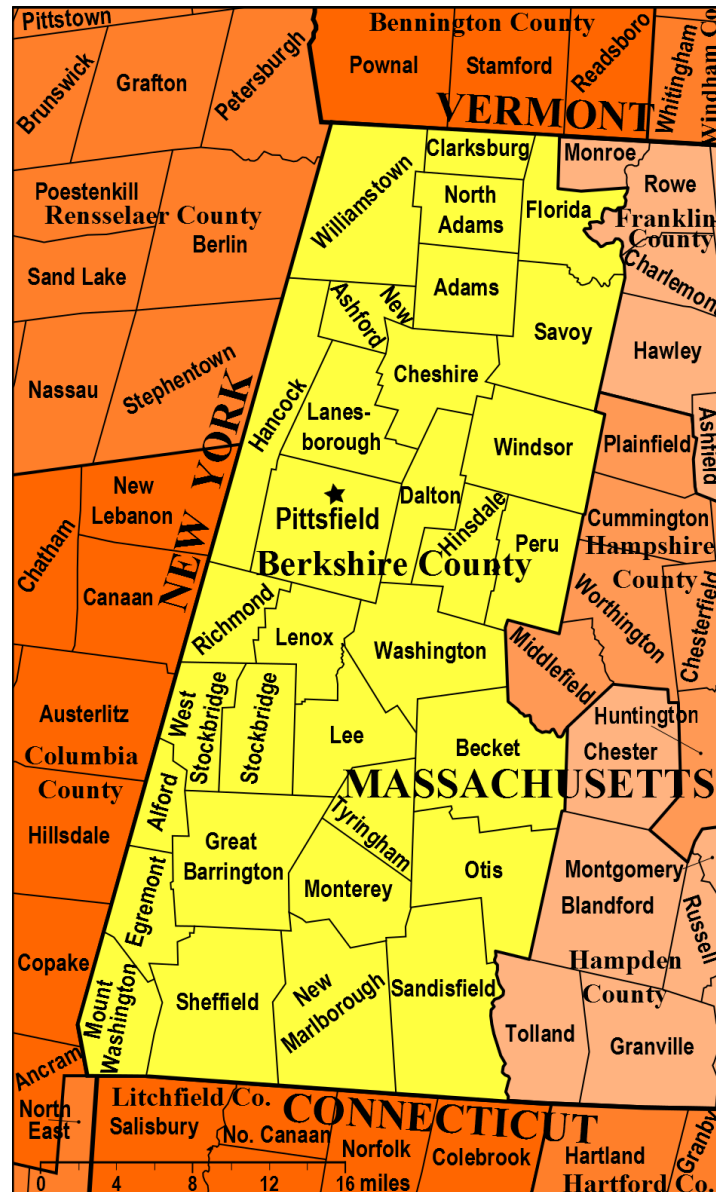


## WRHSAC Equity Data Project – Berkshire County, Massachusetts



### Overview

This is an assessment of the readily available data for individuals who are likely to be at a higher risk in emergencies in Berkshire County, Massachusetts. Berkshire County is the westernmost region in Massachusetts and borders three states: New York, Vermont, and Connecticut. There is no county government in Massachusetts. By tradition, “The Berkshires” is loosely divided into North, Central and South County. The county is made up of 32 independent municipalities, including the small gateway city of Pittsfield and multiple small, rural communities of under 2,500 residents. There are about 129,000 full-time residents and a growing second home population with major concentrations

in South County. In season, some Berkshire communities almost double in size because of visitors and second homeowners ([Second-class citizens no longer: Berkshire second-home owners eye greater involvement, voting rights - The Berkshire Edge](#)).

During COVID19 there was a significant influx of self-evacuated people from urban areas as people decamped to the Berkshires. Many of them stayed. Other emergencies are likely to result in population surges due to climate migration from the coasts, heat islands, and other densely populated areas during emergencies. It is assumed that many visitors and migrants will lack local support networks, medical providers, and stable housing. It is noted that visitors tend to have money to spend, access to transportation and are likely to have the ability to leave the county if conditions are better at their primary home. Sudden influxes of people in the county stress local services and communities are often not prepared for rapid changes in population levels ([Inland Town Preps for Climate Migration with Pandemic Data \(planning.org\)](#)).

## Berkshire County Specific Equity Concerns

According to the Robert Wood Johnson's County Health Rankings, Berkshire residents, as compared to the rest of Massachusetts, are more likely to die prematurely, be unemployed, be a single parent, have children in poverty, experience income inequity, be victims of violent crime, experience more deaths due to injuries, have more teen births, die of a drug overdose, have a child die, die in a vehicle crash, live in a segregated neighborhood, pay more for childcare, die by suicide, die from firearms, and use tobacco products.

Selected data associated with increased risks show that even when the percentages are low or average, Berkshire County cities and towns have a significant number of individuals likely to need additional or different assistance in emergencies and fewer resources available to meet increased needs. For example, in Berkshire County about 14,000 people live in poverty, 1,800 don't have a vehicle, 9,800 over 65 live alone, and almost 20,000 have one or more disabilities that significantly impact daily living. ([Berkshire-County-Vulnerable-Pop-Data.pdf](#)).

The most important social, demographic, equity, and indicator characteristics identified by the data and interviews were used to highlight individuals likely to be at greater risk during an extended regional emergency response in Berkshire County.

1. **Housing:** Lack of affordable, safe housing. Healthy housing is strongly associated with better health outcomes and is seen as essential for good physical and mental health. More housing options for all income levels are needed to prevent overcrowding, unsafe and unsanitary conditions, emergency sheltering needs, homelessness, and to equitably support children, workers, seniors, and individuals with disabilities. Multiple communities cited housing as a major concern.
2. **Demographics:** 24% of the population is 65 plus. Berkshire has a population that is rapidly aging with a growing list of chronic diseases and mobility and cognitive issues that will likely require extensive support systems.
3. **Mental health:** Berkshire County has a high number of individuals with dementia, substance use disorders, and behavioral health issues that result in the need for increased social support services and can potentially contribute to civil, legal, and social disruptions; suicides; and overdose deaths.

4. **Income disparities:** Income disparities in a region often result in inequitable health outcomes. Substantial numbers of permanent residents with low incomes living next to wealthy second homeowners and visitors reduce housing options, distort local resource allocation, stress local cohesion, strain local and regional services, and contribute to a growing number of people without housing, the single most important indicator of health status. Individuals with low incomes are not able to afford basic expenses such as food, fuel, and medicines in addition to housing. In addition, many permanent residents are dependent on the tourism and service economy for work, meaning that in an emergency they are likely to lose their jobs and increase their need.
5. **Support networks:** There is a growing number of individuals living alone, single-parent households, unhoused, visitors, remote/rural, poor, undocumented and immigrants without robust networks of family and friends or community support systems to help them in times of adversity.
6. **Electrically dependent:** Over 1,000 Medicare recipients in the county are medically dependent on electricity for medical devices. In addition, they likely also rely on electricity for heating and cooling.
7. **Communications:** Lack of access or funds for high-speed internet and cell service, along with a growing number of immigrants that don't speak or read English, results in increasing communication challenges for many at-risk individuals and the need for communities to learn more ways to communicate with specific groups, including the use of social media/messaging apps.
8. **Transportation and the rural remote:** Transportation, especially in an evacuation scenario, is a particular issue for those living in remote, rural areas without a reliable vehicle, those who no longer drive or live on roads that are harder to drive at night or during adverse weather.
9. **Language barriers:** Increasing number of immigrants who don't read or speak English or read in any language.
10. **High premature death rate:** Berkshire County has the highest age-adjusted premature death rate in Massachusetts. This is likely an indicator of the fact that residents must often travel outside the area for specialized care as well as cumulative and intersecting comorbidities in the county, including substance use disorder, mental health issues, heart disease, other chronic disease, and physical disabilities.
11. **Organized regional coordination:** lack of well organized, regional coordination structure(s) to ensure that equity issues are addressed and to reduce duplication of efforts. BHS CHNA states that Berkshire County is rich in resources and poor in coordination ([COMMUNITY HEALTH NEEDS ASSESSMENT - berkshirehealthsystems.org](https://www.berkshirehealthsystems.org/COMMUNITY-HEALTH-NEEDS-ASSESSMENT)).

## Hazard Vulnerability Assessments

In the past, the Massachusetts Emergency Management Agency (MEMA), the Western Region Homeland Security Advisory Council (WRHSAC), the Public Health Emergency Preparedness (PHEP) Coalitions, and the Health and Medical Coordinating Coalition (HMCC) have conducted Hazard Vulnerability Assessments (HVA) and Threat and Hazard Identification Risk Assessments (THIRA) to identify the most likely threats and how likely they are to occur in an area. The State 2013 State Hazard Mitigation Plan ranks the known hazards by risk and frequency. [ocn921510011.pdf](#). The State also has a 2018 Plan ([Massachusetts Integrated State Hazard Mitigation and Climate Adaptation Plan | Mass.gov](https://www.mass.gov/Massachusetts-Integrated-State-Hazard-Mitigation-and-Climate-Adaptation-Plan)).

In light of the COVID19 pandemic, climate change and the rising risk of cyber security issues, these assessments likely need updating again. This is especially important if greater weight is given to equity related issues that make a hazard a higher priority if it is more likely to significantly impact individuals at additional risk or with fewer resources. Though not as visible as physical infrastructure modifications, equity mitigation efforts that require changes to policies, systems and training are often harder than physical infrastructure to update.

Analyzing available Threat and Hazard Vulnerability Assessments and other available data, the most likely hazards/threats to result in a major emergency in Berkshire County include most of the hazards, threats and concerns found in the rest of Western Mass, though there may be different priorities in each county based on local conditions.

## Berkshire County Specific Hazards, Threats, Concerns, and Vulnerabilities

In addition to the hazards and threats common in Western Mass, the following are specific risk indicators, concerns, and vulnerabilities identified through interviews and other sources for Berkshire County. In many cases these issues also affect more than one county but were either not mentioned in interviews or did not rise to the top during data analysis.

1. **Older population:** 24% of the population is over 65 with a median age of 46.7 years, one of the highest rates in Massachusetts. Some communities have a majority over 50 years old.
2. **Seasonal visitors:** A holiday area since the 1700s, currently with a large population of second homeowners as well as tens of thousands of seasonal visitors annually.
3. **Broadband and cell service gaps:** Many towns are finally getting access to broadband, but affordability is an issue. Cell service remains spotty in the hilly valleys.
4. **Electricity Dependent:** Over 1000 individuals are medically dependent on equipment powered by electricity. The elderly and very young also depend on electricity to maintain a safe temperature range.
5. **Rural communities,** with fewer resources, less infrastructure, and higher costs per capita.
6. **Critical lack of housing** for middle income workers as well as lower income individuals, families, and older adults
7. **Large income disparities** between second homeowners and residents.
8. **Lack of well-organized regional coordination** of social services and public information.
9. **Distance:** Berkshire County is far from large Massachusetts cities and the seat of power and gets its news from Albany, NY instead of Boston.

## Selected Risk Indicators of Individuals at Greater Risk in Emergencies (2020)

This chart quantifies the estimated numbers of individuals for selected risk factors and indicator data points in Berkshire County. Note that individuals may be counted in more than one category.

<b>Risk Factor/Indicator</b>	<b>Berkshire</b>
<b>Population 2020**</b>	129,028
<b>Living in Poverty**</b>	14,063
<b>Over 65**</b>	31,740
<b>Over 65 Living Alone*</b>	9,849
<b>No Vehicle*</b>	1,895
<b>Education Lower Than HS Graduate**</b> (over age 25)	9,031
<b>Non-English Speaking at Home**</b> (over age 5)	9,548
<b>Living with One or Two Disabilities*</b>	19,580
<b>Vision Difficulty*</b>	2,929
<b>Hearing Difficulty*</b>	5,414
<b>Self-Care Difficulty*</b> (difficulty dressing, bathing, or getting around inside their home)	3,136
<b>Independent Living Difficulty*</b> (challenges performing activities of daily living or doing errands on their own, such as visiting a doctor's office)	7,159
<b>Cognitive Difficulty*</b>	7,832
<b>Ambulatory Difficulty*</b> (often involves severe difficulty with walking or climbing stairs)	9,100
<b>With a Disability, Under Age 65**</b>	13,676
<b>Long-term Care Residents*</b>	1,753
<b>Households without High-Speed Internet**</b>	18,321
<b>Identifying as Other than White-Alone, Non-Hispanic**</b>	16,773
<b>Affordable Housing Units***</b> (Risk Indicator; these individuals likely have fewer resources)	12,961
<b>Premature Death Years****</b> (indicates cumulative Risk; years of potential life lost due to death occurring before age 75, per 100,000)	8,500

\*[W MA HMCC Hazard Vulnerability Assessment June 2022 – Western MA Health and Medical Coordinating Coalition \(region1hmcc.org\)](https://region1hmcc.org)

\*\*[U.S. Census Bureau QuickFacts: Hampden County, Massachusetts; Hampshire County, Massachusetts; Franklin County, Massachusetts; Berkshire County, Massachusetts; Massachusetts](https://www.census.gov/quickfacts/hampden-county-massachusetts)

\*\*\*[Low Income Apartments and Section 8 Waiting Lists in Massachusetts \(affordablehousingonline.com\)](https://www.mass.gov/info-details/low-income-apartments-and-section-8-waiting-lists-in-massachusetts)

\*\*\*\*Years of potential life lost before age 75 per 100,000, RWJ County Health Ranki

## Research Data and Sources

**Figure 1. Selected Population Characteristics Contributing to Inequities in Emergencies**

Source: WMHMCC 2019/2020, [Berkshire-County-Vulnerable-Pop-Data.pdf](#)

	No Vehicle		Below Poverty Level		Less than 9th-Grade Education		Over 65 who live alone		No English Spoken		One Disability		Two Disabilities	
	Number of People	% of Population	Number of People	% of Population	Number of People	% of Population	Number of People	% of Population	Number of People	% of Population	Number of People	% of Population	Number of People	% of Population
Adams	140	3.4	913	11.2	178	2.9	576	37.1	1	0	612	7.5	575	7.1
Alford	0	0	25	5.8	5	1.4	16	8.1	11	2.8	42	9.7	30	7
Becket	0	0	135	7	14	0.9	76	18.2	0	0	141	7.3	100	5.2
Cheshire	28	1.7	224	7.1	48	1.9	241	33.1	0	0	433	13.8	210	6.7
Clarksburg	3	0.3	149	8.4	40	3.1	73	18.4	0	0	169	9.5	143	8
Dalton	40	1.1	320	4.9	17	0.3	449	31.5	8	0.1	395	6.1	462	7.1
Egremont	0	0	72	5.1	27	2.4	69	17.6	0	0	107	7.6	69	4.9
Florida	11	3	95	12	29	5	36	22.9	0	0	66	8.2	102	12.6
Gt Barrington	191	5.9	495	8.4	62	1.3	436	27.6	56	0.9	269	4.1	287	4.4
Hancock	6	1.9	42	7	9	1.9	17	12.2	0	0	23	3.8	32	5.3
Hinsdale	15	1.5	216	11.8	0	0	118	26.2	0	0	109	5.9	143	7.8
Lanesborough	0	0	229	7.7	19	0.9	170	23.2	0	0	261	8.8	136	4.6
Lee	15	0.5	296	5.4	146	3.4	338	23.6	59	1.1	346	6.2	381	6.8
Lenox	37	1.8	243	5.3	38	1	679	35.7	0	0	428	9.1	323	6.9
Monterey	0	0	39	5	42	6.8	60	21.3	0	0	37	4.8	39	5
Mt Washington	3	3.7	22	14.9	2	1.4	14	29.2	2	1.4	13	8.8	7	4.7
New Ashford	0	0	20	6.7	5	2.2	14	17.1	0	0	30	10	18	6
N Marlborough	17	2.4	56	3.8	14	1.2	90	20.6	0	0	65	4.2	154	10
North Adams	348	6.7	2,300	19.4	565	6.5	969	39.2	21	0.2	1,687	13.1	1,217	9.5
Otis	0	0	62	4.5	3	0.2	85	21.7	0	0	99	7.1	74	5.3

Peru	5	1	70	8.5	5	0.8	30	30	0	0	52	6.3	29	3.5
Pittsfield	930	4.4	5,602	13.4	865	2.7	2,936	33.8	378	0.9	3,754	8.9	3,690	8.8
Richmond	5	0.6	103	6.9	12	1	89	19.9	0	0	76	5.1	51	3.4
Sandisfield	5	1.2	35	4.2	13	2	59	25.5	0	0	44	5.3	61	7.3
Savoy	2	0.5	47	7.1	20	3.8	43	30.5	0	0	28	4.1	52	7.7
Sheffield	0	0	262	8.3	101	4.1	270	30.8	0	0	246	7.8	150	4.7
Stockbridge	8	1.1	257	14.9	41	2.7	270	40.8	0	0	239	13.6	182	10.3
Tyringham	6	2.6	50	10.5	1	0.3	19	11.9	0	0	41	8.6	17	3.6
Washington	0	0	21	4.2	4	1	29	17.8	0	0	25	5	25	5
W Stockbridge	8	1.2	76	7	6	0.7	61	21.4	0	0	63	5.8	47	4.3
Williamstown	72	3.2	537	11	24	0.6	472	32	2	0	462	6.4	356	4.9
Windsor	0	0	50	5.8	0	0	45	24.7	0	0	30	3.5	26	3

**Totals                    1,895                    13,063                    2,355                    8,849                    538                    10,392                    9,188**

	Vision Difficulty		Self Care Difficulty		Independent Living Difficulty		Cognitive Difficulty		Hearing Difficulty		Ambulatory Difficulty	
	Number of People	% of Population	Number of People	% of Population	Number of People	% of Population	Number of People	% of Population	Number of People	% of Population	Number of People	% of Population
Adams	202	2.5	218	2.8	433	6.4	410	5.3	328	4	600	7.8
Alford	11	2.6	13	3.3	27	7.4	10	2.5	29	6.7	32	8
Becket	28	1.4	37	2	63	3.9	107	5.8	101	5.2	92	4.9
Cheshire	19	0.6	14	0.5	216	7.8	316	10.4	221	7	200	6.6
Clarksburg	39	2.2	38	2.2	118	8.3	130	7.6	103	5.8	128	7.5
Dalton	124	1.9	274	4.4	294	5.4	263	4.2	274	4.2	374	6
Egremont	14	1	32	2.4	41	3.5	67	5	85	6.1	55	4.1
Florida	23	2.8	22	2.8	64	10	80	10.1	37	4.6	86	10.9
Gt Barrington	50	0.8	177	2.9	228	4.4	305	5	168	2.6	256	4.2
Hancock	11	1.8	9	1.6	11	2.1	20	3.5	20	3.3	28	4.8
Hinsdale	22	1.2	53	3	125	8	147	8.3	74	4	105	6

Lanesborough	83	2.8	72	2.6	96	4	185	6.6	139	4.7	149	5.4
Lee	152	2.7	142	2.6	278	6.2	437	8	178	3.2	324	5.9
Lenox	18	0.4	208	4.6	325	7.9	134	2.9	260	5.5	342	7.5
Monterey	26	3.4	6	0.8	53	8	34	4.5	36	4.7	25	3.3
Mt Washington	0	0	6	4.1	9	6.1	7	4.8	1	0.7	10	6.8
New Ashford	2	0.7	12	4.1	12	4.6	9	3.1	20	6.7	34	11.5
N Marlborough	51	3.3	64	4.4	72	5.7	97	6.6	112	7.3	153	10.4
North Adams	495	3.9	307	2.5	779	7.4	1,105	9	791	6.2	1,495	12.2
Otis	24	1.7	29	2.2	55	4.4	31	2.3	79	5.7	72	5.4
Peru	14	1.7	9	1.2	17	2.5	34	4.5	18	2.2	26	3.5
Pittsfield	1,198	2.8	1,105	2.8	3,143	9.2	3,121	7.8	1,885	4.5	3,554	8.9
Richmond	10	0.7	25	1.8	52	4.1	31	2.2	52	3.5	64	4.5
Sandisfield	16	1.9	26	3.3	32	4.8	45	5.7	33	3.9	63	8
Savoy	18	2.7	2	0.3	19	3.3	28	4.3	38	5.6	48	7.3
Sheffield	42	1.3	29	0.9	139	5.1	125	4	196	6.2	144	4.7
Stockbridge	53	3	39	2.3	163	10.2	156	9	102	5.8	212	12.3
Tyringham	7	1.5	4	0.9	7	1.7	15	3.3	30	6.3	23	5
Washington	2	0.4	14	2.9	16	3.7	17	3.6	20	4	37	7.8
W Stockbridge	25	2.3	10	1	26	2.9	29	2.9	52	4.8	41	4
Williamstown	144	2	123	1.7	230	3.7	324	4.6	309	4.3	301	4.2
Windsor	6	0.7	17	2	16	2.2	13	1.6	23	2.7	27	3.2
<b>Totals</b>	<b>2,929</b>		<b>3,136</b>		<b>7,159</b>		<b>7,832</b>		<b>5,814</b>		<b>9,100</b>	



## Berkshire County Fatal Opioid Overdoses by Municipality (data from Census and MDPH Report [download \(mass.gov\)](#))

Town	Region	Rural level	Sq. Mileage	Population	Opioid Settlement	Fatal OD 2020	Fatal OD 2021
Adams	North	1	23	8,100	\$39,900	1.00	5.00
Alford	South	2	11.5	486	\$2,100	0.00	0.00
Becket	Central	1	47.8	1932	\$14,700	0.00	0.00
Cheshire	Central	1	27.5	3236	\$4,200	2.00	3.00
Clarksburg	North	2	12.8	1649	\$63,000	1.00	0.00
Dalton	Central	1	21.9	6,290	\$25,200	0.00	3.00
Egremont	South	2	18.9	1208	\$10,500	0.00	1.00
Florida	North	2	24.6	685	\$35,700	0.00	0.00
Great Barrington	South	2	45.86	7,165	\$50,400	3.00	0.00
Hancock	Central	2	35.8	751	\$16,800	0.00	0.00
Hinsdale	Central	1	21.7	1908	\$8,400	3.00	0.00
Lanesborough	Central	1	29.6	3027	\$121,800	2.00	1.00
Lee	South	2	27	5755	\$319,200	2.00	3.00
Lenox	South	2	21.7	5,099	\$338,100	2.00	0.00
Monterey	South	2	26.4	1092	\$8,400	0.00	1.00
Mt. Washington	South	2	22.4	159	\$0	1.00	0.00
New Ashford	North	1	13.48	248	\$0	0.00	0.00
New Marlborough	South	2	47.9	1518	\$6,300	0.00	0.00
North Adams	North	2	20.3	12,880	\$720,300	13.00	9.00
Otis	South	2	38	1629	\$8,400	0.00	0.00
Peru	Central	2	26	804	\$2,100	1.00	1.00
Pittsfield	Central		42.46	43,641	\$2,423,400	22.00	33.00
Richmond	Central	1	19	1405	\$73,500	1.00	0.00
Sandisfield	South	2	52.97	982	\$4,200	1.00	1.00
Savoy	North	1	36	645	\$21,000	0.00	0.00
Sheffield	South	2	48.6	3312	\$14,700	0.00	0.00
Stockbridge	South	2	23.67	2003	\$18,900	1.00	0.00
Tyringham	South	2	18.9	423	\$2,100	0.00	0.00
Washington	Central	1	38.8	493	\$0	0.00	0.00
West Stockbridge	South	2	18.5	1338	\$6,300	0.00	0.00
Williamstown	North	2	46.87	7,813	\$163,800	0.00	0.00
Windsor	Central	1	35.2	821	\$2,100	0.00	1.00
Berkshire County			946	128,657	\$4,525,500	56.00	62.00
				as of 2021			
				as of 2022			
				as of 2020			

### Climate-Related Risk Assessments

Traditionally, people have settled along streams, rivers and flood plains as these locations provided access to water, transportation, and fertile valleys for crops. Development and climate change have increased flood risks everywhere, but especially in known flood plains. Federal Flood Maps for Berkshire, Franklin, and Hampshire Counties haven't been updated since the 1980s. We also know that heat emergencies are increasing as areas have longer and longer warm seasons and shorter cold months, though temperature extremes are happening in both seasons.

