

Community Health Needs Assessment

Final Report Amherst, Massachusetts

2022-2023

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Introduction

Introduction

The Town of Amherst, located in the pioneer valley of west-central Massachusetts, is a vibrant college town that is home to Amherst College, University of Massachusetts Amherst, and Hampshire College¹. With a population of 39,263 and a per capita income of \$26,341, the town thrives on the diverse academic community and its rich cultural heritage². The town operates under a Council-Manager form of government, with Town Manager Paul Bockelman as the Chief Municipal Official and a town council consisting of 13 members serving as the legislative body³.

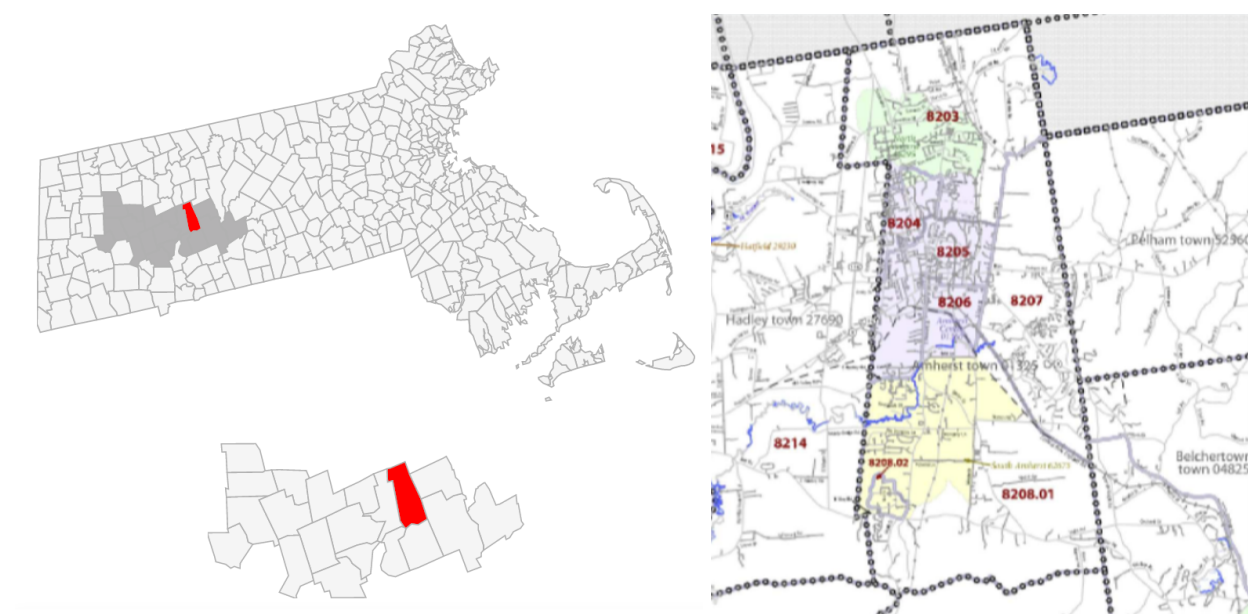


Figure 1: Geography of Amherst MA, Located in Hampshire County MA

- Census Tracts⁴
 - 8203 - North Amherst
 - 8204 - Umass
 - 8205 - Amherst Center
 - 8206 - Central Amherst
 - 8207 - East Amherst
 - 8208.01 - South Amherst
 - 8208.02 - Hampshire College

Specific Aims

- Community assessment is a process of identifying key health needs, assets and challenges of the community through systematic, comprehensive quantitative and qualitative data collection and analysis
 - Identify ways to reach at-risk, disenfranchised populations

- Address systemic health problems and concerns of our community members
- Promote equity
- Guide advocacy efforts and policy development

Social Determinants of Health⁵ (CDC definition)

- For this community health needs assessment we used the social determinants of health (SDOH) to guide our research and project methods
- The SDOH are non-medical factors that influence health outcomes
 - They are **the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life**
- These forces and systems include economic policies and systems, development agendas, social norms, social policies, racism, climate change, and political systems
- Through broader awareness of how to better incorporate SDOH throughout the multiple aspects of public health work we can transform and strengthen communities capacity to advance health equity
 - Health equity means that everyone has a fair and just opportunity to be as healthy as possible
 - This requires **removing obstacles to health, such as poverty, discrimination, and their consequences**, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care



Figure 2: Categories of Social determinants of health⁵

Methodology⁶

For this community assessment we completed the following outlined process:

- **Phase I (Spring 2022)** - Report and presentation on descriptive, quantitative data including a description of Amherst and its history, demographics, and general health status/population vital statistics.

- Data was extracted from the 2020 US census, places health data, and the institute for health metrics and evaluation
- **Phase II (Summer 2022)** - descriptive quantitative and qualitative data including determinants of health, government and policy making, etc...
 - Data was extracted from town websites, 2020 US census, and Massachusetts Department of Elementary & Secondary Education
- **Phase III (Fall 2022 and Spring 2023)** - gathering community members views through qualitative data regarding key health concerns
 - Data was extracted from community members through key informant interviews and listening sessions,
 - See Appendices A and B for interview and listening session questionnaires
 - Review, analyze, and present data
 - Write and disseminate final report
 - Each findings section includes the following sections:
 - **Focus areas:** direction for further research highlighted during phases I and II that guided the final phase of the Community Health Needs Assessment
 - **Background:** data collected during phases I and II of the project, as well as any additional information to set up project findings
 - **Key findings/needs:** results of qualitative and quantitative data collection
 - **Recommendations:** suggested focus areas and next steps for action from town departments, community organizations, etc...

Findings

- **Education Access and Quality**
 - COVID-19 has heavily impacted student learning
 - Post-pandemic financial stresses have an impact on education in town
 - School programs may not be accessible to working parents due to restraints in the timings of the programs and how many are offered
 - Teachers, staff, and paraprofessionals may not feel supported by school and town administrators
- **Health Care Access and Quality**
 - Lack of access to primary and specialist care
 - The Musante Health Center is a great resource for town residents
 - But there is a lack of knowledge and ability to access clinics
 - Mental health services are lacking in town need to be expanded to meet the needs of the community
- **Economic Stability**
 - Large student population greatly effects economics of town
 - Post-pandemic financial stresses effect community resources

- The housing crisis in Amherst is a serious problem
 - Students struggle to find off-campus housing because the school they attend is overcrowded and cannot house them
 - lower-income families looking to rent in Amherst are pushed to the side for the incoming students
- **Social and Community Context**
 - Lack of recreational options for children and adults
 - Lack of involvement in town organizations and events from community members, specifically college aged students
 - Gaps in communication and lack of action from the town affect community involvement
 - Amherst has a wealth of community service organizations that offer tremendous resources to Amherst residents.
 - Despite all of these organizations, there is significant fragmentation of services making it difficult for those in need to fully utilize the available resources
- **Neighborhood and Built Environment**
 - There are a lot of safety concerns regarding the roads (safe travel for both bikes and pedestrians)
 - There is a lack of affordable housing, and very high rent
 - Much of Amherst is classified as a food desert
 - Transportation problems complicate the lack of access to grocery stores
 - The PVTA is a good resource but can be challenging to navigate to get to and from grocery stores, also during University breaks it runs a very reduced schedule

Recommendations

- **Implement a town liaison to address fragmentation of community services**
 - A town liaison could help direct and connect individuals to the right resources in Amherst
- **Make formal and continuing connections with the colleges/university and their students**
 - Could open the door to internships, volunteer opportunities, or employment for students who might become permanent residents, and can address staffing shortages within town and community organizations
- **Increase funding and staff for the Health Department**
 - The Public Health Department needs more outreach to the community, lack of staff and limited budget greatly limit the projects that can be implemented for the community
- **Promote, support, and expand Mustane Health Center**
 - The health center provides clinical care, dental care, and helps individuals find health insurance and PCPs, many town residents are not aware of the center and its services
- **Support and expand the CRESS department**

- This department is key in addressing the needs of underserved populations in Amherst in terms of housing, mental health, and safety
- **Continue community health needs assessment to involve more voices and better understand what changes community members would like to see**

Limitations

- Due to limitations in time, resources, and available data this Community Health Assessment was not able to investigate every health and community concern. While we did sample from a variety of data sources and community members we recognize that more research is needed to comprehensively understand the challenges and opportunities for change needed to address the diverse health concerns of this community.

This community health needs assessment for the Town of Amherst highlights both the challenges and the opportunities for improvement of the health and well-being of town residents. Through addressing the identified action recommendations the community can work together to create a healthier and more equitable Amherst community. The recommended actions aim to provide a roadmap for key stakeholders, community groups, and town government to collaborate and prioritize efforts that will positively impact the overall health of the Amherst Community.

“The town needs to do better with not just listening, but acting, has to be action”

Town Demographics

This demographic section provides an overview of the population residing within our town. Understanding the composition and characteristics of the Amherst community is essential for developing effective strategies to improve health outcomes and to address the unique needs of different population groups. Demographic data, including age, race/ethnicity, socioeconomic status, and housing statistics can serve as a foundation for evidence-based decision making, resource allocation, and the development of targeted health programs and interventions. Having a deeper understanding of our community's demographics, can allow us to work towards achieving health equity and enhancing the well-being of all individuals residing in Amherst.

Population Pyramid Amherst MA - 2019

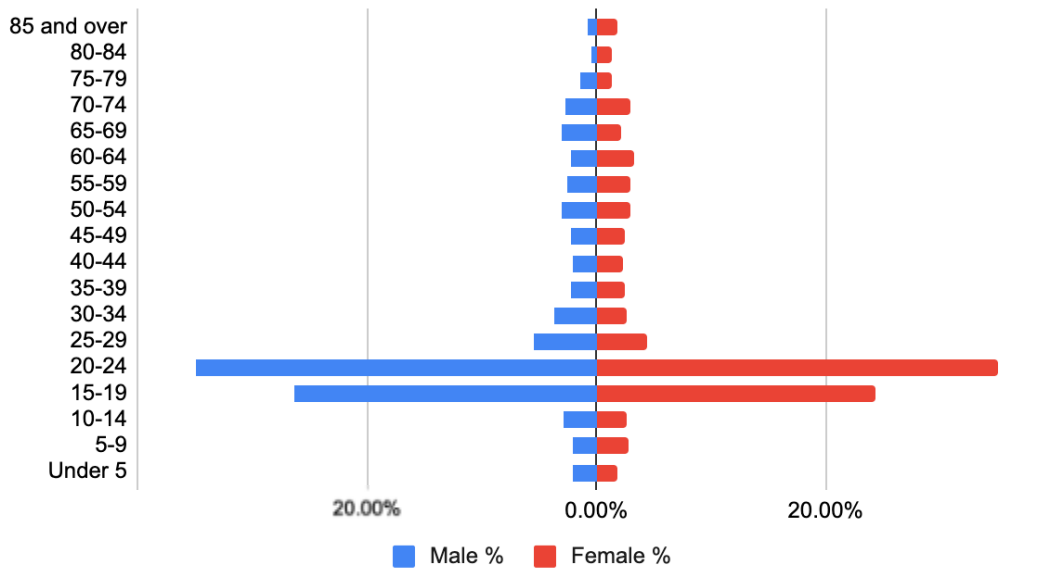


Figure 3: Age distribution of Amherst MA, 2019⁷

The majority of residents (male and female) are aged 15-25⁷. This reflects the presence of the three secondary educational institutions in town (Umass, Amherst College, and Hampshire College). These institutions skew the population distribution, as reflected in the population pyramid above. Due to the high number of students in town Amherst has a very transient population meaning that individuals come and go often in Amherst. This has an effect on economics, housing, social environments, etc... of the town.

