

SCAP

2025 Community Needs Assessment



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Executive Summary

As a federally designated Community Action Agency and Public Housing Authority, Sandhills Community Action Program, Inc. (SCAP) is required to conduct a comprehensive Community Needs Assessment (CNA) every three years under the Community Services Block Grant (CSBG) and Housing and Urban Development (HUD) program regulations. SCAP's service region encompasses four counties: Anson, Montgomery, Moore, and Richmond, where it operates programs addressing housing, self-sufficiency, education, family development, and economic advancement for low-income individuals and families.

The 2025 CNA was initiated to capture the current socio-economic landscape, understand systemic barriers, assess gaps in services, and identify opportunities for regional solutions. The assessment informs SCAP's strategic and programmatic direction and supports its goal to empower individuals and families toward long-term economic stability.

Methodology

The CNA employed a hybrid methods research from August 2024 through May 2025, integrating:

Quantitative data: Labor statistics, housing trends, education and health indicators from sources including the U.S. Census Bureau (ACS 2022–2023), NC Department of Commerce (LAUS), NC DHHS, and NC DPI.

Qualitative data: Community-wide surveys (N=274) and key informant interviews with stakeholders from education, health, housing, workforce, and local government sectors.

Internal program data: Community Action Partnership Report.

Each county's data was analyzed independently and synthesized regionally to capture both unique and shared community needs.

Data Limitations

Despite a rigorous mixed-methods approach, several limitations are acknowledged:

Geographic Access

Rural areas in Anson and Montgomery had limited digital connectivity, reducing online survey participation. SCAP mitigated this through in-person and paper distribution, though some households may remain underrepresented.

Demographic Representation

Youth (under 24), and non-English-speaking residents were underrepresented across all primary data tools. Language and trust barriers contributed, despite outreach via schools and partners.

Non-Random Sampling

Survey respondents were not drawn from a probability sample. Findings are illustrative rather than generalizable to the entire county population but are validated through source triangulation

These limitations do not compromise the assessment's validity but suggest areas for continued outreach and methodological refinement in future CNAs.

Assessment Objectives

The primary objective of the Sandhills Community Needs Assessment 2025 is to identify and prioritize the conditions affecting low-income individuals and families across Anson, Montgomery, Moore, and Richmond Counties. This assessment specifically focuses on 12 key domains: unemployment and job availability, job skills, crime and violence, affordable housing, alcohol and substance abuse, transportation, government and community support, education, family support, salary and pay rates, personal motivation, and the cost of living.

The CNA aims to gather community input through surveys, interviews, and focus groups; analyze structural data from trusted state and federal sources; and incorporate SCAP's internal program data to assess service reach and impact. The findings will directly inform SCAP's planning, partnership development, and alignment with CSBG, HUD, and Healthy NC 2030 goals.

Agency Profile and Services

Sandhills Community Action Program, Inc. (SCAP) is a nonprofit Community Action Agency and HUD-authorized Housing Choice Voucher administrator. Operating for more than 50 years, SCAP delivers comprehensive poverty-fighting services ranging from housing and self-sufficiency supports to family and emergency assistance through a resilient network of programs and partners.

SCAP is governed by a tripartite Board of Directors composed of one-third low-income community members, one-third elected public officials, and one-third private-sector or community stakeholders. The Board is currently chaired by Tim Spencer, with Harvest Little serving as Vice Chair.

Mission

Sandhills Community Action Program maintains a mission to develop viable approaches aimed at generating an improved quality of life for low-income people. In partnership with the community and partner agencies continuous efforts are made to generate the needed support required to improve the prospects for self-sufficiency; while striving to accomplish independence and to put an end to hopelessness and homelessness.

Services Portfolio

- S.T.A.R.S. Self-Sufficiency Program: Case management, job training, certification, and employment assistance.
- Housing Programs: Section 8 vouchers (including mainstream, foster youth, and special needs), landlord outreach, senior housing (Jackson Terrace), and HUD-certified housing counseling.
- Home Repair Services: Major and emergency repairs through NC Housing Finance Agency grants.
- Emergency Assistance & Community Services: Food distribution, utility and rental aid, disaster recovery, and healthy homes education.

County-specific Profiles

Anson County

Anson County is a predominantly rural community in south-central North Carolina, shaped by steady demographic shifts and economic challenges common to many rural counties across the state. The county faces long-term population decline, driven by outmigration, an aging workforce, and limited new industry investment. These dynamics affect every aspect of community well-being from access to healthcare and education to transportation, housing, and employment opportunities. Understanding Anson County’s unique demographic and economic characteristics is essential for developing responsive, targeted programs that promote long-term stability and equitable growth.

Demographics

Population

Anson County’s current population stands at **21,903** as of 2023, marking a continued trend of gradual decline over the past decade. Since 2010, the county has experienced a population decrease of approximately 7%, driven largely by economic migration, aging demographics, and limited in-migration. This trend reflects broader patterns affecting many rural counties across North Carolina.

Figure 1 Anson County Population Trend

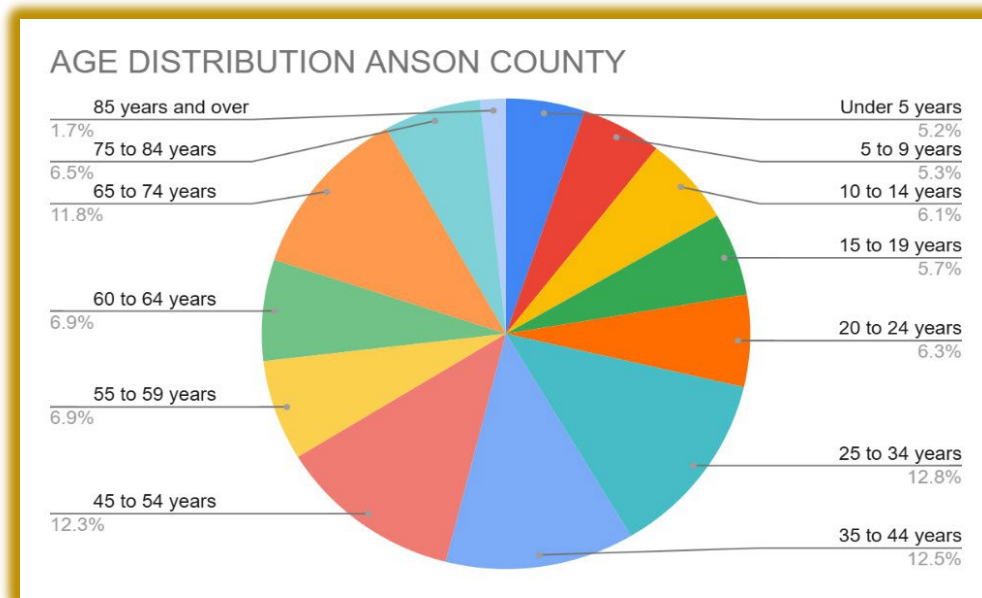
ANSON COUNTY POPULATION TREND 2010-2023	
2010	26785
2012	26699
2014	26309
2016	25883
2018	25306
2020	24430
2022	22200
2023	21903

Source: US Census Bureau, American Community Survey ACS 2010- 2023

Age Distribution

Approximately 20.3% of residents are under 18, 59.8% are between 18 and 64, and 19.9% are aged 65 or older. The median age is 42.4 years.

Figure 2 Age Distribution Anson County



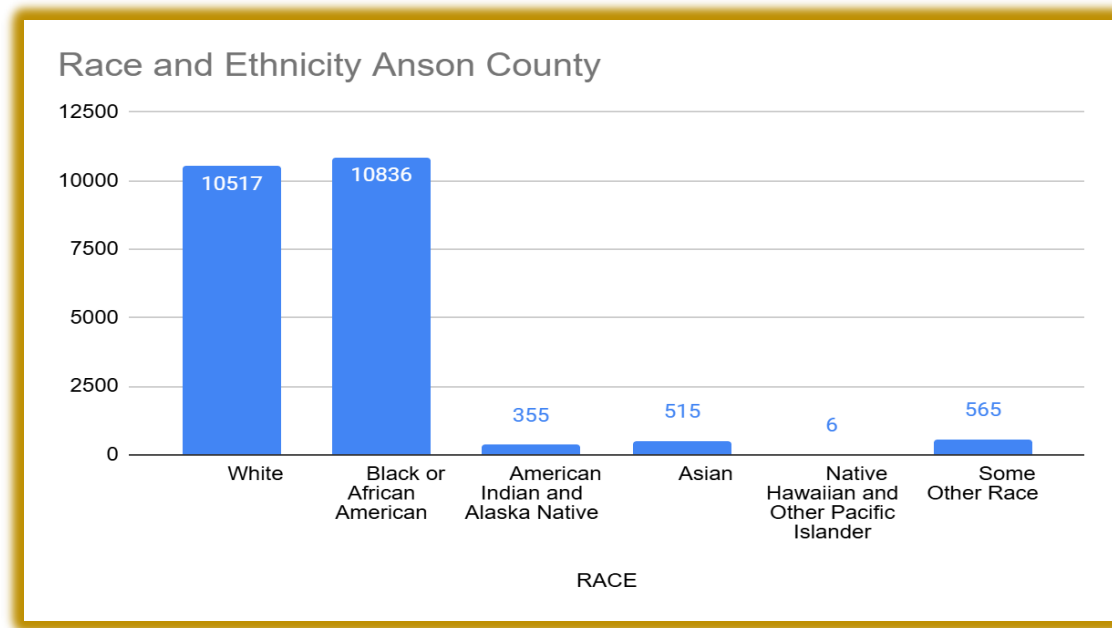
Source: US Census Bureau, American Survey ACS 1 2023

Race

Anson County presents a nearly even racial composition between White (48.0%) and Black or African American (49.5%) residents, making it one of the few counties in North Carolina with such demographic balance. This dynamic suggests a shared influence on the county's cultural and civic life. Smaller racial groups include Asian (2.4%), American Indian and Alaska Native (1.6%), and Some Other Race (2.6%), with no reported population for Native Hawaiian and Other Pacific Islanders. The diversity in these smaller categories, while limited, may be growing and could warrant closer monitoring in future census cycles.

This demographic structure holds significant implications for policy-making, public health equity, and educational initiatives. The strong representation of Black residents, coupled with a sizable White population, points to the need for inclusive governance and culturally responsive services. The presence of other racial groups, although small, adds complexity to the county's identity and suggests opportunities for broader community engagement and representation.

Figure 3 Racial Composition Anson County



Source: US Census Bureau, American Survey ACS 2023

Language

In Anson County, English is the primary language spoken in nearly all households. According to the U.S. Census Bureau's most recent American Community Survey 2023, approximately 97.2 percent of residents aged five and older speak only English at home. Approximately 2.8 percent of the population speaks a language other than English, with Spanish being the most widely spoken. About 1.9 percent of residents speak Spanish at home, while smaller groups speak other Indo-European languages (0.6 percent) or Asian and Pacific Islander languages (0.2 percent).

The proportion of residents with limited English proficiency is notably low. Data indicates that only 1.3 percent of the county's total population reports speaking English less than "very well." Among Spanish-speaking households, less than one percent experience significant language barriers. This suggests that while English proficiency is widespread, there remains a small segment of the population, particularly Spanish-speaking families, who may benefit from bilingual materials and language-accessible services.

These patterns highlight the importance of maintaining inclusive communication practices in service delivery, especially in public health, housing, and education programs.

Economic Conditions and Employment

Median and Per Capita Incomes

Anson County's economic profile underscores ongoing income inequalities. As per the U.S. Census Bureau (ACS 2019–2023), the median household income stands at \$44,245 whereas the median family income is \$60,137, both significantly lower than the statewide medians in North Carolina. The income per person is \$22,854, indicating limited personal financial means. Recent findings from Neilsberg (2023) indicate a slight rise in household incomes, yet 24.1% of the population continues to fall below the federal poverty threshold. Geographic differences are also apparent, with rural regions showing considerably lower income levels compared to the county seat, Wadesboro. As reported by the North Carolina Rural Center and NCACC, Anson continues to be one of the state's lower-income counties, with a limited number of households earning more than \$75,000 per year. These statistics highlight the importance of ongoing investment in workforce development, job creation, and financial literacy initiatives

Figure 4 Percentage of Households in an Income Bracket, Anson County

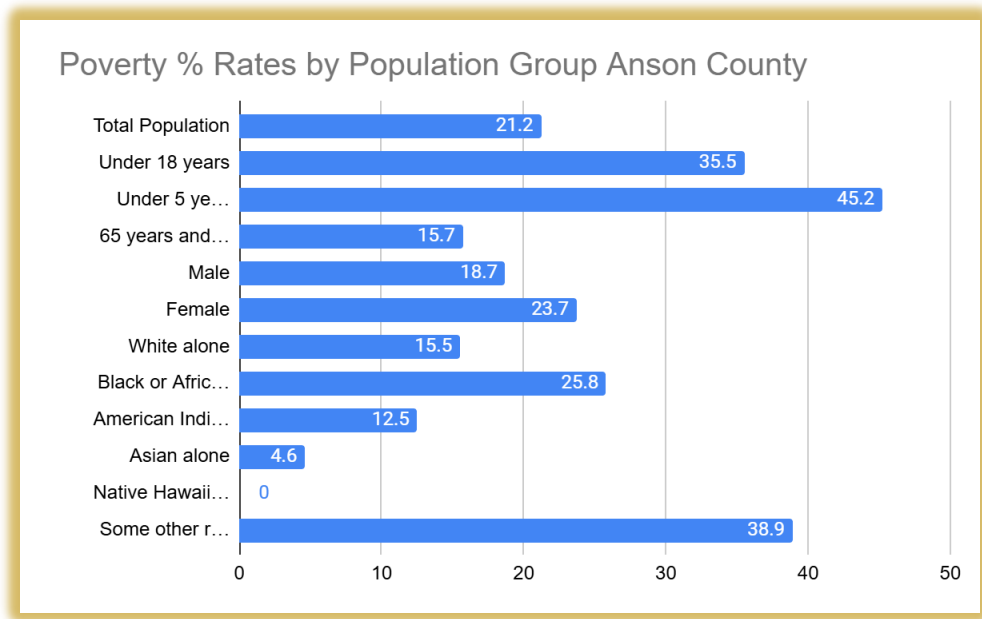
Percentage of Households in an Income Bracket, Anson County	
Less than \$10,000	6.7%
\$10,000 to \$14,999	7.2%
\$15,000 to \$24,999	15.5%
\$25,000 to \$34,999	12.7%
\$35,000 to \$49,999	13.6%
\$50,000 to \$74,999	15.8%
\$75,000 to \$99,999	13.1%
\$100,000 to \$149,999	9.8%
\$150,000 to \$199,999	3.6%
\$200,000 or more	2%

Source: 2019-2023 American Community Survey

Poverty

Anson County continuously encounter considerable economic difficulties with around 21.2% of its population residing below the federal below poverty level (FPL).Poverty predominantly affects at risk age groups: 35.5% of individuals under 18 and 45.2% of those under 5 resides in homes with incomes below the FPL. Approximately 16% percent of seniors aged 65 and above also experience Poverty .This indicates ongoing struggles throughout age range. The figure below indicates the poverty rate by population group in Anson County.

Figure 5 Poverty in Anson County.



Source: 2019-2023 American Community Survey

Unemployment Rate

Figure 6 Key Employment and Economic Indicators for Anson County (2023–2024)



Source: NC Rural Center – County Data Profile

This graphic summarizes core labor force and economic indicators for Anson County. The labor force participation rate is 50.3%, indicating that just over half of the working-age population is either employed or actively seeking work. Despite a relatively low unemployment rate of 4.0%, the county faces broader challenges tied to limited labor market engagement and declining employment levels.

Only 49.9% of residents work within the county, suggesting many must commute for jobs, likely due to limited local opportunities. The average weekly wage in Anson County is \$858, significantly lower than the estimated living wage of \$72,062 annually for a household with one working adult and one child.

The county experienced an 11% employment decline between 2013 and 2023, losing 808 jobs over the decade. The manufacturing sector, employing 1,369 workers, remains the largest industry, while the Anson County Board of Education is a leading employer, with between 500 and 999 employees.

These indicators reflect a rural labor market characterized by limited economic diversification, wage constraints, and commuting burdens, factors that contribute to persistent underemployment and economic vulnerability in the county.

Economic Distress & Strategy Implications

Anson County is currently designated a Tier 1 county, the most economically distressed classification issued by the North Carolina Department of Commerce. This designation, based on factors like median income, unemployment, and population growth, qualifies the county for priority access to state-level economic development programs, including job development grants, infrastructure investment, and tax incentives.

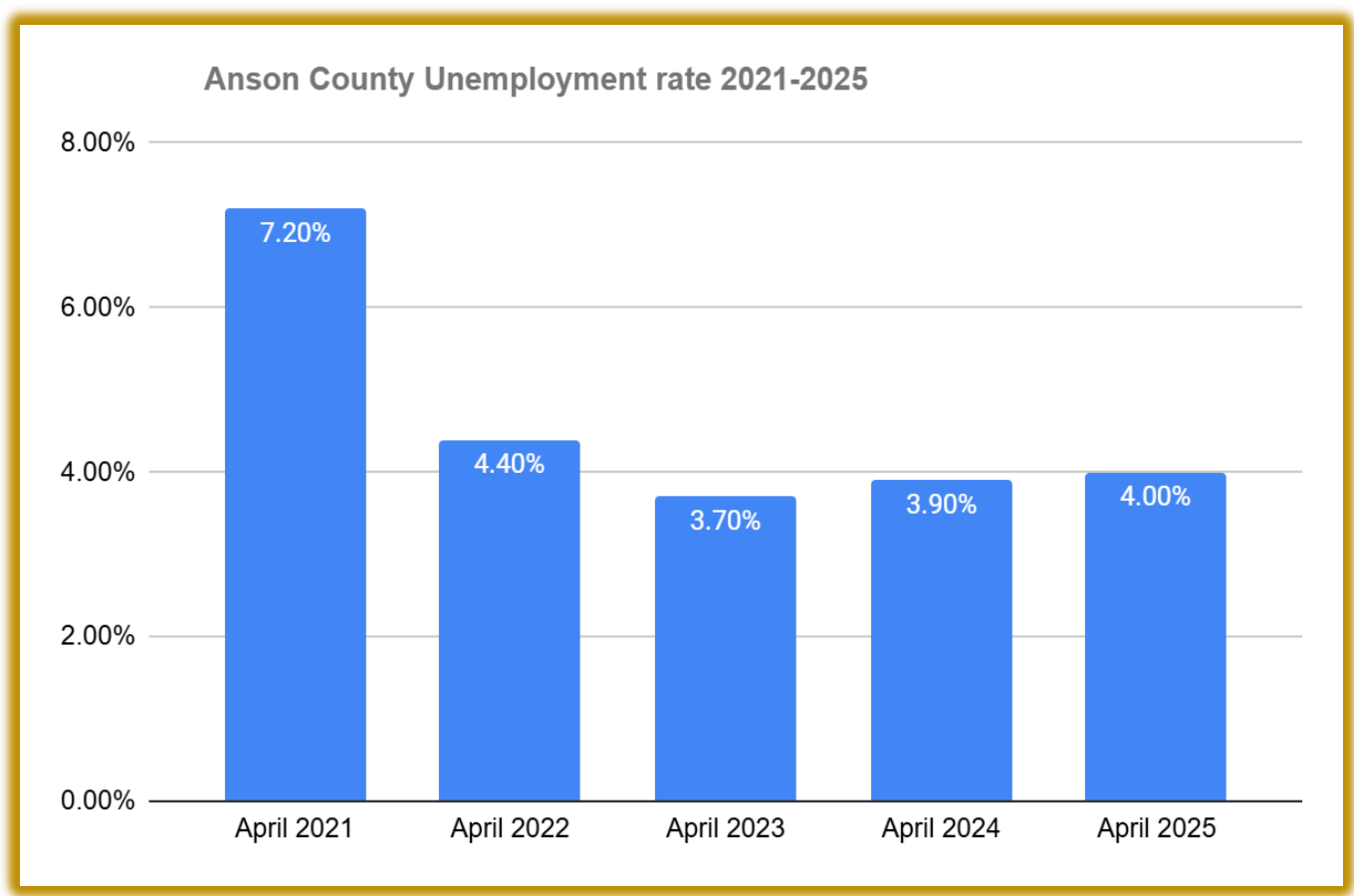
Yet despite these supports, Anson has seen a net employment loss of 808 jobs between 2013 and 2023, representing an 11% decline in total employment. This contraction reflects broader structural limitations: a narrow industry base, outmigration of working-age adults, and limited entrepreneurial expansion.

Moving forward, Anson's economic recovery will depend on its ability to:

- Expand vocational training and workforce re-skilling, particularly through partnerships with South Piedmont Community College and the NC Works Career Center;
- Accelerate public infrastructure improvements, including broadband and industrial site readiness;
- Cultivate public-private partnerships that align employer needs with community workforce strengths.

Figure 7 below indicates Anson unemployment rate from April 2021 to April 2025 according to the U.S. Department of Labor.

Figure 7 Anson County Unemployment Rate 2021-2025(U.S Department of Labor)



Source: U.S. Department of Labor.

Education and Workforce Readiness

Education in Anson County reflects both strengths and areas of need across the county from early childhood to adult literacy.

Educational Attainment

A significant portion of Anson County adults face educational challenges that may impact workforce readiness and socioeconomic mobility:

- 18.0% of adults hold a bachelor’s degree or higher, well below the state (34.1%) and national (35.2%) averages.
- 26.7% have completed high school only, and
- 11.4% have not completed high school, exceeding both the North Carolina (10.3%) and U.S. (10.6%) rates.

Figure 8 below shows Education attainment in Anson County in Age Categories according to American Survey data ACS 5 2023.

Figure 8 Education Attainment in Anson County

EDUCATION ATTAINMENT IN ANSON COUNTY IN AGE CATEGORIES	
AGE CATEGORY	POPULATION
Population 18 to 24 years	1836
Less than high school graduate	115
High school graduate (includes equivalency)	968
Some college or associate's degree	592
Bachelor's degree or higher	161
Population 25 years and over	15630
Less than 9th grade	590
9th to 12th grade, no diploma	2157

High school graduate (includes equivalency)	6761
Some college, no degree	2819
Associate's degree	1602
Bachelor's degree	1281
Graduate or professional degree	420
High school graduate or higher	12883
Bachelor's degree or higher	1701
Population 25 to 34 years	2806
High school graduate or higher	2504
Bachelor's degree or higher	163
Population 35 to 44 years	2743
High school graduate or higher	2363
Bachelor's degree or higher	313
Population 45 to 64 years	5719
High school graduate or higher	4610
Bachelor's degree or higher	673
Population 65 years and over	4362
High school graduate or higher	3406
Bachelor's degree or higher	552

Source: U.S Census Bureau American Community Survey ACS 5 2023

Gender disparities in attainment are evident. Men are more likely than women to possess a bachelor's degree or higher (748 vs. 533 individuals), but also more likely to have no high school diploma (1,339 men vs. 1,408 women, though total male population data is likely higher).

Among veterans aged 25 and over, 17.5% hold a bachelor's degree or higher, and only 7.4% lack a high school diploma, suggesting that veterans in the county generally achieve higher levels of education compared to non-veterans.

School Enrollment

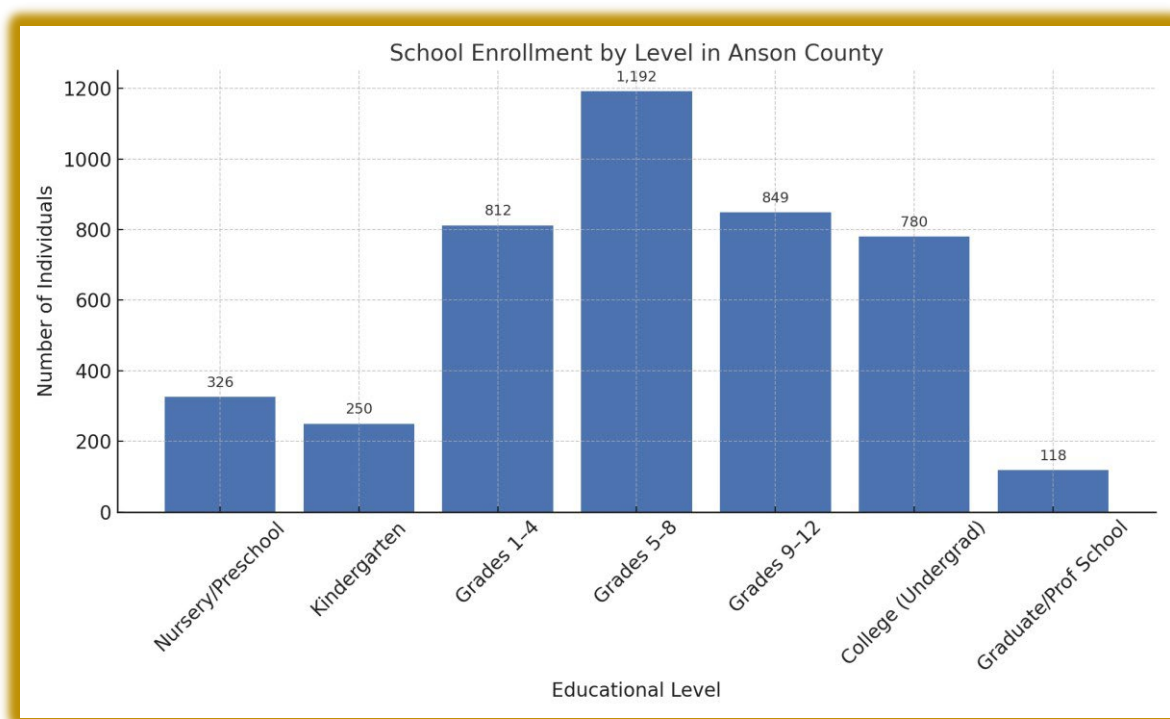
Access to early education is mixed:

- Head Start availability is relatively strong at 13.1 slots per 10,000 children under age 5, outperforming both state (9.5) and national (11.4) averages.
- However, preschool enrollment remains low: only 32.8% of 3- to 4-year-olds are enrolled, compared to 40.4% in North Carolina and 45.6% nationally.

Enrollment is not evenly distributed. Among enrolled children:

Only **20.4%** of Anson County's total population is currently enrolled in school, while the remaining **79.6%** are not engaged in formal education, reflecting a population largely comprised of working-age adults or retirees. The largest share of enrollees falls within grades 5 to 8, representing 5.6% of the total population, followed by elementary and high school students. Notably, enrollment in postsecondary education remains low, with only 3.7% attending college and 0.6% enrolled in graduate or professional programs. This combined 4.3% postsecondary enrollment suggests a significant opportunity to strengthen college and career readiness efforts and improve access to higher education across the county. Figure 9 below highlights School enrollment by level in Anson County.

Figure 9 School Enrollment by Level in Anson County



Source: American Community Survey ACS 5 2023

Youth Disconnection

Approximately 8% of youth ages 16–19 in Anson County are not enrolled in school and not working, aligning closely with the state average of 7.3% and the national rate of 6.8%. This indicates a moderate level of youth disconnection that, while not extreme, signals the need for targeted interventions to prevent long-term disengagement from both education and the workforce. Strengthening school-to-career pathways, expanding access to training programs, and enhancing support services could help reconnect these young individuals and improve overall community outcomes.

Adult Literacy

According to National Center for Education Statistics roughly 33.5% of adults in Anson County are at or below Level 1, indicating substantial struggles with basic reading and comprehension. Nearly 45% fall at or below Level 2, suggesting limited ability to navigate complex texts, forms, or digital information. This highlights the urgent need for foundational adult education, particularly in workplace and health literacy.

