# Gains, Gaps & Goals:

The Status of Women & Girls in Fairfax County

Friday, March 22 2–5 p.m.

Government Center Board Auditorium 12000 Government Center Parkway Fairfax, VA 22035

Presentation by
University of Virginia



## Gains, Gaps & Goals:

The Status of Women & Girls in Fairfax County

**Executive Summary** 



On September 8, 1971, the Fairfax County Board of Supervisors cited economic and social discrimination against women as a problem and established the Fairfax County Commission on Women to advise them on matters relating to women and gender discrimination and make policy recommendations to the county's Board of Supervisors through oral testimony and published reports.

The One Fairfax equity policy was adopted in November 2017 by the Board of Supervisors, which heightened awareness regarding continued inequities in our communities. Fairfax County government is making steady progress to understand disparate outcomes and improve the health and well-being of all its residents. For some measures, Fairfax County can easily disaggregate data to report on outcomes based on certain demographics. However, it is no surprise that Fairfax County experiences the same challenges as other jurisdictions across the nation in its ability to identify where inequities exist, particularly related to the intersectional identities of women and girls.

There are gaps in existing data on key indicators and inconsistencies in collection and reporting over time. Surveys and other data collection tools have historically used broad and overarching categories to collect data on diverse communities, making it difficult, at best, to understand the needs and adverse impacts on women and girls in our communities.

In September 2022, the Board of Supervisors tasked staff to stand up a short-term multi-agency workgroup and partner with a university to provide a more comprehensive evaluation on the status of women and girls in Fairfax County that offered more specificity and identified strengths, opportunities, and existing data gaps. This workgroup partnered with the Commission for Women and the University of Virginia's Biocomplexity Institute and Initiative in the Social and Decision Analytics Division to complete the 2024 Fairfax County Women and Girls Study (WGS): "Gains, Gaps, & Goals: The Status of Women and Girls in Fairfax County."

This study highlights areas where women are still striving for equity, evaluates the status of women and girls by supervisor districts in the county, and provides insights about how women and girls of different identities are impacted. This report also provides context and data to support critical investments and recommended solutions to improve the status of women and girls in Fairfax County, which ultimately contributes to stronger, more prosperous communities for all.

The study provides a comprehensive assessment of three key indicators impacting women and girls: (1) economics; (2) health; and (3) work-life balance. The research team conducted facilitated community conversations with women, teen girls, and Fairfax County program leaders to provide perspective and critical insights for how these indicators practically affect the lives of women and girls. The data can be used to support policy and resource decisions to improve their well-being. Demographic information was also collected for participants of community conversations.

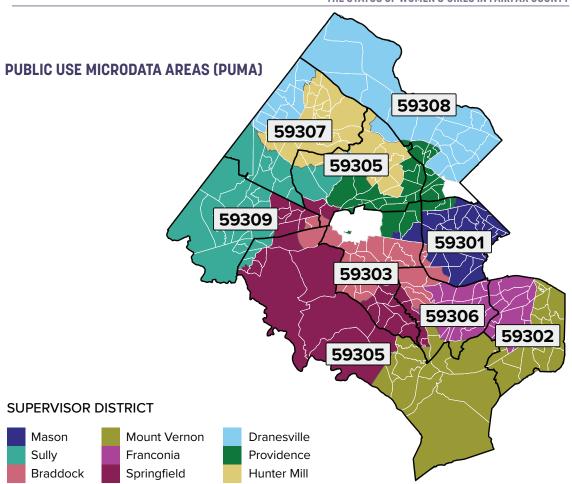
#### INTRODUCTION

Nearly 50% of Fairfax County residents are women and girls and, similar to national statistics, women and girls in Fairfax County face inequities related to pay, education, and important well-being indicators. As a society, when women do better, we are all positioned to have better outcomes.

Fairfax County has 1.1 million people. It is racially and ethnically diverse, with roughly 49.4% of residents White, 9.6% Black, 20.4% Asian, and 11.3% two or more races. 17.3% of residents identify as Hispanic. Roughly 38% of residents ages 5 and older speak a language other than English at home. Despite its reputation as a relatively prosperous metropolitan area, due to Fairfax County having high education rates and one of the highest median incomes in the nation, the high cost of living results in economic challenges for residents with lower incomes.

Like many jurisdictions across the nation, as well as within the Commonwealth of Virginia, there are variances in how key well-being indicators impact women and girls, based upon where they reside in the county. The chart to the right reflects the census tracts identified with Public Use Microdata Areas (PUMA), the smallest areas where the Census Bureau provides microdata and have a minimum of 100,000 people.