Racial Distribution Amherst MA, 2022

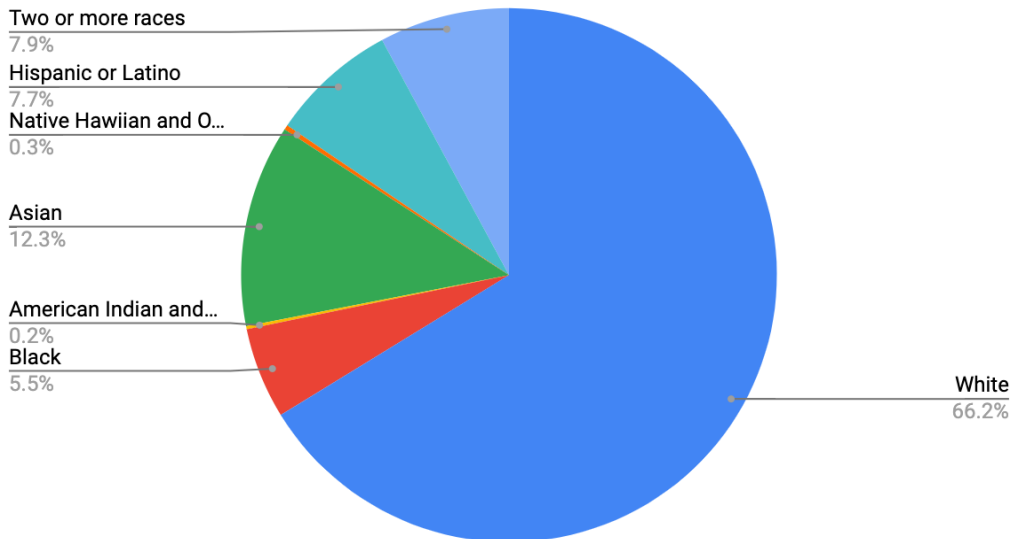


Figure 4: Racial Distribution of Amherst MA, 2022⁷.

The majority of residents in Amherst are white (66.2%), followed by asian (12.3%), two or more races (7.9%), hispanic or latino (7.7%), black (5.5%), Native Hawaiian or Other Pacific Islander (0.3%), and American Indian or Alaska Native (0.2%). Because the population in Amherst is overwhelmingly white, we see that the most prominent voices in local government and community organizations are also white.

Owner vs Renter Occupied Housing Unit Rate %

2017-2021

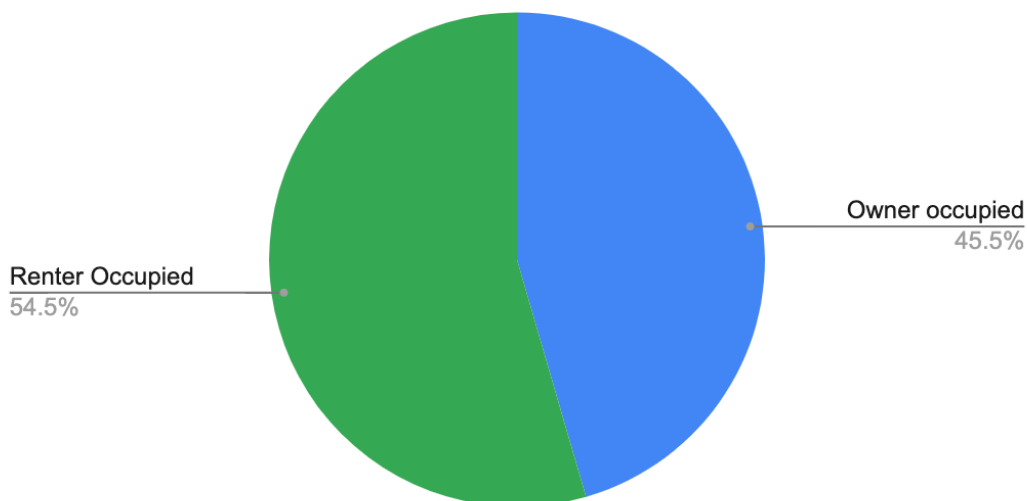


Figure 5: Occupied housing units rate from 2017-2021⁷

The majority of housing units were renter-occupied from 2017 through 2021. The median value of an owner occupied housing unit was \$392,900. The median gross rent for the same time period was

\$1,059². An ongoing problem within town is housing, specifically affordable housing. Due to the large number of students living in town prices are driven up to levels that are typically unaffordable for families. Rentals are hard to come by as more and more students are admitted to local universities and dorm spaces fill up.

% of Persons in Poverty vs. Not in Poverty 2017-2021

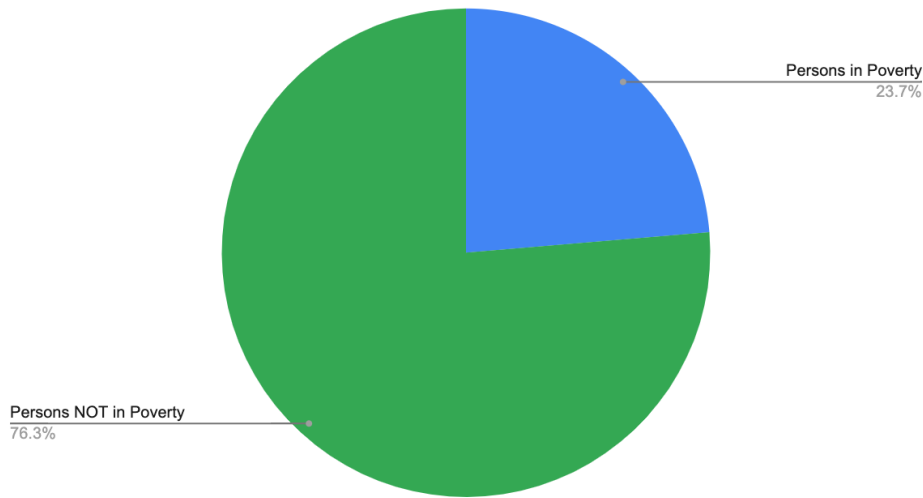


Figure 6: Percentages of Persons in and NOT in Poverty in Amherst 2017-2021²

From 2017 to 2021 23.7% of people in Amherst were living in Poverty, whereas 76.3% were not living in poverty. This means that from 2017 to 2021 nearly a fourth of the population in Amherst was classified as living in poverty. The median household income (in 2021 US dollars) was \$61,127, and the per capita income in the past 12 months (in 2021 US dollars) was \$26,341².

Next Steps

After considering the basic demographic data outlined above, our next sections will describe specific findings surrounding strengths and weaknesses of the Amherst community identified by community members. All of the findings that we describe will fit into a corresponding section that aligns with a Social Determinant of Health (SDOH).

Education Access and Quality

Access to education and the quality of education are crucial for community and individual health. Education helps to enhance health literacy, promotes disease prevention and health promotion, improves access to healthcare, empowers individuals, contributes to socioeconomic status of individuals and families, facilitates health workforce development, and leads to long-term health benefits for individuals and communities. Education has long-term health benefits that extend beyond the individual level. Communities with higher literacy rates and educational attainment tend to have better health outcomes overall. Well-educated individuals are more likely to engage in healthier behaviors, participate in community health initiatives, and contribute to the development of healthier and more prosperous communities.

I. Focus Area

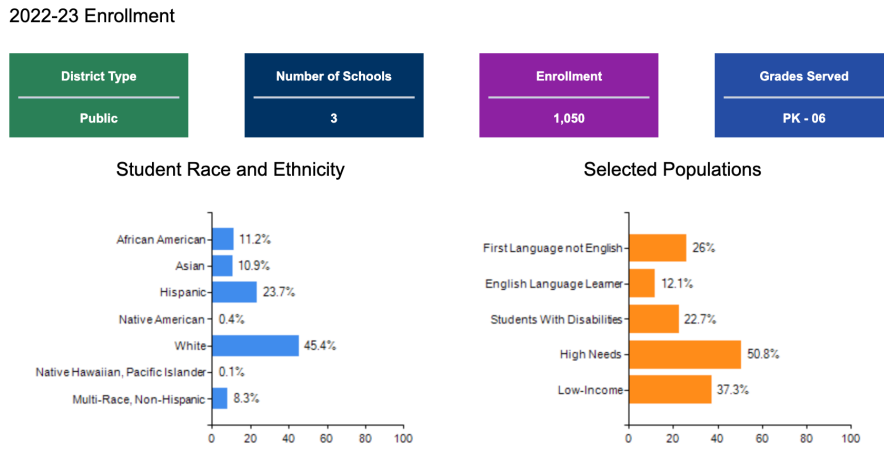
- A. To investigate data surrounding students residing specifically in Amherst, as well as looking at progress being made to improve participation of certain marginalized groups, and how the community feels about the school system.
- B. To assess the availability and accessibility of educational institutions, and their capacity to accommodate the community's educational needs.
- C. To analyze the rates of school dropout and explore factors that may contribute to drop-out rates.
- D. To assess the availability and effectiveness of support services for special needs, English Language Learners, and students of color.

II. Background

The Amherst school district is split into solely Amherst schools which consist of the elementary schools, and the Amherst-Pelham schools which encompass the middle and high school. Both school districts serve 2,280 students combined⁸.

