



Public Health
Prevent. Promote. Protect.

**Westford Health
Department**

TOWN OF WESTFORD

Community Health Assessment and Community Health Improvement Plan

2023 - 2028



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EXECUTIVE SUMMARY

In order to identify the best strategies for addressing the health and well-being of a community, it is critical to understand how residents are impacted by the environmental, economic, social, and health-related factors within their communities. To begin this process, the Westford Health Department convened and engaged local organizations and community members in a collaborative community health improvement process resulting in two phases outlined in this report:

- A Community Health Assessment (CHA) which identifies the health status of a community, along with the factors contributing to the health-related needs, strengths, and assets within a community.
- A Community Health Improvement Plan (CHIP) which provides a framework for collaboratively addressing the health needs and challenges identified in the community health assessment with evidence-based priorities and goals.

These processes were guided by the Westford Community Health Partnership, which included representatives from the Westford Health Department, the school system, community residents, and a range of local coalitions and committees. The CHA was developed utilizing available primary and secondary data sources including community survey responses from the Greater Lowell Health Alliance, a Westford-specific Stakeholder / Community Leader Survey, and publicly available health-related data to identify trends and disparities across Westford. The following CHA includes measures and indicators related to mental health, substance use, chronic health & wellness, infectious disease, environmental health, and other community factors.

Based on the findings of the CHA, the following topics were identified as key priority areas to address within Westford with an understanding that a health equity approach must be utilized across each of the following to address health disparities among communities:



Mental Health



Substance Use



*Chronic Disease
& Wellness*



*Environmental
Health*

The CHIP was developed to address these key priority areas within Westford through a collaborative, equitable, and evidence-based approach. The CHIP includes measurable goals and objectives that can be utilized as a basis for local organizations and communities when determining their potential role in the collaborative effort of addressing community health and well-being. The intention of this CHIP is to provide a framework for aligning community resources and initiatives towards a shared vision of community health to improve the well-being of residents in Westford. Together, the following CHA and CHIP outlined in this report represents the overarching health status and strategic goals for the Town of Westford from 2023 to 2028.

COMMUNITY HEALTH ASSESSMENT PROCESS AND METHODS

BACKGROUND

The goal of a community health assessment (CHA) is to describe the health of a community, along with the factors that impact health outcomes and the resources and assets available to address community health. This type of assessment aims to utilize a range of sources and methods to understand the perceptions, experiences, and health outcomes of community members within a given population. In this case, the CHA was developed to understand the needs, challenges, strengths, and assets of communities within Westford, in order to develop evidence-based and collaborative strategies to address community health.

SOCIAL DETERMINANTS OF HEALTH FRAMEWORK

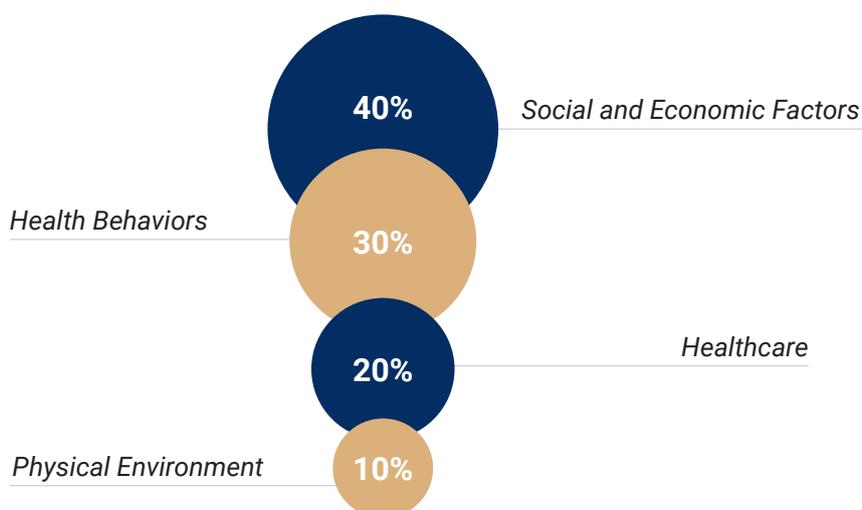
As described by the Healthy People 2030 initiative, the social determinants of health (SDOH) are “the conditions in the environments where people are

born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.”

These factors such as economic stability, education access and quality, healthcare access, neighborhood and built environment, and social and community context can have significant impacts on the health and well-being of individuals and communities, including contributing to health inequities and disparities across communities.¹

The University of Wisconsin Public Health Institute has developed the County Health Rankings model (see Figure 1) in which they identified that 40% of the variability in health outcomes is due to social and economic factors, such as education, employment, income, and social support, 30% of the variability in health outcomes influenced by individual health behaviors, with another 20% due to healthcare, and 10% due to the physical environment, such as safe housing and clean air and water.

Figure 1: Influence of Social Determinants of Health (SDoH) on Health Outcomes



Source: Adapted from County Health Rankings Model from University of Wisconsin Public Health Institute

¹ U.S. Department of Health and Human Services Office of Disease & Prevention and Health Promotion. (n.d.). Social Determinants of Health - Healthy People 2030

<https://health.gov/healthypeople/priority-areas/social-determinants-health>

This understanding of the social determinants of health highlights the importance of not only understanding individual health behaviors, but how the environmental conditions in which people live contribute to health inequities and disparities. Health disparities refers to preventable differences in the burden of disease or outcome by populations that have experienced social, economic, and/or environmental disadvantages.

The idea of health equity is to identify and address these systematic factors so that everyone has a fair and just opportunity to be as healthy as possible.

The goal of this Westford Community Health Assessment is to identify the social determinants of health that are contributing to health inequities and disparities across Westford in order to provide a foundation for addressing these underlying factors and improving the health and wellness of all Westford residents.

WESTFORD COMMUNITY HEALTH PARTNERSHIP

The Westford Health Department formed the Westford Community Health Partnership to advocate and lead a Westford Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) that is community driven and representative of the town. The partnership included representation from local government, the school system, community residents, and a range of local coalitions and committees who met monthly during the development of the Westford CHA and CHIP.

The Westford Community Health Partnership reviewed the available public health data and provided feedback and context to the metrics and indicators included within this report. They also worked to develop and distribute the Stakeholder & Community Leader survey to better understand the programs and services that would be most beneficial to the communities served by Westford organizations and coalitions. Throughout these monthly meetings, the partnership utilized the available public health data, along with local community survey results, to guide this CHA and identify key priority areas and strategies in the following CHIP.

GREATER LOWELL HEALTH ALLIANCE COMMUNITY SURVEY

Through a collaborative effort with representation from the Westford Health Department, the Greater Lowell Health Alliance (GLHA) distributed a Community Health Survey across the region, including the Town of Westford. This survey was available digitally on Survey Monkey or on paper in English, Spanish, Portuguese, Khmer, Arabic, French, and Swahili.

A subset of the regional survey responses are included in this report, specifically just the results from the 286 respondents who identified as Westford residents. Of these respondents, 72% identified as women, 94% identified as white, and 66% were over the age of 55, indicating that the Westford residents who participated in the GLHA Community Health Survey are not necessarily representative of the Town of Westford as a whole (see Appendix C for full demographics of respondents).



WESTFORD STAKEHOLDER & COMMUNITY LEADER SURVEY

To include a broader range of perspectives in the community health improvement process, the Westford Community Health Partnership developed and distributed a survey to stakeholders and local community leaders across Westford digitally through Survey Monkey.

The goal of this Westford Stakeholder & Community Leader Survey was to identify the types of resources and services that would be most beneficial to the communities served by local organizations and coalitions and understand whether key stakeholders and local leaders were aware of currently available services and resources.

Feedback received from the 30+ respondents was utilized to guide the development of collaborative strategies within the Community Health Improvement Plan. (See Appendix D for more detail on the Stakeholder & Community Leader Survey).

PUBLIC HEALTH DATA

Publicly available secondary data sources were utilized to provide insight to patterns across a

range of health indicators in Westford. Public health data was selected from national, state, and local sources and represents the latest available metrics during collection between July and December 2023. Although data is often not available to compare health indicators by many socioeconomic or demographic factors at the town/city level, this information is included when possible within the report.

The Massachusetts DPH Population Health Information Tool (PHIT) provided a data directory linking to a range of sources that were utilized within this report such as the Behavioral Risk Factor Surveillance System (BRFSS), Massachusetts Registry of Vital Records and Statistics, Massachusetts Viral Respiratory Illness Reporting, Massachusetts Environmental Public Health Tracking, Massachusetts Cancer Registry, and Massachusetts Opioid Overdose Reporting, along with others. Other secondary data sources utilized within this report include the U.S. Census Bureau American Community Survey (ACS) 5-Year Estimates, U.S. Department of Agriculture Food Access Research Atlas, FBI National Incident-Based Reporting System (NIBRS), Westford Public Schools Youth Risk Behavior Survey, and Northern Middlesex Council of Governments Envision Survey.

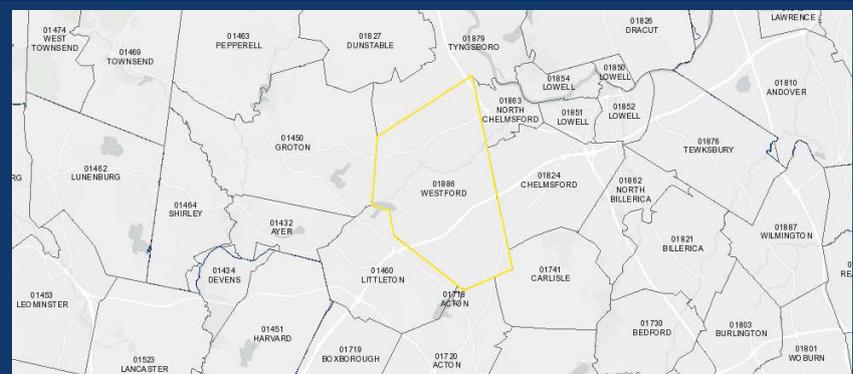
COMMUNITY PROFILE

DEFINING THE COMMUNITY

Residence

Spanning over 30 square miles, Westford is located within ZIP Code 01886 (see Figure 2) and has a population density of 815 people per square mile.² As of July 2022, the population of Westford was estimated at 24,353, representing a -1.2% decline in the population of the town from 2020.

Figure 2: ZIP Codes of Westford and Surrounding Areas



Source: Uniform Data System (UDS) Mapper, 2020

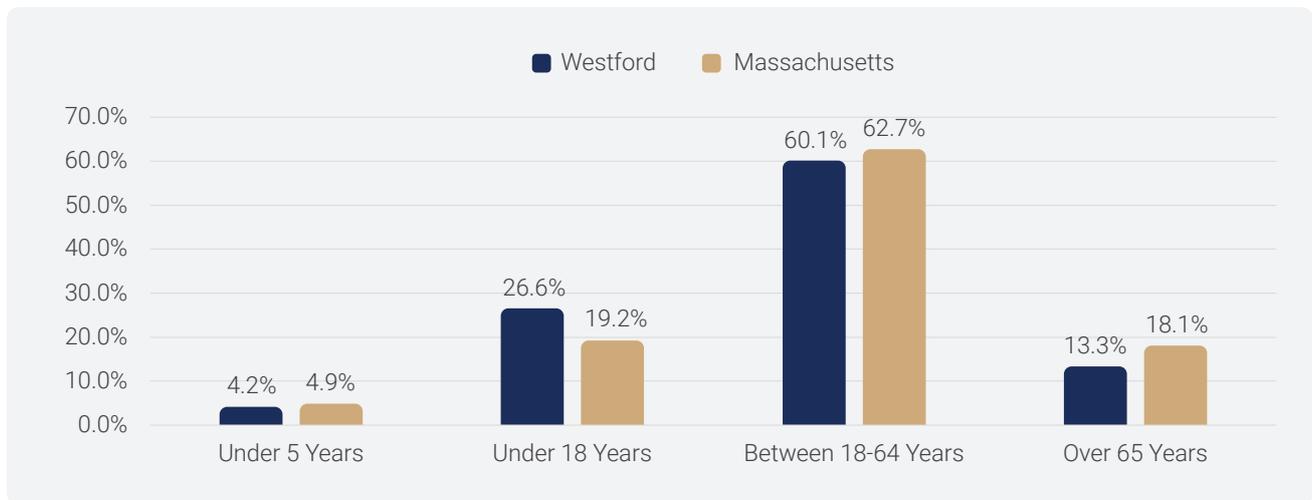
² U.S. Census Bureau. (n.d.). QuickFacts: Westford Town, Middlesex County. <https://www.census.gov/quickfacts/fact/table/westfordtownmiddlesexcountymassachusetts/PST045222>

POPULATION DEMOGRAPHICS

Age Distribution

Westford has a similar proportion of children under 5 and adults aged 18-64 compared to the state of Massachusetts, although there is a larger proportion of individuals under the age of 18 in Westford at 26.6% compared to 19.2% in Massachusetts (see Figure 3). There is also a slightly lower proportion of those over the age of 65 in Westford at 13.3% compared to 18.1% in the state of Massachusetts.

Figure 3: Age Distribution of Residents in Westford and Massachusetts, 2023

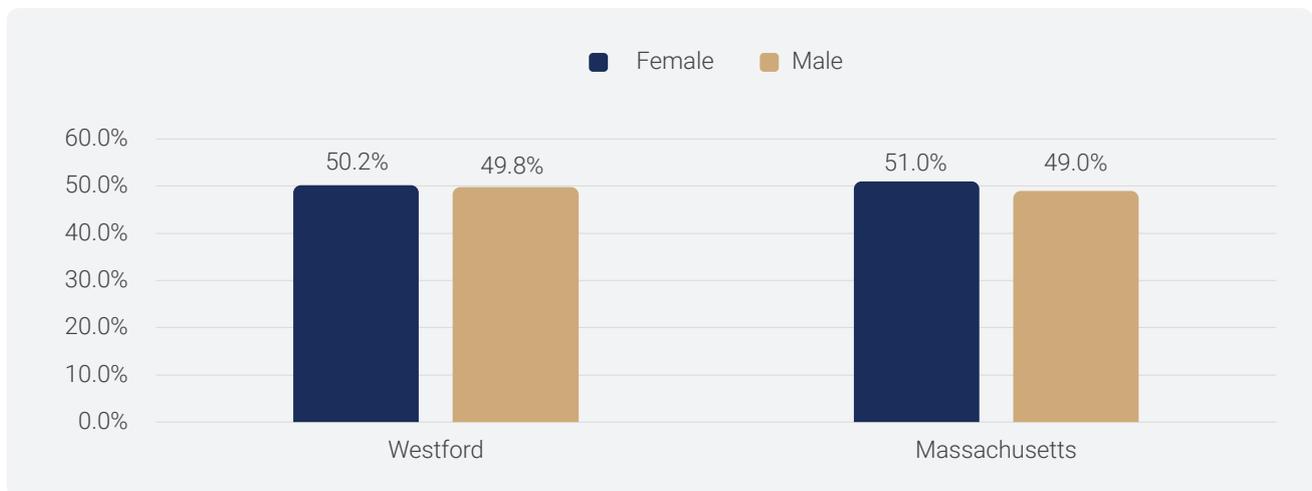


Source: U.S. Census Bureau QuickFacts: Westford and Massachusetts, 2023

Sex and Gender Identity

As of 2023, complete and reliable publicly available data on sexual orientation and gender identity was unavailable. Overall, the sex distribution of Westford is relatively balanced, with slightly more females (50.2%) than males (49.8%) residing in the town, which is similar to the state proportions of 51.0% female and 49.0% male (see Figure 4).

Figure 4: Gender Distribution in Westford and Massachusetts, 2023

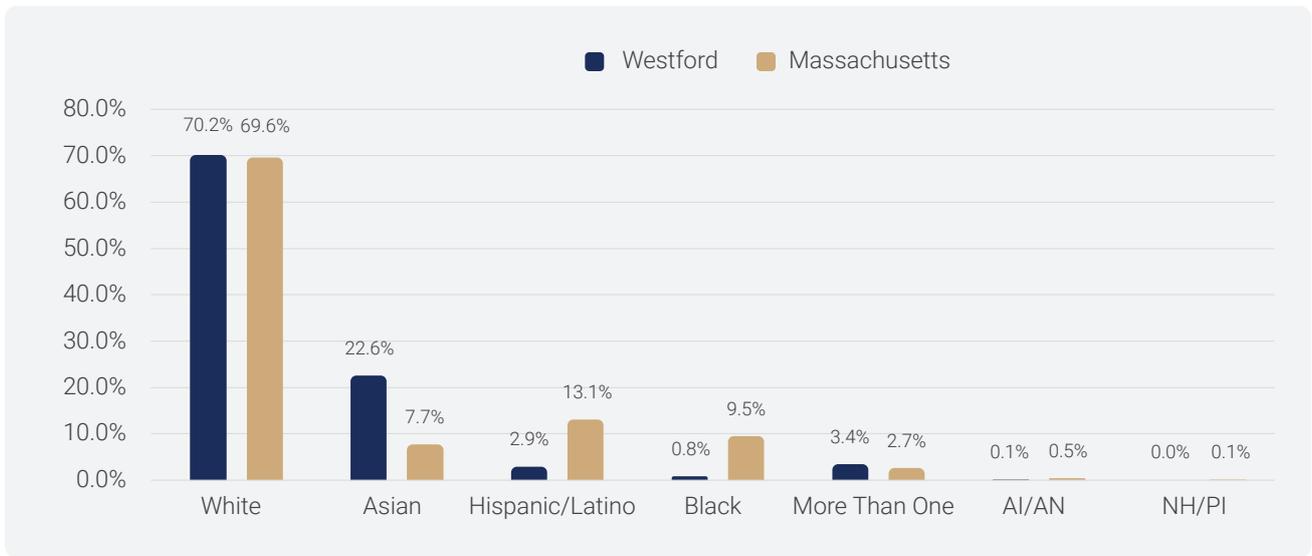


Source: U.S. Census Bureau QuickFacts: Westford and Massachusetts, 2023

Race & Ethnicity

Residents of Westford are primarily white (non-Hispanic or Latino), making up 70.2% of the population (see Figure 5). Asian individuals constitute a higher proportion of residents in Westford at 22.6% compared to the statewide proportion of 7.7%, while the percentage of Black and Hispanic/Latino individuals are lower in Westford (0.8% and 2.9% respectively) compared to the statewide proportions. American Indian or Alaskan Native residents and Native Hawaiian or Other Pacific Islander residents make up less than 1% of Westford’s population.

Figure 5: Race and Ethnicity of Residents in Westford and Massachusetts



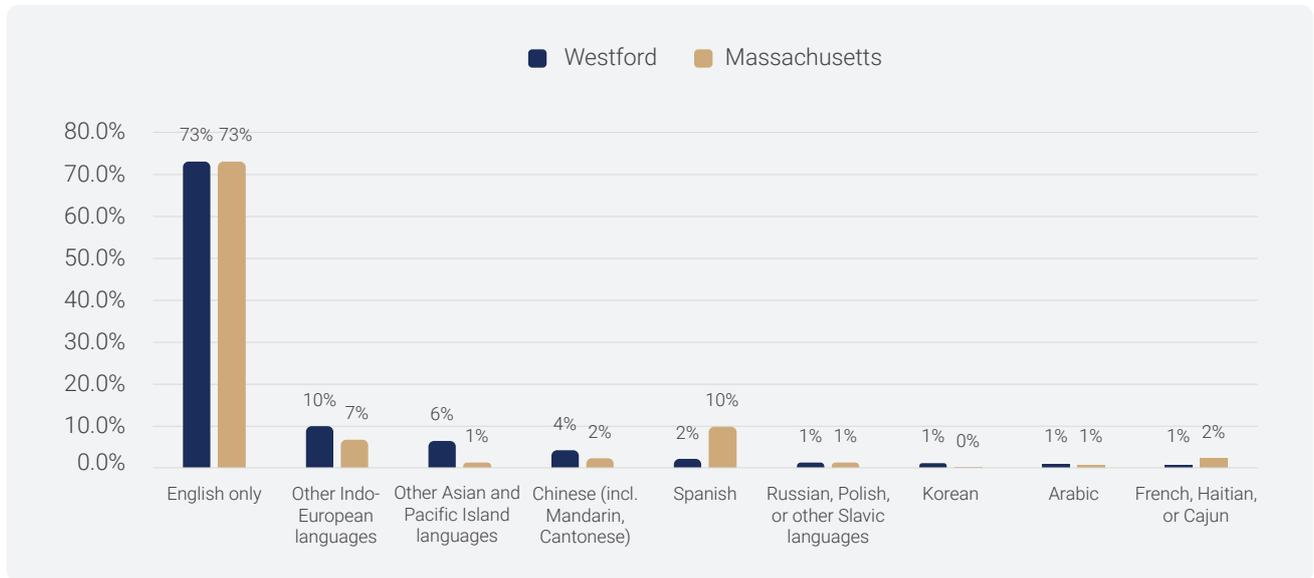
Note: AI/AN referring to American Indian and Alaska Native, NH/PI referring to Native Hawaiian and Other Pacific Islander
Source: U.S. Census Bureau QuickFacts: Westford and Massachusetts, 2023

Languages Spoken

In Westford and in Massachusetts, 73% of households speak English at home (Figure 6). In Westford, 10% speak other Indo-European languages which includes languages such as French, Haitian, Italian, Portuguese, German, among many others. An estimated 4% of households speak Chinese (including Mandarin and Cantonese) in Westford, with another 6% of households speaking other Asian and Pacific Island languages. An estimated 2% of households in Westford speak Spanish, which is lower than the state proportion of 10% of households across Massachusetts.



