Tufts Medical Center

COMMUNITY HEALTH NEEDS ASSESSMENT

2013

TUFTS MEDICAL CENTER

Community Health Improvement Programs

800 Washington Street, Box 116

Boston, MA 02111

ACKNOWLEDGEMENTS

We would like to extend our appreciation to the members of the Asian and Dorchester Health Initiatives for their guidance and leadership. They helped to ensure that the health needs of the Chinatown and Boston Asian communities and Dorchester community were a priority in the Medical Center's grant-funded initiatives.

We would also like to extend our thanks to the many stakeholders in the South Boston, Dorchester and Chinatown communities for their insights into the critical issues affecting the health and well-being of their neighbors and constituents.

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Executive Summary

Tufts Medical Center ("Tufts MC" or "Medical Center") is the oldest permanent medical facility in the United States. Since its inception, Tufts MC has provided high-quality health care to Boston residents and has endeavored to improve access to health care by initiating a variety of programs to overcome barriers to care. Initiatives include instituting home visiting programs; providing financial support to community health centers; creating grant programs that build the capacity of community organizations to promote health education; and integrating outreach and prevention into Tufts MC's core services. Each one of these initiatives serves to deepen the Medical Center's commitment to maintaining and improving the health of Boston-area residents and patients.

Historically, Tufts MC has conducted community health needs assessments every three years so that it can address critical health issues for community residents and patients. The community health needs assessment that was initiated in late 2012 and concluded in the fall of 2013, provided the data to establish priorities for the Dorchester and Asian Health Initiatives and supported on-going institutional efforts to improve maternal and infant health and provide mental health and substance abuse recovery services.

Requests for Proposals ("RFP") were developed for the Dorchester and Asian Health Initiatives to solicit community-based services to address the goals of the physical and emotional health and well-being of residents in those communities. For the Dorchester community, violence prevention is also a priority. The Dorchester RFP was released in the summer of 2013 in order to identify grantees and services for the Medical Center's new fiscal year. The RFP for the Asian Health Initiative was slated for release in the Fall of 2013 to solicit proposals for calendar year 2014.

Financial support for organizations and services to the South Boston community continues to be made available through agreements that were initiated in response to a crisis in the early 1990s – high suicide rates among youth and young adults and high rates of substance abuse (alcohol, tobacco and opioids). Health data and the input of key informants supports the on-going commitments to the community of South Boston.

2013 Community Health Needs Assessment

Background: Located in Downtown Boston within Chinatown and the Theater District, Tufts MC is the oldest permanent medical facility in the United States. Founded by early American patriots, Paul Revere, Samuel Adams and Oliver Wendell Holmes, Tufts MC continues to honor its original mission to provide care to Boston residents while fulfilling important roles as the principal teaching hospital for Tufts University School of Medicine and a full service tertiary and quaternary referral and research hospital.

The commitment to meeting the needs of Boston residents, in particular the residents from the neighborhoods of Chinatown, Dorchester and South Boston who are in close proximity to the Medical Center (where many of our local patients reside), is reflected by special and grant funded initiatives which respond to the health needs of the three neighborhoods.

The health needs of the residents with whom Tufts MC has had long and historic relationship, is reviewed on a regular basis and guides the allocation of resources through grant funded initiatives and the efforts of medical departments to address specific health disparities. Tufts MC conducted its first health needs assessment in 1995 to inform the grant-making process for the Asian Health Initiative. The last triennial needs assessment was conducted in 2010 and identified priorities for both the Asian and Dorchester Health Initiatives and confirmed the on-going need for the Parent-to-Parent Program, which focuses on infant and maternal health. Assessing the health needs of the communities is the responsibility of the Medical Center's Office for Community Health Improvement Programs.

The Office for Community Health Improvements (CHIP) was established in 1992 to serve as a catalyst for the development and coordination of programs that focus on building community relationships to improve community health. CHIP activities are overseen by the Community Outreach Committee of the Board of Governors, which includes members of the Board of Governors, community representatives and Medical Center senior managers, including the Senior Vice President for Strategic Services.

Target Populations: Based upon the Medical Center's mission, its location and the neighborhoods and communities in which patients live, Tufts MC prioritizes its community health efforts on three neighborhoods: South Boston, Dorchester and Chinatown. These three neighborhoods historically have been communities of working families, whose access to health care was often limited by various barriers, including lack of health care coverage, easy physical access and economic, linguistic and/or cultural barriers. These three neighborhoods also reflect the cultural, ethnic, economic and linguistic diversity of the city and reflect the health disparities for many racial/ethnic groups and the vulnerability of some populations for poor health.

Methodology: Historically, Tufts MC has relied on health data from the Boston Public Health Commission, which publishes an annual report "Health of Boston" and neighborhood specific reports and the recommendations of advisory committees to establish priorities for grant funded initiatives. Public health sources do not adequately collect or provide data regarding non-English Asian-speaking residents. For this community needs assessment, the methodology was expanded to not only include the review of public health data, but also the compilation and review of demographic data from the 2010 census, the inclusion of data from key informants as well as any health findings from neighborhood coalitions which had initiated

community health assessments in 2012. A review of patient zip codes for the in- patient and out-patient services and Emergency Department was also conducted.

The participatory research approach ("PRA") was selected as the framework for the needs assessment because of its short duration, non-hierarchal structure, flexibility and limited statistical analyses. The PRA is also the approach that supported the participation of community members and the sharing of their concerns and priorities. It was particularly important to acknowledge the critical information and insights from community leaders, service providers and key informants about their communities. This approach also offered the opportunity to include findings from community coalitions, which began community health assessments in 2012 and continued their work into 2013. For Tufts MC, community involvement also included the presentation of health data for review by community advisors for the Medical Center's Asian and Dorchester Health Initiatives.

For each of the communities of importance to Tufts MC, a minimum of five key informants from the community were interviewed. Their roles or responsibilities provided insights about the residents and their health concerns or critical health needs. Among each group of key informants represented, at least one was, a health care provider and at least one other was familiar with the needs of youth in their community.

Chinatown	Dorchester	South Boston
Multi-service agency	Health centers	Health center
Youth center	Wellness coalition	Youth agency
Housing manager	Health center collaborative	Youth program
Church	Multi-service agency	Residential program
Health center		Neighborhood coalition

Neighborhood profiles were compiled to identify statistical indicators including population size and characteristics, public health indicators and health information provided by key informants. If neighborhoods experienced significant population changes between the 2000 and 2010 census, that comparison is included in this report, as well as any changes in social indicators that would influence the health of the community.

The individual neighborhood profiles for Chinatown, Dorchester and South Boston may include some references to the community health needs assessments sponsored by the Boston Alliance for Community Health and the data available from those processes. The community health needs assessments undertaken by community coalitions using the Mobilizing for Action through Planning and Partnerships ("MAPP"), however, were on an extended timeline that did not correspond with this assessment.

Neighborhood Profile: Chinatown

The first Asians to settle in Boston were Chinese. They arrived in the early 1870s after helping to construct the transcontinental railroad, to take advantage of the growing demand for workers in manufacturing. They settled in the South Cove on Oxford Street, in the area that is now considered the heart of Chinatown's business and historical district.

The Chinatown neighborhood grew slowly due to various restrictive immigration laws that were in effect until the 1960s. The normalization of relationships with the Peoples' Republic of China in the early 1970s contributed to rapid increase in the Chinese/Asian population in Boston's Chinatown and the growth of a number of Metropolitan Boston communities, most notably Quincy and Malden. Chinatown's growth, both in terms of footprint and population, has been limited because of a lack of housing and limited opportunities for physical expansion; Chinatown's downtown location is surrounded by two interstate highways and a major cultural and retail district. Chinatown, however, continues to function as a service hub for many newcomers looking for English language classes, child care, job training, employment and/or health care services.

Chinatown is approximately 41 acres in size and is situated between the Leather District on the east, Downtown Crossing/Midtown Cultural District on the north, the Theater District on the west and the Mass Turnpike on the south. Within Chinatown, institutional use takes up approximately one third of the land and separates the residential area from the business and historical parts of the community. Chinatown falls within zip code 02111 along with luxury housing in the Midtown Cultural District. It straddles parts of census tracts 704 and 701, but is primarily within census tract 702.

The construction of new housing has resulted in a population increase in Chinatown over the last three decennials (census periods) . The population has risen from 3,714 in 1990 to 4,861 in 2000, to 6,323 in 2010. The change in population also reflects demographic changes, as the new housing stock includes more market rate and luxury housing than it does affordable and family sized units:

- The percentage of Asians living in Chinatown in 1990 was 89%, with 85% of Chinese ancestry.

- The percentage of Asians living in Chinatown in 2000 decreased to 69%, and in 2010 decreased to 56%.