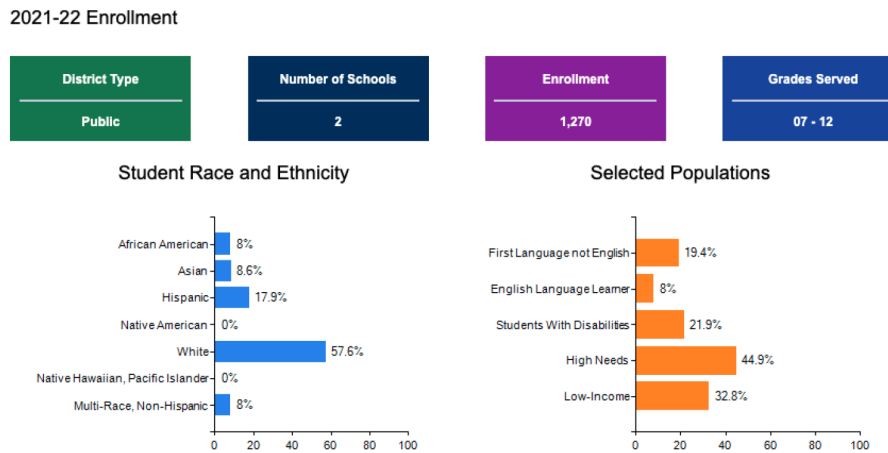
In regards to special populations, 32.8% of Amherst-Pelham students are low income, and 8% are registered as English Language Learners. In the high school specifically, 23.9% of students are students with disabilities, 29.8% of students qualify as low income, 7.2% of students are English Language Learners, and 43.5% of students qualify as "high needs."⁸

Figure 8. Elementary School Enrollment ⁸



In the 2022-2023 school year across the three elementary schools there were 1,050 enrolled students spanning grades PK-6. Shown above are the distributions for student race and ethnicity as well as selected student populations.

Figure 9. Middle and High School Enrollment ⁸



In the 2021-2022 school year across the middle and high schools there were 1,270 enrolled students spanning grades 7-12. Shown above are the distributions for student race and ethnicity as well as selected student populations.

Figure 10. Amherst Regional School District Enrollment Breakdown ⁸

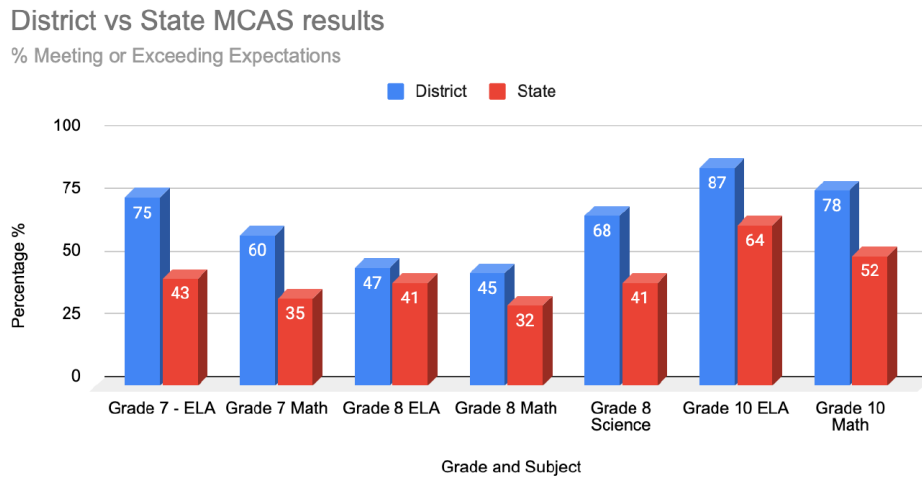
Enrollment by Race/Ethnicity (2022-23)			
Race	% of School	% of District	% of State
African American	7.9	7.6	9.4
Asian	9.1	9.7	7.3
Hispanic	19.1	18.1	24.2
Native American	0.0	0.0	0.2
White	55.2	56.7	54.4
Native Hawaiian, Pacific Islander	0.0	0.1	0.1
Multi-Race, Non-Hispanic	8.6	7.8	4.4

Figure 11. Amherst Regional High School Drop-Out Breakdown ⁸

Student Group	# Enrolled Grades 09 through 12	# Dropout All Grades	% Dropout All Grades	% Dropout Grade 09	% Dropout Grade 10	% Dropout Grade 11	% Dropout Grade 12
All Students	854	10	1.2	0.0	0.0	1.5	3.1
High Needs	379	10	2.6	0.0	0.0	3.0	7.7
Low Income	281	8	2.8	0.0	0.0	3.9	7.5
LEP English language learner	74	4	5.4	0.0	0.0	8.3	10.5
Students with disabilities	182	4	2.2	0.0	0.0	0.0	11.1
African American/Black	72	1	1.4	0.0	0.0	0.0	5.0
Asian	77	0	0.0	0.0	0.0	0.0	0.0
Hispanic or Latino	155	4	2.6	0.0	0.0	4.9	6.9
Multi-race, non-Hispanic or Latino	74	2	2.7	0.0	0.0	0.0	13.3
White	476	3	0.6	0.0	0.0	0.9	1.4
Female	399	4	1.0	0.0	0.0	0.0	3.5
Male	450	6	1.3	0.0	0.0	2.6	2.7

It is worth mentioning that the the grade most dropped out of cumulatively was the 12th grade, with the highest percentage of drop-outs occurring in students who are English Language Learners (10.5%), multi-race students (13.3%), and students with disabilities (11.1%). In comparison, the 2022 graduation rate for Amherst Regional High School students specifically was 94%.

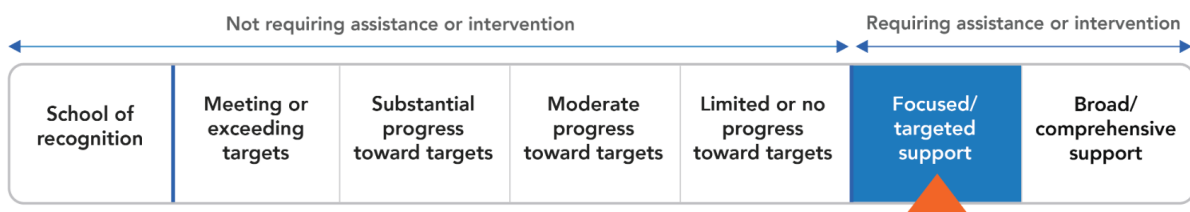
Figure 12. Amherst Regional High School MCAS Results⁸



Amherst regional school district has higher percentages of students meeting or exceeding expectations of MCAS scoring at all grade levels and subjects when compared to state results.

Massachusetts uses information related to progress toward improvement targets, accountability percentiles, graduation rates, and assessment participation rates to determine each district and school’s overall classification. Most districts and schools are placed into two categories: those that require assistance or intervention from the state, and those that do not require assistance or intervention. More information is available here: <http://www.doe.mass.edu/accountability/>.

Figure 13. Amherst Regional High School Accountability Target⁸



Reason for classification: Low participation rate: Hispanic/Latino subgroups

- A school is identified as in need of focused/targeted support if it: is among the lowest 10 percent of schools statewide, as measured by the accountability percentile; has one or more subgroups with a subgroup percentile of 5 or below; has a low graduation rate for all students (below 66.7 percent); and/or has low assessment participation (below 95 percent) for all students or for one or more subgroups. A district is identified as in need of focused/targeted support if it has a low graduation rate for all students (below 66.7 percent), and/or has low assessment participation (below 95 percent) for all students or for one or more subgroups.

- A. There is a lack of data for students living specifically in Amherst (data from middle and high school includes regional students from surrounding towns).
- B. The ARPS is classified as needing intervention and assistance due to low participation rate for Hispanic/Latino students. School data also illustrates that students of color, as well as ELL students and low income students are most at risk for dropping out.

III. Key findings/Needs

Teachers and the education staff in the Amherst schools are very highly talked about, and are consistently cited for going above and beyond and caring for students

- A. "I have a daughter who is 14, so she's in eighth grade, and she's gone to Amherst Public School since she was in kindergarten, and as far as I can see, she's had a wonderful high quality education, her teachers have all been top-notch
- B. " I was really impressed when I attended a sort of a session for families of rising ninth graders, where you learn all about the high school and what they have to offer I was really impressed with the course offerings and the electives"
- C. "So right now, if you're talking about the heart of people that walk in the building, it's a solid 10/10"
- D. " I truly believe that that the people that I worked with, even when I don't agree with something that they said or did, I always felt I could challenge that, and not feel like I could I had to be quiet, you know so in that in itself land to the atmosphere that says, "Hey, there's some diversity here."

Low income students, students of color, and English Language learners may face additional barriers in accessing the same resources and educational opportunities as their peers

- E. "I think if you're low income and like working several jobs, you don't have time to read all the emails. And also if you, if the parents in a family are not native English speakers, they might have a hard time understanding and reading emails...In my experience of how this information is transmitted from the school about services, I think it's mostly by email."
- F. "There have been times that when we had to address some hard truths about our town and about our world, that some of the teachers hid behind what we call white privilege, and not being able to or not wanting to have those hard conversations"
- G. We have a young man, well, here's the other thing. He's in a wheelchair and he's on the track team. However, he needs a special bus to get to track meetings, and if there's not a staff to ride with him he can't go. That should never happen...when I saw him, and I asked him about the freshman sophomore meet. I didn't see you. He said, well, there was nobody to ride with me on the bus.

- H. I'm talking about the high school. They don't see the people that look like me, and people that look like you in front of the classroom saying that education, social justice ,civic minded responsibility, and community services are important.
- I. **Kids have not been supported in being able to take college classes that didn't have the money to pay for it...** there's a lot of kids that are lower income, that are not taking some of the classes at Umass and Amherst College before they graduate.

Students who are not pursuing a college track may feel under supported, and budget cuts may impacting educational opportunities

- A. "Where we fall short...there have been too many budget cuts. There was woodworking where you could make things and learn that as a trade. There was automotive. I actually would take my car and get my oil change there...So all of those programs that I just mentioned, they're all gone. They all got cut. So where, while we are working academically, we're not taking the kids that are not going to go to college in working with them to see what else is out."
- B. "We're losing to charter schools, private schools. And what's the word I'm looking for vocational schools, vocational technical schools, we're losing those kids. And then it's putting more restraint on our budget, because now we have to pay those other schools for our kids that go to those schools."

Teachers and staff may not feel supported by school and town administrators

- J. "The secretaries, the teachers, the paraprofessionals, don't have a contract right now, and so I think that's affecting the quality of education, because you have to walk into the buildings that you teach with a sense of pride, a sense of happiness, a sense of feeling."
- K. "I remember when we were talking about one of the teachers that was feeling like she was being bullied.. **She was being bullied. Let's call it what's called a way. It is, and I remember there was a situation where the principal, at the time we had to talk about it, and then we needed to.** We talked about it as a staff. We've had a script to talk about it with the students as to what was going on, and **one of the the young man who was not a student of color, said, raised his hand, and I said, Do you have a question yes, what is it when are we going to get back to the lesson?"**

COVID-19 may have heavily impacted student achievement and success

- A. "Then they said, we're gonna do school on Zoom, however, it's not gonna really count if you will. So yes, we would give kids things to do, but if they didn't do them there was no penalty. **So whatever way they had when Covid hit was the grade they got, whether they did the extra work or not. And then we come back to school, and we're now on zoom, you know, and kids**

don't have to turn the cameras on. So, teaching through zoom was difficult. So did they actually do the work? I don't know. They had an exit ticket.”

