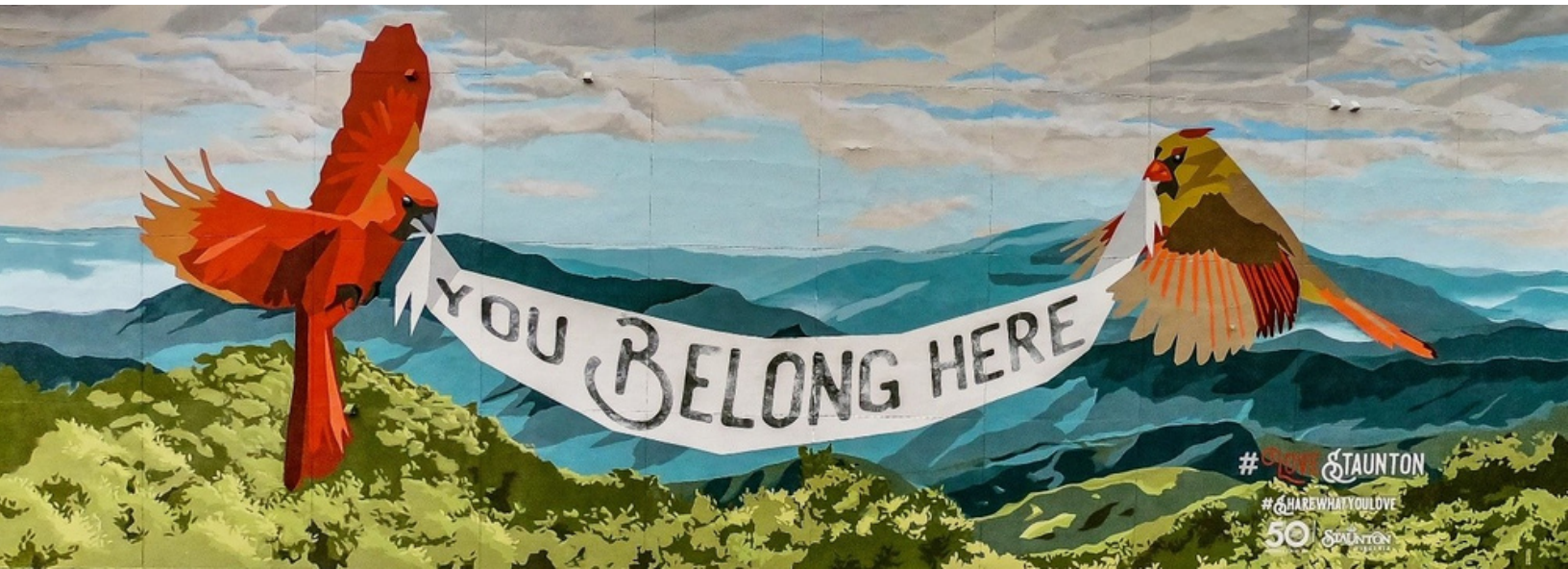


FINDINGS & RECOMMENDATIONS

of the

***Diversity, Equity, and
Inclusion Commission***



STAUNTONTM
VIRGINIA

Table of Contents

1. Executive Summary.....	3
2. Introduction	5
3. Data and Methods	7
a. Analysis Framework	7
b. Data Collection.....	8
c. Data Source Descriptions.....	9
d. Analysis Process	11
4. Key Research Findings	13
a. Demographic Profile of Staunton	13
b. Economic Vitality	19
i. Poverty & Unemployment.....	19
ii. Employment, Jobs, & Wealth	22
iii. Business Ownership & Income/Wages	24
c. Readiness and Well-Being.....	26
i. Youth & Families	26
ii. Mental Health and Health Related Services	29
iii. Education & Schools	34
iv. Criminal Justice	39
d. Connectedness.....	42
i. Access to and Knowledge of Services	42
ii. Community Engagement/Belonging.....	44
iii. Affordable Housing	46
iv. Transportation	49
5. Recommendations	51
6. Proposed framework for the next 12-18 months	67
7. References	68
8. Appendices	75

ACKNOWLEDGEMENTS

For the past eighteen months, we have worked together addressing the mission given to us by Staunton City Council, to gather and objectively evaluate the existing information on social and racial equity in the City of Staunton. This has been an honor to which we have fully dedicated our time and energy, while appreciating that this work is never finished or completed.

One of the great joys of this experience has been the time that we've spent with citizens and organizations across the breadth of our community. We are left with a deep sense of gratitude to the entire Staunton community for their engagement in this effort. We may or may not have agreed with each other; the important thing is that we, in our diversity, engaged with each other on issues of equity and inclusion. This ongoing investment in each other gives us strong hope for the future of our community.

DEI Commission

Sabrina Burress, LPC, NCC, Chair

Lindsey Lennon, Ph.D., Vice Chair

Lou Boden

Joamarie Garcia

Mark Jeter

Vicki Keyser

Jake Krug

Beth Nelsen

AnhThu Nguyen

Nathaniel Riddle, MPA

Daniel Stuhlsatz, Ph.D.

Jennifer Trippeer

Susan Venable

Zavia Willis

We wish to acknowledge those citizens who made a point of meeting with us in listening sessions, interviews, meetings, "meet and greets", and our public hearing, as well as completing our surveys. We are hopeful that this final report reflects their ideas and observations, even if we are unable to specifically include all of them.

We also acknowledge those who directly supported our efforts. Special thanks go to the City Manager's Office; their competence and service have been remarkable. We are grateful for the inspiration, expertise, and wise guidance provided by our consultant, Dr. Robin Stacia. One major part of our work involved meeting with various Departments of the City of Staunton, all of whom gave generously of their time and institutional knowledge. We wish to acknowledge Sean Stuhlsatz for producing the Demographic section of this report and for providing statistical editorial assistance. And we are grateful to Staunton City Council for initiating and supporting this project to its conclusion.

Finally, we are especially thankful for our families and loved ones, whose support, patience, and understanding enabled us to commit the significant time required for this project.

Our debt to our fellow citizens is great. We hope that a stronger community emerges from joining together to achieve greater equity and inclusion for everyone, and that this will more than repay that debt.

EXECUTIVE SUMMARY

Introduction

The City of Staunton Diversity, Equity, and Inclusion (DEI) Commission is composed of 14 city residents appointed in May 2022 with the initial charge of *objectively evaluating existing data, studies, and reports from available sources concerning social and racial equity in the City of Staunton that evaluate social determinants and inequitable outcomes within the City of Staunton*. This report represents 18 months of the Commission's work and is designed to inform Staunton City Council and the public about the Commission's findings and to provide recommendations based on the initial data.

Process and Methods

The Commission began by conducting a comprehensive collection of existing data sources related to social and racial equity within the City of Staunton. This initial review included collecting external reports from partner organizations and gathering existing data points available locally, regionally, and federally. In addition to these reports, the Commission conducted in-depth interviews, focus groups, community listening sessions, and surveys, and held community events. These data collectively total 130 unique sources that offer an in-depth view of diversity, equity, and inclusion within the City of Staunton.

Framework

The Commission adopted the framework laid out by the National Equity Atlas (NEA), a widely used DEI framework, to organize its data analysis and conceptualize its final report. The analysis specifically focused on the equity indicators of demographics, economic vitality, readiness and well-being, and connectedness.

- Demographic data offers a "snapshot" of the make-up of our city.
- Economic vitality asks the question, *"What does the community offer to its citizens?"*
- Readiness and Well-Being asks the question, *"Do citizens have the experience, skills, and resources to thrive?"*

- Connectedness asks the question, *"Are citizens connected to their community and to economic opportunities?"*

Each piece of data was coded for the presence of the equity indicators and all related data was systematically content analyzed. The findings below present the primary issues identified through the data analysis process.

Key Research Findings

City of Staunton Demographics: Staunton has a population of 25,750 which is about 78.5% White, 11.4% Black, and approximately 10% other racial configurations. Within this population, roughly 4.2% identify as Hispanic or Latino. About a fifth of the population is under 18 years old. Another fifth is 65 years and older and just over half (53.6%) are female. With a median household income of \$53,041, Staunton has a poverty rate of 12.3%. 88.8% of the community has a high school diploma, and almost a third have a Bachelor's degree or higher (30.3%). In the past 20 years, Staunton has become more diverse racially and the aging population is growing.

Economic Vitality: Staunton has much to offer in terms of job opportunities and has an unemployment rate equivalent to the state average. However, these opportunities are not equitably dispersed across demographics and neighborhoods, and median wages for Staunton

fall well below the rest of the state. Some citizens experience the benefits of job opportunities and some do not. Those who do not face significant barriers to obtaining economic vitality, including poverty, lack of transportation and access to employment centers, and the availability of jobs paying a livable wage. Although business ownership may be a viable alternative to wage labor, it is often inhibited by regulations and a lack of resources.

Readiness and Well-Being: Three primary areas of concern stand out in terms of the readiness and well-being of the Staunton community. These are mental health, physical health, and education. Mental health is an area of top concern for the city and region. Access to care, social class, race, criminal background, stigma, and age are all cited as social barriers to mental health care. There is a lack of awareness of available resources and services, that is tied to a lack of communication, education, and promotion of existing services. Additionally, volatility in health insurance availability and coverage, increasing out-of-pocket costs, and shortages of healthcare providers are also areas of concern.

The physical health measures of residents indicate a lack of physical activity, healthy diets, and opportunities for positive engagement, especially for youth. Access to childcare is also frequently cited as a factor inhibiting employment and economic security, and, in turn, overall well-being for families. Affordability of childcare services and staffing are key areas of concern.

During data collection we found a general concern for equity of educational achievement

in our public schools. Recent data show that, while we have yet to achieve racial and ethnic equality (parity), all racial groups have achieved significant, continuous gains in academic achievement in all of our schools since COVID. In addition, the public schools have established a robust DEI program across the Division to promote equity in instruction and staffing.

Connectedness: Lack of connection and access to diverse and inclusive engagement opportunities (economic, social, and political) were reported to have a negative impact on community members' wellness, sense of belonging, and perception of community. Community engagement was a recurrent theme in many community stakeholder and key informant interviews.

Finally, affordable housing represents the most significant area of concern based on local data and community dialogues. Homelessness and housing cost burden are directly affected by social factors like poverty, race, disability, neighborhood, age, and criminal background, and correlate with access to health care and other services.

Recommendations

Following a comprehensive analysis of the collected data, the Commission developed a detailed outline of goals and actions the City of Staunton can take to help further their diversity, equity, and inclusion-related efforts. These recommendations include 5 goals, 16 specific actions, and suggested steps and timelines for each action. A full list of the recommendations can be found on page 51 of this report.

INTRODUCTION AND BACKGROUND TO THE DIVERSITY, EQUITY, AND INCLUSION COMMISSION

The City of Staunton is a vibrant small town with a notable, complex history. Nestled between several larger metropolitan areas yet still maintaining a sense of small-town charm, it attracts thousands of visitors and tourists each year. Staunton also boasts an increasingly diverse population of citizens who call the city home; some who have been here for generations and some who have recently arrived. The city's new mural and City Vision tagline "You Belong Here" is a motto that seeks to welcome all and create a sense of belonging for visitors and citizens alike. The primary goal of this report is to expand the City's understanding of exactly how they can help current and future citizens thrive and feel the sense that they do truly belong here in Staunton.

Following citizen feedback and initiation from City staff, Staunton City Council recognized the need for an Equity and Diversity Commission in mid-2021. The City conducted a survey of citizens in Fall 2021 for feedback on focus areas for the Commission and received a Diversity and Inclusion Grant from the Virginia Risk Sharing Association (VRSA). On February 24, 2022, City Council adopted a Resolution to formally create an Equity and Diversity Commission. The Commission would be composed of 11-15 city residents, to be appointed in May 2022, with the initial charge of *objectively evaluating existing data, studies, and reports from available sources concerning social and racial equity in the City of Staunton that evaluate social determinants and inequitable outcomes within the City of Staunton*. The following timeline outlines the creation and work of this Commission:

Timeline

- **August/September 2021:** City Council motion was adopted to establish an Equity and Diversity Commission and conduct a community survey regarding the framework and charge.
- **October 2021:** The City received a \$25,000 grant from VRSA to help support the Commission, which provided consulting

services from VRSA's Inclusion Resident, Robin Stacia, Psy.D.

- **February 2022:** City Council resolution adopted to establish the Equity and Diversity Commission.
- **May 2022:** Equity and Diversity Commission appointed by City Council.
- **June 2022:** Equity and Diversity Commission voted to change its name to the Diversity, Equity, and Inclusion Commission.
- **July 2022 - December 2022:** The Commission mapped out responsibilities, deliverables, and a project plan, including the creation of the Logistics and Planning, Community Connections, and Data and Research Subcommittees, with plans to create a Writing Subcommittee in summer 2023.
- **September 2022 - December 2022:** The Commission began to connect with community partners, collect data, and gather existing data sources.
- **January 2023 - July 2023:** The Commission continued gathering multiple types of data and planned and hosted community listening sessions.

- **August 2023 - October 2023:** Data analysis began, and a draft report structure was finalized.
- **October 2023 - November 2023:** The Commission prepared for and conducted a public hearing.
- **December 2023:** The Commission presents a final report to the City Council.
- **January 2024 - June 2024:** The Commission will continue work following the 12-18 month plan laid out in this report, will serve as subject matter experts to the City Council related to the contents of its report, and participate in Council hearings as appropriate related to the Commission's Final Report.

Report Overview

This report was only made possible by a truly collective and collaborative effort on the part of the entire Commission. It was not prepared nor written by a single consultant or professionally hired entity. Instead, it reflects the combined efforts of many citizen-writers with a wide variety of personal and professional backgrounds. As such, its writing tone and style reflect this inclusive range of citizen voices. Following this introduction, we outline the framework adopted by the Commission used to organize the volume of data collected and to help conceptualize the final report. In that same

section, we also describe the types and amounts of data collected and how that data was analyzed to produce this report.

Next, we review in detail the key findings of our data. These findings are organized according to our framework into the following categories: demographics, economic vitality, readiness and well-being, and connectedness. Within each of these categories, we outline a number of factors, or indicators, that contribute significantly to the outcomes in each category. These indicators also point to key areas of focus for work addressing diversity, equity, and inclusion issues. In addition to our external data findings, in several of these sections, we also reserve spaces titled “what we heard” to specifically elevate the voices of our community on these issues.

Based on this data and our research findings, we then outline our recommendations to City Council. These recommendations are organized into five major goals, with more specific action items, steps/phases, related stakeholders, and suggested timelines listed for each goal.

Finally, we offer a proposed framework for the collaborative work of the Commission and the City for the next 12-18 months. This framework is followed by a full list of our references and cited data sources, as well as a data appendix and appendices of our data collection tools.

DATA AND METHODS

Overview of the Analysis Framework, Data Collection, and Data Analysis Process

Analysis Framework

Introduction to the National Equity Atlas Framework

The Staunton Diversity, Equity, and Inclusion Commission adopted the framework laid out by the National Equity Atlas (NEA) to organize its data analysis and conceptualize its final report.¹ The NEA is a product of a partnership between PolicyLink and the USC Equity Research Institute. Their framework is widely used among other municipalities and organizations working to understand and address diversity, equity, and inclusion-related issues in communities. The descriptions below outline primary indicators identified by the NEA and a list of the data categories we utilized for each indicator. Some modifications, including the addition of well-being measures and combining these with readiness measures, were made to create a best fit with the scope of data from our community. Demographics are also considered here because of their interconnection with the needs of and outcomes within a community. Beyond Demographics, the primary indicators are Economic Vitality, Readiness and Well-Being, and Connectedness.

Demographics. *A profile of our city.*

Demographic data offers a “snapshot” of the make-up of our city. By understanding the current demographic profile, we can better understand Staunton, and how to support our citizens now and into the future.

Economic Vitality. *What does the community offer to its citizens?*

Ensuring all citizens of Staunton can participate and prosper economically is critical to a thriving community and a strong, resilient economy. Economic vitality represents the availability of economic opportunities in our community. Access to high-quality jobs, economic security, rising standards of living, entrepreneurship, and homeownership opportunities are just a few examples of the ways economic vitality is offered to citizens. This equity indicator represents aspects of the local environment and economy that, regardless of the level of

skill or experience of the individual, determine each citizen’s ability to thrive economically. For this measure, the Commission organized their data analysis by the following categories: Employment; Homeownership; Poverty; Unemployment; Income and Wages; Business Ownership; Job and Wage Growth; and Distribution of Wealth.

Readiness and Well-Being. *Do citizens have the experience, skills, and resources to thrive?*

For the City of Staunton to succeed, its citizens must be equipped with the education and support needed for health and economic success in today’s economy. Readiness indicators examine the extent to which citizens of all ages have the skill sets and resources necessary to connect to the employment and economic vitality that Staunton has to offer. This equity indicator represents aspects of the lived experiences of citizens and their life chances,

regardless of the external availability of jobs and other economic opportunities. These Readiness and Well-Being analysis categories include Education and Schools; Youth and Families; Aging and Elderly; and Life Expectancy.

In addition to Readiness measures, the Commission also specifically examined disparities in factors necessary for overall well-being for all ages. These categories included Physical Health; Mental Health; Health-Related Services; Recreation and Leisure; Access to Healthy Foods; and Criminal Justice.

Connectedness. *Are citizens connected to their community and to economic opportunities?*

All citizens of Staunton need access to resources and opportunities necessary to fully participate in economic, social, and political life. While some US neighborhoods may be home to good schools, safe streets, services, parks, and other crucial ingredients for economic success, other neighborhoods may suffer from disinvestment and lack of some of these basic elements. This equity indicator represents both the citizen's physical connectedness to and within a community, and their sense of connection and belonging to their community. Connectedness indicators include Community Engagement; Community Belonging; Transportation; Car Access; Commute Time; Pollution; Neighborhood Poverty; Affordable Housing; Job

Opportunities; and Access to and Knowledge of Services.

Data Collection

The Diversity, Equity, and Inclusion Commission conducted a comprehensive collection and analysis of data sources related to social and racial equity within the City of Staunton. This objective evaluation was completed using both qualitative and quantitative data gathered from a wide variety of primary and secondary sources. Collectively, these data determined the issues reviewed in this report and the Commission's recommendations on how the City Council can address identified needs within the City of Staunton. In all, the Commission collected 130 unique data sources. Data sources ranged from one to 257 pages in length, totaling over 2,700 document pages, and consisted of the following data types:

Table 1: Number of Data Sources by Type

Data Type	No. of Sources Collected
External Reports	64
In-Depth Interviews, Focus Groups	28
Community Listening Session	6
Survey Responses	30
Other Community Events	3

Data Source Descriptions

External Reports

External reports on the Staunton, Augusta, Waynesboro (SAW) region and Staunton City are the main sources of secondary data. These reports were brought to the attention of and shared with the Commission through focus groups, interviews, and meetings with local community partners and stakeholders, community listening sessions, feedback from the City Council following the Commission's update in December 2022, and regional meetings and events. External reports also included some promotional materials produced by source organizations that share information with the public about their services or programs. These external sources totaled 64 unique reports. A list of external data sources cited in this report can be found in the reference section and a full list of all data sources analyzed is available upon request.

Community Listening Sessions

As part of its initial charge, the Commission also elected to hold a series of community listening sessions. These sessions would help ensure inclusivity and foster community dialogue around the topics of diversity, equity, and inclusion. The Community Connections subcommittee was the primary body

responsible for planning and conducting these listening sessions. Community Connections held 7 individual listening sessions focused on the following topics and protected classes^a: LGBTQ; Deaf, Blind, and Other-Abled; Seniors; Youth and Families; BIPOC; Interfaith; and the General Population. Sessions were held throughout the city on a variety of days and at a variety of times so as to best accommodate access for citizens. The dialogues were led by Commission members with a pre-set list of questions that were the same for each session (see Appendix F). Extensive notes were also taken by Commission members during each session.

Interviews and Focus Groups

In addition to collecting external reports and holding community listening sessions, the Commission conducted a series of in-depth interviews with community partners and leaders. A list of key informants, organizations, and leaders was developed by the entire Commission, and contact information for each was gathered. From this list, the Commission identified key community stakeholders and held two focus groups with these organizations. They included the United Way, Valley Community Services Board, Central Shenandoah Health District, CAPSAW, Augusta Health, and the Community Foundation. Using the input and recommendations from these organizations, the Data and

^aThe term "protected class" refers to groups of people who are legally protected from being harmed or harassed by laws, practices, and policies that discriminate against them due to a shared characteristic. These groups are protected by both U.S. federal and state laws. Under the Virginia Human Rights Act, It is the policy of the Commonwealth to: 1. Safeguard all individuals within the Commonwealth from unlawful discrimination because of race, color, religion, national origin, sex, pregnancy, childbirth or related medical conditions, age, marital status, sexual orientation, gender identity, military status, or disability in places of public accommodation, including educational institutions and in real estate transactions; 2. Safeguard all individuals within the Commonwealth from unlawful discrimination in employment because of race, color, religion, national origin, sex, pregnancy, childbirth or related medical conditions, age, marital status, sexual orientation, gender identity, disability, or military status.

Research Subcommittee identified critical areas of interest and a list of community partners working in those areas. They then developed pre-planned questions (see Appendix E) for in-depth interviews, with the goal of interviewing as many community partners as possible during the Commission's data collection phase. Twenty-six interviews ranging from 45 minutes to over two hours in length were conducted with one or two Commission members present. Extensive notes were taken during interviews and they were audio recorded and fully transcribed using Otter.ai.

Surveys

For surveys, the Commission benefited from the work already completed by the City of Staunton in Fall 2021 when it conducted an initial survey of citizens soliciting top focus areas for the Commission. 195 citizens responded to this initial survey and 92.3% of them supported the work of the Commission that would soon follow. Building on these results, the Commission conducted a survey of community partners in the Fall of 2022 (see Appendix D) as a method for initiating contact and to begin gathering data from these partners. Because of the low response rate (10) from these surveys, the Data and Research Subcommittee shifted strategies and began reaching out to community partners directly to schedule one-on-one interviews. Even with a low response rate, these initial surveys informed many future conversations with the community.

Surveys were also conducted as a supplement to the community listening session dialogues for residents who were not able to attend listening sessions

directly (see Appendix F). 13 responses were recorded for these surveys and the data was logged along with the notes from the community listening sessions.

Desiring an effective way to reach the abundance of business owners in Staunton, the Logistics and Planning Subcommittee also adopted surveys as a method for gathering information from businesses (see Appendix G). Response rates were also low for this population, totaling only eight, but still provided valuable insights from this segment of the community.

Other Community Events

The Commission also held two "meet and greets" with the community. The first gave an initial introduction to the Commission, its charge, and its members, and was widely attended by community stakeholders, members of City government, City employees, and citizens. The second event was focused on the business community and hosted business owners and leaders from a variety of sectors. Following presentations at each of these events, Commission members held an open Q&A, and then dialogued one-on-one with attendees.

Finally, several members of the Commission also attended the SAW Housing Summit, led by the Community Foundation of the Central Blue Ridge and hosted by several key community stakeholders. This event was attended by over 200 local agencies, community partners, and citizens. The information gained and connections made at this event both informed and strengthened the outcomes of this report.

