

26-312 - Att.A -
2026 Human
Services Needs
Assessment

Introduction

The 2026 Albemarle County Human Services Needs Assessment constitutes an attempt to understand the needs of Albemarle County community members and the existing resources and strengths to address these needs.

The Assessment is created by reviewing data in broad categories of community well-being, critical partner interviews, and conversations with internal expert providers within the Department of Social Services. While substantial data is reviewed and considered, data points selected for inclusion in the assessment are intended to be representative or emblematic of larger pools of information. This assessment is not a full-scale discussion of all available community-level data, though future iterations may be expanded to include additional categories or larger scope of analysis.

Finally, this community benefits from a number of organizations gathering and reporting out on community well-being. As a result, this assessment draws heavily on existing reports including The Orange Dot Report, data from the regional Criminal Justice Planner, the Mobilizing for Action through Planning and Partnerships (MAPP), Community Health Improvement Plan (CHIP), the Blue Ridge Area Coalition for the Homeless Point-in-Time Count, the Comprehensive Regional Housing Study and Needs Assessment, the United Way Asset-Limited Income-Constrained Employed (ALICE) report, and many others.

Ways to use a Human Needs Assessment

Human services needs assessments may be used in multiple ways. Localities use them to keep track of chronic community conditions and to identify emerging trends. They may be used to monitor and report out on changes in a given category of well-being, particularly after a service intervention, significant investment, or relevant policy change has occurred. Human services needs assessments may be used to inform strategic-planning, demonstrate need to external funders, and clarify legislative advocacy agendas. Finally, they may be used to determine priorities for funding and policy activities, as is recommended in this assessment.

Alignment with the Albemarle County Strategic Plan 2024-2028

The Albemarle County Strategic Plan for 2024-2028 reflects a deep interest in the well-being of Albemarle County community members in the six broad goals:

- 1) Nurture a safe and healthy community.
- 2) Design programs and services that promote an equitable, engaged and climate-resilient community.
- 3) Invest in infrastructure and amenities that create connection, opportunity and well-being.
- 4) Encourage a vibrant community with economic and recreational opportunities that serve all community members.
- 5) Support exceptional educational opportunities.

- 6) Recruit and retain engaged public servants who provide quality government services to advance our mission.

This assessment is strongly aligned with the strategic plan and specifically responsive to:

Safety & Well-being Goal #1:

- *1.1 Support community safety through highly responsive services*
- *1.2 Enhance and develop human services initiatives to assist community in accessing existing resources*

Resilient, Equitable and Engaged Community Goal #2:

- *2.3 Foster community partnerships and engagement around county priorities*

Quality of Life Goal #4:

- *4.3 Implement Housing Albemarle*

Context

This assessment draws upon data and reports that were conducted in relatively recent history in order to provide the most relevant context.

It is important to note that the post-pandemic context has been further challenged by rapid changes in human service policy at the federal level. This has resulted in fewer households eligible for assistance and reductions in the actual amounts of assistance for those folks that do qualify. Changes and misinformation about these changes has impacted recipients and providers alike.

Community-based providers and staff in the Department of Social Services report that families and individuals presenting for services have a more acute need and a more complex set of interconnecting needs than has been the case in recent years. This calls for a more concentrated and coordinated effort to resolve needs.

It is also important to note that the burdens described in the datasets below are not shouldered the same across demographics in our community. With few exceptions, people of color, and particularly members of the Black community, are disproportionately impacted by the concerns and challenges that follow. This calls for the inclusion of culturally responsive services in our collective responses as a baseline.

Financial Need

While a significant majority of families in Albemarle County do not struggle with financial need, many families do struggle making ends meet. There are two populations that are of particular concern – those that live at or below the federal definition for poverty, and those that are working but limited by income and assets. The overall poverty rate for Albemarle County is 8.8% or approximately 10,415 individuals – 6.8% of people under 18 years, 10.1% of people between 18 and 64 years, and 7.4% of people over 65 meet the federal definition of poverty.