IV. Final Thoughts

- A. School programs may not be accessible to working parents due to restraints in the timings of the programs and how many are offered.
- B. Extracurriculars may not be accessible to all students due to restraints with transportation and costs
- C. Educational opportunities and resources for students who are not pursuing a college track are limited
- D. There is a lack of budget for vocational arts and many student clubs
- E. Teachers, staff, and paraprofessionals may not feel supported by school and town administrators.
- F. COVID-19 has heavily impacted student learning

V. Recommendations

- A. *Create culturally responsive school programming:* Develop and implement culturally and socially responsible programming (i.e school assemblies, curriculum diversification, support the hiring of diverse teaching staff) that consider the needs, experiences, and backgrounds of low income students, ELL students, BIPOC students, and LGBTQ students. Offer training and professional development opportunities for staff that focus on cultural competency and inclusivity.
- B. *Create more opportunities for Career Exploration:* Implement comprehensive programs (i.e via school extracurriculars and classes) that provide exposure to vocational and technical education as to support students who are not considering a college path
- C. *Family Engagement and Support:* explore the possibility of extending the timings of school extracurricular programs to support working families. Develop strategies to overcome transportation and cost barriers for students interested in after school activities, including support in making these activities accessible to all students. Engage parents and families in marginalized communities to ensure voices are heard and concerns are addressed.
- D. *Mitigating the impact of COVID-19 on student learning:* Evaluate and develop comprehensive plans to address the impact of the pandemic on student learning (i.e implementing targeted academic support programs and increasing mental health support for students)
- E. *Mental Health Support for Students and Staff:* Implement and create comprehensive mental health programming, and increase access to school-based mental health services. This can potentially be achieved by employing more qualified mental health professionals and by establishing peer support programs.

Health Care Access and Quality

The ability to access quality health care is a core principle of the social determinants of health. Things like insurance coverage, treatment of chronic illnesses, health literacy, access to mental health services, and ability to access appropriate specialists and primary care physicians are all important in promoting the health of individuals and communities. Barriers to equal access to quality healthcare include transportation, cost, and lack of health education. Addressing these inequalities and closing these gaps can help us to create a healthy, equitable community.

- I. Focus Area
 - A. How accessible are healthcare services within the town, where are the shortcomings in terms of services being provided and availability of care?
 - B. How are clinics and affordable options being used within the community (Musante clinic, tapestry health, etc...), where can improvements be made to better serve the community?
- II. Background

Estimated Prevalence of Depression (≥ 18 years old) vs. Census Tract (2020)

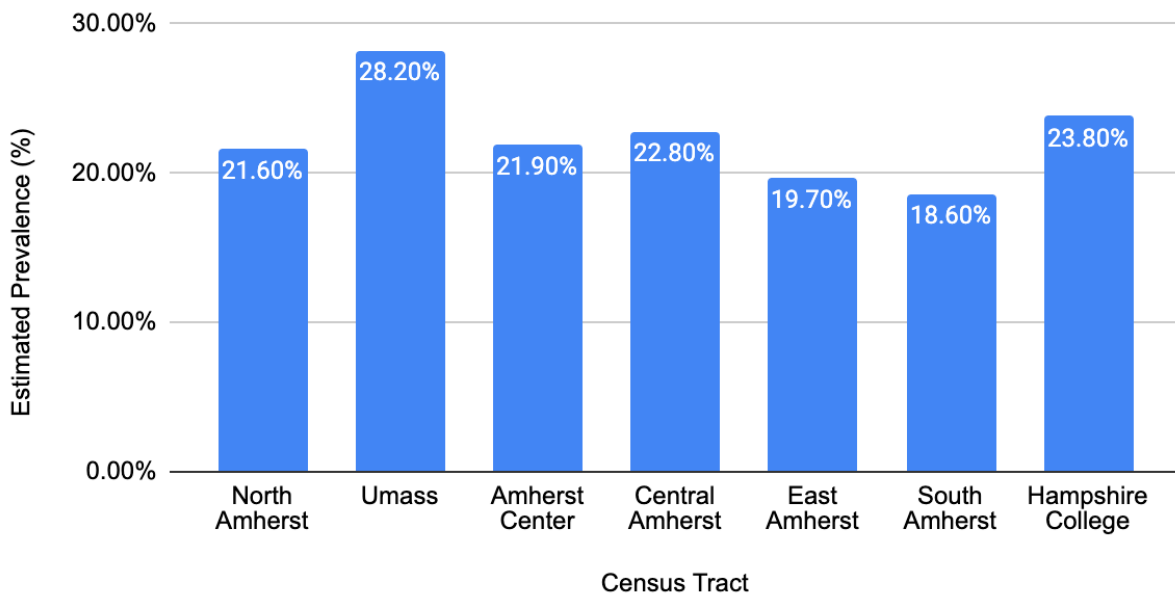


Figure 7: Estimated Prevalence of Depression in Individuals 18 or older in 2020 (by census tract)⁹

We can see that across all tracts the prevalence of depression among adults ranges from 18.6% at the lowest to 28.2% at the highest. This means that in the Umass tract over $\frac{1}{4}$ of the population had depression in 2020. This graph highlights the need for increased mental health services for students and

residents in town. Expanding on the need for these increased mental health services, in light of recent events that have been occurring in the elementary school, it is important that the mental health of those under 18 is also equally considered.

- A. Health of community members can decline if they have a hard time accessing medical care. Prior CHNAs reported a number of obstacles to receiving medical care in Hampshire County, including a **lack of providers, transportation issues, insurance issues, a lack of cultural humility, poor health literacy, and a lack of coordinated care**¹⁰.
- B. Overall, the number of PCPs compared to the general population in Hampshire County has been dropping for several years, however, the number remains higher than the state average. Moreover, **Hampshire County has very low ratios of Mental health providers and dentists as compared to the overall population of the area**¹⁰.
- C. Another major issue is transportation to and from medical care. **Insufficient public transportation, an aging population, and rural locations** are only a few of the factors that affect several health outcomes, including access to medical care.
- D. Amherst spends significantly less money per person on health than surrounding towns. Less-funded healthcare facilities and fewer health department staff causes Amherst residents to travel into neighboring towns to see specialists, but transportation can be difficult³
- E. Lastly, according to data from the Massachusetts COVID-19 Community Impact Survey (CCIS) the COVID-19 pandemic had a detrimental effect on healthcare access as well¹⁰.
- F. Cite:
<https://www.cooleydickinson.org/wp-content/uploads/2022/10/Cooley-Dickinson-2022-Community-Health-Needs-Assessment-v2.pdf>

III. Key findings

- A. Increasing awareness and communication surrounding the Health Center, their services, and how to utilize them would be helpful to allow more residents to access care. This is especially important as finding health care services in Hampshire County is a consistent problem for Amherst Residents.
 1. **“Getting a doctor’s appointment is so hard”** Is a consistent statement heard from participants of this health assessment
 - a) **“(We) Need to bring more doctors from other places like Springfield into Amherst”**
 - b) **“I just finally got one of those positions here [Musante] to be my PCP cause I couldn't find one in Springfield. I called everywhere. I was, I mean for 3 years I didn't have a PCP”**
 - c) **“You can go to the survival center but who wants to go to the survival center to see a doctor”**

- B. Places like Craig's doors, the Survival Center, and the Musante Health Center, Unitarian churches are doing their best to close the gap of healthcare access inequality by offering the services they have
 - 1. Getting information about these services to the people who actually need them is something that needs to be improved upon.
 - 2. "The Amherst Survival Center does a wonderful job at having volunteer doctors there so that people who people can actually have access to physicians to check on the diabetes and blood pressure"
- C. While these community services are available, clinics and health centers need to be more accessible by offering information in more languages than just English and Spanish.
 - 1. "There are a lot of Central American and South Americans folks who could use this representation"
 - 2. "We have a very diverse linguistic background of populations here, and so making sure that we know how to access our interpreter lines, we need it, if possible, making sure that we try to employ people who speak the languages of those whom we serve"
- D. Emergency preparedness in terms of infectious diseases, the next big pandemic, climate change.
 - 1. "Are we going to have a big snowstorm this winter? Are we going to have an emergency warming shelter? Is everyone at the Senior Center? Are they going to be able to have their meds and Meals on Wheels delivered?"
- E. Substance abuse is another challenge in Amherst. Providing accessible support services for those in need would make a large difference in safety for individuals using and community members. One community member reported:
 - 1. "When I came in, there were two syringes. Outside the door, one had looked like venous blood in it, and then just another used syringe. And then there was a rolled up dollar bill. And, you know, my thought was thinking, Oh, my gosh, somebody's sniffing something."
- F. Across multiple interviews and listening sessions a major findings was that **The Musante Health Center services are very misunderstood by residents**
 - 1. The Musante Health Center provides comprehensive medical, dental, insurance enrollment, and community services, but most residents assume it is a walk in clinic
 - 2. "**People don't know we're here**...People don't understand what an Fqhc (Federally Qualified Health Center) is...**We are not an urgent care**. This is not a place you walk in, or I got a cold today I need to see someone. You might be able to get it appointment today, but that's not what we're built for."
- G. **More outreach is necessary** from the Musante Health Center to help residents understand what services they provide and if they have the services necessary for their care.
 - 1. The Musante Health Center has a clear mission that drives their services

2. “We want to help people who don't have any income because they don't have anywhere else to go. We wanna make certain that... we have **equal care for everybody**”
 - H. Dentists are also hard to find - parents have reported needing to travel all the way to Holyoke to get their kids to a dentist that takes MassHealth
 1. “**I haven't had a teeth cleaning since the pandemic started in 2020**”
 2. “My son has to go to Springfield to do his orthodontist appointments”
 3. Even in Musante Health Center dental services are a challenge. The center reports that: “**We don't have enough dental providers** to be able to open up to see more folks staffing shortages and health care alone makes it difficult finding people who are, you know, from diverse backgrounds and multilingual that can work is difficult”
 - I. Another consistent finding was a need for **more focus on mental health services** in Amherst. The new CRESS department is a step in the right direction towards providing crisis intervention services, but more long term solutions are needed. **It is hard to get a therapist in the area due to long wait lists.** Colleges provide a limited number of psychiatric appointments for students, but often are not enough to make meaningful changes for individuals.
 1. “**Mental health at all levels, at all ages, is a huge concern**”
- IV. Final thoughts
- A. The **Musante Health Center** is a great resource for town residents. The problem is not many know it exists or its intended purpose. **Promotion** and **expansion** of health center would allow them to take on more patients and expand their ability to provide people with PCPs, dentists, and assistance with insurance.
 - B. **Mental health services need to be expanded to meet the needs of the community.** We have organizations like CRESS and private counseling centers in town but long term solutions are needed.
 - C. Addressing the barriers faced by residents which keep them from accessing healthcare is important in closing the socioeconomic gap in healthcare access. **Improving cultural competency, health literacy, and including diverse languages** are just some ways to close this gap.
- V. Recommendations
- A. Compared to neighboring towns, Amherst Public Health Department doesn't have the staff and resources it needs to go above and beyond the projects it's already doing.
 1. The Public Health Department needs more outreach to the community. Hire a community outreach worker who can go to things like the mobile markets, farmers market, school events, the fall block party, ect. These communal spaces will allow the outreach worker to educate and provide free tools to underserved

populations to keep them healthy. Perhaps add a homecare division as well to address the aging population in Amherst.

