

FAIRFAX COUNTY

Health outcomes vary greatly across Fairfax County. Life expectancy at the census tract level ranges from 76.5 years to 91.1 years. Such stark health disparities reflect not only differences in access to health care but also the social and economic conditions that are important to health. There are many "islands of disadvantage" in Fairfax County, where schools lack adequate resources and many residents have limited incomes and struggle to obtain good jobs, health insurance, housing, and other conditions important to health.

As a result, the risk of dying prematurely—before age 75—differs dramatically across the county. Researchers from Virginia Commonwealth University, examining data for 2015–2019, found that the risk of dying prematurely in Fairfax County differed more than 6-fold across census tracts—from rates as low as 73.1 per 100,000 in census tract 4922.02 in South Run to as high as 458.3 per 100,000 in tract 4516.01 in Bailey's Crossroads (**Figure 1**).

Residents of areas with adverse living conditions and high mortality rates are more likely to be people of color and immigrants. The disparity results from the region's history of segregation and systemic racism and from ongoing policies that continue to systematically block access to opportunities for good health and that increase exposure to health hazards. In Fairfax County, the premature death rate among Black residents was 221.0 per 100,000 in 2015–2019, 33% higher than the rate among White residents (165.8 per 100,000) (**Figure 2**).

Disadvantaged neighborhoods often exist in close proximity to more affluent areas. For example, census tract 4306.00 in Springfield is two miles from tract 4202.01 in Franconia but its premature mortality rate in 2015–2019 was almost twice as high. Education, poverty, and other important determinants of health vary dramatically between these tracts (**Figure 3**) as does their racial and ethnic composition.

During 2015–2019, two out of three premature deaths in Fairfax County were avoidable.

In 2015–2019, the leading causes of premature deaths in Fairfax County were cancer, heart disease, suicide, drug overdoses, and stroke. Most of these deaths were avoidable, either through preventive measures or treatment, but access to such services is limited. In Fairfax County, two thirds (66%) of the 10,469 premature deaths that occurred in 2015–2019 were avoidable.

During 2020–2021, Fairfax County experienced 1,059 deaths from COVID-19, making it the third leading cause of premature death in the county. Fairfax County accounted for 45% of COVID-19 deaths in Northern Virginia. Not surprisingly, many of the "islands of disadvantage" experienced higher COVID-19 death rates.

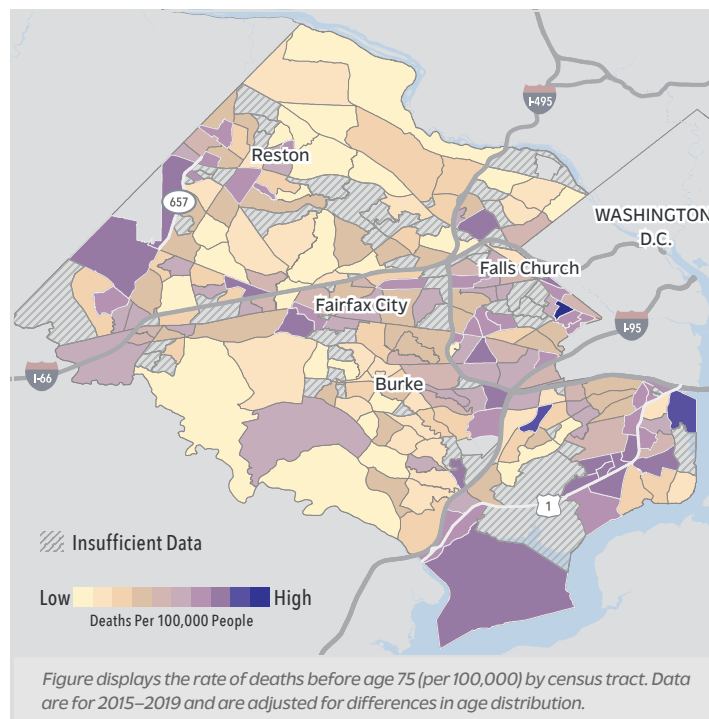


Figure 1. Premature death rates in Fairfax County during 2015–2019 varied starkly by census tracts

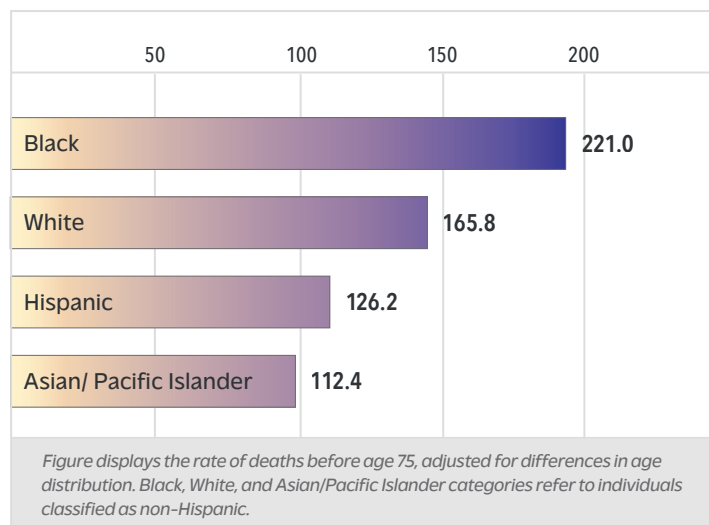


Figure 2. Premature death rate (per 100,000), Fairfax County, 2015–2019

These high levels of avoidable death signal the need for stronger efforts to broaden access to health insurance and to high-quality, affordable primary care, preventive services, and treatments for chronic disease. Access to mental health and substance abuse services is also vital, underscoring the need to address deficiencies in the local behavioral health system, shortages of mental health professionals, and the heightened demands created by the COVID-19 pandemic. Local public health departments, on which the community relied during the pandemic, are chronically underfunded. They need adequate resources to provide ongoing services and to remain prepared for future health emergencies.

Disproportionately high mortality rates among people of color, and their over-representation in marginalized neighborhoods in Fairfax County, offer yet another reminder of the need to address the legacy of systemic racism and to work proactively to dismantle structural factors in our communities that block doors to opportunity.

The opportunity for good health should be available to all residents of Fairfax County, and reducing inequities is also good for the economy. Both government and the private sector should redouble their efforts to improve access to education, good jobs that pay livable wages, and affordable food, housing, health care, transportation, and child care. Until this occurs, the risk of dying prematurely in Fairfax County will continue to depend on one's ZIP code.

Figure 3. Premature death rate (per 100,000), Fairfax County, 2015–2019