The [‘Orange Dot Report 6.0’](#), a study of family self-sufficiency in the region, was produced by the University of Virginia Center for Community Partnerships in October 2024. This update reported that 5,010 families, or 18% of Albemarle County households, do not earn enough to afford the essentials of life including food, housing, clothing, utilities, or the resources needed to work traditional jobs, including transportation or childcare. Authors of The Orange Dot report calculate \$63,321.53 per year is the income threshold required to meet basic needs in this region, identified as the ‘self-sufficiency standard’ for 2024.

While these 5,010 households live in all areas of the county, the Hydraulic and Oak Hill/Southwood neighborhoods have the highest percentage of households unable to meet this self-sufficiency standard, while the Hollymead neighborhood has the lowest.

[United Way studies and tracks families](#) that are struggling financially but do not meet the federal definitions for living in poverty. This group, called ALICE (Asset-Limited Income-Constrained Employed), serves as a proxy for families of concern across the country.

United Way data for calendar year 2023, the last year in which data was collected, shows that 29% of Albemarle County households meet the ALICE definition and 8.8% meet the federal definition of poverty. Not all families experience financial struggle the same:

- A disproportionate percentage of ALICE households are Black, Hispanic or multi-racial
- A disproportionate percentage of ALICE households are headed by single adults, have heads of household under 25 or over 65

In Albemarle County, the highest percentage of households meeting the ALICE definition (44.7%) live in the Jack Jouett District.

ALICE Households by Magisterial District for the 2023 Reporting Year						
	Jack Jouett	Samuel Miller	White Hall	Rio	Rivanna	Scottsville
Total households	6,158	7,151	7,365	8,633	7,837	7,922
Households in poverty	753	459	544	773	277	586
% poverty	12%	6%	7%	9%	4%	7%

# of ALICE households	2,753	1,883	1,635	2,517	1,787	2,336
% ALICE households	44.7%	26.3%	22.2%	29.2%	22.8%	29.5%

[Feeding America tracks data](#) on food insecurity rates by locality. Food insecurity is [defined by the USDA](#) as lack of access, at times, to enough food for an active, healthy lifestyle.

Food insecurity in Albemarle County is growing. The table below reflects people and percentage of population:

Food Insecurity in Albemarle					
Reporting Year	2023	2022	2021	2020	2019
Number of food insecure individuals	11,860	10,930	7,570	8,310	9,200
% individuals food insecure	10.4%	9.7%	6.8%	7.6%	8.6%
% above SNAP threshold	53%	53%	46%	46%	49%

Community members struggling with food insecurity meet their needs in several ways in Albemarle County, including federal food assistance, in the form of SNAP benefits, and local food distribution centers. Federal policy changes have decreased the number of households eligible for SNAP benefits and reduced the *amount* of the benefit for those that do qualify. In May 2026, there were 8,975 individuals receiving SNAP in Albemarle.

During FY2025, the Blue Ridge Area Food Bank distributed 3,061,542 pounds of food to Albemarle County community members. The Blue Ridge Area Food Bank tracks food bank visits for Albemarle County as follows:

Albemarle County BRAFB Visits by Fiscal Year				
FY26 (April)	FY25	FY24	FY23	FY22
338,411*	203,817	166,080	114,563	82,208