- The percentage of Whites living in Chinatown increased from 7% in 1990 to 26% in 2000, to 38% in 2010.

- Despite the changes in educational attainment and income, the poverty rate has increased from 30% to 43% due in part to a high unemployment rate and a high percentage of residents who are seniors.

The data comparison above was based on a sub-planning district defined by the Boston Redevelopment Authority - Neighborhood Statistical Area ("NSA"). The NSA most closely mirrors the definition of Chinatown's boundaries as defined by the community, its elected neighborhood council and the Boston Redevelopment Authority. A combination of data sources were used to obtain the comparative population data, including Census data and American Community Service Datasets.

Obtaining health data for Chinatown has been an on-going challenge. The Boston Public Health Commission ("BPHC") includes Chinatown as a subsection of an expanded definition of the South End, which extends

beyond the Downtown area up to Beacon Hill, rather than as a distinct neighborhood. Disaggregating the data specifically for Chinatown has been beyond the capacity of the Medical Center and community groups to accomplish. Based upon the advocacy of Medical Center representatives, the BPHC attempted to isolate health data for Chinatown based upon zip code 02111 and the three census tracts referenced above. The result did not yield comparative annual rates for selected health indicators in the BPHC's Health of Boston 2012-2013 report because the sample size/numbers were based upon counts that were less than 20. BPHC has not collected data for non-English Chinese speaking residents or Asian specific data in Chinatown.

Since Chinatown is not only a neighborhood of residents and businesses, but a service hub for Boston's Asian community, health data for Asians across the city of Boston was reviewed, both for 2011 and for prior periods of 1995 and 2004, to identify health disparities and emerging health issues. Key informants from the community were interviewed and a summary of findings was presented to advisors for Tufts MC's Asian Health Initiative.

From **BPHC's Health of Boston 2011**:

Life Expectancy	Boston's Asian population has the highest life expectancy
Leading Causes of Death	- Cancer (lung, liver, colorectal) - Heart Disease - Stroke - Chronic Obstructive Pulmonary Disease - Alzheimer's Disease
Infectious Diseases	- Tuberculosis among Boston Asian residents is three times the rate for the general population - Hepatitis B among Boston Asian residents is seven times the rate for the general population (BPHC 2010) - Salmonella rates for Boston Asian residents now approximate that of the general population
Obesity/Diabetes	Incidences and/or available data show that rates for both are low
Hospitalizations	- Boston Asian children have the lowest rate of hospitalizations and emergency department visits - Incidence of heart disease hospitalizations for Boston Asians is 50% the rate of the general population - Heart disease hospitalizations for Asian males than for Asian females

Key informants provided insights into the health issues for a broad spectrum of community members: Chinatown residents and non-residents, new immigrants, youth, church members and patients at the South Cove Community Health Center. From the health center's perspective, the critical health issues are diabetes, hypertension, women's health (breast and cervical cancer), asthma, tuberculosis and hepatitis B.

Another key issue that was identified is the seniors' lack of understanding about their illnesses, which prevented them from properly managing their health. In addition, key informants raised concerns about unmet mental health issues. They spoke about the stresses associated with the immigration process and the impact upon an individual's physical and emotional health. They noted that this was an even more difficult situation for individuals who have sought asylum in the United States, did not have family or social support networks

and had limited employment opportunities. Key informants also identified the negative impact of addictive behaviors, most notably gambling, on the health of individual family members and the family as a whole and cited an increase in domestic violence, economic hardships, chronic stress and divorces. Finally, key informants identified the financial and emotional stress that occurs with the loss of a working parent in a family with young children.

The data cited above was reviewed by an Advisory Committee for Tufts MC, comprised of Board of Governor members, senior managers and community leaders. Health priorities were identified for a new round of funding for the Asian Health Initiative in calendar year 2014.

Priorities and strategies:

- Develop and release a Request for Proposals for the Asian Health Initiative to solicit services to address reducing health disparities and promote physical and emotional health and well-being.

- Identify opportunities to collaborate with organizations serving the Chinatown and Boston Asian community to promote health, provide screenings and encourage early treatment for diseases that adversely affect the Boston Asian community.

- Share disparities and health priorities with and assess the capacity of medical departments to address disparities for their Asian patients.

Chinatown Health Needs Assessment: The Chinatown Coalition ("TCC") attempted to conduct a community and health needs assessment in 2012 as part of the Boston Alliance for Community Health's efforts to foster Mobilizing for Action through Planning and Partnerships (MAPP) – a community-driven planning process developed by the Centers for Disease Control and Prevention to improve health.

By using focus groups, TCC was successful in identifying what community members perceived as the strengths and challenges for the community; but only one focus group identified a health issue. That focus group, which was comprised of youths working on tobacco use and smoking cessation, identified concerns about the pervasive cigarette smoking among Asian adults.

TCC's efforts to create comparative health data for Boston Asians over a 15 year period were unsuccessful. Since the source of the health data, BPHC, collected and analyzed data differently over that period of time, even though Tufts MC contributed resources and a consultant to assist in the endeavor, the data was too inconsistent with which to work.

Neighborhood Profile: Dorchester

Dorchester is Boston's largest neighborhood. It was annexed by the city of Boston in 1870 and with the construction and availability of rail and trolley lines it became a major residential neighborhood. The major sub-neighborhoods and business districts include: Adams Village, Ashmont, Codman Square, Fields Corner, Grove Hall, Harbor Point, Jones Hill, Meeting House Hill, Lower Mills, Neponset Circle and Uphams Corner.

Dorchester encompasses 32 census tracts, includes four zip codes and reflects the racial/ethnic and economic diversity of Boston.

Given its size, both the Boston Public Health Commission and the Boston Redevelopment Authority divide Dorchester into South and North Dorchester for their respective data collection and planning purposes. However, it should be noted that the boundaries vary slightly, as does the demographics for the residents.

Dorchester demographics include:

	No. Dorchester	So. Dorchester	Dorchester (Total)
Total Population	77,013 (100%)	42,532 (100%)	119,545 (100%)
White	16,743 (22%)	14,180 (33%)	30,923 (26%)
Black/African American	35, 281 (46%)	21,600 (51%)	56,881 (48%)
Hispanic/Latino	15,631 (20%)	5,123 (12%)	20,754 (17%)
Asian/Pacific Islander	8,138 (11%)	2,651 (6%)	10,789 (9%)
Multiracial	1,814 (2%)	1,126 (3%)	2,940 (3%)
Other race	14,672 (19%)	2,826 (7%)	17,498 (15%)
Ages (0-17 years)	20,391 (26%)	10,172 (24%)	30,563 (26%)
Ages (18-64 years)	50,532 (66%)	27,457 (65%)	77,989 (65%)
Ages (65 years and over)	6,090 (8%)	4,903 (12%)	10,993 (9%)
Unemployment rate	16.2%	13.1%	15.1%
Median House Hold Income	$35,048	$49,989	$49,876
Percent of poverty (*)	27.0%	17.0%	22.0%

Additional demographic information:

- The majority of Asian Pacific Islanders in the North Dorchester community are Vietnamese and are concentrated in the Fields Corner neighborhood

- There is a higher percentage of Spanish speakers residing in North Dorchester

- Both North and South Dorchester have the same percentage of people who speak French/Creole in the home (8%)

- Seven percent of the population in North Dorchester speak Portuguese which reflects the large number of residents from Cape Verde

Selected Health indicators:

Indicator	No. Dorchester	So. Dorchester	Boston
Diabetes hospitalizations (per 1,000 population)	1.7	1.6	1.2
Obese adult residents (percentage)	32	28	22
Heart disease hospitalizations (per 1,000 population)	24.1	22.1	19.4
Infant mortality	10.6	6.5	6.5
Low birth weight (percentage)	10.7	9.9	9.3
Preterm births (percentage)	11.0	11.0	10.0
Chlamydia rates (new per 100,000 population)	1,493	1,196	752
Adults who think their neighborhood is safe (%)	24	35	43
Homicide rates (deaths per 100,000 population)	8.5	18.2	21.1

Community members interviewed for this needs assessment identified a range of health concerns, including hepatitis B and C, asthma, mental health issues, family violence, violence, obesity and diabetes and their consequences, including cardiovascular disease. The three top issues from the key informants were diabetes and obesity, violence and mental health needs. Some key informants and some Dorchester Health Initiative advisors concurred that not only should the health issues be addressed, but the root causes for the health issues should be examined as well.

Priorities and strategies:

- Develop and release a Request for Proposals for the Dorchester Health Initiative to solicit services to address health issues such as obesity, diabetes and other chronic diseases to promote physical and emotional well-being.