Figure 6: Languages Spoken by Households, 2022

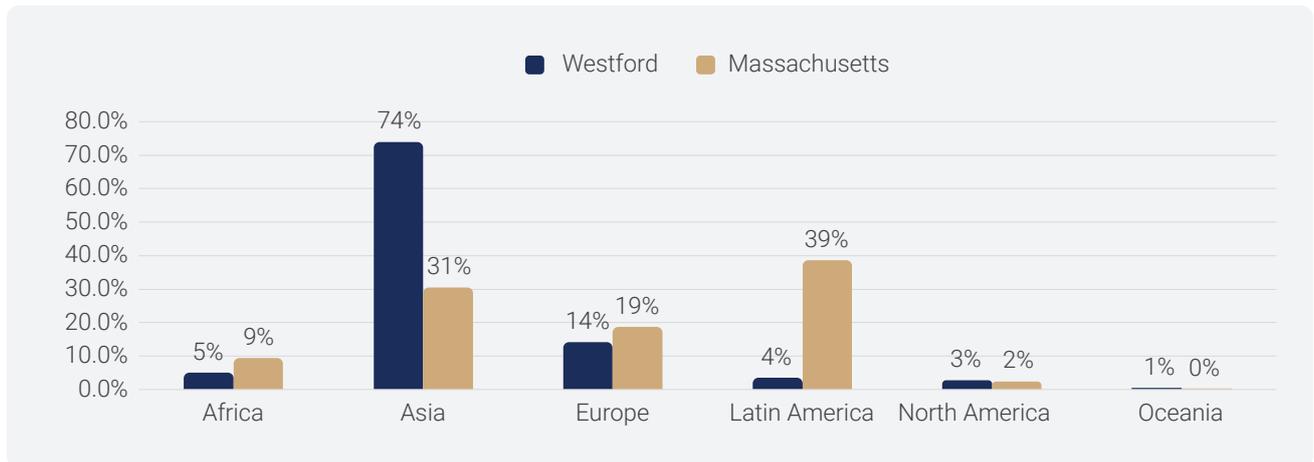


Source: U.S. Census Bureau American Community Survey 5-Year Estimates, Table B16002, 2017 – 2022

Citizenship Status

Approximately 20% of those living in Westford were born outside the U.S., compared to about 18% of those living across the state of Massachusetts.³ About three-quarters of the foreign-born residents in Westford were born in Asia (74%), followed by 14% in Europe and 5% in Africa (Figure 7).

Figure 7: Place of Birth for Foreign Born Residents, 2022



Source: U.S. Census Bureau ACS 5-Year Estimates, 2018 – 2022, Table B05002

Household Income and Poverty

The median household income in Westford is \$174,424 which is well above the median household income of Massachusetts at \$96,505 (see Table 1). This results in a per capita income (measured as the mean income calculated for every person in the community) of \$67,815 in Westford, which is higher than the state per capita income of \$53,513. It is also worth noting that Westford has a lower proportion of individuals living in poverty at just 1.7% compared to 10.4% in Massachusetts.

³ U.S. Census Bureau. "Place of Birth by Nativity and Citizenship Status." American Community Survey, ACS 5-Year Estimates Detailed Tables, Table B05002, 2018-2022

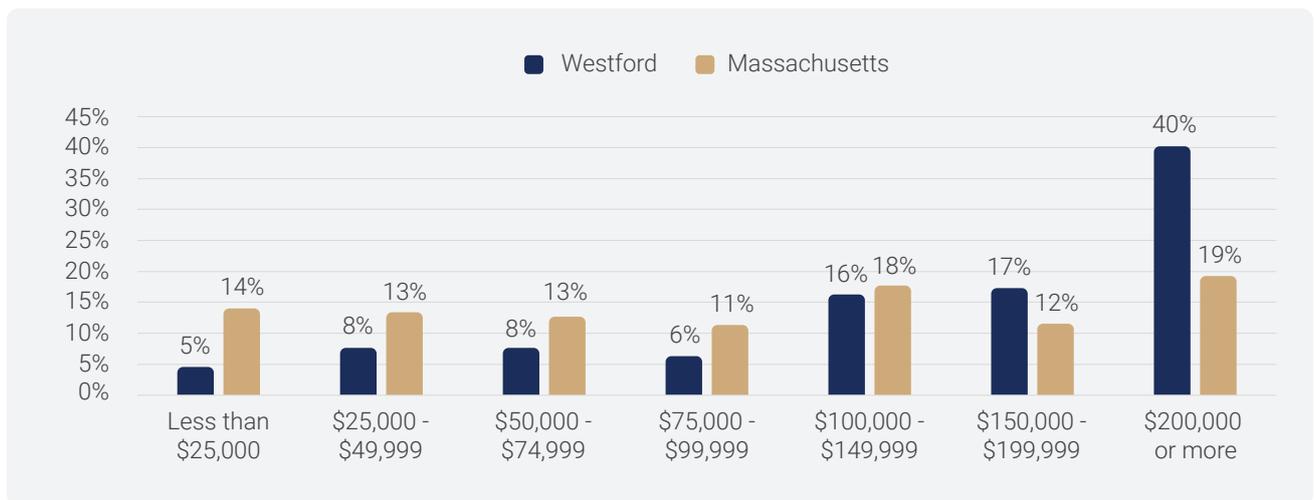
Table 1: Income and Poverty, 2022

	Median Household Income	Per capita Income in Past 12 months	Persons in Poverty
Westford	\$174,424	\$67,815	1.7%
Massachusetts	\$96,505	\$53,513	10.4%

Source: U.S. Census Bureau QuickFacts: Westford and Massachusetts, 2023

A more detailed breakdown of household incomes reveals that 73% of the households in Westford had an income of greater than \$100,000 in 2022, with 40% of households reporting an income of greater than \$200,000 (see Figure 8). This is over double the proportion of households in Massachusetts that have an income greater than \$200,000. Overall, Westford has a lower proportion of households making less than \$100,000 compared to Massachusetts, with 5% of households making less than \$25,000 compared to 14% of Massachusetts households.

Figure 8: Household Income in the Past 12 Months, 2022

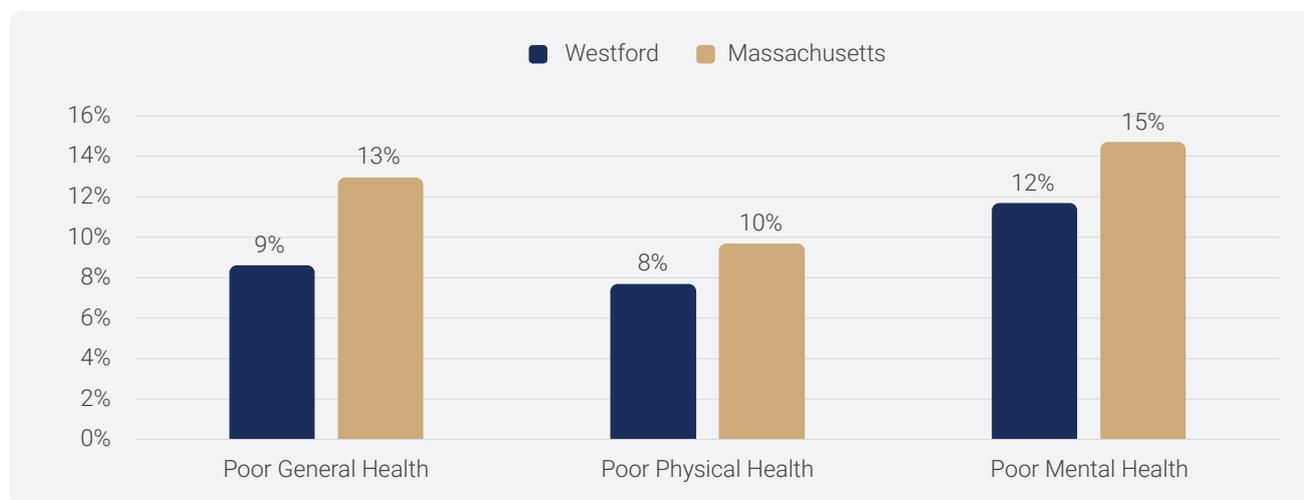


Source: U.S. Census Bureau ACS 5-Year Estimates, 2018 - 2022, Table S1901

GENERAL HEALTH & MORTALITY

Poor Health Status

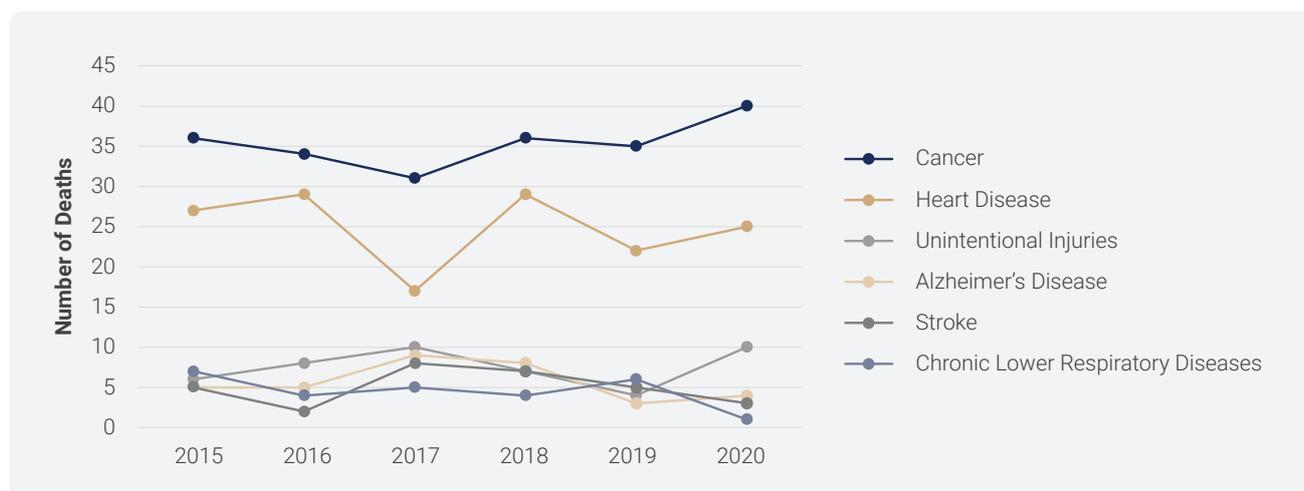
The CDC Behavioral Risk Factor Surveillance System (BRFSS) provides a snapshot of the health status among Westford residents compared to the state of Massachusetts (see Figure 9). In this case, an estimated 9% of adults in Westford self-report their general health status as “fair” or “poor”, which is lower than the estimated 13% of those across Massachusetts. In terms of physical health, an estimated 8% of Westford adults have experienced more than 14 days of poor physical health in the last 30 days, which is lower than the state estimate of 10%. A higher proportion of adults in Westford are estimated to experience more than 14 days of poor mental health in the last 30 days at 12%, although this is also still lower than the state estimate of 15%.

Figure 9: Poor Health Status, 2021

Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2021 via PHIT

Leading Causes of Death

The leading cause of death in Westford is cancer, ranging from 31 to 40 deaths each year from 2015 to 2020 (see Figure 10). Heart disease has been the second leading cause of death during the same time period ranging from 17 to 29 deaths each year among Westford residents. Unintentional injuries, Alzheimer's disease, stroke, and chronic lower respiratory diseases were also among the leading causes of death in Westford from 2015 to 2020. In 2020, unintentional injuries were the third leading cause of death, a category that includes motor vehicle / pedestrian accidents, falls, drownings, fire-arm-related deaths, and poisonings (including drug overdose).

Figure 10: Leading Causes of Death in Westford, 2015 - 2020

Source: Massachusetts Department of Public Health, Registry of Vital Records and Statistics, Deaths of Massachusetts Residents Dashboard, 2022

SUMMARY OF FINDINGS

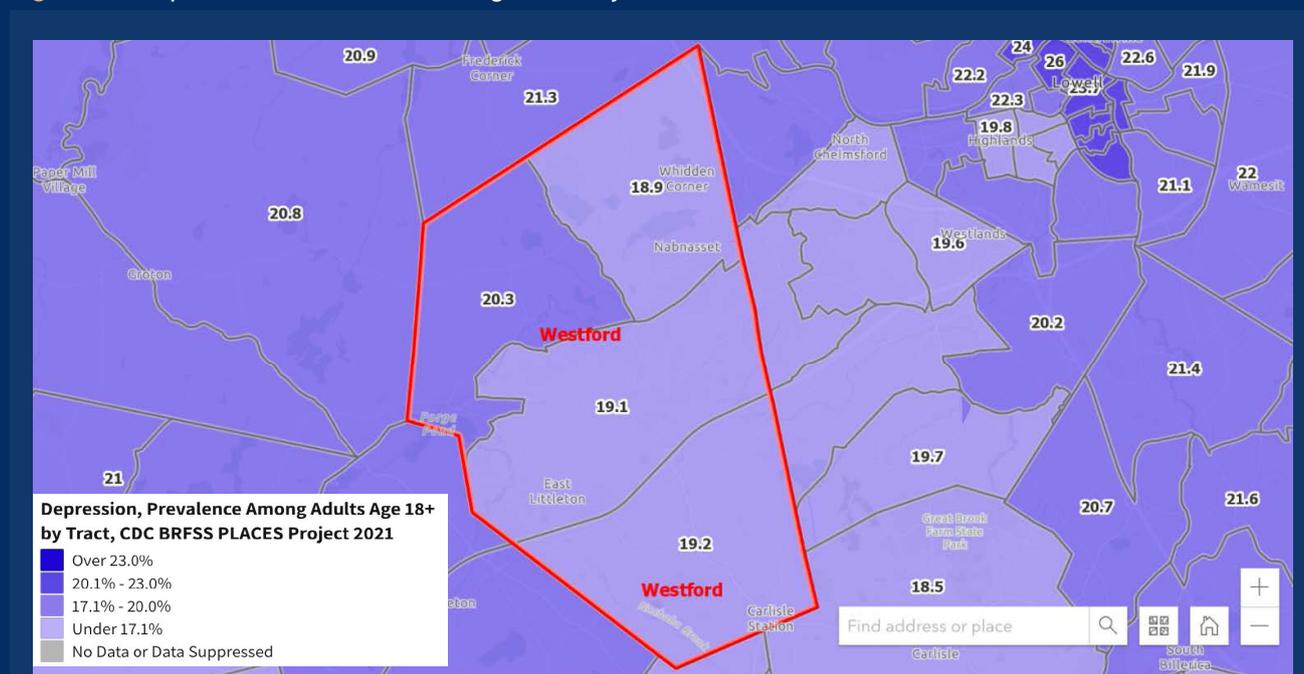
MENTAL HEALTH

The health of a community extends beyond the absence of physical illness and includes the overall well-being of its residents. Mental health is a fundamental component of this holistic perspective, as it encompasses our emotional, psychological, and social well-being, all of which can impact how we handle stress, relate to others, and make choices.⁴ Within the GLHA Community Health Survey, 21% of Westford respondents reported experiencing mental health issues, with 42% reporting that they know someone who experiences mental health issues, indicating that this is a critical aspect of health impacting residents in Westford.

Depression

A key indicator in understanding the outlook of mental health in a community is the prevalence of depression. This indicator provides insight into the scope of this mental health challenge, its societal impact, and the need for proactive interventions and support systems. In Westford, an estimated 19% of those over 18 years of age report being told by a healthcare provider that they have depression, which is a similar rate compared to Massachusetts at 21% and the United States at 20%.⁵ The proportion of adults experiencing depression is very similar across census tracts, ranging between 18.9% in the northeastern edge of Westford to 20.3% in the northwestern edge of Westford (see Figure 11).

Figure 11: Depression Prevalence Among Adults by Census Tract, 2021



Suicide and Suicidal Ideation

The impact of suicide on a community cannot be overstated. Suicide and suicide attempts can have lasting emotional, mental, and physical health impacts on individuals, families, and communities.

Although anyone can experience risk of suicide, there are factors that may increase one's risk, such as economic hardship, discrimination, lack of future opportunity, barriers to healthcare, lack of connection to others, and/or experiences of violence.⁶ Therefore, it is critical to consider the entire societal context when addressing suicide and suicide attempts within a community.

In the GLHA Community Health Survey, 8% of Westford respondents reported that they experience suicidal thoughts, with 24% of respondents reporting that they know someone who experiences suicidal thoughts. From 2013 to 2021, there have been 15 deaths due to suicide among Westford residents, typically ranging between 0 and 2 per year, although there were 5 deaths in 2016 (see Table 2). The 5-year annual average rate of suicide (2016-2020) in Westford is comparable to the state at 9.1 suicides per 100,000 residents compared to 9.8 suicides per 100,000 residents in Massachusetts.⁷

Table 2: Deaths by Suicide, 2013 - 2021

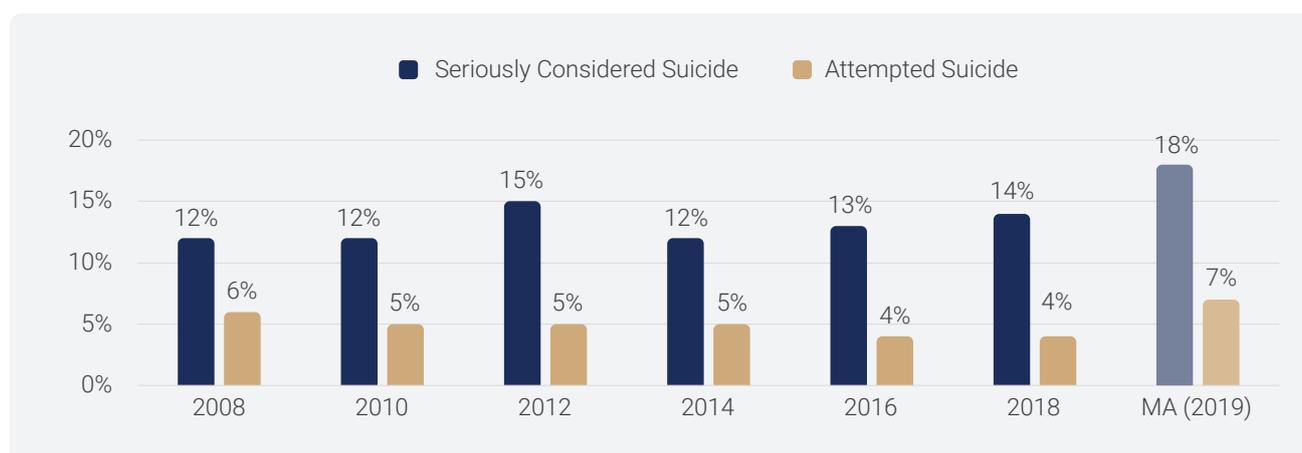
Year	2013	2014	2015	2016	2017	2018	2019	2020	2021
Suicide Deaths	0	1	2	5	2	2	0	2	1

Source: MA Registry of Vital Records and Statistics, Annual Massachusetts Death Reports, 2013 - 2021

Suicide and suicidal ideation are a particular concern among youth and young adults. From 2008 to 2018, the proportion of high school students in Westford who reported suicidal ideation ranged from 12% to 15%, which is slightly lower than the 2019 state average of 18% (see Figure 12).

During the same timeframe, suicide attempts lowered slightly from 6% in 2008 to 4% by 2018 which is also lower than the state average of 7% in 2019.

Figure 12: Suicidal Ideation and Suicide Attempts Among Westford High School Students, 2008 - 2018



Source: Youth Risk Behavior Survey, Westford Public Schools, Emerson 2018 YRBS Results

⁶ Centers for Disease Control and Prevention. (2023, May 9). Disparities in Suicide. Suicide Prevention. <https://www.cdc.gov/suicide/facts/disparities-in-suicide.html>

⁷ Massachusetts Department of Public Health. (n.d.). Annual Massachusetts Death Reports. Massachusetts Vital Records Data and Publications. <https://www.mass.gov/lists/annual-massachusetts-death-reports>

Mental Healthcare Capacity

Availability of affordable and compassionate mental healthcare services and resources are critical for addressing mental health challenges in a community. The Centers for Medicare and Medicaid Services (CMS) tracks the National Provider Identifier (NPI) for mental health providers across the nation. In 2022, CMS reported 160 NPIs for mental health providers, defined as psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapists, and mental health providers that treat alcohol and other drug use, as well as advanced practice nurses specializing in mental healthcare (see Table 3). This results in a lower rate of mental health providers per 100,000 in Westford compared to the state of Massachusetts (see Table 3).