The 2022 Massachusetts Climate Change Assessment notes the increased risks for the Berkshires and the neighboring Hill towns face a 3.6-degree temperature increase that will impact crops, dairy farmers and of course people without air conditioning. Increased flooding in the Housatonic River basin is also expected to be a major threat to the region. "The 1 percent annual chance river flood could be three times more likely to occur, increasing Housatonic and other river flood risk" by 2050. Warmer, wetter weather means more vector-borne diseases, reduction in food safety, higher risk to buildings and infrastructure, increased costs and demand for municipal services, reduction in safe housing stock, degradation of forests, and damage to tourist attractions which are a major industry in the Berkshires <https://www.mass.gov/doc/english-8/download> (2022 Massachusetts Climate Change Assessment: Regional Reports).

The 2018 State Hazard Mitigation and Climate Adaptation Plan focuses on natural hazards and doesn't address pandemics or cyber-security issues ([Massachusetts Integrated State Hazard Mitigation and Climate Adaptation Plan | Mass.gov](#)).

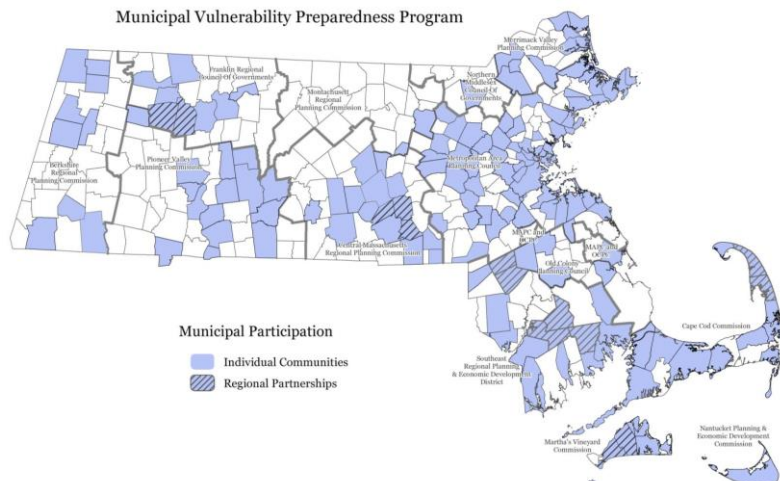
**Figure 2. Heat Vulnerability Indicators**

County	Estimated Increase in Average Temperature by 2100 (°F)	General Vulnerability Indicators			Heat Vulnerability Indicators			
		Proportion of Population Aged 65 or Older	Proportion of Population Aged Younger than 5 Years	Proportion of the Population Living Below Poverty Level	Rate of Emergency Room Visits for Heat Stress (per 10,000 residents)	Rate of Hospital Admissions for Heart Attacks (per 10,000 residents)	Rate of Emergency Department Visits for Asthma per 10,000 Residents	Rate of Emergency Department visits for Asthma for Children under age 15 per 10,000 Residents
Barnstable	+6.6°	25%	4%	9%	0.07	3.51	89.1	82.8
Berkshire	+8.3°	19%	5%	13%	0.07	4.39	90.7	82.5
Bristol	+6.5°	14%	6%	13%	0.12	4.41	88.1	97.6
Dukes	+6.9°	16%	5%	12%	NS	3.08	118.9	151.3
Essex	+6.6°	14%	6%	11%	0.10	3.76	76.0	107.7
Franklin	+5.6°	17%	5%	15%	0.13	4.29	68.5	83.7
Hampden	+6.4°	6%	6%	17%	0.11	4.25	120.3	164.8
Hampshire	+7.5°	5%	4%	15%	0.12	3.96	48.0	69.1
Middlesex	+6.2°	13%	6%	8%	0.11	3.56	49.6	76.9
Nantucket	+7°	12%	7%	12%	—	2.84	125.6	155.2
Norfolk	+6.7°	15%	6%	7%	0.10	3.85	48.6	79.0
Plymouth	+6.2°	14%	6%	8%	0.14	4.71	70.8	87.1
Suffolk	+6°	10%	5%	21%	0.16	3.38	122.3	241.7
Worcester	+6.6°	13%	6%	12%	0.09	4.13	76.7	120.4

Sources: U.S. Census Fact Finder n.d.; Massachusetts Environmental Public Health Tracking n.d.; NS = suppressed (number of cases or rate is below reporting threshold)

**Figure 3. Map of Municipal Vulnerability Preparedness Communities**

Source: [Massachusetts State Hazard Mitigation and Climate Adaptation Plan \(mass.gov\)](#)



**Cell Service**

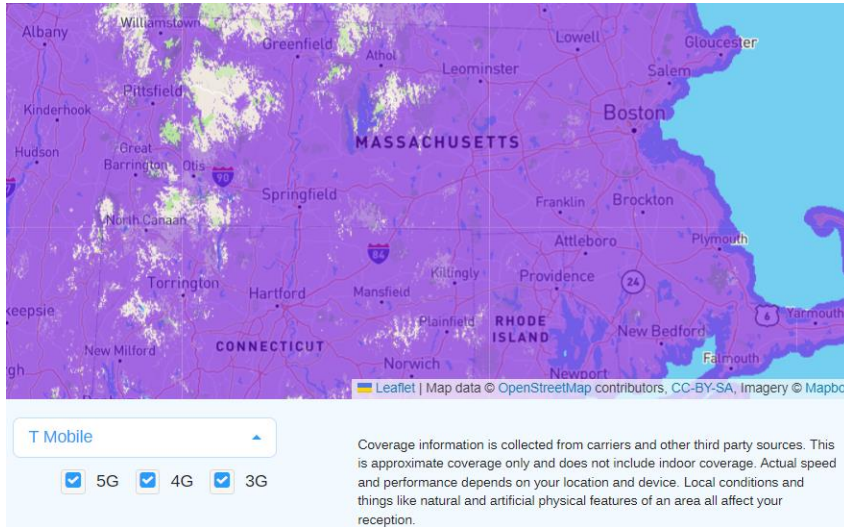
Unlike most of Massachusetts, cell phone coverage in Berkshire's deep valleys and remote areas is very spotty. Coverage maps don't really tell the story of usable services, especially in emergencies when cell

service may be out or overwhelmed. Many people now rely on Wi-Fi-based calling at home, though these services are also spotty in rural or remote areas.

The map below is from an interactive site where users can see coverage for various cell service providers. This screen capture specifically shows T Mobile coverage, and while the state is generally well-covered, there are patches of spotty areas, especially directly east of Pittsfield.

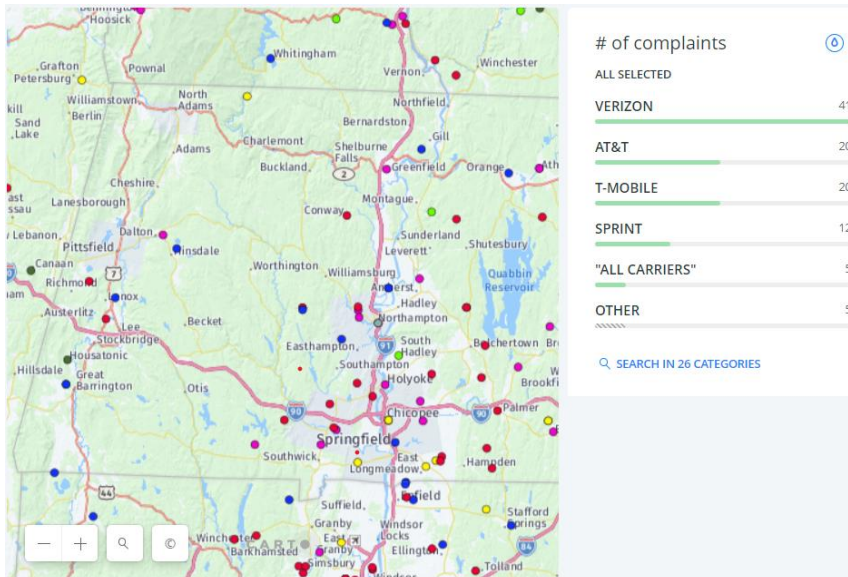
### Figure 4. Cell Service Coverage Information

Source: [Best Cell Phone Coverage in Massachusetts | WhistleOut](#)



### Figure 5. Cell Phone Coverage Complaints

Source: [Massachusetts Cell Phone Coverage Map & Carrier Reviews \(deadcellzones.com\)](#)

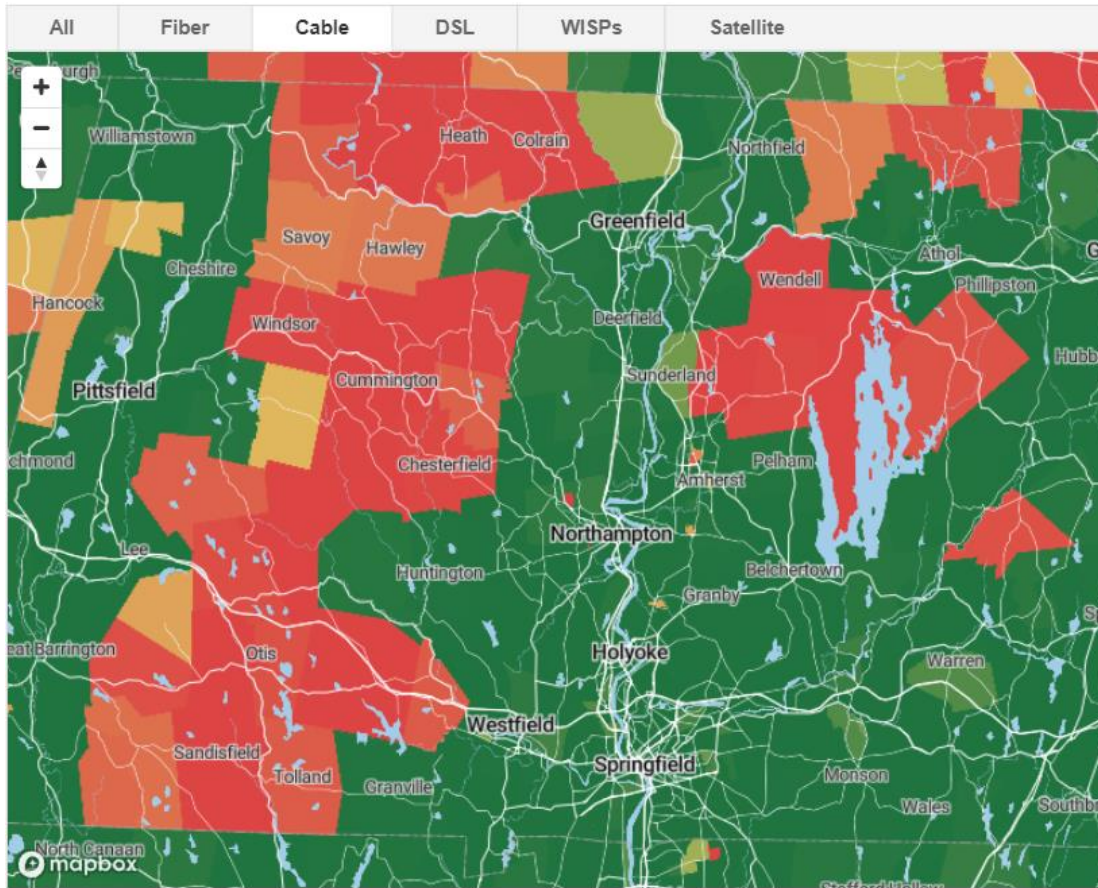


## Internet Service

While many areas in Western Mass have joined the Wired West initiative to bring fiber and cable to every community, there remains many areas that are underserved, especially in the rural, remote areas often referred to as the “hill towns.” This limits the ability of many to access internet-based services, attend remote meetings, or access information in real-time.

**Figure 6. Cable Internet Availability in Western Massachusetts**

Source: [Cable Internet Availability with Speed and Coverage Analysis | BestNeighborhoods.org](http://CableInternetAvailabilitywithSpeedandCoverageAnalysis|BestNeighborhoods.org)

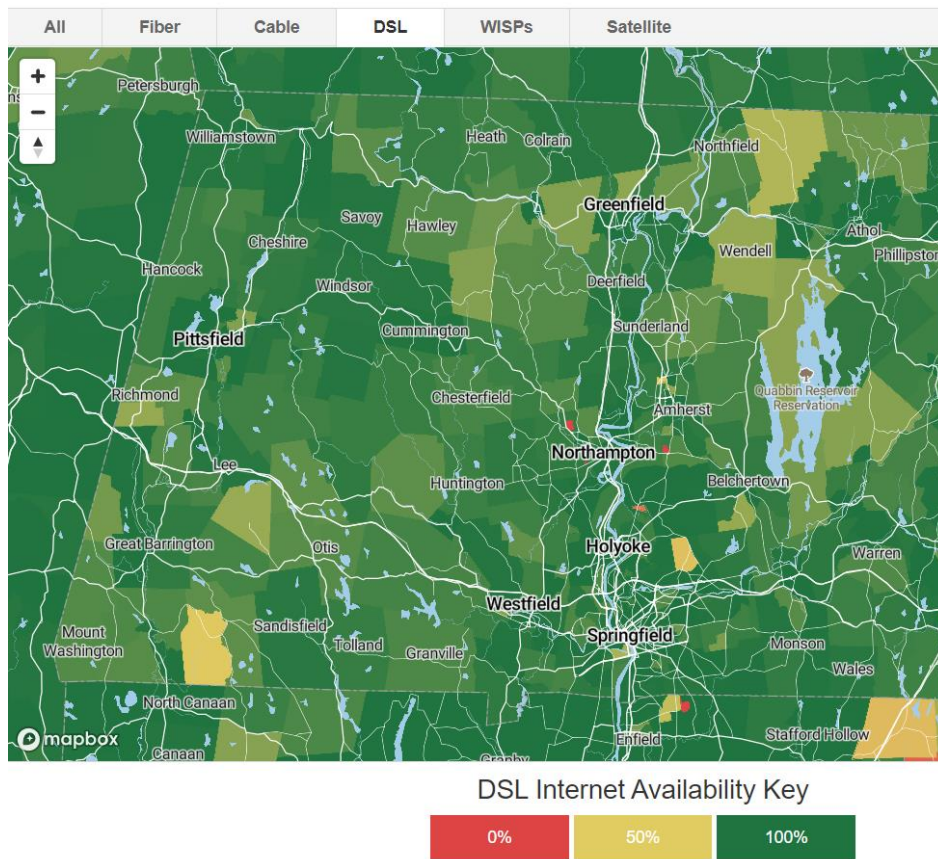


Cable Internet Availability Key



## Figure 7. DSL Availability in Western Massachusetts

Source: [DSL Internet Availability with Speed and Coverage Analysis | BestNeighborhood.org](https://www.bestneighborhood.org/DSL-Internet-Availability-with-Speed-and-Coverage-Analysis)

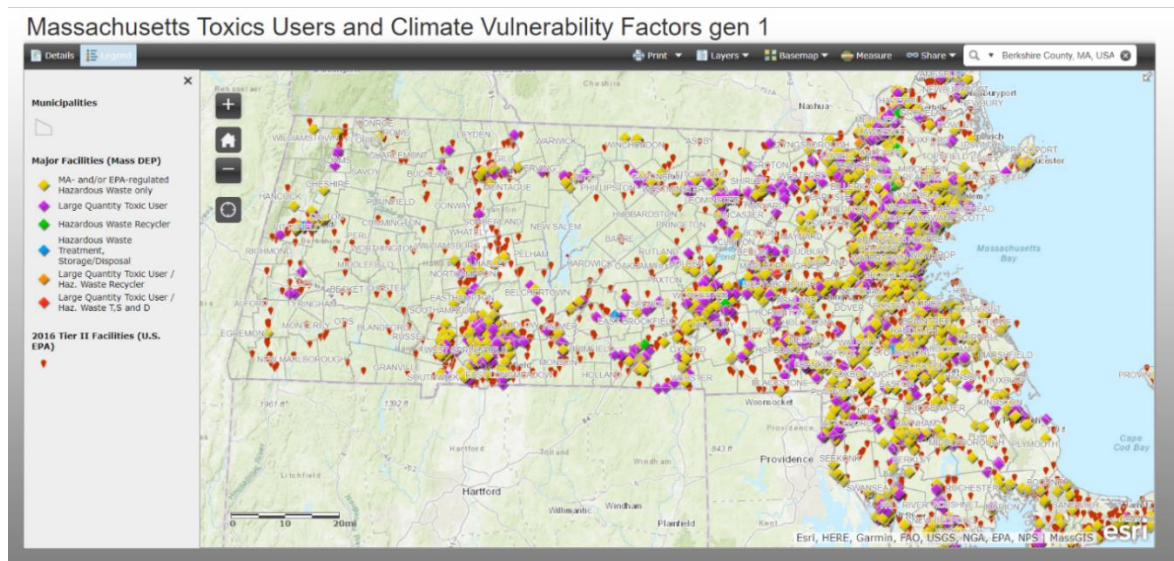


## Hazardous Materials and Waste Sites

Berkshire County has a significant number of known hazardous material sites spread throughout the county, dozens of them located in areas subject to flooding.

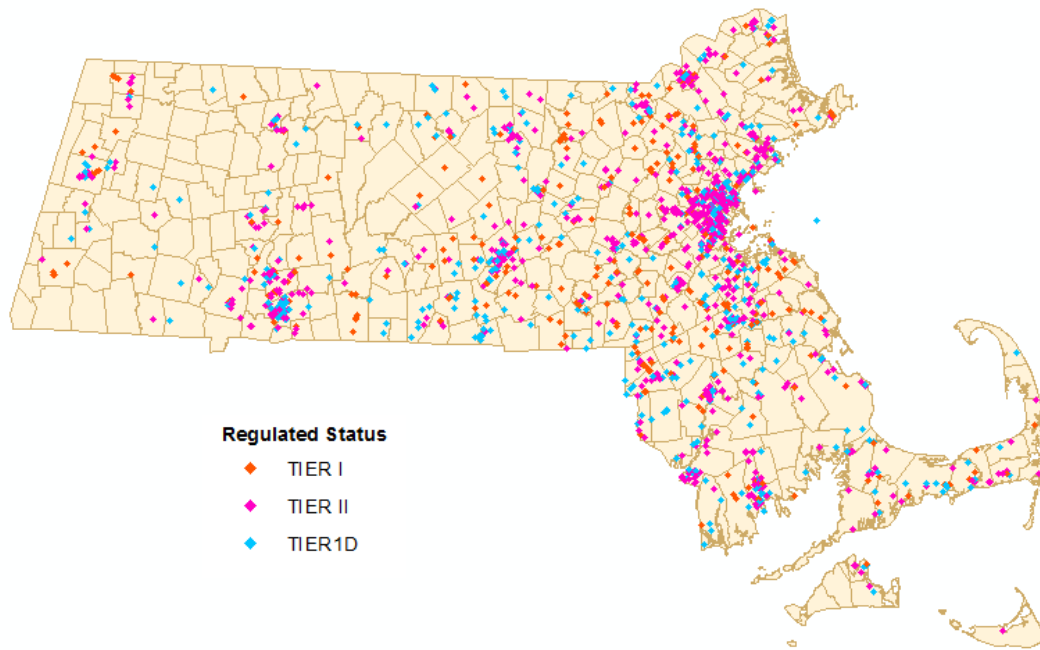
## Figure 8. Hazardous Waste Sites

Source: [Massachusetts Toxics Users and Climate Vulnerability Factors gen 1 \(arcgis.com\)](https://arcgis.com)



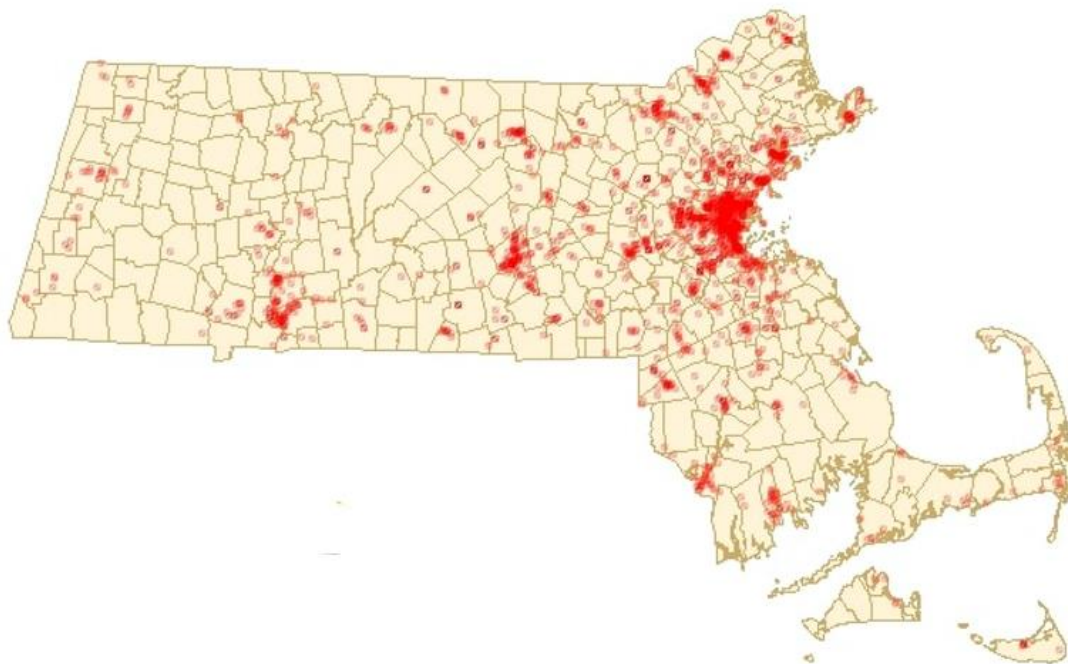
**Figure 9. MassDEP Tier Classified Oil and/or Hazardous Material Sites**

Source: <https://www.mass.gov/files/images/massgis/datalayers/c21e.png>



**Figure 10. MassDEP Oil and/or Hazardous Material Sites with Activity and Use Limitations**

Source: [aul.jpg \(609x382\) \(mass.gov\)](#)



## **Environmental Justice Areas**

There are twelve Environmental Justice (EJ) areas in Berkshire County where at least 40% of the town or neighborhood's population live in poverty. EJ populations are those segments of the population that the Executive Office of Energy and Environmental Affairs (EEA) has determined to be most at risk of being unaware of or unable to participate in environmental decision-making or to gain access to state environmental resources. They are defined as neighborhoods (U.S. Census Bureau census block groups or for health data, census tract levels) that meet one or more of the following criteria: [Environmental Justice Populations in Massachusetts | Mass.gov](#)

- The median annual household income is at or below 65 percent of the statewide median income for Massachusetts; or
- 25 percent of the residents are minority; or
- 25 percent of the residents are lacking English language proficiency; or
- Childhood cancer/lead poisoning or asthma rates are statistically significantly higher than the statewide averages ([Massachusetts 2020 Environmental Justice Populations \(arcgis.com\). https://mass.gov/dph/ej-tool](#)).