- Identify opportunities to collaborate with Dorchester organizations to promote health, provide screenings and encourage early treatment for diseases that adversely affect the diverse communities within Dorchester.

- Review patient data, identify health disparities and assess the capacity of medical departments to address health disparities for their Dorchester patients

Dorchester Health Needs Assessment: Two neighborhood coalitions initiated neighborhood specific health needs assessment. One assessment was led by the elected Codman Square Neighborhood Council and the other by the Franklin Hill/Franklin Field Healthy Boston Coalition. Neighborhood assessments were not available at the time that this report was drafted.

Neighborhood Profile: South Boston

The neighborhood of South Boston is situated on a peninsula. A year after it was annexed by Boston in 1804, a bridge was constructed to connect it to the rest of the city. South Boston is, and has been, a diverse community and a residential hub for the generations of workers and their families who were employed by the industrial economy based there. The many industries that were historically located in South Boston include: iron foundries, shipyards, machine shops, railroads and commercial fishing. In recent years, there has been a transition to technology, financial and hospitality services, as leading employers relocate to sub-neighborhoods of South Boston. There also has been a wave of housing construction, which has brought young professionals and young families to a traditional working class community and artists' enclave.

Because South Boston's boundaries are easily and consistently defined by residents and government agencies, data for the neighborhood is easily obtained and compared. South Boston has only one zip code and all census tracks fall entirely within the neighborhood's defined boundaries. Over the last 20 years, census data has shown the following changes:

- The population of South Boston increased from 29,938 in 2000 to 32, 011 in 2010.

- Racial and ethnic diversity within the population increased from 13.1% to 17.3%.

- The population of residents under 5 years, 5-9 years and 10-14 years all decreased between 2000 and 2010.

- The population of residents between the ages of 25 and 34 increased from 23.7% 5o 28.6%.

- The total number of households increased from 14,030 in 2000 to 16,214 in 2010.

- Education levels changed: the percentage of high school graduates decreased (7.5%) while the percentage of increased by 14%.

- The percentage of household incomes at the $50-$74,999, $75-$99,999 and $100-$149,000 and above all showed significant increases (5.6-7.8%).

- The median income increased from $40,865 to $58,611.

Based upon the review of selected health indicators from the BPHC's 2012-13 "Health of Boston" identifies the following health issues for the South Boston community:

- ➢ The incidence of hepatitis C is more than 5.5 times higher than the average annual rate for Boston.

- ➢ The average annual rate of cerebrovascular disease deaths, including stroke, is 45.8 while the city average is 35.3.

- ➢ The average annual rate of substance abuse deaths, per 100,000 residents, is 48.4 and the city rate is 33.9.

- ➢ Two of the leading causes of death are cancer and diseases of the heart, and during the periods of 2005-2010 the annual rates for South Boston were higher than the corresponding rates for Boston for the same years.

There was a strong consensus among key informants that there was one critical health issue for the South Boston community: substance abuse (heroin, other opiates, alcohol and tobacco use/smoking) and its consequences. Of concern were the effects of drug and alcohol abuse on family stability, the emotional and economic impact on multiple generations of families and concerns about the ramifications for children whose parents abused drugs and alcohol, including mental health and behavioral issues, which place children and youth's physical health and well-being at risk.

The South Boston community has been struggling with substance abuse and related problems since the mid-1990s. BHPC data from the 2003 Health Status Report for South Boston indicated that even then the incidence of hepatitis C was the fourth highest in the city of Boston and that substance abuse hospitalizations and mortality were the highest annual average rates.

South Boston Health Needs Assessment: The South Boston CAN Reduce Underage Drinking Coalition is spearheading the MAPP community health assessment that is funded by the Boston Alliance for Community Health. Staff members were among the key informants interviewed for this health assessment. The coalition's community health assessment had not been completed at the time this report was being prepared.

Priorities and Strategies:

- Continue to provide financial support to the South Boston Community Health Center to sustain programs that build youth's knowledge, life skills and resilience so they may identify and access resources to help them achieve their educational and career goals and personal aspirations.

- Continue to provide financial support for recovery services for youth and young adults through the Gavin Foundation.

- Maintain relationship with the South Boston Behavioral Clinic to ensure the availability of behavioral health services to the South Boston residents in the community.

Patient Data Analysis

Three sets of patient data from Fiscal Year 2012 were reviewed to identify the Boston neighborhoods and Metropolitan communities patients reside in and the racial/ethnic demographics of the patients. The goals of the analyses were to confirm the alignment of the Medical Center's established community relationships and programming as well as to consider opportunities to meet the health needs of new and possibly underserved populations moving forward.

The analysis of each set of patient data (outpatient, inpatient and Emergency Department) was based upon the patients' home zip codes. Patient data was then aggregated for Boston neighborhood zip codes and for 18 communities within the Metropolitan Boston area, communities within Route 128. Additional data was compiled for communities immediately west of Route 128 and for the community of Lowell where Tufts MC has an established relationship with Lowell General Hospital.

The following table illustrates the percentages of patients from Boston neighborhoods and Metropolitan Boston communities seeking care from the outpatient or emergency department as well as those who received inpatient care. The data, however, does not isolate patients who obtained care across the three categories.

The analysis was undertaken to identify which neighborhoods or communities contributed to the patient population, possible trends on the utilization of services by the Medical Center's priority neighborhoods and patient populations.

The last set of tables provides a comparison between patient data from 2012 to patient data from years 2005/2006. Again the goal was to ascertain if there were significant changes. The tables also show the percentage of Asian patients as the growth of the Asian community in Massachusetts has been one of the most rapid among newcomer groups. Table 1 reflects cumulative data for all patients (outpatient, inpatient and Emergency Department patients) from major Boston zip codes and Metropolitan Boston zip codes. Communities for which there was a 5% or greater change are highlighted. No conclusions can be drawn about the contributing factors to the increase or decrease in patient representation.

2012 Patient Analysis by Zip Codes

Outpatients	
Major Boston Zip Codes	25%
Metropolitan Boston Zip Codes (within Route 128)	22%
Adjacent to Route 128	27%
Other MA Zip Codes/Out of State	26%
Inpatients	
Major Boston Zip Codes	20%
Metropolitan Boston Zip Codes (within Route 128)	17%
Adjacent to Route 128	22%
Other MA Zip Codes/Out of State	41%

Emergency Department	
Major Boston Zip Codes	49%
Metropolitan Boston (within Route 128)	20%
Adjacent to Route 128	3%
Other MA Zip Codes/Out of state	28%

2013 Patient Data Comparison: Asian Patients

Table 1

	Total Patients: 2005-2006	Total Patients: 2012	
	Percentage	Percentage	Change
Outpatient	10.9	11.8	0.90%
Inpatient	8.3	8.4	0.10%
Emergency	10.4	10.2	-0.20%
Total	10.6	11.3	0.70%

Table 2

	Outpatient 2005-2006	Outpatient 2012	
City/Town	Percentage	Percentage	Change
Boston	19.1	23.7	4.60%
Braintree	13.4	22.0	8.40%
Brookline	17.4	21.6	4.20%
Cambridge	10.7	14.3	3.60%
Chelsea/Everett/Revere	11.8	17.8	6.00%
Malden	40.8	51.0	9.20%
Medford	9.7	16.7	6.80%
Newton	15.6	23.8	8.20%
Quincy	39.4	46.3	6.90%
Randolph	26.1	11.4	-14.70%
Somerville	14.3	16.3	2.00%
Chinatown/SE	40.9	51.4	10.50%
Dorchester	12.0	12.2	0.20%

Table 3

City/Town	Inpatient 2005-2006 Percentage	Inpatient 2012 Percentage	Change
Boston	17.7	20.9	3.20%
Braintree	10.4	11.0	0.60%
Brookline	27.3	38.5	8.20%
Cambridge	8.8	14.9	6.10%
Chelsea/Everett/Revere	6.5	24.7	18.20%
Malden	25.2	42.0	6.80%
Medford	4.9	12.7	7.80%
Newton	15.1	14.3	-0.80%
Quincy	31.5	37.0	5.50%
Randolph	26.2	22.3	-3.90%
Somerville	6.0	12.8	6.80%
Chinatown/SE		44	
Dorchester	18.7	16.6	-2.10%

Table 4

City/Town	Emergency 2005-2006 Percentage	Emergency 2012 Percentage	Change
Boston	9.8	11.9	2.10%
Braintree	11.6	14.9	3.30%
Brookline	26.8	17.9	-8.90%
Cambridge	11.9	6.6	-5.30%
Chelsea/Everett/Revere	8.3	8.6	0.30%
Malden	33.5	46.0	12.50%
Medford	12.9	14.1	1.20%
Newton	21.7	19.4	-2.30%
Quincy	31.9	36.1	4.20%
Randolph	26.3	18.1	-8.20%
Somerville	4.5	9.6	5.10%
Chinatown/SE	19.9	16.6	-3.30%
Dorchester	7.5	7.9	0.40%

Table 5

All Patients by Community: Percentage of Asian Patients

City/Town	2005-2006 Percentage	2012 Percentage	Change
Boston	15.2	20.4	5.20%
Braintree	12.8	20.1	7.30%
Brookline	19.0	23.2	4.20%
Cambridge	10.8	13.1	2.30%
Chelsea/Everett/Revere	10.5	16.2	5.70%
Malden	38.3	49.5	11.20%
Medford	9.5	15.9	6.40%
Newton	16.1	23.2	7.10%
Quincy	37.3	43.9	6.30%
Randolph	26.1	23.5	-2.60%
Somerville	13.2	15.0	1.80%
Chinatown/SE	34.6	34.5	-0.10%
Dorchester	11.4	11.3	-0.10%

Implementation:

The community health needs assessment was conducted over an extended period of time. Each community's data was compiled and reviewed in a sequence to support grant funded initiatives that were created to provide community benefits to the Chinatown/Boston Asian and Dorchester communities.