Analysis Process

After one year of collecting data and setting a framework, in Fall 2023, the Commission set out to systematically and objectively analyze each of the 130 data sources collected. The Writing Subcommittee was charged with developing and implementing this analysis process. To assist in this process, a coding category was created for each NEA indicator listed in the framework, totaling 29 unique coding categories. Each of these codes were operationalized using the NEA framework descriptions and listed as a column on an Excel spreadsheet. To remain as objective as possible, each Commission member was randomly assigned a portion of the data to review for analysis. In their review, Commission members coded for the presence or absence of each code in their assigned piece of data (using a “1” for present or “0” for absent), then logged this coding into the Excel spreadsheet.

After this process, each subcommittee was assigned to one broad indicator or “bucket” of data. Logistics and Planning focused on Economic Vitality, Data and Research on Readiness and Well-Being, and Community

Connections on Connectedness. Each subcommittee’s job was then to review the data that was marked “present” for each coding category within their designated indicator. Admittedly, this process produced a volume of data within each coding category that was far more than the Commission initially anticipated. For example, the coding category of “Poverty”, which falls under the indicator “Economic Vitality” returned 54 unique pieces of data associated with that category. Again, in an effort to remain as objective and systematic as possible while still reviewing as much of the data as was feasible given our timeframe, the Writing Subcommittee collectively elected to combine coding categories with nearly complete overlaps in data sources and to retain only the four coding categories within each indicator which had the greatest presence in the data. After full data analysis was complete, members of the Data and Research Subcommittee recognized that although Criminal Justice did not produce the greatest volume of data, the nature of its interconnection with the other top analysis categories warranted its inclusion in the final report. The final coding categories were as follows.

Table 2: Number of Data Sources Analyzed by NEA Indicator and Coding Category

NEA Indicator	Coding Category	Number of Sources
Economic Vitality	Poverty and Unemployment	54
	Employment, Jobs & Wealth	53
	Business Ownership & Income/Wages	47
Readiness and Well-Being	Youth and Families	67
	Mental Health and Health Related Services	58
	Education Attainment and Schools	61
	Criminal Justice	39
Connectedness	Access to and Knowledge of Services	64
	Community Engagement	56
	Affordable Housing	52
	Transportation	45

After the data falling within each coding category were identified, members of each subcommittee were assigned a coding category to analyze. The analysis consisted of a full review of each piece of data within that category to “pull out” the information relevant to that particular coding category. For example, an 80-page report on overall community needs may only contain two pages of data points on education. These two pages of data points would then be pulled from the original source document and copied into a separate document listing all of the information on education from all data sources. This process was both lengthy and tedious, but necessary to ensure all data was objectively and accurately accounted for.

From here, the Writing Subcommittee content analyzed the data pulled within each coding

category and synthesized it into the key research findings below. As part of this process, public comments and dialogue from the community listening sessions were also integrated into the findings within each coding category. Although this deviates from the Commission’s original plan to report community comments in their own section, we feel that the integration of these pieces of quantitative and qualitative data allows for a more complete representation of our findings.

While these final report topics do *not* represent every issue present in the data, nor do they represent every issue important to the Commission or Staunton citizens, they offer a place to start in our understanding of diversity, equity, and inclusion in the City of Staunton.

Demographics

A profile of our city

This chapter presents general population statistics for Staunton: who lives here, along axes like age, race, disability, and citizenship; aggregate measures of socioeconomic status like income and homeownership; and how socioeconomic status measures vary between different groups.

Nearly all data for this chapter comes from two sources, both from the US Census Bureau: the 2020 decennial census^{2,3,4} and the American Communities Survey (ACS). The decennial census is a full count of all Americans, meaning it produces very precise estimates;^b however, it only asks about very basic characteristics. The ACS, by contrast, collects much more detailed information, but surveys randomly selected Americans and so produces estimates with sampling error. ACS figures in this chapter are ACS 2021 5-year estimates⁵, meaning they represent an average over the period 2017-2021. ^c Margins of error in this chapter reflect 90% confidence intervals (since that's what the Census Bureau reports) and account for only sampling error; they'll be reported where appropriate and denoted with "MoE." Sources will be noted in text with (DEC-table number) for

decennial census tables and (ACS-table number) for ACS tables – for instance (ACS-B19326).

Living arrangements, families, and vital statistics

As of the April 2020 decennial census, Staunton had a population of 25,750 residents – a substantial increase after years of stagnation. 1,415 of them lived in what the Census Bureau calls "group quarters:" places like dorms (683 Staunton residents), nursing homes (334 Staunton residents), and similar. The remainder – 24,335 people – lived in households, of which there are 11,374 in Staunton. 4,332 Staunton residents lived alone. There were 5,167 (married or unmarried) couple households; of them, 159 were same-sex couple households, around 3% of couple households (DEC-PCT15). (This chapter will discuss "sex" rather than "gender," as that's what the Census Bureau asks about; see footnote for details^d.) There were 6,200 families

^b Decennial census estimates are, of course, not perfect: it's possible for the Census Bureau, despite its best efforts, to miss a household; it's possible for someone filling out the form to make a mistake that isn't caught by the Bureau's checks. In addition, a small amount of noise was added to 2020 census figures to protect privacy (an approach known as "differential privacy"). This noise doesn't meaningfully alter most counts; however, if a statistic is based on five or ten people, there's cause for suspicion.

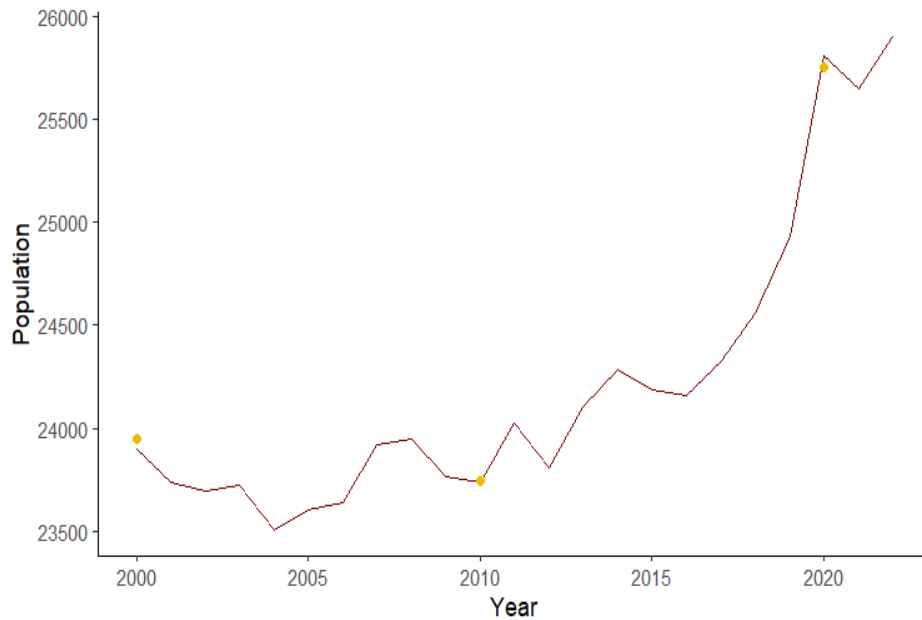
^c This is done to reduce sampling error: averaging over five years means that statistics are based on a larger sample, so have smaller margins of error. Even with the 5-year estimates, there were several figures that would have been extremely useful – unemployment by race, for instance – that were mostly unusable due to sampling error.

^d The Census Bureau only asks about sex (biological characteristics like chromosomes, hormones, and reproductive anatomy), and not gender (social roles like "man" or "woman", encompassing gender norms), on the ACS and decennial census, and the only options it provides are "man" or "woman." Accordingly, these are the terms and concepts this section will use. As a matter of practical social science, it's difficult to tell how someone whose sex doesn't match their gender, doesn't fit neatly into "male" or "female," or both, might answer this question. Probably this oversight does not distort the estimates for cis men and women very much, since the vast majority of Americans are neither trans nor intersex nor nonbinary; however, it does mean that trans, intersex, and nonbinary Americans are effectively erased from the official

living in Staunton, and 2,710 households with children. (See Appendix C for sourcing and comparison with surrounding areas.) The infant mortality rate was 6.53 deaths per thousand live

births between 2017 and 2021⁶. The life expectancy in Staunton for the period 2018-2021 was 75.4 (MoE 0.9)⁷.

Chart 1: Population of Staunton Over Time



Source: data from the Census Bureau Population Estimates Program; see appendix for details.

Socioeconomic Status

Socioeconomic status (roughly, an individual or family’s standing with respect to the overall distribution of scarce resources in a community or society) can be measured in several ways.^e One common measure is income. Per ACS 2021 5-year estimates, the median household income in Staunton is \$53,041 (ACS-S1901), higher than Waynesboro (\$47,238) but lower than Augusta County (\$69,082) or Virginia as a whole (\$80,615). The same pattern holds for family

income (median \$72,114 in Staunton; ACS-S1901) and individual earnings (median earnings \$34,292 among people who had earnings in the previous year; ACS-S2001). There’s substantial variation in income: the lowest-income Staunton households average an income of \$13,032 (MoE \$1,641) while the highest-income households average \$177,697 (MoE \$21,962) – around 14 times as much (ACS-B19081). (The corresponding ratio is around 15 for Waynesboro and around 10 for Augusta County.)^f Staunton has a poverty rate (which

statistics, a serious problem from an equity perspective. Fortunately, the Bureau is testing questions which separate sex from gender⁸, and will hopefully include them in future iterations of the ACS.

^e One common measure is occupational prestige: people whose occupations are valued more by their society have a certain kind of capital, which they can parley into access to other scarce resources. This report does not consider occupational prestige, as data is scarce for Staunton specifically.

^f “Highest income” here means in the top 20% of households; “lowest income” means in the bottom 20%. The ratio of these two quantities, called the income quintile share ratio, is one way to measure inequality. Another is the Gini coefficient,

measures how income compares to federal poverty thresholds) of 12.3% -- higher than Augusta County or Virginia as a whole but lower than Waynesboro (ACS-S1701).

A more powerful measure of socioeconomic status than income is wealth.⁸ Unfortunately, the ACS and decennial census produce very little data on wealth. However, the decennial census does provide homeownership data: the homeownership rate^h is 56% in Staunton, compared with 58% in Waynesboro and 79% in Augusta County (DEC-H10). Needless to say, homeownership is an extremely rough proxy for wealth.

Another useful socioeconomic status measure is education: more formal education makes it easier to accumulate scarce resources, and having greater access to scarce resources makes it easier to get more educationⁱ. In general, Staunton residents are more highly educated than their counterparts in Waynesboro and Augusta County, but a bit less highly educated than the average Virginian. 8.3% of Staunton residents over age 25 have less than a high school degree; this is lower than the corresponding percentages for Augusta County (10.6%), Waynesboro (12.3%), and Virginia as a whole (9.2%). 17.8% have a Bachelor's degree, and 12.5% have a graduate degree – higher than corresponding figures for Augusta County

(14.8% and 7.7%) or Waynesboro (17.5% and 10.4%) but lower than Virginia as a whole (22.8% and 17.6%) (ACS-S1501). For further details and margins of error on all of these figures, see Appendix C Table 2.

Sex and age

Staunton has slightly more women than men (53.6% female as of the 2020 census), with a median age of 41.2 (DEC-DP1). For a full population pyramid (showing the age distribution of men and women), see Appendix A.

A typical man in Staunton earns more than a typical woman, even considering only full-time workers (ACS-B19326). The disparity is small for workers with a bachelor's degree or less but yawningly wide for workers with a graduate degree: \$47,132 per year (MoE \$5,949) for women compared with \$77,572 (MoE \$9,702) for men (ACS-B20004). Women are also more likely to live in poverty (though the margin of error is large; ACS-S1701). The unemployment rate (people who are actively looking for a job but can't find one, as a percentage of people who have or are looking for a job) is higher for men than for women; the labor force nonparticipation rate (people who don't have and aren't looking for a job, as a percentage of

which ranges from 0 (indicating total equality) to 1 (indicating total inequality). Staunton has a Gini coefficient of 0.458, compared to 0.405 in Augusta County and 0.477 in Waynesboro (ACS-B19083).

⁸ Wealth tends to be more stable, intergenerationally, than income, not least because it can be inherited. Wealth is more unequally distributed than income. It also opens up powerful avenues for improving one's life chances, from investing money to avoiding high-interest debt to moving into communities with good schools.

^h The homeownership rate is the proportion of homes which are owner occupied.

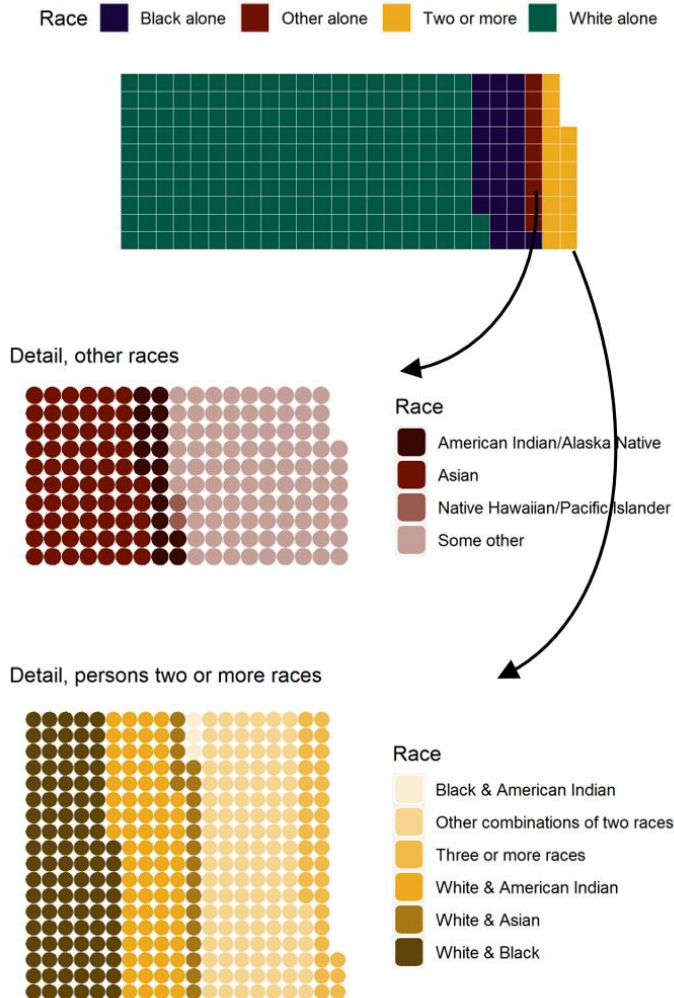
ⁱ Being highly educated generally improves a person's life chances: it increases income, cushions against a bad economy, makes it easier to deal with institutions, and serves as a cultural marker of wealth. But educational attainment is also caused by social class: wealthier families can afford to buy homes near better schools, pay for high quality childcare, and work fewer hours if needed in order to take care of their children. Their children can afford to start work later in life, leaving more time to focus on school, and have fewer financial obstacles (lack of transportation, housing and food insecurity, a need to take care of relatives) standing between them and educational success. For more information, see work by Johnson (2017)⁹ and Lareau (2005)¹⁰.

the population) is higher for women (ACS-S2301).

Chart 2: Race and Ethnicity

Population of Staunton by Race, 2020

Each square represents 100 Stauntonians; each circle represents 5. Source: DEC-P1



Per the 2020 census (DEC-P1), the vast majority of Staunton residents identify as White (20,207 people, about 78.5% of the population) or Black (2,935 people, about 11.4%). However,

Staunton has small, growing communities of Asian Americans (323 people, 1.3% of the population) and American Indians and Alaska Natives (84, 0.3%), as well as a handful (12, <0.1%) of Native Hawaiians/Pacific Islanders. 466 (1.8%) identify exclusively as “some other race”^j. The remainder (6.7%) selected multiple races, of whom most selected White in combination with Black, American Indian/Alaska Native, or Some Other Race. Hispanic/Latino is not a race in census data, but is rather an ethnicity: people who identify as Hispanic or Latino (1,088, roughly 4.2% of Staunton residents, per DEC-P9) can identify as any race. For detailed trend data and comparisons between Staunton and surrounding areas, see Appendix B.

The rate of infant mortality in Staunton varies by race, with a rate of 6.48 per thousand live births for White mothers and 11.05 for Black mothers⁶. This alarming racial disparity is consistent with trends at the state and national level¹¹.

Unfortunately, due to small sample sizes, meaningful ACS data on economic outcomes in Staunton is unavailable for most statistics for most groups. However, the data does indicate that Black, Hispanic, and possibly Asian Stauntonians make less than White Stauntonians in terms of individual earnings (ACS-B20017A-I), and that Black Stauntonians have, on average, lower household incomes than White Stauntonians (ACS-S1903) and are more likely to be unemployed or experience poverty^k (ACS-S2301; ACS-S1701).

^j Many people who identify as “some other race” are Hispanic or Latino, and may consider that to be their “race.” Some others who select this option write in things like “mixed” or “multiracial”¹².

^k Margins of error are extremely large. Nevertheless, the Commission trusts the broad picture (lower median income for Black relative to White households and lower earnings, a higher unemployment rate, and a higher poverty rate for Black relative to White individuals) because it accords with regional- and state-level estimates and is the same as most past ACS 5-year estimates for Staunton (ACS-S1903; ACS-B20017A; ACS-B20017B). We have less confidence that Asian residents earn

One indicator for which we have better data is homeownership, since the decennial census asks about it. White households have a homeownership rate of 59.8%, higher than the rate for Black (37.2%), Asian (40.2%), American Indian/Alaska Native (38.7%) households (DEC-H10); Hispanic households (39.6%; DEC-H11); or households where the householder identified as some other race (40.2%) or two or more races (42.6%)^l (DEC-H10).

For education data, we must again turn to ACS data (ACS-C15002A&B). Broadly, the pattern for education is similar to the pattern for other socioeconomic status variables: 13.7% of Black Staunton residents have less than a high school diploma, compared to 7.4% of White residents; 11.5% of Black residents have at least a bachelor's degree, compared to 32.5% of White residents. Data on other races, and on Hispanic residents, is unusable due to large margins of error. For further data and margins of error, see Appendix C Table 3.

Disability

The ACS asks civilian, noninstitutionalized respondents^m whether they have serious difficulty hearing, seeing even with glasses, bathing or dressing, or walking or climbing stairs, and whether they have serious difficulty doing errands alone or remembering, concentrating, or making decisions due to a physical, mental, or emotional problem. Respondents who say yes to any of these questions are considered to have a disability. 3,787 Staunton residents (15.3%, MoE

1.9%) have some sort of disability under this definition: 859 with a hearing difficulty; 782 with a vision difficulty; 1,599 with a cognitive difficulty; 1,929 who have difficulty walking; 836 with a self-care difficulty; and 1,428 with an independent living difficulty. For further information and margins of error, see Appendix C Table 4. Many have multiple disabilities. Women are a bit more likely to report having a disability than men, and, unsurprisingly, disability gets more common with age: half of Staunton residents 75 or older have some sort of disability, compared with roughly 1 in 4 ages 65-74 and roughly 1 in 10 ages 5-64 (ACS-S1810).

Stauntonians with disabilities fare worse on a variety of economic measures than their counterparts who don't have disabilities: they are more likely to be unemployed (ACS-C18120), and earn less when they are employed (ACS-B18140). They're also more likely to experience poverty, both overall and restricting attention to working-age adults (ages 18-64) or children (18 and under; ACS-C18130).

Citizenship and Language

The ACS contains questions on the ability to speak English, the language spoken in the home, and citizenship. Unfortunately, the populations who don't speak English well, who speak a language other than English at home, or who are not citizens are so small that it's difficult to get reliable statistics about them beyond their approximate number.

less than their White counterparts: this accords with past Staunton ACS estimates but diverges from regional- and state-level data.

^l There were only 3 households with Native Hawaiian/Pacific Islander householders in 2020, so the homeownership statistic for them is not very meaningful. The homeownership rate for each race is the proportion of households with a householder of that race living in an owner-occupied home. The householder is the person in whose name the home is owned or rented; if there's more than one such person in the household, any of them can be the householder, and if there's no such person in the household, anybody in the household can be the householder.

^m This qualification does matter, as it excludes people in nursing facilities (of whom there were an estimated 334 in Staunton as of the 2020 Census), many of whom likely have disabilities.

Per ACS 2021 5-year estimates (ACS-S1601), there are 1,304 (MoE 251) people in Staunton who speak a language other than English at home, about 5.5% of the population ages 5 and older. 2.1% of Stauntonians (MoE 0.5) speak Spanish at home; 1.7% speak some other Indo-European language; and 1.4% (MoE 0.5) speak an Asian or Pacific Island language. Another language minority, not captured in this data, is users of American Sign Language (ASL); they are not included in the ACS count of speakers of languages other than English, and the

Commission was unable to find reliable data on their share of the Staunton population. Around 448 (MoE 143) Staunton residents speak English less than “very well,” amounting to 1.9% of the Staunton population (MoE 0.6).

Again per ACS 2021 5-year estimates (ACS-B05001) 552 Staunton residents (MoE 180) are not US citizens, including people from Europe, Asia, Africa, and Latin America. A further 434 (MoE 129) are citizens by naturalization.

Economic Vitality

What does the community offer to its citizens?

A viable economy is important for our city's future. This section, Economic Vitality, challenged the Commission to evaluate key indicators of a viable and equitable economic landscape. Specific areas evaluated include poverty and unemployment, employment, jobs and wealth, and business ownership and income/wages. This section evaluates whether all Staunton citizens have access to economic opportunity, regardless of any protected status(es).

Poverty and Unemployment

Poverty and unemployment are commonly reviewed as key indicators of a community's economic vitality. The Staunton DEI Commission uses the US Census Bureau's measurement to define poverty as any family whose income falls below the federal poverty threshold. This threshold does not vary geographically, but changes each year based on inflation and the Consumer Price Index. Total family income (before taxes and excluding capital gains or noncash benefits like public housing or Medicaid) and family size and composition, together determine the poverty threshold for a family⁷⁶. For example, in 2023, a family of 4 is considered "in poverty" if they earn at or less than their poverty threshold of \$30,000⁷⁷. Unemployment is officially defined by the U.S. Bureau of Labor Statistics. "People are classified as unemployed if they do not have a job, have actively looked for work in the prior 4 weeks, and are currently available for work"⁷⁸.

The Commission discovered that the two topics were frequently discussed from a post-COVID/pandemic perspective. The issue(s) around poverty and unemployment were only exacerbated by the pandemic and subsequent shifts in the greater economic landscape. After a review of various community-specific, statewide, and national data, we found the following.

Key Data

According to the American Communities Survey (ACS) 2021 5-year estimates⁵, Staunton has a poverty rate (which measures how income compares to federal poverty thresholds) of 12.3% (ACS-S1701), and 14.3% of children within the city also meet this criteria. Poverty within the city is only further demonstrated by the report's findings that 20% of our Staunton neighbors cannot address an unexpected expense over \$400.00. Of note, in the SAW region as a whole, communities of color (20.2%) and individuals identifying as women (23.3%) are more likely to be unequipped to address an emergency expense of this amount than non-Hispanic White (18.1%) and male (13.3%) residents, indicating a disparity within the community.

Further highlighting the impact that poverty has on youth, the topic was the seventh highest item of concern listed in the 2018 Staunton-Augusta-Waynesboro (SAW) Youth Needs Assessment¹⁴, as poverty impacted 40% of participants.