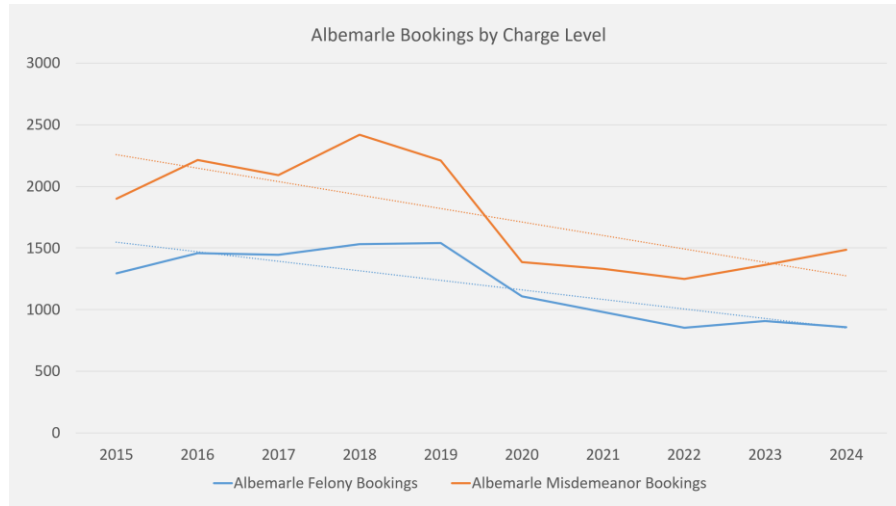
**The food distributed year-to-date for FY2026, is valued at \$4,352,417.*

Criminal Justice

Consistent with a national long-term trend, Albemarle County has experienced a decrease in property and personal crime over the last decade, including an 18.52% reduction in reported crime and a 28.15% reduction in reported arrests during this period. The [2025 Annual Jail Utilization report](#), produced by [Criminal Justice Planner Matt Vitale](#), revealed a concomitant reduction in jail intakes and a 44% reduction in bed days. Notably, the county experienced a reduction in all criminal justice metrics despite a population increase of 12.13% in the same

timeframe.

The top three crimes for which people are booked into the Albemarle-Charlottesville Region Jail are driving while intoxicated, assault, and larceny. A datapoint that will be important to watch is that, while all crime is down over the past decade, misdemeanors have increased over the last two years.



Homelessness

The [Blue Ridge Area Coalition for the Homeless \(BRACH\)](#) serves as the required lead agency for this region’s continuum of care. In this role, BRACH conducts an annual count of people experiencing homelessness, called the Point-in-Time Count, generally in January. This count serves as the basis for longitudinal data for the homelessness system of care and includes information on individuals and families, types of services used, and demographic characteristics.

During May 2026, there were 278 individuals on the ‘by-name’ list which indicates that they have completed a formal intake with the system of care, including 12 veterans and 17 people under 25 years of age. 53 of these individuals also meet the definition for chronic homelessness – their period of homelessness has been more than one year and they have a documented disability. 25.5% of the individuals identified in the annual Point-in-Time County reported their last address being in Albemarle County.

Point in Time Count

Emergency Housing

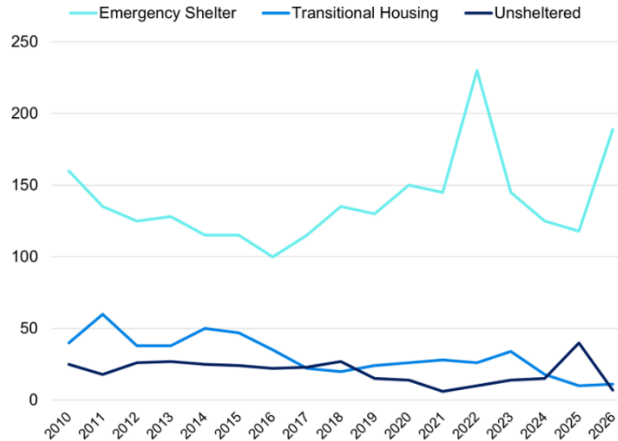
A facility that provides temporary, often overnight, housing for individuals and families experiencing homelessness.

Transitional Housing

Designed to provide homeless individuals and families with the interim stability and support to successfully move to and maintain permanent housing.

Unsheltered

Individuals who do not regularly access shelters or transitional housing programs, instead sleeping in places not meant for human habitation.



