



Northern Virginia Health Foundation

# 2021 Community Report

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# ABOUT NVHF

Since its inception in 2005, the Northern Virginia Health Foundation has been dedicated to improving the health and well-being of residents of Northern Virginia, particularly those who are low-income, uninsured, or underinsured.



# LETTER FROM CEO & BOARD CHAIR

**A Letter from Patricia Mathews and Judy Feder, Northern Virginia Health Foundation**

As we reflect on the Northern Virginia Health Foundation's first 16 years of service, we do so with a stark realization: At no point in recent history have the health challenges faced by people with low incomes, the uninsured, and the under-insured achieved so much public awareness.

The COVID-19 pandemic was an eye-opener like no other. For some, it illuminated the importance of our state, local public health departments, and their role in containing deadly viruses and protecting the community's health. Many saw how our fragile social safety net struggled to remain intact through forced shutdowns and expensive yet necessary investments in personal protective equipment.

Yet, for a large majority of people in our region, the pandemic was a wake-up call to an important and unsettling reality: The opportunities to be healthy and prosper are not uniform across Northern Virginia.

While this was true before COVID-19, we believe in, and even champion, the idea that this does not have to be the reality for the future.

Since our strategic shift to include a focus on the social determinants of health in 2015, we have worked to point out poverty and racial inequities in our region, along the way debunking traditional stereotypes of what low-income communities look like and how they came to be. It has involved educating decisionmakers about community needs and working with others to change policies and practices that keep inequity in place.

Creating a healthier — and more equitable — Northern Virginia is not easy work. But it is essential — for achieving our mission, and for ensuring that the health of our most vulnerable residents does not go overlooked.

***This focus leads us to prioritize three areas in our grantmaking and operations:***

1. Stabilizing and strengthening the safety net
2. Working upstream to improve health outcomes
3. Seeking impact beyond grantmaking

**We invite you to read the rest of this report to learn how these priorities are carried out.**

We are aware that the challenge of improving the health and health care of Northern Virginians is not ours alone. We have been encouraged by our grantees and community partners, some of whose inspiring efforts to address systemic barriers in health are highlighted in this report.

Thank you for your work and for your partnership. We look forward to many more years of working together to ensure that residents of Northern Virginia have the opportunities to be healthy and prosper.



*Patricia N. Mathews*

**Patricia N. Mathews**  
President & CEO



*Judy Feder*

**Judy Feder**  
Board Chair

# OUR GRANTMAKING

## Stabilizing and strengthening the safety net

From the earliest days, the Northern Virginia Health Foundation's North Star has been helping to stabilize and strengthen those organizations and programs that provide medical homes and needed services to tens of thousands of Northern Virginia residents.

The need for basic care remains pervasive and unrelenting, in part because Northern Virginia, while having some of the wealthiest counties in the nation, also has a large population of residents with low incomes, many of whom are on Medicaid or have no health insurance at all.

Yet, the primary care and oral health safety net in Northern Virginia is relatively small. To put this in context: Our region is roughly the size of the state of Rhode Island. We have eight primary care clinics that serve as medical homes, although some have multiple sites. By comparison, neighboring Montgomery County, Maryland, alone has at least 12.

Tens of thousands of our neighbors depend on health centers like the Greater Prince William Community Health Center and health programs like Northern Virginia Dental Clinic and NOVA ScriptsCentral for high-quality health services. The Foundation has supported these and other organizations for more than a decade and, as a result, they have expanded and grown to meet the changing needs of our region.



## Greater Prince William Community Health Center



**GPW Health Center**  
Dedicated to Your Health

For more than a decade, the Foundation has provided general operating support to the Greater Prince William Community Health Center. As one of three federally qualified health centers in Northern Virginia — the others being HealthWorks for Northern Virginia and Neighborhood Health — the GPW Health Center serves an important safety-net healthcare delivery role, particularly for Northern Virginia residents who are not able to access care because they lack transportation.

