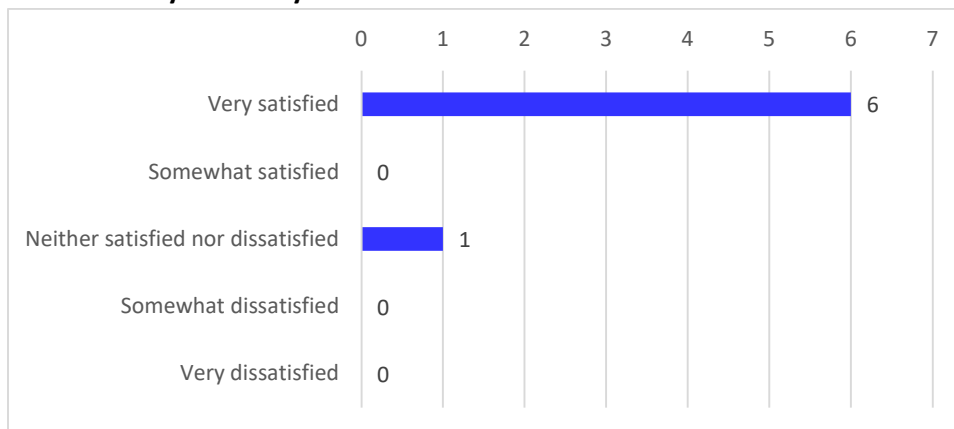
**4. How satisfied are you with how your concerns and questions are addressed by your home visitor?**



**5. How effective has the Healthy Families program been in helping you grow and become more confident in your abilities as a parent?**



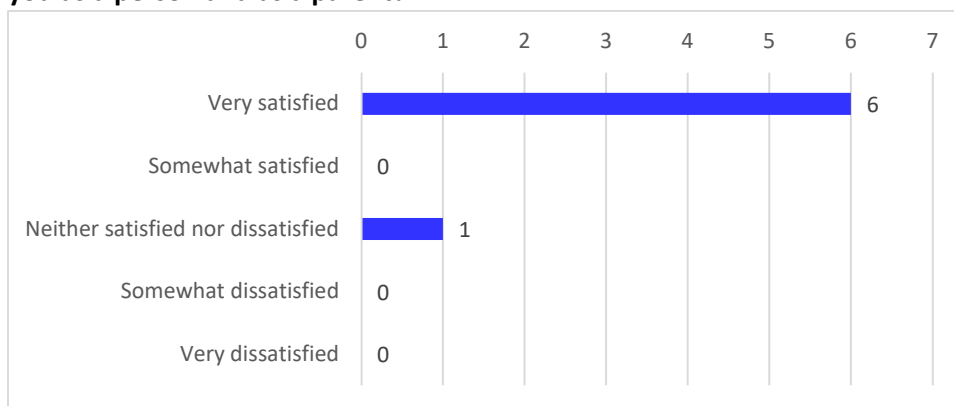
**6. How satisfied are you that your home visitor demonstrates a strong commitment to helping you meet the needs of your family?**



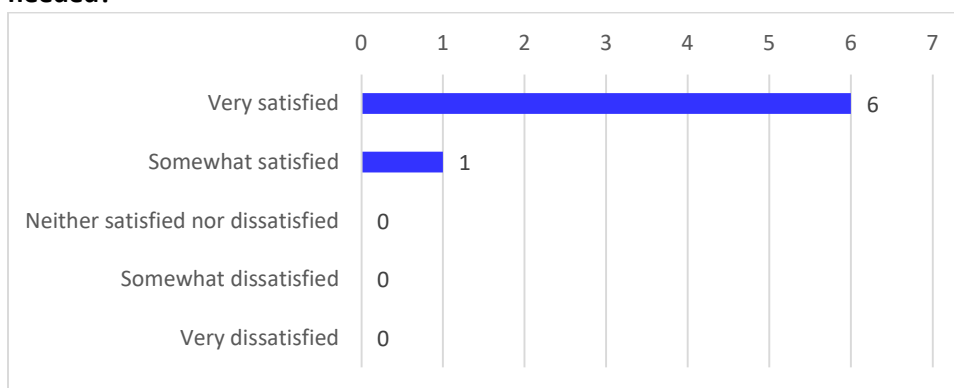
**7. How satisfied are you that your home visitor is consistently mindful of personal priorities and challenges you have shared?**



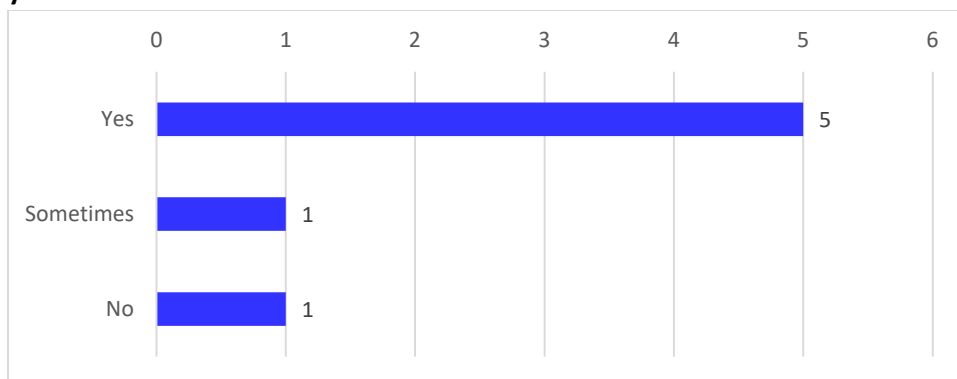
**8. How satisfied are you that your relationship with your home visitor is based on support and respect for you as a person and as a parent?**