Table 3: Mental Health Providers by Region, 2022

	Number of Mental Health Providers	Mental Health Provider Rate (per 100,000 population)
Westford	160	657 providers per 100,000
Massachusetts	49,253	705 providers per 100,000
United States	981,414	296 providers per 100,000

Source: Centers for Medicare and Medicaid Services, National Plan and Provider Enumeration System, 2022 via MA PHIT

SUBSTANCE USE

One in seven Americans report experiencing a substance use disorder.⁸ Substance use disorder (SUD) refers to the use of select substances (such as alcohol, tobacco products, opioids, etc.) with possible dependence and other detrimental effects on health. These may include increased risk of infections, injuries, development of chronic diseases such as cancer or cardiovascular disease, and overdoses or death.⁹ Substance use is a significant public health concern as it has impacts not only on individuals, but entire communities as well.

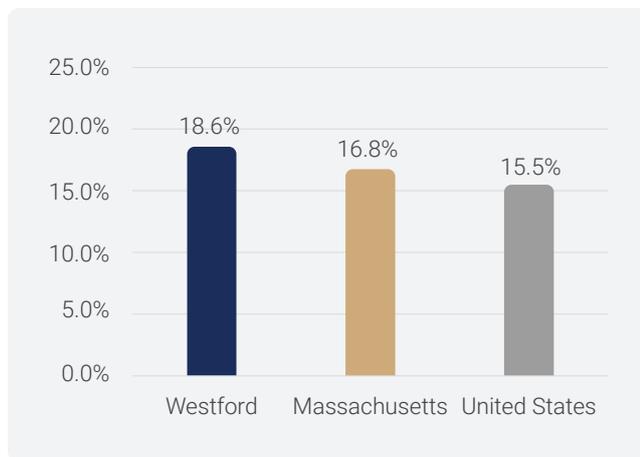
Alcohol Use

Alcohol use can increase the risk of injuries and accidents, violence, and alcohol poisoning, with long-term, excessive drinking increasing the risk of developing chronic conditions such as heart disease, cancer, stroke, and alcohol dependence. The Centers for Disease Control defines binge drinking as consuming 4 or more drinks during a single occasion among women and consuming 5 or more drinks during a single occasion among men.¹⁰ In Westford, an estimated 18.6% of those over 18 years of age report engaging in binge drinking in the past 30 days, which is higher than the state average of Massachusetts at 16.8% and the United States at 15.5% (see Figure 13). This trend was also observed in the 2018 MA Healthy Aging Community Profile which estimated that almost 16% of those over the age of 60 in Westford drink excessively, compared to 9% across the state of Massachusetts (see Figure 14).

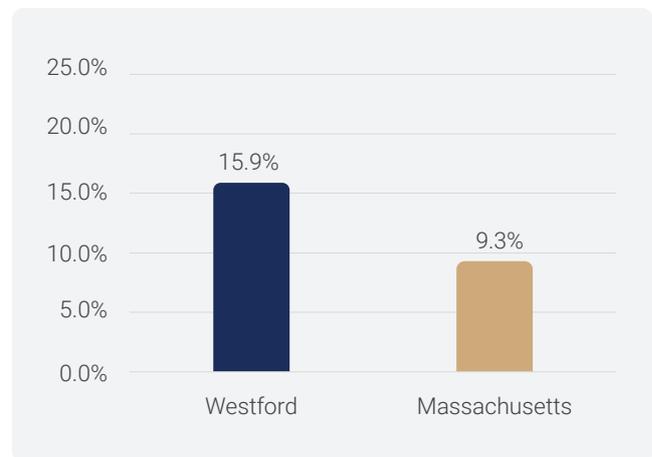
⁸ Centers for Disease Control and Prevention. (2023, July 25). Stigma Reduction. Stop Overdose. <https://www.cdc.gov/stopoverdose/stigma/index.html>

⁹ U.S. Department of Health and Human Services, National Institute on Drug Abuse. (2022, March 22). Addiction and Health. Drugs, Brains, and Behavior: The Science of Addiction. <https://nida.nih.gov/publications/drugs-brains-behavior-science-addiction/addiction-health>

¹⁰ Centers for Disease Control and Prevention. (2022, April 14). Alcohol Use and Your Health. Alcohol and Public Health. <https://www.cdc.gov/alcohol/fact-sheets/alcohol-use.htm#alcohol-use.htm>

Figure 13: Binge Drinking Among Adults, 2021

Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal, 2021 via MA PHIT

Figure 14: Excessive Drinking Among 65+, 2018

Source: MA Healthy Aging Community Profile, Westford Report, 2018

Tobacco Use

Cigarette smoking is the leading cause of preventable death and disease in Massachusetts, with more than 9,300 deaths due to smoking each year. Smoking affects nearly every organ of the body and can cause cancer, heart disease, stroke, lung diseases, type 2 diabetes, along with other chronic health conditions.¹¹ Massachusetts has increased tobacco control policies and protections over the years to reduce the availability of tobacco products and advertising, yet these protections are less likely to cover areas where people experiencing discrimination live and work. There continues to be inequities in the rates of smoking and tobacco-related disease among different populations in Massachusetts.¹²

In Massachusetts, an estimated 12% of adults report having smoked at least 100 cigarettes in their lifetime and currently smoke every day or some days, compared to 8% of adults in Westford (see Table 4).

There are 17 licensed tobacco retailers in Westford with an overall tobacco retail density of 0.7 retailers per 1,000 residents compared to 1.0 per 1,000 in the state of Massachusetts. The youth retail density is higher at 2.7 retailers per 1,000 residents under the age of 21 in Westford but still lower than the state rate at 4.8 per 1,000 residents under the age of 21 (see Table 4).

¹¹ Commonwealth of Massachusetts. (n.d.). How tobacco impacts your health. Massachusetts tobacco statistics, reports, and publications. <https://www.mass.gov/info-details/how-tobacco-impacts-your-health>

¹² Commonwealth of Massachusetts. (n.d.). Community Statistics and Tobacco Policies Data. Massachusetts tobacco statistics, reports, and publications. <https://www.mass.gov/info-details/community-statistics-and-tobacco-policies-data>

Table 4: Tobacco Use and Retail Density, 2021

	Tobacco Use	# of Tobacco Retailers	Overall Retail Density (per 1,000)	Youth Retail Density (per 1,000)
Westford	8%	17	0.7	2.7
Massachusetts	12%	6,593	1.0	4.8

Note: Retail Density is calculated as the total number of tobacco retail stores in a given geography divided by total population of that same geography (per 1,000). The Youth Retail Density is the total number of tobacco retail stores in a given geography divided by population of that same geography who are under the age of 21 (per 1,000).

Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal, 2021 via MA PHIT and Tobacco Retail Density Data via MA PHIT

Opioid Use

Opioids are a class of drugs that include prescription pain relievers such as morphine, oxycodone (OxyContin), and hydrocodone (Vicodin), along with synthetic opioids such as fentanyl, and illegal drugs such as heroin. When used appropriately, opioids can be used in treating acute and chronic pain, but there are risks for developing drug dependency or addiction which can lead to overdose or death.

In Westford, there was an average of 2.6 opioid-related overdose deaths per year from 2015 to 2022 with a high of 7 deaths in 2017 (see Table 5). The 5-year annual average rate (2016-2020) of opioid-related overdose deaths was lower in Westford at 13.2 per 100,000 residents compared to Massachusetts at 29.4 per 100,000.¹³

Table 5: Opioid-Related Overdose Deaths, 2015-2022

Year	2015	2016	2017	2018	2019	2020	2021	2022
Westford	0	3	7	2	0	4	4	1

Source: MA Department of Public Health, Opioid Overdose Related Death by City/Town 2015 – 2022 Report

Note: Deaths for 2020 through 2022 are still being confirmed and may be updated in later reports.

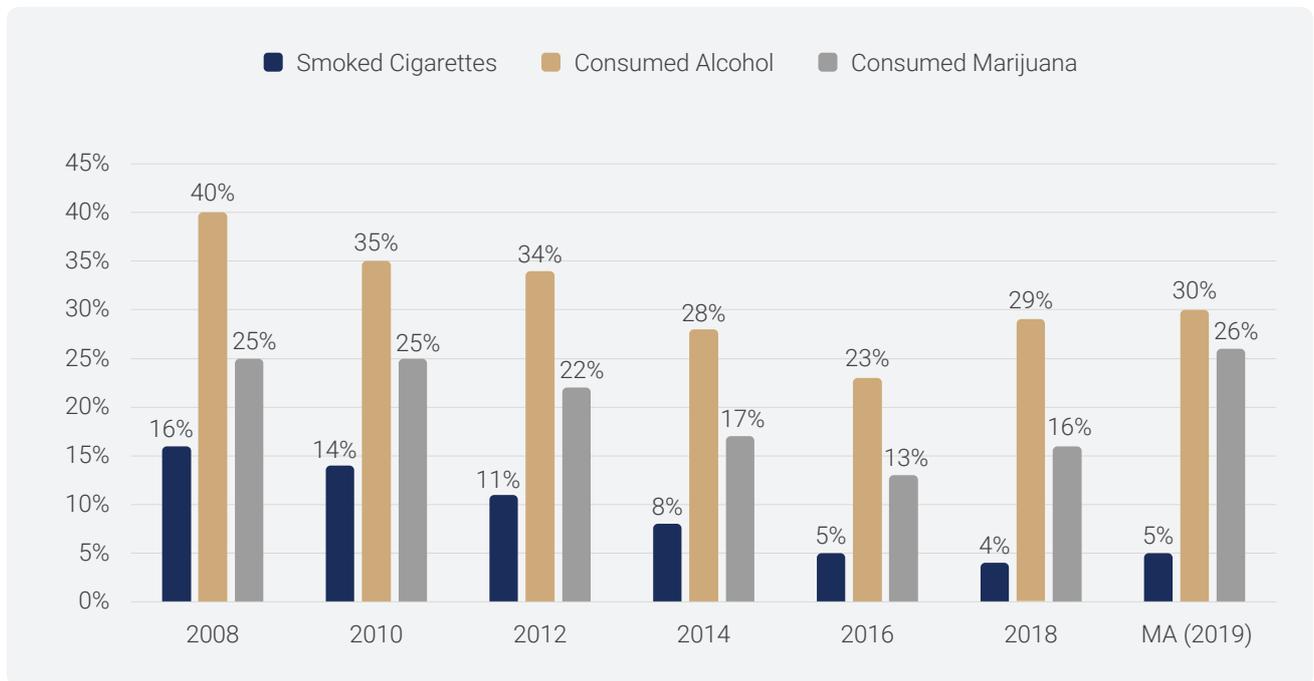
Substance Use Among Youth

Among adolescents, the most common types of substance use include alcohol use, marijuana use, and vaping or e-cigarette use, all of which can have impacts on the health and development of youth.¹⁴ In Westford, the proportion of high school students reporting using alcohol in the past 30 days decreased from 40% in 2008 to 29% in 2018, which is comparable to the state average at 30% in 2019 (see Figure 15). Across this same time period, the proportion of high school students reporting using marijuana in the last 30 days also decreased from 25% to 16%, which is lower than the state average of 26% in 2019.

¹³ Massachusetts Department of Public Health. (n.d.). Annual Massachusetts Death Reports. Massachusetts Vital Records Data and Publications. <https://www.mass.gov/lists/annual-massachusetts-death-reports>

¹⁴ U.S. Department of Health and Human Services Office of Population Affairs. (n.d.). Substance Use in Adolescence. <https://opa.hhs.gov/adolescent-health/substance-use-adolescence>

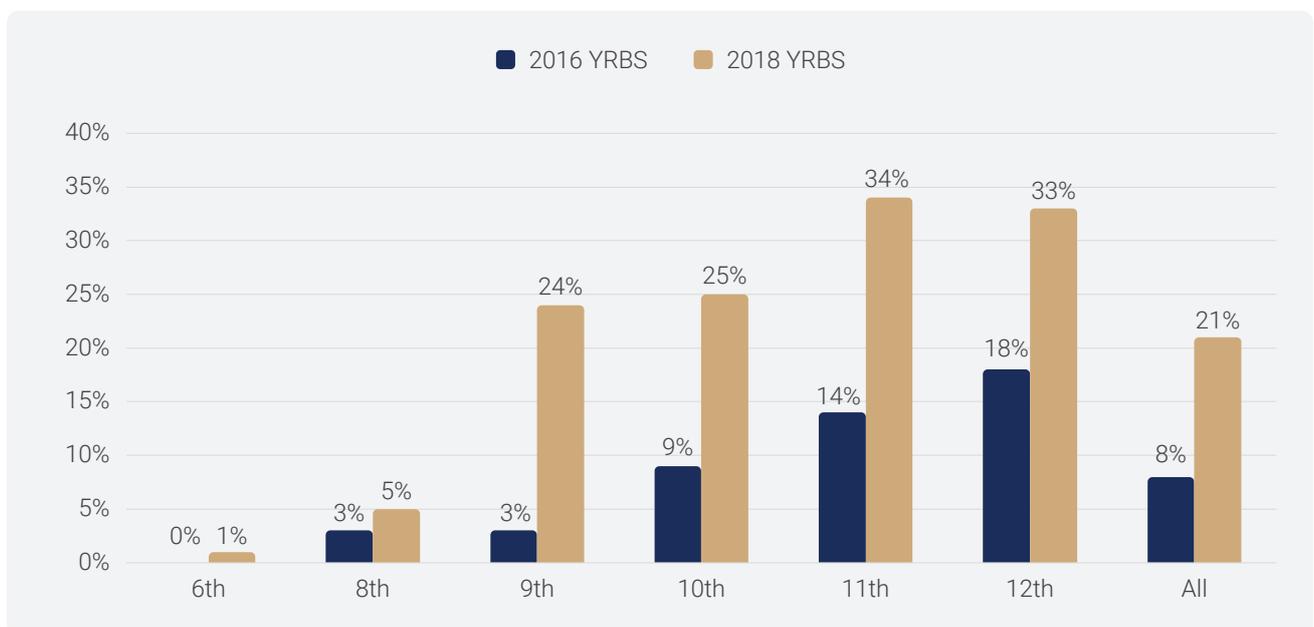
Figure 15: Substance Use in the Past 30 Days Among Westford High School Students, 2008-2018



Source: Youth Risk Behavior Survey, Westford Public Schools, Emerson 2018 YRBS Results

The proportion of high school students reporting to have smoked cigarettes in the past 30 days also dropped from 16% to 4% by 2018 in Westford, although there have been recent increases in students reporting vaping or using e-cigarettes. From 2016 to 2018, the proportion of students in middle school and high school in Westford reporting to have vaped in the last 30 days increased across every grade level, with the most drastic increase seen among 9th graders with 3% reporting vaping in 2016 up to 24% two years later in 2018 (see Figure 16).

Figure 16: Vaping Among Westford Students in the Past 30 Days, 2016 vs 2018

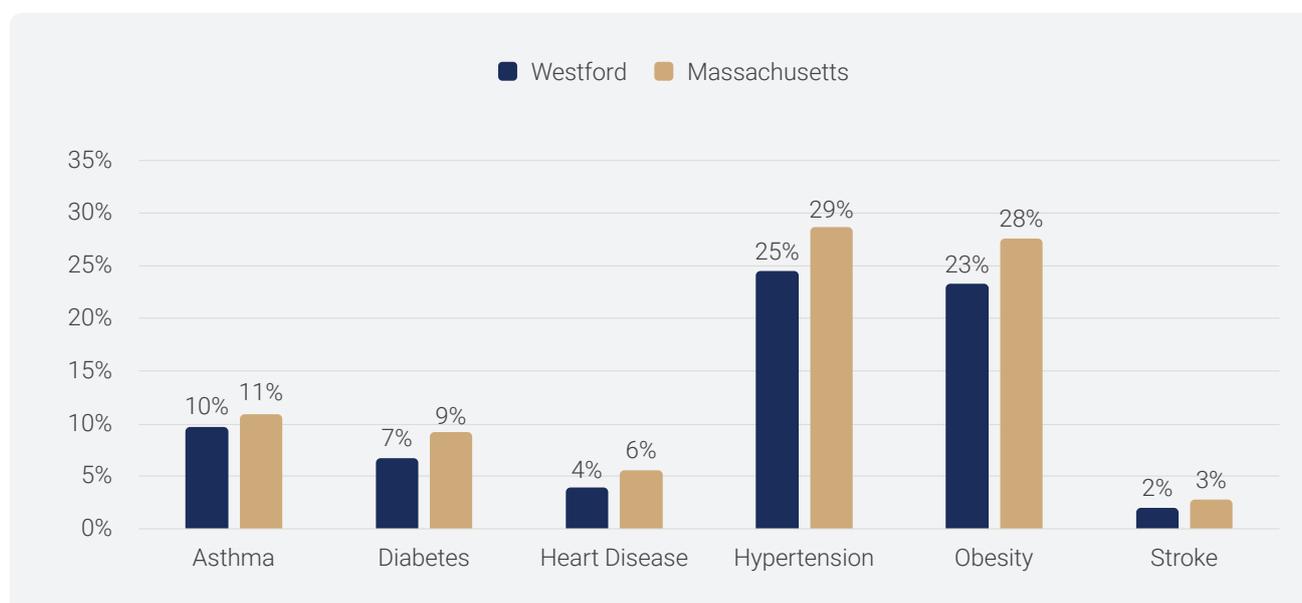


Source: Youth Risk Behavior Survey, Westford Public Schools, Emerson 2018 YRBS Results

CHRONIC HEALTH & WELLNESS

Chronic diseases are broadly defined as conditions that last more than a year and/or require ongoing medical attention or limit daily activities.¹⁵ These include conditions such as cancer, diabetes, chronic lower respiratory disease, stroke, cardiovascular disease, and others. Chronic diseases contribute to over half of all deaths in Massachusetts¹⁶, highlighting the significance of these conditions on the health and well-being of communities. It is estimated that 25% of residents in Westford have hypertension, 23% are obese, 10% have asthma, 7% have diabetes, 4% have heart disease, and 2% have had a stroke, although these proportions are lower than the state estimates across Massachusetts (see Figure 17).

Figure 17: Proportion of Residents Experiencing Chronic Diseases, 2021



Source: Behavioral Risk Factor Surveillance System (BRFSS) (2021). Accessed via MA Population Health Information Tool (PHIT)

Although poor nutrition, physical inactivity, and tobacco use are the main risk factors in developing chronic diseases, the ability to maintain a healthy lifestyle can vary depending on someone's social and economic environment. In Massachusetts, Black and Hispanic/Latinx residents, low-income residents, and Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ+) residents are more likely to experience barriers to leading a healthy life, resulting in differences in health outcomes and chronic disease. For example, Black and Hispanic residents have higher rates of emergency room visits for diabetes and higher hospitalization rates for asthma in Massachusetts.¹⁷

¹⁵ Centers for Disease Control and Prevention. (2022, July 21). About Chronic Diseases. National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP). <https://www.cdc.gov/chronicdisease/about/index.htm#:~:text=Print>About%20Chronic%20Diseases.disability%20in%20the%20United%20States>.

¹⁶ Massachusetts Department of Public Health. (n.d.). Chronic Diseases. Population Data Stories. <https://www.mass.gov/info-details/chronic-diseases>

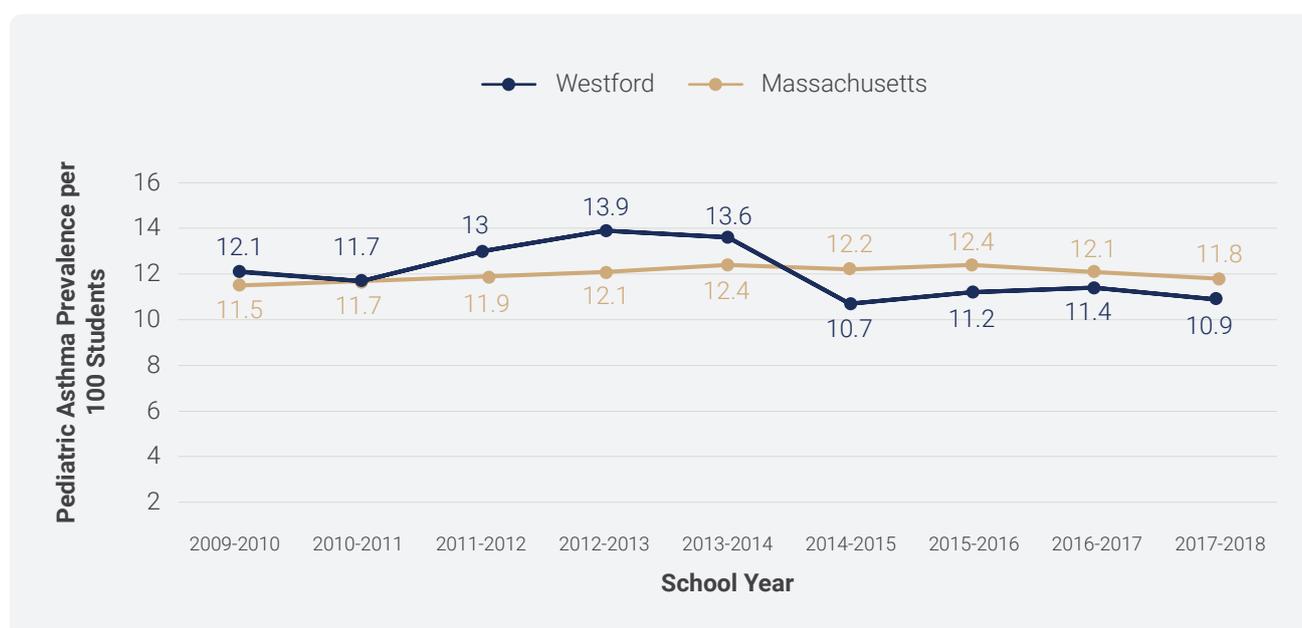
¹⁷ Massachusetts Department of Public Health. (n.d.). Chronic Diseases. Population Data Stories. <https://www.mass.gov/info-details/chronic-diseases>

Asthma

Asthma is a chronic lung disease that causes repeated episodes of wheezing, breathlessness, chest tightness, and nighttime or early morning coughing. Asthma can be managed through medication and monitoring for triggers, such as smoke, dust, chemicals, or pollen. It is estimated that about 1 in 13 people in the U.S. have asthma,¹⁸ and an estimated 44% of children with asthma have uncontrolled asthma, which can lead to frequent and intense episodes and increased risk of emergency department visits.¹⁹

Among Westford respondents in the GLHA Community Health Survey, 11% indicated that they have been affected by asthma, with 22% knowing someone in their community who has been affected by asthma. Among students in Westford, the rate of pediatric asthma has ranged from 12.1 per 100 students in 2010 to 10.9 per 100 students in 2018 which is comparable to the state rate of 11.8 per 100 students in 2018 (see Figure 18).