Data Source: Fairfax County, Census Bureau TIGER/Lines Geodatabases Fairfax County, Virginia, 2021

| PUMA  | Census Description   | Supervisor Districts            |
|-------|--|---------------------------------|
| 59301 | East Central—Annandale, West Falls Church & Bailey's Crossroads    | Mason                           |
| 59302 | Southeast —Woodlawn, Rose Hill & Mount<br>Vernon                   | Franconia and Mount<br>Vernon   |
| 59303 | Central & Fairfax City—Burke                                       | Braddock                        |
| 59304 | Southwest—Centreville (Southeast) & Lorton                         | Springfield and Mount<br>Vernon |
| 59305 | North Central—Vienna Town, Oakton & Fair<br>Oaks (East)            | Providence and Hunter<br>Mill   |
| 59306 | South Central—Springfield (South), West<br>Springfield & Franconia | Franconia and Braddock          |
| 59307 | Northwest—Reston (North) & Franklin Farm                           | Hunter Mill and<br>Dranesville  |
| 59308 | Northeast—McLean & Idylwood  | Dranesville                     |
| 59309 | West Central—Centreville (North & West) & Chantilly (South & West) | Sully and Springfield           |

To translate this report for local relevance, each PUMA boundary was compared to the nine administrative supervisor districts of Fairfax County. Each PUMA can be mostly characterized by portions of one or two supervisor districts.



### **DATA COLLECTION**

#### ADMINISTRATIVE RECORDS REVIEW (LITERATURE REVIEW)

The researchers completed a literature review of themes, indicators, and gaps, which are outlined in the full report. Specific citations for scholarly articles, public data sets, and research methodology used in the research can be found using the link or QR code on page 23.

To get a baseline understanding of potential areas of gender disparity specific to Fairfax County, the researchers analyzed Fairfax County data sets such as the Fairfax County 2021-2022 8th, 10th, and 12th grade Youth Survey, the Community Health Dashboard, and the Fairfax County Community Needs Assessment. Recommendations found in this report align with Fairfax County's Countywide Strategic Plan and the 2023-30 Fairfax County Public Schools Strategic Plan.

#### **COMMUNITY CONVERSATIONS**

Through seven community conversations, the study collected insights from women and girls across the county to understand the challenges, complexities, and connections that were of critical importance to them. In total, 44 women and 18 high school-aged girls were interviewed. Four conversations were conducted in person, two were held virtually, and one was a hybrid of virtual and in-person participants.

Study participants represented the diversity of Fairfax County in age, race, ethnicity, and annual household income. Women ranged in age from 25 to 74 years old, with the average participant between the ages of 45 and 54. Reported annual household incomes ranged from less than \$10,000 to more than \$200,000. Of the women that responded, 17% reported earning less than \$10,000, 32% reported earning between \$10,000 and \$75,000, and 36% reported earning \$100,00 to \$200,000 or more. Over half of the women reported living with a spouse or significant partner. Almost one-third reported living with a relative or relatives and 10% reported living alone. Over half were caregivers to children and 7% were caregivers to an adult that lived with them.

Teen participants were ages 14 to 17. Twenty percent were employed in formal, in-person jobs and worked on school days and during school breaks. Of the participants who were employed, the average per hour wage was \$10.67. Approximately 13% of participants reported working four hours a day on average.

The focus of the Community Conversations with women centered around work-life balance and the advantages of multigenerational support. For high school-aged girls, the conversations focused on the jobs they hold, their activities, and their goals and aspirations. Themes related to strong commitment and dedication to family and community echoed throughout all the Community Conversations. Working mothers expressed concerns about the challenges of finding high-quality, affordable childcare for their younger children and programs for their older children to keep them engaged and connected. Stay-at-home mothers expressed feeling overworked, exhausted, and "devalued" for their contributions to the greater society.



## **KEY INSIGHTS**

The quantitative data and Community Conversations yielded insightful feedback, which is interwoven throughout the full report. Below is a summary of the key insights.

| ECONOMIC   | HEALTH   | WORK-LIFE BALANCE  |
|--|--|--|
| The wage gap persists despite women's gains in education.  Despite a decades-long narrowing of the wage gap, women continue to earn less than men, and evidence suggests this difference persists even when adjusting for occupation.  | Women's physical and mental health are priorities.  Many women expressed mental health concerns, including isolation and feelings of depression.  Women in caregiving roles felt immense responsibility to provide and take care of their family, causing mental distress. | Businesses play a key role in supporting women and mothers.  Examples of policies include work from home, flexible work arrangements, onsite childcare, and extended flexibility to work from home after maternity leave ends. |
| It is expensive to live and raise a family in Fairfax County.  Women often voiced working in paid employment for long hours due to the cost of living in Fairfax County.   | Women have higher rates of some chronic health conditions.  For example, women experience poor mental health and arthritis more often, compared to men.  | For single mothers, all the barriers are compounded.  Single mothers expressed difficulty being able to balance working to support their family, caregiving, and household tasks.  |
| Women are more likely to be below the poverty line than men in Fairfax County.  In Fairfax County, 6.32% of women (ages 18 and over) live in poverty whereas 4.60% of men live in poverty. Black, Hispanic, and women of other races have a higher poverty percentage in most districts. | Preventive care is a challenge for many women.  Areas with high rates of uninsured individuals align with high poverty areas and areas where women are less up to date on preventive health services.  | Support and resources can improve work-life balance for women.  Overwhelmingly, mothers described programming for children and teens as supporting their own work-life balance.  |





#### **ECONOMIC**

Girls in Fairfax County
Public Schools are more
likely than boys to work
three or more hours on an
average school day.

