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RWJF Culture of Health Community Portrait

Danvers, Massachusetts

ABOUT THIS REPORT

The Sentinel Communities Surveillance project, conducted by RTI International in collaboration with the RAND Corporation, is sponsored by The Robert Wood Johnson Foundation. The project, which began in 2015, will monitor activities related to how a [Culture of Health](#) is developing in each of 30 diverse communities around the country for at least five years. This community portrait follows from the initial Snapshot report for [Danvers, MA](#), and provides insights into drivers of a Culture of Health in the community. The report is not intended to comprehensively describe every action underway in Danvers, but rather focuses on key insights, opportunities, and challenges as this community advances on its journey toward health and well-being for all residents.

The information in this report was obtained using several data collection methods, including key informant telephone interviews, an environmental scan of online and published community-specific materials, review of existing population surveillance and monitoring data, and collection of local data or resources provided by community contacts or interview respondents. Interviews were conducted with individuals representing organizations working in a variety of sectors (for example, health, business, education, law enforcement, and environment) in the community. Sector mapping was used to systematically identify respondents in a range of sectors that would have insights about community health and well-being to ensure organizational diversity across the community. We also asked original interviewees to recommend individuals to speak with to include important organizations or perspectives not included in the original sample.

A total of 19 unique respondents were interviewed during spring 2018 for this report. All interviews (about 30-75 minutes long) were conducted using semi structured interview guides tailored to the unique context and activities taking place in each community and to the role of the respondent in the community. Interviewers used probes to ensure that they obtained input on specific items of interest (for example, facilitators and barriers to improved population health, well-being, and equity) and open-ended questions to ensure that they fully addressed and captured participants' responses and perceptions about influences on health and well-being in their communities. Individuals who participated in a key informant interview are not identified by name or organization to protect confidentiality, but they are identified as a "respondent." Information collected through environmental scans includes program and organizational information available on Internet websites, publicly available documents, and media reports. Population surveillance and monitoring data were compiled from publicly available datasets, including the American Community Survey (ACS); Behavioral Risk Factor Surveillance System; and other similar federal, state, and local data sources.

We will conduct ongoing surveillance and monitoring activities in these communities through 2020 and report updated information on their progress, challenges, and lessons learned in improving health and well-being for all residents.

Data collection and monitoring thus far has revealed common themes among otherwise distinct communities. The next phase of reports for this project will focus on cross-community reports that will examine common themes that emerge across different subgroups of the 30 communities (for example, rural communities, communities experiencing large demographic shifts, and communities leveraging local data for decision-making). These reports will also be posted on cultureofhealth.org.

CONTENTS

Section	Page
Introduction	1
Contextual conditions	1
Community capacity to promote health, equity, and well-being	2
Developing a Culture of Health	4
Cross-sector collaborative addresses community well-being	4
Law enforcement leads efforts to promote community well-being	5
Danvers addresses equity via youth services and housing	6
Health systems and stakeholders partner to augment local resources.....	7
Summary of Danvers' efforts to build a Culture of Health.....	8
Emerging Community Themes	9
Culture of Health facilitators.....	9
Culture of Health barriers	9
What's Next	10
References	10

Introduction

In our Snapshot report of [Danvers, Massachusetts](#), we described a mid-sized New England town, known for its role in American colonial history, which had moved from being a farming community to a town known for its skilled manufacturing industry. Danvers residents are generally prosperous, and many are highly educated, reflecting the region's focus on advanced technology, education, and health care. The Snapshot highlighted that Danvers reports better health outcomes than national averages, particularly in areas such as low rates of obesity and high rates of health care coverage. However, the community is one that is grappling with the complex issues of opioid dependence and mental health and continuing to address the needs of a homeless population. In this report, we examine Danvers' efforts to improve population health and build a more equitable community, using the [Culture of Health framework](#) to interpret and organize key findings. The framework prioritizes four broad areas (making health a shared value; fostering cross-sector collaboration for well-being; creating healthier, more equitable communities; and strengthening integration of health services and systems) within which activities and investments can advance population health, well-being, and equity in diverse community contexts. Using the framework, we describe how Danvers is working to sustain its commitment to community well-being through multisectoral collaborations and active civic engagement.