Figure 18: Pediatric Asthma Prevalence per 100 Students, 2009-2010 to 2017-2018



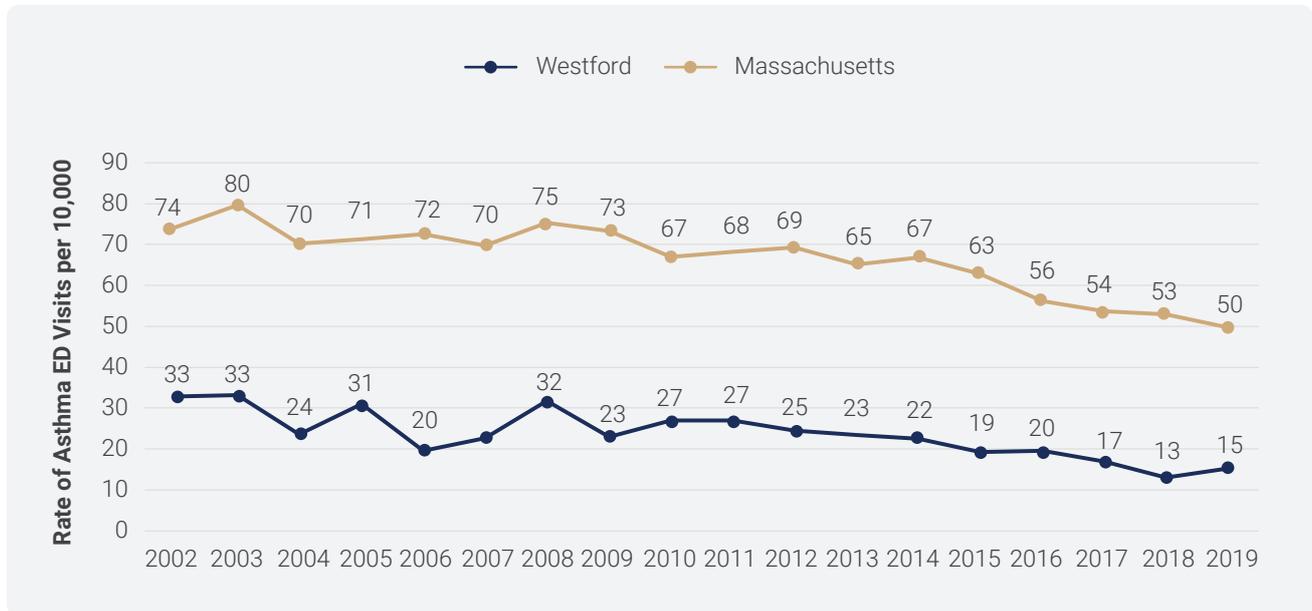
Source: Massachusetts Environmental Public Health Tracking, Pediatric Asthma, 2009-2010 to 2017-2018

The annual average rate of emergency department visits for asthma has decreased in Massachusetts from 74 visits per 10,000 residents in 2022 to 50 per 10,000 residents in 2019. Westford has followed a similar trend of decreasing from 33 emergency department visits due to asthma per 10,000 residents in 2002 to 15 visits per 10,000 residents in 2019 (see Figure 19).

¹⁸ Centers for Disease Control and Prevention. (2023, May 10). Most Recent National Asthma Data. Asthma. https://www.cdc.gov/asthma/most_recent_national_asthma_data.htm

¹⁹ Centers for Disease Control and Prevention. (2022, July 1). Uncontrolled Asthma Among Children with Current Asthma, 2018–2020. Asthma. https://www.cdc.gov/asthma/asthma_stats/uncontrolled-asthma-children-2018-2020.htm

Figure 19: Annual Average Rate of Emergency Dept Visits per 10,000 for Asthma, 2002-2019



Source: Massachusetts Environmental Public Health Tracking, Asthma Hospitalization, 2002-2020

Cancer

Cancer is a disease in which some of the body's cells grow uncontrollably and spread to other parts of the body. Cancer can start almost anywhere in the human body, but some types of cancers are more common than others (i.e. lung cancer, breast cancer, prostate cancer, colon and rectal cancer).²⁰ Some risk factors to developing cancer include age, alcohol & tobacco use, radiation, family history of cancer, and exposure to cancer-causing substances.²¹ In the GLHA Community Health Survey, 13% of Westford respondents indicated that they have experienced cancer, with 37% indicating that they know someone impacted by cancer.

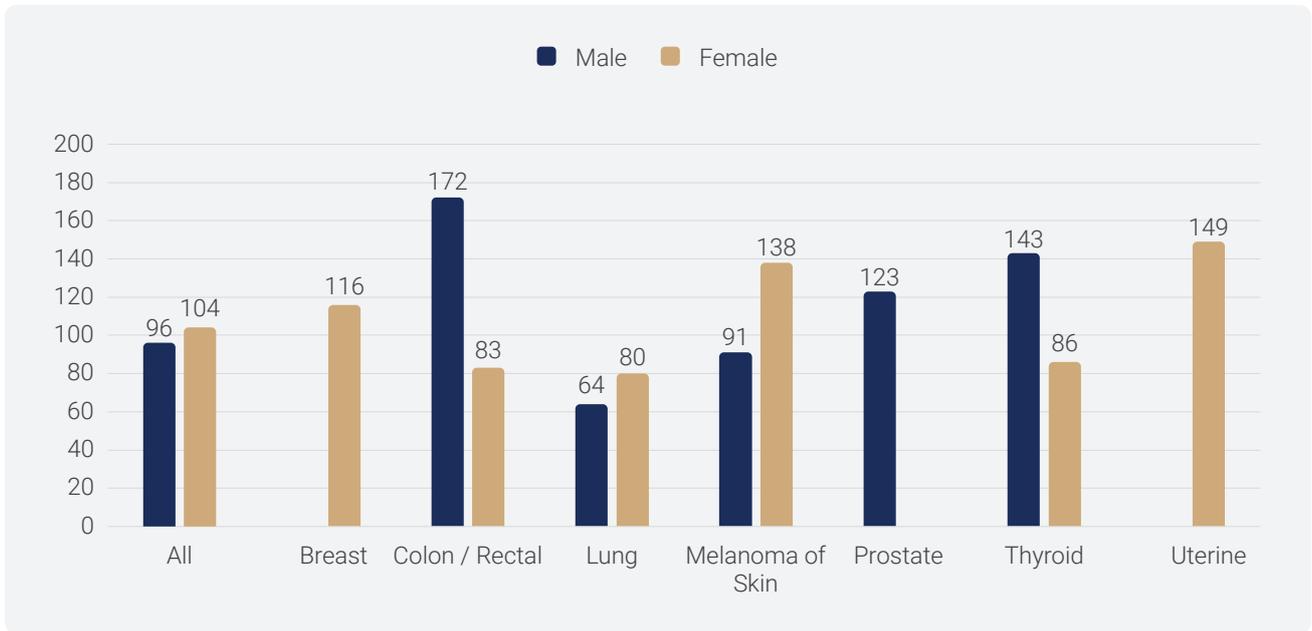
The most recent community-specific data from the Massachusetts Cancer Registry calculates the Standardized Incidence Ratio (SIR) of new cancer diagnoses which describes how a city/town's cancer experience (adjusted for age and sex) compares with the state as a whole. A SIR of exactly 100 indicates that a city/town's incidence of a certain type of cancer is equal to that expected based on statewide average age-specific incidence rates, whereas a SIR of more than 100 indicates an incidence is higher than expected for that type of cancer. (For example, a SIR of 105 indicates that a city/town's cancer incidence is 5% higher than expected).

In Westford, the overall SIR for all cancer types among males is slightly lower than expected whereas it is slightly higher than expected among females (see Figure 20). When looking at colon/rectal cancer and thyroid cancer, men have a higher-than-expected rate of new diagnoses at 172 and 143 respectively, whereas women have lower-than-expected rates of each in Westford. The opposite trend is observed for melanoma of the skin in which women in Westford have a higher-than-expected rate of diagnoses at 138, whereas men have a lower-than-expected rate. Women in Westford also have a higher-than-expected rate of breast cancer and uterine cancer at 116 and 149, respectively, and men in Westford have a higher-than-expected rate of prostate cancer at 123.

²⁰ U.S. Department of Health and Human Services, National Cancer Institute. (2023, March 7). Common Cancer Types. Cancer Types. <https://www.cancer.gov/types/common-cancers>

²¹ U.S. Health and Human Services, National Cancer Institute. (2015, December 23). Risk Factors for Cancer. Cancer Causes and Prevention. <https://www.cancer.gov/about-cancer/causes-prevention/risk>

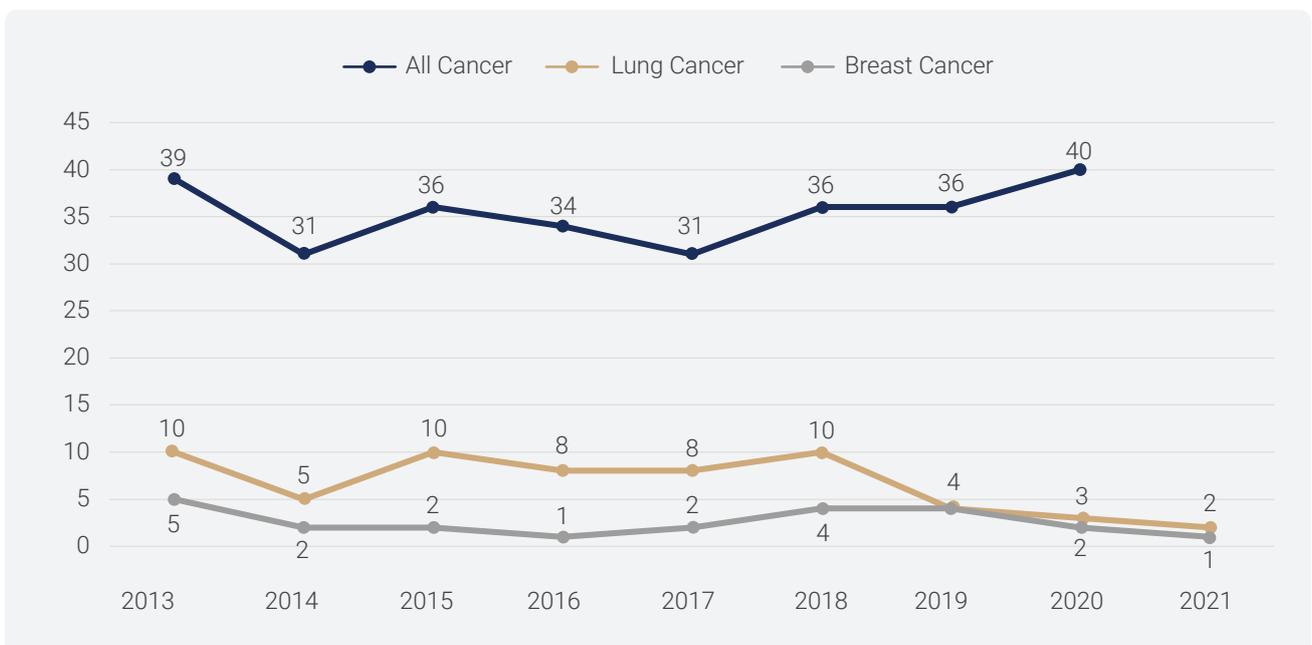
Figure 20: Standardized Incidence Ratio of New Cancer Diagnosis in Westford, 2011-2015



Source: MA Cancer Registry, Cancer Incidence City & Town Supplement, 2011 - 2015

Cancer is the leading cause of death in Westford. From 2013 to 2020, there were between 31 and 40 deaths per year due to cancer (see Figure 21). During the same time period, the number of lung cancer deaths ranged from 2 to 10 deaths per year among Westford residents, while there were less than 5 deaths per year due to breast cancer. Overall, the rate of cancer deaths per 100,000 in Westford is lower than the state rate per 100,000 (Table 6).

Figure 21: Annual Cancer Deaths in Westford, 2013-2021



Source: MA Registry of Vital Records and Statistics, Annual Massachusetts Death Reports, 2013 – 2021

Note: Total cancer deaths not reported in 2021 Annual Death Report

Table 6: Cancer Death Rate per 100,000, 2013-2020

	2013	2014	2015	2016	2017	2018	2019	2020
Westford	174	136	155	143	129	149	147	163
Massachusetts	195	192	190	188	191	185	180	180

Source: MA Registry of Vital Records and Statistics, Annual Massachusetts Death Reports, 2013 – 2020

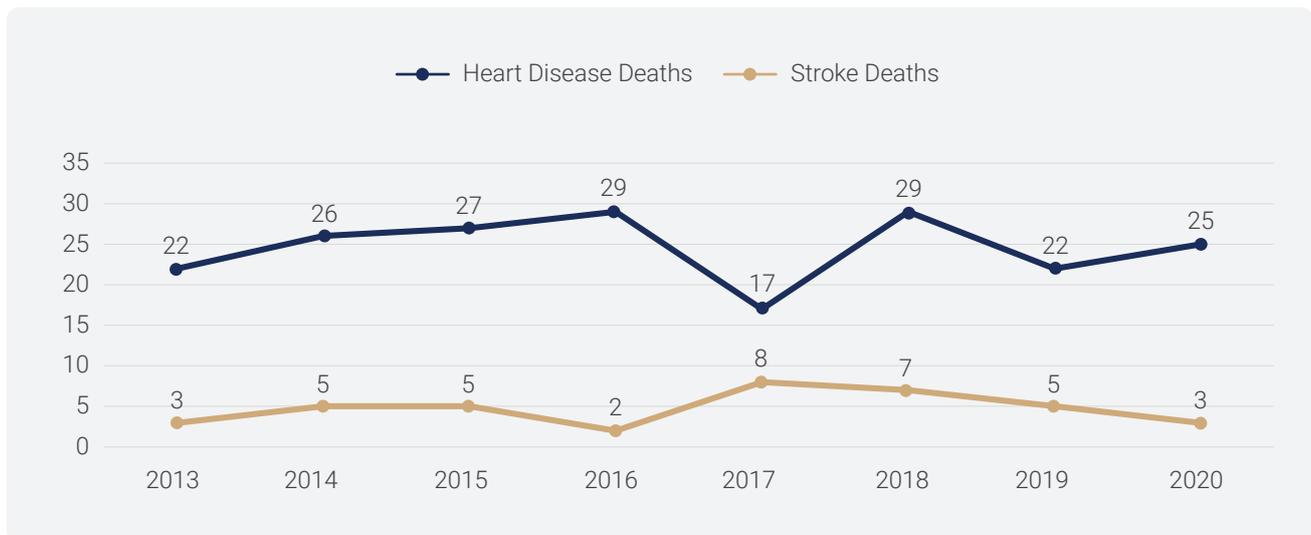
Heart Disease, Stroke, and Hypertension

In the most recent annual death report from Massachusetts, heart disease was the second leading cause of death in 2021, with stroke not far behind as the sixth leading cause of death.²² Heart disease includes several types of heart conditions, the most common being coronary artery disease (CAD), which affects the blood flow to the heart and can increase the risk of a stroke. High blood pressure, also known as hypertension, can also increase the risk of heart-related problems such as heart disease, heart attack, and stroke.

The CDC Behavioral Risk Factors Surveillance System (BRFSS) estimates that 4% of adults in Westford have heart disease compared to 6% across Massachusetts, and that 2% of adults in Westford have had a stroke compared to 3% across the state of Massachusetts. When looking at hypertension, BRFSS estimates that 25% of adults in Westford have high blood pressure, compared to 29% of the adults across the state of Massachusetts.²³

Of the Westford residents who participated in the GLHA Community Health Survey, 9% noted that they have been affected by heart disease, and 32% noted they know someone who has been affected by heart disease. From 2013 to 2020, there were between 17 and 29 deaths per year due to heart disease (see Figure 22). During the same time period, there were between 2 and 8 deaths per year due to stroke. Compared to the state of Massachusetts, the annual death rate due to heart disease per 100,000 residents has been lower in Westford each year since 2013 (Table 7).

Figure 22: Heart Disease Deaths in Westford, 2013-2020



Source: MA Registry of Vital Records and Statistics, Annual Massachusetts Death Reports, 2013–2020

²² Massachusetts Department of Public Health. (2021). Annual Massachusetts Death Reports. Vital Records Data and Publications. <https://www.mass.gov/lists/annual-massachusetts-death-reports>

²³ Behavioral Risk Factor Surveillance System (BRFSS) (2021). Accessed via MA Population Health Information Tool (PHIT)

Table 7: Heart Disease Death Rate per 100,000, 2013-2020

	2013	2014	2015	2016	2017	2018	2019	2020
Westford	98	114	116	122	71	120	90	102
Massachusetts	183	178	181	177	179	176	168	172

Source: MA Registry of Vital Records and Statistics, Annual Massachusetts Death Reports, 2013 – 2020

Diabetes

Diabetes is a chronic health condition that impacts how the body responds to insulin, resulting in too much blood sugar in the bloodstream which can lead to heart disease, vision loss, and kidney disease. Most people with diabetes have type 2 diabetes which develops over time and can be prevented or delayed with healthy lifestyle changes, although many socioeconomic and environmental factors may impact someone's ability to maintain a nutritious diet or active lifestyle. About 5-10% of individuals with diabetes have type 1 diabetes which is thought to be caused by an autoimmune reaction and is not believed to be preventable.²⁴

An estimated 7% of adults in Westford have diabetes, compared to 9% across the state of Massachusetts.²⁵ Of the Westford residents that participated in the GLHA Community Health Survey, 10% responded that they have been affected by diabetes, followed by 34% responding that they know someone who has been impacted. From 2013 to 2020, there were 0 to 4 deaths per year due to diabetes in Westford, with a lower diabetes death rate per 100,000 each year in Westford compared to the state during the same time period (Table 8).

Table 8: Diabetes Deaths and Death Rate per 100,000, 2013-2020

	2013	2014	2015	2016	2017	2018	2019	2020
Westford Deaths	2	0	2	2	1	3	4	1
Westford Death Rate	9	0	9	8	4	12	16	4
Massachusetts Death Rate	17	18	21	19	19	20	20	23

Source: MA Registry of Vital Records and Statistics, Annual Massachusetts Death Reports, 2013–2020

Body Weight (Overweight, Underweight, Obesity)

Maintaining a healthy body weight can be an important factor in reducing the risks of some chronic diseases associated with obesity such as heart disease, hypertension, and type 2 diabetes. Many factors contribute to achieving and maintaining a healthy weight, such as nutrition, physical activity, sleep, and stress, all of which are impacted by the environment in which someone lives. Excess weight gain can be impacted by behavior, genetics, and certain medications, along with community and societal factors such as access to healthy, affordable foods and availability of safe and convenient spaces for physical activity.

²⁴ Centers for Disease Control and Prevention. (2023, September 5). What is diabetes?. Diabetes. <https://www.cdc.gov/diabetes/basics/diabetes.html>

²⁵ Behavioral Risk Factor Surveillance System (BRFSS) (2021). Accessed via MA Population Health Information Tool (PHIT)

In Westford, an estimated 23% of adults are obese (measured as a body mass index ≥ 30.0 kg/m², calculated from self-reported weight and height), compared to 28% of adults in Massachusetts.

Among children and adolescents, an estimated 20% of students surveyed in grades 1, 4, 7, and 10 in the Westford School District are overweight or obese compared to 32% of students in the same grades across Massachusetts (see Table 9). On the other hand, a higher proportion of Westford students are underweight at 5.9% compared to Massachusetts at 3.3% (Table 10). In both Westford and Massachusetts, a higher proportion of male students are overweight or obese compared to female students.