**9. How satisfied are you with your home visitor's flexibility with scheduling, including using virtual visits, if needed?**



**10. Has your home visitor offered to connect you with other resources, agencies and/or programs in which you are interested?**



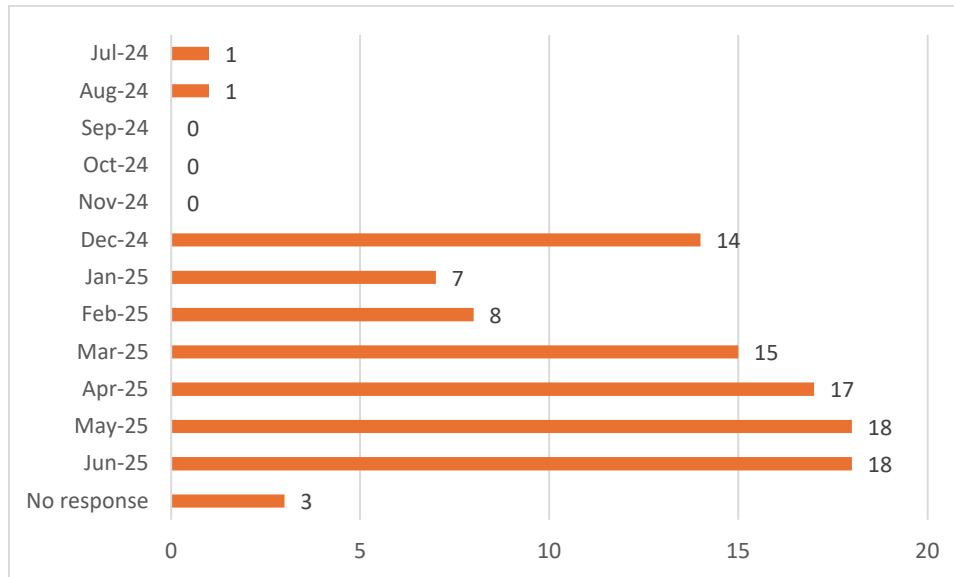
**11. Please share any suggestions you have about improvements Healthy Families Skyline CAP can make to become more effective. Feel free to share what you believe are strengths and weaknesses about the program.**

- a. I really appreciate my home visitor with Healthy Families Skyline CAP!! She is awesome!! Please treat her like the gem she is!
- b. Would love to have Spanish-speaking home visitors
- c. Absolutely love my worker. She helps a lot. Her handouts are helpful and she explains everything.

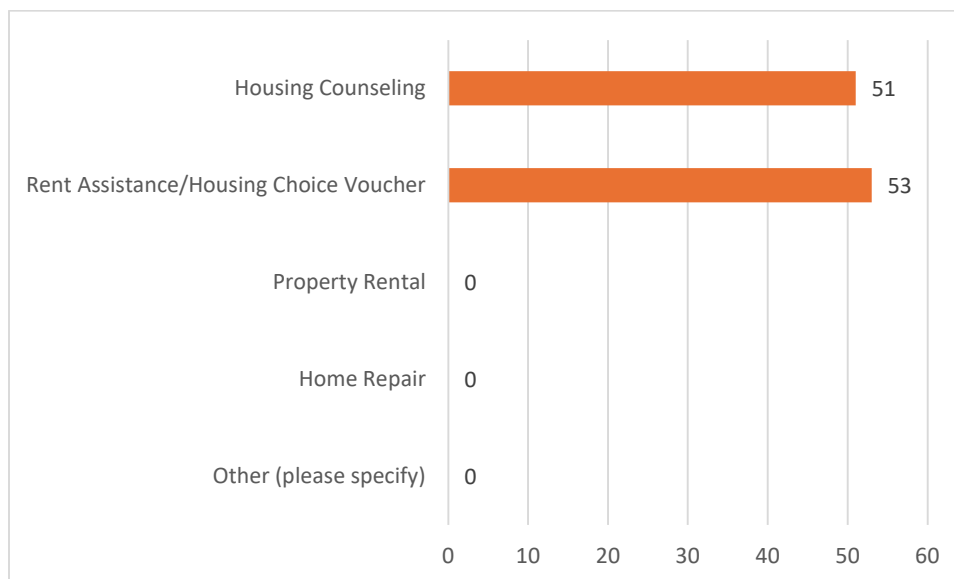
**Table 51: Customer Satisfaction Survey Results – Housing Services**

Skyline CAP's Housing team asks customers to complete a survey in-office at the completion of services using a handheld tablet for convenience. Emergency Home Repair customers are asked to complete the survey once the project is complete. In FY2025, 102 customers responded to Housing's Customer Satisfaction survey. The results are illustrated in the graphs below.