Contextual conditions

Danvers is a mid-sized, New England town of 27,527 residents, situated close to the northeastern coast of Massachusetts and located 20 miles from Boston. Danvers is in Essex County, near the Danvers River.¹ Essex County is the third fastest-growing county in the state due mostly to international immigration and economic opportunities, though Danvers' international population is only about six percent. The town was once known as Salem Village, given its association with the 1692 Salem witch trials. Due to its location near several highways, it is estimated that approximately 90,000 people pass through Danvers on an average working day.

Demographically, Danvers is overwhelmingly white (91 percent), with the other nine percent made up of approximately three percent Hispanic/Latino residents, three percent Asian, one percent black residents, and the remaining two percent of multiracial backgrounds.¹ The population in Danvers is getting older. Residents over the age of 65 have had the highest relative population increase, while young professionals ages 20 to 34 years and very young children saw the highest relative decreases.

In terms of income and education, Danvers residents are generally middle to high-income and well-educated. Compared with the U.S. national average, a greater percentage of Danvers' residents hold a bachelor's degree or higher and this educational attainment is generally comparable among white and black residents though rates are somewhat lower among Hispanic residents. Residents of Danvers earn a higher median income (about \$90K) compared with the nation (\$59K).¹ A comparatively smaller percentage of individuals are living in poverty (about five percent) relative to the national average of 14 percent, but the percentage of families living at or below the poverty line in the town more than doubled from 2000 to 2010. Unemployment rates in 2018 were also lower than the U.S. average, with a three percent unemployment rate in Danvers compared to four percent nationally. Affordable housing is scarce in Danvers, which makes it difficult for many young families to establish themselves. During 2014 and 2015, Danvers addressed a significant rise in the homeless population, housing 180 families at three area motels. The state used intensive case management to reduce the number of homeless families living in motels. By the end of

2015, the number of families housed in Danvers motels dropped to 98, compared with 162 families in mid-2015 with most moving to permanent housing.

Economically, skilled manufacturing plays an important role. The most common occupations in Danvers are in educational services, health care and social services, which employ 26 percent of workers, followed by manufacturing jobs with about 12 percent of workers.² The commercial and industrial base of Danvers includes auto manufacturing, health care, banking, insurance, and retail sectors. For instance, Danvers is home to medical device manufacturers, such as Abiomed and Medtronic.³ Partners Healthcare and Massachusetts General have large health care centers in the community as well. An economic incentive program works closely with local North Shore Community College and Essex Technical High school to support a workforce pipeline to local employers.³

Danvers' town government is geared to operate with significant citizen input and participation. Elections are held annually, when nearly 150 Town Meeting members (long standing members who provide counsel, particularly in participatory governments) are elected to three-year terms on a rolling basis; volunteers also serve on a range of boards and commissions.⁴ Massachusetts is one of ten "home rule" states, which creates a certain degree of local autonomy for cities, towns, villages, and municipalities and limits state control over some local matters like election regulation or management of park lands.^{5,6}

Given the size of the population, most health data for Danvers is available at the Essex County level. On metrics of self-reported health, the community reports better than U.S. average (85 percent for Essex vs. 82 percent for the U.S.). This finding is also true when disaggregated by race/ethnicity. Chronic diseases such as obesity and diabetes also are lower than the U.S. national average. Opioids, on the other hand, are prevalent in Essex County and Danvers. Unintentional deaths from opioid overdoses in Essex County increased from 48 in 2010 to 146 in 2014. Essex County now has the fourth highest number of opioid-related deaths in the state. Danvers Police responded to 51 overdoses in 2017, with seven fatalities (only one was recorded January to September 2014).

Danvers as well as Massachusetts overall has been a leader in health legislation. For example, Danvers was among the first cities in Massachusetts to pass significant restrictions on the sale of tobacco products including not allowing the purchase of single cigars and raising the sale age to 21 years. Danvers was a leader in restricting the use of tanning beds as the first city in the state prohibiting minors from using these beds in 2014.⁷ True to Danvers' focus on civic engagement, the town has actively involved youth in advocating for these health promoting policies.⁸ Danvers has also benefited from state health leadership. Massachusetts passed a law to place limits on opioid prescriptions to a seven-day supply, and requires mental health professionals to conduct substance use evaluations on anyone suffering from an opioid overdose admitted to a hospital emergency department. In related areas of mental health, the state has been a leader in increasing the number of mental health screenings by pediatricians and support for school mental health.⁹

Community capacity to promote health, equity, and well-being

Danvers has a strong and interconnected community network, contributing to its capacity to promote health, even with its relatively small size. A Board of Health and governmental health division are supported by a robust network of nonprofit organizations that address health concerns and mobilize community residents for health action.