Table 9: Overweight or Obese Children

	Males	Females	Total
Westford	22.7%	18.0%	20.4%
Massachusetts	33.5%	31.3%	32.4%

Note: Represents grades 1, 2, 4, 7

Source: MA Public School Districts BMI Screening, 2017

Table 10: Underweight Children

	Males	Females	Total
Westford	6.6%	5.1%	5.9%
Massachusetts	3.4%	3.1%	3.3%

Note: Represents grades 1, 2, 4, 7

Source: MA Public School Districts BMI Screening, 2017

INFECTIOUS DISEASE

Infectious diseases can cause illness, suffering, and even death, as highlighted in recent years with the onset of the COVID-19 pandemic. Infectious diseases are illnesses caused by bacteria, viruses, or fungi that enter the body, multiply, and cause an infection. Some infectious diseases are contagious and can spread from one person to another (i.e. flu, COVID-19, chlamydia, etc.) while other infectious diseases are spread through water or food (i.e. Salmonella through contaminated food) or other insects or animals (i.e. Lyme disease through ticks).²⁶

The individuals and communities that are most impacted by infectious disease can vary depending on the social determinants of health, such as poverty, unequal access to care, lack of education, stigma, and racism. These factors are linked to health disparities in which differences in disease burden can exist depending on one’s race/ethnicity, geographic location, sexual orientation, gender, etc.²⁷ For example, Black communities in the U.S. are more likely to have been impacted by the COVID-19 pandemic, due to distrust and discrimination in the medical system, disproportionate impact of underlying health conditions, increased risk through working essential jobs or living in higher density neighborhoods, along with other socioeconomic factors.²⁸

²⁶ Centers for Disease Control and Prevention. (2023, January 17). Who We Are. National Center for Emerging and Zoonotic Infectious Diseases (NCEZID). <https://www.cdc.gov/ncepid/who-we-are/index.html>

²⁷ Centers for Disease Control and Prevention. (2020, September 14). Defining Health Disparities. Health Disparities in HIV, Viral Hepatitis, STDs, and TB. <https://www.cdc.gov/nchstp/healthdisparities/default.htm>

²⁸ Andraszka, E. A., Alabi, O., Dorsey, C., Erben, Y., Velazquez, G., Franco-Mesa, C., & Sachdev, U. (2021). Healthcare Disparities During the COVID-19 Pandemic. *Seminars in Vascular Surgery*, 34(3), 82–88. <https://doi.org/10.1053/j.semvascsurg.2021.08.002>

COVID-19

Coronavirus disease 2019, also known as COVID-19, is caused by the virus SARS-CoV-2. Transmission occurs when an infected person breathes out droplets that contain the virus that then come into contact with another person’s eyes, nose, or mouth. Although most people have mild symptoms similar to those of a cold or flu, some people can become severely ill. As of July 2023, over 1 million people have died in the United States due to COVID-19. Individuals who are older, immunocompromised, or have underlying health conditions may be more likely to experience severe disease or hospitalization.

From January 2020 to September 2023, the state of Massachusetts has identified over 2 million cases of COVID-19, with 5,649 cases occurring in Westford (Table 11). This has resulted in a cumulative case rate of 229 cases per 1,000 residents in Westford which is lower than the state cumulative case rate of 294 cases per 1,000 residents.

Table 11: Cumulative Cases and Case Rate per 1,000 (Jan 1st, 2020 to Sep 28th, 2023)

	Total Case Count	Case Rate per 1,000
Westford	5,649	229
Massachusetts	2,065,669	294

Source: Archive of COVID-19 Cases in Massachusetts, COVID-19 Raw Data, September 28th, 2023

Sexually Transmitted Infections and HIV/AIDS

Sexually transmitted infections (STIs) include viruses, bacteria, fungi, or parasites that can transmit between people through sexual contact. Chlamydia is the most frequently reported STI in Massachusetts with over 28,000 cases reported in 2022. Gonorrhea has also been increasing in recent years with 9,129 cases reported in Massachusetts in 2022, followed by 1,593 cases of syphilis cases. Across each of these STIs, Westford has a lower incidence rate of confirmed cases per 100,000 residents compared to the state of Massachusetts (Table 12).

Table 12: Incidence Rate of Confirmed STI Cases per 100,000 (2022)

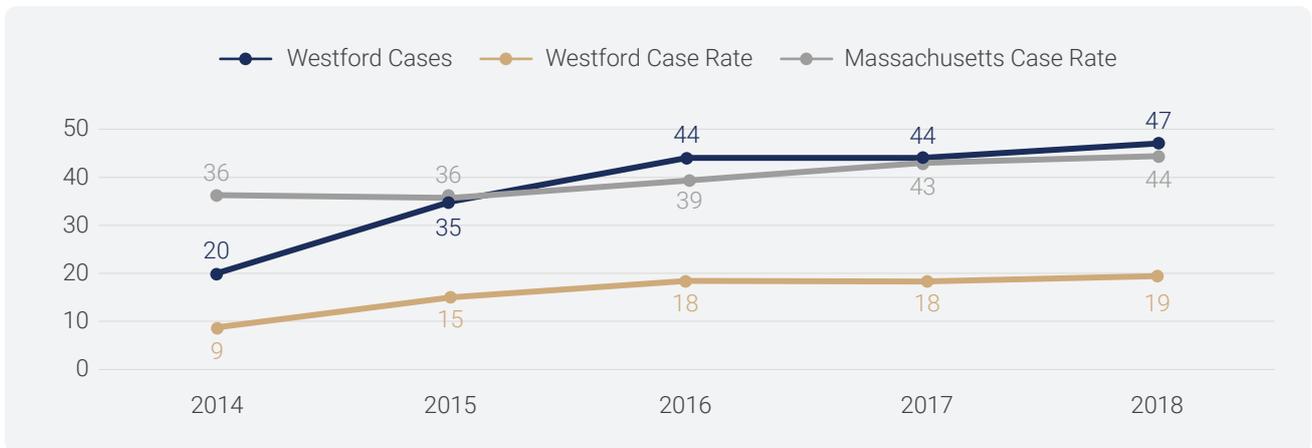
	Chlamydia Rate	Gonorrhea Rate	Syphilis Rate	New HIV Diagnosis Rate
Westford	100 - 149	≤19	No cases	< 2
Massachusetts	404	130	23	19

Source: MDPH Bureau of Infectious Disease and Laboratory Sciences. 2022 Massachusetts Integrated HIV, STD and Viral Hepatitis Surveillance Report, December 2023

Human immunodeficiency virus (HIV) is transmitted through exposure to blood, semen, vaginal secretions, or breast milk, most commonly through unprotected sex or sharing injection drug equipment. HIV attacks the immune system and if untreated, it can lead to immunodeficiency syndrome (AIDS). The number of new HIV infection diagnoses has decreased in recent years in Massachusetts, although COVID-19 may have impacted access to HIV testing and case surveillance activities. In Westford, the new HIV diagnosis rate is less than 2 cases per 100,000 compared to 19 per 100,000 across the state of Massachusetts in 2022 (Table 12).

From 2014 to 2018, Westford has had an increase in confirmed chlamydia cases from 20 cases in 2014 to 47 cases in 2018 (Figure 23). This has resulted in a chlamydia case rate increasing from 9 cases per 10,000 residents in 2014 to 19 cases per 10,000 residents in 2018, which is still lower than the increasing chlamydia case rate of 36 to 44 per 10,000 residents among Massachusetts residents during the same time period.

Figure 23: Chlamydia Cases and Cases Rate per 10,000 (2014-2018)



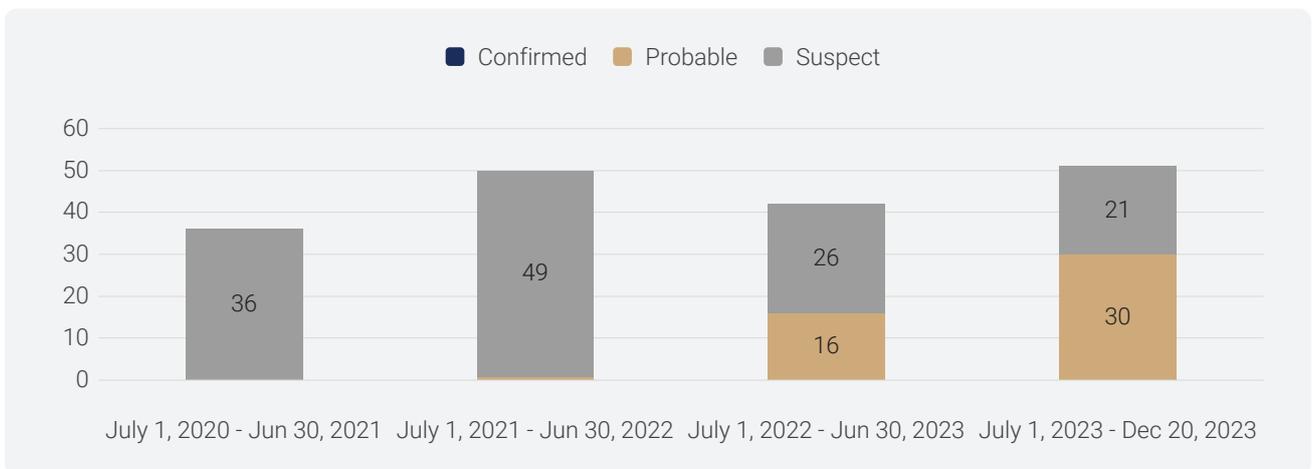
Source: MDPH Chlamydia Cases Reported by City/Towns in Massachusetts in 2014-2018

Tick / Insect Related Illness

Different kinds of ticks feed on the blood of mammals, birds, or reptiles and can spread a range of diseases when they bite humans. Tick activity is weather-dependent, although there are two peaks during the year usually occurring from March/April through August and then from October through November. The majority of cases of tick-borne disease occur in June through August, with Lyme disease, babesiosis and anaplasmosis being the most common tick-borne diseases.²⁹

In Westford, Lyme disease is the most common tick-borne disease, ranging from 36 to 51 probable and suspect cases reported each fiscal year (July 1st through June 30th) in Westford during the last few years (Figure 24). It is worth noting that the highest number of cases (51 suspect and probable cases) were reported in the most recent fiscal year, which at the time of this report, is only halfway through the fiscal year (representing just 6 months of data from July 1st, 2023 to Dec 20th, 2023). It is also worth noting that the proportion of cases labeled as probable instead of suspect increased starting in 2022 due to changes in the case definitions of Lyme disease.³⁰

Figure 24: Lyme Disease Cases in Westford by Fiscal Year (July 2020–Dec 2023)



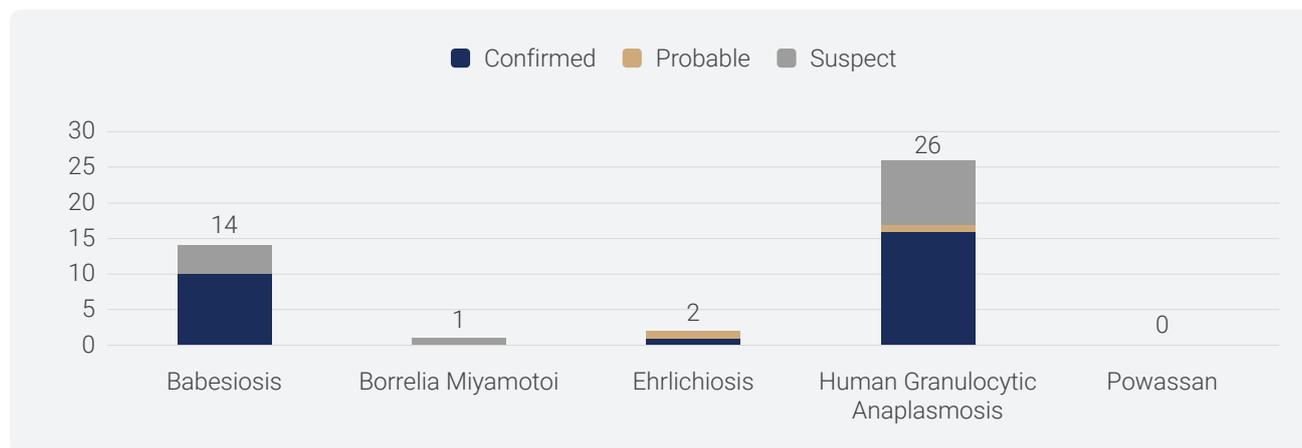
Source: Massachusetts Virtual Epidemiological Network (MAVEN)

²⁹ Massachusetts Department of Public Health. (n.d.). Monthly Tick-Borne Disease Reports. Tick-Borne Diseases. <https://www.mass.gov/lists/monthly-tick-borne-disease-reports>

³⁰ Centers for Disease Control and Prevention. (2021, August 30). Lyme Disease (Borrelia burgdorferi) 2022 Case Definition. National Notifiable Disease Surveillance System (NNDSS). <https://ndc.services.cdc.gov/case-definitions/lyme-disease-2022>

The second most common tick-related disease in Westford is Human Granulocytic Anaplasmosis, in which there were a total of 26 confirmed, probable, or suspect cases from July 2020 to December 2023 (Figure 25). During the same time period, there were 14 cases of Babesiosis, along with 2 cases of Ehrlichiosis, 1 case of *Borrelia miyamotoi* and no cases of Powassan.

Figure 25: Tick-Related Disease Cases in Westford (July 2020-Dec 2023)



Source: Massachusetts Virtual Epidemiological Network (MAVEN)

ENVIRONMENTAL HEALTH

Environmental health focuses on the interactions and relationships between the environment and the health of individuals and communities. Environmental hazards, such as poor air or water quality, extreme weather, or chemical exposures, can contribute to chronic conditions (i.e. cancer, asthma, etc.) or acute illnesses (i.e. heat exhaustion, allergic reactions, etc.).³¹ Due to historical, economic, and sociopolitical factors, some populations may be more susceptible to poorer environmental conditions and their associated health disparities, including communities of color, low-income households, unhoused individuals, older adults, and pregnant women and children.³² For example, neighborhoods of color are more likely to be near pollution sources, such as factories and industrial facilities, which is connected to the effects of discriminatory city planning and residential segregation.³³

Climate change is anticipated to further disrupt ecological systems with rising temperatures, more extreme weather events, increasing CO² levels, and rising sea levels. These disruptions can lead to increased respiratory and cardiovascular disease, injuries and premature deaths due to extreme weather events, changes in the prevalence and geographic distributions of food- and water-borne illnesses and infectious diseases, and threats to mental health, all of which are anticipated to impact communities unequally due to factors such as socioeconomic status, age, and location.³⁴

³¹ Centers for Disease Control and Prevention. (2019, January 3). Introduction to Environmental Public Health Tracking. National Environmental Public Health Tracking. <https://www.cdc.gov/nceh/tracking/tracking-intro.html>

³² Office of Disease Prevention and Health Promotion. (n.d.). Environmental Conditions. Environmental Conditions - Healthy People 2030. <https://health.gov/healthypeople/priority-areas/social-determinants-health/literature-summaries/environmental-conditions>

³³ Woo, B., Kravitz-Wirtz, N., Sass, V., Crowder, K., Teixeira, S., & Takeuchi, D. T. (2019). Residential segregation and racial/ethnic disparities in ambient air pollution. *Race and Social Problems*, 11(1), 60–67. doi: 10.1007/s12552-018-9254-0

³⁴ Centers for Disease Control and Prevention. (2022, April 25). Climate Effects on Health. Climate and Health. <https://www.cdc.gov/climateandhealth/effects/default.htm>

Childhood Lead Poisoning

Prior to 1978, many homes contained lead paint which is dangerous to health, especially for young children. Massachusetts regulations require that all children are tested for blood lead between 9 and 12 months of age, and again at ages 2 and 3 years.³⁵ Children with blood lead levels ≥ 5 $\mu\text{g}/\text{dL}$ should receive interventions such as education, environmental investigation, and additional medical monitoring.

In Westford, a lower proportion of homes were built before 1978 (42%) compared to the state of Massachusetts (67%), and a higher proportion of children (75%) have been screened for lead than the state (68%) (see Table 13). The rate of children tested for lead with a blood lead level above ≥ 5 $\mu\text{g}/\text{dL}$ is 7.7 per 1,000 children in Westford, which is lower than the statewide rate of 13.6 per 1,000 children. Overall, the state of Massachusetts has not deemed Westford a high-risk community for lead poisoning as of 2021.

Table 13: Childhood Lead Screening, 2021

	Homes Built Before 1978	Children Screened for Lead	Rate of Blood Lead Levels ≥ 5 $\mu\text{g}/\text{dL}$ *
Westford	42%	75%	7.7 per 1000
Massachusetts	67%	68%	13.6 per 1000

*Represents 5-year average rate (2017-2021) for children age 9-47 months

Source: MDPH BCEH Childhood Lead Poisoning Prevention Program, 2021

Accessible Parks

Accessible community green spaces and public parks can have a positive impact on the physical, mental, and social health of a community. Utilizing available parks can reduce the risk of some chronic conditions such as cardiovascular disease and diabetes, along with reducing stress levels and improving mental health. Parks also provide a space for individuals and communities to gather and create a sense of belonging.³⁶

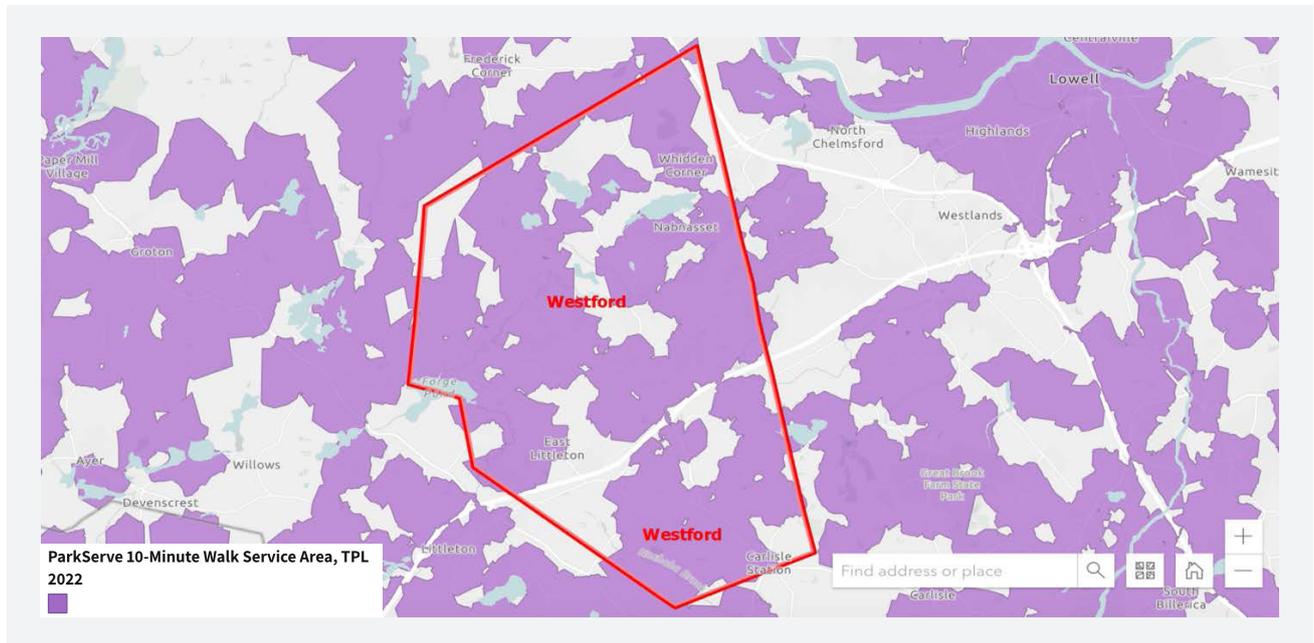
To visually display the availability of parks within Westford, the following map demonstrates the residents of Westford who live within a 10-minute walk from a park (see Figure 26). Of the Westford residents who participated in the GLHA Community Health Survey, 88% responded that it was definitely accurate that there are safe, clean parks in the community. In another recent community survey, 10% of Westford respondents noted that they could not be active due to a lack of sidewalks, parks, or bike trails, indicating that most respondents had access to sidewalks, parks, and bike trails.³⁷

³⁵ Centers for Disease Control and Prevention. (2022, April 25). Climate Effects on Health. Climate and Health. <https://www.cdc.gov/climateandhealth/effects/default.htm>

³⁶ Childhood Lead Poisoning Prevention Program (November 7th, 2022). 2021 Annual Childhood Lead Poisoning Surveillance Report. Massachusetts Department of Public Health. <https://www.mass.gov/doc/2021-annual-childhood-lead-poisoning-surveillance-report-0/download>

³⁷ Cohen, M., Burrowes, K., Gwam, P. (2022). The Health Benefits of Parks and Their Economic Impacts: A Review of Literature. Urban Institute Research Report. https://www.urban.org/sites/default/files/2022-03/the-health-benefits-of-parks-and-their-economic-impacts_0.pdf

Figure 26: Areas Within 10-Minute Walk to a Park, 2020



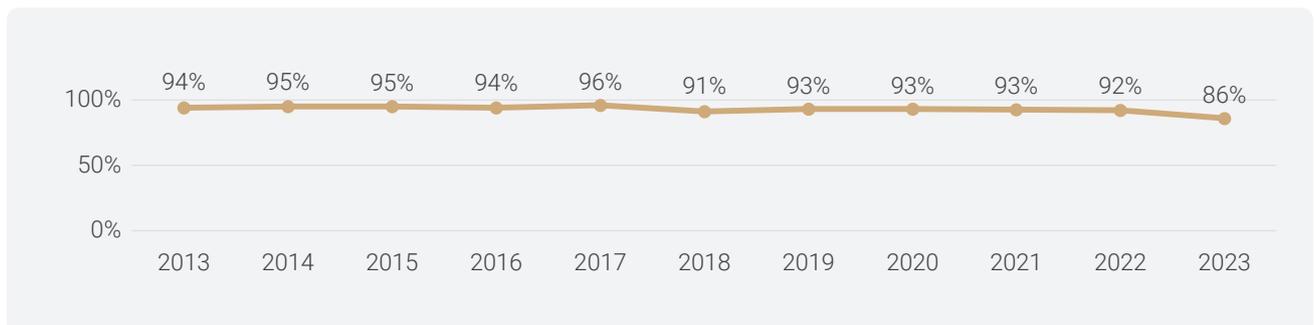
Source: Trust for Public Land, 2020 via MA DPH PHIT

Air Quality

Particle pollution in the air can impact health, especially populations that may be more sensitive to pollutants such as those with heart or lung diseases, older adults, and children. The Air Quality Index (AQI) is a national index forecasting daily air quality and represents the most common ambient air pollutants including ground-level ozone, particle pollution (PM10 and PM2.5), carbon monoxide (CO), nitrogen dioxide (NO²), and sulfur dioxide (SO²). The AQI is a 0 to 500 scale where an index between 0 and 50 is considered “good” air quality where there is little to no risk.³⁸

The closest air quality monitoring station is located in Chelmsford and represents Middlesex County. From 2013 to 2017, the proportion of days during the year with an AQI <50 ranged from 94% to 96%, followed by ranging between 86% to 93% from 2018 to 2023 (Figure 27).