Housing & Community Stability

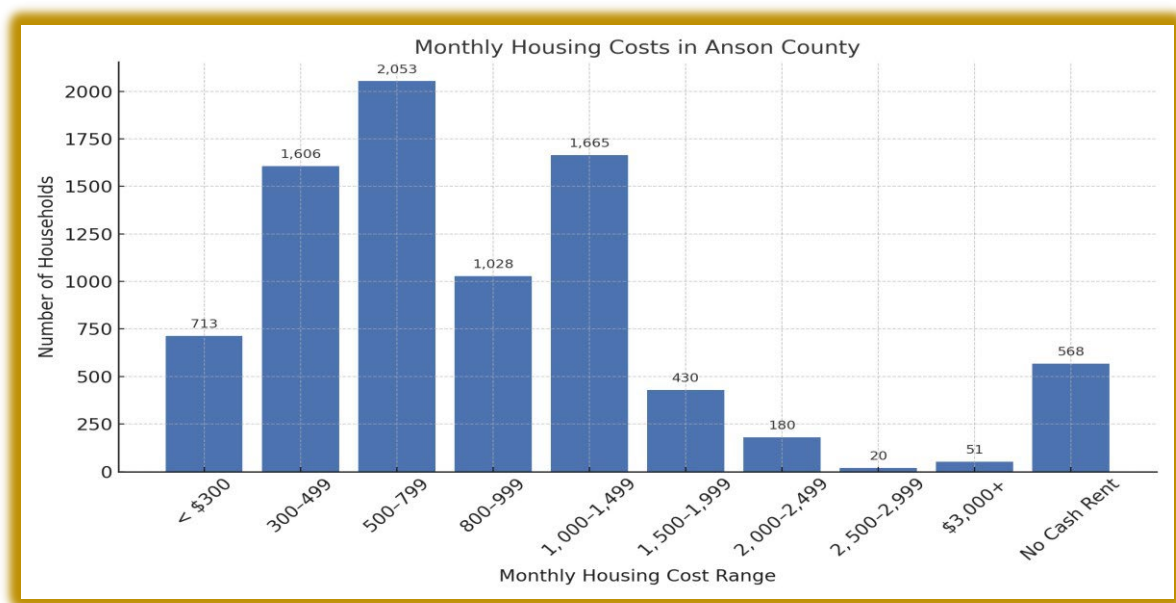
Housing Affordability

Housing in Anson County is concentrated at the lower end of the cost spectrum. Over 66% of households pay less than \$1,000 per month, with the largest group (31%) paying between \$500 and \$799. Another 24.5% spend between \$300 and \$499, and 713 households pay less than \$300, suggesting a high presence of low-income or subsidized housing.

Only 13.7% of households pay above \$1,500, indicating limited availability of mid- to high-cost housing stock. Additionally, 568 households report paying no cash rent, pointing to informal or unstable housing arrangements.

This distribution signals affordability for many, but also reflects potential challenges around housing quality, stock diversity, and upward mobility. Expanding access to safe, modern, and workforce-aligned housing should be a priority. `Figure 10 below highlight Housing Costs in Anson County as per American Survey 2019-2023.

Figure 10 Monthly Housing Costs in Anson County

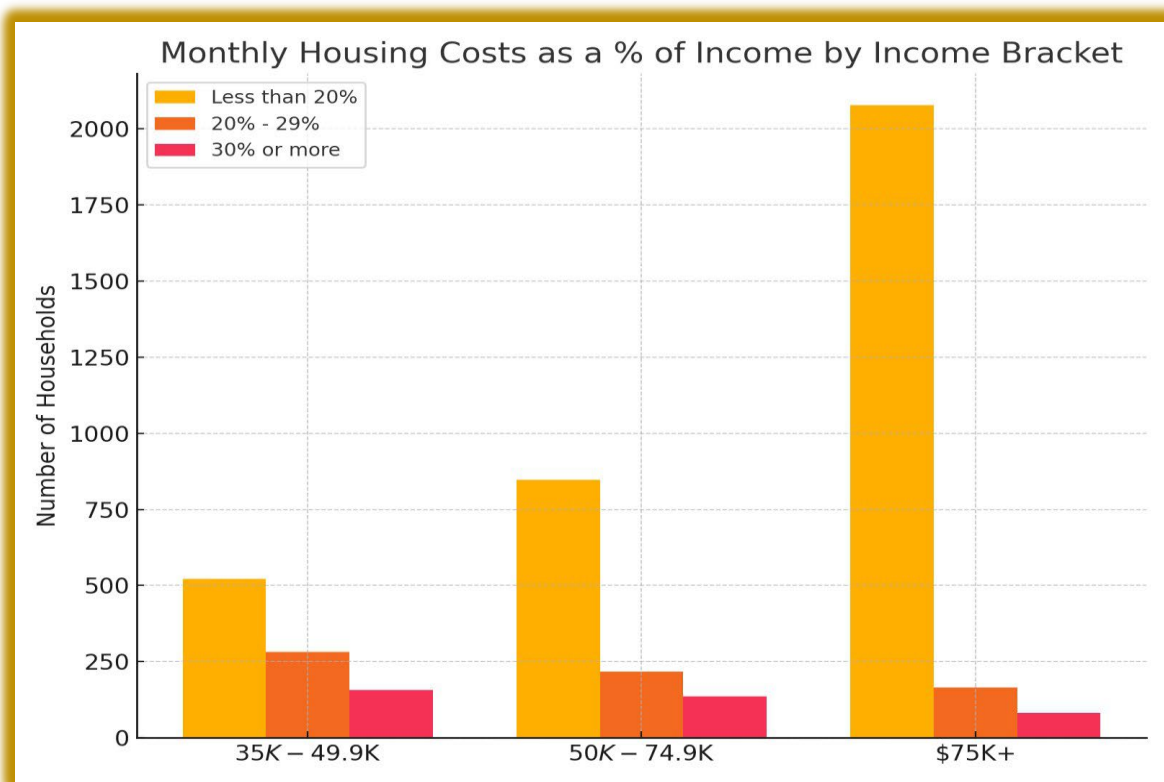


Source: U.S Bureau American Community Survey ACS 5 2023

Housing Cost Burden by Income Level

The majority of higher income households (75,000 or more) experience low housing cost burdens, with nearly 89 percent spending less than 20 percent of their income on housing. In contrast, cost burden is more prevalent among lower income households. Sixteen percent of those earning 35,000 to 49,999, and eleven percent of those earning 50,000 to 74,999 spend 30 percent or more of their income on housing. Additionally, 196 households reported zero or negative income, and 568 reported no cash rent. This distribution highlights the need for targeted support for low income households and closer assessment of non-traditional housing situations. The figure below illustrates how housing costs relate to household income across three income brackets. It highlights the proportion of households spending different percentages of their income on housing.

Figure 11 Monthly Housing Costs as a % of income in Anson County



Source: U.S Bureau American Community Survey ACS 5 2023

Household Mobility Overview: Owner vs. Renter Occupancy

Owner-occupied housing units in Anson County include 11,525 individuals who remained in the same house over the past year, while renter-occupied units include 5,994 individuals. This shows homeowners make up 66 percent of the stable population, and renters 34 percent.

Among those who moved, 930 individuals relocated within the same county, with 177 from owner-occupied and 753 from renter-occupied units. Another 756 individuals moved from a different county within the state, including 455 homeowners and 301 renters. Moves from another state totaled 366, with 52 from owner-occupied and 314 from renter-occupied units. There were no individuals who moved from abroad.

In total, 1,368 movers were renters, representing 67 percent of the mobile population. Despite being a smaller share of the overall population, renters are significantly more mobile than homeowners. This highlights housing instability among renters and suggests the need for policies that promote rental stability and support housing retention for vulnerable groups.

Figure 12 Geographical Mobility in Anson County

GEOGRAPHICAL MOBILITY IN ANSON COUNTY	
Householder lived in owner-occupied housing units	12209
Householder lived in renter-occupied housing units	7362
Same house 1 year ago:	17519
Householder lived in owner-occupied housing units	11525
Householder lived in renter-occupied housing units	5994
Moved within same county:	930
Householder lived in owner-occupied housing units	177
Householder lived in renter-occupied housing units	753
Moved from different county within same state:	756
Householder lived in owner-occupied housing units	455
Householder lived in renter-occupied housing units	301
Moved from different state:	366
Householder lived in owner-occupied housing units	52

Householder lived in renter-occupied housing units	314
Moved from abroad:	0
Householder lived in owner-occupied housing units	0
Householder lived in renter-occupied housing units	0

Source: U.S. Census Bureau American Community Survey ACS 5 2023

Health, Safety & Behavioral Well-being

Tobacco Usage - Current Smokers

Tobacco use remains a significant public health concern in Anson County, approximately 20% of adults aged 18 and over identified as current smokers according to 2022 data from the CDC's Behavioral Risk Factor Surveillance System. This figure indicates that nearly one in seven adults in the county has smoked at least 100 cigarettes in their lifetime and continues to smoke either daily or occasionally. While the percentage may seem moderate, its public health implications are substantial, particularly when considering the well-documented links between smoking and chronic conditions such as heart disease, cancer, stroke, and respiratory illness. The presence of this behavioral risk factor suggests ongoing exposure to tobacco-related morbidity and mortality, which contributes to rising healthcare costs and places pressure on local health systems.

Physical Inactivity

Anson County reports a physical inactivity rate of 16.9 percent among adults aged 20 and older, representing more than 3,000 individuals who do not engage in leisure-time physical activity. This level of inactivity contributes to increased risk for preventable chronic conditions such as cardiovascular disease, hypertension, and certain forms of cancer. The data provides a clear indication of the public health work needed to support healthier living environments in the county.

Reducing inactivity in Anson County will benefit from a focused approach that includes improving local infrastructure for exercise, offering community-based activity programs, and removing barriers to participation. Collaborative efforts between health agencies, schools, and local government can help build sustained engagement in physical activity. The information provided is drawn from the Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 2021.

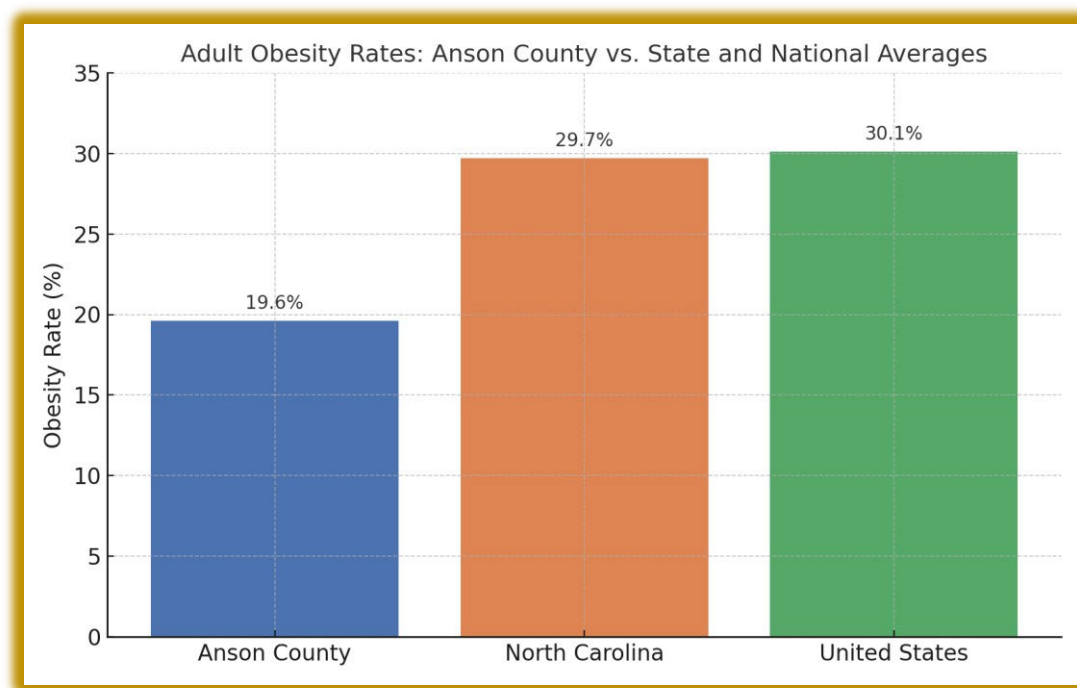
Obesity

In Anson County, 3,367 out of 17,179 adults aged 20 and over are classified as obese, representing an adult obesity rate of 19.6%, based on CDC 2021 data. Obesity is defined as a Body Mass Index (BMI) of 30.0 or higher, derived from self-reported height and weight. This condition significantly increases the risk of chronic diseases such as heart disease, type 2 diabetes, and hypertension.

Compared to the North Carolina state average of 29.7% and the national average of 30.1%, Anson County's obesity rate is notably lower by approximately 10 percentage points. This favorable standing may reflect local health behaviors, community engagement, or demographic patterns that mitigate risk.

While the lower prevalence is encouraging, the fact that nearly one in five adults in Anson County lives with obesity warrants ongoing attention. To maintain and improve this position, targeted interventions should continue focusing on increasing access to healthy foods, promoting active lifestyles, and supporting preventive care services. These efforts are especially critical in rural communities where access and health literacy may present additional barriers. Figure 12 below shows the obesity rate comparison in Anson County vs state of North Carolina and National Averages.

Figure 13 Obesity Rate Comparison (Anson County vs. North Carolina and United States)



Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2021.

Healthcare Access

Insurance Coverage

Access to health insurance is a critical indicator of community well-being, influencing preventive care access, chronic disease management, and overall health equity. In Anson County, 2023 data show a high overall rate of coverage among seniors, but notable coverage gaps remain among working-age adults, particularly men under 45.

Out of a total population of individuals: males account for 9,920 individuals; females account for 10,101. Insurance coverage improves consistently with age across both genders. Coverage among seniors (65+) is nearly universal, reflecting Medicare eligibility. The highest uninsured rates are concentrated among men aged 26–44 and women aged 35–44. Figure 13 and 14 shows the number of insured and uninsured individuals between males and females in Anson County.

Figure 14 Coverage by Age – Men in Anson County

Age Group	Total	Insured	Uninsured	% Uninsured
26–34	1302	818	484	37.2%
35–44	1264	995	269	21.3%
45–54	1090	804	286	26.2%
55–64	1318	1178	140	10.6%
65–74	1147	1135	12	1.0%
75+	644	644	0	0.0%

Figure 15 Coverage by Age – Women in Anson County

Age Group	Total	Insured	Uninsured	% Uninsured
35–44	1021	767	254	24.9%
45–54	1192	1027	165	13.8%
55–64	1480	1359	121	8.2%
65–74	1287	1287	0	0.0%
75+	1083	1083	0	0.0%

Source: U.S. Census Bureau American Community Survey ACS 5 2023

Working-age men (26–44) show the highest uninsured rates, with more than 1 in 3 men aged 26–34 lacking coverage. Female coverage is stronger overall, but still 1 in 4 women aged 35–44 are uninsured. Uninsured rates drop significantly after age 55 and are virtually eliminated after age 65, due to Medicare coverage.

Anson County should prioritize outreach and enrollment support for working-age adults, particularly uninsured males under 45. Strategies may include: health literacy and awareness campaigns targeting younger men; employer-based plan expansion and Medicaid enrollment navigation; and mobile or pop-up enrollment

clinics in rural and underserved areas. While coverage among older adults is strong, reducing the uninsured rate among the county's younger workforce is essential for improving health access, reducing emergency care costs, and supporting long-term economic mobility.

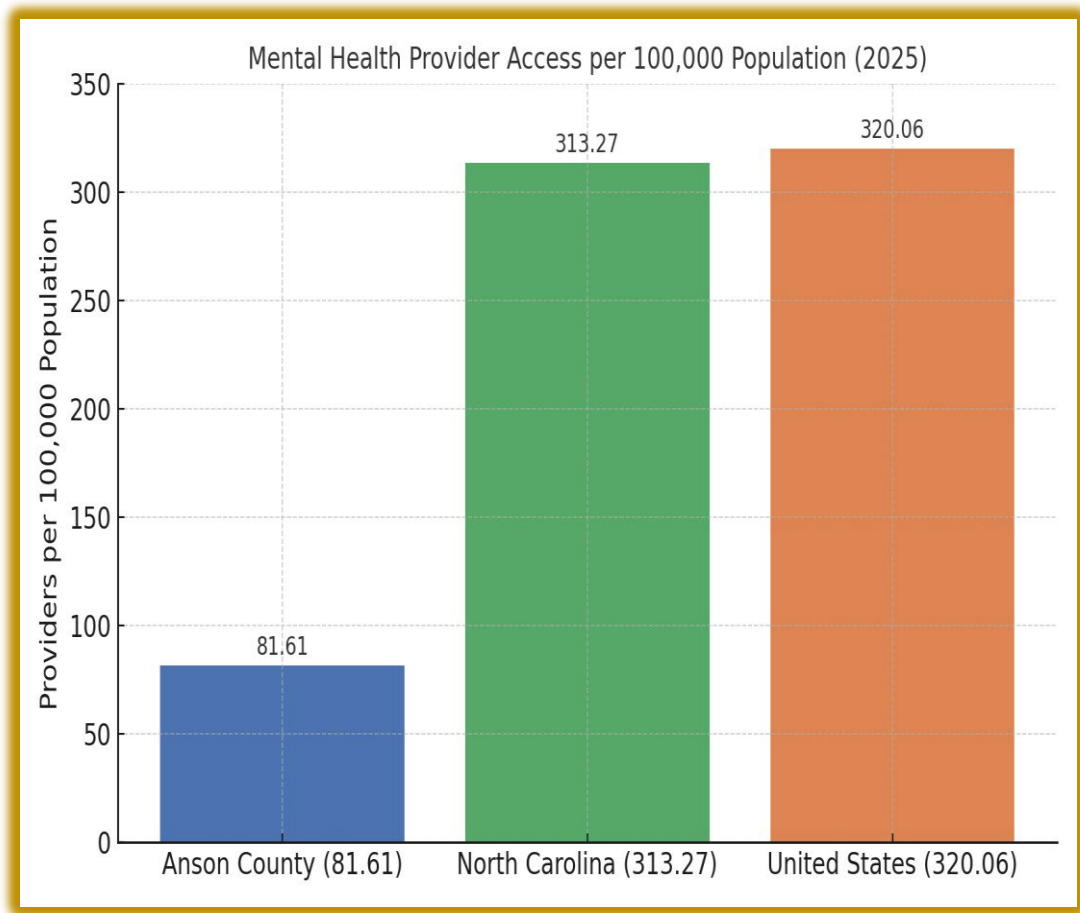
Access to Care - Mental Health Providers

As of 2025, Anson County reported only 18 licensed mental health providers serving an approximate population of 22,000, resulting in a provider-to-population ratio of just 81.61 per 100,000 residents. This number reflects registered professionals with a CMS National Provider Identifier (NPI), including psychiatrists, psychologists, licensed counselors, and clinical social workers.

This figure is significantly below benchmark rates. North Carolina reports an average of 313.27 providers per 100,000 population, while the national average stands at 320.06. Anson County falls short by over 230 providers per 100,000 compared to both the state and national averages. Despite having 17 mental health facilities in the county, the provider shortage remains a critical concern.

This shortage likely results in limited access to mental health care, longer wait times, and unmet treatment needs for county residents. Addressing this disparity will require strategic efforts, including provider recruitment incentives, investment in telehealth, and integration of mental health services into schools and primary care settings. Figure 15 below gives comparison data in the county, state and National.

Figure 16 Mental health providers per 100,000 population – Anson County compared to North Carolina and United States



Data Source: Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPES). May 2025.

Transportation & Access

Vehicle Access

According to the 2023 American Community Survey (ACS 5-Year), commuting in Anson County is heavily car-dependent. A total of 6,820 people commute by car, truck, or van of which 3,565 are men and 3,255 women. Most households have at least one vehicle: 1,273 own one, 2,952 have two, and 3,696 have three or more. Still, 357 households report no vehicle access, raising concerns about barriers to employment or healthcare.

Driving alone is the primary commute mode, used by 6,204 individuals, 2,292 from two-vehicle households and 2,904 from households with three or more vehicles. Carpooling accounts for 1,454 commuters, including 277 from households without a vehicle, suggesting shared or borrowed transportation. Use of alternatives is minimal: 61 walk, 47 bike or use other methods, and no one reports using public transit. Meanwhile, 512 people work from home, most (361) from households with three or more vehicles. These trends point to the need for expanded transportation options and targeted infrastructure investments.

Commuting Time

Anson County workers spend a total of 210,670 minutes commuting to work, indicating the extent of time investment associated with employment mobility. The majority of this commute time, 195,400 minutes, occurs within North Carolina. Notably, 64,095 minutes are spent commuting to jobs within the county, while 131,305 minutes are attributed to residents traveling to jobs in other counties across the state. An additional 15,270 minutes is spent by those commuting to out-of-state work locations.

This distribution highlights a workforce that is significantly reliant on employment outside county boundaries. The elevated external commuting rate may reflect limited local job availability and contributes to longer average travel times, potentially increasing transportation costs and time-related burdens for households.

Figure 17 Aggregate Travel Time to Work – Anson County, NC

Category	Minutes
Total Aggregate Travel Time	210,670
Worked in State of Residence	195,400
Worked in County of Residence	64,095
Worked Outside County of Residence	131,305
Worked Outside State of Residence	15,270

Source: U.S. Census Bureau, American Community Survey (ACS) 5-Year Estimates, 2023.

Montgomery County

Montgomery County is a largely rural area located in central North Carolina, characterized by demographic changes and persistent economic pressures typical of many rural regions in the state. The county contends with population stagnation, an aging labor force, and constrained industrial development, all of which influence access to essential services such as healthcare, education, transportation, and housing. These factors shape local economic resilience and community health. A clear understanding of Montgomery County's distinct demographic and economic landscape is critical for designing targeted, sustainable strategies that foster inclusive development and long-term community vitality.

Demographics

Population

Montgomery County's current population is estimated at 25,874 as of 2023, reflecting a continued decline compared to the previous decade. Since 2010, when the population stood at 27,611, the county has experienced a decrease of approximately 6.3%, driven by gradual out-migration and potentially aging demographics. While the decline was relatively steady over the years, a sharper drop occurred between 2020 and 2022, when the population fell from 27,223 to 25,839. This is a reduction of over 5% in just two years. The slight increase of 35 residents between 2022 and 2023 may suggest early signs of stabilization, but the overall trend remains downward. This pattern reflects broader challenges faced by many rural counties, such as limited economic growth and workforce retention. Figure 18 below clearly shows this trend.

Figure 18 Montgomery County Population Trend

Montgomery County Population Trend 2010-2023	
2010	27611
2012	27741
2014	27626
2016	27475
2018	27338
2020	27223
2022	25839
2023	25874

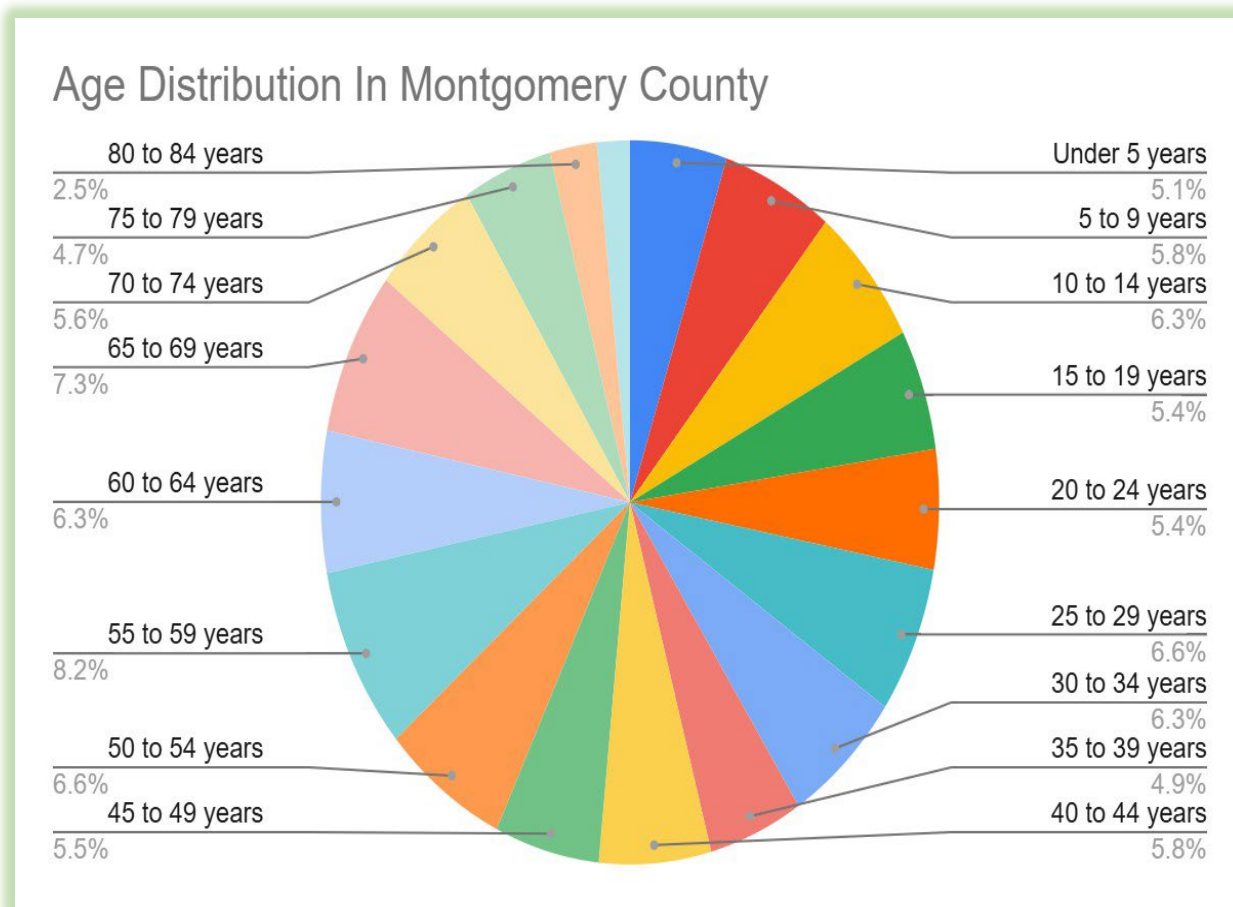
Source: US Census Bureau, American Community Survey ACS 2010- 2023

Age

Montgomery County’s age distribution reveals an aging population with a growing concentration in older age cohorts. The largest age group is residents aged 55–59, followed closely by those in the 50–54 and 65–69 brackets, signaling a demographic shift toward late working-age and early retirement populations. In contrast, younger cohorts, particularly those under 15, are notably smaller, suggesting lower birth rates and potential future declines in school-aged populations.

The working-age segment (25–44) remains stable but is not large enough to offset the aging trend, raising concerns about long-term labor force sustainability. Approximately 9% of the population is aged 75 and older, underscoring the growing demand for senior services, healthcare, and long-term care infrastructure. Overall, the age structure points to demographic pressures typical of rural counties, including youth out-migration, population aging, and the need for adaptive planning in housing, healthcare, and workforce development.

Figure 19 Age Distribution Montgomery County



Source: US Census Bureau, American Community Survey ACS 5 2023

Race

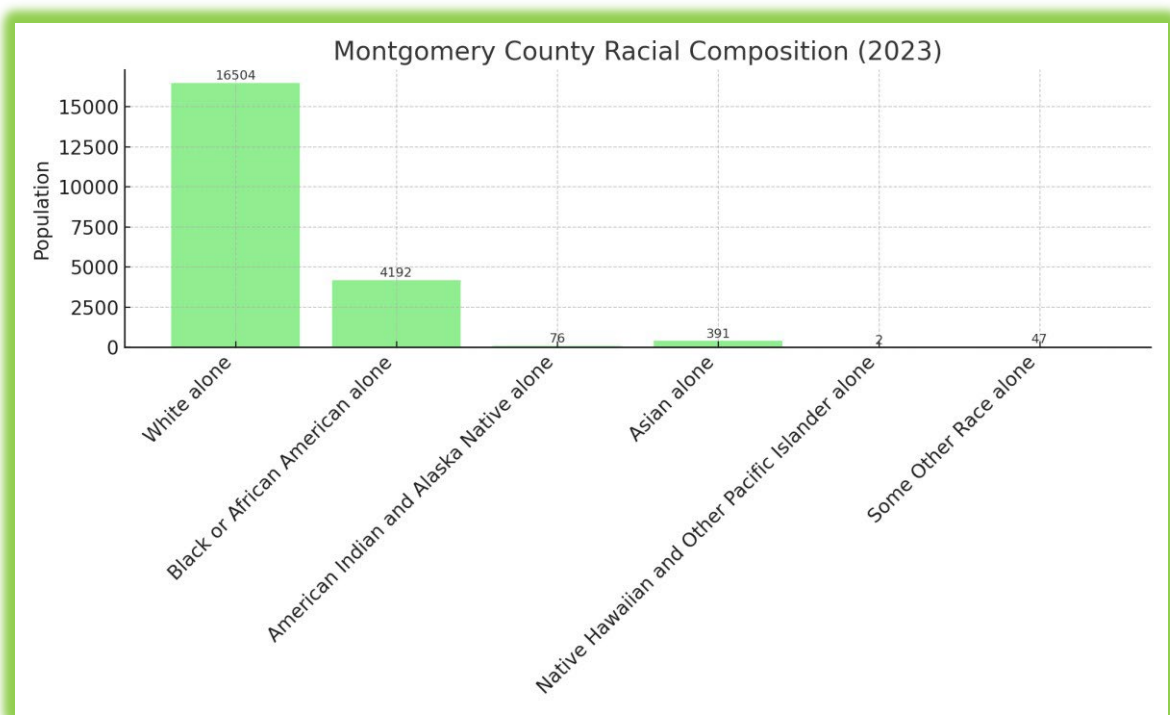
As of 2023, Montgomery County's population remains predominantly White, with White alone accounting for 16,504 individuals, or the clear majority of residents. The Black or African American population is the second-largest racial group, comprising 4,192 individuals, reflecting a significant presence in the county's demographic landscape.