Board of Health and Health Division which leads local health initiatives

Massachusetts requires all towns and cities to run their own health departments and does not provide dedicated state funding to support local health care operations.¹⁰ The town of Danvers is governed by two formal bodies that promote health, a Board of Health and the Health division of the Department of Planning and Human Services. The Board of Health has three volunteer members appointed by the Town Manager to staggered three year terms. The Health Division of the Department of Planning and Human Services carries out the day-to-day activities of the Board of Health.

The current health director of Danvers also serves as the veterans' service officer (a position required by the state). Danvers operates a public welfare program for residents who are veterans. The other main activities of the Health Division are public health nursing and wellness programs as well as environmental health investigations and permitting.

While the Health Division has primary responsibility for health in the town, it does receive support from other government departments focused on key drivers of health. The Danvers Police Department is a notable contributor to public health with a particular focus on mental health. In addition to the police department, Danvers Recreation (the town's Department of Parks and Recreation) has provided funding for after-school and summer programming for town youth. The office has funds to maintain Danvers Rail Trail, a 4 1/3-mile path that runs through downtown and links Danvers to other towns. The Rail Trail serves as a key component of using the built environment to promote health.

Healthcare system that builds on regional assets

There are a few health care networks and several smaller private networks that provide health services to Danvers residents. The Mass General/North Shore Center for Outpatient Care is a collaboration between Massachusetts General Hospital and North Shore Medical Center.¹¹ It provides comprehensive services including day surgery, primary and specialty care. Mass General includes eight ambulatory units serving pediatric and adult patients

Lahey Health operates Lahey Outpatient Center in Danvers, an extension of Beverly Hospital.¹² Lahey offers extensive services that include primary care, specialty care, and day surgery. Lahey Behavioral Services extends north to the New Hampshire border and south to Boston but is headquartered in Danvers and serves the community.

In addition to MassGeneral and Lahey, other health care providers include Partners Health Care, Bright Star Care, and Aberdeen Home Health services.

Strong network of local and regional nonprofits that promotes well-being

DanversCARES anchors the efforts in the community to provide leadership on health matters. DanversCARES is a community coalition focused on positive youth development that expands programs and services for youth and families and advocates for systemic change.¹³ The leadership of DanversCARES consists of 12 partner organizations representing education, police, local government, and faith-based organizations as well as youth, parents, and local businesses. DanversCARES approaches community health issues, such as youth substance use, through a three-point plan which includes reducing exposure to harmful health elements, changing norms about health behaviors, and being visible about enforcement of any new health strategies or policies.

In addition to DanversCARES, there are several other organizations that support health and well-being in the community. For example, the Danvers YMCA focuses on creating action communities for health, innovation, and environmental change.¹⁴ The YMCA collaborates with the Danvers Community Council, DanversCARES, local churches, the health

department, the Veterans Administration, the Danvers Senior Center, and the school system to support community needs.

Danvers also accesses many of the regional supports for the Essex County and the North Shore. In the area of philanthropy, Essex Community Foundation funds various initiatives on a range of well-being topics, and supports efforts in Danvers.¹⁵ North Shore Community Action Programs (NSCAP) serves low-income individuals and families along the North Shore including Danvers. Created out of President Johnson's war on poverty, NSCAP focuses on many of the social determinants of health such as housing, education, economics and health care.¹⁶ Relatedly, North Shore Home Consortium, takes two million dollars annually from the Federal Home Investment Partnerships (HOME) program, and then allocates these funds by formula to 30 communities, of which Danvers is one participating community, to assist in the development of affordable housing.¹⁷ Eligible HOME funded activities include the construction of new affordable housing units, First Time Homebuyer Downpayment Assistance, Housing Rehabilitation, and tenant-based rental assistance for very low income households.¹⁷ North Shore Community Health Network includes 45 organizations such as schools, public health departments, food pantries, and local coalitions. The Network provides health funding and health workforce professional development.¹⁸ North Shore Elder Services provides home care services, home delivered meals, and a coalition for LGBTQ elders that hosts dinners and other events.¹⁹

Developing a Culture of Health

Danvers is promoting health and well-being, by leveraging cross-sector collaborations, activating departments outside of health to prioritize health issues, engaging youth as health leaders, and linking key stakeholders to provide comprehensive health care services.