Figure 27: Proportion of Good Air Quality Index Days in Middlesex County



Note: “Good” referring to AQI Index <50. Proportion calculated by dividing number of “good” AQI days by total number of days in which AQI was reported.

Source: Trust for Public Land. 2020 via MA DPH PHIT

³⁸ Environmental Protection Agency. (2023, October 13). Patient Exposure and the Air Quality Index. Particle Pollution and Your Patients’ Health. <https://www.epa.gov/pmcourse/patient-exposure-and-air-quality-index>

Climate Change Outlook

Changes in the global climate are anticipated to have continuing impacts on the health of communities. The Massachusetts Climate Projections Dashboard (led by the Executive Office of Energy and Environmental Affairs, in partnership with Cornell University, U.S. Geological Survey, Tufts University, and the Massachusetts Climate and Hydrologic Risk Project) anticipates that in Westford, average temperatures will increase, along with the total annual precipitation and number of days above 95°F. There are also projections indicating that the number of days below freezing will decrease, and that these fewer cold winter days may increase the likelihood of ticks surviving through the winter months. Overall, the changes in temperature may increase the incidence of tick and mosquito-related diseases such as West Nile Virus and Lyme disease.

The Massachusetts Climate Change Assessment identifies climate risks through the end of the century by region and sector. Westford is included within the “Eastern Inland” region of the assessment with the following projections throughout the 21st Century located in Table 14.

Table 14: Eastern Inland Region Climate Outlook

Near Term (2030)	Mid-Century (2050)	Mid-Late Century (2070)	End of Century (2090)
The summer mean temperature could increase by 3.6°F from the historical period (1950-2013), worsening stress on electric transmission and utility distribution infrastructure.	The 1 percent annual chance river flood could be two times more likely to occur, increasing Merrimack River and other river flood risk.	There could be 58 fewer days below freezing, increasing the chance of ticks overwintering and reducing winter recreation opportunities.	The historical 10 percent annual chance of rainfall event (2.8-4 inches) could occur four times more frequently.

Source: Massachusetts Climate Change Assessment, 2022

COMMUNITY FACTORS

The physical, economic, and social makeup of a community can impact the health and wellbeing of individuals and neighborhoods. Community factors can include the built environment, which is the man-made or modified structures that provide people with spaces to live, work, and play. The built environment of a neighborhood can include factors such as affordable housing, accessible transportation, and available nutritious food options which are all features that can support or impede opportunities for living a healthy lifestyle. Outside of the physical environment, community factors can also include the social context of a community, which includes how factors such as social support, discrimination, and violence or crime impacts how community members interact with the resources and residents within a community.³⁹

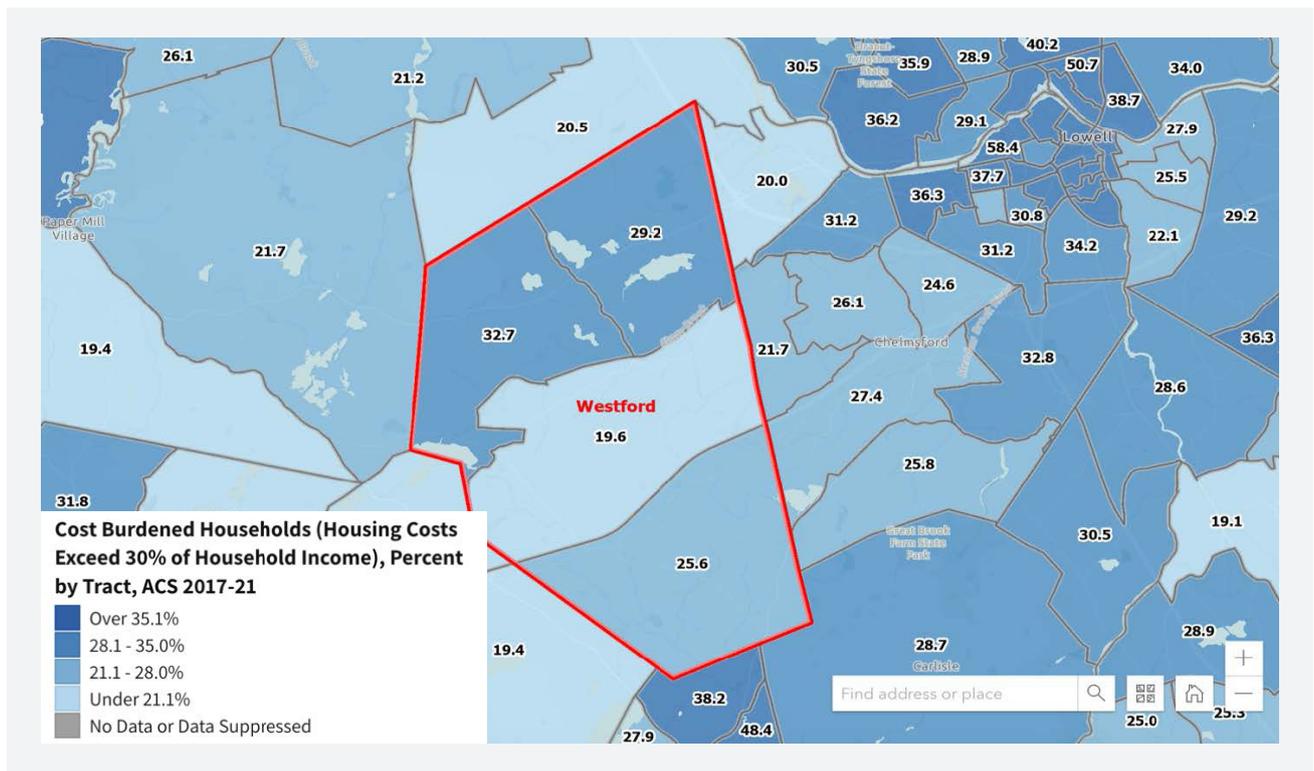
³⁹ Office of Disease Prevention and Health Promotion. (n.d.). Social Determinants of Health Literature Summaries. Healthy People 2030. <https://health.gov/healthypeople/priority-areas/social-determinants-health/literature-summaries/social-cohesion>

Affordable Housing

When affordable housing options are limited, households with the lowest incomes may resort to substandard housing options in which they may be exposed to various health and safety risks such as vermin, mold, water leaks, and/or inadequate heating or cooling systems. They may also live in overcrowded households which can impact mental health, stress levels, relationships, sleep, and can increase the risk of infectious disease. The high cost of housing can also lead to foreclosures, evictions, and frequent moves, which prevents individuals and families from building a sense of community or long-lasting social connections within neighborhoods.⁴⁰ Overall, affordable housing can impact all aspects of health and well-being from mental and physical to social and environmental.

The U.S. Census Bureau defines cost-burdened households as households spending more than 30% of their income on housing costs. By this metric, 26% of Westford households are cost burdened, which is lower than the state of Massachusetts at 34%, although this proportion varies across census tracts in Westford (see Figure 28). An estimated 29% and 33% of the households in the northern census tracts of Westford are cost burdened which is higher than the 20% observed in the central census tract of Westford, indicating that there is variation across which communities or neighborhoods are most impacted by affordable housing opportunities.

Figure 28: Cost-Burdened Households by Census Tract, 2021



Source: US Census Bureau, American Community Survey. 2017-2021 via PHIT

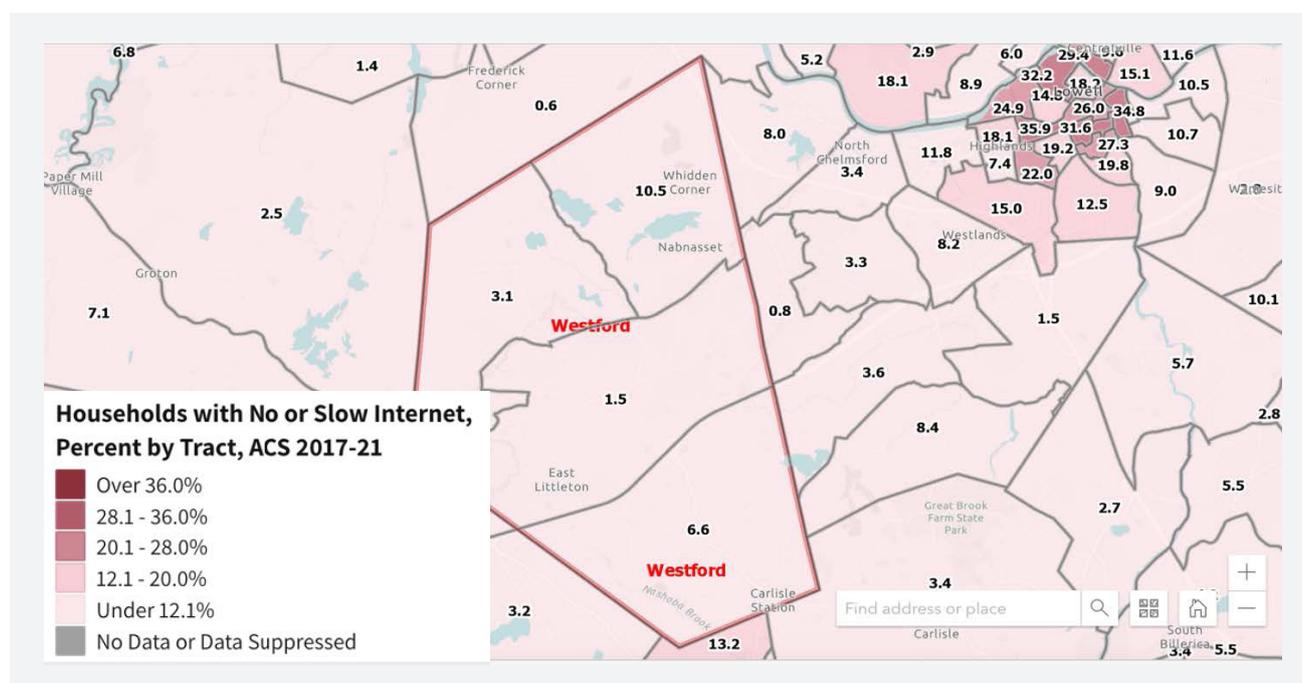
⁴⁰ U.S. Department of Health and Human Services Office of Disease Prevention and Health Promotion. (n.d.). Housing Instability. Healthy People 2030. <https://health.gov/healthypeople/priority-areas/social-determinants-health/literature-summaries/housing-instability>

Internet Availability

Access to reliable, high-speed internet is increasingly recognized as a factor related to healthcare and health inequities in the U.S. Telehealth-delivered care has the potential for reducing gaps in the accessibility of treating and managing health conditions such as depression or diabetes, but it is dependent on the availability and accessibility of high-speed internet among households, which can vary depending on cost and geography. High-speed internet use rates have been reported to be lower in households where the main renter/owner is 65 years or older, has a disability, or is Hispanic, African American, American Indian, or Alaska Native. High-speed internet access may also be unavailable in rural areas or unaffordable for low-income households.⁴¹

In Westford, 5.4% of households have no or slow internet compared to 10% of households in Massachusetts. Although this is lower than the state proportion, it ranges across census tracts in Westford from 1.5% to 10.5% (Figure 29), indicating that the accessibility of reliable, high-speed internet varies by geography across Westford.

Figure 29: Households with No or Slow Internet by Census Tract, 2021



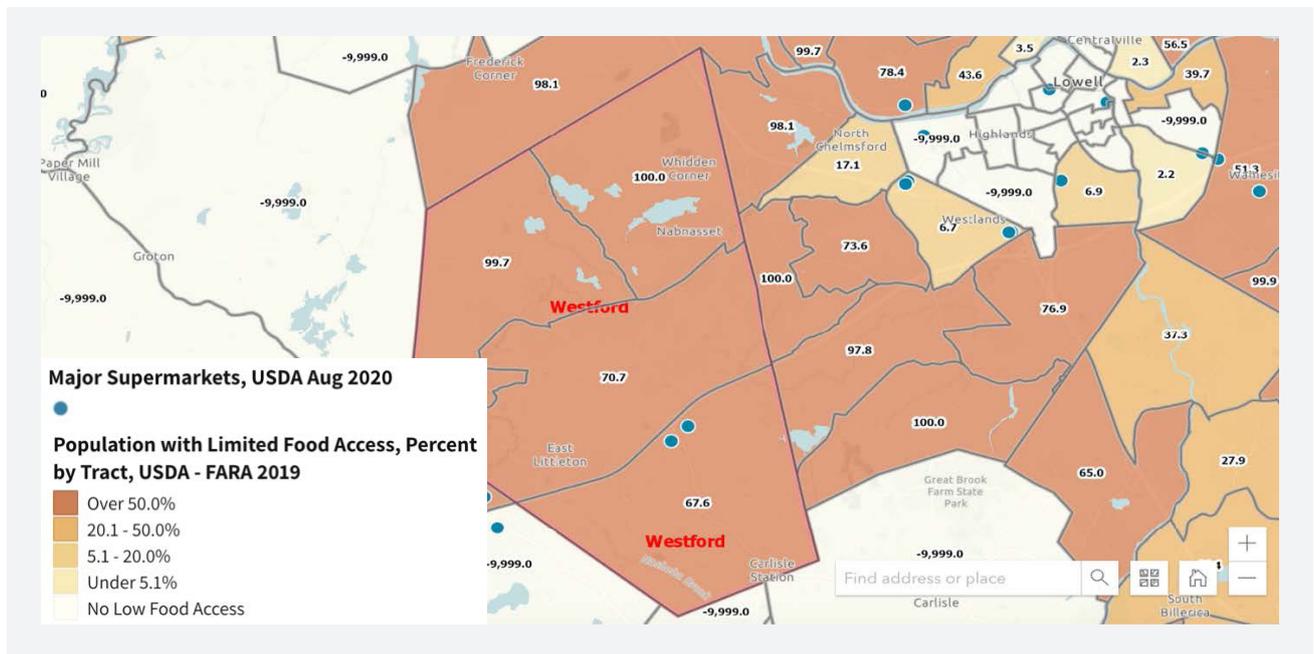
Source: American Community Survey, 2017-2021 via MA DPH PHIT

⁴¹ Turcios, Y. (2023, March 22). Digital Access: A Super Determinant of Health. <https://www.samhsa.gov/blog/digital-access-super-determinant-health>

Food Access

Access to healthy, affordable food can vary across locations depending on a range of factors such as neighborhood infrastructure, accessibility and transportation options, and household income. The U.S. Department of Agriculture (USDA) measures low food access as the percentage of households living more than 1 mile from a grocery store in urban areas or 10 miles from a grocery store in rural areas. By these standards, a large majority of Westford households (84%) are categorized by the USDA as having low food access. As seen in (Figure 30), the few major supermarkets identified by the USDA in Westford are located in the southern census tracts of the community, resulting in 99-100% of the households in the northern census tracts of Westford being within the USDA categorization of low food access.

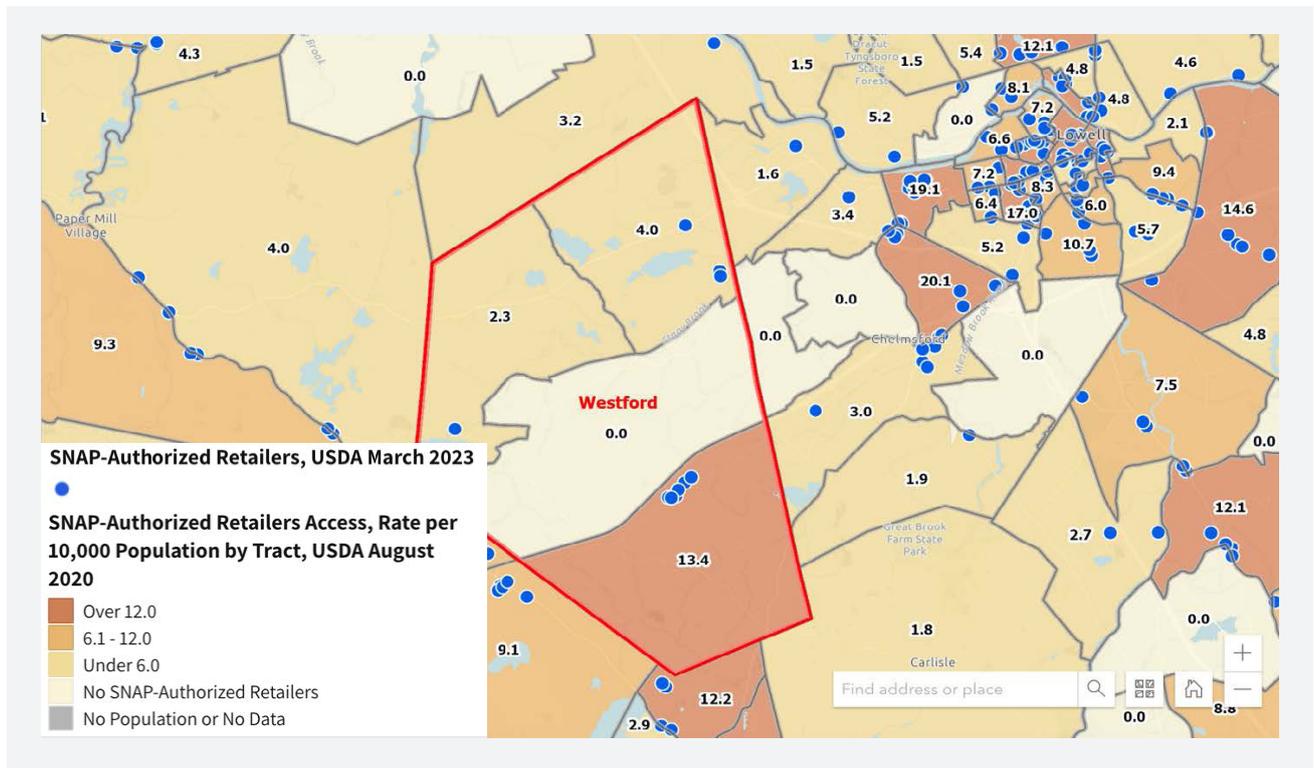
Figure 30: Limited Food Access and Supermarket Locations by Census Tract, 2019



Source: US Department of Agriculture, Economic Research Service, USDA - Food Access Research Atlas. 2019 via PHIT

To increase food access among low-income households in the U.S., the USDA provides the Supplemental Nutrition Assistance Program (SNAP), which offers food benefits to low-income households to supplement their grocery budgets. These benefits can only be utilized at specific SNAP-authorized retailers, in which there are a handful located within the Westford area (see Figure 30). The rate of SNAP-authorized retailers across Westford ranges from 0 in the central census tract to greater than 12 SNAP-authorized retailers per 10,000 residents in the southern census tract (see Figure 31).

Figure 31: SNAP-Authorized Retailers Location and Access by Census Tract, 2023



Source: US Department of Agriculture, Food and Nutrition Service, USDA - SNAP Retailer Locator, March 2023 via PHIT

Transportation

Increasing the availability and accessibility of public transportation can increase access to medical care, healthy food, employment, and social connection, while also reducing traffic collisions and air pollution.⁴² In Westford, an estimated 11% of households are living within a ½ mile of public transportation, compared to 62% of households in Massachusetts and 48% of households in the U.S.⁴³

In 2023, the Northern Middlesex Council of Governments conducted a survey focused on transportation access and utilization in the region. Of the 77 Westford residents who responded to the survey, over half (53%) stated that they do not use public transit, with 36% stating that they sometimes use public transit. Westford residents identified proximity to key destinations and access to stops/stations as the main barriers to utilizing transit services in the area (see Table 15). In the open-ended comments, Westford residents also emphasized the need for a stronger sidewalk and crosswalk infrastructure to support pedestrians and bicyclists in the community.