This is more prevalent in female students of color. Further assessment is needed to fully understand the reasons.

## Women are community champions.

Women overwhelmingly expressed their dedication to their communities and often contribute valuable service through volunteer work.



#### HEALTH

High fees, such as copayments, alone act as a deterrent to accessing necessary care.

While women are more likely to be insured than men, young adult women have higher health expenditures than their male counterparts.

## Womanhood is frustrating, rewarding, and joyful.

Along with mental health concerns, women expressed frustration and difficulty with daily life. At the same time, women felt the reward and joy of succeeding in their careers, raising their families, and building a home.



#### **WORK-LIFE BALANCE**

Working long hours is fulfilling and necessary for career progression.

Women expressed that working long hours was necessary due to financial constraints and also fulfilling for career progression.

For some, caregiving and managing a home is not valued in the same way as working for wages, and the division of labor is not equal.

Women who work as caregivers and home managers often noted that their work is unappreciated and undervalued.





#### **KEY INDICATOR SUMMARY**

#### **ECONOMIC INDICATORS**

The factors examined in this section demonstrate that women are at greater risk economically than men. These factors include an examination of the wage gap, employment, poverty, the Household Living Budget (HLB), and women-owned businesses.

#### THE WAGE GAP

The wage gap has decreased substantially in the past couple of decades, yet it persists despite women's gains in education. Women still tend to earn less than men, and evidence suggests this difference persists even when adjusting for occupation. In Fairfax, wages are overall lower in some areas, such as Mason, Franconia, Braddock, Sully and Springfield districts.

The wage gap is smallest for women and girls between the ages of 16 to 29 but is the largest for women over 50 years old. The wage gap for women with disabilities is close to the wage gap for women without disabilities, and Hispanic women in Fairfax tend to earn less than non-Hispanic women. Hispanic women are more likely to be paid less than non-Hispanic men within the same age group and geographic area.

In most parts of the county, Asian women are most often earning the closest to parity with men, while Black women, women of two or more races, and women of other races experience a wider wage gap. Women from primarily non-English speaking households experience a larger wage gap than women from primarily English-speaking households. Foreign-born women usually experience a larger wage gap than women born in the United States.

"When you are from another country, people back home think you make a lot of money in the United States. Supporting them and yourself is quite challenging."

-Community Conversations Participant

#### **Employment**

In Fairfax County, women are more likely than men to be employed for less than 35 hours a week. In the county approximately 48% of women work up to 34 hours weekly compared to only 30% of men. For opposite-sex married households, women work part-time or less 55% of the time. In same-sex female households, 48% of women work part-time, while in same-

<sup>1</sup> Blau & Kahn, 2017; England et al., 2020; Markovic & Plickert, 2023; Merritt & McEntee, 2019.



sex male households, 30% of men work part-time. The COVID-19 pandemic had a significant impact on the employment of women. In 2020 there were great declines in employment among women where job losses were concentrated in female-dominated occupations in the retail and hospitality industries.

There is high occupational segregation between men and women in Fairfax County. For example, 67% of office and administrative support positions and 74% of educational instruction and library jobs are held by women, while only 29% of computer and mathematical operations jobs are held by women. Management positions are most common among both women and men ages 50 and over, but women hold just 33% of them. Across Fairfax, women are less likely to be in occupations with incomes above the national median. For example, in the Mason District, almost 40% of women earn above the national median wage compared to nearly 50% of men. In Dranesville, both a higher proportion of men and women earn more than the median national wage, but there is still a large gap between men's and women's salaries. Even controlling for occupational segregation, women in Fairfax County are less likely to make above the national median wage.

Also, women are more likely than men to be out of the labor force, except for Black women, who have 81% labor force participation. Asian women are the least likely to be in the labor force, with 26% not in the labor force. Twenty-seven percent of single parent men are out of the labor force, compared with 15% of women.