Cross-sector collaborative addresses community well-being

Several respondents described DanversCARES as the centralizing community collaborative, which serves as the leading forum for the town's public health priorities. While the group has no funds to distribute and does not have the health department's power to advocate for health-related activity, it provides stakeholders in this small community the opportunity to divide responsibilities and coordinate for effective responses to health and well-being challenges. As such, it has helped to connect sectors through an established channel and, in the opinion of several respondents, it has helped the town take effective action to improve its overall well-being.

The collaborative began unofficially in the 1990s when community members expressed concern that many youths were spending most of their after-school hours unsupervised at the town malls. The school district had an advisory committee focused on health and wellness within school, which connected joint efforts between the Danvers police department and the school district to keep students safe outside school grounds. But the number of underage drinking incidents, at the community and state level, led to broadening the discussion to include other sectors.

As noted earlier, DanversCARES includes members of the town board of health, faith-based groups, banks, local businesses, the police department, and school district leaders. Financing comes from a combination of town budgeting and grants. As new public health issues come to light, the group shifts efforts to highlight them. One respondent noted, "We're addressing opioid use, social media safety, bullying prevention a focus for several years, and we just now have done new planning and we'll be addressing more social emotional learning and mental health, behavioral health issues. So, we are fluid and dynamic based on the needs of the community."

The community collaborative model represented by DanversCARES combines several elements. First, it conducts community outreach and education. The DanversCARES website reports on all available meetings and activities of the organization to keep interested community members who cannot attend informed. A respondent noted, "We provide resources for our community that will be helpful with health, wellness and education. It's also sharing best practices." Elementary school principals put their weekly newsletters on the website after they are emailed to families. The organization also is an active user of social media, using social media feeds to increase awareness of upcoming and past events and having key stakeholders (e.g., school, police department) retweet DanversCARES. For the past three years, the organization led 'Light the Night Purple' walk to raise awareness of the opioid problem and challenge stigma issues surrounding mental health.²⁰

In addition to having community information and awareness-raising roles, this community collaborative is a key provider of youth programs and connector with other organizations. It conducts an internship program for students during the school year and job training for youth during summer months, employing youth in community-based organizations. Banks and local businesses interface with DanversCARES to provide support for a local education foundation and fund a yearly grant that supports teachers' curricula.

Community respondents shared that the example of the DanversCARES as a coordinating force for health and well-being in the small town is critical. One representative of the collaborative remarked, "If you were to compare a similar size community that does not have a community partnership, you probably would find more silos, more people and entities working independently versus cross sector. It's a primary role of having a partnership structure in the community. I'm not saying we're responsible for all of it, I'm saying were the catalysts, we're part of the catalyst to make that happen."

Law enforcement leads efforts to promote community well-being

One of the hallmarks of Danvers' health efforts is the active role that the Danvers Police Department has played. The department has been cited by residents and law enforcement agencies around the country for its willingness to embrace data collection and attempts to establish the force as a change agent. It has taken several important steps towards a model that combines community policing concepts, mental health awareness, and data analysis with conventional enforcement methods. One respondent noted, "Danvers was one of the first communities to implement a drug take-back program through their police department. Now it's everywhere because of the opiates issue, but in 2009 nobody else in the state was doing that. People would call our police department for advice."

At the core of the department's method is an ongoing effort to push beyond traditional silos and make direct links to education leaders as well as health care institutions and systems that treat mental health. While the department benefits from a town government that supports its efforts, and budgets for staff that enhance health and criminal justice data collection and crisis intervention capacity, it has been a leader in bringing stakeholders into collaborations. In particular, the working relationship between the department and the school district has been critical to the community's approach to public health. While the department strives to remain current in best practices, much of its approach to police work is based on developing trust within the Danvers community through regular engagement. Officers, according to one city respondent, are "out walking and talking, whether it's in the square or going to the schools. They're deeply involved with the youth, have daily contact with the kids. I think that goes a long way later on through life."

