

# **Martha's Vineyard Statistical Profile**

## ***February 2019***



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## ***Health and Education***

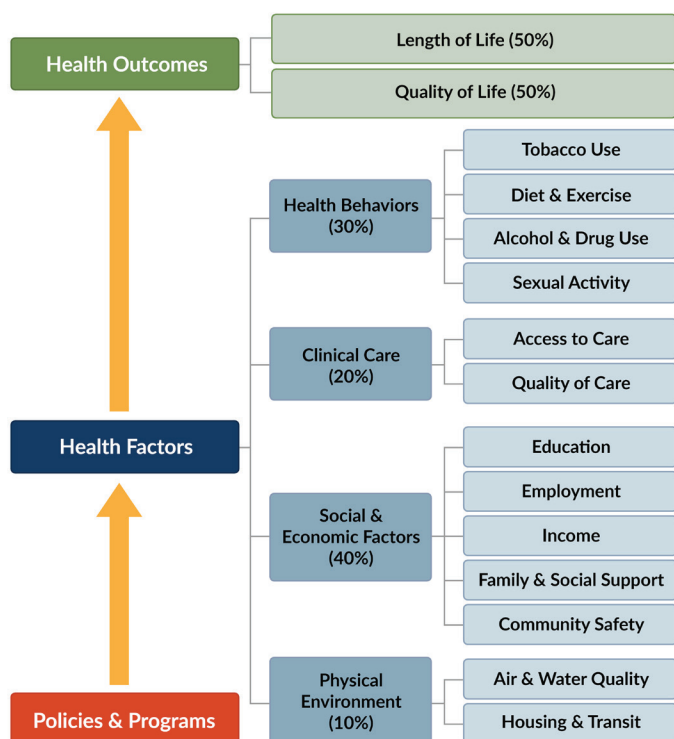
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# HEALTH AND EDUCATION

The County Health Rankings, a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute, measures vital health factors in counties across the United States. The program helps communities understand what factors influence their overall quality and length of life, as outlined in the chart below. As of 2018, Dukes County ranked first in the state for quality of life (see glossary), despite its low ranking for clinical care and other health factors.

## County health rankings: County, 2018

Source: University of Wisconsin Population Health Institute (County Health Rankings and Roadmaps)



County Health Rankings model © 2014 UWPHI

## Health outcomes (ranking)

Overall rank	Length of life	Quality of life
Nantucket	Nantucket	Dukes (1)
Middlesex	Middlesex	Norfolk
Dukes (3)	Dukes (3)	Middlesex
Norfolk	Norfolk	Nantucket
Hampshire	Hampshire	Barnstable
Essex	Essex	Hampshire
Worcester	Suffolk	Franklin
Barnstable	Worcester	Essex
Plymouth	Plymouth	Plymouth
Franklin	Franklin	Worcester
Suffolk	Bristol	Berkshire
Berkshire	Hampden	Bristol
Bristol	Barnstable	Suffolk
Hampden	Berkshire	Hampden

## Health factors (ranking)

Overall rank	Health behaviors	Clinical care	Social and economic factors	Physical environment
Norfolk	Middlesex	Hampshire	Norfolk	Nantucket
Middlesex	Barnstable	Norfolk	Middlesex	Barnstable
Hampshire	Norfolk	Barnstable	Hampshire	Hampshire
Barnstable	Dukes (4)	Middlesex	Nantucket	Dukes (4)
Nantucket	Nantucket	Berkshire	Franklin	Bristol
Franklin	Hampshire	Suffolk	Plymouth	Plymouth
Dukes (7)	Essex	Franklin	Worcester	Suffolk
Berkshire	Berkshire	Worcester	Dukes (8)	Berkshire
Essex	Suffolk	Plymouth	Essex	Hampden
Plymouth	Franklin	Essex	Barnstable	Franklin
Worcester	Worcester	Bristol	Berkshire	Norfolk
Suffolk	Plymouth	Hampden	Bristol	Middlesex
Bristol	Bristol	Nantucket	Suffolk	Worcester
Hampden	Hampden	Dukes (14)	Hampden	Essex

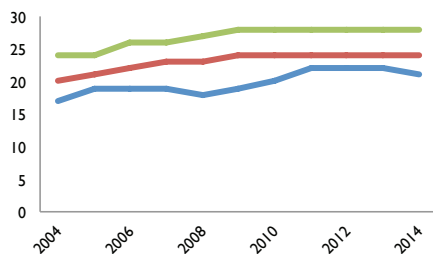
## Health trends: County (various time ranges)

Source: University of Wisconsin Public Health Institute (County Health Rankings and Roadmaps)

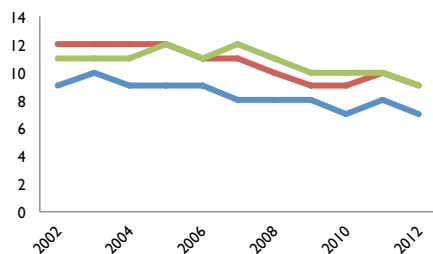
According to data on the County Health Rankings website, Dukes County surpasses both the state and country in eight out of 12 selected health measures. It falls short in terms of preventable hospital stays, health insurance coverage and mammography screenings. Mammography screenings on the Island have declined by 17 percent in the last decade.

— Dukes County  
— Massachusetts  
— United States

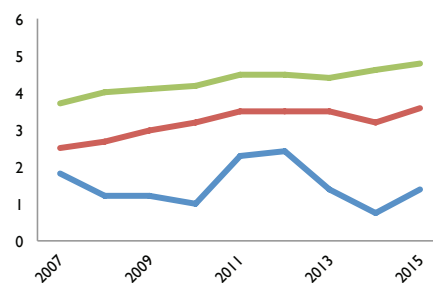
**Adult Obesity  
(Percent Obese)**



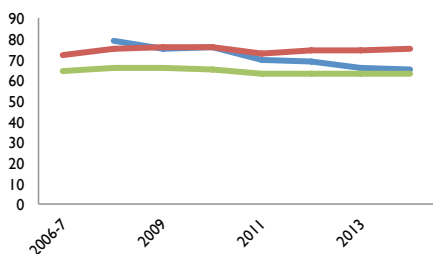
**Air Pollution (Micrograms Per Cubic Meter)**