#### Youth Employment

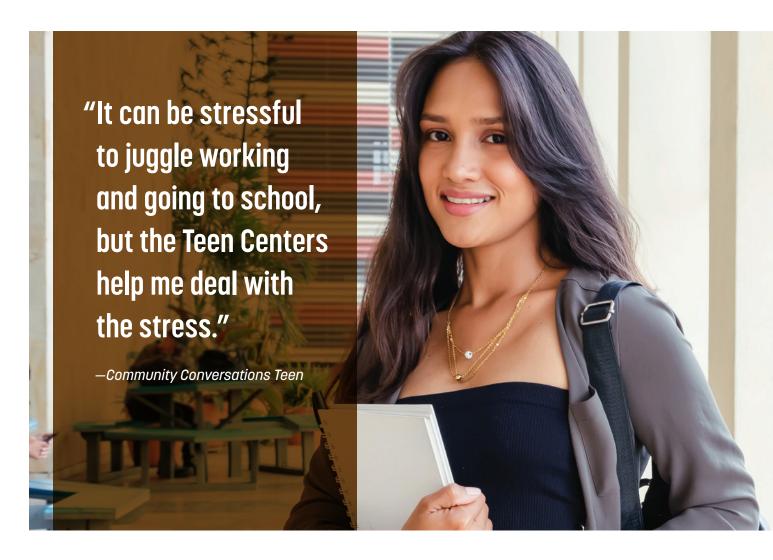
Data from the 2021-2022 Fairfax County Youth survey showed that among 8th, 10th, and 12th grade students, most did not work on an average school day. However, more girls reported working three or more hours on an average school day than boys. More girls of color (or non-White girls) reported working three or more hours on an average school day than White girls.

#### Poverty and the Household Living Budget (HLB)

Poverty is associated with a wide range of negative consequences, such as increased risk of mental illness, chronic disease, higher mortality, and lower life expectancy. Poverty thresholds are published annually by the U.S. Census Bureau and are defined at the national level using family size and total income before taxes.

In Fairfax County, 6.32% of women (ages 18 and over) live in poverty, whereas 4.60% of men live in poverty. Black, Hispanic, and women of other races have a high poverty percentage in most districts, while White non-Hispanic women have the lowest poverty rates in the county. Mason, Mount Vernon, and Providence districts have a higher concentration of women in poverty in Fairfax County. When compared to men, a disproportionate share of Hispanic women and women of other races are below the poverty line. Children in Fairfax County experience poverty at higher rates than adults: 8.01% of girls (ages 17 and under) and 8.56% of boys live in poverty.





The poverty threshold is useful for national benchmarking but fails to account for geographic differences in cost of living and can underestimate the share of the population experiencing economic hardships. Particularly in areas such as Fairfax County, the cost of living exceeds the national average. Another way of examining poverty is by examining the Household Living Budget (HLB). The HLB can be used to compute a "living wage" at the census tract level by household composition. Please refer to the full report for a comprehensive definition the HLB.

Developed by the University of Virginia, HLB is the amount of income necessary for a household to function at a modest yet adequate standard of living and pay federal and state income taxes. In other words, HLB is the minimum income needed to unlock opportunities and provide choices to participate fully in society—a benchmark against poverty. This report estimates the HLB for every household combination<sup>2</sup> in Fairfax County, with geographic nuance to identify and describe economically vulnerable households. Using the HLB, it is estimated that 28% of Fairfax County households are economically vulnerable and 44% of

<sup>2</sup> The Importance of Household Living Budget in the Context of Measuring Economic Vulnerability: A Census Curated Data Enterprise Use Case Demonstration (Lancaster et al., 2023).



these households have children younger than 18 living in them. Households with a female householder are more likely to be economically vulnerable than comparative households with a male householder. More economically vulnerable households led by women with children live in the Mason, Braddock, and Mount Vernon districts.

"I am grateful for places like the Culmore Center, where you can learn about programs and resources and get help with basic needs like food."

-Community Conversations Participant

#### Women-Owned Businesses

There are significant gaps in the data related to women-owned businesses. For the data that are available, there are limitations regarding collection methods, including how certain variables such as gender and race are collected. Despite these limitations, the data can provide some insights about women-owned businesses in Fairfax County and provide a start for further analysis.

In Fairfax County, strong patterns of women-owned businesses do not emerge based on census tract or supervisor district. However, some of the higher counts of women-owned businesses appear in Dranesville, and a higher percentage of all businesses in the Mount Vernon District are women-owned.

#### **SUMMARY**

The relatively high cost of living in Fairfax County is a known factor and the economic burden can be greater for some women depending on where they live in the county, their family composition, and the amount of income necessary to meet their basic household needs. High cost of living and inflationary impact associated with food, housing, and childcare is a barrier for many women and families in Fairfax County. The Household Living Budget provides an alternative to national poverty thresholds to measure economic vulnerability in Fairfax County. Using the HLB, there are a total of 113,136 economically vulnerable households living in Fairfax County. About 11% of them are female head of households. Forty-four percent of economically vulnerable households have children under the age of 18.