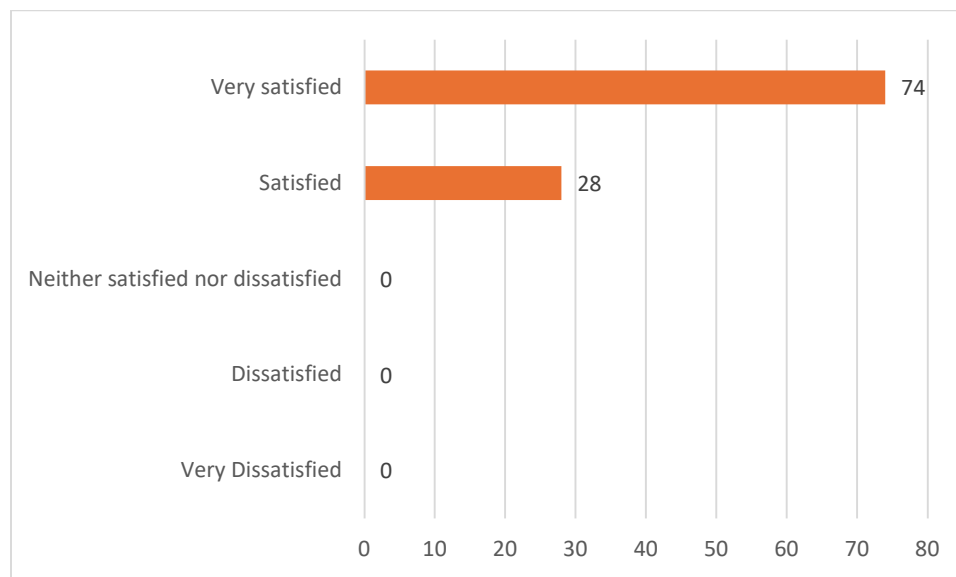
**1. When did you receive housing services?**



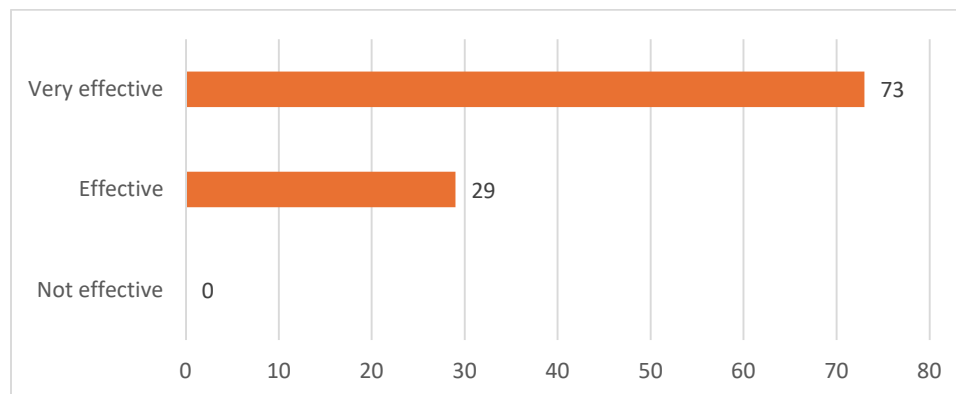
**2. What housing service(s) did you receive from Skyline CAP?**



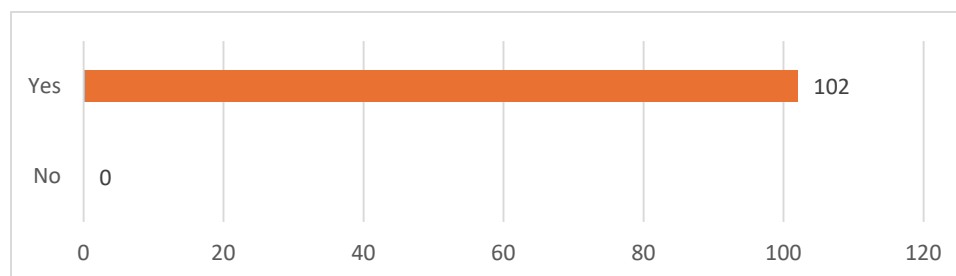
**3. How satisfied are you with the service(s) you received?**