The Dorchester Health Initiative's health priorities were identified by its Advisory Committee and a Request for Proposals ("RFP") was developed and released to solicit services to promote knowledge and life skills that enable program participants, Dorchester residents, to adopt healthier lifestyles and achieve physical and emotional health and well-being. Examples of critical health issues and chronic diseases affecting the Dorchester community were provided in the RFP. Another priority listed in the RFP was violence prevention. It was anticipated that applicants would focus on health issues specific to their constituents and their organizational capacity.

The higher rates of premature births, low birth weights and infant mortality in the Dorchester neighborhood are addressed by Tufts MC's Parent-to-Parent (P2P) program which was completing its first year of a three year grant cycle. As with the DHI, health data was reviewed prior to the development and release of an open and competitive RFP. Four grants were awarded to provide maternal and infant health services in Dorchester. One grant was awarded to an agency in Chinatown for pregnancy prevention services for teens at risk for poor birth outcomes.

For the community of Chinatown, health data was reviewed and priorities identified by the Asian Health Initiative's Advisory Committee for the grant cycle which would begin on January 1, 2014. An RFP identifying critical health issues for the Chinatown and Boston Asian population was developed and released. The priorities identified in the RFP were maintaining or improving the physical and emotional health of community members. The leading causes of death among Boston Asians were presented with the intent that services might be proposed to prevent these diseases. Emotional health was identified as a critical health issue, most notably as a consequence of addiction to gambling.

As with the DHI, it was anticipated that grant applicants would propose services based upon the needs of their constituents and their individual organizational capacities.

The community benefits provided to the South Boston neighborhood continue to focus on substance abuse prevention, recovery and behavioral health. The relationships and commitments have been longstanding and date back to the early 1990s and are supported by the available public health data and community key informants.

Tufts MC relies upon the guidance of community members and community leaders in the review of health data for their respective communities and in identifying the health priorities to be addressed by MC's community benefits activities and available funding.

APPENDICES

Appendix A: Board of Governors' Committee on Community Outreach, Asian
                Health Initiative Advisory Committee Members and Dorchester
                Health Initiative Advisory Committee Members

Appendix B: Key Informant List

Appendix C: Chinatown Demographics

Appendix D: Dorchester Demographics

Appendix E: South Boston Demographics

Board of Governors' Committee on Community Outreach

Phil Brown, Chair	Rackemann Sawyer & Brewster
Robert Bloomberg	Retired, Board of Governors, Volunteer
Ruth Bramson	Retired, Board of Governors
Philip B. Conti, DMD	Private Practice, Board of Governors
Mary Mahony	Redding Press, Board of Governors
Tana Tselepsis	Board of Governors, Volunteer
Joseph Toomey, III	Psychiatric Home Care Services, Inc.
Brien Barnewolt, MD	Dept. of Emergency Medicine, Tufts Medical Center

Asian Health Initiative Advisory Committee Members

Li Chen, Administrator	South Cove Nursing Manor
Mary Chin, President	Asian American Civic Association
Robert Bloomberg	Tufts Medical Center Board of Governors
Phil Brown	Tufts Medical Center Board of Governors
Laure Leslie, MD	Floating Hospital for Children
Marie Moy	Chinatown Residents' Association
Ruth Moy, Executive Director	Greater Boston Chinese Golden Age Center
William Moy	Chinatown-South Cove Neighborhood Council
Beverly Wing	The Chinatown Coalition
Deborah Joelson	Tufts Medical Center Senior Vice President
Sherry Dong	Tufts Medical Center Office of Community Health Improvement Programs

Dorchester Health Initiative Advisory Committee Members

Phuoc Cao, Director Food Stamp Program	MA Department of Transitional Assistance
Kevin Casey, Executive Director	HHSI Neponset Health Center
Laurel Leslie, MD	Floating Hospital for Children
Mary Mahony	Tufts Medical Center Board of Governors
Chrasandra Reeves	Rogerson Communities
Ira Schlosser	Dorchester House Multi-Service Center (formerly)
Joseph Toomey	Tufts Medical Center Board of Governors
Deborah Joelson	Tufts Medical Center Senior Vice President
Sherry Dong	Tufts Medical Center, Director CHIP

Appendix B

KEY INFORMANT LIST

Chinatown:

Debbie Backus	Castle Square Tenants' Organization
Fong Cheong	Tai Tung Village
Samuel Tsoi	Boston Chinese Evangelical Church
Melody Tsang	Asian American Civic Association
Eugene Welch	South Cove Community Health Center
May Wu	Asian Access Program
Victoria Yue	Boston Chinatown Neighborhood Center/Youth Center

Dorchester:

Kevin Casey	HHSI Neponset Health Center
Anne Greenbaum	Healthy Dorchester
Nam Pham	Vietnamese American Initiative for Development
Ira Schlosser	Dorchester House Multi-Service Center
Philip Severin, MD	Codman Square Health Center
Karen van Unen	Dotwell

South Boston:

Harry Duvall	South Boston Boys & Girls Club
Bill Halpin and Nisha Thakrar	South Boston Community Health Center
Mayra Howard and Linda Doran	South Boston Community Health Center
John McGahan	Gavin Foundation
Kay Walsh and Melissa Lichenberg	South Boston CAN

Chinatown Demographics

CHINATOWN - 1990, 2000, & 2010

Comparative Tricennial Data

Data Geography : Neighborhood Statistical Area (NSA)

Please note: NSA was a BRA defined sub-Planning District for which US Census & MISER generated detailed reports identical to Planning Districts, and the BRA Report is the source for Census 1990 NSA Dataset. For the Census 2000 column both SF1 & SF3 Datasets are used. **For the Census 2010 column, SF1-2010 & American Community Survey Dataset (2005-2009) is used, as 2010 Census Tract data on income and employment have not been released. For the Census 2010 column only percentages are used for subcategories of Asians from a generalization of one specific tract and is obtained from an ACS sample with a wide margin of variability and does not conform with the NSA created by the BRA.** ACS datasets for Census Tract 702 (which comprises Chinatown core) are used for items #8 to #16, while the margin of error and the area being not geographically identical.

	1990	%		2000	%		2010	%
1. Total Population	**3,714**			**4,861**			**6,323**	

2. Race								
		%			**%**			**%**
Total Population:	**3,714base**			**4,861base**			**6,323base**	
White	263	7.1%		1,255	25.8%		2,385	38.0%
Black or African American	131	3.5%		147	3.0%		232	4.0%
Native American	0	0.0%		9	0.2%		5	0.0%
Asian, Pacific Islander	3,301	88.9%		3,349	68.9%		3,514	56.0%
Chinese	3,166	85.2%		N.Av.	N.Av.		N.Av.	56%
Filipino	0	0.0%		N.Av.	N.Av.		N.Av.	0.3%
Japanese	0	0.0%		N.Av.	N.Av.		N.Av.	0.4%
Korean	75	2.0%		N.Av.	N.Av.		N.Av.	0.6%
Vietnamese	0	0.0%		N.Av.	N.Av.		N.Av.	3.8%
Thai	60	1.6%		N.Av.	N.Av.		N.Av.	N.Av.
Asian Indian	0	0.0%		N.Av.	N.Av.		N.Av.	1.7%
Other Asian	60	0.0%		N.Av.	N.Av.		N.Av.	2.9%
Native Hawaiian and Other Pacific Islander	0	0.0%		1	0.0%		1	0.0%
Some other race	19	0.5%		44	0.9%		71	1.0%
Multiracial	N.Av.	N.Av.		57	1.2%		117	2.0%
Hispanic or Latino:	27	0.7%		127	2.6%		217	3.0%