Berkshire communities that have EJ neighborhoods include Adams (46.5%), Cheshire (41.6%), Dalton (31.4%), Great Barrington (35.2%), Hinsdale (25.9%), Lanesborough (23.5%), Lee (12%), Lenox (37%), North Adams (85.9% + 14% community of Color), Pittsfield (56.1%), Stockbridge (38%), and Williamstown (43.2%).

## **Mental Health**

According to the most recent Berkshire Health Systems' Community Health Needs Assessment (CHNA), Berkshire residents are more likely than other Massachusetts residents to commit suicide (<https://berkshirebenchmarks.org/wp-content/uploads/2022/08/Berkshire-County-Health-Needs-Assessment-2018-Final.pdf>).

## **Berkshire Health Systems CHNA, 2021**

Source: [COMMUNITY HEALTH NEEDS ASSESSMENT \(berkshirehealthsystems.org\)](#)

### **Priorities**

- Chronic disease with a focus on cancer, heart disease, and diabetes
- Housing stability/homelessness
- Mental illness and mental health
- Substance use disorders

### **Focus Areas**

These focus areas are also informed by the DPH's six social determinants of health priorities, which ask our organization to recognize and address issues of racism and institutional bias that emerge in each of these priority areas and create a significant impact on health outcomes, especially among historically marginalized populations:

- Built Environment
- Social Environment
- Housing
- Violence
- Education
- Employment

## Top Barriers

- Community is resource rich but coordination poor
- Agencies working silos
  - No one-stop resource management
  - Community members have limited knowledge/understanding of how or where to access resources for our vulnerable population

## Housing

The quality of housing is strongly associated with health outcomes. It is one of the strongest social determinates of health. Unsafe, uncertain, or unhealthy housing are strongly associated with multiple physical and mental health issues including “morbidity from infectious diseases, chronic illnesses, injuries, poor nutrition, and mental disorders ([Housing and Health: Time Again for Public Health Action - PMC \(nih.gov\)](#)).

On a given night in Berkshire County it is estimated that 651 individuals are homeless or about 18/10,000 ([Massachusetts - National Alliance to End Homelessness](#)).

**Figure 11. Electricity Dependent Medicare Beneficiaries**

Source: [HHS emPOWER Map](#)

Geographic Area	Town	Beneficiaries	Electricity-Dependent
01201	Pittsfield	11,452	295
01220	Adams	2,331	78
01222	Ashley Falls	201	11
01223	Becket, Washington	692	16
01224	Lanesborough	34	0
01225	Cheshire	972	21
01226	Dalton	1,720	39
01230	Great Barrington	2,415	48
01235	Hinsdale, Peru	815	18
01236	Housatonic	518	15
01237	Lanesborough	904	22
01238	Lee	1,809	49
01240	Lenox	1,910	37
01245	Monterey	290	11
01247	North Adams	4,146	180
01253	Otis	534	17
01254	Richmond	433	11
01255	Sandisfield	213	11
01256	Savoy	181	11
01257	Sheffield	745	1



Geographic Area	Town	Beneficiaries	Electricity-Dependent
01258	S.Egremont, Mt. Washington	284	11
01259	Southfield	184	11
01262	Stockbridge	644	12
01264	Tryingham, Lee	88	11
01266	West Stockbridge, Alford	488	11
01267	Williamstown	1,800	44
01270	Windsor	230	11
	<b>Totals</b>	<b>36,033</b>	<b>1,014</b>

### Youth Health and Risk Behaviors

Youth in Massachusetts report health and risk behaviors that may be reflected in Pittsfield youth as well. While smoking rates in general are down, vaping rates are up. There seems to be less stigma associated with marijuana use, and driving under the influence has increased. The number of youth reporting feelings of hopelessness is rising. Bullying has increased and now includes cyber bullying. Nutritional habits such as drinking milk and eating breakfast are down. Physical activity rates go down as children age, and obesity goes up. A quarter of students reported going to bed hungry in the previous week. While most students felt their neighborhoods were safe, 14% of middle schoolers reported seeing someone physically harmed in their neighborhood ([Massachusetts Youth Risk Behavior Survey](#) and [Massachusetts Youth Health Survey](#)).

### Figure 12. Disabilities – Census

Source: [B18108: Census Bureau Table](#)

Label	United States		Berkshire County, Massachusetts	
	Estimate	Margin of Error	Estimate	Margin of Error
▼ Total:	323,120,678	±17,674	122,886	±569
▼ With a disability:	41,089,958	±115,466	17,465	±2,374
With a hearing difficulty	11,495,247	±58,968	4,479	±964
With a vision difficulty	7,467,040	±58,337	2,299	±711
With a cognitive difficulty	15,797,245	±87,227	7,447	±1,696
With an ambulatory difficulty	20,843,415	±86,983	9,333	±1,729
With a self-care difficulty	8,004,156	±51,486	3,681	±1,154
With an independent living difficulty	14,987,954	±72,450	7,231	±1,632
No disability	282,030,720	±115,085	105,421	±2,375

Label	United States		Massachusetts	
	Estimate	Margin of Error	Estimate	Margin of Error
▼ Total:	323,120,678	±17,674	6,820,969	±1,160
▼ With a disability:	41,089,958	±115,466	785,093	±13,365
With a hearing difficulty	11,495,247	±58,968	211,104	±6,664
With a vision difficulty	7,467,040	±58,337	112,017	±6,167
With a cognitive difficulty	15,797,245	±87,227	324,784	±9,352
With an ambulatory difficulty	20,843,415	±86,983	372,584	±9,835
With a self-care difficulty	8,004,156	±51,486	157,832	±7,049
With an independent living difficulty	14,987,954	±72,450	295,904	±9,823
No disability	282,030,720	±115,085	6,035,876	±13,406

**Figure 13. Top Health/Mental Health Challenges in Berkshire County**

Source: [COMMUNITY HEALTH NEEDS ASSESSMENT \(berkshirehealthsystems.org\)](https://www.berkshirehealthsystems.org/communities/berkshire-county-community-health-needs-assessment)

Health / Mental Health Challenges	Berkshire County	Massachusetts
Heart Disease: Annual Death Rate per 100K	291.1	254.4
Cancer: Annual Death Rate per 100K	152.9	146.9
Opioid-Related Overdose: Death Rate per 100K	48.1	32.6
Suicides per 100K	17.4	10
Adult Obesity	27%	25%
Excessive Drinking	26%	24%
Adult Smoking Prevalence: <i>*2nd highest in MA</i>	19%	14%
Diabetes Prevalence: <i>*2nd highest in MA</i>	10.70%	8.40%

### Resiliency Disparities

For Black Berkshire County residents ([4,011 individuals as of 7/1/2019](#)), resiliency risks are even greater, owing to multi-generational disparities in median household income, poverty, educational attainment, and homeownership, seen most clearly in [differences in years of potential life lost](#).

The same holds true for immigrants, a population the Berkshire Immigrant Center (BIC) estimates at more than 10,000. These individuals often face language and other barriers when seeking housing, healthcare, food, and related services. In 2021, BIC worked with 756 clients from 65 countries, the largest share from Central and South America, followed by West Africa. Many immigrants were declared essential workers during the pandemic, yet the extent of their contribution to the local economy in the region during that time is not fully known. (BRPC CEDS 2022). According to leaders in the Latino communities, there are

significantly more immigrants than captured by the 2010 Census. This is likely also true for the 2022 Census as many are worried about their immigration status.

**Figures 14-16. Robert Wood Johnson County Health Rankings**

The Robert Wood Johnson County Health Rankings can be used to compare Berkshire County with other counties in Massachusetts and the nation.

Compared to Massachusetts as a whole, Berkshire residents are more likely to die prematurely, be unemployed, be a single parent, have children in poverty, experience income inequity, be victims of violent crime, experience more deaths due to injuries, have more teen births, have a child die, die of a drug overdose, die in a vehicle crash, live in a segregated neighborhood, pay more for childcare, commit suicide, die from firearms, and smoke tobacco products. Opioid deaths doubled between 2015 to 2021 (17 to 33).

Black and Hispanic individuals are more likely than their White counterparts to have low birthweight babies, be teen mothers, have children living in poverty, be hospitalized, skip preventative care, be evicted, and earn lower incomes.


**Figure 14**

	<b>County</b>	<b>State</b>
Population	124,571	6,893,574
% Below 18 years of age	16.5%	19.5%
% 65 and older	24.7%	17.4%
% Non-Hispanic Black	3.3%	7.4%
% American Indian & Alaska Native	0.4%	0.5%
% Asian	1.7%	7.4%
% Native Hawaiian/Other Pacific Islander	0.1%	0.1%
% Hispanic	5.3%	12.6%
% Non-Hispanic White	87.4%	70.5%
% Not proficient in English	1%	5%
% Females	51.6%	51.4%
% Rural	31.6%	8.0%

**Figure 15**

	State	Berkshire	Franklin
High School Completion	91%	93%	93%
Some College	74%	67%	68%
Unemployment	8.9%	9.1%	7.4%
Children in Poverty	11%	15%	14%
Income Inequality	5.4	4.7	4.4
Children in Single-Parent Households	24%	27%	26%
Social Associations	9.4	10.4	11.5
Violent Crime	384	420	407
Injury Deaths	71	103	76
Teen Births	8	10	11
Premature Death	5,700	8,500	6,600
Adult Smoking	12%	18%	16%

**Figure 16**

County Demographics +					
	Berkshire (BE) County	Trend	Error Margin	Top U.S. Performers	Massachusetts
Health Outcomes					
Length of Life					
Premature death	8,500		7,800-9,100	5,600	5,700
Quality of Life					
Poor or fair health	15%		13-17%	15%	13%
Poor physical health days	3.8		3.5-4.1	3.4	3.4
Poor mental health days	4.8		4.5-5.2	4.0	4.2

## County Demographics +

	Berkshire (BE) County	Trend	Error Margin	Top U.S. Performers	Massachusetts
Low birthweight	8%		8-9%	6%	7%

### Additional Health Outcomes (not included in overall ranking) —



COVID-19 age-adjusted mortality	50		41-59	43	100
Life expectancy	78.0		77.5-78.6	80.6	80.2
Premature age-adjusted mortality	380		360-400	290	290
Child mortality	40		30-60	40	30
Infant mortality	5		3-7	4	4
Frequent physical distress	11%		10-13%	10%	10%
Frequent mental distress	15%		14-16%	13%	13%
Diabetes prevalence	8%		8-9%	8%	7%
HIV prevalence	175			38	355

## Health Factors

### Health Behaviors

Adult smoking	18%		15-21%	15%	12%
Adult obesity	26%		24-27%	30%	25%
Food environment index (less access)	8.3/10 (best)			8.8/10	9.3/10
Physical inactivity	28%		25-31%	23%	26%
Access to exercise opportunities	74%			86%	89%
Excessive drinking	23%		22-24%	15%	22%






## County Demographics +

	Berkshire (BE) County	Trend	Error Margin	Top U.S. Performers	Massachusetts
Alcohol-impaired driving deaths	21%		14-27%	10%	31%
Sexually transmitted infections	216.1			161.8	458.8
Teen births	<b>10</b>		9-11	11	8

## Additional Health Behaviors (not included in overall ranking) —

Food insecurity	10% (more than Mass & US)			9%	8% (more insecurity than US)
Limited access to healthy foods	6%			2%	4%
Drug overdose deaths	45		38-52	11	33
Motor vehicle crash deaths/100,000	11 (much higher than Mass)		9-13	9	6
Insufficient sleep	38%		36-40%	32%	34%



## Clinical Care

Uninsured	4%		3-4%	6%	4%
Primary care physicians/Person	840:1			1,010:1	960:1
Dentists/Person	1,060:1			1,210:1	930:1
Mental health providers/Person	110:1			250:1	140:1
Preventable hospital stays	3,472			2,233	4,202
Annual Mammography screening/65-74 yrs.	48%			52%	54%




## County Demographics +

	Berkshire (BE) County	Trend	Error Margin	Top U.S. Performers	Massachusetts
Medicare Flu vaccinations/Pop.	48%			55%	56%

### Additional Clinical Care (not included in overall ranking) —

Uninsured adults	4%		4-5%	7%	4%
Uninsured children	2%		1-2%	3%	2%
Other primary care providers/Person	750:1			580:1	670:1

### Social & Economic Factors

High school completion	93%		92-94%	94%	91%
Some college	67%		63-72%	74%	74%
Unemployment	9.1%			4.0%	8.9%
Children in poverty	15%		10-19%	9%	11%
Income inequality	4.7		4.5-5.0	3.7	5.4
Children in single- parent households	27%		24-31%	14%	24%
Social associations	10.4			18.1	9.4
Violent crime	420			63	384
Injury deaths	103		95-110	61	71


### Additional Social & Economic Factors (not included in overall ranking) —

High school graduation	90%			96%	88%
Disconnected youth	5%		3-8%	4%	5%
Reading scores	3.2			3.3	3.4

## County Demographics +

	Berkshire (BE) County	Trend	Error Margin	Top U.S. Performers	Massachusetts
Math scores	3.0			3.4	3.2
School segregation	0.10			0.02	0.26
School funding adequacy	\$10,235				\$6,474
Gender pay gap	0.82		0.77-0.88	0.88	0.81
Median household income	\$65,500		\$59,000 to \$71,900	\$75,100	\$87,300
Living wage	\$46.01				\$52.84
Children eligible for free or reduced price lunch				32%	
Residential segregation – Black/white	67			27	63
Residential segregation – non- white/white	39			16	47
Childcare cost burden	42%			18%	39%
Childcare centers	10			12	8
Homicides	2		1-4	2	2
Suicides	15		12-19	11	9
Firearm fatalities	6		4-8	8	4
Juvenile arrests					

## Physical Environment

Air pollution – particulate matter	6.0			5.9	6.3
Drinking water violations	Yes				



## County Demographics +

	Berkshire (BE) County	Trend	Error Margin	Top U.S. Performers	Massachusetts
Severe housing problems	15%		14-16%	9%	17%
Driving alone to work	77%		75-79%	72%	68%
Long commute – driving alone	25%		23-27%	16%	44%

## Additional Physical Environment (not included in overall ranking) –

Traffic volume	409				1,434
Homeownership	70%		69-71%	81%	63%
Severe housing cost burden	14%		12-15%	7%	16%
Broadband access	85%		84-86%	88%	88%

Note: Blank values reflect unreliable or missing data

## Median Household Income

County	County Value	Error Margin	AIAN	Asian	Black	Hispanic	White
Berkshire	\$65,500	\$59,000 to \$71,900	\$48,700	\$78,300	\$27,700	\$56,300	\$63,700

## Age-adjusted Death Rate

County	# Deaths	County Value	Error Margin	Asian	Black	Hispanic	White
Berkshire	1,912	380	360-400		820	190	380

## % Children in Poverty

County	County Value	Error Margin	Asian	Black	Hispanic	White
Berkshire	15%	10-19%	4%	43%	32%	10%

**Figure 17. List of Long-Term Care Facilities**

Source: [Emergency Preparedness Planning Tool \(region1hmcc.org\)](https://region1hmcc.org)

Craneville Place Rehabilitation & Skilled Care Center	265 Main Street	<b>Dalton</b>	<b>89</b>
Fairview Commons Nursing & Rehabilitation Center	151 Christian Hill Road	<b>Great Barrington</b>	<b>180</b>
Hillcrest Commons Nursing & Rehabilitation Center	169 Valentine Road	<b>Pittsfield</b>	<b>265</b>
Kimball Farms Nursing Care Center	40 Sunset Avenue	<b>Lenox</b>	<b>74</b>
Kindred Nursing & Rehabilitation-Laurel Lake	620 Laurel Street	<b>Lee</b>	<b>88</b>
Mount Carmel Care Center	320 Pittsfield Road	<b>Lenox</b>	<b>69</b>
Mt Greylock Extended Care Facility	1000 North Street	<b>Pittsfield</b>	<b>100</b>
North Adams Commons Nursing & Rehabilitation Center	175 Franklin Street	<b>North Adams</b>	<b>119</b>
Springside Rehabilitation & Skilled Care Center	255 Lebanon Avenue	<b>Pittsfield</b>	<b>135</b>
Sweet Brook of Williamstown Rehabilitation & Nursing Center	1561 Cold Spring Road	<b>Williamstown</b>	<b>184</b>
Timberlyn East Nursing & Rehabilitation (now closed)	148 Maple Avenue	<b>Great Barrington</b>	<b>88</b>
Timberlyn Heights Nursing & Rehabilitation (now closed)	320 Maple Avenue	<b>Great Barrington</b>	<b>71</b>
Williamstown Commons Nursing & Rehabilitation	25 Adams Road	<b>Williamstown</b>	<b>180</b>
		<b>Total</b>	<b>1642</b>

**Figures 18-22. Findings from Covid Community Impact Survey**

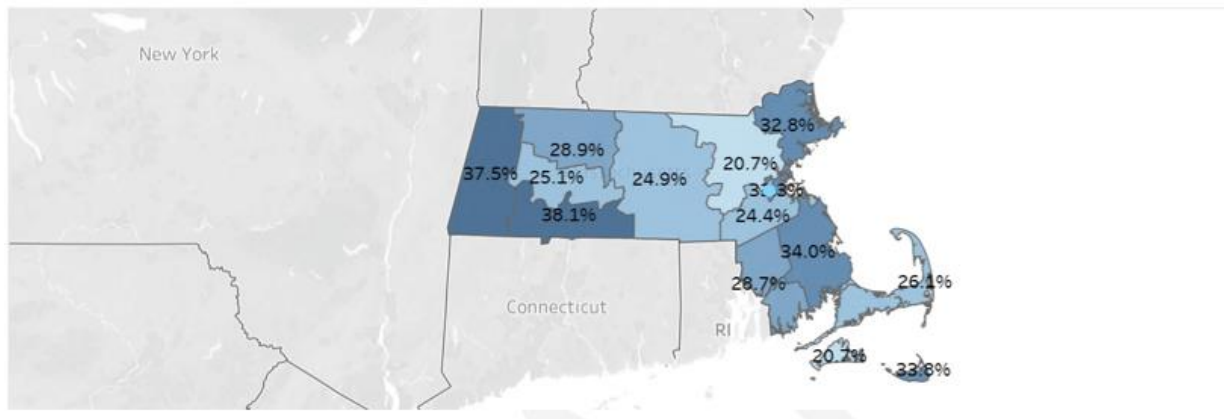
Much of this data suggest the impact of location and access to services/resources on health and mental health outcomes.

Source: [COVID-19 Community Impact Survey Data Dashboard | mass.gov](https://mass.gov)

**Figure 18**

Housing: Are you worried about paying your mortgage, rent, or utilities in the next few weeks?

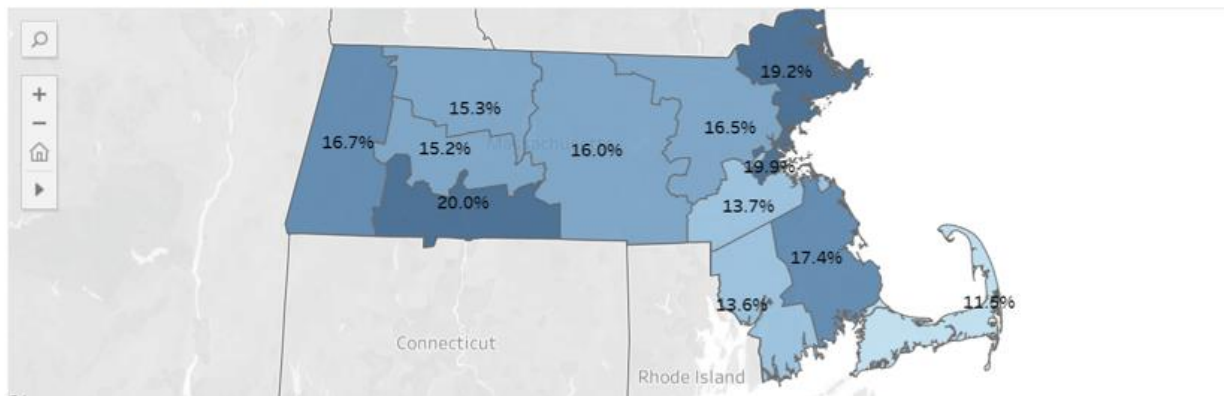
Percent Answering "Yes" by County



**Figure 19**

Housing: Are you worried that you may have to move out of where you live in the next few months?

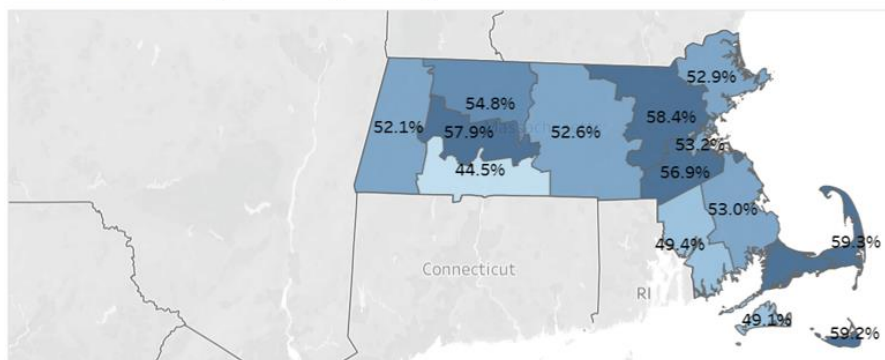
Percent Answering "Yes" by County



**Figure 20**

Substance Use: During the past 30 days, have you drunk any alcohol?