Other racial groups represent much smaller proportions of the population. The Asian community totals 391 individuals, while the American Indian and Alaska Native population accounts for 76 residents. Native

Hawaiian and Other Pacific Islander and Some Other Race groups are minimal, with only 2 and 47 individuals, respectively.

This distribution highlights a relatively homogenous racial makeup, characteristic of many rural counties, but also suggests areas of growing diversity, particularly among Black and Asian populations. These demographic patterns may inform future planning in areas such as cultural services, community engagement, and equitable access to public resources.

Figure 20 Race Distribution Montgomery County



Source: US Census Bureau, American Community Survey ACS 2023

Language

As per American Community Survey data ACS 5 2023, Montgomery County's linguistic landscape remains predominantly English-speaking covering 84% of the county's population. Nevertheless, a significant minority

of 3,987 individuals or roughly 16% of the population speak a language other than English, indicating meaningful, though limited, linguistic diversity within the county.

Among non-English speakers, Spanish is overwhelmingly dominant, spoken by 3,393 individuals, which constitutes about 85% of all non-English-speaking residents. This concentration suggests that Spanish-speaking populations are the primary drivers of language diversity in the county and may warrant focused attention in areas such as bilingual education, healthcare translation, and public service access. Other language groups include 216 speakers of other Indo-European languages such as German, French, or Russian and 378 individuals who speak Asian or Pacific Island languages. Notably, no residents reported speaking languages outside these categories.

This profile suggests that while Montgomery County retains a strong English-speaking majority, the presence of a sizable Spanish-speaking community and smaller multilingual populations underscores the importance of inclusive communication strategies and culturally responsive services.

Economic Conditions and Employment

Income Distribution

In 2023, Montgomery County reported a median household income of \$55,849 and a mean income of \$77,130, reflecting a modestly skewed distribution with some high-income households elevating the average. The most common income bracket is \$50,000–\$74,999 (17.8%), followed by \$35,000–\$49,999 (15.2%).

Approximately 30% of households earn less than \$35,000, highlighting a sizable low-income population. Middle-income ranges between \$75,000 and \$149,999 account for roughly 26%, while 9.5% of households earn above \$150,000.

The data indicate economic diversity, with a concentration in middle-income brackets and a notable lower-income segment, underscoring the importance of targeted economic and social policy interventions.

Figure 21 Percentage of Households in an Income Bracket, Montgomery County

Percentage of Households in an Income Bracket, Montgomery County	
Less than \$10,000	3.9
\$10,000 to \$14,999	7.5
\$15,000 to \$24,999	10.8
\$25,000 to \$34,999	9.4
\$35,000 to \$49,999	15.2
\$50,000 to \$74,999	17.8
\$75,000 to \$99,999	12.5
\$100,000 to \$149,999	13.4
\$150,000 to \$199,999	4.7
\$200,000 or more	4.8
Median income (dollars)	55849
Mean income (dollars)	77130

Source: US Census Bureau, American Community Survey ACS 5 2023

Poverty

Montgomery County's poverty profile, based on the 2023 ACS 5-Year Estimates, includes 25,033 individuals for whom poverty status was assessed. The majority are White (16,830), with significant representation among Black residents (4,012), multiracial individuals (2,092), and those identifying as Hispanic or Latino (3,874). Smaller numbers are observed among American Indian and Alaska Native (291), Asian (404), and other racial groups.

Poverty affects all age groups, with 5,279 individuals under 18, most of them school-aged indicating a continued risk of child poverty. Adults aged 18 to 64 make up the largest share at 14,259, including over 5,000 young adults. Seniors are also impacted, with 5,495 individuals aged 65 and over, highlighting economic vulnerability in later life. Women account for a slightly higher share (13,048) compared to men (11,985), reflecting known gender disparities in income and economic security.

Together, the data reflect a multidimensional poverty landscape, shaped by age, race, and gender, and call for targeted, inclusive policy interventions.

Figure 22 Income-to-Poverty Ratios for Montgomery County Residents

ALL INDIVIDUALS WITH INCOME BELOW THE FOLLOWING POVERTY RATIOS IN MONTGOMERY	
50 percent of poverty level	1302
125 percent of poverty level	5264
150 percent of poverty level	7102
185 percent of poverty level	9457
200 percent of poverty level	10144
300 percent of poverty level	14790
400 percent of poverty level	18557
500 percent of poverty level	20928

Source: US Census Bureau, American Community Survey ACS 5 2023

Figure 22 above reveal that 1,302 individuals live in extreme poverty, with incomes below 50% of the federal poverty level. As the threshold expands, the cumulative number rises sharply: 5,264 fall below 125% of the poverty level, 10,144 are under 200%, and more than 20,900, over 80% of the assessed population live below 500% of the poverty threshold. This distribution highlights that while official poverty affects a segment of residents, a much larger share experiences economic hardship above the formal poverty line but below true self-sufficiency. The data underscore the importance of addressing not just deep poverty but also the broader spectrum of financial strain.

Unemployment Rate

Figure 23 Key Employment and Economic Indicators for Montgomery County (2023–2024)



Source: NC Rural Center – County Data Profile

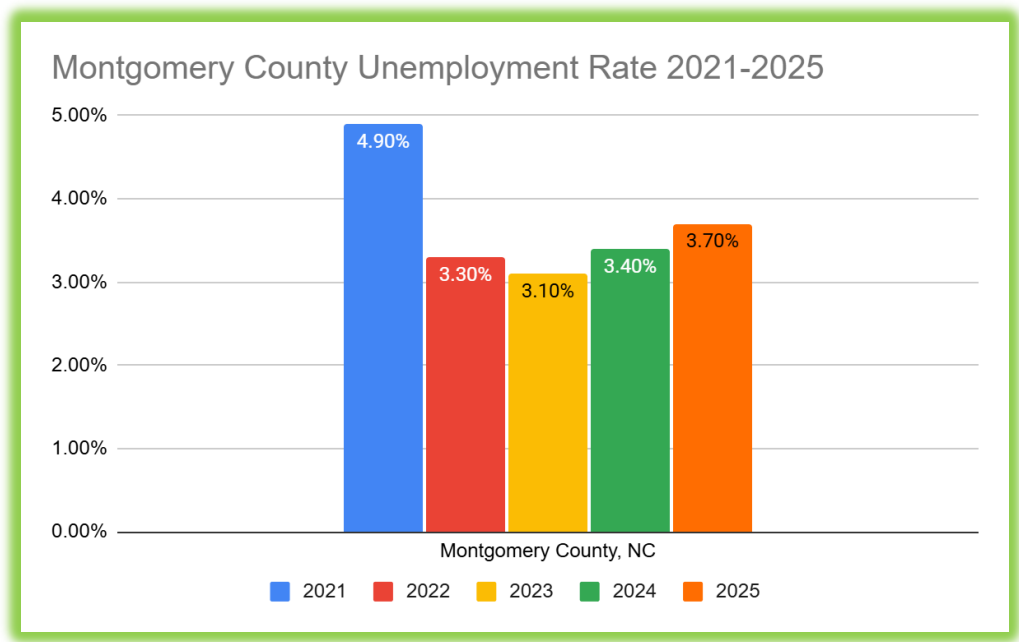
This visual from NC Rural Center suggests that Montgomery County recorded an unemployment rate of 3.6% in 2023, with 407 individuals unemployed out of an average total workforce of 11,229. While this rate is relatively low, it must be viewed in context: only 53.0% of the working-age population participates in the labor force, and just 56.7% of residents work within the county, pointing to potential issues of underemployment or workforce disengagement.

Moreover, average weekly wages (\$916) fall well below the living wage threshold of \$65,108 annually for a family with two adults (one working) and one child. Despite low unemployment on paper, stagnant job growth, just 26 new jobs over the last decade (0% growth).Low wages suggest limited economic mobility and persistent structural barriers to sustainable employment.

Economic Distress & Strategy Implications

In 2025, Montgomery County has been reclassified from Tier Two to Tier One by the North Carolina Department of Commerce, indicating a worsening in its relative economic condition. This change reflects a decline in the county’s overall economic distress ranking, falling from #47 in 2024 to #40 in 2025 out of 100 counties. The primary driver behind this shift is a significant 10-place drop in the county’s median household income rank, signaling increasing financial hardship among households despite a relatively stable unemployment rate.

Figure 24 Montgomery County Unemployment Rate 2021-2025(U.S Department of Labor)



According to U.S Department of labor, Montgomery County has experienced notable shifts in its unemployment trends from 2021 to 2025. The unemployment rate began at 4.9% in 2021, gradually declined to 3.3% in 2022, and reached a low of 3.1% in 2023, reflecting a strong post-pandemic recovery and relative labor market stability. However, this progress slowed in subsequent years, with the rate rising modestly to 3.4% in 2024 and 3.7% in 2025, signaling emerging economic headwinds. While still below pre-pandemic highs, the upward trend suggests challenges in sustaining job growth and wage improvement amid structural constraints.

The county's designation as a Tier One economically distressed area in 2025, based on its drop in median income ranking and overall economic performance, reinforces concerns about long-term labor market resilience. Limited income growth, a narrow industry base, and potential skill mismatches are contributing to the county's vulnerability. Addressing these issues will require targeted investments in workforce development, expanded vocational training, and infrastructure upgrades. Strengthening employer partnerships and promoting entrepreneurship will also be essential to diversify the economy and build employment stability across sectors.

Education and Workforce Readiness

Educational Attainment

Montgomery County’s education profile shows a moderately educated population with notable variation by age group. Among residents aged 18 to 24, 83 percent have completed high school or more, with 7 percent attaining a bachelor's degree or higher. The largest share in this group has some college or an associate’s degree, suggesting early engagement with higher education. In the broader adult population aged 25 and over, 84 percent have at least completed high school, while only 19 percent hold a bachelor’s degree or higher. High school graduates make up the largest single group (6,258), followed by individuals with some college (3,609) and those with associate degrees (2,178).

Age-specific attainment reveals generational shifts. Among adults aged 25 to 34, 89 percent are high school graduates or higher, but only 24 percent have a bachelor’s degree or more. In the 35 to 44 age range, that share drops to 10 percent, suggesting limited degree progression in that cohort. Those aged 45 to 64 show higher overall educational attainment, with 83 percent holding at least a high school diploma and 20 percent holding a bachelor's or higher. The oldest group, 65 and over, has 84 percent high school completion and 20 percent with a bachelor’s or graduate degree, reflecting consistent educational investment over time. These patterns underscore the need for continued support for degree completion among young adults and mid-career residents to strengthen the county’s long-term workforce development. Figure 24 below shows Education attainment in Montgomery County in Age Categories according to American Survey data ACS 5 2023.

Figure 25 Education Attainment in Montgomery County

EDUCATION ATTAINMENT IN MONTGOMERY COUNTY IN AGE CATEGORIES	
Population 18 to 24 years	1850
Less than high school graduate	310
High school graduate (includes equivalency)	588
Some college or associate's degree	819
Bachelor's degree or higher	133

Population 25 years and over	18631
Less than 9th grade	890
9th to 12th grade, no diploma	2099
High school graduate (includes equivalency)	6258
Some college, no degree	3609
Associate's degree	2178
Bachelor's degree	2385
Graduate or professional degree	1212
High school graduate or higher	15642
Bachelor's degree or higher	3597
Population 25 to 34 years	3319
High school graduate or higher	2948
Bachelor's degree or higher	805
Population 35 to 44 years	2792
High school graduate or higher	2224
Bachelor's degree or higher	278
Population 45 to 64 years	6875
High school graduate or higher	5708
Bachelor's degree or higher	1367
Population 65 years and over	5645
High school graduate or higher	4762
Bachelor's degree or higher	1147

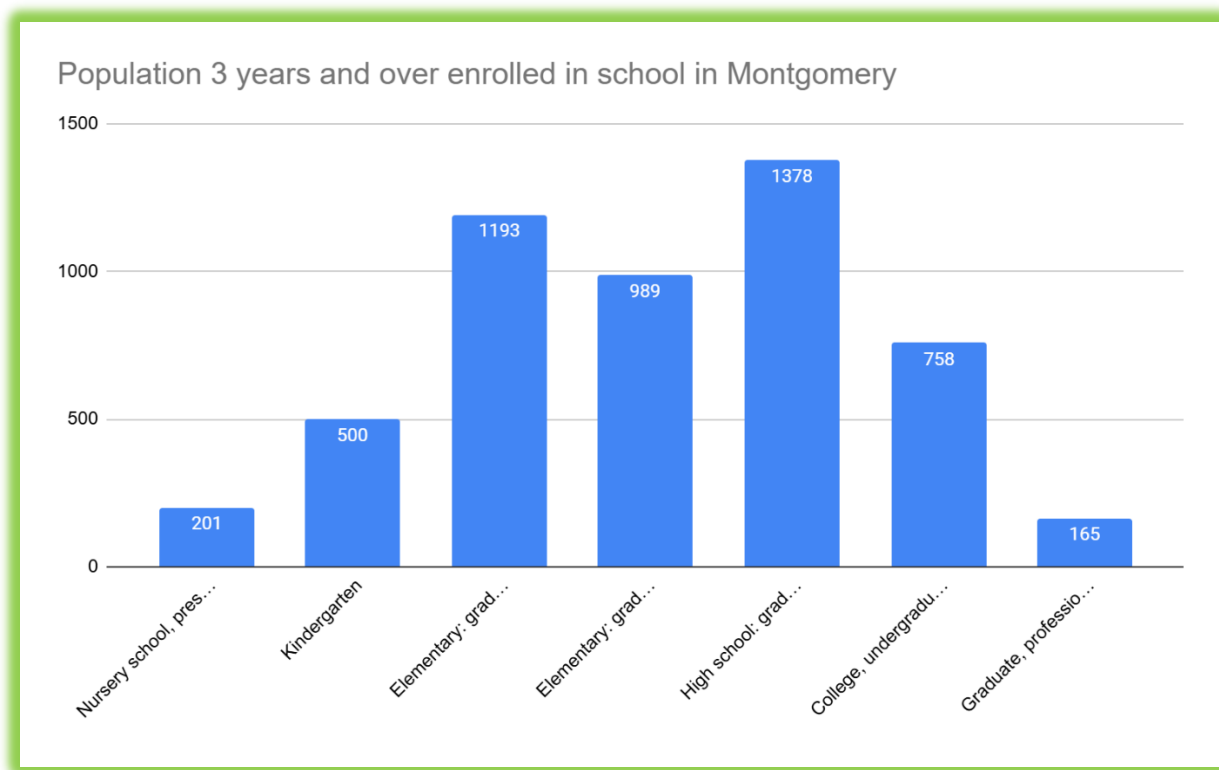
Source: U.S Census Bureau American Community Survey ACS 5 2023

Educational attainment in Montgomery County also varies significantly across racial and ethnic groups. Among White residents, 87% have completed high school and 22% hold a bachelor's degree or higher, while Black residents show lower attainment levels, with 76% completing high school and only 11% earning a bachelor's degree. Asian residents, though fewer in number, demonstrate strong educational outcomes, with 83% high school completion and 40% attaining a bachelor's degree. Hispanic or Latino individuals have a 75% high school graduation rate and 8% college completion, and American Indian residents show the lowest degree attainment. These disparities point to the need for expanded educational access and support systems, particularly for minority populations.

School Enrollment

In Montgomery County, a total of 5,184 individuals aged 3 and over are enrolled in school, with the majority over 78% attending K–12 institutions. Kindergarten through 12th grade enrollment stands at 4,060 students, broken down into 500 in kindergarten, 1,193 in early elementary (grades 1–4), 989 in upper elementary (grades 5–8), and 1,378 in high school (grades 9–12). Early childhood education (nursery and preschool) accounts for 201 students. Postsecondary education includes 758 undergraduate students and 165 enrolled in graduate or professional programs. This distribution highlights the county's concentration in primary and secondary education, with a relatively smaller proportion pursuing higher education, emphasizing the importance of local efforts to support postsecondary pathways. Figure 25 below highlights School enrollment by level in Montgomery County.

Figure 26 School Enrollment by Level in Montgomery County



Source: U.S. Census Bureau American Community Survey ACS 5 2023

Youth Disconnection

According to US Census Bureau, American Community Survey 2023, approximately 7.09% of youth ages 16–19 in Montgomery County are not enrolled in school and not working, closely mirroring the state average of 7.18% and the national rate of 6.8%. This indicates a moderate level of youth disconnection, suggesting that while the issue is not acute, it remains a critical area for strategic intervention. Addressing this gap through expanded career readiness programs, improved access to postsecondary opportunities, and stronger community support systems could help reduce disconnection and enhance long-term economic stability for local youth.

Adult Literacy

Approximately 30.9% of adults in Montgomery County are at or below Level 1, revealing serious gaps in everyday literacy skills. An estimated 38.1% are at or below Level 2, indicating barriers to employment and civic engagement. Over 31% fall below Level 3, underscoring the need for programs that strengthen functional and applied literacy.

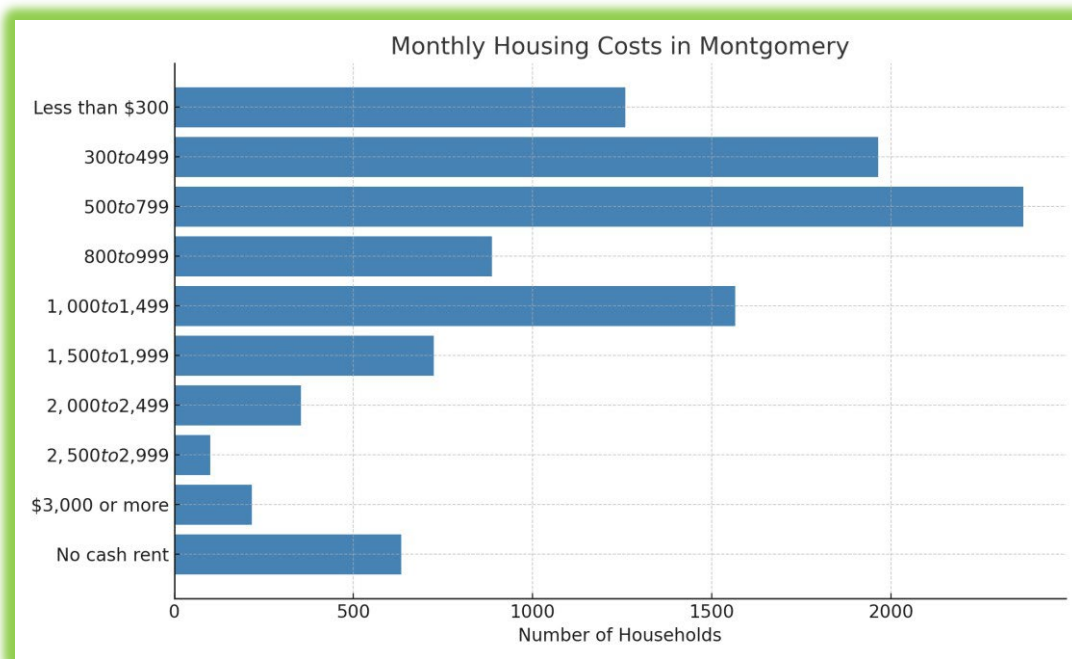
Housing & Community Stability

Housing Affordability

Montgomery County demonstrates a pronounced emphasis on housing affordability, with a significant majority of rental households occupying residences in the low to moderate cost ranges. This distribution highlights a housing market shaped by economic accessibility and constrained high-end rental demand.

- Over 58% of households pay less than \$800 per month in rent.
- The most common rent range is \$500 to \$799, accounting for 2,370 households.
- Mid-tier rent ranges between \$800 and \$1,499 house approximately 26% of renters.
- Only 14.8% of households pay above \$1,500 monthly.
- A notable 6.3% of households report no cash rent.
- The median monthly housing cost is \$681, underscoring the area's overall affordability.

Figure 27 Monthly Housing Costs in Montgomery



Source: U.S Census Bureau American Community Survey ACS 5 2023

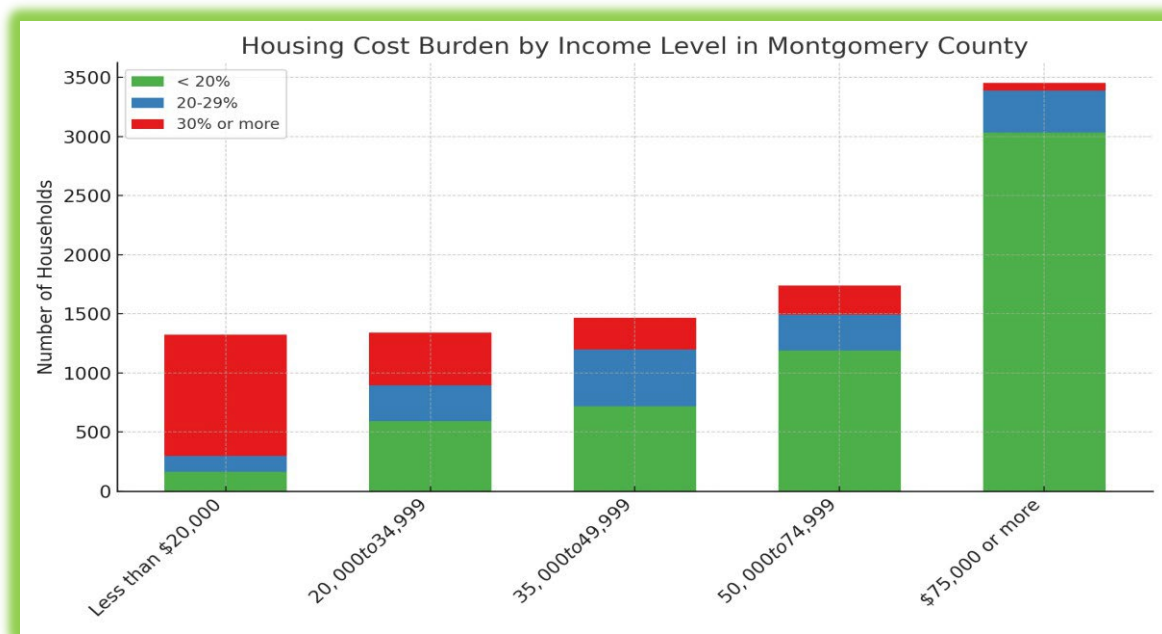
Housing Cost Burden by Income Level

Housing cost burden in Montgomery County varies significantly by income level, with a pronounced impact on lower-income households. The data reveals the extent to which residents across different income brackets allocate a substantial portion of their earnings toward housing, highlighting key stress points in affordability.

- Among households earning less than \$20,000 annually, 77.4% are severely cost-burdened, spending 30% or more of income on housing.
- The burden decreases with higher income: 33.4% in the \$20,000–\$34,999 bracket are severely cost-burdened.
- At incomes of \$35,000–\$49,999, 18.5% are burdened, while only 14.1% are in the \$50,000–\$74,999 range.
- Households earning \$75,000 or more show minimal burden, with just 1.9% paying over 30% of income on housing.

These trends underscore the disproportionate burden borne by lower-income residents. Figure 27 below clearly gives a visual representation of housing cost burden in Montgomery County

Figure 28 Housing cost burden in Montgomery County 2023



Source: U.S Census Bureau American Community Survey ACS 5 2023

Household Mobility Overview: Owner vs. Renter Occupancy

Owner-occupied housing units in Montgomery County include 16,932 individuals who remained in the same house over the past year, compared to 5,929 individuals in renter-occupied units. This indicates that 74 percent of the stable population are homeowners, while renters make up 26 percent. Among those who moved in the past year, 745 individuals relocated within the same county, 187 from owner-occupied and 558 from renter-occupied units.

Another 933 moved from a different county within the same state, including 479 from owner-occupied and 454 from renter-occupied housing. Out-of-state movers totaled 291, with 208 homeowners and 83 renters.

Additionally, 10 individuals moved into Montgomery County from abroad, all of whom moved into owner-occupied housing. In total, 1,095 movers were renters, accounting for 61 percent of the mobile population. Despite comprising only 39 percent of total households, renters exhibit significantly higher mobility. This mobility trend suggests heightened housing instability among renters, underscoring the importance of targeted rental housing support and retention strategies.

Figure 29 Geographical Mobility in Montgomery County

GEOGRAPHICAL MOBILITY IN MONTGOMERY COUNTY	
Householder lived in owner-occupied housing units	17,816
Householder lived in renter-occupied housing units	7,024
Same house 1 year ago:	22,861
Householder lived in owner-occupied housing units	16,932
Householder lived in renter-occupied housing units	5,929
Moved within same county:	745
Householder lived in owner-occupied housing units	187
Householder lived in renter-occupied housing units	558
Moved from different county within same state:	933
Householder lived in owner-occupied housing units	479
Householder lived in renter-occupied housing units	454
Moved from different state:	291

Householder lived in owner-occupied housing units	208
Householder lived in renter-occupied housing units	83
Moved from abroad:	10
Householder lived in owner-occupied housing units	10
Householder lived in renter-occupied housing units	0

Source: U.S Census Bureau American Community Survey ACS 5 2023

Health, Safety & Behavioral Well-being

Tobacco Usage - Current Smokers

According to 2022 data from the CDC's Behavioral Risk Factor Surveillance System, Montgomery County reported an adult smoking rate of 16.6% (crude) and 17.1% (age-adjusted), both higher than the state (14.3% and 14.8%) and national averages (12.9% and 13.2%). This positions the county above average in tobacco use, though lower than nearby Anson and Richmond counties. The elevated age-adjusted rate highlights a persistent health risk that is not solely due to demographics. These figures underscore the need for enhanced tobacco control measures, including expanded cessation services, targeted outreach, and efforts to address the social and economic drivers of tobacco dependence.

Physical Inactivity

Montgomery County reports a physical inactivity rate of 16.5 percent among adults aged 20 and older, indicating that approximately one in six residents do not participate in any leisure-time physical activity. This figure places Montgomery County with lower rates of inactivity compared to several nearby counties, including Moore and Richmond. More than 3,500 adults in the county remain inactive, which presents a substantial health concern given the well-established links between physical inactivity and conditions such as heart disease, type 2 diabetes, and obesity.

Addressing physical inactivity in Montgomery County requires continued investment in supportive environments that encourage movement. Initiatives may include expanding safe public spaces, enhancing access to recreational facilities, and providing culturally appropriate outreach and education. These findings are based on data from the Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 2021.