Many GPW Health Center patients live in parts of the county or surrounding cities where buses run infrequently. And some don't make enough money to cover the sometimes \$80 roundtrip price for an Uber or Lyft ride. That is why GPW Health Center launched a patient transportation van service.

Patients call to schedule a pick-up and drop-off to make it to their appointment. Prior to COVID-19, as many as 300 patients utilized GPW Health Center's van services each month, many of whom could have easily missed important primary care or dental care appointments. The van service is a lifeline that allows families to use money they would have spent on gas or public transportation to purchase necessities like food, housing, and clothing.

## Northern Virginia Dental Clinic



**Northern Virginia  
Dental Clinic**

The Northern Virginia Dental Clinic (NVDC) has been able to faithfully serve our region for more than 25 years, regularly providing needed care to residents who are uninsured, live in extreme poverty, or who have never visited a dentist.

The need for NVDC's services has grown significantly since opening in 1994. By providing general operating funds, the Foundation has supported the clinic in its efforts to address this

demand in multiple ways, including opening state-of-the-art facilities in Fairfax and Loudoun counties; nearly quadrupling the number of patient visits from 3,100 in 1997 to 11,300 visits in 2017; offering more services: from diagnostics and restorative care and cleanings to all types of oral surgery, endodontics, biopsies, periodontics, and emergency care. Despite a reduction in the number of available volunteer dentists and hygienists, the NVDC remained open for emergencies during the pandemic. The clinic recognized that its clients were particularly impacted by COVID-19 and, for a time, rendered care free of charge.

## NOVA ScriptsCentral



Since 2007, NOVA ScriptsCentral (NSC), with our support, has provided over \$56 million worth of free or low-cost medications to uninsured patients in the Northern Virginia area. Yet, NOVA ScriptsCentral also recognizes that many patients need additional information about their medications, along with insights into other factors that can contribute to improving their health.

That is why NSC has been taking health education on the road, to meet people where they are and provide them with information that is both meaningful and easy to understand. Before COVID-19, NOVA ScriptsCentral held free health education sessions, including several at public libraries, housing complexes, and food distribution centers in Northern Virginia, where they addressed topics like nutrition, stress management, and mental well-being. They found that sometimes people needed guidance on how to have a conversation with their healthcare provider because their doctor told them something that they didn't really understand until after the education session. Or perhaps they wanted advice on how to persuade a family member to make a change. These conversations are important. NOVA ScriptsCentral continues to see them as a way to help people improve their health, which is why they intend to resume these sessions once all pandemic restrictions are lifted.

# Supporting upstream interventions

One area in which we have focused our attention is in supporting collaboratives that bring together those working in non-profit organizations and in local governments to identify ways to improve health outcomes. Specifically, these groups are focused on aligning or changing systems that are creating health and racial inequities. We call this work “upstream interventions” — looking at the conditions that cause the inequities in the first place, rather than waiting to create more programs to address the problems.

Our upstream work ranges from addressing policies that affect food insecurity, to creating a “community of opportunity” along the Route One corridor, where significant health, racial, and economic inequities have existed for generations. We know that efforts such as these do not change systems overnight. But starting to make those changes is the only way that systems will change.

***Here are three examples of upstream work we support:***

## Arcadia Foods



Arcadia’s work is instrumental in calling out needs and shortcomings in the region’s food system and has helped lead to policy changes. They recognized that outdated ordinances in Fairfax County restricted churches and some service organizations from planting community gardens, and also limited farmers markets to only selling produce and living plants. The Foundation’s support helped Arcadia — in partnership with the Fairfax County Department of Planning and Zoning and the Fairfax Food Council — modernize the zoning code and make Fairfax County “healthy-food-friendly.” As a result of these changes, farmers markets can now sell a broader selection of goods (e.g., from meats to jellies and jams to soaps and dried flowers) and siting is now easier for both farmers markets and community gardens in the county.