Table 3: Top Ranked Problems for Youth

Items Ranked as a “Big” Problem for Youth		
1	Social media concerns	62%
2	Availability of Drugs	60%
3	Peer pressure/influence	57%
4	Bullying	54%
5	Obesity	50%
6	Behavioral problems at school	45%
7	Poverty	40%
8	Access Healthcare	40%
9	Affordable housing options	40%
10	Depression	36%
11	Not having enough food	32%
12	Racism	29%
13	Lack of community resources	27%
14	Lack of mentoring programs	27%
15	Teen pregnancy	25%
16	Failing grades	23%
17	Suicide	22%
18	Dating violence	21%
19	Students who dropouts	21%
20	Lack of quality education	19%
21	Lack of preschool opportunities	18%
22	Skiping school	17%
23	Unsafe schools	15%
24	Unsafe neighborhoods	15%

Source: Central Shenandoah Valley Office on Youth. (2018). *Staunton, Augusta County & Waynesboro Youth Community Needs Assessment*¹⁴.

Single parents reported that poverty, racism, and unsafe neighborhoods were more significant problems for youth compared to two-parent households. Of the children living in poverty in the city, 36% of these children are living in “deep poverty”¹⁵. Deep poverty is defined as living at or below 50% of the federal poverty level (FPL). For a single individual under 65 years old, 50% of the FPL equates to an

income at or below \$7,049 a year. For a family of four with two children, deep poverty is living at or below \$13,740 per year (2021)¹⁶. These children require special consideration because “children born into “deep” poverty are three times more likely to be in deep poverty as adults, and experience greater toxic stress and adverse experiences” than children living at or above poverty levels¹⁵. Poverty is a substantial concern.

A contributing factor to poverty within the city is unemployment. The City of Staunton’s unemployment rate of 3.2% was better than the Commonwealth’s average of 4.2%¹⁷. COVID-19 also exacerbated employment issues. 19% of Community Health Needs Assessment (CHNA)¹³ respondents reported a pandemic-related job loss, restriction of hours, or loss of health insurance in their household.

While poverty and unemployment rates show important aspects of a community’s economic vitality, they say less about the presence of livable wages and the affordability of basic living expenses. Local reports find that many of the employment opportunities that do exist within the city were hourly and lacking suitable benefits for workers^{13, 17}. The barriers to suitable employment are only more prevalent for those experiencing homelessness, and those with criminal convictions, or other concurring factors. During conversations with the community, there was a general sense that the community lacks “good paying” employment opportunities^{24, 30}, and considering the lack of viable wages, many parents are required to work multiple jobs.

The Assets Limited, Income Constrained and Employed (ALICE)ⁿ threshold is a measurement produced by the United Way to identify these

ⁿ **ALICE:** Asset Limited, Income Constrained, Employed - are households that earn up to and above the Federal Poverty Level (FPL) but cannot afford the basic cost of living in their county. The ALICE threshold is derived from the Household Survival Budget, the average income that a household needs to afford housing, childcare, food, transportation, health care, and a smartphone plan plus taxes.

families who may be employed, many of whom live above the federal poverty threshold, but still struggle to meet basic living expenses. Tables 4

and 5 outline the ALICE households in Staunton and the cost of basic expenses for these households¹⁷.

Table 4: Household Survival Budgets for Staunton by Household Composition and Size
The Cost of Basics Outpaces Wages

The Household Survival Budget reflects the minimum cost to live and work in the modern economy and includes housing, child care, food, transportation, health care, a smartphone plan, and taxes. It does not include savings for emergencies or future goals like college or retirement. In 2021, household costs in every county in Virginia were well above the Federal Poverty Level of \$12,880 for a single adult and \$26,500 for a family of four.

Monthly Costs and Credits	Single Adult	One Adult, One Child	One Adult, One In Child Care	Two Adults	Two Adults Two Children	Two Adults, Two In Child Care	Single Senior	Two Seniors
Housing - Rent	\$558	\$478	\$478	\$478	\$647	\$647	\$558	\$478
Housing - Utilities	\$154	\$239	\$239	\$239	\$292	\$292	\$154	\$239
Child Care	\$0	\$211	\$563	\$0	\$422	\$1,229	\$0	\$0
Food	\$416	\$706	\$634	\$764	\$1,245	\$1,136	\$384	\$705
Transportation	\$330	\$428	\$428	\$507	\$807	\$807	\$283	\$413
Health Care	\$230	\$530	\$530	\$530	\$927	\$927	\$508	\$1,017
Technology	\$75	\$75	\$75	\$110	\$110	\$110	\$75	\$110
Miscellaneous	\$176	\$267	\$295	\$263	\$445	\$515	\$196	\$296
Tax Payments	\$309	\$493	\$571	\$405	\$898	\$1,093	\$365	\$644
Tax Credits	\$0	(\$356)	(\$581)	\$0	(\$711)	(\$1,215)	\$0	\$0
Monthly Total	\$2,248	\$3,071	\$3,232	\$3,296	\$5,082	\$5,541	\$2,523	\$3,902
ANNUAL TOTAL	\$26,976	\$36,852	\$38,784	\$39,552	\$60,984	\$66,492	\$30,276	\$46,824
Hourly Wage	\$13.49	\$18.43	\$19.39	\$19.78	\$30.49	\$33.25	\$15.14	\$23.41

Source: United for ALICE. (2021). Virginia County Reports 2021: ALICE in Staunton City.

Table 5: 2021 ALICE Staunton Profile

2021 Point-in-Time-Data

Population: 25,358 **Number of Households:** 11,125 (5% change from 2019)

Median Household Income: \$53,041 (state average: \$80,963)

Labor Force Participation Rate: 61% (state average: 65%)

ALICE Households: 33% (state average 28%) **Households in Poverty:** 13% (state average 10%)

Source United for ALICE. (2021). Virginia County Reports 2021: ALICE in Staunton City.

The Commission interviewed various community partners who echoed the sentiment, reaffirming that individuals who experience social or economic disadvantage as part of their lived experience have an especially challenging time accessing services and well-paying suitable employment opportunities to assist them in overcoming poverty and hardship.

What We Heard

Through our listening sessions, the Commission heard community members share their own lived experiences with poverty and unemployment and also their indirect encounters with these potential barriers in our community.

The issues of homelessness and housing were a topic of discussion, and the lack of resources to appropriately address the growing issue was highlighted from a perspective of potential collaboration and creative thinking. Specifically, the use of downtown real estate to address housing issues and the desire to make public transportation free of charge were top-of-mind ideas to assist with alleviating these barriers. Of note, income-driven bus passes and extended routes for better coverage were proposed as possible solutions.

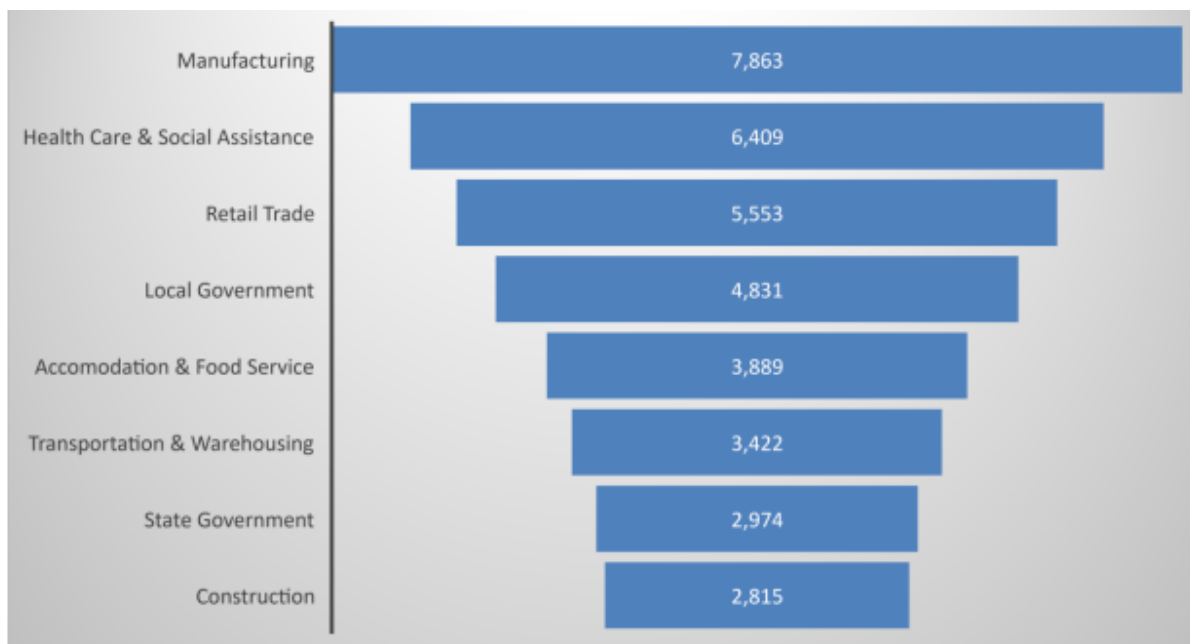
In addition, at least one listening session had a common theme of perceived financial and economic inequality throughout the community that required the attention of the commission.

Employment, Jobs & Wealth

While the previous section highlighted key findings around poverty and unemployment, the following section will take a greater look into the employment opportunities within the city and the current state of the City's human resources data as an employer.

Key Data

When evaluating the SAW region, the major provider of employment is the manufacturing industry, followed by healthcare, social assistance, retail trade, and local government²⁷. The 2021 ALICE Report¹⁷ listed the city's median income as \$48,049 versus the Commonwealth's average of \$72,577 - a \$24,528 difference for our community.

Chart 3: Regional Employment by Industry (TOP 10)

Source: Virginia Employment Commission, Economic Information & Analytics, Quarterly Census of Employment and Wages (QCEW), 4th Quarter (October, November, December) 2020

Wages in the city continue to fall short to cover basic expenses such as housing, childcare, transportation, food, healthcare, and a basic cell phone plan. Historic data from the ALICE report shows a continual increase in the number of people considered to meet the ALICE criteria; in 2012 the number was 24%, and in 2021 the number rose to 33%¹⁷.

While many Staunton residents are employed, it is noted, again, that many of the positions are hourly, which often comes with minimal to zero benefits and fluid income¹⁷.

Evaluating the City as an employer, a presentation provided by My Brothers and Sisters Keeper Initiative¹⁹ (2020) reported that there were 690 City employees who identified as “White” and only 37 who identified as “Black.” When evaluating 2022’s fourth quarter data from the City’s human resources department²⁰, 190 full-time equivalents (FTE) applicants consisted of:

- 89 female and 87 male

- 147 white non-Hispanic (77% of applicants), 18 African American non-Hispanic (9%), 3 Asian (2%), 1 American Indian (1%), 8 “blank” (4%), and 8 who “decline to identify” (4%)
- 5 Hispanic (3%)

Those that were hired within the same time frame consisted of:

- 5 female and 8 male
- 10 white non-Hispanic, 2 African American non-Hispanic
- 1 Hispanic

This is the state of employment, jobs, and wealth within our city presented through data analysis.

What We Heard

In various interviews with community leaders, the Commission heard that the city has employment opportunities but that there was minimal room for advancement and that they often fell short of the cost of living. It was commonly perceived that stigma plays an

integral part in the lack of advancement for certain individuals within the community³⁰.

Moreover, many private employers from health/health-adjacent, mental health, and childcare organizations expressed an ever persisting challenges in recruitment and retention. The private sector, especially in the services lines previously mentioned, struggles to keep up with the cost of living and cannot provide competitive wages or benefits to their employees^{24, 30}.

These employers called for innovation, increased collaboration, and partnerships amongst the private sector and public sector entities such as the City and the Commonwealth. Childcare providers especially emphasized the importance of their ability to provide services, as access to childcare is crucial and often impacts others' ability to obtain work and to thrive^{24, 30}.

The City, as an agency, echoed the sentiments of the private sector around recruitment and retention. In a public report by the Staunton City Library for the 2022 fiscal year²¹, it was noted that the library alone lost nine staff positions, equating to over 23 years of professional experience. The report, like many before in this section, cited the pandemic as a root cause. In the library's 2022-2027 strategic plan, "living wages" and education around benefits are listed as a goal within the focus area entitled "staffing and environment"²².

The Staunton Police Department (SPD) also reported staff shortages in their 2022 annual report²³. The agency was short three officers and two dispatchers. SPD did report adjustments to compensation to address recruitment and retention and also indicated that partnerships with education and training facilities in the area were being explored as potential pipelines.

Through listening sessions, the commission heard affirmation of the above data and organizational perspectives. Community members shared difficult experiences expressing themselves, being accepted within the workplace, and accessing employment within the city. The perception of "cliques" or narrow thinking was discussed in the context of employment²⁴.

Business Ownership & Income/Wages

The topic of business ownership is vital to economic vitality, as business drives the local economy. While data was more difficult to locate around business ownership, specific data pertaining to income and wages was more accessible. The following was discovered.

Key Data

It is estimated that the city has 2,300 registered businesses, with 137 of those being minority-owned²⁴. It is noted that the data around business ownership is difficult to track as many small businesses are based in the owner's residence and not a classic brick and mortar. Regardless, this data suggests a remarkable underrepresentation in minority-owned businesses.

In 2018, 27% of employees within the city made \$15,000 or less. 9% of employees in the SAW region only made an average weekly salary of \$362³⁹.

What We Heard

When specifically discussing business ownership, the community was consistent in their message - the City can do more. Many business owners cited the need for more resources, whether it be monetary or educational in nature. Small business owners

felt that regulations imposed by the City around coding were either a barrier to their success or unnecessary. It was suggested that more materials be produced by the City to address questions and the overall process to successfully launch a business within our community^{25, 26}.

Survey respondents noted feelings of exclusion and disenfranchisement from businesses

located within the city's downtown district, as this area receives a large number of resources and focus from economic development officials and organizations²⁵. In the same vein, our community expressed a desire for more minority-focused resources and for the City to focus more on the development of small businesses and opportunities for contractual agreements with the City.

Readiness and Well-Being

Do citizens have the experience, skills, and resources to thrive?

Beyond a viable economy, our city must also provide opportunities for its citizens to gain the experience, skills, and resources necessary to thrive in both their professional and personal lives. Readiness and well-being measures challenged the Commission to evaluate the health and prosperity of citizens across their entire lifespan. Specific areas evaluated include youth and families, mental health and health-related services, education attainment and schools, and criminal justice.

Youth and Families

Our children are the future of Staunton. Supporting youth and families should always be a priority of a community. Today's youth live in an increasingly diverse community. Awareness of the issues surrounding diversity, equity, and inclusion is at the forefront of local, state, and national conversations. This generation will bring that awareness and the lived experiences, including the COVID-19 learning experience, into their adult frame of reference.

The broad spectrum of established youth-focused programming and services in Staunton is clear in the frequency of references in the data collected by the Commission. Key community partners that included Augusta Health¹³, Community Action Partnership of Augusta, Staunton, and Waynesboro (CAPSAW)²⁷, Office on Youth²⁸, Central Shenandoah Health District (CSHD)²⁹, Shenandoah Valley Social Services (SVSS)³⁰, United Way³¹, and Valley Community Services Board (VCSB)³⁰, all report on the need to support our youth. This analysis of youth and families included a review of over thirty external reports, 16 Commission interviews, and four Commission listening sessions. This section explores the physical health and care of youth. It does not include an analysis of Staunton City Schools (SCS) or the mental health of youth, which are addressed in later sections of this report.

Key Findings

Several key indicators for youth demonstrate variations in living circumstances, health, and early childhood education for Staunton youth as compared with area/state/nation averages. The indicators, summarized in Table 6, are from the Virginia Department of Health (VDH) Virginia Community Health Assessment Reports for Staunton City²⁹. These reports also provide trend data for 2010-2020.

These metrics support the feedback from the listening sessions and interviews resulting in four identified areas of community need to support youth: access to childcare, improving physical health, education around teen pregnancy, and providing enrichment opportunities.

Childcare: Access to childcare impacts the well-being of the child and the family unit. It has significant economic implications at the family budget level and the employment profile of a community. The 2021 CAPSAW community survey²⁷ ranked childcare in the top five areas of need locally. Furthermore, the COVID pandemic brought to the forefront the crisis in childcare availability and cost³². There are five identified areas of concern within childcare: household expense, participation, employment, availability, and staffing.

Table 6: Key Indicators for Youth Compared with Area/State/Nation Averages

Key Youth Indicators	Staunton	Area	State	Nation
Living Circumstances				
Living in single parent household	27.5%	19.6%	23.7%	25.1%
Children aged 0-17 Living in Poverty (less than FPL)	14.3%	14.0%	13.0%	17.1%
Percent of Hispanic children living in poverty (less than FPL)	32.3%	24.8%	17.1%	23.8%
Health				
Uninsured Youth	4.0%	5.8%	4.4%	5.4%
Infant Mortality Rate per 1,000 live births	4.41*	6.23	5.75	n/a
Low Birth Weight % of Total Live Births	5.1%	6.9%	8.3%	n/a
Teen Pregnancy Rate per 1000 Females Ages 15-19	35.77	13.18	17.27	n/a
Preterm Births, Percent of Total Live Births	6.2%	8.8%	9.6%	n/a
Mothers with late/no prenatal care, % of Total Live Births	6.2%	6.0%	4.1%	n/a
Maternal Opioid Use Disorder Rate per 1000 delivery hospitalizations	2.86	6.32	4.72	n/a
Smoking during pregnancy, percent of total live births	14.1%	9.2%	5.0%	n/a
Early Childhood Education				
Enrolled in preschool age 3-4	30.8%	n/a	46.6%	45.9%
* Note: rates were derived from counts <= 12 and should be regarded as unstable				
Data Source: VDH Virginia Community Health Assessment reports for Staunton				

Household expense: Childcare is a significant household budget expense. The ALICE Monthly Survival Budget for childcare in Staunton is \$667 for infants, \$563 for preschoolers, and \$211 for school-age youth. Childcare may exceed the monthly survival budget for housing³³. This can be an even more significant burden for single-parent households, which an above-average number of Staunton children live in (see Table 6).

Participation: It is estimated that 31% of youth ages 3-4 are enrolled in preschool, significantly lower than state and national averages (see Table 6).

Employment: In the 2021 CAPSAW Community Needs Assessment Survey²⁷, those who identified finding employment to be an issue for someone in their household ranked cost of childcare (job-related) in the top three barriers

to employment. In 2017 Cost of Childcare was ranked 5th, in 2021 it was ranked 2nd.

Availability: Staunton has 16 total childcare centers and day homes of which 10 are licensed. Six of the licensed centers accept childcare subsidies, however, 5 are before-and-after school programs for elementary-aged children. One community-based center is fully licensed, participates in the Virginia Quality Initiative, and accepts United States Department of Agriculture (USDA) funding. This center serves children beginning at age 2²⁷. The low preschool enrollment rate (see Table 6) is also an indicator of areas where preschool opportunities may be lacking in the educational system²⁹.

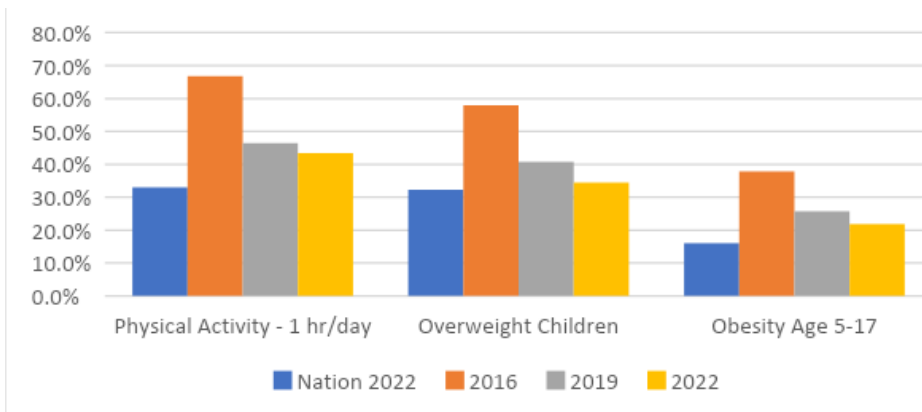
“Childcare always affects someone’s job opportunities.”

Community Partner Interview

Center Staffing: Staffing shortages have significantly impacted childcare centers. *“Childcare workers are the workforce behind the workforce, yet many struggle to make ends meet for their own families: with a median hourly wage of \$11.74 in Virginia in 2021, 43% were below the ALICE Threshold”*³². Low pay, coupled with no benefits significantly impact the ability of childcare centers to meet staffing needs and provide service³⁰.

Physical Health: Physical activity, measured as one hour per day, steadily declined for Staunton youth from 2016-2022 and is approaching the very low national average of 33% (see Chart 4).

Chart 4: Staunton Key Physical Health Indicators for Youth Compared with Nation



Data Source: Augusta Health CHNA Report¹³

Although overweight and obesity rates are declining, they are both higher than national rates and there is still room for improvement (see Chart 4). Collectively our community needs to embrace a healthier lifestyle focused on exercise and diet.

Learning a healthy lifestyle from a young age will promote long term health and avoid chronic adult illnesses. Identified barriers to a healthy, long-term lifestyle include: lack of easily accessible amenities that promote healthy lifestyles (e.g. parks, bike paths, sidewalks),

insufficient public education on healthy food choices, a reliance on convenience foods, and a lack of affordable nutritional options for food and exercise venues¹³.

Teen Pregnancy: The teen pregnancy rate of 36/1000 in Staunton is higher than area and state rates (see Table 6). Smoking during pregnancy and mothers with late/no prenatal care rates are also higher in Staunton (see Table 6). Although Staunton birth outcomes are currently trending positive (with lower-than-average rates for infant mortality, low birth weight, preterm births, and maternal opioid use disorder), teen births are more likely to lead to poor outcomes for both teenage mothers and their children. More education is needed on the resources that are available to expectant mothers including access to prenatal care and the importance of not smoking during pregnancy. More family planning and access to contraception is also needed¹³.

Enrichment Opportunities: Frequently community stakeholders and participants in listening sessions expressed concern about the lack of community resources and services that positively engage youth. Suggestions to build community with youth included encouraging mentoring with Mary Baldwin University students, create community volunteering opportunities, and establishing a youth center with programming²⁴.

Multiple stakeholders emphasized the need to ask youth directly what services, resources, and

programming they would like to see offered. The VDH conducts a bi-annual survey of grades 7-12. School districts can opt into this survey but SCS currently do not participate. This is an untapped resource to learn directly from youth and improve available data on youth needs³⁰.

Mental Health and Health-Related Services

Mental health and health-related services are consistently cited as top areas of concern for the Staunton community. Community partners, informants, and local data all point to the need to address these health issues^{13, 24, 27, 28, 30, 31}. For example, 78.4% of informants for the 2022 Augusta Health Community Health Needs Assessment (CHNA)¹³ characterized mental health as a “major problem” for our area. As a category, access to care, providers, services (including emergency), medications, and the cost of care were also brought up 54 unique times by these respondents. In addition to the CHNA 2022 report, the 2021 CAPSAW Needs Assessment²⁷ cited, “lack of access to mental/behavioral health services for all age ranges” as the number one barrier to increasing economic security for local families. Further, the Staunton, Augusta County & Waynesboro Youth Needs Assessment²⁸ identified “depression and suicide” as the number two major challenge faced by local youth (second only to “bullying”). The evidence and needed for a focus on mental health is prominent and clear.