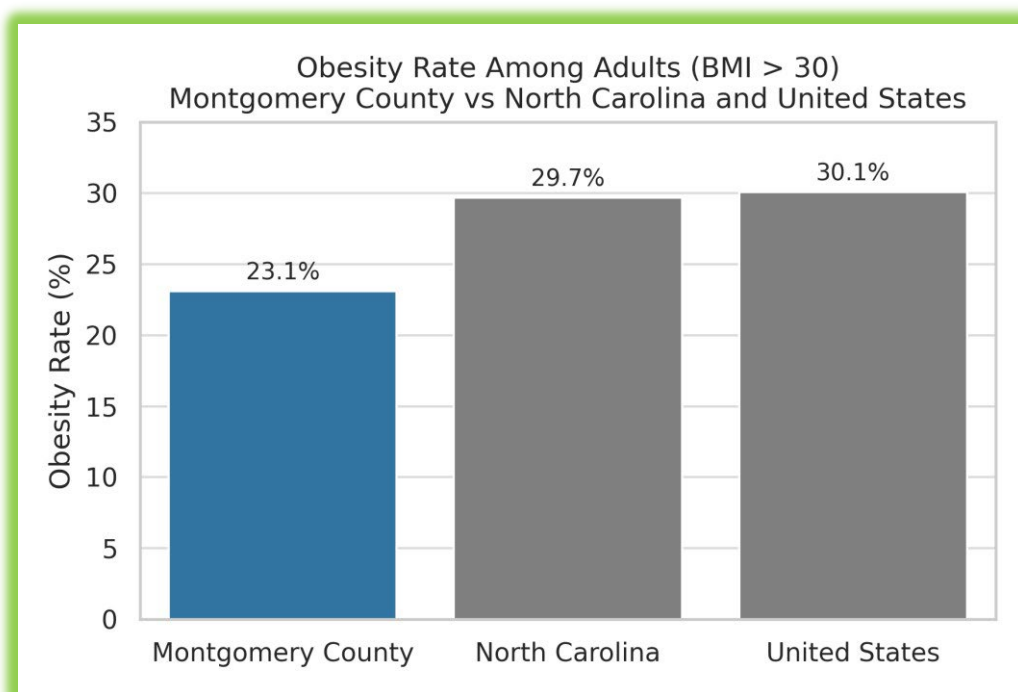
Obesity

According to the Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion (2021), Montgomery County has 4,560 adults aged 20 and older classified as obese, with a body mass index (BMI) over 30. This accounts for 23.1 percent of the county's adult population.

Although this is below the state average of 29.7 percent and the national average of 30.1 percent, it represents a substantial portion of the population at risk for chronic health issues such as heart disease, diabetes, and certain cancers.

Addressing obesity in Montgomery County requires a multi-sectoral approach that goes beyond individual behavior change. Efforts should focus on increasing access to affordable and nutritious foods through food assistance programs, farmers' markets, and local grocery incentives. At the same time, promoting physical activity through urban planning, such as building walkable neighborhoods, safe recreational spaces, and active transportation infrastructure, can foster healthier lifestyles. Furthermore, comprehensive health education delivered in schools, workplaces, and healthcare settings must emphasize long-term behavior change, nutritional literacy, and early intervention. These strategies, implemented cohesively, are critical for mitigating the long-term health and economic impacts of obesity in Montgomery County. Figure 29 gives a comparison visual of obesity rate in Montgomery county vs North Carolina and United States.

Figure 30 Obesity Rate in Montgomery county vs North Carolina and U.S



Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2021.

Healthcare Access

Insurance Coverage

Health insurance coverage plays a vital role in ensuring access to preventive services, chronic disease treatment, and financial protection from medical costs. In Montgomery County, recent data from 2023 reveal broad coverage among older adults, particularly those aged 65 and above, reflecting the strong presence of Medicare. However, notable gaps persist among younger, working-age adults especially males between the ages of 19 and 44 who account for the highest proportions of the uninsured.

Among Montgomery's male population, coverage rates remain high in childhood and increase steadily with age, reaching full coverage among those 65 and older. Yet, young adult males aged 19 to 44 collectively represent over 1,100 uninsured individuals. A similar trend is observed among females, with the largest coverage gaps appearing between ages 26 and 54. While seniors enjoy nearly universal coverage, the disparities in insurance access for adults under 45 underscore the need for targeted outreach, enrollment assistance, and policy interventions to close the remaining gaps. Figure 31 and 32 shows the number of insured and uninsured individuals between males and females in Montgomery County.

Figure 31 Coverage by Age – Men in Montgomery County

Age Group	Total Population	With Insurance	Without Insurance
Under 6 years	905	786	119
6 to 18 years	1898	1835	63
19 to 25 years	1122	778	344
26 to 34 years	1191	891	300
35 to 44 years	1215	753	462
45 to 54 years	1351	1062	289
55 to 64 years	1819	1645	174

65 to 74 years	1559	1559	0
75 years and over	980	980	0

Figure 32 Coverage by Age – Women in Montgomery County

Age Group	Total Population	With Insurance	Without Insurance
6 to 18 years	1980	1894	86
19 to 25 years	882	684	198
26 to 34 years	1573	1208	365
35 to 44 years	1356	1088	268
45 to 54 years	1682	1316	366
55 to 64 years	1833	1643	190
65 to 74 years	1738	1708	30
75 years and over	1218	1218	0

Source: U.S Census Bureau American Community Survey ACS 5 2023

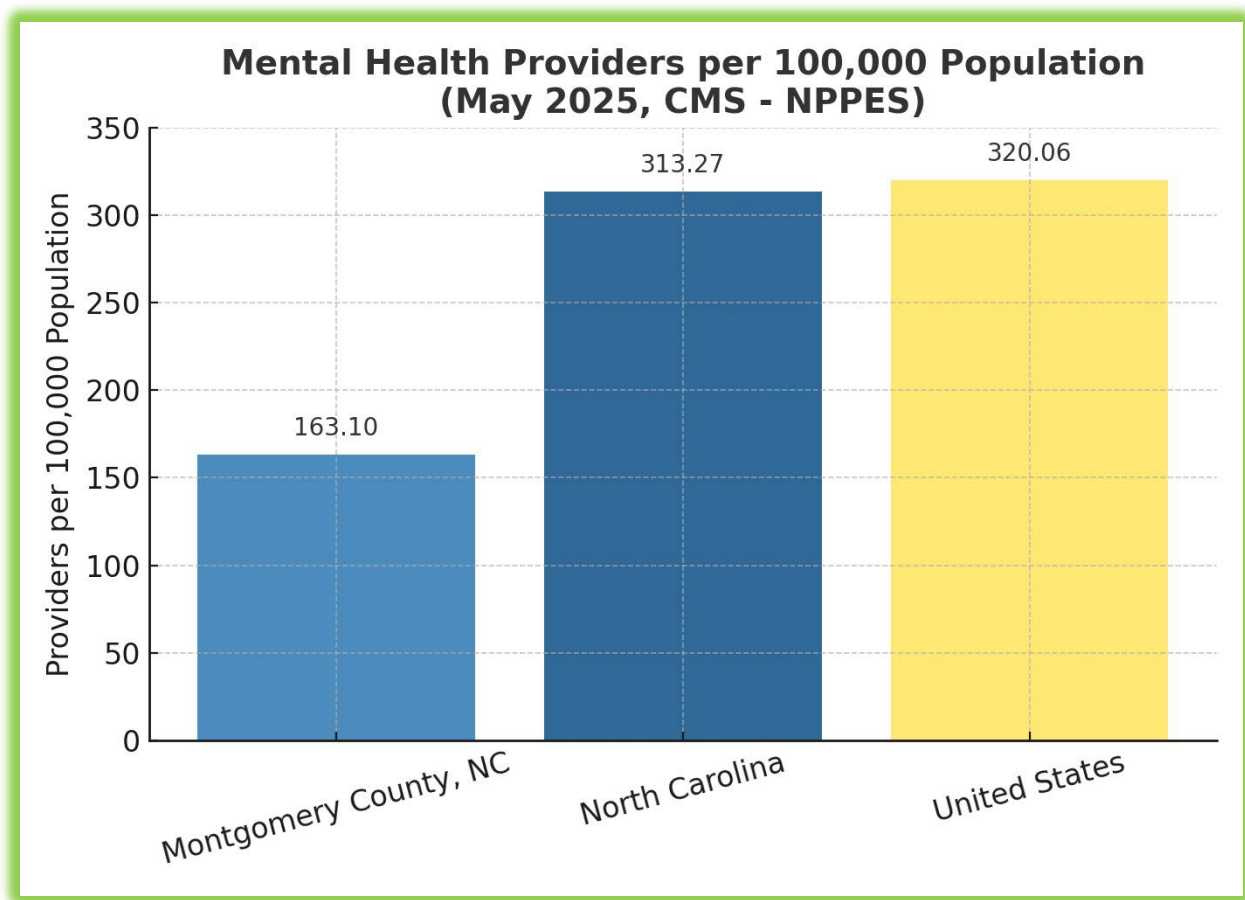
Access to Care - Mental Health Providers

As of 2025, Montgomery County, North Carolina, reported 42 licensed mental health providers serving a population of approximately 25,751. This translates to a provider-to-population ratio of 163.10 per 100,000 residents. These figures reflect professionals registered with a CMS National Provider Identifier (NPI), including psychiatrists, psychologists, licensed clinical social workers, and counselors. Although Montgomery County fares better than some of its neighboring rural areas, it still falls significantly short of broader benchmarks. The North Carolina state average stands at 313.27 providers per 100,000 residents, while the national average is slightly higher at 320.06. This means Montgomery County has roughly 150 fewer providers per 100,000

residents than the state and national norms. Despite hosting 15 mental health facilities, this gap points to a persistent shortfall in provider availability.

Such shortages can lead to reduced access to timely mental health care, longer wait times, and growing unmet needs among the population. Addressing this gap will require focused interventions such as targeted recruitment efforts, expansion of tele psychiatry, partnerships with educational institutions, and broader integration of behavioral health into primary care systems. Figure 32 below illustrates the disparity between Montgomery County, the state, and the national average.

Figure 33 Mental health providers per 100,000 population – Montgomery County compared to North Carolina and United States



Data Source: Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPPES). May 2025.

Transportation & Access

Vehicle Access

According to the American Community Survey ACS 5-Year Estimates (2023), commuting in Montgomery County shows a strong reliance on personal vehicles. A total of 9,835 individuals use a car, truck, or van to commute while 8,934 drive alone and 901 carpool. Most households report vehicle access: 1,559 have one vehicle, 3,125 have two, and 5,842 have three or more. However, 186 households report having no vehicle, indicating a transportation access gap that may impact employment, healthcare, and other services.

Driving alone remains the dominant mode of transportation. Carpooling plays a smaller role, and no residents reported using public transportation. Only 153 people walk to work, and 107 use other means such as bicycles or motorcycles. Additionally, 617 individuals work from home, many likely from households with multiple vehicles.

The data highlights the county's dependence on private vehicles and points to the need for more diverse transportation options. Addressing gaps in mobility could involve flexible transit solutions, improved infrastructure for walking and biking, and targeted support for zero-vehicle households.

Commuting Time

Montgomery County workers spend a total of 268,635 minutes commuting to work, indicating the extent of time investment associated with employment mobility. The majority of this commute time, 265,105 minutes, occurs within North Carolina. Notably, 98,610 minutes are spent commuting to jobs within the county, while 166,495 minutes are attributed to residents traveling to jobs in other counties across the state. An additional 3,530 minutes is spent by those commuting to out-of-state work locations.

This distribution highlights a workforce that is heavily reliant on employment opportunities outside county boundaries. The high rate of inter-county commuting may reflect limited local job availability and contributes to longer average travel times, potentially increasing transportation costs and time-related burdens for households.

Figure 34 Aggregate Travel Time to Work – Montgomery County, NC

Category	Minutes
Total Aggregate Travel Time	268635
Worked in State of residence:	265105
Worked in county of residence	98610
Worked outside county of residence	166495
Worked outside State of residence	3530

Source: U.S. Census Bureau, American Community Survey (ACS) 5-Year Estimates, 2023.

Moore County

Demographics

Population

Moore County, located in central North Carolina, has experienced steady population growth over the past decade, reflecting its increasing appeal as both a residential and retirement destination. Known for its blend of small-town charm, natural beauty, and growing economic opportunities, the county has attracted new residents consistently since 2010. As of 2023, Moore County’s population reached 102,840 up from 85,914 in 2010, representing an overall growth of approximately 19.7% over 13 years.

This upward trend highlights a stable pattern of expansion, with population gains recorded in every measured interval. From 2010 to 2020, the county added over 13,000 residents, an indication of robust growth during that decade. Notably, the population increase between 2018 and 2020 was among the highest, with more than 3,600 new residents, potentially due to increased migration into the area and local development projects. Growth has continued into the early 2020s, with more than 2,000 new residents added between 2022 and 2023 alone. This consistent rise underscores Moore County’s growing role as a desirable place to live, work, and retire, and signals continued expansion likely influenced by both quality of life and regional economic trends. Figure 35 below clearly shows this trend.

Figure 35 Moore County Population Trend 2010-2023

MOORE COUNTY POPULATION TREND 2010-2023	
2010	85914
2012	88314
2014	90579
2016	93070
2018	95629
2020	99263

2022	100759
2023	102840

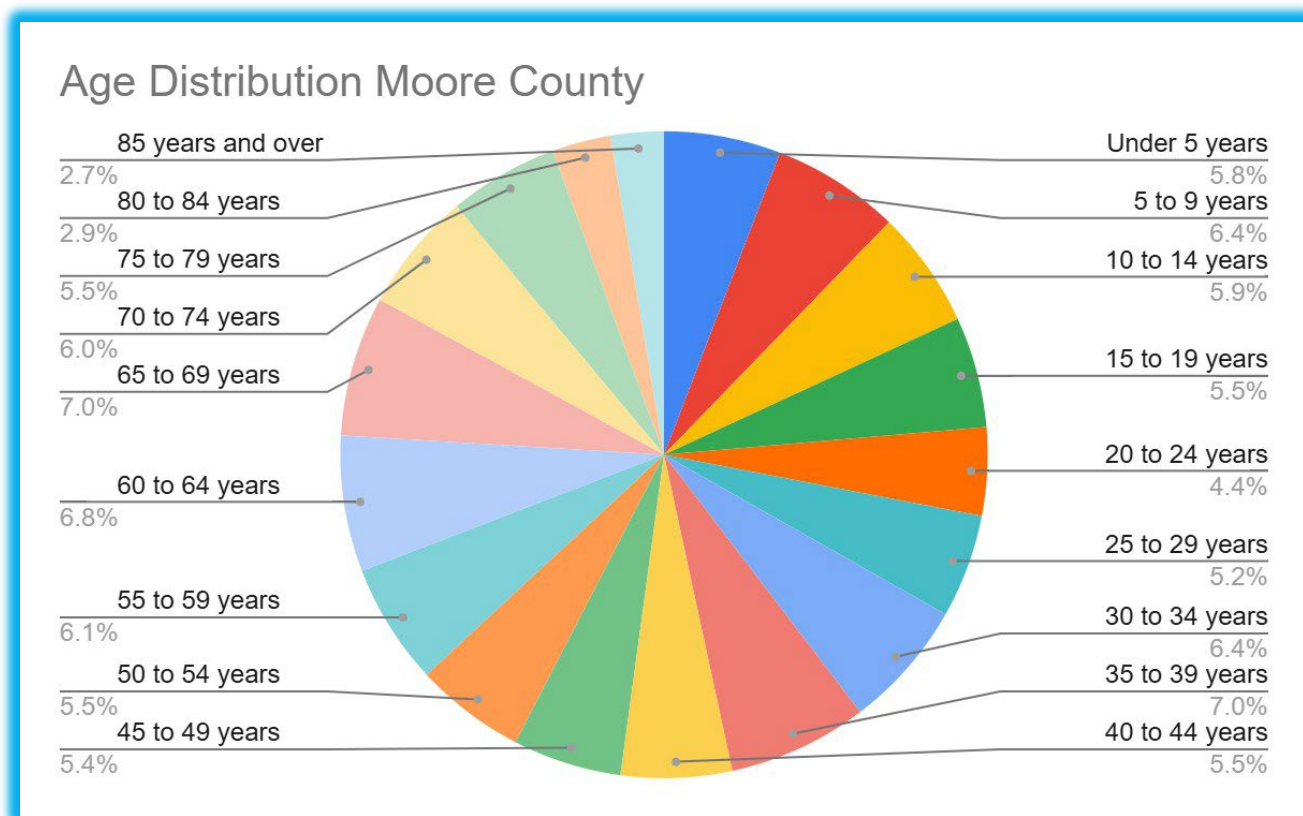
Source: US Census Bureau, American Community Survey ACS 2010- 2023

Age

Moore County’s age distribution reflects a balanced mix of younger families, working-age adults, and a notably large older population, characteristic of a region attractive to both families and retirees. According to the most recent data, children under the age of 15 account for approximately 18% of the population, with notable counts in the 5 to 9 age group (6,582) and under 5 (6,003), indicating a healthy presence of young families in the area. The adult population is well represented across working-age groups, particularly ages 30 to 39, with 6,608 in the 30–34 range and 7,173 in the 35–39 range the highest of any 5-year age group suggesting strong workforce engagement and economic participation.

A key demographic feature of Moore County is its significant older population. Residents aged 60 and above make up a substantial portion of the total, with 7,000 aged 60–64, 7,193 aged 65–69, and 6,150 aged 70–74. In total, those aged 60 and older represent roughly 29% of the population, reinforcing the county’s role as a popular destination for retirees. The sizeable senior population has implications for healthcare services, housing, and community planning. This age structure, with a solid base of youth and a strong senior segment, indicates a dual identity for Moore County: both a family-friendly area and a retirement hub.

Figure 36 Age Distribution Moore County

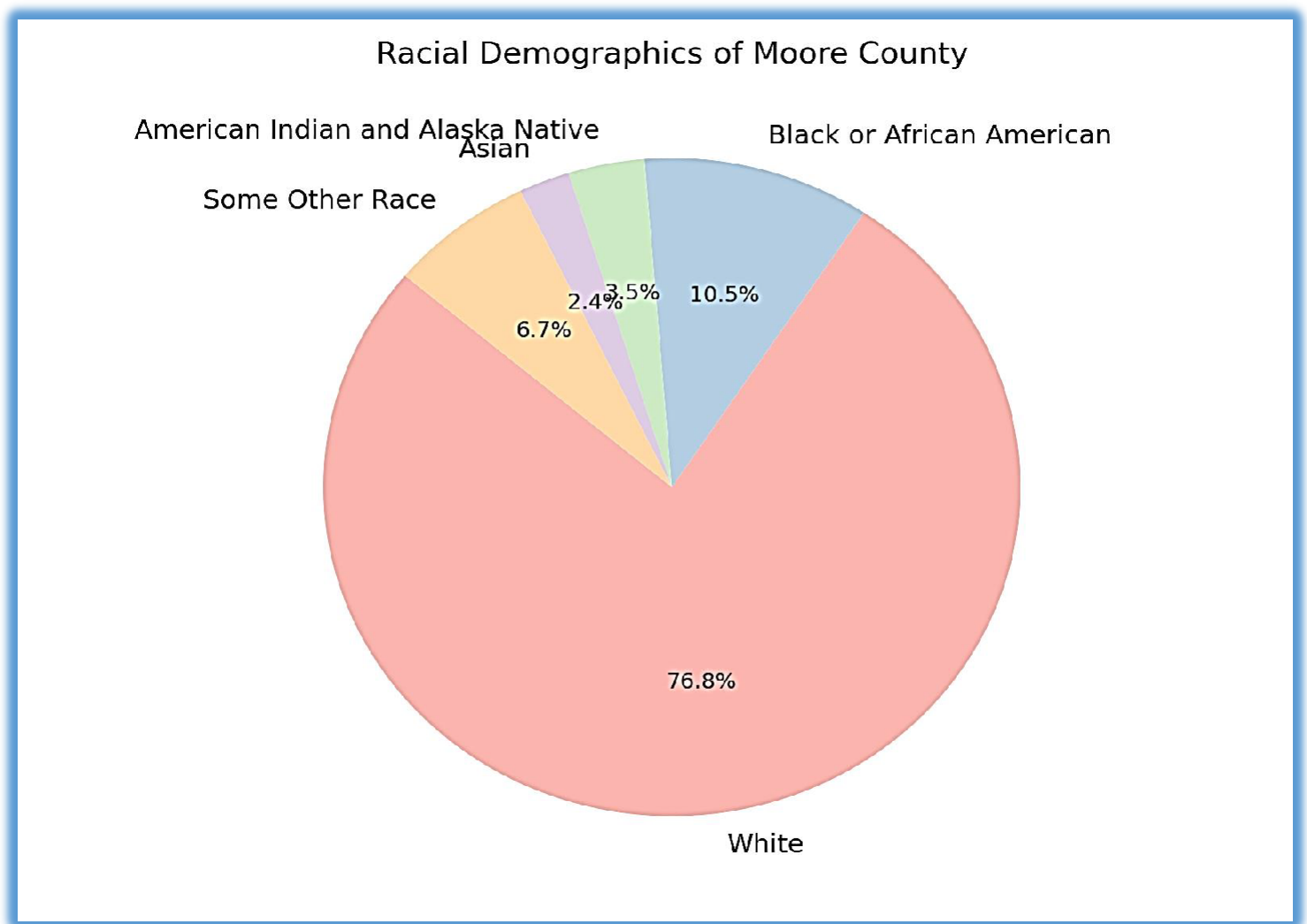


Source: US Census Bureau, American Community Survey ACS 5 2023

Race

Moore County is predominantly White (84.5%), with Black or African American residents making up 11.6%. Smaller groups include American Indian and Alaska Native (3.9%), Asian (2.6%), and “Some Other Race” (7.4%). Data for Native Hawaiian and Pacific Islander residents is not reported. This racial makeup suggests limited diversity, though the presence of other racial identities indicates evolving demographics. These patterns are important for shaping local policies, services, and inclusion efforts.

Figure 37 Racial Composition in Moore County



Source: US Census Bureau, American Community Survey ACS 5 2023

Language

As per American Community Survey data ACS 5 2023, Moore County remains predominantly English-speaking, with approximately 92.2 percent of residents, or 89,275 individuals, reporting English as the only language spoken at home. However, a notable portion of the population, 7.8 percent or 7,562 residents, speak a

language other than English, highlighting the county's growing linguistic diversity. This shift, though modest, has implications for public services, education, and community engagement strategies.

Among non-English speakers, Spanish is the most common, spoken by 5,350 individuals, which accounts for over 70 percent of all multilingual residents. Other languages spoken include Indo-European languages (940 individuals), Asian and Pacific Island languages (927), and other languages (345). While smaller in number, these groups contribute to the cultural complexity of Moore County and underscore the importance of ensuring access to multilingual resources in public-facing institutions.

Economic Conditions and Employment

Income Distribution

Moore County's income distribution shows a generally affluent population with a strong middle and upper-income presence. The median household income is \$82,837, and the mean is \$105,326, reflecting higher earners who raise the average. About 39.7% of households earn \$100,000 or more—20.3% earn \$100K–\$149K, 8.7% earn \$150K–\$199K, and 10.7% earn \$200K or more. On the lower end, only 4.1% earn under \$10,000, and 13.5% fall between \$10K and \$34,999. Mid-income ranges are also strong: 15.6% earn \$50K–\$74,999 and 13.7% earn \$75K–\$99,999. Overall, the county has a solid middle class and a notable share of high earners, though some income disparity exists.

Figure 38 Percentage of Households in an Income Bracket, Montgomery County

Percentage of Households in an Income Bracket, Montgomery County	
Less than \$10,000	4.1
\$10,000 to \$14,999	3.9
\$15,000 to \$24,999	6.1
\$25,000 to \$34,999	6.1
\$35,000 to \$49,999	10.8
\$50,000 to \$74,999	15.6
\$75,000 to \$99,999	13.7
\$100,000 to \$149,999	20.3
\$150,000 to \$199,999	8.7
\$200,000 or more	10.7
Median income (dollars)	82837

Mean income (dollars)	105326
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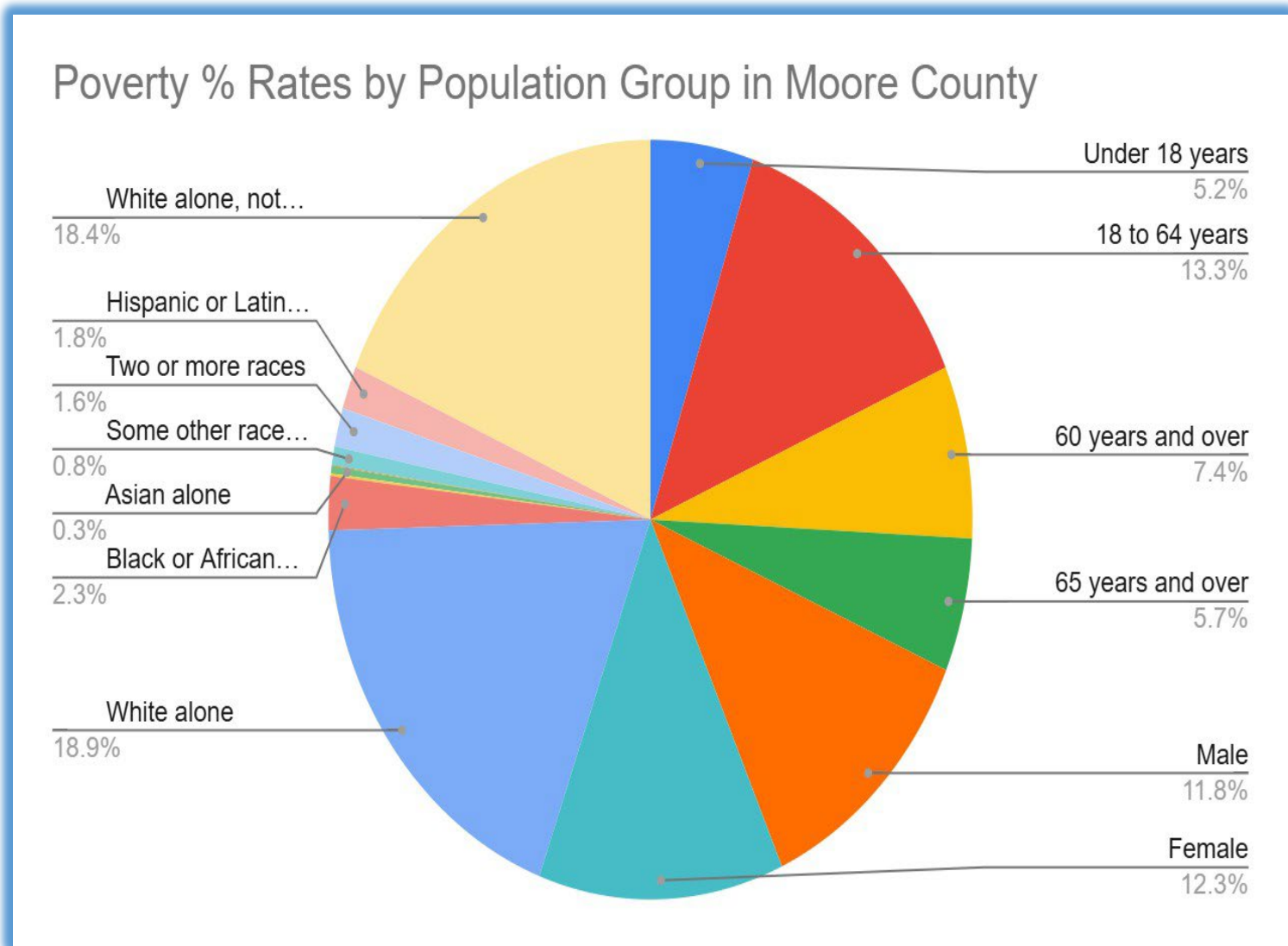
Source: US Census Bureau, American Community Survey ACS 5 2023

Poverty

Based on the 2023 ACS 5-Year Estimates, Out of a total population of 101,170 individuals for whom poverty status is determined in Moore County, poverty affects a diverse cross-section of residents by age, gender, and race. Children under 18 years of age make up 21,673 of this population, while adults aged 18 to 64 account for the majority at 55,653. Notably, 30,834 individuals are aged 60 and over, with 23,844 specifically aged 65 and above, suggesting that a significant portion of older adults are included in poverty-related assessments. In terms of gender, the distribution is nearly even, with 49,585 males and 51,585 females.

Racially, the majority of the population for whom poverty status is assessed identifies as White alone (79,389), followed by Black or African American alone (9,592) and individuals of two or more races (6,912). Smaller portions identify as American Indian and Alaska Native (450), Asian (1,318), Native Hawaiian or Other Pacific Islander (151), and some other race (3,358). Additionally, 7,710 individuals identify as Hispanic or Latino of any race, while 77,248 are White alone and not of Hispanic or Latino origin. These figures underscore the importance of addressing poverty through inclusive and culturally responsive strategies that recognize both age-related and racial disparities within the county. Figure 38 shows Poverty % Rates by Population Group in Moore County

Figure 39 Poverty % Rates by Population Group in Moore County



Source: US Census Bureau, American Community Survey ACS 5 2023

Unemployment Rate

Figure 40 Key Employment and Economic Indicators for Moore County (2023–2024)



Source: NC Rural Center – County Data Profile

Based on the above data visual from the NC Rural Center, Moore County reported an unemployment rate of 3.4% in 2023, indicating a relatively low level of joblessness compared to state and national averages in recent years. The county had a total of 1,481 unemployed individuals out of a labor force in which 41,555 people were employed on average throughout the year. This low unemployment rate suggests a stable labor market and continued economic recovery following disruptions such as the COVID-19 pandemic.