There are a few hallmark efforts of the police department's efforts to promote health and well-being in Danvers. The department is focused on mental health and jail diversion. Over half of the police officers has received crisis intervention training, which emphasizes

diverting individuals with mental health and related drug problems from the court system and into psychiatric or drug rehabilitation services. The associated Jail Diversion Program has received awards and now is expanding into other towns in region.²¹

Another signature role for the police department is in the response to opioid use. The department augmented officer training in Narcan administration and increasing dosage (from two milligrams to four milligrams) to respond more effectively to high dose opioids (e.g., fentanyl). The department joined the Police Assisted Addiction and Recovery Initiative (PAARI),²² founded by the police department in the nearby town of Gloucester in 2015.²³ PAARI allows those with substance dependence or addiction to turn themselves into police without punishment, even when possessing drugs, and that addict is then referred to treatment. Danvers enhanced the program in 2018 by assigning life coaches to those individuals who had experienced an overdose. One respondent explained, "They can have a closer bond than the police because sometimes they just see the uniform, somebody that's using heroin that's getting arrested a lot, they're just looking at us as police officers. Having a civilian that's actually a recovered addict, being able to explain the system, explain everything that's going to be happening to that person has gone a long way. We just started that up the last few months."

The police department also maintains strong collaborations with the school district, via two dedicated school resource officers (SROs) who liaise with Danvers schools (including five elementary schools, one middle school, the technical high school and St. John's, a private Catholic high school). Elementary school outreach includes computer safety and daily interactions that help establish trust and familiarity at an early age. Middle school students are introduced to Drug Abuse Resistance Education (DARE). There is also an SRO at the high school, who coaches an athletic team.

Other features of the department's role in health and well-being include support for the senior population and efforts to address diversity. The Department assigned an officer for outreach to elderly residents to raise awareness of financial scams. An officer is committed to the board of the Danvers Diversity Committee, which meets at department headquarters. The committee monitors the town for evidence of hate crimes (e.g., racism, anti-LGBTQ).

Danvers addresses equity via youth services and housing

Danvers respondents most often discussed equity in terms of income, transportation and housing. With a white population in excess of 90 percent and many families being led by one or two middle or high-income earners, the central question concerns access to the amenities available within the community. "I think it's always at the forefront of what we try to do to ensure we have equity," says an education respondent. "Anything from making sure if a student can't afford to play a sport or pay for their lunch or ride the bus that nobody goes without. That way all kids have equal opportunities to all activities." As such, there are two ways that Danvers is working to improve access and address equity: Through supports to youth and young families and efforts to increase affordable housing and promote livable communities.

Access to services and homes is a problem that affects young families looking to settle in the community. Students who attend the Danvers campus of Northshore Community College, many of whom are low income and experiencing housing and food instability, and many who travel from neighboring towns, experience difficulties related to the region's lack of public transportation options. There are also efforts to support those with children, who have employment and/or education needs that require full-time child services. For example, DanversCARES now has a grant that supports the provision of full-day kindergarten. A respondent noted, "We looked at the values, the economic pieces for our families and the equity issue that we didn't want full day kindergarten to become whether you could afford

to pay for it or not afford to pay for it. That was an equity issue for us.” Danvers Recreation provides summer, after-school programming for all, especially for parents who need child care coverage during the work day. The school district and Danvers Recreation collaborate to create continuity between school curriculum and summer programming, with special attention given to children with individualized education plans. Danvers also seeks money or contributions from nonprofits that do not pay property taxes to help fund priorities or enable programming (payment in lieu of taxes). For example, for youth, the town created an agreement with the YMCA to gain space and offer afterschool programs for the school district.

Danvers has been challenged with creating a livable community for all, which is of particular concern given the town’s aging population. There is a need to bring in new residents to maintain the tax base and vitality of the school system. The town has made several attempts to increase the amount of affordable housing and spread it throughout town districts, but challenges remain. Further, the town has particular restrictions in housing due to issues with property landmark status. This not only precludes new housing development but is also linked to significant congestion downtown. The limited public transportation and a lack of funding to pursue urban design approaches like complete streets has made the community less attractive to new residents across the income spectrum.