These issues are further exacerbated by the changes in mental health outcomes in the area.

As Table 7 shows, Staunton residents fare worse than both the state and national populations when it comes to self-reported mental health and suicide rates¹³. Several of these outcomes have also gotten worse locally over the past several years, as indicated by the CAPSAW Community Needs Assessment 2021 (Table 8). As these studies suggest, mental health and health services require a significant amount of attention from those wishing to affect the life outcomes of our local community. The following section outlines several key aspects that must be considered in relation to mental health and health-related services. These include access to care, affordability of care, housing, race and ethnicity, criminal background, and stigma.

Table 7: Mental Health Indicators by Location, 2022

Mental Health	Staunton	Virginia	US
% "Fair/Poor" Mental Health (self-report)	23.4	NA	13.4
% Diagnosed Depression (self-report)	31	17.2	20.6
% Symptoms of Chronic Depression (2+ years, self-report)	40.1	NA	30.3
% Typical Day Is "Extremely/Very" Stressful (self-report)	16.7	NA	16.1
Suicide (Age-Adjusted Death Rate)	22.7*	13.4	13.9

*SAW combined data

Source: Community Health Needs Assessment 2022

Table 8: Local Households' Self-Reported Areas of Concern by Year

Household Experience	2018 Survey	2021 Survey
Depression/Anxiety	17.67%	60.66%
Unhealthy Weight	10.63%	28.69%
Poor Mental Health	5.89%	24.18%

Source: CAPSAW Community Needs Assessment Survey 2021

Access to care: The availability of and access to care are the first barriers that residents face when confronted with the need for health services. Lack of providers, a decreasing number of local physicians (see Chart 5), access to services, education about services available, and coordination between community partners and service providers are all cited as institutional obstacles to addressing the health needs of the community^{13, 27, 30, 34}. Service providers are aware of these issues and are already working to overcome many of these barriers, including a significant portion of CAPSAW resources being dedicated to community health-related services. However, with an increase in demand following COVID-19, especially among youth, and increases in substance use rates, completed suicide rates, and overdose rates³⁰, the need for services still outpaces the ability of local agencies to keep up with demand. In some cases, a significant amount of funding exists to help provide services, but a lack of facilities and staffing prevents these funds from being fully utilized³⁰. As of the time of data collection for this report, there were 40 open staffing positions at VCSB, an “alarming number”³⁰ that is reflective of the wider national health staffing shortage. The limited language accessibility of services for the deaf, blind, and those with a first language other than English further exacerbates these institutional barriers to access. As of 2022,

there were fewer than five providers who could sign and communicate directly with a deaf patient. Accessible language formatting of health information is also severely limited¹³.

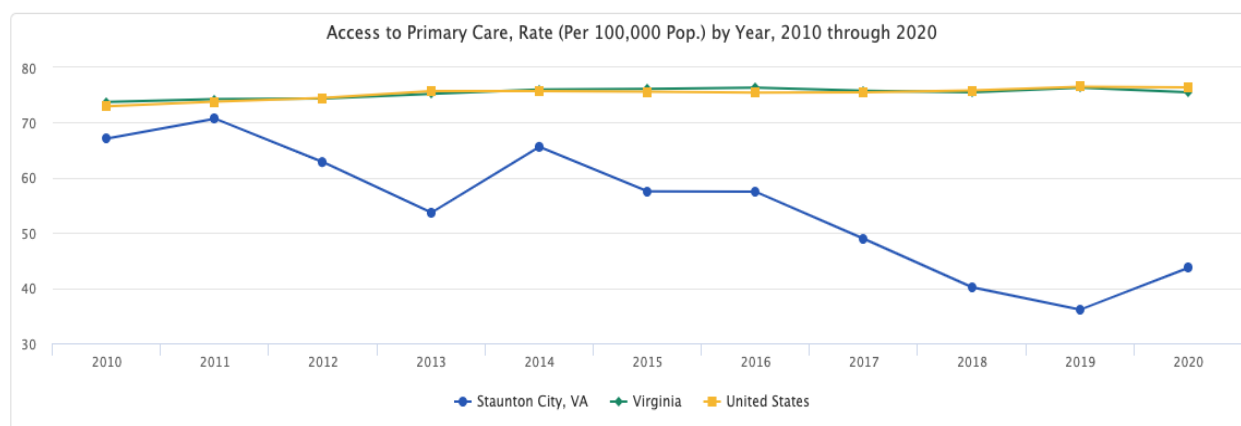
“Mental health, particularly in youth, has become a serious problem”

Community Partner Interview

Affordability of care: Beyond the institutional barriers to mental and other health-related services, the affordability of care creates the greatest obstacle to care for any individual. While the number of uninsured residents has dropped over the past decade, 9.2% in 2021 compared to 20.3% in 2011¹³, the cost of care for both insured and uninsured is on the rise³⁵. In the words of one local health provider, mental health care is “not affordable at all”¹³.

Median-income households who do have insurance are frequently faced with high deductibles and discounted self-pay services are still priced out of reach for many families¹³. Cost issues are pronounced at every life stage, but especially for those under 18, over 65, and with a disability. Youth who live at or below the ALICE

Chart 5: Rate of Primary Care Physicians (per 100,000 pop.) by Year and Location



Source: Virginia’s Plan for Well-Being, US Department of Health & Human Services Administration, 2020

threshold are also less likely to have health insurance, making them more likely to delay, miss, or skip preventative health care³⁵. For those over 65, the average out-of-pocket costs were up 41% between 2009 and 2019, to a total of \$6,833 per year in 2019³⁶. Public Hearing comments also point to the need to address all-inclusive care for the elderly³⁷. Cost barriers are also more pronounced for residents with disabilities because of their need for care and sometimes lower income levels. The 2017-2021 median income for Staunton residents with a disability status over the age of 16 who had earnings was \$22,361, compared to \$34,944 for those without (ACS-B18140)⁵.

Finally, the consequences of addiction and substance use disorders often hit low-income families the hardest. The effects of addiction on an individual's ability to work, combined with addiction treatment costs ranging from \$1,176 to \$6,552 monthly, create a situation where meeting basic living needs and seeking treatment for mental health are both unattainable³⁵.

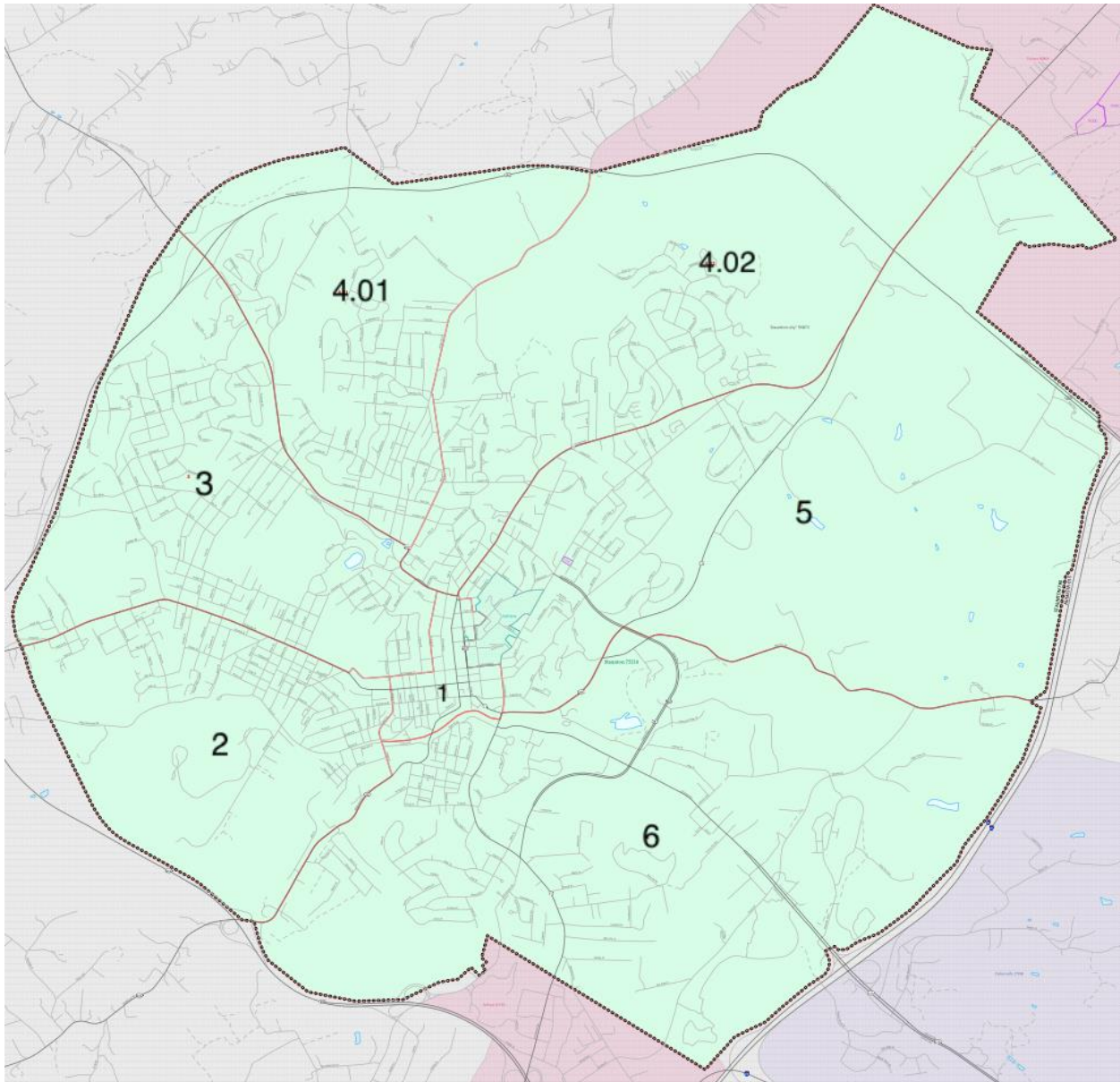
“Access to health care is an equity issue, (with) no insurance you go home without access to resources”

Community Partner Interview

Housing: When it comes to mental health and access to healthcare services, social class does not exist as an isolated factor. Instead, it is part of an interconnected system of social factors that create health access advantages or disadvantages for an individual. Housing, neighborhood, race, education, and criminal background are all social factors that are intimately interwoven with social class. Homelessness and lack of access to affordable

housing are directly related to financial resources, and in turn health outcomes³⁸. As explained by multiple community partners, if someone is unsure about where they will sleep tonight, it is tough for them to focus on or prioritize their mental or physical health^{30,38}. The unhoused are more likely to visit the emergency department (ED) for mental health or substance-related care, are five times more likely to be hospitalized for issues related to diabetes, have a 2-3 times greater risk of heart disease, and on average will die 10 years earlier than someone who has never experienced homelessness³⁸. In sum, “housing is healthcare”^{30,38}.

For those who are housed, where they live is also related to their health outcomes. Neighborhoods in Staunton with low income and low homeownership rates are more likely to have lower education levels and the lowest health and well-being opportunities³⁹. Recent data analysis from Augusta Health also reveals that visits to the ED for a mental health crisis and the likelihood of dying at the hospital can both be predicted based on the neighborhood where someone lives³⁸. In Staunton, the area most at risk of lower health opportunity is Census Tract 2 (see Image 1), found southwest of downtown and surrounding Montgomery Hall Park³⁹.

Image 1: Staunton City, Virginia Census Tract Map

Source: 2020 US Census Tract Reference Map⁴⁰

Race and Ethnicity: The Demographic section of our report documents racial differences in the Infant Mortality Rate; the Infant Mortality rate is a fundamental demographic measure of general community well-being. There are some other signs of racial differences in health outcomes in Staunton. Black Stauntonians experience higher rates (per 100,000) of age-adjusted mortality (Black:White) from heart disease (233.26:213.91), cancer (194.4:190), strokes (45:39.8), and diabetes (44.11:28.66), but a

lower age-adjusted rate of COPD mortality (32.72:53.17)⁶. The life expectancy for Black residents was 75.5 (MoE 3.2), and the life expectancy for White residents was 75.2 (MoE 1.1)⁷. Given these margins of error, it's difficult to say anything concrete at a local level. However, Black people experience substantially lower life expectancies at the state and national levels^{41,42}.

Economic burdens associated with health are directly linked to race and ethnicity. Black

residents experience poverty at a higher rate than White residents (18.5% vs 11.7% per 2017-2021 estimates; ACS-S1701)⁵. At the intersection of race, poverty, and neighborhood, Census Tract 2 has been identified as a “racially/ethnically concentrated area of poverty”, meaning that it has more than 20% of residents who are non-white and 15% or more residents who live in poverty⁴³. Given the link between social class and health, the costs of poverty on health disproportionately fall on minority households. These links are reflected in Virginia state-level data indicating that non-Hispanic blacks visit the ER for self-harm and suicide at rates consistently higher than non-Hispanic whites³⁴. Additional findings show that discrimination creates a compounding health burden for racial and ethnic minorities, with those experiencing racial/ethnic discrimination also experiencing higher rates of poor mental and physical health⁴⁴.

Criminal Background: Crime also plays a significant role in perceptions of mental health. While the vast majority of people with mental illness do not commit crimes, and most people who commit crimes are not mentally ill, special attention must be paid, and resources provided, for people with mental illness and substance abuse issues who are involved with the criminal justice system. Part of this support must be understanding the complexity of mental health and substance use and their relationship to crime. Antisocial personality disorder and substance abuse are both highly predictive of violent and criminal behavior. Certain other mental illnesses are potentially somewhat predictive, although less so. The links between mental illness and criminal behavior are also

complex and both confounded and mediated by other individual and social factors^{45, 46, 47}.

In order to reduce the likelihood of recidivism and other bad outcomes, since 2011, there has been a “huge push” locally to address mental health and substance abuse issues as one of the drivers of local criminality and recidivism³⁰. The result has been a significant increase in effective programming at every level of the system. For those coming out of jail, the current “intersection of systems” that clients need is complex, and local systems do not coordinate well with one another. There is still a “critical need” for discharge support for serious mental health conditions³⁰. Residents with a criminal background find it hard to obtain a job and housing, which, as shown above, also significantly impacts access to health services⁴⁸.

Stigma: Finally, stigma can directly affect whether someone chooses to seek mental health services. As one community leader stated, “It seems that many individuals with mental health issues go undiagnosed. There continues to be a stigma about mental health, which possibly results in individuals not seeking help”¹³. Another community partner noted the cultural stigma around mental health and substance use, stating that they hear things like, “We don’t have to get help, we can handle it within the family” or “There’s nothing wrong with me, I shouldn’t have a counselor”³⁰. Based on their local experiences, this stigma is a product of fear, shame, and guilt, especially for those experiencing substance use issues³⁰. Education and group therapy are specific tools that can help normalize seeking help and reduce the stigma surrounding mental health services.

Education and Schools

Citizens in our listening sessions and interviews often used the word “education” broadly to describe how we need more interaction outside our social circles in order to reduce stigma, increase understanding, break down “cliques”, or reach out to “linguistically isolated populations”^{24, 30}. There is a significant body of research analyzing the conditions under which community members successfully “educate” themselves about each other by working together as fellow citizens on a common project⁴⁹.

Public school systems are a good example of this process. Every school day Staunton City Schools (SCS) attempts to draw together the full diversity of our community’s youth on relatively equal terms - as students - in the service of achieving a common project - their formal education. Success requires that everyone involved respect each other and work effectively together. There is probably much that our entire community could learn from a better understanding of the process of achieving equity and inclusion within our diverse public school system.

In this section we describe formal education in Staunton from a diversity, equity and inclusion perspective. [NOTE: See the Demographics section of this report for information on “educational attainment” (the levels of schooling completed by persons 25 and older).] We focus on Staunton City Schools (SCS)^o, the city’s only school division^p. SCS currently has its own DEI report and comprehensive DEI initiatives in place⁵⁰. The Commission recognizes and supports these efforts. The Commission also recognizes that the City and SCS are separate entities with distinct governance. As such, these data are presented in an effort to provide citizens with a more comprehensive picture of diversity, equity, and inclusion (DEI) related education outcomes within the City of Staunton.

Almost all of Staunton’s youth attend SCS at some point in their educational careers, and the great majority attend for all of their education through high school. As such, only SCS educates the full range of the diversity of youth in our community^q. This diversity is documented in TABLE 9 below.

^o SCS has three elementary schools (Ware, Bessie Weller, McSwain), one middle school (Shelburne) and one high school (Staunton High). The school division also maintains a preschool program, educational programming at the Juvenile Detention Center, and membership in the regional Governor’s School and Valley Career and Technical Center.

^p This report is entirely based on publicly available documents. Staunton City Schools chose not to interview with the Commission.

^q While Staunton is rich in educational institutions and opportunities, we focused our limited time and resources on SCS for the following reasons: 1) Almost all local children attend SCS for some of their basic education, and most of them for their entire education through high school. 2) A public school’s mission is to educate, to the extent that they are able, all children in a community, whatever their situation with respect to cultural identity, physical and mental health, family life, poverty, etc. Thus, the Division educates the full range of cultural diversity of Staunton youth. 3) A third reason is that SCS delivers a very broad range of educational programming. This is partially because SCS includes all levels of schooling up through secondary school, in multiple venues. It is partially because of the commitment to educate all children. It is also a result of scale, given the number and diversity of the student body, as well as the multiple programs. 4) A fourth reason is that SCS has created its own, internal, DEI structure for delivering DEI programming, and has integrated this programming into its Strategic Plan⁵¹. SCS appointed an Equity Committee of citizens and stakeholders to work with VCIC, a consultant firm from Richmond, in order to develop this initiative⁵².

Table 9: Social Characteristics of Staunton City Schools Membership

Fall Membership by Subgroup	2020-21	2021-22	2022-23
All Students	2607	2740	2695
Female	1246	1321	1301
Male	1361	1419	1391
American Indian	11	13	11
Asian	37	43	36
Black	399	401	358
Hispanic	174	196	233
Native Hawaiian	1	2	1
White	1644	1725	1691
Multiple Races	341	360	365
Students with Disabilities	318	340	372
Students without Disabilities	2289	2400	2323
Economically Disadvantaged	1143	972	794
Not Economically Disadvantaged	1464	1768	1901
English Learners	81	97	119
Not English Learners	2526	2643	2576
Homeless	25	37	43
Military Connected	26	28	33
Foster Care	15	17	16

Source: Virginia Department of Education, School Quality Reports⁵³

We have organized our discussion of education around major DEI concerns that emerged from our discussions with Staunton citizens: academic achievement; student climate; staffing diversity; teaching resources and funding.

Academic Achievement

Our community has long been concerned with racial and ethnic differences in academic achievement. We describe the current situation using scores on statewide exams and graduation rates.

Statewide Exams

Virginia's Standards of Learning (SOL) provide a consistent measure of achievement in Reading, Math, Writing, Science, and History across the Commonwealth. We focus on Reading and Math because these assessments are

administered throughout a students' educational career.

Annual scores are most valuable when reported over time, identifying trends that school divisions can use to plan strategy. Unfortunately, events such as the recent pandemic disrupt these patterns. For this reason, we will only consider three-year achievement trends beginning with the 2020-2021 school year.

The trends in statewide exams since 2020 have been good news for SCS. Division Reading, Math, and Science statewide exam scores have continually improved for SCS since the 2020-

2021 school year.^r Scores for the 2021-2022 school year were the most improved in the state. By 2023, the Division and all reporting groups¹⁹ were at or above the state average for Reading and Science exams. In addition, Black,

Hispanic, and economically disadvantaged^s reporting groups were all at or above the state average in Math⁵⁴. Table 10 compares SOL pass rates for racial and ethnic subgroups, and for economically disadvantaged students:

Table 10: SCS Reading and Math SOL Pass Rates, 2020-2023

SCS SOL Pass Rates	Reading (Percent)			Math (Percent)		
	20-21	21-22	22-23	20-21	21-22	22-23
All Students taking the exam	67	71	73	48	65	67
Black	48	53	60	27	45	52
Hispanic	47	62	64	29	56	59
White	75	75	78	56	70	72
Econ. Disadvantaged	57	60	62	35	54	56

Source: VDOE: School Quality Reports⁵³

Table 10 is remarkable for documenting upward trendlines in both Reading and Math for every subgroup. Upward trend lines indicate the strong possibility of successful academic programs, in this case, programs benefiting all racial and ethnic subgroups.

Scores for younger students can indicate future trends. SCS primary grades (K-2) have shown

growth on early literacy screeners, achieving the Division’s highest scores so far⁵⁴. The state begins administering SOL assessments in third grade. SCS 3rd graders scored above the state average in reading⁵⁴. Table 11 compares reading and math pass rates for third grade racial and ethnic subgroups and economically disadvantaged students.

Table 11: SCS Reading and Math SOL Pass Rates, 2020-2023: Third Grade

SOL Pass Rates	Reading (Percent)			Math (Percent)		
	20-21	21-22	22-23	20-21	21-22	22-23
All Students	63	68	70	52	73	72
Black	62	43	70	35	48	64
Hispanic	42	50	59	36	81	69
White	69	77	73	63	79	75
Econ. Disadvantaged	53	58	59	34	66	61

^r “Division scores” refer to scores for all SCS students taking an exam (here, either Reading or Math). Pass rates reported in Table 10 are for all students, either for the entire Division (all students) or for the specific subgroup, taking either the Reading or the Math exams in a given school year. These exams begin in 3rd grade, are administered by grade through elementary school, and then by course through Middle and High School.

^s The VDOE defines “economically disadvantaged” students as anyone who is eligible for free or reduced lunches, receives Temporary Assistance for Needy Families, is eligible for Medicaid, or is a migrant or is experiencing homelessness.

Source: VDOE: School Quality Reports⁵³

Table 11 documents significant improvement overall for third graders over these three school years. Upward trends for Reading scores for Hispanic and economically disadvantaged subgroups, as well as for Math scores for Blacks, indicate increasing academic competence at this crucial age. Unfortunately, there are no other trends in the table. For all subgroups, data over a longer period of time will help to better document trend lines.

While Tables 10 and 11 adequately describe trends over time, they do not clearly measure “achievement gaps”: enduring differences in achievement between racial and ethnic groups. These “gaps” are one of the most common ways of measuring equity of racial and ethnic educational achievement.

One way of measuring achievement gaps is to directly compare racial and ethnic groups to each other. For example, the so-called “Black to White academic achievement gap” can be measured by dividing the Black pass rate (numerator) by the White pass rate (denominator) (B/W). This produces a ratio in which a score of 1.0 indicates equality (the pass rates are the same), a score of less than 1.0 indicates lower pass rates for Blacks relative to Whites, and a higher score than 1.0 indicates higher pass rates for Blacks relative to Whites.

Table 12 gives the ratios comparing Blacks to Whites and Hispanics to Whites for the entire Division for the past three school years.

Table 12: Black to White (B/W) and Hispanic to White (H/W) Achievement Ratios

Achievement Ratios	Reading Ratios			Math Ratios		
	20-21	21-22	22-23	20-21	21-22	22-23
Black / White ratios	.64	.71	.77	.48	.64	.72
Hispanic / White ratios	.63	.83	.82	.52	.80	.82

Source: VDOE: School Quality Reports⁵³

During the past three school years, Reading and Math SOL scores for Blacks have steadily increased relative to the scores for Whites. The hope is that these figures indicate a trend that endures, resulting in equality within the next few years. It will be important to continue to directly compare Black and White SOL pass rates into the future in order to determine if this trend continues.