In Fairfax County, women earn less than men, even when adjusting for occupation, and there is also high occupational segregation between men and women. The wage gap is most pronounced for women over 50, and in Community Conversations, some women expressed working into older age to afford retirement. In the youth survey, more girls of color in grades 8, 10, and 12 reported working three or more hours on an average school day than White girls.



#### **BRIGHT SPOTS**

- The Fairfax County Economic Mobility Pilot (FCEMP) that started in October 2023 provided payments to asset limited, income constrained, and employed (ALICE—ALICE Lives Here—United Way NCA) households that earn more than the federal poverty level but less than the basic cost of living for the county.
- The Childcare Assistance and Referral Program in Fairfax County is a valued resource making childcare more affordable and providing professional development opportunities for early education childcare providers.
- Fairfax County developed a new countywide policy to collect race, ethnicity, and gender data consistently to inform and promote equitable planning, decisionmaking, and outcomes.
- ▶ The Starting a Business webpage (*Starting a Business in Fairfax County?* | *Topics*) provides information and resources to entrepreneurs.

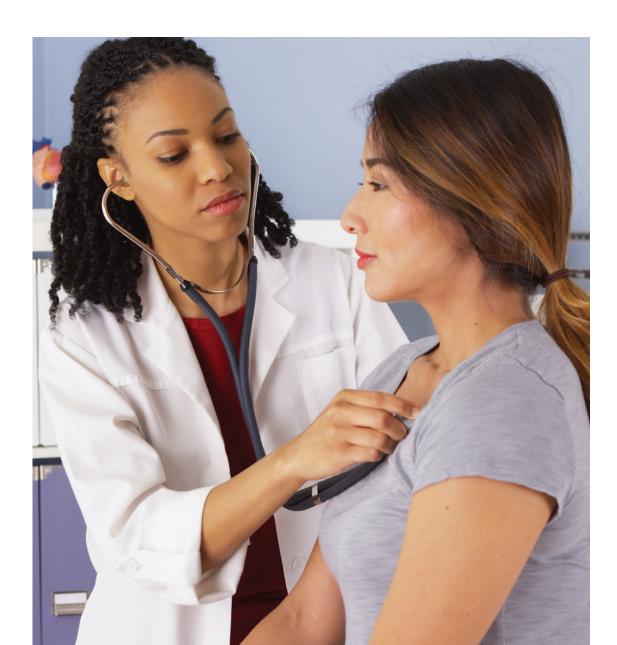
#### RECOMMENDATIONS

- Aligned with the One Fairfax policy, continue to address gaps in existing data on key indicators and inconsistencies in collection and reporting over time to better understand the needs and adverse impacts on women and girls in our communities.
- ▶ Use insights from the Fairfax County Economic Mobility Pilot (FCEMP) to expand cash assistance to more economically vulnerable households.
- In collaboration with Fairfax County Public Schools, examine factors that influence youth employment, including gender-specific considerations and racial disparities to ensure all students have access to extracurricular, co-curricular, and enrichment activities. Strategic Plan 2023–30 | Fairfax County Public Schools (fcps.edu)
- Examine the wage gap and explore strategies to encourage businesses to complete comprehensive pay and job studies and post salary ranges across the board.
- Support Fairfax County Public Schools' strategic goal to address disproportionality in course-taking patterns and participation in inclusive settings. (Strategic Plan 2023–30 | Fairfax County Public Schools (fcps.edu)
- Fund childcare at the state and county levels to reduce costs for families and enhance wages for childcare providers.
- Integrate childcare into the public educational system from birth through 8th grade to improve quality and lower costs.

### **HEALTH INDICATORS**

Health indicators focus on the social determinants of health, which include access to health care services and the prevalence of active health insurance among women and girls. The use of preventive health care was examined, as was a range of health outcomes such as the prevalence of chronic conditions and life expectancy. Like the economic indicators, there are variations across supervisor districts and ethnic and racial identities. Findings also indicate areas doing poorly for one indicator are doing poorly across other indicators. For example, areas with higher poverty rates also tend to be the same areas that have residents who are less likely to be current on preventive health and less likely to have insurance coverage.

Practical considerations related to health care services are also discussed by participants in the study. For example, lack of transportation through a personal vehicle or robust public transportation is a significant barrier to obtaining health care. Women noted not having access to a car made routine tasks, including keeping up with medical appointments for themselves and their children, much more difficult.





#### **ACCESS TO HEALTH CARE**

Health care access is the ability for people to obtain the health care they need and include health care availability, affordability, and quality. To be considered accessible, health care must be adequate in all three dimensions. This report examines two dimensions: availability and affordability for two types of health care service providers: obstetrician/gynecologists (OBGYNs) serving women's sexual and reproductive health and pediatricians attending to children's overall health.