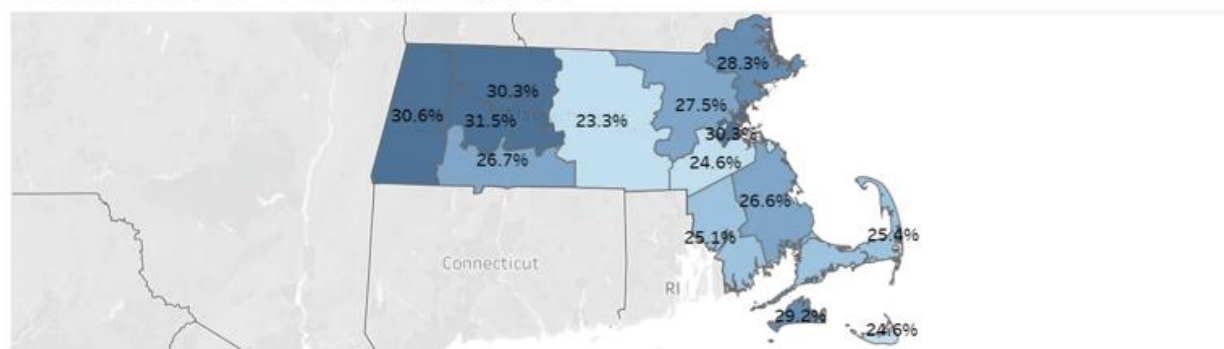
Percent Answering "Yes" by County



**Figure 21**

Mental Health: In the past month, have you had any PTSD-like reactions to things you have seen, heard, or experienced related to the COVID-19 outbreak?

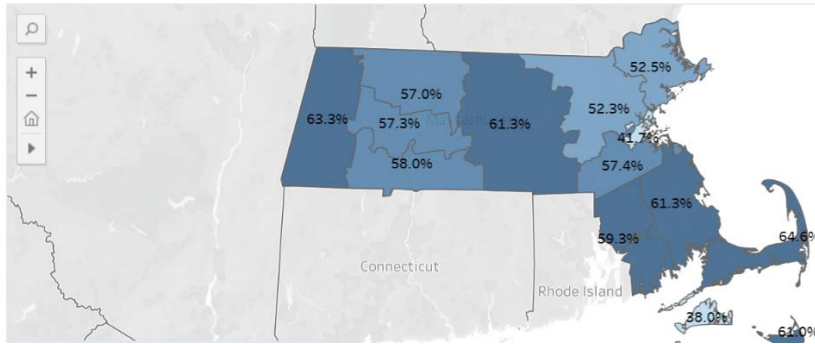
Percent Answering "3+ Reactions" by County



**Figure 22**

COVID-19: Did you ever get tested for COVID-19?

Percent Answering "No" by County



### Berkshire County Data – US News

According to US News (<https://www.usnews.com/news/healthiest-communities/massachusetts/berkshire-county>), Berkshire County lags Massachusetts in reducing racial/ethnic disparities in areas of health. Residents are more likely to be evicted, spend money on sodas, live in a flood hazard zone, experience property and violent crime, and travel a long way to public transit.

#### OVERALL EQUITY SCORE 56

**0.13 Racial Disparity in Educational Attainment** National Median: 0.16 – lower is better

**0.042 Premature Death Disparity Index Score** National Median: 0.041 – lower is better

**0.29 Segregation Index Score** National Median: 0.39 – lower is better

#### Educational Equity – Overall score 52

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Neighborhood Disparity in Educational Attainment	16.88	10.47	15.46	23.77
Racial Disparity in Educational Attainment	0.13	0.16	0.22	0.32

Neighborhood Disparity in Educational Attainment: Lower score indicates smaller gap in bachelor’s degree attainment across census block groups

Racial Disparity in Education Attainment: Lower score on a scale of zero to 1 indicates smaller gap in high school diploma attainment across racial/ethnic groups

Berkshire County looks better than both Massachusetts and US in this metric.

#### Health Equity – Overall score 77

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Air Toxics Exposure Disparity Index Score	1.88	1.87	3.21	15.63
Low Birth Weight Disparity Index Score	0.038	0.062	0.055	0.065
Premature Death Disparity Index Score	0.042	0.041	0.042	0.015

Lower scores show less disparity across ethnic/racial groups – so Berkshire has higher disparities in premature death rates compared to the rest of the Massachusetts (3.5x higher).

## Income Equity – Overall score 56

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Gini Index Score	0.46	0.44	0.44	0.48
Neighborhood Disparity in Poverty	7.00	6.97	7.31	10.80
Racial Disparity in Poverty	0.15	0.13	0.14	0.25

Gini Index: Lower score = less income inequality

Neighborhood Disparity in Poverty: Lower score = smaller poverty gap across census tracts

Racial Disparity in Poverty: Lower score = smaller gap between ethnic/racial groups

## Social Equity – Overall score 50

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Disability Employment Gap	0.49	0.55	0.59	0.56
Segregation Index Score	0.29	0.39	0.29	0.35

Disability Employment Gap: Higher score indicates smaller gap in labor force participation rates between disabled and total population.

Segregation Index Score: Lower score from zero to 1 indicates a community is more racially/ethnically integrated.

## Education

The education category examines the strength of a community's education system and the education level of its residents through measures of participation, infrastructure and achievement.

### OVERALL EDUCATION SCORE 70

**89.0% High School Graduation Rate** National Median: 89.4%

**44.3% Population with Advanced Degree** National Median: 30.6%

**\$24,247 Per-Pupil Expenditures** National Median: \$13,452

### Educational Achievement

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Children Meeting Standards in Grade 4 R/LA	47.5%	47.1%	52.5%	51.8%
High School Graduation Rate	89.0%	89.4%	89.1%	88.0%
Population With Advanced Degree	44.3%	30.6%	41.1%	52.2%

### Education Infrastructure – Overall score 67

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Head Start Facilities /100k	4.8	9.3	4.8	1.6
Per-Pupil Expenditures	\$24,247	\$13,452	\$14,310	\$21,134
Youth Within 5 Miles of a Public School	95.6%	80.4%	95.4%	99.5%

## Education Participation – Overall score 58

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Continuing Education Tax Credits as Share of Total Tax Filings	7.9%	8.0%	9.2%	9.2%
Idle Youth (Not Working or Enrolled)	2.3%	2.4%	2.0%	1.8%
Preschool Enrollment	55.1%	42.6%	45.8%	58.0%

## OVERALL ECONOMY SCORE 60

**9.8% Unemployment Rate** National Median: 6.5%

**\$63,628 Median Household Income** National Median: \$58,759

**9.7% Poverty Rate** National Median: 13.6%

## Employment – Overall score 53

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Average Weekly Wage	\$1,035	\$831	\$967	\$1,610
Labor Force Participation	61.6%	58.8%	64.7%	67.1%
Unemployment Rate	9.8%	6.5%	6.4%	9.4%

## Income – Overall score 72

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Median Household Income	\$63,628	\$58,759	\$69,773	\$79,999
Medical Debt in Collections	3%	17%	13%	5%
Poverty Rate	9.7%	13.6%	10.0%	9.8%

## Opportunity – Overall score 46

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Business Growth Rate	7.5%	7.7%	8.6%	8.4%
Job Diversity Index Score	0.93	0.74	0.88	0.90
Jobs Within a 45-Minute Commute	5,961	3,890	23,119	115,901

Job diversity: Higher score on scale of zero to 1 indicates a community has more jobs in a variety of industries.

## HOUSING SCORE 50

**31.1% Households Spending at Least 30% of Income on Housing** National Median: 22.8%

**N/A Work Hours Needed to Pay for Affordable Housing** National Median: 40.6

**20.8% Vacant Houses** National Median: 16.3%

## Housing Affordability

### SCORE 43

METRIC	COUNTY	U.S.	PEER GROUP	STATE
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METRIC	COUNTY	U.S.	PEER GROUP	STATE
Eviction Rate	1.8%	1.1%	1.6%	1.5%
Households Spending at Least 30% of Income on Housing	31.1%	22.8%	25.6%	33.7%
Work Hours Needed to Pay for Affordable Housing	N/A	40.6	44.8	52.1

### Housing Capacity

SCORE 67

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Affordable Housing Shortfall	-54.2	-61.4	-64.5	-48.2
Overcrowded Households	0.4%	1.8%	1.8%	2.0%

Affordable housing shortfall: Availability of affordable housing relative to a community's low-income population. Negative numbers indicate a shortfall

### Housing Quality

SCORE 73

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Households With Incomplete Plumbing Facilities	0.2%	0.3%	0.3%	0.3%
Vacant Houses	20.8%	16.3%	8.4%	9.1%

### Food & Nutrition

The food and nutrition category tracks the availability and use of healthy foods in a community, as well as the prevalence of chronic diseases that have been linked to poor nutrition.

#### OVERALL FOOD & NUTRITION SCORE 68

**4.7/100k Local Food Outlets** National Median: 0.0/100k

**8.2% Diabetes Prevalence** National Median: 10.4%

**25.8% Obesity Prevalence** National Median: 36.2%

### Food Availability

SCORE 46

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Food Environment Index Score	15.50	14.33	13.62	10.49
Local Food Outlets /100k	4.7	0.0	1.3	0.4
Population Without Access to Large Grocery Store	30.9%	21.7%	24.6%	27.8%

Food Environment Score: Higher score indicates more healthy food than unhealthy food is available in a community

**Nutrition**  
**SCORE 70**

METRIC	COUNTY	U.S.	PEER GROUP	STATE
At-Home Food Expenditures on Fruit/Veg	67.08	63.74	72.61	77.31
At-Home Food Expenditures on Soda/SSB	37.35	39.13	29.13	25.14
Diabetes Prevalence	8.2%	10.4%	9.3%	8.1%
Obesity Prevalence	25.8%	36.2%	33.2%	26.1%

**Environment**

The environment category assesses the health of a community’s natural surroundings by including measures of air and water quality, access to parks and natural amenities, and environmental risks.

**OVERALL ENVIRONMENT SCORE 75**

**0.03/1k Drinking Water Violation Rate** National Median: 0.03/1k

**71.0% Population Within 0.5 Mile of a Park** National Median: 18.0%

**14.0 days Extreme Heat Days per Year** National Median: 10.3 days

**Air and Water**  
**SCORE 80**

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Airborne Cancer Risk	18.72	25.92	27.16	25.72
Air Quality Hazard	0.21	0.34	0.36	0.33
Drinking Water Violation Rate /1k	0.03	0.03	0.01	0.00
Toxic Release Index Score	0.03	0.04	0.08	0.49

**Natural Environment**  
**SCORE 66**

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Area With Tree Canopy	51.4%	20.6%	19.1%	33.6%
Natural Amenities Index Score	0.81	0.22	0.24	0.16
Population Within 0.5 Mile of a Park	71.0%	18.0%	32.0%	67.0%

**Natural Hazards**  
**SCORE 61**

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Extreme Heat Days per Year <b>days</b>	14.0	10.3	10.7	14.6
FEMA National Risk Index Score	9.3	9.1	9.8	12.1
Homes in Flood Hazard Zone	6.1%	3.8%	3.4%	3.9%

FEMA Risk Index: Higher score on scale of zero to 100 indicates more risk from natural hazards relative to other communities



## Public Safety

The public safety category aims to reward communities with low crime rates, few deaths tied to accidents and motor vehicle crashes, and a robust health and public safety infrastructure.

### OVERALL PUBLIC SAFETY SCORE 51

**420.5/100k Violent Crime Rate** National Median: 204.5/100k

**N/A Per Capita Spending on Health and Emergency Services** National Median: \$358

**0.72% Public Safety Professionals in Population** National Median: 0.73%

### Crime

#### SCORE 52

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Property Crime Rate /100k	2,015.4	1,673.7	1,914.8	1,712.5
Violent Crime Rate /100k	420.5	204.5	214.5	388.7

### Injuries

#### SCORE 62

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Accidental Death Rate /100k	73.0	58.5	49.2	53.0
Vehicle Crash Fatality Rate /100k	11.2	17.5	11.1	15.8

### Public Safety Capacity

#### SCORE 43

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Per Capita Spending on Health and Emergency Services	N/A	\$358	\$447	\$470
Population Living Close to Emergency Facilities	47.1%	36.7%	35.9%	53.5%
Public Safety Professionals in Population	0.72%	0.73%	0.75%	0.80%

## Community Vitality

The community vitality category assesses the stability and social cohesion of a community through measures of population growth, voter participation and more.

### OVERALL COMMUNITY VITALITY SCORE 59

**70.0% Homeownership Rate** National Median: 73.2%

**-1.7% Net Migration Rate** National Median: -0.2%

**70.0% Voter Participation Rate** National Median: 66.0%

### Community Stability

#### SCORE 55

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Homeownership Rate	70.0%	73.2%	71.2%	62.4%
Municipal Funding Imbalance	N/A	421.5	402.9	450.1

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Net Migration Rate	-1.7%	-0.2%	1.7%	-2.2%

### Social Capital

SCORE 54

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Census Self-Response Rate	69.0%	65.8%	68.8%	65.5%
Neighborhood Diversity Index Score	0.55	0.53	0.52	0.51
Nonprofits /100k	714.1	468.6	481.0	532.2
Voter Participation Rate	70.0%	66.0%	71.9%	72.7%

### Infrastructure

The infrastructure category gauges how well residents can make use of their community, and includes measures of walkability, commute time and internet access.

#### OVERALL INFRASTRUCTURE SCORE 76

**96.6% Population With Access to Broadband** National Median: 96.7%

**9.2 Walkability Index Score** National Median: 6.1

**5.3% Workers Commuting 60 Minutes or More** National Median: 6.8%

### Community Layout

SCORE 72

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Population With Access to Broadband	96.6%	96.7%	98.9%	98.6%
Population Within 0.5 Mile of Walkable Destinations	54.9%	34.0%	49.2%	62.6%
Walkability Index Score	9.2	6.1	7.4	11.3

### Transportation

SCORE 63

METRIC	COUNTY	U.S.	PEER GROUP	STATE
Distance to Public Transit	680.7	573.4	563.3	438.6
Households With No Vehicle	9.1%	5.5%	4.9%	12.2%
Workers Commuting 60 Minutes or More	5.3%	6.8%	6.2%	12.9%

### Berkshire Benchmarks

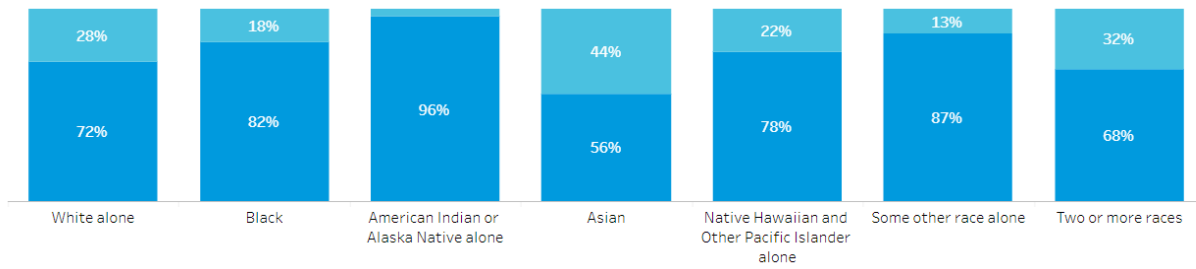
Some indicators are based on race but they aren't grouped by age. Major indicators that stood out were education and poverty limits.

Sources:

[Home - Berkshire Benchmarks](#)

U.S. Census Bureau. (2022). *2017-2021 American Community Survey 5-year Estimate*. Retrieved from <https://data.census.gov/>

**Figure 23. Education Attainment by Race**



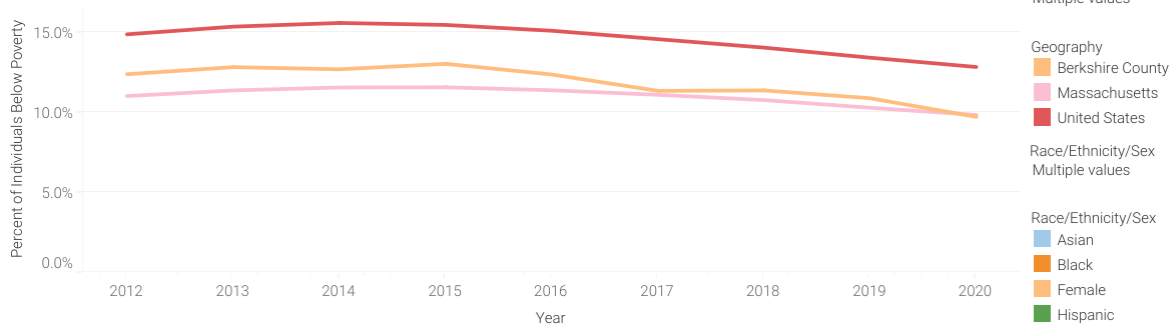
**Figure 24. People in Poverty**

People in Poverty is a key indicator for Berkshire County.

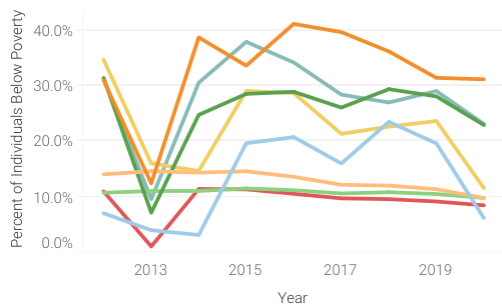
Choose a geography to update the percent of individuals in poverty over time graph. Choose a race/ethnicity to update the race/ethnicity graph. Choose a year to update the map.

The number and percent of individuals in poverty have gone down over the last decade and the county is at the state average. The county is significantly below the percentage of the nation. People of color have a higher percentage in poverty than whites. Poverty is spread throughout the county, with the highest percentages in both urban and rural communities.

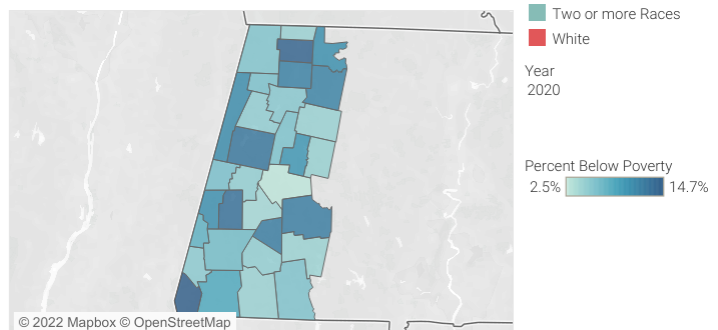
**Percent of Individuals in Poverty over Time**



**Percent of Individuals in Poverty in Berkshire County by Race/Ethnicity/Sex**



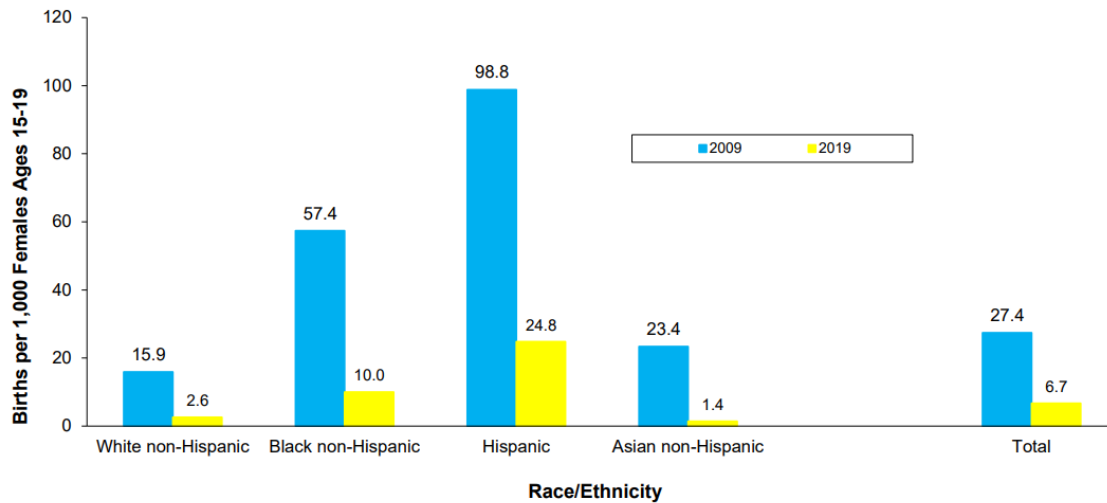
**Percent of Individuals in Poverty 2020**



Source: US Census American Community Survey 5-year average, Table S1701

**Figure 25. Teen Birth Rates among Females Ages 15-19 by Mother’s Race/Hispanic Ethnicity, Massachusetts: 2009 and 2019**

Source: [Massachusetts Births 2010 | mass.gov](https://www.mass.gov/info-details/massachusetts-births-2010)



NOTE: Teen birth rate is number of births to females ages 15-19 per 1,000 females ages 15-19. 2009 birth rates are based upon the 2009 population estimates from the National Center for Health Statistics. 2018 birth rates are based upon UMass Donahue Institute population estimates for 2019

**Figure 26. Massachusetts Virtual Epidemiological Network Confirmed Disease Reports in Alliance Communities, 2021**

(Note, there is no public access to this data)

*There were not enough data to determine if there were more diseases reported for non-White residents.*

	ASIAN	BLACK_AFRICAN_AMERICAN	OTHER	UNKNOWN	WHITE	Grand Total
	4	22	25	8	156	215
	6	23	36	15	112	192
Grand Total	10	45	61	23	268	407

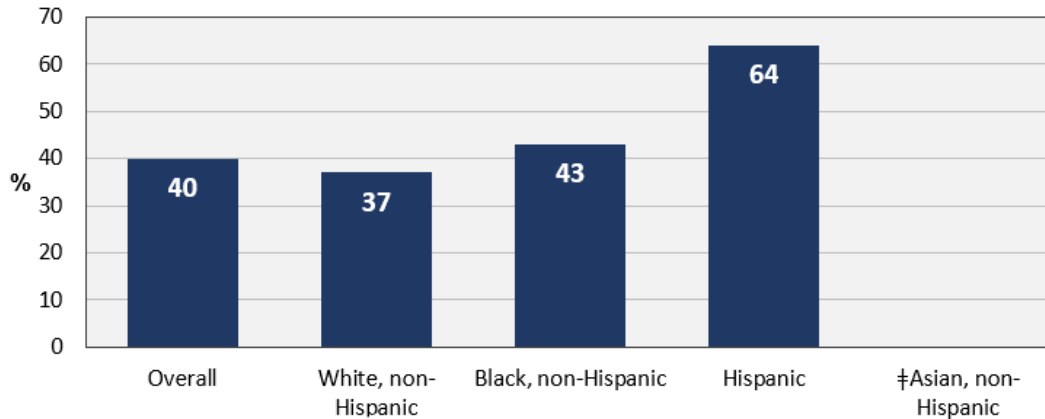
**Health Needs Assessment of Black Non-Hispanic, White Non-Hispanic, and Hispanic Persons with Disabilities in Massachusetts**

Source: Massachusetts Behavior Risk Factor Surveillance System (MA BRFSS) 2012-2013

**Figure 27. MA Adults with Disabilities with Fair or Poor Self-Reported Health Status by Race/Ethnicity, 2012-2013**

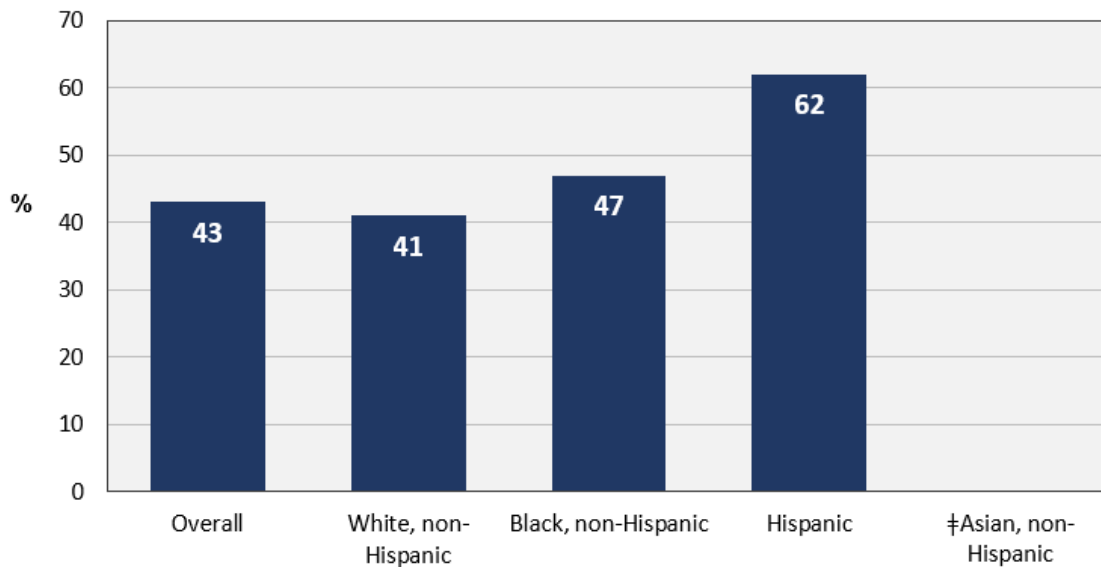
“Two different indicators were used to measure the general health of an individual. All respondents in the MA BRFSS were asked to report:

1. General health status as either excellent, very good, good, fair, or poor. Presented here are the percentages of adults with disabilities by race/ethnicity who reported fair or poor overall health.
2. Number of days during the past month that physical health, which includes physical illness and injury, had not been good. Presented here are the percentages of adults with disabilities by race/ethnicity who reported 15 or more days of poor physical health.”