The prospects for equality are less clear when comparing Hispanics to Whites. The scores

indicate a dramatic increase in the ratio after the COVID school year (2020-21), after which there has been little change. It is difficult to know if there will be further improvement, or if policy changes are required to increase the ratio. Once again, it will be important to continue these direct comparisons⁵³.

Graduation Rates

The “on time” graduation rate^t for the 2023 cohort was 85%. “Multiple Races” (93%) and Blacks (87%) achieved somewhat higher rates;

^t The VDOE defines the “on time graduation rate” as follows: “The Virginia On-Time Graduate Rate is based on four years of longitudinal student level data and accounts for student mobility, changes in student enrollment, and local decisions on the

Whites (84%) and Hispanics (77%) had somewhat lower rates⁵³.

SCS students can graduate with either “Advanced” or “Standard” diplomas. The rate at which racial and ethnic groups receive Advanced diplomas is considered a useful measure of equity and was a concern for a number of our citizens. In 2023, about a third of Black, Hispanic, and Multiple Race graduates received Advanced Diplomas, compared to about 59% of White graduates⁵³.^u

“Dropouts” are cohort members who left school without graduating. The 2023 SCS cohort had a dropout rate of 4.5%, with Blacks and Multiple Races dropping out at 2.7% (1 student) and 0%, respectively. The White dropout rate was 5% (7 students). Hispanics left without graduating at a rate of 11.8% (2 students)⁵³.

Student Welfare / Climate

Citizens were concerned about the social climate at SCS, and how discipline issues may affect students of different races and ethnicities. The VDOE provides some data that reflects on school climate⁵³:

- Rates for “chronic absenteeism”^v for SCS do not exhibit a trend over the past three school years. The most recent rates, for 2022-23 (18.8%: 475 students), show relatively little variation in chronic absentee rates between Blacks (19%: 64), Whites (17.2%: 273), and Hispanics (21%: 45).

- During the 2020-2023 time period, there were no expulsions; the only long-term suspensions were for Whites.^w
- In the 2022-23 school year, the Black (26.8%), Hispanic (10.1%), and Multiple Race (17.5%) percentages of all short-term suspensions was higher than their proportion of the student population; the White percentage (45.1%) was lower.

More direct measures of student climate, such as survey responses, direct observation, and interviews were unavailable to us. We did find that the SCS 2021-2025 Strategic Plan had an extensive list of specific strategies to build student cohesion, some of which may have a significant impact on racial and ethnic groups⁵¹.

Staffing / Funding

The effort to achieve greater racial and ethnic diversity in SCS staffing is long-standing. There has been some limited success over the years, but teachers, administrators, and staff at SCS do not reflect the racial and ethnic makeup of the Staunton community. This issue is one of the more common complaints raised about SCS.

Current efforts for recruiting greater diversity, especially among teaching staff, include a focus on education departments in Historically Black Colleges and Universities³⁰, and other education programs, including MBU.

promotion and retention of students. The formula also recognizes that some students with disabilities and English learners are allowed more than the standard four years to earn a diploma and are still counted as “on-time” graduates⁵³.

^u There are two additional categories of graduates: “Other Diplomas” and GEDs. There were only six of these – three for each category – for the 2023 graduating class⁵³.

^v “Chronic absenteeism” is defined as two absences per month. According to the VDOE, this level of absence is correlated with declines in academic performance⁵³.

^w The VDOE School Quality Reports give only percentages for short and long term suspensions. The number of White long-term suspensions was unavailable⁵³.

Another focus is on developing and maintaining more competitive compensation packages for teaching staff. In FY 2022, SCS paid a higher average annual teachers' salary than all adjacent Divisions in the Valley, with the exception of Harrisonburg. Staunton ranked 62 out of 132 Divisions in Virginia for teachers' compensation⁵⁶. However, competition for teachers today is fierce, and even more so for teachers of color.

Retention of teachers, including teachers of color, has also been challenging. SCS 2021-25 Strategic Plan⁵¹ includes a wealth of programs for supporting teachers once they are hired. These include (Reference: Goal 3, Strategy 1):

- cultivating teacher expertise,
- professional learning communities,
- SCS University
- Faculty mentoring based on direct observation
- DEI training, etc.

DEI Structure

The success of SCS efforts to achieve racial and ethnic equity in academic achievement, student well-being and culture, and staffing should be well-supported by the development of an extensive structure of support for DEI, as laid out in the SCS Strategic Plan⁵¹. This structure includes "equity officers" in the SCS Central Office who coordinate the work of "school equity teams" in each of the schools. The design of the program calls for frequent interaction between parties, wide involvement of all stakeholders, extensive training, and earmarked funding drives (e.g. Equity First Fund).

Criminal Justice

The Criminal Justice System (CJS) is a primary institution for delivering equity locally and in our nation. As such, it has always been at the heart of issues of equity, diversity, and inclusion, especially between racial and ethnic groups. Data for a comprehensive assessment of equitable treatment by the CJS is usually unavailable for a locality as small as Staunton. We are fortunate in that we do have some high-quality data on parts of the CJS and a model for developing analyses of the entire system.^x

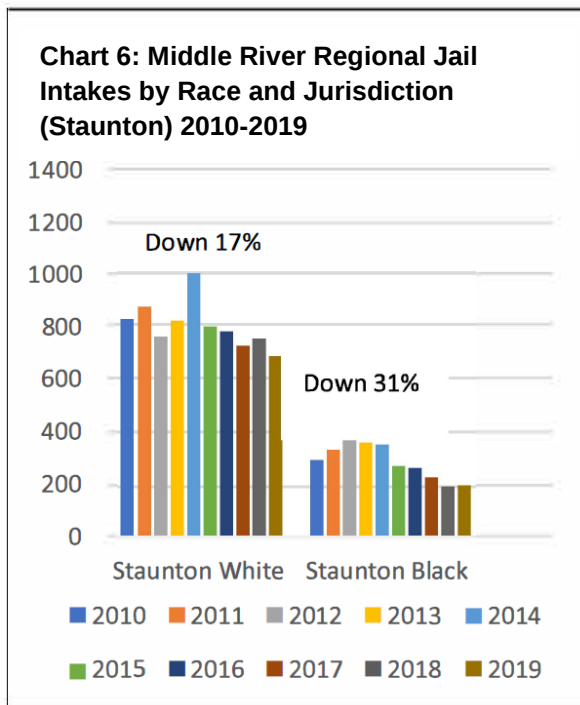
In 2015, Staunton, Waynesboro, and Augusta County participated in a federal program called Evidence Based Decision Making Initiative (EDBM). This focused on "improving efficiencies and outcomes" by identifying key decision points in the criminal justice system and analyzing their impact on outcomes.^y

This program could improve our understanding of equity in the CJS. For instance, one could compare racial and ethnic outcomes of appearances before the magistrate. There could be many reasons for different outcomes for different social identities, and these differences should be considered over time. However, careful analysis should provide useful information regarding equity and inclusion across diverse social identities.

^x Our research for Staunton's criminal justice system (CJS) included interviews with the Staunton Police Department, the Public Defender's Office, Blue Ridge Court Services, and Mr. Dave Pastors, Criminal Justice Planner for BRCS. We also attended a meeting of the Blue Ridge Criminal Justice Board.

^y Mr. Pastors identified four key decision points: Law enforcement response; Magistrate appearance; Arraignment; Sentencing. He also shared a "Staunton/Augusta/Waynesboro Criminal Justice System Map that graphically charts the local SJC system from entry into the process of final release⁵⁸, including "Key Decision Points".

As an example, the Blue Ridge Court Services (BRCS) Criminal Justice Planner used local data to provide a comprehensive analysis of trends in intakes and bookings for the Middle River Regional Jail (MRRJ) “footprint” between 2010 and 2019. The result is the most recent, detailed quantitative analysis available for DEI purposes^{56, 57}. We reproduce part of a graph from the BRCS report documenting the racial composition of intakes to MRRJ from Staunton from 2010-2019.



Source: Comprehensive Criminal Justice Report For the Central Shenandoah Valley: Part Two: Middle River Regional Jail Data

We do not have access to the figures that produced this table, but the graph, while imprecise, clearly describes important racial patterns. The first trend is that intakes for both Black and Whites declined over the decade. This

overall decline has been a consistent downward trend since 2015.

This graph also shows that over the entire decade the proportion of Black intakes, relative to White intakes, was higher than the proportion of Blacks relative to Whites in the Staunton community.² What is unclear is how these proportions are changing. For this we would need more data, and for the analysis to extend into this decade. Support for this type of research is essential for determining racial equity in the intake rate.

If racial differences in CJS outcomes are to become more equitable, BRCS services will be an important part of this process. One reason is the broad range of services. These span the entire CJS process. From the day that a citizen first arrives at MRRJ, in preparation for an appearance before the magistrate, to the time that they may spend on probation, BRCS provides multiple essential support services to both the prisoner and the CJS. These include pretrial interview and supervision; mental health services; overseeing probation; drug court service; and domestic violence evaluation and treatment.

The capacity for all parts of the local CJS system to work together is partially facilitated by the Blue Ridge Criminal Justice Board. This organization includes representatives from every level of the local CJS. The work of this organization is coordinated by BRCS and performed by members. The February 2023 meeting featured an extended presentation focusing on the possibility of creating a facility for providing effective mental health services for persons involved in law enforcement incidents.

² If we consider only Stauntonians identifying as Blacks or Whites, then about 14.5% of that group would be Black and the remaining 85.5% would be White. In comparison, if we consider only Black and White Staunton intakes at MRRJ from 2010-19, the Black percentage is always somewhere above 20%.

Our interviews with CJS community partners confirmed a general commitment to: evidence-based decision making; collaboration for the purpose of resolving criminal justice system-wide issues; comprehensive documentation; intensive DEI training, evaluated for effectiveness; active community involvement; transparency/open communication; etc. (see also the 2022 SPD Annual Report²³). The result of all these programs and policies should be a major gain for equity in our local Criminal Justice System. We can only document such gains, however, from maintaining a comprehensive research program.

These interviews also identified a wide range of issues that directly impact the capacity of citizens to negotiate their participation in the CJS, including successful rehabilitation for those convicted of crimes. The resources available to the Public Defender are considerably less than those available to prosecutors. The community's lack of affordable housing and reluctance to employ defendants and those convicted of crimes can make it difficult to satisfy probation requirements for work and

stability, or to even hold together one's family, a key factor in facilitating rehabilitation. The need for more effective institutions for serving persons with serious mental health issues who have encounters with law enforcement and the CJS was a common theme in all of our CJS interviews.

At the end of the day, all of the efforts from CJS providers can only be measured and evaluated by maintaining an adequately supported and well-organized research effort, including research using the Evidence Based Decision Making model. This is the only way that we can truly understand the effectiveness of programs designed to improve equity, in the interest of developing as equitable a system as possible.

A second recommendation would be to create a mental health facility capable of delivering effective services to persons with serious mental health problems who have become involved with law enforcement/the Criminal Justice System. This need was one of the few common themes in all of our CJS interviews.

Connectedness

Are citizens connected to their community and to economic opportunities?

In addition to economic prosperity and well-being, the final components of a thriving community are a citizen's ability to connect to this well-being and prosperity, and their sense that they belong in their community. Connectedness measures challenged the Commission to evaluate the connectedness of citizens to a stable foundation within the community. Specific areas evaluated include access to and knowledge of community services, engagement and belonging within the community, and access to transportation and affordable, stable housing.

Access to and Knowledge of Services

Access to and knowledge of services was previously explored as a major area of concern under Mental Health and Health Related Services, identified during the analysis of the Readiness and Well-Being indicator. This indicator evaluates whether citizens have the experience, skills, and resources to thrive in a community. As the data presented in that section suggests, there is considerable effort by local organizations to improve access to services in order to address declining mental and physical health outcomes for Staunton citizens^{13, 27}.

Unsurprisingly, access to and knowledge of services was also overrepresented in our analysis of the Connectedness indicator. Within this category, access to and knowledge of services addresses how community awareness may not only impact a citizen's ability to properly identify and receive support and services, but also how it may impact their sense of connection and belonging within a community. For example, knowledge of services available to the unhoused community may not

be directly applicable to one's life but may impact how they might support someone in their family or social network. As a result, this may impact a citizen's perception of how a community is able to meet the diverse needs of its citizens and by extension, their sense of connection and belonging to the community. As such, the following section summarizes key findings from community stakeholder interviews and community listening sessions.

"It's not only about discovering great ideas; it's also about the intrinsic value of a community coming together to solve their problems."

Community Partner Interview

Key Findings: What we Heard

From our community listening sessions, a lack of awareness of resources available to the community was frequently discussed²⁴. Agencies providing specific services to a subset of a community, such as Valley Program for Aging Services^{aa}, Talking Book Center^{bb}, Valley

^{aa} Valley Program for Aging Services serves individuals 60 and over with resources and opportunities they need to lead engaged lives. They provide services such as Meals on Wheels, Senior Transportation, Emergency Services, and Medicare Counseling.

^{bb} Talking Book Center provides free audio books and other library services and resources to persons who are blind, print disabled, or unable to use standard printed materials.

Supportive Housing^{cc}, Shenandoah LGBTQ Center^{dd}, Office on Youth^{ee}, for example, often take on the responsibility of disseminating available services to those currently served. This information is typically disseminated through their outreach networks, via email, newsletter, or social media. However, community leaders from many of these agencies note a need for broader community awareness of services to expand reach to those beyond current networks. In addition, these agencies noted significant barriers including language and technology access, and access for deaf, blind and hard-of-hearing community members. Similarly, community listening session participants commonly advocated for City of Staunton support in communication and awareness of generalized community information and services. When asked *“What useful resources does the city have/offer that you are aware of?”*, listening session participants rarely noted using specific services. In addition, participants noted this lack of awareness of available community information and services as negatively impacting their perceptions of the City as inclusive and equitable. Interestingly, when asked how the City of Staunton might improve on future DEI initiatives, listening session participants often asked for additional information on community-led volunteer and committee opportunities, or additional ways to be more involved with activities or non-profit organizations providing services to the community.

Interviews with community leaders and agencies all pointed to a similar solution.

Awareness and access to critical information and support services can be remedied by a centralized, comprehensive, and accessible source, easily connecting those in need to appropriate services³⁰. Such a source may enhance the capacity to document the full range of needs in the community, the range of services and their relative effectiveness to meet those needs, as well as any disparities observed in those underserved.

As shown in Table 12, a recent community needs assessment found Facebook and word of mouth from friends and family were the two most selected ways for getting information about community programs and resources²⁷. The table also shows what methods were preferred for low-income individuals and across various age ranges.

The Virginia statewide information and referral system, 2-1-1^{ff}, was identified as an easy method of learning about resources by only 3.64% of all survey respondents. Amongst those listed on the table, 2-1-1, is the most comprehensive list of available resources in a given community. As of November 2023, there have been 470 calls made to 2-1-1 from Staunton City residents this year⁵⁹. Lack of awareness or usage of 2-1-1 as a resource suggests a need for additional research and improvement to better bridge this disparity and gap for Staunton community members.

^{cc} Valley Supportive Housing provides life stability for individuals with behavioral health diagnoses through quality, safe, affordable housing, and partnerships for appropriate supports to assure tenant success.

^{dd} Shenandoah LGBTQ Center supports the LGBTQIA+ community through advocacy, education, programs and safe spaces. They provide services such as rapid rehousing, community health worker program and support groups.

^{ee} Office on Youth promotes collaborative efforts among youth and family service agencies to encourage positive youth development in the community.

^{ff} 2-1-1 VIRGINIA is a service of the Virginia Department of Social Services provided in partnership with the Council of Community Services, the Planning Council, the United Way of Central Virginia, and the United Way of Greater Richmond & Petersburg. 2-1-1 provides access to services in a specific community and statewide. All referrals are confidential and can be searched on the 2-1-1 Virginia website as well. <https://www.211virginia.org/>

Table 12: Survey Responses Regarding Accessing Information on Community Programs and Resource

What are the 3 easiest ways for you to get information about community programs/resources?	All Responses	200% FPL or below	18 - 24	25-44	65 +
Facebook	61.54%	50.00%	53.33%	72.38%	31.25%
Friends/ Family (word of mouth)	57.49%	56.60%	60.00%	54.29%	68.75%
Internet (various websites)	51.82%	45.28%	46.67%	60.95%	25.00%
Mail	22.67%	13.21%	13.33%	21.90%	33.33%
Case Manager	15.38%	19.81%	40.00%	12.38%	16.67%
School	14.57%	20.75%	20.00%	23.81%	0.00%
Newspapers	14.17%	13.21%	0.00%	8.57%	31.25%
Faith Community	11.34%	8.49%	13.33%	7.62%	18.75%
Radio	9.31%	7.55%	13.33%	5.71%	8.33%
Posters/Flyers	6.48%	11.32%	0.00%	6.67%	10.42%
Other (please specify)	6.07%	7.55%	0.00%	4.76%	8.33%
2-1-1	3.64%	6.60%	0.00%	2.86%	4.17%
Instagram	2.83%	2.83%	6.67%	4.76%	0.00%
Twitter	1.21%	0.00%	6.67%	1.90%	2.08%
Snapchat	1.21%	1.89%	6.67%	0.95%	0.00%
Total Respondents	247	106	15	105	48

CAPSAW Community Needs Assessment Survey 2021

Community Engagement/Belonging

An engaged and informed community is a healthy one. Community engagement is a connectedness indicator representing how citizens engage across the vast spectrum of a community's ecosystem – including city government and the many agencies and stakeholders that contribute to both an individual's and community's overall health and prosperity. Community engagement seeks to bring together diverse perspectives to improve understanding and contributions for community benefit, including impact on policies and community initiatives. Increasing a sense of

belonging results in tangible outcomes that are necessary for a thriving community, including increased meaningful civic participation and volunteerism, for example⁶⁰. The Commission considered community engagement and sense of belonging⁶⁸ as an important metric of a community's trust and willingness to participate in building a healthy and prosperous community.

⁶⁸ Diversity typically means proportionate representation across all dimensions of human difference. Equity states that some may need different resources and opportunities to reach an equal outcome. Inclusion means that everyone is included, visible, heard and considered. Belonging refers to creating a culture where people can be themselves, have psychological safety, appreciate each other and feel part of something larger.

Key Findings: What We Heard

There are no quantitative metrics of community engagement currently utilized in the analysis, however, the theme of community engagement was significantly overrepresented in many community stakeholder and key informant interviews³⁰. In addition, listening session participants discussed community engagement consistently when asked about how the City may promote equity. Both Staunton residents and community agencies and stakeholders expressed that City engagement and coordination in these efforts would be necessary to increase opportunities for engagement and foster a sense of belonging.

Lack of connection

We have learned from our community listening sessions that a lack of connection and access to diverse and inclusive engagement (economic, social, political) opportunities have a negative impact on community members' wellness, sense of belonging, and perception of Staunton as an inclusive community. Most notably, themes of invisibility and lack of representation were cited most frequently. Residents note a lack of diverse representation across lines of race, ethnicity, age, class, and identities in City staff and community, observed in many areas throughout Staunton, particularly downtown. In addition, residents noted a lack of multicultural and interfaith representation in social opportunities and City-sponsored events. Many community members indicated that day-to-day life was largely siloed from other diverse sections of the community. This was further exacerbated by the pandemic isolation as engagement opportunities for residents further dwindled. In addition, residents consistently expressed limited awareness of events, community initiatives, and engagement opportunities (including civic-related information, volunteer opportunities, etc.) across Staunton that

negatively impacted their sense of belonging and perception of Staunton as promoting inclusivity. Furthermore, listening session participants proposed increasing educational opportunities and learning of underrepresented cultures and diverse Staunton communities would improve their perception of Staunton as promoting equity and inclusivity.

An opportunity for the City of Staunton

“The Black and Brown community is invisible here...”

“[I wish there were] ways to experience as a community different things, just being comfortable with different cultures...”

“Yes, I believe our city promotes access to everyone, however having access does not guarantee equity. The barriers, as I mentioned previously is discrimination and under-representation.”

“We need more awareness of wheelchair barriers in community events, for example - a recent [non-profit] event was totally inaccessible for those in wheelchairs.”

“Voting access is also difficult for many...including transportation to the polls, parking and no large print or Braille ballots.”

“It is easy for smaller faith groups to feel invisible.”

“There is a level of [LGBTQ+] under-representation that is difficult to understand.”

Listening Session Participants

From our community stakeholder and informant interviews, stakeholders and agencies cite a need for better understanding of diverse lived experiences and believe that collaborative efforts to better this understanding are necessary to improve the quality of services supporting Staunton residents³⁰. Limited financial resources, staff capacity, and siloed community networks are cited as barriers to this critical work for many area agencies serving the community. Of those interviewed, many community leaders advocated for the City of Staunton or Commission, to improve community understanding and awareness by leading cross-sector coordination, research, and education efforts. Many of these leaders saw this necessity as twofold. Firstly, broadening community outreach efforts would build trust and directly engage Staunton residents to lend diverse voices and lived experiences to better define community needs. Secondly, a City-led effort engages more community members and stakeholders in collaborative efforts, pooling resources to find innovative and cross-sector solutions, more effectively meeting community needs than is possible by a single entity alone.

“By listening to people’s stories, and becoming familiar with their lives, one can begin to see how the policy guiding our major institutions – such as the criminal justice system, housing stock, childcare, etc. – intersect to create issues of well-being in our community.”

“The research would need to go beyond numerical representations to develop an in-depth understanding of individual and family perspectives and life experiences. This kind of information is only available from conversations and the testimony of citizens.”

“The accumulated impact of these stories could have a powerful impact on our community in many different ways.”

Community Partner Interviews

Affordable Housing

Essential community partners, community members, key informants, and statistical data all point to housing as a significant area of opportunity for Staunton^{13, 24, 27, 28, 30, 61}. The recent SAW Housing Summit hosted by the Community Foundation of the Central Blue Ridge, which was attended by over 200 local community members, organizations, and service providers, further reinforced the need for Staunton and the wider region to address its immediate housing crisis⁴⁸. The most pronounced issues residents face are the availability and affordability of adequate, safe housing. Following this need, there are a number of social factors that affect and are affected by someone’s ability to acquire

“...some of the housing for older & aging populations are pieced together and makes [us] feel unwanted”

Listening Session Participant

adequate housing. These include organizational barriers, poverty, race, disability, neighborhood, age, criminal background, and health.

Access and Affordability

Affordable housing is more scarce now than it was during the housing crisis of 2007 and 2008⁶². There was a 22% increase in housing units in Staunton from 2000-2019²⁷. However, the new supply of homes being built cannot keep up with current demand and the growing population locally, or across the region, state, and nation. Locally, 2-1-1 service calls related to housing and shelter are also up by 22% over the past several years²⁷. As of the second quarter of 2023, the waiting list in Staunton for federally subsidized housing vouchers totaled 521 applicants and the waiting list for multi-family apartments was 365

families⁶³. According to the 2022 Community Health Needs Assessment¹³, 7% of Staunton residents also reported experiencing homelessness in the past two years. This is a significant increase from the 1.5% of residents who reported homelessness in the 2019 Community Health Needs Assessment⁶⁴. Staunton has a need for more affordable housing and that need is growing.