**4. How effective was the communication you received from Skyline CAP?**

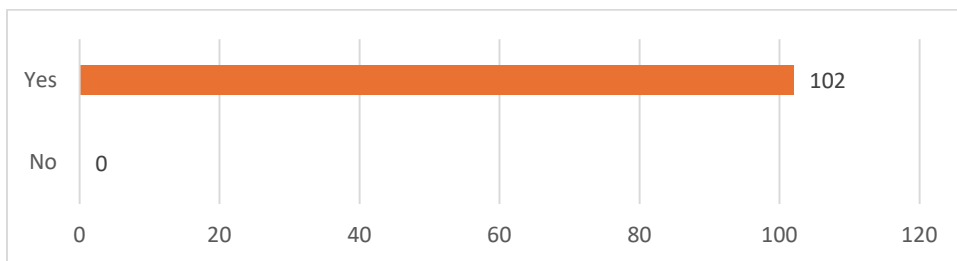


**5. Were your questions and concerns addressed?**

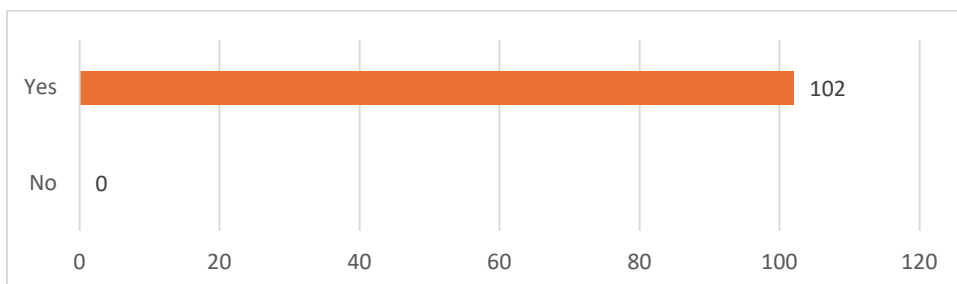


**6. Were staff courteous when providing services?**

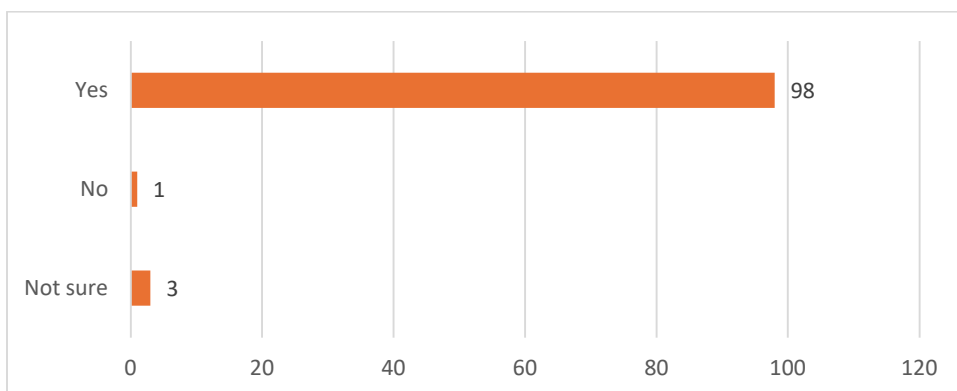




**7. Do you feel welcomed and respected by Skyline CAP staff?**

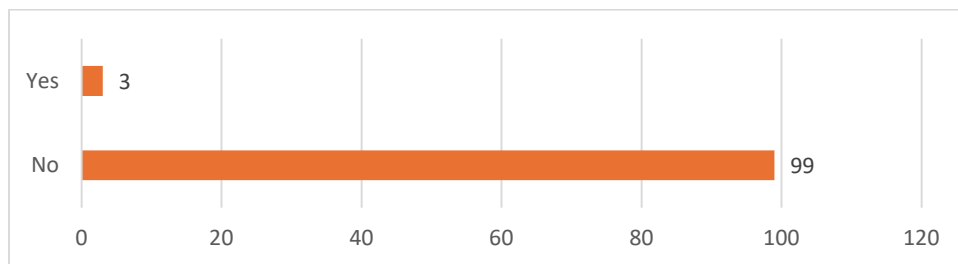


**8. Does Skyline CAP demonstrate a strong commitment to meeting the needs of clients with disabilities?**



*Comments: Not disabled (2)*

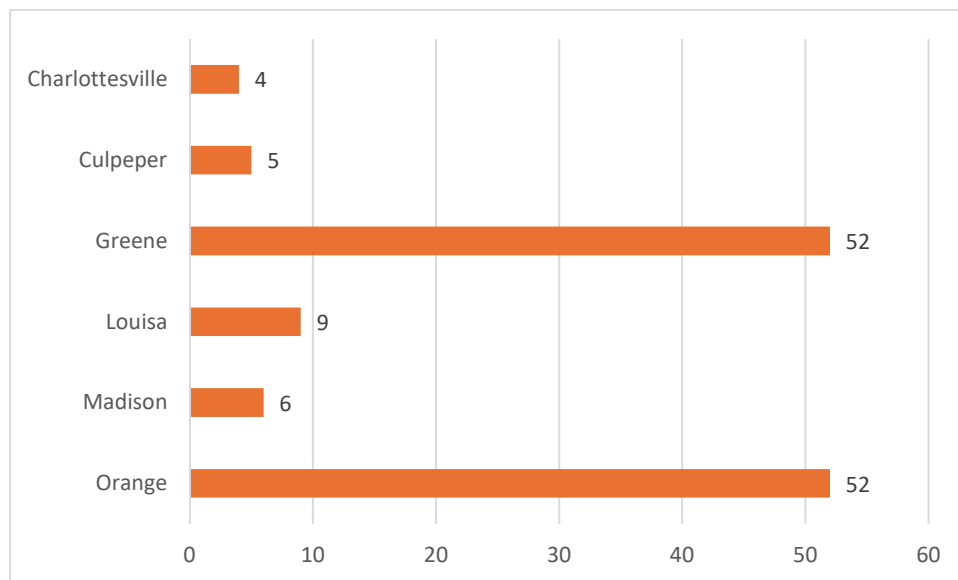
## 9. Are there ways we can improve your next experience?



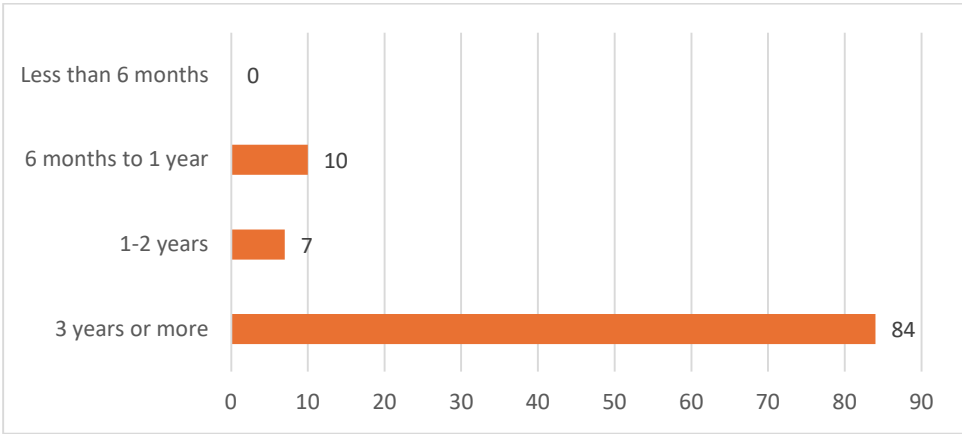
### Comments:

- *Please send me, Samantha, the letter with her appointment. My mom did not show me till the day before and I had to use PTO to bring her.*
- *Do by phone.*

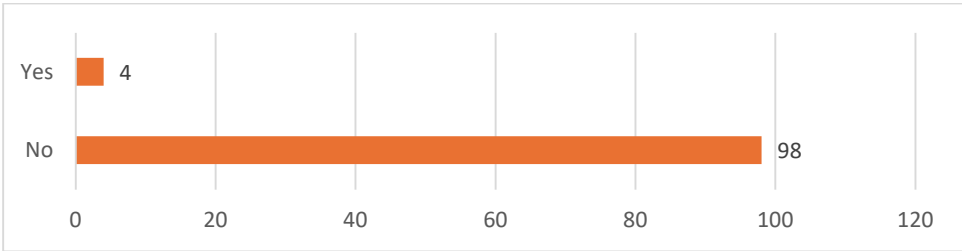
## 10. Please tell us the county where you live:



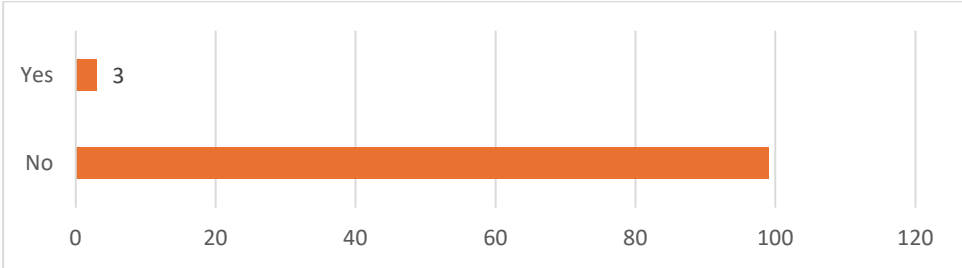
11. How long have you been a client of Skyline CAP?



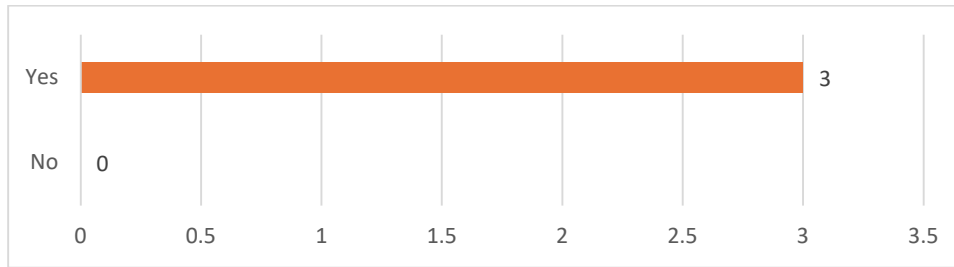
12. If you would like us to contact you, please enter your contact information below:



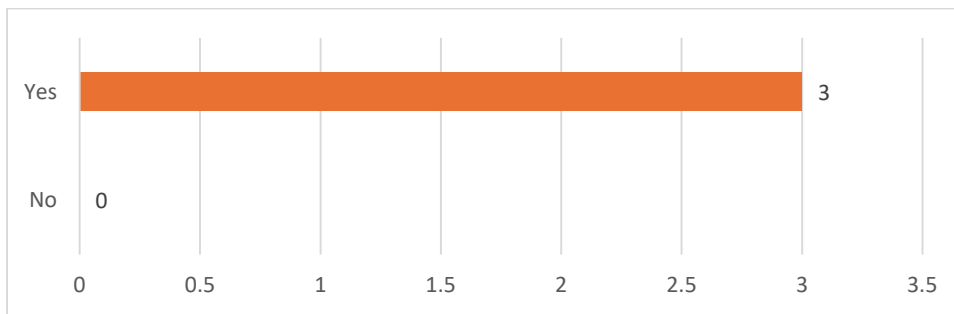
13. Did you receive home repair services?



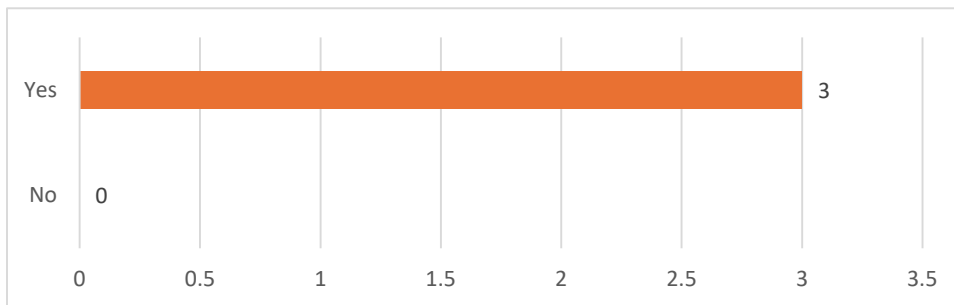
**14. Were the contractor(s) who performed services in your home courteous and respectful?**



**15. Was the project completed in a satisfactory and timely manner?**



**16. Do you believe the health and safety of your home environment has improved as a result of Skyline's Emergency Home Repair Program?**



## Appendix C: Skyline CAP Client Demographics

### Individual Demographics of Clients Served by Skyline CAP – FY25

AGE	
0-5	19.07%
6-13	16.32%
14-17	7.33%
18-24	9.41%
25-44	27.20%
45-54	5.81%
55-59	2.32%
60-64	3.24%
65-74	5.44%
75 and older	3.00%
Unknown	0.86%