## Arlington Free Clinic



Arlington Free Clinic, Arlington County Public Health Department, Virginia Hospital Center and Virginia Hospital Center Pediatrics (formerly Arlington Pediatric Center) collaborated to develop a tool to screen their patients for the social determinants of health, with Arlington Free Clinic serving as the grantee for this effort. Prior to the pandemic, all of the partners found that issues of food insecurity, housing, and transportation were common concerns among their patients. The pandemic exacerbated those concerns and a new issue also emerged - digital access. In 2019, with the data they collected, the collaborative was successful in advocating for Arlington County to direct additional resources to address food insecurity in the community. Collaborative members plan to do similar advocacy in the coming months on the issues of transportation, housing, and digital equity. Arlington Free Clinic, along with other collaborative members, also plan to work with the County’s Chief Race and Equity Officer to ensure that community residents are included in developing both short- and long-term solutions to identified needs.

## United Community



United Community serves as the hub for a collaborative comprised of a number of community organizations that are pushing for changes along a portion of the Route One corridor (Richmond Highway) that runs through Fairfax County. Aided by community residents, the collaborative did an assessment of community assets and challenges,

and is focusing its attention on social problems that community members are facing, among them unstable housing, food insecurity, lack of transportation, and inadequate access to child care. With Foundation support and with United Community providing staffing, the “Communities of Opportunity” initiative was started in 2019. As part of this multi-phase process, community members sit on a steering committee along with Fairfax County officials and nonprofit stakeholders in the area. Together, they identify pressing community issues, and have begun to find ways to address them.



# SEEKING IMPACT BEYOND GRANTMAKING

Over the past 16 years, we have spent significant time in work we call “beyond grantmaking” — developing relationships with local government and community stakeholders, participating in their meetings, convening others, acting as neutral brokers. And we continue to be committed to working with our region’s health officers, non-profits, and other community stakeholders to identify ways to work collaboratively across jurisdictions.

*Our beyond grantmaking work comprises three important actions, each of which has helped make significant inroads toward developing solutions to our region’s pressing health problems:*

- Commissioning research
- Engaging in community-based partnerships
- Convening regional leaders and community members

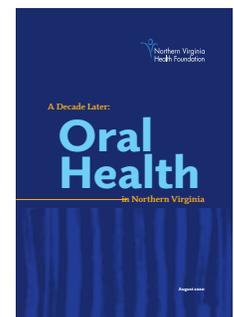
We do this work because we view ourselves as a strategic partner, not simply a funding source. We know that if we were to spend our entire portfolio in one year, we could never achieve the changes in systems that are needed to eliminate health, racial, and economic inequities.

# Commissioning research

Beyond our core grantmaking, we funded key research on the health needs and other inequities in the region and, for the first time, looked at these issues at the census tract level. These data were groundbreaking for our region because they helped local governments and community stakeholders to more clearly pinpoint areas of need and begin to refocus programs, policies and resources to address those needs.

That was what happened in 2020, when U.S. Senator Mark Warner (D-VA) convened a meeting to talk about the challenges and health inequities of Northern Virginia. About three-quarters of those in attendance represented our grantees. The loud and clear consensus in that meeting was that data at the ZIP code level too often masked the inequities present in those ZIP codes, and that data at the census tract level was essential to understanding the issues being faced by those who live in our region.

We also saw data driving action again after we released [\*Oral Health in Northern Virginia: A Decade Later\*](#), the follow-up to the region's first-ever oral health survey, which the Foundation released in 2011. *A Decade Later* examined the difficulties that many people with low incomes face getting oral health care in Northern Virginia. Thanks to the tireless work of Virginia Health Catalyst, a strategic partner of the Foundation, along with data from our oral health report and other data from throughout the Commonwealth, the Virginia General Assembly approved a dental benefit for adult Medicaid enrollees, a significant victory that will improve oral health for thousands of residents in our region.



## Uncovering inequity in Northern Virginia: A closer look at the research

Since 2016, the Foundation has partnered with the Center on Society and Health at Virginia Commonwealth University to release publications that provide census tract views of health throughout Northern Virginia. These reports highlighted stark inequities in the region, explored the historical context behind them, and armed local governments and nonprofits with information to make stronger cases for needed programs and support.