For residents who are able to obtain a home, housing cost burden becomes the next major concern. Housing cost burden is a measure of how much a household's income is spent on housing costs, including rent or mortgage, utilities, and other housing-related expenses. The U.S. Department of Housing and Urban Development defines a household as cost-burdened if it spends more than 30% of its income on housing costs⁶⁵. Even with a cost of living 20.4% *below* the national average, 23.7% of the SAW region and 15.0% of Staunton households are considered cost-burdened²⁷. With an average rent ranging from \$820/month for a studio apartment to \$1690/month for a 4-bedroom home, mean renter wages are not sufficient to cover housing cost needs, leaving most renters cost-burdened²⁷.

Recent increases in housing costs due to rising rents and higher interest rates are further exacerbating this issue. They also lead to fewer residents owning their homes, which leads to fewer residents who are able to build wealth. Overall, Staunton saw a 10% *decrease* in the share of owner-occupied homes from 2010-2019²⁷. For these residents who have a hard time paying their home expenses, "lack of a good paying job", "lack of affordable housing", and "utility payments" are the top cited reasons for these struggles²⁷.

Residents, especially families, also need housing units that are safe. Staunton's majority stock in 2017 was single-family housing units, which

comprised 67.1% of all housing units⁴³. With a median home age of 53 years old (as of 2019)²⁷, these housing units also need to be well maintained. 11.8% of Staunton residents report living in unhealthy or unsafe housing¹³ and these residents tend to be lower-income, renters, and younger adults.

Multi-family housing (e.g. townhouses, condos) can be a more affordable housing option for many households. Multi-family housing can also offer access to healthier, safer neighborhoods for families⁴³, as multi-family units can be less expensive than single-family homes in that same neighborhood. Considering that lower-income and minority households are more likely to have larger family sizes⁴³ and minority households are disproportionately poor, more large (3+ bedroom) multi-family units can provide more financially accessible housing to these populations.

Social Factors Affecting Access and Affordability

The cited financial burdens of housing are inequitably distributed primarily by social class. The Federal Poverty Level in 2023 for a family of four is \$30,000 per year or \$2,500 of income per month. Of the 11,125 total households in Staunton, 13% (or 1,447 households) live at or below the Federal Poverty Level¹⁷. ALICE households represent families who earn up to or more than the Federal Poverty Level but less than the basic cost of living in the area. ALICE levels are calculated by the United Way and are recognized as a poverty measure that better reflects the actual cost of living in a given area. As of 2021, the yearly survival budget for a family of four in Staunton totaled between \$60,984 and \$66,492 (depending on the age of the children), or between \$5,082 and \$5,541 per month respectively. Based on the survival budget for families of all sizes, 33% (or 3,672 households) within Staunton are ALICE families

and do not make enough to meet basic living expenses each month¹⁷.

Race is also a social factor affecting access and affordability. As stated in the Mental Health section of this report, Black residents experience poverty at a higher rate than White residents (18.5% vs 11.7% per 2017-2021 estimates; ACS-S1701)⁵. The median income in Staunton is also lower for non-white and non-Hispanic residents⁵. Reflecting the relationship between race and poverty, current residents of the Housing Authority (by voucher or apartment) are disproportionately Black: 43% of choice voucher participants and 29% of apartment households⁶³ compared to 11.4% in the total population. Residents under the care of Valley Community Services Board's Homeless Connection are also disproportionately non-white with children⁶⁶. Non-white residents also experience both perceived and actual housing discrimination in Staunton⁴³. Based on interviews with key community stakeholders and external reports, there is evidence of perceived and actual housing discrimination in the rental and homeowner markets^{30, 43}. Black, American Indian, and Asian home loan applicants are also more likely to be denied a mortgage than white applicants in the city. The denial rate in 2020 was 18% for whites compared to 27% for Blacks, 33% for American Indians, and 38% for Asian residents⁴³.

Age, neighborhood, and disability are also factors interconnected with social class and its effects on housing affordability and access. The ability to age in place, find accessible housing, and housing that feels welcoming were all areas of concern cited at community listening sessions and at meetings with community partners^{24, 30}. The U.S. Centers for Disease Control and Prevention defines aging in place as "the ability to live in one's own home and community safely, independently, and comfortably, regardless of age, income, or ability level"⁶⁷. The U.S.

population over the age of 65 is expected to double between 2000 and 2060, from just over 40 million to just over 90 million respectively. At that time, the population over 65 will outnumber the population under 18 by 3.6%, or by 14.6 million people⁶⁸. With this change in demographics, the housing needs within communities are also expected to shift and communities will need to address housing issues related to an aging, fixed-income population, with a spectrum of abilities. This is half the median income of residents over 16 without a disability. Census Tracts 2 and 3 are also areas of specific concern when it comes to affordability, access, and aging in place. These tracts tend to have higher poverty, lack resources, and have reduced access to economic opportunity. Census Tract 2 specifically needs special consideration when it comes to housing now and into the future because of its designation by HUD as a "racial/ethnically concentrated area of poverty," meaning it has more than 20% of residents who are non-white and 15% or more residents who live in poverty⁴³.

Other issues related to housing, and cited elsewhere in this report, are crime and healthcare. Almost all Public Defender clients have serious other life challenges. These major challenges include mental health, substance abuse, and lack of housing³⁰. Crime and its related issues are cited by community partners as a crisis in our community and one that carries a significant cost. Reducing these challenges will reduce recidivism in our community. Other barriers to services related to crime and frequently cited by community partners, were the need for connection between agencies³⁰ and the need for education about where to go for services and what services are available⁶¹. 2-1-1 as a community resource is also known to *not* be an effective tool³⁰. Finally, the social determinants of health account for 55% of the influence on health outcomes³⁸. Housing is an important social determinant of health that

exacerbates problems related to poverty³⁰. As explained by our community partners, “Housing is healthcare”^{30, 38}.

Transportation

Transportation is essential when considering what a citizen may need to access the necessary resources and opportunities to meet their mental and physical health or participate in economic, social, and political life. A city’s transportation networks must adequately connect diverse community members to employment, healthcare, education, grocery stores, and social opportunities. The Commission considered whether all neighborhoods, communities, demographics, and income groups have equitable access to transportation options and who might be underserved or disproportionately impacted by the current transportation infrastructure.

Key Findings

Essential community partners, service providers, and informants have identified transportation as a top concern and significant barrier for the communities that they serve^{13, 27, 30}. Listening session participants also cited transportation as a barrier that they encountered directly in their time as Staunton City citizens²⁴.

Transportation as a barrier to accessing basic needs

Two recent community health needs assessments explore transportation as a social determinant of health and have identified it as a significant barrier for our Staunton community^{13, 27}. According to the Augusta Health Community Health Needs Assessment (2022)¹³, nearly 10% of Staunton households cited transportation as hindering a doctor’s visit within the past year at a rate higher than both

Waynesboro (8.9%) and Augusta County (2.9%). Key informants surveyed from the Needs Assessment cite transportation over 40 times as a significant barrier for the communities that they serve, spanning access to services for mental health, substance use, nutrition, disability, and chronic pain. In addition, CAPSAW (2021)²⁷ concluded that transportation is one barrier to increased economic security faced by families residing in the Staunton, Augusta, and Waynesboro area. Among those who self-identified employment to be an issue for their household, 10.42% cited no transportation as among the top three reasons why.

While most area residents utilize their own vehicle for transportation, it is estimated that a combined 12.1% of Staunton residents utilize public transportation, bike, walk, or receive rides from someone else as their primary means of transportation²⁷. This percentage includes the elderly, persons with disabilities, and low-income individuals that may not have the ability to own personal vehicles. For these residents, lack of reliable transit, service gaps due to insufficient route coverage, and schedule times are additional barriers to accessing critical services^{24, 30}.

Increasing transportation costs disproportionately impact lower-income households.

ALICE^{hh} households are often forced to live in lower-income areas with limited community resources, farther away from jobs and services⁶⁹. As a result, these households often spend disproportionately more on transportation. According to a 2021 ALICE Report, the cost of household essentials, including housing, child care, food, transportation, health care and technology, increased faster than the cost of other goods

^{hh} **ALICE:** Asset Limited, Income Constrained, Employed – households that earn above the Federal Poverty Level (FPL) but cannot afford the basic cost of living in their county.

and services. Between 2019 and 2021, the average annual costs for household essentials increased 11% for a single adult, 9% for a single senior, and 7% for a family of four – outpacing wage increases. The ALICE monthly survival budget for transportation in Staunton is \$330 for a single adult, \$507 for two adults, \$807 for two adults, two children, and \$283 for a senior living in Staunton City³³, representing a significant proportion of the ALICE monthly survival budget, approximately 15%. Access to public transportation can greatly reduce these transportation costs, however, transit systems often do not accommodate jobs that require working early, late, or on weekends.

What We Heard

Several community leaders noted transportation as an underlying issue of a multifaceted and interrelated problem of addressing areas of housing, mental health services, employment, childcare and

education³⁰. Additionally, this was also reflected in the strategic plans of several organizations seeking to address transportation barriers to increase access to services and overall community health^{44, 61, 70}.

Listening session participants also cited transportation as a significant barrier that they encountered directly in their time as Staunton City citizens²⁴. Lack of accessible or sufficient transportation prevented many from accessing basic needs and services but also from participating in social and political opportunities that contribute to overall well-being. Most notably, listening session participants from the Older and Aging community expressed frustration at the insufficient public transit route coverage and limited alternative modes of transportation. This coupled with a lack of accommodation for those with walkers or wheelchairs on public transit and walkways has effectively cut off access to many areas across the City of Staunton, further isolating a vulnerable and underserved population.

RECOMMENDATIONS

Goal A: Invest in a Long-Term DEI Commitment	
Action A-1: Hire or Name a DEI Officer Position to Provide Oversight of DEI Initiatives	
Steps/Phases/Suggestions	• Complete a comprehensive review of position description ○ Include compensation analysis ○ Review position descriptions for similar positions in surrounding areas ▪ Deputy City Manager for Racial Equity, Diversity and Inclusion (REDI) – Charlottesville ○ Review Departments for oversight control ▪ Human Resources ▪ Communications ▪ Human Services ▪ Police ▪ Parks and Recreation • Define qualifications for position • Ensure proper funding allocation for position • Create and list position ○ Ensure promotion and review process is completed using procedures that limit bias in hiring process
Resources/Stakeholders	City of Staunton City Council City of Staunton City Manager's Office City of Staunton Human Resources City of Charlottesville REDI City of Roanoke
Impact Area	Readiness & Well-Being Connectedness
Timeline	1 -2 years

Goal A: Invest in a Long-Term DEI Commitment	
Action A-2: Implement a Permanent DEI Commission, Consisting of Diverse Community Members to Assist with Community Building, Accountability, and Ongoing Data Collection, Synthesis and Integration	
Steps/Phases/Suggestions	● Create and list open Commission positions ○ Members should be chosen to reflect City demographics, and include citizens with expertise in data collection and synthesis, community building and DEI ○ Should consist of at least 14 diverse community members ● Commissioners should assist with: ○ Community building efforts ○ City accountability ○ Ongoing data collection, synthesis, and integration ○ Trust building and data collection for protected classes with limited current data ▪ Unhoused residents ▪ English as a second language (ESL) Residents ▪ Additional areas as recommended by current DEI Commission
Resources/Stakeholders	City of Staunton City Council Current City of Staunton DEI Commission
Impact Area	Connectedness
Timeline	Immediate

Goal B: Promote Values of Diversity, Equity & Inclusion in City Policies, Procedures, and Staff Representation	
Action B-1: Formally Review all City Hiring Practices, Policies, and Procedures Related to DEI, Including Staff Representation, Recruitment, and Procedures	
Steps/Phases/Suggestions	● Review recruitment strategies to remove barriers for minority and other-abled applicants ● Ensure Fair & Equitable Compensation Plans align with DEI initiatives ● Review language in procedures and policies ● Ensure competitiveness with external market ● Procurement of HR Consultant for review of Compensation Plans, job classifications, policies and procedures
Resources/Stakeholders	City of Staunton Human Resources City of Staunton City Council Outside HR Consultant
Impact Area	Connectedness Economic Vitality
Timeline	1 – 2 years

Goal B: Promote Values of Diversity, Equity & Inclusion in City Policies, Procedures, and Staff Representation
Action B-2: Develop a Standardized DEI-Specific Onboarding and Training for All City Employees, Boards and Commissions

Steps/Phases/Suggestions	● Review current training programs ○ Ensure language and directives align with City DEI initiatives ● Research DEI training programs ○ Ensure training on unconscious bias is included ● Implement DEI training program ○ Create process for training current employees ○ Create process for training new employees ○ Create process for training for Boards & Commissions
Resources/Stakeholders	City of Staunton - Individual Departments City of Staunton City Manager's Office City of Staunton Human Resources City of Staunton City Council
Impact Area	Connectedness Economic Vitality
Timeline	1 year

Goal B: Promote Values of Diversity, Equity & Inclusion in City Policies, Procedures, and Staff Representation
Action B-3: Conduct an Accessibility Audit of City Facilities and Public Areas

Steps/Phases/Suggestions	● Create accessibility audit checklist ○ Car parking ○ Entrances ○ Surfaces & gradients ○ Visual/auditory/tactile information ○ Hazards ○ Circulation space (indoors) ○ Floor surfaces ○ Lighting ○ Acoustics ○ Internal stairs/walkways/elevators ○ Restrooms ● Complete accessibility audit ● Report findings to City Council with proposal of recommendations
Resources/Stakeholders	City of Staunton Public Works City of Staunton City Manager's Office City of Staunton City Council
Impact Area	Readiness & Well-Being Connectedness
Timeline	1-2 years

Goal B: Reflect Values of Diversity, Equity & Inclusion in City Policies, Procedures, and Staff Representation	
Action B-4: Ensure Public Transparency and Accountability in DEI Initiatives	
Steps/Phases/Suggestions	● Include commitment to increasing diversity representation across City staff ○ Amend Comprehensive Plan to include DEI initiatives accepted by Council ● Formal updates of DEI outcomes to the community annually ○ Ensure updates align with communication strategies suggested by DEI Commission
Resources/Stakeholders	City of Staunton DEI Commission City of Staunton DEI Officer City of Staunton City Manager's Office City of Staunton Engagement & Communications Manager City of Staunton City Council
Impact Area	Readiness & Well-Being Connectedness
Timeline	Immediate

Goal C: Promote and Model Values of DEI for the Community and Broader Region to Increase Community Engagement and Foster a Stronger Sense of Belonging
Action C-1: Address Broad Communication Gaps, and Ensure Communications are Diverse in Language, Tone, Access, and Platform

Steps/Phases/Suggestions	● Provide bi-lingual communications and forms used by the City ○ Review demographics for language access information ○ Suggest: Spanish and additional languages based on population OR refugee influx ● Analyze current communication platforms for use statistics and potential barriers ● Implement new platforms as needed to dissolve language barriers ● Review current communications for access barriers ○ Ensure channels available for deaf, blind and hard-of-hearing community members
Resources/Stakeholders	City of Staunton City Manager's Office City of Staunton – Individual Departments City of Staunton Engagement & Communications Manager
Impact Area	Readiness & Well-Being Connectedness
Timeline	Immediate

Goal C: Promote and Model Values of DEI for the Community and Broader Region to Increase Community Engagement and Foster a Stronger Sense of Belonging
Action C-2: Develop a Staunton Equity Network

Steps/Phases/Suggestions	● Foster and build a network of interconnected community organizations, service providers, businesses and stakeholders who specialize in the areas affected by DEI issues ● Invest or increase participation in community outreach opportunities to “meet the community where they are” ● Leverage existing outreach networks ○ Community health workers ○ Outreach events already conducted by community agencies
Resources/Stakeholders	City of Staunton City Manager’s Office City of Staunton Engagement & Communications Manager Staunton Downtown Development Association (SDDA) Shenandoah Community Capital Fund (SCCF) Community Action Partnership of Staunton, Augusta, Waynesboro (CAPSAW) United Way Community Foundation Augusta Health Virginia Department of Health Other Local Non Profit Organizations Other Local Businesses
Impact Area	Readiness & Well-Being Connectedness
Timeline	2 years

Goal C: Promote and Model Values of Diversity, Equity, and Inclusion for the Community and Broader Region to Increase Community Engagement and Foster a Stronger Sense of Belonging

Action C-3: Create More Inclusive Communication to Increase Access to and Knowledge of Available Services for the Community, Including Language Access, and Platform and Technology Needs

Steps/Phases/Suggestions	• Build community awareness and education surrounding issues related to health, availability of health services, and how services are accessed • Assess and provide recommendations on how to improve 2-1-1's performance, community access, and utilization • Develop a centralized directory of support and community services
Resources/Stakeholders	City of Staunton Engagement & Communications Manager
Impact Area	Readiness & Well-Being Connectedness
Timeline	1-2 years

Goal D: Prioritize Increased Opportunities for Residents to Gain and Sustain Economic Vitality	
Action D-1: Address the Need for Affordable Housing	
Steps/Phases/Suggestions	• Review local zoning and ordinances that can assist in creation and maintenance of affordable and safe housing • Evaluate the focus of items relating to housing in the City of Staunton's Comprehensive Plan 2018-2040 to ensure the actions planned are people-focused and directly address the social factors highlighted within this report • Support collaboration of local organizations to address housing issues within Staunton • Continue to support efforts to revitalize Uniontown and the West End
Resources/Stakeholders	City of Staunton Community Development Department City of Staunton Planning Commission City of Staunton City Council
Impact Area	Economic Vitality
Timeline	2 years+

Goal D: Prioritize Increased Opportunities for Residents to Gain and Sustain Economic Vitality	
Action D-2: Enhance Public Transportation Services and Non-Car Options	
Steps/Phases/Suggestions	● Expand transportation services to increase employment and economic opportunities for Staunton's diverse community members ○ Ensure equitable access to multiple transit options ○ Ensure new growth and improvements in existing development address public transportation access so that all residents can participate in the local economy and current residents are protected from potential displacement. Transportation opportunities should link all communities with to areas with higher job density ○ Examine route design to ensure proper connection to employment areas, hospital and service providers, and grocery centers ○ Expand service hours to include Sunday and evening hours ○ Explore and invest in micro-transit opportunities that offer on-demand availability for vulnerable populations, or those living in areas not serviced by current transit routes ○ Create opportunities and sufficient infrastructure for safe cycling and walking to work and grocery stores
Resources/Stakeholders	Central Shenandoah Planning District Commission (CSPDC) Staunton-Augusta-Waynesboro Metropolitan Planning Organization (SAWMPO) City of Staunton Department of Community Development City of Staunton Economic Development Department Virginia Department of Transportation Transportation and Mobility Planning Division
Impact Area	Economic Vitality
Timeline	1-2 years

Goal D: Prioritize Increased Opportunities for Residents to Gain and Sustain Economic Vitality	
Action D-3: Continue to Cultivate Industry and Business Opportunities, with a Focus on Minority Businesses	
Steps/Phases/Suggestions	• Develop a list of minority-owned businesses within the City • Consider specific resource allocations for minority-owned businesses • Ensure that minority business owner voices are represented in the Staunton Equity Network (Action C-2)
Resources/Stakeholders	City of Staunton Engagement & Communications Manager City of Staunton City Council City of Staunton Community Development Department City of Staunton Economic Development Department City of Staunton Convention & Visitors Bureau City of Staunton Tourism Advisory Board
Impact Area	Economic Vitality
Timeline	6mos-1 year

Goal E: Support Community Well-Being with an Enhanced Focus on Vulnerable Residents	
Action E-1: Address the Intergenerational Needs of Staunton Residents	
Steps/Phases/Suggestions	- Engage in youth development opportunities - Identify ways to partner with Staunton City Schools (SCS) to support the City's children and families - Encourage mentoring opportunities, especially with Mary Baldwin University - Encourage opportunities for youth to give back to the community and to create an opportunity for innovative local solutions and collaboration - Conduct or participate in a needs assessment on childcare - Ensure full understanding of the current childcare needs of City community members, including affordability of care, living wages for providers, and access to benefits - Foster opportunities for social engagement for all ages, but especially the aging population - Create a community space with specific programming addressing intergenerational needs
Resources/Stakeholders	City of Staunton City Council Central Shenandoah Valley Office on Youth Valley Program for Aging Services (VPAS) Staunton City Schools Mary Baldwin University
Impact Area	Readiness & Well-Being
Timeline	1-2 years

Goal E: Support Community Well-Being with an Enhanced Focus on Vulnerable Residents	
Action E-2: Build Community Awareness of the Diverse Lived Experiences of Staunton Residents and Community Needs – Including BIPOC, LGBTQ+, Unhoused and Disability Community	
Steps/Phases/Suggestions	• Develop intentional qualitative research efforts grounded in trust-building and community-building • Collaboratively engage community members with lived experience, community stakeholders, and agencies with subject matter expertise. • Invest in programming and events that reflect diverse experiences and provide opportunities for awareness, education, and engagement
Resources/Stakeholders	City of Staunton City Council City of Staunton Engagement & Communications Manager Various Community Groups including • Staunton NAACP • Shenandoah LGBTQ Center • Valley Community Services Board • Other stakeholders as identified
Impact Area	Connectedness
Timeline	6mos-1 year

Goal E: Support Community Well-Being with an Enhanced Focus on Vulnerable Residents
Action E-3: Foster Collaboration and Coordination between Local Programs and Service Providers Focused on Mental Health, Physical Health and Health-Related Services, Including Developing an Understanding of How the City can Support the Work of These Programs

Steps/Phases/Suggestions	• Embrace walkability initiatives that promote and increase physical activity • Develop policies and programs that consider and address the multiple factors related to health access and physical and mental health outcomes in our community ○ Income ○ Children and Childcare ○ Race ○ Crime ○ Stigma ○ Age ○ Transportation ○ Housing insecurity • Work with the Blue Ridge Criminal Justice Board, Blue Ridge Court Services, and local supporters to establish a facility for comprehensive care of citizens exhibiting mental health symptoms in encounters with law enforcement
Resources/Stakeholders	City of Staunton Police Department City of Staunton City Manager's Office Blue Ridge Criminal Justice Board Blue Ridge Court Services Valley Community Services Board
Impact Area	Readiness & Well-Being
Timeline	1-2 years

Goal E: Support Community Well-Being with an Enhanced Focus on Vulnerable Residents	
Action E-4: Pursue equity in criminal justice	
Steps/Phases/Suggestions	• Ensure that Blue Ridge Court Services continues to have the resources and support necessary to document social equity for Middle Regional Jail intakes, as well as for appearances before the magistrate • Expand research of social equity to all levels of criminal justice system decision-making
Resources/Stakeholders	City of Staunton Police Department City of Staunton Sheriff's Office City of Staunton City Council Blue Ridge Court Services Other CJS stakeholders as identified
Impact Area	Readiness & Well-Being
Timeline	Immediate

PROPOSED 12-18 MONTH FRAMEWORK

The Commission identified five elements as important to our work moving forward, they are listed and described in detail below. These are inspired by the New Hampshire Equity Collective and their Culturally Effective Organizations Framework Assessment⁷¹. This framework is meant to serve as a guideline for the current and future DEI Commissions.

The Current Commission:

January 2024 - June 2024

1. **Leadership:** Assigning a DEI Officer or staff member specifically dedicated to DEI issues will be crucial to DEI work moving forward. A City Council liaison should also be assigned to work directly with and, along with the DEI Officer, attend Commission meetings.
2. **Policies and Procedures:** The Commission will identify policies and procedures for assigning future Commission members and the role of the Commission in the work of the City.
3. **Staff Cultural Competence:** The Commission and the City will work together to establish mutual guidance and training. The City can assist the Commission in understanding aspects of City governance and recommendation implementations and the Commission can assist the City with training on competencies related to diversity, equity, and inclusion.