#### **HEALTH CARE AVAILABILITY**

In Fairfax County, there is less than one OBGYN provider available per 1,000 women and girls over age 14. The best-served areas are in the eastern part of the county while the western and southern parts of the county, aligning with the Sully, Mount Vernon and Franconia districts, have comparatively lower availability of OBGYN providers when accounting for population demand and drive time.<sup>3</sup> While large differences in the availability of OBGYN providers by racial and ethnic groups were unfounded, Black girls had the lowest levels.

In Fairfax County, on average, there are about two pediatricians available per 1,000 children 16 years of age or younger. Availability for pediatric care mirrors that of OBGYN in that the eastern part of the county is the most well-served areas of the county while western and southern Fairfax County residents have lower availability. In essence, children in Sully, Springfield, Mount Vernon, and Dranesville have comparatively lower availability of pediatricians when accounting for population demand and drive time. While there are not sizeable differences in the availability of pediatricians along racial or ethnic identities, some disparities emerge. For example, Black girls have on average one less pediatrician available to them when accounting for population demand and drive time.

For this study, driving time estimates are an oversimplified way to measure provider availability and do not fully account for the complexities of transportation concerns related to congestion and gridlock experienced by county residents. However, in most cases, travel time by public transportation is considerably longer than travel time by car (Liao et al., 2020; Maciag, 2017). For households with no access to a personal vehicle and which rely on public transportation, getting to medical appointments and accomplishing other daily tasks can be arduous. Within Fairfax County, Asian, Black, and White women are more likely than men of the same race to live in a household without a car, and people of color are more likely than White people to live in a household without access to a car.

Overall, an estimated 5% of Black and Hispanic women in Fairfax County live in households without a vehicle, but in the Franconia and Mount Vernon districts, 16% of Black women live in a household without a vehicle. Across many districts of the county, 20% to 30% of Hispanic women live in households without a vehicle.

<sup>3</sup> We also consider that people may travel outside of Fairfax County for health care by taking into account locations of health care service providers. For example, an individual living on the border between Fairfax County and the City of Alexandria might choose to go to a health care provider in Alexandria if their practice is closer



#### **HEALTH CARE AFFORDABILITY**

In areas with high health care availability, affordability can be detrimental to health outcomes. Individuals who are uninsured are less likely to receive preventive care for major health and chronic conditions, leaving them at a higher health risk. High fees, such as copayments, act as a deterrent to accessing necessary care.

Women are more likely to be insured than men, but young adult women have higher health expenditures than their male counterparts. Approximately 9% of women between the ages of 18 to 64 in Fairfax County are uninsured and are also the least likely to be eligible for government assistance programs. The Mason District has the highest rates of uninsured overall with about 20% of women between the ages of 18 to 64 not having health coverage. For girls under 18 and women 65 and over, the Mason District also had the highest rates of uninsured. Overall, foreign-born women in Fairfax County experience the highest rates of being uninsured at 78%. At 85%, the Mason District has the highest percentage of women who are foreign-born and uninsured.

#### **Preventive Care**

High costs, lack of awareness, and poor health literacy can lead to individuals missing critical preventive care. Three preventive health measures from the Live Healthy Fairfax dashboard specific to women were examined: (1) Women 50 to 74 who have had a mammogram in the past two years; (2) women 21 to 65 who have had a cervical cancer screening; and (3) women 65 and older who are up to date on core preventive health services.

Across the board, women in the Mason, Sully, and Mount Vernon districts are more likely to be behind on preventive health care screenings, such as those for mammograms and cervical cancer. These findings align with areas with high rates of uninsured economically vulnerable households as defined by the HLB, indicating these women face systemic and financial barriers to accessing necessary preventive health care.

Cultural and language differences may also impede access to care and health literacy, as it may be difficult to understand what care is necessary and where to get it. Additionally, individuals may forego preventive care due to affordability concerns, particularly for those who are uninsured.

#### **Health Outcomes**

Examining health outcomes can play an important role in identifying and addressing disparities among different populations. This study researched estimates for the prevalence of chronic health conditions in women and men using data from the Fairfax Health District, which includes Fairfax County, Fairfax City, and Falls Church City, and values for the Northern Health Region (Alexandria, Arlington, Fairfax, Loudoun, and Prince William Health districts) for comparison.

In Fairfax County, as in many parts of the nation, women live longer than men, but there are differences across geography and race. Dranesville has a higher average life expectancy than the rest of the county. There were also differences in the impact of COVID-19 on Fairfax





"Everything takes longer without a car. From grocery shopping to medical appointments.
Sometimes, it takes all day to do just a few errands."

-Community Conversation Participant

County residents. For example, more White women than White men died due to COVID-19 and Hispanic men and women experienced the highest percentage of COVID-19 deaths, with Hispanic women representing a disproportionate number of COVID-19-related deaths. Also in Fairfax County, women have lower rates of hypertension, diabetes, or being overweight than men, but higher rates of poor mental health and arthritis.