GENDER	
Male	55.99%
Female	43.03%

RACE	
American Indian / Alaska Native	0.12%
Asian	0.73%
Black / African American	25.61%
Native Hawaiian or Other Pacific Islander	0.49%
Other Race	3.36%
White	64.98%
Multi Race	3.00%

ETHNICITY	
Hispanic / Latino	5.81%
Non-Hispanic / Not Latino	92.30%

DISABILITY	
Disabled	11.55%
Not Disabled	28.97%

EDUCATION LEVEL	
<9 Years (0-8 <sup>th</sup> Grade)	12.78%
12 Years (GED HS equivalency)	6.30%
12+ Some Post Secondary	2.02%
12 Years (completed high school)	8.37%
14 to 24 Year Old – Not in School and Not Working	0.06%
14 Years (AA Degree)	0.31%
16 Years (Received BA/BS)	0.00%
16 Years+ (only BA/BS Received, Not Graduate Degree)	0.00%
18 Years (Graduate Degree)	0.00%
Grades 9-12 / Non-Graduate	5.81%
Industry Recognized Vocational Certification	0.06%

## Household Demographics of Clients Served by Skyline CAP – FY25

EMPLOYMENT STATUS	
Employed Full-Time	4.28%
Employed Part-Time	1.53%
Migrant Seasonal Farm Worker	0.00%
Not in Labor Force	12.22%
Retired	4.16%
School/Job Training Program	0.37%
Seasonal/Temporary Employment	0.06%
Unemployed (< 6 Months)	0.18%
Unemployed (> 6 Months)	0.73%

MARITAL STATUS	
Divorced	0.73%
Living Together, Not Married	0.92%
Married	3.00%
Never Married / Single	17.42%
Separated	0.37%
Widowed	1.28%

LANGUAGES	
Asian and Pacific Islander	0.31%
English	89.98%
Middle Eastern and South Asian	0.37%
Spanish	3.00%
Multi Language	0.31%

INCOME AS PERCENT OF POVERTY	
0-50%	25.67%
50.01-75%	11.49%
75.01-100%	19.92%
100.01-125%	9.39%
125.01-150%	7.28%
150.01-175%	4.21%
175.01-200%	2.49%
Over 200%	6.13%

FAMILY TYPE	
Female-Headed Single Parent Household	32.57%
Male-Headed Single Parent Household	1.53%
Multi-generational Household	3.83%
Non-Related Adults with Children	1.53%
Other	0.77%
Single Person – No Children in Household	23.95%
Two Adults – No Children in Household	6.13%
Two Parent Household/Family	26.05%

HOUSING STATUS	
Homeless	0.57%
Homeowner	2.30%
Living with Family Rent Free	0.57%
Other	1.53%

## Skyline CAP Services and Outcomes – FY25

HEAD START	
Number of Children Demonstrating Improved Literacy Skills	17
Number of Children (age 0-5) Demonstrating School Readiness	28
Number of Children Demonstrating Improved Positive Approaches to Learning	47
Number of Health Screenings	1,291
Number of Books Borrowed from Lending Library	8,691

HEALTHY FAMILIES	
Number of Home Visits	207
Number of Families Improving Safety of Home Environment	32
Percentage of Prenatal Moms Receiving Scheduled Care	100%
Percentage of Moms Screened for Postpartum Depression	100%
Percentage of Children Connected with Pediatrician	95%
Percentage of Children Receiving On-Time Immunizations	100%

HOUSING	
Number of Affordable Housing Units Owned by Skyline CAP	30
Number of Housing Choice Vouchers Administered	236
Number of Individuals Obtaining Housing	18
Number of Individuals Maintaining Housing 6 Months or More	544
Number of Individuals Receiving Housing Counseling	228
Number of Emergency Home Repair Projects	7
Total Spent on Emergency Home Repairs	\$16,604

PROJECT DISCOVERY	
Number of Students Served	17
Number of Hours	152
Number of Field Trips to College Campuses	5

## References

- AARP. (2024, Dec. 10). New AARP report: Majority of adults 50-plus want to age in place, but policies and communities must catch up. <https://press.aarp.org/2024-12-10-New-AARP-Report-Majority-Adults-50-plus-Age-Place-Policies-Communities-Catch-Up>
- American Automobile Association. (2025). *Your Driving Costs: 2025 Fact Sheet*. AAA Foundation for Traffic Safety.
- Annie E. Casey Foundation. (n.d.). *Babies born by Medicaid as payment source* [Data set]. KIDS COUNT Data Center. <https://datacenter.aecf.org/data/tables/9644-babies-born-by-medicaid-as-payment-source?loc=48&loct=5#detailed/5/6853,6865,6887,6903-6904,6916,6926,6937/false/1095,574/any/18868,18869>
- Blue Ridge Area Coalition for the Homeless. (n.d.). Homelessness in the Charlottesville region, including Greene County. <https://www.blueridgehomeless.org>
- Board of Governors of the Federal Reserve System. (2024, May). Report on the economic well-being of U.S. households in 2023. <https://www.federalreserve.gov/publications/2024-economic-well-being-of-us-households-in-2023-executive-summary.htm>.
- Bureau of Labor Statistics. (2025). \*Quarterly Census of Employment and Wages (QCEW). U.S. Department of Labor. <https://www.bls.gov/cew/>
- Cardinal News. (2025, May 2). Robust CEP program vital to solve childhood hunger. <https://cardinalnews.org/2025/05/02/robust-cep-program-vital-to-solve-childhood-hunger/>
- Casey, M., & Rico, R. J. (2023, June 17). Eviction filings are 50% higher than they were pre-pandemic in some cities as rents rise. Associated Press. <https://apnews.com/article/evictions-homelessness-affordable-housing-landlords-rental-assistance-dc4a03864011334538f82d2f404d2afb>
- Centers for Medicare & Medicaid Services. (2022). Hospital utilization and preventable hospitalization data.
- Child Care Aware of America. (2024). Affordability analysis. [https://info.childcareaware.org/hubfs/Affordability\\_Analysis\\_2024.pdf](https://info.childcareaware.org/hubfs/Affordability_Analysis_2024.pdf)
- Child Care Aware of America. (2024). Price of care interactive tool. <https://www.childcareaware.org/price-landscape24>
- County Health Rankings & Roadmaps. (2025). University of Wisconsin Population Health Institute.
- Data USA. (2024). *Orange County, VA: Demographics and Commute Patterns*. Retrieved from <https://datausa.io/profile/geo/orange-county-va>
- Davidson, P. (2025, Mar. 6). Rent is rising sharply in the most affordable areas, stressing low, middle-income tenants. USA Today. <https://www.usatoday.com/story/money/2025/03/03/rent-rising-least-costly-affordable-areas-effect-tenants/80081680007/>
- Davis, M. R. (2022, Nov. 21). Despite pandemic, percentage of older adults who want to age in place stays steady. AARP. <https://www.aarp.org/home-family/your-home/info-2021/home-and-community-preferences-survey.html>