‡ Suppressed due to insufficient data (n < 11)

**Figure 28. MA Adults with Disabilities Who Have Ever Been Diagnosed with Depression by Race/Ethnicity, 2012-2013**



‡ Suppressed due to insufficient data (n < 11)

**Data and Research Summary for Pittsfield**

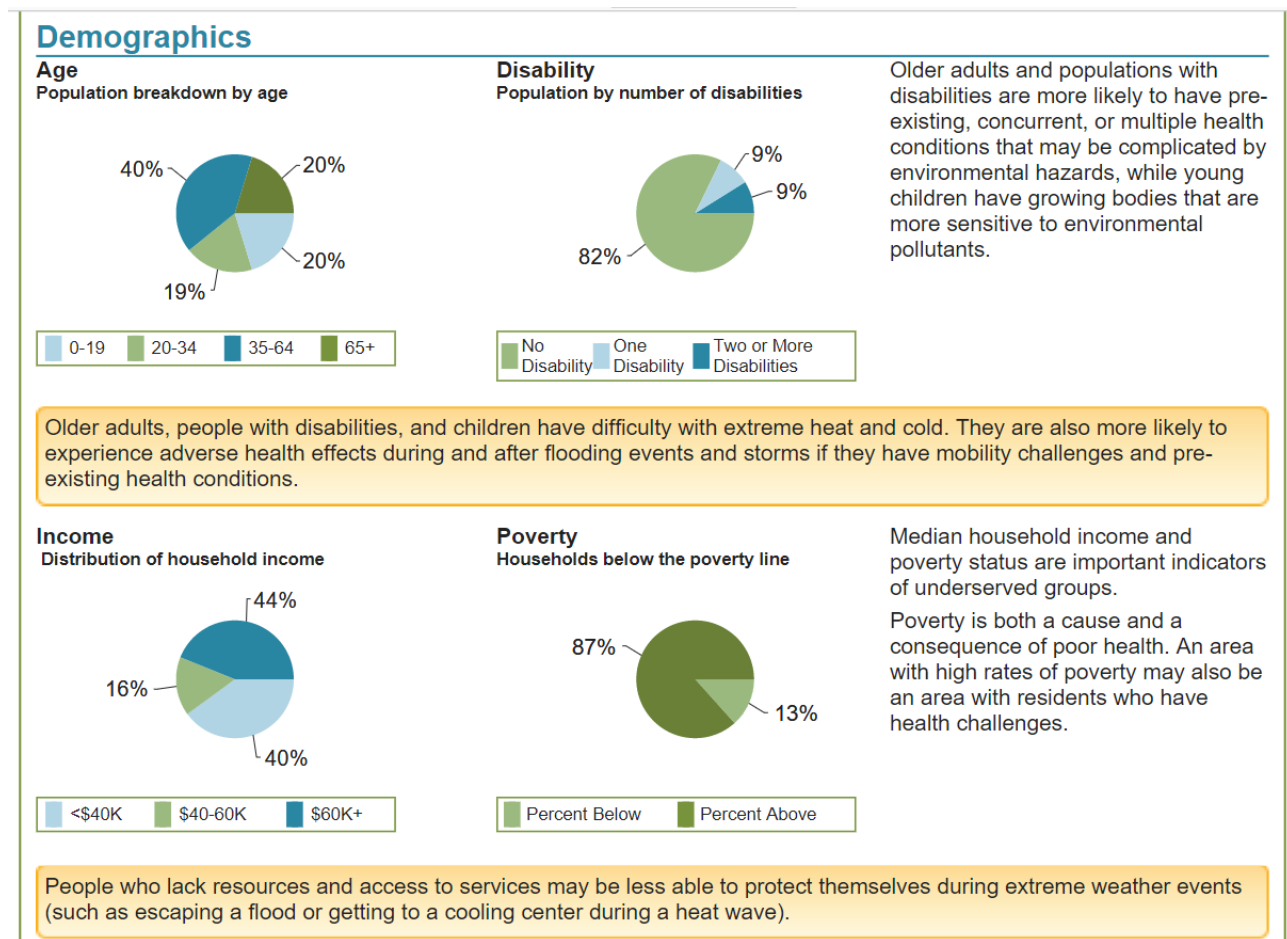
The small City of Pittsfield is the largest city and central hub of rural Berkshire County with approximately 43,000 full-time residents and an unknown but substantial number of part-year residents.

It is the home of many support services including the main campus of Berkshire Health Systems, the only hospital system located in Berkshire County.

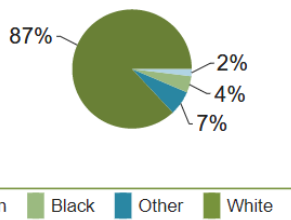
Pittsfield is the largest city in rural Berkshire County, Western Massachusetts. According to the Census, Pittsfield’s 2020 median household income was about \$51,000 versus the Massachusetts average of \$84,000. Pittsfield is about 82% White alone versus about 91.5% for all of Berkshire County. Its Black population is 4.6% vs. 3.8% for all of Berkshire County and Hispanic population is 7.2% vs. 5.2% for Berkshire County. 8.7% speak a language other than English at home vs county rate of 7.5%. 3.7% of Pittsfield residents are without health insurance vs. 3.2% for the county ([U.S. Census Bureau QuickFacts: Massachusetts; Berkshire County, Massachusetts; Pittsfield city, Massachusetts](#)).

Massachusetts has designated Pittsfield as an Environmental Justice (EJ) community with 30 EJ neighborhoods and 56.1% of its population qualifying ([Massachusetts 2020 Environmental Justice Populations \(arcgis.com\)](#)); Environmental Justice Populations [https://mass.gov/dph/ej-tool community-profile \(mass.gov\)](https://mass.gov/dph/ej-tool-community-profile).

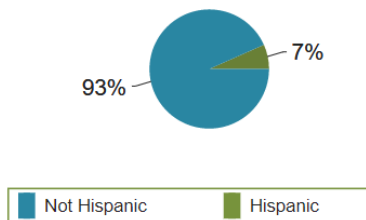
**Figure 29. MA Environmental Health – Demographics**



**Race**

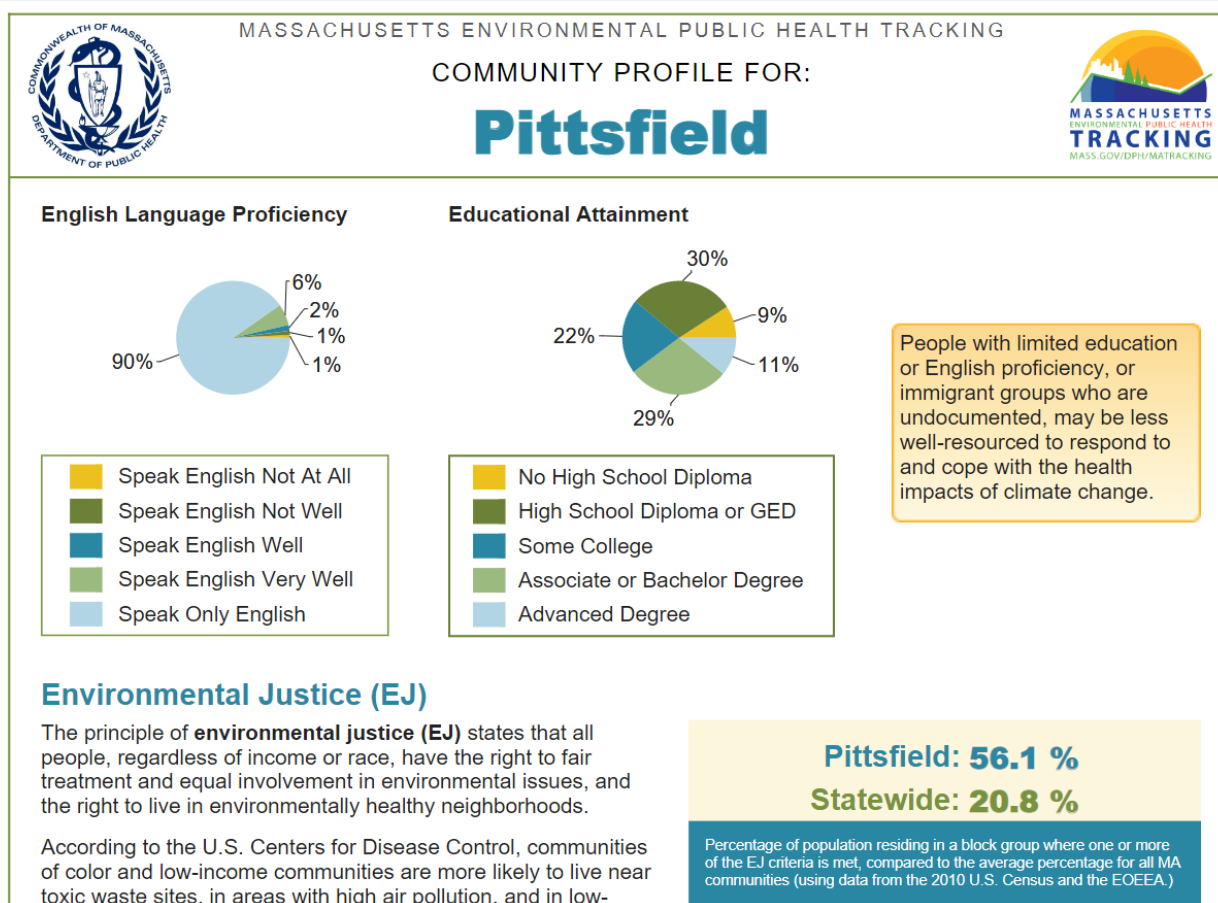


**Ethnicity**



Various forms of discrimination and racism have created long-standing health inequities for people of color. The Environmental Justice section describes how people of color face the challenges of unjust distribution of resources and power that impact health outcomes.

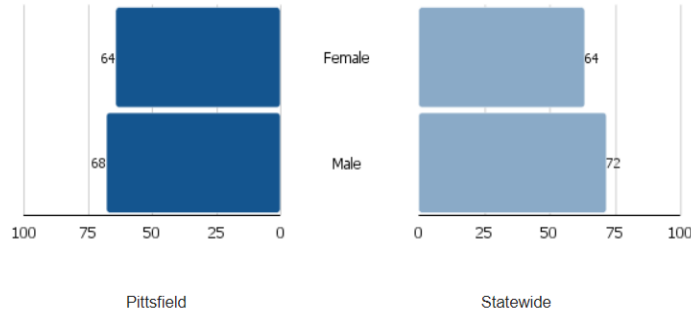
**Figure 30. MA Environmental Public Health Tracking – Community Profile Pittsfield: Barriers to Responding to Health Impacts of Climate Change**



**Figure 31. Employment Status**

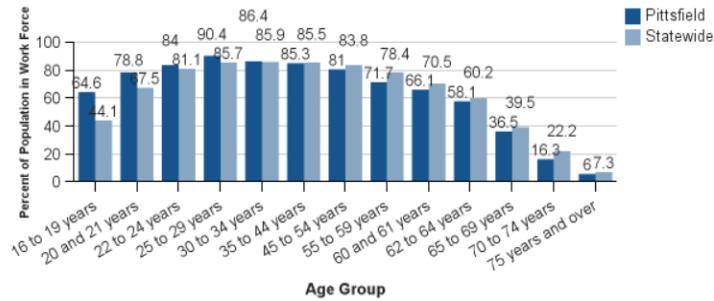
**Labor Force Participation Rate by Sex**

Source: U.S. Census American Community Survey (ACS), 5-year estimates.



**Labor Force Participation Rate by Age**

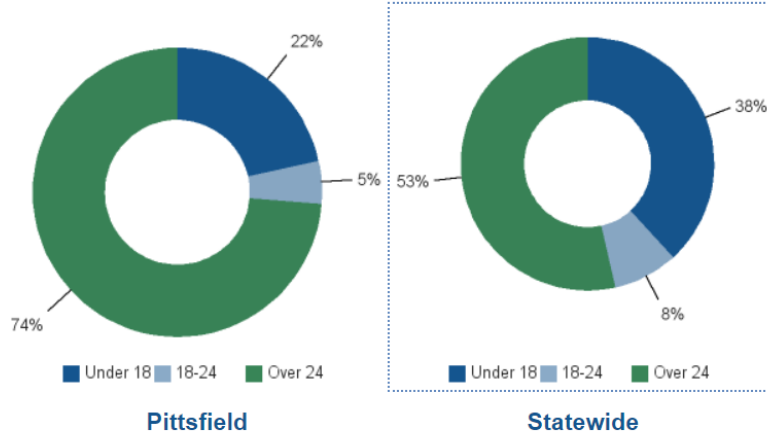
Source: U.S. Census American Community Survey (ACS), 5-year estimates.



**Figures 32. Individuals Experiencing Homelessness, by Age**

**Proportion of the Population that is Homeless by Age CoC**

Source: Dept of Housing and Urban Development (HUD) Continuum of Care Program (2018)

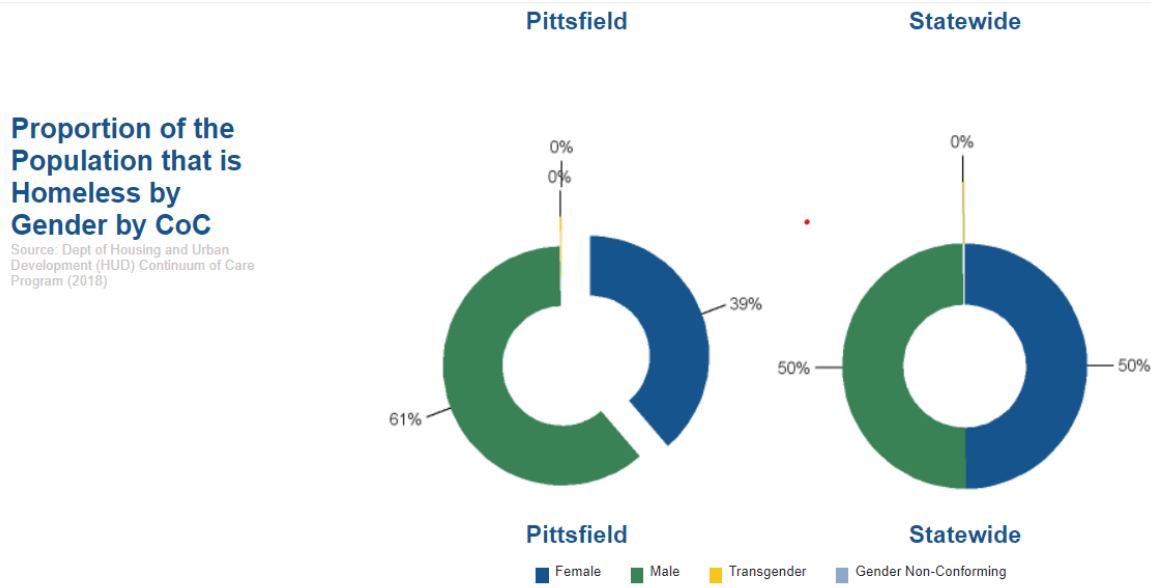


**INEQUITY ALERT!**

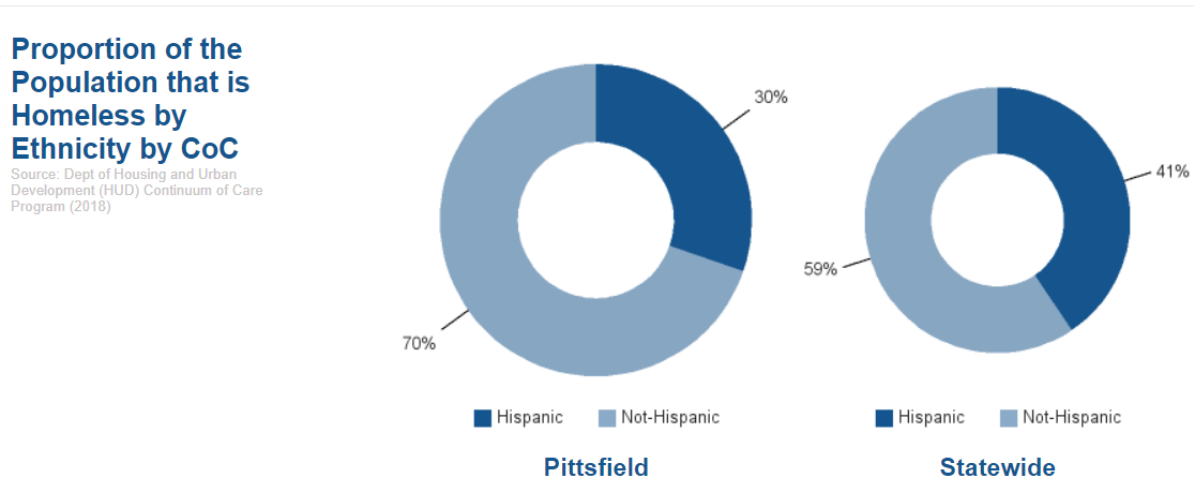
Communities of color, single-parent families, youth, individuals with disabilities, formerly incarcerated individuals, and the LGBTQ community experience homelessness at a much higher rate than other populations.[133,134,135] Experiencing homelessness, however, is possible for any person, across demographics and geography. Housing unaffordability and instability lead to eviction or foreclosure and, at times, homelessness, which can perpetuate a cycle of poverty, poor housing, and health issues.



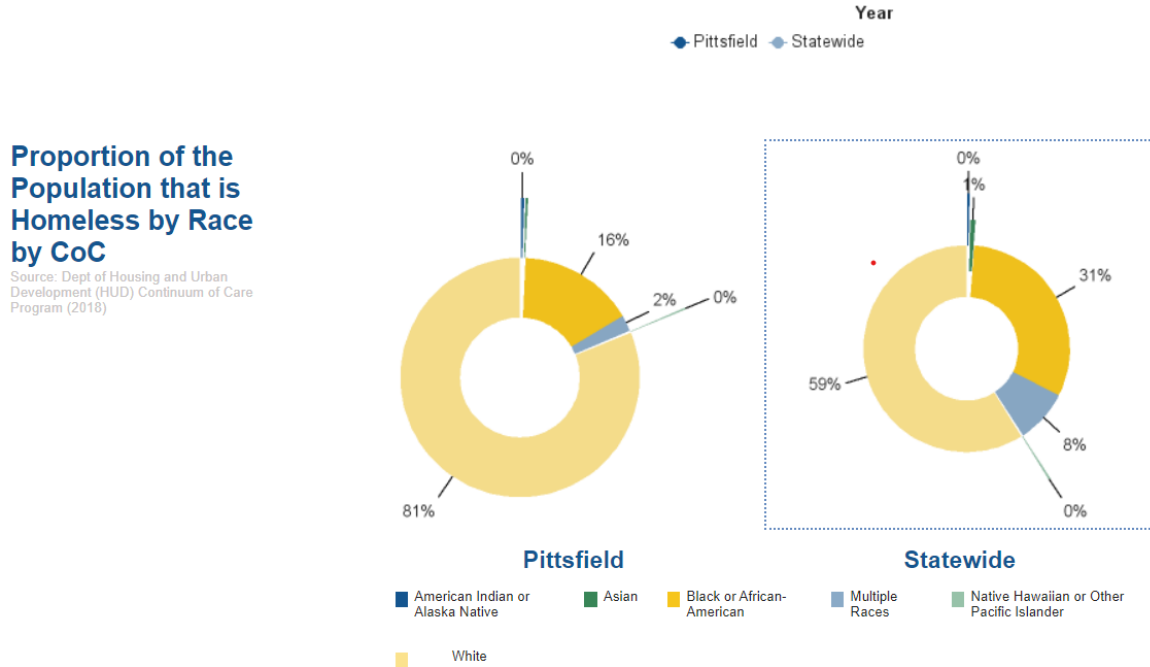
**Figure 33. Individuals Experiencing Homelessness, by Gender**



**Figure 34. Individuals Experiencing Homelessness, by Ethnicity**



**Figure 35. Individuals Experiencing Homelessness, by Race**

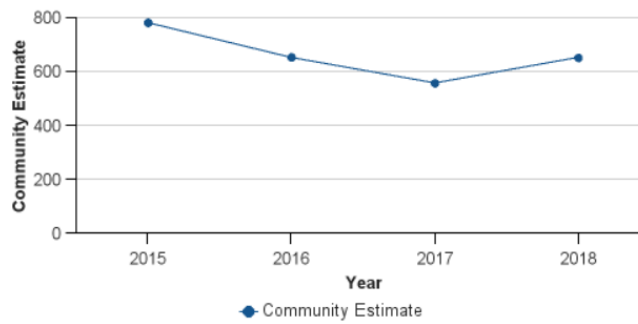


**Figure 36. People Experiencing Homelessness by Continuum of Care & Shelter Status by Continuum of Care**

Data on homelessness in Massachusetts are collected and reported by Continuums of Care (CoC). **Pittsfield** is in the [MA-507 - Pittsfield/Northampton/Berkshire/Franklin/Hampshire Counties](#) CoC. To learn more about CoC's, [click here](#).

