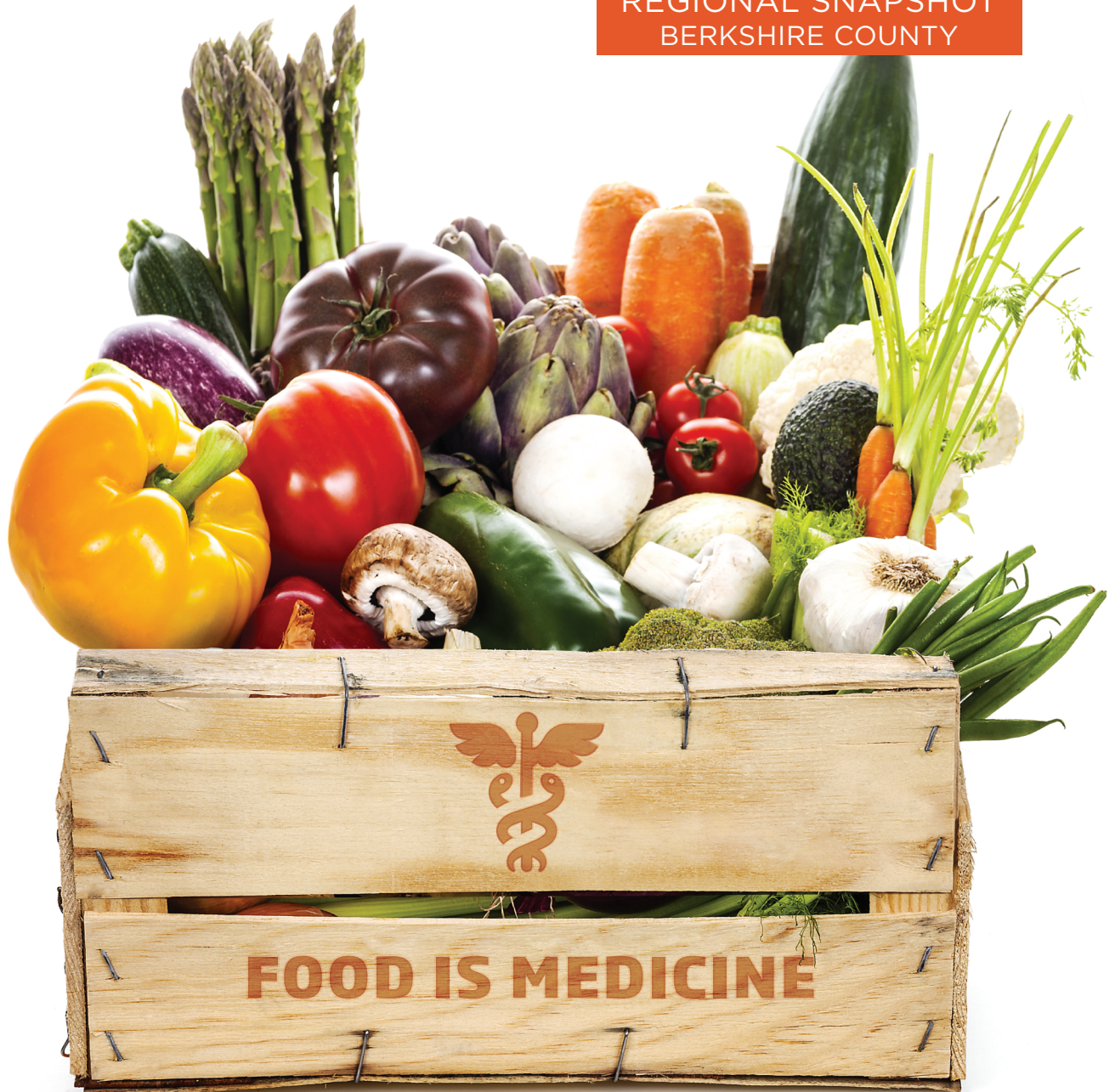


MASSACHUSETTS

Food is Medicine

STATE PLAN

REGIONAL SNAPSHOT
BERKSHIRE COUNTY



JUNE 2019

Regional Snapshot

BERKSHIRES

BERKSHIRE COUNTY

Massachusetts' Berkshire County encompasses 32 cities and towns at the western border of the state. According to our Food is Medicine Priority Level analysis, high rates of food insecurity, vehicle access, and chronic disease burden make North Adams and Pittsfield priority cities for Food is Medicine interventions. The Berkshires, known for its rich arts scene and pastoral landscape, attracts visitors from all over the world. While tourism may drive the local economy, residents throughout the county continue to struggle with social challenges that are exacerbated by high housing costs, insufficient public transportation, and lack of year-round employment opportunities. The population has declined significantly since 1970.¹ With a majority of this loss among young adults, the aging population is growing rapidly. Though there are some Food is Medicine organizations and emergency food providers in the region, the shortage of services and programs within the area should be noted.