- In 2021, [\*Deeply Rooted: History's Lesson for Equity in Northern Virginia\*](#), chronicled Black experiences in Northern Virginia over the past 400 years and explored the historical roots of the region's "islands of disadvantage".
- In 2019, the issue brief [\*Measuring Opportunity\*](#) unveiled the Healthy Places Index, a single measure for community health that helps outline the impact that social and environmental factors have on health and well-being.
- In 2017, [\*Getting Ahead: The Uneven Opportunity Landscape in Northern Virginia\*](#) revealed 15 "islands of disadvantage," where people face multiple, serious challenges, and are interspersed among some of the region's wealthiest communities.
- [\*A Study in Contrasts: Why Life Expectancy Varies in Northern Virginia\*](#) was released in 2016 as a first-of-its-kind-report. It found that babies born a 30-minute drive apart in Northern Virginia face as much as a 13-year difference in average life expectancy because of their race, income, education, and other factors. An interactive mapping tool released alongside the report continues to provide decisionmakers with the ability to see differences in health in a way they never have before.

# Engaging in community-based partnerships

Across the region, Foundation staff participate in many community-based partnerships — coalitions of citizens working together on important health priorities in their communities, such as health equity, oral health, childhood obesity, and suicide prevention.

Some of those community-based partnerships have spurred considerable conversation and action toward making Northern Virginia healthier, and importantly, more equitable. Here are a select few:

## ONE FAIRFAX



In 2017, Fairfax County passed One Fairfax, a policy approved by the County’s Board of Supervisors and the Fairfax County Public Schools’ Board, that commits the county and schools to intentionally consider equity when making policies or delivering programs and services. Since the policy was adopted, NVHF President and CEO Patricia Mathews was invited to serve on a committee to explore ways in which to engage community stakeholders in this work. In mid-2020, Foundation staff were invited by Fairfax County Board Chairman Jeff McKay to join the

Chairman’s Task Force on Equity and Opportunity, a cross-sector partnership that explored issues of community health and wellness, cradle-to-career success, community safety and justice, and equitable communities. The task force delivered a set of recommendations to the County Board of Supervisors for engaging on issues of race in Fairfax. The work to achieve One Fairfax is still ongoing, and we are encouraged by the intentional effort to shape opportunity throughout the county so that everyone can be healthy and prosper.



*Karla Bruce, Fairfax County Chief Equity Officer*

## DESTINATION 2027



Destination 2027 began as a steering committee convened by the Arlington County Public Health Department to evaluate the community's health status and develop recommendations to improve the health and well-being of those who live, work, and play in the county. The release of the Foundation's report, *Getting Ahead: The Uneven Opportunity Landscape in Northern Virginia*, helped to focus the committee's work on educating community leaders and decisionmakers about health disparities in Arlington, where life expectancy can vary by much as 10 years. In 2019, the committee released *A Decade of Difference*, an action plan for achieving health equity in the county. Destination 2027 was instrumental in successfully advocating for the County's adoption of an equity resolution. That report is helping drive Arlington leaders to apply equity considerations in decision making across all sectors. In 2021, the committee co-chairs have met with members and staff of a number of Arlington's Boards and Commissions, and with members of the County Board to encourage them to acknowledge disparities and address issues of equity throughout county government. Since its inception, Destination 2027 has been co-chaired by former NVHF program officer Tricia Rodgers.

## SUICIDE PREVENTION ALLIANCE OF NORTHERN VIRGINIA



The Suicide Prevention Alliance of Northern Virginia (SPAN) is a regional collaboration of public and private organizations committed to raising awareness of suicide and the resources available to prevent it. While many people associate suicide with teenagers and young adults, SPAN has worked to raise awareness of suicide among older adults. With support from the Foundation, SPAN hosted workshops focused on restoring hope to older adults struggling with suicide and depression. During the pandemic, SPAN hosted a virtual event, bringing together some of the region's top mental health experts to share practical strategies to build resilience and strengthen emotional well-being at a time when many older adults lived in constant isolation. Tricia Rodgers, retired NVHF program officer, served on SPAN's Leadership Council.