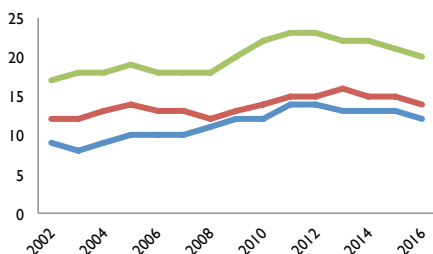
**Chlamydia Cases Per 1,000**



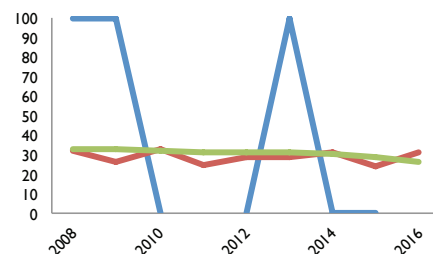
**Mammography Screening  
(Percent Screened)**



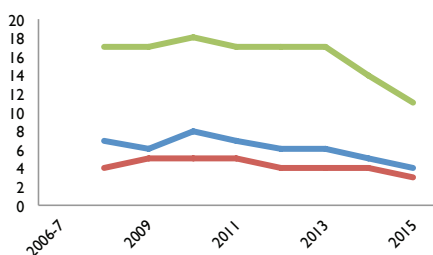
**Percent of Children  
in Poverty**



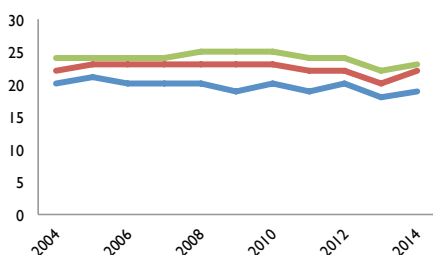
**Percent of Driving Deaths  
Involving Alcohol**



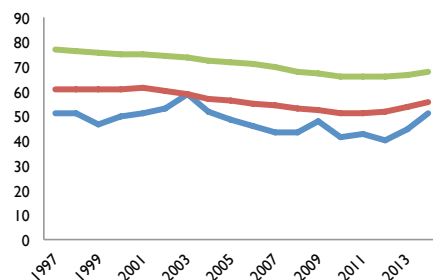
**Percent of Population  
Uninsured**



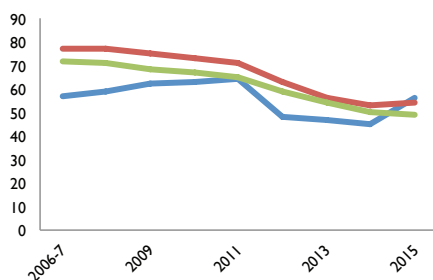
**Physical Inactivity  
(Percent Inactive)**



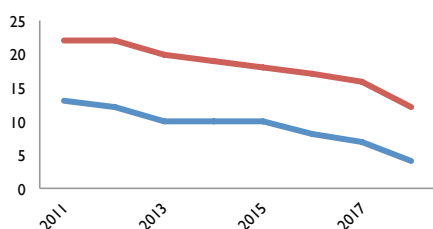
**Premature Deaths Per 1,000**



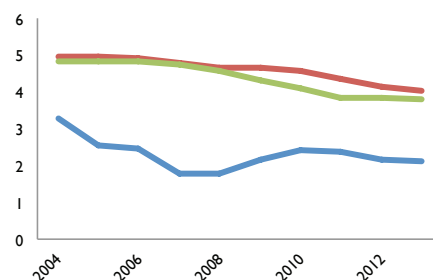
**Preventable Hospital Stays**



**Teen Births (Per 1,000,  
Female Population Ages  
15-19)**



**Violent Crime Rate**



## Number of arrests per town, 2007–2017

Source: Annual town reports, police departments

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	Average
Aquinnah	29	19	11	7	10	8	12	8	6	5	1	10.5
Chilmark	UA	UA	20	36	25	18	11	16	18	18	14	19.6
Edgartown	UA	90	73	99	115	106	111	121	119	89	89	101.2
Gosnold	0	0	0	0	0	0	0	0	0	0	0	0
Oak Bluffs	135	296	189	198	207	228	195	249	222	256	236	219
Tisbury	46	81	63	59	69	86	133	127	96	64	73	81.5
W.Tisbury	11	39	41	33	38	25	11	15	11	19	25	24.4

## Arrest rate by town,<sup>2</sup> 2016

Based on data from town reports and police departments and American Community Survey population estimates

Oak Bluffs	83.4
Aquinnah	32.1
Edgartown	23.6
Chilmark	21.4
Tisbury	19.9
W.Tisbury	8.4
Gosnold	0

<sup>2</sup> Per thousand.

## Lyme disease rates: County comparison, 2015

Source: Centers for Disease Control and Prevention, American Community Survey 5-Year Estimates

Dukes County	3.46
Nantucket County	3.22
Plymouth County	1.23
Bristol County	1.04
Franklin County	0.91
Norfolk County	0.78
Barnstable County	0.75
Berkshire County	0.68
Hampshire County	0.67
Worcester County	0.67
Middlesex County	0.45
Essex County	0.4
Hampden County	0.39
Suffolk County	0.14

	2010	2015	Change
Dukes	1.86	3.46	86%
Nantucket	3.18	3.22	1%
Plymouth	0.56	1.23	120%
Bristol	0.36	1.04	189%
Franklin	0.76	0.91	20%

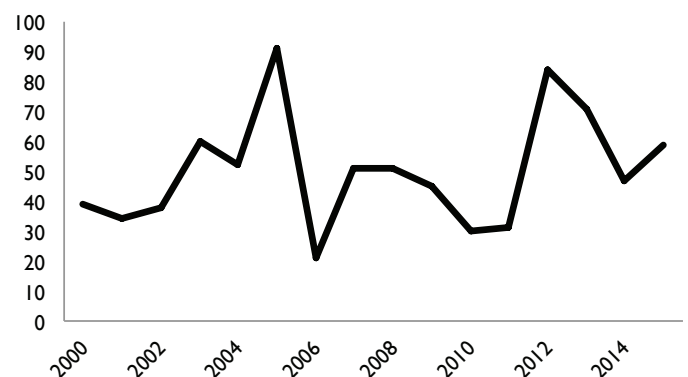
## Lyme disease cases: County comparison, 2000–2015

Source: Centers for Disease Control and Prevention, American Community Survey 5-Year Estimates

The Lyme disease rate in Dukes County has grown 86 percent since 2010 and is the highest of any county in the state. Still, the number of registered cases here has fallen from a peak of 91 in 2005.

