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YMCAcapecod.org

2019 COMMUNITY NEEDS ASSESSMENT



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Finally, we would like to thank the Head Start, Early Head Start and early childhood programs for all that you do for the children and families of Cape Cod.

Warm Regards,

A handwritten signature in dark ink, appearing to read 'Jerry C Parr', with a long horizontal stroke extending to the right.

Jerry C Parr
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ACKNOWLEDGMENTS

FOCUS GROUPS

GROUP 1

American Association of University Women
Cape Cod Cape Verdean Museum and Cultural Center
Chatham Police Dispatcher
Monomoy Regional School District
Community Liaison Nauset Public Schools
YMCA Cape Cod, Early Education Site Director
Cooperative Bank of Cape Cod
YMCA Cape Cod, President and CEO
Community Development Partnership

GROUP 2

Barnstable Public School
Cape Cod YMCA, Chief Human Resource Office
Town of Barnstable Recreation Department
Duffy Health Center
Health Imperatives Cape Cod & the Island Healthy Families
YMCA Falmouth Community Committee
YMCA Cape Cod, Program Director Achievers
Cape Cod Healthcare Vice President Strategy and Government Affairs
Cape & Islands District Attorney
Cape Cod Foundation Executive Director
Visiting Nurse Association, Cape Cod Healthcare
Lawrence Lynch Corp. Marketing and Events
YMCA Cape Cod, Chief Operation Officer
YMCA Cape Cod, Early Education Site Director
Owner Scargo Café, YMCA Achievers Program Steering Committee

GROUP 3

Falmouth Public Schools
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Partner, Life is Good
YMCA Cape Cod, Early Education Site Director
YMCA Falmouth Community Committee

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INFLUENCES OF POVERTY

Research has shown that families in poverty are more likely to have closer family relationships and engage in communal behaviors, such as eating meals together every day, compared to their more affluent peers. However, adults in poverty report struggling with planning, preparing and providing for their family's needs. Individuals experiencing poverty in the United States often have difficulty paying for medical bills and other necessary expenses. Additionally, due to financial stress, these individuals often face poor health, employment, and educational outcomes.

For children, living in poverty may result in delays in learning and socio-emotional development that begin as early as infancy and worsen over time. Children's learning and socio-emotional delays may also be due to their limited access to educational resources in their homes. Additionally, women in poverty are more likely to have children with low birth weight and experience other prenatal complications.

In addition to health and education impacts, people in poverty experience economic and social stresses at a greater rate. Many individuals and families in poverty face significant challenges accessing affordable food, well-paying jobs, and quality housing.

Due to the long-term implications of poverty over time, it is imperative to track poverty rates. Researchers and community members can better understand the economic realities of a specific location and understand residents' daily experiences.

TYPES OF POVERTY

While American cultural identities are built upon the premise of equal opportunity and unlimited potential, the reality is children who grow up in poverty face significant challenges that may prevent them from achieving future economic success. When poverty persists from parents to children, it is referred to as “generational” or “intergenerational” poverty. Research suggests people growing up in poor families have less income mobility—freedom of movement up the socioeconomic ladder—compared to those in other income classes and are much more likely to be poor in early adulthood.

Children of generational poverty face changes or disruptions in familial structure, attend schools with limited resources, and have more health challenges, compared to their more affluent peers. When they do pursue higher education, first-generation students face challenges that other students do not. They are more likely to leave a four-year institution at the end of the first year and less likely to stay enrolled or attain a bachelor’s degree after five years.

Approximately 10% of U.S. children spend at least half of their childhood in poverty, and 40% of that total remain in poverty by the age of twenty-five.

While generational poverty has been characterized by a lack of financial and social assets necessary to obtain a steady income, situational poverty is characterized as a temporary financial shock. Classified as “situational,” or “transient” poverty, this type of short-term poverty often occurs as a result of a job loss, a major health expense, or a natural disaster. Poverty resulting from such shock is often followed by a somewhat prompt recovery.

Of all significant poverty spells, 44% lasted less than four months and 15.2% extended for more than two years.

Nationally, generational poverty has harsher implications for individuals in states of poverty, but short-term poverty is more common across various demographics. Recently, 31% of Americans experienced situational poverty.

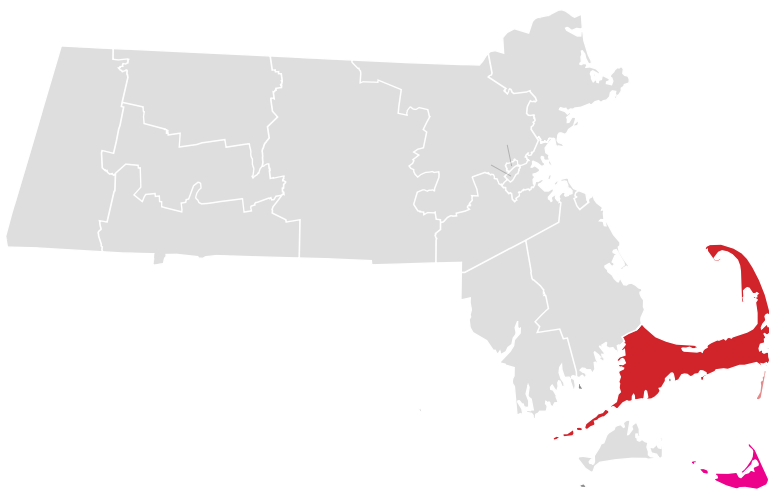
Furthermore, the absence of assets like bank accounts and insurance among many low- and middle-income families makes them economically vulnerable in the event of unemployment, illness, death of a parent, or natural disaster. This kind of poverty, often termed “asset poverty,” is based on how much financial cushion a household may have. Thus, asset poverty can affect middle-income and generational-poverty families alike. For example, 43.5% of U.S. households—if lacking income—do not have enough liquid savings to cover three months of basic expenses.

Like those in near-poverty situations, many people experiencing situational poverty cannot take advantage of government and social support systems, despite their barriers and challenges. Research shows that current government benefits have a much larger impact on chronic (long-term) poverty than transient poverty.

INTRODUCTION



The proposed service area includes Barnstable County and Nantucket.



Barnstable population:
213,413

Nantucket population:
11,327

(Source: census.gov)

INTRODUCTION

The population of the Cape has significant seasonal shifts. In the summer the population grows to 500,000 + with additional tourists, summer residents and visitors. (Source: usgs.gov)

“Cape and Islands” refers to the Massachusetts counties of Barnstable, Nantucket and Martha’s Vineyard. There are 5 sub-regions; Barnstable County has 4 sub-regions (Upper Cape and Lower Cape).

Barnstable County is a geographically isolated region located on the eastern seaboard of Massachusetts. The narrow peninsula spans over 70 miles in length and hosts a year-round population of 215,449 residents. Barnstable County consists of 15 towns that vary in year round population size from about 45,000 residents (Barnstable) to slightly more than 1,700 residents (Truro). In addition to serving year-round residents, the regional community infrastructure, including Cape Cod Hospital and Falmouth Hospital, must meet the demands of a significant influx of seasonal residents and visitors each year.

The Cape Cod Commission produced estimates, using survey data from second homeowners to indicate that the population of summer residents on Cape Cod, when averaged over a full year, is equivalent to an additional 68,856 full-time residents. This coupled with day visitors and short-term traveler volume results in an estimated 7 million visitors and residents on Cape Cod in a given summer season. This seasonal population expansion and contraction creates unique challenges for the Cape’s health care system, transportation network, workforce, business community, and housing market. (Source: 2019 Community Health Needs Assessment capcodhealth.org)

Homeownership

Barnstable
Nantucket

79%

64%

CAPE AND ISLANDS REGIONAL NETWORK ON HOMELESSNESS

HUD ANNUAL POINT IN TIME COUNT OF THE HOMELESS - JANUARY 30, 2018

Data is based on an unduplicated count. Unsheltered persons meet the HUD definition - residing in a place not meant for human habitation, such as cars, parks, sidewalks, abandoned building or street, or at risk of being evicted within two weeks and has no place to go. Those in shelter are either residing in Emergency Shelter or residing in a motel or hospitality setting paid for by an organization. Transitional Housing is meant to be temporary with a two-year limit.

Number of Homeless Persons	January 24, 2017	January 30, 2018	Difference
Total	324	358	34
Adults	224	225	31
Unaccompanied Youth	0	1	1
Dependent Children	100	102	2
Number of Unsheltered Adult Individuals			
Total	39	39	0
Barnstable County	35	28	-7
Nantucket County	0	0	0
Females	9	8	-1
Males	30	31	1
Number of Unsheltered Families			
Total # of Families	0	1	1
Total # of Persons	0	2	2
Adult Male	0	0	0
Adult Female	0	1	1
Dependent Children	1	1	0
Number of Unsheltered Unaccompanied Youth (Ages 17 and under)			
Total	0	0	0
Femlae /Male	0	0	0
Number of Individuals in Shelter			
Total	64	95	31
Females	27	33	6
Males	37	62	25

Number of Families in Shelter			
Total # of Families	69	69	0
Total # of Persons	179	182	3
Adults	79	80	1
Dependent Children	100	102	2
Number of Individual in Transitional Housing			
Total	42	42	0
Females	16	12	-4
Males	26	30	4

HOMELESS COUNT

Point in Time 1/29/19 = 76 families,
Dependent children = 104 (102 1/30/18)

(Source: bchumanservices.net)

SUBSTANCE USE DISORDERS

In March of 2015 the Barnstable County Department of Human Services published a report, *Analysis of Substance Abuse on Cape Cod: A Baseline Assessment*, to estimate the epidemiological scope and direct costs of substance use in Barnstable County. The report estimates that in Barnstable County nearly \$110 million of annual direct cost is attributed to substance use treatment, rehabilitation, arrests, incarceration, and prevention/harm reduction. The analysis further asserts that alcohol addiction is endemic and impacts 8% of the population, while 3% of the population is addicted to heroin or opioids and an additional 3% are addicted to “other drugs” (not including marijuana). The report maintains that this is very likely a low estimate and that the impact of substance use on Cape Cod, like many other regions in the Northeast U.S., has reached ‘epidemic’ status. (Source: CapeCodHealth.org)

HOUSEHOLD COMPOSITION

There are 94,367 male residents living in Cape Cod and 103,117 female residents.

The total number of households is 87,465 with 2 people per household on average.

Source: www.point2homes.com

ECONOMIC ACTIVITIES

Industries in Barnstable and Nantucket, Counties include (in order); construction, retail, waste management, transport/warehousing, art/entertainment, administration and manufacturing. Barnstable include accommodations, healthcare, professional administration and education services.

Occupations in Nantucket, Barnstable, include; construction, sales, management, building/grounds/maintenance, repair, office production. Barnstable County also includes; carpenter, retail sales, cook and food prep. Women are employed as teachers, secretaries, nursing and administrative support and personal care/ services.