3. Age	1990	%	2000	%	2010	%
Total:	**3,714**	% base	**4,861**	% base	**6,323**	% base
Under 5 years	221	6.0%	153	3.1%	156	2.0%
5 to 9 years	246	6.6%	168	3.5%	124	2.0%
10 to 14 years	160	4.3%	177	3.6%	160	3.0%
15 and 19 years	252	6.8%	642	13.2%	1,367	22.0%
20 to 24 years	340	9.2%	678	13.9%	1,050	17.0%
25 to 29 years	334	9.0%	358	7.4%	489	8.0%
30 to 34 years	212	5.7%	320	6.6%	320	5.0%
35 to 39 years	336	9.0%	302	6.2%	280	4.0%
40 to 44 years	221	6.0%	274	5.6%	275	4.0%
45 to 49 years	92	2.5%	286	5.9%	341	5.0%
50 to 54 years	214	5.8%	236	4.9%	294	5.0%
55 to 59 years	170	4.6%	163	3.4%	328	5.0%
60 to 64 years	206	5.5%	166	3.4%	257	4.0%
65 to 69 years	239	6.4%	224	4.6%	190	3.0%
70 to 74 years	212	5.7%	241	5.0%	172	3.0%
75 to 79 years	123	3.3%	213	4.4%	188	3.0%
80 to 84 years	79	2.1%	121	2.5%	167	3.0%
85 years and over	57	1.5%	137	2.8%	165	3.0%
4. Median Age	**36.4**		**39.9**		**28.1**	

5. Age Groups						
Under 5 years	221	6.0%	153	3.1%	156	2.5%
5 to 17 years	529	14.2%	450	9.3%	405	6.4%
18 to 34 years	1,015	27.3%	1,893	38.9%	3,105	49.1%
35 & 64 years	1,239	33.4%	1,427	29.4%	1,775	28.1%
65 years & over	710	19.1%	936	19.3%	882	13.9%

6. Households						
Population in Households	**3,540**		**3,837**		**4,486**	
Total Households:	1,338		1,678		2,085	
Average household size	**2.65**		**2.29**		**2.15**	

7. Household Type By Household Size						
Total:	**1,338**	**% base**	**1,678**	**% base**	**2,085**	**% base**
1-person household	420	31.4%	653	38.9%	836	40.1%
2-person household	297	22.2%	459	27.4%	651	31.2%
3-person household	198	14.8%	230	13.7%	287	13.8%
4-person household	232	17.3%	191	11.4%	198	9.5%
5-person household	102	7.6%	88	5.2%	70	3.4%
6-person household	55	4.1%	38	2.3%	28	1.3%
7-or-more-person household	34	2.5%	20	1.2%	15	0.7%

8. Home Language & English Skills

Total Population 5 years and over	3,493	% base		4,659	% base		4,028	% base
English only	454	13.0%		1,565	33.6%		2397	59.5%
Spanish	27	0.8%		38	0.8%		181	4.5%
Speak English less than "very well"	18	0.5%		0	0.0%		85	2.1%
Other Indo-European languages	N.Av.	N.Av.		139	3.0%		222	5.5%
Speak English less than "very well"	N.Av.	N.Av.		39	0.8%		56	1.4%
Asian and Pacific Islander languages	3,001	85.9%		2,904	62.3%		1112	27.6%
Speak English less than "very well"	1,967	56.3%		2,383	51.1%		463	11.5%
Other languages	0	0.0%		13	0.3%		113	2.8%
Speak English less than "very well"	0	0.0%		13	0.3%		363	0.9%

9. Educational Attainment

Population 25 yrs. & over	2,495	% base		2,892	% base		3,210	% base
No schooling completed	N.Av.	N.Av.		476	16.4%		N.Av.	N.Av.
Nursery to Gr. 8	1,075	43.1%		720	24.9%		318	9.9%
Gr. 9-12, no diploma	401	16.1%		487	16.8%		189	5.9%
High School graduate*	473	19.0%		435	15.0%		318	9.9%
Some college, no degree	181	7.3%		199	6.8%		260	8.1%
Assoc. degree	69	2.8%		89	3.0%		39	1.2%
Bachelor's degree	196	7.9%		300	10.4%		1053	32.8%
Grad. Prof. Degree or more	100	4.0%		187	6.5%		1027	32.0%

10. Employment Status By Sex

Total Population 16 years and over	3,023	% base		4,260	% base		4,197	% base
In labor force:	1,527	50.5%		2,505	58.8%		2,030	48.3%
Civilian labor Force:	1,527	50.5%		2,500	58.7%		2,030	48.3%
Unemployed	127	4.2%		302	7.1%		278	6.60%
11. Unemployment Rate	**8.3%**			**12.1%**			**13.7%**	

12. Household Income In 1999

Total Households	1,338	% base		1,611	% base		1,606	% base
Less than $10,000	573	42.8%		518	32.1%		633	39.4%
$10,000 - $14,999	167	12.5%		238	14.8%		180	11.2%
$15,000 - $24,999	250	18.7%		233	14.5%		142	8.8%
$25,000 - $34,999	128	9.6%		153	9.6%		122	7.6%
$35,000- $49,999	90	6.7%		169	10.6%		80	5.0%
$50,000 - $74,999	75	5.6%		103	6.4%		192	12.0%
$75,000 - $99,999	23	1.7%		60	3.7%		110	6.8%
$100,000 - $149,999	32	2.4%		79	4.9%		106	6.6%
$150,000 - $199,999	0	0.0%		42	2.6%		11	0.7%
$200,000 or more	0	0.0%		14	0.9%		30	1.9%

	1990	%	2000	%	2010	%
13. Median HH Income	**$12,143**		**$16,597**		**$14,706**	
14. Per Capita Income	**$7,573**		**N.Av.**		**$15,215**	

15. Poverty Level

	1990	%	2000	%	2010	%
Pop. for whom pov. status is determined:	3,577		3,895		N.Av.	
Below Poverty	1,089		1,392		N.Av.	
16. Poverty Rate		**30.4%**		**35.7%**		**43.0%**

17. Housing Units

	1990	% base	2000	% base	2010	% base
Total	**1,494**	**% base**	**1,734**	**% base**	**2,322**	**% base**
Occupied	1,349	90.3%	1,678	96.8%	2,085	89.8%
Owner occupied	58	3.9%	106	6.1%	239	10.3%
Renter occupied	1,291	86.4%	1,572	90.7%	1,846	79.5%
Vacant	145	9.7%	56	3.2%	237	10.2%
For rent	95	6.4%	25	1.4%	54	2.3%
For sale only	0	0.0%	7	0.4%	3	0.1%
Rented or sold, not occupied	N.Av.	0.0%	5	0.3%	113	4.9%
For seasonal, recreational, or occasional use	0	0.0%	10	0.6%	52	2.2%
For migrant workers	N.Av.	0.0%	1	0.1%	0	0.0%
Other vacant	50	3.3%	9	0.5%	14	0.6%

18. Group Quarters Pop. By Group Quarters Type

	1990	%	2000	% base	2010	% base
Total - Group Quarters	**N.Av.**	**N.Av.**	**1,016**	**% base**	**1,837**	**% base**
Institutional population:	0	N.Av.	21	2.1%	0	0.0%
College/University student housing	N.Av.	N.Av.	843	83.0%	1,782	97.0%
Other Noninstitutional group quarters population	174	N.Av.	152	14.9%	55	3.0%

Dorchester Demographics

DORCHESTER PROFILE - 2000
(North & South): 2000

Compiled by:
Eswaran
Selvarajah,
Dec. 10,
2012

Data Source: 2000 SF3 Data , US Census Bureau

1. Total Population

	N.Dorchester	S.Dorchester	Dorchester
Total population	83,212	45,291	128,503

2. Racial Composition

	N.Dorch.	% base	S.Dorch.	% base	Dorchester	% base
Total population	**83,212**	**% base**	**45,291**	**% base**	**128,503**	**% base**
White	18,454	22.2%	15,407	34.1%	33,861	26.3%
Black or African American	38,433	6.2%	22,383	49.4%	60,816	47.3%
Am. Indian & Alaska Native	596	0.7%	101	0.2%	697	0.6%
Asian alone	7,571	9.1%	2,635	5.8%	10,206	7.9%
Asian Indian	455	0.5%	169	0.4%	624	0.5%
Chinese	464	0.6%	217	0.5%	681	0.5%
Filipino	81	0.1%	22	0.0%	103	0.1%
Japanese	76	0.1%	19	0.0%	95	0.1%
Korean	181	0.2%	15	0.0%	196	0.2%
Vietnamese	5,834	7.0%	2,173	4.8%	8,007	6.2%
Other Asian	339	0.4%	103	0.2%	442	0.3%
Nat. Haw. & Pac. Isl.	0	0.0%	12	0.0%	12	0.0%
Some other race	11,705	14.0%	2,325	5.1%	14,030	10.9%
Two or more races	6,453	7.8%	2,428	5.4%	8,881	7.0%
Hispanic or Latino:	13,915	16.70%	3,770	8.30%	17,685	13.80%