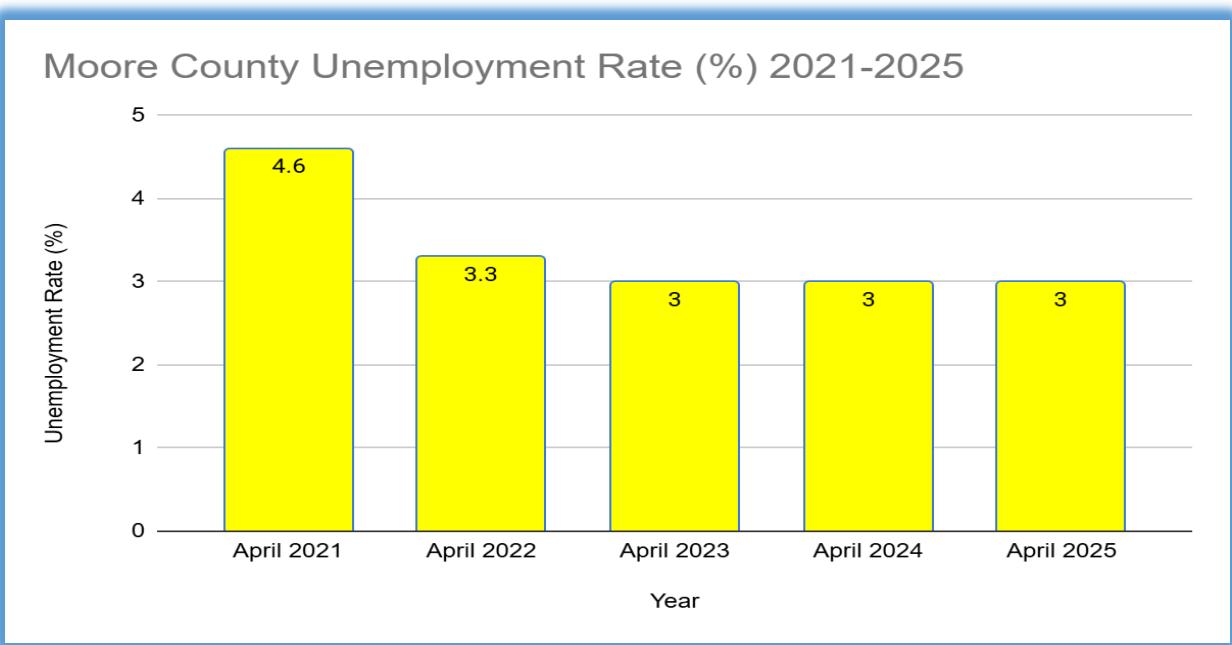
Despite the low unemployment, the labor force participation rate was 57.3%, which means just over half of the working-age population is either employed or actively seeking work. This may reflect a mix of retirees, students, or individuals not currently seeking employment, particularly in a county with a significant number of older residents. Furthermore, Moore County experienced a 20% employment growth from 2013 to 2023, adding 6,445 jobs over the decade. This strong job growth, combined with a modest unemployment rate, paints a picture of a healthy and expanding local economy, though efforts to boost participation among underrepresented groups could further strengthen the labor force.

Economic Distress & Strategy Implications

Moore County, North Carolina, has demonstrated a notable trajectory of economic resilience over the past five years, with consistently declining and stabilized unemployment rates that reflect strong labor market fundamentals and effective local economic stewardship.

According to US Department of Labor, between April 2021 and April 2025, Moore County, exhibited a clear trend of economic improvement, as measured by its steadily declining and ultimately stable unemployment rate. In April 2021, the county's unemployment rate stood at 4.6%, but by April 2023, it had dropped to 3.0% a significant indicator of post-pandemic recovery. This positive trajectory was likely influenced by Moore County’s economic base in healthcare, tourism, and its proximity to military installations. From 2023 to 2025, the unemployment rate held steady at 3.0%, reflecting a labor market that may be approaching full employment and signaling overall economic stability within the region. Figure 41 below shows the trend from April 2021 –April 2025

Figure 41 Moore County Unemployment Rate 2021-2025



Source: US Department of Labor, Bureau of Labor Statistics. 2025 - April.

Education and Workforce Readiness

Educational Attainment

Educational attainment in Moore County, North Carolina, reflects a well-educated adult population, particularly among residents aged 25 and older. Of the 74,008 individuals in this group, 92.7% have attained a high school diploma or higher, and 40.9% hold a bachelor's degree or higher indicators of strong educational infrastructure and access. Among young adults aged 18 to 24, over 66% have either some college education, an associate's degree, or higher, suggesting ongoing engagement in postsecondary education. These figures point to a robust pipeline for workforce development, especially in sectors requiring mid- to high-skill credentials.

A closer look at the age breakdown reveals a strong correlation between age and educational advancement. Residents aged 25 to 44 show the highest levels of bachelor’s attainment, with over 40% of those aged 35–44 holding at least a four-year degree. Meanwhile, older adults aged 65 and over also demonstrate substantial educational credentials, with 38.9% holding a bachelor's or higher likely reflecting retiree in-migration into the region’s resort and retirement communities. Moore County’s education profile supports its competitive economic positioning, but sustained efforts will be needed to close gaps for those without diplomas, especially in the 9th–12th grade segment of the 25+ population. Figure 41 below shows Education attainment in Montgomery County in Age Categories according to American Survey data ACS 5 2023.

Figure 42 Education Attainment in Moore County

EDUCATION ATTAINMENT IN MOORE COUNTY IN AGE CATEGORIES	
Population 18 to 24 years	6457
Less than high school graduate	1206
High school graduate (includes equivalency)	1832
Some college or associate's degree	2567
Bachelor's degree or higher	852

Population 25 years and over	74008
Less than 9th grade	2203
9th to 12th grade, no diploma	3174
High school graduate (includes equivalency)	14783
Some college, no degree	14758
Associate's degree	8811
Bachelor's degree	18084
Graduate or professional degree	12195
High school graduate or higher	68631
Bachelor's degree or higher	30279
Population 25 to 34 years	11931
High school graduate or higher	11177
Bachelor's degree or higher	5181
Population 35 to 44 years	12865
High school graduate or higher	11977
Bachelor's degree or higher	5823
Population 45 to 64 years	24481
High school graduate or higher	22832

Bachelor's degree or higher	9658
Population 65 years and over	24731
High school graduate or higher	22645
Bachelor's degree or higher	9617

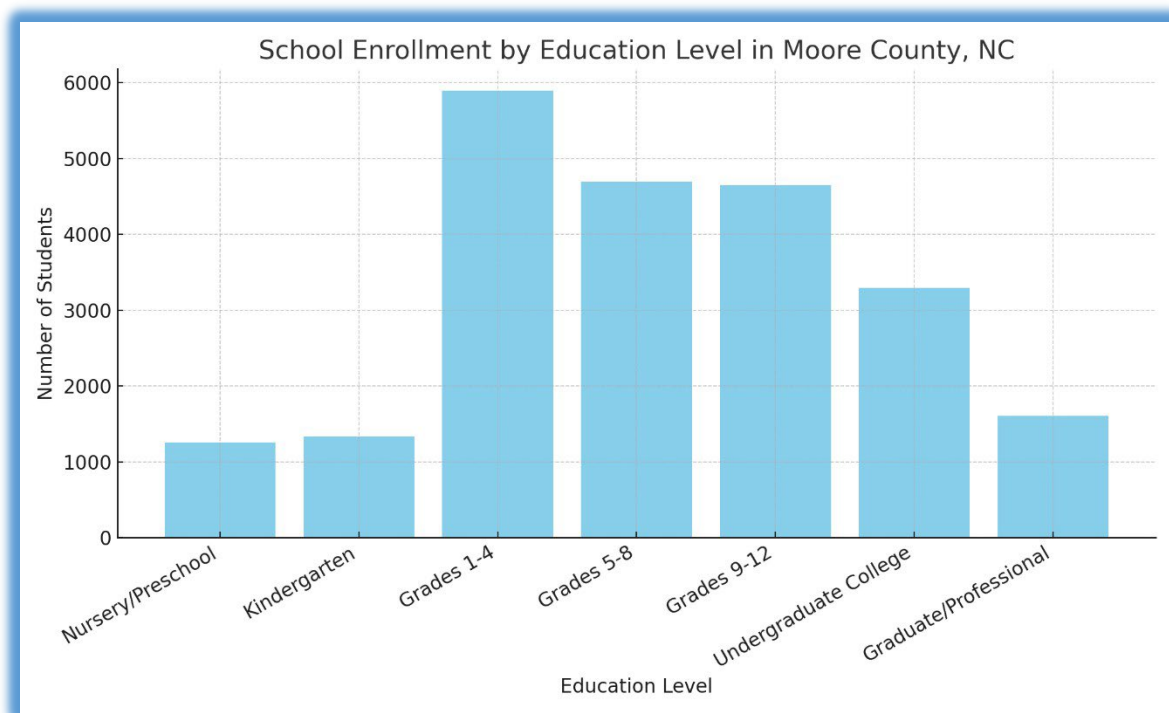
Source: U.S Census Bureau American Community Survey ACS 2023

School Enrollment

In Moore County, a total of 22,722 individuals aged 3 years and over are enrolled in school, reflecting the county's strong engagement in educational systems from early childhood through advanced studies. Of this population, 1,255 children are enrolled in nursery school or preschool, and the largest portion, 16,568 students, are enrolled in the K–12 system. Within this group, enrollment is fairly balanced across education levels, with 1,328 in kindergarten, 5,894 in grades 1 to 4, 4,696 in grades 5 to 8, and 4,650 in high school (grades 9 to 12). This distribution suggests steady retention through each stage of the primary and secondary education pipeline.

Beyond K–12, 3,292 students are enrolled in undergraduate college programs, and 1,607 are pursuing graduate or professional degrees, indicating that approximately 21.7% of all enrolled students are engaged in post-secondary education. This level of college and graduate school participation signals a healthy pursuit of higher education opportunities among Moore County residents, contributing to long-term workforce preparedness and upward economic mobility. The data also provides a foundation for assessing educational resource allocation and planning to support continued growth and student success across all academic levels. Figure 43 below highlights School enrollment by level in Moore County.

Figure 43 School Enrollment by Level in Moore County



Source: U.S. Census Bureau American Community Survey ACS 5 2023

Youth Disconnection

According to US Census Bureau, American Community Survey 2023, out of a total population of 4,375 individuals aged 16 to 19 in Moore County, approximately 237 are neither enrolled in school nor participating in the labor force, resulting in a youth disconnection rate of 5.42%. This rate is notably lower than both the state average of 7.25% and the national average of 6.82%, indicating relatively stronger engagement of local youth in education or employment. The county's performance in this area suggests effective local education systems, access to job opportunities, or community programs that help keep young people connected to productive pathways. However, the presence of over 200 disconnected youth still highlights the need for ongoing investments in targeted outreach, career readiness initiatives, and alternative education or vocational programs to support this vulnerable demographic.

Adult Literacy

Only 16.3% of adults in Moore County are at or below Level 1, which is notably lower than in neighboring counties. However, 30.8% are at or below Level 2, meaning many still struggle with complex literacy tasks. More than half (52.9%) fall below Level 3, highlighting the importance of intermediate-to-advanced adult education and digital literacy programs. This is according to National Center for Education Statistics, NCES - Program for the International Assessment of Adult Competencies.

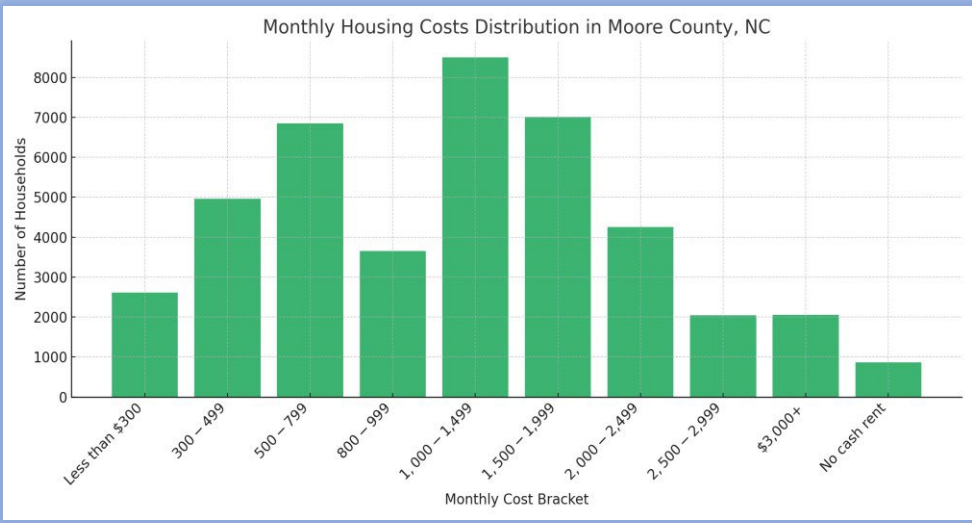
Housing & Community Stability

Housing Affordability

Moore County’s monthly housing costs reflect a broad and economically diverse residential landscape. The largest share of households (8,497) pay between \$1,000 and \$1,499 per month, followed by 7,013 households in the \$1,500 to \$1,999 range. On the more affordable end, 6,851 households pay between \$500 and \$799, while 2,616 spend less than \$300, indicating a presence of low-income or subsidized housing options. Additionally, 866 households report living rent-free, possibly due to assistance programs or informal living arrangements.

With a median monthly housing cost of \$1,162, Moore County trends slightly above the national average, highlighting moderate but rising housing expenses. The distribution suggests a growing middle-class housing demand alongside a notable high-cost segment, with over 4,100 households paying \$2,000 or more monthly. This variety underscores the importance of balanced housing policies to address affordability while supporting diverse income groups and future residential development

Figure 44 Monthly Housing Costs in Moore County



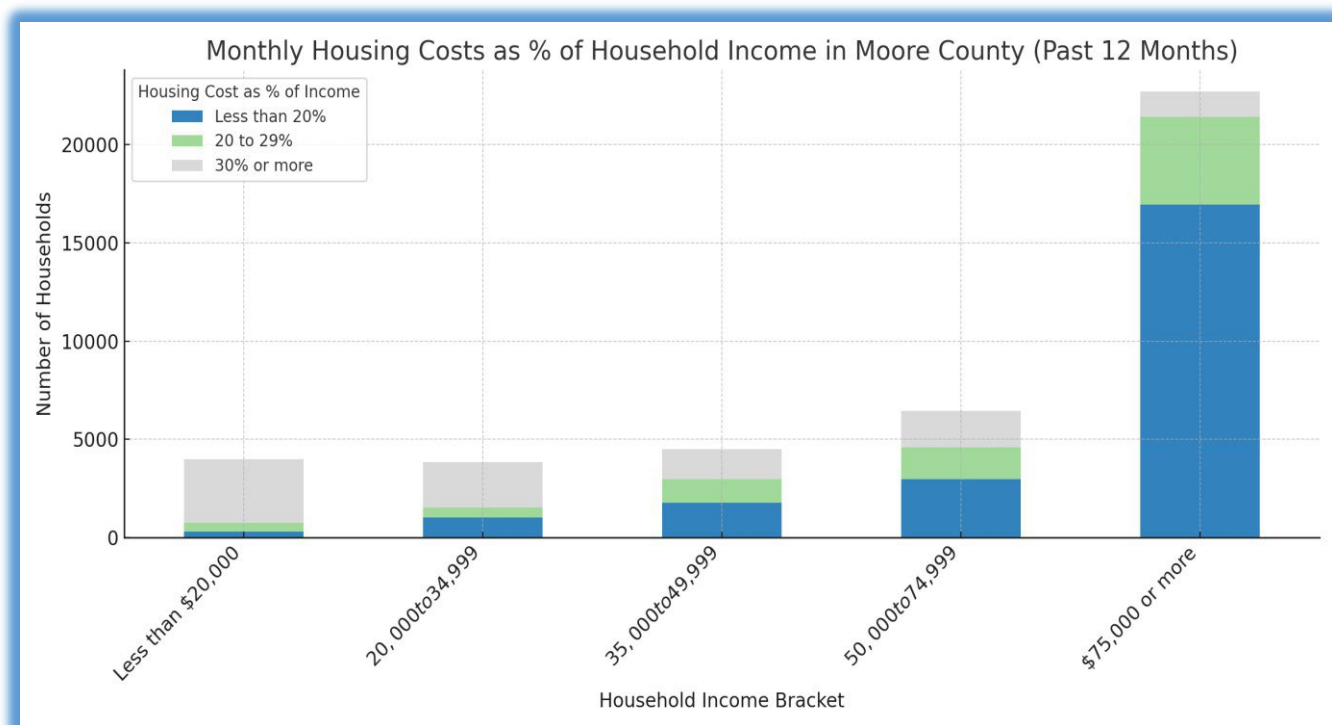
Source: U.S Census Bureau American Community Survey ACS 5 2023

Housing Cost Burden by Income Level

In Moore County, housing affordability is a significant concern for lower-income households. Among those earning less than \$20,000 annually, over 80% spend 30% or more of their income on housing, indicating severe financial strain. Similarly, a majority of households in the \$20,000–\$34,999 bracket are also cost-burdened.

In contrast, housing becomes increasingly affordable as income rises. Nearly 75% of households earning \$75,000 or more spend less than 20% of their income on housing. This contrast highlights a clear affordability gap and suggests the need for targeted support for low-income households to ensure housing stability across the county. Figure 45 below clearly highlights Monthly Housing Cost as a percentage of Household Income in Moore County.

Figure 45 Housing Cost as a percentage of Household Income in Moore County



Source: U.S. Census Bureau American Community Survey ACS 2023

Household Mobility Overview: Owner vs. Renter Occupancy

Moore County exhibits a relatively stable residential base, with 86,613 individuals (out of approximately 100,000+ residents) reporting that they lived in the same house one year ago. Among these, the majority resided in owner-occupied housing units (72,373), while a smaller segment (14,240) lived in renter-occupied units. This high proportion of non-movers reflects residential stability, particularly among homeowners.

Mobility within the county and from external regions is moderate. A total of 5,422 individuals moved within the county, with a nearly even split between owners (3,031) and renters (2,391). In-migration from other counties within North Carolina accounted for 3,325 people, predominantly renters. An additional 4,399 individuals moved into Moore County from other states signifying a notable interstate migration trend while 797 residents moved in from abroad, showing the county's small but present international mobility. Across all categories, renter-occupied units consistently show higher mobility, suggesting that rental households contribute significantly to the county's residential turnover.

Figure 46 Geographical Mobility in Moore County

GEOGRAPHICAL MOBILITY IN MOORE COUNTY	
Householder lived in owner-occupied housing units	79851
Householder lived in renter-occupied housing units	20705
Same house 1 year ago:	86613
Householder lived in owner-occupied housing units	72373
Householder lived in renter-occupied housing units	14240
Moved within same county:	5422
Householder lived in owner-occupied housing units	3031
Householder lived in renter-occupied housing units	2391
Moved from different county within same state:	3325
Householder lived in owner-occupied housing units	986
Householder lived in renter-occupied housing units	2339
Moved from different state:	4399
Householder lived in owner-occupied housing units	2972
Householder lived in renter-occupied housing units	1427
Moved from abroad:	797

Householder lived in owner-occupied housing units	489
Householder lived in renter-occupied housing units	308

Source: U.S. Census Bureau American Community Survey ACS 5 2023

Health, Safety & Behavioral Well-being

Tobacco Usage - Current Smokers

2022 data from the CDC's Behavioral Risk Factor Surveillance System indicate that Moore County demonstrates a comparatively low rate of adult tobacco use, with 12.5% of residents aged 18 and over identified as current smokers (crude rate) and an age-adjusted rate of 12.6%. These figures are below both the North Carolina average of 14.8% and the national average of 13.2%, indicating that Moore County is outperforming in tobacco prevention and control relative to broader benchmarks. This suggests effective local health strategies or demographic factors contributing to reduced smoking prevalence. Nonetheless, with more than one in eight adults still using tobacco, ongoing public health efforts remain essential to further minimize smoking-related health risks.

Physical Inactivity

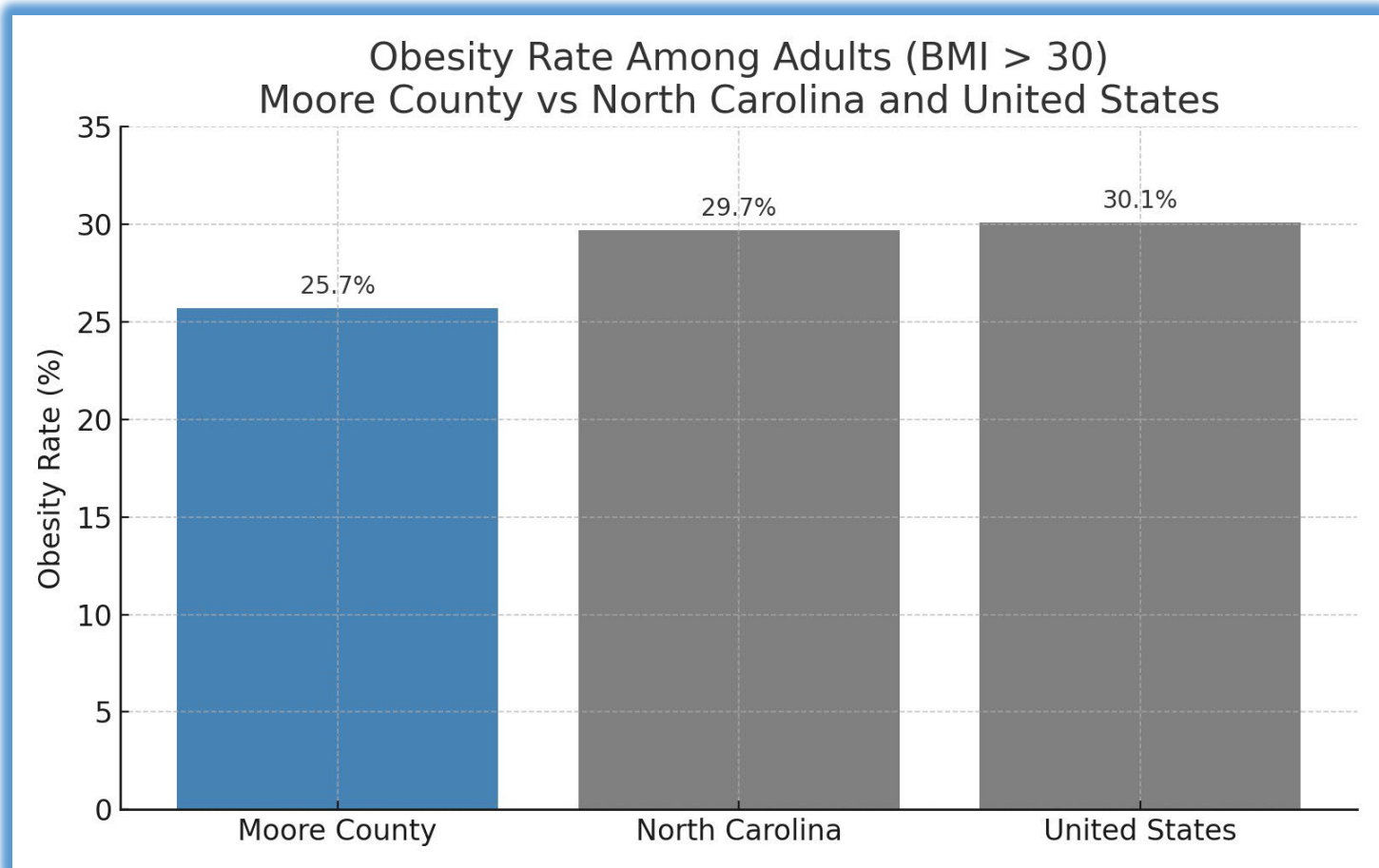
Moore County has shown a generally positive trend in reducing physical inactivity among adults over the 18-year span from 2004 to 2021. Beginning at 17.4% in 2004, the percentage of adults reporting no leisure-time physical activity fluctuated, peaking at 22.8% in 2007, before gradually declining in recent years. By 2021, physical inactivity had dropped to 18.1%, indicating improvement from previous highs and aligning closely with state (18.3%) and national (19.5%) averages. The steady downward trend since 2016 where inactivity was 21.3% suggests increasing public health awareness or enhanced access to physical activity resources. However, the persistence of nearly one in five adults being inactive signals the need for continued investment in local wellness initiatives and equitable access to recreational opportunities. These findings are based on data from the Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 2021.

Obesity

In Moore County, 25.7% of adults aged 20 and over are classified as obese, with a Body Mass Index (BMI) greater than 30.0. This represents approximately 20,004 individuals out of a total adult population of 78,756. While Moore County's obesity rate is slightly lower than both the state average of 29.7% and the national average of 30.1%, it still indicates that more than one in four adults are living with obesity. This prevalence points to ongoing public health concerns related to chronic disease risks such as diabetes, heart disease, and

hypertension. Although Moore County performs marginally better than broader benchmarks, the data underscores the importance of sustaining and enhancing local strategies that promote nutrition, active living, and accessible healthcare interventions.

Figure 47 Obesity Rate in Moore county vs North Carolina and U.S



Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2021.

Healthcare Access

Insurance Coverage

Insurance coverage report from U.S Bureau ACS 2023 for Moore County reveals both promising strengths and critical gaps in access across demographic segments. Children and older adults exhibit strong coverage rates, with near-universal enrollment among individuals under 18 and over 65 years of age. This suggests effective outreach and enrollment for Medicaid and Medicare programs, respectively. However, concerning trends are evident among working-age adults, particularly males between the ages of 26 and 54. The uninsured rate spikes to 24.1% in males aged 26–34 and reaches 23.0% in those aged 45–54, underscoring a systemic issue in coverage accessibility or affordability during prime employment years. Females fare slightly better across age groups, though notable gaps persist, especially in the 26–34 (15.9%) and 45–54 (12.5%) cohorts.

These findings highlight the need for targeted interventions that expand health insurance access for lower and middle-income working adults, who may not qualify for public programs but also lack affordable employer-sponsored or marketplace plans. Public health agencies and local governments should prioritize outreach strategies, flexible enrollment mechanisms, and premium support initiatives. Efforts to bridge these gaps are vital not only for individual health security but also for broader public health resilience and economic productivity in Moore County. Figure 48 and 49 shows the number of insured and uninsured individuals between males and females in Moore County.