The Future DEI Commission:

June 2024 - June 2026

4. **Data Collection and Analysis:** The Commission and City will develop measures of success and goal outcomes for the recommendations laid out by the Commission. The Commission and City will also identify and collect any additional points of data required.
5. **Community Engagement:** The Commission and City will develop and facilitate community listening sessions and other opportunities for community outreach, especially those which the first Commission was not able to focus on.
 - a. **Resource access:** Particular attention should be paid to BIPOC businesses, media presence around DEI, and information on the City website in relation to connecting the community with resources.
 - b. **Outreach:** The Commission and City should develop a protocol on how to respond to people who want to learn more about the report and what the City is doing in relation to DEI issues.

REFERENCES

- ¹National Equity Atlas. (2023). <https://nationalequityatlas.org/>
- ²U.S. Census Bureau. (2020a). *Decennial Census, DEC Redistricting Data (PL 94-171)*. Retrieved from data.census.gov.
- ³U.S. Census Bureau. (2020b). *Decennial Census, DEC Demographic Profile*. Retrieved from data.census.gov.
- ⁴U.S. Census Bureau. (2020c). *Decennial Census, DEC Demographic and Housing Characteristics*. Retrieved from data.census.gov.
- ⁵U.S. Census Bureau. (2021a). *American Community Survey, ACS 5-Year Estimates Subject Tables*. Retrieved from data.census.gov.
- ⁶Gardner, L. (2023). Data provided to the Equity Commission by the Central Shenandoah Health District. Available from the Commission document archive upon request.
- ⁷University of Wisconsin Population Health Institute. (2023). *County Health Rankings & Roadmaps*. www.countyhealthrankings.org.
- ⁸Census Bureau. (2023, Sept.). *Agency Information Collection Activities; Submission to the Office of Management and Budget (OMB) for Review and Approval; Comment Request; American Community Survey Methods Panel: 2024 Sexual Orientation and Gender Identity Test*. 88 Fed. Reg. 64404. <https://www.federalregister.gov/documents/2023/09/19/2023-20256/agency-information-collection-activities-submission-to-the-office-of-management-and-budget-omb-for>
- ⁹Johnson, Heather Beth. (2015). *The American Dream and the Power of Wealth* (2nd ed.). Routledge.
- ¹⁰Lareau, Annette. (2011). *Unequal Childhoods* (2nd ed.). University of California Press.
- ¹¹Centers for Disease Control and Prevention (CDC). (2023). *Linked Birth/Infant Deaths on CDC WONDER Online Database. Data are from the Linked Birth / Infant Deaths Records 2017-2021, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program*. Accessed at <http://wonder.cdc.gov/lbd-current-expanded.html>
- ¹²Peña, Jessica E., Ricardo Henrique Lowe Jr. and Ana I. Sánchez-Rivera. (2023). *New Population Counts for 22 Detailed Some Other Race Groups*. U.S. Census Bureau. Retrieved from <https://www.census.gov/library/stories/2023/10/2020-census-dhc-a-some-other-race-population.html>.

- ¹³Augusta Health. (2022, July). *Community Health Needs Assessment*. Retrieved from <https://www.augustahealth.com/wp-content/uploads/2022/08/2022-PRC-CHNA-Report-Augusta-Health2.pdf>
- ¹⁴Central Shenandoah Valley Office on Youth. (2018). *Staunton, Augusta County & Waynesboro Youth Community Needs Assessment*.
https://www.officeonyouth.com/files/ugd/033733_4041061e9a1e47d5b78627af00f2ae0c.pdf
- ¹⁵Annie E. Casey Foundation. (2022, August). *Virginia: % of Children in Poverty Living In Deep Poverty in Virginia*. Retrieved from <https://datacenter.aecf.org/data/tables/9183-of-children-in-poverty-living-in-deep-poverty?loc=48&loct=5#detailed/5/6812-6821,6823-6945/false/1607,1573,1522/any/18206,18207>
- ¹⁶Center for Poverty & Inequality Research. (2022, December). *What is “deep poverty”?* University of California Davis. Retrieved from <https://poverty.ucdavis.edu/faq/what-deep-poverty#:~:text=Data%20on%20those%20with%20incomes,percent%20of%20its%20poverty%20thresh old.>
- ¹⁷United for ALICE. (2021). *Virginia County Reports 2021: ALICE in Staunton City*.
<https://www.unitedforalice.org/county-reports/virginia>
- ¹⁸Virginia Employment Commission. (2020). *Quarterly Census of Employment and Wages*.
<https://virginiaworks.com/Quarterly-Census-of-Employment-and-Wages-QCEW/index>
- ¹⁹Staunton Equity Coalition PowerPoint presentation. (2020, August). *My Brother’s and Sister’s Keeper Initiative*. Available from the Commission document archive upon request.
- ²⁰City of Staunton Office of Human Resources. (2023). *EEO Applicant Metrics Staunton City, 4th QTR. of 2022*. Available from the Commission document archive upon request.
- ²¹City of Staunton Public Library. (2022, July). *Annual Report: Fiscal Year 2022*. Retrieved from <https://www.ci.staunton.va.us/home/showpublisheddocument/11163/638024856286570000>
- ²²City of Staunton Public Library. (2022, May). *Staunton Public Library’s Long-range Plan: 2022-2027*.
<https://www.ci.staunton.va.us/home/showpublisheddocument/11165/638024856292830000>
- ²³Staunton Police Department. (2023, January). *Staunton Police Department 2022 Annual Report*. Available from the Commission document archive upon request.
- ²⁴City of Staunton Diversity, Equity, and Inclusion Commission. *Community Listening Session*. Available from the Commission document archive upon request:
- Business Meet and Greet, 4/5/23*
 - LGBTQ+ Listening Session, 4/23/23*
 - Deaf, Blind and Differently Abled Listening Session, 4/30/23*
 - Seniors Listening Session, 6/7/23*

BIPOC Listening Session, 6/22/23
Interfaith Listening Session, 7/12/23
General Population Listening Session, 7/26/23

²⁵City of Staunton Diversity, Equity and Inclusion Commission. *Community Business Survey*. Available from the Commission document archive upon request

²⁶City of Staunton Diversity, Equity and Inclusion Commission. *Community Events*.

²⁷Community Action Partnership, Staunton, Augusta, and Waynesboro (CAPSAW). (2021). *Community Needs Assessment Report*. <https://www.waynesboro.va.us/DocumentCenter/View/4065/2021-Needs-Assessment-Report>

²⁸Office on Youth Central Shenandoah Valley. (2018, December). *Staunton, Augusta County & Waynesboro Youth Community Needs Assessment*. Retrieved from https://www.officeonyouth.com/files/ugd/033733_4041061e9a1e47d5b78627af00f2ae0c.pdf

²⁹Virginia Department of Health. (2023, September). Virginia Community Health Assessment Reports for Staunton City. Accessed from: The Community Health Improvement Data Portal: <https://virginiawellbeing.com/virginia-community-health-improvement-data-portal/>

³⁰City of Staunton Diversity, Equity and Inclusion Commission. *Community Partner Interview*. Available from the Commission document archive upon request:

Meetings with Community Stakeholders, 10/12/22 and 10/26/22
Augusta Health, 3/30/23
Bears and Blankets, 7/12/23
Blue Ridge Court Services, 1/6/23 and 3/7/23
Blue Ridge Criminal Justice Board, 2/21/23
Central Shenandoah Health District of the Virginia Department of Health, 4/14/23
Central Shenandoah Planning District Commission, 5/11/23
City of Staunton Community and Economic Development, 2/22/23
City of Staunton Human Resources, 2/22/23
City of Staunton Parks and Recreation, 2/1/23
City of Staunton Police Department, 1/24/23
Community Action Partnership of Staunton, Augusta, and Waynesboro (CAPSAW), 3/14/23
Community Foundation of the Central Blue Ridge, 3/20/23
NAACP, 7/18/23
Office on Youth, 12/2/23
Shenandoah Valley Social Services, 12/19/22
Staunton Public Defender, 2/2/23
Staunton Public Library, 1/18/23
Staunton Redevelopment and Housing Authority, 5/19/23
Stuart Hall School, 7/13/23
United Way of Staunton, Waynesboro, and Augusta County (UWSWA), 2/23/23
Valley Community Services Board - Behavioral Health, 5/25/23

Valley Community Services Board - Homeless Connection, 6/8/23
 Valley Community Services Board – JEDI Committee 8/1/23
 Valley Mission, 4/10/23
 Valley Supportive Housing, 7/26/23

³¹United Way of Staunton, Augusta County & Waynesboro. (no date). *Strategic Plan 2022-2025*.
<https://www.unitedwaysaw.org/strategic-plan>

³²United for ALICE. (2023, April). *ALICE in the Crosscurrents: COVID and Financial Hardship in Virginia*. Research Center. <https://www.unitedforalice.org/virginia#>

³³United for ALICE - Research Center Virginia. (2021). *Household Survival Budget, Staunton City 2021*. Accessed from: <https://www.unitedforalice.org/household-budgets/virginia>

³⁴Virginia Department of Health. (2023). *Virginia's Plan for Well-Being*. Retrieved from <https://viriniawellbeing.com/>

³⁵United for ALICE. (2022, April). *Alice in Focus: Children*. Research Center. https://unitedforalice.org/Attachments/ALICEinFocus/ALICE-in-Focus-Children-Virginia_r.pdf

³⁶Administration for Community Living. (2021, May). *2020 Profile of Older Americans*. Retrieved from https://acl.gov/sites/default/files/aging%20and%20Disability%20In%20America/2020ProfileOlderAmericans.final_.pdf

³⁷City of Staunton Diversity, Equity and Inclusion Commission. (2023, October). *Public Hearing Notes*. Available from the Commission document archive upon request.

³⁸Campbell, L., Meadows, S., Merritt, C. (2023, October 11). *Housing is Health [Homelessness Makes Us Sick - Exploring the social determinants of health]*. SAW Housing Summit, Staunton, Virginia. Retrieved from https://www.sawhousing.com/files/ugd/ecfa8d_f718f94dd0ce46e299be9a7d2478b847.pdf

³⁹Enterprise Community Partners. (2018, February). *Enterprise Opportunity 360 Measurement Report*. Available from the Commission document archive upon request.

⁴⁰U.S. Census Bureau. (2021b). *2020 Census - Census Tract Reference Map: Staunton City, VA*. Retrieved from https://www2.census.gov/geo/maps/DC2020/PL20/st51_va/censustract_maps/c51790_staunton/DC2020_C51790.pdf

⁴¹University of Wisconsin Population Health Institute. (2021). *County Health Rankings & Roadmaps*. Retrieved from https://www.countyhealthrankings.org/sites/default/files/media/document/CHR2021_VA.pdf

⁴²Arias, E., Kochanek, K., Xu, J., Tejada-Vera, B. (2023, November). *Vital Statistics Rapid Release: Provisional Life Expectancy Estimates for 2022*. Centers for Disease Control and Prevention. <https://www.cdc.gov/nchs/data/vsrr/vsrr031.pdf>, see also <https://www.cdc.gov/nchs/nvss/vsrr/reports.htm>.

⁴³City of Staunton. (2020). *2020 Analysis of Impediments to Fair Housing Choice*. Available from the Commission document archive upon request.

⁴⁴Virginia Department of Health. (2012). *Virginia Health Equity Report 2012*. <https://www.vdh.virginia.gov/content/uploads/sites/76/2016/06/VA-Health-Equity-Conference.pdf>.

⁴⁵De Angelis, T. (2022, July). Mental illness and violence: Debunking myths, addressing realities. *Monitor in Psychology*, 52(3). Retrieved from <https://www.apa.org/monitor/2021/04/ce-mental-illness>

⁴⁶Peterson, J., Skeem, J., Kennealy, P., Bray, B., Zvonkovic, A. (2014). How Often and How Consistently do Symptoms Directly Precede Criminal Behavior Among Offenders With Mental Illness? *Law and Human Behavior*, 38(5), 439-449. Retrieved from <https://www.apa.org/pubs/journals/releases/lhb-0000075.pdf>

⁴⁷Hiday, V. A., & Burns, P. J. (2010). Mental illness and the criminal justice system. *A handbook for the study of mental health: Social contexts, theories, and systems*, 478-498. Retrieved from https://www.eenetconnect.ca/fileSendAction/fcType/0/fcOid/334567292787986524/filePointer/337805966615274900/fodoid/337805966615274897/A_Handbook_for_the_Study_of_Mental_Health__Social_Contexts__Theories__and_Systems__2nd_edition.pdf#page=500

⁴⁸SAW Housing Summit. (2023, October). *Participant Dialogue*. <https://www.sawhousing.com/> Notes available from the Commission document archive upon request.

⁴⁹Pettigrew, Thomas F., and Linda R. Tropp. 2011. *When Groups Meet: The Dynamics of Intergroup Contact*. New York: Psychology Press.

⁵⁰Staunton City Schools Equity Committee. (2021). *Recommendations*. Richmond VA: Virginia Center for Inclusive Communities (VCIC). <https://staunton.k12.va.us/en-US/diversity-equity-inclusion-fe392f0d/our-partner-vcic-a359b14f>

⁵¹Staunton City Schools. (2021). *2021-2025 Staunton City Schools Strategic Plan*. Staunton VA. <https://staunton.k12.va.us/en-US/strategic-planning-partnerships-3c50733c/strategic-plan-4d3665c7>

⁵²Virginia Center for Inclusive Communities. (2018). *Staunton City Schools Final Report*. https://drive.google.com/file/d/1wOLDh4rZGvsZ4aaeskpXWYwAf0V4Idyy/view?usp=drive_link

⁵³Virginia Department of Education. (2023). *School Quality Reports*. <https://schoolquality.virginia.gov/divisions/staunton-city-public-schools#desktopTabs-3>

⁵⁴Staunton City Schools. (2023, September). *SCS Makes Continuous Growth in SOL Results*. Accessed from: <https://myemail.constantcontact.com/Our-Latest-SOL-Scores-Are-In-.html?soid=1134859382348&aid=xYImhuxNMC8>

⁵⁵Virginia Department of Education. (2023). *Superintendent's Report* (Tables 15 and 19). Accessed from: <https://www.doe.virginia.gov/data-policy-funding/data-reports/statistics-reports/superintendent-s-annual-report>

⁵⁶Pastors, Dave. (2021, August). *Comprehensive Criminal Justice Report For the Central Shenandoah Valley: Part One: Population and Crime Data for 2010-2019*. Staunton Va: Blue Ridge Court Services. Available from the Commission document archive upon request.

⁵⁷Pastors, Dave. (2022, February). *Comprehensive Criminal Justice Report For the Central Shenandoah Valley: Part Two: Middle River Regional Jail Data 2010-2019*. Staunton Va: Blue Ridge Court Services. Available from the Commission document archive upon request.

⁵⁸Pastors, Dave. n.d. (no date). *Staunton / Augusta / Waynesboro Criminal Justice System Map*. Available from the Commission document archive upon request.

⁵⁹211 Counts. (November, 2023) Top service requests Nov 29, 2022 to Nov 28, 2023. Virginia 211 Counts. Accessed from: <https://va.211counts.org/>

⁶⁰Talò, C., Mannarini, T. & Rochira. (2014). A Sense of Community and Community Participation: A Meta-Analytic Review. *Soc Indic Res*, 117, 1–28. <https://doi.org/10.1007/s11205-013-0347-2>

⁶¹Community Action Partnership, Staunton, Augusta, and Waynesboro (CAPSAW). (2019). *Strategic Plan 2020-2024*. Waynesboro City. <https://www.waynesboro.va.us/DocumentCenter/View/3208/2020---2024-Strategic-Plan>

⁶²Lombard, H. (2018, November). Affordable housing is more scarce now than during the housing bubble. Statchatva.org. Retrieved from <https://statchatva.org/2018/11/09/affordable-housing-is-more-scarce-than-during-the-housing-bubble/>

⁶³Staunton Redevelopment and Housing Authority. Personal Communication. May 26, 2023. Available from the Commission document archive upon request.

⁶⁴Augusta Health. (2019, July). *Community Health Needs Assessment*. https://www.augustahealth.com/wp-content/uploads/2021/12/augusta_health_chna_report_-_2019.pdf

⁶⁵U.S. Department of Housing and Urban Development. (n.d.). CHAS: Background. Retrieved from https://www.huduser.gov/portal/datasets/cp/CHAS/bg_chas.html

⁶⁶Valley Community Services Board. (2023, March). *FY 2023 Continuum of Care APR - Community Services*. Available from the Commission document archive upon request.

⁶⁷Centers for Disease Control and Prevention (CDC). (2009, October). *Healthy Places Terminology*. Retrieved from <https://www.cdc.gov/healthyplaces/terminology.htm>

⁶⁸U.S. Census Bureau. (2018, March). *Older People Projected to Outnumber Children for First Time in U.S. History*. Retrieved from <https://www.census.gov/newsroom/press-releases/2018/cb18-41-population-projections.html>

⁶⁹United for ALICE. (2020). *ALICE in Virginia: A Financial Hardship Study*. Research Center. <https://www.unitedforalice.org/virginia#>

⁷⁰Augusta Health. (2023). *Implementation Strategy 2023-2025*. <https://www.augustahealth.com/wp-content/uploads/2023/05/Augusta-Health-Implementation-Strategy-2023-2025-.pdf>

⁷¹New Hampshire Equity Collective. (last revision: 3/3/21). *Culturally Effective Organizations Framework Assessment*. Accessed from: <https://equitynh.org/culturally-effective-organizations/>

⁷²U.S. Census Bureau. (2010). *County Intercensal Tables: 2000-2010*. Retrieved from <https://www.census.gov/data/tables/time-series/demo/popest/intercensal-2000-2010-counties.html>.

⁷³U.S. Census Bureau. (2019). *County Population by Characteristics: 2010-2019*. Retrieved from <https://www.census.gov/data/tables/time-series/demo/popest/2010s-counties-detail.html>.

⁷⁴U.S. Census Bureau. (2023). *County Population by Characteristics: 2020-2022*. Retrieved from <https://www.census.gov/data/tables/time-series/demo/popest/2020s-counties-detail.html>.

⁷⁵U.S. Census Bureau. (2022). *Instructions for Applying Statistical Testing to American Community Survey Data*. Retrieved from https://www2.census.gov/programs-surveys/acs/tech_docs/statistical_testing/2022_Instructions_for_Stat_Testing_ACS.pdf.

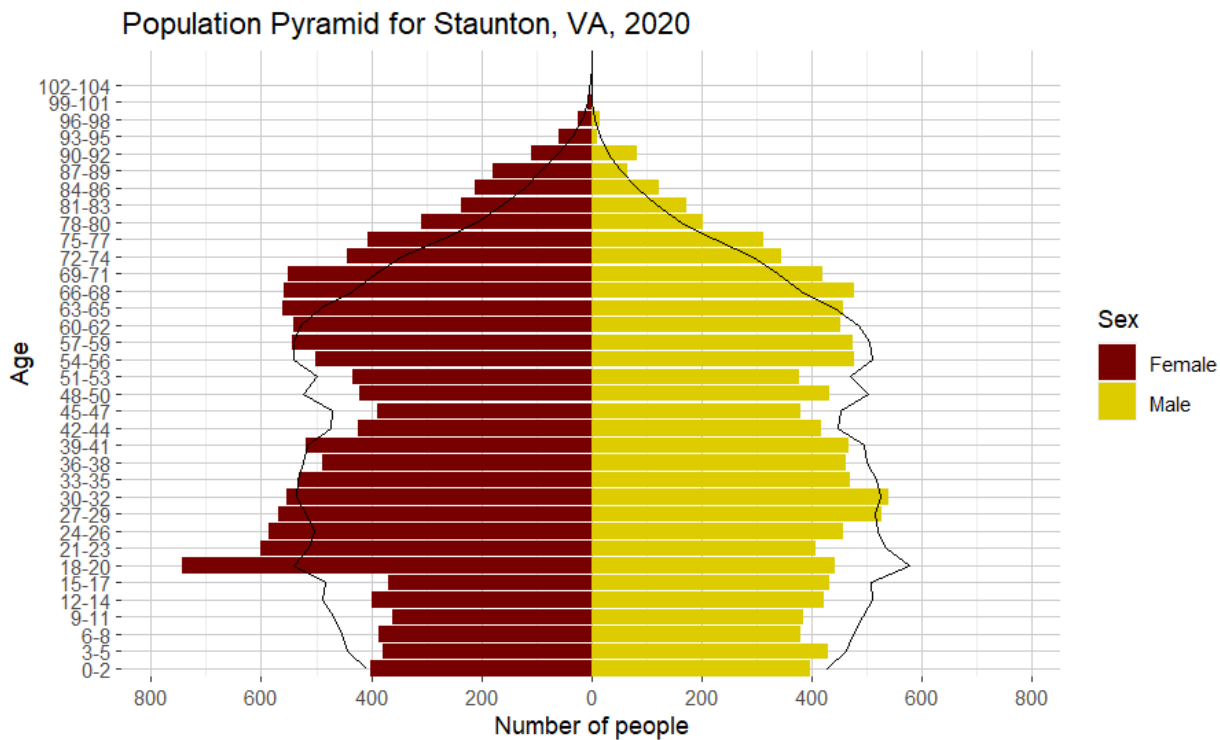
⁷⁶U.S. Census Bureau. (2023). *How the Census Bureau Measures Poverty*. Retrieved from <https://www.census.gov/topics/income-poverty/poverty/guidance/poverty-measures.html>

⁷⁷U.S. Department of Health and Human Services. (2023). *HHS Poverty Guidelines for 2023*. Retrieved from <https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines>

⁷⁸U.S. Bureau of Labor Statistics. (2015). *Labor Force Statistics from the Current Population Survey*. Retrieved from <https://www.bls.gov/cps/faq.htm#Ques5>

APPENDIX

Appendix A: Population Pyramid



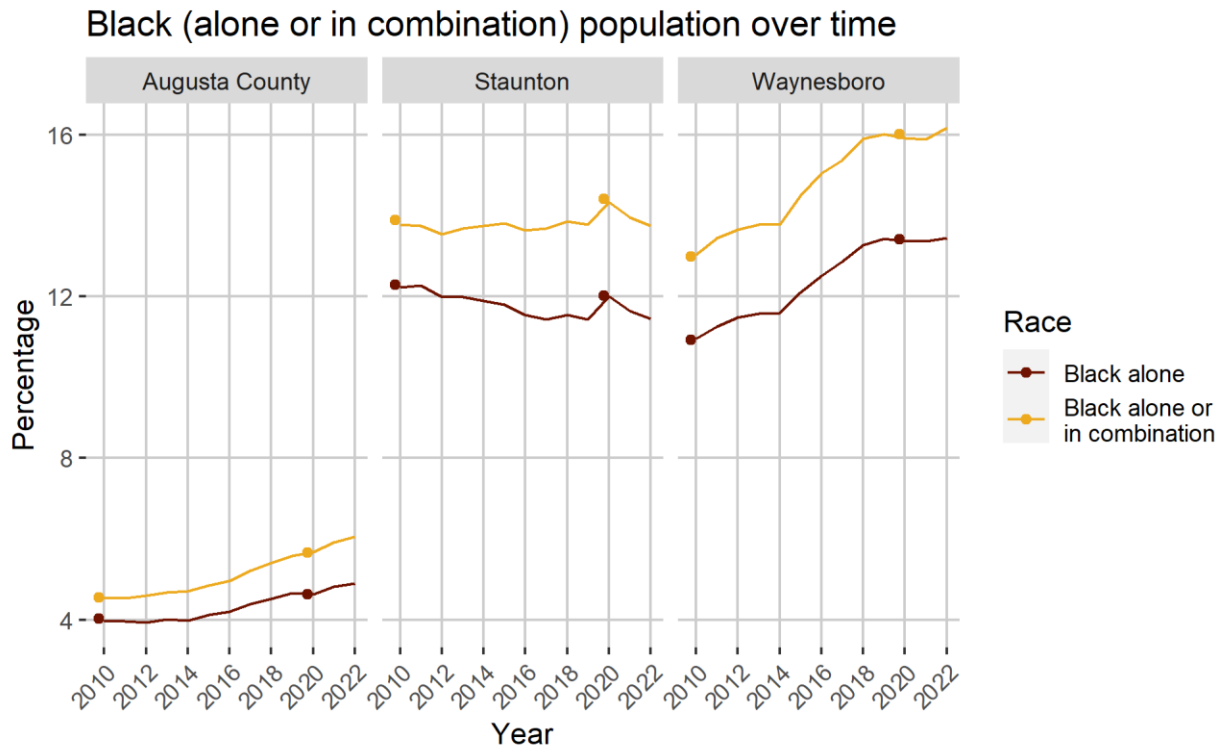
Above is a population pyramid of Staunton, showing counts of men and women in 3-year age bands (sourced from DEC-PCT12). The black line represents what the counts would have been if Staunton followed the same distribution as Virginia as a whole (calculated for each sex-by-age category as the proportion of Virginians who fall in that category, times the population of Staunton). Note that Staunton has a smaller share of children than other areas in the state; that it has a larger share of older residents (sixties and over); and that it has a large spike of young women ages 18-20 (representing Mary Baldwin students).