Source: City-data.com



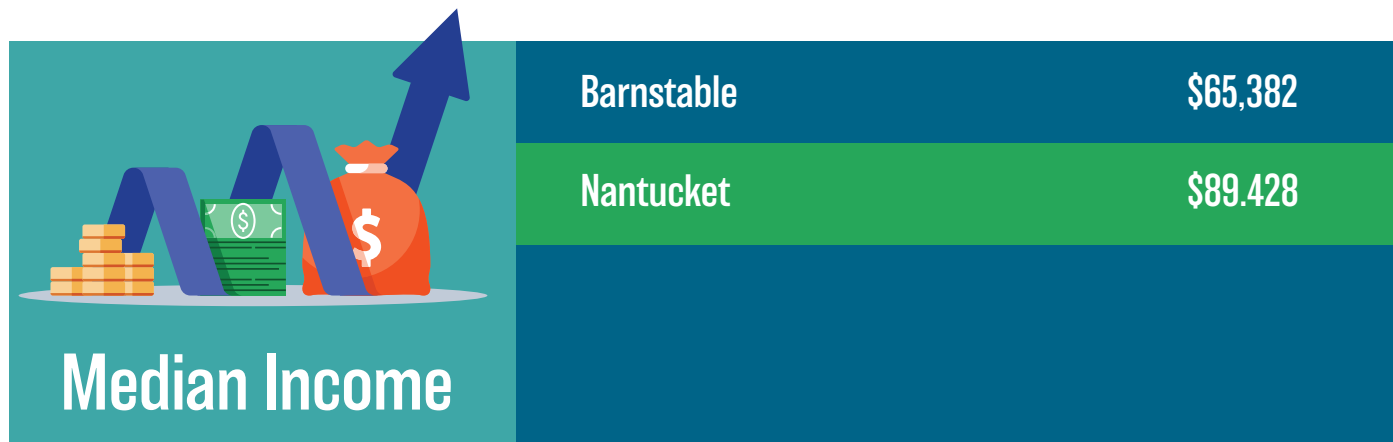
	Nantucket	Barnstable
Economy		
In civilian labor force, total, percent of population age 16 years+, 2013-2017	74.7%	59.7%
In civilian labor force, female, percent of population age 16 years+, 2013-2017	67.8%	55.5%
Total accommodation and food services sales, (\$1,000)	119,359	1,000,443
Total health care and social assistance receipts/revenue, (\$1,000)	53,397	1,766,763
Total manufacturers shipments, (\$1,000)	D	478,632
Total merchant wholesaler sales, (\$1,000)	D	563,101
Total retail sales, (\$1000)	317,541	3,856,942
Total retail sales per capita,	\$30,835	\$17,904
Transportation		
Mean travel time to work (minutes), workers age 16 years+, 2013-2017	12.1	23.3
Income & Poverty		
Median household income (in 2017 dollars), 2013-2017	\$91,942	\$68,048
Per capita income in past 12 months (in 2017 dollars), 2013-2017	\$47,924	\$40,866
Persons in poverty, percent	5.7%	7.6%

Source: census.gov

The Cape Cod Health Care Assessment Report and Implementation Plan reports that the population is getting older:

“Demographic analysis reveals two striking trends that will impact Barnstable County in the near future. Current data and future demographic predictions for the region demonstrate that Barnstable County’s overall population is declining while increasing in age. According to the Longterm Population Projections for Massachusetts Regions and Municipalities, a publication by the UMASS Donahue Institute, all

regions in MA will experience positive population growth from 2010-2035 except for Barnstable County and the islands of Nantucket and Martha’s Vineyard. A projected net loss of 13% of the overall population of Barnstable County is predicted between 2010 and 2035. By 2035, the total year-round population is expected to decrease to approximately 188,000 residents, a population similar to historic 1990 numbers. This decline is attributed to two factors, an outflow of young people from the region, and deaths continuing to outnumber births.” (Source: CapeCodHealth.org)



Source: usnews.com

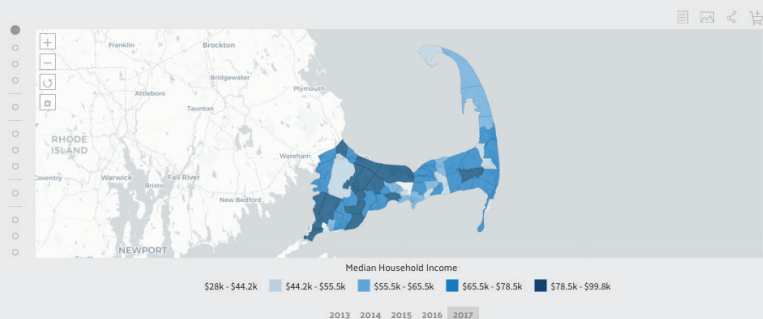
Income by Location

HIGHEST MEDIAN HOUSEHOLD INCOME (TOTAL)

1. Census Tract 122
2. Census Tract 135
3. Census Tract 143

In 2017, the tract with the highest Median Household Income (Total) in Barnstable County, MA was Census Tract 122 with a value of \$99,846, followed by Census Tract 135 and Census Tract 143, with respective values of \$95,719 and \$90,687.

The following map shows all of the tracts in Barnstable County, MA colored by their Median Household Income (Total).



Income by Location in Nantucket County, MA

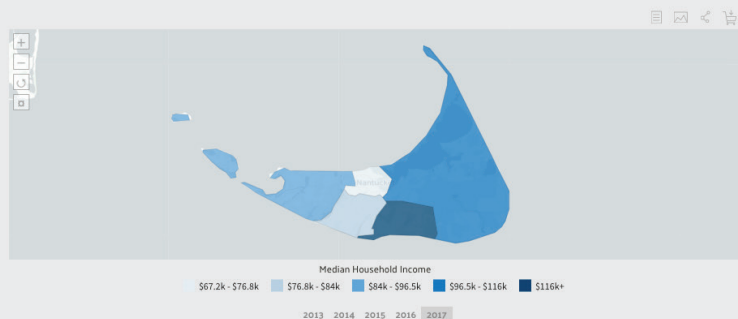
HIGHEST MEDIAN HOUSEHOLD INCOME (TOTAL)

1. Census Tract 9504
2. Census Tract 9505
3. Census Tract 9503.07

In 2017, the tract with the highest Median Household Income (Total) in Nantucket County, MA was Census Tract 9504 with a value of \$115,990, followed by Census Tract 9505 and Census Tract 9503.07, with respective values of \$102,742 and \$87,500.

The following map shows all of the tracts in Nantucket County, MA colored by their Median Household Income (Total).

Data provided by the [Census Bureau ACS 5-year Estimate](#)



Poverty by Age and Gender in Barnstable County, MA

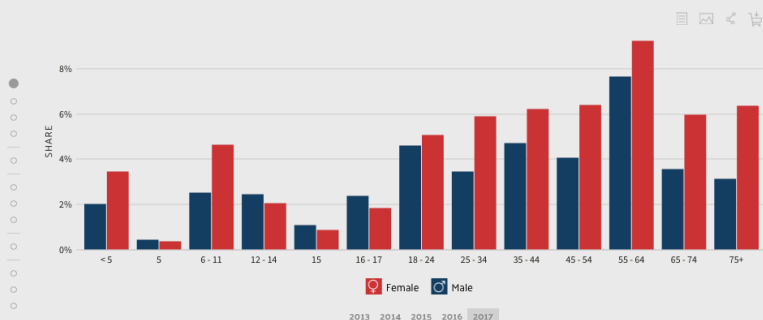
Females 55 - 64

LARGEST DEMOGRAPHIC LIVING IN POVERTY

7.49% of the population for whom poverty status is determined in Barnstable County, MA (15.8k out of 211k people) live below the poverty line, a number that is lower than the national average of 13.4%. The largest demographic living in poverty are Females 55 - 64, followed by Males 55 - 64 and then Females 45 - 54.

The Census Bureau uses a set of [money income thresholds](#) that vary by family size and composition to determine who classifies as impoverished. If a family's total income is less than the family's threshold than that family and every individual in it is considered to be living in poverty.

Data provided by the [Census Bureau ACS 5-year Estimate](#)



Poverty by Age and Gender in Nantucket County, MA

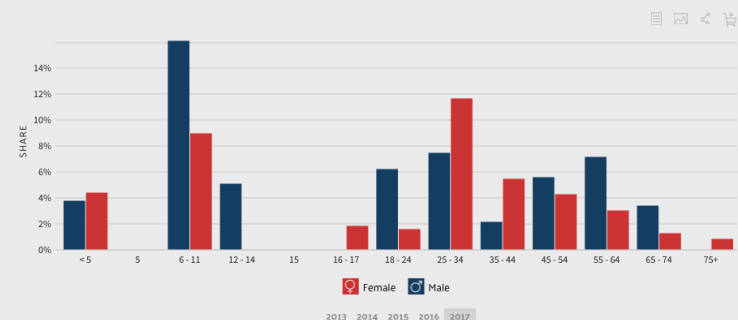
Males 6 - 11

LARGEST DEMOGRAPHIC LIVING IN POVERTY

11.2% of the population for whom poverty status is determined in Nantucket County, MA (1.21k out of 10.8k people) live below the poverty line, a number that is lower than the national average of 13.4%. The largest demographic living in poverty are Males 6 - 11, followed by Females 25 - 34 and then Females 6 - 11.

The Census Bureau uses a set of [money income thresholds](#) that vary by family size and composition to determine who classifies as impoverished. If a family's total income is less than the family's threshold than that family and every individual in it is considered to be living in poverty.

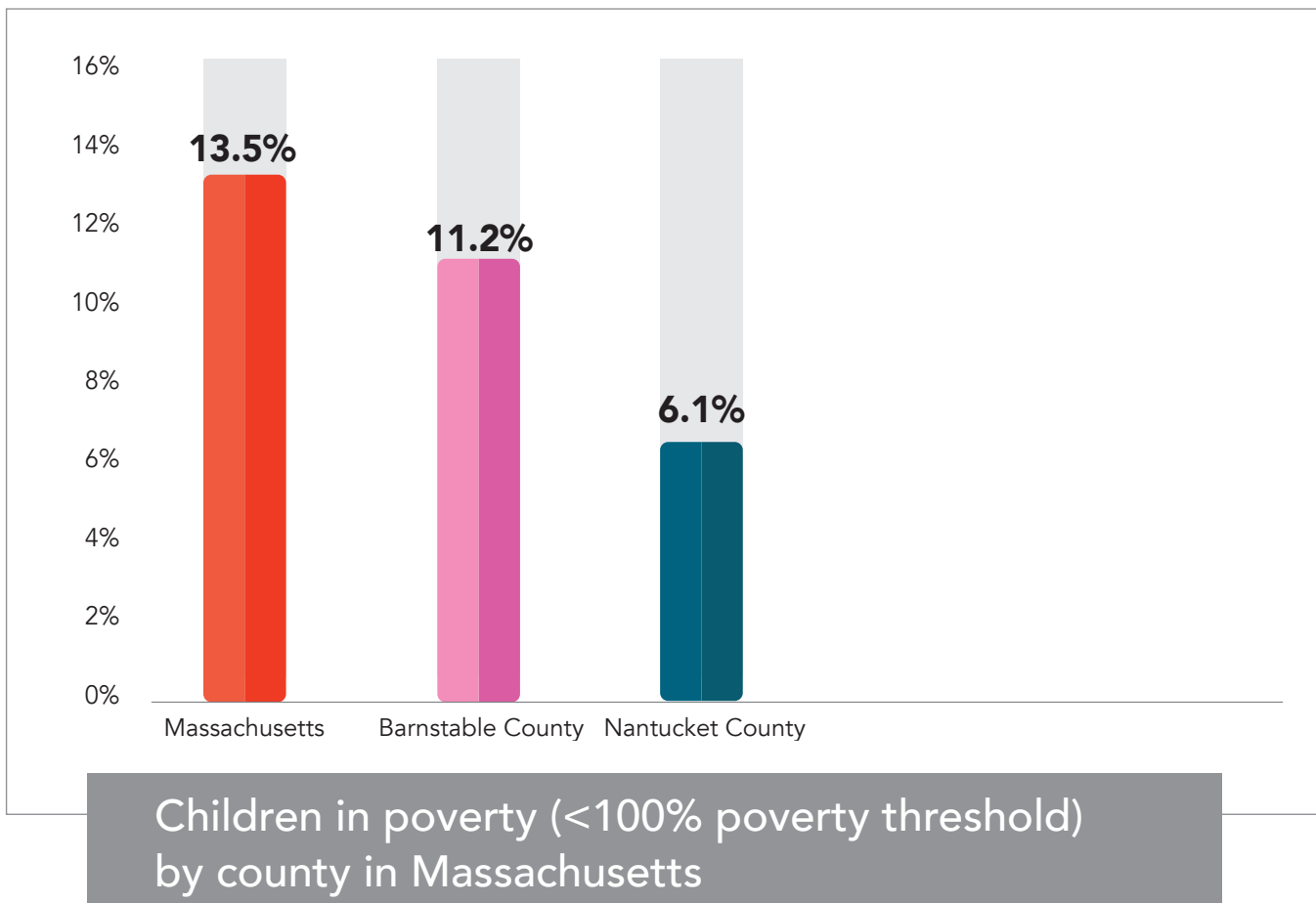
Data provided by the [Census Bureau ACS 5-year Estimate](#)



Children in poverty (<100% poverty threshold) by county in Massachusetts

Location	Data Type	2013	2014	2015	2016	2017
Massachusetts	Number	222,666	209,291	203,789	184,610	182,461
	Percent	16.2%	15.3%	14.9%	13.6%	13.5%
Barnstable County	Number	5,109	4,498	3,796	3,879	3,547
	Percent	14.9%	13.4%	11.5%	12.0%	11.2%
Nantucket County	Number	195	184	193	163	141
	Percent	9.4%	8.2%	8.5%	7.1%	6.1%

Source: kidscount.org



Source: kidscount.org

PLIGHT OF HEAD START ELIGIBLE INFANTS, TODDLERS, PRESCHOOL-AGE CHILDREN, AND EXPECTANT MOTHERS

The Cape Cod Health Care Assessment Report and Implementation Plan reports Barnstable County has 8,859 children between the ages of 0 and 4 years. (4.1%). This compares to 5.5% in all of Massachusetts.