Figure 48 Coverage by Age – Men in Moore County

Age Group	With Insurance	Without Insurance	Total	% Uninsured
Under 6	3106	214	3320	6.4%
6 to 18	8706	46	8752	0.5%
19 to 25	2744	432	3176	13.6%
26 to 34	3307	1051	4358	24.1%
35 to 44	4948	388	5336	7.3%
45 to 54	4229	1265	5494	23.0%

55 to 64	6250	165	6415	2.6%
65 to 74	5981	0	5981	0.0%
75+	5016	359	5375	6.7%

Source: U.S Census Bureau American Community Survey ACS 2023

Figure 49 Coverage by Age – Female in Moore County

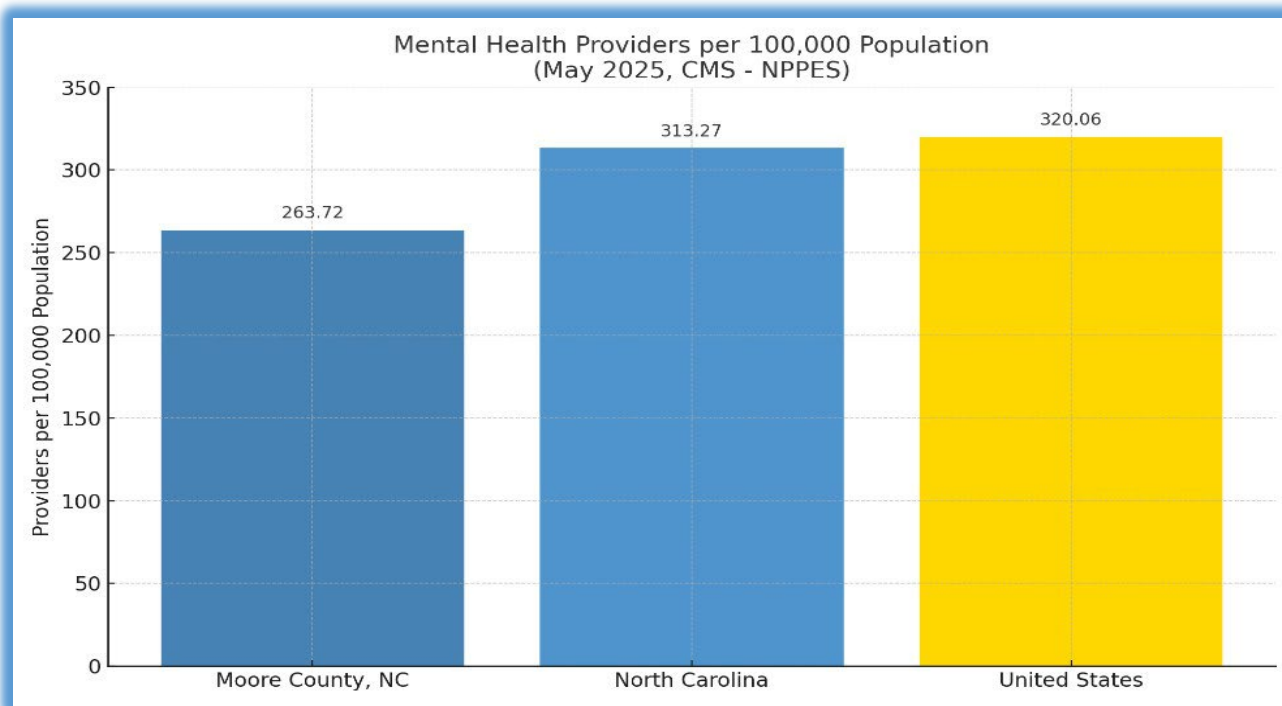
Age Group	With Insurance	Without Insurance	Total	% Uninsured
Under 6	4561	0	4561	0.0%
6 to 18	7021	216	7237	3.0%
19 to 25	2733	125	2858	4.4%
26 to 34	4369	828	5197	15.9%
35 to 44	7369	236	7605	3.1%
45 to 54	5041	723	5764	12.5%
55 to 64	6784	381	7165	5.3%
65 to 74	7096	61	7157	0.9%
75+	6702	0	6702	0.0%

Source: U.S Census Bureau American Community Survey ACS 2023

Access to Care - Mental Health Providers

According to the latest data from the Centers for Medicare and Medicaid Services (CMS) National Provider Identifier (NPI) file, Moore County, NC demonstrates a relatively strong level of access to mental health care compared to surrounding counties. As of 2020, the county had 263 mental health providers, resulting in a provider rate of 263.72 per 100,000 population notably higher than both the North Carolina state average of 313.27 and the national average of 320.06, though Moore trails slightly behind these broader benchmarks. Moore County is also home to 71 dedicated mental health facilities, which support the local network of licensed professionals such as psychiatrists, psychologists, clinical social workers, and specialized counselors. While Moore's provider density is a positive indicator of access, the county's capacity still underscores the need for ongoing investment and coordination to address the increasing demand for mental health services in both rural and urban segments of its population.

Figure 50 Mental health providers per 100,000 population – Moore County compared to North Carolina and United States



Source: U.S Census Bureau American Community Survey ACS 2023

Transportation & Access

Vehicle Access

According to the 2023 American Community Survey (ACS) 5-Year Estimates, vehicle accessibility in Moore County reflects a high degree of reliance on privately owned automobiles. Only 960 households reported having no vehicle available, while the remaining majority 41,860 households had access to at least one. Specifically, 7,180 households had one vehicle, 17,090 had two vehicles, and 17,590 had three or more vehicles. This widespread access to personal vehicles indicates that private transportation is a dominant and likely essential mode of mobility, given Moore County's geographic spread and limited public transit infrastructure.

Commuting data further supports this trend. A total of 32,532 individuals reported driving alone to work, with 13,667 of these drivers coming from households with three or more vehicles. Carpooling, while less common, accounted for 3,368 commuters and was also most prevalent among multi-vehicle households. Public transportation use was minimal, with only 46 individuals reporting its use, and all came from households with at least one vehicle. These figures suggest that while carpooling is a modest alternative, public transit options are scarcely used, highlighting the county's strong dependence on private vehicles for daily transportation.

Commuting Time

Moore County residents accumulate a total aggregate travel time to work of approximately 1,119,945 minutes. A substantial 97.8% (1,095,050 minutes) of this travel occurs within North Carolina, with the remaining 2.2% (24,895 minutes) involving commutes to jobs outside the state. Among those who work in-state, 53% (579,840 minutes) commute within Moore County, indicating a relatively localized workforce, while 47% (515,210 minutes) travel to other counties across the state.

These patterns reflect both the county's growing suburban identity and its proximity to neighboring job hubs, such as Cumberland and Wake Counties. The notable portion of residents commuting outside Moore suggests regional economic integration, while the majority still working locally supports the significance of Moore's internal employment base and infrastructure.

Figure 51 Aggregate Travel Time to Work – Moore County, NC

Category	Minutes
Total Aggregate Travel Time	1119945
Worked in State of residence:	1095050
Worked in county of residence	579840
Worked outside county of residence	515210
Worked outside State of residence	24895

Source: US Census Bureau, American Community Survey ACS 5 2023

Richmond County

Demographics

Population

Richmond County’s population currently stands at 42,818 as of ACS 2023, reflecting a clear trend of gradual decline since its recent peak. After a slight increase between 2010 and 2012, the population began a steady drop from 46,608 in 2012 to 42,818 today, a decrease of over 3,700 people or roughly 8 percent. The most notable declines occurred between 2020 and 2022, with nearly 1,600 residents lost, likely due to migration, economic factors, and an aging population as shown in figure 51 below.

This ongoing decrease presents challenges for the county’s workforce, schools, housing market, and public services. If the trend continues, Richmond County may face reduced economic growth and a shrinking tax base. To address this, local leaders should consider strategies that attract younger residents, support seniors, and promote job growth to help stabilize and revitalize the community.

Figure 52 Richmond County Population Trend 2010-2023

Richmond County Population Trend 2010-2023	
2010	46477
2012	46608
2014	46317
2016	45710
2018	45189
2020	44759
2022	43149
2023	42818

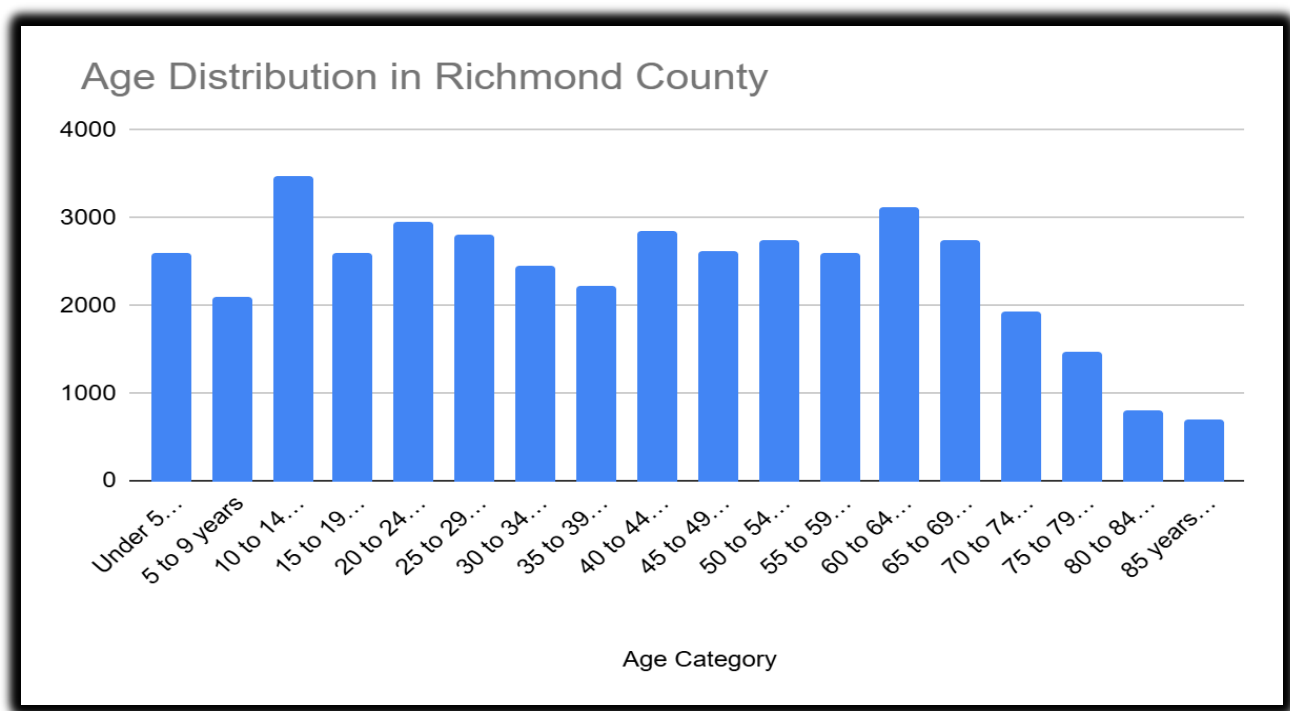
Source: US Census Bureau, American Community Survey ACS 2010- 2023

Age

County shows a balanced but aging population, with a noticeable concentration in the middle-aged and older adult groups. The largest age cohort is 10 to 14 years (3,481 individuals), suggesting a relatively strong presence of school-aged children. However, the number of young children under 5 (2,601) is lower, hinting at a possible decline in birth rates. Adult populations are most concentrated in the 60 to 64 age group (3,119), followed by those in the 65 to 69 and 50 to 54 ranges, indicating a significant share of the population nearing or at retirement age.

In contrast, the senior population (70 and above) shows a sharp tapering: only 699 people are aged 85 and over, and fewer than 2,000 are in the 70 to 74 range. This age profile suggests that while the county still retains a solid base of working-age adults, it is gradually shifting toward an older demographic. Without an influx of younger residents or increased birth rates, Richmond County may soon face increased pressure on healthcare, senior services, and workforce sustainability.

Figure 53 Age Distribution Richmond County



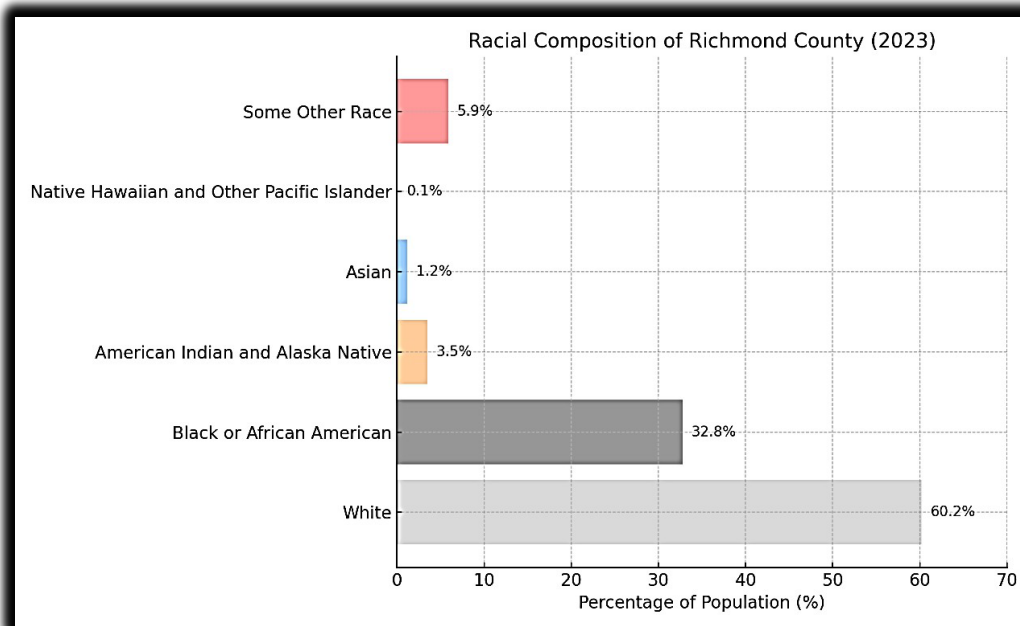
Source: US Census Bureau, American Community Survey ACS 5 2023

Race

Richmond County’s racial profile reveals a predominantly White population, comprising 60.2% of the total. The Black or African American community follows at 32.8%, forming a substantial and historically significant portion of the county’s residents. Together, these two groups account for over 93% of the population, underscoring a relatively racially concentrated demographic structure. However, the presence of other racial identities though smaller in proportion points to emerging diversity. American Indian and Alaska Native individuals represent 3.5%, a figure notably higher than national averages, suggesting localized cultural or historical factors influencing residency.

The remaining population includes Asians at 1.2%, Native Hawaiians and Pacific Islanders at 0.1%, and Some Other Race at 5.9%, which may include multiracial individuals or those not identifying with the standard census categories. While these groups form a minority, their presence contributes to a gradually diversifying social fabric. Over time, such shifts in racial composition could influence community needs, educational programming, and cultural engagement strategies, making it essential for policymakers and local institutions to adopt inclusive planning approaches that reflect this evolving demographic landscape.

Figure 54 Racial Composition in Richmond County



Source: US Census Bureau, American Community Survey ACS 5 2023

Language

Richmond County has a total population of 40,217 individuals aged five and over, of which 36,979 (about 92%) speak only English at home. The remaining 3,238 people (roughly 8%) speak a language other than English, with Spanish being the most widely spoken at 2,816 speakers. This Spanish-speaking population is largely concentrated among working-age adults (1,836), followed by children (794), and a smaller group of seniors (186), highlighting a bilingual trend across both education and workforce demographics.

Other non-English languages include Other Indo-European languages (164 speakers), Asian and Pacific Island languages (249 speakers), and a small group (9 individuals) speaking other languages, all of whom are elderly. These figures point to a multilingual community that spans generations and cultural backgrounds. As such, there is a clear need for expanded language access services especially in education, healthcare, and community engagement to support effective communication and equity across Richmond County's diverse population.

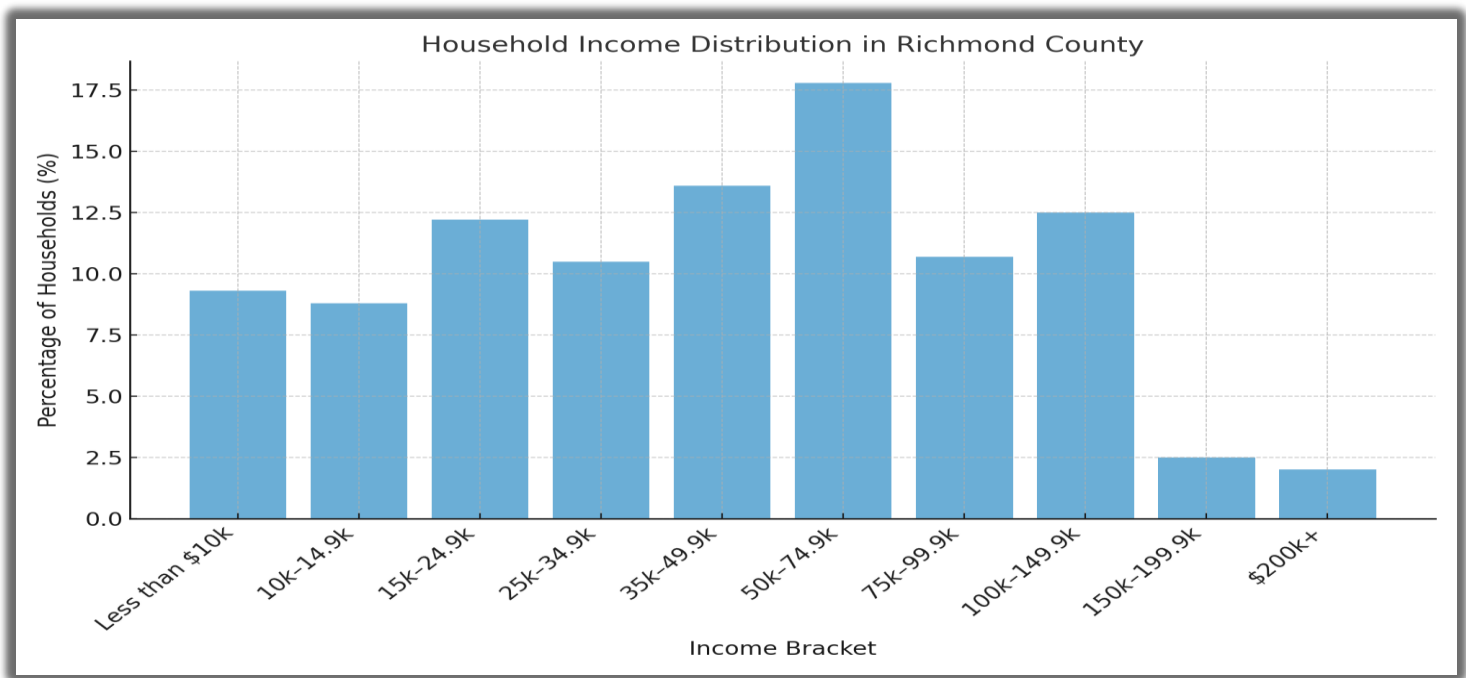
Economic Conditions and Employment

Income Distribution

Richmond County has a diverse income spread, with the largest share of households (17.8%) earning between \$50,000 and \$74,999, followed by 13.6% in the \$35,000 to \$49,999 range. Low-income households are significant: over 30% earn less than \$25,000 annually, suggesting ongoing economic vulnerability for a sizable portion of residents. Meanwhile, only 4.5% of households report incomes above \$150,000, highlighting a relatively small high-income population.

The median household income stands at \$43,626, while the mean income is higher at \$59,517, indicating some income concentration among wealthier households. This distribution suggests that while middle-income earners form the bulk of the population, there is both a notable low-income segment and a modest high-income minority. These patterns are essential for informing public assistance programs, workforce development, and economic planning strategies in the county.

Figure 55 Percentage of Households in an Income Bracket, Richmond County



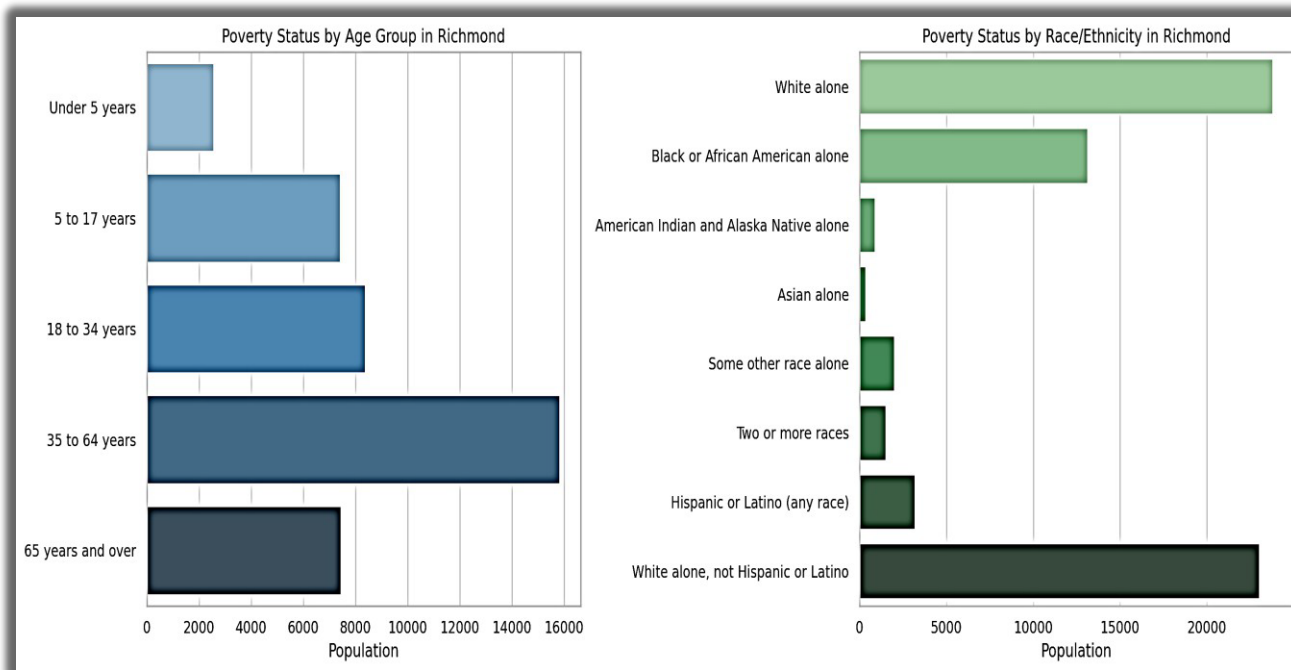
Source: US Census Bureau, American Community Survey ACS 5 2023

Poverty

Richmond's poverty-affected population totals 41,632 individuals, with the largest share 58% falling within the working-age group of 18 to 64 years. Children under 18 account for nearly one-quarter (9,975 individuals), suggesting a significant impact on families and youth-oriented services. Seniors over 65 represent 7,446 people (almost 18%), and those aged 60 and above make up over 10,000 individuals, highlighting a substantial aging population within the poverty demographic that may require targeted healthcare and social assistance.

Racial and ethnic disparities are also evident. White individuals make up the largest group in poverty (23,787), but Black or African American residents follow closely with 13,119 showing an overrepresentation when compared to their share of the general population. Other racial groups, such as American Indian and Alaska Native (876), Asian (337), and individuals reporting two or more races (1,517), also appear in the poverty count, though in smaller numbers. The Hispanic or Latino population, across all races, comprises 3,176 individuals. Notably, 23,029 of those in poverty identify as "White alone, not Hispanic or Latino," suggesting that poverty affects not only minority communities but also a large portion of the non-Hispanic White population. Figure 56 below presents the population in poverty by age group and race/ethnicity for Richmond.

Figure 56 Poverty Status by group in Richmond County



Source: US Census Bureau, American Community Survey ACS 52023

Unemployment Rate

Figure 57 Key Employment and Economic Indicators for Richmond County (2023–2024)



Source: NC Rural Center – County Data Profile

Based on the above data visual from the NC Rural Center ,Richmond County is ranked as a Tier 1 economically distressed area in 2024.The county had an average of 16,283 individuals employed and 779 unemployed in 2023, resulting in an unemployment rate of 4.6%. Despite this relatively stable rate, the labor force participation stands at just 57.6%, indicating that a significant portion of the working-age population is not engaged in the workforce. The average weekly wage was \$844 in 2023, equating to about \$43,888 annually, which falls short of the 2024 estimated pre-tax living wage of \$62,466 for a household with two adults (one working) and one child. While there was an 8% job growth over the last decade adding 1,015 jobs the income gap suggests that many residents may be employed but not earning enough to meet basic living standards.

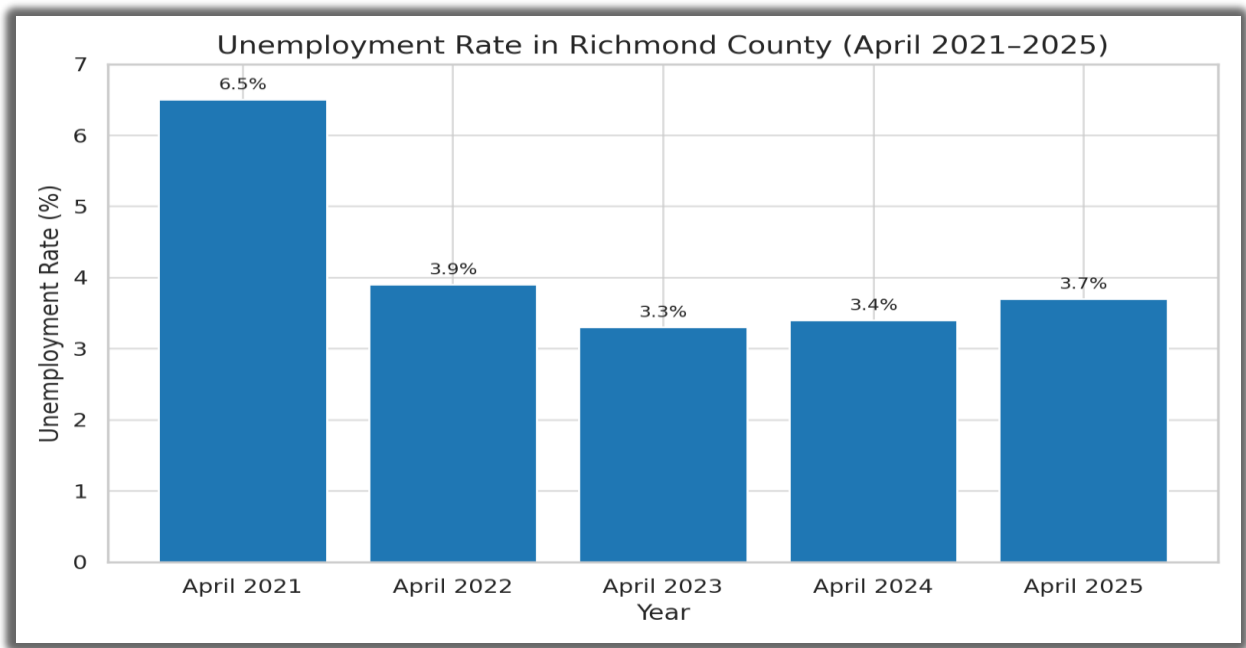
The county’s economy is anchored by manufacturing, employing 3,431 workers, and supported by the public sector, with Richmond County Schools as the top employer. With 68.1% of residents working within the county, local job availability remains crucial to economic stability. However, the combination of low wages, limited labor force engagement, and reliance on a few major employment sectors points to the need for workforce development, wage improvement strategies, and broader economic diversification. These efforts are essential to reduce economic vulnerability and move the county out of its distressed status.

Economic Distress & Strategy Implications

Richmond County has experienced notable improvements in unemployment over the past five years, though recent figures suggest a slight reversal of progress. In April 2021, the county’s unemployment rate stood at a high 6.5%, signaling significant economic pressure as the region emerged from pandemic-related disruptions. By April 2023, the rate had dropped to 3.3%, a substantial improvement that aligned Richmond with state and national trends. However, by April 2025, the rate edged back up to 3.7%, exceeding both the state average of 3.4% and Moore County’s 3.0%, which is notable given Moore's role as a neighboring economic benchmark.

Compared to peer counties such as Anson (4.0%) and Montgomery (3.7%), Richmond's 2025 unemployment rate reflects a persistent vulnerability to economic fluctuations, despite prior gains. While still below the 2021 high, the uptick from 2023 to 2025 suggests that local employment stability may be fragile, particularly in the face of regional or sector-specific slowdowns. This performance, combined with its classification in Tier 1 economic distress, highlights ongoing challenges in achieving long-term resilience. Continued efforts in workforce development, industry diversification, and wage growth will be key to mitigating this distress and aligning Richmond County more closely with the broader recovery trends seen in North Carolina and the nation.

Figure 58 Richmond County Unemployment Rate 2021-2025



Source: US Department of Labor, Bureau of Labor Statistics. 2025 - April.

Education and Workforce Readiness

Educational Attainment

ACS 2023 data on educational attainment in Richmond County reveals key insights into the academic progress across age groups. Among the 18 to 24-year-old population (3,639 individuals), the majority have completed at least a high school diploma or equivalent. Specifically, 52% are high school graduates, while 31% have progressed to some college or earned an associate's degree. Only 11.8% have attained a bachelor’s degree or higher, and 11.8% have not completed high school, indicating that while most young adults are meeting basic educational standards, relatively few have yet transitioned to higher education.

Among the adult population aged 25 and over (29,068 individuals), 84% have completed high school or higher, and 16.2% hold a bachelor’s degree or advanced degree. Educational attainment improves slightly with age until midlife, with 85% to 87% of those aged 25 to 64 holding at least a high school diploma. However, attainment of bachelor’s degrees remains relatively modest, peaking at just under 17% for the 45 to 64 age group. The senior population (65+), while still largely educated at the high school level (79.5%), shows a decline in college degree attainment, with only 17.8% holding a bachelor’s or higher. These trends suggest strong high school completion across age cohorts, but a relatively low rate of transition into four-year college degrees, particularly among younger adults and older generations.