	2000	2005	2010	2015
Barnstable County	154	226	165	160
Berkshire County	51	66	132	88
Bristol County	74	147	194	577
Dukes County	39	91	30	59
Essex County	204	259	234	306
Franklin County	9	23	54	65
Hampden County	72	118	161	183
Hampshire County	34	68	93	108
Middlesex County	129	440	514	704
Nantucket County	39	29	32	34
Norfolk County	80	251	301	534
Plymouth County	152	323	275	618
Suffolk County	25	44	45	106
Worcester County	89	233	322	540

## Lyme Disease Cases: Dukes County



## Opioid overdose deaths: County comparison, 2000–2016

Source: Registry of Vital Records and Statistics, Massachusetts Department of Public Health

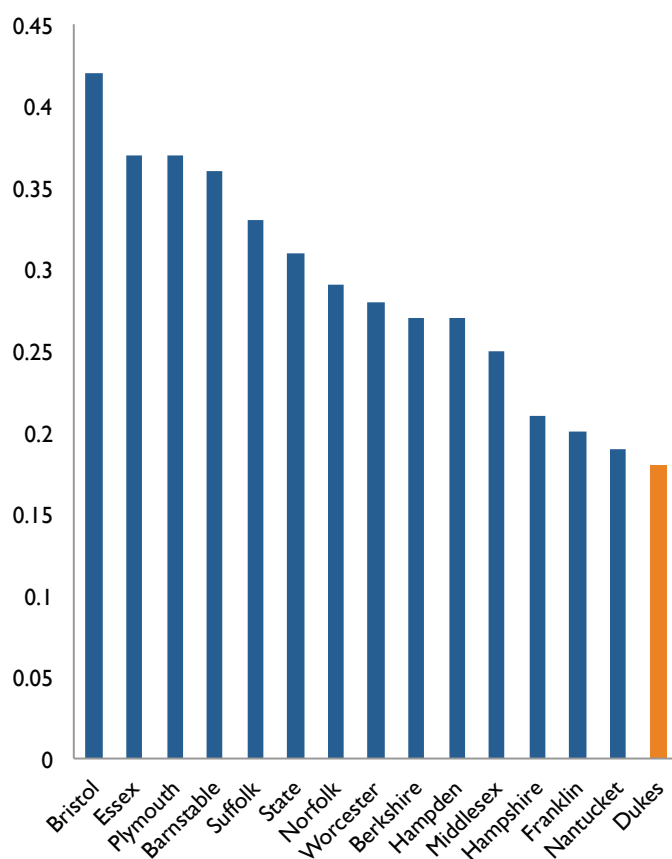
The Massachusetts Department of Public Health counts opioid-overdose deaths as those confirmed as relating to heroin, opioid-based prescription painkillers, or other unspecified opioids. The deaths may be suicides or unintentional. In 2016 Dukes County had the lowest opioid overdose rate in Massachusetts, followed by Nantucket. However, Island physicians and others estimate a higher incidence of opioid-overdose deaths than the numbers reported by the state.

	2000	2002	2004	2006	2008	2010	2012	2014	2016	Total
Barnstable	12	21	17	24	22	20	24	55	78	512
Berkshire	2	1	6	1	3	4	18	29	35	193
Bristol	38	66	72	85	84	79	95	144	233	1,620
Dukes	1	1	1	0	1	0	0	5	3	27
Essex	51	55	68	87	65	51	94	208	284	1,768
Franklin	5	1	3	6	2	6	8	10	14	107
Hampden	32	42	32	46	48	48	59	64	128	918
Hampshire	5	5	8	10	11	12	11	26	34	222
Middlesex	64	92	105	118	112	94	122	273	392	2,568
Nantucket	0	0	0	0	0	1	0	1	2	9
Norfolk	29	44	40	49	73	60	71	126	202	1,264
Plymouth	23	29	28	49	48	41	57	112	185	1,118
Suffolk	49	98	83	107	74	64	91	145	253	1,827
Worcester	68	71	51	74	78	80	91	162	226	1,655
<b>Total</b>	<b>379</b>	<b>526</b>	<b>514</b>	<b>660</b>	<b>622</b>	<b>560</b>	<b>742</b>	<b>1,361</b>	<b>2,069</b>	<b>13,818</b>

## Opioid overdose death rate: County comparison, 2016

Source: Registry of Vital Records and Statistics, Massachusetts Department of Public Health; American Community Survey 5-Year Estimates (population)

Bristol	0.42
Essex	0.37
Plymouth	0.37
Barnstable	0.36
Suffolk	0.33
Norfolk	0.29
Worcester	0.28
Berkshire	0.27
Hampden	0.27
Middlesex	0.25
Hampshire	0.21
Franklin	0.2
Nantucket	0.19
Dukes	0.18
<b>State</b>	<b>0.31</b>



## Homelessness: County, 2015–2018

Source: Barnstable County Department of Human Services; Dukes County Associate Commissioner for the Homeless

Homelessness on the Vineyard has been difficult to gauge, with many people in transitional or sub-standard housing likely falling under the radar. The annual point-in-time counts conducted by the Cape and Island Regional Network on Homelessness occur on a single night in January and do not include people living in hotels or sheltering with family and friends. As another measure, the Dukes County Associate Commissioner for the Homeless, between February 2016 and May 2017, counted 38 homeless individuals, and 82 individuals or families in unstable housing situations in Dukes County.