SPECIAL CONSIDERATIONS

Aging Population and Population Decline

Census data show a steady decline in the county's population since 1970, with 75% of the loss occurring in Pittsfield, North Adams, and Adams.² Well-educated young adults are leaving to pursue economic opportunities elsewhere, leaving behind a rapidly growing aging population. In 2010, adults over 50 years of age made up over 40% of Berkshire County's population.³ There is a shortage of health care resources, such as health professionals, and an increasing burden of chronic disease, making Food is Medicine programming especially critical for residents of this region.

Generational Poverty

The Berkshires has been slow to recover from the loss of manufacturing jobs that once fueled the county's economy. Long-standing economic challenges are passed on from one generation to the next due to a lack of funds and resources for the community. Pittsfield and North Adams have the highest poverty rates (up to 41% and 21.4%, respectively) and lowest median incomes (\$21,182 and \$28,258, respectively) in Berkshire County, compared to the 11.1% poverty rate and \$74,167 median income in Massachusetts. Poverty is consistently reported as the main cause of poor health in Berkshire County.⁴

Lack of Reliable Public Transportation

Given the rural landscape of the Berkshires, the most reliable form of transportation is a personal automobile. Individuals who do not own a personal vehicle or cannot operate one must rely on public transportation or walk to their destinations. This makes daily activities, such as going to work, grocery shopping, and visiting the doctor's office, particularly challenging for rural residents and especially for the senior population. Berkshire Regional Transit Authority (BRTA) is the principal provider of public transportation in the region. However, even within BRTA's service areas, public transportation is insufficient due to limited service hours and frequency of buses.⁵ Persons with low income living in 17 southern Berkshire communities have no access to public transportation. This population is severely limited in mobility because they lack a personal vehicle, have no access to BRTA's routes, and cannot afford to pay for transportation services by taxi.⁶

Regional Listening Session Themes: May 4, 2018: Berkshires

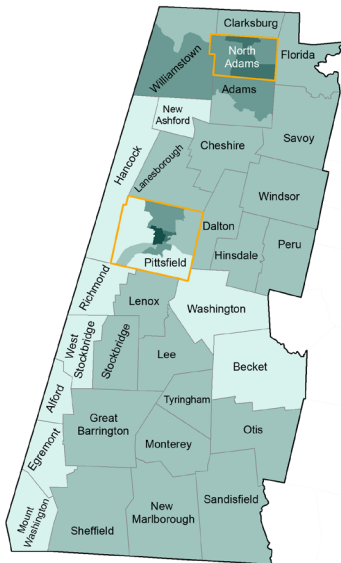
- The temporary suspension of HIP (Healthy Incentives Program) was a great loss to the Berkshires
- Most food access initiatives in the Berkshires are grant-funded and, therefore, difficult to sustain in the long-run.

FOOD IS MEDICINE INDICATORS OF NEED

BERKSHIRES SNAPSHOT

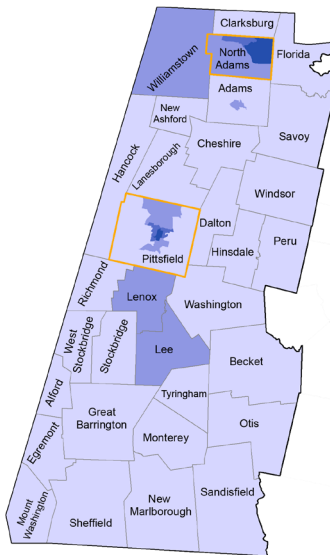
MASSACHUSETTS 2018

FOOD INSECURITY



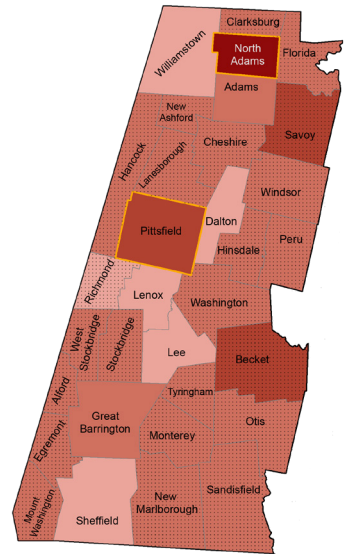
January 2019; Projected Coordinate System: NAD 1983 2011 StatePlane Massachusetts Mainland FIPS 2001; Sources: US Census, Feeding America