The 2013-2017 Kids Count Data center shows 52% of Massachusetts young children below 200% poverty level are not in school (24,000 children). In the counties in and around the Service Area that figure ranges from 0-51%.



Population estimates by county

Location	Age group	Data Type	2013	2014	2015	2016	2017
Massachusetts	Under 18	Number	1,396,575	1,390,198	1,383,923	1,376,019	1,369,955
	Under 5	Number	364,731	364,552	364,111	361,580	360,588
	5 to 9	Number	380,750	376,302	373,696	372,184	370,299
	10 to 14	Number	399,785	398,556	394,807	391,730	390,350
	15 to 19	Number	461,115	459,176	457,924	456,805	454,957
	Total	Number	6,711,138	6,757,925	6,794,002	6,823,721	6,859,819
Barnstable County	Under 18	Number	34,725	34,117	33,467	32,842	32,333
	Under 5	Number	8,319	8,104	7,892	7,806	7,764
	5 to 9	Number	9,367	9,240	9,048	8,837	8,670
	10 to 14	Number	10,248	10,090	9,947	9,799	9,579
	15 to 19	Number	11,136	10,863	10,726	10,522	10,375
	Total	Number	214,566	214,279	213,773	213,440	213,444
Nantucket County	Under 18	Number	2,202	2,261	2,251	2,315	2,350
	Under 5	Number	690	672	664	714	729
	5 to 9	Number	643	678	651	656	665
	10 to 14	Number	562	587	611	608	634
	15 to 19	Number	482	487	494	510	502
	Total	Number	10,548	10,795	10,901	11,089	11,229

Population trends by county

Location	Age group	2014	2015	2016	2017
Barnstable County	Under 18	34,117	33,467	32,842	32,333
	Under 5	8,104	7,892	7,806	7,764
	5 to 9	9,240	9,048	8,837	8,670
	10 to 14	10,090	9,947	9,799	9,579
	15 to 19	10,863	10,726	10,522	10,375
	Under 18	2,261	2,251	2,315	2,350
Nantucket County	Under 5	672	664	714	729
	5 to 9	678	651	656	665
	10 to 14	587	611	608	634
	15 to 19	487	494	510	502

Source: kidscount.org

Subject	Total		Percent		Percent of specified language speakers							
					Speak English only of speak English "very well"		Percent speak English only of speak English "very well"		Speak English less than "very well"		Percent English less than "very well"	
	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Population 5 years and over	205,938	+/-41	(X)	(X)	200,209	+/-695	97.2%	+/-0.3	5,729	+/-694	2.8%	+/-0.3
Speak only English	189,003	+/-1,188	91.8%	+/-0.6	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Speak a language other than English	16,935	+/-1,187	8.2%	+/-0.6	11,206	+/-871	66.2%	+/-3.0	5,729	+/-694	33.8%	+/-3.0
SPEAK A LANGUAGE OTHER THAN ENGLISH												
Spanish	3,910	+/-501	1.9%	+/-0.2	2,336	+/-368	59.7%	+/-5.7	1,574	+/-310	40.3%	+/-5.7
5 to 17 years old	826	+/-263	0.4%	+/-0.1	620	+/-264	75.1%	+/-15.0	206	+/-117	24.9%	+/-15.0
18 to 64 years old	2,626	+/-316	1.3%	+/-0.2	1,367	+/-261	52.1%	+/-8.1	1,259	+/-267	47.9%	+/-8.1
65 years old and over	458	+/-127	0.2%	+/-0.1	349	+/-115	76.2%	+/-11.4	109	+/-56	23.8%	+/-11.4
Other Indo-European languages	10,517	+/-1,137	5.1%	+/-0.6	7,343	+/-811	69.8%	+/-4.0	3,174	+/-595	30.2%	+/-4.0
5 to 17 years old	1,586	+/-455	0.8%	+/-0.2	1,156	+/-268	72.9%	+/-14.4	430	+/-315	27.1%	+/-14.4
18 to 64 years old	6,631	+/-760	3.2%	+/-0.4	4,495	+/-603	67.8%	+/-4.7	2,136	+/-394	32.2%	+/-4.7
65 years old and over	2,300	+/-329	1.1%	+/-0.2	1,692	+/-266	73.6%	+/-5.6	608	+/-159	26.4%	+/-5.6
Asian and Pacific Island languages	1,531	+/-316	0.7%	+/-0.2	812	+/-223	53.0%	+/-12.0	719	+/-255	47.0%	+/-12.0
5 to 17 years old	170	+/-98	0.1%	+/-0.1	104	+/-74	61.2%	+/-22.9	66	+/-52	33.8%	+/-22.9
18 to 64 years old	1,184	+/-263	0.6%	+/-0.1	605	+/-197	51.1%	+/-14.0	579	+/-221	+/-48.9	+/-14.0
65 years old and over	177	+/-78	0.1%	+/-0.1	103	+/-68	58.2%	+/-27.0	74	+/-53	41.8%	+/-27.0
Other languages	977	+/-261	0.5%	+/-0.1	715	+/-196	73.2%	+/-13.0	262	+/-156	26.8%	+/-13.0
5 to 17 years old	20	+/-25	0.0%	+/-0.1	20	+/-25	100.0%	+/-68.8	0	+/-29	0.0%	+/-68.8
18 to 64 years old	836	+/-233	0.4%	+/-0.1	574	+/-168	68.7%	+/-14.8	262	+/-156	31.3%	+/-14.8
65 years old and over	121	+/-83	0.1%	+/-0.1	121	+/-83	100.0%	+/-24.7	0	+/-29	0.0%	+/-24.7

HOMELESSNESS IS A STATE-WIDE ISSUE

HOMELESS STUDENT PROGRAM DATA 2017-2018 SCHOOL DISTRICT DATA

1. The number of districts reporting homeless student data for the 2017-18 school year:

	Total # Districts in State	Total # Districts Reporting
Districts without Sub-grants	404	399
Districts with Subgrants	27	27

2. The number of homeless children and youth enrolled in Massachusetts's public schools during the 2017-18 school year, according to grade level:

Grade Level	Number of homeless children/ youth enrolled in districts without subgrants	Number of homeless children/ youth enrolled in districts with subgrants	Total
PK	145	479	624
K	542	1334	1876
1	586	1482	2068
2	589	1479	2068
3	571	1513	2084
4	521	1476	1997
5	508	1324	1832
6	520	1206	1726
7	454	1145	1599
8	454	1014	1468
9	571	1503	2074
10	402	1110	1512
11	439	1026	1465
12	505	1149	1654
UG	13	11	24
Total	6820	17251	24071

Last Updated: January 17, 2019

Source: doe.mass.edu

According to the Community Health Assessment:

Source: kidscount.org

42% of Barnstable County residents receive publicly-funded health insurance coverage compared to 32% of residents in MA overall, and 42% of residents receive social security payments compared to 28% in MA overall.

It is hard not to see Cape Cod as having the perfect storm for homelessness: high housing costs, low wages, high rates of addiction, and an extreme lack of available housing at the low end of the market. While there has been a big state response to homelessness on the Cape, we have made the problem even more difficult to solve because of the following: few areas zoned for multi-family rental housing, large lot zoning, lack of public wastewater infrastructure, development patterns that make public transportation difficult, and limited opportunities for good paying jobs.

HEALTH

96.8% of the population of Barnstable County, MA has health coverage, with 42.7% on employee plans, 16.5% on Medicaid, 20.6% on Medicare, 15.6% on non-group plans, and 1.47% on military or VA plans.

Per capita personal health care spending in the county of Barnstable County, MA was \$10,559 in 2014. This is a 2.78% increase from the previous year

(\$10,273).

Primary care physicians in Barnstable County, MA see 1002 patients per year on average, which represents a 0.199% decrease from the previous year (1004 patients). Compare this to dentists who see 992 patients per year, and mental health providers

who see 213 patients per year.

Comparing across all counties in the state, [Bristol County](#) has the highest prevalence of diabetes (11.4%). Additionally, [Bristol County](#) has the highest prevalence of adult obesity (29.1%)

94.5% of the population of Nantucket County, MA has health coverage, with 45.7% on employee plans, 13.7% on Medicaid, 10.4% on Medicare, 24.2% on non-group plans, and 0.543% on military or VA plans.

Per capita personal health care spending in the county of Nantucket County, MA was \$10,559 in 2014. This is a 2.78% increase from the previous year

(\$10,273).

Primary care physicians in Nantucket County, MA see 1821 patients per year on average, which represents a 0.663% increase from the previous year (1809 patients). Compare this to dentists who see 1223 patients per year, and mental health providers who

see 306 patients per year.

Comparing across all counties in the state, [Bristol County](#) has the highest prevalence of diabetes (11.4%). Additionally, [Bristol County](#) has the highest prevalence of adult obesity (29.1%)

Patient to Clinician Ratios in Barnstable County, MA

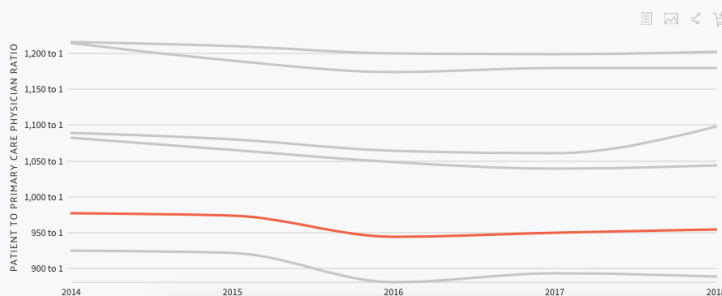
Patient to Primary Care Physician Ratio

1,002 to 1

PATIENT TO PRIMARY CARE PHYSICIAN RATIO

Primary care physicians in Barnstable County, MA see an average of 1,002 patients per year. This represents a 0.199% decrease from the previous year (1,004 patients).

The following chart shows how the number of patients seen by primary care physicians has been changing over time in Barnstable County, MA in comparison to neighboring states.

Data provided by the [County Health Rankings & Roadmaps County Health Rankings](#).