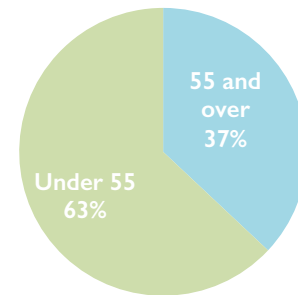
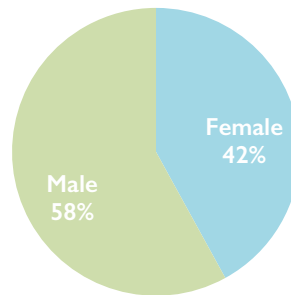
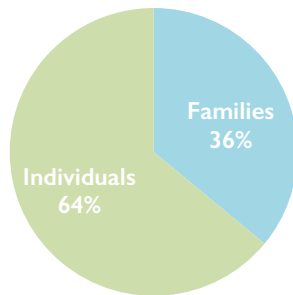
## Annual point-in-time counts (BCDHS)

	2016	2017	2018
Dukes	6	4	11
Nantucket	0	0	0
Barnstable	54	39	39

## Dukes County, as observed from Feb. 2016 – May 2017

Homeless individuals	38
Individuals/families in process of being displaced from rental with no other housing	38
Individuals/families couch surfing	23
Individuals/families facing eviction	21
<b>Total</b>	<b>120</b>

As counted by the associate commissioner for the homeless:



## Martha's Vineyard Center for Living and Serving Hands food distribution: County, 2013–2017

Source: Vineyard Committee on Hunger

## SNAP participation by town (percent of population), 2010–2016

Source: American Community Survey 5-Year Estimates

Food security refers to a person's access throughout the year to food that meets his or her dietary needs and preferences and supports a healthy lifestyle. The amount of food distributed through the Martha's Vineyard Center for Living and Serving Hands program more than doubled between 2013 and 2017, while the average number of clients per month increased 44 percent. The comparatively smaller increase among clients suggests that people are relying more heavily on the programs than before.

Countywide, the number of households participating in the state's Supplemental Nutrition Assistance Program (SNAP) declined by 22 percent between 2010 and 2016, but that mostly reflects an 83 percent drop in Tisbury. The figure grew in all other towns except West Tisbury—more than doubling in Oak Bluffs and tripling in Gosnold. Statewide, the figure increased by 49 percent.

Year	GBFB pounds	GBFB meals	Percent from GBFB	Total pounds*	Average clients per month
FY13	27,475	22,659	51	53,873	202
FY14	25,909	21,539	39	66,433	255
FY15	26,553	22,128	39	68,085	280
FY16	45,786	36,555	37	123,746	292
FY17	50,479	39,483	41	123,120	291
<b>Total</b>	<b>176,202</b>	<b>142,363</b>	<b>40</b>	<b>435,256</b>	<b>1,320</b>

GBFB: Greater Boston Food Bank

\*Total pounds includes food from supermarkets, GBFB and food purchased for Family to Family Program.

	2010	2011	2012	2013	2014	2015	2016
Aquinnah	4.7	4.3	2.5	2.3	0	1.2	7.1
Chilmark	2.4	4	4.5	3.4	3.3	4.9	3.8
Gosnold	3.6	3.2	6.9	8.3	11.8	12.2	12.9
Edgartown	0	1.1	1.2	1.3	2	2.7	2.4
Oak Bluffs	2	2.6	2.8	1.9	2.2	3	4.2
Tisbury	10.3	9.7	9.1	4	2.8	2.2	1.7
W. Tisbury	2.8	0	0	0	0	2.8	2.7
<b>County</b>	<b>3.6</b>	<b>3.5</b>	<b>3.4</b>	<b>2</b>	<b>2</b>	<b>2.8</b>	<b>3.1</b>
<b>State</b>	<b>8.4</b>	<b>9.5</b>	<b>10.7</b>	<b>11.7</b>	<b>12.4</b>	<b>12.5</b>	<b>12.5</b>

## Martha's Vineyard Community Services: Services provided in 2017

Source: Martha's Vineyard Community Services

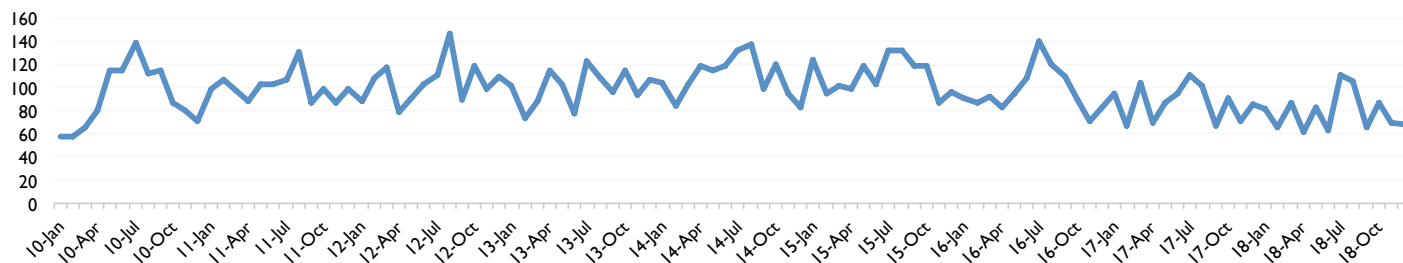
1,200 families served	Early childhood programs
292 families served	Islandwide Youth Collaborative
306 survivors of domestic violence	Connect to End Violence
17,761 hours of counseling	Island Counseling Service
5,409 volunteer hours	Thrift Shop

## Martha's Vineyard Hospital inpatient discharges\* and emergency visits, 2010–2018

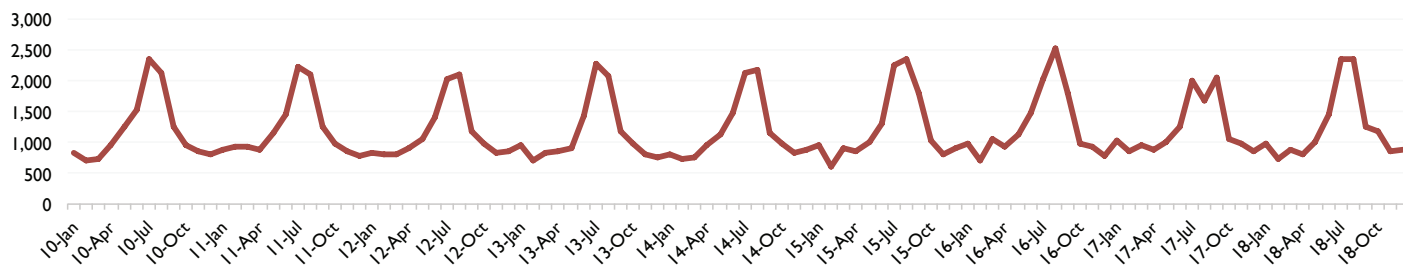
Source: Martha's Vineyard Hospital

Inpatient admissions and emergency visits to the hospital typically peak around August, although emergency visits show a more regular swing from season to season. Total emergency visits since 2010 have increased 2.5 percent, from 14,493 to 14,703, while inpatient discharges have decreased 13.5 percent, from 1,090 to 943. According to the hospital, the decrease reflects an industry-wide trend toward outpatient care, driven by technological and pharmaceutical advances, and the fact that those advances have a greater effect on sub-acute care, which makes up a portion of the hospital's inpatient business.