VEHICLE ACCESS

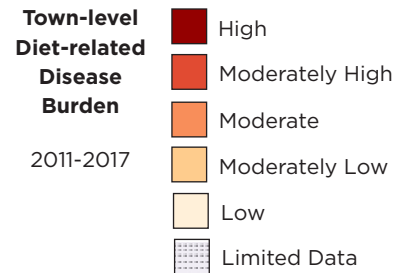
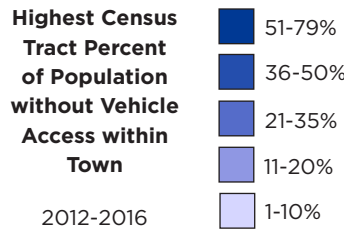
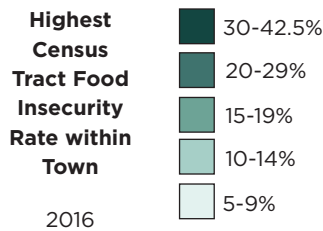


January 2019; Projected Coordinate System: NAD 1983 2011 StatePlane Massachusetts Mainland FIPS 2001; Sources: US Census, ACS 2012-2016 5-year Estimates

DIET-RELATED CHRONIC DISEASE BURDEN



January 2019; Projected Coordinate System: NAD 1983 2011 StatePlane Massachusetts Mainland FIPS 2001; Sources: US Census, MassDPH (Massachusetts Acute Care Database/BRFSS), Massachusetts Cancer Registry



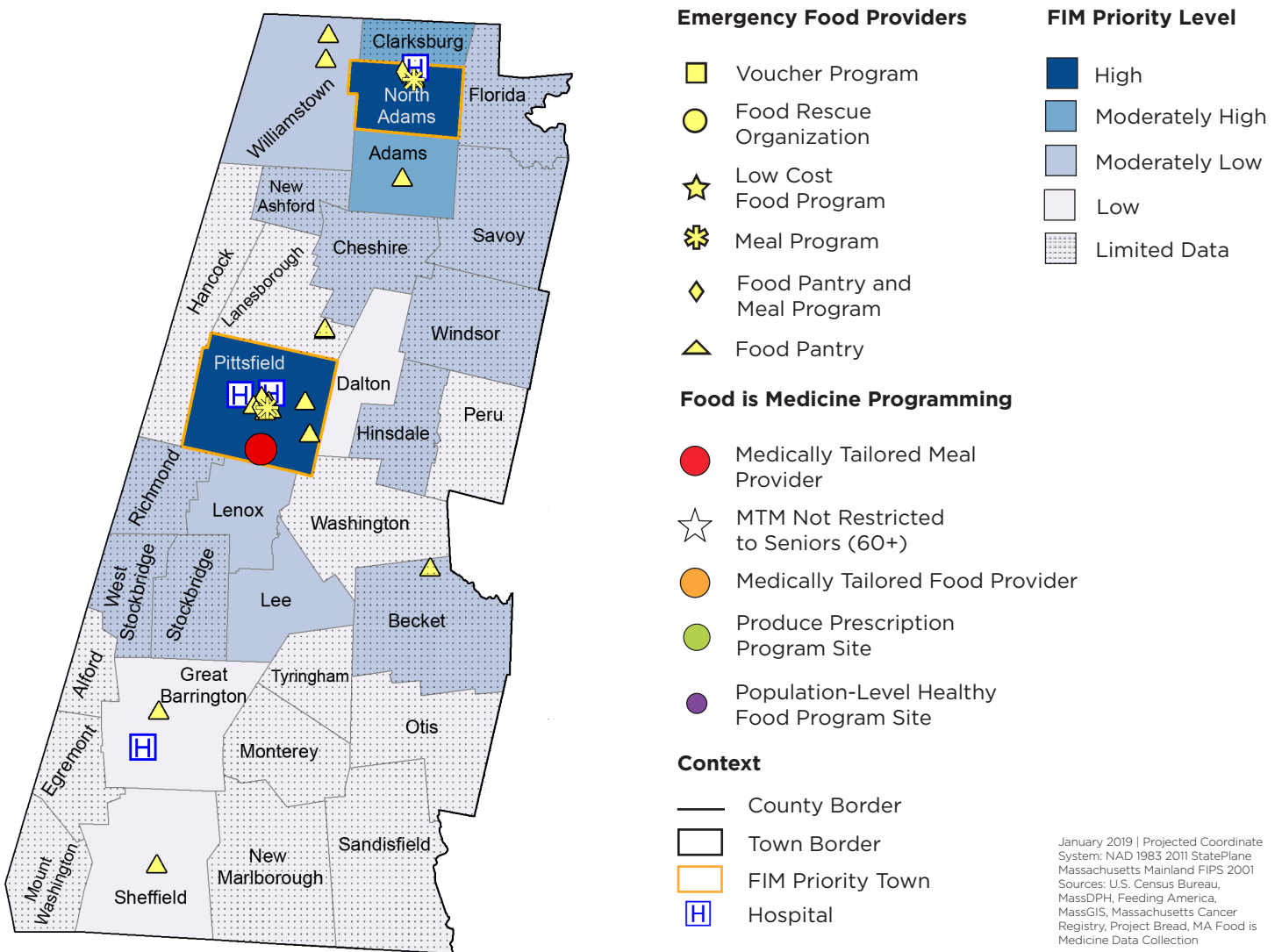
Appendix Table 1: Food is Medicine Indicators of Need, Berkshires