In the Community Conversations, women in caregiving roles reported feeling immense responsibility to provide and take care of their families, causing mental distress. Keeping a routine or schedule and engaging in activities outside of the home were mentioned as crucial to maintaining mental health and well-being. Women with family in other countries expressed great concern for their health and safety, had less ability to visit relatives, and felt they had less caregiving support. Some women stated they had created support systems in their communities and were thankful for friends and neighbors. However, some women expressed frustration and difficulty with daily life, which exacerbated mental and physical health concerns. Women described polarizing dynamics, including feeling alone and overwhelmed at times, while on the other hand, celebrating the rewards and joy of succeeding in their careers, raising their families, and building a home.



#### **SUMMARY**

Availability and affordability of health care, including preventive care, remain barriers for low-income and non-native women and girls in Fairfax County. Health safety net services, Medicaid, and sliding-fee scales are available to eligible families and households. However, those with language barriers and individuals in particular geographic locations of the county are less likely to have health coverage and engage in preventive health care.

#### **BRIGHT SPOTS**

- Health safety net providers in Fairfax County have successfully collaborated to improve the continuum of care offered to uninsured and underserved populations and provide health care services to households throughout the county. Sliding scale fees are available for families with income up to some multiple of federal poverty guidelines.
- Expansion of the countywide Language Access Program to increase translation services and ensure language is not a barrier to accessing information and services.
- Community centers such as the Sully Community Center provide comprehensive primary care services with a focus on serving those who have faced barriers to accessing health care, plus a variety of services, programs, and activities for people of all ages and abilities.
- Community-based organizations are important for women to ease isolation, learn about resources, and provide support for one another.

#### **RECOMMENDATIONS**

- 1. Continue to examine the correlation between economic vulnerability, health care access, and health outcomes, in particular geographic areas of the county.
- Continue to partner with health safety net providers to increase targeted outreach, awareness, and health literacy to increase preventive health care rates in the Mason, Sully, and Mount Vernon districts. Also, partner with ride-share businesses to provide free rides for preventive health appointments.
- 3. Further examine the disproportionate impact of COVID-19 on various populations in the county, particularly Hispanic women.
- 4. Provide more opportunities for preventive mental health and well-being support for women.

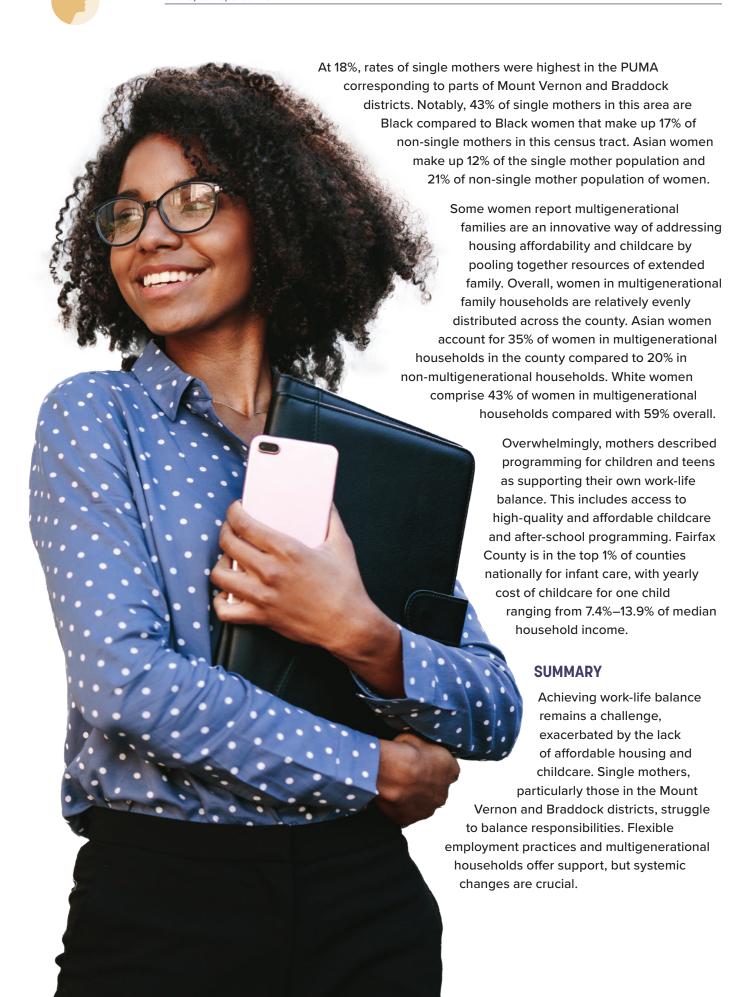


#### **WORK-LIFE BALANCE INDICATORS**

Work-life balance is multifaceted and encompasses the ability for an individual to achieve their preferred employment, economic, and personal balance. A healthy work-life balance is often achieved by personal and institutional support, including family and friends, social programs, and flexible employment policies. Women often find it challenging to achieve work-life balance without both formal and informal supports. Women who divided household labor equally with partners and other adults expressed this division as key to a healthy work-life balance. Women also noted being able to rely on older children for support was helpful.