DORCHESTER PROFILE - 2000
(North & South): 2000

Data Source: 2000 SF3 Data , US Census Bureau

3. Age Composition

	N.Dorch.	% base	S.Dorch.	% base	Dorchester	% base
Total population	**83,212**	**% base**	**45,291**	**% base**	**128,503**	**% base**
Under 5 years	6,245	7.6%	3,135	6.7%	9,380	7.4%
5 to 9 years	7,815	9.4%	3,649	8.1%	11,464	9.0%
10 to 14 years	7,864	9.6%	3,632	8.0%	11,496	9.0%
15 to 19 years	6,640	8.0%	3,157	7.0%	9,797	7.7%
20 to 24 years	6,943	8.4%	3,084	6.8%	10,027	7.7%
25 to 34 years	14,102	17.0%	7,839	17.3%	21,941	17.0%
35 to 44 years	12,624	15.2%	7,143	15.8%	19,767	15.3%
45 to 54 years	9,180	11.0%	5,423	12.0%	14,603	11.3%
55 to 59 years	2,991	3.5%	2,164	4.8%	5,155	4.0%
60 to 64 years	2,572	3.0%	1,418	3.2%	3,990	3.0%
65 to 74 years	3,800	4.6%	2,442	5.4%	6,242	4.9%
75 to 84 years	1,935	2.3%	1,681	3.6%	3,616	2.9%
85 years	501	0.6%	524	1.2%	1025	0.8%
5. Median Age	**28.1**		**32.8**		**30.3**	

6. Households

	N.Dorch.	S.Dorch.	Dorchester
Total Households	27,407	16,389	43,796
Population in Households:	82,172	44,693	126,865
Household Size	**3.0**	**2.7**	**2.9**

DORCHESTER PROFILE - 2000
(North & South): 2000

Data Source: 2000 SF3 Data , US Census Bureau

7. Household Type By Household Size

	N.Dorch.	% base	S.Dorch.	% base	Dorchester	% base
Total households:	**27,407**	**% base**	**16,389**	**% base**	**43,796**	**% base**
1-person household	6,300	23.0%	4,415	26.9%	10,715	24.5%
2-person household	6,607	24.1%	4,365	26.6%	10,972	25.0%
3-person household	5,123	18.7%	2,941	18.0%	8,064	18.4%
4-person household	4,171	15.2%	2,278	13.9%	6,449	14.8%
5-person household	2,668	9.7%	1,369	8.3%	4,037	9.2%
6-person household	1,367	5.0%	545	3.3%	1,912	4.4%
7-or-more-person household	1,171	4.3%	476	2.9%	1,647	3.8%

8. Home Language & English Skills

	N.Dorch.		S.Dorch.		Dorchester	
Total Population 5 years & over	**76,967**	**100.0%**	**42,156**	**100.0%**	**119,123**	**100.0%**
English Only	44,147	57.3%	31,110	73.8%	75,257	63.1%
Spanish:	12,304	16.0%	3,584	8.6%	15,888	13.3%
Speak English less than "very well"	5,221	6.7%	1,430	3.4%	6,651	5.6%
Other Indo-European languages:	13,470	17.4%	4,793	11.3%	18,263	15.3%
Speak English less than "very well"	6,572	8.4%	2,180	5.1%	8,752	7.3%
Asian & Pacific Island languages:	6,401	8.4%	2,184	5.2%	8,585	7.2%
Speak English less than "very well"	4,412	5.6%	1,654	3.8%	6,066	5.1%
Other languages:	645	0.8%	485	1.2%	1,130	0.9%
Speak English less than "very well"	212	0.3%	180	0.4%	392	0.3%

DORCHESTER PROFILE - 2000
(North & South): 2000

Data Source: 2000 SF3 Data , US Census Bureau

School Enrollment

 By Level Of School By Type Of School For The Population 3 Years & Over

	N.Dorch.	% base	S.Dorch.	% base	Dorchester	% base
Total Population 3 years & over	**79,220**	% base	**43,387**	% base	**122,607**	% base
Nursery school, preschool:	1,230	1.5%	813	1.9%	2,043	1.7%
Kindergarten:	1,844	2.4%	704	1.6%	2,548	2.1%
Grade 1 to Grade 4:	6,650	8.4%	3,034	7.0%	9,684	7.9%
Grade 5 to Grade 8:	6,541	8.3%	3,072	7.1%	9,613	7.9%
Grade 9 to Grade 12:	6,984	8.8%	3,424	7.9%	10,408	8.5%
College, undergraduate	4,661	5.9%	2,501	5.8%	7,162	5.8%
Graduate or professional school	1,217	1.5%	611	1.4%	1,828	1.5%
Not enrolled in school	50,093	63.2%	29,228	67.4%	79,321	64.7%

9. Educational Attainment

	N.Dorch.	% base	S.Dorch.	% base	Dorchester	% base
Total Population 25 years & over	**47,705**	% base	**28,634**	% base	**76,339**	% base
Total	47,705	100.0%	28,634	100.0%	76,339	100.0%
No schooling completed	2,351	4.9%	632	2.2%	2,983	3.9%
Nursery to Gr.8	4,228	9.0%	1,333	4.7%	5,561	7.4%
Gr. 9-12, no Diploma	8,698	18.4%	4,642	16.2%	13,340	17.6%
Some college, no degree	7,828	16.4%	5,857	20.6%	13,685	18.0%
Associate degree	2,376	5.0%	1,637	5.7%	4,013	5.3%
Bachelor's degree	5,085	10.7%	3,427	11.9%	8,512	11.1%
Master's degree	1,759	3.7%	1,638	5.7%	3,397	4.4%
Professional school degree	560	1.2%	370	1.3%	930	1.2%
Doctorate degree	190	0.4%	166	0.6%	356	0.4%

DORCHESTER PROFILE - 2000
(North & South): 2000

Data Source: 2000 SF3 Data , US Census Bureau

10. Employment Status

	N.Dorch.	% base	S.Dorch.	% base	Dorchester	% base
Population 16 years & over	**59,754**	**% base**	**34,210**	**% base**	**93,964**	**% base**
Total	59,754	100.0%	34,210	100.0%	93,964	100.0%
In labor force:	35,821	59.9%	20,087	58.7%	55,908	59.5%
In Armed Forces	13	0.0%	36	0.1%	49	0.0%
Civilian:	35,808	59.9%	20,051	58.6%	55,859	59.5%
Employed	32,258	54.0%	18,604	54.3%	50,862	54.2%
Unemployed	3,550	5.9%	1,447	4.2%	4,997	5.3%
Not in labor force	23,933	40.0%	14,123	41.3%	38,056	40.5%
11. Unemployment Rate		**9.9%**		**7.2%**		**8.9%**

12. Household Income In 1999

	N.Dorch.	% base	S.Dorch.	% base	Dorchester	% base
Total Household Income	**27,407**	**% base**	**16,389**	**% base**	**43,796**	**% base**
Less than $10,000	4,722	17.20%	2,262	13.80%	6,984	15.90%
$10,000 to $14,999	1,790	23.70%	1,049	20.20%	2,839	22.40%
$15,000 to $19,999	1,783	30.20%	862	25.50%	2,645	28.40%
$20,000 to $24,999	2,094	37.80%	1,232	33.00%	3,326	36.00%
$25,000 to $29,999	1,880	44.70%	1,052	39.40%	2,932	42.70%
$30,000 to $34,999	1,737	51.00%	806	44.30%	2,543	48.50%
$35,000 to $39,999	1,806	57.60%	1,168	51.40%	2,974	55.30%
$40,000 to $44,999	1,623	63.50%	962	57.30%	2,585	61.20%
$45,000 to $49,999	1,247	68.00%	839	62.40%	2,086	66.00%
$50,000 to $59,999	2,307	76.40%	1,424	71.10%	3,731	74.50%
$60,000 to $74,999	2,272	84.70%	1,619	81.00%	3,891	83.40%
$75,000 to $99,999	2,347	93.30%	1,607	90.80%	3,954	92.40%