Figure 59 Education Attainment in Richmond County

EDUCATION ATTAINMENT IN RICHMOND COUNTY IN AGE CATEGORIES	
Population 18 to 24 years	3639
Less than high school graduate	429
High school graduate (includes equivalency)	1892
Some college or associate's degree	1118
Bachelor's degree or higher	200
Population 25 years and over	29068
Less than 9th grade	1402
9th to 12th grade, no diploma	3197
High school graduate (includes equivalency)	8895
Some college, no degree	7333

Associate's degree	3536
Bachelor's degree	2988
Graduate or professional degree	1717
High school graduate or higher	24469
Bachelor's degree or higher	4705
Population 25 to 34 years	5271
High school graduate or higher	4472
Bachelor's degree or higher	590
Population 35 to 44 years	5074
High school graduate or higher	4510
Bachelor's degree or higher	890
Population 45 to 64 years	11077
High school graduate or higher	9408
Bachelor's degree or higher	1866
Population 65 years and over	7646
High school graduate or higher	6079
Bachelor's degree or higher	1359

Source: US Census Bureau, American Community Survey ACS 2023

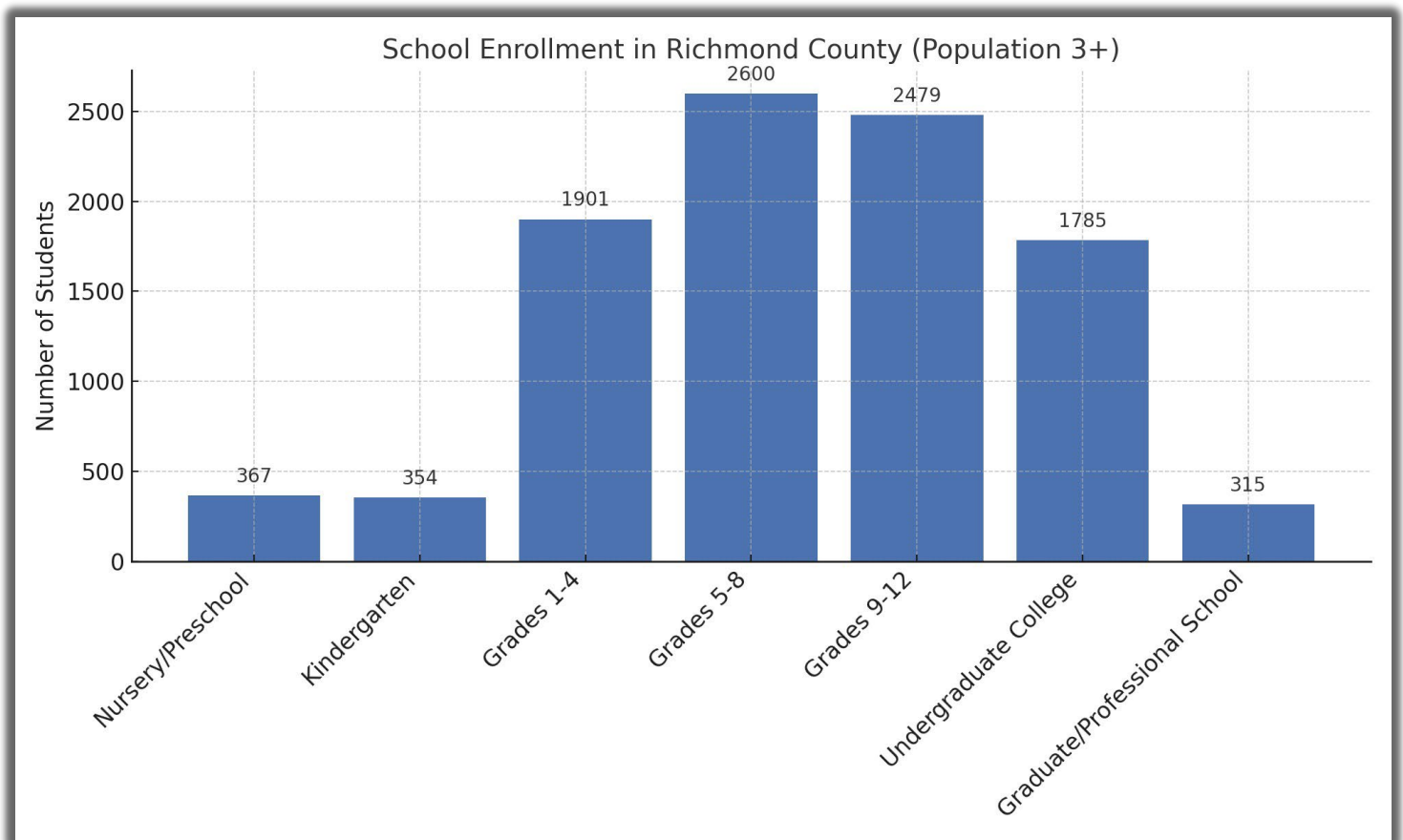
School Enrollment

Richmond County has a total of 9,801 individuals aged 3 and older enrolled in school, reflecting a strong emphasis on educational participation across all age groups. The majority of students, 7,334 in total, are enrolled in grades kindergarten through 12th grade. This includes 354 in kindergarten, 1,901 in grades 1 to 4, 2,600 in grades 5 to 8, and 2,479 in high school (grades 9 to 12). Early childhood education also has representation with 367 children enrolled in nursery or preschool programs.

Higher education accounts for a significant portion of enrollment as well. A total of 1,785 individuals are pursuing undergraduate degrees, while 315 are enrolled in graduate or professional programs. This shows a continued educational trajectory beyond secondary school, though participation levels are significantly lower

compared to K–12 enrollment. These figures highlight where educational services are most heavily utilized and point to opportunities for strengthening access and support at the postsecondary level. Figure 59 below highlights School enrollment by level in Richmond County.

Figure 60 School Enrollment by Level in Richmond County



Source: US Census Bureau, American Community Survey ACS 2023

Youth Disconnection

Youth disconnection, defined as individuals aged 16 to 19 who are neither in school nor employed is a critical metric for assessing vulnerability and long-term socioeconomic risk among adolescents. According to US Census Bureau, American Community Survey 2023, in Richmond County, 205 out of 2,021 youth fall into this category, yielding a disconnection rate of 10.14%. This figure significantly exceeds both the state average of 7.25% and the national average of 6.82%, positioning Richmond County as an area of concern for youth engagement in education and the workforce.

Compared to neighboring counties, Richmond County also fares poorly. For instance, Montgomery County has a slightly lower disconnection rate at 7.09%, while Moore County despite having a larger youth population—maintains a much lower rate of 5.42%. This disparity suggests that localized structural or socioeconomic challenges in Richmond County may be contributing to the higher levels of disengagement. High youth disconnection often correlates with long-term unemployment, poverty, and reduced lifetime earnings. Therefore, targeted interventions such as expanded job training programs, alternative education pathways, and youth mentorship initiatives are essential to improving outcomes for Richmond County's disconnected youth and bolstering the region's long-term economic resilience.

Adult Literacy

According to National Center for Education Statistics, NCES - Program for the International Assessment of Adult Competencies, nearly one in three adults in Richmond County have Level 1 or below literacy, suggesting widespread barriers to employment, healthcare comprehension, and civic engagement. The Level 2 and 3, estimates show a broader group that may not meet the literacy demands of a knowledge-based economy. Comprehensive adult education initiatives should address not only basic reading but also document literacy and digital navigation skills

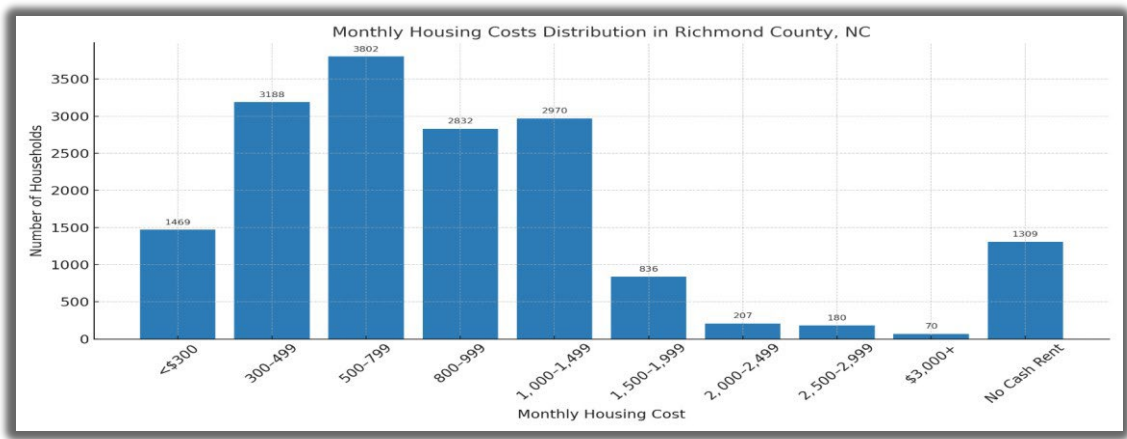
Housing & Community Stability

Housing Affordability

Richmond County’s housing cost landscape reveals a community with generally low housing expenses but a significant affordability strain due to equally low household incomes. The median monthly housing cost is \$733, which on its face appears manageable. However, when paired with the county’s median household income of \$43,626, roughly 20% of income is spent on housing technically below the federal affordability threshold of 30%. Yet this figure masks deeper disparities: nearly 30% of households (over 4,700) earn less than \$20,000 annually, meaning even modest housing costs may place these families in financially precarious situations. For example, a household earning \$15,000 annually would need housing costs to be below \$375 per month to remain within affordable limits a range that applies to only about 14% of housing units.

Furthermore, more than 40% of households (5,802 units) pay monthly housing costs between \$800 and \$1,499, indicating that a substantial portion of residents may be cost-burdened, especially those in the lower-income brackets. Only a very small number (457 households) pay over \$2,000 per month, reflecting limited presence of high-end housing stock. Additionally, 1,309 households report "no cash rent", which often signifies informal or unstable housing arrangements, such as staying with relatives or receiving housing in exchange for non-monetary contributions highlighting potential hidden housing insecurity. While nominal housing costs are lower than state and national averages, Richmond County’s affordability is challenged by widespread economic hardship, making housing assistance and low-income housing development critical components of future planning.

Figure 61 Monthly Housing Costs in Richmond County



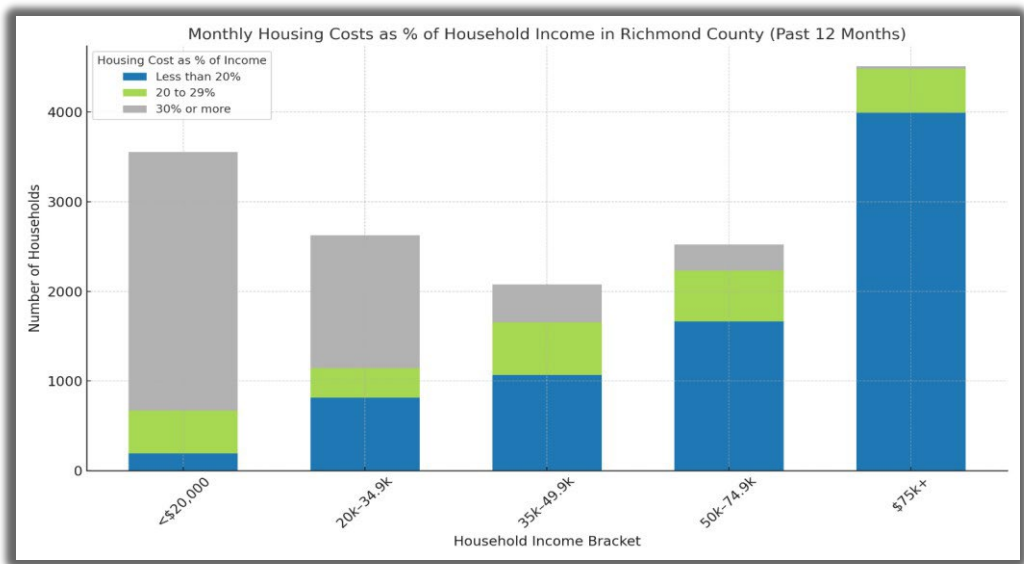
Source: US Census Bureau, American Community Survey ACS 2023

Housing Cost Burden by Income Level

Data from American Community Survey (ACS 2023) on housing cost burden in Richmond County reveals that a substantial portion of residents face severe affordability challenges, particularly among low- to moderate-income households. The housing cost burden is defined by the percentage of income spent on housing, with 30% or more considered unaffordable. Among households earning less than \$20,000 annually, the most economically vulnerable group is 81% (2,884 out of 3,557) spend more than 30% of their income on housing. This group represents a large share of the county’s population and indicates a high prevalence of housing stress where essentials such as food, healthcare, and transportation may be compromised to maintain shelter.

As income increases, the share of cost-burdened households declines sharply. For example, in the \$20,000 to \$34,999 income range, 56% are still cost-burdened, while in the \$35,000 to \$49,999 range, only 20% fall into that category. The burden becomes almost negligible for households earning \$75,000 or more, where less than 1% are cost-burdened. Notably, the group with zero or negative income (252 households) and no cash rent (1,309 households) indicates hidden housing instability, including informal arrangements or homelessness risk. These findings suggest that while middle- and upper-income groups generally maintain housing affordability, over 4,000 lower-income households in Richmond County are under significant housing pressure. This highlights a critical need for affordable housing development, rent support programs, and targeted policy interventions to reduce the economic strain on the county’s most financially vulnerable populations.

Figure 62 Housing Cost as a percentage of Household Income in Richmond County



Source: US Census Bureau, American Community Survey ACS 2023

Household Mobility Overview: Owner vs. Renter Occupancy

Richmond County's population displays a high level of residential stability, with 90.3% of its 41,387 households reporting they lived in the same house one year ago. This includes 26,911 owner-occupied and 10,447 renter-occupied households, suggesting that homeowners are significantly more likely to remain in place compared to renters. Overall, owner-occupied households make up 69% of the total population, while renters account for 31%, a typical pattern in semi-rural and lower-density regions where homeownership is more accessible. Among the 4,029 households that moved in the past year, renters were considerably more mobile. For example, of the 2,322 households that moved within the same county, 66.5% were renters. Similarly, among those who moved from a different state or county, renters made up 60% and 38% of those populations respectively. Notably, all 22 households who moved from abroad were owner-occupied, likely reflecting retiree relocations, military returns, or professional placements with secure housing. This breakdown reflects a pattern of economic mobility and housing security: renters are more transient, often due to affordability, job shifts, or lease flexibility, whereas owners tend to be more settled and financially anchored.

Figure 63 Geographical Mobility in Richmond County

GEOGRAPHICAL MOBILITY IN RICHMOND COUNTY			
Category	Total	Owner-Occupied	Renter-Occupied
Total Households	41387	28,604	12,783
Same house 1 year ago	37,358	26,911	10,447
Moved within same county	2,322	778	1,544
Moved from different county within same state	1,018	633	385
Moved from different state	667	260	407
Moved from abroad	22	22	0

Source: U.S. Census Bureau American Community Survey ACS 5 2023

Health, Safety & Behavioral Well-being

Tobacco Usage - Current Smokers

Richmond County, North Carolina, reports one of the highest adult smoking rates in its region. An estimated 17.6 percent of adults aged 18 and older are current smokers, with an age-adjusted smoking rate of 19.2 percent. These figures are significantly higher than the state averages for North Carolina, which stand at 14.3 percent (crude) and 14.8 percent (age-adjusted), and the national averages of 12.9 and 13.2 percent respectively. The elevated smoking prevalence in Richmond County underscores a critical public health concern, especially considering tobacco's strong association with preventable diseases such as lung cancer, heart disease, and chronic respiratory conditions.

Among neighboring counties, only Anson County reports a slightly higher age-adjusted rate at 20.1 percent, while Moore and Montgomery counties show notably lower rates. The widespread nature of tobacco use across Richmond County's adult population suggests that smoking is not limited to any single demographic group. These findings emphasize the need for coordinated tobacco control efforts, including smoking cessation programs, stronger regulation on tobacco marketing, and increased community health outreach. Addressing this issue proactively could lead to substantial improvements in health outcomes and reduced long-term healthcare costs for the county.

Physical Inactivity

In Richmond County, 16.6% of adult males and 19.8% of adult females report no leisure-time physical activity, aligning closely with state averages and slightly below national figures. These rates suggest that nearly one in five adults in the county are physically inactive, with women consistently showing higher inactivity levels than men.

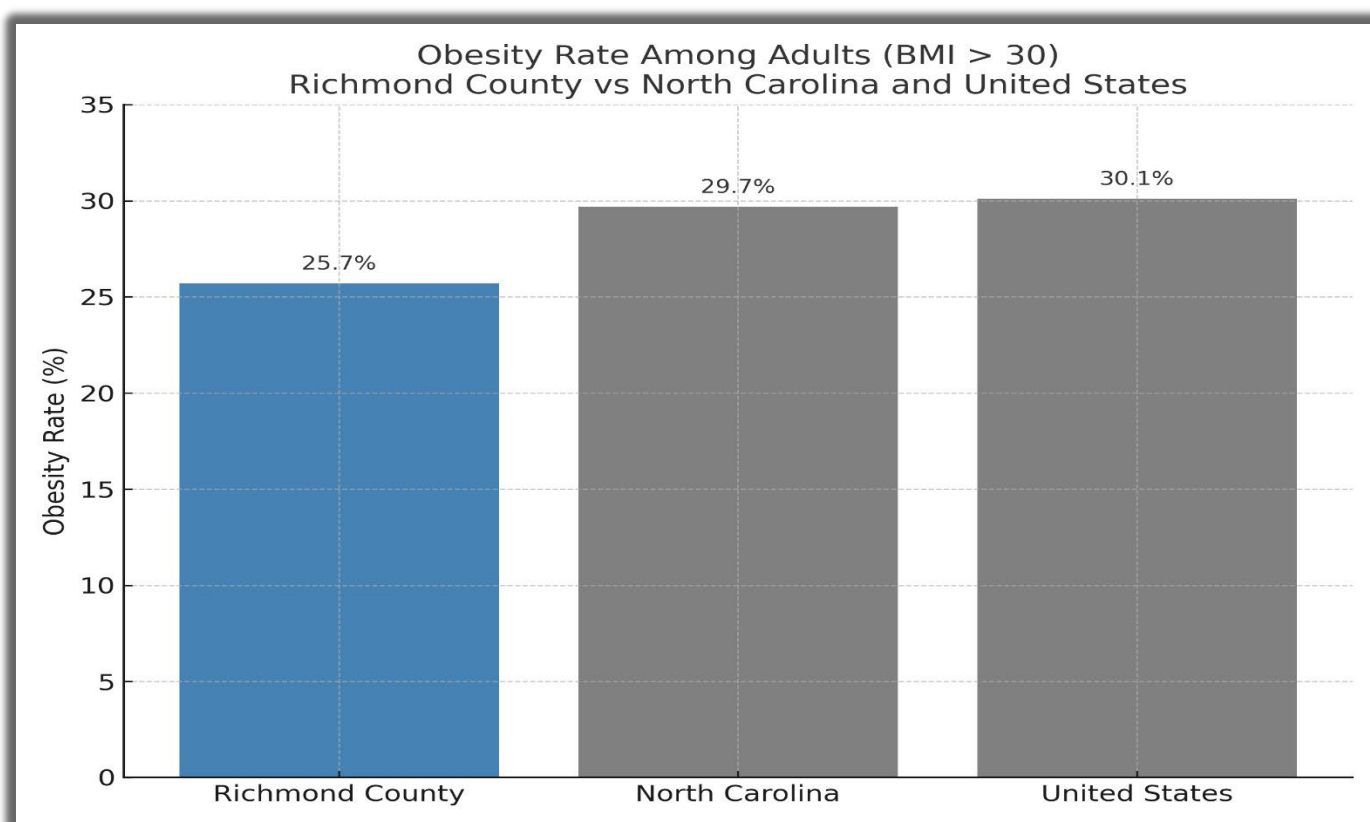
Compared to neighboring counties, Richmond County's inactivity rates are slightly higher than those in Anson and Montgomery counties, where male inactivity stands at 15.2% and 15.0% respectively, and female inactivity at 18.7% and 17.8%. However, its rates are nearly identical to Moore County and the North Carolina average. While Richmond does not lead the region in inactivity, the figures are still concerning and underscore the need for community-level strategies that match or outperform neighboring efforts to improve access to recreational facilities and promote active lifestyles particularly for women.

Obesity

According to CDC, National Center for Chronic Disease Prevention and Health Promotion, Richmond County reported an adult obesity rate of **25.7%** among residents aged 20 and older. This translates to **8,159 individuals** out of a total adult population of 31,624. Richmond's obesity prevalence is **above** the national (30.1%) and state (29.7%) averages, indicating a significant public health challenge.

Compared to neighboring counties, Richmond shares the highest obesity rate with Moore County (25.7%), and exceeds Anson (19.6%) and Montgomery (23.1%). This suggests localized risk factors, such as limited access to healthy foods, physical inactivity, or socioeconomic barriers, may be more pronounced in Richmond. Targeted intervention programs focused on nutrition, physical activity, and preventative care are essential to curb obesity-related chronic conditions in the county.

Figure 64 Obesity Rate in Richmond county vs North Carolina and U.S



Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2021.

Healthcare Access

Insurance Coverage

Health insurance coverage in Richmond County shows strong protection for children and older adults, with nearly universal coverage in those under 6 and over 65. However, gaps emerge among working-age adults especially males between 26 and 54 where uninsured rates range from 20% to nearly 28%. In contrast, females in the same age group tend to have higher coverage, though those aged 26 to 34 still show some vulnerability. These trends highlight challenges tied to employment-based coverage, affordability, and eligibility awareness. Among females, over 93% across all age groups have health insurance, indicating broader access or more consistent enrollment in public programs. The most secure coverage is seen in seniors and school-age children, thanks to Medicare, Medicaid, and CHIP. Yet, the uninsured rates in younger adults suggest a need for expanded outreach and more flexible insurance options, particularly for populations at risk of falling through coverage gaps.

Figure 65 Health Insurance Coverage – Male (Richmond County)

Age Group	With Insurance	Without Insurance
Under 6 years	1370	5
6 to 18 years	3654	178
19 to 25 years	1577	181
26 to 34 years	1363	537
35 to 44 years	1851	539
45 to 54 years	2077	515
55 to 64 years	2183	553
65 to 74 years	2121	1
75 years and over	1186	0

Source: U.S. Census Bureau American Community Survey ACS 2023

Figure 66 Health Insurance Coverage – Female (Richmond County)

Age Group	With Insurance	Without Insurance
Under 6 years	1502	22
6 to 18 years	3777	10
19 to 25 years	1794	143
26 to 34 years	2045	293
35 to 44 years	2167	366
45 to 54 years	2356	356
55 to 64 years	2612	258
65 to 74 years	2468	6
75 years and over	1664	0

Source: U.S Census Bureau American Community Survey ACS 2023

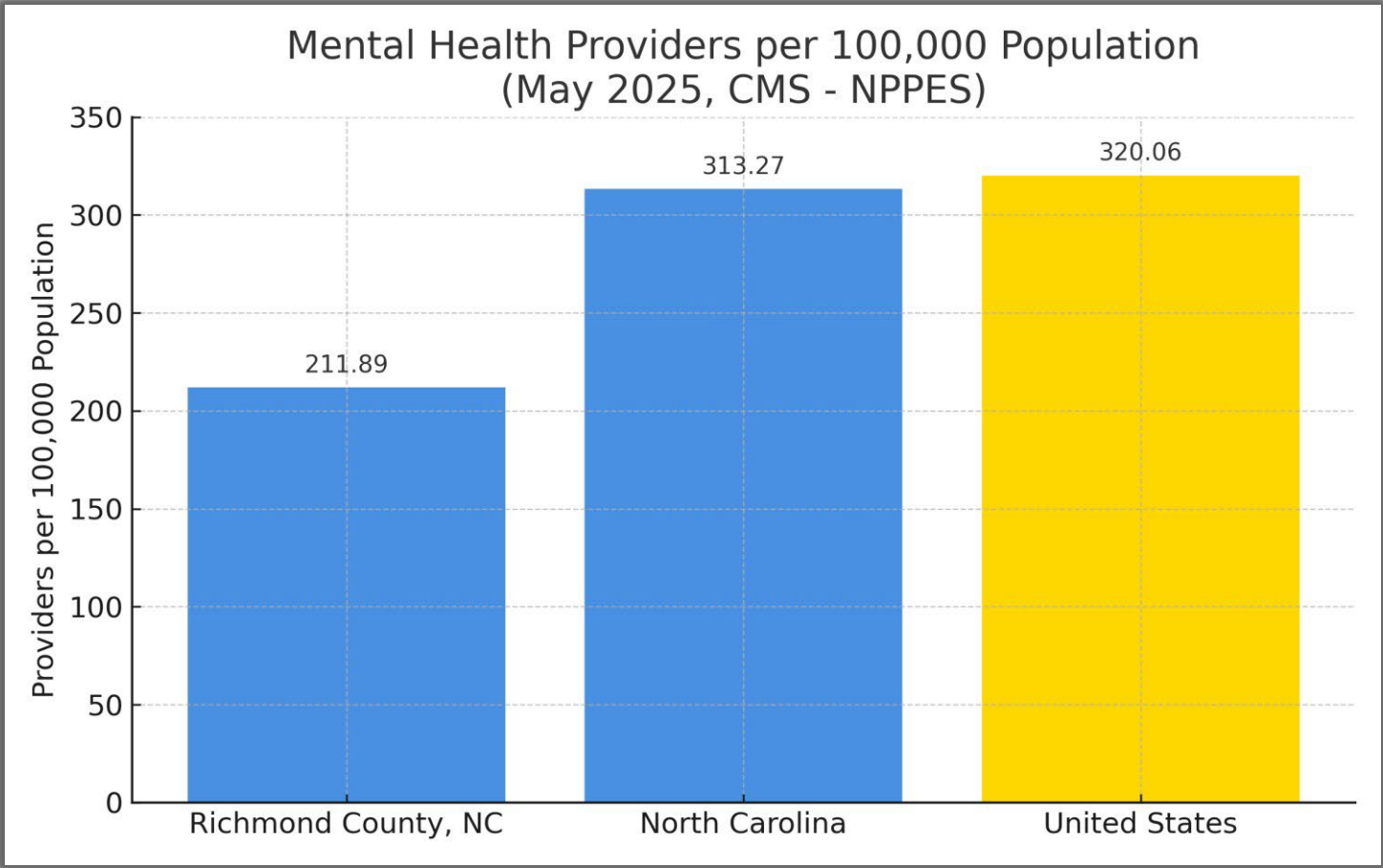
Access to Care - Mental Health Providers

According to the most recent data from the Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPPES), May 2025, Richmond County reports 91 registered mental health providers, resulting in a provider rate of 211.89 per 100,000 residents. With a total population of 42,946 in 2020, this positions the county ahead of several neighboring rural areas such as Anson (81.61) and Montgomery (163.10) but still behind North Carolina’s statewide average of 313.27 and the national rate of 320.06. While this relative accessibility reflects a modest behavioral health workforce, the county remains at risk of service gaps, especially in high-demand or crisis scenarios.

Despite having 22 mental health facilities across the county, the ratio of providers to population underscores the need for strengthened service delivery models and investment in workforce expansion. In rural regions like Richmond, limited access often leads to delayed care, increased reliance on emergency services, and poor

long-term mental health outcomes. Expanding telehealth, incentivizing provider retention, and fostering regional collaborations could be critical steps toward building a more resilient and accessible mental health system that meets the evolving needs of Richmond County’s diverse population.

Figure 67 Mental health providers per 100,000 population – Richmond County compared to North Carolina and United States



Source: Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPPES). May 2025.

Transportation & Access

Vehicle Access

According to the 2023 American Community Survey, Richmond County exhibits a pronounced reliance on private vehicle ownership, with 96.5% of households having access to at least one vehicle and 44.4% reporting ownership of three or more. This high level of vehicle access underpins commuting behavior, as 87% of workers report driving alone to work. Strikingly, over 78% of these solo drivers reside in households with two or more vehicles, signaling both a preference and capacity for independent travel. Carpooling, though modest in scale at 1,542 individuals, serves a crucial role for those with limited vehicle access. Approximately 18.8% of carpoolers come from households with no available vehicle, highlighting a segment of the population reliant on shared mobility as a functional necessity rather than convenience.