Patient to Clinician Ratios in Nantucket County, MA

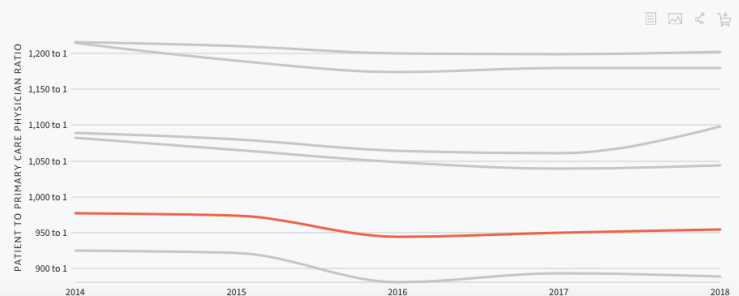
Patient to Primary Care Physician Ratio

1,821 to 1

PATIENT TO PRIMARY CARE PHYSICIAN RATIO

Primary care physicians in Nantucket County, MA see an average of 1,821 patients per year. This represents a 0.663% increase from the previous year (1,809 patients).

The following chart shows how the number of patients seen by primary care physicians has been changing over time in Nantucket County, MA in comparison to neighboring states.

Data provided by the [County Health Rankings & Roadmaps County Health Rankings](#).

Source: datausa.com

DENTAL CARE

Patient to Clinician Ratios

Patient to Dentist Ratio

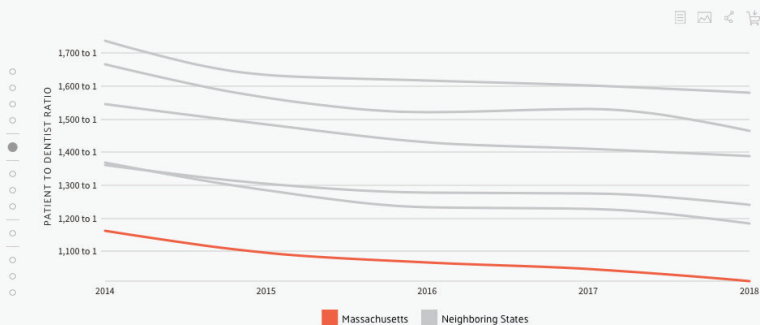
992 to 1

PATIENT TO DENTIST RATIO

Dentists in Barnstable County, MA see an average of 992 patients per year. This represents a 3.69% decrease from the previous year (1,030 patients).

The following chart shows how the number of patients seen by dentists has been changing over time in Barnstable County, MA in comparison to neighboring states.

Data provided by the County Health Rankings & Roadmaps County Health Rankings



Patient to Clinician Ratios

Patient to Dentist Ratio

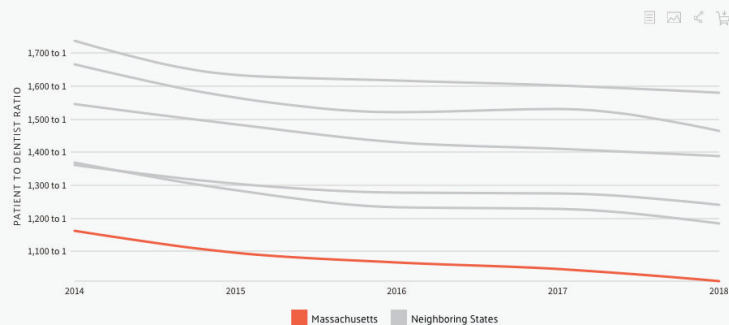
992 to 1

PATIENT TO DENTIST RATIO

Dentists in Barnstable County, MA see an average of 992 patients per year. This represents a 3.69% decrease from the previous year (1,030 patients).

The following chart shows how the number of patients seen by dentists has been changing over time in Barnstable County, MA in comparison to neighboring states.

Data provided by the County Health Rankings & Roadmaps County Health Rankings



MENTAL HEALTH CARE

Patient to Clinician Ratios

Patient to Mental Health Provider Ratio

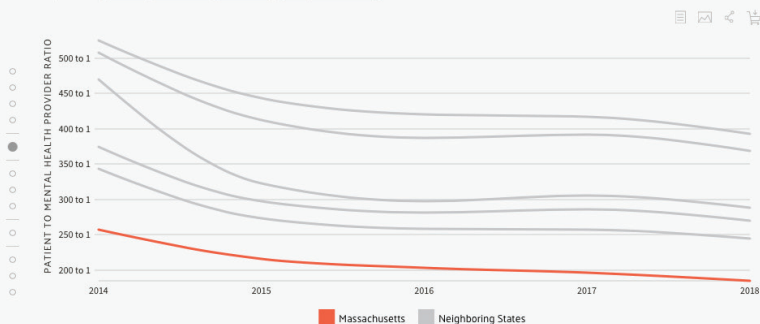
213 to 1

PATIENT TO MENTAL HEALTH PROVIDER RATIO

Mental health providers in Barnstable County, MA see an average of 213 patients per year. This represents a 5.75% decrease from the previous year (226 patients).

The following chart shows how the number of patients seen by mental health providers has been changing over time in Barnstable County, MA in comparison to neighboring states.

Data provided by the County Health Rankings & Roadmaps County Health Rankings



Patient to Clinician Ratios

Patient to Mental Health Provider Ratio

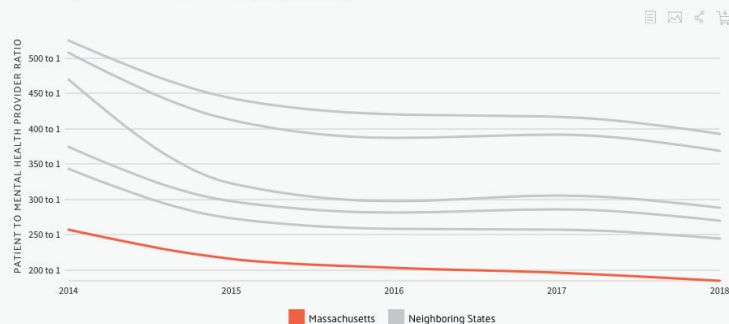
213 to 1

PATIENT TO MENTAL HEALTH PROVIDER RATIO

Mental health providers in Barnstable County, MA see an average of 213 patients per year. This represents a 5.75% decrease from the previous year (226 patients).

The following chart shows how the number of patients seen by mental health providers has been changing over time in Barnstable County, MA in comparison to neighboring states.

Data provided by the County Health Rankings & Roadmaps County Health Rankings



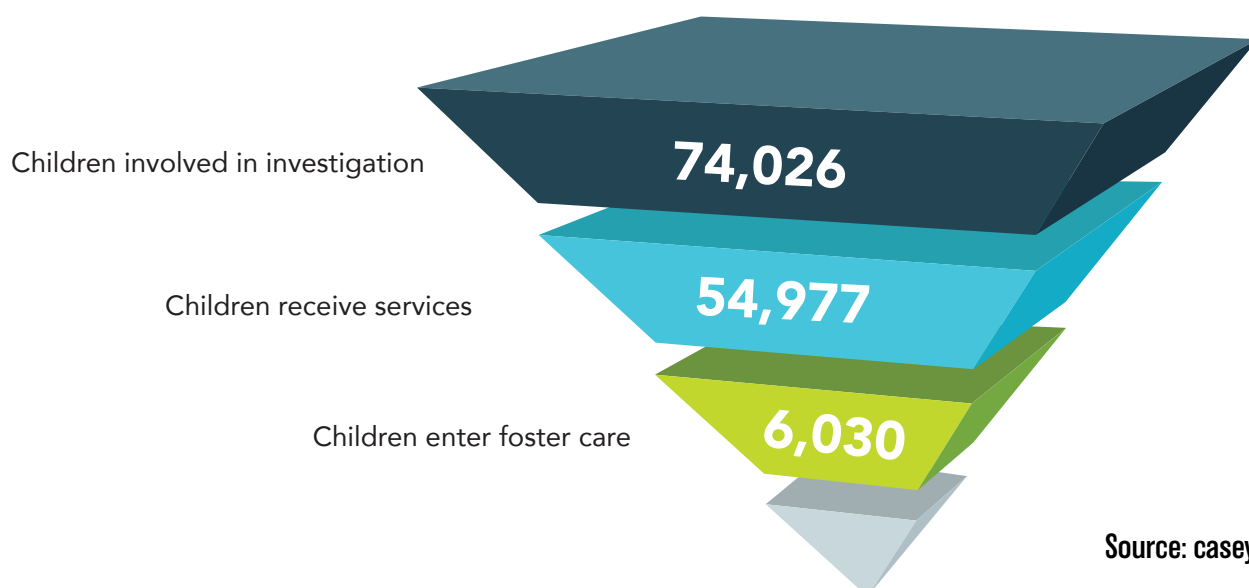
Source: datausa.com

commute by Drove Alone. Car ownership in Nantucket County, MA is approximately the same as the national average, with an average of 2 cars per household.

INCIDENCE OF CHILD ABUSE AND NEGLECT

Massachusetts

Every year approximately:



DCF Annual Progress & Service Report June 30, 2017 “There are currently more than 11,000 children in foster care across Massachusetts “and “Foster and adoptive parents are vital to our efforts to keep children safe and, due to the opioid epidemic, they are as necessary as ever. “

In Barnstable County there are currently 950 children under the age of 18 in Foster Care.

www.mass.gov

INCIDENCE OF DRUG AND ALCOHOL ABUSE

Department of Public Health data indicates a 450% increase in the annual rate of unintentional opioid overdose deaths from 2000 to 2015 in Barnstable County. A total of 406 deaths occurred between 2000 and 2015, with the significant increase from 2012 to 2015 contributing to 40% of total deaths since 2000. Annual rates continue to increase with Barnstable County experiencing 53 deaths in 2014 and 66 in 2015, significantly more than the 12 confirmed opioid overdose deaths in 2000.³⁰ Data from MA DPH on admissions to state-funded substance abuse programs were also telling. In 2013, MA Bureau of Substance Abuse Services data revealed that Barnstable County (2,214) had a higher rate per 100,000 persons of admissions to MA DPH-funded substance abuse treatment programs than MA (1,591) overall. Treatment admission rates for heroin nearly doubled from 2010 (430) to 2013 (820), specifically amongst residents ages 15-24 years old.

Massachusetts Innovations to Address the Opioid Epidemic from the Addiction Policy Forum Report Feb. 2019

“INNOVATIONS ADDRESSING MOMS AND BABIES

As the opioid epidemic has worsened, the impact on pregnant women and infants has increased, along with the number of cases of neonatal abstinence syndrome (NAS), when an infant becomes dependent on opioids or other drugs used by the mother during pregnancy.

The innovations featured in this section hold promise improving care for moms and babies impacted by substance use disorder. Further development, introduction, and scale-up of these creative solutions will improve health of pregnant and postpartum women and their babies.”

(Source: addictionpolicy.org)

“To The Moon & Back” support group created Oct. 2017 supports Massachusetts “ children born with substance exposure and their caregivers through support, education and advocacy” Pg. 6

To the Moon and Back offers helping hand to caregivers of children born with substance exposure

(Source: plymouth.wickedlocal.com December 5, 2017)

INFANT AND CHILD DEATH RATES

The United Health Foundation’s 2019 Annual Report on Massachusetts (using 2018 data) reports Massachusetts infant mortality decreased 20% in the past 10 years. The Infant Mortality Rate decreased state-wide from 5.1 to 4.1 per 1000,000.