Desilver, D. (2024, Oct. 25). A look at the state of affordable housing in the U.S. Pew Research Center.  
<https://www.pewresearch.org/short-reads/2024/10/25/a-look-at-the-state-of-affordable-housing-in-the-us/>

Economic Policy Institute. (2025, January). *Family Budget Calculator*. <https://www.epi.org/resources/budget/>

Encompass Community Supports. (n.d.). *Local transportation*.  
<https://www.encompasscommunitysupports.org/service/local-transportation/>

Eviction Lab. (2018). *Eviction filing rates* [Data set]. Princeton University.  
<https://evictionlab.org/map/?m=modeled&c=p&b=efr&s=all&r=states&y=2018&z=3.29&lat=43.37&lon=-105.87&lang=en>

Feeding America. (2023). Map the meal gap: Virginia county data.  
<https://map.feedingamerica.org/county/2022/overall/virginia/county/orange>

Foothills Housing Network, Rappahannock-Rapidan Regional Commission. (2024). Point-in-Time (PIT) data report.

Giovanetti, E. (2025, Jan. 22). Survey: 42% of Americans don't have an emergency fund. U.S. News & World Report. <https://www.usnews.com/banking/articles/2025-financial-wellness-survey>

Glasmeier, A. K. (2025). *Living Wage Calculator*. Massachusetts Institute of Technology.  
<https://livingwage.mit.edu/states/51/locations>

Greene County Broadband Initiative. (2025, Jan.). Regional Internet Service Expansion (RISE) project.  
<https://greenecountyva.gov/213/Broadband-Initiative>

Hepburn, P., Grubbs-Donovan, D., & Hartley, G. (2024, Apr. 22). Preliminary analysis: Eviction filing patterns in 2023. The Eviction Lab. <https://evictionlab.org/ets-report-2023/>

HousingForward Virginia. (n.d.). *Rental vacancy rate*.  
<https://housingforwardva.org/applications/sourcebook/rental-vacancy/>

HUD User, Office of Policy Development and Research, FY2025 Fair Market Rent Documentation System.  
<https://www.huduser.gov/portal/datasets/fmr.html>

Joint Legislative Audit & Review Commission. (2021). Affordable housing in Virginia.  
<https://jlarc.virginia.gov/landing-2021-affordable-housing-in-virginia.asp>

Leonhardt, M. (2024, Aug. 30). The price of parenting is growing prohibitive. That's bad news for the economy. Barron's. <https://www.barrons.com/articles/parenthood-economy-expenses-politics-5ac47bac>

Madison County. (n.d.). Broadband. <https://www.madisonco.virginia.gov/498/Broadband>

National Center for Education Statistics, NCES – Common Core of Data. 2022-2023.

National Low Income Housing Coalition. (2024, Mar.). *The gap: A shortage of affordable homes*.

National Low Income Housing Coalition. Out of Reach. 2024. <https://nlihc.org/or/state/va>

National Low Income Housing Coalition. (n.d.). Housing needs by state: Virginia. <https://nlihc.org/housing-needs-by-state/virginia>

Orange County. (n.d.). Broadband Authority (FiberLync). <https://orangecountyva.gov/746/Broadband-Authority-FiberLync>

Peifer, K. (2025, June 16). Child care costs squeeze Virginia families. Axios Richmond.  
<https://www.axios.com/local/richmond/2025/06/16/child-care-costs-virginia-inflation>

PolicyMap. (2025). *Housing needs assessment report* [Data report].  
[https://www.policymap.com/report\\_widget?type=fur&area=predefined&pid=683937161&sid=10192](https://www.policymap.com/report_widget?type=fur&area=predefined&pid=683937161&sid=10192)

Prosperity Now Scorecard, January 2020.