While public transportation usage is virtually nonexistent with only 38 individuals reporting its use, it serves as a vital option for those entirely without private transportation. All public transit users in this dataset reported no vehicle availability, underscoring the role of transit infrastructure as a lifeline for mobility-impaired households. The stark contrast between vehicle-rich households and those entirely dependent on external modes of transport illustrates a mobility divide. In a county where car access largely dictates commuting possibilities, these findings point to the need for diversified transportation strategies that address equity, resilience, and accessibility particularly for the 3.5% of households that remain without personal vehicles.

Commuting Time

Richmond County's workforce is always on the move, logging over 424,000 minutes in weekly commutes. While many residents stay close to home spending nearly 196,500 minutes traveling to jobs within the county an almost equal number venture beyond county lines but remain in-state, contributing 204,500 minutes to the regional commute total. This split points to a labor force that's deeply tied to both local and broader state economies.

A smaller segment takes their commute even further, with 24,005 minutes spent crossing state lines for work. Though this group is relatively small, it reflects a pocket of workers seeking specialized roles or higher wages beyond Georgia's borders. Together, these patterns highlight the diverse commuting demands of Richmond County and the importance of reliable transportation infrastructure across local and regional levels.

Figure 68 Aggregate Travel Time to Work – Richmond County, NC

Category	Time
Aggregate travel time to work (in minutes):	424960
Worked in State of residence:	400955
Worked in county of residence	196455
Worked outside county of residence	204500
Worked outside State of residence	24005

Source: US Census Bureau, American Community Survey ACS 5 2023

Regional Needs Synthesis

Across central North Carolina, the counties of Anson, Montgomery, Moore, and Richmond exhibit a complex and uneven social landscape. Economic transitions, aging infrastructure, and persistent inequities in health, housing, and education have left visible marks. While each county reflects its own history and identity, they are linked by shared challenges that point to deeper, systemic issues requiring coordinated response.

Drawing on local needs assessments, community surveys, firsthand accounts, and comparative data sets, this synthesis identifies the most pressing themes affecting residents' daily lives and long-term prospects. These insights serve as a foundation for strategic planning that responds not just to immediate conditions, but to the underlying structures that sustain hardship and limit opportunity.

1. Employment & Job Availability

The four regions faces considerable variation in employment conditions. Moore County demonstrates the strongest job market with a 2025 unemployment rate of 3.2%, reflecting a more diversified economy and stronger service and healthcare sectors. In contrast, Richmond County's rate stands at 4.2%, Anson at 4.0%, and Montgomery is estimated to be slightly higher, all above the state average. These counties face systemic employment barriers including declining industrial bases and fewer large employers.

Survey data supports these findings: over 29% of respondents report annual household incomes below \$20,000, and 24% identified as unemployed or underemployed. Job availability is further constrained by limited career advancement opportunities, overrepresentation of minimum wage jobs, and a mismatch between local workforce skills and current market demand. Workforce reentry programs and small business incentives are sporadic and underfunded, especially outside Moore County.

2. Job Skills & Workforce Readiness

Workforce readiness is a critical challenge region-wide. Nearly 35% of survey participants indicated they lacked vocational skills, and 21.8% reported not completing post-secondary education. More than 60% of working-age adults in Anson and Montgomery lack any form of industry certification or degree. Employers in

all counties expressed difficulty in recruiting skilled labor, especially for roles requiring digital proficiency or trade credentials.

Available job training programs are fragmented and often inaccessible due to transportation barriers or scheduling conflicts. Montgomery and Anson Counties in particular lack centralized workforce development hubs, leaving residents with few affordable options for upskilling. Expansion of mobile training units and employer-partnered apprenticeships could address the widespread disconnect between skillsets and local job opportunities.

3. Crime & Community Safety

Crime rates remain an area of concern in the SCAP region. In Richmond County, violent crime exceeds 560 incidents per 100,000 residents well above the state average. Anson County reports similar patterns, with frequent incidents of domestic violence and drug-related crime. Respondents cited community violence and crime as a leading cause of poverty (22.3%), second only to unemployment and housing shortages.

Law enforcement agencies report staff shortages and limited funding for community-oriented policing. Preventive efforts are hampered by the lack of safe public spaces and youth engagement programs. Stakeholders repeatedly emphasized the need for trauma-informed intervention models and regional collaboration to address underlying social determinants of crime.

4. Affordable Housing

Access to affordable, safe housing is a top regional concern. Moore County projects a shortage of more than 7,700 units by 2029, with Anson and Richmond residents reporting the worst housing conditions. More than 40% of survey respondents said high rent or mortgage payments were their family's top housing issue. Approximately 30% of households in Anson and Montgomery counties are considered 'severely cost-burdened,' spending more than 50% of income on housing.

The region lacks emergency shelters, transitional housing, and affordable rentals, especially for seniors and families. Limited landlord participation in HUD programs further constrains housing options for low-income residents. Without policy incentives and local development strategies, housing inequity is likely to widen across the SCAP service area.

5. Alcohol, Substance, and Drug Abuse

All four counties are experiencing rising substance use disorders, particularly involving opioids and methamphetamines. According to local health departments, overdose deaths in Richmond County increased by 15% between 2021 and 2024. Over 50% of community stakeholders listed substance abuse as one of the three primary causes of poverty in their counties.

Treatment resources are limited or absent in many rural areas. Montgomery and Anson residents must travel over 30 miles on average to reach inpatient facilities. Peer recovery networks and harm reduction strategies are in early development stages, but demand for these services far outpaces supply. Increased investment in behavioral health infrastructure is urgently needed.

6. Transportation Access

Transportation is a systemic barrier to employment, education, and healthcare in the regions. Anson and Montgomery Counties have no formal public transportation systems. In a 2024 survey, 37% of respondents cited lack of transportation as a major barrier to employment, and 25% stated it impeded their access to medical services.

Moore and Richmond Counties operate limited-demand response systems, but coverage is restricted to core areas. Rural and elderly residents are especially isolated, often relying on costly ride services or informal networks. The absence of affordable, consistent transportation limits upward mobility and reinforces structural poverty.

7. Government and Community Support

Access to government and nonprofit support services varies greatly across the region. Moore County benefits from a larger pool of agencies and civic infrastructure, while Anson and Montgomery Counties are constrained by limited funding and staff. Many residents report difficulty understanding how to access services or navigating application processes, especially for housing and employment programs.

Only 16.2% of survey respondents reported knowing where to go for comprehensive help in times of crisis. Stakeholders emphasized the need for centralized intake systems, cross-agency referrals, and mobile outreach

units to extend support into underserved areas. Community-based organizations often operate at capacity, with long waitlists for services.

8. Education Access and Outcomes

Educational attainment in the four regions is below the state average in Anson, Richmond, and Montgomery Counties. Moore County performs better, with a high school graduation rate exceeding 90%, while Anson lags behind at 82.5%. Survey results reveal that over 30% of adult respondents have not attended college, and 12% did not complete high school.

The lack of broadband internet, insufficient school funding, and limited career readiness programs hinder progress in many rural communities. Investments in adult education, vocational certification, and youth mentorship programs are necessary to improve both workforce and educational outcomes across the region.

9. Family and Social Support

Families in the regions face rising stress due to financial instability, health challenges, and inadequate child care. In the 2024 community survey, over 44% of respondents identified family support services such as parenting classes, counseling, or child development programs as essential to community improvement.

Single-parent households make up more than 35% of homes in Anson and Richmond Counties. Access to after-school programming, fatherhood initiatives, and domestic violence resources is limited. Case management programs that take a family-centered approach are highly effective but scarce, particularly in low-income, rural areas.

10. Salary and Wage Gaps

Median household incomes remain well below the state average of \$65,000. Richmond County's median is estimated at \$40,000, Anson's at \$44,245, and Montgomery at \$48,000. Moore fares better at approximately \$60,000, yet even there, rising housing and healthcare costs erode disposable income.

Minimum wage and entry-level jobs dominate the local economy. In the survey, 60% of respondents listed increased pay or job stability as top personal improvement goals. Wage stagnation, coupled with rising inflation, contributes significantly to poverty and hinders long-term financial security.

11. Motivation and Community Engagement

Survey responses and stakeholder interviews reflect a sense of disengagement among residents particularly youth and those living in multigenerational poverty. Many reported feeling discouraged by persistent barriers, lack of opportunity, and limited community involvement. Respondents ranked mental and emotional health, family support, and a sense of purpose as key to personal and community growth.

Programs focused on youth leadership, volunteerism, mentorship, and civic empowerment are sparse in all four counties. Strengthening these pathways is crucial to rebuilding community trust, resilience, and forward momentum among the region's most vulnerable populations.

12. Cost of Living and Economic Strain

The cost of living continues to rise across the regions, placing pressure on households at every income level. In the last five years, average rents have increased by 15–20%, and transportation and utility costs have surged. Over 50% of respondents reported difficulty affording groceries, healthcare, or housing within the past year.

Even in Moore County, where wages are higher, inflation and gentrification are pushing middle-income families into financial instability. The burden is most severe in rural areas with limited job opportunities and support systems. Without targeted policy and programmatic interventions, the affordability gap is likely to widen.

Survey Findings

This appendix provides findings of the SCAP Community Needs Assessment 2024 survey which had approximately 300 responses. It aligns with the core objectives of the community needs assessment, specifically examining community perceptions and realities around: unemployment/job availability, job skills, crime/violence, affordable housing, substance abuse, transportation, government/community support, education, family support, wages, motivation, and cost of living.

Survey Questions and Findings

Q1. What is your gender?

The survey revealed a marked gender imbalance, with approximately 74.7% of respondents identifying as female and only 25.3% as male. This significant difference suggests that women are either more impacted by the domains under investigation or more actively seeking community support and resources. It may also reflect women's disproportionate role in caregiving and family support, making them more attuned to systemic barriers.

Programmatically, this finding calls for gender-responsive approaches in job training, healthcare access, parenting support, and economic empowerment. Given women's high representation, it is critical that community development strategies directly address barriers disproportionately faced by women, particularly single mothers and female heads of households.

Q2. What is your age group?

Survey responses were well distributed among adult age groups, with the largest shares from those aged 26-35 (26.2%) and 55+ (24.3%). This reveals the dual need for services that support both early career development and older adult transitions, such as retirement planning or second-career training.

Younger adults may struggle with access to stable employment and affordable housing, while older adults face fixed incomes amid rising costs of living. Programs must address these challenges holistically, tailoring job readiness and financial education to different life stages. Intergenerational programming can also be leveraged to strengthen community support networks.

Q3. What is your marital status?

A majority (58.9%) of participants identified as single, while only 15.2% were married. This data suggests a large portion of the population may be lacking dual-income households or consistent familial support, which could heighten vulnerability in domains such as housing stability, employment flexibility, and childcare.

For single individuals, especially single parents, service models should integrate support systems that account for their dual roles as earners and caregivers. This includes flexible job training schedules, accessible child services, and mental health resources. Lack of spousal support can exacerbate motivation and mental health challenges, making relational support a programmatic priority.

Q4. In what county do you live?

Most respondents reside in Richmond (36.5%), Moore (35.7%), and Anson (25.9%) counties. Montgomery County was significantly underrepresented, which may reflect lower awareness of the survey or deeper access barriers in that region.

To ensure equitable service delivery and engagement, Montgomery should be the focus of targeted outreach. Meanwhile, programming should prioritize high-density areas where the majority of responses and likely needs are concentrated. County-specific challenges such as transportation limitations or employment opportunities should guide localized strategies.

Q5. How would you classify your race?

A majority of respondents (65.5%) identified as Black/African American, while 27% identified as White. This racial breakdown suggests that many of the challenges identified in the survey are likely to disproportionately affect communities of color, including in areas like unemployment, housing insecurity, and education.

Culturally responsive programming is essential. Any intervention particularly around job skills, family support, and government assistance must be grounded in historical context and community-driven approaches. Equity audits and racial impact assessments should be embedded into the design of all new services.

Q6. What is your highest level of education completed?

Most participants reported a high school diploma or GED as their highest level of education, with less than 5% holding a bachelor's or higher. Many respondents also indicated "some college," pointing to barriers in degree completion that may include cost, transportation, or caregiving responsibilities.

This educational profile indicates the need for accessible, non-degree workforce training aligned with regional employment demands. Community colleges and workforce boards should collaborate on short-term

credential programs in high-growth sectors. Further, digital literacy and continuing education offerings must be widely available and affordable.

Q7. Employment status

While 51.2% of respondents reported being employed, over a quarter were unemployed. Additionally, self-employment, retirement, and other statuses indicate a diversity of employment experiences and needs.

Given the prominence of unemployment, SCAP should prioritize job placement partnerships and pre-employment training, particularly focused on transferrable skills. For the underemployed, emphasis should be placed on access to living wages, career advancement, and benefits. This aligns with the project's core aim to address unemployment and job skills gaps.

Q8. Household income (annually)

Nearly one-third of participants reported earning less than \$10,000 annually, with a significant share between \$10,000 and \$30,000. These income levels fall below federal poverty guidelines, indicating a broad base of residents living in financial struggle.

The prevalence of low-income households intersects with housing insecurity, limited access to transportation, and barriers to healthcare. SCAP must consider wraparound support models that stabilize income through job placement while also mitigating living costs through subsidies, utility assistance, and financial coaching.

Q9. Major causes of poverty.

Respondents identified the top causes of poverty as high cost of living (50.4%), low-paying jobs (48.9%), and lack of affordable housing (48.9%). This indicates a strong awareness among residents of structural economic challenges rather than individual failings.

Programmatically, this necessitates a pivot from individual behavior-change interventions to systemic economic reforms. Advocacy for affordable housing, wage standards, and cost-of-living adjustments must be coupled with service delivery that mitigates immediate financial pressures. These findings confirm that poverty is rooted in policy and economic structure.

Q10. Major problem in the community.

Unemployment and low wages were cited as the most significant community problem (34.3%), followed by homelessness/lack of housing and mental health concerns. These issues closely mirror the top causes of poverty.

This underscores the urgent need for coordinated action across employment, housing, and behavioral health. Investments in mental health infrastructure and partnerships with employers offering livable wages will produce long-term impact. Each issue cannot be solved in isolation; integrated solutions are essential.

Q11. What programs would benefit your community?

Participants identified mental health support, job readiness training, and financial literacy as the most needed services. This reflects both emotional stressors and economic instability among residents.

Comprehensive service hubs should be developed to address these interconnected needs. For example, job training programs should include mental health counseling and financial planning. Building out multidisciplinary teams will ensure services are not limited but instead promote overall stability and growth.

Q12. What is most important in improving personal life?

Family support, financial stability, and mental/emotional health were ranked highest. These factors are deeply interconnected, indicating that individual wellbeing is not a standalone issue but tied to relational and systemic conditions.

Any effort to build a better community must center families biological and chosen as well as promote mental health as a foundational need. Financial empowerment programs must go beyond budgeting classes to address wage gaps, debt, and cost-of-living pressures.

Q13. Who is most responsible for helping improve one's life?

Nearly half of respondents identified parents or guardians as the most responsible party for improving one's life. This reflects a belief in personal and family agency but also implies reliance on informal support systems in the absence of strong institutional backing.

This finding reinforces the need to strengthen family support structures. Services should be designed not only for individuals but for family units, and should include parent training, intergenerational counseling, and peer mentoring.

Q14. Improving employment status

Respondents prioritized increased pay/responsibility (58.6%), job stability (42.5%), and access to training (29.9%) as top areas for improvement. These choices show that the community is not solely seeking any job but quality, sustainable employment.

Workforce initiatives must therefore focus not only on placement but on career pathways. SCAP and partners should develop sector-specific programs in healthcare, construction, and tech that include advancement ladders, employer partnerships, and guaranteed wage thresholds.

Q15. Barriers to employment

The most common barriers were lack of training, lack of transportation, and insufficient formal education. These practical constraints often create a feedback loop of limited opportunity and prolonged unemployment.

To break this cycle, service delivery should include transit stipends, community-based training locations, and mobile learning platforms. Policy advocacy for public transit and tuition assistance should accompany direct services.

Q16. Needed employment services

Respondents requested career planning, computer skills training, and financial literacy as the most needed employment services. These align well with the earlier findings on income insecurity and skills deficits.

Programs must address both hard and soft skills, building digital literacy while also promoting goal setting and self-efficacy. Career coaches and case managers will be crucial in helping individuals navigate complex job markets.

Q17. Improving family needs

Top priorities for improving family needs included homeownership, employment, and financial literacy. These are core indicators of household stability and long-term security.

Family-focused programming should integrate housing counseling, workforce placement, and debt reduction services. Additionally, co-locating services (e.g., housing + employment + childcare) improves access and outcomes.

Q18. Barriers to better family life

Over half of respondents pointed to lack of income as the primary barrier, followed by health issues and lack of education. This again reflects the systemic nature of hardship rather than interpersonal conflict or behavioral issues.

A successful community response requires structural solutions: expanding Medicaid access, subsidizing childcare, and providing free adult education are examples. Family-strengthening initiatives must go beyond parenting classes to include economic and health dimensions.

Q19. Needed family improvement service

Family planning, budgeting, and home buying support were the most requested services. These show an aspirational mindset in the community toward stability and self-sufficiency.

Support services should move beyond crisis response to proactive planning. Workshops on financial planning, credit repair, and homeownership should be paired with access to microloans or savings match programs.

Q20. Housing is a problem because:

Respondents overwhelmingly cited the high cost of rent and utilities as the primary housing issue. Affordability not availability was the central concern.

Policy advocacy should focus on rent control, utility subsidies, and zoning reforms to increase affordable housing stock. In the interim, SCAP should expand its rental assistance and weatherization programs.

Q21. Needed housing services

Participants requested Section 8/HUD access, utility assistance, and home buying support. These requests reflect both crisis and aspirational housing needs.

To meet these needs, SCAP should partner with housing authorities, financial institutions, and utility companies. Housing navigation services and tenant rights education should also be expanded to prevent displacement and support long-term stability.

Conclusion:

This analysis confirms the community's acute awareness of the structural and interrelated barriers affecting their lives. Programs and policies must move beyond surface-level solutions and invest in holistic, equity driven strategies that address not only unemployment, but the systemic roots of housing instability, under education, and economic insecurity.

Assessment Conclusion

The SCAP Needs Assessment 2025 reveals a multifaceted regional landscape defined by both persistent poverty and uneven access to opportunity across Anson, Montgomery, Moore, and Richmond Counties. Despite variations in population dynamics and economic strength, all four counties share core challenges: limited job availability, underdeveloped workforce pipelines, youth disconnection, educational disparities, and insufficient behavioral health services. These barriers are further magnified in rural areas where geographic isolation, poor broadband access, and transportation limitations restrict mobility and upward economic potential.

While Moore County demonstrates stronger economic indicators, regional disparities remain pronounced particularly for low-income households, communities of color, seniors, and uninsured working-age adults. Across the service area, housing instability, cost burdens, and mobility gaps signal a need for deeper structural investment. The findings underscore the urgency of an equity-centered, systems-level approach that transcends single-issue interventions. SCAP is well-positioned to lead this charge by aligning its mission with interagency collaboration, expanded service delivery, and strategies that address root causes rather than symptoms.

Recommendations

Economic Mobility & Workforce Development

SCAP should strengthen regional economic mobility through targeted investments in workforce readiness, credentialing, and small business growth. Expanding access to vocational training and job placement services in partnership with South Piedmont Community College and NC Works will close critical skills gaps. Programs should be tailored for disconnected youth, justice-involved individuals, and underemployed adults, especially in Anson and Montgomery Counties. Simultaneously, efforts must be made to scale up digital equity initiatives including rural broadband expansion to support virtual learning, telework, and remote entrepreneurship.

Health, Housing, and Transportation Integration

To build regional resilience, SCAP must pursue cross-sector strategies that integrate housing stability, health equity, and mobility access. This includes expanding the supply of affordable, quality rental housing and prioritizing assistance for cost-burdened renters and high-mobility households. Given the acute shortage of mental health providers, investments in telehealth, school-based counseling, and recruitment incentives are essential. SCAP should also explore community-informed transportation pilots such as micro transit, shared shuttles, and ride-hailing subsidies to serve transit-dependent populations and improve access to employment and essential services.

Appendix A. Survey Instrument

SCAP Community Needs Assessment 2024

1. What is your gender?

- ☐ Male
- ☐ Female

2. What is your age group?

- ☐ 18-25
- ☐ 26-35
- ☐ 36-45
- ☐ 46-55
- ☐ 55+

3. What is your marital status?

- ☐ Single
- ☐ Married
- ☐ Separated
- ☐ Divorced
- ☐ Widowed
- ☐ Living with partner

4. In What County do you live?

- ☐ Richmond
- ☐ Anson
- ☐ Moore
- ☐ Montgomery

5. How would you classify your race?

- ☐ Asian/Pacific Islander
- ☐ Black/African American

- ☐ Hispanic
- ☐ Latina
- ☐ Multiracial
- ☐ Native American/American Indian
- ☐ White/Caucasian
- ☐ Other (please specify)

6. What is your highest level of education completed?

- ☐ Elementary/Grammar
- ☐ Middle School
- ☐ High School
- ☐ GED
- ☐ Vocational/Technical
- ☐ Some College
- ☐ Bachelor's Degree
- ☐ Master's Degree
- ☐ Doctoral Degree
- ☐ No formal education

7. Employment Status (Check all that apply)

- ☐ Employed (Wages)
- ☐ Self -Employed
- ☐ Unemployed
- ☐ Retired
- ☐ Student
- ☐ Military/Spouse (Active)
- ☐ Veteran/Spouse
- ☐ Ex-Offender/Paroled
- ☐ Other

8. Household Income (annually)?

- ☐ Less than \$ 10,000
- ☐ \$ 10,000 to \$ 19,999
- ☐ \$ 20,000 to \$ 29,999
- ☐ \$ 30,000 to \$ 39,999
- ☐ \$ 40,000 to \$ 49,999

- \$ 50,000 to \$ 59,999
- \$ 60,000 to \$ 69,000
- \$ 70,000 to \$ 79,999
- \$ 80,000+

COMMUNITY NEEDS

9. What do you think are the major causes of poverty in your Community? (Check only three)

- Unemployment/Lack of Available Jobs
- Crime/Violence
- Lack of affordable Housing
- Low paying jobs
- Lack of motivation
- High cost of living
- Lack of job skills
- Alcohol/Substance/Drug Abuse
- Lack of government/Community support
- Lack of education
- Lack of family support
- Other (please specify)

10. Which of the following do you see as the most major problem in your community? (Check only one)

- Incarceration
- Violence/Domestic Violence
- Public health Issues
- Unemployment/Low paying jobs
- Depression/Mental Health
- Obesity/Poor nutrition
- Lack of education
- Alcohol/Substance/Drug Abuse
- Homelessness/Lack of affordable housing
- Illiteracy
- Teen Pregnancy

- Lack Of recreational activities
- Crime/Theft/Homicide/Suicide
- Single parent households
- Other (please specify)

11. What targeted areas of programs and services do you think will benefit your community (Check only three)

- Military Families/Veteran Support
- Life Skills/Home management
- Intimacy/Sexual health
- Re-Entry/Post incarceration
- Communication/Interpersonal Skills
- Anti-Bullying/Peer Pressure
- Job Readiness/Resume Writing
- Conflict Resolution/Anger Management
- Elderly Support
- Tutoring/Educational Support
- Relationship Counseling
- After School Activities
- Financial Literacy/Banking /Budgeting
- Family Planning/Strengthening
- Childcare/Head start
- Entrepreneurship
- Parenting/Fatherhood/Child Support
- Healthcare/Nutrition
- Computer Training
- Abuse Shelter/Counseling
- Social Responsibility
- Housing/fire-Time homebuyer
- Mental Health
- Other (please specify)

12. Which of the following do you feel is most important in improving one's personal life to make a better community? (Check only three)

- Mental /Physical/Emotional Health
- Family Support
- Personal Accomplishments

- Mentoring and Peer Support
- Sense of Purpose
- Community Support (Utility, rental and emergency food assistance)
- Spiritual Guidance/Support
- Social/Networking Opportunities
- Hobbies/recreational Activities
- Transportation/Accessibility
- Continuing Education
- Financial Stability
- Career/Vacation
- Other

13. Other than oneself, who do you think is most responsible for helping to improve one's life? (Check only one)

- Parents/Guardian
- Aunts/Uncles
- Counselors/Therapists
- Spouse/Significant
- Other
- Friends
- Community Leaders
- Pastor/Spiritual Adviser
- Teachers/professors
- Political Figures
- Siblings
- Supervisors/Managers
- Other

CLIENT NEEDS-Employment

14. If you could improve your employment status, what areas would you focus on? (Check only three)

- Increase in pay/Responsibilities
- Job stability
- More training/Growth opportunities
- More hours
- Location of Job
- Different Job Title/Position with employer

- Increase in benefits
- Transportation to work
- Career change
- Reduce required Overtime
- Flexible working Hours
- Other
- No services needed

15. What are your barriers to better employment? (Check only three)

- Lack of training
- Declining physical health
- Lack of interviewing skills
- Lack of Skills(Vocational)
- Unplanned pregnancy
- Lack of job search training/Resume
- Poor work history
- Lack of Dependable childcare
- Lack of Confidence
- Poor work Ethics
- Lack of adult dependent care
- Illiteracy
- Lack of formal higher education
- Lack of professional work attire
- Formerly incarcerated/ Ex-offender
- Mental/Physical disability
- Lack of reliable transportation
- Other
- No services needed

16. Are you in need of any of the following employment services? (Check all that apply to your needs.)

- Career Planning/Goal setting
- Vocational rehabilitation
- Benefits advice/counselling
- Computer skills training
- Resume writing
- Financial literacy/Management
- Entrepreneurship training

- Application assistance
- Professional dressing
- Job searching
- Mock interviewing
- Re-Entry assistance
- Continuing education assistance
- Leadership/Management training
- Other
- No services needed

CLIENT NEEDS - Family

17. If you could improve your family's needs, what areas would you focus on? (Check only three)

- Happier/Healthier Marriage
- Employment/career
- Financial Literacy/Management
- Home ownership
- Family Vacations
- Health/Wellness/Nutrition
- Entrepreneurship
- Spiritual Improvement
- Education (for all)
- Parenting
- Hobbies/Recreation Other
- No services needed

18. What are your barriers to a better family life (Check only three)

- Lack of Income/Financial Support
- Declining physical health
- Lack of education
- Lack of spousal support
- Unplanned pregnancy
- Long/Short working hours
- Domestic violence
- Lack of dependable childcare
- lack of spiritual guidance
- Poor Outlook/Depression

- lack of adult dependent care
- Lack of Hobbies/Recreation
- Mental/physical disability
- Poor living conditions
- Other
- Lack of transportation
- Homeless
- No services needed

19. Are you in need of any of the following family improvement services? (Check all that apply to your needs.)

- Family Planning/Goal setting
- Banking and Budgeting
- Understanding taxes/Prep
- Communication/Interpersonal Skills
- Investing and saving strategies
- Home buying/selling
- Conflict resolution/Anger management
- Estate Planning
- Foreclosure prevention
- College preparation
- Understanding Civic/Social responsibility
- Nutrition/Cooking
- Pre/Post marital counselling
- Business Start -Up/Financing
- Anti-Bullying/Youth Empowerment
- Parenting/prenatal care
- Understanding Credit/Credit cards
- Physical health counselling
- Motivational empowerment
- Legal counsel mediation
- Mental Health/Depression
- Relationship management
- Borrowing/Loan Management
- Alcohol/Substance Abuse
- Peer/mentor Support
- Understanding Insurance
- Other

- No Services Needed

CLIENT NEEDS- Housing

20. Housing is a problem for my family because. (Check only one)

- High Cost of rent/house payments
- Housing cost of rent/house payments
- Housing size does not meet my family needs
- High cost of utilities
- Available housing is in undesirable/unsafe neighborhoods
- High cost of housing/utilities deposits
- Available housing is not conveniently accessible to work/school
- Affordable housing is unavailable
- Lack of shelters
- High cost of housing improvements/repairs
- Other
- No services Needed

21. Are you in need of any of the following housing services? (Check all that apply to your needs.)

- Section 8/HUD
- Rental/Deposit Assistance
- Housekeeping Training
- Home Improvement Training
- Utilities Assistance
- External/Yard Management
- Weatherization
- Temporary Homeless Shelters
- Gardening
- Home buying/Selling
- Teen Pregnancy Housing
- Energy Efficiency
- Home Purchase Down
- Payment Assistance
- Delinquent Youth Housing
- Fire/Water Damage Prevention

- Foreclosure Prevention
- Home Maintenance
- Other
- No Services Needed

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