(Source: americashealthrankings.org)



Number of Opioid-Related Overdose Deaths, All Intents by County, MA Residents: 2010-2018

County	2010	2011	2012	2013	2014	2015	2016	2017	2018	Total 2010-2018
Barnstable	20	19	24	43	53	66	81	67	71	444
Berkshire	4	9	18	22	29	33	36	27	40	218
Bristol	79	82	95	116	146	168	243	243	220	1,392
Dukes	0	0	0	1	5	7	3	2	4	22
Essex	51	57	94	119	209	231	273	311	278	1,623
Franklin	6	6	8	10	11	18	14	9	22	104
Hampden	48	45	59	69	64	96	129	113	208	831
Hampshire	12	10	11	30	26	16	36	28	36	205
Middlesex	94	130	122	155	273	333	402	356	325	2,190
Nantucket	1	0	0	1	1	1	2	3	1	10
Norfolk	60	64	71	83	127	161	212	167	170	1,115
Plymouth	41	67	57	86	110	168	188	206	153	1,076
Suffolk	64	85	91	111	145	195	239	254	217	1,401
Worcester	80	82	91	115	162	216	242	264	283	1,535
Total Deaths	560	656	742	961	1,362	1,710	2,100	2,050	2,033	12,174

Massachusetts Department of Public Health
POSTED: MAY 2019

Low Birth Weight Babies by City Location

Location	Data Type	2007	2013	2014	2015	2016
Massachusetts	Number	6,147	5,495	5,394	5,321	5,341
	Percent	7.90%	7.70%	7.50%	7.40%	7.50%
Barnstable	Number	32	33	31	30	31
	Percent	6.70%	8.30%	7.60%	7.90%	7.30%
Nantucket	Number	12	NA	5	12	15
	Percent	6.50%	NA	3.70%	7.80%	8.60%

Source: kidscount.org

Teen pregnancy rates

Nantucket 12.518/1000, Barnstable 8.834/1000,
(Source: usnews.com)

Women receiving prenatal healthcare

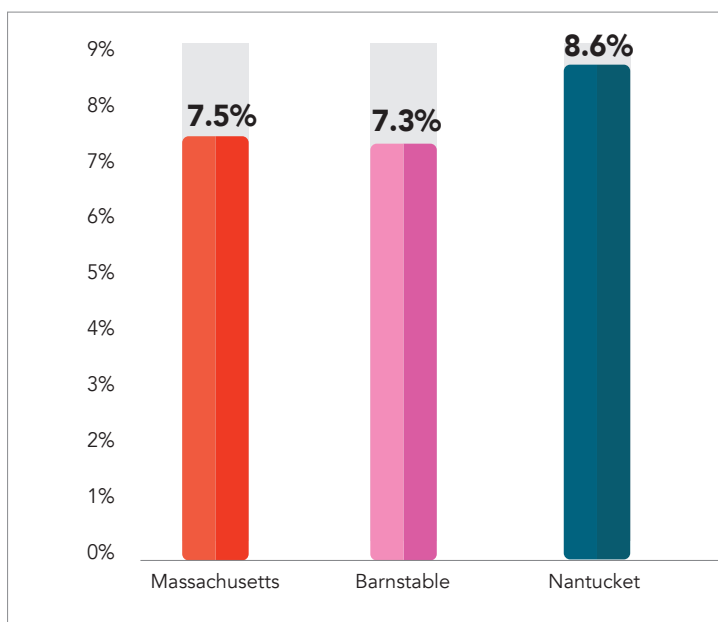
2019 Annual Report Americas Health Ranking finds 95.8% women in Massachusetts had prenatal care before their 3rd trimester.

(Source: americashealthrankings.org)

Persons without health insurance, under age 65 years, percent

Barnstable: 3.5%, Nantucket: 4.4%,
Massachusetts: 10.2%

(Source: towncharts.com)



Nantucket

6.16/1000

Barnstable

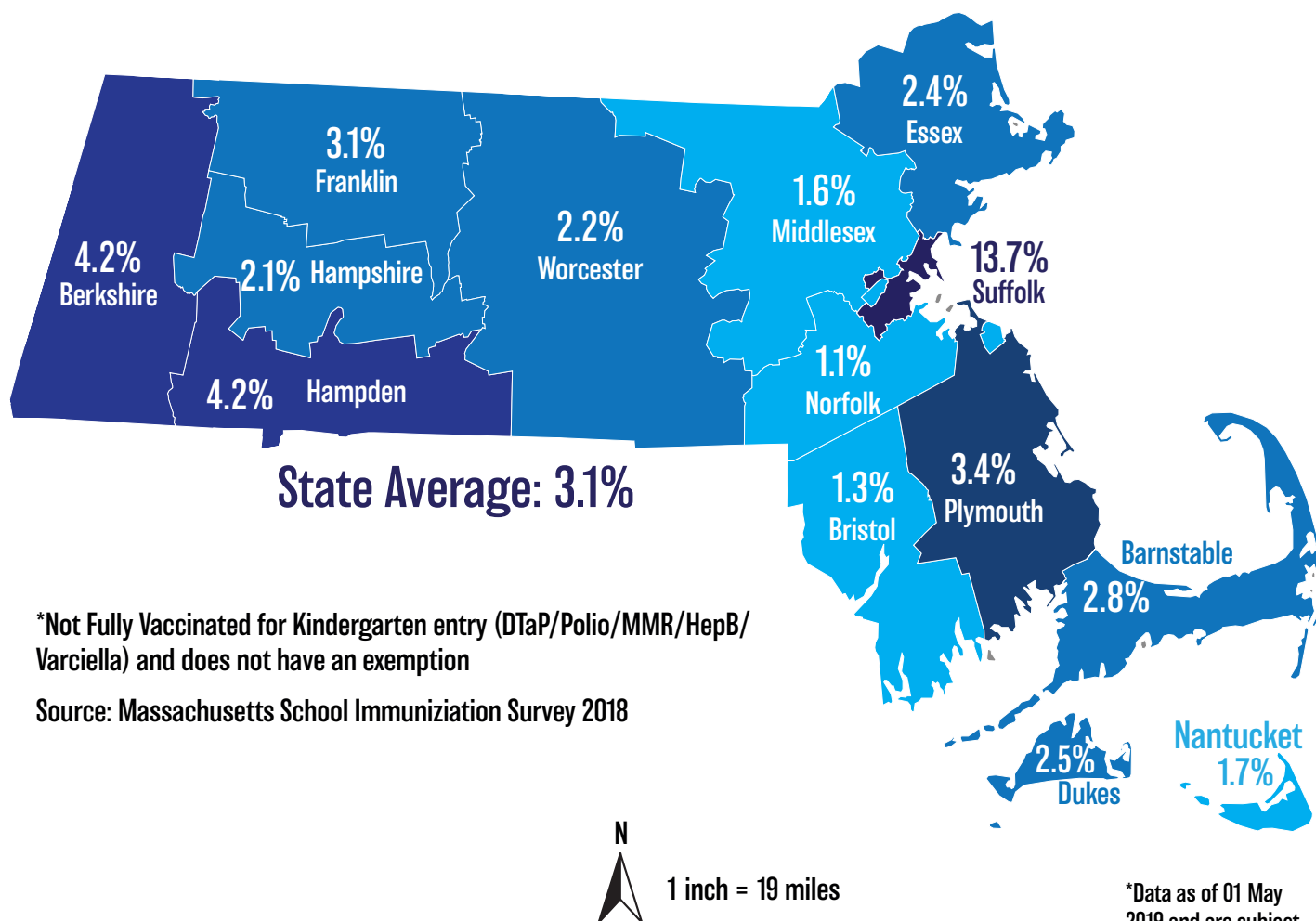
6.16/1000

Number of low-birth weight babies;
Low birth weight babies
by city and town
("County Subdivision") in
Massachusetts

Source: towncharts.com

IMMUNIZATION LEVELS AMONG SCHOOL CHILDREN

Kindergarten Students not meeting school requirements* by
Massachusetts County, 2018



Bureau of Infectious Disease and Laboratory Sciences, Immunization Division

*Data as of 01 May 2019 and are subject to change.

Health care priorities

1) Cancer

2) Heart disease

3) Alzheimer's disease and Dementia

4) Hepatitis C and HIV/AIDS

5) Tick-borne diseases

Source: Cape Cod Healthcare Community Health Needs Assessment Report and Implementation Plan 2017-2019 capecodhealth.org)

CCH & FH FY2017-FY2019 Health Priorities

Chronic & Infectious Disease

- Cancer & Heart Disease
- Alzheimer's & Dementia
- Hepatitis & HIV/AIDS
- Tick-Borne Diseases

Behavioral Health

- Mental Health
- Substance Use Disorders
- Co-occurring Disorders & Comorbidities

Access to Care

- Provider Access
- Insurance Coverage
- Financial Barriers
- Language & Health Literacy

Disease Prevention & Wellness

- Health Screenings
- Physical Activity & Nutrition
- Elder Health
- Caregiver Support

Unsafe drinking water exposure:

Barnstable 11.63%, Nantucket 92.93%, 20.39%,

Center on Budget & Policy Priorities (CBPP) reports 56% of Massachusetts families receive SNAP (Supplemental Nutrition Assistance Program)

(Source: cbpp.org)

Food stamp registered families in the four Massachusetts counties (Barnstable, Nantucket,) based on zip codes total 9,048.
(Source: mass.gov)

Barnstable and Nantucket participation in Women, Infants and Children (WIC) during 2018 was 108,593

(Source: fns-prod.azureedge.net)

Overcrowding and Housing Availability

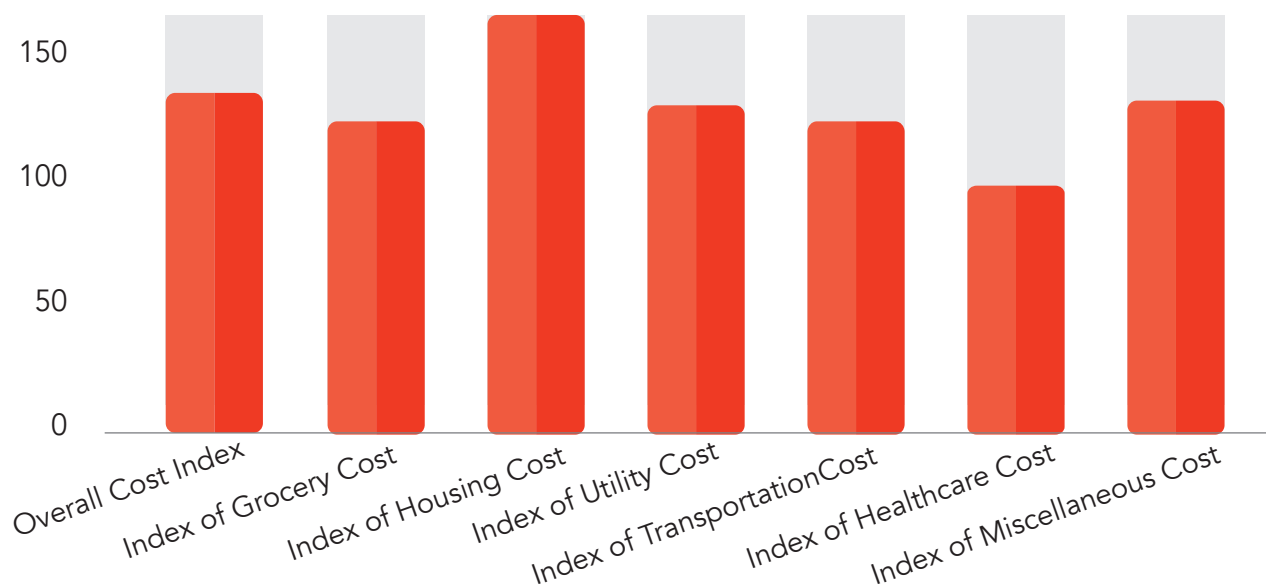
Source: capecodhealth.org

Overcrowded Households: Barnstable= 3.83%,
Nantucket= .84%,

Affordable Housing Shortfall: Barnstable= -66.8,
Nantucket= -59,

Vacant Houses: Barnstable= 1.89%, Nantucket= 1.25%,
(Source: usnews.com)

COST OF LIVING



Barnstable County vs 100 = U.S.Average

(Source: towncharts.com)
(from 2018 Census data)

HOUSING BY COUNTY



	Nantucket	Barnstable
Housing		
Housing units, July 1, 2018, (V2018)	12,514	164,321
Owner-occupied housing unit rate, 2013-2017	64.8%	78.8%
Median value of owner-occupied housing units, 2013-2017	\$995,900	\$375,000
Median selected monthly owner costs-with a mortgage, 2013-2017	\$2,783	\$1,877
Median selected monthly owner costs-without a mortgage, 2013-2017	\$861	\$676
Median gross rent, 2013-2017	\$1,689	\$1,199
Building permits, 2018	169	1,005
Family & Living Arrangements		
Households, 2013-2017	3,761	95,011
Persons per household, 2013-2017	2.83	2.22
Living in same house 1 year ago, percent of persons age 1 year+ 2013-2017	88.1%	90.8%
Language other than English spoken at home, percent of persons age 5 years+, 2013-2017	12.5%	8.2%

CHILDREN ENROLLED IN PRESCHOOL

Nantucket

57.37%

Barnstable

61.81%

CHILDREN AGES 3 AND 4 ENROLLED IN PRESCHOOL BY CITY AND TOWN ("COUNTY SUBDIVISION") IN MASSACHUSETTS

Location	Data Type	2013 - 2017
Massachusetts	Number	88,763
	Percent	59%
Barnstable County	Number	481
	Percent	68%
Nantucket Island	Number	97
	Percent	49%

Source: kidscount.org

HIGH COST OF CARE IMPACTS FAMILIES STATE-WIDE

In Massachusetts, single parents pay 70.3% of their income for infant center care. Married parents of 2 children living at the poverty line pay 142.9% of their household income for center-based childcare. The cost of infant care in Massachusetts is more than the annual cost of college tuition at a four-year college.