⁴² Heaps, W., Abramsohn, E., & Skillen, E. (2021, July 29). Public Transportation in the US: A Driver of Health and Equity. <https://www.healthaffairs.org/doi/10.1377/hpb20210630.810356/>

⁴³ Center for Neighborhood Technology, 2020 via MA PHIT

Table 15: Barriers to Using Transit Services Among Westford Residents

Barrier	Count (Percentage)
Proximity to key destinations	43 (56%)
Access to stops/stations	37 (48%)
Frequency	31 (40%)
Schedule	30 (39%)
Reliability	23 (30%)
Don't know, I don't use transit	14 (18%)
Safety	12 (16%)
Affordability	11 (14%)
No barriers	1 (1%)
Total Respondents	77

Source: Northern Middlesex Council of Governments Envision Survey 2050, 2023

Healthcare Access

Access to healthcare is often defined as having “the timely use of personal health services to achieve the best health outcomes.” This includes four main components, 1) Coverage, which includes whether there is ability to enter into the healthcare system, often involving the need for healthcare insurance, 2) Services, which includes whether there is a usual source of care, such as screening and preventative services, 3) Timeliness, which includes whether services are available when needed, and 4) Workforce, which includes whether capable, qualified, and culturally competent providers are available.⁴⁴

In terms of coverage, an estimated 0.53% of residents are uninsured in Westford, which is lower than the state of Massachusetts at 2.78% and the U.S. at 8.77%. In recent community surveys, Westford residents identified long wait times for appointments as the most common barrier to receiving healthcare among respondents (see Table 16), indicating timeliness may be an important aspect of healthcare access in Westford. Although a vast majority of residents in Westford have health insurance, 17% of Westford respondents in the GLHA Community Health Survey noted that health insurance is too expensive, with 21% of Westford respondents in the Emerson Hospital Community Health Survey noting that insurance problems / lack of coverage / not enough coverage is a barrier to accessing healthcare. In terms of the healthcare workforce, 5% of Westford respondents in the GLHA Community Health Survey reported not feeling welcome or respected by doctors or staff (see Table 16).

⁴⁴ Agency for Healthcare Research and Quality. (n.d.). Access to Care. Topics. <https://www.ahrq.gov/topics/accesscare.html>

Table 16: Barriers to Healthcare Experienced by Residents

GLHA Community Health Survey (92 Westford Respondents)	Emerson Hospital Community Health Survey (224 Westford Respondents)
20% report wait times for appointments are too long	31% report wait times for appointments are too long
17% report health insurance is too expensive	22% report lack of evening and weekend services/ lack of convenient times and locations
10% report it's difficult to understand/navigate the healthcare system	21% report insurance problems/lack of coverage/ not enough coverage
5% report not feeling welcome or respected by doctor or staff	18% report cost of care/co-pays
5% report not being able to afford mental health services	12% report lack of support to navigate health system

Source: Greater Lowell Health Alliance Community Health Survey, 2022 Community Health Needs Assessment and Emerson Hospital Community Survey, 2021 Community Health Needs Assessment

Violence and Crime

Community violence can not only cause physical injuries, but also lead to an increased risk of chronic diseases and mental health conditions such as depression, anxiety, and post-traumatic stress disorder (PTSD). These physical, emotional, and financial effects of violence can impact individuals, families, and entire communities where concerns around violence may prevent some people from participating in community activities or utilizing public spaces or parks.⁴⁵ Of Westford residents who participated in the GLHA Community Health Survey, 97% selected that it is “definitely accurate” that they feel safe in the neighborhood during the day and 94% selected that it is “definitely accurate” that they feel safe in their neighborhood at night.

The National Incident-Based Reporting System (NIBRS) summarizes data reported by local and state law enforcement agencies, including the Westford Police Department (see Figure 32). Between 2012 and 2022, the Westford Police Department received more property crime reports (burglary, larceny-theft, and motor vehicle theft) with a total of 976 reports compared to violent crime reports (murder and nonnegligent manslaughter, rape, robbery, and aggravated assault) with a total of 135 reports. The reported property crimes decreased from 160 crimes in 2012 to 58 in 2022 whereas violent crime ranged from 4 and 21 reported crimes each year between 2012 and 2022.

⁴⁵ Centers for Disease Control and Prevention. (2022, June 8). Community Violence Prevention. Violence Prevention. <https://www.cdc.gov/violenceprevention/communityviolence/index.html>

Figure 32: Crimes Reported and Cleared by Westford Police Department, 2012-2022



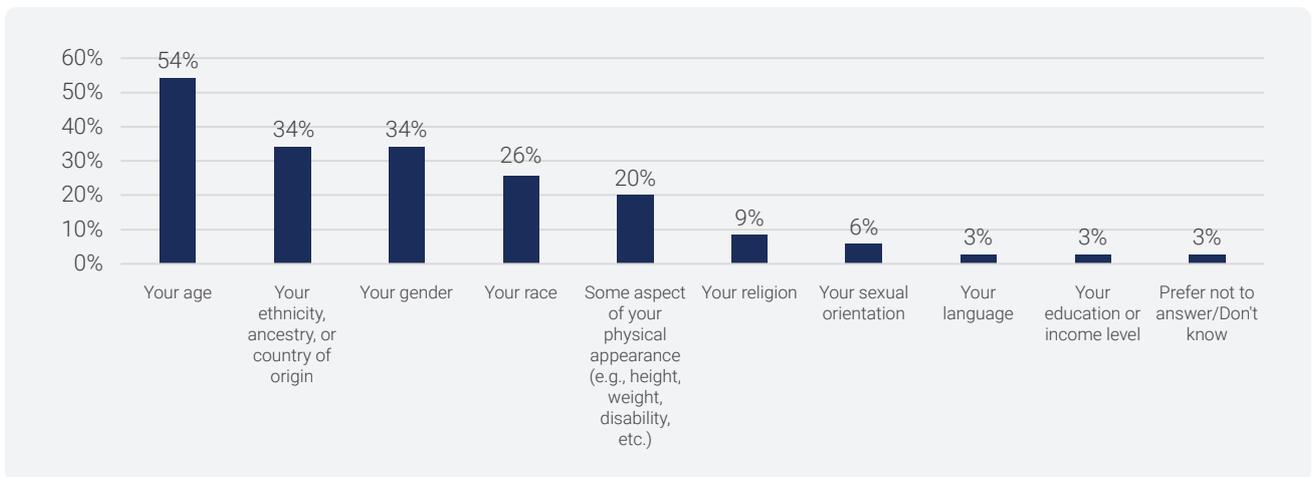
Note: Clearance statistics measure the proportion of reported crimes that were resolved by an arrest or other, exceptional means (e.g., death of the offender, unwillingness of the victim to cooperate). A single arrest may result in many clearances or multiple arrests may result in a single clearance if the crime was committed by a group of offenders.

Source: FBI Crime Data Explorer, Reported National Incident-Based Reporting System (NIRBS), 2022

Discrimination and Racism

Discrimination is the unfair treatment of people and groups based on characteristics such as race, gender, age, or sexual orientation. Discrimination can have stress-related emotional, physical, and behavioral impacts on health, such as increased substance use and mental health conditions⁴⁶. Within the GLHA Community Health Survey, discrimination based on race was identified by Westford residents as the top community safety-related issue within the community. About half of Westford respondents selected that it was “definitely accurate” that their community is accepting of diversity (53%), followed by 43% selecting “somewhat agreed” and 3% selecting it is “not accurate”. Within the Emerson Hospital Community Health Survey, 35 Westford respondents stated that they had experienced discrimination, with the most common reason being due to age, followed by ethnicity, gender, and race (see Figure 33).

Figure 33: Top Reasons Among Residents Experiencing Discrimination, 2021



Source: Emerson Hospital Community Health Survey, 2021 Community Health Needs Assessment

⁴⁶ American Psychological Association. (2022, October 31). Discrimination: What it is and how to cope. Racism, bias, and discrimination. <https://www.apa.org/topics/racism-bias-discrimination/types-stress>

COMMUNITY HEALTH IMPROVEMENT PLAN

BACKGROUND

Once the community health assessment has been completed, the results can be utilized to identify opportunities to improve the health of residents through a community health improvement plan (CHIP). A CHIP is long-term, systematic effort to address the health and wellbeing needs of a community through a collaborative process with identified priorities and action steps. This process provides an opportunity to strengthen partnerships and coordinate efforts across a community.

The following CHIP was developed to be a living document that can be utilized by a broad range of community organizations and groups in Westford. It provides a framework of community priorities and goals that can be utilized across Westford in aligning organization or agency strategic plans towards a shared effort, with the flexibility in modifying specific projects or activities across community partners depending on their strengths, resources, and internal goals. The intention of the CHIP is to provide a broad framework for Westford communities in identifying ways in which they may be able to collaborate in addressing key community health priorities in Westford.

IDENTIFYING KEY COMMUNITY HEALTH PRIORITIES

The Westford Community Health Partnership convened monthly to provide guidance and insight to the Westford CHA and CHIP. After reviewing and collecting available data across a range of health indicators, the partnership participated in a strategic prioritization process to identify key priority areas as focus points for the CHIP. The following concepts were utilized throughout the prioritization process:



Burden: How much does this issue affect health in Westford?



Equity: Will addressing this issue substantially benefit those most in need?



Impact: Can working on this issue achieve both short-term and long-term change?

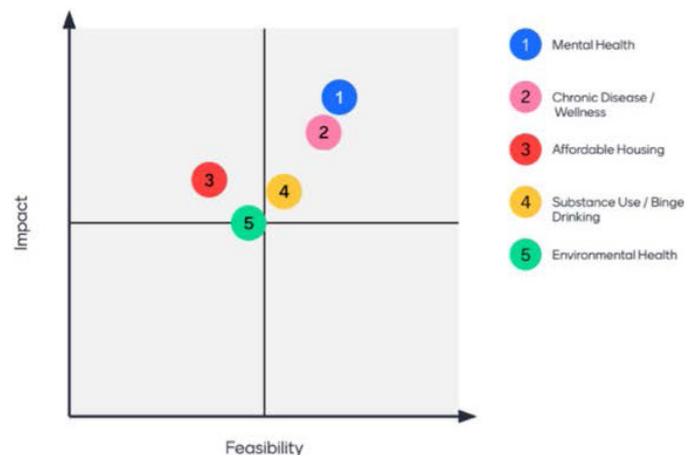


Feasibility: Is it possible to address this issue given available resources and capacity?

In the first stage of the prioritization process, the partnership reviewed the available public health data and local community survey data to determine which areas had the greatest burden on populations within Westford, with consideration to how different communities may be impacted. This involved identifying key areas in which there were disparities across populations in Westford, along with which areas were impacting high proportions of community members and which areas had poorer outcomes than the state averages. This led to the partnership identifying mental health, chronic disease / wellness, affordable housing, substance use / binge drinking, and environmental health as areas with the greatest burden, especially among specific populations within Westford.

In the next stage of the prioritization process, the partnership utilized an online survey tool for each member to rank the feasibility and impact of the selected key areas. This resulted in mental health being identified as the most feasible and impactful area to focus on within the CHIP, followed by chronic disease / wellness, substance use, and environmental health. Given this is the first Westford-specific CHA/CHIP process, it was decided that affordable housing was not the most feasible area for the partnership to focus on within this community health improvement process, but that it may be something that the partnership could have the capacity to address in future CHA/CHIP cycles.

The final priorities that were selected as key areas to address utilizing collaborative strategies in the CHIP were mental health, chronic disease / wellness, substance use, and environmental health. The partnership acknowledged that a health equity approach will be critical to utilize throughout the development of strategies, and that future strategies may address more than one priority area as each are inherently intertwined with one another.



DEVELOPING COLLABORATIVE COMMUNITY HEALTH STRATEGIES

After identifying priority areas, the Westford Community Health Partnership focused on developing and selecting goals and strategies to address the priority areas of mental health, substance use, chronic disease / wellness, and environmental health within Westford. Through a facilitated discussion in a hybrid format (in-person and virtual options), the partnership identified current resources, services, and partnerships within the community, along with future aspirations and goals in expanding existing services and developing new strategies to better serve community members in Westford.

To incorporate a broader perspective, the partnership utilized community input from the Westford Stakeholder / Community Leader Survey (see Appendix D) and the regional community listening sessions hosted by the Greater Lowell Health Alliance during their community health improvement process in 2022 to identify potential strategies suggested by community members. Through a guided planning session, the partnership focused on identifying goals, objectives, and strategies that were equitable, impactful, and feasible in addressing the selected priority areas. Following the session, BME Strategies organized the discussed goals, objectives, strategies, and partners into a draft CHIP and edited these components for clarity. The CHIP was then reviewed by the partnership with feedback incorporated into the finalized plan.

CHIP IMPLEMENTATION PLAN

WESTFORD CHIP PRIORITY: MENTAL HEALTH			
GOAL: Expand counseling options that are free or accept insurance for Westford residents.			
OBJECTIVE: Increase the availability of behavioral health providers from 657 providers per 100,000 residents to the state average of 705 providers per 100,000 residents.			
Strategy	Activities/Actions	Lead Implementer	Estimated Timeframe
Develop capacity to secure sustainable funding for mental health services.	Identify behavioral health organizations/services to fund	Community Behavioral Health Committee	January 2026 - December 2029
	Identify funding sources		
	Identify staff to be trained in resource mobilization		
	Pursue at least one funding opportunity		
Utilize new health department social worker position to provide additional services.	Identify underserved populations	Westford Health Department	January 2026 - December 2026
	Develop a plan for serving those populations as close to them as possible		
	Develop the scope of services		
	Identify needed resources		
	Begin providing the services		
GOAL: Increase knowledge of available mental health services among Westford residents.			
OBJECTIVE: Reduce the proportion of high school students reporting using alcohol in the past 30 days from 29% to 25%			
Strategy	Activities/Actions	Implementers	Estimated Timeframe
Increase utilization of available services through effective communication with the public	Identify target populations	Public Health Department (inclusive of many)	September 2024 - December 2024
	Identify suitable communication channels		
	Develop communication materials		
	Deploy communication plan		
Create local mental health resources booklet / roadmap	Identify resources	Community Behavioral Mental Health Committee - Subcommittee	January 2025 - December 2028
	Develop electronic booklet	North West Public Health Coalition	
	Identify and access funding for printing		
Create network of volunteers / knowledgeable community members for disseminating information	Identify convening space (virtual/in-person/Zoom/Social networking platform, etc.)	Community Behavioral Mental Health Committee	January 2025 - December 2025
	Advertise		
	Convene meetings and supply materials		

CHIP IMPLEMENTATION PLAN

WESTFORD CHIP PRIORITY: SUBSTANCE USE			
GOAL: Increase knowledge and awareness of substance use services in Westford among priority populations.			
OBJECTIVE: Reduce the proportion of high school students reporting using alcohol in the past 30 days from 29% to 25%			
Strategy	Activities/Actions	Implementers	Estimated Timeframe
Understand needs of community members and best methods for communicating / disseminating information around substance use services (with Opioid Settlement Funds)	Identify a consultant	Collaboration of taskforce	September 2025 – December 2025
	Conduct focus groups		
	Identify suitable methods for communicating with those populations		
	Develop a communications plan		
Strategy	Activities/Actions	Implementers	Estimated Timeframe
Promote alcohol-free events	Identify target populations	Collaboration of taskforce	April 2026 – December 2026
	Identify organizations to plan events		
	Plan events		
	Hold events		

WESTFORD CHIP PRIORITY: CHRONIC DISEASE & WELLNESS			
GOAL: Increase community supportive services for individuals and families managing chronic diseases.			
OBJECTIVE: Reduce the percentage of residents with hypertension from 25% to 20%			
Strategy	Activities/Actions	Implementers	Estimated Timeframe
Expand blood pressure clinics	Identify underserved populations	Westford Health Department	June 2025 - December 2025
	Develop a plan for serving those populations as close to them as possible		
	Develop the scope of services and communications plan		
	Identify needed resources		
	Begin providing the services		

WESTFORD CHIP PRIORITY: ENVIRONMENTAL HEALTH			
GOAL: Increase the public's awareness and preparation for managing and responding to health emergencies.			
OBJECTIVE: Contribute to reducing the Middlesex County age-adjusted rate of emergency visits for heat stress from the 2020 rate of 5.5 cases per 100,000 people to 5.0 cases per 100,000 people by 2029			
Strategy	Activities/Actions	Implementers	Estimated Timeframe
Collaborate with emergency management staff to distribute information to the public about emergencies (i.e. power outages, flooding events) through community events, fairs, events with COA during Ep month (September)	Identify target populations	Westford Health Department	September 2024 - December 2027
	Identify suitable communication channels		
	Develop communication materials		
	Deploy communication plan		
Host community presentations / workshops about the impact of the environment on health with clear action steps that residents can take	Identify target sub-populations	Westford Health Department	September 2024 - December 2027
	Identify suitable communication channels/venues		
	Develop communication materials		
	Deploy communication plan		
Develop a PFAS detection program and share information with residents	Gather lessons learned from current pilot the health department is launching with funding for 50 residents	Westford Health Department & Water Department	January 2028 - December 2028
	Identify policy expert to draft the ordinance		
	Identify council champions to introduce the ordinance		
	Support the ordinance		
	Identify funding sources		
Secure funding for an expanded program			

APPENDICES

APPENDIX A: LOCAL RESOURCES/COMMUNITY ASSETS

APPENDIX B: WESTFORD COMMUNITY HEALTH PARTNERSHIP

APPENDIX C: GLHA COMMUNITY SURVEY WESTFORD RESPONDENTS

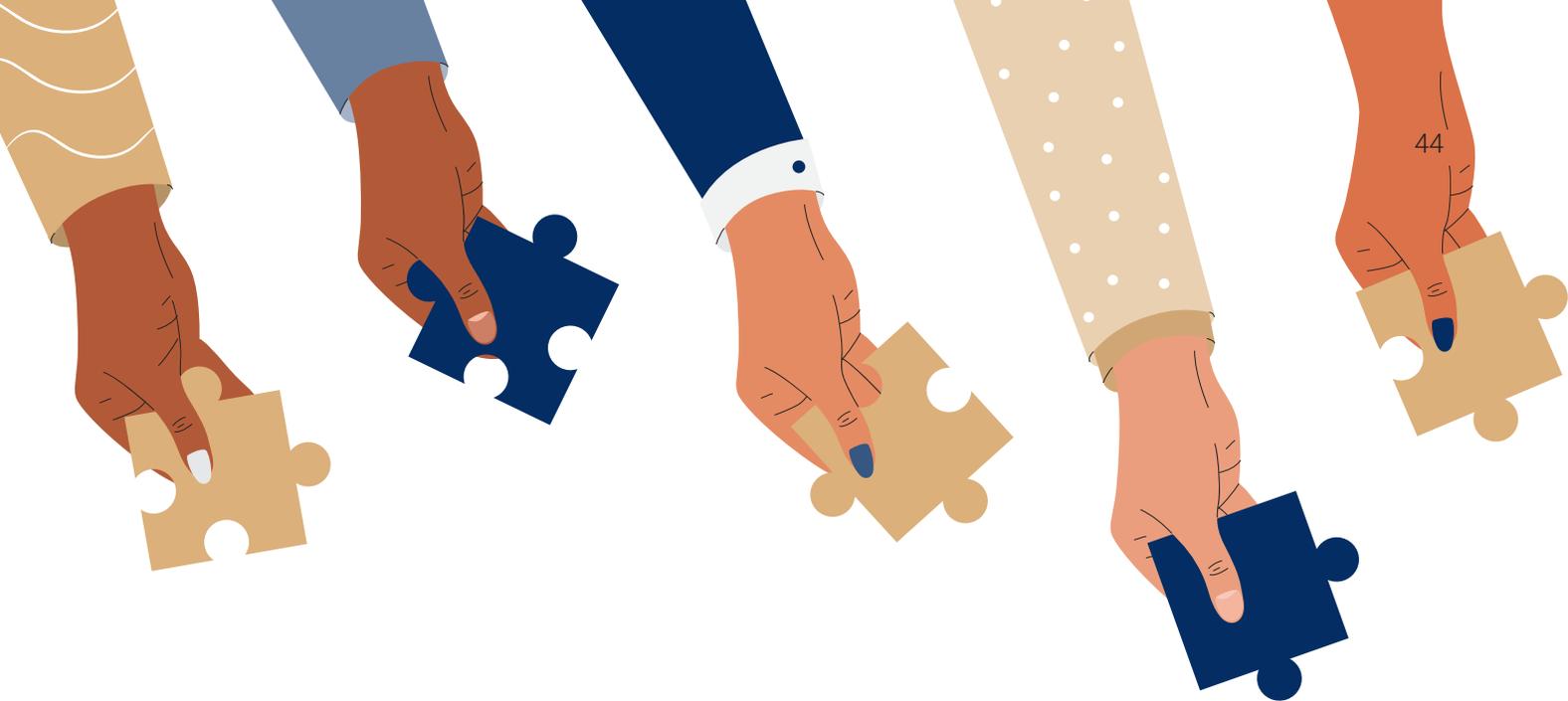
APPENDIX D: STAKEHOLDER & COMMUNITY LEADER SURVEY

APPENDIX A: LOCAL RESOURCES/COMMUNITY ASSETS

	Mental Health	Substance Use	Chronic Disease	Environmental Health
Personnel	<ul style="list-style-type: none"> Westford Town Social Worker - Cameron Outreach Coordinators Westford Community Wellness Coordinator Regional Community Health & Wellness Coordinator Westford Health Department Mobile clinician that works with Police Department/COIN team follow up School Guidance Counselors School Nurses 	<ul style="list-style-type: none"> Regional Community Health & Wellness Coordinator Westford Health Department Westford Community Wellness Coordinator Mobile clinician that works with Police Department/COIN team follow up School Nurses School Guidance Counselors 	<ul style="list-style-type: none"> Public Health Nurse Westford Health Director Westford Town Social Worker/Elder Outreach Coordinators (<i>Cameron Outreach Coordinators</i>) School Nurses School Guidance Counselors 	<ul style="list-style-type: none"> Sustainability Coordinator Westford Health Department
Programs	<ul style="list-style-type: none"> Support Groups (i.e. parent support groups) Westford Laughs, Laughter Yoga Club @ First Parish Church Mind & Every Body practice for after school students Community trainings (meditation sessions, suicide prevention, mental health first aid, QPR) Grief Support Group at senior center Buried in Treasures Hoarding Support Cartwheel 	<ul style="list-style-type: none"> Local AA / NA meetings Opioid Overdose Rescue & Prevention Community Trainings & Overdose Rescue Kits COIN recovery coaching for individuals referred by WPD Al-Anon group AA Support Group AA Women's Support Group 	<ul style="list-style-type: none"> Monthly blood pressure clinics at the Council on Aging Hear Smart Audiology Nutrition and cooking classes Fitness and Yoga classes at the Roudenbush Westford Walks program Lyme disease investigation Education about how to improve air and water herbariums, and foraging Education on environmental disease triggers for all chronic disease - toxins in the home and environment, plastic and other common ingredients as hormone disruptors Care planning, resource coordination, referrals, and health care advocacy through social worker, elder outreach workers. Older Adult Dental Program School Dental Program for students Dementia Support Group 	<ul style="list-style-type: none"> Beach testing program Trainings for residents on well / septic info Awareness campaigns on mitigating contamination (fertilizer, pesticides, human water, pet waste, dumping, etc) Local private drinking water regulations & testing Sustainability newsletter