2. Asking the health department to bring awareness to mental health and implement program(s) to help its residents.
 3. Expand their Sharps program to allow residents who are struggling to deposit their sharps at no cost. Put in a free sharps deposit box in a public location.
- B. Amherst residents are having trouble finding PCPs and dentists. Healthcare needs to be more accessible
1. Promote, support, and expand Mustane Health Center who provide both clinical and dental care. They also have a position which works with people to find them health insurance and PCPs.
 2. Educate Musante employees about the town culture and its residents
 3. Provide shuttles that will take people to their PCP for the elderly, those without access to a personal vehicle, or those who cannot access public transportation. Cooley Dickinson and MassGeneral used to have a partnership that shuttled people back and forth for specialized appointments and/or advanced procedures/surgeries.

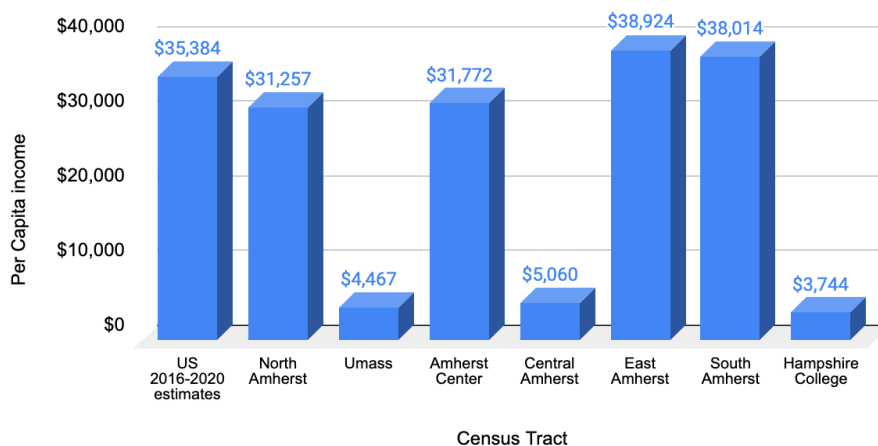
Economic Stability

Economic stability plays a crucial role in promoting both community and individual health. First, economic stability leads to higher employment rates and greater income levels for individuals and families. When people have access to stable jobs and sufficient income, they are better able to afford essential goods and services, including nutritious food, housing, and healthcare. This reduces the risk of poverty, homelessness, and malnutrition, all of which can have detrimental effects on individual and community health. Moreover, when individuals and communities have stable economic conditions, they are more likely to live in safe and affordable housing, have access to nutritious food, and build strong social connections. These factors contribute to overall well-being and can positively impact physical and mental health. Economic instability can lead to financial insecurity, job insecurity, and economic inequality, which can significantly contribute to stress and mental health issues. Chronic stress can increase the risk of various health problems, including cardiovascular diseases, depression, and anxiety. Conversely, economic stability provides a sense of security and reduces stress levels, promoting better mental and physical health outcomes.

- I. Focus Area
 - A. How do college students affect the economic functionality of the town, how are non-student community members affected by this?
 - B. How has the access to affordable or subsidized housing changed in Amherst?
 - C. How has Amherst’s spending on health affected its citizens as compared to neighboring towns?
- II. Background

Per Capita Income

By Tract, Comparable to US estimate

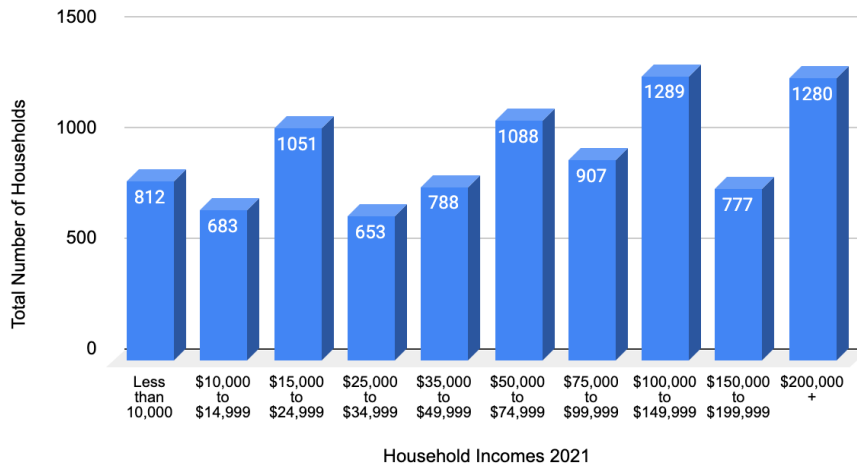


Per capita income by census tract compared to the average US estimate. East Amherst has the highest per capita income (\$38,924), followed by South Amherst (\$38,014). Hampshire College (\$3,744) and Umass (\$4,467) have the lowest per capita income⁷. Low per capita income is explained by tracts composed of mainly college students

Amherst Community Health Needs Assessment - 2022-2023

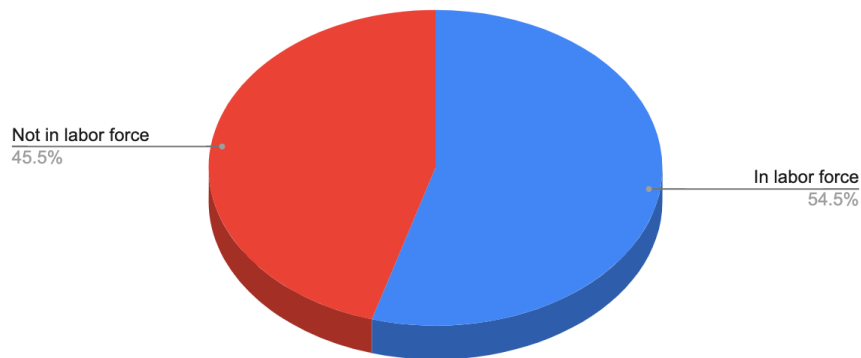
(Umass, Central Amherst (Amherst College), and Hampshire College). This wide distribution of income expresses a range of needs dependent on varying income levels.

Household Incomes - Amherst MA, 2021



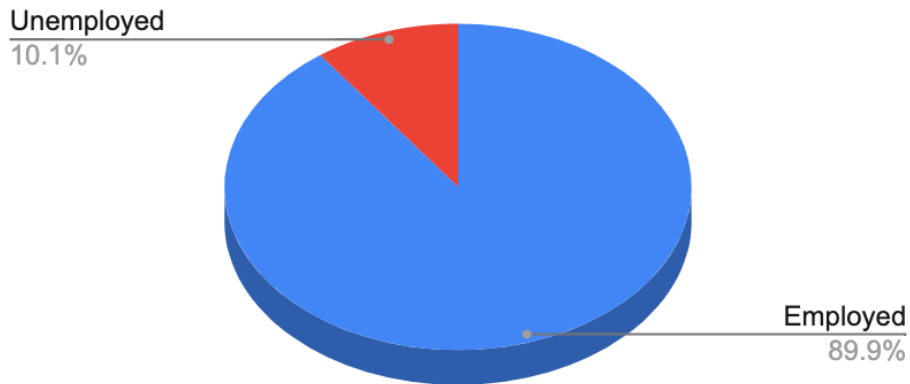
The most common household income falls within the range of \$100,000 to \$150,000, and the majority of households fall above the \$50,000 to \$75,000 range⁷. Household income varies significantly in Amherst, which further emphasizes a need for attentive health care at all income levels.

Population in Labor Force - Amherst MA, 2021



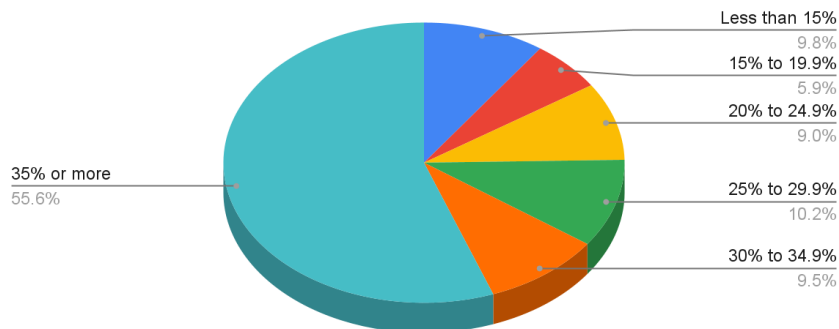
As of 2021, 54.5% of the population over 16 years of age was in the civilian labor force, while 45.5% were not⁷. This distribution of people in the labor force seems appropriate when considering the student population in town.

Employment Status - Amherst MA, 2021



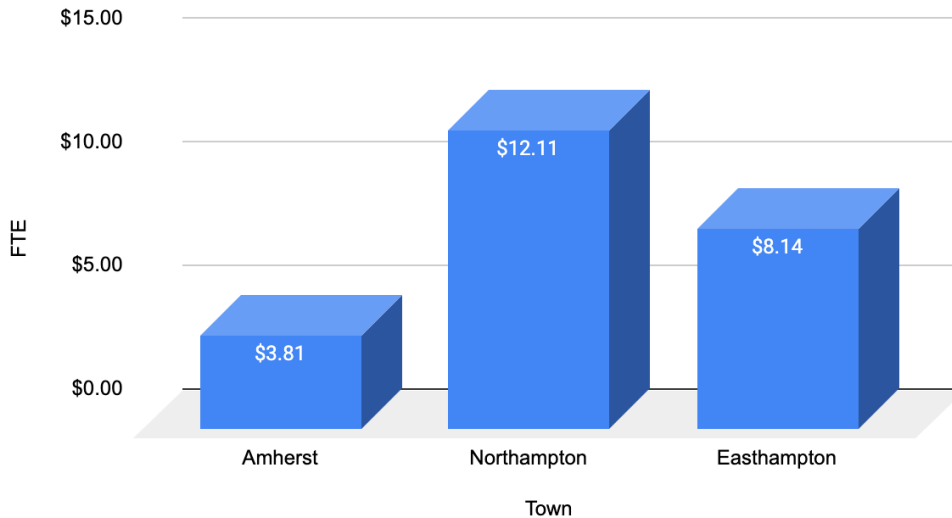
As of 2021, of those 16 and older in the civilian workforce 89.9% were employed and 10.1% were unemployed⁷. Despite a small percentage of the population participating in the labor force, the unemployment rate is over three times higher than the current unemployment rate of Massachusetts (3.3% as of April, 2023). Through our data collection we were unable to find a reason for this conflicting data. We urge the continued research on the causes of unemployment in Amherst.