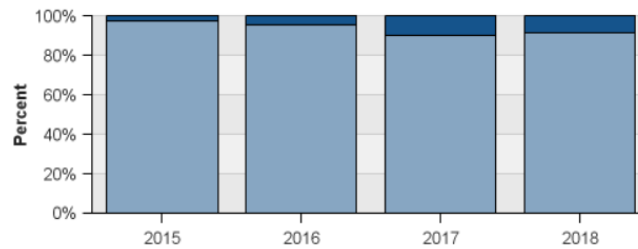
### Number of people experiencing Homelessness by CoC

Source: Dept of Housing and Urban Development (HUD) Continuum of Care Program (2018)



### Homelessness by Shelter Status by CoC

Source: Dept of Housing and Urban Development (HUD) Continuum of Care Program (2018)



## Figure 37. Health-Related Housing Issues: Facilities & Smoking

There is less data available to measure potential physical hazards in your community. It is possible, however, to measure whether housing is meeting peoples' basic needs in your community. The percent of housing units with complete plumbing and kitchen facilities can indicate whether housing quality is addressing the bare minimum for individuals and families.

### Percent of Housing Units with Incomplete Facilities

Source: U.S. Census American Community Survey (ACS), 5-year estimates, 2016

**0.2%**

Pittsfield

**0.3%**

Statewide

Behavioral hazards are also challenging to measure in your community. One important measure of behavioral hazards, though, is the percent of smokers in your community.

### Prevalence of Smoking

Source: Massachusetts Department of Public Health Behavioral Risk Factor Surveillance System (BRFSS), 2013

**23.6%**

Pittsfield

**15.2%**

Statewide

The number of units in a building is also related to smoking-related health hazards. Tenants in multi-unit housing without smoke-free housing policies in place may be exposed to secondhand smoke from other people's units. Federally, subsidized housing is now required to be smoke free.

## Figure 38. Health-Related Housing Issues: Older Housing & Lead

Additionally, homes built before 1978 have a higher likelihood of containing lead paint.

### Housing Built Prior to 1980

Source: U.S. Census American Community Survey (ACS), 5-year estimates, 2016

**85%**

Pittsfield

**73%**

Statewide

### Estimated Confirmed Blood Lead Levels $\geq 5$ $\mu\text{g}/\text{dL}$ , 5 Year Annual Average

Source: Massachusetts Department of Public Health - Bureau of Environmental Health, children 9-47 months of age, 2016 - 2020

**26.7**  
prevalence per 1,000

Pittsfield

**15.0**  
prevalence per 1,000

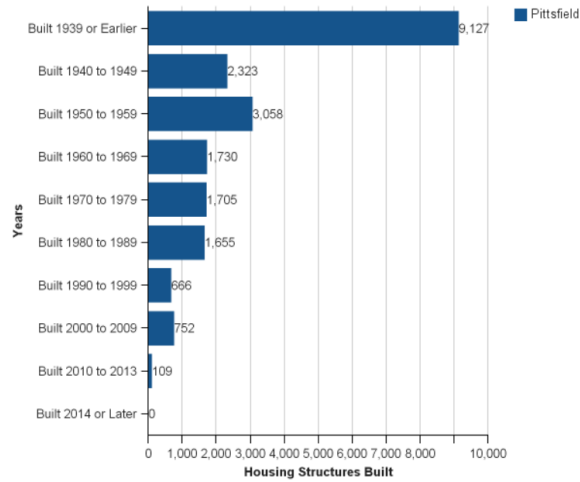
Statewide

There is less data available to measure potential physical hazards in your community. It is possible, however, to measure whether housing is meeting peoples' basic needs in your community. The percent of housing units with complete plumbing and kitchen facilities can indicate whether housing quality is addressing the bare minimum for individuals and families.

**Figure 39. Housing Structures Built by Year**

**Number of Housing Structures Built by Year**

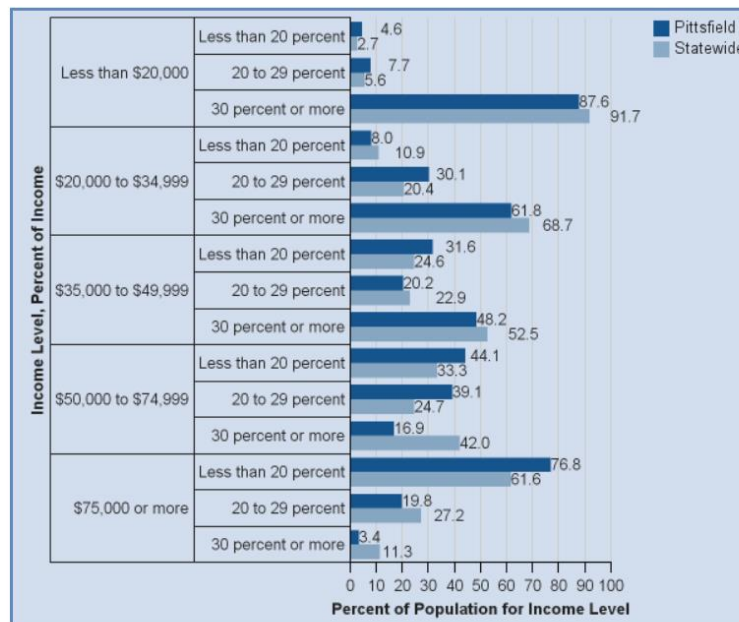
Source: U.S. Census American Community Survey (ACS), 5-year estimates, 2016



**Figure 40. Housing Costs & Income**

**Monthly Housing Costs as Percent of Household Income by Income Group**

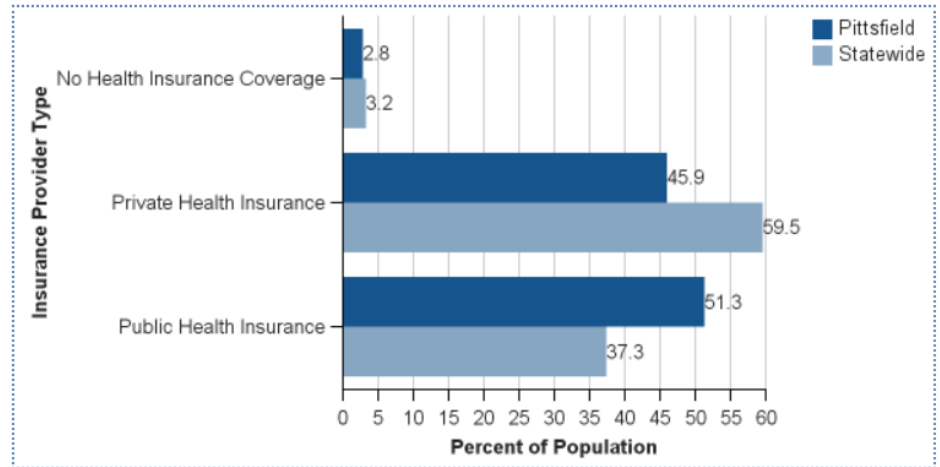
Source: U.S. Census American Community Survey (ACS), 5-year estimates, 2016



**Figure 41. Societal Factors: Insurance Coverage**

### Insurance Coverage by Provider Type

Source: U.S. Census American Community Survey (ACS), 5-year estimates, 2012-2016



### Pittsfield Demographic Data

The Massachusetts Population Health Information Tool provides health risk factors by individual community. Pittsfield data show that men are more likely to work than women but at a lower rate than the State average, housing is older, children are more likely to have elevated lead levels, income is lower than the state averages, families are more likely to live in an environmental justice neighborhood, and residents are more likely to smoke and less likely to have private health insurance. Rates of people experiencing homelessness and unstable housing are a growing concern throughout the county as rents rise and second homeowners and short-term rental businesses bid up the price of housing. Lack of safe, affordable housing is a major risk factor for everyone, but especially for young women and women of color ([Population Health Information Tool | Mass.gov](#)).

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### Pittsfield Health Status

When compared to State levels, children in Pittsfield are more likely to have elevated levels of lead, women are more likely to have a heart attack, asthma is more likely at almost all ages, residents are more likely to go to the emergency room for carbon monoxide poisoning, and most age groups are more likely to have some disability. While teen births are way down everywhere in the State, Hispanic persons are more likely than White persons to have a teen birth, followed by Black persons and then Asian persons. Hispanic and Black individuals with disabilities are more likely to report being depressed than White or Asian persons ([community-profile \(mass.gov\)](#); <http://www.mass.gov/eohhs/gov/departments/dph/programs/admin/dmoa/health-survey/brfss/statewide-reports-and-presentations.html>).

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### Crime in Pittsfield: Disparities

In Pittsfield, females under 18 are twice as likely to be a victim of crime as males. In Berkshire County and the rest of the State about half the recorded crimes occur in homes at almost all hours of the day. Many of these incidents may involve domestic violence along with property crime of some kind, though

the data do not appear to be very well reported in most jurisdictions. The Department of Justice (DOJ) estimates that only 40% of violent crimes are reported. Individuals who have a disability or who identify as gay, or lesbian are more likely to be victims of violent crimes. Eviction rates in Pittsfield are higher than the state norm.

Overall, most crime rates have been dropping for both Black and White persons and most people feel they live in a safe neighborhood even though they report having seen local violence. Sexual assaults are most often by acquaintances. The weapons most often used for sexual assaults in Pittsfield are personal force. For other types of assaults, knives and other objects are most common. Juvenile arrests are less than 3% of all arrests in Pittsfield ([Investigating Domestic Violence: Raising Prosecution and Conviction Rates — LEB \(fbi.gov\)](#); [ncadv massachusetts fact sheet 2020.pdf \(speakcdn.com\)](#); [Violent Victimization by Sexual Orientation and Gender Identity, 2017–2020 | Bureau of Justice Statistics \(ojp.gov\)](#)).

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### **Pittsfield Poverty**

Per the 2013 census, 25% of Morningside residents are estimated to live in poverty compared to the 10% overall rate of Pittsfield. Morningside also has a lower owner occupancy rate and median home value.

There are higher poverty rates and income gaps in families of color. During the COVID pandemic, cost and access to daycare were likely significant issues. Poverty levels are much lower for non-white families causing additional disparities in the county ([Berkshire-County-Health-Needs-Assessment-2018-Final.pdf \(berkshirebenchmarks.org\)](#)).

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### **Pittsfield Housing**

In a 2005 survey titled the Pittsfield Slum and Blight Report, the City of Pittsfield and Berkshire Regional Planning Commission found that 84.3% of residences surveyed in downtown Pittsfield where the Morningside and Westside neighborhood were poor to fair. This percentage exceeds the standard of 25% set by the Massachusetts Department of Housing and Community Development. As defined by Massachusetts General Laws Chapter 121, Sections A and B, this would qualify the area as blighted. Among the 152 buildings required to comply with the Americans with Disabilities Act, more than half provide only poor-to-fair access.

The Westside neighborhood is comprised of 180.4 acres of land. Out of those 180.4 acres, approximately 64% is residential use. Within the residential housing stock, 29% is high density residential and 35% is multi-family residential. Only 10% of the acreage in the neighborhood is zoned for commercial use. In addition, there are about 50 vacant lots and vacant buildings in the neighborhood. The Neighborhood Revitalization Team at Central Berkshire Habitat for Humanity conducted a community survey in Westside in 2016 which found 65% of residents were satisfied with the neighborhood and named the housing, neighbors, and amenities as its strengths, but cited lack of businesses as a major drawback of the area. Additionally, there were concerns about drug activity, trash and litter in the streets, lack of youth enrichment opportunities, and poorly maintained public spaces.

According to the Morningside Neighborhood Action Plan, this area of the city includes twice as many renters as the city as a whole and has more than twice the poverty rate. Single parents head 2/3 of the families with children here. Morningside contains a significant concentration of the City's vacant and abandoned buildings, vacant lots, and buildings at risk of abandonment.

The Tyler Street Transformative Development Initiative report found that out of the 417 buildings in the studied area, 70.7% were rated as “good” in condition with only 1.2% rated as “poor” in condition. The

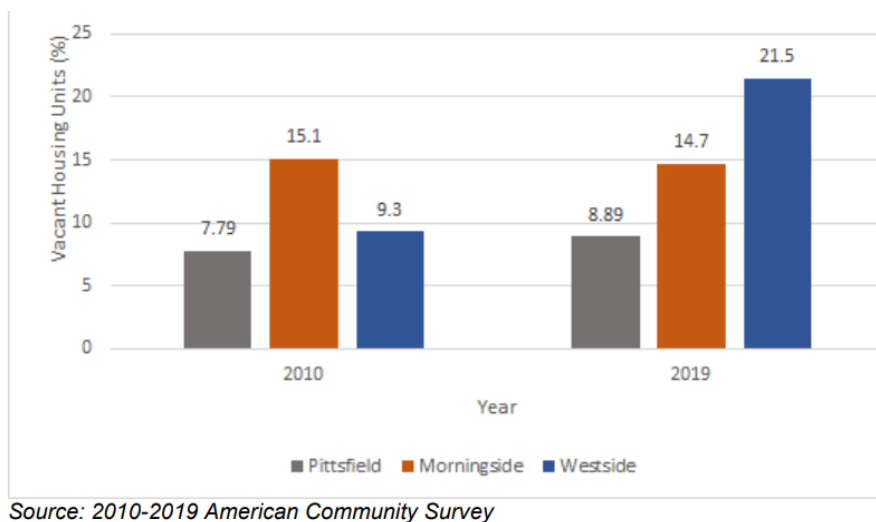
report concludes that since only 13.2% of the buildings surveyed were rated as either “fair” or “poor,” the Tyler Street District is not blighted and serves as a fruitful location for redevelopment.

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### Pittsfield Housing Vacancy Rate

The Morningside neighborhood has higher than ideal vacancy rates at 15%, but under the threshold of 25%. The vacancy rate in Westside, however, has skyrocketed 9.3% in 2010 to a rate of 21.5% in 2019, pushing it all the way into the category of hyper-vacancy. High vacancy rates reduce home values and provide a home for crime. Blocks with vacant properties are twice as likely to experience crime as those without.

**Figure 42. Percentage of Vacant Housing Units Over Time**



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### Pittsfield Disparities by Race

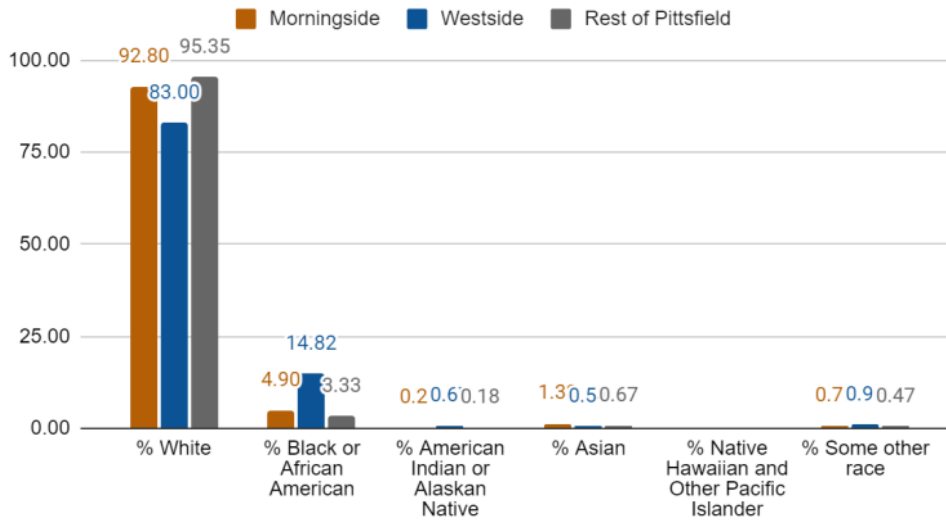
The City of Pittsfield is the most racially and economically diverse community in the Berkshires. The Morningside and Westside neighborhoods in Pittsfield are significantly more racially diverse than the rest of the city. People of color make up 31% of the population in the Morningside/Westside neighborhoods, and about 11% of the population in the rest of the city. The Morningside and Westside neighborhoods experience significantly more poverty as compared to the rest of the city. Furthermore, those living in the Morningside/Westside neighborhoods live, on average, ten to twelve fewer years than those living in the more income-secure Southeast neighborhood. In addition, there are significantly fewer and smaller green spaces, and safe opportunities for recreating outside in these neighborhoods.

Westside is the most diverse neighborhood in Pittsfield, with the highest percentage of Black or African American citizens, as well as almost every other minority category. In 2019, the only exception was the percentage of Asian Americans, which is marginally higher (.06%) in the rest of Pittsfield. While both Morningside and Westside are still predominantly White, these two neighborhoods have significantly higher racial diversity than the other Pittsfield neighborhoods.

“African American and Hispanic Origin families are disproportionately represented among those with low to very low incomes in Pittsfield. They make up 9.6% of the households in the city with less than or equal to 30% of AMI and one or more severe housing problems which is only slightly more than the percentage

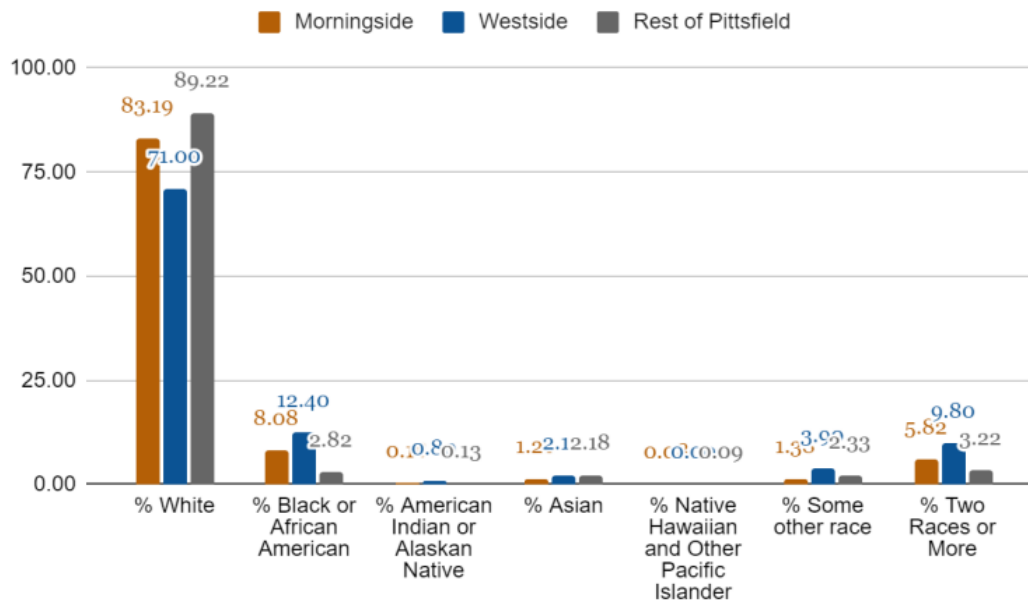
of their entire population. While only 25% of all people in Pittsfield live in the central city neighborhoods, 53% of African American and 37% Hispanic origin households live in those neighborhoods where the AMI is \$23,504 - 54% of the AMI of the City as a whole.” (Pittsfield 5-year Consolidated Plan and Annual Action Plan (FY 2021 – 2025)).

**Figure 43. Racial Makeup of the Morningside and Westside Neighborhoods in Pittsfield, 1990**



Source: 1990 U.S. Census Bureau

**Figure 44. Racial Makeup of the Morningside and Westside Neighborhoods in Pittsfield, 2019**



Source: 2019 American Community Survey



## Further Data:

The Pittsfield 5-year Consolidated Plan and Annual Action Plan (FY 2021 – 2025) has additional information and tables about race, income, and housing data in Pittsfield and breaks it down by census tract.

Sources for previous few sections:

Berkshire Regional Planning Commission and the City of Pittsfield. Pittsfield Slum and Blight Report. Pittsfield, Massachusetts, 2005.

City of Pittsfield. Housing Needs Analysis & Development Recommendations: Westside and Morningside Neighborhoods. Pittsfield, Massachusetts, 2009.

“Life Expectancy at Birth for U.S. States and Census Tracts, 2010-2015 (Interactive Map).” Centers for Disease Control and Prevention. Centers for Disease Control and Prevention, March 9, 2020. <https://www.cdc.gov/nchs/data-visualization/life-expectancy/index.html>.

MassDevelopment. The Tyler Street Transformation Development Initiative. Pittsfield, Massachusetts, 2017. [https://www.massdevelopment.com/assets/what-weoffer/TDI/TDI\\_Districts/Pittsfield/Tyler\\_Street\\_TDI\\_Planning\\_Study.pdf](https://www.massdevelopment.com/assets/what-weoffer/TDI/TDI_Districts/Pittsfield/Tyler_Street_TDI_Planning_Study.pdf) 56 Morningside Initiative

Steering Committee and the Pittsfield Department of Community Development. Morningside Neighborhood Action Plan. Pittsfield, Massachusetts, 2017. [https://www.cityofpittsfield.org/city\\_hall/community\\_development/community\\_development\\_and\\_housing/docs/Morningside%20Action%20Plan%20-%202017.pdf](https://www.cityofpittsfield.org/city_hall/community_development/community_development_and_housing/docs/Morningside%20Action%20Plan%20-%202017.pdf)

Neighborhood Revitalization Team. Westside Neighborhood Success Measures Database System Survey. Central Berkshire Habitat for Humanity. 2016

Neighborhood Revitalization Team. Westside Neighborhood Survey. Central Berkshire Habitat for Humanity. 2019

Westside Neighborhood Initiative Steering Committee and Pittsfield Department of Community Development. Westside Action Plan. Pittsfield, Massachusetts. 2015.

Pittsfield Draft Open Space Plan (2017 – 2024)

Spelman, William. “Abandoned Buildings: Magnets for Crime?” Journal of Criminal Justice 21, no. 5 (1993): 481-95.

(Pittsfield 5-year Consolidated Plan and Annual Action Plan (FY 2021 – 2025): [https://cms2files.revize.com/pittsfieldma/city\\_hall/community\\_development/community\\_development\\_and\\_housing/docs/New%20node/CDBG%20Five%20Year%20Plan%202021-2025.pdf](https://cms2files.revize.com/pittsfieldma/city_hall/community_development/community_development_and_housing/docs/New%20node/CDBG%20Five%20Year%20Plan%202021-2025.pdf))

## Pittsfield Health Status

When compared to State levels, children in Pittsfield are more likely to have elevated levels of lead, women are more likely to have a heart attack, asthma is more likely at almost all ages, residents are more likely to go to the emergency room for carbon monoxide poisoning, and most age groups are more likely to have some disability. Teen births are down significantly everywhere in the State. However, Hispanics remain more likely to have a teen birth, followed by Black persons and then Asian persons. Hispanics and Black people with disabilities are more likely to report being depressed than White or Asian persons ([community-profile \(mass.gov\)](#)).