Working over 50 hours per week is associated with poor health outcomes. Particularly, occupational health outcomes, including those associated with poor sleep, increase as individuals work longer days. Nearly 9% of women in Fairfax County report working over 50 hours per week, with this figure closer to 10% in Hunter Mill and Dranesville. On average, women working over 50 hours per week make \$31 per hour, which is \$8 higher than those working less than 50 hours per week. Among single mothers, 15.1% report working over 50 hours per week.







#### **BRIGHT SPOTS**

- The Inclusive Community Engagement Framework is designed to facilitate engagement and expand language access, virtual access, and digital access to all people and places in Fairfax County. This framework allows women (and all residents) to provide input and meaningfully participate and engage in decisionmaking that impact them directly.
- Vacant spaces that have been transformed into community hubs where women can gather are important to facilitate community building and provide mutual aid and support.
- Expansion of the countywide Language Access Program to increase translation services and ensure that language is not a barrier to accessing information and services is key.
- Opportunity Neighborhoods focus on developing family resilience and a culture of engagement, connectedness, and success.

#### **RECOMMENDATIONS**

- Coordinate gender equity initiatives and build on successful collaborations like the WGS Workgroup. Embed gender equity considerations in county planning and decision-making, as appropriate.
- Analyze career advancement outcomes and implement accountability
  mechanisms for equitable and inclusive employment, including flexible policies
  around remote work and hours where possible.
- 3. Explore the feasibility of creating innovative multigenerational housing options in the county that could potentially address housing affordability and provide community supports. Create planned communities that replicate extended family, such as co-locating senior centers and childcare facilities, and design affordable housing to attract older adults, families, and young people to live in multigenerational housing.



The 2024 "Gains, Gaps, & Goals: The Status of Women and Girls in Fairfax County" study delves into the multifaceted challenges faced by women and girls, employing an intersectional lens to unveil disparities across economic, health, and work-life balance domains.

The wage gap persists, accentuated among older women and various racial groups. Occupational segregation exacerbates this gap, with women more likely to be in lower-paying occupations. Affordability challenges, especially in childcare and housing, contribute to economic vulnerability, affecting single mothers disproportionately.

Disparities in health care availability and affordability are evident, notably in western and southern parts of the county. Mental health and chronic conditions affect women differently, with geographic and racial variations. Black women and those in higher poverty areas face increased challenges. Hispanic women bore a higher burden of COVID-19-related deaths.

Achieving work-life balance remains a challenge, exacerbated by the lack of affordable childcare. Single mothers, particularly those in the Mount Vernon and Braddock districts, struggle to balance responsibilities. Flexible employment practices and multigenerational households offer support, but systemic changes are crucial.

The study identifies promising initiatives or bright spots such as the Fairfax County Economic Mobility Pilot, health safety net services, and the Opportunity Neighborhood Collective Impact Initiative.

Recommendations include using a sliding scale for program eligibility and embedding gender equity considerations in county planning. In conclusion, the study emphasizes the need for ongoing monitoring and proactive measures to address the challenges faced by women and girls in Fairfax County to promote a more inclusive and equitable community.



The entire Gains, Gaps, & Goals:
The Status of Women and Girls in
Fairfax County report may be found
by going to this website:



#### **PARTNERS**

Toni Zollicoffer, Karla Bruce, and Michelle Gregory

Fairfax County Women and Girls Study Working Group (WGS)

Fairfax County CEDAW (Convention on the Elimination of All Forms of Discrimination Against Women) Working Group

Fairfax County Commission for Women

Robin Wilson, Karol Escalante Herrara, One Fairfax

Chloe Kyung Lee, Jaclyn Lourdes Yap, and Countywide Data Analytics

Carmen Sevilla and the Northern Virginia Chamber of Commerce

Adult and teen participants in the Community Conversations

Dr. Benjamin Schwartz, M.D., Adam Allston, M.D., and Fairfax County Health Department

Katina Matthews and Fairfax County Neighborhood and Community Services

Opportunity Neighborhoods: Soraya Borja and Second Story, Ivana Escobar and United Communities, and FACETS

Flor Phillips and Fairfax County Early Childhood Education

Dr. Michael Becketts, Alycia Blackwell, Kendra Lee, and Fairfax County Department of Family Services

Derek Chapman, Virginia Commonwealth University

Fairfax County Board of Supervisors

## Gains, Gaps & Goals:

The Status of Women & Girls in Fairfax County