There also have been strong efforts to simply increase the supply of affordable housing through zoning changes. Danvers approved zoning changes in late 2017, which increased the requirement for affordable housing in certain districts from ten percent to 20 percent. The local zoning board also works with an affordable housing trust in Danvers. The model strategy is to purchase abandoned land parcels and bid in partnership with Habitat for Humanity to build new affordable homes. So far, the approach has proven promising, but it has not yet been implemented broadly to evaluate the full benefits. Further, the NSCAP works with local landlords to find housing for residents at risk of homelessness or those who have been banned from shelters. This current innovation stems from Danvers history in addressing the issues of homeless families. When these families were housed in Danvers motels, the state did not supply programming for children who were attending the schools. Danvers developed its own after-school and summer programs, such as This Is My Time during the school year and Project Sunshine, a summer program for homeless youth.

In addition to the affordable housing issue, there has been an historic set of concerns regarding homelessness. Danvers no longer houses a large number of homeless families in motels,²⁴ a condition that caused considerable strain on the town’s resources and presented the town’s most challenging equity question for several years.²⁵ Several respondents noted that while many residents found Danvers’ burden in supporting homeless families was unfair, the community worked hard to provide support, especially to children. “At one point in time, Danvers had ten percent of the entire homeless families for the state in town and it was an immense drain on our school services,” says a respondent who works for the town. “The biggest impact was directly to the school system, whether it was the special education plans, the bussing, even feeding the kids and the families.”

Health systems and stakeholders partner to augment local resources

Being within short reach of world-class health care systems based in Boston, Danvers benefits from a relative wealth of health care infrastructure and services. As a result, it has worked to augment the limited resources of its town-based health department by establishing effective working relationships with the two primary systems: Massachusetts General Hospital and Lahey Health. Stakeholders in town government, the school district, and DanversCARES have forged working relationships with both providers that tap resources and expertise that have made programming more reliable and effective.

"We do have good access to care, but the relationships go both ways," says an education sector respondent. "The hospital does a community health needs assessment, which is really valuable health data. We look at the hospital's data, but we also provide the hospital a forum, so they will come share that data. It's a reciprocal relationship." The health systems' proximity to the Danvers community also helps them improve ambulatory care offerings and support projects that have community benefit and health improvement potential, such as extension and maintenance of the town's Rail Trail. The Danvers-based Mass General and Lahey facilities have an increasing focus on cancer care.

Mass General operates a patient-centric, holistic health care model. Mortality and morbidity data gathered in needs assessments help the health system understand the needs of the town and region and influence the care offerings. Mass General has worked to make its data more detailed and accessible, and there are plans to make more data available to the ambulatory Danvers facility. The Danvers center is also based on a patient-first model. A health care respondent noted, "So much of what we've achieved as a culture is a reflection of my nursing values about patients first. About being here to support the best interests, and needs of the community, and to be providing a standard of care that isn't here, and convenient, but not any different than they would find out if they had traveled to MGH or gone to North Shore Medical Center."

Lahey Health helps to guide a wide variety of health programming through community stakeholders. Lahey provides the training to local law enforcement for the Jail Diversion Program. Lahey supports DanversCARES in running 2017 'Parent University', a collaborative effort to improve parental skills, abilities to understand social, emotional, and behavioral health issues in their children.²⁶ The Danvers school district works with Lahey Health to determine student needs at the elementary and middle schools.

In addition to these two elements of health care, the director of health for Danvers also runs veterans' programs. Home Base, a veterans' services program in partnership with the Boston Red Sox Foundation, operates in Danvers. Home Base provides 'Resilient Warrior' training to help veterans manage their lives and accompanying stress, and to create support networks with other veterans.²⁷

Summary of Danvers' efforts to build a Culture of Health

Based on the [Culture of Health Framework](#) used to guide sentinel community data collection and monitoring in Danvers, Massachusetts, strong efforts are underway that support a Culture of Health in this community. For example, Danvers has demonstrated a commitment to Making Health a Shared Value by creating opportunities for community input into the town's decision-making and efforts to build interest in health promotion and advocacy among young people. DanversCARES demonstrates a significant commitment to the value of Fostering Cross-Sector Collaboration by actively promoting well-being with a diverse and unified base of partner organizations. The leadership of a nontraditional health leader like the Danvers Police Department in supporting mental health and addressing substance use also represents the important role of other sectors in addressing public health issues. Efforts are underway to Create Healthier, More Equitable Communities principally through partnership with Danvers Recreation to support Danvers Rail Trail as well as zoning choices to actively increase available affordable housing, though the issue of affordability remains a critical equity concern for the community. The reciprocal relationship between Danvers government and community organizations and the health care system demonstrate efforts to Strengthen Integration of Health Services and Systems.