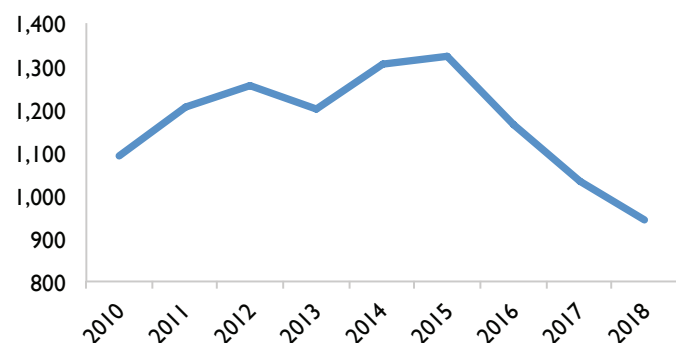
### Inpatient Discharges



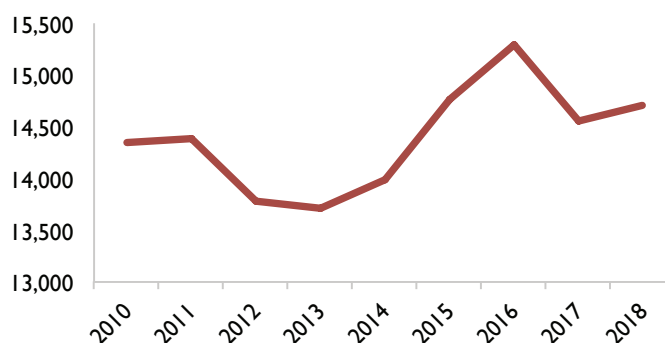
### Emergency Visits



### Total Inpatient Discharges



### Total Emergency Visits



\* Reporting of inpatient numbers changed in October 2013, with the hospital counting discharges rather than admissions.

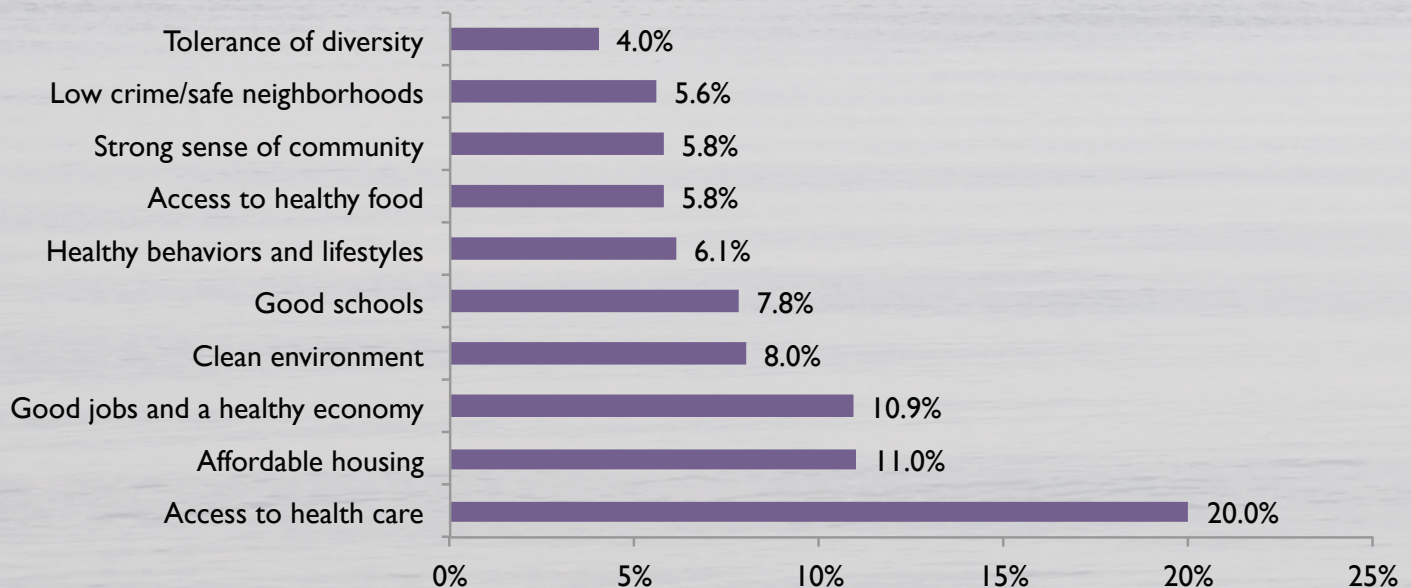


## Martha's Vineyard Hospital's 2016 Community Health Assessment and Implementation Strategy: Selected tables and charts

The 2016 Community Health Assessment conducted by the Martha's Vineyard Hospital provides insight into how the Island's year-round residents view their quality of life. A survey that winter collected data from 319 respondents, and another dozen or so were interviewed over the phone. Respondents ranked access to health care as the most important factor in defining a healthy community, and identified alcohol and drug abuse as the top health problems on the Vineyard, followed by aging problems and housing. The figures and citations here are taken directly from the hospital's 2016 Community Health Assessment and Implementation Plan.