WHERE ARE OUR UNSHELTERED FROM: A DETAILED LOOK (2025)



68%

68% or 107 people on the By-Name List identify Charlottesville as the place of their Last Permanent Address



25.5%

25.5% or 40 people on the By-Name List identify Albemarle County as the place of their Last Permanent Address

Housing

Like most localities in the region, Albemarle County is facing a shortage of affordable housing. Median home sales prices continue to rise, and households pay increasingly higher percentages of their monthly income on housing costs. The United States Department of Housing and Urban Development defines any household paying more than 30% of their monthly income on housing as ‘housing burdened’ and any household paying more than 50% towards housing as ‘severely housing burdened’.

In Albemarle County, 30% of households pay more than 30% of their household income on rent: 19.6% of all homeowners pay more than 30% of household income on housing costs, while 48% of renters are rent burdened, and 50% of these renters actually pay more than 50% on housing.

The [Comprehensive Regional Housing Study and Needs Assessment](#) developed by Partners for Economic Solutions for Thomas Jefferson Planning District Commission in 2019 forecast the need for 10,870 units of affordable housing to meet the predicted needs in 2040. A similar regional housing needs assessment is in its final stages with an anticipated release in early 2027.

2026 Median Listing Price	2026 Median Sales Price	2026 Median Rent
\$630,000	\$554,083	\$2,200

Health & Well-Being

The [Albemarle County Community Wellbeing Profile](#), created by the University of Virginia Center for Community Partnerships in 2025, frames the discussion of community health through the lens of the American Human Development Index (ADHI). The ADHI assigns a numeric score to communities based on metrics of health, education, and income, as a method for understanding risks, assets, and potential for human thriving.

Albemarle County’s 2025 score was 7.3, significantly above the state’s score of 5.8.

[Broad indicators of general health](#) status include:

- Average life expectancy – 82 years
- People with disabilities – 11.4%
- People under 65 with disabilities – 6.5%
- People without health insurance – 5.8%
- People under 65 without health insurance – 7%

[Additional indicators of well-being](#) include the number of individuals receiving federal benefits such as Medicaid and SNAP, referrals for protection services such as child and adult protective services, and the number of children in foster care.

Albemarle County Family Well-Being/Child Welfare Information by Fiscal Year					
	FY25	FY24	FY23	FY22	FY21
# of individuals receiving SNAP	8,975	9,607	9,135	8,350	7,463
# of individuals receiving Medicaid Assistance	19,311	21,761	20,847	18,848	16,605
Number of children referred to CPS	1,280	1,161	870	471	406
Number of children in foster care	88	75	73	81	75
Number of adults referred to APS	567	481	429	413	494

The [Blue Ridge Health Department’s regional community health assessment](#), a component of regional health system planning, completed in 2025, names three health priorities to inform the development of the regional [Community Health Improvement Plan](#):

- 1) Chronic Health Conditions: Obesity & Mental Health
- 2) Healthcare Access
- 3) Social Drivers of Health: Healthy Food, Economic Stability, Transportation

While area providers and DSS workers report more compounded needs and higher acuity with the clients they serve, most behavioral health indicators show some mild improvement in most serious measures in recent years. The [Virginia Young Adult Survey](#) assesses 18-25 years old on a variety of behavioral health issues. Results show a decline in the use of alcohol and marijuana in this age group:

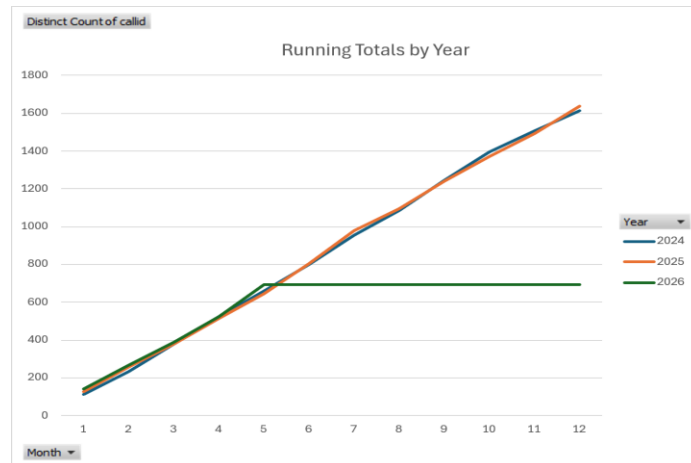
VYAS	2024	2022
Experienced depression	40%	55%
Used alcohol	60%	74%
Used marijuana	40%	34%

Despite these improvements, respondents in the Virginia Youth Survey report increases in the number and duration of sad or depressed days.

Death by [drug overdose](#) or [suicide](#) are down as well, demonstrating a degree of improvement in the most acute outcomes. The vast majority of overdoses in the county are caused by alcohol. A 2023 analysis of individuals that died by suicide in Albemarle County mirrored state and national data on suicide in many respects, including that the vast majority of suicide deaths are a result of a firearm, 41% of people who die by suicide are under 30 years of age, and 21% are over 60 years of age.

Deaths by Drug Overdose by Year				
2025	2024	2023	2022	2021
7	16	18	20	18

The Charlottesville-University-Albemarle Emergency Communications Center reports that behavioral health calls for service remain steady at slightly over 1,600 per year:



Discussion and the role of Albemarle County

While many indicators reflect positive changes in this community's well-being, the number and percentage of families that are unable to make ends meet is growing. Overall affordability is a significant concern for households with lower incomes or other forms of vulnerability including age, disability, medical vulnerability, engagement with other systems of care, and the like. This means that there are more families at risk of going without something to eat, living with significant housing instability or experiencing homelessness. Service providers in the county universally report that the people they serve have higher, more acute or compounded needs, requiring additional capacity with which to respond. This acuity marker increased significantly during the pandemic but has not returned to pre-pandemic experiences.

A second pervasive theme is related to the need for additional mental health support at all levels. Noted as the #1 priority in the regional community health assessment, this reflects a gap in the amount and type of mental health services in our community. Many individuals may be adequately served by peer support services, informal or time-limited groups, case management, and/or supportive navigation and not just clinical therapeutic interventions.

Data presented in this human services needs assessment constitute broad categories of community well-being. This community is rich with services and initiatives in every category. There are convening organizations and providers actively engaged in understanding the nuanced needs of community members and creating appropriate community interventions.

Albemarle County has a role to play in many of these efforts:

- Staff serve on coalitions and problem-solving teams
- Human Services Funding Process supports community nonprofit providers
- Housing Albemarle implementation
- The Affordable Housing Investment Fund
- The Human Services Alternative Response Team (HARTs)
- Albemarle County partners with providers in the pursuit of funding from state and Federal sources including the Department of Justice, Virginia State Opioid Abatement Authority, the Community Development Block Grant, the Department of Environmental Quality, and *many others*

The recommendations that follow represent opportunities for the county to target resources to those organizations that are intentionally and substantially providing direct services focused on basic needs and community-based mental health.

Recommendations

- 1) Prioritize funding for organizations that serve the most vulnerable members of our community including, but not limited to:

- Housing instability & homelessness
 - Households with children 5 or under experiencing poverty
 - Households over 65 experiencing poverty
 - Households with individuals with disabilities or medical vulnerability experiencing poverty
- 2) Prioritize funding for programs that provide basic needs including food and shelter
 - 3) Prioritize funding for organizations that provide direct services
 - 4) Prioritize funding for organizations that provide community-based mental health supports including, but not limited to:
 - Counseling
 - Case management
 - Peer support
 - Groups
 - Navigation
 - 5) Continue to explore flexible, multi-disciplinary problem-solving teams such as HART to avoid deep-end expenses and improve well-being