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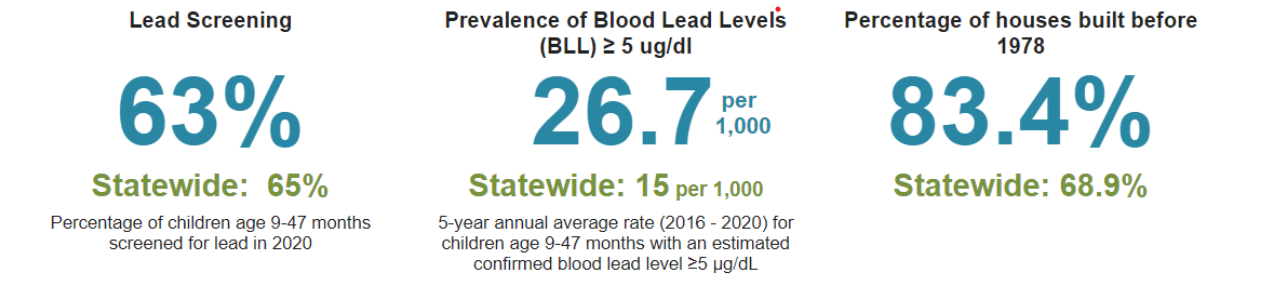
## Figure 45. Environment & Chronic Disease: Lead Poisoning

The environment can contribute to the development of **chronic disease**. Chronic illnesses are some of the most common, expensive, and avoidable health problems.

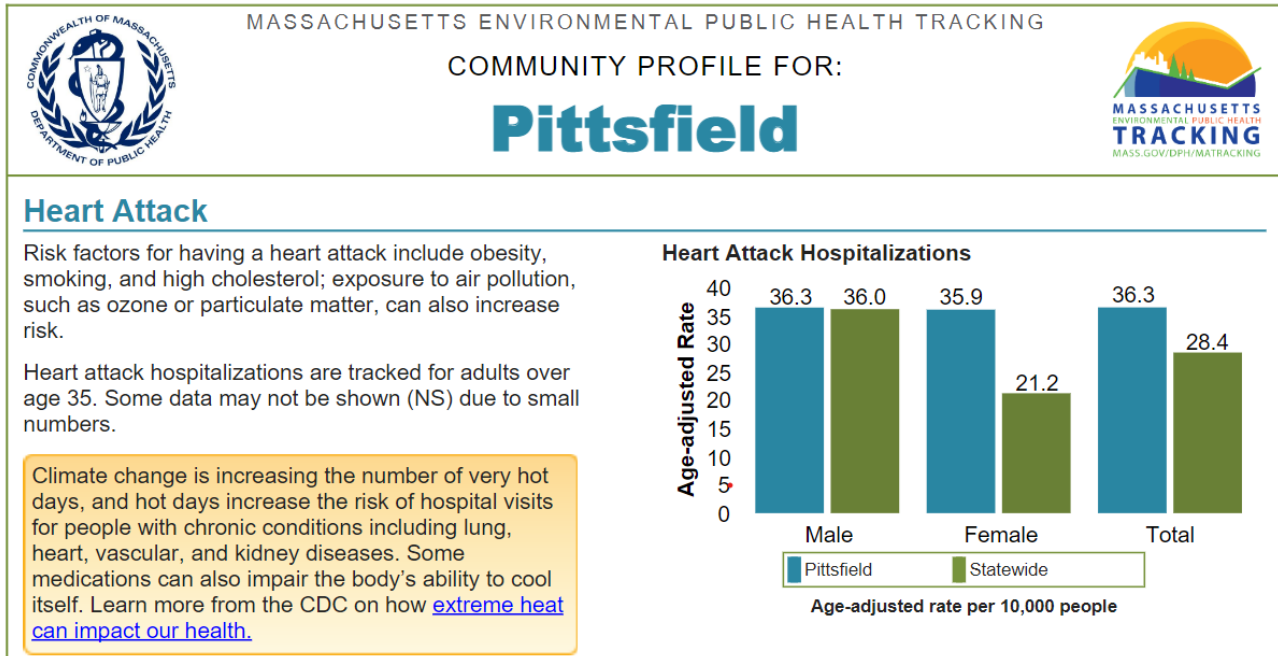
Using an Environmental Justice frame is critical in reviewing the health outcomes below as we know racial inequities exist across these outcomes.

### Childhood Lead Poisoning

Lead paint and dust in older homes are the most common source of lead poisoning in Massachusetts. Chipping and peeling paint, lead paint on friction surfaces like windows and doors, and paint disturbed during home remodeling can create lead dust on floors and belongings. Children swallow lead dust when they put their hands or toys in their mouths. Toddlers who are crawling or teething are most at risk for lead exposure. There is no safe level of lead exposure. Lead exposure can damage the brain, kidneys, and nervous system; slow growth and development; and create behavioral problems and learning disabilities in children. The use of lead in household paint was banned in 1978. Over 1.8 million housing units in Massachusetts built before 1978 are not considered lead safe. Children continue to be exposed to high levels of lead in their homes.



## Figure 46. MA Environmental Public Health Tracking – Community Profile Pittsfield: Climate Change & Chronic Conditions



**Figure 47. MA Environmental Public Health Tracking –Pittsfield: Climate Change & Asthma**

**Asthma**

Asthma attacks can be triggered by environmental exposures like air pollution and secondhand smoke. Asthma is more common in children than adults and is becoming more common across the state.

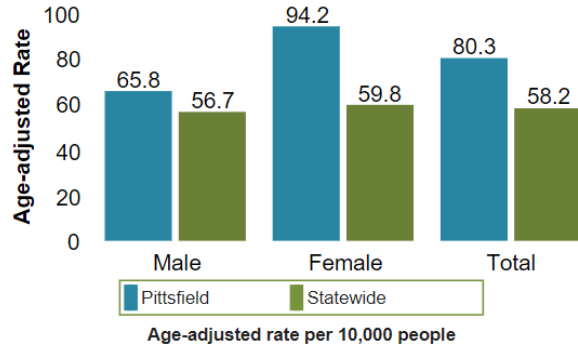
Asthma emergency department visits are tracked for people of all ages.

Asthma prevalence in Massachusetts is also tracked among children from kindergarten (K) through the 8th grade.

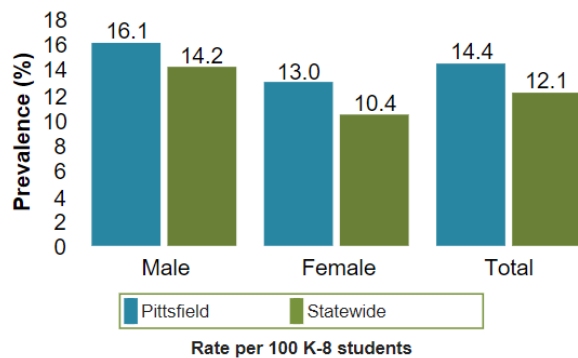
The MDPH Indoor Air Quality (IAQ) Program evaluates indoor environmental quality in public schools and buildings by request. For more information or to find out if an assessment has been conducted at a building in your community, visit [www.mass.gov/dph/iaq](http://www.mass.gov/dph/iaq).

Increasing numbers of very hot days due to climate change may increase ozone and pollen levels that can trigger asthma. Learn more from the [CDC](http://www.cdc.gov) on how climate changes decrease the quality of the air we breathe.

**Asthma Emergency Department Visits**



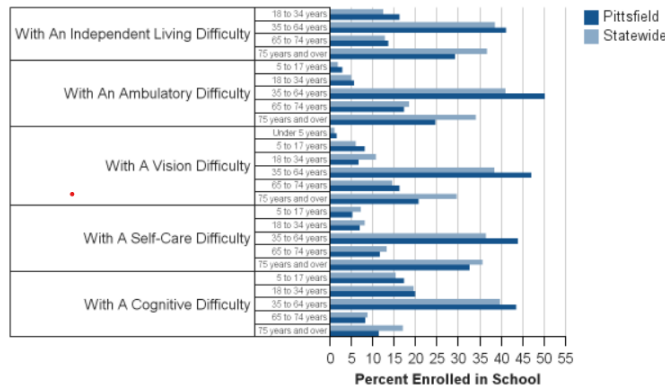
**Pediatric Asthma Prevalence in K-8 Students**



**Figure 48. Disability Type by Age Group, Pittsfield vs. Statewide**

**Disability Type by Age Group**

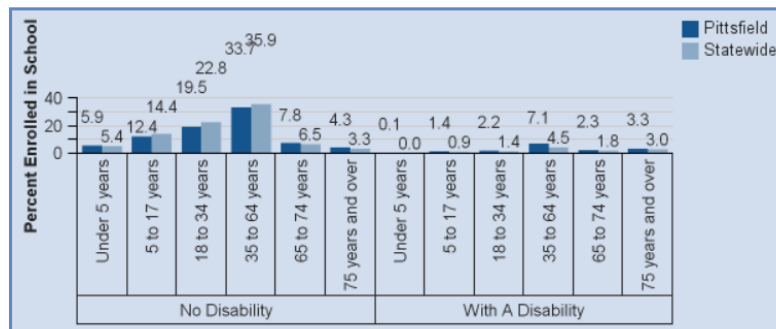
Source: U.S. Census American Community Survey (ACS), 5-year estimates, 2016



**Figure 49. Disability Status by Age, Pittsfield vs. Statewide**

**Disability Status by Age**

Source: U.S. Census American Community Survey (ACS), 5-year estimates, 2016



## Crime

### Intimate Partner Violence

By far, the single most important optional action a first-responding police officer can take to increase rates of prosecution and criminal conviction for domestic violence crime is to include other viable charges in the written report. When a police officer's report indicates that more than one crime occurred, the prosecution likelihood improves by between 260 and 300 percent, while the conviction likelihood grows by 140 to 150 percent.

Source: [Investigating Domestic Violence: Raising Prosecution and Conviction Rates - LEB \(fbi.gov\)](#)

Intimate partner violence accounts for 15% of all violent crime. 1 in 15 children are exposed to intimate partner violence each year, and 90% of these children are eyewitnesses to this violence.

Source: [Statistics \(ncadv.org\)](#)

33.9% of Massachusetts women and 31.7% of Massachusetts men experience intimate partner physical violence, intimate partner sexual violence and/or intimate partner stalking in their lifetimes. As of December 31, 2019, Massachusetts had submitted 2,442 domestic violence misdemeanor records and no active protective orders to the NICS Index.

Source: [ncadv.massachusetts.fact.sheet.2020.pdf \(speakcdn.com\)](#)

### Violent Victimization by Sexual Orientation and Gender Identity, 2017-2020

During 2017 to 2020—

- The rate of violent victimization of lesbian or gay persons (43.5 victimizations per 1,000 persons age 16 or older) was more than two times the rate for straight persons (19.0 per 1,000).
- The rate of violent victimization against transgender persons (51.5 victimizations per 1,000 persons age 16 or older) was 2.5 times the rate among cisgender persons (20.5 per 1,000).
- About 58% of violent victimizations of lesbian or gay persons were reported to police.
- Intimate partner violence was eight times as high among bisexual persons (32.3 victimizations per 1,000 persons age 16 or older) and more than twice as high among lesbian or gay persons (10.3 per 1,000) as it was among straight persons (4.2 per 1,000).

Source: [Violent Victimization by Sexual Orientation and Gender Identity, 2017–2020 | Bureau of Justice Statistics \(ojp.gov\)](#)

### Crime Against Persons with Disabilities, 2009–2019

During 2009 to 2019—

- Persons with disabilities were victims of 26% of all nonfatal violent crime, while accounting for about 12% of the population.
- The rate of violent victimization against persons with disabilities (46.2 per 1,000 age 12 or older) was almost four times the rate for persons without disabilities (12.3 per 1,000).
- One in three robbery victims (33%) had at least one disability.
- Persons with cognitive disabilities had the highest rate of violent victimization (83.3 per 1,000) among the disability types measured.
- Nineteen percent of rapes or sexual assaults against persons with disabilities were reported to police, compared to 36% of those against persons without disabilities.

Source: [Crime Against Persons with Disabilities, 2009–2019 – Statistical Tables | Bureau of Justice Statistics \(ojp.gov\)](#)

## **Report on Indicators of School Crime and Safety, 2020**

- In 2019, students ages 12-18 experienced 764,600 victimizations at school and 509,300 victimizations away from school.
- About 22% of students ages 12-18 reported being bullied at school during the school year in 2019, which was lower than the percentage who reported being bullied in 2009 (28%).
- In 2019, of students ages 12-18, about 9% reported a gang presence at their school during the school year, 7% reported being called hate-related words, and 23% reported seeing hate-related graffiti.
- Between 2009 and 2019, the percentage of students in grades 9–12 who reported carrying a weapon anywhere during the previous 30 days decreased (from 17% to 13%), as did the percentage of students who reported carrying a weapon on school property (decreased from 6% to 3%).
- In 2019–20, there were a total of 75 school shootings with casualties, including 27 school shootings with deaths and 48 school shootings with injuries only. In addition, there were 37 reported school shootings with no casualties in 2019–20.

Source: [Report on Indicators of School Crime and Safety, 2020 | Bureau of Justice Statistics \(ojp.gov\)](#)

## **Criminal Victimization, 2020**

- About 40% of violent victimizations and 33% of property victimizations were reported to police in 2020.

Source: [Criminal Victimization, 2020 | Bureau of Justice Statistics \(ojp.gov\)](#)

## **Violent Victimization by Race or Ethnicity, 2005-2019**

- The overall number of violent victimizations decreased over this period by 1.1 million (16 percent).
- The number of violent victimizations of Black persons decreased 32 percent, from 913,000 to 623,000.
- The number of violent victimizations against White persons declined 24 percent, from 4.8 million to 3.6 million.
- Regarding the rate of violent victimizations from 2005 to 2019, the overall decline was 26 percent, from 28.4 to 21.0 victimizations per 1,000 U.S. residents age 12 or older.
- The rate of violent victimizations of Black persons fell 43 percent, from 32.7 to 18.7 violent victimizations per 1,000 Black persons age 12 or older.
- The rate of violent victimization of White persons fell 24 percent, from 22.7 to 21.0 victimizations per 1,000 White persons age 12 or older.

Source: [Violent Victimization by Race or Ethnicity, 2005-2019 | Bureau of Justice Statistics \(ojp.gov\)](#)

**Figure 50. Number of Victims by Age by Gender by County**

	Under 18		18 and over		Unknown	
	Female	Male	Female	Male	Female	Male
<b>Berkshire County</b>	150	73	1,569	1,424	10	14
<b>Franklin County</b>	58	31	628	625	6	5
<b>Hampden County</b>	694	516	10,141	8,473	16	19
<b>Hampshire County</b>	118	67	1,321	1,277	16	21

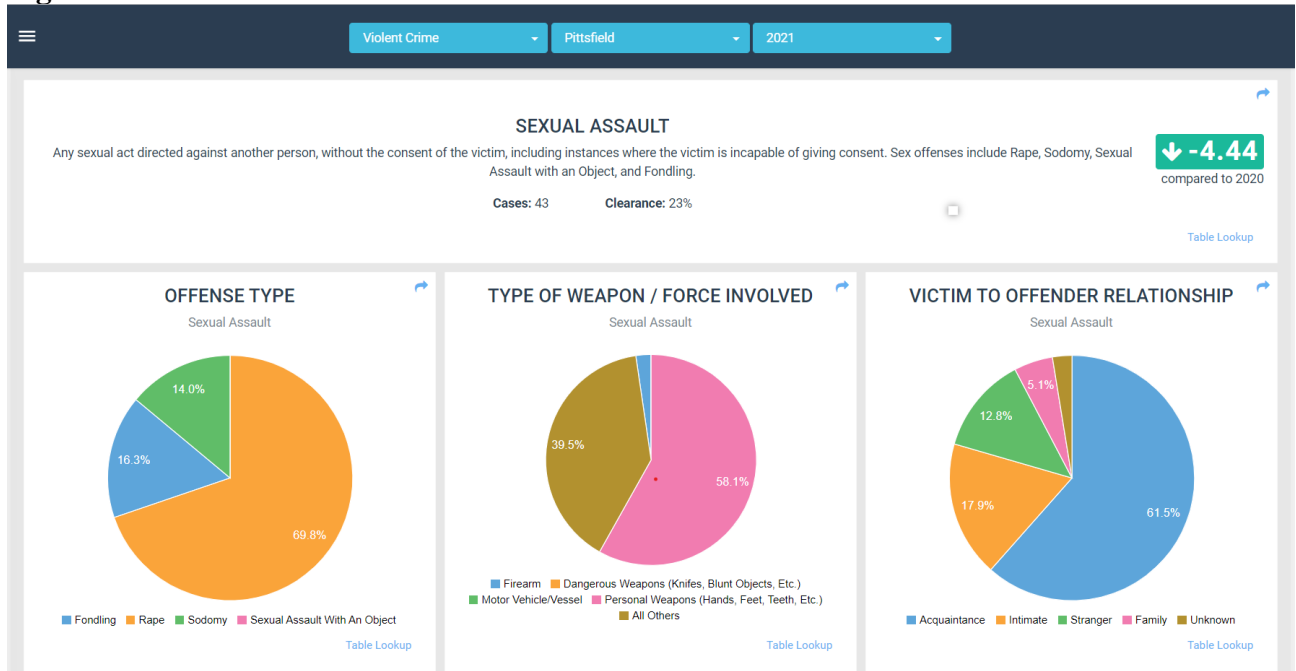
Source: MassCrime (link is no longer valid—page may have moved)

**Number of Reported Violent Crime Offenses per 100,000 Population**

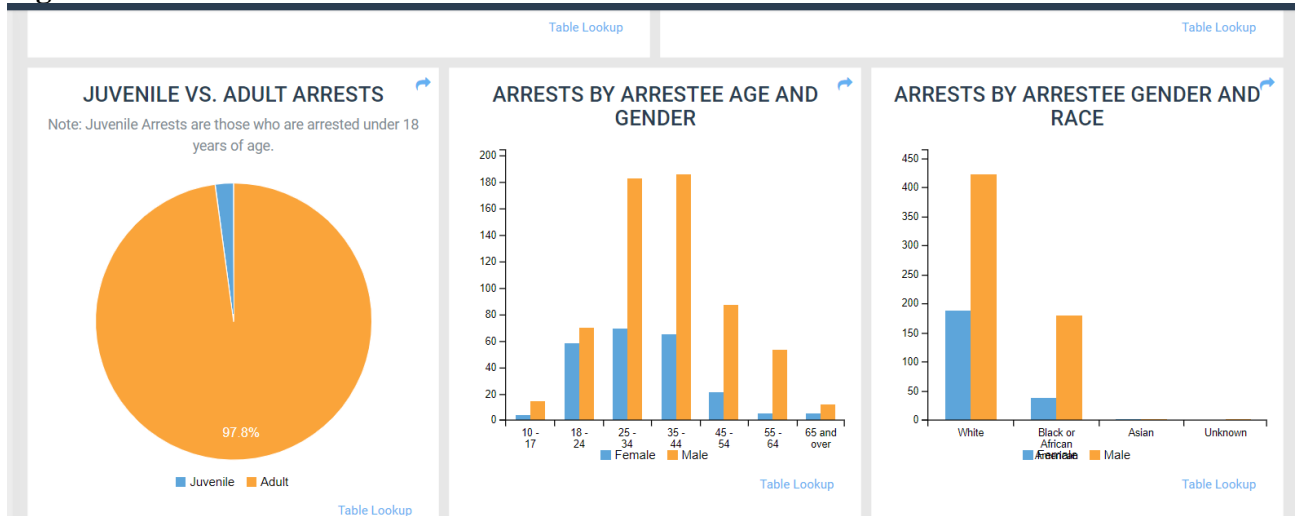
US: 386 | MA: 384 | Min: 158 | Max: 752

Jurisdiction by Geography - Berkshire County		Incident Date - 2021							
Incident Hour of Day	6:00pm-8:59pm	9:00pm-11:59pm	12:00am-2:59am	3:00am-5:59am	6:00am-8:59am	9:00am-11:59am	12:00n-2:59pm	3:00pm-5:59pm	
All Location Types	595	461	246	172	394	848	890	801	
Residence/Home	268	213	131	91	181	406	451	372	
Commercial	139	91	42	31	94	209	208	216	
Air/Bus/Train Terminal			1		1	1			
Bank/Savings and Loan	2	3	1		1	13	14	12	
Bar/Nightclub	3	8	5		1	1	1	1	
Commercial/Office Building	7	10	2	2	14	44	32	36	
Convenience Store	14	12	10	12	10	16	22	11	
Department/Discount Store	27	15	3	1	23	29	30	45	
Drug Store/Doctor's Office/Hospital	8	11	2	10	2	17	16	20	
Grocery/Supermarket	14	3	2		3	13	25	25	
Hotel/Motel/Etc.	18	1	6	1	11	17	16	10	
Liquor Store	11	1	1		2	2	4	8	
Rental Storage Facility	2	1			2	3	5		
Restaurant	12	5	4	2	6	32	22	15	
Service/Gas Station	3	4	2		7	6	3	8	
Specialty Store	18	15	2	3	11	15	17	21	
ATM Separate from Bank									
Auto Dealership New/Used			1				1		
Gambling Facility/Casino/Race Track									
Shopping Mall		2						4	
Educational Facility	5	12		1	12	14	23	17	
School/College(Historical Only)									
Daycare Facility					2			2	