DORCHESTER PROFILE - 2000
(North & South): 2000

Data Source: 2000 SF3 Data , US Census Bureau

$100,000 to $124,999	833	96.30%	796	95.70%	1,629	96.10%
$125,000 to $149,999	357	97.60%	306	97.60%	663	97.60%
$150,000 to $199,999	293	98.70%	262	99.20%	555	98.90%
$200,000 or more	316	99.90%	143	100.10%	459	99.90%
13. Median Household Income	**$34,950**		**$39,930**		**$35,050**	
14. Per capita income in 1999	**$14,763**		**$17,704**		**$15,800**	

15. Poverty Status In 1999

	N.Dorch.	% base	S.Dorch.	% base	Dorchester	% base
Total Population	**85,592**		**44,702**		**127,294**	
Income in 1999 below poverty level:	18,889	22.90%	7,860	17.60%	26,749	21.00%
16. % of Population below poverty		**22.90%**		**17.60%**		**21.00%**

17. Housing Units

	N.Dorch.	% base	S.Dorch.	% base	Dorchester	% base
Total Housing units	**29,211**	% base	**17,142**	% base	**46,353**	% base
Occupied	27,384	93.7%	16,399	95.7%	43,783	94.5%
Vacant	1,827	6.3%	743	4.3%	2,570	5.5%

DORCHESTER (North & South): 2010

Compiled by Beverly Wing & Eswaran Selvarajah December 10, 2012

Data Source: 2010 ACS Data (5 Year Estimates), US Census Bureau

	No.Dorch.	%	So.Dorch.	%	Dorchester.	%
1. Total Population	**77,013**	**%**	**42,532**	**%**	**119,545**	**%**
2. Racial Composition						
Total Population	**77,013**	100%	**42,532**	100%	**119,545**	100%
One race	75,199	97.6%	41,406	97.4%	116,605	97.5%
White	16,743	21.7%	14,180	33.3%	30,923	25.9%
Black or Afr.American	35,281	45.8%	21,600	50.8%	56,881	47.6%
Native American	365	0.5%	149	0.4%	514	0.4%
Asian, Pac.Islander	8,138	10.6%	2,651	6.2%	10,789	9.0%
Chinese	788	1.0%	134	0.3%	922	0.8%
Filipino	233	0.3%	17	0.0%	250	0.2%
Japanese	109	0.1%	0	0.0%	109	0.1%
Korean	159	0.2%	8	0.0%	167	0.1%
Vietnamese	5,536	7.2%	2,204	5.2%	7,740	6.5%
Asian Indian	788	1.0%	107	0.3%	895	0.7%
Other Asian	460	0.6%	181	0.4%	641	0.5%
Nat. Hawaiian/Pac	65	0.1%	0	0.0%	65	0.1%
Some other race	14,672	19.1%	2,826	6.6%	17,498	14.6%
Multiracial	1,814	2.4%	1,126	2.6%	2,940	2.5%
Hispanic Or Latino:	15,631	20.2%	5,123	12.9%	20,754	17.4%

3. Age Composition

	No.Dorch.	%	So.Dorch.	%	Dorchester	%
Total Population	**77,013**	100%	**42,532**	100%	**119,545**	100%
Under 5 yrs.	5,092	6.6%	2,955	6.9%	8,047	6.7%
5 to 9 yrs.	5,192	6.7%	2,434	5.7%	7,626	6.4%
10 to 14 yrs.	5,831	7.6%	2,984	7.0%	8,815	7.4%
15 to 19 yrs.	7,305	9.5%	2,813	6.6%	10,118	8.5%

	No.Dorch.	%	So. Dorch.	%	Dorchester	%
20 to 24 yrs.	8,117	10.5%	3,364	7.9%	11,481	9.6%
25 to 34 yrs.	12,570	16.3%	6,732	15.8%	19,302	16.1%
35 to 44 yrs.	10,137	13.2%	6,247	14.7%	16,384	13.7%
45 to 54 yrs.	9,963	12.9%	5,806	13.7%	15,769	13.2%
55 to 59 yrs.	3,606	4.7%	2,497	5.9%	6,103	5.1%
60 to 64 yrs.	3,110	4.0%	1,797	4.2%	4,907	4.1%
65 to 74 yrs.	3,106	4.0%	2,790	6.6%	5,896	4.9%
75 to 84 yrs.	2,052	2.7%	1,407	3.3%	3,459	2.9%
85 yrs. & over	932	1.2%	706	1.7%	1,638	1.4%

4. Age Groups

	No.Dorch.	%	So. Dorch.	%	Dorchester	%
Under 5 yrs.	5,092	6.6%	2,955	6.9%	8,047	6.7%
5 to 17 yrs.	15,299	19.9%	7,217	17.0%	22,516	18.8%
18 to 34 yrs.	23,716	30.8%	11,110	26.1%	34,826	29.1%
35 to 64 yrs.	26,816	34.8%	16,347	38.4%	43,163	36.1%
65 to 84 yrs.	5,158	6.7%	4,197	9.9%	9,355	7.8%
85 yrs. & over	932	1.2%	706	1.7%	1,638	1.4%

5. Median Age

	No.Dorch.	So. Dorch.	Dorchester
5. Median Age	**N.Av.**	**N.Av.**	**N.Av.**

6. Households

	No.Dorch.	%	So. Dorch.	%	Dorchester	%
Population in Households	**79,868**	**100%**	**43,059**	**100%**	**122,927**	**100%**
Total Households	28,158	35.26%	16,589	38.53%	44,747	36.40%
Average HH Size	**5.22**		**5.97**		**5.46**	

7. Household Type By Size

	No.Dorch.	%	So. Dorch.	%	Dorchester	%
Total Households	**28,158**	**100%**	**16,589**	**100%**	**44,747**	**100%**
1-person	7,079	25.1%	4,839	29.2%	11,918	26.6%
2-persons	7,256	25.8%	4,676	28.2%	11,931	26.7%
3-persons	5,324	18.9%	2,947	17.8%	8,271	18.5%
4-persons	4,029	14.3%	2,107	12.7%	6,137	13.7%
5-persons	2,403	8.5%	1,173	7.1%	3,576	8.0%
6-persons	1,140	4.0%	466	2.8%	1,606	3.6%
7-or-more-persons	927	3.3%	381	2.3%	1,308	2.9%

8. Home Language and English Skills

	No.Dorch.	%	So. Dorch.	%	Dorchester	%
Total Population 5 yrs. & over	**71,921**	**100%**	**39,577**	**100%**	**111,498**	**100%**

English only	37,882	52.7%	27,500	69.5%	65,382	58.6%
Spanish	13,480	18.7%	4,515	11.4%	17,995	16.1%
Speak English less than "very well"	5,794	8.1%	1,697	4.3%	7,491	6.7%
Other Indo-European languages	12,764	17.7%	4,904	12.4%	17,668	15.8%
Speak English less than "very well"	6,234	8.7%	2,024	5.1%	8,258	7.4%
Asian & Pacific Islander languages	6,615	9.2%	2,106	5.3%	8,721	7.8%
Speak English less than "very well"	4,613	6.4%	1,574	4.0%	6,187	5.5%
Other languages	1,180	1.6%	552	1.4%	1,732	1.6%
Speak English less than "very well"	394	0.5%	153	0.4%	547	0.5%

School Enrollment

By Level and Type of School

	No.Dorch.	%	So.Dorch.	%	Dorchester	%
Total Population 3 yrs. & over	**25,557**	**100%**	**11,864**	**100%**	**37,421**	**100%**
Nursery school, preschool	1,063	4.2%	797	6.7%	1,860	5.0%
Kindergarten	1,612	6.3%	676	5.7%	2,288	6.1%
Elementary school (grades 1-8)	9,261	36.2%	4,700	39.6%	13,961	37.3%
High school (grades 9-12)	6,037	23.6%	2,314	19.5%	8,351	22.3%
College or graduate school	7,584	29.7%	3,377	28.5%	10,961	29.3%

9. Educational Attainment

	No.Dorch.	%	So.Dorch.	%	Dorchester	%
Total Population 25 yrs. & over	**45,476**	**100%**	**27,982**	**100%**	**73,458**	**100%**
Less than 9th grade	5,697	12.5%	2,143	7.7%	7,840	10.7%
9th to 12th grade, no diploma	5,700	12.5%	3,123	11.2%	8,823	12.0%
High school graduate (includes equivalency)	13,788	30.3%	9,169	32.8%	22,957	31.3%
Some college, no degree	8,175	18.0%	5,082	18.2%	13,257	18.0%
Associate's degree	2,664	5.9%	1,681	6.0%	4,345	5.9%
Bachelor's degree	6,130	13.5%	4,253	15.2%	10,383	14.1%
Graduate or professional degree	3,322	7.3%	2,531	9.0%	5,853	8.0%