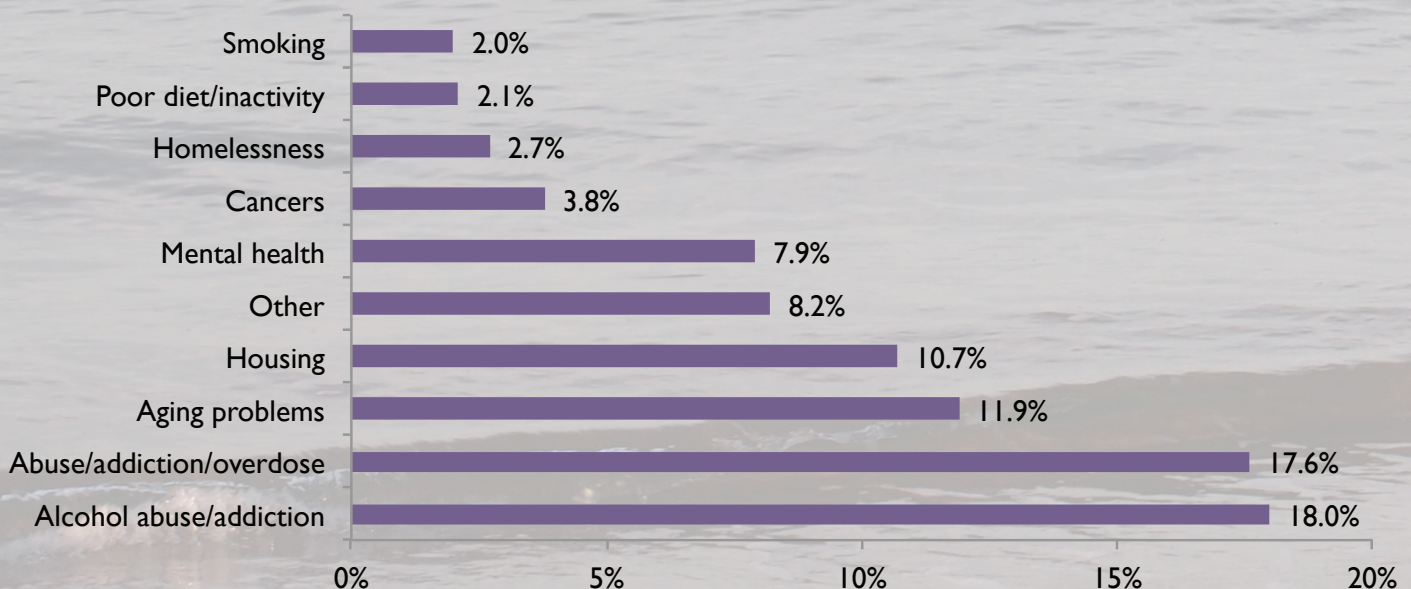
### Ideal healthy community

Think about your ideal community...From the following list, what do you think are the three most important factors that define a "Healthy Community"?



### Top health issues

From the following list, what do you think are the three most important health problems on the Vineyard?





Continued from page 47 . . .

## Health behaviors, 2012–2013<sup>1</sup>

	County	State
Cancer Screening — mammogram within 3 years (female Medicare beneficiaries age 67–69)	69.3%	78.8%
Cancer screening — pap test within 2 years (female age 18 and older)	75.2%	84.2%
Cancer screening — colonoscopy (adults age 50 or older)	67.1%	71%
HIV screenings — adults never screened for HIV	60%	61.9%
Pneumonia vaccinations (adults 65 and older)	67.6%	70.6%
Physical inactivity (percent with sedentary lifestyle)	18.7%	21.1%
Walking or biking to work	6.4%	5.5%
Alcohol consumption (age 18 or older)	29.7%	20.3%
Tobacco use — currently smoking some days or every day	13.6%	15.4%
Tobacco usage — ever smoked 100 or more cigarettes	68.5%	45.4%
Substance abuse — admission to DPH-funded treatment programs	1,300.9	1,532.4
Injection drug user admission to DPH-funded treatment program	243.5	621.1

## General health, 2006–2012<sup>2\*</sup>

Poor dental health (adults 18+)	15.4%	14%
Poor general health	11.2%	12.1%

## Health outcomes, 2010–2014<sup>3</sup>

Asthma prevalence	11.8%	15.4%
All cancer rate (excluding cervical cancer)	414.5	483.1
Mortality rate — all cancer	161.5	167.2
Diabetes prevalence	5.8%	8.1%
Heart disease prevalence	2.3%	3.9%
Hypertension prevalence	25.4%	25.3%
Mortality rate — heart disease	193.8	198.3
Depression (Medicare)	18.2%	20.2%
Low-weight births	5.5%	7.8%
Infant mortality rate	3.3	4.9
Obesity rate (BMI>30.0)	20.8%	23.3%
Overweight rate (BMI>25)	32.4%	36.2%
Chlamydia rate	75.3	316.7
Gonorrhoea rate	23.1	5,700
HIV prevalence	221.1	329

\* Poor dental health reports the percentage of adults age 18 and older who self-report that six or more of their permanent teeth have been removed due to tooth decay, gum disease, or infection. Poor General Health is % of people who self-reported having fair or poor health in response to “Would you say that in general your health is excellent, very good, good, fair, or poor?”

<sup>1</sup> Source: Dartmouth College Institute for Health Policy Clinical Practice, Dartmouth Atlas of Health Care. 2012. Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health Human Services, Health Indicators Warehouse. 2006–12. Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2012 MassCHIP Health Status Indicators Report for Dukes County. 2013.

<sup>2</sup> Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES. Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health & Human Services, Health Indicators Warehouse. 2006–12. Retrieved from Community Commons 3/31/16.

<sup>3</sup> Data Source: Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. 2014. Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES. 2011–12. National Institutes of Health, National Cancer Institute, Surveillance, Epidemiology, and End Results Program. State Cancer Profiles. 2008–12. Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2009–13. Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2012. US Department of Health & Human Services, Health Resources and Services Administration, Area Health Resource File. 2012–2013. US Census Bureau, American Community Survey. 2010–14. Retrieved from Community Commons 3/31/16.