Massachusetts Child Care Center annual costs for infant care was \$20,415 and for preschool was \$35,151. In home care cost \$12,750 for infants annually and \$24,816 for preschool.

<https://usa.childcareaware.org/advocacy-public-policy/resources/research/costofcare/>



Vehicle ownership

Households without a vehicle

Nantucket 8%

Barnstable 6%

Availability of public transportation services

The Chamber of commerce reports Cape Cod has four (4) bus companies and the Hyannis Transportation Center. The RTA bus serves Barnstable, Hyannis, Falmouth, Woods Hole and Orleans.

The Cape Cod Rail provides train service to Boston. Cape Cod also has the Barnstable Municipal Airport with air service off the Cape. Rental cars, taxis, and airport shuttles are available from the Hyannis Transportation Center.

(Source: capecodchamber.org)

organizations such as the Cape Cod Regional Transit Authority (CCRTA) and the Cape Cod Commission who are leading regional efforts to improve transportation in our region. Cape Cod Healthcare has expanded access to care in 88 locations across Cape Cod in an effort to address transportation challenges of residents.

Housing and Homelessness: Community input also identified the challenge of housing affordability and homelessness as barriers to accessing healthcare services. Organizations such as Housing Assistance Corporation, Duffy Health Center, Lower Cape Outreach Council, Barnstable County Regional Network to End Homelessness, Homeless Not Hopeless, CHAMP Homes, and regional/town housing authorities lead efforts to help eliminate housing barriers in the service area. Cape Cod Hospital and Falmouth Hospital serve homeless individuals/families in need of acute, primary, specialty, and behavioral health services.

Employment Status: Experiencing seasonal or chronic unemployment was identified as a barrier to obtaining healthcare. The skills needed to solve systemic employment issues are better aligned with organizations such as Career Opportunities and Job Training and Employment Corporation. Cape Cod Healthcare, Cape Cod Hospital and Falmouth Hospital have longstanding and effective workforce development partnerships across the community to encourage training and education in the allied health fields.

(Source: capecodhealth.org)

Computer and Internet Use

Households with a computer

Barnstable= 90.5%, Nantucket= 95.5%,

Transportation: While transportation was identified as a barrier to obtaining health care services, solving systemic transportation issues requires the skills of



Sample of Organizations serving low-income, medically underserved or vulnerable populations:

Barnstable Public School System	Homeless Prevention Council
Boys & Girls Club of Cape Cod	Housing Assistance Corporation
Cape Cod Center for Women	Independence House
Cape Cod Council of Churches	Justice Resource Institute
Cape Cod WIC	Lyme Awareness of Cape Cod
Cape Cod Neighborhood Support Coalition	Outer Cape Women Infants and Children (WIC)
Child and Family Services	Mother and Infant Recovery Network
Coalition for Children	National Alliance on Mental Illness Cape Cod
Community Action Committee of Cape Cod & the Islands	Samaritans on Cape Cod and the Islands
Children's Cove	Sandpiper Nursery School
Community Development Partnership	Sandwich Public School System
Elder Services of Cape Cod & the Islands	SHINE (Serving Health Information Needs of Everyone)
Falmouth Public School System	Sight Loss Services
Falmouth Service Center	Town of Falmouth Council on Aging
Falmouth Together We Can	Town of Mashpee Council on Aging
Falmouth Volunteers in Public Schools	Town of Provincetown Council on Aging
The Family Pantry of Cape Cod	Town of Sandwich Council on Aging
Glenna Kohl Fund for Hope	Town of Truro Council on Aging
Health Imperatives	WE CAN
Healthy Living Cape Cod	YMCA of Cape Cod
Helping Our Women	

Disability Resources as noted by the O'Neill Center for Student Access and Support on Cape Cod

ADD/ADHD

- ADHD Boston
- CHADD: The National Resource on ADHD

Autism Spectrum Disorder

- Asperger/Autism Network
- Autism Speaks Massachusetts
- The ARC of Massachusetts Autism Resources
- Spectrum Scholars Program at the University of Delaware

Career

- Job Accommodation Network (JAN)
- Working Without Limits
- The ARC of Massachusetts: Careers

General Information and Resources

- Easter Seals Massachusetts Disability Services
- Federal Student Aid
- Independent Living
- Massachusetts Rehabilitation Commission (MA Rehab)
- New England Association on Higher Education and Disability (AHEAD)
- Social Security Disability and SSI Disability

Hearing

- Massachusetts Commission for Deaf and Hard of Hearing
- Cape Cod and Islands D.E.A.F., Inc.

Laws

- Americans with Disabilities Act
- Office of Civil Rights

Learning Disabilities

- Learning Disability Massachusetts Guide
- Olmstead Rights: Massachusetts Disability Resources and Advocacy Organizations

Mental Health

- Crisis and Life Management - the CALM team at CCCC
- Massachusetts Department of Mental Health
- Massachusetts National Alliance on Mental Illness
- Psychology Today: Support Groups

Mobility

- Massachusetts Mass Mobility Health and Human Services
- Cape Cod Regional Transit Authority

Neurological

- Brain Injury and Statewide Specialized Community Services
- Brain Injury Association of Massachusetts

Vision

- Bookshare
- Learning Ally
- Massachusetts Assistive Technology Loan Program
- Massachusetts Association for the Blind Community

Services

- Massachusetts Commission for the Blind

<https://www.capecod.edu/disability/resources/index.html>

FOCUS GROUP THEMES

256

Community providers, stakeholders and families were surveyed with 256 respondents across all categories.

Survey responses were consistent with both focus group responses and secondary data research.

For the most part those surveyed are satisfied to highly satisfied with the types of child care services available, (with the exception of infant care opportunities) the hours of operation and the location of services.

Respondents also indicated high satisfaction with the quality of services being provided, the frequency and quality of communication with providers and the scope of services offered.

Challenges and barriers that were consistently identified in both survey results and focus group discussions included:

- Lack of public transportation
- Access to care including Mental Health & Pediatric care
- Affordability of care
- Aging population
- Affordable and secure housing
- Availability of affordable rental properties
- Seasonal workers and visitors influencing political and economic issues
- Homelessness
- Qualified labor pool including issues with:
 - Recruitment
 - Training Retention
- Grandparents raising children
- Opioid crisis
- Lack of Infant Care



Out migration of 24-40 years olds;

non-replaced out migration

Immigrant growth : Jamaican, Brazilian, El Salvadoran



2nd homeowners,

low rental market for year round residents; high cost of rental market & impact on housing; impact of Airbnb; underemployed; seasonal workforce

5 Year Olds are in concentrations of lower income pockets of poverty across the Cape.

Seniors are more broadly spread across the Cape

SIGNIFICANT NUMBER OF ELIGIBLE INCOME CHILDREN BEING RAISED BY GRANDPARENTS





Homelessness - housing crisis & access to services; “unsuitably housed”

Hard to retain employees;

high cost of living vs low wages; unskilled labor
- “You get what you pay for”; missed opportunities of economic development
(Challenges for growth: Waste water; Open Cape; housing)



Economic Trends

- diminishing of the middle class; self-identification as “middle class”; “squeeze”

of middle class as we know it. Many Families Living paycheck to paycheck.

N.FALMOUTH FOCUS GROUP

- **Geographic isolation.** Eg. Young people leave the cape; **Can’t afford to live here** (Housing), **Need for affordable daycare; Lack of adequate staff** for daycare service. Eg. Teacher CERT program @ Harwich Tech H.S. closed last year. Need for **off-hour** childcare.

- Grandparents raising grandchildren has increased due to parental **substance use**.

- **Lack of Foster care**

- **Lack of Sufficient & Convenient public transit**, such that people can access services in a timely manner

- **Suppression of Undocumented persons requesting services.**

- Climate of fear impacting children (Documented; or not)

Stressors on working families

- **Lack of Mental health providers** for children on cape. Long wait times for services.
 - Importance of supports for Parents & Children via Head Start.
 - Issue of Fragmentation of care, lack of continuity of care for children
- **Disability profiles** (for children) are shifting-due to opioid/subst use crisis. Eg. behaviors/communications, issues, even at early ages, are increasing. Has the effect of burning out/chasing off staff.

Business incubation; For white-collar Jobs working remotely is an area of development opportunity. This does not address issues that service sector/trades people face with regard to alleviating housing and cost of living issues.

- Perhaps offer career development for trades/ services staff.
- Head start directors have, by default, had to step into assist families to access services, function as **navigators**

FALSE SENSE OF WHO LIVES HERE

Historic employment:
cranberries, fishing



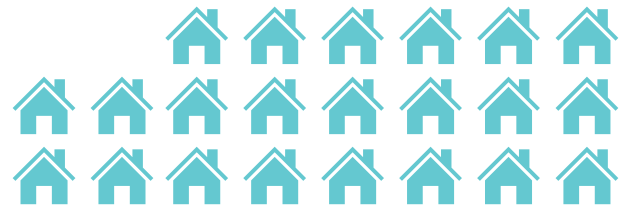
New Employment
Blue Collar
needing affordable
Local Housing



Employing High Quality Early Childhood Teachers

Transient Population -
housing, rentals,
families living in
camp grounds. . .

Affordable housing turning into mega homes



GRANDPARENTS ARE NOW PARENTING DUE TO DRUG CRISIS



Foster care not enough



Lack of NUTRITION

Families do not want to use services (pride)

Lack of PUBLIC TRANSPORTATION



Undocumented families reluctant to coming enroll in services

Do not use services do not want to be identified ect.