Rabbitt, M. P., Reed-Jones, M., Hales, L. J., & Burke, M. P. (2024). Household food security in the United States in 2023 (Report No. ERR-337). U.S. Department of Agriculture, Economic Research Service.  
<https://doi.org/10.32747/2024.8583175.ers>

Rideshare. (n.d.). Commuter and carpool resources. <https://www.rideshareinfo.org>

Schmidt, M. (2025, May 16). Youngkin signs bipartisan child welfare reforms and sets new goals for foster care. *Virginia Mercury*. <https://viriniamercury.com/2025/05/16/youngkin-signs-bipartisan-child-welfare-reforms-and-sets-new-goals-for-foster-care/>

Sherburne, M. (2018, December 14). *Head Start slashes likelihood of adult poverty*. Phys.org. Retrieved May 5, 2025, from <https://phys.org/news/2018-12-slashes-likelihood-adult-poverty.html>

The Madison Eagle. (2023, Sept. 29). County has two broadband projects underway.  
[https://dailyprogress.com/news/community/madisonnews/county-has-two-broadband-projects-underway/article\\_e903f374-5c1d-11ee-930f-2396ca0fe536.html](https://dailyprogress.com/news/community/madisonnews/county-has-two-broadband-projects-underway/article_e903f374-5c1d-11ee-930f-2396ca0fe536.html)

Thomas Jefferson Planning District Commission. (2024). *Partnership for Accessible Transportation Help (PATH)*.

United for ALICE (2025). National Overview. Retrieved from <https://unitedforalice.org/national-overview>

University of Michigan, Institute for Healthcare Policy and Innovation. (2022, Apr.). National poll on healthy aging. <https://www.healthyagingpoll.org/reports-more/report/older-adults-preparedness-age-place>

University of Virginia Weldon Cooper Center for Public Service. (2025). Virginia Population Projections. Retrieved from <https://coopercenter.org/virginia-population-projections>

U.S. Bureau of Labor Statistics. QCEW data files. NAICS-Based. <https://www.bls.gov/cew/downloadable-data-files.htm>

U.S. Census Bureau, American Community Survey. 2019-23.

U.S. Census Bureau, American Community Survey. 2023 5-Year Estimates. Table B08201: Household Vehicle Availability.

U.S. Census Bureau, American Community Survey. 2023 5-Year Estimates. Table DP04.

U.S. Census Bureau. American Community Survey. 2023 5-Year Estimates. Table S1701

U.S. Census Bureau. (n.d.). *Building permits survey: State map visualizations*. U.S. Department of Commerce.  
<https://www.census.gov/construction/bps/visualizations/statemap/index.html>

U.S. Census Bureau. (2024). \*LEHD OnTheMap Application. Longitudinal Employer-Household Dynamics Program. <https://onthemap.ces.census.gov/>

U.S. Census Bureau, 2023 Population Estimates. Data formatted and posted at <http://demographics.coopercenter.org> by the UVA Weldon Cooper Center, Demographics Research Group.

U.S. Census Bureau. (2022). Small Area Health Insurance Estimates (SAHIE).

- U.S. Department of Health and Human Services. Office of the Assistant Secretary for Planning and Evaluation. HHS Poverty Guidelines for 2025. Retrieved from <https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines>
- U.S. Department of Labor, Bureau of Labor Statistics. 2025 – July.
- Virginia Department of Education. (n.d.) Cohort Graduation Build-A-Table. 2024-2019. [https://p1pe.doe.virginia.gov/apex\\_captcha/home.do?apexTypeId=305](https://p1pe.doe.virginia.gov/apex_captcha/home.do?apexTypeId=305)
- Virginia Department of Health. (2025). Drug Overdose Deaths.
- Virginia Department of Health. (2023, July 7). Culpeper, Madison, and Orange Health District community health assessment.
- Virginia Department of Housing and Community Development. (2025). \*Community Profile Dashboard. <https://www.dhcd.virginia.gov/community-profiles>
- Virginia Department of Social Services. (2025). *Foster care monthly snapshot: Children in foster care in Virginia* (2025). Retrieved from <https://www.dss.virginia.gov/geninfo/reports/children/fc.cgi>
- Virginia Employment Commission. (2024, Dec.). Virginia job openings outnumbered unemployed in December. VirginiaWorks. <https://www.virginiaworks.org>
- Virginia Housing Alliance. (2024). *Virginia housing landscape 2024*. <https://vahousingalliance.org>
- Virginia Works. (2024). Local Area Profile: Greene County, VA. Virginia Employment Commission. [https://virginiaworks.gov/\\_docs/local-area-profiles/5104000079.pdf](https://virginiaworks.gov/_docs/local-area-profiles/5104000079.pdf)
- Virginia Works. (2024). Local Area Profile: Madison County, VA. Virginia Employment Commission. [https://virginiaworks.gov/\\_docs/local-area-profiles/5104000113.pdf](https://virginiaworks.gov/_docs/local-area-profiles/5104000113.pdf)
- Virginia Works. (2024). Local Area Profile: Orange County, VA. Virginia Employment Commission. [https://virginiaworks.gov/\\_docs/local-area-profiles/5104000137.pdf](https://virginiaworks.gov/_docs/local-area-profiles/5104000137.pdf)
- Virginia Works. (2024). Occupational Employment and Wage Statistics – Piedmont Region. <https://virginiaworks.gov/oews/>
- Wong, V. (2024, July 10). ‘One job isn’t enough’: Nearly half of parents work side hustles now. MarketWatch. <https://www.marketwatch.com/story/one-job-isnt-enough-nearly-half-of-parents-work-side-hustles-now-d7255fd0>
- Wong, V. (2024, Nov. 22). Have kids? You’ll need to make an extra \$36,000 to reach true financial security. MarketWatch. <https://www.marketwatch.com/story/have-kids-youll-need-to-make-an-extra-36-000-to-reach-true-financial-security-a7487286>