Gross Rent as a Percentage of Household Income - Amherst MA 2021



As of 2021, 55.6% of renters in Amherst pay 35% or more of their household income on rent². According to the United States Census, the government recommends that renter-occupied households spend less than 30% of their income on rent (30% being roughly the national average for gross rent as a percentage of household income): households paying over 30% of their income on rent are considered cost-burdened according to the Department of Housing and Urban Development.

Full Time Equivalent by Town - 2020



Amherst spends a quarter of what Northampton spends on Health department staff, and less than half of what Easthampton spends³. This points to concerning gaps in Health Department staff and ability to serve the Amherst community.

Unemployment

- A. Large portion of students in the town means that high percentages of residents are not in the workforce. We found that both the qualitative and quantitative data did not clarify what the causes of this large percentage of unemployed people were. Below is what we determined from our qualitative data:
 - 1. Students are unaware of jobs and opportunities around town
 - 2. Those who are unemployed are not given resources for finding employment in town: unemployed people may feel inferior as a result of classism in Amherst

College Renters

- B. Overcrowding of the college dorms causes students to move off campus into apartments or other houses which then causes landlords to increase costs making housing inaccessible especially for homeless folks and young families.
 - 1. Increased prices of housing in Amherst causes lower-income residents to be pushed out of the town.
 - 2. High housing costs prevent residents from spending money on other pressing needs such as healthy foods, insurance, transportation, etc.

III. Key findings

- A. The most pressing issue mentioned in the listening sessions is the increased price of housing in Amherst and the barriers associated with searching for housing—especially for the homeless and young populations in town. Due to over-enrolling of students in

the colleges surrounding Amherst, students are forced to find off-campus housing, leading to landlords increasing rent prices. The price of housing limits people's spending on pressing costs such as good quality food, health care, transportation, etc. One resident expressed that

1. "You have to make decent money or you cannot live here: I think that is the main problem in Amherst... The owners know that this is a college town and they know that the vast majority of the town is that population. What are you gonna do? They can charge the rent because they know five people are gonna live there... that's business."
- B. One resident of 20 years stated
1. "Rents are getting raised at proportions that you know regular people can't really keep up with... landlords can have all the power to raise as much rent as they want to, and **it really puts vulnerable populations in a real crisis mode**"
- C. Another resident highlighted the conditions of these rented houses
1. "We've heard some really awful stories of the poor quality of the housing: really dreadful apartments not being taken care of, and all the while most of the landlords and owners have long since written off all the costs. It's pure profit except for whatever bare minimal maintenance is occurring, and **the tenants are getting screwed, and the landowners and operators are benefiting.**"
- D. Another concern residents brought up was the misuse of spending by Amherst Downtown (the business improvement district), stating that
1. "The business improvement district has a lot of influence over our spending, and it's going towards PET projects that are not contributing at all to the upliftment of people."
 2. Currently the business improvement district is made up of a few people who own multiple properties/businesses in downtown Amherst
- E. In Amherst, there is a large distribution of families in the lower-class and upper-class, which can create inequalities in the public school system. Parents of children attending Amherst public schools said that they wanted more resources available for their children through the schools (i.e. recreational activities, tutors, etc.), so as not to instill classism in children of lower-income families. A CRESS worker explained that
1. "In a place like Amherst, that divide is gonna waive on someone's emotional and mental health because **when you don't have much and you are constantly around people who have so much it's hard.**"
 2. In a listening session, multiple POC residents in Amherst stated that while Amherst shows some racial discrimination, it is "more classist than racist".
- F. Due to Amherst spending less money on health care than neighboring towns (Northampton, Easthampton, etc.), Amherst has fewer health care staff and fewer health resources for those who cannot afford health care. As such, lower-income residents and homeless folks may not get adequate or punctual care.

1. “Certainly **the cost of healthcare is so prohibitive**... there are many people who shortchanged themselves because they really can't afford to pay the co-pays or like the exorbitant fees that are charged, you know, and if you don't have good health insurance, or affordable health insurance, I'm guessing there are a lot of people that don't get the care that they need in sort of a timely way.”

IV. Final thoughts

- A. The most mentioned issue, which contributes to all of the listed concerns above, is that **the housing crisis in Amherst is currently a serious problem**. Students have to struggle for off-campus housing because the school they attend is overcrowded and cannot house them: the scramble for housing often leads to five, six, seven students in apartments or rental houses where landlords can raise prices far beyond the norm. Furthermore, for a landlord students are much easier and more profitable tenants because they are only living in a house for a few years and are naive to renting. This means that lower-income families looking to rent in Amherst are pushed to the side for the incoming students.

V. Recommendations

- A. **Create additional affordable/subsidized housing** in the town, or to influence the school to create more dorms to house students.
 1. Creating cheaper housing in Amherst will also give citizens more money to spend on other pressing needs such as transportation, healthier food, and more frequent health care
- B. **Supporting business development outside of the BID may also spark new activity in areas like the Mill District or in South Amherst (commercial pockets, so to speak)**
 1. This may lead to more student engagement and more occupation opportunities for students and local residents alike
 2. To address the misuse of spending by the business district, **inviting residents of the town to participate in a vote for Amherst Downtown investments**, instead of solely the district's property owners, may create a more accommodating and lively downtown for people of all income levels.

Social and Community Context

Social and community context plays a crucial role in determining individual and community health. Social support can provide emotional, informational, and practical help to individuals throughout times of increased stress, illness, or personal challenges. Social support can also reduce the risk of mental health issues like depression and anxiety. Social isolation and loneliness have been linked to numerous negative health outcomes, including increased risk of depression, anxiety, cognitive decline, and premature mortality. Strong social support and a sense of belonging can contribute to emotional well-being and resilience in the community. Additionally, social and community context can enhance physical health outcomes, through influencing health-related behaviors. Individuals are more likely to adopt healthy behaviors, such as regular exercise, balanced nutrition, and avoiding risk taking behaviors, when they are embedded in supportive social environments. On the other hand, negative social influences can promote unhealthy behaviors and increase the risk of chronic illnesses. Lastly, social and community contexts provide opportunities for health education, awareness, and behavior changes. This is accomplished by promoting health literacy and disseminating accurate health information within communities allowing individuals to make informed decisions about their well-being.

I. Focus Area

- A. How can we make the social services available in town easier to coordinate and access for those in need?
- B. Why are there so few recreational options for children and adults in town? How do community members feel about the range of activities available for children?
- C. What improvements can be made to be more consistent in communication and to reach more community members?

II. Background

- A. Amherst has many valuable social services available for residents
 1. Amherst Survival Center, Craigs Doors, Center for New Americans, Amherst Neighbors, and Amherst Community Connections are all important social service organizations used by many in and around Amherst
 2. There are many great resources available but the services are fragmented and difficult to coordinate for those in need
- B. How individuals relate and interact with town resources is affected by race, ethnicity, socioeconomic status, etc...
 1. Social engagement and community support is affected by racial experiences in town which cause individuals to experience available services and community outreach differently
 2. Most of the town government is white meaning that voices of traditionally marginalized groups have not been adequately represented

- a) Thus it is difficult to perceive social engagement and belongingness for all residents
- C. Town committee was formed called the Community Safety & Social Justice Committee (CSSJC)
 - 1. The purpose of the committee is to advance diversity, equity, inclusion, and community safety in Amherst
 - 2. The need for a committee dedicated to advancing equity and inclusion in town indicates that there are problems related to racial justice in town

Recreation

- D. Overall assessment of the recreation programs available points to major holes in the programs.
 - 1. There is a lack of activities for children involving arts, music, second language programs, cooking, computer skills (coding, programming etc...).
 - 2. The activities offered through the recreation department include mainly a handful of sports that may not be suitable for all children.

Ace Tennis - 233110 Ace Tennis with Jamie Morrell (Age 5-18) Ace Tennis with Jamie Morrell (Age 5-18)... 5 Sections
Ultimate Frisbee Clinic - 233118 Ultimate Frisbee Clinic – Tiina Booth: Whether you are brand new to the sport or have some playing experience, we offer a clinic that matches the players level of interest and skill. Ultimate Frisbee is a non-contact sport that combines the fast-paced action of soccer with skills and strategies similar to basketball and football. Learn basic throws, defensive skills... 2 Sections
Youth Basketball Clinic - 233300 Next Up Basketball (Ages 9-16) This "Level Up" basketball camp will provide intermediate to advanced youth basketball players the opportunity to increase their proficiency in shooting and ball handling. While othe... 3 Sections
Youth Soccer with Hockman - 233448 Youth Soccer with Hockman (Grades K-2) This is an introductory clinic focused on fun, development, and participation. Players will be working on skills like dribbling, passing, and shooting while also learning the rules of the... 1 Sections
Youth SULA - 233531 Are you ready for the Ultimate experience? If the answer is yes, plan on joining us for another exciting summer of Ultimate Frisbee. This fun league is geared for people who want to enjoy the thrill and excitement of Ultimate Frisbee. Never played before? No problem, all levels of ability are welcome to join! All players will be assigned a team. Once registered... 3 Sections
Lacrosse Clinic - 235100 Girls Lacrosse with Melanie Sharick (Age 7-12) Boys Lacrosse with Charlie Edwards (Age 7-12)... 2 Sections

- 3. Above shows some available activities for children, sports programs are widely available but other activities are hard to come by ³
- 4. More access to diverse activities through the recreation department is necessary

Communication

- E. There are many different forms of communication in town (local newspapers, town website, social media pages). However, the town does not have a consistent method of communicating with community members. Fragmentation in communication leads to

lack of knowledge of residents surrounding resources, programs, and opportunities for community engagement

III. Key findings

- A. An area of concern is the number and type of recreational activities available for children and adults in town. We heard from multiple residents that the town sponsored activities are lacking and often alternative programs are expensive and inaccessible for families. One residents explained
 - 1. “The Amherst leisure services programs, I don't understand why they're so **limited in their athletic and healthy choice offerings** because I feel like that's kind of exclusive... if it's important for you to have health and well being for going to Yoga or taking classes on your own health or your kids, health, oftentimes, I see people are just going through private entities, and so you're going and you sign your kid up through a private group or organization which could be much more cost prohibitive and more expensive”
- B. Another point made was
 - 1. “**Other communities...have tremendous offerings for the community** as far as sports and healthy living and all those kinds of things, and I I think, and those prices are so much more accessible. And I would love it. I hope they can beef up their system [leisure services] and then expand it in the future.”
- C. Yet another point highlighted that
 - 1. “Being able to join things like rec centers and sports and such can be expensive...In a place like Amherst, that **divide is gonna waive on someone’s emotional and mental health because when you don’t have much and you are constantly around people who have so much it’s hard.**”
- D. Expanding leisure service programs to provide a variety of activities beyond youth sports would be an important step in increasing the accessibility of recreational opportunities for youth in town.
- E. Another finding was Amherst does a really good job of providing a variety of community services for those in need.
- F. Amherst Survival Center, Craigs Doors, Center for New Americans, Amherst Neighbors, and Amherst Community Connections are all important social service organizations available in amherst. One participant noted that
 - 1. “People from other towns will come to Amherst because there are these community services”
- G. However, it was also found that an overall fragmentation of services makes it difficult and overwhelming for those in need to coordinate all these different services. One community member stated that she sometimes
 - 1. “Wonders if **the things that are available and in the community and offered are really what the community wants and what the community needs...**when they've decided to do things is it because the community has told them they

need this or they want it? Or is this just kind of somebody in an office building saying we should do this?"