Food is Medicine Indicators of Need	Regional Data
Food Insecurity	A third of the region's census tracts have food insecurity rates higher than the state average (10.9%). The most concerning rates of food insecurity in the region are found in Pittsfield (30.5%) and North Adams (21%). ⁷
Vehicle Access	In North Adams and Pittsfield, up to 30% of households lack access to a vehicle, contributing to social isolation and poor access to health and social services. ⁸ Low-income families living in 17 Southern Berkshire County communities that lack public transit routes are especially vulnerable to health and social service access concerns. ⁹
Chronic Disease	The region's rates of asthma, obesity, colorectal cancer, and ovarian cancer are higher compared to the state. ¹⁰ However, the Berkshires has a notable dearth of health survey respondents and reliable health data. High suppression rates of chronic disease data in rural Berkshire County make it difficult to capture a complete picture of chronic disease burden within this region. ¹¹

FOOD IS MEDICINE PRIORITY ANALYSIS

BERKSHIRES SNAPSHOT

MASSACHUSETTS 2018



INNOVATION IN THE BERKSHIRES

Food pantries, meal sites, and shelters are the front lines of emergency food assistance in Berkshire County and thus play an important role in addressing food insecurity. All of these agencies are supplied by the Food Bank of Western Massachusetts (FBWM), a Planning Council member to the Food is Medicine State Plan. FBWM acts as an important resource for hunger relief organizations in the region by providing support to increase capacity of programs, strengthen the emergency food network, and develop long-term projects to fight hunger. The Berkshires are home to a rich agricultural landscape, which can play an important role in increasing healthy food access for the community and supporting local economies. For this reason, it is especially important to maintain sustainable funding streams for programs, such as the Healthy Incentives Program (HIP), that support the agricultural economy and community health. We have identified an incredible number of organizations committed to reducing food insecurity and improving the health status of the region by collaborating with local farmers and utilizing the region’s agricultural resources.

Endnotes

- ¹ *Selected Demographics Table: Age and Sex*, U.S. CENSUS BUREAU, CENSUS 2010.
- ² *2016 Regional Transportation Plan*, BERKSHIRE REGIONAL PLANNING COMMISSION, (2016).
- ³ *Selected Demographics Table: Age and Sex*, U.S. CENSUS BUREAU, CENSUS 2010.
- ⁴ *2015 Berkshire County Community Health Needs Assessment*, BERKSHIRE COMMUNITY HEALTH SYSTEMS, (2015).
- ⁵ Berkshire Regional Planning Commission (2016) 2016 Regional Transportation Plan, http://www.berkshireplanning.org/images/uploads/documents/8-5-15_RTP_Final_Reduced_File.pdf
- ⁶ Berkshire Regional Planning Commission (2016) 2016 Regional Transportation Plan, http://www.berkshireplanning.org/images/uploads/documents/8-5-15_RTP_Final_Reduced_File.pdf
- ⁷ Craig Gundersen et al., *Map the Meal Gap 2018: A Report on County and Congressional District Food Insecurity and County Food Cost in the United States in 2016*, FEEDING AMERICA, (2018).
- ⁸ *Household Size by Vehicle Available [Percent no Vehicle]*, AMERICAN COMMUNITY SURVEY 2012-2016 5-YEAR ESTIMATES, U.S. CENSUS BUREAU.
- ⁹ *2016 Regional Transportation Plan*, BERKSHIRE REGIONAL PLANNING COMMISSION, (2016).
- ¹⁰ *The Massachusetts Cancer Registry Query Tool*, MASSACHUSETTS CANCER REGISTRY-MDPH, <https://www.cancer-rates.info/ma/> (last visited April 16, 2019).
- ¹¹ *Massachusetts Town-level Behavioral Risk Factor Surveillance Survey*, CENTERS FOR DISEASE CONTROL AND PREVENTIONS-MDPH, (2018).

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