CHILDREN STRUGGLING DUE TO LANGUAGE BARRIER

Women's Shelters

due to abuse / / Young Parents do not know how to Parent, brought up by drug/alcohol use

Limited amount of
Mental Health Services
Lack of Counselors



JRI-Justice
Resource Institute
for services. . .
GOSNOLD-



Child on Child sexual activity,
do not have resources to address issues

Fragmented
continuity
of care

EMPLOYMENT/CAREER ON CAPE, ONE PARENT OFF CAPE.. WORKING

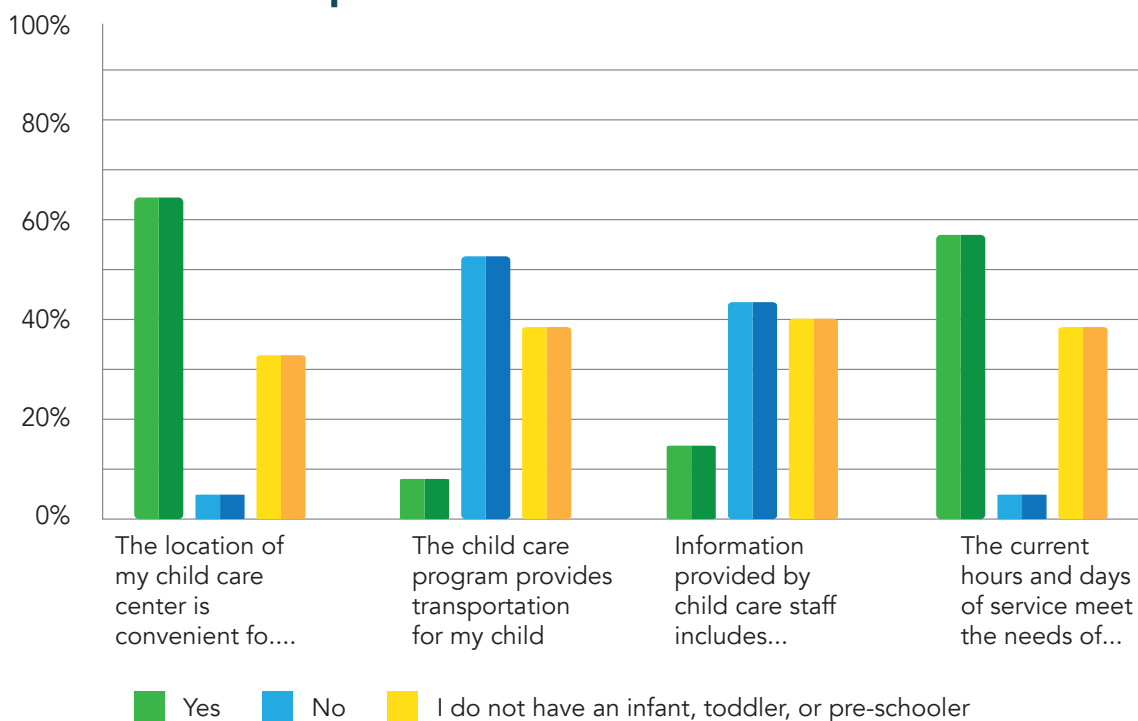
Behaviors of children
Safety in classrooms



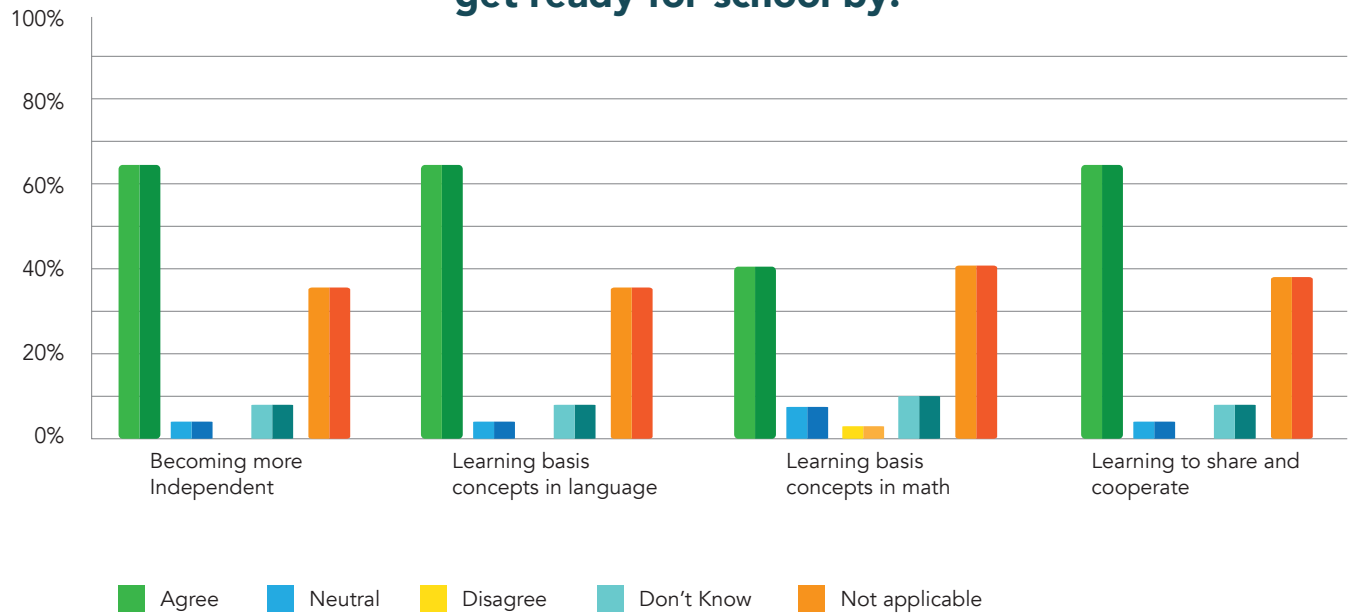
SURVEY DATA



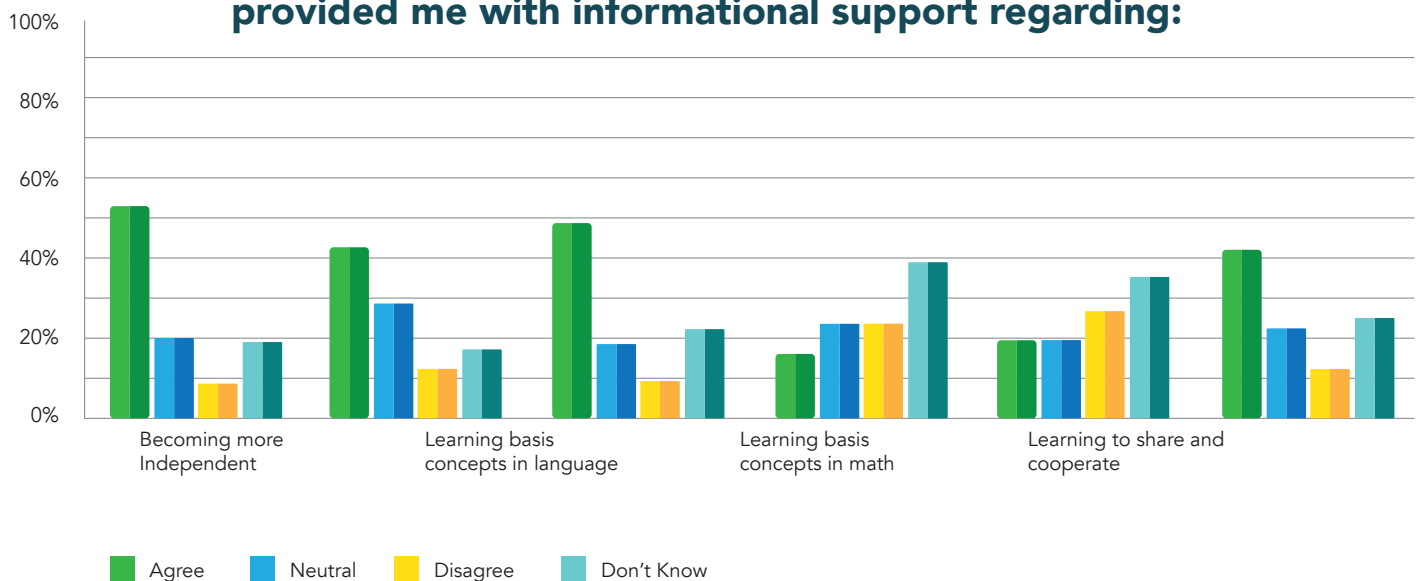
If you have an infant, toddler, or pre-schooler, please check YES or NO



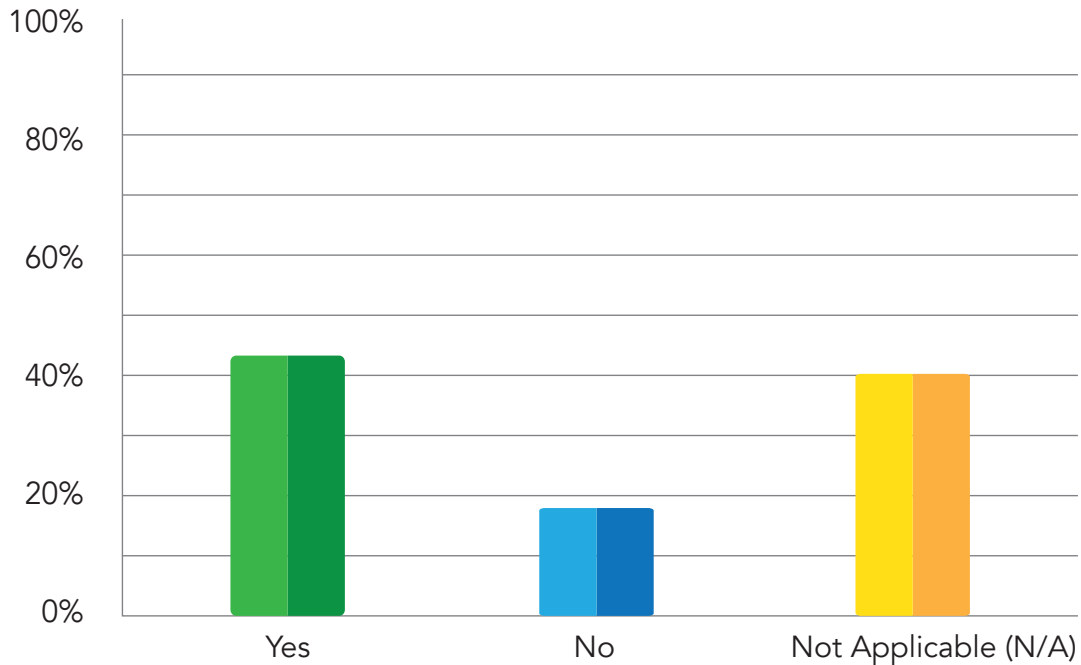
My infant, toddler, or pre-school program has helped my child get ready for school by:



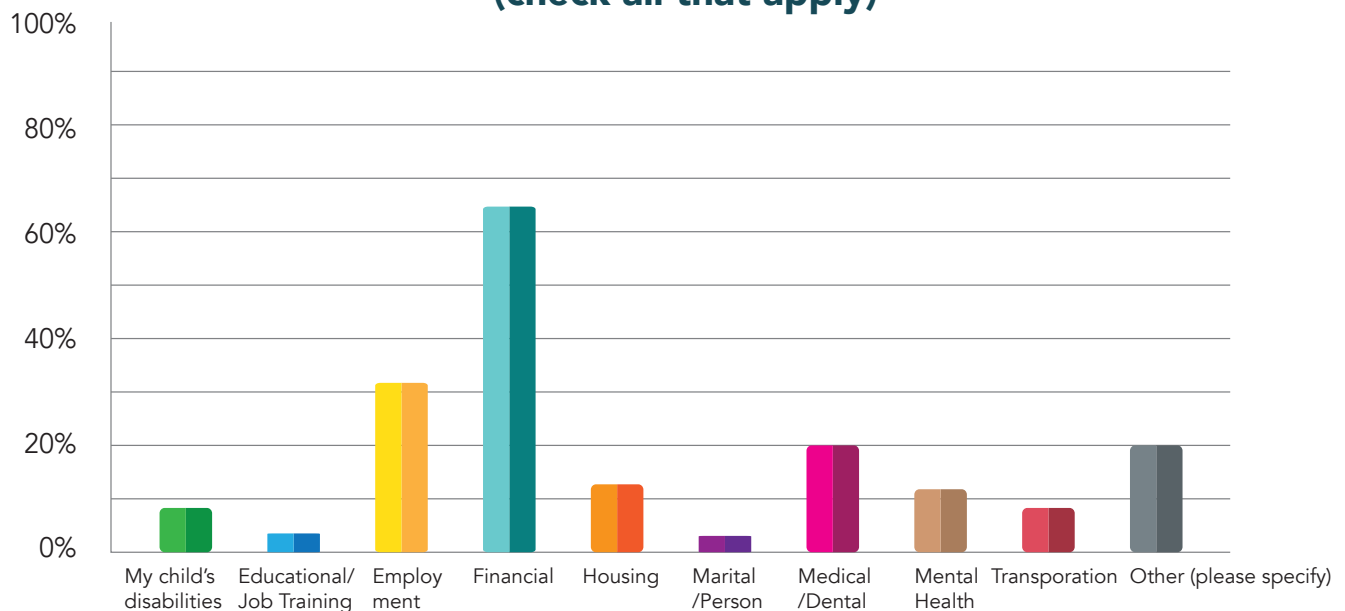
My child's after school / preschool program has provided me with informational support regarding:



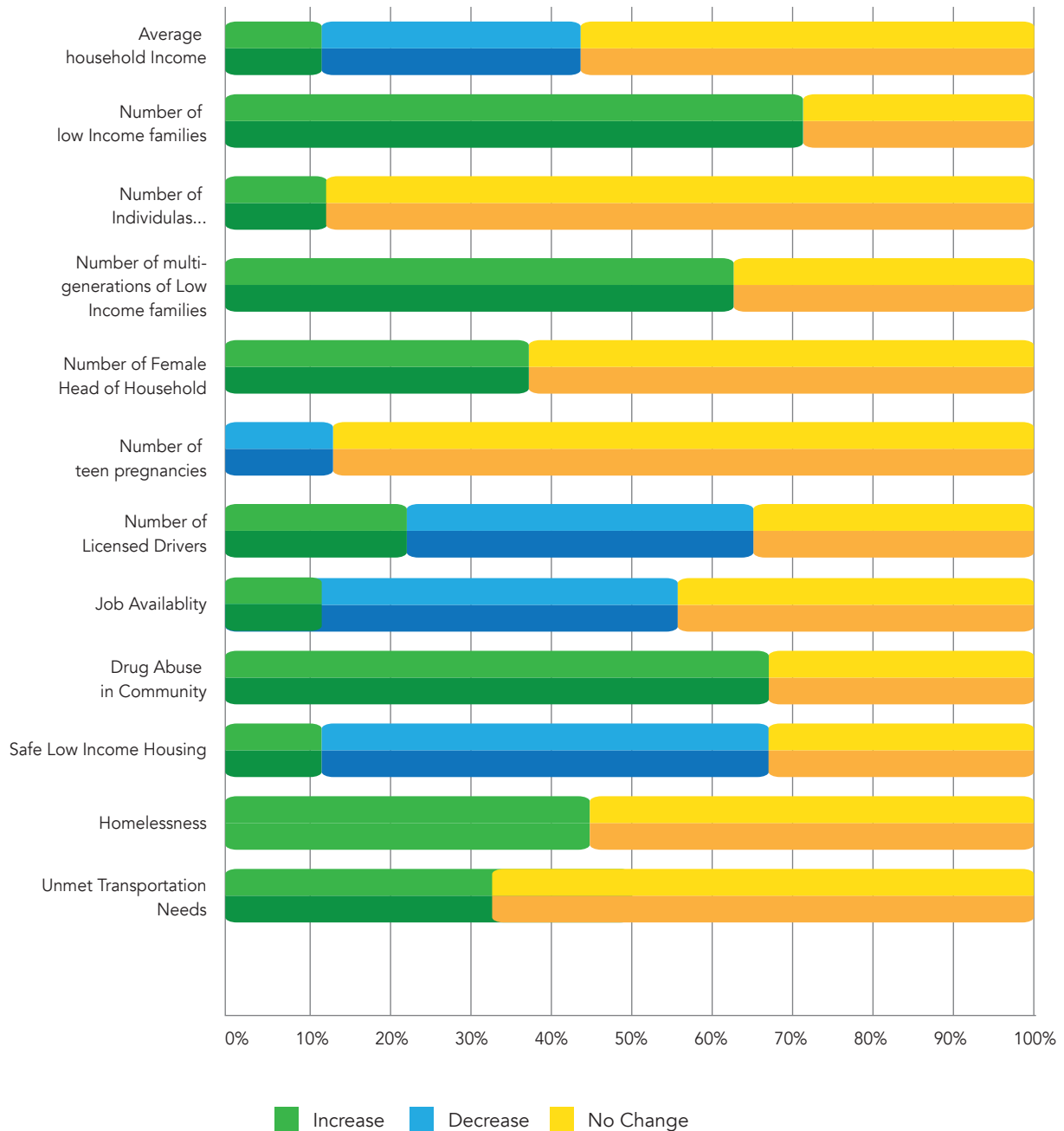
There was turnover in the people working with my child and family this year (teachers, assistant teachers, bus driver, family service providers).



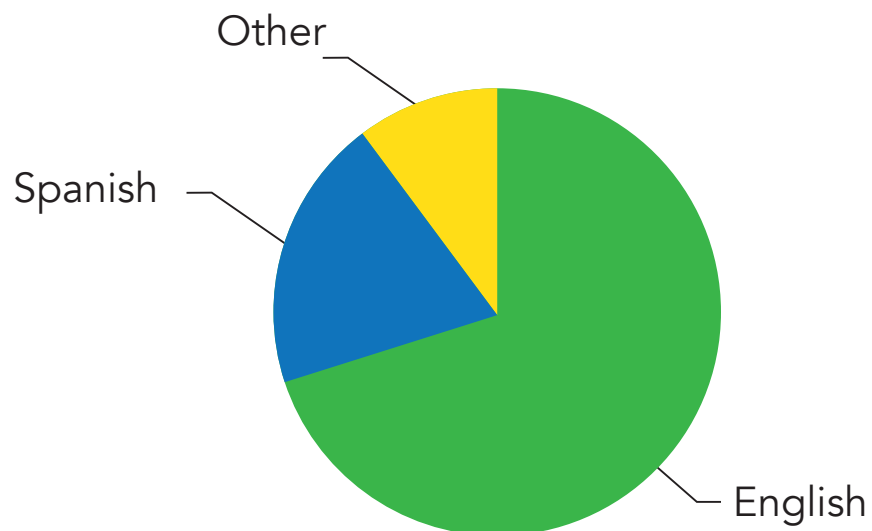
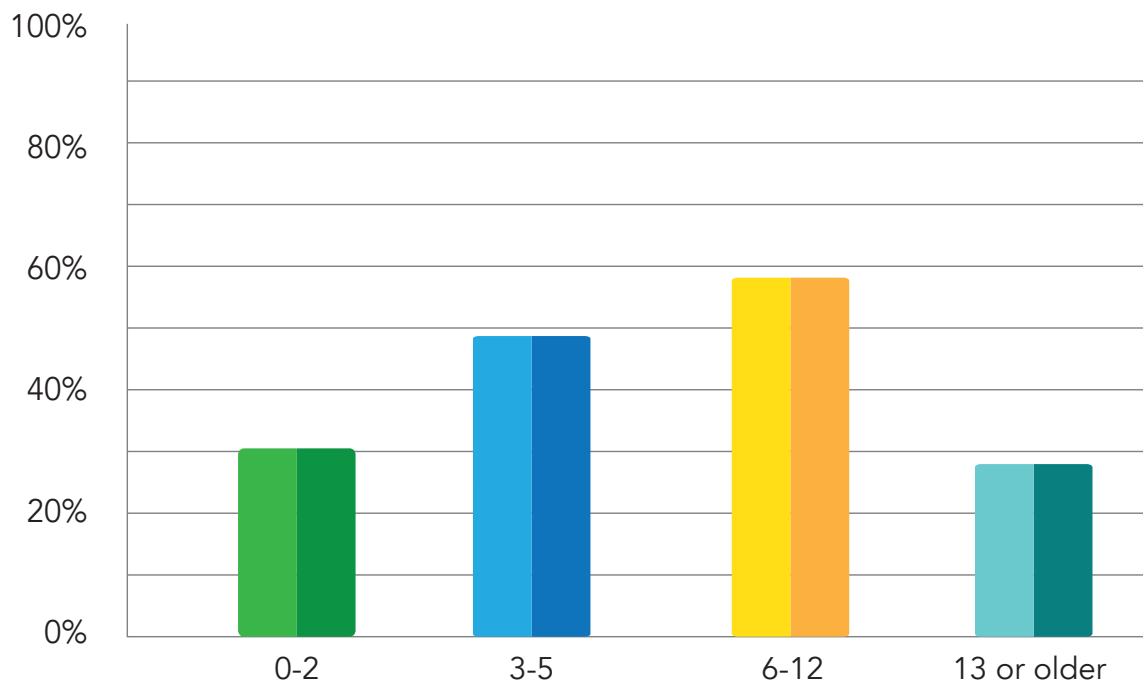
**My family's biggest stressor(s) this year were:
(check all that apply)**



In the last year, what changes has your agency seen in the following:

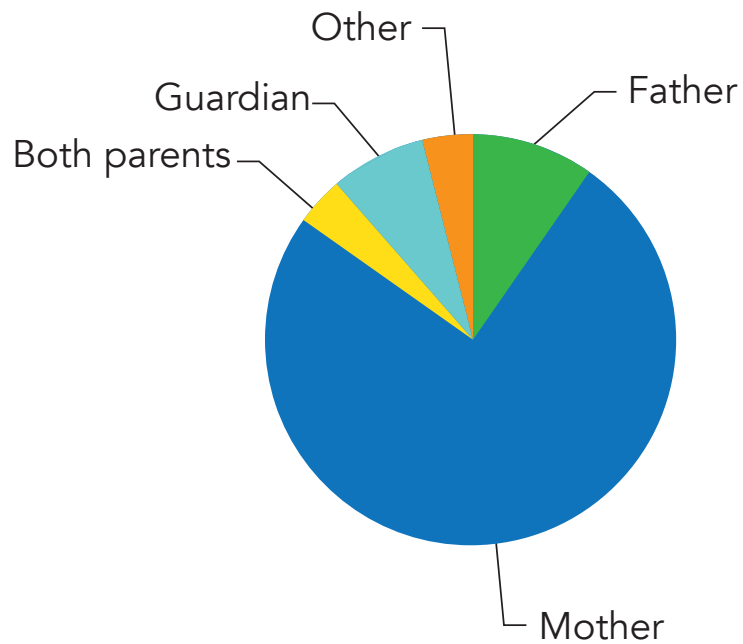


What are the ages of the children living in your home?



What primary languages are spoken by your family?

This survey is being completed by:



ANSWER CHOICES	RESPONSES	
Father	9.43%	5
Mother	75.47%	40
Both parents	3.77%	2
Guardian	7.55%	4
Other (please specify)	3.77%	2
TOTAL		53

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www.mass.gov

Cape Cod Healthcare Community Health Needs Assessment Report and Implementation Plan 2017-2019. www.cape-codhealth.org/about/caring-for-our-community/community-health-needs-assessment-implementation-plans

Child Care Aware - <https://usa.childcareaware.org>

Disability Data - <http://www.disabilitystatistics.org>

Massachusetts Department of Education - www.doe.mass.edu/

Massachusetts State Data - <https://www.mass.gov>

Regional Network on Homelessness - <https://www.bchumanservices.net/publications-data/ci-regional-network-on-homelessness-publications-data/point-in-time-count-of-cape-and-islands-homeless/>

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US Census Bureau - www.census.gov

US News & World Report Healthiest Communities 2019 Rankings Data - www.usnews.com

Welfare Info - <https://www.welfareinfo.org>



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