10. Employment Status

	No.Dorch.	%	So.Dorch.	%	Dorchester	%
Population 16 yrs. & over	**59,351**	**100%**	**33,440**	**100%**	**92,791**	**100%**
In labor force	41,035	69.1%	23,637	70.7%	64,672	69.7%
Civilian labor force	40,980	69.0%	23,551	70.4%	64,531	69.5%
Employed	34,324	57.8%	20,458	61.2%	54,782	59.0%
Unemployed	6,656	11.2%	3,093	9.2%	9,749	10.5%
Armed Forces	55	0.1%	86	0.3%	141	0.2%

Not in labor force	18,316	30.9%	9,803	29.3%	28,119	30.3%
Civilian labor force	40,980	69.0%	23,551	70.4%	64,531	69.5%
11. Unemployment Rate		**16.2%**		**13.1%**		**15.1%**

12. Household Income

	No.Dorch	%	So.Dorch	%	Dorchester	%
Total households (Income determined households)	**27,422**	**100%**	**15,771**	**100%**	**43,193**	**100%**
Less than $10,000	4,034	14.7%	1,920	12.2%	5,954	13.8%
$10,000 to $14,999	2,453	8.9%	762	4.8%	3,215	7.4%
$15,000 to $24,999	3,515	12.8%	1,610	10.2%	5,125	11.9%
$25,000 to $34,999	2,991	10.9%	1,371	8.7%	4,362	10.1%
$35,000 to $49,999	3,354	12.2%	2,300	14.6%	5,654	13.1%
$50,000 to $74,999	4,403	16.1%	3,190	20.2%	7,593	17.6%
$75,000 to $99,999	2,720	9.9%	1,706	10.8%	4,426	10.2%
$100,000 to $149,999	2,544	9.3%	1,899	12.0%	4,443	10.3%
$150,000 to $199,999	960	3.5%	769	4.9%	1,729	4.0%
$200,000 or more	448	1.6%	244	1.5%	692	1.6%

13. Medium HH Income	**$35,048**	**$49,989**	**$49,876**	
14. Per Capita Income	**N.Av.**	**N.Av.**	**N.Av.**	
15. Poverty Status	**N.Av.**	**N.Av.**	**N.Av.**	
16. Poverty Rate	**N.Av.**	**N.Av.**	**N.Av.**	

17. Housing Units

	No. Dorch.	%	So. Dorch.	%	Dorchester	%
Total housing units	**31,577**	**100%**	**17,891**	**100%**	**49,468**	**100%**
Occupied housing units	27,422	86.8%	15,771	88.2%	43,193	87.3%
Vacant housing units	4,155	13.2%	2,120	11.8%	6,275	12.7%
Owner-occupied	8,422	26.7%	6,650	37.2%	15,072	30.5%
Renter-occupied	19,000	60.2%	9,121	51.0%	28,121	56.8%

South Boston Demographics

SOUTH BOSTON: 2000 & 2010
Comparative Decennial Data

	2000	%	2010	%
1.Total Population	**29,938**		**32,011**	

2. Race				
Total Population:	**29,938**	100%	**32,011**	100%
One Race	29,359	98.1%	31,840	99.5%
White	26,007	86.9%	26,520	82.8%
Black or African American	958	3.2%	1,764	5.5%
Native American	98	0.3%	53	0.2%
Asian, Pac. Is.	1,176	3.9%	1,595	5.0%
Chinese	725	2.4%	1,101	3.4%
Filipino	66	0.2%	83	0.3%
Japanese	17	0.1%	71	0.2%
Korean	12	0.0%	82	0.3%
Vietnamese	268	0.9%	98	0.3%
Asian Indian	21	0.1%	149	0.5%
Other Asian	55	0.2%	11	0.0%
Native HI and Other Pacific Islander	12	0.0%	0	0.0%
Some other race	1,120	3.7%	1,908	6.0%
Multiracial	579	1.9%	171	0.5%
Hispanic or Latino:	2,235	7.5%	2,925	9.1%

3. Age				
Under 5 years	1,474	4.9%	1,430	4.5%
5 to 9 years	1,661	5.5%	1,155	3.6%
10 to 14 years	1,528	5.2%	1,245	3.9%
15 to 19 years	1,294	4.6%	1,650	5.2%

20 to 24 years	2,179	7.3%	2,770	8.7%
25 to 34 years	7,105	23.7%	9,140	28.6%
35 to 44 years	4,902	16.3%	4,745	14.8%
45 to 54 years	3,414	11.3%	3,998	12.5%
55 to 59 years	1,226	4.1%	1,432	4.5%
60 to 64 years	1,158	3.8%	1,204	3.8%
65 to 74 years	2,060	6.9%	1,646	5.1%
75 to 84 years	1,541	5.1%	1,062	3.3%
85 years and over	396	1.3%	534	1.7%

4. Age Groups

Total:	**29,938**	**100%**	**33,674**	**100%**
under 5 years	1,474	4.9%	1,494	4.4%
5 - 17 years	3,911	13.1%	3,021	9.0%
18 - 34 years	9,856	32.9%	14,531	43.2%
35 - 64 years	10,700	35.7%	11,343	33.7%
65 - 84 years	3,601	12.0%	2,755	8.2%
85 years & over	396	1.3%	530	1.6%

5. Median Age

	33.5		**32.5**

6. Households

Population in Households	**29,419**		**33,005**
Total Households	14,030		16,214
Average household size	**2.10**		**2.04**

7. Household Type By Size

Total:	**14,030**	**100%**	**16,214**	**100%**
1-person household	5,888	42.0%	6,371	39.0%
2-person household	4,306	30.7%	5,776	36.0%
3-person household	1,859	13.3%	2,277	14.0%
4-person household	1,120	8.0%	1,130	7.0%
5-person household	590	4.2%	406	3.0%
6-person household	211	1.5%	151	1.0%
7-or-more-person household	56	0.4%	103	1.0%

8. Home Language & English Skills

Total Population 5 years and over	28,464	100%	30,581	100%
English only	23,693	83.2%	25,476	83.3%
Spanish	2,069	7.2%	2,323	7.6%
Speak English less than "very well"	1,213	4.2%	1,059	3.5%
Other Indo-European languages	1,556	5.4%	1,516	5.0%
Speak English less than "very well"	621	2.2%	586	1.9%
Asian and Pacific Islander languages	1,065	3.7%	1,095	3.6%
Speak English less than "very well"	732	2.5%	847	2.8%
Other languages	81	0.3%	171	0.6%
Speak English less than "very well"	32	0.1%	43	0.1%

9. Educational Attainment

Population 25 yrs. & over	21,802	100%	23,761	100%
No schooling completed	250	1.1%	N.Av.	N.Av.
Nursery to Gr. 8	1,107	5.1%	1,305	5.5%
Gr. 9-12, no diploma	2,744	12.6%	1,470	6.2%
High School graduate	7,049	32.3%	5,885	24.8%
Some college, no degree	3,369	15.5%	2,553	10.7%
Assoc. degree	1,133	5.2%	1,000	4.2%
Bachelor's degree	4,135	19.0%	7,838	33.0%
Grad. Prof. Degree or more	2,015	9.2%	3,710	15.6%

10. Employment Status By Sex

Total Population 16 years and over:	24,994	100%	27,839	100%
In labor force:	16,037	64%	20,704	74.4%
Civilian labor Force:	15,935	64%	20,689	74.3%
Unemployed	793		1,123	

11. Unemployment Rate

		5.0%		4.0%

12. Household Income In 1999

Total Households	14,036	100%	15,384	100%
Less than $10,000	2,159	15.4%	1,708	11.1%
$10,000 to $14,999	949	6.8%	651	4.2%
$15,000 - $24,999	1,595	11.4%	1,297	8.4%

$25,000 - $34,999	1,435	10.3%	1,127	7.3%
$35,000 - $49,999	2,177	15.6%	1,477	9.6%
$50,000 - $74,999	2,605	18.5%	2,497	16.2%
$75,000 to $99,999	1,520	10.8%	1,946	12.6%
$100,000 - $149,999	1,104	7.9%	2,416	15.7%
$150,000 to $199,999	366	2.6%	1,269	8.2%
$200,000 or more	126	0.9%	996	6.5%
13. Median HH Income	**$40,865**		**$58,611**	
14. Per Capita Income			**$41,342**	
15. Poverty Level				
Pop. for whom pov. status is determined:	29,449			
16. Below Poverty	**14.3%**			
17. Housing Units				
Total housing units	**15,022**	**100%**	**16,941**	**100%**
Occupied housing units	14,030	93%	15,384	91%
Vacant housing units	992	6.6%	1,557	9.2%
Vacancy Rate	**6.6%**		**9.2%**	