Foundation staff also participate in the Northern Virginia Regional Oral Health Alliance, Alexandria Public Health Advisory Committee, the Arlington Partnership for Children, Youth, and Families Foundation, the Partnership for a Healthier Alexandria, and many other community coalitions.

## Convening regional leaders and community members

The Foundation has always valued the importance of using our ability to convene key communities of interest throughout Northern Virginia. In recent years, we've held convenings, health summits and sponsored workshops that bring together community members, regional leaders, and direct service providers.

We've watched as these convenings provide opportunity for engaged learning and candid conversation — and we've been inspired by the new insights, skills, and partnerships that have developed from them.

The Northern Virginia Community Health Summit convened more than 150 regional leaders from various sectors including health, education, and transportation. We unveiled our report and interactive mapping tool that illuminated challenges at the census tract level and opportunities to chart pathways to a healthier, stronger Northern Virginia for all. We were honored with remarks by Virginia Commonwealth University researcher and report author Steven Woolf, MD, MPH, and William Hazel, Jr., MD, former Secretary of Health and Human Resources of the Commonwealth of Virginia.



Our two SignUpNow workshops underscored our vision to “build the capacity of the Northern Virginia community to be and stay healthy.” These workshops taught service providers in Northern Virginia how to help residents and their family members sign up for Virginia’s recently expanded Medicaid insurance program.

Over the years, we have held several lunch-and learn sessions. Of particular note was one focused on building community resilience that brought together more than 80 of the region’s community leaders, including providers and mental health service specialists. During the session, Allison Sampson-Jackson, PhD, LCSW, founder and CEO of Integration Solutions, and some of the region’s leading trauma experts (pictured below) discussed what can be done to reverse the effects of trauma in Northern Virginia.



# OUR COVID-19 RESPONSE

As COVID-19 affected our region, we recognized that the communities we prioritize were the same communities being hardest hit by the pandemic. We focused our response efforts on three specific areas — helping the region’s decisionmakers create equitable emergency plans; responding to the changing needs of our grantees; and providing key information to help service providers understand the complexity of securing reimbursement for telehealth.

## **Unveiling a plan for equitable emergency responses**

As was the case across the United States, people of color and low-income families in Northern Virginia faced the greatest risks from COVID-19. Key research we commissioned through Virginia Commonwealth University (VCU) showed us that a large number of patients who would require admission to Northern Virginia hospitals, occupy ICU beds, and who could potentially die from COVID-19 were likely to be people from Northern Virginia’s “islands of disadvantage”. To help the region’s decisionmakers better prioritize the needs of these communities in their COVID-19 response plans, we released [\*The COVID-19 Pandemic in Northern Virginia: A Plan for Marginalized Communities\*](#). This issue brief, prepared by VCU’s Steven Woolf, MD, MPH, outlined key equity considerations for policymakers and highlights examples of potentially effective local strategies to help marginalized communities amid the COVID-19 pandemic.