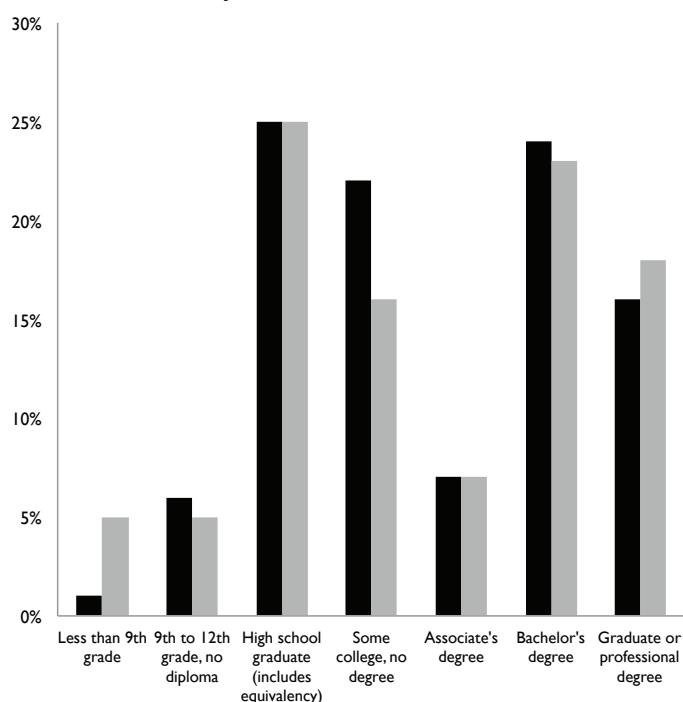
## Educational attainment (percent of population) by town, 2016

Source: American Community Survey 5-Year Estimates

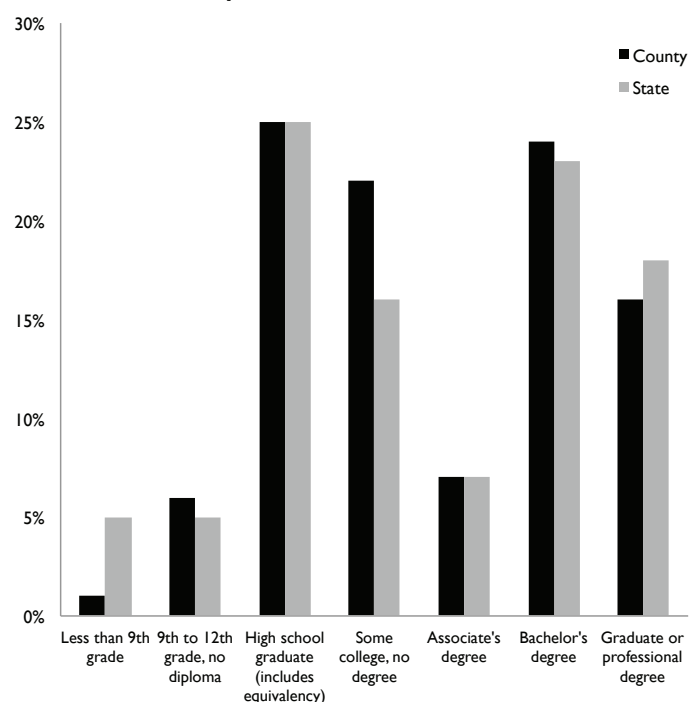
Compared to the state as a whole, people over 25 in Dukes County were slightly more likely to have started but not finished college. But they were also slightly more likely to have finished ninth grade, and about as likely to have a bachelor's degree. In the same age group, Dukes County mirrored the state in terms of completing associate degree programs and high school, but fell slightly short in terms of attaining graduate or professional degrees.

	Aquinnah	Chilmark	Gosnold	Edg.	O.B.	Tisbury	W.Tis.	County	State
<b>Population 18 to 24</b>	36	84	4	524	135	376	376	1,297	70,1594
Less than high school graduate	0	11.9	0	3.2	73.3	17.3	10.9	15.9	10.5
High school graduate (includes equivalency)	13.9	32.1	100	16	0	49.2	20.3	25.7	27.7
Some college or associate's degree	72.2	41.7	0	54	0	21.8	53.6	38.6	45.1
Bachelor's degree or higher	13.9	14.3	0	26.7	26.7	11.7	15.2	19.9	16.7
<b>Population 25 and over</b>	402	922	49	3,138	3,430	2,963	2,963	12,726	4,649,997
Less than 9th grade	11.7	0	0	1.8	1.7	0.5	0	1.4	4.7
9th to 12th grade, no diploma	2	0.3	0	17.1	1.2	4.2	1.2	5.8	5.3
High school graduate (includes equivalency)	23.6	13.7	16.3	30.2	23.2	24.8	23.2	24.6	25.1
Some college, no degree	14.4	22.9	12.2	16.6	26.9	20	23.7	21.6	16
Associate's degree	6.2	3	12.2	4.9	6.5	11.5	5.5	6.9	7.7
Bachelor's degree	26.9	38	32.7	15.6	24.7	25.1	27.8	24	23.1
Graduate or professional degree	15.2	22.1	26.5	13.8	15.8	13.8	18.7	15.8	18.2
High school graduate or higher	86.3	99.7	75%	81.1	97.1	95.2	95.2	92.8	90.1

Population 25 and Over



Population 25 and Over



## Adult education enrollment: Island 2009–2018

Source: Adult and Community Education of Martha's Vineyard; Martha's Vineyard Association of Emergency Medical Technicians, Inc.

To gauge adult education enrollment on the Island, we gathered data from Adult and Community Education of Martha's Vineyard (ACE MV) and the Martha's Vineyard Association of Emergency Medical Technicians. Data for adult education programs offered through the Martha's Vineyard Hospital, and for Dukes County residents participating in off-Island programs, was not available.

	2009	2010	2011	2012	2013	2014	2015	2016	2017
MVAEMT	24	11	20	20	16	10	30	28	19
ACE MV	548	714	699	639	646	832	859	437*	405*
<b>Total</b>	<b>572</b>	<b>725</b>	<b>719</b>	<b>659</b>	<b>662</b>	<b>842</b>	<b>889</b>	<b>465</b>	<b>424</b>

\*Drop in enrollment reflects ACE MV's updated 5-year strategic plan, which prioritizes credit-bearing programs and workforce development workshops.