Emerging Community Themes

Stakeholders in Danvers are working to address the primary issues threatening community well-being, including substance use and mental health issues as well as equity in cost of living and affordable housing. The small size of the community requires Danvers to leverage cross-sector collaborations and regional assets to address health issues and provide comprehensive health services. While the population is aging overall, Danvers is working to support young people and engage them actively in health leadership.

Culture of Health facilitators

- **Strong community ties that facilitate and improve cross-sector collaboration.** Residents with deep ties to Danvers contribute to a sense of community, shared values, and commitment to common purpose. These ties are utilized to collectively address health issues that concern the community, whether banning tanning bed use as skin cancer rates rose or organizing across sectors to combat youth alcohol use.
- **Use of community coordination to highlight public health issues.** The DanversCARES collaborative is unique in its integration across government and nongovernment sectors to aid the community in prioritizing its concerns and approach solutions in an organized manner. The model unifies diverse stakeholders and focuses on ongoing capacity-building to address health issues.
- **Police department that views enforcement through mental health, community safety lens.** The department continues to lead the community in its pursuit of modern methods of enforcement. This active role of a department outside of traditional health expands community health leadership and places the responsibility of health in a broader base of stakeholders.
- **Strong local health systems that support ambulatory care.** The Mass General and Lahey facilities in Danvers are helping to bring health care closer to residents, who may have the most difficulty reaching care centers (e.g., aging, veterans). More work is needed to ensure Danvers specific health care data from these facilities are available and accessible for local use.
- **Movement towards a more holistic view of community health.** Through support of Danvers Rail Trail and efforts to adopt more inclusionary zoning, the community is working to address the social determinants of health.

Culture of Health barriers

- **Lack of affordable housing to address equity issues.** While Danvers is working to address the affordable housing concern, the lack of housing is affecting the ability of those with lower or more modest incomes to live in the community. This contributes to a skewed demographic composition toward higher incomes and is making it difficult to support younger families to raise children in the community.
- **Challenges to building a more livable community environment.** Public transportation is insufficient for residents without cars. The North Shore is heavily built up, and many residents who cannot drive struggle to make appointments and get to school. Relatedly, the town has not pursued funding available through Massachusetts Complete Streets program, which could facilitate improvements to

downtown and congestion. While zoning issues are being discussed, some of the town development is restricted by zoning and other historical landmark restrictions.

- **An aging population and general lack of demographic diversity.** Despite efforts to support youth through school and after-school programming, the community is aging rapidly. This will be a challenge both in terms of strains on the health system but also impacts on the future economic base. Further, Danvers does not reflect the increasing diversity of its surrounding communities, which attract more residents from international backgrounds.

What's Next

Danvers is a community that enjoys mostly positive indicators of health and well-being and has galvanized community organizations, regional assets, and youth to promote health. Danvers' approach to engaging diverse sectors, such as the police department and a wide variety of nonprofits, is important to continue to track and understand as a model for how other small communities can develop and implement unified public health agendas. In addition, it will be useful to examine the long-term impact of health programs for young people, such as those implemented by DanversCARES, on adult health and civic engagement outcomes.

While Danvers demonstrates a commitment to connecting resources to serve the health needs of its population, ensuring that all in the community have access to health promoting resources remains a challenge. Equity concerns related to economic viability and affordability are critical problems for the future of Danvers in terms of its population composition and economic base, thus monitoring these demographic trends will be key for understanding the future health of the town.

Lastly, while some improvements have been made in combatting the opioid crisis in this community through better mental health and substance use treatment and more integrative training among police officers, health care professionals and other providers, the public health issue is not disappearing any time soon. Thus, assessing the benefits of new approaches to the problem in the community will continue to be important.

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