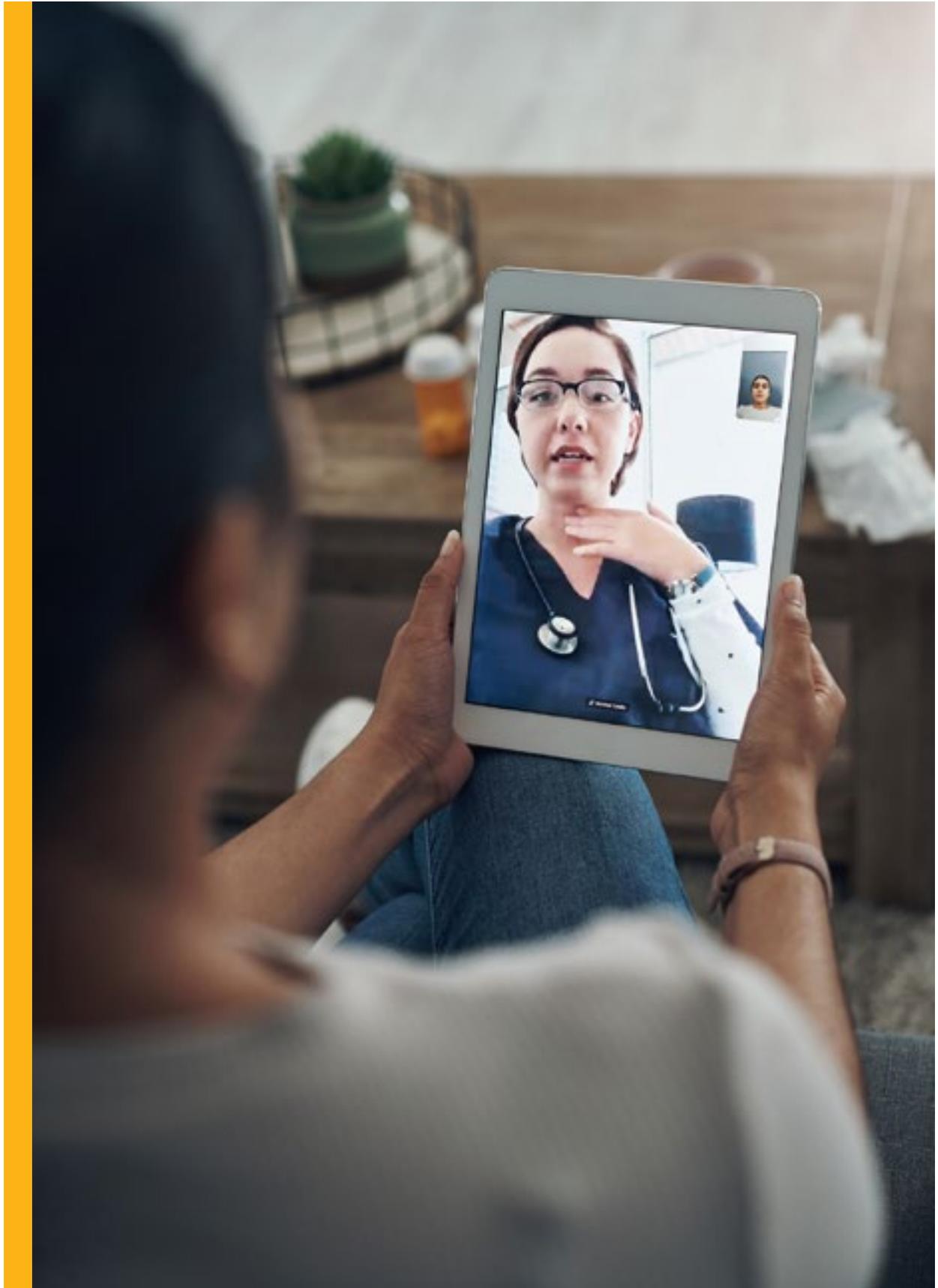
## **Responding to disruptions in grantees’ operations**

Our grantees were deeply impacted by COVID-19. Many had to adjust their operations to ensure both staff and patient safety. Telehealth became an important way to deliver care, requiring staff and patients to become comfortable with the technology.

In response, we became more flexible regarding grant objectives, activities, reporting, and timelines, offering many grantees the opportunity to reorient their funds to better respond to the pandemic and to their continuously changing circumstances.