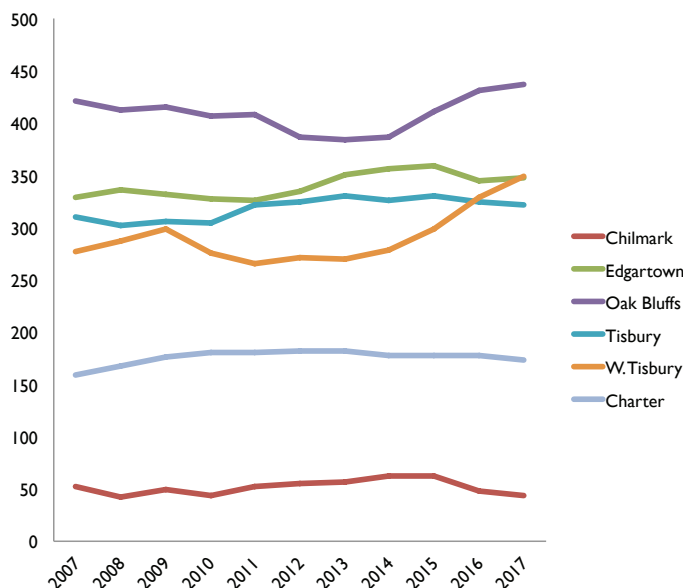
## School enrollment by Island school, 2007–2017

Source: Massachusetts Department of Elementary and Secondary Education

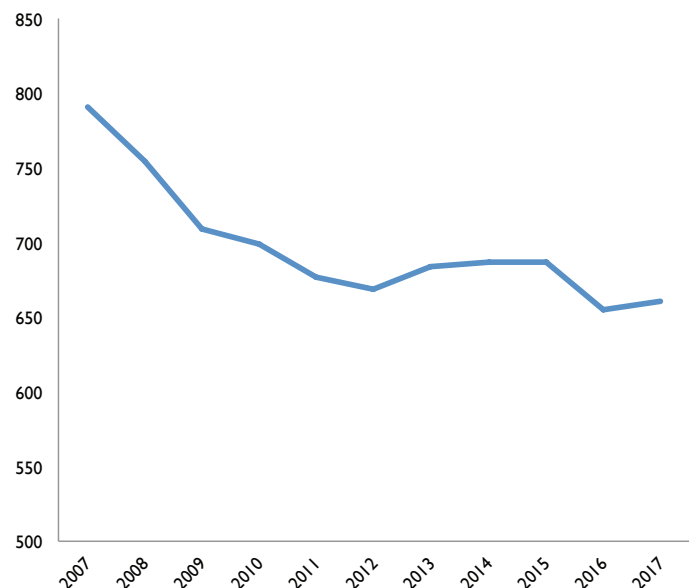
Public school enrollment on the Vineyard declined slightly between 2007 and 2017, but that's mostly due to a 16-percent decline in enrollment at the Martha's Vineyard Regional High School. Looking only at kindergarten through 6th grade, public school enrollment Islandwide grew by eight percent. Enrollment at the Martha's Vineyard Charter School, which includes kindergarten through 12th grade, grew by nine percent. The drop in high school enrollment may correspond at least partly to a more general drop in Dukes County residents ages 15–19 in recent years.

Year ending:	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Chilmark	52	42	49	44	52	55	56	62	62	48	44
Edgartown	329	336	332	328	326	335	350	356	359	345	348
Oak Bluffs	421	412	416	406	408	387	384	387	411	431	437
Tisbury	310	302	306	305	321	325	330	326	331	325	321
W.Tisbury	277	287	299	276	265	271	270	278	298	329	349
Charter	159	168	176	181	181	182	182	177	177	178	173
MVRHS	791	754	709	699	677	669	684	687	687	655	661
<b>Total</b>	<b>2,339</b>	<b>2,301</b>	<b>2,287</b>	<b>2,239</b>	<b>2,230</b>	<b>2,224</b>	<b>2,256</b>	<b>2,273</b>	<b>2,325</b>	<b>2,311</b>	<b>2,333</b>

School Enrollment, Minus High School



MVRHS Enrollment





## Enrollment by gender (percent of school), 2017–2018

Source: Massachusetts Department of Elementary and Secondary Education

	Chilmark	Edgartown	Oak Bluffs	Tisbury	W.Tisbury	MVRHS	Charter	Statewide
Male	54	48	49	53	55	51	46	51
Female	46	52	51	47	45	49	54	49

## Selected populations (percent of school), 2017–2018

Source: Massachusetts Department of Elementary and Secondary Education

According to the data, schools are notably more diverse than the Island at large, with a much higher percentage of Hispanic and Asian students, and a more even distribution of Native American students from town to town. In Edgartown, Oak Bluffs and Tisbury, the percentage of English language learners and students whose first language is not English far exceeded the state average. These trends may be the result of differences in reporting at schools compared to the community at large, but may also suggest that the county's racial and ethnic diversity is largely concentrated within a younger demographic.

	Chilmark	Edgartown	Oak Bluffs	Tisbury	W.Tisbury	MVRHS	Charter	Mass.
First language not English	0	30.8	21.8	33.7	6.8	15.3	6	20.9
English language learner	0	18.5	18.5	26.8	5.4	9.8	4.9	10.2
Students with disabilities	19.2	25.5	21.1	13.4	25	19.2	26.1	17.7
High needs	32.7	53.7	50.5	50	43.8	42	53.8	46.6
Economically disadvantaged	19.2	29.9	27.2	29.4	20.5	21.8	29.3	32

### Enrollment by race and ethnicity

African-American	0	3.2	4.9	3.3	1.1	3.6	3.3	9
Asian	0	0.3	1.6	0.7	0.9	1.4	1.1	6.9
Hispanic	3.8	19.6	23.7	25.5	7.1	13.1	10.3	20
Native American	3.8	2.6	1.6	2.3	3.4	2.1	2.2	0.2
White	80.8	69.8	60.8	59.8	81	74.9	73.9	60.1
Native Hawaiian, Pacific Islander	0	0	0.5	0	0	0.3	0	0.1
Multi-Race, Non-Hispanic	11.5	4.4	6.8	8.5	6.5	4.6	9.2	3.6

## Plans of high school graduates (percent of students), 2016–2017

Source: Massachusetts Department of Elementary and Secondary Education

The high percentage of Charter School students counted as having “other” plans is influenced in part by the fact that reporting was done prior to students knowing whether they were accepted to college.

	MVRHS	Charter	Statewide
4-year private college	35	42	30
4-year public college	30	0	31
2-year private college	1	0	1
2-year public college	10	8	19
Other post-secondary	4	0	2
Work	12	0	9
Military	0	0	2
Other	5	50	1
Unknown	2	0	5