### Figure 51. Sexual Assault in Pittsfield



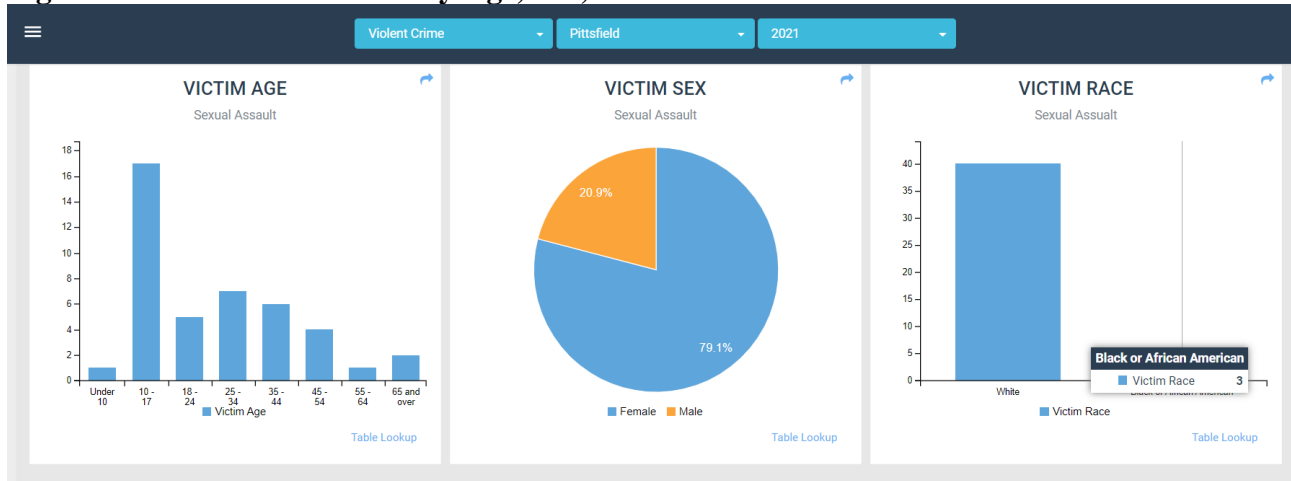
### Figure 52. Pittsfield Arrests



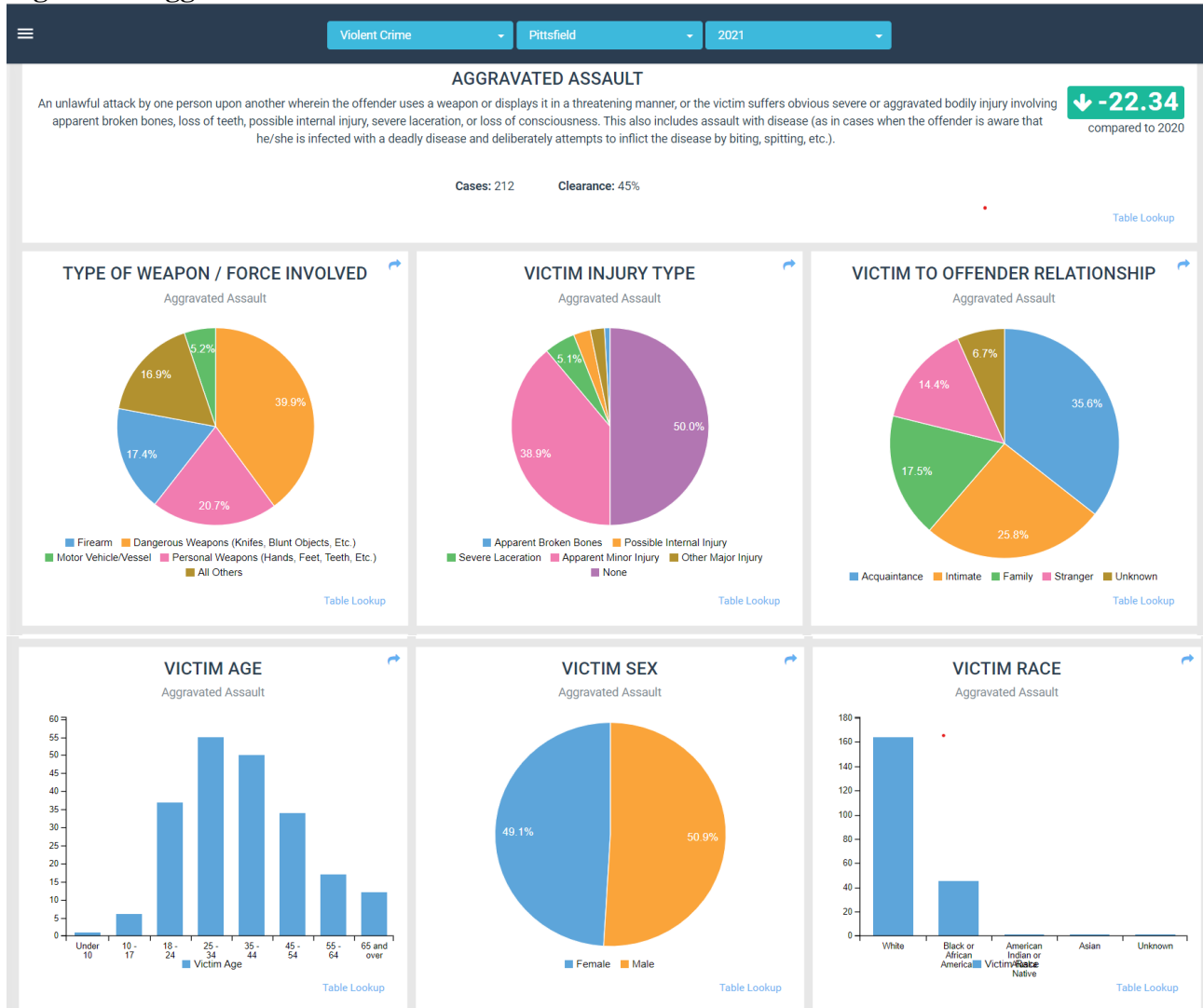
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**Figure 53. Victim Breakdown by Age, Sex, Race in Pittsfield**



**Figure 54. Aggravated Assault in Pittsfield**



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Source: [Massachusetts Crime Statistics \(state.ma.us\)](https://www.mass.gov/info-details/massachusetts-crime-statistics) – Pittsfield



## Pittsfield Public Schools

State data show that Black, Hispanic, high needs, and low-income students are significantly more likely to drop out of school. In 2022 there were almost 5,000 children in Pittsfield Public Schools. Just over half of the Pittsfield Public Schools (PPS) Kindergarten students are white. 11.6% are African American and 17.3% Hispanic, significantly higher than the State rates. Pittsfield students are more likely to be disabled and economically disadvantaged than the State rates.

Pittsfield Public Schools of interest pre-k through grade 5 are

- Silvio O Conte which is 24.2% African American, 24.2% Hispanic, 15% multi-race and 54% low income in kindergarten
- Morningside Community School which is 13.6% African American, 23.7% Hispanic, 17.2% multi-race and 44% low income in kindergarten
- Crosby School which is 10.4% African American, 33.9% Hispanic, 13.2% multi-race and 30% low income in kindergarten

## Pittsfield Public Schools Data

- [https://profiles.doe.mass.edu/state\\_report/#Assessment%20and%20Accountability](https://profiles.doe.mass.edu/state_report/#Assessment%20and%20Accountability)
- ~5000 in PPS (<https://profiles.doe.mass.edu/statereport/schoolattendingchildren.aspx>)
- 360 in kindergarten (<https://profiles.doe.mass.edu/statereport/kgenrollment.aspx>)
- Enrollment by grade: <https://profiles.doe.mass.edu/statereport/enrollmentbygrade.aspx>

## Figures 55-60. Pittsfield Public Schools Enrollment

Source: <https://profiles.doe.mass.edu/profiles/student.aspx?orgtypecode=5&fycode=2022&orgcode=02360000>

**Figure 55**

Enrollment by Race/Ethnicity (2021-22)		
Race	% of District	% of State
African American	11.6	9.3
Asian	1.2	7.2
Hispanic	17.3	23.1
Native American	0.3	0.2
White	59.2	55.7
Native Hawaiian, Pacific Islander	0.0	0.1
Multi-Race, Non-Hispanic	10.3	4.3

**Figure 56**

Enrollment by Gender (2021-22)		
	District	State
Female	2,430	442,763
Male	2,516	467,772
Non-Binary	7	994
Total	4,953	911,529

**Figure 57**

Kindergarten Enrollment (2021-22)							
Student Group	Kindergarten Enrollment				Full-day Kindergarten		
	Total	Part-time	Tuitioned	Full-time	Total	Percent	Percent
All Students	360	0	0	360	360	100.0	

High Needs	257	0	0	257	257	100.0	71.4%
Low Income	245	0	0	245	245	100.0	68%
LEP English language learner	21	0	0	21	21	100.0	5.8%
Students with disabilities	42	0	0	42	42	100.0	11.7%
African American/Black	52	0	0	52	52	100.0	14.4%
American Indian or Alaskan Native	4						
Asian	3						
Hispanic or Latino	75	0	0	75	75	100.0	20.8%
Multi-race, non-Hispanic or Latino	39	0	0	39	39	100.0	10.8%
White	187	0	0	187	187	100.0	51.9%

**Figure 58**

Student Group	Total PK Enrolled	# Student Group Enrolled	% Student Group Enrolled
All Students	118	118	100.0
Female	118	51	43.2
Male	118	67	56.8
High Needs	118	95	80.5
Low Income	118	83	70.3
LEP English language learner	118	2	1.7
Students with disabilities	118	34	28.8
African American/Black	118	16	13.6
Asian	118	2	1.7
Hispanic or Latino	118	21	17.8
Multi-race, non-Hispanic or Latino	118	14	11.9
White	118	65	55.1

**Figure 59. 2020-21 Class Size by Gender and Selected Populations**

Selected Populations	District	State
Total # of Classes	2,269	502,941
Average Class Size	14.0	15.5
Number of Students	4,967	912,474
Female %	48.8	48.6
Male %	51.2	51.3
English Language Learner %	5.4	10.5
Students with Disabilities %	22.0	18.8
Economically Disadvantaged %	58.6	37.3

**Figure 60. Graduation Results for All Students and Student Subgroups**

Source: [MA Dept. of Elementary and Secondary Education Cohort 2021 Results](#)

Massachusetts Department of Elementary and Secondary Education

	2021 Cohort # <sup>1</sup>	Graduates		Non-Graduates <sup>2</sup>				
		4-Year Rate	Difference from 2020	Still in School	Non-Grad Completer <sup>3</sup>	HS Equiv.	Dropped Out	Expelled
All Students	74,226	89.8%	+0.8%	5.1%	0.3%	0.3%	4.6%	0.0%
Female	36,327	92.3%	+0.8%	3.7%	0.3%	0.3%	3.4%	0.0%
Male	37,788	87.4%	+0.8%	6.4%	0.3%	0.3%	5.6%	0.0%
English Learner <sup>4</sup>	6,925	71.8%	+3.5%	12.4%	1.1%	0.1%	14.6%	0.0%
Eco. Dis.	33,860	81.7%	+1.1%	9.1%	0.5%	0.5%	8.2%	0.0%
Students w/ Disabilities	14,732	76.6%	+1.7%	14.4%	0.8%	0.5%	7.8%	0.0%
High Needs <sup>5</sup>	39,369	82.4%	+1.3%	8.9%	0.5%	0.4%	7.7%	0.0%
African American	6,837	84.4%	+1.5%	9.0%	0.8%	0.3%	5.5%	0.0%
Asian	5,017	96.1%	+1.1%	2.5%	0.2%	0.1%	1.2%	0.0%
Hispanic	14,826	80.0%	+2.9%	9.1%	0.5%	0.3%	10.1%	0.0%
Multi-race, Non-Hisp.	2,293	88.8%	+0.5%	5.4%	0.2%	0.6%	5.1%	0.0%
Native American	181	82.3%	-2.9%	6.6%	1.1%	0.0%	9.9%	0.0%
Pacific Islander	57	86.0%	-9.2%	7.0%	0.0%	0.0%	7.0%	0.0%
White	45,015	93.2%	+0.1%	3.4%	0.2%	0.3%	2.9%	0.0%
Urban	24,534	82.3%	+2.5%	8.7%	0.5%	0.3%	8.2%	0.0%

**Figure 61. MA Dept. of Elementary and Secondary Education Special Education Enrollment 2020-21**

Massachusetts Department of Elementary and Secondary Education															
Special Education Enrollment by District/Race/Gender															
School Year 2020-21															
Enrollment Data as October 1, 2020															
ORG_CO	DISTRICT_NAME	Adjusted_Total	SWD_TOTAL	SWD_TOTAL_Rate	Multiracial_R	Hispanic_R	White_R	Black_R	Asian_R	NativeAmerican_R	NativeHawaiianPa	cificIslander_R	Female_R	Male_R	Non_Binary_R
0236	Pittsfield	5002	1068	21.4	11.4	16.3	58.0	13.1	0.6	0.6	0.1	37.4	62.5	0.1	
0000	State	921180	174505	18.9	4.3	25.6	55.5	10.6	3.7	0.3	0.1	35.2	64.7	0.1	
*** Data are not reported for district totals fewer than 6 students															

## Figure 62. Dropout Rates – Pittsfield and MA

Source: [appendix-b.xlsx \(live.com\)](#)

District Name - Drop Out Rates	Grade				Gender		Race/Ethnicity						
	9	10	11	12	Female	Male	Asian	Black	Hispanic	Multi-Race, Non-Hispanic	Native American	Native Hawaiian	White
State Totals	1.1	1.6	1.6	1.6	1.0	1.9	0.3	1.8	3.2	1.4*	3.4	2.0	1.0
Pittsfield	0.7	2.8	3.3	2.5	2.2	2.4	0.0	1.5	3.2	1.6	0.0		2.4

### Youth Health and Risk Behaviors

Youth in Massachusetts report health and risk behaviors that are likely applicable to Western Mass youth as well. While smoking rates in general are down, vaping is up. There seems to be less stigma associated with marijuana use, and driving under the influence has increased. The number of youth reporting feelings of hopelessness is rising. Bullying has increased and now includes cyber bullying. Nutritional habits such as drinking milk and eating breakfast are down. Physical activity rates go down as children age, and obesity goes up. A quarter of students reported going to bed hungry in the previous week. While most students felt their neighborhoods were safe, 14% of middle schoolers reported seeing someone physically harmed in their neighborhood.

Sources:

[Massachusetts Youth Risk Behavior Survey \(MYRBS\) \(doe.mass.edu\)](#)

[Massachusetts Youth Health Survey \(MYHS\) \(mass.gov\)](#)

[Youth Risk Behavior Surveillance System \(YRBSS\) | CDC](#)

**Massachusetts Youth Risk Behavior Survey (MYRBS) and Massachusetts Youth Health Survey (MYHS)** are the most comprehensive and reliable tools available to monitor and evaluate progress across the Commonwealth of Massachusetts related to preventing or reducing behaviors that endanger the health and academic attainment of youth. These surveys are conducted on odd numbered years and are designed to monitor health indicators, behaviors, and risk factors contributing to the leading causes of illness, injury, mortality, and social and academic problems among adolescents, including:

- Protective factors
- Behaviors that contribute to unintentional injuries and violence
- Sexual behaviors related to unintended pregnancy and sexually transmitted infections (STIs), including HIV
- Alcohol, marijuana, and other drug use
- Tobacco use and electronic vaping device use
- Unhealthy dietary behaviors
- Inadequate physical activity

Data collected through the MYRBS and MYHS enable DESE and DPH to provide estimates for a variety of health indicators, behaviors, and risk factors for Massachusetts youth overall and grouped by certain characteristics (gender, grade, and race-ethnicity). These analyses can highlight inequities in health within and across population sub-groups. In interpreting these results, it is critical to recognize that the social, economic, behavioral, and physical factors experienced by youth have a profound impact on their health.

### Spring 2019 Participants

MYRBS	51 HIGH SCHOOLS RANDOMLY SELECTED
MYHS	50 HIGH SCHOOLS RANDOMLY SELECTED

MYHS	63 MIDDLE SCHOOLS RANDOMLY SELECTED
	6,768 STUDENT PARTICIPANTS GRADES 6–12

YRBS and YHS data are collected from a scientifically drawn sample of all Massachusetts middle school and high school students. The data collected are analyzed to evaluate nonresponse bias. Data are weighted to create estimates for all students in Massachusetts. Weighting is a mathematical procedure that makes data representative of the population from which it was drawn.

## **IN THIS SUMMARY**

- 2019 Key Findings
- Results Summary
- Demographic characteristics of students reported in the MYRBS and MYHS
- Appendix of detailed data tables on key health indicators, behaviors, and risk factors in the full report, which include overall prevalence estimates, as well as gender, grade, and race/ethnicity subgroup estimates

### **MANY YOUTHS REPORT THE PRESENCE OF PROTECTIVE FACTORS ASSOCIATED WITH LOWER RATES OF RISK BEHAVIORS.**

**Factors such as academic goals and successes, school-connectedness, and a close relationship with a parent or caregiver have long been recognized as potential protective factors because they promote resiliency in youth.**

- Most middle school (86%) and high school (77%) students report earning grades of mostly A's and B's. This has been a consistent finding with each survey administration.
- Most high school students (73%) are planning on completing a post-high school program such as vocational training program, military service, or college.
- Many high school students have adults they can talk to, and this has been a consistent finding since 2009.
  - Seventy-four percent (74%) of high school students report having a teacher in school they could talk to about a problem.
  - Eighty-one percent (81%) of high school students report having a parent or adult family member they could talk to about things.

### **MANY YOUTH RISK BEHAVIORS AND HEALTH-RELATED FACTORS SHOW SIGNIFICANT LONG-TERM IMPROVEMENTS OVER THE LAST TEN YEARS.**

**Since 2009, long-term reductions have been observed in cigarette use, pregnancy, and violence rates. Despite the long-term downward trends, the current data show no significant reductions since 2017. Continued monitoring will show whether these behaviors will continue to stay level or will again improve (or decline).**

- Cigarette smoking rates remain much lower than a decade ago. Five percent (5%) of high school students report smoking at least one cigarette in the past month (compared to 16% in 2009).
- Among middle school students, 5% report ever smoking cigarettes (compared to 15% in 2009).
- Fewer than 4% of high school students have ever been pregnant or gotten someone pregnant

(compared to 6% in 2009).

- In 2019, 18% of students were involved in a physical fight (down from 29% in 2009).

### **SOME YOUTH RISK BEHAVIORS AND HEALTH-RELATED FACTORS HAVE WORSENEDED SIGNIFICANTLY FROM 2017 TO 2019.**

**A few indicators, specifically those related to nutrition, electronic vaping use, and mental health have worsened in the last few years.**

- The use of electronic vaping devices has increased.
  - Among high school students, 51% have tried them at least once (up from 41% in 2017), and 8% are using them daily (compared to just 2% in 2017).
  - Among middle school students, 15% have tried them at least once (up from 10% in 2017).
- Overall levels of marijuana use have not changed but some associated risk behaviors and perceptions have, as have parental perceptions.
  - Driving under the influence of marijuana increased (20% in 2019 compared to 15% in 2017).
  - Using marijuana on school property increased (9% in 2019 compared to 5% in 2017).
  - Perception of parental views of marijuana changed. Among high school students, 67% thought parents would disapprove of their marijuana use (down from 71% in 2017).
- The number of youths feeling sad or hopeless continues to rise.
  - In high schools, 34% of students reported feeling so sad or hopeless that they had stopped doing some of their usual activities (compared to 27% in 2017).
  - In middle schools, 24% of students reported feeling so sad or hopeless that they had stopped doing some of their usual activities (compared to 19% in 2017).
- Some nutrition habits have worsened.
  - Fewer high school youth (27%) are drinking milk daily compared to 2017 (32%).
  - Fewer high school students (31%) are eating breakfast every day (a decrease from 38% in 2017).

### **SOME IMPORTANT RISK AREAS REMAIN STATISTICALLY UNCHANGED SINCE 2017.**

**A few important indicators, notably those related to marijuana, school safety and nutrition, physical activity, and weight, have seen small fluctuations but no significant change.**

- There has been no significant change in the percentage of students using marijuana among middle school and high school students.
  - Seven percent (7%) of middle school students have tried it at least once, and 3% have used it in the past thirty days.
  - Forty-two percent (42%) of high school students have tried it at least once, and 26% have used it in the past thirty days.

- There has been no significant change in the percentage of middle school and high school students who report bullying.
  - Thirty-five percent (35%) of middle school students report having been bullied.
  - Fourteen percent (14%) of high school students report having been bullied electronically and 16% were bullied on school property.
- Among high school students, 6% report skipping school because they felt unsafe at school or on their way to school.
- Forty-three percent (43%) of high school students and 48% of middle school students were physically active for 60 minutes on five or more days per week.
- One-quarter (25%) of middle school students and 29% of high school students were overweight or obese (based on self-reported height and weight).

**AS INFLUENCES ON ADOLESCENT HEALTH AND SOCIAL WELLBEING CHANGE, IT IS CRUCIAL TO KEEP ABREAST OF NEW AND CHANGING BEHAVIORAL PATTERNS AMONG YOUTH.**

**With the addition of the following new questions to the MYRBS and MYHS, data regarding risk and protective factors as well as the impact of adverse experiences and traumas on these factors may emerge that can help to inform educational and public health initiatives targeting adolescents.**

- Many youths are engaged with their community, which is considered a protective factor.
  - Sixty-eight percent (68%) of middle school and 61% of high school students took part in organized activities.
  - Thirty-seven percent (37%) of high school and 36% of middle school students reported doing volunteer work, community service, or helping people outside of their home without getting paid.
- Students are spending time with family, also thought of as a protective factor.
  - Seventy-nine percent (79%) of high school and 86% of middle school students sat down to dinner with family one or more times in past week.
  - Forty-nine (49%) of high school students have had discussions with their parents or other adults in their family, about their parents'/family members' expectations of them (to do or not to do) when it comes to sex.
- A new question was added in 2019 to increase our knowledge over time of adolescent suicide ideation and behaviors. In this first year of collecting data on this information, 24% of high school students who attempted suicide had asked for help from someone such as a doctor, counselor, or hot line prior to the attempt.
- Food insecurity is considered adverse childhood events that have a negative impact on youth. Twenty-eight percent (28%) of high school students and 25% of middle school students went to bed hungry at least once in previous week because there was not enough food at home.
- Not feeling safe or witnessing violence are also considered adverse childhood events that negatively impact youth. While most youth (90% of high school students and 91% of middle school students) feel their neighborhood was safe from crime, nineteen percent (19%) of high school and 14% of middle school students have witnessed someone being physically harmed in their neighborhood.

**Figure 63. Demographic Characteristics of the 2019 MHYS and MYRBS**

Demographic Characteristics of the 2019 MYHS and MYRBS <sup>a,b</sup>			
Middle School MYHS (N=2,536)	High School MYHS (N=2,014) MYRBS (N=2,218)		
<b>Sex</b>			
Female	1240 (51.0%)	1034 (50.8%)	1073 (50.6%)
Male	1188 (49.0%)	958 (49.2%)	1124 (49.4%)
Missing	108	22	21
<b>Grade</b>			
6th grade	939 (33.7%)	-	-
7th grade	900 (33.4%)	-	-
8th grade	672 (32.8%)	-	-
9th grade	-	577 (26.7%)	819 (26.1%)
10th grade	-	490 (24.7%)	594 (25.2%)
11th grade	-	580 (24.6%)	444 (24.2%)
12th grade	-	354 (23.9%)	332 (24.1%)
Ungraded or Other	1	2	11
Missing	24	11	18
<b>Race/Ethnicity <sup>a</sup></b>			
White, non-Hispanic	1166 (59.6%)	1256 (62.0%)	1152 (61.7%)
Black, non-Hispanic	157 (9.1%)	131 (8.9%)	309 (9.0%)
Hispanic or Latino	658 (20.5%)	357 (19.1%)	427 (19.2%)
Asian, non-Hispanic	159 (4.5%)	117 (5.1%)	144 (6.6%)
Other or Multiple Ethnicity, non-Hispanic (NH)	212 (6.3%)	104 (4.8%)	120 (3.4%)
Missing	184	49	66
<p>(a) Students could indicate multiple racial/ethnic categories. If Hispanic/ Latino was indicated as an ethnic identification, whether alone or in combination with other ethnic categories, the student was categorized as Hispanic/Latino. The Other or Multiple Ethnicity category includes American Indian, Alaskan Natives or Pacific Islander and youth who indicated several ethnicities that did not include Hispanic/Latino.</p> <p>(b) N = number of students with a valid response for the question. Percent (%) = weighted(*) percent of all students with a valid response for the question.*(To correct for slight variations between the Massachusetts Middle/High school populations and the MYRBS/ MYHS samples, cases were statistically weighted. Weighting is a mathematical procedure that makes data representative of the population from which it was drawn.)</p>			

**Other Resources**

BRPC has recently completed Berkshire County’s next [five-year comprehensive economic development strategy](#) (CEDS) report. [Available public health research data sets | Mass.gov](#)  
[Environmental Justice Populations in Massachusetts \(arcegis.com\)](#)  
[download \(mass.gov\)](#) State Health Assessment  
[COVID-19 Community Impact Survey | Mass.gov](#)  
[download \(mass.gov\)](#)



## County Resources (Future)

Source: WMHMCC from the Office of Preparedness and Emergency Management 2022