APPENDIX A: LOCAL RESOURCES/COMMUNITY ASSETS

	Mental Health	Substance Use	Chronic Disease	Environmental Health
Organizations / Coalitions / Committees	<ul style="list-style-type: none"> Westford Coalition for Non-Violence Westford LGBTQ+, Friends, and Allies Facebook group Senior Center Community Outreach Initiative Network (COIN) Collaborative Community Behavioral and Mental Health Committee SANS Veterans agent and resources Faith-based organizations, places of worship 	<ul style="list-style-type: none"> Westford Against Substance Abuse Community Behavioral and Mental Health Committee Faith-based organizations, places of worship 	<ul style="list-style-type: none"> Healthy Westford Committee 	<ul style="list-style-type: none"> Recycling Commission Westford Climate Action Agriculture Commission Healthy Lakes & Ponds Collaborative Clean Energy and Sustainability Committee
Community Factors	<ul style="list-style-type: none"> Physical outlets - walking and talking, sports Trails, Cameron Senior Center, Playgrounds, Parks, JV Fletcher Library Westford Recreation Department Roudenbush Community Center Fostering social connection via community events celebrating the makeup of the town: Apple Blossom Festival, Lunar New Year celebration, Westford Block Party Information through resources at the library Westford Friends Facebook Group 	<ul style="list-style-type: none"> Narcan Trainings & Lockboxes for local buildings / businesses MassCall 3 Grant Opioid Settlement Funds Information through resources at the library 	<ul style="list-style-type: none"> Local farmer's markets Information through resources at the library Exercise classes at Cameron Senior Center Gaining Ground organic vegetable distribution through Senior Center Medical equipment loan program at Senior Center Food pantry 	<ul style="list-style-type: none"> Westford "Buy Nothing" Facebook group Westford Climate Action Facebook group Town-wide Yard Sale, Rotary Club "Junk in the Trunk" events Westford Community Gardens Westford Food Allergy Network Facebook group Information through resources at the library



APPENDIX B: WESTFORD COMMUNITY HEALTH PARTNERSHIP

Contributing Organizations

The following local Westford organizations were represented within the Westford Community Health Partnership:

- Clean Energy and Sustainability Committee
- Council on Aging
- Community Behavioral and Mental Health Committee
- Diversity, Equity, and Inclusion Committee
- Healthy Westford Committee
- Northern Middlesex Council of Government
- Westford Community Wellness Department
- Westford Health Department
- Westford Public Schools
- Pedestrian Safety Committee

APPENDIX C: GLHA COMMUNITY SURVEY WESTFORD RESPONDENTS

The following table outlines the demographics of the Westford residents who participated in the GLHA Community Health Survey.

Table 17: Demographics of Westford Respondents in GLHA Community Health Survey

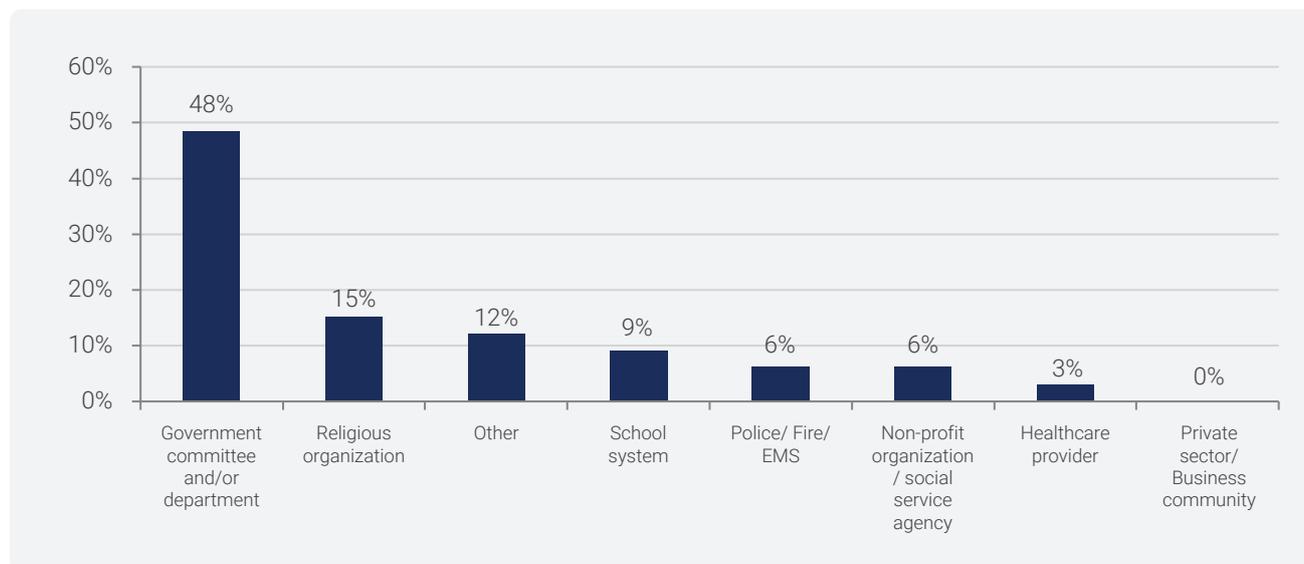
	Count	Percentage
Age		
Under 18	0	0.0%
18 - 26	4	1.5%
27-34	17	6.2%
35-44	32	11.7%
45-54	40	14.6%
55-64	65	23.7%
65-74	67	24.5%
75-84	44	16.1%
85-94	5	1.8%
Over 95	0	0.0%
Gender Identity		
Man	75	27.2%
Woman	198	71.7%
Transman	0	0.0%
Transwoman	0	0.0%
Nonbinary	2	0.7%
Self-describe	1	0.4%
Sexual Orientation		
Heterosexual/straight	253	93.0%
Bisexual	5	1.8%
Gay	2	0.7%
Lesbian	4	1.5%
Asexual	0	0.0%

	Count	Percentage
Pansexual	3	1.1%
Queer	1	0.4%
Self-describe	4	1.5%
Race		
White/Caucasian (non-Hispanic)	258	93.5%
Black/African American	3	1.1%
Asian/Asian American	10	3.6%
Indigenous/Native American	0	0.0%
Native Hawaiian/Pacific Islander	1	0.4%
Middle Eastern/North African	1	0.4%
Other	9	3.3%
Ethnicity		
Hispanic/Latino/a	8	3.0%
Not Hispanic/Latino/a	260	96.3%
Don't know	2	0.7%
Place of Birth		
Born in the United States	246	90.8%
Born Outside of the United States	23	8.5%
Prefer not to Answer	2	0.7%

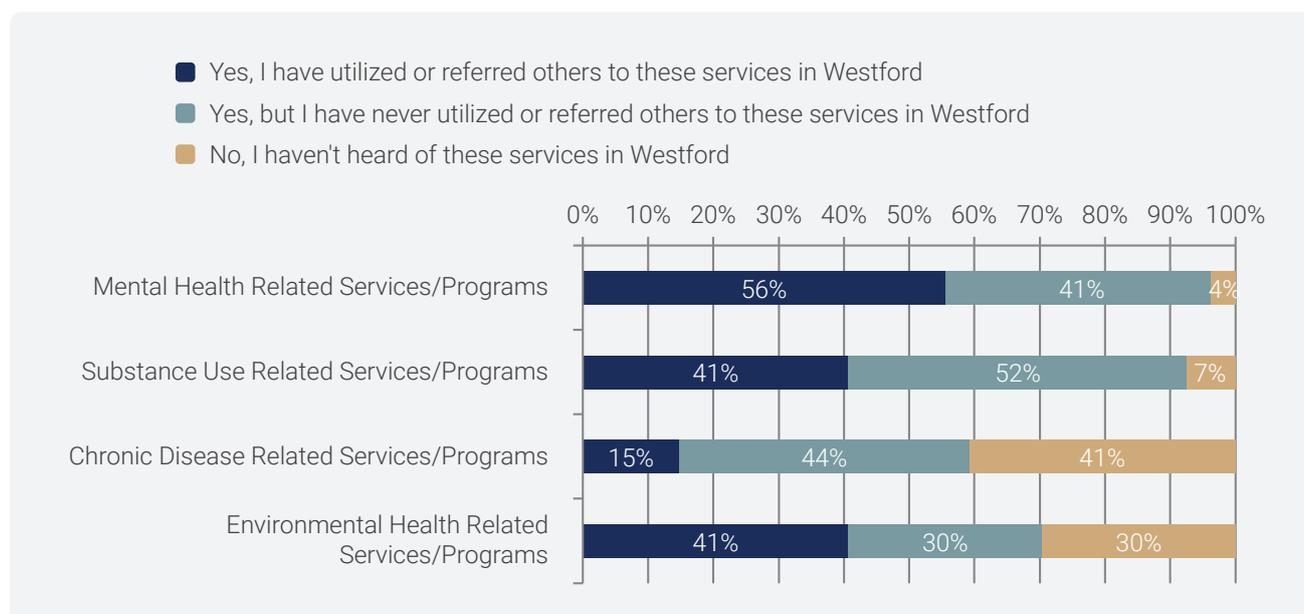
APPENDIX D: STAKEHOLDER & COMMUNITY LEADER SURVEY

The following survey was distributed to stakeholders and community leaders in Westford as part of the community health improvement process. Any identifying information has been removed from the open-ended question responses to protect confidentiality of participants.

Question 1: How would you best describe the organization / department / committee that you represent or work for within Westford?



Question 2: Are you aware of the following resources or services within Westford?



Question 3: What mental health related resources or programs would be most helpful for the community that you work for or serve in Westford? (e.g. programs addressing anxiety, depression/suicide, PTSD, etc)

- Any of the above would be helpful
- LGBTQ+ mental health support (particularly since they are higher risk), supporting youth managing anxiety/stress in relation to living in a town where there is a lot of pressure to do well in school and extracurricular activities - would be great to see more programs that provide them with strategies and tools to manage their load; would be great to find a way to reach the elderly population that either does not have the physical ability to get to the senior center or who may need assistance getting proper healthcare since smartphones and computers seem to be creating a barrier to healthcare for those who do not have them or are not proficient using them
- PTSD and anxiety
- Programs addressing suicide, substance use, mental health and wellness, parent and children support
- Anxiety and depression. Family system dysfunction
- Youth mental health and substance abuse is still a big problem
- Depression, anxiety, domestic violence, suicide are all critical areas to get assistance in
- Anxiety, depression especially in children, bulimia
- 24 hr ability to help those in need
- Free counseling or therapy, anonymous help calls, mental health days
- Depression, anxiety, substance abuse
- Hoarding
- 1. Programs about understanding dementia and how to help individuals with it. 2. Help for Seniors to be able to spot a scam email and avoiding getting them
- Programs for anxiety, depression, and suicide
- Support the increase (#) of available counselling options that accept insurance (not private pay)
- Resources and programming that addresses social emotional health in children and preventative and self care methods students can utilize
- Anxiety and PTSD programs
- Anxiety, depression
- Support groups for people with anxiety/depression and supports for family members of those with major mental health concerns (ie. psychosis, severe substance use disorder)
- Social anxiety, depression, peer pressure
- Depression
- Anxiety/stress relief type programs

Question 4: What substance use related resources or programs would be most helpful for the community that you work for or serve in Westford? (e.g. programs addressing alcohol use, opioid use, vaping/tobacco, etc)

- Possibly pain medication dependency and alcohol
- Programs related to self care and making folks aware that many of the behaviors they may engage in thinking they are self care may actually be distractions from REAL self care - book reference "Real Self-Care" by Pooja Lakshmin, MD. Appropriate topics for this would be overeating, undereating, doom scrolling, food cleanses, video gaming, etc - that often are unsupportive ways of distracting ourselves from REAL self care and we don't even know the difference
- Alcohol use
- Programs addressing opioids, alcohol, vaping/tobacco, prevention programs
- Vaping tobacco and THC
- Youth mental health and substance abuse is still a big problem
- The one's listed in the question are definitely a need in Westford along with every other city and town!
- Alcohol, vaping
- More ability to find help - therapy, beds
- Response training for drug related health emergency
- AA and NA, Narcan Program
- Divergent programs for youths - drinking and marijuana
- Programs need to be provided for all ages at the Schools, the Senior Center, programs provided by the Town through the Health Department, and through all the churches and Local Clubs
- Alcohol and vaping
- Vaping addressing binge drinking
- Similar... Programs that can address substance abuse challenges with Westford's youth and what we can do to prevent students from abuse potential
- Alcohol use and vaping programs
- All the above. Alcohol use is probably most common. Then Vaping / Tobacco use especially with teens. The opioid use is unfortunately very popular but just not talked as much
- Programs addressing alcohol use and overuse-especially in older adults
- All of these listed
- Vaping/tobacco
- All above
- Alcohol and tobacco are the two biggest issues we face in our work with our residents

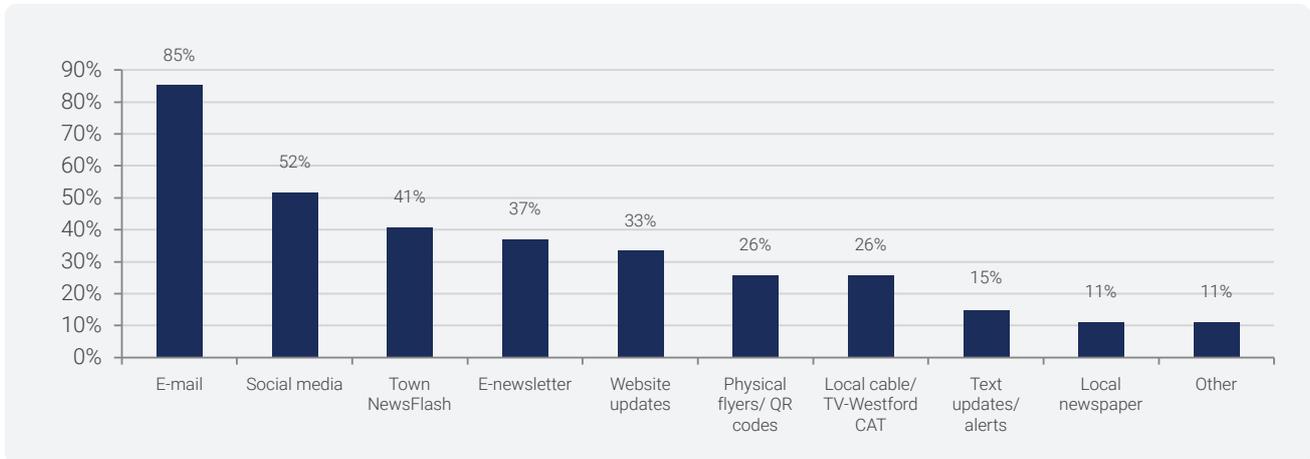
Question 5: What chronic disease or wellness related resources or programs would be most helpful for the community that you work for or serve in Westford? (e.g. programs addressing cancer, heart disease, type 2 diabetes, etc)

- Arthritis, heart disease, vision, hearing loss, cancer, etc
- Autoimmune diseases are prevalent and I don't seem to see much in terms of support groups or workshops assisting folks in learning about anti-inflammation strategies to avoid taking as many medications. Also maybe support in finding out more about copay assistance programs for expensive medicines like biologics, diabetes medications, etc
- Eldercare
- Cancer awareness and screening
- Wellness/diet programs, exercise/nutrition, habit/behavior changing workshops
- No opinion
- I think programs that address all areas are critical. Being proactive vs reactive is necessary, to maintain health in our community
- Nutrition, diabetes, dementia care
- Maternity leave help, childcare assistance, new parent classes, free physical activities/classes
- Cancer
- All of the above and ALS
- Not sure maybe cancer
- Informative programs and informational handouts on all chronic disease of where to refer people when they have questions about chronic disease
- Programs addressing general healthy living I think
- Cancer and COPD resources
- I know all 3 affect the populations. Maybe programs that encourage exercise and nutrition for Heart Disease and Diabetes. But maybe doing community meal drop offs for families who have cancer and a group to make cancer hats especially in the winter
- Programs addressing overall wellness and prevention of chronic diseases
- Diabetes and eating disorders
- Heart disease
- All above
- Aging in place, diabetes, heart disease, and cancer are resources that would be helpful to the community I serve

Question 6: What environmental health related resources or programs would be most helpful for the community that you work for or serve in Westford? (e.g. tick or insect related illness, safe housing, clean air/water, etc)

- How to handle emergencies i.e. floods, power outage, etc
- Not sure on this one... not a strong point in my education so I would defer to others taking the survey who are stronger in knowing better answers
- Water sampling/education
- Safe housing, climate impact, environmental basics
- No opinion
- Again, all that is mentioned in the question are areas of much needed improvement for all residents, and employees of this town. Clean drinking water, to climate change. The ever-changing climate is bringing with it contaminated water and disease carrying insects. We need more programs that address and educate our residents
- Tick borne diseases, plastics in environments
- Info classes
- PFAS detection
- Ticks, housing, clean water and air, mosquitoes
- Air, water and tick/insect
- Safe housing options in Westford and the surrounding communities clean air/water information for Westford PFAS information
- These would revolve around making sure all of our young people had equal opportunity to access these supports
- Clean air and water. Not enough attention is being given to the possible health effects of leaf blower noise and the pesticide spraying for mosquitos on homeowner properties
- Tick/insect related illness, safer streets for walking and biking
- All above

Question 7: What would be the best way to reach you / your organization with information about health-related services or programs? (select all that apply)



Question 8: Do you have any other comments related to the health and wellness of Westford residents?

- Westford seems to be primarily a higher income community than some surrounding towns and therefore many families and residents need support in not being in denial that they have any problems. I have seen that many parents choose to not classify their student as ADD or ADHD or allow them to participate in IEP programs because they think it is mind over matter. This puts a lot of pressure on the students as they are physically and mentally not able to perform at the level desired by their parents. Parents exacerbate the problem by putting students in private schools or pushing even more activities on their children thinking that if they find the right resource their children can catch up or be "fixed". It seems like a prevalent situation in a higher income community where parents (or at least one parent) may have lofty goals for their children and are not willing to part with those goals for the sake of their children's health/wellness
- N.A
- Not at this time
- Elder care
- No
- Health and wellness in Westford is very important. It can be complicated. Therefore, it is important to be clear of what services are being provided, what department is providing them and what populations we are reaching
- It might be useful to know how many residents fall into Elderly, Mid-Life, High School age, Junior High age, Elementary age, and College age. This might help to identify where to be able to have the most impact for different age needs



BME STRATEGIES

**Prepared by BME Strategies
for the Westford Health Department**