- H. More involvement of community members in the development of programs could be helpful to create more effective community interventions and involvement. Moreover, services to coordinate community resources would be helpful to help residents utilize the available resources in town with less of a burden of juggling many different providers.
 - I. Overall, residents mentioned the interest in increasing community involvement of University and college students. One participant mentioned that she
 - 1. "would love to see **more involvement in the colleges and universities** in the local communities, because they have the health expertise" another mentioned
 - 2. "**more could be done to connect college students with the community**, and maybe they don't feel welcome, or feel like there's opportunities. So maybe the town needs to make more of those opportunities available." yet another added that
 - 3. "**Community may not be harnessing college communities as much as they could**"
 - J. Involving college students in the local community could be a way to supplement town services with more workers. College students would benefit from hands-on experiences in their field, and the town would benefit from their expertise and ability to work flexible hours and positions.
 - K. A main takeaway from this section would be the fragmentation of town services. One community member shared that they felt as though the
 - 1. "**Community is very fragmented.** We need a community center or rec center, that can meet needs beyond sports (e.g. places to play basketball, places for people to come together for events, could address all needs tutoring, mentoring, condoms, resources in general)"
 - L. It is very difficult to coordinate details and services necessary to get back on your feet if you are struggling, this process can get exhausting which can lead to further spiral back into bad habits
 - M. Another mentioned that
 - 1. "**Something missing in Amherst that makes you really feel the disparities**, too much that is lacking and money is not necessarily the reason"
 - 2. "Lack of diversity on boards and committees, everyone is coming with their own agendas, people are representing themselves not the community"
- IV. Final thoughts
- A. Three main issues were identified that fall under the social and community context social determinant of health.
 - 1. First a **lack of recreational options** for children and adults. Expanding existing programs and adding a variety of other activities is necessary to facilitate learning and development for children in town.

2. Second, **a lack of involvement from community members, specifically college aged students**. Creating more opportunities for engagement of college students would benefit both the students and the town as a whole. Expanding existing internship and volunteer opportunities and creating new community partnerships is necessary.
3. Lastly, **Amherst has a wealth of community service organizations** that offer tremendous resources to Amherst residents. Despite all of these organizations, there is **significant fragmentation of services** making it difficult for those in need to fully utilize the available resources.

V. Recommendations

- A. Amherst has the resources, they are just fragmented
 1. A town liaison would help direct and connect individuals to the right resources in Amherst
- B. Promote the health and well being of all town residents
 1. Support and expand the CRESS department who are helping to address underserved populations in Amherst in terms of housing, mental health, and safety
 2. Have the senior center open a fitness clinic for the elderly. A place where people can gather and exercise without the structure of a specific class or time
 3. Create opportunities for community members to volunteer
- C. Create a more diverse town government
 1. Since the switch in government, it's important to encourage those outside the circle of local politics to run for town council. Having a more socioeconomic diverse council will reflect the town population and highlight what the town can do to better address disparities
 2. Increasing the yearly salary of town council members would allow individuals who would normally not be able to be in office due to financial limitations to run. This could increase diversity and representation of the Amherst Community members on town council
 3. Offer council members funding/stipends for childcare so parents could attend town council meetings/events
- D. Continue community health needs assessment to listen to more voices
 1. Listening to more voices will promote inclusivity, community engagement, data-informed decision making, collaboration, and accountability of Amherst
 2. Continuing the community health needs assessment can strengthen efforts to address community health needs in a comprehensive and equitable manner, ensuring that interventions and policies are responsive to the diverse needs and voices within the community

Neighborhood and Built Environment

Neighborhood and built environment combines concepts of walkability, recreational areas, safety and transportation. It is a feature of the Social Determinants of Health as the surrounding environment can directly influence one's health outcome. A built environment can either work to help or sometimes, unfortunately hinder healthy outcomes in residents. The built environment of a town encompasses how the town is organized. A town organization with a close proximity to healthy and affordable food, ensures that residents are getting the nutrients they need to stay healthy. A close proximity to healthy food also provides a sense of security in knowing that if food runs low, getting more will not be a hassle. The organization of the town can also be considered in assessing the green spaces and other areas used to congregate. Green spaces can provide areas for recreation, encouraging active lifestyles among residents. Gathering spaces can work to promote a sense of belonging, and can even work to enhance connection between residents. The neighborhood and built environment is very important to consider in making an assessment of a town's overall strengths and weaknesses.

I. Focus Area

- A. Food access and transportation, specifically in areas with a high concentration of low-income residents.
- B. What interventions are feasible in Amherst and how can they be helpful in increasing access to grocery stores and nutritious food in general?
- C. How residents are using public transportation (shortcomings and/or gaps in service), how to improve accessibility to key resources for residents living without access to cars and other modes of transportation.

II. Background

Transportation

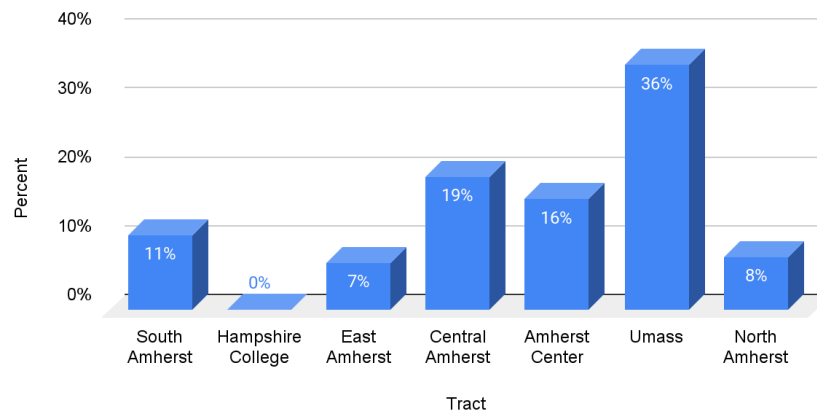
- A. PVTA is the main form of public transportation in Amherst¹¹
 1. Riding the PVTA in Amherst is Free, outside of Amherst there is a fee to ride:
 - a) Cost of Riding¹¹:
 - (1) Adult 13+: \$1.50
 - (2) Senior 60+ : \$0.75
 - (3) Mobility Impaired : \$0.75
 - (4) Children 6-12 : \$0.90
 - (5) Children 5 and under: Free
 - (6) University students: Free
 - b) All PVTA buses meet the requirements of the Americans with Disabilities Act (ADA) for accessible public transit service
 - c) All PVTA buses have front door ramps to allow access for customers using mobility devices such as wheelchairs and scooters
 - B. Inconsistencies in scheduling, rules surrounding shopping bags, and coordinating different bus routes all play a factor in access and ability for residents to use the bus and have access to key resources

Food Access

- C. **97%** of residents live in a USDA designated food desert, and many of those people do not have access to cars or consistent transportation¹². Living in a food desert heightens the risk for diet-related conditions within a community, such as obesity, cardiovascular disease and diabetes. Aside from creating serious health disparities, living in a food desert also directly correlates with high rates of chronic disease and serious mental health concerns. Not knowing where your next meal will come from can lead to chronic anxiety and other mental health struggles that will lower one’s quality of life.
- D. **1 in 4** Amherst Residents is low income and living more than a mile from a supermarket¹²
 - 1. Access to cars and public transportation continues to make accessing healthy and nourishing food difficult for many residents in Amherst. For individuals that are disabled or elderly, not having a reliable source of transportation leads these individuals to likely stay inside and isolate. Social isolation can increase the risk for depression and even early mortality in some. A reliable public transportation system within the town ensures that the community can thrive by allowing individuals to comfortably access and reside in all public spaces.

% of Households Without Vehicle that are > 0.5 miles from Market

By Census Tract



Across Amherst there are many households without access to cars that live more than a half mile away from a grocery store. UMass contains the largest percentage of households(36%), followed by Central Amherst(19%), and Amherst Center (16%). Increasing access to grocery stores and nutritious food is an important place for improvement in Amherst ¹².

III. Key findings

- A. The issue of food insecurity is a serious concern for many residents of Amherst. Not only finding affordable food and also having the means to get to a grocery store, is difficult for many. For a lot of residents this is one of the major concerns they face. One resident states

1. “My first and number one answer is that **the public health crisis of food insecurity is a really enormous one**, and it is impacting a lot of Amherst residents.”
 2. “There was a time, years ago, when we had local grocery store. People talked about that it was downtown, and they commented that it was awesome to be able to just go and pick up some milk, pick up some fresh veggies, and not have to go down route 9 and Hadley to go to the stores. **I don't know why that doesn't exist anymore.**”
- B. The Amherst farmers market has been known to be a great addition to downtown Amherst in promoting access to healthy food and community, however, a lot of residents are still finding challenges with walkability to food, and this issue is worsened during winter months.
- C. Many residents called for improvements in transportation, especially in helping those without cars access the food and resources they need to live comfortably.
1. “I think making transportation more available would be helpful. I mean I cannot state enough **how much of an issue the transportation in this region is**, you know, when Umass is on break. Buses are running once an hour. It's just ludicrous.”
 - a) The PVRTA transportation system can be improved by focusing more on the community and not just students. When students are out of town, there are still a lot of members in the community that rely on the consistent bus schedule to get around town.
 2. “Again, it's like we have these places, but how do we get people there? So you see them walking across fields, you know, with bags of food, you see them on buses, I've given people rides, you know, in my car. So I think that's something we just need to continue to figure out.”
- D. Alongside considering improvements in transportation, many have noted the bag limit on the PVRTA to be limiting for those who rely on the PVRTA to access food. One resident stated
1. “Another really critical problem with using public transportation to access food is the bag limit that exists on the PVRTA. This is enormously problematic and renders the PVRTA Bus system hugely ineffective for people to be able to access that.”
- E. While rentable bikes in the downtown have been a great addition in promoting other modes of transportation, they are only accessible through the use of a smartphone and debit card, which makes them inaccessible to residents who don't have these. This is a major barrier for homeless individuals.
- F. A lot of homeless individuals in the town lack resources and support and find that they cannot navigate the system well.