## **Helping medical professionals understand the complexities of telehealth**

Telehealth services surfaced as an indispensable means of providing care to patients during the COVID-19 pandemic. After the Centers for Medicare & Medicaid Services took measures to make it easier for low-income residents to receive primary, behavioral, and oral health care through telehealth services, the Foundation hosted multiple webinars to help medical billing staff throughout Northern Virginia understand the complexities of telehealth. We invited healthcare consultants from Rosen, Sapperstein and Friedlander to give technical assistance presentations on various topics including the services that medical providers could perform and receive reimbursement for through telehealth; new guidelines and code descriptors for evaluation and management services; and strategies for remaining HIPAA-compliant during the COVID-19 pandemic.



# LOOKING FORWARD

In years to come, expect our investments of time and resources to continue in the areas that are key to our work: stabilizing and strengthening the safety net; working upstream to improve health outcomes and; seeking impact beyond grantmaking.

It is clear that the pandemic has exacerbated the inequities that already existed — and it will take time to not only achieve a recovery, but to eliminate the disparities that have been present for many, many years.

We see our role in Northern Virginia even more important than it was 16 years ago.

It will be critical to continue to elevate the importance of health, racial, economic and social factors that impact daily life for our region's residents — particularly those most in need.

And most of all, we will continue to stay true to our mission — to improve the health and health care of the residents of Northern Virginia, with a particular emphasis on low-income, uninsured, and underinsured residents.



# GRANTS

ORGANIZATION	TOTAL AMOUNT	YEARS FUNDED
Arcadia Food, Inc.	\$428,000	2015-2019, 2021
Arlington Free Clinic	\$3,328,350	2007-2021
Bailey's Crossroads Health Access Partnership	\$102,300	2007, 2008
Campagna Center	\$30,000	2018
Consumer Health Foundation (acting as fiscal agent for Regional Primary Care Coalition & Northern Virginia Health Services Coalition)	\$390,000	2007-2017, 2020
Cornerstones	\$85,000	2015, 2016, 2021
Ethiopian Community Development Council	\$98,500	2008
George Mason University Foundation	\$340,000	2018-2020
Greater Prince William Health Center (formerly Greater Prince William Community Health Center)	\$1,598,400	2007-2021
Greater Washington Community Foundation (to support Greater Washington Workforce Development Collaborative)	\$395,000	2007-2021
Health Systems Agency of Northern Virginia	\$25,000	2007
HealthWorks for Northern Virginia	\$1,504,688	2007-2021
Jeanie Schmidt Free Clinic (formerly Herndon Free Clinic)	\$470,357	2007-2012
Loudoun Community Health Center (renamed HealthWorks for Northern Virginia in 2012)	\$588,326	2007-2012
Loudoun Hunger Relief (formerly Loudoun Interfaith Relief)	\$85,000	2015, 2016

Medical Society of Northern Virginia	\$289,166	2007, 2013
<b>ORGANIZATION</b>	<b>TOTAL AMOUNT</b>	<b>YEARS FUNDED</b>
Neighborhood Health (formerly Alexandria Neighborhood Health Services, Inc.)	\$1,925,524	2007-2021
Northern Virginia AIDS Ministries	\$21,326	2010
Northern Virginia Community College Educational Foundation (to support the NVCC Restorative Dental Clinic)	\$262,000	2008-2013
Northern Virginia Dental Clinic	\$1,734,000	2007-2021
Northern Virginia Family Service	\$1,824,519	2008-2021
NoVa Scripts Central	\$1,421,113	2007-2021
Pathway Homes	\$73,000	2017, 2018
Primary Care Coalition of Montgomery County	\$50,000	2007
Real Food for Kids	\$100,000	2017, 2018
Rebuilding Together	\$100,000	2015, 2016
SCAN of Northern Virginia	\$183,000	2015-2018
Tenants and Workers United	\$20,000	2007
United Community (formerly United Community Ministries)	\$300,000	2018, 2019, 2021
Virginia Health Catalyst (formerly Virginia Oral Health Coalition)	\$62,000	2012-2021
Virginia Health Care Foundation	\$15,000	2018
Virginia Hospital Pediatric Center (formerly Arlington Pediatric Center)	\$1,612,350	2007-2021
Washington Regional Association of Grantmakers	\$126,000	2007-2021



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