Appendix B: Further Detail on Race and Ethnicity

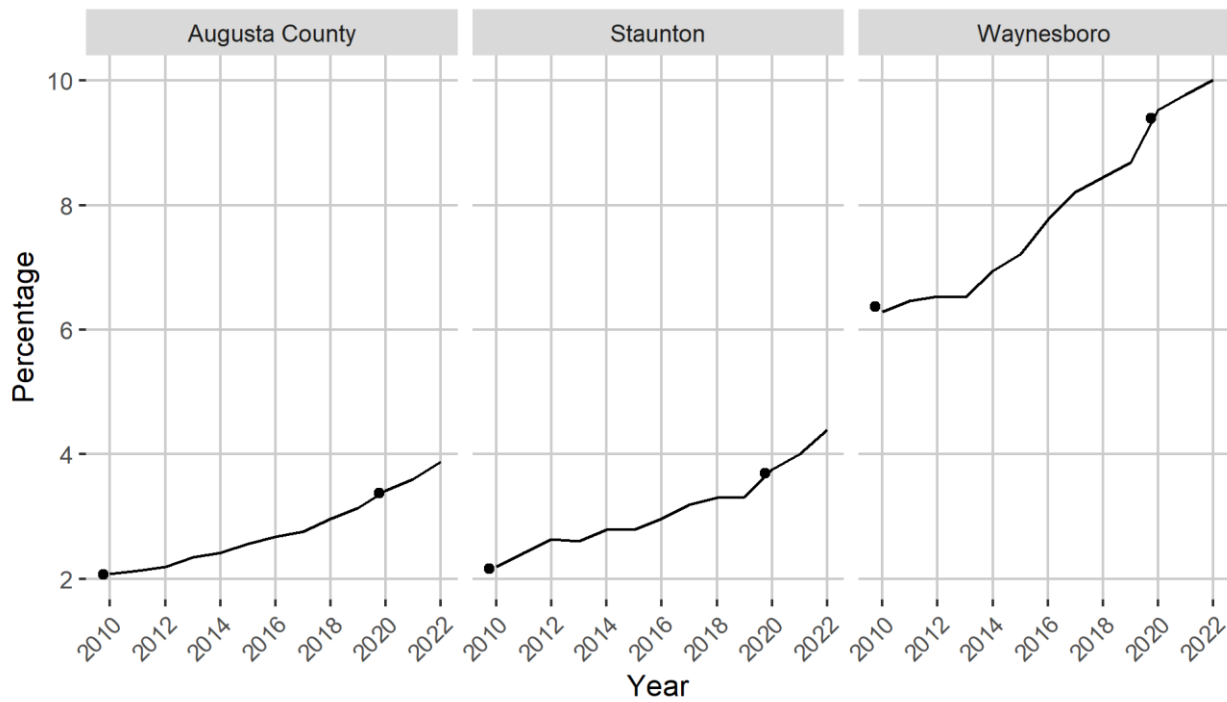
Data for this appendix is per the Census Bureau's Population Estimates Program^{72, 73, 74}. The PEP uses a combination of decennial census data, ACS data, and demographic analysis (records of births, deaths, and migrations from administrative data sources) to get relatively precise, yearly estimates of the number of people in every county in the United States, both in total and in various subgroups. Unfortunately, the administrative data on which the Census Bureau relies does not include an option for "some other race," meaning that the PEP uses different race categories than the ACS or decennial census. Thus, for instance, the decennial census found that roughly 6% of Staunton residents identified as two or more races. PEP estimates say that only 3.4% identified that way, which is approximately the percentage you get when you deduct the people who identified as two races, including "some other

race,” from the decennial counts. The Equity Commission believes that the PEP figures are generally reliable; they simply can’t be compared with decennial census or ACS estimates since the categories used differ.

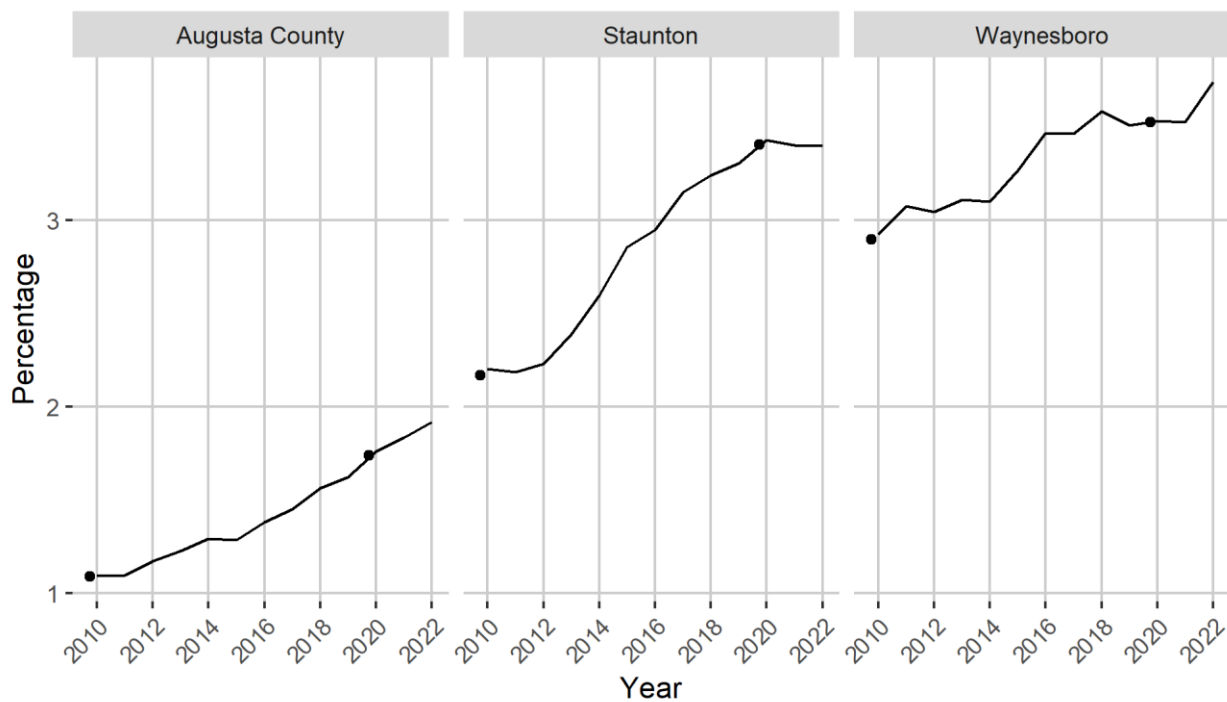
With that said, the following graphics illustrate the trend in race identification in Staunton, Augusta, and Waynesboro.



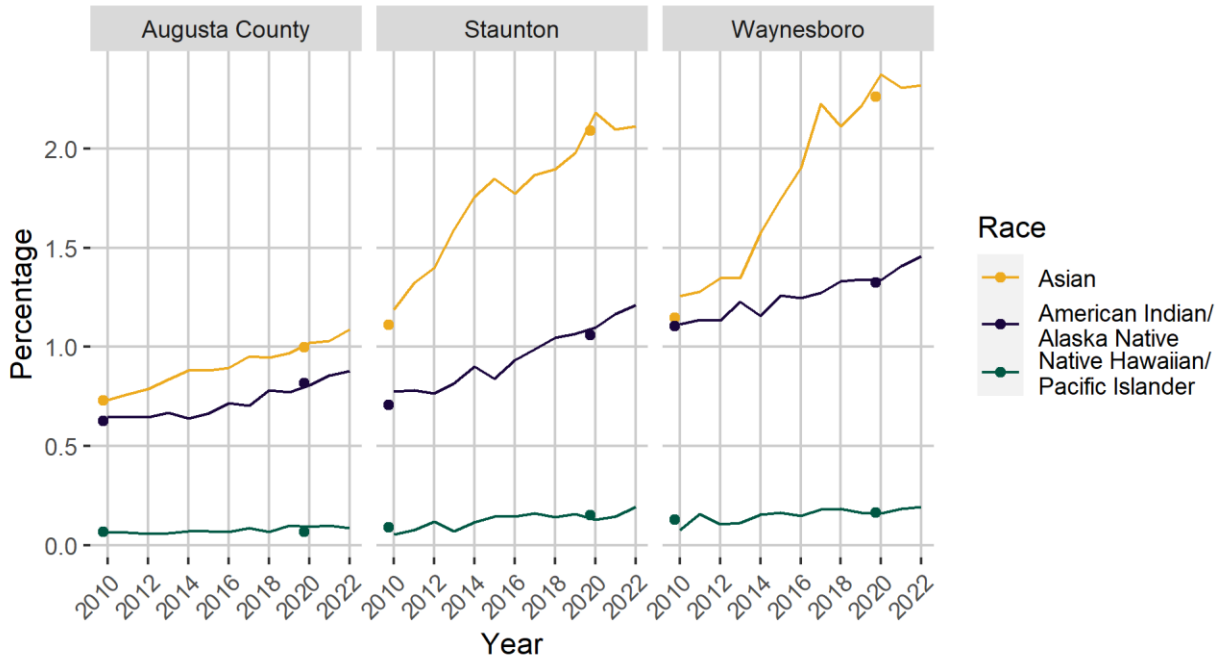
Hispanic population over time



Population of two or more races over time



Asian, American Indian/Alaska Native, and Native Hawaiian/Pacific Islander (alone or in combination) Population Over Time



Note first of all that Staunton is far more racially diverse than Augusta County; it is comparable in racial diversity to Waynesboro but has a much smaller Hispanic and Latino population. In Staunton, Augusta, and Waynesboro, Hispanic, American Indian/Alaska Native, and Asian American populations have increased; this increase has been especially dramatic among Asian and Hispanic residents in Staunton and Waynesboro. The proportion of people in Staunton who are Black has held steady, while the corresponding proportion for Waynesboro has increased. Rates of identification as two or more races have increased across the entire region, in line with national trends.

Appendix C: Additional tables

Table 1: Population Comparison, Staunton, Augusta County, Waynesboro

	Staunton	Augusta County	Waynesboro
Population	25,750	77,487	22,196
<i>In Households</i>	24,335	74,483	21,920
<i>In Group Quarters</i>	1,415	3,004	276
Number of Households	11,374	30,233	9,557
<i>People living alone</i>	4,322	7,257	3,141
<i>Couple households</i>	5,167	18,792	4,518
<i>Households with children</i>	2,710	8,359	2,686
Number of Families	6,200	21,319	5,754

Source: Decennial census, tables DP1, PCT10, PCT15, PCT16, and H15.

Table 2: Socioeconomic Status Comparison, Staunton, Augusta County, Waynesboro, Virginia

	Staunton		Augusta County		Waynesboro		Virginia		Source
	Value	MoE	Value	MoE	Value	MoE	Value	MoE	
Median income:									
Personal	\$34,292	\$2,337	\$38,427	\$1,490	\$34,858	\$2,301	\$42,964	\$172	S2001
Household	\$53,041	\$4,449	\$69,082	\$2,561	\$47,238	\$6,024	\$80,615	\$377	S1901
Family	\$72,114	\$9,118	\$81,269	\$3,402	\$65,619	\$9,413	\$98,771	\$570	S1901
Gini coefficient	0.458	0.032	0.405	0.019	0.477	0.045	0.470	0.002	B19083
Homeownership rate	56.4%	N/A	78.6%	N/A	57.9%	N/A	64.9%	N/A	H10
Poverty rate	12.3	2.3	8.4	1.2	16.6	3.7	9.9	0.2	S1701
Education									
Less than high school	8.4%	1.66	10.6%	1	12.3%	2.76	9.2%	0.14	S1501
High school	32.4%	2.7	40.8%	2	35.5%	3.3	23.8%	0.2	
Some college	20.6%	2.1	19%	1.7	17.3%	2.5	18.7%	0.2	
Associate's degree	8.3%	1.6	7.1%	0.9	6.9%	1.9	7.9%	0.1	
BA/BS	17.8%	2.3	14.8%	1.4	17.5%	2.2	22.8%	0.2	
Grad school	12.5%	1.5	7.7%	0.9	10.4%	2.4	17.6%	0.2	
Note: Personal income includes only earnings (omitting other kinds of income) and is the median among people who had earnings. All figures are from ACS 2021 5-year estimates.									

Table 3: Socioeconomic Status By Race

	White		Black		Asian		Hispanic		Source
	Value	MoE	Value	MoE	Value	MoE	Value	MoE	
Unemployment rate	4.7%	1.5	8.7%	6.7					S2301
Poverty rate	11.7%	2.4	18.5%	8.7			22%	15	S1701
Income									
Personal	\$36,068	\$2,280	\$26,310	\$9,003	\$21,944	\$12,835	\$17,780	\$4,658	B20017A-I
Household	\$55,385	\$5,239	\$38,935	\$18,887			\$60,625	\$29,646	S1903
Family	\$76,591	\$8,904	\$49,848	\$26,976	\$60,000	\$24,642			B19113A-I
Education									
Less than high school diploma	7.4%	1.6	13.7%	5.1	Note: Certain values have been omitted due to unreasonably large margins of error. Cells for these values are grayed out. Margins of error for education statistics were computed per approximation formulae recommended by the Census Bureau (U.S. Census Bureau 2022). Personal income refers to earnings, and is the median among those with earnings. Data is from 2021 ACS 5-year estimates.				C15002A-I
High school/GED	31.4%	2.5	47.7%	8.5					
Some college or associate's degree	28.7%	2.5	27.1%	8.1					
Bachelor's degree or higher	32.5%	2.6	11.5%	4.7					

Table 4: Population with a Disability

	Population	MoE	Percent	MoE
Any disability	3,787	466	15.3%	1.9
With a hearing difficulty	859	191	3.5%	0.8
With a vision difficulty	782	177	3.2%	0.7
With a cognitive difficulty	1,599	339	6.9%	1.5
With an ambulatory difficulty	1,929	325	8.3%	1.4
With a self-care difficulty	836	244	3.6%	1
With an independent living difficulty	1,428	255	7.2%	1.3
Note: Percentages are of the population to whom the disability type applies, not of all Staunton residents. Some disability types don't apply to very young Stauntonians – children are not asked about independent living difficulties – and people in institutional group quarters are excluded. Source: ACS-S1810. ⁷⁵				

Appendix D: Community Partner Information Collection Survey (Fall 2022)

Organization Name:

Organization Address:

Website link:

Summary of Service(s) provided:

Constituents that your organization supports:

Point of Contact:

Name:

Email:

Phone:

What information does your organization have that can help the Commission understand the current profile of Diversity, Equity and Inclusion (DEI) in the City of Staunton (check all that apply)?

Reports, including annual, project and special reports

External Resources

Current Programming that Supports DEI Initiatives

Other (please identify)

Would you be willing to share the original source data on which you based your reports?

Yes

No

Not applicable

Was the original data internally or externally generated?

Internal

External (please identify sources)

Not applicable

At what geographic level is the information available (check all that apply)?

City of Staunton

Regional – Cities of Staunton and Waynesboro, Augusta County

State

National

Other (please identify)

Not applicable.

Based on your organization's experience in the Staunton community, do you have any ideas, recommendations, or points of concern that you would like to share with the Commission?

May a Commission member contact you for further information regarding your survey responses?

Yes/No

Please attach all documents, data, studies, reports, links for more information, etc. via email to dei@staunton.va.us. Please direct your submissions to the attention of the Data and Research Subcommittee.

Thank you for your contribution to the Diversity, Equity, and Inclusion Commission's research.

Appendix E: Generic Community Partner Interview Guide

DEI mission (online version):

We have been invited to serve on this Commission for 18 months for a very specific purpose. We are tasked with objectively evaluating all available data concerning social and racial equity and conducting a series of community listening sessions to foster community dialogue. At that point, the Commission will summarize all findings and provide City Council with specific recommendations on how to address inequitable social and racial outcomes within the City of Staunton.

The goal of this interview is to:

1. Identify objective information, relative to our mission. This includes information on diversity (protected classes) and equity (distribution of scarce resources), as well as recommendations for achieving greater inclusion (equitable access to scarce resources).
2. Objective information may be generated by the interviewee and/or external sources.
3. Enable access to that information.
4. Acquire knowledge of our community that may be useful for the Commission.
5. Recommendations for improving DEI in our community.
6. Establish an ongoing relationship with the Commission.
7. Acquire suggestions for improving the work of the DEI.

Introductions / Preliminary Information:

Date

Time: begin

close

Setting

Names of interviewees / Departments, etc.

Name(s) of interviewer(s):

Interview Guide:

A. Information

1. Please describe Departmental programming that addresses DEI issues.
2. What Departmental information is available that can help the Commission understand DEI in the City of Staunton?
 - This may include information generated either within the Department or by external sources, and may come in the form of:
 - Reports, including annual and project reports
 - Internally collected data (text / numerical)
 - External resources
 - Current programming that Supports DEI Initiatives
 - Other
 - This should include information on “diversity” (description of distribution of services and resources to protected classes). Protected classes include:
 - race/ethnicity;
 - socio-economic status;
 - age;
 - gender / sexual orientation;
 - family status;
 - disability status;
 - veteran status;
 - health status;
 - religion.
 - This should also include information on “equity” (measuring resource accessibility for protected classes), which may include access to Departmental services as well as general access to resources and services in the community. The Commission has identified several resources of special interest:
 - education;
 - economic opportunity;
 - health;
 - housing;
 - transportation;
 - city services.
3. At what geographic levels are these data available?

City of Staunton / SAW region / State / National / Other
4. Is this information accessible / publicly available?
5. Are you willing to share the original, source, data on which you based reports?

6. Is there any information/data that you wish that you had, but don't, in order to fulfill your mission in Staunton?

B. Referrals

1. What other stakeholders do you work with that we should speak to?

C. Advice / Recommendations

1. What ideas do you have for the Commission's engagement with our community?
2. What is the best platform to conduct discussions with our community?
3. Of the people that you serve, are there barriers of which you are aware to the services that you provide (access, inclusivity, etc.)?
4. What recommendations do you have for the Commission going forward?

Issues:

Recommendations:

Appendix F: DEI Listening Session Survey

Thank you for having an interest in attending in the Diversity, Equity and Inclusion listening sessions. We ask that you complete the survey below to the best of your ability. This is an anonymous survey, but if you wish to share your information with us, please indicate that you are willing for the Commission to reach out to with additional questions.

1. How long have you lived in Staunton City? Would you overall perceive your experience in the city as positive or negative? Elaborate. Do you feel as if Diversity, Equity, and Inclusion have played a role in shaping your experience? Elaborate.

2. What useful resources does the city have/offer that you are aware of? How is this resource useful/beneficial to you?

a. For example: organizations, volunteer work, public entities

b. Have you considered how it may be useful to other individuals who may share different identities than you (race, age, ethnicity, ability, sexual orientation, gender etc.)

***Barrier definition - "an obstacle that prevents movement or access"**

3. Have you encountered any barriers in your time as a Staunton City citizen? -This could be physical (entrance ramps, elevators, accessibility), societal (under-representation, discrimination, conflict, stereotyping, etc.) or another obstacle you feel has interfered with your every-day life activities and personhood?

a. If you have not encountered any personally, have you seen this happen to anyone else you know (seen in workplace or in passing)? b. Why do you think this occurred? Did anything stand out to you about the interaction?

***Equity = Fairness**

4. Equity is about making sure people get access to the same opportunities. Do you as a Staunton City citizen feel like our city promotes access to everyone, regardless of identity? Why or why not?

a. What barriers interfere with everyone getting the same opportunities? What makes the city equitable- give an example.

5. In the next 5 years, how would you want to see the City of Staunton develop within Diversity, Equity, and Inclusion? What are some practical steps the city can start working on now to get there?

Appendix G: Community Business Survey

Dear Staunton Business Owner,

Staunton City Council appointed the City's first Diversity, Equity and Inclusion Commission on May 26, 2022. The Commission is initially charged with objectively evaluating existing data, studies and reports concerning social and racial equity and their social determinants within the City of Staunton.

The Commission would like your support in gathering valuable information to build the foundation for a report to the City. The Commission is initially interested in data focused on education, housing, socio-economic, health, and transportation equity. We will consider how access to these resources varies among families, racial and ethnic groups, socio-economic classes, disability statuses, religious groups, veterans, mental health statuses and age groups. In addition to this data, we would like to hear your ideas on ways to make Staunton a more inclusive community.

Attached is a brief survey to identify the data that you have available to share with the Commission. After completing the survey, you may share additional information by emailing dei@staunton.va.us. Please direct your submissions to the attention of the Logistics & Planning Subcommittee.

If you have any questions or need further clarification as you complete the survey, please send any questions to dei@staunton.va.us.

Thank you for your support in building a more inclusive Staunton.

Sincerely,

Sabrina Burress

Chair, City of Staunton Diversity, Equity and Inclusion Commission

Business Name:

Number of Employees:

Please share your experience opening & running a business in Staunton. Include any relevant information regarding acquiring and renewing your business license, communicating and collaborating with City departments, etc.

Please share your organization's challenges and successes with accessibility & ADA compliance. Include any relevant information regarding alteration of structure, providing additional services, or changes to day-to-day operations.

What is your organization's experience with Diversity, Equity & Inclusion (DEI)? Please share how your business may incorporate DEI in its mission or vision, training programs, handbook, hiring and employment practices or product/service variety.

Would you be willing to share additional information about DEI and your business?