1. “[Houseless folks] have to go through a lot of extra hoops and extra bounds **to get seen for the simplest things** that if you or I walk in and you know I’d probably be seen that day.”
 - a) **“The system is harder for them to navigate through.”**
 - b) “In our line of work (CRESS) this is the most important.”
 - G. Many of the streets in Amherst are in need of repair and pose a major threat to road safety. Fixing potholes and providing better street lighting for older adults would help make many of the roads in Amherst safer and suitable for all residents.
 - H. The recreational and outdoor spaces surrounding Amherst continue to be a major asset for many living here, but they could be improved to better suit the needs of individuals that are less mobile. Some sidewalks are not accessible to those that are handicapped.
 - I. A lot of Amherst residents love to utilize the wonderful outdoor spaces that Amherst has to offer, but could benefit from more public gathering spaces that do not come at a cost. This would bring individuals together and promote a sense of community even more.
- IV. Final thoughts
- A. Amherst is a classified **food desert**. There is a lot of room for improvement in making food more accessible in terms of walkability, and possibly creating initiatives to add more mobile markets to the downtown.
 - B. Transportation can be improved** by offering consistent bus schedules for residents when the student population is out of town. The PVTA bag limit is another obstacle that many residents face, especially those that rely on the PVTA to get groceries. This limit should be carefully considered in the context that walkability to affordable food is already a challenge for so many.
 - C. Residents benefit a lot from being outside and utilizing shared spaces, and for this reason, **fixing roads and sidewalks**, and **making them accessible** to those that are less mobile is necessary. Many residents feel a sense of community gathering in public spaces. Creating more accessible spaces that are also free of cost, will only enhance connectedness within the town.
 - D. **Homeless individuals feel that they are oftentimes stuck in an endless loop** of not having the resources they need to better themselves. For those that do not have smartphones, they are unable to access nor fill out online forms. Providing better resources for these residents will work to help them to get the help they need.
- V. Recommendations
- A. For the issues of food security and transportation, **become more immersed in the town**. Go out and observe where residents are getting their food and what methods of transportation are being used. **Go out and see this firsthand**. Be the eyes and ears of the town. Listen but more importantly, **take action**.
 - B. Build more areas where individuals in the town can **get food together**. Whether this be in the creation of a community garden or farmers markets that **run year-round**. Work to make it happen.

- C. Look into town initiatives that can **reduce food loss and food waste**. Give thought to implementing new ways for excess food to be given to residents who may need it most.
- D. Consider the existing benefits of nutrition-assistance programs. One resident brought up the issue of many programs **not having the option of hot food**. Look more into this issue and for those that are struggling, try and work to provide **more food options**.
- E. Map out a plan to **fix dangerous roads** within the town. Consider the safety of roads from the standpoint of an elderly individual, a disabled individual, or a child who may play in these areas.
- F. **Take a closer look at the bag-limit** that currently exists on the PVTA. Continue to **provide stable and consistent bus access** for residents in the town even when students are away on breaks and vacation.
- G. **Increase resources for the homeless** and work to make forms accessible for those without smartphones. Lend an ear to their struggles and work to **provide better assistance for them**.

Action Points

- ❖ Amherst is so intertwined with the colleges and universities of the town. They rely on the town and in the same way, Amherst relies on these institutions, specifically UMass Amherst and Amherst College.
 - Make more connections to the schools and its programs. Could open the door to internships, volunteer opportunities, or employment for students who might become permanent residents.
 - Due to these institutions having tax breaks, Amherst isn't receiving any financial support from UMass or Amherst College. They should have a moral obligation to the town for financial support in lieu of these tax cuts.
- ❖ Amherst is in the process of building more housing, however, will any portion of it be affordable or subsidized for those who cannot afford the increasing rent prices. With more and more housing properties becoming rentals and geared toward students, full-year residents who can't afford these increases are being pushed out.
 - UMass should be more responsible for housing more students, it would free up housing for full time residents. Students are taken advantage of/exploited when seeking off campus housing.
- ❖ Address the problems of the built environment.
 - Fix sidewalks, roads, and bike paths. Expand bike paths beyond the center of Amherst.
 - Make PVRTA free. Expand and create more accessible bus stops/routes so residents can better access grocery stores or appointments.
- ❖ Schools
 - Schools should offer extracurricular activities for younger students that are accessible to working families
 - Additional resources should be placed in schools to support ELL/Low income student populations
 - Promote, support, and expand Amherst school's extracurricular programs
- ❖ Senior's transportation access
 - The Amherst Senior Center recently established the Silver Shuttle program which transports Amherst senior citizens to local medical appointments, to and from the senior center, and a weekly grocery shopping trip. Transportation hours are limited to three days a week for 6 hours per day. The Silver Shuttle has a suggested donation fare to help sustain the program
 - This program is currently funded through ARPA and the paratransit vehicle was donated by the PVRTA. The town should allocate permanent funding to this program so it can be expanded to more days of the week, more flexible operating hours, and be free to seniors.

Conclusion

This report highlights areas for improvement and recommends action points to better the health and well-being of Amherst residents. By implementing these recommendations, the community can address the challenges identified in the community health needs assessment and seize the opportunities for improvement.

The first recommendation suggests the establishment of a town liaison to address the fragmentation of community services. This liaison would serve as a central point of contact for individuals seeking resources, effectively directing them to the appropriate services in Amherst. This approach would enhance the accessibility and effectiveness of community services.

Furthermore, the report recommends establishing formal and continuing connections with the local colleges and university, thereby opening doors to internships, volunteer opportunities, and potential employment for students who may become permanent residents. This initiative not only benefits the students but also addresses staffing shortages within the town and community organizations.

Another crucial recommendation is to increase funding and staff for the Health Department. The current limited budget and staff hinder the department's ability to carry out community outreach and implement vital projects. By providing additional resources, the Health Department can better serve the community and improve overall public health.

The report also emphasizes the promotion, support, and expansion of the Mustane Health Center. While offering clinical and dental care, this center also assists individuals in finding health insurance and primary care providers. However, many residents are unaware of the center's services, and by promoting and expanding its reach, more individuals can benefit from its resources.

The expansion and support of the CRESS department is crucial for addressing the needs of underserved populations in Amherst, particularly regarding housing, mental health, and safety. Strengthening this department will contribute to a more equitable and inclusive community.

Finally, the report recommends continuing the community health needs assessment to involve more voices and gain a better understanding of the changes community members desire. This ongoing assessment will enable stakeholders to adapt their strategies and initiatives to meet the evolving needs of the Amherst community.

The health and well-being of the town is the responsibility of all town departments, organizations, and businesses, not just the public health department. By implementing these recommendations, the community of Amherst can collaborate and prioritize efforts that will lead to a healthier and more equitable community. This report serves as a roadmap for key stakeholders, community groups, and

town government to work together, making a positive impact on the overall health and well-being of Amherst residents.



Figure: Summary of Key findings from the 2022-2023 Community Health Needs Assessment

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APPENDIX A: KEY INFORMANT INTERVIEW QUESTIONNAIRE

Interview Guiding Questions

1. How long have you been a resident/working in Amherst?
2. What brought you to Amherst?
3. What are your past or current areas of involvement with the community in Amherst?
 - a. Special areas of interest or knowledge?
 - b. Belonging to groups or organizations within the town?
4. How do you feel is the best way to engage with residents effectively?
 - a. Examples of good or bad engagement?
 - b. Are there ways in which you think Amherst can improve upon engagement with community members?
5. Can you talk about the major health concerns that you think people living in Amherst face? What effects do these have on the overall quality of life of residents?
 - a. What makes you believe these are concerns and who is affected by them?
 - b. What do you think could be done to address these concerns?
6. Tell me what you think are some safety concerns facing the people in town
 - a. What makes you believe these are concerns and who is affected by them?
 - b. What do you think could be done to address these concerns?
7. Describe the assets/resources people living in Amherst have that can help keep them healthy?
 - a. Examples?
8. What do you think are the major challenges people in the community face related to keeping healthy?
9. How do you think the needs of students differ from the needs of non-students in Amherst?
 - a. How do you think students affect the functionality of the town?
10. How do you think the residents of Amherst get groceries?
 - a. What do you think are some barriers to this?
 - b. Do you think there is access to fresh food?
11. What do you think the town can do to help community members stay healthy?
12. Is there anything else you would like to share with us that we have not discussed today?
13. Who do you think is important to talk to next?
 - a. Name

- b. Position/title/role
 - c. Number
 - d. Email
14. If you think of anything else you would like to tell me after this interview, or have any questions or concerns please feel free to email me at _____ or call me at _____

APPENDIX B: FOCUS GROUP DISCUSSION QUESTIONNAIRE

Listening Session Guiding Questions

1. Let's start by going around the room and having everyone introduce themselves as well as share:
 - a. How long have you lived in Amherst and what brought you here originally?
 - b. What area in Amherst do you live (north, south, etc...)?
2. What do you think are Amherst's strongest assets?
 - a. Probe: Are these assets being utilized by residents, how could Amherst increase or strengthen engagement with these resources?
3. What do people in Amherst do to stay healthy?
 - a. Probe: how do people receive information regarding health?
 - b. Probe: is there adequate access to health care services? Access to fresh foods? Transportation?
4. Do you feel that there are disparities in Amherst, examples?
 - a. Probe: What are some inequalities in the town (that you or others are affected by)?
 - b. Probe: Is there any group not receiving enough support or health care services?
 - c. Probe: What would you like to see done to address these issues?
5. Recently Amherst switched to implement a new form of town government: a town council. How do you think this new form of government is working? How has this form of government worked, especially related to the health and well being of the town's residents?
 - a. Probe: what would you like to see done to better promote health
6. Based on your experience, what are the top three issues that you are most concerned about in Amherst?
 - a. Probe: What do you think are the barriers to addressing these issues?
 - b. Probe: What keeps people in Amherst from being Healthy?
 - c. Probe: If you had a magic wand, what top health initiatives would you implement in Amherst in the next three years? Who would most benefit from changes made?
7. Was there anything you wanted to discuss today that we didn't cover?
8. Do you have any questions or concerns for us?

APPENDIX C: KEY TERM DEFINITIONS

- Median gross rent:
 - Gross rent provides information on the monthly housing cost expenses for renters. Gross rent is the contract rent plus the estimated average monthly cost of utilities (electricity, gas, and water and sewer) and fuels (oil, coal, kerosene, wood, etc.) if these are paid by the renter (or paid for the renter by someone else). Gross rent is intended to eliminate differentials that result from varying practices with respect to the inclusion of utilities and fuels as part of the rental payment. The estimated costs of water and sewer, and fuels are reported on a 12-month basis but are converted to monthly figures for the tabulations. Renter units occupied without payment of rent are shown separately as "No rent paid" in the tabulations.
 - Median gross rent divides the gross rent distribution into two equal parts: one-half of the cases falling below the median gross rent and one-half above the 20 median. Median gross rent is computed on the basis of a standard distribution. In computing median gross rent, units reported as "No rent paid" are excluded. Median gross rent is rounded to the nearest whole dollar.

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